

May 26, 2020

From the Behavior Analyst Certification Board (BACB):

“The BACB has not prescriptively authorized service delivery by its certificants via any specific modality, such as in person or telehealth. Thus, unless otherwise restricted by state regulation BACB certificants would be permitted to deliver services via telehealth in compliance with their respective ethics code.”

From the Nevada Board of Applied Behavior Analysis:

Given Nevada regulations (NRS 437) do not restrict the use of telehealth, services should be rendered within the scope of competence for LBAs, LaBAs, and RBTs and implemented with only consumers where telehealth is appropriate. The board encourages the use of HIPPA compliant software when delivering said services.

Due to the COVID-19 Pandemic and the resulting constraints on service delivery, the Board recognizes the increased necessity of telehealth services delivered by Licensed Behavior Analysts (LBAs), Licensed Assistant Behavior Analysts (LaBAs), and Registered Behavior Technicians (RBTs) in the state of Nevada.

Please consult NRS 437 and regulations (<http://adsd.nv.gov/Boards/ABA/ABARegulations/>) for more direction on the practice of behavior analysis in the state of Nevada.

In addition, the following guidance has been provided by the Association for Professional Behavior Analysts (APBA):

The substantial evidence of the efficacy of those and many other ABA procedures when implemented in person makes their delivery via telepractice evidence-informed, at a minimum. The same is likely true of many medical and other services that are being authorized for telepractice during the COVID-19 emergency.

For ABA services that are delivered via telepractice, providers should follow professional standards and best practices and customize the services to the strengths, needs, and preferences of each client and their caregivers as well as the skills and resources of the provider. Records of prior assessments and treatment, caregiver interviews, and direct observation of behavior/environment interactions should be used to evaluate the client’s skills in engaging in services delivered remotely. As described previously, special circumstances created by the COVID-19 pandemic should be considered in selecting treatment targets. Clients and caregivers should be involved in prioritizing targets and procedures that will help keep the client and others as safe and healthy as possible while also reducing stress. If modifications to an existing treatment plan are required, providers should work with payers to get expedited approval of new or amended plans as well as instructions regarding any changes in billing codes, modifiers, or documentation requirements for services delivered via

telepractice.

Supplemental guidance is also available on the APBA website, in relation to the use of telepractice during the course of the COVID-19 pandemic. Please refer to <https://www.apbahome.net/page/practiceguidelines>

Additional information can also be found on the BACB website in relation to COVID-19 and the practice of behavior analysis during the pandemic. Please reference <https://www.bacb.com/bacb-covid-19-updates/>