



D. PROCEDURE CODES AND NOMENCLATURE

Iowa uses the HCFA Common Procedure Coding System (HCPCS). Claims submitted without a procedure code and an ICD-9-CM diagnosis code will be denied. Use the diagnosis code V70-5 (health examination of defined subpopulation) on all claims.

In certain instances, two-digit modifiers are applicable. They should be placed after the five-position procedure code. Possible modifiers are shown below:

<u>Modifier</u>	<u>Definition</u>
AH	Clinical psychologist
AJ	Social worker
GN	Speech pathologist
GO	Occupational therapist
GP	Physical therapist
HQ	Group setting
TD	RN
TE	LPN
TM	Individual education program – contracted services
UA	Audiologist

Procedure codes applicable to area education agency services are as follows:

<u>Code</u>	<u>Modifier</u>	<u>Description</u>
Audiology		
V5008		Hearing screening per encounter
92506	UA	Evaluation of speech, language, voice, communication, auditory processing, or aural rehabilitation status 15-minute unit
92507	UA	Treatment of speech, language, voice, communication, or auditory processing disorder; individual, 15-minute unit
92507	TM	Treatment of speech, language, voice, communication, or auditory processing disorder; individual, by contracted staff
92508	UA	Treatment of speech, language, voice, communication, or auditory processing disorder; group, 15-minute unit



Code Modifier Description

Nursing Service

T1023	TD or TE	Screening to determine the appropriateness of consideration of an individual for participation in a specified program, project, or treatment protocol, per encounter. (TD = RN TE = LPN)
T1001		Nursing assessment/evaluation, per 15-minute unit
T1002		RN services, per 15-minute unit
T1002	HQ	RN services, group, 15-minute unit
T1002	TM	RN services, contracted services, 15-minute unit
T1003		LPN services, per 15-minute unit
T1003	HQ	LPN services, group, 15-minute unit
T1003	TM	LPN services, contracted services, 15-minute unit
H0033		Oral medication administration, 15-minute unit
99199		Unlisted service, 60-minute unit

Occupational Therapy

T1023	GO	Screening to determine the appropriateness of consideration of an individual for participation in a specified program, project, or treatment protocol, per encounter.
97003		Occupational therapy evaluation, 15-minute unit
97150	GO	Therapeutic procedures, group, 15-minute unit
97530	GO	Therapeutic activities, direct patient contact by the provider, 15-minute unit
97530	TM	Therapeutic activities, direct patient contact by the provider, contracted staff, 15-minute unit
97535	GO	Self-care or home management training, 15-minute unit
97535	TM	Self-care or home management training by contracted staff, 15-minute unit
97537	GO	Community or work reintegration, 15-minute unit
97537	TM	Community or work reintegration by contracted staff, 15-minute unit

Orientation and Mobility

97139		Unlisted therapeutic procedure
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Code Modifier Description

Physical Therapy

T1023	GP	Screening to determine the appropriateness of consideration of an individual for participation in a specified program, project, or treatment protocol, per encounter.
97001		Physical therapy evaluation, per 15-minute unit
97116		Gait training, per 15-minute unit
97116	TM	Gait training by contracted staff, 15-minute unit
97150		Therapeutic procedures, group, per 15-minute unit
97530		Therapeutic activities, direct patient contact by the provider, 15-minute unit
97530	TM	Therapeutic activities, direct patient contact by the provider, by contracted staff, 15-minute unit
97535		Self-care or home management training, per 15-minute unit
97535	TM	Self-care or home management training by contracted staff, 15-minute unit
97537		Community or work reintegration, per 15-minute unit
97537	TM	Community or work reintegration by contracted staff, 15-minute unit

Psychological Services

T1023	AH	Screening to determine the appropriateness of consideration of an individual for participation in a specified program, project, or treatment protocol, per encounter.
96100		Psychological testing with interpretation and report, per 60-minute unit
90804	AH	Individual psychotherapy, 30-minute unit
90804	TM	Individual psychotherapy by contracted staff, 30-minute unit
90853	AH	Group psychotherapy, 30-minute unit

Social Work – Counseling Services

T1023	AJ	Screening to determine the appropriateness of consideration of an individual for participation in a specified program, project, or treatment protocol; per encounter.
H0031		Mental health assessment by non-physician, per 15-minute unit
90804	AJ	Individual psychotherapy, 30-minute unit
90853	AJ	Group psychotherapy, 30-minute unit
H0046	TM	Mental health services, not otherwise specified, by contracted staff, per 15-minute unit



Code Modifier Description

Speech Language

V5362		Speech screening per encounter
V5363		Language screening per encounter
92506	GN	Evaluation of speech, language, voice, communication, auditory process, and aural rehabilitation status; per 15-minute unit
92507	GN	Treatment of speech, language, voice, communication, or auditory processing disorder; individual, per 15-minute unit
92507	TM	Treatment of speech, language, voice, communication, or auditory processing disorder; individual by contracted staff, per 15-minute unit
92508	GN	Treatment of speech, language, voice, communication, or auditory processing disorder; group, per 15-minute unit

Vision Service

99172		Visual function screening automated or semi-automated bilateral quantitative determination of visual acuity, ocular alignment, color vision by pseudoisochromatic plates, and field of vision (may include all or some screening of the determination for contrast sensitivity vision under glare); 15 minute unit
99173		Screening test of visual acuity, quantitative, bilateral, 15-minute unit
92012		Ophthalmological services, exam and evaluation, 15-minute unit
92014		Comprehensive services, established patient, 15-minute unit
92014	TM	Comprehensive services, established patient by contracted staff, 15-minute unit
92499		Unlisted service (vision services in a group setting), 15-minute unit

~~E. CLAIM FORM~~

~~Claims for area education agency services are billed on federal form CMS-1500, *Health Insurance Claim Form*. To view a sample of this form on line, click [here](#).~~

~~1. Instructions for Completing the CMS-1500 Claim Form~~

~~The table below follows the CMS-1500 claim form by field number and name, and gives a brief description of the information to be entered and whether providing information in that field is required, optional, or conditional of the individual member's situation.~~

~~For electronic media claim (EMC) submitters, refer also to your EMC specifications for claim completion instructions.~~