

# Administrative Bulletin 19-04

**101 CMR 316.00: Surgery and Anesthesia**

**101 CMR 317.00: Medicine**

**101 CMR 318.00: Radiology**

Effective January 1, 2019

1. **2019 CPT/HCPCS Coding Updates; and**
2. **Certain Ophthalmological Service Code Updates Applicable to Physicians**

**Part I: 2019 CPT/HCPCS Coding Updates**

In accordance with 101 CMR 316.01(4), 101 CMR 317.01(4), and 101 CMR 318.01(4): *Coding Updates and Corrections*, the Executive Office of Health and Human Services (EOHHS) is adding new service codes and deleting outdated codes, effective for dates of service on and after January 1, 2019. The following lists specify those codes that have been added and codes that have been deleted, which are followed by crosswalks identifying replacement codes for applicable deleted codes. For entirely new codes that require new pricing and have Medicare-assigned relative value units (RVUs) (or, for applicable services, Medicare rates), inclusive of cases involving multiple new codes that crosswalk to a single deleted code, rates for the 2019 additions are calculated according to the rate methodology used in setting physician rates. Rates for new codes with one-to-one crosswalks to deleted codes are set at the payment rate of the deleted code. All other codes listed in Part I of this bulletin that require pricing are reimbursed by individual consideration (I.C.). Rates listed in this administrative bulletin are applicable until revised rates are issued by the EOHHS. Deleted codes are not available for use for dates of service after December 31, 2018.

**101 CMR 316.00: Surgery and Anesthesia—Added Codes**

| **Added Code** | **Description** |
| --- | --- |
| 10004 | Fine needle aspiration of additional lesion |
| 10005 | Fine needle aspiration of first lesion using ultrasound guidance |
| 10006 | Fine needle aspiration of additional lesion using ultrasound guidance |
| 10007 | Fine needle aspiration of first lesion using fluoroscopic guidance |
| 10008 | Fine needle aspiration of additional lesion using fluoroscopic guidance |
| 10009 | Fine needle aspiration of first lesion using CT guidance |
| 10010 | Fine needle aspiration of additional lesion using CT guidance |
| 10011 | Fine needle aspiration of first lesion using MR guidance |
| 10012 | Fine needle aspiration of additional lesion using MR guidance |
| 11102 | Tangential biopsy of single skin lesion |
| 11103 | Tangential biopsy of additional skin lesion |
| 11104 | Punch biopsy of single skin lesion |
| 11105 | Punch biopsy of additional skin lesion |
| 11106 | Incisional biopsy of single skin lesion |
| 11107 | Incisional biopsy of additional skin lesion |
| 20932 | Donor bone and joint graft to joint surface and neighboring bone |
| 20933 | Half-cylindrical donor bone graft |
| 20934 | Cylindrical donor bone graft |
| 27369 | Injection of contrast for imaging of knee joint |
| 33274 | Insertion or replacement of permanent leadless pacemaker into lower right chamber of heart via catheter using imaging guidance |
| 33275 | Removal of permanent leadless pacemaker into lower right chamber of heart via catheter using imaging guidance |
| 33285 | Insertion of heart rhythm monitor under skin |
| 33286 | Removal of heart rhythm monitor from under skin |
| 33289 | Insertion of wireless pressure sensor into lung artery via catheter |
| 33440 | Replacement of aortic valve by translocation of pulmonary valve, replacement of pulmonary valve with conduit, and enlargement of outflow tract from left lower chamber of heart |
| 33866 | Graft to half of aortic artery arch |
| 36572 | Insertion of central venous catheter for infusion using imaging guidance, patient younger than 5 years |
| 36573 | Insertion of central venous catheter for infusion using imaging guidance, patient 5 years or older |
| 38531 | Open biopsy or excision of lymph nodes in groin |
| 43762 | Replacement of stomach stoma tube accessed through skin |
| 43763 | Replacement of stomach stoma tube accessed through skin with revision of stoma opening |
| 50436 | Enlargement of existing opening into urinary tract accessed through skin using imaging guidance |
| 50437 | Enlargement of existing opening into urinary tract accessed through skin and creation of new access into urine collecting system of kidney, using imaging guidance |
| 53854 | Destruction of prostate tissue accessed through urethra using radiofrequency generated water vapor heat therapy |

**101 CMR 316.00: Surgery and Anesthesia—Deleted Codes**

| **Deleted Code** | **Description** |
| --- | --- |
| 10022 | Fine needle aspiration using imaging guidance |
| 11100 | Biopsy of single growth of skin and/or tissue |
| 11101 | Biopsy of each additional growth of skin and/or tissue |
| 20005 | Incision and drainage of soft tissue abscess |
| 27370 | Injection of contract for X-ray imaging of knee |
| 31595 | Severing of nerve of one side of voice box |
| 33282 | Implantation patient-activated heart monitoring device |
| 33284 | Removal of implantable patient-activated heart monitoring device |
| 41500 | Wiring of tongue to jaw bone |
| 43760 | Change of stomach feeding, accessed through the skin |
| 46762 | Repair of anal muscle to correct incontinence with implant, adult |
| 50395 | Dilation of kidney and/or urinary duct (ureter) with creation of drainage tract, accessed through the skin |
| 61332 | Exploration and biopsy of eye bone |
| 61480 | Excision of skull to sever a nerve tract to midbrain |
| 61610 | Incision or tying of carotid artery at skull base with graft |
| 61612 | Incision or tying of carotid artery at skull base with graft |
| 63615 | Stereotactic biopsy, aspiration, or removal of spinal cord growth |
| 64508 | Injection of anesthetic agent, carotid sinus nerve |
| 64550 | Application of nerve stimulator electrodes to skin surface |
| 66220 | Removal of protrusion of sclera or cornea |

**101 CMR 316.00: Surgery and Anesthesia—Crosswalk**

| **Deleted Code** | **Adds Crosswalk 1:1** | **Adds Crosswalk 1: many** |
| --- | --- | --- |
| 10022 |  | 10005, 10006, 10007, 10008, 10009, 10010, 10011, 10012 |
| 11100 |  | 11102, 11104, 11106 |
| 11101 |  | 11103, 11105, 11107 |
| 27370 | 27369 |  |
| 33282 | 33285 |  |
| 33284 | 33286 |  |
| 43760 |  | 43762, 43763 |
| 50395 |  | 50436, 50437 |

**101 CMR 316.00: Surgery and Anesthesia Rates**

| **Code** | **Non-Facility Fee** | **Facility Fee** | **Global** | **Professional Component Fee** | **Technical Component Fee** |
| --- | --- | --- | --- | --- | --- |
| 10004 | $42.22 | $35.06 | - | - | - |
| 10005 | $103.11 | $58.66 | - | - | - |
| 10006 | $48.29 | $39.93 | - | - | - |
| 10007 | $236.40 | $75.60 | - | - | - |
| 10008 | $132.82 | $49.28 | - | - | - |
| 10009 | $388.83 | $91.40 | - | - | - |
| 10010 | $233.57 | $66.81 | - | - | - |
| 10011 | - | - | I.C. | - | - |
| 10012 | - | - | I.C. | - | - |
| 11102 | $81.69 | $32.17 | - | - | - |
| 11103 | $43.99 | $18.63 | - | - | - |
| 11104 | $102.70 | $40.35 | - | - | - |
| 11105 | $50.36 | $22.02 | - | - | - |
| 11106 | $124.27 | $49.09 | - | - | - |
| 11107 | $59.36 | $26.25 | - | - | - |
| 20932 | - | - | $576.04 | - | - |
| 20933 | - | - | $528.36 | - | - |
| 20934 | - | - | $575.77 | - | - |
| 27369 | $126.63 | $39.29 | - | - | - |
| 33274 | - | - | $400.95 | - | - |
| 33275 | - | - | $425.11 | - | - |
| 33285 | - | - | $184.81 | - | - |
| 33286 | - | - | $163.88 | - | - |
| 33289 | - | - | $266.22 | - | - |
| 33440 | - | - | $2739.35 | - | - |
| 33866 | - | - | $833.22 | - | - |
| 36572 | $350.08 | $74.13 | - | - | - |
| 36573 | $329.47 | $68.44 | - | - | - |
| 38531 | - | - | $356.54 | - | - |
| 43762 | $186.14 | $30.41 | - | - | - |
| 43763 | $275.59 | $67.95 | - | - | - |
| 50436 | - | - | $122.80 | - | - |
| 50437 | - | - | $204.31 | - | - |
| 53854 | $1536.47 | $308.54 | - | - | - |

**101 CMR 317.00: Medicine—Added Codes**

| **Added Code** | **Description** |
| --- | --- |
| 90689 | Inactivated quadrivalent influenza vaccine for injection into muscle, 0.25 ml dosage |
| 92273 | Full field recording of retinal electrical responses to external stimuli with interpretation and report |
| 92274 | Multifocal recording of retinal electrical responses to external stimuli with interpretation and report |
| 93264 | Remote monitoring of wireless pressure sensor in lung artery with qualified health care professional analysis, review, and report |
| 95836 | Recording of brain cortex electrical responses to implanted stimulation device with interpretation and report |
| 95976 | Electronic analysis of implanted brain, spinal cord or peripheral stimulation device with simple cranial nerve stimulator programming |
| 95977 | Electronic analysis of implanted brain, spinal cord or peripheral stimulation device with complex cranial nerve stimulator programming |
| 95983 | Electronic analysis of implanted brain, spinal cord or peripheral stimulation device with brain stimulator programming, first 15 minutes face-to-face time with qualified health care professional |
| 95984 | Electronic analysis of implanted brain, spinal cord or peripheral stimulation device with brain stimulator programming, additional 15 minutes face-to-face time with qualified health care professional |
| 96112 | Developmental test administration by qualified health care professional with interpretation and report, first 60 minutes |
| 96113 | Developmental test administration by qualified health care professional with interpretation and report, additional 30 minutes |
| 96121 | Neurobehavioral status examination by qualified health care professional with interpretation and report, additional 60 minutes |
| 96130 | Psychological testing evaluation by qualified health care professional, first 60 minutes |
| 96131 | Psychological testing evaluation by qualified health care professional, additional 60 minutes |
| 96132 | Neuropsychological testing evaluation by qualified health care professional, first 60 minutes |
| 96133 | Neuropsychological testing evaluation by qualified health care professional, additional 60 minutes |
| 96136 | Psychological or neuropsychological test administration and scoring by qualified health care professional, first 30 minutes |
| 96137 | Psychological or neuropsychological test administration and scoring by qualified health care professional, additional 30 minutes |
| 96138 | Psychological or neuropsychological test administration and scoring by technician, first 30 minutes |
| 96139 | Psychological or neuropsychological test administration and scoring by technician, additional 30 minutes |
| 96146 | Psychological or neuropsychological test administration and scoring by single standardized instrument via electronic platform with automated result |
| 97151 | Behavior identification assessment by qualified health care professional, each 15 minutes |
| 97152 | Behavior identification assessment by technician under direction of qualified health care professional, each 15 minutes |
| 97153 | Adaptive behavior treatment by protocol, administered by technician under direction of qualified health care professional to one patient, each 15 minutes |
| 97154 | Adaptive behavior treatment by protocol, administered by technician under direction of qualified health care professional to multiple patients, each 15 minutes |
| 97155 | Adaptive behavior treatment with protocol modification administered by qualified health care professional to one patient, each 15 minutes |
| 97156 | Family adaptive behavior treatment guidance by qualified health care professional (with or without patient present), each 15 minutes |
| 97157 | Family adaptive behavior treatment guidance by qualified health care professional without patient present, each 15 minutes |
| 97158 | Group adaptive behavior treatment with protocol modification administered by qualified health care professional to multiple patients, each 15 minutes |
| 99451 | Telephone or internet assessment and management service provided by consultative physician with written report, 5 minutes or more of medical consultative discussion and review |
| 99452 | Telephone or internet referral service, 30 minutes |
| 99453 | Remote monitoring of physiologic parameters, initial set-up and patient education on use of equipment |
| 99454 | Remote monitoring of physiologic parameters, initial supply of devices with daily recordings or programmed alerts transmission, each 30 days |
| 99457 | Remote monitoring of physiologic parameters management services, 20 minutes or more of qualified health care professional time per calendar month |
| 99491 | Chronic care management services by qualified health care professional, 30 minutes or more per calendar month |
| J0567 | Injection, cerliponase alfa, 1 mg |
| J0584 | Injection, burosumab-twza 1 mg |
| J0599 | Injection, c-1 esterase inhibitor (human), (haegarda), 10 units |
| J0841 | Injection, crotalidae immune f(ab')2 (equine), 120 mg |
| J1301 | Injection, edaravone, 1 mg |
| J1628 | Injection, guselkumab, 1 mg |
| J1746 | Injection, ibalizumab-uiyk, 10 mg |
| J2062 | Loxapine for inhalation, 1 mg |
| J2797 | Injection, rolapitant, 0.5 mg |
| J3245 | Injection, tildrakizumab, 1 mg |
| J3316 | Injection, triptorelin, extended-release, 3.75 mg |
| J3397 | Injection, vestronidase alfa-vjbk, 1 mg |
| J3398 | Injection, voretigene neparvovec-rzyl, 1 billion vector genomes |
| J3591 | Unclassified drug or biological used for esrd on dialysis |
| J7177 | Injection, human fibrinogen concentrate (fibryga), 1 mg |
| J7203 | Injection factor ix, (antihemophilic factor, recombinant), glycopegylated, (rebinyn), 1 iu |
| J7318 | Hyaluronan or derivative, durolane, for intra-articular injection, 1 mg |
| J7329 | Hyaluronan or derivative, trivisc, for intra-articular injection, 1 mg |
| J9057 | Injection, copanlisib, 1 mg |
| J9173 | Injection, durvalumab, 10 mg |
| J9229 | Injection, inotuzumab ozogamicin, 0.1 mg |
| Q2042 | Tisagenlecleucel, up to 600 million car-positive viable t cells, including leukapheresis and dose preparation procedures, per therapeutic dose |
| Q4183 | Surgigraft, per square centimeter |
| Q4184 | Cellesta, per square centimeter |
| Q4185 | Cellesta flowable amnion (25 mg per cc); per 0.5 cc |
| Q4187 | Epicord, per square centimeter |
| Q4188 | Amnioarmor, per square centimeter |
| Q4189 | Artacent ac, 1 mg |
| Q4190 | Artacent ac, per square centimeter |
| Q4191 | Restorigin, per square centimeter |
| Q4192 | Restorigin, 1 cc |
| Q4193 | Coll-e-derm, per square centimeter |
| Q4194 | Novachor, per square centimeter |
| Q4197 | Puraply xt, per square centimeter |
| Q4198 | Genesis amniotic membrane, per square centimeter |
| Q4200 | Skin te, per square centimeter |
| Q4201 | Matrion, per square centimeter |
| Q4202 | Keroxx (2.5g/cc), 1cc |
| Q4203 | Derma-gide, per square centimeter |
| Q4204 | Xwrap, per square centimeter |
| Q5107 | Injection, bevacizumab-awwb, biosimilar, (mvasi), 10 mg |
| Q5109 | Injection, infliximab-qbtx, biosimilar, (ixifi), 10 mg |

**101 CMR 317.00: Medicine—Deleted Codes**

| **Deleted Code** | **Description** |
| --- | --- |
| 92275 | Recording of retinal electrical responses to external stimuli |
| 95974 | Electronic analysis and programming of implanted complex cranial neurostimulator generator system during or after surgery, first hour |
| 95975 | Electronic analysis and programming of implanted complex cranial neurostimulator generator system during or after surgery |
| 95978 | Electronic analysis and programming of implanted complex deep brain neurostimulator generator system, first hour |
| 95979 | Electronic analysis and programming of implanted complex deep brain neurostimulator generator system |
| 96101 | Psychological testing with interpretation and report by psychologist or physician per hour |
| 96102 | Psychological testing with interpretation and report by technician per hour |
| 96103 | Psychological testing with interpretation and report by computer |
| 96111 | Developmental testing |
| 96118 | Neuropsychological testing, interpretation, and report by psychologist or physician per hour |
| 96119 | Neuropsychological testing by technician with interpretation and report by a qualified healthcare professional per hour |
| 96120 | Neuropsychological testing by a computer with interpretation and report by a qualified healthcare professional |
| 99090 | Analysis of clinical data stored in computers |

**101 CMR 317.00: Medicine—Crosswalk**

| **Deleted Code** | **Adds Crosswalk 1:1** | **Adds Crosswalk 1: many** |
| --- | --- | --- |
| 92275 |  | 92273, 92274 |
| 95974 |  | 95976, 95977 |
| 95975 |  | 95976, 95977 |
| 95978 |  | 95983, 95984 |
| 95979 |  | 95983, 95984 |
| 96111 |  | 96112, 96113 |

**101 CMR 317.00: Medicine Rates**

| **Code** | **Non-Facility Fee** | **Facility Fee** | **Global** | **Professional Component Fee** | **Technical Component Fee** | |
| --- | --- | --- | --- | --- | --- | --- |
| 90689 | - | - | I.C. | - | - |
| 92273 | - | - | $110.97 | $29.84 | $81.13 |
| 92274 | - | - | $74.78 | $26.46 | $48.31 |
| 93264 | $41.08 | $28.55 | - | - | - |
| 95836 | - | - | $88.07 | - | - |
| 95976 | $32.62 | $32.02 | - | - | - |
| 95977 | $43.31 | $42.71 | - | - | - |
| 95983 | $41.06 | $40.46 | - | - | - |
| 95984 | $35.71 | $35.41 | - | - | - |
| 96112 | $107.47 | $100.90 | - | - | - |
| 96113 | $47.93 | $46.14 | - | - | - |
| 96121 | $64.70 | $61.42 | - | - | - |
| 96130 | $91.72 | $85.75 | - | - | - |
| 96131 | $69.74 | $65.27 | - | - | - |
| 96132 | $103.97 | $83.98 | - | - | - |
| 96133 | $79.29 | $64.37 | - | - | - |
| 96136 | $38.22 | $19.42 | - | - | - |
| 96137 | $35.48 | $15.20 | - | - | - |
| 96138 | - | - | $32.20 | - | - |
| 96139 | - | - | $32.20 | - | - |
| 96146 | - | - | $1.77 | - | - |
| 97151 | - | - | I.C. | - | - |
| 97152 | - | - | I.C. | - | - |
| 97153 | - | - | I.C. | - | - |
| 97154 | - | - | I.C. | - | - |
| 97155 | - | - | I.C. | - | - |
| 97156 | - | - | I.C. | - | - |
| 97157 | - | - | I.C. | - | - |
| 97158 | - | - | I.C. | - | - |
| 99451 | - | - | $29.15 | - | - |
| 99452 | - | - | $29.15 | - | - |
| 99453 | - | - | $16.09 | - | - |
| 99454 | - | - | $53.09 | - | - |
| 99457 | $41.03 | $25.22 | - | - | - |
| 99491 | - | - | $65.65 | - | - |
| J0567 | - | - | I.C. | - | - |
| J0584 | - | - | I.C. | - | - |
| J0599 | - | - | I.C. | - | - |
| J0841 | - | - | I.C. | - | - |
| J1301 | - | - | I.C. | - | - |
| J1628 | - | - | I.C. | - | - |
| J1746 | - | - | I.C. | - | - |
| J2062 | - | - | I.C. | - | - |
| J2797 | - | - | I.C. | - | - |
| J3245 | - | - | I.C. | - | - |
| J3316 | - | - | I.C. | - | - |
| J3397 | - | - | I.C. | - | - |
| J3398 | - | - | I.C. | - | - |
| J3591 | - | - | I.C. | - | - |
| J7177 | - | - | I.C. | - | - |
| J7203 | - | - | I.C. | - | - |
| J7318 | - | - | I.C. | - | - |
| J7329 | - | - | I.C. | - | - |
| J9057 | - | - | I.C. | - | - |
| J9173 | - | - | I.C. | - | - |
| J9229 | - | - | I.C. | - | - |
| Q2042 | - | - | I.C. | - | - |
| Q4183 | - | - | I.C. | - | - |
| Q4184 | - | - | I.C. | - | - |
| Q4185 | - | - | I.C. | - | - |
| Q4187 | - | - | I.C. | - | - |
| Q4188 | - | - | I.C. | - | - |
| Q4189 | - | - | I.C. | - | - |
| Q4190 | - | - | I.C. | - | - |
| Q4191 | - | - | I.C. | - | - |
| Q4192 | - | - | I.C. | - | - |
| Q4193 | - | - | I.C. | - | - |
| Q4194 | - | - | I.C. | - | - |
| Q4197 | - | - | I.C. | - | - |
| Q4198 | - | - | I.C. | - | - |
| Q4200 | - | - | I.C. | - | - |
| Q4201 | - | - | I.C. | - | - |
| Q4202 | - | - | I.C. | - | - |
| Q4203 | - | - | I.C. | - | - |
| Q4204 | - | - | I.C. | - | - |
| Q5107 | - | - | I.C. | - | - |
| Q5109 | - | - | I.C. | - | - |

**101 CMR 318.00: Radiology—Added Codes**

|  |  |
| --- | --- |
| **Added Code** | **Description** |
| 76391 | Magnetic resonance (eg, vibration) elastography |
| 76978 | Ultrasound using targeted microbubble contrast of first lesion |
| 76979 | Ultrasound using targeted microbubble contrast of additional lesion |
| 76981 | Elastography ultrasound of organ tissue |
| 76982 | Elastography ultrasound of first lesion |
| 76983 | Elastography ultrasound of additional lesion |
| 77046 | MRI of one breast |
| 77047 | MRI of both breasts |
| 77048 | MRI of one breast with and without contrast |
| 77049 | MRI of both breasts with and without contrast |

**101 CMR 318.00: Radiology—Deleted Codes**

|  |  |
| --- | --- |
| **Deleted Code** | **Description** |
| 76001 | Imaging guidance for procedure, more than 1 hour |
| 77058 | MRI scan of one breast with contrast |
| 77059 | MRI scan of both breasts with contrast |
| 78270 | Vitamin B-12 absorption study |
| 78271 | Vitamin B-12 absorption study with factor necessary for absorption |
| 78272 | Vitamin B-12 absorption study without then with factor necessary for absorption |

**101 CMR 318.00: Radiology—Crosswalk**

| **Deleted Code** | **Adds Crosswalk 1:1** | **Adds Crosswalk 1: many** |
| --- | --- | --- |
| 77058 |  | 77046, 77048 |
| 77059 |  | 77047, 77049 |

**101 CMR 318.00: Radiology Rates**

| **Code** | **Non-Facility Fee** | **Facility Fee** | **Global** | **Professional Component Fee** | **Technical Component Fee** |
| --- | --- | --- | --- | --- | --- |
| 76391 | - | - | $257.96 | $44.22 | $213.74 |
| 76978 | - | - | $269.53 | $64.30 | $205.23 |
| 76979 | - | - | $183.60 | $33.84 | $149.76 |
| 76981 | - | - | $89.10 | $23.78 | $65.32 |
| 76982 | - | - | $79.55 | $23.78 | $55.77 |
| 76983 | - | - | $48.49 | $20.15 | $28.34 |
| 77046 | - | - | $269.78 | $57.61 | $212.17 |
| 77047 | - | - | $275.55 | $63.77 | $211.78 |
| 77048 | - | - | $364.34 | $83.32 | $281.02 |
| 77049 | - | - | $370.79 | $91.15 | $279.64 |

**Part II: Certain Ophthalmological Service Code Updates Applicable to Physicians**

In accordance with 101 CMR 317.01(4) and 317.01(5), EOHHS is clarifying its policy on the substantive provisions of 101 CMR 317.03(8) (“Services and Payment Covered Under Other Regulations”), within the Medicine regulation at 101 CMR 317.00, insofar as it pertains to Ophthalmological Service Codes 92002, 92004, 92012, and 92014. Rates for the Ophthalmological Service Codes 92002, 92004, 92012, and 92014 listed in the chart within 101 CMR 317.03(8) will continue to be governed by 101 CMR 315:00 *Vision Care Services and Ophthalmic Materials*, except when an eligible provider that is a licensed physician is billing those codes in conjunction with a medical (non-routine) diagnosis code. In accordance with 101 CMR 317.01(4) and 317.01(5), EOHHS is also adding service codes 92002, 92004, 92012, and 92014 to the fee schedule within the Medicine regulation (101 CMR 317.00), which have corresponding rates, as identified in the charts below. The respective rates set forth, below, for service codes 92002, 92004, 92012, and 92014 apply only when billed by an eligible provider that is a licensed physician in conjunction with a medical (non-routine) diagnosis code. These clarifications and updates are effective for dates of service on or after January 1, 2019.

Except as clarified in this Part II, above, 101 CMR 317.03(8) is otherwise unchanged.

**101 CMR 317.00: Medicine—Added Ophthalmological Codes**

|  |  |
| --- | --- |
| **Code** | **Description** |
| 92002 | Eye and medical examination for diagnosis and treatment, new patient |
| 92004 | Eye and medical examination for diagnosis and treatment, new patient, 1 or more visits |
| 92012 | Eye and medical examination for diagnosis and treatment, established patient |
| 92014 | Eye and medical examination for diagnosis and treatment, established patient, 1 or more visits |

**101 CMR 317.00: Medicine—Rates for Added Ophthalmological Codes**

| **Code** | **Non-Facility Fee** | **Facility Fee** | **Global** | **Professional Component Fee** | **Technical Component Fee** |
| --- | --- | --- | --- | --- | --- |
| 92002 | $64.83 | $37.29 | - | - | - |
| 92004 | $118.12 | $77.85 | - | - | - |
| 92012 | $68.15 | $41.20 | - | - | - |
| 92014 | $98.56 | $62.44 | - | - | - |