EmblemHealth

Hyperbaric Oxygen Therapy — Medicaid

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The treating physician or primary care provider must submit to EmblemHealth the clinical evidence that the member meets the criteria for the treatment. Without this documentation and information, EmblemHealth will not be able to properly review the request preauthorization or post-payment review.

NYS Medicaid reimbursement for hyperbaric oxygen therapy (HBOT) is limited to the following conditions:

- acute carbon monoxide intoxication with or without concomitant cyanide poisoning;
- decompression illness;
- gas embolism; *and*
- gas gangrene.

And as adjunctive therapy for:

- acute traumatic peripheral ischemia;
- crush injuries;
- reattachment of severed limbs;
- progressive necrotizing infections (necrotizing fasciitis);
- acute peripheral arterial insufficiency;
- preparation and preservation of compromised skin grafts;
- chronic refractory osteomyelitis, unresponsive to conventional medical and surgical management;
- osteoradionecrosis;
- actinomycosis; *and*
- diabetic wounds of the lower extremities in patients who meet the following criteria:
  - patient has type I or type II diabetes and has a lower extremity wound that is due to diabetes;
  - patient has a wound classified as Wagner grade III or higher; *and*
  - patient has failed an adequate course of standard wound therapy.

The use of HBOT for diabetic wound healing is covered as adjunctive therapy only after there are no measurable signs of healing for at least 30 days of treatment with standard wound therapy and must be used in addition to standard wound care. Patient specific standard wound care in patients with diabetic wounds may include:

- assessment of a patient's vascular status and correction of any vascular problems in the affected limb if possible;
- optimization of nutritional status;
- optimization of glucose control; debridement by any means to remove devitalized tissue;
- maintenance of a clean, moist bed of granulation tissue with moist dressings;
- pressure reduction (off-loading); *and*
- necessary treatment to resolve any infection that might be present.

Failure to respond to standard wound care occurs when there are no measurable signs of healing for at least 30 consecutive days. Wounds must be evaluated at least every 30 days during administration of

HBOT. Continued treatment with HBOT is not covered if measurable signs of healing have not been demonstrated within any 30-day period of treatment.

Examples of non-covered conditions include but are not limited to:

- pediatric developmental disorders, including autism;
- cutaneous, decubitus, and stasis ulcers;
- chronic peripheral vascular insufficiency;
- anaerobic septicemia and infection other than clostridial;
- skin burns (thermal);
- senility;
- myocardial infarction;
- cardiogenic shock;
- sickle cell anemia;
- acute thermal and chemical pulmonary damage (i.e., smoke inhalation with pulmonary insufficiency);
- acute or chronic cerebral vascular insufficiency;
- hepatic necrosis;
- aerobic septicemia;
- nonvascular causes of chronic brain syndrome (pick's disease, Alzheimer's disease, Korsakoff's disease);
- tetanus;
- systemic aerobic infection;
- organ transplantation;
- organ storage;
- pulmonary emphysema;
- exceptional blood loss anemia;
- multiple sclerosis;
- Arthritic diseases; *and*
- acute cerebral edema.

Please note: This list is not exhaustive of all non-covered conditions.

NYS Medicaid FFS Billing

Clinic Billing Instructions

Clinics should submit claims using the Healthcare Common Procedure Coding System code **"G0277"** (Hyperbaric oxygen under pressure, full body chamber, per 30-minute interval) for each 30-minute interval of HBOT.

Physician Billing Instructions

A separate claim for the reimbursement of professional services may be submitted by a physician attending and supervising the HBOT when the therapy is provided in an Article 28 hospital-based setting including hospital OPDs and D&TCs.

Physicians should submit claims using Current Procedural Terminology (CPT) code **"99183"** (Physician attendance and supervision of HBOT, per session*)* to account for the physicians' professional time, expertise and management of the treatment. **Please note:** A physician may report Evaluation and Management services performed on same date of service as HBOT with **modifier "25"**, if a physician performs unrelated, significant, and separately identifiable services.

Applicable Diagnosis Codes

99183	Physician or other qualified health care professional attendance and supervision of hyperbaric oxygen therapy, per session
G0277	Hyperbaric oxygen under pressure, full body chamber, per 30-minute interval

References

New York State Medicaid Update - August 2026 Volume 42 - Number 9. https://www.health.ny.gov/health_care/medicaid/program/update/2026/no09_2026-08.htm#HBOT. Accessed October 22, 2026.