

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	GT BCBA-D BCBA BCaBA Via interactive video/audio telecommunication	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)
Group Adaptive Behavior Treatment by Protocol	97154	BCBA-D BCBA BCaBA RBT*	1 unit = 15 minutes	2 – 6 patients, up to 6 hours a day
Adaptive Behavior Treatment with Protocol Modification	97155	GT BCBA-D BCBA BCaBA Via interactive video/audio telecommunication	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	GT	BCBA-D BCBA BCaBA Via interactive video/audio telecommunication	1 unit = 15 minutes	96 units annually (up to 24 hours a year)
Group Adaptive Behavior Treatment by Protocol	97158		BCBA-D BCBA BCaBA	1 unit = 15 minutes	2 – 6 patients, up to 6 hours a day
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

Developmental Evaluation Centers

Procedure codes listed below are reimbursed based on contracted rates for Developmental Evaluation Centers (DECs). DECs may bill other procedure codes for services appropriate to them outside of the contract with SCDHHS when necessary to adhere to Third Party Liability billing procedures

Procedure Code	Description	Modifier	Units
T1023	<p>Neurodevelopmental Eval. & Screening.</p> <ul style="list-style-type: none"> Board Certified/Board Eligible Developmental/Behavioral or Neurodevelopmental Disability Pediatrician Comprehensive neurodevelopmental evaluation, suspected learning disorder, developmental delay, behavioral disorder, neurodevelopmental disability or other developmental/behavioral disorder. Units of service may consist of evaluation activities involving the developmental/neurodevelopmental pediatrician, licensed social worker, RN or fellow under direct supervision of Board Certified Developmental/Behavioral or Neurodevelopmental Disabilities Pediatrician. 	GT	30-minute units 12 units per year
T1023 TF	<p>Neurodevelopmental Eval. & Screening, Follow up</p> <ul style="list-style-type: none"> Board Certified/Board Eligible Developmental/Behavioral or Neurodevelopmental Disability Pediatrician Review of initial evaluation, testing & assessment activities, treatment plan changes, medical & pharmaceutical management, reports, team conferences, family conferences, & communicating treatment recommendations to parents, primary care providers and other professionals. Units of service may consist of evaluation activities involving the Developmental/Neurodevelopmental Pediatrician, Licensed Social Worker, RN or fellow under direct supervision of Board Certified 	TF, GT	30-minute units 48 units per year

	Developmental/Behavioral or Neurodevelopmental Disability Pediatrician.		
T1024	Psychological Developmental Eval. and Screening <ul style="list-style-type: none"> Licensed doctorate level psychologist Comprehensive psychological & developmental evaluation, suspected developmental, learning, or behavioral disorder. Services may consist of a comprehensive diagnostic interview, assessment of mental status & disposition, family history, review of medical/educational records, psychological testing, neuropsychological testing, review/analysis of performance indicators from developmental, cognitive, & psychiatric testing, consultation with allied health providers & educational personnel, family conferences, team conferences, report preparation & treatment recommendations. Units of service may consist of evaluation services performed by the doctorate level psychologist, master's level school psychologist, clinical psychology interns, or postdoctoral fellows under the supervision of a doctoral level psychologist. 	GT	30-minute units 24 units per year
T1024 TF	Psychological Developmental Eval. and Screening, Follow up <ul style="list-style-type: none"> Licensed doctorate level psychologist Psychological or neuropsychological testing to determine current psychological developmental status, mental status, updated family history, review of previous testing/reports, family conferences, team conferences, preparation of reports, and updating treatment recommendations. Units of service may be performed by a doctorate level psychologist, master's level school psychologist, clinical psychology intern, or postdoctoral psychology fellow under supervision of a doctorate level psychologist. 	TF, GT	30-minute units 24 units per year
G9004	Coordination Care Fee, Schedule Team Conference <ul style="list-style-type: none"> Referrals, therapeutic, medical, educational & behavioral intervention services, coordination of care with other providers, and care coordination services necessary to implement plan of treatment. 		15-minute units 24 units per year
G9011	Coordination Care Fee, Risk Adjustment Maintenance Level 5 <ul style="list-style-type: none"> Brief, solution-focused behavioral consultation and/or behavior management intervention provided by master's level social worker, doctoral level psychologist, master's level school psychologist, master's level psychology intern, postdoctoral psychology fellow, or board-certified behavior analyst to provide comprehensive care to established patient. 		15-minute units 60 units per year



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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 the most recent diagnostic assessment, IPOC, and all CSNs for all services rendered to beneficiary during the 90 days prior to request.