Marketplace National Regional Benefit Interpretation Document

Skilled Nursing Facility and Care REVENUE/CPT/HCPCS CODES

0022	HIPPS - Skilled nursing facility Prospective Payment System
0100	All-Inclusive Rate - All-Inclusive Room & Board Plus Ancill
0101	All-Inclusive Rate - All Inclusive Room and Board
0110	Room & Board - Private - General
0120	Room & Board - Semiprivate - 2 Beds - General
0130	Semiprivate - 3 & 4 Beds - General
0140	Private (Deluxe) - General
0150	Room & Board - Ward - General
0160	Other Room & Board - General
0190	Subacute Care - General
0191	Subacute Care - Level 1 (skilled care)
0192	Subacute Care - Level II (comprehensive care)
0193	Subacute Care - Level III (complex care)
0194	Subacute Care - Level IV (intensive care)
0199	Subacute Care - Other Subacute Care
0250	Pharmacy - General
0251	Pharmacy - Generic Drugs
0252	Pharmacy - Nongeneric Drugs
0253	Pharmacy - Take-Home Drugs
0254	Pharmacy - Drugs Incident to Other Diagnostic Services
0255	Pharmacy - Drugs Incident to Radiology
0256	Pharmacy - Experimental Drugs
0257	Pharmacy - Nonprescription
0258	Pharmacy - IV Solutions
0259	Pharmacy - Other Pharmacy
0260	IV Therapy -General
0261	IV Therapy - Infusion Pump
0262	IV Therapy - IV Therapy/Pharmacy Svs
0263	IV Therapy - IV Therapy/Drugs/Supply Delivery
0264	IV Therapy - IV Therapy/Supplies
0269	IV Therapy - Other IV Therapy
0270	Medical/Surgical Supplies and Devices - General
0271	Medical/Surgical Supplies and Devices - Nonsterile Supply
0272	Medical/Surgical Supplies and Devices - Sterile Supply
0273	Medical/Surgical Supplies and Devices - Take-Home Supplies
0277	Medical/Surgical Supplies and Devices - Oxygen - Take-Home
0279	Medical/Surgical Supplies and Devices - Other Supplies/Devic
0290	DME (Other than Renal) - General
0291	DME (Other than Renal) - Rental
0292	DME (Other than Renal) - Purchase of New DME
0293	DME (Other than Renal) - Purchase of Used DME
0294	DME (Other than Renal) - Supplies/Drugs for DME Effectivenes

0299	DME (Other than Renal) - Other Equipment
0300	Laboratory - General
0301	Laboratory - Chemistry
0302	Laboratory - Immunology
0305	Laboratory - Hematology
0306	Laboratory - Bacteriology & Microbiology
0307	Laboratory - Urology
0309	Laboratory - Other Laboratory
0310	Laboratory Pathological - General
0311	Laboratory Pathological - Cytology
0312	Laboratory Pathological - Histology
0314	Laboratory Pathological - Biopsy
0319	Laboratory Pathological - Other
0320	Radiology - Diagnostic - General
0321	Radiology - Diagnostic - Angiocardiography
0322	Radiology - Diagnostic - Arthography
0323	Radiology - Diagnostic - Arteriography
0324	Radiology - Diagnostic - Chest X-Ray
0329	Radiology - Diagnostic - Other
0330	Radiology - Therapeutic - General
0331	Radiology - Therapeutic - Chemotherapy - Injected
0332	Radiology - Therapeutic - Chemotherapy - Oral
0335	Radiology - Therapeutic - Chemotherapy - IV
0339	Radiology - Therapeutic - Other
0340	Nuclear Medicine - General
0341	Nuclear Medicine - Diagnostic Procedures
0342	Nuclear Medicine - Therapeutic Procedures
0343	Nuclear Medicine - Diagnostic Radiopharmaceuticals
0344	Nuclear Medicine - Therapeutic Radiopharmaceuticals
0349	Nuclear Medicine - Other
0400	Other Imaging Services - General
0402	Other Imaging Services - Ultrasound
0404	Other Imaging Services - Positron Emission Tomography (PET)
0409	Other Imaging Services - Other Imaging Services
0410	Respiratory Services - General
0412	Respiratory Services - Inhalation Services
0413	Respiratory Services - Hyperbaric Oxygen Therapy
0419	Respiratory Services - Other Respiratory Services
0420	Physical Therapy - General
0421	Physical Therapy - Visit Charge
0422	Physical Therapy - Hourly Charge
0423	Physical Therapy - Group Rate
0424	Physical Therapy - Evaluation or Reevaluation
0429	Physical Therapy - Other Physical Therapy
0430	Occupational Therapy - General
0431	Occupational Therapy - Visit Charge
0432	Occupational Therapy - Hourly Charge

0433	Occupational Therapy - Group Rate
0434	Occupational Therapy - Evaluation or Reevaluation
0439	Occupational Therapy - Other Occupational Therapy
0440	Speech-Language Pathology - General
0441	Speech-Language Pathology - Visit Charge
0442	Speech-Language Pathology - Hourly Charge
0443	Speech-Language Pathology - Group Rate
0444	Speech-Language Pathology - Evaluation or Reevaluation
0449	Speech-Language Pathology - Other Speech-Language Pathology
0460	Pulmonary Function - General
0469	Pulmonary Function - Other Pulmonary Function
0470	Audiology - General
0471	Audiology - Diagnostic
0472	Audiology - Treatment
0479	Audiology - Other Audiology
0480	Cardiology - General
0481	Cardiology - Cardiac Cath Lab
0482	Cardiology - Stress Test
0483	Cardiology - Echocardiology
0489	Cardiology - Other Cardiology
0550	Skilled Nursing - General
0551	Skilled Nursing - Visit Charge
0552	Skilled Nursing - Hourly Charge
0559	Skilled Nursing - Other Skilled Nursing
0622	Medicare/Surgical Supplies - Supplies Incident to Other Diag
0623	Medicare/Surgical Supplies - Surgical Dressings
0624	Medicare/Surgical Supplies - FDA Investigational Devices
0630	Pharmacy—Extension of 025X - Reserved
0631	Pharmacy—Extension of 025X- Single Source Drug
0632	Pharmacy—Extension of 025X- Multiple Source Drug
0633	Pharmacy - Extension of 25X- Restrictive Prescription
0634	Pharmacy - Extension of 25X - EPO < 10,000 Units
0635	Pharmacy - Extension of 25X - EPO > 10,000 Units
0637	Pharmacy - Extension of 25X - Self Administrable Drugs
0730	EKG/ECG (Electrocardiogram) - General
0731	EKG/ECG (Electrocardiogram) - Holter Monitor
0732	EKG/ECG (Electrocardiogram) - Telemetry
0739	EKG/ECG (Electrocardiogram) - Other EKG/ECG
0740	EEG (Electroencephalogram) - General
0750	Gastrointestinal Services - General
0780	Telemedicine - General
0920	Other Diagnostic Services - General
0921	Other Diagnostic Services - Peripheral Vascular Lab
0922	Other Diagnostic Services - Electromyelogram
0923	Other Diagnostic Services - Pap Smear
0924	Other Diagnostic Services - Allergy Test
0925	Other Diagnostic Services - Pregnancy Test

0929	Other Diagnostic Services - Other Diagnostic Service
0940	Other Therapeutic Services - General
0942	Other Therapeutic Services - Education/Training
0946	Other Therapeutic Services - Complex Medical Equipment - Rou
0947	Other Therapeutic Services - Complex Medical Equipment - Anc
0949	Other Therapeutic Services - Other Therapeutic Services
11042	DEBRIDEMENT SUBCUTANEOUS TISSUE 20 SQ CM OR LT
11043	DEBRIDEMENT MUSCLE and FASCIA 20 SQ CM OR LT
11044	DEBRIDEMENT BONE MUSCLE and /FASCIA 20 SQ CM OR LT
11045	DBRDMT SUBCUTANEOUS TISSUE EA ADDL 20 SQ CM
11046	DEBRIDEMENT MUSCLE and /FASCIA EA ADDL 20 SQ CM
11047	DEBRIDEMENT BONE EACH ADDITIONAL 20 SQ CM
11720	DEBRIDEMENT NAIL ANY METHOD 1-5
11721	DEBRIDEMENT NAIL ANY METHOD 6 OR GT
11730	AVULSION NAIL PLATE PARTIAL/COMPLETE SIMPLE 1
36470	INJECTION SCLEROSANT SINGLE INCMPTNT VEIN
36471	INJECTION SCLEROSANT MULTIPLE INCMPTNT VEINS
51798	MEAS POST-VOIDING RESIDUAL URINE and /BLADDER CAP
69210	REMOVAL IMPACTED CERUMEN INSTRUMENTATION UNILAT
90901	BIOFEEDBACK TRAINING ANY MODALITY
90912	BFB TRAING W/EMG and /MANOMETRY 1ST 15 MIN CNTCT
90913	BFB TRAING W/EMG and /MANOMETRY EA ADDL 15 MIN CNTCT
92507	TX SPEECH LANG VOICE COMMJ and /AUDITORY PROC IND
92508	TX SPEECH LANGUAGE VOICE COMMJ AUDITRY 2 OR GT INDIV
92520	LARYNGEAL FUNCTION STUDIES
92521	EVALUATION OF SPEECH FLUENCY (STUTTER CLUTTER)
92522	EVALUATION OF SPEECH SOUND PRODUCTION ARTICULATE
92523	EVAL SPEECH SOUND PRODUCT LANGUAGE COMPREHENSION
92524	BEHAVIORAL AND QUALIT ANALYSIS VOICE AND RESONANCE
92526	TX SWALLOWING DYSFUNCTION and /ORAL FUNCJ FEEDING
92597	EVAL and /FITG VOICE PROSTC DEV SUPLMNT ORAL SPEEC
92605	EVAL RX N-SP-GEN AUGMT ALT COMMUN DEV F2F 1ST HR
92606	THER SVC N-SP-GENRATJ DEV PRGRMG AND MODIFICAJ
92607	RX SP-GENRATJ AUGMNT AND COMUNICAJ DEV 1ST HR
92608	RX SP-GENRATJ AUGMNT AND COMUNICAJ DEV EA 30 MIN
92609	THER SP-GENRATJ DEV PRGRMG AND MODIFICAJ
92610	EVAL ORAL AND PHARYNGEAL SWLNG FUNCJ
92611	MOTION FLUOR EVAL SWLNG FUNCJ C/V REC
92612	FLEXIBLE ENDOSCOPIC EVAL SWALLOW C/V REC
92614	FLEXIBLE ENDOSCOPIC EVAL LARYN SENSORY C/V REC
92616	FLEXIBLE NDSC EVAL SWLNG and LARYN SENS C/V REC
92618	EVAL RX N-SP-GEN AUGMT ALT COMMUN DEV ADD 30 MIN
92626	EVAL AUD FUNCJ CAND/PO SURG IMPLT DEV 1ST HR
92627	EVAL AUD FUNCJ CAND/PO SURG IMPLT DEV EA ADDL 15
92630	AUDITORY REHABILITATION PRELINGUAL HEARING LOSS
92633	AUDITORY REHABILITATION POSTLINGUAL HEARING LOSS
93793	ANTICOAGULANT MGMT FOR PT TAKING WARFARIN

93797	OUTPATIENT CARDIAC REHAB W/O CONT ECG MONITOR
93798	OUTPATIENT CARDIAC REHAB W/CONT ECG MONITORING
95249	CONT GLUC MONITORING PATIENT PROVIDED EQUIPMENT
95812	ELECTROENCEPHALOGRAM EXTEND MONITORING 41-60 MIN
95851	ROM MEAS and REPRT EA XTR EX HAND/EA TRNK SCTJ SPI
95852	ROM MEAS and REPRT HAND W/WO COMPARISON NORMAL SID
95984	ELEC ALYS IMPLT BRN NPGT PRGRMG EA ADDL 15 MIN
95992	CANALITH REPOSITIONING PROCEDURE
96105	ASSESSMENT APHASIA W/INTERP and REPORT PER HOUR
96110	DEVELOPMENTAL SCREEN W/SCORING and DOC STD INSTRM
96116	NEUROBEHAVIORAL STATUS XM PHYS/QHP 1ST HOUR
96125	STANDARDIZED COGNITIVE PERFORMANCE TESTING
96360	IV INFUSION HYDRATION INITIAL 31 MIN-1 HOUR
96361	IV INFUSION HYDRATION EACH ADDITIONAL HOUR
96365	IV INFUSION THERAPY/PROPHYLAXIS /DX 1ST TO 1 HR
96366	IV INFUSION THERAPY PROPHYLAXIS/DX EA HOUR
96367	IV INFUSION THER PROPH ADDL SEQUENTIAL TO 1 HR
96368	IV NFS THERAPY PROPHYLAXIS/DX CONCURRENT NFS
96369	SUBCUTANEOUS INFUSION INITIAL 1 HR W/PUMP SET-UP
96370	SUBCUTANEOUS INFUSION EACH ADDITIONAL HOUR
96371	SUBQ INFUSION ADDITIONAL PUMP INFUSION SITE
96373	THERAPEUTIC PROPHYLACTIC/DX NJX INTRA-ARTERIAL
96374	THER PROPH/DX NJX IV PUSH SINGLE/1ST SBST/DRUG
96375	THERAPEUTIC INJECTION IV PUSH EACH NEW DRUG
96376	THER PROPH/DX NJX EA SEQL IV PUSH SBST/DRUG FAC
97010	APPLICATION MODALITY 1 OR GT AREAS HOT/COLD PACKS
97012	APPL MODALITY 1 OR GT AREAS TRACTION MECHANICAL
97014	APPL MODALITY 1 OR GT AREAS ELEC STIMJ UNATTENDED
97016	APPL MODALITY 1 OR GT AREAS VASOPNEUMATIC DEVICES
97018	APPL MODALITY 1 OR GT AREAS PARAFFIN BATH
97022	APPLICATION MODALITY 1 OR GT AREAS WHIRLPOOL
97024	APPLICATION MODALITY 1 OR GT AREAS DIATHERMY
97026	APPLICATION MODALITY 1 OR GT AREAS INFRARED
97028	APPL MODALITY 1 OR GT AREAS ULTRAVIOLET
97032	APPL MODALITY 1 OR GT AREAS ELEC STIMJ EA 15 MIN
97033	APPL MODALITY 1 OR GT AREAS IONTOPHORESIS EA 15 MIN
97034	APPL MODALITY 1 OR GT AREAS CONTRAST BATHS EA 15 MIN
97035	APPL MODALITY 1 OR GT AREAS ULTRASOUND EA 15 MIN
97036	APPL MODALITY 1 OR GT AREAS HUBBARD TANK EA 15 MIN
97039	UNLIST MODALITY SPEC TYPE AND TIME CONSTANT ATTEND
97110	THERAPEUTIC PX 1 OR GT AREAS EACH 15 MIN EXERCISES
97112	THER PX 1 OR GT AREAS EACH 15 MIN NEUROMUSC REEDUCA
97116	THER PX 1 OR GT AREAS EA 15 MIN GAIT TRAING W/STAIR
97139	UNLISTED THERAPEUTIC PROCEDURE SPECIFY
97140	MANUAL THERAPY TQS 1 OR GT REGIONS EACH 15 MINUTES
97150	THERAPEUTIC PROCEDURES GROUP 2 OR GT INDIVIDUALS
97165	OCCUPATIONAL THERAPY EVAL LOW COMPLEX 30 MINS

97166	OCCUPATIONAL THERAPY EVAL MOD COMPLEX 45 MINS
97167	OCCUPATIONAL THERAPY EVAL HIGH COMPLEX 60 MINS
97168	OCCUPATIONAL THER RE-EVAL EST PLAN CARE 30 MINS
97530	THERAPEUT ACTVITY DIRECT PT CONTACT EACH 15 MIN
97533	SENSORY INTEGRATIVE TECHNIQUES EACH 15 MINUTES
97535	SELF-CARE/HOME MGMT TRAINING EACH 15 MINUTES
97542	WHEELCHAIR MGMT EA 15 MIN
97597	DEBRIDEMENT OPEN WOUND 20 SQ CM OR LT
97598	DEBRIDEMENT OPEN WOUND EACH ADDITIONAL 20 SQ CM
97602	RMVL DEVITAL TISS N-SLCTV DBRDMT W/O ANES 1 SESS
97605	NEGATIVE PRESSURE WOUND THERAPY DME LT or equal to 50 SQ
97606	NEGATIVE PRESSURE WOUND THERAPY DME GT 50 SQ CM
97607	NEG PRESSURE WOUND THERAPY NON DME LT or equal to 50 SQ
97608	NEG PRESSURE WOUND THERAPY NON DME GT 50 SQ CM
97610	LOW FREQUENCY NON-THERMAL ULTRASOUND PER DAY
97750	PHYSICAL PERFORMANCE TEST/MEAS W/REPRT EA 15 MIN
97755	ASSTV TECHNOL ASSMT DIR CNTCT W/REPRT EA 15 MIN
97760	ORTHOTICS MGMT AND TRAING INITIAL ENCTR EA 15 MINS
97761	PROSTHETICS TRAINING INITIAL ENCTR EA 15 MINS
97763	ORTHOTICS/PROSTH MGMT and /TRAING SBSQ ENCTR 15 MIN
97799	UNLISTED PHYSICAL MEDICINE/REHAB SERVICE/PROC
99304	INITIAL NURSING FACILITY CARE/DAY 25 MINUTES
99305	INITIAL NURSING FACILITY CARE/DAY 35 MINUTES
99306	INITIAL NURSING FACILITY CARE/DAY 45 MINUTES
99307	SBSQ NURSING FACILITY CARE/DAY E/M STABLE 10 MIN
99308	SBSQ NURSING FACIL CARE/DAY MINOR COMPLJ 15 MIN
99309	SBSQ NURSING FACIL CARE/DAY NEW PROBLEM 25 MIN
99310	SBSQ NURS FACIL CARE/DAY UNSTABL/NEW PROB 35 MIN
99315	NURSING FACILITY DISCHARGE MANAGEMENT 30 MINUTES
99316	NURSING FACILITY DISCHARGE MANAGEMENT 30 MINUTES
99318	E/M ANNUAL NURSING FACILITY ASSESS STABLE 30 MIN
99354	PROLONGED SVC OUTPATIENT SETTING 1ST HOUR
99355	PROLONGED SVC OUTPATIENT SETTING EA ADDL 30 MIN
99356	PROLONGED SVC I/P OR OBS SETTING 1ST HOUR
99357	PROLONGED SVC I/P OR OBS SETTING EA ADDL 30 MIN
99358	PROLNG E/M SVC BEFORE and /AFTER DIR PT CARE 1ST HR
99359	PROLNG E/M BEFORE and /AFTER DIR CARE EA 30 MINUTES
99360	PHYS STANDBY SVC PROLNG PHYS ATTN EA 30 MINUTES
99366	TEAM CONFERENCE FACE-TO-FACE NONPHYSICIAN
99367	TEAM CONFERENCE NON-FACE-TO-FACE PHYSICIAN
99368	TEAM CONFERENCE NON-FACE-TO-FACE NONPHYSICIAN
99379	SUPERVISION NURS FACILITY PATIENT MO 15-29 MIN
99380	SUPERVISION NURS FACILITY PATIENT MONTH 30 MIN OR GT
99483	ASSMT and CARE PLANNING PT W/COGNITIVE IMPAIRMENT
99497	ADVANCE CARE PLANNING FIRST 30 MINS
99498	ADVANCE CARE PLANNING EA ADDL 30 MINS
0505T	EV FEMPOP ARTL REVSC TCAT PLMT IV ST GRF AND CLSR

0506T	MAC PGMT OPTICAL DNS MEAS HFP UNI/BI W/I and R
0507T	NEAR INFRARED DUAL IMG MEIBOMIAN GLND UNI/BI I and R
0508T	PLS ECHO US B1 DNS MEAS INDIC AXL B1 MIN DNS TIB
A4217	STERILE WATER/SALINE 500 ML
A4221	SUPPLIES FOR MAINT NON-INS RX INFUS CATH PER WK
E0470	RESP ASST DEVC BI-LEVL PRSS CAPABILITY W/O BACKU
E0472	RESP ASST DEVC BI-LEVL PRSS CAPABILITY W/BACKUP
E0481	INTRAPULM PERCUSSIVE VENT SYSTEM AND REL ACSSORIES
G0071	PMT CMNCT TECH-BASED SERVICES; RHC OR FQHC ONLY
G0127	TRIMMING OF DYSTROPHIC NAILS ANY NUMBER
G0128	DIR SKLED SERV RN OP REHAB EA 10 MIN AFTR 1ST 5
G0281	E-STIM 1 OR GT AREAS CHRONIC STAGE III and IV ULCERS
G0283	E-STIM 1 OR GT AREAS OTH THAN WND CARE PART TX PLAN
G0329	ELECMAGNET TX ULCERS NOT HEALING 30 DAYS CARE
G0471	COLL V BLD VP/URN SMP CATH IND SNF/LAB BHALF HHA
G0513	PRLNG PREV SRVC OFC/OTH O/P RQR DIR CTC;1ST 30 M
G0514	PRLNG PREV SRVC OFC/OTH O/P DIR CTC;EA ADD 30 M
G0516	INSERTION NON-BIODEGRADABLE RX DELIVERY IMPL 4 OR GT
G0517	REMOVAL NON-BIODEGRADABLE DRUG DEL IMPLANTS 4 OR GT
G0518	REMV REINS NON-BIODEGRADABLE DRUG DEL IMPL 4 OR GT
G2010	REMOTE EVAL RECORDED VIDEO and / IMAGES SB ESTAB PT
G2012	BRIEF COMMUNICATION TBS; 5-10 MIN MED DISCUSSION
G9679	ONSITE AC C TX NSG FAC RES W/PNE BILLD SID-BENEF
G9680	ONSITE AC C TX NSG FAC RES W/CHF BILLD SID-BENEF
G9681	ONSITE AC C TX NSG FAC RES COPD/AS BILL SID-BNEF
G9682	ONSITE AC TX NSG FAC RES W/SKN INF BILL SID-BNEF
G9683	FAC ONSITE AC TX NSG FAC RES FL/ELCT DO BILL SID
G9684	ONSITE AC C TX NSG FAC RES UTI BILL SID-BENEF
J2513	INJECTION PENTASTARCH 10 PCT SOLUTION 100 ML
J2545	PENTAMIDINE ISETHIONATE I SOL NONCP UD P 300 MG
J7030	INFUSION NORMAL SALINE SOLUTION 1000 CC
J7040	INFUSION NORMAL SALINE SOLUTION STERILE
J7042	5 PCT DEXTROSE/NORMAL SALINE
J7050	INFUSION NORMAL SALINE SOLUTION 250 CC
J7100	INFUSION DEXTRAN 40500 ML
J7110	INFUSION DEXTRAN 75500 ML
J7120	RINGERS LACTATE INFUSION UP TO 1000 CC
J7676	PENTAMIDINE ISETHIONATE I SOL CP PROD U D 300 MG
S8948	APPLIC MODAL 1/MORE AREAS; LW-LEVL LASR; EA 15 M
S9472	CARD REHAB PROGM NON-PHYSICIAN PROVIDER PER DIEM
S9473	PULM REHAB PROGM NON-PHYSICIAN PROVIDER PER DIEM
S9476	VESTIBULAR REHAB PROGM NON-PHYSICIAN PROV-DIEM
S9529	HOME OR SKILLED NURSING FACILITY PATIENT
V5364	DYSPHAGIA SCREENING