



Practice & Payment News

APTA Indiana December 2021 Practice and Payment Newsletter

As a benefit of APTA Indiana membership, the Practice and Payment Specialist and Committee serve as a resource for assisting with practice and payment issues and updates. This includes disseminating updates, educating members, answering questions, and hearing from membership about practice and payment concerns. Please reach out to Andrea Lausch, PT, DPT, APTA Indiana Practice and Payment Specialist, at andrealausch@inapta.org, with questions or to inform the Committee of payor concerns.

CONTENTS

Centers for Medicare & Medicaid Services (CMS)

- S. 610: Medicare Payment Update
- 2022 Medicare Deductible, Coinsurance and Premium Rates
- MLN Matters: PT/OT Providers Billing PTA/OTA Services to Medicare Patients

WPS Government Health Administrators

- Outpatient Rehabilitation Updates – Ask the Contractor Teleconference

Indiana Health Coverage Programs (IHCP)

- Myoelectric Upper Limb Prosthetic Coverage
- Updated CPT Code Pricing

Humana

- Cohere

United HealthCare (UHC) Community Plan

- Outpatient Therapy Services Policy changes

No Surprises Act

- APTA Practice Advisory: Good Faith Estimates for Uninsured or Self-Pay Patients
- CMS FAQ Document on the New No Surprises Act

Telehealth

- Updated Commercial Payer Coverage

NCCI Updates

- List of Common Physical Therapy NCCI: Update

CENTERS FOR MEDICARE & MEDICAID SERVICES (CMS)

S. 610: Medicare Payment Update

Medicare cuts are partially averted for 2022 as President Biden signed into law the Lorna Breen Health Care Providers Protection Act (S. 610). Below is a summary of [wins for the Physical Therapy Profession](#) for 2022:

- The conversion factor will reduce .75% instead of 3.75% as S. 610 will provide CMS with a 3% appropriation for 2022 to partially offset its planned cut.
- A temporary moratorium on the 2% Medicare sequestration cut will be continued through part of 2022. The [Medicare FFS Claims: 2% Payment Adjustment \(Sequestration\) Changes](#) will be as follows:

- No payment adjustment through March 31, 2022
- 1% payment adjustment April 1 – June 30, 2022
- 2% payment adjustment beginning July 1, 2022
- Implementation of a 4% across the board "pay as you go" cut mandated through budget rules will be postponed until 2023. This is triggered periodically in which there is a required -4% across-the-board cut.

Update to Medicare Deductible, Coinsurance and Premium Rates for Calendar Year (CY) 2022

- [Learn About New CY 2022 Part A and B Rates and Amounts](#)
- Reduced Payment for Physical Therapy and Occupational Therapy Services Furnished in Whole or in Part by a Physical Therapist Assistant or an Occupational Therapy Assistant

CMS MLN Matters Number: MM12397

In this Article you will Learn About:

- Payment Changes Due to Section 53107 of the Bipartisan Budget Act of 2018
- Payment Reduction for Services Provided by Physical Therapist Assistants (PTAs) and Occupational Therapy Assistants (OTAs)
- Description of When Modifiers CQ and CO are Needed on Claims for PTA and OTA Services

Other Payers That Have Implemented CQ/CO Modifiers to Date, Include:

- Humana
- TRICARE
- United Healthcare

WPS GOVERNMENT HEALTH ADMINISTRATORS (GHA)

Outpatient Rehabilitation Updates Ask-the -Contractor Teleconference

01/25/2022 — 10:00 – 11:30 AM CT (11:00 AM – 12:30 PM ET)

- Do you have questions on recent updates in the Federal Register made to outpatient rehabilitation services?
- Join this question-and-answer teleconference to get the answers.
- It is best to submit questions in advance to ensure your question is answered. This training does not have a formal presentation or handout.

<http://wpsghalearningcenter.com/store-catalog>

INDIANA HEALTH COVERAGE PROGRAMS (IHCP)

Myoelectric Upper Limb Prosthetic Coverage

Effective Dec. 16, 2021, the Indiana Health Coverage Programs (IHCP) adds coverage of myoelectric upper limb prosthetics for Healthcare Common Procedure Coding System (HCPCS) codes: [IHCP Adds Prosthetic Device Coverage for HCPCS Codes L8701 and L8702](#)

Updated CPT Code Pricing

IHCP updates pricing for CPT codes in the outpatient setting, adds [linkages to revenue codes for CPT codes](#): 92549, 96900, 96910, 96912, 96913

HUMANA

Cohere

- Cohere expands to All 50 States with Humana in 2022: Cohere began providing prior authorizations in musculoskeletal treatment in Alabama, Georgia, Indiana, Kentucky, Michigan, North Carolina, Ohio, Pennsylvania, South Carolina, Tennessee, Virginia and West Virginia in 2021.
- Starting in 2022, Cohere will be the delegated Humana vendor for MSK and therapy authorizations in all 50 states. Cohere will continue to be the partner for users already using Cohere.

This [LINK](#) Includes the Following Resources:

- Links to Select Resources for PT Providers
 - Q&A From APTA and Pay Chairs to Cohere
 - PT Provider Feedback
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UNITED HEALTHCARE (UHC) COMMUNITY PLAN

Outpatient Therapy Services (for Indiana Only) Effective 12/1/2021

Title Change: Previously titled Habilitative Services and Outpatient Rehabilitation Therapy (for Indiana Only)

- Applicable Codes: Removed Notation Language Pertaining to Code Benefit Applicability
 - Revised Description For:
 - HCPCS Code G0281
 - Revenue Codes 0430, 0431, 0432, 0433, 0434, 0439, 0420, 0429, 0440, 0441, 0442, 0443, 0444, 0449, 0943, 0948, and 0979
 - Removed List of ICD-10 Diagnosis Codes for the Habilitative Services Benefit Only
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NO SURPRISES ACT

- New “surprise billing” rules that require a good faith estimate of the costs of services for uninsured or self-pay patients are in effect as of Jan. 1, 2022.
- APTA has issued a practice advisory for outpatient private practices to understand and prepare for the implications of this rule: [Practice Advisory | Good Faith Estimate for Uninsured or Self-Pay Patients | APTA](#)

CMS FAQ Document on the New No Surprises Act

TELEHEALTH

Click [HERE](#) for Updated Commercial Payer Coverage

NCCI UPDATES

- [List of Common Physical Therapy NCCI: Update](#)
 - Column 1: 97530 and Column 2: 97533 and 97535 removed as of 1/1/22
 - Added Remote Therapeutic Monitoring code set
 - Added Multi-layer Compression system of leg and of arm

Resources:

[NCCI Policy Manual for Medicare](#)
[PTP Coding Edits](#)