

coding corner

new 2006 cpt/hcpcs codes

There are 482 new CPT/HCPCS codes for 2006 that you can begin using on January 1, 2006. We have revised 71 codes and deleted 396 codes. Here's a quick review of the CPT code changes:

▪ E/M	20 new codes, 20 deleted
▪ Anesthesia	2 new codes, 1 deleted
▪ Integumentary system	37 new codes, 8 deleted
▪ Musculoskeletal system	6 new codes, 2 deleted
▪ Respiratory system	2 new codes
▪ Cardiovascular system	20 new codes
▪ Digestive system	23 new codes
▪ Urinary system	7 new codes
▪ Male/female genital system	2 new codes
▪ Nervous system	7 new codes
▪ Eye and ocular adnexa	no new codes, 1 deleted
▪ Radiology	9 new codes, 6 deleted
▪ Path/lab	29 new codes, 7 deleted
▪ Medicine section	59 new codes, 38 deleted
▪ Category II codes (F codes)	no new or deleted codes
▪ Category III codes (T codes)	26 new codes, 11 deleted

New CPT/HCPCS codes are effective for claims received on or after January 1, 2006. The HIPAA Transaction and Code Set Rule requires the use of the medical code set that is valid at the time the service is provided. Therefore, **Fallon Community Health Plan can no longer allow a 90-day grace period for deleted CPT/HCPCS codes.**

All new codes will require a prior authorization until a final review is performed by FCHP. FCHP will review and assign the appropriate coverage categories and determine prior authorization requirements for all new codes. FCHP will notify all contracted providers of this determination through the upcoming March issue of *Connection* and on the FCHP Web site in the *Provider Manual*.