## KY Medicaid Occupational Therapy Fee Schedule 2024 (Provider Type 88)

revised 2.6.2024

\$7.29

AND FAMILY SERVICES

## Notes:

96110

- Red indicates new codes or changes for the most current revision date.
- See Updates tab at bottom of excel spreadsheet for updates made to the fee schedule.

**DEVELOPMENTAL SCREEN W/SCORE** 

- It is the responsibility of the provider to check member eligibility.
- Beginning June 1, 2022 modifier CO will be used instead of U1.
- The appearance on this website of a code and rate is not an indication of coverage, nor a guarantee of payment.
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			Non-Facility		Facility		
Code	Modifier	Duration	Description	Therapist Rate	Assistant Rate	Therapist Rate	Assistant Rate
			TREATMENT OF SWALLOWING AND				
92526		Episode	FEEDING DISORDER	\$51.94	\$30.56	\$51.94	\$30.56
			MEASUREMENTS OF RANGE OF MOTION				
95851		Episode	IN ARM, LEG OR EACH SPINE SECTION.	\$12.32	\$7.25	\$4.86	\$2.86
			MEASUREMENT OF RANGE OF MOTION				
95852		Episode	OF HAND	\$10.17	\$5.99	\$3.38	\$1.99
			NEEDLE MEASUREMENT OF ELECTRICAL				
			ACTIVITY IN ARM OR LEG MUSCLES, 1				
95860		Episode	EXTREMITY	\$70.21	\$41.30	\$70.21	\$41.30
			NEEDLE MEASUREMENT OF ELECTRICAL				
			ACTIVITY IN ARM OR LEG MUSCLES, 2				
95861		Episode	EXTREMITIES	\$101.85	\$59.91	\$101.85	\$59.91
93001		Episode		\$101.85	\$39.91	\$101.85	\$59.91
			NEEDLE MEASUREMENT OF ELECTRICAL				
0=060			ACTIVITY IN ARM OR LEG MUSCLES, 3	4	4	4	4 4_
95863		Episode	EXTREMITIES	\$132.38	\$77.87	\$132.38	\$77.87
			NEEDLE MEASUREMENT OF ELECTRICAL				
			ACTIVITY IN ARM OR LEG MUSCLES, 1				
			EXREMITY				
95864		Episode	LANCIALL I	\$147.77	\$86.93	\$147.77	\$86.93



\$7.29

\$4.29

15 min

\$4.29

			Non-F	acility	Fac	ility
		ADMINISTRATION OF DEVELOPMENTAL				
96112	Episode	TEST, FIRST HOUR	\$78.80	\$46.35	\$78.03	\$45.90
		ADMINISTRATION OF DEVELOPMENTA				
96113	Episode	TEST,EACH ADDITIONAL 30 MINUTES	\$37.03	\$21.78	\$34.92	\$20.54
		TEST TO ASSESS THE ABILTIY TO				
		COMPLETE FUNCTIONAL TASKS				
96125	Per Hour	APPLICABLE TO ENVIRONMENT	\$63.50	\$37.35	\$63.50	\$37.35
		APPLICATION OF ELECTICAL				
97014	Episode	STIMULATION	\$8.85	\$5.21	\$8.85	\$5.21
		APPLICATION OF BLOOD VESSEL				
97016	Episode	COMPRESSION DEVICE	\$7.22	\$4.25	\$7.22	\$4.25
97018	Episode	APPLICATION OF HOT WAX BATH	\$3.42	\$2.01	\$3.42	\$2.01
97022	Episode	APPLICATION OF WHIRLPOOL THERAPY	\$10.26	\$6.03	\$10.26	\$6.03
97024	Episode	APPLICATION OF HEAT WAVE	\$4.19	\$2.46	\$4.19	\$2.46
97026	Episode	APPLICATION OF LOW ENERGY HEAT	\$3.83	\$2.25	\$3.83	\$2.25
97028	Episode	APPLICATION OF ULTRAVIOLET LIGHT	\$4.83	\$2.84	\$4.83	\$2.84
		APPLICATION OF ELECTRICAL				
		STIMULATION WITH THERAPIST PRESENT,				
97032	15 min	EACH 15 MINUTES	\$8.96	\$5.27	\$8.96	\$5.27
		APPLICATION OF MEDICATION USING				
97033	15 min	ELECTRICAL CURRENT, EACH 15 MINUTES	\$11.86	\$6.98	\$11.86	\$6.98
		APPLICATION OF HOT AND COLD BATHS,				
97034	15 min	EACH 15 MINUTES	\$8.84	\$5.20	\$8.84	\$5.20
97035	15 min	APPLICATION OF ULTRASOUND 15 MIN	\$8.65	\$5.09	\$8.65	\$5.09
		APPLICATION OF WATER THERAPY USING				
97036	15 min	A SPECIAL TANK, EACH 15 MINUTES	\$20.16	\$11.86	\$20.16	\$11.86
		THERAPY PROCEDURE USING EXERCISE				
		TO DEVELOP STRENGTH, ENDURANCE,				
		RANGE OF MOTION AND FLEXIILITY, EACH				
97110	15 min	15 MINUTES	\$17.96	\$10.56	\$17.96	\$10.56



			Non-Facility		Fac	Facility	
		THERAPY PROCEDURE TO RE-EDUCATE					
		BRAIN-TO-NERVE-TO-MUSCLE FUNCTION,					
97112	15 min	EACH 15 MINUTES.	\$20.79	\$12.23	\$20.79	\$12.23	
		THERAPY PROCEDURE USING WATER					
97113	15 min	POOL TO EXERCISES, EACH 15 MINUTES	\$22.27	\$13.10	\$22.27	\$13.10	
		THERAPY PROCEDURE FOR WALKING					
97116	15 min	TRAINING, EACH 15 MINUTES	\$17.96	\$10.56	\$17.96	\$10.56	
		THERAPY PROCEDURE USING MASSAGE,					
97124	15 min	EACH 15 MINUTES	\$17.88	\$10.52	\$17.88	\$10.52	
		THERAPY PROCEDURE FOR A RANGE OF					
97129	Episode	MENTAL PROCESSES, INITIAL 15 MINUTES	\$14.27	\$8.40	\$14.27	\$8.40	
		THERAPY PROCEDURE FOR A RANGE OF					
		MENTAL PROCESSES, EACH ADDITIONAL					
97130	Episode	15 MINUTES	\$13.83	\$8.13	\$13.64	\$8.02	
		THERAPY PROCEDURE USING MANUAL					
97140	15 min	TECHNIQUE, EACH 15 MINUTES	\$16.56	\$9.74	\$16.56	\$9.74	
97150	Episode	THERAPY PROCEDURE IN A GROUP SETTIN	\$10.80	\$6.35	\$10.80	\$6.35	
97165		EVALUATION FOR OCCUPATIONAL					
97103	Episode	THERAPY, TYPICALLY 30 MINUTES	\$61.52	\$36.19	\$61.52	\$36.19	
97166		EVALUATION FOR OCCUPATIONAL					
97100	Episode	THERAPY, TYPICALLY 45 MINUTES	\$61.52	\$36.19	\$61.52	\$36.19	
97167		EVALUATION FOR OCCUPATIONAL					
97107	Episode	THERAPY, TYPICALLY 1 HOUR	\$61.52	\$36.19	\$61.52	\$36.19	
07169		RE-EVALUATION FOR OCCUPATIONAL					
97168	Episode	THERAPY, TYPICALLY 30 MINUTES	\$42.04	\$24.73	\$42.04	\$24.73	
97530		THERAPY PROCEDURE USING					
97530	15 min	FUNCTIONAL ACTIVITIES	\$22.34	\$13.14	\$22.34	\$13.14	
07522		THERAPY PROCEDURE USING SENSORY					
97533	15 min	EXPERIENCES	\$37.99	\$22.35	\$37.99	\$22.35	
97535		TRAINING FOR SELF-CARE OR HOME					
31333	15 min	MANAGEMENT, EACH 15 MINUTES	\$19.88	\$11.69	\$19.88	\$11.69	



			Non-F	acility	Facility	
07527		TRAINING FOR COMMUNITY OR WORK				
97537	15 min	REINTEGRATION, EACH 15 MINUTESS	\$19.39	\$11.41	\$19.39	\$11.41
97542		EVALUATION FOR WHEELCHAIR, EACH 15				
97542	15 min	MINUTES	\$19.39	\$11.41	\$19.39	\$11.41
		CAREGIVER TRAINING IN STRATEGIES				
		AND TECHNIQUES TO FACILITATE THE				
		PATIENT'S FUNCTIONAL PERFORMANCE				
		IN THE HOME OR COMMUNITY, INITIAL				
97550	30 min	30 MINUTES	\$31.70	\$18.65	\$31.70	\$18.65
		CAREGIVER TRAINING IN STRATEGIES				
		AND TECHNIQUES TO FACILITATE THE				
		PATIENT'S FUNCTIONAL PERFORMANCE				
		IN THE HOME OR COMMUNITY, EACH				
97551	15 min	ADDITIONAL 15 MINUTES	\$15.85	\$9.33	\$14.76	\$8.68
		GROUP CAREGIVER TRAINING IN				
		STRATEGIES AND TECHNIQUES TO				
		FACILITATE THE PATIENT'S FUNCTIONAL				
		PERFORMANCE IN THE HOME OR				
97552	Episode	COMMUNITY	\$12.86	\$7.57	\$12.86	\$7.57
		TEST OR MEASUREMENT FOR				
97750		FUNCTIONAL CAPACITY, EACH 15				
	15 min	MINUTES	\$20.26	\$11.92	\$20.26	\$11.92
		EVALUATION FOR ASSISTIVE				
97755	15 min	TECHNOLOGY EACH 15 MINUTES	\$23.24	\$13.67	\$23.24	\$13.67
		TRAINING IN THE USE OF ORTHOPEDIC				
		DEVICE FOR ARM, LEG, AND/TRUNK,				
97760	15 min	EACH 15 MINUTES	\$29.03	\$17.08	\$29.03	\$17.08
		TRAINING IN THE USE OF ARTIFICIAL ARM				
97761	15 min	AND/OR LEG, EACH 15 MINUTES	\$25.01	\$14.71	\$25.01	\$14.71



			Non-Facility		Fac	Facility	
97763	15 min	FOLLOW-UP TRAINING IN THE USE OF ORTHOPEDIC DEVICE OR ARTIFICIAL ARM, LEG AND/OR TRUNK, EACH 15 MINUTES	\$32.04	\$18.85	\$32.04	\$18.85	
99421	Episode	ONLINE DIGITAL EVALUATION AND MANAGEMENT SERVICE FOR AN ESTABLISHED PATIENT FOR UP TO 7 DAYS, TOTAL TIME 5-10 MINUTES	\$11.94	\$11.94	\$10.39	\$10.39	
99422	Episode	ONLINE EVALUATION AND MANAGEMENT SERVICE FOR AN ESTABLISHED PATIENT FOR UP TO 7 DAYS, TOTAL TIME 5 -10 MINUTES	\$23.87	\$23.87	\$21.28	\$21.28	
99423	Episode	ONLINE DIGITAL EVALUATION AND MANAGEMENT SERVICE FOR AN ESTABLISHED PATIENT FOR UP TO 7 DAYS, TOTAL TIME 21 OR MORE MINUTES	\$38.56	\$38.56	\$33.89	\$33.89	
99441	Episode	TELEPHONE MEDICAL DISCUSSION WITH PHYSICIAN, 5-10 MINUTES	\$42.63	\$42.63	\$40.36	\$40.36	
99442	Episode	TELEPHONE MEDICAL DISCUSSION WITH PHYSICIAN, 11 - 20 MINUTES	\$67.10	\$67.10	\$61.98	\$61.98	
99443	Episode	TELEPHONE MEDICAL DISCUSSION WITH PHYSICIAN, 21 -30 MINUTES	\$98.39	\$98.39	\$87.17	\$87.17	
99446	Episode	TELEPHONE, INTERNET, OR ELECTRONIC HEALTH RECORD ASSESSMENT AND MANAGEMENT WITH VERBAL AND WRITTEN REPORT BY CONSULTING PHYSICIAN, 5-10 MINUTES	\$11.33	\$6.66	\$11.33	\$6.66	
99447	Episode	TELEPHONE OR INTERNET ASSESSMENT WITH VERBAL AND WRITTEN REPORT BY CONSULTING PHYSICIAN, 11-20 MINUTES	\$22.28	\$13.11	\$22.28	\$13.11	



			Non-F	acility	Fac	ility
99448	Episode	TELEPHONE OR INTERNET ASSESSMENT WITH VERBAL AND WRITTEN REPORT BY CONSULTING PHYSICIAN, 21-30 MINUTES	\$33.44	\$19.67	\$33.44	\$19.67
99449	Episode	TELEPHONE OR INTERNET ASSESSMENT WITH VERBAL AND WRITTEN REPORT BY CONSULTING PHYSICIAN, MORE THAN 30 MINUTES	\$44.78	\$26.34	\$44.78	\$26.34
99451	Episode	TELEPHONE, INTERNET, OR ELECTRONIC HEALTH RECORD ASSESSMENT AND MANAGEMENT WITH WRITTEN REPORT BY CONSULTING PHYSICIAN, AT LEAST 5 MINUTES	\$22.11	\$13.01	\$22.11	\$13.01
99452	Episode	TELEPHONE OR INTERNET REFERRAL SERVICE, 30 MINUTES	\$22.47	\$13.22	\$22.47	\$13.22
99453	Episode	REMOTE MONITORING OF PHYSIOLOGIC PARAMETERS, INITIAL SET-UP AND PATIENT EDUCATION ON USE OF EQUIPMENT	\$11.00	\$6.47	\$11.00	\$6.47
		REMOTE MONITORING OF PHYSIOLOGIC PARAMETERS, INITIAL SUPPLY OF DEVICES WITH DAILY RECORDINGS OR PROGRAMMED ALERTS TRANSMISSION,				·
99454	Episode	EACH 30 DAYS  MANAGEMENT USING THE RESULTS OF REMOTE VITAL SIGN MONITORING PER	\$30.86	\$18.15	\$30.86	\$18.15
99457	Episode	CALENDAR MONTH, FIRST 20 MINUTES  MANAGEMENT USING THE RESULTS OF REMOTE VITAL SIGN MONITORING PER CALENDAR MONTH, EACH ADDITIONAL	\$39.02	\$39.02	\$25.53	\$25.53
99458	Episode	20 MINUTES	\$32.38	\$32.38	\$25.53	\$25.53



			Non-F	Non-Facility Fa		Facility	
		EDUCATION AND TRAINING TO SELF					
99473	Episode	MEASURE BLOOD PRESSURE	\$8.03	\$8.03	\$8.03	\$8.03	

