



CABINET FOR HEALTH AND FAMILY SERVICES
Department for Medicaid Services


Andy Beshear
Governor

275 East Main Street, 6WA
Frankfort, KY 40621
www.chfs.ky.gov

Lisa D. Lee
Commissioner

Eric C. Friedlander
Secretary

TO: Intermediate Care Clinic - Individuals with Intellectual Disability (ICF/IID) (PT10)
Provider Letter #A-01
Community Mental Health (PT 30) Provider Letter #A-119
Multi-Therapy Agency (PT 76) Provider Letter #A-02
Physical Therapist (PT 87) Provider Letter #A-10
Occupational Therapist (PT 88) Provider Letter #A-10

FROM: Lisa D. Lee, Commissioner 

DATE: February 15, 2022

RE: Fee-For-Service Outpatient Therapy Assistant Billing

To align with CMS use of modifiers for reduced payment for occupational therapy and physical therapy services furnished in whole or in part by occupational therapy assistants (OTAs) and physical therapist assistants (PTAs), DMS is implementing the use of modifier CO and CQ when billing for OTAs and PTAs in place of current modifier U1.

Beginning on June 1, 2022, all claims billed for outpatient therapy services will require the use of CO modifier when billing for services furnished by an OTA and CQ modifier when billing for services furnished by a PTA.

Effective Date: June 1, 2022

Changes: Fee-For-Service claims only

- CO modifier: Outpatient occupational therapy services furnished in whole or in part by an occupational therapy assistant
- CQ modifier: Outpatient physical therapy services furnished in whole or in part by a physical therapist assistant

If you have questions or concerns regarding this matter, please contact DMS contractor Gainwell Technologies, Provider Billing Inquiry 800-807-1232.



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