

Applied Behavior Analysis (ABA) Reimbursement Policy - Commercial

IMPORTANT NOTE ABOUT THIS REIMBURSEMENT POLICY

You are responsible for submission of accurate claims. This reimbursement policy is intended to ensure that you are reimbursed based on the procedure code or codes that correctly describe the health care services provided to individuals whose behavioral health benefits are administered by Optum, including but not limited to UnitedHealthcare members. This reimbursement policy is also applicable to behavioral health benefit plans administered by OptumHealth Behavioral Solutions of California.

Our behavioral health reimbursement policies may use Current Procedural Terminology (CPT®), Centers for Medicare and Medicaid Services (CMS) or other procedure coding guidelines. References to CPT or other sources are for definitional purposes only and do not imply any right to reimbursement. This reimbursement policy applies to all health care services billed on CMS 1500 forms and, when specified, to services billed on the UB-04 claim form and to electronic claim submissions (i.e., 837p and 837i) and for claims submitted online through provider portals. Coding methodology, industry-standard reimbursement logic, regulatory requirements, benefits design and other factors are considered in developing reimbursement policy.*

*This information is intended to serve only as a general reference resource regarding our reimbursement policy for the services described and is not intended to address every aspect of a reimbursement situation. **Accordingly, Optum may use reasonable discretion in interpreting and applying this policy to behavioral health care services provided in a particular case. Further, the policy does not address all issues related to reimbursement for behavioral health care services provided to members. Other factors affecting reimbursement may supplement, modify or, in some cases, supersede this policy.** These factors may include, but are not limited to: member's benefit coverage, provider contracts and/or legislative mandates. Finally, this policy may not be implemented exactly the same way on the different electronic claim processing systems used by Optum due to programming or other constraints; however, Optum strives to minimize these variations.*

Optum may modify this reimbursement policy at any time by publishing a new version of the policy on this website. However, the information presented in this policy is accurate and current as of the date of publication.

**CPT® is a registered trademark of the American Medical Association*

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Applicability

This reimbursement policy applies to all health care services billed on CMS 1500 forms and to electronic claim submissions (i.e., 837p) and for claims submitted online through provider portals. This policy applies to commercial products, all network and non-network physicians and other qualified health care professionals, including, but not limited to, non-network authorized and percent of charge contract physicians and other qualified health care professionals.

Policy

Overview

This policy describes the correct coding methodology and reimbursement for reporting behavior assessment/intervention services (ABA) for the assessment and treatment of Autism Spectrum Disorders with cpt codes 97151-97158 along with the appropriate modifier by a licensed Qualified Health Care Professional (QHP) including a Board Certified Behavior Analyst (BCBA) or Board Certified Assistant Behavior Analyst (BCaBA) or Registered Behavior Technician (RBT) providing program oversight services.

Reimbursement Guidelines

Optum follows AMA industry standards and allows the following below reimbursable codes for the commercial ABA program. The appropriate modifier should be billed to reflect the appropriate credentials of the provider delivering the services.

The appropriate modifier must be billed under the Optum ABA program:

- **HN Modifier:** The approved rendering provider for this modifier is of a bachelor’s level is a Board Certified Assistant Behavior Analyst (BCaba) and
- **HM Modifier:** The approved rendering provider for this modifier is of a bachelor’s degree level - a Registered Behavior Technician (RBT)
- **HO modifier:** The approved rendering provider for this modifier is a mater’s level clinician – Board Certified Behavior Analyst (BCBA) or a licensed mental health provider.
- **HP modifier:** The approved rendering provider for this modifier is a doctorate level clinician - Board Certified Behavior Analyst-Doctorate (BCBA-D) or a licensed mental health provider.

Please refer to the below for further guidance:

- Optum Frequently Asked Questions [Autism/Applied Behavior Analysis \(ABA\) Using CPT Codes - FAQs \(providerexpress.com\)](https://providerexpress.com/autism-aba-cpt-codes-faq)
- Optum Provider Alert document [Reimbursable CPT Codes for ABA Commercial Claims \(providerexpress.com\)](https://providerexpress.com/reimbursable-cpt-codes-aba-commercial-claims) for further guidance related to Optum ABA Program.

Autism/Applied Behavior Analysis		
Cpt Codes	Modifier	
97151	HN, HO or HP	Behavior identification assessment, administered by a physician or other qualified health care professional, each 15 minutes of the physician's or other qualified health care professional's time face-to-face with patient and/or guardian(s)/caregiver(s) administering assessments and discussing findings and recommendations, and non-face-to-face analyzing past data, scoring/interpreting the assessment, and preparing the report/treatment plan
97152	HN, HM or HO or HP	Behavior identification-supporting assessment, administered by one technician under the direction of a physician or other qualified health care professional, face-to-face with the patient, each 15 minutes
97153	HN, HM or HO or HP	Adaptive behavior treatment by protocol, administered by technician under the direction of a physician or other qualified health care professional, face-to-face with one patient, each 15 minutes
97154	HN, HM HO, or HP	Group adaptive behavior treatment by protocol, administered by technician under the direction of a physician or other qualified health care professional, face-to-face with two or more patients, each 15 minutes

97155	HN,HO or HP	Adaptive behavior treatment with protocol modification, administered by physician or other qualified health care professional, which may include simultaneous direction of technician, face-to-face with one patient, each 15 minutes
97156	HN, HO or HP	Family adaptive behavior treatment guidance, administered by physician or other qualified health care professional (with or without the patient present), face-to-face with guardian(s)/caregiver(s), each 15 minutes
97157	HN, HO or HP	Multiple-family group adaptive behavior treatment guidance, administered by physician or other qualified health care professional (without the patient present), face-to-face with multiple sets of guardians/caregivers, each 15 minutes
97158	HN, HO or HP	Group adaptive behavior treatment with protocol modification, administered by physician or other qualified health care professional, face-to-face with multiple patients, each 15 minutes

Questions and Answers

1	<p>Q. Who can bill with the HN Modifier?</p> <p>A. Under industry standards, the HN modifier is defined as a bachelor's level provider. Under Optum's ABA program, the approved bachelor's level provider is a BCaBA.)</p>
2	<p>Q. Who can bill with the HM modifier?</p> <p>A. Under industry standards, the HM modifier is defined as less than a bachelor's degree. Under Optum's ABA program, the approved provider for this modifier is a Behavior Technician.</p>
3	<p>Q. How do we bill for an ABA Supervisor?</p> <p>A Billable services for an ABA Supervisor (Behavior Analyst or licensed BH clinician on staff) should be billed with the applicable CPT code(s) and the HO modifier.</p>

Resources

- American Medical Association, Current Procedural Terminology (CPT®) and associated publications and services
- American Psychological Association
- ABA Coding Coalition – Model Coverage Policy for Adaptive Behavior Services

History / Updates

October, 2023	No updates
September, 2022	New Reimbursement Policy

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