

## Timed and Untimed Treatment Codes- Billing Info

**GOOGLE SEARCH** September 11, 2008 with "UNTIMED CODES" got about **71,100** results for **UNTIMED CODES**

1. [PDF]

### [DOCUMENTATION AND BILLING OF TIMED AND UNTIMED HCPCS CODES](#)

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HCPCS codes that are *untimed* are billed as one (1) unit regardless of how many minutes were spent. rendering them. The only exception would be if the ...

[www.empiremedicare.com/traina/manual/pet0413.pdf](http://www.empiremedicare.com/traina/manual/pet0413.pdf) - [Similar pages](#)

2. [11 Part B Billing Scenarios for PTs and OTs](#)

The therapist reports the time the therapy assistant provides care, whether it is one-on-one care or delivered via the *untimed codes*, such as supervised ...

[www.cms.hhs.gov/TherapyServices/02\\_billing\\_scenarios.asp](http://www.cms.hhs.gov/TherapyServices/02_billing_scenarios.asp) - 32k - [Cached](#) - [Similar pages](#)

### 11 Part B Billing Scenarios for PTs and OTs

[http://www.cms.hhs.gov/TherapyServices/02\\_billing\\_scenarios.asp](http://www.cms.hhs.gov/TherapyServices/02_billing_scenarios.asp)

"This page is designed to clarify existing therapy policy and to provide guidance on current Part B billing issues relevant to physical therapists (PTs), occupational therapists (OTs) and **speech-language pathologists (SLPs)** and to the services they provide. Because we have received numerous requests to restore the previously published 11 Frequently Asked Questions (FAQs) resulting from the 9/13/02 Open Door Forum on Group Therapy, we have chosen to reformat these FAQs into "billing scenarios" to appear below. As a result, the 11 Part B Billing Scenarios are specific to PTs and OTs. We will update this Web Page to reflect changes in policy (for example, CCI edits, new codes, new coverage determinations) that impact therapy billing and/or to provide clarification on billing policy for PTs, OTs and/or SLPs.

### **Check the manuals first.**

#### Therapy Manual References

- Medicare Claims Processing Manual, 100-4, Chapter 5, Sections 10, 20, 30, 40, 100
- Medicare Benefit Policy Manual, 100-2, Chapter 15, sections 220 and 230"

3. [Outpatient Therapy - Additional DRA Mandated Service Edits](#)

For *untimed codes*, units are reported based on the number of times the procedure is performed, as described in the HCPCS code definition (often once per ...

[https://www.cms.gov/parta/bulletins/2006/2055\\_sep/Outpatient\\_Therapy\\_-\\_Additional\\_DRA\\_Mandated\\_Service\\_Edits\\_.htm](https://www.cms.gov/parta/bulletins/2006/2055_sep/Outpatient_Therapy_-_Additional_DRA_Mandated_Service_Edits_.htm) - 50k - [Cached](#) - [Similar pages](#)

4. [July/August 2007: Timed and Untimed Treatment Codes](#)

Some payers have allowed SLPs to bill these *untimed codes* more than once, as if they were timed. Under the Health Insurance Portability and Accountability ...

[www.asha.org/about/publications/access-slp-hcare/ASLP0707](http://www.asha.org/about/publications/access-slp-hcare/ASLP0707)

**July/August 2007** American Speech-Language-Hearing Association

**Issue Focus: Timed and Untimed Treatment Codes**

Featured Question - Timed and Untimed Treatment Codes

<http://www.asha.org/about/publications/access-slp-hcare/ASLP0707.htm>

5. [PDF] [Reporting Speech-Language Pathology Services Using Service-Based ...](#)

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Confirm. that changes to using *untimed codes* also need to be made and negotiate for the. most equitable rate as you move from timed to *untimed codes*. ...

[www.kysha.org/ReportingSLPathologyServicesUsingService-BasedCPTCodes.pdf](http://www.kysha.org/ReportingSLPathologyServicesUsingService-BasedCPTCodes.pdf) -

Sep. 2007 **Reporting Speech-Language Pathology Services Using Service-Based CPT Codes**

detailed report from ASHA *Health Care Economics & Advocacy Team*