ISSUED: REPLACED:

CHAPTER 4: APPLIED BEHAVIOR ANALYSIS

REVISION HISTORY LOG

Revised/ Issued Date	Section	Section Title	Number of Page (s)	Reason for Revision
02/01/18		Table of Contents	2	Revisions made to add 4.6 – Coordination of Care and Appendix D - Plan of Care Instructions and Form to document.
02/01/18	4.0	Overview	1	Revisions made to include information for managed care organizations (MCOs).
02/01/18	4.1	Covered Services	9	Revisions made to clarify information concerning assessment and treatment plan development and therapeutic behavioral services.
02/01/18	4.2	Recipient Requirements	1	Technical revisions made to formatting.
02/01/18	4.3	Service Authorization Process	2	Revisions made to clarify information.
02/01/18	4.4	Provider Requirements	2	Revisions made to include new provisions.
02/01/18	4.5	Reimbursement	1	Revisions made to remove obsoleted information and to include new provisions.

LOUISIANA MEDICAID PROGRAM

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02/01/18	4.6	Coordination of Care	1	New section added to include information on coordination of care.
02/01/18	Appendix A	Contact Information	1	Updated to include prior authorization liaison contact information.
02/01/18	Appendix C	Reserved	1	Reserved section after removal of obsoleted claims filing information.