



Ingenix CPT® with RVUs Data Files

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Medicode

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Overview:

CPT® is based on the American Medical Association's Physicians' Current Procedural Terminology (CPT)® coding system, which is copyrighted and owned by the physician organization. CPT® is the nation's official, HIPAA, compliant code set for procedures and services provided by physicians, ambulatory surgical centers, and hospital outpatient services, as well as laboratories, imaging centers, physical therapy clinics, urgent care centers and others.

2010 CPT CODING CHANGES:

Evaluation and Management: The E/M Guidelines at the beginning of the Evaluation and Management chapter were updated to expand the definition of Concurrent Care to include "Transfer of Care." The new definition reminds users to not use consultation codes when a transfer of care occurs, unless such transfer happens after the initial consultation evaluation.

Language within the nursing facility codes changed to remove the language "with the patient and/or family or caregiver" and replace it with "at the bedside and on the patient's facility floor or unit." The new text matches text within other facility E/M codes.

Surgery: The Special Report description in the Surgery Guidelines was shortened and the additional report items list has been removed. Additionally, the adjacent tissue transfer's code number has been changed and there is now an add on code for each additional 30 sq cm's transferred over 60 sq cm.

Soft tissue excision codes now include sizes and additional codes for radical resection of a tumor (eg malignant neoplasm) were expanded to include all existing soft tissue excision locations. Note that many of these codes are resequenced, which means they are not in the typical order of small to large, minor to major or proximal to distal. For example, code 28039 -Excision, tumor, soft tissue of foot or toe, subcutaneous, 1.5 cm or greater, appears before 28043 - Excision, tumor, soft tissue of foot or toe, subcutaneous; less than 1.5 cm. The AMA is no longer renumbering codes to make room for new codes within each section. Instead, the symbol # will be used to denote a code has been resequenced.