

Description of Services Codes Covered by the Maryland Medicaid ABA Benefit

Overview/Purpose:

- All service codes have a limit of one rendering provider and one location per day unless otherwise stated in their description below.
- Telehealth must be rendered through a two-way HIPAA compliant platform with video and audio components on.
- The Telehealth Readiness Checklist must be included with treatment requests when telehealth is being/going to be utilized.
- The modifier GT should be used to indicate telehealth services were rendered for services codes where telehealth is allowable.

CPT Code	Details
<p style="text-align: center;">97151</p> <p style="text-align: center;">Initial Assessment by BCBA</p>	<p>Standard definition: Behavior identification assessment, administered by a physician or other qualified health care professional, each 15 minutes of the physician’s or other qualified health care professional’s time face-to-face with patient and/or guardian(s)/caregiver(s) administering assessments and discussing findings and recommendations, and non-face-to-face analyzing past data, scoring/interpreting the assessment, and preparing the report/treatment plan.</p> <p>Maryland Medicaid ABA benefit: An evaluation with participant and caregiver to determine the participant’s current level of functioning, skills deficits, and challenging behaviors using validated instruments. A treatment plan is also developed.</p> <p>QHCP: Psychologist/BCBA-D/BCBA with LBA</p> <p>Details/Limitations:</p> <ul style="list-style-type: none"> • Maximum of 32 units (8 hours) authorized per request. • Daily maximum billing of 32 units (8 hours) per day. • Observations and administration of validated instruments must be completed in-person.

	<ul style="list-style-type: none"> • Not eligible to be done via telehealth.
<p>97151</p> <p>Reassessment by BCBA</p>	<p>Standard definition: Behavior identification assessment, administered by a physician or other qualified health care professional, each 15 minutes of the physician’s or other qualified health care professional’s time face-to-face with patient and/or guardian(s)/caregiver(s) administering assessments and discussing findings and recommendations, and non-face-to-face analyzing past data, scoring/interpreting the assessment, and preparing the report/treatment plan.</p> <p>Maryland Medicaid ABA benefit: An evaluation of the parent/caregiver and participant’s progress towards acquiring new skills to help aid the reduction of participant’s maladaptive behaviors using objective, quantifiable measures.</p> <p>QHCP: Psychologist/BCBA-D/BCBA with LBA</p> <p>Details/Limitations:</p> <ul style="list-style-type: none"> • Maximum of 12 units (three hours) authorized per treatment request. • Additional units can be authorized if the standard 12 units (three hours) are utilized before the end of the authorization due to clinical need. • Daily maximum billing of 32 units (8 hours) per day. • Observations and administration of validated instruments must be completed in-person. • Not eligible to be done via telehealth.
<p>97152</p> <p>RBT/BCaBA support during assessment</p> <p>Requires clinical justification</p>	<p>Standard definition: Behavior identification supporting assessment, administered by one technician under the direction of a physician or other qualified health care professional, face-to-face with the patient, each 15 minutes.</p> <p>Maryland Medicaid ABA benefit: BCaBA/RBT/BT assisting with evaluation of the participant’s current level of functioning, skills deficits, and maladaptive behaviors using validated instruments.</p> <p>QHCP: BCaBA/RBT/BT</p> <p>Details/Limitations:</p>

	<ul style="list-style-type: none"> • This code is complementary to 97151. At least 4 units of 97151 should be requested given BCBA must be involved in the assessment process. • Daily maximum billing of 32 units (8 hours) per day. • Observations and administration of validated instruments must be completed in-person. • Not eligible to be done via telehealth • Clinical justification required
<p>97153</p> <p>Direct ABA services by an RBT/ BCaBA/BT or BCBA</p>	<p>Standard definition: Adaptive behavior treatment by protocol, administered by technician under the direction of a physician or other qualified health care professional, face-to-face with one patient; each 15 minutes.</p> <p>Maryland Medicaid ABA benefit: Direct 1:1 implementation of the behavior intervention plan and instruction of acquisition goals outlined in the treatment plan. Use of validated ABA principles designed to alleviate the core challenges associated with ASD diagnosis. This may include probing of skills not yet targeted in the treatment plan.</p> <p>QHCP: BCaBA/RBT/BT or Psychologist/ BCBA-D/BCBA with LBA</p> <p>Details/Limitations:</p> <ul style="list-style-type: none"> • Daily maximum billing of 32 units (8 hours) per day. • Up to three rendering providers per day. • Can be billed concurrently with 97155 or 97156. • Not eligible to be done via telehealth
<p>97155 / 97155-GT</p> <p>Supervision of RBT/BCaBA/BT with participant present</p>	<p>Standard definition: Adaptive behavior treatment with protocol modification administered by physician or other qualified health care professional, which may include simultaneous direction of technician, face-to-face with one patient, each 15 minutes.</p> <p>Maryland Medicaid ABA benefit: Supervision of BCaBAs, RBTs, or BTs in directly implementing behavior intervention plans and teaching acquisition goals from the treatment plan. As of 2/1/2026, it includes data analysis to assess the effectiveness of protocol components and making necessary revisions to the treatment plan. Technician and client must be present.</p> <p>QHCP: Psychologist/BCBA-D/BCBA with LBA</p>

	<p>Details/Limitations:</p> <ul style="list-style-type: none"> • Daily maximum billing of 24 units (6 hours) per day. • Supervision rate must be at least 10% of direct hours delivered to the participant (97154 + 97153). • Not eligible for direct 1:1 session with participant by Psychologist/BCBA-D/BCBA with LBA for protocol modification. • At least 25% of the monthly service must be rendered in-person, and 75% can be rendered via telehealth. • Billing 97155 with modifier GT indicates supervision was done via telehealth. • Billing 97155 with no modifier indicates supervision was done in person. • Can be billed concurrently with 97153.
<p>97156 / 97156-U2</p> <p>Parent/Caregiver training with and without participant present</p>	<p>Standard definition: Family adaptive behavior treatment guidance, administered by physician or other qualified health care professional (with or without the patient present), face-to-face with guardian(s)/caregiver(s), each 15 minutes.</p> <p>Maryland Medicaid ABA benefit: Direct 1:1 instruction of parent/caregiver goals outlined in the treatment plan. Parent/caregiver is learning and implementing ABA principles that assist in the generalization of skills acquired by the participant during 1:1 direct service. All goals are related to alleviating the core challenges associated with an ASD diagnosis. As of 2/1/2026, includes Coordination of Care activities.</p> <p>QHCP: Psychologist/BCBA-D/BCBA/BCaBA with LBA</p> <p>Details/Limitations:</p> <ul style="list-style-type: none"> • Daily maximum billing of 16 units (4 hours) per day for 97156. • Daily maximum billing of 16 units (4 hours) per day for 97156- U2 • At least 25% of the monthly service must be rendered in-person, and 75% can be rendered via telehealth. • 97156 with no modifier indicates participant is not present. • 97156-U2 indicates participant is present. • 97156-U2 cannot be billed concurrently with 97153. • 97156 can be billed concurrently with 97153.

	<ul style="list-style-type: none"> 97156 can be billed twice per day, once as 97156 and once as 97156-U2
<p>97157</p> <p>Group caregiver training by BCBA</p>	<p>Standard definition: Multiple-family group adaptive behavior treatment guidance, administered by physician or other qualified health care professional (without the patient present), face-to-face with multiple sets of guardians/caregivers, each 15 minutes.</p> <p>Maryland Medicaid ABA benefit: Direct instruction to multiple families without the participant present. Goals in the treatment plan focus on learning and implementing ABA principles to assist in the generalization of skills acquired by the participant during direct services to alleviate the core challenges associated with an ASD diagnosis.</p> <p>QHCP: Psychologist/BCBA-D/BCBA with LBA</p> <p>Details/Limitations:</p> <ul style="list-style-type: none"> Daily maximum billing of 10 units (2.5 hours) per day. Group is comprised of 2 to 8 families. Specific parent/caregiver goals for the group are developed and listed in the treatment plan. At least 25% of the monthly service must be rendered in-person, and 75% can be rendered via telehealth.
<p>97158</p> <p>Social Skills group led by BCBA</p>	<p>Standard definition: Group adaptive behavior treatment with protocol modification, administered by physician or other qualified health care professional face-to-face with multiple patients, each 15 minutes.</p> <p>Maryland Medicaid ABA benefit: Group focused on the implementation of social skill goals outlined in the treatment plan to alleviate the core challenges associated with an ASD diagnosis. This may include probing of skills not yet targeted in the treatment plan.</p> <p>QHCP: Psychologist/BCBA-D/BCBA with LBA</p> <p>Details/Limitations:</p> <ul style="list-style-type: none"> Daily maximum billing of 10 units (2.5 hours) per day.

	<ul style="list-style-type: none"> • Group is comprised of 2 to 8 participants. • Not utilized as supervision of 97154 for this benefit. 97154 services are supervised via 97155.
<p>97154</p> <p>Social Skills group led by RBT/BCaBA</p> <p>Requires clinical justification</p>	<p>Standard definition: Group adaptive behavior treatment by protocol, administered by technician under the direction of a physician or other qualified health care professional, face-to-face with two or more patients, each 15 minutes.</p> <p>Maryland Medicaid ABA benefit: Group focused on the implementation of social skill goals outlined in the treatment plan to alleviate the core challenges associated with an ASD diagnosis. Does not include probing of skills not yet targeted in the treatment plan.</p> <p>QHCP: BCaBA/RBT/BT</p> <p>Details/Limitations:</p> <ul style="list-style-type: none"> • Daily maximum billing of 16 units (4 hours) per day. • Group is comprised of 2 to 8 participants. • 97154 services are supervised via 97155 for this benefit.
<p>0373T</p> <p>Severe Behavior Treatment</p> <p>Requires clinical justification</p>	<p>Standard definition: Adaptive behavior treatment with protocol modification, each 15 minutes of technicians' time face-to-face with a patient, requiring the following components:</p> <ul style="list-style-type: none"> • Administered by the physician or other qualified health care professional who is on site • With the assistance of two or more technicians • For a patient who exhibits destructive behavior • Completed in an environment that is customized to the patient's behavior <p>Maryland Medicaid ABA benefit: Direct 2:1 implementation of the behavior intervention plan and skill acquisition goals outlined in the treatment plan using validated ABA principles designed to alleviate the core deficits of ASD for a participant, with a specific focus on the reduction of severe destructive behaviors in a structured, safe environment. This may include probing of skills not yet targeted in the treatment plan.</p> <p>QHCP: BCaBA/RBT/BT and Psychologist/ BCBA-D/BCBA with LBA</p>

	<p>Details/Limitations:</p> <ul style="list-style-type: none"> • Daily maximum billing of 24 units (6 hours) per day. • Therapeutic team consists of two BCaBAs/RBTs/BTs and one Psychologist/BCBA-D/BCBA with LBA. • This is an all-inclusive code. Billing is done under the NPI of the highest certification for ALL QHCPs involved. Presence of BCaBA/RBT/BT is included in the session note. • Psychologist/ BCBA-D/BCBA with LBA must be on-site and immediately available to assist for the entire session. • 0373T cannot be billed concurrently with 97155.
<p>0362T</p> <p>Severe Behavior Assessment/Functional Analysis</p> <p>Requires clinical justification</p>	<p>Standard definition: Behavior identification supporting assessment, each 15 minutes of technicians’ time face-to-face with a patient, requiring the following components:</p> <ul style="list-style-type: none"> • Administered by the physician or other qualified health care professional who is on site • With the assistance of two or more technicians • For a patient who exhibits destructive behavior, completed in an environment that is customized to the patient’s behavior. <p>Maryland Medicaid ABA benefit: Functional Analysis (FA) conducted for a participant with specific, severe destructive behaviors in a structured, safe environment. Exposes the participant to a customized series of social and environmental conditions associated with the destructive behaviors. Uses structured testing to examine events, cues, responses, and consequences associated with the behaviors.</p> <p>QHCP: BCaBA/RBT/BT and Psychologist/ BCBA-D/BCBA with LBA</p> <p>Details/Limitations:</p> <ul style="list-style-type: none"> • Daily maximum billing of 32 units (8 hours) per day. • Therapeutic team consists of two BCaBAs/RBTs/BTs and one Psychologist/BCBA-D/BCBA with LBA. • This is an all-inclusive code. Billing is done under the NPI of the highest certification for ALL QHCPs involved. Presence of BCaBA/RBT/BT is included in the session note. • Best requested through the addendum process.

	<ul style="list-style-type: none">• Providers develop and submit FA results report separate from treatment plan so that it may be retained in the participant's file.• 0362T cannot be billed concurrently with 97155
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