

Healthcare Common  
Procedure Coding System

# HCPCS

National Level II Codes



Expert

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](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

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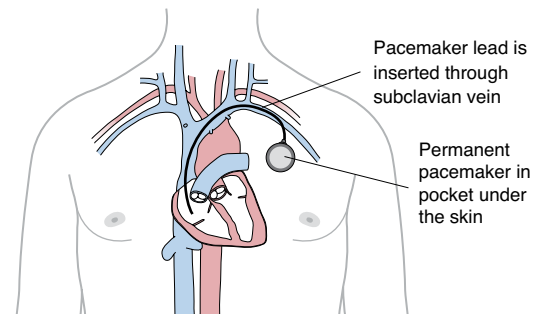
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① C1757	Catheter, thrombectomy/embolectomy Medicare Statute 1833(t)	N N I
① C1758	Catheter, ureteral Medicare Statute 1833(t)	N N I
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① C1762	Connective tissue, human (includes fascia lata) Medicare 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
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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
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① C1778	Lead, neurostimulator (implantable) Medicare Statute 1833(t) AHA: 1Q 2007, 8 Pub 100-4, 32, 40-40.5	N N I
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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

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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

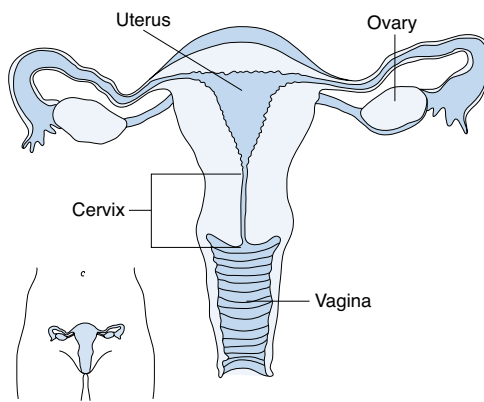
### Gait Trainer

- ⊖ 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

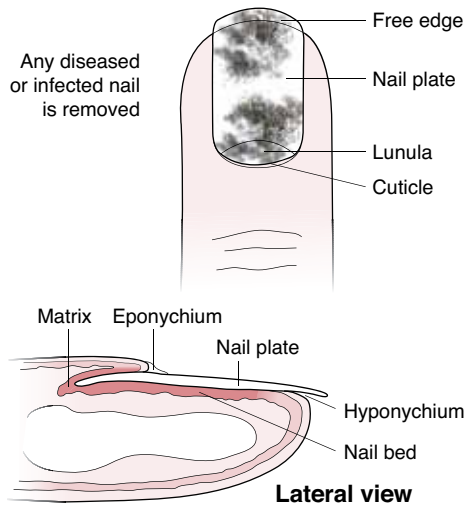
### Cervical or vaginal cancer screening



- ① G0102 Prostate cancer screening; digital rectal examination  
NCD 210.1; Pub 100-4, 18, 50-50.8 ♂ A 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 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 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