# **Payment Policy |** Physical and Occupational Services



**EFFECTIVE DATE:**01|01|2015 **POLICY LAST UPDATED:** 10|03|2017

# **OVERVIEW**

Physical therapy (PT) is the treatment of disease or injury by the use of therapeutic exercise and other interventions that focus on improving posture, locomotion, strength, endurance, balance, coordination, joint mobility, flexibility, a person's ability to go through the functional activities of daily living, and on alleviating pain. Occupational therapy (OT) is a form of rehabilitation therapy involving the treatment of neuromusculoskeletal and psychological dysfunction through the use of specific tasks or goal-directed activities designed to improve the functional performance of an individual. This policy provides an overview of the medical criteria used in the medical review for these services.

Note: this policy also includes the osteopathic manipulative treatment (OMT) codes

MEDICAL CRITERIA

None

# **PRIOR AUTHORIZATION**

Not applicable

# **POLICY STATEMENT**

# BlueCHiP for Medicare and Commercial Products

Physical therapy and occupational services are considered medically necessary when performed to meet the functional needs of a patient who suffers from physical impairment due to disease, trauma, congenital anomalies, or prior therapeutic intervention.

# COVERAGE

Benefits may vary between groups/contracts. Please refer to the appropriate Subscriber Agreement for applicable physical and occupation benefits/coverage.

# BACKGROUND

**Effective January 1, 2014**, Qualified Health Plans (QHPs) are required to cover Essential Health Benefits (EHBs), as defined in Section 1302(b) of the Patient Protection and Affordable Care Act.

As groups

renew in 2014, most benefit plans will need to include these EHBs (some exceptions may apply to certain large groups; consult your Subscriber Agreement or Benefit Booklet for details).

Physical and occupational services are included in the Rhode Island Benchmark Plan that defines the EHBs for RI QHPs.

Physical therapy is the treatment of disease or injury by the use of therapeutic exercise and other interventions that focus on improving posture, locomotion, strength, endurance, balance, coordination, joint mobility, flexibility, a person's ability to go through the functional activities of daily living, and on alleviating pain.

Treatment may include active and passive modalities using a variety of means and techniques based upon biomechanical and neurophysiological principles.

Occupational therapy is a form of rehabilitation therapy involving the treatment of neuromusculoskeletal and psychological dysfunction through the use of specific tasks or goal-directed activities designed to improve the functional performance of an individual.

Occupational therapy involves cognitive, perceptual, safety, and judgment evaluations and training. These services emphasize useful and purposeful activities to improve neuromusculoskeletal functions and to provide training in activities of daily living (ADL). Activities of daily living include feeding, dressing, bathing, and other self-care activities. Other occupational therapy services include the design, fabrication, and use of orthoses, and guidance in the selection and use of adapted equipment.

Qualified providers of PT and OT services may include:

- M.D. (medical doctor)
- D.O. (doctor of osteopathy)
- Physical therapist
- Occupational therapist
- Physical or occupational assistants\*

\*They act at the direction and under the supervision of the treating physical/occupational therapist and in accordance with state laws. They may not provide evaluation services, make clinical judgments or decisions, or take responsibility for the service.

Habilitative services are defined as mean healthcare services that help a person keep, learn, or improve skills and functioning for daily living. A qualified professional provides the healthcare services. Examples include therapy for a child who is not walking or talking at the expected age. These services may include physical and occupational therapy, speech therapy, and other services, performed in a variety of inpatient and/or outpatient settings for people with disabilities.

# Sessions

A physical therapy session is typically defined as up to 1 hour of PT (treatment and/or evaluation) or up to 3 PT modalities provided on any given day. These sessions may include:

- therapeutic exercise programs, including coordination and resistive exercises, to increase strength and endurance;
- various modalities including, but not limited to, thermotherapy, cryotherapy, hydrotherapy, and electrical stimulation; massage, traction, or mobilization techniques; and
- patient and family education in home exercise programs.

An occupational therapy session is typically defined as up to 1 hour of occupational therapy (treatment and/or evaluation) on any given day. These sessions may include services such as:

- basic activities of daily living and self-care training;
- higher level independent living skills instruction;
- functionally oriented upper extremity exercise programs;
- cognitive, perceptual, safety, and judgment evaluations and training;
- upper extremity orthotic and prosthetic programs; and
- training of the patient and family in home exercise programs.

Plan of Care

The documentation in the plan of care for physical and occupations therapy typically includes all of the following:

- specific statements of long- and short-term goals;
- measurable objectives;
- a reasonable estimate of when the goals will be reached; typically an expectation of significant functional improvement within sixty (60) days of the initial therapy visits;
- the specific modalities and exercises to be used in treatment; and
- the frequency and duration of treatment.

The plan of care should be updated as the patient's condition changes.

#### CODING

#### BlueCHiP for Medicare and Commercial Products

The following codes are covered:

**Note:** When any of the CPT below are filed, one of the following modifiers must be appended to the CPT code to distinguish the discipline under which the service is delivered. Claims filed without the required modifier will deny:

GO - Services delivered under an outpatient OT plan of care

**GP** – Services delivered under an outpatient PT plan of care

Providers who file with bill type 032X, 033X, and 034X are exempt from appending the physical, and occupational modifiers, when billing with HCPCS codes for physical and occupational services.

97127 Therapeutic interventions that focus on cognitive function (eg, attention, memory, reasoning, executive function, problem solving, and/or pragmatic functioning) and compensatory strategies to manage the performance of an activity (eg, managing time or schedules, initiating, organizing and sequencing tasks), direct (one-on-one) patient contact (New code effective as of 1/1/2018 replaces deleted code 97532) 97161 Physical therapy evaluation: low complexity 97162 Physical therapy evaluation: moderate complexity **97163** Physical therapy evaluation: high complexity 97164 Re-evaluation of physical therapy (this code is not separately reimbursed) 97165 Occupational therapy evaluation, low complexity **97166** Occupational therapy evaluation, moderate complexity 97167 Occupational therapy evaluation, high complexity 97168 Occupational therapy re-evaluation (this code is not separately reimbursed) 97012 Application of a modality to 1 or more areas; traction, mechanical 97014 Application of a modality to 1 or more areas; electrical stimulation (unattended) 97016 Application of a modality to 1 or more areas; vasopneumatic devices 97018 Application of a modality to 1 or more areas; paraffin bath 97022 Application of a modality to 1 or more areas; whirlpool 97024 Application of a modality to 1 or more areas; diathermy (e.g., microwave) 97026 Application of a modality to 1 or more areas; infrared 97028 Application of a modality to 1 or more areas; ultraviolet 97032 Application of a modality to 1 or more areas; electrical stimulation (manual), each 15 minutes 97033 Application of a modality to 1 or more areas; iontophoresis, each 15 minutes 97034 Application of a modality to 1 or more areas; contrast baths, each 15 minutes 97035 Application of a modality to 1 or more areas; ultrasound, each 15 minutes 97036 Application of a modality to 1 or more areas; Hubbard tank, each 15 minutes 97039 Unlisted modality (specify type and time if constant attendance)

**97110** Therapeutic procedure, 1 or more areas, each 15 minutes; therapeutic exercises to develop strength and endurance, range of motion and flexibility

**97112** Therapeutic procedure, 1 or more areas, each 15 minutes; neuromuscular reeducation of movement, balance, coordination, kinesthetic sense, posture, and/or proprioception for sitting and/or standing activities **97113** Therapeutic procedure, 1 or more areas, each 15 minutes; aquatic therapy with therapeutic exercises

97116 Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)

**97124** Therapeutic procedure, 1 or more areas, each 15 minutes; massage, including effleurage, petrissage and/or tapotement (stroking, compression, percussion)

97139 Unlisted therapeutic procedure (specify)

**97140** Manual therapy techniques (e.g., mobilization/ manipulation, manual lymphatic drainage, manual traction), 1 or more regions, each 15 minutes

**97150** Therapeutic procedure(s), group (2 or more individuals)

**97530** Therapeutic activities, direct (one-on-one) patient contact (use of dynamic activities to improve functional performance), each 15 minutes

**97535** Self-care/home management training (e.g., activities of daily living (ADL) and compensatory training, meal preparation, safety procedures, and instructions in use of assistive technology devices/adaptive equipment) direct one-on-one contact, each 15 minutes

**97537** Community/work reintegration training (e.g., shopping, transportation, money management, avocational activities and/or work environment/modification analysis, work task analysis, use of assistive technology device/adaptive equipment), direct one-on-one contact, each 15 minutes

97542 Wheelchair management (e.g., assessment, fitting, training), each 15 minutes

97545 Work hardening/conditioning; initial 2 hours

97546 Work hardening/conditioning; each additional hour (list separately in addition to code for primary procedure)

97750 Physical performance test or measurement (e.g., musculoskeletal, functional capacity), with written report, each 15 minutes

**97755** Assistive technology assessment (e.g., to restore, augment or compensate for existing function, optimize functional tasks and/or maximize environmental accessibility), direct one-on-one contact, with written report, each 15 minutes

**97760** Orthotic(s) management and training (including assessment and fitting when not otherwise reported), upper extremity(s), lower extremity(s) and/or trunk, each 15 minutes

97761 Prosthetic training, upper and/or lower extremity(s), each 15 minutes

97763 Orthotic(s)/prosthetic(s) management and/or training, upper extremity(ies), lower extremity(ies),

and/or trunk, subsequent orthotic(s)/prosthetic(s) encounter, each 15 minutes (new code effective 1/1/2018 replaces deleted code 97762)

97799 Unlisted physical medicine/rehabilitation service or procedure

**G0515** Development of cognitive skills to improve attention, memory, problem solving (includes compensatory training), direct (one-on-one) patient contact, each 15 minutes (effective 1/1/2018)

# The following codes are not covered

97169 Athletic training evaluation, low complexity

97170 Athletic training evaluation, moderate complexity

97171 Athletic training evaluation, high complexity

97172 Re-evaluation of athletic training evaluation

The following osteopathic manipulative treatment (OMT) codes are covered as part of the members physical and occupation benefits

**Note:** An evaluation and management (E/M) code may be reported separately using modifier 25 IF the patient's condition requires a significant, separately identifiable E/M service above and beyond the usual pre service and post service work associated with the procedure.

98925 Osteopathic manipulative treatment (OMT) 1-2 body regions involved

 Osteopathic manipulative treatment (OMT) 3-4 body regions involved Osteopathic manipulative treatment (OMT) 5-6 body regions involved Osteopathic manipulative treatment (OMT) 7-8 body regions involved Osteopathic manipulative treatment (OMT) 9-10 body regions involved

The following codes were deleted effective 12/31/2017

97532 Development of cognitive skills to improve attention, memory, problem solving (includes compensatory training), direct (one-on-one) patient contact, each 15 minutes97762 Checkout for orthotic/prosthetic use, established patient, each 15 minutes

### **RELATED POLICIES**

Not applicable

#### PUBLISHED

Provider Update, December 2017 Provider Update, February 2017 Provider Update, July 2015 Provider Update, January 2015 Provider Update, February 2014 Provider Update, November 2013

#### REFERENCES

The Guide to Physical Therapist Practice (2nd Edition), Physical Therapy: 2001; 81: 9-744
Final rule http://www.cms.gov/cciio/index.html

#### ----- CLICK THE ENVELOPE ICON BELOW TO SUBMIT COMMENTS

This medical policy is made available to you for informational purposes only. It is not a guarantee of payment or a substitute for your medical judgment in the treatment of your patients. Benefits and eligibility are determined by the member's subscriber agreement or member certificate and/or the employer agreement, and those documents will supersede the provisions of this medical policy. For information on member-specific benefits, call the provider call center. If you provide services to a member which are determined to not be medically necessary (or in some cases medically necessary services which are non-covered benefits), you may not charge the member for the services unless you have informed the member and they have agreed in writing in advance to continue with the treatment at their own expense. Please refer to your participation agreement(s) for the applicable provisions. This policy is current at the time of publication; however, medical practices, technology, and knowledge are constantly changing. BCBSRI reserves the right to review and revise this policy for any reason and at any time, with or without notice. Blue Cross & Blue Shield Association.



500 EXCHANGE STREET, PROVIDENCE, RI 02903-2699 (401) 274-4848 WWW.BCBSRI.COM