

Physical and Occupational Therapy Evaluative Procedure Codes

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PHYSICAL THERAPY

Code*	Description
97161	<p>Physical therapy evaluation: low complexity, requiring these components:</p> <ul style="list-style-type: none"> ▪ A history with no personal factors and/or comorbidities that impact the plan of care; ▪ An examination of body system(s) using standardized tests and measures addressing 1-2 elements from any of the following: body structures and functions, activity limitations, and/or participation restrictions; ▪ A clinical presentation with stable and/or uncomplicated characteristics; and ▪ Clinical decision making of low complexity using standardized patient assessment instrument and/or measurable assessment of functional outcome. <p><i>Typically, 20 minutes are spent face-to-face with the patient and/or family.</i></p>
97162	<p>Physical therapy evaluation: moderate complexity, requiring these components:</p> <ul style="list-style-type: none"> ▪ A history of present problem with 1-2 personal factors and/or comorbidities that impact the plan of care; ▪ An examination of body systems using standardized tests and measures in addressing a total of 3 or more elements from any of the following: body structures and functions, activity limitations, and/or participation restrictions; ▪ An evolving clinical presentation with changing characteristics; and ▪ Clinical decision making of moderate complexity using standardized patient assessment instrument and/or measurable assessment of functional outcome. <p><i>Typically, 30 minutes are spent face-to-face with the patient and/or family.</i></p>
97163	<p>Physical therapy evaluation; high complexity, requiring these components:</p> <ul style="list-style-type: none"> ▪ A history or present problem with 3 or more personal factors and/or comorbidities that impact the plan of care; ▪ An examination of body systems using standardized tests and measures addressing a total of 4 or more elements from any of the following: body structures and functions, activity limitations, and/or participation restrictions; ▪ A clinical presentation with unstable and unpredictable characteristics; and ▪ Clinical decision making of high complexity using standardized patient assessment instrument and/or measurable assessment of functional outcome. <p><i>Typically, 45 minutes are spent face-to-face with the patient and/or family.</i></p>
97164	<p>Re-evaluation of physical therapy established plan of care, requiring these components:</p> <ul style="list-style-type: none"> ▪ An examination including a review of history and use of standardized tests and measures is required; and ▪ Revised plan of care using a standardized patient assessment instrument and/or measurable assessment of functional outcome. <p><i>Typically, 20 minutes are spent face-to-face with the patient and/or family.</i></p>

OCCUPATIONAL THERAPY

Code*	Description
97165	<p>Occupational therapy evaluation, low complexity, requiring these components:</p> <ul style="list-style-type: none"> ▪ An occupational profile and medical and therapy history, which includes a brief history including medical and or therapy records relating to the presenting problem; ▪ An assessment(s) that identifies 1-3 performance deficits (i.e., relating to physical, cognitive, or psychosocial skills) that result in activity limitations and/or participation restrictions; and ▪ Clinical decision making of low complexity, which includes and analysis of the occupational profile, analysis of data from problem focused assessment(s), and consideration of a limited number of treatment options. Patient presents with no comorbidities that affect occupational performance. Modification of tasks or assistance (e.g., physical or verbal) with assessment(s) is not necessary to enable completion of evaluation component. <p><i>Typically, 30 minutes are spent face-to-face with the patient and/or family.</i></p>
97166	<p>Occupational therapy evaluation, moderate complexity, requiring these components:</p> <ul style="list-style-type: none"> ▪ An occupational profile and medical and therapy history, which includes an expanded review of medical and/or therapy records and additional review of physical, cognitive, or psychosocial history related to current functional performance; ▪ An assessment(s) that identifies 3-5 performance deficits (i.e., relating to physical, cognitive, or psychosocial skills) that result in activity limitations and/or participation restrictions; and ▪ Clinical decision making of moderate analytic complexity, which includes an analysis of the occupational profile, analysis of data from detailed assessment(s), and consideration of several treatment options. Patient may present with comorbidities ha affect occupational performance. Minimal to moderate modification of tasks or assistance (e.g., physical or verbal) with assessment(s) is necessary to enable patient to complete evaluation component. <p><i>Typically, 45 minutes are spent face-to-face with the patient and/or family.</i></p>
97167	<p>Occupational therapy evaluation, high complexity, requiring these components:</p> <ul style="list-style-type: none"> ▪ An occupational profile and medical and therapy history, which includes review of medical and/or therapy records and extensive additional review of physical, cognitive, or psychosocial history related to current functional performance; ▪ An assessment(s) that identifies 5 or more performance deficits (i.e., relating to physical, cognitive, or psychosocial skills) that result in activity limitations and/or participation restrictions; and ▪ Clinical decision making of high analytic complexity, which includes an analysis of the patent profile, analysis of data from comprehensive assessment(s), and consideration of multiple treatment options. Patient presents with comorbidities that affect occupational performance. Significant modification of tasks or assistance (e.g., physical or verbal) with assessment(s) is necessary to enable patient to complete evaluation component. <p><i>Typically, 60 minutes are spent face-to-face with the patient and/or family.</i></p>
97168	<p>Re-evaluation of occupational therapy established plan of care, requiring these components:</p> <ul style="list-style-type: none"> ▪ An assessment or changes in patient functional or medical status with revised plan of care; ▪ An update to the initial occupational profile to reflect changes in condition or environment that affect future interventions and/or goals; and ▪ A revised plan of care. A formal reevaluation is performed when there is a documented change in functional status or a significant change to the plan of care is required. <p><i>Typically, 30 minutes are spent face-to-face with the patient and/or family.</i></p>

* These codes must be reported with the appropriate therapy modifier, GP or GO, to indicate that the services are furnished under a PT or OT plan of care, respectively. Functional Reporting requirements also apply.

References

CMS.gov Therapy Services Website

<https://www.cms.gov/Medicare/Billing/TherapyServices/index.html>

Physician Fee Schedule Search

<https://www.cms.gov/apps/physician-fee-schedule/search/search-criteria.aspx>