

In coordination with the DHA UBO Program Office and the Medical Coding Program Office, the UBO Learning Center will present the following January Webinar:

CY 2015 CPT[®]/HCPCS Updates

21 Jan 2015 1300 – 1400 22 Jan 2015 0800 – 0900

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- Effective Dates
- 2015 CPT[®]/HCPCS updates
- Symbols for 2015 changes
- 2015 CPT[®] Code Changes
- Summary of new codes
- 2015 HCPCS Codes
- 2015 HCPCS Modifiers



- American Medical Association (AMA) updates CPT[®] codes annually, effective 1 January.
- Centers for Medicare & Medicaid Services (CMS) updates HCPCS codes on a quarterly basis.
- MHS updates CPT[®]/HCPCS codes annually, however they are generally not loaded into billing systems until the 2nd Quarter of the current CY.
 - Deployment in AHLTA, CHCS, CCE forecast to begin mid February 2015.
 - MHS Outpatient Itemized Billing (OIB) rates for new 2015 codes not available until mid-year (generally 1 July 2015).
 - Can only bill if there is a DHA UBO rate for a code that is effective on the date of service.
 - DHA UBO rates cannot be applied retroactively. This can create billing lags and timely filing issues.



- Approximately 550 code changes (source: AMA 2015 CPT[®] Professional Edition book; Ingenix 2015 HCPCS Procedure book).
- Numerous changes to the Evaluation and Management Service section.
- Changes in Anesthesia section involve the deletion of codes that describe services of low utilization.
- In the surgery section, a large number of changes were in Cardiovascular and Digestive System sections and new injection codes were added in the Nervous System.
- Most substantial changes to Radiology section are the revisions to the exclusionary parenthetical notes and cross-references to include appropriate reporting instructions for those codes.
- Over 100 new codes in the Pathology and Laboratory section.
- Category I, II, III Changes
 - 266 New Codes
 - 143 Deleted Codes
 - 128 Revised
 - 4 new HCPCS Modifiers and 231 new HCPCS codes



New Code

- ▲ Revised Code
- **#** Re-sequenced Code
- + Add-on Code
- Moderate Sedation

Codes for vaccines that are pending FDA approval





2015 CPT[®] Changes Overview



Category I

- 3 Evaluation & Management
- 84 Surgery
- 15 Radiology
- 107 Pathology and Laboratory
- 15 Medicine
- Category II
 - 3 New Codes
- Category III
 - 39 new codes
 - 11 (not listed in 2015 CPT[®] book)



- Changes in the Evaluation and Management section include:
 - Addition of "military history" to the social-history element in the evaluation and management (E/M) guidelines.
 - Revision of inpatient neonatal and pediatric critical care guidelines to clarify appropriate reporting of these services.
 - Deletion of intensive care services codes 99481 & 99482 and addition of 99184, which combines these services into one single code.
 - A section title changed from "Complex Chronic Care Coordination" to "Care Management Service" with an addition of new subsection "Chronic Care Management Services" to better reflect the management services described by the new code 99490.
 - Another new subsection, "Complex Chronic Care Management Services" with deletion of 99488 & revision of codes 99487 & 99489.
 - Several guideline changes



An age appropriate review of past and current activities that includes significant information about:

- Marital status and/or living arrangements
- Current employment
- Occupational history
- Military history
- Use of drugs, alcohol, and tobacco
- Level of education
- Sexual history
- Other relevant social factors



Codes 99481 and 99482 have been deleted and replaced with new combination code 99184

 99184 Initiation of selective head or total body hypothermia in the critically ill neonate, includes appropriate patient selection by review of clinical, imaging and Laboratory data, confirmation of esophageal temperature probe location, evaluation of amplitude EEG, supervision of controlled hypothermia, and assessment of patient tolerance of cooling

Chronic Care Management Services

- # 99490 Chronic care management services, at least 20 minutes of clinical staff time directed by a physician or other qualified health care professional, per calendar month, with the following required elements:
 - 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.



Advance Care Planning

- 99497 Advance care planning including the explanation and discussion of advance directives such as standard forms (with completion of such forms, when performed), by the physician or other qualified health care professional; first 30 minutes face-to-face with the patient family member(s), and/or surrogate
- **+• 99498** Each additional 30 minutes (List separately in addition to code for primary procedure)



- Changes to the Surgery section include:
 - 84 new codes
 - 65 revisions
 - 45 deletions
 - Some of the changes to the Musculoskeletal section include:
 - New and revised codes for arthrocentesis & ablation therapy procedures
 - New codes for open treatment of rib fractures
 - New guidelines and codes added for percutaneous vertebroplasty & vertebral augmentation procedures.
- Guidelines, addition and revision of codes for pacemaker and implantable defibrillator services in Cardiovascular System section.



- Extensive changes made to the Digestive section that involves the lower endoscopy codes, including new guidelines and codes for stomal endoscopy procedures and in the renamed Colon and Rectum subsection.
- Changes in the Nervous System section include new injection codes for myelography and transversus abdominis plane block.



Surgical Package Definition

 The definition is clarified to indicate the History and Physical are included.



- 20600 Arthrocentesis, aspiration and/or injection, small
 Joint or bursa (e.g., fingers, toes); without ultrasound guidance
- **20604** With ultrasound guidance, with permanent recording and reporting
- **20605** ... **intermediate joint or bursa** (e.g., temporomandibular, acromioclavicular, wrist, elbow or ankle, olecranon bursa); ...
- 20606 With ultrasound guidance, with permanent recording and reporting
- 20610 ... major joint or bursa (e.g., shoulder, hip, knee, subacromial bursa); ...
- 20611 With ultrasound guidance, with permanent recording and reporting



- ▲ 20982 Ablation therapy for reduction or eradication of 1 or more bone tumors (e.g., metastasis), including adjacent soft tissue when involved by tumor extension, percutaneous, including imaging guidance when performed; radiofrequency
- • 20983 Cryoablation



- 21811 Open treatment of rib fracture(s) with internal fixation, includes thoracoscopic visualization when performed, unilateral; 1-3 ribs
- **21812** 4-6 ribs
- **21813** 7 or more ribs

These codes replace Category III codes 0245T-0248T



- 22510 Percutaneous vertebroplasty (bone biopsy included when performed), 1 vertebral body, unilateral or bilateral injection, inclusive of all imaging guidance; cervicothoracic
- • 22511 Lumbosacral
- + 22512 Each additional cervicothoracic or lumbosacral vertebral body
 - 22513 Percutaneous vertebral augmentation, including cavity creation (fracture reduction and bone biopsy included when performed) using mechanical device (e.g., kyphoplasty), 1 vertebral body, unilateral or bilateral cannulation, inclusive of all imaging guidance; thoracic
 - • 22514 Lumbar
- + 22515 Each additional thoracic or lumbar vertebral body



- 22856 Total disc arthroplasty (artificial disc), anterior approach, including discectomy with end plate preparation (includes osteophytectomy for nerve root or spinal cord decompression and microdissection); single interspace, cervical
- #+• 22858 Second level, cervical



 27279 Arthrodesis, sacroiliac joint, percutaneous or minimally invasive (indirect visualization), with image guidance, includes obtaining bone graft when performed, and placement of transfixing device



- # 33270 Insertion or replacement of permanent subcutaneous implantable defibrillator system, with subcutaneous electrode, including defibrillation threshold evaluation, induction of arrhythmia, evaluation of sensing for arrhythmia termination, and programming or reprogramming of sensing or therapeutic parameters, when performed
- # 33271 Insertion of subcutaneous implantable defibrillator electrode
- # 33272 Removal of subcutaneous implantable defibrillator electrode
- # 33273 Repositioning of previously implanted subcutaneous implantable defibrillator electrode



- **33418** Transcatheter mitral valve repair, percutaneous approach, including transseptal puncture when performed; initial prosthesis
- +• 33419 Additional prosthesis(es) during same session



- **33946** ECMO/ECLS,PHYS;INITIA,VENO-VEN
- 33947 ECMO/ECLS,PHYS;INITIA,VENO-ART
- 33948 ECMO/ECLS,PHY;DAY MGT,VENO-VEN
- S3949 ECMO/ECLS,PHY;DAY MGT,VENO-ART
- **33951** ECMO/ECLS,PHYS;PER,BIRTH-5 YRS
- **33952** ECMO/ECLS,PHYS;PER,6YRS &OLDER
- **33953** ECMO/ECLS,PHYS;OPN,BIRTH-5 YRS
- **33954** ECMO/ECLS,PHYS;OPN,6YRS &OLDER
- **33955** ECMO/ECLS,PHYS;CENT CANN,0-5
- **33956** ECMO/ECLS,PHYS;CENT CANN,6YRS+
- **33957** ECMO/ECLS,PHYS;REP PER CAN,0-5
- **33958** ECMO/ECLS,PHYS;REP PER CAN,6Y+
- **33959** ECMO/ECLS,PHYS;REP CAN,OPN,0-5



# • 33962 ECMO/ECLS,PHYS;REP CAN,C	PN,6Y+
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- # **33963** ECMO/ECLS,PHYS;REP CEN CAN,0-5
- # 33964 ECMO/ECLS,PHYS;REP CEN CAN 6Y+
- # **33965** ECMO/ECLS,PHYS;REM,PER CAN,0-5
- # **33966** ECMO/ECLS,PHYS;REM,PER CAN,6Y+
- # **33969** ECMO/ECLS,PHYS;REM,CAN,OPN,0-5
- # **33984** ECMO/ECLS,PHYS;REM,CAN,OPN,6Y+
- # 33985 ECMO/ECLS,PHYS;REM,CEN CAN,0-5
- # 33986 ECMO/ECLS,PHYS;REM,CEN CAN,6Y+
- # + 33987 ART EXP,FAC ART PERF,ECMO/ECLS
- # 33988 INS,LHRT VN,THO INCS,ECMO/ECLS
- # 33989 REM,LHRT VN,THO INCS,ECMO/ECLS



- **34839** Physician planning of a patient-specific fenestrated visceral aortic endograft requiring a minimum of 90 minutes of physician time
- **37218** Transcatheter placement of intravascular stent(s), intrathoracic common carotid artery or innominate artery, open or percutaneous antegrade approach, including angioplasty, when performed, and radiological supervision and interpretation



• **43180** Esophagoscopy, rigid, transoral with diverticulectomy of hypopharynx or cervical esophagus (e.g., Zenker's diverticulum), with cricopharyngeal myotomy, includes use of telescope or operating microscope and repair, when performed



- 44380 Ileoscopy, through stoma; diagnostic, including collection of specimen(s) by brushing or washing, when performed (separate procedure)
- • 44381 With transendoscopic balloon dilation
- 44384 With placement of endoscopic stent (includes pre- and post-dilation and guide wire passage, when performed)
- 44388 Colonoscopy through stoma; diagnostic, including collection of specimen(s) by brushing or washing, when performed (separate procedure)
- **44401** With ablation of tumor(s), polyp(s), or other lesion(s) (includes preand post-dilation and guide wire passage, when performed)
 - 44402 With endoscopic stent placement (including pre and post-dilation and guide wire passage, when performed)
 - 44403 With endoscopic mucosal resection
 - 44404 With directed submucosal injection(s), any substance



- **44405** With transendoscopic balloon dilation
- 44406 With endoscopic ultrasound examination, limited to the sigmoid, descending, transverse, or ascending colon and cecum and adjacent structures
- 44407 With transendoscopic ultrasound guided intramural or transmural fine needle aspiration/biopsy(s), includes endoscopic ultrasound examination limited to the sigmoid, descending, transverse, or scending colon and cecum and adjacent structures
- 44408 With decompression (for pathologic distention) (e.g., volvulus, megacolon), including placement of decompression tube, when performed



- 45330 Sigmoidoscopy, flexible; diagnostic, including collection of specimen(s) by brushing or washing, when performed (separate procedure)
- # 45346 With ablation of tumor(s), polyp(s), or other lesion(s)
 (includes pre- and post-dilation and guide wire passage, when performed)
 - **45347** With placement of endoscopic stent (includes pre- and postdilation and guide wire passage, when performed)
 - • **45349** With endoscopic mucosal resection
 - • **45350** With band ligation(s) (e.g., hemorrhoids)



- 45378 Colonoscopy, flexible; diagnostic, including collection of specimen(s) by brushing or washing, when performed (separate procedure)
- # ••45388 With ablation of tumor(s), polyp(s), or other lesion(s) (includes preand post-dilation and guide wire passage, when performed)
- 45389 With endoscopic stent placement (includes pre and post-dilation and guide wire passage, when performed)
- #• **45390** With endoscopic mucosal resection
- 45393 With decompression (for pathologic distention) (e.g., volvulus, megacolon), including placement of decompression tube, when performed
- # • 45398 With band ligation(s) (e.g., hemorrhoids)
- # • 45399 Unlisted procedure, colon



- 46600 Anoscopy; diagnostic, including collection of specimen(s) by brushing or washing, when performed (separate procedure)
- 46601 Diagnostic, with high-resolution magnification (HRA) (e.g., colposcope, operating microscope) and chemical agent enhancement, including collection of specimen(s) by brushing or washing, when performed
- 46607 With high-resolution magnification (HRA) (e.g., colposcope, operating microscope) and chemical agent enhancement, with biopsy, single or multiple
- 47383 Ablation, 1 or more liver tumor(s), percutaneous, cryoablation



- **52441** Cystourethroscopy, with insertion of permanent adjustable transprostatic implant; single implant
- 52442 Each additional permanent adjustable transprostatic implant



- 62302 Myelography via lumbar injection, including radiological supervision and interpretation; cervical
- 62303 Thoracic
- 62304 Lumbosacral
- 62305 2 or more regions (e.g., lumbar/thoracic, cervical/thoracic, lumbar/cervical, lumbar/thoracic/cervical)



- 64486 Transversus abdominis plane (TAP) block (abdominal plane block, rectus sheath block) unilateral; by injection(s) (includes imaging guidance, when performed)
- 64487 By continuous infusion(s) (includes imaging guidance, when performed)
- 64488bilateral
- 64489 By continuous infusions (includes imaging guidance, when performed)



- 66179 Aqueous shunt to extraocular equatorial plate reservoir, external approach; without graft
- 66180 With graft
- 66184 Revision of aqueous shunt to extraocular equatorial plate reservoir; without graft
- **66185** With graft



- 76641 Ultrasound, breast, unilateral, real time with image documentation, including axilla when performed; complete
- **76642** Limited
- 77061 Digital breast tomosynthesis; unilateral
- 77062 Bilateral
- 77063 Screening digital tomosynthesis, bilateral (list separately in addition to code for primary procedure)



- # 77085 Dual-energy x-ray absorptiometry (DXA), bone density study, 1 or more sites; axial skeleton (e.g., hips, pelvis, spine), including vertebral fracture assessment
- # 77086 Vertebral fracture assessment via dual-energy X-ray absorptiometry (DXA)



- 77306 Teletherapy isodose plan; simple (1 or 2 unmodified ports directed to a single area of interest), includes basic dosimetry calculation(s)
- 77307 Complex (multiple treatment areas, tangential ports, the use of wedges, blocking, rotational beam, or special beam considerations), includes basic dosimetry calculation(s)
- 77316 Brachytherapy isodose plan; simple (calculation[s] made from 1 to 4 sources, or remote afterloading brachytherapy, 1 channel), includes basic dosimetry calculation(s)
- 77317 Intermediate (calculation[s] made from 5 to 10 sources, or remote afterloading brachytherapy, 2-12 channels), includes basic dosimetry calculation(s)
- 77318 Complex (calculation[s] made from over 10 sources, or remote afterloading brachytherapy, over 12 channels), includes basic dosimetry calculation(s)



- **#• 77385** Intensity modulated radiation treatment delivery (IMRT), includes guidance and tracking, when performed; simple
- **#• 77386** Complex
- #• 77387 Guidance for localization of target volume
 for delivery of radiation treatment delivery, includes intrafraction
 tracking, when performed



- There have been numerous changes to the Pathology and Laboratory section of the CPT[®] book. New drug assay subsection has been added. Also many changes were made to the Therapeutic Drug Assay (TDA) and Chemistry section to include code additions, deletions and revisions as well as guideline changes to the TDA subsection
- 107 new codes; 32 revised codes; 44 deleted codes
- Over all, most probably, you will not be providing oversight/advice on how to properly use the new pathology and lab CPT[®] codes
- The new laboratory codes will be used in the CHCS laboratory module



- **80162** Digoxin; total
- 80163 Free
- **80164** Valproic acid (dipropylacetic acid); total
- #• 80165 Free



- **80300** DRG SCR,ANY,LIST A;ANY,NON-TLC
- **80301** DRG SCR, ANY, LST A; SNG CLS METH
- 80302 DRG SCR, PRESUMPT, SNG, LIST B, EA
- **80303** DRG SCR, ANY, PRESUM, SNG/MUL; TLC
- 80304 DRG SCR,ANY,PRESUMPT;NOS,EA PX
- **80320** ALCOHOLS
- **80321** ALCOHOL BIOMARKERS; 1 OR 2
- 80322 ALCOHOL BIOMARKERS; 3 OR MORE
- 80323 ALKALOIDS,NOS
- **80324** AMPHETAMINES; 1 OR 2
- **80325** AMPHETAMINES; 3 OR 4
- **80326** AMPHETAMINES; 5 OR MORE
- **80327** ANABOLIC STEROIDS; 1 OR 2
- **80328** ANABOLIC STEROIDS; 3 OR MORE



- **80329** ANALGESICS, NON-OPIOID; 1 OR 2
- **80330** ANALGESICS, NON-OPIOID; 3-5
- **80331** ANALGESICS, NON-OPIOID; 6/MORE
- **80332** ANTIDEP, SEROTONERGIC CLASS; 1/2
- **80333** ANTIDEP, SEROTONERGIC CLASS; 3-5
- 80334 ANTIDEP, SEROTONERG CLAS; 6/MORE
- **80335** ANTIDEP,TRICYCL & OTH CYC; 1/2
- **80336** ANTIDEP,TRICYCL & OTH CYC; 3-5
- 80337 ANTIDEP,TRICYC & OTH CYC;6/MORE
- **80338** ANTIDEPRESSANTS,NOS
- **80339** ANTIEPILEPTICS, NOS; 1-3
- **80340** ANTIEPILEPTICS,NOS; 4-6
- **80341** ANTIEPILEPTICS,NOS; 7 OR MORE
- **80342** ANTIPSYCHOTICS, NOS; 1-3



- **80343** ANTIPSYCHOTICS,NOS; 4-6
- **80344** ANTIPSYCHOTICS,NOS; 7 OR MORE
- 80345 BARBITURATES
- **80346** BENZODIAZEPINES; 1-12
- **80347** BENZODIAZEPINES; 13 OR MORE
- 80348 BUPRENORPHINE
- 80349 CANNABINOIDS, NATURAL
- **80350** CANNABINOIDS, SYNTHETIC; 1-3
- **80351** CANNABINOIDS, SYNTHETIC; 4-6
- **80352** CANNABINOIDS,SYNTHETIC; 7/MORE
- 80353 COCAINE
- **80354** FENTANYL
- **80355** GABAPENTIN, NON-BLOOD
- 80356 HEROIN METABOLITE



- **80357** KETAMINE AND NORKETAMINE
- 80358 METHADONE
- 80359 METHYLENEDIOXYAMPHETAMINES
- 80360 METHYLPHENIDATE
- **80361** OPIATES, 1 OR MORE
- OPIOIDS & OPIATE ANALOGS;1 OR 2
- 80363 OPIOIDS & OPIATE ANALOGS;3 OR 4
- **80364** OPIOIDS & OPIATE ANALOGS;5/MORE
- 80365 OXYCODONE
- 80366 PREGABALIN
- **80367** PROPOXYPHENE
- 80368 SEDAT HYPNOT (NON-BENZODIAZEP)
- **80369** SKELETAL MUSCLE RELAXANTS; 1/2
- 80370 SKELETAL MUSC RELAXANTS;3/MORE



- **80371** STIMULANTS, SYNTHETIC
- **80372** TAPENTADOL
- 80373 TRAMADOL
- **80374** STEREOISOMER ANAL, SNGL DRG CLS
- 80375 DRG/SUBS,DEF,QUAL/QUAN,NOS;1-3
- 80376 DRG/SUBS,DEF,QUAL/QUAN,NOS;4-6
- 80377 DRG/SUBS,DEF,QUAL/QUANT,NOS;7+



81245 FLT3 (fms-related tyrosine kinase 3) (e.g., acute myeloid leukemia), gene analysis, internal tandem duplication (ITD) variants (i.e., exons 14, 15)
 81246 FLT3, GENE ANAL; TKD VARIANTS
 # 81288 MLH1 GEN ANAL; PROMOT METH ANAL
 81313 PCA3/KLK3 RATIO



- **81410** AOR DYSFUN/DIL;GEN SEQ,9 GENES
- 81411 AORT DYSF/DIL;DUP/DEL ANAL PAN
- **81415** EXOME; SEQUENCE ANALYSIS
- **81416** EXOME;SEQ ANAL,EA COMPARAT EXO
- 81417 EXOME;RE-EVAL,PREV OBTAIN SEQ
- **81420** FET CHR ANEUP GEN SEQ,13,18,21
- **81425** GENOME; SEQUENCE ANALYSIS
- + 81426 GENOME; SEQ ANAL, EA COMPARATOR
 - 81427 GENOME;RE-EVAL,PREV OBTAIN SEQ
 - **81430** HEAR LOSS;GENOM PANEL,60 GENES
 - 81431 HEAR LOSS; DUP/DEL ANAL PANEL
 - **81435** HER COL CA SYN;GEN PAN,7 GENES
 - **81436** HER COL CA SYN;DUP/DEL,8 GENES
 - **81440** NUC ENC MITO GEN, PAN, 100 GENES



- **81445** TARG GEN PAN, SOL ORG NEOP, 5-50
- **81450** TARG GEN PAN, HEMATOLYMPHO, 5-50
- **81455** TARG GEN PAN,SOL ORG/HEM, 51/>
- 81460 WHOLE MITOCHOND GENOME, GEN SEQ
- **81465** WHOL MITOCHOND GEN, LRG DEL PAN
- **81470** XLID;GEN SEQ ANAL PAN,60 GENES
- **81471** XLID;DUP/DEL GEN ANAL,60 GENES



- Multianalyte Assays with Algorithmic Analyses
- 81519 Oncology (breast), mRNA, gene expression profiling by real-time RT-PCR of 21 genes, utilizing formalin-fixed paraffin embedded tissue, algorithm reported as recurrence score
- Chemistry
- 83006 Growth stimulation expressed gene 2 (ST2, Interleukin 1 receptor like-1)



- 87505 Infectious agent detection by nucleic acid (DNA or RNA); gastrointestinal pathogen (e.g., Clostridium difficile, E. coli, Salmonella, Shigella, norovirus, Giardia), includes multiplex reverse transcription, when performed, and multiplex amplified probe technique, multiple types or subtypes, 3-5 targets
- 87506 ... 6-11 targets
- 87507 ... 12-25 targets
- # 87623 Human Papillomavirus (HPV), low-risk types (e.g., 6, 11, 42, 43, 44)
- **# 87624** Human Papillomavirus (HPV), high-risk types (e.g., 16, 18, 31, 33, 35, 39, 45, 51, 52, 56, 58, 59, 68)
- # 87625 Human Papillomavirus (HPV), types 16 and 18 only, includes type 45, if performed
- # 87806 HIV-1 antigen(s), with HIV-1 and HIV-2 antibodies



- ▲ 88342 Immunohistochemistry or immunocytochemistry, per specimen; initial single antibody stain procedure
- **#+• 88341** Each additional single antibody stain procedure
 - 88344 Each multiplex antibody stain procedure
 - 88365 In situ hybridization (e.g., FISH), per specimen; initial single probe stain procedure
- **#+• 88364** Each additional single probe stain procedure
 - 88366 Each multiplex probe stain procedure
 - 88367 Morphometric analysis, in situ hybridization (quantitative or semiquantitative); using computer-assisted technology, per specimen; initial single probe stain procedure
 - 88373 Each additional single probe stain procedure
 - 88374 Each multiplex probe stain procedure



- ▲ 88368 Morphometric analysis, in situ hybridization (quantitative or semiquantitative) manual, per specimen; initial single probe stain procedure
- **Each** additional single probe stain procedure
- **#• 89377** Multiplex probe stain procedure
 - **89337** Cryopreservation, mature oocyte(s)



- 90651 Human Papillomavirus vaccine types 6, 11, 16, 18, 31, 33, 45, 52, 58, nonavalent (HPV), 3 dose schedule, for intramuscular use
- **90630** Influenza virus vaccine, quadrivalent (IIV4), split virus, preservative free, for intradermal use



- 91200 LIV ELAS, MECH, SHEAR WAV, WO IMG
- 92145 CORN HYST DETER, AIR IMPUL STIM
- **# 93260** PROG, EVAL; IMP SUBCU LEAD DEFIB
- **#• 93261** INTER, EVAL; IMP SUBC LEAD DEFIB
- 93355 ECHO,TEE,TRNSCATH,GRT VESS STR
- **93644** ELECTROPHY EVAL, SUBC IMP DEFIB
- 93702 BIS, EXTRACELL FLD ANAL, LYMPHED



Medicine

Noninvasive Vascular Diagnostic Studies

• 93895 QUANT CAR MED THCK&ATH EVAL,BI

Central Nervous System Assessment/Tests

• 96127 BRIEF EMOTIONAL/BEHAVIOR ASSES

Physical Medicine and Rehabilitation

- 97607 NEG PRES WND;SUR AREA<=50 SQCM
- 97608 NEG PRES WND;SUR AREA >50 SQCM

Other Services and Procedures

- 99184 INIT, HD/TOT, HYPOTH, CRIT NEONAT
- 99188 APPL, TOP FLUORID VARN, PHYS/HCP



- **3126F** Esophageal biopsy report with a statement about dysplasia (present, absent, or indefinite, and if present, contains appropriate grading) (PATH)
- 3775F Adenoma(s) or other neoplasm detected during screening colonoscopy (SCADR)
- 3776F Adenoma(s) or other neoplasm not detected during screening colonoscopy (SCADR)



- 0347T PLACE, INTERST DEV(S), BONE, RSA
- 0348T RADIOLOGIC EXAM,RSA;SPINE
- 0349T RADIOLOGIC EXAM,RSA;UP EXTREM
- 0350T RADIOLOGIC EXAM,RSA;LOW EXTREM
- 0351T OPT COH TOM, BRST, LYM, EA; REAL-T
- 0352T OPT COH TOM,BRST,LYM,EA;INT&RP
- 0353T OPT COH TOM, BRST, SRG CV; REAL-T
- O354T OPT COH TOM, BRST, SRG CV; INT&RP
- 0355T GI TRAC IMG, INTLUM, COL, INT& RPT
- 0356T INS, DRG-ELU IMPL, LACR CANAL, EA
- # 0357T CRYOPRESERVATION;IMMAT OOCYTE
 - 0358T BIOELEC IMP,WHOL BDY,SUP,IN&RP



- 0359T BEHAVIOR IDENTIFICATION ASSESS
- 0360T OBSER BEHAV FOLL UP;1ST 30 MIN
- 0361T OBS BEHAV FOLL UP;EA ADD 30MIN
- 0362T EXPOS BEHAV FOLL UP;1ST 30 MIN
- + 0363T EXP BEHAV FOLL UP;EA ADD 30MIN
 - **0364T** ADAP BEHAV TX,1 PAT;1ST 30 MIN
- + 0365T ADAP BEHAV TX,1PAT;EA ADD 30MN
 - **0366T** GRP ADAP BEHV;2/+PAT,1ST 30 MN
 - **0367T** GRP ADAP BEHV;2/+,EA ADD 30 MN
 - 0368T ADAP BEHAV TX,MOD,1PAT;1ST 30M
- + 0369T ADAP BEHAV TX,MOD,1;EA ADD 30M
 - 0370T FAMILY ADAPTIVE BEHAV TX GUID
 - 0371T MULT-FAM GRP ADP BEHAV TX GUID
 - 0372T ADAP BEHAV TX SOC SKIL, MUL PAT



- 0373T EXP ADP BEHAV TX, SEV; 1ST 60MIN
- EXP ADP BEHAV TX,SEV;EA AD 30M
 - 0375T TOT DISC ARTHROPL,CERV,3/+ LEV
- #+ 🔹 0376T INS,ANT SEG AQU DRN DEV;EA ADD
 - 0377T ANO, SUBMUC INJ, BULK, FEC INCONT
 - 0378T VIS FLD ASSESS,UP TO 30;REV&IN
 - 0379T VIS FLD ASSES,UP TO 30;TCH SUP
 - 0380T COMP-AID ANIM&ANL,TIME,RETINAL



- 0381T External heart rate and 3-axis accelerometer data recording up to 14 days to assess changes in heart rate and to monitor motion analysis for the purposes of diagnosing nocturnal epilepsy seizure events; includes report, scanning analysis with report, review and interpretation by a physician or other qualified health care professional
- **0382T** Review and interpretation only
- **0383T** ... 15 to 30 days ...
- **0384T** Review and interpretation only
- **0385T** ... more than 30 days ...
- **0386T** Review and interpretation only
- 0387T Transcatheter insertion or replacement of permanent leadless pacemaker, ventricular
- 0388T Transcatheter removal of permanent leadless pacemaker, ventricular



- O389T 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, leadless pacemaker system
- 0390T 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, leadless pacemaker system
- 0391T Interrogation device evaluation (in person) with analysis, review and report, includes connection, recording and disconnection per patient encounter, leadless pacemaker system



- 2015 New HCPCS Codes (By Section)
 - Medical Surgical Supplies 4
 - Outpatient PPS Codes 16
 - Durable Medical Equipment (DME) 0
 - Procedure and Professional Services (Temporary) 164
 - Drugs Administered Other than Oral Method 21
 - Chemotherapy Drugs 2
 - Temporary Codes 2
 - Prosthetic Devices and Procedures 4
 - Q Codes (Temporary) 12
 - Temporary National Codes (Non-Medicare) 6



- PO Services, procedures, and/or surgeries furnished at offcampus provider-based outpatient department
- XE Separate encounter, a service that is distinct because it occurred during a separate encounter
- XS Separate structure, a service that is distinct because it was performed on a separate organ
- XP Separate practitioner, a service that is distinct because it was performed by a different practitioner
- XU Unusual non-overlapping service, the use of a service that is distinct because it does not overlap usual components of the main service



CPT®/HCPCS 2015 ADDED AND DELETED CODES



Microsoft Excel Worksheet

CROSSWALK OF DELETED CODES 2015



Microsoft Excel 97-2003 Worksheet







Additional questions may be sent to UBO.LearningCenter@altarum.org



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