

**CHAPTER 4: APPLIED BEHAVIOR ANALYSIS**

**REVISION HISTORY LOG**

<b>Revised/ Issued Date</b>	<b>Section</b>	<b>Section Title</b>	<b>Number of Page (s)</b>	<b>Reason for Revision</b>
01/20/22	4.1	Covered Services	8	Revisions made to update entire section to alpha numeric formatting.
01/20/22	4.2	Beneficiary Requirements	1	Revisions made to update entire section to alpha numeric formatting.
01/20/22	4.3	Service Authorization Process	2	Revisions made to update entire section to alpha numeric formatting.
01/20/22	4.4	Provider Requirements	4	Revisions made to update entire section to alpha numeric formatting.
01/20/22	Appendix D	Plan of Care Instructions and Form	10	Revisions made to update entire section to alpha numeric formatting.