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Administrative Bulletin 21-06

101 CMR 316.00: Surgery and Anesthesia
101 CMR 317.00: Medicine
101 CMR 318.00: Radiology

Effective January 1, 2021

(1) CPT/HCPCS 2021 Coding Updates; and
(2) CPT/HCPCS 2020 Coding Updates

Part I: 2021 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and Corrections*, the Executive Office of Health and Human Services (EOHHS) is adding new service codes and deleting outdated codes, effective for dates of service on and after January 1, 2021. 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), 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 EOHHS. Deleted codes are not available for use for dates of service after December 31, 2020.

101 CMR 316.00: Surgery and Anesthesia – Added Codes

Code	Description
30468	Repair of nasal valve collapse with subcutaneous/submucosal lateral wall implant(s)
32408	Core needle biopsy, lung or mediastinum, percutaneous, including imaging guidance, when performed
33741	Transcatheter atrial septostomy (TAS) for congenital cardiac anomalies to create effective atrial flow, including all imaging guidance by the proceduralist, when performed, any method (e.g., Rashkind, Sang-Park, balloon, cutting balloon, blade)
33745	Transcatheter intracardiac shunt (TIS) creation by stent placement for congenital cardiac anomalies to establish effective intracardiac flow, including all imaging guidance by the proceduralist, when performed, left and right heart diagnostic cardiac catheterization for congenital cardiac anomalies, and target zone angioplasty, when performed (e.g., atrial septum, Fontan fenestration, right ventricular outflow tract, Mustard/Senning/Warden baffles); initial intracardiac shunt



Code	Description
33746	Transcatheter intracardiac shunt (TIS) creation by stent placement for congenital cardiac anomalies to establish effective intracardiac flow, including all imaging guidance by the proceduralist, when performed, left and right heart diagnostic cardiac catheterization for congenital cardiac anomalies, and target zone angioplasty, when performed (e.g., atrial septum, Fontan fenestration, right ventricular outflow tract, Mustard/Senning/Warden baffles); each additional intracardiac shunt location (List separately in addition to code for primary procedure)
33995	Insertion of ventricular assist device, percutaneous, including radiological supervision and interpretation; right heart, venous access only
33997	Removal of percutaneous right heart ventricular assist device, venous cannula, at separate and distinct session from insertion
55880	Ablation of malignant prostate tissue, transrectal, with high intensity-focused ultrasound (HIFU), including ultrasound guidance
57465	Computer-aided mapping of cervix uteri during colposcopy, including optical dynamic spectral imaging and algorithmic quantification of the acetowhitening effect (List separately in addition to code for primary procedure)
69705	Nasopharyngoscopy, surgical, with dilation of eustachian tube (i.e., balloon dilation); unilateral
69706	Nasopharyngoscopy, surgical, with dilation of eustachian tube (i.e., balloon dilation); bilateral

101 CMR 316.00: Surgery and Anesthesia – Deleted Codes

Code	Description
19324	Mammoplasty, augmentation; without prosthetic implant
19366	Breast reconstruction with other technique
32405	Biopsy, lung or mediastinum, percutaneous needle
49220	Staging laparotomy for Hodgkins disease or lymphoma (includes splenectomy, needle or open biopsies of both liver lobes, possibly also removal of abdominal nodes, abdominal node and/or bone marrow biopsies, ovarian repositioning)
57112	Vaginectomy, complete removal of vaginal wall; with removal of paravaginal tissue (radical vaginectomy) with bilateral total pelvic lymphadenectomy and para-aortic lymph node sampling (biopsy)
58293	Vaginal hysterectomy, for uterus greater than 250 g; with colpo-urethrocytopexy (Marshall-Marchetti-Krantz type, Pereyra type) with or without endoscopic control
61870	Craniectomy for implantation of neurostimulator electrodes, cerebellar, cortical
62163	Neuroendoscopy, intracranial; with retrieval of foreign body
63180	Laminectomy and section of dentate ligaments, with or without dural graft, cervical; 1 or 2 segments
63182	Laminectomy and section of dentate ligaments, with or without dural graft, cervical; more than 2 segments
69605	Revision mastoidectomy; with apicectomy
G0297	Low dose CT scan (LDCT) for lung cancer screening

101 CMR 316.00: Surgery and Anesthesia – Crosswalk

Deleted Code	Replacement Code
32405	32408

101 CMR 316.00: Surgery and Anesthesia Rates

Code	Non-Facility Fee	Facility Fee	Global	Professional Component Fee	Technical Component Fee
30468	\$ 371.73	\$ 81.58	\$ -	\$ -	\$ -
32408	\$ 823.31	\$ 123.53	\$ -	\$ -	\$ -
33741	\$ -	\$ -	\$ 605.41	\$ -	\$ -
33745	\$ -	\$ -	\$ 857.53	\$ -	\$ -
33746	\$ -	\$ -	\$ 339.53	\$ -	\$ -
33995	\$ -	\$ -	\$ 291.18	\$ -	\$ -
33997	\$ -	\$ -	\$ 129.56	\$ -	\$ -
55880	\$ -	\$ -	\$ 798.55	\$ -	\$ -
57465	\$ 64.01	\$ 48.00	\$ -	\$ -	\$ -
69705	\$ 2,671.58	\$ 141.32	\$ -	\$ -	\$ -
69706	\$ 2,748.05	\$ 196.44	\$ -	\$ -	\$ -

101 CMR 317.00: Medicine – Added Codes

Code	Description
90377	Rabies immune globulin, heat- and solvent/detergent-treated (RIg-HT S/D), human, for intramuscular and/or subcutaneous use
90619	Meningococcal conjugate vaccine, serogroups A, C, W, Y, quadrivalent, tetanus toxoid carrier (MenACWY-TT), for intramuscular use
91300	Severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (Coronavirus disease [COVID-19]) vaccine, mRNA-LNP, spike protein, preservative free, 30 mcg/0.3mL dosage, diluent reconstituted, for intramuscular use
91301	Severe acute respiratory syndrome coronavirus 2 (SARS-CoV2) (Coronavirus disease [COVID-19]) vaccine, mRNA-LNP, spike protein, preservative free, 100 mcg/0.5mL dosage, for intramuscular use
92229	Imaging of retina for detection or monitoring of disease; point-of-care automated analysis and report, unilateral or bilateral
92517	Vestibular evoked myogenic potential (VEMP) testing, with interpretation and report; cervical (cVEMP)
92518	Vestibular evoked myogenic potential (VEMP) testing, with interpretation and report; ocular (oVEMP)
92519	Vestibular evoked myogenic potential (VEMP) testing, with interpretation and report; cervical (cVEMP) and ocular (oVEMP)
92650	Auditory evoked potentials; screening of auditory potential with broadband stimuli, automated analysis
92651	Auditory evoked potentials; for hearing status determination, broadband stimuli, with interpretation and report
92652	Auditory evoked potentials; for threshold estimation at multiple frequencies, with interpretation and report
92653	Auditory evoked potentials; neurodiagnostic, with interpretation and report
93241	External electrocardiographic recording for more than 48 hours up to 7 days by continuous rhythm recording and storage; includes recording, scanning analysis with report, review and interpretation
93242	External electrocardiographic recording for more than 48 hours up to 7 days by continuous rhythm recording and storage; recording (includes connection and initial recording)
93243	External electrocardiographic recording for more than 48 hours up to 7 days by continuous rhythm recording and storage; scanning analysis with report
93244	External electrocardiographic recording for more than 48 hours up to 7 days by continuous rhythm recording and storage; review and interpretation
93245	External electrocardiographic recording for more than 7 days up to 15 days by continuous rhythm recording and storage; includes recording, scanning analysis with report, review and interpretation

Code	Description
93246	External electrocardiographic recording for more than 7 days up to 15 days by continuous rhythm recording and storage; recording (includes connection and initial recording)
93247	External electrocardiographic recording for more than 7 days up to 15 days by continuous rhythm recording and storage; scanning analysis with report
93248	External electrocardiographic recording for more than 7 days up to 15 days by continuous rhythm recording and storage; review and interpretation
94619	Exercise test for bronchospasm, including pre- and post-spirometry and pulse oximetry; without electrocardiographic recording(s)
99417	Prolonged office or other outpatient evaluation and management service(s) beyond the minimum required time of the primary procedure which has been selected using total time, requiring total time with or without direct patient contact beyond the usual service, on the date of the primary service, each 15 minutes of total time (List separately in addition to codes 99205, 99215 for office or other outpatient Evaluation and Management services)
99439	Chronic care management services with the following required elements: multiple (two or more) chronic conditions expected to last at least 12 months, or until the death of the patient, chronic conditions place the patient at significant risk of death, acute exacerbation/decompensation, or functional decline, comprehensive care plan established, implemented, revised, or monitored; each additional 20 minutes of clinical staff time directed by a physician or other qualified health care professional, per calendar month (List separately in addition to code for primary procedure)
G2211	Visit complexity inherent to evaluation and management associated with medical care services that serve as the continuing focal point for all needed health care services and/or with medical care services that are part of ongoing care related to a patient's single, serious condition or a complex condition. (add-on code, list separately in addition to office/outpatient evaluation and management visit, new or established)
G2212	Prolonged office or other outpatient evaluation and management service(s) beyond the maximum required time of the primary procedure which has been selected using total time on the date of the primary service; each additional 15 minutes by the physician or qualified healthcare professional, with or without direct patient contact (list separately in addition to CPT codes 99205, 99215 for office or other outpatient evaluation and management services) (Do not report G2212 on the same date of service as 99354, 99355, 99358, 99359, 99415, 99416). (Do not report G2212 for any time unit less than 15 minutes)
J0179	Injection, brolocizumab-dbl, 1 mg
J0223	Injection, givosiran, 0.5 mg
J0693	Injection, cefiderocol, 5 mg
J0742	Injection, imipenem 4 mg, cilastatin 4 mg and relebactam 2 mg
J1201	Injection, cetirizine HCl, 0.5 mg
J1429	Injection, golodirsen, 10 mg
J1610	Injection, glucagon HCl, per 1 mg
J1823	Injection, inebilizumab-cdon, 1 mg
J3032	Injection, eptinezumab-jjmr, 1 mg
J3241	Injection, teprotumumab-trbw, 10 mg
J3398	Injection, voretigene neparvovec-rzyl, 1 billion vector genomes
J7192	Factor VIII (antihemophilic factor, recombinant) per IU, not otherwise specified
J7212	Factor VIIa (antihemophilic factor, recombinant)-jncw (Sevenfact), 1 mcg
J7351	Injection, bimatoprost, intracameral implant, 1 mcg
J7352	Afamelanotide implant, 1 mg
J8499	Prescription drug, oral, nonchemotherapeutic, NOS
J8999	Prescription drug, oral, chemotherapeutic, NOS
J9118	Injection, calaspargase pegol-mknl, 10 units
J9144	Injection, daratumumab, 10 mg and hyaluronidase-fihj

Code	Description
J9223	Injection, lurbinectedin, 0.1 mg
J9281	Mitomycin pyelocalyceal instillation, 1 mg
J9316	Injection, pertuzumab, trastuzumab, and hyaluronidase-zzxf, per 10 mg
J9317	Injection, sacituzumab govitecan-hziy, 2.5 mg
Q5115	Injection, rituximab-abbs, biosimilar, (Truxima), 10 mg
Q5119	Injection, rituximab-pvvr, biosimilar, (RUXIENCE), 10 mg

101 CMR 317.00: Medicine – Deleted Codes

Code	Description
92585	Auditory evoked potentials for evoked response audiometry and/or testing of the central nervous system; comprehensive
92586	Auditory evoked potentials for evoked response audiometry and/or testing of the central nervous system; limited
92992	Atrial septectomy or septostomy; transvenous method, balloon (e.g., Rashkind type) (includes cardiac catheterization)
92993	Atrial septectomy or septostomy; blade method (Park septostomy) (includes cardiac catheterization)
94250	Expired gas collection, quantitative, single procedure (separate procedure)
94400	Breathing response to CO2 (CO2 response curve)
94750	Pulmonary compliance study (e.g., plethysmography, volume and pressure measurements)
94770	Carbon dioxide, expired gas determination by infrared analyzer
95071	Inhalation bronchial challenge testing (not including necessary pulmonary function tests); with antigens or gases, specify
99201	Office or other outpatient visit for the evaluation and management of a new patient, which requires these 3 key components: A problem focused history; A problem focused examination; Straightforward medical decision making. Counseling and/or coordination of care with other physicians, other qualified health care professionals, or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are self-limited or minor. Typically, 10 minutes are spent face-to-face with the patient and/or family.

101 CMR 317.00: Medicine – Crosswalk

Deleted Code	Replacement Codes
92585	92652, 92653
92586	92650, 92651

101 CMR 317.00: Medicine Rates

Code	Non-Facility Fee	Facility Fee	Global	Professional Component Fee	Technical Component Fee
90377	\$ -	\$ -	I.C.	\$ -	\$ -
90619	\$ -	\$ -	I.C.	\$ -	\$ -
91300	\$ -	\$ -	I.C.	\$ -	\$ -
91301	\$ -	\$ -	I.C.	\$ -	\$ -
92229	\$ -	\$ -	I.C.	\$ -	\$ -
92517	\$ 72.86	\$ 35.57	\$ -	\$ -	\$ -
92518	\$ 67.75	\$ 35.57	\$ -	\$ -	\$ -
92519	\$ 113.28	\$ 53.44	\$ -	\$ -	\$ -
92650	\$ -	\$ -	\$ 24.18	\$ -	\$ -
92651	\$ -	\$ -	\$ 75.89	\$ -	\$ -
92652	\$ -	\$ -	\$ 98.69	\$ -	\$ -
92653	\$ -	\$ -	\$ 72.46	\$ -	\$ -
93241	\$ -	\$ -	I.C.	\$ -	\$ -
93242	\$ -	\$ -	\$ 13.15	\$ -	\$ -
93243	\$ -	\$ -	I.C.	\$ -	\$ -
93244	\$ -	\$ -	\$ 19.94	\$ -	\$ -
93245	\$ -	\$ -	I.C.	\$ -	\$ -
93246	\$ -	\$ -	\$ 13.15	\$ -	\$ -
93247	\$ -	\$ -	I.C.	\$ -	\$ -
93248	\$ -	\$ -	\$ 21.92	\$ -	\$ -
94619	\$ -	\$ -	\$ 62.51	\$ 19.06	\$ 43.45
99417	\$ -	\$ -	I.C.	\$ -	\$ -
99439	\$ 30.81	\$ 22.69	\$ -	\$ -	\$ -
G2211	\$ -	\$ -	I.C.	\$ -	\$ -
G2212	\$ 26.95	\$ 26.05	\$ -	\$ -	\$ -
J0179	\$ -	\$ -	I.C.	\$ -	\$ -
J0223	\$ -	\$ -	I.C.	\$ -	\$ -
J0693	\$ -	\$ -	I.C.	\$ -	\$ -
J0742	\$ -	\$ -	I.C.	\$ -	\$ -
J1201	\$ -	\$ -	I.C.	\$ -	\$ -
J1429	\$ -	\$ -	I.C.	\$ -	\$ -
J1610	\$ -	\$ -	I.C.	\$ -	\$ -
J1823	\$ -	\$ -	I.C.	\$ -	\$ -
J3032	\$ -	\$ -	I.C.	\$ -	\$ -
J3241	\$ -	\$ -	I.C.	\$ -	\$ -
J3398	\$ -	\$ -	I.C.	\$ -	\$ -
J7192	\$ -	\$ -	I.C.	\$ -	\$ -
J7212	\$ -	\$ -	I.C.	\$ -	\$ -
J7351	\$ -	\$ -	I.C.	\$ -	\$ -
J7352	\$ -	\$ -	I.C.	\$ -	\$ -
J8499	\$ -	\$ -	I.C.	\$ -	\$ -
J8999	\$ -	\$ -	I.C.	\$ -	\$ -
J9118	\$ -	\$ -	I.C.	\$ -	\$ -
J9144	\$ -	\$ -	I.C.	\$ -	\$ -
J9223	\$ -	\$ -	I.C.	\$ -	\$ -
J9281	\$ -	\$ -	I.C.	\$ -	\$ -
J9316	\$ -	\$ -	I.C.	\$ -	\$ -
J9317	\$ -	\$ -	I.C.	\$ -	\$ -
Q5115	\$ -	\$ -	I.C.	\$ -	\$ -
Q5119	\$ -	\$ -	I.C.	\$ -	\$ -

101 CMR 318.00: Radiology – Added Codes

Code	Description
71271	Computed tomography, thorax, low dose for lung cancer screening, without contrast material(s)
76145	Medical physics dose evaluation for radiation exposure that exceeds institutional review threshold, including report
A9591	Fluoroestradiol f 18, diagnostic, 1 mCi

101 CMR 318.00: Radiology – Deleted Codes

Code	Description
76970	Ultrasound study follow-up (specify)
78135	Red cell survival study; differential organ/tissue kinetics (e.g., splenic and/or hepatic sequestration)

101 CMR 318.00: Radiology – Crosswalk

Existing Code	Replacement Code
G0297	71271

101 CMR 318.00: Radiology Rates

Code	Non-Facility Fee	Facility Fee	Global	Professional Component Fee	Technical Component Fee
71271	\$ -	\$ -	\$ 207.63	\$ 39.60	\$ 168.04
76145	\$ -	\$ -	\$ 726.89	\$ -	\$ -
A9591	\$ -	\$ -	I.C.	\$ -	\$ -

Part II: CPT/HCPCS 2020 Coding Updates

In accordance with 101 CMR 317.01(4), EOHHS is adding a new service code and deleting an outdated code, effective for dates of service on and after January 1, 2020. The following list specifies the code that has been added and the code that has been deleted, which are followed by a crosswalk identifying the replacement code for applicable deleted code. Rates for the new code with a one-to-one crosswalk to the deleted code are set at the payment rate of the deleted code. Rates listed in this administrative bulletin are applicable until revised rates are issued by the EOHHS. The deleted code is not available for use for dates of service after December 31, 2019.

101 CMR 317.00: Medicine – Added Code

Code	Description
G2066	Interrogation device evaluation(s), (remote) up to 30 days; implantable cardiovascular physiologic monitor system, implantable loop recorder system, or subcutaneous cardiac rhythm monitor system, remote data acquisition(s), receipt of transmissions and technician review, technical support and distribution of results

101 CMR 317.00: Medicine – Deleted Code

Code	Description
93299	Interrogation device evaluation(s), (remote) up to 30 days; implantable cardiovascular physiologic monitor system or subcutaneous cardiac rhythm monitor system, remote data acquisition(s), receipt of transmissions and technician review, technical support and distribution of results

101 CMR 317.00: Medicine – Crosswalk

Deleted Code	Replacement Code
93299	G2066

101 CMR 317.00: Medicine Rates

Code	Non-Facility Fee	Facility Fee	Global	Professional Component Fee	Technical Component Fee
G2066	\$ -	\$ -	I.C.	\$ -	\$ -