# How to Access an Evaluation for Autism via Regional Center and Insurance

# What is an Autism evaluation and why is it important?

Autism, or autism spectrum disorder (ASD), refers to a broad range of conditions characterized by challenges with social skills, repetitive behaviors, and communication. Autism affects an estimated 1 in 36 children.<sup>1</sup>

Signs of Autism usually appear by age 2 or 3. Some associated development delays, such as a social, motor or speech delay, can appear even earlier, and often, it can be diagnosed as early as 18 months. However, because Autism has many different presentations and can be similar to other developmental, mental health or genetic conditions, it is common that it is not identified till children are older.<sup>2</sup>

Autism is a spectrum disorder which means that each child has a distinct presentation. It is common for children with Autism to also have mental health challenges such as anxiety, depression, attention issues, as well as intellectual challenges or genetic disorders. Many children with Autism have sensory sensitivities and medical issues such as gastrointestinal (GI) disorders, seizures or sleep disorders. In addition, there is significant overlap in the symptoms of Autism and other developmental, genetic or mental health diagnoses, such as ADHD, anxiety, sensory processing disorder, or intellectual delay. Therefore, diagnosis of Autism can be complex and requires a thorough evaluation and clinical expertise.<sup>3</sup>

The state recommends that all children who are showing signs of developmental concerns such as Autism receive a comprehensive evaluation in a timely and efficient manner via Regional Center and/or their insurance. A comprehensive evaluation includes assessing a child in multiple areas, such as communication, social skills, behavior, motor skills, and ability to complete daily tasks. An evaluation often includes interviews with the family, gathering medical and developmental history, observation and use of formal screening tools such as the ADOS-2. Research shows that identification and intervention lead to positive outcomes later in life for people with Autism.<sup>4</sup>

<sup>&</sup>lt;sup>1</sup> https://www.autismspeaks.org/what-autism

https://www.autismspeaks.org/what-autism https://www.dds.ca.gov/wp-content/uploads/2019/03/Autism BestPractices2 20190308.pdf

<sup>&</sup>lt;sup>3</sup> https://www.autismspeaks.org/what-autism https://www.dds.ca.gov/wp-content/uploads/2019/03/Autism BestPractices2 20190308.pdf

<sup>&</sup>lt;sup>4</sup> https://www.autismspeaks.org/what-autism https://www.dds.ca.gov/wp-content/uploads/2019/03/Autism\_BestPractices2\_20190308.pdf

Click here to learn more about Autism.

Click <u>here</u> learn more screening and diagnosis of Autism.

### **Contact Regional Center**

- 1.Click <u>here</u> to find your local Regional Center.
- 2. Regional Centers conduct screening and evaluation for Autism. Most Regional Centers have two different assessment processes for children under 3 and children 3 and older.
- 3. Children under 3 are eligible for screening for ASD and other developmental delays at all Regional Centers through the Early Start program. If they meet criteria for a developmental disability, they are able to access a number of services such as preschool, speech therapy and behavior therapy via Regional Center up till their third birthday. Starting at age three, children are evaluated again by the school district and receive services via the school district. Click <a href="here">here</a> to learn more about the Early Start program at Regional Center.
- 4. For children age 3 and older, Regional Centers screen and assess for Autism. Most Regional Centers have a long waitlist for an evaluation for children over 3. It is recommended to complete initial paperwork to be waitlisted for an assessment with your Regional Center and outreach to your insurance company who is required by the state to provide a timely referral for evaluation.
- 5. A child age 3 or 4 who is delayed in certain areas may qualify for Regional Center services under provisional eligibility even if they don't meet full criteria for ASD or another developmental disability. Click here for more info about provisional eligibility.
- 6. School districts do not usually diagnose ASD. Children with Autism will qualify for services for an IEP (Individual Education Plan) under different criteria such as autistic-like learning.

#### Contact insurance and request case management

- 1.Contact the behavioral health department of your insurance and ask for an Autism evaluation. Tell them if you have tried on your own and request a case manager.
- 2. A case manager should contact you within a few days. They help you find providers with current openings.

#### Obtain a timely referral from your insurance

- 1. Inform the case manager of your knowledge of the timely access to care rule that requires insurance companies to provide an appointment for an ASD evaluation in 15 days. Click here to learn more.
- 2.If necessary, ask your child's primary care provider to contact the case manager regarding your symptoms and treatment needs.

- 3. If it is urgent, your primary care provider can request that the appointment be sooner.
- 4. If the case manager cannot find a provider in their network, the insurance company is required to find and pay for an out-of-network provider at no additional cost to you. Click <a href="here">here</a> to learn more.
- 5. Your health plan cannot charge more for an ASD evaluation than for physical health conditions. Click here to learn more.

#### Seek Help if not provided a timely referral

- 1. <u>Make a complaint</u> with your insurance company and request to speak with a manager.
- 2. For Medi-Cal and HMO plans, <u>make a complaint</u> online with the Department of Managed Health Care if the issue is not resolved 30 days after making a complaint with your insurance company. If urgent, you can do it right away.
- 3. For PPO plans, <u>make a complaint</u> with the Department of Insurance if the issue is not resolved 30 days after making a complaint with your insurance company. If urgent, you can do it right away.
- 4. Consider contacting your local <u>Office of Disability Rights</u> or other advocacy organization.

# **Other Tips**

- 1. Document the date, time, contact person and content of all calls.
- 2. Follow up frequently.
- 3. Request email contact with case manager.
- 4. If a provider is not available in your primary language, you have the right to an interpreter from your insurance company for your evaluation.<sup>5</sup>
- 5. Patients with commercial insurance must be offered an appointment within 60 minutes or 30 miles from their home. For Medi-cal patients in rural counties, patients must be offered an appointment within 60 miles/90 minutes. In small counties, patients must have an appointment within 45 miles/75 minutes. In large counties, patients must have an appointment within 15 miles/30 minutes.

<sup>&</sup>lt;sup>5</sup> https://www.dmhc.ca.gov/Portals/0/Docs/DO/TAC accessible.pdf

<sup>&</sup>lt;sup>6</sup> https://www.chcf.org/publication/network-adequacy-standards-ca-how-they-work-why-they-matter/

<sup>&</sup>lt;sup>7</sup> https://healthconsumer.org/wp/wp-content/uploads/2016/10/050718-1-mcal-net-ad-final-Managed-Care-in-California-Series-UPDATED.pdf

- 6. The cost cannot be greater than any other physical health treatment when it comes to out-of-pocket costs.<sup>8</sup>
- 7. If you have concerns once you have an evaluation, communicate concerns with your service provider and their supervisor. If needed, you can also inquire about how to file a complaint with their agency, with your insurance, or with the Department of Managed Health Care.

<sup>8</sup> https://www.dmhc.ca.gov/Portals/0/Docs/DO/MentalHealthFactSheet.pdf