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<b>CPT CODE</b>	<b>Service Description</b>	<b>2016 Max. Allowable Reimbursement Amount.</b>
99070	<b>Supplies and materials</b> -over and above those usually included with the office visit (list drugs,trays,supplies, or materials provided)	\$10.00
99201	<b>Office visit</b> – New patient- Problem focused	\$48.97
99202	<b>Office visit</b> – New patient- Expanded problem focused	\$83.27
99203	<b>Office visit</b> – New patient- Detailed	\$120.67
99204	<b>Office visit</b> – New patient-comprehensive history 45 min	\$183.51
99205	<b>Office visit</b> – New Patient- comprehensive history 60 min	\$230.29
99211	<b>Office visit</b> – New patient- Problem focused	\$22.00
99212	<b>Office visit</b> – Established patient- Problem focused	\$48.48
99213	<b>Office visit</b> – Established patient- Expanded problem focused	\$80.85
99214	<b>Office visit</b> – Established patient – Detailed History 25 min.	\$119.06
99385	<b>Initial Preventive Medicine Evaluation</b> -30-39 years	\$120.67
99386	<b>Initial Preventive Medicine Evaluation</b> -40-64 years	\$120.67
99387	<b>Initial Preventive Medicine Evaluation</b> -65 years and older	\$120.67
99395	<b>Periodic Preventive Medicine Evaluation</b> -30-39 years	\$80.85
99396	<b>Periodic Preventive Medicine Evaluation</b> -40-64 years	\$80.85
99397	<b>Periodic Preventive Medicine Evaluation</b> -65 years and older	\$80.85
76098	<b>Radiological Examination Examination</b> -surgical specimen	\$18.57
76098-TC	<i>Technical Component for performing- 76098</i>	\$9.49
76098-26	<i>Professional Component for interpretation of -76098</i>	\$9.09
76641	<b>Ultrasound</b> ,complete examination of breast including axilla,unilateral	\$119.42
76641-TC	<i>Technical Component of- 76641</i>	\$78.36
76641-26	<i>Professional Component for interpretation of -76641</i>	\$41.04
76642	<b>Ultrasound</b> , Limited examination of breast including axilla,unilateral	\$98.28
76642-TC	<i>Technical component -76642</i>	\$59.98
76642-26	<i>Professional component-76642</i>	\$38.32
76942	<b>Ultrasonic Guidance for Needle Biopsy</b> -radiological supervision and interpretation	\$68.14
76942-TC	<i>Technical Component for performing-76942</i>	\$30.61

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76942-26	<i>Professional Component for interpretation-76942</i>	\$37.52
77055	<b>Diagnostic Mammogram</b> -Unilateral	\$99.46
77053	Mammary ductogram or galactogram, single duct	\$64.45
77053-TC	<i>Technical component for -77053</i>	\$44.31
77053-26	<i>Professional Component for interpretation of -77053</i>	\$20.14
77055-TC	<i>Technical Component of -77055</i>	\$59.98
77055-26	<i>Professional Component for interpretation of -77055</i>	\$39.48
77056	<b>Diagnostic Mammogram</b> -Bilateral	\$127.72
77056-TC	<i>Technical Component of -77056</i>	\$78.76
77056-26	<i>Professional Component for interpretation of -77056</i>	\$48.97
77057	<b>Screening Mammogram</b> -Bilateral	\$91.23
77057-TC	<i>Technical Component of-77057</i>	\$51.75
77057-26	<i>Professional Component for interpretation of-77057</i>	\$39.48
77058	<b>Magnetic Resonance Imaging</b> ,breast,with and/or without contrast, unilateral	\$586.99
77058-TC	<i>Technical Component of -77058</i>	\$495.41
77058-26	<i>Professional Component for interpretation of -77058</i>	\$91.59
77059	<b>Magnetic Resonance Imaging</b> ,breast,with and/or without contrast,bilateral	\$586.99
77059-TC	<i>Technical Component of - 77059</i>	\$495.41
77059-26	<i>Professional Component for interpretation of- 77059</i>	\$91.59
G0202	<b>Screening Mammogram</b> -producing direct digital image-bilateral	\$147.99
G0202-TC	<i>Technical Component of-G0202</i>	\$108.91
G0202-26	<i>Professional Component for interpretation of –G0202</i>	\$39.09
G0204	<b>Diagnostic Mammogram</b> -producing direct digital image-bilateral- All views	\$180.57
G0204-TC	<i>Technical Component of –G0204</i>	\$131.61
G0204-26	<i>Professional Component for interpretation of-G0204</i>	\$48.97
G0206	<b>Diagnostic Mammogram</b> -producing direct digital image-unilateral –All views	\$142.13
G0206-TC	<i>Technical Component of-G0206</i>	\$103.03
G0206-26	<i>Professional Component for interpretation of-G0206</i>	\$39.09
87624	<b>HPV-Papillomavirus</b> , human, high risk types.	\$47.80
87625	<b>HPV-Papillomavirus, types 16 and 18 only</b>	\$47.80
88104	<b>Cytopathology</b> ,nipple discharge only	\$83.94
88104-TC	<i>Technical Component of-88104</i>	\$50.97

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88104-26	<i>Professional Component for interpretation of-88104</i>	\$32.96
88141	Cytopathology,cervical,requiring interpretation by physician	\$35.79
88142	Cytopathology,cervical,collected in preservative fluid,automated thin layer preparation,screening by cytotechnologist under physician supervision	\$27.60
88143	Cythopathology, cervical or vaginal, automated thin layer prep. Manual screening and rescreening under physician supervision	\$27.60
88164	Cythopathology ,smears,up to three, screening by cytotechnologist under physician supervision, Bethesda System	\$14.39
88165	Cythopathology (conventional pap test),slides cervical or vaginal reported in Bethesda System>manual screening and rescreening under physician supervision	\$14.39
88172	<b>Evaluation of Fine Needle Aspiration with or without preparation of smears</b>	\$63.68
88172-TC	<i>Technical Component of-88172</i>	\$22.00
88172-26	<i>Professional Component for interpretation of-88172</i>	\$41.65
88173	<b>Interpretation and Report of fine Needle Aspiration</b>	\$170.32
88173-TC	<i>Technical Component of-88173</i>	\$89.03
88173-26	<i>Professional Component for interpretation of-88173</i>	\$81.28
88174	Cytopathology, cervical or vaginal, collected in perservative fluid, automated thin layer preparation,screening by automated system under physician supervision	\$29.11
88175	Cytopathology, cervical or vaginal, collected in perservative fluid, automated thin layer preparation, screening by automated system and manual screening, under physician supervision	\$36.09
88305	<b>Surgical Pathology</b> -Level IV-breast biopsy/cervical biopsy-per specimen	\$81.28
88305-TC	<i>Technical Component of-88305</i>	\$37.66
88305-26	<i>Professional Component for interpretation of-88305</i>	\$43.62
88307	<b>Breast-Excision of lesion</b> -Surgical pathology, gross and microscopic examination requiring microscopic evaluation of surgical margins	\$341.44
88307-TC	<i>Technical Component of-88307</i>	\$245.59
88307-26	<i>Professional Component for interpretation of-88307</i>	\$95.84
88329	Pathology consultation during surgery	\$55.92
88329	Pathology consultation during surgery-Facility Setting	\$41.84
88331	<b>Frozen section evaluation of biopsy during surgery</b>	\$106.42
88331-TC	<i>Technical Component for performing-88331</i>	\$34.53

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88331-26	<i>Professional Component for interpretation of-88331</i>	\$71.89
88332	<b>Each Additional Frozen Section</b>	\$56.14
88332-TC	<i>Technical Component for performing-88332</i>	\$20.84
88332-26	<i>Professional Component for interpretation of-88332</i>	\$35.31
88342	Immunohistochemistry	\$117.68
88342-TC	<i>Technical Component for performing-88342</i>	\$76.81
88342-26	<i>Professional Component for performing-88342</i>	\$40.88
G0461	Immunohistochemistry or immunocytochemistry, per specimen;first stain	\$96.93
G0461-TC	<i>Technical Component for performing – G0461</i>	\$63.10
G0461-26	<i>Professional Component for interpretation of-G0461</i>	\$33.83
G0462	Immunohistochemistry or immunocytochemistry, per specimen;each additional stain	\$74.92
G0462-TC	<i>Technical Component for performing – G0462</i>	\$61.13
G0462-26	<i>Professional Component for interpretation of-G0462</i>	\$13.79
57452	<b>Colposcopy</b> - Procedure by Physician	\$123.06
57452	<b>Colposcopy</b> -Facility Setting	\$104.66
57454	<b>Colposcopy with biopsy (s) of cervix and/or cervical curettage –</b> facility setting.	\$153.88
57454	<b>Colposcopy with biopsy (s) of cervix and/or cervical curettage</b> Procedure by Physician	\$172.28
57455	<b>Colposcopy with biopsy(s) of the cervix</b> -Facility Setting	\$125.88
57455	<b>Colposcopy with biopsy(s) of the cervix</b> -Procedure by Physician	\$160.67
57456	<b>Colposcopy with endocervical curettage</b> -Facility Setting	\$117.05
57456	<b>Colposcopy with endocervical curettage</b> -Procedure by Physician	\$151.50
57460	<b>Colposcopy of cervix with loop electrode biopsy(s) of the cervix</b> Facility Setting	\$184.23
57460	<b>Colposcopy of cervix with loop electrode biopsy(s) of the cervix</b> Procedure by Physician	\$316.14
57461	<b>Colposcopy with loop electrode conization of the cervix</b> -Facility Setting	\$212.70
57461	<b>Colposcopy with loop electrode conization of the cervix</b> -Procedure by Physician	\$357.93

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57500	<b>Biopsy</b> ,single or multiple, or local excision of lesion, with or without fulguration (separate procedure)-Facility Setting	\$85.84
57500	<b>Biopsy</b> ,single or multiple, or local excision of lesion, with or without fulguration (separate procedure)-Procedure by Physician	\$142.98
57505	<b>Endocervical curettage</b> (not done as part of a dilation and curettage)Procedure by Physician	\$114.89
57505	<b>Endocervical curettage</b> (not done as part of a dilation and curettage)-Facility setting	\$103.91
57520	<b>Conization of the Cervix:</b> with or without fulguration, with or without dilation and curretage -Facility Setting: <b>Reimbursement allowed only when Cone is performed for diagnostic reasons.</b>	\$311.54
57520	<b>Conization of the Cervix:</b> with or without fulguration, with or without dilation and curretage -Procedure by Physician: <b>Reimbursement allowed only when Cone is performed for diagnostic reasons.</b>	\$346.38
57522	<b>Loop electrode excision</b> -Facility Setting: <b>Reimbursement allowed only when LEEP is performed for diagnostic reasons.</b>	\$274.02
57522	<b>Loop electrode excision</b> -Procedure by Physician <b>Reimbursement allowed only when LEEP is performed for diagnostic reasons.</b>	\$295.55
58100	<b>Endometrial sampling</b> (biopsy) with or without endocervical sampling (biopsy), without cervical dilation, any method (separate procedure) <b>Reimbursement allowed only after an AGUS Pap result.</b>	\$122.58
58110	<b>Endometrial sampling</b> (biopsy) performed in conjunction with colposcopy (list separately in addition to code for primary procedure) <b>Reimbursement allowed only after an AGUS Pap result.</b>	\$54.00
19000	<b>Puncture aspiration of cyst of breast</b> -Facility setting	\$50.27
19000	<b>Puncture aspiration of cyst of breast</b> -Procedure by Physician	\$126.59
19001	<b>Puncture aspiration of cyst of breast</b> -each additional cyst- Surgical Facility	\$25.08
19001	<b>Puncture aspiration of cyst of breast</b> -each additional cyst-Procedure by Physician	\$30.57
19081	<b>Breast biopsy, with placement of localization device and imaging of biopsy specimen, percutaneous;stereotactic guidance; first lesion</b>	\$773.26
19081	<i>Facility setting for 19081</i>	\$194.75
19082	<b>Breast biopsy, with placement of localization device and imaging of biopsy specimen, percutaneous;stereotactic guidance; each additional lesion</b>	\$637.69
19082	<i>Facility setting for 19082</i>	\$97.53
19083	<b>Breast biopsy, with placement of localization device and imaging of biopsy specimen, percutaneous;ultrasonic guidance; first lesion</b>	\$747.87

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19083	<i>Facility setting for 19083</i>	\$183.05
19084	<b>Breast biopsy, with placement of localization device and imaging of biopsy specimen, percutaneous;ultrasonic guidance; each additional lesion</b>	\$613.24
19084	<i>Facility setting for-19084</i>	\$91.09
19085	<b>Breast biopsy, with placement of localization device and imaging of biopsy specimen, percutaneous;magnetic resonance guidance; first lesion</b>	\$1146.77
19085	<i>Facility setting for-19085</i>	\$214.41
19086	<b>Breast biopsy, with placement of localization device and imaging of biopsy specimen, percutaneous;magnetic resonance guidance; each additional lesion</b>	\$906.81
19086	<i>Facility setting for-19086</i>	\$105.96
19100	<b>Biopsy of breast-Needle Core-Surgical Facility</b>	\$81.56
19100	<b>Biopsy of breast-Needle Core-Surgical Procedure by Physician</b>	\$170.02
19101	<b>Incisional biopsy of breast-Surgical Facility</b>	\$1145.66
19101	<b>Incisional biopsy of breast-Surgical Procedure by Physician</b>	\$387.29
19120	<b>Excision of Cyst-Breast-Surgical Facility</b>	\$1145.66
19120	<b>Excision of Cyst-Breast-Procedure by Physician</b>	\$565.64
19125	<b>Excision of Breast Lesion-Identified by pre-op placement of radiological marker, single lesion-Surgical Facility</b>	\$1145.66
19125	<b>Excision of Breast Lesion-Identified by pre-op placement of radiological marker, single lesion-Procedure by Physician</b>	\$627.72
19126	<b>Excision of Breast Lesion-Facility setting</b>	\$1145.66
19126	<b>Excision of Breast Lesion-Identified by pre-operative placement of radiological marker, each additional.</b>	\$190.05
19281	Placement of breast localization device, percutaneous; mammographic guidance; first lesion	\$266.93
	<i>Facility setting for -19281</i>	\$115.84
19282	Placement of breast localization device, percutaneous; mammographic guidance; each additional lesion	\$186.78
19282	<i>Facility setting for-19282</i>	\$58.40
19283	Placement of breast localization device, percutaneous;stereotactic guidance;first lesion	\$300.84
19283	<i>Facility setting for-19283</i>	\$117.27
19284	Placement of breast localization device, percutaneous;stereotactic guidance; each additional lesion	\$226.48

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19284	<i>Facility setting for-19284</i>	\$59.35
19285	Placement of breast localization device, percutaneous;ultrasonic guidance;first lesion	\$572.54
19285	<i>Facility setting for-19285</i>	\$99.31
19286	Placement of breast localization device, percutaneous;ultrasonic guidance;each additional lesion	\$502.18
19286	<i>Facility setting for-19286</i>	\$49.70
19287	Placement of breast localization device, percutaneous;magnetic resonance;first lesion	\$956.90
19287	<i>Facility setting for-19287</i>	\$149.40
19288	Placement of breast localization device, percutaneous;magnetic resonance;each additional lesion	\$770.48
19288	<i>Facility setting for-19288</i>	\$74.14
10021	<b>Fine needle aspiration</b> -Without imaging guidance	\$138.45
10021	Facility setting for performing 10021	\$79.74
10022	<b>Fine needle aspiration</b> -With imaging guidance	\$157.29
10022	Facility setting for performing 10022	\$74.70
00400	Anesthesia for procedures on anterior integumentary system of chest	\$24.56 Conv. factor