

# CodeLink<sup>®</sup> Online

Advanced Medical Coding



# THE CALL FOR BETTER CODING

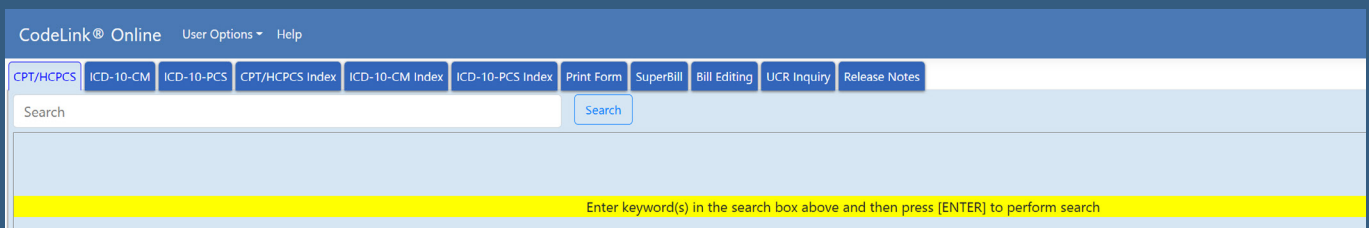
Improperly coded medical claims increase costs, decrease reimbursement and impact cash flow. Nearly 30% of all medical claims are improperly coded, incomplete or have technical errors. These challenges are compounded by a growing shortage of trained coders and billers. Most of the coding systems embedded in EHR software fall short on depth of function, perpetuating coding errors and increasing pending claims.

## THE CONTEXT SOLUTION: CODELINK® ONLINE

Developed with coders in mind, CodeLink Online advanced medical coding software generates CPT and ICD code data to expedite claim submission and minimize denials. CodeLink Online is the #1 preferred coding solution for medium to large coding organizations due to its intuitive user interface, licensing model, and easy cloud-based access. It is purposely organized to look and feel like familiar coding manuals yet provide advanced software features to speed up your job.

## FULLY CLOUD-BASED

All of the features of CodeLink Online are cloud-based. That means there is no installation needed on your system, and there are no updates that you have to manage. Your users simply access their user account, and they're productive.



The screenshot displays the CodeLink Online web application interface. At the top, there is a navigation bar with the text 'CodeLink® Online' and links for 'User Options' and 'Help'. Below this is a row of tabs for different coding systems: 'CPT/HCPCS', 'ICD-10-CM', 'ICD-10-PCS', 'CPT/HCPCS Index', 'ICD-10-CM Index', 'ICD-10-PCS Index', 'Print Form', 'SuperBill', 'Bill Editing', 'UCR Inquiry', and 'Release Notes'. The 'CPT/HCPCS' tab is currently selected. Below the tabs is a search bar with the placeholder text 'Search' and a 'Search' button. A yellow banner at the bottom of the search area contains the text: 'Enter keyword(s) in the search box above and then press [ENTER] to perform search'.

# POWERFUL CODE SEARCH

CodeLink Online allows users to perform fast and accurate CPT, HCPCS, ICD-10-CM, and ICD-10-PCS code searches by the code, a keyword, or a modifier. The users can assign custom keywords or frequently used codes to make access even quicker.

CPT/HCPCS	ICD-10-CM	ICD-10-PCS	CPT/HCPCS Index	ICD-10-CM Index	ICD-10-PCS Index	Print Form	Superbill	Bill Editing	UCR Inquiry	Release Notes
magnetic resonance				<input type="text" value="Search"/>	183 Codes Returned for 'magnetic resonance'					
Markers	Code	AMA Long Description								
	70547	Magnetic resonance angiography, neck; without contrast material(s)								
	70548	Magnetic resonance angiography, neck; with contrast material(s)								
	70549	Magnetic resonance angiography, neck; without contrast material(s), followed by contrast material(s) and further sequences								
	70550	Use 70551 (Magnetic resonance (eg, proton) imaging, brain)								
	70551	Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material								
	70552	Magnetic resonance (eg, proton) imaging, brain (including brain stem); with contrast material(s)								
	70553	Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material, followed by contrast material(s) and further sequences								
	70554	Magnetic resonance imaging, brain, functional MRI; including test selection and administration of repetitive body part movement and/or visual stimulation, not requiring physician or psychologist administration								
	70555	Magnetic resonance imaging, brain, functional MRI; requiring physician or psychologist administration of entire neurofunctional testing								

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# EXTENSIVE CODE INFORMATION

It's hard to code a bill properly without information. CodeLink Online provides the user with an array of reference information about the codes all in one screen.

At your fingertips, you'll see:

- Detailed descriptions of each code
- The complete AMA rules and notes
- Medicare rules and modifier information
- Medical necessity
- Full Medicare physicianfee schedule pricing
- Dental and Anesthesia crosswalks

Details	Rules	CMS/Mods	Fees	CCI	X-Walk
<input checked="" type="radio"/> CMS Modifiers <input type="radio"/> All Modifiers					
CMS Modifiers for code 70547					
	26	Professional Service			
	TC	Technical Service			
	50	Bilateral Surgery			
	51	Multiple Surgery			
	62	Co-Surgery			

Details	Rules	CMS/Mods	Fees	CCI	X-Walk
Coding Rules for 70547					
Subject Listings					
Subject listings apply when radiological services are performed by or under the responsible supervision of a physician or other qualified health care professional.					
Separate Procedures					
Some of the procedures or services listed in CPT that are commonly carried out as an integral component of a total service or procedure have been identified by the inclusion of the term "separate procedure." The codes designated as "separate procedure" should not be reported in addition to the code for the total procedure or service of which it is considered an integral component.					
However, when a procedure or service that is designated as a "separate procedure" is carried out independently or considered to be unrelated or distinct from other procedures/services provided at that time, it may be reported by itself, or in addition to other procedures/services by appending modifier -59 to the specific "separate procedure" code to indicate that the procedure is not considered to be a component of another procedure, but is a distinct, independent procedure. This may represent a different session or patient encounter, different procedure or surgery, different site or organ system, separate incision/excision, separate lesion, separate injury, or area of injury in extensive injuries.					

Details

Rules

CMS/Mods

Fees

CCI

X-Walk

Zip Code:

60540

Fee Quarter:

2025-Q1

State:

IL

Carrier:

06102

Locality:

15

Locality Name:

SUBURBAN CHICAGO

Medicare Physician Fee Schedule

Procedure is rarely or never performed in the facility setting or is not paid under the Physician Fee Schedule in the facility setting.

Non-Facility Fees

Code-Mod	Par.	Non-Par.	Limit.
70547-	\$222.78	\$211.64	\$243.39
70547-26	\$56.52	\$53.69	\$61.75
70547-TC	\$166.26	\$157.95	\$181.64

Facility Fees

Code-Mod	Par.	Non-Par.	Limit.
70547-	NA	NA	NA
70547-26	\$56.52	\$53.69	\$61.75
70547-TC	NA	NA	NA

The following are raw RVU values used in calculating above fees.

Show Calculations

Non-Facility RVU

Code-Mod	Total	Non-Fac.	Work	Mal-P
70547-	6.58	5.30	1.20	0.08
70547-26	1.69	0.44	1.20	0.05
70547-TC	4.89	4.86	0.00	0.03

# COMPREHENSIVE CODE INDEXES

CodeLink Online maintains a comprehensive set of indexes for each type of code.

This allows you to search for codes using both primary references for the code, or secondary preferences that will help you zero in on the right code for the service or diagnosis, and you still have access to the powerful keyword searches to ensure you have the right code.

CPT Index	Codes
Abbe-Estlander Procedure	
Abdomen	
(SEE also Abdominal)	
Abdominal Wall	
Debridement	
Infected	11005-11006
Facial Reinforcement	
with Implant	0437T
Implantation	
Non-biologic or Synthetic Implant	0437T
Removal	
Mesh	11008
Prosthesis	11008
Repair	
Hernia	
(See Hernia Repair)	
Tumor	
Excision	22900-22903
Radical Resection	22904-22905

# FAST, ACCURATE, BILL EDITING

To avoid claim denials, you have to send out claims that are accurate the first time. CodeLink Online allows you to do just that by leveraging some of Context's Payment Integrity

You'll be able to subject your bill to the following powerful edit rules:

- CCI and MUE for both Medicare and Medicaid
- Context's proprietary procedure/diagnosis crosswalk, which will alert you to when a coded procedure and diagnosis are typically incompatible
- Appropriate modifier usage
- Medical necessity
- LCD/NCD compliance check for local and national coverage guidelines
- Weekly updates to the SaaS rules! You're always in compliance when using the Bill Editing in CodeLink Online



# AUTOMATIC CODE INFORMATION DISPLAYS

CodeLink Online is filled with more than 20 visible symbols and icons that are automatically visible to you to put the codes you're looking at into context.

The symbol legend pops up when hovering over it, so there's no need to remember them all.

There are built-in notes, warnings and effective date information about all the codes which will automatically pop up to make sure you're fully informed about the codes you're thinking of using.

1 Codes Returned for 'o43.0'

**Pregnancy, childbirth and the puerperium (O00-O9A)**

**Note:** CODES FROM THIS CHAPTER ARE FOR USE ONLY ON MATERNAL RECORDS, NEVER ON NEWBORN RECORDS  
Codes from this chapter are for use for conditions related to or aggravated by the pregnancy, childbirth, or by the puerperium (maternal causes or obstetric causes).  
Trimesters are counted from the first day of the last menstrual period. They are defined as follows:  
1st trimester- less than 14 weeks 0 days  
2nd trimester- 14 weeks 0 days to less than 28 weeks 0 days  
3rd trimester- 28 weeks 0 days until delivery

**Use additional code, if applicable, from category Z3A, Weeks of gestation, to identify the specific week of the pregnancy, if known.**

**Excludes1:** supervision of normal pregnancy (Z34.-)

**Excludes2:** mental and behavioral disorders associated with the puerperium (F53.-)  
obstetrical tetanus (A34)  
postpartum necrosis of pituitary gland (E23.0)  
puerperal osteomalacia (M83.0)

**Maternal care related to the fetus and amniotic cavity and possible delivery problems (O30-O48)**

**O43 Placental disorders**

**Excludes2:** maternal care for poor fetal growth due to placental insufficiency (O36.5-)  
placenta previa (O44.-)  
placental polyp (O90.89)  
placentalitis (O41.14-)  
premature separation of placenta [abruptio placentae] (O45.-)

**Placental transfusion syndromes**

**maternal placental transfusion syndrome**  
fetofoetal placental transfusion syndrome  
Fetomaternal placental transfusion syndrome, first trimester  
Fetomaternal placental transfusion syndrome, second trimester  
Fetomaternal placental transfusion syndrome, third trimester  
Fetomaternal placental transfusion syndrome, unspecified trimester

**O43.013** Fetomaternal placental transfusion syndrome, third trimester  
**O43.019** Fetomaternal placental transfusion syndrome, unspecified trimester

## FULL FEATURED NOTE MANAGER

We know that accurate billing isn't just about picking the right codes. To make sure you get fast and accurate payment from the payer, you have to include as much information as possible about the interaction. That's where CodeLink Online's Note Manager comes in.

With the Note Manager, you can quickly add notes about any code to provide detail about the services. The notes can be shared with other CodeLink Online users within your organization. They can also be transferred to and from CodeLink Online through import and export features.

obstetrical tetanus (A34)

**O43.0 Placental transfusion syndromes**

Your Shared Notes (Public)

U B I

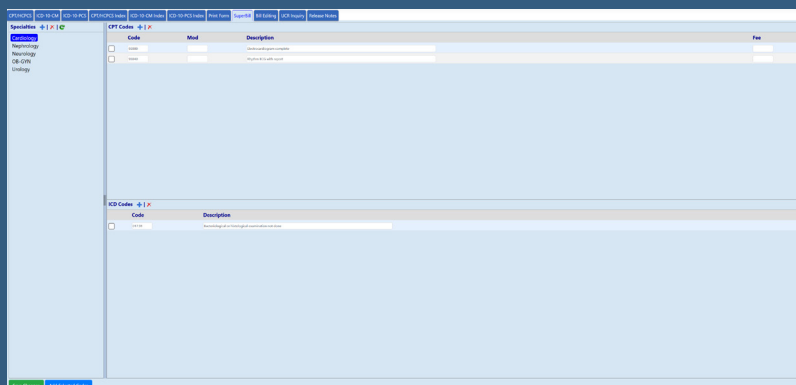
**Save Delete Close**

Shared Notes by Others (Read-Only)

# CREATE BILLS EASILY

CodeLink Online has convenient features that will allow you to easily and efficiently create bills or coding summaries. With a few clicks, you can save your frequently used coes either a SuperBill or bill Print Form.

This can be done by provider specialty so you can support multiple provider clients with prebuilt bills. When done, you can combine the codes and modifiers with the patient summary into a single document.



## YOU'RE ALWAYS UP TO DATE WITH CODELINK ONLINE

You can't ensure accurate coding and reduced denials if your coding software isn't up to date. CodeLink Online keeps you in compliance through regular updates:

- **Bill editing rules are updated weekly**  
This is necessary because of the frequent nature of changes to LCDs, NCDs, CCI edits, and other regulatory requirements. CodeLink Online links to these rules in the cloud, so there's no disruption to you or your staff for these frequent updates.
- **Code databases are updated quarterly**  
Any less than that, and you're out of compliance. The AMA and CMS update codes quarterly, so we make sure you've got them too


## UCR LOOKUP ABILITIES WITHIN CODELINK ONLINE

Our UCR Inquiry tool is an additional, optional feature that generates UCR pricing for Medical, Dental, and Anesthesia services. Enter a few pieces of data, such as procedure code, service date, and zip code, and the UCR pricing tool will return a fee for that service instantly.

CodeLink® Online

User Options ▾ Help

Linkage Library: Allergy ▾



CONTEXT  
HEALTHCARE

CPT/HCPCS

ICD-10-CM

ICD-10-PCS

CPT/HCPCS Index

ICD-10-CM Index

ICD-10-PCS Index

Print Form

SuperBill

Bill Editing

UCR Inquiry

Release Notes

Zip Code

Date of Service

Proc Code

Description

Modifier

UB Bill Type

60563

08/01/2025

99212

OFFICE C/P EST SF 10 MIN

Clear

DOS

Zip

Code

Description

Mod

Min

Type

50th

55th

60th

65th

70th

75th

80th

85th

90th

95th

08/01/2025

60563

99212

OFFICE C/P EST SF 10 MIN

MED

108.03

113.45

119.29

124.04

125.98

127.71

131.79

134.90

151.51

183.99

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