

CHAPTER 47: EPSDT HEALTH AND IDEA, Part C – EarlySteps**SECTION 47.5.1: PROCEDURE CODES AND RATES****PAGE(S) 4****PROCEDURE CODES AND RATES**

Louisiana Medicaid follows the current American Medical Association’s Current Procedural Terminology (CPT) coding and guidelines. If nationally approved changes occur to CPT codes at a future date, providers are to follow the most accurate coding available for covered services for that particular date of service, unless otherwise directed.

The following chart lists the codes most commonly billed by Early and Periodic Screening, Diagnostic, and Treatment (EPSDT) Health and Individuals with Disabilities Education Improvement Act (IDEA), Part C service providers:

Procedure Code	Description
Psychology Services	
90846	Family psychotherapy(w/o patient)
90847	Family psychotherapy (conjoint psychotherapy) (with patient present)
Audiology and Speech-Language Pathology Evaluation and Therapy	
92521	Evaluation of speech fluency
92522	Evaluation of speech sound production
92523	Evaluation of speech sound/language comprehension
92524	Evaluation of behavioral qualitative analysis of the voice
92507	Treatment of speech, language, voice, communication and/or auditory processing disorder (includes aural rehabilitation); individual
92508	Treatment of speech, language, voice, communication and/or auditory processing disorder (includes aural rehabilitation); group, 2 or more individuals
Hearing Testing Codes for Audiology and/or Speech-Language Pathology for EarlySteps	
92551	Screening test, pure tone, air only
92552	Pure tone audiometry (threshold), air only.
92553	Pure tone audiometry (threshold), air and bone.
92555	Speech audiometry threshold
92556	Speech audiometry threshold ; with speech recognition
92557	Comprehensive audiometry, threshold evaluation and speech recognition
92563	Tone decay test
92565	Stenger test, pure tone
92567	Tympanometry (impedance testing)
92568	Acoustic reflex testing; threshold

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Procedure Code	Description
Hearing Testing Codes for Audiology and/or Speech-Language Pathology for EarlySteps (cont'd)	
92571	Filtered speech test
92572	Staggered spondaic word test
92575	Sensorineural acuity level test
92576	Synthetic sentence identification test
92577	Stenger test, speech
92582	Conditioning play audiometry
92583	Select picture audiometry
92584	Electrocochleography
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)
92590	Hearing aid exam and selection, monaural
92591	Hearing aid exam and selection, binaural
92592	Hearing aid check, monaural
92593	Hearing aid check, binaural
92594	Electroacoustic evaluation for hearing aid, monaural
92595	Electroacoustic evaluation for hearing aid, binaural
Physical Therapy Codes for EarlySteps	
97032	Application of modality to one or more areas; electrical stimulation (manual), each 15 minutes
97110	Therapeutic procedure, one or more areas, each 15 minutes; therapeutic exercises to develop strength and endurance, range of motion and flexibility
97112	Therapeutic procedure, one or more areas, each 15 minutes; neuromuscular re-education of movement, balance, coordination, kinesthetic sense, posture and/or proprioception for sitting and/or standing activities
97116	Therapeutic procedure, one or more areas, each 15 minutes; gait training (includes stair climbing)
97124	Therapeutic procedure, one or more areas, each 15 minutes; massage, including effleurage, petrissage, and/or tapotement (stroking, compression, percussion, etc.)
97161	Physical therapy evaluation: low complexity

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Physical Therapy Codes for EarlySteps (cont'd)	
97162	Physical therapy evaluation: moderate complexity
97163	Physical therapy evaluation: high complexity
97164	Physical therapy re-evaluation
97750	Physical performance test
97760	Orthotic management and training
Occupational Therapy Codes for EarlySteps	
97530	Therapeutic activities, direct (one-on-one) patient contact by the provider (use of dynamic activities to improve functional performance); each 15 minutes
97750	Physical performance test or measurement (e.g., musculoskeletal, functional capacity), with written report, each 15 minutes
97760	Orthotic(s) management and training (including assessment and fitting when not otherwise reported), upper extremity(s), lower extremity(s), lower extremity(s) and/or trunk, each 15 minutes
97165	Occupational therapy evaluation: low complexity
97166	Occupational therapy evaluation: moderated complexity
97167	Occupational therapy evaluation: high complexity
97168	Re-evaluation of occupational therapy
97750	Physical performance test
97760	Orthotic management and training

For the most current reimbursement fees and a complete list of codes visit https://www.lamedicaid.com/Provweb1/fee_schedules/OCDD_Fee.htm or [Medicaid | Department of Health | State of Louisiana | \(lamedicaid.com\)](#).

In addition to the procedure codes listed above, EarlySteps providers must also add the appropriate procedure modifier. Both *Type of Service* (TOS) and *Place of Service* (POS) modifiers apply. Listed below is an explanation of TOS modifiers found on this schedule. A combination of a POS code and a valid procedure modifier determine the TOS.

TOS 22

For services rendered in the natural environment (home and community). "*Community*": *environment where children of same age with no disabilities or special needs participate such as childcare centers, agencies, libraries, and other community settings*. Services can be provided via "teletherapy" specific POS/modifier combinations.

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POS/modifier combination must be one of these two choices:

1. POS 12 (Home) and Procedure Modifier U8; or
2. POS 99 (Other Place of Service) and Procedure Modifier U8.
- 3: POS 02 (Teletherapy) and Procedure Modifiers 95 and U8.

TOS 27

For services rendered in a special purpose facility/inclusive childcare: childcare center, nursery schools, preschools with at least 50 percent with no disabilities or developmental delays.

POS/modifier combination must be:

1. POS 99 and Procedure Modifier TJ.

TOS 28

For services rendered in a center based special purpose facility: center where only children with disabilities or developmental delays are served.

POS/modifier combination must be:

1. POS 99 and Procedure Modifier SE.

759 Denial Codes

The National Correct Coding Initiative (NCCI, also known as CCI) was implemented by Centers for Medicare and Medicaid Services (CMS) to promote national correct coding methodologies and to control improper coding leading to inappropriate payment. NCCI code pair edits are automated prepayment edits that prevent improper payment when certain codes are submitted together for covered services by a single provider.

Modifier 59 indicates that a procedure or service was distinct or independent from other services performed on the same day by the same provider (local education agency (LEA)). Modifier 59 is used to identify procedures/services that are not normally reported together, but are appropriate under the circumstances. This may represent a different session or student encounter, a different type of therapy or procedure performed on the same day by the same provider (LEA).