	Addendum B.-Final OPPS Payment by							
	CPT codes and descriptions only are copyright 2012 American Medical Association. All Rights Reserved. Applicable FARS/DFARS Apply. Dental codes (D codes) are copyright 2012 American Dental Association. All Rights Reserved.							
HCPCS Code	Short Descriptor	CI	SI	APC	Relative Weight	Payment Rate	National Unadjusted Copayment	Minimum Unadjusted Copayment
0073T	Delivery comp imrt		S	0412	7.0241	$510.46	.	$102.10
0182T	Hdr elect brachytherapy		S	0313	10.0974	$733.80	$259.86	$146.76
10021	Fna w/o image	CH	T	0015	2.0281	$147.39	.	$29.48
10060	Drainage of skin abscess		T	0006	2.1970	$159.66	.	$31.94
20555	Place ndl musc/tis for rt		T	0050	35.4456	$2,575.90	.	$515.18
20665	Removal of fixation device	CH	Q2	0420	1.3520	$98.25	.	$19.65
31575	Diagnostic laryngoscopy	CH	T	0071	2.0698	$150.42	.	$30.09
41019	Place needles h&n for rt		T	0254	25.5846	$1,859.28	.	$371.86
41599	Tongue and mouth surgery		T	0250	1.1575	$84.12	$24.11	$16.83
46600	Diagnostic anoscopy	CH	X	0420	1.3520	$98.25	.	$19.65
49411	Ins mark abd/pel for rt perq	CH	X	0310	14.2612	$1,036.39	$325.27	$207.28
55875	Transperi needle place pros		Q3	0163	39.9743	$2,905.01	.	$581.01
55876	Place rt device/marker pros	CH	X	0310	14.2612	$1,036.39	$325.27	$207.28
55920	Place needles pelvic for rt		T	0153	25.2695	$1,836.39	.	$367.28
57155	Insert uteri tandem/ovoids	CH	T	0193	18.9234	$1,375.20	.	$275.04
57156	Ins vag brachytx device		T	0189	2.6066	$189.43	.	$37.89
57410	Pelvic examination		T	0193	18.9234	$1,375.20	.	$275.04
58301	Remove intrauterine device	CH	Q2	0189	2.6066	$189.43	.	$37.89
58999	Genital surgery procedure		T	0191	0.1421	$10.33	.	$2.07
76873	Echograp trans r pros study		S	0267	2.6261	$190.84	$59.55	$38.17
76942	Echo guide for biopsy		N					
76950	Echo guidance radiotherapy		N					
76965	Echo guidance radiotherapy		N					
76970	Ultrasound exam follow-up		S	0265	1.2391	$90.05	$22.26	$18.01
77014	Ct scan for therapy guide		N					
77261	Radiation therapy planning		B					
77262	Radiation therapy planning		B					
77263	Radiation therapy planning		B					
77280	Set radiation therapy field	CH	X	0304	1.5776	$114.65	$34.63	$22.93
77285	Set radiation therapy field	CH	X	0305	4.2846	$311.37	$88.78	$62.28
77290	Set radiation therapy field		X	0305	4.2846	$311.37	$88.78	$62.28
77293	Respirator motion mgmt simul	NI	N					
77295	3-d radiotherapy plan		X	0310	14.2612	$1,036.39	$325.27	$207.28
77299	Radiation therapy planning	CH	X	0304	1.5776	$114.65	$34.63	$22.93
77300	Radiation therapy dose plan		X	0304	1.5776	$114.65	$34.63	$22.93
77301	Radiotherapy dose plan imrt		X	0310	14.2612	$1,036.39	$325.27	$207.28
77305	Teletx isodose plan simple	CH	X	0304	1.5776	$114.65	$34.63	$22.93
77310	Teletx isodose plan intermed	CH	X	0304	1.5776	$114.65	$34.63	$22.93
77315	Teletx isodose plan complex		X	0305	4.2846	$311.37	$88.78	$62.28
77321	Special teletx port plan	CH	X	0305	4.2846	$311.37	$88.78	$62.28
77326	Brachytx isodose calc simp	CH	X	0304	1.5776	$114.65	$34.63	$22.93
77327	Brachytx isodose calc interm	CH	X	0305	4.2846	$311.37	$88.78	$62.28
77328	Brachytx isodose plan compl	CH	X	0305	4.2846	$311.37	$88.78	$62.28
77331	Special radiation dosimetry	CH	X	0304	1.5776	$114.65	$34.63	$22.93
77332	Radiation treatment aid(s)	CH	X	0303	2.9377	$213.49	$66.95	$42.70
77333	Radiation treatment aid(s)	CH	X	0303	2.9377	$213.49	$66.95	$42.70
77334	Radiation treatment aid(s)	CH	X	0303	2.9377	$213.49	$66.95	$42.70
77336	Radiation physics consult	CH	X	0304	1.5776	$114.65	$34.63	$22.93
77338	Design mlc device for imrt		X	0305	4.2846	$311.37	$88.78	$62.28
77370	Radiation physics consult	CH	X	0304	1.5776	$114.65	$34.63	$22.93
77371	Srs multisource	CH	S	0067	49.4227	$3,591.65	.	$718.33
77372	Srs linear based	CH	S	0067	49.4227	$3,591.65	.	$718.33
77373	Sbrt delivery	CH	S	0066	26.4380	$1,921.30	$768.51	$384.26
77399	External radiation dosimetry	CH	X	0304	1.5776	$114.65	$34.63	$22.93
77401	Radiation treatment delivery		S	0300	1.4346	$104.26	.	$20.86
77402	Radiation treatment delivery		S	0300	1.4346	$104.26	.	$20.86
77403	Radiation treatment delivery		S	0300	1.4346	$104.26	.	$20.86
77404	Radiation treatment delivery		S	0300	1.4346	$104.26	.	$20.86
77406	Radiation treatment delivery	CH	S	0301	2.6458	$192.28	.	$38.46

Addendum B

HCPCS Code	Short Descriptor	CI	SI	APC	Relative Weight	Payment Rate	National Unadjusted Copayment	Minimum Unadjusted Copayment
77407	Radiation treatment delivery		S	0300	1.4346	$104.26	.	$20.86
77408	Radiation treatment delivery		S	0301	2.6458	$192.28	.	$38.46
77409	Radiation treatment delivery		S	0301	2.6458	$192.28	.	$38.46
77411	Radiation treatment delivery		S	0301	2.6458	$192.28	.	$38.46
77412	Radiation treatment delivery		S	0301	2.6458	$192.28	.	$38.46
77413	Radiation treatment delivery		S	0301	2.6458	$192.28	.	$38.46
77414	Radiation treatment delivery		S	0301	2.6458	$192.28	.	$38.46
77416	Radiation treatment delivery		S	0301	2.6458	$192.28	.	$38.46
77417	Radiology port film(s)		N					
77418	Radiation tx delivery imrt		S	0412	7.0241	$510.46	.	$102.10
77421	Stereoscopic x-ray guidance		N					
77422	Neutron beam tx simple		S	0301	2.6458	$192.28	.	$38.46
77423	Neutron beam tx complex		S	0301	2.6458	$192.28	.	$38.46
77424	Io rad tx delivery by x-ray		S	0065	17.1769	$1,248.28	.	$249.66
77425	Io rad tx deliver by elctrns		S	0065	17.1769	$1,248.28	.	$249.66
77427	Radiation tx management x5		B					
77431	Radiation therapy management		B					
77432	Stereotactic radiation trmt		B					
77435	Sbrt management		N					
77469	Io radiation tx management		B					
77470	Special radiation treatment		S	0299	5.6861	$413.22	.	$82.65
77499	Radiation therapy management		B					
77520	Proton trmt simple w/o comp		S	0664	12.0042	$872.37	.	$174.48
77522	Proton trmt simple w/comp		S	0664	12.0042	$872.37	.	$174.48
77523	Proton trmt intermediate		S	0667	16.5851	$1,205.27	.	$241.06
77525	Proton treatment complex		S	0667	16.5851	$1,205.27	.	$241.06
77600	Hyperthermia treatment		S	0299	5.6861	$413.22	.	$82.65
77605	Hyperthermia treatment		S	0299	5.6861	$413.22	.	$82.65
77610	Hyperthermia treatment		S	0299	5.6861	$413.22	.	$82.65
77615	Hyperthermia treatment		S	0299	5.6861	$413.22	.	$82.65
77620	Hyperthermia treatment		S	0299	5.6861	$413.22	.	$82.65
77750	Infuse radioactive materials		S	0301	2.6458	$192.28	.	$38.46
77761	Apply intrcav radiat simple		S	0312	4.9715	$361.29	.	$72.26
77762	Apply intrcav radiat interm		S	0312	4.9715	$361.29	.	$72.26
77763	Apply intrcav radiat compl		S	0312	4.9715	$361.29	.	$72.26
77776	Apply interstit radiat simpl		S	0312	4.9715	$361.29	.	$72.26
77777	Apply interstit radiat inter		S	0312	4.9715	$361.29	.	$72.26
77778	Apply interstit radiat compl		Q3	0651	13.7315	$997.90	.	$199.58
77785	Hdr brachytx 1 channel		S	0313	10.0974	$733.80	$259.86	$146.76
77786	Hdr brachytx 2-12 channel		S	0313	10.0974	$733.80	$259.86	$146.76
77787	Hdr brachytx over 12 chan		S	0313	10.0974	$733.80	$259.86	$146.76
77789	Apply surface radiation	CH	S	0301	2.6458	$192.28	.	$38.46
77790	Radiation handling		N					
77799	Radium/radioisotope therapy		S	0312	4.9715	$361.29	.	$72.26
79101	Nuclear rx iv admin		S	0407	3.5200	$255.81	$78.13	$51.17
99201	Office/outpatient visit new	CH	B					
99202	Office/outpatient visit new	CH	B					
99203	Office/outpatient visit new	CH	B					
99204	Office/outpatient visit new	CH	B					
99205	Office/outpatient visit new	CH	B					
99211	Office/outpatient visit est	CH	B					
99212	Office/outpatient visit est	CH	B					
99213	Office/outpatient visit est	CH	B					
99214	Office/outpatient visit est	CH	B					
99215	Office/outpatient visit est	CH	B					
99217	Observation care discharge		B					
99218	Initial observation care		B					
99219	Initial observation care		B					
99220	Initial observation care		B					
99221	Initial hospital care		B					
99222	Initial hospital care		B					
99223	Initial hospital care		B					
99224	Subsequent observation care		B					
99225	Subsequent observation care		B					
99226	Subsequent observation care		B					
99231	Subsequent hospital care		B					
99232	Subsequent hospital care		B					

Addendum B

HCPCS Code	Short Descriptor	CI	SI	APC	Relative Weight	Payment Rate	National Unadjusted Copayment	Minimum Unadjusted Copayment
99233	Subsequent hospital care		B					
99234	Observ/hosp same date		B					
99235	Observ/hosp same date		B					
99236	Observ/hosp same date		B					
99238	Hospital discharge day		B					
99239	Hospital discharge day		B					
99241	Office consultation		E					
99242	Office consultation		E					
99243	Office consultation		E					
99244	Office consultation		E					
99245	Office consultation		E					
99251	Inpatient consultation		E					
99252	Inpatient consultation		E					
99253	Inpatient consultation		E					
99254	Inpatient consultation		E					
99255	Inpatient consultation		E					
99354	Prolonged service office		N					
99355	Prolonged service office		N					
99356	Prolonged service inpatient		C					
99357	Prolonged service inpatient		C					
99358	Prolong service w/o contact		N					
99359	Prolong serv w/o contact add		N					
99406	Behav chng smoking 3-10 min		S	0031	0.3292	$23.92	.	$4.79
99407	Behav chng smoking > 10 min		S	0031	0.3292	$23.92	.	$4.79
99499	Unlisted e&m service		B					
C9728	Place device/marker, non pro	CH	X	0310	14.2612	$1,036.39	$325.27	$207.28
G0173	Linear acc stereo radsur com	CH	B					
G0251	Linear acc based stero radio	CH	B					
G0339	Robot lin-radsurg com, first	CH	B					
G0340	Robt lin-radsurg fractx 2-5	CH	B					
Source:	Addendum B CMS-1601-FC (2014)							
https://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/HospitalOutpatientPPS/Hospital-Outpatient-Regulations-and-Notices-Items/CMS-1601-FC-.html								
2014 APCs								

ADDENDUM D1.—OPPS PAYMENT STATUS INDICATORS FOR CY 2014		
Status	**Item/Code/Service**	**OPPS Payment Status**
A	Services furnished to a hospital outpatient that are paid under a fee schedule or payment system other than OPPS, for example:	Not paid under OPPS. Paid by fiscal intermediaries/MACs under a fee schedule or payment system other than OPPS.
		Services are subject to deductible or coinsurance unless indicated otherwise.
	• Ambulance Services	
	• Separately Payable Clinical Diagnostic Laboratory Services	Not subject to deductible or coinsurance.
	• Non-Implantable Prosthetic and Orthotic Devices	
	• EPO for ESRD Patients	
	• Physical, Occupational, and Speech Therapy	
	• Diagnostic Mammography	
	• Screening Mammography	Not subject to deductible or coinsurance.
B	Codes that are not recognized by OPPS when submitted on an outpatient hospital Part B bill type (12x and 13x).	Not paid under OPPS.
		• May be paid by fiscal intermediaries/MACs when submitted on a different bill type, for example, 75x (CORF), but not paid under OPPS.
		• An alternate code that is recognized by OPPS when submitted on an outpatient hospital Part B bill type (12x and 13x) may be available.
C	Inpatient Procedures	Not paid under OPPS. Admit patient. Bill as inpatient.
D	Discontinued Codes	Not paid under OPPS or any other Medicare payment system.
E	Items, Codes, and Services:	Not paid by Medicare when submitted on outpatient claims (any outpatient bill type).
	• That are not covered by any Medicare outpatient benefit based on statutory exclusion.	
	• That are not covered by any Medicare outpatient benefit for reasons other than statutory exclusion	
	• That are not recognized by Medicare for outpatient claims but for which an alternate code for the same item or service may be available.	
	• For which separate payment is not provided on outpatient claims	
F	Corneal Tissue Acquisition; Certain CRNA Services and Hepatitis B Vaccines	Not paid under OPPS. Paid at reasonable cost.
G	Pass-Through Drugs and Biologicals	Paid under OPPS; separate APC payment.
H	Pass-Through Device Categories	Separate cost-based pass-through payment; not subject to copayment.
K	Nonpass-Through Drugs and Nonimplantable Biologicals, Including Therapeutic Radiopharmaceuticals	Paid under OPPS; separate APC payment.
L	Influenza Vaccine; Pneumococcal Pneumonia Vaccine	Not paid under OPPS. Paid at reasonable cost; not subject to deductible or coinsurance.
M	Items and Services Not Billable to the Fiscal Intermediary/MAC	Not paid under OPPS.

Addendum D-1

N	Items and Services Packaged into APC Rates	Paid under OPPS; payment is packaged into payment for other services. Therefore, there is no separate APC payment.
P	Partial Hospitalization	Paid under OPPS; per diem APC payment.
Q1	STV-Packaged Codes	Paid under OPPS; Addendum B displays APC assignments when services are separately payable.
		(1) Packaged APC payment if billed on the same date of service as a HCPCS code assigned status indicator "S," "T,""V," or "X."
		(2) In other circumstances, payment is made through a separate APC payment.
Q2	T-Packaged Codes	Paid under OPPS; Addendum B displays APC assignments when services are separately payable.
		(1) Packaged APC payment if billed on the same date of service as a HCPCS code assigned status indicator "T."
		(2) In other circumstances, payment is made through a separate APC payment.
Q3	Codes That May Be Paid Through a Composite APC	Paid under OPPS; Addendum B displays APC assignments when services are separately payable.
		Addendum M displays composite APC assignments when codes are paid through a composite APC.
		(1) Composite APC payment based on OPPS composite-specific payment criteria. Payment is packaged into a single payment for specific combinations of services.
		(2) In other circumstances, payment is made through a separate APC payment or packaged into payment for other services.
R	Blood and Blood Products	Paid under OPPS; separate APC payment.
S	Procedure or Service, Not Discounted When Multiple	Paid under OPPS; separate APC payment.
T	Procedure or Service, Multiple Reduction Applies	Paid under OPPS; separate APC payment.
U	Brachytherapy Sources	Paid under OPPS; separate APC payment.
V	Clinic or Emergency Department Visit	Paid under OPPS; separate APC payment.
X	Ancillary Services	Paid under OPPS; separate APC payment.
Y	Non-Implantable Durable Medical Equipment	Not paid under OPPS. All institutional providers other than home health agencies bill to DMERC.

Source: CMS-1601-FC

ADDENDUM D2.— FINAL OPPS COMMENT INDICATORS FOR CY 2014	
Final Comment Indicator	**Descriptor**
NI	New code for the next calendar year or existing code with substantial revision to its code descriptor in the next calendar year as compared to current calendar year, interim APC assignment; comments will be accepted on the interim APC assignment for the new code.
CH	Active HCPCS code in current year and next calendar year, status indicator and/or APC assignment has changed; or active HCPCS code that will be discontinued at the end of the current calendar year.

Source: CMS-1601-FC

Addendum M.-Final HCPCS Codes for Assignment to Composite APCs for CY 2014

HCPCS Code	Short Descriptor	CI	SI	Single Code APC Assignment	Composite APC Assignment
33225	L ventric pacing lead add-on		Q3	0655	0108
33249	Nsert pace-defib w/lead		Q3	0108	0108
36600	Withdrawal of arterial blood	CH	Q3	0420	0617, 0618
43752	Nasal/orogastric w/tube plmt	CH	Q3	0277	0617, 0618
55875	Transperi needle place pros		Q3	0163	8001
70336	Magnetic image jaw joint		Q3	0336	8007 or 8008
70450	Ct head/brain w/o dye		Q3	0332	8005 or 8006
70460	Ct head/brain w/dye		Q3	0283	8006
70470	Ct head/brain w/o & w/dye		Q3	0333	8006
70480	Ct orbit/ear/fossa w/o dye		Q3	0332	8005 or 8006
70481	Ct orbit/ear/fossa w/dye		Q3	0283	8006
70482	Ct orbit/ear/fossa w/o&w/dye		Q3	0333	8006
70486	Ct maxillofacial w/o dye		Q3	0332	8005 or 8006
70487	Ct maxillofacial w/dye		Q3	0283	8006
70488	Ct maxillofacial w/o & w/dye		Q3	0333	8006
70490	Ct soft tissue neck w/o dye		Q3	0332	8005 or 8006
70491	Ct soft tissue neck w/dye		Q3	0283	8006
70492	Ct sft tsue nck w/o & w/dye		Q3	0333	8006
70496	Ct angiography head		Q3	0662	8006
70498	Ct angiography neck		Q3	0662	8006
70540	Mri orbit/face/neck w/o dye		Q3	0336	8007 or 8008
70542	Mri orbit/face/neck w/dye		Q3	0284	8008
70543	Mri orbt/fac/nck w/o &w/dye		Q3	0337	8008
70544	Mr angiography head w/o dye		Q3	0336	8007 or 8008
70545	Mr angiography head w/dye		Q3	0284	8008
70546	Mr angiograph head w/o&w/dye		Q3	0337	8008
70547	Mr angiography neck w/o dye		Q3	0336	8007 or 8008
70548	Mr angiography neck w/dye		Q3	0284	8008
70549	Mr angiograph neck w/o&w/dye		Q3	0337	8008
70551	Mri brain stem w/o dye		Q3	0336	8007 or 8008
70552	Mri brain stem w/dye		Q3	0284	8008
70553	Mri brain stem w/o & w/dye		Q3	0337	8008
70554	Fmri brain by tech		Q3	0336	8007 or 8008
71010	Chest x-ray 1 view frontal		Q3	0260	0617, 0618
71015	Chest x-ray stereo frontal		Q3	0260	0617, 0618
71020	Chest x-ray 2vw frontal&latl		Q3	0260	0617, 0618
71250	Ct thorax w/o dye		Q3	0332	8005 or 8006
71260	Ct thorax w/dye		Q3	0283	8006
71270	Ct thorax w/o & w/dye		Q3	0333	8006
71275	Ct angiography chest		Q3	0662	8006
71550	Mri chest w/o dye		Q3	0336	8007 or 8008
71551	Mri chest w/dye		Q3	0284	8008

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71552	Mri chest w/o & w/dye		Q3	0337	8008
72125	Ct neck spine w/o dye		Q3	0332	8005 or 8006
72126	Ct neck spine w/dye		Q3	0283	8006
72127	Ct neck spine w/o & w/dye		Q3	0333	8006
72128	Ct chest spine w/o dye		Q3	0332	8005 or 8006
72129	Ct chest spine w/dye		Q3	0283	8006
72130	Ct chest spine w/o & w/dye		Q3	0333	8006
72131	Ct lumbar spine w/o dye		Q3	0332	8005 or 8006
72132	Ct lumbar spine w/dye		Q3	0283	8006
72133	Ct lumbar spine w/o & w/dye		Q3	0333	8006
72141	Mri neck spine w/o dye		Q3	0336	8007 or 8008
72142	Mri neck spine w/dye		Q3	0284	8008
72146	Mri chest spine w/o dye		Q3	0336	8007 or 8008
72147	Mri chest spine w/dye		Q3	0284	8008
72148	Mri lumbar spine w/o dye		Q3	0336	8007 or 8008
72149	Mri lumbar spine w/dye		Q3	0284	8008
72156	Mri neck spine w/o & w/dye		Q3	0337	8008
72157	Mri chest spine w/o & w/dye		Q3	0337	8008
72158	Mri lumbar spine w/o & w/dye		Q3	0337	8008
72191	Ct angiograph pelv w/o&w/dye		Q3	0662	8006
72192	Ct pelvis w/o dye		Q3	0332	8005 or 8006
72193	Ct pelvis w/dye		Q3	0283	8006
72194	Ct pelvis w/o & w/dye		Q3	0333	8006
72195	Mri pelvis w/o dye		Q3	0336	8007 or 8008
72196	Mri pelvis w/dye		Q3	0284	8008
72197	Mri pelvis w/o & w/dye		Q3	0337	8008
73200	Ct upper extremity w/o dye		Q3	0332	8005 or 8006
73201	Ct upper extremity w/dye		Q3	0283	8006
73202	Ct uppr extremity w/o&w/dye		Q3	0333	8006
73206	Ct angio upr extrm w/o&w/dye		Q3	0662	8006
73218	Mri upper extremity w/o dye		Q3	0336	8007 or 8008
73219	Mri upper extremity w/dye		Q3	0284	8008
73220	Mri uppr extremity w/o&w/dye		Q3	0337	8008
73221	Mri joint upr extrem w/o dye		Q3	0336	8007 or 8008
73222	Mri joint upr extrem w/dye		Q3	0284	8008
73223	Mri joint upr extr w/o&w/dye		Q3	0337	8008
73700	Ct lower extremity w/o dye		Q3	0332	8005 or 8006
73701	Ct lower extremity w/dye		Q3	0283	8006
73702	Ct lwr extremity w/o&w/dye		Q3	0333	8006
73706	Ct angio lwr extr w/o&w/dye		Q3	0662	8006
73718	Mri lower extremity w/o dye		Q3	0336	8007 or 8008
73719	Mri lower extremity w/dye		Q3	0284	8008
73720	Mri lwr extremity w/o&w/dye		Q3	0337	8008
73721	Mri jnt of lwr extre w/o dye		Q3	0336	8007 or 8008
73722	Mri joint of lwr extr w/dye		Q3	0284	8008
73723	Mri joint lwr extr w/o&w/dye		Q3	0337	8008
74150	Ct abdomen w/o dye		Q3	0332	8005 or 8006

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74160	Ct abdomen w/dye		Q3	0283	8006
74170	Ct abdomen w/o & w/dye		Q3	0333	8006
74175	Ct angio abdom w/o & w/dye		Q3	0662	8006
74176	Ct abd & pelvis w/o contrast		Q3	0331	8005 or 8006
74177	Ct abd & pelv w/contrast		Q3	0334	8006
74178	Ct abd & pelv 1/> regns		Q3	0334	8006
74181	Mri abdomen w/o dye		Q3	0336	8007 or 8008
74182	Mri abdomen w/dye		Q3	0284	8008
74183	Mri abdomen w/o & w/dye		Q3	0337	8008
74261	Ct colonography dx		Q3	0332	8005 or 8006
74262	Ct colonography dx w/dye		Q3	0283	8006
75557	Cardiac mri for morph		Q3	0336	8007 or 8008
75559	Cardiac mri w/stress img		Q3	0336	8007 or 8008
75561	Cardiac mri for morph w/dye		Q3	0337	8008
75563	Card mri w/stress img & dye	CH	Q3	0377	8008
75635	Ct angio abdominal arteries		Q3	0662	8006
76604	Us exam chest	CH	Q3	0266	8004
76700	Us exam abdom complete		Q3	0266	8004
76705	Echo exam of abdomen		Q3	0266	8004
76770	Us exam abdo back wall comp		Q3	0266	8004
76775	Us exam abdo back wall lim		Q3	0266	8004
76776	Us exam k transpl w/doppler		Q3	0266	8004
76831	Echo exam uterus		Q3	0267	8004
76856	Us exam pelvic complete		Q3	0266	8004
76857	Us exam pelvic limited		Q3	0265	8004
76870	Us exam scrotum		Q3	0266	8004
77778	Apply interstit radiat compl		Q3	0651	8001
90791	Psych diagnostic evaluation		Q3	0323	0034
90792	Psych diag eval w/med srvcs		Q3	0323	0034
90832	Psytx pt&/family 30 minutes		Q3	0322	0034
90834	Psytx pt&/family 45 minutes		Q3	0323	0034
90837	Psytx pt&/family 60 minutes		Q3	0323	0034
90839	Psytx crisis initial 60 min		Q3	0323	0034
90845	Psychoanalysis		Q3	0323	0034
90846	Family psytx w/o patient		Q3	0324	0034
90847	Family psytx w/patient		Q3	0324	0034
90849	Multiple family group psytx		Q3	0325	0034
90853	Group psychotherapy		Q3	0325	0034
90865	Narcosynthesis		Q3	0323	0034
90880	Hypnotherapy		Q3	0323	0034
90899	Psychiatric service/therapy		Q3	0322	0034
92953	Temporary external pacing		Q3	0094	0617, 0618
93619	Electrophysiology evaluation		Q3	0085	8000
93620	Electrophysiology evaluation		Q3	0085	8000
93650	Ablate heart dysrhythm focus		Q3	0085	8000
93653	Ep & ablate supravent arrhyt		Q3	8000	8000
93654	Ep & ablate ventric tachy		Q3	8000	8000

Addendum M

93656	Tx atrial fib pulm vein isol		Q3	8000	8000
94002	Vent mgmt inpat init day		Q3	0079	0617, 0618
94003	Vent mgmt inpat subq day		Q3	0079	0617, 0618
94660	Pos airway pressure cpap	CH	Q3	0102	0617, 0618
94662	Neg press ventilation cnp		Q3	0079	0617, 0618
94762	Measure blood oxygen level	CH	Q3	0096	0617, 0618
96101	Psycho testing by psych/phys		Q3	0382	0034
96102	Psycho testing by technician		Q3	0373	0034
96103	Psycho testing admin by comp		Q3	0373	0034
96111	Developmental test extend		Q3	0373	0034
96116	Neurobehavioral status exam		Q3	0382	0034
96118	Neuropsych tst by psych/phys		Q3	0382	0034
96119	Neuropsych testing by tec		Q3	0382	0034
96120	Neuropsych tst admin w/comp		Q3	0373	0034
96150	Assess hlth/behave init		Q3	0432	0034
96151	Assess hlth/behave subseq		Q3	0432	0034
96152	Intervene hlth/behave indiv		Q3	0432	0034
96153	Intervene hlth/behave group		Q3	0031	0034
96154	Interv hlth/behav fam w/pt		Q3	0432	0034
99284	Emergency dept visit		Q3	0615	8009
99285	Emergency dept visit		Q3	0616	8009
99291	Critical care first hour	CH	Q3	0617	8009
C8900	Mra w/cont, abd		Q3	0284	8008
C8901	Mra w/o cont, abd		Q3	0336	8007 or 8008
C8902	Mra w/o fol w/cont, abd		Q3	0337	8008
C8903	Mri w/cont, breast, uni		Q3	0284	8008
C8904	Mri w/o cont, breast, uni		Q3	0336	8007 or 8008
C8905	Mri w/o fol w/cont, brst, un		Q3	0337	8008
C8906	Mri w/cont, breast, bi		Q3	0284	8008
C8907	Mri w/o cont, breast, bi		Q3	0336	8007 or 8008
C8908	Mri w/o fol w/cont, breast,		Q3	0337	8008
C8909	Mra w/cont, chest		Q3	0284	8008
C8910	Mra w/o cont, chest		Q3	0336	8007 or 8008
C8911	Mra w/o fol w/cont, chest		Q3	0337	8008
C8912	Mra w/cont, lwr ext		Q3	0284	8008
C8913	Mra w/o cont, lwr ext		Q3	0336	8007 or 8008
C8914	Mra w/o fol w/cont, lwr ext		Q3	0337	8008
C8918	Mra w/cont, pelvis		Q3	0284	8008
C8919	Mra w/o cont, pelvis		Q3	0336	8007 or 8008
C8920	Mra w/o fol w/cont, pelvis		Q3	0337	8008
C8931	Mra, w/dye, spinal canal		Q3	0284	8008
C8932	Mra, w/o dye, spinal canal		Q3	0336	8007 or 8008
C8933	Mra, w/o&w/dye, spinal canal		Q3	0337	8008
C8934	Mra, w/dye, upper extremity		Q3	0284	8008
C8935	Mra, w/o dye, upper extr		Q3	0336	8007 or 8008
C8936	Mra, w/o&w/dye, upper extr		Q3	0337	8008
G0379	Direct refer hospital observ	CH	Q3	0633	8009

Addendum M

G0384	Lev 5 hosp type b ed visit		Q3	0630	8009
G0451	Devlopment test interpt&rep		Q3	0432	0034
G0463	Hospital outpt clinic visit	NI	Q3	0634	8009
M0064	Visit for drug monitoring	CH	Q3	0632	0034
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Source:	CMS-1601-FC				