

Behavior Analysis Guide for Pediatricians

Table of Contents

- What are behavior analysis (BA) services?
- Who provides BA services?
- Who can receive BA services?
- What CPT codes are used for BA services?
- How do pediatricians identify who may need BA services?
- What screening tools can pediatricians use to identify a child who may benefit from BA services?
- What is the referral process/steps pediatricians should take if they or the parent thinks a child could benefit from BA?
- What is a comprehensive diagnostic evaluation (CDE)?
- How do I find a provider to complete the CDE for a patient?
- If BA professionals ask the primary care provider (PCP) or parents/guardians for a referral or extension of referral for BA services, what steps does the pediatrician take?
- What are the prior authorization requirements BA providers must follow?
- What documentation is needed from pediatricians for these services?
- What diagnosis codes are needed from pediatricians for referral to BA services?
- How can pediatricians obtain progress reports and progress notes from a BA provider?
- How do I find a BA provider for a patient?
- What resources can pediatricians use to obtain more information about BA services?
- Helpful information

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in Florida

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The following frequently asked questions detail Humana Healthy Horizons® in Florida’s guidance related to behavior analysis services. These services are available to our members younger than 21.

Question	Answer
<p>What are behavior analysis (BA) services?</p>	<ul style="list-style-type: none"> • Behavior analysis is an evidence-based therapy model for improving behavior and reducing or eliminating challenging behaviors. • The therapy model uses principles from learning theory to understand the underlying environmental causes of behavior and to help the individual to maintain personal independence and self-determination. • Behavior analysis is commonly used as a therapeutic intervention for individuals with autism or other developmental disorders who could benefit from behavioral training strategies. <p>Back to the table of contents</p>
<p>Who provides BA services?</p>	<p>According to the Florida Agency for Health Care Administration’s (AHCA’s) Behavior Analysis Services Coverage Policy, services must be rendered by one of the following:</p> <ul style="list-style-type: none"> • Lead Analysts who are one of the following: <ul style="list-style-type: none"> – Board certified behavior analyst (BCBA) credentialed by the Behavior Analyst Certification Board® – – Florida certified behavior analyst (FL-CBA) credentialed by the Behavior Analyst Certification Board® – Practitioner fully licensed in accordance with Chapters 490 or 491, F.S., performing within their scope of practice • Board certified assistant behavior analysts (BCaBA) credentialed by the Behavior Analyst Certification Board working under the supervision of a BCBA • Registered behavior technicians (RBT) credentialed by the Behavior Analyst Certification Board working under the supervision of a BCBA or BCaBA <p>Back to the table of contents</p>

Question	Answer
<p>Who can receive BA services?</p>	<p>Per AHCA's Behavior Analysis Services Coverage Policy, BA services can be provided to Florida Medicaid recipients under the age of 21 years requiring medically necessary BA services to address behavior that impairs a recipient's ability to perform a major life activity.</p> <p>Such functional impairment is expressed through the following behaviors:</p> <ul style="list-style-type: none"> • Safety—aggression, self-injury, property destruction, elopement • Communication—problems with expressive/receptive language; poor understanding or use of non-verbal communications; stereotyped, repetitive language • Self-stimulating—abnormal, inflexible or intense preoccupations • Self-care—difficulty recognizing risks or danger, grooming, eating, or toileting • Other behaviors not identified above but not limited to complexity of treatment, programming or environmental variables <p>BA services cannot be provided if they duplicate another provider's services.</p> <p>Note: BA services for eligible individuals 21 years and older are available through the iBudget Waiver.</p> <p>Back to the table of contents</p>
<p>What CPT codes are used for BA services?</p>	<p>BA services consist of the following services and codes:</p> <ul style="list-style-type: none"> • Assessment (97151, 97152, 0672T)—for the purpose of developing a treatment plan prior to initiation of services and when requesting continuation of services • Individual treatment (97153, 0373T)—specific delivery of BA therapy usually by a behavior technician • Group treatment (97154)—BA therapy delivered in a setting with 2 or more members • Individual treatment with Protocol Modification (97155)—observation of the member participating in individual therapy performed by a BCBA/BCaBA • Group treatment with Protocol Modification (97158)—observation of the member participating in group therapy performed by a BCBA/BCaBA • Family training (97156)—provides guidance to parents or caregivers to help implement BA strategies effectively. This helps reinforce therapeutic interventions outside of the therapy sessions. <p>Back to the table of contents</p>

Question	Answer
<p>How do pediatricians identify who may need BA services?</p>	<p>Identification begins with routine developmental screenings completed in accordance with the Early and Periodic Screening, Diagnostic and Treatment (EPSDT) periodicity schedule. The screening can identify developmental and behavioral concerns that can be treated with BA services.</p> <p>Upon identification of possible concerns, the pediatrician should refer the member for completion of a comprehensive diagnostic evaluation (CDE) which is also called a developmental psychological evaluation (further information below).</p> <p>Information and guidance on EPSDT services and periodicity schedules are contained within the American Association of Pediatrics Bright Futures Toolkit.</p> <p>Back to the table of contents</p>
<p>What screening tools can pediatricians use to identify a child who may benefit from BA services?</p>	<p>A PCP can use the following screening tools to determine possible developmental delays or behavioral issues that would indicate need for further evaluation and referral.</p> <ul style="list-style-type: none"> • M-CHAT-R/F Autism Screening • ASSQ Autism Spectrum Screening Questionnaire • CARS2 Childhood Autism Rating Scale, 2nd Edition • SWYC - Survey of Wellbeing of Young Children • Ages and Stages Questionnaires • Vanderbilt ADHD Screener • Conners 4 Rating Scale for ADHD <p>Back to the table of contents</p>
<p>What is the referral process/steps pediatricians should take if they or the parent thinks a child could benefit from BA?</p>	<p>If a pediatrician/PCP identifies a member who may have a condition such as autism or other developmental/behavioral issues that could benefit from behavioral analysis, the first step is to refer the member for a comprehensive diagnostic evaluation (CDE). The pediatrician should then refer the member to the appropriate services as identified in the summary finding of the CDE.</p> <p>If the CDE contains a recommendation for behavior analysis, the pediatrician can assist the member in finding an in-network BA provider, refer the member to Humana Enrollee Services for assistance and, if additional support is needed, the pediatrician can also refer the member to the Humana BA Case Management team by sending an email to FL_MMA_CM_Referrals@humana.com.</p> <p>Back to the table of contents</p>

Question	Answer
<p>What is a comprehensive diagnostic evaluation (CDE)?</p>	<p>A CDE is a type of evaluation performed according to national evidence-based practice standards. It can be performed by a multi-disciplinary team and must be led by a licensed practitioner working within their medical, developmental, or psychological scope(s) of practice. Examples of this type of practitioner can include (but are not limited to) a psychologist, neuropsychologist, neurologist or developmental pediatrician.</p> <p>The CDE must include assessment findings and treatment recommendations appropriate to the recipient. For example, the CDE may include data from behavioral reports by parents, guardians, and/or teachers; diagnostic testing related to recipients' development, behavior, hearing and/or vision; genetic testing; and/or other neurological and/or medical testing.</p> <ul style="list-style-type: none"> • The CDE is the national practice standard necessary to diagnose autism or other developmental or behavioral disorders and indicate the most appropriate treatment(s) to address the child's needs. • A CDE is a thorough review and assessment of the child's development and behavior. • A CDE may be performed by a multidisciplinary team or individual practitioner. • In either case, the CDE must be led by a licensed practitioner working within their scope of practice. • The CDE must use evidence-based practice standards, methods and instruments, and the report must include assessment findings and treatment recommendations appropriate to the recipient. <p>Back to the table of contents</p>

Question	Answer
How do I find a provider to complete the CDE for a patient?	<p>To search for a provider to complete a CDE:</p> <ul style="list-style-type: none">• For Region A, refer to Adult and Child Mental Health Care in Pensacola at 850-466-3200, Monday – Friday, 9 a.m. – 5 p.m., Eastern time, or search the Humana Find a doctor tool using psychology or psychologist as the specialty type.• For regions B–I, go to Carelon’s Find a Provider Tool and follow the steps below.<ol style="list-style-type: none">1. Type HUM in the box and select Humana Florida -Humana FL MMAC from the drop-down menu.2. Enter city, state or ZIP code and select the search magnifying glass.3. Once you have the full list, you can select a telehealth option on the left navigation bar if desired. This is often helpful for members who are in remote areas or have transportation concerns.4. Towards the top of the page is a slide bar to expand or reduce the search radius.5. On the left navigation bar, under Specialties and Services, select Psychological Testing and under practitioner select Psychologist.6. You can also filter down by age of the member and other preferences if desired.7. When you call to request a CDE, please be clear that you are looking for testing and evaluation to determine a diagnosis and recommendations for a child exhibiting behavioral problems or developmental delays. <p>Back to the table of contents</p>

Question	Answer
<p>If BA professionals ask the PCP or parents/guardians for a referral or extension of referral for BA services, what steps does the pediatrician take?</p>	<p>The pediatrician should verify that a CDE has been completed with a recommendation for BA treatment. Once the CDE has been reviewed, the pediatrician can refer the child (parent/caregiver) to an in-network BA provider (see question on how to find an in-network provider). A copy of the referral can be provided to the BA provider who will then include it in their request for prior authorization for BA services.</p> <p>The BA provider will then follow the necessary steps to obtain authorization for the initial assessment (97151) and upon completing the assessment, the BA provider then is required to request authorization for recommended treatment based on the assessment. Reassessment is required a minimum of every 6 months at the same time the treatment authorization is submitted.</p> <p>The pediatrician need only submit the referral to the BA provider. All additional documentation is required to be submitted by the BA provider when requesting authorization for BA assessment, services and reassessment.</p> <p>Back to the table of contents</p>
<p>What are the prior authorization requirements BA providers must follow?</p>	<ul style="list-style-type: none"> • BA services <u>require prior authorization</u> and <u>must be medically necessary</u>. • Authorization will be for no longer than 180 days. • New authorization requests should be submitted 30 days prior to expiration of current authorization to allow ample time to process without service disruption. • Documentation must be submitted with the authorization request: <ul style="list-style-type: none"> – Comprehensive diagnostic evaluation – Vineland 3/BASC-3 – Behavior assessment – Behavior plan – Reassessment and updated behavior plan at least every 6 months <p>Back to the table of contents</p>
<p>What documentation is needed from pediatricians for these services?</p>	<p>If the member chooses to change BA providers, a new referral may be requested by the parent/caregiver or new provider.</p> <p>Back to the table of contents</p>
<p>What diagnosis codes are needed from pediatricians for referral to BA services?</p>	<p>No specific diagnosis codes are required to support the need for BA services. However, AHCA requires BA providers to report the most current and appropriate diagnosis code to the highest level of specificity that supports medical necessity, as appropriate for the service.</p> <p>Back to the table of contents</p>

Question	Answer
<p>How can pediatricians obtain progress reports and progress notes from a BA provider?</p>	<p>BA providers are required to maintain documentation that includes referral information; behavior assessment; behavior plan; data tables and corresponding graphs to reflect progress; and session notes. All documentation must be signed and dated according to AHCA policy. BA providers do not automatically send these to the pediatrician. The pediatrician can request copies of relevant documentation with appropriate release of information forms signed by the parent/guardian.</p> <p>Back to the table of contents</p>
<p>How do I find a BA provider for a patient?</p>	<p>To search for a BA provider:</p> <ol style="list-style-type: none"> 1. Go to Humana’s Find a doctor tool. 2. Enter the member’s ZIP code and radius, and select look-up method using member ID or coverage type. If you use Medicaid as the look-up method, choose Medicaid and then the appropriate plan for the member. 3. Choose Search Category – Specialty, and enter Behavioral Analyst in the box under Specialty. 4. Select Search to see the results of all in-network providers within the search radius. 5. Filter the results on the left side navigation bar for specifics and member preferences, e.g., gender and languages. 6. To identify providers in a specific BA practice group, use the Affiliations filter on the left side of the screen. 7. BA providers provide care in a combination of locations including center, home or school but not always in all 3 locations. You can find the providers’ locations by filtering under practice focus. <p>Back to the table of contents</p>
<p>What resources can pediatricians use to obtain more information about BA services?</p>	<p>Behavior Analysis Coverage Policy</p> <p>Council of Autism Service Providers ABA Practice Guidelines</p> <p>Humana Healthy Horizons in Florida BA clinical toolkit</p> <p>Council of Autism Service Providers (CASP)</p> <p>Association for Science in Autism Treatment</p> <p>Association of Professional Behavior Analysts (APBA)</p> <p>Behavior Analysis Certification Board</p> <p>Association for Behavior analysis International</p> <p>Back to the table of contents</p>

Question	Answer
<p>Helpful information</p>	<ul style="list-style-type: none"> • Provider call center: 800-477-6931, Monday – Friday, 8 a.m. – 8 p.m., Eastern time • Provider Engagement team: FLMedicaidPR@humana.com • Member call center: 800-477-6931, Monday – Friday, 8 a.m. – 8 p.m., Eastern time • Interpreter: 877-320-2233, Monday – Friday, 7 a.m. – 7 p.m., Eastern time. This is the concierge phone number for the service accessibility line to schedule interpreters. • Humana Healthy Horizons in Florida provider website • Behavior Analysis Services Coverage Policy • Provider Reimbursement Schedules and Billing Codes page <p>Back to the table of contents</p>