

Applied Behavioral Analysis (ABA) Authorization



Member Information

First Name _____ Last Name _____
Medicaid ID # _____ Date of Birth (mm/dd/yyyy) _____
Phone _____ Age _____ Gender: Male Female

Billing Provider: HSPP or PHYSICIAN

Provider Name _____ Credentials _____
Provider NPI _____ Tax ID # _____
Provider Address _____
Phone _____ Fax _____
Contact Name _____ HSPP/Psychiatrist Physician

Supervising Provider: BCBA-D, BCBA, HSPP

Provider Name _____ Credentials _____
Provider NPI _____ Tax ID # _____
Group/Facility Name _____
Address _____
Phone _____ Fax _____

Diagnostic and Treatment Information

Primary Diagnosis (Required) _____
Secondary Diagnosis _____
Prior Treatment Relative to Diagnosis _____
Standardized Tools Used for Diagnosis _____
Diagnosis Date _____ Member in School? Yes No
Does member have an IEP or 504 plan? Yes No Receiving early intervention services? Yes No
Describe other services received in addition to the ABA requested, including but not limited to PT, OT, ST or mental health services:

Is this an initial authorization request? Yes No Date of ABA Treatment _____
Date of most recent assessment _____



8585 Archives Avenue, Suite 310
Baton Rouge, LA 70809

1-866-595-8133

Hearing Loss: 711
Monday-Friday, 7 a.m. to 7 p.m.

LouisianaHealthConnect.com

Authorization Information

Start Date _____ End Date _____

Billing Codes

CODE	MODIFIER	DESCRIPTION	UNITS	SERVICE LIMITS	TOTAL UNIT
0359T	TG	Assessment (LBA*)	1 <i>(Not a timed service)</i>	Only 1 for a specific date of service.	
0359T	TF	Assessment (SCABA**)			
0360T	TG	Follow-up assessment (LBA) – Additional 30 minutes	30 minutes	1 every 6 months	
0360T	TF	Follow-up assessment (SCABA) – Additional 30 minutes			
0360T		Follow-up assessment (Tech***) – Additional 30 minutes			
0361T	TG	Follow-up assessment (LBA) – Additional 30 minutes	30 minutes	7 every 6 months; more if medically necessary	
0361T	TF	Follow-up assessment (SCABA) – Additional 30 minutes			
0361T		Follow-up assessment (Tech) – Additional 30 minutes			
0364T	TG	Adaptive behavior treatment by protocol (LBA) – First 30 minutes	30 minutes	Once daily as prior authorized	
0364T	TF	Adaptive behavior treatment by protocol (SCABA) – First 30 minutes			
0364T	HN	Adaptive behavior treatment by protocol (Tech with Bachelor's degree) – First 30 minutes			
0364T		Adaptive behavior treatment by protocol (Tech) – First 30 minutes			
0365T	TG	Adaptive behavior treatment by protocol (LBA) – First 30 minutes	30 minutes	Approved as medically necessary	
0365T	TF	Adaptive behavior treatment by protocol (SCABA) – First 30 minutes			
0365T	HN	Adaptive behavior treatment by protocol (Tech with Bachelor's degree) – First 30 minutes			
0365T		Adaptive behavior treatment by protocol (Tech) – First 30 minutes			
0368T	TG	Supervision (LBA) – First 30 minutes (can bill with 0364T TF, 0364T and 0365T TF, 0365T)	30 minutes	1 unit per week	
0368T	TF	Supervision (SCABA) – First 30 minutes (can bill with 0364T and 0365T)			
0369T	TG	Supervision (LBA) – Additional 30 minutes (can bill with 0364T TF, 0364T and 0365T TF, 0365T)	30 minutes	Approved as medically necessary	
0369T	TF	Supervision – Additional 30 minutes (SCABA) (can bill with 0364T and 0365T)			
0366T	TG	Group adaptive behavior (LBA) – First 30 minutes	30 minutes	1 unit per day	
0366T	TF	Group adaptive behavior (SCABA) – First 30 minutes			
0366T		Group adaptive behavior (Tech) – First 30 minutes			
0367T	TG	Group adaptive behavior (LBA) – First 30 minutes	30 minutes	Approved as medically necessary	
0367T	TF	Group adaptive behavior (SCABA) – First 30 minutes			
0367T		Group adaptive behavior (Tech) – First 30 minutes			

Billing Codes *(continued)*

CODE	MODIFIER	DESCRIPTION	UNITS	SERVICE LIMITS	TOTAL UNIT
0370T	TG	Adaptive behavior treatment (LBA) - Family adaptive behavior treatment guidance. Patient not present. Guardians and caregivers present.	1 hour	Approved as medically necessary	
0370T	TF	Family adaptive behavior treatment guidance (SCABA) - Patient not present. Guardians and caregivers present.			
0371T	TG	Multiple-family group (LBA) - Adaptive behavior treatment guidance. Without patient.	1 hour	Approved as medically necessary	
0371T	TF	Multiple-Family Group (SCABA) - Adaptive behavior treatment guidance. Without patient.			
0372T	TG	Adaptive Behavior Treatment (LBA) - Social skills group. With patient.	1 hours	Approved as medically necessary	
0372T	TF	Adaptive Behavior Treatment (SCABA) - Social skills group. With patient.			

* Licensed Behavioral Analyst

** State-Certified Assistant Behavioral Analyst

*** Technician

By signing below, I attest that all professionals and paraprofessionals rendering service(s) under the proposed treatment plan have the appropriate training and education required to render service(s).

Rendering Provider Signature

Date

Please submit form via fax to:

Louisiana Healthcare Connections
Behavioral Health Utilization Management Department
1-844-466-1277

About Louisiana Healthcare Connections

Louisiana Healthcare Connections is a Healthy Louisiana plan based in Baton Rouge, Louisiana, providing quality health insurance to more than 475,000 people across the state who qualify for Medicaid or LaCHIP. Established to deliver quality healthcare through local, regional and community-based partners, Louisiana Healthcare Connections improves the health of its members through focused, compassionate and coordinated care. Because Louisiana Healthcare Connections believes healthy is a way of life, its members benefit from programs and services designed for their personal well-being. For more information, visit www.LouisianaHealthConnect.com.