ALLIANCE BEHAVIORAL HEALTHCARE
ABA SERVICE RATES

Procedure Code	Procedure Code Description	Unit	MD/ Psychiatrist	Spec 109 - LP	Spec 110 - LCSW/LPC/ LMFT	Spec 128 - LPA	Registered Behavior Tech	Board Certified Behavior Analyst	By Facility	
0359T	ABA Initial Assessment	Per Event	$ 125.00	$ 125.00		$ 125.00				*
0360T	ABA Observational Behavioral f/u assessment 30 min	30 minutes	$ 62.50	$ 62.50		$ 62.50		$ 62.50		*
0361T	ABA Observational Behavioral f/u assessment add'l 30 min	30+ minutes	$ 62.50	$ 62.50		$ 62.50		$ 62.50		*
0364T	ABA Treatment 30 min	30 minutes					$ 25.00			*
0365T	ABA Treatment add'l 30 min	30+ minutes					$ 25.00			*
0368T	ABA Treatment Modification 30 min	30 minutes	$ 62.50	$ 62.50		$ 62.50		$ 62.50		*
0369T	ABA Treatment Modification add'l 30 min	30+ minutes	$ 62.50	$ 62.50		$ 62.50		$ 62.50		*
0370T	Family Adaptive Behavioral Treatment Guidance	Per Event	$ 125.00	$ 125.00		$ 125.00				*
97151	RB-BHT Comp Assessment	15 minutes							$ 26.56	**
97152	RB-BHT Assessment Follow-Up	15 minutes							$ 53.65	**
97153	RB-BHT ABA Intervention-Individual	15 minutes							$ 18.09	**
97154	RB-BHT ABA Intervention-Group	15 minutes							$ 9.88	**
97155	RB-BHT Supervision/Observation and Direction	15 minutes							$ 28.00	**
97156	RB-BHT Family Training-Indivdual	15 minutes							$ 20.60	**
97157	RB-BHT Family Training-Group	15 minutes							$ 10.00	**
	* Ending June 30, 2019									
	**Effective as of July 1, 2019									