

Attachment A – Authorized Provider Services

- INITIAL ENROLLMENT
- CHANGE TO EXISTING ENROLLMENT

ASD Related Services

FOR DMHF USE ONLY:

Provider #: _____

Category of Service: **35**

Provider Name: _____

Effective Date: _____

PROVIDER is authorized to participate in the following services (Mark all that apply):

(X)	Service	FOR DMHF USE ONLY MEDICAID PROVIDER TYPE
	ABA Services – Board Certified Behavior Analyst/Psychologist*	
	ABA Services – Registered Behavior Technician*	

*All individual therapists/technicians will be required to complete a ‘Limited Enrollment Provider’ agreement

Qualification Requirements for Service Provision by BCaBAs , ‘Behavior Analysts in Training’ and Registered Behavior Technicians (RBTs)

By signing this document, you agree that for any individuals who meet the criteria as a Board Certified Assistant Behavior Analyst (BCaBA) or ‘Behavior Analyst in Training, the following minimum requirements will be met:

BCaBA

- Deliver services only under the direction of a psychologist or licensed¹ Board Certified Behavior Analyst;
- Be licensed² as an assistant behavior analyst under Utah Division of Occupational and Professional Licensing;
- Provide proof of certification by the Behavior Analyst Certification Board and have no sanctions or disciplinary actions on their BCaBA certification and/or state licensure; and
- Completion of a criminal background check to include federal criminal, state criminal and sex offender reports;
 - *Criminal background checks must be current, within a year prior to the Medicaid provider enrollment application; and Criminal background checks must be performed at least every five years thereafter.

Behavior Analyst in Training

- Deliver services only under the direction of a psychologist or licensed³ Board Certified Behavior Analyst;
- Must be enrolled in a behavior analysis course sequence approved by the BACB at an accredited institution of higher education;
- Must be currently enrolled in BCBA coursework
- Must have completed at least 500 hours of supervised practice

¹ Behavior analysts are required to submit licensure applications to the Utah Division of Occupational and Professional Licensing on or before November 15, 2015.

² Assistant behavior analysts are required to submit licensure applications to the Utah Division of Occupational and Professional Licensing on or before November 15, 2015.

³ As stated in ¹.

- Completion of a criminal background check to include federal criminal, state criminal and sex offender reports;
 - *Criminal background checks must be current, within a year prior to the Medicaid provider enrollment application; and Criminal background checks must be performed at least every five years thereafter.

Behavior analysts in training have twelve months from the end of the semester in which their BCBA coursework was completed to complete remaining, required supervisory hours, BACB certification, and licensure. Behavior analysts in training are not permitted to continue to provide services under this definition indefinitely. The supervising behavior analyst is responsible for retaining compliance records for the items listed above.

RBT

- Deliver services only under the direction of a psychologist or licensed⁴ Board Certified Behavior Analyst, BCaBA or Behavior Analyst in Training
- Be at least 18 years of age;
- Possess a minimum of a high school diploma or equivalent;
- Completion of a criminal background check to include federal criminal, state criminal and sex offender reports;
 - *Criminal background checks must be current, within a year prior to the Medicaid provider enrollment application; and Criminal background checks must be performed at least every five years thereafter.
- Complete a 40-hour training program (conducted by a BACB certificant) based on the Registered Behavior Technician Task List; and
 - For technicians employed as of July 1, 2015, pass the Registered Behavior Technical Competency Assessment administered by a BACB certificant by January 1, 2016.
 - For employees hired after July 1, 2015, pass the Registered behavior Technical Competency Assessment administered by a BACB certificant within six months of the employee’s date of hire.
- The supervising psychologist/behavior analyst is responsible for retaining compliance records for the items listed above.

Claims submitted for individuals under these categories may be subject to recoupment if any of the conditions were not met at the time services were rendered.

Note: This form is not an authorization for payment. No provider may bill for services rendered to a Medicaid participant without having an appropriate, current prior authorization. The prior authorization form will identify the specific service requested, the service start and end dates, the amount and frequency of the service ordered and the CPT billing code. Providers may not bill nor will Medicaid pay for services that do not fall within the authorized start and end dates, that exceed the amount and frequency authorized or that have an unauthorized CPT code.

The undersigned Provider Representative requests enrollment as an ASD Related Services provider as identified in this Attachment.

Signature of Provider Representative

Date

The undersigned DMHF Bureau of Authorization and Community Based Services Representative certifies that the above designated category of service and provider type is accurate.

Signature of Representative
Division of Medicaid and Health Financing, Bureau of Authorization and Community Based Services

Date

⁴ As stated in ¹.
Utah Department of Health – DMHF
Form BACBS-Attachment A – Autism Services