

ENCOUNTER KEYS

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Code(s)

- Effective for dates of service on or after January 1, 2016 the CPT code 49185 (Injection of Abnormal Fluid Accumulation Using Imaging) has been added to the PMMIS system. For the code's respective Coverage Code, Limits etc. refer to the appropriate screens.
- Effective for dates of service on or after October1, 2016 the ICD-10 code A92.5 (Zika Virus Disease) has been added to the system.
- Effective for dates of service on or after October1, 2016 the ICD-10 code I97.648 (Postprocedural Seroma of a Circulatory System) has been added to the system.
- Effective for dates of service on or after October1, 2016 the ICD-10 code K91.873 (Postprocedural Seroma of a Digestive system) has been added to the system.
- Effective for dates of service on or after October1, 2016 the ICD-10 code S02.80XB (Fracture of other specified skull and facial bones) has been added to the system.

Coverage Code

The following codes have been added to the PMMIS system.

Code	Description	Effective	Coverage Code
G0480	Drug Test(s), Definitive, Utilizing Drug Identification	10/01/2016	01 - Covered Service/Code Available
G0481	Drug Test(s), Definitive, Utilizing Drug Identification	10/01/2016	01 - Covered Service/Code Available
G0482	Drug Test(s), Definitive, Utilizing Drug Identification	10/01/2016	01 - Covered Service/Code Available
G0483	Drug Test(s), Definitive, Utilizing Drug Identification	10/01/2016	01 - Covered Service/Code Available
37248	Transluminal Balloon Angioplasty	01/01/2017	01 - Covered Service/Code
37249	Transluminal Balloon Angioplasty	01/01/2017	01 - Covered Service/Code
62324	Insertion Of Indwelling Catheter And Administration	01/01/2017	01 - Covered Service/Code Available

Limits

- The age limit has been changed Minimum age: 000 year and Maximum age: 999 year for the ICD-10 code I51.3 (Intracardiac Thrombosis, not elsewhere classified).
- The limit and frequency for the dental code D1354 (Interim Caries Arresting Medicament Application) has been changed to limit - 1, frequency - 6 mos.
- The procedure daily maximum has been changed to five (5) for the CPT code 25118 (Removal Of Lining Of Tendon Covering Of Wrist).
- The procedure daily maximum has been changed to three (3) for the CPT code 96401 (Non-Hormonal Anti-Neoplastic Chemotherapy Beneath the Skin or into Muscle).
- The age limit has been changed for the CTP code 96110 (Developmental Screening, with Interpretation and Report) to Minimum age 000 years and Maximum age 002 years.
- The minimum and maximum age has been changed for the E0483 (High Frequency Chest Wall Oscillation Air-Pulse Generator System, (Includes Hoses and Vest) each) to minimum age 000 and maximum age 999 years.
- The minimum and maximum age has been changed for the ICD-10 Procedure Code F06ZDZZ (Swallowing Dysfunction Treatment) to minimum age 000 and maximum age 999 years.
- The procedure daily maximum has been changed to four (4) for the HCPCS code A4224 (Supplies For Maintenance Of Insulin Infusion Catheter).
- The age limits have been changed to minimum age 000 and maximum age 999Y for ICD-10-CM code R62.50 (Unspecified Lack Of Expected Normal Physiological Development In Childhood).

Modifier(s)

- Effective for the respective dates of services the modifiers listed can now be reported:

Code	Description	Modifier	Effective Begin Date	Effective End Date	Added to Screens
A9575	Injection, Gadoterate Meglumine, 0.1 ml	JW – Drug Amount Discarded/Not Admin to any Patient	1/1/2016		RF121
H0004	Behavioral Health Counseling	HQ - Group Setting	1/1/2017		RF121
H0004	Behavioral Health Counseling & Therapy; Per 15 minutes	HS - Family/Couple without client	1/1/2017		RF121
H0038	Self-Help/Peer Services, Per 15	HQ - Group Setting	1/1/2017		RF121
H2011	Crisis Intervention Service, Per 15 Minutes	HT - Multi-Disciplinary Team	1/1/2017		RF121
H2014	Skills Training And Develop-	HQ - Group Setting	1/1/2017		RF121
J9017	Injection, Arsenic Trioxide, 1 mg	JW - Skin Substitute Used	1/1/2016		RF121, RF122, RF132
Q4118	Matristem micromatrix, 1 mg	JC - Skin Substitute Used	1/1/2016		RF121, RF122, RF132
Q4119	Matristem wound matrix, per	JW - Skin Substitute	1/1/2016	12/31/2016	
Q4119	Matristem wound matrix, per	JC - Skin Substitute	1/1/2016	12/31/2016	
Q4120	Matristem burn matrix, per	JW - Skin Substitute	1/1/2016	12/31/2016	
Q4120	Matristem burn matrix, per	JC - Skin Substitute	1/1/2016	12/31/2016	
V2785	Processing, Preserving & Transporting Corneal Tissue	NU – New Equipment	3/1/1989	12/31/2016	RF122, RF132
14301	Tissue Transfer Repair of Wound (30.1 to 60.0 s.q. Centimeters)	AS – PA SVCS for Assistant	1/1/2010		RF122; RF132
21453	Closed Treatment of Broken Jaw Bone with Insertion of Hardware or Oral Splint	50 – Bilateral Procedure	1/1/2016		Only on RF121
28344	Reconstruction, Toe(s); Polydactyly	50 – Bilateral Procedure	10/1/2016		RF121, RF122, RF132

97167	Evaluation Of Occupational Therapy Established Plan Of Care, Typically 60 Minutes	GO - OP Occupational Therapy Service	1/1/2017		RF121; RF122; RF132
97168	Re-Evaluation of Occupational Therapy Established Plan of Care, Typically 30 Minutes	GO - OP Occupational Therapy Service	1/1/2017		RF121; RF122; RF132
97606	Negative Pressure Wound Therapy, Surface Area Greater Than 50 Square Centimeters, Per Session	AS – PA SVCS for Assistant	10/1/2016		RF121; RF122; RF132
99214	Established Patient Office or Other Outpatient, Visit Typically 25 Minutes	SA – Nurse Pract Rend Svs	1/1/2016		RF121; RF122; RF132

- The HCPCS code G0477 (Drug Test(s), Presumptive, Any Number of Drug Classes) now has listed under Laboratory on RF113 W (Lab test can be done in physician’s office).



Place of Service

Effective for the dates of service listed the following Place of Service can now be reported on the codes below:

Code	Description	Place Of Service	Effective Begin Date
15760	Graft; Composite	23 – Emergency Room -	11/01/2016
25000	Incision, Extensor Tendon Sheath, Wrist	11 – Office	01/01/2016
31240	Nasal/Sinus Endoscopy, Surgical; With	11 – Office	01/01/2017
31255	Nasal/Sinus Endoscopy, Surgical; With	11 – Office	01/01/2017
38221	Bone Marrow; Biopsy, Needle Or Trocar	81 – Independent Laboratory	01/01/2016
50435	Exchange Nephrostomy Catheter, Percuta-	23 – Emergency Room -	01/01/2016
86593	Syphilis Test, Non-Treponemal Antibody;	11 – Office	01/01/2016
88185	Flow Cytometry, Cell Surface, Cytoplas-	11 – Office	01/01/2016
A4452	Tape, Waterproof, Per 18 Square Inches	20 – Urgent Care Facility	01/01/2016
A4930	Gloves, Sterile, Per Pair	11 – Office	01/01/2016
A6407	Packing Strips, Non-Impregnated, Sterile,	22 – Outpatient Hospital	01/01/2016
A7030	Full Face Mask Used With Positive Air-	11 - Office	01/01/2016
E0163	Commode Chair, Mobile Or Stationary,	21 – Inpatient Hospital	01/01/2016
E0431	Portable Gaseous Oxygen System, Rental;	21 – Inpatient Hospital	01/01/2016
E0650	Pneumatic Compressor, Non-Segmental	24 – Ambulatory Surgical	01/01/2016
E0673	Segmental Gradient Pressure Pneumatic	24 – Ambulatory Surgical	01/01/2016
E0676	Intermittent Limb Compression Device	24 – Ambulatory Surgical	01/01/2016
E2510	Speech Generating Device, Synthesized	13 – Assisted Living Facility	01/01/2016
J3380	Injection, Vedolizumab, 1 mg	12 - Home	01/01/2016
S5110	Home Care Training, Family; Per 15	02 – Telehealth	01/01/2017
T1016	Case Management, Each 15 Minutes	02 – Telehealth	01/01/2017

Provider Type

Effective for dates of service listed below the following codes have been added to the respective provider types:

Code	Description	Provider Type	Effective Date
E0143	Walker, Folding, Wheeled, Adjustable or Fixed Height	08 – MD Physician	01/01/2017
E0143	Walker, Folding, Wheeled, Adjustable or Fixed Height	10 - Podiatrist	01/01/2017
E0143	Walker, Folding, Wheeled, Adjustable or Fixed Height	19 – Registered Nurse Practitioner	01/01/2017
22552	Arthrodesis, Anterior Interbody, Including Disc Space	43 Ambulatory Surgical Center	01/01/2015
22585	Arthrodesis, Anterior Interbody Technique,	43 Ambulatory Surgical Center	01/01/2015
22840	Posterior Non-Segmental Instrumentation	43 Ambulatory Surgical Center	01/01/2015
22845	Anterior Instrumentation; 2 To 3 Vertebral Segments	43 Ambulatory Surgical Center	01/01/2015
27514	Open Treatment of Broken Thigh Bone	10 - Podiatrist	01/01/2016
27705	Incision of Shin Bone	10 - Podiatrist	01/01/2016
50431	Injection Procedure For X-Ray Imaging Of Kidney And Urinary Duct (Ureter) Using Imaging Guidance Including Radiological Supervision And Interpretation	18 – Physician’s Assistant	04/01/2016
50432	Placement Of Catheter Of Kidney, Accessed Through The Skin Using Imaging Guidance With Radiological Supervision And Interpretation	18 – Physician’s Assistant	04/01/2016
50435	Replacement Of Kidney Drainage Catheter Accessed Through The Skin With Imaging And Radiological Supervision And Interpretation	18 – Physician’s Assistant	04/01/2016
63042	Laminotomy (Hemilaminectomy), With Decompression Of Nerve	43 Ambulatory Surgical Center	01/01/2015
63044	Laminotomy (Hemilaminectomy), With Decompression Of Nerve	43 Ambulatory Surgical Center	01/01/2015

