Wraparound Intensive Behavioral Supports (WIBS) Demonstration Project

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Overview

Overview

- I/DD and Autism
- Population Health Perspective
- Why WIBs?
- Brief overview of Wraparound with Intensive services (WISe)
- ABA Overview
- Benefits and Challenges of WIBs
- Next Steps

Brief overview: What, Who, Why, When

Libby Hein



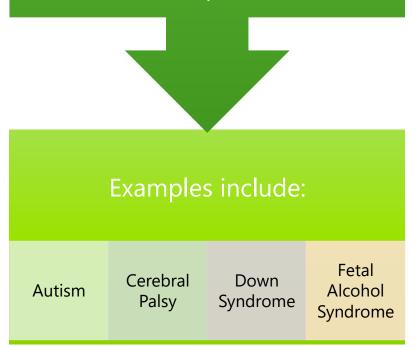
Wraparound with Intensive Behavior supports (WIBs)

Provides wraparound support for youth under age 21 with I/DD and mental health challenges with high-risk behaviors (self injurious and/or aggressive behaviors)

Intellectual <u>and/or</u> Developmental Disabilities (I/DD)



Differences that are usually present at birth and that uniquely affect the trajectory of the individual's physical, intellectual, and/or emotional development.



Centers for Disease Control (CDC)

Estimates that (1 in 6) or 17% of children aged 3-17 have one or more developmental disabilities as reported by parents

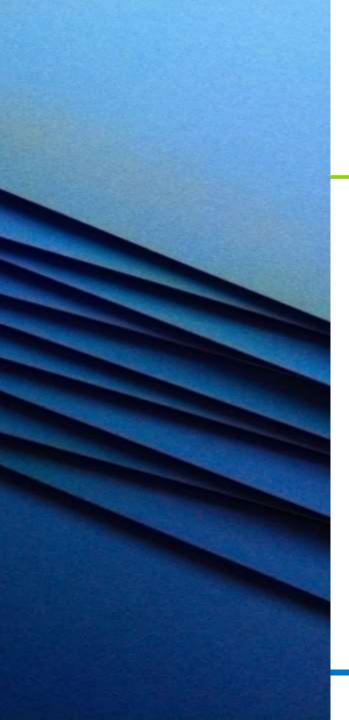
Site: CDC Work on Developmental Disabilities

Autism Spectrum Disorder

- Difficulty with social communication and interaction
- Restricted or repetitive behaviors or interests
- May exhibit
 - ► Intellectual Disability
 - Sleep Disturbances
 - Anxiety
 - Seizure disorders or epilepsy
 - Unusual eating
 - Irritability and Aggression
 - Digestive Disorders
 - Eye Contact
 - ▶ Others

Autism Spectrum Disorder

- Autism Spectrum Disorder
 - ► 2020 1 in 36 (2.8%) of 8-year-old children were identified with ASD by the Autism and Developmental Disabilities Monitoring (ADDM) Network



2022 Molina Data

8,822 Molina members who had a Dx of Autism

1,012 of members Dx with Autism also had a MH service

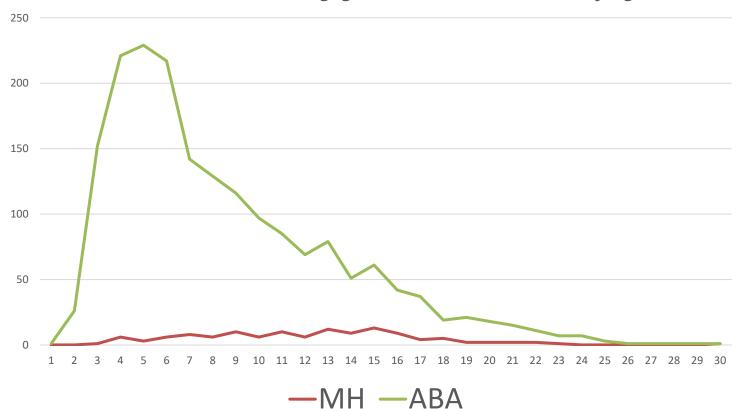
11.5% of members Dx with Autism also had a MH service

1,862 of members diagnosed with Autism received an ABA service in 2022

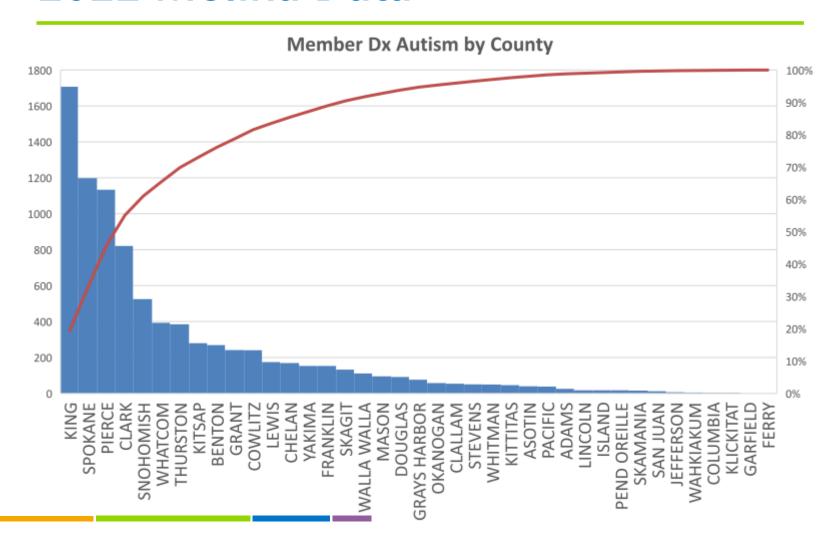
21% of members diagnosed with Autism in 2022 received an ABA service

2022 Molina Data

of Molina Members Engaged in ABA or MH Services By Age



2022 Molina Data



Why is WIBs important?

Limited scope/experience for current WISe providers

Limited scope for current ABA providers

Other systems of care involvement

Out of State Care (last resort)

Movement towards health equity, family centered, and community-based support.

Data informed

Partnership between Molina, HCA, ABA providers, WISe providers and other system partners to address this need.

Timeline

- Over the last year, working with team: HCA, MCOs, WISe providers, ABA providers to develop this demonstration project
- Two providers will be implementing
 - Lilac City Behavior Services (LCBS), Spokane
 - Connection
 Behavior Planning
 & Intervention,
 Kirkland
- May 2023 WIBs Go Live w/ LCBS

Every person's journey and needs are different. WIBs is designed to provide support for those families and youth who are interested in Applied Behavior Analysis and Wraparound support services.

Wraparound with Intensive Services (WISe)

Paul Davis



WISe overview

How WISe started

WISe team

WISe requirements

Child and Adolescent Needs and Strengths (CANS)

WISe service array examples

- For youth eligible for Apple Health (Medicaid)
- Team-based
- 24/7 outpatient crisis response
- Built on wraparound principles

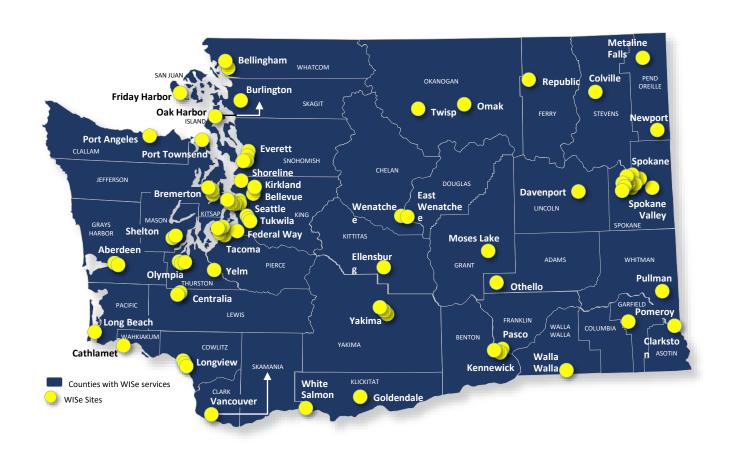
WISe service array examples

- Focused on medically necessary behavioral health services such as:
 - Individual therapy
 - Group therapy
 - Medication management
 - Family therapy
 - Peer support
 - Psychoeducation
 - ► Intensive care coordination

WISe service array examples

- WISe core services do not include (but may coordinate with other agencies that provide):
 - Personal care services
 - Respite
 - Applied behavioral analysis
 - Substance use disorder treatment
 - Physical health and dental services
 - Community and enrichment programs

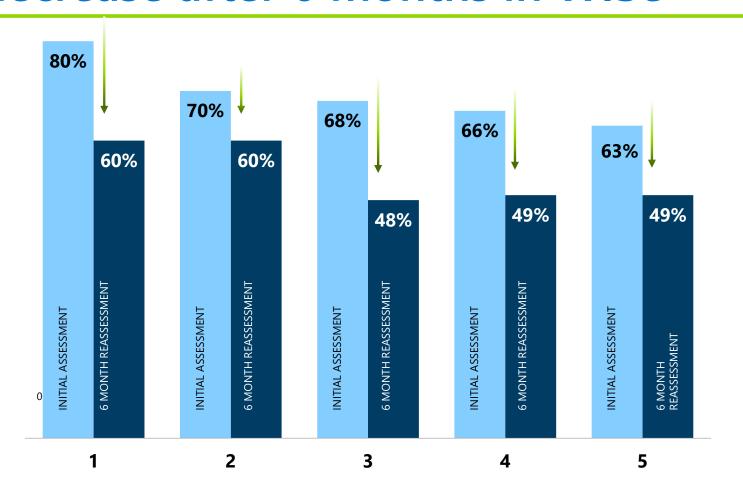
WISe provider sites



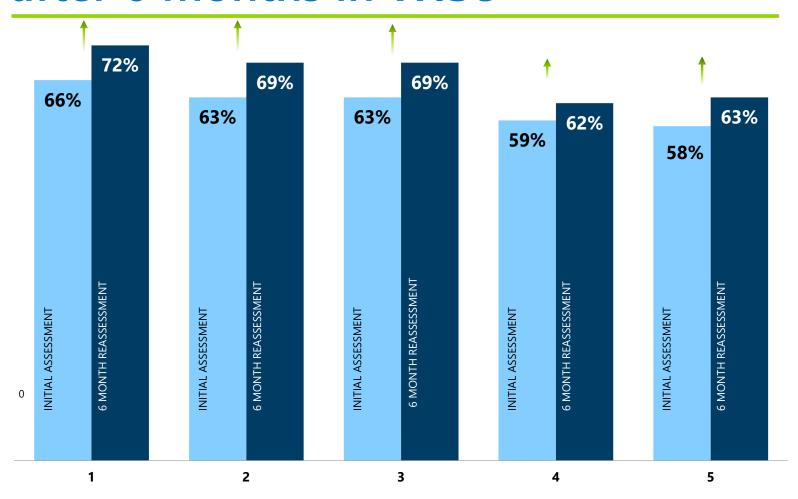
Child and Adolescent Needs and Strengths (CANS)

- A scale to quantify how a youth and their family are doing
 - Needs
 - > 0 = Not currently identified as a need
 - 1 = Potential or past need
 - > 2 = Current need
 - > 3 = Current need endangering the youth or family
 - Strengths
 - > 0 = Centerpiece strength
 - ➤ 1 = Strong strength
 - > 2 = Potential strength
 - ➤ 3 = Not currently an identified strength

Behavioral and emotional needs decrease after 6 months in WISe



Child and youth strengths increase after 6 months in WISe



Applied Behavior Analysis (ABA)

Jeffrey Kalles



Applied Behavior Analysis (ABA) Overview

- What is Applied Behavior Analysis (ABA)?
 - Foundation
 - Application
 - Effectiveness
 - Current Challenges
 - ► Future Development
- Applied Behavior Analysis / Mental Health Comparison & Contrast
 - Unit of Analysis
 - Terminology
 - Approach
 - Measurement
 - Effectiveness
- Proponents & Critics

Applied Behavior Analysis Overview

Pathway to care

- Centers of Excellence (COE) evaluation and Applied Behavior Analysis (ABA) prescription
- ABA provider develops assessment and treatment plan
- Start ABA services after medical necessity review (prior authorization)

WA Department of Health Applied Behavior Analysis provider types

- Licensed Behavior Analyst
- Licensed Associate Behavior Analyst
- Certified Behavior Technician

The following professions with a Behavior Analyst Certified Board

- Licensed Mental Health Counselor
- Licensed Marriage and Family Therapist
- Licensed Independent Clinical Social Worker
- Psychologist

ABA overview

Typical Therapeutic Process

- Assessment / Treatment Planning / Prior Authorization
- Staffing / Intervention
- Review / Reassessment / Reauthorization
- Mastery / Plateau of Progress / Discharge

Duration & Dosage

- Hours per day / week
- Enrollment Duration

Barriers to Effective Treatment

- Caregiver Support Needs
- Natural Support Needs
- Staffing / Turnover impacting care
- Minimal training in co-occurring MH disorders

ABA & WISE stressors/disconnects

Terminology

Client Need's

Provider perspectives

Therapeutic Approach

Contraindications

Perceived Benefits of WIBS

Opportunity for increased collaboration between WISE & ABA providers

Single point of supervision to iron out conflicting perspectives

Taking an ABA approach to change and analysis of progress

Break down barriers often associated with ABA alone.

WIBS implementation

- 12+ months of inter-agency development work
- 6 months application / licensure processing
- DOH, HCA, MCO interacting requirements
- Team training process

Measurement of impact

- Pre-post measures on Family Empowerment Scale
- Reduction of barriers during ABA treatment
- Ability to make quasi-experimental group comparisons between families who receive WIBS and families that receive ABA only
- Parent / Family / Caregiver perception of impact
- Ability to transition to less restrictive service models
- MCO & HCA impact metrics

Hurdles & next step



Review of effectiveness, challenges, areas for growth



Increase alignment between ABA approach and WIBS (WISE) required trainings



Advocate for WIBS specific requirements, training & licensure process which addresses the unique needs of the population served



What else?



Questions?

Jeff Kalles
Libby Hein
Paul Davis

