

**October 2020 Compared to Final 2021 Rates
Medicare Hospital Outpatient Prospective Payment System HOPPS (APC) Medicine Procedures, Radiopharmaceuticals, and Drugs**

[October 2020 Rates](#) [CY 2021 Final Rule](#)

Updated December 13, 2020

Status Indicator	Item/Code/Service	OPPS Payment Status							
A	Services furnished to a hospital outpatient that are paid under a fee schedule or payment system other than OPSS,* for example:	Not paid under OPSS. Paid by MACs under a fee schedule or payment system other than OPSS.							
	<ul style="list-style-type: none"> Separately Payable Clinical Diagnostic Laboratory Services (Not subject to deductible or coinsurance.) 	Services are subject to deductible or coinsurance unless indicated otherwise.							
D	Discontinued Codes	Not paid under OPSS or any other Medicare payment system.							
E1	Items and Services:	Not paid by Medicare when submitted on outpatient claims (any outpatient bill type).							
	<ul style="list-style-type: none"> Not covered by any Medicare outpatient benefit category Statutorily excluded by Medicare Not reasonable and necessary 								
E2	Items and Services:	Not paid by Medicare when submitted on outpatient claims (any outpatient bill type).							
	<ul style="list-style-type: none"> for which pricing information and claims data are not available 								
G	Pass-Through Drug/ Biologicals	Paid under OPSS; separate APC payment							
K	NonPass-Through Drugs and nonimplantable Biologicals, including Therapeutic Radiopharmaceuticals	Paid under OPSS; separate APC payment							
N	Items and Services packaged into APC rate	Paid under OPSS; payment is packaged into payment for other services. Therefore, there is no separate APC payment.							
Q1	STV-Packaged Codes	Paid under OPSS; 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 OPSS 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.							
S	Procedure or Service, Not Discounted When Multiple	Paid under OPSS; separate APC payment							
T	Significant Procedure, Multiple Procedure Reduction Applies	Paid under OPSS; separate APC payment							
U	Brachytherapy Sources	Paid under OPSS; separate APC payment							
CPT/	Trade	Oct 2020	FR 2021	Oct 2020	FR 2021	Oct 2020	FR CY 2021		
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	\$368.13	\$377.12	2.4%	
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	Packaged into APC rate	Packaged into APC rate	Providers should code and bill so costs are realized for future rates	
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	Providers should code and bill so costs are realized for future rates	
51701	Insertion of non-indwelling bladder catheter (eg, straight catheterization for residual urine)	5734	5734	Q1	Q1	\$109.03	\$111.95	2.6%	
51702	Insertion of temporary indwelling bladder catheter; simple (eg, Foley)	5734	5734	Q1	Q1	\$109.03	\$111.95	2.6%	
51703	Insertion of temporary indwelling bladder catheter; complicated (eg, altered anatomy, fractured catheter/balloon)	5721	5721	S	S	\$138.35	\$139.55	0.9%	
77080	Dual-energy X-ray absorptiometry, bone density study, 1 or more sites; axial skeleton (eg, hips, pelvis, spine)	5522	5522	S	S	\$112.08	\$108.97	-2.9%	
77081	Dxa bone density (peripheral) (eg, radius, wrist, heel)	5521	5521	S	S	\$79.81	\$80.90	1.3%	
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	5522	Q1	Q1	\$112.08	\$108.97	-2.9%	
77086	Vertebral fractureassessment via dual-energy X-rayabsorptiometry (DXA)	5521	5521	Q1	Q1	\$79.81	\$80.90	1.3%	

CPT/		Trade	Oct 2020	FR 2021	Oct 2020	FR 2021	Oct 2020	FR CY 2021	%
HCPCS	Description	Name	APC	APC	SI	SI	Payment Rate	Payment Rate	Change
77370	Special medical radiation physics consultation		5611	5611	S	S	\$126.59	\$126.87	0.2%
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 radiopharmaceuticals and drugs, use the appropriate supply code(s), in addition to the procedure code.									
78012	Thyroid uptake, single or multiple quantitative measurement(s) (including stimulation, suppression, or discharge, when performed)		5591	5591	S	S	\$368.13	\$377.12	2.4%
78013	Thyroid imaging (including vascular flow, when performed)		5591	5591	S	S	\$368.13	\$377.12	2.4%
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	\$368.13	\$377.12	2.4%
78015	Thyroid carcinoma metastases imaging; limited are (eg, neck and chest only)		5591	5591	S	S	\$368.13	\$377.12	2.4%
78016	Thyroid carcinoma metastases imaging; with additional studies (eg, urinary recovery)		5591	5591	S	S	\$368.13	\$377.12	2.4%
78018	Thyroid carcinoma metastases imaging; whole body		5592	5592	S	S	\$471.98	\$489.40	3.6%
78020 + add on	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	Providers should code and bill so costs are realized for future rates
78070	Parathyroid planar imaging (including subtraction, when performed)		5591	5591	S	S	\$368.13	\$377.12	2.4%
78071	Parathyroid planar imaging (including subtraction, when performed); with tomographic (SPECT)		5591	5591	S	S	\$368.13	\$377.12	2.4%
78072	Parathyroid planar imaging (including subtraction, when performed); with tomographic (SPECT), and concurrently acquired computed tomography (CT) for anatomical localization		5592	5592	S	S	\$471.98	\$489.40	3.6%
78075	Adrenal imaging, cortex and/or medulla		5593	5593	S	S	\$1,272.19	\$1,305.94	2.6%
78099	Unlisted endocrine procedure, diagnostic nuclear medicine		5591	5591	S	S	\$368.13	\$377.12	2.4%
78102	Bone marrow imaging; limited area		5591	5591	S	S	\$368.13	\$377.12	2.4%
78103	Bone marrow imaging; multiple areas		5591	5591	S	S	\$368.13	\$377.12	2.4%
78104	Bone marrow imaging; whole body		5591	5591	S	S	\$368.13	\$377.12	2.4%
78110	Plasma volume, radiopharmaceutical volume-dilution technique (separate procedure); single sampling		5593	5593	S	S	\$1,272.19	\$1,305.94	2.6%
78111	Plasma volume, radiopharmaceutical volume-dilution technique (separate procedure); multiple sampling		5593	5593	S	S	\$1,272.19	\$1,305.94	2.6%
78120	Red cell volume determination (separate procedure); single sampling		5591	5591	S	S	\$368.13	\$377.12	2.4%
78121	Red cell volume determination (separate procedure); multiple sampling		5592	5592	S	S	\$471.98	\$489.40	3.6%
78122	Whole blood volume determination, including separate measurement of plasma volume and red cell volume (radiopharmaceutical volume-dilution technique)		5592	5592	S	S	\$471.98	\$489.40	3.6%
78130	Red cell survival study;		5591	5591	S	S	\$368.13	\$377.12	2.4%
78135	Red cell survival study; differential organ/tissue kinetics (eg, splenic and/or hepatic sequestration)		5591	Deleted in 2021	S	D	\$368.13	Deleted in 2021	NA
78140	Labeled red cell sequestration, differential organ/tissue, (eg, splenic and/or hepatic)		5591	5591	S	S	\$368.13	\$377.12	2.4%
78185	Spleen imaging only, with or without vascular flow (If combined with liver study, use procedures 78215 and 78216)		5591	5591	S	S	\$368.13	\$377.12	2.4%
78191	Platelet survival study		5591	5591	S	S	\$368.13	\$377.12	2.4%
78195	Lymphatics and lymph nodes imaging (For sentinel node identification without scintigraphy imaging, use 38792)		5592	5592	S	S	\$471.98	\$489.40	3.6%
78199	Unlisted hematopoietic, Reticuloendothelial and lymphatic procedure, diagnostic nuclear medicine		5591	5591	S	S	\$368.13	\$377.12	2.4%
78201	Liver imaging; static only		5593	5592	S	S	\$1,272.19	\$489.40	-159.9%
78202	Liver imaging; with vascular flow		5593	5592	S	S	\$1,272.19	\$489.40	-159.9%
78205 Deleted in 2020	Liver imaging (SPECT);		Deleted in 2020	Deleted in 2020	D	D	Deleted in 2020	See 78803 or 78830	NA
78206 Deleted in 2020	Liver image (SPECT); with vascular flow		Deleted in 2020	Deleted in 2020	D	D	Deleted in 2021	See 78803 or 78830	N/A
78215	Liver and spleen imaging; static only		5591	5591	S	S	\$368.13	\$377.12	2.4%
78216	Liver and spleen imaging; with vascular flow		5591	5591	S	S	\$368.13	\$377.12	2.4%
78226	Hepatobiliary system imaging, including gallbladder when present		5591	5591	S	S	\$368.13	\$377.12	2.4%

CPT/		Trade	Oct 2020	FR 2021	Oct 2020	FR 2021	Oct 2020	FR CY 2021	%
HCPSCS	Description	Name	APC	APC	SI	SI	Payment Rate	Payment Rate	Change
78227	Hepatobiliary system imaging, including gallbladder when present; with pharmacologic intervention, including quantitative measurement(s) when performed		5592	5592	S	S	\$471.98	\$489.40	3.6%
78230	Salivary gland imaging;		5591	5591	S	S	\$368.13	\$377.12	2.4%
78231	Salivary gland imaging; with serial images		5591	5591	S	S	\$368.13	\$377.12	2.4%
78232	Salivary gland function study		5591	5591	S	S	\$368.13	\$377.12	2.4%
78258	Esophageal motility		5591	5591	S	S	\$368.13	\$377.12	2.4%
78261	Gastric mucosa imaging		5591	5591	S	S	\$368.13	\$377.12	2.4%
78262	Gastroesophageal reflux study		5591	5591	S	S	\$368.13	\$377.12	2.4%
78264	Gastric Emptying Imaging Study (eg, solid, liquid or both)		5591	5591	S	S	\$368.13	\$377.12	2.4%
78265	Gastric Emptying Imaging Study (eg, solid, liquid or both); with small bowel transit		5591	5591	S	S	\$368.13	\$377.12	2.4%
78266	Gastric Emptying Imaging Study (eg, solid, liquid or both); with small bowel and colon transit, multiple days		5592	5592	S	S	\$471.98	\$489.40	3.6%
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
78278	Acute gastrointestinal blood loss imaging		5591	5591	S	S	\$368.13	\$377.12	2.4%
78282	Gastrointestinal protein loss		5591	5591	S	S	\$368.13	\$377.12	2.4%
78290	Intestine imaging (eg, ectopic gastric mucosa, Meckel's localization, volvulus)		5591	5591	S	S	\$368.13	\$377.12	2.4%
78291	Peritoneal-venous shunt patency test (eg, for LeVeen, Denver shunt)		5591	5591	S	S	\$368.13	\$377.12	2.4%
78299	Unlisted gastrointestinal procedure, diagnostic nuclear medicine		5591	5591	S	S	\$368.13	\$377.12	2.4%
78300	Bone and/or joint imaging; limited area		5591	5591	S	S	\$368.13	\$377.12	2.4%
78305	Bone and/or joint imaging; multiple areas		5591	5591	S	S	\$368.13	\$377.12	2.4%
78306	Bone and/or joint imaging; whole body		5591	5591	S	S	\$368.13	\$377.12	2.4%
78315	Bone and/or joint imaging; 3 three phase study		5591	5591	S	S	\$368.13	\$377.12	2.4%
78320 Deleted in 2020	Bone and/or joint imaging; tomographic (SPECT)		Deleted in 2020	Deleted in 2020	D	D	Deleted in 2020	See 788XX series later in this chart	Deleted in 2020
78350	Bone density (bone mineral content) study , 1 or more sites; single photon absorptiometry		N/A	N/A	E1	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	E1	E1	N/A	N/A	N/A
78399	Unlisted musculoskeletal procedure, diagnostic nuclear medicine		5591	5591	S	S	\$368.13	\$377.12	2.4%
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	\$471.98	\$489.40	3.6%
78428	Cardiac shunt detection		5591	5591	S	S	\$368.13	\$377.12	2.4%
●78429	Myocrd img pet 1 std w/ct NEW FOR 2020 Myocardial imaging, positron emission tomography (PET), metabolic evaluation study (including ventricular wall motion(s), and/or ejection fraction(s), when performed) single study; with concurrently acquired computed tomography transmission scan		5594	5594	S	S	\$1,443.09	\$1,480.34	2.5%
●78430	NEW FOR 2020 Myocardial imaging, positron emission tomography, perfusion study (including ventricular wall motion(s), and/or ejection fractions(s), when performed); single study, at rest or stress (exercise or pharmacologic), with concurrently acquired computed tomography transmission scan		5594	5594	S	S	\$1,443.09	\$1,480.34	2.5%
●78431	NEW FOR 2020 Myocardial imaging, positron emission tomography, perfusion study (including ventricular wall motion(s), and/or ejection fractions(s), when performed); multiple studies at rest and stress (exercise or pharmacologic), with concurrently acquired computed tomography transmission scan		1522	1522	S	S	\$2,250.50	\$2,250.50	0.0%
●78432	Myocrd img pet 2rtracer NEW FOR 2020 Myocardial imaging, positron emission tomography, combined perfusion with metabolic evaluation study (including ventricular wall motion(s), and/or ejection fraction(s), when performed), dual radiotracer (eg, myocardial viability)		1523	1523	S	S	\$2,750.50	\$2,750.50	0.0%
●78433	Myocrd img pet 2rtracer ct NEW FOR 2020 Myocardial imaging, positron emission tomography, combined perfusion with metabolic evaluation study (including ventricular wall motion(s), and/or ejection fraction(s), when performed), dual radiotracer (eg, myocardial viability); with concurrently acquired computed tomography transmission scan		1523	1523	S	S	\$2,750.50	\$2,750.50	0.0%

CPT/		Trade	Oct 2020	FR 2021	Oct 2020	FR 2021	Oct 2020	FR CY 2021	%
HCPSCS	Description	Name	APC	APC	SI	SI	Payment Rate	Payment Rate	Change
●78434 + add on	NEW FOR 2020 Absolute quantitation of myocardial blood flow (AQMBF), positron emission tomography (PET), rest and pharmacologic stress (List separately in addition to code for primary procedure) (Use 78434 in conjunction with 78431, 78492) (for CT coronary calcium scoring, use 75571)		N/A	N/A	N	N	Packaged into APC rate is part of new technology payment	Packaged into APC rate is part of new technology payment	Providers should code and bill so costs are realized for future rates
78445	Non-cardiac vascular flow imaging (ie, angiography, venography)		5591	5591	S	S	\$368.13	\$377.12	2.4%
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	\$1,272.19	\$1,305.94	2.6%
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	\$1,272.19	\$1,305.94	2.6%
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)		5593	5593	S	S	\$1,272.19	\$1,305.94	2.6%
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	\$1,272.19	\$1,305.94	2.6%
78456	Acute venous thrombus imaging, peptide		5593	5593	S	S	\$1,272.19	\$1,305.94	2.6%
78457	Venous thrombosis imaging, venogram; unilateral		5593	5592	S	S	\$1,272.19	\$489.40	-159.9%
78458	Venous thrombosis imaging, venogram; bilateral		5591	5591	S	S	\$368.13	\$377.12	2.4%
▲78459	Myocardial imaging, positron emission tomography (PET), metabolic evaluation REVISED FOR 2020 Myocardial imaging, positron emission tomography (PET), metabolic evaluation study (including ventricular wall motion(s), and/or ejection fraction(s), when performed) single study		5593	5593	S	S	\$1,272.19	\$1,305.94	2.6%
78466	Myocardial imaging, infarct avid, planar; qualitative or quantitative		5591	5591	S	S	\$368.13	\$377.12	2.4%
78468	Myocardial imaging, infarct avid, planar; with ejection fraction by first pass technique		5592	5592	S	S	\$471.98	\$489.40	3.6%
78469	Myocardial imaging, infarct avid, planar; tomographic SPECT with or without quantification		5593	5592	S	S	\$1,272.19	\$489.40	-159.9%
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	\$368.13	\$377.12	2.4%
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	\$368.13	\$377.12	2.4%
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	\$471.98	\$489.40	3.6%
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	\$471.98	\$489.40	3.6%
▲78491	Myocardial imaging, positron emission tomography (PET), perfusion; single study at rest or stress REVISED FOR 2020 Myocardial imaging, positron emission tomography, perfusion study (including ventricular wall motion(s), and/or ejection fractions(s), when performed); single study, at rest or stress (exercise or pharmacologic)		5594	5594	S	S	\$1,443.09	\$1,480.34	2.5%
▲78492	Myocardial imaging, positron emission tomography (PET), perfusion; multiple studies at rest and/or stress REVISED FOR 2020 Myocardial imaging, positron emission tomography, perfusion study (including ventricular wall motion(s), and/or ejection fractions(s), when performed); multiple studies at rest and stress (exercise or pharmacologic)		5594	5594	S	S	\$1,443.09	\$1,480.34	2.5%
0482T Deleted in 2020	Absolute quantitation of myocardial blood flow, positron emission tomography (PET), rest and stress		N/A	N/A	N	D	Packaged into APC rate	Deleted 2020 see 78434	Deleted in 2020
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	\$368.13	\$377.12	2.4%

CPT/		Trade	Oct 2020	FR 2021	Oct 2020	FR 2021	Oct 2020	FR CY 2021	%
HCPCS	Description	Name	APC	APC	SI	SI	Payment Rate	Payment Rate	Change
78496 + add on	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	Providers should code and bill so costs are realized for future rates
78499	Unlisted cardiovascular procedure, diagnostic nuclear medicine		5591	5591	S	S	\$368.13	\$377.34	2.4%
0331T	Myocardial sympathetic innervation, imaging, planar qualitative assessment		5593	5593	S	S	\$1,272.19	\$1,305.94	2.6%
0332T	Myocardial sympathetic innervation, imaging, planar qualitative and quantitative assessment; with tomographic SPECT		5593	5593	S	S	\$1,272.19	\$1,305.94	2.6%
78579	Pulmonary ventilation imaging (eg, aerosol or gas)		5591	5591	S	S	\$368.13	\$377.12	2.4%
78580	Pulmonary perfusion imaging (eg, particulate)		5591	5591	S	S	\$368.13	\$377.12	2.4%
78582	Pulmonary ventilation imaging (eg, aerosol or gas) and perfusion imaging		5592	5592	S	S	\$471.98	\$489.40	3.6%
78597	Quantitative differential pulmonary perfusion, including imaging when performed		5591	5591	S	S	\$368.13	\$377.12	2.4%
78598	Quantitative differential pulmonary perfusion and ventilation (eg aerosol or gas), including imaging when performed		5592	5592	S	S	\$471.98	\$489.40	3.6%
78599	Unlisted respiratory procedure, diagnostic nuclear medicine		5591	5591	S	S	\$368.13	\$377.12	2.4%
78600	Brain imaging, less than 4 static views;		5591	5591	S	S	\$368.13	\$377.12	2.4%
78601	Brain imaging, less than 4 static views; with vascular flow		5591	5591	S	S	\$368.13	\$377.12	2.4%
78605	Brain imaging, minimum 4 static views;		5592	5592	S	S	\$471.98	\$489.40	3.6%
78606	Brain imaging, minimum 4 static views; with vascular flow		5592	5592	S	S	\$471.98	\$489.40	3.6%
78607 Deleted in 2020	Brain imaging, tomographic (SPECT)		Deleted in 2020	Deleted in 2020	D	D	Deleted in 2020	See 78803 or 78830	Deleted in 2020
78608	Brain imaging, positron emission tomography (PET); metabolic evaluation		5594	5594	S	S	\$1,443.09	\$1,480.34	2.5%
78609	Brain imaging, positron emission tomography (PET); perfusion evaluation		N/A	N/A	E1	E1	N/A	N/A	N/A
78610	Brain imaging, vascular flow only		5592	5592	S	S	\$471.98	\$489.40	3.6%
78630	Cerebrospinal fluid flow, imaging (not including introduction of material); cisternography (For injection procedure, see 61000-61070, 62270-62319)		5592	5592	S	S	\$471.98	\$489.40	3.6%
78635	Cerebrospinal fluid flow, imaging (not including introduction of material); ventriculography (For injection procedure, see 61000-61070, 62270-62294)		5592	5592	S	S	\$471.98	\$489.40	3.6%
78645	Cerebrospinal fluid flow, imaging (not including introduction of material); shunt evaluation (For injection procedure, see 61000-61070, 62270-62294)		5592	5592	S	S	\$471.98	\$489.40	3.6%
78647 Deleted in 2020	Cerebrospinal fluid flow, imaging (not including introduction of material); tomographic (SPECT)		Deleted in 2020	Deleted in 2020	D	D	Deleted in 2020	See 78803 or 78830	Deleted in 2020
78650	Cerebrospinal fluid leakage detection and localization		5593	5593	S	S	\$1,272.19	\$1,305.94	2.6%
78660	Radiopharmaceutical dacryocystography		5591	5591	S	S	\$368.13	\$377.12	2.4%
78699	Unlisted nervous system procedure, diagnostic nuclear medicine		5591	5591	S	S	\$368.13	\$377.12	2.4%
78700	Kidney imaging morphology		5591	5591	S	S	\$368.13	\$377.12	2.4%
78701	Kidney imaging morphology with vascular flow		5591	5591	S	S	\$368.13	\$377.12	2.4%
78707	Kidney imaging morphology with vascular flow and function, single study without pharmacological intervention		5592	5592	S	S	\$471.98	\$489.40	3.6%
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	\$471.98	\$489.40	3.6%
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	\$471.98	\$489.40	3.6%
78710 Deleted in 2020	Kidney imaging morphology tomographic (SPECT)		Deleted in 2020	Deleted in 2020	D	D	Deleted in 2020	See 78803 or 78830	Deleted in 2020
78725	Kidney function study, non-imaging radioisotopic study		5591	5591	S	S	\$368.13	\$377.12	2.4%

CPT/		Trade	Oct 2020	FR 2021	Oct 2020	FR 2021	Oct 2020	FR CY 2021	%
HCPCS	Description	Name	APC	APC	SI	SI	Payment Rate	Payment Rate	Change
78730 + add on	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	Providers should code and bill so costs are realized for future rates
78740	Ureteral reflux study (radiopharmaceutical voiding cystogram) For catheterization see 51701, 51702, 51703		5591	5591	S	S	\$368.13	\$377.12	2.4%
78761	Testicular imaging with vascular flow		5591	5591	S	S	\$368.13	\$377.12	2.4%
78799	Unlisted genitourinary procedure; diagnostic nuclear medicine		5591	5591	S	S	\$368.13	\$377.12	2.4%
▲78800	Radiopharmaceutical localization of tumor, inflammatory process or distribution of radiopharmaceutical agent(s), (includes vascular flow and blood pool imaging when performed); planar, single area, (eg. head, neck, chest, pelvis) single day of imaging		5591	5591	S	S	\$368.13	\$377.12	2.4%
▲78801	Radiopharmaceutical localization of tumor, inflammatory process or distribution of radiopharmaceutical agent(s), (includes vascular flow and blood pool imaging when performed); planar, 2 or more areas, (eg. Abdomen and pelvis, head and chest), 1 or more days of imaging or single area imaging over 2 or more days		5591	5591	S	S	\$368.13	\$377.12	2.4%
▲78802	Radiopharmaceutical localization of tumor, inflammatory process or distribution of radiopharmaceutical agent(s), (includes vascular flow and blood pool imaging when performed); planar, whole body, single day of imaging		5593	5593	S	S	\$1,272.19	\$1,305.94	2.6%
▲78803	Radiopharmaceutical localization of tumor, inflammatory process or distribution of radiopharmaceutical agent(s), (includes vascular flow and blood pool imaging when performed); tomographic (SPECT) single area (eg. Head, neck, chest, pelvis) single day of imaging		5593	5593	S	S	\$1,272.19	\$1,305.94	2.6%
▲78804	Radiopharmaceutical localization of tumor, inflammatory process or distribution of radiopharmaceutical agent(s), (includes vascular flow and blood pool imaging when performed); Planar, whole body, 2 or more days imaging		5593	5593	S	S	\$1,272.19	\$1,305.94	2.6%
78805 Deleted in 2020	Radiopharmaceutical localization of inflammatory process; limited area		5593	Deleted in 2020	S	D	\$1,229.38	See 78800 or 78801	Deleted in 2020
78806 Deleted in 2020	Radiopharmaceutical localization of inflammatory process; whole body		5593	Deleted in 2020	S	D	\$1,229.38	See 78802 or 78804	Deleted in 2020
78807 Deleted in 2020	Radiopharmaceutical localization of inflammatory process; tomographic (SPECT) (For imaging bone infectious or inflammatory disease with a bone imaging radiopharmaceutical, see 78300, 78305, 78306)		5592	Deleted in 2020	S	D	\$455.52	See 78803 or 78830	Deleted in 2020
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	\$368.13	\$377.12	2.4%
78811	Positron emission tomography (PET) imaging; limited area (eg. chest, head/neck)		5593	5593	S	S	\$1,272.19	\$1,305.94	2.6%
78812	Positron emission tomography (PET) imaging; skull base to mid-thigh		5594	5594	S	S	\$1,443.09	\$1,480.34	2.5%
78813	Positron emission tomography (PET) imaging; whole body		5594	5594	S	S	\$1,443.09	\$1,480.34	2.5%
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	\$1,443.09	\$1,480.34	2.5%
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	\$1,443.09	\$1,480.34	2.5%
78816	Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body		5594	5594	S	S	\$1,443.09	\$1,480.34	2.5%
●78830	Rp locdzj tum spect w/ct 1 NEW FOR 2020 Radiopharmaceutical localization of tumor, inflammatory process or distribution of radiopharmaceutical agent(s), (includes vascular flow and blood pool imaging when performed); tomographic (SPECT) with concurrently acquired computed tomography (CT) transmission scan for anatomical review, localization and determination/detection of pathology, single area (eg, head, neck, chest, pelvis), single day of imaging		5593	5593	S	S	\$1,272.19	\$1,305.94	New 2020

CPT/		Trade	Oct 2020	FR 2021	Oct 2020	FR 2021	Oct 2020	FR CY 2021	%
HCPCS	Description	Name	APC	APC	SI	SI	Payment Rate	Payment Rate	Change
●78831	Rp loclczj tum spect 2 areas REVISED FOR 2020 Radiopharmaceutical localization of tumor, inflammatory process or distribution of radiopharmaceutical agent(s), (includes vascular flow and blood pool imaging when performed); tomographic (SPECT), minimum 2 areas (eg, pelvis and knees, abdomen and pelvis), single day of imaging, or single area of imaging over 2 or more days (eg, head, neck, chest, pelvis), single day of imaging		5593	5593	S	S	\$1,272.19	\$1,305.94	New 2020
●78832	Rp loclczj tum spect w/ct 2 NEW FOR 2020 Radiopharmaceutical localization of tumor, inflammatory process or distribution of radiopharmaceutical agent(s), (includes vascular flow and blood pool imaging when performed); tomographic (SPECT) with concurrently acquired computed tomography (CT) transmission scan for anatomical review, localization and determination/detection of pathology, minimum 2 areas (eg, pelvis and knees, abdomen and pelvis), single day of imaging, or single area of imaging over 2 or more days imaging		5594	5594	S	S	\$1,443.09	\$1,480.34	New 2020
●78835 + add on	Rp quan meas single area NEW FOR 2020 Radiopharmaceutical quantification measurement(s) single area (Use 78835 in conjunction with 78830, 78832) (Report multiple units of 78835 if quantitation is more than 1 day or more than 1 area)		N/A	N/A	N	N	Packaged into APC rate	Packaged into APC rate	Providers should code and bill so costs are realized for future rates
78999	Unlisted miscellaneous procedure, diagnostic nuclear medicine		5591	5591	S	S	\$368.13	\$377.12	2.4%
C9898	Radiolabeled product provided during a hospital inpatient stay		N/A	N/A	N	N	Packaged into APC rate	Packaged into APC rate	Providers should code and bill so costs are realized for future rates
79005	Radiopharmaceutical therapy, by oral administration (For monoclonal antibody by intravenous infusion, use 79403)		5661	5661	S	S	\$237.40	\$249.62	4.9%
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)		5661	5661	S	S	\$237.40	\$249.62	4.9%
79200	Radiopharmaceutical therapy, by intracavitary administration		5661	5661	S	S	\$237.40	\$249.62	4.9%
79300	Radiopharmaceutical therapy, by interstitial radioactive colloid administration		5661	5661	S	S	\$237.40	\$249.62	4.9%
79403	Radiopharmaceutical therapy, radiolabeled monoclonal antibody by intravenous infusion (For pre-treatment imaging, see 78802, 78804) (Do not use in conjunction with 79101)		5661	5661	S	S	\$237.40	\$249.62	4.9%
79440	Radiopharmaceutical therapy, by intra-articular administration		5661	5661	S	S	\$237.40	\$249.62	4.9%
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)		5661	5661	S	S	\$237.40	\$249.62	4.9%
79999	Radiopharmaceutical therapy, unlisted procedure		5661	5661	S	S	\$237.40	\$249.62	4.9%
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	\$253.10	\$264.45	4.3%
96413	Chemotherapy administration, intravenous infusion technique; up to one hour, single or initial substance/drug		5694	5694	S	S	\$309.60	\$310.75	0.4%
G0219	PET imaging whole body; melanoma for non-covered indications		N/A	N/A	E1	E1	N/A	N/A	N/A
G0235	PET IMAGING, ANY SITE, NOT OTHERWISE SPECIFIED		N/A	5591	E1	S	N/A	\$377.12	N/A
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	E1	E1	N/A	N/A	N/A
RADIOPHARMACEUTICALS & NUCLEAR MEDICINE RELATED DRUGS			APC 20	APC 21	SI 20	SI 21	Rule CY Oct 2020	Final 2021	% Change
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	0.0%

CPT/		Trade	Oct 2020	FR 2021	Oct 2020	FR 2021	Oct 2020	FR CY 2021	%
HCPCS	Description	Name	APC	APC	SI	SI	Payment Rate	Payment Rate	Change
Q9982	Flutemetamol F-18, diagnostic, per study dose, up to 5 millicuries	Vizamyli™ G.E. NDC # 17156-067-01	9459	N	G	N	3498	Packaged into APC rate	Providers should code and bill so costs are realized for future rates
Q9983	Florbetaben F-18, diagnostic, per study dose, up to 8.1 millicuries	Neuracec™ Piramal NDC # 54828-001-30	9458	N	G	N	2968	Packaged into APC rate	Providers should code and bill so costs are realized for future rates
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	Providers should code and bill so costs are realized for future rates
A4642	In111 satumomab 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	Providers should code and bill so costs are realized for future rates
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	Providers should code and bill so costs are realized for future rates
A9501	Tchnetium 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	Providers should code and bill so costs are realized for future rates
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	Providers should code and bill so costs are realized for future rates
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	Providers should code and bill so costs are realized for future rates
A9504	Tc99m apcitude 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	Providers should code and bill so costs are realized for future rates
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	Providers should code and bill so costs are realized for future rates
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	Providers should code and bill so costs are realized for future rates
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	Providers should code and bill so costs are realized for future rates
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	Providers should code and bill so costs are realized for future rates
A9510	Tc99m disofenin 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	Providers should code and bill so costs are realized for future rates
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	Providers should code and bill so costs are realized for future rates

CPT/		Trade	Oct 2020	FR 2021	Oct 2020	FR 2021	Oct 2020	FR CY 2021	%
HCP	Description	Name	APC	APC	SI	SI	Payment Rate	Payment Rate	Change
A9513	Lutetium Lu 177, dotatate, therapeutic, 1 mCi Lutetium Lu 177 dotatate,tx	LUTATHERA®	9067	9067	G	G	\$266.59	\$266.59	0.0%
A9515	Choline C-11, diagnostic, per study dose, up to 20 millicuries	C-11 Choline Zevacor or In-facility production	N/A	N/A	N	N	Packaged into APC rate	Packaged into APC rate	Providers should code and bill so costs are realized for future rates
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	Providers should code and bill so costs are realized for future rates
A9517	I131 iodide cap, rx IODINE I-131 SODIUM IODIDE CAPSULE(S), THERAPEUTIC, PER MILLICURIE	Rx I-131 Capsules	1064	1064	K	K	\$20.76	\$20.69	-0.3%
A9520	Tc99m 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	Providers should code and bill so costs are realized for future rates
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	Providers should code and bill so costs are realized for future rates
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	Providers should code and bill so costs are realized for future rates
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	Providers should code and bill so costs are realized for future rates
A9527	Iodine I-125 sodium iodide IODINE I-125, SODIUM IODIDE SOLUTION, THERAPEUTIC, PER MILLICURIE		2632	2632	U	U	\$31.27	\$26.73	-17.0%
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	Providers should code and bill so costs are realized for future rates
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	Providers should code and bill so costs are realized for future rates
A9530	I131 iodide sol, rx IODINE I-131 SODIUM IODIDE SOLUTION, THERAPEUTIC, PER MILLICURIE	Rx I-131 sol per mCi	1150	1150	K	K	\$13.36	\$13.36	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	Providers should code and bill so costs are realized for future rates
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	Providers should code and bill so costs are realized for future rates
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	Providers should code and bill so costs are realized for future rates
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	Providers should code and bill so costs are realized for future rates

CPT/		Trade	Oct 2020	FR 2021	Oct 2020	FR 2021	Oct 2020	FR CY 2021	%
HCPCS	Description	Name	APC	APC	SI	SI	Payment Rate	Payment Rate	Change
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	Providers should code and bill so costs are realized for future rates
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	Providers should code and bill so costs are realized for future rates
A9540	Tc99m MAA TECHNETIUM TC-99M MACROAGGREGATED ALBUMIN, DIAGNOSTIC, PER STUDY DOSE, UP TO 10 MILLICURIES	MAA or new in 2020 see below Trade name: Pulmotech™ 5 vial carton NDC (69945-139-20) or 30 vial carton: NDC (69945-139-40)	N/A	N/A	N	N	Packaged into APC rate	Packaged into APC rate	Providers should code and bill so costs are realized for future rates
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	Providers should code and bill so costs are realized for future rates
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	Providers should code and bill so costs are realized for future rates
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	\$56,746.934	\$56,746.934	0.0%
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	Providers should code and bill so costs are realized for future rates
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	Providers should code and bill so costs are realized for future rates
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	Providers should code and bill so costs are realized for future rates
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	Providers should code and bill so costs are realized for future rates
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	Providers should code and bill so costs are realized for future rates
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	Providers should code and bill so costs are realized for future rates
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	Providers should code and bill so costs are realized for future rates
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	Providers should code and bill so costs are realized for future rates

CPT/		Trade	Oct 2020	FR 2021	Oct 2020	FR 2021	Oct 2020	FR CY 2021	%
HCP	Description	Name	APC	APC	SI	SI	Payment Rate	Payment Rate	Change
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	Providers should code and bill so costs are realized for future rates
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	Providers should code and bill so costs are realized for future rates
A9557	Tc99m bicisate 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	Providers should code and bill so costs are realized for future rates
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	Providers should code and bill so costs are realized for future rates
A9559	Co57 cyano 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	Providers should code and bill so costs are realized for future rates
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	Providers should code and bill so costs are realized for future rates
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	Providers should code and bill so costs are realized for future rates
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	Providers should code and bill so costs are realized for future rates
A9563	P32 Na phosphate SODIUM PHOSPHATE P-32, THERAPEUTIC, PER MILLICURIE		1675	1675	K	K	\$449.31	\$449.31	0.0%
A9564	P32 chromic phosphate CHROMIC PHOSPHATE P-32 SUSPENSION, THERAPEUTIC, PER MILLICURIE	Phosphocol P-32	N/A	N/A	E1	E1	N/A	N/A	N/A
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	Providers should code and bill so costs are realized for future rates
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	Providers should code and bill so costs are realized for future rates
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	Providers should code and bill so costs are realized for future rates
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	Providers should code and bill so costs are realized for future rates
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	Providers should code and bill so costs are realized for future rates

CPT/		Trade	Oct 2020	FR 2021	Oct 2020	FR 2021	Oct 2020	FR CY 2021	%
HCPCS	Description	Name	APC	APC	SI	SI	Payment Rate	Payment Rate	Change
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	Providers should code and bill so costs are realized for future rates
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	Providers should code and bill so costs are realized for future rates
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	Providers should code and bill so costs are realized for future rates
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	Providers should code and bill so costs are realized for future rates
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	Providers should code and bill so costs are realized for future rates
A9586	Florbetapir F18 FLORBETAPIR F18, DIAGNOSTIC, PER STUDY DOSE, UP TO 10 MILLICURIES	Amyvid™ NDC #0002-1200-01	N/A	N/A	N	N	Packaged into APC rate	Packaged into APC rate	Providers should code and bill so costs are realized for future rates
A9587	Gallium ga-68, dotatate, diagnostic, 0.1 millicurie	(NETSPOT™), NDC (69488-001-40) AAA) FDA-approved (6/2/16) PET imaging agent for the localization of somatostatin receptor-positive neuroendocrine tumors	N/A	N/A	N	N	Packaged into APC rate	Packaged into APC rate	Providers should code and bill so costs are realized for future rates
A9588	Fluciclovine f-18, diagnostic, 1 millicurie	(Axumin™), Blue Earth Diagnostic (BED) FDA- approved (5/31/16), a PET imaging agent for detecting biochemical recurrence of prostate cancer	N/A	N/A	N	N	Packaged into APC rate	Packaged into APC rate	Providers should code and bill so costs are realized for future rates
A9597	Positron emission tomography radiopharmaceutical, diagnostic, for tumor identification, not otherwise classified	Generic code, use for newly FDA approved PET diagnostic radiopharmaceutica ls	N/A	N/A	N	N	Packaged into APC rate	Packaged into APC rate	Providers should code and bill so costs are realized for future rates
A9598	Positron emission tomography radiopharmaceutical, diagnostic, for non-tumor identification, not otherwise classified	Generic code, use for newly FDA approved PET diagnostic radiopharmaceutica ls	N/A	N/A	N	N	Packaged into APC rate	Packaged into APC rate	Providers should code and bill so costs are realized for future rates
A9600	Strontium sr-89 chloride, therapeutic, per millicurie	Rx Metastron, Strontium, Strontium labeled metastron	0701	0701	K	K	\$2,045.702	\$2,045.70	0.0%
A9604	Samarium sm-153 lexidronam, therapeutic, per treatment dose, up to 150 millicuries	Rx Quadramet Samarium, Lexidronamm, 153Sm- EDTMP	1295	1295	K	K	\$17,259.853	\$17,259.85	0.0%
A9606	Radium Ra-223 dichloride, therapeutic, per microcurie	Xofigo™ NDC #50419-0208-01	1745	1745	K	K	\$140.961	\$141.58	0.4%
A9699	Radiopharm rx agent noc RADIOPHARMACEUTICAL, THERAPEUTIC, NOT OTHERWISE CLASSIFIED	RX NOC	N/A	N/A	N	N	Packaged into APC rate	Packaged into APC rate	Providers should code and bill so costs are realized for future rates

CPT/		Trade	Oct 2020	FR 2021	Oct 2020	FR 2021	Oct 2020	FR CY 2021	%
HCPCS	Description	Name	APC	APC	SI	SI	Payment Rate	Payment Rate	Change
● A9590 NEW January 1 2020	Iodine 131 iobenguane, 1 millicurie	AZEDRA NDC# 71258-0015-02: Single-dose 30 mL vial of AZEDRA containing a total volume of 22.5 (±2.5) mL of solution with a total radioactivity of 240–413 mCi/vial (8,880–15,281 MBq/vial) at calibration time1	9339	9339	G	G	\$320.12	\$320.12	0.0%
● C9407 NEW January 1 2019	Iodine i-131 iobenguane, dx Iodine 131 iobenguane, diagnostic, 1 millicurie	AZEDRA NDC# 71258- 0015-02: Single-dose 30 mL vial of AZEDRA containing a total volume of 22.5 (±2.5) mL of solution with a total radioactivity of 240–413 mCi/vial (8,880–15,281 MBq/vial) at calibration time1	Deleted 2020	Deleted 2020	D	D	Deleted 2020	Deleted 2020	Deleted in 2020
● C9408 NEW January 1, 2019	Iodine i-131 iobenguane, tx Iodine i-131 iobenguane, therapeutic, 1 millicurie.		Deleted 2020	Deleted 2020	D	D	Deleted 2020	Deleted 2020	Deleted in 2020
● A9591 NEW January 1 2021	Fluoroestradiol f 18 Fluoroestradiol F-18, diagnostic, 1 mCi	Trade name: CERIANNA™ NDC (72874-0001-01) For all payers, all settings, effective January 1, 2021.	See C9060	9370	G	G	\$0.75	\$0.75	0.0%
● C9060 NEW October 1, 2020	Fluoroestradiol f 18 Fluoroestradiol F-18, diagnostic, 1 mCi	Trade name: CERIANNA™ C codes are Hospital Outpatient use only. NDC (72874-0001-01) Effective October 1, 2020 to December 31, 2020.	New Oct 2020	9370	G	D	\$0.75	Deleted in 2021	Deleted in 2021
● C9067 NEW October 1 2020	Gallium ga-68 dotatoc Gallium Ga-68, dotatoc, diagnostic, 0.01mCi	No trade name: UIHC C codes are Hospital Outpatient use only. Effective October 1, 2020	New Oct 2020	9323	G	G	\$8.64	\$8.64	N/A
A9597 or J3490	<i>Positron emission tomography radiopharmaceutical, diagnostic, for tumor identification, not otherwise classified for Cu-64 DOTATATE. Some payers may request J3490 Unclassified drugs which is another unlisted drug code, so do check with the local payer to report the correct temporary billing HCPCS code.</i>	Trade name: Detectnet™ Cu-64 DOTATATE NDC (69945-0064-01)						Pending pass- through newly FDA approved	
DRUGs Often Used in Nuclear Medicine Services, list not all inclusive.									
J0153	Adenosine inj 1mg	ADENOSCAN Replaces J0150, J0151 and J0152	N/A	N/A	N	N	Packaged into APC rate	Packaged into APC rate	Providers should code and bill so costs are realized for future rates
J0280	Aminophyllin up to 250 MG, inj.		N/A	N/A	N	N	Packaged into APC rate	Packaged into APC rate	Providers should code and bill so costs are realized for future rates
J0461	Inj, atropine sulfate, 0.01 mg		N/A	N/A	N	N	Packaged into APC rate	Packaged into APC rate	Providers should code and bill so costs are realized for future rates
J1120	Acetazolamide sodium injection, up to 500 mg	Diamox	N/A	N/A	N	N	Packaged into APC rate	Packaged into APC rate	Providers should code and bill so costs are realized for future rates
J1160	Inj, digoxin, up to 0.5 mg	Lanoxin	N/A	N/A	N	N	Packaged into APC rate	Packaged into APC rate	Providers should code and bill so costs are realized for future rates
J1245	Dipyridamole injection, per 10mg	Persantine IV	N/A	N/A	N	N	Packaged into APC rate	Packaged into APC rate	Providers should code and bill so costs are realized for future rates
J1250	Inj dobutamine HCL/250 mg	Dobutrex	N/A	N/A	N	N	Packaged into APC rate	Packaged into APC rate	Providers should code and bill so costs are realized for future rates
J1265	Injection, dopamine HCl, 40 mg	Intropin	N/A	N/A	N	N	Packaged into APC rate	Packaged into APC rate	Providers should code and bill so costs are realized for future rates

CPT/		Trade	Oct 2020	FR 2021	Oct 2020	FR 2021	Oct 2020	FR CY 2021	%
HCPCS	Description	Name	APC	APC	SI	SI	Payment Rate	Payment Rate	Change
J1610	Glucagon hydrochloride per 1MG	Glucagen	9042	9042	K	K	\$199.134	\$211.789	6.0%
J1800	Propranolol HCL injection, up to 1 mg	Inderal	N/A	N/A	N	N	Packaged into APC rate	Packaged into APC rate	Providers should code and bill so costs are realized for future rates
J1940	Furosemide injection up to 20 mg	Lasix	N/A	N/A	N	N	Packaged into APC rate	Packaged into APC rate	Providers should code and bill so costs are realized for future rates
J2270	Morphine sulfate injection, up to 10 mg	Replaces J2271	N/A	N/A	N	N	Packaged into APC rate	Packaged into APC rate	Providers should code and bill so costs are realized for future rates
J2785	Injection, Regadenoson, 0.1 milligrams	LexiScan NDC 00469-6501-89	N/A	N/A	N	N	Packaged into APC rate	Packaged into APC rate	Providers should code and bill so costs are realized for future rates
J2805	Sincalide injection INJECTION, SINCALIDE, 5 MICROGRAMS	Kinevac®	N/A	N/A	N	N	Packaged into APC rate	Packaged into APC rate	Providers should code and bill so costs are realized for future rates
J3240	Thyrotropin injection 0.9 mg n 1.1 mg vial	Thyrogen Thytropar	9108	9108	K	K	\$1,740.225	\$1,759.98	1.1%
J3420	Injection, vitamin B-12 cyanocobalamin, up to 1000 mcg		N/A	N/A	N	N	Packaged into APC rate	Packaged into APC rate	Providers should code and bill so costs are realized for future rates
J7030	Normal saline solution infus (1000 CC)		N/A	N/A	N	N	Packaged into APC rate	Packaged into APC rate	Providers should code and bill so costs are realized for future rates
J7040	Normal saline solution infus (500ML=1)		N/A	N/A	N	N	Packaged into APC rate	Packaged into APC rate	Providers should code and bill so costs are realized for future rates
J7050	Normal saline solution infus (250 CC)		N/A	N/A	N	N	Packaged into APC rate	Packaged into APC rate	Providers should code and bill so costs are realized for future rates
J9310 Deleted 2019	Rituximab, 100 mg	RituXan	N/A	N/A	D	D	Deleted 2019	Deleted 2019	N/A
J9311	Inj rituximab, hyaluronidase	RituXan	9467	9467	G	G	\$41.140	\$41.140	0.0%
J9312	Inj., rituximab, 10 mg	RituXan	9186	9186	K	K	\$92.556	\$92.556	0.0%
Q9968	Injection, non-radioactive, non-contrast, visualization adjunct (e.g., Methylene Blue, Isosulfan Blue), 1mg	Methylene Blue	1446	1446	K	K	\$7.552	\$7.552	0.0%

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.