Autism Council Behavioral Treatment Benefit Utilization Report

Note: Medicaid providers have up to 365 days from the date of service to submit claims

*must type in data for each Qtr's column	1st Qtr 1/1/22 - 3/31/22	2nd Qtr 4/1/22 - 6/30/22	% difference 1st and 2nd Qtr	3rd Qtr 7/1/22 - 9/30/22	% difference
Members received treatment at Focused Level	392	420	7.14%	398	-0%
Members received treatment at Comprehensive Level	1,306	1,411	8.04%	1,474	4.46%
Total members who received at least one service within BT benefit	2,685	2,390	-0%	2,622	9.71%
Sum of hours of Focused BT provided	42,603	43,301	1.64%	43,269	-0%
Sum of hours of Comprehensive BT provided	252,375	261,329	3.55%	270,051	3.34%