Applied Behavior Analysis (ABA) Technical Assistance

February 27, 2025 Noon – 1 p.m.



Presenters

- Health Care Authority (HCA)
 - Alyssa Jennings, ABA Program Manager
 - George Wagner, Provider enrollment Manager
- Department of Health (DOH)
 - Shelbee Scrimo, ABA Program Manager
- Community Health Plan of Washington
 - Jae Switzer, Provider Relations Specialist
- Coordinated Care
 - Meagan Rakoci-McDonald, Manager of Provider Relations
- Molina Healthcare of Washington
 - Audrey Silliman, Director of Provider Relations
 - Lynette Jordan, Director of Contracting
- UnitedHealthcare Community Plan
 - Kate Naeseth, Children's Behavioral Health System Administrator
- Wellpoint Washington (previously Amerigroup)
 - Steven Romero, Director of Provider Relationship Management



Background

- Required to enroll as servicing providers by Washington Administrative Code (WAC):
 - Licensed behavior analysts (LBA)
 - Licensed assistant behavior analysts (LABA)
 - Certified behavior technicians (CBT)
- In early 2023, we learned that not all of these providers are enrolled.
- ▶ June 26, 2023 HCA first communicated about this issue, with an initial date of compliance of July 1, 2024.
- HCA heard from ABA providers and provider advocacy groups that providers needed more time based on extended processing times (with DOH and HCA).
- HCA moved the date to June 30, 2025.



Enrollment process

By June 30, 2025, all LABAs and CBTs must:

- 1. Have an active license/certification with DOH.
- 2. Obtain an NPI.
- Enroll with HCA as a servicing provider under a group's core provider agreement.
- 4. Be listed on a provider roster submitted to MCOs the group is contracted with.
- 5. Have their NPI captured in the servicing provider box on claims for services they perform for dates of service on and after July 1, 2025.



Licensing with DOH

Shelbee Scrimo, ABA Program Manager

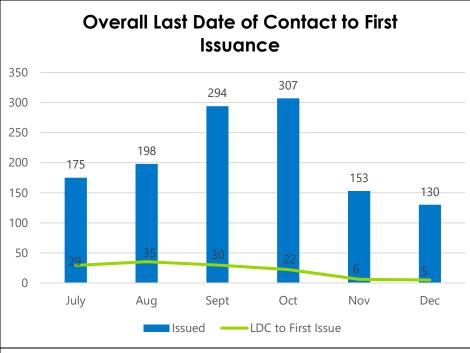
Department of Health

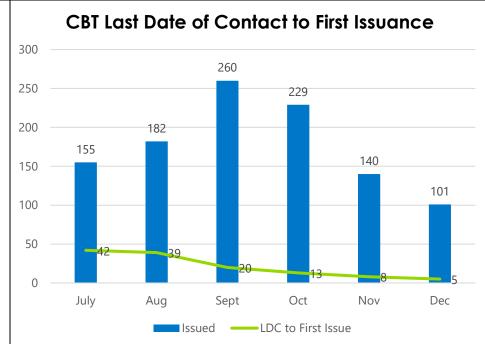
Application processing timeframe

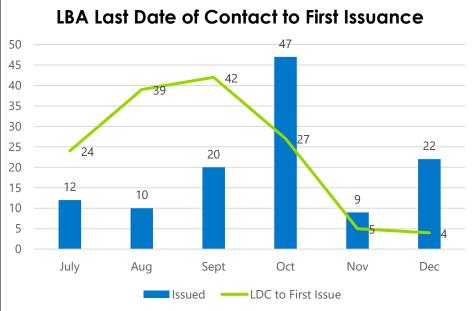
- An overview of credential times can always be seen on the DOH website at <u>Application Status | Washington State Department of</u> <u>Health</u>
- Currently we are processing applications with cleared payment on or before December 17, 2024
- Next slide has the most current credentialing timeframes.

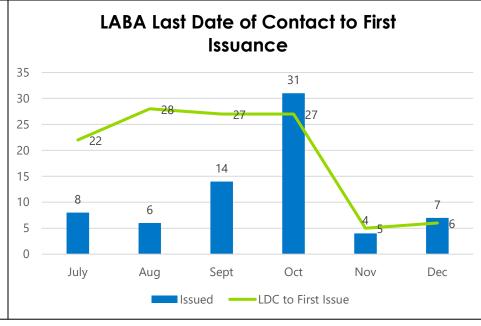
Contact information

- Shelbee Scrimo, Program Manager
- Email: <u>aba@doh.wa.gov</u>
- Phone: 360-236-4723









Provider Enrollment with HCA

George Wagner, Provider Enrollment Manager



How to enroll with HCA

- HCA's provider enrollment website
- Instruction manuals by enrollment type:
 - Non-billing
 - ► <u>Individual billing provider</u>
 - Group billing provider
 - Servicing provider
- Contact provider enrollment

Phone: 1-800-562-3022, ext. 16137

Phones are open: Tuesdays and Thursdays from 7:30 a.m. to 4:30 p.m. (Closed from noon to 1 p.m.)

Phones are closed: Mondays, Wednesdays, and Fridays.

Email: providerenrollment@hca.wa.gov



Contracting with MCOs

- Providers also contract with the MCOs:
 - Community Health Plan of Washington
 - Coordinated Care
 - Molina Healthcare of Washington
 - UnitedHealthcare Community Plan
 - Wellpoint Washington (previously Amerigroup)



MCO contracting, prior authorization, and claims



Community Health Plan of Washington

Jae Switzer, Provider Relations Supervisor

Join our Network

To join CHPWs provider network your first step is to complete the Provider Enrollment Request Form found here: CHPW Provider Enrollment Request Form

CHPW uses DocuSign digital contracting. All data entered on the enrollment form is auto-populated on a DocuSign agreement. We ask that your information is entered as requested -- most importantly the identification of the "Intended Signatory" and their email, as well as the 3rd Party or Consultant as a direct Contributor throughout the contracting process.

To enroll as a network provider with CHPW, please note the following HCA requirements:

- Must have a signed Core Provider Agreement (CPA) with the Health Care Authority (HCA).
- CPT, LBA, LABA, Counselors, Therapist etc. must have an NPI number.
 - Provider NPI numbers must be registered with the HCA.

For contracting questions, please email:

Provider.Contracting@chpw.org





Provider Credentialing

For <u>new</u> provider credentialing:

- CHPW uses CAQH for a credentialing vendor
 - Email Provider.Credentialing@chpw.org when your WPA is available on the CAOH database.



or

Email a completed WPA to Provider.Credentialing@chpw.org.

Please note the following:

- Re-credentialing is required every 3-years, notice will be sent to the contact on file **5-months** in advance.
- Provider rosters should be sent routinely and anytime there is a provider update/change/add/term etc.
 - A roster template can be found here: ABA Provider Roster Template



Provider Credentialing

What ABA Provider Types need Credentialing:

- Licensed Behavior Analysts (WA license prefix BA)
- MH/BH Counselors and Therapists SLP, OT, PT, etc.

What ABA Provider Types do not need Credentialing:

- Certified Behavior Technician (WA license prefix CB)
- Licensed Assistant Behavior Analyst (WA license prefix AB)
 - ➤ If/when a BA license is issued, provider will require credentialing the original effective date for the provider will remain the same.

All ABA provider types should be included on your rosters and the providers who do not require credentialing will be loaded in CHPW's system as cred omitted.

For credentialing questions or to update your contact information, please email: Provider.Credentialing@chpw.org





Prior Authorizations

The following links will provide access to:

- CHPW's Prior Authorization List & BH Utilization Guidelines:
 PA List and Utilization Guidelines Behavioral Health
- Procedure Code Lookup Tool

Note: The Procedure Code Lookup Tool is not intended to replace the use of the Prior Authorization list, nor is the tool necessarily complete. Providers should only use this tool as a supplement to and after first consulting the Prior Authorization list.

Please use the ABA Therapy Initial Request Form and fax to (206) 613-8873: ABA Prior Authorization Form

For questions or assistance, contact customer service at: (800) 440-1561



Billing/Claims

Billing for ABA therapy involves several steps before and after providing the service. Key steps include confirming eligibility and prior-authorization and then using the right codes, modifiers, taxonomy codes etc. on your claims. It's important to keep track of payer and state requirements.

Timely Filing Requirements

CHPW maintains the following timely filing requirements for claim submissions:

- CHPW is the <u>primary payer</u>: original claim must be received <u>within 12 months</u> from date of service (DOS).
- CHPW is the <u>secondary payer</u>: original claim must be received within 12 months from the process date noted on the primary payer's remittance advice (RA) or explanation of benefits (EOB).
- Corrected Claims: must be received within 24 months of DOS.

Note: When CHPW is the secondary payer, CHPW follows the primary payors denial/processing policies.

Send claims to:
Electronic Claim EDI 837 Transaction
Availity Payor ID: CHPWA

Paper Claim – Send to: CHPW Claims, PO Box 269002 Plano, TX 75026-9002

Billing/Claims

Applied Behavioral Analysis (ABA) Taxonomy

Applied Behavioral Analysis (ABA) providers must use taxonomy number 103K00000X for billing ABA therapy services to ensure claims are paid appropriately. This is the only applicable, reimbursable taxonomy for ABA CPT codes. Providers must enter this taxonomy code in both the billing and the servicing taxonomy fields on the CMS-1500 (HCFA) claim form.

Please see the NUCC's Health Care Provider Taxonomy Code Set for more information.

For more information, please access the following links:

HCA_ABA Program Billing Guide

CHPW Bulletin_Billing & Rendering Taxonomy Requirements/

For claims questions, please contact customer service: 800 440-1561



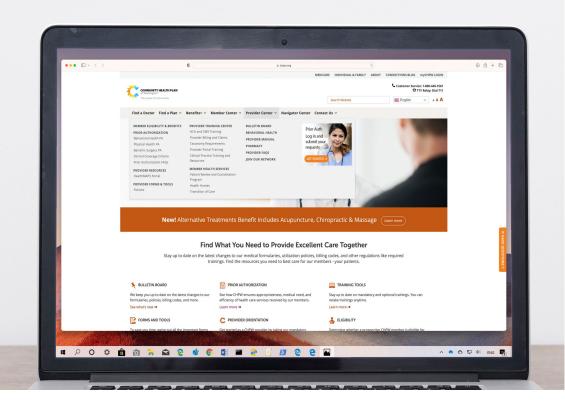
Provider Center Web Site Resources

Stay up to date on the latest changes to our medical formularies, utilization policies, billing, trainings and regulatory requirements.

Provider Center Web Site

Provider Manual

Provider Bulletin Board





HealthMAPS Portal

Registered users have access to the following information:

The ability to send claims and corrected claims directly to CHPW

Eligibility and Benefit Details
 HealthMAPS Portal Training & Guides:

Member Rosters
 HealthMAPS Provider User Guide

Capitation Rosters
 Instructions for Professional Claims Entry

Other Health Information (COB)
 Instructions for Corrected or Replacement Claims Entry

View Claim Status & Run Claims Reports
 Instructions for Institutional Claims Entry

Send and receive secure messages with CHPW.
 HealthMAPS FAQ

Register for HealthMAPS



JIVA Care Management Portal

Registered users have access to the following:

Submit prior authorization requests, referral requests

Submit Inpatient Notification

Review Status of Requests

View Letters (approval, denial, correspondence)

• Register for JIVA: Register here

Note: JIVA is the preferred method for submitting requests.

JIVA Portal Training & Guides:

JIVA Portal User Guide

JIVA Portal FAQ

JIVA Portal Training Videos

Registration issues or technical assistance:

Contact Portal Support at portal.support@chpw.org



Coordinated Care of Washington

Meagan Rakoci-McDonald, Manager of Provider Relations

Coordinated Care of Washington

- How to Contract with us:
 - Navigate to the "Become a Provider" page on our website here: https://www.coordinatedcarehealth.com/providers/become-a-provider.html
 - Email questions to: JoinOurNetwork@coordinatedcarehealth.com

Demographic Updates:

- Roster Templates can be found here: https://www.coordinatedcarehealth.com/p
 https://www.coordinatedcarehealth.com/p
 https://www.coordinatedcarehealth.com/p
 https://www.coordinatedcarehealth.com/p
 roviders/resources/provider-update-tools/add-provider.html
 <a href="roviders-update-tools/add-provider-update-tools/
- Updated Rosters should be sent to: <u>WAProviderUpdates@coordinatedcarehe</u> alth.com

Claims Issues/Questions

Provider Services

• 1.877.644.4613

Provider Portal

coordinatedcarehealth.com/login.html

Provider Engagement Administrator

 coordinatedcarehealth.com/pro viders/regional-contacts.html

4 Coordinated Care Website

https://www.coordinatedcarehealth.com/providers/resources/forms-resources.html



Coordinated Care of Washington

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Prior Authorization:

- Pre-Auth Tool
- *Required PA Form <u>Form Applied Behavioral Analysis</u>
 Prior Authorization form (PDF)
- Contacts
 - o Provider or Member Services 1-877-644-4613
 - Escalation Contact Leona Parker 1-314-742-6321 or Leona.M.Parker@CoordinatedCareHealth.com
- Coordinated Care Provider Manual



Claim Submission:

- Coordinated Care Provider Manual
 - 1. Electronic Submission Section 19.18
 - 2. Secure Provider Web Portal Section 19.24
 - 3. Paper Claim Form Section 19.25

Claim Payments:

Payspan



Molina Healthcare of Washington

Audrey Silliman, Director of Provider Relations Lynette Jordan, Director of Contracting

Molina Core Functions for ABA Providers

Molina Credentialing

- BCBAs must be individually credentialed with Molina of Washington.
- CBTs and LABAs DO NOT need to be individually credentialed with Molina.
- Add these clinicians to your group before
 6/30/25 by either:
 - 1) Completing a new <u>provider mini-application</u> for each clinician OR
 - 2) Submitting a roster using the **standard ABA template** to Molina at:

 mhwproviderinfo@molinahealthcare.com

Contracting

- ABA providers should follow Molina's standard contracting process.
- Begin the process of joining our network of providers by completing and submitting a <u>Contract Request Form</u> and a W-9 to: MHWProviderContracting@MolinaHealthcare.com

Claims & Payment

Claims can be remitted to Molina via:

- 1. Paper (LEAST PREFERRED)
- 2. Availity Portal
- 3. Clearinghouse:

МСО	Payer ID(s)	Contact Number	Address
Molina Healthcare	38336		Molina Healthcare of Washington P.O Box 22612 Long Beach, CA 90801

Sign up for Electronic Funds Transfer/Direct Deposit here:

https://enrollments.echohealthinc.com/efteradirect/molinaHealthcare

Authorizations

- Prior Authorization (PA) is typically required for ABA services.
- Please utilize Molina's <u>Prior Auth Look-up</u> Tool to determine if PA is needed.
- PA is generally granted at the Group level, so anyone affiliated under the group can render the service.





Contacts

Type of Question	Contact	
Credentialing Requests, Provider Roster Submissions, & Mini-App Submission	mhwproviderinfo@molinahealthcare.com	
Contracting	MHWProviderContracting@MolinaHealthcare.com	
Claim Appeals and Questions	Submit Claim Disputes/Appeals via Molina's <u>Availity Portal</u> General Claim Questions: Contact Provider Services at (855) 322-4082 Escalations: Contact your assigned <u>Provider Relations</u> representative	
Authorizations	Denise Kohler, BH UM Manager 425-270-1643 denise.kohler@molinahealthcare.com	
Care Management Molina's Autism CM team is comprised 4 BCBA Case Managers that support families needing connecting to ABA and other related services.	MHWCMReferrals@molinahealthcare.com Care Management Referral Form	
General ABA Questions	Aba@molinahealthcare.com 1-800-869-7175	
Availity Portal	1-800-262-4548 Open 5 am- 5pm M-F	
ECHO (Electronic Funds Transfer and Remittance System)	1-888-834-3511	





UnitedHealthcare Community Plan

Kate Naeseth, Children's Behavioral Health System Administrator



Rosters

All ABA groups have been sent the roster Working on setting up an online roster by 6/30/2025

Current process:

- Send updated rosters to <u>waabacaid@uhc.com</u>
- Submit updates monthly effective dates will reflect date listed on roster

Rendering provider is required to be loaded under group record prior to submitting claims

Related questions regarding process, send email to waabacaid@uhc.com



Prior Authorizations

Applied Behavior Analysis (ABA) Corner-

Behavioral Health | UnitedHealthcare Community Plan of Washington | UHCprovider.com_or

Provider Forms and References | UnitedHealthcare Community Plan of Washington | UHCprovider.com

- Here you can find Applied Behavior Analysis forms and resources including the Applied Behavior Analysis ABA Treatment Request Form-Online Version
- Or you can submit via fax at 877-217-6068

ABA approvals follow the policy posted under the Clinical Resources tab on provider express.com. Please ensure you have called the number on the back of the member's UnitedHealthcare card to confirm eligibility for ABA and use of this portal.

Claims

Claim tools:



Instructions and links can be found at UHCprovider.com/claims -

https://www.uhcprovider.com/en/claims-payments-billing.html

Visit UHCprovider.com/edi for information about connecting your vendor or clearinghouse -

http://uhcprovider.com/edi

For questions, please call the number on the back of the member's UnitedHealthcare card.

Wellpoint Washington

Steven Romero, Director of Provider Relationship Management



Roster Submission Information

Rosters are uploaded through the Availity PDM tool.

Template?

The standard Washington All MCO Roster Template linked below. or the standard Wellpoint roster template.

WA All MCO Roster Template

Email a Provider Relations associate: Did you have a question? You can <u>message</u> the Provider Relations team. Your Provider Relations representative will respond within 2 business days.

- Accessing the Availity PDM tool:
 - Log on to [<u>Availity.com</u>] and select My Provider Data Management to begin the attestation phase.
 - If submitting a roster, find the TIN/business name for which you want to verify and update information.
 - Before you select the TIN/business name, select the three-bar menu option on the right side of the window, select Upload Rosters, and follow the prompts.



Prior Authorization Information

Prior authorization can be requested via phone, fax, or Availity portal. Wellpoint Washington's preferred forms are located on our website:

https://www.provider.wellpoint.com/washington-provider/resources/forms

Prior Authorization Phone: 833-731-2274

Physical Health Fax: Outpatient: 855-231-8664

Home Health: 844-528-3681 Skilled Nursing: 855-225-9940

Other: 800-964-3627

Behavioral Health Fax: Inpatient: 1-844-430-6806

Outpatient: 1-844-442-8012

Prior Authorization Lookup Tool (PLUTO)
https://www.provider.wellpoint.com/washington-provider/resources/prior-authorization/prior-authorization-lookup

authorization-lookup

- The request for prior authorization must be accompanied by clinical documentation that could be utilized to determine medical necessity. The clinical information that Wellpoint Washington would need to determine medical necessity for the service requested could include but are not limited to the following:
- Center of Excellence Treatment Provider Recommendation: ABA prior authorization requests require treatment recommendations for a qualified Center of Excellence Provider.
- ABA Level of Support Documentation: Documentation of level of support required utilizing Level of Support Requirement Form provided by Health Care Authority.
- <u>Treatment Plan:</u> A detailed plan outlining the proposed treatment, including dosage, frequency, duration, and any alternative treatments that have been tried or considered.
- <u>Progress Notes:</u> Documentation of ongoing assessment of the patient's condition, including any changes in symptoms or response to previous treatments.
- Current Medications: List of current medication.
- <u>Prior Treatment Records:</u> Documentation of previous treatments and their outcomes to demonstrate the patient's response to prior interventions.

Wellpoint. Claims Submission Information

<u>Claims submissions:</u> Wellpoint accepts claims submission via EDI vendor's and mail.

- Availity EDI payor ID: WLPNT
 - Wellpoint accepts claims from other EDI vendor's as well.
 Provider will need to confirm payor ID with vendor.
- Mail:
 - Wellpoint Washington
 Washington Claims
 PO Box 61010
 Virginia Beach, VA
 23466-1010

- Accessing the Availity claims submission:
 - Log on to [Availity.com] and select Claims & Payments.
 - Select claim type from drop down menu
 - ► Via Availity providers can also submit claim disputes, appeals, and check claim status.
 - ► For technical assistance providers can contact Availity at: 1-800-282-4548
 - ► For claim status check or wellpoint assistance provider can contact provider services at: 833-731-2274 M-F 8am-5pm PST

Apple Health (Medicaid) fee for service prior authorization and claims



Apple Health FFS – Prior authorization

- Instructions for submitting prior authorization requests by fax or direct data entry
- ABA billing guide
- ProviderOne billing and resource guide
- Contact
 - ► **Toll-free:** 1-800-562-3022
 - ► **Medical:** ext. 15471 and ext. 52018
 - ► Hours: Tuesday through Thursday, 8 a.m. to noon



Apple Health FFS – Claims

- Submit claims via <u>ProviderOne</u>
 - ProviderOne billing and resource guide
 - ► Learn ProviderOne
 - ProviderOne discovery log
 - ProviderOne maintenance
- Contact
 - Secure web form
 - ▶ Phone: 1-800-562-3022 (choose "provider services")

Note: HCA's system edits will deny/reject the claim if the servicing provider NPI has not been approved for enrollment by HCA.



Other resources



HCA's ABA Resources

- ABA program information for providers
- Apple Health FFS ABA provider list
- Center of Excellence list
- HCA billing guides and fee schedules
- Chapter 182-531A Washington Administrative Code



HCA Contact info

Topic	Phone	Email	Hours
All general provider and client questions	Medical Assistance Customer Service Center (MACSC) 1-800-562- 3022	Secure web form	Provider line 7 a.m. – 4:30 p.m. Monday – Friday Client line 7 a.m. – 5 p.m. Monday – Friday
Provider claim denials	1-800-562- 3022 Follow IVR prompts	Secure web form	8 a.m. to noon and 1 p.m. to 3:30 p.m. Monday – Friday
Authorization – medical	1-800-562- 3022 Ext. 15471	Secure web form	8:30 a.m. – 4:30 p.m. Tuesday – Thursday
Provider Enrollment	1-800-562- 3022 Ext. 16137	providerenrollment@hca.wa.gov	7:30 a.m. – noon and 1 p.m. to 4:30 p.m. Tuesday and Thursday
ABA program	-	aba@hca.wa.gov	-
Training on use of ProviderOne	-	providerrelations@hca.wa.gov	-
Managed care contract staff	-	HCAMCprograms@hca.wa.gov	<u>-</u>

MCO contact info for members to request care coordination

МСО	Phone	Email and website
Community Health Plan of Washington	 ABA line: 1-844-225-8624 Primary line: 1-800-440-1561 	• <u>chpw.org/contact-us</u>
Coordinated Care Apple Health Core Connections/Foster Care	 Primary line: 844-354-9876 (press "2" for member, then "5" for care coordinator) 	<u>coordinatedcarehealth.com/members/foster-care/mentalhealth.html</u>
Coordinated Care Apple Health Managed Care	 Primary line: 877-644-4613 (press "2" for member, then "5" for care coordinator) 	<u>coordinatedcarehealth.com/members/medicaid/mentalhealth.html</u>
Molina Healthcare of Washington	 ABA line: 509-321-1365 (TTY 711) Primary line: 800-869-7175 (TTY 711) 	 Email: aba@molinahealthcare.com Website: molinahealthcare.com/members/wa/m em/medicaid/imc/covered/autism.Aspx
UnitedHealthcare Community Plan	 ABA Line: 866-456-5376 Member line: 1-877-542-8997 	• <u>uhc.com/communityplan</u>
Wellpoint Washington	 ABA line: 1-833-324-2088 Primary line: 833-731-2167 (TTY 711) 	wellpoint.com/wa/medicaid



Questions?

