

NEWS FLASH

SENIOR
Preferred (HMO)

November 6, 2019

Update to Senior Preferred Part B Therapies Starting January 1, 2020

Be sure to pass this along to all staff as appropriate.

Starting **January 1, 2020**, Senior Preferred will move from the **Medicare dollar cap to an equivalently based visit cap for Part B therapy services**. Prior authorization will be required for all therapies at 30 visits. The Medicare dollar cap will no longer be applied to Part B therapy services. There will be a combined 30-visit cap for both physical therapy / speech therapy and a separate 30-visit cap for occupational therapy.

Therapies with **more than the 30-visit cap** must have a prior authorization and must be submitted with the KX modifier to confirm that services are medically necessary and supported by documentation in the medical record.

1. Service dates submitted on the claim must match the prior authorization to be payable.
2. All claim lines for visits 31+ must be submitted with the KX modifier.
3. The KX modifier should not be added to any claim lines for therapy visits 1 to 30.

Providers will need to follow the LCD / NCD guidelines to ensure that therapy visits are appropriate and medically necessary to prevent inappropriate use of the visit limit.

Prior authorization forms are available at SeniorPreferred.org/for-providers.

Please direct any questions to Senior Preferred at (800) 394-5566.

Please share this information within your organization as needed. For questions about this bulletin, please contact Shari Oelke at (608) 881-8231 or Shari.Oelke@QuartzBenefits.com