## Alabama Medicaid Agency ABA Therapy Provider Tip Sheet

Updated 01/02/2020

- I. Provide completed referral forms and initial assessment report
  - A. Include a completed Referral for Services Form 362 based on the Early Periodic Screening, Diagnosis, and Treatment (EPSDT)
  - B. Include the initial assessment report. Code 97151, Behavior Assessment and Treatment, units do not require prior approval. Include all data analysis, graphs, and interpretations
    - 1. Data analysis should specify the frequency/duration per unit of time (e.g., 10-min session, 2-hour observation) and/or the percentage of intervals with the data collection procedure specified (e.g., 10-s intervals using partial intervals)
      - a. If providing a percentage, please be sure to provide the number of opportunities.1. For example, state, "he answered to his name 50% of 10 opportunities."
    - 2. Graphs should correctly illustrate data in accordance with the standards of the field a. Figure captions should be used to clarify idiosyncrasies
    - 3. If a standardized assessment was used, include those results (i.e., graphical representation)
- II. Provide complete Individualized Education Plan, (IEP) when applicable
  - A. If IEP addresses behavior plans/interventions/goals that overlap with
    - plans/interventions/goals in the prior authorization, (PA), the PA is likely to be denied.
    - 1. If there is an overlap between the PA and the IEP, be sure to indicate how the goals are different (e.g., medical necessity vs. educational necessity).
      - a. Language goals at school are intended to move the recipient closer to full inclusion in the educational system. Language goals at home may be medically necessary as they relate to safety (e.g., reporting illness/trouble).
- III. Provide treatment plan
  - A. Include a description of all data collection procedures
  - B. Include a data-based plan to address every function/target behavior identified in the assessment
  - C. Include a behavioral goal to address every function/target behavior identified in the assessment
- IV. Provide a caregiver training plan
  - A. Include a description of how caregiver training will be conducted (e.g., Behavioral Skills Training, [BST]
  - B. Include a description of all data collection procedures
    - 1. Data should be submitted with all follow-up prior authorizations
- V. Be sure to complete and include the Behavior Assessment and Treatment Request (97151/0359T) for Applied Behavior Analysis for Autism Spectrum Disorder
  A. Complete the original form; avoid creating your own
  - B. Complete the form in its entirety

1. Referring to other documents in Form 97151/0359T is appropriate if additional information for the review is necessary. However, please do not make reference to other

documents in Form 97151/0359T as the sole response to the questions in the form.

VI. Be sure all portions of the prior authorization and supporting documents are accurate A. Spell check: *taste* vs. *tact* significantly changes the meaning

B. Use correct name of service recipient to avoid issues with personal health information (PHI)C. Enter units requested for the 6-month approval period. For example, if you are requesting 8 units per month, then enter 48 units in the system.

D. Indicate the date services will begin (Effective date). Follow -up prior authorizations should be submitted 6 months following the effective date.