KZA/ENT 2021 CPT Power Coding

Learning Objectives

- Choose surgery modifiers that optimize payment and reduce risk.
- Use surgery coding that meets CPT rules and government regulations, for commonly performed procedures.
- Integrate ENT subspecialty coding principles in otology/neurotology, rhinology, laryngology, facial plastics, head and neck surgery, and sleep surgery.
- Demonstrate comprehension on how to code for new ENT technology procedures.
- Apply new and revised otolaryngology CPT codes into your practice.

Check-in and Breakfast (provided)	7:15am – 8:00am
 The Global Surgical Package What's included in a CPT code and what can you separately report Coding for pre-op visits, post-op visits related to the procedure, post-op visits unrelated to the procedure 	8:00am – 8:15am
 Using Modifiers to Get Paid Commonly used modifiers in an ENT practice – when to use them and how they impact reimbursement Modifiers 22 (increased service) vs. 52 (reduced service) vs. 53 (discontinued procedure) Modifiers 50 (bilateral procedure) and 51 (multiple procedures) Unravel the confusion between modifiers 51 vs. 59 vs. Medicare's X- modifiers. Performing a procedure when you're already in a global period – is it included in the global period you're already in or can it be separately reported? Using modifiers 58 (staged/anticipated procedure), 78 (unplanned procedure) and 79 (unrelated procedure) 	8:15am – 9:00am
 Explanation of the assistant surgeon (80, 82) vs. co-surgeon (62) modifiers KZA's "quick guide" to surgery code modifiers 	
Surgical Procedure Coding Using an Unlisted Code New Technology in ENT Procedures Automated tympanostomy tube delivery, nasal lesion ablation, minimally invasive procedures for nasal vestibular stenosis: learn the latest on coding, billing and reimbursement strategies Otology/Neurotology Microscope codes, tympanostomy tubes, intratympanic injection, Epley maneuver, mastoid debridement, tympanic membrane repair procedures,	9:00am — 9:45am
mastoidectomy, cochlear implant, repair of semicircular canal dehiscence, excision of acoustic neuroma/vestibular schwannoma o NEW in 2021: Eustachian tube dilation codes Rhinology	

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- Control of epistaxis, intranasal removal of polyps, inferior turbinate procedures, endoscopic sinus surgery
- Laryngology/Airway
 - Flexible laryngoscopy procedures including laser ablation, tracheostomy and tube change, Botox injections, thyroplasty
- Facial Plastics
 - Coding for skin biopsy and lesion removal, wound/laceration repairs, adjacent tissue transfer, paramedian forehead flap, skin grafts, rhinoplasty, repair of nasal vestibular stenosis
 - o NEW in 2021: Repair of nasal valve collapse with lateral wall implant code
- Head and Neck
 - Fine needle aspiration, diagnostic head/neck ultrasound, tonsillectomy/adenoidectomy and postop bleed scenarios, direct laryngoscopy, bronchoscopy, esophagoscopy, tongue biopsies, lymph node procedures, thyroidectomy/parathyroidectomy, parotidectomy, glossectomy, laryngectomy, skull base surgery (open and endoscopic endonasal)
- Sleep Surgery
- Sleep endoscopy, hyoid suspension, tongue base reduction, soft palate implant, hypoglossal nerve stimulator

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Break	9:45am – 10:00am
Surgical Procedure Coding (continued)	10:00am – 11:30am
Lunch (provided)	11:30am – 12:30pm
Surgical Procedure Coding (continued)	12:30pm – 1:45pm
Break	1:45pm – 2:00pm
Surgical Procedure Coding (continued)	2:00pm – 3:15pm
 Ancillary Services Audiology – Billing/supervision guidelines New in 2021: VEMP, auditory evoked potential (AEP) codes Allergy – Testing, immunotherapy including SLIT; billing supervision guidelines In-office CT – Global vs. professional and technical component coding, update on Medicare's Appropriate Use Criteria (AUC) program effective 1/1/22 	3:15pm – 4:00pm
Adjournment	4:00pm

^{*}Times are approximate