



October 15th, 2025

Blue Cross Blue Shield of Michigan
600 E. Lafayette Blvd.,
Detroit, MI 48226

Re: Request for Meeting to discuss BCBS MI Behavioral Health Medical Record Documentation Requirements for Autism Treatment Services (September 2025 and the October 2025 update)

Dear Dr. Ahmad and Dr. Beecroft,

On behalf of the Michigan Behavior Analysis Providers Association (MiBAP) and the Council of Autism Service Providers (CASP), thank you for the opportunity to provide comments and feedback on the recently revised **Behavioral Health Medical Record Documentation Requirements for Autism Treatment Services** (September 2025 and the October 2025 update).

MiBAP is a Michigan – based non-profit association promoting access to the science of applied behavior analysis (ABA) founded in the spring of 2019. Our mission is to promote access to the science of applied behavior analysis through advocacy, education, and quality practices.

CASP is a non-profit trade association of approximately 450 autism service provider organizations, with a demonstrated commitment to promoting and delivering evidence-based practices for individuals with autism. CASP represents the autism provider community to the nation at large, including government, payers, and the general public. CASP provides information, education, and promotes the generally accepted standards of care for applied behavior analysis (ABA). CASP is committed to addressing barriers that impact access to quality services delivered by qualified providers.

Both MiBAP and CASP appreciate BCBSMI's commitment to ensuring quality and consistency in autism services. However, our member organizations have reviewed the BCBS MI *Behavioral Health Record Documentation Requirements for Autism Treatment Services (September & October 2025)* and identified several areas that do not align with industry standards for clinical practice, billing, or documentation.

Below is a brief overview of key areas we hope to better understand and discuss:

1. Scope of Competence Implications

- Several documentation requirements appear to fall outside the scope of competence for Registered Behavior Technicians (RBTs) and Licensed Behavior Analysts (LBAs) including mental status exams, diagnosis-related documentation, and risk assessments. The scope of practice guidance for RBTs and BCBAAs, published by the Behavior Analyst Certification Board (BACB), clearly delineates scope of practice¹². In Michigan, LBAs must obtain their BCBA as a prerequisite for licensure.

2. Family Participation Requirements

- The requirement for families to attend 80% of scheduled sessions and complete homework is inconsistent with generally accepted standards of care and violates federal Mental Health Parity and Additions Equity Act (MHPAEA) requirements. Individualized clinical recommendations, including flexibility in parent participation considerations, is necessary to ensure best clinical outcomes. We respectfully request parent participation requirements that align with the recommendations of the Council of Autism Service Provider's ABA Practice Guidelines³.

3. Discharge Criteria and Benchmarks

- The criteria for discharge based on skill acquisition rates and generalization does not reflect individualized treatment planning or align with medical

¹ Behavior Analyst Certification Board. (2020). Ethics code for behavior analysts. <https://bacb.com/wp-content/ethics-code-for-behavior-analysts/>

² Behavior Analyst Certification Board. (2025). Registered behavior technician handbook. Retrieved on Month, Day, Year, from <https://www.bacb.com/rbt-handbook>

³ Council of Autism Service Providers [CASP] (2024). *Applied behavior analysis practice guidelines for the treatment of Autism Spectrum Disorder: Guidance for healthcare funders, regulatory bodies, service providers, and consumers* [Clinical practice guidelines]. <https://www.casproviders.org/asd-guidelines>

necessity. We'd like to explore aligning discharge and transition planning with best clinical practices and generally accepted standards of care.

4. Mental Health Parity (MHPAEA) Implications

- Some documentation expectations for ABA services appear more stringent than those for other behavioral health services. We'd like to better understand how parity is being maintained and if BCBSMI completed a parity analysis prior to developing the above referenced policy guidelines.
- Some requirements for parent training and data collection also appear to be more stringent than MHPAEA allows.

5. Coding and Language Alignment

- Certain sections (e.g., supervision, re-evaluation, caregiver training) do not align with the American Medical Association Common Procedural Technology (AMA CPT) code guidance. We recommend clarifying language to ensure consistency with billing standards, and alignment with guidance from the ABA Coding Coalition and the American Medical Association CPT codebook, CPT code assistant, and supplemental guidance articles.⁴

6. Documentation Burden

- Some of the documentation requirements, including limiting sessions to 2.5 hours or less, are impractical and could detract from appropriate service delivery. Session length must be individualized and based on clinician and provider need.
- Requiring RBTs to document clinical information including changes in prognosis or supporting details, current clinical status, results of interval homework or practice of the prior intervention, an assessment of current and long term risks including interventions to minimize risks and contingency management, and any adjustments to intervention or the plan of care, is beyond the scope of many RBTs. We'd like to discuss streamlining documentation requirements, and expectations and aligning them with CPT expectations and the, CASP session note templates.⁵

We appreciate the opportunity to meet with your team, engage in collaborative discussion, and ensure alignment with clinical best practice, regulatory standards, and operational

⁴ ABA Coding Coalition, [Billing Codes | ABA Coding Coalition](#).

⁵ Council of Autism Service Providers, [CASP Session Note Templates - Council of Autism Service Providers](#)

feasibility, while providing our members with support they need to continue providing access to medically necessary care for BCBS MI beneficiaries.

Please let us know your availability for a meeting in the coming weeks. You can reach us at the contact information provided below.

Thank you for your time and consideration. We look forward to working together to support high-quality, accessible autism services for Michigan families.

Warm regards,

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