

Subject: Physical Therapy, Occupational Therapy, Speech Therapy, OMT/CMT, Acupuncture (Page 1 of 2)

Objective:

- I. To be complaint with Oregon Health Authority (OHA) Prioritized list Guideline Notes 6, 56, 60, and 92 and assist licensed therapists with the ability to deliver health care services for the Medicaid population.

Definition:

- I. Treatment provided with the intention of relieving or healing a physical or surgical condition.

Policy:

State Guidelines/Protocols

- I. As of July 1, 2016, most back and spine pain was changed to become payable diagnoses. The following protocols for low, medium or high risk patients have been established:
 - a. For all **low** risk patients with an above line diagnosis for the back and spine: Patients may receive 1 evaluation and 4 TOTAL visits of any of the following therapy: OMT/CMT, acupuncture and PT/OT. Massage may be considered.
 - b. For all **medium or high risk** patients with an above line diagnosis for the back and spine: Patients may receive 1 evaluation and a TOTAL of 30 visits per year of any of the following therapy: OMT/CMT, acupuncture and PT/OT.
- II. For all **Non-Back and Spine** related diagnosis requiring some form of therapy:
 - a. A total of 30 visits per year of PT, OT and Speech (rehab and /or Habilitative) when medically appropriate. The definition of Habilitative therapy is health care services that help you keep, learn, or improve skills and functioning for daily living. Examples include therapy for a child who isn't walking or talking at the expected age. These services may include physical and occupational therapy, speech-language pathology, and other services for people with disabilities in a variety of inpatient and/or outpatient settings.
 - b. Additional visits may be authorized in cases of a new acute injury, surgery or other significant change in functional status.

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THA Procedure to align with State Guidelines/Protocols

- I. Appropriate above line diagnosis requests for therapy may receive 1 evaluation and 2 follow up visits to establish a Home Exercise Program (HEP) at Tuality Healthplace without a prior authorization.
- II. All above line diagnosis requests relating to the back or spine that are on lines 366 or 407, may receive 1 evaluation and 4 therapy visits to establish a HEP at Tuality Healthplace without a prior authorization.
- III. All above line diagnosis requests relating to the back or spine that are on lines 366 or 407 for treatment by Chiropractic or Acupuncture require a prior authorization. An initial evaluation and 4 follow up visits can be approved by the referral coordinators if the request meets the guideline notes.
- IV. All back and spine PA requests must include some form of validation tool from the referring provider and /or the provider performing the therapy.
- V. For any member that receives 4 visits (PT/OT, Speech, OMT/CMT, Acupuncture therapy) and the therapist would like additional visits, the therapist should send the request to be re-evaluated by the Provider for the need for continued therapy and a new validation tool should be completed.
- VI. Home Health may perform 1 therapy evaluation and 1 follow up visit without a prior authorization in place. A Retro PA must be obtained before any additional therapy is performed.
- VII. All dual eligible members' requests for Chiropractic treatment will be covered by THA for diagnosis paired with therapy.
- VIII. No more than 2 modalities of therapy are allowed per day of treatment.
- IX. Massage therapy may be considered, but is limited to 1 unit/day
- X. Transcutaneous electrical nerve stimulation (TENS; CPT 64550,97014 and 97032) is not included on the Prioritized List or the Fee Schedule for any condition due to lack of evidence of effectiveness per Guideline Note 56.

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References:

Oregon Health Authority Guideline Note 60
Oregon Health Authority Guideline Note 56
Oregon Health Authority Guideline Note 6
Oregon Health Authority Guideline Note 92
CDC Guidelines for Prescribing Opioids for Chronic Pain-United States, 2016

Formulated:	April 2017
Reviewed:	
Revised:	