





Comprehensive Autism Care Demonstration



Opening remarks

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Agenda for discussion

- Comprehensive Autism Care Demonstration (CACD)
- TRICARE certification requirements
- Humana Military credentialing requirements
- Referrals & authorizations
- Claims requirements
- Forms
- Key provider resources







Comprehensive Autism Care Demonstration

- The TRICARE Comprehensive Autism Demonstration (Autism Care Demo) covers Applied Behavior Analysis (ABA) for all TRICARE beneficiaries diagnosed with Autism Spectrum Disorder (ASD)
- The demonstration began July 25, 2014 and will continue through December 31, 2023.





Eligibility for CACD program

- TRICARE Operations Manual Chapter 18, Section 4, Paragraph 7.0 Beneficiary Eligibility
- The CACD covers ABA services for eligible beneficiaries who have been diagnosed with Autism Spectrum Disorder (ASD) using the DSM-5 criteria and also who have been issued a referral for ABA services by a TRICARE-authorized Physician-Primary Care Manager (P-PCM) or by a specialized ASDdiagnosing provider





Eligibility for CACD program

TRICARE Operations Manual Chapter 18, Section 4, Paragraph 7.0 Eligibility

The contractor shall cover ABA services under this demonstration for dependents of active duty, retirees, and TRICARE eligible Reserve Components, participants in member plus family coverage under TRICARE Reserve Select (TRS) and TRICARE Retired Reserve (TRR), individuals covered under the Transitional Assistance Management Program (TAMP) or TRICARE for Life (TFL), participants in TRICARE Young Adult (TYA), North Atlantic Treaty Organization (NATO) dependent beneficiaries, and those individuals no longer TRICARE eligible who are participating in the Continued Health Care Benefits Program (CHCBP).





Eligibility for CACD program

- Beneficiaries seeking services under the CACD program
 - Have been diagnosed with ASD by a TRICARE—authorized ASD diagnosing provider.
 - Active duty dependents must be enrolled in the Exceptional Family Member Program (EFMP) through the sponsor's branch of service and registered for Extended Care Health Option (ECHO) with case managers in the TRICARE region





TRICARE certification requirements

- Certification is the process in which the credentials of the provider are verified through the completion and submission of the TRICARE certification applications.
- All providers rendering care to a TRICARE beneficiary must be TRICARE certified in order to receive payment.
- For assistance in completing the TRICARE certification application contact the WPS TRICARE Certification Unit at 1-800-351-9946
- Completed applications are faxed to WPS at 1-608-221-7535





Humana Military credentialing requirements

- Credentialing is only required for providers who choose to join the network
- A Board Certified Behavior Analyst (BCBA) must be credentialed
- A Board Certified Assistant Behavior Analyst (BCaBA) and a Behavior Technician (BT) do not require credentialing
- Either the CAQH or Humana Military credentialing application is acceptable





Humana Military credentialing

- Completed applications should be returned to your Provider Education and Relations Representative (PERR)
- Your PERR will submit your application to Humana Military's credentialing department for processing
- You can contact your PERR by calling 1-800-444-5445







Referrals and authorizations

- PCM/Specialized diagnosing provider must submit a referral for ABA services
- Must be preauthorized prior to rendering services
- An approved authorization will cover six months of ABA services
- Pre-authorization is required for continuation ABA services every six months
- A new referral from the P-PCM or ASD diagnosing provider is required every two years





Referrals and authorizations

- To clarify the 99 unit six month approval limit a note will be included with each authorization identifying what is being approved
- Example of possible referral note:

"HOURS AUTHORIZED PER TREATMENT PLAN REQUEST: 0359T -ONE UNIT, 0360T/0361T - 6HRS/WEEK, 0364T/0365T -30HRS/WEEK, 0368T/0369T - 2HRS DAILY, 0370T - 2HRS/WEEK

NOTE: 99 indicates that services exceeding 99 units have been authorized for payment for this approval period"





Referrals and authorizations

- Can be requested through our secured provider portal located on our website <u>www.HumanaMilitary.com</u>
- Humana Military is honoring all active Health Net and ValueOptions referrals and authorizations. There is no need to resubmit these referrals





Claims – Covered CPT codes

While the CPT Codes listed in the TRICARE Operations Manual Chapter 18, Section 4 are currently listed on the Defense Health Agency's website as a "Government No Pay Code" they <u>ARE</u> covered under the CACD program and will be paid in accordance with TRICARE policies.





Claims – Category III and other CPT codes

- TRICARE Operations Manual Chapter 18, Section 4 allows for the following CPT codes to be billed for services rendered under the CACD program: (remember these services must be authorized prior to rendering services)
- 0359T ABA assessment and ABA TP
- 0360T & 0361T Observational behavioral follow-up assessment supervised fieldwork
- 0364T & 0365T Adaptive behavior treatment by protocol
- 0368T & 0369T Adaptive behavior treatment by protocol modification
- 0370T Family Adaptive Behavior Treatment Guidance
- T1023 Outcome measures completed and submitted by BCBA/BCBA-D





Claims – Electronic submission

- Network and non-network provider claims, under the ACD shall be submitted electronically using the Category III CPT codes defined in TRICARE Operations Manual Chapter 18, Section 4, Paragraph 12.0
- Claims may be filed electronically using the web based claims application within provider portal
- All providers who submit claims electronically must register with WPS; this includes submitting claims using the web based claims application. This process takes 1 to 2 days to fully complete and update in all systems





Claims – Timeliness of payments

• We are required to process clean claims within 30 days of receipt







Claims – Reimbursement

• TRICARE Operations Manual Chapter 18, Section 4, paragraph 13.5 states negotiated provider rates lower than those directed in this policy are not allowed.







Claims - Reimbursement – CPT 0359T

The Initial ABA assessment and ABA TP and every six month ABA reassessment and TP update by the authorized ABA supervisor (or as delegated to an assistant behavior analyst). CPT 0359T is a single unit of service code reimbursed at \$500.00.





Claims - Reimbursement - CPT 0360T & 0361T

- Observational Behavioral Follow-Up Assessment for Supervised Field Work of assistant behavior analysts and BTs by the authorized ABA supervisor.
- These are timed codes reimbursed at \$62.50 per 30 minutes (\$125.00/ hour) for authorized ABA supervisors and \$37.50 per 30 minutes (\$75.00/hour) for assistant behavior analysts delegated supervision responsibility.





Claims - Reimbursement - CPT 0364T & 0365T

- Adaptive Behavior Treatment by Protocol.
- These codes are generally used by the BT for one-on-one ABA services with the beneficiary. Authorized ABA supervisors and assistant behavior analysts can also deliver this service.
- CPT 0364T and 0365T are timed codes reimbursed at \$62.50 per 30-minute increments (\$125.00/hour) for authorized ABA supervisors, \$37.50 per 30 minutes (\$75.00/hour) per assistant behavior analysts, and \$25.00 per 30 minutes (\$50.00/ hour) for BTs.





Claims - Reimbursement - CPT 0368T & 0369T

- Adaptive behavior treatment by protocol modification for team meetings by the authorized ABA supervisor or for the authorized ABA supervisor treatment protocol modification, with or without the BT or parent/caregiver present.
- Reimbursed at \$62.50 per 30 minutes (\$125.00/hour) and \$37.50 per 30 minutes (\$75.00/hour) for the assistant behavior analyst delegated this responsibility.





Claims - Reimbursement - CPT 0370T

- Family Adaptive Behavior Treatment Guidance.
- Authorized ABA supervisor (or as delegated to an assistant behavior analyst) treatment guidance to the parents/ caregivers is a single unit of service CPT code reimbursed at \$125.00.





Claims - Reimbursement – CPT T1023

 For BCBAs completing and submitting claims for T1023, reimbursement shall be the geographically adjusted reimbursement methodology for CPT code 96102.
Reimbursement is limited to one unit per measure (PDDBI: [Parent and Teacher form]: one unit every six months or Vineland-3/SRS-2: one unit each per two year period).





FORMS

- Treatment Plan checklist/template
- Treatment Plan Update checklist/template
- Supervision form
- P-PCM ABA Referral checklist/template





Keeping provider data accurate

- Notify your provider education and relations representative when you need to make changes to your rosters. This should be done when
 - Adding new providers
 - Removing providers
 - Updating provider information (physical address, phone, fax, email address, billing address etc.)





Resources

- Autism Center of Excellence https://www.HumanaMilitary.com/autism-coe/
- Dedicated ABA phone number 1-866-323-7155
- WPS TRICARE Provider Certification Unit
 - Phone number 1-800-351-9946
 - Fax number 1-608-221-7535
- Provider Education & Relations Reps 1-800-444-5445
- Humana Military provider portal
- Humanamilitary.com
- Humana Military Handbook









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