

Network Group/Agency – Attestation of Standards

In accordance with the North Carolina Autism Health Insurance Coverage Act (SB676), Blue Cross and Blue Shield of North Carolina (BCBSNC) has implemented standards for the provision of Adaptive Behavioral Treatment (ABT) for Autism Spectrum Disorders (ASD) for the treatment of ASD. Paraprofessional staff must be supervised by fully licensed behavioral health providers and that providers meet certain standards of training and experience to provide services to our members. BCBSNC requires the agency that employs the licensed providers and paraprofessionals or the licensed providers who supervise paraprofessional staff to attest that certain criteria are met for services to be considered medically necessary. BCBSNC requires this attestation be provided prior to the delivery of services to members.

Criteria for Fully Licensed Staff

Applicants must meet at least one of the following to be considered eligible to develop treatment plans, supervise staff and provide direct services:

1. Licensed Psychologist or Psychological Associate
2. Licensed Psychiatrist or Developmental Pediatrician
3. Licensed Speech and Language Pathologist
4. Licensed Occupational Therapist
5. Licensed Clinical Social Worker
6. Licensed Professional Counselor
7. Licensed Marriage and Family Therapist

Licensed providers must attest to treatment of autism spectrum disorders and must attest to having received training in evidence based modalities that include one of the following:

1. Accredited college- or university-based courses
2. Workshops, seminars, conferences either in person or online
3. Supervised work experience with ASD
4. Worked as a supervisor of ASD treatment
5. Published peer-reviewed articles about ASD treatment

Criteria for Paraprofessional Staff

Applicants must meet criteria 1 and 2 and either 3 or 4 to be qualified to provide ABT services under the supervision of a licensed provider:

1. Be at least 18 years of age
2. Be under the active supervision of a qualified and licensed provider as indicated above.
3. Currently hold national certification by the Behavioral Analysis Certification Board (BACB) as a Board Certified Behavioral Analyst at the master's or doctoral level or a Board Certified Assistant Behavioral Analyst or a Registered Behavioral Technician; or
4. Must be able to provide documentation of the following:
 - a) Has been formally training in North Carolina's legal and ethical requirements for confidentiality
 - b) Has been formally trained in the exceptions to North Carolina's confidentiality requirements for the mandated reporting of suspected abuse or neglect
 - c) Has been formally trained in the professional conduct and ethics
 - d) Has documented coursework (didactic, literature derived) or training in the provision of ABT
 - e) Has documented mastery of the techniques of an empirically supported ABT plan

f) Is receiving documented, ongoing supervision by the licensed clinician for all ABT services provided

I hereby certify that all information contained in this document is true and accurate. I further understand that any information entered in this document that subsequently is found to be false may result in termination of any agreement that I have or may enter into with Blue Cross of North Carolina. I agree to maintain professional liability insurance coverage as provided in this document.

I hereby give permission and consent for BCBSNC and/or its designee, to obtain and verify information provided in this form and consent to the release by any person, organization or other entity BCBSNC and/or its designee, of all information relevant to the evaluation of my ability to render clinical services in a cost-effective manner and my moral and ethical qualifications, and agree to hold harmless any such person or organization from any cause of action based on the release of such information to BCBSNC and/or its designee.

Organization Name

Signature

Title

Print Name

Date