

OCCUPATIONAL THERAPY

ISSUE DATE: July 3, 1997

AUTHORITY: [32 CFR 199.4\(c\)\(3\)\(x\)](#)

I. CPT¹ PROCEDURE CODES

97003 - 97004, 97150, 97532, 97533, 97535, 97799

II. DESCRIPTION

Occupational therapy is the prescribed use of specific purposeful activity or interventions designed to promote health, prevent injury or disability, and which develop, improve, sustain, or restore functions which have been lost or reduced as a result of injury, illness, cognitive impairment, psychosocial dysfunction, mental illness, or developmental, learning or physical disability(ies), to the highest possible level for independent functioning.

III. POLICY

A. Occupational therapy prescribed and supervised by a physician is covered.

B. Occupational therapy to improve, restore, or maintain function, or to minimize or prevent deterioration of function of a patient when prescribed by a physician is covered in accordance with the rehabilitative therapy provisions found in [Chapter 7, Section 18.1](#).

IV. EXCLUSIONS

A. The following occupational therapy services are not covered:

1. Vocational assessment and training.
2. General exercise programs.
3. Separate charges for instruction of the patient and family in therapy procedures.
4. Repetitive exercise to improve gait, maintain strength and endurance, and assisted walking such as that provided in support of feeble or unstable patients.

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TRICARE POLICY MANUAL 6010.54-M, AUGUST 1, 2002

CHAPTER 7, SECTION 18.3

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B. Maintenance therapy that does not require a skilled level after a therapy program has been designed (see [Chapter 7, Section 18.1](#)).

1. Range of motion and passive exercises which are not related to restoration of a specific loss of function.

2. CPT² procedure code 97532 or 97533 is not a covered benefit when used as a restorative approach. That is, cognitive function improves as a result of neuronal growth, which is enhanced through the repetitive exercise of neuronal circuits and that recovery of functions is determined by biological events.

3. CPT² procedure codes 97532 and 97533 for sensory integration training is excluded.

NOTE: This policy does not exclude multidisciplinary services, such as physical therapy, occupational therapy, or speech therapy after traumatic brain injury, stroke and children with an autistic disorder.

C. Occupational therapists are not authorized to bill using Evaluation and Management (E&M) codes listed in the Physicians' Current Procedural Terminology (CPT).

D. For beneficiaries under the age of three, services and items provided in accordance with the beneficiary's Individualized Family Service Plan (IFSP) as required by Part C of the Individuals with Disabilities Education Act (IDEA), and which are otherwise allowable under the TRICARE Basic Program **or** the Extended Care Health Option (ECHO) but determined not to be medically or psychologically necessary, are excluded.

E. For beneficiaries aged three to 21, who are receiving special education services from a public education agency, cost-sharing of outpatient occupational therapy services that are required by the IDEA and which are indicated in the beneficiary's Individualized Education Program (IEP), may not be cost-shared except when the intensity or timeliness of occupational therapy services as proposed by the educational agency are not sufficient to meet the medical needs of the beneficiary.

V. EFFECTIVE DATE October 28, 1997.

- END -

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