SVCMC, Inc. | US FAMILY HEALTH PLAN

DSM-5-TR CHECKLIST for Autism Spectrum Disorder

Patient Name: _____ **DOB:** _____ **Member ID:** _____

DSM-5 criteria	**Autism Spectrum Disorder (ASD)**
Note: If the individual has a well-established DSM-IV diagnosis of autistic disorder, Asperger's disorder, or Pervasive Developmental Disorder-Not Otherwise Specified (PDD-NOS), please check this box. Complete the checklist below to reclassify the previous diagnosis to Autism Spectrum Disorder.	☐
☐ **A.** Persistent deficits in social communication and social interaction across multiple contexts, as manifested by **all the following,** currently or by history (examples provided below are illustrative, not exhaustive):	
☐**Deficits in social-emotional reciprocity (examples below):** ○ Abnormal social approach and failure of normal back-and-forth conversation ○ Reduced sharing of interests, emotions, or affect ○ Failure to initiate or respond to social interactions ☐**Deficits in nonverbal communicative behaviors used for social interaction (examples below):** ○ Poorly integrated verbal and nonverbal communication ○ Abnormalities in eye contact and body language ○ Deficits in understanding and use of gestures ○ Total lack of facial expressions and nonverbal communication ☐**Deficits in developing, maintaining, and understanding relationships (examples below):** ○ Difficulties adjusting behavior to suit different social contexts ○ Difficulties in sharing imaginative play ○ Difficulties making friends ○ Absence of interest in people **_____ Specify current social communication severity level (1, 2, or 3)** *Note: See Severity Levels for Autism Spectrum Disorder on page 2*	
☐ **B.** Restricted, repetitive patterns of behavior, interests, or activities as manifested **by at least 2 of the following** currently or by history (examples below are illustrative, not exhaustive):	
☐Stereotyped or repetitive motor movements, speech, use of objects (e.g., simple motor stereotypies, lining up toys or flipping objects, echolalia, or idiosyncratic phrases).	

☐Insistence on sameness, inflexible adherence to routines, or ritualized patterns of verbal or nonverbal behavior (e.g., extreme distress at small changes, difficulties with transitions, rigid thinking patterns, greeting rituals, need to take same route or eat same food every day).

☐Highly restricted, fixated interests that are abnormal in intensity or focus (e.g., strong attachment to or preoccupation with unusual objects, excessively circumscribed or perseverative interests).

☐Hyper-or hypo-reactivity to sensory input or unusual interest in sensory aspects of environment (e.g., apparent indifference to pain/temperature, adverse response to specific sounds or textures, excessive smelling or touching of objects, visual fascination with lights or movement).

_____ Specify current restricted repetitive behavior severity level (1, 2, or 3)
Note: See Severity Levels for Autism Spectrum Disorder on page 3

☐ **C.** Symptoms must be present in the early developmental period (but may not become fully manifested until social demands exceed limited capacities or may be masked by learned strategies in later life).

☐ **D.** Symptoms cause clinically significant impairment in social, occupational, or other important areas of current functioning.

☐ **E.** These disturbances are not better explained by intellectual disability (intellectual developmental disorder) or global developmental delay. To make comorbid diagnoses of autism spectrum disorder and intellectual disability, social communication should be below that expected for general developmental level.

☐Autism Spectrum Disorder criteria met **(A, B, C, D, & E are marked)**

Specify if:

☐With or without intellectual impairment
☐With or without language impairment
☐Associated with a known medical or genetic condition or environmental factor
☐Associated with another neurodevelopmental, mental, or behavioral problem
☐With catatonia

Date of diagnosis: _____
Provider Name: _____
Provider Credentials: _____
Signature: _____ **Date:** _____

How to submit: Providers should submit to Utilization Review via fax to (877) 378-2316.

Severity Levels for Autism Spectrum Disorder

Severity level	Social communication	Restricted, repetitive behaviors
Level 3 "Requiring very substantial support"	Severe deficits in verbal and nonverbal social communication skills cause severe impairments in functioning, very limited initiation of social interactions, and minimal response to social overtures from others. For example, a person with few words of intelligible speech who rarely initiates interaction and, when he or she does, makes unusual approaches to meet needs only and responds to only very direct social approaches	Inflexibility of behavior, extreme difficulty coping with change, or other restricted/repetitive behaviors markedly interfere with functioning in all spheres. Great distress/difficulty changing focus or action.
Level 2 "Requiring substantial support"	Marked deficits in verbal and nonverbal social communication skills; social impairments apparent even with supports in place; limited initiation of social interactions; and reduced or abnormal responses to social overtures from others. For example, a person who speaks simple sentences, whose interaction is limited to narrow special interests, and who has markedly odd nonverbal communication.	Inflexibility of behavior, difficulty coping with change, or other restricted/repetitive behaviors appear frequently enough to be obvious to the casual observer and interfere with functioning in a variety of contexts. Distress and/or difficulty changing focus or action.
Level 1 "Requiring support"	Without supports in place, deficits in social communication cause noticeable impairments. Difficulty initiating social interactions and clear examples of atypical or unsuccessful responses to social overtures of others. May appear to have decreased interest in social interactions. For example, a person who can speak in full sentences and engages in communication but whose back-and-forth conversation with others fails, and whose attempts to make friends are odd and typically unsuccessful.	Inflexibility of behavior causes significant interference with functioning in one or more contexts. Difficulty switching between activities. Problems of organization and planning hamper independence.