

Rehabilitation CPT Codes and Descriptions

Physical Therapy Procedure Codes

Anthem Fully Integrated Dual Eligible (NY) Program

A listing of CPT Codes requiring a pre-authorization from the Carelon Medical Benefits Management Rehabilitation Program listed by membership type.

Anthem Fully Integrated Dual Eligible Membership (NY)	
CPT CODES	DESCRIPTION
97032*	Application of electrical stimulation to 1 or more areas
G0283*	Electrical Stimulation, to one or more areas, for other than wound care
97024*	Application of heat wave therapy to 1 or more areas
97026*	Application of low energy heat (infrared) to 1 or more areas
97033*	Application of medication through skin using electrical current, each 15 minutes
97035*	Application of ultrasound to 1 or more areas, each 15 minutes
20560*	Needle insertion(s) without injection(s), 1 or 2 muscle(s)
20561*	Needle insertion(s) without injection(s), 3 or more muscle(s)
90901	Biofeedback training by any modality (when done for medically necessary indications)
90912	Biofeedback training for bowel or bladder control, initial 15 minutes
90913	Biofeedback training for bowel or bladder control, additional 15 minutes
97016	Application of blood vessel compression or decompression device to 1 or more areas
96001	Three-dimensional, video-taped, computer-based gait analysis during walking

97012	Application of mechanical traction to 1 or more areas
97028	Application of ultraviolet light to 1 or more areas
97022	Application of whirlpool therapy to 1 or more areas
97018	Application of hot wax bath to 1 or more areas
97034	Therapeutic hot and cold baths to 1 or more areas, each 15 minutes
97036	Physical therapy treatment to 1 or more areas, Hubbard tank, each 15 minutes
97110	Therapeutic exercise to develop strength, endurance, range of motion, and flexibility, each 15 minutes
97112	Therapeutic procedure to re-educate brain-to-nerve-to-muscle function, each 15 minutes
97113	Water pool therapy with therapeutic exercises to 1 or more areas, each 15 minutes
97116	Walking training to 1 or more areas, each 15 minutes
97124	Therapeutic massage to 1 or more areas, each 15 minutes
97140	Manual (physical) therapy techniques to 1 or more regions, each 15 minutes
97150	Therapeutic procedures in a group setting
97164	Re-evaluation of physical therapy, typically 20 minutes
97530	Therapeutic activities to improve function, with one-on-one contact between patient and provider, each 15 minutes
97533	Sensory technique to enhance processing and adaptation to environmental demands, each 15 minutes
97535	Self-care or home management training, each 15 minutes
97537	Community or work reintegration training, each 15 minutes
97542	Wheelchair management, each 15 minutes
97750	Physical performance test or measurement with report, each 15 minutes

97755	Assistive technology assessment to enhance functional performance, each 15 minutes
97760	Training in use of orthotics (supports, braces, or splints) for arms, legs and/or trunk, per 15 minutes
97761	Training in use of prosthesis for arms and/or legs, per 15 minutes
97763	Management and/or training in use of orthotics (supports, braces, or splints) for arms, legs, and/or trunk, per 15 minutes

*

The Physical Therapy CPT codes with the asterisk are required to be entered individually (if being requested as a part of the treatment plan) in addition to the treatment CPT code, as coverage determinations may vary.

Rehabilitation CPT Codes and Descriptions

Occupational Therapy Procedure Codes

Anthem Fully Integrated Dual Eligible (NY) Program

A listing of CPT Codes requiring a pre-authorization from the Carelton Medical Benefits Management Rehabilitation Program listed by membership type.

Anthem Fully Integrated Dual Eligible Membership (NY)

CPT CODES	DESCRIPTION
97129*	One-on-one therapeutic interventions focused on thought processing and strategies to manage activities
97130*	each additional 15 minutes (list separately in addition to code for primary procedure)
20560*	Needle insertion(s) without injection(s), 1 or 2 muscle(s)
20561*	Needle insertion(s) without injection(s), 3 or more muscle(s)
97032*	Application of electrical stimulation to 1 or more areas
97033*	Application of medication through skin using electrical current, each 15 minutes
97024*	Application of heat wave therapy to 1 or more areas
97026*	Application of low energy heat (infrared) to 1 or more areas
97035*	Application of ultrasound to 1 or more areas, each 15 minutes
G0283*	Electrical Stimulation, to one or more areas, for other than wound care
90901	Biofeedback training by any modality (when done for medically necessary indications)
97016	Application of blood vessel compression or decompression device to 1 or more areas
97012	Application of mechanical traction to 1 or more areas

97028	Application of ultraviolet light to 1 or more areas
97022	Application of whirlpool therapy to 1 or more areas
97018	Application of hot wax bath to 1 or more areas
97034	Therapeutic hot and cold baths to 1 or more areas, each 15 minutes
97036	Physical therapy treatment to 1 or more areas, Hubbard tank, each 15 minutes
97110	Therapeutic exercise to develop strength, endurance, range of motion, and flexibility, each 15 minutes
97112	Therapeutic procedure to re-educate brain-to-nerve-to-muscle function, each 15 minutes
97113	Water pool therapy with therapeutic exercises to 1 or more areas, each 15 minutes
97116	Walking training to 1 or more areas, each 15 minutes
97124	Therapeutic massage to 1 or more areas, each 15 minutes
97140	Manual (physical) therapy techniques to 1 or more regions, each 15 minutes
97150	Therapeutic procedures in a group setting
97168	Re-evaluation of occupational therapy established plan of care, typically 30 minutes
97530	Therapeutic activities to improve function, with one-on-one contact between patient and provider, each 15 minutes
97533	Sensory technique to enhance processing and adaptation to environmental demands, each 15 minutes
97535	Self-care or home management training, each 15 minutes
97537	Community or work reintegration training, each 15 minutes
97542	Wheelchair management, each 15 minutes
97750	Physical performance test or measurement with report, each 15 minutes

97755	Assistive technology assessment to enhance functional performance, each 15 minutes
97760	Training in use of orthotics (supports, braces, or splints) for arms, legs and/or trunk, per 15 minutes
97761	Training in use of prosthesis for arms and/or legs, per 15 minutes
97763	Management and/or training in use of orthotics (supports, braces, or splints) for arms, legs, and/or trunk, per 15 minutes
S8950	Complex lymphedema therapy, each 15 minutes
S8990	Physical or manipulative therapy for maintenance
92606	Therapeutic services for use of non-speech-generating device with programming
92609	Therapeutic services for use of speech-generating device with programming
92526	Treatment of swallowing and/or oral feeding function

*

The Occupational Therapy CPT codes with the asterisk are required to be entered individually (if being requested as a part of the treatment plan) in addition to the treatment CPT code, as coverage determinations may vary.

Rehabilitation CPT Codes and Descriptions

Speech Therapy Procedure Codes

Anthem Fully Integrated Dual Eligible (NY) Program

A listing of CPT Codes requiring a pre-authorization from the Carelon Medical Benefits Management Rehabilitation Program listed by membership type.

Anthem Fully Integrated Dual Eligible Membership (NY)

CPT CODES	DESCRIPTION
97129*	One-on-one therapeutic interventions focused on thought processing and strategies to manage activities
97130*	each additional 15 minutes (list separately in addition to code for primary procedure)
92507	Treatment of speech, language, voice, communication, and/or hearing processing disorder
92508	Group treatment of speech, language, voice, communication, and/or hearing processing disorder
92526	Treatment of swallowing and/or oral feeding function
92606	Therapeutic services for use of non-speech-generating device with programming
92609	Therapeutic services for use of speech-generating device with programming

*

The Speech Therapy CPT codes with the asterisk are required to be entered individually (if being requested as a part of the treatment plan) in addition to the treatment CPT code, as coverage determinations may vary.