

Maryland Medical
Assistance Program
Applied Behavior
Analysis (ABA)
Provider Manual

Effective April 1, 2018

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ABA Overview

As of January 1, 2017, the Maryland Department of Health (the Department) covers medically necessary Applied Behavior Analysis (ABA) therapy services for Medicaid enrolled members under the age of 21. In order for a child/adolescent to receive ABA therapy services, he/she must be diagnosed with an Autism Spectrum Disorder (ASD) by a qualified health care professional (a developmental pediatrician, pediatric neurologist, child psychiatrist, clinical psychologist, a neuropsychologist, a pediatrician, or a nurse practitioner) with training and experience to diagnose ASD through the use of a comprehensive diagnostic evaluation, resulting in a referral for ABA therapy services.

ABA services are only available under the Early Periodic Screening, Diagnosis, and Treatment (EPSDT) program. The EPSDT program is a program that offers comprehensive and preventive health care services for individuals under age 21 who are enrolled in the Maryland Medical Assistance Program. ABA services will be covered and reimbursed by the Medical Assistance fee-for-service program through *Beacon Health Options*.

Regulatory Authority

This manual derives its legal authority from Code of Maryland Regulations (COMAR) 10.09.28, titled Applied Behavior Analysis Services. The regulations may be viewed in their entirety online at the Maryland Division of State Documents website: <http://www.dsd.state.md.us/COMAR/ComarHome.html>.

Purpose

The purpose of this manual is to provide policy and billing instructions for providers rendering ABA services. ABA providers will bill on the CMS-1500 claim form if billing on paper or, if billing electronically, bill on the CMS 837P (professional) claim format. The Program will accept only the revised CMS-1500 form (version 02-12), in accordance with Federal mandate. Providers of ABA services are reimbursed in accordance with the *ABA Fee Schedule* that is found on pp. 9-11 of this manual.

HIPAA

The Administrative Simplification provisions of the **Health Insurance Portability and Accountability Act (HIPAA)** of 1996 require that standard electronic health transactions be used by health plans including private, commercial, Medical Assistance (Medicaid), Medicare, health care clearinghouses and health care providers. A major intent of the law is to allow providers to meet the data needs of every insurer electronically, with one billing format, using health care industry standard sets of data and codes.

In January 2009, the Federal government mandated the implementation of HIPAA-compliant 5010 transaction standards to support the mandated upgrade to the ICD-10-CM classification system. 5010 compliance allows for improved technical coordination, accommodation for evolving business needs, and consistency in reporting requirements. The 5010 compliance was implemented on July 1, 2012.

Any questions regarding 5010 compliance should be directed to ***Beacon Health Options*** at **1-800-888-1965**.

More information on HIPAA may be obtained from: <http://www.hhs.gov/hipaa/for-professionals/index.html>.

National Provider Identifier (NPI)

All health care providers that render ABA services must have a NPI. The NPI is a unique, 10-digit, numeric identifier that does not expire or change. NPI's are assigned to improve the efficiency and effectiveness of the electronic transmission of health information. Implementation of the NPI impacts all practice, office, or institutional functions including billing, reporting and payment.

The NPI is administered by the Centers of Medicare and Medicaid Services (CMS) and is required by HIPAA. Apply for an NPI by using the web-based application process via the National Plan and Provider Enumeration System (NPPES) at <https://nppes.cms.hhs.gov/NPPES/Welcome.do>.

Provider Enrollment and Registration

All ABA providers must first enroll with Maryland Medicaid to receive a Medicaid provider number and then must register with Beacon Health Options. ABA providers may enroll in the Maryland Medical Assistance Program as an individual ABA provider and/or a group ABA provider.

To enroll with the Maryland Medical Assistance Program, all ABA group practices and individual licensed psychologists, BCBA-Ds, BCBAs, BCaBAs, RBTs, and BTs must enroll through the Maryland Medicaid's Electronic Provider Revalidation and Enrollment Portal (ePREP) at <https://eprep.health.maryland.gov/sso/login.do?>. The ePREP is the one-stop shop for provider enrollment, re-enrollment, revalidation, information updates and demographic changes. Licensed psychologists who are already enrolled with the Maryland Medical Assistance program must complete the *ABA Attestation Form* at <https://mmcp.dhmh.maryland.gov/epsdt/ABA/Pages/Home.aspx>.

To register with **Beacon Health Option**, please go to http://maryland.beaconhealthoptions.com/provider/provider_home.html.

Guidelines for Educational Coursework and Supervisory Experience of Licensed Psychologists

Listed below are some guidelines on coursework and experience for psychologists who wish to provide ABA services to Maryland Medical Assistance Program participants:

- **Coursework:** Master's degree or doctoral degree in psychology that includes, at a minimum, 40 coursework hours in behavior analysis, behavior management theory, techniques, interventions and ethics, and autism spectrum disorders; *and*
- **Supervisory experience:** At a minimum, one year (1,500 hours) of supervised clinical experience inclusive of:
 - a. Minimum one year direct care services to children; *and*
 - b. Minimum one year direct care utilizing applied behavior analysis, behavior techniques, interventions and monitoring of behavior plan implementation; *and*
 - c. Experience must have included work with individuals with ASD.

Preauthorization of Services

All ABA services require prior authorization from the behavioral health ASO contracted by MDH – Beacon Health Options. The ASO will only authorize ABA services if a qualified health care professional completes a comprehensive diagnostic evaluation and prescribes medically necessary ABA services. Then, a psychologist, BCBA-D, or BCBA must complete an assessment of the child/adolescent and develop a detailed treatment plan.

Preauthorization for services from the ASO are valid for a maximum of 180 days. Prior to the end of the authorization period, the psychologist, BCBA-D, or BCBA must administer a reassessment of the child/adolescent's need for ABA services in order to determine if services continue to be medically necessary. A reassessment and subsequent preauthorization will be required every 180 days for the duration of the child/adolescent's treatment. Please visit **Beacon Health Options** at http://maryland.beaconhealthoptions.com/provider/provider_home.html to obtain preauthorization for ABA services.

Medical Assistance Payments

All payments made by the Program to providers shall be considered payment in full for services rendered. Providers are prohibited from collecting additional payment from Program participants or participants' families for either covered or denied services. Such action constitutes an overpayment and is in violation of both Federal and State regulations.

The Program shall provide fee-for-service reimbursement for covered ABA services to the following ABA providers:

- An ABA group, and
- An individual ABA provider (psychologist, BCBA-D or BCBA).

BCaBAs, RBTs and BTs rendering ABA services cannot bill directly to the Maryland Medical Assistance Program and receive reimbursement.

Claims for all ABA services must be submitted to Beacon Health Options for reimbursement.

Covered Services

ABA services include a variety of interventions identified as evidence-based by nationally recognized research reviews. The ABA services must be administered by a licensed psychologist, a Board Certified Behavior Analyst-Doctorate (BCBA-D), a Board Certified Behavior Analyst (BCBA), a Board Certified Assistant Behavior Analyst (BCaBA), a Registered Behavior Technician (RBT), and/or a Behavior Technician (BT) working within his/her scope of practice. When services are provided by a BCaBA, RBT, or BT, they must be performed under the supervision of a licensed psychologist, BCBA-D or BCBA.

The following ABA services are available to eligible children/adolescents with ASD when the ABA services are determined to be medically necessary:

- An ABA assessment and reassessment administered to a child/adolescent every 180 days by a psychologist, BCBA-D or BCBA;
- ABA therapy that consists of individual, group and social skills therapies, which may be administered by various providers. To see which providers may provide which service, go to COMAR 10.09.28.04;
- ABA parent training that consists of individual and multiple-family group training. To see which providers may provide which service, go to COMAR 10.09.28.04;
- ABA direct and remote supervision of a BCaBA, RBT, or BT performed by a psychologist, BCBA-D, or BCBA. The supervision must be performed in person at least 25 percent of the time. Please note that the provider must obtain approval by the Department or Beacon Health Options for remote supervision; and
- ABA treatment planning performed by a psychologist, BCBA-D, or BCBA and consisting of the development and revision of treatment plan and goals, data analysis, and real-time, direct communication with the participant's other service providers. Treatment planning can be utilized for a maximum of four hours per month.

Limitations

The ABA services must be delivered in a home or community setting, including a clinic, when medically necessary.

The ABA provider may not bill the Maryland Medical Assistance Program for the following services:

- Services rendered when measurable functional improvement or continued clinical benefit is not met, and treatment is not deemed medically necessary;
- Services not preauthorized by Beacon Health Options;
- Services rendered that are beyond the provider's scope of practice;
- Services rendered but not documented in accordance with COMAR 10.09.28.04F;
- Services rendered by mail or telephone;
- Services whose purpose is vocationally based or recreationally based;
- Respite services;
- Services that duplicate a service that a participant is receiving under another medical care program; and
- Services provided in a 24-hour, 365-day residential program funded with federal, State, or local government funds.

The ABA provider may also not bill Maryland Medical Assistance program for:

- Custodial care;
- Completion of forms and reports;
- Broken or missed appointments; and
- Travel to and from site of service.

Services shall be discontinued if no longer medically necessary because:

- Long-term treatment goals and objectives are achieved; or
- The participant is not demonstrating progress towards treatment goals and objectives and measurable functional improvement is no longer expected.

Contact Information

For additional information about the ABA program, e-mail your inquiries to: MDH.ABA@maryland.gov.

ABA resources including the ABA fee schedule, provider manual, and FAQs can be viewed on the MDH ABA webpage at <https://mmcp.health.maryland.gov/epsdt/ABA/Pages/Home.aspx>.

For questions regarding billing, preauthorization and provider registration, please contact *Beacon Health Options* at http://maryland.beaconhealthoptions.com/provider/provider_home.html.

ABA Fee Schedule (Effective April 1, 2018)

CPT Code	Description	Provider	Rate	Time	Daily Max	Limitations
0359T	Behavior identification assessment	Psychologist/ BCBA-D/BCBA	\$220.00	untimed	1 unit a day	once a year
0360T	Observational follow-up assessment-first 30 min	Psychologist/ BCBA-D/BCBA	\$55.00	30 minutes	1 unit a day	The code is to be billed for the first 30 min of each day of f/u assessments and for ABA treatment planning.
0361T	Observational follow-up assessment-additional 30 min	Psychologist/ BCBA-D/BCBA	\$55.00	30 minutes		The code is to be billed for additional 30 min of each day of f/u assessments and for ABA treatment planning.
0362T	Exposure behavior follow-up assessment-first 30 min	Psychologist/ BCBA-D/BCBA + 1 or more BCaBAs/RBTs/BTs	\$75.00	30 minutes	1 unit a day	
0363T	Exposure behavior follow-up assessment-additional 30 min	Psychologist/ BCBA-D/BCBA + 1 or more BCaBAs/RBTs/BTs	\$75.00	30 minutes		
0364T	Adaptive behavior treatment-first 30 min	Psychologist/ BCBA-D/BCBA BCaBA/RBT/BT	\$35.00 for Psychologist/ BCBA-D/BCBA \$30.00 for BCaBA \$27.50 for RBT/BT	30 minutes	1 unit a day	
0365T	Adaptive behavior treatment-additional 30 min	Psychologist/ BCBA-D/BCBA BCaBA/RBT/BT	\$35.00 for Psychologist/ BCBA-D/BCBA \$30.00 for BCaBA \$27.50 for RBT/BT	30 minutes		

CPT Code	Description	Provider	Rate	Time	Daily Max	Limitations
0366T	Group adaptive behavior treatment-first 30 min	Psychologist/ BCBA-D/BCBA BCaBA/RBT/BT	\$15.00 per participant for Psychologist/ BCBA-D/BCBA \$12.00 per participant for BCaBA; \$10.00 per participant for RBT/BT	30 minutes	1 unit a day	Group limited to 2-8 participants
0367T	Group adaptive behavior treatment-additional 30 min	Psychologist/ BCBA-D/BCBA BCaBA/RBT/BT	\$15.00 per participant for Psychologist/ BCBA-D/BCBA \$12.00 per participant for BCaBA; \$10.00 per participant for RBT/BT	30 minutes		Group limited to 2-8 participants
0368T	Adaptive behavior treatment with protocol modification- first 30 min	Psychologist/ BCBA-D/BCBA and BCaBA	\$55.00 for Psychologist/ BCBA-D/BCBA \$30.00 for BCaBA	30 minutes	1 unit a day	Codes used for modification of the treatment plan by Psychologist/BCBA-D/BCBA, supervision by Psychologist/BCBA-D/BCBA, and parent training with the child present by Psychologist/BCBA-D/BCBA/BCaBA
0369T	Adaptive behavior treatment with protocol modification-additional 30 min	Psychologist/ BCBA-D/BCBA and BCaBA	\$55.00 for Psychologist/ BCBA-D/BCBA \$30.00 for BCaBA	30 minutes		
0370T	Family adaptive behavior treatment guidance	Psychologist/ BCBA-D/BCBA and BCaBA	\$60.00 for Psychologist/ BCBA-D/BCBA \$35.00 for BCaBA	untimed	1 unit a day	
0371T	Multiple-family group adaptive behavior treatment guidance	Psychologist/ BCBA-D/BCBA	\$37.00 per family	untimed	1 unit a day	Group limited to 2-8 families
0372T	Adaptive behavior treatment social skill group	Psychologist/ BCBA-D/BCBA	\$30.00 per participant	untimed	1 unit a day	Group limited to 2-8 participants

CPT Code	Description	Provider	Rate	Time	Daily Max	Limitations
0373T	Exposure adaptive behavior with protocol modification- first 60 min	Psychologist/ BCBA-D/BCBA + 2 or more BCaBAs/RBTs/BTs	\$150.00	60 minutes	1 unit a day	Codes used for exposure adaptive behavior therapy with protocol modification by Psychologist/ BCBA-D/BCBA in the presence of 2 or more BCaBAs/RBTs/BTs, supervision by Psychologist, BCBA-D/BCBA, and parent training with the child present by Psychologist/ BCBA-D/BCBA/BCaBA
0374T	Exposure adaptive behavior with protocol modification- add. 30 min	Psychologist/ BCBA-D/BCBA + 2 or more BCaBAs/RBTs/BTs	\$75.00	30 minutes		