

Part B Insider (Multispecialty) Coding Alert

2011 Payment: 95992: CRP Code Wins Payable Status

Medicare still won't reimburse audiologist-billed Epley.

After two years of battles with CMS over canalith repositioning procedure (CRP) coding, physicians will finally get paid for these specific codes.

CPT 2009 excited coders with new CPT code 95992 (Canalith repositioning procedure[s] [e.g., Epley maneuver, Semont maneuver], per day), but the 2009 Medicare Physician Fee Schedule cut coders' applause short. CMS assigned the codes 'B' status or always bundled making payment for CRP or the Epley maneuver using the new code impossible to obtain.

The 2011 Medicare Physician Fee Schedule ends the fight for payment of CRP. At the beginning of next year, the codes status will be "A'", announced **Marc Hartstein,** deputy director for the Hospital and Ambulatory Policy Group for the Center for Medicare in his presentation, "Medicare Physician Payment Schedule 2011 Changes and Beyond" at the CPT Symposium on Nov. 10, 2010 in Chicago. "We will finalize the proposal with a work RVU of 0.75 and the RUC recommended PE inputs," Hartstein said.

When 95992 had status B, physicians were instructed to instead use an E/M code for the service. Now, they'll be able to specifically code for the work of CRP with 95992.

Remember: Medicare does not allow payment for audiologists performing therapeutic procedures, such as CRP.