<u>MEDICAID FEE FOR SERVICES: UPDATE DECEMBER 1, 2020</u> Codes for Out-Patient Hospital Billing ONLY

A4641 RADIOPHARMACEUTICAL, DIAGNOSTI A9505 THALLIUM TL-201 THALLOUS CHLOR A9512 TECHNETIUM TC-99M PERTECHNETAT A9516 IODINE I-123 SODIUM IODIDE, DI A9521 TECHNETIUM TC-99M EXAMETAZIME, A9528 IODINE I-131 SODIUM IODIDE CAP A9537 TECHNETIUM TC-99M MERROFEINN, A9540 TECHNETIUM TC-99M MERROFEINN, A9541 TECHNETIUM TC-99M SULFUR COLLO A9555 RUBIDIUM RB-82, DIAGNOSTIC, PE A9556 GALLIUM GA-67 CITRATE, DIAGNOS A9558 XENON XE-133 GAS, DIAGNOSTIC, A9560 TECHNETIUM TC-99M ADDIAGNOSTIC, A9560 TECHNETIUM TC-99M NOLIDRONATE, A9561 TECHNETIUM TC-99M MERTIATIDE, A9562 TECHNETIUM TC-99M PENTETATE, D A9563 TECHNETIUM TC-99M PENTETATE, D A9564 TECHNETIUM TC-99M PENTETATE, D A9567 TECHNETIUM TC-99M PENTETATE, D A9568 GALLIUM GA-68, DOTATATE, DIAGNO A9588 FLUCICLOVINE F-18, DIAGNOSTIC, C1300 HYPERBARIC OXYGEN UNDER PRESSU C1711 ANCHOR/SCREW FOR OPPOSING BONE C1714 CATHETER, TRANSLUMINAL ATHEREC C1716 BRACHYTHERAPY SOURCE, NON-STRA C1717 BRACHYTHERAPY SOURCE, NON-STRA C1717 GARDIOVERTER-DEFIBRILLATOR, DU C1722 CARDIOVERTER-DEFIBRILLATOR, DI C1724 CATHETER, TRANSLUMINAL ATHEREC C1724 CATHETER, TRANSLUMINAL ATHEREC C1724 CATHETER, TRANSLUMINAL ATHEREC C1724 CATHETER, TRANSLUMINAL ATHEREC	CPT/HCPCS	SHORT - DESCRIPTION
A9512 TECHNETIUM TC-99M PERTECHNETAT A9516 IODINE I-123 SODIUM IODIDE, DI A9521 TECHNETIUM TC-99M EXAMETAZIME, A9528 IODINE I-131 SODIUM IODIDE CAP A9537 TECHNETIUM TC-99M MEBROFENIN, A9540 TECHNETIUM TC-99M MEBROFENIN, A9541 TECHNETIUM TC-99M SULFUR COLLO A9555 RUBIDIUM RB-82, DIAGNOSTIC, PE A9556 GALLIUM GA-67 CITRATE, DIAGNOS A9558 XENON XE-133 GAS, DIAGNOSTIC, A9560 TECHNETIUM TC-99M LABELED RED A9561 TECHNETIUM TC-99M NEBLED RED A9562 TECHNETIUM TC-99M MERITATIDE, A9567 TECHNETIUM TC-99M PENTETATE, D A9588 GALLIUM GA-68, DOTATATE, DIAGN A9589 GALLIUM GA-68, DOTATATE, DIAGN A9588 FLUCICOVINE F-18, DIAGNOSTIC, C1300 HYPERBARIC OXYGEN UNDER PRESSU C1711 ANCHOR/SCREW FOR OPPOSING BONE C1714 CATHETER, TRANSLUMINAL ATHEREC C1715 BRACHYTHERAPY SOURCE, NON-STRA C1719 BRACHYTHERAPY SOURCE, NON-STRA C1721 CARDIOVERTE-DEFIBRILLATOR, DU C1722 CARDIOVERTER, TRANSLUMINAL ATHEREC C1722 CARDIOVERTER, TEANSLUMINAL ATHEREC	A4641	RADIOPHARMACEUTICAL, DIAGNOSTI
A9516 IODINE I-123 SODIUM IODIDE, DI A9521 TECHNETIUM TC-99M EXAMETAZIME, A9528 IODINE I-131 SODIUM IODIDE CAP A9537 TECHNETIUM TC-99M MEBROFENIN, A9530 TECHNETIUM TC-99M MORROAGGREGA A9531 TECHNETIUM TC-99M SULFUR COLLO A9555 RUBIDIUM RB-82, DIAGNOSTIC, PE A9556 GALLIUM GA-67 CITRATE, DIAGNOS A9558 XENON XE-133 GAS, DIAGNOSTIC, A9560 TECHNETIUM TC-99M LABELED RED A9561 TECHNETIUM TC-99M VAIDRONATE, A9562 TECHNETIUM TC-99M PERTIATIDE, A9567 TECHNETIUM TC-99M PERTEATE, D A9588 GALLIUM GA-68, DOTATATE, DIAGN A9588 FLUCICLOVINE F-18, DIAGNOSTIC, C1300 HYPERBARIC OXYGEN UNDER PRESSU C1713 ANCHOR/SCREW FOR OPPOSING BONE C1714 CATHETER, TRANSLUMINAL ATHEREC C1716 BRACHYTHERAPY SOURCE, NON-STRA C1721 CARDIOVERTER-DEFIBRILLATOR, DU C1722 CARDIOVERTER-DEFIBRILLATOR, SI C1722 CARDIOVERTER, TRANSLUMINAL ATHEREC	A9505	THALLIUM TL-201 THALLOUS CHLOR
A9521 TECHNETIUM TC-99M EXAMETAZIME, A9528 IODINE I-131 SODIUM IODIDE CAP A9537 TECHNETIUM TC-99M MEBROFENIN, A9540 TECHNETIUM TC-99M MEROAGGREGA A9541 TECHNETIUM TC-99M SULFUR COLLO A9555 RUBIDIUM RB-82, DIAGNOSTIC, PE A9556 GALLIUM GA-67 CITRATE, DIAGNOS A9558 XENON XE-133 GAS, DIAGNOSTIC, A9560 TECHNETIUM TC-99M LABELED RED A9561 TECHNETIUM TC-99M OXIDRONATE, A9562 TECHNETIUM TC-99M MERTIATIDE, A9567 TECHNETIUM TC-99M MERTIATIDE, A9588 GALLIUM GA-68, DOTATATE, DIAGNO A9588 FLUCICLOVINE F-18, DIAGNOSTIC, C1300 HYPERBARIC OXYGEN UNDER PRESSU C1711 ANCHOR/SCREW FOR OPPOSING BONE C1714 CATHETER, TRANSLUMINAL ATHEREC C1716 BRACHYTHERAPY SOURCE, NON-STRA C1719 BRACHYTHERAPY SOURCE, NON-STRA C1721 CARDIOVERTER-DEFIBRILLATOR, DI C1722 CARDIOVERTER-DEFIBRILLATOR, SI C1724 CATHETER, TRANSLUMINAL ATHEREC	A9512	TECHNETIUM TC-99M PERTECHNETAT
A9528 IODINE I-131 SODIUM IODIDE CAP A9537 TECHNETIUM TC-99M MEBROFENIN, A9540 TECHNETIUM TC-99M MACROAGGREGA A9541 TECHNETIUM TC-99M SULFUR COLLO A9555 RUBIDIUM RB-82, DIAGNOSTIC, PE A9556 GALLIUM GA-67 CITRATE, DIAGNOS A9558 XENON XE-133 GAS, DIAGNOSTIC, A9560 TECHNETIUM TC-99M LABELED RED A9561 TECHNETIUM TC-99M MERTIATIDE, A9562 TECHNETIUM TC-99M MERTIATIDE, A9567 TECHNETIUM TC-99M MERTIATIDE, A9568 TECHNETIUM TC-99M MERTIATIDE, A9568 GALLIUM GA-68, DOTATATE, DIAGNO A9588 FLUCICLOVINE F-18, DIAGNOSTIC, C1300 HYPERBARIC OXYGEN UNDER PRESSU C1713 ANCHOR/SCREW FOR OPPOSING BONE C1714 CATHETER, TRANSLUMINAL ATHEREC C1715 BRACHYTHERAPY SOURCE, NON-STRA C1719 BRACHYTHERAPY SOURCE, NON-STRA C1721 CARDIOVERTER-DEFIBRILLATOR, DU C1722 CARDIOVERTER-DEFIBRILLATOR, SI C1724 CATHETER, TRANSLUMINAL ATHEREC	A9516	IODINE I-123 SODIUM IODIDE, DI
A9537 TECHNETIUM TC-99M MEBROFENIN, A9540 TECHNETIUM TC-99M MACROAGGREGA A9541 TECHNETIUM TC-99M SULFUR COLLO A9555 RUBIDIUM RB-82, DIAGNOSTIC, PE A9556 GALLIUM GA-67 CITRATE, DIAGNOS A9558 XENON XE-133 GAS, DIAGNOSTIC, A9560 TECHNETIUM TC-99M LABELED RED A9561 TECHNETIUM TC-99M CXIDRONATE, A9562 TECHNETIUM TC-99M MERTIATIDE, A9567 TECHNETIUM TC-99M PENTETATE, D A9588 GALLIUM GA-68, DOTATATE, DIAGN A9588 FLUCICLOVINE F-18, DIAGNOSTIC, C1300 HYPERBARIC OXYGEN UNDER PRESSU C1713 ANCHOR/SCREW FOR OPPOSING BONE C1714 CATHETER, TRANSLUMINAL ATHEREC C1716 BRACHYTHERAPY NEEDLE C1717 BRACHYTHERAPY SOURCE, NON-STRA C1719 BRACHYTHERAPY SOURCE, NON-STRA C1721 CARDIOVERTER-DEFIBRILLATOR, SI C1722 CARDIOVERTER-DEFIBRILLATOR, SI C1724 CATHETER, TRANSLUMINAL ATHEREC	A9521	TECHNETIUM TC-99M EXAMETAZIME,
A9540 TECHNETIUM TC-99M MACROAGGREGA A9541 TECHNETIUM TC-99M SULFUR COLLO A9555 RUBIDIUM RB-82, DIAGNOSTIC, PE A9556 GALLIUM GA-67 CITRATE, DIAGNOS A9558 XENON XE-133 GAS, DIAGNOSTIC, A9560 TECHNETIUM TC-99M LABELED RED A9561 TECHNETIUM TC-99M OXIDRONATE, A9562 TECHNETIUM TC-99M MERTIATIDE, A9567 TECHNETIUM TC-99M PENTETATE, D A9588 GALLIUM GA-68, DOTATATE, DIAGN A9588 FLUCICLOVINE F-18, DIAGNOSTIC, C1300 HYPERBARIC OXYGEN UNDER PRESSU C1713 ANCHOR/SCREW FOR OPPOSING BONE C1714 CATHETER, TRANSLUMINAL ATHEREC C1716 BRACHYTHERAPY SOURCE, NON-STRA C1717 BRACHYTHERAPY SOURCE, NON-STRA C1721 CARDIOVERTER-DEFIBRILLATOR, SI C1722 CARDIOVERTER-DEFIBRILLATOR, SI C1724 CATHETER, TRANSLUMINAL ATHEREC	A9528	IODINE I-131 SODIUM IODIDE CAP
A9541 TECHNETIUM TC-99M SULFUR COLLO A9555 RUBIDIUM RB-82, DIAGNOSTIC, PE A9556 GALLIUM GA-67 CITRATE, DIAGNOS A9558 XENON XE-133 GAS, DIAGNOSTIC, A9560 TECHNETIUM TC-99M LABELED RED A9561 TECHNETIUM TC-99M OXIDRONATE, A9562 TECHNETIUM TC-99M MERTIATIDE, A9567 TECHNETIUM TC-99M PENTETATE, D A9587 GALLIUM GA-68, DOTATATE, DIAGN A9588 FLUCICLOVINE F-18, DIAGNOSTIC, C1300 HYPERBARIC OXYGEN UNDER PRESSU C1713 ANCHOR/SCREW FOR OPPOSING BONE C1714 CATHETER, TRANSLUMINAL ATHEREC C1715 BRACHYTHERAPY SOURCE, NON-STRA C1717 BRACHYTHERAPY SOURCE, NON-STRA C1719 BRACHYTHERAPY SOURCE, NON-STRA C1721 CARDIOVERTER-DEFIBRILLATOR, DU C1722 CARDIOVERTER-DEFIBRILLATOR, SI C1724 CATHETER, TRANSLUMINAL ATHEREC	A9537	TECHNETIUM TC-99M MEBROFENIN,
A9555 RUBIDIUM RB-82, DIAGNOSTIC, PE A9556 GALLIUM GA-67 CITRATE, DIAGNOS A9558 XENON XE-133 GAS, DIAGNOSTIC, A9560 TECHNETIUM TC-99M LABELED RED A9561 TECHNETIUM TC-99M OXIDRONATE, A9562 TECHNETIUM TC-99M MERTIATIDE, A9567 TECHNETIUM TC-99M PENTETATE, D A9587 GALLIUM GA-68, DOTATATE, DIAGN A9588 FLUCICLOVINE F-18, DIAGNOSTIC, C1300 HYPERBARIC OXYGEN UNDER PRESSU C1713 ANCHOR/SCREW FOR OPPOSING BONE C1714 CATHETER, TRANSLUMINAL ATHEREC C1715 BRACHYTHERAPY NEEDLE C1716 BRACHYTHERAPY SOURCE, NON-STRA C1717 BRACHYTHERAPY SOURCE, NON-STRA C1719 BRACHYTHERAPY SOURCE, NON-STRA C1721 CARDIOVERTER-DEFIBRILLATOR, DU C1722 CARDIOVERTER-DEFIBRILLATOR, SI C1724 CATHETER, TRANSLUMINAL ATHEREC	A9540	TECHNETIUM TC-99M MACROAGGREGA
A9556 GALLIUM GA-67 CITRATE, DIAGNOS A9558 XENON XE-133 GAS, DIAGNOSTIC, A9560 TECHNETIUM TC-99M LABELED RED A9561 TECHNETIUM TC-99M OXIDRONATE, A9562 TECHNETIUM TC-99M MERTIATIDE, A9567 TECHNETIUM TC-99M PENTETATE, D A9587 GALLIUM GA-68, DOTATATE, DIAGN A9588 FLUCICLOVINE F-18, DIAGNOSTIC, C1300 HYPERBARIC OXYGEN UNDER PRESSU C1713 ANCHOR/SCREW FOR OPPOSING BONE C1714 CATHETER, TRANSLUMINAL ATHEREC C1715 BRACHYTHERAPY NEEDLE C1716 BRACHYTHERAPY SOURCE, NON-STRA C1717 BRACHYTHERAPY SOURCE, NON-STRA C1719 BRACHYTHERAPY SOURCE, NON-STRA C1721 CARDIOVERTER-DEFIBRILLATOR, DU C1722 CARDIOVERTER-DEFIBRILLATOR, SI C1724 CATHETER, TRANSLUMINAL ATHEREC	A9541	TECHNETIUM TC-99M SULFUR COLLO
A9558 XENON XE-133 GAS, DIAGNOSTIC, A9560 TECHNETIUM TC-99M LABELED RED A9561 TECHNETIUM TC-99M OXIDRONATE, A9562 TECHNETIUM TC-99M MERTIATIDE, A9567 TECHNETIUM TC-99M PENTETATE, D A9587 GALLIUM GA-68, DOTATATE, DIAGN A9588 FLUCICLOVINE F-18, DIAGNOSTIC, C1300 HYPERBARIC OXYGEN UNDER PRESSU C1713 ANCHO/SCREW FOR OPPOSING BONE C1714 CATHETER, TRANSLUMINAL ATHEREC C1715 BRACHYTHERAPY NEEDLE C1716 BRACHYTHERAPY SOURCE, NON-STRA C1717 BRACHYTHERAPY SOURCE, NON-STRA C1719 BRACHYTHERAPY SOURCE, NON-STRA C1721 CARDIOVERTER-DEFIBRILLATOR, DU C1722 CARDIOVERTER-DEFIBRILLATOR, SI C1724 CATHETER, TRANSLUMINAL ATHEREC	A9555	RUBIDIUM RB-82, DIAGNOSTIC, PE
A9560 TECHNETIUM TC-99M LABELED RED A9561 TECHNETIUM TC-99M OXIDRONATE, A9562 TECHNETIUM TC-99M MERTIATIDE, A9567 TECHNETIUM TC-99M PENTETATE, D A9587 GALLIUM GA-68, DOTATATE, DIAGN A9588 FLUCICLOVINE F-18, DIAGNOSTIC, C1300 HYPERBARIC OXYGEN UNDER PRESSU C1713 ANCHOR/SCREW FOR OPPOSING BONE C1714 CATHETER, TRANSLUMINAL ATHEREC C1715 BRACHYTHERAPY NEEDLE C1716 BRACHYTHERAPY SOURCE, NON-STRA C1717 BRACHYTHERAPY SOURCE, NON-STRA C1719 BRACHYTHERAPY SOURCE, NON-STRA C1721 CARDIOVERTER-DEFIBRILLATOR, DU C1722 CARDIOVERTER-DEFIBRILLATOR, SI C1724 CATHETER, TRANSLUMINAL ATHEREC	A9556	GALLIUM GA-67 CITRATE, DIAGNOS
A9561 TECHNETIUM TC-99M OXIDRONATE, A9562 TECHNETIUM TC-99M MERTIATIDE, A9567 TECHNETIUM TC-99M PENTETATE, D A9587 GALLIUM GA-68, DOTATATE, DIAGN A9588 FLUCICLOVINE F-18, DIAGNOSTIC, C1300 HYPERBARIC OXYGEN UNDER PRESSU C1713 ANCHOR/SCREW FOR OPPOSING BONE C1714 CATHETER, TRANSLUMINAL ATHEREC C1715 BRACHYTHERAPY NEEDLE C1716 BRACHYTHERAPY SOURCE, NON-STRA C1717 BRACHYTHERAPY SOURCE, NON-STRA C1719 BRACHYTHERAPY SOURCE, NON-STRA C1721 CARDIOVERTER-DEFIBRILLATOR, DU C1722 CARDIOVERTER-DEFIBRILLATOR, SI C1724 CATHETER, TRANSLUMINAL ATHEREC	A9558	XENON XE-133 GAS, DIAGNOSTIC,
A9562 TECHNETIUM TC-99M MERTIATIDE, A9567 TECHNETIUM TC-99M PENTETATE, D A9587 GALLIUM GA-68, DOTATATE, DIAGN A9588 FLUCICLOVINE F-18, DIAGNOSTIC, C1300 HYPERBARIC OXYGEN UNDER PRESSU C1713 ANCHOR/SCREW FOR OPPOSING BONE C1714 CATHETER, TRANSLUMINAL ATHEREC C1715 BRACHYTHERAPY NEEDLE C1716 BRACHYTHERAPY SOURCE, NON-STRA C1717 BRACHYTHERAPY SOURCE, NON-STRA C1719 BRACHYTHERAPY SOURCE, NON-STRA C1721 CARDIOVERTER-DEFIBRILLATOR, DU C1722 CARDIOVERTER-DEFIBRILLATOR, SI C1724 CATHETER, TRANSLUMINAL ATHEREC	A9560	TECHNETIUM TC-99M LABELED RED
A9567 TECHNETIUM TC-99M PENTETATE, D A9587 GALLIUM GA-68, DOTATATE, DIAGN A9588 FLUCICLOVINE F-18, DIAGNOSTIC, C1300 HYPERBARIC OXYGEN UNDER PRESSU C1713 ANCHOR/SCREW FOR OPPOSING BONE C1714 CATHETER, TRANSLUMINAL ATHEREC C1715 BRACHYTHERAPY NEEDLE C1716 BRACHYTHERAPY SOURCE, NON-STRA C1717 BRACHYTHERAPY SOURCE, NON-STRA C1719 BRACHYTHERAPY SOURCE, NON-STRA C1721 CARDIOVERTER-DEFIBRILLATOR, DU C1722 CARDIOVERTER-DEFIBRILLATOR, SI C1724 CATHETER, TRANSLUMINAL ATHEREC	A9561	TECHNETIUM TC-99M OXIDRONATE,
A9587 GALLIUM GA-68, DOTATATE, DIAGN A9588 FLUCICLOVINE F-18, DIAGNOSTIC, C1300 HYPERBARIC OXYGEN UNDER PRESSU C1713 ANCHOR/SCREW FOR OPPOSING BONE C1714 CATHETER, TRANSLUMINAL ATHEREC C1715 BRACHYTHERAPY NEEDLE C1716 BRACHYTHERAPY SOURCE, NON-STRA C1717 BRACHYTHERAPY SOURCE, NON-STRA C1719 BRACHYTHERAPY SOURCE, NON-STRA C1721 CARDIOVERTER-DEFIBRILLATOR, DU C1722 CARDIOVERTER-DEFIBRILLATOR, SI C1724 CATHETER, TRANSLUMINAL ATHEREC	A9562	TECHNETIUM TC-99M MERTIATIDE,
A9588 FLUCICLOVINE F-18, DIAGNOSTIC, C1300 HYPERBARIC OXYGEN UNDER PRESSU C1713 ANCHOR/SCREW FOR OPPOSING BONE C1714 CATHETER, TRANSLUMINAL ATHEREC C1715 BRACHYTHERAPY NEEDLE C1716 BRACHYTHERAPY SOURCE, NON-STRA C1717 BRACHYTHERAPY SOURCE, NON-STRA C1719 BRACHYTHERAPY SOURCE, NON-STRA C1721 CARDIOVERTER-DEFIBRILLATOR, DU C1722 CARDIOVERTER-DEFIBRILLATOR, SI C1724 CATHETER, TRANSLUMINAL ATHEREC	A9567	TECHNETIUM TC-99M PENTETATE, D
C1300 HYPERBARIC OXYGEN UNDER PRESSU C1713 ANCHOR/SCREW FOR OPPOSING BONE C1714 CATHETER, TRANSLUMINAL ATHEREC C1715 BRACHYTHERAPY NEEDLE C1716 BRACHYTHERAPY SOURCE, NON-STRA C1717 BRACHYTHERAPY SOURCE, NON-STRA C1719 BRACHYTHERAPY SOURCE, NON-STRA C1721 CARDIOVERTER-DEFIBRILLATOR, DU C1722 CARDIOVERTER-DEFIBRILLATOR, SI C1724 CATHETER, TRANSLUMINAL ATHEREC	A9587	GALLIUM GA-68, DOTATATE, DIAGN
C1713 ANCHOR/SCREW FOR OPPOSING BONE C1714 CATHETER, TRANSLUMINAL ATHEREC C1715 BRACHYTHERAPY NEEDLE C1716 BRACHYTHERAPY SOURCE, NON-STRA C1717 BRACHYTHERAPY SOURCE, NON-STRA C1719 BRACHYTHERAPY SOURCE, NON-STRA C1721 CARDIOVERTER-DEFIBRILLATOR, DU C1722 CARDIOVERTER-DEFIBRILLATOR, SI C1724 CATHETER, TRANSLUMINAL ATHEREC	A9588	FLUCICLOVINE F-18, DIAGNOSTIC,
C1714 CATHETER, TRANSLUMINAL ATHEREC C1715 BRACHYTHERAPY NEEDLE C1716 BRACHYTHERAPY SOURCE, NON-STRA C1717 BRACHYTHERAPY SOURCE, NON-STRA C1719 BRACHYTHERAPY SOURCE, NON-STRA C1721 CARDIOVERTER-DEFIBRILLATOR, DU C1722 CARDIOVERTER-DEFIBRILLATOR, SI C1724 CATHETER, TRANSLUMINAL ATHEREC	C1300	HYPERBARIC OXYGEN UNDER PRESSU
C1715 BRACHYTHERAPY NEEDLE C1716 BRACHYTHERAPY SOURCE, NON-STRA C1717 BRACHYTHERAPY SOURCE, NON-STRA C1719 BRACHYTHERAPY SOURCE, NON-STRA C1721 CARDIOVERTER-DEFIBRILLATOR, DU C1722 CARDIOVERTER-DEFIBRILLATOR, SI C1724 CATHETER, TRANSLUMINAL ATHEREC	C1713	ANCHOR/SCREW FOR OPPOSING BONE
C1716 BRACHYTHERAPY SOURCE, NON-STRA C1717 BRACHYTHERAPY SOURCE, NON-STRA C1719 BRACHYTHERAPY SOURCE, NON-STRA C1721 CARDIOVERTER-DEFIBRILLATOR, DU C1722 CARDIOVERTER-DEFIBRILLATOR, SI C1724 CATHETER, TRANSLUMINAL ATHEREC	C1714	CATHETER, TRANSLUMINAL ATHEREC
C1717 BRACHYTHERAPY SOURCE, NON-STRA C1719 BRACHYTHERAPY SOURCE, NON-STRA C1721 CARDIOVERTER-DEFIBRILLATOR, DU C1722 CARDIOVERTER-DEFIBRILLATOR, SI C1724 CATHETER, TRANSLUMINAL ATHEREC	C1715	BRACHYTHERAPY NEEDLE
C1719 BRACHYTHERAPY SOURCE, NON-STRA C1721 CARDIOVERTER-DEFIBRILLATOR, DU C1722 CARDIOVERTER-DEFIBRILLATOR, SI C1724 CATHETER, TRANSLUMINAL ATHEREC	C1716	BRACHYTHERAPY SOURCE, NON-STRA
C1721 CARDIOVERTER-DEFIBRILLATOR, DU C1722 CARDIOVERTER-DEFIBRILLATOR, SI C1724 CATHETER, TRANSLUMINAL ATHEREC	C1717	BRACHYTHERAPY SOURCE, NON-STRA
C1722 CARDIOVERTER-DEFIBRILLATOR, SI C1724 CATHETER, TRANSLUMINAL ATHEREC	C1719	BRACHYTHERAPY SOURCE, NON-STRA
C1724 CATHETER, TRANSLUMINAL ATHEREC	C1721	CARDIOVERTER-DEFIBRILLATOR, DU
· · · · · · · · · · · · · · · · · · ·	C1722	CARDIOVERTER-DEFIBRILLATOR, SI
CATHETER TRANSLIMINAL ANGIORI	C1724	CATHETER, TRANSLUMINAL ATHEREC
OTTES ON THE LET, TRANSCOINTINAL ANGIOTE	C1725	CATHETER, TRANSLUMINAL ANGIOPL
C1726 CATHETER, BALLOON DILATATION,	C1726	CATHETER, BALLOON DILATATION,

<u>MEDICAID FEE FOR SERVICES: UPDATE DECEMBER 1, 2020</u> Codes for Out-Patient Hospital Billing ONLY

CPT/HCPCS	SHORT - DESCRIPTION
CP1/HCPCS	
C1727	CATHETER, BALLOON TISSUE DISSE
C1728	CATHETER, BRACHYTHERAPY SEED A
C1729	CATHETER, DRAINAGE
C1730	CATHETER, ELECTROPHYSIOLOGY, D
C1731	CATHETER, ELECTROPHYSIOLOGY, D
C1732	CATHETER, ELECTROPHYSIOLOGY, D
C1733	CATHETER, ELECTROPHYSIOLOGY, D
C1734	ORTHOPEDIC/DEVICE/DRUG MATRIX
C1748	ENDOSCOPE, SINGLE-USE (I.E. DI
C1749	ENDOSCOPE, RETROGRADE IMAGING/
C1750	CATHETER, HEMODIALYSIS, LONG-T
C1751	CATHETER, INFUSION, INSERTED P
C1752	CATHETER, HEMODIALYSIS, SHORT-
C1753	CATHETER, INTRAVASCULAR ULTRAS
C1754	CATHETER, INTRADISCAL
C1755	CATHETER, INTRASPINAL
C1756	CATHETER, PACING, TRANSESOPHAG
C1757	CATHETER, THROMBECTOMY/EMBOLEC
C1758	CATHETER, URETERAL
C1759	CATHETER, INTRACARDIAC ECHOCAR
C1760	CLOSURE DEVICE, VASCULAR (IMPL
C1762	CONNECTIVE TISSUE, HUMAN (INCL
C1763	CONNECTIVE TISSUE, NON-HUMAN (
C1764	EVENT RECORDER, CARDIAC (IMPLA
C1765	ADHESION BARRIER
C1766	INTRODUCER/SHEATH, GUIDING, IN
C1767	GENERATOR, NEUROSTIMULATOR (IM
C1768	GRAFT, VASCULAR
C1769	GUIDE WIRE
C1770	IMAGING COIL, MAGNETIC RESONAN

<u>MEDICAID FEE FOR SERVICES: UPDATE DECEMBER 1, 2020</u> Codes for Out-Patient Hospital Billing ONLY

CPT/HCPCS	SHORT - DESCRIPTION
C1771	REPAIR DEVICE, URINARY, INCONT
C1772	INFUSION PUMP, PROGRAMMABLE (I
C1773	RETRIEVAL DEVICE, INSERTABLE (
C1776	JOINT DEVICE (IMPLANTABLE)
C1777	LEAD, CARDIOVERTER-DEFIBRILLAT
C1778	LEAD, NEUROSTIMULATOR (IMPLANT
C1779	LEAD, PACEMAKER, TRANSVENOUS V
C1780	LENS, INTRAOCULAR (NEW TECHNOL
C1781	MESH (IMPLANTABLE)
C1782	MORCELLATOR
C1783	OCULAR IMPLANT, AQUEOUS DRAINA
C1784	OCULAR DEVICE, INTRAOPERATIVE,
C1785	PACEMAKER, DUAL CHAMBER, RATE-
C1786	PACEMAKER, SINGLE CHAMBER, RAT
C1787	PATIENT PROGRAMMER, NEUROSTIMU
C1788	PORT, INDWELLING (IMPLANTABLE)
C1789	PROSTHESIS, BREAST (IMPLANTABL
C1813	PROSTHESIS, PENILE, INFLATABLE
C1814	RETINAL TAMPONADE DEVICE, SILI
C1815	PROSTHESIS, URINARY SPHINCTER
C1816	RECEIVER AND/OR TRANSMITTER, N
C1817	SEPTAL DEFECT IMPLANT SYSTEM,
C1818	INTEGRATED KERATOPROSTHESIS
C1819	SURGICAL TISSUE LOCALIZATION A
C1820	GENERATOR, NEUROSTIMULATOR (IM
C1821	INTERSPINOUS PROCESS DISTRACTI
C1822	GENERATOR, NEUROSTIMULATOR (IM
C1824	GENERATOR, CARDIAC CONTRACTILI
C1830	POWERED BONE MARROW BIOPSY NEE
C1839	IRIS PROSTHESIS

<u>MEDICAID FEE FOR SERVICES: UPDATE DECEMBER 1, 2020</u> Codes for Out-Patient Hospital Billing ONLY

SHORT - DESCRIPTION	
LENS, INTRAOCULAR (TELESCOPIC)	
RETINAL PROSTHESIS, INCLUDES A	
SKIN SUBSTITUE, SYNTHETIC, RES	
STENT, COATED/COVERED, WITH DE	
STENT, COATED/COVERED, WITHOUT	
STENT, NON-COATED/NON-COVERED,	
STENT, NON-COATED/NON-COVERED,	
MATERIAL FOR VOCAL CORD MEDIAL	
VENA CAVA FILTER	
DIALYSIS ACCESS SYSTEM (IMPLAN	
CARDIOVERTER-DEFIBRILLATOR, OT	
ADAPTOR/EXTENSION, PACING LEAD	
EMBOLIZATION PROTECTIVE SYSTEM	
CATHETER, TRANSLUMINAL ANGIOPL	
CATHETER, EXTRAVASCULAR TISSUE	
CATHETER, GUIDING (MAY INCLUDE	
CATHETER, ABLATION, NON-CARDIA	
INFUSION PUMP, NON-PROGRAMMABL	
INTRODUCER/SHEATH, GUIDING, IN	
INTRODUCER/SHEATH, GUIDING, IN	
INTRODUCER/SHEATH, OTHER THAN	
LEAD, CARDIOVERTER-DEFIBRILLAT	
LEAD, CARDIOVERTER-DEFIBRILLAT	
LEAD, NEUROSTIMULATOR TEST KIT	
LEAD, PACEMAKER, OTHER THAN TR	
LEAD, PACEMAKER/CARDIOVERTER-D	
LEAD, LEFT VENTRICULAR CORONAR	
CATHETER, PRESSURE-GENERATING,	
PROBE, IMAGE-GUIDED, ROBOTIC,	
LUNG BIOPSY PLUG WITH DELIVERY	
	LENS, INTRAOCULAR (TELESCOPIC) RETINAL PROSTHESIS, INCLUDES A SKIN SUBSTITUE, SYNTHETIC, RES STENT, COATED/COVERED, WITH DE STENT, COATED/COVERED, WITHOUT STENT, NON-COATED/NON-COVERED, STENT, NON-COATED/NON-COVERED, MATERIAL FOR VOCAL CORD MEDIAL VENA CAVA FILTER DIALYSIS ACCESS SYSTEM (IMPLAN CARDIOVERTER-DEFIBRILLATOR, OT ADAPTOR/EXTENSION, PACING LEAD EMBOLIZATION PROTECTIVE SYSTEM CATHETER, TRANSLUMINAL ANGIOPL CATHETER, RANSLUMINAL ANGIOPL CATHETER, ASLATION, NON-CARDIA INFUSION PUMP, NON-PROGRAMMABL INTRODUCER/SHEATH, GUIDING, IN INTRODUCER/SHEATH, GUIDING, IN INTRODUCER/SHEATH, OTHER THAN LEAD, CARDIOVERTER-DEFIBRILLAT LEAD, CARDIOVERTER-DEFIBRILLAT LEAD, PACEMAKER, OTHER THAN TR LEAD, PACEMAKER,

<u>MEDICAID FEE FOR SERVICES: UPDATE DECEMBER 1, 2020</u> Codes for Out-Patient Hospital Billing ONLY

SHORT - DESCRIPTION	
PROBE, PERCUTANEOUS LUMBAR DIS	
SEALANT, PULMONARY, LIQUID	
BRACHYTHERAPY SOURCE, NON-STRA	
STENT, NON-CORONARY, TEMPORARY	
PROBE/NEEDLE, CRYOABLATION	
PACEMAKER, DUAL CHAMBER, NON R	
PACEMAKER, SINGLE CHAMBER, NON	
PACEMAKER, OTHER THAN SINGLE O	
PROSTHESIS, PENILE, NON-INFLAT	
CATHETER, TRANSLUMINAL ANGIOPL	
IMPLANTABLE WIRELESS PULMONARY	
STENT, NON-CORONARY, TEMPORARY	
INFUSION PUMP, NON-PROGRAMMABL	
CATHETER, SUPRAPUBIC/CYSTOSCOP	
CATHETER, OCCLUSION	
INTRODUCER/SHEATH, OTHER THAN	
CATHETER, ELECTROPHYSIOLOGY, D	
REPAIR DEVICE, URINARY, INCONT	
BRACHYTHERAPY SOURCE, NON-STRA	
BRACHYTHERAPY SOURCE, NON-STRA	
BRACHYTHERAPY LINEAR SOURCE, N	
BRACHYTHERAPY SOURCE, NON-STRA	
BRACHYTHERAPY SOURCE, STRANDED	
BRACHYTHERAPY SOURCE, NON-STRA	
BRACHYTHERAPY SOURCE, STRANDED	
BRACHYTHERAPY SOURCE, NON-STRA	
BRACHYTHERAPY SOURCE, STRANDED	
BRACHYTHERAPY SOURCE, NON-STRA	
BRACHYTHERAPY SOURCE, CESIUM-1	
BRACHYTHERAPY PLANAR SOURCE, P	
	PROBE, PERCUTANEOUS LUMBAR DIS SEALANT, PULMONARY, LIQUID BRACHYTHERAPY SOURCE, NON-STRA STENT, NON-CORONARY, TEMPORARY PROBENEEDLE, CRYOABLATION PACEMAKER, DUAL CHAMBER, NON R PACEMAKER, SINGLE CHAMBER, NON R PACEMAKER, SINGLE CHAMBER, NON STENT, NON-CORONARY, TEMPORARY INFUSION PUMP, NON-PROGRAMMABL CATHETER, SUPRAPUBIC/CYSTOSCOP CATHETER, SUPRAPUBIC/CYSTOSCOP CATHETER, SUPRAPUBIC/CYSTOSCOP CATHETER, ELECTROPHYSIOLOGY, D REPAIR DEVICE, URINARY, INCONT BRACHYTHERAPY SOURCE, NON-STRA BRACHYTHERAPY SOURCE, NON-STRA BRACHYTHERAPY SOURCE, NON-STRA BRACHYTHERAPY SOURCE, STRANDED BRACHYTHERAPY SOURCE, CESIUM-1

<u>MEDICAID FEE FOR SERVICES: UPDATE DECEMBER 1, 2020</u> Codes for Out-Patient Hospital Billing ONLY

SHORT - DESCRIPTION	
BRACHYTHERAPY SOURCE, STRANDED	
BRACHYTHERAPY SOURCE, NON-STRA	
APPLICATION OF LOW COST SKIN S	
APPLICATION OF LOW COST SKIN S	
APPLICATION OF LOW COST SKIN S	
APPLICATION OF LOW COST SKIN S	
APPLICATION OF LOW COST SKIN S	
APPLICATION OF LOW COST SKIN S	
APPLICATION OF LOW COST SKIN S	
APPLICATION OF LOW COST SKIN S	
MAGNETIC RESONANCE ANGIOGRAPHY	
MAGNETIC RESONANCE ANGIOGRAPHY	
MAGNETIC RESONANCE ANGIOGRAPHY	
MAGNETIC RESONANCE IMAGING WIT	
MAGNETIC RESONANCE ANGIOGRAPHY	
TRANSTHORACIC ECHOCARDIOGRAPHY	
	BRACHYTHERAPY SOURCE, STRANDED BRACHYTHERAPY SOURCE, NON-STRA APPLICATION OF LOW COST SKIN S MAGNETIC RESONANCE ANGIOGRAPHY MAGNETIC RESONANCE ANGIOGRAPHY MAGNETIC RESONANCE ANGIOGRAPHY MAGNETIC RESONANCE ANGIOGRAPHY MAGNETIC RESONANCE IMAGING WIT MAGNETIC RESONANCE IMAGING WIT MAGNETIC RESONANCE IMAGING WIT MAGNETIC RESONANCE IMAGING WIT MAGNETIC RESONANCE ANGIOGRAPHY TRANSTHORACIC ECHOCARDIOGRAPHY TRANSTHORACIC ECHOCARDIOGRAPHY TRANSTHORACIC ECHOCARDIOGRAPHY TRANSTHORACIC ECHOCARDIOGRAPHY

<u>MEDICAID FEE FOR SERVICES: UPDATE DECEMBER 1, 2020</u> Codes for Out-Patient Hospital Billing ONLY

CPT/HCPCS	SHORT - DESCRIPTION
C8925	TRANSESOPHAGEAL ECHOCARDIOGRAP
C8926	TRANSESOPHAGEAL ECHOCARDIOGRAP
C8927	TRANSESOPHAGEAL ECHOCARDIOGRAP
C8928	TRANSTHORACIC ECHOCARDIOGRAPHY
C8929	TRANSTHORACIC ECHOCARDIOGRAPHY
C8930	TRANSTHORACIC ECHOCARDIOGRAPHY
C8931	MAGNETIC RESONANCE ANGIOGRAPHY
C8932	MAGNETIC RESONANCE ANGIOGRAPHY
C8933	MAGNETIC RESONANCE ANGIOGRAPHY
C8934	MAGNETIC RESONANCE ANGIOGRAPHY
C8935	MAGNETIC RESONANCE ANGIOGRAPHY
C8936	MAGNETIC RESONANCE ANGIOGRAPHY
C8957	IV INFUS FOR THER/DIAG PROLONG
C9021	INJECTION, OBINUTUZUMAB, 10 MG
C9041	INJECTION, COAGULATION FACTOR
C9047	INJECTION, CAPLACIZUMAB-YHDP,
C9054	INJECTION, LEFAMULIN (XENLETA)
C9055	INJECTION, BREXANOLONE, 1MG
C9059	INJECTION, MELOXICAM, 1 MG
C9061	INJECTION, TEPROTUMUMAB-TRBW,
C9063	INJECTION, EPTINEZUMAB-JJMR, 1
C9113	INJECTION, PANTOPRAZOLE SODIUM
C9122	MOMETASONE FUROATE SINUS IMPLA
C9132	PROTHROMBIN COMPLEX CONCENTRAT
C9248	INJECTION, CLEVIDIPINE BUTYRAT
C9250	HUMAN PLASMA FIBRIN SEALANT 2
C9285	LIDOCAINE 70 MG/TETRACAINE 70
C9290	INJECTION, BUPIVACAINE LIPOSOM
C9293	INJECTION, GLUCARPIDASE, 10 UN
C9352	MICROPOROUS COLLAGEN IMPLANTAB

<u>MEDICAID FEE FOR SERVICES: UPDATE DECEMBER 1, 2020</u> Codes for Out-Patient Hospital Billing ONLY

CPT/HCPCS	SHORT - DESCRIPTION	
C9353	MICROPOROUS COLLAGEN IMPLANTAB	
C9354	ACELLULAR PERICARD TISSUE MATR	
C9355	COLLAGEN NERVE CUFF PER 0.5 CE	
C9356	TENDON, POROUS MATRIX OF CROSS	
C9358	DERMAL SUBSTITUTE, NATIVE, NON	
C9359	POROUS PURIFIED COLLAGEN MATRI	
C9360	DERMAL SUBSTITUTE, NATIVE, NON	
C9361	COLLAGEN MATRIX NERVE WRAP PER	
C9362	POROUS PURIFIED COLLAGEN MATRI	
C9363	SKIN SUBSTITUTE, INTEGRA MESHE	
C9364	PORCINE IMPLANT, PERMACOL, PER	
C9367	SKIN SUBSTITUTE, ENDOFORM DERM	
C9399	UNCLASSIFIED DRUGS OR BIOLOGIC	
C9441	INJECTION, FERRIC CARBOXYMALTO	
C9460	INJECTION, CANGRELOR, 1 MG	
C9600	PERCUTANEOUS TRANSCATHETER PLA	
C9601	PERCUTANEOUS TRANSCATHETER PLA	
C9602	PERCUTANEOUS TRANSLUMINAL CORO	
C9603	PERCUTANEOUS TRANSLUMINAL CORO	
C9604	PERCUTANEOUS TRANSLUMINAL REVA	
C9605	PERCUTANEOUS TRANSLUMINAL REVA	
C9606	PERCUTANEOUS TRANSLUMINAL REVA	
C9607	PERCUTANEOUS TRANSLUMINAL REVA	
C9608	PERCUTANEOUS TRANSLUMINAL REVA	
C9716	CREATIONS OF THERMAL ANAL LESI	
C9725	PLACEMENT OF ENDORECTAL INTRAC	
C9726	PLACEMENT & REMOV APPLIC IN BR	
C9727	INSERTION OF IMPLANTS INTO SOF	
C9728	PLACEMENT OF INTERSTITIAL DEVI	
C9733	NON-OPHTHALMIC FLUORESCENT VAS	

<u>MEDICAID FEE FOR SERVICES: UPDATE DECEMBER 1, 2020</u> Codes for Out-Patient Hospital Billing ONLY

CPT/HCPCS	SHORT - DESCRIPTION	
C9735	ANOSCOPY: WITH DIRECTED SUBMUC	
C9739	CYSTOURETHROSCOPY, W/TRANSPROS	
C9740	CYSTOURETHROSCOPY W/TRANSPROST	
C9756	INTRAOPERATIVE NEAR-INFRARED F	
C9757	LAMINOTOMY (HEMILAMINECTOMY),	
C9758	BLINDED PROCEDURE FOR NYHA CLA	
C9759	TRANSCATHETER INTRAOPERATIVE B	
C9760	NON-RANDOMIZED, NON-BLINDED PR	
C9762	CARDIAC MAGNETIC RESONANCE IMA	
C9763	CARDIAC MAGNETIC RESONANCE IMA	
C9764	REVASCULARIZATION, ENDOVASCULA	
C9765	REVASCULARIZATION, ENDOVASCULA	
C9766	REVASCULARIZATION, ENDOVASCULA	
G0008	INJECT INFLUENZA VACCINE	
G0009	INJECT PNEUMOCOCCAL VACCINE	
G0108	DIABETES OP SELF MNGMT TX SERV	
G0109	DIABETES SELF MNGMT SERV GRP S	
G0123	SCR CYTO C/V THIN PREP AUTO	
G0129	OCCUPATIONAL THERAPY SERVICES	
G0175	SCHEDULED INTERDISCIPLINARY TE	
G0176	ACTIVITY THERAPY, SUCH AS MUSI	
G0177	TRAINING AND EDUCATIONAL SERVI	
G0239	THERAPEUTIC PROCEDURES TO IMPR	
G0269	PLACEMENT OF OCCLUSIVE DEVICE	
G0283	ELECTRICAL STIMULATION (UNATTE	
G0339	IMAGE-GUIDED ROBOTIC LINEAR AC	
G0340	IMAGE-GUIDED ROBOTIC LINEAR AC	
G0378	HOSPITAL OBSERVATION SERVICE,	
G0410	GROUP PSYCHOTHERAPY OTHER THAN	
G0411	INTERACTIVE GROUP PSYCHOTHERAP	

<u>MEDICAID FEE FOR SERVICES: UPDATE DECEMBER 1, 2020</u> Codes for Out-Patient Hospital Billing ONLY

CPT/HCPCS	SHORT - DESCRIPTION
G0463	HOSPITAL OUTPATIENT CLINIC VIS
G9017	AMANTADINE HYDROCHLORIDE, ORAL
G9147	OUTPATIENT INTRAVENOUS INSULIN
J7336	CAPSAICIN 8% PATCH, PER SQUARE
J7512	PREDNISONE, IMMEDIATE RELEASE
J7599	IMMUNOSUPPRESSIVE DRUG, NOT OT
J7699	NOC DRUGS, INHALATION SOLUTION
J8540	DEXAMETHASONE, ORAL, 0.25 MG
J8540	DEXAMETHASONE, ORAL, 0.25 MG
P9604	TRAVEL ALLOWANCE ONE WAY IN CO
Q0091	SCREENING PAPANICOLAOU SMEAR:
Q0092	SET UP PORTABLE XRAY
Q0162	ONDANSETRON 1 MG. ORAL
Q4100	SKIN SUBSTITUTE, NOT OTHERWISE
Q4101	APLIGRAF, PER SQUARE CENTIMETE
Q4103	OASIS BURN MATRIX, PER SQUARE
Q4103	OASIS BURN MATRIX, PER SQUARE
Q4104	INTEGRA BILAYER MATRIX WOUND D
Q4104	INTEGRA BILAYER MATRIX WOUND D
Q4106	DERMAGRAFT, PER SQUARE CENTIME
Q4107	GRAFTJACKET, PER SQUARE CENTIM
Q4107	GRAFTJACKET, PER SQUARE CENTIM
Q4108	INTEGRA MATRIX, PER SQUARE CEN
Q4108	INTEGRA MATRIX, PER SQUARE CEN
Q4110	PRIMATRIX, PER SQUARE CENTIMET
Q4110	PRIMATRIX, PER SQUARE CENTIMET
Q4111	GAMMAGRAFT, PER SQUARE CENTIME
Q4111	GAMMAGRAFT, PER SQUARE CENTIME
Q4112	CYMETRA, INJECTABLE, 1CC
Q4112	CYMETRA, INJECTABLE, 1CC

<u>MEDICAID FEE FOR SERVICES: UPDATE DECEMBER 1, 2020</u> Codes for Out-Patient Hospital Billing ONLY

SHORT - DESCRIPTION	
GRAFTJACKET XPRESS, INJECTABLE	
GRAFTJACKET XPRESS, INJECTABLE	
INTEGRA FLOWABLE WOUND MATRIX,	
INTEGRA FLOWABLE WOUND MATRIX,	
ALLODERM, PER SQUARE CENTIMETE	
DERMACELL, DERMACELL AWM OR DE	
ALLOSKIN RT, PER SQUARE CENTIM	
OASIS ULTRA TRI-LAYER WOUND MA	
ARTHROFLEX, PER SQUARE CENTIME	
MEMODERM, DERMASPAN, TRANZGRAF	
TALYMED, PER SQUARE CENTIMETER	
FLEX HD, ALLOPATCH HD, OR MATR	
STRATTICE TM, PER SQUARE CENTI	
HMATRIX, PER SQUARE CENTIMETER	
MEDISKIN, PER SQUARE CENTIMETE	
EZ-DERM, PER SQUARE CENTIMETER	
ALLOWRAP DS OR DRY, PER SQUARE	
AMNIOBAND OR GUARDIAN, PER SQU	
DERMAPURE, PER SQUARE CENTIMET	
DERMAVEST AND PLURIVEST, PER S	
BIOVANCE, PER SQUARE CENTIMETE	
NEOXFLO OR CLARIXFLO, 1 MG	
NEOX 100 OR CLARIX 100, PER SQ	
REVITALON, PER SQUARE CENTIMET	
HIGH OSMOLAR CONTRAST MAT 300-	
HIGH OSMOLAR CONTRAST MAT 300-	
PHAKIC INTRAOCULAR LENS FOR CO	
RADIATION THERAPY DELIVERY	
RADIATION THERAPY DELIVERY	
GUIDANCE FOR LOCALIZATION OF T	
3	GRAFTJACKET XPRESS, INJECTABLE GRAFTJACKET XPRESS, INJECTABLE INTEGRA FLOWABLE WOUND MATRIX, INTEGRA FLOWABLE WOUND MATRIX, INTEGRA FLOWABLE WOUND MATRIX, ALLODERM, PER SQUARE CENTIMETE DERMACELL, DERMACELL AWM OR DE ALLOSKIN RT, PER SQUARE CENTIM OASIS ULTRA TRI-LAYER WOUND MA ARTHROFLEX, PER SQUARE CENTIME MEMODERM, DERMASPAN, TRANZGRAF TALYMED, PER SQUARE CENTIMETER FLEX HD, ALLOPATCH HD, OR MATR STRATTICE TM, PER SQUARE CENTIMETE MEDISKIN, PER SQUARE CENTIMETE MEDISKIN, PER SQUARE CENTIMETE ALLOWAPD DS OR DRY, PER SQUARE AMNIOBAND OR GUARDIAN, PER SQU DERMAPURE, PER SQUARE CENTIMET DERMAVEST AND PLURIVEST, PER S BIOVANCE, PER SQUARE CENTIMETE NEOXELO OR CLARIXFLO, 1 MG NEOX 100 OR CLARIX 100, PER SQ REVITALON, PER SQUARE CENTIMET HIGH OSMOLAR CONTRAST MAT 300- PHAKIC INTRAOCULAR LENS FOR CO RADIATION THERAPY DELIVERY

<u>MEDICAID FEE FOR SERVICES: UPDATE DECEMBER 1, 2020</u> Codes for Out-Patient Hospital Billing ONLY

CPT/HCPCS	SHORT - DESCRIPTION	
90785	INTERACTIVE COMPLEXITY (LIST S	
90802	INTERACT PSYCH DIAG INTERV EXA	
90840	PSYCHOTHERAPY FOR CRISIS: EACH	
90849	MULTI-FAMILY PSYCHOTHERAPY.,	
90849	MULTI-FAMILY PSYCHOTHERAPY SUD	
90863	PHARMACOLOGIC MANAGEMENT, INCL	
90885	PSYCHIATRIC EVALUATION OF HOSP	
90889	PREPARATION OF REPORT OF PATIE	
90901	BIOFEEDBACK TRAINING BY ANY MO	
92508	GROUP TREATMENT OF SPEECH, LAN	
92546	TORSION SWING TEST, WITH RECOR	
92556	SPEECH AUDIOMETRY,THRESHOLD/DI	
92558	EVOKED OTOACOUSTIC EMISSIONS,	
92579	VISUAL REINFORCEMENT AUDIOMETR	
92605	EVAL RX NON-SPEECH GEN AUG COM	
92606	THERAP SERV NON-SPEECH-GENERAT	
92618	EVALUATION FOR PRESCRIPTION OF	
93786	AMBULATORY BLOOD PRESSURE MONI	
93788	AMBULATORY BLOOD PRESSURE MONI	
93797	PHYSICIAN OR OTHER QUALIFIED H	
94640	NONPRESSURED INHALATION TX	
94660	CPAP,INITATION/MANAGEMENT	
94667	MANIPULATION CHEST WALLINIT	
97010	P.T. TX TO 1 AREA:HOT/COLD PAC	
97012	P.T. TX-1 AREA:TRACTION,MECHAN	
97014	APPLICATION OF ELECTRICAL STIM	
97016	P.T. TX-1 AREA:PNEUMATIC DEVIC	
97018	P.T. TX-1 AREA:PARAFFIN BATH	
97022	P.T. TX-1 AREA: WHIRLPOOL	
97024	P.T. TX-1 AREA: DIATHERMY	

<u>MEDICAID FEE FOR SERVICES: UPDATE DECEMBER 1, 2020</u> Codes for Out-Patient Hospital Billing ONLY

CPT/HCPCS	SHORT - DESCRIPTION
97026	P.T. TX-1 AREA: INFRARED
97028	PHY.MED.TX TO 1 AREA:ULTRAVIOL
97032	APPLICATION OF ELECTRICAL STIM
97033	APPLICATION OF MEDICATION THRO
97034	THERAPEUTIC HOT AND COLD BATHS
97035	APPLICATION OF ULTRASOUND TO 1
97036	PHYSICAL THERAPY TREATMENT TO
97039	UNLISTED MODALITY (SPECIFY)
97113	WATER POOL THERAPY WITH THERAP
97116	WALKING TRAINING TO 1 OR MORE
97124	THERAPEUTIC MASSAGE TO 1 OR MO
97139	UNLISTED P.T. PROCEDURE (SPECI
97140	MANUAL (PHYSICAL) THERAPY TECH
97150	GROUP THERAPEUTIC PROCEDURE
97533	SENSORY TECHNIQUE TO ENHANCE P
97537	COMMUNITY OR WORK REINTEGRATIO
97542	WHEELCHAIR MANAGEMENT, EACH 15
97545	WORK HARDENING OR CONDITIONING
97546	WORK HARDENING/CONDITION EA AD
97602	REM REVIT TISSUE NON SELECT DE
97750	PHYSICAL PERFORMANCE TEST OR M
97755	ASSISTIVE TECHNOLOGY ASSESSMEN
97760	TRAINING IN USE OF ORTHOTICS (
97761	TRAINING IN USE OF PROSTHESIS
99078	PHYSICIAN OR OTHER QUALIFIED H
99152	MODERATE SEDATION SERVICES BY