

AAOE Webinar Series



Decoding the 2025 CPT Changes: Key Takeaways for Orthopedic Practices

Main Topic:

This executive summary outlines the key insights from the webinar *Decoding the 2025 CPT Changes*, presented by orthopedic coding experts Misty Smith and Anne-Marie Webb. The session focused on helping orthopedic practice administrators understand upcoming 2025 CPT code updates, their implications for clinical documentation, billing accuracy, and overall revenue cycle management.

Speakers:

Misty Smith, CPC, COSC, and Anne-Marie Webb, CPC, CPB, CPMA – Bluegrass Orthopedics

Key Takeaways:

Orthopedic-Specific CPT Code Updates for 2025

- Several changes to musculoskeletal CPT codes were previewed, including additions, deletions, and modifications to terminology that impact orthopedic procedures.
- For example, revisions to joint injection codes aim to better reflect current procedural techniques and align coding with clinical practice.

E/M Services and Time-Based Coding Clarifications

- Updates clarify prolonged service time thresholds and requirements for documentation.
- Misty emphasized that clear, time-based documentation will be essential, especially when visits rely on total time spent with the patient rather than medical decision-making.

Increased Scrutiny on Modifier Use

- Modifier 25 and 59 usage continues to be heavily audited; presenters warned practices to ensure proper documentation justifies each use.
- Anne-Marie illustrated a common mistake: appending Modifier 25 to an E/M service when the procedure performed was part of the exam, not separately identifiable.

Prepping for New Guidelines: Staff Education is Crucial

- Coders, providers, and billing teams must be trained on new definitions and requirements to prevent denials and ensure timely reimbursement.
- One practical tip: hold monthly coding review sessions and provide specialty-specific case examples to help teams apply the changes confidently.

Documentation Alignment with CPT Language

- Practices should proactively review common orthopedic documentation templates to ensure alignment with 2025 language.
- For instance, certain tendon repair descriptions will now require greater specificity regarding approach and technique.

Potential Payer Impacts and Audit Trends

- Payers may adopt 2025 CPT updates unevenly, leading to temporary discrepancies in claims processing.
- The speakers advised maintaining open communication with payers and tracking denials by code to identify early issues.

Concluding Advice

- Start transition planning early. Smith and Webb stressed that waiting until 2025 to address these changes will likely result in revenue loss or compliance risk.
- Recommended immediate actions: audit current coding practices, update training materials, and engage with vendors (like EHR and billing software providers) to ensure systems are updated for January 2025.

Conclusion:

This session serves as a timely roadmap for orthopedic practices preparing for the 2025 CPT code changes. Administrators are encouraged to use this guidance to begin planning staff training, workflow updates, and compliance reviews in advance of implementation.