



CPT Coding for Balance Assessment

It's important
to understand
CPT® 97750.

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CPT® Coding

There are only two recognized sources for CPT coding, and they are the American Medical Association CPT Professional book¹ and the American Medical Association CPT Assistant® Articles.² In contesting appropriate CPT coding, these are the only two admissible references. Unreferenced entries in chat rooms or blogs and results of online searches from non-AMA sources are not admissible references or evidence in cases where appropriate CPT coding is litigated. The guidance provided here relies on information provided only by the CPT Professional book¹ and CPT Assistant Newsletters.²

Page xv of the 2024 CPT Professional book¹ states:

“Select the CPT code of the procedure or service that accurately identifies the procedure or service performed. Do not select a CPT code that merely approximates the procedure or service provided.”

Therefore, to make coding recommendations, an exact description

of the service performed, without approximation, must be considered. It is the service performed that determines CPT code selection, not necessarily how the service was performed or what tool or platform was

analysis, the single limb stance test, the timed up-and-go test, and more. The questionnaire results and the results of the physical performance tests may be input into a software program that processes

Providers often ask if CPT® 97750 may be submitted when performing certain balance assessments. CPT® 97750 may be submitted only if all its requirements are met.

employed to help accomplish the service.

Balance Assessment Programs

Some balance assessment programs have patients complete a questionnaire about their fall history, medications, living environment, and more. Providers may choose to combine the responses to this questionnaire with performing certain physical performance tests and balance assessments. These may include standing balance, gait

these results and generates a suggested patient-specific intervention plan that is intended to mitigate any fall risk factors identified. The provider considers these suggestions in their efforts to manage fall risks that have been identified and implements strategies with the patient that help to decrease the risk of falls. If all of that is performed and properly documented, CPT 97750 may be submitted if its time threshold is met.

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Balance Assessment (from page 33)

There are multiple AMA references that support this direction:

AMA CPT Direction

Page 7 of the August 2013 CPT Assistant Newsletter² states CPT 97750 may be reported when physical performance tests and measures are performed. Examples of physical performance tests referenced above include standing balance, ambulation/gait analysis, the single limb stance test, the timed up-and-go test, and strength testing.

Page 7 of the August 2013 CPT Assistant Newsletter² lists examples of physical performance testing as “isokinetic testing for assessing the combination of strength, endurance and power while performing certain movements with the trunk or extremities, functional capacity testing, and specific test and measures related to balance such as the timed up-and-go test.” These examples mirror the type of physical performance tests associated with the balance assessment described above.

Page 9 of the May 2008 CPT Assistant Newsletter² states CPT 97750 should be submitted when a provider measures and tests “a patient’s physical performance during specific activities.” The balance assessment examples listed above include measuring and testing “a patient’s physical performance during specific activities.”

Page 870 of the 2024 CPT Professional book¹ states submission of CPT 97750 “requires direct one-on-one patient contact.” Performing the balance assessments listed above may be accomplished during “direct one-on-one patient contact.”

Documentation Requirements

Page 7 of the August 2013 CPT Assistant Newsletter² lists documentation elements that support the submission of CPT 97750, and these include:

- Documentation of the testing elements and/or protocols
- Documentation and interpretation of the data collected
- Documentation of the impact

on the patient’s plan of care

- Time spent in direct contact with the patient performing the service

Page 9 of the May 2008 CPT Assistant Newsletter² adds that the reason for performing the tests and analysis of the findings should also be documented.

Determination of Time

Page 7 of the August 2013 CPT Assistant Newsletter² states that CPT 97750 is a “time-based” code, as time determines the number of units reported. This AMA reference also explains that time spent performing the test or measurement

It also states this guideline may be excepted if there “are code or code-range-specific instructions in guidelines, parenthetical instructions, or code descriptors to the contrary.”

CPT 97750 does not have any “code-range-specific instructions in guidelines, parenthetical instructions, or code descriptors” that except the code from this “mid-point” CPT time guideline.

Referencing CPT 97010-97763, Page 863 of the 2024 CPT Professional book¹ states, “The work of the physician or other qualified health care professional consists of face-to-face time with the patient (and care-

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in addition to time spent analyzing and interpreting the results in the presence of the patient are accounted for when determining the total time spent providing the service and determining the number of units of the code submitted. It lists three time elements to be considered (copied and pasted):

- Total time spent with the patient in providing the test and measurement, including the time spent preparing the patient for the test and measurement procedure;
- The time spent performing the selected protocol; and
- The time spent with the patient in providing any post-testing instructions.

Clear direction is provided by the AMA CPT Editorial Panel regarding code selection as it relates to time-based codes, such as CPT 97750. Page xx of the 2024 CPT Professional book¹ states:

“A unit of time is attained when the mid-point is passed. For example, an hour is attained when 31 minutes have elapsed (more than midway between zero and 60 minutes).”

giver, if applicable) delivering skilled services.”

This mirrors the guidance on page xx of the 2024 CPT Professional book¹ which states: “Time is the face-to-face time with the patient.”

Considering this AMA guidance, the time threshold for submission of CPT 97750 is met after 8 minutes of face-to-face time are spent accomplishing the service. **PM**

References

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² CPT Assistant Online <https://ocm.ama-assn.org/OCM/CPTAA/Overview.do>



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