



# Receive ABA Form A and Clinical

\*Referals originate from Dev. Pediatrician Offices in the area.

> \*BHPP Reviews Established Clinical Criteria for ABA Assessment

\*BHPP Approve/Deny Request for Assessment \*Staff with consulting Psychiatrist, if needed

### Step A

#### Refer to ABA Provider for Assessment

\*BHPP Reviews Form A for any accomodation requests

\*BHPP Refers to 'best fit'
ABA Provider for ABA
Assessment

\*BHPP Submits Authorization for ABA Assessment (6 month auth )

\*BHPP Communicates status to referrant at Developmental Pediatrician Clinic

### Step B

# Receive ABA Form B and Clinical

\*BHPP Reviews Clinical and request for specific number of hours of ABA treatment

\*BHPP Approve/Deny request

\*BHPP Submits Authorization for ABA Treatment (6 months)

\*BHPP Communicates status to ABA Provider

\*BHPP Communicates status to referrant at Developmental Pediatrician Clinic

### **Step C**

#### **Concurrent Review**

\* If Provider's assessment determines that treatment is still needed, they will submit Form B and supplemental clinical

\*BHPP Approve/Deny request

\*BHPP Submits Authorization for ABA Treatment (6 months)

\*BHPP Communicate status to ABA Provider

### Step D

**Developmental Pediatrician's Office** 

**ABA Provider** 

Last Updated: January 2019



## **ABA Service Request and Authorization Process Overview**

