



SOCIETY OF  
NUCLEAR MEDICINE  
AND MOLECULAR IMAGING

**FINAL 2016 Compared to Proposed 2017 Rates**  
**Medicare Hospital Outpatient Prospective Payment System HOPPS (APC)**  
**Medicine Procedures, Radiopharmaceuticals, and Drugs**

[July 2016 Addendum Update](#) [CY 17 HOPPS Proposed Rule](#)  
**Updated 7-8-2016 version**

Status Indicator	Item/Code/Service	OPPS Payment Status
<b>A</b>	Services furnished to a hospital outpatient that are paid under a fee schedule or payment system other than OPPS,* for example:	Not paid under OPPS. Paid by MACs under a fee schedule or payment system other than OPPS.
	<ul style="list-style-type: none"> <li>Separately Payable Clinical Diagnostic Laboratory Services (Not subject to deductible or coinsurance.)</li> </ul>	Services are subject to deductible or coinsurance unless indicated otherwise.
<b>D</b>	Discontinued Codes	Not paid under OPPS or any other Medicare payment system.
<b>E1</b>	Items and Services:	Not paid by Medicare when submitted on outpatient claims (any outpatient bill type).
	<ul style="list-style-type: none"> <li>Not covered by any Medicare outpatient benefit category</li> </ul>	
	<ul style="list-style-type: none"> <li>Statutorily excluded by Medicare</li> <li>Not reasonable and necessary</li> </ul>	
<b>E2</b>	Items and Services:	Not paid by Medicare when submitted on outpatient claims (any outpatient bill type).
	<ul style="list-style-type: none"> <li>for which pricing information and claims data are not available</li> </ul>	
<b>G</b>	Pass-Through Drug/ Biologicals	Paid under OPPS; separate APC payment
<b>K</b>	NonPass-Through Drugs and nonimplantable Biologicals, including Therapeutic Radiopharmaceuticals	Paid under OPPS; separate APC payment
<b>N</b>	Items and Services packaged into APC rate	Paid under OPPS; payment is packaged into payment for other services. Therefore, there is no separate APC payment.
<b>Q1</b>	STV-Packaged Codes	Paid under OPPS; Addendum B displays APC assignments when services are separately payable.
		(1) Packaged APC payment if billed on the same claim as a HCPCS code assigned status indicator "S," "T," or "V."
		(2) Composite APC payment if billed with specific combinations of services based on OPPS composite-specific payment criteria. Payment is packaged into a single payment for specific combinations of services.
		(3) In other circumstances, payment is made through a separate APC payment.
<b>S</b>	Procedure or Service, Not Discounted When Multiple	Paid under OPPS; separate APC payment
<b>T</b>	Significant Procedure, Multiple Procedure Reduction Applies	Paid under OPPS; separate APC payment
<b>U</b>	Brachytherapy Sources	Paid under OPPS; separate APC payment

CPT/	Trade	2016-F	2017-P	2016-F	2017-P	JULY 2016 Addendum	PROPOSED RULE CY 2017	%
HCPCS	Description	APC	APC	SI	SI	Payment Rate	Payment Rate	Change
38792	Injection procedure; <u>radioactive tracer</u> for identification of sentinel node	5591	5591	Q1	Q1	\$332.65	\$334.19	0.5%
38900	Intraoperative identification (eg, mapping) of sentinel lymph node(s) includes injection of non-radioactive dye, when performed (List separately in addition to code for primary procedure) (For injection of radioactive tracer for identification of sentinel node, use 38792) (Use in conjunction with 19302,19307,38500,38510, 38520,38525,38530,38542,38740,38745)	N/A	N/A	N	N	N/A	N/A	N/A
49427	Injection procedure (eg, contrast media) for evaluation of previously placed peritoneal-venous shunt (For radiological supervision and interpretation, see 75809, 78291)	N/A	N/A	N	N	Packaged into APC rate	Packaged into APC rate	Packaged into APC rate
51701	Insertion of non-indwelling bladder catheter (eg, straight catheterization for residual urine)	5734	5734	Q1	Q1	\$91.18	\$95.66	4.9%
51702	Insertion of temporary indwelling bladder catheter; simple (eg, Foley)	5734	5734	Q1	Q1	\$91.18	\$95.66	4.9%
51703	Insertion of temporary indwelling bladder catheter; complicated (eg, altered anatomy, fractured catheter/balloon)	5721	5721	SI	S	\$129.75	\$127.42	-1.8%

CPT/		Trade	2016-F	2017-P	2016-F	2017-P	JULY 2016 Addendum	PROPOSED RULE CY 2017	%
HCPCS	Description	Name	APC	APC	SI	SI	Payment Rate	Payment Rate	Change
76376	3D rendering with interpretation and reporting of computed of computed tomography, magnetic resonance imaging, ultrasound, or other tomographic modality; not requiring image postprocessing on an independent workstation (Use 76376 in conjunction with codes(s) for base imaging procedure(s)) (Do not report 76376 in conjunction with 70496, 70498, 70544-70549, 71275, 71555, 72159, 72191, 72198, 73206, 73225, 73706, 73725, 74175, 74185, 75557-75564, 75635, 76377, 78000-78999, 0066T, 0067T, 0144T-0151T, 0159T)		N/A	N/A	N	N	Packaged into APC rate	Packaged into APC rate	Packaged into APC rate
76377	3D rendering with interpretation and reporting of computed of computed tomography, magnetic resonance imaging, ultrasound, or other tomographic modality; requiring image postprocessing on an independent workstation (Use 76377 in conjunction with codes(s) for base imaging procedure(s)) (Do not report 76377 in conjunction with 70496, 70498, 70544-70549, 71275, 71555, 72159, 72191, 72198, 73206, 73225, 73706, 73725, 74175, 74185, 75557-75564, 75635, 76376, 78000-78999, 0066T, 0067T, 0144T-0151T, 0159T)		N/A	N/A	N	N	Packaged into APC rate	Packaged into APC rate	Packaged into APC rate
77080	Dual-energy X-ray absorptiometry, bone density study, 1 or more sites; axial skeleton (eg, hips, pelvis, spine)		5522	5521	S	S	\$100.69	\$63.33	-37.1%
77085	Dual-energy X-ray absorptiometry (DXA), bone density study, 1 or more sites; axial skeleton (eg, hips, pelvis, spine), including vertebral fracture assessment		5522	5521	Q1	Q1	\$100.69	\$63.33	-37.1%
77086	Vertebral fractureassessment via dual-energy X-rayabsorptiometry (DXA)		5521	5521	Q1	Q1	\$60.80	\$63.33	4.2%
77370	Special medical radiation physics consultation		5612	5611	S	S	\$166.65	\$116.52	-30.1%
<b>NUCLEAR MEDICINE Modified in 2013 INTRODUCTORY SECTION - The services listed do not include the radiopharmaceutical or drug. To separately report supply of diagnostic and therapeutic radiopharmaceutiacs nd drugs, use the appropriate supply code(s), in addition to the procedure code.</b>									
78012	Thyroid uptake, single or multiple quantitative measurement(s) (including stimulation, suppression, or discharge, when performed)		5591	5591	S	S	\$332.65	\$334.19	0.5%
78013	Thyroid imaging (including vascular flow, when performed)		5591	5591	S	S	\$332.65	\$334.19	0.5%
78014	Thyroid imaging (including vascular flow, when performed); with single or multiple uptake(s) quantitative measurement(s) (including stimulation, suppression, or discharge, when performed)		5591	5591	S	S	\$332.65	\$334.19	0.5%
78015	Thyroid carcinoma metastases imaging; limited are (eg, neck and chest only)		5591	5591	S	S	\$332.65	\$334.19	0.5%
78016	Thyroid carcinoma metastases imaging; with additional studies (eg, urinary recovery)		5591	5591	S	S	\$332.65	\$334.19	0.5%
78018	Thyroid carcinoma metastases imaging; whole body		5591	5591	S	S	\$332.65	\$334.19	0.5%
78020 +	Thyroid carcinoma metastases uptake (Use in conjunction with code 78018 only)		N/A	N/A	N	N	Packaged into APC rate	Packaged into APC rate	Packaged into APC rate
78070	Parathyroid planar imaging (including subtraction, when performed)		5591	5591	S	S	\$332.65	\$334.19	0.5%
78071	Parathyroid planar imaging (including subtraction, when performed); with tomographic (SPECT)		5591	5591	S	S	\$332.65	\$334.19	0.5%
78072	Parathyroid planar imaging (including subtraction, when performed); with tomographic (SPECT), and concurrently acquired computed tomography (CT) for anatomical localization		5592	5592	S	S	\$441.36	\$431.04	-2.3%
78075	Adrenal imaging, cortex and/or medulla		5593	5593	S	S	\$1,108.46	\$1,142.71	3.1%
78099	Unlisted endocrine procedure, diagnostic nuclear medicine		5591	5591	S	S	\$332.65	\$334.19	0.5%
78102	Bone marrow imaging; limited area		5591	5591	S	S	\$332.65	\$334.19	0.5%
78103	Bone marrow imaging; multiple areas		5591	5591	S	S	\$332.65	\$334.19	0.5%
78104	Bone marrow imaging; whole body		5591	5591	S	S	\$332.65	\$334.19	0.5%
78110	Plasma volume, radiopharmaceutical volume-dilution technique (separate procedure); single sampling		5591	5593	S	S	\$332.65	\$1,142.71	243.5%
78111	Plasma volume, radiopharmaceutical volume-dilution technique (separate procedure); multiple sampling		5591	5593	S	S	\$332.65	\$1,142.71	243.5%
78120	Red cell volume determination (separate procedure); single sampling		5591	5591	S	S	\$332.65	\$334.19	0.5%
78121	Red cell volume determination (separate procedure); multiple sampling		5591	5592	S	S	\$332.65	\$431.04	29.6%
78122	Whole blood volume determination, including separate measurement of plasma volume and red cell volume (radiopharmaceutical volume-dilution technique)		5592	5592	S	S	\$441.36	\$431.04	-2.3%

CPT/		Trade	2016-F	2017-P	2016-F	2017-P	JULY 2016 Addendum	PROPOSED RULE CY 2017	%
HCPCS	Description	Name	APC	APC	SI	SI	Payment Rate	Payment Rate	Change
78130	Red cell survival study;		5591	5591	S	S	\$332.65	\$334.19	0.5%
78135	Red cell survival study; differential organ/tissue kinetics (eg, splenic and/or hepatic sequestration)		5591	5591	S	S	\$332.65	\$334.19	0.5%
78140	Labeled red cell sequestration, differential organ/tissue, (eg, splenic and/or hepatic)		5591	5591	S	S	\$332.65	\$334.19	0.5%
78185	Spleen imaging only, with or without vascular flow (If combined with liver study, use procedures 78215 and 78216)		5591	5591	S	S	\$332.65	\$334.19	0.5%
78190	Kinetics, study of platelet survival, with or without differential organ/tissue localization		5593	5593	S	S	\$1,108.46	\$1,142.71	3.1%
78191	Platelet survival study		5591	5591	S	S	\$332.65	\$334.19	0.5%
78195	Lymphatics and lymph nodes imaging (For sentinel node identification without scintigraphy imaging, use 38792)		5591	5592	S	S	\$332.65	\$431.04	29.6%
78199	Unlisted hematopoietic, Reticuloendothelial and lymphatic procedure, diagnostic nuclear medicine		5591	5591	S	S	\$332.65	\$334.19	0.5%
78201	Liver imaging; static only		5591	5593	S	S	\$332.65	\$1,142.71	243.5%
78202	Liver imaging; with vascular flow		5591	5593	S	S	\$332.65	\$1,142.71	243.5%
78205	Liver imaging (SPECT);		5591	5593	S	S	\$332.65	\$1,142.71	243.5%
78206	Liver image (SPECT); with vascular flow		5591	5592	S	S	\$332.65	\$431.04	29.6%
78215	Liver and spleen imaging; static only		5591	5591	S	S	\$332.65	\$334.19	0.5%
78216	Liver and spleen imaging; with vascular flow		5591	5591	S	S	\$332.65	\$334.19	0.5%
78226	Hepatobiliary system imaging, including gallbladder when present		5591	5591	S	S	\$332.65	\$334.19	0.5%
78227	Hepatobiliary system imaging, including gallbladder when present; with pharmacologic intervention, including quantitative measurement(s) when performed		5591	5592	S	S	\$332.65	\$431.04	29.6%
78230	Salivary gland imaging;		5591	5591	S	S	\$332.65	\$334.19	0.5%
78231	Salivary gland imaging; with serial images		5591	5591	S	S	\$332.65	\$334.19	0.5%
78232	Salivary gland function study		5591	5591	S	S	\$332.65	\$334.19	0.5%
78258	Esophageal motility		5591	5591	S	S	\$332.65	\$334.19	0.5%
78261	Gastric mucosa imaging		5591	5591	S	S	\$332.65	\$334.19	0.5%
78262	Gastroesophageal reflux study		5591	5591	S	S	\$332.65	\$334.19	0.5%
78264	Gastric Emptying Imaging Study (eg, solid, liquid or both)		5591	5591	S	S	\$332.65	\$334.19	0.5%
78265	Gastric Emptying Imaging Study (eg, solid, liquid or both); with small bowel transit		5591	5591	S	S	\$332.65	\$334.19	0.5%
78266	Gastric Emptying Imaging Study (eg, solid, liquid or both); with small bowel and colon transit, multiple days		5592	5592	S	S	\$441.36	\$431.04	-2.3%
78267	Urea breath test, C-14 (isotopic); acquisition for analysis		N/A	N/A	A	A	N/A	N/A	N/A
78268	Urea breath test, C-14 (isotopic); analysis		N/A	N/A	A	A	N/A	N/A	N/A
78270	Vit B-12 absorption study (eg, Schilling test); without intrinsic factor		5591	5591	S	S	\$332.65	\$334.19	0.5%
78271	Vit B-12 absorption study (eg, Schilling test); with intrinsic factor		5591	5591	S	S	\$332.65	\$334.19	0.5%
78272	Vit B-12 absorption study combined, with and without intrinsic factor		5591	5591	S	S	\$332.65	\$334.19	0.5%
78278	Acute gastrointestinal blood loss imaging		5591	5591	S	S	\$332.65	\$334.19	0.5%
78282	Gastrointestinal protein loss		5591	5591	S	S	\$332.65	\$334.19	0.5%
78290	Intestine imaging (eg, ectopic gastric mucosa, Meckel's localization, volvulus)		5591	5591	S	S	\$332.65	\$334.19	0.5%
78291	Peritoneal-venous shunt patency test (eg, for LeVeen, Denver shunt)		5591	5591	S	S	\$332.65	\$334.19	0.5%
78299	Unlisted gastrointestinal procedure, diagnostic nuclear medicine		5591	5591	S	S	\$332.65	\$334.19	0.5%
78300	Bone and/or joint imaging; limited area		5591	5591	S	S	\$332.65	\$334.19	0.5%
78305	Bone and/or joint imaging; multiple areas		5591	5591	S	S	\$332.65	\$334.19	0.5%
78306	Bone and/or joint imaging; whole body		5591	5591	S	S	\$332.65	\$334.19	0.5%
78315	Bone and/or joint imaging; 3 three phase study		5591	5591	S	S	\$332.65	\$334.19	0.5%
78320	Bone and/or joint imaging; tomographic (SPECT)		5591	5591	S	S	\$332.65	\$334.19	0.5%
78350	Bone density (bone mineral content) study , 1 or more sites; single photon absorptiometry		N/A	N/A	E	E1	N/A	N/A	N/A
78351	Bone density (bone mineral content) study , 1 or more sites; dual photon absorptiometry one or more sites		N/A	N/A	E	E1	N/A	N/A	N/A

CPT/		Trade	2016-F	2017-P	2016-F	2017-P	JULY 2016 Addendum	PROPOSED RULE CY 2017	%
HCPCS	Description	Name	APC	APC	SI	SI	Payment Rate	Payment Rate	Change
78399	Unlisted musculoskeletal procedure, diagnostic nuclear medicine		5591	5591	S	S	\$332.65	\$334.19	0.5%
78414	Determination of central c-v hemodynamics (non-imagine) (eg, ejection fraction with probe technique) with or without pharmacologic intervention or exercise, single or multiple determinations		5592	5592	S	S	\$441.36	\$431.04	-2.3%
78428	Cardiac shunt detection		5591	5591	S	S	\$332.65	\$334.19	0.5%
78445	Non-cardiac vascular flow imaging (ie, angiography, venography)		5591	5591	S	S	\$332.65	\$334.19	0.5%
78451	Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); single study, at rest or stress (exercise or pharmacologic)		5593	5593	S	S	\$1,108.46	\$1,142.71	3.1%
78452	Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or stress (exercise or pharmacologic) and/or redistribution and/or rest reinjection		5593	5593	S	S	\$1,108.46	\$1,142.71	3.1%
78453	Myocardial perfusion imaging, planar (including qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); single study, at rest or stress (exercise or pharmacologic)		5592	5593	S	S	\$441.36	\$1,142.71	158.9%
78454	Myocardial perfusion imaging, planar (including qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or stress (exercise or pharmacologic) and/or redistribution and/or rest reinjection		5593	5593	S	S	\$1,108.46	\$1,142.71	3.1%
78456	Acute venous thrombus imaging, peptide		5593	5593	S	S	\$1,108.46	\$1,142.71	3.1%
78457	Venous thrombosis imaging, venogram; unilateral		5592	5593	S	S	\$441.36	\$1,142.71	158.9%
78458	Venous thrombosis imaging, venogram; bilateral		5591	5591	S	S	\$332.65	\$334.19	0.5%
78459	Myocardial imaging, positron emission tomography (PET), metabolic evaluation		5594	5593	S	S	\$1,285.17	\$1,142.71	-11.1%
78466	Myocardial imaging, infarct avid, planar; qualitative or quantitative		5591	5591	S	S	\$332.65	\$334.19	0.5%
78468	Myocardial imaging, infarct avid, planar; with ejection fraction by first pass technique		5591	5592	S	S	\$332.65	\$431.04	29.6%
78469	Myocardial imaging, infarct avid, planar; tomographic SPECT with or without quantification		5592	5593	S	S	\$441.36	\$1,142.71	158.9%
78472	Cardiac blood pool imaging, gated equilibrium; planar, single study at rest or stress (exercise and/or pharmacologic), wall motion study plus ejection fraction, with or without additional quantitative processing (or assessment of cardiac function by first pass technique, use 78496)		5591	5591	S	S	\$332.65	\$334.19	0.5%
78473	Cardiac blood pool imaging, gated equilibrium; multiple studies, wall motion study plus ejection fraction, at rest and stress (exercise and/or pharmacologic), with or without additional quantification		5591	5591	S	S	\$332.65	\$334.19	0.5%
78481	Cardiac blood pool imaging (planar), first pass technique; single study, at rest or with stress (exercise and/or pharmacologic), wall motion study plus ejection fraction, with or without quantification		5592	5592	S	S	\$441.36	\$431.04	-2.3%
78483	Cardiac blood pool imaging (planar), first pass technique; multiple studies, at rest and with stress (exercise and/or pharmacologic), wall motion study plus ejection fraction, with or without quantification		5592	5592	S	S	\$441.36	\$431.04	-2.3%
78491	Myocardial imaging, positron emission tomography (PET), perfusion; single study at rest or stress		5594	5594	S	S	\$1,285.17	\$1,310.07	1.9%
78492	Myocardial imaging, positron emission tomography (PET), perfusion; multiple studies at rest and/or stress		5594	5594	S	S	\$1,285.17	\$1,310.07	1.9%
78494	Cardiac blood pool imaging, gated equilibrium, SPECT, at rest, wall motion study plus ejection fraction, with or without quantitative processing		5591	5591	S	S	\$332.65	\$334.19	0.5%
78496 +	Cardiac blood pool imaging, gated equilibrium, single study, at rest, with right ventricular ejection fraction by first pass technique (Use 78496 in conjunction with 78472)		N/A	N/A	N	N	Packaged into APC rate	Packaged into APC rate	Packaged into APC rate
78499	Unlisted cardiovascular procedure, diagnostic nuclear medicine		5591	5591	S	S	\$332.65	\$334.19	0.5%
0331T	<b>Myocardial sympathetic innervation</b> , imaging, planar qualitative assessment		5593	5593	S	S	\$1,108.46	\$1,142.71	3.1%

CPT/		Trade	2016-F	2017-P	2016-F	2017-P	JULY 2016 Addendum	PROPOSED RULE CY 2017	%
HCPCS	Description	Name	APC	APC	SI	SI	Payment Rate	Payment Rate	Change
0332T	<b>Myocardial sympathetic innervation</b> , imaging, planar qualitative and quantitative assessment; with tomographic <b>SPECT</b>		5593	5593	S	S	\$1,108.46	\$1,142.71	3.1%
78579	Pulmonary ventilation imaging (eg, aerosol or gas)		5591	5591	S	S	\$332.65	\$334.19	0.5%
78580	Pulmonary perfusion imaging (eg, particulate)		5591	5591	S	S	\$332.65	\$334.19	0.5%
78582	Pulmonary ventilation imaging (eg, aerosol or gas) and perfusion imaging		5592	5592	S	S	\$441.36	\$431.04	-2.3%
78597	Quantitative differential pulmonary perfusion, including imaging when performed		5591	5591	S	S	\$332.65	\$334.19	0.5%
78598	Quantitative differential pulmonary perfusion and ventilation (eg aerosol or gas), including imaging when performed		5592	5592	S	S	\$441.36	\$431.04	-2.3%
78599	Unlisted respiratory procedure, diagnostic nuclear medicine		5591	5591	S	S	\$332.65	\$334.19	0.5%
78600	Brain imaging, less than 4 static views;		5591	5591	S	S	\$332.65	\$334.19	0.5%
78601	Brain imaging, less than 4 static views; with vascular flow		5591	5591	S	S	\$332.65	\$334.19	0.5%
78605	Brain imaging, minimum 4 static views;		5592	5592	S	S	\$441.36	\$431.04	-2.3%
78606	Brain imaging, minimum 4 static views; with vascular flow		5592	5592	S	S	\$441.36	\$431.04	-2.3%
78607	Brain imaging, tomographic (SPECT)		5593	5593	S	S	\$1,108.46	\$1,142.71	3.1%
78608	Brain imaging, positron emission tomography (PET); metabolic evaluation		5594	5594	S	S	\$1,285.17	\$1,310.07	1.9%
78609	Brain imaging, positron emission tomography (PET); perfusion evaluation		N/A	N/A	E	E1	N/A	N/A	N/A
78610	Brain imaging, vascular flow only		5591	5592	S	S	\$332.65	\$431.04	29.6%
78630	Cerebrospinal fluid flow, imaging (not including introduction of material); cisternography (For injection procedure, see 61000-61070, 62270-62319)		5592	5592	S	S	\$441.36	\$431.04	-2.3%
78635	Cerebrospinal fluid flow, imaging (not including introduction of material); ventriculography (For injection procedure, see 61000-61070, 62270-62294)		5592	5592	S	S	\$441.36	\$431.04	-2.3%
78645	Cerebrospinal fluid flow, imaging (not including introduction of material); shunt evaluation (For injection procedure, see 61000-61070, 62270-62294)		5591	5592	S	S	\$332.65	\$431.04	29.6%
78647	Cerebrospinal fluid flow, imaging (not including introduction of material); tomographic (SPECT)		5593	5593	S	S	\$1,108.46	\$1,142.71	3.1%
78650	Cerebrospinal fluid leakage detection and localization		5593	5593	S	S	\$1,108.46	\$1,142.71	3.1%
78660	Radiopharmaceutical dacryocystography		5591	5591	S	S	\$332.65	\$334.19	0.5%
78699	Unlisted nervous system procedure, diagnostic nuclear medicine		5591	5591	S	S	\$332.65	\$334.19	0.5%
78700	Kidney imaging morphology		5591	5591	S	S	\$332.65	\$334.19	0.5%
78701	Kidney imaging morphology with vascular flow		5591	5591	S	S	\$332.65	\$334.19	0.5%
78707	Kidney imaging morphology with vascular flow and function, single study without pharmacological intervention		5592	5592	S	S	\$441.36	\$431.04	-2.3%
78708	Kidney imaging morphology with vascular flow and function, single study, with pharmacological intervention (eg, angiotensin converting enzyme inhibitor and/or diuretic)		5592	5592	S	S	\$441.36	\$431.04	-2.3%
78709	Kidney imaging morphology with vascular flow and function, multiple studies, with and without pharmacological intervention (eg, angiotensin converting enzyme inhibitor and/or diuretic)		5592	5592	S	S	\$441.36	\$431.04	-2.3%
78710	Kidney imaging morphology tomographic (SPECT)		5592	5592	S	S	\$441.36	\$431.04	-2.3%
78725	Kidney function study, non-imaging radioisotopic study		5661	5591	S	S	\$249.98	\$334.19	33.7%
78730 +	Urinary bladder residual study (List separately in addition to code for primary procedure) (Use 78730 in conjunction with 78740) (For measurement of postvoid residual urine and/or bladder capacity by ultrasound, nonimaging, use 51798) (For ultrasound imaging of the bladder only, with measurement of postvoid residual urine when performed, use 76857)		N/A	N/A	N	N	Packaged into APC rate	Packaged into APC rate	Packaged into APC rate
78740	Ureteral reflux study (radiopharmaceutical voiding cystogram) For catheterization see 51701, 51702, 51703		5591	5591	S	S	\$332.65	\$334.19	0.5%
78761	Testicular imaging with vascular flow		5591	5591	S	S	\$332.65	\$334.19	0.5%

CPT/		Trade	2016-F	2017-P	2016-F	2017-P	JULY 2016 Addendum	PROPOSED RULE CY 2017	%
HCPCS	Description	Name	APC	APC	SI	SI	Payment Rate	Payment Rate	Change
78799	Unlisted genitourinary procedure; diagnostic nuclear medicine		5591	5591	S	S	\$332.65	\$334.19	0.5%
78800	Radiopharmaceutical localization of tumor or distribution of radiopharmaceutical agent(s); limited area		5591	5591	S	S	\$332.65	\$334.19	0.5%
78801	Radiopharmaceutical localization of tumor or distribution of radiopharmaceutical agent(s); multiple areas		5591	5591	S	S	\$332.65	\$334.19	0.5%
78802	Radiopharmaceutical localization of tumor or distribution of radiopharmaceutical agent(s); whole body, single day imaging		5592	5593	S	S	\$441.36	\$1,142.71	158.9%
78803	Radiopharmaceutical localization of tumor or distribution of radiopharmaceutical agent(s); tomographic (SPECT)		5592	5592	S	S	\$441.36	\$431.04	-2.3%
78804	Radiopharmaceutical localization of tumor or distribution of radiopharmaceutical agent(s); whole body, requiring 2 or more days imaging		5593	5593	S	S	\$1,108.46	\$1,142.71	3.1%
78805	Radiopharmaceutical localization of inflammatory process; limited area		5593	5593	S	S	\$1,108.46	\$1,142.71	3.1%
78806	Radiopharmaceutical localization of inflammatory process; whole body		5593	5593	S	S	\$1,108.46	\$1,142.71	3.1%
78807	Radiopharmaceutical localization of inflammatory process; tomographic (SPECT) (For imaging bone infectious or inflammatory disease with a bone imaging radiopharmaceutical, see 78300, 78305, 78306)		5592	5592	S	S	\$441.36	\$431.04	-2.3%
78808	Injection procedure for radiopharmaceutical localization by non-imaging probe study, intravenous (eg, parathyroid adenoma) (For sentinel lymph node identification, use 38792)		5591	5591	Q1	Q1	\$332.65	\$334.19	0.5%
78811	Positron emission tomography (PET) imaging; limited area (eg, chest, head/neck)		5594	5593	S	S	\$1,285.17	\$1,142.71	-11.1%
78812	Positron emission tomography (PET) imaging; skull base to mid-thigh		5594	5594	S	S	\$1,285.17	\$1,310.07	1.9%
78813	Positron emission tomography (PET) imaging; whole body		5594	5594	S	S	\$1,285.17	\$1,310.07	1.9%
78814	Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; limited area (eg, chest, head/neck)		5594	5594	S	S	\$1,285.17	\$1,310.07	1.9%
78815	Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; skull base to mid-thigh		5594	5594	S	S	\$1,285.17	\$1,310.07	1.9%
78816	Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body		5594	5594	S	S	\$1,285.17	\$1,310.07	1.9%
(Report 78811-78816 only once per imaging session) (Computed tomography (CT) performed for other than attenuation correction and anatomical localization is reported using the appropriate site specific CT code with modifier 59)									
78999	Unlisted miscellaneous procedure, diagnostic nuclear medicine		5591	5591	S	S	\$332.65	\$334.19	0.5%
C9898	Radiolabeled product provided during a hospital inpatient stay		N/A	N/A	N	N	N/A	N/A	N/A
79005	Radiopharmaceutical therapy, by oral administration (For monoclonal antibody by intravenous infusion, use 79403)		5561	5661	S	S	\$249.98	\$212.88	-14.8%
79101	Radiopharmaceutical therapy, by intravenous administration (Do not report 79101 in conjunction with 36400, 35410, 79403, 90780, 96408) (For monoclonal antibody by intravenous infusion, use 79403) (For infusion or instillation of non-antibody radioelement solution that includes three months follow-up care, use 77750)		5561	5661	S	S	\$249.98	\$212.88	-14.8%
79200	Radiopharmaceutical therapy, by intracavitary administration		5561	5661	S	S	\$249.98	\$212.88	-14.8%
79300	Radiopharmaceutical therapy, by interstitial radioactive colloid administration		5561	5661	S	S	\$249.98	\$212.88	-14.8%
79403	Radiopharmaceutical therapy, radiolabeled monoclonal antibody by intravenous infusion (For pre-treatment imaging, see 78802, 78804) (Do not use in conjunction with 79101)		5561	5661	S	S	\$249.98	\$212.88	-14.8%
79440	Radiopharmaceutical therapy, by intra-articular administration		5561	5661	S	S	\$249.98	\$212.88	-14.8%
79445	Radiopharmaceutical therapy, by intra-arterial particulate administration (Do not report 79445 in conjunction with 90783, 96420) (Use appropriate procedural and radiological supervision and interpretation codes for the angiographic and interventional procedures provided pre-requisite to intra-arterial radiopharmaceutical therapy)		5561	5661	S	S	\$249.98	\$212.88	-14.8%
79999	Radiopharmaceutical therapy, unlisted procedure		5561	5661	S	S	\$249.98	\$212.88	-14.8%

CPT/		Trade	2016-F	2017-P	2016-F	2017-P	JULY 2016 Addendum	PROPOSED RULE CY 2017	%
HCPCS	Description	Name	APC	APC	SI	SI	Payment Rate	Payment Rate	Change
93017	Cardiovascular stress test using maximal or submaximal treadmill or bicycle exercise, continuous electrocardiographic monitoring, and/or pharmacological stress; tracing only, without interpretation and report		5722	5722	Q1	Q1	\$220.35	\$231.67	5.1%
96413	Chemotherapy administration, intravenous infusion technique; up to one hour, single or initial substance/drug		5695	5694	S	S	\$280.27	\$281.41	0.4%
G0219	PET imaging whole body; melanoma for non-covered indications		N/A	N/A	E	E1	N/A	N/A	NA
G0235	PET IMAGING, ANY SITE, NOT OTHERWISE SPECIFIED		N/A	N/A	E	E1	N/A	N/A	NA
G0252	PET imaging, full & partial-ring PET scanner only, for initial diagnosis of breast cancer and/or surgical planning for breast cancer (eg, initial staging of axillary lymph nodes)		N/A	N/A	E	E1	N/A	N/A	NA
<b>RADIOPHARMACEUTICALS &amp; NUCLEAR MEDICINE RELATED DRUGS</b>							<b>JULY 2016 Addendum</b> <i>(unless noted differently)</i>	<b>PROPOSED RULE CY 2017</b>	<b>% Change</b>
Q9969	Non-HEU TC-99M Add-On per study dose Tc-99m from non-highly enriched uranium source, full cost recovery add-on, per study dose	95 percent NON-HEU Product	1442	1442	K	K	\$10.00	\$10.00	\$0.00
A4641	Radiopharm dx agent noc RADIOPHARMACEUTICAL, DIAGNOSTIC, NOT OTHERWISE CLASSIFIED	NOC	N/A	N/A	N	N	Packaged into APC rate	Packaged into APC rate	Packaged into APC rate
A4642	<del>INDIUM IN-111 SATUMOMAB</del> INDIUM IN-111 SATUMOMAB PENDETIDE, DIAGNOSTIC, PER STUDY DOSE, UP TO 6 MILLICURIES	ONCOSCINT®	N/A	N/A	N	N	Packaged into APC rate	Packaged into APC rate	Packaged into APC rate
A9500	Tc99m sestamibi TECHNETIUM TC-99M SESTAMIBI, DIAGNOSTIC, PER STUDY DOSE, UP TO 40 MILLICURIES	CARDIOLITE® / MIRALUMA®	N/A	N/A	N	N	Packaged into APC rate	Packaged into APC rate	Packaged into APC rate
A9501	Technetium TC-99m teboroxime TECHNETIUM TC-99M TEBOROXIME, DIAGNOSTIC, PER STUDY DOSE	CardioTec® TEBO	N/A	N/A	N	N	Packaged into APC rate	Packaged into APC rate	Packaged into APC rate
A9502	Tc99m tetrofosmin TECHNETIUM TC-99M TETROFOSMIN, DIAGNOSTIC, PER STUDY DOSE	MYOVUE®	N/A	N/A	N	N	Packaged into APC rate	Packaged into APC rate	Packaged into APC rate
A9503	Tc99m medronate TECHNETIUM TC-99M MEDRONATE, DIAGNOSTIC, PER STUDY DOSE, UP TO 30 MILLICURIES	MDP	N/A	N/A	N	N	Packaged into APC rate	Packaged into APC rate	Packaged into APC rate
A9504	Tc99m apcitide TECHNETIUM TC-99M APCITIDE, DIAGNOSTIC, PER STUDY DOSE, UP TO 20 MILLICURIES	ACUTECT®	N/A	N/A	N	N	Packaged into APC rate	Packaged into APC rate	Packaged into APC rate
A9505	TL201 thallium THALLIUM TL-201 THALLOUS CHLORIDE, DIAGNOSTIC, PER MILLICURIE	THALLIUM 201	N/A	N/A	N	N	Packaged into APC rate	Packaged into APC rate	Packaged into APC rate
A9507	In111 capromab INDIUM IN-111 CAPROMAB PENDETIDE, DIAGNOSTIC, PER STUDY DOSE, UP TO 10 MILLICURIES	PROSTASCINT®	N/A	N/A	N	N	Packaged into APC rate	Packaged into APC rate	Packaged into APC rate
A9508	I131 iodobenguante, dx IODINE I-131 IOBENGUANE SULFATE, DIAGNOSTIC, PER 0.5 MILLICURIE	I-131 MIBG	N/A	N/A	N	N	Packaged into APC rate	Packaged into APC rate	Packaged into APC rate
A9509	Iodine I-123 sod iodide mil IODINE I-123 SODIUM IODIDE, DIAGNOSTIC, PER MILLICURIE	Use for 1.4 mCi doses of I-123 for whole body imaging for less than 1 mCi and thyroid imaging see A9516	N/A	N/A	N	N	Packaged into APC rate	Packaged into APC rate	Packaged into APC rate
A9510	TECHNETIUM TC-99M DISOFENIN, DIAGNOSTIC, PER STUDY DOSE, UP TO 15 MILLICURIES	DISIDA	N/A	N/A	N	N	Packaged into APC rate	Packaged into APC rate	Packaged into APC rate

CPT/		Trade	2016-F	2017-P	2016-F	2017-P	JULY 2016 Addendum	PROPOSED RULE CY 2017	%
HCPCS	Description	Name	APC	APC	SI	SI	Payment Rate	Payment Rate	Change
A9512	Tc99m pertechnetate TECHNETIUM TC-99M PERTECHNETATE, DIAGNOSTIC, PER MILLICURIE	Straight Tech Technescan Technelite	N/A	N/A	N	N	Packaged into APC rate	Packaged into APC rate	Packaged into APC rate
A9516	Iodine I-123 sod iodide mCi IODINE I-123 SODIUM IODIDE, DIAGNOSTIC, PER 100 MICROCURIES, UP TO 999 MICROCURIES	Dx I-123 Capsules. Use for A9516 for Thyroid uptakes and scans, for 1 mCi and greater and whole body imaging see A9509	N/A	N/A	N	N	Packaged into APC rate	Packaged into APC rate	Packaged into APC rate
A9517	I131 iodide cap, rx IODINE I-131 SODIUM IODIDE CAPSULE(S), THERAPEUTIC, PER MILLICURIE	Rx I-131 Capsules	1064	1064	K	K	\$40.70	\$40.70	0.0%
A9520	Tc99 Tilmanocept Diag 0.5MCI TECHNETIUM TC-99M TILMANOCEPT, DIAGNOSTIC, UP TO 0.5 MILLICURIES	Lymphoseek™	N/A	N/A	N	N	Packaged into APC rate	Packaged into APC rate	Packaged into APC rate
A9521	Tc99m exametazime TECHNETIUM TC-99M EXAMETAZIME, DIAGNOSTIC, PER STUDY DOSE, UP TO 25 MILLICURIES	CERETEC® HMPAO	N/A	N/A	N	N	Packaged into APC rate	Packaged into APC rate	Packaged into APC rate
A9524	I131 serum albumin, dx IODINE I-131 IODINATED SERUM ALBUMIN, DIAGNOSTIC, PER 5 MICROCURIES	I-131 Albumin	N/A	N/A	N	N	Packaged into APC rate	Packaged into APC rate	Packaged into APC rate
A9526	Nitrogen N-13 ammonia NITROGEN N-13 AMMONIA, DIAGNOSTIC, PER STUDY DOSE, UP TO 40 MILLICURIES	N-13	N/A	N/A	N	N	Packaged into APC rate	Packaged into APC rate	Packaged into APC rate
A9527	Iodine I-125 sodium iodide IODINE I-125, SODIUM IODIDE SOLUTION, THERAPEUTIC, PER MILLICURIE		2632	2632	U	U	\$7.14	\$80.20	1023.2%
A9528	Iodine I-131 iodide cap, dx IODINE I-131 SODIUM IODIDE CAPSULE(S), DIAGNOSTIC, PER MILLICURIE	I-131 Dx caps per mCi	N/A	N/A	N	N	Packaged into APC rate	Packaged into APC rate	Packaged into APC rate
A9529	I131 iodide sol, dx IODINE I-131 SODIUM IODIDE SOLUTION, DIAGNOSTIC, PER MILLICURIE	Dx I-131 sol per mCi	N/A	N/A	N	N	Packaged into APC rate	Packaged into APC rate	Packaged into APC rate
A9530	I131 iodide sol, rx IODINE I-131 SODIUM IODIDE SOLUTION, THERAPEUTIC, PER MILLICURIE	Rx I-131 sol per mCi	1150	1150	K	K	\$10.28	\$10.28	0.0%
A9531	I131 max 100uCi IODINE I-131 SODIUM IODIDE, DIAGNOSTIC, PER MICROCURIE (UP TO 100 MICROCURIES)	Dx I-131 up to 100 uCi	N/A	N/A	N	N	Packaged into APC rate	Packaged into APC rate	Packaged into APC rate
A9532	I125 serum albumin, dx IODINE I-125 SERUM ALBUMIN, DIAGNOSTIC, PER 5 MICROCURIES		N/A	N/A	N	N	Packaged into APC rate	Packaged into APC rate	Packaged into APC rate
A9536	Tc99m depreotide TECHNETIUM TC-99M DEPREOTIDE, DIAGNOSTIC, PER STUDY DOSE, UP TO 35 MILLICURIES	NEOTEC®	N/A	N/A	N	N	Packaged into APC rate	Packaged into APC rate	Packaged into APC rate
A9537	Tc99m mebrofenin TECHNETIUM TC-99M MEBROFENIN, DIAGNOSTIC, PER STUDY DOSE, UP TO 15 MILLICURIES	CHOLETEC®	N/A	N/A	N	N	Packaged into APC rate	Packaged into APC rate	Packaged into APC rate
A9538	Tc99m pyrophosphate TECHNETIUM TC-99M PYROPHOSPHATE, DIAGNOSTIC, PER STUDY DOSE, UP TO 25 MILLICURIES	PYROLITE® *Use this code for myocardial infarct imaging. Do not use this code for GBP, RVG or MUGA procedures see A9560	N/A	N/A	N	N	Packaged into APC rate	Packaged into APC rate	Packaged into APC rate
A9539	Tc99m pentetate TECHNETIUM TC-99M PENTETATE, DIAGNOSTIC, PER STUDY DOSE, UP TO 25 MILLICURIES	Tc-99m DTPA	N/A	N/A	N	N	Packaged into APC rate	Packaged into APC rate	Packaged into APC rate
A9540	Tc99m MAA TECHNETIUM TC-99M MACROAGGREGATED ALBUMIN, DIAGNOSTIC, PER STUDY DOSE, UP TO 10 MILLICURIES	MAA	N/A	N/A	N	N	Packaged into APC rate	Packaged into APC rate	Packaged into APC rate



CPT/		Trade	2016-F	2017-P	2016-F	2017-P	JULY 2016 Addendum	PROPOSED RULE CY 2017	%
HCPCS	Description	Name	APC	APC	SI	SI	Payment Rate	Payment Rate	Change
A9541	Tc99m sulfur colloid TECHNETIUM TC-99M SULFUR COLLOID, DIAGNOSTIC, PER STUDY DOSE, UP TO 20 MILLICURIES	SULFUR COLLOID® (SC)	N/A	N/A	N	N	Packaged into APC rate	Packaged into APC rate	Packaged into APC rate
A9542	In111 ibritumomab, dx INDIUM IN-111 IBRITUMOMAB TIUXETAN, DIAGNOSTIC, PER STUDY DOSE, UP TO 5 MILLICURIES	Dx In-111 ZEVALIN®	N/A	N/A	N	N	Packaged into APC rate	Packaged into APC rate	Packaged into APC rate
A9543	Y90 ibritumomab, rx YTTRIUM Y-90 IBRITUMOMAB TIUXETAN, THERAPEUTIC, PER TREATMENT DOSE, UP TO 40 MILLICURIES	Rx Y-90 ZEVALIN®	1643	1643	K	K	\$46,854.73	\$46,722.69	-0.3%
A9544	I131 tositumomab, dx IODINE I-131 TOSITUMOMAB, DIAGNOSTIC, PER STUDY DOSE	Dx BEXXAR®	N/A	N/A	N	N	Packaged into APC rate	Packaged into APC rate	Packaged into APC rate
A9545	I131 tositumomab, rx IODINE I-131 TOSITUMOMAB, THERAPEUTIC, PER TREATMENT DOSE	Rx BEXXAR®	N/A	N/A	E	E2	Packaged into APC rate	Packaged into APC rate	Packaged into APC rate
A9546	Co57/58 COBALT CO-57/58, CYANOCOBALAMIN, DIAGNOSTIC, PER STUDY DOSE, UP TO 1 MICROCURIE	NYCOMED	N/A	N/A	N	N	Packaged into APC rate	Packaged into APC rate	Packaged into APC rate
A9547	In111 oxyquinoline INDIUM IN-111 OXYQUINOLINE, DIAGNOSTIC, PER 0.5 MILLICURIE	See new codes A9570 and A9571 for WBC and Platelet Imaging	N/A	N/A	N	N	Packaged into APC rate	Packaged into APC rate	Packaged into APC rate
A9548	In111 pentetate INDIUM IN-111 PENTETATE, DIAGNOSTIC, PER 0.5 MILLICURIE	Indium DTPA	N/A	N/A	N	N	Packaged into APC rate	Packaged into APC rate	Packaged into APC rate
A9550	Tc99m gluceptate TECHNETIUM TC-99M SODIUM GLUCEPTATE, DIAGNOSTIC, PER STUDY DOSE, UP TO 25 MILLICURIES	GLUCOSCAN®	N/A	N/A	N	N	Packaged into APC rate	Packaged into APC rate	Packaged into APC rate
A9551	Tc99m succimer TECHNETIUM TC-99M SUCCIMER, DIAGNOSTIC, PER STUDY DOSE, UP TO 10 MILLICURIES	DMSA	N/A	N/A	N	N	Packaged into APC rate	Packaged into APC rate	Packaged into APC rate
A9552	F18 fdg FLUORODEOXYGLUCOSE F-18 FDG, DIAGNOSTIC, PER STUDY DOSE, UP TO 45 MILLICURIES	FDG / F-18	N/A	N/A	N	N	Packaged into APC rate	Packaged into APC rate	Packaged into APC rate
A9553	Cr51 chromate CHROMIUM CR-51 SODIUM CHROMATE, DIAGNOSTIC, PER STUDY DOSE, UP TO 250 MICROCURIES		N/A	N/A	N	N	Packaged into APC rate	Packaged into APC rate	Packaged into APC rate
A9554	I125 iothalamate, dx IODINE I-125 SODIUM IOTHALAMATE, DIAGNOSTIC, PER STUDY DOSE, UP TO 10 MICROCURIES		N/A	N/A	N	N	Packaged into APC rate	Packaged into APC rate	Packaged into APC rate
A9555	Rb82 rubidium RUBIDIUM RB-82, DIAGNOSTIC, PER STUDY DOSE, UP TO 60 MILLICURIES	Rb-82 CardioGen82	N/A	N/A	N	N	Packaged into APC rate	Packaged into APC rate	Packaged into APC rate
A9556	Ga67 gallium GALLIUM GA-67 CITRATE, DIAGNOSTIC, PER MILLICURIE	GALLIUM	N/A	N/A	N	N	Packaged into APC rate	Packaged into APC rate	Packaged into APC rate
A9557	Tc99m bicsate TECHNETIUM TC-99M BICISATE, DIAGNOSTIC, PER STUDY DOSE, UP TO 25 MILLICURIES	NEUROLITE®	N/A	N/A	N	N	Packaged into APC rate	Packaged into APC rate	Packaged into APC rate
A9558	Xe133 xenon 10mci XENON XE-133 GAS, DIAGNOSTIC, PER 10 MILLICURIES	Xenon	N/A	N/A	N	N	Packaged into APC rate	Packaged into APC rate	Packaged into APC rate

CPT/		Trade	2016-F	2017-P	2016-F	2017-P	JULY 2016 Addendum	PROPOSED RULE CY 2017	%
HCPCS	Description	Name	APC	APC	SI	SI	Payment Rate	Payment Rate	Change
A9559	COBALT CO-57 CYANOCOBALAMIN, ORAL, DIAGNOSTIC, PER STUDY DOSE, UP TO 1 MICROCURIE	Shillings Study Rubratope 57 Cobatope 57	N/A	N/A	N	N	Packaged into APC rate	Packaged into APC rate	Packaged into APC rate
A9560	Tc99m labeled rbc TECHNETIUM TC-99M LABELED RED BLOOD CELLS, DIAGNOSTIC, PER STUDY DOSE, UP TO 30 MILLICURIES	ULTRATAG® or Cold PYP + 99m Tc Code to be used for both the invivo/invitro methods of tagging Red Blood Cells	N/A	N/A	N	N	Packaged into APC rate	Packaged into APC rate	Packaged into APC rate
A9561	Tc99m oxidronate TECHNETIUM TC-99M OXIDRONATE, DIAGNOSTIC, PER STUDY DOSE, UP TO 30 MILLICURIES	HDP®	N/A	N/A	N	N	Packaged into APC rate	Packaged into APC rate	Packaged into APC rate
A9562	Tc99m mertiatide TECHNETIUM TC-99M MERTIATIDE, DIAGNOSTIC, PER STUDY DOSE, UP TO 15 MILLICURIES	MAG-3®	N/A	N/A	N	N	Packaged into APC rate	Packaged into APC rate	Packaged into APC rate
A9563	P32 Na phosphate SODIUM PHOSPHATE P-32, THERAPEUTIC, PER MILLICURIE		1675	1675	K	K	\$213.56	\$213.56	0.0%
A9564	P32 chromic phosphate CHROMIC PHOSPHATE P-32 SUSPENSION, THERAPEUTIC, PER MILLICURIE	Phosphocol P-32	1676	1676	K	K	\$906.62	\$906.62	0.0%
A9566	Tc99m fanolesomab TECHNETIUM TC-99M FANOLESOMAB, DIAGNOSTIC, PER STUDY DOSE, UP TO 25 MILLICURIES	NeuroSpec™	N/A	N/A	N	N	Packaged into APC rate	Packaged into APC rate	Packaged into APC rate
A9567	Technetium TC-99m aerosol TECHNETIUM TC-99M PENTETATE, DIAGNOSTIC, AEROSOL, PER STUDY DOSE, UP TO 75 MILLICURIES	DTPA Aerosol For Lung Ventilation Studies	N/A	N/A	N	N	Packaged into APC rate	Packaged into APC rate	Packaged into APC rate
A9568	Technetium tc99m arcitumomab TECHNETIUM TC-99M ARCITUMOMAB, DIAGNOSTIC, PER STUDY DOSE, UP TO 45 MILLICURIES	CEA-SCAN®	N/A	N/A	N	N	Packaged into APC rate	Packaged into APC rate	Packaged into APC rate
A9569	Technetium TC-99m auto WBC TECHNETIUM TC-99M EXAMETAZIME LABELED AUTOLOGOUS WHITE BLOOD CELLS, DIAGNOSTIC, PER STUDY DOSE	Use this code for infection or inflammation imaging do not use this code for brain imaging see A9521	N/A	N/A	N	N	Packaged into APC rate	Packaged into APC rate	Packaged into APC rate
A9570	Indium In-111 auto WBC 'INDIUM IN-111 LABELED AUTOLOGOUS WHITE BLOOD CELLS, DIAGNOSTIC, PER STUDY DOSE	When prepared with patient WBC use this new code do not use A9547	N/A	N/A	N	N	Packaged into APC rate	Packaged into APC rate	Packaged into APC rate
A9571	Indium IN-111 auto platelet INDIUM IN-111 LABELED AUTOLOGOUS PLATELETS, DIAGNOSTIC, PER STUDY DOSE	When prepared with patient platelets use this new code do not use A9547	N/A	N/A	N	N	Packaged into APC rate	Packaged into APC rate	Packaged into APC rate
A9572	Indium In-111 pentetreotide 'INDIUM IN-111 PENTETREOTIDE, DIAGNOSTIC, PER STUDY DOSE, UP TO 6 MILLICURIES	Octreoscan®	N/A	N/A	N	N	Packaged into APC rate	Packaged into APC rate	Packaged into APC rate
A9580	Sodium Fluoride F-18, Sodium Fluoride F-18, diagnostic, per study dose, up to 30 millicuries	F-18, NaF, Sodium Fluoride	N/A	N/A	N	N	Packaged into APC rate	Packaged into APC rate	Packaged into APC rate
A9582	Iobenguane, I-123, diagnostic, per study dose, up to 15 millicuries	I-123 MIBG AdreView NDC 17156-0235-01	N/A	N/A	N	N	Packaged into APC rate	Packaged into APC rate	Packaged into APC rate
A9584	Iodine I-123 ioflupane, diagnostic, per study dose, (up to 5 millicuries)	DaTscan® NDC #17156-210-01	N/A	N/A	N	N	Packaged into APC rate	Packaged into APC rate	Packaged into APC rate

CPT/		Trade	2016-F	2017-P	2016-F	2017-P	JULY 2016 Addendum	PROPOSED RULE CY 2017	%
HCPCS	Description	Name	APC	APC	SI	SI	Payment Rate	Payment Rate	Change
A9586	Florbetapir F18 FLORBETAPIR F18, DIAGNOSTIC, PER STUDY DOSE, UP TO 10 MILLICURIES	Amyvid™ NDC #0002-1200-01	1664	1664	G	G	\$2,756.00	\$2,756.00	0.0%
• C9458 (Jan- Jun 30-2016) • Q9983 (July and beyond)	Florbetaben F-18, diagnostic per study does, up to 8.1 millicuries	Neuraceq™ F-18 florbetaben - Piramal NDC # 54828-001-30	9458	9458	G	G	\$2,968.00	\$2,968.00	0.0%
• C9459 (Jan-June 30, 2016) • Q9982 (July and beyond)	Flutemetamol F-18, diagnostic, per study dose, up to 5 millicuries	Vizamyl™ F-18 flutemetamol - G.E. NDC # 17156-067-01	9459	9459	G	G	\$3,135.00	\$3,135.00	0.0%
• C9461 (Beginning April 1-2016)	Choline C-11, diagnostic, per study dose	C-11 Choline Zevacor or In-facility production	9461	9461	(NP) G	G	\$5,700.00	\$5,700.00	0.0%
A9600	Sr89 strontium STRONTIUM SR-89 CHLORIDE, THERAPEUTIC, PER MILLICURIE	Rx METASTRON®	0701	0701	K	K	\$1,289.53	\$1,178.26	-8.6%
A9604	SAMARIUM SM-153 LEXIDRONAMM, THERAPEUTIC, PER TREATMENT DOSE, up to 150 MILLICURIES	Rx QUADRAMET®	1295	1295	K	K	\$12,060.35	\$11,006.25	-8.7%
A9606	Radium Ra-223 dichloride, therapeutic, per microcurie dose	Xofigo™ NDC #50419-0208-01	1745	1745	K	K	\$126.62	\$123.11	-2.8%
A9699	Radiopharm rx agent noc RADIOPHARMACEUTICAL, THERAPEUTIC, NOT OTHERWISE CLASSIFIED	RX NOC			N	N	Packaged into APC rate	Packaged into APC rate	Packaged into APC rate
<b>**Note final payment rates for status G codes have offset RP amounts posted on the CMS web site by CPT code.</b>									
J0153	Adenosine inj 1mg	ADENOSCAN Replaces J0150, J0151 and J0152			N	N	Packaged into APC rate	Packaged into APC rate	Packaged into APC rate
J0280	Aminophyllin up to 250 MG, inj.				N	N	Packaged into APC rate	Packaged into APC rate	Packaged into APC rate
J0461	Inj, atropine sulfate, 0.01 mg				N	N	Packaged into APC rate	Packaged into APC rate	Packaged into APC rate
J1120	Acetazolamide sodium injection, up to 500 mg	Diamox			N	N	Packaged into APC rate	Packaged into APC rate	Packaged into APC rate
J1160	Inj, digoxin, up to 0.5 mg	Lanoxin			K	N	\$4.96	Packaged into APC rate	Packaged into APC rate
J1245	Dipyridamole injection, per 10mg	Persantine IV			N	N	Packaged into APC rate	Packaged into APC rate	Packaged into APC rate
J1250	Inj dobutamine HCL/250 mg	Dobutrex			N	N	Packaged into APC rate	Packaged into APC rate	Packaged into APC rate
J1265	Injection, dopamine HCL, 40 mg	Intropin			N	N	Packaged into APC rate	Packaged into APC rate	Packaged into APC rate
J1610	Glucagon hydrochloride per 1MG	Glucagen	9042		K	K	\$200.33	\$196.57	-1.9%
J1800	Propranolol HCL injection, up to 1 mg	Inderal			N	N	Packaged into APC rate	Packaged into APC rate	Packaged into APC rate
J1940	Furosemide injection up to 20 mg	Lasix			N	N	Packaged into APC rate	Packaged into APC rate	Packaged into APC rate
J2270	Morphine sulfate injection, up to 10 mg	Replaces J2271			N	N	Packaged into APC rate	Packaged into APC rate	Packaged into APC rate
J2785	Injection, Regadenoson, <u>0.1 milligrams</u>	LexiScan NDC 00469-6501-89			N	N	Packaged into APC rate	Packaged into APC rate	Packaged into APC rate
J2805	Sincalide injection INJECTION, SINCALIDE, 5 MICROGRAMS	Kinevac®			N	N	Packaged into APC rate	Packaged into APC rate	Packaged into APC rate
J3240	Thyrotropin injection 0.9 mg n 1.1 mg vial	Thyrogen Thytropar	9108		K	K	\$1,569.54	\$1,457.99	-7.1%
J3420	Injection, vitamin B-12 cyanocobalamin, up to 1000 mcg				N	N	Packaged into APC rate	Packaged into APC rate	Packaged into APC rate

CPT/		Trade	2016-F	2017-P	2016-F	2017-P	JULY 2016 Addendum	PROPOSED RULE CY 2017	%
HCPCS	Description	Name	APC	APC	SI	SI	Payment Rate	Payment Rate	Change
J3490	Drugs Unclassified injection DOS FDA approval date to March 30th 2016 for C-11 Choline see ● C9461 for C-11 Choline (Beginning April 1-2016) CHECK WITH LOCAL CONTRACTOR FOR CODING POLICIES	F-18 labeled fluciclovine Axumin, Ga-68 DOTATATE NETSPOT NDC 69488-001-40, C-11 Choline See also C9461			N	N	Packaged into APC rate	Packaged into APC rate	Packaged into APC rate
J3590	Unclassified biologics injection DOS FDA approval date to March 30th 2016 for C-11 Choline see ● C9461 for C-11 Choline (Beginning April 1-2016) CHECK WITH LOCAL CONTRACTOR FOR CODING POLICIES	F-18 labeled fluciclovine Axumin, Ga-68 DOTATATE NETSPOT NDC 69488-001-40, C-11 Choline See also C9461			N	N	Packaged into APC rate	Packaged into APC rate	Packaged into APC rate
J7030	Normal saline solution infus (1000 CC)				N	N	Packaged into APC rate	Packaged into APC rate	Packaged into APC rate
J7040	Normal saline solution infus (500ML=1)				N	N	Packaged into APC rate	Packaged into APC rate	Packaged into APC rate
J7050	Normal saline solution infus (250 CC)				N	N	Packaged into APC rate	Packaged into APC rate	Packaged into APC rate
J9310	Rituximab, 100 mg	RituXan	0849	0849	K	K	\$791.40	\$769.89	-2.7%
G3001	Admin + supply, tositumomab, 450 mg (Use this Code for Bexxar)	Non Radioactive Bexxar Plus Injection	5701	Deleted	S	D	\$1,971.61	Deleted	Deleted
Q9968	Injection, non-radioactive, non-contrast, visualization adjunct (e.g., Methylene Blue, Isosulfan Blue), 1mg	Methylene Blue	1446	1446	K	K	\$11.84	\$11.41	-3.6%

**Disclaimer**

The opinions referenced are those of the members of the SNMMI Coding and Reimbursement Committee and their consultants based on their coding experience. They are based on the commonly used codes in Nuclear Medicine, which are not all inclusive. Always check with your local insurance carriers as policies vary by region. The final decision for the coding of a procedure must be made by the physician considering regulations of insurance carriers and any local, state or federal laws that apply to the physicians practice. The SNMMI and its representatives disclaim any liability arising from the use of these opinions.

**Legend:** ▲ Blue triangle - current code revision has resulted in a substantially altered procedure descriptor ● Red circle - new procedure