

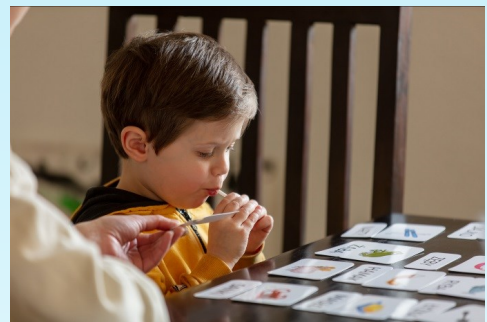
IHCP *bulletin*

INDIANA HEALTH COVERAGE PROGRAMS BT202562 MAY 15, 2025

IHCP issues updated guidance for FFS and managed care ABA therapy prior authorizations

The Indiana Health Coverage Programs (IHCP) is issuing updated guidance for providers submitting prior authorization (PA) requests for applied behavior analysis (ABA) therapy services for fee-for-service (FFS) and managed care members.

On Feb. 14, 2025, the IHCP released a [public notice](#) for the updated State Plan Amendment (SPA) for ABA therapy services. New guidance specifying the weekly and lifetime limitation on services for the prior authorization of ABA therapy, including members with documented disabilities, **will be effective 30 days after the approval of the SPA by the Centers for Medicare & Medicaid Services (CMS)**. A future bulletin will outline PA process updates and further clarify documentation requirements to comply with the terms outlined in the updated SPA for ABA therapy services.



Per IHCP policy in the [Behavioral Health Services](#) provider reference module, members 20 years of age and younger are eligible for ABA therapy services, when medically necessary.

Prior authorization documentation guidance

IHCP clarifies and reinforces the *current* documentation requirements for prior authorization of ABA therapy services:

- As stated in *IHCP Bulletin* [BT202519](#), behavior assessments may be performed by a psychologist, Board Certified Behavior Analyst-Doctoral (BCBA-D) or a master's-level Board Certified Behavior Analyst (BCBA).
- [BT2024194](#) references that members should be diagnosed with autism spectrum disorder (ASD) by a qualified healthcare provider. To further expand and clarify, the IHCP considers qualified healthcare providers performing the comprehensive diagnostic evaluation (CDE) to have specialized training in the application of the most recent *Diagnostic and Statistical Manual of Mental Disorders* (DSM) autism criteria and hold one of the following credentials:
 - ⇒ Doctoral-level licensed clinical psychologists, endorsed as a health service provider in psychology (HSPP)
 - ⇒ Licensed physicians
 - ⇒ Licensed advanced practice registered nurses (APRNs)
 - ⇒ Licensed physician assistants
- A CDE is required for the initial PA request to start ABA therapy services and must be kept in the ABA therapy provider's records for the member.
 - ⇒ To further clarify, if the CDE is more than one year old, an updated statement of need must be submitted. The statement of need must include a referral from an appropriate referring practitioner and an up-to-date behavior assessment completed by the ABA therapy provider.

(PA requirements list continues)

- Members requiring continuation of current services will not need a new CDE, but they will need an updated behavior assessment and treatment plan.
- Members with the emergence of new behaviors and/or members requiring additional ABA therapy services not previously authorized may require more frequent behavior assessments including updated treatment plans.

Provider training

The IHCP will host a live provider webinar to provide further education on these requirements. All provider questions during the webinar will be collected and reviewed by the IHCP. Responses are to be included in a follow-up question-and-answer (Q&A) IHCP bulletin.

The provider webinar information is as follows:

Date: Wednesday, June 4

Time: 10 a.m. - 11 a.m. (Eastern Time)

Registration link: [Register for June 4 webinar](#)



For more information

Documentation requirements outlined in IHCP policy are applicable to both FFS and managed care. Questions about FFS PA process requirements should be directed to Acentra Health at 866-725-9991. Questions about FFS billing and reimbursement should be directed to Gainwell Technologies Customer Assistance at 800-457-4584 or your [Provider Relations consultant](#).

Within the managed care delivery system, individual managed care entities (MCEs) establish and publish their own billing and reimbursement requirements. Questions about managed care PA, billing and reimbursement should be directed to the MCE with which the member is enrolled.

QUESTIONS?

If you have questions about this publication, please contact Customer Assistance at 800-457-4584.

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