



OFFICE OF THE ASSISTANT SECRETARY OF DEFENSE
WASHINGTON, DC 20301-1200

HEALTH AFFAIRS

OCT 25 4 10

The Honorable Carl Levin
Chairman, Committee on Armed Services
United States Senate
Washington, DC 20510

Dear Mr. Chairman:

The enclosed semiannual report provides the current status of the Department of Defense Enhanced Access to Autism Services Demonstration as requested by the Joint Explanatory Statement accompanying S. 3001, the National Defense Authorization Act for Fiscal Year (FY) 2009. Specifically, this report includes: 1) the number of autistic children served; 2) the type and frequency of services provided; 3) the number of available providers by region; and 4) whether reimbursement levels are sufficient to retain qualified providers in TRICARE networks. The report also includes Demonstration cost information for FY 10. Current results indicate continued increase in participation in the demonstration by providers and TRICARE beneficiaries.

Thank you for your interest in helping support our Service members and their families.

Sincerely,

George Peach Taylor, Jr., M.D.
Deputy Assistant Secretary of Defense
(Force Health Protection and Readiness)
Performing the Duties of the
Assistant Secretary of Defense
(Health Affairs)

Enclosure:
As stated

cc:
The Honorable John McCain
Ranking Member



OFFICE OF THE ASSISTANT SECRETARY OF DEFENSE
WASHINGTON, DC 20301-1200

HEALTH AFFAIRS

The Honorable James H. Webb
Chairman, Subcommittee on Personnel
Committee on Armed Services
United States Senate
Washington, DC 20510

OCT 25 2009
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cc:
The Honorable Lindsey O. Graham
Ranking Member



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HEALTH AFFAIRS

OCT 25 2009

The Honorable Daniel K. Inouye
Chairman, Committee on Appropriations
United States Senate
Washington, DC 20510

Dear Mr. Chairman:

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Enclosure:
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cc:
The Honorable Thad Cochran
Ranking Member



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WASHINGTON, DC 20301-1200

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OCT 25 2009

The Honorable Daniel K. Inouye
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Committee on Appropriations
United States Senate
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Ranking Member



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HEALTH AFFAIRS

OCT 25 2010

The Honorable Ike Skelton
Chairman, Committee on Armed Services
U.S. House of Representatives
Washington, DC 20515

Dear Mr. Chairman:

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Enclosure:
As stated

cc:
The Honorable Howard P. "Buck" McKeon
Ranking Member



OFFICE OF THE ASSISTANT SECRETARY OF DEFENSE
WASHINGTON, DC 20301-1200

HEALTH AFFAIRS

OCT 25 2010

The Honorable Susan Davis
Chairwoman, Subcommittee on Military Personnel
Committee on Armed Services
U.S. House of Representatives
Washington, DC 20515

Dear Madam Chairwoman:

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Enclosure:
As stated

cc:
The Honorable Joe Wilson
Ranking Member



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WASHINGTON, DC 20301-1200

HEALTH AFFAIRS

OCT 25 2010

The Honorable David R. Obey
Chairman, Committee on Appropriations
U.S. House of Representatives
Washington, DC 20515

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Enclosure:
As stated

cc:
The Honorable Jerry Lewis
Ranking Member



OFFICE OF THE ASSISTANT SECRETARY OF DEFENSE
WASHINGTON, DC 20301-1200

HEALTH AFFAIRS

OCT 25 2009

The Honorable Norm Dicks
Chairman, Subcommittee on Defense
Committee on Appropriations
U.S. House of Representatives
Washington, DC 20515

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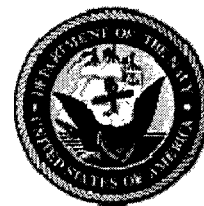
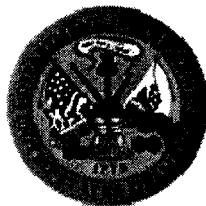
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cc:
The Honorable C. W. Bill Young
Ranking Member

Report to Congress



Semiannual Report on the Status of the Department of Defense
Enhanced Access to Autism Services Demonstration

REPORT TO CONGRESS

STATUS OF THE DEPARTMENT OF DEFENSE ENHANCED ACCESS TO AUTISM SERVICES DEMONSTRATION

INTRODUCTION

This third semiannual report is in response to the Joint Explanatory Statement to accompany S. 3001, the Duncan Hunter National Defense Authorization Act (NDAA) for Fiscal Year (FY) 2009. The Joint Explanatory Statement requested that the Secretary provide an initial report to Congress not later than 90 days after the enactment of S. 3001 and semiannually thereafter on the status of implementation of the TRICARE demonstration.

BACKGROUND

In response to Section 717 of the John Warner NDAA for FY 2007, the Department of Defense implemented the Enhanced Access to Autism Services Demonstration (“Demonstration”) on March 15, 2008. This project tests the feasibility of expanding the pool of providers of autism treatment services to include those not meeting the strict guidelines of the current departmental regulations.

Autism spectrum disorders (ASD) affect essential human behaviors, such as social interaction, the ability to communicate ideas, feelings, and imagination, and the establishment of relationships with others. ASDs vary by age of onset, type, and severity of symptoms—and generally have lifelong effects.

Services for beneficiaries with autism include intensive behavioral interventions along with support and reinforcement by parents, caregivers, and teachers. Although several interventions have been introduced to remediate the effects of ASD, few are supported by the test of time and formal peer-reviewed studies with strong design. Nor is there consensus among educational and medical professionals on the weekly intensity of interventions that produce relevant outcomes. However, the collective opinion of those professionals favors early entry into an intensive program; the use of planned teaching opportunities organized around relatively brief periods of time (e.g., 15- to 20-minute intervals), especially for the younger children; and sufficient amounts of adult attention in one-to-one or very small group instruction settings to meet individualized goals.

Applied Behavior Analysis (ABA), a widely used intensive intervention for ASD, is a systematized process of collecting data on a child’s behaviors and using a variety of behavioral conditioning techniques to teach and reinforce desired behaviors while extinguishing harmful or undesired behaviors. In practice, time-limited, focused ABA applies behavioral principles to shape behaviors and teach the individual new skills.

TRICARE recognizes ASD as a neurobiological condition that requires both medical and educational management. For children with an ASD, the TRICARE Basic Program covers medically or psychologically necessary services, such as physician office visits, immunizations, psychological testing, and interventions such as speech therapy, physical therapy, and occupational therapy. The TRICARE Extended Care Health Option (ECHO) has authority to augment those benefits with other services such as behavioral interventions provided by ABA.

TRICARE can reimburse only “TRICARE-authorized providers” for their services. Within the ECHO, authorized providers are those who provide certain services and who meet all applicable licensing or other regulatory requirements of the jurisdiction where the ECHO benefit is rendered, or in the absence of such requirements, alternative requirements as determined by the Director, TRICARE Management Activity. Lacking such licensing or regulatory requirements for ABA services, the Department adopted certification by the Behavior Analyst Certification Board (BACB) as demonstrating that the provider of ABA services possesses the education, training, and experience necessary to render and be reimbursed for ABA services. However, due to the limited number and uneven distribution of certified ABA providers across the country, this resulted in a shortage of qualified ABA providers for TRICARE beneficiaries.

To increase access and test the advisability and feasibility of authorizing TRICARE reimbursement for ABA services delivered by non-professional providers, the Department developed and implemented the Enhanced Access to Autism Services Demonstration. The key feature of the Demonstration is providing Educational Interventions for Autism Spectrum Disorders (EIA) by a two-tiered delivery model:

- BACB-Certified Behavior Analysts (BCBA) and BACB-Certified Assistant Behavior Analysts (BCaBA) as “supervisors” who have a contractual relationship with TRICARE, either individually or as an employee of a TRICARE-authorized provider; and
- Non-certified individuals, i.e., “Tutors” as the “hands-on” providers of ABA under the supervision of a BCBA or BCaBA.

The Demonstration was initially implemented on March 15, 2008. Administrative requirements of the Demonstration were substantially revised and implemented on September 10, 2008. In addition, Section 732 of the NDAA for FY 2009 increased the limit of government liability for certain benefits, including Special Education, from \$2,500 per month to \$36,000 per year. That change was implemented on April 1, 2009.

RESULTS

The following information for the period October 1, 2009 through March 31, 2010, is based on contractors' reports and claims processed under the Demonstration.

Region	Number of Beneficiaries Enrolled in Demonstration	Providers		Hours of EIA Services Provided ¹ (000s)	Cost of EIA Services Provided ² (Dollars in Millions)
		Supervisors	Tutors		
North	461	185	612	55.9	3.0
South	383	258	736	52.0	2.4
West	903	324	2,358	138.8	6.6
TOTALS	1,747	767	3,706	246.7	12.0
Increase over FY 2009 Totals	41.2%	22.3%	27.3%	16.9%	14.3%

CONCLUSION

As evidenced in our previous reports and the above information, participation by beneficiaries and providers continues to increase steadily. We believe this reflects that reimbursement rates are acceptable to providers and promote the level of services required to meet the needs of enrolled TRICARE beneficiaries.

¹ Does not include: ASD-related diagnostic services provided outside the Demonstration, development of EIA Progress Reports and Updated Behavior Plans, and Supervisors' meetings with beneficiaries' primary caregivers.

² Claims processed through June 30, 2010.