

**CHAPTER 20: EPSDT HEALTH AND IDEA – RELATED SERVICES****APPENDIX A: PROCEDURE CODES****PAGE(S) 5****PROCEDURE CODES**

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 EPSDT Health and IDEA-Related Services providers:

<b>Procedure Code</b>	<b>Description</b>
<b>Psychological Services Codes Below are only applicable to EarlySteps services and are not allowable codes for LEA's</b>	
90810	Individual psychotherapy, interactive, using play equipment, physical devices, language interpreter, or other mechanisms of non-verbal communication in an office or outpatient facility, approximately 20-30 minutes face-to-face with patient
90812	Individual psychotherapy, interactive, using play equipment, physical device, language interpreter, or other mechanisms of non-verbal communication in an office or outpatient facility, approximately 45-50 minutes face-to-face with the patient
90846	Family psychotherapy( without Patient)
90847	Family psychotherapy (conjoint psychotherapy) (with patient present)
90857	Interactive group psychotherapy
<b>Audiology and Speech-Language Pathology Evaluation and Therapy Codes for EarlySteps and LEA EPSDT Health Service Programs</b>	
92506	Evaluation of speech, language, voice, communication, auditory processing and/or aural rehabilitation status
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
<b>Hearing Testing Codes for Audiology and/or Speech-Language Pathology for EarlySteps and LEA EPSDT Health Services Programs</b>	
92551	Screening test, pure tone, air only
92552	Pure tone audiometry (threshold), air only.
92553	Pure tone audiometry (threshold), air and bone.

**CHAPTER 20: EPSDT HEALTH AND IDEA – RELATED SERVICES****APPENDIX A: PROCEDURE CODES****PAGE(S) 5**

<b>Procedure Code</b>	<b>Description</b>
<b>Hearing Testing Codes for Audiology and/or Speech-Language Pathology for EarlySteps and LEA EPSDT Health Services Programs</b>	
92555	Speech audiometry threshold
92556	Speech audiometry threshold ; with speech recognition
92557	Comprehensive audiometry, threshold evaluation and speech recognition
92563	Tone decay test
92564	Short increment sensitivity index (SISI)
92565	Stenger test, pure tone
92567	Tympanometry (impedance testing)
92568	Acoustic reflex testing; threshold
92569	Acoustic reflex decay test; decay
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
92585	Auditory evoked potentials for evoked response audiometry and/or testing of the central nervous system; comprehensive
92586	Auditory evoked potentials for evoked response audiometry and/or testing of the CNS; limited
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

**CHAPTER 20: EPSDT HEALTH AND IDEA – RELATED SERVICES****APPENDIX A: PROCEDURE CODES****PAGE(S) 5**

<b>Procedure Code</b>	<b>Description</b>
	<b>Psychological Evaluation Code below is only billable in the EarlySteps EPSDT Health Services Program</b>
96101	Psychological testing (includes psychodiagnostic assessment of emotionality, intellectual abilities, personality and psychopathology, e.g., MMPI, Rorschach, WAIS), per hour of the psychologist's or physician's time, both face-to-face time with the patient and time interpreting test results and preparing the report
	<b>Physical Therapy Evaluation Code for EarlySteps and LEA EPSDT Health Services Programs</b>
97001	Physical Therapy evaluation
	<b>Occupational Therapy Evaluation Code for EarlySteps and LEA EPSDT Health Services Programs</b>
97003	Occupational Therapy Evaluation
	<b>Physical Therapy Codes for EarlySteps and LEA EPSDT Health Services Programs</b>
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.)
	<b>Occupational Therapy Codes for EarlySteps and LEA EPSDT Health Services Programs</b>
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

For the most current reimbursement fees and a complete list of codes visit [www.lamedicaid.com](http://www.lamedicaid.com).

---

**CHAPTER 20: EPSDT HEALTH AND IDEA – RELATED SERVICES**

---

**APPENDIX A: PROCEDURE CODES****PAGE(S) 5**

---

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 the Types of Service found on this schedule. A combination of a Place of Service (POS) Code and a valid Procedure Modifier determine the Type of Service.

TOS 22 – These are for services rendered in the Natural Environment (Home & Community). "Community": Environments where children of the same age with no disabilities or special needs participate. These can include childcare centers, agencies, libraries and other community settings.

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

- POS 12 Home and Procedure Modifier U8, or
- POS 99 Other place of service and Procedure Modifier U8

TOS 27 - For services rendered in a Special Purpose Facility/Inclusive Childcare: Childcare center, nursery schools, or preschools with at least 50% with no disabilities or developmental delays.

POS/modifier combination must be:

- 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:

- 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.

Because LEAs are recognized as single providers and often provide multiple services to students with disabilities on a single day, claims are being denied with error code 759 (CCI: Incidental – History), one of the error codes related to the mandated NCCI edits. To resolve these NCCI edits, districts must begin using modifier 59 on all claims when two or more services are billed for a student on the same day that were performed by separate clinical staff.

Modifier 59 indicates that a procedure or service was distinct or independent from other services performed on the same day by the same provider (the LEA). Modifier 59 is used to identify

---

**CHAPTER 20: EPSDT HEALTH AND IDEA – RELATED SERVICES**

---

**APPENDIX A: PROCEDURE CODES****PAGE(S) 5**

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).