



Massage Today

February, 2006, Vol. 06, Issue 02

Coding for Insurance Billing and Medicare Issues

By Vivian Madison-Mahoney, LMT

From the phone calls and e-mails I've received from massage therapists across the country and a recent survey taken by AMTA, it's evident there are a variety of CPT Codes being used by massage therapists for billing insurance.

Many of those codes used include deleted codes, codes not in our scope of practice, codes that raise red flags with insurers for a variety of reasons and correct codes used in conjunction with incorrect codes.

Coding and billing requirements and opportunities have changed over the years. When I began billing insurance in late 1984, I billed by using code 97139, (an unspecified procedure code). I used the term, "soft tissue manipulation," eliminating the words "massage or massage therapy." This worked fine for several years until my first Blue Cross case.

It was an eye opener when Blue Cross only reimbursed \$12 for a full hour session. After continued research and questions, I soon learned about the fifteen minute increment billing requirements by some insurers. In my desire to find ways to get massage therapists in the system so to speak, I began to do more research and began practicing with other codes. It was then I learned that Blue Cross would only reimburse for CPT Code 97124 (massage). Billing the way Blue Cross required I was then reimbursed \$48 for the full hour. Getting an increase from \$12 to \$48 was an exciting time!

Workers' compensation in Florida, at that time (as with many states yet today), was way behind the times when it came to coding, so I had to bill differently with them using codes not used with any other carrier. Over the years, my office expanded the use of codes as we were reimbursed for them. However, as time went on and the reimbursement amounts began to increase, we began to reduce the number of codes we experimented with to simplify things.

Because I am a provider of CEU'S for insurance billing seminars and home study courses, I became a lot more conservative in order to protect you, who now bill insurance companies. It's now to the point where possibly the only available and necessary procedure code(s) are 97124 (massage) for basic Swedish massage, and 97140 (Manual Therapy Techniques), because it encompasses myofascial release, manual traction and manual lymphatic drainage and because reimbursement now is at a fairer rate in most cases.

There are many "techniques" of massage, but there are no codes to represent these "techniques." We must use those procedure codes available to us that are within our scope of practice. Of course, there always are those codes for modalities which might be used if within a therapists scope of practice, such as whirlpool, infrared, contrast baths, electrical stimulation, hydrotherapy, paraffin baths, etc. Be sure you know and stay within the scope of practice for the state you practice in.

Documentation is the key to getting paid for the time spent and the codes used. Following the doctor's prescriptions, billing for the same procedure or modality that is on the prescription and documenting exactly that, are the keys to being better paid without delays, denials or reductions, and only accepting cases that will reimburse a massage therapist. Not all types of cases are reimbursable to a massage therapist.

As time goes on, I am sure coding changes or definitions will work more in our favor but until it does, let's use common sense and don't try to go overboard as it only raises red flags with insurance companies that could set us back many years. Stick to your scope of practice and with what is written on the prescription. Make sure your progress (SOAP) notes reflect what the prescription calls for and that your bills reflect both the prescription orders and your documentation.

There is a company called Alternative Link/ABC Coding working on an entirely different coding system for each alternative provider. These codes ultimately would incorporate each technique used by a massage therapist or other alternative care providers. However, until these codes can be used by all therapists and accepted by all insurers, I will be keeping in close contact with them. I will inform you of any changes or abilities to use this coding system when it becomes available. For more information on this coding system please contact Connie Koshewa at: connie.koshewa@alternativelink.com.

The Medicare Issue

For more information on the coalition to Preserve Patient Access to Physical Medicine and Rehabilitation, please contact me if you did not receive this information on my recent "Massage Insurance Updates" e-mail.

If you are not on that list but want to be, please e-mail your request to me at vivianmadison@aol.com.

Click [here](#) for more information about Vivian Madison-Mahoney, LMT.



Page printed from:

http://www.massagetoday.com/archives/2006/02/08.html?no_b=true