

CPT

Meet with your Billing Office to determine which balance program codes will work, as well as local reimbursement rates across your payer sources. This information will support your program planning.

DIAGNOSTIC SUPPORT PHASE			
	CPT Code	Modifier	
Computerized Dynamic	92548		Posturography
Posturography (CDP)	92548	26	Posturography (professional)
	92548	TC	Posturography (technical)
PER/Postural Evoked Response	95934	50	H-reflex test
	95934	26-50	H-reflex test (professional)
	95934	TC-50	H-reflex test (technical)
BALANCE PERFORMANCE EVALUATION			
All Balance Manager tests	97750		Physical performance test
REHABILITATION/TREATMENT			
	97110		Therapeutic exercises
	97112		Neuromuscular re-education
	97116		Gait training therapy
	97530		Therapeutic activities
	97533		Sensory integration
	97535		Self care management training
	90901		Biofeedback train, any method

NeuroCom provides this information only as a service and recommends consultation with a qualified reimbursement or financial specialist and review of official publications regarding billing and coding of medical procedures to determine the most appropriate billing strategies. Coding options outlined on this handout can serve as a starting point for these discussions.

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References:
American Medical Association, Current Procedural Terminology (CPT) 2008 Professional Edition Centers for Medicare and Medicaid Services, www.cms.hhs.gov

ICD-9 Coding in the Management of Balance and Dizziness Disorders

What patients qualify for balance treatment perscription?

MEDICAL/DIAGNOSTIC CODES	
306.9*	Unspecified psychophysiological malfunction
386.00-386.03	Meniere's disease
386.10-386.19	Other and unspecified peripheral vertigo
386.2	Vertigo of central origin
386.50-386.58	Labyrinthine dysfunction
386.9	Unspecified vertiginous syndromes and labyrinthine disorders
850.11-850.9	Concussion
851.00-851.99	Cerebral laceration and contusion
852.00-852.59	Subarachnoid, subdural and extradural hemorrhage, following injury
853.00-853.19	Other and unspecified intracranial hemorrhage following injury
854.00-854.19	Intracranial injury of other and unspecified nature
951.5	Injury to acoustic nerve
E930.7**	Drugs, medicinal and biological substances causing adverse effects in therapeutic use; antineoplastic antibiotics
E930.8***	Drugs, medicinal and biological substances causing adverse effects in therapeutic use; other specified antibiotics
E933.1****	Drugs, medicinal and biological substances causing adverse effects in therapeutic use; primarily systemic agents; antine oplastic and immuno-suppressive drugs
SYMPTOM/FUNCTIONAL CODES (QUALIFYING PATIENT FOR REHABILITATION)	
438.85	Other late effects of cerebrovascular disease, vertigo
719.7	Other and unspecified disorders of joint, difficulty in walking
728.2	Muscle wasting and disuse atrophy, not elsewhere classified
780.4	Dizziness/giddiness, lightheadedness, vertigo NOS (non-specific)
781.0	Abnormal involuntary movements
781.2	Abnormality of gait (Ataxic, paralytic, spastic, staggering)
	DEF: Abnormal, asymmetric gait
781.3	Lack of coorindation (Ataxic NOS (non-specific), muscular incoordination)
V 15.88	History of Fall/Risk to Fall
* for psychogenic dizziness	*** for adverse effects of aminoglycosides
** for adverse effects of bleomycin	**** for adverse effects of cisplatin

Comprehensive diagnostic coding for balance and dizziness impairment patients

How should I code to qualify both for diagnosis and treatment?

1. Primary pathology (as known)
2. Chronic Conditions (e.g. 438.x Latent Effect of Stroke, 250.x Diabetes, Neuropathy) that place patient at risk for fall and will affect treatment
3. Functional/symptom codes
4. V 15.88 History of Fall (as appropriate)