

CPT CODES- CHEAT-SHEET

SERVICE TYPE	CPT CODE	DESCRIPTION
Diagnostic Evaluation	90791	Psychiatric diagnostic evaluation
Diagnostic Evaluation	90792	Psychiatric diagnostic evaluation with medical services
Psychotherapy	90832	30 minutes
Psychotherapy	90834	45 minutes
Psychotherapy	90837	60 minutes
Psychotherapy Add-On	90833	30 minutes, with E/M service
Psychotherapy Add-On	90836	45 minutes, with E/M service
Psychotherapy Add-On	90838	60 minutes, with E/M service
Interactive Complexity	90785	Add-on code
Crisis Therapy	90839	First 60 minutes
Crisis Therapy	90840	Each additional 30 minutes
Group Therapy	90853	Group psychotherapy
Family Therapy	90846	Without patient present, 50 minutes
Family Therapy	90847	With patient present, 50 minutes
Medication Management	99202-99205	New patient E/M services
Medication Management	99212-99215	Established patient E/M services

Ankle Surgery Procedures Cpt Codes Reference Guide

Marilyn Fordney



Ankle Surgery Procedures Cpt Codes Reference Guide:

Cpt-4 Outpatient Coding Reference and Study Guide 2012 Rhit Kobayashi,2012-05 **Fordney's Medical Insurance and Billing - E-Book** Linda M. Smith,2024-08-07 Gain the skills you need to succeed in insurance coding and billing Fordney s Medical Insurance and Billing 17th Edition helps you master the insurance billing specialist s role and responsibilities in areas such as diagnostic coding procedural coding HCPCs coding medical documentation billing and collection Using clear explanations this book covers all types of insurance coverage commonly encountered in hospitals physicians offices and clinics Step by step guidelines lead you through the submission of electronic claims and paper claims as well as the job search and professional advancement Written by coding specialist and educator Linda M Smith this market leading text is a complete guide to becoming an efficient insurance billing specialist NEW HCPCs Coding chapter covers ambulance billing supply billing and certificates of medical necessity NEW Content on professionalism includes customer service conflict management diversity awareness leadership and other competencies to help you become an effective engaged and highly functioning employee NEW Additional content on medical decision making helps you select the appropriate evaluation and management codes under the current documentation guidelines NEW Additional examples of CMS claims include those from Blue Shield and Automobile Insurance NEW Updates to credentialing include those specific to Medicare Medicaid and Workers Compensation Coverage of medical documentation diagnostic coding and procedural coding provides you with the foundation and skills needed to work in a physician s office as well as ambulatory and inpatient settings Coverage of the role and responsibilities of the insurance billing specialist emphasizes advanced job opportunities and certification Chapter on HIPAA compliance as well as Compliance Alerts highlight important HIPAA compliance issues and the latest regulations Step by step procedures detail common responsibilities of the insurance billing specialist and coder Key terms and abbreviations are defined and emphasized reinforcing your understanding of new concepts and terminology Color coded icons denote and clarify information rules and regulations for each type of payer Insights From The Field includes more interviews with experienced insurance billing specialists providing a snapshot of their career paths and offering advice to the new student Scenario boxes help you apply concepts to real world situations Quick Review sections summarize chapter content and also include review questions Student Software Challenge on the Evolve website allows you to practice filling out interactive CMS 1500 forms **Insurance Handbook for the Medical Office** Marilyn Fordney,2015-11-26 Stay up on the latest in insurance billing and coding with Marilyn Fordney s Insurance Handbook for the Medical Office 14th Edition Trusted for more than 30 years this market leading handbook equips you to succeed as medical insurance specialist in any of today s outpatient settings Coverage emphasizes the role of the medical insurance specialist in areas such as diagnostic coding procedural coding Medicare HIPAA and bill collection strategies As with previous editions all the plans that are most commonly encountered in clinics and physicians offices are incorporated into the text as well as icons

for different types of payers lists of key abbreviations and numerous practice exercises that assist you in accurately filling out claim forms This new edition also features expanded coverage of ICD 10 electronic medical records electronic claims submission and the HIPAA 5010 keeping you one step ahead of the latest practices and protocols of the profession Key terms are defined and emphasized throughout the text to reinforce understanding of new concepts and terminology Separate chapter on HIPAA Compliance in Insurance Billing as well as Compliance Alerts throughout the text highlights important HIPAA compliance issues to ensure readers are compliant with the latest regulations Emphasis on the business of running a medical office and the importance of the medical insurance specialist details the importance of the medical insurance specialist in the business of the medical office Increased focus on electronic filing claims submission prepares readers for the industry wide transition to electronic claims submission Separate chapter on documentation in the medical office covers the principles of medical documentation and the rationales for it Service to Patient features in most chapters offer examples of good customer service User resources on the Evolve companion website feature performance checklists self assessment quizzes the Student Software Challenge with cases on different payer types and an interactive CMS 1500 02 12 form to fill in NEW Expanded coverage of ICD 10 prepares users to code ICD 10 with the planned effective date of October 2015 NEW Added information on the electronic medical record and electronic claims submission including information on the HIPAA 5010 equips users for the transition between paper and electronic methods of medical records and links the CMS 1500 02 12 form to the electronic submissions process NEW SimChart for the Medical Office SCMO application activities on the companion Evolve website adds additional functionality to the insurance module on the SCMO roadmap

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Exercises Quick Checks and Toolbox features reinforce coding rules and concepts and emphasize key information

Valuable tips and advice are offered in features such as From the Trenches Coding Shots Stop Caution Check This Out and CMS Rules

Sample EHR screenshots in Appendix D show examples similar to the electronic health records you will encounter in the workplace

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