



Applied Behavior Analysis Services

MO HealthNet Division

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ABA SERVICES - MHD

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Public Health Emergency Flexibility

- MHD is waiving RBT credential requirement for technicians during COVID-19 event due to closure of testing centers – for technicians who otherwise meet all requirements but are unable to take RBT test. March 1, 2020 through national emergency period, including extensions.
- Services may be delivered via telehealth, report place of service 02, do not report U8 modifier. (Telehealth delivery is not limited to PHE.)

Established Diagnosis of Autism Spectrum Disorder (ASD)

 Diagnostic evaluation performed by physician or psychologist recommending ABA as medically necessary

 Must submit a copy along with precertification request in order to assess for ABA services

DSM-5 Update

- APA published a supplement to DSM-5 in October, 2018 with updated criteria for ASD
- "As manifested by the following" changed to "as manifested by all of the following" – the update clarifies that all three of Criterion A items are required:
 - Deficits in social-emotional reciprocity
 - Deficits in nonverbal communicative behaviors used for social interaction
 - Deficits in developing, maintaining, and understanding relationships

Autism Spectrum Disorder (ASD)

- Covered ICD-10 Codes
 - F84.0 Autistic Disorder
 - F84.3 Other Childhood Disintegrative Disorder
 - F84.5 Asperger's Syndrome
 - F84.8 Other Pervasive Developmental Disorders

FAQ: Concurrent Billing

 Protocol modification (97155) may be reported concurrently with technician delivered services (97153) when the participant is present, one or more protocols have been modified, and the behavior analyst or assistant behavior analyst is directing the technician.

Precertification

- All ABA Services Require Precertification
- Fax the Request for Applied Behavior Analysis (ABA)
 Precertification Form to request:
 - Assessment for Intervention Planning
 - ABA Intervention
 - Continued ABA Intervention

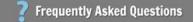
Finding the Precert Form



Information for Providers

home » mo healthnet division » providers

Missouri's Medicaid program is called MO HealthNet. MO HealthNet covers qualified medical expenses for individuals who meet certain eligibility requirements. Depending on the type of coverage they qualify for, participants will get their



services through the MO HealthNet Managed Care Program or the MO HealthNet Fee-For-Service Program. Providers may choose to enroll with one or both of these programs:

- Fee-For-Service Fee-For-Service Providers must be enrolled in the MO HealthNet program to provide medical services. Those who participate in the MO HealthNet Program agree to accept MO HealthNet payment as reimbursement in full for any services provided to MO HealthNet participants.
- Managed Care Providers who would like to offer services through the MO HealthNet Managed Care Program
 should contract with a MO HealthNet Managed Care health plan directly. Services are provided in accordance with
 the terms and conditions of the contract between MO HealthNet and the MO HealthNet Managed Care health
 plans. Participants enrolled in MO HealthNet Managed Care get their services through the health plan's provider
 network. The health plan network may include providers not enrolled in the Fee-For-Service Program.





Scroll Down on Next Page

Choose your category

Please choose a program below for more information about the program you are enrolled with, or the program you would like to enroll with, based on the patients you serve.

Fee-For-Service Providers



Serves:

- · People with Disabilities
- Seniors
- Blind & Visually Impaired
- . Women with Breast or Cervical Cancer

Managed Care Providers



Serves:

- Kids
- Pregnant Women & Newborns
- Families

MO HealthNet Opioid Prescription Intervention (OPI) Program

Email Updates

Click to sign up for MO HealthNet News.

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Fee-For-Service Providers

Policies & Procedures

- Provider Bulletins
- Provider Hot Tips
- Provider Manuals
- Out-of-state non-bordering services
- Policy Updates

Billing

- Apply for EMOMED
- EMOMED
- GEMT Uncompensated Cost Reimbursement Program, updated 09/25/18
- · Claims processing and payment schedule
- Exempt Diagnosis Table 2, updated 10/22/18
- · HIPAA EDI companion guide
- · Radiology benefit management information
- Remittance Advice Remark Codes and Claim Adjustment Reason Codes
- School District Administrative Claiming (SDAC)

Provider Forms

- MO HealthNet forms
- · Nursing Facility Cost Report
- EBPT Invoice Form

Forms are Alphabetical



Forms

Accident Report [TPL-2P]

Acknowledgment of Receipt of Hysterectomy Information

Addendum to the Plan of Treatment/Medical Update

Air Fluidized/Low Air Loss Therapy

Authorization by Clinic Members

Remittance Advice

Report of Hearing Aid Evaluation [RHAE]

Request for Applied Behavior Analysis (ABA) PreCertification

Request for Brand Name Drug Prior Authorization

Risk Appraisal for Pregnant Women

Second Surgical Opinion Form

Precertification (cont.)

- Must obtain prior to service delivery
- Form includes worksheet to determine hours
 - Based on number of units per procedure
 - You will have to calculate number of hours
 - Form will add up hours for you and populate Total Hours
 - Select Start Date
 - List ICD-10 diagnostic code

Behavioral Health Help Desk

- Fax Precertification form and supporting documentation to 573-635-6516
- You should get a fax saying it was received
- If questions, call 866-771-3350
- If additional information needed will receive fax
- Will receive precertification number, max number of hours, expires in six months

Provider Enrollment

- Group practices recommended enrolling as Autism Clinic (50) if you have at least two licensed behavior analysts – "AC" specialty
- This allows precertification under the clinic number so that other performing providers within the clinic can provide services
- Enrollment Guide: https://peu.momed.com/peu/momed/presentation/providerenr ollmentgui/Internetman121103.htm
- Application: <u>https://peu.momed.com/peu/momed/presentation/commongui/PeHome.jsp</u>
- Email: mmac.providerenrollment@dss.mo.gov

Participant Appeal Rights

- If precertification request is denied, the participant will receive a letter.
- Hearing may be requested by the participant, in writing, to the MO HealthNet Division, Participant Services Unit (PSU), P.O. Box 6500, Jefferson City, MO 65102.
- PSU 800-392-2161
- Participant has 90 days to appeal

Questions

