

Applied Behavioral Analysis Therapy

Quick Facts and Information for Granite Staters



Quick facts on Applied Behavioral Analysis Therapy:

What is Applied Behavioral Analysis Therapy (ABA)?

ABA is a suite of professional services and treatment programs designed to help people with mental health disorders, like autism. The goal of ABA is to improve basic skills, including social behaviors, and to prevent the loss of learned skills, like writing or other motor skills.

Who does ABA apply to?

ABA is designed to help people who have:

- Pervasive developmental disorders:** These disorders are characterized by delays in the development of socialization and communication skills.
- Autism spectrum disorders:** These disorders are a range of conditions that include challenges with social skills, repetitive behaviors, and difficulties with speech and nonverbal communication.

What are my rights?

- Good news! **The law requires most health insurance plans to cover mental health services**—and that includes ABA.
- If your health insurance plan does cover mental health service, you have additional protections. **The law requires that the mental health benefits in your plan are just as comprehensive as your medical/surgical benefits.**
- Insurance companies are not allowed to deny you coverage**, if you or someone covered by your plan requires “habilitative services”—or services that help people with disabilities gain mental or physical skills.



What types of treatments for pervasive developmental disorders or autism are typically covered by insurance plans?

- Applied Behavior Analysis (ABA)**
- Prescription medications**
- Services provided by a licensed professional, including psychiatrists, advanced practice registered nurses, psychologists, or licensed clinical social workers**
- Speech therapy**
- Occupational therapy**
- Physical therapy**

Make sure you contact your insurance company to find out more about the mental health treatments covered by your plan.

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Do I need to submit a treatment plan to my insurance company?



Your insurance company may require your physician to submit a treatment plan that includes:

- Frequency and duration of the treatment
- An indication that the treatment is medically necessary
- A signature from the primary care provider and a licensed/credentialed specialist

Make sure you check with your insurance company to find out what is required.



I have more questions. *Who can help me?*

CONTACT YOUR HEALTH INSURANCE COMPANY.

You'll find their phone number on the back of your insurance card or visit their website.

CONTACT THE NH INSURANCE DEPARTMENT CONSUMER SERVICES DEPARTMENT.

- (603) 271-2261
- (800) 852-3416
- (800) 735-2964 (TTY/RDD Relay Services)
- consumerservices@ins.nh.gov
- www.NH.gov/insurance

This document is for informational purposes only. While the New Hampshire Insurance Department has made every effort to provide accurate information, some information has been generalized. Please contact your health insurance company to obtain specific information about your policy.