



# Oregon

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## Department of Human Services

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TO: School-Based Health Service Providers

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**SUBJECT: NEW CODES, Changes to Codes EFFECTIVE January 1, 2006.**

The below listed procedure codes will be implemented with an effective date of January 1, 2006. However, these codes may not be available for billing SBHS until we have receipted costs and set the SBHS fee schedule in February.

CPT 2006 includes revisions and reorganization of codes in the 97000 series related to services for orthotic and prosthetic management. The narrative of the codes prior to the 2006 changes did not fully describe the services associated with the interventions. For that reason, combined with possible conflicts associated with billing of these codes, the CPT Editorial panel accepted the following proposed revisions.

The 2006 codes related to orthotic and prosthetic management will be contained under subheading Orthotic Management and Prosthetic Management. This reorganization required that the revised codes be renumbered and the old codes (ie, 97504, 97520, and 97703) be deleted from the CPT codebook. Therefore the new codes are as follows:

**97760** Orthotic(s) management and training,(including assessment and fitting when not otherwise reported), upper extremity(s), lower extremity(s) and/or trunk, each 15 minutes.

**97761** Prosthetic training upper and/or lower extremity(s), each 15 minutes.

**97703** Checkout for orthotic/prosthetic use, established patient each 15 minutes.

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While assessment and management of the patient were always inherent in orthotic services, code 97760 now specifically includes the words assessment and management. For example this code includes the provider's time associated with determining the proper orthotic design in relation to the patients' skin integrity, sensibility and healing of tissues with or without surgical repair (eg, static vs dynamic, pre-fabricated vs custom designed, choice of materials such as thermoplastic, pulleys, and elastic tension). The code also includes the fitting of the orthotic, training in use, care and wearing time of the orthotic, and brief instructions in exercises that are to be performed while the orthotic is in place.

For example, a patient who sustained a radial nerve injury secondary to a humeral fracture at the level of distal humerus may require a dynamic outrigger splint to facilitate wrist extension until the nerve recovers. The provider will need to train the patient in the use and care of the orthosis as well as exercises to perform while in the orthosis. The time associated with those services would be reported as 97760. On the same date of service the provider may instruct the patient in upper extremity strengthening exercises for the shoulder, elbow, and fingers, which would be appropriately reported as 97110.