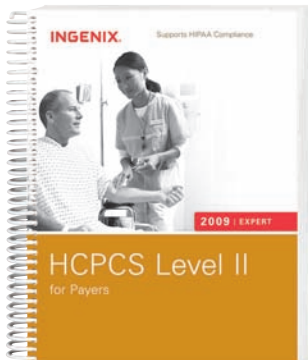


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<p>♀ Female Only This icon identifies procedures that should only be reported for female patients.</p>	<p>A4280 Adhesive skin support attachment for use with external breast prosthesis, each </p>
<p>♂ Male Only This icon identifies procedures that should only be reported for male patients.</p>	<p>A4326 Male external catheter specialty type with integral collection chamber, any type, each </p>
<p>🗓 Age Edit This icon denotes codes intended for use with a specific age group, such as neonate, newborn, pediatric, and adult. Carefully review the code description to assure the code you report most appropriately reflects the patient's age.</p>	<p>D8010 Limited orthodontic treatment of the primary dentition </p>
<p>👩 Maternity This icon identifies procedures that by definition should only be used for maternity patients generally between 12 and 55 years of age.</p>	<p>H1001 Prenatal care, at-risk enhanced service; antepartum management </p>
<p>📁-📁 ASC Groupings Codes designated as being paid by ASC groupings that were effective at the time of printing are denoted by the group number.</p>	<p>G0105 Colorectal cancer screening; colonoscopy on individual at high risk </p>
<p>🏠 DMEPOS Use this icon to identify when to consult the CMS DMEPOS for payment of this durable medical item.</p>	<p>A4600 Sleeve for intermittent limb compression device, replacement only, each </p>
<p>🏥 Skilled Nursing Facility (SNF) Use this icon to identify certain items and services excluded from skilled nursing facility consolidated billing. These items may be billed directly to the Medicare contractor by the provider or supplier of the service or item.</p>	<p>A4653 Peritoneal dialysis catheter anchoring device, belt, each </p>
<p>Ingenix provides explanatory information in blue beneath many codes. These annotations help you better understand the code and its billing.</p>	<p>J7191 Factor VIII (anti-hemophilic factor (porcine), per IU) Use this code for Hyate-C. Medicare jurisdiction: local contractor.</p>
<p>Drugs commonly reported with a code are listed underneath by brand or generic name.</p>	<p>J7193 Factor IX (antihemophilic factor, purified, non-recombinant) per IU Use this code for AlphaNine SD, Mononine.</p>
<p>"See" references help determine related or alternate codes for the supply or service.</p>	<p>S0147 Injection, alglucosidase alfa, 20 mg Use this code for Myozyme See also code: C9234</p>
<p>CMS does not use consistent terminology when a code for a specific procedure is not listed. The code description may include any of the following terms: unlisted, not otherwise classified (NOC), unspecified, unclassified, other, and miscellaneous. If you are sure there is no code for the service or supply provided or used, be sure to provide adequate documentation to the payer. Check with the payer for more information.</p>	<p>A0999 Unlisted ambulance service</p>

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OPPS Status Indicators

APC Status Indicators

Status indicators identify how individual HCPCS Level II codes are paid or not paid under the OPPS. The same status indicator is assigned to all the codes within an APC. Consult the payer or resource to learn which CPT codes fall within various APCs. Status indicators for HCPCS and their definitions are below:

Indicates services that are paid under some other method such as the DMEPOS fee schedule or the physician fee schedule

Indicates codes not allowed or paid under OPPS

Indicates inpatient services that are not paid under the OPPS

Indicates services for which payment is not allowed under the OPPS. In some instances, the service is not covered by Medicare. In other instances, Medicare does not use the code in question but does use another code to describe the service

Indicates corneal tissue acquisition costs, certain CRNA services and hepatitis B vaccines that are paid at reasonable cost

Indicates a current drug or biological for which payment is made under the transitional pass-through provisions

Indicates either a device paid under pass-through provisions; or brachytherapy sources and radiopharmaceuticals that are paid at reasonable cost

Indicates non-pass-through drugs and biologicals.

Indicates influenza or pneumococcal pneumonia vaccine paid as of reasonable cost with no deductible or coinsurance

Indicates that this code should not be reported by hospitals to their fiscal intermediary

Indicates services that are incidental, with payment packaged into another service or APC group

Indicates services paid only in partial hospitalization programs

Indicates significant procedures for which payment is allowed under the hospital OPPS but to which the multiple procedure reduction does not apply

Indicates surgical services for which payment is allowed under the hospital OPPS. Services with this payment indicator are the only ones to which the multiple procedure payment reduction applies.

Indicates visits for which payment is allowed under the hospital OPPS

Indicates ancillary services for which payment is allowed under the hospital OPPS

Indicates nonimplantable durable medical equipment (DME) that is billed by providers other than home health agencies to the DMERC

- A4321** Therapeutic agent for urinary catheter irrigation
- Q4005** Cast supplies, long arm cast, adult (11 years +), plaster
- G0341** Percutaneous islet cell transplant, includes portal vein catheterization and infusion
- A0021** Ambulance service, outside state per mile, transport (Medicaid only)
- V2785** Processing, preserving and transporting corneal tissue
- J0129** Injection, abatacept, 10 mg
- A9505** Thallium Tl-201 thallos chloride, diagnostic, per millicurie
- Q9954** Oral magnetic resonance contrast agent, per 100 ml
- G0008** Administration of influenza virus vaccine when no physician fee schedule service on the same day
- G0333** Dispense fee initial 30 day
- A4220** Refill kit for implantable infusion pump
- G0177** Training and educational services related to the care and treatment of patient's disabling mental health problems per session (45 minutes or more)
- G0251** Linear accelerator based stereotactic radiosurgery, delivery including collimator changes and custom plugging, fractionated treatment, all lesions, per session, maximum five sessions per course of treatment
- C9724** Endoscopic full-thickness plication in the gastric cardia using endoscopic plication system (EPS); includes endoscopy
- G0101** Cervical or vaginal cancer screening; pelvic and clinical breast examination
- Q0035** Cardiokymography
- A4222** Infusion supplies for external drug infusion pump, per cassette or bag (list drugs separately)

MED: This notation precedes an instruction pertaining to this code in the Centers for Medicare and Medicaid Services' (CMS) Publication 100 (Pub 100) electronic manual or in a National Coverage Determination (NCD). These CMS sources, formerly called the Medicare Carriers Manual (MCM) and Coverage Issues Manual (CIM), present the rules for submitting these services to the federal government or its contractors and are included in the appendix of this book

A4300 Implantable access catheter, (e.g., venous, arterial, epidural subarachnoid, or peritoneal, etc.) external access
MED: 100-2, 15, 120

AHA: American Hospital Association Coding Clinic for HCPCS citations help you find expanded information about specific codes and their usage.

A4290 Sacral nerve stimulation test lead, each
AHA: 1Q, 02, 9

Current as of 11/22/2006

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