Frequently Asked Questions: MNA

For RethinkBH Providers using the Medical Necessity Assessment

Q: How does the MNA 2.0 differ from the previous version?

MNA before 7/15/24	AI-Driven MNA launched 7/15/2024
Designed solely on clinical expertise	Combines clinical expertise, evidence-based practice and machine learning (AI)
Manually weighted hours recommendation	AI-driven, individualized ABA hours recommendation
No proactive gaps in care identified	Flags highlight potential areas of concern for progress, outcomes and treatment quality
No or limited support re: possible gaps in authorization request	Reduce back and forth with payors via guides to proactively address common payor concerns
No indication re: how hours relate to clinical progress	Visual dose response curve clearly displays impact to progress with fewer or more hours than product's recommendation

Q: How do I know which form version to use?

A: Use the Initial Form for all first-time entries into the system (even if you have had previous authorization for this patient). This establishes the patient's data on the new tool. Use the Continued Service Form for all re-occurring authorization requests.

Q: How were the new questions selected for the form?

A: BCBA review of literature for evidence-based, best practice and CMS recommendations for demographics and Social Determinants of Health with the purpose to standardize treatment submission documentation.

Q: Do I have to answer all fields?

A: Specific fields are required and labeled with a red asterisk in the user interface. The Results screen can only be viewed when all required questions are answered;

users will see the Results screen indicator in the toggle at the top of the screen turn to green when Results are available.

Q: Are there new features I should be aware of?

A: The new, dynamic form allows you to now toggle between sections (once the first screen, Member Details, is fully complete). The Results screen has been enhanced to include a dose-response curve to show predicted progress per hour of ABA. Provider Consideration Flags, also on the Results screen, highlight common payor concerns or areas to address. And Smart-Fill functionality increases efficiency by reducing data entry on Continued Service forms.

Q: What is the dose-response curve and how is it useful?

A: Dose-response curves visually compare all possible dosage values (hours) to levels of predicted progress. You can use this to inform conversations with caregivers about where maximum predicted progress can be made based on the range of available hours. Use the dose-response curve to show parents and payors the drawbacks of utilizing fewer or more hours than are recommended.

Q: Why might I get a different recommendation of hours with the AI-driven MNA than I did with the previous version, for the same client?

A: The new AI-driven MNA relies on a rebuilt architecture compared to the previous. You might get a different recommendation because the algorithms are architected differently.

Previously, the MNA was a rules-driven system with hard-coded rules to determine recommended ABA hours. This has three drawbacks: (1) Assumptions about translating variables to hours were uncertain; (2) The system didn't consider the complexity of each patient's background and clinical characteristics; and (3) It was easy for users to manipulate responses to get specific recommendations.

The AI-driven MNA is data-driven, using peer-reviewed research AND RethinkFirst's extensive database to predict patient progress based on various characteristics. This approach corrects the previous drawbacks by using data to determine the predictive value of each variable, modeling the interaction of multiple variables, and employing complex modeling to prevent users from gaming the system.

For a more comprehensive overview of how the suite of algorithms work, please review "An Artificial Intelligence-Driven System" pre-print white paper within the information section of the MNA (screen shot below).

Q: What clinical data and research is the new algorithm built on?

A: Data on over 500+ million data points and 40,000+ patients receiving ABA treatment from Rethink's database. A comprehensive "List of Clinical References" can be found within the information section of the MNA (screen shot below).

Q: What if I disagree with the MNA recommendation?

A: The MNA recommendation is based on the fields we collect and use in the algorithm. It is possible that there are clinical considerations that are not currently used by the algorithms that would require more or fewer hours of ABA to optimize progress.

The hours recommended by the algorithm are the minimum hours recommended for optimal progress. More hours might be recommended for clinical considerations not currently captured with the tool.

If submitting to a payor, you may want to provide additional clinical information on why your recommendation differs from the MNA. We also appreciate comments in the Results Screen (use the fields in the Agreement section), as these help us to enhance the algorithm long-term.

Q: Where can I find additional resources about the MNA?

A: Directly within the tool we have embedded helpful documents. Simply click the purple "i" icon by the Medical Necessity header on any screen within the MNA, and you'll find this FAQ, User Guide / Instruction Manual, and our pre-print white paper containing an overview of the AI system, "An Artificial Intelligence Driven System to Predict ASD Outcomes in ABA". Note that we may add new resources over time!

RethinkBH
Together We Power Potential

Medical Necessity ⓘ

The RethinkFirst Medical Necessi... ...ally aligned resource created and used by clinicians to guide their determination of appropriate care levels for individuals with autism spectrum disorder (ASD). The MN... ...ommend the hours of ABA likely to optimize their progress using data from the largest published database of ABA services for individuals with ASD.

Instruction Manual/Question Guide
Overview of Data Elements Collected
White Paper - AI System to Predict ABA Outcomes

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🖉 **Create New Assessment**

Current Assessment			
Assessment Date	**Assessment Type**	**Recommended Hours**	
7/15/24, 1:18 PM	Initial Service Form	27	Resume Delete

Previous Assessment(s)			
Assessment Date	**Assessment Type**	**Recommended Hours**	
7/20/24, 10:49 AM	Initial Service Form	Not Finished	Resume Delete

USER NOTE: FAQ will update/refresh as additional commonly asked questions arrive. Please check back frequently and as needed for new Q&A.