



Commonwealth of Massachusetts
Executive Office of Health and Human Services
Office of Medicaid
600 Washington Street
Boston, MA 02111
www.mass.gov/masshealth



MassHealth
Outpatient Hospital Bulletin 49
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TO: Outpatient Hospitals and Hospital-Licensed Health Centers Participating in MassHealth
FROM: Beth Waldman, Medicaid Director *BW*
RE: **Correction to Maximum Number of Units Per Day Allowed for Therapy Services for Acute Outpatient Hospitals and Hospital-Licensed Health Centers**

Background

Transmittal Letter OPD-52, dated January 2004, transmitted revised regulations that require outpatient hospitals to obtain prior authorization from MassHealth before providing more than eight physical therapy (PT) visits, eight occupational therapy (OT) visits, and 15 speech/language therapy (ST) visits (including group therapy and evaluation) to a member within a 12-month period. This policy was effective on February 1, 2004 (implementation was later delayed until April 15, 2004, to give providers time to adjust to the thresholds for therapy services before prior authorization is required). (See Outpatient Hospital Bulletin 48.)

Transmittal Letter OPD-52 also provided instructions for billing therapy visits under these new rules. These billing instructions, however, were incorrect for acute outpatient hospitals and hospital-licensed health centers. This bulletin provides corrected information on how to bill for therapy services.

Note: The billing instructions in Transmittal Letter OPD-52 related to chronic outpatient hospitals are correct. This bulletin provides a correction for acute outpatient hospitals and hospital-licensed health centers only.

Corrected Instructions

Acute outpatient hospitals and hospital-licensed health centers should bill therapy services on the UB-92 or its electronic equivalent. Revenue codes and HCPCS codes are required for PT, OT, and ST services.

PT, OT, and ST visits are characterized by a date of service and the number of units billed for that date. A unit is defined as a fifteen-minute interval of service. A visit consists of up to four units per day, per therapy, regardless of the number of modalities or procedures provided. Acute outpatient hospitals and hospital-licensed health centers may bill up to:

- four units per day for PT (which constitutes one visit) with a total of 32 units (eight visits) in a 12-month period before prior authorization is required;

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***Corrected Instructions
(cont.)***

- four units per day for OT (which constitutes one visit) with a total of 32 units (eight visits) in a 12-month period before prior authorization is required; and
 - four units per day for ST (which constitutes one visit) and a total of 60 units (15 visits) in a 12-month period before prior authorization is required.
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Revised Attachment

Transmittal Letter OPD-52 included an attachment that listed the maximum number of units for each revenue code that may be billed per day for therapy services. Please discard the attachment to Transmittal Letter OPD-52, and instead refer to the attachment to this bulletin for determining the maximum number of units per date of service.

Information on Web

This bulletin, Outpatient Hospital Bulletin 48, and Transmittal Letter OPD-52, as well as all other MassHealth bulletins and transmittal letters, are listed on the MassHealth Web site at www.mass.gov/masshealth. Click on "MassHealth Regulations and Other Publications."

To view frequently asked questions about MassHealth's policy on therapy services, go to www.mahealthweb.com, and click on the FAQ button.

Questions

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

Maximum Units Allowed per Day for Therapy Services Provided by Acute Outpatient Hospitals and Hospital-Licensed Health Centers

Note: This chart replaces "Attachment 2" of Transmittal Letter OPD-52, dated January 2004.

Physical Therapy. A maximum of four units per day; four units constitute a visit.

<u>CPT-4</u> <u>Code</u>	<u>Revenue Codes</u>	<u>Max.</u> <u>Units per</u> <u>Day</u>
97001	420, 421, 423, 424, 430, 431, 433, 434, 440, 441, 443, 444	4
97002	420, 421, 423, 424, 430, 431, 433, 434, 440, 441, 443, 444	4
97010	420, 421, 423, 424, 430, 431, 433, 434, 440, 441, 443, 444	4
97012	420, 421, 423, 424, 430, 431, 433, 434, 440, 441, 443, 444	4
97014	420, 421, 423, 424, 430, 431, 433, 434, 440, 441, 443, 444	4
97016	420, 421, 423, 424, 430, 431, 433, 434, 440, 441, 443, 444	4
97018	420, 421, 423, 424, 430, 431, 433, 434, 440, 441, 443, 444	4
97020	420, 421, 423, 424, 430, 431, 433, 434, 440, 441, 443, 444	4
97022	420, 421, 423, 424, 430, 431, 433, 434, 440, 441, 443, 444	4
97024	420, 421, 423, 424, 430, 431, 433, 434, 440, 441, 443, 444	4
97026	420, 421, 423, 424, 430, 431, 433, 434, 440, 441, 443, 444	4
97028	420, 421, 423, 424, 430, 431, 433, 434, 440, 441, 443, 444	4
97032	420, 421, 423, 424, 430, 431, 433, 434, 440, 441, 443, 444	4
97033	420, 421, 423, 424, 430, 431, 433, 434, 440, 441, 443, 444	4
97034	420, 421, 423, 424, 430, 431, 433, 434, 440, 441, 443, 444	4
97035	420, 421, 423, 424, 430, 431, 433, 434, 440, 441, 443, 444	4
97036	420, 421, 423, 424, 430, 431, 433, 434, 440, 441, 443, 444	4
97039	420, 421, 423, 424, 430, 431, 433, 434, 440, 441, 443, 444	4
97110	420, 421, 423, 424, 430, 431, 433, 434, 440, 441, 443, 444	4
97112	420, 421, 423, 424, 430, 431, 433, 434, 440, 441, 443, 444	4
97113	420, 421, 423, 424, 430, 431, 433, 434, 440, 441, 443, 444	4
97116	420, 421, 423, 424, 430, 431, 433, 434, 440, 441, 443, 444	4
97124	420, 421, 423, 424, 430, 431, 433, 434, 440, 441, 443, 444	4
97140	420, 421, 423, 424, 430, 431, 433, 434, 440, 441, 443, 444	4
97150	420, 421, 423, 424, 430, 431, 433, 434, 440, 441, 443, 444	4
97504	420, 421, 423, 424, 430, 431, 433, 434, 440, 441, 443, 444	4

Total maximum allowable units before prior authorization is needed: 32

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Occupational Therapy. A maximum of four units per day; four units constitute a visit.

<u>CPT-4</u>		<u>Max</u>
<u>Code</u>	<u>Revenue Codes</u>	<u>Units per</u>
		<u>Day</u>
97003	420, 421, 423, 424, 430, 431, 433, 434, 440, 441, 443, 444	4
97004	420, 421, 423, 424, 430, 431, 433, 434, 440, 441, 443, 444	4
97520	420, 421, 423, 424, 430, 431, 433, 434, 440, 441, 443, 444	4
97530	420, 421, 423, 424, 430, 431, 433, 434, 440, 441, 443, 444	4
97532	420, 421, 423, 424, 430, 431, 433, 434, 440, 441, 443, 444	4
97533	420, 421, 423, 424, 430, 431, 433, 434, 440, 441, 443, 444	4
97535	420, 421, 423, 424, 430, 431, 433, 434, 440, 441, 443, 444	4
97542	420, 421, 423, 424, 430, 431, 433, 434, 440, 441, 443, 444	4

Total maximum allowable units before prior authorization is needed: 32

Speech/Language Therapy. A maximum of four units per day; four units constitute a visit.

<u>CPT-4</u>		<u>Max.</u>
<u>Code</u>	<u>Revenue Codes</u>	<u>Units per</u>
		<u>Day</u>
92506	420, 421, 423, 424, 430, 431, 433, 434, 440, 441, 443, 444, 470, 471, 472, 479	4
92507	420, 421, 423, 424, 430, 431, 433, 434, 440, 441, 443, 444, 470, 471, 472, 479	4
92508	420, 421, 423, 424, 430, 431, 433, 434, 440, 441, 443, 444, 470, 471, 472, 479	4
92526	420, 421, 423, 424, 430, 431, 433, 434, 440, 441, 443, 444, 470, 471, 472, 479	4

Total maximum allowable units before prior authorization is needed: 60
