

**Questions from the Solano and Sonoma County Town Hall Meetings
(which were held on May 21, 2012 and May 24, 2012, respectively)**

CHOICE OF PROVIDER

1. We have been receiving in-home services and have been told they will end May 31. How can I ensure an easy transition to someone new since my son has been working with this current behavior analyst for the past year/year and a half?
2. What if my health care provider offers services outside of the area? i.e. services in Vacaville are not local for a Napa resident.
3. As of July 1st, when services have to be covered by Health Care will there be an option to continue with the current provider offering services? If no, will we have to be assessed again?
4. The rumor is that Kaiser has a contract with Easter Seals – what are the facts?
5. Will each health insurance agency determine their own providers and/or options for families?
6. Have insurance companies even started recruiting providers of service, provider web-sites, list of competent prescribers of services, etc?
7. Easter Seals put out an RFP for BEH providers without saying they were going to be exclusive with Kaiser. Now they have closed the RFP process. I am complaining to Kaiser directly.
8. How do we find a certified autism service provider?
9. Will parents be able to have a current provider apply to be a provider through insurance, if they are not currently part of their network?

TYPE OF INTERVENTION

1. Who determines the maximum hours of ABA? Does/will Kaiser, depending on the family plan –“cut” recommended hours?
2. How to manage/balance goals being met vs. recalibrating for more age appropriate goals?
3. How do I transition/bridge from one type of intervention to another (aba/ott social skills, for example).

4. Do self-help skills, i.e., toileting, showering, brushing teeth etc., fall under behavioral services?
5. Can parents access services from their insurance if they are using RC behaviorist for in-home support?

CO-PAYS/DEDUCTIBLES

1. Who do we go to for information on co-pays?
2. Will FCPP or Annual Fee (RC) count as co-pay?
3. Does Regional Center help with co-payments?
4. Will families who have private insurance be better off dropping this coverage if they can't afford co-pays? (If they have medi-cal as a secondary through institutional deemed waiver).
5. Is the regional center currently working on written guidelines around co-pays for clients who have an IPP?
6. Parents have shared their frustrations around their ability to afford repeated co-pays for SVCS.

DIAGNOSIS/BEHAVIORAL EVALUATION

1. What is involved in "assessment?"
2. Will Kaiser kids need to have a new evaluation if their ASD DX came from some entity other than R.C. or Kaiser?
3. Will the healthcare provider accept the original ADOS as the DX or will they require a new evaluation/screening?
4. Can the funder mandate assessment tools?
5. How will it be decided what is a "medical" need or service and what is an "educational" need or service?
6. What are qualifications of "approvers" "decision-makers" (as to severity of need, services to be provided, length of service and number of hours)?
7. How long will it take before they make a "lack of progress" decision toward a goal?
8. How can there be a "package" of services (i.e. Kaiser) when every student/child is different? (30 hours may not be the need for every child).

9. Will there be some kind of process developed (like IEP's) for consistency of service assessment and delivery?
10. Do we need to get a new diagnosis to receive services?
11. Is the diagnosis from NBRC transferrable to my health insurance and what is the process?

SHARING OF INFORMATION

1. Are all three agencies (school, NBRC and healthcare provider) clear on who each is responsible to provide? i.e. school will what RC should cover or HCP will know what school is responsible for?
2. What is the process or what will be allowed between education, health care and RC services?
3. Parents share treatment information about their children voluntarily to schools. What impact will this have on the student/child?

GAP IN SERVICES

1. I have been denied services by Regional Center. Am I going to have to continually qualify and re-qualify to obtain services for my child?
2. How will "autism-specific behaviors" be defined?
3. If we received behavioral services, which have stopped from the Regional center because of lack of progress, can we still get behavioral services through Insurance?
4. Will Insurance provide Behavioral supports for young adults entering the work force?

APPEAL PROCESS

1. Will NBRC require me to appeal a denial of services from my insurance company?
2. Determine one central appeal entity and state clearly to families on all denials.
3. Process for obtaining authorizations/denials when multiple payers.
4. How does it work differently for "institutionally deemed" children?
5. Kaiser: for an appeal, is it recommended to go through a "consultant"?

OTHER

1. Is there any age limit for behavior services?
2. Does Regional Center plan on continuing to support services that will be covered by Health Care until July 1st?
3. What will NBRC offer current clients as we transition to Health Care?
4. What happens if we are not covered? Who provides services?
5. What will NBRC be offering current clients once July 1st and become clients of health care?
6. If coverage is provided by more or services than one agency (such as NBRC or health care) who chooses which will provide?
7. Clarify responsible party since implementation is in phases. i.e. private insurance 2012 vs. medi-cal 2014.
8. People with Medi-cal, with a diagnosis of autism but don't qualify for Regional Center (due to not meeting all criteria) also do not qualify for county mental health services under Medi-Cal (it's listed as an exclusion)—How can a parent find help (i.e. who will pay for a child to participate in group therapy for socialization?)
9. How can NBRC help to make this process go more smoothly?
10. Why does the treatment plan have to be prescribed by a "physician and surgeon?"
11. Transition? What happens for the child-during the shift from one system to the other?
12. If my child has Kaiser for low income families and I pay \$8 month and she is eligible for Medi-cal, will Kaiser cover by child's ABA services? Or will Regional Center?