Important News for **Providers**

This communication should be viewed by:

Groups providing ABA Services

Applied Behavioral Analysis (ABA) Government Program Benefit Update-

To keep our valued care delivery partners up to date, MVP Health Care [®] (MVP) is sharing an update regarding Applied Behavior Analysis (ABA) Government Program (Medicaid and CHP) benefits. Beginning January 1, 2023, New York State is carving in ABA therapy for the Managed Medicaid population. MVP will cover ABA services provided by a Licensed Behavioral Analyst (LBA) and Certified Behavioral Analyst Assistant (CBBA) under the supervision of an LBA or other individuals specified under Article 167 of NYS Education law. LBAs and CBAAs must enroll in NYS Medicaid to be eligible to provide ABA services to Managed Medicaid and Child Health Plus Members.

Managed Medicaid Members may be eligible for ABA if they are under the age of 21 and have received a diagnosis of Autism Spectrum Disorder and/or Rett Syndrome as defined by the Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition (DSM-5).

Services covered under Managed Medicaid include the following:

- Behavioral identification assessments (initial and/or reassessment) administered by a Licensed Behavioral Analyst (LBA) and Certified Behavioral Analyst Assistant (CBBA) under the supervision of an LBA, or another qualified health professional (CPT Codes 97151, 97152)
- Adaptive behavior treatments (Direct One-to-One Individual treatments) delivered in the home or other qualified setting (CPT Codes 97153, 97155)
- Training and support to family and caregivers (CPT Code 97156)
- Group Adaptive Behavior Treatment (CPT Code 97158)

Please note: Assessment and treatment services requiring the assistance of two or more technicians (CPT Codes 0362T, 0373T), Group Adaptive Behavior Treatment administered by a technician (CPT Code 97154), and Multi-family Group Adaptive Behavior Treatment guidance (CPT Code 97157) are not covered for Managed Medicaid; however, these CPT Codes will continue to be covered for Child Health Plus Members until further notice.

ABA services can be provided in several settings including private/group practices, clinics, hospitals, residences, and community settings. ABA services are not considered primary care services and will not be provided in School-Based Health Centers. Managed Medicaid does not cover ABA services as part of an Individual Education Plan (IEP).





What Providers Need To Know

What do I need to do to become a Participating Provider for Managed Medicaid Members?

MVP will update all Participating LBA and CBAA Provider files to include the Managed Medicaid Line of Business effective January 1, 2023, provided they have an active Medicaid Management Information System (MMIS) number on file. There is no action needed by the group.

What to do if LBAs or CBAAs within my group do not have an active MMIS number prior to January 1, 2023.

The Provider would need to submit an enrollment application to NYS to obtain an MMIS number. Provider enrollment and maintenance information can be found at:

emedny.org/info/ProviderEnrollment/index.aspx.

Once the Provider has obtained an MMIS number, the Group may email MVP at mvppr@mvphealthcare.com to request that NYS Government Programs be added to the Group Provider's file. To expedite processing, please indicate "Add GP – MMIS" in the email subject line and when writing to request to add the Government Programs products line to the specific Provider file, you should include, at minimum, the Group's Tax ID number, Group Name, Provider's Name, Provider's NPI and Provider's MMIS numbers.

Do I need to obtain prior authorization prior to rendering ABA services?

Yes, Prior Authorization is required, and medical necessity criteria must be met. Referrals for ABA must be made by a NYS licensed and NYS Medicaid enrolled physician (including psychiatrists and developmental/behavioral pediatricians), psychologist, psychiatric nurse practitioner, pediatric nurse practitioner or physician assistant.

What is MVP's reimbursement for Government Program products (Managed Medicaid and CHP)?

Effective January 1, 2023, reimbursement for Government Program products (Managed Medicaid **and Child Health Plus**) will be in accordance with the Government Program provisions within the ABA fee schedule of your MVP Provider Agreement.

Are there any other changes for Child Health Plus beyond the reimbursement provisions for January 1, 2023?

No. The covered services and requirements for Child Health Plus Members will be the same as they are today. Only the reimbursement provisions which coincide with the carve in of ABA services into Managed Medicaid will change on January 1, 2023. Providers are already required to have an active MMIS to be a Participating Provider for Child Health Plus.

Questions?

If you have any questions, please contact your Behavioral Health Professional Relations Representative. A listing of Behavioral Health Representatives can be found at **mvphealthcare.com/Providers** and select *Contact Us*.

Thank you for your continued partnership and collaboration as we work toward our shared goals of providing high quality and efficient care.

To view all communications, visit mvphealthcare.com/FastFax

