

MONTANA

**Autism Treatment Services**

- I. Reimbursement for autism treatment services will be the lower of:
  - A. The provider's usual and customary (billed) charge for the service; or
  - B. The Department's fee schedule which is based on a resource based relative value scale (RBRVS) methodology. In accordance with RBRVS methodology, a Relative Value Unit (RVU), which is numeric, is multiplied by the Montana Medicaid specific conversion factor, which is a dollar amount, to equal a fee. Specific to Montana Medicaid, there is an ability to multiply the fee times a policy adjuster (either plus or minus) to affect the fee.
    1. Current Procedural Terminology (CPT) Category I codes are being utilized for adaptive behavior assessment/intervention services (ABA) for the assessment and treatment of Autism Spectrum Disorders: Codes 97151, 97153, and 97155. For Behavior Identification Assessments 97151 and Adaptive Treatment with Protocol 97155, the Department fee is based on a service provided by a Board Certified Behavior Analyst, the fee is reduced approximately 26% when provided by a Board Certified Assistant Behavior Analyst or a student enrolled in an accredited BCBA graduate level education program.
- II. The Department's rates are set as of July 1, 2020 and are effective for services provided on or after that date. All rates are published on the agency's website [www.medicaidprovider.mt.gov](http://www.medicaidprovider.mt.gov). Unless otherwise noted in the plan, State developed fee schedule rates are the same for both governmental and private providers.