

SECTION 4
PROCEDURE CODES

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UNITS OF SERVICE

ASD treatment services are billed using frequency limits and procedure codes. Each service has its own maximum number of units billable per beneficiary. SCDHHS will continue to monitor utilization for outliers.

SERVICE NAME	PROC CODE	MODIFIER / DESCRIPTION	UNIT FREQ	FREQ. LIMITS
Screening and Diagnostic Assessment Services				
Behavior Identification Assessment	97151	BCBA-D BCBA BCaBA	1 unit = 15 minutes	32 units annually
ASD Treatment Services				
Adaptive Behavior Treatment by Protocol	97153	BCBA-D BCBA BCaBA RBT*	1 unit = 15 minutes	160 units per week (in any combination)
Adaptive Behavior Treatment with Protocol Modification	97155	BCBA-D BCBA BCaBA	1 unit = 15 minutes	To be rendered at the rate of 10% of weekly therapy hours, up to 64 units per month (in any combination)
Family Adaptive Behavior Treatment Guidance	97156	BCBA-D BCBA BCaBA	1 unit = 15 minutes	48 units annually
Non-ABA Treatment Services	H2019	Licensed Psychologist Licensed Psychoeducational Specialist Licensed Independent Social Worker, Clinical Practice Licensed Marriage and Family Therapist Licensed Professional Counselor	1 unit = 15 minutes	4 units per week

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*RBT must bill under a BCBA-D, BCBA or BCaBA.

There may be clinical exceptions to the service limits when the number of units allowed may not be sufficient to meet the complex and intensive needs of the beneficiary. On these occasions the request for frequencies beyond the service limits may be submitted directly to the ASO for approval. These requests must include: most recent diagnostic assessment, IPOC, all CSNs for all services rendered to beneficiary during the 90 days prior to request.