

Rate Hearing: Maternal Fetal Medicine Radiological Services, Applied Behavior Analysis Services, Dental Reimbursement, and Rural Hospitals, Effective 9/1/25



July 22, 2025

Summary:

HHSC conducted a public hearing on July 22, 2025 to present and receive feedback on proposed Medicaid payment rate changes for Maternal Fetal Medicine Radiological Services, Applied Behavior Analysis Services, and Dental Reimbursement. The hearing also incorporated Rural Hospital Inpatient Rates, Rural Hospital Outpatient Rates, and Rural Hospital OB-GYN Standard Dollar Amount (SDA) add-on. The new rates will take effect September 1, 2025.

The proposed payment rates were calculated in accordance with Title 1 of the Texas Administrative Code: Section 355.8085 – Reimbursement Methodology for Physicians and Other Practitioners; Section 355.8097 – Reimbursement Methodology for Physical, Occupational, and Speech Therapy Services; and Section 355.8441 – Reimbursement Methodologies for Early and Periodic Screening, Diagnosis, and Treatment (EPSDT) Services [known in Texas as Texas Health Steps].

Maternal Fetal Medicine Radiological Services, Applied Behavior Analysis Services, Dental Reimbursement: [Agenda](#) and [Rate Packet](#).

Rural Hospital Inpatient Rates, Rural Hospital Outpatient Rates, and Rural Hospital OB-GYN Standard Dollar Amount (SDA) add-on: [Agenda](#) and [Rate Packet](#).

Key Takeaways:

- **Applied Behavior Analysis (ABA):** Testimony stated that ABA medicaid rate changed from \$13/hr to \$14.50/hr for CPT code 97153, 97151, 97155, and 97156. Several testimonies stated that this rate is still far from sufficient, with ideal CPT code 97153 rates being in the ballpark of \$16.41—the 2025 national average.
 - HHSC is preparing for an upcoming ABA rate analysis.
 - Autism Speaks collected 400 surveys and found that 88% of clients encountered obstacles while setting up services, with 35% reporting that it took over a year to set up services.
- **Dental Anesthesia:**
 - **Rates Reduced After March Increase:** 3/1/25 saw Texas raise the reimbursement rates to the national average. Texas will be reverting back to the old reimbursement rates on 9/1/25, which providers claim are not financially sustainable.
 - **State Costs:** HHSC recently approved code G0330 at \$1377, “a facility fee designed to incentivize ambulatory surgery centers and hospitals to provide more access to dental care for children who cannot sit for treatment in the traditional dental setting.” Each child treated in these facilities costs the state \$1000.
 - Reducing access to dental anesthesia will result in more children being treated in ERs and ambulatory surgical centers.
 - Anesthesiologists can only bill two codes—D9222 and D9223.
- One testimony stated that the Maternal Fetal Medicine Radiological Services, Applied Behavior Analysis Services, and Dental Reimbursement [rate packet](#) does not clearly show whether Rider 39 funds were clearly applied.
- No testimonies were received on Maternal Fetal Medicine Radiology, Rural Hospital Inpatient and Outpatient Rates, or the Rural OB-GYN SDA add-on.

Comments on Proposed Rates

Applied Behavior Analysis Services

- **Dr. Bryan Davey, Action Behavior Centers (Largest ABA provider in Texas, serving over 6,000 patients at over 215 centers)**

- ABA medicaid rate changed from \$13 to \$14.50 for CPT code 97153. Still 50% less than average commercial rate and 36% less than average Medicaid rate across the country.
- Reimbursement rate would ideally need to approach \$22.
- Most providers in the state will probably be unwilling to enter the ABA Medicaid space at the current rate.
- HHSC is preparing for an upcoming ABA rate analysis. Action Behavior Centers seeks to partner with them for this.
- **Ana Sharillo, Empower Behavioral Health (over 100 Medicaid families, 23 clinics)**
 - “We deeply appreciate that you all went beyond the legislative directive of not only increasing the rate for CPT code 97153, but proactively raising the rates for 97151, 97155, and 97156.”
 - Often not able to meet the high demand from patients around the state.
 - Administrative burdens, costs and lengthy credentialing “make it financially unsustainable to expand or even maintain Medicaid services, even with the proposed rate increases.”
 - \$14.50 is 13% lower than the national average for CPT code 97153—\$16.41. Missouri offers \$16.37.
- **Maribel Fernandez, Council of Autism Service Providers (over 20,000 ABA clients)**
 - Over 90% of Texas members haven’t been able to join the Texas Medicaid network.
 - Suggested CPT code 97153 increase to \$16.37 (Missouri rate, which was previously used as a benchmark) or \$16.41 (2025 national average).
 - “There are approximately 5,000 licensed behavior analysts that contract or credential with commercial payers and Tricare across the state, and yet there are less than 1,500 licensed behavior analysts that participate in the Medicaid networks.”
- **Saleem Alinur, Behavioral Innovations**
 - Credentialing often takes 4-6 months.
 - Arizona, Arkansas, Colorado, Oklahoma, Missouri, and Kansas offer higher rates than Texas.
- **Jacquie Benestante, Executive Director of Autism Society of Texas**
 - Can take 2-3 years to access ABA.

- Burdensome administrative challenges, including months-long credentialing processes, delays, and limitations on concurrent billing.
- Without higher rates, kids may miss out on autism services during critical development years.
- **Jennifer Ryan, Registered Behavior Technician, Mother of Autistic Child**
 - Reimbursement ABA rates in Texas are significantly below the national average.
 - Provider networks are shrinking in rural and low-income areas.
 - Parents who are unable to afford insurance are left with no realistic path to treatment.
 - These low rates disproportionately affect low income families
 - HHSC needs to reevaluate the reimbursement rates and implement regular reviews that take into account the cost of inflation.
- **Krista Stevens, Autism Speaks**
 - Lengthy credentialing delays, low reimbursement rates, and administrative burden discourage providers from providing needed care.
 - ABA helps autistic children enter school without additional support, join the workforce, and gain independence.
 - Collected 400 surveys this year:
 - 88% encountered obstacles setting up services.
 - 35% reported that it took over a year to access ABA services.
 - 82% not receiving ABA. 97% of those say it was due to access issues, and 57% of those say they've been working on setting up therapy for a year.

Dental Reimbursement

- **Dr. Thomas Whitmer, Dentist and Anesthesiologist**
 - Young children and people with special needs require dental anesthesia.
 - Medicaid reimburses dental anesthesia using the codes D9222 and D9223.
 - In 2024, Texas ranked in the bottom 25% and 15%, respectively, for these codes.
 - Very concerned—3/1/25 saw Texas raise the reimbursement rates to the national average. Texas will be reverting back to the old reimbursement rates on 9/1/25, which are not financially sustainable.
- **Ryan Wilson, American Anesthesia Providers**

- March first changed D9222 and D9223. These codes may be rolling back to pre-March levels.
- Providers often have to prioritize out-of-pocket and commercial patients. Especially difficult for anxious and special needs patients.
- **Dr. Armin Aliefendic, Texas Dental Association (TDA)**
 - Encourages HHSC to fully implement Rider 39's ~\$146M funding, which:
 - Directs HHSC to restore reimbursement rates for all Medicaid dental procedure codes excluding the unbundled first dental home codes to the February 28, 2025 level.
 - Implements a uniform rate increase for 48 key dental procedure codes supporting the full scope of dental care for Medicaid patients, including diagnostic, radiographic, preventive, restorative, surgical, and supplemental services.
 - Rate packet does not clearly show whether Rider 39 funds were clearly applied.
 - TDA supports the proposed increase for the first dental home program (for children 6-35 months). New total reimbursement of \$145.16 for FH visits is welcome, but further action is needed on sedation and anesthesia reimbursement.
 - The TDA supports aligning rates for codes D9222, D9223, D9230, and D9248 to the 40th percentile of 2025 dental fees.
- **Dr. Tyler Ram, Texas Anesthesia Care (San Antonio)**
 - Negatively impacts those in the state with the highest needs, "particularly in rural areas where hospitals and surgery centers do not have the ability or space to provide care."
- **Dr. Jarom Heaton, Texas Society of Dentist Anesthesiologists**
 - Dental anesthesiologists receive 3 years of formal training and are highest trained in the office space setting. Without their expertise many Texas children would have no access to this treatment.
 - No increase in these rates since 2007. However, operating costs have increased 37% in the last four years.
 - The agency recently approved code G0330 at \$1377, "a facility fee designed to incentivize ambulatory surgery centers and hospitals to provide more access to dental care for children who cannot sit for treatment in the traditional dental setting." Each child treated in these facilities costs the state \$1000.

- Reducing access to this service will result in more children being treated in ERs and ambulatory surgical centers.
- His practice treated 85,000 Medicaid children last year and saved the state about \$8.5 million in facility fees.
- Anesthesiologists can only bill two codes—D9222 and D9223. Proposed allocation would decrease by 60%.
- **Ayham Nahhas, Dentist** in Houston Texas, Medicaid provider for over 10 years
 - The ADA Health Policy Institute lists Medicaid fees for Texas children's dental care at 42.1% of the private dental fees for 2024.
 - Notes 50% inflation since 2007. A 5% increase is insufficient.
 - Requiring metals like gold to be used in crowns is expensive and doesn't make sense.
 - Fees for surgical extractions have been reduced. Shocked at the fee schedule and extremely disappointing and will result in many providers leaving the Medicaid system.

Did Not Receive Comments

- Maternal Fetal Medicine Radiological Services
- Rural Hospital Inpatient Rates
- Rural Hospital Outpatient Rates
- Rural Hospital OB-GYN Standard Dollar Amount (SDA) add-on