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FLORIDA MEDICAID

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Revised Alert for Developmental Disabilities Home and Community Medicaid Waiver Providers: Medicaid Coverage and Prior Authorization of Applied Behavior Analysis for Children Under 21 with Autism Spectrum Disorder

This alert includes information for [Developmental Disabilities Home and Community Medicaid waiver providers](#). Information for other qualified provider types can be found in the applicable provider alert. This revised alert supersedes the information specific to Developmental Disabilities Home and Community Medicaid waiver providers in previous alerts posted on 4/2/12, 4/17/12, 5/17/12, 6/15/12, 7/6/12, 9/6/12, and 1/10/14.

This alert describes provider qualifications, recipient eligibility criteria, the prior authorization request process, service codes and reimbursement rates, the billing process, place of service codes, and instructions for health plans. These services require prior authorization.

Provider Qualifications:

Applied behavior analysis (ABA) services described in this alert must be rendered by Certified behavior analyst (CBA) and certified associate behavior assistant (CABA) providers who meet the qualifications outlined in 65G-4.003 of the Florida Administrative Code, who are enrolled as Medicaid waiver providers through the Developmental Disabilities Individual Budgeting Medicaid waiver program and have received prior authorization from Medicaid for the service.

Recipient Eligibility Criteria:

[Qualified treating practitioners may render medically necessary ABA to children under 21 years old having any of the following ICD-10 diagnosis codes: F84.0, F84.3, F84.5, F84.8, or F849.](#)

Prior Authorization Request Process:

Applied behavior analysis services must be prior approved by Medicaid. If a physician determines that a Medicaid eligible child diagnosed with an autism spectrum disorder needs ABA, the provider must submit an ABA authorization request to Medicaid. The following information must be included:

1. Recipient name, date of birth, Medicaid ID, and current mailing address.
2. Requesting provider name, national provider identifier, address, and telephone and fax numbers.
3. Diagnosis of recipient and diagnosis code.
4. If already assessed, expected duration of ABA treatment.
5. The primary focus of ABA treatment.
6. Medical records that document the diagnosis of autism spectrum disorder.

[An optional prior authorization form for this purpose and information about where to submit an ABA authorization request is available online at the Child Health Check-Up web page.](#)

Service Codes and Reimbursement Rates:

Instructions for Developmental Disability Waiver Providers to Bill Fee-For-Service for Non-Waiver Recipients

Applied behavior analysis services must be prior approved by Medicaid. Providers should consult the [Developmental Disabilities Individual Budgeting Medicaid Waiver Services Coverage and Limitations Handbook](#) for provider qualifications and documentation requirements (requirements for review of documentation by a Local Review Committee and submission of documentation to the waiver support coordinator do not apply). Billing for ABA services in a group setting is not allowable. A total of up to 160 quarter-hour units per week of combined service may be authorized. Eligible service codes and rates of reimbursement for ABA services are:

Description of Service	Procedure Code	Modifier 1	Modifier 2	Rate	Limits
Assessment Services					
Behavior Analysis Assessment for Autism	H2020	UD	--	\$299.85 per assessment	One assessment per state fiscal year
Treatment Services					
Behavior Analysis Level 1 for Autism	H2019	UD	HP	\$19.05 per quarter hour	Maximum combined daily limit of up to 32 quarter-hour units Maximum combined weekly limit up to 160 quarter-hour units of all treatment services
Behavior Analysis Level 2 for Autism	H2019	UD	HO	\$16.64 per quarter hour	
Behavior Analysis Level 3 for Autism	H2019	UD	HN	\$10.35 per quarter hour	
Behavior Assistant Services for Autism	H2019	UD	HM	\$4.31 per quarter hour	

Scenario	Coverage
Existing DD waiver recipient receives ABA waiver services	APD continues to cover these ABA hours through the waiver.
Existing DD waiver recipient receives ABA waiver services but requests an increase in services	APD reviews the request to determine if additional hours are medically necessary. If yes, then APD will cover the additional hours through the waiver. If no, then the recipient may request authorization to receive ABA through the state plan.
Existing DD waiver recipient, who does not receive ABA services, requests ABA	APD reviews the request to determine if additional hours are medically necessary. If yes, then APD will cover the service through the waiver. If no, then the recipient may request authorization to receive ABA through the state plan.
Individual on the DD waiver waiting list who is Medicaid eligible applies for the waiver through the crisis process. ABA is one of the identified service needs.	APD will refer the individual to the ABA state plan authorization process for coverage of ABA.
Individual on the DD waiver waiting list who is Medicaid eligible and requests ABA services.	APD will refer the individual to the ABA state plan authorization process for coverage of ABA.

Billing Process:

To bill for the services, providers must submit claims in accordance with the Provider Reimbursement Handbook, CMS-1500 located on the [Provider Handbook](#) page of the Public Provider Web Portal. All claims for ABA services for children with autism spectrum disorders must be billed fee-for-service, even for those recipients enrolled in a Medicaid health plan. When billing for services for treatment of autism spectrum disorders, the claim must include one of the following primary diagnoses: F84.0, F84.3, F84.5, F84.8, or F849. Enter “1” for the diagnosis code reference number (pointer) to relate the procedures performed to the primary diagnosis.

Billing is allowed for dates of service beginning with the date of prior authorization. DO NOT SEND any attachments or medical records to the Medicaid fiscal agent with the CMS-1500 claim form. Regardless of place or dates of service, attachments for ABA are not required. All CMS-1500 claims for ABA services for children with autism spectrum disorders will be processed per these instructions.

Place of Service Codes:

Services must be billed using the correct place of service code for the location of the service provided. These services may be provided in the provider’s office, the recipient’s place of residence or anywhere in the community. However, in all cases, ABA services must also be provided in the setting(s) relevant to the behavior problems being addressed.

The following place of service codes should be used by DD Waiver Providers when submitting claims [\(see page 2-94 of the Developmental Disabilities Individual Budgeting Waiver Services](#)

Coverage and Limitations Handbook):

- 11 – Office
- 12 – Home
- 13 – Assisted Living Facility
- 14 – Group Home
- 49 – Independent Clinic
- 53 – Community Mental Health Center
- 99 – Other Place of Service

Place of service code “99 - Other Place of Service” is not acceptable except for unusual circumstances that are documented in the recipient’s treatment or service plan, or in the recipient’s treatment notes. Medicaid will monitor providers who frequently utilize place of service code 99.

Instructions for Health Plans:

Health plans are not currently required to authorize or cover ABA services for the treatment of autism spectrum disorders. If a child enrolled in a Medicaid health plan requires ABA services, the plan may refer the recipient to any of the identified qualifying providers to receive the service under Medicaid fee-for-service. Alternatively, the health plan may refer the recipient to the current ABA provider list or the Recipient and Provider Assistance Line at 1-877-254-1055 for help with locating a qualified provider. Health plans must share information on how to access ABA services with their contracted community behavioral health and physician providers.

Other Key Information:

For questions, contact the Recipient and Provider Assistance Line at 1-877-254-1055.