

<b>CMS Manual System</b>	<b>Department of Health &amp; Human Services (DHHS)</b>
<b>Pub 100-04 Medicare Claims Processing</b>	<b>Centers for Medicare &amp; Medicaid Services (CMS)</b>
<b>Transmittal 1992</b>	<b>Date: June 25, 2010</b>
	<b>Change Request 6974</b>

**SUBJECT: July Update to the 2010 Medicare Physician Fee Schedule Database (MPFSDB)**

**I. SUMMARY OF CHANGES:** Payment files were issued to contractors based upon the 2010 Medicare Physician Fee Schedule (MPFS) Final Rule. This change request amends those payment files. This Recurring Update Notification applies to Chapter 23, Section 30.1.

**EFFECTIVE DATE: January 1, 2010**

**IMPLEMENTATION DATE: July 6, 2010**

*Disclaimer for manual changes only: The revision date and transmittal number apply only to red italicized material. Any other material was previously published and remains unchanged. However, if this revision contains a table of contents, you will receive the new/revised information only, and not the entire table of contents.*

**II. CHANGES IN MANUAL INSTRUCTIONS:** (N/A if manual is not updated)

R=REVISED, N=NEW, D=DELETED-Only One Per Row.

<b>R/N/D</b>	<b>CHAPTER / SECTION / SUBSECTION / TITLE</b>
N/A	

**III. FUNDING:**

**For Fiscal Intermediaries (FIs), Regional Home Health Intermediaries (RHHIs) and/or Carriers:**

No additional funding will be provided by CMS; Contractor activities are to be carried out within their operating budgets.

**For Medicare Administrative Contractors (MACs):**

The Medicare Administrative Contractor is hereby advised that this constitutes technical direction as defined in your contract. CMS does not construe this as a change to the MAC Statement of Work. The contractor is not obligated to incur costs in excess of the amounts allotted in your contract unless and until specifically authorized by the Contracting Officer. If the contractor considers anything provided, as described above, to be outside the current scope of work, the contractor shall withhold performance on the part(s) in question and immediately notify the Contracting Officer, in writing or by e-mail, and request formal directions regarding continued performance requirements.

**IV. ATTACHMENTS:**

**Recurring Update Notification**

*\*Unless otherwise specified, the effective date is the date of service.*

# Attachment – Recurring Update Notification

Pub. 100-04	Transmittal: 1992	Date: June 25, 2010	Change Request: 6974
-------------	-------------------	---------------------	----------------------

**SUBJECT:** July Update to the 2010 Medicare Physician Fee Schedule Database (MPFSDB)

**EFFECTIVE DATE:** January 1, 2010 (unless otherwise stated in this transmittal)

**IMPLEMENTATION DATE:** July 6, 2010

## I. GENERAL INFORMATION

**A. Background:** Payment files were issued to contractors based upon the 2010 Medicare Physician Fee Schedule (MPFS) Final Rule. This change request (CR) amends those payment files.

**B. Policy:** Section 1848(c)(4) of the Social Security Act authorizes the Secretary to establish ancillary policies necessary to implement relative values for physicians' services.

### **Reduction in the Technical Component (TC) Payment for Imaging Services Paid Under the Physician Fee Schedule (PFS) to the Outpatient Department**

Section 5102(b)(1) of the Deficit Reduction Act of 2005 (Pub. L. 109–171) (DRA) capped the technical component (TC) of most imaging services paid under the PFS at the amount paid under the Outpatient Prospective Payment System (OPPS). OPPS payment amounts were inadvertently not included on previous payment files for CPT codes 76510, 76820, 76821, 78811, 78812, 78813, 78814, 78815, and 78816. Revised OPPS payment amounts for these codes are included on the payment files associated with this CR, where applicable.

### **Payment for Bone Density Tests**

Section 3111 of the Patient Protection and Affordable Care Act (Pub. L. 111-148) (the Affordable Care Act) adjusted the payment amounts for bone density tests. As a result, CPT codes 77080 and 77082 are no longer subject to the payment cap on the TC or the TC portion of the global as previously mandated by Section 5102(b)(1) of the DRA.

### **Miscellaneous Coding Changes**

The following coding changes were included in the payment files associated with Transmittal 700, Change Request 6973, dated May 10, 2010, Revised Payment Files for the 2010 Medicare Physician Fee Schedule Database (MPFSDB) and Retroactive Provisions under the Patient Protection and Affordable Care Act (Pub. L. 111-148) (the Affordable Care Act).

CPT/HCPCS	Action
11970	Bilateral Indicator = 1
11971	Bilateral Indicator = 1
80101	Procedure Status = I

## II. BUSINESS REQUIREMENTS TABLE

Use "Shall" to denote a mandatory requirement

Number	Requirement	Responsibility (place an "X" in each applicable column)
--------	-------------	---

		A / B  M A C	D M E  M A C	F I	C A R R I E R	R H H I	Shared-System Maintainers				OTHER
							F I S S	M C S	V M S	C W F	
6974.1	Contractors shall manually adjust the effective date for HCPCS codes G0429, Q2026, and Q2027 on the procedure code file, the MPFSDB, or appropriate on-line files to reflect an effective date of March 23, 2010.	X		X	X		X			X	
6974.2	Contractors shall manually adjust the effective date for HCPCS code G0428 on the procedure code file, the MPFSDB, or appropriate on-line files to reflect an effective date of May 25, 2010.	X		X	X		X			X	
6974.3	Medicare contractors need not search their files to either retract payment for claims already paid or to retroactively pay claims. However, contractors shall adjust claims brought to their attention.	X		X	X						
6974.4	Medicare contractors shall retrieve the revised payment files, as identified in Attachment 2, from the CMS Mainframe Telecommunications System. Files were made available for retrieval on June 21, 2010.	X		X	X	X	X				
6974.5	CMS will send CWF two files to facilitate duplicate billing edits: 1) Purchased Diagnostic and 2) Duplicate Radiology Editing. CWF shall install these files into their systems. CWF will be notified via email when these files have been sent to them.									X	
6974.6	Medicare contractors shall send notification of successful receipt via email to <a href="mailto:price_file_receipt@cms.hhs.gov">price_file_receipt@cms.hhs.gov</a> stating the name of the file received and the entity for which it was received (e.g., carrier/fiscal intermediary name and number).	X		X	X	X					

### III. PROVIDER EDUCATION TABLE

Number	Requirement	Responsibility (place an "X" in each applicable column)									
		A / B  M A C	D M E  M A C	F I	C A R R I E R	R H H I	Shared-System Maintainers				OTHER
						F I S S	M C S	V M S	C W F		
6974.7	A provider education article related to this instruction will be available at <a href="http://www.cms.hhs.gov/MLNMattersArticles/">http://www.cms.hhs.gov/MLNMattersArticles/</a> shortly after the CR is released. You will receive notification of the article release via the established "MLN Matters" listserv. Medicare contractors shall post this article, or a direct link to this article, on their Web site and include	X		X	X						

Number	Requirement	Responsibility (place an "X" in each applicable column)									
		A / B  M A C	D M E  M A C	F I	C A R R I E R	R H I	Shared-System Maintainers				OTHER
							F I S S	M C S	V M S	C W F	
	information about it in a listserv message within one week of the availability of the provider education article. In addition, the provider education article shall be included in your next regularly scheduled bulletin. Medicare contractors are free to supplement MLN Matters articles with localized information that would benefit their provider community in billing and administering the Medicare program correctly.										

**IV. SUPPORTING INFORMATION**

**A. For any recommendations and supporting information associated with listed requirements, use the box below: N/A**

*Use "Should" to denote a recommendation.*

X-Ref Requirement Number	Recommendations or other supporting information:

**B. For all other recommendations and supporting information, use this space: N/A**

**V. CONTACTS**

**Pre-Implementation Contact(s):** Gaysha Brooks, [Gaysha.Brooks@cms.hhs.gov](mailto:Gaysha.Brooks@cms.hhs.gov), (410) 786-9649

**Post-Implementation Contact(s):** Appropriate Regional Office

**VI. FUNDING**

**A. For Fiscal Intermediaries and Carriers:**

No additional funding will be provided by CMS; contractor activities are to be carried out within their operating budgets.

**B. For Medicare Administrative Contractors (MACs):**

The Medicare Administrative Contractor is hereby advised that this constitutes technical direction as defined in your contract. CMS does not construe this as a change to the Statement of Work (SOW). The contractor is not obligated to incur costs in excess of the amounts allotted in your contract unless and until specifically authorized by the Contracting Officer. If the contractor considers anything provided, as described above, to be outside the current scope of work, the contractor shall withhold performance on

the part(s) in question and immediately notify the Contracting Officer, in writing or by e-mail, and request formal directions regarding continued performance requirements.

**Attachments: (2)**

## Attachment 1

Changes included in the July Update to the 2010 Medicare Physician Fee Schedule Database (MPFSDB) are as follows:

**The following changes are effective for dates of service on and after January 1, 2010 and are included on File A:**

<u>CPT/HCPCS</u>	<u>ACTION</u>
36148	Multiple Procedure Indicator = 0
74261	Multiple Procedure Indicator = 4 Diagnostic Family Imaging Indicator = 02
74261 - TC	Multiple Procedure Indicator = 4 Diagnostic Family Imaging Indicator = 02
74262	Multiple Procedure Indicator = 4 Diagnostic Family Imaging Indicator = 02
74262 - TC	Multiple Procedure Indicator = 4 Diagnostic Family Imaging Indicator = 02
97026	Procedure Status = R

**Pharmacogenomic Testing for Warfarin Response**

HCPCS code G9143 was implemented with the 2010 HCPCS file with an effective date of August 3, 2009. Currently contractors have a 2010 MPFSDB record but not a 2009 MPFSDB record. Contractors were instructed in Joint Signature Memorandum/Technical Direction Letter (JSM/TDL) 10219 to manually add this code to the procedure code file and the MPFSDB effective for dates of service on or after August 3, 2009.

**CPT Code 90470**

CPT code 90470 became effective on September 28, 2009. However, due to an off cycle effective date it was not included on the MPFSDB for 2009. Contractors were instructed in JSM/TDL 10219 to manually add this code to the procedure code file and the MPFSDB effective for dates of service on or after September 28, 2009.

**Screening for the Human Immunodeficiency Virus (HIV) Infection**

On December 8, 2009, CMS issued a coverage determination (Transmittal 118, Change Request 6786, dated March 23, 2010) on the screening for HIV infection. Contractors were instructed in JSM/TDL 10219 to manually add HCPCS codes G0432, G0433 and G0435 to the procedure code file and MPFSDB effective for dates of service on or after December 8, 2009.

**Outpatient Intravenous Insulin Treatment (OIVIT)**

On December 23, 2009, CMS issued a non-coverage decision (Transmittal 114, Change Request 6775, dated February 22, 2010) on the use of OIVIT. Contractors were instructed in JSM/TDL

10219 to manually add HCPCS code G9147 to the procedure code file and MPFSDB effective for dates of service on or after December 23, 2009.

**Dermal Injections for Treatment of Facial Lipodystrophy Syndrome (LDS)**

In this change request, contractors are being instructed to manually adjust the effective date for HCPCS codes G0429, Q2026, and Q2027 on the procedure code file and the MPFSDB. HCPCS codes G0429, Q2026, and Q2027 are effective for dates of service on or after March 23, 2010. See BR 6974.1 for details.

G0429 Long Descriptor: Dermal Filler injection(s) for the treatment of facial lipodystrophy syndrome (LDS) (e.g., as a result of highly active antiretroviral therapy)

Short Descriptor: Dermal filler inject for LDS  
Procedure Status: A  
WRVU: 1.19  
Transitional Non-Facility PE RVU: 1.30  
Fully Implemented Non-Facility PE RVU: 1.45  
Transitional Facility PE RVU: 0.58  
Fully Implemented Facility PE RVU: 0.74  
Malpractice RVU: 0.18  
PC/TC: 0  
Site of Service: 1  
Global Surgery: 000  
Multiple Procedure Indicator: 2  
Bilateral Surgery Indicator: 0  
Assistant at Surgery Indicator: 0  
Co-Surgery Indicator: 0  
Team Surgery Indicator: 0  
Physician Supervision Diagnostic Indicator: 09  
Type of Service: 2  
Diagnostic Family Imaging Indicator: 99

Q2026 Long Descriptor: Injection, Radiesse, 0.1ml

Short Descriptor: Radiesse injection  
Procedure Status: E  
WRVU: 0.00  
Transitional Non-Facility PE RVU: 0.00  
Fully Implemented Non-Facility PE RVU: 0.00  
Transitional Facility PE RVU: 0.00  
Fully Implemented Facility PE RVU: 0.00  
Malpractice RVU: 0.00  
PC/TC: 9  
Site of Service: 9  
Global Surgery: XXX  
Multiple Procedure Indicator: 9

Bilateral Surgery Indicator: 9  
Assistant at Surgery Indicator: 9  
Co-Surgery Indicator: 9  
Team Surgery Indicator: 9  
Physician Supervision Diagnostic Indicator: 09  
Type of Service: 1, 9  
Diagnostic Family Imaging Indicator: 99

Q2027

Long Descriptor: Injection, Sculptra, 0.1ml

Short Descriptor: Sculptra injection  
Procedure Status: E  
WRVU: 0.00  
Transitional Non-Facility PE RVU: 0.00  
Fully Implemented Non-Facility PE RVU: 0.00  
Transitional Facility PE RVU: 0.00  
Fully Implemented Facility PE RVU: 0.00  
Malpractice RVU: 0.00  
PC/TC: 9  
Site of Service: 9  
Global Surgery: XXX  
Multiple Procedure Indicator: 9  
Bilateral Surgery Indicator: 9  
Assistant at Surgery Indicator: 9  
Co-Surgery Indicator: 9  
Team Surgery Indicator: 9  
Physician Supervision Diagnostic Indicator: 09  
Type of Service: 1, 9  
Diagnostic Family Imaging Indicator: 99

### **Collagen Meniscus Implant**

In this change request, contractors are being instructed to manually adjust the effective date for HCPCS code G0428 on the procedure code file and the MPFSDB. HCPCS code G0428 is effective for dates of service on or after May 25, 2010. See BR 6974.2 for details.

G0428

Long Descriptor: Collagen Meniscus Implant procedure for filling meniscal defects (e.g., CMI, collagen scaffold, Menaflex)

Short Descriptor: Collagen Meniscus Implant  
Procedure Status: N  
WRVU: 0.00  
Transitional Non-Facility PE RVU: 0.00  
Fully Implemented Non-Facility PE RVU: 0.00  
Transitional Facility PE RVU: 0.00  
Fully Implemented Facility PE RVU: 0.00  
Malpractice RVU: 0.00

PC/TC: 9  
 Site of Service: 9  
 Global Surgery: XXX  
 Multiple Procedure Indicator: 9  
 Bilateral Surgery Indicator: 9  
 Assistant at Surgery Indicator: 9  
 Co-Surgery Indicator: 9  
 Team Surgery Indicator: 9  
 Physician Supervision Diagnostic Indicator: 09  
 Type of Service: 2  
 Diagnostic Family Imaging Indicator: 99

**The following changes are effective for dates of service on and after July 1, 2010 and are included on File B:**

CPT/HCPCS                      ACTION

0223T                      Long Descriptor: Acoustic cardiography, including automated analysis of combined acoustic and electrical intervals; single, with interpretation and report

Short Descriptor: Acoustic/electr cardgrphy  
 Procedure Status: C  
 WRVU: 0.00  
 Transitional Non-Facility PE RVU: 0.00  
 Fully Implemented Non-Facility PE RVU: 0.00  
 Transitional Facility PE RVU: 0.00  
 Fully Implemented Facility PE RVU: 0.00  
 Malpractice RVU: 0.00  
 PC/TC: 0  
 Site of Service: 1  
 Global Surgery: XXX  
 Multiple Procedure Indicator: 0  
 Bilateral Surgery Indicator: 0  
 Assistant at Surgery Indicator: 0  
 Co-Surgery Indicator: 0  
 Team Surgery Indicator: 0  
 Physician Supervision Diagnostic Indicator: 09  
 Type of Service: 4  
 Diagnostic Family Imaging Indicator: 99

0224T                      Long Descriptor: Acoustic cardiography, including automated analysis of combined acoustic and electrical intervals; multiple, including serial trended analysis and limited reprogramming of device parameter – AV or VV delays only, with interpretation and report

Short Descriptor: Acstic/elec cardgrphy av/vv

Procedure Status: C  
WRVU: 0.00  
Transitional Non-Facility PE RVU: 0.00  
Fully Implemented Non-Facility PE RVU: 0.00  
Transitional Facility PE RVU: 0.00  
Fully Implemented Facility PE RVU: 0.00  
Malpractice RVU: 0.00  
PC/TC: 0  
Site of Service: 1  
Global Surgery: XXX  
Multiple Procedure Indicator: 0  
Bilateral Surgery Indicator: 0  
Assistant at Surgery Indicator: 0  
Co-Surgery Indicator: 0  
Team Surgery Indicator: 0  
Physician Supervision Diagnostic Indicator: 09  
Type of Service: 4  
Diagnostic Family Imaging Indicator: 99

0225T

Long Descriptor: Acoustic cardiography, including automated analysis of combined acoustic and electrical intervals; multiple, including serial trended analysis and limited reprogramming of device parameter – AV and VV delays, with interpretation and report

Short Descriptor: Acstic/elec cardgrphy av+vv  
Procedure Status: C  
WRVU: 0.00  
Transitional Non-Facility PE RVU: 0.00  
Fully Implemented Non-Facility PE RVU: 0.00  
Transitional Facility PE RVU: 0.00  
Fully Implemented Facility PE RVU: 0.00  
Malpractice RVU: 0.00  
PC/TC: 0  
Site of Service: 1  
Global Surgery: XXX  
Multiple Procedure Indicator: 0  
Bilateral Surgery Indicator: 0  
Assistant at Surgery Indicator: 0  
Co-Surgery Indicator: 0  
Team Surgery Indicator: 0  
Physician Supervision Diagnostic Indicator: 09  
Type of Service: 4  
Diagnostic Family Imaging Indicator: 99

0226T

Long Descriptor: Anoscopy, high resolution (HRA) (with magnification and chemical agent enhancement); diagnostic, including collection of specimen(s) by brushing or washing when performed

Short Descriptor: Anosc high resol dx+-coll

Procedure Status: C

WRVU: 0.00

Transitional Non-Facility PE RVU: 0.00

Fully Implemented Non-Facility PE RVU: 0.00

Transitional Facility PE RVU: 0.00

Fully Implemented Facility PE RVU: 0.00

Malpractice RVU: 0.00

PC/TC: 0

Site of Service: 1

Global Surgery: XXX

Multiple Procedure Indicator: 0

Bilateral Surgery Indicator: 0

Assistant at Surgery Indicator: 0

Co-Surgery Indicator: 0

Team Surgery Indicator: 0

Physician Supervision Diagnostic Indicator: 09

Type of Service: 2

Diagnostic Family Imaging Indicator: 99

0227T

Long Descriptor: Anoscopy, high resolution (HRA) (with magnification and chemical agent enhancement); with biopsy(ies)

Short Descriptor: Anosc high resold x w/bx

Procedure Status: C

WRVU: 0.00

Transitional Non-Facility PE RVU: 0.00

Fully Implemented Non-Facility PE RVU: 0.00

Transitional Facility PE RVU: 0.00

Fully Implemented Facility PE RVU: 0.00

Malpractice RVU: 0.00

PC/TC: 0

Site of Service: 1

Global Surgery: XXX

Multiple Procedure Indicator: 0

Bilateral Surgery Indicator: 0

Assistant at Surgery Indicator: 0

Co-Surgery Indicator: 0

Team Surgery Indicator: 0

Physician Supervision Diagnostic Indicator: 09

Type of Service: 2

Diagnostic Family Imaging Indicator: 99

0228T

Long Descriptor: Injection(s), anesthetic agent and/or steroid, transforaminal epidural, with ultrasound guidance, cervical or thoracic; single level

Short Descriptor: Us tfrml edrl inj crv/t 1lvl

Procedure Status: C

WRVU: 0.00

Transitional Non-Facility PE RVU: 0.00

Fully Implemented Non-Facility PE RVU: 0.00

Transitional Facility PE RVU: 0.00

Fully Implemented Facility PE RVU: 0.00

Malpractice RVU: 0.00

PC/TC: 0

Site of Service: 1

Global Surgery: XXX

Multiple Procedure Indicator: 0

Bilateral Surgery Indicator: 1

Assistant at Surgery Indicator: 0

Co-Surgery Indicator: 0

Team Surgery Indicator: 0

Physician Supervision Diagnostic Indicator: 09

Type of Service: 2

Diagnostic Family Imaging Indicator: 99

0229T

Long Descriptor: Injection(s), anesthetic agent and/or steroid, transforaminal epidural, with ultrasound guidance, cervical or thoracic; each additional level (List separately in addition to code for primary procedure)

Short Descriptor: Us tfrml edrl inj crv/t +lvl

Procedure Status: C

WRVU: 0.00

Transitional Non-Facility PE RVU: 0.00

Fully Implemented Non-Facility PE RVU: 0.00

Transitional Facility PE RVU: 0.00

Fully Implemented Facility PE RVU: 0.00

Malpractice RVU: 0.00

PC/TC: 0

Site of Service: 1

Global Surgery: ZZZ

Multiple Procedure Indicator: 0

Bilateral Surgery Indicator: 1

Assistant at Surgery Indicator: 0

Co-Surgery Indicator: 0

Team Surgery Indicator: 0

Physician Supervision Diagnostic Indicator: 09  
Type of Service: 2  
Diagnostic Family Imaging Indicator: 99

0230T

Long Descriptor: Injection(s), anesthetic agent and/or steroid, transforaminal epidural, with ultrasound guidance, lumbar or sacral; single level

Short Descriptor: Us tfrml edrl inj l/s 1lv1  
Procedure Status: C  
WRVU: 0.00  
Transitional Non-Facility PE RVU: 0.00  
Fully Implemented Non-Facility PE RVU: 0.00  
Transitional Facility PE RVU: 0.00  
Fully Implemented Facility PE RVU: 0.00  
Malpractice RVU: 0.00  
PC/TC: 0  
Site of Service: 1  
Global Surgery: XXX  
Multiple Procedure Indicator: 0  
Bilateral Surgery Indicator: 1  
Assistant at Surgery Indicator: 0  
Co-Surgery Indicator: 0  
Team Surgery Indicator: 0  
Physician Supervision Diagnostic Indicator: 09  
Type of Service: 2  
Diagnostic Family Imaging Indicator: 99

0231T

Long Descriptor: Injection(s), anesthetic agent and/or steroid, transforaminal epidural, with ultrasound guidance, lumbar or sacral; each additional level (List separately in addition to code for primary procedure)

Short Descriptor: Us tfrml edrl inj l/s +1lv1  
Procedure Status: C  
WRVU: 0.00  
Transitional Non-Facility PE RVU: 0.00  
Fully Implemented Non-Facility PE RVU: 0.00  
Transitional Facility PE RVU: 0.00  
Fully Implemented Facility PE RVU: 0.00  
Malpractice RVU: 0.00  
PC/TC: 0  
Site of Service: 1  
Global Surgery: ZZZ  
Multiple Procedure Indicator: 0  
Bilateral Surgery Indicator: 1  
Assistant at Surgery Indicator: 0

Co-Surgery Indicator: 0  
Team Surgery Indicator: 0  
Physician Supervision Diagnostic Indicator: 09  
Type of Service: 2  
Diagnostic Family Imaging Indicator: 99

0232T

Long Descriptor: Injection(s), platelet rich plasma, any tissue, including image guidance, harvesting and preparation when performed

Short Descriptor: Inj plsm img guid hrvst&prep

Procedure Status: C  
WRVU: 0.00  
Transitional Non-Facility PE RVU: 0.00  
Fully Implemented Non-Facility PE RVU: 0.00  
Transitional Facility PE RVU: 0.00  
Fully Implemented Facility PE RVU: 0.00  
Malpractice RVU: 0.00  
PC/TC: 0  
Site of Service: 1  
Global Surgery: XXX  
Multiple Procedure Indicator: 0  
Bilateral Surgery Indicator: 0  
Assistant at Surgery Indicator: 0  
Co-Surgery Indicator: 0  
Team Surgery Indicator: 0  
Physician Supervision Diagnostic Indicator: 09  
Type of Service: 2  
Diagnostic Family Imaging Indicator: 99

0233T

Long Descriptor: Skin advance glycation endproducts (AGE) measurement by multi-wavelength fluorescent spectroscopy

Short Descriptor: Skn age meas spctrscopy

Procedure Status: C  
WRVU: 0.00  
Transitional Non-Facility PE RVU: 0.00  
Fully Implemented Non-Facility PE RVU: 0.00  
Transitional Facility PE RVU: 0.00  
Fully Implemented Facility PE RVU: 0.00  
Malpractice RVU: 0.00  
PC/TC: 0  
Site of Service: 1  
Global Surgery: XXX  
Multiple Procedure Indicator: 0  
Bilateral Surgery Indicator: 0

Assistant at Surgery Indicator: 0  
Co-Surgery Indicator: 0  
Team Surgery Indicator: 0  
Physician Supervision Diagnostic Indicator: 09  
Type of Service: 9  
Diagnostic Family Imaging Indicator: 99

90664

Long Descriptor: Influenza virus vaccine, pandemic formulation, live, for intranasal use

Short Descriptor: Flu vacc pandemic live nasal  
Procedure Status: X  
WRVU: 0.00  
Transitional Non-Facility PE RVU: 0.00  
Fully Implemented Non-Facility PE RVU: 0.00  
Transitional Facility PE RVU: 0.00  
Fully Implemented Facility PE RVU: 0.00  
Malpractice RVU: 0.00  
PC/TC: 9  
Site of Service: 9  
Global Surgery: XXX  
Multiple Procedure Indicator: 9  
Bilateral Surgery Indicator: 9  
Assistant at Surgery Indicator: 9  
Co-Surgery Indicator: 9  
Team Surgery Indicator: 9  
Physician Supervision Diagnostic Indicator: 09  
Type of Service: 1, V  
Diagnostic Family Imaging Indicator: 99

90666

Long Descriptor: Influenza virus vaccine, pandemic formulation, split virus, preservative free, for intramuscular use

Short Descriptor: Flu vacc pandemic no prsv im  
Procedure Status: X  
WRVU: 0.00  
Transitional Non-Facility PE RVU: 0.00  
Fully Implemented Non-Facility PE RVU: 0.00  
Transitional Facility PE RVU: 0.00  
Fully Implemented Facility PE RVU: 0.00  
Malpractice RVU: 0.00  
PC/TC: 9  
Site of Service: 9  
Global Surgery: XXX  
Multiple Procedure Indicator: 9  
Bilateral Surgery Indicator: 9

Assistant at Surgery Indicator: 9  
Co-Surgery Indicator: 9  
Team Surgery Indicator: 9  
Physician Supervision Diagnostic Indicator: 09  
Type of Service: 1, V  
Diagnostic Family Imaging Indicator: 99

90667

Long Descriptor: Influenza virus vaccine, pandemic formulation, split virus, adjuvanted, for intramuscular use

Short Descriptor: Flu vacc pandemic adj im  
Procedure Status: X  
WRVU: 0.00  
Transitional Non-Facility PE RVU: 0.00  
Fully Implemented Non-Facility PE RVU: 0.00  
Transitional Facility PE RVU: 0.00  
Fully Implemented Facility PE RVU: 0.00  
Malpractice RVU: 0.00  
PC/TC: 9  
Site of Service: 9  
Global Surgery: XXX  
Multiple Procedure Indicator: 9  
Bilateral Surgery Indicator: 9  
Assistant at Surgery Indicator: 9  
Co-Surgery Indicator: 9  
Team Surgery Indicator: 9  
Physician Supervision Diagnostic Indicator: 09  
Type of Service: 1, V  
Diagnostic Family Imaging Indicator: 99

90668

Long Descriptor: Influenza virus vaccine, pandemic formulation, split virus, for intramuscular use

Short Descriptor: Flu vacc pandemic spl t v im  
Procedure Status: X  
WRVU: 0.00  
Transitional Non-Facility PE RVU: 0.00  
Fully Implemented Non-Facility PE RVU: 0.00  
Transitional Facility PE RVU: 0.00  
Fully Implemented Facility PE RVU: 0.00  
Malpractice RVU: 0.00  
PC/TC: 9  
Site of Service: 9  
Global Surgery: XXX  
Multiple Procedure Indicator: 9  
Bilateral Surgery Indicator: 9

Assistant at Surgery Indicator: 9  
Co-Surgery Indicator: 9  
Team Surgery Indicator: 9  
Physician Supervision Diagnostic Indicator: 09  
Type of Service: 1, V  
Diagnostic Family Imaging Indicator: 99

92540 – TC	Physician Supervision Diagnostic Indicator = 02
92541 – TC	Physician Supervision Diagnostic Indicator = 02
92542 – TC	Physician Supervision Diagnostic Indicator = 02
92543 – TC	Physician Supervision Diagnostic Indicator = 02
92544 – TC	Physician Supervision Diagnostic Indicator = 02
92545 – TC	Physician Supervision Diagnostic Indicator = 02
92546 – TC	Physician Supervision Diagnostic Indicator = 02
92547	Physician Supervision Diagnostic Indicator = 02
92548 – TC	Physician Supervision Diagnostic Indicator = 02
92550	PC/TC Indicator = 9 Physician Supervision Diagnostic Indicator = 02
92552	Physician Supervision Diagnostic Indicator = 02
92553	Physician Supervision Diagnostic Indicator = 02
92555	Physician Supervision Diagnostic Indicator = 02
92556	Physician Supervision Diagnostic Indicator = 02
92557	PC/TC Indicator = 9 Physician Supervision Diagnostic Indicator = 02
92561	Physician Supervision Diagnostic Indicator = 02
92562	Physician Supervision Diagnostic Indicator = 02
92563	Physician Supervision Diagnostic Indicator = 02
92564	Physician Supervision Diagnostic Indicator = 02
92565	Physician Supervision Diagnostic Indicator = 02
92567	PC/TC Indicator = 9 Physician Supervision Diagnostic Indicator = 02

92568 PC/TC Indicator = 9  
Physician Supervision Diagnostic Indicator = 02

92570 PC/TC Indicator = 9  
Physician Supervision Diagnostic Indicator = 02

92571 Physician Supervision Diagnostic Indicator = 02  
92572 Physician Supervision Diagnostic Indicator = 02  
92575 Physician Supervision Diagnostic Indicator = 02  
92576 Physician Supervision Diagnostic Indicator = 02  
92577 Physician Supervision Diagnostic Indicator = 02

92579 PC/TC Indicator = 9  
Physician Supervision Diagnostic Indicator = 02

92582 Physician Supervision Diagnostic Indicator = 02  
92583 Physician Supervision Diagnostic Indicator = 02  
92584 Physician Supervision Diagnostic Indicator = 02  
92585 – TC Physician Supervision Diagnostic Indicator = 02  
92586 Physician Supervision Diagnostic Indicator = 02  
92587 – TC Physician Supervision Diagnostic Indicator = 02  
92588 – TC Physician Supervision Diagnostic Indicator = 02  
92601 PC/TC Indicator = 9  
Physician Supervision Diagnostic Indicator = 02

92602 PC/TC Indicator = 9  
Physician Supervision Diagnostic Indicator = 02

92603 PC/TC Indicator = 9  
Physician Supervision Diagnostic Indicator = 02

92604 PC/TC Indicator = 9  
Physician Supervision Diagnostic Indicator = 02

92620 Physician Supervision Diagnostic Indicator = 02  
92621 Physician Supervision Diagnostic Indicator = 02  
92625 Physician Supervision Diagnostic Indicator = 02  
92626 Physician Supervision Diagnostic Indicator = 02  
92627 Physician Supervision Diagnostic Indicator = 02  
92640 Physician Supervision Diagnostic Indicator = 02

Q2025 Long Descriptor: Fludarabine phosphate oral, 10mg  
Short Descriptor: Oral fludarabine phosphate  
Procedure Status: E  
WRVU: 0.00  
Transitional Non-Facility PE RVU: 0.00  
Fully Implemented Non-Facility PE RVU: 0.00  
Transitional Facility PE RVU: 0.00  
Fully Implemented Facility PE RVU: 0.00  
Malpractice RVU: 0.00  
PC/TC: 9  
Site of Service: 9  
Global Surgery: XXX  
Multiple Procedure Indicator: 9  
Bilateral Surgery Indicator: 9  
Assistant at Surgery Indicator: 9  
Co-Surgery Indicator: 9  
Team Surgery Indicator: 9  
Physician Supervision Diagnostic Indicator: 09  
Type of Service: 1, 9  
Diagnostic Family Imaging Indicator: 99

Attachment 2  
Filenames for Revised Payment Files

**File A:**

Listed below are the files that contain the 2.2% update beginning 6/1/2010. These files include the Affordable Care Act updates, the July release updates for codes that have an effective date prior to 7/1/2010, and corrected Outpatient Prospective Payment System (OPPS) caps for Positron Emission Tomography (PET) and Bone Density Scan codes. Note that the carrier payment file (C00000) is a complete replacement.

Carrier Files:

[MU00.@BF12390.MPFS.CY10.U22.C00000.V0620](#)  
[MU00.@BF12390.MPFS.CY10.U22.PURDIAG.V0620](#)  
[MU00.@BF12390.MPFS.CY10.U22.ANES.V0701](#)

FI Abstract Files:

[MU00.@BF12390.MPFS.CY10.U22.ABSTR.V0620.FI](#)  
[MU00.@BF12390.MPFS.CY10.U22.MAMMO.V0620.FI](#)  
[MU00.@BF12390.MPFS.CY10.U22.PAYIND.V0620](#)  
[MU00.@BF12390.MPFS.CY10.U22.SNF.V0620.FI](#)  
[MU00.@BF12390.MPFS.CY10.U22.SUPL.V0620.FI](#)  
[MU00.@BF12390.MPFS.CY10.U22.V0620.RHHI](#)

**File B:**

Listed below are the July release files that contain the 2.2% update. These files include the July 2010 updates that have an effective date of 7/1/2010. Note that the carrier payment file (C00000) is a correction file.

Carrier Files:

[MU00.@BF12390.MPFS.CY10.U22B.C00000.V0620](#)  
[MU00.@BF12390.MPFS.CY10.U22B.PURDIAG.V0620](#)

FI Abstract Files:

[MU00.@BF12390.MPFS.CY10.U22B.ABSTR.V0620.FI](#)  
[MU00.@BF12390.MPFS.CY10.U22B.MAMMO.V0620.FI](#)  
[MU00.@BF12390.MPFS.CY10.U22B.PAYIND.V0620](#)  
[MU00.@BF12390.MPFS.CY10.U22B.SNF.V0620.FI](#)  
[MU00.@BF12390.MPFS.CY10.U22B.SUPL.V0620.FI](#)  
[MU00.@BF12390.MPFS.CY10.U22B.V0620.RHHI](#)

**0% Update File – Changes for Codes in File A with an effective date prior to 7/1/2010**

Listed below are the files that contain the changes for codes in File A with an effective date prior to 7/1/2010 with the 0% update. These files include Affordable Care Act

updates, and corrected OPPS caps for PET and Bone Density Scan codes. Note that the carrier payment file (C00000) is a correction file.

Carrier Files:

[MU00.@BF12390.MPFS.CY10.RV4.C00000.V0601B](#)

[MU00.@BF12390.MPFS.CY10.RV4.PURDIAG.V0601B](#)

FI Abstract Files:

[MU00.@BF12390.MPFS.CY10.RV4.ABSTR.V0601B.FI](#)

[MU00.@BF12390.MPFS.CY10.RV4.ALL.V0601B.RHHI](#)

[MU00.@BF12390.MPFS.CY10.RV4.MAMMO.V0601B.FI](#)

[MU00.@BF12390.MPFS.CY10.RV4.PAYIND.V0601B](#)

[MU00.@BF12390.MPFS.CY10.RV4.SNF.V0601B.FI](#)

[MU00.@BF12390.MPFS.CY10.RV4.SUPL.V0601B.FI](#)