

Applied Behavioral Analysis Provider Frequently Asked Questions

Updated as of March 30, 2020

MassHealth is committed to ensuring that eligible children continue to receive Applied Behavior Analysis (ABA) services during the COVID-19 crisis and we encourage providers to continue to raise any questions during this challenging time. This guidance applies to ABA services delivered during the state of emergency announced by Executive Order 591, unless otherwise specified, as a follow up to MassHealth All Provider Bulletin 289. After the state of emergency, ABA providers should comply with all program specifications as written.

Consent and Signature Requirements:

For members beginning services for the first time, how should providers obtain and document member consent?

Providers should document the member's verbal consent for services in the member's medical record. Electronic signatures are acceptable but not required.

For families already engaged in services, do providers need a specific consent to deliver services via telehealth?

Providers do not need consent to deliver services via telehealth (including via telephone) but should document the modality in the member's medical record.

How should providers handle paperwork such as intakes, safety plans, and treatment plans, which typically require the member's signature?

Providers should document in the medical record that the documents were reviewed, the date on which the documents were reviewed, and that obtaining a signature was not possible due to the COVID-19 crisis. If a provider is able to obtain signatures electronically or via mail they can do so, otherwise they can obtain signatures once face to face visits resume.

Telehealth Questions

Can all Applied Behavior Analysis (ABA) codes be used via telehealth?

Yes, all ABA codes/services can be conducted via telehealth.

Does MBHP cover secondary benefits for telehealth if the primary insurer does not cover services provided via telehealth?

During the state of emergency, most commercial insurers are allowing telehealth to be used to deliver services. If commercial insurers deny claims due to telehealth modality, providers should follow the usual and customary procedures and submit an Explanation of Benefits from the member's primary insurer to MBHP.

What if my agency does not have a dedicated telehealth platform?

As stated in All Provider Bulletin 289, during the State of Emergency, "MassHealth is not imposing specific requirements for technologies used to deliver services via telehealth and will allow reimbursement for MassHealth covered services delivered through telehealth so long as such services are medically necessary and clinically appropriate and comport with the guidelines

set forth in Appendix A to this bulletin.” Services can be delivered over the phone, via live video, or through a formal telehealth platform. The Bulletin, with accompanying appendix, is available at: <https://www.mass.gov/files/documents/2020/03/13/All-289.pdf>.

Can services be provided via telehealth effective immediately?

Yes. As noted in MassHealth Bulletin 289 “Providers will be able to bill MassHealth for these services delivered via Telehealth beginning April 1, 2020, for dates of service on or beginning March 12, 2020.”

Can we begin to utilize telehealth codes under a Member's current authorization?

Yes. Providers should follow the usual and customary procedures for obtaining authorization for services. Telehealth is a modality for providing the service, which should be indicated by the use of 02 as the place of service (POS).

What are the modifiers for ABA telehealth?

No modifiers are required, but providers do need to use POS 02.

Service Specific Questions

Are we able to provide additional parent training hours and/or treatment planning given direct services will most likely be decreasing?

Prior authorization is required for all ABA services/hours/units utilized. As usual, if and when additional hours/units are needed, a request must be submitted with a rationale. Decisions will continue to be based on medical necessity criteria.

Are there limits per day, per week, or per authorization period on the number of units we can bill for services provided through telehealth?

Providers should adhere to their current authorization as approved. Any approved units may be delivered via telehealth without the need to obtain additional approval.

Can we increase and use daytime hours while children are out of school?

Providers should follow the usual and customary procedures for obtaining authorization for additional units when needed. Decisions will continue to be based on medical necessity criteria.

Are ABA services considered essential services during the stay-at-home period?

Yes, all healthcare services are considered essential. Providers should follow their agency’s protocols for provision of care during this time

Additional Information

Massachusetts Executive Order

- Order Expanding Access to Telehealth Services and to Protect Health Care Providers: <https://www.mass.gov/doc/march-15-2020-telehealth-order/download>

MassHealth Provider Bulletin

- All Provider Bulletin 289: MassHealth Coverage and Reimbursement Policy for Services Related to Coronavirus Disease 2019 (COVID-19): <https://www.mass.gov/doc/all-provider-bulletin-289-masshealth-coverage-and-reimbursement-policy-for-services-related-to/download>

- Any future COVID-19 provider updates will be posted here:
<https://www.mass.gov/info-details/masshealth-coronavirus-disease-2019-covid-19-providers>