

April 1 and July 1, 2004 Code Updates

The following grid contains the CPT and HCPCS codes and modifiers released by Centers for Medicare and Medicaid Services (CMS). All the listed codes are accepted by Medica, however that does not guarantee coverage. Please reference the "Coverage Comments" section of the grid for further information. Not every code will have coverage comments.

N = new C = change in description D = delete R = reinstated

CODE		EFFECTIVE DATE	DESCRIPTION	COVERAGE COMMENTS
0062T	N	7/1/2004	Percutaneous intradiscal annuloplasty, any method, unilateral or bilateral including fluoroscopic guidance; single level	Investigative; Intradiscal Electrothermal Therapy (IDET) policy on medica.com
0063T	N	7/1/2004	Percutaneous intradiscal annuloplasty, any method, unilateral or bilateral including fluoroscopic guidance; one or more additional levels (List separately in addition to 0062T for primary procedure)	Investigative; Intradiscal Electrothermal Therapy (IDET) policy on medica.com
0064T	N	7/1/2004	Spectroscopy, expired gas analysis (eg, nitric oxide/carbon dioxide test)	Submit in addition to unlisted CPT code
0065T	N	7/1/2004	Ocular photoscreening with interpretation and report, bilateral	Submit in addition to unlisted CPT code
0066T	N	7/1/2004	CT colonography (ie, virtual colonoscopy); screening	Investigative; policy on medica.com
0067T	N	7/1/2004	CT colonography (ie, virtual colonoscopy); diagnostic	Investigative; policy on medica.com
0068T	N	7/1/2004	Acoustic heart sound recording and computer analysis; with interpretation and report (List separately in addition to codes for electrocardiography)	Submit in addition to unlisted CPT code
0069T	N	7/1/2004	Acoustic heart sound recording and computer analysis only (List separately in addition to codes for electrocardiography)	Submit in addition to unlisted CPT code
0070T	N	7/1/2004	Acoustic heart sound recording and computer analysis; interpretation and report (List separately in addition to codes for electrocardiography)	Submit in addition to unlisted CPT code
0071T	N	7/1/2004	Focused ultrasound ablation of uterine leiomyomata, including MR guidance; total leiomyomata volume less than 200 cc of tissue	Submit in addition to unlisted CPT code
0072T	N	7/1/2004	Focused ultrasound ablation of uterine leiomyomata, including MR guidance; total leiomyomata volume greater or equal to 200 cc of tissue	Submit in addition to unlisted CPT code
0073T	N	7/1/2004	Compensator-based beam modulation treatment delivery of inverse planned treatment using three or more high resolution (milled or cast) compensator convergent beam modulated fields, per treatment session	Submit in addition to unlisted CPT code
0074T	N	7/1/2004	Online evaluation & management service, per encounter, provided by a physician, using the internet or similar electronic communications network, in response to a patient's request; established patient	Submit in addition to unlisted CPT code
A4644	R	1/1/2004	Supply of low osmolar contrast material (100-199 mgs of iodine)	
A4645	R	1/1/2004	Supply of low osmolar contrast material (200-299 mgs of iodine)	
A4646	R	1/1/2004	Supply of low osmolar contrast material (300-399 mgs of iodine)	
CD	C	4/1/2004	AMCC test has been ordered by an ESRD facility or MCP physician that is part of the composite rate is not separately billable	Informational modifier
CE	C	4/1/2004	AMCC test has been ordered by an ESRD facility or MCP physician that is a composite rate test but is beyond the normal frequency covered under the rate and is separately reimbursable based on medical necessity	Informational modifier

CF	C	4/1/2004	AMCC test has been ordered by an ESRD facility or MCP physician that is not part of the composite rate and is separately billable	Informational modifier	
G0295	C	7/1/2004	Electromagnetic stimulation, to one or more areas , for wound care other than described in G0329 or for other uses	Medicare Products only; following Medicare guidelines	
G0329	N	7/1/2004	Electromagnetic therapy, to one or more areas for chronic stage III and stage IV pressure ulcers, arterial ulcers, diabetic ulcers and venous stasis ulcers not demonstrating measureable signs of healing after 30 days of conventional care as part of a therapy plan of care	Medicare Products only; following Medicare guidelines	
K0627	N	4/1/2004	Traction equipment, cervical, freestanding, pneumatic, applying traction force to other than mandible	Home use supplied by DME vendor	
K0628	N	4/1/2004	For diabetics only, multiple density insert, direct formed, molded to foot after external heat source of 230 degrees fahrenheit or higher, total contact with patient's foot, including arch, base layer minimum of 1/4 inch material of shore a 35 durometer or 3/16 inch material of shore a 40 (or higher), prefabricated, each	Codes A5509 and A5511 will be ineligible for Medicare Products	
K0629	N	4/1/2004	For diabetics only, multiple density insert, custom molded from model of patient's foot, total contact with patient's foot, including arch, base layer minimum of 3/16 inch material of shore a 35 durometer or higher, includes arch filler and other shaping material, custom fabricated, each	Codes A5509 and A5511 will be ineligible for Medicare Products	
K0630	N	4/1/2004	Sacroiliac orthosis, flexible, provides pelvic-sacral support, reduces motion about the sacroiliac joint, includes straps, closures, may include pendulous abdomen design, prefabricated, includes fitting and adjustment	Home use, usually supplied by DME vendor	
K0631	N	4/1/2004	Sacroiliac orthosis, flexible, provides pelvic-sacral support, reduces motion about the sacroiliac joint, includes straps, closures, may include pendulous abdomen design, custom fabricated	Home use, usually supplied by DME vendor	
K0632	N	4/1/2004	Sacroiliac orthosis, provides pelvic-sacral support, with rigid or semirigid panels over the sacrum and abdomen , reduces motion about the sacroiliac joint, includes straps, closures, may include pendulous abdomen design, prefabricated, includes fitting and adjustment	Home use, usually supplied by DME vendor	
K0633	N	4/1/2004	Sacroiliac orthosis, provides pelvic-sacral support, with rigid or semirigid panels placed over the sacrum and abdomen, reduces motion about the sacroiliac joint, includes straps, closures, may include pendulous abdomen design, custom fabricated	Home use, usually supplied by DME vendor	
K0634	N	4/1/2004	Lumbar orthosis, flexible, provides lumbar support, posterior extends from L-1 to below L-5 vertebra, produces intracavitary pressure to reduce load on the intervertebral discs, includes straps, closures, may include pendulous abdomen design, shoulder straps, stays, prefabricated, includes fitting and adjustment	Home use, usually supplied by DME vendor	
K0635	N	4/1/2004	Lumbar orthosis, sagittal control, with rigid posterior panel(s), posterior extends from L-1 to below L-5 vertebrae, produces intracavitary pressure to reduce load on the intervertebral discs, includes straps, closures, may include padding, stay, shoulder straps, pendulous abdomen design, prefabricated, includes fitting and adjustment	Home use, usually supplied by DME vendor	
K0636	N	4/1/2004	Lumbar orthosis, sagittal control, with rigid anterior and posterior panels, posterior extends from L-1 to below L-5 vertebra, produces intracavitary pressure to reduce load on the intervertebral discs, includes straps, closures, may include padding, shoulder straps, pendulous abdomen design, prefabricated, includes fitting and adjustment	Home use, usually supplied by DME vendor	
K0637	N	4/1/2004	Lumbar-sacral orthosis, flexible, provides lumbo-sacral support, posterior extends from sacrococcygeal junction to T-9 vertebra, produces intracavitary pressure to reduce load on the intervertebral discs, includes straps, closures, may include stays, shoulder straps, pendulous abdomen design, prefabricated, includes fitting and adjustment	Home use, usually supplied by DME vendor	

K0638	N	4/1/2004	Lumbar-sacral orthosis, flexible, provides lumbo-sacral support, posterior extends from sacrococcygeal junction to T-9 vertebra, produces intracavitary pressure to reduce load on the intervertebral discs, includes straps, closures, may include stays, shoulder straps, pendulous abdomen design, custom fabricated	Home use, usually supplied by DME vendor	
K0639	N	4/1/2004	Lumbar-sacral orthosis, sagittal control, with rigid posterior panel(s), posterior extends from sacrococcygeal junction to T-9 vertebra, produces intracavitary pressure to reduce load on the intervertebral discs, includes straps, closures, may include padding, stays, shoulder straps, pendulous abdomen design, prefabricated, includes fitting and adjustment	Home use, usually supplied by DME vendor	
K0640	N	4/1/2004	Lumbar-sacral orthosis, sagittal control, with rigid anterior and posterior panels, posterior extends from sacrococcygeal junction to T-9 vertebra, produces intracavitary pressure to reduce load on the intervertebral discs, includes straps, closures, may include padding, shoulder straps, pendulous abdomen design, prefabricated, includes fitting and adjustment	Home use, usually supplied by DME vendor	
K0641	N	4/1/2004	Lumbar-sacral orthosis, sagittal control, with rigid anterior and posterior panels, posterior extends from sacrococcygeal junction to T-9 vertebra, produces intracavitary pressure to reduce load on the intervertebral discs, includes straps, closures, may include padding, shoulder straps, pendulous abdomen design, custom fabricated	Home use, usually supplied by DME vendor	
K0642	N	4/1/2004	Lumbar-sacral orthosis, sagittal-coronal control, with rigid posterior frame/panel(s), posterior extends from sacrococcygeal junction to T-9 vertebra, lateral strength provided by rigid lateral frame/panels, produces intracavitary pressure to reduce load on intervertebral discs, includes straps, closures, may include padding stays, shoulder straps, pendulous abdomen design, prefabricated, includes fitting and adjustment	Home use, usually supplied by DME vendor	
K0643	N	4/1/2004	Lumbar-sacral orthosis, sagittal-coronal control, with rigid posterior frame/panel(s), posterior extends from sacrococcygeal junction to T-9 vertebra, lateral strength provided by rigid lateral frame/panels, produces intracavitary pressure to reduce load on intervertebral discs, includes straps, closures, may include padding, stays, shoulder straps, pendulous abdomen design, custom fabricated	Home use, usually supplied by DME vendor	
K0644	N	4/1/2004	Lumbar-sacral orthosis, sagittal-coronal control, lumbar flexion, rigid posterior frame/panels, lateral articulating design to flex the lumbar spine, posterior extends from sacrococcygeal junction to T-9 vertebra, lateral strength provided by rigid lateral frame/panels, produces intracavitary pressure to reduce load on intervertebral discs, includes straps, closures, may include padding, anterior panel, pendulous abdomen design, prefabricated, includes fitting and adjustment	Home use, usually supplied by DME vendor	
K0645	N	4/1/2004	Lumbar-sacral orthosis, sagittal-coronal control, lumbar flexion, rigid posterior frame/panels, lateral articulating design to flex the lumbar spine, posterior extends from sacrococcygeal junction to T-9 vertebra, lateral strength provided by rigid lateral frame/panels, produces intracavitary pressure to reduce load on intervertebral discs, includes straps, closures, may include padding, anterior panel, pendulous abdomen design, custom fabricated	Home use, usually supplied by DME vendor	
K0646	N	4/1/2004	Lumbar-sacral orthosis, sagittal-coronal control, with rigid anterior and posterior frame/panels, posterior extends from sacrococcygeal junction to T-9 vertebra, lateral strength provided by rigid lateral frame/panels, produces intracavitary pressure to reduce load on intervertebral discs, includes straps, closures, may include padding, shoulder straps, pendulous abdomen design, prefabricated, includes fitting and adjustment	Home use, usually supplied by DME vendor	

K0647	N	4/1/2004	Lumbar-sacral orthosis, sagittal-coronal control, with rigid anterior and posterior frame/panels, posterior extends from sacrococcygeal junction to T-9 vertebra, lateral strength provided by rigid lateral frame/panels, produces intracavitary pressure to reduce load on intervertebral discs, includes straps, closures, may include padding, shoulder straps, pendulous abdomen design, custom fabricated	Home use, usually supplied by DME vendor	
K0648	N	4/1/2004	Lumbar-sacral orthosis, sagittal-coronal control, rigid shell(s)/panel(s), posterior extends from sacrococcygeal junction to T-9 vertebra, anterior extends from symphysis pubis to xiphoid, produces intracavitary pressure to reduce load on the intervertebral discs, overall strength is provided by overlapping rigid plastic and stabilizing closures, includes straps, closures, may include soft interface, pendulous abdomen design, prefabricated, includes fitting and adjustment	Home use, usually supplied by DME vendor	
K0649	N	4/1/2004	Lumbar-sacral orthosis, sagittal-coronal control, rigid shell(s)/panel(s), posterior extends from sacrococcygeal junction to T-9 vertebra, anterior extends from symphysis pubis to xiphoid, produces intracavitary pressure to reduce load on the intervertebral discs, overall strength is provided by overlapping rigid plastic and stabilizing closures, includes straps, closures, may include soft interface, pendulous abdomen design, custom fabricated	Home use, usually supplied by DME vendor	
K0650	N	7/1/2004	General use wheelchair seat cushion, width less than 22 inches, any depth	Home use, usually supplied by DME vendor	
K0651	N	7/1/2004	General use wheelchair seat cushion, width 22 inches or greater, any depth	Home use, usually supplied by DME vendor	
K0652	N	7/1/2004	Skin protection wheelchair seat cushion, width less than 22 inches, any depth	Home use, usually supplied by DME vendor	
K0653	N	7/1/2004	Skin potection wheelchair seat cushion, width 22 inches or greater, any depth	Home use, usually supplied by DME vendor	
K0654	N	7/1/2004	Positioning wheelchair seat chushion, width less than 22 inches, any depth	Home use, usually supplied by DME vendor	
K0655	N	7/1/2004	Positioning wheelchair seat cushion, width 22 inches or greater, any depth	Home use, usually supplied by DME vendor	
K0656	N	7/1/2004	Skin protection and positioning wheelchair seat cushion, width less than 22 inches, any depth	Home use, usually supplied by DME vendor	
K0657	N	7/1/2004	Skin protection and positioning wheelchair seat cushion, width 22 inches or greater, any depth	Home use, usually supplied by DME vendor	
K0658	N	7/1/2004	Custom fabricated wheelchair seat cushion, any size	Home use, usually supplied by DME vendor	
K0659	N	7/1/2004	Wheelchair seat cushion, powered	Home use, usually supplied by DME vendor	
K0660	N	7/1/2004	General use wheelchair back cushion, width less than 22 inches, any height, including any type mounting hardware	Home use, usually supplied by DME vendor	
K0661	N	7/1/2004	General use wheelchair back cushion, width 22 inches or greater, any height, including any type mounting hardware	Home use, usually supplied by DME vendor	
K0662	N	7/1/2004	Positioning wheelchair back cushion, posterior, width less than 22 inches, any height, including any type mounting hardware	Home use, usually supplied by DME vendor	
K0663	N	7/1/2004	Positioning wheelchair back cushion, posterior, width 22 inches or greater, any height, including any type mounting hardware	Home use, usually supplied by DME vendor	
K0664	N	7/1/2004	Positioning wheelchair back cushion, posterior-lateral, width less than 22 inches, any height, including any type mounting hardware	Home use, usually supplied by DME vendor	

K0665	N	7/1/2004	Positioning wheelchair back cushion, posterior-lateral width 22 inches or greater, any height, including any type mounting hardware	Home use, usually supplied by DME vendor	
K0666	N	7/1/2004	Custom fabricated wheelchair back cushion, any size, including any type mounting hardware	Home use, usually supplied by DME vendor	
K0667	N	7/1/2004	Mounting hardware, any type, for seat cushion or seat support base attached to a manual wheelchair or lightweight power wheelchair, per cushion/base	Home use, usually supplied by DME vendor; noncovered	
K0668	N	7/1/2004	Replacement cover for wheelchair seat cushion or back cushion, each	Home use, usually supplied by DME vendor	
K0669	N	7/1/2004	Wheelchair seat or back cushion, no written coding verification from SADMERC	Home use, usually supplied by DME vendor	
KD	N	1/1/2004	Drug or biological infused through DME	Informational modifier	
KF	N	4/1/2004	Item designated by FDA as Class III device	Informational modifier	
S0116	N	7/1/2004	Bevacizumab 100 mg		
S0117	N	7/1/2004	Tretinoin Topical 5 grams	Topical medications are a pharmacy benefit	
S0158	N	4/1/2004	Injection, laronidase, 0.58 mg		
S0159	N	4/1/2004	Injection, agalsidase beta, 35 mg		
S0160	N	4/1/2004	Dextroamphetamine sulfate, 5 mg (oral)	Oral medications are a pharmacy benefit	
S0161	N	4/1/2004	Calcitrol, 0.25 mcg (oral)	Oral medications are a pharmacy benefit	
S0162	N	4/1/2004	Injection, efalizumab, 125 mg		
S0163	N	4/1/2004	Injection, risperidone, long acting, 12.5 mg		
S0164	N	4/1/2004	Injection, pantoprazole sodium, 40 mg		
S0165	N	4/1/2004	Injection, abarelix, 100 mg		
S0194	N	4/1/2004	Dialysis/stress vitamin supplement, oral, 100 capsules	Oral medications are a pharmacy benefit	
S0199	C	4/1/2004	Medically induced abortion by oral ingestion of medication including all associated services and supplies (e.g., patient counseling, office visits, confirmation of pregnancy by HCG, ultrasound to confirm duration of pregnancy, ultrasound to confirm complete abortion.) except drugs	Submit under appropriate CPT code	
S0618	N	4/1/2004	Audiometry for hearing aid evaluation to determine the level and degree of hearing loss	Submit under existing CPT code	
S0830	D	3/31/2004			
S2082	N	4/1/2004	Laparoscopy, surgical; gastric restrictive procedure, adjustable gastric band includes placement of subcutaneous port	April, 2004 <i>Connections</i> , page 14, for information	
S2083	N	4/1/2004	Adjustment of gastric band diameter via subcutaneous port by injection or aspiration of saline	April, 2004 <i>Connections</i> , page 14, for information	
S2131	N	4/1/2004	Endovascular laser ablation of long or short saphenous vein, with or without proximal ligation or division	Currently under review	
S2150	C	4/1/2004	Bone marrow or blood-derived stem cells (peripheral or umbilical) harvesting and transplantation , allogenic or autologous, harvesting, transplantation, and related complications ; including: pheresis and cell preparation/storage; marrow ablative therapy; drugs; supplies; hospitalization with outpatient follow-up; medical/surgical, diagnostic, emergency, and rehabilitative services; and the number of days of pre- and post-transplant care in the global definition high dose chemotherapy, and the number of days of post transplant care in the global definition (including drugs; hospitalization; medical, surgical, diagnostic and emergency services)	Strikeouts per CMS code definition change	

S2152	N	4/1/2004	Solid organ(s), complete or segmental, single organ or combination of organs; deceased or living donor(s), procurement, transplantation, and related complications; including: drugs; supplies; hospitalization with outpatient follow-up; medical/surgical, diagnostic, emergency, and rehabilitative services; and the number of days of pre-and post-transplant care in the global definition	Submit services under the appropriate CPT code(s)	
S2255	N	4/1/2004	Hysteroscopy, surgical; with occlusion of oviducts bilaterally by micro-inserts for permanent sterilization	Investigative; policy on medica.com	
S3890	N	4/1/2004	DNA analysis, fecal, for colorectal cancer screening	Submit services under the appropriate CPT or HCPCS code(s)	
S8301	N	7/1/2004	Infection control supplies, not otherwise specified	Will deny as bundled with primary procedure	
S9976	N	4/1/2004	Lodging, per diem, not otherwise specified	Noncovered	
S9977	N	4/1/2004	Meals, per diem, not otherwise specified	Noncovered	
S9988	N	4/1/2004	Services provided as part of a phase 1 clinical trial	Noncovered	
SW	N	4/1/2004	Services provided by a certified diabetic educator	Informational modifier	
T2005	C	7/1/2004	Non-emergency transportation; non-ambulatory stretcher van		
T2049	N	7/1/2004	Non-emergency transportation; stretcher van, mileage; per mile	Currently under review	
WW089	N	7/1/2004	Capecitabine 150 mg oral	Submit under code J8520	
WW096	N	7/1/2004	Capecitabine 500 mg oral	Submit under code J8521	
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