

## 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.

# Payable Dx Codes For Cpt 2055

**United States. Congress. House.  
Committee on Ways and Means.  
Subcommittee on Health**

## **Payable Dx Codes For Cpt 2055:**

Physicians Fee & Coding Guide ,2011      *Medicare Coverage Decisions and Beneficiary Appeals* United States. Congress. House. Committee on Ways and Means. Subcommittee on Health,2000      **106-1 Hearing: Medicare Coverage Decisions and Beneficiary Appeals, Serial 106-23, April 22, 1999** United States. Congress. House. Committee on Ways and Means,2000      **Medicare : Health Insurance for the Aged, 1971** United States. Social Security Administration. Office of Research and Statistics,1975      **Wikipedia Handbook of Biomedical Informatics ,      Comparing the Pennsylvania Workers' Compensation Fee Schedule with Medicare Rates** Richard A. Victor,2001      *Medicare* United States. Social Security Administration. Office of Research and Statistics,1972 Each annual volume includes section 1 summary section 2 enrollment section 3 participating providers section 4 inpatient hospital care section 5 outpatient hospital services section 6 home health services section 7 physicians and and other medical services      2016 HCPCS Level II Professional Edition - E-Book Carol J. Buck,2015-12-04 For quick accurate and efficient coding pick this best selling HCPCS professional reference From coding expert Carol J Buck 2016 HCPCS Level II Professional Edition provides a spiral bound easy to use guide to the latest Healthcare Common Procedure Coding System codes It helps you locate specific codes comply with coding regulations optimize reimbursement report patient data code Medicare cases master ICD 10 coding and more This professional edition features a full color design Netter s Anatomy illustrations dental codes and ASC Ambulatory Surgical Center payment and status indicators At a glance code listings and distinctive symbols identify all new revised and deleted codes for 2016 UNIQUE Full color Netter s Anatomy illustrations clarify complex anatomic information and how it affects coding The American Hospital Association Coding Clinic for HCPCS citations provide a reference point for information about specific codes and their usage Colorful design with color coded tables makes locating and identifying codes faster and easier American Dental Association ADA Current Dental Terminology code sets offer access to all dental codes in one place Drug code annotations identify brand name drugs as well as drugs that appear on the National Drug Class NDC directory and other Food and Drug Administration FDA approved drugs Quantity feature highlights units of service allowable per patient per day as listed in the Medically Unlikely Edits MUEs for enhanced accuracy on claims Durable medical equipment prosthetics orthotics and supplies DMEPOS indicators clearly identify supplies to report to durable medical third party payers Ambulatory Surgery Center ASC payment and status indicators show which codes are payable in the Hospital Outpatient Prospective Payment System Information on coverage provides alerts when codes have special instructions are not valid or covered by Medicare or may be paid at the carrier s discretion Jurisdiction symbols show the appropriate contractor to be billed for suppliers submitting claims to Medicare contractors Part B carriers and Medicare administrative contractors submitting for DMEPOS services provided Age Sex edits identify codes for use only with patients of a specific age or sex Physician Quality Reporting System icon identifies codes that are specific to PQRS measures Spiral binding allows you

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HCPCS Expert (compact) Hcpcs, Ingenix, 2007 Ingenix HCPCS Level II products enable customers to receive timely and appropriate reimbursement based upon accurate use of the most current codes for supplies and services not included in their CPT book needed for Medicare reimbursement or to bill under APCs **HCPCS 2005**, 2004 **Buck's 2025 HCPCS Level II - E-BOOK** Elsevier Inc, Jackie Koesterman, 2025-02-26 For fast accurate and efficient coding pick this practical HCPCS reference Buck's 2025 HCPCS Level II provides an easy to use guide to the latest HCPCS codes It helps you locate specific codes comply with coding regulations manage reimbursement for medical supplies report patient data code Medicare cases and more Spiral bound this full color reference simplifies coding with anatomy plates including Netter's Anatomy illustrations and ASC Ambulatory Surgical Center payment and status indicators In addition it includes a companion website with the latest coding updates NEW Updated HCPCS code set ensures fast and accurate coding with the latest Healthcare Common Procedure Coding System codes to comply with current HCPCS standards Current Dental Terminology CDT codes from the American Dental Association ADA offer one step access to all dental codes UNIQUE Full color anatomy plates including Netter's Anatomy illustrations enhance your understanding of specific coding situations by helping you understand anatomy and physiology Easy to use format optimizes reimbursement through quick accurate and efficient coding At a glance code listings and distinctive symbols make it easy to identify new revised and deleted codes Full color design with color tables helps you locate and identify codes with speed and accuracy Jurisdiction symbols show the appropriate contractor to be billed when submitting claims to Medicare carriers and Medicare Administrative Contractors MACs Ambulatory Surgery Center ASC payment and status indicators show which codes are payable in the Hospital Outpatient Prospective Payment System to ensure accurate reporting and appropriate reimbursement Durable medical equipment prosthetics orthotics and supplies DMEPOS indicators address reimbursement for durable medical equipment prosthetics orthotics and supplies Drug code annotations identify brand name drugs as well as drugs that appear on the National Drug Class NDC directory and other Food and Drug Administration FDA approved drugs Age sex edits identify codes for use only with patients of a specific age or sex Quantity symbol indicates the maximum allowable units per day per patient in physician and outpatient hospital settings as listed in the Medically Unlikely Edits MUEs for enhanced accuracy on claims The American Hospital Association Coding Clinic for HCPCS citations provide a reference point for information about specific

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**Cancer Policy: Research and Methods** C.L. Bennett,Tammy Stinson,2007-08-20 Policy and outcome studies represent a new area of research in oncology Understanding the factors that affect quality of life costs of care patterns of care and outcomes in oncology is important to providing comprehensive care Health services is meant to be both a productive area of research as well as a discipline that improves patient decision making In sum Cancer Policy highlights some of the important areas of health services research in oncology      **2016 HCPCS Level II Professional Edition** Carol J. Buck,2015-12-18 For quick accurate and efficient coding pick this best selling HCPCS professional reference From coding expert Carol J Buck 2016 HCPCS Level II Professional Edition provides a spiral bound easy to use guide to the latest Healthcare Common Procedure Coding System codes It helps you locate specific codes comply with coding regulations optimize reimbursement report patient data code Medicare cases master ICD 10 coding and more This professional edition features a full color design Netter s Anatomy illustrations dental codes and ASC Ambulatory Surgical Center payment and status indicators At a glance code listings and distinctive symbols identify all new revised and deleted codes for 2016 UNIQUE Full color Netter s Anatomy illustrations clarify complex anatomic information and how it affects coding The American Hospital Association Coding Clinic for HCPCS citations provide a reference point for information about specific codes and their usage Colorful design with color coded tables makes locating and identifying codes faster and easier American Dental Association ADA Current Dental Terminology code sets offer access to all dental codes in one place Drug code annotations identify brand name drugs as well as drugs that appear on the National Drug Class NDC directory and other Food and Drug Administration FDA approved drugs Quantity feature highlights units of service allowable per patient per day as listed in the Medically Unlikely Edits MUEs for enhanced accuracy on claims Durable medical equipment prosthetics orthotics and supplies DMEPOS indicators clearly identify supplies to report to durable medical third party payers Ambulatory Surgery Center ASC payment and status indicators show which codes are payable in the Hospital Outpatient Prospective Payment System Information on coverage provides alerts when codes have special instructions are not valid or covered by Medicare or may be paid at the carrier s discretion Jurisdiction symbols show the appropriate contractor to be billed for suppliers submitting claims to Medicare contractors Part B carriers and Medicare administrative contractors submitting for DMEPOS services provided Age Sex edits identify codes for use only with patients of a specific age or sex Physician Quality Reporting System icon identifies codes that are specific to PQRS measures Spiral binding allows you to lay the book flat for convenient access in practice settings Codingupdates.com website includes quarterly updates to HCPCS codes and content and the opportunity to sign up for e mail notifications of the newest updates UPDATED 2016 official code set ensures compliance with current HCPCS standards for fast and accurate coding      Federal Register ,2001-08      **Cumulated Index Medicus** ,1993

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**HCPCS 2001** American Medical Association, 2000-11. The AMA's guide to Medicare's National Level II Codes for durable medical equipment, medical supplies and drugs contains 130 procedural and anatomical illustrations including 10 new illustrations to help visually confirm procedures being coded. Flagged Quantity Codes: Codes that require quantities are flagged to remind you to fill in the quantity when completing reimbursement forms. Payers Appendix: Find out which payers accept HCPCS Level II codes so you can file claims with confidence. Color Coded Icons: Curbs claim denials with icons that flag codes with special Medicare instructions and coverage issues. Icon Legend: Included on the bottom of every page so you don't have to flip through the entire book to learn what symbols mean. Expanded Index: Links brand name DME like wheelchairs, diabetes supplies and ostomy equipment to their correct codes to help you code accurately. [HCPCS Expert](#) Ingenix, 2003. This is the most comprehensive HCPCS book available. It contains important information as dictated by CMS.

but presents it in an easy to use format to guide the coder confidently through current codes and modifiers as well as code changes additions and deletions

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