

Health Services
Office of Medical Assistance Programs

Allison Knight, Acting Manager *AK*
OMAP Program and Policy Section

Authorized Signature

Number: OMAP 06-001

Issue Date: 1/3/05

Topic: Medical Benefits

Subject: Provider Announcement: Medicare caps OT/PT services (**revised**)

Applies to (check all that apply):

- | | |
|--|---|
| <input type="checkbox"/> All DHS employees | <input type="checkbox"/> County Mental Health Directors |
| <input type="checkbox"/> Area Agencies on Aging | <input type="checkbox"/> Health Services |
| <input type="checkbox"/> Children, Adults and Families | <input type="checkbox"/> Seniors and People with Disabilities |
| <input type="checkbox"/> County DD Program Managers | <input checked="" type="checkbox"/> Other (please specify): DHS staff and others identified on the SPD, CAF, OMHAS and OMAP transmittal lists |

Message: OMAP is notifying Occupational and Physical Therapy providers how to bill for services that go beyond the new 2006 Medicare caps for dual eligibles. See the attached **revised** memo.

If you have any questions about this information, contact:

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January 3, 2006

To: OMAP Providers of Occupational and
Physical Therapy Services

From: Allison Knight, Acting Manager
OMAP Program and Policy Section



Subject: **Medicare caps OT/PT services**

Beginning January 1, 2006, Medicare implemented fiscal limitations (also referred to as caps) on therapy services. The dollar amount for the 2006 limitation on occupational therapy services from January 1 through December 31, 2006, is \$1,740.00. The cap for physical therapy and speech-language pathology services, **combined**, is \$1,740.00.

How will these limitations impact fee-for-service Oregon Health Plan (OHP) clients with Medicare coverage?

When a fee-for-service OHP client with Medicare (“dual eligible”) reaches his or her therapy cap, a provider must request OMAP prior authorization (PA) for any additional physical or occupational therapy services if the provider is seeking reimbursement from OMAP. If the provider bills OMAP for services that have not been prior authorized, OMAP will deny payment for those services.

Other Important Information

OMAP does NOT require PA for evaluation and re-evaluation therapy services.

For dual-eligible OHP clients enrolled in a prepaid health plan, contact the plan for instructions.

Questions?

Contact OMAP Provider Services at 1-800-336-6016 or omap.prov-callcenter@state.or.us.

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OMAP 06-012rev