

## Eli's Rehab Report

### Reader Question: Neuromuscular Re-Education

**Question:** We often bill the code for neuromuscular re-education of movement for our cerebral palsy patients, but our new office manager says he isn't sure we're meeting the requirements for this code. What is necessary for billing?

Wisconsin Subscriber

**Answer:** Code 97112 (therapeutic procedure, one or more areas, each 15 minutes; neuromuscular reeducation of movement, balance, coordination, kinesthetic sense, posture, and/or proprioception for sitting and/or standing activities) identifies a therapeutic procedure that CPT defines as a manner of effecting change through the application of clinical skills and/or services that attempt to improve function. The physician or therapist must have one-on-one contact with the patient to bill for this procedure. These services may be provided incident to a physician's services, in which case the physician would have to supervise the therapist directly in his or her office.

Most carriers allow a maximum of 12 visits per month for this service, which uses stretching, strengthening and specialized biomechanical exercises to allow patients to find new ways to rest, hold, balance and move their bodies. Each visit billed as 97112 should last no more than 30 minutes (no more than two units of 97112).