



PROVIDER *bulletin*

April 5, 2022

Applied Behavioral Analysis (ABA)

Dear Provider,

When we hear the term Applied Behavior Analysis (ABA) we often think of Autism Spectrum Disorder (ASD) because ABA is used to treat autistic patients. Medi-Cal provides coverage for all medically necessary Behavioral Health Treatment (BHT) services for eligible beneficiaries under 21 years of age. This applies to any health condition, including children diagnosed with ASD and children for whom a licensed physician, surgeon, or psychologist determines BHT services are medically necessary. BHT services include ABA therapy and a variety of other behavioral interventions which have been identified as evidence-based approaches in preventing or minimizing the adverse effects of behaviors that interfere with learning and social interaction. The goal is to promote, to the maximum extent practicable, the functioning of a beneficiary, including those with or without ASD.

Examples of BHT services include behavioral interventions, cognitive behavioral intervention, comprehensive behavioral treatment, language training, modeling, natural teaching strategies, parent/guardian training, peer training, pivotal response training, schedules, scripting, self-management, social skills package, and story-based interventions.

CRITERIA FOR BHT SERVICES FOR MEMBERS UNDER THE AGE OF 21

A member must:

- 1) Have an evidence-based recommendation from a licensed physician, surgeon or psychologist demonstrating BHT services are medically necessary;
- 2) Be medically stable; and
- 3) Not have a need for 24-hour medical/nursing monitoring or procedures provided in a hospital or intermediate care facility for persons with intellectual disabilities

For those Kern Family Health Care members which may be eligible to receive Behavioral Health Treatment (BHT) services based on the recommendation from a licensed physician, surgeon or psychologist demonstrating BHT services are medically necessary, providers can submit a prior authorization on the KHS Provider Portal.



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AUTHORIZATION SUBMISSION GUIDE:

- Treating Provider: Member's choice of ABA Provider or ANY PROVIDER CONTRACTED
 - Choosing "ANY PROVIDER CONTRACTED" will allow the most appropriate provider to be selected by KHS.
- Service Type: Behavioral Health
- Restricted Specialty: Z None of the Above
- Code Type: HCPC
- HCPC Codes:
 - H0031 X 40 units Mental Health Assessment
 - H0032 X 20 units Mental Health Service Plan Development

The referring provider must include pertinent medical records and/or formal recommendation from a licensed physician, surgeon or psychologist demonstrating BHT services are medically necessary for BHT services.

If your office is interested in learning more about the criteria for BHT Services, please contact Alejandra Herrera, Provider Relations Representative, at 661-617-2615.

If you have any additional questions, please contact your Provider Relations Representative at (800) 391-2000.

Thank you,
Melissa McGuire
Provider Relations Manager