

Medicare Leading Part B CPT Procedure Codes Based on Allowed Charges
Calendar Year 2005

Procedure Code	Description	Allowed Charges	Percent of Allowed Charges ¹
All Procedures Codes ²		\$107,061,001,829	100%
Leading Procedures codes ³		\$53,580,833,067	50%
99213	Office/outpatient visit, est	\$5,665,660,691	5.3%
99214	Office/outpatient visit, est	\$4,789,520,816	4.5%
99232	Subsequent hospital care	\$2,869,328,062	2.7%
66984	Cataract surg w/iol, 1 stage	\$2,244,992,121	2.1%
99233	Subsequent hospital care	\$1,444,265,886	1.3%
78465	Heart image (3d), multiple	\$1,129,005,555	1.1%
99285	Emergency dept visit	\$1,078,491,103	1.0%
88305	Tissue exam by pathologist	\$1,059,485,515	1.0%
99244	Office consultation	\$997,793,893	0.9%
97110	Therapeutic exercises	\$943,809,537	0.9%
99212	Office/outpatient visit, est	\$923,937,935	0.9%
92014	Eye exam & treatment	\$912,870,113	0.9%
99223	Initial hospital care	\$900,055,268	0.8%
99215	Office/outpatient visit, est	\$865,026,099	0.8%
99254	Initial inpatient consult	\$832,781,058	0.8%
93307	Echo exam of heart	\$825,202,803	0.8%
99291	Critical care, first hour	\$687,923,768	0.6%
99231	Subsequent hospital care	\$648,143,920	0.6%
99243	Office consultation	\$609,832,232	0.6%
99255	Initial inpatient consult	\$575,839,973	0.5%
99312	Nursing fac care, subseq	\$554,205,302	0.5%
99284	Emergency dept visit	\$535,211,051	0.5%
70553	Mri brain w/o & w/dye	\$498,334,946	0.5%
99245	Office consultation	\$491,288,920	0.5%
99203	Office/outpatient visit, new	\$485,103,284	0.5%
77418	Radiation tx delivery, imrt	\$466,242,503	0.4%
90806	Psytx, off, 45-50 min	\$465,992,571	0.4%

98941	Chiropractic manipulation	\$461,140,344	0.4%
92012	Eye exam established pat	\$447,348,182	0.4%
99238	Hospital discharge day	\$443,368,060	0.4%
99204	Office/outpatient visit, new	\$437,401,079	0.4%
93880	Extracranial study	\$415,559,469	0.4%
27447	Total knee arthroplasty	\$413,606,537	0.4%
93325	Doppler color flow add-on	\$411,136,087	0.4%
99222	Initial hospital care	\$384,544,794	0.4%
45378	Diagnostic colonoscopy	\$380,787,913	0.4%
93320	Doppler echo exam, heart	\$369,555,957	0.3%
97140	Manual therapy	\$355,589,216	0.3%
72148	Mri lumbar spine w/o dye	\$353,976,011	0.3%
99253	Initial inpatient consult	\$336,137,507	0.3%
43239	Upper GI endoscopy, biopsy	\$328,832,173	0.3%
85025	Complete cbc w/auto diff wbc	\$317,878,234	0.3%
45385	Lesion removal colonoscopy	\$317,311,876	0.3%
92980	Insert intracoronary stent	\$312,066,436	0.3%
99283	Emergency dept visit	\$308,774,949	0.3%
20610	Drain/inject, joint/bursa	\$306,890,519	0.3%
71020	Chest x-ray	\$292,593,914	0.3%
93510	Left heart catheterization	\$292,041,212	0.3%
93000	Electrocardiogram, complete	\$287,850,806	0.3%
84443	Assay thyroid stim hormone	\$287,571,424	0.3%
66821	After cataract laser surgery	\$282,679,641	0.3%
76092	Mammogram, screening	\$281,739,862	0.3%
80061	Lipid panel	\$281,680,988	0.3%
17000	Destroy benign/premlg lesion	\$273,769,126	0.3%
90862	Medication management	\$266,081,601	0.2%
11721	Debride nail, 6 or more	\$266,079,512	0.2%
45380	Colonoscopy and biopsy	\$265,049,831	0.2%
99313	Nursing fac care, subseq	\$262,152,703	0.2%
80053	Comprehen metabolic panel	\$262,066,867	0.2%
72193	Ct pelvis w/dye	\$259,182,587	0.2%
76075	Dxa bone density, axial	\$258,814,663	0.2%
92004	Eye exam, new patient	\$249,566,948	0.2%
71260	Ct thorax w/dye	\$243,943,599	0.2%
74160	Ct abdomen w/dye	\$242,517,008	0.2%

93015	Cardiovascular stress test	\$239,330,622	0.2%
17304	1 stage mohs, up to 5 spec	\$236,278,493	0.2%
99239	Hospital discharge day	\$236,096,714	0.2%
77427	Radiation tx management, x5	\$231,534,443	0.2%
70450	Ct head/brain w/o dye	\$227,013,203	0.2%
78815	Tumorimage pet/ct skul-thigh	\$218,319,746	0.2%
78478	Heart wall motion add-on	\$214,744,794	0.2%
99211	Office/outpatient visit, est	\$213,843,975	0.2%
78480	Heart function add-on	\$211,359,710	0.2%
33533	CABG, arterial, single	\$205,048,198	0.2%
52000	Cystoscopy	\$200,871,382	0.2%
71010	Chest x-ray	\$198,283,355	0.2%
62311	Inject spine l/s (cd)	\$197,689,907	0.2%
36415	Routine venipuncture	\$196,779,343	0.2%
92235	Eye exam with photos	\$196,416,891	0.2%
98940	Chiropractic manipulation	\$192,898,170	0.2%
142	Anesth, lens surgery	\$190,133,876	0.2%
73721	Mri jnt of lwr extre w/o dye	\$187,517,963	0.2%
90801	Psy dx interview	\$186,941,115	0.2%
99205	Office/outpatient visit, new	\$184,790,655	0.2%
93010	Electrocardiogram report	\$184,538,819	0.2%
97530	Therapeutic activities	\$182,597,916	0.2%
92083	Visual field examination(s)	\$180,390,605	0.2%
74170	Ct abdomen w/o & w/dye	\$177,517,211	0.2%
99311	Nursing fac care, subseq	\$177,236,574	0.2%
72158	Mri lumbar spine w/o & w/dye	\$175,957,693	0.2%
99202	Office/outpatient visit, new	\$168,884,532	0.2%
92135	Ophthalmic dx imaging	\$164,998,323	0.2%
27130	Total hip arthroplasty	\$159,912,107	0.1%
11100	Biopsy, skin lesion	\$158,572,835	0.1%
17003	Destroy lesions, 2-14	\$157,336,515	0.1%
95904	Sense nerve conduction test	\$155,353,386	0.1%
97112	Neuromuscular reeducation	\$155,025,095	0.1%
99242	Office consultation	\$154,288,791	0.1%
83036	Glycosylated hemoglobin test	\$138,077,766	0.1%
92250	Eye exam with photos	\$137,487,948	0.1%
70551	Mri brain w/o dye	\$137,361,341	0.1%

99303	Nursing facility care	\$137,226,853	0.1%
74150	Ct abdomen w/o dye	\$137,216,694	0.1%
72141	Mri neck spine w/o dye	\$135,648,691	0.1%
78812	Tumor image (pet)/skul-thigh	\$131,532,725	0.1%
53850	Prostatic microwave thermotx	\$131,344,526	0.1%
73221	Mri joint upr extrem w/o dye	\$131,051,157	0.1%
77334	Radiation treatment aid(s)	\$130,411,759	0.1%
71250	Ct thorax w/o dye	\$129,295,392	0.1%
95903	Motor nerve conduction test	\$128,042,698	0.1%

¹ Allowed charges are shown as a percent of all physician and supplier allowed charges submitted to Part B carriers.

² The total number of procedure codes is approximately 10,000

³ Allowed charges were aggregated by procedure code. The above listed 110 procedure codes account for approximately 50% of the allowed charges.

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