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Healthcare Common
Procedure Coding System

HCPCS

National Level II Codes



Professional

2010

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Introduction

The information provided here is an abridged version of the procedures the Centers for Medicare and Medicaid Services (CMS) follows in making coding decisions for the Healthcare Common Procedure Coding System (HCPCS) Level II. To view the full text of the document, visit the CMS website at http://www.cms.hhs.gov/MedHCPCSGenInfo/Downloads/02_HCPCSCODINGPROCESS.asp#TopOfPage.

A. HCPCS Background Information

Each year in the United States, healthcare insurers process over five billion claims for payment. To ensure that these claims are processed in an orderly and consistent manner, standardized coding systems are essential. The HCPCS Level II code set is one of the standard code sets used for this purpose. The HCPCS is divided into two principal subsystems, referred to as Level I and Level II. Level I of the HCPCS is comprised of CPT (Current Procedural Terminology), a numeric coding system maintained by the American Medical Association (AMA). Healthcare professionals use the CPT to identify services and procedures for which they bill public or private health insurance programs. Decisions regarding the addition, deletion, or revision of CPT codes are made by the AMA.

Level II of the HCPCS is a standardized coding system used primarily to identify products, supplies, and services not included in the CPT codes, such as ambulance service, durable medical equipment, prosthetics, orthotics, and supplies (DMEPOS) when used outside a physician's office. Because Medicare and other insurers cover a variety of services, supplies, and equipment that are not identified by CPT codes, the Level II HCPCS codes were established for submitting claims for these items. Level II codes are also referred to as alpha-numeric codes because they consist of a single alphabetical letter followed by four numeric digits, while CPT codes are identified using five numeric digits.

In October of 2003, the Secretary of Health and Human Services (HHS) delegated authority under the Health Insurance Portability and Accountability Act (HIPAA) of 1996 legislation to CMS to maintain and distribute HCPCS Level II Codes.

Prior to December 31, 2003, Level III HCPCS were developed and used by Medicaid State agencies, Medicare contractors, and private insurers in their specific programs or local areas of jurisdiction. For purposes of Medicare, Level III codes were also referred to as local codes. Local codes were established when an insurer preferred that suppliers use a local code to identify a service, for which there is no Level I or Level II code, rather than use a "miscellaneous or not otherwise classified" code.

HIPAA required CMS to adopt standards for coding systems that are used for reporting healthcare transactions. Regulations provided for the elimination of Level III local codes by October 2002, at which time, the Level I and Level II code sets could be used. The elimination of local codes was postponed, as a result of section 532(a) of BIPA, which continued the use of local codes through December 31, 2003.

B. HCPCS Level II Codes

The regulation that CMS published on August 17, 2000 (45 CFR 162.10002), to implement the HIPAA requirement for standardized coding systems established the HCPCS Level II codes as the standardized coding system for describing and identifying healthcare

equipment and supplies in healthcare transactions that are not identified by the HCPCS Level I CPT codes. The HCPCS Level II coding system was selected as the standardized coding system because of its wide acceptance among both public and private insurers.

HCPCS is a system for identifying items and services. It is not a methodology or system for making coverage or payment determinations, and the existence of a code does not determine coverage or non-coverage for an item or service. While these codes are used for billing purposes, decisions regarding the addition, deletion, or revision of HCPCS codes are made independent of the process for making determinations regarding coverage and payment.

Currently, there are national HCPCS codes representing over 4,000 separate categories of similar items or services that encompass millions of products from different manufacturers. When submitting claims, suppliers are required to use one of these codes to identify the items they are billing. The descriptor that is assigned to a code represents the definition of the items and services that can be billed using that code.

C. Types of HCPCS Level II Codes

There are several types of HCPCS Level II codes, depending on the purpose for the codes and who is responsible for establishing and maintaining them.

Permanent National Codes

National permanent HCPCS Level II codes are maintained by the CMS HCPCS Workgroup. The Workgroup is responsible for making decisions about additions, revisions, and deletions to the permanent national alpha-numeric codes. These codes are for use by all private and public health insurers. Since HCPCS is a national coding system, all payers will be represented in the Workgroup including private insurance agencies, Pricing, Data Analysis, and Coding (PDAC), and Medicaid.

The permanent national codes serve the important function of providing a standardized coding system that is managed jointly by private and public insurers.

Dental Codes

The dental codes are a separate category of national codes. The Current Dental Terminology (CDT) is a publication copyrighted by the American Dental Association (ADA) that lists codes for billing dental procedures and supplies. The CDT is included in HCPCS Level II. Decisions regarding the revision, deletion, or addition of CDT codes are made by the ADA and not the CMS HCPCS Workgroup.

Miscellaneous Codes

National codes also include "miscellaneous/not otherwise classified" codes. These codes are used when a supplier is submitting a bill for an item or service and there is no existing national code that adequately describes the item or service being billed. The importance of miscellaneous codes is that they allow suppliers to begin billing immediately for a service or item as soon as it is allowed to be marketed by the Food and Drug Administration (FDA) even though there is no distinct code that describes the service or item. A miscellaneous code can be used during the period of time a request for a new code is being considered under the HCPCS review process. The use of miscellaneous codes also helps avoid the inefficiency and

Elastic

bandage, A6448-A6455
compression stocking, A6530-A6549

Elastoplast adhesive tape, A4450, A4452

Elavil, J1320

Elbow

disarticulation, L6200-L6205, L6450
electronic, L7170-L7191
orthosis (EO), E1800-E1801,
L3700-L3740, L3762
prosthesis, L6100-L6130
protector, E0191
splint, S8452

Electrical work, dialysis equipment, A4870

Electrodes, A4556

automated external defibrillator, K0609

Electrodiagnostic testing, S3905

Electron beam computed tomography,
S8092

Electronic Medical Record (EMR)

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Elevating leg rest, K0195 **Elevator, air
pressure, heel**, E0370

Elitek, J2783

Ellence, J9178

Elliott's B solution, J9175

Eloxatin, J9263

Elspar, J9020

Emend, J1453

Emergency transport

ALS level 1, A0427

BLS, A0429

neonatal, one way, A0225

EMG, E0746

Eminase, J0350

Empirc antibiotic prescription

patient not documented, G8367

Enbrel, J1438

Encounter, clinic, T1015

End-stage renal disease

no documentation

hematocrit or hemoglobin, G8387

URR or Kt/V value, G8388

Endarterectomy, chemical, M0300

Endodontic procedures, D3110-D3999

periapical services, D3410-D3470

pulp capping, D3110, D3120

root canal therapy, D3310-D3353

Endoscope sheath, A4270

Endoskeletal system, L5810-L5999

Enema, barium, G0106, G0120, G0122

Enfuvirtide, J1324

Enlive, enteral nutrition, B4155

Enovil®, J1320

Enoxaparin sodium, J1650

Entera, enteral nutrition

isotonic, B4150

isotonic fiber, B4150

OPD, B4154

Enteral

feeding supply kit,

gravity, B4036

pump, B4035

syringe fed, B4034

formulae, B4149-B4162

Amin-Aid, B4154

Casec, B4155

Controlyte, B4155

Criticare HN, B4153

Enlive®, B4155

Enrich, B4150

Ensure, B4150, B4152

Entera, B4150, B4154

Enteral – continued

formulae – *continued*

Gerval Protein, B4155

Hepatic-Aid, B4154

Isotein, B4153

Jevity®, B4150, B4152

Lonalac Powder, B4150

Magnacal, B4152

MCT Oil, B4155

Meritene, B4150

Microlipids, B4155

Moducal, B4155

Nutrifocus™, B4154

Osmolite®, B4150

Polycose®, B4155

Portagen Powder, B4150

Precision, B4153

Promix, B4155

Propac Plus, B4155

Renu, B4150

Resurgex, B4155

Sumacal, B4155

Sustacal, B4150, B4152

Sustagen Powder, B4150

Traumacal, B4154

Travasorb, B4153, B4154

Vital HN®, B4153

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gastronomy tube, B4087-B4088

nutrition infusion pump

with alarm, B9002

without alarm, B9000

supplies, not otherwise classified, B9998

Enuresis alarm, S8270

Epinephrine, J0170

Epirubicin HCl, J9178

Epoetin alpha, J0886, Q4081

for non ESRD use, J0885

Epogen, J0885, J0886

Epoprostenol, J1325

dilutant, sterile, S0155

Equestrian/hippotherapy (horse), S8940

Ergonovine maleate, J1330

Ertapenem sodium, J1335

Erythromycin lactobionate, J1364

ESRD (End Stage Renal Disease; *see also*
Dialysis)

machines and accessories, E1500-E1699

plumbing, A4870

services, E1510-E1699

supplies, A4651-A4932

Estra-D, J1000

Estradiol, J1000, J1060

cypionate and testosterone cypionate, J1060

L.A., J1380

L.A. 20, J1390

L.A. 40, J0970

valerate and testosterone enanthate, J0900

Estra-L,

20, J1390

40, J0970

Estra-Testrin, J0900

Estro-Cyp, J1000

Estrogen conjugated, J1410

Estroject L.A., J1000

Estrone 5, J1435

Estrone Aqueous, J1435

Estronol, J1435

-L.A., J1000

Ethanolamine oleate, J1430

Ethylol, J0207

Etidronate disodium, J1436

Etonogestrel implant system, J7307

Etopophos, J9181

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Etoposide, J9181

oral, J8560

Euflexxa, J7323

Everone, J3120, J3130

Examination

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digital rectal, G0102, S0605

foot care for diabetic with LOPS,
G0245-G0246

gynecological, S0610-S0613

ophthalmological, S0620-S0621, S3000

oral, D0120-D0160, D0472-D0474

physical, college, S0622

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Exercise equipment, A9300, E0935

External

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ambulatory insulin delivery system, A9274

power, battery components, L7360-L7368

power, elbow, L7170-L7499

urinary supplies, A4356-A4358

Extractions, dental, D7250

Extraoral films, D0250, D0260

Extremity belt/harness, E0945

EXU-DRY®

Buttocks, Face, Neck, Arm, Knee,
Dressing, A6253

Incision Dressings, A6252

Infant Boot/Foot Dressing, A6253

Large Burn Jacket, Vest, A6253

Pad, Non-Permeable, A6253

Slit Tube Dressings, A6251-A6252

Wound Dressings, A6251-A6253

Eye

case, V2756

lens (spectacle), V2100-V2615

dispensing, S0595

pad, A6410-A6411

patch, A6412

prosthetic, V2623-V2629

service (miscellaneous), V2700-V2799

EZBrace LSO, L0631

E-Z Ject lancets, A4259

E-Z Lets lancet device, A4258

E-Z Lite Wheelchair, E1250, K0003

E-Z Max LSO, L0631

EzPAP® pressure system, E0484

F

Faceplate, ostomy, A4361

Face tent, oxygen, A4619

Factor IX

anti-hemophilic factor

non-recombinant, J7193

recombinant, J7195

complex, J7194

Factor VIIa, coagulation factor, recombinant,
J7189

Factor VIII, anti-hemophilic factor,
J7190-J7192

Factor IX, J7193-J7195

Factrel, J1620

Family planning education, H1010

Famotidine, S0028

Faslodex, J9395

Fee, coordinated care, G9001-G9011

Fentanyl citrate, J3010

and droperidol, J1810

Fern test, Q0114

Feronim, J1750

Filgrastim (G-CSF), J1440, J1441

Filler, wound

- alginate dressing, A6199
- collagen, A6010-A6011, A6024
- foam dressing, A6215
- gel, A6261
- hydrocolloid dressing, A6240-A6241
- hydrogel dressing, A6248
- not elsewhere classified, A6262
- paste, A6261

Film

- radiographic, dental, D0210-D0340
- transparent, A6257- A6259

Finger

- orthosis, L3925, L3927, L3929, L3931

Filter

- aerosol compressor, A7013-A7014
- cap, A7503
- carbon, A4680
- CPAP device, A7038-A7039
- dialysis, carbon, A4680
- holder, A7503, A7507, A7509
- ostomy, A4368
- tracheostoma, A4481, A7504
- ultrasonic generator, A7014

Fistula cannulation set, A4730

Fixation

- percutaneous, skeletal
- pelvic bone/ring, G0413

Flebogamma, J1572

Flexderm®, hydrogel dressing, A6242-A6244

FlexiGel®

- Hydrogel Sheet Dressing, A6242-A6243
- Island Dressing, A6245

Flexoject, J2360

Flexon, J2360

Flexzan®, foam dressing, A6209-A6214

Fliolan, J1325

Flow rate meter, A4614

Flowmeter, E0440, E0555, E0580

Floxuridine, J9200

Fluconazole, injection, J1450

Fludara, J9185

Fludarabine phosphate, J9185

Fluid barrier, dialysis, E1575

Flunisolide, inhalation solution, J7641

Fluocinolone, J7311

Fluoride

- sodium F-18, diagnostic, A9580
- treatment, D1203-D1204

Fluorine-18 flurodeoxyglucose imaging, A9552, S8085

Fluorouracil, J9190

Fluphenazine decanoate, J2680

Flutamide, S0175

Flutter device, S8185

Foam dressing, A6209-A6215

Foam pad, A5126

FoamWalker™, L4360

Folding walker, E0135, E0143-E0144, E0148-E0149

Folex, J9260

- PFS, J9260

Foley catheter, A4311-A4316, A4338-A4346

Follow-up

- inpatient telehealth consultation, G0406-G0408

Follutein, J0725

Fomepizole, J1451

Fomivirsen sodium intraocular, J1452

Fondaparinux sodium, J1652

Foot drop splint, L4398

Foot pressure

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Footplate, E0175, E0970, K0040-K0042, L3031

Footwear

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- documented patient not eligible, G8416
- not performed, G8415
- performed, G8410
- orthopedic, L3201-L3265

Forearm crutches, E0110-E0111

Formoterol

- fumarate, J7606
- inhalation solution, J7640

Fortaz, J0713

Fosaprepitant, J1453

Foscarnet sodium, J1455

Foscavir, J1455

Fosphenytoin, Q2009

- sodium, S0078

Foster care

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Four Poster, fracture frame, E0946

Fracture

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Frejka, hip orthosis, L1600

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FUDR, J9200

Fulvestrant, J9395

Fungizone, J0285

Furomide MD, J1940

Furosemide, J1940

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Gadoxetate disodium, C4246

Gait trainer, E8000-E8002

Gallium Ga-67, A9556

- nitrate, J1457

Galsulfase, J1458

Gamastan, J1460-J1560

Gammagard liquid, J1569

Gamma globulin, J1460-J1560

Gammagraft, Q4111

Gammar, J1566, J1567

Gamulin RH, J2788, J2790

Gamunex, J1561

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Garamycin, J1580

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Gastric

- suction pump, E2000

Gastrostomy/jejunostomy tubing, B4087-B4088

Gatifloxacin, J1590

- Gauze, A6216-A6230, A6266**
- impregnated, A6222-A6233, A6266
- nonelastic, A6441
- non-impregnated, A6216-A6221, A6402-A6404

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Gel

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- conductive, A4558
- pressure pad, E0185, E0196
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Gemcitabine HCl, J9201

Gemtuzumab ozogamicin, J9300

GemZar, J9201

Generator

- implantable neurostimulator, L8685-L8688
- pulse, ear, E2120
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Genetic testing, S3800-S3855

Gentamicin (sulfate), J1580

Gentran, J7100, J7110

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- bone conduction, V5080
- frames, V2020, V2025
- hearing aid, V5150, V5190, V5230
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Glatiramer acetate, J1595

Glaucoma screening, G0117-G0118

Global fee

- extracorporeal lithotripsy, S0400
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Gloves, dialysis, A4927, A4930

Glucagon HCl, J1610

Glucose

- monitor, E0607, E2100-E2101, S1030-S1031
- test strips, A4253, A4772

Glukor, J0725

Gluteal pad, L2650

Glycopyrrolate, inhalation solution

- concentrated, J7642
- unit dose, J7643

Gold

- brachytherapy source, C1716
- foil dental restoration, D2410-D2430
- sodium thiomalate, J1600

Gomco

- compact gastro suction drainage pump, E2000
- drain bottle, A4911
- mobile aspirator, E0600

Gonadorelin HCl, J1620

Gonic, J0725

GoodKnight Nasal CPAP System, E0601

Goserelin acetate implant, J9202

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Grade-aid, wheelchair, E0974

Graftjacket, Q4107

Granisetron HCl, J1626, Q0166, S0091

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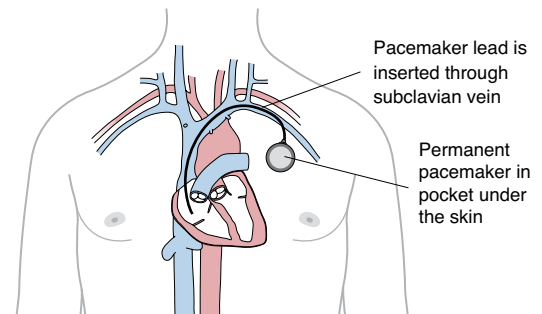
Gravlee jet washer, A4470

Gross and microscopic examination, prostate, G0416-G0419

① C1756	Catheter, pacing, transesophageal Medicare Statute 1833(t)	N N I
① C1757	Catheter, thrombectomy/embolectomy Medicare Statute 1833(t)	N N I
① C1758	Catheter, ureteral Medicare Statute 1833(t)	N N I
① C1759	Catheter, intracardiac echocardiography Medicare Statute 1833(t)	N N I
① C1760	Closure device, vascular (implantable/insertable) Medicare Statute 1833(t)	N N I
① C1762	Connective tissue, human (includes fascia lata) Medicare Statute 1833(t)	N N I
① C1763	Connective tissue, non-human (includes synthetic) Medicare Statute 1833(t)	N N I
① C1764	Event recorder, cardiac (implantable) Medicare Statute 1833(t)	N N I
① C1765	Adhesion barrier Medicare Statute 1833(t)	N N I
① C1766	Introducer/sheath, guiding, intracardiac electrophysiological, steerable, other than peel-away Medicare Statute 1833(t)	N N I
① C1767	Generator, neurostimulator (implantable), non-rechargeable Medicare Statute 1833(t) AHA: 1Q 2007, 8 Pub 100-4, 32, 40-40.5	N N I
① C1768	Graft, vascular Medicare Statute 1833(t)	N N I
① C1769	Guide wire Medicare Statute 1833(t) AHA: 2Q 2007, 7	N N I
① C1770	Imaging coil, magnetic resonance (insertable) Medicare Statute 1833(t)	N N I
① C1771	Repair device, urinary, incontinence, with sling graft Medicare Statute 1833(t) AHA: 2Q 2008, 9	N N I
① C1772	Infusion pump, programmable (implantable) Medicare Statute 1833(t)	N N I
① C1773	Retrieval device, insertable (used to retrieve fractured medical devices) Medicare Statute 1833(t)	N N I
① C1776	Joint device (implantable) Medicare Statute 1833(t)	N N I
① C1777	Lead, cardioverter-defibrillator, endocardial single coil (implantable) Medicare Statute 1833(t) AHA: 2Q 2006, 9	N N I
① C1778	Lead, neurostimulator (implantable) Medicare Statute 1833(t) AHA: 1Q 2007, 8 Pub 100-4, 32, 40-40.5	N N I
① C1779	Lead, pacemaker, transvenous VDD single pass Medicare Statute 1833(t)	N N I
① C1780	Lens, intraocular (new technology) Medicare Statute 1833(t)	N N I
① C1781	Mesh (implantable) Medicare Statute 1833(t)	N N I
① C1782	Morcellator Medicare Statute 1833(t)	N N I
① C1783	Ocular implant, aqueous drainage assist device Medicare Statute 1833(t)	N N I
① C1784	Ocular device, intraoperative, detached retina Medicare Statute 1833(t)	N N I
① C1785	Pacemaker, dual chamber, rate-responsive (implantable) Medicare Statute 1833(t)	N N I

① C1786	Pacemaker, single chamber, rate-responsive (implantable) Medicare Statute 1833(t)	N N I
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Pacemaker Implantation



① C1787	Patient programmer, neurostimulator Medicare Statute 1833(t)	N N I
① C1788	Port, indwelling (implantable) Medicare Statute 1833(t)	N N I
① C1789	Prosthesis, breast (implantable) Medicare Statute 1833(t)	N N I
① C1813	Prosthesis, penile, inflatable Medicare Statute 1833(t)	N N I
① C1814	Retinal tamponade device, silicone oil Medicare Statute 1833(t) AHA: 2Q 2006, 9	N N I
① C1815	Prosthesis, urinary sphincter (implantable) Medicare Statute 1833(t)	N N I
① C1816	Receiver and/or transmitter, neurostimulator (implantable) Medicare Statute 1833(t)	N N I
① C1817	Septal defect implant system, intracardiac Medicare Statute 1833(t)	N N I
① C1818	Integrated keratoprosthesis Medicare Statute 1833(t)	N N I
① C1819	Surgical tissue localization and excision device (implantable) Medicare Statute 1833(t)	N N I
① C1820	Generator, neurostimulator (implantable), with rechargeable battery and charging system Medicare Statute 1833(t)	N N I
① C1821	Interspinous process distraction device (implantable) Medicare Statute 1833(t)	N J 7
① C1874	Stent, coated/covered, with delivery system Medicare Statute 1833(t) AHA: 3Q 2002, 9	N N I
① C1875	Stent, coated/covered, without delivery system Medicare Statute 1833(t) AHA: 3Q 2002, 9	N N I
① C1876	Stent, non-coated/non-covered, with delivery system Medicare Statute 1833(t) AHA: 3Q 2002, 9	N N I
① C1877	Stent, non-coated/non-covered, without delivery system Medicare Statute 1833(t) AHA: 3Q 2002, 9	N N I
① C1878	Material for vocal cord medialization, synthetic (implantable) Medicare Statute 1833(t)	N N I
① C1880	Vena cava filter Medicare Statute 1833(t)	N N I

C1756 – C1880

- ① E2510 Speech generating device, synthesized speech, permitting multiple methods of message formulation and multiple methods of device access
NCD 50.1 Y
- ① E2511 Speech generating software program, for personal computer or personal digital assistant
NCD 50.1 Y
- ① E2512 Accessory for speech generating device, mounting system
NCD 50.1 Y
- ① E2599 Accessory for speech generating device, not otherwise classified
NCD 50.1 Y

Additional Wheelchair Accessory

- 🛋 E2601 General use wheelchair seat cushion, width less than 22 inches, any depth Y
- 🛋 E2602 General use wheelchair seat cushion, width 22 inches or greater, any depth Y
- 🛋 E2603 Skin protection wheelchair seat cushion, width less than 22 inches, any depth Y
- 🛋 E2604 Skin protection wheelchair seat cushion, width 22 inches or greater, any depth Y
- 🛋 E2605 Positioning wheelchair seat cushion, width less than 22 inches, any depth Y
- 🛋 E2606 Positioning wheelchair seat cushion, width 22 inches or greater, any depth Y
- 🛋 E2607 Skin protection and positioning wheelchair seat cushion, width less than 22 inches, any depth Y
- 🛋 E2608 Skin protection and positioning wheelchair seat cushion, width 22 inches or greater, any depth Y
- 🛋 E2609 Custom fabricated wheelchair seat cushion, any size Y
- 🛋 E2610 Wheelchair seat cushion, powered B
- 🛋 E2611 General use wheelchair back cushion, width less than 22 inches, any height, including any type mounting hardware Y
- 🛋 E2612 General use wheelchair back cushion, width 22 inches or greater, any height, including any type mounting hardware Y
- 🛋 E2613 Positioning wheelchair back cushion, posterior, width less than 22 inches, any height, including any type mounting hardware Y
- 🛋 E2614 Positioning wheelchair back cushion, posterior, width 22 inches or greater, any height, including any type mounting hardware Y
- 🛋 E2615 Positioning wheelchair back cushion, posterior-lateral, width less than 22 inches, any height, including any type mounting hardware Y
- 🛋 E2616 Positioning wheelchair back cushion, posterior-lateral, width 22 inches or greater, any height, including any type mounting hardware Y
- 🛋 E2617 Custom fabricated wheelchair back cushion, any size, including any type mounting hardware Y
- 🛋 E2619 Replacement cover for wheelchair seat cushion or back cushion, each Y
- 🛋 E2620 Positioning wheelchair back cushion, planar back with lateral supports, width less than 22 inches, any height, including any type mounting hardware Y
- 🛋 E2621 Positioning wheelchair back cushion, planar back with lateral supports, width 22 inches or greater, any height, including any type mounting hardware Y

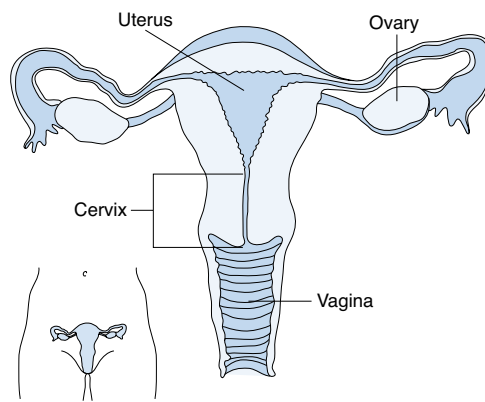
Gait Trainer

- ⊖ E8000 Gait trainer, pediatric size, posterior support, includes all accessories and components E
- ⊖ E8001 Gait trainer, pediatric size, upright support, includes all accessories and components E
- ⊖ E8002 Gait trainer, pediatric size, anterior support, includes all accessories and components E

Procedures/Professional Services G0008–G9140

- 🛋 G0008 Administration of influenza virus vaccine
Pub 100-4, 18, 10-10.5 S
- 🛋 G0009 Administration of pneumococcal vaccine
Pub 100-4, 18, 10-10.5 S
- 🛋 G0010 Administration of hepatitis B vaccine
Pub 100-4, 18, 10-10.5 B
- 🛋 G0027 Semen analysis; presence and/or motility of sperm excluding Huhner ♂ A
- ① G0101 Cervical or vaginal cancer screening; pelvic and clinical breast examination ♀ V PQR

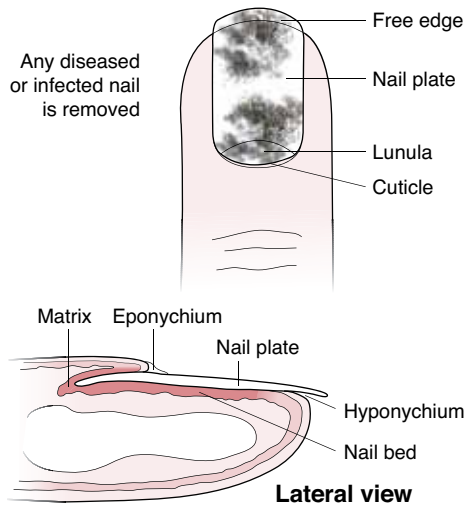
Cervical or vaginal cancer screening



- ① G0102 Prostate cancer screening; digital rectal examination
NCD 210.1; Pub 100-4, 18, 50-50.8 ♂ N
- ① G0103 Prostate cancer screening; prostate specific antigen test (PSA)
NCD 210.1; Pub 100-4, 18, 50-50.8 ♂ A
- ① G0104 Colorectal cancer screening; flexible sigmoidoscopy S P 3
Pub 100-4, 18, 60-60.8
- ① G0105 Colorectal cancer screening; colonoscopy on individual at high risk T A 2
Pub 100-4, 18, 60-60.8
- ① G0106 Colorectal cancer screening; alternative to G0104, screening sigmoidoscopy, barium enema S
Pub 100-4, 18, 60-60.8
- 🛋 G0108 Diabetes outpatient self-management training services, individual, per 30 minutes V A PQR
Pub 100-4, 18, 120-120.2.2
- 🛋 G0109 Diabetes outpatient self-management training services, group session (2 or more), per 30 minutes V A PQR
- 🛋 G0117 Glaucoma screening for high risk patients furnished by an optometrist or ophthalmologist S
AHA: 3Q 2001, 12
Pub 100-4, 18, 70-70.5
- 🛋 G0118 Glaucoma screening for high risk patient furnished under the direct supervision of an optometrist or ophthalmologist S
AHA: 3Q 2001, 12
- ① G0120 Colorectal cancer screening; alternative to G0105, screening colonoscopy, barium enema S
Pub 100-4, 18, 60-60.8
- ① G0121 Colorectal cancer screening; colonoscopy on individual not meeting criteria for high risk T A 2
Pub 100-4, 18, 60-60.8
- ⊖ G0122 Colorectal cancer screening; barium enema E
Pub 100-4, 18, 60-60.8

- ① G0123 Screening cytopathology, cervical or vaginal (any reporting system), collected in preservative fluid, automated thin layer preparation, screening by cytotechnologist under physician supervision ♀ A NCD 190.2
- ① G0124 Screening cytopathology, cervical or vaginal (any reporting system), collected in preservative fluid, automated thin layer preparation, requiring interpretation by physician ♀ B NCD 190.2; Pub 100-4, 18, 30-30.9
- ① G0127 Trimming of dystrophic nails, any number T P 3 Pub 100-2, 15, 290; 100-2, 15, 290

Trimming of dystrophic nails



- ① G0128 Direct (face-to-face with patient) skilled nursing services of a registered nurse provided in a comprehensive outpatient rehabilitation facility, each 10 minutes beyond the first 5 minutes B Medicare Statute 1833(a)
- 🏠 G0129 Occupational therapy services requiring the skills of a qualified occupational therapist, furnished as a component of a partial hospitalization treatment program, per session (45 minutes or more) P
- ① G0130 Single energy x-ray absorptiometry (SEXA) bone density study, one or more sites; appendicular skeleton (peripheral) (e.g., radius, wrist, heel) X Z 3 NCD 150.3
- 🏠 G0141 Screening cytopathology smears, cervical or vaginal, performed by automated system, with manual rescreening, requiring interpretation by physician ♀ B Pub 100-4, 18, 30-30.9
- 🏠 G0143 Screening cytopathology, cervical or vaginal (any reporting system), collected in preservative fluid, automated thin layer preparation, with manual screening and rescreening by cytotechnologist under physician supervision ♀ A Pub 100-4, 18, 30-30.9
- 🏠 G0144 Screening cytopathology, cervical or vaginal (any reporting system), collected in preservative fluid, automated thin layer preparation, with screening by automated system, under physician supervision ♀ A Pub 100-4, 18, 30-30.9
- 🏠 G0145 Screening cytopathology, cervical or vaginal (any reporting system), collected in preservative fluid, automated thin layer preparation, with screening by automated system and manual rescreening under physician supervision ♀ A Pub 100-4, 18, 30-30.9
- 🏠 G0147 Screening cytopathology smears, cervical or vaginal, performed by automated system under physician supervision ♀ A Pub 100-4, 18, 30-30.9

- 🏠 G0148 Screening cytopathology smears, cervical or vaginal, performed by automated system with manual rescreening ♀ A Pub 100-4, 18, 30-30.9
- 🏠 G0151 Services of physical therapist in home health setting, each 15 minutes B
- 🏠 G0152 Services of occupational therapist in home health setting, each 15 minutes B
- 🏠 G0153 Services of speech and language pathologist in home health setting, each 15 minutes B
- 🏠 G0154 Services of skilled nurse in home health setting, each 15 minutes B
- 🏠 G0155 Services of clinical social worker in home health setting, each 15 minutes B
- 🏠 G0156 Services of home health aide in home health setting, each 15 minutes B
- ① G0166 External counterpulsation, per treatment session T NCD 20.20; Pub 100-4, 32, 130-130.2
- 🏠 G0168 Wound closure utilizing tissue adhesive(s) only AHA: 1Q 2005, 5; 4Q 2001, 12; 3Q 2001, 13 B
- ① G0173 Linear accelerator based stereotactic radiosurgery, complete course of therapy in one session S Z 2
- 🏠 G0175 Scheduled interdisciplinary team conference (minimum of three exclusive of patient care nursing staff) with patient present V
- ① G0176 Activity therapy, such as music, dance, art or play therapies not for recreation, related to the care and treatment of patient's disabling mental health problems, per session (45 minutes or more) P
- ① G0177 Training and educational services related to the care and treatment of patient's disabling mental health problems per session (45 minutes or more) P
- 🏠 G0179 Physician re-certification for Medicare-covered home health services under a home health plan of care (patient not present), including contacts with home health agency and review of reports of patient status required by physicians to affirm the initial implementation of the plan of care that meets patient's needs, per re-certification period M
- 🏠 G0180 Physician certification for Medicare-covered home health services under a home health plan of care (patient not present), including contacts with home health agency and review of reports of patient status required by physicians to affirm the initial implementation of the plan of care that meets patient's needs, per certification period M
- 🏠 G0181 Physician supervision of a patient receiving Medicare-covered services provided by a participating home health agency (patient not present) requiring complex and multidisciplinary care modalities involving regular physician development and/or revision of care plans, review of subsequent reports of patient status, review of laboratory and other studies, communication (including telephone calls) with other health care professionals involved in the patient's care, integration of new information into the medical treatment plan and/or adjustment of medical therapy, within a calendar month, 30 minutes or more M
- 🏠 G0182 Physician supervision of a patient under a Medicare-approved hospice (patient not present) requiring complex and multidisciplinary care modalities involving regular physician development and/or revision of care plans, review of subsequent reports of patient status, review of laboratory and other studies, communication (including telephone calls) with other health care professionals involved in the patient's care, integration of new information into the medical treatment plan and/or adjustment of medical therapy, within a calendar month, 30 minutes or more M
- 🏠 G0186 Destruction of localized lesion of choroid (for example, choroidal neovascularization); photocoagulation, feeder vessel technique (one or more sessions) T R 2
- 🏠 G0202 Screening mammography, producing direct digital image, bilateral, all views Pub 100-4, 18, 20-20.8.2