## **MEDICAID POLICY INFORMATION SHEET**

Policy Analyst: Laura Kilfoyle								
Phone Number:								
Initial 🗌	Public Commen	t 🖂	Final 🛚					
Brief description of policy:								
This policy establishes a Behavioral Health Treatment (BHT)-Applied Behavior Analysis (ABA) service reimubursement rate for current procedure terminology (CPT) code 97153 to not less than \$16.50/unit or not less than \$66.00/hour. The increase is a Michigan State Legislative mandate. The rate increase is intended to maintain and potentially increase access to services.								
Reason for policy (problem being addressed):								
The BHT service rate increase was mandated by the Legislature.								
<ul><li>☐ budget neutral</li><li>☑ will cost MDHHS</li></ul>	Budget implication:  ☐ budget neutral ☐ will cost MDHHS \$ 20.35 million, and is budgeted in current appropriation ☐ will save MDHHS \$							
Is this policy change mandated per federal requirements?								
No.								
Does policy have of	Does policy have operational implications on other parts of MDHHS?							
Yes, Acturial, Contracts Payment Unit, Legislative Affairs.								
Does policy have operational implications on other departments?								
No								
Summary of input:  controversial (E) acceptable to me limited public inte	Explain) ost/all groups							
Supporting Documentation:								
If Yes, please provid Approved	- —	)enied	Public Notice Required:  If yes, Submission Date:	⊠ Yes □ No				

1/18 Policy Info Sheet

DRAFT FOR PUBLIC COMMENT								
Michigan Department of Health and Human Services		Desired Noveles	044	0. D. I	B-1- N 1 40 0004			
Comments Due:		Project Number: ember 17, 2024	244	8-BH	Date: November 13, 2024			
Proposed Effective Date:	ndicated							
Direct Comments To: Address:	Laur	ra Kilfoyle						
E-Mail Address:	Kilfo	oyleL@michigan.gov						
Phone: Fax:								
Policy Subject: Implementation of the Legislatively Mandated Behavioral Health Treatment								
(BHT)- Applied Behavioral Analysis (ABA) Services Rate Increase								
Affected Programs: Medicaid, Healthy Michigan Plan								
<b>Distribution:</b> Prepaid Inpatient Health Plans (PIHPs), Community Mental Health Services Programs (CMHSPs)								
<b>Summary:</b> This policy establishes a Behavioral Health Treatment (BHT)-Applied Behavior Analysis (ABA) reimbursement rate for procedure code 97153 of not less than \$16.50 per unit or \$66.00 per hour. The increase is a Michigan State Legislative mandate. The rate increase is intended to increase access to services.								
<b>Purpose:</b> To comply with the legislatively mandated rate and increase access to Autism services.								
Cost Implications: \$20.35 million (\$17.3 million GF) (budgeted)								
Potential Hearings & Appeal Issues:								
r otentiai nealings & Appeal issues.								
State Plan Amendment Re If yes, date submitted:	ed: Yes 🖂 No 🗌		Public Notice Required: Yes 🗵 No   Submitted date:					
Tribal Notification: Yes ⊠ No □ - Date:								
THIS SECTION COMPLETED BY RECEIVER								
☐ Approved		☐ No Comments						
☐ See Comments Below   ☐ Disapproved   ☐ See Comments in Text								
Signature:				1	e Number			
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Signature Printed:								

Comment001 Revised 6/16

Date

Bureau/Administration (please print)

# BULLETIN



BEHAVIORAL AND PHYSICAL HEALTH AND AGING SERVICES ADMINISTRATION

**Bulletin Number:** MMP 24-51

**Distribution:** Prepaid Inpatient Health Plans (PIHPs), Community Mental Health

Services Programs (CMHSPs)

Issued: November 13, 2024

**Subject:** Implementation of the Legislatively Mandated Behavioral Health

Treatment (BHT)-Applied Behavior Analysis (ABA) Rate Increase

Effective: As Indicated

Programs Affected: Medicaid, Healthy Michigan Plan

This bulletin is in response to the Michigan Department of Health and Human Services (MDHHS) fiscal year (FY) 2025 budget appropriations of public act 121 of 2024. From state appropriated funds, the Act directs MDHHS to increase the Behavioral Health Treatment (BHT)-Applied Behavior Analysis (ABA) rate to maintain and increase access to Autism treatment services for Medicaid-enrolled beneficiaries.

Therefore, consistent with 42 CFR §438.6(c)(1)(iii)(B), effective November 1, 2024, the contracted Prepaid Inpatient Health Plans (PIHP) will pay for BHT-ABA services (current procedure terminology [CPT] code 97153), at a rate of not less than \$16.50 per unit or \$66.00 per hour. The increase will come from the state general fund with federal match and be paid to the PIHPs through an increase to their capitation payments.

#### **Public Comment**

The public comment portion of the policy promulgation process is being conducted concurrently with the implementation of the change noted in this bulletin. Any interested party wishing to comment on the change may do so by submitting comments to Laura Kilfoyle at KilfoyleL@michigan.gov.

Please include "Implementation of the Legislatively Mandated BHT-ABA Rate Increase" in the subject line.

Comments received will be considered for revisions to the change implemented by this bulletin.

#### **Manual Maintenance**

Retain this bulletin until the information is incorporated into the MDHHS Medicaid Provider Manual.

### Questions

Any questions regarding this bulletin should be directed to Provider Inquiry, Department of Health and Human Services, P.O. Box 30731, Lansing, Michigan 48909-8231, or e-mailed to <a href="ProviderSupport@michigan.gov">ProviderSupport@michigan.gov</a>. When you submit an e-mail, be sure to include your name, affiliation, NPI number, and phone number so you may be contacted if necessary. Typical Providers may phone toll-free 800-292-2550. Atypical Providers may phone toll-free 800-979-4662.

An electronic copy of this document is available at <a href="www.michigan.gov/medicaidproviders">www.michigan.gov/medicaidproviders</a> >> Policy, Letters & Forms.

**Approved** 

Meghan E. Groen, Director

Megloui & Grocio

Behavioral and Physical Health and Aging Services Administration