

# Applied Behavior Analysis

Provider Type 85

Program Reports

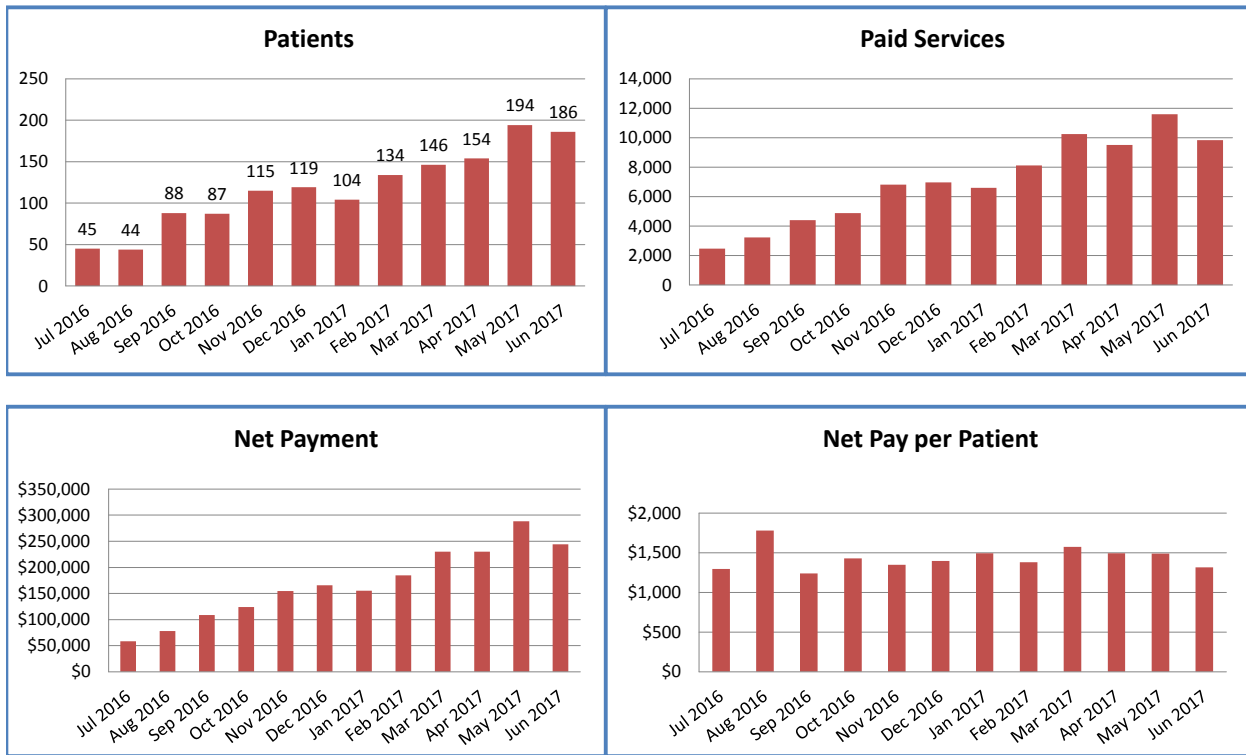
Qtr 2 CY2017 Incurred

1. General Statistics
2. Enrolled Providers
3. Services by Provider Specialty and Procedure
4. Demographics
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# Applied Behavior Analysis (ABA) Program Reports

## Provider Type 85 Applied Behavior Analysis - Fee for Service

Provider Type Claim NV Code	085				
	Patients	Service Count Paid	Claims Paid	Net Payment	Net Pay Per Pat
<b>Time Period: Incurred With Runoff Month</b>					
Jul 2016	45	2,470	813	\$58,267.99	\$1,294.84
Aug 2016	44	3,226	1,056	\$78,292.33	\$1,779.37
Sep 2016	88	4,411	1,424	\$108,928.77	\$1,237.83
Oct 2016	87	4,890	1,663	\$124,296.03	\$1,428.69
Nov 2016	115	6,814	2,057	\$154,803.87	\$1,346.12
Dec 2016	119	6,973	2,406	\$165,877.39	\$1,393.93
Jan 2017	104	6,599	2,275	\$155,018.36	\$1,490.56
Feb 2017	134	8,121	2,745	\$184,664.15	\$1,378.09
Mar 2017	146	10,256	3,385	\$229,868.56	\$1,574.44
Apr 2017	154	9,512	3,225	\$229,819.01	\$1,492.33
May 2017	194	11,599	4,124	\$288,503.98	\$1,487.13
Jun 2017	186	9,833	3,475	\$244,346.03	\$1,313.69



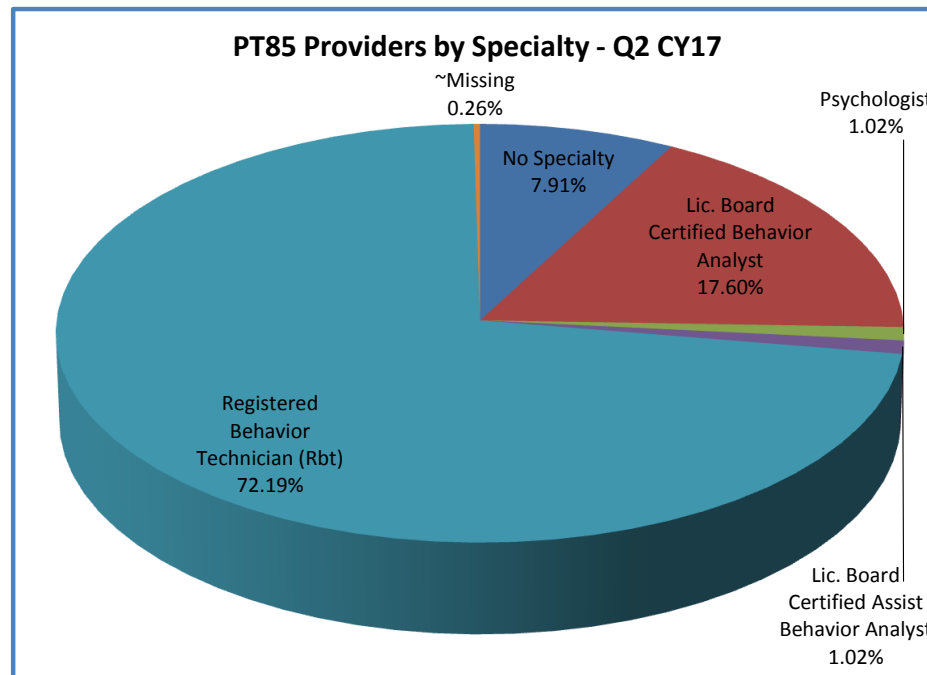
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The DHCFP data warehouse is comprised of claims data submitted by over 21,000 Medicaid providers from within Nevada and across the country. While DHCFP staff conscientiously make their best efforts to validate this data through continuous provider education and the use of a highly experienced audit staff, the Division heavily relies on its providers to submit accurate and complete information on our Medicaid patients. It should therefore be understood by the users of DHCFP reports on disease morbidity and patient health that the data source for these reports is based solely on patient claims data and may not be a complete and comprehensive health record.

# Applied Behavior Analysis (ABA) Program Reports

## PT85 Enrolled Providers - Fee for Service and Managed Care

Time Period: Incurred With Runoff Quarter				Providers Enrolled			
				QTR 3 2016	QTR 4 2016	QTR 1 2017	QTR 2 2017
Provider Type NV Code	Provider Type NV	Provider Specialty NV Cd	Provider Specialty NV				
085	Applied Behavior Analysis Prov	000	No Specialty	28	29	31	31
		310	Lic. Board Certified Behavior Analyst	53	61	68	69
		311	Psychologist	4	4	4	4
		312	Lic. Board Certified Assist Behavior Analyst	1	3	4	4
		314	Registered Behavior Technician (Rbt)	140	179	230	283
		~	~Missing	0	1	1	1
		<b>Total</b>		<b>226</b>	<b>277</b>	<b>338</b>	<b>392</b>



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## Applied Behavior Analysis (ABA) Program Reports

### PT85 Providers by Specialty and Procedure - Fee for Service

Time Period: Incurred With Runoff Quarter						QTR 2 2017					
						Providers	Patients	Service Count Paid	Claims Paid	Net Payment	Net Pay Per Pat
Provider Type Claim NV Code	Provider Type Claim NV	Provider Specialty Claim NV Code	Provider Specialty Claim NV	Procedure Code	Procedure						
085	Applied Behavior Analysis Prov	310	Lic. Board Certified Behavior Analyst	0359T	BEHAVIORAL IDENTIFICATION ASSESSMENT	12	57	57	57	\$15,922.00	\$279.33
				0360T	OBSERVATIONAL BEHAV ASSESSMENT FIRST 30 MIN	4	24	24	24	\$1,684.56	\$70.19
				0361T	OBSERVATIONAL BEHAV ASSESSMENT ADDL 30 MIN	1	17	17	17	\$1,193.23	\$70.19
				0362T	EXPOSURE BEHAV ASSESSMENT FIRST 30 MIN	1	1	1	1	\$70.19	\$70.19
				0364T	ADAPTIVE BEHAVIOR TX BY PROTOCOL FIRST 30 MIN	12	35	537	537	\$17,091.30	\$488.32
				0365T	ADAPTIVE BEHAVIOR TX BY PROTOCOL ADDL 30 MIN	13	36	3,687	536	\$83,761.90	\$2,326.72
				0368T	BEHAVIOR TX WITH MODIFICATION FIRST 30 MIN	37	179	1,456	1,456	\$87,489.86	\$488.77
				0369T	BEHAVIOR TREATMENT WITH MODIFICATION ADDL 30 MIN	37	159	3,509	1,249	\$210,465.04	\$1,323.68
				0370T	FAMILY BEHAVIOR TREATMENT GUIDANCE	20	81	118	118	\$9,992.24	\$123.36
				0372T	BEHAVIOR TREATMENT SOCIAL SKILLS TRAINING GROUP	1	1	10	10	\$142.80	\$142.80
				0373T	EXPOSURE BEHAVIOR TREATMENT FIRST 60 MIN	2	1	10	10	\$313.10	\$313.10
				0374T	EXPOSURE BEHAVIOR TREATMENT ADDL 30 MIN	2	1	52	9	\$813.80	\$813.80
				S5110	Family home care training per 15 minutes	12	39	936	243	\$10,951.20	\$280.80
				312	Lic. Board Certified Assist Behavior Analyst	0364T	ADAPTIVE BEHAVIOR TX BY PROTOCOL FIRST 30 MIN	2	4	13	13
		0365T	ADAPTIVE BEHAVIOR TX BY PROTOCOL ADDL 30 MIN			2	4	72	13	\$2,600.64	\$650.16
		0368T	BEHAVIOR TX WITH MODIFICATION FIRST 30 MIN			2	4	13	13	\$469.56	\$117.39
		0369T	BEHAVIOR TREATMENT WITH MODIFICATION ADDL 30 MIN			2	4	26	13	\$939.12	\$234.78
		314	Registered Behavior Technician (Rbt)	0364T	ADAPTIVE BEHAVIOR TX BY PROTOCOL FIRST 30 MIN	103	120	2,746	2,746	\$42,964.90	\$358.04
				0365T	ADAPTIVE BEHAVIOR TX BY PROTOCOL ADDL 30 MIN	103	118	14,242	2,737	\$222,636.90	\$1,886.75
				0366T	GROUP BEHAVIOR TREATMENT FIRST 30 MIN	10	25	154	154	\$803.88	\$32.16
				0367T	GROUP BEHAVIOR TREATMENT ADDL 30 MIN	10	25	458	154	\$2,390.76	\$95.63
				0373T	EXPOSURE BEHAVIOR TREATMENT FIRST 60 MIN	7	3	356	356	\$11,142.80	\$3,714.27
				0374T	EXPOSURE BEHAVIOR TREATMENT ADDL 30 MIN	7	3	2,448	356	\$38,311.20	\$12,770.40
				Q3014	Telehealth originating site facility fee	1	1	2	2	\$48.48	\$48.48
					<b>Total</b>	<b>403</b>	<b>942</b>	<b>30,944</b>	<b>10,824</b>	<b>\$762,669.02</b>	

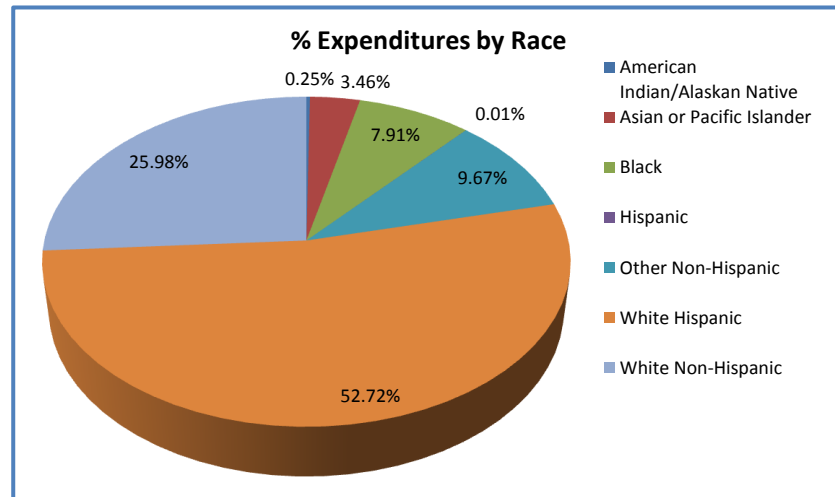
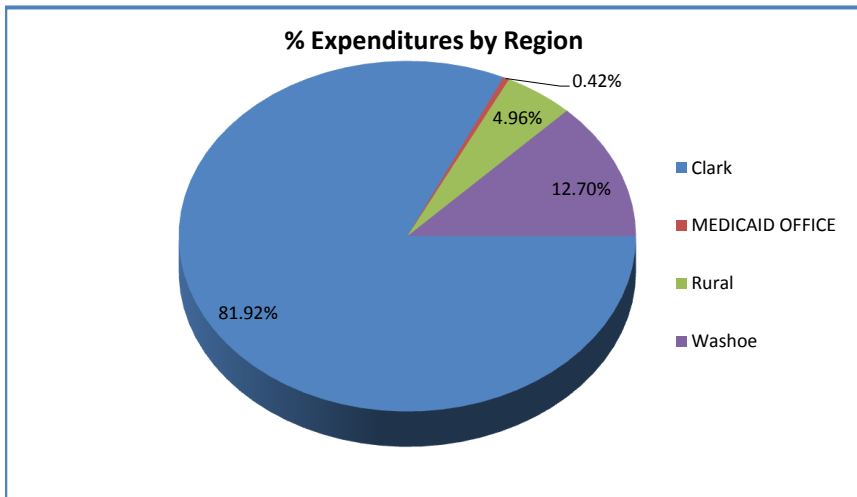
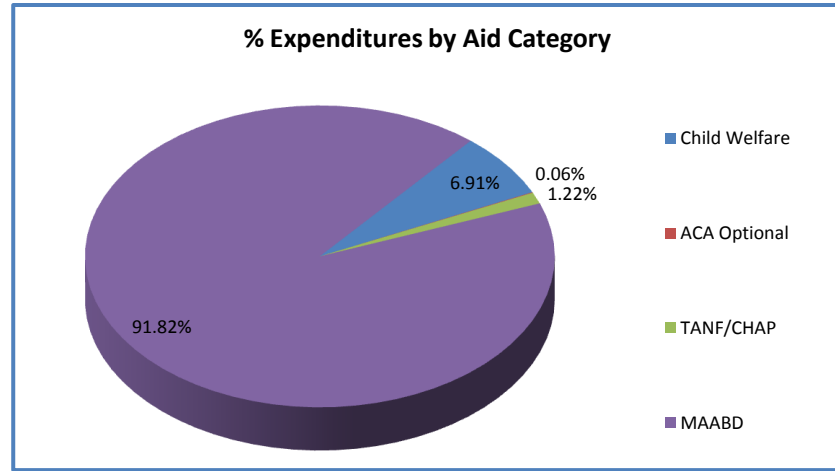
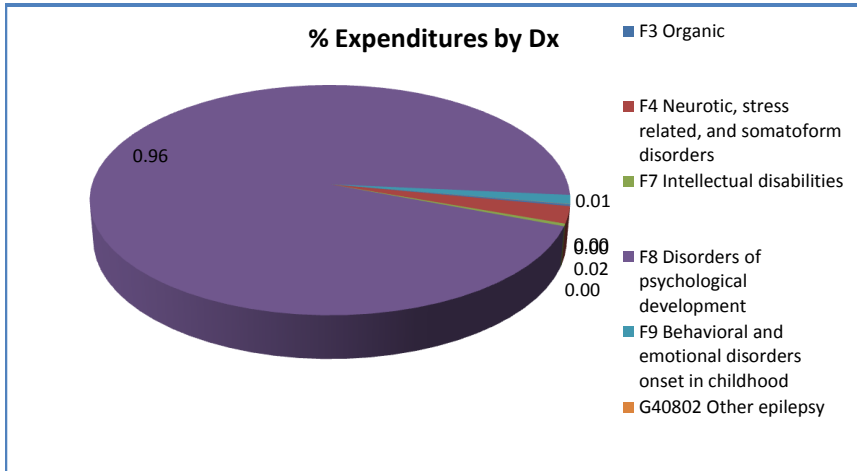
Total Patient Count may contain duplications (i.e. patients may have received services by more than one provider within the timeframe specified).

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## Applied Behavior Analysis (ABA) Program Reports

### Provider Type 85 Applied Behavior Analysis

### Prior Authorization Information by Service - Fee for Service

Provider Type	Service Category	Services					
		In State					
		QE Jun 2017		FY 2017		FY 2016	
		Req Units	Cert Units	Req Units	Cert Units	Req Units	Cert Units
PT85	Adaptive Behavior Tx	204,392	161,589	680,450	480,853	95,534	45,835
	Adaptive Behavior Group Tx	2,842	2,074	16,023	12,438	260	234
	Adaptive Behavior Family Tx w/o child	4,430	3,348	13,838	10,532	1,035	226
	Adaptive Behavior Family Tx w/child	7,218	6,016	22,237	17,518	3,630	2,700
	Adaptive Behavior Family Group Tx w/child						
<b>Grand Total</b>		<b>218,882</b>	<b>173,027</b>	<b>732,548</b>	<b>521,341</b>	<b>100,459</b>	<b>48,995</b>

#### FY 2017 Summary

Total Number of PAs	716
Total Number of Approved PAs	526
Average Approved Units per PA	991

#### QE June 2017 Summary

Total Number of PAs	228
Total Number of Approved PAs	188
Average Approved Units per PA	920

## Applied Behavior Analysis (ABA) Program Reports

<b><u>Dimension/Measure</u></b>	<b><u>Definition</u></b>
Diagnosis Principal	The principal diagnosis description for a service, claim, or lab result.
Incurred Time Period	Incurred Mode is service date driven; results will be based upon when the service occurred, not when the service was paid. Incurred reporting has a 90 day lag time to allow for claims processing.
Net Pay Per Pat	The average net amount paid, per patient, for all claims. It represents the amount after all pricing guidelines have been applied, and all third party, copayment, coinsurance, and deductible amounts have been subtracted.
Net Payment	The net amount paid for all claims. It represents the amount after all pricing guidelines have been applied, and all third party, copayment, coinsurance, and deductible amounts have been subtracted.
Patients	The unique count of members who received facility, professional, or pharmacy services.
Procedure Code	The procedure code for the service record.
Provider Specialty Claim NV code	The Nevada specific code for the servicing provider specialty reported on the claim.
Provider Specialty NV Code	The Nevada specific code for the provider specialty.
Provider Type Claim NV Code	The Nevada specific code for the servicing provider type on the claim record.
Provider Type NV Code	The Nevada specific code for the provider type.
Providers Enrolled	The unique count of providers who are enrolled to provide services under the plan. This includes all providers authorized to provide services even if they have not provided services to any patients. The enrolled provider measures differ from the other provider measures in that those measures only include providers who have submitted claims for facility, professional, or pharmacy services under the plan.
Service Count Paid	The sum of the units paid across professional and facility claims.