TO: Independent Physical Therapy, Independent Occupational Therapy, Rehabilitation Clinics, Outpatient Hospitals and Outpatient Chronic Disease Hospitals


Effective for dates of service retroactive to March 20, 2020 until the Department has notified providers in writing that the state has deemed COVID-19 to no longer to be a public health emergency (the “Temporary Effective Period”), the following PT and OT procedure codes can be rendered via telemedicine (real time live audio and video technology) when clinically appropriate.

Although this PB updates some guidance stated in PB 2020-23 CMAP COVID-19 Response – Bulletin 8: Emergency Temporary Telemedicine Coverage for Physical Therapy, Occupational Therapy & Speech Therapy Services and PB 2020-24 CMAP COVID-19 Response – Bulletin 9 Emergency Temporary Telemedicine Coverage for Specified Therapy Services Rendered at Rehabilitation Clinics, the procedure codes and effective dates listed within those bulletins remain in effect and covered telemedicine services.

**PT AND OT SERVICES PROVIDED IN OUTPATIENT HOSPITALS & OUTPATIENT CHRONIC DISEASE HOSPITALS**

In addition to the codes listed above, outpatient hospitals and chronic disease hospitals may also render procedure code 97750 – physical performance test via telemedicine (real time live audio-video technology). Outpatient hospitals and chronic disease hospitals must continue to follow the Connecticut Medical Assistance Program (CMAP) Addendum B regarding reimbursement for PT and OT services.

The following Revenue Center Codes (RCCs) are eligible for reimbursement when PT or OT are rendered via telemedicine:

- 421 - PT visit
- 424 – PT Evaluation or Re-evaluation
- 431 - OT visit
- 434 – OT Evaluation or Re-evaluation

Outpatient hospitals must continue to append the applicable RCC on the claim, as well as the applicable procedure code(s) that have been approved for telemedicine. PT and OT services continue to be limited to one visit of each type per member, per provider, per day. PT and OT services must continue to be rendered by appropriate licensed staff within
such individuals' applicable scope of practice under state law.

**Please Note:** PT and OT services are paid as an all-inclusive rate to the hospital and professional services cannot be billed separately.


**Accessing the Fee Schedule:**
Updated fee schedules can be accessed and downloaded by going to the Connecticut Medical Assistance (CMAP) Web site: [www.ctdssmap.com](http://www.ctdssmap.com). From this Web page, go to “Provider”, then to “Provider Fee Schedule Download”, then to the applicable fee schedule. To access the CSV file, press the control key while clicking the CSV link, then select “Open”.

**Accessing CMAP Addendum B:**
CMAP’s Addendum B can be accessed via the [www.ctdssmap.com](http://www.ctdssmap.com) Web site by selecting the “Hospital Modernization” Web page. CMAP’s Addendum B (Excel) is located under “Important Messages – Connecticut Hospital Modernization”.

For questions about billing or if further assistance is needed to access the fee schedules on the Connecticut Medical Assistance Program Web site, please contact the Provider Assistance Center, Monday through Friday from 8:00 a.m. to 5:00 p.m. at 1-800-842-8440.

**Posting Instructions:**
Policy transmittals can be downloaded from the Web site at [www.ctdssmap.com](http://www.ctdssmap.com).

**Distribution:**
This policy transmittal is being distributed to providers of the Connecticut Medical Assistance Program by Gainwell Technologies.

**Responsible Unit:**
DSS, Division of Health Services, Medical Policy Section:

For Independent PT/OT, Outpatient Hospitals and Chronic Disease Hospitals, please contact Colleen Johnson, Health Program Assistant, email colleen.johnson@ct.gov.

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