

## Applied Behavioral Analysis

Also known as	<div><div></div><div><div>1. ABA</div><div>2. Early Intensive Developmental and Behavioral Intervention (EIDBI)</div><div>3. Intensive Behavioral Intervention (IBI)</div><div>4. Intensive Early Intervention Behavior Therapy Services (IEIBTS)</div><div>5. Lovaas</div></div></div>						
Description	<p>This treatment program uses time-intensive behavioral techniques to treat children with autism spectrum disorders. Reinforcement is used to elicit or control certain behaviors. It involves teaching nonverbal and verbal imitation skills, reducing aggressive and self-stimulatory behavior, promoting appropriate toy play, and teaching expressive and abstract language.</p>						
See also	<p>Similar, related, or easily confused documents.</p> <div><div></div><div><div><div>• <a href="#">Auditory Integration Training</a> - A program to treat hearing distortions, hyper-acute hearing, and sensory processing anomalies.</div><div>• <a href="#">Pervasive Developmental Disorder (PDD) Evaluation and Treatment</a> -Pervasive developmental disorders refers to a group of five disorders characterized by developmental delays of multiple basic functions.</div><div>• <a href="#">Sensory Integration Therapy</a> - Uses sensation with motor activity.</div></div></div></div>						
Table of Contents	<p>The following topics are included in this document:</p> <div><div></div><div><div><div>• <a href="#">Commercial</a></div><div>• <a href="#">Government Programs</a></div><div>• <a href="#">Individual and Family Business (IFB)</a></div></div></div></div>						
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Commercial

Introduction	<p>This section applies to all Commercial members. Benefit details depend on the member’s brand: Dean (including Dean Health Plan (DHP) and Prevea360), Mayo Medical Plan (MMP), or Medica (including MHPS).</p>						
Dean (DHP, Prevea360)	<p>Quote autism spectrum disorder intensive benefits.</p> <ul style="list-style-type: none"><li>• <b>Limits:</b> Check plan for benefit or visit limits.</li><li>• See <a href="#">Behavioral Health Services</a> for additional details.</li></ul>						
Mayo Medical Plan (MMP)	<p>Quote autism spectrum disorder benefits.</p> <ul style="list-style-type: none"><li>• <b>Tip:</b> Benefits are listed under the Behavioral Health - Mental health section.</li><li>• See <a href="#">Behavioral Health Services</a> for additional details.</li></ul>						
Medica (including MHPS)	<p>This is a behavioral health service.</p> <ul style="list-style-type: none"><li>• See <a href="#">Behavioral Health Services</a>.</li><li>• <b>2023 change:</b> Due to <a href="#">2023 CBA Changes</a>, coverage was added with no age or visit limits as groups renewed in 2023.</li></ul>						
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Government Programs

Introduction	This section applies to all Medicaid and Medicare products.						
AccessAbility (SNBC),  Minnesota Senior Care Plus (MSC+)	<p><a href="#">Medicaid only groups</a>:</p> <ul style="list-style-type: none"><li>• See <a href="#">Medicaid</a> below.</li></ul> <p><a href="#">Medicare eligible groups</a>:</p> <ul style="list-style-type: none"><li>• Not covered.</li><li>• Follows Medicare guidelines.</li><li>• Medicare is the primary payer.</li><li>• If no Medicare eligibility, Medicaid applies. See <a href="#">Medicaid</a> below.</li></ul>						
AccessAbility Enhanced (I-SNBC),  DUAL (MSHO)	<p>Not covered.</p> <ul style="list-style-type: none"><li>• Medica is the only payer.</li></ul>						
Cost (Prime)	<p>Not covered.</p> <ul style="list-style-type: none"><li>• Follows Medicare guidelines.</li></ul>						
Med Advantage	<p>Not covered.</p> <ul style="list-style-type: none"><li>• Follows Medicare guidelines.</li><li>• Medica is the only payer.</li></ul>						
Med Supp (Select, Signature)	<p>Not covered.</p> <ul style="list-style-type: none"><li>• Follows Medicare guidelines.</li><li>• Medicare supplement.</li><li>• Medicare is the primary payer.</li></ul>						
Medicaid	<p>Depends on the member’s age.</p> <ul style="list-style-type: none"><li>• <b>Children up to age 21</b>: Covered when meeting medical necessity criteria.<ul style="list-style-type: none"><li>– Services provided by qualified providers identified by the State to children and their families.</li><li>– This is a behavioral health service.</li><li>– See <a href="#">Behavioral Health Services</a>.</li></ul></li><li>• <b>Adults over 21</b>: Excluded from coverage.<ul style="list-style-type: none"><li>– <b>Tip</b>: Other autism spectrum treatments may be covered.</li></ul></li></ul>						
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## Individual and Family Business (IFB)

Introduction	<p>This section applies to all Individual and Family Business (IFB) members. Benefit details depend on the member’s brand: Dean (including Dean Health Plan (DHP), Medica (formerly WellFirst), and Prevea360) or Medica.</p>						
Dean (DHP, Medica formerly WellFirst, Prevea360)	<p>Quote autism spectrum disorder intensive benefits.</p> <ul style="list-style-type: none"><li>• <b>Limits:</b> Check plan for benefit or visit limits.</li><li>• See <a href="#">Behavioral Health Services</a> for additional details.</li></ul>						
Medica	<p>This is a behavioral health service.</p> <ul style="list-style-type: none"><li>• See <a href="#">Behavioral Health Services</a>.</li><li>• <b>2023 change:</b> Effective 1.1.23 coverage was added for all states.</li></ul>						
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