



Nonprofit corporations and independent licensees of the Blue Cross and Blue Shield Association

Guidelines for ABA interventions delivered via telemedicine

Determining which members can benefit from direct-line interventions via telemedicine (*97153)

For Blue Cross and BCN members with autism benefits
For dates of service on or after Aug. 3, 2020, until further notice

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During the COVID-19 crisis and until further notice, we're temporarily allowing providers to perform direct-line applied behavior analysis interventions (procedure code *97153) via telemedicine, for dates of service on or after Aug. 3, 2020.

This document offers guidance in determining which members can benefit from direct-line ABA interventions delivered via telemedicine.

These are not formal requirements. Instead, they are factors to consider when evaluating whether to offer direct-line ABA interventions via telemedicine to a particular member.

Basic guidelines to consider

Providers must first assess whether a member has the prerequisite skills to respond to interventions delivered by the technician via synchronous videoconferencing with or without caregiver assistance (*97153).

At minimum, the member should exhibit the basic skills listed below. It's possible that other skills may be required as well.

- Member has these basic skills:
 - Joint attention
 - Basic discrimination
 - Basic echoic
 - Basic motor imitation
- Member is able to:
 - Follow common one-step instructions
 - Participate in sessions with limited caregiver assistance
 - Sit independently at a computer or tablet for 8 to 10 minutes

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- Safety concerns and challenging behaviors must be minimal and caregivers must be able to effectively manage any challenging behaviors.

Members who do exhibit these basic skills may be considered candidates for direct-line ABA interventions delivered via telemedicine. For these members, providers may want to consider the other guidelines outlined below.

Other guidelines to consider

- Direct-line interventions via telemedicine are most appropriate for members:
 - Whose sessions are primarily conversation based
 - Who can use planned lessons or formal curricula
 - Who engage in minimal problematic behavior that requires physical intervention
- Provider must be able to:
 - Review progress every three to six months to ensure overall objectives are being mastered
 - Explain any reduction in progress or slope from week to week (for example, “objectives were more difficult; therefore, patient took longer to reach criterion”)
 - Include graphs for accurate performance of each short-term objective — for example, the percent of steps that are correct and the frequency and duration of the response
- Caregiver involvement. A caregiver must be:
 - Present and nearby for the duration of the session
 - Available to step in as needed to deliver reinforcers, manage token systems, provide additional prompting as instructed by the direct-line therapist, etc.

Steps to take when the guidelines can't be met

When members who do not qualify based on the guidelines above or when the provider can't ensure that the additional considerations listed above can be completed, here are steps to take:

1. Assess the member by providing up to four weeks of ABA sessions delivered via telemedicine (*97153) and evaluate the following:

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- o Is the session length increasing?
 - o Does the duration of an interaction increase across sessions (for example, the delivery of trials before a break)?
 - o Can the behavior technician address additional treatment targets?
 - o How many targets are increasing in frequency or performance (for example, what percent are correct)?
2. Review the results of the assessment after the third week and take the appropriate action:
- o If the results indicate the member is making progress and achieving gains, continue with direct-line applied behavior analysis delivered via telemedicine.
 - o If the results indicate the member is not progressing and achieving gains, provide alternative telemedicine-payable treatment options and in-person interventions, as appropriate.

Note: Review the *Telehealth for Behavioral Health Providers* document on our public website at bcbsm.com/coronavirus and through Provider Secured Services. This document contains a full list of payable procedure codes associated with autism services delivered via telemedicine.

Additional information

As a reminder:

- To check whether a member has autism benefits, follow the instructions on these documents:
 - o *Checking Blue Cross eligibility and autism benefits.* To access this document, visit bcbsm.com/providers, log in to Provider Secured Services, click *Blue Cross Provider Publications and Resources*, click *Clinical Criteria & Resources*, and click *Autism* (in the Resources section). Finally, click to open the document.
 - o *Checking BCN eligibility and autism benefits on web-DENIS.* To access this document, visit bcbsm.com/providers, log in to Provider Secured Services, click *BCN Provider Publications and Resources* and click *Autism*. Finally, click to open the document.



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- For authorization requirements related to autism services for various lines of business, refer to the [Summary of utilization management programs for Michigan providers](#).

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References:

Council of Autism Service Providers (2020). *Practice Parameters for Telehealth-Implementation of Applied Behavior Analysis: Continuity of Care during COVID-19 Pandemic*. Wakefield, MA: Author.

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