MassHealth UPDATE: Coverage of Applied Behavior Analysis (ABA) Services for Children with Autism Spectrum Disorder (ASD)

December 7, 2015

Update from MAC’s Autism Center and Massachusetts Law Reform Institute

♦ A new state law requires MassHealth to cover medically necessary ABA services for children with autism under age 21.

♦ ABA services are available to MassHealth members who have MassHealth either as their primary or secondary insurance.

♦ MassHealth also covers ABA services provided in an Individualized Education Program (IEP) through the School-based Medicaid Program.

FAMILIES:

Q. What types of MassHealth insurance covers ABA services?

A. Children under the age of 21 who have been diagnosed with autism and are covered by MassHealth Standard, CommonHealth and Family Assistance are entitled to medically necessary ABA services. Coverage is also available to members who have MassHealth as secondary insurance. ABA services authorized in a student’s Individuated Education Program (IEP) are covered under the School-based Medicaid Program (see below).

Q. MassHealth is my primary insurance. How do I get ABA services for my child?

A: Children who have been diagnosed with autism and enrolled in managed care plans can access medically necessary ABA services through their managed care plans (Boston Medical Center Health Net Plan, Fallon Community Health Plan, Health New England, Neighborhood Health Plan, Tufts Health Plan - Network Health, or the Massachusetts Behavioral Health Partnership). An ABA provider from your managed care plan’s network will need to request authorization for coverage from your the managed care plan.

Q. How do I find an ABA provider?

A. You must see an ABA provider in your MassHealth managed care plan network. Several managed care plans have tools to help you search for ABA providers:

For Boston Medical Center Health Net Plan, Neighborhood Health Plan, and Fallon Community Health Plan:

For Tufts Health Plan - Network Health:

http://networkhealth.prismisp.com/

If you have MassHealth as secondary insurance and your primary insurance does not cover ABA, you must see an ABA provider in the Massachusetts Behavioral Health Partnership (MBHP) network (see below for more on secondary insurance):

http://www.masspartnership.com/member/FindAProvider.aspx

The Autism Insurance Resource Center also maintains a list of ABA providers that can be used to help locate a provider.

**Q: Where do I find an ABA provider for my foster child?**

A: MBHP covers ABA for children in state custody.

**Q: Where do I find an ABA provider if I’m in a Primary Care Clinician (PCC) Plan?**

A: MBHP covers ABA for members in a PCC Plan.

**Q. Is nonemergency transportation available for travel to an ABA provider in the same way as travel to any other covered behavioral service?**

A: Yes, transportation is available for ABA services if requested by a physician using the MassHealth Prescription for Transportation (PT-1) form and approved. Information on how providers can complete this form is available here.

**Q. What if my provider’s request for prior authorization of ABA services is denied or not approved for the number of hours requested?**

A. You will receive a written notice from the health plan informing you of the denial and your rights to appeal the decision. You may be able to obtain free legal assistance to help you with an appeal. Information on legal assistance available in your area is available here.

**MASSHEALTH AS SECONDARY INSURANCE:**

**Q. What if my child has MassHealth as secondary insurance coverage, will my copays and deductibles for ABA services be paid by MassHealth?**

A. Yes. The Massachusetts Behavioral Health Partnership (MBHP) will cover copays and deductibles for children with autism under age 21 who receive ABA services through private insurance (Employer Sponsored Plan or Qualified Health Plan) and have MassHealth as secondary insurance and are enrolled with MBHP. After delivering services, your provider
will send an Explanation of Benefits (EOB) form to MBHP who will pay the provider for copays and deductibles.

**Q:** If I have MassHealth as secondary insurance coverage, do I need to choose a MassHealth approved ABA provider in order to have my copays and deductible paid?

A: You can choose any ABA provider in your primary insurance network, however, the provider must also be **authorized** to submit claims to MBHP for cost sharing in order for you to have your copays and deductible reimbursed. Being “**authorized**” differs from being a MassHealth provider and is an easier process. MBHP will complete a one-page, out-of-network agreement over the phone with the ABA provider. Providers can obtain information about authorization from MBHP by calling community relations: 1-800-495-0086.

**Q:** What does my child’s ABA provider need to do so that my co-pays and deductibles are covered?

A. After providing ABA services, your provider will submit an Explanation of Benefits (EOB) to MBHP showing that cost sharing is due and submit a claim to be paid for the amount due. Providers can call MBHP community relations for information on being authorized to submit these claims: 1-800-495-0086.

**Q:** Can I get reimbursed for copays and deductibles that I have already paid?

A: Yes. MBHP is processing provider claims for cost sharing for dates of service back to May 18, 2015. Your provider should be willing to reimburse you for the cost sharing you have paid since then, and bill MBHP.

**Q:** Is my child covered for ABA services if we have MassHealth as secondary insurance and our primary insurance does not cover ABA services?

A: Yes. If your primary insurance does not cover ABA services and you have MassHealth as secondary insurance, medically necessary ABA services can be authorized directly by MBHP for a provider in MBHP’s network. Your provider will need to submit to MassHealth an Explanation of Benefits (EOB) or a denial of coverage letter from your primary insurance showing that ABA coverage is not available.

**PROVIDERS:**

**Q.** What is acceptable evidence of medical necessity for ABA services?

A. Evidence of medical necessity includes a diagnosis of Autism Spectrum Disorder or Autistic Disorder/Asperger’s Disorder/PDD-NOS from a qualified physician (e.g., developmental pediatrician, pediatric neurologist, psychologist with developmental or child/adolescent expertise, psychiatrist or other licensed physician experienced in the diagnosis and treatment of autism), a comprehensive diagnostic and/or functional
assessment, and an initial evaluation from a Licensed ABA that supports the need for ABA services. Complete medical necessity criteria from MassHealth for ABA are available here.

**Q. I’m an ABA provider, what do I need to do to be paid for cost sharing for children with private insurance that covers ABA with MassHealth secondary coverage?**

A. Almost all children and youth under age 21 with MassHealth secondary are enrolled with MBHP. Providers need to be *authorized* by MBHP to submit claims for cost sharing. Being “authorized” differs from being a MassHealth provider and is an easier process. MBHP will complete a one-page, out-of-network agreement over the phone with the ABA provider. For more information about this, ABA providers only can e-mail MBHPNetworkManagement@valueoptions.com.

After delivering services, providers must send an Explanation of Benefits (EOB) form to MBHP and a claim for payment of copays and deductibles. Providers can call community relations for information on submitting an EOB showing that cost sharing is due: 1-800-495-0086.

**Q. Is MBHP covering co-pays for ABA services that providers have already delivered?**

A. Yes. MBHP is processing provider claims for cost sharing for dates of service back to May 18, 2015. Since MBHP will not reimburse members directly, families may contact providers for reimbursement paid since then. Providers should be prepared to reimburse members for cost sharing that they can now receive from MBHP.

**Q. What if a child is already receiving ABA services and has a recent BCBA evaluation, (e.g., as part of Early Intervention or by an Autism Waiver provider)?**

A. If an evaluation by a BCBA has recently been conducted, you should check with the managed care plan to see if the evaluation can be submitted rather than conducting a new evaluation. An evaluation/treatment plan conducted within the last two months should be acceptable.

**SCHOOL-BASED MEDICAID PROGRAM COVERAGE FOR ABA**

**Q. If a student enrolled in MassHealth receives ABA services at school, will MassHealth reimburse the school for the cost of the service?**

A. Yes. As of October 1, 2015, a school can be reimbursed under the School-Based Medicaid Program for ABA services included in the Service Delivery Needs section of a student’s Individualized Education Program (IEP).

**Q. Does a school-based ABA provider need to have specific qualifications under the Medicaid Program?**
A. Yes. A school-based ABA provider must be licensed by the Board of Registration of Allied Mental Health and Human Services Professions as an Applied Behavior Analyst (ABA), or if prior to January 6, 2016, may be a Board Certified Behavior Analyst (BCBA).

In addition, services may be reimbursed if provided by a licensed physician, psychologist, or psychiatrist.

An Assistant Applied Behavior Analyst (AABA) or other paraprofessional working under the supervision of a licensed ABA can also provide services. If prior to January 6, 2016, an AABA or paraprofessionals may be working under the supervision of a BCBA.

Q. What role do parents play in the School-Based Medicaid Program?

A. Before accessing MassHealth for the first time, a school district must provide written notice to parents and obtain parental consent allowing the school district to access MassHealth to pay for special education services. For more information, please see the Massachusetts Department of Elementary and Secondary Education memo on parental consent to access MassHealth available here.

Q. Will consenting to MassHealth reimbursement of school-based ABA services limit a member’s ability to obtain ABA or any other services outside of school?

A. No. Providing consent to allow a school to submit claims to MassHealth for ABA does not alter or reduce the benefits that children are entitled to receive from MassHealth.

Q. Is there documentation required in addition to the IEP?

A. Yes. School districts must include in their claims the child’s name, the type of ABA service, the date of service, and the length of time the service was provided.

School districts can refer to the Massachusetts Department of Elementary and Secondary Education memo on the documentation of services and the associated form 28M/12 available here.

Q. Are there any circumstances under which claims for ABA services can be submitted to MassHealth for a student with a diagnosis of autism in an IEP but the ABA services are not written in the IEP?

A. Yes. Until January 6, 2016, school districts may submit claims for ABA services not specified in the IEP provided to a student with a diagnosis of autism. In this situation, supplementary documentation specifying the type of ABA services provided, the type of personnel providing the services, and the duration and frequency of the services must be included. The documentation should match the ABA services that will be included with the student’s IEP amendment. After January 6, 2016, ABA services must be included in the Service Delivery Needs section of the IEP.
Q. Are there any other school district requirements for school reimbursement?

A. Yes. Districts seeking reimbursement for services must include all ABA, AABA, and other appropriate staff providing autism services in their quarterly Random Moment Time Study (RMTS) Participant List.

For additional assistance or clarification, please email the School-Based Medicaid Program at SchoolBasedClaiming@umassmed.edu or call 1-800-535-6741.