Department of LABOR AND INDUSTRIES

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PROVIDER BULLETIN

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THIS ISSUE

Policy Updates and Adoption of the New 2002 Billing Codes

TO:

All Providers
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Purpose

- This *Provider Bulletin* notifies providers and self-insurers of:
- The department's adoption of the new 2002 CPT®, ASA, and HCPCS billing codes.
- Updates and clarifications to coverage decisions and payment policies since July 2001.
- Corrections to the recently published *Ambulatory Surgery Center Fee Schedule*.

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I. Policy Updates and Changes

Fee Schedule Updates

Beginning this year the Department of Labor and Industries is moving annual rate updates for all providers to the state fiscal year start of July 1. This update schedule coincides with the existing rate update schedule for professional services. For hospitals this means that the rates for inpatient services effective January 1, 2001 will remain in effect until June 30, 2002. For ambulatory surgery centers this means that rates effective January 1, 2002 will remain in effect until June 30, 2003.

Fluoroscopy for Spinal Injections

The policy regarding spinal injections and the use of radiologic localization and guidance is currently under review. During the review process the policy adopted January 1, 2002 is in abeyance.

HIPPA Compliance

Although workers compensation is exempt from the provisions of the Health Insurance Portability and Accountability Act (HIPAA), the Department of Labor and Industries is working to become HIPPA compliant. The department will provide information in the future as its efforts towards this goal develop.

HCPCS "C" Codes

The HCPCS codes that begin with a "C" were developed by Medicare as temporary codes for its hospital outpatient prospective payment system (PPS). These "C" codes should only be used by hospitals for outpatient services. If other providers use these codes that line item will be denied. Medicare intends to continue to eliminate these codes with each update of their outpatient PPS, so hospitals should try to find existing HCPCS codes that accurately describe items they are billing.

II. Adoption of New 2002 Coding Changes Effective January 1, 2002

Acceptance and Coverage of New 2002 Billing Codes

On January 1, 2002 the department adopted the annual coding changes made by:

- The American Medical Association (AMA) in their revision of the Physician's Current Procedural Terminology (CPT®) coding system (HCPCS level I codes);
- The federal Centers for Medicare and Medicaid Services (CMS) in their revision of the Healthcare Common Procedure Coding System (HCPCS level II codes);
- The American Society of Anesthesiologists (ASA) in their revision of the American Society of Anesthesiologists Relative Value Guide (ASARVG).

Acceptance of these codes means that the department will recognize and accept the new codes on bills, and will no longer recognize and accept the deleted codes that are listed in the above publications after March 31, 2002. The new 2002 CPT, ASA, and HCPCS codes should be used to bill for services provided on or after January 1, 2002.

Coverage of the new codes is determined by the department on an individual code basis, and is subject to WAC 296-20-010 which states in part:

> "The adoption of these codes on an annual basis is designed to reduce the administrative burden on providers and lead to more accurate reporting of services. However, the inclusion of a service, product or supply within these new codes does not necessarily imply coverage,

reimbursement or endorsement, by the department or self-insurer. The department will make coverage and reimbursement decisions for these codes on an individual basis.

If there are any services, procedures or narrative text contained in the new HCPCS level I and II codes that conflict with the medical aid rules or fee schedules, the department's rules and policies take precedence."

Refer to Appendix A, B, C, and F at the end of this bulletin for a list of the new codes, anesthesia bases, fees, and payment indicators.

Please note: The codes listed in this update, in the Appendices, and in the *Medical Aid Rules and Fee Schedules* contain only partial CPT®, ASA, and HCPCS code descriptions. Providers are responsible for billing according to the complete code descriptions and narrative text printed in the new 2002 CPT®, ASA, and HCPCS books. Copies of these books may be purchased through various commercial publishers. CPT® books may also be purchased directly from the American Medical Association. Providers and self-insurers must refer to these books to determine the appropriate code(s) for billing and payment purposes.

Deleted Codes and Grace Period

Appendices D and E contain a list of deleted CPT® and HCPCS codes. Deleted ASA codes are listed in the next section. For dates of service up to and including March 31, 2002, the department will continue to accept bills containing those codes and modifiers that have been deleted as of January 1, 2002. Services billed with deleted codes and modifiers on or after date of service April 1, 2002 will be denied.

Changes to Anesthesia ASA Codes*

Anesthesia providers should use the anesthesia CPT® codes and descriptions when billing for most anesthesia services. The department also allows payment for two anesthesia nerve block codes published by The American Society of Anesthesiologists (ASA). If there are differences between the CPT® code and ASA code descriptions, providers should bill according to the CPT® code descriptions.

The 2001 ASA nerve block codes 01961 and 01962 have been deleted from the ASA Relative Value Guide. Codes 01961 and 01962 are now CPT® codes used for obsterical anesthesia services. ASA codes 02100 and 02101 have been added to the 2002 ASA Relative Value Guide to replace the deleted anesthesia nerve block codes. Following are the new ASA Codes and their descriptions.

Added ASA Code	ASA Code Description	Base Units	Deleted ASA Code
02100	Anesth, nerve block	3	01961
02101	Anesth, nerve block, prone	5	01962

*ASA codes and descriptions only are copyright 2002 American Society of Anesthesiologists.

Fee Schedule Information

Throughout the year corrections to the fee schedules can be found on the department's website at: www.lni.wa.gov (click on *Medical Provider Information*, click on *Provider Payment Information*, click on *Fee Schedules*, click on *Medical Aid Rules and Fee Schedules*, click *Accept* on the AMA Copyright Agreement page, click on *Errata and Replacement Pages*.)

III. Appendices

Note
Key for modifiers is in the Field Indicator Keys table on pages 223 – 227 of the July 1, 2001 *Medical Aid Rules and Fee Schedules* which can be found online at www.lni.wa.gov.

Appendix A – Added CPT® Codes
Appendix B - Added HCPCS Codes
Appendix C - Added Categroy III CPT® Codes
Appendix D – Deleted CPT® Codes
Appendix E - Deleted HCPCS Codes
Appendix F – ASC Fee Schedule Supplement

Appendix A: Added CPT® Codes

Effective 1-1-2002

		DOLLAR VALUE				MODIFIERS										
CODE	ABBREVIATED DESC	NON-FACILITY SETTING	FACILITY SETTING	ANES BASE	FOL UP	PRE OP (-56)	INTRA OP (-54)	POST OP (-55)	PCTC (26/TC)	MSI (-51)	BSI (-50)	ASI (-80)	CSI (-62)	TSI (-66)	ENDO BASE	FSI
00797	Anesth, surgery for obesity	Not Covered	Not Covered													X
00851	Anesth, tubal ligation	Not Covered	Not Covered													X
00869	Anesth, vasectomy			3												X
01905	Anes, spine inject, x-ray/repair			5												A
01924	Anes, ther interven rad, art			5												A
01925	Anes, ther interven rad, car			7												A
01926	Anes, tx interv rad hrt/cran			9												A
01930	Anes, ther interven rad, vein			5												A
01931	Anes, ther interven rad, tips			7												A
01932	Anes, tx interv rad, th vein			6												A
01933	Anes, tx interv rad, cran v			7												A
01960	Anesth, vaginal delivery			5												A
01961	Anesth, cs delivery			7												A
01962	Anesth, emer hysterectomy			8												A
01963	Anesth, cs hysterectomy			10												A
01964	Anesth, abortion procedures			4												A
01967	Anesth/analg, vag delivery			5												A
01968	Anes/analg cs deliver add-on			3												A
01969	Anesth/analg cs hyst add-on			5												A
10021	Fna w/o image	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	1	0	0	0	0	0		X
10021 26	Fna w/o image	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	1	0	0	0	0	0		X
10021 TC	Fna w/o image	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	1	0	0	0	0	0		X
10022	Fna w/image	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	1	0	0	0	0	0		X
10022 26	Fna w/image	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	1	0	0	0	0	0		X
10022 TC	Fna w/image	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	1	0	0	0	0	0		X
11981	Insert drug implant device	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	0	2	0	0	0	0		X
11982	Remove drug implant device	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	0	2	0	0	0	0		X
11983	Remove/insert drug implant	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	0	2	0	0	0	0		X
20526	Ther injection, carpal tunnel	$83.82	$63.98		0	0.0%	0.0%	0.0%	0	2	0	1	0	0		R
20551	Inject tendon origin/insert	$83.82	$63.98		0	0.0%	0.0%	0.0%	0	2	0	1	0	0		R

Appendix A: Added CPT® Codes

Effective 1-1-2002

		DOLLAR VALUE				MODIFIERS										
CODE	ABBREVIATED DESC	NON-FACILITY SETTING	FACILITY SETTING	ANES BASE	FOL UP	PRE OP (-56)	INTRA OP (-54)	POST OP (-55)	PCTC (26/TC)	MSI (-51)	BSI (-50)	ASI (-80)	CSI (-62)	TSI (-66)	ENDO BASE	FSI
20552	Inject trigger point, 1 or 2	$83.82	$63.98		0	0.0%	0.0%	0.0%	0	2	0	1	0	0		R
20553	Inject trigger points, >3	$83.82	$63.98		0	0.0%	0.0%	0.0%	0	2	0	1	0	0		R
24300	Manipulate elbow w/anesth	$477.65	$477.65		090	10.0%	69.0%	21.0%	0	2	0	1	0	0		R
24332	Tenolysis, triceps	$656.70	$656.70		090	10.0%	69.0%	21.0%	0	2	0	1	0	0		R
24343	Repr elbow lat ligmnt w/tiss	$867.01	$867.01		090	10.0%	69.0%	21.0%	0	2	1	2	1	0		R
24344	Reconstruct elbow lat ligmnt	$1,305.97	$1,305.97		090	10.0%	69.0%	21.0%	0	2	1	2	1	0		R
24345	Repr elbw med ligmnt w/tissu	$867.01	$867.01		090	10.0%	69.0%	21.0%	0	2	1	2	1	0		R
24346	Reconstruct elbow med ligmnt	$1,305.97	$1,305.97		090	10.0%	69.0%	21.0%	0	2	1	2	1	0		R
25001	Incise flexor carpi radialis	$398.29	$398.29		090	10.0%	69.0%	21.0%	0	2	1	1	0	0		R
25024	Decompress forearm 2 spaces	$921.07	$921.07		090	10.0%	69.0%	21.0%	0	2	1	1	0	0		R
25025	Decompress forearm 2 spaces	$1,488.00	$1,488.00		090	10.0%	69.0%	21.0%	0	2	1	0	0	0		R
25259	Manipulate wrist w/anesthes	$472.19	$472.19		090	10.0%	69.0%	21.0%	0	2	0	1	0	0		R
25275	Repair forearm tendon sheath	$836.75	$836.75		090	10.0%	69.0%	21.0%	0	2	0	0	1	0		R
25394	Repair carpal bone, shorten	$976.62	$976.62		090	10.0%	69.0%	21.0%	0	2	1	2	1	0		R
25430	Vasc graft into carpal bone	$867.01	$867.01		090	10.0%	69.0%	21.0%	0	2	0	1	0	0		R
25431	Repair nonunion carpal bone	$855.10	$855.10		090	10.0%	69.0%	21.0%	0	2	1	2	1	0		R
25651	Pin ulnar styloid fracture	$510.88	$510.88		090	10.0%	69.0%	21.0%	0	2	0	0	0	0		R
25652	Treat fracture ulnar styloid	$755.41	$755.41		090	10.0%	69.0%	21.0%	0	2	0	1	1	0		R
25671	Pin radioulnar dislocation	$624.46	$624.46		090	10.0%	69.0%	21.0%	0	2	0	1	0	0		R
26340	Manipulate finger w/anesth	$362.08	$362.08		090	10.0%	69.0%	21.0%	0	2	0	1	0	0		R
29086	Apply finger cast	$73.90	$58.03		0	0.0%	0.0%	0.0%	0	2	1	1	0	0		R
29805	Shoulder arthroscopy, dx	$482.61	$482.61		090	10.0%	69.0%	21.0%	0	2	1	1	1	0		R
29806	Shoulder arthroscopy/surgery	$1,349.12	$1,349.12		090	10.0%	69.0%	21.0%	0	3	1	1	1	0	29805	R
29807	Shoulder arthroscopy/surgery	$1,312.91	$1,312.91		090	10.0%	69.0%	21.0%	0	3	1	1	1	0	29805	R
29824	Shoulder arthroscopy/surgery	$823.86	$823.86		090	10.0%	69.0%	21.0%	0	3	0	2	1	0	29805	R
29900	Mcp joint arthroscopy, dx	$586.77	$586.77		090	10.0%	69.0%	21.0%	0	2	1	0	0	0		R
29901	Mcp joint arthroscopy, surg	$646.29	$646.29		090	10.0%	69.0%	21.0%	0	2	1	0	0	0		R
29902	Mcp joint arthroscopy, surg	$693.41	$693.41		090	10.0%	69.0%	21.0%	0	2	1	0	0	0		R
29999	Arthroscopy of joint	By Report	By Report		090	0.0%	0.0%	0.0%	0	2	1	0	1	0		N

Appendix A: Added CPT® Codes

Effective 1-1-2002

		DOLLAR VALUE				MODIFIERS										
CODE	ABBREVIATED DESC	NON-FACILITY SETTING	FACILITY SETTING	ANES BASE	FOL UP	PRE OP (-56)	INTRA OP (-54)	POST OP (-55)	PCTC (26/TC)	MSI (-51)	BSI (-50)	ASI (-80)	CSI (-62)	TSI (-66)	ENDO BASE	FSI
33967	Insert ia percut device	$349.18	$346.21		0	0.0%	0.0%	0.0%	0	2	0	0	0	0		R
33979	Insert intracorporeal device	By Report	By Report		0	0.0%	0.0%	0.0%	0	2	2	2	0	0		N
33980	Remove intracorporeal device	By Report	By Report		090	9.0%	84.0%	7.0%	0	2	2	2	0	0		N
35647	Artery bypass graft	$2,086.67	$2,086.67		090	9.0%	84.0%	7.0%	0	2	1	2	1	0		R
35685	Bypass graft patency/patch	$289.66	$289.66		0	0.0%	0.0%	0.0%	0	0	1	2	1	0		R
35686	Bypass graft/av fist patency	$239.57	$239.57		0	0.0%	0.0%	0.0%	0	0	1	2	1	0		R
36002	Pseudoaneurysm injection trt	$247.01	$150.78		0	0.0%	0.0%	0.0%	0	2	0	1	0	0		R
36820	Av fusion/forearm vein	$1,073.84	$1,073.84		090	9.0%	84.0%	7.0%	0	2	0	2	1	0		R
38220	Bone marrow aspiration	$286.69	$76.38		0	0.0%	0.0%	0.0%	0	2	0	0	0	0		R
38221	Bone marrow biopsy	$306.53	$96.72		0	0.0%	0.0%	0.0%	0	2	0	0	0	0		R
43313	Esophagoplasty congenital	Not Covered	Not Covered		090	9.0%	81.0%	10.0%	0	2	0	2	1	0		X
43314	Tracheo-esophagoplasty cong	Not Covered	Not Covered		090	9.0%	81.0%	10.0%	0	2	0	2	1	0		X
44126	Enterectomy w/taper, cong	Not Covered	Not Covered		090	9.0%	81.0%	10.0%	0	2	0	2	1	0		X
44127	Enterectomy w/o taper, cong	Not Covered	Not Covered		090	9.0%	81.0%	10.0%	0	2	0	2	1	0		X
44128	Enterectomy cong, add-on	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	0	0	0	2	1	0		X
44203	Lap resect s/intestine, addl	$315.46	$315.46		0	0.0%	0.0%	0.0%	0	0	0	2	1	0		R
44204	Laparo partial colectomy	$1,824.29	$1,824.29		090	9.0%	81.0%	10.0%	0	2	0	2	1	0		R
44205	Lap colectomy part w/ileum	$1,615.97	$1,615.97		090	9.0%	81.0%	10.0%	0	2	0	2	1	0		R
45136	Excise ileoanal reservoir	$2,056.91	$2,056.91		090	9.0%	81.0%	10.0%	0	2	0	2	1	0		R
46020	Placement of seton	$305.54	$268.83		010	10.0%	80.0%	10.0%	0	2	0	1	0	0		R
47370	Laparo ablate liver tumor rf	Not Covered	Not Covered		090	9.0%	81.0%	10.0%	0	2	0	2	1	0		X
47371	Laparo ablate liver cryosurg	Not Covered	Not Covered		090	9.0%	81.0%	10.0%	0	2	0	2	1	0		X
47380	Open ablate liver tumor rf	Not Covered	Not Covered		090	9.0%	81.0%	10.0%	0	2	0	2	1	0		X
47381	Open ablate liver tumor cryo	Not Covered	Not Covered		090	9.0%	81.0%	10.0%	0	2	0	2	1	0		X
47382	Percut ablate liver rf	Not Covered	Not Covered		010	10.0%	80.0%	10.0%	0	2	0	2	0	0		X
49491	Repair ing hern premie reduct	Not Covered	Not Covered		090	9.0%	81.0%	10.0%	0	2	1	2	1	0		X
49492	Rpr ing hern premie, blocked	Not Covered	Not Covered		090	9.0%	81.0%	10.0%	0	2	1	2	1	0		X
52001	Cystoscopy, removal of clots	$177.57	$177.57		0	0.0%	0.0%	0.0%	0	2	0	1	0	0		R
52347	Cystoscopy, resect ducts	$378.94	$378.94		0	0.0%	0.0%	0.0%	0	3	0	0	0	0	52351	R
53431	Reconstruct urethra/bladder	$1,421.04	$1,421.04		090	8.0%	83.0%	9.0%	0	2	0	2	1	0		R

Appendix A: Added CPT® Codes

Effective 1-1-2002

			DOLLAR VALUE				MODIFIERS										
CODE		ABBREVIATED DESC	NON-FACILITY SETTING	FACILITY SETTING	ANES BASE	FOL UP	PRE OP (-56)	INTRA OP (-54)	POST OP (-55)	PCTC (26/TC)	MSI (-51)	BSI (-50)	ASI (-80)	CSI (-62)	TSI (-66)	ENDO BASE	FSI
53444		Insert tandem cuff	$1,021.26	$1,021.26		090	8.0%	83.0%	9.0%	0	2	0	2	1	0		R
53446		Remove uro sphincter	$949.34	$949.34		090	8.0%	83.0%	9.0%	0	2	0	2	1	0		R
53448		Remov/replc ur sphinctr comp	$1,704.75	$1,704.75		090	8.0%	83.0%	9.0%	0	2	0	2	1	0		R
53853		Prostatic water thermother	$2,862.91	$345.22		090	8.0%	83.0%	9.0%	0	2	0	1	0	0		R
54162		Lysis penil circumcis lesion	Not Covered	Not Covered		010	10.0%	80.0%	10.0%	0	2	0	1	0	0		X
54163		Repair of circumcision	Not Covered	Not Covered		010	10.0%	80.0%	10.0%	0	2	0	1	0	0		X
54164		Frenulotomy of penis	Not Covered	Not Covered		010	10.0%	80.0%	10.0%	0	2	0	1	0	0		X
54406		Remove multi-comp penis pros	$929.50	$929.50		090	10.0%	80.0%	10.0%	0	2	0	2	1	0		R
54408		Repair multi-comp penis pros	$979.60	$979.60		090	10.0%	80.0%	10.0%	0	2	0	2	1	0		R
54410		Remove/replace penis prosth	$1,159.65	$1,159.65		090	10.0%	80.0%	10.0%	0	2	0	2	1	0		R
54411		Remv/replc penis pros, compl	$1,265.30	$1,265.30		090	10.0%	80.0%	10.0%	0	2	0	2	1	0		R
54415		Remove self-contd penis pros	$691.42	$691.42		090	10.0%	80.0%	10.0%	0	2	0	2	1	0		R
54416		Remv/repl penis contain pros	$902.22	$902.22		090	10.0%	80.0%	10.0%	0	2	0	2	1	0		R
54417		Remv/replc penis pros, compl	$1,112.53	$1,112.53		090	10.0%	80.0%	10.0%	0	2	0	2	1	0		R
57155		insert uteri tandems/ovoids	Not Covered	Not Covered		090	12.0%	74.0%	14.0%	0	2	0	1	0	0		X
58346		Insert Heyman uteri capsule	Not Covered	Not Covered		090	12.0%	74.0%	14.0%	0	2	0	1	0	0		X
58953		Tah, rad dissect for debulk	Not Covered	Not Covered		090	12.0%	74.0%	14.0%	0	2	2	2	1	0		X
58954		Tah rad debulk/lymph remove	Not Covered	Not Covered		090	12.0%	74.0%	14.0%	0	2	2	2	1	0		X
59001		Amniocentesis, therapeutic	$224.69	$224.69		0	0.0%	0.0%	0.0%	0	2	0	1	0	0		R
64561		Implant neuroelectrodes	Not Covered	Not Covered		010	10.0%	80.0%	10.0%	0	2	0	1	0	0		X
64581		Implant neuroelectrodes	Not Covered	Not Covered		090	11.0%	76.0%	13.0%	0	2	0	1	0	0		X
64821		Remove sympathetic nerves	$822.37	$822.37		090	11.0%	76.0%	13.0%	0	2	0	1	0	0		R
64822		Remove sympathetic nerves	$822.37	$822.37		090	11.0%	76.0%	13.0%	0	2	0	1	0	0		R
64823		Remove sympathetic nerves	$948.85	$948.85		090	11.0%	76.0%	13.0%	0	2	0	1	0	0		R
67225		Eye photodynamic ther add-on	$54.06	$51.58		0	0.0%	0.0%	0.0%	0	0	0	1	0	0		R
75952	26	Endovasc repair abdom aorta	$336.78	$336.78		0	0.0%	0.0%	0.0%	1	0	0	0	0	0		R
75952	TC	Endovasc repair abdom aorta	By Report	By Report		0	0.0%	0.0%	0.0%	1	0	0	0	0	0		N
75953	26	Abdom aneurysm endovas rpr	$119.54	$119.54		0	0.0%	0.0%	0.0%	1	0	0	0	0	0		R
75953	TC	Abdom aneurysm endovas rpr	By Report	By Report		0	0.0%	0.0%	0.0%	1	0	0	0	0	0		N

Appendix A: Added CPT® Codes

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			DOLLAR VALUE				MODIFIERS										
CODE		ABBREVIATED DESC	NON-FACILITY SETTING	FACILITY SETTING	ANES BASE	FOL UP	PRE OP (-56)	INTRA OP (-54)	POST OP (-55)	PCTC (26/TC)	MSI (-51)	BSI (-50)	ASI (-80)	CSI (-62)	TSI (-66)	ENDO BASE	FSI
76012	26	Percut vertebroplasty fluor	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	1	0	0	0	0	0		X
76012	TC	Percut vertebroplasty fluor	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	1	0	0	0	0	0		X
76013	26	Percut vertebroplasty, ct	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	1	0	0	0	0	0		X
76013	TC	Percut vertebroplasty, ct	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	1	0	0	0	0	0		X
76085		Computer mammogram add-on	$24.30	$24.30		0	0.0%	0.0%	0.0%	1	0	0	0	0	0		R
76085	26	Computer mammogram add-on	$4.46	$4.46		0	0.0%	0.0%	0.0%	1	0	0	0	0	0		R
76085	TC	Computer mammogram add-on	$19.84	$19.84		0	0.0%	0.0%	0.0%	1	0	0	0	0	0		R
76362		CAT scan for tissue ablation	$711.76	$711.76		0	0.0%	0.0%	0.0%	1	0	0	0	0	0		R
76362	26	CAT scan for tissue ablation	$272.80	$272.80		0	0.0%	0.0%	0.0%	1	0	0	0	0	0		R
76362	TC	CAT scan for tissue ablation	$438.96	$438.96		0	0.0%	0.0%	0.0%	1	0	0	0	0	0		R
76394		MRI for tissue ablation	$870.98	$870.98		0	0.0%	0.0%	0.0%	1	0	0	0	0	0		R
76394	26	MRI for tissue ablation	$288.67	$288.67		0	0.0%	0.0%	0.0%	1	0	0	0	0	0		R
76394	TC	MRI for tissue ablation	$582.30	$582.30		0	0.0%	0.0%	0.0%	1	0	0	0	0	0		R
76490		US for tissue ablation	$218.74	$218.74		0	0.0%	0.0%	0.0%	1	0	0	0	0	0		R
76490	26	US for tissue ablation	$137.39	$137.39		0	0.0%	0.0%	0.0%	1	0	0	0	0	0		R
76490	TC	US for tissue ablation	$81.34	$81.34		0	0.0%	0.0%	0.0%	1	0	0	0	0	0		R
77301		Radiotherapy dose plan, imrt	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	1	0	0	0	0	0		X
77301	26	Radiotherapy dose plan, imrt	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	1	0	0	0	0	0		X
77301	TC	Radiotherapy dose plan, imrt	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	1	0	0	0	0	0		X
77418		Radiation tx delivery, imrt	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	3	0	0	0	0	0		X
82274		Assay test for blood, fecal	By Report	By Report		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		N
83950		Oncoprotein, HER-2/NEU	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
86141		C-reactive protein, HS	$25.05	$25.05		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		L
86336		Inhibin A	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
87198		Cytomegalovirus antibody DFA	$23.21	$23.21		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		L
87199		Enterovirus antibody, DFA	$23.21	$23.21		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		L
87802		Strep B assay w/optic	$23.21	$23.21		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		L

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			DOLLAR VALUE				MODIFIERS										
			NON-FACILITY	FACILITY	ANES	FOL	PRE OP	INTRA OP	POST OP	PCTC	MSI	BSI	ASI	CSI	TSI	ENDO	FSI
CODE		ABBREVIATED DESC	SETTING	SETTING	BASE	UP	(-56)	(-54)	(-55)	(26/TC)	(-51)	(-50)	(-80)	(-62)	(-66)	BASE	
87803		Clostridium toxin A w/optic	$23.21	$23.21		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		L
87804		Influenza assay w/optic	$23.21	$23.21		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		L
87902		Genotype, DNA, hepatitis C	$498.09	$498.09		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		L
88380		Microdissection	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	1	0	0	0	0	0		X
88380	26	Microdissection	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	1	0	0	0	0	0		X
88380	TC	Microdissection	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	1	0	0	0	0	0		X
90939		Hemodialysis study, trancut	By Report	By Report		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		N
91123		Irrigate fecal impaction	Bundled	Bundled		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		B
92136		Ophthalmic biometry	$105.15	$105.15		0	0.0%	0.0%	0.0%	1	0	2	0	0	0		R
92136	26	Ophthalmic biometry	$37.70	$37.70		0	0.0%	0.0%	0.0%	1	0	2	0	0	0		R
92136	TC	Ophthalmic biometry	$67.46	$67.46		0	0.0%	0.0%	0.0%	1	0	2	0	0	0		R
92973		Percut coronary thrombctomy	$236.10	$236.10		0	0.0%	0.0%	0.0%	0	0	0	0	0	0		R
92974		Cath place, cardio brachytx	$254.94	$254.94		0	0.0%	0.0%	0.0%	0	0	0	0	0	0		R
93025		Microvolt t-wave assess	$363.07	$363.07		0	0.0%	0.0%	0.0%	4	0	0	0	0	0		R
93613		Electrophys map, 3d, add-on	By Report	By Report		0	0.0%	0.0%	0.0%	1	0	0	0	0	0		N
93613	26	Electrophys map, 3d, add-on	$502.94	$502.94		0	0.0%	0.0%	0.0%	1	0	0	0	0	0		R
93613	TC	Electrophys map, 3d, add-on	By Report	By Report		0	0.0%	0.0%	0.0%	1	0	0	0	0	0		N
93701		Bioimpedance, thoracic	$48.11	$48.11		0	0.0%	0.0%	0.0%	1	0	0	0	0	0		R
93701	26	Bioimpedance, thoracic	$12.40	$12.40		0	0.0%	0.0%	0.0%	1	0	0	0	0	0		R
93701	TC	Bioimpedance, thoracic	$36.21	$36.21		0	0.0%	0.0%	0.0%	1	0	0	0	0	0		R
95250		Glucose monitoring, cont	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	3	0	0	0	0	0		X
95965		Meg, spontaneous	By Report	By Report		0	0.0%	0.0%	0.0%	1	0	0	0	0	0		N
95965	26	Meg, spontaneous	$559.98	$559.98		0	0.0%	0.0%	0.0%	1	0	0	0	0	0		R
95965	TC	Meg, spontaneous	By Report	By Report		0	0.0%	0.0%	0.0%	1	0	0	0	0	0		N
95966		Meg, evoked, single	By Report	By Report		0	0.0%	0.0%	0.0%	1	0	0	0	0	0		N
95966	26	Meg, evoked, single	$283.22	$283.22		0	0.0%	0.0%	0.0%	1	0	0	0	0	0		R
95966	TC	Meg, evoked, single	By Report	By Report		0	0.0%	0.0%	0.0%	1	0	0	0	0	0		N
95967		Meg, evoked, each addl	By Report	By Report		0	0.0%	0.0%	0.0%	1	0	0	0	0	0		N
95967	26	Meg, evoked, each addl	$248.50	$248.50		0	0.0%	0.0%	0.0%	1	0	0	0	0	0		R
95967	TC	Meg, evoked, each addl	By Report	By Report		0	0.0%	0.0%	0.0%	1	0	0	0	0	0		N

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		DOLLAR VALUE				MODIFIERS										
CODE	ABBREVIATED DESC	NON-FACILITY SETTING	FACILITY SETTING	ANES BASE	FOL UP	PRE OP (-56)	INTRA OP (-54)	POST OP (-55)	PCTC (26/TC)	MSI (-51)	BSI (-50)	ASI (-80)	CSI (-62)	TSI (-66)	ENDO BASE	FSI
96000	Motion analysis, video/3d	$124.99	$124.99		0	0.0%	0.0%	0.0%	0	0	0	0	0	0		R
96001	Motion test w/ft press meas	$149.30	$149.30		0	0.0%	0.0%	0.0%	0	0	0	0	0	0		R
96002	Dynamic surface emg	$28.77	$28.77		0	0.0%	0.0%	0.0%	0	0	0	0	0	0		R
96003	Dynamic fine wire emg	$26.78	$26.78		0	0.0%	0.0%	0.0%	0	0	0	0	0	0		R
96004	Phys review of motion tests	$127.47	$127.47		0	0.0%	0.0%	0.0%	2	0	0	0	0	0		R
96150	Assess hlth/behave, init	$35.71	$35.22		0	0.0%	0.0%	0.0%	0	0	0	0	0	0		R
96151	Assess hlth/behave, subseq	$34.72	$33.73		0	0.0%	0.0%	0.0%	0	0	0	0	0	0		R
96152	Intervene hlth/behave, indiv	$33.23	$32.24		0	0.0%	0.0%	0.0%	0	0	0	0	0	0		R
96153	Intervene hlth/behave, group	$7.44	$7.44		0	0.0%	0.0%	0.0%	0	0	0	0	0	0		R
96154	Interv hlth/behav, fam w/pt	$32.24	$31.74		0	0.0%	0.0%	0.0%	0	0	0	0	0	0		R
96155	Interv hlth/behav fam no pt	$31.25	$31.25		0	0.0%	0.0%	0.0%	0	0	0	0	0	0		R
96567	Photodynamic tx, skin	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	3	0	0	0	0	0		X
97005	Athletic train eval	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
97006	Athletic train reeval	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
99091	Collect/review data from pt	Bundled	Bundled		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		B
99289	Pt transport, 30-74 min	By Report	By Report		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		N
99290	Pt transport, addl 30 min	By Report	By Report		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		N
99500	Home visit, prenatal	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
99501	Home visit, postnatal	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
99502	Home visit, nb care	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
99503	Home visit, resp therapy	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
99504	Home visit mech ventilator	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
99505	Home visit, stoma care	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
99506	Home visit, IM injection	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
99507	Home visit, cath maintain	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
99508	Home visit, sleep studies	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
99509	Home visit day life activity	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
99510	Home visit, sing/m/fam couns	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
99511	Home visit, fecal/enema mgmt	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
99512	Home visit, hemodialysis	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X

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		DOLLAR VALUE				MODIFIERS										
CODE	ABBREVIATED DESC	NON-FACILITY SETTING	FACILITY SETTING	ANES BASE	FOL UP	PRE OP (-56)	INTRA OP (-54)	POST OP (-55)	PCTC (26/TC)	MSI (-51)	BSI (-50)	ASI (-80)	CSI (-62)	TSI (-66)	ENDO BASE	FSI
99539	Home visit, NOS	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
99551	Home infus, pain mgmt, IV/SC	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
99552	Hm infus pain mgmt, epid/ith	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
99553	Home infuse, tocolytic tx	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
99554	Home infus, hormone/platelet	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
99555	Home infuse, chemotherapy	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
99556	Home infus, antibio/fung/vir	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
99557	Home infuse, anticoagulant	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
99558	Home infuse, immunotherapy	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
99559	Home infus, periton dialysis	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
99560	Home infus, entero nutrition	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
99561	Home infuse, hydration tx	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
99562	Home infus, parent nutrition	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
99563	Home admin, pentamidine	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
99564	Hme infus, antihemophil agnt	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
99565	Home infus, proteinase inhib	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
99566	Home infuse, IV therapy	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
99567	Home infuse, sympath agent	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
99568	Home infus, misc drug, daily	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
99569	Home infuse, each addl tx	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X

Appendix B: Added HCPCS Codes

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CODE	ABBREVIATED DESC	DOLLAR VALUE NON-FACILITY SETTING	DOLLAR VALUE FACILITY SETTING	ANES BASE	FOL UP	MODIFIERS PRE OP (-56)	INTRA OP (-54)	POST OP (-55)	PCTC (26/TC)	MSI (-51)	BSI (-50)	ASI (-80)	CSI (-62)	TSI (-66)	ENDO BASE	FSI
A4257	Replace Lensshield Cartridge	Bundled	Bundled		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		B
A4360	Adult incontinence garment	Bundled	Bundled		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		B
A4651	Calibrated microcap tube	By Report	By Report		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		N
A4652	Microcapillary tube sealant	By Report	By Report		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		N
A4656	Dialysis needle	By Report	By Report		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		N
A4657	Dialysis syringe w/wo needle	By Report	By Report		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		N
A4706	Bicarbonate conc sol per gal	By Report	By Report		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		N
A4707	Bicarbonate conc pow per pac	By Report	By Report		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		N
A4708	Acetate conc sol per gallon	By Report	By Report		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		N
A4709	Acid conc sol per gallon	By Report	By Report		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		N
A4719	”Y set” tubing	By Report	By Report		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		N
A4720	Dialysat sol fld vol > 249cc	By Report	By Report		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		N
A4721	Dialysat sol fld vol > 999cc	By Report	By Report		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		N
A4722	Dialys sol fld vol > 1999cc	By Report	By Report		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		N
A4723	Dialys sol fld vol > 2999cc	By Report	By Report		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		N
A4724	Dialys sol fld vol > 3999cc	By Report	By Report		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		N
A4725	Dialys sol fld vol > 4999cc	By Report	By Report		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		N
A4726	Dialys sol fld vol > 5999cc	By Report	By Report		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		N
A4736	Topical anesthetic, per gram	By Report	By Report		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		N
A4737	Inj anesthetic per 10 ml	By Report	By Report		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		N
A4766	Dialysate conc sol add 10 ml	By Report	By Report		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		N
A4801	Heparin per 1000 units	By Report	By Report		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		N
A4802	Protamine sulfate per 50 mg	By Report	By Report		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		N
A4911	Drain bag/bottle	By Report	By Report		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		N
A4928	Surgical mask	By Report	By Report		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		N
A4929	Tourniquet for dialysis, ea	By Report	By Report		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		N
A5509	Direct heat form shoe insert	By Report	By Report		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		N
A5510	Compression form shoe insert	By Report	By Report		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		N
A5511	Custom fab molded shoe inser	By Report	By Report		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		N
A6000	Wound warming wound cover	By Report	By Report		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		N
A6010	Collagen based wound filler	Bundled	Bundled		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		B

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		DOLLAR VALUE				MODIFIERS										
CODE	ABBREVIATED DESC	NON-FACILITY SETTING	FACILITY SETTING	ANES BASE	FOL UP	PRE OP (-56)	INTRA OP (-54)	POST OP (-55)	PCTC (26/TC)	MSI (-51)	BSI (-50)	ASI (-80)	CSI (-62)	TSI (-66)	ENDO BASE	FSI
A9511	Technetium TC 99m depreotide	By Report	By Report		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		N
B4086	Gastrostomy/jejunostomy tube	By Report	By Report													N
E0169	Seatlift incorp commodechair	By Report	By Report													N
E0221	Infrared heating pad system	Not Covered	Not Covered													X
E0231	Wound warming device	By Report	By Report													N
E0232	Warming card for NWT	By Report	By Report													N
E0316	Bed safety enclosure	By Report	By Report													N
E0481	Intrpulmnry percuss vent sys	By Report	By Report													N
E0482	Cough stimulating device	By Report	By Report													N
E0603	Electric breast pump	Not Covered	Not Covered													X
E0604	Hosp grade elec breast pump	Not Covered	Not Covered													X
E0620	Cap bld skin piercing laser	By Report	By Report													N
E0752	Neurostimulator electrode	Not Covered	Not Covered													X
E0754	Pulsegenerator pt programmer	Not Covered	Not Covered													X
E0759	Replace rdfrquncy transmittr	By Report	By Report													N
E1500	Centrifuge	By Report	By Report													N
E1637	Hemostats for dialysis, each	By Report	By Report													N
E1638	Peri dialysis heating pad	By Report	By Report													N
E1639	Dialysis scale	By Report	By Report													N
E1801	SPS elbow device	By Report	By Report													N
E1806	SPS wrist device	By Report	By Report													N
E1811	SPS knee device	By Report	By Report													N
E1816	SPS ankle device	By Report	By Report													N
E1818	SPS forearm device	By Report	By Report													N
E1821	Replacement interface SPSD	By Report	By Report													N
E1840	Adj shoulder ext/flex device	By Report	By Report													N
E1902	AAC non-electronic board	By Report	By Report													N
E2000	Gastric suction pump hme mdl	By Report	By Report													N
E2100	Bld glucose monitor w voice	By Report	By Report													N
E2101	Bld glucose monitor w lance	By Report	By Report													N
G0117	Glaucoma scrn hgh risk direc	Bundled	Bundled		0	0.0%	0.0%	0.0%	0	0	0	0	0	0		B

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CODE		ABBREVIATED DESC	DOLLAR VALUE NON-FACILITY SETTING	DOLLAR VALUE FACILITY SETTING	ANES BASE	FOL UP	MODIFIERS PRE OP (-56)	INTRA OP (-54)	POST OP (-55)	PCTC (26/TC)	MSI (-51)	BSI (-50)	ASI (-80)	CSI (-62)	TSI (-66)	ENDO BASE	FSI
G0118		Glaucoma scrn hgh risk direc	Bundled	Bundled		0	0.0%	0.0%	0.0%	0	0	0	0	0	0		B
G0231		PET WhBD colorec; gamma cam	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	1	0	0	0	0	0		X
G0231	26	PET WhBD colorec; gamma cam	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	1	0	0	0	0	0		X
G0231	TC	PET WhBD colorec; gamma cam	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	1	0	0	0	0	0		X
G0232		PET WhBD lymphoma; gamma cam	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	1	0	0	0	0	0		X
G0232	26	PET WhBD lymphoma; gamma cam	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	1	0	0	0	0	0		X
G0232	TC	PET WhBD lymphoma; gamma cam	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	1	0	0	0	0	0		X
G0233		PET WhBD melanoma; gamma cam	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	1	0	0	0	0	0		X
G0233	26	PET WhBD melanoma; gamma cam	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	1	0	0	0	0	0		X
G0233	TC	PET WhBD melanoma; gamma cam	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	1	0	0	0	0	0		X
G0234		PET WhBD pulm nod; gamma cam	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	1	0	0	0	0	0		X
G0234	26	PET WhBD pulm nod; gamma cam	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	1	0	0	0	0	0		X
G0234	TC	PET WhBD pulm nod; gamma cam	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	1	0	0	0	0	0		X
G0236		digital film convert diag ma	$24.30	$24.30		0	0.0%	0.0%	0.0%	1	0	0	0	0	0		R
G0236	26	digital film convert diag ma	$4.46	$4.46		0	0.0%	0.0%	0.0%	1	0	0	0	0	0		R
G0236	TC	digital film convert diag ma	$19.84	$19.84		0	0.0%	0.0%	0.0%	1	0	0	0	0	0		R
G0237		Therapeutic procd strg endur	$23.31	$23.31		0	0.0%	0.0%	0.0%	0	0	0	0	0	0		R
G0238		Oth resp proc, indiv	By Report	By Report		0	0.0%	0.0%	0.0%	0	0	0	0	0	0		N
G0239		Oth resp proc, group	By Report	By Report		0	0.0%	0.0%	0.0%	0	0	0	0	0	0		N
G0240		Critic care by MD transport	$281.73	$281.73		0	0.0%	0.0%	0.0%	0	0	0	0	0	0		R
G0241		Each additional 30 minutes	$140.86	$140.86		0	0.0%	0.0%	0.0%	0	0	0	0	0	0		R
G0242		Multisource photon ster plan	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
G0243		Multisour photon stero treat	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
G0244		Observ care by facility topt	By Report	By Report		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		N
G9009		MCCD, risk adj, level 3	By Report	By Report		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		N
G9010		MCCD, risk adj, level 4	By Report	By Report		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		N
G9011		MCCD, risk adj, level 5	By Report	By Report		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		N
G9012		Other Specified Case Mgmt	By Report	By Report		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		N
H1000		Prenatal care atrisk assessm	By Report	By Report		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		N
H1001		Antepartum management	By Report	By Report		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		N
H1002		Carecoordination prenatal	By Report	By Report		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		N

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CODE	ABBREVIATED DESC	DOLLAR VALUE NON-FACILITY SETTING	DOLLAR VALUE FACILITY SETTING	ANES BASE	FOL UP	MODIFIERS PRE OP (-56)	INTRA OP (-54)	POST OP (-55)	PCTC (26/TC)	MSI (-51)	BSI (-50)	ASI (-80)	CSI (-62)	TSI (-66)	ENDO BASE	FSI
H1003	Prenatal at risk education	By Report	By Report		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		N
H1004	Follow up home visit/prental	By Report	By Report		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		N
H1005	Prenatalcare enhanced srv pk	By Report	By Report		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		N
J0587	Botulinum toxin type B	$9.00	$9.00		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		D
J0692	Cefepime HCl for injection	$8.00	$8.00		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		D
J0706	Caffeine citrate injection	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
J0744	Ciprofloxacin iv	$14.40	$14.40		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		D
J1056	MA/EC contraceptiveinjection	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
J1270	Injection, doxercalciferol	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
J1590	Gatifloxacin injection	$11.81	$11.81		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		D
J1655	Tinzaparin sodium injection	$8.40	$8.40		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		D
J1755	Iron sucrose injection	$13.76	$13.76		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		D
J1835	Intraconazole injection	$36.97	$36.97		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		D
J2020	Linezolid injection	$38.11	$38.11		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		D
J2940	Somatrem injection	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
J2941	Somatropin injection	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
J3100	Tenecteplase injection	$2,750.00	$2,750.00		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		D
J3395	Verteporfin injection	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
J7193	Factor IX non-recombinant	$1.11	$1.11		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		D
J7195	Factor IX recombinant	$1.18	$1.18		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		D
J7302	Levonorgestrel iu contracept	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
J7308	Aminolevulinic acid hcl top	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
J7316	Sodium hyaluronate injection	$36.00	$36.00		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		D
J7340	Metabolic active D/E tissue	By Report	By Report		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		N
J7511	Antithymocyte globuln rabbit	$265.00	$265.00		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		D
J7622	Beclomethasome inhalatn sol	By Report	By Report		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		N
J7624	Betamethasome inhalation sol	By Report	By Report		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		N
J7626	Budesonide inhalation sol	$4.20	$4.20		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		D
J7641	Flunisolide, inhalation sol	By Report	By Report		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		N
J9017	Arsenic trioxide	$27.51	$27.51		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		D
J9300	Gemtuzumab ozogamicin	$2,031.25	$2,031.25		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		D

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		DOLLAR VALUE				MODIFIERS										
CODE	ABBREVIATED DESC	NON-FACILITY SETTING	FACILITY SETTING	ANES BASE	FOL UP	PRE OP (-56)	INTRA OP (-54)	POST OP (-55)	PCTC (26/TC)	MSI (-51)	BSI (-50)	ASI (-80)	CSI (-62)	TSI (-66)	ENDO BASE	FSI
K0541	Speech Generating Device	By Report	By Report													N
K0542	Speech Generating Device	By Report	By Report													N
K0543	Speech Generating Device	By Report	By Report													N
K0544	Speech Generating Device	By Report	By Report													N
K0545	Speech Generating software	By Report	By Report													N
K0546	Accessory for speech device	By Report	By Report													N
K0547	Accessory for speech device	By Report	By Report													N
L0321	Tlso anti-post-cntrl prefab	By Report	By Report													N
L0331	Tlso ant-post-lat cntrl prfb	By Report	By Report													N
L0391	Tlso ant-post-lat-rot cntrl	By Report	By Report													N
L0561	Prefab lso	By Report	By Report													N
L0986	Spinal orth abdm pnl prefab	By Report	By Report													N
L1005	Tension based scoliosis orth	Not Covered	Not Covered													X
L2768	Ortho sidebar disconnect	By Report	By Report													N
L3677	SO hard plastic stabilizer	By Report	By Report													N
L5301	BK mold socket SACH ft endo	By Report	By Report													N
L5311	Knee disart, SACH ft, endo	By Report	By Report													N
L5321	AK open end SACH	By Report	By Report													N
L5331	Hip disart canadian SACH ft	By Report	By Report													N
L5341	Hemipelvectomy canadian SACH	By Report	By Report													N
L5671	BK/AK locking mechanism	By Report	By Report													N
L5847	Microprocessor cntrl feature	By Report	By Report													N
L5989	Pylon w elctrnc force sensor	By Report	By Report													N
L5990	User adjustable heel height	By Report	By Report													N
L6881	Autograsp feature ul term dv	By Report	By Report													N
L6882	Microprocessor control uplmb	By Report	By Report													N
L8001	Breast prosthesis bra & form	By Report	By Report													N
L8002	Brst prsth bra & bilat form	By Report	By Report													N
L8505	Artificial larynx, accessory	By Report	By Report													N
L8507	Trach-esoph voice pros pt in	By Report	By Report													N
L8509	Trach-esoph voice pros md in	By Report	By Report													N

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L8510	Voice amplifier	By Report	By Report													N
P9045	Albumin (human), 5%, 250 ml	By Report	By Report		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		N
P9046	Albumin (human), 25%, 20 ml	By Report	By Report		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		N
P9047	Albumin (human), 25%, 50ml	By Report	By Report		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		N
P9048	Plasmaprotein fract,5%,250ml	By Report	By Report		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		N
P9050	Granulocytes, pheresis unit	By Report	By Report		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		N
Q3014	Telehealth facility fee	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
Q3017	ALS assessment	By Report	By Report		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		N
S0079	Octreotide 100 mcg	$15.07	$15.07		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		D
S0087	Alemtuzumab 30 mg	$1,537.50	$1,537.50		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		D
S0088	Imatinib 100 mg	$19.68	$19.68		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		D
S0091	Granisetron 1mg	$195.20	$195.20		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		D
S0092	Hydromorphone 250 mg	$88.79	$88.79		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		D
S0093	Morphine 500 mg	$281.00	$281.00		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		D
S0155	Epoprostenol dilutant	By Report	By Report		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		N
S0170	Anastrozole 1 mg	$6.79	$6.79		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		D
S0171	Bumetanide 0.5 mg	By Report	By Report		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		N
S0172	Chlorambucil 2 mg	$1.74	$1.74		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		D
S0173	Dexamethasone 4 mg	$1.18	$1.18		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		D
S0174	Dolasetron 50 mg	$57.52	$57.52		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		D
S0175	Flutamide 125 mg	$2.09	$2.09		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		D
S0176	Hydroxyurea 500 mg	$1.30	$1.30		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		D
S0177	Levamisole 50 mg	$6.36	$6.36		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		D
S0178	Lomustine 10 mg	$6.33	$6.33		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		D
S0179	Megestrol 20 mg	$0.67	$0.67		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		D
S0181	Ondansetron 4 mg	$17.36	$17.36		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		D
S0182	Procarbazine 5 mg	$0.70	$0.70		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		D
S0183	Prochlorperazine 5 mg	$0.59	$0.59		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		D
S0187	Tamoxifen 10 mg	$1.90	$1.90		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		D
S0189	Testosterone pellet 75 mg	$15.00	$15.00		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		D
S0206	Surgery in office	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X

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S0208	Paramed intrcept nonvol	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S0209	WC van mileage per mi	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S0215	Nonemerg transp mileage	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S0250	Comp geriatr assmt team	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S0255	Hospice refer visit nonmd	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S0260	H&P for surgery	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S0302	Completed EPSDT	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S0310	Hospitalist visit	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S0340	Lifestyle mod 1st stage	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S0341	Lifestyle mod 2 or 3 stage	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S0342	Lifestyle mod 4th stage	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S0395	Impression casting ft	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S0400	Global eswl kidney	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S0500	Dispos cont lens	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S0504	Singl prscrp lens	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S0506	Bifoc prscp lens	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S0508	Trifoc prscrp lens	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S0510	Non-prscrp lens	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S0512	Daily cont lens	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S0514	Color cont lens	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S0516	Safety frames	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S0518	Sunglass frames	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S0580	Polycarb lens	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S0581	Nonstnd lens	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S0590	Misc integral lens serv	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S0592	Comp cont lens eval	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S0622	Phys exam for college	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S0812	Phototherap keratect	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S1001	Deluxe item	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S1002	Custom item	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S1025	Inhal nitric oxide neonate	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X

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		DOLLAR VALUE				MODIFIERS										
CODE	ABBREVIATED DESC	NON-FACILITY SETTING	FACILITY SETTING	ANES BASE	FOL UP	PRE OP (-56)	INTRA OP (-54)	POST OP (-55)	PCTC (26/TC)	MSI (-51)	BSI (-50)	ASI (-80)	CSI (-62)	TSI (-66)	ENDO BASE	FSI
S1030	Gluc monitor purchase	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S1031	Gluc monitor rental	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S2065	Simult panc kidn trans	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S2080	Laup	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S2112	Knee arthroscp harv	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S2115	Periacetabular osteotomy	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S2150	BMT harv/transpl 28d pkg	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S2250	Uterine artery emboliz	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S2260	Induced abortion 17-24 weeks	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S2341	Chemodenerv adduct vocal	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S2342	Nasal endoscop po debrid	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S2360	Vertebroplast cerv 1st	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S2361	Vertebroplast cerv addl	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S2400	Fetal surg congen hernia	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S2401	Fetal surg urin trac obstr	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S2402	Fetal surg cong cyst malf	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S2403	Fetal surg pulmon sequest	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S2404	Fetal surg myelomeningo	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S2409	Fetal surg noc	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S2411	Fetoscop laser ther TTTS	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S3600	Stat lab	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S3601	Stat lab home/nf	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S3630	Eosinophil blood count	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S3701	NMP-22 assay	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S3818	BRCA1 gene anal	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S3819	BRCA2 gene anal	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S3830	Gene test HNPCC comp	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S3831	Gene test HNPCC single	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S3835	Gene test cystic fibrosis	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S3837	Gene test hemochromato	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S3900	Surface EMG	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X

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CODE	ABBREVIATED DESC	DOLLAR VALUE NON-FACILITY SETTING	DOLLAR VALUE FACILITY SETTING	ANES BASE	FOL UP	MODIFIERS PRE OP (-56)	INTRA OP (-54)	POST OP (-55)	PCTC (26/TC)	MSI (-51)	BSI (-50)	ASI (-80)	CSI (-62)	TSI (-66)	ENDO BASE	FSI
S4011	IVF package	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S4015	Complete IVF case rate	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S4016	Frozen IVF case rate	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S4018	F EMB trns canc case rate	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S4020	IVF canc a aspir case rate	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S4021	IVF canc p aspir case rate	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S4022	Asst oocyte fert case rate	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S4025	Donor serv IVF case rate	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S4026	Procure donor sperm	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S4027	Store prev froz embryos	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S4028	Microsurg epi sperm asp	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S4030	Sperm procure init visit	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S4031	Sperm procure subs visit	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S4980	Levonorgestrel ius	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S4981	Insert levonorgestrel ius	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S4989	Contracept IUD	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S4990	Nicotine patch legend	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S4991	Nicotine patch nonlegend	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S5035	HIT routine device maint	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S5036	HIT device repair	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S5497	HIT cath care noc	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S5498	HIT simple cath care	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S5501	HIT complex cath care	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S5502	HIT interim cath care	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S5517	HIT declotting kit	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S5518	HIT cath repair kit	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S5520	HIT picc insert kit	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S5521	HIT midline cath insert kit	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S5522	HIT picc insert no supp	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S5523	HIP midline cath insert kit	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S8030	Tantalum ring application	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X

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		DOLLAR VALUE				MODIFIERS										
CODE	ABBREVIATED DESC	NON-FACILITY SETTING	FACILITY SETTING	ANES BASE	FOL UP	PRE OP (-56)	INTRA OP (-54)	POST OP (-55)	PCTC (26/TC)	MSI (-51)	BSI (-50)	ASI (-80)	CSI (-62)	TSI (-66)	ENDO BASE	FSI
S8037	mrcp	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S8055	Us guidance fetal reduct	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S8097	Asthma kit	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S8100	Spacer without mask	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S8101	Spacer with mask	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S8180	Trach shower protector	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S8181	Trach tube holder	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S8182	Humidifier non-servo	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S8183	Humidifier dual servo	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S8185	Flutter device	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S8186	Swivel adaptor	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S8189	Trach supply noc	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S8190	Electronic spirometer	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S8401	Child-size diaper	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S8403	Adult-size pull-up brief	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S8404	Child-size pull-up brief	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S8415	Supplies for home delivery	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S8420	Custom gradient sleev/glov	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S8421	Ready gradient sleev/glov	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S8422	Custom grad sleeve med	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S8423	Custom grad sleeve heavy	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S8424	Ready gradient sleeve	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S8425	Custom grad glove med	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S8426	Custom grad glove heavy	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S8427	Ready gradient glove	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S8428	Ready gradient gauntlet	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S8429	Gradient pressure wrap	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S8430	Padding for comprssn bdg	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S8431	Compression bandage	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S8450	Splint digit	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S8451	Splint wrist or ankle	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X

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CODE	ABBREVIATED DESC	DOLLAR VALUE NON-FACILITY SETTING	DOLLAR VALUE FACILITY SETTING	ANES BASE	FOL UP	MODIFIERS PRE OP (-56)	INTRA OP (-54)	POST OP (-55)	PCTC (26/TC)	MSI (-51)	BSI (-50)	ASI (-80)	CSI (-62)	TSI (-66)	ENDO BASE	FSI
S8452	Splint elbow	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S8490	100 insulin syringes	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S9083	Urgent care center global	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S9098	Home phototherapy visit	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S9109	CHF telemonitoring month	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S9117	Back school visit	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S9131	PT in the home per diem	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S9208	Home mgmt preterm labor	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S9209	Home mgmt PPROM	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S9211	Home mgmt gest hypertension	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S9212	Hm postpar hyper per diem	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S9213	Hm preeclamp per diem	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S9214	Hm gest dm per diem	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S9216	Gest hyper w nurs diem	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S9217	Postpar hyper w nurs diem	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S9218	Preeclamp w nurs diem	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S9325	HIT pain mgmt per diem	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S9326	HIT cont pain per diem	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S9327	HIT int pain per diem	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S9328	HIT pain imp pump diem	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S9329	HIT chemo per diem	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S9330	HIT cont chem diem	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S9331	HIT intermit chemo diem	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S9336	HIT cont anticoag diem	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S9338	HIT immunotherapy diem	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S9339	HIT periton dialysis diem	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S9340	HIT enteral per diem	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S9341	HIT enteral grav diem	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S9342	HIT enteral pump diem	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S9343	HIT enteral bolus nurs	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S9345	HIT anti-hemophil diem	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X

Appendix B: Added HCPCS Codes

Effective 1-1-2002

CODE	ABBREVIATED DESC	DOLLAR VALUE NON-FACILITY SETTING	DOLLAR VALUE FACILITY SETTING	ANES BASE	FOL UP	MODIFIERS PRE OP (-56)	INTRA OP (-54)	POST OP (-55)	PCTC (26/TC)	MSI (-51)	BSI (-50)	ASI (-80)	CSI (-62)	TSI (-66)	ENDO BASE	FSI
S9346	HIT alpha-1-proteinas diem	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S9347	HIT longterm infusion diem	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S9348	HIT sympathomim diem	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S9349	HIT tocolysis diem	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S9351	HIT cont antiemetic diem	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S9353	HIT cont insulin diem	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S9355	HIT chelation diem	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S9357	HIT enzyme replace diem	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S9359	HIT anti-tnf per diem	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S9361	HIT diuretic infus diem	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S9363	HIT anti-spasmotic diem	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S9364	HIT tpn total diem	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S9365	HIT tpn 1 liter diem	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S9366	HIT tpn 2 liter diem	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S9367	HIT tpn 3 liter diem	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S9368	HIT tpn over 3l diem	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S9370	HT inj antiemetic diem	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S9372	HT inj anticoag diem	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S9373	HIT hydra total diem	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S9374	HIT hydra 1 liter diem	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S9375	HIT hydra 2 liter diem	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S9376	HIT hydra 3 liter diem	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S9377	HIT hydra over 3l diem	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S9379	HIT noc per diem	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S9381	HIT high risk/escort	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S9441	Asthma education	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S9442	Birthing class	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S9443	Lactation class	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S9445	PT education noc individ	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S9446	PT education noc group	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S9494	HIT antibiotic total diem	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X

Appendix B: Added HCPCS Codes

Effective 1-1-2002

CODE	ABBREVIATED DESC	DOLLAR VALUE NON-FACILITY SETTING	DOLLAR VALUE FACILITY SETTING	ANES BASE	FOL UP	MODIFIERS PRE OP (-56)	INTRA OP (-54)	POST OP (-55)	PCTC (26/TC)	MSI (-51)	BSI (-50)	ASI (-80)	CSI (-62)	TSI (-66)	ENDO BASE	FSI
S9497	HIT antibiotic q3h diem	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S9500	HIT antibiotic q24h diem	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S9501	HIT antibiotic q12h diem	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S9502	HIT antibiotic q8h diem	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S9503	HIT antibiotic q6h diem	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S9504	HIT antibiotic q4h diem	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S9529	Venipuncture home/snf	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S9537	HT hem horm inj diem	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S9538	HIT blood products diem	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S9542	HT inj noc per diem	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S9558	HT inj growth horm diem	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S9559	HIT inj interferon diem	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S9560	HT inj hormone diem	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S9800	HT rn per hour	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S9810	HT pharm per hour	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S9981	Med record copy admin	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S9982	Med record copy per page	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S9986	Not medically necessary svc	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
S9989	Services outside US	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
T1000	Private duty/independent nsg	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
T1014	Telehealth transmit, per min	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
T1015	Clinic service	By Report	By Report		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		N
V5241	Dispensing fee, monaural	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
V5242	Hearing aid, monaural, cic	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
V5243	Hearing aid, monaural, itc	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
V5244	Hearing aid, prog, mon, cic	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
V5245	Hearing aid, prog, mon, itc	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
V5246	Hearing aid, prog, mon, ite	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
V5247	Hearing aid, prog, mon, bte	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
V5248	Hearing aid, binaural, cic	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
V5249	Hearing aid, binaural, itc	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X

Appendix B: Added HCPCS Codes
Effective 1-1-2002

		DOLLAR VALUE				MODIFIERS										
CODE	ABBREVIATED DESC	NON-FACILITY SETTING	FACILITY SETTING	ANES BASE	FOL UP	PRE OP (-56)	INTRA OP (-54)	POST OP (-55)	PCTC (26/TC)	MSI (-51)	BSI (-50)	ASI (-80)	CSI (-62)	TSI (-66)	ENDO BASE	FSI
V5250	Hearing aid, prog, bin, cic	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
V5251	Hearing aid, prog, bin, itc	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
V5252	Hearing aid, prog, bin, ite	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
V5253	Hearing aid, prog, bin, bte	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
V5254	Hearing id, digit, mon, cic	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
V5255	Hearing aid, digit, mon, itc	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
V5256	Hearing aid, digit, mon, ite	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
V5257	Hearing aid, digit, mon, bte	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
V5258	Hearing aid, digit, bin, cic	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
V5259	Hearing aid, digit, bin, itc	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
V5260	Hearing aid, digit, bin, ite	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
V5261	Hearing aid, digit, bin, bte	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
V5262	Hearing aid, disp, monaural	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
V5263	Hearing aid, disp, binaural	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
V5264	Ear mold/insert	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
V5265	Ear mold/insert, disp	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
V5266	Battery for hearing device	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
V5267	Hearing aid supply/accessory	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
V5268	ALD Telephone Amplifier	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
V5269	Alerting device, any type	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
V5270	ALD, TV amplifier, any type	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
V5271	ALD, TV caption decoder	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
V5272	Tdd	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
V5273	ALD for cochlear implant	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
V5274	ALD unspecified	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X
V5275	Ear impression	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	9	9	9	9	9	9		X

Appendix C: Added Category III CPT® Codes
Effective 1-1-2002

Effective 7-1-2001

Code	ABBREVIATED DESCRIPTION	DOLLAR VALUE NON-FACILITY SETTING	DOLLAR VALUE FACILITY SETTING	ANES BASE	FOL UP	MODIFIERS PRE OP (-56)	INTRA OP (-54)	POST OP (-55)	PCTC (26/TC)	MSI (-51)	BSI (-50)	ASI (-80)	CSI (-62)	TSI (-66)	ENDO BASE	FSI
0012T	Arthroscopy, knee, surgical, implant osteochondral	By Report	By Report		0	0.0%	0.0%	0.0%	0	0	0	1	0	0	0	N
0013T	allografts add-on	By Report	By Report		0	0.0%	0.0%	0.0%	0	0	0	0	0	0	0	N
0014T	Meniscal transplant, medial or lateral, knee	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	0	0	0	1	0	0	0	X
0016T	Destruction of localized lesion of choroid	By Report	By Report		0	0.0%	0.0%	0.0%	0	0	0	1	0	0	0	N
0017T	Destruction of macular drusen,photocoagulation	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	0	0	0	1	0	0	0	X
0018T	Delivery high power focal magnetic pulses direct s	By Report	By Report		0	0.0%	0.0%	0.0%	0	0	0	0	0	0	0	N
0019T	Extracorporeal shock wave therapy; musculoskeletal	By Report	By Report		0	0.0%	0.0%	0.0%	0	0	0	1	0	0	0	N
0020T	involving plantar fascia add-on	By Report	By Report		0	0.0%	0.0%	0.0%	0	0	0	1	0	0	0	N
0021T	Insert transcervical/transvaginal fetal oximetry	By Report	By Report		0	0.0%	0.0%	0.0%	0	0	0	1	0	0	0	N
0023T	Infectious agent drug suscept phenotype prediction	By Report	By Report		0	0.0%	0.0%	0.0%	0	0	0	1	0	0	0	N
0024T	Non-surgical septal reduction therapy	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	0	0	0	1	0	0	0	X
0025T	Ultrasonic pachymetry	By Report	By Report		0	0.0%	0.0%	0.0%	0	0	0	0	0	0	0	N
0026T	Lipoprotein, direct measurement, intermediate densit	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	0	0	0	1	0	0	0	X

Effective 1-1-2002

Code	ABBREVIATED DESCRIPTION	DOLLAR VALUE NON-FACILITY SETTING	DOLLAR VALUE FACILITY SETTING	ANES BASE	FOL UP	MODIFIERS PRE OP (-56)	INTRA OP (-54)	POST OP (-55)	PCTC (26/TC)	MSI (-51)	BSI (-50)	ASI (-80)	CSI (-62)	TSI (-66)	ENDO BASE	FSI
0028T	Dual energy x-ray (DEXA)	Not Covered	Not Covered		0	0.0%	0.0%	0.0%	0	0	0	0	0	0		X

Appendix D: Deleted CPT® Codes
Effective 1-1-2002

CPT ® CODE	ABBREVIATED DESCRIPTION
00850	Anesth, cesarean section
00855	Anesth, hysterectomy
00857	Analgesia, labor & c-section
00884	Anesth, major vein revision
00946	Anesth, vaginal delivery
00955	Analgesia, vaginal delivery
01904	Anesth, skull x-ray inject
01906	Anesth, lumbar myelography
01908	Anesth, cervical myelography
01910	Anesth, skull myelography
01912	Anesth, lumbar diskography
01914	Anesth, cervical diskography
01918	Anesth, limb arteriogram
01921	Anesth, vessel surgery
26585	Repair finger deformity
26597	Release of scar contracture
29815	Shoulder arthroscopy
29909	Arthroscopy of joint
53443	Reconstruction of urethra
54402	Remove penis prosthesis
54407	Remove multi-comp prosthesis
54409	Revise penis prosthesis
54510	Removal of testis lesion
80072	Arthritis panel
85095	Bone marrow aspiration
85102	Bone marrow biopsy
85535	Iron stain, blood cells
86683	Hemoglobin, fecal antibody
88170	Fine needle aspiration
88170-26	Fine needle aspiration
88170-TC	Fine needle aspiration
88171	Fine needle aspiration
88171-26	Fine needle aspiration
88171-TC	Fine needle aspiration
93536	Insert circulation assi
93607	Left ventricular recording
93607-26	Left ventricular recording
93607-TC	Left ventricular recording
93737	Analyze cardio/defibrillator
93737-26	Analyze cardio/defibrillator
93737-TC	Analyze cardio/defibrillator
93738	Analyze cardio/defibrillator
93738-26	Analyze cardio/defibrillator
93738-TC	Analyze cardio/defibrillator

Appendix E: Deleted HCPCS Codes
Effective 1-1-2002

CPT® CODE	ABBREVIATED DESCRIPTION
A4329	External catheter start set
A4650	Supp esrd centrifuge
A4655	Esrd syringe/needle
A4700	Standard dialysate solution
A4705	Bicarb dialysate solution
A4735	Local/topical anesthetics
A4780	Esrd sterilizing agent
A4790	Esrd cleansing agents
A4800	Heparin/antidote dialysis
A4820	Supplies hemodialysis kit
A4850	Rubber tipped hemostats
A4880	Water storage tanks
A4900	Capd supply kit
A4901	Ccpd supply kit
A4905	Ipd supply kit
A4910	Esrd nonmedical supplies
A4912	Gomco drain bottle
A4914	Preparation kit
A4919	Supp dialysis dialyzer holde
A4920	Harvard pressure clamp
A4921	Measuring cylinder
A5064	Drain ostomy pouch w/fceplte
A5074	Urinary pouch w/faceplate
A5075	Urinary pouch on faceplate
A5502	Diabetic shoe density insert
A9160	Podiatrist non-covered servi
A9170	Chiropractor non-covered ser
A9190	Misc/expe personal comfort i
B4084	Gastrostomy/jejunostomy tubi
B4085	Gastrostomy tube w/ring each
E0298	Heavyduty/xtra wide hosp bed
E0609	Blood gluc mon w/special fea
E0753	Neurostimulator electrodes
E1640	Replacement components for d
E1900	Speech communication device
G0016	Post symptom ECG md review
G0129	Partial hosp prog service
G0174	Intensitymodulatedradiation
G0178	Intensitymodulatedradiation
G0184	Ocular photdynamicTx 2nd eye
G0188	Xray lwr extrmty-full lngth
G0188-26	Xray lwr extrmty-full lngth
G0188-TC	Xray lwr extrmty-full lngth
G0190	Immunization administration

CPT® CODE	ABBREVIATED DESCRIPTION
G0191	Immunization admin,each add
G0203	Screenmammographyfilmdigital
G0203-26	Screenmammographyfilmdigital
G0203-TC	Screenmammographyfilmdigital
G0205	Diagnosticmammographyfilmpro
G0205-26	Diagnosticmammographyfilmpro
G0205-TC	Diagnosticmammographyfilmpro
G0207	Diagnostic mammography film
G0207-26	Diagnostic mammography film
G0207-TC	Diagnostic mammography film
J0340	Nandrolon phenpropionate inj
J0400	Inj trimethaphan camsylate
J0510	Benzquinamide injection
J0590	Ethylnorepinephrine hcl inj
J0695	Cefonocid sodium injection
J0730	Chlorpheniramin maleate inj
J0810	Cortisone injection
J1090	Testosterone cypionate 50 MG
J1362	Erythromycin glucep / 250 MG
J1690	Prednisolone tebutate inj
J1739	Hydroxyprogesterone cap 125
J1741	Hydroxyprogesterone cap 250
J1930	Propiomazine injection
J1970	Methotrimeprazine injection
J2240	Metocurine iodide injection
J2330	Thiothixene injection
J2350	Niacinamide/niacin injection
J2480	Hydrochlorides of opium inj
J2512	Inj pentagastrin per 2 ML
J2640	Prednisolone sodium ph inj
J2675	Inj progesterone per 50 MG
J2860	Secobarbital sodium inj
J2970	Methicillin sodium injection
J3080	Chlorprothixene injection
J3270	Imipramine hcl injection
J3390	Methoxamine injection
J3450	Mephentermine sulfate inj
J7315	Sodium hyaluronate injection
K0008*	Cstm manual wheelchair/base
K0013*	Custom power whlchr base
L5300	Bk sach soft cover & finish
L5310	Knee disart sach soft cv/fin
L5320	Ak open end sach soft cv/fin
L5330	Hip canadian sach sft cv/fin

Appendix E: Deleted HCPCS Codes

Effective 1-1-2002

CPT® CODE	ABBREVIATED DESCRIPTION
L5340	Hemipelvectomy canad cv/fin
L5667	Socket insert w lock lower
L5669	Below knee socket w/o lock
M0302	Assessment of cardiac output
M0302-26	Assessment of cardiac output
M0302-TC	Assessment of cardiac output
P9042	Albumin (human), 25%
Q0081	Infusion ther other than che
Q0083	Chemo by other than infusion
Q0084	Chemotherapy by infusion
Q0085	Chemo by both infusion and o
Q0086	Physical therapy evaluation/
Q0144	Azithromycin dihydrate, oral
Q0160	Factor IX non-recombinant
Q0161	Factor IX recombinant
Q0185	Metabolic active D/E tissue
Q2015	Somatrem, 5 mg
Q2016	Somatropin, 1 mg
Q3013	Verteporfin injection
S0024	Injection, ciprofloxacin
S0029	Injection, fluconazole
S0086	Injection, verteporfin, 15mg
S0096	Injection, itraconazole, 200
S2052	Transplantation of small int
S2210	Cryosurgical ablation (in si
S2220	Thrombectomy, coronary
S3700	Bladder tumor-associated
S3906	Transfusion, direct, blood
S4980	Levonorgestrel ius
S5002	Fat emulsion 10% in 250 ml
S5003	Fat emulsion 20% in 250 ml
S5016	Antibiotic admin supplies w/
S5017	Antibiotic adminsupplies w/o
S5018	Pain therapy admin supplies

CPT® CODE	ABBREVIATED DESCRIPTION
S5019	Chemotherapy admin supplies
S5020	Chemotherapy admin supplies
S5021	Hydration therapy admin supp
S5022	Growth hormone therapy
S5025	Infusion pump rental,perdiem
S5503	Maintenance of implanted vas
S8001	Radiofrequency stimulation
S8400	Incontinence pants, each
S8402	Diapers, each
S9023	Xenon regional cerebral bloo
S9035	Medical equipment or supplie
S9085	Meniscal allograft transplan
S9200	Nursing services and all nec
S9210	Nursing services and all nec
S9220	Nursing services and all nec
S9225	Nursing services and all nec
S9230	Nursing services and all nec
S9300	Nursing services and all nec
S9308	Nursing services and all nec
S9310	Nursing services and all nec
S9395	Nursing services and all nec
S9420	Nursing services and all nec
S9423	Nursing services, patient as
S9425	Nursing services and all nec
S9526	Skilled nursing visits for
S9527	Insertion of a peripherally
S9528	Insertion of midline central
S9533	Pain management, intravenous
S9535	Administration of hematopoie
S9539	Administration of antibiotic
S9545	Administration of immune glo
S9550	Home IV therapy, hydration
S9555	Additional home infusion

*CPT® Codes K0008 and K0013 were deleted effective 07/01/01.

Appendix F: Ambulatory Surgery Center Fee Schedule -- Supplement

Effective 1-1-2002

NEW CODES:			
CPT® CODE	**ABBREVIATED DESCRIPTION**	**PAYMENT GROUP**	**RATES**
27093	INJECT PROC FOR HIP ARTHOGRAPHY W/O ANES	1	$843.10
27096	INJECTION SACROLILIAC JNT, ARTHROGRAPHY	1	$843.10
29999	ARTHROSCOPY UNLISTED PROCEDURE	NG	BR
54406	REMOVE MULTI-COMP PENIS PROSTHESIS	NG	BR
54408	REPAIR MULTI-COMP PENIS PROSTHESIS	NG	BR
54410	REMOVE/REPLACE PENIS PROSTHESIS	NG	BR
54415	REMOVE SELF-CONTD PENIS PROSTHESIS	NG	BR
54416	REMOVE/REPLACE PENIS CONTAIN PROSTHESIS	NG	BR
62284	INJECTION MYELOGRAPHY SPINAL OR PSTFOS	1	$843.10
62290	INJECTION DISKOGRAPHY LUMBAR SNGL MULT*	1	$843.10
62291	INJECTION DISKOGRAPHY CERV SNGL MULT*	1	$843.10
64581	IMPLANT NEUROELECTRODES	1	NC
DELETED CODES:			
CPT® CODE	**ABBREVIATED DESCRIPTION**	**PAYMENT GROUP**	**NEW CODES**
26585	REPAIR BIFID DIGIT	5	26587
26597	RELEASE SCAR CONTRCTR,FLX/EXTNS W/GRFT	3	11042, 14040, 14041, 15120, 15240
29815	ARTHROSCOPY SHOULDER DIAGNOSTIC	9	29805
29909	ARTHROSCOPY UNLISTED PROCEDURE	NG	29999
53443	URETHRPLSTY W/TUBRZATION POSTR URET/BLAD	NG	53431
54402	REMOVE OR REPLACE PENILE PROSTHESIS	NG	54415, 54416
54407	REMOVE, RPR OR REPLACE INFLTBL PENILE PR	NG	54406, 54408, 54410
54409	SRG CORCT HYDRAUL-ABNORM INFL-PROSTHESIS	NG	54408
54510	EXCISION OF LOCAL LESION OF TESTIS	2	54512

Appendix F: Ambulatory Surgery Center Fee Schedule -- Supplement

Effective 1-1-2002

CORRECTIONS:			
CPT® CODE	**ABBREVIATED DESCRIPTION**	**PAYMENT GROUP**	**RATES**
29848	ARTHSCPY,WRIST,SURG,W/REL TRANS CRPL LIG	9	$2,107.75
29860	HIP ARTHROSCOPY, DX	9	$2,107.75
29861	HIP ARTHROSCOPY, SURG, REMOVAL FOREIGN	9	$2,107.75
29862	HIP ARTHROSCOPY, SURG, DEBRIDEMENT	9	$2,107.75
29863	HIP ARTHROSCOPY, SURG, SYNOVECTOMY	9	$2,107.75
29891	ANKLE ARTHROSCOPY/SURGERY	9	$2,107.75
29892	ANKLE ARTHROSCOPY/SURGERY	9	$2,107.75
29893	SCOPE, PLANTAR FASCIOTOMY	9	$2,107.75
42820	TONSILLECTOMY/ADENOIDECTOMY UNDR AGE 12	5	NC
42825	TONSILLECTOMY PRIMARY/2NDARY UNDR AGE 12	5	NC
42830	ADENOIDECTOMY PRIMARY UNDER AGE 12	4	NC
42835	ADENOIDECTOMY SECONDARY UNDER AGE 12	4	NC
49500	REPAIR ING HERNIA UNDER AGE 5-W/WO HYDRO	4	NC
49580	REPAIR UMBILICAL HERNIA-UNDER AGE 5 YRS	5	NC
54162	LYSIS OR EXCISION OF PENILE POST-CIRC ADHESIONS	2	NC
54163	REPAIR INCOMPLETE CIRCUMCISION	2	NC
54164	FRENULOTOMY OF PENIS	2	NC
58353	ENDOMETRIAL ABLATION, THERMAL, W/OUT HYS	4	NC
58600	LIGATION OR TRANSECTION OF FALLOPIAN	5	NC
58615	OCCLUSION FALLOPIAN TUBES BY DEVICE	5	NC
62280	INJECTION NEUROLYTIC SUBSTANCE SUBRACH*	1	NC
62350	IMPLANTATION,REVISION OR REPOSITIONING O	2	NC
62351	IMPLANTATION,REVISION OR REPOSITIONING O	2	NC
62360	IMPLANTATION OR REPLACEMENT OF DEVICE FO	2	NC
62361	IMPLANTATION OR REPLACEMENT OF DEVICE FO	2	NC
62362	IMPLANTATION OR REPLACEMENT OF DEVICE FO	2	NC
62365	REMOVAL OF SUBCUTANEOUS RESERVOIR OR PUM	2	NC
62367	ELECTRONIC ANALYSIS OF PROGRAMMABLE,IMPL	2	NC
62368	ELECTRONIC ANALYSIS OF PROGRAMMABLE,IMPL	2	NC
63650	PERCUTAN IMPLANT NS ELECTRODS EPIDURAL	2	NC
63660	REVISION/REMOVAL SPINAL NS ELECTRODES	1	NC
63685	INC SUBCUTANEOUS PLACEMENT NS RECEIVER	2	NC
63688	REVISION/REMOVAL SPINAL NS RECEIVER	1	NC
KEY:			
BR	By Report		
NC	Not Covered		
NG	Not Grouped		