

# Back to the Basics: Verifying Eligibility and Benefits

\*Understanding ABA Coverage Through Health Insurance\*

Presented By: Emily Roche, Business Consultant w/ ABA Billing



# Why the Basics?

- \* Our industry is growing.
- \* Administrative and operational functions are critical to the success of your business.
- \* Good training is always important – no matter how long we've been doing it!
- \* Bad habits get passed along...and we need to stop!
- \* Investing in best practices is the best option.



# Today's Agenda

- \* Mandates and Laws
- \* What Type of Policy?
- \* Gathering Insurance Documents
- \* Making the Call the Insurance
- \* Document...and keep documenting!
- \* Coordination of Benefits
- \* Family/Patient Financial Responsibility
- \* Review Handouts



# Mandates and Laws

- \* No federal law exists that mandates the coverage of ABA
- \* 48 States now have autism insurance mandates
- \* The mandates include language that insurance must cover ABA “if an individual has an ASD diagnosis”
  - \* May impose limitations such as age or dollar caps
  - \* May dictate provider credentials
  - \* Only applies to “fully-funded” insurance policies
- \* Medicaid falls under separate regulations
- \* Great Resource: <https://www.autismspeaks.org/state-regulated-health-behavioral-plans>

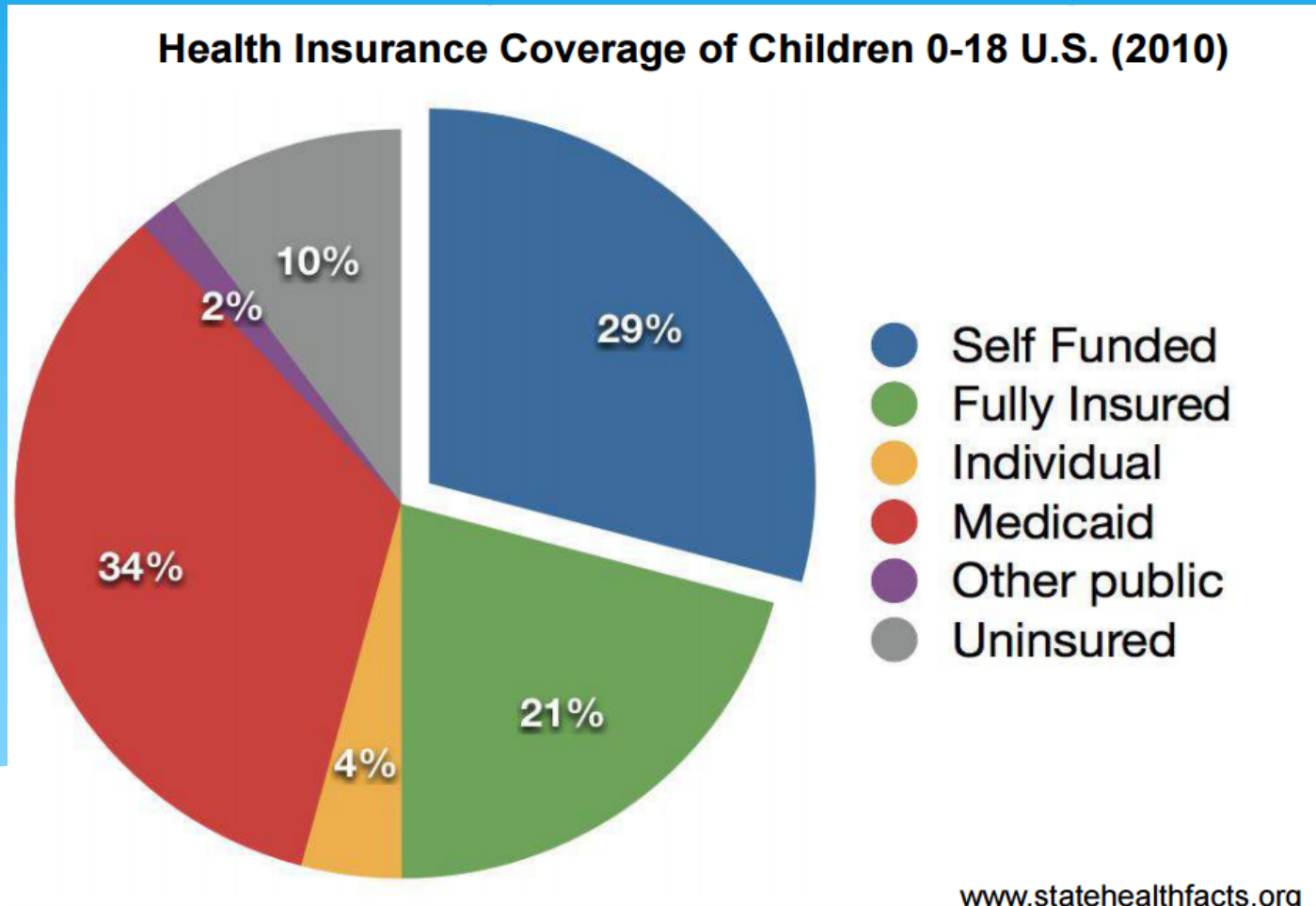


# Mandates and Laws

- \* Self Funded (ERISA) vs. Fully Funded (Large Group Plans)
  - \* Full-funded is subject to state mandates
  - \* Self-funded NOT subject to state mandates
- \* State Employee Plans and Federal Employee Health Benefits (FEHB)
  - \* As of 1/1/17, FEHB plans require coverage for ABA
- \* Individual Plans and the Health Insurance Marketplace
- \* Medicaid and CHP+
- \* TRICARE
- \* Other: Church Dioceses, Labor Union



# State Mandates – Only a Small Piece



*\*\*Only the “green” slice is impacted by the state insurance mandates.*

# Quick Quiz

- \* What type of insurance policy must follow our state mandates for ABA coverage?
- \* Why would my client have an insurance policy that follows a mandate from a different state?
- \* In 2014, CMS released information that all Medicaid plans should cover ABA. Do all states currently have coverage of ABA therapy under Medicaid?

# Answers

- \* Fully – Funded Policies, from employer or health insurance marketplace
- \* The employer offering the policy is based in a different state and is regulated by that state.
- \* No, some states are still reviewing how and when to implement coverage under Medicaid



# Gathering Insurance Verification Info

- \* Client Information
- \* Subscriber Information
- \* Copy of Insurance Card\*\*
  - \* Front & Back
- \* Diagnostic Evaluation
- \* Do children have to have an autism diagnosis?
- \* Ask about Secondary and Medicaid!

## ABA THERAPY: Initial Insurance Verification

Complete Form and Return To: \_\_\_\_\_

**\*\*\*\*Must include Copy or Photo Front & Back of Insurance Card(s)**

Child's Name \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Gender: \_\_\_\_\_

Does child have an Autism Spectrum Disorder Diagnosis? (Y/N) \_\_\_\_\_ (Please submit copy of diagnostic report)

Date of Diagnostic Evaluation: \_\_\_\_\_ Name of Doctor: \_\_\_\_\_

Any other Diagnoses? If so, please list: \_\_\_\_\_

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### PRIMARY INSURANCE

Name of Subscriber: \_\_\_\_\_ Is this a Medicaid policy? (Y/N) \_\_\_\_\_

Insurance Company: \_\_\_\_\_ Policy/Member ID: \_\_\_\_\_

# Verifying Benefits with Insurance

- \* Be Prepared – have your provider and client info ready
  - \* Includes Tax ID, NPI, service location address or zip code
  - \* Client name, date of birth, diagnosis code
- \* Cost Shares
- \* Benefit Year, Fully or Self Funded, Caps or Limits
- \* Who gave you the benefits?
- \* How to obtain and authorization?
- \* Where to send claims?



Benefits Verification									
Patient Name:		DOB:		Member ID:					
Subscriber Name:		DOB:							
Dx Code	F84.0			Dx Description:	Autistic Spectrum Disorder (ASD)				
Provider				NPI:		Tax ID:			
Insurance Co./Phone #									
Insurance Rep/ Call Ref #									
Policy Effective Date				Plan Period:					
Provider in Network?				Self or Fully Funded?		State for Fully:			
Benefit Max (session, \$, age cap, etc.)									
Benefits/Eligibility for:	ABA	SLP	OT		ABA	SLP	OT		
	INN				OUT				
Co-pay \$									
Individual Deductible \$									
Ind Deductible Met to date									
Fam. Deductible									
Fa. Deductible Met to date									
Cost Share %									
Individual OOP Max									
Individual OOP Max Met									
Fam. OOP Max									
Fam. OOP Max Met									
Company Paying Claims									
Electronic Payer ID									
Claims Sent to									
Authorization Info:	Required?		Auth Phone #		Company for Auth				
Codes Valid for ABA:									
If provider is out of network, can we request in network level of benefits(SCA/GAP)?									
Notes:									

- \* Example of Benefits Verification form.
- \* Standard format to keep record of all eligibility and benefits calls.



# Common Red Flags

- \* Asking only for the code that would be billed
- \* Mental Health Benefits
- \* No authorization required
- \* Visit limits – common for SLP/OT/PT, but not ABA
- \* “Autism is a covered benefit”
- \* Third Party Payers



# Coordination of Benefits - Eligibility

- \* Medicaid and Tricare
  - \* Government policies are always the “Payer of Last Resort”
  - \* These will always be secondary. Tricare is primary over Medicaid.
- \* Birthday Rule: when two guardians cover the child
  - \* Parents with birthday first in calendar year is primary
- \* Legal Rulings: can occur when parents are separated or divorced
- \* Individual Policies (Child-Only Policies)
  - \* In most cases, insurance determines that when the individual is the policy holder that is the primary policy – including child only plans.
- \* Parent does not get to choose which insurance to use (or not use)



# Documentation!

- \* You may have caught on... that's documentation is important.
- \* First, all necessary paperwork from parents!
- \* Insurance:
  - \* All reference numbers, dates, times, and name of representative
  - \* Ask for follow up via fax or email to get things in writing
- \* Always ensure authorization letters and denials will be sent in writing
- \* Use these reference numbers and documents if you ever need to file appeals or disputes



# Talk to Families

- \* During Intake
  - \* Let families know it takes several days to verify benefits
- \* Review Cost Shares with the Family
  - \* Get confirmation that the family would like to move forward
- \* Have a “Financial Responsibility Agreement” in your intake packet
  - \* Review the agreement with families when discussing cost shares
  - \* Let families know how often you will bill them
  - \* Show families an example invoice and how they can pay



# Quick Quiz

- \* A child that does not yet have an autism diagnosis would like ABA therapy. Do I follow the same process for insurance paperwork as a child with autism?
- \* Can a family with more than one insurance policy choose which insurance to use as the primary?
- \* Will parents using insurance coverage have to make payments directly to you, the provider/agency?



# Answers

- \* No, a child that does not have a diagnosis would not be eligible for coverage under their health insurance policy.
- \* No, coordination of benefits is determined by regulations and insurance rules. Parents cannot choose and can be held financially responsible if they withhold information.
- \* Yes, for patient responsibility – such as co-pays and deductibles.

# Handouts

- \* Insurance Eligibility Form
- \* Insurance Benefits Verification Form
- \* Benefit Call Checklist
- \* PowerPoint Slides

***Before calling the insurance company:***

- Ensure all necessary documents are received from parents:
  - o Copy of front and back of client's insurance card
  - o All demographic intake information is complete on Eligibility Request Form:
    - Child's name
    - Date of birth
    - Home address
    - Parent's Name
    - Diagnostic Code (will mostly be F84.0- Autism)
    - Phone Number
  - o If you have multiple locations, be sure you know the service address and the lead BCBA's name and NPI at that location (some insurances will pull up our agency through the individual provider)
  - o Pull up the Eligibility verification form and prefill all available information



# Questions?

- \* Contact Us: [info@ababilling.net](mailto:info@ababilling.net)
- \* Facebook Group:  
<https://www.facebook.com/groups/ababillinginshelp/?fref=nf>
- \* Website: [www.ababilling.net](http://www.ababilling.net)
  - \* Check out our blogs and future webinars for helpful info!



# Our Presenter

- \* Emily Roche, Director of ABA Financial Services
  - \* The Gersh Organization/Gersh ABA Services
  - \* Working with ABA providers for over 6 years
  - \* Masters in Health Administration
  - \* Experience in insurance contracting, authorizations, benefits and eligibility, medical necessity appeals, revenue cycle management, and practice management software

