Apple Health (Medicaid) Applied Behavior Analysis (ABA) policy and billing during the COVID-19 pandemic

Effective date 7/1/2021

In this time of the COVID-19 pandemic, Apple Health (Medicaid) is aware that usual and customary ways of providing and billing/reporting services may not be feasible. It is also understood that different providers will have different capabilities. Therefore, in the interest of public health, Apple Health is trying to be as flexible as possible and is creating new policies that will allow you to provide medically necessary services and bill or report the encounter with the most appropriate code you determine applicable using the guidance below. We will update this FAQ as necessary to respond to new information as it develops.

This FAQ reinforces the agency's current policies regarding telemedicine as defined in WAC182-531-1730 and covers the new telehealth policies that will only be in effect during this health care crisis. We will update this FAQ as necessary to respond to new information as it develops.

All providers are required to act within their scope of practice.

Frequently Asked Questions

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PART I: Questions about policy and billing for ABA.

Q: What types of technology can I use to provide applied behavior analysis (ABA) to enrolled children and their families who already have ABA orders from a Center of Excellence (COE)?

A: For the duration of this public health emergency, Washington Apple Health will allow remote services utilizing telemedicine (HIPAA compliant interactive, audio and video telecommunications) and audio-only phone communication, for services that can be delivered with functional equivalency to the face-to-face service. Providers must keep complete and accurate documentation according to existing benefit policy requirements. Providers are expected to exercise professional judgment and use these technologies only for services that can be delivered appropriately and effectively via remote communication. Under the circumstances, Apple Health is covering these modalities in lieu of in person visits to support evaluation, assessment and treatment of clients..

Q: How do I bill for ABA services if I am using telemedicine to conduct the visit?

A: Report the procedure code (CPT) from the ABA billing guide as you would if the encounter was in person. Always document the modality used for delivery in the health care record.

- If your Electronic Health Record (EHR) allows you to report the encounter as described in ABA billing guide, using the place of service code "02"

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- If your EHR doesn't allow you to use this modifier or POS code, and you cannot get your EHR modified timely to support billing in this way, report the procedure code (CPT) from the billing guide.
- If you qualify to bill for an origination site fee (Q3014) follow the directions on pages 86 and 87 of the [physicians billing guide](#).
- Please see HCA's brief on how to [bill for telemedicine services](#) to prepare claims.
- The Apple Health MCOs are also following this policy.*

Q: How do I bill if I am using another audio-only/telephone to conduct the ABA service?

A: HCA is aware that there are instances when telemedicine is not an option and providers need to use other methods to provide care. Apple Health is temporarily allowing the following codes to be used when current practice for providing services is not an option (face to face, telemedicine) and there are extraordinary circumstances involved.[1] Report the procedure code from the ABA billing guide as you would if the encounter was in person. During this crisis, you can provide any procedure listed in the ABA billing guide using telehealth, except as described below. Always document the modality used for delivery in the health care record.

- If your Electronic Health Record (EHR) allows you to report the encounter as described in the ABA billing guide, using the "CR" modifier with the POS indicator that best describes where the client is, for example "12" is home; do so.
- If your EHR doesn't allow you to use this modifier or the POS codes, and you cannot get your EHR modified timely to support billing in this way, report the procedure code from the ABA billing guide.
- Please see HCA's brief on how to bill for telemedicine services at https://www.hca.wa.gov/assets/billers-and-providers/telehealth-brief-for-COVID-03-2020.pdf to prepare claims.
- The Apple Health MCOs are also following this policy.*

Q: Are there any ABA services that can't or shouldn't be delivered using one of these technologies?

A: Yes, some ABA procedures are not appropriate for using telehealth technologies. They include:

- Therapeutic behavior services per Diem (H2020),
- Functional analysis for severe maladaptive behavior in a specific setting (0362T),
- Adaptive behavior treatment with protocol modification LBAT and 2 or more techs (0373T).

The delivery of these services as described in the ABA billing guide do not lend themselves to a telemedicine/telehealth delivery model. Another method will be needed to meet the family's needs. Document in the health care record how services are rendered.

Q: Do I need to take any measures to inform the client about these technologies that may not be HIPAA compliant?

A: Yes, clients must be informed when using a non-HIPAA compliant technology. Their consent to participate using these technologies can be verbal, but the information provided and the verbal consent must be documented and dated. Once in-person visits are resumed, the client must sign a consent form that is communicating in writing that the client provided consent to use a platform that could not protect their personal health information. HCA is accessing training for providers on a date to be announced to support providers with this activity.

Q: If I am making the call from my house to the client that is at home, what POS do I use?

A: Place of Service (POS) is where the client receives the medical service. For example, if the client is at home, use POS 12. The MCOs will follow this policy as well.*

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[1] 1   The provider is quarantined at home, the clinic is closed, the client lives remotely and doesn't have access to the internet or the internet does not support HIPPA compliance, or the circumstances require the provider to utilize a different technology modality to provide behavior health services.

PART 2: Authorization requirements

Q: I currently have authorization for H2020. Do I need to submit a new authorization request for these services?

A: For fee for service clients:

- If current authorization is for H2020 and your agency is temporarily suspending Intensive Day Treatment and you will provide parent training or other ABA service that doesn't require prior authorization
  - Do nothing with the authorization.

- If you are planning to treat with a different ABA service that requires authorization please submit a request for the new code via barcode attachment to the current authorization for H2020 with a start date.

  These may be done retroactively to March 1, 2020
  For information is on how to submit additional documentation, please see the prior authorization webpage.

** Please follow the instructions below to submit the additional information requested to this existing request:

1.) Upload the documentation utilizing the ONLINE SUBMISSION.

- Select Prior Authorization Inquiry to the left of your screen located below the heading of Prior Authorization.

- Fill in the prompted required information and click 'Submit'.

- The next screen will refresh to the original authorization information.

- In the top left corner, click 'Add Attachment'

- This will allow you to upload the pended documentation (including photos and x-rays).

Or

2.) Go to the following link: http://www.hca.wa.gov/billers-providers/providerone-resources

- Click on Document Submission Cover Sheets and then select PA (Prior Authorization) Pend Forms (under Prior Authorization Request)

- Type the 9-digit Reference Number from your letter into the Authorization Reference # field and hit Enter (this will expand the barcode shown).

- Click on the Print Cover Sheet button; choose Yes if you are asked whether you want to allow the document to print.

- Fax the barcode sheet as the FIRST page, (no coversheet) then the supporting documents to 1-866-668-1214 and the documents will be added to this authorization.

Note: We will add information from the managed care plans in the updates next week.

PART 3: MCO specific ABA authorization policies during the COVID-19 pandemic
Community Health Plan of Washington: Check provider bulletins daily on our website.

ABA providers authorized for ABA Day Treatment (H2020) are already authorized by CHPW for in-home ABA including 97151-97157, and do not need to request prior auth. They can provide any face-to-face services via telehealth and get paid. Standard practice is to document each telehealth visit as such. The need for initial face-to-face assessment for behavioral health (BH) treatment is waived by DOH during the pandemic.

PART 4: Resources for guiding ABA practice during the COVID 19 pandemic

Q: I would like to offer telemedicine but do not have the resources to set up the software. Is there any assistance?

A: Yes, HCA has a limited number of licenses for software which providers may submit an application for.

Q: Where can I find out more on innovative techniques in keeping with the ABA model of care during this time of crisis?

A: We will post what providers share in the weekly updates as available

- BACB - https://www.bacb.com/ethics-guidance-for-aba-providers-during-covid-19-pandemic-2/

PART 5: More information

Please email us your questions and comments.