

APTA INDIANA OCTOBER 2025 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.

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 Ask to Walking Away
- 2025 IHCP Works Annual Seminar, Oct. 21-23, in the Indianapolis Area

APTA Indiana Payor Portal Update

CENTERS FOR MEDICARE AND MEDICAID SERVICES (CMS)

Medicare: Government Shutdown Implications for Physical Therapy Services

As of the writing of this newsletter, Congress has not extended the telehealth waiver permitting CMS to reimburse for telehealth services provided by physical therapists. Starting October 1, 2025, telehealth services provided by physical therapists (or physical therapy assistants) are not payable by Medicare. Review commercial payers that may follow Medicare telehealth policy.

- Continue to follow APTA for updates on potential telehealth waiver extension or legislation which may expand telehealth coverage for PTs under Medicare.
 - Support H.R. 1614 to make PTs and PTAs permanent authorized providers of telehealth under Medicare.
 Please contact your members of Congress today!
- Claims Processing During the Government Shutdown
 – CMS directed all MACs "to implement a temporary claims hold," which typically lasts up to 10 business days, when legislative payment provisions ("extenders") are set to expire.
 - CMS noted that the temporary claims hold will "prevent the need for reprocessing large volumes of claims should Congress act after the statutory expiration date and should have a minimal impact on providers due to the 14-day payment floor."
 - Providers are still able to submit claims during the hold, but payments will not be released until the hold ends.

 MAC Operations – CMS noted that "MACs will continue to perform all functions related to Medicare Feefor-Service claims processing and payment."

Resource:

 APTA Article: Shutdown FAQs: What Is the Impact on Federal Payors, Health Care Practices, and Telehealth?

ANTHEM COMMERCIAL

Anthem Reverses Time In and Out Reimbursement Policy, Effective August 13, 2025

Anthem has updated their commercial policy which required time in and out for each timed code to total treatment time in minutes and total timed code minutes documented in member's medical record, along with the note describing the specific modality or procedure.

Note: total treatment time includes timed and untimed codes.

See C-07002 for details.

CIGNA

Medical Coverage Policy: Site of Care: Outpatient Hospital Setting for Physical and Occupational Therapy – Effective, October 1, 2025

Cigna policy, effective October 1, 2025, communicates that physical therapy and occupational therapy services provided in an outpatient hospital site of care setting are considered not medically necessary except on specific indication.

See the policy below to learn more about the indicators for services within a hospital site of care and review the training webinar.

Resources

- <u>Medical Coverage Policy: Site of Care: Outpatient Hospital Setting for Physical and Occupational Therapy</u>
- Cigna Provider Newsroom
- Site of Care Training Webinar and Training Opportunities
- ASH Clinical Practice Guidelines and FAQs

APTA JOINS LAWSUIT AGAINST MULTIPLAN AND MAJOR INSURERS: WHAT TO KNOW

APTA and APTA Private Practice have joined a federal antitrust lawsuit against MultiPlan (Claritev) and major insurers, alleging systematic underpayment for out-of-network services. This legal action seeks to stop anticompetitive reimbursement practices and recover financial damages for affected physical therapists.

Individual PT practices may be eligible to pursue significant damages. A webinar discussing opportunities for therapists to sue on an individual basis will be held with lawyers appointed in the litigation for individual, direct action plaintiffs — <u>Sign</u> <u>up to be notified when the webinar date, time, and registration are live to learn more</u>.

Resources

- APTA and APTA Private Practice Join Federal Lawsuit Over Health Care Price-Fixing
- APTA Practice Advisory: Commercial Insurance Out-of-Network Repricing Alert

APTA'S MEDICARE ADVANTAGE SURVEY

APTA needs more provider input to strengthen advocacy efforts around Medicare Advantage (MA). Your feedback plays a critical role in shaping APTA's strategies when working with Medicare and MA payers to improve payment and reduce administrative burden.

The survey is designed to capture the scope of real-world challenges, including:

- Plan Coverage Criteria
- Claims Processing Issues
- Adverse Clinical Impacts on Patients
- Appeals Outcomes
- Specific Feedback on UnitedHealthcare's 2024 Prior Authorization Program

The survey is open through October 31, 2025.

Your voice matters—take the <u>survey</u> today to help drive meaningful change. Estimated time to complete the survey: 10 minutes.



ANNUAL ICD-10 UPDATE

ICD-10 and Other Coding Revisions to National Coverage Determinations: January 2026 Update

Learn about new or deleted ICD-10 diagnosis codes, effective January 1, 2026. Click HERE for details.

UPCOMING EVENTS AND PAYMENT WEBINARS

- 2025 IHCP Works Annual Seminar, scheduled for Oct. 21-23, in the Indianapolis area. Click HERE to register.
- WPS Webinar: No Tricks, Just Tips: Mastering Medicare Documentation
 - o October 16, 2025 from 11:15 am-12:00 pm
 - WPS will host a webinar on documentation to help avoid claim denials and support the services you provide.
 - In this webinar, participants will learn how to:
 - Properly document Medicare services to avoid claim denials
 - Identify common documentation errors and denial codes.
 - Submit documentation for Additional Documentation Requests (ADRs).
- Contracting for Smart PTs: Strategic Contracting Series
 - This new On-Demand Webinar Series gives you the knowledge, tools, and resources to evaluate and negotiate your payer contracts.
 - **New** PRIVATE PRACTICE Strategic Contracting Series Module 5 Negotiation in Action: From Making the Ask to Walking Away.

APTA INDIANA PAYER REPORTING PORTAL

Having payer concerns or barriers impacting patient care or creating administrative burdens?

The <u>APTA Indiana Payer Reporting Portal</u> has been developed for providers to use as they experience a payer issue in real time related to prior authorization, credentialing, claims payment, contracting issues or other related payment concerns.

- This portal will remain available until further notice, to be used as reportable events occur. You may save this link permanently on your desktop and/or access this portal on your mobile device for future use.
- Please share the link with staff.
 - Staff may bookmark the link to the portal on their web browser. They do not need to be a member of APTA Indiana to complete the payer reporting issue.