

ABA Therapy Initial Intake Process Overview

The following is an overview of the initial intake process, including the documents you will be reviewing and completing with the Autism Services team.

- Referral: No specific referral from a medical professional is needed. This step may include contacting us via email, our website, or by phone. Completing the ABA Services Questionnaire on our website is the fastest way to get started.
- 2) Initial Intake Call with Clinical Team: This is an introductory phone call to gather relevant information and discuss what ABA services with UCP Heartland may look like. This will include submitting your availability for services to determine if we have an available opening.
- 3) **Verification of Insurance:** If utilizing insurance, verification of benefits/eligibility check with your insurance company. To complete this process, the team will require a copy of a current insurance card, the primary subscriber's name and date of birth, and a copy of the diagnostic evaluation report.
- 4) Schedule initial assessment: Your initial assessment will be scheduled for 2 weeks from your completed verification of insurance. During this time, the team will obtain pre-approval for the assessment process from your insurance company, if applicable. If approval is received prior to the 2-week date, you will be contacted, and your appointment date may be moved to an earlier date.
- 5) Initial Assessment with Clinical Team: This process will occur over a 4-hour scheduled appointment and will include an in-depth parent interview, observation of the client, and direct assessment with the clinical team. During this time, the clinical team will conduct the direct assessment with your child, and the Program Manager will guide you through completing initial intake documents if they are not completed prior to the assessment appointment. Additional assessment appointments may be scheduled if more information is needed to develop your child's treatment plan.
- 6) **Treatment Plan Development:** During your initial assessment appointment, the Program Manager will schedule a 'Treatment Plan Review' meeting with you for 10 days out from the initial assessment date. During these 10-days, the clinical team will compile the initial assessment data and draft an initial treatment plan.
- 7) **Treatment Plan Review:** During the review meeting the clinical team will review initial assessment data and the proposed treatment plan. The parents will be given the opportunity to provide feedback on any goals. Informed consent for treatment will be reviewed with parents/guardians. A tentative start date and therapy schedule will be discussed and will begin when treatment authorization is obtained from the insurance company.
- 8) **Insurance approval:** Pre-approval for ongoing treatment from your insurance company, if applicable. The timeline for approval varies based on the payor and may take anywhere from one day to several weeks.
- 9) Initial Service date: Therapy will begin based on the agreed upon schedule when treatment authorization is received. Direct therapy will be implemented by the Registered Behavior Technician (RBT) in the therapeutic environment and under the supervision of the Board-Certified Behavior Analyst (BCBA). Caregivers will participate in family guidance sessions at least one time per month or as scheduled by the clinical team. The first family guidance session will be scheduled for 1 month from the initial date of services.
- 10) **Re-assessment & Re-authorization:** Quarterly or bi-annual re-assessment will occur to determine rate of progress and inform treatment modification. An updated treatment plan that

includes data on current treatment goals, mastered treatment goals, and new treatment goals will be created and reviewed with the parents/guardians. Re-authorization of therapy will occur following re-assessment as indicated by the re-assessment results and progress. This typically occurs every six months but may happen at varied intervals, as dictated by the payor. This process is similar to the initial treatment authorization and the length of time it takes to be approved varies. Every effort will be made on UCP Heartland's behalf to submit the request well in advance of the authorization end date.

11) **Transition/Discharge:** Planning to transition will be discussed from the onset of therapy. It is important that all parties have a clear vision of the long-term goals for the client to ensure we are continually working toward that shared vision. Transition/discharge planning will be reviewed with every treatment plan update to ensure the goals continue to be relevant for the client. A plan for the reduction of treatment hours based on achieving client-specific milestones will be included and regularly reviewed with the family. The discharge planning process will not be abrupt and should be creative and modified collaboratively.

Intake Quick Reference:

Contact Information:

Name	Position	Direct Phone	Email
Autism Services	N/A	314-943-1179	autismservices@ucpheartland.org
John Gallardo	Program Manager	314-943-1179	gallardoj@ucpheartland.org
Erykah McClendon	Director of Autism	(314) 339-	mcclendone@ucpheartland.org
	Services	6959	
ShiQuita Lane	VP of Children &	(314) 994-	lanes@ucpheartland.org
	Family Services	1600	-

The UCP Heartland Autism Services Clinic is located at:

Columbia: 25 South Fourth Street Columbia, MO 65201

St. Louis: 6325 Clayton Ave, St. Louis, MO 63139