

Provider Bulletin

Molina Healthcare of Washington, Inc.

Required Modifiers and Revenue Codes for Physical, Occupational, and Speech therapy (Medicaid)

Molina Healthcare of Washington, Inc. is sending a reminder that physical therapy, occupational therapy, and speech therapy services must be billed with the appropriate modifier and/or revenue code to be eligible for payment.

To ensure that physical therapy, occupational therapy, and speech therapy services are eligible for payment under Washington Medicaid, they must be billed with the appropriate modifiers and revenue codes. Here are some key points:

1. **Modifiers:** Specific modifiers must be used to indicate the type of service provided. For example, the GN, GO, and GP modifiers are used for speech therapy, occupational therapy, and physical therapy services, respectively.
2. **Revenue Codes:** Each therapy service must be billed with the correct revenue code. For outpatient rehabilitation services, the revenue codes used are:
 - a. 42x for physical therapy
 - b. 43x for occupational therapy
 - c. 44x for speech therapy
3. **Billing Guides:** The Washington State Health Care Authority provides detailed billing guides that outline the specific requirements for billing these services. These guides include information on prior authorization, claims submission, and the use of modifiers and revenue codes.

For the most accurate and up-to-date information, on the required use of modifiers and the revenue code grid refer to the [Outpatient Rehabilitation Billing Guide](#) provided by the Washington State Health Care Authority

Facility Example:

If the provider is billing a PT code, the correct rev code and modifier must be billed. For example, a PT code (97035) billed with and OT modifier and an OT revenue code. *This incorrect combination will trigger an edit in our system causing the claim to pay at \$0.*