

DEPARTMENT OF HEALTH AND HUMAN SERVICES
OFFICE OF DIRECTOR

ACTION REFERRAL

TO <i>Taylor</i>	DATE <i>3-25-15</i>
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DIRECTOR'S USE ONLY	ACTION REQUESTED
1. LOG NUMBER 000214	<input type="checkbox"/> Prepare reply for the Director's signature DATE DUE _____
2. DATE SIGNED BY DIRECTOR <i>CC: Singleton cleared 4/13/15, letter attached.</i>	<input checked="" type="checkbox"/> Prepare reply for appropriate signature DATE DUE <i>4-3-15</i>
	<input type="checkbox"/> FOIA DATE DUE _____
	<input type="checkbox"/> Necessary Action

APPROVALS (Only when prepared for director's signature)	APPROVE	* DISAPPROVE (Note reason for disapproval and return to preparer.)	COMMENT
1.			
2.			
3.			
4.			

Lowcountry Orthopaedics & Sports Medicine

Lowcountry Orthopaedics
2880 Tricom Street
N Charleston SC 29406
(843) 797-5050

RECEIVED

MAR 24 2015

Department of Health & Human Services
OFFICE OF THE DIRECTOR

March 19, 2015

Christian L. Soura, Director
SC DHHS-Medicaid
PO Box 8206
Columbia, S. C. 29202

RE: Procedure Code 97022

Dear Mr. Soura:

It has come to our attention that Procedure Code 97022 is not on any fee schedules for Occupational Therapy or for Physicians. It is a covered code as listed in the SCDHHS manual under SECTION 4 Procedure Codes (for PT,OT,SP) but we cannot find it on any fee schedule. Also, we have spoken to Medicaid reps, Duron and Linda and they could not find it either. It was suggested that we write this letter to you.

97022 Description: Application of a modality to 1 or more areas; Whirlpool

We have had problems with other Medicaid plans stating this is not on your fee schedules so they are not paying us for this code either.

After your review, please advise. Thank you.

Sincerely,

Mary Ellen Lucas
Insurance Billing Specialist
Direct Tel: 843-266-4874
Dept Fax: 843-824-5991

SECTION 4 PROCEDURE CODES

PROCEDURE CODES REQUIRING PRIOR AUTHORIZATION

CPT CODES (PT, OT, SP) REQUIRING PRIOR AUTHORIZATION REVIEW

KePRO will preauthorize physical, occupational or speech therapy (PT, OT, ST), CPT codes listed below and may be reached at 1-855-326-5219.

Diagnosis Code	Description
92506	EVALUATION OF SPEECH, LANGUAGE, VOICE, COMMUNICATION, AND/OR AUDITORY PROCESSING
92507	TREATMENT OF SPEECH, LANGUAGE, VOICE, COMMUNICATION, AND/OR AUDITORY PROCESSING DISORDER; INDIVIDUAL
92508	TREATMENT OF SPEECH, LANGUAGE, VOICE, COMMUNICATION, AND/OR AUDITORY PROCESSING DISORDER; GROUP, 2 OR MORE INDIVIDUALS
92607	EVALUATION FOR PRESCRIPTION FOR SPEECH-GENERATING AUGMENTATIVE AND ALTERNATIVE COMMUNICATION DEVICE, FACE-TO-FACE WITH THE PATIENT; FIRST HOUR
92608	EVALUATION FOR PRESCRIPTION FOR SPEECH-GENERATING AUGMENTATIVE AND ALTERNATIVE COMMUNICATION DEVICE, FACE-TO-FACE WITH THE PATIENT; EACH ADDITIONAL 30 MINUTES
92609	THERAPEUTIC SERVICES FOR THE USE OF SPEECH-GENERATING DEVICE, INCLUDING PROGRAMMING AND MODIFICATION
92610	EVALUATION OF ORAL AND PHARYNGEAL SWALLOWING FUNCTION
97001	PHYSICAL THERAPY EVALUATION
97002	PHYSICAL THERAPY RE-EVALUATION
97003	OCCUPATIONAL THERAPY EVALUATION
97004	OCCUPATIONAL THERAPY RE-EVALUATION
97012	APPLICATION OF A MODALITY TO 1 OR MORE AREAS; TRACTION, MECHANICAL
97016	APPLICATION OF A MODALITY TO 1 OR MORE AREAS; VASOPNEUMATIC DEVICES
97018	APPLICATION OF A MODALITY TO 1 OR MORE AREAS; PARAFFIN BATH
97022	APPLICATION OF A MODALITY TO 1 OR MORE AREAS; WHIRLPOOL
97024	APPLICATION OF A MODALITY TO 1 OR MORE AREAS; DIATHERMY (EG, MICROWAVE)
97026	APPLICATION OF A MODALITY TO 1 OR MORE AREAS; INFRARED
97028	APPLICATION OF A MODALITY TO 1 OR MORE AREAS; ULTRAVIOLET

not on the schedule for OT *

Lowcountry Orthopaedics & Sports Medicine

Lowcountry Orthopaedics
2880 Tricom Street
N Charleston SC 29406
(843) 797-5050

March 2, 2015

Christian L. Soura, Director
SC DHHS-Medicaid
PO Box 8206
Columbia, S. C. 29202-8206

RE: Procedure Code 25600

Dear Mr. Soura:

It has come to our attention that Procedure Code 25600 is not on your schedules Class "S" or "T" to indicate a 30 day global period.

25600 Description: Closed treatment of distal radius fracture (eg, Colles or Smith type) or epiphyseal separation, includes closed treatment of fracture of ulnar styloid, when performed; without manipulation.

We have had many problems with other Medicaid plans stating this is not on your 30 day schedules so they are making it a 90 day global which is incorrect.

After your review, please advise. Thank you.

Sincerely,



Mary Ellen Lucas
Insurance Billing Specialist
Direct Tel: 843-266-4874
Dept Fax: 843-824-5991

Lowcountry Orthopaedics & Sports Medicine

Lowcountry Orthopaedics
2880 Tricom Street
N Charleston SC 29406
(843) 797-5050

March 2, 2015

Christian L. Soura, Director
SC DHHS-Medicaid
PO Box 1412
Columbia, S. C. 29202

*originally sent to
remained 3/19/15 to
PO Box 8206*

RE: Procedure Code 25600

Dear Mr. Soura:

It has come to our attention that Procedure Code 25600 is not on your schedules Class "S" or "T" to indicate a 30 day global period.

25600 Description: Closed treatment of distal radius fracture (eg, Colles or Smith type) or epiphyseal separation, includes closed treatment of fracture of ulnar styloid, when performed; without manipulation.

We have had many problems with other Medicaid plans stating this is not on your 30 day schedules so they are making it a 90 day global which is incorrect.

After your review, please advise. Thank you.

Sincerely,

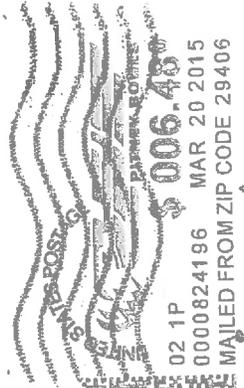
Mary Ellen Lucas
Insurance Billing Specialist
Direct Tel: 843-266-4874
Dept Fax: 843-824-5991

CERTIFIED MAIL

CHARLESTON SC 294



MAR 24 2015



02 1P
000824196 MAR 20 2015
MAILED FROM ZIP CODE 29406

\$ 006.48

7014 2870 0000 4702 1089

LOWCOUNTRY ORTHOPAEDICS &
Member of Arcis Healthcare, LLC
2880 Tricom Street
North Charleston, SC 29406

Christian L. Sours, Director
SC DHHS - Medicaid
P.O. Box 8206
Columbia, SC 29202-8206

RECEIVED

MAR 24 2015

Department of Health & Human Services
OFFICE OF THE DIRECTOR



29202+8206

Log # 214 ✓

April 13, 2015

Mary Ellen Lucas
Insurance Billing Specialist
Lowcountry Orthopaedics & Sports Medicine
2880 Tricom Street
North Charleston, South Carolina 29406

RE: Procedure Code 97022 (Log Letter 000214)

Dear Ms. Lucas:

Thank you for your March 19, 2015 letter regarding *Procedure Code 97022 - Description: Application of a modality to 1 or more areas; Whirlpool.*

This letter serves as a response to your inquiry submitted to the South Carolina Department of Health and Human Services (SCDHHS; *heretofore referred to as "Department"*) regarding whether the above referenced code is identified as a covered code by the Department, and should be listed on our fee schedule. Coverage of procedure code 97022 is further questioned due to it currently being listed in Section 4 of the Department's Physicians Provider Manual under **Procedure Codes Requiring Prior Authorization.**

Upon initial review by the Department, we have confirmed Procedure Code 97022 is considered a covered code that requires a Prior Authorization. Additional details about procedure codes requiring prior authorization can be found in Section 4 of the Physician Provider Manual. All program policy manuals can be accessed online via the Department's website at <https://scdhhs.gov/provider-manual-list>.

Additionally, a discrepancy in the policy and coverage for this code was identified during the Department's review. We acknowledge the confusion this discrepancy has created. As such, we have initiated the appropriate steps to correct these errors—including, but not limited to: adjustments related to system issues and policy clarifications needed to prevent this from occurring in the future.

Lucas
April 13, 2015
Page 2

Thank you for bringing your concerns to our attention and for the continued participation in the South Carolina Healthy Connections Medicaid Program. If you have additional questions or comments regarding the Medicaid Program's services and/or policies, please contact us by phone at (803) 898-4614 or by email at healthservices@scdhhs.gov.

Sincerely,

A handwritten signature in black ink, appearing to read "Nathaniel J. Patterson". The signature is fluid and cursive, with a prominent initial "N" and a long, sweeping underline.

Nathaniel J. Patterson, DrPH
Program Director, Health Services

cc:

Deirdra T. Singleton, Deputy Director
Bryan Amick, Program Director
Stephen Boucher, Program Director
Jason Taylor, Senior Program Director
Amanda Q. Williams, Program Manager
Lisa Sanders, Senior Consultant
Courtney Sanders, Administrative Assistant