



## Health Alliance Medical Plan Physical and Occupational Therapy Code List

Prior Authorization Proceudre List: Cardiology & Radiology, MSK (Join, Spine, Pain, Massage, Speech), Oncology\*, Radiation Therapy, and Sleep.

\*The Oncology CPT® Code list for any individual client is highly dependent on the exact program structure selected and can be impacted by multiple

Category	CPT® Code	CPT® Code Description
PT/OT	420	Physical Therapy
PT/OT	421	Physical Therapy: Visit Charge
PT/OT	422	Physical Therapy: Hourly Charge
PT/OT	423	Physical Therapy: Group Rate
PT/OT	424	Physical Therapy: Evaluation/Re-Evaluation
PT/OT	429	Physical Therapy: Other Physical Therapy
PT/OT	430	OT General
PT/OT	431	OT Visit Code
PT/OT	432	Occupational Therapy: Hourly Charge
PT/OT	433	Occupational Therapy: Group Rate
PT/OT	434	Occupational Therapy: Evaluation/Re-Evaluation
PT/OT	439	Occupational Therapy: Other Occupational Therapy
PT/OT	29126	Application of short arm splint (forearm to hand), dynamic
PT/OT	29130	Application of finger splint, static
PT/OT	29131	Application of finger splint, dynamic
PT/OT	90912	Biofeedback training, perineal muscles, anorectal or urethral sphincter, including EMG and/or manometry, when performed; initial 15 minutes of one-on-one physician or other qualified health care professional contact with the patient
PT/OT		Biofeedback training, perineal muscles, anorectal or urethral sphincter, including EMG and/or manometry, when performed; each additional 15 minutes of one-on-one physician or other qualified health care professional contact with the patient (List separately in addition to code for primary procedure)
PT/OT	97113	Therapeutic procedure, 1 or more areas, each 15 minutes; aquatic therapy with therapeutic exercises
PT/OT	97150	Therapeutic procedure(s), group (2 or more individuals)
PT/OT	97533	Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes

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Category	CPT® Code	CPT® Code Description
PT/OT	97535	Self-care/home management training (eg, activities of daily living (ADL) and compensatory training, meal preparation, safety procedures, and instructions in use of assistive technology devices/adaptive equipment) direct one-on-one contact, each 15 minutes
PT/OT	97537	Community/work reintegration training (eg, shopping, transportation, money management, avocational activities and/or work environment/modification analysis, work task analysis, use of assistive technology device/adaptive equipment), direct one-on-one contact, each 15 minutes
PT/OT	97542	Wheelchair management (eg, assessment, fitting, training), each 15 minutes
PT/OT	97546	Work hardening /conditioning; each additional hour (list separately in addition to code for primary procedure)
PT/OT	97602	Removal of devitalized tissue from wound(s), non-selective debridement, without anesthesia (eg, wet-to-moist dressings, enzymatic, abrasion, larval therapy), including topical application(s), wound assessment, and instruction(s) for ongoing care, per session
PT/OT	97755	Assistive technology assessment (eg, to restore, augment or compensate for existing function, optimize functional tasks and/or maximize environmental accessibility), direct one-on-one contact, with written report, each 15 minutes
PT/OT	97799	Unlisted physical medicine/rehabilitation service or procedure
PT/OT	97763	Orthotic(S)/Prosthetic(S) Management And/Or Training, Upper Extremity(les), Lower Extremity(les), And/Or Trunk, Subsequent Orthotic(S)/Prosthetic(S) Encounter, Each 15 Minutes
PT/OT	G0281	Electrical stimulation, (unattended), to one or more areas, for chronic stage iii and stage iv pressure ulcers, etc.
PT/OT	G0282	Electrical stimulation, (unattended), to one or more areas, for wound care other than described in G0281
PT/OT/Speech	97129	Therapeutic interventions that focus on cognitive function (eg, attention, memory, reasoning, executive function, problem solving, and/or pragmatic functioning) and compensatory strategies to manage the performance of an activity (eg, managing time or schedules, initiating, organizing, and sequencing tasks), direct (one-on-one) patient contact; initial 15 minutes
PT/OT; Acupuncture	97139	Unlisted therapeutic procedure (specify)
PT/OT; Acupuncture, Chiro	97110	Therapeutic procedure, 1 or more areas, each 15 minutes; therapeutic exercises to develop strength and endurance, range of motion and flexibility
PT/OT; Acupuncture, Chiro, Massage Therapy	97140	Manual therapy techniques (eg, mobilization/ manipulation, manual lymphatic drainage, manual traction), 1 or more regions, each 15 minutes
PT/OT; Chiro	95851	Range of motion measurements and report (separate procedure); each extremity (excluding hand) or each trunk section (spine)
PT/OT; Chiro	95852	Range of motion measurements and report (separate procedure); hand, with or without comparison with normal side
PT/OT; Chiro	97010	Application of a modality to 1 or more areas; hot or cold packs
PT/OT; Chiro	97012	Application of a modality to 1 or more areas; traction, mechanical
PT/OT; Chiro	97014	Application of a modality to 1 or more areas; electrical stimulation (unattended)
PT/OT; Chiro	97016	Application of a modality to 1 or more areas; vasopneumatic devices
PT/OT; Chiro	97018	Application of a modality to 1 or more areas; paraffin bath

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PT/OT; Chiro	97022	Application of a modality to 1 or more areas; whirlpool
PT/OT; Chiro	97024	Application of a modality to 1 or more areas; diathermy (eg, microwave)
PT/OT; Chiro	97028	Application of a modality to 1 or more areas; ultraviolet
PT/OT; Chiro	97032	Application of a modality to 1 or more areas; electrical stimulation (manual), each 15 minutes
PT/OT; Chiro	97033	Application of a modality to 1 or more areas; iontophoresis, each 15 minutes
PT/OT; Chiro	97034	Application of a modality to 1 or more areas; contrast baths, each 15 minutes
PT/OT; Chiro	97035	Application of a modality to 1 or more areas; ultrasound, each 15 minutes
PT/OT; Chiro	97036	Application of a modality to 1 or more areas; Hubbard tank, each 15 minutes
PT/OT; Chiro	97039	Unlisted modality (specify type and time if constant attendance)
PT/OT; Chiro	97112	Therapeutic procedure, 1 or more areas, each 15 minutes; neuromuscular reeducation of movement, balance, coordination, kinesthetic sense, posture, and/or proprioception for sitting and/or standing activities
PT/OT; Chiro	97116	Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)
PT/OT; Chiro	97530	Therapeutic activities, direct (one-on-one) patient contact (use of dynamic activities to improve functional performance), each 15 minutes
PT/OT; Chiro	97760	Orthotic(s) management and training (including assessment and fitting when not otherwise reported), upper extremit(ies), lower extremit(ies), and/or trunk, initial orthotic(s) encounter, each 15 minutes
PT/OT; Chiro	97761	Prosthetic(s) training, upper and/or lower extremit(ies), initial prosthetic(s) encounter, each 15 minutes
PT/OT; Chiro	しっしとおろ	Electrical stimulation (unattended), to one or more areas for indication(s) other than wound care, as part of a therapy plan of care

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