

ABA/COVID-19 FAQs

Please continue to visit this page regularly as we will be updating the information as it becomes available.

Beacon Health Options is closely monitoring COVID-19 developments and what they mean for our members and our providers. Our clinical team is actively monitoring external queries and reports from the Centers for Disease Control and Prevention (CDC) to help us determine what action is necessary.

To help address care providers' questions regarding Applied Behavior Analysis (ABA) services, Beacon has developed the following frequently asked questions:

Q: How is Beacon approaching the provision of telehealth (audio + video) services for ABA?

A: Beacon recognizes the importance of treatment continuation and is making adjustments in our policy for the provision of ABA services to account temporarily for changes in practices related to COVID-19. In doing so, we ask that ABA services continue to be provided within benefits limits, authorization limits, and within state and federal regulatory requirements and licensure, including confidentiality requirements.

Q: Is Beacon allowing the delivery of ABA therapy using telehealth methods?

- A: We will allow telehealth for supervision (97155, H2012), caregiver training (97156 & 97157, S5111, H2012), adaptive behavior treatment (97153, H2019) and functional behavior assessment (FBA) (97151, H0031) with proper modifier.
- Q: Is Beacon allowing delivery of ABA supervision, caregiver training and support, and ABA via telephone?
- A: We require these services to be provided via a telehealth (audio + video) platform.
- Q: Are ABA providers allowed to use the hours approved in a current authorization for telehealth?
- A: If a provider is not requesting changes to existing authorized codes or units, then the authorization on file can be used, and no further action is required by the provider in this regard.

If a provider is requesting changes to an authorization already in place (for example, changes to units or to codes), then a new treatment request form outlining the requested changes must be submitted. As part of the request, please include the current authorization reference number and the effective date of change.

If the provider is requesting new authorization of code or units, the existing process should be followed by submitting the request through the provider's usual channels.





Q: Are the GT or 95 modifiers required for billing telehealth?

A: Yes, bill using the GT or 95 modifier.

Q: What if I have additional questions pertaining to ABA?

A: Please call us at the National Provider Service Line at 800-397-1630 (Monday through Friday, 8 a.m. to 8 p.m. ET), or contact your provider relations representative.