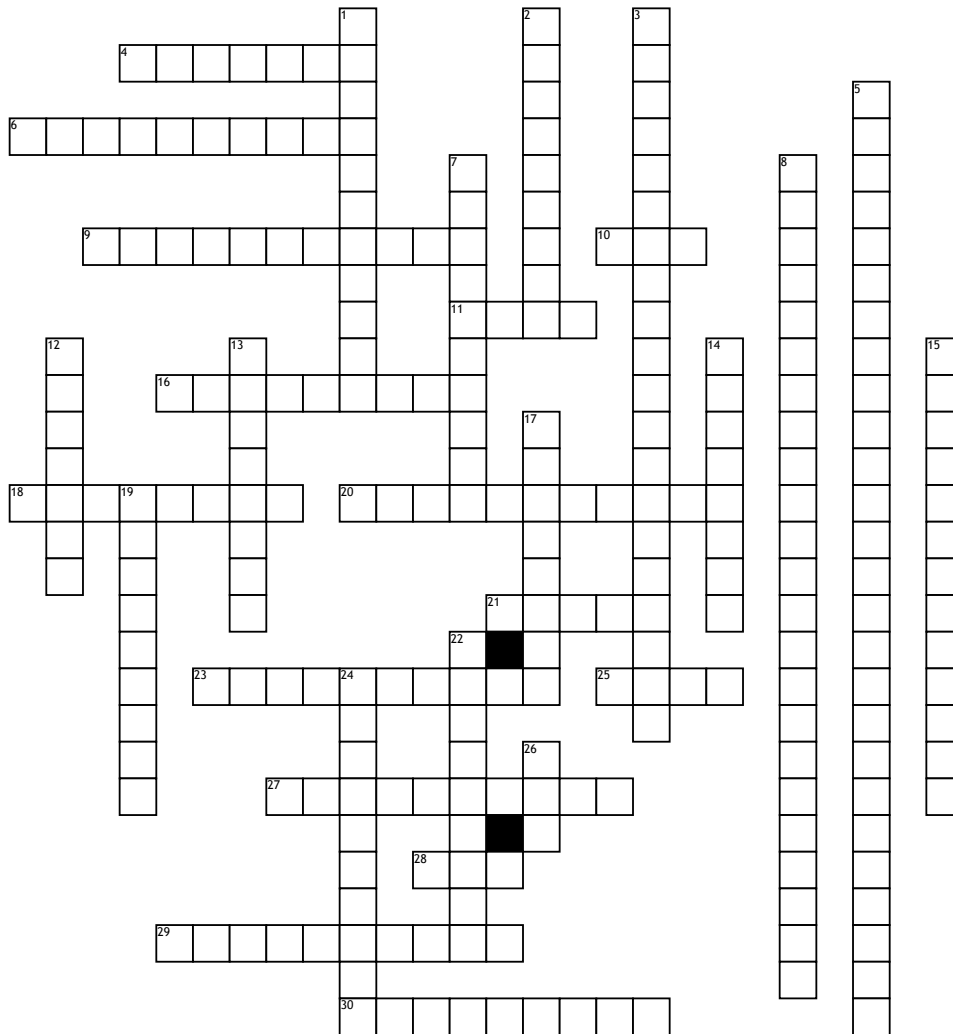


Basics: Sections in the CPT Manual



- Across**
4. In the inside front cover of the manual, there is a list of commonly used _____, and the most frequent ones are also defined at the bottom of the pages of the main sections of the CPT manual.
 6. What code range is (00100 - 01999)?
 9. POS 11 Mean?
 10. Place of Service also mean?
 11. The AMA updates the CPT manual every _____, making substantive changes.
 16. A list of additions and changes to the CPT manual.
 18. What is the name of the last section from the CPT manual that billers code from?
 20. The CPT manual is divided into _____.
 21. How many total sections are in the CPT manual?
 23. "D _____" occurs when a health insurer unilaterally reduces an E/M service level. The typical scenario occurs when a practice submits a claim for a patient visit based on a CPT code definition (for example, new patient visit code is coded lower than services provided)
- Down**
25. Are Evaluation and Management Codes from 99201 - 99499?
 27. POS 22 mean?
 28. How many sections does the medical biller actual code from?
 29. What do biller and coders read first before using the sections?
 30. What section are "7 series" CPT codes located in?
- Across**
1. 99213 is a new or established patient?
 2. A list of modifiers that are used with the codes in the first six sections. These two-character codes add information about who worked on a procedure.
 3. What section are "8 series" CPT codes located in?
 5. What does the acronym AMA mean?
 7. These alert coders to changes made by AMA to the CPT codes.
 8. What is the name of the First Section of the CPT manual?
 12. What is the largest section of the CPT manual?
- Down**
13. This is an alphabetical list of terms with codes or code ranges listed beside the term.
 14. -LT (Modifier)
 15. These are separate lists of information at the back of the manual that might aid the coder in correct code selection.
 17. "U _____" is a term that describes the improper use of a billing code for a medical procedure or diagnosis that results in a higher payment to the medical provider than that warranted by the true procedure or diagnosis.
 19. POS 21 mean?
 22. -RT
 24. This is another name for the six sections of the CPT Manual.
 26. 99202 is a new or established patient?

Word Bank

- | | | | |
|------------------------|---------------------------|------------------------------|-------------|
| Guidelines | Anesthesia | Appendix A | Six |
| Radiology | Evaluation and Management | Upcoding | CPT Tabular |
| Surgery | CPT Symbols | Established | Downcoding |
| CPT Appendices | Six sections | American Medical Association | Eight |
| Outpatient | Medicine | Left Side | POS |
| Pathology & Laboratory | Appendix B | Symbols | In patient |
| Year | Office Visit | Right Side | True |
| CPT Index | New | | |