

2019 CPT[®] ANNUAL UPDATE

Presented to Maryland AAHAM

December 14, 2018

OBJECTIVES

- Review 2019 CPT Code Revised, Added and Deleted Codes
- Discuss rationales for major changes; understand the "what" and the "why"
- Discuss other updates effective January 1, 2019



AGENDA

- 2019 CPT Changes Overview
- Evaluation and Management Updates
- Surgery Updates
- Radiology Updates
- Pathology and Laboratory Updates
- Medicine Updates
- Category III Code Updates

DISCLAIMER

This is a high-level CPT update. Every code and or description change will not be discussed.

This presentation is organized according to 'Appendix B – Summary of Additions, Deletions and Revisions' in the 2019 CPT Professional coding book.

Explanatory Notes

There were many explanatory verbiage updates throughout CPT that should be reviewed.

The presentation is lengthy, however every slide will not be addressed. Please review the materials at your leisure.

Just because a new code is developed does not mean the service will be covered by Medicare or other payers... watch carefully for denials.

2019 CPT CHANGES OVERVIEW

- There are 10,294 CPT codes of which only 335 changes were made for 2019
- 212 codes added and 50 codes revised to address:
 - TeleHealth
 - Skin biopsy
 - Fine needle aspiration biopsy
 - Adaptive behavior analysis
 - Central nervous system assessments including psychological and neuropsychological testing
- 70 codes were deleted

EVALUATION AND MANAGEMENT

EVALUATION & MANAGEMENT

- 6 New codes and 5 revised codes
- 99446 – 99449, 99451 – 99452 were added for interprofessional consultation
 - Used when the attending or primary physician is seeking opinion or treatment advice of a specialist without face-to-face meeting.
- 99453-99454 was added to monitor the patients physiology; weight, blood pressure, pulse oximetry
 - 99453 is used for each episode of care (beginning of monitoring until goals are met).
 - 99453-54 should not be used for less than 16 days
 - 99454 can only be used once in a 30-day period
 - Cannot be used with other monitoring devices (such as continuous glucose monitoring)



EVALUATION & MANAGEMENT cont.

- 99091 was revised in the description only. The AMA clarified this code is to be used for ‘each 30 days’.
 - It should only be reported once in a 30-day period.
 - It should not be used on the same day a patient presents for E/M services. The 99091 would then be part of the E/M service and not reported separately
 - There are other instances of “do not report” which is reported in the 2019 CPT Professional book.

EVALUATION & MANAGEMENT cont.

- Current...
 - E/M leveling (5-levels) are based on 3 factors: (1) history, (2) examination, and (3) medical decision making ‘MDM’.
 - For visits that consist predominantly of counseling and/or coordination of care, time (in conjunction with MDM) can be used as the key or controlling factor determining visit level.
 - Providers can continue to use the 1995 or 1997 E/M documentation guidelines.
- Beginning in January 2019
 - Slight documentation changes for Office/Outpatient Visits: (1) medical necessity documentation is not required for home visits, (2) for established patients – if relevant H&P is already in the system – providers can focus on changes since the last visit, (3) for new and established patients – no need to re-enter patients chief company and history. The practitioner can simply indicate that he or she reviewed and verified this information

Appendix B – Summary of Additions, Deletions and Revisions

EVALUATION & MANAGEMENT cont.

Status	CPT	Description
Revised	99446	Interprofessional telephone/internet/ <i>electronic health record assessment</i> and management services provided by a consultative physician including a verbal and written report to the patient's treating/requesting physician or other qualified health care professional; 5-10 min of medical consultative discussion and review
Revised	99447	11-20 minutes of medical consultative discussion and review
Revised	99448	21-30 minutes of medical consultative discussion and review
Revised	99449	31 minutes or more of medical consultative discussion and review
New	99451	Interprofessional telephone/internet/electronic health record assessment and management service provided by a consultative physician, including a written report to the patient's treating/requesting physician or other qualified health care professional, 5 minutes or more of medical consultative time.
New	99452	Interprofessional telephone/internet/electronic health record referral service(s) provided by a treating/requesting physician or other qualified health care professional, 30 minutes
New	99453	Remote monitoring of physiologic parameter(s) (e.g., weight, blood pressure, pulse oximetry, respiratory flow rate), initial; set-up and patient education on use of equipment (only report once per episode of care and do not report for monitoring of less than 16 days)
New	99454	device(s) supply with daily recording(s) or programmed alert(s) transmission, each 30 days (do not report for monitoring of less than 16 days)
Revised	99091	Collection and interpretation of physiologic data...requiring a minimum of 30 minutes of time, <i>each 30 days</i> .
New	99457	Remote physiologic monitoring treatment management services, 20 minutes or more of clinical staff/physician/other qualified health care professional time in a calendar month requiring interactive communication with the patient/caregiver during the month.
New	99491	Chronic care management services, provided personally by a physician or other qualified health care professional, at least 30 minutes of physician or other qualified health care professional time, per calendar month, with the following requirements: <ul style="list-style-type: none"> - 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.

SURGERY

SURGERY

- 34 New Codes, 20 Deleted Codes and 6 Revised Codes
- Changes were made to Imaging guidance.
 - When imaging guidance or imaging supervision and interpretation is included in a surgical procedure, guidelines for image documentation and report, included in the guidelines for Radiology (including Nuclear Medicine and Diagnostic Ultrasound), will apply
 - Imaging guidance includes fluoroscopy, ultrasound, computer tomography (CT) or magnetic resonance (MR) guidance
- Changes were made to Fine Needle Aspiration (FNA) codes
 - 2 codes for FNA without imaging guidance |10021 for **initial lesion** and 10004 (New Add-on code) for each **additional lesion**
 - 8 codes for FNA with imaging guidance |10005-10012 | Imaging modality specific |
 - 4 base codes for each initial lesion
 - 4 add-on codes for each additional lesion
 - 10022 was deleted (FNA biopsy with imaging guidance)
- Biopsy codes 11100 – 11101 were deleted and 6 new biopsy codes were added. 11102 - 11107

Appendix B – Summary of Additions, Deletions and Revisions SURGERY cont.

Status	CPT	Description
Revised	10021	Fine needle aspiration, <i>biopsy, without imaging guidance; first lesion</i>
Deleted	10022	..with imaging guidance
New	10004	.. each additional lesion (List separately in addition to code for primary procedure)
New	10005	Fine needle aspiration biopsy, including ultrasound guidance; first lesion
New	10006	.. each additional lesion (List separately in addition to code for primary procedure)
New	10007	Fine needle aspiration biopsy, including fluoroscopic guidance; first lesion
New	10008	.. each additional lesion (List separately in addition to code for primary procedure)
New	10009	Fine needle aspiration biopsy, including CT guidance; first lesion
New	10010	.. each additional lesion (List separately in addition to code for primary procedure)
New	10011	Fine needle aspiration biopsy, including MR guidance; first lesion
New	10012	.. each additional lesion (List separately in addition to code for primary procedure)
Deleted	11100	Deleted
Deleted	11101	Deleted
New	11102	Tangential biopsy of skin (e.g., shave, scoop, saucerize, curette); single lesion
New	11103	..each separate/additional lesion (List separately in addition to code for primary procedure)
New	11104	Punch biopsy of skin (including simple closure, when performed); single lesion
New	11105	..each separate/additional lesion (List separately in addition to code for primary procedure)
New	11106	Incisional biopsy of skin (e.g., wedge) (including simple closure, when performed); single lesion
New	11107	..each separate/additional lesion (List separately in addition to code for primary procedure)
Deleted	20005	Deleted
New	20932	Allograft, includes templating, cutting, placement and internal fixation, when performed; osteoarticular, including articular surface and contiguous bone (List separately in addition to code for primary procedure)

Appendix B – Summary of Additions, Deletions and Revisions SURGERY cont.

Status	CPT	Description
New	20933	..hemicortical intercalary, partial (i.e., hemicylindrical) (List separately in addition to code for primary procedure)
New	20934	..intercalary, complete (i.e., cylindrical) (List separately in addition to code for primary procedure)
New	27369	Injection procedure for contrast knee arthrography or contrast enhanced CT/MRI knee arthrography
Deleted	27370	Deleted
Deleted	31595	Deleted
New	33274	Transcatheter insertion or replacement of permanent leadless pacemaker, right ventricular, including imaging guidance (e.g., fluoroscopy, venous ultrasound, ventriculography, femoral venography) and device evaluation (e.g., interrogation or programming), when performed.
New	33275	Transcatheter removal of permanent leadless pacemaker, right ventricular
Deleted	33282	Deleted
Deleted	33284	Deleted
New	33285	Insertion , subcutaneous cardiac rhythm monitor, including programming
New	33286	Removal, subcutaneous cardiac rhythm monitor
New	33289	Transcatheter implantation of wireless pulmonary artery pressure sensor for long-term hemodynamic monitoring, including deployment and calibration of the sensor, right heart catheterization, selective pulmonary catheterization, radiological supervision and interpretation, and pulmonary artery angiography, when performed
New	33440	Replacement, aortic valve; by translocation of autologous pulmonary valve and transventricular aortic annulus enlargement of the left ventricular outflow tract with valved conduit replacement of pulmonary valve (Ross-Konno procedure)
New	33866	Aortic hemiarch graft including isolation and control of the arch vessels, beveled open distal aortic anastomosis extending under one or more of the arch vessels, and total circulatory arrest or isolated cerebral perfusion (List separately in addition to code for primary procedure)
Revised	36568	Insertion of peripherally inserted central venous catheter (PICC), without subcutaneous port or pump, <u>without imaging guidance</u> ; younger than 5 years of age
Revised	36569	age 5 years or older
New	36572	Insertion of peripherally inserted central venous catheter (PICC), without subcutaneous port or pump, including all imaging guidance, image documentation, and all associated radiological supervision and interpretation required to perform the insertion; younger than 5 years of age

Appendix B – Summary of Additions, Deletions and Revisions SURGERY cont.

Status	CPT	Description
New	36573	..age 5 years or older
Revised	36584	Replacement, complete, of a peripherally inserted central venous catheter (PICC), without subcutaneous port or pump, through same venous access, <u>including all imaging guidance, image documentation, and all associated radiological supervision and interpretation required to perform the replacement.</u>
New	38531	..open, inguinofofemoral node(s)
Deleted	41500	Deleted
Deleted	43760	Deleted
New	43762	Replacement of gastrostomy tube, percutaneous, includes removal, when performed, without imaging or endoscopic guidance; not requiring revision of gastrostomy tract
New	43763	..requiring revision of gastrostomy tract
Deleted	46762	Deleted
Deleted	50395	Deleted
New	50436	Dilation of existing tract, percutaneous, for an endourologic procedure including imaging guidance (e.g., ultrasound and/or fluoroscopy) and all associated radiological supervision and interpretation, with post procedure tube placement, when performed;
New	50437	..including new access into the renal collecting system
New	53854	..by radiofrequency generated water vapor thermotherapy
Deleted	61332	Deleted
Deleted	61480	Deleted
Deleted	61610	Deleted
Deleted	61612	Deleted
Revised	61641	each additional vessel in same vascular <u>family territory</u> (List separately in addition to code for primary procedure)
Revised	61642	each additional vessel in different vascular <u>family territory</u> (List separately in addition to code for primary procedure)
Deleted	63615	Deleted
Deleted	64508	Deleted
Deleted	64550	Deleted
Deleted	66220	Deleted

RADIOLOGY

RADIOLOGY

- 10 New; 4 Revised and 6 Deleted codes
 - 79361 was added to allow users to report Magnetic Resonance Elastography (MRE). The MR technique measures the mechanical properties of tissues, i.e. tissue stiffness
 - MRE is a stand-alone procedure, not an add-on service
 - 76981-76983 was added to measure tissue stiffness using Elastography ultrasound. This method is faster and less expensive than the MRE. Previously Category III code 0346T
 - 76978-76979 was added to report non-cardiac contrast enhanced ultrasound.
 - 76978 Initial Lesion | 76979 for each additional lesion
 - Description Changes | 77485 removed 'nephrostomy ureters' and added 'ureter(s)' | 77021 – 77022 added 'imaging' guidance | 77387 deleted 'delivery'

RADIOLOGY

IMAGING - REPLACEMENTS



Category	Old CPT	Description	Use this CPT	Description	RVU
MRI	77058 C8904	MRI breast unilateral	77046 77048	Without contrast WOW incl CAD	From MPFS
MRI	77059 C8907	MRI breast bilateral	77047 77049	Without contrast WOW incl CAD	
MRI	0159T	CAD	77048 77049 C8937	See above See above Lesion det/charac, pharmacokinetic analysis	

Prior to July 1st, 2017, hospitals would have carried forward existing RVUs for replacement CPTs. HSCRC would like hospitals to use national fee schedule weights for new CPTs.

****Some of the code changes made have status indicator 'B' – the codes are not recognized by Medicare under OPPS**.**

RADIOLOGY

IMAGING – REPLACEMENTS cont.

Category	Old CPT	Description	Use this CPT	Description	RVU
US	0346T	Elastography	76981 76982 76983	Parenchyma First target lesion Ea Addl Target Lesion	From MPFS
US	C9744	Ultrasound, Abdominal with contrast	76978 76979	Targeted dynamic microbubble sonographic contrast characterization (non-cardiac) – initial and additional lesions	



RADIOLOGY

IMAGING - DELETIONS

Category	CPT	Description	CPT if using...
RAD	76001	Fluoroscopy > 1 hour	76000, watch bundling rules
NUC	78270 78271 78272	Vitamin B-12 studies	78299 (unlisted)
US	0337T	Endothelial Function Assessment	93998 (unlisted)

- No formal replacements because low usage/planned “sunset”.



RADIOLOGY

IMAGING - REVISIONS

Category	CPT	Old Description	Description Updates
RAD	74485	Dilation of nephrostomy, ureters, or urethra, rad s&i	Dilation of <i>ureter(s) or urethra</i>
3D	76376 76377	3d rendering with interpretation and reporting of CT, MRI, US, or other modality	<p><i>Description is same/similar but new restrictions on the base codes where these can be applied</i></p>
US	76937 76942 76998	US guidance for vascular access, needle placement, intraoperative	
RAD	77001 77002	Fluoro guidance for vascular access, needle placement	
CAT	77011 77012	CT guidance for stereotactic localization, needle placement	
MRI	77021	MR guidance for needle placement	

RADIOLOGY

IMAGING - ADDITIONS

Category	CPT	Description	RVU
MRI	76391	Elastography	From MPFS
NUC	0541T	Myocardial imaging by magnetocardiography	
CAT	0523T	Intraprocedural coronary fractional flow reserve (FFR) with 3D functional mapping, derived from coronary angiogram data, possible atherosclerotic stenoses	

New Diagnostic Imaging Technology

Appendix B – Summary of Additions, Deletions and Revisions

RADIOLOGY cont.

Status	CPT	Description
Revised	74485	Dilation of nephrostomy, ureters, <u>ureter(s)</u> or urethra, radiological supervision and interpretation
Deleted	76001	Deleted
New	76391	Magnetic resonance spectroscopy
New	76978	Ultrasound, targeted dynamic microbubble sonographic contrast characterization (non-cardiac); initial lesion
New	76979	..each additional lesion with separate injection (List separately in addition to code for primary procedure)
New	76981	Ultrasound, elastography, parenchyma (e.g., organ)
New	76982	..first target lesion
New	76983	..each additional target lesion (List separately in addition to code for primary procedure)
Revised	77021	Magnetic resonance <i>imaging</i> guidance for needle placement (e.g., for biopsy, needle aspiration, injection, or placement of localization device) radiological supervision and interpretation)
Revised	77022	Magnetic resonance <i>imaging</i> guidance for, and monitoring of, parenchymal tissue ablation
New	77046	Magnetic resonance imaging, breast, without contrast material; unilateral
New	77047	..bilateral
New	77048	Magnetic resonance imaging, breast, without and with contrast material(s), including computer-aided detection (CAD real-time lesion detection, characterization and pharmacokinetic analysis), when performed; unilateral
New	77049	..bilateral
Deleted	77058	Deleted
Deleted	77059	Deleted
Revised	77387	Guidance for localization of targeted volume for delivery of radiation treatment delivery , includes intrafraction tracking, when performed
Deleted	78270	Deleted
Deleted	78271	Deleted
Deleted	78272	Deleted

PATHOLOGY AND LABORATORY

PATHOLOGY AND LABORATORY

- 115 Code Updates: 95 New, 15 Revised, 5 Deleted
- Industry moving towards using laboratory testing and results to develop treatment plans and predictive diagnostics using DNA

LABORATORY

DEFINITIONS AND ACRONYMS

- Molecular Pathology - "Examination of molecules within organs, tissues or bodily fluids" (Wikipedia), commonly used in diagnosis of cancer and infectious diseases.
- Proprietary Laboratory Analysis [PLAs]– CPTs that are released quarterly for specialized laboratory tests – a laboratory applies for these codes and the approval period is much quicker than the "normal" CPT approval process
- Genomic Sequencing Procedures [GSPs]– "the process of determining the complete DNA sequence" (Wikipedia)
- Molecular Multianalyte Assays [MMAAs] and Multianalyte assays with algorithmic analyses [MAAAs]- "Very complex laboratory analyses that are done based on other laboratory analyses" (Lauren Rose)

LABORATORY - REPLACEMENTS

Category	Old CPT	Description	Use this CPT	Description	RVU
MOL PATH- BRCA	81211	1,2 - Seq, common dup/del	81162	Seq, dup/del	By Report
	81213	1,2 - Uncommon dup/del	81163 81164	Seq only Dup/del only	
	81214	1 – Seq, dup/del	81165 81166	Seq Dup/del	

- Organizing BRCA 1, 2 testing in the same range and splitting apart BRCA 1



LABORATORY - REVISIONS

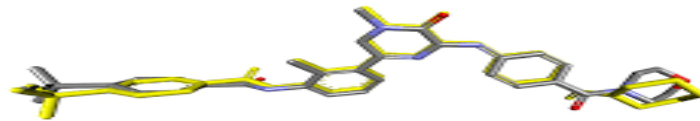
Category	CPT	Old Description	Description Updates
MOL PATH	81162	BRCA 1, 2 - seq and dup/del	"DNA repair associated and detection of large gene rearrangements" added
	81212	185 del AG, 5385 insC	
	81215	BRCA 1 known familial variant	"DNA repair associated" added
	81216	BRCA 2 - full seq	
	81217	Known familial variant	
	81244	FMR1 – characterization	"Promoter" (region of DNA associated with a gene which regulates gene expression) added
	81287	MGMT methylation analysis	
	81327	Septin9	
	81400	Tier 2 - Level 1	<i>Genes are added and genes are removed based on new genes discovered and genes moved to a specific Tier 1 code</i>
	81401	Level 2	
	81403	Level 4	
	81404	Level5	
	81405	Level 6	
	81407	Level 8	

LABORATORY - REVISIONS

Category	CPT	Old Description	Description Updates
PLA	0006U	Prescription drug monitoring, definitive chromatography	The description now references “interacting medications, substances, supplements, and foods”
Screen	G0499	Hep b screening in non-pregnant, high risk individual includes hepatitis b surface antigen (HBSAG) followed by a neutralizing confirmatory test for initially reactive results, and antibodies to HBSAG (anti-HBs) and Hepatitis B core antigen (anti-HBc)	Minor clarifications include that this is <u>only</u> for an initially reactive HBSAG result

MOLECULAR PATHOLOGY - ADDITIONS

Category	CPT	Description	RVU
MOL PATH	81184	CACNA1A – Eval	By Report Base on cost/ relative intensity
	81185	Sequence	
	81186	Known familial variant	
	81187	CNBP (CCHC-type zinc finger nucleic acid binding protein), eval	
	81188	CSTB (Cystatin B) - Eval	
	81189	Sequence	
	81190	Known familial variants	
	81233	Bruton's tyrosine kinase, variants	
81234	DMPK – Eval		
81239	Characterization		



MOLECULAR PATHOLOGY – ADDITIONS cont.

Category	CPT	Description	RVU
MOL PATH	81236	EZH2 – myelodysplastic syndrome, myeloproliferative neoplasms analysis, sequence	By Report Base on cost/ relative intensity
	81237	Large B-cell lymphoma analysis, common variants	
	81271 81274	HTT (Huntington disease) – Eval Characterization	
	81284 81285 81286 81289	FXN (Frataxin) – Eval Characterization Sequence Known familial variants	
	81305	MYD88 (Myeloid differentiation primary response), analysis, variant	

MOLECULAR PATHOLOGY – ADDITIONS cont.

Category	CPT	Description	RVU
MOL PATH	81306	NUDT15 (Nudix hydrolase 15), common variants	By Report Base on cost/ Relative intensity
	81312	Poly[A] binding protein nuclear 1, eval	
	81320	PLCG2 (phospholipase C gamma 2), common variants	
	81329 81336 81337	SMN1 (survival motor neuron 1, telomeric) – Dosage/del analysis Sequence Known familial variants	
	81333	TGFBI (transforming growth factor beta-induced), common variants	

LABORATORY - ADDITIONS

GSPs, MMAAs, MAAAs

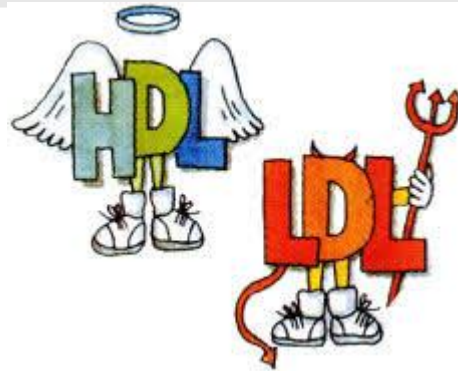
Category	CPT	Description	RVU
GSP/ MMAA	81443	Genetic testing for severe inherited diseases	By Report Base on cost/ relative intensity
MAAA	81518	Oncology (breast), mRNA, gene expression profiling by real-time RT-PCR of 11 genes	
	81596	Infectious disease, chronic hepatitis C (HCV), infection, six biochemical assays	



LABORATORY – ADDITIONS

CHEMISTRY

Category	CPT	Description	RVU
CHEM	82642	Dihydrotestosterone (DHT) – not drug testing	By Report
	83722	Lipoprotein, direct, small dense LDL	Base on relative intensity



LABORATORY - DELETIONS

Category	CPT	Description
MAA	0001M	Infectious Disease, HCV, six biochemical assays (ALT, A2-Macroglobulin, Apolipoprotein A-1, Total Bilirubin, GGT, and Haptoglobin)...
Proprietary	0004U	Infectious disease, bacterial, DNA
	0015U	Drug metabolism, adverse drug reactions

- These may not have usage and/or may not be built in the CDM as codes are typically deleted and not replaced when there is non-usage across the country.



Appendix B – Summary of Additions, Deletions and Revisions

PATHOLOGY AND LABORATORY cont.

Status	CPT	Description
New	81171	AFF2 (AF4/FMR2 family, member 2 [FMR2]) (e.g., fragile X mental retardation 2 [FRAXE]) gene analysis; evaluation to detect abnormal (e.g., expanded) alleles
New	81172	..characterization of alleles (e.g., expanded size and methylation status)
New	81204	AR (androgen receptor) (e.g., spinal and bulbar muscular atrophy, Kennedy disease, X chromosome inactivation) gene analysis; characterization of alleles (e.g., expanded size or methylation status)
New	81173	..full gene sequence
New	81174	..known familial variant
New	81177	ATN1 (atrophin 1) (e.g., dentatorubral-pallidoluysian atrophy) gene analysis, evaluation to detect abnormal (e.g., expanded) alleles
New	81178	ATXN1 (ataxin1) (e.g., spinocerebellar ataxia) gene analysis, evaluation to detect abnormal (e.g., expanded) alleles
New	81179	ATXN2 (ataxin2) (e.g., spinocerebellar ataxia) gene analysis, evaluation to detect abnormal (e.g., expanded) alleles
New	81180	ATXN3 (ataxin3) (e.g., spinocerebellar ataxia, Machado-Joseph disease) gene analysis, evaluation to detect abnormal (e.g., expanded) alleles
New	81181	ATXN7 (ataxin 7) (e.g., spinocerebellar ataxia) gene analysis, evaluation to detect abnormal (e.g., expanded) alleles
New	81182	ATXN8OS (ATXN* opposite strand [non-protein coding]) (e.g., spinocerebellar ataxia) gene analysis, evaluation to detect abnormal (e.g., expanded) alleles
New	81183	ATXN10 (ataxin 10) (e.g., spinocerebellar ataxia) gene analysis, evaluation to detect abnormal (e.g., expanded) alleles
Deleted	81211	Deleted
Revised	81162	<u>BRCA1 (BRCA1, DNA repair associated), BRCA2 (BRCA2, DNA repair associated) breast cancer 1 and 2</u> (e.g., hereditary breast and ovarian cancer) gene analysis; full sequence analysis and full duplication/deletion analysis (<i>i.e., detection of large gene rearrangements</i>)
New	81163	..full sequence analysis
New	81164	..full duplication/deletion analysis (<i>i.e., detection of large gene rearrangements</i>)
Revised	81212	185delAG, 5385insC, 6174delIT variants
Deleted	81213	Deleted
Deleted	81214	Deleted

Appendix B – Summary of Additions, Deletions and Revisions

PATHOLOGY AND LABORATORY cont.

Status	CPT	Description
New	81165	BRCA1 (BRCA1, DNA repair associated) (e.g., hereditary breast and ovarian cancer) gene analysis; full sequence analysis
New	81166	..full duplication/deletion analysis (i.e., detection of large gene rearrangements)
Revised	81215	known familial variant
Revised	81216	BRCA2 (breast cancer 2 <i>BRCA2, DNA repair associated</i>), (e.g., hereditary breast and ovarian cancer) gene analysis; full sequence analysis
New	81167	..full duplication/deletion analysis (i.e., detection of large gene rearrangements)
Revised	81217	known familial variant
New	81233	BTK (Bruton's tyrosine kinase) (e.g., chronic lymphocytic leukemia) gene analysis, common variants (e.g., C481S, C481R, C481F)
New	81184	CACNA1A (calcium voltage-gated channel subunit alpha1A) (e.g., spinocerebellar ataxia) gene analysis; evaluation to detect abnormal (e.g., expanded) alleles
New	81185	..full gene sequence
New	81186	..known familial variant
New	81187	CNBP (CCHC-type zinc finger nucleic acid binding protein) (e.g., myotonic dystrophy type 2) gene analysis, evaluation to detect abnormal (e.g., expanded) alleles
New	81188	CSTB (cystatin B) (e.g., Unverricht-Lundborg disease) gene analysis; evaluation to detect abnormal (e.g., expanded) alleles
New	81189	..full gene sequence
New	81190	..known familial variant
New	81234	DMPK (DM1 protein kinase) (e.g., myotonic dystrophy type 1) gene analysis; evaluation to detect abnormal (expanded) alleles
New	81239	..characterization of alleles (e.g., expanded size)
New	81236	EZH2 (enhancer of zeste 2 polycomb repressive complex 2 subunit) (e.g., myelodysplastic syndrome, myeloproliferative neoplasms) gene analysis, full gene sequence
New	81237	EZH2 (enhancer of zeste 2 polycomb repressive complex 2 subunit) (e.g., diffuse large B-cell lymphoma) gene analysis, common variant(s) (e.g., codon 646)
Revised	81244	..characterization of alleles (e.g., expanded size and promoter methylation status)
New	81284	FXN (frataxin) (e.g., Friedreich ataxia) gene analysis; evaluation to detect abnormal (expanded) alleles

Appendix B – Summary of Additions, Deletions and Revisions

PATHOLOGY AND LABORATORY cont.

Status	CPT	Description
New	81285	..characterization of alleles (e.g., expanded size)
New	81286	..full gene sequence
New	81289	..known familial variant
New	81271	HTT (huntingtin) (e.g., Huntington disease) gene analysis; evaluation to detect abnormal (e.g., expanded) alleles
New	81274	..characterization of alleles (e.g., expanded size)
Revised	81287	MGMT (0-6- methylguanine-DNA methyltransferase) (e.g., glioblastoma multiforme) - <i>promoter</i> methylation analysis
New	81305	MYD88 (myeloid differentiation primary response 88) (e.g., Waldenstrom's macroglobulinemia, lymphoplasmacytic leukemia) gene analysis, p.Leu265Pro (L265P) variant
New	81306	NUDT15 (nudix hydrolase 15) (e.g., drug metabolism) gene analysis, common variant(s) (e.g., *2, *3, *4, *5, *6)
New	81312	PABPN1 (poly[A] binding protein nuclear 1) (e.g., oculopharyngeal muscular dystrophy) gene analysis, evaluation to detect abnormal (e.g., expanded) alleles
New	81320	PLCG2 (phospholipase C gamma 2) (e.g., chronic lymphocytic leukemia) gene analysis, common variants (e.g., R665W, S707F, L845F)
New	81343	PPP2R2B (protein phosphatase 2 regulatory subunit Bbeta) (e.g., spinocerebellar ataxia) gene analysis, evaluation to detect abnormal (e.g., expanded) alleles
Revised	81327	SEPT9 (Septin9) (e.g., colorectal cancer) <i>promoter</i> methylation analysis
New	81329	SMN1 (survival of motor neuron1, telomeric) (e.g., spinal muscular atrophy) gene analysis; dosage/deletion analysis (e.g., carrier testing), includes SMN2 (survival of motor neuron 2, centromeric) analysis, if performed
New	81336	..full gene sequence
New	81337	..known familial sequence variant(s)
New	81344	TBP (TATA box binding protein) (e.g., spinocerebellar ataxia) gene analysis, evaluation to detect abnormal (e.g., expanded) alleles
New	81345	TERT (telomerase reverse transcriptase) (e.g., thyroid carcinoma, glioblastoma multiforme) gene analysis, targeted sequence analysis (e.g., promoter region)
New	81333	TGFBI (transforming growth factor beta-induced) (e.g., corneal dystrophy) gene analysis, common variants (e.g., R124H, R124C, R124L, R555W, R555AQ)
Revised	81400	Molecular pathology procedure, Level 1 (e.g., identification of single germline variant (e.g., SNP) by techniques such as restriction enzyme digestion or melt cure analysis) SMN1 (survival of motor neuron1, telomeric) (e.g., spinal muscular atrophy), exon 7 deletion
Revised	81401	Molecular pathology procedure, Level 2 (e.g., 2-10 SNPs, 1 methylated variant, or 1 somatic variant [typically using nonsequencing target variant analysis], or detection of a dynamic mutation disorder/triplet repeat) (<i>See multiple deleted information from this code in CPT 2019, Appendix B, page 800</i>)

Appendix B – Summary of Additions, Deletions and Revisions

PATHOLOGY AND LABORATORY cont.

Status	CPT	Description
Revised	81403	Molecular pathology procedure, Level 4 (e.g., analysis of single exon by DNA sequence analysis, analysis of > 10 amplicons using multiplex PCR in 2 or more independent reactions, mutation scanning or duplication/deletion variants of 2-5 exons) SMN1 (survival of motor neuron1, telomeric) (e.g., spinal muscular atrophy), known familial sequence variant(s).
Revised	81404	Molecular pathology procedure, Level 5 (e.g., analysis of 2-5 exons by DNA sequence analysis, mutation scanning or duplication/deletion variants of 6-10 exons, or characterization of a dynamic mutation disorder/triplet repeat by Southern blot analysis) (See multiple deleted information from this code in CPT 2019, Appendix B, page 801)
Revised	81405	Molecular pathology procedure, Level 6 (e.g., analysis of 6-10 exons by DNA sequence analysis, mutation scanning or duplication/deletion variants of 11-25 exons, regionally targeted cytogenomic array analysis) (See multiple deleted information from this code in CPT 2019, Appendix B, page 801)
Revised	81407	Molecular pathology procedure, Level 8 (e.g., analysis of 26-50 exons by DNA sequence analysis, mutation scanning or duplication/deletion variants of >50 exons, sequence analysis of multiple genes on one platform) CACNA1A (calcium channel, voltage dependent, P/Q type, alpha 1A subunit) (e.g., familial hemiplegic migraine), full gene sequence)
New	81443	Genetic testing for severe inherited conditions (e.g., cystic fibrosis, Ashkenazi Jewish-associated disorders [e.g., Bloom syndrome, Canavan disease, Fanconi anemia type C, mucopolidosis type VI, Gaucher disease, Tay-Sachs disease], beta hemoglobinopathies, phenylketonuria, galactosemia), genomic sequence analysis panel, must include sequencing of at least 15 genes (e.g., AADM, ARSA, ASPA, ATP7B, BCKDHA, BCKDHB, BLM, CFTR, DHCR7, FANCC, G6PC, GAA, GALT, GBA, GBE1, HBB, HEXA, IKBKAP, MCOLN1, PAH)
New	81518	Oncology (breast), mRNA, gene expression profiling by real-time RT-PCR of 11 genes (7 content and 4 housekeeping), utilizing formalin-fixed paraffin-embedded tissue, algorithms reported as percentage risk for metastatic recurrence and likelihood of benefit from extended endocrine therapy
New	81596	Infectious disease, chronic hepatitis C virus (HCV) infection, six biochemical assays (ALT, A2-macroglobulin, apolipoprotein A-1, total bilirubin, GGT, and haptoglobin) utilizing serum, prognostic algorithm reported as scores for fibrosis and necroinflammatory activity in liver
New	82642	Dihydrotestosterone (DHT)
New	83722	small dense LDL cholesterol
Proprietary Laboratory Analyses (PLA) Codes are a new addition to the CPT® code set approved by the AMA CPT® Editorial		
New PLA Codes	0018U - 0061U	
Deleted PLA Codes	0004U and 0015U	Deleted
Revised PLA Codes	0006U	

MEDICINE

MEDICINE

- Medicine Updates
 - 59 Code Updates: 29 New, 17 Revised and 13 Deleted
- High-level Explanation of code changes
 - Changes made to better explain the intent of the codes
 - Codes were deleted to accommodate new codes

MEDICINE

CENTRAL NERVOUS SYSTEM ASSESSMENTS/TESTS

Category	Old CPT	Description	Use this CPT	Description	RVU
Dev Testing	96111	Developmental Testing	96112 96113	First hour Ea addl 30 min	Base on old RVU

- HSCRC Purposes – PT/OT Rate Center
- Used for evaluation, test administration/scoring and interpretation and Report or Automated Result



MEDICINE

REHAB – OTHER NOTES

- Functional Mobility G-codes and Modifiers
 - These are still active while systems are updated, but are no longer required
 - These were the non-payable G-codes you're use to seeing on the outpatient claims. G8978-G8999 and G9158 – G9186
- Upcoming modifiers
 - There will soon be modifiers required for assistants vs. therapists (CO = OT Assistant, CQ = PT Assistant).
 - These codes are to be used when services are provided in whole or in part by a PT Assistant (PTA) or OT Assistant (OTA). In part is defined as greater than 10% of service provided by the PTA or OTA.



MEDICINE

RESPIRATORY - REVISIONS

Category	CPT	Old Description	Description Updates
Car Seat/Bed Testing	94780 94781	For airway integrity, neonate, with continual nursing observation and continuous recording of pulse ox, heart rate and respiratory rate 60 min Ea addl 30 min	Infants through 12 months of age With continual clinical staff observations

- Places focus on the reason **gestational and respiratory maturity** versus chronological age
- **Clinical staff** better represents all nonphysician practitioners who may perform the service, including respiratory therapists



MEDICINE

OPHTHALMOLOGY - REPLACEMENTS

Category	Old CPT	Description	Use this CPT	Description	RVU
Ophth	92275	Electroretinography	92273 92274 0509T	Full field (ffERG) Multifocal (mfERG) Pattern (PERG)	By Report based on CCT



MEDICINE

OPHTHALMOLOGY – ADDITIONS

Category	CPT	Description	RVU
Ophth	0507T	Near infrared dual imaging (i.e. simultaneous reflective and transilluminated light) of meibomian glands, unilateral or bilateral, with interpretation and report	By Report Base on CCT



MEDICINE

PSYCHIATRY - REPLACEMENTS

Category	Old CPT	Description	Use this CPT	Description	RVU	
Psych	96101	Psych Testing	96130	Testing 1 st Hr	By Report Based on CCT	
	96102		96131	Ea Addl Hour		
	96103		96136	Scoring 1 st 30m		
			96137	Ea addl 30 min		
			96138	Scoring by tech 1 st 30m		
			96139	Ea addl 30 min		
			96146	Auto Result		
		96118	NeuroPsych Testing	96132		Testing 1 st Hr
		96119		96133		Ea Addl Hour
		96120		96136		Scoring 1 st 30m
				96137		Ea addl 30 min
				96138		Scoring by tech 1 st 30m
				96139		Ea addl 30 min
				96146		Auto Result

MEDICINE

PSYCHIATRY – REPLACEMENTS, cont.

Category	Old CPT	Description	Use this CPT	Description	RVU
Psych	0359T	Behavioral Assessments	97151	Identification, ea 15m ID Supporting, ea 15m	By Report Based on CCT
	0360T		97152		
	0361T				
	0363T	Exposure and Adaptive Behavioral Assessments and Treatments	97153	Ea 15min: 1:1 by protocol Group 1:1 w protocol mod dir of tech Family Multiple Family Group w protocol mod <i>Note: Watch rules</i>	
	0364T		97154		
	0365T		97155		
	0366T		97156		
	0367T				
	0368T		97157		
	0369T		97158		
0370T					
0371T					
0372T					

MEDICINE

PSYCHIATRY - REVISIONS

Category	CPT	Old Description	Description Updates
Psych	90785	Interactive complexity	<i>No description updates but additional coding rules added</i>
	90791	Diagnostic evaluation	
	90792	Diagnostic evaluation w	
	90846	Med	
	90847	Family wo patient	
	90853	Family w patient	
	90887	Interp/Explanation	
	0362T	Exposure Behavioral Follow-Up Assessment, Face-to-Face, 1 st 30 minutes	Revised to be “behavior identification supporting assessment, each 15 minutes” (CPT 0363T for additional time has been deleted, no longer needed)
	0373T	Exposure Adaptive Behavior Treatment with Protocol Mod, Face-to-Face, 1 st 60 minutes	Revised to be “Adaptive behavior treatment, each 15 minutes” (CPT 0374T for additional time has been deleted, no longer needed)

MEDICINE

PSYCHIATRY – REVISIONS cont.

Category	CPT	Old Description	Description Updates
Psych	96116	Neurobehavioral Status Exam	Revised to include “first hour” (there is a new CPT 96121 for each additional hour)



MEDICINE

PSYCHIATRY - ADDITIONS

Category	CPT	Description	RVU
Substance Abuse	G2011	Alcohol and/or substance (other than tobacco) abuse structured assessment (e.g., audit, dast), and brief intervention, 5-14 minutes	By Report Based on CCT



MEDICINE

EEG - REPLACEMENTS

Category	Old CPT	Description	Use this CPT	Description	RVU
Neuro stimulators	95974 95975	Generator/transmitter programming – complex cranial nerve – 1 st hour Addl 30 minutes	95976 95977	Simple cranial nerve Complex cranial nerve	Base on MPFS
		Electronic analysis – deep brain, 1 st hour Addl 30 minutes	95983 95984	Brain first 15 minutes Each additional 15 minutes	



MEDICINE

EEG - REVISIONS

Category	CPT	Old Description	Description Updates
Intraop Monitoring	95940 95941	Continuous intraoperative neurophysiology monitoring	Description is same but there is a coding update to make sure individuals do not confuse this with intraoperative neurostimulator programming
Neuro stimulators	95970 95971 95972	Electronic analysis pulse generator	Clarified that this can be a generator or transmitter and updated the components/parameters. Anatomy references have been updated. Significant coding rules added.
Functional Brain Mapping	96020	Neurofunctional testing selection and administration	Description is same but there is coding update to ensure this is not reported with other behavioral testing and exams

MEDICINE

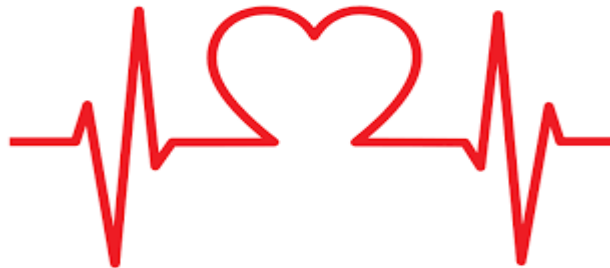
EEG - ADDITIONS

Category	CPT	Description	RVU
Electro-cortico-graphy	95836	Electrocorticogram from an implanted brain neurostimulator pulse generator/transmitter, including recording, with interpretation and written report, up to 30 days	Base on MPFS

MEDICINE

EKG - ADDITIONS

Category	CPT	Description	RVU
Device Eval	93264	Remote monitoring, pulmonary artery pressure sensor	By Report
Electro-cortico-graphy	95836	Electrocorticogram from an implanted brain neurostimulator pulse generator/transmitter, including recording, with interpretation and written report, up to 30 days	Based on minutes



MEDICINE

EKG - REVISIONS

Category	CPT	Old Description	Description Updates
Device Eval	93279 93286 93288 93294 93296	Programming and interrogation device evaluations	Adding “pacemaker leadless systems” to the descriptions
	93285 93291 93298	Interrogation device evaluations - implantable loop recorder system	Clarified this is a “subcutaneous cardiac rhythm monitor system”
	93290 93297	Interrogation device evaluations - implantable cardiovascular monitor system	Clarified this is an “implantable cardiovascular physiologic monitor system”
	93299	Interrogation device receipt/review – for above systems	Clarified this is a “implantable cardiovascular physiologic system” or “subcutaneous cardiac rhythm monitor system”

Appendix B – Summary of Additions, Deletions and Revisions

MEDICINE

Status	CPT	Description
New	90689	Influenza virus vaccine, quadrivalent (IIV4), inactivated, adjuvanted, preservative free, 0.25 mL dosage, for intramuscular use
New	92273	Electroretinography (ERG), with interpretation and report; full field (i.e., ffERG, flash ERG, Ganzfield ERG)
New	92274	..multifocal (mfERG)
Deleted	92275	Deleted
New	93264	Remote monitoring of a wireless pulmonary artery pressure sensor for up to 30 days, including at least weekly downloads of pulmonary artery pressure recordings, interpretation(s), trend analysis, and report(s) by a physician or other qualified health care professional
Revised	93279	Programming device evaluation (in person) with iterative adjustment of the implantable device to test the function of the device and select optimal permanent programmed values with analysis, review and report by a physician or other qualified health care professional; <u>single lead pacemaker system or leadless pacemaker system in one cardiac chamber</u>
Revised	93285	implantable loop recorder system- <u>subcutaneous cardiac rhythm monitor system</u>
Revised	93286	Peri-procedural device evaluation (in person) and programming of device system parameters before or after a surgery, procedure, or test with analysis, review and report by a physician or other qualified health care professional; single, dual, or multiple lead <u>pacemaker system, or leadless pacemaker system</u>
Revised	93288	Interrogation device evaluation (in person) with analysis, review and report by a physician or other qualified health care professional, includes connection, recording and disconnection per patient encounter; single, dual, or multiple lead <u>pacemaker system, or leadless pacemaker system</u>
Revised	93290	implantable cardiovascular <u>physiologic</u> monitor system, including analysis of 1 or more recorded <u>physiologic cardiovascular data elements from all internal and external sensors</u>
Revised	93291	implantable loop recorder system- <u>subcutaneous cardiac rhythm monitor system</u> including heart rhythm derived data analysis
Revised	93294	Interrogation device evaluation(s) (remote), up to 90 days; single, dual, or multiple lead <u>pacemaker system, or leadless pacemaker system</u> with interim analysis, review(s) by a physician or other qualified health care professional
Revised	93296	single, dual, or multiple lead <u>pacemaker system, leadless pacemaker system</u> or implantable defibrillator system, remote data acquisitions, receipt of transmissions and technician review, technical support and distribution of results

Appendix B – Summary of Additions, Deletions and Revisions

MEDICINE cont.

Status	CPT	Description
Revised	93297	Interrogation device evaluation(s), (remote) up to 30 days; implantable cardiovascular <u>physiologic</u> monitor system, including analysis of 1 or more recorded physiologic cardiovascular data elements from all internal and external sensors, analysis, review(s) and report(s) by a physician or other qualified health care professional
Revised	93298	implantable loop recorder system <u>subcutaneous cardiac rhythm monitor system</u> , including analysis of recorded heart rhythm data, analysis, review(s) and report(s) by a physician or other qualified health care professional
Revised	93299	implantable cardiovascular physiologic monitor system or implantable loop recorder system <u>subcutaneous cardiac rhythm monitor system</u> remote data acquisition(s), receipt of transmissions and technician review, technical support and distribution of results
Revised	94780	Car seat/bed testing for airway integrity, neonate <u>for infants through 12 months of age</u> , with continual nursing <u>clinical staff</u> observation and continuous recording of pulse oximetry, heart rate and respiratory rate, with interpretation and report; 60 minutes
Revised	94781	..each additional full 30 minutes (List separately in addition to code for primary procedure)
New	95836	Electrocorticogram from an implanted brain neurostimulator pulse generator/transmitter, including recording, with interpretation and written report, up to 30 days
Revised	95970	Electronic analysis of implanted neurostimulator pulse generator- system / <u>transmitter</u> (e.g., rate- <u>contact group(s)</u> , pulse <u>interleaving</u> , amplitude, pulse duration <u>width, frequency [Hz]</u> , configuration of wave form <u>on/off cycling, burst, magnet mode</u> , battery status <u>dose lockout</u> , electrode selectability <u>patient selectable parameters</u> , output modulation <u>responsive neurostimulation</u> , eyelid <u>detection algorithms</u> , impedance <u>closed loop parameters</u> , and patient-compliance measurements) <u>passive parameters</u>) by physician or other qualified health care professional; simple or complex brain <u>with brain, cranial nerve</u> , spinal cord, or peripheral (i.e., cranial nerve, peripheral nerve, or sacral nerve, neuromuscular) neurostimulator pulse generator/transmitter, without reprogramming programming.
Revised	95971	<u>with</u> simple spinal cord, or peripheral (i.e., peripheral nerve (e.g., sacral nerve, neuromuscular) neurostimulator pulse generator/transmitter, with intraoperative <u>programming by physician</u> or subsequent programming <u>other qualified health care professional</u>
Revised	95972	<u>with</u> complex spinal cord, or peripheral (i.e., peripheral nerve, sacral nerve, neuromuscular) (except cranial e.g., <u>sacral</u> nerve) neurostimulator pulse generator/transmitter, with intraoperative <u>programming by physician</u> or subsequent programming <u>other qualified health care professional</u>

Appendix B – Summary of Additions, Deletions and Revisions

MEDICINE cont.

Deleted	95974	Deleted
Deleted	95975	Deleted
New	95976	..with simple cranial nerve neurostimulator pulse generator/transmitter programming by physician or other qualified health care professional
New	95977	..with complex cranial nerve neurostimulator pulse generator/transmitter programming by physician or other qualified health care professional
New	95983	..with brain neurostimulator pulse generator/transmitter programming, first 15 minutes face-to-face time with physician or other qualified health care professional
New	95984	..with brain neurostimulator pulse generator/transmitter programming, each additional 15 minutes face-to-face time with physician or other qualified health care professional (List separately in addition to code for primary procedure)
Deleted	95978	Deleted
Deleted	95979	Deleted
New	97151	Behavior identification assessment, admin by a physician or other qualified health care professional, each 15 minutes of the physician's or other qualified health care professional's time face-to-face with patient and/or guardian(s)/caregiver(s) administering assessments and discussing findings and recommendations, and non-face-to-face analyzing past data, scoring/interpreting the assessment, and preparing the report/treatment plan
New	97152	Behavior identification-supporting assessment, administered by one technician under the direction of a physician or other qualified health care professional, face-to-face with the patient, each 15 minutes
New	97153	Adaptive behavior treatment by protocol, administered by technician under the direction of a physician or other qualified health care professional, face-to-face with one patient, each 15 minutes
New	97154	Group adaptive behavior treatment by protocol, administered by technician under the direction of a physician or other qualified health care professional, face-to-face with two or more patients, each 15 minutes
New	97155	Adaptive behavior treatment with protocol modification, administered by physician or other qualified health care professional, which may include simultaneous direction of technician, face-to-face with one patient, each 15 minutes

Appendix B – Summary of Additions, Deletions and Revisions MEDICINE cont.

Status	CPT	Description
New	97156	Family adaptive behavior treatment guidance, administered by physician or other qualified health care professional (with or without the patient present), face-to-face with guardian(s)/caregiver(s), each 15 minutes
New	97157	Multiple-family group adaptive behavior treatment guidance, administered by physician or other qualified health care professional (without the patient present, face-to-face with multiple sets of guardians/caregivers, each 15 minutes
New	97158	Group adaptive behavior treatment with protocol modification, administered by physician or other qualified health care professional, face-to-face with multiple patients, each 15 minutes
Deleted	96101	Deleted
Deleted	96102	Deleted
Deleted	96103	Deleted
Deleted	96111	Deleted
New	96112	Developmental test administration (including assessment of fine and/or gross motor. Language, cognitive level, social, memory and/or executive functions by standardized developmental instruments when performed), by physician or other qualified health care professional, with interpretation and report, first hour
New	96113	..each additional 30 minutes (List separately in addition to code for primary procedure)
Revised	96116	Neurobehavioral status exam (clinical assessment of thinking, reasoning and judgement, [e.g., acquired knowledge, attention, language, memory, planning and problem solving, and visual spatial abilities]), per hour of the psychologist's or physician's time <i>by physician or other qualified health care professional</i> , both face-to-face time with the patient and time interpreting test results and preparing the report; <i>first hour</i>
Deleted	96118	Deleted
Deleted	96119	Deleted
Deleted	96120	Deleted

Appendix B – Summary of Additions, Deletions and Revisions

MEDICINE cont.

Medicine		
New	96121	..each additional hour (List separately in addition to code for primary procedure)
New	96130	Psychological testing evaluation services by physician or other qualified health care professional, including integration of patient data, interpretation of standardized test results and clinical data, clinical decision making, treatment planning and report, and interactive feedback to the patient, family member(s) or caregiver(s), when performed; first hour
New	96131	..each additional hour (List separately in addition to code for primary procedure)
New	96132	Neuropsychological testing evaluation services by physician or other qualified health care professional, including integration of patient data, interpretation of standardized test results and clinical data, clinical decision making, treatment planning and report, and interactive feedback to the patient, family member(s) or caregiver(s), when performed; first hour
New	96133	..each additional hour (List separately in addition to code for primary procedure)
New	96136	Psychological or neuropsychological test administration and scoring by physician or other qualified health care professional, two or more tests, any method; first 30 minutes
New	96137	..each additional 30 minutes (List separately in addition to code for primary procedure)
New	96138	Psychological or neuropsychological test administration and scoring by technician, two or more tests, any method; first 30 minutes
New	96139	..each additional 30 minutes (List separately in addition to code for primary procedure)
New	96146	Psychological or neuropsychological test administration, with single automated, standardized instrument via electronic platform, with automated result only
Deleted	99090	Deleted

CATEGORY III CODES

CATEGORY III CODES

- Category III Codes are a temporary codes that allow data collection for emerging technologies, services, procedures and service paradigms
- If a Category III code is available, this code must be reported instead of a Category I unlisted code.
- 70 Code Updates: 38 New, 3 Revised, 29 Deleted
- Code Updates for the following:
 - MRI Breast, Sinus Tarsi implant, CAR-T Therapy, Myocardial imaging by magnetocardiography (MCG), Extracorporeal shockwave, Ultrasound elastography, Intracardiac ischemia monitoring services, Noninvasive movement-recording device, Pattern electroretinography (PERG), Pacemaker-leadless and Pocketless System, Adaptive Behavior Assessments and Treatments, Wireless Cardiac Stimulation System for Left Ventricular Pacing

CATEGORY III CODES

WOUND CARE – ADDITIONS

Category	CPT	Description	RVU
Wound Care	0512T 0513T	Extracorporeal shock wave, initial Each additional wound	By Report Base on CCT



CATEGORY III CODES

EKG- DELETIONS

Category	CPT	Description
Device Eval	0389T 0390T 0391T	Leadless pacemaker systems are now reportable under the updated device evaluation codes



CATEGORY III CODES

EKG – ADDITIONS

Category	CPT	Description	RVU
Device Evaluation	0521T	In person for wireless cardiac stimulator for left ventricular pacing	By Report
	0522T	Interrogation Programming	
	0528T	In person for intracardiac ischemia monitoring system	Based on minutes
	0529T	Interrogation Programming	



CATEGORY III CODES

EEG – ADDITIONS

Category	CPT	Description	RVU
Cont Recording		Cont recording movement disorder symptoms, including bradykinesia, dyskinesia, and tremor for 6 days up to 10 days	Base on MPFS
	0533T	All	
	0534T	Set-up, patient tx, monitor config	
	0535T	Data upload, analys, report config	
	0536T	Download review, interp/report	

CATEGORY III CODES

CAR-T ADDITIONS

Category	CPT	Description	RVU
CAR-T	0537T	Harvesting of blood-derived T lymphocytes for development of genetically modified autologous CAR-T cells, per day	By Report – LAB and CL – see Pharmacy
	0538T	Prep for transportation (cryopreservation, storage)	
	0539T	Receipt and prep for administration	
	0540T	Administration, autologous	



Appendix B – Summary of Additions, Deletions and Revisions

CATEGORY III CODES

Status	CPT	Description
New	0512T	Extracorporeal shock wave for integumentary wound healing, high energy, including topical application and dressing care; initial wound
New	0513T	..each additional wound (List separately in addition to code for primary procedure)
Deleted	0159T	Deleted
Deleted	0188T	Deleted
Deleted	0189T	Deleted
Deleted	0190T	Deleted
Deleted	0195T	Deleted
Deleted	0196T	Deleted
Revised	0335T	Insertion of sinus tarsi implant Extra osseous subtalar joint implant for talotarsal stabilization
New	0510T	Removal of sinus tarsi implant
New	0511T	Removal and reinsertion of sinus tarsi implant
Deleted	0337T	Deleted
Deleted	0346T	Deleted
Deleted	0359T	Deleted
Deleted	0360T	Deleted
Deleted	0361T	Deleted
Revised	0362T	<p>Exposure behavioral follow-up <u>Behavior identification supporting</u> assessment, includes physician or other qualified health care professional direction with interpretation and report, administered by physician or other qualified health care professional with the assistance of one or more technicians <u>each 15 minutes of technicians' time face-to-face with a patient, requiring the following components:</u></p> <ul style="list-style-type: none"> <u>-administration by the physician or other qualified health care professional who is on site;</u> <u>- with the assistance of two or more technicians;</u> <u>- for a patient who exhibits destructive behavior;</u> <u>- completion in an environment that is customized to the patient's behavior</u> <p>first 30 minutes of technician(s) time, face-to-face with the patient.</p>

Appendix B – Summary of Additions, Deletions and Revisions

CATEGORY III CODES cont.

Status	CPT	Description
Deleted	0363T	Deleted
Deleted	0364T	Deleted
Deleted	0365T	Deleted
Deleted	0366T	Deleted
Deleted	0367T	Deleted
Deleted	0368T	Deleted
Deleted	0369T	Deleted
Deleted	0370T	Deleted
Deleted	0371T	Deleted
Deleted	0372T	Deleted
Revised	0373T	<p>Exposure adaptive behavior treatment with protocol modification <u>Adaptive behavior treatment with protocol modification,</u> each 15 minutes of technicians' face-to-face with a patient requiring two or more technicians for severe maladaptive behavior(s) <u>the following components:</u></p> <ul style="list-style-type: none"> - <u>administration by the physician or other qualified health care professional who is on site;</u> - <u>with the assistance of two or more technicians;</u> - <u>for a patient who exhibits destructive behavior;</u> - <u>completion in an environment that is customized to the patient's behavior,</u> <p>first 60 minutes of technicians' time, face-to-face with patient</p>
Deleted	0374T	Deleted
Deleted	0387T	Deleted
Deleted	0388T	Deleted
Deleted	0389T	Deleted
Deleted	0390T	Deleted

Appendix B – Summary of Additions, Deletions and Revisions

CATEGORY III CODES cont.

Status	CPT	Description
Deleted	0391T	Deleted
Deleted	0406T	Deleted
Deleted	0407T	Deleted
New	0523T	Intraprocedural coronary fractional flow reserve (FFR) with 3D functional mapping of color-coded FFR values for the coronary tree, derived from coronary angiogram data, for real-time review and interpretation of possible atherosclerotic stenosis(es) intervention (List separately in addition to code for primary procedure)
New	0505T	Endovenous femoral-popliteal arterial revascularization, with transcatheter placement of intravascular stent graft(s) and closure by any method, including percutaneous or open vascular access, ultrasound guidance for vascular access when performed, all catheterization(s) and intraprocedural road mapping and imaging guidance necessary to complete the intervention, all associated radiological supervision and interpretation, when performed, with crossing of the occlusive lesion in an extraluminal fashion
New	0506T	Macular pigment optical density measurement by heterochromatic flicker photometry, unilateral or bilateral, with interpretation and report
New	0507T	Near infrared dual imaging (i.e., simultaneous reflective and transilluminated light) of meibomian glands, unilateral or bilateral, with interpretation and report
New	0508T	Pulse-echo ultrasound bone density measurement resulting in indicator of axial bone mineral density, tibia
New	0509T	Electroretinography (ERG) with interpretation and report, pattern (PERG)
New	0514T	Intraoperative visual axis identification using patient fixation (List separately in addition to code for primary procedure)
New	0515T	Insertion of wireless cardiac stimulator for left ventricular pacing, including device interrogation and programming, and imaging supervision and interpretation, when performed; complete system (includes electrode and generator [transmitter and battery])
New	0516T	..electrode only
New	0517T	..pulse generator component(s) (battery and/or transmitter) only
New	0518T	Removal of only pulse generator component(s) (battery and/or transmitter) of wireless cardiac stimulator for left ventricular pacing
New	0519T	Removal and replacement of wireless cardiac stimulator for left ventricular pacing; pulse generator component(s) (battery and/or transmitter)
New	0520T	..pulse generator component(s) (battery and/or transmitter), including placement of a new electrode

Appendix B – Summary of Additions, Deletions and Revisions

CATEGORY III CODES cont.

Status	CPT	Description
New	0521T	Interrogation device evaluation (in person) with analysis, review and report, includes connection, recording, and disconnection per patient encounter, wireless cardiac stimulator for left ventricular pacing
New	0522T	Programming device evaluation (in person) with iterative adjustment of the implantable device to test the function of the device and select optimal permanent programmed values with analysis, including review and report, wireless cardiac stimulator for left ventricular pacing
New	0524T	Endovenous catheter directed chemical ablation with balloon isolation of incompetent extremity vein, open or percutaneous, including all vascular access, catheter manipulation, diagnostic imaging, imaging guidance and monitoring
New	0525T	Insertion or replacement of intracardiac ischemia monitoring system, including testing of the lead and monitor, initial system programming, and imaging supervision and interpretation; complete system (electrode and implantable monitor)
New	0526T	..electrode only
New	0527T	..implantable monitor only
New	0528T	Programming device evaluation (in person) of intracardiac ischemia monitoring system with iterative adjustment of programmed values, with analysis, review, and report
New	0529T	Interrogation device evaluation (in person) of intracardiac ischemia monitoring system with analysis, review, and report
New	0530T	Removal of intracardiac ischemia monitoring system, including all imaging supervision and interpretation; complete system (electrode and implantable monitor)

Appendix B – Summary of Additions, Deletions and Revisions CATEGORY III CODES cont.

Status	CPT	Description
New	0531T	..electrode only
New	0532T	..implantable monitor only
New	0533T	Continuous recording of movement disorder symptoms, including bradykinesia, dyskinesia, and tremor for 6 days up to 10 days; includes set-up, patient training, configuration of monitor, data upload, analysis and initial report configuration, download review, interpretation and report
New	0534T	..set-up, patient training, configuration of monitor
New	0535T	..data upload, analysis and initial report configuration
New	0536T	..download review, interpretation and report
New	0537T	Chimeric antigen receptor T-cell (CAR-T) therapy; harvesting of blood-derived T lymphocytes for development of genetically modified autologous CAR-T cells, per day
New	0538T	..preparation of blood-derived T lymphocytes for transportation (e.g., cryopreservation, storage)
New	0539T	..receipt and preparation of CAR-T cells for administration
New	0540T	..CAR-T cell administration, autologous
New	0541T	Myocardial imaging by magnetocardiography (MCG) for detection of cardiac ischemia, by signal acquisition using minimum 36 channel grid, generation of magnetic-field time-series images, quantitative analysis of magnetic dipoles, machine learning-derived clinical scoring, and automated report generation, single study;
New	0542T	..interpretation and report

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SUPPLEMENTAL INFORMATION

DRUGS AND SUPPLIES UPDATES

PHARMACY - REPLACEMENTS

Category	Old CPT	Description	Use this CPT	Description
Injection	C9014	Injection, cerliponase alfa, 1 mg	J0567	Same
	C9015	Injection, c-1 esterase inhibitor (human), haegarda, 10 units	J0599	Same
	C9016	Injection, triptorelin extended release, 3.75 mg	J3316	Same
	C9024	Injection, liposomal, 1 mg daunorubicin and 2.27 mg cytarabine	J9153	Same
	C9028	Injection, inotuzumab ozogamicin, 0.1 mg	J9229	Same
	C9029	Injection, guselkumab, 1 mg	J1628	Same

PHARMACY – REPLACEMENTS cont.

Category	Old CPT	Description	Use this CPT	Description
Injection	C9030	Injection, copanlisib, 1 mg	J9057	Same
	C9031	Lutetium lu 177, dotatate, therapeutic, 1 mci	A9513	Same
	C9032	Injection, voretigene neparvovec-rzyl, 1 billion vector genome	J3398	Same
	C9033	Injection, fosnetupitant 235 mg and palonosetron 0.25 mg	J1454	Same
	C9275	Injection, hexaminolevulinate hydrochloride, 100 mg, per study dose	A9589	Instillation, hexaminolevulinate hydrochloride, 100 mg

PHARMACY – REPLACEMENTS cont.

Category	Old CPT	Description	Use this CPT	Description
Injection	C9463	Injection, aprepitant, 1 mg	J0185	Same
	C9464	Injection, rolapitant, 0.5 mg	J2797	Same
	C9465	Hyaluronan or derivative, durolane, for intra-articular injection, per dose	J7318	Changed to per 1mg
	C9466	Injection, benralizumab, 1 mg	J0517	Same
	C9467	Injection, rituximab and hyaluronidase, 10 mg	J9311	Injection, rituximab 10 mg and hyaluronidase

PHARMACY – REPLACEMENTS cont.

Category	Old CPT	Description	Use this CPT	Description
Injection	C9468	Injection, factor ix (antihemophilic factor, recombinant), glycopegylated, rebinyn, 1 i.u.	J7203	Same
	C9469 Q9993	Injection, triamcinolone acetonide, preservative-free, extended-release, microsphere formulation, 1 mg	J3304	Same
	C9492	Injection, durvalumab, 10 mg	J9173	Same
	C9493	Injection, edaravone, 1 mg	J1301	Same

PHARMACY – REPLACEMENTS cont.

Category	Old CPT	Description	Use this CPT	Description
Injection	C9497	Loxapine, inhalation powder, 10 mg	J2062	Per 1 mg
	J0833	Injection, cosyntropin, not otherwise specified, 0.25 mg	J0834	This code was revised to remove brand name
	J9310	Injection, rituximab, 100 mg	J9312	Per 10 mg
	Q2040	Tisagenlecleucel, up to 250 million car-positive viable t cells, including leukapheresis and dose preparation procedures, per infusion	Q2042	Tisagenlecleucel, up to 600 million car-positive viable t cells, including leukapheresis and dose preparation procedures, per therapeutic dose <i>Note: Q2041 CAR-T is also per therapeutic dose now</i>

PHARMACY – REPLACEMENTS cont.

Category	Old CPT	Description	Use this CPT	Description
Injection	Q5102	Injection, infliximab, biosimilar, 10 mg	Q5103 Q5104 Q5109	dyyb, Inflectra abda, Renflexis qbtx, Ixifi
	Q9995	Injection, emicizumab-kxwh, 0.5 mg	J7170	Same

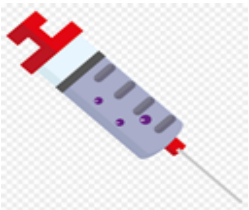


PHARMACY – DELETIONS

Category	CPT	Description
Cartridge	Q9994	In-line cartridge containing digestive enzyme(s) for enteral feeding, each

- This may not have usage and/or may not be built in the CDM as codes are typically deleted and not replaced when there is non-usage across the country.





PHARMACY – ADDITIONS

Category	HCPCS	Description
Vaccine	90689	Influenza virus, vaccine, quadrivalent (IIV4)
Injection	C9034	Injection, dexamethasone 9%, intraocular, 1 mcg
	C9035	Injection, aripiprazole lauroxil (aristada initio), 1 mg
	C9036	Injection, patisiran, 0.1 mg
	C9037	Injection, risperidone (perseris), 0.5 mg
	C9038	Injection, mogamulizumab-kpkc, 1 mg
	C9039	Injection, plazomicin, 5 mg
	Radiopharm	C9407
C9408		Iodine i-131 iobenguane, therapeutic, 1 millicurie
Injection	C9462	Iodine i-131 iobenguane, diagnostic, 1 millicurie
	J0584	Injection, burosumab-twza 1 mg
	J0841	Injection, crotalidae immune f(ab') ₂ (equine), 120 mg
	J1746	Injection, ibalizumab-uiyk, 10 mg
	J3245	Injection, tildrakizumab, 1 mg
	J3397	Injection, vestronidase alfa-vjbc, 1 mg
	J3591	Unclassified drug or biological used for esrd on dialysis

PHARMACY – ADDITIONS cont.

Category	HCPCS	Description
Injection	J7177	Injection, human fibrinogen concentrate (fibryga), 1 mg Note: J7178 should be used for non-Fibryga
	J7329	Hyaluronan or derivative, trivisc, for intra-articular injection, 1 mg
	J9044	Injection, bortezomib, not otherwise specified, 0.1 mg Note: Use J9041 for Velcade
	C9034	Injection, dexamethasone 9%, intraocular, 1 mcg
	C9035	Injection, aripiprazole lauroxil (aristada initio), 1 mg
	C9036	Injection, patisiran, 0.1 mg
	C9037	Injection, risperidone (perseris), 0.5 mg
	C9038	Injection, mogamulizumab-kpkc, 1 mg
	C9039	Injection, plazomicin, 5 mg
Radiopharm	C9407	Iodine i-131 iobenguane, diagnostic, 1 millicurie
	C9408	Iodine i-131 iobenguane, therapeutic, 1 millicurie
	C9462	Iodine i-131 iobenguane, diagnostic, 1 millicurie
Injection	J0584	Injection, burosumab-twza 1 mg
	J0841	Injection, crotalidae immune f(ab') ₂ (equine), 120 mg
	J1746	Injection, ibalizumab-uiyk, 10 mg

PHARMACY – ADDITIONS cont.

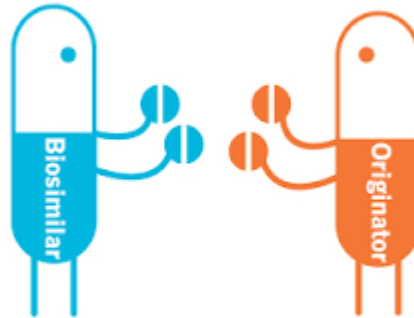
Category	HCPCS	Description
Injection	J3245	Injection, tildrakizumab, 1 mg
	J3397	Injection, vestronidase alfa-vjbk, 1 mg
	J3591	Unclassified drug or biological used for esrd on dialysis
	J7177	Injection, human fibrinogen concentrate (fibryga), 1 mg Note: J7178 should be used for non-Fibryga
	J7329	Hyaluronan or derivative, trivisc, for intra-articular injection, 1 mg
	Q5105	Injection, epoetin alfa, biosimilar, (retacrit) (for esrd on dialysis), 100 units
		Injection, epoetin alfa, biosimilar, (retacrit) (for non-esrd use), 1000 units
	Q5106	Injection, epoetin alfa, biosimilar, (retacrit) (for non-esrd use), 1000 units
	Q5107	Injection, bevacizumab-awwb, biosimilar, (mvasi), 10 mg
	Q5108	Injection, pegfilgrastim-jmdb, biosimilar, (fulphila), 0.5 mg
	Q5110	Injection, filgrastim-aafi, biosimilar, (nivestym), 1 microgram
		Note: Q5101 is for sndz, Zarxio
	Q9991	Injection, buprenorphine extended-release (sublocade), less than or equal to 100 mg
Q9992	Injection, buprenorphine extended-release (sublocade), greater than 100 mg	

PHARMACY – OTHER NOTES

Deleted modifiers

- ZA, ZB, ZC – biosimilar modifiers have been discontinued

Were hospitals using these?

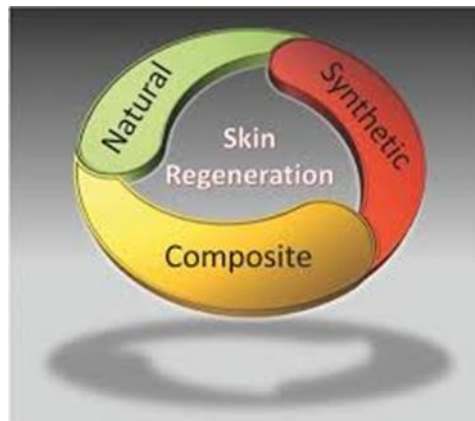


SKIN SUBSTITUTES – REPLACEMENTS

Old CPT	Description	Use this CPT	Description
Q4131	Epifix or epicord, per square centimeter	Q4186 Q4187	Epifix, per sq cm Epicord, per sq cm
Q4172	Puraply or puraply am, per square centimeter	Q4195 Q4196 Q4197	Puraply, per sq cm Puraply am, per sq cm Puraply xt, per sq cm

SKIN SUBSTITUTES – REVISIONS

CPT	Old Description	Description Updates
Q4133	Grafix prime and grafixpl prime, per square centimeter	Also includes Stravix and Stravix pl now
Q4137	Amnioexcel or biodexcel, per square centimeter	Also includes Amnioexcel plus



SKIN SUBSTITUTES – ADDITIONS

(typically assigned to “low cost” bucket first)

HCPCS	DESCRIPTION
Q4183	Surgigraft, per square centimeter
Q4184	Cellesta, per square centimeter
Q4185	Cellesta flowable amnion (25 mg per cc); per 0.5 cc
Q4188	Amnioarmor, per square centimeter
Q4189	Artacent ac, 1 mg
Q4190	Artacent ac, per square centimeter
Q4191	Restorigin, per square centimeter
Q4192	Restorigin, 1 cc
Q4193	Coll-e-derm, per square centimeter
Q4194	Novachor, per square centimeter

SKIN SUBSTITUTES – ADDITIONS cont.

(typically assigned to “low cost” bucket first)

HCPCS	DESCRIPTION
Q4198	Genesis amniotic membrane, per square centimeter
Q4200	Skin te, per square centimeter
Q4201	Matrion, per square centimeter
Q4202	Keroxx (2.5g/cc), 1cc
Q4203	Derma-gide, per square centimeter
Q4204	Xwrap, per square centimeter



SUPPLIES - REVISIONS

CPT	Old Description	Description Updates
A9273	Hot water bottle	Hot or cold fluid bottle
C1889	Implantable/insertable device for device intensive treatment, NOC	Does not have to be for device intensive procedure



SUPPLIES - ADDITIONS

HCPCS	DESCRIPTION
A4563	Vag insertion rectal control system
A5514	Multiple density foot insert for diabetics
A6460 A6461	Synthetic resorbable wound dressings
C1823	Generator, neurostimulator (implantable), non-rechargeable, with transvenous sensing and stimulation leads
L8608	Misc external component, for use with the argus ii retinal prosthesis system
L8698	Misc component, for use with total artificial heart system
L8701 L8702	Powered upper extremity range of motion device Includes fingers