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PIP ALERT

ATTN: Medical Providers/Billing Companies
From: Joseph A. Massood, Esq.
Re: New Physical Therapy Evaluation Codes

Effective January 1, 2017, CPT Code 97001 physical therapy evaluation, has been replaced with a three tier physical therapy evaluation.

1. **CPT Code 97161**: Typically 20 minutes face to face, a history with no personal factors and/or comorbidities that impact on the plan of care.
2. **CPT Code 97162**: Typically 30 minutes spent face to face with patient history with approximately 1 to 2 factors which impact on the plan of care.
3. **CPT Code 97163**: typically 45 minutes spent face to face with the patient three or more personal factors and/or comorbidities that impact on the plan of care.

The CMS did not adopt a three level payment system for the new CPT codes. It appears that the payment value for CPT Code 97001 equates to CPT Code 97161. The CMS did assign a higher value to CPT Codes 97612 and 97613 from .60 to .75. However, as previously indicated, the CMS currently does not have increased compensation for those codes. In short, it appears that the reimbursement for CPT Code 97161 should be the fee scheduled amount for CPT Code 97001 or \$114.74 for the North Region and \$110.13 for the South Region.

Effective January 1, 2017, the re-evaluation code, CPT Code 97002, has been replaced with CPT Code 97164. CPT Code 97164 is defined as follows:

“Re-evaluation typically 20 minutes spent face to face with the patient.”

It appears that the new re-evaluation physical therapy code, CPT Code 97164, will be crossed walked to CPT Code 97002 for compensation. The fee scheduled amount for CPT Code 97002 is \$64.03 for the North Region and \$61.31 for the South Region.

Disclaimer: The statements listed above are for informational purposes only and are not to be used as legal advice. Should you have further questions, please contact the undersigned directly.