

BILLING / FEES / INSURANCE

## New Codes for 2008?

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Q: Are there new or updated diagnosis codes for 2008? Do I need to get a new diagnosis code book? Also, are there updates to CPT codes for 2008?

A: Every year, there are new and updated codes for the *International Classification of Diseases, Volume 9* text. For 2008, there are 591 new and/or updated codes. While that may appear to be earth-shattering and mark a need for the new edition, it is not what it appears to be. Unlike the 2007 *ICD-9* changes and additions to pain and compartment syndromes, the 2008 updates have virtually no impact on the acupuncture profession as there are no meaningful changes or updates to pain diagnoses.

The 2008 changes update muscular dystrophy and other myopathies, avian influenza, jaw necrosis, dysphagia, family history of heart disease and myocardial infarction, multiple endocrine neoplasm syndrome (MENS), other endocrine and metabolic diseases, dual sensory impairment, disability examinations, medical certificates, and exposure to harmful toxins and algae. It's not that you should be in the dark on these codes or not be up-to-date. It simply may not warrant a revamping of your diagnosis coding books.

There are many publications available for purchase from the AMA, the American Acupuncture Council and other medical book sellers that will have the 2008 updates, but you may also access, without cost, all current *ICD-9* codes at www.flashcode.com.

If you have a 2007 edition of *ICD-9*, my general recommendation is there is no need for a new purchase solely for the changes in 2008. But if you have a 2006 version, it is time to update because you missed the 2007 changes applicable to acupuncture.

Similar to diagnosis, there are no codes specific to acupuncture services that are affected in the 2008 edition. Specifically, acupuncture and physical medicine services have no changes. There are updates to medical conferences and phone calls, as well as language updates for modifiers. Telephone Calls (99371, 99372 and 99373) have been deleted in 2008 and are now coded as follows:

## **Telephone Services**

99441 Telephone evaluation and management service provided by a physician to an established patient, parent or guardian not originating from a related E/M service provided within the previous seven days nor leading to an E/M service within the next 24 hours or soonest available appointment; 5-10 minutes of medical discussion.

99442 11-20 minutes of medical discussion.

99443 21-30 minutes of medical discussion.

Team Conferences 99360 and 99361 have been deleted in 2008 and are now coded as follows:

99366 Medical Team Conference with interdisciplinary team of health care professionals, face-toface with patient and/or family, 30 minutes or more; participation by nonphysician, qualified health care professional.

Team conferences of less than 30 minutes not reported separately.

99367 Medical Team Conference with interdisciplinary team of health care professionals, patient and/or family not present, 30 minutes or more; participation by physician.

99368 participation by nonphysician, qualified health care professional

Team conferences of less than 30 minutes not reported separately.

Modifiers -25 and -59

The explanatory language of these modifiers was revised to remove the term physician in the opening sentence to avoid prohibiting designated individuals (as defined by payment programs) to use the modifier. For example: chiropractors, acupuncturists, physical therapists and occupational therapists.

Modifier -51

Language was revised so that usage of modifier-51 is not applicable to physical medicine and rehabilitation services. Therefore, it should not be needed for an acupuncture service.

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