## HIP MSK Therapies - PTOT, CHIRO Code List

	Category	Procedure Code	Procedure Code Description	HIP Commercial	HIP Medicaid	HIP Medicare
CHE	CHIRO	98940	CHIROPRACTIC MANIPULATIVE TREATMENT (CMT): SPINAL ONE TO TWO REGIONS			
1975   1986				·	,	·
Property			· /		·	,
1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982   1982	CHIRO	98942		PA Medical Necessity Review	PA Medical Necessity Review	PA Medical Necessity Review
Company   Comp	CHIRO	99202	NEW PATIENT WHICH REQUIRES THESE THREE KEY COMPONENTS: AN EXPANDED	PA Medical Necessity Review	PA Medical Necessity Review	PA Medical Necessity Review
Description   Sept	CHIRO	99203	NEW PATIENT WHICH REQUIRES THESE THREE KEY COMPONENTS: A DETAILED	PA Medical Necessity Review	PA Medical Necessity Review	PA Medical Necessity Review
Column   C	CHIRO	99204	NEW PATIENT WHICH REQUIRES THESE THREE KEY COMPONENTS: A	PA Medical Necessity Review	PA Medical Necessity Review	PA Medical Necessity Review
Control   Section   Sect	CHIRO	99205	NEW PATIENT WHICH REQUIRES THESE THREE KEY COMPONENTS: A	PA Medical Necessity Review	PA Medical Necessity Review	PA Medical Necessity Review
CHRC    1922   AND STATEMENT WORLD SEQUENCE AT LEAST TWO OF TRESS TRESS FROM PRODUCT AND ADDRESS OF A MORE A	CHIRO	99211	AN ESTABLISHED PATIENT THAT MAY NOT REQUIRE THE PRESENCE OF A PHYSICIAN.	PA Medical Necessity Review	PA Medical Necessity Review	PA Medical Necessity Review
A Serial Name of Part Internal	CHIRO	99212	AN ESTABLISHED PATIENT WHICH REQUIRES AT LEAST TWO OF THESE THREE KEY	PA Medical Necessity Review	PA Medical Necessity Review	PA Medical Necessity Review
Chief   Chie	CHIRO	99213	AN ESTABLISHED PATIENT WHICH REQUIRES AT LEAST TWO OF THESE THREE KEY	PA Medical Necessity Review	PA Medical Necessity Review	PA Medical Necessity Review
DIRRO WILD AND STARLING DEPARTMENT WHICH SECURISES THESE THY CO FT TESS THERE REY CONCRETE PROVED CONCRETE PROVE A CONTRECT CHARGE PROVE AND CONTRECT CHARGE PROVIDED PR	CHIRO	99214	AN ESTABLISHED PATIENT WHICH REQUIRES AT LEAST TWO OF THESE THREE KEY	PA Medical Necessity Review	PA Medical Necessity Review	PA Medical Necessity Review
PROT. Clim  9867  Regio Of Matter Abstracterance And Region (Septemb Procedure), Penal Premisery (Penal Premisery (Penal Premisers))  PA Medical Necessary Review  PA Medical Necessary Review	CHIRO	99215	AN ESTABLISHED PATIENT WHICH REQUIRES AT LEAST TWO OF THESE THREE KEY	PA Medical Necessity Review	PA Medical Necessity Review	PA Medical Necessity Review
Hast Or East Trans Section (Spirol)  POTO, China  Section 1  Range Of New York and Section (Spirol)  Range Of New York and Sec	PT/OT	90901		PA Medical Necessity Review	PA Medical Necessity Review	PA Medical Necessity Review
Priory Childs 97912 Application Of A Modeliny To 1 CP More Areas: ed Of Cod Palasis Priory Childs 97914 Application Of A Modeliny To 1 CP More Areas: ed Of Cod Palasis Priory Childs 97914 Application Of A Modeliny To 1 CP More Areas: Traction Mechanical Priory Childs 97914 Application Of A Modeliny To 1 CP More Areas: Traction Mechanical Priory Childs 97914 Application Of A Modeliny To 1 CP More Areas: Traction Mechanical Priory Childs 97914 Application Of A Modeliny To 1 CP More Areas: Traction Mechanical Priory Childs 97918 Application Of A Modeliny To 1 CP More Areas: Traction Mechanical Priory Childs 97918 Application Of A Modeliny To 1 CP More Areas: Traction Mechanical Priory Childs 97918 Application Of A Modeliny To 1 CP More Areas: Traction Mechanical Priory Childs 97918 Application Of A Modeliny To 1 CP More Areas: Traction Mechanical Priory Childs 97918 Application Of A Modeliny To 1 CP More Areas: Traction Mechanical Priory Childs 97918 Application Of A Modeliny To 1 CP More Areas: Traction Mechanical Priory Childs 97928 Application Of A Modeliny To 1 CP More Areas: Traction Mechanical Priory Childs 97928 Application Of A Modeliny To 1 CP More Areas: University Priory Childs 97928 Application Of A Modeliny To 1 CP More Areas: University Priory Childs 97928 Application Of A Modeliny To 1 CP More Areas: University Priory Childs 97928 Application Of A Modeliny To 1 CP More Areas: University Priory Childs 97938 Application Of A Modeliny To 1 CP More Areas: University Priority Priory Childs 97938 Application Of A Modeliny To 1 CP More Areas: University Priority Priory Childs 97938 Application Of A Modeliny To 1 CP More Areas: University Priority Priory Childs 97938 Application Of A Modeliny To 1 CP More Areas: University Priority Priory Childs 97938 Application Of A Modeliny To 1 CP More Areas: University Priority Priory Childs 97938 Application Of A Modeliny To 1 CP More Areas: University Priority Priory Childs 97938 Application Of A Modeliny To 1 CP More Areas: University Priority Priory Childs 97938 Ap	PT/OT; Chiro	95851	Hand) Or Each Trunk Section (Spine)	PA Medical Necessity Review	PA Medical Necessity Review	PA Medical Necessity Review
FPIOT, Clim 97012 Application Of A Modelal Processing Process 97014 Application Of A Modelal Processing Process 97015 Application Of A Modelal Processing Delivers 97016 Application Of A Modelal Processing Delivers 97016 Application Of A Modelal Processing Process 97010 Application Of A Modelal Process Bent Learn Information (Monesa) Each 15 Minutes 97010 Application Of A Modelal Processing Bent Learn Information (Monesa) Each 15 Minutes 97010 Application Of A Modelal Processing Bent Learn Information (Monesa) Each 15 Minutes 97010 Application Of A Modelal Processing Bent Learn Information (Monesa) Each 15 Minutes 97010 Application Of A Modelal Processing Bent Learn Information (Monesa) Each 15 Minutes 97010 Application Of A Modelal Processing Bent Learn Information (Monesa) Each 15 Minutes 97010 Application Of A Modelal Processing Bent Learn Information (Monesa) Each 15 Minutes 97010 Application Of A Modelal Processing Bent Learn Information (Monesa) Each 15 Minutes 97010 Application Of A Modelal Processing Bent Learn Information (Monesa) Each 15 Minutes 97010 Application Of A Modelal Processing Processing Processing Processing Processing Processing Processing Processing Proces	PT/OT; Chiro	95852		PA Medical Necessity Review	PA Medical Necessity Review	PA Medical Necessity Review
PFOT. Circle 97014 Application Of A Mocality To 1 Of Note Areas, Exectical Sillaration (Unatherology) PFOT. Circle 97015 Application Of A Mocality To 1 Of Note Areas, Exectical Sillaration (PA Mocality Newson) PFOT. Circle 97016 Application Of A Mocality To 1 Of Note Areas, Exectical Sillaration (PA Mocality Newson) PFOT. Circle 97017 Application Of A Mocality To 1 Of Note Areas, Exectical Sillaration (PA Mocality Newson) PFOT. Circle 97018 Application Of A Mocality To 1 Of Note Areas, Exectical Sillaration (PA Mocality Newson) PFOT. Circle 97010 Application Of A Mocality To 1 Of Note Areas, Exectical Sillaration (PA Mocality To 1 Of Note Areas, Exectical Sillaration (PA Mocality To 1 Of Note Areas, Exectical Sillaration (PA Mocality To 1 Of Note Areas, Exectical Sillaration (PA Mocality To 1 Of Note Areas, Exectical Sillaration (PA Mocality To 1 Of Note Areas, Exectical Sillaration (PA Mocality To 1 Of Note Areas, Exectical Sillaration (PA Mocality To 1 Of Note Areas, Exectical Sillaration (PA Mocality To 1 Of Note Areas, Exectical Sillaration (PA Mocality To 1 Of Note Areas, Exectical Sillaration (PA Mocality To 1 Of Note Areas, Exectical Sillaration (PA Mocality To 1 Of Note Areas, Exectical Sillaration (PA Mocality To 1 Of Note Areas, Exectical Sillaration (PA Mocality To 1 Of Note Areas, Exectical Sillaration (PA Mocality To 1 Of Note Areas, Exectical Sillaration (PA Mocality To 1 Of Note Areas, Exectical Sillaration (PA Mocality To 1 Of Note Areas, Exectical Sillaration (PA Mocality To 1 Of Note Areas, Exectical Sillaration (PA Mocality To 1 Of Note Areas, Exectical Sillaration (PA Mocality To 1 Of Note Areas, Exectical Sillaration (PA Mocality To 1 Of Note Areas, Exectical Sillaration (PA Mocality To 1 Of Note Areas, Exectical Sillaration (PA Mocality To 1 Of Note Areas, Exectical Sillaration (PA Mocality To 1 Of Note Areas, Exectical Sillaration (PA Mocality Parish) PFOT. Circle 97033 Application Of A Mocality To 1 Of Note Areas, Exect 1 Sillaration (PA Mocality Parish) PFOT. Circle 97035 Application Of	PT/OT; Chiro	97010	Application Of A Modality To 1 Or More Areas; Hot Or Cold Packs	PA Medical Necessity Review	PA Medical Necessity Review	PA Medical Necessity Review
PFIOT: Circle 970'9 Application Of A Modellar (1-0 of Wine Areas): Vasoporusante Derives PFIOT: Circle 970'9 Application Of A Modellar (1-0 of Wine Areas): Vasoporusante Derives PFIOT: Circle 970'2 Application Of A Modellar (1-0 of Wine Areas): Principal PFIOT: Circle 970'2 Application Of A Modellar (1-0 of Wine Areas): Principal PFIOT: Circle 970'20 Application Of A Modellar (1-0 of Wine Areas): Principal PFIOT: Circle 970'20 Application Of A Modellar (1-0 of Wine Areas): Principal PFIOT: Circle 970'20 Application Of A Modellar (1-0 of Wine Areas): University PFIOT: Circle 970'20 Application Of A Modellar (1-0 of Wine Areas): University PFIOT: Circle 970'20 Application Of A Modellar (1-0 of Wine Areas): University PFIOT: Circle 970'20 Application Of A Modellar (1-0 of Wine Areas): University PFIOT: Circle 970'20 Application Of A Modellar (1-0 of Wine Areas): University PFIOT: Circle 970'20 Application Of A Modellar (1-0 of Wine Areas): University PFIOT: Circle 970'20 Application Of A Modellar (1-0 of Wine Areas): University PFIOT: Circle 970'20 Application Of A Modellar (1-0 of Wine Areas): University Principal PFIOT: Circle 970'20 Application Of A Modellar (1-0 of Wine Areas): University Principal PFIOT: Circle 970'20 Application Of A Modellar (1-0 of Wine Areas): University Principal PFIOT: Circle 970'20 Application Of A Modellar (1-0 of Wine Areas): University Principal PFIOT: Circle 970'20 Application Of A Modellar (1-0 of Wine Areas): University Principal PFIOT: Circle 970'20 Application Of A Modellar (1-0 of Wine Areas): University Principal PFIOT: Circle 970'20 Application Of A Modellar (1-0 of Wine Areas): University Principal PFIOT: Circle 970'20 Application Of A Modellar (1-0 of Wine Areas): University Principal PFIOT: Circle 970'20 Application Of A Modellar (1-0 of Wine Areas): University Principal PFIOT: Circle 970'20 Application Of A Modellar (1-0 of Wine Areas): University Principal PFIOT: Circle 970'20 Application Of A Modellar (1-0 of Wine Areas): University Principal PFIOT: Circle 970'20 Appli	· ·			· · · · · · · · · · · · · · · · · · ·	· ·	· ·
PFOT, Clinic 9709 Application Of A Modellary To 1 Or More Areas, Paraffin Bath PP AMedical Necessary Review PP AMedical Necessary Re	·			·	·	•
PETOT. Chiro 97024 Application Of A Modellaty, To 1 Of More Areas, Whitghard PETOT. Chiro 97026 Application of A Modellaty, To 1 Of More Areas, Eighthering (Eg. Microwev) PETOT. Chiro 97026 Application of A Modellaty, To 1 Of More Areas, Eighthering (Eg. Microwev) PETOT. Chiro 97026 Application of A Modellaty, To 1 Of More Areas, Eighthering PETOT. Chiro 97026 Application of A Modellaty, To 1 Of More Areas, Ultraviolet PETOT. Chiro 97026 Application of A Modellaty, To 1 Of More Areas, Electrical Strutulation (Manual), Each 16 Minutes PETOT. Chiro 97027 Application of A Modellaty, To 1 Of More Areas, Electrical Strutulation (Manual), Each 16 Minutes PETOT. Chiro 97038 Application of A Modellaty, To 1 Of More Areas, Electrical Strutulation (Manual), Each 16 Minutes PETOT. Chiro 97039 Application of A Modellaty, To 1 Of More Areas, Electrical Strutulation (Manual), Each 16 Minutes PETOT. Chiro 97030 Application of A Modellaty, To 1 Of More Areas, Electrical Strutulation PETOT. Chiro 97031 Application of A Modellaty, To 1 Of More Areas, Contrate Batter, Each 15 Minutes PETOT. Chiro 97035 Application of A Modellaty, To 1 Of More Areas, Contrate Batter, Each 15 Minutes PETOT. Chiro 97036 Application of A Modellaty, To 1 Of More Areas, Ultravioletic Batter, Each 15 Minutes PETOT. Chiro 97039 Application of A Modellaty, To 1 Of More Areas, Ultravioletic Batter, Each 15 Minutes PETOT. Chiro 97039 Unised Modellaty, To 1 Of More Areas, Hubbard Train, Each 15 Minutes PETOT. Chiro 97039 Unised Modellaty, To 1 Of More Areas, Hubbard Train, Each 15 Minutes PETOT. Chiro 97039 Unised Modellaty, To 1 Of More Areas, Hubbard Train, Each 15 Minutes PETOT. Chiro 97110 Therepoile Procedure, 1 Of More Areas, Each 15 Minutes, More Area, Each 15 Minutes, More Ar				·	·	•
PFIOT. Chris 97028 Application Of A Modality To 1 Or More Areass, Datanermy (Eg. Microwave) PFIOT. Chris 97028 Application Of A Modality To 1 Or More Areass, Ultraviolet PFIOT. Chris 97028 Application Of A Modality To 1 Or More Areass, Ultraviolet PFIOT. Chris 97028 Application Of A Modality To 1 Or More Areass, Ultraviolet PFIOT. Chris 97032 Application Of A Modality To 1 Or More Areass, Ultraviolet PFIOT. Chris 97032 Application Of A Modality To 1 Or More Areass, Ultraviolet PFIOT. Chris 97033 Application Of A Modality To 1 Or More Areass, Ultraviolet PFIOT. Chris 97034 Application Of A Modality To 1 Or More Areass, Ultraviolet PFIOT. Chris 97035 Application Of A Modality To 1 Or More Areass, Ultraviolet PFIOT. Chris 97036 Application Of A Modality To 1 Or More Areass, Untraviolet PFIOT. Chris 97036 Application Of A Modality To 1 Or More Areass, Untraviolet PFIOT. Chris 97036 Application Of A Modality To 1 Or More Areass, Untraviolet PFIOT. Chris 97036 Application Of A Modality To 1 Or More Areass, Untraviolet PFIOT. Chris 97036 Application Of A Modality To 1 Or More Areass, Untraviolet PFIOT. Chris 97036 Application Of A Modality To 1 Or More Areass, Untraviolet PFIOT. Chris 97036 Application Of A Modality To 1 Or More Areass, Untraviolet PFIOT. Chris 97036 Application Of A Modality To 1 Or More Areass, Untraviolet PFIOT. Chris 97036 Application Of A Modality To 1 Or More Areass, Untraviolet PFIOT. Chris 97037 Application Of A Modality To 1 Or More Areass, Untraviolet PFIOT. Chris 97038 United Modality To 1 Or More Areass, Untraviolet PFIOT. Chris 97039 United Modality To 1 Or More Areas, Each 15 Minutes Modality To 1 Or More Areas, Each 15 Minutes Modali				·	· · · · · · · · · · · · · · · · · · ·	•
PTOT: Chiro 97026 Application Of A Modelly To 1 Of More Areas; Interfacet PTOT: Chiro 97026 Application Of A Modelly To 1 Of More Areas; Interfacet PTOT: Chiro 97032 Application Of A Modelly To 1 Of More Areas; Electrical Stirulation (Manual), Each 15 Minutes PTOT: Chiro 97033 Application Of A Modelly To 1 Of More Areas; Electrical Stirulation (Manual), Each 15 Minutes PTOT: Chiro 97034 Application Of A Modelly To 1 Of More Areas; Electrical Stirulation (Manual), Each 15 Minutes PA Medical Necessity Review PTOT: Chiro 97035 Application Of A Modelly To 1 Of More Areas; Chirotal Baths, Each 15 Minutes PA Medical Necessity Review PTOT: Chiro 97036 Application Of A Modelly To 1 Of More Areas; Chirotal Baths, Each 15 Minutes PA Medical Necessity Review PTOT: Chiro 97036 Application Of A Modelly To 1 Of More Areas; Chirotal Baths, Each 15 Minutes PA Medical Necessity Review PTOT: Chiro 97036 Application Of A Modelly To 1 Of More Areas; Chirotal Baths, Each 15 Minutes PA Medical Necessity Review PTOT: Chiro 97039 Unlies Modelly To 1 Of More Areas; Chirotal Baths, Each 15 Minutes PTOT: Chiro 97039 Unlies Modelly To 1 Of More Areas; Chirotal Baths, Each 15 Minutes PTOT: Chiro 97139 Unlies Modelly To 1 Of More Areas; Chirotal Reviews PTOT: Chiro 97140 Therapeutic Procedure, 1 Of More Areas; Each 15 Minutes PA Medical Necessity Review				·		
PTOT: Chiro 97032 Application Of A Modality To 1 Or More Areas; Electrical Stimulation (Manual), Each 15 Minutes PA Medical Necessity Review Stiting Anator Standing Activities Paculation of New Areas, Each 15 Minutes, Necessity Review PA Medical Necessit	PT/OT; Chiro	97026	Application Of A Modality To 1 Or More Areas; Infrared	PA Medical Necessity Review	· · · · · · · · · · · · · · · · · · ·	
PTIOT; Chiro 97033 Application Of A Modality To 1 Or More Areas; Indiphoresis, Each 15 Minutes PA Medical Necessity Review PA Medical Necessit	PT/OT; Chiro	97028	Application Of A Modality To 1 Or More Areas; Ultraviolet	PA Medical Necessity Review	PA Medical Necessity Review	PA Medical Necessity Review
PTIOT; Chiro 97034 Application Of A Modality To 1 Or More Areas; Contrast Baths, Each 15 Minutes PA Medical Necessity Review PF A Medical Necessity Review P	PT/OT; Chiro	97032	Application Of A Modality To 1 Or More Areas; Electrical Stimulation (Manual), Each 15 Minutes	PA Medical Necessity Review	PA Medical Necessity Review	PA Medical Necessity Review
PTIOT; Chiro 97035 Application Of A Modality To 1 Or More Areas; Ultrasound, Each 15 Minutes PA Medical Necessity Review PA Medical Necessity	PT/OT; Chiro	97033	Application Of A Modality To 1 Or More Areas; Iontophoresis, Each 15 Minutes	PA Medical Necessity Review	PA Medical Necessity Review	PA Medical Necessity Review
PT/OT; Chiro 97036 Application Of A Modality To 1 Or More Areas; Hubbard Tank, Each 15 Minutes PA Medical Necessity Review PA Medical Necessit	PT/OT; Chiro	97034	Application Of A Modality To 1 Or More Areas; Contrast Baths, Each 15 Minutes	PA Medical Necessity Review	PA Medical Necessity Review	PA Medical Necessity Review
PTIOT 97039 Unlisted Modality (Specify Type And Time If Constant Attendance) PTIOT 19710 Therapeutic Procedure, 1 Or More Areas, Each 15 Minutes; Therapeutic Exercises To Develop Strength And Endurance, Range Of Modality (Specify Type And Time If Constant Attendance) PTIOT; Chiro 97110 Therapeutic Procedure, 1 Or More Areas, Each 15 Minutes; Neuromuscular Readucation Of Movement, Balance, Coordination, Kineshelde Sense, Posture, And/Or Proprioception For Stiting And/Or Standing Activities PTIOT; Chiro 97113 Therapeutic Procedure, 1 Or More Areas, Each 15 Minutes; Aquatic Therapeutic Procedure, 1 Or More Areas, Each 15 Minutes; Aquatic Therapeutic Procedure, 1 Or More Areas, Each 15 Minutes; Aquatic Therapeutic Procedure, 1 Or More Areas, Each 15 Minutes; Aquatic Therapeutic Procedure, 1 Or More Areas, Each 15 Minutes; Aquatic Therapeutic Procedure, 1 Or More Areas, Each 15 Minutes; Aquatic Therapeutic Procedure, 1 Or More Areas, Each 15 Minutes; Aquatic Therapeutic Procedure, 1 Or More Areas, Each 15 Minutes; Aquatic Therapeutic Procedure, 1 Or More Areas, Each 15 Minutes; Aquatic Therapeutic Procedure, 1 Or More Areas, Each 15 Minutes; Aquatic Therapeutic Procedure, 1 Or More Areas, Each 15 Minutes; Aquatic Therapeutic Procedure, 1 Or More Areas, Each 15 Minutes; Aquatic Therapeutic Procedure, 1 Or More Areas, Each 15 Minutes; Aquatic Therapeutic Procedure, 1 Or More Areas, Each 15 Minutes; Aquatic Therapeutic Procedure, 1 Or More Areas, Each 15 Minutes; Aquatic Therapeutic Procedure, 1 Or More Areas, Each 15 Minutes; Aquatic Therapeutic Procedure, 1 Or More Areas, Each 15 Minutes; Aquatic Therapeutic Procedure, 1 Or More Areas, Each 15 Minutes; Aquatic Therapeutic Procedure, 1 Or More Areas, Each 15 Minutes; Aquatic Therapeutic Procedure, 1 Or More Areas, Each 15 Minutes; Aquatic Therapeutic Procedure, 1 Or More Areas, Each 15 Minutes; Aquatic Therapeutic Procedure, 1 Or More Areas, Each 15 Minutes; Aquatic Therapeutic Procedure, 1 Or More Areas, Each 15 Minutes; Aquatic Therapeutic Procedure, 1 Or More Areas	PT/OT; Chiro	97035	Application Of A Modality To 1 Or More Areas; Ultrasound, Each 15 Minutes	PA Medical Necessity Review	PA Medical Necessity Review	PA Medical Necessity Review
PT/OT; Chiro 97110 Therapeutic Procedure, 1 Or More Areas, Each 15 Minutes; Therapeutic Exercises To Develop Steegith And Endurance, Range Of Motion And Flore 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 97113 Therapeutic Procedure, 1 Or More Areas, Each 15 Minutes; Aquatic Therapeutic Procedure, 1 Or More Areas, Each 15 Minutes; Aquatic Therapeutic Procedure, 1 Or More Areas, Each 15 Minutes; Aquatic Therapeutic Procedure, 1 Or More Areas, Each 15 Minutes; Aquatic Therapeutic Procedure, 1 Or More Areas, Each 15 Minutes; Aquatic Therapeutic Procedure, 1 Or More Areas, Each 15 Minutes; Aquatic Therapeutic Procedure, 1 Or More Areas, Each 15 Minutes; Aquatic Therapeutic Procedure, 1 Or More Areas, Each 15 Minutes; Gait Training (Includes Stair Climbing)  PT/OT; Acupuncture, Petrissage And/Or Tapotement (Stroking, Compression, Percussion)  PT/OT; Acupuncture, PrioT; Acupuncture, PrioT; Acupuncture, Acupuncture, PrioT; Acupuncture,	·			·	·	· · · · · · · · · · · · · · · · · · ·
PT/OT: Chiro  97112  Strength And Endurance, Range Of Motion And Flexibility  PA Medical Necessity Review	PT/OT	97039		PA Medical Necessity Review	PA Medical Necessity Review	PA Medical Necessity Review
PT/OT; Chiro 97112 Movement, Balance, Coordination, Kinesthetic Sense, Posture, And/Or Proprioception For Sitting And/Or Standing Activities  PT/OT; Chiro 97113 Therapeutic Procedure, 1 Or More Areas, Each 15 Minutes; Aquatic Therapy With Therapeutic Exercises  PT/OT; Chiro 97116 Therapeutic Procedure, 1 Or More Areas, Each 15 Minutes; Gait Training (Includes Stair Climbing)  PT/OT; Chiro 97124 Therapeutic Procedure, 1 Or More Areas, Each 15 Minutes; Gait Training (Includes Stair Climbing)  PT/OT; Acupuncture, Massage Therapy  PT/OT; Acupuncture, Chiro, Massage Therapy  PT/OT; Acupuncture, Chiro, Massage Therapy  PA Medical Necessity Review	PT/OT; Chiro	97110	Strength And Endurance, Range Of Motion And Flexibility	PA Medical Necessity Review	PA Medical Necessity Review	PA Medical Necessity Review
PT/OT; Chiro 97116 Therapeutic Procedure, 1 Or More Areas, Each 15 Minutes; Gait Training (Includes Stair Climbing)  PT/OT: Acupuncture, Massage Therapy  PT/OT; Acupuncture PT/OT; Acup	PT/OT; Chiro	97112	Movement, Balance, Coordination, Kinesthetic Sense, Posture, And/Or Proprioception For Sitting And/Or Standing Activities	PA Medical Necessity Review	PA Medical Necessity Review	PA Medical Necessity Review
PT/OT; Acupuncture, Massage Therapy  PT/OT; Acupuncture Acupuncture, Acupuncture PT/OT; A	PT/OT; Chiro	97113	Exercises	PA Medical Necessity Review	PA Medical Necessity Review	PA Medical Necessity Review
Acupuncture, Massage Therapy  PT/OT; Acupuncture PT/OT; Acupuncture, Chiro, Massage Therapy  PT/OT; Massage Therapy  PT/OT; Acupuncture, Chiro, Massage Therapy  PT/OT; Ma	PT/OT; Chiro	97116	• • • • • • • • • • • • • • • • • • • •	PA Medical Necessity Review	PA Medical Necessity Review	PA Medical Necessity Review
Acupuncture PT/OT; Acupuncture, Chiro, Massage Therapy  Acupuncture, Chiro, Massage Therapy  Acupuncture PT/OT:  Acupuncture, Chiro, Massage Therapy  Acupuncture PT/OT:  Acupuncture, Chiro, Massage Therapy  Acupuncture (Specify)  Acupuncture (Specify)  Annual Therapy Techniques (Eg, Mobilization/ Manipulation, Manual Lymphatic Drainage, PA Medical Necessity Review	Acupuncture, Massage Therapy	97124		PA Medical Necessity Review	PA Medical Necessity Review	PA Medical Necessity Review
PT/OT; Acupuncture, Chiro, Massage Therapy  Acupuncture, Manual Therapy Techniques (Eg, Mobilization/ Manipulation, Manual Lymphatic Drainage, Manual Traction), 1 Or More Regions, Each 15 Minutes  PA Medical Necessity Review  PA Medical Necessity Review  PA Medical Necessity Review		97139	Unlisted Therapeutic Procedure (Specify)	PA Medical Necessity Review	PA Medical Necessity Review	PA Medical Necessity Review
	PT/OT; Acupuncture, Chiro, Massage	97140		PA Medical Necessity Review	PA Medical Necessity Review	PA Medical Necessity Review
		97150	Therapeutic Procedure(S), Group (2 Or More Individuals)	PA Medical Necessity Review	PA Medical Necessity Review	PA Medical Necessity Review

Standardson Planta (p. 1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (1944) (	PT	97161	PT	Physical Therapy Evaluation: Low Complexity, Requiring These Components: A History With No Personal Factors And/Or Comorbidities That Impact The Plan Of Care; An Examination Of Body System(S) Using Standardized Tests And Measures Addressing 1-2 Elements From Any Of The Following: Body Structures And Functions, Activity Limitations, And/Or Participation Restrictions; A Clinical Presentation With Stable And/Or Uncomplicated Characteristics; And Clinical Decision Making Of Low Complexity Using Standardized Patient Assessment Instrument And/Or Measurable Assessment Of Functional Outcome. Typically, 20 Minutes Are Spent Face-To-Face With The Patient And/Or Family.	Of Any Any On PA Medical Necessity Review PA Medical Necessity Review	PA Medical Necessity Review
Present Problem With 3 Of More Personal Factors And/Or Commoditations That Impact The Plan Of Care. An Examination of Eog. Systems Using Standardized Tests And Nessures Addressing A Total Of 4 of More Elements From Any O'The Following Body Structures And Editional Properties of More Elements From Any O'The Following Body Structures And United More Addressing A Total O'A of More Elements From Any O'The Following Body Structures And United More Properties of More Pro	PT	97162	PT	Present Problem With 1-2 Personal Factors And/Or Comorbidities That Impact The Plan Of Care; An Examination Of Body Systems Using Standardized Tests And Measures In Addressing A Total Of 3 Or More Elements From Any Of The Following: Body Structures And Functions, Activity Limitations, And/Or Participation Restrictions; An Evolving Clinical Presentation With Changing Characteristics; And Clinical Decision Making Of Moderate Complexity Using Standardized Patient Assessment Instrument And/Or Measurable Assessment Of Functional	Of ressing ressing ressing respectively. PA Medical Necessity Review PA Medical Necessity Review real results and respectively.	PA Medical Necessity Review
An Examination Including A Review Of History And Use Of Standardized Tests And Measures Is Required. And Revised Plant of Care Using A Standard Patient Assessment Instrument And/Or Measurable Assessment Of Functional Outcome Typically, 20 Minutes Are Spent Face-To-Face With The Patient And/Or Family.  Occupational Therapy Evaluation, Low Complexity, Requiring These Components: An Occupational Profile And Medical And Therapy History, Which Includes A Brief History Including Review Of Medical And/Or Therapy Records Relating To The Presenting Problem; An Assessment(S) That Identifies 1:3 Performance Deficits (le. Relating To The Presenting Problem; An Assessment(S) That Identifies 1:3 Performance Deficits (le. Relating To The Presenting Problem; And Assessment(S) That Identifies 1:3 Performance Deficits (le. Relating To The Presenting Problem; And Clinical Decision Making Of Low Complexity, Which Induses An Analysis of The Occupational Profile, Analysis of Data From Problem-Foused Assessment(S), And Consideration of A Limited Number of Treatment Options. Patient Presents With No Complexity. Which Indused No Presents With No Presents With No Complexity. Which Includes An Analysis of Decorporational Profile And Medical And Therapy History, Which Includes An Expanded Review Of Medical And Therapy Records And Additional Review Of Physical, Cognitive, Or Psychosocal History Related To Current Functional Performance, An Assessment(S) That	PT	97163	PT	Present Problem With 3 Or More Personal Factors And/Or Comorbidities That Impact The Plan Of Care; An Examination Of Body Systems Using Standardized Tests And Measures Addressing A Total Of 4 Or More Elements From Any Of The Following: Body Structures And Functions, Activity Limitations, And/Or Participation Restrictions; A Clinical Presentation With Unstable And Unpredictable Characteristics; And Clinical Decision Making Of High Complexity Using Standardized Patient Assessment Instrument And/Or Measurable Assessment Of Functional Outcome. Typically, 45 Minutes Are Spent Face-To-Face With The Patient And/Or	And With PA Medical Necessity Review PA Medical Necessity Review PA Medical Necessity Review	PA Medical Necessity Review
Occupational Profile And Medical And/ Therapy History, Which Includes A Brief History Including Review Of Medical And/Or Therapy Records Relating To The Presenting Problem; An Assessment(S) That Identifies 1-3 Performance Deficits (le, Relating To Physical, Cognitive, Or Psychosocial Skills) That Result In Activity Limitations And/Or Participation Restrictions; And Clinical Decision Making Of Low Complexity, Which Includes An Analysis Of The Occupational Porfole, Analysis Of Data From Problem-Focused Assessment(S), And Consideration Of A Limited Number Of Treatment Options, Patient Presents With No Comorbidities That Affect Occupational Performance, Modification Of Tasks Or Assistance (Eg., Physical Or Verbal) With Assessment(S) Is Not Necessary To Enable Completion Of Evaluation Component. Typically, 30 Minutes Are Spent Face-To-Face With The Patient And/Or Family.  Occupational Therapy Evaluation, Moderate Complexity, Requiring These Components: An Occupational Profile And Medical And Therapy History, Which Includes An Expanded Review Of Medical And/Or Therapy Records And Additional Review Of Physical, Cognitive, Or Psychosocial History Related To Current Functional Performance; An Assessment(S) That	PT	97164	PT	An Examination Including A Review Of History And Use Of Standardized Tests And Measures Is Required; And Revised Plan Of Care Using A Standardized Patient Assessment Instrument And/Or Measurable Assessment Of Functional Outcome Typically, 20 Minutes Are Spent Face-	ures Is nt PA Medical Necessity Review PA Medical Necessity Review	PA Medical Necessity Review
Occupational Profile And Medical And Therapy History, Which Includes An Expanded Review Of Medical And/Or Therapy Records And Additional Review Of Physical, Cognitive, Or Psychosocial History Related To Current Functional Performance; An Assessment(S) That	ОТ	97165	ОТ	Occupational Profile And Medical And Therapy History, Which Includes A Brief History Including Review Of Medical And/Or Therapy Records Relating To The Presenting Problem; An Assessment(S) That Identifies 1-3 Performance Deficits (Ie, Relating To Physical, Cognitive, Or Psychosocial Skills) That Result In Activity Limitations And/Or Participation Restrictions; And Clinical Decision Making Of Low Complexity, Which Includes An Analysis Of The Occupational Profile, Analysis Of Data From Problem-Focused Assessment(S), And Consideration Of A Limited Number Of Treatment Options. Patient Presents With No Comorbidities That Affect Occupational Performance. Modification Of Tasks Or Assistance (Eg, Physical Or Verbal) With Assessment(S) Is Not Necessary To Enable Completion Of Evaluation Component. Typically,	ve, Or And tional PA Medical Necessity Review Act ) With	PA Medical Necessity Review
That Result In Activity Limitations And/Or Participation Restrictions: And Clinical Decision	ОТ	97166	ОТ	Occupational Profile And Medical And Therapy History, Which Includes An Expanded Review Of Medical And/Or Therapy Records And Additional Review Of Physical, Cognitive, Or Psychosocial History Related To Current Functional Performance; An Assessment(S) That Identifies 3-5 Performance Deficits (Ie, Relating To Physical, Cognitive, Or Psychosocial Skills) That Result In Activity Limitations And/Or Participation Restrictions; And Clinical Decision Making Of Moderate Analytic Complexity, Which Includes An Analysis Of The Occupational Profile, Analysis Of Data From Detailed Assessment(S), And Consideration Of Several Treatment Options. Patient May Present With Comorbidities That Affect Occupational Performance. Minimal To Moderate Modification Of Tasks Or Assistance (Eg, Physical Or Verbal) With Assessment(S) Is Necessary To Enable Patient To Complete Evaluation	riew Of  at Skills) PA Medical Necessity Review PA Medical Necessity Review	PA Medical Necessity Review
Occupational Therapy Evaluation, High Complexity, Requiring These Components: An Occupational Profile And Medical And Therapy History, Which Includes Review Of Medical And/Or Therapy Records And Extensive Additional Review Of Physical, Cognitive, Or Psychosocial History Related To Current Functional Performance; An Assessment(S) That Identifies 5 Or More Performance Deficits (Ie. Relating To Physical, Cognitive, Or Psychosocial Skills) That Result In Activity Limitations And/Or Participation Restrictions; And Clinical Decision Making Of High Analytic Complexity, Which Includes An Analysis Of The Patient Decision Making Of Deta From Comprehensive Assessment(S), And Consideration Of Multiple Treatment Options. Patient Presents With Comorbidities That Affect Occupational Performance. Significant Modification Of Tasks Or Assistance (Eg, Physical Or Verbal) With Assessment(S) Is Necessary To Enable Patient To Complete Evaluation Component. Typically, 60 Minutes Are Spent Face-To-Face With The Patient And/Or Family	ОТ	97167	ОТ	Occupational Profile And Medical And Therapy History, Which Includes Review Of Medical And/Or Therapy Records And Extensive Additional Review Of Physical, Cognitive, Or Psychosocial History Related To Current Functional Performance; An Assessment(S) That Identifies 5 Or More Performance Deficits (Ie, Relating To Physical, Cognitive, Or Psychosocial Skills) That Result In Activity Limitations And/Or Participation Restrictions; And Clinical Decision Making Of High Analytic Complexity, Which Includes An Analysis Of The Patient Profile, Analysis Of Data From Comprehensive Assessment(S), And Consideration Of Multiple Treatment Options. Patient Presents With Comorbidities That Affect Occupational Performance. Significant Modification Of Tasks Or Assistance (Eg, Physical Or Verbal) With Assessment(S) Is Necessary To Enable Patient To Complete Evaluation Component. Typically, 60 Minutes Are	PA Medical Necessity Review	PA Medical Necessity Review
Of Care. A Formal Reevaluation Is Performed When There Is A Documented Change In Functional Status Or A Significant Change To The Plan Of Care Is Required. Typically, 30 Minutes Are Spent Face-To-Face With The Patient And/Or Family.	ОТ		ОТ	Components: An Assessment Of Changes In Patient Functional Or Medical Status With Revised Plan Of Care; An Update To The Initial Occupational Profile To Reflect Changes In Condition Or Environment That Affect Future Interventions And/Or Goals; And A Revised Plan Of Care. A Formal Reevaluation Is Performed When There Is A Documented Change In Functional Status Or A Significant Change To The Plan Of Care Is Required. Typically, 30 Minutes Are Spent Face-To-Face With The Patient And/Or Family.	Plan PA Medical Necessity Review PA Medical Necessity Review  O	PA Medical Necessity Review
Improve Functional Performance), Each 15 Minutes	PT/OT; Chiro	97530	PT/OT; Chiro	Improve Functional Performance), Each 15 Minutes	PA Medical Necessity Review PA Medical Necessity Review	PA Medical Necessity Review
Sensory Integrative Techniques To Enhance Sensory Processing And Promote Adaptive PT/OT 97533 Responses To Environmental Demands, Direct (One-On-One) Patient Contact, Each 15 Minutes PA Medical Necessity Review PA Medical Nece	PT/OT	97533	PT/OT	Responses To Environmental Demands, Direct (One-On-One) Patient Contact, Each 15	PA Medical Necessity Review PA Medical Necessity Review	PA Medical Necessity Review
Self-Care/Home Management Training (Eg, Activities Of Daily Living (ADL) And Compensatory PT/OT 97535 Training, Meal Preparation, Safety Procedures, And Instructions In Use Of Assistive Technology Devices/Adaptive Equipment) Direct One-On-One Contact, Each 15 Minutes  Self-Care/Home Management Training (Eg, Activities Of Daily Living (ADL) And Compensatory PA Medical Necessity Review PA Medical Necessity Review PA Medical Necessity Review PA Medical Necessity Review	PT/OT	97535	PT/OT	Training, Meal Preparation, Safety Procedures, And Instructions In Use Of Assistive Technology	·	PA Medical Necessity Review

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	PA Medical Necessity Review	PA Medical Necessity Review	PA Medical Necessity Review
PT/OT	97542	Wheelchair Management (Eg, Assessment, Fitting, Training), Each 15 Minutes	PA Medical Necessity Review	PA Medical Necessity Review	PA Medical Necessity Review
PT/OT	97545	Work Hardening /Conditioning; Initial 2 Hours	PA Medical Necessity Review	PA Medical Necessity Review	PA Medical Necessity Review
PT/OT	97546	Work Hardening /Conditioning; Each Additional Hour (List Separately In Addition To Code For Primary Procedure)	PA Medical Necessity Review	PA Medical Necessity Review	PA Medical Necessity Review
PT/OT	97597	Debridement (Eg, High Pressure Waterjet With/Without Suction, Sharp Selective Debridement With Scissors, Scalpel And Forceps), Open Wound, (Eg, Fibrin, Devitalized Epidermis And/Or Dermis, Exudate, Debris, Biofilm), Including Topical Application(S), Wound Assessment, Use Of A Whirlpool, When Performed And Instruction(S) For Ongoing Care, Per Session, Total Wound(S) Surface Area; First 20 Sq Cm Or Less	PA Medical Necessity Review	PA Medical Necessity Review	PA Medical Necessity Review
PT/OT	97598	Debridement (Eg, High Pressure Waterjet With/Without Suction, Sharp Selective Debridement With Scissors, Scalpel And Forceps), Open Wound, (Eg, Fibrin, Devitalized Epidermis And/Or Dermis, Exudate, Debris, Biofilm), Including Topical Application(S), Wound Assessment, Use Of A Whirlpool, When Performed And Instruction(S) For Ongoing Care, Per Session, Total Wound(S) Surface Area; Each Additional 20 Sq Cm, Or Part Thereof (List Separately In Addition To Code For Primary Procedure)	PA Medical Necessity Review	PA Medical Necessity Review	PA Medical Necessity Review
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	PA Medical Necessity Review	PA Medical Necessity Review	PA Medical Necessity Review
PT/OT	97605	Negative Pressure Wound Therapy (Eg, Vacuum Assisted Drainage Collection), Utilizing Durable Medical Equipment (DME), Including Topical Application(S), Wound Assessment, And Instruction(S) For Ongoing Care, Per Session; Total Wound(S) Surface Area Less Than Or Equal To 50 Square Centimeters	PA Medical Necessity Review	PA Medical Necessity Review	PA Medical Necessity Review
PT/OT	97606	Negative Pressure Wound Therapy (Eg, Vacuum Assisted Drainage Collection), Utilizing Durable Medical Equipment (DME), Including Topical Application(S), Wound Assessment, And Instruction(S) For Ongoing Care, Per Session; Total Wound(S) Surface Area Greater Than 50 Square Centimeters	PA Medical Necessity Review	PA Medical Necessity Review	PA Medical Necessity Review
PT/OT; Chiro	97750	Physical Performance Test Or Measurement (Eg, Musculoskeletal, Functional Capacity), With Written Report, Each 15 Minutes	PA Medical Necessity Review	PA Medical Necessity Review	PA Medical Necessity Review
PT/OT/ST	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	PA Medical Necessity Review	PA Medical Necessity Review	PA Medical Necessity Review
PT/OT; Chiro	97760	Orthotic(S) Management And Training (Including Assessment And Fitting When Not Otherwise Reported), Upper Extremity(les), Lower Extremity(les) And/Or Trunk, Initial Orthotic(S) Encounter, Each 15 Minutes	PA Medical Necessity Review	PA Medical Necessity Review	PA Medical Necessity Review
PT/OT; Chiro	97761	Prosthetic(S) Training, Upper And/Or Lower Extremity(les), Initial Prosthetic(S) Encounter, Each 15 Minutes	PA Medical Necessity Review	PA Medical Necessity Review	PA Medical Necessity Review
PT/OT	97763	Orthotic(S)/Prosthetic(S) Management And/Or Training, Upper Extremity(Ies), Lower Extremity(Ies), And/Or Trunk, Subsequent Orthotic(S)/Prosthetic(S) Encounter, Each 15 Minutes	PA Medical Necessity Review	PA Medical Necessity Review	PA Medical Necessity Review
PT/OT; Chiro	G0283	Electrical Stimulation (Unattended), To One Or More Areas For Indication(S) Other Than Wound Care, As Part Of A Therapy Plan Of Care	PA Medical Necessity Review	PA Medical Necessity Review	PA Medical Necessity Review