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by Kim Pollock, RN, MBA, CPC, CMDFP

See how spine procedure codes, guidelines, and reporting have changed in 2017.

There are many 2017 CPT® code changes pertaining to spine procedures. Here’s a rundown of the most significant changes.

Removal of Moderate Sedation Inclusion
The moderate sedation symbol («) was removed from the vertebro-plasty (22510-22512) and vertebral augmentation (22513-22515)

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Spine surgeons face a multitude of Current Procedural Terminology® (CPT) code changes, effective Jan. 1, 2017. This article provides a summary of these changes so practices can get a head start on understanding their implications. A complete listing of changes can be found in the 2017 CPT manual.

Approach and Visualization Definitions
The Spine and Spinal Cord section of the Nervous System codes in CPT 2017 provides new definitions of key terms and surgical approaches to further clarify these CPT code descriptors, as shown in Table 1.

Surgical CPT codes are presumed to be open unless the code descriptor states otherwise.

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When do you bill 63056-59 with 22633, rather than 63047-59?

A common question among coders and spine surgeons is whether to bill 63056-59 with 22633, or 63047-59. The answer is complex, but CPT® and Medicare guidelines provide essential guidance.

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Follow an Eight-Step Formula
follow an eight-step formula for correct spine coding – september/october 2014
by teri romano, rn, mba, cpc, cmdp and kim pollock, rn, mba, cpc, cmdp

as part of the new spine coding source column, spine surgery today will begin discussing relevant spine coding issues for surgeons. we hope this new feature will enhance your practice and help clarify areas of difficulty. we are pleased to work with coding experts, karenzupko & associates. our goal is to provide our readers with up-to-date coding changes and practice optimization tools. we look forward to your comments and suggestions for future topics.

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procedure coding made simple: five principles will help you capture appropriate charges for spine surgeries
“It seems like coding spine cases is as complicated as doing the surgery,” said a spine surgeon at his first coding training session with me.

Spine procedure coding can make even the most confident coder squirm. But spine procedure coding doesn’t have to be difficult. In fact, it’s quite formulaic. Follow these five principles and spine procedure coding will go from scary to simple.

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Coding For Same Day Anterior-Posterior Spine Procedures: Four Myths Clarified
Coding and billing for anterior-posterior spine procedures can almost be as complex as performing the procedure, particularly if you aren’t familiar with the nuances of the American Medical Association’s Current Procedural Terminology® (CPT) codes. Many physicians and coders have received erroneous advice from wellmeaning colleague physicians, coders and even coding consultants. The top four coding and billing myths for anterior-posterior spine surgery on the same day will be clarified in this article.

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