

2017 HCPCS Added Codes

Code	Short Description	Long Description	Date
A4224	Supply insulin inf cath/wk	Supplies for maintenance of insulin infusion catheter, per week	20170101
A4225	Sup/ext insulin inf pump syr	Supplies for external insulin infusion pump, syringe type cartridge, sterile, each	20170101
A4467	Belt strap sleeve garment	Belt, strap, sleeve, garment, or covering, any type	20170101
A4553	Nondisp underpads, all	Non-disposable underpads, all sizes	20170101
A9285	Inversion/eversion cor	Inversion/eversion correction device	20170101
A9286	Any hygienic item, device	Hygienic item or device, disposable or non-disposable, any type, each	20170101
A9515	Choline c-11	Choline c-11, diagnostic, per study dose up to 20 millicuries	20170101
A9587	Gallium ga-68	Gallium ga-68, dotatate, diagnostic, 0.1 millicurie	20170101
A9588	Fluciclovine f-18	Fluciclovine f-18, diagnostic, 1 millicurie	20170101
A9597	Pet, dx, for tumor id, noc	Positron emission tomography radiopharmaceutical, diagnostic, for tumor identification, not otherwise classified	20170101
A9598	Pet dx for non-tumor id, noc	Positron emission tomography radiopharmaceutical, diagnostic, for non-tumor identification, not otherwise classified	20170101
C1889	Implant/insert device, noc	Implantable/insertable device for device intensive procedure, not otherwise classified	20170101
C9140	Afstyla factor viii recomb	Injection, factor viii (antihemophilic factor, recombinant) (afstyla), 1 i.u.	20170101
C9482	Sotalol hydrochloride iv	Injection, sotalol hydrochloride, 1 mg	20161001
C9483	Injection, atezolizumab	Injection, atezolizumab, 10 mg	20161001
C9744	Abd us w/contrast	Ultrasound, abdominal, with contrast	20161001
G0490	Home visit rn, lpn by rhc/fq	Face-to-face home health nursing visit by a rural health clinic (rhc) or federally qualified health center (fqhc) in an area with a shortage of home health agencies; (services limited to rn or lpn only)	20160401
G0491	Dialysis acu kidney no esrd	Dialysis procedure at a medicare certified esrd facility for acute kidney injury without esrd	20170101
G0492	Md/oth eval acut kid no esrd	Dialysis procedure with single evaluation by a physician or other qualified health care professional for acute kidney injury without esrd	20170101
G0493	Rn care ea 15 min hh/hospice	Skilled services of a registered nurse (rn) for the observation and assessment of the patient's condition, each 15 minutes (the change in the patient's condition requires skilled nursing personnel to identify and evaluate the patient's need for possible modification of treatment in the home health or hospice setting)	20170101
G0494	Lpn care ea 15min hh/hospice	Skilled services of a licensed practical nurse (lpn) for the observation and assessment of the patient's condition, each 15 minutes (the change in the patient's condition requires skilled nursing personnel to identify and evaluate the patient's need for possible modification of treatment in the home health or hospice setting)	20170101
G0495	Rn care train/edu in hh	Skilled services of a registered nurse (rn), in the training and/or education of a patient or family member, in the home health or hospice setting, each 15 minutes	20170101

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G0496	Lpn care train/edu in hh	Skilled services of a licensed practical nurse (lpn), in the training and/or education of a patient or family member, in the home health or hospice setting, each 15 minutes	20170101
G0499	Hepb screen high risk indiv	Hepatitis b screening in non-pregnant, high risk individual includes hepatitis b surface antigen (hbsag) followed by a neutralizing confirmatory test for initially reactive results, and antibodies to hbsag (anti-hbs) and hepatitis b core antigen (anti-hbc)	20160928
G0500	Mod sedat endo service >5yrs	Moderate sedation services provided by the same physician or other qualified health care professional performing a gastrointestinal endoscopic service that sedation supports, requiring the presence of an independent trained observer to assist in the monitoring of the patient's level of consciousness and physiological status; initial 15 minutes of intra-service time; patient age 5 years or older (additional time may be reported with 99153, as appropriate)	20170101
G0501	Resource-inten svc during ov	Resource-intensive services for patients for whom the use of specialized mobility-assistive technology (such as adjustable height chairs or tables, patient lift, and adjustable padded leg supports) is medically necessary and used during the provision of an office/outpatient, evaluation and management visit (list separately in addition to primary service)	20170101
G0502	Init psych care manag, 70min	Initial psychiatric collaborative care management, first 70 minutes in the first calendar month of behavioral health care manager activities, in consultation with a psychiatric consultant, and directed by the treating physician or other qualified health care professional, with the following required elements: outreach to and engagement in treatment of a patient directed by the treating physician or other qualified health care professional; initial assessment of the patient, including administration of validated rating scales, with the development of an individualized treatment plan; review by the psychiatric consultant with modifications of the plan if recommended; entering patient in a registry and tracking patient follow-up and progress using the registry, with appropriate documentation, and participation in weekly caseload consultation with the psychiatric consultant; and provision of brief interventions using evidence-based techniques such as behavioral activation, motivational interviewing, and other focused treatment strategies	20170101

Code	Short Description	Long Description	Date
G0503	Subseq psych care man,60mi	Subsequent psychiatric collaborative care management, first 60 minutes in a subsequent month of behavioral health care manager activities, in consultation with a psychiatric consultant, and directed by the treating physician or other qualified health care professional, with the following required elements: tracking patient follow-up and progress using the registry, with appropriate documentation; participation in weekly caseload consultation with the psychiatric consultant; ongoing collaboration with and coordination of the patient's mental health care with the treating physician or other qualified health care professional and any other treating mental health providers; additional review of progress and recommendations for changes in treatment, as indicated, including medications, based on recommendations provided by the psychiatric consultant; provision of brief interventions using evidence-based techniques such as behavioral activation, motivational interviewing, and other focused treatment strategies; monitoring of patient outcomes using validated rating scales; and relapse prevention planning with patients as they achieve remission of symptoms and/or other treatment goals and are prepared for discharge from active treatment	20170101
G0504	Init/sub psych care add 30 m	Initial or subsequent psychiatric collaborative care management, each additional 30 minutes in a calendar month of behavioral health care manager activities, in consultation with a psychiatric consultant, and directed by the treating physician or other qualified health care professional (list separately in addition to code for primary procedure); (use g0504 in conjunction with g0502, g0503)	20170101
G0505	Cog/func assessment outpt	Cognition and functional assessment using standardized instruments with development of recorded care plan for the patient with cognitive impairment, history obtained from patient and/or caregiver, in office or other outpatient setting or home or domiciliary or rest home	20170101
G0506	Comp asses care plan ccm svc	Comprehensive assessment of and care planning for patients requiring chronic care management services (list separately in addition to primary monthly care management service)	20170101
G0507	Care manage serv minimum 20	Care management services for behavioral health conditions, at least 20 minutes of clinical staff time, directed by a physician or other qualified health care professional, per calendar month, with the following required elements: initial assessment or follow-up monitoring, including the use of applicable validated rating scales; behavioral health care planning in relation to behavioral/psychiatric health problems, including revision for patients who are not progressing or whose status changes; facilitating and coordinating treatment such as psychotherapy, pharmacotherapy, counseling and/or psychiatric consultation; and continuity of care with a designated member of the care team	20170101

Code	Short Description	Long Description	Date
G0508	Crit care telehea consult 60	Telehealth consultation, critical care, initial , physicians typically spend 60 minutes communicating with the patient and providers via telehealth	20170101
G0509	Crit care telehea consult 50	Telehealth consultation, critical care, subsequent, physicians typically spend 50 minutes communicating with the patient and providers via telehealth	20170101
G9481	Remote e/m new pt 10mins	Remote in-home visit for the evaluation and management of a new patient for use only in the medicare-approved comprehensive care for joint replacement model, which requires these 3 key components: a problem focused history; a problem focused examination; and straightforward medical decision making, furnished in real time using interactive audio and video technology. counseling and coordination of care with other physicians, other qualified health care professionals or agencies are provided consistent with the nature of the problem(s) and the needs of the patient or the family or both. usually, the presenting problem(s) are self limited or minor. typically, 10 minutes are spent with the patient or family or both via real time, audio and video intercommunications technology	20160401
G9482	Remote e/m new pt 20mins	Remote in-home visit for the evaluation and management of a new patient for use only in the medicare-approved comprehensive care for joint replacement model, which requires these 3 key components: an expanded problem focused history; an expanded problem focused examination; straightforward medical decision making, furnished in real time using interactive audio and video technology. counseling and coordination of care with other physicians, other qualified health care professionals or agencies are provided consistent with the nature of the problem(s) and the needs of the patient or the family or both. usually, the presenting problem(s) are of low to moderate severity. typically, 20 minutes are spent with the patient or family or both via real time, audio and video intercommunications technology	20160401
G9483	Remote e/m new pt 30mins	Remote in-home visit for the evaluation and management of a new patient for use only in the medicare-approved comprehensive care for joint replacement model, which requires these 3 key components: a detailed history; a detailed examination; medical decision making of low complexity, furnished in real time using interactive audio and video technology. counseling and coordination of care with other physicians, other qualified health care professionals or agencies are provided consistent with the nature of the problem(s) and the needs of the patient or the family or both. usually, the presenting problem(s) are of moderate severity. typically, 30 minutes are spent with the patient or family or both via real time, audio and video intercommunications technology	20160401

Code	Short Description	Long Description	Date
G9484	Remote e/m new pt 45mins	Remote in-home visit for the evaluation and management of a new patient for use only in the medicare-approved comprehensive care for joint replacement model, which requires these 3 key components: a comprehensive history; a comprehensive examination; medical decision making of moderate complexity, furnished in real time using interactive audio and video technology. counseling and coordination of care with other physicians, other qualified health care professionals or agencies are provided consistent with the nature of the problem(s) and the needs of the patient or the family or both. usually, the presenting problem(s) are of moderate to high severity. typically, 45 minutes are spent with the patient or family or both via real time, audio and video intercommunications technology	20160401
G9485	Remote e/m new pt 60mins	Remote in-home visit for the evaluation and management of a new patient for use only in the medicare-approved comprehensive care for joint replacement model, which requires these 3 key components: a comprehensive history; a comprehensive examination; medical decision making of high complexity, furnished in real time using interactive audio and video technology. counseling and coordination of care with other physicians, other qualified health care professionals or agencies are provided consistent with the nature of the problem(s) and the needs of the patient or the family or both. usually, the presenting problem(s) are of moderate to high severity. typically, 60 minutes are spent with the patient or family or both via real time, audio and video intercommunications technology	20160401
G9486	Remote e/m est. pt 10mins	Remote in-home visit for the evaluation and management of an established patient for use only in the medicare-approved comprehensive care for joint replacement model, which requires at least 2 of the following 3 key components: a problem focused history; a problem focused examination; straightforward medical decision making, furnished in real time using interactive audio and video technology. counseling and coordination of care with other physicians, other qualified health care professionals or agencies are provided consistent with the nature of the problem(s) and the needs of the patient or the family or both. usually, the presenting problem(s) are self limited or minor. typically, 10 minutes are spent with the patient or family or both via real time, audio and video intercommunications technology	20160401

Code	Short Description	Long Description	Date
G9487	Remote e/m est. pt 15mins	Remote in-home visit for the evaluation and management of an established patient for use only in the medicare-approved comprehensive care for joint replacement model, which requires at least 2 of the following 3 key components: an expanded problem focused history; an expanded problem focused examination; medical decision making of low complexity, furnished in real time using interactive audio and video technology. counseling and coordination of care with other physicians, other qualified health care professionals or agencies are provided consistent with the nature of the problem(s) and the needs of the patient or the family or both. usually, the presenting problem(s) are of low to moderate severity. typically, 15 minutes are spent with the patient or family or both via real time, audio and video intercommunications technology	20160401
G9488	Remote e/m est. pt 25mins	Remote in-home visit for the evaluation and management of an established patient for use only in the medicare-approved comprehensive care for joint replacement model, which requires at least 2 of the following 3 key components: a detailed history; a detailed examination; medical decision making of moderate complexity, furnished in real time using interactive audio and video technology. counseling and coordination of care with other physicians, other qualified health care professionals or agencies are provided consistent with the nature of the problem(s) and the needs of the patient or the family or both. usually, the presenting problem(s) are of moderate to high severity. typically, 25 minutes are spent with the patient or family or both via real time, audio and video intercommunications technology	20160401
G9489	Remote e/m est. pt 40mins	Remote in-home visit for the evaluation and management of an established patient for use only in the medicare-approved comprehensive care for joint replacement model, which requires at least 2 of the following 3 key components: a comprehensive history; a comprehensive examination; medical decision making of high complexity, furnished in real time using interactive audio and video technology. counseling and coordination of care with other physicians, other qualified health care professionals or agencies are provided consistent with the nature of the problem(s) and the needs of the patient or the family or both. usually, the presenting problem(s) are of moderate to high severity. typically, 40 minutes are spent with the patient or family or both via real time, audio and video intercommunications technology	20160401

Code	Short Description	Long Description	Date
G9490	Joint replac mod home visit	Comprehensive care for joint replacement model, home visit for patient assessment performed by clinical staff for an individual not considered homebound, including, but not necessarily limited to patient assessment of clinical status, safety/fall prevention, functional status/ambulation, medication reconciliation/management, compliance with orders/plan of care, performance of activities of daily living, and ensuring beneficiary connections to community and other services. (for use only in the medicare-approved cjr model); may not be billed for a 30 day period covered by a transitional care management code	20160401
G9678	Oncology care model service	Oncology care model (ocm) monthly enhanced oncology services (meos) payment for ocm enhanced services. g9678 payments may only be made to ocm practitioners for ocm beneficiaries for the furnishment of enhanced services as defined in the ocm participation agreement	20160401
G9679	Acute care pneumonia	This code is for onsite acute care treatment of a nursing facility resident with pneumonia; may only be billed once per day per beneficiary	20161001
G9680	Acute care congestive heart	This code is for onsite acute care treatment of a nursing facility resident with chf; may only be billed once per day per beneficiary	20161001
G9681	Acute care chronic obstruct	This code is for onsite acute care treatment of a resident with copd or asthma; may only be billed once per day per beneficiary	20161001
G9682	Acute care skin infection	This code is for the onsite acute care treatment a nursing facility resident with a skin infection; may only be billed once per day per beneficiary	20161001
G9683	Acute care fluid or electrol	This code is for the onsite acute care treatment of a nursing facility resident with fluid or electrolyte disorder or dehydration (similar pattern); may only be billed once per day per beneficiary	20161001
G9684	Acute care urinary tract inf	This code is for the onsite acute care treatment of a nursing facility resident for a uti; may only be billed once per day per beneficiary	20161001
G9685	Acute nursing facility care	This code is for the evaluation and management of a beneficiary's acute change in condition in a nursing facility	20161001
G9686	Nursing facility conference	Onsite nursing facility conference, that is separate and distinct from an evaluation and management visit, including qualified practitioner and at least one member of the nursing facility interdisciplinary care team	20161001
G9687	Hospice anytime msmt per	Hospice services provided to patient any time during the measurement period	20170101
G9688	Pt w/hosp anytime msmt per	Patients using hospice services any time during the measurement period	20170101
G9689	Inpt elect carotid intervent	Patient admitted for performance of elective carotid intervention	20170101
G9690	Pt rec hospice dur msmt per	Patient receiving hospice services any time during the measurement period	20170101
G9691	Pt hosp dur msmt period	Patient had hospice services any time during the measurement period	20170101

Code	Short Description	Long Description	Date
G9692	Hosp recd by pt dur msmt per	Hospice services received by patient any time during the measurement period	20170101
G9693	Pt use hosp during msmt per	Patient use of hospice services any time during the measurement period	20170101
G9694	Hosp srv used pt in msmt per	Hospice services utilized by patient any time during the measurement period	20170101
G9695	Long act inhal bronchdil	Long-acting inhaled bronchodilator prescribed	20170101
G9696	Med rsn no presc bronchdil	Documentation of medical reason(s) for not prescribing a long-acting inhaled bronchodilator	20170101
G9697	Pt rsn no presc bronchdil	Documentation of patient reason(s) for not prescribing a long-acting inhaled bronchodilator	20170101
G9698	Sys rsn no presc bronchdil	Documentation of system reason(s) for not prescribing a long-acting inhaled bronchodilator	20170101
G9699	Long inhal bronchdil no pres	Long-acting inhaled bronchodilator not prescribed, reason not otherwise specified	20170101
G9700	Pt is w/hosp during msmt per	Patients who use hospice services any time during the measurement period	20170101
G9701	Child anbx 30 prior dx estab	Children who are taking antibiotics in the 30 days prior to the date of the encounter during which the diagnosis was established	20170101
G9702	Pt use hosp during msmt per	Patients who use hospice services any time during the measurement period	20170101
G9703	Child anbx 30 prior dx phary	Children who are taking antibiotics in the 30 days prior to the diagnosis of pharyngitis	20170101
G9704	Ajcc br ca stg i: t1 mic/t1a	Ajcc breast cancer stage i: t1 mic or t1a documented	20170101
G9705	Ajcc br ca stg ib	Ajcc breast cancer stage i: t1b (tumor > 0.5 cm but <= 1 cm in greatest dimension) documented	20170101
G9706	Low recur prost ca	Low (or very low) risk of recurrence, prostate cancer	20170101
G9707	Pt had hosp dur msmt per	Patient received hospice services any time during the measurement period	20170101
G9708	Bilat mast/hx bi /unilat mas	Women who had a bilateral mastectomy or who have a history of a bilateral mastectomy or for whom there is evidence of a right and a left unilateral mastectomy	20170101
G9709	Hosp srv used pt in msmt per	Hospice services used by patient any time during the measurement period	20170101
G9710	Pt prov hosp srv msmt per	Patient was provided hospice services any time during the measurement period	20170101
G9711	Pt hx tot col or colon ca	Patients with a diagnosis or past history of total colectomy or colorectal cancer	20170101

Code	Short Description	Long Description	Date
G9712	Doc med rsn presc anbx	Documentation of medical reason(s) for prescribing or dispensing antibiotic (e.g., intestinal infection, pertussis, bacterial infection, lyme disease, otitis media, acute sinusitis, acute pharyngitis, acute tonsillitis, chronic sinusitis, infection of the pharynx/larynx/tonsils/adenoids, prostatitis, cellulitis/mastoiditis/bone infections, acute lymphadenitis, impetigo, skin staph infections, pneumonia, gonococcal infections/venereal disease (syphilis, chlamydia, inflammatory diseases [female reproductive organs]), infections of the kidney, cystitis/uti, acne, hiv disease/asymptomatic hiv, cystic fibrosis, disorders of the immune system, malignancy neoplasms, chronic bronchitis, emphysema, bronchiectasis, extrinsic allergic alveolitis, chronic airway obstruction, chronic obstructive asthma, pneumoconiosis and other lung disease due to external agents, other diseases of the respiratory system, and tuberculosis	20170101
G9713	Pt use hosp during msmt per	Patients who use hospice services any time during the measurement period	20170101
G9714	Pt is w/hosp during msmt per	Patient is using hospice services any time during the measurement period	20170101
G9715	Pt w/hosp anytime msmt per	Patients who use hospice services any time during the measurement period	20170101
G9716	Bmi not norm, no follow, doc	Bmi is documented as being outside of normal limits, follow-up plan is not completed for documented reason	20170101
G9717	Doc dx depr/dx bipolar, no scr	Documentation stating the patient has an active diagnosis of depression or has a diagnosed bipolar disorder, therefore screening or follow-up not required	20170101
G9718	Hospice anytime msmt per	Hospice services for patient provided any time during the measurement period	20170101
G9719	Pt not ambul/immob/wc	Patient is not ambulatory, bed ridden, immobile, confined to chair, wheelchair bound, dependent on helper pushing wheelchair, independent in wheelchair or minimal help in wheelchair	20170101
G9720	Hospice anytime msmt per	Hospice services for patient occurred any time during the measurement period	20170101
G9721	Pt not ambul/immob/wc	Patient not ambulatory, bed ridden, immobile, confined to chair, wheelchair bound, dependent on helper pushing wheelchair, independent in wheelchair or minimal help in wheelchair	20170101
G9722	Doc hx renal fail or cr+ >4	Documented history of renal failure or baseline serum creatinine = 4.0 mg/dl; renal transplant recipients are not considered to have preoperative renal failure, unless, since transplantation the cr has been or is 4.0 or higher	20170101
G9723	Hosp recd by pt dur msmt per	Hospice services for patient received any time during the measurement period	20170101
G9724	Pt w/doc use anticoag mst yr	Patients who had documentation of use of anticoagulant medications overlapping the measurement year	20170101
G9725	Pt w/hosp anytime msmt per	Patients who use hospice services any time during the measurement period	20170101
G9726	Refused to participate	Patient refused to participate	20170101

Code	Short Description	Long Description	Date
G9727	No knee intake prom, no prox	Patient unable to complete the foto knee intake prom at admission and discharge due to blindness, illiteracy, severe mental incapacity or language incompatibility and an adequate proxy is not available	20170101
G9728	Refused to participate	Patient refused to participate	20170101
G9729	No hip intake prom, no proxy	Patient unable to complete the foto hip intake prom at admission and discharge due to blindness, illiteracy, severe mental incapacity or language incompatibility and an adequate proxy is not available	20170101
G9730	Refused to participate	Patient refused to participate	20170101
G9731	No foot prom, no proxy	Patient unable to complete the foto foot or ankle intake prom at admission and discharge due to blindness, illiteracy, severe mental incapacity or language incompatibility and an adequate proxy is not available	20170101
G9732	Refused to participate	Patient refused to participate	20170101
G9733	No back intake prom, no prox	Patient unable to complete the foto lumbar intake prom at admission and discharge due to blindness, illiteracy, severe mental incapacity or language incompatibility and an adequate proxy is not available	20170101
G9734	Refused to participate	Patient refused to participate	20170101
G9735	Pt no foto knee and no proxy	Patient unable to complete the foto shoulder intake prom at admission and discharge due to blindness, illiteracy, severe mental incapacity or language incompatibility and an adequate proxy is not available	20170101
G9736	Refused to participate	Patient refused to participate	20170101
G9737	Pt no foto elbow, no proxy	Patient unable to complete the foto elbow, wrist or hand intake prom at admission and discharge due to blindness, illiteracy, severe mental incapacity or language incompatibility and an adequate proxy is not available	20170101
G9738	Refused to participate	Patient refused to participate	20170101
G9739	Pt no foto orth, no proxy	Patient unable to complete the foto general orthopedic intake prom at admission and discharge due to blindness, illiteracy, severe mental incapacity or language incompatibility and an adequate proxy is not available	20170101
G9740	Hosp srv to pt dur msmt per	Hospice services given to patient any time during the measurement period	20170101
G9741	Pt w/hosp anytime msmt per	Patients who use hospice services any time during the measurement period	20170101
G9742	Psych sympt assessed	Psychiatric symptoms assessed	20170101
G9743	Psych symp not assessed, rns	Psychiatric symptoms not assessed, reason not otherwise specified	20170101
G9744	Pt not elig, dx htn	Patient not eligible due to active diagnosis of hypertension	20170101
G9745	Doc rsn no scr high bp	Documented reason for not screening or recommending a follow-up for high blood pressure	20170101
G9746	Mit sten, valve or trans af	Patient has mitral stenosis or prosthetic heart valves or patient has transient or reversible cause of af (e.g., pneumonia, hyperthyroidism, pregnancy, cardiac surgery)	20170101
G9747	Pall dialysis with catheter	Patient is undergoing palliative dialysis with a catheter	20170101
G9748	App transpl lvg kidney donor	Patient approved by a qualified transplant program and scheduled to receive a living donor kidney transplant	20170101
G9749	Pall dialysis with catheter	Patient is undergoing palliative dialysis with a catheter	20170101

Code	Short Description	Long Description	Date
G9750	App transpl lvg kidney donor	Patient approved by a qualified transplant program and scheduled to receive a living donor kidney transplant	20170101
G9751	Pt died w/in 24 mos rpt time	Patient died at any time during the 24-month measurement period	20170101
G9752	Urgent surgery	Emergency surgery	20170101
G9753	Doc no dicom, ct other fac	Documentation of medical reason for not conducting a search for dicom format images for prior patient ct imaging studies completed at non-affiliated external healthcare facilities or entities within the past 12 months that are available through a secure, authorized, media-free, shared archive (e.g., trauma, acute myocardial infarction, stroke, aortic aneurysm where time is of the essence)	20170101
G9754	Incid pulm nodule	A finding of an incidental pulmonary nodule	20170101
G9755	Doc med rsn for imaging	Documentation of medical reason(s) that follow-up imaging is indicated (e.g., patient has a known malignancy that can metastasize, other medical reason(s))	20170101
G9756	Surg proc w/silicone oil	Surgical procedures that included the use of silicone oil	20170101
G9757	Surg proc w/silicone oil	Surgical procedures that included the use of silicone oil	20170101
G9758	Hospice or term phase	Patient in hospice and in terminal phase	20170101
G9759	Hx preop post cap rup	History of preoperative posterior capsule rupture	20170101
G9760	Pt w/hosp anytime msmt per	Patients who use hospice services any time during the measurement period	20170101
G9761	Pt w/hosp anytime msmt per	Patients who use hospice services any time during the measurement period	20170101
G9762	Pt had hpv b/t 9-13 yr	Patient had at least three hpv vaccines on or between the patient's 9th and 13th birthdays	20170101
G9763	Pt no hpv b/t 9-13 yr	Patient did not have at least three hpv vaccines on or between the patient's 9th and 13th birthdays	20170101
G9764	Pt tx oral syst/bio med psor	Patient has been treated with an oral systemic or biologic medication for psoriasis	20170101
G9765	Pt decl chan/conind or <6m	Documentation that the patient declined therapy change, has documented contraindications, or has not been treated with an oral systemic or biologic for at least six consecutive months (e.g., experienced adverse effects or lack of efficacy with all other therapy options) in order to achieve better disease control as measured by pga, bsa, pasi, or dlqi	20170101
G9766	Cva stroke dx tx transfac	Patients who are transferred from one institution to another with a known diagnosis of cva for endovascular stroke treatment	20170101
G9767	Hosp new dx cva consid evst	Hospitalized patients with newly diagnosed cva considered for endovascular stroke treatment	20170101
G9768	Pt w/hosp anytime msmt per	Patients who utilize hospice services any time during the measurement period	20170101
G9769	Bn den 2yr/got ost med/ther	Patient had a bone mineral density test in the past two years or received osteoporosis medication or therapy in the past 12 months	20170101
G9770	Perip nerve block	Peripheral nerve block (pnb)	20170101
G9771	Anes end, 1 temp >35.5(95.9)	At least 1 body temperature measurement equal to or greater than 35.5 degrees celsius (or 95.9 degrees fahrenheit) achieved within the 30 minutes immediately before or the 15 minutes immediately after anesthesia end time	20170101

Code	Short Description	Long Description	Date
G9772	Doc temp >35.5(95.9), anest	Documentation of one of the following medical reason(s) for not achieving at least 1 body temperature measurement equal to or greater than 35.5 degrees celsius (or 95.9 degrees fahrenheit) achieved within the 30 minutes immediately before or the 15 minutes immediately after anesthesia end time (e.g., emergency cases, intentional hypothermia, etc.)	20170101
G9773	No temp >35.5(95.9), anes	At least 1 body temperature measurement equal to or greater than 35.5 degrees celsius (or 95.9 degrees fahrenheit) not achieved within the 30 minutes immediately before or the 15 minutes immediately after anesthesia end time	20170101
G9774	Pt had hyst	Patients who have had a hysterectomy	20170101
G9775	Recd 2 anti-emet pre/intraop	Patient received at least 2 prophylactic pharmacologic anti-emetic agents of different classes preoperatively and/or intraoperatively	20170101
G9776	Doc med rsn no proph antiem	Documentation of medical reason for not receiving at least 2 prophylactic pharmacologic anti-emetic agents of different classes preoperatively and/or intraoperatively (e.g., intolerance or other medical reason)	20170101
G9777	Pt no antiemet pre/intraop	Patient did not receive at least 2 prophylactic pharmacologic anti-emetic agents of different classes preoperatively and/or intraoperatively	20170101
G9778	Pts dx w/pregn	Patients who have a diagnosis of pregnancy	20170101
G9779	Pts breastfeeding	Patients who are breastfeeding	20170101
G9780	Pts dx w/rhabdomyolysis	Patients who have a diagnosis of rhabdomyolysis	20170101
G9781	Doc rsn no statin	Documentation of medical reason(s) for not currently being a statin therapy user or receive an order (prescription) for statin therapy (e.g., patient with adverse effect, allergy or intolerance to statin medication therapy, patients who are receiving palliative care, patients with active liver disease or hepatic disease or insufficiency, and patients with end stage renal disease (esrd))	20170101
G9782	Hx dx fam/pure hypercholes	History of or active diagnosis of familial or pure hypercholesterolemia	20170101
G9783	Doc dx dm, fast <70, no stat	Documentation of patients with diabetes who have a most recent fasting or direct ldl- c laboratory test result < 70 mg/dl and are not taking statin therapy	20170101
G9784	Path/derm 2nd opin bx	Pathologists/dermatopathologists providing a second opinion on a biopsy	20170101
G9785	Path rpt sent path/derm in 7d	Pathology report diagnosing cutaneous basal cell carcinoma or squamous cell carcinoma (to include in situ disease) sent from the pathologist/dermatopathologist to the biopsying clinician for review within 7 business days from the time when the tissue specimen was received by the pathologist	20170101
G9786	No path rpt sent in 7d	Pathology report diagnosing cutaneous basal cell carcinoma or squamous cell carcinoma (to include in situ disease) was not sent from the pathologist/dermatopathologist to the biopsying clinician for review within 7 business days from the time when the tissue specimen was received by the pathologist	20170101
G9787	Pt alive lst day msmt yr	Patient alive as of the last day of the measurement year	20170101
G9788	Most rct bp </= 140/90	Most recent bp is less than or equal to 140/90 mm hg	20170101

Code	Short Description	Long Description	Date
G9789	Record bp ip, er, urg/self	Blood pressure recorded during inpatient stays, emergency room visits, urgent care visits, and patient self-reported bp's (home and health fair bp results)	20170101
G9790	Most rct bp >= 140/90	Most recent bp is greater than 140/90 mm hg, or blood pressure not documented	20170101
G9791	Most rct tob stat free	Most recent tobacco status is tobacco free	20170101
G9792	Most rct tob stat not free	Most recent tobacco status is not tobacco free	20170101
G9793	Pt on daily asa/antiplat	Patient is currently on a daily aspirin or other antiplatelet	20170101
G9794	Doc med rsn no asa/antiplat	Documentation of medical reason(s) for not on a daily aspirin or other antiplatelet (e.g. history of gastrointestinal bleed or intracranial bleed or documentation of active anticoagulant use during the measurement period)	20170101
G9795	Pt no daily asa/antiplat	Patient is not currently on a daily aspirin or other antiplatelet	20170101
G9796	Pt not currently on statin	Patient is currently on a statin therapy	20170101
G9797	Pt currently on statin	Patient is not on a statin therapy	20170101
G9798	D/c ami btw 7/1-6/30 mst per	Discharge(s) for ami between july 1 of the year prior measurement year to june 30 of the measurement period	20170101
G9799	Med disp evt indic hx asth	Patients with a medication dispensing event indicator of a history of asthma any time during the patient's history through the end of the measure period	20170101
G9800	Pt id intoler/alleg beta-block	Patients who are identified as having an intolerance or allergy to beta-blocker therapy	20170101
G9801	Nonacute transf from inpt	Hospitalizations in which the patient was transferred directly to a non-acute care facility for any diagnosis`	20170101
G9802	Pt w/hosp anytime msmt per	Patients who use hospice services any time during the measurement period	20170101
G9803	Post d/c 180d tx beta-bl ami	Patient prescribed a 180-day course of treatment with beta-blockers post discharge for ami	20170101
G9804	No post d/c 180d tx bb ami	Patient was not prescribed a 180-day course of treatment with beta-blockers post discharge for ami	20170101
G9805	Pt w/hosp anytime msmt per	Patients who use hospice services any time during the measurement period	20170101
G9806	Pt recd cerv cyto/hpv	Patients who received cervical cytology or an hpv test	20170101
G9807	Pt no recd cerv cyto/hpv	Patients who did not receive cervical cytology or an hpv test	20170101
G9808	Pt no asthm cont med mst per	Any patients who had no asthma controller medications dispensed during the measurement year	20170101
G9809	Pt w/hosp anytime msmt per	Patients who use hospice services any time during the measurement period	20170101
G9810	Pdc 75% w/asth cont med	Patient achieved a pdc of at least 75% for their asthma controller medication	20170101
G9811	No pdc 75% w/asth cont med	Patient did not achieve a pdc of at least 75% for their asthma controller medication	20170101
G9812	Pt died during inpt/30d aft	Patient died including all deaths occurring during the hospitalization in which the operation was performed, even if after 30 days, and those deaths occurring after discharge from the hospital, but within 30 days of the procedure	20170101
G9813	Pt not died w/in 30d of proc	Patient did not die within 30 days of the procedure or during the index hospitalization	20170101
G9814	Death occ dur hospitaliz	Death occurring during hospitalization	20170101
G9815	No death occ dur hospitaliz	Death did not occur during hospitalization	20170101
G9816	Death occ 30d post proc	Death occurring 30 days post procedure	20170101

Code	Short Description	Long Description	Date
G9817	No death occ 30d post	Death did not occur 30 days post procedure	20170101
G9818	Doc sex activity	Documentation of sexual activity	20170101
G9819	Pt w/hosp anytime msmt per	Patients who use hospice services any time during the measurement period	20170101
G9820	Doc chlam scr test w/follow up	Documentation of a chlamydia screening test with proper follow-up	20170101
G9821	No doc chlam scr ts w/follow	No documentation of a chlamydia screening test with proper follow-up	20170101
G9822	Endo abl proc yr prev ind dt	Women who had an endometrial ablation procedure during the year prior to the index date (exclusive of the index date)	20170101
G9823	Endo smpl/hyst bx res doc	Endometrial sampling or hysteroscopy with biopsy and results documented	20170101
G9824	Endo smpl/hyst bx res no doc	Endometrial sampling or hysteroscopy with biopsy and results not documented	20170101
G9825	Her-2 neg,undoc/unkn	Her-2/neu negative or undocumented/unknown	20170101
G9826	Transf pract aft init chemo	Patient transferred to practice after initiation of chemotherapy	20170101
G9827	Her-2 targ ther no init tx	Her2-targeted therapies not administered during the initial course of treatment	20170101
G9828	Her-2 targ ther dur init tx	Her2-targeted therapies administered during the initial course of treatment	20170101
G9829	Breast adj chemo admin	Breast adjuvant chemotherapy administered	20170101
G9830	Her-2 pos	Her-2/neu positive	20170101
G9831	Ajcc stg brt ca dx ii or iii	Ajcc stage at breast cancer diagnosis = ii or iii	20170101
G9832	Brt ca dx i, no t1/t1a/t1b	Ajcc stage at breast cancer diagnosis = i (ia or ib) and t-stage at breast cancer diagnosis does not equal = t1, t1a, t1b	20170101
G9833	Transf pract aft init chemo	Patient transfer to practice after initiation of chemotherapy	20170101
G9834	Pt met dis at dx	Patient has metastatic disease at diagnosis	20170101
G9835	Trastuz given w/in 12 mos	Trastuzumab administered within 12 months of diagnosis	20170101
G9836	Rsn no trast given doc	Reason for not administering trastuzumab documented (e.g. patient declined, patient died, patient transferred, contraindication or other clinical exclusion, neoadjuvant chemotherapy or radiation not complete)	20170101
G9837	Trastuz not in 12 mos dx	Trastuzumab not administered within 12 months of diagnosis	20170101
G9838	Pt met dis at dx	Patient has metastatic disease at diagnosis	20170101
G9839	Anti-egfr mon anti ther	Anti-egfr monoclonal antibody therapy	20170101
G9840	Kras tst bfr beg anti moab	Kras gene mutation testing performed before initiation of anti-egfr moab	20170101
G9841	No kras tst bfr beg ant moab	Kras gene mutation testing not performed before initiation of anti-egfr moab	20170101
G9842	Pt met dis at dx	Patient has metastatic disease at diagnosis	20170101
G9843	Kras gene mut	Kras gene mutation	20170101
G9844	Pt no recd anti-egfr ther	Patient did not receive anti-egfr monoclonal antibody therapy	20170101
G9845	Pt recd anti-egfr ther	Patient received anti-egfr monoclonal antibody therapy	20170101
G9846	Pt died from cancer	Patients who died from cancer	20170101
G9847	Pt recd chemo last 14d life	Patient received chemotherapy in the last 14 days of life	20170101
G9848	Pt no chemo last 14d life	Patient did not receive chemotherapy in the last 14 days of life	20170101
G9849	Pt died from cancer	Patients who died from cancer	20170101
G9850	1/more ed last 30d life	Patient had more than one emergency department visit in the last 30 days of life	20170101

Code	Short Description	Long Description	Date
G9851	1/no ed visit last 30d life	Patient had one or less emergency department visits in the last 30 days of life	20170101
G9852	Pt died from cancer	Patients who died from cancer	20170101
G9853	Icu stay last 30d life	Patient admitted to the icu in the last 30 days of life	20170101
G9854	No icu stay last 30d life	Patient was not admitted to the icu in the last 30 days of life	20170101
G9855	Pt died from cancer	Patients who died from cancer	20170101
G9856	Pt no hospice	Patient was not admitted to hospice	20170101
G9857	Pt admit hospice	Patient admitted to hospice	20170101
G9858	Pt enroll hospice	Patient enrolled in hospice	20170101
G9859	Pt died from cancer	Patients who died from cancer	20170101
G9860	Pt less 3d hospice	Patient spent less than three days in hospice care	20170101
G9861	Pt more than 3d hospice	Patient spent greater than or equal to three days in hospice care	20170101
G9862	Doc rsn no 10 yr follow	Documentation of medical reason(s) for not recommending at least a 10 year follow-up interval (e.g., inadequate prep, familial or personal history of colonic polyps, patient had no adenoma and age is = 66 years old, or life expectancy < 10 years old, other medical reasons)	20170101
J0570	Buprenorphine implant 74.2mg	Buprenorphine implant, 74.2 mg	20170101
J0883	Argatroban nonesrd use	Injection, argatroban, 1 mg (for non-esrd use)	20170101
J0884	Argatroban esrd dialysis	Injection, argatroban, 1 mg (for esrd on dialysis)	20170101
J1130	Inj diclofenac sodium	Injection, diclofenac sodium, 0.5 mg	20170101
J1942	Aripiprazole lauroxil 1mg	Injection, aripiprazole lauroxil, 1 mg	20170101
J2182	Injection, mepolizumab,	Injection, mepolizumab, 1 mg	20170101
J2786	Injection, reslizumab, 1mg	Injection, reslizumab, 1 mg	20170101
J2840	Inj sebelipase alfa 1 mg	Injection, sebelipase alfa, 1 mg	20170101
J7175	Inj, factor x, (human), 1iu	Injection, factor x, (human), 1 i.u.	20170101
J7179	Vonvendi inj 1 iu vwf:rco	Injection, von willebrand factor (recombinant), (vonvendi), 1 i.u. vwf:rco	20170101
J7202	Factor ix idelvion inj	Injection, factor ix, albumin fusion protein, (recombinant), idelvion, 1 i.u.	20170101
J7207	Factor viii pegylated recomb	Injection, factor viii, (antihemophilic factor, recombinant), pegylated, 1 i.u.	20170101
J7209	Factor viii nuwiq recomb 1iu	Injection, factor viii, (antihemophilic factor, recombinant), (nuwiq), 1 i.u.	20170101
J7320	Genvisc 850, inj, 1mg	Hyaluronan or derivative, genvisc 850, for intra-articular injection, 1 mg	20170101
J7322	Hymovis injection 1 mg	Hyaluronan or derivative, hymovis, for intra-articular injection, 1 mg	20170101
J7342	Ciprofloxacin otic susp 6	Installation, ciprofloxacin otic suspension, 6 mg	20170101
J8670	Rolapitant, oral, 1mg	Rolapitant, oral, 1 mg	20170101
J9034	Inj., bendeka 1 mg	Injection, bendamustine hcl (bendeka), 1 mg	20170101
J9145	Injection, daratumumab 10 mg	Injection, daratumumab, 10 mg	20170101
J9176	Injection, elotuzumab, 1mg	Injection, elotuzumab, 1 mg	20170101
J9205	Inj irinotecan liposome 1	Injection, irinotecan liposome, 1 mg	20170101
J9295	Injection, necitumumab, 1	Injection, necitumumab, 1 mg	20170101
J9325	Inj talimogene laherparepvec	Injection, talimogene laherparepvec, per 1 million plaque forming units	20170101
J9352	Injection trabectedin 0.1mg	Injection, trabectedin, 0.1 mg	20170101

Code	Short Description	Long Description	Date
L1851	Ko single upright prefab ots	Knee orthosis (ko), single upright, thigh and calf, with adjustable flexion and extension joint (unicentric or polycentric), medial-lateral and rotation control, with or without varus/valgus adjustment, prefabricated, off-the-shelf	20170101
L1852	Ko double upright prefab ots	Knee orthosis (ko), double upright, thigh and calf, with adjustable flexion and extension joint (unicentric or polycentric), medial-lateral and rotation control, with or without varus/valgus adjustment, prefabricated, off-the-shelf	20170101
Q4166	Cytal, per square	Cytal, per square centimeter	20170101
Q4167	Truskin, per sq centimeter	Truskin, per square centimeter	20170101
Q4168	Amnioband, 1 mg	Amnioband, 1 mg	20170101
Q4169	Artacent wound, per sq cm	Artacent wound, per square centimeter	20170101
Q4170	Cygnus, per sq cm	Cygnus, per square centimeter	20170101
Q4171	Interfyl, 1 mg	Interfyl, 1 mg	20170101
Q4172	Puraply or puraply am	Puraply or puraply am, per square centimeter	20170101
Q4173	Palingen or palingen xplus	Palingen or palingen xplus, per square centimeter	20170101
Q4174	Palingen or promatrx	Palingen or promatrx, 0.36 mg per 0.25 cc	20170101
Q4175	Miroderm	Miroderm, per square centimeter	20170101
Q5102	Inj., infliximab biosimilar	Injection, infliximab, biosimilar, 10 mg	20160701
Q9982	Flutemetamol f18 diagnostic	Flutemetamol f18, diagnostic, per study dose, up to 5 millicuries	20160701
Q9983	Florbetaben f18 diagnostic	Florbetaben f18, diagnostic, per study dose, up to 8.1 millicuries	20160701
S0285	Cnslt before screen colonosc	Colonoscopy consultation performed prior to a screening colonoscopy procedure	20160701
S0311	Comp mgmt care coord adv ill	Comprehensive management and care coordination for advanced illness, per calendar month	20160701
S3854	Gene profile panel breast	Gene expression profiling panel for use in the management of breast cancer treatment	20160701
T1040	Comm bh clinic svc per diem	Medicaid certified community behavioral health clinic services, per diem	20170101
T1041	Comm bh clinic svc per month	Medicaid certified community behavioral health clinic services, per month	20170101