2012 PHYSICIAN PROCEDURE CODE CHANGES

Effective for <u>dates of service</u> on or after <u>1/1/2012</u>, refer to the New Codes listed below for billing. The discontinued codes are not valid for billing dates of service after <u>12/31/2011</u>. See the **2012 FS** for Fees.

DISCONTINUE	ED CODES-			
NOT TO BE US	ED AFTER	<u>12/31/11:</u>		
<u>Drugs</u> -				
J7130				
Medicine-				
92120	92130	93720	93722	93875
94240	94260	94350	94360	94370
94720	94725			
<u>Radiology</u> -				
71090	73542	75722	75724	75940
77079	77083	78220	78223	78584
78585	78586	78587	78588	78591
78593	78594	78596		
Surgery-				
11975	11977	15170	15171	15175
15176	15300	15301	15320	15321
15330	15331	15335	15336	15340
15341	15360	15361	15365	15366
15400	15401	15420	15421	15430
15431	32095	32402	32500	32602
32603	32605	32657	32660	35548
35549	35551	35651	37620	49080
49081	64560	64577	64622	64623
64626	64627	69802		

NEW CODES- EFFECTIVE 1/1/2012:			
Drugs-	Description-		
J7131	HYPERTONIC SALINE SOLUTION, 1 ML		
Medicine-	Description-		
95885	NEEDLE ELECTROMYOGRAPHY, EACH		
,	EXTREMITY, WITH RELATED PARASPINAL		
	AREAS, WHEN PERFORMED, DONE WITH		
	NERVE CONDUCTION, AMPLITUDE AND		
	LATENCY/VELOCITY STUDY; LIMITED		
95886	NEEDLE ELECTROMYOGRAPHY, EACH		
	EXTREMITY, WITH RELATED PARASPINAL		
	AREAS, WHEN PERFORMED, DONE WITH		
	NERVE CONDUCTION, AMPLITUDE AND		
	LATENCY/VELOCITY STUDY; COMPLETE, FIVE		
	OR MORE MUSCLES STUDIED, INNERVATED		
	BY THREE OR MORE NERVES OR FOUR OR MORE SPINAL LEVELS		
95887	NEEDLE ELECTROMYOGRAPHY, NON-		
90007	EXTREMITY (CRANIAL NERVE SUPPLIED OR		
	AXIAL) MUSCLE(S) DONE WITH NERVE		
	CONDUCTION, AMPLITUDE AND		
	LATENCY/VELOCITY STUDY		
95938	SHORT-LATENCY SOMATOSENSORY EVOKED		
, , , , , , , , , , , , , , , , , , , ,	POTENTIAL STUDY, STIMULATION OF ANY/ALL		
	PERIPHERAL NERVES OR SKIN SITES,		
	RECORDING FROM THE CENTRAL NERVOUS		
	SYSTEM; IN UPPER AND LOWER LIMBS		
95939	CENTRAL MOTOR EVOKED POTENTIAL STUDY		
	(TRANSCRANIAL MOTOR STIMULATION); IN		
	UPPER AND LOWER LIMBS		
Dedielegy	Description		
Radiology-			
74174	COMPUTED TOMOGRAPHIC ANGIOGRAPHY, ABDOMEN AND PELVIS, WITH CONTRAST		
	MATERIAL(S), INCLUDING NONCONTRAST		
	IMAGES, IF PERFORMED, AND IMAGE		
	POSTPROCESSING		
78226	HEPATOBILIARY SYSTEM IMAGING,		
, 0220	INCLUDING GALLBLADDER WHEN PRESENT;		
78227	HEPATOBILIARY SYSTEM IMAGING,		
,022,	INCLUDING GALLBLADDER WHEN PRESENT;		
	WITH PHARMACOLOGIC INTERVENTION,		
	INCLUDING QUANTITATIVE MEASUREMENT(S)		
	WHEN PERFORMED		
78579	PULMONARY VENTILATION IMAGING (EG,		
	AEROSOL OR GAS)		
78582	PULMONARY VENTILATION (EG, AEROSOL OR		
	GAS) AND PERFUSION IMAGING		
78597	QUANTITATIVE DIFFERENTIAL PULMONARY		
	PERFUSION, INCLUDING IMAGING WHEN		
	PERFORMED		
78598	QUANTITATIVE DIFFERENTIAL PULMONARY		
	PERFUSION AND VENTILATION (EG, AEROSOL		
	OR GAS), INCLUDING IMAGING WHEN		
	PERFORMED		

NEW CODES-				
EFFECTIVE 1/1/2012:				
Surgery-	Description-			
15271	APPLICATION OF SKIN SUBSTITUTE GRAFT TO			
	TRUNK, ARMS, LEGS, TOTAL WOUND			
	SURFACE AREA UP TO 100 SQ CM; FIRST 25			
	SQ CM OR LESS WOUND SURFACE AREA			
15272	APPLICATION OF SKIN SUBSTITUTE GRAFT TO			
	TRUNK, ARMS, LEGS, TOTAL WOUND			
	SURFACE AREA UP TO 100 SQ CM; EACH			
	ADDITIONAL 25 SQ CM WOUND SURFACE			
15070	AREA, OR PART THEREOF			
15273	APPLICATION OF SKIN SUBSTITUTE GRAFT TO TRUNK, ARMS, LEGS, TOTAL WOUND			
	SURFACE AREA GREATER THAN OR EQUAL TO			
	100 SQ CM; FIRST 100 SQ CM WOUND			
	SURFACE AREA, OR 1% OF BODY AREA OF			
	INFANTS AND CHILDREN			
15274	APPLICATION OF SKIN SUBSTITUTE GRAFT TO			
10271	TRUNK, ARMS, LEGS, TOTAL WOUND			
	SURFACE AREA GREATER THAN OR EQUAL TO			
	100 SQ CM; EACH ADDITIONAL 100 SQ CM			
	WOUND SURFACE AREA, OR PART THEREOF,			
	OR EACH ADDITIONAL 1% OF BODY AREA OF			
	INFANTS AND CHILDREN, OR PART THEREOF			
15275	APPLICATION OF SKIN SUBSTITUTE GRAFT TO			
	FACE, SCALP, EYELIDS, MOUTH, NECK, EARS,			
	ORBITS, GENITALIA, HANDS, FEET, AND/OR			
	MULTIPLE DIGITS, TOTAL WOUND SURFACE			
	AREA UP TO 100 SQ CM; FIRST 25 SQ CM OR			
15276	LESS WOUND SURFACE AREA APPLICATION OF SKIN SUBSTITUTE GRAFT TO			
15270	FACE, SCALP, EYELIDS, MOUTH, NECK, EARS,			
	ORBITS, GENITALIA, HANDS, FEET, AND/OR			
	MULTIPLE DIGITS, TOTAL WOUND SURFACE			
	AREA UP TO 100 SQ CM; EACH ADDITIONAL			
	25 SO CM WOUND SURFACE AREA, OR PART			
	THEREOF			
15277	APPLICATION OF SKIN SUBSTITUTE GRAFT TO			
	FACE, SCALP, EYELIDS, MOUTH, NECK, EARS,			
	ORBITS, GENITALIA, HANDS, FEET, AND/OR			
	MULTIPLE DIGITS, TOTAL WOUND SURFACE			
	AREA GREATER THAN OR EQUAL TO 100 SQ			
	CM; FIRST 100 SQ CM WOUND SURFACE			
	AREA, OR 1% OF BODY AREA OF INFANTS AND CHILDREN			
15278	APPLICATION OF SKIN SUBSTITUTE GRAFT TO			
15270	FACE, SCALP, EYELIDS, MOUTH, NECK, EARS,			
	ORBITS, GENITALIA, HANDS, FEET, AND/OR			
	MULTIPLE DIGITS, TOTAL WOUND SURFACE			
	AREA GREATER THAN OR EQUAL TO 100 SQ			
	CM; EACH ADDITIONAL 100 SQ CM WOUND			
	SURFACE AREA, OR PART THEREOF, OR EACH			
	ADDITIONAL 1% OF BODY AREA OF INFANTS			
	AND CHILDREN, OR PART THEREOF			

NEW CODES- EFFECTIVE 1/1/2012:				
Surgery cont-	Description-			
32096	THORACOTOMY, WITH DIAGNOSTIC			
32090	BIOPSY(IES) OF LUNG INFILTRATE(S) (EG,			
	WEDGE, INCISIONAL), UNILATERAL			
32097	THORACOTOMY, WITH DIAGNOSTIC			
02077	BIOPSY(IES) OF LUNG NODULE(S) OR			
	MASS(ES) (ÉG, WEDGE, INCISIONAL),			
	UNILATERAL			
32098	THORACOTOMY, WITH BIOPSY(IES) OF			
	PLEURA			
32607	THORACOSCOPY; WITH DIAGNOSTIC			
	BIOPSY(IES) OF LUNG INFILTRATE(S) (EG,			
	WEDGE, INCISIONAL), UNILATERAL			
32608	THORACOSCOPY; WITH DIAGNOSTIC			
	BIOPSY(IES) OF LUNG NODULE(S) OR			
	MASS(ES) (EG, WEDGE, INCISIONAL), UNILATERAL			
32609	THORACOSCOPY; WITH BIOPSY(IES) OF			
52007	PLEURA			
32666	THORACOSCOPY, SURGICAL; WITH			
	THERAPEUTIC WEDGE RESECTION (EG,			
	MASS, NODULE), INITIAL UNILATERAL			
32667	THORACOSCOPY, SURGICAL; WITH			
	THERAPEUTIC WEDGE RESECTION (EG, MASS			
	OR NODULE), EACH ADDITIONAL RESECTION,			
	IPSILATERAL			
37619	LIGATION OF INFERIOR VENA CAVA			
49082	ABDOMINAL PARACENTESIS (DIAGNOSTIC OR			
	THERAPEUTIC); WITHOUT IMAGING			
40000	GUIDANCE			
49083	ABDOMINAL PARACENTESIS (DIAGNOSTIC OR			
40004	THERAPEUTIC); WITH IMAGING GUIDANCE			
49084	PERITONEAL LAVAGE, INCLUDING IMAGING GUIDANCE, WHEN PERFORMED			
64633	DESTRUCTION BY NEUROLYTIC AGENT,			
04033	PARAVERTEBRAL FACET JOINT NERVE(S),			
	WITH IMAGING GUIDANCE (FLUOROSCOPY			
	OR CT); CERVICAL OR THORACIC, SINGLE			
	FACET JOINT			
64634	DESTRUCTION BY NEUROLYTIC AGENT,			
	PARAVERTEBRAL FACET JOINT NERVE(S),			
	WITH IMAGING GUIDANCE (FLUOROSCOPY			
	OR CT); CERVICAL OR THORACIC, EACH			
	ADDITIONAL FACET JOINT			
64635	DESTRUCTION BY NEUROLYTIC AGENT,			
	PARAVERTEBRAL FACET JOINT NERVE(S),			
	WITH IMAGING GUIDANCE (FLUOROSCOPY			
	OR CT); LUMBAR OR SACRAL, SINGLE FACET			
64636	JOINT DESTRUCTION BY NEUROLYTIC AGENT,			
04030	PARAVERTEBRAL FACET JOINT NERVE(S),			
	WITH IMAGING GUIDANCE (FLUOROSCOPY			
	OR CT); LUMBAR OR SACRAL, EACH			
	ADDITIONAL FACET JOINT			
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