The Commonwealth of Massachusetts

Executive Office of Health and Human Services

Office of Medicaid

One Ashburton Place, Room 1109

Boston, Massachusetts 02108

DANIEL TSAI

Assistant Secretary for MassHealth

Tel: (617) 573-1600

Fax: (617) 573-1891

www.mass.gov/eohhs

# **Administrative Bulletin 20-38**

**101 CMR 316.00: Surgery and Anesthesia**

**101 CMR 317.00: Medicine**

**101 CMR 318.00: Radiology**

**Effective January 1, 2020**

**(1) CPT/HCPCS 2020 Coding Updates; and**

**(2) Certain Radiology Service Code Updates**

CHARLES D. BAKER

Governor

KARYN E. POLITO

Lieutenant Governor

MARYLOU SUDDERS

Secretary

**Part I: 2020 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Corrections), the Executive Office of Health and Human Services (EOHHS) is adding new service codes and deleting outdated codes, effective for dates of service on and after January 1, 2020. The following lists specify both those codes that have been added and those that have been deleted. The deleted codes 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), rates 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 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, 2019.

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

| **Added Code** | **Description** |
| --- | --- |
| 15769 | Grafting of autologous soft tissue, other, harvested by direct excision (e.g., fat, dermis, fascia) |
| 15771 | Grafting of autologous fat harvested by liposuction technique to trunk, breasts, scalp, arms, and/or legs; 50 cc or less injectate |
| 15772 | Grafting of autologous fat harvested by liposuction technique to trunk, breasts, scalp, arms, and/or legs; each additional 50 cc injectate, or part thereof (List separately in addition to code for primary procedure) |
| 15773 | Grafting of autologous fat harvested by liposuction technique to face, eyelids, mouth, neck, ears, orbits, genitalia, hands, and/or feet; 25 cc or less injectate |
| 15774 | Grafting of autologous fat harvested by liposuction technique to face, eyelids, mouth, neck, ears, orbits, genitalia, hands, and/or feet; each additional 25 cc injectate, or part thereof (List separately in addition to code for primary procedure) |
| 20560 | Needle insertion(s) without injection(s); 1 or 2 muscle(s) |
| 20561 | Needle insertion(s) without injection(s); 3 or more muscles |
| 20700 | Manual preparation and insertion of drug-delivery device(s), deep (e.g., subfascial) (List separately in addition to code for primary procedure) |
| 20701 | Removal of drug-delivery device(s), deep (e.g., subfascial) (List separately in addition to code for primary procedure) |
| 20702 | Manual preparation and insertion of drug-delivery device(s), intramedullary (List separately in addition to code for primary procedure) |
| 20703 | Removal of drug-delivery device(s), intramedullary (List separately in addition to code for primary procedure) |
| 20704 | Manual preparation and insertion of drug-delivery device(s), intra-articular (List separately in addition to code for primary procedure) |
| 20705 | Removal of drug-delivery device(s), intra-articular (List separately in addition to code for primary procedure) |
| 21601 | Excision of chest wall tumor including rib(s) |
| 21602 | Excision of chest wall tumor involving rib(s), with plastic reconstruction; without mediastinal lymphadenectomy |
| 21603 | Excision of chest wall tumor involving rib(s), with plastic reconstruction; with mediastinal lymphadenectomy |
| 33016 | Pericardiocentesis, including imaging guidance, when performed |
| 33017 | Pericardial drainage with insertion of indwelling catheter, percutaneous, including fluoroscopy and/or ultrasound guidance, when performed; 6 years and older without congenital cardiac anomaly |
| 33018 | Pericardial drainage with insertion of indwelling catheter, percutaneous, including fluoroscopy and/or ultrasound guidance, when performed; birth through 5 years of age or any age with congenital cardiac anomaly |
| 33019 | Pericardial drainage with insertion of indwelling catheter, percutaneous, including CT guidance |
| 33858 | Ascending aorta graft, with cardiopulmonary bypass, includes valve suspension, when performed; for aortic dissection |
| 33859 | Ascending aorta graft, with cardiopulmonary bypass, includes valve suspension, when performed; for aortic disease other than dissection (e.g., aneurysm) |
| 33871 | Transverse aortic arch graft, with cardiopulmonary bypass, with profound hypothermia, total circulatory arrest and isolated cerebral perfusion with reimplantation of arch vessel(s) (e.g., island pedicle or individual arch vessel reimplantation) |
| 34717 | Endovascular repair of iliac artery at the time of aorto-iliac artery endograft placement by deployment of an iliac branched endograft including pre-procedure sizing and device selection, all ipsilateral selective iliac artery catheterization(s), all associated radiological supervision and interpretation, and all endograft extension(s) proximally to the aortic bifurcation and distally in the internal iliac, external iliac, and common femoral artery(ies), and treatment zone angioplasty/stenting, when performed, for rupture or other than rupture (e.g., for aneurysm, pseudoaneurysm, dissection, arteriovenous malformation, penetrating ulcer, traumatic disruption), unilateral (List separately in addition to code for primary procedure) |
| 34718 | Endovascular repair of iliac artery, not associated with placement of an aorto-iliac artery endograft at the same session, by deployment of an iliac branched endograft, including pre-procedure sizing and device selection, all ipsilateral selective iliac artery catheterization(s), all associated radiological supervision and interpretation, and all endograft extension(s) proximally to the aortic bifurcation and distally in the internal iliac, external iliac, and common femoral artery(ies), and treatment zone angioplasty/stenting, when performed, for other than rupture (e.g., for aneurysm, pseudoaneurysm, dissection, arteriovenous malformation, penetrating ulcer), unilateral |
| 35702 | Exploration not followed by surgical repair, artery; upper extremity (e.g., axillary, brachial, radial, ulnar) |
| 35703 | Exploration not followed by surgical repair, artery; lower extremity (e.g., common femoral, deep femoral, superficial femoral, popliteal, tibial, peroneal) |
| 46948 | Hemorrhoidectomy, internal, by transanal hemorrhoidal dearterialization, 2 or more hemorrhoid columns/groups, including ultrasound guidance, with mucopexy, when performed |
| 49013 | Preperitoneal pelvic packing for hemorrhage associated with pelvic trauma, including local exploration |
| 49014 | Re-exploration of pelvic wound with removal of preperitoneal pelvic packing, including repacking, when performed |
| 62328 | Spinal puncture, lumbar, diagnostic; with fluoroscopic or CT guidance |
| 62329 | Spinal puncture, therapeutic, for drainage of cerebrospinal fluid (by needle or catheter); with fluoroscopic or CT guidance |
| 64451 | Injection(s), anesthetic agent(s) and/or steroid; nerves innervating the sacroiliac joint, with image guidance (ie, fluoroscopy or computed tomography) |
| 64454 | Injection(s), anesthetic agent(s) and/or steroid; genicular nerve branches, including imaging guidance, when performed |
| 64624 | Destruction by neurolytic agent, genicular nerve branches including imaging guidance, when performed |
| 64625 | Radiofrequency ablation, nerves innervating the sacroiliac joint, with image guidance (ie, fluoroscopy or computed tomography) |
| 66987 | Extracapsular cataract removal with insertion of intraocular lens prosthesis (1-stage procedure), manual or mechanical technique (e.g., irrigation and aspiration or phacoemulsification), complex, requiring devices or techniques not generally used in routine cataract surgery (e.g., iris expansion device, suture support for intraocular lens, or primary posterior capsulorrhexis) or performed on patients in the amblyogenic developmental stage; with endoscopic cyclophotocoagulation |
| 66988 | Extracapsular cataract removal with insertion of intraocular lens prosthesis (1 stage procedure), manual or mechanical technique (e.g., irrigation and aspiration or phacoemulsification); with endoscopic cyclophotocoagulation |

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

|  |  |
| --- | --- |
| **Deleted Code**  | **Description**  |
| 19260 | Excision of chest wall tumor including ribs |
| 19271 | Excision of chest wall tumor involving ribs, with plastic reconstruction; withoutmediastinal lymphadenectomy |
| 19272 | Excision of chest wall tumor involving ribs, with plastic reconstruction; withmediastinal lymphadenectomy |
| 19304 | Mastectomy, subcutaneous |
| 20926 | Tissue grafts, other (e.g., paratenon, fat, dermis) |
| 33010 | Pericardiocentesis; initial |
| 33011 | Pericardiocentesis; subsequent |
| 33015 | Tube pericardiostomy |
| 33860 | Ascending aorta graft, with cardiopulmonary bypass, includes valve suspension,when performed |
| 33870 | Transverse arch graft, with cardiopulmonary bypass |
| 35721 | Exploration (not followed by surgical repair), with or without lysis of artery; femoralartery |
| 35741 | Exploration (not followed by surgical repair), with or without lysis of artery; poplitealartery |
| 35761 | Exploration (not followed by surgical repair), with or without lysis of artery; othervessels |
| 43401 | Transection of esophagus with repair, for esophageal varices |
| 64402 | Injection, anesthetic agent; facial nerve |
| 64410 | Injection, anesthetic agent; phrenic nerve |
| 64413 | Injection, anesthetic agent; cervical plexus |

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

| **Deleted Code(s)** | **Replacement Code(s)** |
| --- | --- |
| 33010, 33011 | 33016 |
| 33010, 33011, 33015 | 33017 |
| 33010, 33011, 33015 | 33018 |
| 33010, 33011, 33015 | 33019 |
| 33860 | 33858, 33859 |
| 35721, 35741, 35761 | 35702 |
| 35721, 35741, 35761 | 35703 |

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

| **Code** | **Non-Facility Fee**  | **Facility Fee** | **Global** | **Professional Component Fee** | **Technical Component Fee** |
| --- | --- | --- | --- | --- | --- |
| 15769 | $ -  | $ -  | $ 392.88  | $ -  | $ -  |
| 15771 | $ 473.28  | $ 389.71  | $ -  | $ -  | $ -  |
| 15772 | $ 148.00  | $ 113.56  | $ -  | $ -  | $ -  |
| 15773 | $ 477.52  | $ 393.95  | $ -  | $ -  | $ -  |
| 15774 | $ 143.58  | $ 109.14  | $ -  | $ -  | $ -  |
| 20560 | $ 21.21  | $ 13.13  | $ -  | $ -  | $ -  |
| 20561 | $ 31.50  | $ 19.82  | $ -  | $ -  | $ -  |
| 20700 | $ -  | $ -  | $ 68.02  | $ -  | $ -  |
| 20701 | $ -  | $ -  | $ 50.76  | $ -  | $ -  |
| 20702 | $ -  | $ -  | $ 113.12  | $ -  | $ -  |
| 20703 | $ -  | $ -  | $ 81.15  | $ -  | $ -  |
| 20704 | $ -  | $ -  | $ 117.86  | $ -  | $ -  |
| 20705 | $ -  | $ -  | $ 97.01  | $ -  | $ -  |
| 21601 | $ -  | $ -  | $ 959.02  | $ -  | $ -  |
| 21602 | $ -  | $ -  | $ 1,292.93  | $ -  | $ -  |
| 21603 | $ -  | $ -  | $ 1,428.11  | $ -  | $ -  |
| 33016 | $ -  | $ -  | $ 189.72  | $ -  | $ -  |
| 33017 | $ -  | $ -  | $ 196.75  | $ -  | $ -  |
| 33018 | $ -  | $ -  | $ 224.33  | $ -  | $ -  |
| 33019 | $ -  | $ -  | $ 182.13  | $ -  | $ -  |
| 33858 | $ -  | $ -  | $ 2,723.16  | $ -  | $ -  |
| 33859 | $ -  | $ -  | $ 1,956.51  | $ -  | $ -  |
| 33871 | $ -  | $ -  | $ 2,617.74  | $ -  | $ -  |
| 34717 | $ -  | $ -  | $ 355.05  | $ -  | $ -  |
| 34718 | $ -  | $ -  | $ 993.83  | $ -  | $ -  |
| 35702 | $ -  | $ -  | $ 331.14  | $ -  | $ -  |
| 35703 | $ -  | $ -  | $ 334.87  | $ -  | $ -  |
| 46948 | $ -  | $ -  | $ 361.48  | $ -  | $ -  |
| 49013 | $ -  | $ -  | $ 352.85  | $ -  | $ -  |
| 49014 | $ -  | $ -  | $ 292.32  | $ -  | $ -  |
| 62328 | $ 216.14  | $ 72.07  | $ - | $ -  | $ -  |
| 62329 | $ 268.11  | $ 90.49  | $ -  | $ -  | $ -  |
| 64451 | $ 174.86  | $ 64.04  | $ -  | $ -  | $ -  |
| 64454 | $ 176.66  | $ 66.13  | $ -  | $ -  | $ -  |
| 64624 | $ 339.09  | $ 119.24  | $ -  | $ -  | $ -  |
| 64625 | $ 413.44  | $ 157.34  | $ -  | $ -  | $ -  |
| 66987 | $ -  | $ -  | I.C. | $ -  | $ -  |
| 66988 | $ -  | $ -  | I.C. | $ -  | $ -  |

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

| **Added Code** | **Description** |
| --- | --- |
| 90619 | Meningococcal conjugate vaccine, serogroups A, C, W, Y, quadrivalent, tetanus toxoid carrier (MenACWY-TT), for intramuscular use |
| 90694 | Influenza virus vaccine, quadrivalent (aIIV4), inactivated, adjuvanted, preservative free, 0.5 mL dosage, for intramuscular use |
| 90912 | Biofeedback training, perineal muscles, anorectal or urethral sphincter, including EMG and/or manometry, when performed; initial 15 minutes of one-on-one physician or other qualified health care professional contact with the patient |
| 90913 | Biofeedback training, perineal muscles, anorectal or urethral sphincter, including EMG and/or manometry, when performed; each additional 15 minutes of one-on-one physician or other qualified health care professional contact with the patient (List separately in addition to code for primary procedure) |
| 92201 | Ophthalmoscopy, extended; with retinal drawing and scleral depression of peripheral retinal disease (e.g., for retinal tear, retinal detachment, retinal tumor) with interpretation and report, unilateral or bilateral |
| 92202 | Ophthalmoscopy, extended; with drawing of optic nerve or macula (e.g., for glaucoma, macular pathology, tumor) with interpretation and report, unilateral or bilateral |
| 92549 | Computerized dynamic posturography sensory organization test (CDP-SOT), 6 conditions (ie, eyes open, eyes closed, visual sway, platform sway, eyes closed platform sway, platform and visual sway), including interpretation and report; with motor control test (MCT) and adaptation test (ADT) |
| 93356 | Myocardial strain imaging using speckle tracking-derived assessment of myocardial mechanics (List separately in addition to codes for echocardiography imaging) |
| 93985 | Duplex scan of arterial inflow and venous outflow for preoperative vessel assessment prior to creation of hemodialysis access; complete bilateral study |
| 93986 | Duplex scan of arterial inflow and venous outflow for preoperative vessel assessment prior to creation of hemodialysis access; complete unilateral study |
| 95700 | Electroencephalogram (EEG) continuous recording, with video when performed, setup, patient education, and takedown when performed, administered in person by EEG technologist, minimum of 8 channels |
| 95705 | Electroencephalogram (EEG), without video, review of data, technical description by EEG technologist, 2-12 hours; unmonitored |
| 95706 | Electroencephalogram (EEG), without video, review of data, technical description by EEG technologist, 2-12 hours; with intermittent monitoring and maintenance |
| 95707 | Electroencephalogram (EEG), without video, review of data, technical description by EEG technologist, 2-12 hours; with continuous, real-time monitoring and maintenance |
| 95708 | Electroencephalogram (EEG), without video, review of data, technical description by EEG technologist, each increment of 12-26 hours; unmonitored |
| 95709 | Electroencephalogram (EEG), without video, review of data, technical description by EEG technologist, each increment of 12-26 hours; with intermittent monitoring and maintenance |
| 95710 | Electroencephalogram (EEG), without video, review of data, technical description by EEG technologist, each increment of 12-26 hours; with continuous, real-time monitoring and maintenance |
| 95711 | Electroencephalogram with video (VEEG), review of data, technical description by EEG technologist, 2-12 hours; unmonitored |
| 95712 | Electroencephalogram with video (VEEG), review of data, technical description by EEG technologist, 2-12 hours; with intermittent monitoring and maintenance |
| 95713 | Electroencephalogram with video (VEEG), review of data, technical description by EEG technologist, 2-12 hours; with continuous, real-time monitoring and maintenance |
| 95714 | Electroencephalogram with video (VEEG), review of data, technical description by EEG technologist, each increment of 12-26 hours; unmonitored |
| 95715 | Electroencephalogram with video (VEEG), review of data, technical description by EEG technologist, each increment of 12-26 hours; with intermittent monitoring and maintenance |
| 95716 | Electroencephalogram with video (VEEG), review of data, technical description by EEG technologist, each increment of 12-26 hours; with continuous, real-time monitoring and maintenance |
| 95717 | Electroencephalogram (EEG), continuous recording, physician or other qualified health care professional review of recorded events, analysis of spike and seizure detection, interpretation and report, 2-12 hours of EEG recording; without video |
| 95718 | Electroencephalogram (EEG), continuous recording, physician or other qualified health care professional review of recorded events, analysis of spike and seizure detection, interpretation and report, 2-12 hours of EEG recording; with video (VEEG) |
| 95719 | Electroencephalogram (EEG), continuous recording, physician or other qualified health care professional review of recorded events, analysis of spike and seizure detection, each increment of greater than 12 hours, up to 26 hours of EEG recording, interpretation and report after each 24-hour period; without video |
| 95720 | Electroencephalogram (EEG), continuous recording, physician or other qualified health care professional review of recorded events, analysis of spike and seizure detection, each increment of greater than 12 hours, up to 26 hours of EEG recording, interpretation and report after each 24-hour period; with video (VEEG) |
| 95721 | Electroencephalogram (EEG), continuous recording, physician or other qualified health care professional review of recorded events, analysis of spike and seizure detection, interpretation, and summary report, complete study; greater than 36 hours, up to 60 hours of EEG recording, without video |
| 95722 | Electroencephalogram (EEG), continuous recording, physician or other qualified health care professional review of recorded events, analysis of spike and seizure detection, interpretation, and summary report, complete study; greater than 36 hours, up to 60 hours of EEG recording, with video (VEEG) |
| 95723 | Electroencephalogram (EEG), continuous recording, physician or other qualified health care professional review of recorded events, analysis of spike and seizure detection, interpretation, and summary report, complete study; greater than 60 hours, up to 84 hours of EEG recording, without video |
| 95724 | Electroencephalogram (EEG), continuous recording, physician or other qualified health care professional review of recorded events, analysis of spike and seizure detection, interpretation, and summary report, complete study; greater than 60 hours, up to 84 hours of EEG recording, with video (VEEG) |
| 95725 | Electroencephalogram (EEG), continuous recording, physician or other qualified health care professional review of recorded events, analysis of spike and seizure detection, interpretation, and summary report, complete study; greater than 84 hours of EEG recording, without video |
| 95726 | Electroencephalogram (EEG), continuous recording, physician or other qualified health care professional review of recorded events, analysis of spike and seizure detection, interpretation, and summary report, complete study; greater than 84 hours of EEG recording, with video (VEEG) |
| 96156 | Health behavior assessment, or re-assessment (ie, health-focused clinical interview, behavioral observations, clinical decision making) |
| 96158 | Health behavior intervention, individual, face-to-face; initial 30 minutes |
| 96159 | Health behavior intervention, individual, face-to-face; each additional 15 minutes (List separately in addition to code for primary service) |
| 96164 | Health behavior intervention, group (2 or more patients), face-to-face; initial 30 minutes |
| 96165 | Health behavior intervention, group (2 or more patients), face-to-face; each additional 15 minutes (List separately in addition to code for primary service) |
| 96167 | Health behavior intervention, family (with the patient present), face-to-face; initial 30 minutes |
| 96168 | Health behavior intervention, family (with the patient present), face-to-face; each additional 15 minutes (List separately in addition to code for primary service) |
| 96170 | Health behavior intervention, family (without the patient present), face-to-face; initial 30 minutes |
| 96171 | Health behavior intervention, family (without the patient present), face-to-face; each additional 15 minutes (List separately in addition to code for primary service) |
| 97129 | Therapeutic interventions that focus on cognitive function (e.g., attention, memory, reasoning, executive function, problem solving, and/or pragmatic functioning) and compensatory strategies to manage the performance of an activity (e.g., managing time or schedules, initiating, organizing, and sequencing tasks), direct (one-on-one) patient contact; initial 15 minutes |
| 97130 | Therapeutic interventions that focus on cognitive function (e.g., attention, memory, reasoning, executive function, problem solving, and/or pragmatic functioning) and compensatory strategies to manage the performance of an activity (e.g., managing time or schedules, initiating, organizing, and sequencing tasks), direct (one-on-one) patient contact; each additional 15 minutes (List separately in addition to code for primary procedure) |
| 98970 | Qualified nonphysician health care professional online digital evaluation and management service, for an established patient, for up to 7 days, cumulative time during the 7 days; 5-10 minutes |
| 98971 | Qualified nonphysician health care professional online digital evaluation and management service, for an established patient, for up to 7 days, cumulative time during the 7 days; 11-20 minutes |
| 98972 | Qualified nonphysician health care professional online digital evaluation and management service, for an established patient, for up to 7 days, cumulative time during the 7 days; 21 or more minutes |
| 99421 | Online digital evaluation and management service, for an established patient, for up to 7 days, cumulative time during the 7 days; 5-10 minutes |
| 99422 | Online digital evaluation and management service, for an established patient, for up to 7 days, cumulative time during the 7 days; 11-20 minutes |
| 99423 | Online digital evaluation and management service, for an established patient, for up to 7 days, cumulative time during the 7 days; 21 or more minutes |
| 99458 | Remote physiologic monitoring treatment management services, clinical staff/physician/other qualified health care professional time in a calendar month requiring interactive communication with the patient/caregiver during the month; each additional 20 minutes (List separately in addition to code for primary procedure) |
| 99473 | Self-measured blood pressure using a device validated for clinical accuracy; patient education/training and device calibration |
| 99474 | Self-measured blood pressure using a device validated for clinical accuracy; separate self-measurements of two readings one minute apart, twice daily over a 30-day period (minimum of 12 readings), collection of data reported by the patient and/or caregiver to the physician or other qualified health care professional, with report of average systolic and diastolic pressures and subsequent communication of a treatment plan to the patient |
| A9590 | Iodine I-131, iobenguane, 1 mCi |
| J0222 | Injection, patisiran, 0.1 mg |
| J0291 | Injection, plazomicin, 5 mg |
| J0593 | Injection, lanadelumab-flyo, 1 mg (code may be used for Medicare when drug administered under direct supervision of a physician, not for use when drug is self-administered) |
| J1096 | Dexamethasone, lacrimal ophthalmic insert, 0.1 mg |
| J1097 | Phenylephrine 10.16 mg/ml and ketorolac 2.88 mg/ml ophthalmic irrigation solution, 1 ml |
| J1444 | Injection, ferric pyrophosphate citrate powder, 0.1 mg of iron |
| J3031 | Injection, fremanezumab-vfrm, 1 mg (code may be used for Medicare when drug administered under the direct supervision of a physician, not for use when drug is self-administered) |
| J7314 | Injection, fluocinolone acetonide, intravitreal implant (Yutiq), 0.01 mg |
| J7331 | Hyaluronan or derivative, SYNOJOYNT, for intra-articular injection, 1 mg |
| J7332 | Hyaluronan or derivative, Triluron, for intra-articular injection, 1 mg |
| J7401 | Mometasone furoate sinus implant, 10 mcg |
| J7677 | Revefenacin inhalation solution, FDA-approved final product, noncompounded, administered through DME, 1 mcg |
| J9118 | Injection, calaspargase pegol-mknl, 10 units |
| J9199 | Injection, gemcitabine HCl (Infugem), 200 mg |
| J9210 | Injection, emapalumab-lzsg, 1 mg |
| J9269 | Injection, tagraxofusp-erzs, 10 mcg |
| J9313 | Injection, moxetumomab pasudotox-tdfk, 0.01 mg |
| Q4205 | Membrane Graft or Membrane Wrap, per sq cm |
| Q4206 | Fluid Flow or Fluid GF, 1 cc |
| Q4208 | Novafix, per sq cm |
| Q4209 | SurGraft, per sq cm |
| Q4210 | Axolotl Graft or Axolotl DualGraft, per sq cm |
| Q4211 | Amnion Bio or AxoBioMembrane, per sq cm |
| Q4212 | AlloGen, per cc |
| Q4213 | Ascent, 0.5 mg |
| Q4214 | Cellesta Cord, per sq cm |
| Q4215 | Axolotl Ambient or Axolotl Cryo, 0.1 mg |
| Q4216 | Artacent Cord, per sq cm |
| Q4217 | WoundFix, BioWound, WoundFix Plus, BioWound Plus, WoundFix Xplus or BioWound Xplus, per sq cm |
| Q4218 | SurgiCORD, per sq cm |
| Q4219 | SurgiGRAFT-DUAL, per sq cm |
| Q4220 | BellaCell HD or Surederm, per sq cm |
| Q4221 | Amnio Wrap2, per sq cm |
| Q4222 | ProgenaMatrix, per sq cm |
| Q4226 | MyOwn Skin, includes harvesting and preparation procedures, per sq cm |
| Q5112 | Injection, trastuzumab-dttb, biosimilar, (Ontruzant), 10 mg |
| Q5113 | Injection, trastuzumab-pkrb, biosimilar, (Herzuma), 10 mg |
| Q5114 | Injection, Trastuzumab-dkst, biosimilar, (Ogivri), 10 mg |
| Q5115 | Injection, rituximab-abbs, biosimilar, (Truxima), 10 mg |
| Q5116 | Injection, trastuzumab-qyyp, biosimilar, (Trazimera), 10 mg |
| Q5118 | Injection, bevacizumab-bvcr, biosimilar, (Zirabev), 10 mg |

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

| **Deleted Code**  |  **Description**  |
| --- | --- |
| 90911 | Biofeedback training, perineal muscles, anorectal or urethral sphincter, including EMGand/or manometry |
| 92225 | Ophthalmoscopy, extended, with retinal drawing (e.g., for retinal detachment,melanoma), with interpretation and report; initial |
| 92226 | Ophthalmoscopy, extended, with retinal drawing (e.g., for retinal detachment, melanoma), with interpretation and report; subsequent |
| 93299 | Interrogation device evaluation(s), (remote) up to 30 days; implantable cardiovascularmonitor system or implantable loop recorder system, remote data acquisition(s),receipt of transmissions and technician review, technical support and distribution ofresults |
| 95827 | Eeg all night recording |
| 95831 | Muscle testing, manual (separate procedure) with report; extremity (excluding hand)or trunk |
| 95832 | Muscle testing, manual (separate procedure) with report; hand, with or withoutcomparison with normal side |
| 95833 | Muscle testing, manual (separate procedure) with report; total evaluation of body,excluding hands |
| 95834 | Muscle testing, manual (separate procedure) with report; total evaluation of body,including hands |
| 95950 | Ambulatory eeg monitoring |
| 95951 | Eeg monitoring/videorecord |
| 95953 | Eeg monitoring/computer |
| 95956 | Eeg monitor technol attended |
| 96150 | Health and behavior assessment (e.g., health-focused clinical interview, behavioralobservations, psychophysiological monitoring, health-oriented questionnaires), each15 minutes face-to-face with the patient; initial assessment |
| 96151 | Health and behavior assessment (e.g., health-focused clinical interview, behavioralobservations, psychophysiological monitoring, health-oriented questionnaires), each15 minutes face-to-face with the patient; re-assessment |
| 96152 | Health and behavior intervention, each 15 minutes, face-to-face; individual |
| 96153 | Health and behavior intervention, each 15 minutes, face-to-face; group (2 or morepatients) |
| 96154 | Health and behavior intervention, each 15 minutes, face-to-face; family (with thepatient present) |
| 96155 | Health and behavior intervention, each 15 minutes, face-to-face; family (without thepatient present) |
| 97127 | Therapeutic interventions that focus on cognitive function (e.g., attention, memory, reasoning, executive function, problem solving, and/or pragmatic functioning) and compensatory strategiess to manage the performance of an activity (e.g., managing time or schedules, initiating, organizing and sequencing tasks), direct (one-on-one) patient contact |
| 98969 | Online assessment and management service provided by a qualified nonphysicianhealth care professional to an established patient or guardian, not originating from arelated assessment and management service provided within the previous 7 days,using the Internet or similar electronic communications network |
| 99444 | Online evaluation and management service provided by a physician or other qualifiedhealth care professional who may report evaluation and management servicesprovided to an established patient or guardian, not originating from a related E/Mservice provided within the previous 7 days, using the Internet or similar electroniccommunications network |
| J1942 | Injection, aripiprazole lauroxil, 1 mg |
| J9031 | Bcg (intravesical) per instillation |

**101 CMR 317.00: Medicine – Crosswalk**

|  |  |
| --- | --- |
| **Deleted Code(s)** | **Replacement Code(s)** |
| 90911 | 90912, 90913 |
| 92225, 92226 | 92201 |
| 92225, 92226 | 92202 |
| 95953 | 95706 , 95709 |
| 95951 | 95712 , 95715 |
| 95956 | 95713 , 95716 |
| 96150 | 96156 |
| 96151 | 96158 |
| 96152 | 96159 |
| 96153 | 96164, 96165 |
| 96154 | 96167, 96168 |
| 96155 | 96170, 96171 |
| 97127 | 97129 |
| 98969 | 98970, 98971, 98972 |

**101 CMR 317.00: Medicine Rates**

| **Code** | **Non-Facility Fee**  | **Facility Fee** | **Global** | **Professional Component Fee** | **Technical Component Fee** |
| --- | --- | --- | --- | --- | --- |
| 90619 | $ -  | $ -  | I.C. | $ -  | $ -  |
| 90694 | $ -  | $ -  | I.C. | $ -  | $ -  |
| 90912 | $ 65.48  | $ 35.22  | $ -  | $ -  | $ -  |
| 90913 | $ 26.15  | $ 19.56  | $ -  | $ -  | $ -  |
| 92201 | $ 20.16  | $ 18.36  | $ -  | $ -  | $ -  |
| 92202 | $ 12.77  | $ 11.87  | $ -  | $ -  | $ -  |
| 92549 | $ -  | $ -  | $ 51.57  | $ 36.04  | $ 15.53  |
| 93356 | $ 33.14  | $ 9.48  | $ -  | $ -  | $ -  |
| 93985 | $ -  | $ -  | $ 222.95  | $ 30.50  | $ 192.45  |
| 93986 | $ -  | $ -  | $ 129.16  | $ 19.62  | $ 109.53  |
| 95700 | $ -  | $ -  | I.C. | $ -  | $ -  |
| 95705 | $ -  | $ -  | I.C. | $ -  | $ -  |
| 95706 | $ -  | $ -  | I.C. | $ -  | $ -  |
| 95707 | $ -  | $ -  | I.C. | $ -  | $ -  |
| 95708 | $ -  | $ -  | I.C. | $ -  | $ -  |
| 95709 | $ -  | $ -  | I.C. | $ -  | $ -  |
| 95710 | $ -  | $ -  | I.C. | $ -  | $ -  |
| 95711 | $ -  | $ -  | I.C. | $ -  | $ -  |
| 95712 | $ -  | $ -  | I.C. | $ -  | $ -  |
| 95713 | $ -  | $ -  | I.C. | $ -  | $ -  |
| 95714 | $ -  | $ -  | I.C. | $ -  | $ -  |
| 95715 | $ -  | $ -  | I.C. | $ -  | $ -  |
| 95716 | $ -  | $ -  | I.C. | $ -  | $ -  |
| 95717 | $ 82.43  | $ 81.23  | $ -  | $ -  | $ -  |
| 95718 | $ 108.73  | $ 106.94  | $ -  | $ -  | $ -  |
| 95719 | $ 127.69  | $ 126.20  | $ -  | $ -  | $ -  |
| 95720 | $ 168.32  | $ 165.62  | $ -  | $ -  | $ -  |
| 95721 | $ 169.81  | $ 166.22  | $ -  | $ -  | $ -  |
| 95722 | $ 206.00  | $ 202.10  | $ -  | $ -  | $ -  |
| 95723 | $ 210.57  | $ 205.78  | $ -  | $ -  | $ -  |
| 95724 | $ 263.08  | $ 257.69  | $ -  | $ -  | $ -  |
| 95725 | $ 240.44  | $ 234.15  | $ -  | $ -  | $ -  |
| 95726 | $ 332.50  | $ 325.61  | $ -  | $ -  | $ -  |
| 96156 | $ 16.50  | $ 16.20  | $ -  | $ -  | $ -  |
| 96158 | $ 15.66  | $ 15.37  | $ -  | $ -  | $ -  |
| 96159 | $ 15.12  | $ 14.83  | $ -  | $ -  | $ -  |
| 96164 | $ 7.81  | $ 6.91  | $ -  | $ -  | $ -  |
| 96165 | $ 3.64  | $ 3.04  | $ -  | $ -  | $ -  |
| 96167 | $ 56.59  | $ 50.60  | $ -  | $ -  | $ -  |
| 96168 | $ 20.08  | $ 17.98  | $ -  | $ -  | $ -  |
| 96170 | $ 64.57  | $ 61.28  | $ -  | $ -  | $ -  |
| 96171 | $ 23.56  | $ 22.36  | $ -  | $ -  | $ -  |
| 97129 | $ -  | $ -  | I.C. | $ -  | $ -  |
| 97130 | $ -  | $ -  | $ 18.16  | $ -  | $ -  |
| 98970 | $ -  | $ -  | I.C. | $ -  | $ -  |
| 98971 | $ -  | $ -  | I.C. | $ -  | $ -  |
| 98972 | $ -  | $ -  | I.C. | $ -  | $ -  |
| 99421 | $ 12.15  | $ 10.35  | $ -  | $ -  | $ -  |
| 99422 | $ 24.26  | $ 21.26  | $ -  | $ -  | $ -  |
| 99423 | $ 39.23  | $ 33.84  | $ -  | $ -  | $ -  |
| 99458 | $ 33.26  | $ 25.48  | $ -  | $ -  | $ -  |
| 99473 | $ -  | $ -  | $ 9.24  | $ -  | $ -  |
| 99474 | $ 12.08  | $ 6.98  | $ -  | $ -  | $ -  |
| A9590 | $ -  | $ -  | I.C. | $ -  | $ -  |
| J0222 | $ -  | $ -  | I.C. | $ -  | $ -  |
| J0291 | $ -  | $ -  | I.C. | $ -  | $ -  |
| J0593 | $ -  | $ -  | I.C. | $ -  | $ -  |
| J1096 | $ -  | $ -  | I.C. | $ -  | $ -  |
| J1097 | $ -  | $ -  | I.C. | $ -  | $ -  |
| J1444 | $ -  | $ -  | I.C. | $ -  | $ -  |
| J3031 | $ -  | $ -  | I.C. | $ -  | $ -  |
| J7314 | $ -  | $ -  | I.C. | $ -  | $ -  |
| J7331 | $ -  | $ -  | I.C. | $ -  | $ -  |
| J7332 | $ -  | $ -  | I.C. | $ -  | $ -  |
| J7401 | $ -  | $ -  | I.C. | $ -  | $ -  |
| J7677 | $ -  | $ -  | I.C. | $ -  | $ -  |
| J9118 | $ -  | $ -  | I.C. | $ -  | $ -  |
| J9199 | $ -  | $ -  | I.C. | $ -  | $ -  |
| J9210 | $ -  | $ -  | I.C. | $ -  | $ -  |
| J9269 | $ -  | $ -  | I.C. | $ -  | $ -  |
| J9313 | $ -  | $ -  | I.C. | $ -  | $ -  |
| Q4205 | $ -  | $ -  | I.C. | $ -  | $ -  |
| Q4206 | $ -  | $ -  | I.C. | $ -  | $ -  |
| Q4208 | $ -  | $ -  | I.C. | $ -  | $ -  |
| Q4209 | $ -  | $ -  | I.C. | $ -  | $ -  |
| Q4210 | $ -  | $ -  | I.C. | $ -  | $ -  |
| Q4211 | $ -  | $ -  | I.C. | $ -  | $ -  |
| Q4212 | $ -  | $ -  | I.C. | $ -  | $ -  |
| Q4213 | $ -  | $ -  | I.C. | $ -  | $ -  |
| Q4214 | $ -  | $ -  | I.C. | $ -  | $ -  |
| Q4215 | $ -  | $ -  | I.C. | $ -  | $ -  |
| Q4216 | $ -  | $ -  | I.C. | $ -  | $ -  |
| Q4217 | $ -  | $ -  | I.C. | $ -  | $ -  |
| Q4218 | $ -  | $ -  | I.C. | $ -  | $ -  |
| Q4219 | $ -  | $ -  | I.C. | $ -  | $ -  |
| Q4220 | $ -  | $ -  | I.C. | $ -  | $ -  |
| Q4221 | $ -  | $ -  | I.C. | $ -  | $ -  |
| Q4222 | $ -  | $ -  | I.C. | $ -  | $ -  |
| Q4226 | $ -  | $ -  | I.C. | $ -  | $ -  |
| Q5112 | $ -  | $ -  | I.C. | $ -  | $ -  |
| Q5113 | $ -  | $ -  | I.C. | $ -  | $ -  |
| Q5114 | $ -  | $ -  | I.C. | $ -  | $ -  |
| Q5115 | $ -  | $ -  | I.C. | $ -  | $ -  |
| Q5116 | $ -  | $ -  | I.C. | $ -  | $ -  |
| Q5118 | $ -  | $ -  | I.C. | $ -  | $ -  |

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

| **Added Code** | **Description** |
| --- | --- |
| 74221 | Radiologic examination, esophagus, including scout chest radiograph(s) and delayed image(s), when performed; double-contrast (e.g., high-density barium and effervescent agent) study |
| 74248 | Radiologic small intestine follow-through study, including multiple serial images (List separately in addition to code for primary procedure for upper GI radiologic examination) |
| 78429 | Myocardial imaging, positron emission tomography (PET), metabolic evaluation study (including ventricular wall motion[s] and/or ejection fraction[s], when performed), single study; with concurrently acquired computed tomography transmission scan |
| 78430 | Myocardial imaging, positron emission tomography (PET), perfusion study (including ventricular wall motion[s] and/or ejection fraction[s], when performed); single study, at rest or stress (exercise or pharmacologic), with concurrently acquired computed tomography transmission scan |
| 78431 | Myocardial imaging, positron emission tomography (PET), perfusion study (including ventricular wall motion[s] and/or ejection fraction[s], when performed); multiple studies at rest and stress (exercise or pharmacologic), with concurrently acquired computed tomography transmission scan |
| 78432 | Myocardial imaging, positron emission tomography (PET), combined perfusion with metabolic evaluation study (including ventricular wall motion[s] and/or ejection fraction[s], when performed), dual radiotracer (e.g., myocardial viability); |
| 78433 | Myocardial imaging, positron emission tomography (PET), combined perfusion with metabolic evaluation study (including ventricular wall motion[s] and/or ejection fraction[s], when performed), dual radiotracer (e.g., myocardial viability); with concurrently acquired computed tomography transmission scan |
| 78434 | Absolute quantitation of myocardial blood flow (AQMBF), positron emission tomography (PET), rest and pharmacologic stress (List separately in addition to code for primary procedure) |
| 78830 | Radiopharmaceutical localization of tumor, inflammatory process or distribution of radiopharmaceutical agent(s) (includes vascular flow and blood pool imaging, when performed); tomographic (SPECT) with concurrently acquired computed tomography (CT) transmission scan for anatomical review, localization and determination/detection of pathology, single area (e.g., head, neck, chest, pelvis), single day imaging |
| 78831 | Radiopharmaceutical localization of tumor, inflammatory process or distribution of radiopharmaceutical agent(s) (includes vascular flow and blood pool imaging, when performed); tomographic (SPECT), minimum 2 areas (e.g., pelvis and knees, abdomen and pelvis), single day imaging, or single area imaging over 2 or more days |
| 78832 | Radiopharmaceutical localization of tumor, inflammatory process or distribution of radiopharmaceutical agent(s) (includes vascular flow and blood pool imaging, when performed); tomographic (SPECT) with concurrently acquired computed tomography (CT) transmission scan for anatomical review, localization and determination/detection of pathology, minimum 2 areas (e.g., pelvis and knees, abdomen and pelvis), single day imaging, or single area imaging over 2 or more days |
| 78835 | Radiopharmaceutical quantification measurement(s) single area (List separately in addition to code for primary procedure) |

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

|  |  |
| --- | --- |
| **Deleted Code**  |  **Description**  |
| 74241 | Radiologic examination, gastrointestinal tract, upper; with or without delayed images, withKUB |
| 74245 | Radiologic examination, gastrointestinal tract, upper; with small intestine, includes multiple serial images |
| 74247 | Radiological examination, gastrointestinal tract, upper, air contrast, with specific high densitybarium, effervescent agent, with or without glucagon; with or without delayed images, with KUB |
| 74249 | Radiological examination, gastrointestinal tract, upper, air contrast, with specific high density barium, effervescent agent, with or without glucagon; with small intestine follow-through |
| 74260 | Duodenography, hypotonic |
| 76930 | Ultrasonic guidance for pericardiocentesis, imaging supervision and interpretation |
| 78205 | Liver imaging (SPECT); |
| 78206 | Liver imaging (SPECT); with vascular flow |
| 78320 | Bone and/or joint imaging; tomographic (SPECT) |
| 78607 | Brain imaging, tomographic (SPECT) |
| 78647 | Cerebrospinal fluid flow, imaging (not including introduction of material); tomographic(SPECT) |
| 78710 | Kidney imaging morphology; tomographic (SPECT) |
| 78805 | Radiopharmaceutical localization of inflammatory process; limited area |
| 78806 | Radiopharmaceutical localization of inflammatory process; whole body |
| 78807 | Radiopharmaceutical localization of inflammatory process; tomographic (SPECT) |

**101 CMR 318.00: Radiology – Crosswalk**

|  |  |
| --- | --- |
| **Deleted Code(s)** | **Replacement Code(s)** |
| 78805, 78806, 78807 | 78830 |
| 78805, 78806, 78807 | 78831 |
| 78805, 78806, 78807 | 78832 |

**101 CMR 318.00: Radiology Rates**

| **Code** | **NFAC** | **FAC** | **Global**  | **PC**  | **TC**  |
| --- | --- | --- | --- | --- | --- |
| 74221 | $ -  | $ -  | $ 89.69  | $ 27.74  | $ 61.96  |
| 74248 | $ -  | $ -  | $ 67.57  | $ 27.74  | $ 39.84  |
| 78429 | $ -  | $ -  | $ -  | $ 66.24  | $ 11.93  |
| 78430 | $ -  | $ -  | $ -  | $ 62.88  | $ 11.93  |
| 78431 | $ -  | $ -  | $ -  | $ 73.28  | $ 1,867.79  |
| 78432 | $ -  | $ -  | $ -  | $ 77.94  | $ 2,282.63  |
| 78433 | $ -  | $ -  | $ -  | $ 85.20  | $ 2,282.63  |
| 78434 | $ -  | $ -  | $ -  | $ 24.67  | $ -  |
| 78830 | $ -  | $ -  | $ 417.14  | $ 57.04  | $ 360.10  |
| 78831 | $ -  | $ -  | $ 604.12  | $ 69.59  | $ 534.53  |
| 78832 | $ -  | $ -  | $ 786.92  | $ 81.06  | $ 705.86  |
| 78835 | $ -  | $ -  | $ 87.03  | $ 17.88  | $ 69.14  |

**Part II: Certain Radiology Service Code Updates**

In accordance with 101 CMR 318.01(5), the following codes are being added effective January 1, 2020. These codes are based on the 2020 HCPCS Level II codes. These added codes will be reimbursed by individual consideration (I.C.). Rates for these codes are applicable until revised rates are issued by EOHHS.

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

|  |  |
| --- | --- |
| **Code** | **Description** |
| A9552 | Fluorodeoxyglucose f-18 fdg, diagnostic, per study dose, up to 45 millicuries |
| A9586 | Florbetapir f18, diagnostic, per study dose, up to 10 millicuries |
| A9587 | Gallium ga-68, dotatate, diagnostic, 0.1 millicurie |
| A9588 | Fluciclovine f-18, diagnostic, 1 millicurie |
| G0399 | Home sleep test (HST) with type III portable monitor, unattended; minimum of 4 channels: 2 respiratory movement/airflow, 1 ECG/heart rate and 1 oxygen saturation |

**101 CMR 318.00: Radiology Rates**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Code** | **NFAC** | **FAC** | **GL**  | **PC**  | **TC**  |
| A9552 | $ -  | $ -  | I.C. | $ -  | $ -  |
| A9586 | $ -  | $ -  | I.C. | $ -  | $ -  |
| A9587 | $ -  | $ -  | I.C. | $ -  | $ -  |
| A9588 | $ -  | $ -  | I.C. | $ -  | $ -  |
| G0399 | $ -  | $ -  | I.C. | $ -  | $ -  |