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SECTION 4 PROCEDURE CODES

PROCEDURE CODES

The S.C. Medicaid program requires that claims be submitted using the correct procedure code for the service rendered. The following is a list of procedure codes for Local Education Agency Services.

AUDIOLOGICAL SERVICES

Procedure Code	Procedure Code Description	Modifier	Modifier Description	Unit of Service	Frequency
Pure Tone Audiometry					
92552	Pure tone audiometry (threshold); air			One test	6 every 12 months
Audiological Evaluation					
92557	Comprehensive audiometry threshold evaluation and speech recognition (92553 and 92556 combined)			One evaluation	1 every 12 months
92557	Comprehensive audiometry threshold evaluation and speech recognition (92553 and 92556 combined)	52	Reduced services	One evaluation	6 every 12 months
Tympanometry (Impedance Testing)					
92567	Tympanometry (impedance testing)			One test	6 every 12 months
92568	Acoustic reflex testing; threshold			One test	2 every 12 months
Electrocochleography					
92584	Electrocochleography			One procedure	1 per implantation
Hearing Aid Examination and Selection; Monaural					
92590	Hearing aid examination and selection; monaural			One evaluation	6 every 12 months

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Procedure Code	Procedure Code Description	Modifier	Modifier Description	Unit of Service	Frequency
Hearing Aid Check; Monaural					
92592	Hearing aid check; monaural			One analysis	6 every 12 months
92592	Hearing aid check; monaural	52	Reduced services	One analysis	6 every 12 months
Evaluation of Auditory Rehabilitation Status, First Hour					
92626	Evaluation of auditory rehabilitation status, first hour			First hour	10 every 12 months
Fitting/Orientation/Checking of Hearing Aid					
V5011	Fitting/orientation/checking of hearing aid			One orientation	6 every 12 months
Dispensing Fee					
V5090	Dispensing fee, unspecified hearing aid			One fee	6 every 12 months
Ear Impression					
V5275	Ear impression, each (ONE – bill 1 unit)			One ear impression	6 every 12 months
V5275	Ear impression, each (BOTH – bill 2 units)			One ear impression	6 every 12 months

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ORIENTATION AND MOBILITY SERVICES

Procedure Code	Procedure Code Description	Modifier	Modifier Description	Unit of Service	Frequency
Orientation and Mobility Assessment					
T1024	Evaluation and treatment by an integrated specialty team contracted to provide coordinated care to multiple or severely handicapped children, per encounter			15-minute unit	One assessment (up to 8 units)
Orientation and Mobility Reassessment					
T1024	Evaluation and treatment by an integrated specialty team contracted to provide coordinated care to multiple or severely handicapped children, per encounter	TS	Follow-up service	15-minute unit	One reassessment (up to 5 units 3 times per year)
Orientation and Mobility Services					
T1024	Evaluation and treatment by an integrated specialty team contracted to provide coordinated care to multiple or severely handicapped children, per encounter	TM	Individualized Education Program (IEP)	15-minute unit	15 minutes (up to 30 units/week)

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PHYSICAL AND OCCUPATIONAL THERAPY SERVICES

Procedure Code	Procedure Code Description	Modifier	Modifier Description	Unit of Service	Frequency
Physical Therapy Evaluation					
97001	Physical therapy evaluation	GP	Services delivered under an outpatient physical therapy plan of care	One evaluation	2 every 12 months
Individual Physical Therapy					
97110	Therapeutic procedure, one or more areas, each 15 minutes; therapeutic exercises to develop strength and endurance, range of motion and flexibility	GP	Services delivered under an outpatient physical therapy plan of care	15 minutes	4 units per day
Group Physical Therapy					
97150	Therapeutic procedure(s), group (2 or more individuals)	GP	Services delivered under an outpatient physical therapy plan of care	15 minutes	4 units per day
Occupational Therapy Evaluation					
97003	Occupational therapy evaluation	GO	Services delivered under an outpatient occupational therapy plan of care	One evaluation	2 every 12 months
Individual Occupational Therapy					
97530	Therapeutic activities, direct (one-on-one) patient contact by the provider (use of dynamic activities to improve functional performance), each 15 minutes	GO	Services delivered under an outpatient occupational therapy plan of care	15 minutes	4 units per day

SECTION 4 PROCEDURE CODES

PHYSICAL AND OCCUPATIONAL THERAPY SERVICES (CONT'D.)

Procedure Code	Procedure Code Description	Modifier	Modifier Description	Unit of Service	Frequency
Group Occupational Therapy					
97150	Therapeutic procedure(s), group (2 or more individuals)	GO	Services delivered under an outpatient occupational therapy plan of care	15 minutes	4 units per day
<i>NOTE: Payment for this procedure includes both time and cost of material.</i>					
Wrist Hand Finger Orthosis (WHFO)					
L3808	Wrist hand finger orthosis (WHFO), rigid without joints, may include soft interface material; straps, custom fabricated, includes fitting and adjustment			One splint	4 every 12 months
<i>NOTE: Payment for this procedure includes both time and cost of material.</i>					
Fabrication of Orthotic					
L2999	Lower extremity orthoses, not otherwise specified (NOS)			One orthotic	4 every 12 months
L3999	Upper limb orthosis, not otherwise specified (NOS)			One orthotic	4 every 12 months
<i>NOTE: Payment for this procedure includes both time and cost of material.</i>					

SECTION 4 PROCEDURE CODES

SPEECH-LANGUAGE PATHOLOGY SERVICES

Procedure Code	Procedure Code Description	Modifier	Modifier Description	Unit of Service	Frequency
Speech Evaluation					
92506	Evaluation of speech, language, voice, communication, and/or auditory processing	HA	Child/adolescent program	One evaluation	1 per lifetime
S9152	Re-evaluation of speech, language, voice, communication, and/or auditory processing			One evaluation	2 every 12 months
<i>NOTE: Any evaluation performed subsequent to the evaluation conducted as the result of the initial speech disorder is considered a re-evaluation and should be billed under this code.</i>					
Individual Speech Therapy					
92507	Treatment of speech, language, voice, communication, and/or auditory processing disorder; individual			15 minutes	4 units per day
Group Speech Therapy					
92508	Treatment of speech, language, voice, communication, and/or auditory processing disorder; group, two or more individuals			15 minutes	4 units per day

SECTION 4 PROCEDURE CODES

NURSING SERVICES FOR CHILDREN UNDER 21

Procedure Code	Procedure Code Description	Modifier	Modifier Description	Unit of Service	Frequency
T1002	Registered Nurse (RN)			15 minutes	24 units/day
T1003	Licensed Practical Nurse (LPN)			15 minutes	24 units/day
T1015 (RN)	Clinic visit/encounter, all-inclusive	TD	RN Nursing Encounter	<15 minutes	4 encounters/day
T1015 (LPN)	Clinic visit/encounter, all-inclusive	TE	LPN Nursing Encounter	<15 minutes	4 encounters/day

Medication administration taking longer than 15 minutes should be billed under T1002 or T1003. Medicaid does not allow multiple medication administration on the same day to be combined into 15-minute units and billed under procedure code T1015.

The procedure codes T1002, T1003, and T1015 may be billed on the same date of service. However, these services are not reimbursable in addition to other procedure codes which would include a nursing service (e.g., E/M office visit codes, Home Health Skilled Nursing Care codes, DHEC clinic procedures, etc.)

SCHOOL-BASED PSYCHOLOGICAL EVALUATION AND TESTING

Procedure Code	Modifier	Modifier Description	Frequency	Daily Frequency Limits
96101		Certified School Psychologist/ Licensed Psycho-Educational Specialist	60 minutes	6 units per day
<p><i>NOTE: This procedure code has a maximum annual frequency of 20 units per year.</i></p> <p><i>NOTE: This procedure can be billed for 30 minutes of service. (Unit of Service is .5.)</i></p>				

SECTION 4 PROCEDURE CODES

REHABILITATIVE BEHAVIORAL HEALTH SERVICES

Psychological Services

Procedure Code	Modifier	Modifier Description	Frequency	Daily Frequency Limits
96101	AH	Clinical Psychologist/ Licensed Psycho-Educational Specialist	60 minutes	6 units per day\$
<p><i>NOTE: This procedure code has a maximum annual frequency of 20 units per year.</i></p> <p><i>NOTE: This procedure can be billed for 30 minutes of service. (Unit of Service is .5.)</i></p>				

Comprehensive Diagnostic Assessment - Initial

Procedure Code	Modifier	Modifier Description	Frequency	Daily Frequency Limits
H2000	AH	Clinical Psychologist/Licensed Psycho-Educational Specialist	Encounter	1 per every 6 months
	HO	Master's level	"	

Comprehensive Diagnostic Assessment – Follow-up

Procedure Code	Modifier	Modifier Description	Frequency	Daily Frequency Limits
H0031	AH	Clinical Psychologist/ Licensed Psycho-Educational Specialist	Encounter	12 encounters per year
	HO	Master's level	"	

SECTION 4 PROCEDURE CODES

Service Plan Development by Non-physician

Procedure Code	Modifier	Modifier Description	Frequency	Daily Frequency Limits
H0032	AH	Clinical Psychologist/ Licensed Psycho-Educational Specialist	15 minutes	4 units per day
	HO	Master's level	"	
	HN	Bachelor's level	"	
<i>Service Plan Development with Client/Family</i>				
99366			Encounter	6 encounter per 12 months
<i>Service Plan Development without Client/Family</i>				
99367			Encounter	6 encounter per 12 months

Therapy Services

Procedure Code	Modifier	Modifier Description	Unit Frequency	Daily Frequency Limits
90832	AF	Specialty physician (psychiatrist)	30 minutes per session	1 per date of service
	HP	Doctoral level (MD)	30 minutes per session	1 per date of service
	AM	Physician team member svc (PA)	30 minutes per session	1 per date of service
	SA	Nurse practitioner (APRN)	30 minutes per session	1 per date of service
	AH	Clinical Psychologist	30 minutes per session	1 per date of service
	HO	Master's level	30 minutes per session	1 per date of service

SECTION 4 PROCEDURE CODES

Therapy Services (Cont'd.)

Procedure Code	Modifier	Modifier Description	Unit Frequency	Daily Frequency Limits
90834	AF	Specialty physician (psychiatrist)	45 minutes per session	1 per date of service
	HP	Doctoral level (MD)	45 minutes per session	1 per date of service
	AM	Physician team member svc (PA)	45 minutes per session	1 per date of service
	SA	Nurse practitioner (APRN)	45 minutes per session	1 per date of service
	AH	Clinical psychologist	45 minutes per session	1 per date of service
	HO	Master's level	45 minutes per session	1 per date of service
90837	AF	Specialty physician (psychiatrist)	60 minutes per session	1 per date of service
	HP	Doctoral level (MD)	60 minutes per session	1 per date of service
	AM	Physician team member svc (PA)	60 minutes per session	1 per date of service
	SA	Nurse practitioner (APRN)	60 minutes per session	1 per date of service
	AH	Clinical psychologist	60 minutes per session	1 per date of service
	HO	Master's level	60 minutes per session	1 per date of service

As of March 1, 2013, Individual Psychotherapy can be rendered in a variety of combinations, **six** sessions are allowed per month and one session can be billed per day.

SECTION 4 PROCEDURE CODES

Therapy Services (Cont'd.)

Procedure Code	Modifier	Modifier Description	Unit Frequency	Daily Frequency Limits
<i>Group Therapy</i>				
90853	AH	Clinical Psychologist/ Licensed Psycho-Educational Specialist	Encounter	1 per date of service, 8 sessions per month
	HO	Master's level	"	
<i>Family Therapy without Client</i>				
90846	AH	Clinical Psychologist/Licensed Psycho-Educational Specialist	Encounter	1 per date of service, 4 sessions per month
	HO	Master's level	"	
<i>Family Therapy with Client</i>				
90847	AH	Clinical Psychologist/ Licensed Psycho-Educational Specialist	Encounter	1 per date of service, 4 sessions per month
	HO	Master's level	"	

Crisis Management

Procedure Code	Modifier	Modifier Description	Frequency	Daily Frequency Limits
H2011	AH	Clinical Psychologist/ Licensed Psycho-Educational Specialist	15 minutes	16 per day
	HO	Master's level	"	

SECTION 4 PROCEDURE CODES

Crisis Management (Cont'd.)

Procedure Code	Modifier	Modifier Description	Frequency	Daily Frequency Limits
H2011	TD	Registered Nurse	15 minutes	16 per day
	HN	Bachelor's level	"	

Behavioral Health Screening

Procedure Code	Modifier	Modifier Description	Frequency	Daily Frequency Limits
H0002	AH	Clinical Psychologist	15 minutes	2 units per day
	HO	Master's level	"	
	HN	Bachelor's level	"	

Community Support Services

Procedure Code	Modifier	Modifier Description	Frequency	Daily Frequency Limits
<i>Behavior Modification</i>				
H2014	AH	Clinical Psychologist/ Licensed Psycho-Educational Specialist	15 minutes	32 units per day
	HO	Master's level	"	
	TD	Registered Nurse	"	
	HN	Bachelor's level	"	
	HM	Less than Bachelor's level	"	
	TE	Licensed Practical Nurse	"	

SECTION 4 PROCEDURE CODES

Community Support Services (Cont'd.)

Procedure Code	Modifier	Modifier Description	Frequency	Daily Frequency Limits
<i>Rehabilitation Psychosocial Service</i>				
H2017	AH	Clinical Psychologist/ Licensed Psycho-Educational Specialist	15 minutes	64 units per day
	HO	Master's level	"	
	TD	Registered Nurse	"	
	HN	Bachelor's level	"	
	HM	Less than Bachelor's level	"	
	TE	Licensed Practical Nurse	"	
<i>Family Support</i>				
S9482	AH	Clinical Psychologist/ Licensed Psycho-Educational Specialist	15 minutes	32 units per day
	HO	Master's level	"	
	TD	Registered Nurse	"	
	HN	Bachelor's level	"	
	HM	Less than Bachelor's level	"	
	TE	Licensed Practical Nurse	"	

SECTION 4 PROCEDURE CODES

MEDICAID ADOLESCENT PREGNANCY PREVENTION SERVICES (MAPPS)

MAPPS shall be provided in accordance with South Carolina Medicaid guidelines set forth in SCDHHS' Medicaid Enhanced Services Provider Manual and appropriate Medicaid bulletins, which are hereby incorporated for reference.

SPECIAL NEEDS TRANSPORTATION

Procedure Code	Procedure Code Description	Modifier	Modifier Description	Unit of Service	Frequency
T2002	Non-emergency transportation, per diem			Per diem	Daily