

Know Your Own Numbers

The 2026 Medicare PT rule didn't land the way the headlines said. Here's how to run your CPT frequency report and read it in about 15 minutes.

+3.26%

First conversion factor increase in five years, for most practices.

~+175%

APTA's net read after code-level changes. A modest gain, not a cut.

Your mix

The real variable. Impact depends entirely on the codes you bill most.

DO THIS IN 15 MINUTES

Run your CPT frequency report

This works on any system, and your biller or billing company can pull it if you'd rather hand it off.

1

Pull the report

Find the report that shows how often each CPT code was billed. It goes by different names: "CPT Frequency," "Procedure Code Utilization," "Code Volume," or "Productivity by Code." Set the date range to the last full 12 months so seasonal swings even out.

2

Sort by volume

Put your highest-volume codes at the top. Your top 15 to 20 codes are where almost all your Medicare revenue lives. Those are the only ones worth your attention here.

3

Split timed vs. non-timed

CMS reduced the value of many non-time-based codes, while time-based codes billed in 15-minute units (like therapeutic exercise and manual therapy) were largely protected. Mark which of your top codes are timed and which aren't. A high-volume code that's non-timed is where your exposure sits.

4

Protect the timed codes you rely on

That protected value only holds if your documentation backs it up. Make sure your notes capture exact start and stop times for each timed service. Loose time documentation is the easiest way to give back money you're entitled to.

WHY IT MATTERS

Stop reacting to the headline

The "14% cut" framing was never the full story. For the first time in five years the conversion factor went up, and after the code changes settle out the net effect is a small increase for most practices, not a cliff.

But "modest on average" can still be a real number for **your** specific mix. Once you can see your top codes and which ones got devalued, you can put an actual dollar figure on the impact and make decisions on facts instead of a scary number on a screen.

Want a second set of eyes on your numbers?

Send your code report over and one of our experts will read it with you, free.

mike@snapscale.com
snapscale.com

Sources: APTA, "CMS Finalizes Fee Schedule Pay Bump for the First Time in Five Years" (Nov. 2025); CMS CY2026 Medicare Physician Fee Schedule Final Rule (published Oct. 31, 2025).

Informational only. Not billing, coding, or legal advice. Figures reflect APTA's analysis of the final rule; actual impact varies by geographic locality and code mix. Verify specifics against the final rule and with your billing team.