Arkansas Department of Health and Human Services

Division of Medical Services

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TO: **Arkansas Medicaid Health Care Providers – Occupational, Physical, Speech Therapy Services**

DATE: **December 5, 2005**

SUBJECT: **Provider Manual Update Transmittal #52**

REMOVE		**INSERT**	
Section	**Date**	**Section**	**Date**
262.110	7-1-05	262.110	12-5-05

Explanation of Updates

This update refers to a previous update regarding a change to a modifier that was anticipated to be effective on July 1, 2005. The previous update informed providers that modifier **52** was being changed to modifier **UB**. This update is being issued to inform providers that there was a delay in implementing the July 1st change, and it informs providers about the new effective date.

Section 262.110: The new **UB** modifier will be effective with claims received on and after *December 5, 2005*.

Paper versions of this update transmittal have updated pages attached to file in your provider manual. See Section I for instructions on updating the paper version of the manual. For electronic versions, these changes will be automatically incorporated.

If you need this material in an alternative format, such as large print, please contact our Americans with Disabilities Act Coordinator at (501) 682-6789 or 1-877-708-8191. Both telephone numbers are voice and TDD.

If you have questions regarding this transmittal, please contact the EDS Provider Assistance Center at 1-800-457-4454 (toll free) within Arkansas or locally and out of state at (501) 376-2211.

Arkansas Medicaid provider manuals (including update transmittals), official notices and remittance advice (RA) messages are available for downloading from the Arkansas Medicaid website: www.medicaid.state.ar.us.

Thank you for your participation in the Arkansas Medicaid Program.

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Roy Jeffus, Director

262.110 Occupational, Physical, Speech Therapy Procedure Codes 12-5-05

The following occupational, physical and speech-language pathology procedure codes are payable when billed using type of service (TOS) **B**.

A. OCCUPATIONAL THERAPY

Procedure Code	Required Modifiers	Description
97003	—	Evaluation for Occupational Therapy (30-minute unit; maximum of 4 units per state fiscal year, July 1 through June 30)
97530	—	Individual Occupational Therapy (15-minute unit; maximum of 4 units per day)
97150	U2	Group Occupational Therapy (15-minute unit; maximum of 4 units per day, maximum of 4 clients per group)
97530	UB	Individual Occupational Therapy by Occupational Therapy Assistant (15-minute unit; maximum of 4 units per day)
97150	UB, U1	Group Occupational Therapy by Occupational Therapy Assistant (15-minute unit; maximum of 4 units per day, maximum of 4 clients per group)

B. PHYSICAL THERAPY

Procedure Code	Required Modifier	Description
97001	—	Evaluation for Physical Therapy (30-minute unit; maximum of 4 units per state fiscal year, July 1 through June 30)
97110	—	Individual Physical Therapy (15-minute unit; maximum of 4 units per day)
97150	—	Group Physical Therapy (15-minute unit; maximum of 4 units per day, maximum of 4 clients per group)
97110	UB	Individual Physical Therapy by Physical Therapy Assistant (15-minute unit; maximum of 4 units per day)
97150	UB	Group Physical Therapy by Physical Therapy Assistant (15-minute unit; maximum of 4 units per day, maximum of 4 clients per group)

C. SPEECH-LANGUAGE PATHOLOGY

Procedure Code	Required Modifier	Description
92506	—	Evaluation for Speech Therapy (30-minute unit; maximum of 4 units per state fiscal year, July 1 through June 30)
92507	—	Individual Speech Session (15-minute unit; maximum of 4 units per day)
92508	—	Group Speech Session (15-minute unit; maximum of 4 units per day, maximum of 4 clients per group)
92507	UB	Individual Speech Therapy by Speech-Language Pathology Assistant (15-minute unit; maximum of 4 units per day)
92508	UB	Group Speech Therapy by Speech-Language Pathology Assistant (15-minute unit; maximum of 4 units per day, maximum of 4 clients per group)