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TRICARE
MANAGEMENT ACTIVITY

PCPB

CHANGE 77
6010.51-M
MARCH 6, 2009

PUBLICATIONS SYSTEM CHANGE TRANSMITTAL
FOR
TRICARE OPERATIONS MANUAL (TOM)

The TRICARE Management Activity has authorized the following addition(s)/
revision(s) to 6010.51-M, reissued August 2002.

CHANGE TITLE: NATIONAL DEFENSE AUTHORIZATION ACT (NDAA)-
09 CHANGE TO EXTENDED CARE HEALTH OPTION
(ECHO) CAP FOR CERTAIN BENEFITS

PAGE CHANGE(S): See page 2.

SUMMARY OF CHANGE(S): This change changes the government's maximum
cost-share for certain ECHO benefits from \$2,500 per month to \$36,000 per Fiscal Year
(FY).

EFFECTIVE DATE: October 14, 2008.

IMPLEMENTATION DATE: April 1, 2009.

This change is made in conjunction with Aug 2002 TPM, Change No. 94.

Laura Sells
Chief, Purchased Care Procurement Branch

ATTACHMENT(S): 5 PAGES
DISTRIBUTION: 6010.51-M

WHEN PRESCRIBED ACTION HAS BEEN TAKEN, FILE THIS TRANSMITTAL WITH BASIC DOCUMENT

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REMOVE PAGE(S)

CHAPTER 20

Section 10, pages 9 through 13

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7.2.1. *Beneficiary's name, date of birth, inclusive dates of the evaluation period, sponsor's SSN, name of the referring provider; and*

7.2.2. *A summary of the child's progress; and*

7.2.3. *A summary of the child's challenges to meet the goals and objectives; and*

7.2.4. *A summary of parent/caregiver participation in implementing the BP during the evaluation period.*

7.2.5. *Recommendations for continued EIA services.*

7.3. *The updated BP shall include:*

7.3.1. *The data elements specified in [paragraph 7.1.](#); and*

7.3.2. *The dates of the plan being updated; and*

7.3.3. *The number of EIA hours of services to be provided each month by the EIA Supervisor and the EIA Tutor.*

7.4. *The ACSP shall provide an information copy of the BP, the EPR, and the updated BP to the beneficiary's PCP or ASD Specialized provider, within 10 calendar days of completion.*

8.0. POLICY

8.1. *Under the Demonstration, TRICARE will reimburse only EIA services that meet the minimum standards established by the current BACB Task List, the BACB Professional Disciplinary Standards, the BACB Guidelines for Responsible Conduct for Behavior Analysts, and current BACB rules and regulations when rendered by providers who meet all applicable requirements specified herein.*

8.2. *All EIA services under this Demonstration require prior written authorization by the Director, TMA or designee.*

8.3. *The following are eligible for reimbursement under the Demonstration:*

8.3.1. *Evaluation of a beneficiary using the Functional Behavioral Assessment and Analysis.*

8.3.2. *Development of the initial BP, the EPR, and the updated BP.*

8.3.3. *EIA services rendered directly to a TRICARE beneficiary on a one-on-one basis. Group EIA sessions are not a TRICARE benefit.*

8.3.4. *EIA services rendered jointly, in-person, during directly supervised fieldwork of the EIA Tutor by the EIA Supervisor. Only the services provided by the Supervisor will be reimbursed as specified in [paragraph 9.1.](#)*

8.3.5. Quarterly, in-person meetings between the EIA Supervisor and the beneficiary's primary caregivers.

8.4. *The allowed cost of services provided by this demonstration on or after October 14, 2008 accrue to the government's maximum fiscal year share of providing benefits in accordance with the TRICARE Policy Manual (TPM) Chapter 9, (except ECHO Home Health Care (EHHC)), of \$36,000.*

9.0. REIMBURSEMENT

9.1. Claims for Demonstration services will be submitted by the ACSP on a Centers for Medicare and Medicaid (CMS) 1500 (08/05) as follows:

9.1.1. Functional Behavioral Assessment and Analysis.

9.1.1.1. During the first month the beneficiary is enrolled in the Demonstration, the ACSP will be authorized and reimbursed by the MCSC for not more than four hours for conducting the initial Functional Behavioral Assessment and Analysis and establishing the initial BP.

9.1.1.2. The Functional Behavioral Assessment and Analysis and initial BP will be invoiced using HCPCS code "S5108, Home care training to home care client, per 15 minutes."

9.1.1.3. Reimbursement for the Functional Behavioral Assessment and Analysis includes the intellectual work and diagnostic evaluation required to establish the initial BP.

9.1.1.4. Reassessment of established Demonstration participants will be conducted as part of the ACSP's routine supervision services and is not separately reimbursable.

9.1.2. EIA Services rendered jointly by an EIA Supervisor and an EIA Tutor, in-person, during directly supervised fieldwork of the Tutor by the Supervisor, will be invoiced using HCPCS code "S5108, Home care training to home care client, per 15 minutes."

9.1.3. EIA services provided directly by an EIA Tutor will be invoiced using HCPCS code "H2019, Therapeutic behavioral services, per 15 minutes."

9.1.4. Development of the required EPR and updated BP will be invoiced using CPT¹ code 99080, "Special reports such as insurance forms, more than the information conveyed in the usual medical communications or standard reporting form."

9.1.5. Conducting the required quarterly progress meetings with the TRICARE beneficiary's caregivers will be invoiced using CPT¹ code 90887, "Interpretation or explanation of results of psychiatric, other medical examinations and procedures, or other accumulated data to family or other responsible person, or advising them how to assist patient."

¹ CPT only © 2006 American Medical Association (or such other date of publication of CPT). All Rights Reserved.

9.2. Reimbursement of claims in accordance with [paragraphs 9.1.1. through 9.1.5.](#) will be the lesser of:

- The CHAMPUS Maximum Allowable Charge (CMAC); or
- \$125 per hour for services provided by the EIA Supervisor and \$50 per hour for services provided by the EIA Tutor; or
- The negotiated rate; or
- The billed charge.

10.0. REQUIRED REPORTS

10.1. MCSCs shall submit the following aggregated reports:

10.1.1. Monthly

10.1.1.1. The number and percent of total participating beneficiaries by sex, age group (18 months-3 years, 4-6 years, 7-10 years, over 10 years), and sponsor's branch of Service.

10.1.1.2. The number of beneficiaries qualifying for the demonstration, by State, who were not receiving EIA services as of the end of that month due to lack of EIA Supervisors or EIA Tutors.

10.1.1.3. The total number of hours of EIA services provided per beneficiary.

10.1.2. Quarterly

10.1.2.1. The number of EIA Supervisors and EIA Tutors, by State.

10.1.2.2. The number of EIA Supervisors with 0-4, 5-9, 10-14, 15-19, and 20 or more EIA Tutors, by State.

10.1.2.3. The number of, and the reasons why beneficiaries seeking participation in the Demonstration do not meet eligibility criteria, by State.

10.1.3. Semi-Annual

10.1.3.1. The name and SSN of the sponsor of each beneficiary who received services under the Demonstration; including the total number of the sponsor's dependents who received or are receiving EIA Services under the Demonstration.

10.1.3.2. Number and percentage of compliance audits, as specified in [paragraph 11.5.](#), that resulted in an outcome of "Fail".

10.2. Report Requirements

10.2.1. Reports of EIA services provided are based on the Date of Service (DOS).

10.2.2. Monthly reporting periods cover the first day of the month through the end of the month.

- The first monthly report covers the period August 1 through August 31, 2008.

10.2.3. Quarterly and semi-annual reporting periods are based on the fiscal year.

- The first quarterly report covers the period July 1 through September 30, 2008.
- The first semi-annual report covers the period March 1 through September 30, 2008.

10.2.4. Reports shall be submitted in Microsoft Excel format by the 15th calendar day of the month following the end of the reporting period via the government's Performance Assessment Tracking (PAT) system.

11.0. ADDITIONAL MCSC RESPONSIBILITIES

The MCSC shall:

11.1. Consider and advise beneficiaries of the availability of community based or funded programs and services, when authorizing Demonstration benefits.

11.2. Maintain all documents related to the Demonstration in accordance with [Chapter 2](#).

11.3. Forward to the "gaining" MCSC all Demonstration related documents within 10 calendar days of being notified that a beneficiary is transferring to a location under the jurisdiction of another MCSC.

11.4. Review the beneficiary's BP prior to authorizing Demonstration services.

NOTE: The Functional Behavioral Assessment and Analysis specified in [paragraph 9.1.1](#) will be authorized by the MCSC prior to development of the BP.

11.5. Conduct annual audits on at least 20% of each ACSP's EIA Tutors for compliance with the requirements specified in [paragraph 5.3](#). Upon determining non-compliance with one or more EIA Tutor qualification requirements, the MCSC will immediately initiate a compliance audit of all EIA Tutors employed by or contracted with that ACSP.

12.0. APPLICABILITY

12.1. This Demonstration is limited to TRICARE beneficiaries who meet the requirements specified in [paragraph 6.0](#).

12.2. This Demonstration is limited to the 50 United States and the District of Columbia.

12.3. All provisions of the ECHO program apply to the Demonstration unless specifically modified by the Federal Register Demonstration Notice (72 FR 68130, December 4, 2007) or by this Section.

13.0. EXCLUSIONS

TRICARE will not cost-share:

13.1. Training of EIA Tutors as specified in [paragraph 5.3.1](#).

13.2. Charges for program development, administrative services, and the assessment required for developing the EPR and updating the BP.

13.3. More than one Enhanced Access to Autism Services Demonstration service provided to the same beneficiary during the same time period, such as is the case of the supervision of the Tutor specified in [paragraph 5.3.2](#).

13.4. Training of parents specified in [paragraph 7.1.4](#).

14.0. EFFECTIVE DATE

This Demonstration is effective for claims for services provided in accordance with this Section on or after March 15, 2008.

