

Physical Medicine and Rehabilitation Benefits to Change for the CSHCN Services Program

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Effective for dates of service on or after August 1, 2009, benefit criteria for physical medicine and rehabilitation will change for the Children with Special Health Care Needs (CSHCN) Services Program.

To be considered for reimbursement, claims must identify the specific therapy type, i.e., claims for physical therapy services must include modifier GP; and claims for occupational therapy services must include modifier GO.

The following procedure codes may be reimbursed in 15-minute increments for a maximum of 4 units (1 hour) per day, per therapy type, and a combined maximum of 2 hours of therapy per day:

Procedure Codes				
1-92526	1-97032	1-97033	1-97034	1-97035
1-97036	1-97039	1-97110	1-97112	1-97113
1-97116	1-97124	1-97139	1-97140	1-97530
1-97535	1-97537	1-97542	1-97750	1-97755
1-97760	1-97761	1-97762	1-97799	1-S8990

The following procedure codes are not payable in 15-minute increments and will be limited to a quantity of one per day:

Procedure Codes				
1-97012	1-97016	1-97018	1-97022	1-97024
1-97026	1-97028			

In addition to the current payable provider types, procedure codes 1-92526, 1-97535, and 1-97537 will also be payable for the following provider types in the designated places of service for dates of service on or after August 1, 2009:

Procedure Code	Place of Service	Provider Type
1-92526	Office, home, outpatient hospital	Physical therapist, occupational therapist
1-97535	Office	Physical therapist, occupational therapist
1-97535	Home	Physical therapist
1-97535	Outpatient hospital	Physician, physical therapist, occupational therapist

Procedure Code	Place of Service	Provider Type
1-97537	Outpatient hospital	Physician, physical therapist, occupational therapist

Physical therapy and occupational therapy evaluations and re-evaluations are comprehensive procedure codes.

- Physical therapy treatment procedure codes will be denied when billed by any physical therapy provider on the same date of service as a physical therapy evaluation (procedure code 1-97001) or re-evaluation (procedure code 1-97002).
- Occupational therapy treatment procedure codes will be denied when billed by any occupational therapy provider on the same date of service as an occupational therapy evaluation (procedure code 1-97003) or re-evaluation (procedure code 1-97004).

Procedure codes 1-97001 and 1-97003 are limited to once every 6 months. Procedure codes 1-97002 and 1-97004 are limited to once per month. Services exceeding these limitations may be considered on appeal with supporting medical documentation that a comprehensive evaluation and assessment was provided by a different provider.

Authorization Requirements

Providers must submit requests for authorization for therapy services with modifier GP for physical therapy or GO for occupational therapy.

A CSHCN Services Program Authorization Request for Initial Outpatient Therapy (TP1) or a CSHCN Services Program Authorization Request for Extension of Outpatient Therapy (TP2) must be submitted prior to the start of care for the current episode of therapy. The following documentation must be submitted with the TP1 or TP2:

- The most recent evaluation and treatment plan including:
 - Documented age of the client
 - Diagnosis
 - Description of specific therapy being prescribed
 - Specific treatment goals
 - Anticipated measurable progress toward goals
 - Duration and frequency of therapy
 - Requested dates of service

Note: *New requests for additional therapy must include documentation of all progress made from the beginning of the previous treatment period.*

- Current physician's prescription, i.e., a prescription that has been signed and dated within 60 days before the start of therapy. A prescription is valid for 6 months.
- A copy of the client's individualized education program (IEP) if the client is school age or a statement from the client's school stating the client is not eligible for therapy services from the school district

In addition to the services described above, physical and occupational therapy became a benefit through home health on May 1, 2009. Information about physical and occupational therapy provided as home health services is currently available on the this website and will be published in the August 2009 *CSHCN Services Program Provider Bulletin*, No. 71.