MEDICINE SECTION
Many specialized types of testing can be found in the Medicine section (e.g., biofeedback, audiologic function tests, electrocardiograms).

Codes in this section do not usually include the supplies used in the testing, therapy or diagnostic treatments unless specifically stated in the code description.

• For Example: there are codes for the prescription and fitting of an artificial eye, one code include the supply of an artificial eye and one code does not.
Reading the entire code description is critical to ensure that you do not unbundle the services by reporting services already included in the code.

You should code supplies, including drugs separately unless otherwise instructed in the code information.

CPT Code 99070 is the supplies and materials code used to identify the supplying drugs, trays, supplies, or materials needed to provide the service or the specific HCPCS supply code.
**Immunizations (90465-90479)**

- There are two types of immunization – **active** & **passive**

- **Active Immunization** is the type given when it is anticipated that the person will be in contact with the disease.
  - **Active immunization** agents can be toxoids or vaccines.
  - **Toxoids** are bacteria that have been made nontoxic; when injected.
    - They produce an **immune response** that builds protection against a disease.
  - **Vaccines** are viruses that are given in small doses and cause an immune response.
Immunizations (90465-90479)

- **Passive Immunization** does not cause an immune response.
  - The injected material contains a high level of antibodies against a disease (e.g., rabies, hepatitis B, tetanus), called “immune globulins”.

- The three subsections in the Medicine section are:
  1. Immune Globulins
  2. Immunization Administration for Vaccines/Toxoids
  3. Vaccines, Toxoids
Immune Globulins (90281-90399)

- Identifies immune globulin product
  
  **Example:** Botulism Antitoxin

- Report administration separately
Immune Globulins Codes Divided By (90281-90399)

- **Type**
  - **Examples**: Rabies, hepatitis B

- **Method**
  - **Examples**: Intramuscular, intravenous, subcutaneous

- **Dose**
  - **Examples**: Full dose, minidose
Immunization Administration for Vaccines/Toxoids (90465-90474)

- **Immunization Administration** subsection codes are reported in conjunction with the Vaccines, Toxoids subsection.

- The Methods of Administration are:
  - Percutaneous
  - Intradermal
  - Subcutaneous
  - Intramuscular
  - Jet
  - Intranasal
  - Oral
Report Administration for Each Dose—Single or Combination

**Example:** Patient (10 years old) receives three separate injections

- **90471**, Administration of tetanus
- **90472**, Administration of rubella
- **90472**, Administration of diphtheria

• OR depending on payer:
  - **90471**, Administration of tetanus
  - **90472 x 2**, Administration of rubella & diphtheria
Vaccines & Toxoids - (90476-90749)

- Many codes are **age-specific**
  
  **Example**
  - **90658**, Influenza vaccine, for ages 3 & over

- Codes for products for **single** diseases
  
  **Example**
  - **90703**, Tetanus

- Codes for combination diseases
  
  **Example**
  - **90701**, Diphtheria, tetanus, & whole cell pertussis (DTP)
Vaccines & Toxoids

- Some vaccines given on schedule

**Example**

- **90633**, 2-dose hepatitis A vaccine
  - 1st dose 1st visit
  - 2nd dose 2nd visit
Remember

- Do not use modifier -51 with Vaccine/Toxoid codes
  - Depending on payer
    - List each code multiple times or
    - Use times (×) symbol & indicate number

Important Reporting Rule

- If vaccine administered during office visit (not related to E/M)
  - Report E/M service (with modifier -25) plus vaccine + administration
- Office visit for vaccine only: Code only vaccine, NO E/M service
A parent takes a 9-year-old child’s physician for an oral poliomyelitis vaccine. The physician’s assistant evaluates the (established patient) and administers the vaccine orally to the child.

90712 – (Vaccines, Poliovirus, Live, Oral)

90473 – (Immunization Administration. One Vaccine/Toxoid)

99211-25 (E/M) **NOTE:** Medicare does not allow an E/M service to be submitted when the only service is the administration of a vaccine.
Routine Vaccinations for Those Over 8

- **Influenza**
  - Substance (vaccine): 90657-90658
  - Administration
    - G0008 HCPCS (Medicare only)
    - 90471/90472

- **Pneumococcal**
  - Substance (vaccine): 90732
  - Administration
    - G0009 HCPCS (Medicare only)
    - 90471/90472
Psychiatry (90801-90802)

- Psychiatric treatment at same time as E/M service, report
  - One code for psychotherapy with E/M

- **Time** major billing factor
  - Codes divided on time
  - Record indicates session time
Many services provided in partial hospital settings

- Patient in hospital during day, return to home for evenings & weekends

Codes divided by

- Interactive or insight oriented
- Inpatient or outpatient
- With or without E/M
- Individual or group
Psychiatry - (90801-90802)  
PERFORMANCE EXERCISE

- Individual medical psychotherapy in office for 30 minutes.
  
  90804

- Psychological testing, 2 hours, administered by a physician.
  
  96101 x2

- Psychiatric evaluation of tests, medical records, or hospital data to make appropriate diagnosis.
  
  90885
Biofeedback (90901-90911)

- Biofeedback is a process of giving a person self-information.

- The information is used by patients to *gain some control over their physiologic processes*, such as blood pressure, heart rate or pain.

- Patients are *trained in biofeedback* by professionals, then continue the therapy on their own.

- Biofeedback is often part of the individual’s psychophysiological therapy.
Biofeedback (90901-90911)
PERFORMANCE EXERCISE

- A 52-year-old man is referred to the physician by his primary care physician for biofeedback to help regulate his blood pressure. The physician conducts a 60-minute session during which the patient is trained in the use of biofeedback.
Dialysis (90918-90999)

- Cleanses blood
  - Temporary (non-ESRD)
  - Permanent (ESRD)
- **Two parts** to report ESRD (end stage renal disease) dialysis services:
  - Physician service & hemodialysis procedure
ESRD Physician Services (90918-90925)

- Includes:
  - Establishment of dialyzing cycle
  - Physician services
  - E/M outpatient dialysis visits
  - Telephone calls
  - Patient management during dialysis

- Reported for month: 90918-90921
  - Less than full month of service: 90922-90925 per day
  - Codes divided on age
Hemodialysis Services (90935-90940)

- Hemodialysis procedure
  - Used for ESRD & non-ESRD
- Billed per day for inpatients receiving ESRD
- Includes all physician E/M services related to procedure
  - Use modifier -25 if separate E/M service provided
Miscellaneous Dialysis Procedures (90945-90999)

- Describes other dialysis procedures

**Example:**
- Peritoneal dialysis in which toxins are passively absorbed into dialysis fluid

**Peritoneal Dialysis**

- Services billed on per-day basis for inpatient **ESRD** (*end stage renal disease*) patients
- Patients can receive training in self-dialysis
  - Reported with **90989-90993**
  - Codes divided by **complete** or **partial** training program
Dialysis (90918-90999)
PERFORMANCE EXERCISE

- Hemodialysis with a single physician evaluation, inpatient
  
  90935

- Peritoneal dialysis with repeated physician evaluation, inpatient
  
  90947
Gastroenterology (91000-91299)

- For tests & treatments of esophagus, stomach, & intestine
- Codes usually reported with E/M or Consultation Service code
- Caution: Many bundled services
Gastroenterology (91000-91299)
PERFORMANCE EXERCISE

- A gastroesophageal reflux test with nasal catheter intraluminal impedance electrode for detection of reflux, 2 hours

91038

- Gastric intubation and aspiration for treatment of ingested poison

91105
General Ophthalmology (92002 -92499)

- Contains E/M codes
- Definitions for new & established patients same as for E/M section
- Codes for bilateral services
  - If only one eye, use modifier -52 (reduced service)
Special Ophthalmologic Services
(92502-92700)

- For special evaluations of **visual system**
- Goes beyond those usually provided in evaluation
- May be reported in addition to basic visual service
Fitting of contact lens for treatment of a cataract, including the lens

- New patient, comprehensive ophthalmologic examination
Special Otorhinolaryngologic Services (92502-92700)

- Special treatments & diagnostic services
  
  **Examples**
  
  - Nasal function tests (rhinomanometry) & audiometric tests
  
  - All hearing tests bilateral unless indicated one ear in description
Special Otorhinolaryngologic Services
(92502-92700)
PERFORMANCE EXERCISE

- Screening test, pure tone, air only
  - 92551

- Nasal function study
  - 92512
Therapeutic Services and Procedures (92950-92998)

- Under this section you will find noninvasive cardiovascular service codes, such as *cardiopulmonary resuscitation (CPR)* and *cardio-conversion*.

- Percutaneous transluminal coronary angioplasty (PTCA) codes are also found in this section.
Echocardiography – 93501-93350

- Echocardiography – is an ultrasound examination of the heart chambers/values, the adjacent vessels, and the pericardium.
Cardiac Catheterization
(93501-93350)

- **Codes** – report **cardiac catheterization**, which is a *diagnostic medical procedure performed of the heart*.

- In this section, you report the catheter **placement, injection, and guidance** services with the follow codes:
  - **Catheter placement** 93501-93533
  - **Injection** 93539-93545
  - **Guidance** 93555-93556
Noninvasive Vascular Diagnostic Studies (93875-93993)

- Codes in this subsection are *used to identify procedures that are conducted to study* veins *and arteries* other than the heart and great vessels.

- These studies use the *same devices* as are used in heart and great-vessel echocardiography, *except the divisions are based on the location* of the vein or artery being studies.
Noninvasive Vascular Diagnostic Studies

(93875-93993)

PERFORMANCE EXERCISE

- A patient is referred for a single-level, bilateral venous occlusion plethysmography of leg.

93965

- A 34-year-old patient presents with a history of inability to sustain an erection. The physician uses a duplex scan to conduct a complete study of the arterial and venous flow of the penis.

93980
Pulmonary (94002-94799)

- Codes in Pulmonary subsection include codes for therapies, such as nebulizer treatments and incentive spirometry, and for diagnostic test, such as pulmonary function test.

- A nebulizer is a device that produces a spray, which is inhaled, used to treat patient with asthma, etc.
Pulmonary (94002-94799)

Performance Exercise

- Pulmonary stress test, simple
  
  94620

- Bronchodilation responsiveness evaluation with spirometry before and after bronchodilator treatment.
  
  94060
Sensitivity testing using various types of tests

Examples

- Percutaneous, intracutaneous, inhalation

Tests use numerous substances

Examples

- Extracts, venoms, biologics, & foods

Type & number of tests based on physician’s judgment
Allergy Testing - (95004-95075)

- Medical record will indicate
  - Number of tests
  - Type of test
  - Method of testing

Allergen Immunotherapy (95115-95199)

- Codes divided into three services
  - Injection only
  - Prescription & injection
  - Provision of antigen (substance) only

- Physician service bundled into Immunotherapy codes
  - If separate E/M service provided, report separately
Allergy & Clinical Immunology (95004-95199)

- Divided into **two** subheadings
  - **Allergy Testing** (95004-95078)
  - **Allergen Immunotherapy** (95115-95199)

**PERFORMANCE EXERCISE**

- Percutaneous test using allergen extracts, immediate type reaction, 10 tests.
  - 95004 x10

- Single injection of allergen using extract provided by the patient.
  - 95115
Neurology & Neuromuscular Procedures (95805-96004)

- Contains codes to report tests:

  **Examples**
  - Sleep tests
  - Muscle tests (electromyography)
  - Range-of-motion measurements
  - Electroencephalogram (EEG)
  - Neurostimulator procedures

- Many bundled services

- Services usually provided in addition to E/M service
Neurology & Neuromuscular Procedures (95805-96004)

PERFORMANCE EXERCISE

- Awake and drowsy EEG and photic stimulation in clinic
- Range of motion measurement and report on both legs

95816

95851 x2
Central Nervous System (CNS) Assessments/Tests (96101-96125)

- **Used to report**
  - Psychological tests
  - Speech/language assessments
  - Developmental progress assessments
  - Thinking/reasoning examinations

CNS Assessments/Tests

- Codes based on **per-hour** basis
  - Except for basic developmental testing
- Includes written report of results
Central Nervous System (CNS) Assessments/Tests (96101-96125)

PERFORMANCE EXERCISE

- A young executive is referred for an 80-minute Minnesota Multiphasic Personality Inventory (MMPI) test by his employer. The employer requests the testing for all newly hired executives who will be working with highly sensitive government documents.

  96101

- A 14-year-old is seen in the office for a 70-minute assessment of the child’s attention span. The child is experiencing increasingly severe episodes of daydreaming. The physician conducts a clinical assessment of the child’s cognitive function.

  96116
Chemotherapy Administration
(96401-96549)

- Represents only preparation & administration of chemotherapy
  - If separate E/M service provided, report E/M code plus –25

- Chemical can be administered (injected) into
  - Lesion
  - Vein
  - Tissue
  - Muscle
  - Artery
  - Cavity
  - Nerve
Chemotherapy Administration (96401-96549)

- Intravenously injected chemicals, two methods of delivery of chemical
  - IV push quickly puts chemical into vein
  - IV infusion delivers chemical over longer period of time

- **Codes** often divided on time of injection procedure

  **Example**
  - **96413**, Chemotherapy administration, intravenous push, up to 1 hour
Chemotherapy Administration

- Chemical agent (substance) reported separately using **96545** or HCPCS J code
- Special supplies (e.g., special needles) reported separately using **99070** or HCPCS code

- Report any intra-arterial **catheter placement** with **36620-36640**

Injections with Chemotherapy

- Report separately any **analgesic** or **antiemetic** (for vomiting)
  - Before or after chemotherapy
Chemotherapy Administration
(96401-96549)
PERFORMANCE EXERCISE

- Chemotherapy administered subcutaneously with local anesthesia
  - 96401

- Chemotherapy administered intravenously using the infusion technique for 50 minutes
  - 96413
Photodynamic Therapy (96567-96571)

- Used in conjunction with the codes for bronchoscopy or endoscopy.
- An agent is injected into the patient and remains in cancerous cell longer than in normal cells.
- After the agent is dissipated from the normal cells, the patient is exposed to laser light.
- The agent absorbs the light and the light produces oxygen, destroying the cancerous cells.
- Codes for endoscopic application are divided on the basis of time-the first 30 minutes & each additional 15 minutes.
- External application is based on each exposure session.
Special Dermatological Procedures (96900-96999)

- Usually used by a dermatologist who sees a patient in an office on a consultation basis.
  - Separate E/M Consultation code are used

- Treatment of skin conditions
  - Actinotherapy—with ultraviolet light
  - Photochemotherapy—with light-sensitive chemicals & light rays
Special Dermatological Procedures
(96900-96999)
PERFORMANCE EXERCISE

- A 16-year-old patient sees a dermatologist in consultation, at which time the physician does a problem focus history and physician examination regarding the patient’s acne. The physician prescribes and provides a treatment of ultraviolet light therapy.

1. 99241-25 (Consultation, Office and/or Other Outpatient)
2. 96900 (Ultraviolet Light Therapy)
Photochemotherapy is provided for a 34-year-old consultative patient with severe dermatosis. The patient receives 8 hours of treatment. The physician provides a comprehensive history and physical examination with moderately complex medical decision making.

1. 99244-25 (Consultation, Office and/or Other Outpatient)

2. 96913 (Photochemotherapy)
Physical Medicine & Rehabilitation (97001-97799)

- Used by physicians & therapists to report services for variety of treatments

**Examples**
- Traction
- Electrical stimulation (used to help heal fractures)

**Patient Training**
- Gait training
- Functional activities

- Codes often have time components

**Example:** 97504, Orthotics fitting & training, per 15 minutes
Physical Medicine & Rehabilitation
(97001-97799)
PERFORMANCE EXERCISE

- Initial prosthetic training, 30 minutes
  
  97761 x2

- Physical medicine treatment procedure, gait training, 30 minutes.
  
  97116 x2
Active Wound Care Management (97602-97606)

- Debridement
  - Negative pressure wound therapy (NPWT) pump draws fluid off the wound and then negative pressure draws the edges of wound together
  - Nonselective: Healthy tissue removed along with necrotic tissue

- Each code for ongoing care reported on per-session basis
Osteopathic & Chiropractic Services (98925-98943)

- Both **inpatient & outpatient** settings
- **Physician services** bundled into codes
- Codes divided by **body area**
Special Services, Procedures, & Reports (99000-99091)

- Handling & conveyance of laboratory specimens
  - 99000-99022

- Postoperative follow-up visits included in surgical package
  - 99024

- Office visits after posted hours or in locations other than office
  - 99050-99056
Special Services, Procedures, & Reports (99000-99091)

- Supplies & materials
  - 99070

- Hospital-mandated on-call services
  - 99026-99027
Sally, a 43-year-old woman, presents with the complaint of a seizing pain in the area of her lower left hip. The chiropractor conducts an assessment of the patient and provides chiropractic alignment to two spinal regions.

- **98940**
  - Osteopathic lumbar manipulation (OMT), one region

- **98925**
PERFORMANCE EXERCISE

- What Medicine code is reported in addition to the basic service code when a service is provided after hours on Sunday.

  99050

- Conveyance of a specimen from the physician’s office to a laboratory.

  99000

- Supplies provided for an office visit exceeding those usually used.

  99070