Applied Behavioral Analysis (ABA)

What is ABA?

Applied Behavioral Analysis (ABA) is a therapeutic strategy most often used for people with autism and autism-related disorders that uses positive behavior reinforcement to help individuals understand, navigate, and regulate their own behavior and/or tasks of daily living. Whether it’s learning to communicate through conversation or assistive technology, regulating behavior, or learning independent living skills like getting dressed, riding the bus, or making a sandwich, ABA breaks down skills in a step-by-step process that ensures children and teens with autism actually learn and retain those skills. When we increase the social and self-directed abilities of children and teens with autism, it not only leads to a greater quality of life for that individual, but often, less reliance on services and supports as an adult.

Teaching children with autism can be a very time-consuming and painstaking process due to the need for customized programming which includes developing a treatment plan and curriculum while constantly monitoring for progress towards the child’s goals. Although ABA may require a significant amount of time in comparison to other therapies such as speech or occupational therapy, the benefits can be astonishing.

What is the Texas Medicaid IBI benefit?

Intensive Behavioral Intervention (IBI) was created as a Medicaid benefit during the 86th Texas Legislative Session in 2019 for children and teens with autism. IBI is another term for ABA that was created to distinguish the Children's Autism Program (CAP) from ABA therapies. CAP is another program at the Texas Health and Human Services Commission (HHSC) that provides a smaller variety of more focused interventions for children with autism ages 3-15.

Rider 32

Rider 32 was passed into law in 2019 as part of the State of Texas budget (HB 1) for the years 2020 - 2021. This Rider provides legislative directive and intent for HHSC to add a Medicaid benefit for children with autism under the age of 20. In addition, the Rider also specifies that the funds for the program may be used from the Children’s Medicaid Program, a large pool of funds of over $5.5 billion. At this time, HHSC estimates needing approximately $8 million dollars until the next budget to implement the program. However, HHSC has not released the rules for the program, has not set reimbursement rates for therapists, or set up a program to credential potential providers who could provide these therapies. In short, HHSC should have, but has not yet, made this program available to thousands of children using Medicaid who desperately need (and deserve) access to IBI/ABA therapies.

Rider 32. Intensive Behavioral Intervention. Contingent on the Health and Human Services Commission (HHSC) adding intensive behavioral intervention (IBI) as a Medicaid benefit for persons under age 20 with a diagnosis of Autism Spectrum Disorder, HHSC may expend funds appropriated above in Strategy A.1.5, (Children’s Medicaid Program ~$5.5 billion), to reimburse for provision of IBI services.