

Autism Care Demonstration (ACD) annual required training

(part 1)



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Agenda for discussion: Part 1

- 01 | ACD
- 02 | Who is eligible
- 03 | Review of revisions
- 04 | Provider enrollment
- 05 | Referrals and authorizations

ACD

- [TRICARE Operations Manual \(TOM\) Ch. 18, Sec. 3](#)
- The TRICARE ACD covers Applied Behavior Analysis (ABA) services for all TRICARE eligible beneficiaries enrolled in an eligible TRICARE plan with a definitive diagnosis of Autism Spectrum Disorder (ASD)
- The demonstration began July 25, 2014 and will continue through December 31, 2023

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Eligibility for ACD program

- The ACD covers clinically necessary and appropriate ABA services for eligible beneficiaries who have been diagnosed with ASD according to the DSM-5 criteria and using a Validated Assessment Tool (VAT)
- For those beneficiaries who have been issued a referral for ABA services by a TRICARE-authorized Primary Care Manager (PCM) or by a specialized ASD-diagnosing provider
- Active Duty Family Members (ADFM) 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)

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Review of revisions



ACD Revisions

Effective January 1, 2025

- ACD moved to *TOM, Sec. 3, Ch. 18*
- Outcome measures administration no greater than 90 days from due date with no additional units authorized for administration
- The Autism Services Navigator (ASN) will assist beneficiary in locating a provider to complete the required outcome measures when the ABA supervisor cannot complete them

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ASN

- Autism-specific care manager
- Primary clinical advocate for the beneficiary
- Take the lead role and coordinate with other assigned case managers when applicable
- Primary point of contact for the beneficiary/family

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ASN responsibilities

- Serve as a single point-of-contact readily accessible by phone or secure message to the beneficiary and family during business hours
- Coordinate all medical and behavioral services such as Physical Therapy (PT), Occupational Therapy (OT) or Speech Language Pathology (SLP) with appropriate care management team members
- Coordinate and participate in medical team conferences and document a summary that will be available to the PCM and/or referring provider and to the government
- Facilitate continuity of care when the beneficiary moves
- Conduct an initial care management assessment to develop a written Comprehensive Care Plan (CCP)
- Notify the medical home, PCM and/or referring provider and parent/caregivers that the CCP has been established
- Share the CCP with appropriate providers
- Update the CCP at least every six months

CCP

- A care plan that is developed and maintained by the ASN
- The outcome measures are incorporated
- Discharge/Transition planning shall be addressed
- This care plan will identify all care and services for the diagnosis of ASD
- Will allow for a more consistent and beneficiary-centric approach to care
- The ASN will update the CCP at least every six months to include updated outcome measures
- The CCP is not a clinical treatment plan and is different from the ABA provider treatment

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Annual required training

- ACD-Corporate Service Providers (ACSP) and Sole Providers are required to attend a contractor-hosted training annually
- Humana Military will report attendance to DHA
- Non-compliance will result in 10% claims penalty during the compliance period
- [Provider Webinars | Humana Military](#)

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Provider enrollment



TRICARE certification requirements

- Certification is the process to confirm that providers meet TRICARE requirements to become authorized
- All providers rendering care to a TRICARE beneficiary must be TRICARE-certified prior to rendering care in order to receive payment
- All providers must obtain a National Provider Identifier (NPI)
- All ABA providers must complete the Basic Life Support (BLS) or Cardiopulmonary Resuscitation (CPR) equivalent certification as demonstrated by completion of a hybrid course comprised of a web-based instruction component and a live component to demonstrate skills on a dummy
- Online only course are not accepted, such as ones hosted on virtual platforms like Zoom
- This certification must be maintained and current
- Send BLS/CPR renewals to HMCertUpdates@humanamilitary.com

TRICARE certification requirements

- TRICARE recognizes these authorized provider types
 - Authorized ABA supervisors
 - Assistant behavior analyst
 - Behavior technician
- ACSP and sole providers
 - ACSP include autism centers, autism clinics and sole providers
 - ACSP/Sole providers must:
 - Submit evidence of professional liability insurance
 - Enter into a participation agreement, Addendum A, approved by the director, DHA or designee
 - All ACSP and sole provider requirements are located in the *TOM Ch. 13, Sec. 3*

Note: Once certified, ACSP and sole providers can apply to join the TRICARE East network

TRICARE certification requirements

- Authorized ABA supervisors must submit a copy of a criminal history review
- Assistant behavior analysts and behavior technicians must submit a copy of a criminal history background check
- The criminal history background check shall include current federal, state and county criminal and sex offender reports for all locations where the provider resided or worked during the previous 10 years
- Any provider convicted of a felony of any kind, or a misdemeanor involving crimes against a child or domestic violence, is ineligible to become a TRICARE-authorized provider

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TRICARE certification: Application ABA providers

- ABA certification applications are submitted online
- [TRICARE Certification and Network Information | Humana Military](#)
- Choose the application by provider type

Autism Corporate Services Providers (ACSP) certification

If you are applying as an autism center, autism clinic or sole provider (individual ABA supervisor without tiered delivery model), you must complete the Autism Corporate Services Provider (ACSP) certification application. Note: Sole providers who are behavior analysts should also complete the Behavior Analyst certification application.

[Apply for ACSP certification](#)

Assistant Behavior Analyst certification

For providers who are state licensed/state certified as required by state regulations, or certified by the Behavior Analyst Certification Board (BACB) as a Board Certified Assistant Behavior Analyst (BCaBA) or certified by the Qualified Applied Behavior Analysis Credentialing Board (QABAB) as a Qualified Autism Services Practitioner or Supervisor (QASPDQASP-S).

[Apply for Assistant Behavior Analyst certification](#)

Behavior Analyst certification

For providers who are state licensed/state certified as required by state regulations, or certified by the Behavior Analyst Certification Board (BACB) as a Board Certified Behavior Analyst (BCBA or BCBA-D). Note: Behavior Analysts who are sole providers should also complete the Autism Corporate Services Providers (ACSP) application.

[Apply for Behavior Analyst certification](#)

Behavior Technician certification

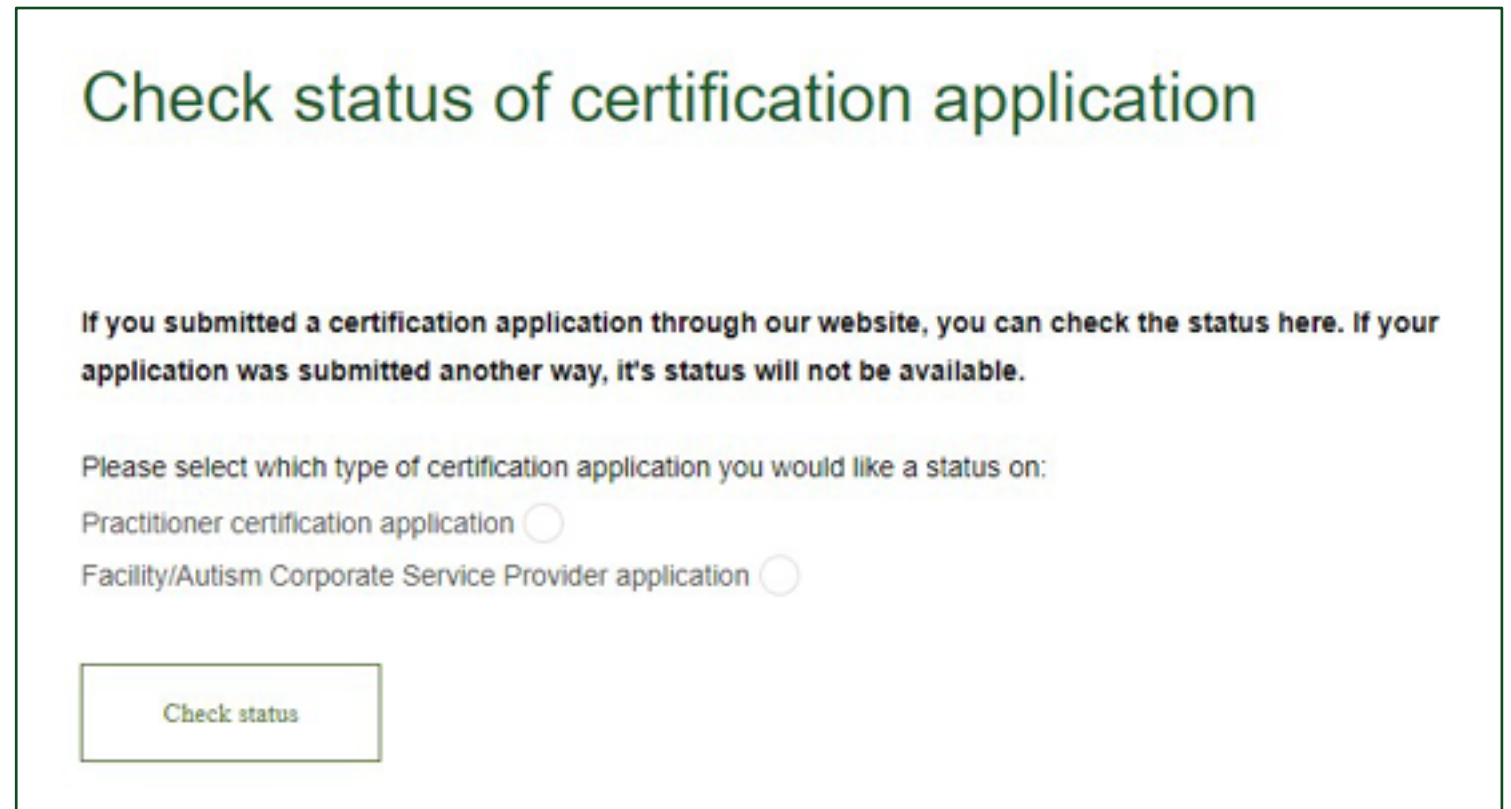
For providers who are state licensed/state certified as required by state regulations, or certified by the Behavior Analyst Certification Board (BACB) as a Registered Behavior Technician (RBT) or certified by the Qualified Applied Behavior Analysis Credentialing Board (QABAB) as an Applied Behavior Analysis Technician (ABAT), or certified by the Behavioral Intervention Certification Council (BICC) as a Board Certified Autism Technician (BCAT).

[Apply for Behavior Technician certification](#)

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TRICARE certification: Application ABA providers

- The tracking feature can be found on the page with the certification forms
- Click on **Check your application status**

A white rectangular box with a thin black border. At the top, the title "Check status of certification application" is in a large, dark green font. Below the title, a paragraph of text in a bold, dark gray font reads: "If you submitted a certification application through our website, you can check the status here. If your application was submitted another way, it's status will not be available." Below this, a line of text says "Please select which type of certification application you would like a status on:". There are two radio button options: "Practitioner certification application" and "Facility/Autism Corporate Service Provider application", each followed by an empty radio button circle. At the bottom, there is a white rectangular button with a thin black border and the text "Check status" in a dark green font.

TRICARE certification: Process after certification is completed

- The provider will receive notification of approval or rejection and a copy of the TRICARE participation agreement (if applicable)

Dear Alan Moore,
NP#: 7890123455

Thank you for your dedication and service to our TRICARE beneficiaries. As a TRICARE-certified provider, you are now authorized to receive payment from TRICARE.

You have been certified in the following state(s):

Approved State	Certification Completed Date
KENTUCKY	07-14-2025

Please note important TRICARE information:

- Wisconsin Physicians Service (WPS) is the TRICARE East Region claims processor.
- We require all providers/groups to sign, and have on file, a Trading Partner Claims Agreement prior to submission of electronic claims. Providers who will submit electronic claims directly to WPS must complete the self-registration process at wpsic.com
- As a TRICARE-certified provider, you may submit your claims and receive payments electronically by signing up for Electronic Data Interchange (EDI) and Electronic Funds Transfer (EFT) to expedite claims processing and payments. Electronic claims submission, EFT and Electronic Remittance Advice (ERA) are also available via provider self-service at HumanaMilitary.com. (Please note new locations for existing groups require ERA and EFT enrollment).
- Claims may also be submitted to WPS via the address below:
TRICARE East Region Claims
PO Box 7981
Madison, WI 53707-7981

Prior authorization from Humana Military is required for procedures and services. For the list of those services, visit HumanaMilitary.com

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Thank you for becoming a valued TRICARE-certified provider. If you have questions or need assistance, please visit provider self-service at HumanaMilitary.com/provider to take advantage of our chat and secure messaging features, or contact us at (800) 444-5445.

Respectfully,
Humana Military

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TRICARE certification requirements

- If a provider has not submitted a claim in two years
- When practicing in a new state
- When rendering services as a new provider type (for example, a behavior technician who becomes an assistant behavior analyst must submit a new certification application)



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Humana Military contracting

- ACSP/Sole provider certification process must be complete
- [Submit a request to join the network](#)
- A contracting representative will email a contract with instructions
- Credentialing applications will be processed for ABA supervisors



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Humana Military credentialing

- Only required for Humana Military-contracted providers
- ABA supervisors are required to submit credentialing applications to join the network
- Recredentialing is required every three years
- Acceptable credentialing applications:
 - Humana Military credentialing application
 - State application
 - Council for Affordable Quality Healthcare(CAQH) number or application
- For contracted groups, submit your application or CAQH number to the Humana Military ACD Provider Relations Team at HMACDProviderInquiries@HumanaMilitary.com
- Providers who submit roster loads will include CAQH number on roster template

Humana Military provider directory

- ABA supervisors will appear in the provider directory
 - Name
 - Work address
 - Phone and fax number
 - Hours of operation
 - Accepting new patients (yes or no)
 - Ages served
 - Telemedicine capability
 - Available session settings (in-home, clinic-based or both)
- Keep your provider data current
- Updates will be submitted by the provider in provider self-service

Referrals and authorizations



Referrals and authorizations: TRICARE Basic benefit

- There are services for the diagnosis of ASD covered under the Basic benefit and follow respective referral and authorization processes
- These services include, but are not limited to:
 - Medical team conference with interdisciplinary team of health care professional
 - OT
 - Pharmacotherapies
 - PT
 - Psychotherapies, to include parent-mediated programs
 - Psychological testing
 - Respite care (covered as part of ECHO)
 - SLP services

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Referrals and authorizations

- PCM/Specialized-ASD diagnosing provider must submit a referral to Humana Military for ABA services
- Pre-authorization is required for all ABA services
- Humana Military will issue an authorization for an initial assessment and Treatment Plan (TP) development to an authorized ABA supervisor
- An approved authorization will cover six months of ABA services
- A new referral from the PCM or ASD-diagnosing provider is required every two years
- The Diagnostic and Statistical Manual of Mental Disorders (DSM) criteria must be documented in a DHA-approved DSM-5 checklist in each referral as an ongoing requirement
- A validated assessment tool must be administered by a TRICARE-authorized ACD-diagnosing provider (one-time requirement) at diagnosis

Referrals and authorizations

- TRICARE-authorized diagnosing providers may use one of the following assessment tools:
 - *Screening Tool for Autism in Toddlers and Young Children (STAT)*
 - *Autism Diagnostic Observation Schedule-Second Edition (ADOS-2)*
 - *Autism Diagnostic Interview-Revised (ADI-R)*
 - *Childhood Autism Rating Scale-Second Edition (CARS-2)*
 - *Gilliam Autism Rating Scale-Third Edition (GARS-3)*
- A diagnosis based on clinical interview alone is not sufficient documentation to support clinical necessity of service
- A parent questionnaire alone is not sufficient

Referrals and authorizations

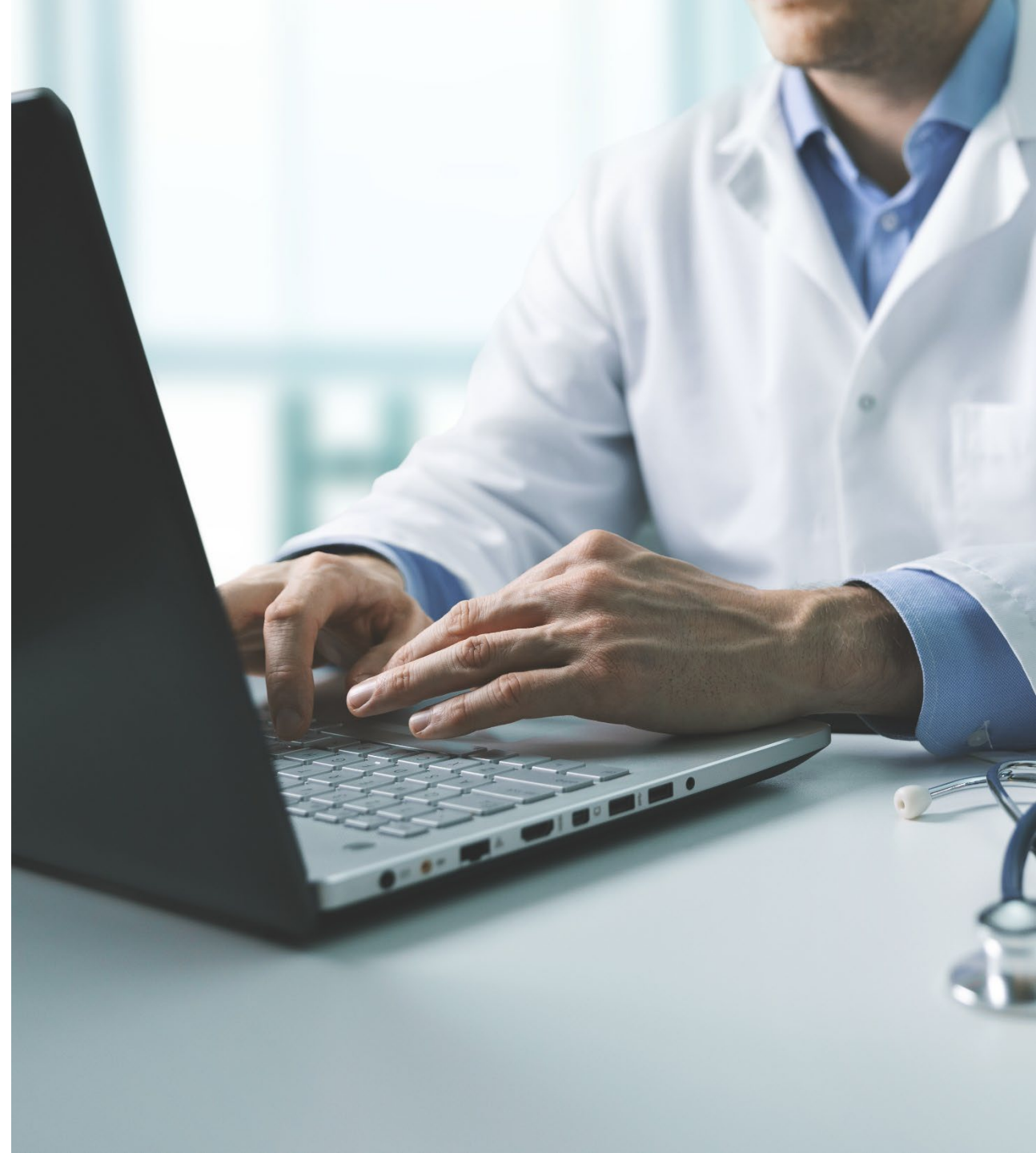
- Pre-authorization is required for all ABA services
- Upon receipt of complete referral, Humana Military will issue an authorization for an initial assessment and TP development to an authorized ABA supervisor
- An approved authorization will cover six months of ABA services



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Documentation: ABA assessments and treatment plans

- The *TOM* provides of list of required items that include:
 - Beneficiary identifying information
 - Reason for referral
 - Background information
 - Summary of assessment activities
 - TP goals
 - [Treatment Plan | Humana Military](#)
 - See *TOM Ch. 18, Sec. 3, Para. 8.7.1* for complete list



Documentation: Discharge planning

- The *TOM* provides of list of required items. The authorized ABA supervisor, the contractor or the family has determined one or more of the following:
 - The patient has met ABA TP goals and is no longer in need of ABA services
 - The patient has made no measurable progress toward meeting goals identified on the ABA TP after successive progress review periods and repeated modifications to the TP
 - Recommended by the contractor through the clinical review process
 - Discharge planning must be documented in every initial TP, every updated TP, and at termination of services
 - See *Ch. 18, Sec. 3, Para. 8.8* for complete list

Referrals and authorizations: Required outcome measures

- All outcome measures must be completed and reported, using norm-referenced, valid and reliable evaluation tools prior to issuing the treatment authorization
- **Pervasive Developmental Disorder Behavior Inventory (PDDBI):** Due with the initial assessment (Parent form) and every six months thereafter (Parent and teacher forms)
- ABA supervisor is expected to return the Parent and/or Teacher PDDBIs
- The ABA supervisor can only be the rater of the Teacher form
- **Parenting Stress Index – Fourth Edition (PSI-4) (Short form) or Stress Index for Parents of Adolescents (SIPA) (Profile form):** Due at baseline and every six months thereafter
- **Vineland Adaptive Behavior Scales – Third Edition (Vineland-3):** Due at baseline and every year thereafter (Parent form, the interview form if completed by a TRICARE-authorized provider or the teacher form)
- **Social Responsiveness Scale, Second Edition (SRS-2):** Due at baseline and every year thereafter (Parent form)
- The ABA supervisor maybe authorized to administer the Vineland-3, SRS-2, PSI-4 or SIPA outcome measures. However, if the Board Certified Behavior Analyst (BCBA) cannot complete these, Humana Military can assist in finding a provider who can.

Note: Submission of all outcome measure results must include the full publisher print report or hand scored protocol form and summary score sheets.

Referrals and authorizations: PDDBI

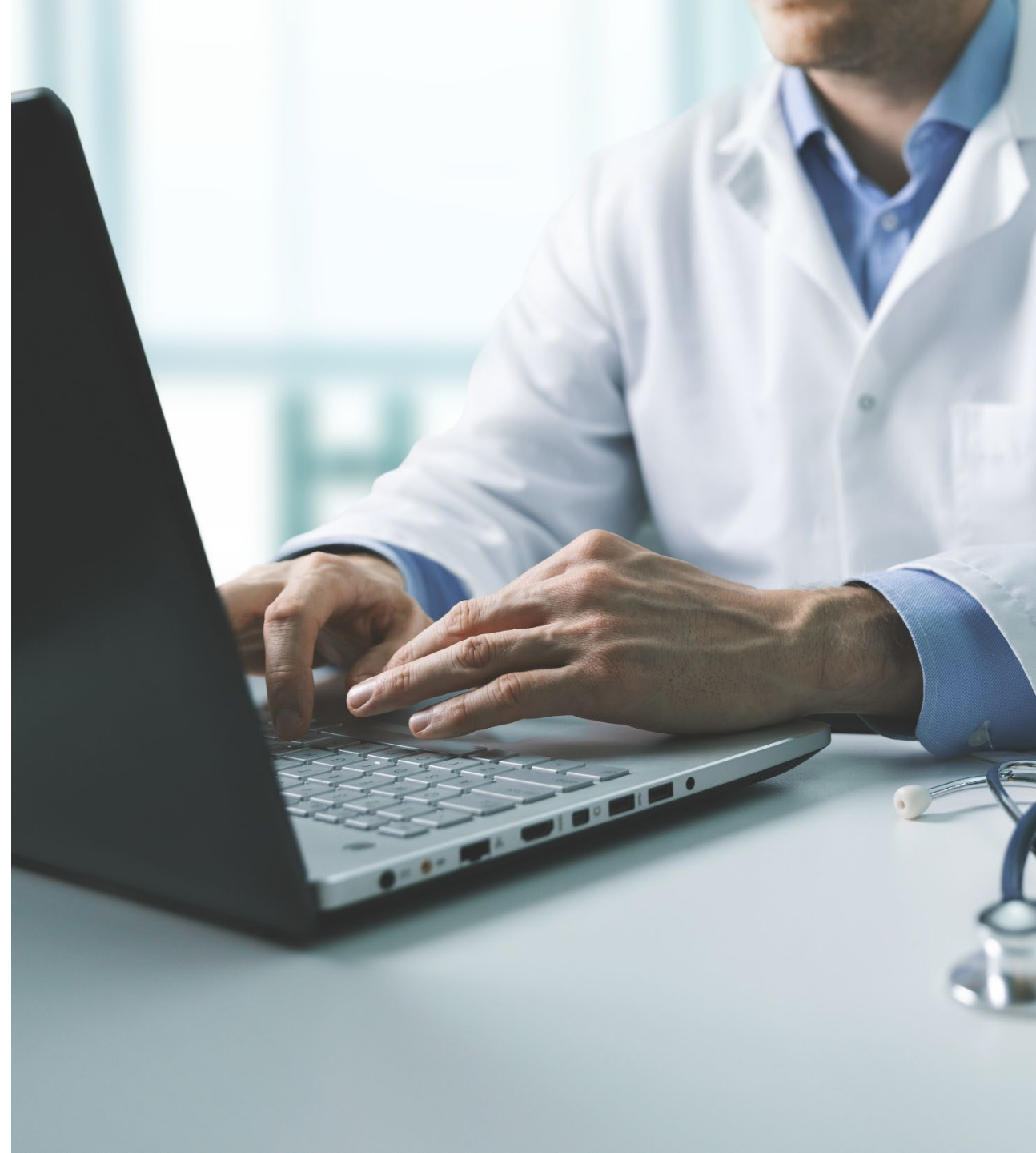
- The PDDBI is an informant-based rating scale that is designed to assist in the assessment (for problem behaviors, social, language and learning/memory skills) of children who have been diagnosed with ASD
- The PDDBI provides age-standardized scores for parent and teacher ratings
- Applicable for ages 1.5 through 18.5 years
- If beneficiary is outside of applicable ages, the PDDBI is not required as part of the outcome measures submission



Referrals and authorizations: PDDBI scoring interpretation

Autism composite:

- This score is an assessment of the severity of the person's autism
- This score may be interpreted as a measure of the lack of appropriate social communication skills
- Required by policy to authorize care



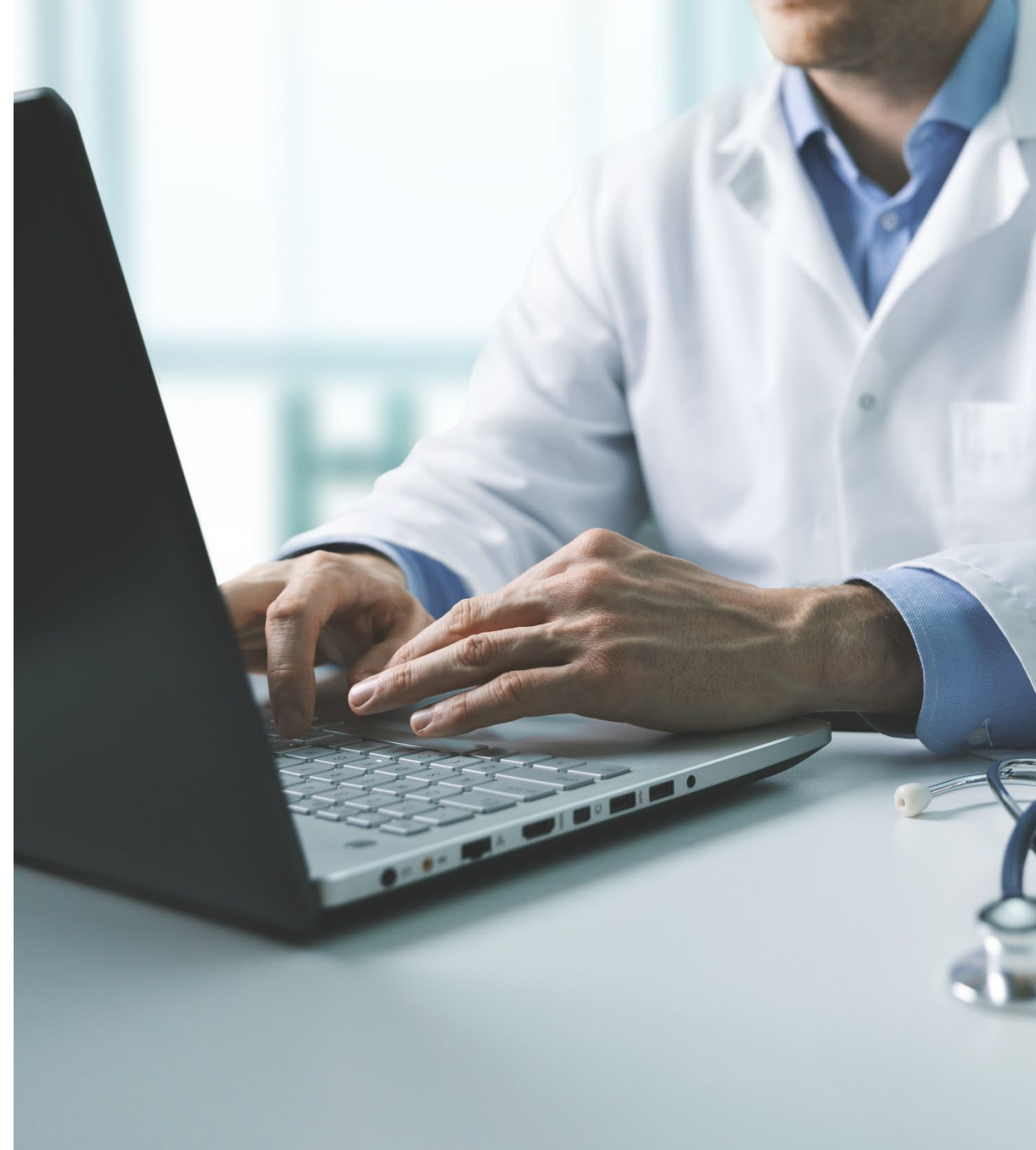
Referrals and authorizations: PDDBI scoring interpretation

Guidance available in PDDBI manual

- Missing autism composite score or T- scores
- Formula for scoring autism composite score
- Non-verbal individuals scoring
- Missing responses formula

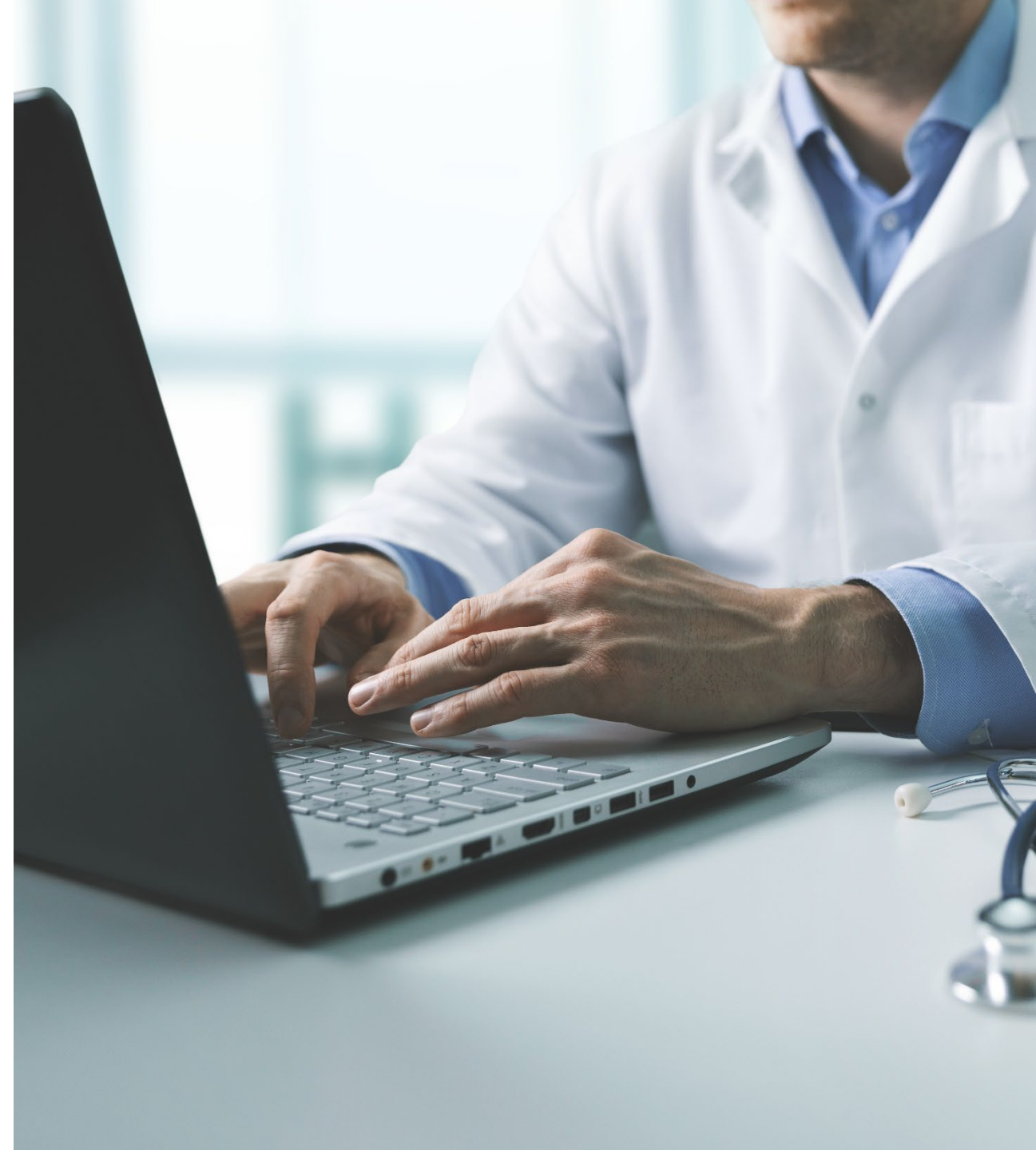
Note on preventing invalid submissions:

If the respondent is not providing valid responses, the online assessment prevents the autism composite score from generating.



Referrals and authorizations: Vineland-3

- The Vineland-3 is a valid and reliable measure of adaptive behavior for individuals diagnosed with intellectual disabilities and developmental disabilities (to include ASD)
- The Vineland-3 consists of an interview, a parent/caregiver and teacher rater forms
- Applicable for ages birth to 90 years



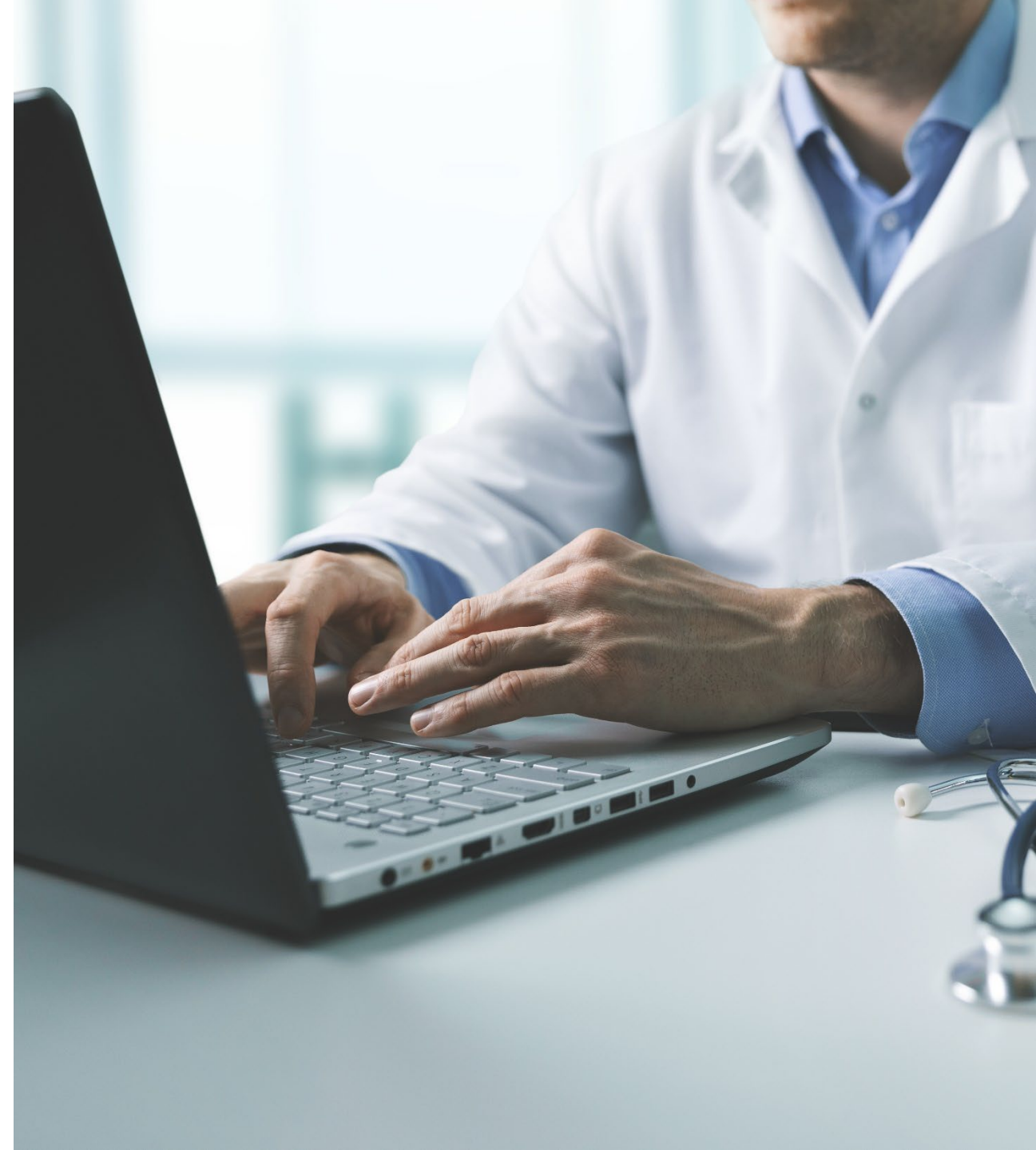
Referrals and authorizations: Vineland-3 scoring interpretation

Overall composite standard score

- Adaptive behavior composite

Domain composite scores

- Communication
- Daily living skills
- Socialization
- Motor skills



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Referrals and authorizations: Vineland-3 scoring interpretation

Domain and ABC standard score adaptive levels

- 20 – 70: Low
- 71 – 85: Moderately low
- 86 – 114: Adequate
- 115 – 129: Moderately high
- 130 – 140: High

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Referrals and authorizations: Vineland-3 scoring interpretation

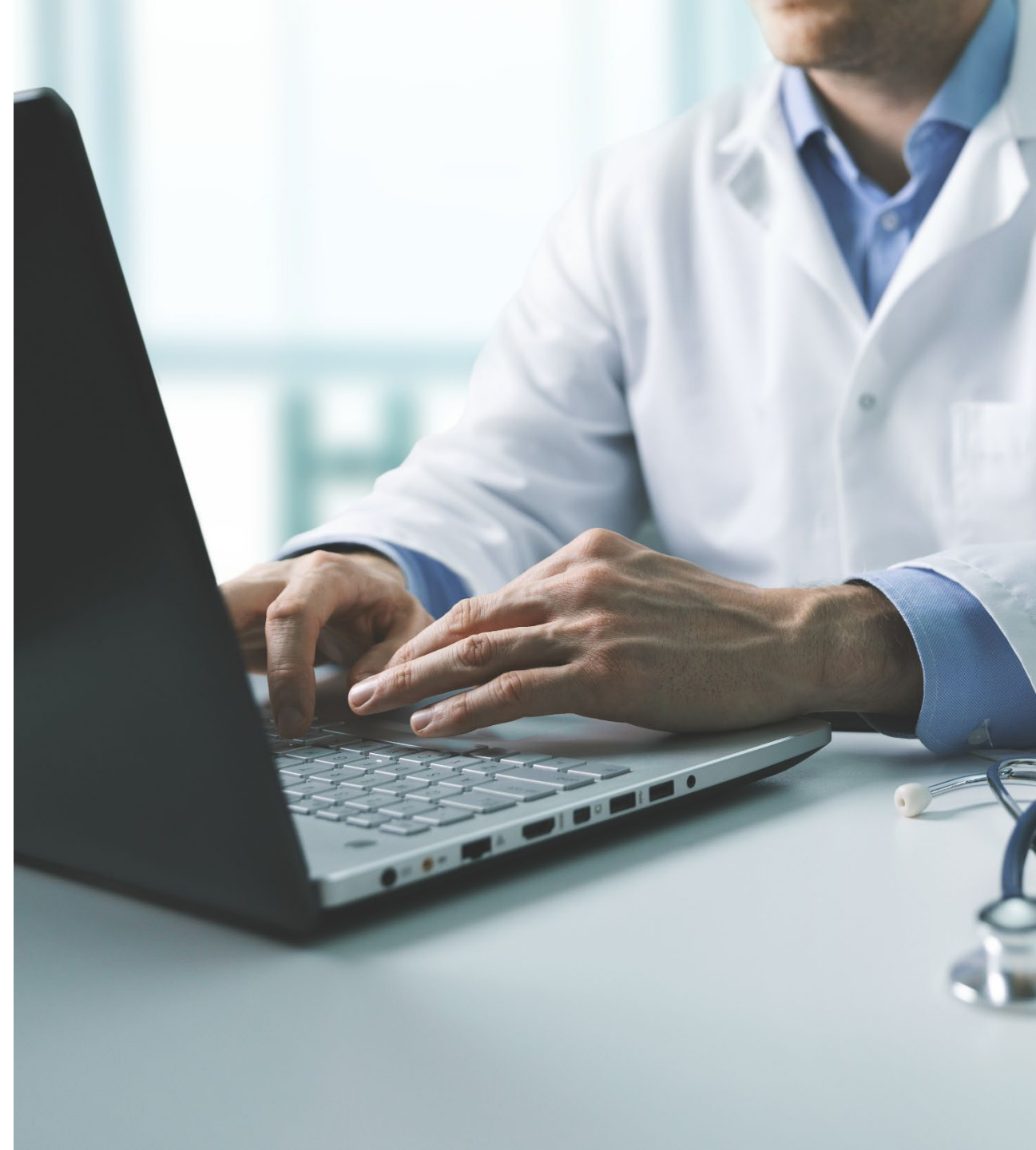
Maladaptive V-scale scores

- Internalizing
- Externalizing

V-scale score adaptive levels

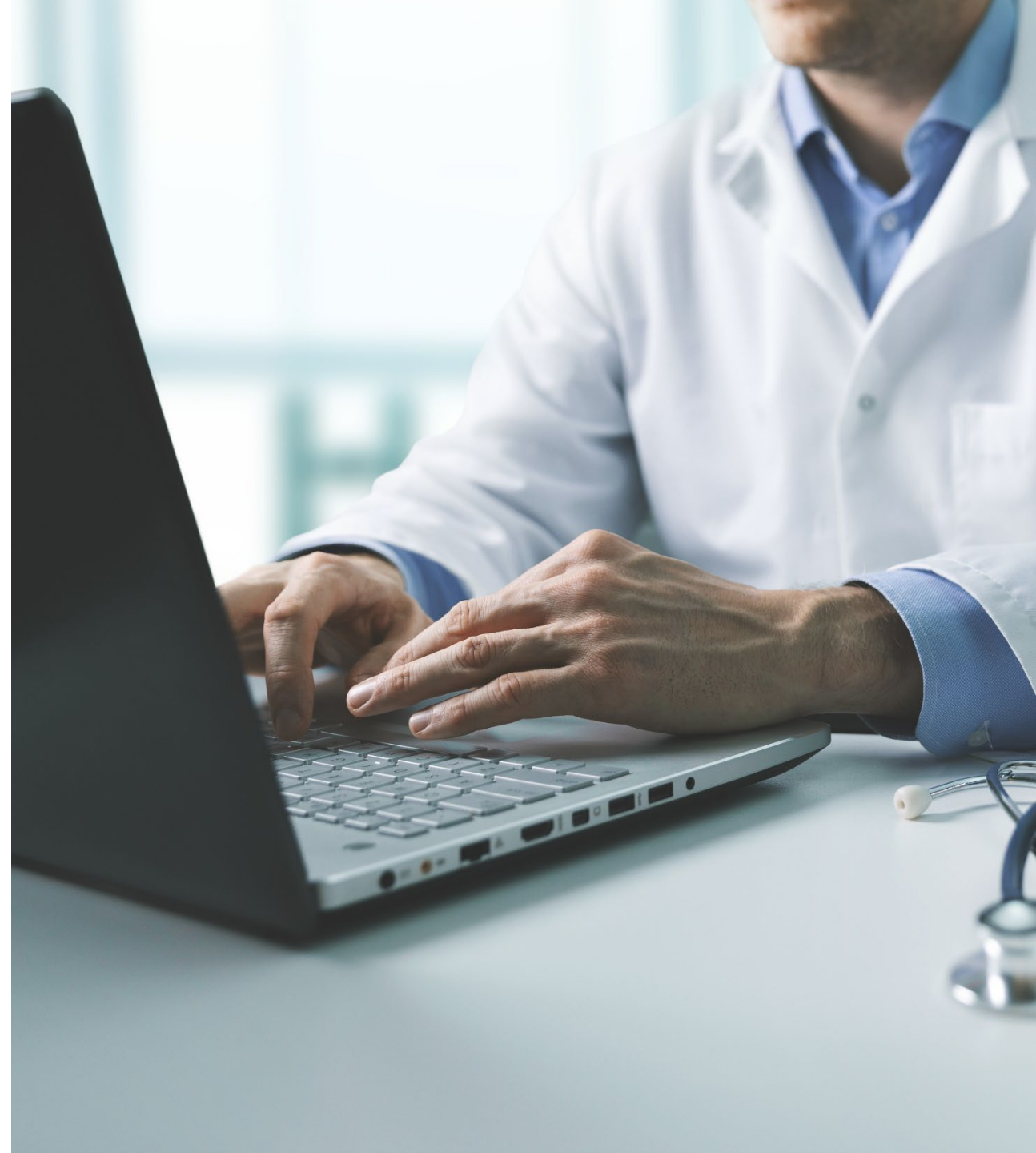
- 1 – 9: Low
- 10 – 12: Moderately low
- 13 – 17: Adequate
- 18 – 20: Moderately high
- 21 – 24: High

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Referrals and authorizations: SRS – 2

- The SRS-2 identifies social impairment associated with ASD and quantifies its severity
- Applicable for ages two and a half to 99 years
- If the beneficiary is outside of applicable ages, then this outcome is no longer valid and reliable for acceptance



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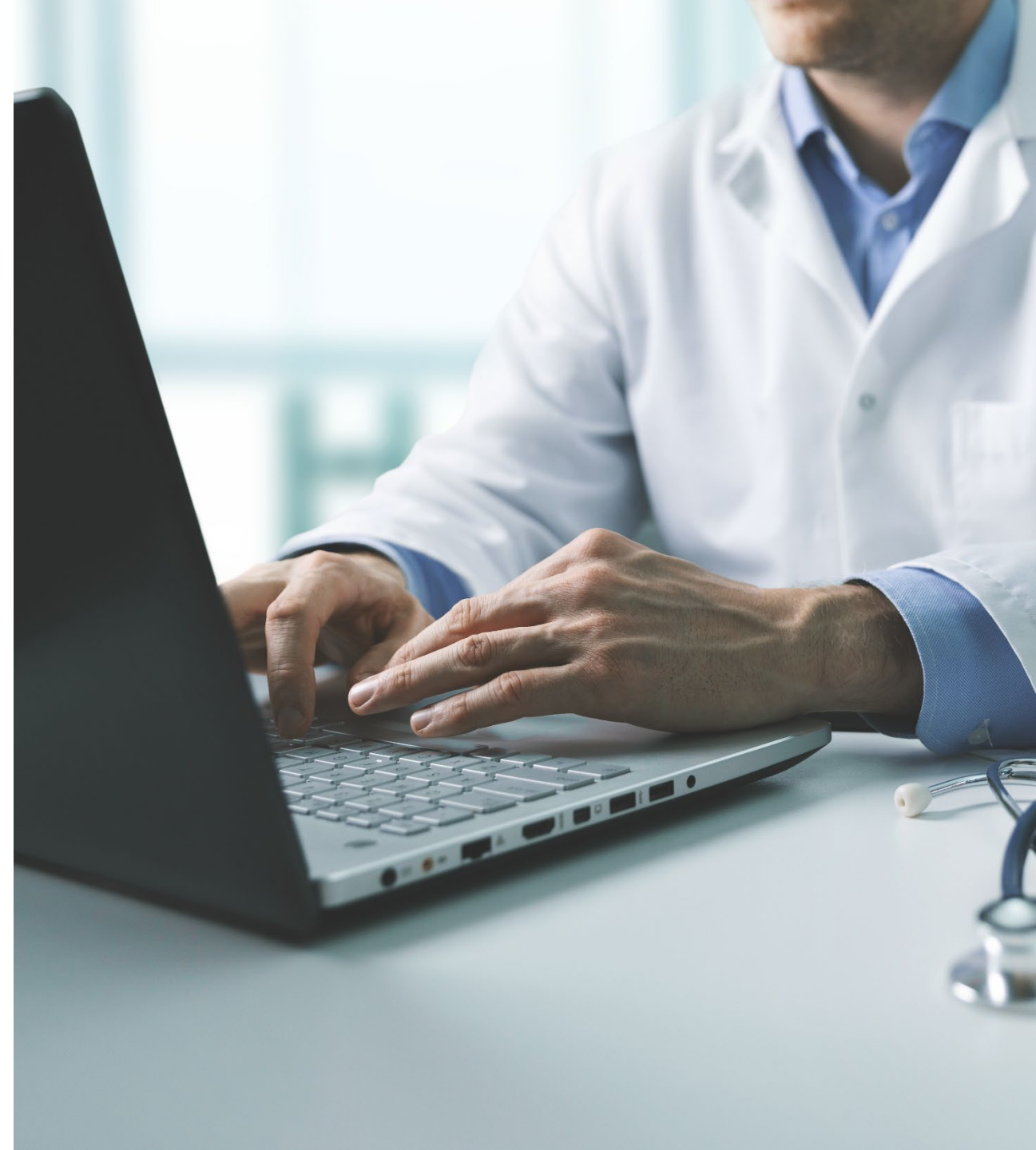
Referrals and authorizations: SRS – 2 scoring interpretation

DSM-5 compatible scales

- Social communication and interaction
- Restricted interests and repetitive behaviors

Treatment subscales

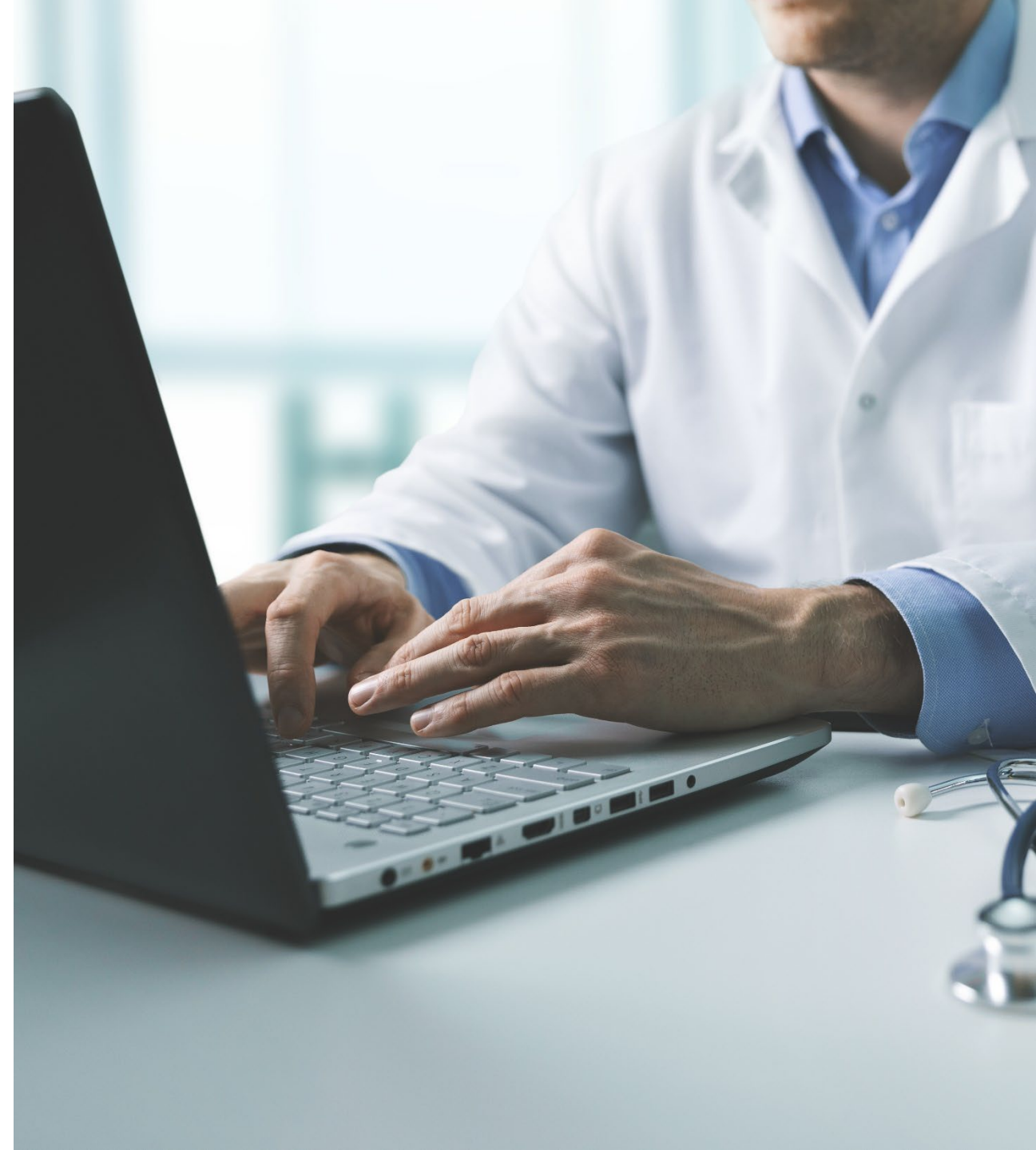
- Social awareness
- Social cognition
- Social communication
- Social motivation
- Restricted interests and repetitive behaviors



Referrals and authorizations: SRS – 2 scoring interpretation

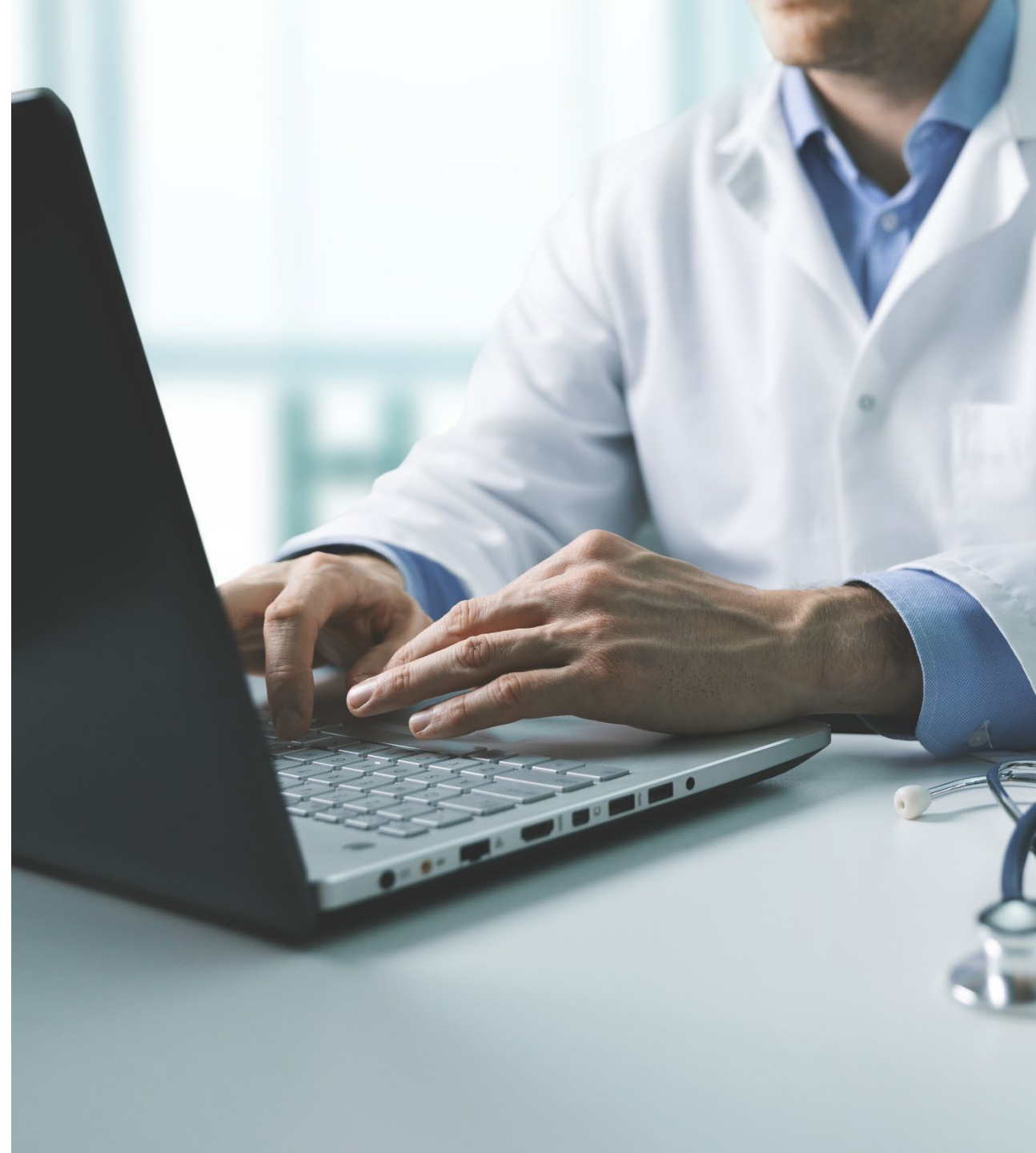
Total score

- Composite score to indicate severity level
- **All scores on the SRS-2 can be interpreted using the following scale:**
 - 59T and below: Within normal limits
 - 60T – 65T: Mild range
 - 66T – 75T: Moderate range
 - 76T or higher: Severe range



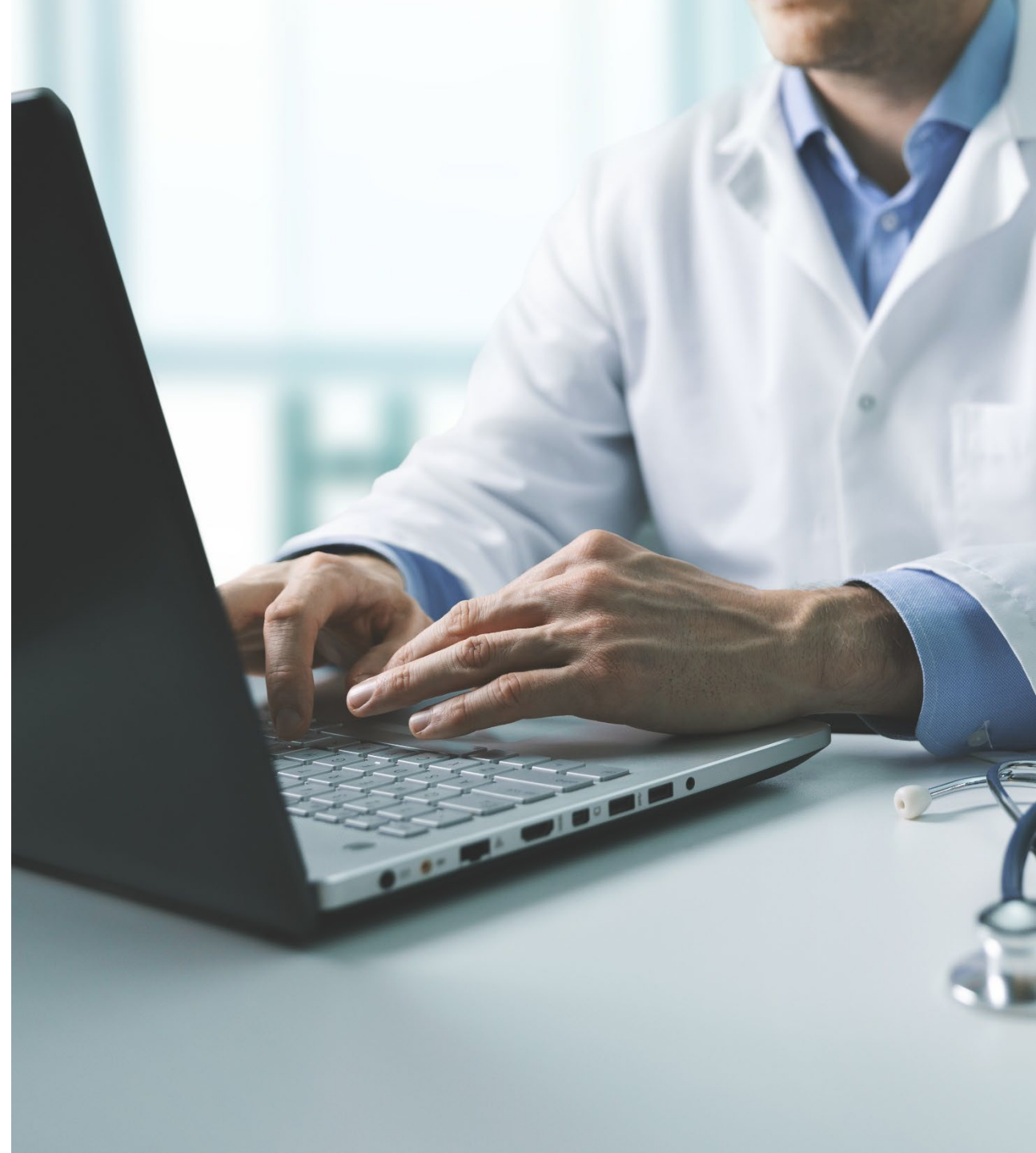
Referrals and authorizations: PSI short form

- Designed to evaluate the magnitude of stress in the parent-child system
- The short form is a 36-item inventory that focuses on three major domains of stress: child characteristics, parent characteristics and situational/demographic life stress
- The short form is required
- Required at baseline and every six months thereafter
- Applicable for ages one month to 12 years old



Referrals and authorizations: SIPA

- The SIPA is a screening and diagnostic instrument that identifies areas of stress in parent–adolescent interactions, allowing examination of the relationship of parenting stress to adolescent characteristics, parent characteristics, the quality of the adolescent– parent interactions and stressful life circumstances
- The profile form is required
- Required at baseline and every six months thereafter
- Applicable for ages 11 – 19 years, 11 months



Referrals and authorizations

- Pre-authorization is required for all ABA services
- As early as 60 calendar days and no later than 30 calendar days in advance, a re-authorization should be requested by the ABA provider
- Humana Military cannot back date late submissions
- Outcome measures must be completed/submitted prior to issuing the next six-month treatment authorization
- Humana Military will work with the ABA provider to revise the TP if the beneficiary is not making sufficient progress as shown on the outcome measures prior to re-authorization
- Every two years from the initial authorization, a new referral, with level of support, is required and must be submitted for ongoing ABA services
- The new referral is not a new diagnostic evaluation but a review of the beneficiary's progress, and it must include update to the DSM-5 checklist to include an update for the level of supports required
- These subsequent referrals may be accepted up to six months in advance of the exiting referral
- **Note:** The ACD is authorized to render only clinically necessary and appropriate ABA services for the **core** symptoms of ASD.

Agenda for discussion: Part 2

- 01 | CPT codes
- 02 | Claims requirements
- 03 | Audits
- 04 | Documentation
- 05 | Resources

CPT codes



Claims: Covered CPT codes

- The authorized CPT Codes are listed in the *TRICARE Operations Manual (TOM) Ch. 18, Sec. 3*
- Will be paid in accordance with TRICARE policies
- Only ACD-Corporate Service Providers (ACSP) or authorized change to Applied Behavior Analysis (ABA) supervisors may bill for TRICARE ABA services
- The rendering provider and National Provider Identifier (NPI) must be indicated on the claim
- Start and stop times should be included on each claim line

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Claims: Category 1 CPT codes

- *TOM Ch. 18, Ch. 3* allows for the following CPT codes to be billed for services rendered under the ACD program: (these services must be authorized prior to rendering services).
- 97151: Behavioral identification assessment
- 97153: Adaptive behavior treatment by protocol
- 97155: Adaptive behavior treatment by protocol modification
- 97156: Family adaptive behavior treatment guidance
- 97157: Multiple family group adaptive behavior treatment guidance
- 97158: Group adaptive behavior treatment by protocol modification
- 99366: Medical team conference with patient
- 99368: Medical team conference without patient
- **Note:** Concurrent billing is excluded for all ACD Category I CPT codes except when the family and beneficiary are receiving separate services, and the beneficiary is not present in the family session.

Claims: Reimbursement – CPT 97151 (assessment)

Initial ABA assessment, ABA Treatment Plan (TP) development, ABA reassessments and TP updates conducted by the authorized ABA supervisor during a one-on-one encounter with beneficiary and parents/caregivers:

- Elements of ABA assessment include:
 - In person observation
 - Administration and interpretation of assessments
 - Preparation of initial treatment plan
 - Discussion of findings with parents/caregivers
 - See *TOM Ch. 18, Sec. 3, Para. 8.11.6.1.1.2* for complete list
- CPT code 97151 is a timed code; 15 min increments
- May not be conducted via telemedicine
- Medically Unlikely Edit (MUE): 32 units (8 hours)
 - Includes administration of Pervasive Developmental Disorder Behavior Inventory (PDDBI) parent form
- All units must be used within 14 calendar days of first Date of Service (DOS) for CPT code 97151 and is a use or lost concept

Claims: Reimbursement – CPT 97151 (reassessment)

- The initial ABA assessment and ABA TP and every six months ABA reassessment and TP update by the authorized ABA supervisor (or as delegated to an assistant behavior analyst)
- Reassessment every six months by the authorized ABA supervisor (or delegated to assistant behavior analyst)
- All elements of assessment please see *TOM Ch. 18, Sec. 3, Para. 8.11.6.1.1.2*
- May not be conducted via telemedicine
- **Medically Unlikely Edit (MUE):** 24 units (six hours)
- Includes administration of parent and teacher PDDBI outcome measures
- All units must be used within 14 calendar days of the first DOS for CPT code 97151 and is a use or lost concept

Claims: Reimbursement – CPT 97153

- Adaptive behavior treatment by protocol
- These codes are generally used by the Behavior Technician (BT) for one-on-one ABA services with the beneficiary
- Authorized ABA supervisors and assistant behavior analysts can also deliver this service
- May not be conducted via telemedicine
- 97153 is a timed code; 15-minute increments
- **MUE:** 32 units/day (eight hours/day) or
- 160 units/week (40 hours)
- For claims purposes a week runs from Sunday to Saturday



Claims: Reimbursement – CPT 97155

- Adaptive behavior treatment by protocol modification is rendered by an authorized ABA supervisor (or as delegated to an assistant behavior analyst) for direct one-on-one time with one beneficiary to develop a new or modified protocol
- May not be conducted via telehealth
- Must be completed at least one time per month during the months of rendered care by the ABA supervisor
- Non-compliance with the monthly requirement will result in 10% claims penalty for all claims related to the six-month authorization
- Supervision and team meetings of any type are not reimbursable under CPT 97155
- 97155 is a timed code; 15-minute increments
- For authorizations less than six-month duration (e.g., PCS transition) the requirement would be reduced to 50% of authorized months. If direct treatment did not occur for that month (e.g. 97153, 97156, 97157 or 97158) then the penalty would not apply for that
- **MUE:** eight units/day (two hours/day)

Claims: Reimbursement – CPT 97156

- Family adaptive behavior treatment guidance
- Authorized ABA supervisor (or as delegated to an assistant behavior analyst) treatment guidance to the parents/ caregivers
- First session of 97156 or 97157 must be within the first 30 calendar days of the treatment authorization
- Only in home or clinic/office setting
- Minimum of six parent/caregiver sessions are required every six months
- May be conducted via telemedicine only after the first six month authorization
- 97156 is a timed code; 15 minute increments
- **MUE:** Eight units/day (two hours/day)

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Claims: Reimbursement – CPT 97157

- Multiple-family group adaptive behavior treatment guidance by the authorized ABA supervisor (or as delegated to an assistant behavior analyst) for guiding parents/caregivers to utilize the ABA TP protocols
- Groups must not exceed eight participants
- May not be conducted via telemedicine
- 97157 is a timed code; 15-minute increments
- **MUE:** six units (1.5 hours/day)



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Claims: Reimbursement – CPT 97158

- Group adaptive behavior treatment by protocol modification by the authorized ABA supervisor (or as delegated to an assistant behavior analyst) in a group setting
- Groups must not exceed eight participants
- May not be conducted via telemedicine
- 97158 is a timed code; 15-minute increments
- **MUE:** six units (1.5 hours/day)
- **Note:** Only use when the beneficiary's TP identifies goals targeted for generalization of mastered skills. As beneficiaries demonstrate generalized skills, it would be expected that one-to-one services decrease as group services increase ABA services fade altogether.

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Claims: Reimbursement – CPT 99366 and 99368

- Medical team conference face-to-face in person or via telemedicine
- 99366 with the beneficiary present
- 99368 without the beneficiary present
- Criteria:
 - Three qualified health care professionals from different specialties or disciplines that provide direct care to the beneficiary
 - Must have provided services face-to-face within the past 60 days
- No more than one individual from the same specialty
- Must be present for the entire medical conference
- One unit of each code can be approved on each six-month authorization
- The Autism Services Navigator (ASN) must be present when assigned for provider reimbursement of the medical team conference

Claims



Claims: Electronic submission

- Network and non-network provider claims, under the ACD, shall be submitted electronically using the appropriate codes (*TOM Ch. 18, Sec. 3, Para. 8.11.1*)
- Claims will be paid via Electronic Funds Transfer (EFT) (*TOM Ch. 18, Sec. 3, Para. 8.11.2*)
- Provider's can use PGBA's Xpress Claims application to submit claims
- [Claims | Humana Military](#)



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Claims: Electronic submission

- *TOM Ch. 18, Sec. 3, Para. 8.11.7.7* states negotiated provider rates lower than those directed in this section are not allowed
- [Applied Behavior Analysis Maximum Allowed Amounts | Health.mil](#)
- ABA providers may not bill the beneficiary more than 100% of the rates posted
- ABA reimbursement rates will be updated at the same time as the annual Civilian Health and Medical Program of the Uniformed Services (CHAMPUS) Maximum Allowable Charge (CMAC) update, and will be effective May 1 every year
- To be reimbursed appropriately, the rendering provider and NPI must be on each line item
- Start and stop times are also required on each line

Claims: Exclusions

- *TOM Ch. 18, Sec. 3, Para. 8.10* lists services that are not billable under the ACD
 - ABA services for any other diagnoses other than ASD
 - Emails and phone calls
 - Direct and indirect supervision of BTs and assistant behavior analysts
 - ABA services while the beneficiary is at another medical appointment to include another family member's appointment
- Autism schools are not TRICARE authorized providers; if an autism school has a clinic setting as part of their offered services, the clinic must have a separate tax ID number
- Review the entire list of exclusions in the *TOM, Ch. 18, Sec. 3, Para. 8.10*

Audits and documentation



Audits

Humana Military conducts annual audits that will include:

- A sample of records for each Autism Corporate Service Providers (ACSP)/sole provider group will be requested
- A combination of administrative records, medical documentation reviews and one medical team conference progress note, if available
- Outreach and education to ACSP/sole provider groups with inconsistencies or errors identified will be conducted
- Humana Military will initiate progressively more severe administrative action, commensurate with the seriousness of the identified problem

- Recoupment of all over payments determined to
- be insufficient for claims payment

Administrative claims review

- Target detection and prevention efforts of services that pose the greatest risk of fraud and abuse to the TRICARE program and beneficiaries to include suspect billing practices
- See *TOM Ch. 18, Sec. 3, Para. 8.9.6*

Medical records documentation – clinical and non-clinical

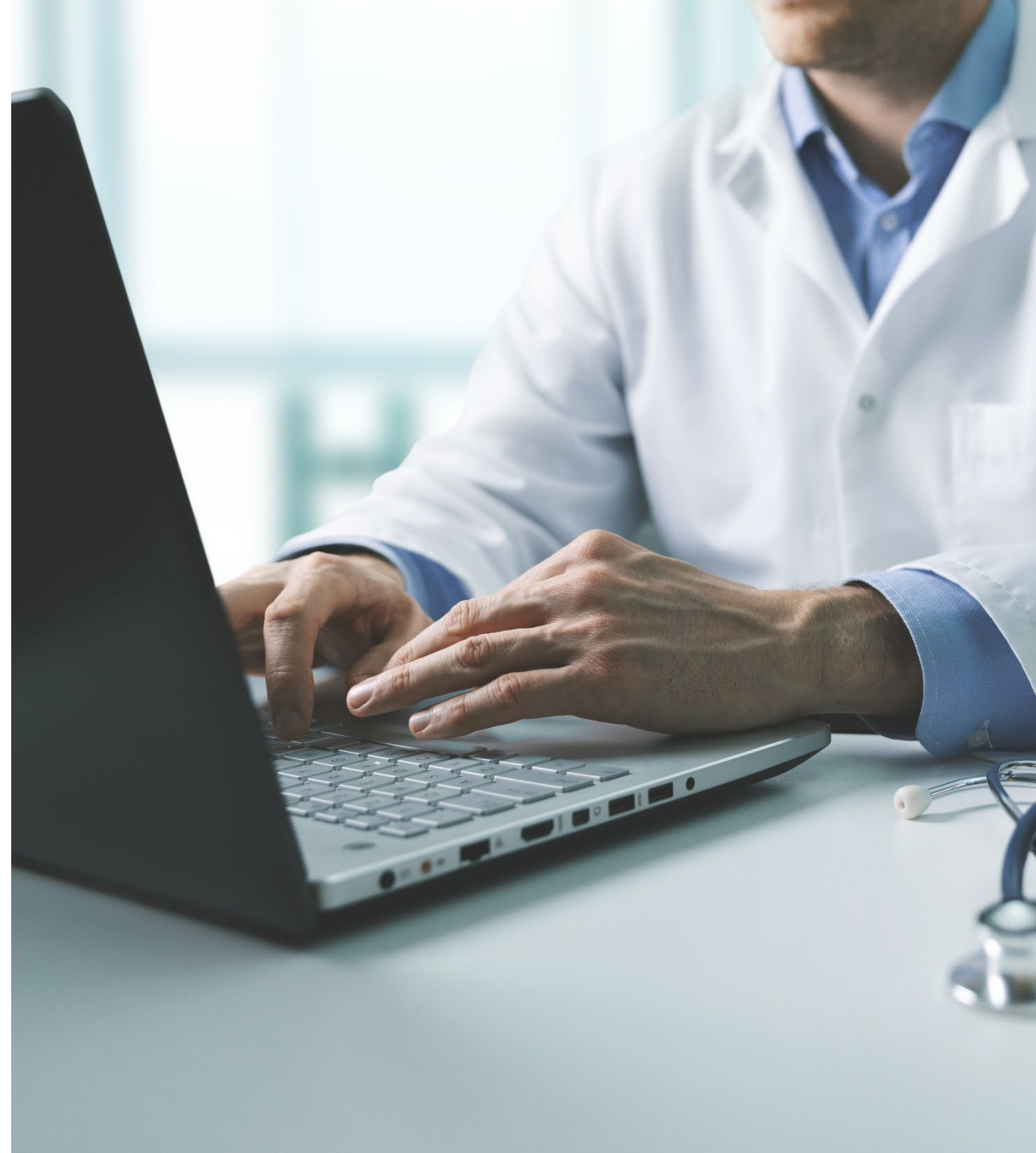
- Review ABA session progress notes to ensure compliance with the requirements set forth by DHA
- See *TOM Ch. 18, Sec. 3, Para. 8.9.7*

Audits

New ACSP/sole provider review

- Monitor all new ACSP/sole providers entering the ACD program for administrative and documentation review
- Conduct probe audit sample following 180 days in the program
- Results of the audit will be shared with new providers as well as education if any inconsistencies were found
- See *TOM Ch. 18, Sec. 3, Para. 8.9.8*

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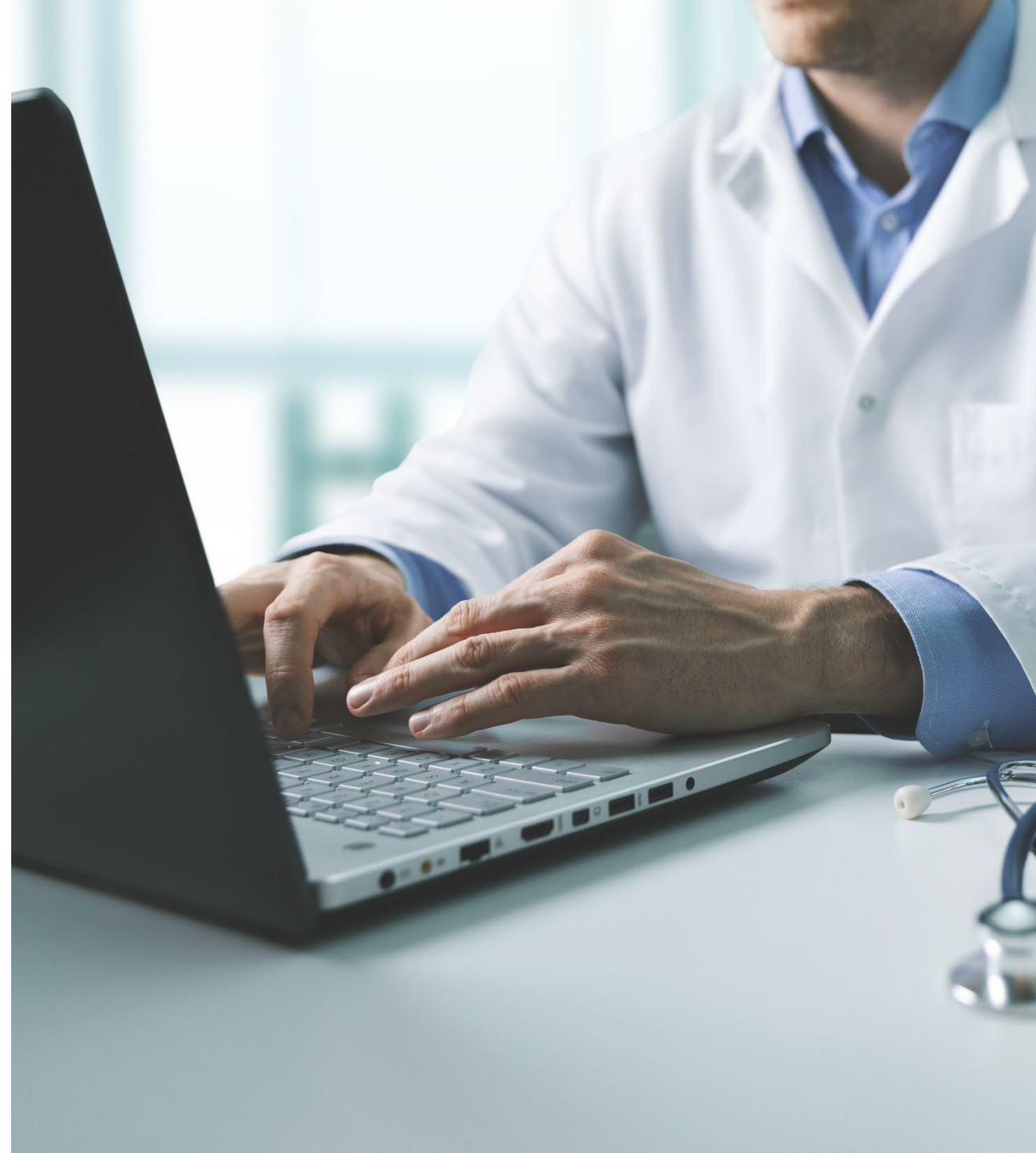


Documentation: Progress notes

The TOM provides of list of required items that include:

- The date and time of session to include start and end time
- Location of rendered service
- Length of session
- Legible name of rendering provider, to include provider type
- Signature of rendering provider with date signed
- Name of authorized ABA supervisor
- Statement summarizing the techniques attempted during session
- [Progress Notes | Humana Military](#)
- See *TOM, Ch. 18, Sec. 3, Para. 8.7.2* for complete list

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Audit letters

- Letters will be mailed to the entity's billing address
- You will have 25 days to respond
- Instructions for return of records will be included in the letter
- If there is no response, a second letter will be mailed
- If there is no response to the second letter in 20 days, the entity will be considered non-compliant

Humana Military
305 North Hurstbourne Parkway
1B-Forum III
Louisville, KY 40222



August 10, 2021

Re: Beneficiary: James McSample
Sponsor SSN: XXX-XX-1234
Date of Birth: 3/03/2011
Date(s) of service: 5/01/2021
Claim number: 20211234567890
Company: Behavior Inc
Rendering provider: Joe Friday
Address: 431 Main St
City, State, ZIP Code: Louisville KY 40213
NID: XXX

Subject: TRICARE request for medical records

Dear Director:

As the regional contractor for TRICARE East, Humana Military is conducting reviews on submitted claims for appropriate use of CPT codes as required by the TRICARE Operations Manual. Please send a copy of the complete medical records/progress notes for the specified dates of service billed on the claim identified above for the listed beneficiary. This request is made in accordance with HIPAA regulations (see enclosure).

A complete medical record includes: progress notes, graphs and any other documents related to this beneficiary's care for the date(s) of service listed.

You are required to submit the complete medical record within 15 calendar days from the date of this letter. Failure to do so will result in non-compliance with TRICARE requirements under the Autism Care Demonstration (ACD). Non-compliance is subject to corrective actions, which may include payment recoupment and/or being placed on prepayment review. Provider administrative expenses such as charges for claims completion, furnishing medical records, etc. are not separately allowable (TRICARE Reimbursement Manual, Ch. 1, Sec. 19).

Please fax a copy of this letter and the medical records to (844) 742-8300 or by mail to:

Humana Military
ATTN: Jennifer Bruner, Medical Affairs
305 N. Hurstbourne Pkwy
1B-Forum III
Louisville KY 40222

If there are any questions regarding this request, please call (502) 318-0821.

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Audit and documentation: common mistakes

- Beneficiary's full name is missing
- Provider's full name and/or credentials missing
- Date and signature or rendering provider missing
- Name of authorized ABA supervisor missing
- Length of session included separately from in/out times (in form of time and not units)
- Location missing (i.e. home, clinic, office, school, telehealth) GPS coordinates do not meet this requirement; ABA Services rendered in community settings without authorization
- Rendering and billing providers do not match
- Clinical status as defined by Defense Health Agency (DHA) not included
- Progress notes illegible
- Progress note for 97151 missing (TP alone does not meet this requirement, progress note required)
- Misuse of 97155 for supervision /observation only
- Protocol modification that occurred using 97155 not clearly defined in progress note
- Narrative content missing in the following areas (data alone does not meet this requirement):
 - Summary of session
 - Response to treatment
 - Summarizing patient's degree of progress towards goal

Resources



Resources

- [TRICARE Manuals: Display Ch. 18, Sec. 3 \(Change 16, Sep 20, 2024\) | Health.mil](#)
- [Progress Notes | Humana Military](#)
- Humana Military: (866) 323-7155
- [Applied Behavior Analysis Maximum Allowed Amounts | Health.mil](#)
- [health.mil email updates](#)
- [HMACDProviderInquiries@HumanaMilitary.com](#)
- [HMCertUpdates@HumanaMilitary.com](#)

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Thank you

