

Eli's Rehab Report

Get a Grip on Coding Hand Therapy Services

Diagnoses fall under repetitive motion, post-surgical and general medical conditions

When a patient experiences pain from a hand disorder, an E/M service may be all it takes for a physician to decide to refer the patient to your occupational therapist (OT). Our experts give you a foolproof method for coding these challenging cases when primary care physicians throw them your way.

You know the routine: A patient presents to your practice with a diagnosed case of carpal tunnel syndrome (354.0). She's a bookkeeper who uses her dominant right hand to perform 10-key calculations during the day. At home, she feeds and dresses her infant using her right hand. The OT has her work on a computer for 15 minutes to practice typing in a more appropriate position and have her work on the adding machine with her left hand. For another 15 minutes, the therapist and the patient sit with a doll to demonstrate how she can feed her baby using her left hand instead of her right. Also, the OT shows her how to hold and pick up her baby without exerting as much strain on her right hand.

Choosing the CPT Code is often the easy part: In this case, you would report your OT's services as "activities of daily living" instructions (ADL) and report two units (total of 30 minutes) of 97535 (Self-care/home management training [e.g., activities of daily living [ADL] and compensatory training, meal preparation, safety procedures, and instructions in use of assistive technology devices/adaptive equipment/ direct one-on-one contact by provider, each 15 minutes).

Thumb Through These Therapy Codes

OTs' hand therapy treatment plans often consist of, but are not limited to the following services, according to **Deborah Yarett Slater, MS, OTR/L, FAOTA**, practice associate at the American Occupational Therapy Association (AOTA) in Bethesda, Md.:

OT evaluation (97003) or OT re-evaluation (97004)

Physical Agent Modalities, such as:

- Paraffin baths (97018)
- Unattended electrical stimulation (97014) or attended electrical electrical stimulation (97032)
- Fluidotherapy (97022)
- Iontophoresis (97033)
- Ultrasound (97035)

Therapeutic procedure/exercise for strength, range of motion (97110)

Manual therapy techniques (mobilization, etc.) (97140)

Orthotic fit/training (97504)

Therapeutic activities to improve functional performance (CPT 97530)

Self care/home management training (97535)

Community/work reintegration training, including work environment modification/analysis, work task analysis and assistive technology/adaptive equipment (97537)

Wound care management (97597, 97598)

Physical performance test or measurement (97750)

Manual muscle testing (95832)

Range of motion measurements/report (95852)

Occupational therapy practitioners also fabricate, provide and/or adapt a wide variety of static and dynamic splints. For these, you may use HCPCS Level II codes .

Note: "We also provide a lot of psychosocial support (for which we don't charge) because these people's lives have been disrupted, and their physical conditions often lead to problems in other areas of their lives," says **Monica Van Niel, OTR/L**, an occupational therapist at the Cleveland Clinic Foundation in Cleveland, Ohio.

With regard to hand therapy, you'll have a hard time distinguishing an OT and a PT because "this is one area of rehab where there is usually a refreshing interdisciplinary interaction without turf wars," adds **Christopher Sorrells, OTR, CHT**, an occupational therapist at Rehabnet Outpatient Center in Santa Monica, Cali.

Put Your Finger On These ICD-9 Codes

Unlike CPT coding for hand therapy, choosing diagnosis codes to support treatment plans can be more complicated unless you break them down into bite-sized pieces. Diagnoses requiring hand therapy may fall into three categories, which you should use to help choose ICD-9 codes that support medical necessity, Yarett Slater explains:

(1) Post-Surgical Conditions: such as tendon, ligament, and nerve repairs and release in cases of entrapment; open fracture reductions; carpal tunnel release, amputations (886-887) and reimplantations of digits or upper extremities; burns (940-949), pre-and post skin grafting; tendon transfers, general surgical interventions like trigger finger (727.03) release and Dupuytren's contracture (728.6), and joint replacements (arthroplasty).

(2) Repetitive Motion or Compression Disorders (not necessarily treated surgically): such as carpal tunnel syndrome (354.0) and thoracic outlet syndrome (353.0).

(3) General Medical Conditions (which may limit hand function): such as spinal cord injuries, multiple sclerosis (340), and rheumatoid arthritis (714.0).

