

Thank you for considering my testimony toward the importance of BCBA licensure for the state of Nebraska. My name is Andrea Clements and I have been a Board Certified Behavior Analyst since 2015. I have been in the ABA field for 15 years, working primarily with young children with autism spectrum disorder (ASD). I work at the University of Nebraska Medical Center's Munroe-Meyer Institute in and Integrated Center for Autism Spectrum Disorders Early Intervention program. I would like to speak toward how BCBA licensure in Nebraska could remove barriers for some of the most vulnerable Nebraskans (i.e., individuals with ASD who are covered by Medicaid).

The CDC¹ and NIH² consider Applied Behavior Analysis (ABA) as one of the best approaches for treating ASD. For many insurance providers, BCBA's are considered qualified health professionals for the treatment of behavioral excesses and deficits associated with ASD. Insurance providers consider BCBA as an appropriate certification to treat these individuals. However, in some cases, an insurance company will require the BCBA to work under the direction of a Licensed Psychologist (LP). This requirement is due to BCBA not being considered a licensed profession in some states (Nebraska in this case). For these insurance companies, Medicaid in particular, I cannot offer services until I have set up a supervision relationship with an LP. Thankfully I work for UNMC and have a wonderful dually credentialed LP (she is also a doctoral-level BCBA) who is supervising me.

Not all ABA providers may be as lucky as me. My department pays the LP for her time. A BCBA who works for another company may have to pay for this supervision themselves. A self-employed BCBA would we required to seek out this supervision on their own. The response effort required to secure this supervision, costs associated with this supervision and overall limited number of LPs may result in some BCBA's simply not offering services to Medicaid kids at all. Some ABA companies may end up limiting the number of Medicaid clients they see, due to not overtaxing the LPs they partner with to provide supervision.

These additional levels of supervision creates invisible barriers for certain individuals on wait-lists for services. The ABA provider may only have so many Medicaid slots available due to LP case-load. If a Medicaid client were to be next in line for services, they may get skipped due to that provider already being "full" of Medicaid clients. Considering BCBA a licensed profession would remove that barrier and ensure that Medicaid clients contact services as soon as they become available! Furthermore, if an LP were to terminate the supervision relationship with a BCBA and that BCBA/ABA company was unable to quickly identify another LP to step in (which is likely in a state like Nebraska, where LPs are in high demand), Medicaid clients may have to abruptly end services! Considering BCBA as a licensed profession would eliminate that probability.

Omaha is the "big city," for me. I was born in Lincoln, but was raised in rural Nebraska. I graduated with a whopping 19 students in my class. My town had one dentist and a handful of doctors and nurses at the town hospital. Specialized services required a drive to a nearby city, sometimes hours away. As a rural Nebraskan I have experienced first-hand how services (across many different disciplines) can be stretched thin and place a burden on families of those with special needs. Perhaps that is what drew me to the 'helping' profession in the first place. It is known that Nebraska has a need for professionals who specialize in ASD to meet the growing need for these services in our state. Removing barriers for these providers to practice freely in the state may help attract skilled professionals and may also help keep those professionals who, like myself, were trained here through the UNO ABA Masters program.

I appreciate your time and consideration regarding how BCBA licensure helps remove barriers for ASD services, provides freedom for ABA providers to freely apply services across insurances, and doesn't unduly overextend the work-loads of the state's LPs.

Sincerely,

A handwritten signature in black ink that reads "Andrea Clements". The signature is written in a cursive style with a large initial 'A'.

Andrea Clements, M.A., BCBA

¹ CDC Article: <https://www.cdc.gov/ncbddd/autism/treatment.html#Behavioral>

² NIH Article: <https://www.nichd.nih.gov/health/topics/autism/conditioninfo/treatments/behavioral-management>