

IHCP *bulletin*

This bulletin has been updated. See IHCP Bulletin [BT202539](#). The enforcement date for requiring the rendering provider NPI to align with the procedure code modifier on a ABA therapy services claim has been delayed.

INDIANA HEALTH COVERAGE PROGRAMS BT2024194 NOVEMBER 29, 2024

IHCP clarifies ABA documentation requirements and updates provider enrollment requirements

The Indiana Health Coverage Programs (IHCP) is reinforcing documentation and treatment plan requirements as well as introducing new provider enrollment requirements for applied behavior analysis (ABA) therapy. This guidance applies to all programs within the IHCP.

ABA therapy must be determined to be medically necessary in accordance with national care guidelines such as MCG and InterQual.

Applied behavior analysis therapy definition

ABA therapy services are highly structured interventions, strategies and approaches provided to decrease maladaptive behaviors and increase or reinforce appropriate behaviors. Treatment may vary in intensity, duration, complexity and range of treatment goals, as well as in the extent of direct treatment provided:



- **Comprehensive services** are typically rendered when the individual is in the early stages of their development. Comprehensive services are all-encompassing, aiming to treat multiple autism spectrum disorder (ASD) symptoms, including deficits in language, cognitive, social and play development.
- **Focused ABA** refers to treatment provided directly to the individual for a limited number of behaviors. Focused interventions target specific behaviors and skills that are associated with ASD, such as sleep challenges, play and social skills, tantrums, and aggression.

Member eligibility requirements

Members are eligible for ABA therapy if they meet **all** the following:

- Have been diagnosed with ASD by a *qualified healthcare provider*, defined as one of the following:
 - Doctoral level licensed clinical psychologist
 - Licensed physician with appropriate training in the current diagnostic guidelines
 - Other behavioral health specialist with training and experience in the diagnosis and treatment of ASD
- Have a completed diagnostic evaluation using the most recent version of the American Psychiatric Association's Diagnostic and Statistical Manual of Mental Disorders (DSM).
- Have a physician's referral for recommending treatment for ABA therapy.

Eligible members may be covered for ABA therapy services from the time of initial diagnosis through the age of 20.

Treatment plan and components and documentation requirements

The following treatment plan and components and documentation are required for ABA therapy:

■ Comprehensive diagnostic evaluation (CDE)

- Must be performed by a qualified healthcare provider (as previously defined on page 1) to establish the diagnosis of ASD.
- Must include **all** the following components:
 - ◆ Interview with a caregiver who is familiar with the individual's history and current functioning
 - ◆ Structured observation of the individual's current social communication skills and behaviors
 - ◆ Review of available external evaluations or screenings (such as First Steps, school or therapy evaluations)
 - ◆ Documentation of a completed screening/diagnostic evaluation
 - ◆ Documentation that the individual cannot adequately participate in home, school or community activities or that the individual presents a safety risk to self or others
 - ◆ A physician's referral for autism-specific services



■ Behavior assessment

- A behavior assessment must be conducted prior to the initiation of ABA therapy.
- The behavior assessment must include three core standardized behavior instruments:
 - ◆ *Vineland Comprehensive Parent Interview Form* including Maladaptive Behavior domain
 - ◆ *Behavior Assessment System for Children, Parenting Relationship Questionnaire (BASC PRQ)*
 - ◆ An age-appropriate, objective direct skills assessment
- The complete scoring report, including outcome measure scores and graphs, must be submitted with prior authorization requests.
- If a comprehensive behavior assessment has been completed within six months, any new provider is expected to obtain the assessment from the original provider.

■ Treatment plan

- The treatment plan must include **all** the following:
 - ◆ Individualized intervention strategies to eliminate, mitigate or replace the problematic behavior
 - ◆ Specific behavior goals and mastery criteria for each goal
 - ◆ Time frames to address the targeted behaviors
 - ◆ The number of hours per week being requested, with justification and supporting documentation
 - ◆ A clear schedule of services
- The treatment plan must document how parents/guardians will participate in the ABA therapy.

■ Documentation

- Providers must maintain the following documentation in the individual's file and be able to produce it within 72 hours of request.
- Documentation must include **all** the following:
 - ◆ The original referral documentation, including the CDE and physician's referral
 - ◆ The behavior assessment and treatment plan signed by the lead analyst and parent/guardian
 - ◆ Session notes must be signed by the rendering practitioner and must include:
 - ⇒ The date, time, location and duration of services
 - ⇒ Session-specific targeted skills and individual's response addressing the treatment plan goals



Discharge criteria

Individuals receiving ABA therapy who meet one or more of the following will be considered ready for discharge and not eligible for ongoing authorization of services:

- The individual is no longer eligible for ABA therapy services as outlined in the Indiana Medicaid Applied Behavior Analysis Services Coverage Policy defined in *Indiana Administrative Code 405 IAC 5-22-12*.
- The level of functional impairment as expressed through behaviors no longer justifies continued ABA therapy services.
- The frequency and severity of maladaptive behaviors or level of functional impairment has declined to the point that they no longer pose a barrier to the individual's ability to function in their environment.
- ABA therapy services are not expected to bring measurable functional improvement to the individual, or measurable functional improvement is not documented.
- The individual does not demonstrate substantive progress toward goals for successive authorization periods in some or all of the following measures:
 - Social skills
 - Communication skills
 - Language skills
 - Adaptive functioning
 - Behavior
- Symptoms are worsening despite ABA therapy, or the individual is showing regression.
- The parent or guardian withdraws consent for treatment.

Provider enrollment updates

Effective Dec. 18, 2024, the IHCP will be making additional changes for provider enrollment related to ABA therapy providers.

Changes to existing ABA Therapist specialty

Under provider type 11 – *Behavioral Health Provider*, specialty 615 will be renamed from “ABA Therapist” to “ABA Therapist (Masters/Doctoral or HSPP).”

In addition, newly enrolling providers with this specialty will be classified as high risk upon initial enrollment and high, moderate or limited risk (*depending upon provider classification; see [Table 1](#)*) upon revalidation. Providers with existing enrollments under provider type 11, specialty 615, will be reclassified as high risk and (*for group and billing classifications*) will be subject to a fingerprint background check as well as a site visit. Providers impacted by the reclassification will receive a letter from Gainwell Technologies with further instructions on satisfying the additional screening requirements.



For rendering and billing enrollments, this specialty will continue to be available only to providers that hold a valid professional license as a health service provider in psychology (HSPP) or a valid board certification as a Master’s-level Board Certified Behavior Analyst (BCBA) or a Doctoral-level Board Certified Behavior Analyst (BCBA-D).

Creation of new provider specialties

The IHCP will begin enrolling additional ABA therapy providers Dec. 18, 2024:

- Provider type 11 – *Behavioral Health Provider*, specialty 624 – *ABA Therapist (Bachelors)*
- Provider type 11 – *Behavioral Health Provider*, specialty 625 – *ABA Therapist (RBT)*

The following enrollment requirements will apply to these new specialties:

- All enrollments will be classified as **rendering**.
- All Individuals will be classified as high risk upon initial enrollment and will be subject to a fingerprint background check.
- All individuals require a Type 1 (Individual) National Provider Identifier (NPI).
- All individuals require the certification appropriate to the provider specialty:
 - Board Certified Assistant Behavior Analyst (BCaBA) for specialty 624
 - Credentialed Registered Behavior Technician (RBT) for specialty 625

Summary of ABA therapy provider enrollment changes

The following table provides a summary of the risk level and certification/licensure requirements for the new and existing ABA therapy provider specialties.

Table 1 – ABA therapy provider specialty requirements, effective Dec. 18, 2024

Provider specialty	Classification	Risk level	Certification or licensure
ABA Therapist (Masters/Doctoral or HSPP)	Group	High (initial enrollment) Moderate (revalidation)	N/A
	Billing	High (initial enrollment) Moderate (revalidation)	One of the following: <ul style="list-style-type: none"> • HSPP licensure • BCBA-D certification • BCBA certification
	Rendering	High (initial enrollment)	One of the following: <ul style="list-style-type: none"> • HSPP licensure • BCBA-D certification • BCBA certification
ABA Therapist (Bachelors)	Rendering	High (initial enrollment)	BCaBA certification
ABA Therapist (RBT)	Rendering	High (initial enrollment)	RBT certification

Beginning April 1, 2025, the IHCP will require the rendering provider NPI on a claim billed for ABA therapy services to align with the procedure code modifier indicating the level of ABA therapy provider that rendered the service. *School corporations are exempt from this requirement. School corporations continue to be both the billing and rendering practitioner when billing for ABA therapy services.* See Table 2 for a summarization.

Table 2 – Billing modifiers used for ABA therapy services performed by ABA therapy provider specialties

Service performed by	Modifier used	Rendering provider specialty required
RBT	U1	Specialty 625
BcaBA	U2	Specialty 624
BCBA-D BCBA HSPP	U3	Specialty 615

Training opportunities

The IHCP will host two webinars to review the documentation and enrollment requirements for ABA therapy as shown in Table 3.

Table 3 – Schedule and registration links for ABA therapy provider training

Date	Time (Eastern Time)	Registration link
Wednesday, Dec. 4	11 a.m. – Noon	Register for Dec. 4 session
Wednesday, Dec. 18	11 a.m. – Noon	Register for Dec. 18 session

To participate in one of the webinars, please register for the Microsoft Teams meeting using the appropriate registration link in Table 3. After registration is completed, an email will be sent to you with the link to join the meeting.

If you wish to log in using your mobile device, download the Microsoft Teams mobile application from your device’s app store.

A recording of the webinars will be posted on the [IHCP Live](#) page at in.gov/medicaid/providers.

For more information

Authorization questions regarding fee-for-service (FFS) members should be directed to Acentra Health Customer Service at 866-725-9991. Questions about professional or institutional billing and reimbursement for FFS medical benefit should be directed to Gainwell Technologies at 800-457-4584 or your [Provider Relations consultant](#). Questions for members in the Healthy Indiana Plan (HIP), Hoosier Care Connect, Hoosier Healthwise and Indiana PathWays for Aging (PathWays) programs should be referred to the managed care entity (MCE) with which the member is enrolled.

QUESTIONS?

If you have questions about this publication, please contact Customer Assistance at 800-457-4584.

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