

## Cpt 99460 Components

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*CPT® Code 99460 in section: Newborn Care Services*

1. 99460-99461 initial service 2. Normal Newborn visit, day 2 3. Discharge normal newborn day 3 \_\_\_\_\_ 2. 99462 3. 99238-99239 \_\_\_\_\_ • 99463 • Normal Newborn evaluated & discharged same day 9 Normal Newborn Care • 99460 Initial hospital or birthing center care– normal newborn • 99461 Initial care other than hospital– normal newborn

*Pediatric Coding - AAPC*

The CPT®/CMS Rundown on Critical Care ... professional component (71010, 71015, 71020) Blood gases, and data stored in computers (e.g., electrocardiograms [ECGs], blood pressures, hematologic data – 99090) ... 99460-99462, 99477-99480) Services provided by another individual in another group receiving a patient transferred to a lower level ...

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Code 99460 normal newborn service, ICD V30.00 and 99477 with modifier -25, ICD 780.65 21 Initial Care Complex Coding Neonate fine after birth later becomes jaundiced ith bili bi f19 Neonate fine after birth later becomes lethargic w bilirubinof 19 ith i t h di One physician for both services 99460-25 & 99231-99233 with sinus tachycardia

*7H-Advanced Coding and Billing Techniques for Pediatrics ...*

Cpt 99460 Components - mta-sts.schoolofchaostour.com which requires at least 2 of these 3 key components: A detailed interval history; A detailed examination; Medical decision making of high complexity.

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Code 90460 is reported once for the first component of each vaccine or toxoid administered by any route. The reporting of code 90460 includes counseling for the first vaccine component. Code 90461 is additionally reported for the counseling associated with each additional component of any combination vaccine or toxoid. The + symbol next to code 90461 indicates that it is an add-on code, just ...

*Frequently Asked Questions for the Pediatric Immunization ...*

CPT codes when a single, more comprehensive code represents all services performed. The Health Plan administers automated prepayment claims edits to incorrectly billed code pairs. CMS organizes the code pairs into column 1/column 2 edits. The column 2 code represents the code that should not have been billed.

*CC.PP.031 - CMS Correct Coding Initiative Unbundling Edits*

The Current Procedural Terminology (CPT) code range for Evaluation and Management Services 99460-99463 is a medical code set maintained by the American Medical Association. CPT CODE 98960 AND 98961. 98962 - Medical Billing and Coding

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