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MEMORANDUM

MEMO NO.  
QI-2020  
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TO: QUEST Integration (QI) Health Plans, Physicians, Advanced Practice Registered Nurses (APRNs), Behavioral Health Providers, and Developmental Disabilities/Intellectual Disabilities (DD/ID) Providers

FROM: Judy Mohr Peterson, PhD   
Med-QUEST Division Administrator

SUBJECT: COVERAGE OF SERVICES FOR AUTISM SPECTRUM DISORDER VIA TELEHEALTH

This guidance serves as an update to MQD memorandum QI-1908 dated March 8, 2019, UPDATE FOR BILLING CODES FOR INTENSIVE BEHAVIOR THERAPY (IBT) FOR TREATMENT OF CHILDREN UNDER 21 YEARS OF AGE WITH AUTISM SPECTRUM DISORDER during the Public Health Emergency (PHE).

For Applied Behavior Analysis (ABA) services, MQD is allowing CPT 97156 - Family Adaptive Behavior Treatment Guidance, to be provided via telehealth. Service delivery using only a telephone is not approved for ABA service delivery for CPT 97156 and shall be provided via a real-time two-way audio and video modality. Guidelines for CPT 97156 will remain the same as outlined in QI-1908 with the exception that the code will be allowable by telehealth at the same rate of reimbursement. The requirement, as stated in QI-1908, is for the service to be provided by a BCBA or BCBA-D.

When billing for the code, following Provider Memorandum QI-1702A on telehealth, the GT modifier and Place of Service 02 needs to be used to indicate the service was for synchronous real-time two-way audio and video. Coverage of the code will be ongoing unless otherwise specified by MQD.

Documentation requirements for the telehealth visit will remain the same as the in person visits. The goal is to increase access to care for family adaptive behavior treatment.