



OFFICE OF THE ASSISTANT SECRETARY OF DEFENSE  
HEALTH AFFAIRS

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TRICARE  
MANAGEMENT ACTIVITY

PCPB

CHANGE 7  
6010.56-M  
JUNE 2, 2009

**PUBLICATIONS SYSTEM CHANGE TRANSMITTAL  
FOR  
TRICARE OPERATIONS MANUAL (TOM)**

The TRICARE Management Activity has authorized the following addition(s)/revision(s) to 6010.56-M, issued February 2008.

**CHANGE TITLE:** EXTENDED CARE HEALTH OPTION (ECHO) CAP FOR CERTAIN BENEFITS

**PAGE CHANGE(S):** See page 2.

**SUMMARY OF CHANGE(S):** This change revises the Government's maximum cost-share for certain ECHO benefits from \$2,500 per month to \$36,000 per fiscal year. This change brings this manual up-to-date with published Change 77 (March 6, 2009) to the August 2002 TRICARE Operations Manual 6010.51-M.

**EFFECTIVE DATE:** October 14, 2008.

**IMPLEMENTATION DATE:** Upon direction of the Contracting Officer.

**This change is made in conjunction with Feb 2008 TPM, Change No. 8.**

*for Cynthia A. DeLongo*

**Reta Michak**  
Chief, Office of Medical Benefits and  
Reimbursement Branch

**ATTACHMENT(S):** 2 PAGES  
**DISTRIBUTION:** 6010.56-M

**CHANGE 7**  
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**REMOVE PAGE(S)**

**CHAPTER 18**

Section 9, pages 9 and 10

**INSERT PAGE(S)**

Section 9, pages 9 and 10

**7.2** The EPR shall include:

**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 CPT<sup>1</sup> 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 CPT<sup>1</sup> 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."

**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

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