



Purpose: Effective 8/1/2022, the fee schedule for Behavior Analysis Services replaces the current Healthcare Common Procedures Coding System (HCPCS) codes with Current Procedural Terminology (CPT) codes. BA services that occur on or after 8/1/2022, must use the appropriate CPT codes for billing. To review the new Fee Schedule, [\(Click Here\)](#)

The table below presents a helpful crosswalk of the HCPCS and CPT Codes:

HCPCS Codes	CPT Codes Options
H0031 – BA assessment	97151 – Behavior Identification – Assessment (24 units maximum allowable) 97152 – Behavior Identification – Assessment (8 units maximum allowable)
H0032 – BA Reassessment	97151TS - Behavior Identification – Assessment (18 units maximum allowable)
H2012 - Behavior Analysis – Assistant Behavior Analyst	97155HN - Adaptive Behavior Treatment with Protocol Modification 97156HN – Family Training by Assistant 97153 – Behavior treatment by protocol
H2014 – Behavior Analysis - Technician	97153 – Behavior treatment by protocol
H2014GK - Behavior Analysis - Group	97154 – Group BA Therapy services by protocol 97158 – Group BA Therapy services with protocol modification
H2019 - Behavior Analysis – Lead Analyst	97155 - Behavior treatment with protocol modification 97156 - Family Training by Lead Analyst 97153 – Behavior treatment by protocol

Beginning 6/29/2022, Providers have two options to transition treatment plans from HCPCS to CPT codes:

1. Providers may convert an approved treatment plan by reassigning available HCPCS units to aligned CPT units for administrative approval, or



2. Providers may submit a new treatment plan for direct services that begins 8/1/2022, which will require a medical necessity review.

Option 1:

To facilitate the coding transition, we have developed a process which allows an administrative conversion of approved BA services that began prior to but end after 8/1/2022.

These instructions will serve as guide to help you convert approved BA services from HCPCS codes to CPT codes in eQSuite®.

Before entering your request in eQSuite® you need to know the approved services and number of units covering the period from 8/1/2022 through the end of the approved treatment period. Only enter the total # of remaining units after 8/1/2022.

The conversion process does not apply to services that have been or will be performed prior to 8/1/22.

Below are some basic helpful examples; additional scenarios can be found at the end of this document.

Example 1 – This table displays converting approved RBT & BCBA direct services that end on 10/25/2022.

Current Approved Dates & HCPCS Codes/Units	Subtract units that have been or will be rendered before 8/1/2022	Conversion of CPT codes in eQsuite®
Dates: 4/29/2022-10/25/2022	Dates 4/29-7/31/2022	Dates: 8/1/2022-10/25/2022
HCPCS Codes/Total Units: H2014: 3120 units H2019: 620 units	HCPCS Codes/Total Units Used: H2014: 1629 units H2019: 324 units	CPT Codes/Remaining Units: 97153:1491 units 97155: 296 units



Example 2 – This table displays converting approved RBT, BCaBA, and BCBA direct services that end on 11/10/2022.

Current Approved Dates & HCPCS Codes/Units	Subtract units that have been or will be rendered before 8/1/2022	Conversion of CPT Codes in eQSuite®
Dates: 5/15/2022-11/10/2022	Dates: 5/15/2022-7/31/2022	Dates: 8/1/2022-11/10/2022
HCPCS Codes/Total Units: H2014: 3120 units H2012: 416 units H2019: 208 units	HCPCS Codes/Total Units: H2014: 1352 units H2012: 180 units H2019: 90 units	CPT Codes/Remaining Units: 97153: 1768 units 97155HN: 236 units 97155: 118 units

Reminder: Assessments and Reassessments can not be combined with direct services. Providers must have a separate unique PA number for an assessment or a re-assessment.

Example 3 & 4 shows how convert an approved Assessment or Reassessment but is only to be used if the approved service can not be completed before 8/1/22. **Assessments and reassessments completed prior to 8/1/2022 must be billed with HCPCS code H0031 or H0032.**

Example 3 – This table displays converting an approved Assessment code that ends on 8/15/2022.

Current Approved Dates & HCPCS Codes/Units	Conversion of CPT Codes in eQSuite®
Dates: 7/17/2022-8/15/2022	Dates: 8/1/2022-8/15/2022
HCPCS Codes/Total Units: H0031: 1 unit	CPT Codes/Remaining Units: 97151: Max Allowable 24 units

Example 4 – This table displays converting an approved Re-Assessment code that ends on 7/15/2022.

Current Approved Dates & HCPCS Codes/Units	Conversion of CPT Codes in eQSuite®
Dates: 7/17/2022-8/15/2022	Dates: 8/1/2022-8/15/2022



HCPCS Codes/Total Units: H0032: 1 unit	CPT Codes/Remaining Units: 97151TS: Max Allowable 18 units
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How To Input the HCPCS to CPT Code Conversion Request into eQSuite:

- Enter a new authorization request in eQSuite® as an Admission.
- Your start date of service must match the start date entered from your previous certification. **Reference Example 1**
- Your From date should be entered as 8/1/2022 and your thru date cannot extend past the last certification of services. **Reference Example 1**
- You must check **YES** to the question on the start tab indicating that this is a HCPCS to CPT conversion.
- Supporting clinical documentation will **not** be required.
- Once you submit your request you will receive an administrative approval.



Review Type and Settings

Provider ID: Provider Name:

Specify Type: BA BA MDT

Review Type:

eQHealth Case #: PA#:

Recipient ID: Name: DOB: Sex:

Physicians and Healthcare Practitioners

	Type	Medicaid #	NPI #	License #	Name	Phone #
Edit	Referring	854072		854072	TEST, PHYSICIAN C	4444444444

Start date of service: ←

Is this a HCPCS to CPT conversion review? Yes No ←

Code	Description	MOD	MOD2	From Date	Thru Date	Total Units
97153	Adaptive Behavior Treatment - Technician			08/01/2022	10/25/2022	1491
97155	Adaptive Behavior Treatment - Physician			08/01/2022	10/25/2022	296

The HCPCS to CPT Code conversion is an administrative process of reapproving services that have been approved previously as being medically necessary through a specific date range. The conversion request is not reviewed for medical necessity. It is offered to reduce administrative work on BA providers and reduce potential disruptions to services.

Option 2:

Providers who do not wish to use the HCPCS to CPT Code conversion process have the option to write new treatment plans and submit those plans for medical necessity review. The current medical necessity review process is not being changed.

Providers who request a medical necessity review for a new treatment plan:

- Enter a new authorization request in eQSuite® as an Admission.
- Your start date of service **and** your From date should be entered as 8/1/2022.



- Providers can request reassessment, **or** you can request services for 180-day date span.
- You must check **NO** to the question on the start tab indicating that this is a HCPCS to CPT code conversion.
- Supporting clinical documentation **will be** required.
- Once you submit your request it will go through medical necessity review.

Review Type and Settings

Provider ID: Provider Name:

Specify Type: BA BA MDT

Review Type:

eQHealth Case #: PA#:

Recipient ID: Name: DOB: Sex:

Physicians and Healthcare Practitioners

	Type	Medicaid #	NPI #	License #	Name	Phone #
Edit	Referring	854072		854072	TEST, PHYSICIAN C	4444444444

Start date of service: ←

Is this a HCPCS to CPT conversion review? Yes
 No ←

Questions and Answers to consider

Q: After completing the HCPCS to CPT conversion, can the new CPT PA be modified if it is medically necessary to change the treatment plan?

A: Yes, submit a modification request in eQSuite; however, the modification request is reviewed for medical necessity.

Q: What will happen to PAs with HCPCS Codes that have end dates after 8/1/2022?

A: End dates in eQSuites and MMIS will be changed to 7/31/2022, but no action from providers is needed to make this change. eQHealth and AHCA will make this change.

Q: After 8/1/2022, will the allowance for administrative extensions of telemedicine or direct services that began in calendar year 2020 continue?

A: No. Also note that billing for telemedicine services after 8/1/2022 will no longer need a PA from eQHealth.

Additional Helpful HCPCS to CPT Conversion Examples:

Group Services:

This table displays converting approved direct services that include group services and end on 9/15/2022.

Current Approved Dates & HCPCS Codes/Units	Subtract units that have been or will be rendered before 8/1/2022	Conversion of CPT Codes in eQSuite®
Dates: 3/20/2022-9/15/2022	Dates: 3/20/2022-7/31/2022	Dates: 8/1/2022-9/15/2022
HCPCS Codes/Total Units: H2014: 2600 units H2014GK: 312 units H2019: 416 units	HCPCS Codes/Total Units: H2014: 1936 units H2014GK: 232 units H2019: 310 units	CPT Codes/Remaining Units: 97153: 664 units 97154: 80 units 97155: 106 units

Caregiver Training:

This table displays including 1 hour per week of caregiver training in the conversion of approved direct services that end on 11/12/22.

Current Approved Available HCPCS Codes & Units	Convert the CPT Codes	From date to enter in eQSuite®	Thru date to enter in eQSuite®
H2014: 3120 units	97153: 3120 units	8/1/2022	1/27/2023
H2012: 416 units	97155HN: 416 units	8/1/2022	1/27/2023
H2019: 208 units	97155: 104 units	8/1/2022	1/27/2023
	97156: 104 units	8/1/2022	1/27/2023