



Multiple Therapy Procedure Reduction (MTPR) Reimbursement Policy

Policy Number	0068	Annual Approval Date	04/2019 <u>04/2020</u>	Approved By	Optum Reimbursement Committee Optum Quality and Improvement Committee
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IMPORTANT NOTE ABOUT THIS REIMBURSEMENT POLICY

You are responsible for submission of accurate claims. This reimbursement policy is intended to ensure that you are reimbursed based on the code or codes that correctly describe the health care services provided. Optum reimbursement policies may use Current Procedural Terminology (CPT®), Centers for Medicare and Medicaid Services (CMS) or other coding guidelines. References to CPT or other sources are for definitional purposes only and do not imply any right to reimbursement. Coding methodology, clinical rationale, industry-standard reimbursement logic, regulatory issues, business issues and other input is considered in developing reimbursement policy.*

This information is intended to serve only as a general reference resource regarding Optum's reimbursement policy for the services described and is not intended to address every aspect of a reimbursement situation. Accordingly, Optum may use reasonable discretion in interpreting and applying this policy to health care services provided in a particular case. Further, the policy does not address all issues related to reimbursement for health care services provided to Client enrollees. Other factors affecting reimbursement may supplement, modify or, in some cases, supersede this policy. These factors may include, but are not limited to: legislative mandates, the provider contracts, and/or the enrollee's benefit coverage documents. Finally, this policy may not be implemented exactly the same way on the different electronic claims processing systems used by Optum due to programming or other constraints; however, Optum strives to minimize these variations.

Optum may modify this reimbursement policy at any time by publishing a new version of the policy on this Website. However, the information presented in this policy is accurate and current as of the date of publication.

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Application

This policy applies to all products, all network and non-network providers. This includes non-network authorized, and percent of charge contract providers. This policy does not apply to flat rate per diem/per visit paid providers.

Fee schedule/provider contract/client contract may supersede

Policy

Reimbursement Guidelines

Consistent with CMS, Optum ranks all reimbursable procedures from the Multiple Therapy Procedure Reducible Codes list (procedures with indicator 5 in the Multiple Procedure Payment Reduction [MPPR] field on the CMS National Physician Fee Schedule) that are provided on a single date of service. The primary procedure is reimbursed without reduction and the Practice Expense (PE) portions of all secondary and subsequent procedures from this list performed on the same date are reduced by 50%.

A 50% reduction of the practice expense for all secondary and subsequent procedures assigned an MPPR indicator of 5 will be applied.

These reductions apply to all providers who share the same TIN, regardless of specialty. These reductions do not apply to flat rate per diem/per visit contract providers.

Other reimbursement policies that address reimbursement for codes reported in combination with other codes on the same date of service may also apply.

Procedure Ranking



The CMS Non-Facility Practice Expense Relative Value Unit (PE RVU) assigned to each code on the Multiple Therapy Procedure Reducible Codes list is used to determine the primary procedure. The primary procedure is identified as the procedure having the highest PE RVU on a given date of service. The PE portion of the charge for the primary procedure will not be reduced.

For the remaining Multiple Therapy Procedure Reducible codes reported on the same date of service by any physician or other health care professional in the same group practice, an amount representing the PE for each code will be reduced by 50%. The PE amount is determined by calculating the ratio of CMS PE RVU to Total RVU assigned to each secondary and subsequent procedure on the same date of service. When procedures share the same PE RVU, the Total RVU is used to further rank those codes.

Example

The following table shows an example of how reimbursement is determined for services subject to this policy when services are furnished to a patient on a single date of service by providers reporting under the same Tax Identification Number.

Code	Allowable Amount Prior to Reduction	PE RVU	Total RVU	Portion of charge attributable to Practice Expense (PE RVU / Total RVU)	Ranking	Comments	Final Allowable Amount
Multiple Therapy Procedure Reducible Code A	\$31.60	.45	.79	56%	3		PE value = 56% of \$31.60 or \$17.70. \$17.70 is reduced by 50% or \$8.85. Allowable amount = \$31.60 - \$8.85 or \$22.75.
Multiple Therapy Procedure Reducible Code B	\$40.40	.36	1.01	35%	4		PE value = 35% of \$40.40 or \$14.14. \$14.14 is reduced by 50% or \$7.07. Allowable amount = \$40.40 - \$7.07 or \$33.33.
Multiple Therapy Procedure Reducible Code C	\$36.40	.45	.91	49%	2	Because Codes A and C have the same PE RVUs, the total RVUs are used to further rank these two procedures.	PE value = 49% of \$36.40 or \$17.84. \$17.84 is reduced by 50% or \$8.92. Allowable amount = \$36.40 - \$8.92 or \$27.48.
Multiple Therapy Procedure Reducible Code D	\$96.80	1.05	2.42	43%	1	Primary procedure (highest PE value) is not subject to reduction	\$96.80



2018-2020 Multiple Therapy Procedure Reducible Codes

The following list of codes is subject to the Multiple Therapy Procedure Reduction policy. The list includes the assigned Practice Expense RVU, Total RVU, and the ratio of Practice Expense to Total RVU for each code. Only the Practice Expense portion of a code on this list is subject to reduction when it has been ranked as non-primary on a given date of service.

Multiple Therapy Reducible Codes

<u>Code</u>	<u>Ratio of PE to Total RVU</u>	<u>PE RVU</u>	<u>Total RVU</u>
<u>92507</u>	<u>40%</u>	<u>0.90</u>	<u>2.25</u>
<u>92508</u>	<u>50%</u>	<u>0.34</u>	<u>0.68</u>
<u>92521</u>	<u>42%</u>	<u>1.38</u>	<u>3.21</u>
<u>92522</u>	<u>39%</u>	<u>1.04</u>	<u>2.62</u>
<u>92523</u>	<u>43%</u>	<u>2.39</u>	<u>5.50</u>
<u>92524</u>	<u>38%</u>	<u>0.98</u>	<u>2.56</u>
<u>92526</u>	<u>43%</u>	<u>1.09</u>	<u>2.48</u>
<u>92597</u>	<u>36%</u>	<u>0.76</u>	<u>2.08</u>
<u>92607</u>	<u>47%</u>	<u>1.73</u>	<u>3.66</u>
<u>92609</u>	<u>49%</u>	<u>1.52</u>	<u>3.08</u>
<u>96125</u>	<u>42%</u>	<u>1.32</u>	<u>3.10</u>
<u>97012</u>	<u>39%</u>	<u>0.17</u>	<u>0.43</u>
<u>97016</u>	<u>45%</u>	<u>0.16</u>	<u>0.35</u>
<u>97018</u>	<u>58%</u>	<u>0.10</u>	<u>0.17</u>
<u>97022</u>	<u>64%</u>	<u>0.33</u>	<u>0.51</u>
<u>97024</u>	<u>65%</u>	<u>0.13</u>	<u>0.20</u>
<u>97026</u>	<u>61%</u>	<u>0.11</u>	<u>0.18</u>
<u>97028</u>	<u>60%</u>	<u>0.14</u>	<u>0.23</u>
<u>97032</u>	<u>38%</u>	<u>0.16</u>	<u>0.42</u>
<u>97033</u>	<u>54%</u>	<u>0.32</u>	<u>0.59</u>
<u>97034</u>	<u>48%</u>	<u>0.21</u>	<u>0.43</u>
<u>97035</u>	<u>46%</u>	<u>0.19</u>	<u>0.41</u>
<u>97036</u>	<u>71%</u>	<u>0.71</u>	<u>1.00</u>
<u>97110</u>	<u>45%</u>	<u>0.40</u>	<u>0.87</u>
<u>97112</u>	<u>48%</u>	<u>0.48</u>	<u>1.00</u>
<u>97113</u>	<u>54%</u>	<u>0.60</u>	<u>1.10</u>
<u>97116</u>	<u>45%</u>	<u>0.39</u>	<u>0.86</u>
<u>97124</u>	<u>56%</u>	<u>0.47</u>	<u>0.83</u>
<u>97140</u>	<u>43%</u>	<u>0.35</u>	<u>0.80</u>
<u>97150</u>	<u>42%</u>	<u>0.22</u>	<u>0.52</u>
<u>97161</u>	<u>48%</u>	<u>1.18</u>	<u>2.43</u>



<u>97162</u>	<u>48%</u>	<u>1.18</u>	<u>2.43</u>
<u>97163</u>	<u>48%</u>	<u>1.18</u>	<u>2.43</u>
<u>97164</u>	<u>53%</u>	<u>0.89</u>	<u>1.67</u>
<u>97165</u>	<u>51%</u>	<u>1.33</u>	<u>2.58</u>
<u>97166</u>	<u>51%</u>	<u>1.32</u>	<u>2.57</u>
<u>97167</u>	<u>51%</u>	<u>1.32</u>	<u>2.57</u>
<u>97168</u>	<u>56%</u>	<u>1.00</u>	<u>1.78</u>
<u>97530</u>	<u>58%</u>	<u>0.66</u>	<u>1.12</u>
<u>97533</u>	<u>65%</u>	<u>0.97</u>	<u>1.47</u>
<u>97535</u>	<u>51%</u>	<u>0.50</u>	<u>0.97</u>
<u>97537</u>	<u>46%</u>	<u>0.43</u>	<u>0.93</u>
<u>97542</u>	<u>46%</u>	<u>0.44</u>	<u>0.94</u>
<u>97750</u>	<u>52%</u>	<u>0.52</u>	<u>0.99</u>
<u>97755</u>	<u>41%</u>	<u>0.45</u>	<u>1.09</u>
<u>97760</u>	<u>62%</u>	<u>0.88</u>	<u>1.40</u>
<u>97761</u>	<u>56%</u>	<u>0.67</u>	<u>1.19</u>
<u>97763</u>	<u>66%</u>	<u>1.00</u>	<u>1.50</u>
<u>G0281</u>	<u>51%</u>	<u>0.20</u>	<u>0.39</u>
<u>G0283</u>	<u>51%</u>	<u>0.20</u>	<u>0.39</u>
<u>G0329</u>	<u>78%</u>	<u>0.25</u>	<u>0.32</u>

Code	PE RVU	Total RVU	Ratio of PE to Total RVU
<u>92507</u>	<u>0.88</u>	<u>2.23</u>	<u>39%</u>
<u>92508</u>	<u>0.31</u>	<u>0.65</u>	<u>47%</u>
<u>92526</u>	<u>1.04</u>	<u>2.43</u>	<u>42%</u>
<u>92597</u>	<u>0.72</u>	<u>2.05</u>	<u>35%</u>
<u>92607</u>	<u>1.68</u>	<u>3.61</u>	<u>46%</u>
<u>92609</u>	<u>1.57</u>	<u>3.12</u>	<u>50%</u>
<u>97012</u>	<u>0.20</u>	<u>0.46</u>	<u>43%</u>
<u>97016</u>	<u>0.36</u>	<u>0.55</u>	<u>65%</u>
<u>97018</u>	<u>0.24</u>	<u>0.31</u>	<u>77%</u>
<u>97022</u>	<u>0.49</u>	<u>0.67</u>	<u>73%</u>
<u>97024</u>	<u>0.12</u>	<u>0.19</u>	<u>63%</u>
<u>97026</u>	<u>0.10</u>	<u>0.17</u>	<u>58%</u>
<u>97028</u>	<u>0.12</u>	<u>0.21</u>	<u>57%</u>
<u>97032</u>	<u>0.28</u>	<u>0.54</u>	<u>51%</u>
<u>97033</u>	<u>0.35</u>	<u>0.62</u>	<u>56%</u>



97034	0.29	0.51	56%
97035	0.14	0.36	38%
97036	0.64	0.93	68%
97110	0.45	0.92	48%
97112	0.49	0.96	51%
97113	0.77	1.22	63%
97116	0.39	0.80	48%
97124	0.38	0.74	51%
97140	0.41	0.85	47%
97150	0.19	0.49	38%
97161	0.98	2.28	42%
97162	0.98	2.28	42%
97163	0.98	2.28	42%
97164	0.73	1.55	47%
97165	0.91	2.21	41%
97166	0.91	2.21	41%
97167	0.91	2.21	41%
97168	0.65	1.46	44%
97530	0.54	0.99	54%
97533	0.38	0.83	45%
97535	0.52	0.99	52%
97537	0.39	0.86	45%
97542	0.40	0.87	45%
97750	0.46	0.93	49%
97755	0.37	1.01	36%
97760	0.61	1.08	56%
97761	0.47	0.94	50%
97762	1.10	1.36	80%
G0281	0.20	0.39	51%
G0283	0.20	0.39	51%

Background

There are some physical medicine and rehabilitation therapy procedures that are frequently reported together on the same date of service. Some of the elements that comprise these services, referred to as PE by the CMS, are duplicative. These duplicated elements include cleaning the room and equipment; education, instruction, counseling and coordinating home care; greeting the patient and providing the gown; obtaining measurements (e.g., range of motion); post-therapy patient assistance; the multispecialty visit pack.

This policy describes how Optum aligns with CMS and reduces reimbursement for the PE portions of certain therapy procedures that share these components when those services are the secondary or subsequent procedures provided on a single date of service by any physician or other health care professional in the same group.



Optum aligns with CMS in determining which procedures are subject to the multiple therapy procedure reduction and the primary or secondary ranking of these procedures based on PE RVU.

For the purposes of this policy, same group physician and/or other health care professional refers to all physicians and health care professionals who report under the same Federal Tax Identification number (TIN).

Resources

- American Medical Association, *Current Procedural Terminology (CPT®)* and associated publications and services
- Healthcare Common Procedure Coding System, HCPCS Release and Code Sets
- Centers for Medicare and Medicaid Services

History / Updates

10/15/2013	New
04/2014	Annual review and update
04/2015	Annual review and update of RVU table
04/2016	Annual review and update – removed two codes from list (96125 and G0329)
04/2017	Annual review and update – add new PT/OT Evaluation and Reevaluation codes. Update code Values
04/2018	Annual Review and Update
04/2019	Annual Review and Update
04/2020	Annual Review and Update – replaced table of reducible codes with current list

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