



October 21, 2022

Re: HSCSN ABA (Applied Behavior Analysis) Billing Codes Change

Dear HSCSN Providers,

Effective October 1, 2022, Health Services for Children with Special Needs, Inc. (HSCSN) implemented billing codes 97151, 97153, and 97155 related to Applied Behavior Analysis (ABA) Therapy. These code changes do not apply to services performed and/or billed under the Early Intervention Program (EI). In a previous communication, you were advised that the ABA billing codes in your current contract are to be deleted and replaced with the following codes:

- H0031 is replaced with 97151 (Behavior Identification Assessment, administered by a Physician or other QHP, each 15 minutes of the Physician's or other QHP's time face-to face with patient, and/or guardian(s)).
- H2019 HN is replaced with 97153 (Adaptive Behavior Treatment by protocol, administered by Technician under the direction of a Physician or other QHP, face-to face with one patient, each 15 minutes).
- H2019 HO is replaced with 97155 (Adaptive Behavior Treatment, with protocol modification, administered by physician or other QHP, which includes simultaneous direction of Technician, face-to-face with one patient, each 15 minutes).
- Telehealth is covered using 97153 or 97155. UM authorizations will not include the GT modifier on authorization letters; however, providers are required to submit claims using the GT modifier when billing for approved telehealth services.
- 97155 is only authorized for direct treatment by a BCBA (Board Certified Behavioral Analyst).
- 97155 and 97153 cannot be billed at the same time.
- Supervision will not be authorized separately.
- HSCSN will initially authorize eight (8) units of 97151 for an evaluation to the identified ABA Provider. If during the initial evaluation by the ABA Provider it is determined that additional units of 97151 are needed, a request must be submitted to HSCSN's Utilization Management Department via [UMrequests@hschealth.org](mailto:UMrequests@hschealth.org) or 202-721-7190.
- 97151 is not included with re-authorization and shall be authorized when an initial evaluation is needed.



THE HSC HEALTH CARE SYSTEM

Health Services for Children  
with Special Needs, Inc.

There is no change to the requirement of prior authorization submissions and/or approval for ABA assessment and/or treatment. All requests should include information and/or medical necessity documentation for any initial and/or additional units requested. To prevent any potential denial of claims, please ensure there is an authorization before providing additional hours of evaluation or providing ongoing ABA therapy.

To prevent avoidable administrative denials, please ensure your teams are submitting claims using the correct code(s) and/or have approved authorizations with the current codes, prior to rendering any service. Should you have any additional questions, please reach out to your assigned Provider Relations Representative.

Sincerely,

Charisse F. Vickerie, MSW  
Manager, Provider Relations



THE HSC HEALTH CARE SYSTEM

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**For more information visit [www.hscsnhealthplan.org](http://www.hscsnhealthplan.org).**

**For reasonable accommodations please call (202) 467-2737.**

If you do not speak and/or read English, please call 202-467-2737 between 7:00 a.m. and 5:30 p.m. A representative will assist you. **English.**

Si no habla o lee inglés, llame al 202-467-2737 entre las 7:00 a.m. y las 5:30 p.m. Un representante se complacerá en asistirle. **Spanish.**

የእንግሊዝኛ ቋንቋ መናገርና ማንበብ የማይችሉ ከሆነ ከጊዜ 7:00 ሰዓት እስከ ቀኑ 5:30 ባለው ጊዜ በስልክ ቁጥር 202-467-2737 በመደወል እርዳታ ማግኘት ይቻላል። **Amharic.**

Nếu bạn không nói và/hoặc đọc tiếng Anh, xin gọi 202-467-2737 từ 7 giờ 00 sáng đến 5 giờ 30 chiều. Sẽ có người đại diện giúp bạn. **Vietnamese.**

如果您不能講和/或不能閱讀英語，請在上午 7:00 到下午 5:30 之間給 (202) 467-2737 打電話，我們會有代表幫助您。 **Traditional Chinese.**

영어로 대화를 못하시거나 영어를 읽지 못하는 경우, 오전 7시 00분에서 오후 5시 30분 사이에 (202) 467-2737번으로 전화해 주시기 바랍니다. 담당 직원이 도와드립니다. **Korean.**

Si vous ne parlez pas ou lisez l'anglais, s'il vous plaît appeler 202-467-2737 entre 7:00 du matin et 5:30 du soir. Un représentant vous aidera. **French.**

Kung hindi ka nagsasalita ng Ingles o hindi marunong magbasa ng Ingles, tumawag sa 202-467-2737 mula 7:00 hanggang 17:30. Tutulungan ka ng isang kinatawan. **Tagalog.**

Если вы не говорите по-английски или не читаете по-английски, звоните по номеру 202-467-2737 с 7:00 до 17:30. Представитель поможет вам. **Russian.**

Se você não fala inglês ou lê inglês, ligue para 202-467-2737 entre as 7:00 e 17:30. Um representante irá ajudá-lo. **Portuguese.**

Se non parli inglese o non leggi inglese, chiama 202-467-2737 dalle 7:00 alle 17:30. Un rappresentante ti aiuterà. **Italian.**

আপন যদি ইংরেজী না বলেন বা ইংরেজি না পড়েন, 202-467-2737 কল কর 7:00 থেকে 17:30 পযর। একজন প্রতিনিধ আপনাকে সাহায্য করবে। **Bengali.**

Wenn Sie kein Englisch sprechen oder kein Englisch lesen, rufen Sie die Nummer 202-467-2737 von 7:00 bis 17:30 an. Ein Vertreter wird Ihnen helfen. **German.**

หากคุณไม่พูดภาษาอังกฤษหรือไม่อ่านภาษาอังกฤษโทร 202-467-2737 ตั้งแต่ 7:00 ถึง 17:30 น. ตัวแทนจะช่วยเหลือคุณ **Thai.**

英語を話さないか、英語を読まない場合は、7:00～17:30 に202-467-2737に電話してください。担当者がお手伝いします。 **Japanese.**

Ọ bụry na i naghị asụ ma ọ bụ agụ oyibo, biko kpọọ 202-467-2737 ihe dịka oge elekere asaa nke ụtụtụ (7:00 a.m) ruo na elekere ise na ọkara nke mgbede (5:30 p.m). Onye nnochiteanya ga enyere gi aka. **Igbo**

Tí ó bá jẹ pé o kii sọ pẹlù/àbí ka èdè Gẹ̀ẹ̀sì, jòwọ̀ pẹ 202-467-2737 láárin aago méjé òwúrò sí márún àbò iròlẹ̀ (7am-5:30pm). Asojú kan yóò ràn ọ lówọ. **Yoruba**



GOVERNMENT OF THE  
DISTRICT OF COLUMBIA  
**MURIEL BOWSER, MAYOR**

This program is funded in part by the Government of the District of Columbia  
Department of Health Care Finance.

HSCSN complies with applicable Federal civil rights laws and does not  
discriminate on the basis of race, color, national origin, age, disability, or sex.