

Quarterly Update to the Medicare Physician Fee Schedule Database (MPFSDB) - April 2019 Update

MLN Matters Number: MM11163 Revised Related Change Request (CR) Number: 11163

Related CR Release Date: March 18, 2019 Effective Date: January 1, 2019

Related CR Transmittal Number: R4258CP Implementation Date: April 1, 2019

Note: We revised this article on March 19, 2019, to reflect an updated Change Request (CR) that revised the attachment for codes G2014 and G2015 (see page 2 below). The CR release date, transmittal number and link to the transmittal was also changed. All other information remains the same.

PROVIDER TYPES AFFECTED

This MLN Matters Article is for physicians, providers and suppliers billing Medicare Administrative Contractors (MACs) for services provided to Medicare beneficiaries.

PROVIDER ACTION NEEDED

This article informs you that the Centers for Medicare & Medicaid Services (CMS) has issued payment files to the MACs based upon the 2019 Medicare Physician Fee Schedule (MPFS) Final Rule. CR 11163 amends those payment files. Please be sure your billing staffs are aware of these changes.

BACKGROUND

The 2019 Medicare Physician Fee Schedule (MPFS) Final Rule, published in the Federal Register on November 23, 2018, is effective for services furnished between January 1, 2019, and December 31, 2019.

Below is a summary of the changes for the April update to the 2019 Medicare Physician Fee Schedule Database (MPFSD). These changes are effective for dates of service on and after January 1, 2019. CMS has added new HCPCS codes (G2001-G2009 and G2013-G2015) to the 2019 MPFSDB and updated another code (G9987) as shown in the table below. CMS communicated instructions for these new codes (G2001-G2009 and G2013-G2015) through a separate CR (CR 10907). Please consult MLN Matters article MM10907 at https://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNMattersArticles/Downloads/MM10907.pdf for these instructions and other information.





Table: April Updates to the 2019 MPFSD

HCPCS	ACTION
G9987	Assistant Surgery, Co-Surgeon, & Team Surgeon indicator = 9
G2001	All MPFS indicators and RVUs = 99341
G2002	All MPFS indicators and RVUs = 99342
G2003	All MPFS indicators and RVUs = 99343
G2004	All MPFS indicators and RVUs = 99344
G2005	All MPFS indicators and RVUs = 99345
G2006	All MPFS indicators and RVUs = 99347
G2007	All MPFS indicators and RVUs = 99348
G2008	All MPFS indicators and RVUs = 99349
G2009	All MPFS indicators and RVUs = 99350
G2013	All MPFS indicators and RVUs = 99345

G2014 - Procedure Status = A; RVUs = Work 1.25, Non-Facility .85, Facility .85, MP 0.07, Multiple Surgery = 0, Bilateral Surgery = 0, Assistant at Surgery = 0, Co-Surgeons = 0, Team Surgeons = 0, PC/TC = 0

G2015 - Procedure Status = A; RVUs = Work 1.80, Non-Facility 1.14, Facility 1.14, MP .11, Multiple Surgery = 0, Bilateral Surgery = 0, Assistant at Surgery = 0, Co-Surgeons = 0, Team Surgeons = 0, PC/TC = 0

Note: MACs will not search their files to retract payment for claims already paid or to retroactively pay claims. However, MACs will adjust claims that you bring to their attention.

ADDITIONAL INFORMATION

The official instruction, CR11163, issued to your MAC regarding this change, is available at https://www.cms.gov/Regulations-and-
Guidance/Guidance/Transmittals/2019Downloads/R4258CP.pdf.





If you have questions, your MACs may have more information. Find their website at http://go.cms.gov/MAC-website-list.

DOCUMENT HISTORY

Date of Change	Description
March 19, 2019	We revised this article to reflect an updated CR that revised the attachment for codes G2014 and G2015 (see page 2 above). The CR release date, transmittal number and link to the transmittal was also changed.
February 8, 2019	Initial article released.

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