

Eli's Rehab Report

Coding Corner: Give a Warm, Wound Care Welcome to 97610

Non-contact, low-frequency ultrasound graduates from Category III status.

Wound care specialists nationwide are cheering the addition of a new CPT® code for non-contact, low-frequency ultrasound:

- 97610 □ Low frequency, non-contact, non-thermal ultrasound, including topical application(s), when performed, wound assessment, and instruction(s) for ongoing care, per day.

Most commonly associated with the MIST Therapy® brand name, this wound care modality is quite popular with both PTs and patients.

"Currently, no other therapeutic intervention" combines so many different wound care techniques, says Heather McCormack PT, DScPT, CWS, clinical lead in wound management and instructor of physical therapy at Mayo Clinic College of Medicine in Rochester, MN. The procedure is highly effective for multiple etiologies of wounds and involves no contact pressure, making the therapy more comfortable for the patient, she adds.

"The therapy is generally provided three times per week for six to eight weeks as an outpatient and daily as an inpatient," says Pam Unger, PT, CWS, VP of medical affairs for Celleration, a wound care-specific medical device company based in Eden Prairie, MN, which launched MIST Therapy®. "It is very effective on acute and chronic wounds, in particular reducing chronic inflammation, bacteria, and biofilm."

One Step Closer to Reimbursement

Currently, 97610 does not have a value on the Medicare Fee Schedule. However, the procedure has won a huge reimbursement victory in graduating to Category I status in CPT®.

Previously, one would report this procedure as 0183T, a Category III code, notes Carmen Elliot, MS, director of payment initiatives for the American Physical Therapy Association. "Category III CPT® codes are temporary codes for emerging technology, services, and procedures," she explains.

The downside: Category III codes are not exactly reimbursement-friendly. "While that is the CPT® process for new technology, most payers will not cover Category III codes," Unger says.

"Many centers could have been using this procedure but didn't before because it was just a black pit for money," McCormack says. "Now it has a [better] chance to for reimbursement."

Watch for Potential Coding Traps

With reimbursement decisions now in Medicare's court, now's the time to be mentally one step ahead of ways your future reimbursement could get slammed.

Example: Look carefully at the next round of CCI edits. "It will be interesting to see if this new code can be combined with any other wound care codes," McCormack says, noting that the debridement codes (97579 and 97598) contain the same language about wound assessment and instructions for ongoing care as 97610.

"Coding challenges are anyone's guess," Unger says. "Medicare has been very cautious about debridement and unna

boots, but that should not impact 97610."