

I HAVE MEDI-CAL – HOW DO I GET TREATMENT FOR AUTISM?

Medi-Cal to Cover Behavioral Health Treatment for Autism Starting September 15, 2014

Who is eligible? Any individual age 0-21 who has Medi-Cal as primary or secondary insurance. We hope to get the benefit extended above age 21 in the future.

What kind of treatment can I get? The benefit includes “Behavioral Health Treatment (BHT), including applied behavior analysis and other evidence-based behavior intervention programs that develop, or restore, to the maximum extent practicable, the functioning of an individual with a diagnosis of Autism Spectrum Disorder (ASD). Treatment includes the development of a treatment plan at the expense of the Managed Care Plan. Speech, occupational and physical therapy are also covered benefits through Medi-Cal as well as psychology, psychiatry and counseling services

How do I get treatment? Contact your Medi-Cal Managed Care Plan (e.g., Kaiser, Anthem BlueCross, LACares, Health Plan of San Mateo) . The number is on the back of your insurance card. Ask the plan what is necessary to get behavioral health treatment. Also contact your primary care physician and ask for a referral for behavioral health treatment.

What if I don’t have a Medi-Cal Managed Care Plan but have a fee for service plan instead or don’t know what kind of Medi-Cal plan I have? Call the number on the back of your insurance card and ask how to access treatment. Ask your primary Care physician how to access treatment. E-mail ABAInfo@dmhc.ca.gov for help.

How long will it take to get treatment? Managed Care Plans must provide timely access to care which for mental health services is 10 calendar days. The creation of this benefit is fast, so all plans may not have provider networks established on day one and some patience may be required at first. However plans are still obligated to provide timely treatment even if they need to arrange care through a non-network provider.

What if I don’t have a diagnosis? Ask your managed care plan and primary care for a referral for an autism evaluation. Again waiting lists are not permissible longer than 10 days. Your child should be able to start treatment without a comprehensive diagnostic evaluation if an evaluation is not immediately available. If you have any problems, file a complaint as described above.

What if my child is already getting treatment through the regional center? At this time your child will continue to be able to receive treatment through the regional center for the foreseeable future. If you are not receiving adequate treatment from the regional center, contact your managed care plan and request treatment.

What if my child is already getting treatment from another source? Your child will be entitled to continuity of care up to 12 months. You should request to keep your same provider.

What do I do if I am put on a waiting list, told treatment is not available or have any other problem?

1. File a grievance with your health plan. If you do not file a grievance there is no evidence you are dissatisfied. You are much more likely to get treatment if you file a complaint and health plan cannot retaliate
2. Send an e-mail to the Department of Health Care Services (ABAInfo@DHCS.CA.GOV) and register a complaint
3. Please CC the advocates (MediCalAutismBenefit@yahoo.com) on the e-mail to DHCS so we can track the issues families encounter and develop solutions.
4. Call the Department of Managed Health Care (DMHC) at 888- 466-2219 and register a complaint. It is important that you do all the above steps because it will not be clear which agency regulates your plan’s provider network.