

Part B Insider (Multispecialty) Coding Alert

CCI Edits: Size-Based Wound Care Codes Face Hundreds Of Edits

Needle electromyography code edits can't be overridden

For Medicare providers, the Grinch comes in January. Just when you're getting ready to start using your shiny new codes, the Correct Coding Initiative ties them in knots.

CPT 2005 includes two new codes for active wound care based on the wound's size, 97597 (for wounds smaller than 20 square cm) and 97598 (for greater than 20 square cm). Now the [CCI Edits](#) are making these two codes mutually exclusive with debridement codes 11010-11012 and burn treatment codes 16000-16035.

Codes 97597 and 97598 will become components of a startling 540 codes, including 92 general surgery codes, 434 musculoskeletal surgery codes and neuroplasty codes 64702-64726.

Also, 280 codes will become components of both 97597 and 97598, including nerve block injection/introduction codes 64400-64483, operating microscope code 69990, intralesional injection codes 11900-11901 and physical therapy code 97002.

CPT 2005 also unveiled new codes for central motor evoked potential studies for upper limbs (95928) or lower limbs (95929). Now CCI 11.0 makes both codes components of 472 other codes - including 57 codes from the musculoskeletal system surgery section and 410 from the nervous system surgery section. And you won't be able to use a modifier to override those edits.

The new "Welcome to Medicare" exam code (G0344) is mutually exclusive with 48 Evaluation/Management codes ranging from [CPT 99201 - 99350](#). You will be able to use a modifier to override this edit if there's a good reason for performing an E/M visit alongside the initial preventive exam. Several codes will also become components of G0344, including 28 psychiatric care codes, four ophthalmic codes, eight cardiography codes, plus codes from the muscle testing (95381-95852), counseling (96150-96154) and medical nutrition therapy (97802-9804) sections. Initial hospice consultation code G0337 is also mutually exclusive with E/M codes 99201-99215. And another 72 codes will become components of G0337, including 53 codes from the "Medicine" section of the CPT book.

The new Category III code for stereotactic body radiation therapy, treatment delivery, one or more delivery areas, per day (0082T) becomes mutually exclusive with 40 codes from the craniectomy/craniotomy (61300-61564) and stereotaxis (61720-61867) sections.

Code 95870 (Needle electromyography; limited study of muscles in one extremity or non-limb [axial] muscles [unilateral or bilateral], other than thoracic paraspinal, cranial nerve supplied muscles, or sphincters) will become a component of 469 codes, including 60 musculoskeletal system surgery codes and 407 neurosurgery codes. You won't be able to use a modifier to override these edits.