LOUISIANA MEDICAID PROGRAM

ISSUED: 07/24/23 REPLACED: 01/20/22

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PROVIDER REQUIREMENTS

In order to participate as an applied behavior analysis (ABA) service provider in the Medicaid Program, a provider must meet the following qualifications:

- 1. Be a Louisiana licensed psychologist and/or medical psychologist that:
 - a. Is licensed by the Louisiana State Board of Examiners of Psychologists;
 - b. Is covered by professional liability insurance to limits of \$1,000,000 per occurrence, \$3,000,000 aggregate;
 - c. Has no sanctions or disciplinary actions on their Louisiana State Board of Examiners of Psychologist licensure; and
 - d. Complete a criminal background check.
- 2. Be a licensed behavior analyst that:
 - a. Is licensed by the Louisiana Behavior Analyst Board;
 - b. Is covered by professional liability insurance to limits of \$1,000,000 per occurrence, \$3,000,000 aggregate; Has no sanctions or disciplinary actions on their Board Certified Behavior Analyst (BCBA®) or Board Certified Behavior Analyst Doctoral (BCBA-D) certification and/or state licensure; and
 - c. Complete a criminal background check.

Para-professionals Requirements

In order to participate as an ABA para-professional in the Medicaid program, a para-professional must meet the following qualifications:

- 1. Be a certified assistant behavior analyst that renders ABA-based therapy services that:
 - a. Is certified by the Louisiana Behavior Analyst Board;
 - b. Works under the supervision of a licensed behavior analyst with the supervisory relationship documented in writing;

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- c. Has no sanctions or disciplinary actions, is state-certified or board-certified by the BACB®; and
- d. Complete a criminal background check.
- 2. Be a registered line technician that renders ABA-based therapy services that meets the following qualifications:
 - a. Is registered by the Louisiana Behavior Analyst Board; works under the supervision of a licensed behavior analyst with the supervisory relationship documented in writing; and
 - b. Complete a criminal background check.

The licensed professional (licensed psychologist, licensed medical psychologist or behavior analyst), certified assistant behavior analyst, or registered line technician shall not have any Medicare/Medicaid sanctions, or be excluded from participating in federally funded programs (i.e., Office of Inspector General's list of excluded individuals/entities (OIG-LEIE), system for award management (SAM) listing and state Medicaid sanctions listings).

Criminal Background Checks

The contracted provider must complete criminal background checks to include federal criminal, state criminal, parish criminal, and sex offender reports for the state and parish of employment and residence.

Criminal background checks must be conducted according to the following schedule:

Provider	Initially	Frequency
Licensed behavior analyst	Enrollment application (current within a year prior to initial Medicaid application) or at time of hire	
Certified assistant behavior analyst	At time of hire	Update performed at least every five years thereafter
Registered line technician	At time of hire	

NOTE: Evidence of background checks must be provided by the contracted provider.

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Registered Line Technicians

Upon enrollment and on a quarterly basis thereafter, the contracted provider shall submit to the managed care organization (MCO) a list of registered line technicians (RLTs). The MCO is responsible for ensuring the contracted provider is in compliance with the requirements of the Louisiana Behavior Analyst Board.

ABA Record Keeping Standards

Providers shall maintain and dispose of records in accordance with all applicable laws, regulations, corporate policies, and organizational policies in a manner that permits compliance with the requirements of the BCBA code, state law and federal law.

All professional work shall be appropriately documented in accordance with the provisions included in this manual in order to facilitate the provision of services later by the provider or by other professionals, to ensure accountability, and to meet other requirements of the Behavior Analyst Certification Board, Louisiana Behavior Analyst Board or the law.

Providers shall create, maintain, disseminate, store, retain, and dispose of records and data relating to their research, practice, and other work in accordance with applicable laws, regulations, and policies and in a manner that allows for the appropriate transition of services at any moment in time.

NOTE: All records and data must be maintained for at least six (6) years unless otherwise required by law for a longer period.

Documentation shall accurately state the nature of the services previously and currently provided, the fees or charges, the identity of the provider, relevant outcomes and other required descriptive data. Providers shall have records that demonstrate all codes were delivered to the proper client and were billed and used properly.

There shall be a specific record for each individual client receiving ABA therapy from the providers.

Start and stop times shall be recorded for every code billed. It is not necessary to have a start and stop time for every unit; however, start and stop times shall be used at the beginning of the session, following a break that is 12 minutes or longer, and when there is a switch to a different billing code. The person delivering the service must sign, date, and include their credentials in the documentation for each day and distinct session. This daily documentation/log will serve as a way of communicating important aspects of the treatment session with the next tech or provider.

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The daily documentation/log shall include all of the following:

- 1. Names of session attendees;
- 2. Start and stop time for each session;
- 3. Narrative of what happened in the session:
 - a. Describe what programs/interventions were run during the session;
 - b. Describe each attendees' responses to interventions through the session;
 - c. Describe each attendees' barriers to progress; and
 - d. If the RLT delivers services, recorded data is sufficient, and a narrative is not required.
- 4. Documentation of correct billing code to be used;
- 5. Name, signature, and credentials of person(s) delivering the services; and
- 6. All documentation must be legible, easy to read, and individualized to each client.

All Protected Health Information (PHI) is confidential. Providers must ensure that all PHI is kept confidential and maintained securely. This includes protecting PHI in all stages of documentation (creating, managing, accessing, transferring, and destroying PHI) and all formats (written, recorded and electronic).

For regulations regarding electronic signatures, refer to the Louisiana Administration Code, Title 48, Part 1, Chapter 7 at https://www.doa.la.gov/Pages/osr/lac/books.aspx.