Healthcare Professional Guidelines for Comprehensive Diagnostic Evaluations for ABA Services

Louisiana Healthcare Connections provides Applied Behavior Analysis (ABA) services for Medicaid members after they obtain a Comprehensive Diagnostic Evaluation recommending such services. Louisiana Healthcare Connections will pay for ABA, even for members that get their physical health services through the legacy Medicaid program.

This document serves as a reference guide for healthcare professionals who perform Comprehensive Diagnostic Evaluations (CDEs) for Medicaid members enrolled in Louisiana Healthcare Connections.

Who is eligible for Medicaid-covered ABA Services?

The Louisiana Medicaid program covers ABA services for Medicaid members who:

1. Are under 21 years old.
2. Exhibit excesses and/or deficits of behaviors that significantly interfere with home or community activities. Examples include but are not limited to, aggression, self-injury, elopement, impaired development in the areas of communication and/or social interaction, etc.
3. Have a diagnosis after a comprehensive diagnostic evaluation (CDE) by a qualified health care professional for autism spectrum disorder or any other condition for which ABA services are recognized as therapeutically necessary.

PLEASE NOTE: Unlike many private health plans, the Louisiana Medicaid program does NOT require that the eligible member be diagnosed with autism or ASD to receive Medicaid-covered ABA services.

Comprehensive Diagnostic Evaluations (CDEs) Requirements

1. The healthcare professional must be in-network with Louisiana Healthcare Connections to bill Louisiana Healthcare Connections for performing the CDE or obtain a single case agreement with the MCO.

2. The healthcare professional will prescribe and/or recommend ABA services through the CDE.
3. See the end of this document for types of healthcare professionals that may perform CDEs.
4. After the healthcare professional completes the CDE, the member gives it to an ABA provider that the member selected. The ABA provider submits the CDE to [MCO NAME] to request prior authorization.

The CDE is a report from a healthcare professional detailing, at a minimum:

1. A thorough clinical history with the member's informed parent/caregiver, inclusive of developmental and psychological history.
2. Direct observation (including virtual) of the member, including, but not limited to, assessment of current functioning in social and communicative behaviors and play or peer interactive behaviors.
3. A review of available records.
4. A valid *Diagnostic and Statistical Manual of Mental Disorders 5* (DSM-5), or current edition, diagnosis of autism spectrum disorder or any other condition for which ABA services are recognized as therapeutically appropriate.
5. Justification/rationale for referral or non-referral of the member for ABA services.
6. Recommendations for any other treatment.

PLEASE NOTE: Unlike many private health plans, the Louisiana Medicaid program does ***NOT*** require specific assessments (such as the Autism Diagnostic Observation Schedule or the Vineland Adaptive Behavior Scales) to be conducted for an eligible member to receive Medicaid-covered ABA services.

Need for Additional Assessments

If the results of the initial screening by the health care professional are inconclusive, or if there is a lack of clarity about the beneficiary's primary diagnosis, comorbid conditions, or the medical necessity of ABA services or other recommended treatment, care, or services, the health care professional may need to perform:

- Autism-specific assessments
- Assessments of general psychopathology
- Cognitive/developmental assessments
- Assessments of adaptive behavior

Prior authorization for additional assessments

Louisiana Healthcare Connections does not require prior approval for services that may be part of performing a CDE using the following HCPC codes:

90791	90792	96127	99202	99203
99204	99205	99212	99213	99214
99215	99341	99342	99344	99345
99347	99348	99349	99350	

Prior approval is required for services billed under the following codes:

96116	96121	96130	96131	96132
96133	96136	96137	96138	96139
96146				

The type of provider who may bill under each code is listed below.

The healthcare professional must provide explanation to the MCO why any additional assessments billed under these latter codes are medically necessary. These should only be needed for members whose conditions are not readily apparent to a trained professional.

Billing for a multidisciplinary team

Billing codes will depend on the types of professionals on the team. The codes that each type of professional may use for the CDE, and the additional assessments are listed below.

Claims

Claims are processed directly through Louisiana Healthcare Connections.

Electronic Claims

We can receive an ANSI X12N 837 professional, institution or encounter transaction, as well as

to generate an ANSI X12N 835 electronic remittance advice known as an Explanation of Payment (EOP).

For more information on electronic filing and the clearinghouses Louisiana Healthcare Connections has partnered with, contact:

Louisiana Healthcare Connections c/o Centene EDI 1-800-225-2573, extension 25525 or by e-mail to EDIBA@centene.com

Hard Copy Claims
Submit claims to Louisiana Healthcare Connections at the following address:
Louisiana Healthcare Connections
ATTN: Claim Processing Department
P. O. Box 4040 Farmington, MO 63640-3826

Louisiana Healthcare Connections encourages all providers to submit claims electronically. Our companion guides to billing electronically are available on our website at LouisianaHealthConnect.com.

Coding and Billing Guide

Provider Types	Code	Prior Authorization	Reimbursement
• Pediatrician • Pediatric Neurologist • Developmental pediatrician • Nurse practitioner (NP) • Speech and language pathologist • Psychiatrist • APRN • Medical Psychologist • Psychologist • Licensed clinical social worker (LCSW) • Licensed professional counselor (LPC), LPC • LMFT	90791 – Psychiatric Diagnostic Evaluation	No	100% published Louisiana Medicaid fee schedule

Provider Types	Code	Prior Authorization	Reimbursement
• Pediatrician • Pediatric Neurologist • Developmental pediatrician • Nurse practitioner (NP) • Speech and language pathologist • Psychiatrist • APRN • Medical Psychologist	90792 – Psychiatric Diagnostic Evaluation With Medical Services	No	100% published Louisiana Medicaid fee schedule
• Pediatrician • Pediatric Neurologist • Developmental pediatrician • Nurse practitioner (NP) • Speech and language pathologist • Psychiatrist	96116 – Neurobehavioral Status Examination, First Hour	Yes	100% published Louisiana Medicaid fee schedule
• Pediatrician • Pediatric Neurologist • Developmental pediatrician • Nurse practitioner (NP) • Speech and language pathologist • Psychiatrist	96121 – Neurobehavioral Status Examination, Each Additional Hour	Yes	100% published Louisiana Medicaid fee schedule
• Pediatrician • Pediatric Neurologist • Developmental pediatrician • Nurse practitioner (NP) • Speech and language pathologist	96127 – Brief Emotional/Behavioral Assessment	No	100% published Louisiana Medicaid fee schedule
• Psychiatrist • Medical Psychologist • Psychologist	96130 – Psychological Testing Evaluation Services by Physician/QHP, First Hour	Yes	100% published Louisiana Medicaid fee schedule
• Psychiatrist • Medical Psychologist	96131 – Psychological Testing Evaluation	Yes	100% published Louisiana

Provider Types	Code	Prior Authorization	Reimbursement
• Psychologist	Services by Physician/QHP, Each Additional Hour		Medicaid fee schedule
• Pediatrician • Pediatric Neurologist • Developmental pediatrician • Nurse practitioner (NP) • Speech and language pathologist Psychiatrist • Medical Psychologist • Psychologist	96132 – Neuropsychological Testing Evaluation Services by Physician/QHP, First Hour	Yes	100% published Louisiana Medicaid fee schedule
• Pediatrician • Pediatric Neurologist • Developmental pediatrician • Nurse practitioner (NP) • Speech and language pathologist Psychiatrist • Medical Psychologist • Psychologist	96133 – Neuropsychological Testing Evaluation Services by Physician/QHP, Each Additional Hour	Yes	100% published Louisiana Medicaid fee schedule
• Psychiatrist • Medical Psychologist • Psychologist	96136 – Psychological or Neuropsych Test Admin/Scoring by Physician/QHP, 2 or More Tests, Each Additional 30 Minutes	Yes	100% published Louisiana Medicaid fee schedule
• Psychiatrist • Medical Psychologist • Psychologist	96137 – Psychological or Neuropsych Test Admin/Scoring by Physician/QHP, 2 or More Tests, First 30 Minutes	Yes	100% published Louisiana Medicaid fee schedule

Provider Types	Code	Prior Authorization	Reimbursement
• Psychiatrist • Medical Psychologist • Psychologist	96138 – Psychological or Neuropsych Test Admin/Scoring by Physician/QHP, 2 or More Tests, First 30 Minutes	Yes	100% published Louisiana Medicaid fee schedule
• Psychiatrist • Medical Psychologist • Psychologist	96139 – Psychological or Neuropsych Test Admin/Scoring by Physician/QHP, 2 or More Tests, Each Additional 30 Minutes	Yes	100% published Louisiana Medicaid fee schedule
• Psychiatrist • Medical Psychologist • Psychologist	96146 – Psychological or Neuropsych Test Admin/Scoring with Single Automated, Standardized Instrument via Electronic Platform, with Automated Result Only	Yes	100% published Louisiana Medicaid fee schedule
• Pediatrician • Pediatric Neurologist • Developmental pediatrician • Nurse practitioner (NP) • Speech and language pathologist	99202 – New Patient Office or Other Outpatient	No	100% published Louisiana Medicaid fee schedule
• Pediatrician • Pediatric Neurologist • Developmental pediatrician • Nurse practitioner (NP) • Speech and language pathologist	99203 – New Patient Office or Other Outpatient	No	100% published Louisiana Medicaid fee schedule

Provider Types	Code	Prior Authorization	Reimbursement
• Pediatrician • Pediatric Neurologist • Developmental pediatrician • Nurse practitioner (NP) • Speech and language pathologist	99204 – New Patient Office or Other Outpatient	No	100% published Louisiana Medicaid fee schedule
• Pediatrician • Pediatric Neurologist • Developmental pediatrician • Nurse practitioner (NP) • Speech and language pathologist	99205 – New Patient Office or Other Outpatient	No	100% published Louisiana Medicaid fee schedule
• Pediatrician • Pediatric Neurologist • Developmental pediatrician • Nurse practitioner (NP) • Speech and language pathologist	99212 – Established Patient Office or Other Outpatient	No	100% published Louisiana Medicaid fee schedule
• Pediatrician • Pediatric Neurologist • Developmental pediatrician • Nurse practitioner (NP) • Speech and language pathologist	99213 – Established Patient Office or Other Outpatient	No	100% published Louisiana Medicaid fee schedule
• Pediatrician • Pediatric Neurologist • Developmental pediatrician • Nurse practitioner (NP) • Speech and language pathologist	99214 – Established Patient Office or Other Outpatient	No	100% published Louisiana Medicaid fee schedule
• Pediatrician • Pediatric Neurologist • Developmental pediatrician • Nurse practitioner (NP) • Speech and language pathologist	99215 – Established Patient Office or Other Outpatient	No	100% published Louisiana Medicaid fee schedule

Provider Types	Code	Prior Authorization	Reimbursement
• Pediatrician • Pediatric Neurologist • Developmental pediatrician • Nurse practitioner (NP) • Speech and language pathologist	99341 – New Patient Home Visit, Typically 15 Mins	No	100% published Louisiana Medicaid fee schedule
• Pediatrician • Pediatric Neurologist • Developmental pediatrician • Nurse practitioner (NP) • Speech and language pathologist	99342 – New Patient Home Visit, Typically 30 Mins	No	100% published Louisiana Medicaid fee schedule
• Pediatrician • Pediatric Neurologist • Developmental pediatrician • Nurse practitioner (NP) • Speech and language pathologist	99344 – New Patient Home Visit, Typically 60 Mins	No	100% published Louisiana Medicaid fee schedule
• Pediatrician • Pediatric Neurologist • Developmental pediatrician • Nurse practitioner (NP) • Speech and language pathologist	99345 – New Patient Home Visit, Typically 75 Mins	No	100% published Louisiana Medicaid fee schedule
• Pediatrician • Pediatric Neurologist • Developmental pediatrician • Nurse practitioner (NP) • Speech and language pathologist	99347 – Established Patient Home Visit, Typically 20 Mins	No	100% published Louisiana Medicaid fee schedule
• Pediatrician • Pediatric Neurologist • Developmental pediatrician • Nurse practitioner (NP) • Speech and language pathologist	99348 – Established Patient Home Visit, Typically 30 Mins	No	100% published Louisiana Medicaid fee schedule

Provider Types	Code	Prior Authorization	Reimbursement
• Pediatrician • Pediatric Neurologist • Developmental pediatrician • Nurse practitioner (NP) • Speech and language pathologist	99349 – Established Patient Home Visit, Typically 40 Mins	No	100% published Louisiana Medicaid fee schedule
• Pediatrician • Pediatric Neurologist • Developmental pediatrician • Nurse practitioner (NP) • Speech and language pathologist	99350 – Established Patient Home Visit, Typically 60 Mins	No	100% published Louisiana Medicaid fee schedule

Questions

If you have further questions, including questions about rates or need assistance regarding a CDE contact us at (866) 595-8133.

Which healthcare professionals may complete a CDE?

Pediatricians using the MCHAT-R/F and clinical judgment may diagnose and complete a CDE.

For children who receive a high-risk score of ≥ 8 on the MCHATR/F, pediatricians can independently make a diagnosis of autism (if their clinical judgment concurs with this score).

For children who receive a moderate risk score of 3 to 7 on the MCHAT-R/F, pediatricians can complete the MCHAT-R/F follow-up interview, and based on their confidence in their clinical judgment, either independently make a diagnosis of autism or refer to a subspecialist for a diagnostic evaluation:

- Pediatric neurologist.
- Developmental pediatrician.
- Psychologist (including a medical psychologist).
- Psychiatrist (particularly pediatric and child psychiatrist).

- A pediatrician under a joint working agreement with an interdisciplinary team of providers who are qualified to diagnose developmental disabilities.
- A nurse practitioner practicing under the supervision of a pediatric neurologist developmental pediatrician, psychologist or psychiatrist.
- Licensed individual, including speech and language pathologist, licensed clinical social worker, or licensed professional counselor, when:
    a. The individual's scope of practice includes a differential diagnosis of ASD and comorbid disorders for the age and/or cognitive level of the member.
    b. The individual has at least two years of experience providing such diagnostic assessments for ASD and comorbid disorders and treatments or is being supervised by a pediatric neurologist, developmental pediatrician, psychologist (including medical psychologist) or psychiatrist.