



Prior Authorization Procedure List: Musculoskeletal Physical Therapy Management

Category	CPT® Codes	CPT® / HCPCS Description	Notations	Jefferson Health Plans		Health Partners Plans	
				JHP Commercial (ACA)	JHP Medicare	HPP Medicaid	HPP Healthy Beginnings
OT	97010	Application of a modality to 1 or more areas; hot or cold packs		Out Of Scope	Included	Included	Included
PT	97012	Application of a modality to 1 or more areas; traction, mechanical		Out Of Scope	Included	Included	Included
OT	97014	Application of a modality to 1 or more areas; electrical stimulation (unattended)		Out Of Scope	Included	Included	Included
PT	97016	Application of a modality to 1 or more areas; vasopneumatic devices		Out Of Scope	Included	Included	Included
OT	97018	Application of a modality to 1 or more areas; paraffin batch		Out Of Scope	Included	Included	Included
PT	97022	Application of a modality to 1 or more areas; whirlpool		Out Of Scope	Included	Included	Included
PT	97024	Application of a modality to 1 or more areas; diathermy (eg, microwave)		Out Of Scope	Included	Included	Included
PT	97026	Application of a modality to 1 or more areas; infrared		Out Of Scope	Included	Included	Included
PT	97028	Application of a modality to 1 or more areas; ultraviolet		Out Of Scope	Included	Included	Included
OT	97032	Application of a modality to 1 or more areas; electrical stimulation (manual), each 15 minutes		Out Of Scope	Included	Included	Included
PT	97033	Application of a modality to 1 or more areas; iontophoresis, each 15 minutes		Out Of Scope	Included	Included	Included
OT	97034	Application of a modality to 1 or more areas; contrast baths, each 15 minutes		Out Of Scope	Included	Included	Included
OT	97035	Application of a modality to 1 or more areas; ultrasound, each 15 minutes		Out Of Scope	Included	Included	Included
PT	97036	Application of a modality to 1 or more areas; Hubbard tank, each 15 minutes		Out Of Scope	Included	Included	Included
PT	97039	Unlisted modality (specify type and time if constant attendance)		Out Of Scope	Included	Included	Included
OT	97110	Therapeutic procedure, 1 or more areas, each 15 minutes; therapeutic exercises to develop strength and endurance, range of motion and flexibility		Out Of Scope	Included	Included	Included
OT	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		Out Of Scope	Included	Included	Included
OT	97113	Therapeutic procedure, 1 or more areas, each 15 minutes; aquatic therapy with therapeutic exercises		Out Of Scope	Included	Included	Included
PT	97116	Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)		Out Of Scope	Included	Included	Included
OT	97124	Therapeutic procedure, 1 or more areas, each 15 minutes; massage, including effleurage, petrissage and/or tapotement (stroking, compression, percussion)		Out Of Scope	Included	Included	Included
OT	97129	Therapeutic interventions that focus on cognitive function (e.g., attention, memory, reasoning, executive function, problem solving, and/or pragmatic functioning) and compensatory strategies to manage the performance of an activity (e.g., managing time or schedules, initiating, organizing and sequencing tasks), direct (one-on-one) patient contact.		Out Of Scope	Included	Included	Included
PT	97139	Unlisted therapeutic procedure (specify)		Out Of Scope	Included	Included	Included
OT	97140	Manual therapy techniques (eg, mobilization/manipulation, manual lymphatic drainage, manual traction), 1 or more regions, each 15 minutes		Out Of Scope	Included	Included	Included
PT	97150	Therapeutic procedure(s), group (2 or more individuals)		Out Of Scope	Included	Included	Included
OT	97165	OT Initial Evaluation		Out Of Scope	Included	Included	Included
OT	97166	OT Initial Evaluation		Out Of Scope	Included	Included	Included
OT	97167	OT Initial Evaluation		Out Of Scope	Included	Included	Included
OT	97168	OT Re-Evaluation		Out Of Scope	Included	Included	Included

Category	CPT® Codes	CPT® / HCPCS Description	Notations	JHP Commercial (ACA)	JHP Medicare	HPP Medicaid	HPP Healthy Beginnings
PT	97530	Therapeutic activities, direct (one-on-one) patient contact by the provider (use of dynamic activities to improve functional performance), each 15 minutes		Out Of Scope	Included	Included	Included
PT	97533	Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact by the provider, each 15 minutes		Out Of Scope	Included	Included	Included
OT	97535	Self-care/home management training (eg, activities of daily living (ADL) & compensatory training, meal preparation, safety procedures, & instructions in use of assistive technology devices/adaptive equipment) direct 1:1 contact by provider, each 15 min.		Out Of Scope	Included	Included	Included
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 by provider, each 15 minutes		Out Of Scope	Included	Included	Included
PT	97542	Wheelchair management (eg, assessment, fitting, training), each 15 minutes		Out Of Scope	Included	Included	Included
OT	97545	Work hardening/conditioning; initial 2 hours		Out Of Scope	Included	Included	Included
OT	97546	Work hardening/conditioning; each additional hour (List separately in addition to code for primary procedure)		Out Of Scope	Included	Included	Included
PT	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		Out Of Scope	Included	Included	Included
OT	97750	Physical performance test or measurement (eg, musculoskeletal, functional capacity), with written report, each 15 minutes		Out Of Scope	Included	Included	Included
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 by provider, with written report, each 15 minutes		Out Of Scope	Included	Included	Included
OT	97760	Orthotic(s) management and training (including assessment and fitting when not otherwise reported), upper extremity(s), lower extremity(s) and/or trunk, each 15 minutes		Out Of Scope	Included	Included	Included
PT	97761	Prosthetic training, upper and/or lower extremity(s), each 15 minutes		Out Of Scope	Included	Included	Included
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		Out Of Scope	Included	Included	Included
OT	97799	Unlisted physical medicine/rehabilitation procedure		Out Of Scope	Included	Included	Included
OT	97130	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; each additional 15 minutes (List separately in addition to code for primary procedure)		Out Of Scope	Included	Included	Included

CPT® copyright 2024 American Medical Association. All rights reserved. CPT is a registered trademark of the American Medical Association.