

Provider Education

New England Medicare Part B



2009 HCPCS Additions

Code	Modifier	Short Description	Effective Date
4274F		INFLUENZA IMMUNIZATION ADMINISTERED OR PREVIOUSLY RECEIVED (HIV)	01/01/2009
4275F		POTENT ANTIRETROVIRAL THERAPY PRESCRIBED (HIV)5	01/01/2009
4279F		PNEUMOCYSTIS JIROVECI PNEUMONIA PROPHYLAXIS PRESCRIBED (HIV)5	01/01/2009
4280F		PNEUMOCYSTIS JIROVECI PNEUMONIA PROPHYLAXIS PRESCRIBED WITHIN 3 MONTHS OF LOW	01/01/2009
4290F		PATIENT SCREENED FOR INJECTION DRUG USE (HIV)	01/01/2009
4293F		PATIENT SCREENED FOR HIGH-RISK SEXUAL BEHAVIOR (HIV)	01/01/2009
4300F		PATIENT RECEIVING WARFARIN THERAPY FOR NONVALVULAR ATRIAL FIBRILLATION OR	01/01/2009
4301F		PATIENT NOT RECEIVING WARFARIN THERAPY FOR NONVALVULAR ATRIAL FIBRILLATION OR	01/01/2009
4305F		PATIENT EDUCATION REGARDING APPROPRIATE FOOT CARE AND DAILY INSPECTION OF THE	01/01/2009
4306F		PATIENT COUNSELED REGARDING PSYCHOSOCIAL AND PHARMACOLOGIC TREATMENT OPTIONS	01/01/2009
4320F		PATIENT COUNSELED REGARDING PSYCHOSOCIAL AND PHARMACOLOGIC TREATMENT OPTIONS	01/01/2009
43273		ENDOSCOPIC CANNULATION OF PAPANILIA WITH DIRECT VISUALIZATION OF COMMON BILE	01/01/2009
43279		LAPAROSCOPY, SURGICAL, ESOPHAGOMYOTOMY (HELLER TYPE), WITH FUNDOPLASTY, WHEN	01/01/2009
46930		DESTRUCTION OF INTERNAL HEMORRHOID(S) BY THERMAL ENERGY (EG, INFRARED	01/01/2009
49652		LAPAROSCOPY, SURGICAL, REPAIR, VENTRAL, UMBILICAL, SPIGELIAN OR EPIGASTRIC	01/01/2009
49653		LAPAROSCOPY, SURGICAL, REPAIR, VENTRAL, UMBILICAL, SPIGELIAN OR EPIGASTRIC	01/01/2009
49654		LAPAROSCOPY, SURGICAL, REPAIR, INCISIONAL HERNIA (INCLUDES MESH INSERTION, WHEN	01/01/2009
49655		LAPAROSCOPY, SURGICAL, REPAIR, INCISIONAL HERNIA (INCLUDES MESH INSERTION, WHEN	01/01/2009
49656		LAPAROSCOPY, SURGICAL, REPAIR, RECURRENT INCISIONAL HERNIA (INCLUDES MESH	01/01/2009
49657		LAPAROSCOPY, SURGICAL, REPAIR, RECURRENT INCISIONAL HERNIA (INCLUDES MESH	01/01/2009
5100F		POTENTIAL RISK FOR FRACTURE COMMUNICATED TO THE REFERRING PHYSICIAN WITHIN 24	01/01/2009
55706		BIOPSIES, PROSTATE, NEEDLE, TRANSPERINEAL, STEREOTACTIC TEMPLATE GUIDED	01/01/2009
61796		STEREOTACTIC RADIOSURGERY (PARTICLE BEAM, GAMMA RAY, OR LINEAR ACCELERATOR); 1	01/01/2009
61797		STEREOTACTIC RADIOSURGERY (PARTICLE BEAM, GAMMA RAY, OR LINEAR ACCELERATOR);	01/01/2009
61798		STEREOTACTIC RADIOSURGERY (PARTICLE BEAM, GAMMA RAY, OR LINEAR ACCELERATOR); 1	01/01/2009
61799		STEREOTACTIC RADIOSURGERY (PARTICLE BEAM, GAMMA RAY, OR LINEAR ACCELERATOR);	01/01/2009
61800		APPLICATION OF STEREOTACTIC HEADFRAME FOR STEREOTACTIC RADIOSURGERY (LIST	01/01/2009
62267		PERCUTANEOUS ASPIRATION WITHIN THE NUCLEUS PULPOSUS, INTERVERTEBRAL DISC, OR	01/01/2009
63620		STEREOTACTIC RADIOSURGERY (PARTICLE BEAM, GAMMA RAY, OR LINEAR ACCELERATOR); 1	01/01/2009
63621		STEREOTACTIC RADIOSURGERY (PARTICLE BEAM, GAMMA RAY, OR LINEAR ACCELERATOR);	01/01/2009
64455		INJECTION(S), ANESTHETIC AGENT AND/OR STEROID, PLANTAR COMMON DIGITAL NERVE(S)	01/01/2009
64632		DESTRUCTION BY NEUROLYTIC AGENT; PLANTAR COMMON DIGITAL NERVE	01/01/2009
65756		KERATOPLASTY (CORNEAL TRANSPLANT); ENDOTHELIAL	01/01/2009
65757		BACKBENCH PREPARATION OF CORNEAL ENDOTHELIAL ALLOGRAFT PRIOR TO TRANSPLANTATION	01/01/2009
77785	TC/26	REMOTE AFTERLOADING HIGH DOSE RATE RADIONUCLIDE BRACHYTHERAPY; 1 CHANNEL	01/01/2009
77786	TC/26	REMOTE AFTERLOADING HIGH DOSE RATE RADIONUCLIDE BRACHYTHERAPY; 2-12 CHANNELS	01/01/2009
77787	TC/26	REMOTE AFTERLOADING HIGH DOSE RATE RADIONUCLIDE BRACHYTHERAPY; OVER 12 CHANNELS	01/01/2009
78808		INJECTION PROCEDURE FOR RADIOPHARMACEUTICAL LOCALIZATION BY NON-IMAGING PROBE	01/01/2009
83876		MYELOPEROXIDASE (MPO)	01/01/2009
83951		ONCOPROTEIN; DES-GAMMA-CARBOXY-PROTHROMBIN (DCP)	01/01/2009
85397		COAGULATION AND FIBRINOLYSIS, FUNCTIONAL ACTIVITY, NOT OTHERWISE SPECIFIED (EG,	01/01/2009
87905		INFECTIOUS AGENT ENZYMATIC ACTIVITY OTHER THAN VIRUS (EG, SIALIDASE ACTIVITY IN	01/01/2009

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88720		BILIRUBIN, TOTAL, TRANSCUTANEOUS	01/01/2009
88740		HEMOGLOBIN, QUANTITATIVE, TRANSCUTANEOUS, PER DAY; CARBOXYHEMOGLOBIN	01/01/2009
88741		HEMOGLOBIN, QUANTITATIVE, TRANSCUTANEOUS, PER DAY; METHEMOGLOBIN	01/01/2009
90650		HUMAN PAPILLOMA VIRUS (HPV) VACCINE, TYPES 16, 18, BIVALENT, 3 DOSE SCHEDULE,	01/01/2009
90681		ROTA VIRUS VACCINE, HUMAN, ATTENUATED, 2 DOSE SCHEDULE, LIVE, FOR ORAL USE	01/01/2009
90696		DIPHTHERIA, TETANUS TOXOIDS, ACELLULAR PERTUSSIS VACCINE AND POLIOVIRUS	01/01/2009
90738		JAPANESE ENCEPHALITIS VIRUS VACCINE, INACTIVATED, FOR INTRAMUSCULAR USE	01/01/2009
90951		END-STAGE RENAL DISEASE (ESRD) RELATED SERVICES MONTHLY, FOR PATIENTS YOUNGER	01/01/2009
90952		END-STAGE RENAL DISEASE (ESRD) RELATED SERVICES MONTHLY, FOR PATIENTS YOUNGER	01/01/2009
90953		END-STAGE RENAL DISEASE (ESRD) RELATED SERVICES MONTHLY, FOR PATIENTS YOUNGER	01/01/2009
90954		END-STAGE RENAL DISEASE (ESRD) RELATED SERVICES MONTHLY, FOR PATIENTS 2-11	01/01/2009
90955		END-STAGE RENAL DISEASE (ESRD) RELATED SERVICES MONTHLY, FOR PATIENTS 2-11	01/01/2009
90956		END-STAGE RENAL DISEASE (ESRD) RELATED SERVICES MONTHLY, FOR PATIENTS 2-11	01/01/2009
90957		END-STAGE RENAL DISEASE (ESRD) RELATED SERVICES MONTHLY, FOR PATIENTS 12-19	01/01/2009
90958		END-STAGE RENAL DISEASE (ESRD) RELATED SERVICES MONTHLY, FOR PATIENTS 12-19	01/01/2009
90959		END-STAGE RENAL DISEASE (ESRD) RELATED SERVICES MONTHLY, FOR PATIENTS 12-19	01/01/2009
90960		END-STAGE RENAL DISEASE (ESRD) RELATED SERVICES MONTHLY, FOR PATIENTS 20 YEARS	01/01/2009
90961		END-STAGE RENAL DISEASE (ESRD) RELATED SERVICES MONTHLY, FOR PATIENTS 20 YEARS	01/01/2009
90962		END-STAGE RENAL DISEASE (ESRD) RELATED SERVICES MONTHLY, FOR PATIENTS 20 YEARS	01/01/2009
90963		END-STAGE RENAL DISEASE (ESRD) RELATED SERVICES FOR HOME DIALYSIS PER FULL	01/01/2009
90964		END-STAGE RENAL DISEASE (ESRD) RELATED SERVICES FOR HOME DIALYSIS PER FULL	01/01/2009
90965		END-STAGE RENAL DISEASE (ESRD) RELATED SERVICES FOR HOME DIALYSIS PER FULL	01/01/2009
90966		END-STAGE RENAL DISEASE (ESRD) RELATED SERVICES FOR HOME DIALYSIS PER FULL	01/01/2009
90967		END-STAGE RENAL DISEASE (ESRD) RELATED SERVICES FOR DIALYSIS LESS THAN A FULL	01/01/2009
90968		END-STAGE RENAL DISEASE (ESRD) RELATED SERVICES FOR DIALYSIS LESS THAN A FULL	01/01/2009
90969		END-STAGE RENAL DISEASE (ESRD) RELATED SERVICES FOR DIALYSIS LESS THAN A FULL	01/01/2009
90970		END-STAGE RENAL DISEASE (ESRD) RELATED SERVICES FOR DIALYSIS LESS THAN A FULL	01/01/2009
93228		WEARABLE MOBILE CARDIOVASCULAR TELEMETRY WITH ELECTROCARDIOGRAPHIC RECORDING,	01/01/2009
93229		WEARABLE MOBILE CARDIOVASCULAR TELEMETRY WITH ELECTROCARDIOGRAPHIC RECORDING,	01/01/2009
93279	TC/26	PROGRAMMING DEVICE EVALUATION WITH ITERATIVE ADJUSTMENT OF THE IMPLANTABLE	01/01/2009
93280	TC/26	PROGRAMMING DEVICE EVALUATION WITH ITERATIVE ADJUSTMENT OF THE IMPLANTABLE	01/01/2009
93281	TC/26	PROGRAMMING DEVICE EVALUATION WITH ITERATIVE ADJUSTMENT OF THE IMPLANTABLE	01/01/2009
93282	TC/26	PROGRAMMING DEVICE EVALUATION WITH ITERATIVE ADJUSTMENT OF THE IMPLANTABLE	01/01/2009
93283	TC/26	PROGRAMMING DEVICE EVALUATION WITH ITERATIVE ADJUSTMENT OF THE IMPLANTABLE	01/01/2009
93284	TC/26	PROGRAMMING DEVICE EVALUATION WITH ITERATIVE ADJUSTMENT OF THE IMPLANTABLE	01/01/2009
93285	TC/26	PROGRAMMING DEVICE EVALUATION WITH ITERATIVE ADJUSTMENT OF THE IMPLANTABLE	01/01/2009
93286	TC/26	PERI-PROCEDURAL DEVICE EVALUATION AND PROGRAMMING OF DEVICE SYSTEM PARAMETERS	01/01/2009
93287	TC/26	PERI-PROCEDURAL DEVICE EVALUATION AND PROGRAMMING OF DEVICE SYSTEM PARAMETERS	01/01/2009
93288	TC/26	INTERROGATION DEVICE EVALUATION (IN PERSON) WITH PHYSICIAN ANALYSIS, REVIEW AND	01/01/2009
93289	TC/26	INTERROGATION DEVICE EVALUATION (IN PERSON) WITH PHYSICIAN ANALYSIS, REVIEW AND	01/01/2009

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93290	TC/26	INTERROGATION DEVICE EVALUATION (IN PERSON) WITH PHYSICIAN ANALYSIS, REVIEW AND	01/01/2009
93291	TC/26	INTERROGATION DEVICE EVALUATION (IN PERSON) WITH PHYSICIAN ANALYSIS, REVIEW AND	01/01/2009
93292	TC/26	INTERROGATION DEVICE EVALUATION (IN PERSON) WITH PHYSICIAN ANALYSIS, REVIEW AND	01/01/2009
93293	TC/26	TRANSTELEPHONIC RHYTHM STRIP PACEMAKER EVALUATION(S) SINGLE, DUAL, OR MULTIPLE	01/01/2009
93294		INTERROGATION DEVICE EVALUATION(S) (REMOTE), UP TO 90 DAYS; SINGLE, DUAL, OR	01/01/2009
93295		INTERROGATION DEVICE EVALUATION(S) (REMOTE), UP TO 90 DAYS; SINGLE, DUAL, OR	01/01/2009
93296		INTERROGATION DEVICE EVALUATION(S) (REMOTE), UP TO 90 DAYS; SINGLE, DUAL, OR	01/01/2009
93297		INTERROGATION DEVICE EVALUATION(S), (REMOTE) UP TO 30 DAYS; IMPLANTABLE	01/01/2009
93298		INTERROGATION DEVICE EVALUATION(S), (REMOTE) UP TO 30 DAYS; IMPLANTABLE LOOP	01/01/2009
93299		INTERROGATION DEVICE EVALUATION(S), (REMOTE) UP TO 30 DAYS; IMPLANTABLE	01/01/2009
93306	TC/26	ECHOCARDIOGRAPHY, TRANSTHORACIC, REAL-TIME WITH IMAGE DOCUMENTATION (2D),	01/01/2009
93351		ECHOCARDIOGRAPHY, TRANSTHORACIC, REAL-TIME WITH IMAGE DOCUMENTATION (2D),	01/01/2009
93352		USE OF ECHOCARDIOGRAPHIC CONTRAST AGENT DURING STRESS ECHOCARDIOGRAPHY (LIST	01/01/2009
95803	TC/26	ACTIGRAPHY TESTING, RECORDING, ANALYSIS, INTERPRETATION, AND REPORT (MINIMUM OF	01/01/2009
95992		CANALITH REPOSITIONING PROCEDURE(S) (EG, EPLEY MANEUVER, SEMONT MANEUVER), PER	01/01/2009
96360		INTRAVENOUS INFUSION, HYDRATION; INITIAL, 31 MINUTES TO 1 HOUR	01/01/2009
96361		INTRAVENOUS INFUSION, HYDRATION; EACH ADDITIONAL HOUR (LIST SEPARATELY IN	01/01/2009
96365		INTRAVENOUS INFUSION, FOR THERAPY, PROPHYLAXIS, OR DIAGNOSIS (SPECIFY SUBSTANCE	01/01/2009
96366		INTRAVENOUS INFUSION, FOR THERAPY, PROPHYLAXIS, OR DIAGNOSIS (SPECIFY SUBSTANCE	01/01/2009
96367		INTRAVENOUS INFUSION, FOR THERAPY, PROPHYLAXIS, OR DIAGNOSIS (SPECIFY SUBSTANCE	01/01/2009
96368		INTRAVENOUS INFUSION, FOR THERAPY, PROPHYLAXIS, OR DIAGNOSIS (SPECIFY SUBSTANCE	01/01/2009
96369		SUBCUTANEOUS INFUSION FOR THERAPY OR PROPHYLAXIS (SPECIFY SUBSTANCE OR DRUG);	01/01/2009
96370		SUBCUTANEOUS INFUSION FOR THERAPY OR PROPHYLAXIS (SPECIFY SUBSTANCE OR DRUG);	01/01/2009
96371		SUBCUTANEOUS INFUSION FOR THERAPY OR PROPHYLAXIS (SPECIFY SUBSTANCE OR DRUG);	01/01/2009
96372		THERAPEUTIC, PROPHYLACTIC, OR DIAGNOSTIC INJECTION (SPECIFY SUBSTANCE OR DRUG);	01/01/2009
96373		THERAPEUTIC, PROPHYLACTIC, OR DIAGNOSTIC INJECTION (SPECIFY SUBSTANCE OR DRUG);	01/01/2009
96374		THERAPEUTIC, PROPHYLACTIC, OR DIAGNOSTIC INJECTION (SPECIFY SUBSTANCE OR DRUG);	01/01/2009
96375		THERAPEUTIC, PROPHYLACTIC, OR DIAGNOSTIC INJECTION (SPECIFY SUBSTANCE OR DRUG);	01/01/2009
96376		THERAPEUTIC, PROPHYLACTIC, OR DIAGNOSTIC INJECTION (SPECIFY SUBSTANCE OR DRUG);	01/01/2009
96379		UNLISTED THERAPEUTIC, PROPHYLACTIC, OR DIAGNOSTIC INTRAVENOUS OR INTRA-ARTERIAL	01/01/2009
99460		INITIAL HOSPITAL OR BIRTHING CENTER CARE, PER DAY, FOR EVALUATION AND	01/01/2009
99461		INITIAL CARE, PER DAY, FOR EVALUATION AND MANAGEMENT OF NORMAL NEWBORN INFANT	01/01/2009
99462		SUBSEQUENT HOSPITAL CARE, PER DAY, FOR EVALUATION AND MANAGEMENT OF NORMAL	01/01/2009
99463		INITIAL HOSPITAL OR BIRTHING CENTER CARE, PER DAY, FOR EVALUATION AND	01/01/2009

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99464		ATTENDANCE AT DELIVERY (WHEN REQUESTED BY THE DELIVERING PHYSICIAN) AND INITIAL	01/01/2009
99465		DELIVERY/BIRTHING ROOM RESUSCITATION, PROVISION OF POSITIVE PRESSURE	01/01/2009
99466		CRITICAL CARE SERVICES DELIVERED BY A PHYSICIAN, FACE-TO-FACE, DURING AN	01/01/2009
99467		CRITICAL CARE SERVICES DELIVERED BY A PHYSICIAN, FACE-TO-FACE, DURING AN	01/01/2009
99468		INITIAL INPATIENT NEONATAL CRITICAL CARE, PER DAY, FOR THE EVALUATION AND	01/01/2009
99469		SUBSEQUENT INPATIENT NEONATAL CRITICAL CARE, PER DAY, FOR THE EVALUATION AND	01/01/2009
99471		INITIAL INPATIENT PEDIATRIC CRITICAL CARE, PER DAY, FOR THE EVALUATION AND	01/01/2009
99472		SUBSEQUENT INPATIENT PEDIATRIC CRITICAL CARE, PER DAY, FOR THE EVALUATION AND	01/01/2009
99475		INITIAL INPATIENT PEDIATRIC CRITICAL CARE, PER DAY, FOR THE EVALUATION AND	01/01/2009
99476		SUBSEQUENT INPATIENT PEDIATRIC CRITICAL CARE, PER DAY, FOR THE EVALUATION AND	01/01/2009
99478		SUBSEQUENT INTENSIVE CARE, PER DAY, FOR THE EVALUATION AND MANAGEMENT OF THE	01/01/2009
99479		SUBSEQUENT INTENSIVE CARE, PER DAY, FOR THE EVALUATION AND MANAGEMENT OF THE	01/01/2009
99480		SUBSEQUENT INTENSIVE CARE, PER DAY, FOR THE EVALUATION AND MANAGEMENT OF THE	01/01/2009
A6545		GRADIENT COMPRESSION WRAP, NON-ELASTIC, BELOW KNEE, 30-50 MM HG, EACH	01/01/2009
A9284		SPIROMETER, NON-ELECTRONIC, INCLUDES ALL ACCESSORIES	01/01/2009
A9580		SODIUM FLUORIDE F-18, DIAGNOSTIC, PER STUDY DOSE, UP TO 30 MILLICURIES	01/01/2009
C8929		TRANSTHORACIC ECHOCARDIOGRAPHY WITH CONTRAST, OR WITHOUT CONTRAST FOLLOWED BY	01/01/2009
C8930		TRANSTHORACIC ECHOCARDIOGRAPHY, WITH CONTRAST, OR WITHOUT CONTRAST FOLLOWED BY	01/01/2009
C9245		INJECTION, ROMIPLOSTIM, 10 MCG	01/01/2009
C9246		INJECTION, GADOXETATE DISODIUM, PER ML	01/01/2009
C9247		IOBENGUANE, I-123, DIAGNOSTIC, PER STUDY DOSE, UP TO 10 MILLICURIES	01/01/2009
C9248		INJECTION, CLEVIDIPIEN BUTYRATE, 1 MG	01/01/2009
C9899		IMPLANTED PROSTHETIC DEVICE, PAYABLE ONLY FOR INPATIENTS WHO DO NOT HAVE	01/01/2009
D0417		COLLECTION AND PREPARATION OF SALIVA SAMPLE FOR LABORATORY DIAGNOSTIC TESTING	01/01/2009
D0418		ANALYSIS OF SALIVA SAMPLE	01/01/2009
D3222		PARTIAL PULPOTOMY FOR APEXOGENESIS - PERMANENT TOOTH WITH INCOMPLETE ROOT	01/01/2009
D5991		TOPICAL MEDICAMENT CARRIER	01/01/2009
E0487		SPIROMETER, ELECTRONIC, INCLUDES ALL ACCESSORIES	01/01/2009
E0656		SEGMENTAL PNEUMATIC APPLIANCE FOR USE WITH PNEUMATIC COMPRESSOR, TRUNK	01/01/2009
E0657		SEGMENTAL PNEUMATIC APPLIANCE FOR USE WITH PNEUMATIC COMPRESSOR, CHEST	01/01/2009
E0770		FUNCTIONAL ELECTRICAL STIMULATOR, TRANSCUTANEOUS STIMULATION OF NERVE AND/OR	01/01/2009
E1354		OXYGEN ACCESSORY, WHEELED CART FOR PORTABLE CYLINDER OR PORTABLE CONCENTRATOR,	01/01/2009
E1356		OXYGEN ACCESSORY, BATTERY PACK/CARTRIDGE FOR PORTABLE CONCENTRATOR, ANY TYPE,	01/01/2009
E1357		OXYGEN ACCESSORY, BATTERY CHARGER FOR PORTABLE CONCENTRATOR, ANY TYPE,	01/01/2009
E1358		OXYGEN ACCESSORY, DC POWER ADAPTER FOR PORTABLE CONCENTRATOR, ANY TYPE,	01/01/2009
E2230		MANUAL WHEELCHAIR ACCESSORY, MANUAL STANDING SYSTEM	01/01/2009
E2231		MANUAL WHEELCHAIR ACCESSORY, SOLID SEAT SUPPORT BASE (REPLACES SLING SEAT),	01/01/2009
E2295		MANUAL WHEELCHAIR ACCESSORY, FOR PEDIATRIC SIZE WHEELCHAIR, DYNAMIC SEATING	01/01/2009
G0402		INITIAL PREVENTIVE PHYSICAL EXAMINATION; FACE-TO-FACE VISIT, SERVICES LIMITED	01/01/2009
G0403		ELECTROCARDIOGRAM, ROUTINE ECG WITH 12 LEADS; PERFORMED AS A SCREENING FOR THE	01/01/2009
G0404		ELECTROCARDIOGRAM, ROUTINE ECG WITH 12 LEADS; TRACING ONLY, WITHOUT	01/01/2009
G0405		ELECTROCARDIOGRAM, ROUTINE ECG WITH 12 LEADS; INTERPRETATION AND REPORT ONLY,	01/01/2009
G0406		FOLLOW-UP INPATIENT TELEHEALTH CONSULTATION, LIMITED, PHYSICIANS TYPICALLY	01/01/2009
G0407		FOLLOW-UP INPATIENT TELEHEALTH CONSULTATION, INTERMEDIATE, PHYSICIANS TYPICALLY	01/01/2009

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G0408		FOLLOW-UP INPATIENT TELEHEALTH CONSULTATION, COMPLEX, PHYSICIANS TYPICALLY	01/01/2009
G0409		SOCIAL WORK AND PSYCHOLOGICAL SERVICES, DIRECTLY RELATING TO AND/OR FURTHERING	01/01/2009
G0410		GROUP PSYCHOTHERAPY OTHER THAN OF A MULTIPLE-FAMILY GROUP, IN A PARTIAL	01/01/2009
G0411		INTERACTIVE GROUP PSYCHOTHERAPY, IN A PARTIAL HOSPITALIZATION SETTING,	01/01/2009
G0412		OPEN TREATMENT OF ILIAC SPINE(S), TUBEROSITY AVULSION, OR ILIAC WING	01/01/2009
G0413		PERCUTANEOUS SKELETAL FIXATION OF POSTERIOR PELVIC BONE FRACTURE AND/OR	01/01/2009
G0414		OPEN TREATMENT OF ANTERIOR PELVIC BONE FRACTURE AND/OR DISLOCATION FOR FRACTURE	01/01/2009
G0415		OPEN TREATMENT OF POSTERIOR PELVIC BONE FRACTURE AND/OR DISLOCATION, FOR	01/01/2009
G0416	TC,26	SURGICAL PATHOLOGY, GROSS AND MICROSCOPIC EXAMINATION FOR PROSTATE NEEDLE	01/01/2009
G0417	TC,26	SURGICAL PATHOLOGY, GROSS AND MICROSCOPIC EXAMINATION FOR PROSTATE NEEDLE	01/01/2009
G0418	TC,26	SURGICAL PATHOLOGY, GROSS AND MICROSCOPIC EXAMINATION FOR PROSTATE NEEDLE	01/01/2009
G0419	TC,26	SURGICAL PATHOLOGY, GROSS AND MICROSCOPIC EXAMINATION FOR PROSTATE NEEDLE	01/01/2009
G8489		I INTEND TO REPORT THE CORONARY ARTERY DISEASE (CAD) MEASURES GROUP	01/01/2009
G8490		I INTEND TO REPORT THE RHEUMATOID ARTHRITIS MEASURES GROUP	01/01/2009
G8491		I INTEND TO REPORT THE HIV/AIDS MEASURES GROUP	01/01/2009
G8492		I INTEND TO REPORT THE PERIOPERATIVE CARE MEASURES GROUP	01/01/2009
G8493		I INTEND TO REPORT THE BACK PAIN MEASURES GROUP	01/01/2009
G8494		ALL QUALITY ACTIONS FOR THE APPLICABLE MEASURES IN THE DIABETES MELLITUS	01/01/2009
G8495		ALL QUALITY ACTIONS FOR THE APPLICABLE MEASURES IN THE CKD MEASURES GROUP HAVE	01/01/2009
G8496		ALL QUALITY ACTIONS FOR THE APPLICABLE MEASURES IN THE PREVENTIVE CARE MEASURES	01/01/2009
G8497		ALL QUALITY ACTIONS FOR THE APPLICABLE MEASURES IN THE CORONARY ARTERY BYPASS	01/01/2009
G8498		ALL QUALITY ACTIONS FOR THE APPLICABLE MEASURES IN THE CORONARY ARTERY DISEASE	01/01/2009
G8499		ALL QUALITY ACTIONS FOR THE APPLICABLE MEASURES IN THE RHEUMATOID ARTHRITIS	01/01/2009
G8500		ALL QUALITY ACTIONS FOR THE APPLICABLE MEASURES IN THE HIV/AIDS MEASURES GROUP	01/01/2009
G8501		ALL QUALITY ACTIONS FOR THE APPLICABLE MEASURES IN THE PERIOPERATIVE CARE	01/01/2009
G8502		ALL QUALITY ACTIONS FOR THE APPLICABLE MEASURES IN THE BACK PAIN MEASURES GROUP	01/01/2009
G8503		DOCUMENTATION THAT PROPHYLACTIC ANTIBIOTIC WAS GIVEN WITHIN ONE HOUR (IF	01/01/2009
G8504		DOCUMENTATION OF ORDER FOR PROPHYLACTIC ANTIBIOTICS TO BE GIVEN WITHIN ONE HOUR	01/01/2009
G8505		DOCUMENTATION THAT PROPHYLACTIC ANTIBIOTIC WAS NOT GIVEN WITHIN ONE HOUR (IF	01/01/2009
G8506		PATIENT RECEIVING ANGIOTENSIN CONVERTING ENZYME (ACE) INHIBITOR OR ANGIOTENSIN	01/01/2009
G8507		PROVIDER DOCUMENTATION THAT PATIENT IS NOT ELIGIBLE FOR PATIENT VERIFICATION OF	01/01/2009
G8508		DOCUMENTATION OF PAIN ASSESSMENT (INCLUDING LOCATION, INTENSITY AND	01/01/2009
G8509		DOCUMENTATION OF PAIN ASSESSMENT (INCLUDING LOCATION, INTENSITY AND	01/01/2009
G8510		NEGATIVE SCREEN FOR CLINICAL DEPRESSION USING A STANDARDIZED TOOL, PATIENT NOT	01/01/2009
G8511		SCREEN FOR CLINICAL DEPRESSION USING A STANDARDIZED TOOL DOCUMENTED, FOLLOW UP	01/01/2009
G8512		PAIN SEVERITY QUANTIFIED; PAIN PRESENT	01/01/2009
G8513		ABI MEASURED AND DOCUMENTED	01/01/2009
G8514		CLINICIAN DOCUMENTED THAT PATIENT WAS NOT AN ELIGIBLE CANDIDATE FOR ABI	01/01/2009
G8515		ABI MEASUREMENT WAS NOT OBTAINED	01/01/2009
G8516		PATIENT SCREENED FOR FUTURE FALLS RISK; DOCUMENTATION OF TWO OR MORE FALLS IN	01/01/2009
G8517		PATIENT SCREENED FOR FUTURE FALL RISK; DOCUMENTATION OF NO FALLS IN THE PAST	01/01/2009
G8518		CLINICAL STAGE PRIOR TO SURGERY FOR LUNG CANCER AND ESOPHAGEAL CANCER RESECTION	01/01/2009
G8519		CLINICIAN DOCUMENTED THAT PATIENT WAS NOT ELIGIBLE FOR CLINICAL STAGE PRIOR TO	01/01/2009
G8520		CLINICIAN STAGE PRIOR TO SURGERY FOR LUNG CANCER AND ESOPHAGEAL CANCER	01/01/2009
G8521		ANTIPLATELET THERAPY RECEIVED (ASA [81-325 MG/DAY] AND/OR CLOPIDOGREL [75	01/01/2009
G8522		CLINICIAN DOCUMENTED THAT PATIENT WAS NOT AN ELIGIBLE CANDIDATE FOR	01/01/2009
G8523		ANTIPLATELET THERAPY NOT RECEIVED 48 HOURS PRIOR TO CEA AND AT DISCHARGE,	01/01/2009
G8524		PATCH CLOSURE USED FOR PATIENT UNDERGOING CONVENTIONAL CEA	01/01/2009

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G8525		CLINICIAN DOCUMENTED THAT PATIENT DID NOT RECEIVE CONVENTIONAL CEA	01/01/2009
G8526		PATCH CLOSURE NOT USED FOR PATIENT UNDERGOING CONVENTIONAL CEA, REASON NOT	01/01/2009
G8527		DOCUMENTATION OF ORDER FOR CEFAZOLIN OR CEFUROXIME FOR ANTIMICROBIAL PROPHYLAXIS	01/01/2009
G8528		CLINICIAN DOCUMENTED THAT PATIENT WAS INELIGIBLE FOR PROPHYLACTIC ANTIBIOTIC	01/01/2009
G8529		ORDER FOR CEFAZOLIN OR CEFUROXIME FOR ANTIMICROBIAL PROPHYLAXIS NOT DOCUMENTED,	01/01/2009
G8530		AUTOGENOUS AV FISTULA RECEIVED	01/01/2009
G8531		CLINICIAN DOCUMENTED THAT PATIENT WAS NOT AN ELIGIBLE CANDIDATE FOR AUTOGENOUS	01/01/2009
G8532		CLINICIAN DOCUMENTED THAT PATIENT RECEIVED VASCULAR ACCESS OTHER THAN	01/01/2009
G8533		PARTICIPATION BY A PHYSICIAN OR OTHER CLINICIAN IN SYSTEMATIC CLINICAL DATABASE	01/01/2009
G8534		DOCUMENTATION OF AN ELDER MALTREATMENT SCREEN AND FOLLOW-UP PLAN	01/01/2009
G8535		NO DOCUMENTATION OF AN ELDER MALTREATMENT SCREEN, PATIENT NOT ELIGIBLE	01/01/2009
G8536		NO DOCUMENTATION OF AN ELDER MALTREATMENT SCREEN, REASON NOT SPECIFIED	01/01/2009
G8537		ELDER MALTREATMENT SCREEN DOCUMENTED, FOLLOW-UP PLAN NOT DOCUMENTED, PATIENT	01/01/2009
G8538		ELDER MALTREATMENT SCREEN DOCUMENTED, FOLLOW-UP PLAN NOT DOCUMENTED, REASON NOT	01/01/2009
G8539		DOCUMENTATION OF A CURRENT FUNCTIONAL OUTCOME ASSESSMENT USING A STANDARDIZED	01/01/2009
G8540		DOCUMENTATION THAT THE PATIENT IS NOT ELIGIBLE FOR A FUNCTIONAL OUTCOME	01/01/2009
G8541		NO DOCUMENTATION OF A CURRENT FUNCTIONAL OUTCOME ASSESSMENT USING A	01/01/2009
G8542		DOCUMENTATION OF A CURRENT FUNCTIONAL OUTCOME ASSESSMENT USING A STANDARDIZED	01/01/2009
G8543		DOCUMENTATION OF A CURRENT FUNCTIONAL OUTCOME ASSESSMENT USING A STANDARDIZED	01/01/2009
G8544		I INTEND TO REPORT THE CORONARY ARTERY BYPASS GRAFT (CABG) MEASURES GROUP	01/01/2009
J0641		INJECTION, LEVOLEUCOVORIN CALCIUM, 0.5 MG	01/01/2009
J1267		INJECTION, DORIPENEM, 10 MG	01/01/2009
J1453		INJECTION, FOSAPREPITANT, 1 MG	01/01/2009
J1459		INJECTION, IMMUNE GLOBULIN (PRIVIGEN), INTRAVENOUS, NON-LYOPHILIZED (E.G.	01/01/2009
J1930		INJECTION, LANREOTIDE, 1 MG	01/01/2009
J1953		INJECTION, LEVETIRACETAM, 10 MG	01/01/2009
J2785		INJECTION, REGADENOSON, 0.1 MG	01/01/2009
J3101		INJECTION, TENECTEPLASE, 1 MG	01/01/2009
J3300		INJECTION, TRIAMCINOLONE ACETONIDE, PRESERVATIVE FREE, 1 MG	01/01/2009
J7186		INJECTION, ANTIHEMOPHILIC FACTOR VIII/VON WILLEBRAND FACTOR COMPLEX (HUMAN),	01/01/2009
J7606		FORMOTEROL FUMARATE, INHALATION SOLUTION, FDA APPROVED FINAL PRODUCT,	01/01/2009
J8705		TOPOTECAN, ORAL, 0.25 MG	01/01/2009
J9033		INJECTION, BENDAMUSTINE HCL, 1 MG	01/01/2009
J9207		INJECTION, IXABEPILONE, 1 MG	01/01/2009
J9330		INJECTION, TEMSIROLIMUS, 1 MG	01/01/2009
L0113		CRANIAL CERVICAL ORTHOSIS, TORTICOLLIS TYPE, WITH OR WITHOUT JOINT, WITH OR	01/01/2009
L6711		TERMINAL DEVICE, HOOK, MECHANICAL, VOLUNTARY OPENING, ANY MATERIAL, ANY SIZE,	01/01/2009
L6712		TERMINAL DEVICE, HOOK, MECHANICAL, VOLUNTARY CLOSING, ANY MATERIAL, ANY SIZE,	01/01/2009
L6713		TERMINAL DEVICE, HAND, MECHANICAL, VOLUNTARY OPENING, ANY MATERIAL, ANY SIZE,	01/01/2009
L6714		TERMINAL DEVICE, HAND, MECHANICAL, VOLUNTARY CLOSING, ANY MATERIAL, ANY SIZE,	01/01/2009
L6721		TERMINAL DEVICE, HOOK OR HAND, HEAVY DUTY, MECHANICAL, VOLUNTARY OPENING, ANY	01/01/2009
L6722		TERMINAL DEVICE, HOOK OR HAND, HEAVY DUTY, MECHANICAL, VOLUNTARY CLOSING, ANY	01/01/2009
L8604		INJECTABLE BULKING AGENT, DEXTRANOMER/HYALURONIC ACID COPOLYMER IMPLANT,	01/01/2009
Q4100		SKIN SUBSTITUTE, NOT OTHERWISE SPECIFIED	01/01/2009
Q4101		SKIN SUBSTITUTE, APLIGRAF, PER SQUARE CENTIMETER	01/01/2009

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Q4102		SKIN SUBSTITUTE, OASIS WOUND MATRIX, PER SQUARE CENTIMETER	01/01/2009
Q4103		SKIN SUBSTITUTE, OASIS BURN MATRIX, PER SQUARE CENTIMETER	01/01/2009
Q4104		SKIN SUBSTITUTE, INTEGRA BILAYER MATRIX WOUND DRESSING (BMWD), PER SQUARE	01/01/2009
Q4105		SKIN SUBSTITUTE, INTEGRA DERMAL REGENERATION TEMPLATE (DRT), PER SQUARE	01/01/2009
Q4106		SKIN SUBSTITUTE, DERMAGRAFT, PER SQUARE CENTIMETER	01/01/2009
Q4107		SKIN SUBSTITUTE, GRAFTJACKET, PER SQUARE CENTIMETER	01/01/2009
Q4108		SKIN SUBSTITUTE, INTEGRA MATRIX, PER SQUARE CENTIMETER	01/01/2009
Q4109		SKIN SUBSTITUTE, TISSUEMEND, PER SQUARE CENTIMETER	01/01/2009
Q4110		SKIN SUBSTITUTE, PRIMATRIX, PER SQUARE CENTIMETER	01/01/2009
Q4111		SKIN SUBSTITUTE, GAMMAGRAFT, PER SQUARE CENTIMETER	01/01/2009
Q4112		ALLOGRAFT, CYMETRA, INJECTABLE, 1CC	01/01/2009
Q4113		ALLOGRAFT, GRAFTJACKET EXPRESS, INJECTABLE, 1CC	01/01/2009
Q4114		INTEGRA FLOWABLE WOUND MATRIX, INJECTABLE, 1CC	01/01/2009
S3711		CIRCULATING TUMOR CELL TEST	01/01/2009
S9433		MEDICAL FOOD NUTRITIONALLY COMPLETE, ADMINISTERED ORALLY, PROVIDING 100% OF	01/01/2009

01/15/09