



June 22, 2018

Web Announcement 1623

Attention Provider Types 12 (Outpatient, Hospital) and 17 (Special Clinics):

Update Regarding Claims for Therapy Evaluation Codes

Update to [Web Announcement 1457](#): Claims for new therapy evaluation codes 97161, 97162, 97163, 97164, 97165, 97166, 97167 and 97168 submitted by provider types (PTs) 12 (Hospital, Outpatient) and 17 (Special Clinics) that denied in error if the primary diagnosis on the claim differs from the primary diagnosis code on a paid claim in history have been automatically reprocessed.

Claims for the above codes submitted by PTs 12 and 17 with dates of service on or after January 1, 2017, and processed before November 6, 2017, that denied in error with edit codes 0760 (Initial Evaluation Previously Paid) or 0761 (Only 1 re-evaluation allowed per 90 days) have been reprocessed or that paid more than the limit have been voided and reprocessed.

Results of the reprocessed claims appear on remittance advices dated June 29, 2018.