

CPT CODES FOR COMMON OT SERVICES IN PRIMARY CARE

CPT code	Description	Reimbursement amount*
95992	Canalith repositioning procedure	\$44.30 (untimed)
97110	Therapeutic exercises	\$30.11
97112	Neuromuscular reeducation	\$34.95
97129	Cognitive retraining (attention, memory, problem solving, etc.)	\$23.19
97130	Cognitive retraining additional 15 minutes	\$22.49
97140	Manual therapy (mobilization/manipulation)	\$27.69
97150	Group therapeutic procedures	\$18.00 (untimed)
97165	OT evaluation – low complexity	\$103.13 (untimed)
97166	OT evaluation – moderate complexity	\$103.13 (untimed)
97167	OT evaluation – high complexity	\$103.13 (untimed)
97530	Therapeutic activities to improve function	\$38.07
97535	Self-care/management – activities of daily living (ADL)	\$33.57
97760	Orthotics management, training, fitting	\$49.83

* Reimbursement rates are per unit and reflect 2022 Centers for Medicare & Medicaid Services (CMS) Physician Fee Schedule non-facility, national rates. All codes, unless otherwise specified, are timed codes billed in 15-minute increments. Per CMS, procedures must be performed for at least eight minutes to bill these timed codes.

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Radiological Safety and Quality Lawrence Lau, Kwan-Hoong Ng, 2013-11-22 This book is the product of a unique collaboration by experts from leading international regional and national agencies and professional organizations discussing on the current hot issue on the judicious use and safety of radiation in radiology There have been several cases involving radiation overexposure that have received international attention Strategies and solutions to guide readers how to maximize the benefits and minimize the risks when using radiation in medicine are covered *Professional-service Coverage Codes Manual* Blue Cross and Blue Shield of Michigan, 1993* *Adams' Coding and Reimbursement* Wanda Adams, 2012

Combining the basics of coding insurance and reimbursement in one concise text *Adams Coding and Reimbursement A Simplified Approach* 4th Edition looks at the big picture of medical billing and coding and shows how it fits into the physician reimbursement system Clearly organized full color chapters guide you through the entire coding and claims process detailing coding rules and applications insurance guidelines and the reimbursement system Realistic hands on practice helps you apply what you've learned Written by medical insurance billing and coding expert Wanda Adams this edition includes the latest ICD 9 CM and CPT codes a new chapter on HCPCS coding and a new chapter preparing you for the 2013 transition to ICD 10 CM Hybrid approach to coding and insurance shows how coding claims submission and reimbursement go hand in hand Coding exercises teach you how to correctly code using the ICD 9 CM and CPT manuals Coding Tips boxes highlight important information Test Your Knowledge questions within each chapter help you assess your strengths and weaknesses and prepare for exams Code It and Claim It program on the companion Evolve website familiarizes you with a professional coding claim interface and provides practice with actual patient cases NEW ICD 10 CM Diagnostic Coding chapter prepares you for the 2013 transition to ICD 10 NEW HCPCS Coding System chapter provides an overview of the HCPCS system and its applications Coding exercises and examples include both ICD 9 CM and ICD 10 CM codes in preparation for the 2013 transition to ICD 10

St. Anthony's UB-92 Editor (UBE) St. Anthony's UB-92, Carol Endahl, Karen Schmidt, 1997-12-01 UB 92 billing and coding requirements are constantly changing Staying current is essential to ensure fast and accurate payment for all submitted claims All the information you need for a perfect Medicare UB 92 claim can be found in updatable easy to use format No other billing manual offers all of these features current valid CPT HCPCS and revenue code combinations complete information for all revenue condition occurrence and value codes and form locators medical documentation requirements to support home health skilled nursing rural health and other claims detailed outpatient bill ng and coding tips

Decoding the Codes Alex Toth, 1998 Written by healthcare consultant Alex Toth Decoding the Codes is the only manual to encompass a thorough explanation of the content format and utility of all of the coding systems for all clinical specialties including acute and long term care Decoding the Codes also gives pedagogical examples and learning exercises Actual clinical documentation objectives and exercises allows the medical records and patient account directors to

retain key concepts needed to understand the coding system Decoding the Codes will help you take the mystery out of the coding system by giving you an explanation of each alpha and numeric code a clearer picture on how each code effects reimbursement and a perfect compendium to ICD CPT and HCPCS coding books Whether you are a nurse physician or coding specialist knowing every number letter and decimal point of over 36 000 codes seems impossible Decoding the Codes will give you an edge in understanding the codes so you can receive full reimbursement

Reviewing **Blue Cross Revenue Code Manual 2013 Cpt**: Unlocking the Spellbinding Force of Linguistics

In a fast-paced world fueled by information and interconnectivity, the spellbinding force of linguistics has acquired newfound prominence. Its capacity to evoke emotions, stimulate contemplation, and stimulate metamorphosis is really astonishing. Within the pages of "**Blue Cross Revenue Code Manual 2013 Cpt**," an enthralling opus penned by a very acclaimed wordsmith, readers attempt an immersive expedition to unravel the intricate significance of language and its indelible imprint on our lives. Throughout this assessment, we shall delve into the book's central motifs, appraise its distinctive narrative style, and gauge its overarching influence on the minds of its readers.

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