

Medicaid Autism Services

**Licensed Behavior Analyst (LBA) Enrollment
in Texas Medicaid with Texas Medicaid &
Healthcare Partnership (TMHP)**



LBA Enrollment in Texas Medicaid with TMHP

Provider Enrollment for Texas Medicaid Applied Behavior Analysis (ABA) Services

Licensed Behavior Analysts (LBAs) may enroll in Texas Medicaid as individual providers of Medicaid Autism Services' ABA services.

- No other professional or entity may enroll in Texas Medicaid as a provider of ABA assessment/evaluation (procedure code 97151) and treatment services other than an LBA.
- An LBA may only enroll in Texas Medicaid as an individual professional Medicaid provider.
- An enrolled LBA will use their individual National Provider Identifier (NPI) as both the rendering and billing provider on submitted claims. An LBA's employer NPI may not be designated as the rendering or billing provider for reimbursement. Any claims submitted with a billing or rendering NPI that is not enrolled will not be reimbursed.
- Only LBAs with current, active, and unrestricted licenses from the Texas Department of Licensing and Regulation (TDLR) and who meet all other requirements are eligible for Texas Medicaid & Healthcare Partnership (TMHP) provider enrollment.
- LBAs who are within 30 days of the expiration of the LBA's license may not enroll in Texas Medicaid.
- Board Certified Behavior Analysts (BCBAs) and Board Certified Behavior Analyst – Doctorals (BCBA-Ds) must be licensed through the TDLR as LBAs and meet all other criteria to be eligible to enroll in, provide services, and supervise other authorized but not enrolled providers of Texas Medicaid ABA services.
- Enrolled LBAs (licensed through the TDLR) may provide services even if the LBA's residence or practice location is out-of-state if all other criteria are met. The LBA whose residence and/or practice location is outside of Texas must meet all Texas Medicaid Autism Services policy requirements including those related to the use of telehealth for ABA service delivery, which requires the LBA to use professional judgment to determine whether remotely delivered ABA services are clinically appropriate and effective for the child or youth.
- To be compliant with Title 42 Code of Federal Regulations (CFR) §455.432, LBA providers will be subject to complete an on-site visit by TMHP if applicable. An on-site visit must be completed prior to enrollment if the Licensed Behavior Analyst (LBA) Attestation Form Regarding Location and Services indicates that services are provided at a designated office location.

Other Authorized Providers of Texas Medicaid ABA Services

There are two other types of ABA providers who may be authorized by Texas Medicaid to provide ABA treatment services. These providers, who provide ABA services under the direct supervision of the enrolled LBA who is responsible for all ABA services provided, include:

- Licensed assistant Behavior Analysts (LaBAs).
- Behavior Technicians (BTs).

These two provider types can render certain ABA treatment services that may be eligible for Texas Medicaid reimbursement when authorized. These two provider types must provide ABA services directly to and in the same location as the child or youth. Only the LBA, however, will be enrolled with Texas Medicaid as a provider of ABA services.

Board Certified assistant Behavior Analysts (BCaBAs) must be licensed through the TDLR as LaBAs, meet all other eligibility criteria, and act under the direct supervision of the enrolled LBA to be an authorized provider of Texas Medicaid ABA treatment services.

BTs must currently be Registered Behavior Technicians® (RBTs®), Board Certified Autism Technicians (BCATs) or Applied Behavior Analysis Technicians® (ABATs®), meet all other eligibility criteria, and act under the direct supervision of the enrolled LBA to be an authorized provider of certain authorized ABA treatment services.

For all Texas Medicaid activities, the LBA will be the rendering professional provider for all ABA services, and the LBA must include the appropriate modifier to designate which services are provided by LaBAs and BTs.

Preenrollment Steps

To enroll in Texas Medicaid as an individual, the LBA must:

- Obtain a NPI from the Centers for Medicare & Medicaid Services (CMS).
 - Click [here](#) to learn how to apply for an NPI.
 - Use taxonomy code 103K00000X to get the NPI.
- Hold a current, active, and unrestricted LBA license through the [TDLR](#).
- Not enroll if the relevant license expires in the next 30 days.

LBA Responsibility for ABA Services

The LBA, who may only enroll as an individual in Texas Medicaid to provide authorized ABA services, will be responsible for all Medicaid activities, including but not limited to timely submission of appropriate forms, accurate billing, and reimbursement for authorized ABA services of the LBA, the LaBA, and the BT.

Texas Medicaid Forms

LBAs who are enrolled with Texas Medicaid to provide ABA services should only use and submit professional forms. Institutional forms will be rejected.

The enrolled LBA will have the designation, both as the rendering provider and the billing provider. All submitted payments, both provider and managed care organizations (MCOs), will be rejected should the provider fail to adhere to this requirement.

Contracting and Credentialing with Texas Medicaid Managed Care Organizations (MCOs)

After enrollment in Texas Medicaid through TMHP, LBAs will need to reach out to individual MCOs to contract and credential to provide in-network ABA services.

To find the MCOs in your area, review the Health and Human Services Commission's (HHSC's) map of our [managed care service delivery areas](#).

LBAs may reference the following resources to contract and credential with MCOs:

- Texas Association of Health Plans (TAHPs) [Medicaid Managed Care Provider Contracting and Credentialing Resources for Licensed Behavioral Analysts](#) Resource Document
- For Wellpoint, contact Keith Jackson at keith.jackson@amerigroup.com

Enrollment through TMHP

Complete enrollment in Texas Medicaid by visiting the How to Apply for Enrollment page on tmhp.com. LBAs should also refer to the step-by-step guide for instructions on enrollment. The enrollment process may take up to 30 days after the LBA submits the enrollment application. TMHP must conduct a site visit to each LBA location of practice.

Take note of the following dates regarding enrollment:

- November 30, 2021, is the last day that you can submit electronic enrollment applications through Provider Enrollment on the Portal (PEP).
- During the transition period of December 1 to December 12, 2021, TMHP will not accept paper or electronic enrollment applications.
- After December 12, 2021, LBAs can begin submitting electronic applications through the new enrollment system called the Provider Enrollment and Management System (PEMS).
- TMHP must approve any applications submitted through PEP by February 15, 2022, unless an application is undergoing an informal desk review or pending a Texas Health and Human Services Commission (HHSC) review.
- If TMHP has not been able to approve the application by February 15, 2022, the application will be closed. After February 15, 2022, the LBA must resubmit their application through PEMS.

On-Site Visit

To be compliant with Title 42 Code of Federal Regulations (CFR) §455.432, LBA providers will be subject to complete an on-site visit by TMHP if applicable. Providers can only submit one valid practice location address.

LBAs who have designated office space where they render services must use the physical office address where services are provided on the Texas Medicaid enrollment application. Providers who render services at a client's home or other temporary venue selected by the client must update their physical address to reflect the place where client files and records are kept. For example, an office location (e.g. office space where the provider works, even if client visits are held elsewhere) or provider's home address can be used.

Note: Temporary conference room spaces that are occasionally used for client visits but are not leased as office space nor used to store client records should not be used as the physical location on the Texas Medicaid application.

Additionally, LBAs must attest to where services will be provided so that HHSC can determine applicable site visit requirements.

- When an LBA provides any services at a designated office location, a site visit is required.
- When an LBA exclusively provides services at their own home, HHSC needs additional information to satisfy the site visit requirements.
- When an LBA exclusively provides services at client homes or at locations directed by the clients, a site visit is not required.

If a site visit is required and cannot be conducted because the physical address was not provided, the enrollment application will be denied. Providers may not render or submit claims for services until the practice location has passed the site visit and has been added to the enrollment record.

TMHP Contact Center

For help completing the enrollment application or general information regarding provider enrollment, call the TMHP Contact Center at 800-925-9126. The Contact Center is open from 7:00 a.m. to 7:00 p.m., Central Time.