



# ENCOUNTER KEYS

November-December 2017

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## Age

- The maximum age for the CPT code 96110 (Developmental Screening, With Interpretation and Report) has been revised to 8 years.
- The minimum and maximum age for the HCPCS code D0330 (Panoramic Radiographic Image) has been changed to minimum age 001; maximum age 999.

## Category of Service (COS)

Effective for dates of service on or after January 1, 2017 the COS 02 (Medicine) has been added to the CPT code 37246 (Balloon Dilation Of Artery, Accessed Through The Skin Or By Open Procedure, With Imaging Including Radiological Supervision And Interpretation).

## Codes

Effective for dates of service on or after January 1, 2017 the following codes have been added to the PMMIS system. For the AHCCCS coverage codes; Place of Service, Limits etc. refer to the appropriate screens.

Code	Description
37248	Alloon Dilation Of First Vein, Accessed Through The Skin Or By Open Procedure, With Imaging Including Radiological Supervision And Interpretation
37249	Balloon Dilation Of Additional Vein, Accessed Through The Skin Or By Open Procedure, With Imaging Including Radiological Supervision And Interpretation
62324	Insertion Of Indwelling Catheter And Administration Of Substance Into Spinal Canal Of Upper Or Middle Back

**Codes**

- The end date of service has been changed to 99/99/9999 for the following codes on RF618 (Provider Type Rate Schedule) for the provider type 11 (Psychologist).

<b>Code</b>	<b>Description</b>
0359T	Behavior identification assessment
0360T	Observational behavioral follow-up assessment first 30 minutes
0361T	Observational behavioral follow-up assessment additional 30 minutes
0362T	Exposure behavioral follow-up assessment first 30 minutes
0363T	Exposure behavioral follow-up assessment each additional 30 minutes
0364T	Behavior treatment by protocol administered by technician first 30 minutes
0365T	Behavior treatment by protocol administered by technician each additional 30 minutes
0366T	Group behavior treatment by protocol administered by technician first 30 minutes
0367T	Group behavior treatment by protocol administered by technician each additional 30 minutes
0368T	Behavior treatment with protocol modification administered by physician or other qualified health care professional first 30 minutes
0369T	Behavior treatment with protocol modification administered by physician or other qualified health care professional each additional 30 minutes
0370T	Family behavior treatment guidance administered by physician
0371T	Multiple-family group behavior treatment guidance administered by physician or other qualified health care professional
0372T	Behavior treatment social skills group administered by physician or other qualified health care professional
0373T	Behavior treatment with protocol modification first 60 minutes
0374T	Behavior treatment with protocol modification additional 30 minutes

Effective for dates of service on or after October 1, 2016 the following codes have been added to the PMMIS system. For additional diagnosis code information refer to the appropriate PMMIS reference screens.

<b>Diagnosis Code</b>	<b>Description</b>
D78.33	Postprocedural seroma of the spleen following a procedure on the spleen
D78.34	Postprocedural seroma of the spleen following other procedure
E89.822	Postprocedural seroma of an endocrine system organ or structure following an endocrine system procedure
E89.823	Postprocedural seroma of an endocrine system organ or structure following other procedure
H59.353	Postprocedural seroma of eye and adnexa following an ophthalmic procedure, bilateral
H59.359	Postprocedural seroma of unspecified eye and adnexa following an ophthalmic procedure
H59.361	Postprocedural seroma of right eye and adnexa following other procedure
H59.362	Postprocedural seroma of left eye and adnexa following other procedure
H59.363	Postprocedural seroma of eye and adnexa following other procedure, bilateral
H59.369	Postprocedural Seroma of Unspecified Eye
H95.53	Postprocedural seroma of ear and mastoid process following a procedure on the ear and mastoid process
H95.54	Postprocedural seroma of ear and mastoid process following other procedure
I97.622	Postprocedural seroma of a circulatory system organ or structure following other procedure
I97.640	Postprocedural seroma of a circulatory system organ or structure following a cardiac catheterization
I97.641	Postprocedural seroma of a circulatory system organ or structure following cardiac bypass
J95.863	Postprocedural seroma of a respiratory system organ or structure following other procedure
N99.842	Postprocedural Seroma Of A Genitourinary System Organ Or Structure
N99.843	Postprocedural Seroma Of A Genituroinary System Organ Or Structure
S02.80XB	Fracture of Other Specified Skull

- Effective for the date of service October 1, 2016 the following ICD-10 codes have been added to the system.

Code	Description
30243Y2	Transfusion Of Allogeneic Related Hematopoietic Stem Cells into Central Vein, Percutaneous Approach
30243Y3	Transfusion Of Allogeneic Unrelated Hematopoietic Stem Cells into Central Vein, Percutaneous Approach
30243G3	Transfusion Of Allogeneic Unrelated Bone Marrow
30243G2	Transfusion Of Allogeneic Related Bone Marrow

- The HCPCS code J2315 (Injection, Naltrexone, Depot Form, 1 mg) has had the following updates made on RF113 and RF127.

Procedure Daily Maximum: 000380

Under "Limit 1: changed to 380

Minimum Age: 18 y

Maximum Age: 999 Y

- Effective for dates of service on or after October 1, 2016 the following ICD-10 diagnosis codes can be reported.

Code	Description
D78.33	Postprocedural seroma of the spleen
D78.34	Postprocedural seroma of the spleen
E89.822	Ostprocedural seroma of an endocrine system
H59.353	Postprocedural seroma of eye and adnexa
H95.53	Postprocedural seroma of ear and mastoid
H95.54	Postprocedural seroma of ear and mastoid
I97.622	Postprocedural seroma of a circulatory system
I97.640	Postprocedural seroma of a circulatory system
I97.641	Postprocedural seroma of a circulatory system

- Effective for dates of service on or after October 1, 2017 the following codes have been added to the PMMIS system. For Coverage Codes; Place of Service, and any other information referring to the codes, please go to the appropriate reference screens or utilize the information as provided in the twice monthly Reference Extracts.

<b>Code</b>	<b>Description</b>
C949 1	Injection, Avelumab, 10 mg
C949 2	Injection, Durvalumab, 10 mg
C949 3	Injection, Edaravone
C949 4	Injection, Ocrelizumab, 1 mg
J0604	Cinacalcet, Oral, 1 Mg (For ESRD On Dialysis)
J0606	Injection, Etecalcetide, 0.1 mg

- Effective for dates of service listed below, the following codes have been added to the reference screen RF145 (ICD-10 Procedure Class Code Screen):

<b>Code</b>	<b>Description</b>	<b>Effective</b>
XH0	New Technology, Skin, Subcutaneous Tissue, Fascia and Breast	10/1/2016
XK0	New Technology, Muscles, Tendons, Bursae and Ligaments,	10/1/2017
XN0	New Technology, Bones, Reposition	10/1/2016
XR0	New Technology, Joints,	10/1/2016
XW0	New Technology, Anatomical Regions,	10/1/2016
XY0	New Technology, Extracorporeal,	10/1/2017

**Definition Change**

Effective for January 1, 2014 the description for the modifier GT on RF114 has been updated to read Telemedicine – Via Interactive Audio/Video.

**Encounter Edit Status Report**

The current Encounter Edit Status Report posted to the AHCCCS Website inappropriately identifies those edit errors historically in a denied “D” status as in a “Y” pend status. This has been correct and a revised copy is now available on the website.

**Indicators**

The laboratory indicator W (CLIA Waived) has been added to the CPT code 80305 (Drug Test(s), Presumptive, Any Number of Drug Classes).

**Limits**

The “Procedure Daily Maximum has been changed for the procedure code A0425 (Ground Milage, per Statute Mile) to 000250.



**Revenue Codes**

- Effective for dates of service on or after October 1, 2016 the revenue code 0481 (Cardiac Cath Lab) can now be reported with the HCPCS code G0278 (Iliac And/Or Femoral Artery Angiography, Non-Selective, Bilateral Or Ipsilateral To Catheter Insertion, Performed At The Same Time As Cardiac Catheterization And/Or Coronary Angiography, Includes Positioning Or Placement Of The Catheter In The Distal Aorta Or Ipsilateral Femoral Or Iliac Artery, Injection Of Dye, Production Of Permanent Images, And Radiologic Supervision And Interpretation (List Separately In Addition To Primary Procedure)).
- Effective for dates of service on or after January 1, 2016 the revenue code 0361 (OR/Minor) has been added to the CPT code 50693 (Placement of Stent of Urinary Duct (Ureter), Accessed Through The Skin With Imaging Including Radiological Supervision And Interpretation).
- Effective for dates of service on or after January 1, 2016 the revenue code 0304 (Lav/NR Dialysis) has been added to the CPT codes 84450 (Liver Enzyme (SGOT), Level) and 85018 (Hemoglobin Measurement).
- Effective for dates of service on or after January 1, 2017 the revenue code 0490 (AMBUL SURG) can now be reported with the CPT code 35226 (Repair Blood Vessel, Direct; Lower Extremity).

**Modifier**

- Effective for dates of service on or after January 1, 2017 the modifier 95 (Synchronous Telemedicine Service Rendered) has been added to the PMMIS system on the reference screen RF114.
- Effective for the dates of service on or after January 1, 2016 the following modifiers have been added to the HCPCS code G0297 (Low Dose CT Scan (LDCT) For Lung Cancer Screening).

<b>Modifier</b>	<b>Definition</b>
CR	Catastrophe/disaster related
GA	Req Liability Notice Per Payer Pol
XE	Separate Enc, A Service That Is Distinct
XP	Separate Practitioner
XS	Separate Structure, A
XU	Unusual Non-Overlapping Service
59	Distinct Procedural Service

- Effective for dates of service on or after January 1, 2017 the modifiers listed below have been added to the CPT code 96376 (Injection Of Drug Or Substance Into A Vein For Therapy, Diagnosis, Or Prevention, In A Facility).

<b>Modifier</b>	<b>Definition</b>
XE	Separate Enc, A Service That Is Distinct
XP	Separate Practitioner
XS	Separate Structure, A
XU	Unusual Non-Overlapping Service
59	Distinct Procedural Service

- The SL (State Supplied Vaccine) modifier has been removed from the CPT code 90750 (Zoster (Shingles) Vaccine (HZV)).
- The beginning date for the modifier 90 (Reference) Outside Laboratory) has been changed to October 1, 2016 for CPT code 83006 (Growth Stimulation Expressed Gene 2).
- Effective for dates of service on or after October 1, 2017 the modifier ZC (Merck/Samsung Bioepis) has been added to the reference screens RF114 and RF119.



- Effective for dates of service listed below the following modifiers have been added to the CPT and HCPCS codes:

Code	Definition	Modifier	Effective Begin Date
35226	Repair blood vessel, direct; lower extremity	SG (Amb Surg Center (ASC) Facility)	01/01/17
37211	Transcatheter Therapy, Arterial Infusion for Thrombolysi	50 – Bilateral Procedure	01/01/16
42440	Excision of Submandibular (Submaxillary) Gland	50 – Bilateral Procedure	01/01/17
42665	Ligation Salivary Duct, Intraoral	50 – Bilateral Procedure	01/01/17
45384	Colonoscopy, Flexible, Promixal to Splenic Flexure	PT - Colonoscopy, Flexible, Promixal to Splenic Flexure	08/30/16
47146	Backbench Reconstruction Of Cadaver Or Living Donor	51 - Multiple Procedures	01/01/17
50360	Transplantation of donor kidney	LT - Identifies left side	09/22/17
50360	Transplantation of donor kidney	RT - Identifies right side	09/22/17
50432	Placement Of Nephrostomy Catheter, Percutaneous,	LT - Identifies Left Side Body	01/01/16
50432	Placement Of Nephrostomy Catheter, Percutaneous,	RT - Identifies Right Side Body	01/01/16
50435	Exchange Nephrostomy Catheter, Percutaneous	LT - Identifies Left Side Body	01/01/16
50435	Exchange Nephrostomy Catheter, Percutaneous	RT - Identifies Right Side Body	01/01/16
50435	Replacement Of Kidney Drainage Catheter Accessed Through The Skin With Imaging And Radiological Supervision And Interpretation	AS – PA Services for Assistant/At Surgery	01/01/16
55000	Puncture Aspiration of Hydrocele, Tunica Vaginalis	50 – Bilateral Procedure	01/01/17
73552	Radiologic Examination,. Femur; Minimum 2 Views	50 – Bilateral Procedure	01/01/17
83006	Test For Detecting Genes Associated With Growth Stimulation	90 - Reference (Outside) Laboratory	10/01/16
J0585	Injection, onabotulinumtoxina, 1 unit	JW - Drug Amt Discarded/No	01/01/17
J9047	Injection, Carfilzomib, 1 mg	JW - Drug Amt Discarded/No	01/01/17
J9264	Injection, Paclitaxel Protein-Bound Particles	JW - Drug Amt Discarded/No	01/01/17

- Effective for dates of service listed, the modifiers can now be reported with these codes and are found on the screens listed.

Code	Description	Modifier	Effective Date of Service	Applicable Reference Screen
21554	Removal Of (5 Centimeters Or Greater) Muscle Growth Of Neck Or Front Of Chest	80 – Assistant Surgeon	06/01/2016	RF132
21554	Removal Of (5 Centimeters Or Greater) Muscle Growth Of Neck Or Front Of Chest	81 – Minimum Assistant Surgeon	06/01/2016	RF132
21554	Removal Of (5 Centimeters Or Greater) Muscle Growth Of Neck Or Front Of Chest	82 – Assist Surg/Qual Resident Surg Not Avail	06/01/2016	RF132
22551	Fusion Of Spine Bones With Removal Of Disc At Upper Spinal Column, Anterior Approach	SG AMB SURG CTR (ASC) Facility Service	01/01/2017	RF132
22853	Insertion Of Device Into Intervertebral Disc Space Of Spine And Fusion Of Vertebrae	AS – PA Services for Assistant	01/01/2017	RF122 & RF132
40830	Suture Of (2.5 Centimeter Or Less) Mouth Laceration	AS - PA Services for Assistant/At Surgery	01/01/2016	RF122 & RF132
43281	Laparoscopy, Surgical, Repair of Paraesophageal Hernia	XE - Separate Encounter, A Service That Is Distinct	01/01/2016	RF121
43281	Laparoscopy, Surgical, Repair of Paraesophageal Hernia	XP – Separate Practitioner, A Service That Is	01/01/2016	RF121
43281	Laparoscopy, Surgical, Repair of Paraesophageal Hernia	XS - Separate Structure, A Service That Is	01/01/2016	RF121
43281	Laparoscopy, Surgical, Repair of Paraesophageal Hernia	XU - Unusual Non-Overlapping Service	01/01/2016	RF121
43281	Laparoscopy, Surgical, Repair of Paraesophageal Hernia	59 – Distinct Procedural Service	01/01/2016	RF121
82947	Glucose; Quantitative, Blood (Except Reagent Strip)	PO - Services, Procedures and/or Surgeries	01/01/2016	RF122 & RF132
83006	Growth Stimulation Expressed Gene 2 (ST2, Interleukin 1)	90 Reference (Outside) Laboratory	10/01/2016	RF121; RF122; RF132
84432	Thyroglobulin	PO - Services, Procedures and/or Surgeries	01/01/2016	RF122; RF132
84439	Thyroxine; Free	PO - Services, Procedures and/or Surgeries	01/01/2016	RF122; RF132
84443	Thyroid Stimulating Hormone (TSH)	Po - Services, Procedures and/or Surgeries	01/01/2016	RF122; RF132
84481	Triiodothyronine T3; Free	Po - Services, Procedures and/or Surgeries	01/01/2017	RF121
85045	Blood Count; Reticulocyte, Automated	Po - Services, Procedures and/or Surgeries	01/01/2017	RF121
87497	Infectious Agent Detection By Nucleic Acid (DNA or RNA)	PO - Services, Procedures and/or Surgeries	01/01/2016	RF122; RF132
96402	Injection and Intravenous Infusion Chemotherapy and Other Highly Complex Drug	PO - Services, Procedures and/or Surgeries	01/01/2017	RF121
97161	Evaluation Of Physical Therapy, Typically 20 Minutes	GP - SVS Delivered Under OP Physical Therapy	01/01/2017	RF121; RF122; RF132
97162	Evaluation Of Physical Therapy, Typically 30 Minutes	GP - SVS Delivered Under Op Phys Therapy	01/01/2017	RF121; RF122; RF132

97163	Evaluation Of Physical Therapy, Typically 45 Minutes	GP - SVS Delivered Under Op Phys Therapy	01/01/2017	RF121; RF122; RF132
97164	Re-Evaluation Of Physical Therapy, Typically 20 Minutes	GP - SVS Delivered Under Op Phys Therapy	01/01/2017	RF121; RF122; RF132
99214	Established Patient Office Or Other Outpatient, Visit Typically 25 Minutes	SA – Nurse Practitioner Rend Services	01/01/2016	RF121; RF122; RF132
J0583	Injection, Bivalirudin, 1mg.	JW – Drug Amt Discarded/Not Admin To Any Patient	01/01/2016	RF121; RF122; RF132
S5110	Home Care Training, Family; Per 15 Minutes	GT - Telemedicine – Via Interactive Audio/Video	10/01/2016	RF122; RF132

- Modifier GT has been added to the reference screen RF121 with an effective date of 03/01/2017. The codes previously had the modifier GT on RF122 & RF132.

<b>Code</b>	<b>Description</b>
96150	Health & behavior assessment each 15 minutes
96151	Health & behavior re-assessment each 15 minutes
96152	Health and behavior intervention, individual each 15 minutes
96153	Health and behavior intervention, group each 15 minute
96154	Health and behavior intervention, family and patient each 15 minutes
99406	Smoking and tobacco use intermediate counseling, greater than 3 minutes up to 10 minutes
99407	Smoking and tobacco use intensive counseling, greater than 10 minutes
99446	Telephone or internet assessment and management service provided by a consultative physician, 5-10 minutes of medical consultative discussion and review
99447	Telephone or internet assessment and management service provided by a consultative physician, 11-20 minutes of medical consultative discussion and review
99448	Telephone or internet assessment and management service provided by a consultative physician, 21-30 minutes of medical consultative discussion and review
99449	Telephone or internet assessment and management service provided by a consultative physician, 31 minutes of medical consultative discussion and review
G0396	Alcohol and/or substance (other than tobacco) abuse structured assessment (e.g., audit, DAST), and brief intervention 15 to 30 minutes
G0397	Alcohol and/or substance (other than tobacco) abuse structured assessment (e.g., audit, DAST), and intervention, greater than 30 minutes
G0442	Annual alcohol misuse screening, 15 minutes
G0459	Inpatient telehealth pharmacologic management
S5110	Home care training, family; per 15 minutes

- Effective for dates of service January 1, 2014 the modifier GT (Telemedicine – Via Interactive audio/video) has been added to the following CPT codes:

<b>Code</b>	<b>Description</b>
90791	Psychiatric diagnostic evaluation
90792	Psychiatric diagnostic evaluation with medical services
90832	Psychotherapy, 30 minutes
99356	Prolonged inpatient or observation hospital service first hour
99441*	Physician telephone patient service, 5-10 minutes of medical discussion
99442*	Physician telephone patient service, 11-20 minutes of medical discussion
99443*	Physician telephone patient service, 21-30 minutes of medical discussion

Note:\*99441, 99442, and 99443 the modifier GT was not added to RF121.

- Effective for the dates of service listed below the following modifiers have been added to the Reference Screens listed below.

<b>Code</b>	<b>Description</b>	<b>Modifier</b>	<b>Effective Date</b>
H0038	Self-Help/Peer Services, Per 15 Minutes	HQ – Group Setting	01/01/2017
H0038	Self-Help/Peer Services, Per 15 Minutes	GT - Telemedicine – Via Interactive Audio/Video	10/01/2016
H2011	Crisis Intervention Service, Per 15 Minutes	HT - Multi-Disciplinary Team	01/01/2017
H2014	Crisis Intervention Service, Per 15 Minutes	GT - Multi-Disciplinary Team Telemedicine – Via Interactive Audio/Video	01/01/2017

- Effective for dates of service listed below, the following CPT/HCPCS codes can be reported with the following modifiers.

<b>Code</b>	<b>Description</b>	<b>Modifier</b>	<b>Effective Begin Date</b>
42440	Excision of submandibular (submaxillary) gland	50 – Bilateral Procedure	01/01/2017
42665	Ligation salivary duct, intraoral	50 – Bilateral Procedure	01/01/2017
43274	Placement of stent pancreatic or bile duct using an endoscope	22 - Unusual Procedural Services	05/01/2016
43274	Placement of stent pancreatic or bile duct using an endoscope	52 – Reduced Services	05/01/2016
50432	Placement of Nephrostomy Catheter, Percutaneous	LT – Identifies Left Side Body	01/01/2016
50432	Placement of Nephrostomy Catheter, Percutaneous	RT – Identifies Right Side Body	01/01/2016
50435	Exchange Nephrostomy Catheter, Percutaneous	LT – Identifies Left Side Body	01/01/2016
50435	Exchange Nephrostomy Catheter, Percutaneous	RT – Identifies Right Side Body	01/01/2016
92979	Ultrasound evaluation of heart blood vessel or graft	LD – Left Anterior Descending	01/01/2017
93926	Duplex Scan of Lower Extremity Arteries	LT – Identifies Left Side Body	01/01/2017
93926	Duplex Scan of Lower Extremity Arteries	RT – Identifies Right Side Body	01/01/2017
J0881	Injection, Darbepoetin Alfa, 1 Microgram (Non-ESRD Use)	EA - ESA, Anemia, Chemo-Induced	01/01/2017
J0881	Injection, Darbepoetin Alfa, 1 Microgram (Non-ESRD Use)	EB - ESA, Anemia, Radio-Induced	01/01/2017
J0881	Injection, Darbepoetin Alfa, 1 Microgram (Non-ESRD Use)	EC - ESA, Anemia, Non-Chemo/Radio	01/01/2017
J0882	Injection, Darbepoetin Alfa, 1 Microgram (For ESRD On Dialysis)	EA - ESA, Anemia, Chemo-Induced	01/01/2017
J0882	Injection, Darbepoetin Alfa, 1 Microgram (For ESRD On Dialysis)	EB - ESA, Anemia, Radio-Induced	01/01/2017
J0882	Injection, Darbepoetin Alfa, 1 Microgram (For ESRD On Dialysis)	EC - ESA, Anemia, Non-Chemo/Radio	01/01/2017

J0883	Injection, Argatroban, 1 mg (For Non-ESRD Use)	EA - ESA, Anemia, Chemo-Induced	01/01/2017
J0883	Injection, Argatroban, 1 mg (For Non-ESRD Use)	EB - ESA, Anemia, Radio-Induced	01/01/2017
J0883	Injection, Argatroban, 1 mg (For Non-ESRD Use)	EC - ESA, Anemia, Non-Chemo/Radio	01/01/2017
J0884	Injection, Argatroban, 1 mg (For ESRD On Dialysis)	EA - ESA, Anemia, Chemo-Induced	01/01/2017
J0884	Injection, Argatroban, 1 mg (For ESRD On Dialysis)	EB - ESA, Anemia, Radio-Induced	01/01/2017
J0884	Injection, Argatroban, 1 mg (For ESRD On Dialysis)	EC - ESA, Anemia, Non-Chemo/Radio	01/01/2017
J0885	Injection, Epoetin Alfa, (For Non-ESRD Use), 1000 Units	EA - ESA, Anemia, Chemo-Induced	01/01/2017
J0885	Injection, Epoetin Alfa, (For Non-ESRD Use), 1000 Units	EB - ESA, Anemia, Radio-Induced	01/01/2017
J0885	Injection, Epoetin Alfa, (For Non-ESRD Use), 1000 Units	EC - ESA, Anemia, Non-Chemo/Radio	01/01/2017
J0887	Injection, Epoetin Beta, 1 Microgram, (For ESRD On Dialysis)	EA - ESA, Anemia, Chemo-Induced	01/01/2017
J0887	Injection, Epoetin Beta, 1 Microgram, (For ESRD On Dialysis)	EB - ESA, Anemia, Radio-Induced	01/01/2017
J0887	Injection, Epoetin Beta, 1 Microgram, (For ESRD On Dialysis)	EC - ESA, Anemia, Non-Chemo/Radio	01/01/2017
J0888	Injection, Epoetin Beta, 1 Microgram, (For Non Esrd Use)	EA - ESA, Anemia, Chemo-Induced	01/01/2017
J0888	Injection, Epoetin Beta, 1 Microgram, (For Non Esrd Use)	EB - ESA, Anemia, Radio-Induced	01/01/2017
J0888	Injection, Epoetin Beta, 1 Microgram, (For Non Esrd Use)	EC - ESA, Anemia, Non-Chemo/Radio	01/01/2017

**Place of Service (POS)**

Effective for the listed dates of service the following HCPCS/CPT codes can now be reported.

<b>Code</b>	<b>Description</b>	<b>Place of Service</b>	<b>Effective Beginning Date</b>
G9678	Oncology Care Model (OCM) Monthly Enhanced Oncology Services	19 – Off Campus-Outpatient Hospital	01/01/2017
J7297	Levonorgestrel-Releasing Intrauterine Contraceptive System	21 – Inpatient Hospital	10/01/2016
J7298	Levonorgestrel-Releasing Intrauterine Contraceptive System	21 – Inpatient Hospital	10/01/2016
11771	Excision of Pilonidal Cyst or Sinus; Extensive	11 - Office	01/01/2017
19330	Removal Of Mammary Implant Material	11 – Office	07/01/2017
25260	Repair Of Tendon Or Muscle Of Forearm And/Or Wrist	11 – Office	01/01/2017
25606	Percutaneous Skeletal Fixation of Distal Radial Fracture	23 – Emergency Room – Hospital	01/01/2017
37246	Transluminal Balloon Angioplasty (Except Lower Extremity)	24 - Ambulatory Surgical Center	07/01/2017
47379	Unlisted Laparoscopic Procedure, Liver	24 – Ambulatory Surgical Center	01/01/2017
73502	Radiologic Examination, Hip, Unilateral	19 – Off Campus-Outpatient Hospital	01/01/2016
73552	Radiologic Examination, Femur; Minimum 2 View	19 – Off Campus-Outpatient Hospital	01/01/2016
96150	Health & Behavior Assessment Each 15 Minutes	19 – Off Campus-Outpatient Hospital	09/01/2017
96151	Health And Behavior Re-Assessment Each 15 Minutes	19 – Off Campus-Outpatient Hospital	09/01/2017
96152	Health And Behavior Intervention, Individual Each 15 Minutes	19 – Off Campus-Outpatient Hospital	09/01/2017
96153	Health And Behavior Intervention, Group Each 15 Minutes	19 – Off Campus-Outpatient Hospital	09/01/2017
96154	Health And Behavior Intervention, Family & Patient Each 15 Minutes	19 – Off Campus-Outpatient Hospital	09/01/2017
96155	Health And Behavior Intervention, Family Each 15 Minutes	19 – Off Campus-Outpatient Hospital	09/01/2017

