

Provider Network News

New Medicaid Benefit: Applied Behavior Analysis (ABA) Therapy -Effective February 1, 2022

What is ABA?

Applied Behavior Analysis (ABA) is a widely used, evidence-based therapy intervention for youth with Autism Spectrum Disorder (ASD).

ABA is specifically targeted to improving a youth's cognitive, language, social, and self-help skills through intensive behavior modification and reinforcement strategies. It replaces maladaptive behavior with functional behavior, improving the youth's ability to function successfully in the home, school, and/or community.

Utilization of ABA does not prohibit a youth from receiving other available services such as (but not limited to) behavioral health therapies, occupational therapy, or speech therapy.

What does this mean to PCHP members?

Effective February 1, 2022, the ABA benefit will be available to Medicaid-eligible youth aged 0-20 who are diagnosed with ASD and who are clinically appropriate for ABA services as outlined in the HHSC policy. This member service includes ABA evaluation, individual treatment, group treatment, parent/caregiver training, and/or interdisciplinary team meetings.

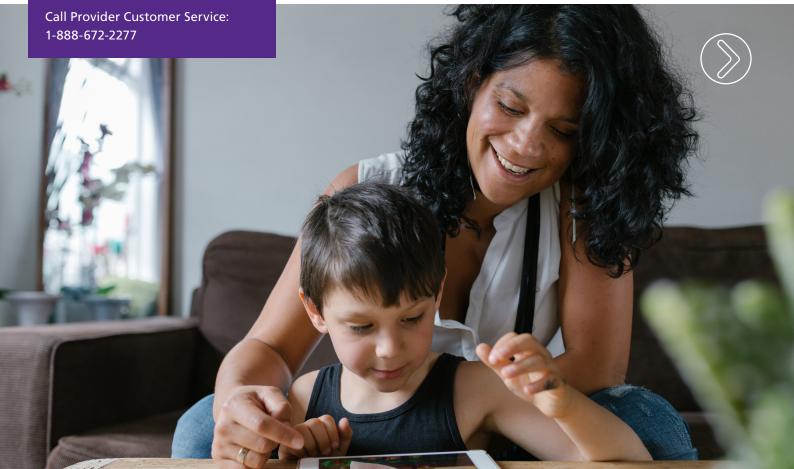
What does this mean to PCHP providers?

For a member to be eligible for ABA services, a diagnosis of ASD, complete with diagnostic criteria and symptom severity level, must be made or re-confirmed with re-assessment within 3 years of initiation or recertification of ABA services. (See **ASD Diagnostic Requirements** below.)

PCHP members diagnosed with ASD can be referred to ABA services. Below are the ABA referral requirements:

- Age of the child/youth and year of the initial ASD diagnosis
- Any co-morbid behavioral health and/or physical conditions, including trauma history
- Level of symptom severity as per DSM criteria under ASD
- Diagnosis of ASD must have been made within the past 3 years (reconfirmation of diagnostic criteria and symptom severity is required if the initial diagnosis of ASD was made more than 3 years ago)
- A signed and dated referral from the prescribing provider for an evaluation for ABA services
 - This referral may originate from the primary care provider.
 - The referral may originate from the diagnosing provider who is a physician, APRN, or PA.

Questions?



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ASD Diagnostic Requirements

In order to be eligible for the ABA services outlined in this policy, a diagnosis of ASD complete with diagnostic criteria and symptom severity level must be made or reconfirmed with reassessment within 3 years of initiation or recertification of ABA services.

A diagnosis of ASD may be made by any one of the following providers:

- A developmental pediatrician
- A neurologist
- A psychiatrist
- A licensed psychologist
- An interdisciplinary team composed of a physician, physician assistant, or nurse practitioner in consultation with one or more providers who are qualified child specialists with expertise in autism, limited to:
 - Any provider listed above
 - A licensed clinical social worker
 - A licensed professional counselor
 - A licensed psychological associate
 - A licensed specialist in school psychology
 - An occupational therapist (OT)
 - A speech-language pathologist (SLP)

Impact to ABA Providers

Reimbursement for eligible ABA services will be available to the following new provider types:

- Medicaid-enrolled Licensed Behavior Analysts (LBAs)
 - Licensed Assistant Behavior Analysts (LaBAs) under the supervision of LBAs
 - Behavior Technicians (BTs) under the supervision of LBAs

Prior authorization is required for an ABA evaluation (procedure code 97151), an initial course of ABA treatment, and for subsequent recertifications for treatment (procedure codes 97153, 97154, 97155, 97156, 97158). Re-evaluations (procedure code 97151) for recertification of treatment require authorization.

For more information on ABA benefits including the diagnostic and evaluation process, treatment planning and documentation requirements, covered CPT codes, and medical necessity criteria, please see the HHSC ABA policy.