

## WALK TALL! The Message April-June 2008

### REDCORD

Every now and then, something dramatically new comes along to challenge our minds and bodies. For me,

### REDCORD

is that current new item just introduced into the United States last year. After having seen, used, and been trained in the use of the **REDCORD**, my prediction is that its use will soon sweep the US in both therapy and fitness venues.

Some of the highlights include:

Mostly closed-chain movement

Uses body weight for resistance

Principle of instability can be added

Adaptable to many populations from the physically frail and symptomatic therapy patient up to elite and Olympic athletes

Most exercises are safe for persons with osteoporosis

Appears to re-activate core and postural muscles “shut-down” by chronic pain and postural problems

After first seeing the unit and participating in a class, I immediately acquired the trainer model which now is installed in my living room turned exercise room. John and I use it regularly.

### REDCORD

adds another dimension to therapeutic exercise and fitness options. It complements traditional physical therapy as well as other exercise forms, is very affordable, and takes up little space.

Call us toll free 888-330-7272 for more information.



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**Redcord®**, a Norwegian company providing core stabilization devices and techniques, is revolutionizing the physical therapy field. Introduced 17 years ago in Scandinavia, Redcord is currently used in 22 countries and is rapidly establishing itself as *the premier core exercise and physical therapy tool*.

The Redcord suspension system consists of slings and ropes designed to leverage biomechanical and physiologic principles. The Redcord system emphasizes body awareness, proper posture, enhanced range of motion and functional strength development. Working with Redcord devices helps develop core strength that results in improved agility, balance and restoration of functional movement.

**Neurac®** training, along with the Redcord Workstation, helps therapists identify the *weak links* that cause inhibited muscle function. They can then focus on the appropriate muscles to help reestablish the neuromuscular connection pathways long since disconnected. Redcord often provides dramatic results with immediate increased range of motion and restored muscle use.

The Redcord system has undergone extensive testing at major universities and is embraced by leading scientists in the USA, Europe and Asia for its effectiveness and efficiency. Redcord has proven to be a valuable tool for the physical therapist in helping clients activate muscles and develop a stronger core. Please see [www.activcore.com](http://www.activcore.com) for more information about Redcord and Neurac® training for physical therapists.

### Re-Imbursement for Physical Therapy Management of Osteoporosis\*\*

#### ICD-9 CODES

724.2	Low Back Pain	719.4	Joint Stiffness
719.5	Joint Pain	719.7	Difficulty Walking
728.87	Muscle Weakness	733.0	Osteoporosis with vertebral wedging
781.2	Abnormal Gait	781.92	Abnormal Posture
799.3	Unspecified debility, Deconditioning		

#### TREATMENT CODES

97110 Therapeutic Exercise    97140 Manual Therapy    97112 Neuromuscular Re-education  
From Linda Looser, PT; Montana

As far as billing for the treatment of osteoporosis, PT's have to be familiar with their Local Coverage Determination for their state in order to determine what Medicare will pay for.

Coding for Manual Therapy 97140 for

724.1	Pain in Thoracic Spine
724.2	Lumbago
724.5	Backache unspecified

Coding for Therapeutic Procedure 97114 and Neuromuscular Re-education 97112 for

781.92    Abnormal Posture

For the Spinomed III, there is no reimbursement for ICD-9 code V53.7 for fitting and adjustment of orthopedic devices under CPT-4 code 97504; however they do pay under 97760 (this is not listed under LCD for MT but is reimbursed. The Spinomed III should be billed by the medical supply company with either ICD-9 code 737.1 (thoracic kyphosis) or 733.13 (compression fractures)

**\*\*PLEASE LOOK THE ABOVE INFORMATION OVER. I THINK, FROM WHAT PEOPLE HAVE SENT IN, THAT I HAVE IT ALL CORRECT. HOWEVER, PLEASE SEND ME ADDITIONS AND CORRECTIONS JUST TO BE SURE.**