



## PROVIDER NOTICE

### Appropriate Therapy Modifiers Required for Rehabilitation Claims

Centers for Medicare and Medicaid Services (CMS) policy states that the therapy modifiers GO (Occupational therapy), GP (Physical therapy), and GN (Speech-language pathology) are required when reporting a physical medicine/rehabilitation service that is considered "always therapy". Furthermore, CMS guidelines require denial of therapy services reported without the appropriate modifier.

**To comply with CMS guidelines, effective June 30, 2009, Health Plus will deny any rehabilitation therapy claims submitted without the appropriate modifier. Claims received prior to June 30, 2009 will not be affected by this policy change.**

The CPT and HCPCS codes that require use of modifiers GO, GP and GN are as follows:

**92506-92508, 92526, 92597, 92605-92609, 96125, 97001-97004, 97010-97012, 97016-97028, 97032-97039, 97110-97124, 97139-97140, 97150, 97530, 97533-97537, 97542, 97750, 97755, 97760-97762, 97799, G0281, G0283, or G0329**

Should you have further questions about this matter, please contact one of our coding department team members listed below:

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