

Reimbursement Schedule January 1, 2019 – December 31, 2019

Office Visits - Established Patients

Office Visit / Minimal / no physician	99211	\$ 18.31
Office Visit / Problem focused History / exam	99212	\$ 37.12
Preventive Visit	99213/ 99395/ 99396/ 99397	\$ 61.55
Office Visit / Detailed History/ Detailed Exam	99214 / 99215	\$ 90.79

Office Visits - New Patients

Office Visit / Problem focused History / exam	99201	\$ 37.71
Office Visit / Expanded problem focused History / exam	99202	\$ 63.38
Preventive Visit	99385 / 99386 / 99387	\$ 63.38
Office Visit / Detailed History/ Detailed Exam	99203 / 99204 / 99205	\$ 91.07

Diagnostic

Colposcopy of the cervix	57452	\$ 92.15
Colposcopy with biopsy and endocervical curettage	57454	\$ 128.39
Colposcopy with biopsy(s) of the cervix	57455	\$ 120.48
Colposcopy of the cervix with endocervical curettage (biopsy)	57456	\$ 113.65
Colposcopy of the cervix with loop electrode biopsy(s) of the cervix	57460 ²	\$ 238.64
Colposcopy of the cervix with loop electrode biopsy(s) of the cervix – Facility Fee	57460TC ²	\$ 750.00



Reimbursement Schedule January 1, 2019 – December 31, 2019

Diagnostic - continued

Colposcopy with loop electrode conization of the cervix	57461 ²	\$ 269.86
Colposcopy with loop electrode conization of the cervix – Facility Fee	57461TC ²	\$ 750.00
Biopsy, single/multiple/ local ex. of lesion, with/without fulguration- sep procedure	57500	\$ 108.15
Endoscopy with biopsy (s) of the cervix and endocervical curettage	57505	\$ 86.98
Conization of cervix, with/without fulguration, with/without dilation and curettage, with/without repair; cold knife or laser	57520 ²	\$ 261.00
Conization of cervix – Facility Fee	57520TC ²	\$ 750.00
Loop electrode excision	57522 ²	\$ 222.77
Loop electrode excision – Facility Fee	57522TC ²	\$ 750.00
Paracervical (uterine) nerve – Anesthetic Agent	64435	\$ 116.42
Endometrial sampling (biopsy) with or without endocervical sampling (biopsy), without Cervical dilation, any method (separate procedure)	58100 ³	\$ 91.85
Endometrial sampling (biopsy) performed in conjunction with colposcopy	58110 ³	\$ 40.77

Pathology and Laboratory

Human Papillomavirus, high-risk types	87624	\$ 43.33
Human Papillomavirus, types 16 and 18 only	87625	\$ 43.33
Cytopathology, smears, any other source; screening & interpretation	88160	\$ 61.94
Technical component	88160TC	\$ 39.30
Professional component	8816026	\$ 22.64



Reimbursement Schedule January 1, 2019 – December 31, 2019

Pathology and Laboratory - continued

Cytopathology, smears, any other source; preparation, screening & interpretation	88161	\$ 56.18
Technical component	88161TC	\$ 34.46
Professional component	8816126	\$ 21.73
Cytopathology, evaluation of fine needle aspirate; immediate cytohistologic study to determine adequacy of specimen(s), first evaluation episode	88172	\$ 47.94
Technical component	88172TC	\$ 16.63
Professional component	8817226	\$ 31.30
Interpretation and Report of Aspirate	88173	\$ 131.76
Technical component	88173TC	\$ 69.82
Professional component	8817326	\$ 61.94
Screening Pap Smear Cytology	88164 / 88165	\$ 14.65
Screening Pap Cytology – Thin Prep – Must be reimbursed @ conventional Pap smear rate	88142 / 88143	\$ 25.01
Abnormal Smear (read by pathologist)	88141	\$ 27.51
Screening by automated system , under physician Supervision	88174	\$ 26.38
Screening by automated system and manual rescreening under physician Supervision	88175	\$ 32.71
Cytopathology, evaluation of fine needle aspirate; immediate cytohistologic study to determine adequacy of specimen(s), each separate additional evaluation episode	88177	\$ 25.14
Technical component	88177TC	\$ 6.06
Professional component	8817726	\$ 19.08



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Pathology and Laboratory – continued

Pathology, Cervical/Breast Biopsy	88305	\$ 58.42
Technical component	88305TC	\$ 25.38
Professional component	8830526	\$ 33.04
Pathology, Cervical/Breast, excision of lesion – surgical pathology (Global Procedure)	88307	\$ 225.66
Technical component	88307TC	\$ 152.98
Professional component	8830726	\$ 72.67
Surgical pathology, first tissue block, with frozen section (s), single specimen	88331	\$ 82.92
Technical component	88331TC	\$ 27.81
Professional component	8833126	\$ 55.11
Each additional tissue block with frozen section (s)	88332	\$ 45.24
Technical component	88332TC	\$ 18.13
Professional component	8833226	\$ 27.11
Immunohistochemistry or immunocytochemistry, per specimen; initial single antibody stain procedure (Global Procedure)	88342	\$ 93.23
Technical component	88342TC	\$ 62.28
Professional component	8834226	\$ 30.96
Immunohistochemistry or immunocytochemistry, per specimen; each additional single antibody stain procedure (Global Procedure)	88341	\$ 79.14
Technical component	88341TC	\$ 54.43
Professional component	8834126	\$ 24.71



Provider Reimbursement Rates

Reimbursement Schedule January 1, 2019 – December 31, 2019

Pathology and Laboratory – continued

Immunohistochemistry	88360	\$ 114.00
Technical component	88360TC	\$ 75.28
Professional component	8836026	\$ 38.72
Morphometric analysis, tumor immunohistochemistry, per specimen; using computer-assisted technology (Global Procedure)	88361	\$ 123.91
Technical component	88361TC	\$ 82.84
Professional component	8836126	\$ 41.07

Radiological/Diagnostic Procedures

Diagnostic mammography, including CAD when performed; unilateral" (Global Procedure)	77065	\$ 115.19
Technical Component	77065TC	\$ 80.73
Professional Component	7706526	\$ 34.47
Diagnostic mammography, including (CAD) when performed; bilateral" (Global Procedure)	77066	\$ 145.59
Technical Component	77066TC	\$ 103.10
Professional Component	7706626	\$ 42.50
Diagnostic digital breast tomosynthesis, unilateral or bilateral (list separately in addition to 77065 or 77066) Global Procedure	G0279	\$ 46.74
Technical Component	G0279TC	\$ 21.47
Professional Component	G027926	\$ 25.26



Provider Reimbursement Rates

Reimbursement Schedule January 1, 2019 – December 31, 2019

Radiological/Diagnostic Procedures - continued

Screening mammography, bilateral (2-view study of each breast), including CAD when performed" (Global Procedure)	77067	\$ 117.36
Technical Component	77067TC	\$ 85.26
Professional Component	7706726	\$ 32.10
Screening digital breast tomosynthesis, bilateral (list separately in addition to 77067) Global Procedure	77063	\$46.74
Technical Component	77063TC	\$21.47
Professional Component	7706326	\$25.26
Ultrasound, complete examination of breast including axilla, UNILATERAL Global Procedure	76641	\$ 91.98
Technical Component	76641TC	\$ 61.07
Professional Component	7664126	\$ 30.90
Ultrasound, complete examination of breast including axilla, BILATERAL Global Procedure	76641-50	\$ 137.97
Technical Component	76641TC-50	\$ 91.61
Professional Component	7664126-50	\$ 46.35
Ultrasound, limited examination of breast including axilla, UNILATERAL Global Procedure	76642	\$ 75.38
Technical Component	76642TC	\$ 46.55
Professional Component	7664226	\$ 28.82
Ultrasound, limited examination of breast including axilla, BILATERAL Global Procedure	76642-50	\$ 113.07
Technical Component	76642TC-50	\$ 69.83
Professional Component	7664226-50	\$ 43.23



Provider Reimbursement Rates

Reimbursement Schedule January 1, 2019 – December 31, 2019

Radiological/Diagnostic Procedures - continued

Radiological examinations; surgical specimen (Global Procedure)76098\$14.38Technical component76098TC\$7.54Professional component7609826\$6.83Ultrasonic guidance for needle placement (eg, biopsy aspiration, injection, localization device), imaging supervision and interpretation (Global Procedure)76942\$50.90Technical component76942TC\$23.58Professional component7694226\$27.34Mammary Ductogram or galactogram, single duct (Global Procedure)77053\$49.62Technical component77053TC\$34.46Professional component77053TC\$34.46Professional component770453TC\$15.15Magnetic resonance imaging (MRI), breast, without contrast, unilateral77046\$211.42Technical component77047CC\$150.14Professional component77047C\$217.06Magnetic resonance imaging (MRI), breast, without contrast, bilateral77047\$217.06Magnetic resonance imaging (MRI), breast, without contrast, bilateral77047C\$149.23Professional component77047C\$217.06Magnetic resonance imaging (MRI), breast, including CAD, with and without contrast, unilateral77048TC\$335.94Technical component7704726\$68.33	Radiological examinations: surgical specimen (Global Procedure)		
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Magnetic resonance imaging (MRI), breast, without contrast, bilateral77047\$ 217.06Technical component77047TC\$ 149.23Professional component7704726\$ 68.83Magnetic resonance imaging (MRI), breast, including CAD, with and without contrast, unilateral77048\$ 335.94	Technical component	77046TC	\$ 150.14
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Magnetic resonance imaging (MRI), breast, including CAD, with and without contrast, unilateral 77048 \$335.94	Technical component	77047TC	\$ 149.23
without contrast, unilateral 77048 \$ 335.94	Professional component	7704726	\$ 68.83
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	Technical component	77048TC	\$ 247.30
Professional component 7704826 \$ 88.65	Professional component	7704826	\$ 88.65



Provider Reimbursement Rates

Reimbursement Schedule January 1, 2019 – December 31, 2019

Radiological/Diagnostic Procedures - continued

Magnetic resonance imaging (MRI), breast, including CAD, with and without contrast, bilateral	77049	\$ 343.06
Technical component	77049TC	\$ 246.09
Professional component	7704926	\$ 96.98

Surgical

Fine needle aspiration biopsy without imaging guidance, first lesion	10021 ²	\$ 47.85
Fine needle aspiration biopsy without imaging guidance, each additional lesion	10004 ²	\$ 37.15
Fine needle aspiration biopsy including ultrasound guidance, first lesion	10005 ²	\$ 62.38
Fine needle aspiration biopsy including ultrasound guidance, each additional lesion	10006 ²	\$ 42.48
Fine needle aspiration biopsy including fluoroscopic guidance, first lesion	10007 ²	\$ 80.26
Fine needle aspiration biopsy including fluoroscopic guidance, each additional lesion	10008 ²	\$ 52.32
Fine needle aspiration biopsy including CT guidance, first lesion	10009 ²	\$ 97.17
Fine needle aspiration biopsy including CT guidance, each additional lesion	10010 ²	\$ 71.02
Fine needle aspiration biopsy including MRI guidance, first lesion	10011 ²	\$ 97.17
Fine needle aspiration biopsy including MRI guidance, each additional lesion	10012 ²	\$ 71.02
Incision and Drainage of Abscess	10060	\$ 83.37
Puncture aspiration of cyst of breast	19000 ²	\$ 37.38
Each additional cyst (list separately in addition to code for primary procedure)	19001²	\$ 18.40



Reimbursement Schedule January 1, 2019 – December 31, 2019

Surgical - continued

Injection procedure only for mammary ductogram or galactogram	19030	\$ 66.52
Biopsy of breast; needle core (Surgical Procedure Only)	19100 ²	\$ 59.82
Incisional biopsy of breast (Global Procedure)	19101 ²	\$ 189.42
Breast biopsy, placement of loc device and imag of bx spec, percutaneous; stereotactic guidance; first lesion	19081 ²	\$ 143.95
Breast biopsy, placement of loc device and imag of bx spec, percutaneous; stereotactic guidance; each add lesion	19082 ²	\$ 72.71
Breast biopsy, placement of loc device and imag of bx spec, percutaneous; ultrasound guidance; first lesion	19083 ²	\$ 135.35
Breast biopsy, placement of loc device and imag of bx spec, percutaneous; ultrasound guidance; each add lesion	19084 ²	\$ 67.69
Breast biopsy, placement of loc device and imag of bx spec, percutaneous; MRI guidance; first lesion	19085 ²	\$ 157.10
Breast biopsy, placement of loc device and imag of bx spec, percutaneous; MRI; each add lesion	19086 ²	\$ 79.00
Excision of cyst, fibroadenoma or other benign or malignant tumor, aberrant breast tissue, duct lesion or nipple lesion (Global Procedure)	19120 ²	\$ 353.89
Excision of breast lesion identified by preoperative placement of radiological marker-single lesion	19125 ²	\$ 392.40
Excision of breast lesion identified by preoperative placement of radiological marker-each add lesion	19126 ²	\$ 138.25
Placement of breast loc device, percutaneous; mammographic guidance; first lesion	19281	\$ 86.41
Placement of breast loc device, percutaneous; mammographic guidance; each add lesion	19282	\$ 43.35

Surgical - continued



Provider Reimbursement Rates

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Placement of breast loc device, percutaneous; stereotactic guidance; first lesion	19283	\$ 86.97
Placement of breast loc device, percutaneous; stereotactic guidance; each add lesion	19284	\$ 44.20
Placement of breast loc device, percutaneous; ultrasound guidance; first lesion	19285	\$ 74.22
Placement of breast loc device, percutaneous; ultrasound guidance; each add lesion	19286	\$ 37.10
Placement of breast loc device, percutaneous; MRI guidance; first lesion	19287	\$ 110.16
Placement of breast loc device, percutaneous; MRI guidance; each add lesion	19288	\$ 55.54

Conscious Sedation Anesthesia

10-22 minutes for individuals 5 years or older	99156	\$ 66.50
For each additional 15 minutes	99157 ⁴	\$ 54.12

Notes

- 1. Reimbursement rates are based on the 80% of 2018 Rhode Island Medicare Fee Schedule OR maximum payable rate allowed by the WCSP.
- 2. United States citizens and qualified aliens (Permanent Resident Aliens greater than 5 years) should apply for Medical Assistance through the WCSP to cover the cost of this procedure. WCSP will provide coverage for these CPT codes only for non-qualified aliens or Permanent Resident Aliens less than 5 years needing Cone/LEEP or allowable breast biopsy CPT codes for women that do not qualify for Medicaid.
- 3. Endometrial biopsy is reimbursable ONLY if performed in the initial workup of a Pap test result of Atypical Glandular Cells (AGC) or the Pap test result of a postmenopausal woman notes that endometrial cells are present.
- Example: If procedure is 50 minutes, code 99156 + (99157 x 2).
 No separate charge allowed if procedure < 10 minutes.

Balance billing for covered services is not permitted by Participating Providers under contract with the WCSP.