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PAYMENT POLICY ID NUMBER 24-082

Original Effective Date: 12/01/2024

Revised: N/A

Physical Therapy Assistant and Occupational Therapy Assistant Services

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DESCRIPTION:

Effective October 01, 2024, services performed by physical therapy assistants (PTAs) and occupational therapy assistants (OTAs) must be reported with modifier CO or CQ.

This policy applies to all professional claims, Comprehensive Outpatient Rehab Facilities (CORF), and Outpatient Rehab Facilities (ORF).

REIMBURSEMENT INFORMATION:

Reimbursement for claims submitted with modifiers CO and CQ for services provided by a physical therapy or occupational therapy assistant will be reduced by 15%. This policy aligns with industry standards, including the Centers for Medicare and Medicaid Services (CMS) National Physician Fee Schedule, which reimburses these services at 85%.

Services performed by PTAs and OTAs are also subject to the multiple procedure reductions (when applicable).

BILLING/CODING INFORMATION:

The following modifiers may be used to describe assistant therapy services:

Modifiers:

Modifier	Description
CQ	Outpatient physical therapy services furnished in whole or in part by a physical therapist assistant.
со	Outpatient occupational therapy services furnished in whole or in part by an occupational therapy assistant.

RELATED PAYMENT POLICIES:

Modifier Reference 10-011 Multiple Therapy Procedure Reduction 10-038

REFERENCES:

- 1. U.S. Government Publishing Office website. Code of Federal Regulations. <u>Title 42, Section</u> <u>484.115. Condition of participation: Personnel qualifications</u>. https://www.govinfo.gov.
- U.S. Government Publishing Office website. Federal Register, Vol. 84, No. 221. Department of Health and Human Services. <u>Final Rule CMS–1715–F</u>. https://www.govinfo.gov.
- 3. U.S. Government Publishing Office website. Federal Register, Vol. 83, No. 226. Department of Health and Human Services. Final Rule CMS–1693–F. https://www.govinfo.gov
- Centers for Medicare & Medicaid Services website. Medicare Benefit Policy Manual. <u>Chapter 15</u> <u>– Covered Medical and Other Health Services</u>. Sections 230.1.C and 230.2.C https://www.cms.gov.
- Centers for Medicare & Medicaid Services website. Medicare Claims Processing Manual. <u>Chapter 5 – Part B Outpatient Rehabilitation and CORF/OPT Services</u>. Section 20.1 – Discipline Specific Outpatient Rehabilitation Modifiers - All Claims. https://www.cms.gov.
- Centers for Medicare & Medicaid Services website. Therapy Services. <u>https://www.cms.gov/medicare/therapy-services/billing-examples-using-cq/co-modifiers-</u> services-furnished-whole-or-part-ptas-and-otas
- 7. Centers for Medicare & Medicaid Services HCPCS Level II and associated publications and services.

GUIDELINE UPDATE INFORMATION:

12/01/2024 New policy established

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