



ENCOUNTER KEYS

September-October, 2018

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Age Change

- The age limit on RF161 for ICD-10 has changed for the code 0UT54ZZ (Resection of Right Fallopian Tube) to 000Y-999Y.
- The minimum age has been changed for the CPT code 90686 (Vaccine for Influenza for Administration into Muscle) to 000Y.
- **Coverage Code Change**
 - Effective for January 1, 2018 the coverage code for the HCPCS code T1013 (Sign Language or Oral Interpretive Services, Per 15 Minutes) has been changed to 02 (Not Covered Service/Code Available).
 - Effective for October 1, 2015 the ICD-10 AHCCCS Coverage code has been changed to 01 (Covered Service/Code Available) for 02RF38Z (Replacement of Aortic Valve with Zooplastic).

Codes End Dated

Effective for the dates listed below the following CPT and or HCPCS codes have been

Code	Description	Effective Ending Date	Screen
0008M	Oncology (Breast), MRNA Analysis Of 58 Genes Using Hybrid Capture, On Formalin-Fixed Paraffin-Embedded (FFPE) Tissue, Prognostic Algorithm Reported As A Risk Score	12/31/2017	RF123
G9890	Dilated Macular Exam Performed, Including Documentation Of The Presence Or Absence Of Macular Thickening Or Geographic Atrophy Or Hemorrhage And The Level Of Macular Degeneration Severity	01/01/2018	RF123
G9891	Documentation Of Medical Reason(s) For Not Performing A Dilated Macular Examination	01/01/2018	RF123
C9469	Injection, Aripiprazole Lauroxil, 1 mg	06/30/2018	RF123

Codes

Effective for April 1, 2018 the following codes have been added to the PMMIS system. For additional code information refer to the appropriate PMMIS reference screens.

CPT/ HCPCS Code	Description
G9873	First Medicare diabetes Prevention Program (MDPP) core session was attended by an MDPP beneficiary under the MDPP Expanded Model (EM). A core session is an MDPP service that: (1) is furnished by an MDPP supplier during months 1 through 6 of the MDPP services period, (2) is approximately 1 hour in length; and (3) adheres to a CDC-approved DPP curriculum for core sessions
G9874	Four total Medicare Diabetes Prevention Program (MDPP) core sessions were attended by an MDPP beneficiary under the MDPP Expanded Model (EM). A core session is an MDPP service that: (1) is furnished by an MDPP supplier during months 1 through 6 of the MDPP service period; (2) is approximately 1 hour in length; and (3) adheres to a CDC-approved DPP curriculum for core sessions
G9875	Nine total Medicare Diabetes Prevention Program (MDPP) core sessions were attended by an MDPP beneficiary under MDPP Expanded Model (EM). A core session is an MDPP service that: (1) is furnished by an MDPP supplier during months 1 through 6 of MDPP services period; (2) is approximately 1 hour in length; and (3) adheres to a CDC-approved DPP curriculum for core sessions.
G9876	Two Medicare Diabetes Prevention Program (MDPP) core maintenance sessions (MS) were attended by an MDPP beneficiary in months (mo.) 7-9 under the MDPP Expanded Model (EM). A core maintenance session is an MDPP service that: (1) is furnished by an MDPP supplier during months 7 through 12 of the MDPP service period; (2) is approximately 1 hour in length; (3) adheres to a CDC-approved DPP curriculum for maintenance sessions. The beneficiary did not achieve at least 5% weight loss (WL) from his/her baseline weight, as measured by at least one in-person weight measurement at a core maintenance session in months 7-9
G9877	Two Medicare Diabetes Prevention Program (MDPP) core maintenance sessions (MS) were attended by an MDPP beneficiary in months (mo.) 10-12 under the MDPP Expanded Model (EM). A core maintenance session is an MDPP service that: (1) is furnished by an MDPP supplier during months 7 through 12 of the MDPP services period; (2) is approximately 1 hour in length; and (3) adheres to a CDC-approved DPP curriculum for maintenance sessions. The beneficiary did not achieve at least 5% weight loss (WL) from his/her baseline weight, as measured by at least one in-person weight measurement at a core maintenance session in months 10-12
G9878	Two Medicare Diabetes Prevention Program (MDPP) core maintenance sessions (MS) were attended by an MDPP beneficiary in months (mo.) 7-9 under the MDPP Expanded Model (EM). A core maintenance session is an MDPP service that: (1) is furnished by an MDPP supplier during months 7 through 12 of the MDPP services period; (2) is approximately 1 hour in length; and (3) adheres to a CDC approved DPP curriculum for maintenance sessions. the beneficiary achieved at least 5% weight loss (WL) from his/her baseline weight as measured by at least one in-person weight measurement at a core maintenance session in months 7-9
G9879	Two Medicare Diabetes Prevention Program (MDPP) core maintenance sessions (MS) were attended by an MDPP beneficiary in months (mo.) 10-12 under the MDPP Expanded Model (EM). A core maintenance session is an MDPP service that: (1) is furnished by an MDPP supplier during months 7 through 12 of the MDPP services period; (2) is approximately 1 hour in length; (3) adheres to a CDC-approved DPP curriculum for maintenance sessions. The beneficiary achieved at least 5% weight loss (WL) from his/her baseline weight, as measured by at least one in-person weight measurement at a core maintenance session in months 10-12
G9880	The MDPP beneficiary achieved at least 5% weight loss (WL) from his/her baseline weight in months 1-12 of the MDPP services period under the MDPP Expanded Model (EM). This is a one-time payment available when a beneficiary first achieves at least 5% weight loss from baseline as measured by an in-person weight measurement at a core session or core maintenance session

G9881	The MDPP beneficiary achieved at least 9% weight loss (WL) from his/her baseline weight in months 1-24 under the MDPP Expanded Model (EM). This is a one-time payment available when a beneficiary first achieves at least 9% weight loss from baseline as measured by an in-person weight measurement at a core session, core maintenance session, or ongoing maintenance session.
G9882	Two Medicare Diabetes Prevention Program (MDPP) ongoing maintenance sessions (MS) were attended by an MDPP beneficiary in months (mo.) 13-15 under the MDPP Expanded Model (EM). An ongoing maintenance session is an MDPP service that: (1) is furnished by an MDPP supplier during months 13 through 24 of the MDPP services period; (2) is approximately 1 hour in length; and (3) adheres to a CDC-approved DPP curriculum for maintenance sessions. The beneficiary maintained at least 5% weight loss (WL) from his/her baseline weight, as measured by at least one in-person weight measurement at an ongoing maintenance session in months 13-15
G9883	Two Medicare Diabetes Prevention Program (MDPP) ongoing maintenance sessions (MS) were attended by an MDPP beneficiary in months (mo.) 16-18 under the MDPP Expanded Model (EM). An ongoing maintenance session is an MDPP service that: (1) is furnished by an MDPP supplier during months 13 through 24 of the MDPP services period; (2) is approximately 1 hour in length; and (3) adheres to a CDC-approved DPP curriculum for maintenance sessions. The beneficiary maintained at least 5% weight loss (WL) from his/her baseline weight, as measured by at least one in-person weight measurement at an ongoing maintenance session in months 16-18
G9884	Two Medicare Diabetes Prevention Program (MDPP) ongoing maintenance sessions (MS) were attended by an MDPP beneficiary in months (mo.) 19-21 under the MDPP Expanded Model (EM). An ongoing maintenance session is an MDPP service that: (1) is furnished by an MDPP supplier during months 13 through 24 of the MDPP services period; (2) is approximately 1 hour in length; and (3) adheres to a CDC-approved DPP curriculum for maintenance sessions. The beneficiary maintained at least 5% weight loss (WL) from his/her baseline weight, as measured by at least one in-person weight measurement at an ongoing maintenance session in months 19-21
G9885	Two Medicare Diabetes Prevention Program (MDPP) ongoing maintenance sessions (MS) were attended by an MDPP beneficiary in months (mo.) 22-24 under the MDPP Expanded Model (EM). An ongoing maintenance session is an MDPP service that: (1) is furnished by an MDPP supplier during months 13 through 24 of the MDPP services period; (2) is approximately 1 hour in length; and (3) adheres to a CDC-approved DPP curriculum for maintenance sessions. The beneficiary maintained at least 5% weight loss (WL) from his/her baseline weight, as measured by at least one in-person weight measurement at an ongoing maintenance session in months 22-24
G9890	Bridge Payment: A one-time payment for the first Medicare Diabetic Prevention Program (MDPP) core session, core maintenance session, or ongoing maintenance session furnished by an MDPP supplier to an MDPP beneficiary during months 1-24 of the MDPP Expanded Model (EM) who has previously received MDPP services from a different MDPP supplier under the MDPP Expanded Model. A supplier may only receive one bridge payment per MDPP beneficiary
G9891	MDPP session reported as a line-item on a claim for a payable MDPP Expanded Model (EM) HCPCS code for a session furnished by the billing supplier under the MDPP Expanded Model and counting toward achievement of the attendance performance goal for the payable MDPP Expanded Model HCPCS code. (This code is for reporting purposes only).
K0903	For Diabetics only, multiple density insert, made by direct carving with CAM technology from a rectified CAD model created from a digitized scan of the patient, total contact with patient's foot, including arch, base layer minimum of 3/16 inch material for shore A 35 durometer (or hight), includes arch filler and other shaping material, custom fabricated, each
Q2041	Axicabtagene Ciloleucel, up to 200 million autologous anti -CD19 CAR T cells, including leukapheresis and dose preparation procedures, per infusion
Q5103	Injection, infliximab-DYYB, biosimilar, (inflectra), 10 mg
Q5104	Injection, infliximab-ABDA, biosimilar, (renflexis), 10 mg

Modifiers

- Effective for date of service January 1, 2018 the modifier U8 (Governor's Office Substance Use Disorder) has had the description changed, and the end date is now 99/99/99.
- Effective for dates of service on or after January 1, 2017 the following modifiers (found on the right side) have been added to RF122 and RF132 for all the codes listed (on the left side of the page).

Code	Description	Modifier	Description
A0021	Ambulance Service, Outside State Per Mile, Transport (Medicaid Only)	DD	Powdered Enteral Supplies
A0080	Non-Emergency Transportation, Per Mile - Vehicle Provided By Volunteer (Individual Or Organization), With No Vested Interest	DE	Diagnostic Or Therapeutic Site
A0090	Non-Emergency Transportation, Per Mile - Vehicle Provided By Individual (Family Member, Self, Neighbor) With Vested Interest	DG	Diagnostic Or Therapeutic Site Other
A0100	Non-Emergency Transportation; Taxi	DH	Amb. Trip From Diag/Thera. Site To Hospital
A0110	Non-Emergency Transportation And Bus, Intra Or Inter State Carrier	DI	Diagnostic Or Therapeutic Site Other
A0120	Non-Emergency Transportation: Mini-Bus, Mountain Area Transports,	DJ	Diagnostic Or Therapeutic Site Other
A0130	Non-Emergency Transportation: Wheelchair Van	DN	Diagnostic Or Therapeutic Site Other
A0140	Non-Emergency Transportation And Air Travel (Private Or Commercial)	DP	Diagnostic Or Therapeutic Site Other
A0160	Non-Emergency Transportation: Per Mile - Case Worker Or Social Worker	DR	Diagnostic Or Therapeutic Site Other
A0170	Transportation Ancillary: Parking Fees, Tolls, Other	DX	Diagnostic Or Therapeutic Site Other
A0180	Non-Emergency Transportation: Ancillary: Lodging-Recipient	ET	Emergency Treatment
A0190	Non-Emergency Transportation: Ancillary: Meals-Recipient	GD	Unit Of Service > Mue Value
A0200	Non-Emergency Transportation: Ancillary: Lodging Escort	GP	Svs Delivered Under Op Phys Therapy
A0210	Non-Emergency Transportation: Ancillary: Meals-Escort	HE	Amb Hsp 2 Ecf/Mental Hth Program
A0225	Ambulance Service, Neonatal Transport, Base Rate, Emergency Transport, One Way	HS	Family/Couple Without Client Present
A0380	BLS Mileage (Per Mile)	ID	Site Of Transfer (E.G., Airport, Ferry,
A0382	BLS Routine Disposable Supplies	JD	Skin Substitute Not Used As A Graft
A0384	BLS Specialized Service Disposable Supplies; Defibrillation (Used By ALS Ambulances And BLS Ambulances In Jurisdictions Where Defibrillation Is Permitted In BLS Ambulances)	ND	Amb Trip Snf To Dx/Tx Site Not "P Or "F"
A0390	ALS Mileage (Per Mile)	PG	Phys. Office To Hosp Based Esrd Facility

A0392	ALS Specialized Service Disposable Supplies; Defibrillation (To Be Used Only In Jurisdictions Where Defibrillation Cannot Be Performed In BLS Ambulances)		PS	Positron Emission_Subsequent Treatment
A0394	ALS Specialized Service Disposable Supplies; Iv Drug Therapy		RD	Drug Admin Not Incident-To
A0396	ALS Specialized Service Disposable Supplies; Esophageal Intubation		SD	Svs Prov By Reg Nurse With Spec High Tec
A0398	ALS Routine Disposable Supplies		SP	NH/SNF Visit Single Pt (Use 90300-90470)
A0420	Ambulance Waiting Time (ALS Or BLS), One Half (1/2) Hour Increment			
A0422	Ambulance (ALS Or BLS) Oxygen And Oxygen Supplies, Life Sustaining Situation			
A0424	Extra Ambulance Attendant, Ground (ALS Or BLS) Or Air (Fixed Or Rotary Winged); (Requires Medical Review)			
A0426	Ambulance Service, Advanced Life Support, Non-Emergency Transport, Level 1 (ALS 1)			
A0427	Ambulance Service, Advanced Life Support, Emergency Transport, Level 1 (ALS 1 - Emergency)			
A0428	Ambulance Service, Basic Life Support, Non-Emergency Transport, (BLS)			
A0429	Ambulance Service, Basic Life Support, Emergency Transport (BLS-Emergency)			
A0430	Ambulance Service, Conventional Air Services, Transport, One Way (Fixed Wing)			
A0431	Ambulance Service, Conventional Air Services, Transport, One Way			
A0432	Paramedic Intercept (PI), Rural Area, Transport Furnished By A Volunteer Ambulance Company Which Is Prohibited By State Law From Billing Third Party Payers			
A0433	Advanced Life Support, Level 2 (ALS 2)			
A0434	Specialty Care Transport (SCT)			
A0435	Fixed Wing Air Mileage, Per Statute Mile			
A0436	Rotary Wing Air Mileage, Per Statute Mile			
A0888	Non-covered Ambulance Mileage, Per Mile (e.g., for Miles Traveled Beyond Closest Appropriate Facility)			
A0998	Ambulance Response And Treatment, No Transport			

- Effective for dates of service on or after October 1, 2017 the modifiers Q5 (RECIP BILL ARR SUBS MD OR PT) and Q6 (FEE/TIME COMP SUBST MD OR PT) have been added to the CPT code 59514 (Cesarean Delivery Only) for RF122 and RF132.
- Effective for dates of service on or after July 1, 2017 the following HCPCS codes have modifiers Q5 (RECIP BILL ARR SUBS MD OR PT) and Q6 (FEE/TIME COMP SUBST MD OR PT) added along with the new definitions on their respective screens (RF121, RF122 and RF132).

Code	Description	Code	Description
22854	Insertion Of Device Into Gap Left By Removal Of Part Of Vertebra	90686	Vaccine For Influenza for Administration Into Muscle, 0.5 ML
70140	X-Ray Of Bones Of Face, Less Than 3 Views	90700	Vaccine For Diphtheria, Tetanus, And Acellular Pertussis
71020	X-Ray Of Chest, 2 Views, Front And Side	90707	Vaccine For Measles, Mumps, And Rubella (German Measles)
72040	X-Ray Of Spine Of Neck, 2 Or 3 Views	90713	Vaccine For Polio Injection Beneath The Skin Or Into Muscle
72050	X-Ray Of Upper Spine, 4 Or 5 Views	90715	Vaccine For Tetanus, Diphtheria Toxoids And Acellular Pertussis
72070	X-Ray Of Middle Spine, 3 Views	90716	Vaccine For Varicella (Chicken Pox) Injection Beneath Skin
72072	X-Ray Of Middle Spine, 3 Views	90733	Vaccine For Meningococcus For Injection Beneath Skin
72082	X-Ray Of Spine, 2 Or 3 Views	90734	Vaccine For Meningococcus For Administration Into Muscle
72100	X-Ray Of Lower And Sacral Spine, 2 Or 3 Views	90744	Vaccine For Hepatitis B (3 Dose Schedule) For Injection Into Muscle
72110	X-Ray Of Lower And Sacral Spine, Minimum Of 4 Views	92551	Air Tone Conduction Hearing Assessment Screening
72131	Ct Scan Of Lower Spine	93925	Ultrasound Study Of Arteries And Arterial Grafts Of Both Legs
72195	MRI Scan Of Pelvis	93975	Ultrasound Scan Of Abdominal, Pelvic, And/Or Scrotal Arterial
73030	X-Ray Of Shoulder, Minimum Of 2 Views	95004	Injection Of Allergenic Extracts Into Skin,
73130	X-Ray Of Hand, Minimum Of 3 Views	95115	Injection Of Incremental Dosages Of Allergen
73502	X-Ray Of Hip With Pelvis, 2-3 Views	95117	Injection Of Incremental Dosages Of Allergen, 2 Or More Injection
73521	X-Ray Of Both Hips With Pelvis, 2 Views	96110	Developmental Screening

73522	X-Ray Of Both Hips With Pelvis, 3-4 Views		96160	Administration And Interpretation Of Patient-Focused Health Risk
73560	X-Ray of Knee, 1 or 2 Views		96372	Injection Beneath The Skin Or Into Muscle For Therapy,
73562	X-Ray of Knee, 3 Views		99000	Handling and/or Conveyance Of Specimen For Transfer From Physician Office To Laboratory
73610	X-Ray of Ankle, Minimum of 3 Views		99173	Eye Chart Testing Of Visual Acuity Of Both Eyes
74000	X-Ray Of Abdomen, Single View		99202	New Patient Office Or Other Outpatient Visit, Typically 20 Minutes
74020	Imaging Of Abdomen		99203	New Patient Office Or Other Outpatient Visit, Typically 30 Minutes
76536	Ultrasound Of Head And Neck		99204	New Patient Office Or Other Outpatient Visit, Typically 45 Minutes
76642	Ultrasound Of One Breast		99205	New Patient Office Or Other Outpatient Visit, Typically 60 Minutes
76700	Ultrasound Of Abdomen		99212	Established Patient Office Or Other Outpatient Visit, Typically 10 Minutes
76705	Ultrasound Of Abdomen		99213	Established Patient Office Or Other Outpatient Visit, Typically 15 Minutes
76770	Ultrasound Behind Abdominal Cavity		99214	Established Patient Office Or Other Outpatient, Visit Typically 25 Minutes
76775	Ultrasound Behind Abdominal Cavity, Limited		99215	Established Patient Office Or Other Outpatient, Visit Typically 40 Minutes
76817	Ultrasound, Pregnant Uterus		99232	Subsequent Hospital Inpatient Care, Typically 25 Minutes Per Day
76830	Ultrasound Pelvis Through Vagina		99238	Hospital Discharge Day Management, 30 Minutes Or Less
76856	Ultrasound Of Pelvis		99281	Emergency Department Visit, Self Limited or Minor Problem
76857	Ultrasound Of Pelvis		99282	Emergency Department Visit, Low to Moderately Severe Problem
76870	Ultrasound Of Scrotum		99283	Emergency Department Visit, Moderately Severe Problem
77014	Ct Scan Guidance For Insertion Of Radiation Therapy Fields		99284	Emergency Department Visit, Problem of High Severity
77066	Mammography Of Both Breasts		99291	Critical Care Delivery Critically Ill Or Injured Patient, First 30-74 Minutes
77067	Mammography Of Both Breasts		99381	Initial New Patient Preventive Medicine Evaluation, Infant Younger Than 1 Year
77080	Bone Density Measurement Using Dedicated X-Ray Machine		99382	Initial New Patient Preventive Medicine Evaluation, Age 1 Through 4 Years
81002	Urinalysis, Manual Test		99383	Initial New Patient Preventive Medicine Evaluation, Age 5 Through 11 Years
87804	Infectious Agent Antigen Detection by Immunoassay		99384	Initial New Patient Preventive Medicine Evaluation, Age 12 Through 17 Years

87880	Infectious Agent Antigen Detection by Immunoassay with		99391	Established Patient Periodic Preventive Medicine Examination Infant Younger Than 1 Year
90471	Administration of 1 Vaccine		99392	Established Patient Periodic Preventive Medicine Examination, Age 1 Through 4 Years
90472	Administration of Vaccine		99393	Established Patient Periodic Preventive Medicine Examination, Age 5 Through 11 Years
90474	Administration of Nasal or Oral Vaccine		99394	Established Patient Periodic Preventive Medicine Examination Age 18-39 Years
90621	Vaccine for Meningococcus For Injection Into Muscle		G0202	Screening Mammography, Bilateral (2-View Study Of Each Breast),
90633	Vaccine for Hepatitis A (2 Dose Schedule)		G0204	Diagnostic Mammography, Including Computer-Aided Detection (CAD)
90648	Vaccine for Hemophilus Influenza B		G0206	Diagnostic Mammography, Including Computer-Aided Detection (CAD)
90649	Vaccine For Human Papilloma Virus (3 Dose Schedule) Injection Into Muscle		G6015	Intensity Modulated Treatment Delivery, Single Or Multiple Fields
90651	Vaccine For Human Papilloma Virus (3 Dose Schedule) Injection Into Muscle		J0696	Injection, Ceftriaxone Sodium, Per 250 Mg
90655	Vaccine For Influenza For Administration Into Muscle, 0.25 Ml Dosage		J3490	Unclassified Drugs
90670	Pneumococcal Vaccine For Injection Into Muscle		J7609	Albuterol, Inhalation Solution, Compounded Product, Administered
90680	Vaccine For Rotavirus (3 Dose Schedule) For Oral Administration		J7613	Albuterol, Inhalation Solution, FDA-Approved Final Product,
90685	Vaccine For Influenza For Administration Into Muscle, 0.25 Ml Dos			

- Effective for the dates listed below the following modifiers have been added to the system.

Code	Description	Modifier	Effective Begin Date	Reference Screens
01999	Unlisted Anesthesia Procedure(s)	AA - Anesthesia Services performed Personally By An Anesthesiologist	1/1/2018	RF122; RF132
25545	Open Treatment of Broken Forearm Bone	SG – Ambulatory Surgical Center	10/01/08	
35045	Repair Of Diseased Or Bulging (Aneurysm) Artery Of Forearm	SG – Ambulatory Surgical Center (ASC) Facility	6/1/2017	RF121, RF122; RF132
36223	Insertion Of Catheter Into Artery On One Side Of Neck For Diagnosis Or Treatment Including Radiological Supervision And Interpretation	50 - Bilateral Procedure (Pay 50%)	1/1/2018	RF121
50432	Placement of Catheter of Kidney, Accessed Through The Skin Using Imaging Guidance With Radiological Supervision And Interpretation	50 – Bilateral Procedure (Pay 50%)	6/1/2017	RF121
59514	Cesarean Delivery	Q5 - Recip Bill Arr Subs Md Or Pt	10/1/2017	RF122; RF132
59514	Cesarean Delivery	Q6 - Fee/Time Comp Subst MD Or PT	10/1/2017	RF122; RF132
64561	Insertion of Sacral Nerve Neurostimulator Electrodes, Accessed Through The Skin	50 – Bilateral Procedure (Pay 50%)	10/1/2016	RF121; RF122; RF132
70540	Magnetic Resonance (e.g., proton) Imaging, Orbit, Face	LT -Identifies Left Side Body	6/1/2017	RF121
70540	Magnetic Resonance (e.g., proton) Imaging, Orbit, Face	RT -Identifies Right Side Body	6/1/2017	RF121
77080	Bone Density Measurement Using Dedicated X-Ray Machine	FY - X-Ray Taken Using Computed Radiography	1/1/2018	RF122
93010	Routine Electrocardiogram (EKG) Using At Least 12 Leads With Interpretation And Report	Q5 - Recip Bill Arr Subs Md Or Pt	7/1/2017	RF121, RF122; RF132
93010	Routine Electrocardiogram (EKG) Using At Least 12 Leads With Interpretation And Report	Q6 - Fee/Time Comp Subst MD Or PT	7/1/2017	RF121, RF122; RF132

95886	Needle Measurement And Recording Of Electrical Activity Of Muscles Of Arm Or Leg Complete Study	Q5 - Recip Bill Arr Subs Md Or Pt	7/1/2017	RF122; RF132
95886	Needle Measurement And Recording Of Electrical Activity Of Muscles Of Arm Or Leg Complete Study	Q6 - Fee/Time Comp Subst MD Or PT	7/1/2017	RF122; RF132
95911	Nerve Transmission Studies, 9-10 Studies	Q5 - Recip Bill Arr Subs Md Or Pt	7/1/2017	RF122; RF132
95911	Nerve Transmission Studies, 9-10 Studies	Q6 - Fee/Time Comp Subst MD Or PT	7/1/2017	RF122; RF132
99220	Hospital Observation Care, Typically 70 Minutes	Q5 - Recip Bill Arr Subs Md Or Pt	7/1/2017	RF121, RF122; RF132
99220	Hospital Observation Care, Typically 70 Minutes	Q6 - Fee/Time Comp Subst MD Or PT	7/1/2017	RF121, RF122; RF132
99285	Emergency Department Visit, Problem With Significant Threat To Life Or Function	Q5 - Recip Bill Arr Subs Md Or Pt	7/1/2017	RF121, RF122; RF132
99285	Emergency Department Visit, Problem With Significant Threat To Life Or Function	Q6 - Fee/Time Comp Subst MD Or PT	7/1/2017	RF121, RF122; RF132
A0428	Ambulance Service, Basic Life Support, Non-Emergency	DN - Diagnostic/Therapeutic Site Other Than P/H To A Skilled Nursing Facility (SNF)	1/1/2017	RF122; RF132
J9355	Injection, Trastuzumab, 10 mg	59 – Distinct Procedural	1/1/2017	RF122; RF132

End Date of Modifiers

The modifiers listed below have had the end dated changed to 99/99/99.

1P - Performance Measure Excl. Medical Reason

2P - Performance Measure Excl. Pt. Choice

3P - Performance Measure Excl.Mod. System Reason

MUE Units

The units for the HCPCS Code A4913 (Miscellaneous Dialysis Supplies, Not Otherwise Specified) has been changed to one (1).



Place of Service (POS)

Effective for the dates of service listed, the following codes now have additional POS added.

Code	Description	POS	Effective Begin Date
00731	Anesthesia for Upper Gastrointestinal Endoscopic Procedure	11 – Office	01/01/18
00811	Anesthesia For Procedure On Large Bowel Using An Endoscope	11-Office	01/01/18
00812	Anesthesia For Diagnostic Examination Of Large Bowel Using An Endoscope	11-Office	01/01/18
00813	Anesthesia For Procedure On Esophagus, Stomach, Small Bowel, and/or Large Bowel Using An Endoscope	11-Office	01/01/18
1500	Anesthesia For Procedure On Arteries Of Lower Leg Including Bypass Graft	11 – Office	10/01/17
0364T	Behavior Treatment By Protocol Administered By Technician First 30 Minutes	99 – Other Unlisted Facility	01/01/18
0365T	Behavior Treatment By Protocol Administered By Technician Each Additional 30 Minutes	99 – Other Unlisted Facility	01/01/18
0366T	Group Behavior Treatment By Protocol Administered By Technician First 30 Minute	99 – Other Unlisted Facility	01/01/18
0367T	Group Behavior Treatment By Protocol Administered By Technician Each Additional 30 Minutes	99 – Other Unlisted Facility	01/01/18
0368T	Behavior Treatment With Protocol Modification Administered By Physician Or Other Qualified Health Care Professional First 30 Minutes	99 – Other Unlisted Facility	01/01/18
0369T	Behavior Treatment With Protocol Modification Administered By Physician Or Other Qualified Health Care Professional Each Additional 30 Minutes	99 – Other Unlisted Facility	01/01/18
0370T	Family Behavior Treatment Guidance Administered By Physician	99 – Other Unlisted Facility	01/01/18
0371T	Multiple-Family Group Behavior Treatment Guidance Administered By Physician Or Other Qualified Health Care Professional	99 – Other Unlisted Facility	01/01/18
0372T	Behavior Treatment Social Skills Group Administered By Physician Or Other Qualified Health Care Professional	99 – Other Unlisted Facility	01/01/18
11044	Removal Of Skin And Bone First 20 Sq. Cm Or Less	31 – Skilled Nursing Facility	10/01/17

15272	Application Of Skin Substitute (Wound Surface Up To 100 Sq. Cm) To Trunk, Arms Or Legs	11 – Office	01/01/18
22514	Injection Of Bone Cement Into Body Of Lower Spine Bone Accessed Through The Skin Using Imaging Guidance	24 - Ambulatory Surgical Center	01/01/17
22515	Injection Of Bone Cement Into Body Of Middle Or Lower Spine Bone Accessed Through The Skin Using Imaging Guidance	24 - Ambulatory Surgical Center	01/01/17
27447	Repair Of Knee Joint	19 – Off Campus-Outpatient Hospital	01/01/18
27447	Repair Of Knee Joint	22 – Outpatient Hospital	01/01/18
28446	Open Osteochondral Autograft, Talus	22 – Outpatient Hospital	06/01/17
35045	Repair Of Diseased Or Bulging (Aneurysm) Artery Of Forearm	24 – – Ambulatory Surgical Center (ASC)	06/01/17
36465	Injection Of Chemical Agent Into Single Incompetent Vein Of Leg Using Ultrasound Guidance	11 – Office	01/01/18
36466	Injection Of Chemical Agent Into Multiple Incompetent Veins Of Same Leg Using Ultrasound Guidance	11 – Office	01/01/18
38222	Diagnostic Bone Marrow: Biopsy(ies) and Aspiration(s)	05 -Indian Health Service Free-Standing	01/01/18
38222	Diagnostic Bone Marrow: Biopsy(ies) and Aspiration(s)	06 - Indian Health Service Provider-Base	01/01/18
38222	Diagnostic Bone Marrow: Biopsy(ies) and Aspiration(s)	07 - Tribal 638 Free-Standing Facility	01/01/18
38222	Diagnostic Bone Marrow: Biopsy(ies) and Aspiration(s)	08 - Tribal 638 Provider-Based Facility	01/01/18
38222	Diagnostic Bone Marrow: Biopsy(ies) and Aspiration(s)	11 - Office	01/01/18
38222	Diagnostic Bone Marrow: Biopsy(ies) and Aspiration(s)	19 - Off Campus-Outpatient Hospital	01/01/18
38222	Diagnostic Bone Marrow: Biopsy(ies) and Aspiration(s)	21 - Inpatient Hospital	01/01/18
38222	Diagnostic Bone Marrow: Biopsy(ies) and Aspiration(s)	22 - Outpatient Hospital	01/01/18
38222	Diagnostic Bone Marrow: Biopsy(ies) and Aspiration(s)	23 - Emergency Room - Hospital	01/01/18
38222	Diagnostic Bone Marrow: Biopsy(ies) and Aspiration(s)	24 - Ambulatory Surgical Center	01/01/18
38222	Diagnostic Bone Marrow: Biopsy(ies) and Aspiration(s)	50 - Federally Qualified Health Center	01/01/18
38222	Diagnostic Bone Marrow: Biopsy(ies) and Aspiration(s)	72 - Rural Health Clinic	01/01/18
38222	Diagnostic Bone Marrow: Biopsy(ies) and Aspiration(s)	81 - Independent Laboratory	01/01/18
38222	Diagnostic Bone Marrow: Biopsy(ies) and Aspiration(s)	99 - Other Unlisted Facility	01/01/18

43282	Repair of Hernia of Muscle at Esophagus and Stomach with Implantation of Mesh Using an Endoscope	19 - Off Campus-Outpatient Hospital	06/01/17
43282	Repair of Hernia of Muscle at Esophagus and Stomach with Implantation of Mesh Using an Endoscope	22 - Outpatient Hospital	06/01/17
50432	Placement Of Catheter Of Kidney, Accessed Through The Skin Using Imaging Guidance With Radiological Supervision And Interpretation	23 – Emergency Room - Hospital	08/01/17
71045	Radiologic Examination, Chest; Single View	12 - Home	01/01/18
71045	Radiologic Examination, Chest; Single View	13 – Assisted Living Facility	01/01/18
71045	Radiologic Examination, Chest; Single View	32 – Nursing Facility	01/01/18
71045	Radiologic Examination, Chest; Single View	33 - Hospice Outpatient Hospital	01/01/18
71046	Radiologic Examination, Chest; 2 Views	12 - Home	01/01/18
71047	Radiologic Examination, Chest; 3 Views	13 – Assisted Living Facility	01/01/18
71048	Radiologic Examination, Chest; 4 Or More Views	32 – Nursing Facility	01/01/18
76942	Ultrasonic Guidance Imaging Supervision & Interpretation For Insertion Of Needle	81 – Independent Laboratory	07/01/17
96127	Brief Emotional Or Behavioral Assessment	14 – Group Home	01/01/17
96127	Brief Emotional Or Behavioral Assessment	15 – Mobile Unit	01/01/17
96160	Administration And Interpretation Of Patient-Focused Health Risk Assessment	14 – Group Home	01/01/17
96160	Administration And Interpretation Of Patient-Focused Health Risk Assessment	15 – Mobile Unit	01/01/17
96161	Administration And Interpretation Of Caregiver-Focused Health Risk Assessment	11 - Office	01/01/17
96161	Administration And Interpretation Of Caregiver-Focused Health Risk Assessment	12 - Home	01/01/17
96161	Administration And Interpretation Of Caregiver-Focused Health Risk Assessment	14 – Group Home	01/01/17
96161	Administration And Interpretation Of Caregiver-Focused Health Risk Assessment	15 – Mobile Unit	01/01/17
96372	Therapeutic, Prophylactic, or Diagnostic Injection	12 – Home	02/01/18
96372	Therapeutic, Prophylactic, or Diagnostic Injection	12 – Home	02/01/18

S0257	Counseling And Discussion Regarding Advance Directives Or End Of Life Care Planning And Decisions, With Patient and/or Surrogate (List Separately In Addition To Code For Appropriate Evaluation And Management Service)	06 - Indian Health Service Provider-Base	10/01/17
S0257	Counseling And Discussion Regarding Advance Directives Or End Of Life Care Planning And Decisions, With Patient and/or Surrogate (List Separately In Addition To Code For Appropriate Evaluation And Management Service)	07 - Tribal 638 Free-Standing Facility	10/01/17
S0257	Counseling And Discussion Regarding Advance Directives Or End Of Life Care Planning And Decisions, With Patient and/or Surrogate (List Separately In Addition To Code For Appropriate Evaluation And Management Service)	08 - Tribal 638 Provider-Based Facility	10/01/17
S0257	Counseling And Discussion Regarding Advance Directives Or End Of Life Care Planning And Decisions, With Patient and/or Surrogate (List Separately In Addition To Code For Appropriate Evaluation And Management Service)	19 - Off Campus-Outpatient Hospital	10/01/17
S0257	Counseling And Discussion Regarding Advance Directives Or End Of Life Care Planning And Decisions, With Patient and/or Surrogate (List Separately In Addition To Code For Appropriate Evaluation And Management Service)	21 - Inpatient Hospital	10/01/17
S0257	Counseling And Discussion Regarding Advance Directives Or End Of Life Care Planning And Decisions, With Patient and/or Surrogate (List Separately In Addition To Code For Appropriate Evaluation And Management Service)	22 - Outpatient Hospital	10/01/17
S0257	Counseling And Discussion Regarding Advance Directives Or End Of Life Care Planning And Decisions, With Patient and/or Surrogate (List Separately In Addition To Code For Appropriate Evaluation And Management Service)	23 - Emergency Room - Hospital	10/01/17
S0257	Counseling And Discussion Regarding Advance Directives Or End Of Life Care Planning And Decisions, With Patient and/or Surrogate (List Separately In Addition To Code For Appropriate Evaluation And Management Service)	31 – Skilled Nursing Facility	10/01/17
S0257	Counseling And Discussion Regarding Advance Directives Or End Of Life Care Planning And Decisions, With Patient and/or Surrogate (List Separately In Addition To Code For Appropriate Evaluation And Management Service)	32 – Nursing Facility	10/01/17
T1015	Clinic Visit/Encounter, All-Inclusive	03 - School	06/01/17



Procedure Daily Maximum Limits

The procedure daily maximum has been changed to two (2) for the CPT code 96160 (Administration and Interpretation of Patient-Focused Health Risk Assessment) and 96161 (Administration and Interpretation of Caregiver-Focused Health Risk Assessment) and the Frequency is one (1) year.

Provider Type

Effective for dates of service listed the following HCPCS/CPT codes have been added to the provider types.

Provider Type	Code	Description	Effective Begin Date
09 - Certified Nurse-Midwife	82962	Blood Glucose (Sugar) Test Performed By Hand-Held Instrument	01/01/2018
18 – Physician’s Assistant	95017	Allergy Testing With Venoms Into Or Within Skin, Immediate Type Reaction, Including Test Interpretation And Report	01/01/2017
18 – Physician’s Assistant	L1851	Knee Orthosis (KO), Single Upright, Thigh And Calf, With Adjustable Flexion And Extension Joint (Unicentric Or Polycentric), Medial-Lateral And Rotation Control, With Or Without Varus/ Valgus Adjustment, Prefabricated, Off-The-Shelf	01/01/2018
19 – Registered Nurse Practitioner	23473**	Revision of Total Shoulder Repair	01/01/2018
19 – Registered Nurse Practitioner	25605	Closed Treatment Of Broken or Growth Plate Separate of Forearm Bone At Wrist With Manipulation	01/01/2017
19 – Registered Nurse Practitioner	28262**	Correction Of Foot Deformity With Incision Of Ankle Joint Capsule and Lengthening Of Tendons	01/01/2017
19 – Registered Nurse Practitioner	L1851	Knee Orthosis (KO), Single Upright, Thigh And Calf, With Adjustable Flexion And Extension Joint (Unicentric Or Polycentric), Medial-Lateral And Rotation Control, With Or Without Varus/ Valgus Adjustment, Prefabricated, Off-The-Shelf	01/01/2018
SA – Speech Language Pathology Assistant	92609	Therapeutic Services For Use Of Speech-Generating Device With Programming	01/01/2017

Note: ** needs to be billed with the modifier AS (PA SVCS For Assistant/At Surgery) for this provider

New Edits

The following new edits listed below will be effective October 1, 2018.

Z674 ADDITIONAL PROCEDURES FOR SAME PROV & DOS REQUIRED -.

Begin DOS: 10/01/2018

Receipt Date: 08/01/2018

Mode: 1

Form Types: A

Set to: "S" pend

Adj Level: 03

Location: 91

A625 T1015 NOT VALID FOR NON CRS, FORMER CRS OR SPC EXCEPTION -

Begin DOS: 10/01/2018

Receipt Date: 08/02/2018

Mode: 1

Form Types: A

Set to: "S" pend

Adj Level: 03

Location: 91

Revenue Code

Effective for dates of service listed the revenue codes have been added to the CPT/HCPCS codes listed.

Revenue Code	Code	Description	Effective Begin Date
0636 – Drugs/Detail Coding	J2182	Injection, Mepolizumab, 1 mg	01/01/2017
0490 - Ambulatory Surgical Center	25545	Open Treatment of Broken Forearm Bone	10/01/2008
0490—Ambulatory Surgical Center	35045	Repair of Diseased or Bulging (Aneurysm) Artery of Forearm	06/01/2017

