

The following is a guide to Current Procedural Codes that may be used by athletic trainers when billing for athletic training services. It is important to have the proper ICD-9 diagnosis code prior to using the CPT codes. The current information is in reference to CPT codes 2001.

EVALUATION CHARGES:

97005/97006 ATHLETIC TRAINER EVALUATION and RE-EVALUATION (PER VISIT)

Used for evaluation of athletic injuries to determine the appropriate plan of care by regulated Athletic Trainer. Re-evaluation to re-assess the patient's progress, with goals range of motion, and functional progress. This is not time based.

97750 PHYSICAL PERFORMANCE TEST (EACH 15 MIN.) Used when performing specific musculoskeletal examinations, such as specific muscle strength, closed chain testing, vestibular/balance testing, isokinetic testing, and other physical performance testing. Must have a written report/documentation to support this (*Example: Physician progress report for patient visit*). Also used for Functional Capacity Evaluations (each 15 min.).

TREATMENT CHARGES:

97116 GAIT TRAINING (EACH 15 MIN.) Used when you are performing Gait Training Activities, including stair climbing, with patients.

97110 THERAPEUTIC EXERCISE (EACH 15 MIN.) Used when performing therapeutic exercises to develop strength and endurance, range of motion and flexibility to one or more areas each 15 minutes. One-on-one interaction with patient. (*Example: Use this charge when performing initial ACL quad vmo and ROM exercises, or performing Lumbar Stabilization and the goal is strengthening muscles.*)

97112 NEUROMUSCULAR RE-EDUCATION (EACH 15 MIN.) Used when performing neuromuscular re-education of movement, balance, coordination, kinesthetic sense, posture and proprioception.

97530 THERAPEUTIC ACTIVITIES (EACH 15 MIN.) Direct patient one on one contact using dynamic activities to improve functional mobility like physical and sports activities.

97113 AQUATIC THERAPEUTIC EXERCISE (EACH 15 MIN.) This charge is used for aquatic therapy when performing therapeutic exercise in water. Maybe charged if extremity is in pool and exercise is done in the pool.

97124 MASSAGE (EACH 15 MIN.) Used when performing massage, including but not limited to effleurage, petrissage and or tapotement (stroking, compression, percussion).

97530 BODY MECHANICS TRAINING (EACH 15 MIN.) Used when performing therapeutic activities to train a person on proper body mechanics in order to improve functional performance.

97140 MANUAL THERAPY (EACH 15 MIN.) Used for joint mobilization, manual lymphatic drainage, manual traction, myofascial release, soft tissue mobilization or desensitization techniques are utilized. Time based.

97504 ORTHOTICS FITTING AND TRAINING (EACH 15 MIN.) Used for orthotic training (dynamic bracing, splinting) for upper and lower extremities. (*This charge should not be used in addition to a gait training charge*).

97150 THERAPEUTIC PROCEDURES – GROUP (EACH VISIT) Used when working with two or more individuals at one time on therapeutic activities/exercises. May be used with other charges. Group Lumbar Stabilization or Group Aquatic Therapy or Group Exercise Programs should use this charge.

97150 SUPERVISED EXERCISE (EACH VISIT) Used when the patient requires minimal supervision with his/her exercise program or used in services needed but not directly provided by licensed personnel. (*<1 hour and > 1 hour two separate possible charges*)

11040 DEBRIDEMENT (EACH VISIT) Used when performing debridement procedures in conjunction with wound care (check scope of practice for state).

97139 WOUND CARE (EACH 15 MIN.) Used when performing dressing changes and wound care activities other than debridement.

OR MORE SPECIFICALLY (when debridement included):

16020 – Burn debridement &/or dressing, 9% or less

16025 – Burn debridement &/or dressing, 10 – 18%

16030 – Burn debridement &/or dressing, 19% or more

97139 TAPING (EACH VISIT) Charge for taping of patient during treatment session, taping shoulder, knee, ankle, etc.

OR MORE SPECIFICALLY:

29240 – Shoulder strapping/taping

29260 – Elbow/wrist strapping/taping

29280 – Hand/finger strapping/taping

29520 – Hip strapping/taping

29530 – Knee strapping/taping

29540 – Ankle strapping/taping

29550 – Toes strapping/taping

29580 – Unna Boot

95831 Manual Muscle Testing – Extremity/Trunk

95832 M.M.T. Hand with or without comparison with normal side

95833 M.M.T. Total evaluation of body, excluding hands

95837 M.M.T. Total evaluation of body, including hands

95851 Range of Motion – of measurements & report (separate procedure); each extremity (excluding hand) or each trunk section (spine).

95852 ROM measurements of hand, with or without comparison with normal side

97545 Work Hardening/conditioning; initial 2 hours

97546 Work Hardening/conditioning; each additional hour (list separately in addition to code for primary procedure)

MODALITIES:

97035 ULTRASOUND (EACH 15 MIN.) Deep heat modality used to decrease pain and muscle spasm.

97035 PHONOPHORESIS (EACH 15 MIN.) *This charge is not being reimbursed. Must bill for ultrasound if billing for this service. Make sure you document the use of drug, but bill for and document it as ultrasound.*

97032 ELECTRICAL STIMULATION (EACH 15 MIN.) Used for treatment of trigger points and muscle spasms to treat specific areas of pain using a combination of both ultrasound and electrical stimulation at the same time.

97033 IONTOPHORESIS (EACH 15 MIN.) Electrical stimulation that is used to drive a medication into the tissue. Used to decrease pain and inflammation. Includes the cost for medication, the electrodes and the direct therapy time.

97032 CONSTANT ELECTRICAL STIMULATION (EACH 15 MIN.) Used for treatment of trigger points for pain reduction, motor points for muscle re-education or any other electrical stimulation that requires direct (*one-on-one*) patient contact by the provider.

97034 CONTRAST BATHS (EACH 15 MIN.) Modality used to help with edema/pain reduction.

97014 ELECTRIC STIMULATION (APPLICATION TO ONE OR MORE AREAS) Used for pain modification, muscle spasm reduction and edema reduction. It is used when there does not have to be constant attendance by the provider through the whole treatment procedure. Charged by the visit.

97022 WHIRLPOOL (APPLICATION TO ONE OR MORE AREAS) Used for treatment of wounds/debridement, pain reduction, muscle relaxation, edema reduction, and improving range of motion. Charge by the visit.

97010 HOT PACKS (APPLICATION TO ONE OR MORE AREAS) Application of moist heat pack used for pain modulation muscle relaxation. Can only bill for this if used in conjunction with another therapy treatment or modality. Charged by the visit.

97010 COLD PACKS/ICE MASSAGE (APPLICATION TO ONE OR MORE AREAS) Application of cold pack or performance of ice massage to one or more areas used for pain reduction, edema reduction or muscle spasm reduction. Can only bill for this if used in conjunction with another therapy treatment or modality. Charged by the visit.

97012 TRACTION, MECHANICAL (NOT TIME BASED) Cervical or lumbar traction used to help decrease pain and improve mobility. Charged by the visit.

97016 COMPRESSION PUMP (APPLICATION TO ONE OR MORE AREAS) Vasopneumatic modality used for edema reduction.