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114.3 CMR 47.00: Freestanding Ambulatory Surgical Facilities

Effective January 1, 2018

CPT/HCPCS 2018 Procedure Code Update

In accordance with 114.3 CMR 47.01(4): *Coding Updates and Corrections*, the Executive Office of Health and Human Services is adding new procedure codes and deleting outdated codes, effective for dates of service on and after January 1, 2018. The codes that were added or deleted are identified in the lists below, followed by a crosswalk that identifies replacement codes for applicable deleted codes. Newly added codes that are replacements for deleted codes are reimbursed at the payment rate of the corresponding deleted code. Existing codes that are replacements for deleted codes will continue to be reimbursed at the existing code's rate. All other codes added by this administrative bulletin will be priced at individual consideration (I.C.) until appropriate rates can be developed. Deleted codes are not available for use for dates of services after December 31, 2017.

114.3 CMR 47.00 Added Codes

| Added Code | Rate | Code Description (if applicable) |
|------------|----------|--|
| 15730 | \$606.40 | Midface flap (i.e., zygomaticofacial flap) with preservation of vascular pedicle(s) |
| 15733 | \$606.40 | Muscle, myocutaneous, or fasciocutaneous flap; head and neck with named vascular pedicle (i.e., buccinators, genioglossus, temporalis, masseter, sternocleidomastoid, levator scapulae) |
| 19294 | I.C. | Preparation of tumor cavity, with placement of a radiation therapy applicator for intraoperative radiation therapy (IORT) concurrent with partial mastectomy (list separately in addition to code for primary procedure) |
| 20939 | I.C. | Bone marrow aspiration for bone grafting, spine surgery only, through separate skin or fascial incision (list separately in addition to code for primary procedures) |
| 31253 | I.C. | Nasal/sinus endoscopy, surgical with ethmoidectomy; total (anterior and posterior), including frontal sinus exploration, with removal of tissue from frontal sinus, when performed |



| Added Code | Rate | Code Description (if applicable) |
|-------------------|-------------|--|
| 31257 | I.C. | Nasal/sinus endoscopy, surgical with ethmoidectomy; total (anterior and posterior), including sphenoidotomy |
| 31259 | I.C. | Nasal/sinus endoscopy, surgical with ethmoidectomy; total (anterior and posterior), including sphenoidotomy, with removal of tissue from the sphenoid sinus |
| 31298 | I.C. | Nasal/sinus endoscopy, surgical, with dilation of frontal and sphenoid sinus ostia (e.g., balloon dilation) |
| 32994 | I.C. | Ablation therapy for reduction or eradication of 1 or more pulmonary tumor(s) including pleura or chest wall when involved by tumor extension, percutaneous, including imaging guidance when performed, unilateral; cryoblation |
| 34713 | I.C. | Percutaneous access and closure of femoral artery for delivery of endograft through a large sheath (12 French or larger), including ultrasound guidance, when performed, unilateral (List separately in addition to code for primary procedure) |
| 34714 | I.C. | Open femoral artery exposure with creation of conduit for delivery of endovascular prosthesis or for establishment of cardiopulmonary bypass, by groin incision, unilateral (List separately in addition to code for primary procedure) |
| 34715 | I.C. | Open axillary/subclavian artery exposure for delivery of endovascular prosthesis by infraclavicular or supraclavicular incision, unilateral (List separately in addition to code for primary procedure) |
| 34716 | I.C. | Open axillary/subclavian artery exposure with creation of conduit for delivery of endovascular prosthesis or for establishment of cardiopulmonary bypass, by infraclavicular or supraclavicular incision, unilateral (List separately in addition to code for primary procedure) |
| 36465 | I.C. | Injection of non-compounded foam sclerosant with ultrasound compression maneuvers to guide dispersion of the injectate, inclusive of all imaging guidance and monitoring; single incompetent extremity truncal vein (e.g., great saphenous vein, accessory saphenous vein) |
| 36466 | I.C. | Injection of non-compounded foam sclerosant with ultrasound compression maneuvers to guide dispersion of the injectate, inclusive of all imaging guidance and monitoring; multiple incompetent truncal veins (e.g., great saphenous vein, accessory saphenous vein) |
| 36482 | I.C. | Endovenous ablation therapy of incompetent vein, extremity, by transcatheter delivery of a chemical adhesive (e.g., cyanoacrylate) remote from the access site, inclusive of all imaging guidance and monitoring, percutaneous; first vein treated |
| 36483 | I.C. | Endovenous ablation therapy of incompetent vein, extremity, by transcatheter delivery of a chemical adhesive (e.g., cyanoacrylate) remote from the access site, inclusive of all imaging guidance and monitoring, percutaneous; subsequent vein(s) treated in a single extremity, each through separate access sites (List separately in addition to code for primary procedure) |
| 38222 | I.C. | Diagnostic bone marrow; biopsy(ies) and aspiration(s) |
| 38573 | I.C. | Laparoscopy, surgical; with bilateral total pelvic lymphadenectomy and periaortic lymph node sampling, peritoneal washings, peritoneal biopsy(ies), omentectomy, and diaphragmatic washings, including diaphragmatic and other serosal biopsy(ies), when performed |
| 55874 | I.C. | Transperineal placement of biodegradable material, peri-prostatic, single or multiple injection(s), including image guidance, when performed |
| 64912 | I.C. | Nerve repair; with nerve allograft, each nerve, first strand (cable) |

| Added Code | Rate | Code Description (if applicable) |
|-------------------|-------------|--|
| 64913 | I.C. | Nerve repair; with nerve allograft, each nerve, each additional strand (List separately in addition to code for primary procedure) |
| C9748 | I.C. | Transurethral destruction of prostate tissue; by radiofrequency water vapor (steam) thermal therapy |
| G0516 | I.C. | Insertion of non-biodegradable drug delivery implants, 4 or more (services for subdermal rod implant) |
| G0517 | I.C. | Removal of non-biodegradable drug delivery implants, 4 or more (services for subdermal implants) |
| G0518 | I.C. | Removal with reinsertion, non-biodegradable drug delivery implants, 4 or more (services for subdermal implants) |

114.3 CMR 47.00 Deleted Codes

| Deleted Codes | Code Description (if applicable) |
|----------------------|---|
| 15732 | Muscle, myocutaneous, or fasciocutaneous flap; head and neck (e.g., temporalis, masseter muscle, sternocleidomastoid, levator scapulae) |
| 31320 | Laryngotomy (thyrotomy, laryngofissure); with removal of tumor or laryngocele, corpectomy, diagnostic |
| 36515 | Therapeutic apheresis; for white blood cells, with extracorporeal immunoadsorption and plasma reinfusion |
| 55450 | Ligation (percutaneous) of vas deferens, unilateral or bilateral (separate procedure) |
| 64565 | Percutaneous implantation of neurostimulator electrode array; cranial nerve, neuromuscular |
| 69820 | Labyrinthotomy, with perfusion of vestibuloactive drug(s); transcanal, fenestration semicircular canal |
| 69840 | Labyrinthotomy, with perfusion of vestibuloactive drug(s); transcanal, revision fenestration operation |

114.3 CMR 47.00: Crosswalk

| Deleted codes | Replacement codes |
|----------------------|--------------------------|
| 15732 | 15730, 15733 |
| 36515 | 36516* |
| 55450 | 55250* |

*Code currently exists in 114.3 CMR 47.00