

Network Notification

Date: March 11, 2011 Number: OH-P-2011-09a

To: Ohio Providers

From: CareSource

Subject: Therapy Billing - Revised

Effective Date: 3/1/2011

Modifiers:

• GN = Services delivered under an outpatient speech language pathology plan of care

• GO = Services delivered under an outpatient occupational therapy plan of care

• GP = Services delivered under an outpatient physical therapy plan of care

Description:

This document will outline the reimbursement and limits for PT/OT/ST based on product type.

Policy:

These codes are <u>always considered therapy services</u>, regardless of the provider type that performs them. These codes always require therapy modifiers (GP, GO, GN).

Codes that Require Therapy Modifiers GP, GO, GN

CPT/HCPCS						
92506	92507	92508	92526	92597		
92605	92606	92607	92608	92609		
96125	97001	97002	97003	97004		
97010	97012	97016	97018	97022		
97024	97026	97028	97032	97033		
97034	97035	97036	97039	97110		
97112	97113	97116	97124	97139		
97140	97150	97530	97533	97535		
97537	97750	97755	97760	97761		
97762	97799	G0281	G0283	G0329		

These HCPCS/CPT codes sometimes represent therapy services. However, when performed by therapists, these codes always represent therapy services and require the use of the therapy modifiers.

CPT/HCPCS						
64550	90901	92520	92610	92611		
92612	92614	92616	95831	95832		
95833	95834	95851	95852	96105		
96110	96111	97532	97597	97598		
97602	97605	97606	0019T	0183T		

Benefit Limitations for 2011

- Ohio Medicaid (CFC, ABD)
 - Physical Therapy 30 visits per calendar year
 - Occupational Therapy 30 visits per calendar year
 - Speech Therapy 30 visits per calendar year
- Children's Buy-In (CBI)
 - Physical Therapy 20 visits per calendar year
 - Occupational Therapy 20 visits per calendar year
 - Speech Therapy 20 visits per calendar year
- CareSource Advantage (SNP)
 - Physical Therapy 20 visits per calendar year
 - Occupational Therapy 20 visits per calendar year
 - Speech Therapy 20 visits per calendar year