

Ohio Medicaid ABA Contract 06-19-2024

Procedure Code	Procedure Description	Pricing Indicator	Rate Type	Mod1	Mod2	Mod3	Mod4	Max Fee	Max Fee Eff. Date	Max Fee End Date	PA
97151	BHV ID ASSMT BY PHYS/QHP	MAXFEE	ABA					13.84	4/1/2021	12/31/2299	N
97151	BHV ID ASSMT BY PHYS/QHP	PRXOVR	ABA					NA	NA	NA	N
97152	BHV ID SUPRT ASSMT BY 1 TECH	MAXFEE	ABA					11.76	4/1/2021	12/31/2299	N
97152	BHV ID SUPRT ASSMT BY 1 TECH	PRXOVR	ABA					NA	NA	NA	N
97153	ADAPTIVE BEHAVIOR TX BY TECH	MAXFEE	ABA					12.69	4/1/2021	12/31/2299	Y
97153	ADAPTIVE BEHAVIOR TX BY TECH	PRXOVR	ABA					NA	NA	NA	Y
97154	GRP ADAPT BHV TX BY TECH	MAXFEE	ABA					6.35	4/1/2021	12/31/2299	Y
97154	GRP ADAPT BHV TX BY TECH	PRXOVR	ABA					NA	NA	NA	Y
97155	ADAPT BEHAVIOR TX PHYS/QHP	MAXFEE	ABA					16.60	4/1/2021	12/31/2299	Y
97155	ADAPT BEHAVIOR TX PHYS/QHP	PRXOVR	ABA					NA	NA	NA	Y
97156	FAM ADAPT BHV TX GDN PHY/QHP	MAXFEE	ABA					16.60	4/1/2021	12/31/2299	Y
97156	FAM ADAPT BHV TX GDN PHY/QHP	PRXOVR	ABA					NA	NA	NA	Y
97157	MULT FAM ADAPT BHV TX GDN	MAXFEE	ABA					14.11	4/1/2021	12/31/2299	Y
97157	MULT FAM ADAPT BHV TX GDN	PRXOVR	ABA					NA	NA	NA	Y
97158	GRP ADAPT BHV TX BY PHY/QHP	MAXFEE	ABA					7.30	4/1/2021	12/31/2299	Y
97158	GRP ADAPT BHV TX BY PHY/QHP	PRXOVR	ABA					NA	NA	NA	Y