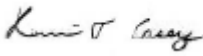
	<h1 style="margin: 0;">MENTAL RETARDATION BULLETIN</h1> <p style="margin: 0;">COMMONWEALTH OF PENNSYLVANIA · DEPARTMENT OF PUBLIC WELFARE</p>	
	Date of Issue: <p style="text-align: center;">August 13, 2003</p>	Effective Date: <p style="text-align: center;">October 16, 2003</p>
SUBJECT: <p>Procedures Codes for Electronic Transfers of Health Care Services</p>		BY: <div style="text-align: center;">  Kevin T. Casey Deputy Secretary for Mental Retardation </div>

SCOPE:

County MH/MR Programs

PURPOSE:

The purpose of this Bulletin is to advise County MH/MR Programs performing electronic payment transactions for waiver and base health care services that the attached procedure codes must be used beginning with the effective date of this Bulletin.

BACKGROUND:

Effective October 16, 2003, all healthcare payors, providers and clearinghouses must use nationally recognized codes and formats to transmit electronic healthcare transactions under the provisions of the Health Insurance Portability and Accountability Act (HIPAA).

DISCUSSION:

The Office of Mental Retardation is aware that counties and their contracted providers need to program their billing systems to account for the crosswalk of the codes currently used to standard codes. The national codes attached to this Bulletin must be used effective October 16, 2003 to be in compliance with HIPAA. Counties that transmit electronic healthcare transactions for base services must use the Office of Medical Assistance Program (OMAP) fee schedule.

County Programs that elect to use PROMISe effective July 1, 2004 will also use the same attached healthcare procedure codes plus additional codes that will be provided in the future for non-health care waiver and base services.

<p>COMMENTS AND QUESTIONS REGARDING THIS BULLETIN SHOULD BE DIRECTED TO:</p> <p>Mel Knowlton Bureau of Quality Improvement and Policy Department of Public Welfare P.O. Box 2675 Harrisburg, PA. 17105-2675 Or by Telephone at 717-783-5764</p>

MR Bulletin 00-02-08, 2000/2001 Utilization, Statistical and Financial Report issued April 30, 2002.

Nursing Service		
OMR Consolidated and PFDS Waivers		
CODE	MODIFIER	SERVICE
96150		Health assessment each 15 minutes face-to-face individual

96151		Re-assessment
96152		Health intervention each 15 minutes face-to-face individual
96154		Family with patient present
T1001		Nursing assessment
T1002		RN 15 minutes
T1003		LPN 15 minutes
T1002	UF (6 Hours)	RN Morning
T1002	UG (6 Hours)	RN Afternoon
T1002	UH (6 Hours)	RN Evening
T1002	UJ (6 Hours)	RN Night
T1003	UF (6Hours)	LPN Morning
T1003	UG (6 Hours)	LPN Afternoon
T1003	UH (6 Hours)	LPN Evening
T1003	UJ (6 Hours)	LPN Night

Nutrition Therapy		
OMR Consolidated and PFDS Waivers		
CODE	MODIFIER	SERVICE
97802		Medical nutrition therapy; initial assessment and intervention, individual, face-to-face with patient, each 15 minutes
97803		Re-assessment and intervention, individual, face-to-face with the patient, each 15 minutes
97804		Group (2 or more individuals (s), each 30 minutes
T1002		RN 15 minutes
T1003		LPN 15 minutes

Occupational Therapy		
OMR Consolidated and PFDS Waivers		
CODE	MODIFIER	SERVICE
97003		Occupational Therapy Evaluation
97004		Occupational Therapy Re-evaluation
92525		Evaluation of swallowing and oral function for feeding
97110		Therapeutic procedure, one or more areas, each 15 minutes; therapeutic exercises to develop strength and endurance, range of motion and flexibility
97530		Therapeutic activities, direct (one-to-one) patient contact by the provider (use of dynamic activities to improve functional performance), each 15 minutes
97532		Development of cognitive skills to improve attention, memory, problem solving, (includes compensatory training), direct (one-to-one) patient contact by the provider, each 15 minutes
97535		Self-care/home management training (e.g., activities of daily living (ADL) and compensatory training, meal preparation, safety procedures, and instructions in use of assistive technology devices/adaptive equipment) direct one-on-one contact by provider, each 15 minutes

Physical Therapy		
OMR Consolidated and PFDS Waivers		
CODE	MODIFIER	SERVICE

97001		Physical therapy evaluation
97002		Physical therapy re-evaluation
97116		Gait training (includes stair climbing)
97504		Orthotic(s) fitting and training, upper extremity(ies), lower extremity(ies), and/or trunk, each 15 minutes
97520		Prosthetic training, upper and/or lower extremities, each 15 minutes
97542		Wheelchair management/propulsion training, each 15 minutes
97780		Physical performance test or measurement (e.g., musculoskeletal, functioning capacity), with written report, each 15 minutes
S5110		Teacher, home care training with family
S5115		Non-family home care training

Speech and Language Service		
OMR Consolidated and PFDS Waivers		
CODE	MODIFIER	SERVICE
92506		Evaluation of speech, language, voice communication, auditory processing, and/or rehabilitation status
92507		Treatment of speech, language, voice, communication, and/or auditory processing disorder (includes aural rehabilitation): individual
92525		Evaluation of swallowing and oral function for feeding
92526		Treatment of swallowing dysfunction and/or oral function for feeding
Audiologic Function Tests With Medical Diagnostic Evaluation		
92551		Screening test, pure tone, air only
92552		Pure tone audiometry (threshold); air only
92553		Air and bone
92555		Speech audiometry threshold
92556		With speech recognition
92557		Comprehensive audiometry treshold evaluation and speech recognition (92553 and 92556 combined) (For hearing aid evaluation and selection, see 92590-92595)
92559		Audiometric testing of groups
92560		Bekesy audiometry; screening
92561		Diagnostic
92562		Loudness balance test, alternat binaural or monaural
92563		Tone decay test
92564		Short increment sensitivity index (SISI)
92565		Stenger test, pure tone
92567		Tympanometry (impedance testing)
92568		Acoustic reflex testing
92569		Acoustic reflex decay test
92571		Filtered speech test
92572		Staggered spondaic word test
92573		Lombard test
92575		Sensorineural acuity level test
92576		Synthetic sentence identification test
92577		Stenger test, speech
92579		Visual reinforcement audiometry
92582		Conditioning play audiometry
92583		Select picture audiometry

92584		Electrocochleography
92585		Auditory evoked potentials for evoked response audiometry and/or testing of the central nervous system comprehensive
92587		Evoked otoacoustic emissions; limited (single stimulus level either transient or distortion products)
92588		Comprehensive or diagnostic evaluation (comparison of transient and/or distortion product otoacoustic emissions at multiple levels and frequencies)
92589		Central auditory function test(s) (Specify)
92590		Hearing aid examination and selection; monaural
92591		Binaural
92592		Hearing aid check; monaural
92593		Binaural
92594		Electroacoustic evaluation for hearing aid; monaural
92595		Binaural
92596		Ear Protector attenuation measurements
92597		Evaluation for use and/or fitting of voice prosthetic or augmentative/alternative communication device to supplement oral speech
92598		Modification of voice prosthetic or augmentative/alternative communication device to supplement oral speech
Other Procedures		
92599		Unlisted otorhinolaryngological service or procedure

Behavior Therapy		
OMR Consolidated and PFDS Waivers		
CODE	MODIFIER	SERVICE
90804		Individual therapy, insight oriented, behavior modifying and/or supportive, in an office or outpatient facility, approximately 20 to 30 minutes face-to-face with the patient
90810		Individual psychotherapy, interactive, using play equipment, physical devices, language interpreter or other mechanisms of non-verbal communication, in an office or outpatient facility, approximately 20 to 30 minutes face-to-face with the patient
90853		Group psychotherapy
90857		Interactive group psychotherapy