



West Virginia University  
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# Introduction to CPT

Current Procedural Terminology

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# Legal Stuff



*The information provided here is personal opinion only and should not be construed as legal advice. Each provider is ultimately responsible for bills submitted under their NPI numbers. For specific legal guidance on any billing issue, consult with your Medicare Carrier and/or your health care attorney.*

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# Creation of CPT

- American Medical Association created CPT in 1966
- 1<sup>st</sup> Edition contained primarily surgical codes
- It began as a 4 digit system but in 1970 changed to 5 digits
- In 2000, CPT was named the national standard under HIPAA

# Definition and Purpose of CPT

- CPT codes are a list of descriptive terms, guidelines, and identifying codes for reporting medical services and procedures.
- The purpose of CPT is to provide a uniform language that describes medical, surgical, and diagnostic services.
- Used as an effective communication among physicians, patients and third party payors

Source: Principles of CPT Coding 6<sup>th</sup> Edition AMA



# Use of CPT

## CPT is used for:

- Reporting medical procedures and services to governmental and third party payors for payment
- Developing medical review guidelines
- Medical research
- Education





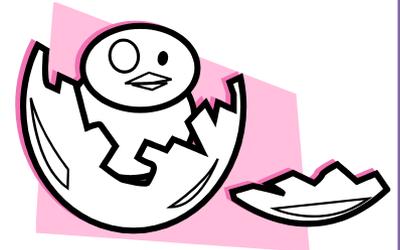
# Who decides?

- AMA has an editorial panel that maintains, revises, deletes and modifies CPT codes
- The panel is made up of 17 members, 11 are nominated by the AMA the others are nominated by various other entities such as BC/BS and CMS.
- Terms range from 1 to 4 years depending on the type of seat held on the panel

Source: Principles of CPT Coding 6<sup>th</sup> Edition AMA

# Breaking Down the CPT book

- The CPT book is broken down into 8 sections of the Category 1 codes.
- Category I codes are used for billing and recording purposes
- Category II codes are used in research and tracking



# Basic Code Sets

99201-99499 Evaluation and Management

00100-01999 Anesthesia

10021-69990 Surgery

70010-79999 Radiology

80047-89356 Pathology and Laboratory

90281-99607 Medicine





# Appendixes

- Appendix A= Modifiers
- Appendix B= Summary of Additions, Deletions and Revisions
- Appendix C= Clinical Examples
- Appendix D= Summary of Add-on Codes
- Appendix E= Summary of Modifier -51 exempt
- Appendix F= Summary of Modifier -63 exempt
- Appendix G= Summary of codes that include moderate sedation
- Appendix H= Alpha listing of Performance Measures
- Appendix I= Genetic Testing Modifiers
- Appendix J= Electrodiagnostic Medicine listing of Sensory, Motor and Mixed Nerves
- Appendix K= Products pending FDA approval
- Appendix L= Vascular Family Listing
- Appendix M= Crosswalk from Deleted Codes
- Appendix N= Summary of Resequenced Codes

# Guidelines

- At the beginning of each section are specific guidelines on how to choose the appropriate code within the section.

Example: Radiology explains how supervision and interpretation codes should be coded

- At the beginning of each code set are guidelines on using the codes within the set

Example: Laparoscopy heading states, Surgical laparoscopy always includes diagnostic laparoscopy. To report a diagnostic laparoscopy (peritoneoscopy) (separate procedure), use 49320

# How to select a Procedure Code

- Select the name of the procedure from the index of the CPT book
- Using the code set listed in the index review the verbiage of the code within the body of the CPT book

# Example

## Appendectomy

1. Index shows code range 44950-44960
2. Go to 44950 and review the individual codes to find the appropriate code for the procedure performed

44950

Appendectomy;

▶ *CPT Assistant Feb 92:22, Sep 96:4, Aug 02:2, Nov 08:7*

(Incidental appendectomy during intra-abdominal surgery does not usually warrant a separate identification. If necessary to report, add modifier -52)

44955

when done for indicated purpose at time of other major procedure (not a separate procedure)(List separately in addition to code for primary procedure)

▶ *CPT Assistant Fall 92:22, Sep 96:4, Apr 97:3, Nov 08:7*

44960

for ruptured appendix with abscess or generalized peritonitis

▶ *CPT Assistant Fall 92:22, Nov 08:7*

# CPT Assistant

On each code there is a listing for the CPT Assistant this is to show you where to go in the AMA monthly publication. (This is for more clarification on the code, if needed.)

44950

Appendectomy;

*CPT Assistant Feb 92:22, Sep 96:4, Aug 02:2, Nov 08:7*

Month

Year

Volume

# Modifiers

- Modifiers are used to “modify” the code that is chosen for a given procedure.
- These are listed in the front cover of the CPT book with a description

Example:

51 Multiple Procedure

52 Reduced Service

# Place of Service

- The first page of the CPT book (no page number designation) is a list of locations.
- These locations indicate where the procedure was performed
- These are selected by the “coder” and they print on the CMS 1500 form for billing

Example:

11 Office

21 Inpatient Hospital

# Using the code

- Once you have selected the procedure code for the service, place of service, and modifiers (if necessary)
- Add the diagnosis code for that procedure (see next presentation on ICD-9 selection)
- The charge will be entered into your “billing” system and printed or electronically filed to the appropriate insurance company for payment.

# Next step

- Once the charge is filed with the insurance company they will review the charge and pay it appropriately according to their contract with the office and/or the patient.
- Payment is received in your office
- Posted to the patient's account
- Patient is billed for the balance due

# Exceptions

- The insurance company may need additional information on the procedure such as a copy of the documentation to support the charge
- They may request information from the patient regarding accident information, possible other insurance responsibility, or coverage determination
- These issues may delay payment

# Evaluation and Management Services

## E&M

- These services are for the visit portion of a patient encounter.
- They have their own set of instructions on selection of the appropriate code. Therefore, they have their own presentation

*“Selection of Evaluation and Management Service Codes”*

# Questions

For questions regarding CPT codes you may contact

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Websites that may be helpful

[www.palmettogba.com](http://www.palmettogba.com)

[www.cms.gov](http://www.cms.gov)