



**Commonwealth of Massachusetts**  
**Executive Office of Health and Human Services**  
**Office of Medicaid**  
 600 Washington Street  
 Boston, MA 02111  
[www.mass.gov/masshealth](http://www.mass.gov/masshealth)



**MassHealth**  
**Chronic Disease and**  
**Rehabilitation Outpatient**  
**Hospital Bulletin 1**  
**December 2004**

**TO:** Chronic Disease and Rehabilitation Outpatient Hospitals Participating in MassHealth  
**FROM:** Beth Waldman, Medicaid Director *BW*  
**RE:** **New Prior Authorization Policy for Rehabilitation Therapy Services**

**Changes in Policy  
 for Certain Therapy  
 Services**

To simplify the administration of the MassHealth therapy benefit for providers and members, MassHealth is making changes in its policies for physical therapy (PT), occupational therapy (OT), and speech and language therapy (ST) services delivered on an outpatient basis. This bulletin describes these changes, which are effective for dates of service on and after **January 1, 2005**.

**PA Requirements  
 Effective January 1, 2005**

**Increase in Number of Payable Visits Before PA Is Required**  
 MassHealth is increasing the number of medically necessary PT, OT, and ST visits that are payable by MassHealth within a rolling 12-month period before prior authorization (PA) is required. The increase in visits, effective for dates of service on and after January 1, 2005, is shown below.

| <b>Number of Visits Payable by MassHealth within Rolling 12-Month Period Before PA Is Required</b> |                             |
|--|-----------------------------|
| <b>Before 01/01/05</b>   | <b>On or After 01/01/05</b> |
| 8 PT visits  | 20 PT visits                |
| 8 OT visits  | 20 OT visits                |
| 15 ST visits   | 35 ST visits                |

**Therapy Evaluations and Reevaluations**

MassHealth will no longer require PA for comprehensive evaluations or reevaluations, and MassHealth will not count them as part of the therapy visits that are payable without PA within a rolling 12-month period. However, when submitting claims for payment, you must continue to itemize these services with the appropriate HCPCS code and therapy modifier.

Since PA will not be required for evaluation or reevaluation, MassHealth has removed those codes from the list of codes that require PA. (See the attached quick reference guide.)

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### ***How to Request PA***

MassHealth encourages providers to submit their requests for PA through its Web-based Automated Prior Authorization System (APAS) at [www.masshealth-apas.com](http://www.masshealth-apas.com). To receive more information about requesting PA using APAS, including training for and access to APAS, call 1-866-378-3789.

Information about how to request PA on paper can be found in Part 2 of Subchapter 5 of your provider manual.

Whether submitting requests for PA using APAS or on paper, it is important to complete your request properly and attach the necessary documentation, to reduce the possibility of a deferral or denial of your request.

PA requests must include a current prescription, a completed Request and Justification Form for Therapy Services (THP-2), and a copy of a current comprehensive evaluation and treatment plan. See the attached quick reference guide to identify the maximum number of units allowed per visit per modifier. When requesting PA, estimate the amount of time required for each service, and request the number of time units accordingly.

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### ***Counting Visits***

Effective for dates of service on and after January 1, 2005, regardless of how many visits the member has had before January 1, 2005, MassHealth will count the first therapy visit occurring on and after January 1, 2005, as the first visit toward the 20 PT, 20 OT, or 35 ST medically necessary visits that are allowed within a rolling 12-month period without PA.

**Exception:** If a member is receiving PT, OT, or ST under a PA that was issued before January 1, 2005, and the PA expires on or after January 1, 2005, MassHealth will begin counting visits in accordance with the revised policy described in this bulletin after the number of visits approved under the PA have been provided or after the PA expires, whichever comes first.

**Example:** If a member is receiving PT under a PA that was approved by MassHealth on November 15, 2004, and the PA expires on February 15, 2005, the rolling 12-month period for counting therapy visits begins on the date of the first visit after all of the visits approved under that PA have been provided or on the first visit after February 15, 2005, whichever comes first. If this member's next PT visit is February 25, 2005, then the 12-month period in this example begins on February 25, 2005. In this example, MassHealth will pay for a total of 20 medically necessary PT visits between February 25, 2005, and February 24, 2006, without PA.

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***Regulation Changes***

MassHealth is using this bulletin to communicate these revisions as quickly as possible. MassHealth will update its regulations as soon as possible to reflect the PA policy changes detailed in this bulletin.

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***Questions***

If you have any questions about the information in this bulletin, please call MassHealth Provider Services at 617-628-4141 or 1-800-325-5231.

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**Quick Reference Guide for Billing Physical, Occupational, and Speech and Language  
Therapy Services Provided by Chronic Disease and Rehabilitation Outpatient Hospitals**

| Modifier | HCPC Code | PT Revenue Codes   | OT Revenue Codes   | ST Revenue Codes | Max. Units per Visit per Modifier |
|----------|-----------|--------------------|--------------------|------------------|-----------------------------------|
| GN       | 92507     |                    |                    | 440, 441, 449    | 1                                 |
| GN       | 92508     |                    |                    | 443              | 1                                 |
| GN       | 92526     |                    |                    | 440, 441, 444    | 1                                 |
| GP, GO   | 97010     | 420, 421, 423, 429 | 430, 431, 433, 439 |                  | 8                                 |
| GP, GO   | 97012     | 420, 421, 423, 429 | 430, 431, 433, 439 |                  | 8                                 |
| GP, GO   | 97014     | 420, 421, 423, 429 | 430,431,433, 439   |                  | 8                                 |
| GP, GO   | 97016     | 420, 421, 423, 429 | 430,431,433,439    |                  | 8                                 |
| GP, GO   | 97018     | 420, 421, 423, 429 | 430, 431, 433, 439 |                  | 8                                 |
| GP, GO   | 97020     | 420,421,423,429    | 430,431,433,439    |                  | 8                                 |
| GP, GO   | 97022     | 420,421,423,429    | 430,431,433,439    |                  | 8                                 |
| GP, GO   | 97024     | 420,421,423,429    | 430,431,433,439    |                  | 8                                 |
| GP, GO   | 97026     | 420,421,423,429    | 430,431,433,439    |                  | 8                                 |
| GP, GO   | 97028     | 420,421,423,429    | 430,431,433,439    |                  | 8                                 |
| GP, GO   | 97032     | 420,421,423,429    | 430,431,433,439    |                  | 8                                 |
| GP, GO   | 97033     | 420,421,423,429    | 430,431,433,439    |                  | 8                                 |
| GP, GO   | 97034     | 420,421,423,429    | 430,431,433,439    |                  | 8                                 |
| GP, GO   | 97035     | 420,421,423,429    | 430,431,433,439    |                  | 8                                 |
| GP, GO   | 97036     | 420,421,423,429    | 430,431,433,439    |                  | 8                                 |
| GP, GO   | 97039     | 420,421,423,429    | 430,431,433,439    |                  | 8                                 |
| GP, GO   | 97110     | 420,421,423,429    | 430,431,433,439    |                  | 8                                 |
| GP, GO   | 97112     | 420,421,423,429    | 430,431,433,439    |                  | 8                                 |
| GP, GO   | 97113     | 420,421,423,429    | 430,431,433,439    |                  | 8                                 |
| GP, GO   | 97116     | 420,421,423,429    | 430,431,433,439    |                  | 8                                 |
| GP, GO   | 97124     | 420,421,423,429    | 430,431,433,439    |                  | 8                                 |
| GP, GO   | 97139     | 420,421,423,429    | 430,431,433,439    |                  | 8                                 |
| GP, GO   | 97140     | 420,421,423,429    | 430,431,433,439    |                  | 8                                 |
| GP, GO   | 97150     | 423                | 433                |                  | 8                                 |
| GP, GO   | 97504     | 420,421,423,429    | 430,431,433,439    |                  | 8                                 |
| GP, GO   | 97520     | 420,421,423,429    | 430,431,433,439    |                  | 8                                 |
| GP,GO,GN | 97530     | 420,421,423,429    | 430,431,433,439    | 440,441,443,449  | 8                                 |
| GP,GO,GN | 97532     | 420,421,423,429    | 430,431,433,439    | 440,441,443,449  | 8                                 |
| GP,GO,GN | 97533     | 420,421,423,429    | 430,431,433,439    | 440,441,443,449  | 8                                 |
| GP, GO   | 97535     | 420,421,423,429    | 430,431,433,439    |                  | 8                                 |
| GP, GO   | 97542     | 420,421,423,429    | 430,431,433,439    |                  | 8                                 |
| GP, GO   | 97703     | 420,421,423,429    | 430,431,433,439,   |                  | 8                                 |
| GP, GO   | 97750     | 420,421,423,429    | 430,431,433,439    |                  | 8                                 |

**Note:** There is no time limit on HCPCS codes with a maximum unit of one per visit. HCPCS codes with a maximum unit of eight units are based on 15-minute intervals of service.

**Example 1:** A member receives group speech therapy (HCPCS modifier and Service Code 92508GN). The one unit for 92508GN is considered a visit, whether it requires 30 minutes or two hours.

**Example 2:** A member requires an occupational therapeutic procedure 97110GO for 45 minutes (three units) in addition to 30 minutes (two units) of orthotic fitting and training (97504GO). The total number of units (five) for this member is considered one visit.