

Therapists and other medical professionals may bill insurance for Aquaroll® patient treatments in conjunction with active range of motion exercises for hand / wrist and foot / ankle per the common physical medicine and rehabilitation CPT code 97110.

97110 – Therapeutic procedure, 1 or more areas, each 15 minutes; therapeutic exercises to develop strength and endurance, range of motion and flexibility

The average patient visit runs 23-30 minutes, including preparation and cleaning of the patient's extremity and cleaning of the Aquaroll® system.

Notice: The information contained in this document is provided for informational purposes only and represents no statement, promise, or guarantee by AM Rejuvenation, LLC concerning levels of reimbursement, payment, or charge, or that reimbursement will be made. It is not intended to increase or maximize reimbursement by any payer. Providers assume full responsibility for all reimbursement decisions or actions. The coding options listed in this guide are not intended to be all-inclusive or a recommendation for coding. As always, payer policies should be reviewed for coverage & coding guidelines. Aquaroll® is not a medical device, and cannot be billed as such. Current Procedural Terminology (CPT) is copyright 2014 American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use.



aquaroli[®]
USA

www.aquaroliUSA.com