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MassHealth  
Transmittal Letter IDTF-7  
January 2009

**TO:** Independent Diagnostic Testing Facilities Participating in MassHealth  
**FROM:** Tom Dehner, Medicaid Director   
**RE:** *Independent Diagnostic Testing Facility Manual (2009 HCPCS Changes)*

This letter transmits revisions to the service codes and descriptions in Subchapter 6 of the *Independent Diagnostic Testing Facility Manual*. The Centers for Medicare & Medicaid Services (CMS) has revised the Healthcare Common Procedure Coding System (HCPCS) for 2009. These changes are included in the attached Subchapter 6 and are effective for dates of service on or after January 1, 2009. After this date, you must use the new codes in order to obtain payment.

If you wish to obtain a fee schedule, you may download the Division of Health Care Finance and Policy regulations at no cost at [www.mass.gov/dhcfp](http://www.mass.gov/dhcfp). You may also purchase a paper copy of Division of Health Care Finance and Policy regulations from either the Massachusetts State Bookstore or from the Division of Health Care Finance and Policy (see addresses and telephone numbers below). You must contact them first to find out the price of the paper copy of the publication. The regulation titles for IDTF services are 114.3 CMR 18.00: Radiology and 114.3 CMR 17.00 Medicine.

Massachusetts State Bookstore  
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If you have any questions about the information in this transmittal letter please contact MassHealth Customer Service at 1-800-841-2900, e-mail your inquiry to [providersupport@mahealth.net](mailto:providersupport@mahealth.net), or fax your inquiry to 617-988-8974.

**NEW MATERIAL**

(The pages listed here contain new or revised language.)

**Independent Diagnostic Testing Facility Manual**

Pages 6-1 through 6-4, 6-7, 6-8, 6-13, 6-14, and 6-25 through 6-32

**OBSOLETE MATERIAL**

(The pages listed here are no longer in effect.)

**Independent Diagnostic Testing Facility Manual**

Pages 6-1 through 6-4, 6-7, 6-8, 6-13, 6-14, and 6-25 through 6-32 — transmitted by Transmittal Letter IDTF-6

<b>Commonwealth of Massachusetts MassHealth Provider Manual Series</b>	<b>Subchapter Number and Title</b> 6. Service Codes and Descriptions	<b>Page</b> 6-1
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601 Introduction

MassHealth pays for the services represented by the codes listed in Subchapter 6 in effect at the time of service, subject to all conditions and limitations in MassHealth regulations at 130 CMR 431.000 and 450.000. An independent diagnostic testing facility (IDTF) may request prior authorization for any medically necessary service reimbursable under the federal Medicaid Act in accordance with 130 CMR 450.144, 42 U.S.C. 1396d(a), and 42 U.S.C. 1396d(r)(5) for a MassHealth Standard or CommonHealth member younger than 21 years of age, even if it is not designated as covered or payable in Subchapter 6 of the *Independent Diagnostic Testing Facility Manual*.

“IC” indicates that the claim requires individual consideration. See 130 CMR 431.406 for more information.

“PA” indicates that the service requires prior authorization. See 130 CMR 450.303 for more information.

602 Portable X Ray: Radiology Service Codes and Descriptions

Service

Code      Service Description

**Diagnostic Radiology (Diagnostic Imaging)**

**Head and Neck**

- 70030 Radiologic examination, eye, for detection of foreign body
- 70100 Radiologic examination, mandible; partial, less than 4 views
- 70110      complete, minimum of 4 views
- 70120 Radiologic examination, mastoids; less than 3 views per side
- 70130      complete, minimum of 3 views per side
- 70134 Radiologic examination, internal auditory meati, complete
- 70140 Radiologic examination, facial bones; less than 3 views
- 70150      complete, minimum of 3 views
- 70160 Radiologic examination, nasal bones, complete, minimum of 3 views
- 70190 Radiologic examination; optic foramina
- 70200      orbits, complete, minimum of 4 views
- 70210 Radiologic examination, sinuses, paranasal, less than 3 views
- 70220 Radiologic examination, sinuses, paranasal, complete, minimum of 3 views
- 70240 Radiologic examination, sella turcica
- 70250 Radiologic examination, skull; less than 4 views
- 70260      complete, minimum of 4 views
- 70300 Radiologic examination, teeth; single view
- 70310      partial examination, less than full mouth
- 70320      complete, full mouth
- 70328 Radiologic examination, temporomandibular joint, open and closed mouth; unilateral
- 70330      bilateral
- 70332 Temporomandibular joint arthrography, radiological supervision and interpretation
- 70350 Cephalogram, orthodontic
- 70355 Orthopantogram
- 70360 Radiologic examination; neck, soft tissue
- 70370      pharynx or larynx, including fluoroscopy and/or magnification technique
- 70371 Complex dynamic pharyngeal and speech evaluation by cine or video recording
- 70373 Laryngography, contrast, radiological supervision and interpretation
- 70380 Radiologic examination, salivary gland for calculus
- 70390 Sialography, radiological supervision and interpretation

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602 Portable X Ray: Radiology Service Codes and Descriptions (cont.)

Service

Code      Service Description

**Chest**

- 71010 Radiologic examination, chest; single view, frontal
- 71015       stereo, frontal
- 71020 Radiologic examination, chest, 2 views, frontal and lateral
- 71021       with apical lordotic procedure
- 71022       with oblique projections
- 71023       with fluoroscopy
- 71030 Radiologic examination, chest, complete, minimum of 4 views
- 71034       with fluoroscopy
- 71035 Radiologic examination, chest, special views (e.g., lateral decubitus, Bucky studies)
- 71040 Bronchography, unilateral, radiological supervision and interpretation
- 71060 Bronchography, bilateral, radiological supervision and interpretation
- 71100 Radiologic examination, ribs, unilateral; 2 views
- 71101       including posteroanterior chest, minimum of 3 views
- 71110 Radiologic examination, ribs, bilateral; 3 views
- 71111       including posteroanterior chest, minimum of 4 views
- 71120 Radiologic examination; sternum, minimum of 2 views
- 71130       sternoclavicular joint or joints, minimum of 3 views

**Spine and Pelvis**

- 72010 Radiologic examination, spine, entire, survey study, anteroposterior and lateral
- 72020 Radiologic examination, spine, single view, specify level
- 72040 Radiologic examination, spine, cervical; 2 or 3 views
- 72050       minimum of 4 views
- 72052       complete, including oblique and flexion and/or extension studies
- 72069 Radiologic examination, spine, thoracolumbar, standing (scoliosis)
- 72070 Radiologic examination, spine; thoracic, 2 views
- 72072       thoracic, 3 views
- 72074       thoracic, minimum of 4 views
- 72080       thoracolumbar, 2 views
- 72090       scoliosis study, including supine and erect studies
- 72100 Radiologic examination, spine, lumbosacral; 2 or 3 views
- 72110       minimum of 4 views
- 72114       complete, including bending views
- 72120 Radiologic examination, spine, lumbosacral, bending views only, minimum of 4 views
- 72170 Radiologic examination, pelvis; one or 2 views
- 72190       complete, minimum of 3 views
- 72200 Radiologic examination, sacroiliac joints; less than 3 views
- 72202       3 or more views
- 72220 Radiologic examination, sacrum and coccyx, minimum of 2 views
- 72240 Myelography, cervical, radiological supervision and interpretation

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602 Portable X Ray: Radiology Service Codes and Descriptions (cont.)

Service

Code      Service Description

72255      Myelography, thoracic, radiological supervision and interpretation  
72265      Myelography, lumbosacral, radiological supervision and interpretation  
72270      Myelography, 2 or more regions (e.g., lumbar/thoracic, cervical/thoracic, lumbar/cervical, lumbar/thoracic/cervical), radiological supervision and interpretation  
72275      Epidurography, radiological supervision and interpretation  
72285      Diskography, cervical or thoracic, radiological supervision and interpretation  
72295      Diskography, lumbar, radiological supervision and interpretation

**Upper Extremities**

73000      Radiologic examination; clavicle, complete  
73010          scapula, complete  
73020      Radiologic examination, shoulder; one view  
73030          complete, minimum of 2 views  
73040      Radiologic examination, shoulder, arthrography, radiological supervision and interpretation  
73050      Radiologic examination; acromioclavicular joints, bilateral, with or without weighted distraction  
73060          humerus, minimum of 2 views  
73070      Radiologic examination, elbow; 2 views  
73080          complete, minimum of 3 views  
73085      Radiologic examination, elbow, arthrography, radiological supervision and interpretation  
73090      Radiologic examination; forearm, 2 views  
73092          upper extremity, infant, minimum of 2 views  
73100      Radiologic examination, wrist; 2 views  
73110          complete, minimum of 3 views  
73115      Radiologic examination, wrist, arthrography, radiological supervision and interpretation  
73120      Radiologic examination, hand; 2 views  
73130          minimum of 3 views  
73140      Radiologic examination, finger(s), minimum of 2 views

**Lower Extremities**

73500      Radiologic examination, hip, unilateral; one view  
73510          complete, minimum of 2 views  
73520      Radiologic examination, hips, bilateral, minimum of 2 views of each hip, including anteroposterior view of pelvis  
73525      Radiologic examination, hip, arthrography, radiological supervision and interpretation  
73530      Radiologic examination, hip, during operative procedure  
73540      Radiologic examination, pelvis and hips, infant or child, minimum of 2 views  
73542      Radiological examination, sacroiliac joint arthrography, radiological supervision and interpretation  
73550      Radiologic examination, femur, 2 views  
73560      Radiologic examination, knee; one or 2 views  
73562          3 views  
73564          complete, 4 or more views

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602 Portable X Ray: Radiology Service Codes and Descriptions (cont.)

Service

Code      Service Description

73565      both knees, standing, anteroposterior  
73580      Radiologic examination, knee, arthrography, radiological supervision and interpretation  
73590      Radiologic examination; tibia and fibula, 2 views  
73592      lower extremity, infant, minimum of 2 views  
73600      Radiologic examination, ankle; 2 views  
73610      complete, minimum of 3 views  
73615      Radiologic examination, ankle, arthrography, radiological supervision and interpretation  
73620      Radiologic examination, foot; 2 views  
73630      complete, minimum of 3 views  
73650      Radiologic examination; calcaneus, minimum of 2 views  
73660      toe(s), minimum of 2 views

**Abdomen**

74000      Radiologic examination, abdomen; single anteroposterior view  
74010      anteroposterior and additional oblique and cone views  
74020      complete, including decubitus and/or erect views  
74022      complete acute abdomen series, including supine, erect, and/or decubitus views, single view chest

**Gastrointestinal Tract**

74210      Radiologic examination; pharynx and/or cervical esophagus  
74220      esophagus  
74230      Swallowing function, with cineradiography/videoradiography  
74235      Removal of foreign body(s), esophageal, with use of balloon catheter, radiological supervision and interpretation  
74240      Radiologic examination, gastrointestinal tract, upper; with or without delayed films, without KUB  
74241      with or without delayed films, with KUB  
74245      with small intestine, includes multiple serial films  
74246      Radiological examination, gastrointestinal tract, upper, air contrast, with specific high density barium, effervescent agent, with or without glucagon; with or without delayed films, without KUB  
74247      with or without delayed films, with KUB  
74249      with small intestine follow-through  
74250      Radiologic examination, small intestine, includes multiple serial films  
74251      via enteroclysis tube  
74260      Duodenography, hypotonic  
74270      Radiologic examination, colon; contrast (e.g., barium) enema, with or without KUB  
74280      air contrast with specific high density barium, with or without glucagon  
74290      Cholecystography, oral contrast  
74291      additional or repeat examination or multiple day examination

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603 Freestanding Magnetic Resonance Imaging (FMRI): Radiology Service Codes and Descriptions (cont.)

Service

Code      Service Description

75559      with stress imaging  
 75560      with flow/velocity quantification and stress  
 75561      Cardiac magnetic resonance imaging for morphology and function without contract material;  
             followed by contrast material(s) and further sequences  
 75562      with flow/velocity quantification  
 75563      followed by contrast material(s) and further sequences; with stress imaging  
 75564      followed by contrast material(s) and further sequences; with flow/velocity quantification and  
             stress imaging

**Magnetic Resonance Guidance**

77021      Magnetic resonance guidance for needle placement (e.g., for biopsy, needle aspiration, injection,  
             or placement of localization device) radiological supervision and interpretation  
 77022      Magnetic resonance guidance for, and monitoring of, parenchymal tissue ablation

**Breast Mammography**

77058      Magnetic resonance imaging, breast, without and/or with contrast material(s); unilateral (PA)  
 77059      bilateral (PA)

**Supplies for Radiologic Procedures**

A4641      Radiopharmaceutical, diagnostic not otherwise classified (IC)

**Administrative, Miscellaneous and Investigational**

A9500      Technetium Tc-99m sestamibi, diagnostic, per study dose, up to 40 millicuries (IC)  
 A9502      Technetium Tc-99m tetrofosmin, diagnostic, per study dose (IC)  
 A9503      Technetium Tc-99m medronate, diagnostic, per study, up to 30 millicuries (IC)  
 A9505      Thallium Tl-201 thallos chloride, diagnostic, per millicurie (IC)  
 A9512      Technetium Tc-99m pertechnetate, diagnostic, per millicurie (IC)  
 A9537      Technetium Tc-99m mebrofenin, diagnostic, per study dose, up to 15 millicuries (IC)

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604 Diagnostic Imaging Centers: Radiology Service Codes and Descriptions

Service

Code      Service Description

**Maternity Care and Delivery**

**Antepartum Services**

59025      Fetal non-stress test

**Diagnostic Radiology (Diagnostic Imaging)**

**Head and Neck**

70030      Radiologic examination, eye, for detection of foreign body  
 70100      Radiologic examination, mandible; partial, less than 4 views  
 70110      complete, minimum of 4 views  
 70120      Radiologic examination, mastoids; less than 3 views per side  
 70130      complete, minimum of 3 views per side  
 70134      Radiologic examination, internal auditory meati, complete  
 70140      Radiologic examination, facial bones; less than 3 views  
 70150      complete, minimum of 3 views  
 70160      Radiologic examination, nasal bones, complete, minimum of 3 views  
 70190      Radiologic examination; optic foramina  
 70200      orbits, complete, minimum of 4 views  
 70210      Radiologic examination, sinuses, paranasal, less than 3 views  
 70220      Radiologic examination, sinuses, paranasal, complete, minimum of 3 views  
 70240      Radiologic examination, sella turcica  
 70250      Radiologic examination, skull; less than 4 views  
 70260      complete, minimum of 4 views  
 70300      Radiologic examination, teeth; single view  
 70310      partial examination, less than full mouth  
 70320      complete, full mouth  
 70328      Radiologic examination, temporomandibular joint, open and closed mouth; unilateral  
 70330      bilateral  
 70332      Temporomandibular joint arthrography, radiological supervision and interpretation  
 70336      Magnetic resonance (e.g., proton) imaging, temporomandibular joint(s)  
 70350      Cephalogram, orthodontic  
 70355      Orthopantogram  
 70360      Radiologic examination; neck, soft tissue  
 70370      pharynx or larynx, including fluoroscopy and/or magnification technique  
 70371      Complex dynamic pharyngeal and speech evaluation by cine or video recording  
 70373      Laryngography, contrast, radiological supervision and interpretation  
 70380      Radiologic examination, salivary gland for calculus  
 70390      Sialography, radiological supervision and interpretation  
 70450      Computed tomography, head or brain; without contrast material  
 70460      with contrast material(s)  
 70470      without contrast material, followed by contrast material(s) and further sections

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604 Diagnostic Imaging Centers: Radiology Service Codes and Descriptions (cont.)

Service

Code      Service Description

- 73630      complete, minimum of 3 views
- 73650      Radiologic examination; calcaneus, minimum of 2 views
- 73660      toe(s), minimum of 2 views
- 73700      Computed tomography, lower extremity; without contrast material
- 73701      with contrast material(s)
- 73702      without contrast material, followed by contrast material(s) and further sections
- 73718      Magnetic resonance (e.g., proton imaging, lower extremity other than joint; without contrast material(s)
- 73719      with contrast material(s)
- 73720      without contrast material(s), followed by contrast material(s) and further sequences
- 73721      Magnetic resonance (e.g., proton) imaging, any joint of lower extremity; without contrast material
- 73722      with contrast material(s)
- 73723      without contrast material(s), followed by contrast material(s) and further sequences
- 73725      Magnetic resonance angiography, lower extremity, with or without contrast material(s)

**Abdomen**

- 74000      Radiologic examination, abdomen; single anteroposterior view
- 74010      anteroposterior and additional oblique and cone views
- 74020      complete, including decubitus and/or erect views
- 74022      complete acute abdomen series, including supine, erect, and/or decubitus views, single view chest
- 74150      Computed tomography, abdomen; without contrast material
- 74160      with contrast material(s)
- 74170      without contrast material, followed by contrast material(s) and further sections
- 74181      Magnetic resonance (e.g., proton) imaging, abdomen; without contrast material(s)
- 74182      with contrast material(s)
- 74183      without contrast material(s), followed by with contrast material(s) and further sequences
- 74185      Magnetic resonance angiography, abdomen, with or without contrast material(s)
- 74190      Peritoneogram (e.g., after injection of air or contrast), radiological supervision and interpretation

**Gastrointestinal Tract**

- 74210      Radiologic examination; pharynx and/or cervical esophagus
- 74220      esophagus
- 74230      Swallowing function, with cineradiography/videoradiography
- 74235      Removal of foreign body(s), esophageal, with use of balloon catheter, radiological supervision and interpretation
- 74240      Radiologic examination, gastrointestinal tract, upper; with or without delayed films, without KUB
- 74241      with or without delayed films, with KUB
- 74245      with small intestine, includes multiple serial films



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604 Diagnostic Imaging Centers: Radiology Service Codes and Descriptions (cont.)

Service

Code      Service Description

- 74246 Radiological examination, gastrointestinal tract, upper, air contrast, with specific high density barium, effervescent agent, with or without glucagon; with or without delayed films, without KUB
- 74247      with or without delayed films, with KUB
- 74249      with small intestine follow-through
- 74250 Radiologic examination, small intestine, includes multiple serial films
- 74251      via enteroclysis tube
- 74260 Duodenography, hypotonic
- 74270 Radiologic examination, colon; contrast (e.g., barium) enema, with or without KUB
- 74280      air contrast with specific high density barium, with or without glucagon
- 74283 Therapeutic enema, contrast or air, for reduction of intussusception or other intraluminal obstruction (e.g., meconium ileus)
- 74290 Cholecystography, oral contrast
- 74291      additional or repeat examination or multiple day examination
- 74300 Cholangiography and/or pancreatography; intraoperative, radiological supervision and interpretation
- 74301      additional set intraoperative, radiological supervision and interpretation (List separately in addition to code for primary procedure.)
- 74305      through existing catheter, radiological supervision and interpretation
- 74320 Cholangiography, percutaneous, transhepatic, radiological supervision and interpretation
- 74327 Postoperative biliary duct calculus removal, percutaneous via T-tube tract, basket or snare (e.g., Burhenne technique), radiological supervision and interpretation
- 74330 Combined endoscopic catheterization of the biliary and pancreatic ductal systems, radiological supervision and interpretation
- 74340 Introduction of long gastrointestinal tube (e.g., Miller-Abbott), including multiple fluoroscopies and films, radiological supervision and interpretation
- 74355 Percutaneous placement of enteroclysis tube, radiological supervision and interpretation

**Urinary Tract**

- 74400 Urography (pyelography), intravenous, with or without KUB, with or without tomography
- 74410 Urography, infusion, drip technique and/or bolus technique
- 74415      with nephrotomography
- 74420 Urography, retrograde, with or without KUB
- 74425 Urography, antegrade (pyelostogram, nephrostogram, loopogram), radiological supervision and interpretation
- 74430 Cystography, minimum of 3 views, radiological supervision and interpretation
- 74440 Vasography, vesiculography, or epididymography, radiological supervision and interpretation
- 74445 Corpora cavernosography, radiological supervision and interpretation
- 74450 Urethrocystography, retrograde, radiological supervision and interpretation
- 74455 Urethrocystography, voiding, radiological supervision and interpretation
- 74470 Radiologic examination, renal cyst study, translumbar, contrast visualization, radiological supervision and interpretation

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604 Diagnostic Imaging Centers: Radiology Service Codes and Descriptions (cont.)

Service

Code      Service Description

- 78494      Cardiac blood pool imaging, gated equilibrium, SPECT, at rest, wall motion study plus ejection fraction, with or without quantitative processing
- 78496      Cardiac blood pool imaging, gated equilibrium, single study, at rest, with right ventricular ejection fraction by first pass technique (List separately in addition to code for primary procedure.)
- 78499      Unlisted cardiovascular procedure, diagnostic nuclear medicine (IC)

**Respiratory System**

- 78580      Pulmonary perfusion imaging; particulate
- 78584      Pulmonary perfusion imaging, particulate, with ventilation; single breath
- 78585           rebreathing and washout, with or without single breath
- 78586      Pulmonary ventilation imaging, aerosol; single projection
- 78587           multiple projections (e.g., anterior, posterior, lateral views)
- 78588      Pulmonary perfusion imaging, particulate, with ventilation imaging, aerosol, one or multiple projections
- 78591      Pulmonary ventilation imaging, gaseous, single breath, single projection
- 78593      Pulmonary ventilation imaging, gaseous, with rebreathing and washout with or without single breath; single projection
- 78594           multiple projections (e.g., anterior, posterior, lateral views)
- 78596      Pulmonary quantitative differential function (ventilation/perfusion) study
- 78599      Unlisted respiratory procedure, diagnostic nuclear medicine (IC)

**Nervous System**

- 78600      Brain imaging, less than 4 static views;
- 78601           with vascular flow
- 78605      Brain imaging, minimum 4 static views;
- 78607           tomographic (SPECT)
- 78608      Brain imaging, positron emission tomography (PET); metabolic evaluation
- 78609           perfusion evaluation
- 78610      Brain imaging, vascular flow only
- 78630      Cerebrospinal fluid flow, imaging (not including introduction of material); cisternography
- 78635           ventriculography
- 78645           shunt evaluation
- 78647           tomographic (SPECT)
- 78650      Cerebrospinal fluid leakage detection and localization
- 78660      Radiopharmaceutical dacryocystography
- 78699      Unlisted nervous system procedure, diagnostic nuclear medicine (IC)

**Genitourinary System**

- 78700      Kidney imaging morphology;
- 78701           with vascular flow
- 78707           with vascular flow and function, single study without pharmacological intervention

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604 Diagnostic Imaging Centers: Radiology Service Codes and Descriptions (cont.)

Service

Code      Service Description

- 78708      with vascular flow and function, single study, with pharmacological intervention (e.g., angiotensin converting enzyme inhibitor and/or diuretic)
- 78709      with vascular flow and function, multiple studies, with and without pharmacological intervention (e.g., angiotensin converting enzyme inhibitor and/or diuretic)
- 78710      Kidney imaging morphology, tomographic (SPECT)
- 78725      Kidney function study, non-imaging radioisotopic study
- 78730      Urinary bladder residual study (List separately in addition to code for primary procedure.)
- 78740      Ureteral reflux study (radiopharmaceutical voiding cystogram)
- 78761      Testicular imaging with vascular flow
- 78799      Unlisted genitourinary procedure, diagnostic nuclear medicine (IC)

**Other Procedures**

- 78800      Radiopharmaceutical localization of tumor or distribution of radiopharmaceutical agent(s); limited area
- 78801      multiple areas
- 78802      whole body, single day imaging
- 78803      tomographic (SPECT)
- 78804      whole body, requiring 2 or more days imaging
- 78805      Radiopharmaceutical localization of inflammatory process; limited area
- 78806      whole body
- 78807      tomographic (SPECT)
- 78808      Injection procedure for radiopharmaceutical localization by non-imaging probe study, intravenous (e.g., parathyroid adenoma)
- 78811      Positron emission tomography (PET) imaging; limited area (e.g. chest, head/neck)
- 78812      skull base to mid-thigh
- 78813      whole body
- 78814      Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization; limited area (e.g. chest, head/neck)
- 78815      skull base to mid-thigh
- 78816      whole body
- 78999      Unlisted miscellaneous procedure, diagnostic nuclear medicine (IC)

**Cardiovascular**

**Cardiography**

- 93000      Electrocardiogram, routine ECG with at least 12 leads; with interpretation and report
- 93005      tracing only, without interpretation and report
- 93010      interpretation and report only
- 93012      Telephonic transmission of post-symptom electrocardiogram rhythm strip(s), 24-hour attended monitoring, per 30-day period of time; tracing only
- 93014      physician review with interpretation and report only

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604 Diagnostic Imaging Centers: Radiology Service Codes and Descriptions (cont.)

Service

Code      Service Description

93015	Cardiovascular stress test using maximal or submaximal treadmill or bicycle exercise, continuous electrocardiographic monitoring, and/or pharmacological stress; with physician supervision, with interpretation and report
93016	Cardiovascular stress test using maximal or submaximal treadmill or bicycle exercise, continuous electrocardiographic monitoring, and/or pharmacological stress; physician supervision only, without interpretation and report
93017	tracing only, without interpretation and report
93018	interpretation and report only
93024	Ergonovine provocation test
93025	Microvolt T-wave alternans for assessment of ventricular arrhythmias
93040	Rhythm ECG, one to 3 leads; with interpretation and report
93041	tracing only without interpretation and report
93042	interpretation and report only
93224	Wearable electrocardiographic rhythm derived monitoring for 24 hours by continuous original waveform recording and storage, with visual superimposition scanning; includes recording, scanning analysis with report, physician review and interpretation
93225	recording (includes connection, recording, and disconnection)
93226	scanning analysis with report
93227	physician review and interpretation
93228	Wearable mobile cardiovascular telemetry with electrocardiographic recording, concurrent computerized real time data analysis and greater than 24 hours of accessible ECG data storage (retrievable with query) with ECG triggered and patient selected events transmitted to a remote attended surveillance center for up to 30 days; physician review and interpretation with report (IC)
93229	technical support for connection and patient instructions for use, attended surveillance, analysis and physician prescribed transmission of daily and emergent data reports (IC)
93230	Wearable electrocardiographic rhythm derived monitoring for 24 hours by continuous original waveform recording and storage without superimposition scanning utilizing a device capable of producing a full miniaturized printout; includes recording, microprocessor-based analysis with report, physician review and interpretation
93231	recording (includes connection, recording, and disconnection)
93232	microprocessor-based analysis with report
93233	physician review and interpretation
93235	Wearable electrocardiographic rhythm derived monitoring for 24 hours by continuous computerized monitoring and non-continuous recording, and real-time data analysis utilizing a device capable of producing intermittent full-sized waveform tracings, possibly patient activated; includes monitoring and real-time data analysis with report, physician review and interpretation
93236	monitoring and real-time data analysis with report
93237	physician review and interpretation
93268	Wearable patient activated electrocardiographic rhythm derived event recording with presymptom memory loop, 24-hour attended monitoring, per 30-day period of time; includes transmission, physician review and interpretation
93270	recording (includes connection, recording, and disconnection)

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604 Diagnostic Imaging Centers: Radiology Service Codes and Descriptions (cont.)

Service

Code      Service Description

- 93271            monitoring, receipt of transmissions, and analysis
- 93272            physician review and interpretation
- 93278            Signal-averaged electrocardiography (SAECG), with or without ECG

**Echocardiography**

- 93303            Transthoracic echocardiography for congenital cardiac anomalies; complete
- 93304            follow-up or limited study
- 93306            Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, with spectral Doppler echocardiography, and with color flow Doppler echocardiography
- 93307            Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography
- 93308            Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, follow-up or limited study
- 93312            Echocardiography, transesophageal, real-time with image documentation (2D) (with or without M-mode recording); including probe placement, image acquisition, interpretation and report
- 93313            placement of transesophageal probe only
- 93314            image acquisition, interpretation and report only
- 93315            Transesophageal echocardiography for congenital cardiac anomalies; including probe placement, image acquisition, interpretation and report
- 93316            placement of transesophageal probe only
- 93317            image acquisition, interpretation and report only
- 93318            Echocardiography, transesophageal (TEE) for monitoring purposes, including probe placement, real time 2-dimensional image acquisition and interpretation leading to ongoing (continuous) assessment of (dynamically changing) cardiac pumping function and to therapeutic measures on an immediate time basis
- 93320            Doppler echocardiography, pulsed wave and/or continuous wave with spectral display (List separately in addition to codes for echocardiographic imaging); complete
- 93321            follow-up or limited study (List separately in addition to codes for echocardiographic imaging)
- 93325            Doppler echocardiography color flow velocity mapping (List separately in addition to codes for echocardiography.)
- 93350            Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, during rest and cardiovascular stress test using treadmill, bicycle exercise and/or pharmacologically induced stress, with interpretation and report
- 93351            including performance of continuous electrocardiographic monitoring, with physician supervision
- 93352            Use of echocardiographic contrast agent during stress echocardiography (List separately in addition to code for primary procedure)

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604 Diagnostic Imaging Centers: Radiology Service Codes and Descriptions (cont.)

Service

Code      Service Description

**Other Vascular Studies**

- 93724      Electronic analysis of antitachycardia pacemaker system (includes electrocardiographic recording, programming of device, induction and termination of tachycardia via implanted pacemaker, and interpretation of recordings)
- 93740      Temperature gradient studies
- 93745      Initial set-up and programming by a physician of wearable cardioverter-defibrillator includes initial programming of system, establishing baseline electronic ECG, transmission of data to data repository, patient instruction in wearing system and patient reporting of problems or events (IC)
- 93784      Ambulatory blood pressure monitoring, utilizing a system such as magnetic tape and/or computer disk, for 24 hours or longer; including recording, scanning analysis, interpretation and report
- 93786      recording only
- 93788      scanning analysis with report
- 93790      physician review with interpretation and report

**Other Procedures**

- 93797      Physician services for outpatient cardiac rehabilitation; without continuous ECG monitoring (per session)
- 93798      with continuous ECG monitoring (per session)
- 93799      Unlisted cardiovascular service or procedure (IC)

**Non-Invasive Vascular Diagnostic Studies**

**Cerebrovascular Arterial Studies**

- 93875      Non-invasive physiologic studies of extracranial arteries, complete bilateral study (e.g., periorbital flow direction with arterial compression, ocular pneumoplethysmography, Doppler ultrasound spectral analysis)
- 93880      Duplex scan of extracranial arteries; complete bilateral study
- 93882      unilateral or limited study
- 93886      Transcranial Doppler study of the intracranial arteries; complete study
- 93888      limited study
- 93890      vasoreactivity study
- 93892      emboli detection without intravenous microbubble injection
- 93893      emboli detection with intravenous microbubble injection

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604 Diagnostic Imaging Centers: Radiology Service Codes and Descriptions (cont.)

Service

Code      Service Description

**Extremity Arterial Studies (Including Digits)**

- 93922      Non-invasive physiologic studies of upper or lower extremity arteries, single level, bilateral (e.g., ankle/brachial indices, Doppler waveform analysis, volume plethysmography, transcutaneous oxygen tension measurement)
- 93923      Non-invasive physiologic studies of upper or lower extremity arteries, multiple levels or with provocative functional maneuvers, complete bilateral study (e.g., segmental blood pressure measurements, segmental Doppler waveform analysis, segmental volume plethysmography, segmental transcutaneous oxygen tension measurements, measurements with postural provocative tests, measurements with reactive hyperemia)
- 93924      Non-invasive physiologic studies of lower extremity arteries, at rest and following treadmill stress testing, complete bilateral study
- 93925      Duplex scan of lower extremity arteries or arterial bypass grafts; complete bilateral study
- 93926                           unilateral or limited study
- 93930      Duplex scan of upper extremity arteries or arterial bypass grafts; complete bilateral study
- 93931                           unilateral or limited study

**Special EEG Tests**

- 95950      Monitoring for identification and lateralization of cerebral seizure focus, electroencephalographic (eg, 8 channel EEG) recording and interpretation, each 24 hours
- 95951      Monitoring for localization of cerebral seizure focus by cable or radio, 16 or more channel telemetry, combined electroencephalographic (EEG) and video recording and interpretation (eg, for presurgical localization), each 24 hours
- 95953      Monitoring for localization of cerebral seizure focus by computerized portable 16 or more channel EEG, electroencephalographic (EEG) recording and interpretation, each 24 hours
- 95956      Monitoring for localization of cerebral seizure focus by cable or radio, 16 or more channel telemetry, electroencephalographic (EEG) recording and interpretation, each 24 hours

**Extremity Venous Studies (Including Digits)**

- 93965      Non-invasive physiologic studies of extremity veins, complete bilateral study (e.g., Doppler waveform analysis with responses to compression and other maneuvers, phleborheography, impedance plethysmography)
- 93970      Duplex scan of extremity veins including responses to compression and other maneuvers; complete bilateral study
- 93971                           unilateral or limited study

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604 Diagnostic Imaging Centers: Radiology Service Codes and Descriptions (cont.)

Service

Code    Service Description

**Visceral and Penile Vascular Studies**

- 93975    Duplex scan of arterial inflow and venous outflow of abdominal, pelvic, scrotal contents and/or retroperitoneal organs; complete study
- 93976               limited study
- 93978    Duplex scan of aorta, inferior vena cava, iliac vasculature, or bypass grafts; complete study
- 93979               unilateral or limited study
- 93980    Duplex scan of arterial inflow and venous outflow of penile vessels; complete study
- 93981               follow-up or limited study
- 93990    Duplex scan of hemodialysis access (including arterial inflow, body of access and venous outflow)

**Supplies for Radiologic Procedures**

- A4641    Radiopharmaceutical, diagnostic, not otherwise classified (IC)

**Administrative, Miscellaneous and Investigational**

- A9500    Technetium Tc-99m sestamibi, diagnostic, per study dose, up to 40 millicuries (IC)
- A9502    Technetium Tc-99m tetrofosmin, diagnostic, per study dose, (IC)
- A9503    Technetium Tc-99m medronate, diagnostic, per study, up to 30 millicuries (IC)
- A9505    Thallium Tl-201 thallos chloride, diagnostic, per millicurie (IC)
- A9512    Technetium Tc-99m pertechnetate, diagnostic, per millicurie (IC)
- A9537    Technetium Tc-99m mebrofenin, diagnostic, per study dose, up to 15 millicuries (IC)



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605 Mammography Vans: Radiology Service Codes and Descriptions

Service

Code      Service Description

**Radiologic Guidance**

**Breast Mammography**

- 77051      Computer-aided detection (computer algorithm analysis of digital image data for lesion detection) with further physician review for interpretation, with or without digitization of film radiographic images; diagnostic mammography (List separately in addition to code for primary procedure.)
- 77052      screening mammography (List separately in addition to code for primary procedure.)
- 77053      Mammary ductogram or galactogram, single duct, radiological supervision and interpretation
- 77054      Mammary ductogram or galactogram, multiple ducts, radiological supervision and interpretation
- 77055      Mammography; unilateral
- 77056                   bilateral
- 77057      Screening mammography, bilateral (2-view film study of each breast)

**Diagnostic Ultrasound**

**Chest**

- 76645      Ultrasound, breast(s) (unilateral or bilateral), real time with image documentation

606 Sleep Centers: Radiology Service Codes and Descriptions

Service

Code      Service Description

**Neurology and Neuromuscular Procedures**

**Sleep Studies**

- 95805      Multiple sleep latency or maintenance of wakefulness testing, recording, analysis and interpretation of physiological measurements of sleep during multiple trials to assess sleepiness
- 95806      Sleep study, simultaneous recording of ventilation, respiratory effort, ECG or heart rate, and oxygen saturation, unattended by a technologist
- 95807      Sleep study, simultaneous recording of ventilation, respiratory effort, ECG or heart rate, and oxygen saturation, attended by a technologist
- 95808      Polysomnography; sleep staging with one to 3 additional parameters of sleep, attended by a technologist
- 95810      Polysomnography; sleep staging with 4 or more additional parameters of sleep, attended by a technologist
- 95811      Polysomnography; sleep staging with 4Pa or more additional parameters of sleep, with initiation of continuous positive airway pressure therapy or bilevel ventilation, attended by a technologist

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