

Insurance Resource Center for Autism & Behavioral Health



Eunice Kennedy Shriver Center

Insurance Resource Center for Autism and Behavioral Health

 @IRCABH
 774-455-4056

 www.massairc.org
 airc@umassmed.edu



Cropped shot of a group of unrecognizable people holding hands

Accessing Applied Behavior Analysis (ABA) after Early Intervention A Guide for Families and Providers

Overview

Early Intervention (EI) covers a range of services and supports for children up to age 3. For many children with autism and/or Down syndrome, one of the EI services they access is Applied Behavior Analysis, or ABA therapy. After a child turns 3, EI services end, but many families wish to continue ABA therapy. In most cases, insurance coverage is available for ABA therapy. However, there are several things that families will want to do before the child turns 3 to ensure the services continue. It can take six months or longer to complete all of them, so it's important to start as soon as possible.

Below are the four actions we recommend, follow by more detailed information about each one.

1. Verify that your child has coverage for ABA in your insurance plan.
2. Confirm with current providers that they can continue providing services after your child turns 3 or seek new providers.
3. Make sure your child's diagnostic information meets your insurer's medical necessity criteria, and/or obtain additional diagnostic evaluations.
4. For families with private insurance, understand your co-insurance obligations, (deductibles, co-pays, etc.) and consider applying for MassHealth secondary insurance to help cover these costs.



Boy puts colorful coins in order during ABA

Verify Coverage

People have many different types of health insurance. The coverage available under your plan depends on the type of insurance you have. It is important to understand the type of insurance you have, and what your insurance covers.

Below is a general overview of the various types of health insurance a person may have:

- **Public** – This is insurance coverage through MassHealth (Massachusetts Medicaid Program), or Medicare. There are many different types of MassHealth coverage. Eligibility for MassHealth, and the type of MassHealth, is determined by several factors, including income, age, and special circumstances (including having a disability). A person must be a Massachusetts resident to be eligible for MassHealth. U.S. citizenship is not required, but immigration status is a factor in determining what type of MassHealth a person is assigned. People with disabilities are usually eligible for MassHealth regardless of income, but they may be charged a premium if the household income is above a certain level. A person may be eligible for MassHealth, even if they have other insurance.
- **Private** – Most private employers offer health insurance to their employees. These generally fall into two types: “fully funded”, and “self-funded”. Coverage for Autism and Behavioral Health Treatments can differ, depending on which type of plan you have:
 - Fully Funded - An employer may purchase health insurance from an insurance company on behalf of its employees. Under this arrangement, the insurance company is directly responsible for covering the health care costs of the employee (and the employee’s family, in the case of family coverage). This is referred to as a “**fully funded**” plan (sometimes called a “fully insured” plan). Fully funded plans from Massachusetts insurers are regulated under Massachusetts law and include coverage for ABA.
 - Self-Funded - An employer (usually a large employer) may pay directly for its employees’ health care costs, rather than buying policies from an insurance company. This is referred to as a “**self-funded**” plan. Self-funded plans are subject to federal laws, but not to state laws requiring coverage for ABA. Although these plans are not required to cover ABA, most of them do include some coverage for autism treatments, including ABA.

Which type of plan you have may not be immediately obvious. For example, employees with fully funded and self-funded plans can have identical looking insurance cards (i.e., a BlueCross card, with the same co-pays, deductibles, etc.).

- **Other types of private plans:**

- Massachusetts state employees, and some municipal employees, receive their private insurance through the Group Insurance Commission (GIC). GIC plans are self-funded and include coverage for ABA.
- The Massachusetts Health Connector sells many types of plans. All plans include behavioral health services, but the type of coverage may vary depending on the specifics of the plan.
- “Direct Buy” plans. These are plans that an individual purchases directly from an insurer.
- Tri-Care – Insurance for enlisted reservist and retired members of the military and their families.

Where do I start?

1. Determine what type of coverage you have. Contact the Insurance Resource Center if you need assistance understanding your insurance.
2. Make a list of the autism and/or behavioral treatments you need. Insurance only covers treatments considered to be “medically necessary.” A person may need additional services and supports that are not covered by any insurance.
3. Figure out if your insurance covers the treatment you need. Review your plan summary of benefits or call your insurer for coverage details or questions.
4. If the treatment is covered, determine what your out-of-pocket costs are (deductibles, co-pays, etc.). These can vary a great deal, from zero out-of-pocket cost to thousands of dollars. Note that most policies also have an “out of pocket maximum” cost (OOPM). Once the OOPM cost is met, there are usually no additional co-pays, etc. for the rest of the year.
5. If you have private insurance, and it either doesn’t cover the treatments you need or you want assistance with the out-of-pocket costs, you may want to consider applying for MassHealth CommonHealth as secondary insurance.

Confirm with current providers that they can continue providing services after your child turns 3.

Speak with your child’s providers. Confirm that they can continue providing services, that they accept your insurance, that they have staff available during the times that your child needs services. Your child’s direct therapists and even their immediate supervisors may not be able to clarify this, especially if the provider is a larger organization. Find out who you need to contact and reach out to them. Your Early Intervention team may be helpful in connecting you with the right people at the ABA agency and help confirm this information.

If you want or need to find a new provider, start the process as early as possible, as many providers have long wait lists. Consult the IRC’s Fact Sheet on [Finding an ABA Provider](#) for more information.

Make sure your child’s diagnostic information meets your insurer’s medical necessity criteria.

Even if your insurance is covering ABA through early intervention, the requirements for documenting an autism diagnosis change after early intervention. It is important to make sure that you have the required diagnostic information. If additional testing or documentation is needed, determine what is necessary, and obtain it prior to seeking authorizations. More information can be found on the IRC’s Fact Sheet on [Diagnosing Autism](#).

Note – Families are sometimes told by ABA providers that their insurance requires a full neuropsychological exam, or specific autism testing, such as an ADOS, in order to access ABA after age 3. This is not true. Reach out to the Insurance Resource Center if you need more information or assistance.



Smiling toddler reaching for blocks

If you have Private Insurance, figure out what your coinsurance payments will be and consider applying for MassHealth to help cover these costs.

Early intervention services are provided at no cost for families, regardless of insurance. After a child turns 3, families with private insurance are responsible for coinsurance which may include deductibles, copays and other forms of cost sharing. These can vary dramatically depending on a person's specific policy. In some cases, these costs can be very large, which can create hardships and/or preclude access. It is important to understand what your specific costs will be, and whether obtaining secondary coverage will be helpful. The Insurance Resource Center can help provide additional guidance and support. See Fact Sheet – [Getting Help Covering Co-Pays, Deductibles, and Other Co-Insurance](#).

General Advice

- Start early.
- Figure out where you may need assistance
- Work with your early intervention team and other clinicians.
- Reach out to the IRC for guidance
 - Phone: 774-455-4056
 - Email: airc@umassmed.edu

Scan the QR Code to view this fact sheet online



For further information and assistance, please contact the IRC at 774-455-4056 or email airc@umassmed.edu. This fact sheet and other important information is available at our website, www.massairc.org.

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