

To: PCPs & Psychologists
From: IEHP – BH
Date: December 18, 2025
Subject: **New: Behavioral Health Treatment (BHT) Request Form Requirement**

The following update has been made to the **Behavioral Health Treatment (BHT) Request Form**:

BHT Referral Form

a. Per APL 23-010, initial requests for ABA therapy must be from a licensed physician, surgeon, or psychologist. If the requesting Provider is not qualified, **ABA therapy** will not appear as an option.

Ex: (PCP, but not an LCSW)

b-c. Referral Request > Behavioral Health >
 Service Requested > ABA therapy

Service Requested

- BH Psychotherapy
- BH Medication Consult
- BH Medication Consult & Treatment
- Evaluation for Need for BH Neuro/Psychological Testing
- BH Neuro/Psychological Testing
- BH Evaluation for Suspected Autism Spectrum Disorder
- B** Behavioral Health Treatment for Individuals With Special Developmental and Behavioral Needs (0-21)
 - C** **ABA Therapy**
 - Occupational Therapy (only for confirmed ASD Diagnosis)
 - Other
 - Physical Therapy (only for confirmed ASD Diagnosis)
 - Speech Therapy (only for confirmed ASD Diagnosis)

d. Initial requests will auto-populate with the CPT code H0031 with 40 units and without the option to add a modifier.

CPT Codes

* **CPT 1:** H0031

* **Qty:(numeric only)** 40

Helpful Reminders:

- Service Priority to be Standard Pre-Service.
- Next appointment date is not a required field.
- “None” can be chosen as the second ICD code.

If you have any questions, please contact the IEHP Provider Call Center at (909) 890-2054, (866) 223-4347 or email ProviderServices@iehp.org

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