



ABA Contract - FY24 Provider Feedback/Change Log

Changes throughout – grammatical, punctuation, consistent use of PAYOR, etc.

3. Term and Termination

- a. Added language related to rate discussion and agreement on an annual basis NLT 9.30 each year

15. Liability Insurance

- iv. Updated liability insurance language from the FY24 MDHHS/PIHP Master Agreement

19. Licenses, Certifications, Credentialing and Privileging Requirements

- c. Added required background checks per FY24 MDHHS/PIHP Master Agreement

20. Staffing AND Training Requirements

- c. Clarified reference to Attachment title

29. Miscellaneous Provisions

- p. Deleted "Gender"
- r. Deleted "COVID-19"

Attachment A: Statement of Work

- I. Deleted reference to MSHN and MDHHS authorization requirement
- II.a. Updated language identifying Behavior Health Technicians (BHT) and clarifying the number of hours
- III.b. Removed reference to service codes (also removed in sections that follow) since they are identified in the attachment
- III.c. Updated language for training progress note completion
- III.e. Updated "Telemedicine" language, POST COVID and included reference to MMP 23-10
- III.h. Added clarifying language regarding FBA
- III.i. Added clarifying language to Annual ABA plan
- IV. Updated Training verification requirements
- V.b. Deleted reference to Authorization form as being duplicate – Added clarifying language re Medical Necessity
- V.g. Added ability request additional review; treatment hours
- VI.k. Added clarifying statement regarding not changing consumer for missed appointment, per MPM (linked to applicable section)



Attachment B: Service Codes and Rates: updated based on FY24 modifier revisions

- Removed "GT" modifier
- Added "U5" modifier
- Added "10" for telemedicine Place of Service Code

Attachment C: Reporting Requirements

- Updated based on required checks to be done and identified frequency

Attachment D: ABA Authorization Form

- Replaced with updated form post WSA

Attachment H: Glossary and Definitions

- Updates made based on Michigan Medicaid Provider Manual
- Deleted DD CGAS as not needed
- Deleted DSM-IV as being outdated
- Deleted WSA (Web Support Application) – no longer used for ABA
- Deleted VB MAPP as not used in boilerplate of contract

Date:	Action:	Outcome:
5.15.23/6.17.23	ABA Workgroup	Reviewed attachments
5.31.23	Provider Review Feedback due	Reviewed boilerplate and attachments
6.28.23	PNMC Review	Approved with changes
	Operations Council Review	
	Release to Network	