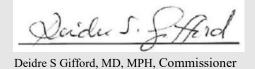


### Connecticut Medical Assistance Program

Policy Transmittal 2020-56

Provider Bulletin 2020-87 December 2020



Effective Date: December 1, 2020 Contact: See Responsible Unit

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

## RE: CMAP COVID-19 Response – Bulletin 44: Updated Telemedicine Guidance for Physical Therapy and Occupational Therapy Services

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.

<b>Procedure Code</b>	Description
97161	Pt eval low complex 20 min
97162	Pt eval mod complex 30 min
97163	Pt eval high complex 45 min
97164	Pt re-eval est plan care
97165	Ot eval low complex 30 min
	Ot eval mod complex 45
97166	min
	Ot eval high complex 60
97167	min
97168	Ot re-eval est plan care
97530	Therapeutic activities
97535	Self-care mngment training
97755	Assistive technology assess
97760	Orthotic mgmt&traing 1st
	enc
97761	Prosthetic traing 1st enc

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.

Providers should also refer to PB 2020-50 CMAP COVID-19 Response — Bulletin 36: Wheelchair Assessments Rendered Via Synchronized Telemedicine by Physical and Occupational Therapists and to PB 2020-46 - CMAP COVID-19 Response — Bulletin 35: Emergency Updated Telemedicine Guidance Pertaining to Customized Wheelchairs for all requirements and guidance pertaining to wheelchair assessments rendered via telemedicine.

#### **Accessing the Fee Schedule:**

Updated fee schedules can be accessed and downloaded by going to the Connecticut Medical Assistance (CMAP) Web site: <a href="https://www.ctdssmap.com">www.ctdssmap.com</a>. 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 <u>www.ctdssmap.com</u> 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.

#### **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 <a href="mailto:colleen.johnson@ct.gov">colleen.johnson@ct.gov</a>.

For Rehabilitation Clinics, please contact Dana Robinson-Rush, Health Program Assistant, email <u>Dana.Robinson-Rush@ct.gov.</u>

Date Issued: December 2020