EXHIBIT D

HOW CAN I CONTINUE RECEIVING ABA SERVICES FOR MY CHILD WITH AUTISM?

PRESENTORS: RACHEL DODSON AND JESSICA LENEHAN, BCBA

ELLA GRACE

This is our daughter, Ella Grace. Ella is 9 years old. She has level 3 Autism and was diagnosed non-verbal in 2022.

She also has Juvenile Idiopathic Arthritis, EoE, and severe eczema.

Ella takes **18 pills/ doses of liquid medication a day** to remain in medical remission

I am advocating for change on her behalf for how insurance providers communicate with families, how they allow families to participate in their own care, and how they determine any child's needs

ELLA'S HISTORY OF ABA

- Beginning services in Pre-K
- Public school
  - ABA helped assess her skills more accurately
  - IEP amended
- Current school

Ella’s Progress with ABA

SCHOOL

- Increased duration of sitting and attending
- Increased participation

HOME

- Participate in family meals and home and community activies
- Hygiene skills
- Express her wants

HEALTH

- Express her needs
- Medication management / prevent over-medicating

Ella’s Current Needs

SCHOOL

- One-on-one attention for safety and dignity
- Increasing her ability to participate with only a teacher and paraprofessional needed

HOME

- Better, more consistent communication
- Safety

HEALTH

- Improve communication
- Working with medical providers to treat her medical needs

INSURANCE DIFFICULTIES

- Ella had ABA:
  - In her pediatric day program
  - In her kindergarten while attending public school
  - At home
  - At church
  - In her current classroom
- Denial example

INSURANCE DIFFICULTIES

Most recent reauthorization

- “Physician review”
- BCBA optional
- Insurance Carrier/Parent are not allowed to be a part of advocating for their child’s services
- No communication from the insurance provider

“Evidence of failure at a lower level of service intensity should not be required to access a higher intensity of care.”

INSURANCE

- Unclear feedback
- Out of pocket costs
- Varying timelines and guidelines for each insurance provider
  - BCBS - Lucet
  - Medicaid
- Changing guidelines
- Inconsistent feedback

From Ella's most recent Lucet decision:

Dear ELLA DODSON:

Lucet performs managed behavioral healthcare services on behalf of Health Advantage for ARBenefits.

This letter confirms that Lucet has determined that Applied Behavioral Analysis (ABA) services beginning on July 15, 2026 to January 15, 2027 at KRYSTLE POPE are medically necessary.

Please be aware that any approval only determines that the requested service meets the specific criteria or policy for coverage and does not guarantee payment of benefits. Payment is also subject to the terms of your health plan policy at the time the services are delivered and benefit limitations and/or exclusions.

However, Lucet has also determined that Applied Behavioral Analysis (ABA) services on January 16, 2027 through completion of treatment at KRYSTLE POPE are not medically necessary based on the information provided to us.

We were unable to obtain from your provider the information necessary to approve the level of care requested. After reviewing the Lucet Medical Necessity Criteria for Autism Spectrum Disorders Behavioral Therapy Criteria that takes into account clinical needs, progress of treatment, diagnosis, and other programs available, we have determined your care can be provided in an alternative setting such as Autism Spectrum Disorders Behavioral Therapy which is not available at the current facility:

Krystle Pope, BCBA asked for approval to provide care for you. Your provider asked for special treatment for you using ABA. Your provider gave us information. You do not need the full amount of

CARE DECISIONS

- Transition / Fading plan
  - Includes criteria to reduce hours over time
  - Criteria has not been met
- Fading too soon can result in:
  - Regression in skills
  - Increase in challenging behaviors. For Ella, these are a safety concern.

Council of Autism Service Providers, *Applied Behavior Analysis Practice Guidelines for the Treatment of Autism Spectrum Disorder*

"Multiple studies have shown that **30–40 hours of direct treatment per week** produce better outcomes than treatment at lower dosages in comprehensive programs for young children with autism. Similar intensities would typically be medically necessary in comprehensive programs for adolescents and adults to meet treatment objectives.

Focused ABA typically involves fewer domains than comprehensive treatment models, with services often comprising 10–25 hours of direct treatment per week.

However, **there are exceptions.** For example, **treating challenging behaviors or severe feeding concerns that threaten the patient's health and safety or significantly interfere with their progress** may be so complex that it requires substantial intensity to achieve an acceptable outcome (i.e., greater than 10-25 hours of direct treatment per week)." (pg 33-34)

Conclusion

- Denial of Entire Behavior Plan in February by Medicaid
- Lucet asked for a “fading out” plan for Ella 4 months later, one month after winning Appeal
- A few weeks later Lucet referred her plan to Physicians Review
- Now Ella Grace has lost 9 hours of services a week. I reached out 4 days later after not receiving a call about the determination of the review. A letter arrived in the mail the following day.
- The BCBA’s justification when reading Ella’s plan-medical necessity
- It is important to note, insurance has never observed Ella in person. Having Ella’s BCBA who works with Ella weekly and collects data-it was optional for her to attend the meeting

Change needs to happen in the ways insurance providers communicate with families, how they allow families to participate in their own care, and how they determine any child's needs