DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Medicare & Medicaid Services

[CMS-1512-PN]

RIN 0938-AO22

Medicare Program; Five-Year Review of Work Relative Value Units Under the Physician Fee Schedule and Proposed Changes to the Practice Expense Methodology

AGENCY: Centers for Medicare & Medicaid Services (CMS), HHS.

ACTION: Proposed notice.

SUMMARY: This proposed notice sets forth proposed revisions to work relative value units (RVUs) affecting payment for physicians' services. The statute requires that we review RVUs no less often than every 5 years. This is our third review of work RVUs since we implemented the physician fee schedule (PFS) on January 1, 1992. These revisions to work RVUs are proposed to be effective for services furnished beginning January 1, 2007. These revisions reflect changes in medical practice, coding changes, new data on relative value components, and the addition of new procedures that affect the relative amount of physician work required to perform each service as required by the statute. In addition, we are proposing revisions to our methodology for calculating practice expense (PE) RVUs, including changes based on supplemental survey data for PE. This revised methodology would be used to establish payment for services beginning January 1, 2007.

DATES: To be assured consideration, comments must be received at one of the addresses provided below, no later than 5 p.m. on Monday, August 21, 2006.

ADDRESSES: In commenting, please refer to file code CMS-1512-PN. Because of staff and resource limitations, we cannot accept comments by facsimile (FAX) transmission.

You may submit comments in one of four ways (no duplicates, please):

1. Electronically. You may submit electronic comments on specific issues in this regulation to http://www.cms.hhs.gov/eRulemaking. Click on the link "Submit electronic comments on CMS regulations with an open comment period." (Attachments should be in Microsoft Word, WordPerfect, or Excel; however, we prefer Microsoft Word.)

2. By regular mail. You may mail written comments (one original and two copies) to the following address ONLY:

Centers for Medicare & Medicaid Services, Department of Health and Human Services, Attention: CMS-1512-PN, P.O. Box 8014, Baltimore, MD 21244-8014.

Please allow sufficient time for mailed comments to be received before the close of the comment period.

3. By express or overnight mail. You may send written comments (one original and two copies) to the following address ONLY:

Centers for Medicare & Medicaid Services, Department of Health and Human Services, Attention: CMS-1512-PN, Mail Stop C4-26-05, 7500 Security Boulevard, Baltimore, MD 21244-1850.

4. By hand or courier. If you prefer, you may deliver (by hand or courier) your written comments (one original and two copies) before the close of the comment period to one of the following addresses. If you intend to deliver your comments to the Baltimore address, please call telephone number (410) 786–7195 in advance to schedule your arrival with one of our staff members.

Room 445–G, Hubert H. Humphrey Building, 200 Independence Avenue, SW., Washington, DC 20201; or 7500 Security Boulevard, Baltimore, MD 21244–1850.

(Because access to the interior of the HHH Building is not readily available to persons without Federal Government identification, commenters are encouraged to leave their comments in the CMS drop slots located in the main lobby of the building. A stamp-in clock is available for persons wishing to retain a proof of filing by stamping in and retaining an extra copy of the comments being filed.)

Comments mailed to the addresses indicated as appropriate for hand or courier delivery may be delayed and received after the comment period.

For information on viewing public comments, see the beginning of the SUPPLEMENTARY INFORMATION section. FOR FURTHER INFORMATION CONTACT: Diane Milstead, (410) 786–3355, or Gaysha Brooks, (410) 786–9649 SUPPLEMENTARY INFORMATION:

Submitting Comments: We welcome comments from the public on the proposed work RVUs set forth in Addendum C, the proposed practice expense methodology, and other issues set forth in this proposed notice to assist us in fully considering issues and developing policies. You can assist us by referencing the file code CMS–1512–PN and the specific "issue identifier" that precedes the section on which you choose to comment.

Inspection of Public Comments: All comments received before the close of the comment period are available for viewing by the public, including any personally identifiable or confidential business information that is included in a comment. We post all comments received before the close of the comment period on the following Web site as soon as possible after they are received: http://www.cms.hhs.gov/eRulemaking. Click on the link "Electronic Comments on CMS Regulations" on that Web site to view public comments.

Comments received timely will be available for public inspection as they are received, generally beginning approximately 3 weeks after publication of a document, at the headquarters of the Centers for Medicare & Medicaid Services, 7500 Security Boulevard, Baltimore, Maryland 21244, Monday through Friday of each week from 8:30 a.m. to 4 p.m. To schedule an appointment to view public comments, phone 1–800–743–3951.

Information on the PFS can be found on the CMS homepage. You can access this data by using the following directions:

- 1. Go to the following Web site http://www.cms.hhs.gov/ PhysicianFeeSched/.
- 2. Select "Physician Fee Schedule Federal Regulation Notices."

To assist readers in referencing sections contained in this preamble, we are providing the following table of contents.

Table of Contents

- I. Background
 - A. Legislative History
 - B. Published Changes to the Physician Fee Schedule
 - C. Current Proposed Notice
- D. The 5-Year Review Process
- II. Discussion of Comments and Decisions
- A. Review of Comments
- B. Discussion of Comments by Clinical Area
- 1. Dermatology and Plastic Surgery
- 2. Orthopedic Surgery
- 3. Gynecology, Urology, Pain Medicine, and Neurosurgery
- 4. Radiology, Pathology, and Other Miscellaneous Services
- 5. Evaluation and Management Services
- 6. Cardiothoracic Surgery
- 7. General, Colorectal and Vascular Surgery
- 8. Otolaryngology and Ophthalmology
- 9. HCPAC Codes
- C. Other Issues Under the 5-Year Review
- 1. Anesthesia Services
- 2. Discussion of Post-Operative Visits Included in the Global Surgical Packages
- 3. Codes Referred to CPT Editorial Panel from Five-Year Review of Work Relative Value Units
- 4. Budget Neutrality

- 5. Effect on Practice Expense Inputs Stemming From the 5-Year Review
- 6. Nature and Format of Comments on Work RVUs
- D. Resource-Based Practice Expense (PE) **RVUs**
- 1. Current Methodology
- 2. PE Proposed Methodology for CY 2006 3. Modifications to PE Proposals
- III. Collection of Information Requirements
- IV. Response to Comments V. Regulatory Impact Analysis
- Addendum A: Explanation and Use of Addendum B
- Addendum B: Relative Value Units and Related Information
- Addendum C: Codes With Work RVUs Subject to Comment

In addition, because of the many organizations and terms to which we refer by acronym in this proposed notice, we are listing these acronyms and their corresponding terms in alphabetical order below:

AAD American Academy of Dermatology American Academy of Neurology AANEM American Association of Neuromuscular and Electrodiagnostic Medicine

AAFP American Academy of Family Physicians

AAGP American Association for Geriatric Psychiatry

AAHCP American Academy of Home Care Physicians

AANS American Association of Neurological Surgeons

AAO American Academy of Ophthalmology

AAO-HNS American Academy of Otolaryngology-Head and Neck Surgery

AAOA American Academy of Otolaryngic Allergy

AAOS American Academy of Orthopaedic Surgeons

AAP American Academy of Pediatrics AAPM American Academy of Pain Medicine

AAPMR American Academy of Physical Medicine and Rehabilitation

AATS American Association for Thoracic Surgery

ACC American College of Cardiology

ACG American College of Gastroenterology ACNS American Clinical Neurophysiology Society

ACOG American College of Obstetricians and Gynecologists

ACR American College of Radiology

ACS American College of Surgeons AFROC Association of Freestanding Radiation Oncology Centers

AGA American Gastroenterological Association

AGS American Geriatric Society

AK Actinic keratoses

AMA American Medical Association

AMDA American Medical Directors Association

AOA American Optometric Association

American Society of Anesthesiologists Ambulatory surgical center

ASCRS American Society of Colon and **Rectal Surgeons**

ASGE American Society of Gastrointestinal Endoscopy

ASHA American Speech-Language-Hearing Association

ASPS American Society of Plastic Surgeons ASSH American Society for Surgery of the Hand

ASTRO American Society for Therapeutic Radiology and Oncology

AUA American Urological Association BBA 97 Balanced Budget Act of 1997 (Pub.

BBRA [Medicare, Medicaid and State Child Health Insurance Program] Balanced Budget Refinement Act of 1999 (Pub. L. 106-113)

BNF Budget neutrality factor

CAPU Coalition for the Advancement of Prosthetic Urology

Conversion factor

CNS Congress of Neurological Surgeons Clinical Practice Expert Panels

CPT Current Procedural Terminology CY Calendar year

DRG Diagnosis-Related Group

E/M Evaluation and management

FR Federal Register

HCPAC Health Care Professionals Advisory Committee

HCPCS Healthcare Common Procedure Coding System

HHS Health and Human Services

ICU Intensive care unit

IDTF Independent diagnostic testing facility IWPUT Intra-service work per unit of time JCAAI Joint Council of Allergy, Asthma, and Immunology

MMA Medicare Prescription Drug, Improvement, and Modernization Act of 2003 (Pub. L. 108-173)

MMSV Minimum multi-specialty visit MPC [the RUC's] Multi-Specialty Points of Comparison

NCQDIS National Coalition of Quality Diagnostic Imaging Services

Non-physician work pool NSQIP National Surgical Quality Improvement Program

Professional component

Practice Expense

PE/HR Practice expense per hour PEAC Practice Expense Advisory

Committee

PERC Practice Expense Review Committee PFS

Physician fee schedule Regulatory Flexibility Act RFA

RIA

Regulatory impact analysis

RN Registered nurse

RUC [AMA's Specialty Society] Relative [Value] Update Committee

RVU Relative value unit

SMS [AMA's] Socioeconomic Monitoring System

Skilled nursing facility

STS Society of Thoracic Surgeons

Society for Vascular Surgery

Technical component

VA [Department of] Veterans Affairs

I. Background

If you choose to comment on issues in this section, please include the caption "BACKGROUND" at the beginning of your comments.]

A. Legislative History

Since January 1, 1992, Medicare has paid for physicians' services under

section 1848 of the Social Security Act (the Act), "Payment for Physicians' Services." Section 1848 of the Act contains three major elements: (1) A fee schedule for the payment of physicians' services; (2) a sustainable growth rate for the rates of increase in Medicare expenditures for physicians' services; and (3) limits on the amounts that nonparticipating physicians can charge beneficiaries. The Act requires that payments under the fee schedule be based on national uniform relative value units (RVUs) based on the resources used in furnishing a service. Section 1848(c) of the Act requires that national RVUs be established for physician work, practice expense (PE), and malpractice expense.

Section 1848(c)(2)(B)(ii)(II) of the Act provides that adjustments in RVUs may not cause total physician fee schedule (PFS) payments for the year to differ by more than \$20 million from the amount that would have been paid had the adjustments not been made. If this tolerance is exceeded, we must make adjustments to the conversion factors (CFs) to preserve budget neutrality.

B. Published Changes to the Physician Fee Schedule

On an annual basis, we publish regulations relating to updates to the RVUs and revisions to the payment policies under the PFS. In the Calendar Year (CY) 2006 Physician Fee Schedule final rule with comment period that appeared in the Federal Register on November 21, 2005 (70 FR 70116) (hereinafter referred to as the CY 2006 PFS final rule with comment period), we finalized the CY 2005 interim physician work RVUs, issued new interim work RVUs for new and revised codes for CY 2006, and finalized several other payment policies related to the PFS. This final rule with comment also discussed the status of the third 5-Year Review of work RVUs.

C. Current Proposed Notice

This proposed notice sets forth proposed revisions to work RVUs affecting payment for physicians' services. Section 1848(c)(2)(B)(i) of the Act requires that we review RVUs no less often than every 5 years. We implemented the PFS effective for services furnished beginning January 1, 1992. The first 5-Year Review of work was initiated in December 1994 and was effective for services furnished beginning January 1, 1997. The second 5-Year Review of work was initiated in November 1999 and was effective for services furnished beginning January 1 2002. The third 5-Year Review of work was initiated in November 2004.

Revisions of physician work RVUs proposed in this proposed notice are subject to a 60-day public comment period. We will review public comments, make adjustments to our proposals in response to comments, as appropriate, and include revised values in our CY 2007 Physician Fee Schedule final rule with comment period, effective for services furnished beginning January 1, 2007.

D. The 5-Year Review Process

We initiated the third 5-Year Review by soliciting public comments on potentially misvalued work RVUs for all services in the CY 2005 Physician Fee Schedule final rule with comment period that appeared in the **Federal Register** on November 15, 2004 (69 FR 66370) and provided a 60-day comment period.

We received comments from approximately 35 specialty groups, organizations, and individuals involving over 500 Current Procedural Terminology (CPT) and Healthcare Common Procedure Coding System (HCPCS) codes. As explained in the CY 2006 PFS final rule with comment period (70 FR 70283), we shared these comments with the American Medical Association (AMA) Specialty Society Relative Value Update Committee (RUC). The RUC was formed in November 1991 and grew out of a series of discussions between the AMA and major national medical specialty societies. The work of the RUC is supported by the RUC Advisory Committee, which is made up of representatives of 100 specialty societies in the AMA's House of Delegates.

The RUC currently makes annual recommendations to us on RVUs for new and revised CPT codes. The RUC also provided recommendations on changes to the work RVUs for existing codes during the previous 5-Year Reviews. We believe that the RUC's participation was beneficial because the RUC is experienced in recommending RVUs for the codes that have been added to or revised by the CPT Editorial Panel since we implemented the PFS in 1992. By virtue of its multispecialty membership and consultation with specialty societies, the RUC involves the medical community in formulating its recommendations. For codes used primarily by nonphysician practitioners, the Health Care Professionals Advisory Committee (HCPAC), a companion to the RUC, has made recommendations to

As we stated in the previous 5-Year Reviews, we retain the responsibility for analyzing any comments and recommendations received, developing the proposed rule, evaluating the comments on the proposed rule, and deciding whether and how to revise the work RVUs for any given service.

After we sent the RUC the comments we received on potentially misvalued services, as well as a list of approximately 160 services that we had identified as being potentially misvalued, the RUC identified the specialty societies that expressed interest in making presentations concerning those services. To prepare for presentations to the RUC, most specialty societies compiled data using a standard survey instrument whereby respondents compared the surveyed service with similar "reference" services that have established, agreed upon work values. Respondents were asked to estimate: the work for the survey code; the time to perform the "pre-", "intra-", and "post-" service activities; and the technical skill, risk, and judgment involved with performing the service. Post-service activities were broken down into hospital and office visits and were assigned an appropriate evaluation and management (E/M) code by the respondent. Each specialty society selected the physician sample that was surveyed. A minimum of 30 responses was required by the RUC for the survey to be considered adequate.

For this 5-Year Review, the RÜC permitted a specialty society to use a "minisurvey" for some codes if the number of codes a specialty society was reviewing was extremely high. These minisurveys required less information from the respondent, but were similar in design. In addition, the RUC approved the use of information from the National Surgical Quality Improvement Program (NSQIP) database and the Society of Thoracic Surgeons (STS) national database in the valuation of some services.

The NSQIP was started by the Department of Veterans Affairs (VA) for quality improvement purposes in 1991 with 128 VA medical centers, but now includes a large volume of surgical procedures from non-VA medical centers as well. The total number of cases for VA and non-VA medical centers is greater than one million. The NSQIP database contains pre-, intra-, and post-operative data, including intra-service times and length of stay data.

The STS National database is a voluntary reporting system for the collection of outcomes data related to thoracic surgical services. This database currently contains over two million patient records collected from more than 450 practices (from 1995 through 2004). Over 70 percent of the hospitals currently performing heart surgeries in

the U.S. reportedly participate in this database.

Some specialty societies used a "building-block" approach to validate the survey results for surgical services. In constructing the building blocks, a service is divided into pre-, intra-, and post-service components. The preservice component consists of all services furnished before the physician makes the skin incision (for example, pre-operative evaluation and scrubbing); the intra-service component consists of the "skin-to-skin" time; and the postservice component includes immediate post-surgery services and subsequent hospital and office visits. Each component (or building block) is then assigned work RVUs. Pre-service and intra-service work RVUs are based on time and the intensity of the activities, and post-service work is based on the specified E/M service for each postoperative visit. These three values are then summed to compute "buildingblock" work RVUs.

The results of the surveys were reviewed and organized by the specialty societies and then presented to the RUC. The RUC used eight workgroups, comprised of RUC members, to evaluate a series of clinically related codes based on the survey results and additional discussion. The workgroups also evaluated the relative work (time and intensity) for each service compared to other services on the fee schedule. The workgroups submitted their recommendations to the full RUC, which then considered the workgroup reports and then sent the final RUC recommendations to us.

II. Discussion of Comments and Decisions

A. Review of Comments

As previously stated, we sent the RUC a list of codes for review. The RUC submitted work RVU recommendations for these codes, with the exception of the codes that were withdrawn or referred to the CPT Editorial Panel for further review or action, and one CPT code (32020) for which no specialty society expressed an interest in conducting a survey. In the future, we will consider an alternative method to re-evaluate codes when no specialties express an interest in conducting a survey and we would appreciate suggestions from commenters on what alternative methods could be used.

We analyzed all of the RUC recommendations by evaluating the methodology used by each workgroup to develop the recommendations, the recommended work RVUs, and the rationale for the recommendations.

When appropriate and feasible, if we had concerns about the application of a particular methodology, we assessed whether the recommended work RVUs were appropriate by using alternative methodologies.

In conducting our review of the RUC recommendations we considered whether: (1) The code was part of a completed survey process; (2) the methodology used by the specialty society followed the standard RUC process; (3) the survey respondents stated the work had or had not changed in the past 5 years; (4) databases (for example, STS, NSQIP, and Medicare diagnosis-related group (DRG)) were used in lieu of the standard RUC methodology or as a supplement to the standard methodology; and (5) the intraservice work per unit of time (IWPUT) calculation was used to determine work RVUs in lieu of the standard RUC process. (The IWPUT is derived from components of the "building-block" approach, described above, and is used as a measure of service intensity.) Although CMS recognizes that the work values of codes may change over time, it is the responsibility of the specialty society to present compelling evidence that a code is misvalued.

We have some concerns that many of the codes that were reviewed in the second 5-Year Review have been brought back again for further consideration. The main purpose of the 5-Year Review is to identify those services that need to be revalued because the work involved in performing the service has changed. Since there have been three opportunities for specialties to have services that are believed to be undervalued reviewed, we expect that, for the most part, only those services where there is compelling evidence of a change in the work will be considered for further review. However, because there has been little incentive for specialties to bring codes that may be overvalued for review, such services will still need to be identified for the next 5-Year Review.

Table 1, Five-Year Review of Work Relative Value Units, lists the codes reviewed during the 5-Year Review. This table includes the following information:

- *CPT/HCPCS Code*. This is the CPT or alphanumeric HCPCS code for a service.
- *Modifier*. A modifier -26 is shown if the work RVUs represent the professional component of the service.
- Description. This is an abbreviated version of the narrative description of the code.
- 2005 Work RVU. The work RVUs that appeared in the CY 2005 Physician Fee Schedule final rule with comment period are shown for each reviewed code.
- Requested Work RVU. This column identifies the work RVUs requested by the commenting specialty society or individual commenter. If we received more than one comment on a code, the code is listed more than once with the recommended RVUs. If the commenters did not recommend specific RVUs, we indicate this by "N/A". A "WD" (withdrawal) indicates that the commenter withdrew the request for review of a code and chose not to pursue review of the code under the 5-Year Review and that no RUC recommendation was received.
- RUC Recommendation. This column identifies the work RVUs recommended by the RUC. "CPT" indicates that the RUC referred this code to the AMA CPT Editorial Panel for review and clarification and recommended maintaining the current work RVUs. An "(a)" indicates the commenting specialty society withdrew the proposal, and therefore, the RUC recommends maintaining the current work RVUs. A "(b)" in this column indicates there was no RUC recommendation.

HCPAC Recommendation. This column identifies the work RVUs recommended by the HCPAC. An "(a)" indicates that the commenting specialty society withdrew the proposal; therefore, the HCPAC recommends maintaining the current work RVUs. A "(b)" in this column indicates there was no HCPAC recommendation.

• CMS Proposal. This column indicates whether we agreed with the RUC recommendation ("Agree"); we are instead proposing to maintain the present work RVUs ("Disagree"); we are proposing work RVUs higher than the RUC recommendation ("Disagree/+"); or

we are proposing work RVUs that are less than the RUC recommendation ("Disagree/-"). Codes for which we did not accept the RUC recommendation are discussed in greater detail following Table 1. A "(c)" in this column indicates that in the absence of a RUC/HCPAC recommendation we are proposing to maintain the present work RVUs.

• Proposed base work RVU. This column contains the 2007 proposed work RVUs. The proposed work RVUs for surgical services with a 10- or 90-day global period do not include the application of the RUC-recommended work values for E/M services. However, the additional work value attributed to the increase for E/M services included as part of the global period is reflected in the work RVUs contained in Addenda B and C of this proposed rule. (Note: ** denotes codes that were deleted for 2006.)

The following is a summary of our response to the RUC-recommended work RVUs for the 5-Year Review of work. We sent the RUC approximately 709 codes to review. The RUC referred 136 codes to the CPT Editorial Panel for review and 151 codes were withdrawn by the specialty societies. We accepted the RUC's recommended work RVUs for 299 of the services reviewed and disagreed with the RUC's recommended work RVUs for 123 of the services reviewed. Of the 123 services for which we did not accept the RUC's recommended work RVUs, we increased the work RVUs for 3 services, recommended maintaining the current work RVUs for 48 services, and decreased the work RVUs for 72 services. (Note: 12 CPT codes for nursing facility and rest home services that were referred to the AMA CPT Editorial Panel were deleted for 2007.)

Additionally, the HCPAC reviewed a total of 7 services as part of the 5-Year Review. Of the 7 services reviewed by the HCPAC, we accepted the HCPAC recommendations for 1 service, recommended maintaining the current work RVU for 1 service, decreased the work RVUs for 4 services, and 1 code was withdrawn by the specialty society.

TABLE 1: Five-Year Review of Work Relative Value Units

CPT/ HCPCS Code	Mod	Descriptor	2005 Work RVU	Requested Work RVU	RUC REC	HCPAC REC	CMS Proposal	Proposed Work RVU
00797		Anesth, Surgery for Obesity	8.00	11.00	11.00		Agree	11.00
10060		Drainage of skin abscess	1.17	1.50		1.50	Disagree	1.17
11040		Debride skin, partial	0.50	0.65		0.55	Disagree/-	0.48
11041		Debride skin, full	0.82	0.80		0.80	Disagree/-	0.60
11042		Debride skin/tissue	1.12	1.20		1.12	Disagree/-	0.80
11100		Biopsy, skin lesion	0.81	1.00	0.81		Agree	0.81
11400		Exc tr-ext b9+marg 0.5 <cm< td=""><td>0.85</td><td>1.13</td><td>0.85</td><td></td><td>Agree</td><td>0.85</td></cm<>	0.85	1.13	0.85		Agree	0.85
11401		Exc tr-ext b9+marg 0.6-1cm	1.23	1.43	1.23		Agree	1.23
11402		Exc tr-ext b9+marg 1.1-2 cm	1.51	1.80	1.40		Agree	1.40
11403		Exc tr-ext b9+marg 2.1-3 cm	1.79	2.20	1.79		Agree	1.79
11404		Exc tr-ext b9+marg 3.1-4 cm	2.06	2.08	2.06		Agree	2.06
11406		Exc tr-ext b9+marg >4.0cm	2.76	3.80	3.20		Agree	3.20
11420		Exc h-f-nk-sp b9+marg 0.5<	0.98	1.50	0.98		Agree	0.98
11421		Exc h-f-nk-sp b9+marg 0.6-1	1.42	2.15	1.42		Agree	1.42
11422		Exc h-f-nk-sp b9+marg 1.1-2	1.63	2.25	1.63		Agree	1.63
11423	—	Exc h-f-nk-sp b9+marg 2.1-3	2.01	2.24	2.01		Agree	2.01
11424		Exc h-f-nk-sp b9+marg 3.1-4	2.43	2.61	2.43		Agree	2.43
11426		Exc h-f-nk-sp b9+marg >4.0 cm	3.77	3.78	3.77		Agree	3.77
11440		Exc face-mm b9+marg 0.5 < cm	1.06	1.65	1.00		Agree	1.00
11441		Exc face-mm b9+marg 0.6-1 cm	1.48	1.83	1.48		Agree	1.48
11442		Exc face-mm b9+marg 1.1-2 cm	1.72	2.00	1.72		Agree	1.72
11443		Exc face-mm b9+marg 2.1-3 cm	2.29	2.73	2.29		Agree	2.29
11444		Exc face-mm b9+marg 3.1-4 cm	3.14	3.30	3.14		Agree	3.14
11446		Exc face-mm b9+marg >4 cm	4.48	4.50	4.48		Agree	4.48
11450		Removal, sweat gland lesion	2.73	WD	(a)		(c)	2.73
11451		Removal, sweat gland lesion	3.94	WD	(a)		(c)	3.94
11462		Removal, sweat gland lesion	2.51	WD	(a)		(c)	2.51
11463		Removal, sweat gland lesion	3.94	WD	(a)		(c)	3.94
11470		Removal, sweat gland lesion	3.25	WD	(a)		(c)	3.25
11471		Removal, sweat gland lesion	4.40	WD	(a)		(c)	4.40
11600		Exc tr-ext mlg+marg 0.5 <cm< td=""><td>1.31</td><td>1.60</td><td>1.31</td><td></td><td>Agree</td><td>1.31</td></cm<>	1.31	1.60	1.31		Agree	1.31
11601		Exc tr-ext mlg+marg 0.6-1cm	1.80	2.10	1.75		Agree	1.75
11602		Exc tr-ext mlg+marg 1.1-2cm	1.95	2.50	1.95		Agree	1.95
11603		Exc tr-ext mlg+marg 2.1-3 <cm< td=""><td>2.19</td><td>3.42</td><td>2.50</td><td></td><td>Agree</td><td>2.50</td></cm<>	2.19	3.42	2.50		Agree	2.50
11604		Exc tr-ext mlg+marg 3.1-4cm	2.40	3.80	2.85		Agree	2.85
11606		Exc tr-ext mlg+marg >4cm	3.42	5.25	4.70		Agree	4.70
11620		Exc h-f-nk-sp mlg+marg 0.5<	1.19	1.78	1.32		Agree	1.32
11621		Exc h-f-nk-sp mlg+marg 0.6-1	1.76	2.13	1.76		Agree	1.76
11622		Exc h-f-nk-sp mlg+marg 1.1-2	2.09	2.70	2.09		Agree	2.09
11623	1 .	Exc h-f-nk-sp mlg+marg 2.1-3	2.61	3.06	2.79		Agree	2.79
11624		Exc h-f-nk-sp mlg+marg 3.1-4	3.06	3.48	3.30		Agree	3.30
11626		Exc h-f-nk-sp mlg+marg >4cm	4.29	4.90	4.29		Agree	4.29
11640		Exc face-mm malig+marg 0.5<	1.35	1.85	1.35		Agree	1.35
11641	†	Exc face-mm malig+marg 0.6-1	2.16	2.50	1.85		Agree	1.85
11642		Exc face-mm malig+marg 1.1-2	2.59	2.50	2.30		Agree	2.30
	+	Exc face-mm malig+marg 2.1-3	3.10	3.60	3.10	<u> </u>	Agree	3.10
	ł							
11643	<u> </u>			4.61	4.02		Agree	4.02
		Exc face-mm malig+marg 3.1-4 Exc face-mm malig+marg>4	4.02 5.94	4.61 6.30	4.02 5.94		Agree Agree	4.02 5.94

CPT/ HCPCS Code	Mod	Descriptor	2005 Work RVU	Requested Work RVU	RUC REC	HCPAC REC	CMS Proposal	Proposed Work RVU
11960		Insert tissue expander (s)	9.07	WD	(a)		(c)	9.07
12052		Layer closure of wound(s)	2.77	3.20	2.77		Agree	2.77
13121		Repair of wound or lesion	4.32	4.56	4.32		Agree	4.32
14040		Skin tissue rearrangement	7.86	8.55	7.86	· · · · · ·	Agree	7.86
14060		Skin tissue rearrangement	8.49	9.10	8.49		Agree	8.49
15100		Skin split graft	9.04	9.00	9.04		Agree	. 9.04
15240		Skin full graft	9.03	9.40	9.03		Agree	9.03
15732		Muscle-skin graft, head/neck	17.81	18.25	CPT		CPT	17.81
15734		Muscle-skin graft, trunk	17.76	18.33	17.76		Agree	17.76
15831		Excise excessive skin tissue	12.38		CPT		CPT	12.38
17003		Destroy lesions, 2-14	0.15	0.55	0.07		Agree	0.07
17004		Destroy lesions, 15 or more	2.79	2.20	1.80		Disagree/-	1.58
17262		Destruction of skin lesions	1.58	1.70	1.58		Agree	1.58
17281		Destruction of skin lesions	1.72	1.80	1.72		Agree	1.72
17304	-	1 stage mohs, up to 5 spec	7.59	9.50	CPT		CPT	7.59
17305		2 stage mohs, up to 5 spec	2.85	6.00	CPT		CPT	2.85
19180		Removal of breast	8.79	15.25	14.67		Agree	14.67
19361		Breast reconstruction	19.23	WD	(a)		(c)	19.23
20600	<u> </u>	Drain/inject, joint/bursa	0.66	0.94	0.66		Agree	0.66
20610		Drain/inject, joint/bursa	0.79	1.80	0.79		Agree	0.79
20680	<u> </u>	Removal of support implant	3.34	6.50	5.86		Agree	5.86
20692		Apply bone fixation device	6.40	15.00	CPT		CPT	6.40
21145		Reconstruct midface, lefort	19.91	23.50	21.84		Agree	21.84
21146		Reconstruct midface, lefort	20.68	27.50	22.55		Agree	22.55
21147		Reconstruct midface, lefort	21.74	28.13	23.32		Agree	23.32
21365		Treat cheek bone fracture	14.93	WD	(a)		(c)	14.93
21366		Treat cheek bone fracture	17.74	WD	(a)		(c)	17.74
21395		Treat eye socket fracture	12.66	16.00	13.88		Agree	13.88
21432		Treat craniofacial fracture	8.60	WD	(a)		(c)	8.60
21435		Treat craniofacial fracture	17.22	WD	(a)		(c)	17.22
21436		Treat craniofacial fracture	28.00	WD	(a)		(c)	28.00
21470		Treat lower jaw fracture	15.32	WD	(a)		(c)	15.32
21556		Remove lesion neck/chest	5.56	15.50	CPT		CPT	5.56
21935		Remove tumor, back	17.93	WD	(a)		(c)	17.93
22520		Percut vertebroplasty thor	8.90	8.90	8.90		. Agree	8.90
22554		Neck spine fusion	18.59	16.40	16.40		Agree	16.40
22612		Lumbar spine fusion	20.97	22.58	22.00		Disagree	20.97
22840		Insert spine fixation device	12.52	12.52	12.52		Agree	12.52
23076		Removal of shoulder lesion	7.62	15.00	CPT		CPT	7.62
23200		Removal of collar bone	12.06	24.00	CPT		CPT	12.06
23210		Removal of shoulder blade	12.47	28.00	CPT		CPT	12.47
23220		Partial removal of humerus	14.54	28.00	CPT		CPT	14.54
23515		Treat clavicle fracture	7.40	N/A	CPT		CPT	7.40
23585		Treat scapula fracture	8.95	N/A	CPT		CPT	8.95
23615		Treat humerus fracture	9.34	N/A	CPT		CPT	9.34
23616		Treat humerus fracture	21.24	N/A	CPT	-	CPT	21.24
23630		Treat humerus fracture	7.34	N/A	CPT		CPT	7.34

CPT/ HCPCS Code	Mod	Descriptor	2005 Work RVU	Requested Work RVU	RUC REC	HCPAC REC	CMS Proposal	Proposed Work RVU
23670		Treat dislocation/fracture	7.89	N/A	CPT		CPT	7.89
23680		Treat dislocation/fracture	10.04	N/A	CPT		CPT	10.04
24076		Remove arm/elbow lesion	6.29	16.00	CPT		CPT	6.29
24077		Remove tumor of arm, elbow	11.74	22.00	CPT		CPT	11.74
24150		Extensive humerus surgery	13.25	30.00	CPT		CPT	13.25
24151		Extensive humerus surgery	15.56	WD	(a)		(c)	15.56
24152		Extensive radius surgery	10.04	25.00	CPT		CPT	10.04
24153		Extensive radius surgery	11.52	WD	(a)		(c)	11.52
24363		Replace elbow joint	18.46	21.00	21.07		Agree	21.07
24430		Repair of humerus	12.79	15.50	14.00		Agree	14.00
24545		Treat humerus fracture	10.44	N/A	CPT		CPT	10.44
24546		Treat humerus fracture	15.67	N/A	CPT		CPT	15.67
24575		Treat humerus fracture	10.64	N/A	CPT		CPT	10.64
24579		Treat humerus fracture	11.58	N/A	CPT		CPT	11.58
24635		Treat elbow fracture	13.17	N/A	CPT		CPT	13.17
24665		Treat radius fracture	8.13	N/A	CPT		CPT	8.13
24685		Treat ulnar fracture	8.79	N/A	CPT		CPT	8.79
25076		Removal forearm lesion deep	4.91	15.00	CPT		CPT	4.91
25077		Remove tumor, forearm/wrist	9.75	22.00	CPT		CPT	9.75
25170		Extensive forearm surgery	11.07	26.00	CPT		CPT	11.07
25447		Repair wrist joint(s)	10.35	10.35	10.35		Agree	10.35
25515		Treat fracture of radius	9.17	N/A	CPT	<u> </u>	CPT	9.17
25526		Treat fracture of radius	12.96	N/A	CPT		CPT	12.96
25545		Treat fracture of ulna	8.89	N/A	CPT		CPT	8.89
25574		Treat fracture radius & ulna	7.00	N/A	CPT		CPT	7.00
25575`		Treat fracture radius/ulna	10.43	N/A	CPT		CPT	10.43
25620		Treat fracture radius ulna	8.54	N/A	CPT		CPT	8.54
25628		Treat wrist bone fracture	8.42	N/A	CPT		CPT	8.42
26055		Incise finger tendon sheath	2.69	3.99	2.69		Agree	2.69
26160		Remove tendon sheath lesion	3.15	4.05	3.15		Agree	3.15
26600		Treat metacarpal fracture	1.96	2.40	2.40		Agree	2.40
26615		Treat metacarpal fracture	5.32	N/A	CPT	<u> </u>	CPT	5.32
26665		Treat thumb fracture	7.59	N/A	CPT		CPT	7.59
26685		Treat hand dislocation	6.97	N/A	CPT		CPT	6.97
26715		Treat knuckle dislocation	5.73	N/A	CPT		CPT	5.73
26735		Treat finger fracture, each	5.97	N/A	CPT		CPT	5.97
26746		Treat finger fracture, each	5.80	N/A	CPT		CPT	5.80
26765		Treat finger fracture, each	4.16	N/A	CPT		CPT	4.16
26785		Treat finger dislocation	4.20	N/A	CPT		CPT	4.20
26951	-	Amputation of finger/thumb	4.58	6.00	5.25		Agree	5.25
27048	<u> </u>	Remove hip/pelvis lesion	6.24	18.00	CPT	 	CPT	6.24
27049		Remove tumor, hip/pelvis	13.64	28.00	CPT	 	CPT	13.64
27076		Extensive hip surgery	22.09	40.00	CPT		CPT	22.09
27078	 	Extensive hip surgery	13.42	35.00	CPT		CPT	13.42
27130		Total hip arthroplasty	20.09	20.09	20.09		Disagree/-	15.96
27236		Treat thigh fracture	15.58	15.58	15.58		Disagree/-	12.77
27248		Treat thigh fracture	10.43	N/A	CPT		CPT	10.43

CPT/ HCPCS Code	Mod	Descriptor	2005 Work RVU	Requested Work RVU	RUC REC	HCPAC REC	CMS Proposal	Proposed Work RVU
27328		Removal of thigh lesion	5.56	17.00	CPT		CPT	5.56
27329		Remove tumor, thigh/knee	14.12	25.00	CPT		CPT	14.12
27365		Extensive leg surgery	16.25	30.00	CPT		CPT	16.25
27447		Total knee arthroplasty	21.45	21.45	21.45		Disagree/-	19.30
27465		Shortening of thigh bone	13.85	17.50	17.50		Agree	17.50
27470		Repair of thigh	16.05	16.05	16.05		Agree	16.05
27472		Repair/graft of thigh	17.69	19.82	CPT		CPT	17.69
27511		Treatment of thigh fracture	13.62	N/A	CPT		CPT	13.62
27513		Treatment of thigh fracture	17.89	N/A	CPT		CPT	17.89
27514		Treatment of thigh fracture	17.27	N/A	CPT		CPT	17.27
27519		Treat thigh fx growth plate	15.00	N/A	CPT		CPT	15.00
27535		Treat knee fracture	11.48	N/A	CPT		CPT	11.48
27540		Treat knee fracture	13.08	N/A	CPT		CPT	13.08
27556		Treat knee dislocation	14.39	N/A	CPT		CPT	14.39
27603		Drain lower leg lesion	4.93	WD	(a)		(c)	4.93
27615		Removel tumor, lower leg	12.54	23.00	CPT		CPT	12.54
27619		Remove lower leg lesion	8.39	16.00	CPT		CPT	8.39
27645		Extensive lower leg surgery	14.15	30.00	CPT		CPT	14.15
27646		Extensive lower leg surgery	12.64	25.00	CPT		CPT	12.64
27647		Extensive ankle/heel surgery	12.22	20.00	CPT		CPT	12.22
27709		Incision of tibia and fibula	9.94	19.00	16.50		Agree	16.50
27720		Repair of tibia	11.77	18.50	CPT		CPT	11.77
27766		Treatment of ankle fracture	8.35	N/A	CPT		CPT	8.35
27784		Treatment of fibula fracture	7.10	N/A	CPT		CPT	7.10
27792		Treatment of ankle fracture	7.65	N/A	CPT		CPT	7.65
27814		Treatment of ankle fracture	10.66	N/A	CPT		CPT	10.66
27822		Treatment of ankle fracture	10.98	N/A	CPT		CPT	10.98
27826	<u> </u>	Treat lower leg fracture	8.53	N/A	CPT		CPT	8.53
27827		Treat lower leg fracture	14.04	N/A	CPT		CPT	14.04
27828		Treat lower leg fracture	16.21	N/A	CPT		CPT	16.21
27829		Treat lower leg joint	5.48	N/A	CPT		CPT	5.48
27832		Treat lower leg dislocation	6.48	N/A	CPT		CPT	6.48
27880		Amputation of lower leg	11.83	13.75	13.75		Agree	13.75
28045		Excision of foot lesion	4.71	14.00	CPT		CPT	4.71
28415		Treat heel fracture	15.95	N/A	CPT		CPT	15.95
28445	-	Treat ankle fracture	15.60	N/A	CPT		CPT	15.60
28465		Treat mid foot fracture, each	7.00	N/A	CPT		CPT	7.00
28485		Treat metatarsal fracture	5.70	N/A	СРТ		CPT	5.70
28505		Treat big toe fracture	3.80	N/A	CPT		CPT	3.80
28525		Treat toe fracture	3.32	N/A	CPT		CPT	3.32
28555		Repair foot dislocation	6.29	N/A	CPT		CPT	6.29
28585		Repair foot dislocation	7.98	N/A	CPT		CPT	7.98
28615	<u> </u>	Repair foot dislocation	7.76	N/A	CPT		CPT	7.76
28645		Repair toe dislocation	4.21	N/A	СРТ		CPT	4.21
28675	T -	Repair toe dislocation	2.92	N/A	CPT		CPT	2.92
28805		Amputation thru metatarsal	8.38	11.25	11.25		Agree	11.25
29075		Application of forearm cast	0.77	0.89	0.77		Agree	0.77

CPT/ HCPCS Code	Mod	Descriptor	2005 Work RVU	Requested Work RVU	RUC REC	HCPAC REC	CMS Proposal	Proposed Work RVU
29580		Application of paste boot	0.57	0.60		0.60	Disagree/-	0.55
30520		Repair of nasal septum	5.69	7.13	6.27		Agree	7.13
31225		Removal of upper jaw	19.20	24.00	24.00		Agree	24.00
31230		Removal of upper jaw	21.91	28.00	28.00		Agree	28.00
31255		Removal of ethmoid sinus	6.95	WD	(a)		(c)	6.95
31360		Removal of larynx	17.05	28.00	28.00		Disagree/-	24.00
31365		Removal of larynx	24.12	37.00	37.00		Disagree/-	31.50
31367		Partial removal of larynx	21.83	28.00	27.36		Disagree/-	24.00
31368		Partial removal of larynx	27.05	36.00	36.00		Disagree/-	30.50
31370		Partial removal of larynx	21.35	25.00	25.00		Disagree/-	24.00
31375		Partial removal of larynx	20.18	25.00	25.00		Disagree/-	22.50
31380		Partial removal of larynx	20.18	25.00	25.00		Disagree/-	22.00
31382		Partial removal of larynx	20.49	28.00	28.00		Disagree/-	25.00
31390		Removal of larynx & pharynx	27.49	40.00	40.00		Disagree/-	35.00
31395		Reconstruct larynx & pharynx	31.04	44.00	44.00		Disagree/-	39.50
31575		Diagnostic laryngoscopy	1.10	1.53	1.10		Agree	1.53
31579		Diagnostic laryngoscopy	2.26	2.54	2.26		Agree	2.54
31622		Dx bronchoscope/wash	2.78	2.80	2.78		Agree	2.78
32020		Insertion of chest tube	3.97	N/A	(b)		(c)	3.29
32095		Biopsy through chest wall	8.35	WD	(a)		(c)	8.35
32141	<u> </u>	Remove treat lung lesions	13.98	25.48	23.90		Disagree	13.98
32442		Sleeve pneumonectomy	26.20	55.50	51.45		Disagree/-	32.86
32445		Removal of lung	25.05	62.69	57.74		Disagree/-	34.95
32484		Segmentectomy	20.66	25.27	23.25		Disagree	20.66
32486		Sleeve lobectomy	23.88	43.94	39.44		Disagree/-	28.40
32488		Complection pneumonectomy	25.67	40.97	38.95		Disagree/-	28.87
32540		Removal of lung lesion	14.62	28.44	26.42		Disagree/-	19.94
32651		Thoracoscopy, surgical	12.89	18.67	16.64		Disagree/-	14.26
32652		Thoracoscopy, surgical	18.63	27.73	26.35		Disagree/-	20.75
32653		Thoracoscopy, surgical	12.85	17.62	16.24		Disagree/+	18.05
32654		Thoracoscopy, surgical	12.42	20.34	17.73		Disagree/-	15.82
32655		Thoracoscopy, surgical	13.08	16.06	14.69		Disagree/-	13.59
32657		Thoracoscopy, surgical	13.63	12.97	11.90		Disagree	13.63
32662		Thoracoscopy, surgical	16.42	15.36	14.29		Disagree	16.42
32663		Thoracoscopy, surgical	18.44	24.57	23.00		Disagree	18.44
32665		Thoracoscopy, surgical	15.52	21.05	19.56		Disagree	15.52
32815		Close bronchial fistula	23.12	46.99	42.94		Disagree/-	31.17
33140		Heart vevascularize (Imr)	19.97	32.50	25.49		Disagree	19.97
33141		Heart Imr w/other procedure	4.83	2.43	2.43		Disagree	4.83
33208		Insertion of heart pacemaker	8.12	8.12	8.12		Agree	8.12
33300		Repair of heart wound	17.89	46.05	40.03		Disagree/-	25.09
33305		Repair of heart wound	21.41	74.23	70.21		Disagree/-	27.05
33400		Repair of aortic valve	28.46	40.30	38.33		Disagree/-	36.23
33405	-	Replacement of aortic valve	34.95	39.78	37.82	 	Disagree/-	36.64
33406		Repacement of aortic valve	37.44	51.14	49.18		Disagree/-	45.54
33410	-	Replacement of aortic valve	32.41	44.87	42.91		Disagree/-	35.36
33411		Replacement of aortic valve	36.20	63.36	56.91	 	Disagree/-	52.12

CPT/ HCPCS Code	Mod	Descriptor	2005 Work RVU	Requested Work RVU	RUC REC	HCPAC REC	CMS Proposal	Proposed Work RVU
33413		Replacement of aortic valve	43.43	63.09	56.19		Disagree/-	51.76
33414		Repair of aortic valve	30.30	40.00	36.52		Agree	36.52
33415		Revision, subvalvular tissue	27.11	37.00	34.58		Disagree	27.11
33416		Revise ventricule muscle	30.30	37.00	34.25		Agree	34.25
33425		Repair of mitral valve	26.96	52.53	45.97		Disagree/-	34.55
33426		Repair of mitral valve	32.95	41.86	39.78		Disagree/-	37.95
33427		Repair of mitral valve	39.94	44.35	41.82		Disagree	39.94
33430		Replacement of mitral valve	33.45	54.05	46.45		Disagree/-	45.57
33460		Revision of tricuspid valve	23.56	50.75	40.19		Disagree	23.56
33463		Valvuloplasty, tricuspid	25.58	57.01	50.93		Disagree/-	36.59
33464		Valvuloplasty, tricuspid	27.29	44.85	40.30		Disagree/-	26.78
33465		Replace tricuspid valve	28.75	51.80	45.72		Disagree	28.75
33474		Revision of pulmonary valve	23.01	39.41	36.39		Disagree	23.01
33475		Replacement, pulmonary valve	32.95	41.76	39.39		Disagree/+	41.97
33505	-	Repair artery w/tunnel	26.80	36.00	36.00		Agree	36.00
33510		CABG, vein, single-vein single	28.96	36.49	31.75		Disagree/-	30.37
33511		CABG, vein, two	29.96	39.96	35.22		Disagree/-	31.51
33512		CABG, vein, three	31.75	46.55	40.26		Disagree/-	35.16
33513		CABG, vein, four	31.95	47.94	41.65		Disagree/-	36.12
33514		CABG, vein, five	32.70	50.65	44.36		Disagree/-	36.93
33516		Cabg, vein, six or more	34.95	52.33	46.04		Disagree/-	38.39
33517		CABG, artery	2.57	3.36	3.36		Disagree	2.57
33518		CABG, artery-vein, two	4.84	7.41	7.41		Disagree	4.84
33519		CABG, artery-vein, three	7.11	9.91	9.91		Disagree	7.11
33521		CABG, artery-vein, four	9.39	12.01	12.01		Disagree	9.39
33522		CABG, artery-vein, five	11.65	13.53	13.53		Disagree	11.65
33523		CABG, art-vein, six or more	13.93	15.39	15.39			13.93
33530		Coronary artery, bypass/reop	5.85	9.78	9.78		Disagree	5.85
33533		CABG, arterial, single	29.96	32.66	30.85		Disagree/+	34.63
33534	-	CABG, arterial, two	32.15	38.79	36.98		Disagree/-	36.06
33535		CABG, arterial, three	34.45	43.66	41.85		Disagree/-	38.73
33536		 	37.44					
		Cabg, arterial, four or more Removal of heart lesion		47.34	45.53		Disagree/-	38.04
33542 33545		Repair of heart damage	28.81 36.72	50.28 64.12	44.20 52.49		Disagree	28.81 36.72
		Repair heart septum defect		28.52			Disagree	
33641			21.36		27.71	-	Disagree/-	26.70
33665		Repair of heart defects	28.56	32.98	32.98		Agree	32.98
33684		Repair heart septum defect	29.61	32.50	32.50		Agree	32.50
33688		Repair heart septum defect	30.57	33.98	32.88		Agree	32.88
33771		Repair great vessels defect	34.60	39.50	38.50		Agree	38.50
33779		Repair great vessels defect	36.16	42.00	41.00		Agree	41.00
33781	L	Repair great vessels defect	36.40	42.00	41.00		Agree	41.00
33860		Ascending aortic graft	37.94	62.54	55.45		Disagree/-	39.29
33863		Ascending aortic graft	44.93	61.85	55.10	 	Disagree	44.93
33877		Thoracoabdominal graft	42.54	64.04	64.04	ļ	Disagree/-	53.00
33945		Transplantation of heart	42.04	90.22	80.84		Disagree	42.04
34001		Removal of artery clot	12.89	16.25	16.25		Agree	16.25

CPT/ HCPCS Code	Mod	Descriptor	2005 Work RVU	Requested Work RVU	RUC REC	HCPAC REC	CMS Proposal	Proposed Work RVU
34471		Removal of vein clot	10.16	20.00	20.00		Agree	20.00
35081		Repair defect of artery	27.97	34.55	31.00		Agree	31,00
35102		Repair defect of artery	30.71	39.80	36.28		Disagree/-	34.00
35216		Repair blood vessel lesion	18.72	33.57	34.00		Agree	34.00
35381		Rechanneling of artery	15.79	N/A	CPT		CPT	15.79
35501		Artery bypass graft	19.16	N/A	CPT		CPT	19.16
35506		Artery bypass graft	19.64	23.75	23.75		Agree	23.75
35507		Artery bypass graft	19.64	N/A	CPT		CPT	19.64
35508		Artery bypass graft	18.62	25.00	25.00		Agree	25.00
35509		Artery bypass graft	18.04	N/A	CPT		CPT	18.04
35515		Artery bypass graft	18.62	25.00	25.00		Agree	25.00
35516		Artery bypass graft	16.30	23.00	23.00		Agree	23.00
35541		Artery bypass graft	25.76	N/A	CPT		CPT	25.76
35546		Artery bypass graft	25.50	N/A	CPT		CPT	25.50
35556		Artery bypass graft	21.73	31.58	27.25		Disagree/-	25.00
35566		Artery bypass graft	26.88	39.20	32.00		Disagree/-	30.00
35583		Vein bypass graft	22.34	32.26	26.00		Agree	26.00
35585		Vein bypass graft	28.35	39.42	32.00		Disagree/-	30.00
35600		Harvest artery for cabg	4.94	WD	(a)		(c)	4.94
35601		Artery bypass graft	17.47	N/A	CPT		CPT	17.47
35606		Artery bypass graft	18.68	21.00	21.00		Agree	21.00
35612		Artery bypass graft	15.74	WD	(a)		(c)	15.74
35616		Artery bypass graft	15.68	22.00	21.00		Agree	21.00
35641		Artery bypass graft	24.53	N/A	CPT		CPT	24.53
35642		Artery bypass graft	17.95	WD	(a)		(c)	17.95
35820		Explore chest vessels	12.86	38.76	32.24		Disagree/-	25.53
37720		Removal of leg vein	5.65	N/A	CPT		CPT	5.65
38100		Removal of spleen, total	14.48	19.53	18.00		Agree	18.00
38101		Removal of spleen, partial	15.29	18.00	18.00			18.00
38115		Repair of ruptured spleen	15.80	20.00	20.00		Agree	20.00
38700		Removal of lymph nodes, neck	8.23	12.00	12.00		Agree	12.00
38720		Removal of lymph nodes, neck	13.59	20.00	20.00		Agree Agree	20.00
38724		Removal of lymph nodes, neck	14.52	22.00	22.00		Agree	22.00
39220		Removal chest lesion	17.39	19.97	18.40		Disagree	17.39
39400		Visualization of chest	5.60	7.61	7.61			
41100		Biopsy of tongue	1.63	1.54	1.63		Disagree/	5.60
41120		Partial removal of tongue	9.76	10.00	9.76		Disagree/-	1.37
							Agree	9.76
41130		Partial removal of tongue	11.13	14.00	14.00		Agree	14.00
41135 41140		Tongue and neck surgery	23.06	27.00	27.00		Agree	27.00
		Removal of tongue	25.46	25.00	25.46		Agree	25.46
41145		Tongue removal, neck surgery	30.01	34.00	34.00		Agree	34.00
41150		Tongue, mouth, jaw surgery	23.01	26.50	26.50		Agree	26.50
41153		Tongue, mouth, neck surgery	23.73	34.00	34.00		Disagree/-	30.00
41155	<u></u>	Tongue, jaw, & neck surgery	27.68	40.00	40.00		Disagree/-	36.00
42120		Remove plate/lesion	6.16	11.00	11.00		Agree	11.00
42842		Extensive surgery of throat Extensive surgery of throat	8.75 14.29	11.00 16.10	11.00 16.10		Agree Agree	11.00 16.10

CPT/ HCPCS Code	Mod	Descriptor	2005 Work RVU	Requested Work RVU	RUC REC	HCPAC REC	CMS Proposal	Proposed Work RVU
42845		Extensive surgery of throat	24.25	32.00	32.00		Disagree/-	29.00
42890		Partial removal of pharynx	12.92	17.00	17.00		Agree	17.00
42892		Revision of pharyngeal walls	15.81	23.09	23.09		Agree	23.09
42894		Revision of pharyngeal walls	22.85	30.00	30.00		Agree	30.00
43108		Removal of esophagus	34.14	81.36	76.55		Disagree/-	57.20
43113		Removal of esophagus	35.22	75.56	73.23		Disagree/-	40.41
43116		Partial removal of esophagus	31.17	89.49	87.16	******	Disagree/-	65.85
43118		Partial removal of esophagus	33.15	65.89	61.08		Disagree/-	46.37
43121		Partial removal of esophagus	29.15	48.92	46.59		Disagree/-	41.80
43123		Partial removal of esophagus	33.15	80.95	76.14		Disagree/-	57.14
43124		Removal of esophagus	27.28	62.83	60.61		Disagree/-	56.51
43135		Removal of esophagus pouch	16.08	25.66	24.20		Disagree/-	20.52
43235		Uppr gi endoscopy, diagnosis	2.39	2.39	2.39		Agree	2.39
43246		Place gastrostomy tube	4.32	4.32	4.32		Agree	4.32
43496		Free jejunum flap, microvasc	0.00	WD	(a)		(c)	0.00
43620		Removal of stomach	29.99	31.00	31.00		Agree	31.00
43621		Removal of stomach	30.68	39.62	36.00		Agree	36.00
43622		Removal of stomach	32.48	35.00	36.50	l	Agree	36.50
43632		Removal of stomach, partial	22.56	30.57	32.00		Agree	32.00
43633		Removal of stomach, partial	23.07	32.16	30.00		Agree	30.00
43634		Removal of stomach, partial	25.08	33.50	33.50		Agree	33.50
43750		Place gastrostomy tube	4.48	5.00	4.48		Agree	4.48
43820		Fusion of stomach and bowel	15.35	20.45	20.00		Agree	20.00
43840		Repair of stomach lesion	15.54	22.45	20.00		Agree	20.00
44120		Removal of small intenstive	16.97	23.43	20.11	<u> </u>	Disagree/-	18.00
44130		Bowel to bowel fusion	14.47	21.27	20.87		Disagree/-	20.00
44140		Partial removal of colon	20.97	21.26	20.97		Agree	20.97
44141		Partial removal of colon	19.48	27.00	27.00		Agree	27.00
44143		Partial removal of colon	22.96	26.69	25.00		Agree	25.00
44144		Partial removal of colon	21.50	27.00	27.00	,	Agree	27.00
44145		Partial removal of colon	26.38	26.38	26.38		Agree	26.38
44146		Partial removal of colon	27.50	33.00	33.00		Agree	33.00
44147		Partial removal of colon	20.68	31.00	31.00		Agree	31.00
44150		Removal of colon	23.91	29.46	27.50		Agree	27.50
44151		Removal of colon/leostomy	26.84	31.00	32.00		Agree	32.00
44152		Removal of colon/leostomy	27.79	N/A	CPT		CPT	27.79
44153		Removal of colon/leostomy	30.54	N/A	CPT		CPT	30.54
44155		Removal of colon/leostomy	27.82	34.32	31.50		Agree	31.50
44156		Removal of colon/leostomy	30.74	34.50	34.50		Agree	34.50
44602		Suture, small intestine	16.01	24.35	22.00		Agree	22.00
44603		Suture, small intestine	18.63	25.00	25.00		Agree	25.00
44604		Suture, large intestine	16.01	WD	(a)		(c)	16.01
44605		Repair of bowel lesion	19.50	WD	(a)	 	(c)	19.50
45020		Drainage of rectal abscess	4.71	7.75	7.75		Agree	7.75
45300		Proctosigmoidoscopy w/bx	0.38	0.92	0.91		Disagree	0.38
45303		Proctosigmoidoscoy dilate	0.44	2.89	2.22		Disagree	0.44
45305		Procosigmoidoscopy w/bx	1.01	2.68	2.01		Disagree	1.01

CPT/ HCPCS Code	Mod	Descriptor	2005 Work RVU	Requested Work RVU	RUC REC	HCPAC REC	CMS Proposal	Proposed Work RVU
45307		Proctosigmoidoscopy fb	0.94	2.89	2.22		Disagree	0.94
45308		Proctosigmoidoscopy removal	0.83	2.68	2.01		Disagree	0.83
45309		Proctosigmoidoscopy removal	2.01	2.89	2.22		Disagree	2.01
45315		Proctosigmoidoscopy removal	1.40	2.89	2.22		Disagree	1.40
45317		Proctosigmoidoscopy bleed	1.50	1.09	1.08		Disagree	1.50
45320		Proctosigmoidoscopy ablate	1.58	3.10	2.43		Disagree	1.58
45321		Proctosigmoidoscopy volvul	1.17	3.25	2.76		Disagree	1.17
45327		Proctosigmoidoscopy w/slent	1.65	4.12	3.63		Disagree	1.65
45330		Diagnostic sigmoidoscopy	0.96	1.10	0.96		Agree	0.96
45378		Diagnostic colonoscopy	3.69	3.69	3.69		Agree	3.69
46040		Incision of rectal abscess	4.95	4.95	4.95		Agree	4.95
46045		Incision of rectal abscess	4.31	5.50	5.50		Agree	5.50
46060		Incision of rectal abscess	5.68	5.68	5.68		Agree	5.68
46270		Removal of anal fistula	3.71	4.50	4.50		Agree	4.50
46275		Removal of anal fistula	4.55	5.00	5.00		Agree	5.00
46280		Removal of anal fistula	5.97	5.97	5.97		Agree	5.97
46285		Removal of anal fistula	4.08	5.00	5.00		Agree	5.00
46600		Diagnostic anoscopy	0.50	0.58	0.49		Disagree	0.50
46604		Anoscopy and dilation	1.31	1.09	1.08		Disagree	1.31
46606		Anoscopy and biopsy	0.81	2.10	1.76		Disagree	0.81
46608		Anoscopy, remove for body	1.51	2.43	1.95		Disagree	1.51
46610		Anoscopy, remove lesion	1.32	2.65	1.95		Disagree	1.32
46611		Anoscopy	1.81	1.09	1.08		Disagree	1.81
46612		Anoscopy, remove lesions	2.34	2.81	2.14		Disagree	2.34
46614	_	Anoscopy, control bleeding	2.01	1.09	1.08		Disagree	2.01
46615		Anoscopy	2.68	1.20	1.18		Disagree	2.68
46760		Repair of anal sphincter	14.41	WD	(a)		(c)	14.41
46761		Repair of anal sphincter	13.82	WD	(a)		(c)	13.82
46762		Implant artificial sphincter	12.69	WD	(a)		(c)	12.69
47480		Incision of gallbladder	10.80	WD	(a)		(c)	10.80
47490		Incision of gallbladder	7.22	WD	(a)		(c)	7.22
47510		Insert catheter, bile duct	7.82	WD	(a)		(c)	7.82
47511		Insert bile duct drain	10.48	WD	(a)		(c)	10.48
47525		Change bile duct catheter	5.54	WD	(a)		(c)	5.54
47530		Revise/reinsert bile tube	5.84	WD	(a)		(c)	5.84
47562		Laparoscopic cholecystectomy	11.07	11.55	11.07		Agree	11.07
47600		Removal of gallbladder	13.56	17.62	15.88		Disagree/-	14.00
47760		Fuse bile ducts and bowel	25.81	37.50	34.75		Agree	34.75
47765		Fuse liver ducts and bowel	24.84	48.50	48.50		Agree	48.50
47780		Fuse bile ducts and bowel	26.46	40.00	38.75		Agree	38.75
47785		Fuse bile ducts and bowel	31.13	51.00	52.50		Agree	52.50
49000		Exploration of abdomen	11.66	N/A	CPT	ļ	CPT	11.66
49002		Reopening of abdomen	10.47	22.35	15.75		Agree	15.75
49010		Exploration behind abdomen	12.26	16.00	15.00		Agree	15.00
49200		Removal of abdominal lesion	10.23	WD	(a)		(c)	10.23
49201		Removal abdom lesion, complex	14.82	WD	(a)		(c)	14.82

CPT/ HCPCS Code	Mod	Descriptor	2005 Work RVU	Requested Work RVU	RUC REC	HCPAC REC	CMS Proposal	Proposed Work RVU
49505		Prp i/hern init reduc >5 yr	7.59	7.86	7.59		Agree	7.59
49906		Free omental flap, microvasc	0.00	WD	(a)		(c)	0.00
50590		Fragmenting of kidney stone	9.08	10.34	9.08		Agree	9.08
51720		Treatment of bladder lesion	1.96	1.96	1.50		Agree	1.50
51798		Us urine capacity measure	0.00	0.38	0.38		Disagree	0.00
52000		Cystoscopy	2.01	2.72	2.23		Agree	2.23
52204		Cystoscopy	2.37	3.08	2.59		Agree	2.59
52601		Prostatectomy (TURP)	12.35	15.50	14.00		Agree	14.00
53445		Insert uro/ves nck sphincter	14.04	WD	(a)		(c)	14.04
54150		Circumcision	1.81	N/A	CPT		CPT	1.81
54152		Circumcision	2.31	N/A	CPT		CPT	2.31
54400		Insert semi-rigid prosthesis	8.98	WD	(a)		(c)	8.98
54405		Insert multi-comp penis pros	13.41	WD	(a)		(c)	13.41
54411		Remv/replc penis pros, comp	15.98	WD	(a)		(c)	15.98
55700		Biopsy of prostate	1.57	2.83	2.58		Agree	2.58
56631		Extensive vulva surgery	16.18	WD	(a)		(c)	16.18
56632		Extensive vulva surgery	20.26	WD	(a)		(c)	20.26
56634		Extensive vulva surgery	17.85	WD	(a)		(c)	17.85
56637		Extensive vulva surgery	21.94	WD	(a)		(c)	21.94
56640		Extensive vulva surgery	22.14	WD	(a)		(c)	22.14
57160		Insert pessary/other device	0.89	1.60	0.89	<u> </u>	Agree	0.89
57240		Repair bladder & vagina	6.06	10.90	10.56		Agree	10.56
57250		Repair rectum & vagina	5.52	10.75	10.56		Agree	10.56
57260		Repair vagina	8.26	16.28	13.50		Agree	13.50
57265		Extensive repair of vagina	11.32	19.34	15.00		Agree	15.00
57288		Repair bladder defect	13.00	13.00	13.00		Agree	13.00
57500		Biopsy of cervix	0.97	1.35	1.20		Agree	1.20
57550		Removal of residual cervix	5.52	WD	(a)		(c)	5.52
57555		Remove cervix/repair vagina	8.94	WD	(a)		(c)	8.94
57556		Remove cervix, repair bowel	8.36	WD	(a)		(c)	8.36
58120		Dilation and curettage	3.27	3.27	3.27		Agree	3.27
58150		Total hysterectomy	15.22	18.00	15.98		Agree	15.98
58260		Vaginal hysterectomy	12.96	WD	(a)		(c)	12.96
58720		Removal of ovary/tube(s)	11.34	11.34	11.34		Agree	11.34
60600		Remove carotid body lesion	17.90	24.00	24.00		Agree	24.00
60605		Remove carotid body lesion	20.21	30.50	30.50		Agree	30.50
61154		Pierce skull & remove clot	14.97	14.97	14.97		Agree	14.97
61312		Open skull for drainage	24.53	27.00	27.00		Agree	27.00
61537		Removal of brain tissue	24.96	35.00	35.00		Agree	35.00
61538		Removal of brain tissue	26.77	38.00	38.00		Agree	38.00
61697		Brain aneurysm repr, complx	50.44	61.48	57.31		Agree	57.31
61698		Brain aneurysm repr, complx	48.34	65.00	64.03		Agree	64.03
61700		Brain aneurysm repr, simple	50.44	52.00	46.01		Agree	46.01
61702		Inner skull vessel surgery	48.34	60.00	54.28		Agree	54.28
62270		Spinal fluid tap, diagnostic	1.13	1.65	1.37		Agree	1.37
62350		Implant spinal canal cath	6.86	WD	(a)		(c)	6.86
62351		Implant spinal canal cath	9.99	WD	(a)		(c)	9.99

62360 Insert spine 62361 Implant spi 62362 Implant spi 62365 Removal s 63047 Removal o 63048 Remove sp 63075 Neck spine 63650 Implant net 63655 Implant net 63660 Revise/rem 63685 Inst/redo s 63688 Revise/rem 64550 Apply neur 64553 Implant net 64555 Implant net 64560 Implant net 64561 Implant net 64565 Implant net 64565 Implant net 64565 Implant net 64573 Implant net 64573 Implant net 64574 Implant net 64580 Implant net 64581 Implant net 64585 Revise/rem 64580 Implant net 64581 Implant net 64585 Revise/rem 64590 Inst/redo p 64595 Revise/rem 64702 Revise fing 64721 Carpal tuni 65420 Removal o 65426 Removal o 65850 Incision of 65900 Remove ey 66761 Revision of 66821 After catars 66984 Cataract st 67038 Strip retina 67221 Ocular pho	r	2005 Work RVU	Requested Work RVU	RUC REC	HCPAC REC	CMS Proposal	Proposed Work RVU
62361 Implant spi 62362 Implant spi 62365 Removal s 63047 Removal o 63048 Remove sp 63075 Neck spine 63650 Implant net 63655 Implant net 63660 Revise/rem 63685 Insrt/redo s 63688 Revise/rem 64550 Apply neur 64553 Implant net 64555 Implant net 64561 Implant net 64565 Implant net 64565 Implant net 64573 Implant net 64573 Implant net 64574 Implant net 64575 Implant net 64580 Implant net 64581 Implant net 64581 Implant net 64585 Revise/rem 64590 Insrt/redo p 64595 Revise/rem 64702 Revise fing 64721 Carpal tunt 65420 Removal o 65426 Removal o 65850 Incision of 65900 Remove ey 66761 Revision of 66821 After catara 66984 Cataract st 67038 Strip retina 67221 Ocular pho	spinal canal catheter	5.44	WD	(a)		(c)	5.44
62362 Implant spi 62365 Removal s 63047 Removal o 63048 Remove sp 63075 Neck spine 63650 Implant net 63655 Implant net 63660 Revise/rem 63685 Insrt/redo s 63688 Revise/rem 64550 Apply neur 64553 Implant net 64565 Implant net 64573 Implant net 64573 Implant net 64575 Implant net 64576 Implant net 64580 Implant net 64581 Implant net 64585 Revise/rem 64580 Implant net 64585 Revise/rem 64590 Insrt/redo p 64595 Revise/rem 64702 Revise fing 64721 Carpal tunt 65420 Removal o 65426 Removal o 65850 Incision of 65900 Remove ey 66761 Revision of 66821 After catara 66984 Cataract st 67038 Strip retina 67221 Ocular pho	e infusion device	2.62	WD	(a)		(c)	2.62
62365 Removal si 63047 Removal si 63047 Removal o 63048 Remove sp 63075 Neck spine 63650 Implant net 63655 Implant net 63660 Revise/rem 63685 Insrt/redo si 63688 Revise/rem 64550 Apply neur 64553 Implant net 64560 Implant net 64561 Implant net 64565 Implant net 64565 Implant net 64565 Implant net 64573 Implant net 64573 Implant net 64574 Implant net 64580 Implant net 64581 Implant net 64585 Revise/rem 64580 Implant net 64581 Revise/rem 64585 Revise/rem 64590 Insrt/redo p 64595 Revise/rem 64702 Revise fing 64721 Carpal tuni 65420 Removal o 65426 Removal o 65850 Incision of 65900 Remove ey 66761 Revision of 66821 After catars 66984 Cataract st 67038 Strip retina 67221 Ocular pho	ine infusion pump	5.41	WD	(a)		(c)	5.41
63047 Removal of 63048 Remove sp. 63075 Neck spine 63650 Implant net 63655 Implant net 63660 Revise/rem 63685 Insrt/redo sp. 63688 Revise/rem 64550 Apply neur 64553 Implant net 64560 Implant net 64561 Implant net 64565 Implant net 64565 Implant net 64565 Implant net 64573 Implant net 64573 Implant net 64573 Implant net 64574 Implant net 64575 Implant net 64575 Implant net 64580 Implant net 64581 Implant net 64581 Implant net 64581 Revise/rem 64590 Insrt/redo p 64595 Revise/rem 64702 Revise fing 64721 Carpal tuni 65420 Removal of 65420 Removal of 65850 Incision of 65900 Remove ey 66761 Revision of 66821 After catars 66984 Cataract st 67038 Strip retina 67221 Ocular pho	inal infusion pump	7.03	WD	(a)		(c)	7.03
63048 Remove sp 63075 Neck spine 63650 Implant net 63655 Implant net 63660 Revise/rem 63685 Insrt/redo s 63688 Revise/rem 64550 Apply neur 64553 Implant net 64560 Implant net 64561 Implant net 64565 Implant net 64565 Implant net 64565 Implant net 64565 Implant net 64566 Implant net 64573 Implant net 64577 Implant net 64580 Implant net 64581 Implant net 64585 Revise/rem 64580 Implant net 64585 Revise/rem 64590 Insrt/redo p 64595 Revise/rem 64702 Revise fing 64721 Carpal tunt 65420 Removal o 65426 Removal o 65850 Incision of 65900 Remove ey 66761 Revision of 66821 After catars 66984 Cataract st 67038 Strip retina 67221 Ocular pho	spine infusion device	5.41	WD	(a)	· · · · · · · · · · · · · · · · · · ·	(c)	5.41
63075 Neck spine 63650 Implant net 63655 Implant net 63660 Revise/rem 63685 Insrt/redo s 63688 Revise/rem 64550 Apply neur 64553 Implant net 64555 Implant net 64560 Implant net 64561 Implant net 64565 Implant net 64573 Implant net 64573 Implant net 64574 Implant net 64575 Implant net 64575 Implant net 64580 Implant net 64581 Implant net 64581 Implant net 64585 Revise/rem 64590 Insrt/redo p 64595 Revise/rem 64702 Revise fing 64702 Revise fing 64721 Carpal tunt 65420 Removal o 65426 Removal o 65850 Incision of 65900 Remove ey 66761 Revision of 66821 After catara 66984 Cataract st 67038 Strip retina 67221 Ocular pho	of spinal lamina	14.59	14.08	14.08		Agree	14.08
63650 Implant net 63655 Implant net 63660 Revise/rem 63685 Insrt/redo s 63688 Revise/rem 64550 Apply neur 64553 Implant net 64555 Implant net 64560 Implant net 64561 Implant net 64565 Implant net 64565 Implant net 64565 Implant net 64573 Implant net 64573 Implant net 64574 Implant net 64575 Implant net 64580 Implant net 64581 Implant net 64581 Implant net 64585 Revise/rem 64590 Insrt/redo p 64595 Revise/rem 64702 Revise fing 64721 Carpal tuni 65420 Removal o 65426 Removal o 65850 Incision of 65900 Remove ey 66761 Revision of 66821 After catara 66984 Cataract st 67038 Strip retina 67221 Ocular pho	pinal lamina add-on	3.26	3.60	3.55		Disagree	3.26
63655 Implant net 63660 Revise/rem 63685 Insrt/redo s 63688 Revise/rem 64550 Apply neur 64553 Implant net 64565 Implant net 64573 Implant net 64573 Implant net 64574 Implant net 64575 Implant net 64580 Implant net 64581 Implant net 64581 Implant net 64585 Revise/rem 64590 Insrt/redo p 64595 Revise/rem 64702 Revise fing 64721 Carpal tunt 65420 Removal o 65426 Removal o 65426 Removal o 65850 Incision of 65900 Remove ey 66761 Revision of 66821 After catara 66984 Cataract st 67038 Strip retina 67221 Ocular pho	e disk surgery	19.38	18.58	18.58		Agree	18.58
63660 Revise/rem 63685 Insrt/redo s 63688 Revise/rem 64550 Apply neur 64553 Implant neu 64555 Implant neu 64561 Implant neu 64565 Implant neu 64565 Implant neu 64573 Implant neu 64573 Implant neu 64574 Implant neu 64575 Implant neu 64580 Implant neu 64581 Implant neu 64581 Implant neu 64585 Revise/rem 64590 Insrt/redo p 64595 Revise/rem 64702 Revise fing 64702 Revise fing 64721 Carpal tuni 65420 Removal o 65426 Removal o 65426 Removal o 65850 Incision of 65900 Remove ey 66761 Revision of 66821 After catars 66984 Cataract su 67038 Strip retina 67221 Ocular pho	euroelectrodes	6.73	WD	(a)		(c)	6.73
63660 Revise/rem 63685 Insrt/redo s 63688 Revise/rem 64550 Apply neur 64553 Implant nei 64555 Implant nei 64561 Implant nei 64565 Implant nei 64565 Implant nei 64573 Implant nei 64573 Implant nei 64574 Implant nei 64575 Implant nei 64575 Implant nei 64580 Implant nei 64581 Implant nei 64581 Revise/rem 64580 Insrt/redo p 64585 Revise/rem 64590 Insrt/redo p 64595 Revise fing 64702 Revise fing 64702 Removal o 65420 Removal o 65420 Removal o 65420 Removal o 65421 After catars 66984 Cataract st 66984 Cataract st 67038 Strip retina	euroelectrodes	10.27	WD	(a)		(c)	10.27
63688 Revise/rem 64550 Apply neur 64553 Implant ner 64555 Implant ner 64560 Implant ner 64561 Implant ner 64565 Implant ner 64565 Implant ner 64573 Implant ner 64575 Implant ner 64576 Implant ner 64577 Implant ner 64580 Implant ner 64581 Implant ner 64585 Revise/rem 64590 Insrt/redo p 64595 Revise/rem 64702 Revise fing 64721 Carpal tunt 65420 Removal o 65426 Removal o 65426 Removal o 65850 Incision of 65900 Remove ey 66761 Revision of 66821 After catara 66984 Cataract st 67038 Strip retina 67221 Ocular pho	nove neuroelectrode	6.15	WD	(a)		(c)	6.15
63688 Revise/rem 64550 Apply neur 64553 Implant ner 64555 Implant ner 64560 Implant ner 64561 Implant ner 64565 Implant ner 64565 Implant ner 64573 Implant ner 64575 Implant ner 64576 Implant ner 64577 Implant ner 64580 Implant ner 64581 Implant ner 64585 Revise/rem 64590 Insrt/redo p 64595 Revise/rem 64702 Revise fing 64721 Carpal tunt 65420 Removal o 65426 Removal o 65426 Removal o 65850 Incision of 65900 Remove ey 66761 Revision of 66821 After catara 66984 Cataract st 67038 Strip retina 67221 Ocular pho	spine n generator	7.03	WD	(a)		(c)	7.03
64550 Apply neur 64553 Implant nei 64555 Implant nei 64560 Implant nei 64561 Implant nei 64565 Implant nei 64573 Implant nei 64575 Implant nei 64577 Implant nei 64580 Implant nei 64581 Implant nei 64585 Revise/rem 64590 Insrt/redo p 64702 Revise/rem 64702 Revise fing 64721 Carpal tuni 65420 Removal o 65850 Incision of 65900 Remove eg 66761 Revision of 66984 Cataract st 67038 Strip retina 67221 Ocular pho	move neuroreceiver	5.38	WD	(a)		(c)	5.38
64553 Implant net 64555 Implant net 64560 Implant net 64561 Implant net 64565 Implant net 64565 Implant net 64573 Implant net 64576 Implant net 64577 Implant net 64580 Implant net 64581 Implant net 64585 Revise/rem 64590 Insrt/redo p 64595 Revise/rem 64702 Revise fing 64702 Removal o 65420 Removal o 65426 Removal o 65426 Removal o 65850 Incision of 65900 Remove ey 66761 Revision of 66821 After catara 66984 Cataract st 67038 Strip retina		0.18	WD	(a)		(c)	0.18
64555 Implant net 64560 Implant net 64561 Implant net 64565 Implant net 64565 Implant net 64573 Implant net 64575 Implant net 64577 Implant net 64580 Implant net 64581 Implant net 64585 Revise/rem 64590 Insrt/redo p 64595 Revise/rem 64702 Revise fing 64721 Carpal tuni 65420 Removal o 65426 Removal o 65426 Removal o 65850 Incision of 65900 Remove ey 66761 Revision of 66821 After catara 66984 Cataract st 67038 Strip retina 67221 Ocular pho	euroelectrodes	2.31	WD	(a)		(c)	2.31
64560 Implant net 64561 Implant net 64565 Implant net 64573 Implant net 64575 Implant net 64577 Implant net 64580 Implant net 64581 Implant net 64585 Revise/rem 64590 Insrt/redo p 64595 Revise/rem 64702 Revise fing 64721 Carpal tunt 65420 Removal o 65426 Removal o 65426 Removal o 65850 Incision of 65900 Remove ey 66761 Revision of 66821 After catars 66984 Cataract st 67038 Strip retina 67221 Ocular pho	euroelectrodes	2.27	WD	(a)		(c)	2.27
64561 Implant net 64565 Implant net 64565 Implant net 64573 Implant net 64575 Implant net 64577 Implant net 64580 Implant net 64581 Implant net 64585 Revise/rem 64590 Insrt/redo p 64595 Revise/rem 64702 Revise fing 64702 Removal o 65420 Removal o 65426 Removal o 65426 Removal o 65850 Incision of 65900 Remove ey 66761 Revision of 66821 After catars 66984 Cataract st 67038 Strip retina 67221 Ocular pho	euroelectrodes	2.36	WD	(a)		(c)	2.36
64565 Implant net 64573 Implant net 64575 Implant net 64577 Implant net 64580 Implant net 64581 Implant net 64585 Revise/rem 64590 Insrt/redo p 64595 Revise/rem 64702 Revise fing 64721 Carpal tunt 65420 Removal o 65426 Removal o 65850 Incision of 65900 Remove ey 66761 Revision of 66821 After catara 66984 Cataract st 67038 Strip retina	euroelectrodes	6.73	WD	(a)		(c)	6.73
64573 Implant nee 64575 Implant nee 64577 Implant nee 64580 Implant nee 64581 Implant nee 64585 Revise/rem 64590 Insrt/redo p 64595 Revise/rem 64702 Revise fing 64721 Carpal tuni 65420 Removal o 65850 Incision of 65900 Remove eg 66761 Revision of 66821 After catara 66984 Cataract st 67038 Strip retina 67221 Ocular pho		1.76	WD	(a)		(c)	1.76
64575 Implant net 64577 Implant net 64580 Implant net 64581 Implant net 64585 Revise/rem 64590 Insrt/redo p 64595 Revise/rem 64702 Revise fing 64721 Carpal tuni 65420 Removal o 65850 Incision of 65900 Remove eg 66761 Revision of 66821 After catara 66984 Cataract st 67038 Strip retina 67221 Ocular pho		7.49	WD	(a)		(c)	7.49
64577 Implant net 64580 Implant net 64581 Implant net 64585 Revise/rem 64590 Insrt/redo p 64595 Revise/rem 64702 Revise fing 64721 Carpal tuni 65420 Removal o 65426 Removal o 65850 Incision of 65900 Remove ey 66761 Revision of 66984 Cataract st 67038 Strip retina 67221 Ocular pho		4.34	WD	(a)		(c)	4.34
64580 Implant net 64581 Implant net 64585 Revise/rem 64590 Insrt/redo p 64595 Revise/rem 64702 Revise fing 64721 Carpal tuni 65420 Removal o 65426 Removal o 65850 Incision of 65900 Remove eg 66761 Revision of 66821 After catara 66984 Cataract st 67038 Strip retina 67221 Ocular pho		4.61	WD	(a)		(c)	4.61
64581 Implant net 64585 Revise/rem 64590 Insrt/redo p 64595 Revise/rem 64702 Revise fing 64721 Carpal tuni 65420 Removal o 65426 Removal o 65850 Incision of 65900 Remove ey 66761 Revision of 66821 After catara 66984 Cataract st 67038 Strip retina 67221 Ocular pho		4.11	WD	(a)		(c)	4.11
64585 Revise/rem 64590 Insrt/redo p 64595 Revise/rem 64702 Revise fing 64721 Carpal tuni 65420 Removal o 65426 Removal o 65850 Incision of 65900 Remove eg 66761 Revision of 66821 After catara 66984 Cataract st 67038 Strip retina 67221 Ocular pho		13.48	WD	(a)		(c)	13.48
64590 Insrt/redo p 64595 Revise/rem 64702 Revise fing 64721 Carpal tuni 65420 Removal o 65426 Removal o 65850 Incision of 65900 Remove eg 66761 Revision of 66821 After catara 66984 Cataract st 67038 Strip retina 67221 Ocular pho	nove neuroelectrode	2.06	WD	(a)		(c)	2.06
64595 Revise/rem 64702 Revise fing 64721 Carpal tuni 65420 Removal o 65426 Removal o 65850 Incision of 65900 Remove ey 66761 Revision of 66821 After catara 66984 Cataract st 67038 Strip retina 67221 Ocular pho		2.40	WD	(a)		(c)	2.40
64702 Revise fing 64721 Carpal turn 65420 Removal o 65426 Removal o 65850 Incision of 65900 Remove ey 66761 Revision of 66821 After catara 66984 Cataract st 67038 Strip retina 67221 Ocular pho	nove neuroreceiver	1.73	WD	(a)		(c)	1.73
64721 Carpal tuni 65420 Removal o 65426 Removal o 65850 Incision of 65900 Remove ey 66761 Revision of 66821 After catara 66984 Cataract st 67038 Strip retina 67221 Ocular pho		4.22	6.00	5.52		` '	
65420 Removal o 65426 Removal o 65426 Removal o 65850 Incision of 65900 Remove ey 66761 Revision of 66821 After catara 66984 Cataract st 67038 Strip retina 67221 Ocular pho		4.22	5.00	4.28		Agree	5.52
65426 Removal o 65850 Incision of 65900 Remove ey 66761 Revision of 66821 After catara 66984 Cataract st 67038 Strip retina 67221 Ocular pho		4.26	5.00 WD			Agree	4.28
65850 Incision of 65900 Remove ey 66761 Revision of 66821 After catara 66984 Cataract st 67038 Strip retina 67221 Ocular pho				(a)		(c)	4.16
65900 Remove ey 66761 Revision of 66821 After catara 66984 Cataract st 67038 Strip retina 67221 Ocular pho		5.24	6.58	5.85		Agree	5.85
66761 Revision of 66821 After catara 66984 Cataract si 67038 Strip retina 67221 Ocular pho		10.50	11.93	11.14		Agree	11.14
66821 After catara 66984 Cataract st 67038 Strip retina 67221 Ocular pho		10.91	WD	(a)		(c)	10.91
66984 Cataract st 67038 Strip retina 67221 Ocular pho		4.06	4.06	4.06		Agree	4.06
67038 Strip retina 67221 Ocular pho		2.35	3.00	2.78		Agree	2.78
67221 Ocular pho		10.21	10.21	9.78		Agree	9.78
'		21.21	21.21	CPT		CPT	21.21
07000 T		4.00	4.00	3.45		Agree	3.45
	of retinal lesion	12.72	12.72	CPT		CPT	12.72
	ompress eye socket	11.11	16.82	16.82		Agree	16.82
	ompress eye socket	14.40	18.00	18.00		Agree	18.00
	t eye socket	0.79	1.44	1.44		Agree	1.44
	t eye socket	0.82	1.27	1.27		Agree	1.27
	t eye socket	0.61	1.40	1.40		Agree	1.40
67820 Revise eye	····	0.89	0.71	0.71	<u> </u>	Agree	0.71
67840 Remove ey 67904 Repair eye	yelid lesion	2.04 6.25	2.04 7.50	2.04 7.50		Agree Agree	2.04 7.50

CPT/ HCPCS Code	Mod	Descriptor	2005 Work RVU	Requested Work RVU	RUC REC	HCPAC REC	CMS Proposal	Proposed Work RVU
67911		Revise eyelid defect	5.26	7.30	7.30		Agree	7.30
67917		Repair eyelid defect	6.01	WD	(a)		(c)	6.01
67924		Repair eyelid defect	5.78	WD	(a)		(c)	5.78
67966		Revision of eyelid	6.56	8.50	8.50		Agree	8.50
68750		Create tear duct drain	8.65	WD	(a)		(c)	8.65
68840		Explore/irrigate tear ducts	1.25	1.25	1.25		Agree	1.25
69210		Remove impacted ear wax	0.61	0.82	0.61		Agree	0.61
70355		Panoramic x-ray of jaws	0.20	0.22	0.20		Agree	0.20
71010		Chest x-ray	0.18	0.18	0.18		Agree	0.18
71020		Chest x-ray	0.22	0.22	0.22		Agree	0.22
71260		Ct thorax w/dye	1.24	1.30	1.24		Agree	1.24
72192		Ct pelvis w/o dye	1.09	1.11	1.09		Agree	1.09
72193		Ct pelvis w/dye	1.16	1.20	1.16		Agree	1.16
73100		X-ray exam of wrist	0.16	0.16	0.16		Agree	0.16
73110		X-ray exam of wrist	0.17	0.17	0.17		Agree	0.17
73120		X-ray exam of hand	0.16	0.16	0.16		Agree	0.16
73130		X-ray exam of hand	0.17	0.17	0.17		Agree	0.17
73140		X-ray exam of finger(s)	0.13	0.13	0.13		Agree	0.13
74000		X-ray exam of abdomen	0.18	0.18	0.18		Agree	0.18
74020		X-ray exam of abdomen	0.27	0.27	0.27		Agree	0.27
74022		X-ray exam series, abdomen	0.32	0.32	0.32		Agree	0.32
74150		Ct abdomen w/o dye	1.19	1.23	1.19		Agree	1.19
74160		Ct abdomen w/dye	1.27	1.35	1.27		Agree	1.27
75552		Heart mri for morph w/o dye	1.60	2.23	CPT		CPT	1.60
75553		Heart mri for morph w dye	2.00	2.75	CPT		CPT	2.00
75554		Cardiac MRI/function	1.83	2.63	CPT		CPT	1.83
75555		Cardiac MRI/limited study	1.74	2.00	CPT		CPT	1.74
76075		Dxa bone density, axial	0.30	0.30	0.20		Agree	0.20
76519		Echo exam of eye	0.54	0.54	0.54		Agree	0.54
76700		Us exam, abdom, complete	0.81	0.81	0.81		Agree	0.81
76830		Transvaginal us, non-ob	0.69	0.69	0.69		Agree	0.69
77263		Radiation therapy planning	3.14	3.14	3.14		Agree	3.14
77280		Set radiation therapy field	0.70	0.70	0.70		Agree	0.70
77290		Set radiation therapy field	1.56	1.56	1.56		Agree	1.56
77300		Radiation therapy dose plan	0.62	0.62	0.62		Agree	0.62
77315		Teletx isodose plan complex	1.56	1.56	1.56		Agree	1.56
77331		Special radiation dosimetry	0.87	0.87	0.87		Agree	0.87
77334		Radiation treatment aid(s)	1.24	1.24	1.24		Agree	1.24
77470		Special radiation treatment	2.09	2.09	2.09		Agree	2.09
78306		Bone imaging, whole body	0.86	0.86	0.86		Agree	0.86
78315		Bone imaging, 3 phase	1.02	1.02	1.02		Agree	1.02
78465		Heart image (3d), multiple	1.46	1.46	1.46		Agree	1.46
78478		Heart wall motion add-on	0.62	0.62	0.50		Agree	0.50
78480		Heart function add-on	0.62	0.62	0.30		Agree	0.30
88309		Tissue exam by pathologist	2.28	3.00	2.80		Agree	2.80
88321		Microslide consultation	1.30	2.00	1.63		Agree	1.63
88323		Microslide consultation	1.35	2.31	1.83		Agree	1.83

88325 Comprehensive review of data 2.22 2.93 2.50 Agree 90465 Immune admin 1 in], < 8 yrs 0.17 N/A CPT CPT CPT 90466 Immune admin add in], < 8 y 0.15 N/A CPT CPT CPT 90467 Immune admin or or n, < 8 yrs 0.00 N/A CPT CPT CPT 90468 Immune admin or of n, add 1, < 8 y 0.00 N/A CPT CPT CPT GPT 90468 Immune admin or on, add 1, < 8 y 0.00 N/A CPT CPT CPT CPT GPT GPT	CPT/ HCPCS Code	Mod	Descriptor	2005 Work RVU	Requested Work RVU	RUC REC	HCPAC REC	CMS Proposal	Proposed Work RVU
90466	38325		Comprehensive review of data	2.22	2.93	2.50		Agree	2.50
90467	90465		Immune admin 1 inj, < 8 yrs	0.17	N/A	CPT		CPT	0.17
90468	90466		Immune admin addl inj, < 8 y	0.15	N/A	CPT		CPT	0.15
90473	90467		Immune admin o or n, < 8 yrs	0.00	N/A	CPT		CPT	0.00
90474	90468		Immune admin o/n, addl, < 8 y	0.00	N/A	CPT		CPT	0.00
92083 Visual field examination(s) 0.50 0.60 0.50 Agree 92226 Special eye exam, subsequent 0.33 0.33 0.33 0.33 Agree 92235 Eye exam with photos 0.81 0.81 0.81 Agree 92250 Eye exam with photos 0.44 0.44 0.44 0.44 Agree 92506 Speech/hearing evaluation 0.86 WD (a) (c) 92507 Speech/hearing therapy 0.52 WD (a) (c) 92508 Speech/hearing therapy 0.52 WD (a) (c) 92508 Speech/hearing therapy 0.26 WD (a) (c) 92510 Rehab for ear implant 1.50 WD (a) (c) 92516 Facial nerve function test 0.43 WD (a) (c) 92520 Laryngeal function studies 0.76 WD (a) (c) 92526 Oral function therapy 0.55 WD (a) (c) 92541 Spentaneous nystagmus test 0.40 WD (a) (c) 92542 Positional nystagmus test 0.33 WD (a) (c) 92543 Caloric vestibular test 0.10 WD (a) (c) 92544 Optokinetic nystagmus test 0.26 WD (a) (c) 92545 Oscillating tracking test 0.29 WD (a) (c) 92547 Supplemental electrical test 0.29 WD (a) (c) 92548 Posturography 0.50 WD (a) (c) 92559 Pure tone hearing test, air 0.00 WD (a) (c) 92559 Group audiometry, air 0.00 WD (a) (c) 92559 Group audiometry, air 0.00 WD (a) (c) 92559 Group audiometry, siren 0.00 WD (a) (c) 92559 Group audiometric testing 0.00 WD (a) (c) 92559 Group audiometry, screen 0.00 WD (a) (c) 92560 Bekesy audiometry, screen 0.00 WD (a) (c) 92564 Sisi hearing test 0.00 WD (a) (c) 92565 Stenger test, pure tone 0.00 WD (a) (c) 92566 Stenger test, pure tone 0.00 WD (a) (c) 92566 Stenger test, pure tone 0.00 WD (a) (c) 92566 Stenger test, pure tone 0.00 WD (a) (c) 92566 Stenger test, pure tone 0.00 WD (a) (c) 92566 Stenger test, pure tone 0.00 WD (a) (c) 92568 Acoustic reflex testing 0.00 WD (a) (c)	90473		Immune admin oral/nasal	0.00	WD	(a)		(c)	0.00
92083 Visual field examination(s) 0.50 0.60 0.50 Agree 92226 Special eye exam, subsequent 0.33 0.33 0.33 Agree 92235 Eye exam with photos 0.81 0.81 0.81 0.81 Agree 92250 Eye exam with photos 0.44 0.44 0.44 Agree 92506 Speech/hearing evaluation 0.86 WD (a) (c) 92507 Speech/hearing therapy 0.52 WD (a) (c) 92508 Speech/hearing therapy 0.26 WD (a) (c) 92510 Rehab for ear implant 1.50 WD (a) (c) 92516 Facial nerve function test 0.43 WD (a) (c) 92526 Laryngeal function studies 0.76 WD (a) (c) 92526 Oral function therapy 0.55 WD (a) (c) 92541 Spontaneous nystagmus test 0.40 WD (a) (c)	90474		Immune admin oral/nasal addl	0.00	WD	(a)		(c)	0.00
92226 Special eye exam, subsequent 0.33 0.33 0.33 0.33 Agree 92250 Eye exam with photos 0.81 0.81 0.81 Agree 92250 Eye exam with photos 0.44 0.44 0.44 Agree 92506 Speech/hearing evaluation 0.86 WD (a) (c) 92507 Speech/hearing therapy 0.52 WD (a) (c) 92508 Speech/hearing therapy 0.26 WD (a) (c) 92510 Rehab for ear implant 1.50 WD (a) (c) 92516 Facial nerve function test 0.43 WD (a) (c) 92526 Laryngeal function studies 0.76 WD (a) (c) 92526 Oral function therapy 0.55 WD (a) (c) 92541 Spontaneous nystagmus test 0.40 WD (a) (c) 92542 Positional nystagmus test 0.40 WD (a) (c) <td>92083</td> <td></td> <td>Visual field examination(s)</td> <td>0.50</td> <td>0.60</td> <td>0.50</td> <td></td> <td></td> <td>0.50</td>	92083		Visual field examination(s)	0.50	0.60	0.50			0.50
92235 Eye exam with photos 0.81 0.81 0.81 Agree 92250 Eye exam with photos 0.44 0.44 0.44 0.44 Agree 92506 Speech/hearing evaluation 0.86 WD (a) (c) 92507 Speech/hearing therapy 0.52 WD (a) (c) 92508 Speech/hearing therapy 0.26 WD (a) (c) 92510 Rehab for ear implant 1.50 WD (a) (c) 92516 Facial nerve function test 0.43 WD (a) (c) 92520 Laryngael function studies 0.76 WD (a) (c) 92524 Positional nystagmus test 0.40 WD (a) (c)	92226		Special eye exam, subsequent	0.33	0.33	0.33			0.33
92250 Eye exam with photos 0.44 0.44 0.44 Agree 92506 Speech/hearing evaluation 0.86 WD (a) (c) 92507 Speech/hearing therapy 0.52 WD (a) (c) 92508 Speech/hearing therapy 0.26 WD (a) (c) 92510 Rehab for ear implant 1.50 WD (a) (c) 92516 Facial nerve function test 0.43 WD (a) (c) 92520 Laryngeal function studies 0.76 WD (a) (c) 92526 Oral function therapy 0.55 WD (a) (c) 92541 Spontaneous nystagmus test 0.40 WD (a) (c) 92542 Positional nystagmus test 0.40 WD (a) (c) 92543 Caloric vestibular test 0.10 WD (a) (c) 92544 Optokinetic nystagmus test 0.26 WD (a) (c) 92545 </td <td>92235</td> <td></td> <td></td> <td>0.81</td> <td>0.81</td> <td>0.81</td> <td></td> <td></td> <td>0.81</td>	92235			0.81	0.81	0.81			0.81
92506 Speech/hearing evaluation 0.86 WD (a) (c) 92507 Speech/hearing therapy 0.52 WD (a) (c) 92508 Speech/hearing therapy 0.26 WD (a) (c) 92510 Rehab for ear implant 1.50 WD (a) (c) 92516 Facial nerve function test 0.43 WD (a) (c) 92526 Laryngeal function studies 0.76 WD (a) (c) 92526 Oral function therapy 0.55 WD (a) (c) 92541 Spontaneous nystagmus test 0.40 WD (a) (c) 92542 Positional nystagmus test 0.33 WD (a) (c) 92543 Caloric vestibular test 0.10 WD (a) (c) 92544 Optokinetic nystagmus test 0.26 WD (a) (c) 92545 Oscillating tracking test 0.26 WD (a) (c) 92546 </td <td>92250</td> <td></td> <td>· · · · · · · · · · · · · · · · · · ·</td> <td>0.44</td> <td>0.44</td> <td>0.44</td> <td></td> <td></td> <td>0.44</td>	92250		· · · · · · · · · · · · · · · · · · ·	0.44	0.44	0.44			0.44
92507 Speech/hearing therapy 0.52 WD (a) (c) 92508 Speech/hearing therapy 0.26 WD (a) (c) 92510 Rehab for ear implant 1.50 WD (a) (c) 92516 Facial nerve function test 0.43 WD (a) (c) 92520 Laryngeal function studies 0.76 WD (a) (c) 92526 Oral function therapy 0.55 WD (a) (c) 92541 Spontaneous nystagmus test 0.40 WD (a) (c) 92542 Positional nystagmus test 0.33 WD (a) (c) 92543 Caloric vestibular test 0.10 WD (a) (c) 92544 Optokinetic nystagmus test 0.26 WD (a) (c) 92545 Oscillating tracking test 0.23 WD (a) (c) 92547 Supplemental electrical test 0.00 WD (a) (c) 9254	92506		<u> </u>	0.86					0.86
92508 Speech/hearing therapy 0.26 WD (a) (c) 92510 Rehab for ear implant 1.50 WD (a) (c) 92516 Facial nerve function test 0.43 WD (a) (c) 92520 Laryngeal function studies 0.76 WD (a) (c) 92526 Oral function therapy 0.55 WD (a) (c) 92541 Spontaneous nystagmus test 0.40 WD (a) (c) 92542 Positional nystagmus test 0.40 WD (a) (c) 92543 Caloric vestibular test 0.10 WD (a) (c) 92544 Optokinetic nystagmus test 0.26 WD (a) (c) 92545 Oscillating tracking test 0.23 WD (a) (c) 92546 Sinusoidal tracking test 0.29 WD (a) (c) 92547 Supplemental electrical test 0.00 WD (a) (c) 92	92507		·	0.52	WD	` '			0.52
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	92569		Acoustic reflex decay test	0.00	WD	(a)		(c)	0.00
92571 Filtered speech hearing test 0.00 WD (a) (c)						•			0.00
92572 Staggered spondaic word test 0.00 WD (a) (c)			······································				ļ	 	0.00
92573 Lombard test 0.00 WD (a) (c)									0.00
								(c)	0.00

CPT/ HCPCS Code	Mod	Descriptor	2005 Work RVU	Requested Work RVU	RUC REC	HCPAC REC	CMS Proposal	Proposed Work RVU
92579		Visual audiometry (vra)	0.00	WD	(a)		(c)	0.00
92582		Conditioning play audiometry	0.00	WD	(a)		(c)	0.00
92583		Select picture audiometry	0.00	WD	(a)		(c)	0.00
92584		Electrocochleography	0.00	WD	(a)		(c)	0.00
92585		Auditor evoke potent, compre	0.50	WD	(a)		(c)	0.50
92586		Auditor evoke potent, limit	0.00	WD	(a)		(c)	0.00
92587		Evoked auditory test	0.13	WD	(a)		(c)	0.13
92588		Evoked auditory test	0.36	WD	(a)		(c)	0.36
92596		Ear protector evaluation	0.00	WD	(a)		(c)	0.00
92597		Oral speech device eval	0.86	WD	(a)		(c)	0.86
92601		Cochlear implt f/up exam < 7	0.00	WD	(a)		(c)	0.00
92602		Reprogram cochlear implt <7	0.00	WD	(a)		(c)	0.00
92603		Cochlear implt f/up exam 7>	0.00	WD	(a)		(c)	0.00
92604		Reprogram cochlear implt 7 >	0.00	WD	(a)		(c)	0.00
92605		Eval for nonspeech device rx	0.00	WD	(a)		(c)	0.00
92606		Non-speech device service	0.00	WD	(a)	<u> </u>	(c)	0.00
92607		Ex for speech device. rx, 1 hr	0.00	WD	(a)		(c)	0.00
92608		Ex for speech device rx, addl	0.00	WD	(a)		(c)	0.00
92609		Use of speech device service	0.00	WD	(a)		(c)	0.00
92610		Evaluate swallowing function	0.00	WD	(a)		(c)	0.00
92611		Motion fluoroscopy/swallow	0.00	WD	(a)		(c)	0.00
92612		Endoscopy swallow tst (fees)	1.27	WD	(a)		(c)	1.27
92614		Laryngoscopic sensory test	1.27	WD	(a)		(c)	1.27
92616		Fees w/laryngeal sense test	1.88	WD	(a)		(c)	1.88
92620		Auditory functon, 60 min	0.00	WD	(a)			0.00
92621		<u> </u>		WD		<u> </u>	(c)	
92625	<u> </u>	Auditory function, + 15 min Tinnitus assessment	0.00	WD	(a)		(c)	0.00
			0.00		(a)	·	(c)	0.00
93010		Electrocardiogram report	0.17	0.24	0.17		Agree	0.17
93015		Cardiovascular stress test	0.75	1.00	0.75	ļ	Agree	0.75
93018		Cardiovascular stress test	0.30	0.60	0.30		Agree	0.30
93325		Doppler color flow add-on	0.07	0.30	CPT		CPT	0.07
94010		Breathing capacity test	0.17	0.17	0.17		Agree	0.17
94657		Continued ventilator mgmt	0.83	1.37	CPT		CPT	0.83
95004		Percut allergy skin lests	0.00	0.03	CPT		CPT	0.00
95024		ld allergy test, drug/bug	0.00	0.04	CPT		CPT	0.00
95027		ld allergy litrate-airborne	0.00	0.03	CPT		CPT	0.00
95115		Immunotherapy, one injection	0.00	WD	(a)		(c)	0.00
95117		Immunotherapy injections	0.00	WD	(a)		(c)	0.00
95144		Antigen therapy services	0.06	0.12	0.06		Agree	0.06
95165		Antigen therapy services	0.06	0.12	0.06	<u> </u>	Agree	0.06
95816		Eeg, awake and drowsy	1.08	1.08	1.08		Agree	1.08
95819		Eeg, awake and asleep	1.08	1.29	1.08		Agree	1.08
95861		Muscle test, 2 limbs	1.54	1.68	1.54		Agree	1.54
95872		Muscle test, one fiber	1.50	3.00	3.00	<u> </u>	Disagree/-	2.00
95900		Motor nerve conduction test	0.42	0.55	0.42		Agree	0.42
95904		Sense nerve conduction test	0.34	0.55	0.34		Agree	0.34
95925	L	Somatosensory testing	0.54	0.79	0.54	L	Agree	0.54

CPT/ HCPCS Code	Mod	Descriptor	2005 Work RVU	Requested Work RVU	RUC REC	HCPAC REC	CMS Proposal	Proposed Work RVU
95926		Somatosensory testing	0.54	0.79	0.54 Agree		0.54	
95927		Somatosensory testing	0.54	1.00 0.54 Agree		0.54		
95953		EEG monitoring/computer	3.08	3.50	3.30		Agree	3.30
96105		Assessment of aphasia	0.00	WD		(a)	(c)	0.00
96567		Photodynamic tx, skin	0.00	WD	(a)	` '	(c)	0.00
97802		Medical nutrition, indiv. in	0.00	N/A	CPT		CPT	0.00
97803		Med nutrition, indiv, subseq	0.00	N/A	CPT		CPT	0.00
97804		Medical nutrition, group	0.00	N/A	CPT		CPT	0.00
99201		Office/outpatient visit, new	0.45	0.45	0.45		Agree	0.45
99202		Office/outpatient visit, new	0.88	0.88	0.88		Agree	0.88
99203		Office/outpatient visit, new	1.34	1.92	1.34		Agree	1.34
99204		Office/outpatient visit, new	2.00	2.78	2.30		Agree	2.30
99205		Office/outpatient visit, new	2.67	3.78	3.00		Agree	3.00
99211		Office/outpatient visit, est	0.17	0.17	0.17		Agree	0.17
99212		Office/outpatient visit, est	0.45	0.62	0.45		Agree	0.45
99213		Office/outpatient visit, est	0.67	1.40	0.92		Agree	0.92
99214		Office/outpatient visit, est	1.10	2.00	1.42		Agree	1.42
99215		Office/outpatient visit, est	1.77	2.70	2.00		Agree	2.00
99221		Initial hospital care	1.28	2.56	1.88		Agree	1.88
99222		Initial hospital care	2.14	3.43	2.56		Agree	2.56
99223		Initial hospital care	2.99	4.26	3.78		Agree	3.78
99231		Subsequent hospital care	0.64	1.00	0.76		Agree	0.76
99232		Subsequent hospital care	1.06	2.02	1.39		Agree	1.39
99233		Subsequent hospital care	1.51	3.03	2.00		Agree	2.00
99238		Hospital discharge day	1.28	1.50	1.28		Agree	1.28
99239		Hospital discharge day	1.75	2.30	1.90		Agree	1.90
99241		Office consultation	0.64	1.00	0.64		Agree	0.64
99242		Office consultation	1.29	1.58	1.34		Agree	1.34
99243		Office consultation	1.72	2.01	1.88		Agree	1.88
99244		Office consultation	2.58	3.02	3.02		Agree	3.02
99245		Office consultation	3.42	4.00	3.77		Agree	3.77
99251		Initial inpatient consult	0.66	1.15	1.00		Agree	1.00
99252		Initial inpatient consult	1.32	1.81	1.50		Agree	1.50
99253		Initial inpatient consult	1.82	2.50	2.27		Agree	2.27
99254		Initial inpatient consult	2.64	3.50	3.29		Agree	3.29
99255		Initial inpatient consult	3.64	4.50	4.00		Agree	4.00
99281		Emergency dept visit	0.33	0.50	0.45		Agree	0.45
99282		Emergency dept visit	0.55	1.00	0.88		Agree	0.88
99283		Emergency dept visit	1.24	2.00	1.34		Agree	1.34
99284		Emergency dept visit	1.95	3.14	2.56		Agree	2.56
99285		Emergency dept visit	3.06	4.19	3.80		Agree	3.80
99291		Critical care, first hour	3.99	5.10	4.50		Agree	4.50
99292		Critical care, addl 30 min	2.00	2.66	2.25		Agree	2.25
99301		Nursing facility Care	1.20	N/A	CPT		CPT	**
99302		Nursing facility Care	1.61	N/A	CPT		CPT	**
99303		Nursing facility Care	2.01	N/A	CPT		CPT	**
99311		Nursing fac care, subseq	0.60	N/A	CPT		CPT	**
99312		Nursing fac care, subseq	1.00	N/A	CPT		CPT	**
99313		Nursing fac care, subseq	1.42	N/A	CPT		CPT	**
99321		Rest home visit, new patient	0.71	N/A	CPT	ļ	CPT	**
99322		Rest home visit, new patient	1.01	N/A	CPT		CPT	**
99323		Rest home visit, new patient	1.28	N/A	CPT	L	CPT	**
99331		Rest home visit, est patient	0.60	N/A	CPT	ļ	CPT	**
99332		Rest home visit, est patient	0.80	N/A	CPT	_	CPT	**
99333		Rest home visit, est patient	1.00	N/A	CPT		CPT	**
G0270		MNT subs tx for change dx	0.00	N/A	CPT		CPT	0.00
G0271	1	Group MNT 2 or more 30 mins	0.00	N/A	CPT	I	CPT	0.00

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B. Discussion of Comments by Clinical Area

1. Dermatology and Plastic Surgery

[If you choose to comment on issues in this section, please include the caption "DISCUSSION OF COMMENTS-DERMATOLOGY AND PLASTIC SURGERY" at the beginning of your comments.]

a. Hidradenitis

The American Society of Plastic Surgeons (ASPS) submitted the hidradenitis services (CPT codes 11450, 11451, 11462, 11463, 11470 and 11471) as undervalued but, based on the very low response rate to the survey they conducted the ASPS withdrew these codes from the 5-Year Review.

b. Craniofacial Surgery

The ASPS originally requested that 10 craniofacial reconstruction and fracture

codes be reviewed. ASPS conducted a standard RUC survey for these services and, based on the low survey response rate, withdrew the following six CPT codes from the 5-Year Review: 21365, 21366, 21432, 21435, 21436, and 21470. ASPS presented survey data for the remaining four CPT codes listed in Table 2 to the RUC indicating there is compelling evidence that these codes had been valued based on an incorrect assumption regarding the value of the bone graft portion of each service.

TABLE 2

CPT code	Descriptor
21145	Reconstruction midface, LeFort I; single piece, segment movement in any direction, requiring bone grafts (includes obtaining autografts).
21146	Reconstruction midface, LeFort I; two pieces, segment movement in any direction, requiring bone grafts (includes obtaining autografts) (e.g., ungrafted unilateral alveolar cleft).
21147	Reconstruction midface, LeFort I; three or more pieces, segment movement in any direction, requiring bone grafts (includes obtaining autografts) (e.g., ungrafted bilateral alveolar cleft or multiple osteotomies).
21395	Open treatment of orbital floor blowout fracture; periorbital approach with bone graft (includes obtaining graft).

RUC Recommendations

The RUC agreed that the appropriate increment of work for the bone graft should be 50 percent of CPT code 20902, Bone graft, any donor area; major or large (7.54 work RVUs × 50 percent = 3.77 work RVUs). The RUC recommended that this increment of 3.77 be used and added to the base code for each of these services.

The RUC-recommended work RVUs for these CPT codes are as follows:

21145 = 21.84 work RVUs; 21146 = 22.55 work RVUs, 21147 = 23.32 work RVUs; and 21395 = 13.88 work RVUs.

CMS Proposed Valuation

We agree with the RUC recommendations for craniofacial surgery services.

c. Other Plastic Surgery Services

ASPS initially submitted five additional services for review (see Table

3). However, the specialty society was unable to obtain an adequate survey response rate for these codes and withdrew them from the RUC review. In addition, the RUC recommended that CPT code 15831 should be referred to the CPT Editorial Panel for review to capture the new population of patients using this service.

TABLE 3

CPT code	Descriptor
15831 19361 43496	J 77

We submitted four plastic surgery services for the 5-Year Review as services that had never been reviewed

by the RUC (see Table 4). In addition, CPT code 15732 was submitted as it had been valued as an inpatient service and it is now performed as an outpatient service.

CPT code	Descriptor
15100	Split-thickness autograft, trunk, arms, legs; first 100 sq cm or less, or one percent of body area of infants and children (except 15050).
15240	Full thickness graft, free, including direct closure of donor site, forehead, cheeks, chin, mouth, neck, axillae, genitalia, hands, and/or feet; 20 sq cm or less.
15732	Muscle, myocutaneous, or fasciocutaneous flap; head and neck (e.g., temporalis, masseter muscle, sternocleidomastoid, levator scapulae).
15734	Muscle, myocutaneous, or fasciocutaneous flap; trunk.

RUC Recommendations

The RUC was convinced that the survey data validated the current valuation of CPT codes 15100, 15240, and 15734. The RUC recommended that the current work RVUs be maintained for these CPT codes as follows: 15100 = 9.04 work RVUs; 15240 = 9.03 work RVUs; and 15734 = 17.76 work RVUs. The RUC reviewed and discussed the issue concerning the change in setting from inpatient to outpatient for CPT code 15732 and determined that this code describes two disparate

procedures; therefore, the RUC recommended that this CPT code be forwarded to the CPT Editorial Panel for review.

CMS Proposed Valuation

We agree with the RUC recommendations for these plastic surgery services.

d. Other Dermatology Services

The American Academy of Dermatology (AAD) and a pharmaceutical company submitted CPT code 96567, *Photodynamic therapy* by external application of light to destroy premalignant and/or malignant lesions of the skin and adjacent mucosa (e.g., lip) by activation of photosensitive drug(s), each phototherapy exposure session, for the 5-Year Review but, subsequent to discussions with the RUC regarding the need for potential CPT revisions, withdrew the code from the 5-Year Review.

We submitted the CPT codes for integumentary services in Table 5 for review because they had never been previously reviewed by the RUC.

TABLE 5

CPT code	Descriptor						
11100	Biopsy of skin, subcutaneous tissue and/or mucous membrane (including simple closure), unless otherwise listed; single lesion.						
12052	Layer closure of wounds of face, ears, eyelids, nose, lips and/or mucous membranes; 2.6 cm to 5.0 cm.						
13121	Repair, complex, scalp, arms, and/or legs; 2.6 cm to 7.5 cm.						
14040	Adjacent tissue transfer or rearrangement, forehead, cheeks, chin, mouth, neck, axillae, genitalia, hands and/or feet; defect 10 sq cm or less.						
14060	Adjacent tissue transfer or rearrangement, eyelids, nose, ears and/or lips; defect 10 sq cm or less.						
17003	Destruction (e.g., laser surgery, electrosurgery, cryosurgery, chemosurgery, surgical curettement), all benign or premalignant lesions (e.g., actinic keratoses) other than skin tags or cutaneous vascular proliferative lesions; second through 14 lesions, each (List separately in addition to code for first lesion).						
17262	Destruction, malignant lesion (e.g., laser surgery, electrosurgery, cryosurgery, chemosurgery, surgical curettement), trunk, arms or legs; lesion diameter 1.1 to 2.0 cm.						
17281	Destruction, malignant lesion (e.g., laser surgery, electrosurgery, cryosurgery, chemosurgery, surgical curettement), face, ears, eyelids, nose, lips, mucous membrane; lesion diameter 0.6 to 1.0 cm.						

We requested that CPT code 17003 be reviewed because we believe that advances in technology have likely resulted in a modification to the physician work required to accomplish the procedure. In discussions at the RUC meeting, we noted that new Medicare coverage policies related to actinic keratoses (AK) have increased the reporting of this service to describe cryosurgical destruction of AK. Standard RUC surveys were conducted for all of these services.

RUC Recommendations

Based on a review of the survey data, the RUC was convinced that the survey data validated the current valuation of the following services and recommended the work RVUs for these CPT codes be maintained as follows: 11100 = 0.81 work RVUs; 12052 = 2.77 work RVUs; 13121 = 4.32 work RVUs; 14040 = 7.86 work RVUs; 14060 = 8.49 work RVUs; 17262 = 1.58 work RVUs; and 17281 = 1.72 work RVUs.

For CPT code 17003, the RUC reviewed previous and current survey data and agreed that the application of cryosurgery to each lesion requires no more than two minutes of physician time. Therefore, the RUC recommended a work RVU of 0.07 for CPT code 17003. The RUC determined that the revision to

the work RVUs for CPT code 17003 created a rank order anomaly in this family of codes. In addition to referring codes in this family to the CPT Editorial Panel to clarify the code descriptors, the RUC in February 2006 also recommended a change to the work RVUs for CPT code 17004, Destruction (e.g., laser surgery, electrosurgery, cryosurgery, chemosurgery, surgical curettement), all benign or premalignant lesions (e.g., actinic keratoses) other than skin tags or cutaneous vascular proliferative lesions; 15 or more lesions. This was based on the understanding that when rank order anomalies were identified, the specialty could bring these additional codes forward for consideration for re-evaluation under the 5-Year Review at the next RUC meeting (that is, February 2006).

A standard RUC survey was conducted for this code and based on the survey responses, the specialty society recommended a change in the intra-service work descriptions to reflect a greater time based on their belief that the destruction of premalignant lesions requires more time than benign lesions. Thus, the intra-service period for CPT code 17004 was changed to 20 minutes which is twice as much as the time associated with the destruction of benign lesion in CPT code 17111,

Destruction (e.g., laser surgery, electrosurgery, cryosurgery, chemosurgery, surgical curettement), of flat warts, molluscum contagiosum, or milia; 15 or more lesions, of 10 minutes. The RUC agreed to this time change and recommended work RVUs of 1.80 for CPT code 17004.

CMS Proposed Valuation

We are in agreement with the RUCrecommended work RVUs for these services with the exception of CPT code 17004. For CPT code 17004, we believe that the work associated with benign and premalignant lesions is comparable and, therefore, the work RVUs for CPT code 17004 should be more similar to that of CPT code 17111, which is 0.92. Based on our proposed valuation of 17003 (the code used for 2-14 lesions), of 0.07 work RVUs, the 14th lesion would equal 0.91 work RVUs (0.07×13) lesions) plus 0.6 work RVUs for the initial lesion, that is, base code CPT code 17000, which is billed once in conjunction with 17003. We are proposing to value CPT code 17004, for 15 or more lesions, at 1.58 work RVUs by adding the 0.07 work RVU increment of 17003 and the 0.6 work RVUs for the base code, CPT code 17000, which is not billed in conjunction with CPT code 17004.

e. Mohs Surgery

We referred the Mohs surgery codes for review because this family of

services has never been surveyed and reviewed by the RUC (see Table 6).

TABLE 6

CPT code	Descriptor
17304	Chemosurgery (Mohs micrographic technique), including removal of all gross tumor, surgical excision of tissue specimens, mapping, color coding of specimens, microscopic examination of specimens by the surgeon, and complete histopathologic preparation including the first routine stain (e.g., hematoxylin and eosin, toluidine blue); first stage, fresh tissue technique, up to 5 specimens.
17305	Chemosurgery (Mohs micrographic technique), including removal of all gross tumor, surgical excision of tissue specimens, mapping, color coding of specimens, microscopic examination of specimens by the surgeon, and complete histopathologic preparation including the first routine stain (e.g., hematoxylin and eosin, toluidine blue); second stage, fixed or fresh tissue, up to 5 specimens).

The specialty society conducted surveys to collect data for these two codes. The workgroup then reviewed the history of these services, including the fact that the nomenclature for these services is not consistent with other integumentary coding conventions in CPT and that the RUC had previously indicated that the specialty society should work with the CPT Editorial Panel to redefine these services.

RUC Recommendations

The RUC recommended that these CPT codes be referred to the CPT Editorial Panel.

CMS Proposed Valuation

We will maintain the current valuation for these services pending the results of the review of the CPT Editorial Panel.

f. Excision of Lesions

We submitted all of the excision of lesion codes for review, noting that these services should be surveyed and reviewed by the RUC (see Table 7—benign: CPT codes 11400 through 11446, and malignant: CPT codes 11600 through 11646).

The work RVUs for the codes predominantly performed by the surgical specialties (CPT codes representing services to excise larger lesions) were all valued, with the exception of two CPT codes, by acceptable RUC surveys. However, there were no acceptable RUC surveys for the 18 services predominantly performed by the dermatologists (CPT codes representing services to excise smaller lesions) due to incomplete surveys and low response rates.

RUC Recommendations

The RUC agreed that the primary difference in the work between the family of codes for excision of benign lesions versus those codes for excision of malignant lesions (see Table 7) is in the pre-evaluation time (that is, additional planning, and discussions with the patient), the intensity of the

intra-service time, and the level of postoperative visit.

The workgroup used the RUC surveys to determine the work RVUs for those services performed by the surgeons and then applied the building-block approach using the IWPUT values of the codes primarily performed by the surgical specialties to derive IWPUT values and corresponding work RVUs for the CPT codes primarily performed by dermatology. (The IWPUT is derived by dividing the intra-service work by the intra-service time, and is used to measure the relative intensity of the work between services.)

As a result of the application of the building-block methodology to the codes without RUC acceptable surveys, the RUC recommended that 24 codes retain their current work RVUs, 5 codes have decreased work RVUs, and 7 codes have increased work RVUs. The specific RUC recommendations for these CPT codes are presented in Table 7.

TABLE 7:

BENIGN				MALIGNANT				
CPT CODE	Descriptor	RUC recommended WORK RVU		CPT CODE	Descriptor	RUC recommended WORK RVU		
11400	Excision, benign Lesion including margins, except skin tag (unless listed elsewhere), trunk, arms or legs; excised diameter 0.5 cm or less	0.85		11600	Excision, malignant lesion including margins, trunk, arms, or legs; excised diameter 0.5 cm or less	1.31		
11401	Excision, benign lesion including margins, except skin tag (unless listed elsewhere), trunk, arms or legs; excised diameter 0.6 to 1.0 cm	1.23		11601	Excision, malignant lesion including margins, trunk, arms, or legs; excised diameter 0.6 to 1.0 cm	1.75		
11402	Excision, benign lesion including margins, except skin tag (unless listed elsewhere), trunk, arms or legs; excised diameter 1.1 to 2.0 cm	1.40		11602	Excision, malignant lesion including margins, trunk, arms, or legs; excised diameter 1.1 to 2.0 cm	1.95		
11403	Excision, benign lesion including margins, except skin tag (unless listed elsewhere), trunk, arms or legs; excised diameter 2.1 to 3.0 cm	1.79		11603	Excision, malignant lesion including margins, trunk, arms, or legs; excised diameter 2.1 to 3.0 cm	2.50		
11404	Excision, benign lesion including margins, except skin tag (unless listed elsewhere), trunk, arms or legs; excised diameter 3.1 to 4.0 cm	2.06		11604	Excision, malignant lesion including margins, trunk, arms, or legs; excised diameter 3.1 to 4.0 cm	2.85		
11406	Excision, benign lesion including margins, except skin tag (unless listed elsewhere), trunk, arms or legs; excised diameter over 4.0 cm	3.20		11606	Excision, malignant lesion including margins, trunk, arms, or legs; excised diameter over 4.0 cm	4.70		

BENIGN				MALIGNANT				
CPT CODE	Descriptor	RUC recommended WORK RVU		CPT CODE	Descriptor	RUC recommended WORK RVU		
11420	Excision, benign lesion including margins, except skin tag (unless listed elsewhere), scalp, neck, hands, feet, genitalia; excised diameter 0.5 cm or less	0.98		11620	Excision, malignant lesion including margins, scalp, neck, feet, genitalia; excised diameter 0.5 cm or less	1.32		
11421	Excision, benign lesion including margins, except skin tag (unless listed elsewhere), scalp, neck, hands, feet, genitalia; excised diameter 0.6 to 1.0 cm	1.42		11621	Excision, malignant lesion including margins, scalp, neck, feet, genitalia; excised diameter 0.6 to 1.0 cm	1.76		
11422	Excision, benign lesion including margins, except skin tag (unless listed elsewhere), scalp, neck, hands, feet, genitalia; excised diameter 1.1 to 2.0 cm	1.63		11622	Excision, malignant lesion including margins, scalp, neck, feet, genitalia; excised diameter 1.1 to 2.0 cm	2.09		
11423	Excision, benign lesion including margins, except skin tag (unless listed elsewhere), scalp, neck, hands, feet, genitalia; excised diameter 2.1 to 3.0 cm	2.01		11623	Excision, malignant lesion including margins, scalp, neck, feet, genitalia; excised diameter 2.1 to 3.0 cm	2.79		
11424	Excision, benign lesion including margins, except skin tag (unless listed elsewhere), scalp, neck, hands, feet, genitalia; excised diameter 3.1 to 4.0 cm	2.43		11624	Excision, malignant lesion including margins, scalp, neck, feet, genitalia; excised diameter 3.1 to 4.0 cm	3.30		

	BENIGN		 MALIGNANT				
CPT	Descriptor	RUC recommended WORK RVU	CPT CODE	Descriptor	RUC recommended WORK RVU		
11426	Excision, benign lesion including margins, except skin tag (unless listed elsewhere), scalp, neck, hands, feet, genitalia; excised diameter over 4.0 cm	3.77	11626	Excision, malignant lesion including margins, scalp, neck, feet, genitalia; excised diameter over 4.0 cm	4.29		
11440	Excision, benign lesion including margins, except skin tag (unless listed elsewhere), face, ears, eyelids, nose, lips, mucous membrane; excised diameter 0.5 cm or less	1.00	11640	Excision, malignant lesion including margins, face, ears, eyelids, nose, lips; excised diameter 0.5 cm or less	1.35		
11441	Excision, benign lesion including margins, except skin tag (unless listed elsewhere), face, ears, eyelids, nose, lips, mucous membrane; excised diameter 0.6 to 1.0 cm	1.48	11641	Excision, malignant lesion including margins, face, ears, eyelids, nose, lips; excised diameter 0.6 to 1.0 cm	1.85		
11442	Excision, benign lesion including margins, except skin tag (unless listed elsewhere), face, ears, eyelids, nose, lips, mucous membrane; excised diameter 1.1 to 2.0 cm	1.72	11642	Excision, malignant lesion including margins, face, ears, eyelids, nose, lips; excised diameter 1.1 to 2.0 cm	2.30		
11443	Excision, benign lesion including margins, except skin tag (unless listed elsewhere), face, ears, eyelids, nose, lips, mucous membrane; excised diameter 2.1 to 3.0 cm	2.29	11643	Excision, malignant lesion including margins, face, ears, eyelids, nose, lips; excised diameter 2.1 to 3.0 cm	3.10		

BENIGN				MALIGNANT			
CPT CODE	Descriptor	RUC recommended WORK RVU	-	CPT CODE	Descriptor	RUC recommended WORK RVU	
11444	Excision, benign lesion including margins, except skin tag (unless listed elsewhere), face, ears, eyelids, nose, lips, mucous membrane; excised diameter 3.1 to 4.0 cm	3.14		11644	Excision, malignant lesion including margins, face, ears, eyelids, nose, lips; excised diameter 3.1 to 4.0 cm	4.02	
11446	Excision, benign lesion including margins, except skin tag (unless listed elsewhere), face, ears, eyelids, nose, lips, mucous membrane; excised diameter over 4.0 cm	4.48		11646	Excision, malignant lesion including margins, face, ears, eyelids, nose, lips; excised diameter over 4 cm	5.94	

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CMS Proposed Valuation

We are in agreement with the RUC recommendations for the excision of lesions services.

2. Orthopedic Surgery

[If you choose to comment on issues in this section, please include the caption "DISCUSSION OF COMMENTS—ORTHOPEDIC SURGERY" at the beginning of your comments.]

a. Tumor Procedures

The American Academy of Orthopaedic Surgeons (AAOS) submitted CPT codes in the following three families of tumor procedures for review. (See Table 8, Table 9, and Table 10.)

TABLE 8.—FAMILY 1—EXCISION OF DEEP SOFT TISSUE MASS

CPT code	Description
21556	Excision, soft tissue tumor, shoulder area; deep, subfascial, or intramuscular. Excision, tumor, soft tissue of upper arm or elbow area; deep (subfascial or intramuscular). Excision, tumor, soft tissue of forearm and/or wrist area; deep (subfascial or intramuscular). Excision, tumor, pelvis and hip area; deep, subfascial, intramuscular. Excision, tumor, thigh or knee area, deep, subfascial, or intramuscular. Excision, tumor, leg or ankle area; deep (subfascial or intramuscular).

TABLE 9.—FAMILY 2—RADICAL RESECTION OF SOFT TISSUE SARCOMA

CPT code	Description
27049 27329	Radical resection of tumor (e.g., malignant neoplasm), soft tissue of forearm and/or wrist area. Radical resection of tumor, soft tissue of pelvis and hip area (e.g., malignant neoplasm).

TABLE 10.—FAMILY 3—RADICAL RESECTION OF BONE SARCOMA

CPT code	Description
23210 23220 24150	Radical resection of tumor (e.g., malignant neoplasm), soft tissue of back or flank. Radical resection for tumor; clavicle. Radical resection for tumor; scapula. Radical resection of bone tumor, proximal humerus. Radical resection for tumor, shaft or distal humerus. Radical resection for tumor, shaft or distal humerus; with autograft (includes obtaining graft).

TABLE 10.—FAMILY 3—RADICAL RESECTION OF BONE SARCOMA—Continued

CPT code	Description
24152	Radical resection for tumor, radial head or neck.
24153	Radical resection for tumor, radial head or neck; with autograft (includes obtaining graft).
25170	Radical resection for tumor, radius or ulna.
27076	Radical resection of tumor or infection; ilium, including acetabulum, both pubic rami, or ischium and acetabulum.
27078	Radical resection of tumor or infection; ischial tuberosity and greater trochanter of femur.
27365	Radical resection of tumor, bone, femur or knee.
27645	Radical resection of tumor, bone; tibia.
27646	Radical resection of tumor, bone; fibula.
27647	Radical resection of tumor; talus or calcaneus.

The specialty subsequently withdrew CPT codes 21935, 24151, and 24153 from the 5-Year Review. A minisurvey methodology was used for all three families of codes.

RUC Recommendations

Based on a review of the survey results for the codes in Families 1 and 2, the RUC recommended referring these codes to the CPT Editorial Panel for clarification. The RUC indicated that the survey data from the specialty society described a hospitalized patient as the typical patient. However, our data indicates that the typical patient is not hospitalized and that this inconsistency could be the result of ambiguous CPT descriptors.

For the services in Family 3, the RUC discussion focused on the issue of whether there may also be different patient populations covered by each of these codes.

The RUC also recommended referring the codes in Family 3 to the CPT Editorial Panel for clarification.

CMS Proposed Valuation

We will maintain the current valuation for these services pending the results of the review by the CPT Editorial Panel.

b. Trauma Procedures

The AAOS submitted the following trauma procedure codes for review (see Table 11). Standard RUC surveys of these services were conducted.

TABLE 11

CPT code	Description
20680 20692	Removal of implant; deep (e.g., buried wire, pin, screw, metal band, nail, rod or plate). Application of a multiplane (pins or wires in more than one plane), unilateral, external fixation system (e.g., Ilizarov, Monticelli type).
27470	Repair of nonunion or malunion, humerus; without graft (e.g., compression technique). Osteoplasty, femur; shortening (excluding 64876). Repair, nonunion or malunion, femur, distal to head and neck; without graft (e.g., compression technique). Repair, nonunion or malunion, femur, distal to head and neck; with iliac or other autogeneous bone graft (includes obtain-
27709 27720	ing graft). Osteotomy; tibia and fibula. Repair of nonunion or malunion, terriur, distar to nead and neck, with mac or other autogeneous bone graft (includes obtaining graft). Osteotomy; tibia and fibula. Repair of nonunion or malunion, tibia; without graft, (e.g., compression technique).

RUC Recommendations

Based on a review of the compelling evidence, the RUC made the following recommendations.

For CPT code 20680, the RUC agreed that the intra-operative time for this code is misvalued based on the significant changes in physician work for the removal of deep implants due to changes in technology. Using the survey's 25th percentile value for the work RVUs along with the 25th percentile value for intra-service time, and adjusting for the fact that this procedure is typically performed in an outpatient setting, the RUC recommended a work RVU of 5.86 for this service.

For CPT code 24430, the workgroup did not believe that the current work value for CPT code 24430 accounts for all the work typically involved with this service. This is based on the survey's physician time and visit data and a comparison to CPT code 24515, *Open treatment of humeral shaft fracture with plate/screws, with or without cerclage,* which is a less complex procedure than CPT code 24430. The RUC recommended a work RVU of 14.00 and an intra-service time of 102 minutes for this service, which was the 25th percentile for work of the survey data.

Based on a comparison to CPT code 27506, Open treatment of femoral shaft fracture, with or without external fixation, with insertion of intramedullary implant, with or without and/or locking screws, the workgroup determined that the current work RVUs for CPT code 27465, do not fully account for the work typically involved in shortening the femur because it typically includes the insertion of an intermedullary nail. However, the workgroup believed that CPT code 27465 should be valued lower than the reference service code, CPT code 27454,

Osteotomy, multiple, with realignment on intramedullary rod, femoral shaft (e.g., Sofield type procedure), which has a work RVU of 17.53, and is a greater intensity procedure. The RUC-recommended work RVU for CPT code 27645 was 17.50, based on the median of the survey data.

Based on a review of the survey data, the workgroup did not believe that there was compelling evidence to change the work RVU for CPT code 27470. Therefore, the RUC recommended that the current work RVU of 16.05 be maintained for this service. However, the workgroup also recommended using the new survey times as they believed the Harvard times from the original Harvard relative value study, which was used to establish RVUs at the outset of the Medicare PFS, are inflated.

For CPT code 27709, Osteotomy; tibia and fibula, the RUC reviewed the survey time and compared this service to CPT

code 27705, Osteomy, tibia, which has a work RVU of 10.36. The RUC recommended a work RVU of 16.50 for CPT code 27709 which would place the code in proper rank order with CPT code 27705.

The RUC recommended the referral of CPT codes 20692, 27472, and 27720 to the CPT Editorial Panel to clarify whether these 90-day global period codes should be exempt from modifier

51. (Modifier 51 denotes that a multiple procedure was performed.) The RUC was concerned that attempting to value these codes would lead to double counting some of the work.

The RUC-recommended valuation for these CPT codes was as follows: 20680 = 5.86 work RVUs; 24430 = 14.00 work RVUs; 27465 = 17.50 work RVUs; 27470 = 16.05 work RVUs; and 27709 = 16.50 work RVUs.

CMS Proposed Valuation

We are in agreement with the RUCrecommended work values for these trauma services.

c. Total Elbow and General Procedures

AAOS submitted the following elbow athroplasty service for review (see Table 12).

TABLE 12

CPT code	Description
24363	Arthroplasty, elbow; with distal humerus and proximal ulnar prosthetic replacement (e.g., total elbow).

In addition, we submitted the following CPT codes, in Table 13, for review.

TABLE 13

CPT code	Description
20610	Arthrocentesis, aspiration and/or injection; major joint or bursa (e.g., shoulder, hip, knee joint, subacromial bursa).

Standard RUC surveys of these services were conducted.

RUC Recommendations

The RUC recommended maintaining the current work RVUs for CPT codes 20600, 20610, and 29075 because of the low response rate for the surveys and the lack of compelling evidence for changing the work value.

Based on a review of the survey data and information provided by the presenting specialty societies, AAOS and the American Society of Shoulder and Elbow Surgeons, the RUC concluded that the CPT code 24363 should be valued the same as CPT code 23472, Arthroplasty, glenohumeral joint; total shoulder (glenoid and proximal humeral replacement (e.g., total shoulder), and recommended a work RVU of 21.07 to maintain appropriate rank-order alignment with this family of codes. The RUC-recommended valuation for these CPT

codes was as follows: 20600 = 0.66 work RVUs; 20610 = 0.79 work RVUs; 24363 = 21.07 work RVUs; and 29075 = 0.77 work RVUs.

CMS Proposed Valuation

We agree with the RUC-recommended work RVUs for these elbow and general procedure services.

d. Wrist, Hand and Finger

We submitted the CPT codes in Table 14 for review.

TABLE 14

CPT code	Description
25447	Tendon sheath incision (e.g., for trigger finger). Excision of lesion of tendon sheath or joint capsule (e.g., cyst, mucous cyst, or ganglion), hand or finger. Closed treatment of metacarpal fracture, single; without manipulation, each bone.
64721	sure. Neuroplasty and/or transposition; median nerve at carpal tunnel.

CPT code 64702, Neuroplasty; digital, one or both, same digit, was submitted by the American Society for Surgery of the Hand (ASSH) with the rationale that this code is based on inaccurate Harvard physician times that are low compared to other hand surgery codes. Standard RUC surveys of these services were conducted.

RUC Recommendations

Based on a review of the survey data, the RUC recommended that the current work RVUs be maintained for CPT codes 25447, 26055, 26160, and 64721.

For CPT code 26600, the workgroup examined the survey data presented by the specialty society and agreed that the current work value of 1.96 RVUs may not fully reflect the value of all post-

operative visits that are the current standard of care and that the CPT code most frequently cited as a reference code (CPT code 26720, Closed treatment of phalangeal shaft fracture, proximal or middle phalanx, finger or thumb; without manipulation, each), also understates the number of post-operative visits. The workgroup validated the survey median value of 2.40 work RVUs by performing a

building-block calculation that added the value of an additional post-operative visit (CPT code 99212 at 0.43 work RVUs) to the current work value for CPT code 26600 of 1.96 for a total of 2.39 work RVUs. Since this value was almost identical to the median survey value of 2.40, the RUC recommended accepting this median value for the work RVUs for CPT code 26600.

For CPT code 26951, the RUC workgroup agreed that the current value of 4.58 work RVUs for this code creates a rank order anomaly when compared to the reference code (CPT code 26185, Sesamoidectomy, thumb or finger (separate procedure)), which has a work RVU of 5.24. Based on a review of survey data, the RUC recommended that

CPT code 26951 should be assigned work RVUs of 5.25 (the 25th percentile survey value) but that the survey median intra-service time of 45 minutes should be used since that is equal to the reference code.

For CPT code 64702, the RUC workgroup agreed that the current value for this service of 4.22 work RVUs does not include the number of post-operative days typically associated with this procedure. The workgroup believed that adding the work RVUs (1.3 work RVUs) associated with two additional outpatient visits, represented by CPT code 99213, produces an appropriate work RVU for this service and also places CPT code 64702 in the proper rank order with the reference service.

The RUC recommended 5.52 work RVUs for CPT code 64702.

The RUC-recommended work RVUs for these CPT codes are as follows: 25447 = 10.35 work RVUs; 26055 = 2.69 work RVUs; 26160 = 3.15 work RVUs; 26600 = 2.40 work RVUs; 26951 = 5.25 work RVUs; 64702 = 5.52 work RVUs; and 64721 = 4.28 work RVUs.

CMS Proposed Valuation

We are in agreement with the RUCrecommended work values for wrist, hand and finger services.

e. Total Joint and Hip Fracture

We submitted three CPT codes for review (see Table 15).

TABLE 15

CPT code	Description
27130	Arthroplasty, acetabular and proximal femoral prosthetic replacement (total hip arthroplasty), with or without autograft or allograft.
27236 27447	

The specialty society did not submit surveys for these codes, which is the accepted RUC method, for the RUC's consideration of changes to current work RVUs. Instead the specialty society developed proposed values for these services based on data obtained from the VA NSQIP database and the Medicare DRG database. The specialty society did survey its membership to obtain the data, but did not provide the workgroup or the RUC with this information, stating the vignettes did not describe a typical patient for this series of codes. Thus, the survey data for these codes was not available for the RUC workgroup to review at its August 2005 meeting.

The RUC requested that the specialty society survey its members on these three codes so that survey data could be used to evaluate the codes at the September 2005 RUC meeting. The specialty society used survey data, as well as NSQIP data and Medicare DRG data, to evaluate pre-service and intraservice times for these codes. The workgroup, as well as the RUC, was uncomfortable with mixing data from three separate sources in lieu of the established and accepted methodology of the RUC. The specialty society maintained the NSQIP data was more accurate than the survey data.

RUC Recommendations

The RUC did not find any compelling evidence to change the current work

RVUs assigned to these services. Based on a review of the data, the RUC recommended maintaining the current work RVUs of 20.09 for CPT code 27130, 15.58 for CPT code 27236 and 21.45 for CPT code 27447, but also recommended using the new physician time data for each of these services.

CMS Proposed Valuation

For these three CPT codes (27130, 27236, and 27447), the specialty society used NSOIP and Medicare DRG data instead of the standard RUC survey methodology to create an intra-service time. Medicare DRG data has not been used by CMS or the RUC to evaluate new or existing CPT codes. CPT code 27130 has never been reviewed by the RUC. It currently has 20.09 work RVUs which is based on the following Harvard time data: pre-service time of 68 minutes, intra-service time of 128 minutes, post-service time of 36 minutes and eight hospital days. We believe that this service can be compared to CPT codes 43641, Vagotomy including pyloroplasty, with or without gastrostomy; parietal cell (highly selective), and 60260, Thyroidectomy, removal of all remaining thyroid tissue following previous removal of a portion of thyroid. Both codes were reviewed by the RUC during the second 5-Year Review. CPT code 43641 has 60 minutes pre-service time, 150 minutes intraservice time, 30 minutes post-service time, and 6 hospital days, resulting in

work RVUs of 17.24. CPT code 60260 has 60 minutes pre-service time, 145 minutes intra-service time and 30 minutes post-service time with 2 hospital days, resulting in work RVUs of 17.44. We believe CPT code 27130 is similar in work and intensity to CPT code 43641, and if one removes 2 hospital days (code 99231), this would result in a work RVU of 15.96. Therefore, we recommend a work RVU of 15.96 for CPT code 27130.

CPT code 27236 has never been reviewed by the RUC. It has a preservice time of 74 minutes, an intraservice time of 89 minutes, a postservice time of 27 minutes, 100 minutes for hospital days, and 57 minutes for office visits for a total time of 347 minutes based on the Harvard time data, resulting in work RVUs of 15.58. We believe CPT codes 34421, Thrombectomy, direct or with catheter: vena cava, iliac, femoropopliteal vein, by leg incision, and 47600, Cholecystectomy, which were included in the second 5-Year Review, are similar in work intensity and time to CPT code 27236. CPT code 34421 has a preservice time of 70 minutes, an intraservice time of 95 minutes, a postservice time of 221 minutes, and total time of 386 minutes, resulting in work RVUs of 11.98. CPT code 47600 has a pre-service time of 75 minutes, an intraservice time of 80 minutes, and a postservice time of 194 minutes for a total time of 349 minutes, resulting in work

RVUs of 13.56. We propose a work RVU of 12.77 for CPT code 27236, which is the median value for these two codes and maintains relativity within this family of codes.

CPT Code 27447 has never been reviewed by the RUC. It has 21.45 work RVUs, which is based on the following Harvard time data: pre-service time of 60 minutes, intra-service time 139 minutes, post-service time of 37 minutes, 118 minutes for hospital days, and 54 minutes for office visits for a total time of 408 minutes. We believe

this service is comparable to CPT code 35671, *Bypass graft, with other than vein; popliteal-tibial or -peroneal artery,* which was reviewed during the second 5-Year Review. This service has a preservice time of 70 minutes, an intraservice time of 135 minutes, and a post-service time of 206 minutes for a total time of 411 minutes, resulting in work RVUs of 19.30. We believe CPT code 27447 is similar in work intensity and time to CPT code 35671 and propose work RVUs of 19.30 for CPT code 27447.

f. Additional Fracture Codes

The AAOS also submitted the following CPT codes listed in Table 16 and the ASSH submitted CPT code 25620. However, the specialty societies believed clarification was needed for the CPT descriptor for these services, as there was a question whether the current valuation for these codes includes the application of internal and external fixation to a fracture site.

CPT code	Description
23515	Open treatment of clavicle fracture, with or without internal or external fixation.
23585	Open treatment of scapular fracture (body, glenoid or acromion) with or without internal fixation.
23615	Open treatment of proximal humeral (surgical or anatomical neck) fracture, with or without internal or external fixation, with or without repair of tuberosity(s).
23616	Open treatment of proximal humeral (surgical or anatomical neck) fracture, with or without internal or external fixation, with or without repair of tuberosity(s); with proximal humeral prosthetic replacement.
23630	Open treatment of greater humeral tuberosity fracture, with or without internal or external fixation.
23670	Open treatment of shoulder dislocation, with fracture of greater humeral tuberosity, with or without internal or external fixation.
23680	Open treatment of shoulder dislocation, with surgical or anatomical neck fracture, with or without internal or external fixation.
24545	Open treatment of humeral supracondylar or transcondylar fracture, with or without internal or external fixation; withou intercondylar extension.
24546	Open treatment of humeral supracondylar or transcondylar fracture, with or without internal or external fixation; with intercondylar extension.
24575	Open treatment of humeral epicondylar fracture, medial of lateral, with or without internal or external fixation.
24579	Open treatment of humeral condylar fracture, medial or lateral, with or without internal or external fixation.
24635	Open treatment of Monteggia type of fracture dislocation at elbow (fracture proximal end of ulna with dislocation of radia
	head), with or without internal or external fixation.
24665	Open treatment of radial head or neck fracture, with or without internal fixation or radial head excision.
24685	Open treatment of ulnar fracture proximal end (olecranon process), with or without internal or external fixation.
25515	Open treatment of radial shaft fracture, with or without internal or external fixation.
25526	Open treatment of radial shaft fracture, with internal and/or external fixation and open treatment, with or without internal or external fixation of distal radioulnar joint (Galeazzi fracture/dislocation), includes repair of triangular fibrocartilage complex.
25545	Open treatment of ulnar shaft fracture, with or without internal or external fixation.
25574	Open treatment of radial AND ulnar shaft fractures, with internal or external fixation; of radius OR ulna.
25575	Open treatment of radial AND ulnar shaft fractures, with internal or external fixation; of radius AND ulna.
25620	Open treatment of distal radial fracture (e.g., Colles or Smith type) or epiphyseal separation, with or without fracture o ulnar styloid, with or without internal or external fixation.
25628	Open treatment of carpal scaphoid (navicular) fracture, with or without internal or external fixation.
26615	Open treatment of metacarpal fracture, single, with or without internal or external fixation, each bone.
26665	Open treatment of carpometacarpal fracture dislocation, thumb (Bennett fracture), with or without internal or external fixation.
26685	Open treatment of carpometacarpal dislocation, other than thumb, with or without internal or external fixation, each joint.
26715	Open treatment of metacarpophalangeal dislocation, single, with or without internal or external fixation.
26735	Open treatment of phalangeal shaft fracture, proximal or middle phalanx, finger or thumb, with or without internal or external fixation, each.
26746	Open treatment of articular fracture, involving metacarpophalangeal or interphalangeal joint, with or without internal or external fixation, each.
26765	Open treatment of distal phalangeal fracture, finger or thumb, with or without internal or external fixation, each.
26785	Open treatment of interphalangeal joint dislocation, with or without internal or external fixation, single.
27248	Open treatment of greater trochanteric fracture, with or without internal of external fixation.
27511	Open treatment of femoral supracondylar or transcondylar fracture without intercondylar extension, with or without internal or external fixation.
27513	external fixation.
27514	
27519	Open treatment of distal femoral epiphyseal separation, with or without internal or external fixation.
27535	Open treatment of tibial fracture, proximal (plateau); unicondylar, with or without internal of external fixation.
27540	Open treatment of intercondylar spine(s) and/or tuberosity fracture(s) of the knee, with or without internal or external fixation.
27556	Open treatment of knee dislocation, with or without internal or external fixation; without primary ligamentous repair of augmentation/reconstruction.
27766	Open treatment of medial malleolus fracture, with or without internal or external fixation.
27784	Open treatment of proximal fibula or shaft fracture, with or without internal or external fixation.

TABLE 16—Continued

CPT code	Description
27792	Open treatment of distal fibular fracture (lateral malleolus), with or without internal or external fixation.
27814	Open treatment of bimalleolar ankle fracture, with or without internal or external fixation.
27822	Open treatment of trimalleolar ankle fracture, with or without internal or external fixation, medial and/or lateral malleolus; without fixation of posterior lip.
27826	Open treatment of fracture of weight bearing articular surface/portion of distal tibia (e.g., pilon or tibial plafond), with internal or external fixation; of fibula only.
27827	Open treatment of fracture of weight bearing articular surface/portion of distal tibia (e.g., pilon or tibial plafond), with internal or external fixation; of tibia only.
27828	Open treatment of fracture of weight bearing articular surface/portion of distal tibia (e.g., pilon or tibial plafond), with internal or external fixation; of both tibia and fibula.
27829	Open treatment of distal tibiofibular joint (syndesmosis) disruption, with or without internal or external fixation.
27832	Open treatment of proximal tibiofibular joint dislocation, with or without internal or external fixation, or with excision of proximal fibula.
28415	Open treatment of calcaneal fracture, with or without internal or external fixation.
28445	Open treatment of talus fracture, with or without internal or external fixation.
28465	Open treatment of tarsal bone fracture (except talus and calcaneus), with or without internal or external fixation, each.
28485	Open treatment of metatarsal fracture, with or without internal or external fixation, each.
28505	Open treatment of fracture of great toe, phalanx or phalanges, with or without internal or external fixation.
28525	Open treatment of fracture, phalanx or phalanges, other than great toe, with or without internal or external fixation, each.
28555	Open treatment of tarsal bone dislocation, with or without internal or external fixation.
28585	Open treatment of talotarsal joint dislocation, with or without internal or external fixation.
28615	Open treatment of tarsometatarsal joint dislocation, with or without internal or external fixation.
28645	Open treatment of metatarsophalangeal joint dislocation, with or without internal or external fixation.
28675	Open treatment of interphalangeal joint dislocation, with or without internal or external fixation.

RUC Recommendations

The RUC recommended that these CPT codes be referred to the CPT Editorial Panel for review and clarification.

CMS Proposed Valuation

We will maintain the current valuation for these services pending the

results of the review by the CPT Editorial Panel.

3. Gynecology, Urology, Pain Medicine, and Neurosurgery

[If you choose to comment on issues in this section, please include the caption "DISCUSSION OF COMMENTS—GYNECOLOGY,

UROLOGY, PAIN MEDICINE, AND NEUROSURGERY" at the beginning of your comments.]

a. Obstetrics and Gynecology

The American College of Obstetricians and Gynecologists (ACOG) submitted the CPT codes in Table 17 for review.

TABLE 17

CPT code	Description
49200	Excision or destruction, open, intra-abdominal or retroperitoneal tumors or cysts or endometriomas.
49201	Excision or destruction, open, intra-abdominal or retroperitoneal tumors or cysts or endometriomas; extensive.
56631	Vulvectomy, radical, partial; with unilateral inguinofemoral lymphadenectomy.
56632	Vulvectomy, radical, partial; with bilateral inguinofemoral lymphadenectomy.
56634	Vulvectomy, radical, complete; with unilateral inguinofemoral lymphadenectomy.
56637	
56640	
57160	
57240	
57250	Posterior colporrhaphy, repair of rectocele with or without perineorrhaphy.
57260	Combined anteroposterior colporrhaphy.
57265	Combined anteroposterior colporrhaphy; with enterocele repair.
57550	, and the same property of the
57555	
57556	Excision of cervical stump, vaginal approach; with repair of enterocele.

However, the specialty society subsequently withdrew the following CPT codes: 49200, 49201, 56631, 56632, 56634, 56637, 56640, 57550, 57555, and 57556.

We identified five CPT codes for review but withdrew one code, CPT code 58260 (see Table 18).

CPT code	Description
58150	Biopsy, single or multiple, or local excision of lesion, with or without fulguration (separate procedure). Dilation and curettage, diagnostic and/or therapeutic (nonobstetrical). Total abdominal hysterectomy (corpus and cervix), with or without removal of tube(s), with or without removal of ovary(s). Vaginal hysterectomy, for uterus 250 grams or less.

TABLE 18—Continued

CPT code	Description
58720	Salpingo-oophorectomy, complete or partial, unilateral or bilateral (separate procedure).

A standard RUC survey with over 30 responses was used for these codes.

RUC Recommendations

The RUC recommended maintaining the existing RVUs for CPT codes 57160, 58120 and 58720. The RUC believed there was no compelling evidence presented to indicate that there had been a change in work for CPT code 57160. The RUC also agreed with the specialty society that the survey data collected validated the existing times and existing RVUs for CPT codes 58120 and 58720.

The RUC recommended increasing the work value for the remaining CPT codes. The RUC agreed with the specialty society that these procedures were currently undervalued because of rank-order anomalies, changes in patient population or incorrect assumptions made in the previous valuation of the service. However, the RUC-recommended work values for each service were below the level presented by the specialty society. The RUC recommended the use of the surveys' 25th percentile work RVUs for four of the services, CPT codes 57240, 57250, 57500 and 58150, and the 75th percentile for CPT codes 57260 and 57265. The 75th percentile was used because the workgroup believed that otherwise there would be a rank order anomaly between the more complex vagina repair services, CPT codes 57280 and 57265, and the simpler procedures, CPT codes 57240 and 57250.

The RUC-recommended work values for these services are as follows: 57160 = 0.89 work RVUs; 57240 = 10.56 work RVUs; 57250 = 10.56 work RVUs; 57265 = 15.00 work RVUs; 57500 = 1.20 work RVUs; 58120 = 3.27 work RVUs; 58150 = 15.98 work RVUs; and 58720 = 11.34 work RVUs.

CMS Proposed Valuation

We propose to accept the RUC recommendations for these obstetrics and gynecology services. We initially had concerns with the use of the surveys' 75th percentile for the recommendation of work RVUs for CPT codes 57260 and 57265, but in comparison with similar services, we believe that the RUC recommendations for these services create the correct rank order, both within the family of codes and with other similar services.

b. Urology

The American Urological Association (AUA) and the Coalition for the Advancement of Prosthetic Urology (CAPU) submitted five CPT codes for review (see Table 19). However, the specialty society subsequently withdrew four CPT codes (53445, 54400, 54405, and 54411).

TABLE 19

CPT code	Description
51798	Insertion of inflatable urethral/bladder neck sphincter, including placement of pump, reservoir, and cuff. Insertion of penile prosthesis; non-inflatable (semi-rigid). Insertion of multi-component, inflatable penile prosthesis, including placement of pump, cylinders, and reservoir.

In addition, we identified seven CPT codes for review because of possible changes in technology or because the service had never been reviewed by the RUC (see Table 20). A standard RUC

survey with over 30 responses was used for the following codes.

TABLE 20

CPT code	Description
50590	Lithotripsy, extracorporeal shock wave.
51720	Bladder instillation of anticarcinogenic agent (including detention time).
52000	Cystourethroscopy (separate procedure).
52204	Cystourethroscopy, with biopsy.
52601	Transurethral electrosurgical resection of prostate, including control of postoperative bleeding, complete (vasectomy, meatotomy, cystourethroscopy, urethral calibration and/or dilation, and internal urethrotomy are included).
55700	Biopsy, prostate; needle or punch, single or multiple, any approach.
57288	Sling operation for stress incontinence (e.g., fascia or synthetic).

RUC Recommendations

Of the eight codes presented with survey data, the RUC recommended maintaining the existing work RVUs for two codes. For CPT code 57288, the RUC believed that the survey median supported the specialty society's contention that the work currently associated with the code is accurate. For CPT code 50590, the RUC believed that the current work value more accurately reflected the work involved in the service than did the survey, which increased the work RVUs while decreasing the physician intra-time substantially.

The RUC recommended decreasing the current work RVUs for CPT code 51720 to reflect the median work RVU from the survey.

The RUC agreed with the specialty society's recommendations for an increase to the existing RVUs for CPT code 51798. This procedure was

originally reviewed by the RUC in April 2002 with a recommendation 0.38 work RVUs to reflect the physician work believed to be typically associated with this procedure. However, in the CY 2002 Physician Fee Schedule final rule with comment period (66 FR 55246), we contended that there was no physician work associated with this service and assigned work RVUs of 0.00. This decision was upheld by the refinement process that is used to address comments received on the valuation of new and revised CPT codes and that was discussed in the CY 2004 Physician Fee Schedule final rule with comment period (67 FR 63227). However, the RUC agreed with the specialty society that this procedure is performed by physicians and reaffirmed its previous recommendation of 0.38 work RVUs for this procedure.

The RUC recommended increasing the work RVUs for four codes, but below the level requested by the specialty society (that is, recommending work RVUs equal to the surveys' 25th percentile for CPT codes 52000 and 55700, equal to the median for CPT code 52601 and less than the 25th percentile for CPT code 52204). The RUC agreed with the specialty society that these procedures were currently undervalued due to changes in technology, changes in patient populations and incorrect assumptions that were made in the previous valuation of the service.

The RUC-recommended work values for these CPT codes for urology services are as follows: 50590 = 9.08 work RVUs; 51720 = 1.50 work RVUs; 51798 = 0.38 work RVUs; 52000 = 2.23 work RVUs; 52204 = 2.59 work RVUs; 52601 = 14.00 work RVUs; 55700 = 2.58 work RVUs; and 57288 = 13.00 work RVUs.

CMS Proposed Valuation

We accept the RUC recommendations for these urology services except for CPT code 51798. The RUC recommendation for bladder ultrasound was based on CPT code 79857 (the pelvic ultrasound (nonobstetric) procedure) as the reference code. (CPT code 76857 should be used if the urinary bladder alone is imaged,

whereas CPT code 51798 should be utilized if a bladder volume or post-void residual measurement is obtained without imaging the bladder.) We disagree that this is an appropriate reference code because the pelvic ultrasound procedure is very different from a bladder ultrasound procedure. The bladder ultrasound procedure only results in a "numerical reading" of milliliters of residual urine in the bladder and does not produce an image on a screen for a physician to interpret like many other ultrasound procedures (for example, the pelvic ultrasound). Therefore, we disagree with the RUC recommendation to use the 0.38 physician work RVUs for the professional component of code 76857 as the work RVUs for CPT code 51798 because we do not believe this procedure involves physician work since the machine only produces a numerical reading.

c. Spine Surgery

We identified the CPT codes in Table 21 for the 5-Year Review.

TABLE 21

CPT code	Description		
22520	Percutaneous vertbroplasty, one vertebral body, unilateral or bilateral, injection; thoracic.		
22554	Arthrodesis, anterior interbody technique, including minimal diskectomy to prepare interspace (other than for decompression); cervical below C2.		
22612	Arthrodesis, posterior or posterolateral technique, single level; lumbar (with or without lateral transverse technique).		
22840	Posterior non-segmental instrumentation (e.g., Harrington rod technique, pedicle fixation across one interspace, atlantoaxial transarticular screw fixation, sublaminar wiring at C1, facet screw fixation).		
63047	Laminectomy, facetectomy and foraminotomy (unilateral or bilateral with decompression of spinal cord, cauda equina and/or nerve root(s), (e.g., spinal or lateral recess stenosis)), single vertebral segment; lumbar.		
63048	Laminectomy, facetectomy and foraminotomy (unilateral or bilateral with decompression of spinal cord, cauda equina and/ or nerve root(s), (e.g., spinal or lateral recess stenosis)), single vertebral segment; each additional segment, cervical, thoracic, or lumbar (List separately in addition to code for primary procedure).		
63075	Diskectomy, anterior, with decompression of spinal cord and/or nerve root(s), including osteophytectomy; cervical, single interspace.		

With approval of the RUC, the specialty society used a modified RUC survey that included surveys of time (pre-service, intra-service, immediate post-service), post-operative visits and estimates of total work. Two reference codes were used to survey the estimates of intensity and complexity. There were well over 100 responses to each survey.

RUC Recommendations

The RUC accepted the specialty society's recommendations to decrease the existing work RVUs for three procedures: CPT codes 22554, 63047 and 63075. The RUC agreed that these procedures were overvalued due to decreases in the length of stay and physician time. The RUC also accepted the specialty society's recommendation to maintain the work associated with CPT codes 22520 and 22840. The RUC

agreed with the specialty society that the survey data collected validated the existing work RVUs associated with these codes. For CPT codes 22612 and 63048, the RUC recommended increases in the work RVUs, but less than the increases requested by the specialty society. The RUC agreed that these procedures were undervalued due to increases in length of stay and the incorrect assumptions made in the previous valuation of the service.

The specific RUC-recommended work RVUs were as follows: 22520 = 8.90 work RVUs; 22554 = 16.40 work RVUs; 22612 = 22.00 work RVUs; 22840 = 12.52 work RVUs; 63047 = 14.08 work RVUs; 63048 = 3.55 work RVUs; and 63075 = 18.58 work RVUs.

CMS Proposed Valuation

We accept the work RVUs recommended by the RUC for CPT codes 22520, 22554, 22840, 63047 and 63075. However, we have technical concerns with the recommendations for CPT codes 22612 and 63048.

The workgroup recommended the survey's 25th percentile for CPT code 22612 to keep the appropriate rank order with the reference service, CPT code 22595, which is a more complex procedure. However, there was a typographical error in the information presented by the specialty society that listed the work RVUs for the reference code as 23.36, rather than the correct value of 19.36 work RVUs. Therefore, the recommended work value of 22.00 RVUs is clearly inappropriate and we

are proposing to maintain the current work RVUs of 20.97 for this service.

There is an additional typographical error in the specialty society survey data for CPT code 63048. The summary information lists the reference code as also being CPT code 63048. Therefore, there is no information given that compares the respondents' estimates of

complexity and intensity between CPT code 63048 and the reference code. Because we do not have sufficient information to decide if the recommended work RVUs are appropriate, we are proposing to maintain the current work RVUs of 3.26 for CPT code 63048.

d. Spinal Pump Infusion and Stimulators

The American Academy of Pain Medicine (AAPM) and the American Society of Anesthesiologists (ASA) initially submitted several CPT codes that were subsequently withdrawn from the 5-Year Review (see Table 22).

TABLE 22

CPT code	Description			
62350	Implantation, revision or repositioning of tunneled intrathecal or epidural catheter, for long-term medication administration via an external pump or implantable reservoir/infusion pump; without laminectomy.			
62351	Implantation, revision or repositioning of tunneled intrathecal or epidural catheter, for long-term medication administration via an external pump or implantable reservoir/infusion pump; with laminectomy.			
62355				
62360	Implantation or replacement of device for intrathecal or epidural drug infusion; subcutaneous reservoir.			
62361	Implantation or replacement of device for intrathecal or epidural drug infusion; non-programmable pump.			
62362	Implantation or replacement of device for intrathecal or epidural drug infusion; programmable pump, including preparation of pump, with or without programming.			
62365	Removal of subcutaneous reservoir or pump, previously implanted for intrathecal or epidural infusion.			
63650	Percutaneous implantation of neurostimulator electrode array, epidural.			
63655	Laminectomy for implantation of neurostimulator electrodes, plate/paddle, epidural.			
63660	Revision or removal of spinal neurostimulator electrode percutaneous array(s) or plate/paddle(s).			
63685	Insertion or replacement of spinal neurostimulator pulse generator or receiver, direct or inductive coupling.			
63688				
64550	Application of surface (transcutaneous) neurostimulator.			
64553	Percutaneous implantation of neurostimulator electrodes; cranial nerve.			
64555	Percutaneous implantation of neurostimulator electrodes; peripheral nerve (excludes sacral nerve).			
64560				
64561	, , , , , , , , , , , , , , , , , , , ,			
64565	,			
64573				
64575				
64577	Incision for implantation of neurostimulator electrodes; autonomic nerve.			
64580				
64581				
64585				
64590				
64595	Revision or removal of peripheral neurostimulator pulse generator or receiver.			

e. Aneurysm, Epilepsy and Skull Procedures

The American Association of Neurological Surgeons (AANS) and Congress of Neurological Surgeons (CNS) submitted six CPT codes for review (see Table 23).

TABLE 23

CPT code	Description
61538 61697 61698 61700	Surgery of complex intracranial aneurysm, intracranial approach; vertebrobasilar circulation.

We submitted two CPT codes for review (see Table 24).

CPT code	Description
61154 61312	Burr hole(s) with evacuation and/or drainage of hematoma, extradural or subdural. Craniectomy or craniotomy for evacuation of hematoma, supratentorial; extradural or subdural.

A standard RUC survey with over 30 responses was used for six of the codes. The surveys for CPT codes 61537 and 61538 had only 12 and 14 responses, respectively.

RUC Recommendations

The RUC agreed with the specialty society that the existing RVUs for CPT code 61154 should be maintained because there was no compelling evidence that the work currently associated with this procedure has changed. The RUC accepted the specialty society's requested increase to the existing work RVUs, as reflected by the survey median, for CPT code 61312, agreeing with the specialty society that the increased use of anticoagulants by these patients has increased the intensity of the intra-service work. The RUC recommended increasing the work RVUs for CPT codes 61697, 61698,

61700 and 61702, but at or below the surveys' 25th percentile.

While the workgroup recommended maintaining the current work RVUs for CPT codes 61537 and 61538, at the subsequent RUC meeting, the specialty society extracted these codes for discussion and the RUC recommended the 25th percentile from the surveys for the work RVU.

The RUC-recommended work RVUs for these CPT codes are as follows: 61154 = 14.97 work RVUs; 61312 = 27.00 work RVUs; 61537 = 35.00 work RVUs; 61538 = 38.00 work RVUs; 61697 = 57.31 work RVUs; 61698 = 64.03 work RVUs; 61700 = 46.01 work RVUs; and 61702 = 54.28 work RVUs.

CMS Proposed Valuation

We accept the RUC-recommended work RVUs for these neurosurgery services.

4. Radiology, Pathology, and Other Miscellaneous Services

[If you choose to comment on issues in this section, please include the caption "DISCUSSION OF COMMENTS-RADIOLOGY, PATHOLOGY, and OTHER MISC. SERVICES" at the beginning of your comments.]

a. Pathology

The College of American Pathologists submitted four CPT codes for review using the rationale that there have been changes in cancer protocols and the content of work (see Table 25). The specialty society conducted a full RUC survey for these codes.

CPT code	Description
88309	Level VI—Surgical pathology, gross and microscopic examination; Bone Resection; Breast, Mastectomy—with Regional Lymph Nodes; Colon, Segmental Resection for Tumor; Colon, Total Resection; Esophagus, Partial/Total Resection; Extremity, Disarticulation; Fetus, with Dissection; Larynx, Partial/Total Resection—with Regional Lymph Nodes; Lung—Total/Lobe/Segment Resection; Pancreas, Total/Subtotal Resection; Prostate, Radical Resection; Small Intestine, Resection for Tumor; Soft Tissue Tumor, Extensive Resection; Stomach—Subtotal/Total Resection for Tumor; Testis, Tumor; Tongue/Tonsil—Resection for Tumor; Urinary Bladder, Partial/Total Resection; Uterus, with or without Tubes and Ovaries, Neoplastic; Vulva, Total/Subtotal Resection.
88321	Consultation and report on referred slides prepared elsewhere.
88323	Consultation and report on referred material requiring preparation of slides.
88325	Consultation, comprehensive, with review of records and specimens, with report on referred material.

RUC Recommendations

The RUC reviewed the specialty's survey results for each code and believed the specialty society had presented compelling evidence to change the relative work value for each code because all were undervalued for the increased physician work now involved in the services. The RUC believed that the change in work was due to the increased number and type of slides undergoing review in the

typical case, and, in particular, the number of immunohistochemical slides that must undergo review. Based on recent literature, the RUC also believed that the clinical practice of these pathology consultations had changed. In addition, the RUC agreed with the specialty society that the survey's 25th percentile reflected the true physician work for each of the codes.

The RUC-recommended work RVUs for these CPT codes are as follows:

88309 = 2.80 work RVUs, 88321 = 1.63 work RVUs, 88323 = 1.83 work RVUs, and 88325 = 2.50 work RVUs.

CMS Proposed Valuation

We are in agreement with all of these RUC-recommended work RVUs for pathology services.

b. Radiation Oncology

We submitted the radiation oncology CPT codes in Table 26 for review.

TABLE 26

CPT code	Description		
77263	Therapeutic radiology treatment planning; complex.		
77280	Therapeutic radiology simulation-aided field setting; simple.		
77290	Therapeutic radiology simulation-aided field setting; complex.		
77300	Basic radiation dosimetry calculation, central axis depth dose calculation, TDF, NSD, gap calculation, off axis factor, tissue inhomogeneity factors, calculation of non-ionizing radiation surface and depth dose, as required during course of treatment, only when prescribed by the treating physician.		
77315	Teletherapy, isodose plan (whether hand or computer calculated); complex (mantle or inverted Y, tangential ports, the use of wedges, compensators, complex blocking, rotational beam, or special beam considerations).		
77331	Special dosimetry (e.g., TLD, microdosimetry) (specify), only when prescribed by the treating physician.		
77334	Treatment devices, design and construction; complex (irregular blocks, special shields, compensators, wedges, molds or casts).		
77470	Special treatment procedure (e.g., total body irradiation, hemibody radiation, per oral, endocavitary or intraoperative cone irradiation).		

Standard RUC surveys were conducted for these services. The survey results indicated that the work RVUs for each code should be maintained at their current level, and the specialty society, the American Society for Therapeutic Radiology and Oncology (ASTRO), recommended no change in the work RVU.

RUC Recommendations

The RUC agreed with the survey results and supported the specialty

society's recommendation to maintain the work RVUs. The RUC found no compelling evidence to change the work RVUs for these CPT codes, and therefore, recommended maintaining the current work values for these CPT codes as follows: 77263 = 3.14 work RVUs; 77280 = 0.70 work RVUs; 77290 = 1.56 work RVUs; 77300 = 0.62 work RVUs; 77315 = 1.56 work RVUs; 77331 = 0.87 work RVUs; 77334 = 1.24 work RVUs; and 77470 = 2.09 work RVUs.

CMS Proposed Valuation

We are in agreement with all of these RUC-recommended work RVUs for radiology oncology.

c. Radiology

We requested that the CPT codes for radiology services in Table 27 be reviewed.

TABLE 27

CPT code	Description			
70355	Orthopantogram.			
71010	Radiologic examination, chest; single view, frontal.			
71020	Radiologic examination, chest, two views, frontal and lateral.			
71260	Computed tomography, thorax; with contrast material(s).			
72192	Computed tomography, pelvis; without contrast material.			
72193				
73100	Radiologic examination, wrist; two views.			
73110	Radiologic examination, wrist; complete, minimum of three views.			
73120	Radiologic examination, hand; two views.			
73130	Radiologic examination, hand; minimum of three views.			
73140	Radiologic examination, finger(s), minimum of two views.			
74000	Radiologic examination, abdomen; single anteroposterior view.			
74020	Radiologic examination, abdomen; complete, including decubitus and/or erect views.			
74022	Radiologic examination, abdomen; complete acute abdomen series, including supine, erect, and/or decubitus views, single view chest.			
74150	Computed tomography, abdomen; without contrast material.			
74160	Computed tomography, abdomen; with contrast material(s).			
76075	Dual energy x-ray absorptiometry (DXA), bone density study, one or more sites; axial skeleton (e.g., hips, pelvis, spine).			
76700	Ultrasound, abdominal, B-scan and/or real time with image documentation; complete.			
76830				
78306	Bone and/or joint imaging; whole body.			
78315	Bone and/or joint imaging; three phase study.			
78465	Myocardial perfusion imaging; tomographic (SPECT), multiple studies (including attenuation correction when performed), at rest and/or stress (exercise and/or pharmacologic) and redistribution and/or rest injection, with or without quantification.			
78478	Myocardial perfusion study with wall motion, qualitative or quantitative study (List separately in addition to code for primary procedure).			
78480	Myocardial perfusion study with ejection fraction (List separately in addition to code for primary procedure).			

In addition, the American College of Cardiology (ACC) and American College of Radiology (ACR) recommended four cardiac imaging codes be sent to the CPT Editorial Panel for review and clarification so that they may reflect current practice patterns (see Table 28). The RUC agreed with this recommendation.

TABLE 28

CPT code	Description
7555375554	Cardiac magnetic resonance imaging for morphology; without contrast material. Cardiac magnetic resonance imaging for morphology; with contrast material. Cardiac magnetic resonance imaging for function, with or without morphology; complete study. Cardiac magnetic resonance imaging for function, with or without morphology; limited study).

The specialty societies conducted standard RUC surveys for the remaining services.

RUC Recommendations

The RUC agreed with the survey results and found there was no compelling evidence to change the work RVUs for CPT codes 70355, 71010, 71020, 71260, 72192, 72193, 73100,

73110, 73120, 73130, 73140, 74000, 74020, 74022, 74150, 74160, 76700, 76830, 78306, 78315, and 78465.

The RUC recommended a reduction in the work RVU for the DXA service, CPT code 76075, because the workgroup believed that the actual work is less intense and more mechanical than the specialty society's description of the work. In addition, the RUC believed that

the survey results provided insufficient evidence to support the current work RVU associated with CPT code 78478 and also believed that the physician time was overestimated. The RUC also recommended a reduction in the work RVUs for CPT code 78480 because it was not in the correct rank order and was therefore overvalued.

The RUC-recommended work RVUs for these CPT codes are as follows: 70355 = 0.20 work RVUs; 71010 = 0.18 work RVUs; 71020 = 0.22 work RVUs; 71260 = 1.24 work RVUs; 72192 = 1.09 work RVUs; 72193 = 1.16 work RVUs; 73100 = 0.16 work RVUs; 73110 = 0.17 work RVUs; 73120 = 0.16 work RVUs; 73130 = 0.17 work RVUs; 73140 = 0.13 work RVUs; 74020 = 0.18 work RVUs; 74020 = 0.27 work RVUs; 74022 = 0.32

work RVUs; 74150 = 1.19 work RVUs; 74160 = 1.27 work RVUs; 76075 = 0.20 work RVUs; 76700 = 0.81 work RVUs; 76830 = 0.69 work RVUs; 78306 = 0.86 work RVUs; 78315 = 1.02 work RVUs; 78465 = 1.46 work RVUs; 78478 = 0.50 work RVUs; and 78480 = 0.30 work RVUs.

CMS Proposed Valuation

We are in agreement with all of these RUC-recommended work RVUs for radiology services.

d. Endoscopy Procedures

We requested the RUC to review five endoscopy CPT codes because they had never been reviewed by the RUC (see Table 29). Standard RUC surveys were conducted.

TABLE 29

CPT code	Description
43235	Upper gastrointestinal endoscopy including esophagus, stomach, and either the duodenum and/or jejunum as appropriate; diagnostic, with or without collection of specimen(s) by brushing or washing (separate procedure).
43246	Upper gastrointestinal endoscopy including esophagus, stomach, and either the duodenum and/or jejunum as appropriate; with directed placement of percutaneous gastrostomy tube.
43750	Percutaneous placement of gastrostomy tube.
45330	Sigmoidoscopy, flexible; diagnostic, with or without collection of specimen(s) by brushing or washing (separate procedure).
45378	Colonoscopy, flexible, proximal to splenic flexure; diagnostic, with or without collection of specimen(s) by brushing or washing, with or without colon decompression (separate procedure).

RUC Recommendations

The RUC agreed with the survey results and found no compelling evidence to change the work RVUs for any of these services. Therefore, the RUC recommended the work values for these CPT codes be maintained as follows: 43235 = 2.39 work RVUs; 43246 = 4.32 work RVUs; 43750 = 4.48 work RVUs; 45330 = 0.96 work RVUs; and 45378 = 3.69 work RVUs.

CMS Proposed Valuation

We are in agreement with the RUCrecommended work RVUs for endoscopic procedure codes.

e. Neurology, Neuromuscular, and Nervous System

The American Academy of Neurology (AAN), American Clinical Neurophysiology Society (ACNS), American Association of Neuromuscular and Electrodiagnostic Medicine (AANEM), and the American Academy of Physical Medicine and Rehabilitation (AAPMR) submitted five neurology and neuromuscular CPT codes for this 5-Year Review and AAN and the American Academy of Pediatrics (AAP) jointly submitted CPT code 62270 (see Table 30).

TABLE 30

CPT code	Description
62270	Spinal puncture, lumbar, diagnostic.
95872	Needle electromyography using single fiber electrode, with quantitative measurement of jitter, blocking and/or fiber density, any/all sites of each muscle studied.
95925	Short-latency somatosensory evoked potential study, stimulation of any/all peripheral nerves or skin sites, recording from the central nervous system; in upper limbs.
95926	Short-latency somatosensory evoked potential study, stimulation of any/all peripheral nerves or skin sites, recording from the central nervous system; in lower limbs.
95927	Short-latency somatosensory evoked potential study, stimulation of any/all peripheral nerves or skin sites, recording from the central nervous system; in the trunk or head.
95953	Monitoring for localization of cerebral seizure focus by computerized portable 16 or more channel EEG, electroencephalographic (EEG) recording and interpretation, each 24 hours.

In addition, we requested the RUC to review five neurological CPT codes (see Table 31).

CPT code	Description
95861 95900	Electroencephalogram (EEG); including recording awake and asleep. Needle electromyography; two extremities with or without related paraspinal areas.

Standard RUC surveys were conducted for these services. The specialty societies believed the survey results indicated that the current work RVUs were either correctly valued or undervalued.

RUC Recommendations

The RUC found no compelling evidence to change the work RVUs for CPT codes 95816, 95819, 95861, 95900, 95904, 95925, 95926, and 95927. However, the RUC agreed that there was compelling evidence that CPT codes 95872 and 95953 were undervalued and recommended increasing their existing RVUs.

The RUC-recommended work RVUs for these services are as follows: 95816 = 1.08 work RVUs; 95819 = 1.08 work RVUs; 95861 = 1.54 work RVUs; 95862 = 3.00 work RVUs; 95900 = 0.42 work RVUs; 95904 = 0.34 work RVUs; 95925 = 0.54 work RVUs; 95926 = 0.54 work RVUs; 95927 = 0.54 work RVUs; and 95953 = 3.30 work RVUs.

For CPT code 62270, the RUC believed that there is a bimodal distribution of physician work associated with the code because there are two different typical patient types, infants and young children. The RUC and the specialty societies believed that the infant population requires less work than in the young child population. The RUC suggested that it may be reasonable for the specialty societies to eventually consider splitting the code into the two typical patient types to capture any differences in physician work. However, for the current CPT code 62270, the RUC recommended that it should be valued higher and recommended a work RVU of 1.37.

CMS Proposed Valuation

We are in agreement with all of the RUC-recommended work RVUs for neurology, neuromuscular and nervous system services except for the recommendation for CPT code 95872. We have concerns that the work

recommendation for this service, which was based on the survey's 75th percentile for work, is not the correct valuation and is inappropriate for this service. We calculated the pre-service and post-service work RVU using the surveyed physician time data. Then, we subtracted the surveyed intra-service time from the current time. Next, we multiplied this difference in time by the calculated IWPUT using the specialty recommended total work RVUs to determine an intra-service work RVU. Adding the calculated work RVUs resulted in a work RVU of slightly less than 2.0, which is close to the same value as the survey median work RVU. In accordance with this analysis and the survey median, we are recommending a work RVU of 2.00.

f. Pulmonary Medicine

We requested the RUC to review three pulmonary medicine CPT codes (see Table 32).

TABLE 32

CPT code	Description
31622	Bronchoscopy, rigid or flexible, with or without fluoroscopic guidance; diagnostic, with or without cell washing (separate procedure).
94010	Spirometry, including graphic record, total and timed vital capacity, expiratory flow rate measurement(s), with or without maximal voluntary ventilation.
94657	Ventilation assist and management, initiation of pressure or volume preset ventilators for assisted or controlled breathing; subsequent days.

Standard RUC surveys were conducted. The specialty societies believed the survey results indicated that the current work RVUs were either correctly valued or undervalued.

RUC Recommendations

The RUC reviewed the survey results and recommendations from the specialty society for CPT codes 31622 and 94010 and found no compelling reason to change the work RVUs for these codes. However, the RUC agreed with the specialty society that the time data elements from the survey results reflected the typical patient encounter.

The RUC did find compelling evidence to support the specialty society's recommendation and survey work value results for CPT code 94657. However, the RUC determined that a rank order anomaly would be created with CPT code 94656 if the recommended value for CPT code 94657 was adopted. Therefore, the RUC

recommended that this code be referred to the CPT Editorial Panel.

The RUC-recommended work RVUs for these codes are as follows: 31622 = 2.78 work RVUs and 94010 = 0.17 work RVUs.

CMS Proposed Valuation

We are in agreement with these RUCrecommended work RVUs for pulmonary medicine services.

g. Miscellaneous Services

(i) Anesthesia

The ASA requested that the RUC review code 00797, Anesthesia for intraperitoneal procedures in upper abdomen including laparoscopy; gastric restrictive procedure for morbid obesity. The ASA believed that the results of the standard RUC survey conducted by the specialty society indicated the physician work was undervalued for this code.

RUC Recommendations

The RUC reviewed the survey results and specialty society recommendation and agreed with its recommended median base unit value and physician time for the code. The RUC recommended base unit valuation for this service was 11.00.

CMS Proposed Valuation

We are in agreement with the RUC recommendation for CPT code 00797.

(ii) Allergy and Immunology

The Joint Council of Allergy, Asthma, and Immunology (JCAAI) and the American Academy of Otolaryngic Allergy (AAOA) submitted five codes without work relative values for this 5-Year Review based on the rationale that physician work was inherent in the service (see Table 33). The specialties subsequently withdrew CPT codes 95115 and 95117 from consideration.

CPT code	Description
95004	Percutaneous tests (scratch, puncture, prick) with allergenic extracts, immediate type reaction, specify number of tests.

TABLE 33—Continued

CPT code	Description
95024 95027	Intracutaneous (intradermal) tests with allergenic extracts, immediate type reaction, specify number of tests. Intracutaneous (intradermal) tests, sequential and incremental, with allergenic extracts for airborne allergens, immediate type reaction, specify number of tests.
95115 95117	j

In addition, we requested the RUC to review the immunotherapy CPT codes in Table 34 because they had never been reviewed by the RUC. Standard RUC surveys were conducted.

TABLE 34

CPT code	Description
95144	Professional services for the supervision of preparation and provision of antigens for allergen immunotherapy, single dose vial(s) (specify number of vials).
95165	Professional services for the supervision of preparation and provision of antigens for allergen immunotherapy; single or multiple antigens (specify number of doses).

RUC Recommendations

The RUC reviewed the specialty society recommendations, and survey results recommended that CPT codes 95004, 95024, and 95027 be referred to the CPT Editorial Panel for clarification and possible revision. The RUC recommended that the current work RVUs be maintained for CPT codes

95144 and 95165, because there was no compelling evidence for a change. The RUC-recommended work RVUs for these CPT codes are: 95144 = 0.06 work RVUs; and 95165 = 0.06 work RVUs.

CMS Proposed Valuation

We are in agreement with these RUC-recommended work RVUs for allergy and immunology services.

(iii) Pediatric codes

The AAP requested that the RUC review eight pediatric-related CPT codes for this 5-Year Review (see Table 35). However, two of these CPT codes (90473 and 90474) were subsequently withdrawn by AAP. The remaining six codes were referred to the CPT Editorial Panel for review.

TABLE 35

CPT code	Descriptor
54150	Circumcision, using clamp or other device; newborn.
54152	Circumcision, using clamp or other device; except newborn.
90465	Immunization administration under 8 years of age (includes percutaneous, intradermal, subcutaneous, or intramuscular injections) when the physician counsels the patient/family; first injection (single or combination vaccine/toxoid), per day.
90466	Immunization administration under 8 years of age (includes percutaneous, intradermal, subcutaneous, or intramuscular injections) when the physician counsels the patient/family; each additional injection (single or combination vaccine/toxoid), per day (List separately in addition to code for primary procedure).
90467	Immunization administration under age 8 years (includes intranasal or oral routes of administration) when the physician counsels the patient/family; first administration (single or combination vaccine/toxoid), per day.
90468	Immunization administration under age 8 years (includes intranasal or oral routes of administration) when the physician counsels the patient/family; each additional administration (single or combination vaccine/toxoid), per day (List separately in addition to code for primary procedure).
90473 90474	Immunization administration by intranasal or oral route; one vaccine (single or combination vaccine/toxoid). Immunization administration by intranasal or oral route; each additional vaccine (single or combination vaccine/toxoid) (List separately in addition to code for primary procedure).

(iv) Cardiology-Related Services

We requested that the RUC review five cardiology-related CPT codes (see

Table 36). The specialty societies believed that the standard RUC survey results indicated that the work RVUs for each code should be either maintained or decreased from their current level.

CPT code	Description
33208 93010 93015	Electrocardiogram, routine ECG with at least 12 leads; interpretation and report only. Cardiovascular stress test using maximal or submaximal treadmill or bicycle exercise, continuous electrocardiographic
93018	monitoring, and/or pharmacological stress; with physician supervision, with interpretation and report. Cardiovascular stress test using maximal or submaximal treadmill or bicycle exercise, continuous electrocardiographic monitoring, and/or pharmacological stress; interpretation and report only.

TABLE 36—Continued

CPT code	Description
93325	Doppler echocardiography color flow velocity mapping (List separately in addition to codes for echocardiography).

RUC Recommendations

The RUC reviewed the survey results and found no compelling evidence to change the work RVUs for CPT codes 33208, 93010, 93015, and 93018. However, CPT code 93325 was referred to the CPT Editorial Panel by the RUC with the recommendation that this service be bundled with CPT code 93307, Echocardiography, transthoracic, real-time with image documentation (2D) with or without M-mode recording; complete.

The RUC-recommended work RVUs for these CPT codes are as follows: 33208 = 8.12 work RVUs; 93010 = 0.17

work RVUs; 93015 = 0.75 work RVUs; and 93018 = 0.30 work RVUs.

CMS Proposed Valuation

We are in agreement with these RUCrecommended work RVUs for cardiology related services.

5. Evaluation and Management (E/M) Services

[If you choose to comment on issues in this section, please include the caption "DISCUSSION OF COMMENTS—EVALUATION AND MANAGEMENT SERVICES" at the beginning of your comments.]

A consortium of 27 organizations submitted a consensus comment letter

stating that the work of E/M services has changed significantly since the E/M codes were reviewed during the first 5-Year Review and requested that the E/M codes be reviewed (see Table 37).

In addition, the following specialty societies submitted requests that individual E/M CPT codes be reviewed: The American Academy of Family Physicians (AAFP), the American Medical Directors Association (AMDA), the American Geriatric Society (AGS), the American Association for Geriatric Psychiatry (AAGP), the ASA, and the American Academy of Home Care Physicians (AAHCP).

CPT code	Descriptor
	Office or other outpatient visit for the evaluation and
	management of a new patient, which requires these three
	key components:
	<pre>a problem focused history;</pre>
	<pre>a problem focused examination;</pre>
99201	• straightforward medical decision making.
	Counseling and/or coordination of care with other
	providers or agencies are provided consistent with the nature of the problem(s) and the patient's and/or
	family's needs. Usually, the presenting problem(s) are
	self limited or minor. Physicians typically spend 10
	minutes face-to-face with the patient and/or family.
	Office or other outpatient visit for the evaluation and
	management of a new patient, which requires these three
	key components:
	an expanded problem focused history;
	an expanded problem focused examination;
	straightforward medical decision making.
99202	Counseling and/or coordination of care with other
	providers or agencies are provided consistent with the
	nature of the problem(s) and the patient's and/or
	family's needs. Usually, the presenting problem(s) are of low to moderate severity. Physicians typically
	spend 20 minutes face-to-face with the patient and/or
	family.
	Office or other outpatient visit for the evaluation and
	management of a new patient, which requires these three
	key components:
	<pre>a detailed history;</pre>
	<pre>a detailed examination;</pre>
99203	medical decision making of low complexity.
	Counseling and/or coordination of care with other
	providers or agencies are provided consistent with the nature of the problem(s) and the patient's and/or
	family's needs. Usually, the presenting problem(s) are
	of moderate severity. Physicians typically spend 30
	minutes face-to-face with the patient and/or family.
	Office or other outpatient visit for the evaluation and
	management of a new patient, which requires these three
	key components:
	<pre>a comprehensive history;</pre>
	<pre>a comprehensive examination;</pre>
00004	medical decision making of moderate complexity.
99204	Counseling and/or coordination of care with other
	providers or agencies are provided consistent with the
	nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are
	of moderate to high severity. Physicians typically
	spend 45 minutes face-to-face with the patient and/or
	family.

99205	Office or other outpatient visit for the evaluation and management of a new patient, which requires these three key components: a comprehensive history; a comprehensive examination; medical decision making of high complexity. Counseling and/or coordination of care with other providers or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of moderate to high severity. Physicians typically spend 60 minutes face-to-face with the patient and/or family.
99211	Office or other outpatient visit for the evaluation and management of an established patient that may not require the presence of a physician. Usually, the presenting problem(s) are minimal. Typically, 5 minutes are spent performing or supervising these services.
99212	Office or other outpatient visit for the evaluation and management of an established patient, which requires at least two of these three key components: a problem focused history; a problem focused examination; straightforward medical decision making. Counseling and/or coordination of care with other providers or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are self limited or minor. Physicians typically spend 10 minutes face-to-face with the patient and/or family.
99213	Office or other outpatient visit for the evaluation and management of an established patient, which requires at least two of these three key components: • an expanded problem focused history; • an expanded problem focused examination; • medical decision making of low complexity. Counseling and coordination of care with other providers or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of low to moderate severity. Physicians typically spend 15 minutes face-to-face with the patient and/or family.

	Office or other outpatient visit for the evaluation and management of an established patient, which requires at
	least two of these three key components:
	<pre>a detailed history; a detailed examination:</pre>
	a detailed examination;medical decision making of moderate complexity.
99214	Counseling and/or coordination of care with other providers or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are
	of moderate to high severity. Physicians typically spend 25 minutes face-to-face with the patient and/or
	family. Office or other outpatient visit for the evaluation and
	management of an established patient, which requires at least two of these three key components: • a comprehensive history;
	<pre>a comprehensive examination;</pre>
00015	medical decision making of high complexity.
99215	Counseling and/or coordination of care with other
,	providers or agencies are provided consistent with the nature of the problem(s) and the patient's and/or
	family's needs. Usually, the presenting problem(s) are
	of moderate to high severity. Physicians typically
	spend 40 minutes face-to-face with the patient and/or
	family. Initial hospital care, per day, for the evaluation and
	management of a patient, which requires these three key components:
	<pre>a detailed or comprehensive history;</pre>
	a detailed or comprehensive examination; and
99221	medical decision making that is straightforward or of low complexity.
	Counseling and/or coordination of care with other providers or agencies are provided consistent with the
	nature of the problem(s) and the patient's and/or
	family's needs. Usually, the problem(s) requiring
	admission are of low severity. Physicians typically spend 30 minutes at the bedside and on the patient's
	hospital floor or unit.
	Initial hospital care, per day, for the evaluation and
	management of a patient, which requires these three key
	components:
	a comprehensive history;a comprehensive examination; and
	medical decision making of moderate complexity.
99222	Counseling and/or coordination of care with other
	providers or agencies are provided consistent with the
	nature of the problem(s) and the patient's and/or family's needs. Usually, the problem(s) requiring
	admission are of moderate severity. Physicians
	typically spend 50 minutes at the bedside and on the
L	patient's hospital floor or unit.

	Initial hospital care, per day, for the evaluation and management of a patient, which requires these three key components: a comprehensive history; a comprehensive examination; and
99223	<pre>medical decision making of high complexity. Counseling and/or coordination of care with other providers or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the problem(s) requiring</pre>
	admission are of high severity. Physicians typically spend 70 minutes at the bedside and on the patient's hospital floor or unit.
	Subsequent hospital care, per day, for the evaluation and management of a patient, which requires at least two of these three key components:
	a problem focused interval history;a problem focused examination;
99231	 medical decision making that is straightforward or of low complexity. Counseling and/or coordination of care with other
	providers or agencies are provided consistent with the nature of the problem(s) and the patient's and/or
	family's needs. Usually, the patient is stable, recovering or improving. Physicians typically spend 15 minutes at the bedside and on the patient's hospital floor or unit.
	Subsequent hospital care, per day, for the evaluation and management of a patient, which requires at least
	two of these three key components: • an expanded problem focused interval history;
	an expanded problem focused examination;
99232	medical decision making of moderate complexity. Counseling and/or coordination of care with other providers or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the patient is responding inadequately to therapy or has developed a minor complication. Physicians typically spend 25 minutes at the bedside and on the patient's hospital floor or unit.
	Subsequent hospital care, per day, for the evaluation and management of a patient, which requires at least two of these three key components:
	a detailed interval history;
	a detailed examination;medical decision making of high complexity.
99233	Counseling and/or coordination of care with other providers or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the patient is unstable or has developed a significant complication or a
	significant new problem. Physicians typically spend 35 minutes at the bedside and on the patient's hospital floor or unit.

99238	Hospital discharge day management; 30 minutes or less			
99239	Hospital discharge day management; more than 30 minutes			
99241	Office consultation for a new or established patient, which requires these three key components: a problem focused history; problem focused examination; and straightforward medical decision making. Counseling and/or coordination of care with other providers or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are self limited or minor. Physicians typically spend 15 minutes face-to-face with the patient and/or family. Office consultation for a new or established patient			
99242	Office consultation for a new or established patient, which requires these three key components: • an expanded problem focused history; • an expanded problem focused examination; and • straightforward medical decision making. Counseling and/or coordination of care with other providers or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of low severity. Physicians typically spend 30 minutes face-to-face with the patient and/or family.			
99243	Office consultation for a new or established patient, which requires these three key components: a detailed history; a detailed examination; and medical decision making of low complexity. Counseling and/or coordination of care with other providers or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of moderate severity. Physicians typically spend 40 minutes face-to-face with the patient and/or family.			
99244	Office consultation for a new or established patient, which requires these three key components: a comprehensive history; a comprehensive examination; and medical decision making of moderate complexity. Counseling and/or coordination of care with other providers or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of moderate to high severity. Physicians typically spend 60 minutes face-to-face with the patient and/or family.			

99245	Office consultation for a new or established patient, which requires these three key components: a comprehensive history; a comprehensive examination; and medical decision making of high complexity. Counseling and/or coordination of care with other providers or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of moderate to high severity. Physicians typically spend 80 minutes face-to-face with the patient and/or
99251	Initial inpatient consultation for a new or established patient, which requires these three key components: a problem focused history; a problem focused examination; and straightforward medical decision making. Counseling and/or coordination of care with other providers or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are self limited or minor. Physicians typically spend 20 minutes at the bedside and on the patient's hospital floor or unit.
99252	Initial inpatient consultation for a new or established patient, which requires these three key components: • an expanded problem focused history; • an expanded problem focused examination; and • straightforward medical decision making. Counseling and/or coordination of care with other providers or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of low severity. Physicians typically spend 40 minutes at the bedside and on the patient's hospital floor or unit.
99253	Initial inpatient consultation for a new or established patient, which requires these three key components: a detailed history; a detailed examination; and medical decision making of low complexity. Counseling and/or coordination of care with other providers or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of moderate severity. Physicians typically spend 55 minutes at the bedside and on the patient's hospital floor or unit.

	Initial inpatient consultation for a new or established			
	patient, which requires these three key components:			
	a comprehensive history;			
	<pre>a comprehensive examination; and</pre>			
	medical decision making of moderate complexity.			
99254	Counseling and/or coordination of care with other			
33234	providers or agencies are provided consistent with the			
	nature of the problem(s) and the patient's and/or			
	family's needs. Usually, the presenting problem(s) are			
	of moderate to high severity. Physicians typically			
	spend 80 minutes at the bedside and on the patient's			
	hospital floor or unit.			
	Initial inpatient consultation for a new or established			
	patient, which requires these three key components:			
·	a comprehensive history;			
	a comprehensive examination; and			
	medical decision making of high complexity.			
00055	Counseling and/or coordination of care with other			
99255	providers or agencies are provided consistent with the			
	nature of the problem(s) and the patient's and/or			
	family's needs. Usually, the presenting problem(s) are			
	of moderate to high severity. Physicians typically			
	spend 110 minutes at the bedside and on the patient's			
	hospital floor or unit.			
	Emergency department visit for the evaluation and			
	management of a patient, which requires these three key			
	components:			
	<pre>a problem focused history;</pre>			
	a problem focused examination; and			
99281	straightforward medical decision making.			
	Counseling and/or coordination of care with other			
	providers or agencies are provided consistent with the			
	nature of the problem(s) and the patient's and/or			
	family's needs. Usually, the presenting problem(s) are			
	self limited or minor.			
	Emergency department visit for the evaluation and			
	management of a patient, which requires these three key			
	components:			
	<pre>an expanded problem focused history;</pre>			
	<pre>an expanded problem focused examination; and</pre>			
99282	 medical decision making of low complexity. 			
	Counseling and/or coordination of care with other			
	providers or agencies are provided consistent with the			
	nature of the problem(s) and the patient's and/or			
	family's needs. Usually, the presenting problem(s) are			
	of low to moderate severity.			
1	of for to moderate beverley.			

	Emergency department visit for the evaluation and
	management of a patient, which requires these three key components:
	<pre>an expanded problem focused history;</pre>
	 an expanded problem focused examination; and
99283	 medical decision making of moderate complexity.
	Counseling and/or coordination of care with other
	providers or agencies are provided consistent with the
	nature of the problem(s) and the patient's and/or
	family's needs. Usually, the presenting problem(s) are
	of moderate severity.
	Emergency department visit for the evaluation and
	management of a patient, which requires these three key
	components:
	a detailed history;
	a detailed examination; and
99284	medical decision making of moderate complexity. Counseling and/or coordination of care with other
7,7201	providers or agencies are provided consistent with the
	nature of the problem(s) and the patient's and/or
	family's needs. Usually, the presenting problem(s) are
	of high severity, and require urgent evaluation by the
	physician but do not pose an immediate significant
	threat to life or physiologic function.
	Emergency department visits for the evaluation and
	management of a patient, which requires these three key components within the constraints imposed by the
	urgency of the patient's clinical condition and/or
	mental status:
	<pre>a comprehensive history;</pre>
99285	<pre>a comprehensive examination; and</pre>
99265	medical decision making of high complexity.
	Counseling and/or coordination of care with other
	providers or agencies are provided consistent with the
	nature of the problem(s) and the patient's and/or
	family's needs. Usually, the presenting problem(s) are
	of high severity and pose an immediate significant threat to life or physiologic function.
	Critical care, evaluation and management of the
99291	critically ill or critically injured patient; first
	30-74 minutes
	Critical care, evaluation and management of the
99292	critically ill or critically injured patient; each
	additional 30 minutes (List separately in addition to
L	code for primary service)

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Standard RUC surveys of the E/M services were conducted by a coalition of medical specialty societies. Recommendations of the coalition, as well as comments from the coalition of surgical specialties, were considered by the RUC workgroup.

RUC Recommendations

The RUC E/M workgroup conferred via conference call throughout the summer of 2005 and reviewed previous studies and methodologies used to evaluate the physician work related to the E/M services. At the first meeting in August of 2005, the workgroup

considered the recommendations of the coalition of medical specialty societies, as well as the comments of the coalition of surgical specialties that countered the arguments presented regarding increased physician work. After extensive discussion, the workgroup agreed that there was evidence that incorrect assumptions were made in the previous valuation of these services. The workgroup reviewed each E/M code extensively, reviewing the survey from the coalition of medical specialties, comparing the codes to reference codes and considering comments from the surgical coalition and other meeting attendees.

At the RUC meeting in October 2005, the RUC agreed that there was compelling evidence to review the E/M services because of evidence that incorrect assumptions were made in the previous valuation of the services. The RUC approved final recommendations for 26 of these codes, interim recommendations for six codes (CPT codes 99222, 99223, 99232, 99233, 99291, and 99292) and postponed the review of three codes (CPT codes 99213, 99214, and 99215) to the February 2006 meeting.

At the February 2006 meeting, the RUC reached consensus on the recommended work values for all the outstanding E/M codes. As an example of the RUC review process, we are including the RUC notes on the rationale used to recommend a revised work value for CPT code 99213, the mid-level office visit, which is also the most frequently billed code in the PFS:

"The RUC agreed that the compelling evidence to review CPT code 99213 is that incorrect assumptions were made in the previous valuation of CPT code 99213 (that is, the assumptions made by Harvard and CMS are flawed). The RUC extensively discussed CPT code 99213 (physician time: pre- = 3, intra- = 15, and post- = 5) and agreed that this code is slightly more work than CPT code 99202 (recommended work RVU = 0.88; physician time: pre- = 2, intra- = 15, and post- = 5). It was noted the content for CPT code 99213 represents a higher level of intensity as the medical decision making is "low" for CPT code 99213, versus "straightforward" for CPT code 99202. CMS also provided utilization data that indicated that diagnosis and number of diagnosis were more significant for CPT code 99213 than CPT code 99202. Finally, the survey respondents agreed with this relationship, as the survey median work RVU for "all" survey respondents was 1.10 for CPT code 99213 and 1.05 for CPT code 99202. Utilizing this relationship and the recommended work RVU of 0.88 for CPT code 99202, the RUC determined that a work RVU of 0.92 for CPT code 99213 is appropriate. In addition, the RUC agreed that CPT code 99213 is similar in work to CPT code 93307

Echocardiography, transthoracic, real-time with image documentation (2D) with or without M-mode recording; complete (work RVU = 0.92, physician time: pre- = 5, intra- = 18, and post- = 5), which is a code included on the RUC's Multi-Specialty Points of

Comparison (MPC). It was also noted that the 25th percentile of the 'all' survey respondent, weighted survey data was 0.95 RVUs. The RUC recommends a work RVU of 0.92 for CPT code 99213 (physician time: pre- = 3, intra- = 15, and post- = 5)."

The RUC also recommended that the full increase for these codes be incorporated into the surgical global periods for each CPT code with a global period of 010 and 090.

Based on a review of the survey information, the RUC recommended that the work RVUs for the following CPT codes be maintained: 99201 = 0.45 work RVUs; 99202 = 0.88 work RVUs; 99203 = 1.34 work RVUs; 99211 = 0.17 work RVUs; 99212 = 0.45 work RVUs; 99238 = 1.28 work RVUs; and 99241 = 0.64 work RVUs.

The RUC also recommended that the work RVUs for the following CPT codes be increased: 99204 = 2.30 work RVUs; 99205 = 3.00 work RVUs: 99213 = 0.92 work RVUs; 99214 = 1.42 work RVUs; 99215 = 2.00 work RVUs; 99221 = 1.88 work RVUs; 99222 = 2.56 work RVUs; 99223 = 3.78 work RVUs; 99231 = 0.76 work RVUs: 99232 = 1.39 work RVUs: 99233 = 2.00 work RVUs: 99239 = 1.90 work RVUs; 99242 = 1.34 work RVUs; 99243 = 1.88 work RVUs; 99244 = 3.02 work RVUs; 99245 = 3.77 work RVUs; 99251 = 1.00 work RVUs: 99252 = 1.50 work RVUs; 99253 = 2.27 work RVUs; 99254 = 3.29 work RVUs; 99255 = 4.00 work RVUs; 99281 = 0.45 work RVUs; 99282 = 0.88 work RVUs; 99283 = 1.34 work RVUs: 99284 = 2.56 work RVUs: 99285 = 3.80 work RVUs; 99291 = 4.50

work RVUs; and 99292 = 2.25 work RVUs.

The RUC also noted that twelve E/M codes (nursing facility and domiciliary care) originally submitted had been deleted by CPT and replaced by new CPT codes that were reviewed by the RUC last year. These new CPT codes were included in the CY 2006 PFS final rule with comment period (70 FR 70116) and the associated RVUs were considered interim and subject to comment. Therefore, these new CPT codes were not included as part of the 5-Year Review.

CMS Proposed Valuation

We are in agreement with these RUC recommended work RVUs for E/M services. We also agree with the recommendation that the full increase for these codes should be incorporated into the surgical global periods for each CPT code with a global period of 010 and 090.

6. Cardiothoracic Surgery

[If you choose to comment on issues in this section, please include the caption "DISCUSSION OF COMMENTS—CARDIOTHORACIC SURGERY" at the beginning of your comments.]

a. Congenital Codes

The STS/ American Association for Thoracic Surgery (AATS) submitted the congenital cardiac surgical CPT codes for review (see Table 38).

TABLE 38

CPT code Descriptor	
33414	Repair of left ventricular outflow tract obstruction by patch enlargement of the outflow tract.
33416	Ventriculomyotomy (-myectomy) for idiopathic hypertrophic subaortic stenosis (e.g., asymmetric septal hypertrophy).
33505	Repair of anomalous coronary artery from pulmonary artery origin; with construction of intrapulmonary artery tunnel (Takeuchi procedure).
33665	Repair of intermediate or transitional atrioventricular canal, with or without atrioventricular valve repair.
33684	Closure of ventricular septal defect, with or without patch; with pulmonary valvotomy or infundibular resection (acyanotic).
33688	Closure of ventricular septal defect, with or without patch; with removal of pulmonary artery band, with or without gusset.
33771	Repair of transposition of the great arteries with ventricular septal defect and subpulmonary stenosis; with surgical enlargement of ventricular septal defect.
33779	Repair of transposition of the great arteries, aortic pulmonary artery reconstruction (e.g., Jatene type); with removal of pulmonary band.
33781	Repair of transposition of the great arteries, aortic pulmonary artery reconstruction (e.g., Jatene type); with repair of sub-pulmonic obstruction.

The commenters stated that at the second 5-Year Review, many of the more common congenital cardiac surgical codes were reviewed, and the values were adjusted. However, at that time, these much less commonly performed congenital cardiac surgical codes were not surveyed due to resource and time constraints. The commenter believed that this has created rank order

anomalies within these families of

Standard RUC surveys were conducted for the services in Table 38. However, there was a low response rate that was attributable to these procedures being infrequently performed by a small number of surgeons.

RUC Recommendations

The RUC believed that the current work RVUs for the codes presented created rank order anomalies in terms of the physician work relative value, but, during the review, the RUC agreed that a number of the reference procedures had inaccurate physician times. When the reference code times were compared

with the surveyed times for the codes under review, the RUC noted inconsistencies in all time segments. including intra-service time. The RUC reviewed the survey data and the data for the reference codes, and made recommendations for work RVUs to place the surveyed codes in proper rank order. Recommendations for work RVUs reflected the survey's 25th percentile, the median survey value, or the timeadjusted survey data, which was based on time adjustments for certain portions of the service when compared to the reference codes. Due to concern about the accuracy of time for some of the reference codes, the RUC also recommended that the specialty society conduct future surveys for physician

time only for CPT codes 33660, 33670, 33506, 33770, and 33780. However, the RUC agreed that the new 5-Year Review values and times could not be used to justify changes in the relative values of the reference services.

The RUC-recommended work RVUs for these CPT codes are as follows: 33414 = 36.52 work RVUs; 33416 = 34.25 work RVUs; 33505 = 36.00 work RVUs; 33665 = 32.98 work RVUs; 33684 = 32.50 work RVUs; 33688 = 32.88 work RVUs; 33771 = 38.50 work RVUs; 33779 = 41.00 work RVUs; and 33781 = 41.00 work RVUs.

b. Adult Cardiac and General Thoracic Codes

The STS/ATTS submitted 46 adult cardiac CPT codes for review and 27 general thoracic CPT codes for review but subsequently withdrew two CPT codes (32095 and 35600). The specialty believed many of these CPT codes needed to be reviewed due to the rank order anomalies that exist in these families of CPT codes (see Table 39).

We submitted two CPT codes for review, 32020 and 39400; however, no specialty expressed an interest in conducting a survey for CPT code 32020 so there was no RUC recommendation forwarded for this service. (See Table 39 for all codes submitted.)

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TABLE 39:

	GENERAL		ADULT
CPT code	Descriptor	CPT code	Descriptor
32020	Tube thoracostomy with or without water seal (eg, for abscess, hemothorax, empyema) (separate procedure)	33140	Transmyocardial laser revascularization, by thoracotomy; (separate procedure)
32095	Thoracotomy, limited, for biopsy of lung or pleura	33141	Transmyocardial laser revascularization, by thoracotomy; performed at the time of other open cardiac procedure(s) (List separately in addition to code for primary procedure)
32141	Thoracotomy, major; with excision-plication of bullae, with or without any pleural procedure	33300	Repair of cardiac wound; without bypass
32442	Removal of lung, total pneumonectomy; with resection of segment of trachea followed by broncho-tracheal anastomosis (sleeve pneumonectomy)	33305	Repair of cardiac wound; with cardiopulmonary bypass
32445	Removal of lung, total pneumonectomy; extrapleural	33400	Valvuloplasty, aortic valve; open, with cardiopulmonary bypass
32484	Removal of lung, other than total pneumonectomy; single segment (segmentectomy)	33405	Replacement, aortic valve, with cardiopulmonary bypass; with prosthetic valve other than homograft or stentless valve
32486	Removal of lung, other than total pneumonectomy; with circumferential resection of segment of bronchus followed by broncho-bronchial anastomosis (sleeve lobectomy)	33406	Replacement, aortic valve, with cardiopulmonary bypass; with allograft valve (freehand)
32488	Removal of lung, other than total pneumonectomy; all remaining lung following previous removal of a portion of lung (completion pneumonectomy)	33410	Replacement, aortic valve, with cardiopulmonary bypass; with stentless tissue valve
32540	Extrapleural enucleation of empyema (empyemectomy)	33411	Replacement, aortic valve; with aortic annulus enlargement, noncoronary cusp
32651	Thoracoscopy, surgical; with partial pulmonary decortication	33413	Replacement, aortic valve; by translocation of autologous pulmonary valve with allograft replacement of pulmonary valve (Ross procedure)
32652	Thoracoscopy, surgical; with total pulmonary decortication, including intrapleural pneumonolysis	33415	Resection or incision of subvalvular tissue for discrete subvalvular aortic stenosis
32653	Thoracoscopy, surgical; with removal of intrapleural foreign body or fibrin deposit	33425	Valvuloplasty, mitral valve, with cardiopulmonary bypass;

	GENERAL		ADULT
CPT code	Descriptor	CPT code	Descriptor
32654	Thoracoscopy, surgical; with control of traumatic hemorrhage	33426	Valvuloplasty, mitral valve, with cardiopulmonary bypass; with prosthetic ring
32655	Thoracoscopy, surgical; with excision-plication of bullae, including any pleural procedure	33427	Valvuloplasty, mitral valve, with cardiopulmonary bypass; radical reconstruction, with or without ring
32657	Thoracoscopy, surgical; with wedge resection of lung, single or multiple	33430	Replacement, mitral valve, with cardiopulmonary bypass
32662	Thoracoscopy, surgical; with excision of mediastinal cyst, tumor, or mass	33460	Valvectomy, tricuspid valve, with cardiopulmonary bypass
32663	Thoracoscopy, surgical; with lobectomy, total or segmental	33463	Valvuloplasty, tricuspid valve; without ring insertion
32665	Thoracoscopy, surgical; with esophagomyotomy (Heller type)	33464	Valvuloplasty, tricuspid valve; with ring insertion
32815	Open closure of major bronchial fistula	33465	Replacement, tricuspid valve, with cardiopulmonary bypass
39220	Excision of mediastinal tumor	33474	Valvotomy, pulmonary valve, open heart; with cardiopulmonary bypass
39400	Mediastinoscopy, with or without biopsy	33475	Replacement, pulmonary valve
43108	Total or near total esophagectomy, without thoracotomy; with colon interposition or small intestine reconstruction, including intestine mobilization, preparation and anastomosis(es)	33510	Coronary artery bypass, vein only; single coronary venous graft
43113	Total or near total esophagectomy, with thoracotomy; with colon interposition or small intestine reconstruction, including intestine mobilization, preparation, and anastomosis(es)	33511	Coronary artery bypass, vein only; two coronary venous grafts
43116	Partial esophagectomy, cervical, with free intestinal graft, including microvascular anastomosis, obtaining the graft and intestinal reconstruction	33512	Coronary artery bypass, vein only; three coronary venous grafts

	GENERAL	ADULT	
CPT	GENERAL	CPT	ADULT
code	Descriptor	code	Descriptor
43118	Partial esophagectomy, distal two-thirds, with thoracotomy and separate abdominal incision, with or without proximal gastrectomy; with colon interposition or small intestine reconstruction, including intestine mobilization, preparation, and anastomosis(es)	33513	Coronary artery bypass, vein only; four coronary venous grafts
43121	Partial esophagectomy, distal two-thirds, with thoracotomy only, with or without proximal gastrectomy, with thoracic esophagogastrostomy, with or without pyloroplasty	33514	Coronary artery bypass, vein only; five coronary venous grafts
43123	Partial esophagectomy, thoracoabdominal or abdominal approach, with or without proximal gastrectomy; with colon interposition or small intestine reconstruction, including intestine mobilization, preparation, and anastomosis(es)	33516	Coronary artery bypass, vein only; six or more coronary venous grafts
43124	Total or partial esophagectomy, without reconstruction (any approach), with cervical esophagostomy	33517	Coronary artery bypass, using venous graft(s) and arterial graft(s); single vein graft (List separately in addition to code for arterial graft)
43135	Diverticulectomy of hypopharynx or esophagus, with or without myotomy; thoracic approach	33518	Coronary artery bypass, using venous graft(s) and arterial graft(s); two venous grafts (List separately in addition to code for arterial graft)
		33519	Coronary artery bypass, using venous graft(s) and arterial graft(s); three venous grafts (List separately in addition to code for arterial graft) Coronary artery bypass,
		33521	using venous graft(s) and arterial graft(s); four venous grafts (List separately in addition to code for arterial graft)

	GENERAL		ADULT
CPT code	Descriptor	CPT code	Descriptor
code		33522	Coronary artery bypass, using venous graft(s) and arterial graft(s); five venous grafts (List separately in addition to code for arterial graft)
		33523	Coronary artery bypass, using venous graft(s) and arterial graft(s); six or more venous grafts (List separately in addition to code for arterial graft)
		33530	Reoperation, coronary artery bypass procedure or valve procedure, more than one month after original operation (List separately in addition to code for primary procedure)
·		33533	Coronary artery bypass, using arterial graft(s); single arterial graft
		33534	Coronary artery bypass, using arterial graft(s); two coronary arterial grafts
		33535	Coronary artery bypass, using arterial graft(s); three coronary arterial grafts
		33536	Coronary artery bypass, using arterial graft(s); four or more coronary arterial grafts
		33542	Myocardial resection (eg, ventricular aneurysmectomy)
		33545	Repair of postinfarction ventricular septal defect, with or without myocardial resection
		33641	Repair atrial septal defect, secundum, with cardiopulmonary bypass, with or without patch
		33860	Ascending aorta graft, with cardiopulmonary bypass, with or without valve suspension;
		33863	Ascending aorta graft, with cardiopulmonary bypass, with or without valve suspension; with aortic root replacement using composite prosthesis and coronary reconstruction
		33945	Heart transplant, with or without recipient cardiectomy
		35600	Harvest of upper extremity artery, one segment, for coronary bypass procedure
		35820	Exploration for postoperative hemorrhage, thrombosis or infection; chest

The RUC had previously approved a building-block methodology based on the STS database, which would provide a mean intra-service time for the adult cardiac and general thoracic codes, as well as the procedure-specific length of stay. Two intensity surveys were also conducted and the final recommended intensity was an average of the two survey results. The remaining preservice and post-service inputs were derived through a panel of cardiac surgeons.

The add-on CPT codes (33141, 33517 through 33523 and 33530) were evaluated by subtracting the time data for the base code from the time data for the combined base and add-on codes, with the results weighted for frequency of occurrence.

RUC Recommendations

The RUC workgroup reviewed the data elements for each code on a codeby-code basis. Most of the discussion focused on the number and level of post-operative visits, as well as the preservice time. For the adult cardiac and general thoracic codes, the RUC agreed that the pre-service time was overstated and needed to reflect previously approved RUC pre-service times. Also, the RUC questioned the total times allocated to the codes when compared to a normal surgical work week. The workgroup developed a pre-service time standard that was used for a majority of the codes. This standard consisted of 60 minutes for evaluation, 15 minutes for positioning, and 20 minutes for scrub dress and wait time. For emergent procedures, the pre-service times were set at 10 minutes for evaluation, 12 minutes for positioning, and 15 minutes for scrub dress and wait time. The immediate post-service time was examined in conjunction with other visits on the same day of surgery. For most of the codes, the immediate postservice time was standardized at 40 minutes.

The intra-service times were derived from the STS database with mean times used for the adult cardiac codes and median times for the general thoracic codes. Because the general thoracic codes have a much lower number of cases in the database, the STS believed that the median was more appropriate. The RUC agreed with the specialty society that critical care visits should be used in the STS building-block methodology for all of the adult cardiac codes and for 13 of the general thoracic codes.

The assignment of the level of critical care services was recommended for each code based on the STS panel's knowledge and experience in caring for

these patients, within the framework of the duration of mechanical ventilation and the length of intensive care unit (ICU) stay provided by appropriate data in the STS database. The RUC also made changes to the hospital visits on a line-by-line basis, but used the STS length of stay data as a guide. Generally, the level of hospital visits was reduced so that the total number of visits equaled the length of stay. On the day of discharge, the RUC assigned a discharge day management code as the only service provided on that day.

During the review of various cardiothoracic surgery procedures, the RUC determined that several of the reference service codes used in the analysis of surveyed codes (specifically, CPT codes 33506, 33660, 33670, 33770 and 33780) had inaccurate physician times associated with them. The RUC instructed the specialty society to conduct a survey of time for these reference codes; however, these times could not be used to justify new relative values

The RUC recommended work RVUs for these CPT codes were as follows:

General Thoracic codes: 32141 = 23.90 work RVUs; 32442 = 51.45 work RVUs; 32445 = 57.74 work RVUs; 32484= 23.25 work RVUs; 32486 = 39.44 work RVUs: 32488 = 38.95 work RVUs: 32540 = 26.42 work RVUs; 32651 = 16.64 work RVUs; 32652 = 26.35 work RVUs; 32653 = 16.24 work RVUs; 32654 = 17.73 work RVUs: 32655 = 14.69 work RVUs; 32657 = 11.90 work RVUs; 32662 = 14.29 work RVUs; 32663 = 23.00 work RVUs; 32665 = 19.56 work RVUs; 32815 = 42.94 work RVUs; 39220 = 18.40 work RVUs; 39400 = 7.61 work RVUs; 43108 = 76.55 work RVUs; 43113 = 73.23 work RVUs; 43116 = 87.16 work RVUs; 43118 = 61.08 work RVUs; 43121 = 46.59 work RVUs; 43123 = 76.14 work RVUs; 43124 = 60.61 work RVUs; 43135 = 24.20 work RVUs. As noted above in this section. there was no RUC recommendation forwarded for CPT code 32020.

 $Adult\ Cardiac\ codes: 33140 = 25.49$ work RVUs; 33141 = 2.43 work RVUs; 33300 = 40.03 work RVUs; 33305 = 70.21 work RVUs; 33400 = 38.33 workRVUs; 33405 = 37.82 work RVUs; 33406 = 49.18 work RVUs; 33410 = 42.91 work RVUs; 33411 = 56.91 work RVUs; 33413 = 56.19 work RVUs; 33415 = 34.58 work RVUs; 33425 = 45.97 work RVUs; 33426 = 39.78 work RVUs; 33427 = 41.82 work RVUs; 33430 = 46.45 work RVUs; 33460 = 40.19 work RVUs; 33463 = 50.93 work RVUs; 33464 = 40.30 work RVUs; 33465 = 45.72 work RVUs; 33474 = 36.39 work RVUs; 33475 = 39.39 work RVUs; 33510 = 31.75 work RVUs; 33511 = 35.22 work RVUs; 33512 = 40.26 work RVUs; 33513 = 41.65 work RVUs; 33514 = 44.36 work

RVUs; 33516 = 46.04 work RVUs; 33517 = 3.36 work RVUs; 33518 = 7.41 work RVUs; 33519 = 9.91 work RVUs; 33521 = 12.01 work RVUs; 33522 = 13.53 work RVUs; 33523 = 15.39 work RVUs; 33530 = 9.78 work RVUs; 33533 = 30.85 work RVUs; 33534 = 36.98 work RVUs; 33535 = 41.85 work RVUs; 33536 = 45.53 work RVUs; 33542 = 44.20 work RVUs; 33545 = 52.49 work RVUs; 33641 = 27.71 work RVUs; 33860 = 55.45 work RVUs; 33863 = 55.10 work RVUs; 33945 = 80.84 work RVUs; and 35820 = 32.24 work RVUs.

CMS Proposed Valuation

We are in agreement with the RUCrecommended work RVUs for the congenital cardiac surgery services.

As mentioned above, the general thoracic and adult cardiac surgery codes submitted to the RUC for review did not undergo the standard RUC survey methodology. Rather, the data pertaining to these codes were derived from the STS database, a voluntary registry developed by the STS that has reportedly captured data on approximately 70 percent of all cardiac surgical procedures in the United States.

We believe that the STS database, which also captures outcomes data, is a significant tool in the effort to improve the quality of patient care and we hope that this kind of data collection will be emulated by other specialties. We also believe that the time and visit data contained in this database could be a useful adjunct to the RUC's validation of the standard RUC survey results. However, we have significant concerns with its use as a tool to derive work RVUs without reference to a standard RUC survey. We have questions regarding the representativeness of the data in the STS database because it is unclear what percentage of the patients in the database is derived from academic medical centers versus community hospitals or whether the cases are selectively reported (for example, does the case mix contain a disproportionate number of complex cases?) We also would like information regarding the type of hospitals that chose not to participate in the database. Additionally, while we recognize this database has collected large numbers of cases for cardiac services, the database was not robust for the non-cardiac thoracic service

In addition, we would also want to know the median values, as well as the mean values, for the intra-service time for the adult cardiac services because the RUC's standard methodology is based on median values. Therefore, we are concerned about maintaining the relativity between these services and those where the median values were used to recommend the work RVUs. We also believe the median is a better estimate of central tendency when more extreme cases occur in either direction.

However, our main concern is not with the time data itself, but rather with how these data were translated into work RVUs because work RVUs are not calculated solely on the basis of the time it takes to perform a given procedure. The other equally important variable is the intensity of the procedure, which is a measure of the technical skill, mental effort, and psychological stress involved in performing the procedure. The standard RUC survey captures these data by comparisons to the key reference procedure, asking the responders to rate both the surveyed and reference codes on the specific intensity measures, using a scale of one

The presenting specialties used an entirely different methodology to arrive at their intensity measures by estimating the IWPUT of each service. The presenters stated that the IWPUT was estimated using two methods: IWPUT magnitude estimation and RASCH paired analysis for each code. According to the presenters, the IWPUT magnitude estimation produced direct IWPUT values and the RASCH analysis produced arbitrary scalar values as estimates of CPT code intensity rank and dispersion. These values were converted to IWPUT values by regression of the results to obtain slope, and offset of the results was based on the median value of the magnitude estimation survey. Each RASCH scalar was then converted to IWPUT with the formula y = mx + b where m is the slope and b is the y-intercept.

Though we appreciate the effort that went into such a method, we have several concerns with this approach: (1) We do not believe that the RASCH paired analysis methodology has been approved by the RUC, and has certainly not yet been accepted by CMS as a method for calculating the intensity of a service; (2) we also would want to know more about the surveys themselves, as well as the instructions to the surveyees, before agreeing to any work RVUs based on this method; and (3) we are concerned that the relativity of the fee schedule could be compromised by using such a different method to determine the work relative values of a small number of codes because current work RVUs for other services are not based on this methodology. In addition, we have a further concern regarding the appropriate relativity of the RUC recommendations for these thoracic and cardiac procedures. If we assume the

times in the STS database are accurate, by comparing the intra-service times in the STS database to the median times from the surveys done in 2000 for these codes, it appears that surgeons might often underestimate the time spent in the intra-service period. If this is actually the case here, then this could also be true for other services that would not have the benefit of this database. The acceptance of the work RVUs derived by this methodology could then produce rank order anomalies with codes done by other specialties and the relativity of the fee schedule could be compromised by the selective use of this database.

We would not want to see the RUC abandon its survey methodology, unless a better approach can be found that can be applied to all services. We understand that the standard RUC survey process is not perfect, but it does provide an even playing field for all specialties and we would be concerned if each specialty was allowed to develop its own unique method for estimating work RVUs. Therefore, we would recommend that the RUC review this issue again to determine the appropriate use of data sources other than the RUC survey.

It is our responsibility to assure all medical specialties that we will review and evaluate their services using an approach that is accepted by the AMA and CMS. However, we do not know how to use this STS data to compare the relativity of these thoracic and cardiac surgery services to services of similar intensity in other clinical areas. Therefore, we are proposing not to accept the RUC work RVU recommendations for these codes. Because the RUC did approve the use of the STS database and the specialty societies put forth a substantial effort to present their data to the RUC, based on that approval, we also do not think it would be appropriate to propose maintaining the current values.

We believe the standard RUC survey process used to evaluate the cardiac surgery codes during the second 5-Year Review had the correct incremental increase in work RVUs between codes, as well as the appropriate intensity for each code. We have calculated the IWPUT for the current values for all of the cardiac codes submitted for review (excluding the add-on codes discussed below) and multiplied the IWPUT of each code with the time proposed for that code to yield a new RVU for that service. We also calculated an IWPUT for the thoracic codes using the current values. Because we do not have survey data, we believe this is a fair way to value the proposed codes while

maintaining the incremental increase between codes. We look forward to comments on this issue and would be willing to consider future RUC recommendations if the specialty societies wish to submit standard RUC surveys for these codes.

CPT codes 33517, 33518, 33519, 33521, 33522, and 33523 are coronary surgery bypass codes using venous grafts and arterial grafts. These are addon codes used in conjunction with the primary code, a coronary arterial graft. Add-on codes reflect the additional intra-service time required to perform the additional venous anastomoses. These codes do not contain post-service time, critical care time, or hospital care. When presented to the RUC, this series of codes had critical care time and inpatient hospital care time added to the total value of the code. We will maintain the current RVU valuation for CPT codes 33517, 33518, 33519, 33521, 33522, and 33523.

Therefore, the proposed work RVUs for these CPT codes are as follows: 32141 = 13.98 work RVUs; 32442 = 32.86 work RVUs; 32445 = 34.95 work RVUs; 32484 = 20.66 work RVUs; 32486 = 28.40 work RVUs; 32488 = 28.87 work RVUs; 32540 = 19.94 work RVUs; 32651 = 14.26 work RVUs; 32652 = 20.75 work RVUs; 32653 = 18.05 work RVUs; 32654 = 15.82 work RVUs; 32655 = 13.59 work RVUs; 32657 = 13.63 work RVUs; 32662 = 16.42 work RVUs; 32663 = 18.44 work RVUs; 32665 = 15.52 work RVUs; 32815 = 31.17 work RVUs; 33140 = 19.97 work RVUs; 33141 = 4.83 work RVUs; 33300 = 25.09 work RVUs; 33305 = 27.05 work RVUs; 33400 = 36.23 work RVUs; 33405 = 36.64 work RVUs; 33406 = 45.54 work RVUs; 33410 = 35.36 work RVUs; 33411 = 52.12 work RVUs; 33413 = 51.76 work RVUs; 33414 = 36.52 work RVUs; 33415 = 27.11 work RVUs; 33416 = 34.25 work RVUs; 33425 = 34.55 work RVUs; 33426 = 37.95 work RVUs; 33427 = 39.94 work RVUs; 33430 = 45.57 work RVUs; 33460 = 23.56 work RVUs; 33463 = 36.59 work RVUs; 33464 = 26.78 work RVUs; 33465 = 28.75 work RVUs; 33474 = 23.01 work RVUs; 33475 = 41.97 work RVUs; 33505= 36.00 work RVUs; 33510 = 30.37 work RVUs; 33511 = 31.51 work RVUs; 33512 = 35.16 work RVUs; 33513 = 36.12 work RVUs; 33514 = 36.93 work RVUs; 33516 = 38.39 work RVUs; 33517 = 2.57 work RVUs; 33518 = 4.84 work RVUs; 33519 = 7.11 work RVUs; 33521 = 9.39 work RVUs; 33522 = 11.65 work RVUs; 33523 = 13.93 work RVUs; 33530 = 5.85 work RVUs; 33533 = 34.63 work RVUs; 33534 = 36.06 work RVUs; 33535 = 38.73 work RVUs; 33536 = 38.04 work RVUs; 33542 = 28.81 work RVUs; 33545 = 36.72 work RVUs; 33641 = 26.70 work RVUs; 33665 = 32.98 work RVUs; 33684 = 32.50 work RVUs; 33688 = 32.88 work RVUs; 33771 = 38.50 work RVUs; 33779 = 41.00 work RVUs; 33781 = 41.00 work RVUs; 33860= 39.29 work RVUs; 33863 = 44.93 work RVUs; 33945 = 42.04 work RVUs; 35820 = 25.53 work RVUs; 39220 = 17.39 work RVUs; 39400 = 5.60 work RVUs; 43108 = 57.20 work RVUs; 43113 = 40.41 work RVUs; 43116 = 65.85 work RVUs; 43118 = 46.37 work RVUs; 43121 = 41.80 work RVUs; 43123 = 57.14 work RVUs; 43124 = 56.51 work RVUs; and 43135 = 20.52 work RVUs.

For CPT code 32020, Tube thoracostomy with or without water seal (e.g., for abscess, hemothorax, empyema)(separate procedure), although there was no RUC recommendation provided due to the lack of a level interest for surveying this code, we continue to believe that this service is misvalued. This code was presented to the RUC during the two previous 5-Year Reviews. Based on a lack of compelling evidence, the RUC

recommended maintaining the work RVUs, and we accepted this recommendation. However, we believe that since valuation of this CPT code continues to be based on Harvard time data, changes in practice and technology have not been incorporated, leading to an overvaluation of this service. The Harvard time data for this service includes: Pre-service time of 46 minutes, intra-service time of 24 minutes, post-service time of 25 minutes, 9 minutes for ICU time, 15 minutes for hospital days, and 2 minutes for office visits for a total time of 121 minutes. We believe that CPT code 32020 is comparable to CPT code 38300, Drainage of lymph node abscess or lymphadenitis; simple, or CPT code 38500, Biopsy or excision of lymph node(s); open, superficial. Both of these CPT codes were reviewed by the RUC during the second 5-Year Review. The RUC times for CPT code 38500 are: preservice time of 35 minutes, intra-service

time of 30 minutes and post-service time of 15 minutes, for a total time of 80 minutes, this includes one outpatient visit resulting in a work RVU of 3.74. If the value of the outpatient visit is removed from CPT code 38500, this results in an RVU of 3.29. We believe CPT code 32020 compares favorably to 38500 and propose a work RVU of 3.29 for CPT code 32020.

7. General, Colorectal and Vascular Surgery

[If you choose to comment on issues in this section, please include the caption "DISCUSSION OF COMMENTS—GENERAL, COLORECTAL AND VASCULAR SURGERY" at the beginning of your comments.]

a. General Surgery

The American College of Surgeons (ACS) submitted the following CPT codes in Table 40 for review.

TABLE 40

CPT code	Descriptor			
38100	Splenectomy; total (separate procedure).			
38101	Splenectomy; partial (separate procedure).			
38115	Repair of ruptured spleen (splenorrhaphy) with or without partial splenectomy.			
43620	Gastrectomy, total; with esophagoenterostomy.			
43621	Gastrectomy, total; with Roux-en-Y reconstruction.			
43622				
43632				
43633	Gastrectomy, partial, distal; with Roux-en-Y reconstruction.			
43634				
	Gastrojejunostomy; without vagotomy.			
43840				
44120	Enterectomy, resection of small intestine; single resection and anastomosis.			
	Enteroenterostomy, anastomosis of intestine, with or without cutaneous enterostomy (separate procedure).			
44143	Colectomy, partial; with end colostomy and closure of distal segment (Hartmann type procedure).			
	Suture of small intestine (enterorrhaphy) for perforated ulcer, diverticulum, wound, injury or rupture; single perforation.			
44603	Suture of small intestine (enterorrhaphy) for perforated ulcer, diverticulum, wound, injury or rupture; multiple perforations.			
44604	forations); without colostomy.			
	Suture of large intestine (colorrhaphy) for perforated ulcer, diverticulum, wound, injury or rupture (single or multiple perforations); with colostomy.			
47480	Cholecystotomy or cholecystostomy with exploration, drainage, or removal of calculus (separate procedure).			
47490				
47510				
47511	Introduction of percutaneous transhepatic stent for internal and external biliary drainage.			
	Change of percutaneous biliary drainage catheter.			
47530				
47760	Anastomosis, of extrahepatic biliary ducts and gastrointestinal tract.			
47765	Anastomosis, of intrahepatic ducts and gastrointestinal tract.			
47780	Anastomosis, Roux-en-Y, of extrahepatic biliary ducts and gastrointestinal tract.			
47785	Anastomosis, Roux-en-Y, of intrahepatic biliary ducts and gastrointestinal tract.			
49000				
	Reopening of recent laparotomy.			
49010	Exploration, retroperitoneal area with or without biopsy(s) (separate procedure).			

In addition, the American Society of Colon and Rectal Surgeons (ASCRS) submitted six CPT codes for review (see Table 41).

TABLE 41

CPT code	Descriptor
	Colectomy, total, abdominal, without proctectomy; with ileostomy or ileoproctostomy. Colectomy, total, abdominal, without proctectomy; with continent ileostomy. Colectomy, total, abdominal, without proctectomy; with rectal mucosectomy, ileoanal anastomosis, with or without loop ileostomy.
44153	Colectomy, total, abdominal, without proctectomy; with rectal mucosectomy, ileoanal anastomosis, creation of ileal reservoir (S or J), with or without loop ileostomy.
44155 44156	Colectomy, total, abdominal, with proctectomy; with ileostomy. Colectomy, total, abdominal, with proctectomy; with continent ileostomy.

We submitted the CPT codes in Table 42 for review.

TABLE 42

CPT code	Descriptor
47562	Colectomy, partial; with anastomosis. Laparoscopy, surgical; cholecystectomy. Repair initial inguinal hernia, age 5 years or over; reducible.

However, the following CPT codes were subsequently withdrawn from the 5-Year Review: 44604, 44605, 47480, 47490, 47510, 47511, 47525 and 47530. ASCRS also withdrew CPT codes 44152 and 44153, and is referring them to the CPT Editorial Panel.

For most codes, a standard RUC survey with over 30 responses was used. However, the surveys for CPT code 43622 had 29 responses and CPT code 43634 had 26 responses. Minisurveys, with over 30 responses, were used for CPT codes 44151 and 44156. Where NSQIP data was available, the specialty society also used an alternative methodology based on a building-block approach that used intra-service times and length of stay data from the NSQIP database to develop the recommendations. A specialty society consensus panel then assigned preservice times, immediate post-service times, as well as IWPUT estimates, with the number and level of office visits determined based on comparisons to codes requiring similar physician work.

RUC Recommendations

The RUC recommended maintaining the existing RVUs for CPT codes 44140 and 49505 because the RUC believed there was a lack of compelling evidence that the work had changed.

For those services without NSQIP data, where only survey data was used as a basis for review, the RUC recommended the survey median for CPT codes 38100, 38101, 38115, 43620, 43632, 43634, 44156, 47765. For CPT code 49010, the RUC recommended use of the survey's 25th percentile because

the RUC recommended deleting one hospital visit. For CPT code 47760, the RUC recommended the 25th percentile because the RUC believed that the 25th percentile was closer to the reference code. The RUC recommended use of the surveyed 75th percentile (25 work RVUs) for: CPT code 44603, which represents the suturing of multiple small intestinal perforations, to keep the correct rank order with CPT code 44602 (22.00 recommended work RVUs) that is used for the repair of a single perforation; CPT code 43622 because the RUC believed that the use of the median value would create a rank order anomaly; and CPT code 44151 because the RUC believed that the survey underestimated the physician time required for the service.

For CPT codes 47780 and 47785, the RUC used a building-block method to arrive at a recommendation which added 4.00 work RVUs to the recommended work RVUs for the respective base CPT codes 47760 and 47765 to account for the Roux-en-Y procedure. This resulted in recommended RVUs that were lower than the survey median for CPT code 47780 and higher for CPT code 47785.

For services for which NSQIP data were presented along with survey data, the RUC recommended the use of the surveys 25th percentile for CPT codes 19180, 47562, and 49002. The RUC used the NSQIP data to validate the recommendation to use the surveyed median work RVUs for CPT codes 43632, 43633, 43820, 43840, 44143, 44150, 44155 and 44602. Other RUC recommendations used the NSQIP data

to increase the work RVUs above the survey median and, in one instance, beyond the survey's 75th percentile. For CPT codes 44120, 44130 and 47600, the RUC believed the physicians responding to the survey underestimated their intraservice time. Therefore, the RUC applied what was believed to be an appropriate IWPUT to the additional NSQIP time and added the resulting work RVUs to the survey median.

The RUC recommended that CPT code 49000 be referred to the CPT Editorial Panel because this code is currently used for two distinct patient populations and needs to be separated into two codes to be appropriately valued.

The 5-Year Review process allows specialty societies to request that the RUC review the work RVUs of additional codes where a rank order anomaly might have been caused by a RUC 5-Year Review recommendation for codes in the same family. Upon reviewing the workgroup recommendations for the partial colectomy procedures, CPT codes 44140 and 44143, the RUC determined that other codes in the family, CPT codes 44141, 44144, 44145, 44146 and 44147, needed to be reviewed to avoid rank order anomalies.

The RUC considered these CPT codes at their February 2006 meeting. The specialty society presented standard RUC surveys for all these services. For CPT codes 44141, 44144, 44146 and 44147, the RUC recommended the survey median. However, for CPT code 44145, the RUC recommended to maintain the current value of 26.38

work RVUs because the post-operative work is slightly less than the CPT code 44144 for which 27.00 work RVUs are recommended.

The RUC-recommended work RVUs for these CPT codes were as follows: 19180 = 14.67 work RVUs: 38100 = 18.00 work RVUs; 38101 = 18.00 work RVUs; 38115 = 20.00 work RVUs; 43620 = 31.00 work RVUs: 43621 = 36.00 work RVUs; 43622 = 36.50 work RVUs; 43632 = 32.00 work RVUs; 43633 = 30.00 work RVUs: 43634 = 33.50 work RVUs: 43820 = 20.00 work RVUs; 43840 = 20.00 work RVUs; 44120 = 20.11 work RVUs; 44130 = 20.87 work RVUs; 44140 = 20.97 work RVUs; 44141 = 27.00 work RVUs; 44143 = 25.00 work RVUs; 44144 = 27.00 work RVUs: 44145 = 26.38 work RVUs: 44146 = 33.00 work RVUs; 44147 = 31.00 work RVUs; 44150 = 27.50 work RVUs; 44151 = 32.00 work RVUs; 44155 = 31.50 work RVUs; 44156 = 34.50 work RVUs; 44602 = 22.00 work RVUs; 44603 = 25.00 work RVUs; 47562 = 11.07 work RVUs; 47600 = 15.88 work RVUs; 47760 = 34.75 work RVUs; 47765 = 48.50 work RVUs; 47780 = 38.75 work RVUs; 47785 = 52.50 work RVUs; 49002 = 15.75 work RVUs; 49010 = 15.00 work RVUs; and 49505 = 7.59 work RVUs.

CMS Proposed Valuation

We agree with the RUC-recommended work RVUs for CPT codes 19180, 38100, 38101, 38115, 43620, 43621, 43622, 43632, 43633, 43634, 43820, 43840, 44140, 44141, 44143, 44144, 44145, 44146, 44147, 44150, 44151, 44155, 44156, 44602, 44603, 47562, 47760, 47765, 47780, 47785, 49002, 49010 and 49505.

We have concerns with the RUC recommendations to use the NSQIP data to increase the work RVUs for CPT codes 44120, 44130 and 47600 above the median, and, for 47600 above the 75th percentile, from the survey. While we support the use of such a database as validation for survey results, we believe that the application of the NSQIP IWPUT to the 25-minute difference in intra-time between the survey and NSQIP is questionable. First, it is still not clear whether the NSQIP data is truly representative. Second, the

IWPUT applied to the additional 25 minutes is higher than the IWPUT for the rest of the intra-time. Third, such a methodology assumes, without evidence, that there is a linear relationship between the survey respondents' estimate of time and estimate of work RVUs; however, even if the survey time estimates had matched the NSQIP data, it is not clear whether or by how much the respondents would have increased their work value estimate. Fourth, until we have available valid and representative data such as the NSQIP for all procedures, there is the risk that applying the data randomly could distort the relativity between services. Therefore, we are proposing to use the median survey values of 18.00, 20.00 and 14.00 as the work RVUs for CPT codes 44120, 44130 and 47600, respectively.

b. Colon and Rectal Surgery

The ASCRS submitted several colorectal surgery CPT codes (see Table 43).

CPT code	Descriptor
45020	Incision and drainage of deep supralevator, pelvirectal, or retrorectal abscess.
45300	Proctosigmoidoscopy, rigid; diagnostic, with or without collection of specimen(s) by brushing or washing (separate procedure).
45303	Proctosigmoidoscopy, rigid; with dilation (e.g., balloon, guide wire, bougie).
45305	Proctosigmoidoscopy, rigid; with biopsy, single or multiple.
45307	Proctosigmoidoscopy, rigid; with removal of foreign body.
45308	Proctosigmoidoscopy, rigid; with removal of single tumor, polyp, or other lesion by hot biopsy forceps or bipolar cautery.
45309	Proctosigmoidoscopy, rigid; with removal of single tumor, polyp, or other lesion by snare technique.
45315	Proctosigmoidoscopy, rigid; with removal of multiple tumors, polyps, or other lesions by hot biopsy forceps, bipolar cautery or snare technique.
45317	Proctosigmoidoscopy, rigid; with control of bleeding (e.g., injection, bipolar cautery, unipolar cautery, laser, heater probe, stapler, plasma coagulator).
45320	Proctosigmoidoscopy, rigid; with ablation of tumor(s), polyp(s), or other lesion(s) not amenable to removal by hot biopsy forceps, bipolar cautery or snare technique (e.g., laser).
45321	Proctosigmoidoscopy, rigid; with decompression of volvulus.
45327	Proctosigmoidoscopy, rigid; with transendoscopic stent placement (includes predilation).
46040	Incision and drainage of ischiorectal and/or perirectal abscess (separate procedure).
46045	Incision and drainage of intramural, intramuscular, or submucosal abscess, transanal, under anesthesia.
46060	Incision and drainage of ischiorectal or intramural abscess, with fistulectomy or fistulotomy, submuscular, with or without
	placement of seton.
46270	
46275	
46280	Surgical treatment of anal fistula (fistulectomy/fistulotomy); complex or multiple, with or without placement of seton.
46285	Surgical treatment of anal fistula (fistulectomy/fistulotomy); second stage.
46600	
46604	Anoscopy; with dilation (e.g., balloon, guide wire, bougie).
46606	
46608	
46610	Anoscopy; with removal of single tumor, polyp, or other lesion by hot biopsy forceps or bipolar cautery.
46611	Anoscopy; with removal of single tumor, polyp, or other lesion by snare technique.
46612	Anoscopy; with removal of multiple tumors, polyps, or other lesions by hot biopsy forceps, bipolar cautery or snare technique.
46614	Anoscopy; with control of bleeding (e.g., injection, bipolar cautery, unipolar cautery, laser, heater probe, stapler, plasma coagulator).
46615	Anoscopy; with ablation of tumor(s), polyp(s), or other lesion(s) not amenable to removal by hot biopsy forceps, bipolar cautery or snare technique.
46760	Sphincteroplasty, anal, for incontinence, adult; muscle transplant.
46761	
46762	Sphincteroplasty, anal, for incontinence, adult; implantation artificial sphincter.

ASCRS subsequently withdrew CPT codes 46760, 46761 and 46762 from the 5-Year Review.

For most codes, a standard RUC survey with over 30 responses was used. A minisurvey was used for a few codes.

RUC Recommendations

The RUC agreed with the specialty society's recommendations to maintain the current work RVUs for CPT codes 46040, 46060 and 46280 because the survey data supported the existing work associated with the code.

The RUC recommended the increased work RVUs at the surveys' median work values, as requested by the specialty society, for CPT codes 45020, 46045, 46270, 46275 and 46285.

For the proctoscopy-anoscopy family of codes, the RUC agreed that the surveyed median work RVUs, and often even the 25th percentile, were inconsistent with the reference code. Therefore, the RUC did not reference the surveyed RVUs in arriving at the recommendations. Rather, the RUC used the surveyed times for each service and applied what the workgroup considered an appropriate IWPUT to these times to arrive at the recommended work RVUs for this family.

The specific RUC work RVU recommendations for these colon and rectal surgery CPT codes were as follows: 45020 = 7.75 work RVUs; 45300 = 0.91 work RVUs; 45303 = 2.22 work RVUs; 45305 = 2.01 work RVUs; 45307

= 2.22 work RVUs; 45308 = 2.01 work RVUs; 45309 = 2.22 work RVUs; 45315 = 2.22 work RVUs; 45317 = 1.08 work RVUs; 45320 = 2.43 work RVUs; 45321 = 2.76 work RVUs; 45327 = 3.63 work RVUs: 46040 = 4.95 work RVUs: 46045 = 5.50 work RVUs; 46060 = 5.68 work RVUs; 46270 = 4.50 work RVUs; 46275 = 5.00 work RVUs; 46280 = 5.97 work RVUs; 46285 = 5.00 work RVUs; 46600 = 0.49 work RVUs; 46604 = 1.08 work RVUs; 46606 = 1.76 work RVUs; 46608 = 1.95 work RVUs; 46610 = 1.95 work RVUs; 46611 = 1.08 work RVUs; 46612 = 2.14 work RVUs; 46614 = 1.08 work RVUs; and 46615 = 1.18 work RVUs.

CMS Proposed Valuation

We agree with the RUC-recommended work RVUs for CPT codes 45020, 46040, 46045, 46060, 46270, 46275, 46280, and 46285.

We are proposing not to accept the RUC recommendations for all the presented codes in the proctoscopyanoscopy family. We are proposing to maintain the current work RVUs for CPT codes 45300, 45303, 45305, 45307, 45308, 45309, 45315, 45317, 45320, 45321, 45327, 46600, 46604, 46606, 46608, 46610, 46611, 46612, 46614 and 46615.

We believe that the method used by the RUC to obtain work values for these services was flawed. The calculation of the recommended work RVUs depended solely on applying a workgroup-derived

IWPUT to the surveyed physician time from surveys that were considered otherwise unusable. We do not believe that the use of IWPUT, in the absence of other supporting data, has been previously accepted by the RUC. We believe the RUC has established rules that state that IWPUT cannot be the sole rationale for valuation and it appears that this workgroup might not have adhered to that standard. We believe that this use of IWPUT differs from that used by workgroup one, as described above. There were acceptable surveys that were used as anchors to create the correct rank order for the dermatology codes without adequate surveys. In addition, for the dermatology codes, the calculation was generally used to validate the current or lower work RVUs for the services, while for these scope codes, the calculation was not used to validate but to support significant increases for many of the services. However, if the specialty society wishes to resurvey these codes and the RUC submits work RVU recommendations to CMS, we would certainly be willing to consider them.

c. Vascular Surgery

The Society for Vascular Surgery (SVS) submitted the CPT codes in Table 44 for review. However, the specialty society subsequently withdrew CPT codes 27603, 35612 and 35642 from review.

TABLE 44

CPT code	Descriptor
27603	Incision and drainage, leg or ankle; deep abscess or hematoma.
27880	Amputation, leg, through tibia and fibula.
28805	Amputation, foot; transmetatarsal.
33877	
34001	
34201	Embolectomy or thrombectomy, with or without catheter; femoropopliteal, aortoiliac artery, by leg incision.
34471	The second of th
35081	Direct repair of aneurysm, pseudoaneurysm, or excision (partial or total) and graft insertion, with or without patch graft; for aneurysm, pseudoaneurysm, and associated occlusive disease, abdominal aorta.
35102	Direct repair of aneurysm, pseudoaneurysm, or excision (partial or total) and graft insertion, with or without patch graft; for aneurysm, pseudoaneurysm, and associated occlusive disease, abdominal aorta involving iliac vessels (common, hypogastric, external).
35216	
35381	
35501	
35506	
35507	
35508	J 7
35509	
35515	
35516	
35541	
35546	
35556	
35566	
35583	
35585	
35601	
35606	Bypass graft, with other than vein; carotid-subclavian.

TABLE 44—Continued

CPT code	Descriptor
	Bypass graft, with other than vein; subclavian-axillary. Bypass graft, with other than vein; aortoiliac or bi-iliac. Bypass graft, with other than vein; carotid-vertebral. Ligation and division and complete stripping of long or short saphenous veins. Excision of carotid body tumor; without excision of carotid artery.

For all codes, a standard RUC survey was used. All but the following CPT codes had 30 or more responses: 34471 (28 responses), 35508 (23 responses), 35515 (18 responses), 35516 (29 responses), 35616 (29 responses), 35616 (29 responses). The specialty society also used the intra-service times and length of stay data from the NSQIP database to develop some of its recommendations. A specialty society consensus panel then assigned preservice times, and immediate postservice times, as well as IWPUT estimates.

RUC Recommendations

The RUC agreed with the specialty society that the following CPT codes cannot undergo the RUC evaluation process before having their descriptors revised and recommended referring these CPT codes to the CPT Editorial panel: 35381, 35501, 35507, 35509, 35541, 35546, 35601, 35641 and 37720. (Note that CPT code 37720 was subsequently deleted by CPT for CY 2006.) For the remaining codes, the RUC reviewed both the survey data and the NSQIP data, where provided, for each procedure. In many instances, where the NSOIP time and length of stay data were available, the RUC believed that the physicians responding to the survey underestimated their intra-service time and that the NSQIP data more accurately reflected the actual intraservice times for these procedures.

The RUC accepted the specialty society's requested increase in work RVUs for 12 CPT codes, agreeing with the specialty society that these

procedures were undervalued due to compelling evidence such as changes in length of stay, changes in patient populations, and incorrect assumptions made in the previous valuation of the service. For CPT codes 27880, 28805, 34001, 34471, 35506, 35508, 35515, 35516, 35606, 60600 and 60605, the RUC-recommended work RVUs were at the survey median or lower. However, for CPT code 33877, the RUC accepted a work value greater than the survey's 75th percentile that was derived from a building-block approach using the NSQIP data for the service. The RUC increased the work RVUs for nine codes. For eight of the codes, the increases were at levels below those requested by the specialty society, and for one code the increase was slightly higher than the requested work RVUs. For CPT codes 35081, 35216, 35583 and 35616, the recommended increase was no higher than the surveyed median work RVUs. For CPT codes 34201, 35102, 35556, 35566, and 35585, the RUC accepted work values greater than the survey's median percentile that were derived from a building-block approach using the NSQIP data for the service.

The specific RUC-recommended work RVUs for these CPT codes are as follows: 27880 = 13.75 work RVUs; 28805 = 11.25 work RVUs; 33877 = 64.04 work RVUs; 34001 = 16.25 work RVUs; 34201 = 18.31 work RVUs; 34471 = 20.00 work RVUs; 35081 = 31.00 work RVUs; 35102 = 36.28 work RVUs; 35216 = 34.00 work RVUs; 35506 = 23.75 work RVUs; 35508 = 25.00 work RVUs; 35515 = 25.00 work RVUs; 35516 = 23.00 work RVUs; 35556 = 27.25 work RVUs; 35566

= 32.00 work RVUs; 35583 = 26.00 work RVUs; 35585 = 32.00 work RVUs; 35606 = 21.00 work RVUs; 35616 = 21.00 work RVUs; 60600 = 24.00 work RVUs; and 60605 = 30.50 work RVUs.

CMS Proposed Valuation

We accept the RUC-recommended work RVUs for CPT codes 27880, 28805, 34001, 34471, 35216, 35506, 35508, 35515, 35516, 35606, 60600, 60605, 35081, 35583, and 35616.

We disagree with the RUC recommendations for CPT codes 33877, 34201, 35102, 35556, 35566, and 35585. For these services, the RUC used the NSQIP time data to increase the work values above the survey median, and even for above several codes the 75th percentile. For the reasons discussed above, we reject such a use of the NSQIP data at this time. Therefore, we are proposing to use the survey median work RVUs for these CPT codes: 33877 = 53.00 work RVUs; 34201 = 17.00 work RVUs; 35102 = 34.00 work RVUs; 35556 = 25.00 work RVUs; 35566 = 30.00 work RVUs; and 35585 = 30.00 work RVUs.

8. Otolaryngology and Ophthalmology

[If you choose to comment on issues in this section, please include the caption "DISCUSSION OF COMMENTS-OTOLARYNGOLOGY AND OPTHALMOLOGY" at the beginning of your comments.]

a. Otolaryngology Procedures

The American Academy of Otolaryngology—Head and Neck Surgery (AAO-HNS) submitted the CPT codes in Table 45 for review.

TABLE 45

CPT code	Descriptor
31225	Maxillectomy; without orbital extenteration.
31230	Maxillectomy; with orbital exenteration (en bloc).
31360	Laryngectomy; total, without radical neck dissection.
31365	Laryngectomy; total, with radical neck dissection.
31367	Laryngectomy; subtotal supraglottic, without radical neck dissection.
31368	Laryngectomy; subtotal supraglottic, with radical neck dissection.
31370	Partial laryngectomy (hemilaryngectomy); horizontal.
31375	Partial laryngectomy (hemilaryngectomy); laterovertical.
31380	Partial laryngectomy (hemilaryngectomy); anterovertical.
	Partial laryngectomy (hemilaryngectomy); antero-latero-vertical.

TABLE 45—Continued

CPT code	Descriptor
31390	Pharyngolaryngectomy, with radical neck dissection; without reconstruction.
31395	Pharyngolaryngectomy, with radical neck dissection; with reconstruction.
38700	Suprahyoid lymphadenectomy.
38720	Cervical lymphadenectomy (complete).
38724	Cervical lymphadenectomy (modified radical neck dissection).
41120	Glossectomy; less than one-half tongue.
41130	Glossectomy; hemiglossectomy.
41135	Glossectomy; partial, with unilateral radical neck dissection.
41140	Glossectomy; complete or total, with or without tracheostomy, without radical neck dissection.
41145	Glossectomy, complete or total, with or without tracheostomy, with unilateral radical neck dissection.
41150	Glossectomy; composite procedure with resection floor of mouth and mandibular resection, without radical neck dissection.
41153	Glossectomy; composite procedure with resection floor of mouth, with suprahyoid neck dissection.
41155	Glossectomy; composite procedure with resection floor of mouth, mandibular resection, and radical neck dissection (Commando type).
42120	Resection of palate or extensive resection of lesion.
42842	Radical resection of tonsil, tonsillar pillars, and/or retromolar trigone; without closure.
42844	Radical resection of tonsil, tonsillar pillars, and/or retromolar trigone; closure with local flap (e.g., tongue, buccal).
42845	Radical resection of tonsil, tonsillar pillars, and/or retromolar trigone; closure with other flap.
42890	Limited pharyngectomy.
42892	Resection of lateral pharyngeal wall or pyriform sinus, direct closure by advancement of lateral and posterior pharyngeal walls.
42894	Resection of pharyngeal wall requiring closure with myocutaneous flap.

We initially requested that the RUC review five CPT codes but then

withdrew CPT code 31255 from the 5-Year Review (see Table 46).

TABLE 46

CPT code	Descriptor
31255 31575 31579 41100	Septoplasty or submucous resection, with or without cartilage scoring, contouring replacement with graft. Nasal/sinus endoscopy, surgical; with ethmoidectomy, total (anterior and posterior). Laryngoscopy, flexible fiberoptic; diagnostic. Laryngoscopy, flexible or rigid fiberoptic, with stroboscopy. Biopsy of tongue; anterior two-thirds. Removal impacted cerumen (separate procedure), one or both ears.

RUC Recommendations

For one CPT code 42120, palate resection procedure, the RUC, based on the data presented by the specialty society, agreed that there was increased work and intensity involved in comparison to other codes with similar intensity. The RUC believed the survey results reflected the complexity of the patient, physician time and work necessary in performing this procedure, and recommended work RVUs of 11.00 for CPT code 42120.

The specialty society presented data on two maxillectomy procedures, CPT codes 31225 and 31230, which the RUC also viewed as undervalued. The RUC believed that the re-evaluation of these two codes corrects rank order anomalies and accounts for the appropriate intensity for each procedure. The RUC recommended work RVUs of 24.00 for CPT code 31230.

For three lymphadendectomy procedures, CPT codes 38700, 38720, and 38724, the specialty society

presented data with the rationale that the previous valuation was flawed because the procedures were not evaluated by otolaryngologists. The RUC believed that the survey results reflected the appropriate complexity of the patient, physician time and work necessary in performing the procedure, and justified an increase in physician work. The RUC-recommended work RVUs for these CPT codes are as follows: 38700 = 12.00 work RVUs; 38720 = 20.00 work RVUs; and 38724 = 22.00 work RVUs.

The specialty society presented survey data on three pharyngectomy procedures, CPT codes 42890, 42892, and 42894, which had never been reviewed by the RUC. The RUC agreed that there was a change in the patient population and that the increased intensity involved in these procedures was comparable to other codes with similar intensity. The RUC recommended the increase demonstrated by the survey median which was 17.00 work RVUs for CPT

code 42890, 23.09 work RVUs for CPT code 42892, and 30.00 work RVUs for CPT code 42894.

The specialty society presented survey data on three tonsillectomy procedures, CPT codes 42842, 42844, and 42845, which the RUC agreed were undervalued due to a previous flawed methodology. The RUC believed that the survey results reflected the appropriate physician work and time necessary in performing this procedure and recommended the following work RVUs for these CPT codes: 42842 = 11.00 work RVUs; 42844 = 16.10 work RVUs; and 42845 = 32.00 work RVUs.

For the partial glossectomy procedures, CPT codes 41120, 41130, and 41135, the RUC believed that there was not compelling evidence to increase the work for CPT code 41120, and, therefore, recommended maintaining the current value for this service. The RUC also agreed that increasing the values for the two remaining procedures would correct the existing rank order anomalies and that these increases were

justified by survey results. The recommendation for the work RVUs for these CPT codes is as follows: 41120 = 9.76 work RVUs; 41130 = 14.00 work RVUs; and 41135 = 27.00 work RVUs.

For complete glossectomy procedures, CPT codes 41140 and 41145, the specialty society presented survey data on these procedures and suggested decreasing the work RVU of CPT code 41140. The RUC believed that the survey results did not justify decreasing the work RVUs for this service, particularly because over half of the survey respondents indicated that the work of performing CPT code 41140 has not changed in the past 5 years. Therefore, the RUC recommended maintaining the value for this code. The RUC believed that the flawed methodology previously used for valuing CPT code 41145 caused this procedure to be misvalued and that an increase in work was validated by the survey median results. The RUC recommended the following work RVUs for these CPT codes: 41140 = 25.46 work RVUs: and 41145 = 34.00 work RVUs.

For the composite glossectomy procedures, CPT codes 41150, 41153, and 41155, the specialty society presented survey data on each of these procedures, noting that the current work RVUs for each of these services create a rank order anomaly. The RUC agreed that increasing the RVUs would correct these rank order anomalies and that these increases were justified by the survey results. The RUC-recommended work RVUs for these CPT codes are as follows: 41150 = 26.50 work RVUs; 41153 = 34.00 work RVUs; and 41155 = 40.00 work RVUs.

For the laryngopharyngectomy procedures, CPT codes 31360, 31365, 31390 and 31395, the specialty society presented as compelling evidence the rationale that the current work RVUs create rank order anomalies, and that there also has been a change in the patient population. The RUC agreed that increasing the RVUs of these procedures by accepting the 75th percentile of survey results corrected the specific rank order anomalies and also accounted for the change in the patient population. The RUC-recommended work RVUs for these CPT codes are as follows: 31360 = 28.00 work RVUs: 31365 = 37.00 work RVUs; 31390 = 40.00 work RVUs; and 31395 = 44.00work RVUs.

For the laryngectomy procedures, CPT codes 31367, 31368, 31370, 31375, 31380 and 31382, the specialty society presented survey data with the rationale that the current work values are based on a flawed methodology that creates rank order anomalies, and that there

also has been a change in patient population. The RUC agreed with the specialty society and recommended increasing the work RVUs for these services to maintain rank order between the codes in the family and to establish the correct intensity of the procedure based on the change in patient population. The RUC-recommended work RVUs for these CPT codes are: 31367 = 27.36 work RVUs; 31368 = 36.00 work RVUs; 31370 = 25.00 work RVUs; 31380 = 25.00 work RVUs; and 31382 = 28.00 work RVUs.

For CPT code 30520, based on the increase in physician time in the current survey data, the RUC believed that the service was misvalued and that there was additional work involved which was not previously captured. Using the building-block methodology, the RUC recommended a work RVU of 6.27 for CPT code 30520.

For CPT codes 31575 and 31579, the RUC agreed with the specialty society that the surveys validate the current values. The RUC also believed that the survey validated the current work value for CPT code 41100, particularly because 98 percent of survey respondents indicated that the work in performing this service has not changed in the past 5 years. The RUC recommended maintaining the original work values of 1.10 work RVUs for CPT code 31575, 2.26 work RVUs for CPT code 31579, and 1.63 work RVUs for CPT code 41100.

The specialty society provided survey data for CPT code 69210 using the rationale that the patient population had become more complex. The RUC did not agree with the specialty society that the patient population had changed because 94 percent of the survey respondents indicated that the work in performing this service has not changed in the past 5 years. The RUC recommended maintaining the current work value of 0.61 for this service.

CMS Proposed Valuation

We are in agreement with the RUC-recommended work RVUs for the following otolaryngology CPT codes: 38700, 38720, 38724, 41120, 41130, 41135, 41140, 41145, 42120, 42890, 42892, and 42894.

For the tonsillectomy procedures, CPT codes 42842, 42844, and 42845, the number of hospital days decreased by at least two days (including critical care visits for one code), but the outpatient post-operative visits increased by one. The median values for intra-service times were accepted by the RUC for these services, which is an indication that a value other than the 75th

percentile for work also may be appropriate. CPT codes 42842 and 42844 were valued at the median work RVU obtained from the surveys. However, CPT code 42845 was valued by the RUC at the 75th percentile for work. Therefore, we are accepting the median recommended work values for CPT codes 42842 of 11.00 work RVUs and 42844 of 16.10 work RVUs and, consistent with use of the median, proposing work RVUs for CPT code 42845 of 29.00.

For the composite glossectomy procedures, CPT codes 41150, 41153, and 41155, the number of hospital days decreased by at least 2 days (including, in some instances, critical care visits). CPT codes 41153 and 41155 were valued by the RUC at the 75th percentile for work, but CPT code 41150 was valued based on the median work value. The median values for intra-service times were accepted by the RUC for these services, which is an indication that a value other than the 75th percentile for work also may be appropriate. Therefore, we are accepting the RUC-recommended work RVUs of 26.50 for CPT code 41150 which were based on the median work value, and consistent with use of the median proposing work RVUs of 30.00 for CPT code 41153 and 36.00 for CPT code 41155.

For the larvngopharvngectomy procedures, CPT codes 31360, 31365, 31367, 31368, 31370, 31375, 31380, 31382, 31390 and 31395, the number of hospital days decreased by at least two days and the post-operative outpatient visits increased by one day. However, in one instance the number of outpatient visits decreased (CPT code 31395). The median values for intra-service times were accepted by the RUC for these services, which is an indication that a value other than the 75th percentile for work also may be appropriate. Therefore, we are proposing using median values for these services resulting in the following work RVUs for these CPT codes: 31360 = 24.00 work RVUs; 31365 = 31.50 work RVUs; 31367 = 24.00 work RVUs; 31368 = 30.50 work RVUs; 31370 = 24.00 work RVUs; 31375 = 22.50 work RVUs; 31380 = 22.00 work RVUs; 31382 = 25.00 work RVUs; 31390 = 35.00 work RVUs; and 31395 = 39.50

For CPT codes 30520, 31575, 31579, 41100 and 69210, we are in agreement with the RUC-recommended work RVUs for these services, except for CPT code 41100. The RUC recommended maintaining the current work RVUs of 1.63 for this service, which is even greater than the 75th percentile for work, which is what the specialty

society had recommended. We believe the more appropriate work RVUs for this service is represented by the median, which is 1.37, and, therefore, we are recommending 1.37 work RVUs for CPT code 41100.

We would note that although we accepted the RUC's recommendation of a work RVU of 0.61 for CPT code 69210, we are concerned with this valuation for the use of this code for routine removal of ear wax during a physical examination of a patient. This code is listed with a "separate procedure" designation in the CPT code book,

meaning that it is billed most properly when it is the only service provided for a particular date of service. However, Medicare data used for evaluation of codes in the current 5-Year Review indicate that CPT code 69210 was billed with an E/M service 63 percent of the time. It is our understanding that CPT code 69210 is to be used when there is a substantial amount of cerumen in the external ear canal that is very difficult to remove and that impairs the patient's auditory function. We will continue to monitor the use of this code for the appropriate circumstances.

b. Ophthalmology Services

The American Academy of Ophthalmology (AAO), the American Optometric Association (AOA) and the American Society of Cataract and Refractive Surgery submitted 15 codes for the 5-Year Review (see Table 47). However, the specialty societies subsequently withdrew five of these codes (CPT codes 65420, 65900, 67917, 67924 and 68750) from the 5-Year Review.

TABLE 47

CPT code	Descriptor
65420	Excision or transposition of pterygium; without graft.
65426	Excision or transposition of pterygium, with graft.
65850	Trabeculotomy ab externo.
65900	Removal of epithelial downgrowth, anterior chamber of eye.
67414	Orbitotomy without bone flap (frontal or transconjunctival approach); with removal of bone for decompression.
67445	Orbitotomy with bone flap or window, lateral approach (e.g., Kroenlein); with removal of bone for decompression.
67500	Retrobulbar injection; medication (separate procedure, does not include supply of medication).
67505	Retrobulbar injection; alcohol.
67515	Injection of medication or other substance into Tenon's capsule.
67904	Repair of blepharoptosis; (tarso) levator resection or advancement, external approach.
67911	Correction of lid retraction.
67917	Repair of ectropion; extensive (e.g., tarsal strip operations).
67924	Repair of entropion; extensive (e.g., tarsal strip or capsulopalpebral fascia repairs operation).
67966	Excision and repair of eyelid, involving lid margin, tarsus, conjunctiva, canthus, or full thickness, may include preparation
	for skin graft or pedicle flap with adjacent tissue transfer or rearrangement; over one-fourth of lid margin.
68750	Conjunctivorhinostomy (fistulization of conjunctiva to nasal cavity); with insertion of tube or stent .

We submitted the following ophthalmology CPT codes for review (see Table 48).

TABLE 48

CPT code	Descriptor
66761	Iridotomy/iridectomy by laser surgery (e.g., for glaucoma) (one or more sessions).
66821	Discission of secondary membranous cataract (opacified posterior lens capsule and/or anterior hyaloid); laser surgery (e.g., YAG laser) (one or more stages).
66984	Extracapsular cataract removal with insertion of intraocular lens prosthesis (one stage procedure), manual or mechanical technique (e.g., irrigation and aspiration or phacoemulsification).
67038	Vitrectomy, mechanical, pars plana approach; with epiretinal membrane stripping.
67221	Destruction of localized lesion of choroid (e.g., choroidal neovascularization); photodynamic therapy (includes intravenous infusion).
67228	Destruction of extensive or progressive retinopathy (e.g., diabetic retinopathy), one or more sessions; photocoagulation (laser or xenon arc).
67820	Correction of trichiasis; epilation, by forceps only.
67840	Excision of lesion of eyelid (except chalazion) without closure or with simple direct closure.
68840	Probing of lacrimal canaliculi, with or without irrigation.
76519	Ophthalmic biometry by ultrasound echography, A-scan; with intraocular lens power calculation.
92083	Visual field examination, unilateral or bilateral, with interpretation and report; extended examination (e.g., Goldmann visual fields with at least 3 isopters plotted and static determination within the central 30°, or quantitative, automated threshold perimetry, Octopus program G–1, 32 or 42, Humphrey visual field analyzer full threshold programs 30–2, 24–2 or 30/60–2.
92226	Ophthalmoscopy, extended, with retinal drawing (e.g., for retinal detachment, melanoma), with interpretation and report; subsequent.
92235	
92250	Fundus photography with interpretation and report.

RUC Recommendations

The RUC questioned the survey results for CPT codes 67038 and 67228 and indicated that the survey data may be flawed because respondents may have based their answers on a different number of membranes stripped or sessions conducted. The RUC recommended that these two CPT codes be referred to the CPT Editorial Panel for clarification.

Based on a review of the survey data, the RUC agreed with the specialty society that the survey results demonstrated that the work had not changed and, thus, that the current work RVUs should be retained for the following CPT codes: 66761 = 4.06 work RVUs; 67840 = 2.04 work RVUs; 68840 = 1.25 work RVUs; 76519 = 0.54 work RVUs; 92226 = 0.33 work RVUs; 92235 = 0.81 work RVUs; and 92250 = 0.44work RVUs. In addition, the RUC recommended retaining the work RVU of 0.50 for CPT code 92083 because the specialty society had not presented compelling evidence that the physician work had changed.

For CPT codes 67221, 67820, and 66984, the RUC recommended reductions in the work RVUs. The RUC used a building-block approach based on the work RVU of 3.24 for the reference CPT code 67141, Prophylaxis of retinal detachment (e.g., retinal break, lattice degeneration) without drainage, one or more sessions; cryotherapy, diathermy, and the work RVUs of 0.21 for the infusion code G0347, which contain comparable work. The RUC recommended work RVUs of 3.45 for CPT code 67221.

The RUC supported the specialty society's recommendation to decrease the work value for CPT code 67820 based on evidence that the previous Harvard survey data was flawed. The RUC agreed with assigning work RVUs of 0.71 to CPT code 67820 based on a comparison/crosswalk to the key reference service, CPT code 65205, Removal of foreign body, external eye;

conjunctival superficial, which has work RVUs of 0.71.

For CPT code 66984, the RUC did not agree with the specialty society recommendation that the current work RVU of 10.21 should be maintained, because changes in technology and technique in the last 10 years have led to increased efficiencies. The RUC concluded that these efficiencies resulted in a lower overall time for the procedure. The RUC used the previous survey pre-service time of 44 minutes and subtracted the current survey preservice time of 25 minutes for a difference of 19 minutes. These 19 minutes were then multiplied by an IWPUT of 0.0224, resulting in an RVU of 0.43, which was subtracted from the current value. The RUC agreed that although the intra-service physician time has decreased from the historical 50 minutes to the current survey time of 30 minutes as indicated by the survey respondents, the decrease in time reflects a decrease of only low intensity work (that is, suturing) and no further decrease in work RVUs was recommended. Therefore, the RUC recommended work RVUs of 9.78 for CPT code 66984.

The RUC agreed with the specialty society that there was compelling evidence to support the increases for CPT codes 67414, 67445, 67500, 67515, 67904, 67911, and 67966, either because the current work RVUs caused rank order anomalies, the previous Harvard survey data was misvalued when compared to codes with similar values, or there was a change in the technique of performing the procedures (specifically for CPT codes 67911 and 67966, in which skin-grafting is bundled into these codes). However, for two CPT codes, 65426 and 65850, while the RUC recognized that there was compelling evidence to support increases, the RUC did not agree with the specific increases recommended by the specialty society.

For CPT code 65426, the RUC believed that evidence suggested a

change in technique for this procedure, and believed that a value close to the survey's 25th percentile was justified by using a building-block approach. For CPT code 65850, the RUC agreed that there is a rank order anomaly between CPT codes 65850 and 66170, Fistualization of sclera for glaucoma; trabeculectomy ab externo in absence of previous surgery, as well as a change in the patient population. The RUC believed an increase in value was justified by using a building-block approach. The RUC recommended 5.85 work RVUs for CPT code 65426 and 11.14 work RVUs for CPT code 65850.

For CPT code 66821, the RUC agreed that the intensity of this procedure was misvalued and that an increase in the relative value would be appropriate. The RUC disagreed with our previous intensity crosswalk to CPT code 66984, Extracapsular cataract removal with insertion of intraocular lens prosthesis (one stage procedure), manual or mechanical technique (e.g., irrigation and aspiration or phacoemulsification), specified in the Five-Year Review of Work Relative Value Units Under the Physician Fee Schedule proposed notice (May 3, 1996; 61 FR 20027). The RUC believed that the previous survey from 1995 should stand on its own as an acceptable survey due to the inappropriate selection by HCFA in 1995 of intensity for this code. The RUC-recommended work RVU for this service is 2.78, the same value recommended by the RUC in 1995.

CMS Proposed Valuation

We are in agreement with the RUC recommended work values for these ophthalmology services.

c. Additional Codes

The American Speech-Language-Hearing Association (ASHA) submitted the following speech and audiology CPT codes (see Table 49) but subsequently withdrew them from the 5-Year Review.

TABLE 49

CPT code	Descriptor
92506	Evaluation of speech, language, voice, communication, and/or auditory processing.
92507	Treatment of speech, language, voice, communication, and/or auditory processing disorder; individual.
92508	Treatment of speech, language, voice, communication, and/or auditory processing disorder; group, two or more individ-
	uals.
92510	Aural rehabilitation following cochlear implant (includes evaluation of aural rehabilitation status and hearing, therapeutic
	services) with or without speech processor programming
92516	Facial nerve function studies (e.g., electroneuronography).
92520	Laryngeal function studies (ie, aerodynamic testing and acoustic testing).
92526	Treatment of swallowing dysfunction and/or oral function for feeding.
92541	Spontaneous nystagmus test, including gaze and fixation nystagmus, with recording.
92542	Positional nystagmus test, minimum of 4 positions, with recording.
92543	Caloric vestibular test, each irrigation (binaural, bithermal stimulation constitutes four tests), with recording.
92544	Optokinetic nystagmus test, bidirectional, foveal or peripheral stimulation, with recording.

TABLE 49—Continued

Auditory evoked potentials for evoked response audiometry and/or testing of the central nervous system; limited. 92587	CPT code	Descriptor
92547 Use of vertical electrodes (List separately in addition to code for primary procedure). 92548 Computerized dynamic posturography. 92551 Screening itest, pure tone, air only. 92553 Pure tone audiometry (threshold); air only. 92555 Speech audiometry (threshold); air and bone. 92556 Speech audiometry threshold with speech recognition. 92557 Comprehensive audiometry threshold evaluation and speech recognition (92553 and 92556 combined). 92559 Audiometric testing of groups. 92560 Bekesy audiometry; screening. 92561 Bekesy audiometry; screening. 92563 Tone decay test. 92563 Tone decay test. 92564 Short increment sensitivity index (SISI). 92565 Stenger test, pure tone. 92565 Stenger test, pure tone. 92566 Stenger test, pure tone. 92567 Tympanometry (impedance testing). 92568 Acoustic reflex testing; decay. 92571 Filtered speech test. 92572 Stagered spondaic word test. 92573 Lombard test. 92574 Synthetic sentence identification test. 92575 Synthetic sentence identification test. 92576 Synthetic sentence identification test. 92577 Sentenceral audiometry (VRA) 92588 Conditioning play audiometry. 92588 Electrocochleography. 92589 Auditory evoked potentials for evoked response audiometry and/or testing of the central nervous system; immited. 92589 Auditory evoked potentials for evoked response audiometry and/or testing of the central nervous system; immited. 92589 Ear protector attenuation measurements. 92580 Ear protector attenuation measurements. 92580 Evoked otoacoustic emissions; comprehensive or diagnostic evaluation (comparison of transient and/or distortion protects). 92590 Ear protector attenuation measurements. 92591 Diagnostic analysis of cochlear implant, patient under 7 years of age; subsequent reprogramming. 92600 Diagnostic analysis of cochlear implant, patient under 7 years of age; subsequent reprogramming. 92601 Diagnostic analysis of cochlear implant, age 7 years or older; with programming and modification. 92602 Evaluation for prescription of non-speech-generating augmentative and alternative commun	92545	Oscillating tracking test, with recording.
92548 Computerized dynamic posturography. 92552 Pure tone audiometry (threshold): air only. 92553 Pure tone audiometry (threshold): air and bone. 92555 Speech audiometry threshold: air and bone. 92555 Speech audiometry threshold: with speech recognition. 92557 Comprehensive audiometry threshold evaluation and speech recognition (9253 and 92556 combined). 92559 Audiometric testing of groups. 92560 Bekesy audiometry, threshold: with speech recognition (9253 and 92556 combined). 92561 Bekesy audiometry, diagnostic. 92562 Loudness balance test, alternate binaural or monaural. 92563 Tone decay test. 92564 Short increment sensitivity index (SISI). 92565 Steper test, pure tone. 92566 Tympanometry (impedance testing). 92568 Acoustic reflex testing; threshold. 92569 Acoustic reflex testing; threshold. 92569 Acoustic reflex testing; threshold. 92560 Acoustic reflex testing; threshold. 92571 Steper test, pure tone. 92572 Steper acoustic reflex testing; decay. 92573 Serial test. 92573 Serial test. 92573 Serial test. 92574 Synthetic sentence identification test. 92575 Serial testing	92546	Sinusoidal vertical axis rotational testing.
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Therapeutic services for the use of speech-generating device, including programming and modification Page 11		
92611	92609	
92612	92610	
92614	92611	Motion fluoroscopic evaluation of swallowing function by cine or video recording.
92616 Flexible fiberoptic endoscopic evaluation of swallowing and laryngeal sensory testing by cine or video recording.	92612	
00000 Fredricking of control confirms from the major to bit 1 00 miles and		
	92620	Evaluation of central auditory function, with report; initial 60 minutes.
92621 Evaluation of central auditory function, with report; each additional 15 minutes.		
92625	92625	Assessment of tinnitus (includes pitch, loudness matching, and masking).

9. HCPAC Codes

a. Podiatric Services

[If you choose to comment on issues in this section, please include the $\,$

caption "DISCUSSION OF COMMENTS—HCPAC CODES" at the beginning of your comments.] We submitted the podiatric services in Table 50 for review.

CPT code	Descriptor
10060	Incision and drainage of abscess (e.g., carbuncle, suppurative hidradenitis, cutaneous or subcutaneous abscess, cyst, furuncle, or paronychia); simple or single.
11040	Debridement; skin, partial thickness.

TABLE 50—Continued

CPT code	Descriptor		
11730	Debridement; skin, full thickness. Debridement; skin, and subcutaneous tissue. Avulsion of nail plate, partial or complete, simple; single. Strapping; Unna boot.		

HCPAC Recommendation

The HCPAC agreed with the specialty society that there was compelling evidence that the valuation of these services was incorrect due to a flawed methodology used in the previous Harvard valuation for all six podiatric codes. Based on the survey data, the specialty society requested that the work RVU increase for four codes and decrease for two codes.

For CPT codes 10060 and 29580, the HCPAC supported an increase in the existing work values for these codes and recommended a work RVU of 1.50 for CPT code 10060 and 0.60 for CPT code 29580, which represent the survey median of the survey data for these services.

For CPT code 11040, the HCPAC did not support the work RVU increase recommended by the specialty society, but instead recommended a work RVU of 0.55, which represented the 25th percentile work RVU from the survey data.

For CPT codes 11041 and 11730, the HCPAC recommended a decrease in the work RVUs and, based on the median from the survey data, recommended a work RVU of 0.80 for CPT code 11041 and 1.10 for CPT code 11730.

For CPT code 11042, the HCPAC did not agree with the specialty society that the work RVU should be increased to 1.20 work RVUs. The HCPAC recommended maintaining the current work RVU of 1.12 for this CPT code, which was slightly higher than the survey's 25th percentile work value of 1.10 work RVUs.

The HCPAC-recommended work values for these services are as follows: 10060 = 1.50 work RVUs; 11040 = 0.55 work RVUs; 11041 = 0.80 work RVUs; 11042 = 1.12 work RVUs; 11730 = 1.10 work RVUs; and 29580 = 0.60 work RVUs.

CMS Proposed Valuation

For CPT code 10060, we compared the survey times them with the current Harvard-based times used to value this service. These times are comparable and, therefore, we are recommending maintaining the current work RVUs of 1.17 for this code.

For CPT code 29580, we compared the current Harvard-based times with the survey times. Due to the small reduction in time, the recommended increase in work RVUs is not supported. Therefore, we are proposing to assign 0.55 work RVUs to this service, which represents the 25th percentile of the survey and more accurately represents the time associated with this service.

For CPT code 11730, the current work RVUs are slightly more (0.03) than the recommended value and the survey time is approximately 30 percent greater than the current Harvard-based time. For these reasons, we agree with the HCPAC's recommendation of 1.10 work RVUs for 11730 which represents the median survey value.

For CPT codes 11040, 11041 and 11042, the survey times all reflect significant reductions from current Harvard-based times used to value these services. Based on this comparison which shows decreases in time ranging from 47 percent to 68 percent, we believe that the low values from the surveys more accurately represent the valuation of these services. Therefore, we are proposing to assign work RVUs as follows: 11040 = 0.48 work RVUs; 11041 = 0.60 work RVUs; and 11042 = 0.80 work RVUs. In addition, to ensure that the other codes in this family are properly valued, we recommend the RUC should review the valuation of CPT codes 11043 and 11044.

b. Other HCPAC Codes

The American Dietetic Association submitted five CPT and HCPCS codes related to medical nutrition services that were referred to the CPT Editorial Panel (see Table 51).

TABLE 51

CPT code	Descriptor
97802 97803 97804	Medical nutrition therapy; initial assessment and intervention, individual, face-to-face with the patient, each 15 minutes. Medical nutrition therapy; re-assessment and intervention, individual, face-to-face with the patient, each 15 minutes. Medical nutrition therapy; group (2 or more individual(s)), each 30 minutes G0270 Medical nutrition therapy; reassessment and subsequent intervention(s) following second referral in same year for change in diagnosis, medical condition, or treatment regimen (including additional hours needed for renal disease), individual, face to face with the patient, each 15 minutes.
G0270	Medical nutrition therapy; reassessment and subsequent intervention(s) following second referral in same year for change in diagnosis, medical condition, or treatment regimen (including additional hours needed for renal disease), individual, face to face with the patient, each 15 minutes.
G0271	Medical nutrition therapy; reassessment and subsequent intervention(s) following second referral in same year for change in diagnosis, medical condition, or treatment regimen (including additional hours needed for renal disease), group (2 or more individuals), each 30 minutes.

Additionally, the ASHA submitted CPT code 96105, Assessment of aphasia (includes assessment of expressive and receptive speech and language function, language comprehension, speech production ability, reading, spelling,

writing, e.g., by Boston Diagnostic Aphasia Examination) with interpretation and report, per hour, for review but subsequently withdrew this code. C. Other Issues Under the 5-Year Review

[If you choose to comment on issues in this section, please include the caption "OTHER ISSUES" at the beginning of your comments.]

1. Anesthesia Services

Although anesthesia services are paid under the PFS, they are paid on the basis of an anesthesia code-specific base unit and time units that vary based on the anesthesia time of the case. Since anesthesia services do not have a work value per code as do other medical and surgical services, a work value must be imputed for each anesthesia code. For the last 5-Year Review, this imputed work value was compared to an actual work value determined by the RUC and the ASA through a building-block approach. Under the building-block approach, each anesthesia code was uniformly divided into five components: pre-anesthesia, equipment and supply preparation, induction period, post-induction anesthesia period, and post-anesthesia. The work was determined for each of the five components and summed to calculate total anesthesia work for the anesthesia code

Although the ASA submitted one anesthesia code and several other codes for this 5-Year Review, they continue to believe the work of anesthesia services remain seriously undervalued. The last 5-Year Review of anesthesia services proved to be a very laborious and exhaustive process involving several different RUC workgroups. The valuation of anesthesia work is a very complex process as it involves relating components of anesthesia services to other medical and surgical services of similar time and work. The ASA was dissatisfied with the recommendations made by the RUC for the last 5-Year Review for anesthesia work. The major points of disagreement were the use and extent of extrapolation and the work value for the post-induction anesthesia period, which is the longest period of the anesthesia service.

For the last 5-Year Review, the ASA requested the RUC to extrapolate from 19 high volume anesthesia services, which were studied and accounted for over 50 percent of Medicare payments for anesthesia services, to all anesthesia services. The RUC thought that extrapolation should be limited. That is, an analysis of a single anesthesia code based on a single surgical code was insufficient when the anesthesia code covers a large number of surgical codes. For the last 5-Year Review, the buildingblock approach used a value of 0.025 for the IWPUT for the post-induction anesthesia period. This was a value that the RUC agreed to, which we approved,

although the ASA thought it was too low.

As a result of its relationship with the RUC and the past recommendations, the ASA requested that we address the valuation of anesthesia services reported under CPT codes 00100 through 01999. The ASA furnished an analysis that builds on the methodology used in the last 5-Year Review for the valuation of work for anesthesia services.

Based on comparable physicians' services, the ASA believes that the more appropriate IWPUT for the postinduction period is 0.043. Using this IWPUT, the ASA calculated a scaling factor and used this to recalculate the post-induction work value and an adjusted total work RVU for each of the 19 codes. Based on an extrapolation from the 19 surveyed services used in the last 5-Year Review, the ASA proposed that the anesthesia work value should be increased by 37.5 percent. The extrapolation proposed by the ASA is more far reaching than the extrapolation used by the RUC in the last 5-Year Review. We do not favor using extrapolation other than on the limited basis it was used in the last 5-Year Review.

Since the ASA believes that the RUC process does not work well for their codes, they requested that we directly evaluate their recommendations independent of any RUC review of input. Although there may be some merit to the ASA approach, we believe this analysis is more appropriately done by a multispecialty workgroup within the RUC itself. Thus, we are recommending the valuation of anesthesia services, namely the proposed valuation of the postinduction time period, be referred to the RUC for their review and consideration. For example, the ASA and the RUC could review the IWPUT for postinduction time, as currently proposed by the ASA and compare this to the corresponding IWPUT recognized in the last 5-Year Review of anesthesia work for the 19 surveyed codes.

A second issue concerning anesthesia services pertains to the impact of the revised work values for E/M services and their relationship to the valuation of pre- and post-anesthesia services, components of the building-block approach. The pre- and post-anesthesia services derive their work values from the lower level E/M codes for new patients, the subsequent hospital care codes and the initial inpatient

consultation codes. We are proposing to substitute the proposed revised work values for E/M codes where applicable and recompute the anesthesia work values and their impact on the increase in total anesthesia work. While this results in a very minor adjustment to anesthesia work (that is, less than 1 percent), we believe this approach provides for the consistent application of the proposed work RVUs changes.

2. Discussion of Post-Operative Visits Included in the Global Surgical Packages

We have established a national definition for a global surgical package so that payment is made consistently for the same set of services across all contractor jurisdictions. In constructing the RVUs for a global surgery service, all services that are believed to be typically included in the defined global period are built into the final resource-based RVUs and are not separately billable within the defined global period; this is reflected in the proposed work RVUs in Addenda B and C. This would include pre-surgery work, the intra-service time of actually performing the surgical procedure, and the post-operative (follow-up) visits associated with the monitoring and recovery of the patient.

As stated above in this section, we are proposing to apply the RUCrecommended new values for the E/M services to all surgical services with a 10 or 90-day global period. However, because of variations in the patient population and in practice patterns, there is some question whether the assumptions about the number and level of visits within the global period reflect the actual post-operative work performed. Some surgeons have commented to us that they perform more visits than are included in the global period for their services. It is also likely that some patients require fewer than the "typical" number of follow-up visits included in the global period.

Although we are not proposing any changes to our global policy at this time, we would be interested in receiving comments concerning our current policy of including these post-operative visits in the global surgical packages and what advantages or disadvantages might be associated with proposing a change to this policy in the future.

3. Codes Referred to CPT Editorial Panel From Five-Year Review of Work Relative Value Units

CPT/HCPCS	Mod	Descriptor
Code 15732		Muggle glin quest head/neel
		Muscle-skin graft, head/neck
15831		Excise excessive skin tissue
17304		1 stage mohs, up to 5 spec
17305		2 stage mohs, up to 5 spec Apply bone fixation device
20692		Apply bone fixation device
21556		Remove lesion neck/chest
23076		Removal of shoulder lesion
23200		Removal of collar bone
23210		Removal of shoulder blade
23220		Partial removal of humerus
23515		Treat clavicle fracture
23585		Treat scapula fracture
23615		Treat humerus fracture
23616		Treat humerus fracture
23630		Treat humerus fracture
23670		Treat dislocation/fracture
23680		Treat dislocation/fracture
24076		Remove arm/elbow lesion
24077		Remove tumor of arm, elbow
24150		Extensive humerus surgery
24152		Extensive radius surgery
24545		Treat humerus fracture
24546		Treat humerus fracture
24575		Treat humerus fracture
24579		Treat humerus fracture
24635		Treat elbow fracture
24665		Treat radius fracture
24685		Treat ulnar fracture
25076		Removal forearm lesion deep
25077		Remove tumor, forearm/wrist
25170		Extensive forearm surgery
25515		Treat fracture of radius
25526		Treat fracture of radius
25545		Treat fracture of ulna
25574		Treat fracture radius & ulna
25575		Treat fracture radius/ulna
25620		Treat fracture radius ulna
25628		Treat wrist bone fracture
26615		Treat metacarpal fracture
26665		Treat thumb fracture
26685		Treat hand dislocation
26715		Treat knuckle dislocation
26735		Treat finger fracture, each
26746		Treat finger fracture, each
26765		Treat finger fracture, each
26785		Treat finger dislocation
27048		Remove hip/pelvis lesion
		TOMO TO TIEP/ POTVED TESTOIT

CPT/HCPCS Code	Mod	Descriptor
27049		Remove tumor, hip/pelvis
27076		Extensive hip surgery
27078		Extensive hip surgery
27248		Treat thigh fracture
27328		Removal of thigh lesion
27329		Remove tumor, thigh/knee
27365		Extensive leg surgery
27472		Repair/graft of thgh
27511		Treatment of thigh fracture
27513		Treatment of thigh fracture
27514		Treatment of thigh fracture
27519		Treat thigh fx growth plate
27535		Treat knee fracture
27540		Treat knee fracture
27556		Treat knee dislocation
27615		Removel tumor, lower leg
27619		Remove lower leg lesion
27645		Extensive lower leg surgery
27646		Extensive lower leg surgery
27647		Extensive ankle/heel surgery
27720		Repair of tibia
27766		Treatment of ankle fracture
27784		Treatment of fibula fracture
27792		Treatment of ankle fracture
27814		Treatment of ankle fracture
27822	•	Treatment of ankle fracture
27826		Treat lower leg fracture
27827		Treat lower leg fracture
27828		Treat lower leg fracture
27829		Treat lower leg joint
27832		Treat lower leg dislocation
28045		Excision of foot lesion
28415		Treat heel fracture
28445		Treat ankle fracture
28465		Treat mid foot fracture, each
28485		Treat metatarsal fracture
28505		Treat big toe fracture
28525		Treat toe fracture

CPT/HCPCS Code	Mod	Descriptor
28555		Repair foot dislocation
28585		Repair foot dislocation
28615		Repair foot dislocation
28645		Repair toe dislocation
28675		Repair toe dislocation
35381		Rechanneling of artery
35501	i	Artery bypass graft
35507		Artery bypass graft
35509		Artery bypass graft
35541		Artery bypass graft
35546		Artery bypass graft
35601		Artery bypass graft
35641		Artery bypass graft
37720		Removal of leg vein
44152		Removal of colon/leostomy
44153		Removal of colon/leostomy
49000		Exploration of abdomen
54150		Circumcision
54152		Circumcision
67038		Strip retinal membrane
67228		Treatment of retinal lesion
75552		Heart mri for morph w/o dye
75553		Heart mri for morph w dye
75554		Cardiac MRI/function
75555		Cardiac MRI/limited study
90465		Immune admin 1 inj, < 8 yrs
90466		Immune admin addl inj, < 8 y
90467		Immune admin o or n, < 8 yrs
90468		Immune admin o/n, addl , < 8 y
93325		Doppler color flow add-on
94657		Continued ventilator mgmt
95004		Percut allergy skin lests
95024		Id allergy test, drug/bug
95027		ld allergy litrate-airborne
97802		Medical nutrition, indiv. in
97803		Med nutrition, indiv, subseq
97804		Medical nutrition, group
99301		Nursing facility Care

CPT/HCPCS Code	Mod	Descriptor
99302		Nursing facility Care
99303		Nursing facility Care
99311		Nursing fac care, subseq
99312		Nursing fac care, subseq
99313		Nursing fac care, subseq
99321		Rest home visit, new patient
99322		Rest home visit, new patient
99323		Rest home visit, new patient
99331		Rest home visit, est patient
99332		Rest home visit, est patient
99333		Rest home visit, est patient
G0270		MNT subs tx for change dx
G0271		Group MNT 2 or more 30 mins

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4. Budget Neutrality

Section 1848(c)(2)(B)(ii) of the Act requires that increases or decreases in RVUs for a year may not cause the amount of expenditures for the year to differ by more than \$20 million from what expenditures would have been in the absence of these changes. If this threshold is exceeded, we must make adjustments to preserve budget neutrality. This year, we expect that budget-neutrality adjustments will be required as a result of changes in RVUs resulting from the 5-Year Review. Revisions in payment policies, including the establishment of interim and final RVUs for coding changes that will be announced later this year, may result in additional budget-neutrality adjustments.

We considered making the statutorily required budget-neutrality adjustments (under section 1848(c)(2)(B)(ii) of the Act) to account for the 5-Year Review of physician work by reducing all work RVUs. We currently estimate that all work RVUs would have to be reduced by 10 percent under this option. Alternatively, we considered making an adjustment to the PFS CF to meet the provisions of section 1848(c)(2)(B)(ii). This option would require an estimated 5 percent reduction in the CF. We note that the application of the budget neutrality adjustment to the CF would negatively impact all PFS services; whereas the application of the budget neutrality adjustment to the work RVUs would impact only those services that have physician work RVUs. Because the need for a budget neutrality adjustment would be largely due to changes

proposed as a result of the 5-Year Review of work RVUs, we believe it is more equitable to apply the adjustment across services that have work RVUs. For this third 5-Year Review, we are proposing to establish a budget neutrality adjustor that would reduce all work RVUs by an estimated 10 percent to meet the budget neutrality provisions of section 1848(c)(2)(B)(ii).

As we noted in the CY 2005 Physician Fee Schedule final rule with comment period (69 FR 66371), PE and malpractice expense RVUs were not subject to comment and will not be recalculated (other than changes to PE RVUs that result from changes in PE inputs due to changes in physician time or in the number of post procedure visits as part of the 5-Year Review of work RVUs).

5. Effect on Practice Expense Inputs Stemming From the 5-Year Review

The proposed changes for work RVUs reflect, in part, the physician's time needed to perform each service, as well as the number and level of assumed post-operative visits. To the extent that the RUC recommended changes in the times associated with the intra-service portion of the procedure, we are also proposing to adjust the clinical labor time assigned for assisting the physician in the nonfacility setting. In addition, if an accepted new work RVU reflects a change in the number or level of postoperative visits, we are proposing to modify the clinical staff time to reflect the change. This adjusted time is also applied to the equipment used in the post-operative visits. Where the number of post-operative visits has changed, the

number of minimum multi-specialty visit (MMSV) packs will also be adjusted accordingly. A MMSV pack consists of the following supplies: exam table paper, 2 pairs of non-sterile gloves, a patient gown, a pillow case, and a thermometer probe cover. These changes in clinical labor and equipment time and in the quantity of supplies will have a minimal impact on the PE component.

6. Nature and Format of Comments on Work RVUs

We will accept comments on the proposed work RVUs for the codes identified in the Addendum C of this notice. We will also accept comments on the anesthesia code, CPT code 00797. Comments should discuss how the work associated with a given CPT or HCPCS code is analogous to the work in other services, or discuss the rationale for agreeing or disagreeing with the proposed work RVU. We are especially interested in information or discussions that were not presented in earlier comments.

D. Resource-Based Practice Expense (PE) RVUs

[If you choose to comment on issues in this section, please include the caption "PRACTICE EXPENSE" at the beginning of your comments.]

Based on section 1848(c)(1)(B) of the Act, practice expense (PE) is the portion of the resources used in furnishing the service that reflects the general categories of physician and practitioner expenses, such as office rent and wages of personnel, but excluding malpractice expenses.

Section 121 of the Social Security Amendments of 1994 (Pub. L. 103-432), enacted on October 31, 1994, required CMS to develop a methodology for a resource-based system for determining PE RVUs for each physician's service. Until that time, physicians' PEs were based on historical allowed charges. This legislation stated that the revised PE methodology must consider the staff, equipment, and supplies used in the provision of various medical and surgical services in various settings beginning in 1998. The Secretary has interpreted this to mean that Medicare payments for each service would be based on the relative PE resources typically involved with performing the service.

The initial implementation of resource-based PE RVUs was delayed from January 1, 1998, until January 1, 1999, by section 4505(a) of the Balanced Budget Act of 1997 (BBA 97) (Pub. L. 105-33). In addition, section 4505(b) of the BBA 97 required that the new payment methodology be phased-in over 4 years, effective for services furnished in CY 1999, and fully effective in CY 2002. The first step toward implementation of the statute was to adjust the PE values for certain services for CY 1998. Section 4505(d) of BBA 97 required that, in developing the resource-based PE RVUs, the Secretary

- Use, to the maximum extent possible, generally accepted cost accounting principles that recognize all staff, equipment, supplies, and expenses, not solely those that can be linked to specific procedures.
- Develop a refinement method to be used during the transition.
- Consider, in the course of notice and comment rulemaking, impact projections that compare new proposed payment amounts to data on actual physician PEs.

Beginning in CY 1999, we began the four year transition to resource-based PE RVUs. In CY 2002, the resource-based PE RVUs were fully transitioned.

1. Current Methodology

The following sections discuss the current PE methodology.

a. Data Sources

There are two primary data sources used to calculate PE. The AMA's Socioeconomic Monitoring System (SMS) survey data are used to develop the PE per hour (PE/HR) for each specialty. The second source of data used to calculate PE was originally developed by the Clinical Practice Expert Panels (CPEP). The CPEP data

include the supplies, equipment and staff times specific to each procedure.

The AMA developed the SMS survey in 1981 and discontinued it in 1999. Beginning in 2002, we incorporated the 1999 SMS survey data into our calculation of the PE RVUs, using a 5-year average of SMS survey data. (See Revisions to Payment Policies and Five-Year Review of and Adjustments to the Relative Value Units Under the Physician Fee Schedule for CY 2002 final rule, published November 1, 2001 (66 FR 55246).) The SMS PE survey data are adjusted to a common year, 1995. The SMS data provide the following six categories of PE costs:

- Clinical payroll expenses, which are payroll expenses (including fringe benefits) for nonphysician personnel.
- Administrative payroll expenses, which are payroll expenses (including fringe benefits) for nonphysician personnel involved in administrative, secretarial or clerical activities.
- Office expenses, which include expenses for rent, mortgage interest, depreciation on medical buildings, utilities and telephones.
- Medical material and supply expenses, which include expenses for drugs, x-ray films, and disposable medical products.
- Medical equipment expenses, which include expenses depreciation, leases, and rent of medical equipment used in the diagnosis or treatment of patients.
- All other expenses, which include expenses for legal services, accounting, office management, professional association memberships, and any professional expenses not mentioned above.

In accordance with section 212 of the Medicare, Medicaid and State Child Health Insurance Program Balanced Budget Refinement Act of 1999 (BBRA) (Pub. L. 106–113), we established a process to supplement the SMS data for a specialty with data collected by entities and organizations other than the AMA (that is, the specialty itself). (See the Criteria for Submitting Supplemental Practice Expense Survey Data interim final rule with comment period, published on May 3, 2000 (65 FR 25664).) Originally, the deadline to submit supplementary survey data was through August 1, 2001. In the Revisions to Payment Policies and Five-Year Review of and Adjustments to the Relative Value Units Under the Physician Fee Schedule for CY 2002 final rule (November 1, 2001; 66 FR 55246), the deadline was extended through August 1, 2003. To ensure maximum opportunity for specialties to submit supplementary survey data, we

extended the deadline to submit surveys until March 1, 2005 in the Revisions to Payment Policies Under the Physician Fee Schedule for CY 2004 final rule, (November 7, 2003; 68 FR 63196) (hereinafter referred to as CY 2004 PFS final rule).

The CPEPs consisted of panels of physicians, practice administrators, and nonphysicians (registered nurses (RNs), for example) who were nominated by physician specialty societies and other groups. There were 15 CPEPs consisting of 180 members from more than 61 specialties and subspecialties. Approximately 50 percent of the panelists were physicians.

The CPEPs identified specific inputs involved in each physician service provided in an office or facility setting. The inputs identified were the quantity and type of nonphysician labor, medical supplies, and medical equipment.

Īn 1999, the AMA's RŪC established the Practice Expense Advisory Committee (PEAC). Since 1999, and until March 2004, the PEAC, a multispecialty committee, reviewed the original CPEP inputs and provided us with recommendations for refining these direct PE inputs for existing CPT codes. Through its last meeting in March 2004, the PEAC provided recommendations, which we have reviewed and accepted, for over 7,600 codes. As a result, the current CPEP inputs differ markedly from those originally recommended by the CPEPs. The PEAC has now been replaced by the Practice Expense Review Committee (PERC), which acts to assist the RUC in recommending PE inputs.

b. Allocation of PEs to Services

To establish PE RVUs for specific services, it is necessary to establish the direct and indirect PE associated with each service. Our current approach allocates aggregate specialty practice costs to specific procedures and, thus, is often referred to as a "top-down" approach. The specialty PEs are derived from the AMA's SMS survey and supplementary survey data. The PEs for a given specialty are allocated to the services performed by that specialty on the basis of the CPEP data and work RVUs assigned to each CPT code. The specific process is detailed as follows:

Step 1—Calculation of the SMS Cost Pool for Each Specialty

The six SMS cost categories can be described as either direct or indirect expenses. The three direct expense categories include clinical labor, medical supplies and medical equipment. Indirect expenses include administrative labor, office expense, and

all other expenses. We combine these indirect expenses into a single category. The SMS cost pool for each specialty is calculated as follows:

- The specialty PE/HR for each of the three direct and one indirect cost categories from the SMS is calculated by dividing the aggregate PE per specialty by the specialty's total hours spent in patient care activities (also determined by the SMS survey). The PE/HR is divided by 60 to obtain the PE per minute (PE/MIN).
- Each specialty's PE pools (for each of the three direct and one indirect cost categories) are created by multiplying the PE/MIN for the specialty by the total time the specialty spent treating Medicare patients for all procedures (determined using Medicare utilization data). Physician time on a procedurespecific level is available through RUC surveys of new or revised codes and through surveys conducted as part of the 5-Year Review process. For codes that the RUC has not yet reviewed, the original data from the Harvard resourcebased RVU system survey are used. Physician time includes time spent on the case prior to, during, and after the procedure. The physician procedure time is multiplied by the frequency that each procedure is performed on Medicare patients by the specialty.
- The total specialty-specific SMS PE for each cost category is the sum, for each direct and indirect cost category, of all of the procedure-specific total PEs.

Step 2—Calculation of CPEP Cost Pool

CPEP data provide expenditure amounts for the direct expense categories (clinical labor, supplies and equipment cost) at the procedure level. Multiplying the CPEP procedure-level PEs for each of these three categories by the number of times the specialty provided the procedure, produces a total category cost, per procedure, for that specialty. The sum of the total expenses from each procedure results in the total CPEP category cost for the specialty.

Step 3—Calculation and Application of Scaling Factors

This step ensures that the total of the CPEP costs across all procedures performed by the specialty equates with the total direct costs for the specialty as reflected by the SMS data. To accomplish this, the CPEP data are scaled to SMS data by a scaling factor so that the total CPEP costs for each specialty equals the total SMS cost for the specialty. (The scaling factor is calculated by dividing the specialty's SMS pool by the specialty's CPEP pool.)

The unscaled CPEP cost per procedure value, at the direct cost level, is then multiplied by the respective specialty scalar to yield the scaled CPEP procedure value. The sum of the scaled CPEP direct cost pool expenditures equals the total scaled direct expense for the specific procedure at the specialty level.

Step 4—Calculation of Indirect Expenses

Indirect PEs cannot be directly attributed to a specific service because they are incurred by the practice as a whole. Indirect costs include rent, utilities, office equipment and supplies, and accounting and legal fees. There is not a single, universally accepted approach for allocating indirect practice costs to individual procedure codes. Rather allocation involves judgment in identifying the base or bases that are the best measures of a practice's indirect costs.

To allocate the indirect PEs to a specific service, we use the following methodology:

- The scaled direct expenses and the converted work RVU (the work RVU for the service is multiplied by \$34.5030, the 1995 CF) are added together, and then multiplied by the number of services provided by the specialty to Medicare patients;
- The total indirect PEs per specialty are calculated by summing the indirect expenses for all other procedures provided by that specialty.

Step 5—Calculation and Application of Indirect Scaling Factors

Similar to the direct costs, the indirect costs are scaled to ensure that the total across all procedures performed by the specialty equates with the total indirect costs for the specialty as reflected by the SMS data. To accomplish this, the indirect costs calculated in Step 4 are scaled to SMS data. The calculation of the indirect scaling factors is as follows:

- The specialty's total SMS indirect expense pool is divided by the specialty's total indirect expense pool calculated in Step 4, to yield the indirect expense scaling factor.
- The unscaled indirect expense amount, at the procedure level, is multiplied by the specialty's scaling factor to calculate the procedure's scaled indirect expenses.
- The sum of the scaled indirect expense amount and the procedure's direct expenses yields the total PEs for the specialty for this procedure.

Step 6—Weighted Average of RVUs for Procedures Performed by More Than One Specialty

For codes that are performed by more than one specialty, a weighted average PE is calculated based on Medicare frequency data of all specialties performing the procedure.

Step 7—Budget Neutrality and Final RVU Calculation

Section 1848(c)(2)(B)(ii)(II) of the Act provides that adjustments in RVUs may not cause total PFS payments to differ by more than \$20 million from what they would have been if the adjustments were not made. If the aggregate adjustments to PE RVUs would cause PFS expenditures to exceed the \$20 million threshold, the total scaled direct and indirect inputs are then adjusted by a budget neutrality factor (BNF) to calculate RVUs. Budget neutrality for the upcoming year is determined relative to the sum of PE RVUs for the current year. Although the PE RVUs for any particular code may vary from yearto-year, the sum of PE RVUs across all codes is set equal to the current year. The BNF is equal to the sum of the current year's PE RVUs, divided by the sum of the direct and indirect inputs across all codes for the upcoming year. The BNF is applied to (multiplied by) the scaled direct and indirect expenses for each code to set the PE RVU for the upcoming year.

c. Other Methodological Issues: Non-Physician Work Pool (NPWP)

As an interim measure, until we could further analyze the effect of the top-down methodology on the Medicare payment for services with no physician work (including the technical components (TCs) of radiation oncology, radiology and other diagnostic tests), we created a separate PE pool for these services. However, any specialty society could request that its services be removed from the non-physician work pool (NPWP). We will remove services from the NPWP if we find that the requesting specialty provides the service the majority of the time.

NPWP Step 1—Calculation of the SMS Cost Pool for Each Specialty

This step parallels the calculations described above for the standard "top-down" PE allocation methodology. For codes in the NPWP, the direct and indirect SMS costs are set equal to the weighted average of the PE/HR for the specialties that provide the services in the pool. Clinical staff time is substituted for physician time in the calculation. The clinical staff time for the code is from CPEP data. Otherwise,

the calculation is similar to the method described previously for codes with physician time.

NPWP Step 2—Calculation of Chargebased PE RVU Cost Pool

The NPWP calculation uses the 1998 (charge-based) PE RVU value for the code, multiplied by the 1995 CF (25.74 × \$34.503 = \$888.11). The percentage of clinical labor, supplies and equipment are the percentage that each PE category represents for all physicians relative to the total PE for all physicians (calculated from the SMS data).

NPWP Step 3—Calculation and Application of Scaling Factors

After the total cost pools for each specialty and code performed by the specialty are calculated, the steps to ensure the total costs for all of the procedures performed by a specialty do not exceed the total costs for the specialty (scaling) are the same as those described previously for codes with physician work.

NPWP Step 4—Calculation of Indirect Expenses

Because codes in the NPWP do not have work RVUs, indirect expenses are set equal to direct expenses (for codes with physician work, indirect expenses equal the sum of the scaled direct expenses and the converted work RVU). This amount is then multiplied by the number of times the procedure is performed.

NPWP Step 5—Calculation and Application of Indirect Scaling Factors

Similar to the direct costs, the indirect costs are scaled to ensure that the total of the charge-based PE RVU costs across all procedures equates with the total indirect costs as reflected by the SMS data for the NPWP. To accomplish this, the charge-based data are scaled to SMS data so the total charge-based costs equal the total SMS costs.

NPWP Step 6—Budget Neutrality and Final RVU Calculation

Similar to the calculation for codes with physician work, when a budget neutrality adjustment is necessary, the BNF is applied to (multiplied by) the scaled direct and indirect expenses for each code to set the PE RVU for the upcoming year.

d. Facility/Non-facility Costs

Procedures that can be performed in a physician's office, as well as in a hospital have two PE RVUs: Facility and non-facility. The non-facility setting includes physicians' offices, patients' homes, freestanding imaging centers, and independent pathology labs. Facility settings include hospitals, ambulatory surgical centers (ASCs), and skilled nursing facilities (SNFs). The methodology for calculating the PE RVU is the same for both facility and nonfacility RVUs, but is applied independently to yield two separate PE RVUs. Because the PEs for services provided in a facility setting are generally included in the payment to the facility (rather than the payment to the physician under the fee schedule), the PE RVUs are generally lower for services provided in the facility setting.

2. PE Proposals Methodology for CY 2006

The following discussions outline the specific PE related proposals for CY 2007.

We have three major goals for our resource-based PE methodology:

- To ensure that the PE portion of PFS payments reflect, to the greatest extent possible, the relative resources required for each of the services on the PFS. This could only be accomplished by using the best available data to calculate the PE RVUs.
- To develop a payment system for PE that is understandable and at least somewhat intuitive, so that specialties could better predict the impacts of changes in the PE data.
- To stabilize the PE portion of PFS payments so that changes in PE RVUs do not produce large fluctuations in the payment for given procedures from year-to-year.

These goals have also been supported in numerous comments we have received from the medical community.

In the CY 2006 PFS proposed rule (70 FR 45764), we proposed the following changes to the PE methodology that we believed would help in achieving our three major goals (stated above in this section):

- Using the PE/HR data from seven specialty-specific supplementary surveys.
- Calculating the direct PE using a bottom-up methodology.
- Eliminating the NPWP.

We also proposed an indirect PE methodology that was to assign to each service the higher of the current indirect PE RVUs or the indirect PE RVUs calculated using the supplementary survey data.

In the CY 2006 PFS final rule with comment period (70 FR 70116), we withdrew these proposals primarily because a programming error for the indirect PE RVU calculation had led to the publication of inaccurate proposed PE RVUs. On February 15, 2006, we sponsored a PE Town Hall Meeting and

invited the public, including all specialty representatives to attend. At this meeting, we supplied a detailed description of the bottom-up approach to the calculation of resource-based PE RVUs. Three examples were examined in detail that illustrated the impact of the various assumptions that could be used under a bottom-up approach. We specifically requested input from all interested parties on possible changes to our PE methodology, including the move to a bottom-up approach and the various methods of calculating indirect PE.

We have reviewed the approximately 35 comments that we received in response to our solicitation. Many of the comments were combined efforts from related specialty organizations.

Additionally, the AMA RUC also supplied a letter that captured the comments of nearly 30 specialty organizations. The following is a summary of some of the comments we received.

- Delaying Implementation of Changes to the Current PE Methodology: There were mixed opinions from commenters on whether we should proceed with a proposal to use a bottom-up approach. Some commenters emphasized that the CPEP data has been refined and is now the best available source of data, and asserted that it should be used for the calculation of resource-based PE RVUs. Other comments suggested a delay in changing to a bottom-up approach because of the other issues that are affecting PFS payments this year (such as, the effect of imaging payment provisions in the Deficit Reduction Act (DRA), the impact of the negative update, and the uncertainty regarding the impact of the 5-Year Review of work RVUs).
- Transition to a Bottom-Up Approach: The majority of commenters requested a minimum one-year transition to a maximum 3-year transition period to fully implement any change to a bottom-up approach. All of the commenters supported a transition period whether or not they supported the implementation of a bottom-up approach.
- Use of Supplemental Survey Data: A large number of commenters stated that, irrespective of what we propose for 2007, the supplemental survey data that has already been accepted should be used. Other commenters believed that the supplemental survey data grossly overstated PEs and should not be utilized in the development of resource based PE RVUs.
- Multi-Specialty PE Survey: The majority of commenters supported the construction and use of a multi-

specialty survey to collect PE data. Commenters believed that the supplemental survey data is inflated and that the SMS survey data are outdated.

- Review Equipment Utilization Assumptions and Interest Rates: Many commenters supported the review and revision of both the current utilization assumptions and the interest rates associated with high cost equipment. Commenters had mixed reactions as to whether the utilization rates should be higher or lower, and some suggested that we review the possibility of equipment-specific utilization assumptions for the future. Most commenters believed that the current 11 percent interest rate is significantly higher then the actual interest rates and many commenters suggested a rate of approximately prime plus 2 percent.
- Proxy Work RVUs for No Physician Work Services: Commenters were divided on the assignment of a proxy work RVU to services that contain no physician work. Some commenters believed that no physician work services are unfairly penalized under any bottom-up approach, while other comments stated that the inclusion of a proxy work RVU would double count the clinical labor associated with the no physician work services.

After considering the comments we received on the CY 2006 PFS proposed rule (70 FR 45764) and in response to comments received during and following the Town Hall meeting, we believe that the use of a bottom-up methodology for direct costs, use of the supplementary survey data and elimination of the NPWP would assist us in meeting our goal of a PE methodology that is equitable, understandable and stable. Therefore, we are again proposing these changes to our PE methodology. We are also proposing a change in the methodology used to calculate the indirect PE for each service that is different than previously proposed. The following is a summary of our proposals.

a. Use a Bottom-Up Method to Calculate the Direct PEs

We believe that we have consistently made a good faith effort to ensure fairness in our PE RVU-setting system by using the best data available at any one time. The reason we did not adopt the bottom-up methodology originally proposed in 1997 and instead adopted the top-down methodology finalized in 1998 was because we recognized the concerns among the physician community that the resource input data developed in 1995 by the CPEP were

less reliable than the aggregate specialty cost data derived from the SMS process.

However, the situation has now changed. The PEAC/PERC/RUC has completed the refinement of the original CPEP data and we believe that the refined PE inputs now, in general, accurately capture the relative direct costs of performing PFS services. Conversely, although we have now accepted supplementary survey data from 13 specialties, we have not received updated aggregate cost data from most specialties. Thus, we believe that, in the aggregate, the refined CPEP data represent more reliably the relative direct cost PE inputs for physicians' services.

Therefore, instead of using the topdown approach to calculate the direct PE RVUs, where the aggregate CPEP/ RUC costs for each specialty are scaled to match the aggregate SMS costs, we propose to adopt a bottom-up method of determining the relative direct costs for each service. Under this method, the direct costs would be determined by adding the costs of the resources (that is, the clinical staff, equipment and supplies) typically required to provide the service. The costs of the resources, in turn, would be calculated from the refined CPEP/RUC inputs in our PE database

We believe that this proposed change, which was welcomed by most commenters in the CY 2006 PFS proposed rule, will lead to greater stability and accuracy in the PE portion of our payment system. Currently, under the top-down methodology, the need to scale the CPEP costs to equal the SMS costs meant that any changes in the direct PE inputs for one service often leads to unexpected results for other services where the inputs had not been altered. In addition, the current PE RVUs for a procedure do not necessarily change proportionately with changes in the direct inputs, creating possible anomalous values. We believe that our proposed bottom-up methodology would resolve these issues, so that changes in the PE RVUs would be more intuitive and would result in fewer surprises.

b. Use the PE/HR Data From the Seven Surveys We Have Previously Accepted and, in Addition, Use the PE/HR Data From the Survey Submitted by the National Coalition of Quality Diagnostic Imaging Services (NCQDIS)

As explained in the CY 2005 PFS final rule with comment period (69 FR 66242), we received surveys from the ACC, the ACR, and the ASTRO by March 1, 2004. The data submitted by the ACC and the ACR met our criteria.

However, as requested by the ACC and the ACR, we deferred using their data until issues related to the NPWP could be addressed. (The survey data from ASTRO did not meet the precision criteria established for supplemental surveys; therefore, we did not accept or use it in the calculation of PE RVUs for 2005.)

In March 2005, we also received surveys from the Association of Freestanding Radiation Oncology Centers (AFROC), the AUA, the AAD, the JCAAI, the NCQDIS, and a joint survey from the American Gastroenterological Association (AGA), the American Society of Gastrointestinal Endoscopy (ASGE) and the American College of Gastroenterology (ACG).

All the surveys, with the exception of the survey from NCQDIS, met our criteria. Therefore, we proposed in the CY 2006 PFS proposed rule (70 FR 45775) to use the survey data from all the surveys meeting our criteria in the calculation of PE RVUs for 2006; but, as discussed in the CY 2006 PFS final rule with comment period (70 FR 70116) and above in this section, this proposal was not finalized.

We contracted with the Lewin Group (Lewin) to evaluate whether the supplemental survey data that were submitted met our criteria and to make recommendations to us regarding their suitability for use in calculating PE RVUs. As described in the CY 2006 PFS proposed rule (70 FR 45775), Lewin recommended blending the radiation oncology data from the AFROC survey data with the ASTRO survey data submitted in 2004 to calculate the PE/ HR. According to Lewin, the goal of the AFROC survey was to represent the population of freestanding radiation oncology centers only. To develop an overall average for the radiation oncology PE pool, the Lewin Group recommended we use the AFROC survey for freestanding radiation oncology centers, and the hospital-based subset of last year's ASTRO survey. We agreed that this blending of the AFROC and ASTRO data was a reasonable way to calculate an average PE/HR that fully reflects the practice of radiation oncology in all settings. Blending the survey data overcame the initial problem that the ASTRO data do not meet the precision criteria as discussed in the CY 2005 PFS final rule (69 FR 66242). In addition, as discussed in the CY 2006 PFS proposed rule (70 FR 45776), blending of the data allowed for a broader base of radiation oncology providers to be represented.

Also, as discussed in the CY 2006 PFS proposed rule (70 FR 45764), Lewin indicated that the survey data submitted

by the NCQDIS on independent diagnostic testing facilities (IDTFs) did not meet our precision criterion. However, upon further analysis, Lewin agreed with NCQDIS' determination that the inclusion of one inaccurate record skewed the findings outside the acceptable precision range. Lewin recalculated the precision level at 8.1 percent of the mean PE/HR (weighted by the number of physicians in the practice). Lewin indicated that the level of precision for the total PE/HR satisfies

the level of precision requirement, and recommended acceptance of the survey.

We are now proposing to use the PE/HR data from all of the above surveys, including the NCQDIS survey, in the calculation of the PE RVUs for 2007. We are again proposing for radiation oncology to use the new PE/HR derived from combining the AFROC and ASTRO survey data, as recommended by Lewin.

We propose to use the PE per physician hour figures in Table 52. It should be noted that the relatively high PE per physician hour values for IDTFs result from the fact that there are far fewer hours for this specialty than most others. IDTFs use relatively few physician hours, so the same practice expenses in the numerator divided by the smaller denominator results in considerably higher values for practice expenses per hour. Although these values of PE/HR appear to be outliers, they actually contribute little to the overall value for practice expenses per hour, because the volume of each of the services performed by the IDTFs represents a relatively small percentage of the total services.

Specialty	Clinical labor	Supplies	Equipment	Administrative expense	Office expense	Other expense
Allergy/Immunology	65.9	22.5	6.3	56.3	65.9	31.1
Cardiology	59.6	25.9	18.6	53.3	52.7	25
Dermatology	40.6	15.4	11	51.5	78.8	28.2
Gastro-enterology	30.2	8.2	5.9	39.6	48.4	13.3
IDTF	111.6	55	302.5	155.5	121.2	189.5
Radiology	29.1	11.3	27.3	37.8	23.9	44.8
Radiation Oncology	49.7	4.8	27.6	26	39.7	28.1
Urology	27.9	14.4	11.2	42.3	53.8	23.4

Section 303(a)(1)(B) of the Medicare Prescription Drug, Improvement, and Modernization Act of 2003 (MMA) (Pub. L. 108-173) added section 1848(c)(2)(I) of the Act to require CMS to use survey data submitted by a specialty group where at least 40 percent of the specialty's payments for Part B services are attributable to the administration of drugs in 2002 to adjust PE RVUs for drug administration services. The statute applies to surveys that include expenses for the administration of drugs and biologicals, and were received by March 1, 2005 for determining the CY 2006 PE RVUs. Section 303(a)(1)(A)(ii) of the MMA also added section 1848(c)(2)(B)(iv)(II) of the Act to provide an exemption from budget neutrality in 2005 and 2006 for any additional expenditures resulting from the use of these surveys. In the Changes to Medicare Payment for Drugs and Physician Fee Schedule Payments for CY 2004 interim final rule published January 7, 2004 (69 FR 1084), we stated that the specialties of urology, gynecology, and rheumatology meet the above criteria. As described in the CY 2006 PFS final rule with comment period (70 FR 70116), we accepted for the purposes of calculating the 2006 PE RVUs for drug administration services the new survey data from the AUA and exempted from the budget neutrality adjustment any impacts of accepting these data for purposes of calculating PE RVUs for drug administration services. (Note: Rheumatology and gynecology

did not submit supplemental survey data.)

c. Eliminate the NPWP and Calculate the PE RVUs for All Services Using the Same Methodology

Primarily because of the lack of representative SMS data or accurate direct cost inputs for specialties such as radiology and radiation oncology, the adoption of the top-down approach necessitated the creation of the NPWP. This separate work pool was created to allocate PE RVUs for TC codes and codes that are not performed by physicians and, thus, have no work RVUs. In the CY 2000 Physician Fee Schedule; Payment Policies and Relative Value Unit Adjustment final rule, we indicated that "the purpose of this pool was only to protect the (TC) services from the substantial decreases" caused by inaccurate CPEP data and the lack of physician work RVU in the allocation of the indirect costs (64 FR 59406). Unfortunately, the services priced by the NPWP methodology have proven to be especially vulnerable to any change in the work pool's composition. This has led to significant fluctuations from year to year in the PE RVUs calculated for these services.

The major specialties comprising the NPWP (radiology, radiation oncology and cardiology) have now submitted supplemental survey data that we have accepted and are proposing to use in their PE calculations. (See the discussion on supplementary surveys

above in this section.) Now that we have representative aggregate PE data for these specialties, and with the completion of the refinement of the direct cost inputs, the continued necessity and equity of treating these technical services outside the PE methodology applied to other services is questionable.

Therefore, we are proposing to eliminate the NPWP and to calculate the PE RVUs for the services currently in the work pool by the same methodology used for all other services. This would also allow the use of the refined CPEP/RUC data to price the direct costs of individual services, rather than utilizing the pre-1998 charge-based PE RVUs. In addition, this proposal would lead to greater stability for the PE RVUs for these services and would lead to more intuitive results than have occurred with the NPWP methodology.

d. Modify the Current Indirect PE RVUs Methodology

As described previously, the SMS and supplementary survey data are the source for the specialty-specific aggregate indirect costs used in our PE calculations. We then allocate the indirect costs to particular codes on the basis of the direct costs allocated to a code and the work RVUs. In the CY 2006 PFS proposed rule (70 FR 45764), we stated that we had no information that would indicate that the current indirect PE methodology is inaccurate. At that time, we also were not aware of

any alternative approaches or data sources that we could use to calculate more appropriately the indirect PE, other than the new supplementary survey data, which we propose to incorporate into our PE calculations. Therefore, we proposed to use the current indirect PEs in our calculation, incorporating the new survey data into the codes performed by the specialties submitting the surveys. We also indicated in that same proposed rule that we would welcome any suggestions that would assist us in further refinement of this indirect PE methodology. For example, we were considering whether we should continue to accept supplementary survey data or whether it would be preferable and feasible to have an SMStype survey of only indirect costs for all specialties, or whether a more formulabased methodology independent of the SMS data should be adopted, perhaps using the specialty-specific indirect-tototal cost percentage as a basis of the calculation. For a prior discussion of many of the issues associated with allocating indirect costs, please refer to the CY 2000 Physician Fee Schedule; Payment Policies and Relative Value Unit Adjustment proposed rule (63 FR 30823).

3. Modifications to PE Proposals

As a result of collaboration with the PFS community and public comments on this issue, we are now in a position to propose modifications to the indirect PE methodology.

a. Indirect Percentage Factor: Use of the Specialty-Specific Percentage That Indirect PEs Represent of Total PEs Based on the Survey Data

We currently allocate indirect expenses on the sum of the direct expenses and the work RVUs (converted to dollars by multiplying by the CF). We are proposing to allocate indirect expenses by applying a specialtyspecific indirect percentage factor to the direct expenses in order to recognize the varying proportion that indirect costs represent of total costs by specialty. This would have the effect of relatively increasing the indirect expense allocation for services that are on average performed by specialties with higher indirect PE percentages, and relatively decreasing the indirect expense allocation for services that are performed by specialties with lower indirect PE percentages. For a given service, the specific indirect percentage factor to apply to the direct costs for the purpose of the indirect allocation would be calculated as the weighted average of the ratio of the indirect to direct costs

(based on the survey data) for the specialties that perform the code. For example, if a service is performed by a single specialty with indirect PEs that were 75 percent of total PEs, the indirect percentage factor to apply to the direct costs for the purposes of the indirect allocation would be (0.75/0.25) = 3.0.

 b. Continued Use of the Specialty-Specific Indirect Scaling Factors

As described earlier, we incorporate the indirect PE/HR surveys into the methodology through the use of specialty-specific indirect scaling factors. We would continue to use the specialty-specific indirect scaling factors; however, to apply them in a simpler manner we propose to create an index. This index would reflect the relationship between each specialty's indirect scaling factor and the overall indirect scaling factor for the entire PFS. For example, if a specialty had an indirect practice cost index of 2.00, this specialty would have an indirect scaling factor that was twice the overall average indirect scaling factor. If a specialty had an indirect practice cost index of 0.50, this specialty would have an indirect scaling factor that was half the overall average indirect scaling factor. The calculation and application of the indirect practice cost index is described in more detail below in this section.

c. Use of the Clinical Labor Costs in the Indirect Allocation for a Service When the Clinical Labor Costs are Greater Than the Physician Work RVU

We have received numerous comments that services with little or no physician work RVUs are disadvantaged under our current indirect allocation methodology based on the direct costs and the work RVUs. In response to these comments, when the clinical labor portion of the direct PE RVU is greater than the physician work RVU for a particular service, we are proposing to allocate on the direct costs and the clinical labor costs. For example, if a service has no physician work, the direct PE RVU is 1.10 and the clinical labor portion of the direct PE RVU is 0.65 RVUs, we would use the 1.10 direct PE RVUs and the 0.65 clinical labor portion of the direct PE RVUs for the indirect PE allocation for that service. As another example, if the physician work RVUs for a service are 0.25, the direct PE RVU is 1.10 and the clinical labor portion of the direct PE RVU is 0.65 RVUs, we would use the 1.10 direct PE RVUs and the 0.65 clinical labor RVUs for the indirect allocation for that service. We would not use the 0.25 physician work RVUs for the indirect PE allocation since the 0.65 clinical labor

RVUs are greater than the 0.25 physician work RVUs.

d. Use of 2005 Utilization Data in the Indirect PE RVU Calculation

Under the current PE methodology, we predominately use the 1997-2000 utilization data in the calculation of the indirect PE RVUs when the service existed during 1997-2000 or the first year of utilization data if the service did not exist during that time period. We used those years of utilization data primarily to increase the year to year stability of the PE RVUs. With the changes we are proposing to make to PE RVUs, in particular the elimination of the NPWP, we will increase the year-tovear stability of the PE RVUs. We believe it is now appropriate to use updated utilization data in the calculation of the indirect PEs. We believe the other proposed changes in the PE methodology will help obtain the year-to-year stability we were attempting to achieve by continuing to use the older utilization data. Additionally, the use of more current utilization data would reflect the more current practice patterns. We are proposing to use the 2005 utilization data in the calculation of the 2007 indirect PE RVUs. We are also seeking comments on whether the utilization data should be updated yearly, which would increase the accuracy of the PE calculations, or less often, which would increase the stability of the PE RVUs.

e. Elimination of the Special Methodologies for Services With Technical and Professional Components

Under the PFS, when services have technical, professional, and global components that can be billed separately, the payment for the global component equals the sum of the payment for the technical and professional components. Under the current PE methodology, the different mix of specialties that perform the global, technical and professional components can cause the PE RVUs, otherwise created by the methodology, to fail to add together properly; that is, the global component does not equal the sum of the professional and technical components. The global component might exceed the sum of the technical and professional components or it might be less than the sum of the technical and professional components. We ensure that the technical and professional components add to the global component in one of two ways. For services in the NPWP, we set the PE RVUs for the global component equal to the sum of the professional component PE RVU and the technical component

PE RVU. For services outside the NPWP, (i) Proposed PE RVU Methodology we set the PE RVUs for the technical component equal to the difference between the global PE RVUs and the professional component RVUs.

With our proposed change to a bottom-up methodology for the direct PEs, there would be no weighted averaging of the direct costs inputs necessary to create the direct PE RVUs and, therefore, the direct PE RVUs for the professional and technical components would sum to the global component. Under the current methodology, as a result of the process used to ensure the professional and technical components sum to the global, RVUs for a service with a global component can be either more or less than the RVUs that would have been calculated for the service if the professional and technical components did not have to sum to the global.

Given the proposed change to bottomup methodology and the elimination of the NPWP, we believe it is inappropriate to have codes for which the global, and the technical and professional components are assigned RVUs that are either less than or greater than the methodology would otherwise produce, and thus, are paid at a rate that is either less than or greater than the methodology would otherwise specify. (See section II.D.1. of this proposed notice for the discussion of the current methodology.) Therefore, we are proposing that in the calculation of the indirect percentage factor described earlier in section II.D.3.a., we would use a weighted average of the ratio of indirect to direct costs across all the specialties that perform the global, technical, and professional components; that is, we would apply the same weighted average indirect percentage factor to allocate indirect expenses to the global, professional, and technical components for a service. We also propose to utilize a similar weighted averaging approach across all the specialties that perform the components when calculating the indirect PE scaling factor. Because the direct PE RVUs for the technical and professional components sum to the global under the bottom-up methodology, and we are proposing to calculate the indirect percentage factor and the indirect scaling factor so that they do not vary between the technical, professional, and global components, our proposed methodology would create technical and professional components that sum to the global, and no other special methodology would need to be employed.

Below is a description of the proposed PE RVU methodology.

(a) Setup File

First, we create a setup file for the PE methodology. The setup file contains the direct cost inputs, the utilization for each procedure code at the specialty and facility/nonfacility place of service level, and the specialty-specific survey PE per physician hour data. Information specific to the creation of the setup file can be found at the end of section II.D.

(b) Calculate the Direct Cost PE RVUs

Sum the costs of each direct input. Step 1: Sum the direct costs of the inputs for each service. The direct costs consist of the costs of the direct inputs for clinical labor, medical supplies, and medical equipment. The clinical labor cost is the sum of the cost of all the staff types associated with the service; it is the product of the time for each staff type and the wage rate for that staff type. The medical supplies cost is the sum of the supplies associated with the service; it is the product of the quantity of each supply and the cost of the supply. The medical equipment cost is the sum of the cost of the equipment associated with the service; it is the product of the number of minutes each piece of equipment is used in the service and the equipment cost per minute. The equipment cost per minute is calculated as described at the end of this section.

Apply a budget neutrality adjustment to the direct inputs.

Step 2: Calculate the current aggregate pool of direct PE costs. To do this, multiply the current aggregate pool of total direct and indirect PE costs (that is, the current aggregate PE RVUs multiplied by the CF) by the average direct PE percentage from the SMS and supplementary specialty survey data.

Step 3: Calculate the aggregate pool of proposed direct costs. To do this, for all PFS services, sum the product of the direct costs for each service from Step 1 and the utilization data for that service.

Step 4: Using the results of Step 2 and Step 3 calculate a direct PE budget neutrality adjustment so that the proposed aggregate direct cost pool does not exceed the current aggregate direct cost pool and apply it to the direct costs from Step 1 for each service.

Step 5: Convert the results of Step 4 to an RVU scale for each service. To do this, divide the results of Step 4 by the Medicare PFS CF.

(c) Create the Indirect PE RVUs

Create indirect allocators.

Step 6: Based on the SMS and supplementary specialty survey data, calculate direct and indirect PE percentages for each physician specialty.

Step 7: Calculate direct and indirect PE percentages at the service level by taking a weighted average of the results of Step 6 for the specialties that perform the service. Note that for services with technical and professional components we are calculating the direct and indirect percentages across the global, professional and technical components. That is, the direct and indirect percentages for a given service (for example, echocardiogram) do not vary by the professional, technical and global components.

Step 8: Calculate the service level allocators for the indirect PEs based on the percentages calculated in Step 7. The indirect PEs are allocated based on the three components: the direct PE RVU, the clinical PE RVU and the work RVU. (Note that the work RVU used in the calculation includes the separate work budget neutrality adjustment from the 5-Year Review of the work RVUs discussed elsewhere in this proposed notice.)

For most services the indirect allocator is: Indirect percentage * (direct PE RVU/direct percentage) + work RVU.

There are two situations where this formula is modified:

- If the service is a global service (that is, a service with global, professional and technical components), then the indirect allocator is: indirect percentage * (direct PERVU/direct percentage) + clinical PE RVU + work RVU
- If the clinical labor PE RVU exceeds the work RVU (and the service is not a global service), then the indirect allocator is: indirect percentage * (direct PERVU/direct percentage) + clinical PE RVU.

Note that for global services the indirect allocator is based on both the work RVU and the clinical labor PE RVU. We do this to recognize that, for the professional service, indirect PEs will be allocated using the work RVUs, and for the technical component service, indirect PEs will be allocated using the direct PE RVU and the clinical labor PE RVU. This also allows the global component RVUs to equal the sum of the professional and technical component RVUs.)

For presentation purposes in the examples in the Table 53, the formulas are divided into two parts for each service. The first part does not vary by service and is the indirect percentage (direct PE RVU/direct percentage). The second part is either the work RVU, clinical PE RVU, or both depending on whether the service is a global service and whether the clinical PE RVU

exceeds the work RVU (as described earlier in this step.)

Apply a budget neutrality adjustment to the indirect allocators.

Step 9: Calculate the current aggregate pool of indirect PE RVUs by multiplying the current aggregate pool of PE RVUs by the average indirect PE percentage from the physician specialty survey data. This is similar to the Step 2 calculation for the direct PE RVUs.

Step 10: Calculate an aggregate pool of proposed indirect PE RVUs for all PFS services by adding the product of the indirect PE allocators for a service from Step 8 and the utilization data for that service. This is similar to the Step 3 calculation for the direct PE RVUs.

Step 11: Using the results of Step 9 and Step 10, calculate an indirect PE adjustment so that the proposed aggregate indirect allocation does not exceed the available aggregate indirect PE RVUs and apply it to indirect allocators calculated in Step 8. This is similar to the Step 4 calculation for the direct PE RVUs.

Calculate the Indirect Practice Cost Index.

Step 12: Using the results of Step 11, calculate aggregate pools of specialty-specific adjusted indirect PE allocators for all PFS services for a specialty by adding the product of the adjusted indirect PE allocator for each service and the utilization data for that service.

Step 13: Using the specialty-specific indirect PE/HR data, calculate specialty-specific aggregate pools of indirect PE for all PFS services for that specialty by adding the product of the indirect PE/HR for the specialty, the physician time for the service, and the specialty's utilization for the service.

Step 14: Using the results of Step 12 and Step 13, calculate the specialty-specific indirect PE scaling factors as under the current methodology.

Step 15: Using the results of Step 14, calculate an indirect practice cost index at the specialty level by dividing each specialty-specific indirect scaling factor by the average indirect scaling factor for the entire PFS.

Step 16: Calculate the indirect practice cost index at the service level

to ensure the capture of all indirect costs. Calculate a weighted average of the practice cost index values for the specialties that perform the service. Note that for services with technical and professional components, we calculate the indirect practice cost index across the global, professional and technical components. Under this method, the indirect practice cost index for a given service (for example, echocardiogram) does not vary by the professional, technical and global components.

Step 17: Apply the service level indirect practice cost index calculated in Step 16 to the service level adjusted indirect allocators calculated in Step 11 to get the indirect PE RVU.

(d) Calculate the Final PE RVUs

Step 18: Add the direct PE RVUs from Step 6 to the indirect PE RVUs from Step 17.

Step 19: Calculate and apply the final PE budget neutrality adjustment by comparing the results of Step 18 to the current pool of PE RVUs. This final budget neutrality adjustment is primarily required because certain specialties are excluded from the PE RVU calculation for ratesetting purposes, but all specialties are included for purposes of calculating the final budget neutrality adjustment. (See "Specialties excluded from rate-setting calculation" below in this section.)

(e) Setup File Information

- Specialties excluded from ratesetting calculation: For the purposes of calculating the PE RVUs, we exclude certain specialties such as midlevel practitioners paid at a percentage of the PFS, audiology, and low volume specialties from the calculation. This is the same approach used under the current methodology. These specialties are included for the purposes of calculating the budget neutrality adjustment.
- Crosswalk certain low volume physician specialties: Crosswalk the utilization of certain specialties with relatively low PFS utilization to the associated specialties. This is the same approach used under the current methodology.

- Physical therapy utilization: Crosswalk physical therapy utilization to the specialty of physical therapy. This is the same approach used under the current methodology.
- Identify professional and technical services not identified under the usual TC and 26 modifier: Flag the services that are professional and technical component services, but do not use TC and 26 modifiers (for example, electrocardiograms). This flag associates the professional and technical component with the associated global code for use in creating the indirect PE RVU. For example, the professional service code 93010 is associated with the global code 93000.
- Payment modifiers: Payment modifiers are accounted for in the creation of the file. For example, services billed with the assistant at surgery modifier are paid 16 percent of the PFS amount for that service; therefore, the utilization file is modified to only account for 16 percent of any service that contains the assistant at surgery modifier.
- Proposed work RVUs from the 5-Year Review: The setup file contains the proposed work RVUs from the 5-Year Review.

The equipment cost per minute is calculated as:

(f) Equipment Cost Per Minute =

(1/(minutes per year * usage)) * price *
((interest rate/(1 - (1/((1 + interest
rate) * life of equipment))) +
maintenance)

Where:

Minutes per year = maximum minutes per year if usage were continuous (that is, usage = 1); 150,000 minutes.

Usage = equipment utilization assumption; 0.5.

Price = price of the particular piece of equipment.

 $Interest\ rate = 0.11.$

Life of equipment = useful life of the particular piece of equipment.

Maintenance = factor for maintenance; 0.05.

Calculation of PE RVUs under Proposed Methodology For Selected Codes TABLE 53:

							Code with	Code with Description			
	Step	Source	Formula	99213 Office visit, est Nonfacility	33533 CABG, arterial, single Facility	71020 Chest x-ray Nonfacility	71020 TC Chest x-ray Nonfacility	71020 26 Chest x-ray Nonfacility	93000 ECG, complete Nonfacility	93005 ECG, tracing Nonfacility	93010 ECG, report Nonfacility
(1) Labor cost (Lab)	Step 1	AMA		\$13.32	\$107.61	\$ 5.74	\$5.74	\$	\$6.12	\$6.12	8
(2) Supply cost (Sup)	Step 1	AMA		\$2.98	\$10.77	\$3.39	\$3.39	\$	\$1.19	\$1.19	 \$
(3) Equipment cost (Eqp)	Step 1	AMA		\$0.19	\$1.13	\$8.14	\$ 8.14	\$	\$0.12	\$0.12	\$
(4) Direct cost (Dir)	Step 1		=(1)+(2)+(3)	\$16.50	\$119.51	\$17.28	\$17.28	\$	\$7.43	\$7.43	\$
(5) Direct Adjustment (Dir Adj)	Steps 2- 4	See footnote *		0.667	0.667	0.667	0.667	0.667	0.667	0.667	0.667
(6) Adjusted labor	Steps 2- 4	=Lab*Dir Adj	(2)*(1)=	\$8.88	\$71.73	\$3.83	\$3.83	\$	\$4.08	\$4.08	\$
(7) Adjusted supplies	Steps 2- 4	=Sup*Dir Adj	=(2)*(5)	\$1.99	\$7.18	\$2.26	\$2.26		\$0.80	\$0.80	
(8) Adjusted equipment	Steps 2- 4	=Eqp*Dir Adj	=(3)*(5)	\$0.13	\$0.76	\$5.43	\$5.43		\$0.08	\$0.08	
(9) Adjusted direct	Steps 2- 4		(8)+(2)+(9)=	\$11.00	\$79.67	\$11.52	\$11.52	-	\$4.95	\$4.95	
(10) Conversion Factor (CF)	Step 5	MFS		\$37.8975	\$37.8975	\$37.8975	\$37.8975	\$37.8975	\$37.8975	\$37.8975	\$37.8975
(11) Adjusted labor cost converted)	Step 5	=(Lab*Dir Adj)/CF	=(6)/(10)	0.23	1.89	0.10	0.10		0.11	0.11	
(12) Adusted supply cost converted	Step 5	=(Sup*Dir Adj)/CF	=(7)/(10)	0.05	0.19	90.0	90.0		0.02	0.05	I
(13) Adjusted equipment cost converted	Step-5	=(Eqp*Dir Adj)/CF	=(8)/(10)	00:0	0.05	0.14	0.14		00:0	00:00	İ
(14) Adjusted direct cost converted	Step 5		=(11)+(12)+ (13)	0.29	2.10	0:30	0:30		0.13	0.13	
(15) Adjusted Work RVU	Setup File	MFS (5-Year Review)		0.83	33.65	0.20		0.20	0.15		0.15

							Code with	Code with Description			
	Step	Source	Formula	99213 Office visit, est Nonfacility	33533 CABG, arterial, single Facility	71020 Chest x-ray Nonfacility	71020 TC Chest x-ray Nonfacility	71020 26 Chest x-ray Nonfacility	93000 ECG, complete Nonfacility	93005 ECG, tracing Nonfacility	93010 ECG, report Nonfacility
(15) Direct percentage	Steps 6,7	Survey data		33.9%	32.6%	38.0%	38.0%	38.0%	37.6%	37.6%	37.6%
(17) Indirect Percentage	Steps 6, 7	Survey data		66.1%	67.4%	62.0%	62.0%	62.0%	62.4%	62.4%	62.4%
(18) Indirect Allocator. formula (1st part)	Step 8	See Step 8		((14)/(16))* (17)	((14)/(16))* (17)	((14)/(16))* (17)	((14)/(16))* (17)	((14)/(16))* (17)	((14)/(16))* (17)	((14)/(16))* (17)	((14)/(16))* (17)
(19) Individual Allocator (1st part)	Step 8		See (18)	0.57	4.35	0.50	0:20		0.22	0.22	
(20) Indirect Allocator formulas (2nd part)	Step 8	See Step 8		(15)	(15)	(15)+(11)	(11)	(15)	(12)+(11)	(11)	(15)
(21) Indirect Allocator (2nd part)	Step 8		See (20)	0.83	33.65	0:30	0.10	0.20	0.26	0.11	0.15
(22) Indirect Allocator (1st+2nd)	Step 8	·	=(19)+(21)	1.40	38.00	080	09:0	0.20	0.48	0.32	0.15
oct t (Ind Adj)	Steps 9- 11	See footnote**		0.354	0.354	0.354	0.354	0.354	0.354	0.354	0.354
l	Steps 9- 11	=ind Alloc * Ind Adj		0.49	13.45	0.28	0.21	0.07	0.17	0.11	0.05
(25) Indirect Practice Cost Index (PCI)	Steps 12-16	See Steps 12-16		0.943	0.972	1.026	1.026	1.026	1.300	1.300	1.300
(26) Adjusted Indirect	Step 17	= Adj. Ind Alloc*PCI	=(24)*(25)	0.47	13.07	0.29	0.22	0.07	0.22	0.15	0.07
(27) PE RVU	Steps 18, 19	=(Adj Dir+Adj Ind)*budget neutrality adj.	=((14)+(26))* budget neutrality.	0.76	15.18	0.59	0.52	0.07	0.35	0.28	0.07

* The direct adj = [current pe rvus * CF * avg dir pct] / [sum direct inputs] = [Step 2] / [Step 3]
** The indirect adj = [current pe rvus * avg ind pct] / [sum of ind allocators] = [Step 9] / [Step 10]

(ii) Transition the Resulting Revised PE RVUs over a Four-Year Period

A complete analysis of the impacts of these changes is contained in the impact analysis in section V. of this proposed rule. We are concerned that, when combined with a proposed negative update factor for CY 2007 and the proposed changes to the work RVUs under the 5-Year Review, the shifts in some of the PE RVUs resulting from the immediate implementation of our proposals could potentially cause some disruption for medical practices. Therefore, we are proposing to transition the proposed PE changes over a 4-year period. This would also give ample opportunity for us, as well as the medical specialties and the RUC, to identify any anomalies in the PE data, to make any further appropriate revisions, and to collect additional data as needed prior to the full implementation of the proposed PE changes.

During the transition period, the PE RVUs would be calculated on the basis of a blend of RVUs calculated using our proposed methodology described above (weighted by 25 percent during CY 2007, 50 percent during CY 2008, 75 percent during CY 2009, and 100 percent thereinafter), and the current CY 2006 PE RVUs for each existing code. PE RVUs for codes that are new during this period would be calculated using only the proposed methodology, and paid at the fully transitioned rate. We believe that implementing all of these proposed changes would further our goal of producing a more accurate, more intuitive and more stable PE methodology.

For example, as stated above in this section, now that the direct PE inputs have been refined, we believe that the proposed CPEP/RUC direct input data are superior to the specialty-specific SMS PE/HR data for the purposes of determining the typical direct PE resources required to perform each service on the PFS. First, we have received recommendations on the procedure-specific inputs from the multi-specialty PEAC that were based on presentations from the relevant specialties, after the inputs were closely scrutinized by the PEAC using standards and packages that were agreed upon by all involved specialties. Second, the refined CPEP/RUC data are more current than the aggregate specialty-specific data for the majority of specialties. Third, for direct costs, we believe that it is reasonable to assume that the costs of the clinical staff, supplies and equipment are the same for a given service, regardless of the

specialty that is performing it. This does not happen under the top-down direct cost methodology, where the specialtyspecific scaling factors can create differing direct costs for the same service.

We also believe the proposed methodology is less confusing and more intuitive than the current approach. First, the NPWP would be eliminated and all services would be priced using one methodology, eliminating the complicated calculations needed to price NPWP services. Second, any revisions made to the direct inputs for one or more services would now have predictable results. Changes in the direct practice inputs for a service would proportionately change the PE RVUs for that service without significantly affecting the PE RVUs for unrelated services (except, of course, to the extent that a budget neutrality adjustment is required to be applied by the statute).

The proposed methodology would also create a system that would be significantly more stable from year-to-year than the current approach. Specialties should no longer experience the wide fluctuations in payment for a given service due to an aberrant direct cost scaling factor. Direct PEs should only change for a service if the service is further refined or when prices are updated, while indirect PEs should change only when there are changes in the mix of specialties furnishing the service or if any future new survey data for indirect costs are utilized.

We recognize that there may be some outstanding issues that need further consideration, and we welcome input from the medical community regarding those issues. We also believe the proposed transition period would give us the opportunity to work with the affected specialties to collect any needed data or to determine whether further revisions to our PE methodology are needed before payment is based entirely on the proposed methodology. As we gain experience with the new methodology, we will reexamine this policy beginning next year and propose necessary revisions through future rulemaking.

Therefore, we welcome all comments on these proposed changes, particularly those concerning additional modifications to the indirect PE methodology that might help us further our intended goals.

III. Collection of Information Requirements

This document does not impose information collection and recordkeeping requirements.

Consequently, it need not be reviewed by the Office of Management and Budget under the authority of the Paperwork Reduction Act of 1995 (44 U.S.C. 3501 *et seq.*)

IV. Response to Comments

Because of the large number of public comments we normally receive on Federal Register documents, we are not able to acknowledge or respond to them individually. We will consider all comments received by the date and time specified in the DATES section of this preamble, and, we will respond to the comments in the CY 2007 Physician Fee Schedule final rule with comment period.

V. Regulatory Impact Analysis

[If you choose to comment on issues in this section, please include the caption "REGULATORY IMPACT ANALYSIS" at the beginning of your comments.]

A. Overall Impact

We have examined the impacts of this proposed notice as required by Executive Order 12866 (September 1993, Regulatory Planning and Review), the Regulatory Flexibility Act (RFA) (September 19, 1980, Pub. L. 96–354), section 1102(b) of the Social Security Act, the Unfunded Mandates Reform Act of 1995 (Pub. L. 104–4), and Executive Order 13132.

Executive Order 12866 (as amended by Executive Order 13258, which merely reassigns responsibilities of duties) directs agencies to assess all costs and benefits of available regulatory alternatives and, if regulation is necessary, to select regulatory approaches that maximize net benefits (including potential economic, environmental, public health and safety effects, distributive impacts, and equity). A regulatory impact analysis (RIA) must be prepared for major rules with economically significant effects (\$100 million or more in any 1 year). As indicated in more detail below, we estimate that the PFS work RVU provisions included in this proposed notice will redistribute more than \$100 million in one year. We are considering this proposed notice to be economically significant because its provisions are estimated to result in an increase, decrease or aggregate redistribution of Medicare spending that will exceed \$100 million. Therefore, this proposed notice is a major rule and we have prepared a regulatory impact analysis.

The RFA requires agencies to analyze options for regulatory relief of small businesses. For purposes of the RFA, small entities include small businesses,

nonprofit organizations, and small governmental jurisdictions. Most hospitals and most other providers and suppliers are small entities, either by nonprofit status or by having revenues of \$6 million to \$29 million in any one year. We prepare a regulatory flexibility analysis unless we certify that a rule would not have a significant economic impact on a substantial number of small entities. The analysis must include a justification concerning the reason action is being taken, the kinds and number of small entities the rule affects, and an explanation of any meaningful options that achieve the objectives with less significant adverse economic impact on the small entities.

Section 1102(b) of the Act requires us to prepare a regulatory impact analysis if a rule may have a significant impact on the operations of a substantial number of small rural hospitals. This analysis must conform to the provisions of section 603 of the RFA. For purposes of section 1102(b) of the Act, we define a small rural hospital as a hospital that is located outside a Metropolitan Statistical Area and has fewer than 100 beds. For purposes of the RFA, physicians, nonphysician practitioners, and suppliers are considered small businesses if they generate revenues of \$6 million or less. Approximately 95 percent of physicians are considered to be small entities. There are over 980,000 physicians, other practitioners and medical suppliers that receive Medicare payment under the PFS. The analysis and discussion provided in this section, as well as elsewhere in this proposed notice, complies with the RFA requirements.

Section 202 of the Unfunded
Mandates Reform Act of 1995 also
requires that agencies assess anticipated
costs and benefits before issuing any
rule whose mandates require spending
in any one year of \$100 million in 1995
dollars, updated annually for inflation.
That threshold level is currently
approximately \$120 million. Medicare
beneficiaries are considered to be part of
the private sector for this purpose. A
discussion concerning the impact of this
proposed notice on beneficiaries is
found later in this section.

Executive Order 13132 establishes certain requirements that an agency must meet when it issues a proposed rule (and subsequent final rule) that imposes substantial direct requirement costs on State and local governments, preempts State law, or otherwise has Federalism implications.

We have examined this proposed notice in accordance with Executive Order 13132 and have determined that this regulation would not have any significant impact on the rights, roles, or responsibilities of State, local, or tribal governments. A discussion concerning the impact of this proposed notice on beneficiaries is found later in this section.

B. Anticipated Effects

We have prepared the following analysis, which, together with the information provided in the rest of this preamble, meets all assessment requirements. It explains the rationale for and purposes of the proposed notice; details the costs and benefits of the rule; analyzes alternatives; and presents the measures we propose to use to minimize the burden on small entities.

Section 1848(c)(2)(B)(ii) of the Act requires that increases or decreases in RVUs may not cause the amount of expenditures for the year to differ by more than \$20 million from what expenditures would have been in the absence of these changes. If this threshold is exceeded, we make adjustments to preserve budget neutrality. This year, the estimated \$4 billion impact of proposed changes in work RVUs resulting from the 5-year refinement will require that a budgetneutrality adjustment be made. Revisions in payment policies, including the establishment of interim and final RVUs for coding changes that will be announced later this year, may result in additional budget-neutrality adjustments.

We considered making the statutorily required budget-neutrality adjustment to account for the 5-Year Review of physician work by reducing all work RVUs. We estimate that all work RVUs would have to be reduced by 10 percent under this option. Alternatively, we considered making the budget neutrality adjustment to the PFS CF. This option would require an estimated 5 percent reduction in the CF and would also affect services that do not have work RVUs, and were thus not part of the 5-Year Review. Therefore, to confine the impact to services that have physician work RVUs, we are proposing to establish a budget neutrality adjustor that would reduce the work RVUs by an estimated 10 percent to meet the provisions of section 1848(c)(2)(B)(ii) of the Act.

Table 54 shows the specialty-level impact on payment of the work and PE changes discussed in this proposed notice for the CY 2007 Medicare PFS, including the effect of the separate work budget neutrality adjustor discussed above. Because we have proposed a four-year transition for the new PE changes, we also show the impact of the fully implemented PE changes in 2010.

Our estimates of changes in Medicare revenues for PFS services compare payment rates for 2006 with proposed payment rates for 2007 and 2010 using 2005 Medicare utilization for all years. These impacts do not include estimates of the annual updates to the Medicare PFS CF for 2007 through 2010. We are using 2005 Medicare claims processed and paid through March 30, 2005, that we estimate are 98 percent complete. Using a single year of utilization, as opposed to multiple years, limits the estimated changes to the proposed work and PE. This approach is consistent with the methodology outlined in section II.D.3.d. of this proposed notice, "Use of 2005 utilization data in the indirect PE RVU calculation." To the extent that there are year-to-year changes in the volume and mix of services provided by physicians, the actual impact on total Medicare revenues will be different than those shown here. The payment impacts reflect averages for each specialty based on Medicare utilization. The payment impact for an individual physician would be different from the average, based on the mix of services the physician provides. The average change in total revenues would be less than the impact displayed here because physicians furnish services to both Medicare and non-Medicare patients and specialties may receive substantial Medicare revenues for services that are not paid under the PFS. For instance, independent laboratories receive approximately 80 percent of their Medicare revenues from clinical laboratory services that are not paid under the PFS.

Table 54 shows only the payment impact on PFS services. The following is an explanation of the information represented in Table 54:

• Specialty: The physician specialty or type of practitioner/supplier.

• Allowed Charges: Allowed charges are the Medicare Fee Schedule amounts for covered services and include copayments and deductibles (which are the financial responsibility of the beneficiary). These amounts have been summed across all services provided by physicians, practitioners or suppliers with a specialty to arrive at the total allowed charges for the specialty.

• Impact of Work RVU Changes: The percentage increase or decrease in allowed charges attributed to changes in the valuation of physician/clinical work for the given specialty.

• Impact of PE RVU Changes: The percentage increase or decrease in allowed charges attributed to changes in the valuation of practice expense for the services provided by physicians,

practitioners or suppliers within each specialty (shown in the first year of phase-in (2007) and at full implementation (2010)).

• Combined impact of Work and PE RVU changes: The percentage increase

or decrease in allowed charges attributed to the sum of changes to the valuation of physician/clinical work and the valuation of practice expense for services provided by physicians, practitioners or suppliers within each specialty (shown in the first year of phase-in of PE changes (2007) and at full implementation of PE changes (2010)).

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TABLE 54: Total Allowed Charge Impact for the 5-Year Review of Work RVUs and Proposed PE RVUs

			Impact of Work RVU Changes		of PE RVU anges		Impact of PE k Changes*
	Specialty	Allowed Charges (millions)	2007	2007 (PE Trans. Year 1)	2010 (PE Full Implement.)	2007 (PE Trans. Year 1)	2010 (PE Full Implement.)
1	Total	\$74,749	0%	0%	0%	0%	0%
2	ALLERGY/IMMUNOLOGY	\$167	1%	2%	6%	3%	7%
3	ANESTHESIOLOGY	\$1,710	-6%	-1%	-4%	-7%	-10%
4	CARDIAC SURGERY	\$389	3%	0%	-2%	3%	1%
5	CARDIOLOGY	\$7,462	-0%	-1%	-4%	-1%	-4%
6	COLON AND RECTAL SURGERY	\$120	-1%	1%	4%	0%	3%
7	CRITICAL CARE	\$171	4%	0%	0%	4%	4%
8	DERMATOLOGY	\$2,145	-5%	3%	12%	-2%	7%
9	EMERGENCY MEDICINE	\$1,989	7%	0%	-2%	7%	5%
10	ENDOCRINOLOGY	\$319	6%	0%	0%	6%	6%
11	FAMILY PRACTICE	\$4,809	5%	0%	1%	5%	6%
12	GASTROENTEROLOGY	\$1,734	-1%	1%	6%	0%	5%
13	GENERAL PRACTICE	\$1,016	3%	0%	1%	3%	4%
14	GENERAL SURGERY	\$2,321	0%	0%	1%	0%	1%
15	GERIATRICS	\$132	2%	0%	-1%	2%	1%
16	HAND SURGERY	\$76	-1%	-1%	-4%	-2%	-5%
17	HEMATOLOGY/ONCOLOGY	\$1,761	3%	0%	-1%	3%	2%
18	INFECTIOUS DISEASE	\$450	8%	1%	2%	9%	10%
19	INTERNAL MEDICINE	\$9,510	5%	0%	0%	5%	5%
20	INTERVENTIONAL RADIOLOGY	\$233	-5%	-1%	-3%	-6%	-8%
21	NEPHROLOGY	\$1,585	0%	-1%	-5%	-1%	-5%
22	NEUROLOGY	\$1,331	2%	0%	0%	2%	2%
23	NEUROSURGERY	\$571	-1%	-1%	-3%	-2%	-4%
24	NUCLEAR MEDICINE	\$86	-6%	0%	-1%	-6%	-7%
25	OBSTETRICS/GYNECOLOGY	\$623	1%	0%	-1%	1%	0%
26	OPHTHALMOLOGY	\$4,786	-2%	-1%	-4%	-3%	-6%
27	ORTHOPEDIC SURGERY	\$3,265	-2%	-1%	-3%	-3%	-5%
28	OTOLARNGOLOGY	\$892	0%	0%	-1%	0%	-1%
29	PATHOLOGY	\$934	-5%	-1%	-2%	-6%	-7%
30	PEDIATRICS	\$73	2%	0%	-1%	2%	1%
31	PHYSICAL MEDICINE	\$785	2%	0%	-2%	2%	0%
32	PLASTIC SURGERY	\$279	-1%	0%	0%	-1%	-1%
33	PSYCHIATRY	\$1,128	-2%	0%	1%	-2%	-1%
34	PULMONARY DISEASE	\$1,580	5%	0%	2%	5%	7%
35	RADIATION ONCOLOGY	\$1,448	-2%	1%	4%	-1%	2%
36	RADIOLOGY	\$5,365	-5%	0%	2%	-5%	-3%
37	RHEUMATOLOGY	\$469	3%	-1%	-3%	2%	0%
38	THORACIC SURGERY	\$442	2%	0%	-1%	2%	1%
39	UROLOGY	\$1,949	1%		0%		
40	VASCULAR SURGERY	\$606	-1%	0%	2%	-1%	1%
41	AUDIOLOGIST	\$31	-1%	-1%	-3%	-2%	-4%
42	CHIROPRACTOR	\$774	-7%	-1%	-4%		
43	CLINICAL PSYCHOLOGIST	\$554	-7%	-2%	-8%	-9%	-15%
44	CLINICAL SOCIAL WORKER	\$362	-7%	-2%	-7%		
45	NURSE ANESTHETIST	\$651	-8%	0%	-2%		-10%
46	NURSE PRACTITIONER	\$710		0%	0%	0%	0%
47	OPTOMETRY	\$838	-2%	-1%	-3%		
48	ORAL/MAXILLOFACIAL SURGERY	\$37	-2%	1%	4%	-1%	2%
49	PHYSICAL/OCCUPATIONAL THERAPY	\$1,593	-6%	2%	8%	-4%	2%
50	PHYSICIANS ASSISTANT	\$537	1%		0%		
51	PODIATRY	\$1,541	-3%		6%	-1%	
52	DIAGNOSTIC TESTING FACILITY	\$1,214			-4%		
53	INDEPENDENT LABORATORY	\$665			21%		
54	PORTABLE X-RAY SUPPLIER	\$87	-1%	2%	9%	1%	8%

^{*}Components may not sum to total due to rounding.

physician work RVUs occurred as part of the 2001 regulatory process and was

effective for services furnished on or after January 1, 2002. Table 55 compares

some basic data points from the three 5-Year Reviews.

TABLE 55:

		1st Five-Year Review Effective January 1, 1997	2nd Five-Year Review Effective January 1, 2002	Proposed 3rd Five-Year Review Effective January 1, 2007
Approximate Number of Services Reviewe		1000 services	870 services	565 services
Range of Impacts	High	+15.0 %	+5.0 %	+8.0 %
nange of impacts	Low	-6.0 %	0.0%	-8.0 %
Estimate of Total Dollar Impact		1.65 billion	1.95 billion	Approximately 4 billion

Note: The magnitude of the proposed 3^{rd} 5-Year Review is directly related to both the mix of services under review and the increase in PFS spending between the 1^{st} 5-Year Review and the proposed 3^{rd} 5-Year Review.

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We are currently developing the CY 2007 PFS proposed rule that will contain our estimate of all other proposed policies and changes that will affect payment for PFS services in CY 2007. We will show the combined impact of all policy and other changes affecting PFS payments in the final CY 2007 PFS rule.

C. Alternatives Considered

This proposed notice discusses the proposed revisions to the work RVUs under the PFS. The preamble provides descriptions of the statutory provisions that are addressed, identifies those areas when discretion has been exercised, presents rationale for our decisions and, where relevant, alternatives that were considered.

D. Impact on Beneficiaries

Overall, we believe these changes would improve beneficiary access to reasonable and necessary services since services would now be more appropriately valued. The payment changes would also affect beneficiary liability. Any changes in aggregate beneficiary liability from a particular work RVU change will be a function of the coinsurance (20 percent if applicable for the particular service after the beneficiary has met the deductible) and the effect of the aggregate impact of the work RVU changes on the calculation of the Medicare Part B premium rate (generally, 25 percent of the aggregate payment change).

E. Accounting Statement

As required by OMB Circular A–4 (available at http://www.whitehouse.gov/omb/circulars/a004/a-4.pdf), in Table 56, we have prepared an accounting statement showing the classification of the expenditures associated with the provisions of this proposed notice.

Expenditures are classified as transfers between Medicare providers/suppliers (that is physicians, other practitioners medical suppliers, and providers that receive payment under or based on the PFS) and the Federal government. The —\$40 million shown in Table 56 represents the net impact of an increase in FY 2007 payments for mammography and a decrease in FY 2007 payments for physical therapy.

TABLE 56.—ACCOUNTING STATEMENT—CLASSIFICATION OF ESTIMATED EXPENDITURES, FROM FY 2006 TO FY 2007 (IN MILLIONS)

Category	Transfers
Annualized Monetized Transfers From Whom To Whom?	 -\$40 Providers of physical therapy and mammography services that are paid based on Medicare Physician Fee Schedule to the Federal government.

In accordance with the provisions of Executive Order 12866, this proposed notice was reviewed by the Office of Management and Budget.

(Catalog of Federal Domestic Assistance Program No. 93.773, Medicare—Hospital Insurance; and Program No. 93.774, Medicare—Supplementary Medical Insurance Program) Dated: May 4, 2006.

Mark B. McClellan,

Administrator, Centers for Medicare & Medicaid Services.

Approved: June 9, 2006.

Michael O. Leavitt,

Secretary.

Note: These addenda will not appear in the Code of Federal Regulations.

Addendum A: Explanation and Use of Addenda B

The addenda on the following pages provide various data pertaining to the Medicare fee schedule for physicians' services furnished in 2007. Addendum B contains the RVUs for work, non-facility PE, facility PE, and malpractice expense, and other information for all services included in the PFS.

In previous years, we have listed many services in Addendum B that are not paid under the PFS. To avoid publishing as many pages of codes for these services, we are not including clinical laboratory codes and most alphanumeric codes (Healthcare Common Procedure Coding System (HCPCS) codes not included in CPT) in Addendum B.

Addendum B—2007 Relative Value Units and Related Information Used in Determining Medicare Payments for 2007

This addendum contains the following information for each CPT code and alphanumeric HCPCS code, except for: alphanumeric codes beginning with B (enteral and parenteral therapy), E (durable medical equipment), K (temporary codes for nonphysicians' services or items), or L (orthotics); and codes for anesthesiology. The Addendum B included in this proposed notice does not include codes which are carrier priced since the RVUs for these services are set at 0.00.

Please also note the following:

- An "NA" in the "Non-facility PE RVUs" column of Addendum B means that CMS has not developed a PE RVU in the non-facility setting for the service because it is typically performed in the hospital (for example, an open heart surgery is generally performed in the hospital setting and not a physician's office).
- Services that have an "NA" in the "Facility PE RVUs" column of Addendum B are typically not paid using the PFS when provided in a facility setting. These services (which include "incident to" services and the technical portion of diagnostic tests) are generally paid under either the outpatient hospital prospective payment system or bundled into the hospital inpatient prospective payment system payment.

1. CPT/HCPCS code. This is the CPT or alphanumeric HCPCS number for the service. Alphanumeric HCPCS codes are included at the end of this addendum.

2. Modifier. A modifier is shown if there is a technical component (modifier TC) and a professional component (PC) (modifier -26) for the service. If there is a PC and a TC for the service, Addendum B contains three entries for the code. A code for: the global values (both professional and technical); modifier -26 (PC); and, modifier TC. The global service is not designated by a modifier, and physicians must bill using the code without a modifier if the physician furnishes both the PC and the TC of the service.

Modifier-53 is shown for a discontinued procedure. There will be RVUs for the code (CPT code 45378) with this modifier.

3. Status indicator. This indicator shows whether the CPT/HCPCS code is in the PFS and whether it is separately payable if the service is covered.

A = Active code. These codes are separately payable under the PFS if covered. There will be RVUs for codes with this status. The presence of an "A" indicator does not mean that Medicare has made a national coverage determination regarding the service. Carriers remain responsible for coverage decisions in the absence of a national Medicare policy.

B = *Bundled code*. Payments for covered services are always bundled into payment for

other services not specified. If RVUs are shown, they are not used for Medicare payment. If these services are covered, payment for them is subsumed by the payment for the services to which they are incident (an example is a telephone call from a hospital nurse regarding care of a patient).

C = Carrier-priced code. Carriers will establish RVUs and payment amounts for these services, generally on an individual case basis following review of documentation, such as an operative report.

D = *Deleted/discontinued code*. These codes are deleted effective with the beginning of the CY and are always subject to a 90-day grace period.

E = Excluded from the PFS by regulation. These codes are for items and services that CMS excludes from payment under the PFS by regulation. No RVUs are shown, and no payment may be made under the PFS for these codes. Payment for them, when covered, continues under reasonable charge procedures.

F = Deleted/discontinued codes. (Code not subject to a 90-day grace period.) These codes are deleted effective with the beginning of the CY and are never subject to a grace period. This indicator is no longer effective as of January 1, 2006.

G = Code not valid for Medicare purposes. Medicare does not recognize codes assigned this status. Medicare uses another code for reporting of, and payment for, these services. (Codes subject to a 90-day grace period.) This indicator is no longer effective with the 2006 PFS as of January 1, 2006.

H = *Deleted modifier*. For 2000 and later years, either the TC or PC component shown for the code has been deleted or the deleted component is shown in the database with the H status indicator.

I = *Not valid for Medicare purposes.*Medicare uses another code for the reporting of, and the payment for these services. (Codes not subject to a 90-day grace period.)

N = *Noncovered service*. These codes are noncovered services. Medicare payment may not be made for these codes. If RVUs are shown, they are not used for Medicare payment.

P = Bundled or excluded code. There are no RVUs for these services. No separate payment is made for them under the PFS.

- —If the item or service is covered as incident to a physician's service and is furnished on the same day as a physician's service, payment for it is bundled into the payment for the physician's service to which it is incident (an example is an elastic bandage furnished by a physician incident to a physician's service).
- —If the item or service is covered as other than incident to a physician's service, it is excluded from the PFS (for example, colostomy supplies) and is paid under the other payment provisions of the Act.

 $R = Restricted\ coverage$. Special coverage instructions apply. If the service is covered and no RVUs are shown, it is carrier-priced.

T = There are RVUs for these services, but they are only paid if there are no other services payable under the PFS billed on the same date by the same provider. If any other services payable under the PFS are billed on the same date by the same provider, these services are bundled into the service(s) for which payment is made.

X = Exclusion by law. These codes represent an item or service that is not within the definition of "physicians' services" for PFS payment purposes. No RVUs are shown for these codes, and no payment may be made under the PFS. (Examples are ambulance services and clinical diagnostic laboratory services.)

4. Description of code. This is an abbreviated version of the narrative description of the code.

- 5. Physician work RVUs. These are the RVUs for the physician work for this service in 2007. The RVUs for codes with a 10- or 90-day global period reflect the application of the RUG-recommended values for the E/M services that are included as part of the global period for the service. Codes that are not used for Medicare payment are identified with a "+." Note: The separate budget neutrality adjustor is not reflected in these physician work RVUs.
- 6. Fully implemented non-facility practice expense RVUs. These are the fully implemented resource-based PE RVUs for non-facility settings.
- 7. Transitional Non-facility practice expense RVUs. These are the 2007 resource-based PE RVUs for non-facility settings.
- 8. Fully implemented facility practice expense RVUs. These are the fully implemented resource-based PE RVUs for facility settings.
- 9. Transitional facility practice expense RVUs. These are the 2007 resource-based PE RVUs for facility settings.
- 10. Malpractice expense RVUs. These are the RVUs for the malpractice expense for the service for 2006.
- 11. Non-facility total. This is the sum of the work, fully implemented non-facility PE, and malpractice expense RVUs.
- 12. Transitional non-facility total. This is the sum of the work, 2007 transitional nonfacility PE, and malpractice expense RVUs.
- 13. Facility total. This is the sum of the work, fully implemented facility PE, and malpractice expense RVUs.
- 14. *Transitional facility total.* This is the sum of the work, 2007 transitional facility PE, and malpractice expense RVUs.
- 15. Global period. This indicator shows the number of days in the global period for the code (0, 10, or 90 days). An explanation of the alpha codes follows:

MMM = Code describes a service furnished in uncomplicated maternity cases including antepartum care, delivery, and postpartum care. The usual global surgical concept does not apply. See the 1999 Physicians' CPT for specific definitions.

XXX = The global concept does not apply. YYY = The global period is to be set by the carrier (for example, unlisted surgery codes).

ZZZ = Code related to another service that is always included in the global period of the other service. (Note: Physician work and PE are associated with intra service time and in some instances the post service time.)

ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007

	Ĭ	FINDOIN	ADDENDOM D.——RELATIVE VALUE ONITS (NVO)	יו שאוא (י		VOS) AND DELATED INFORMATION OSED IN DETERMINING IMEDICARE	OSED NO]]]		ין זייין		5	7007	
CPT 1 HCPCS 2	Mod	Status	Description	Physician work RVUs ³	Fully implemented nonfacility PE	Year 2007 transi- tronal non-facil- ity PE RVUs	Fully implemented facility	Year 2007 transi- tional fa- cility PE RVUs	Mal-prac- tice RVUs	Fully implemented non-facility total	Year 2007 transi- tional non-facil- ity total	Fully implemented facility	Year 2007 transi- tional fa- cility total	Global
0073T		44	Radiation tx delivery, imrt	0.00	13.15	16.84	0.35	NA 0.49	0.13	13.28	16.97	1.72	AN 1.86	××3
10040		∢ ∢	Fna w/image Acne surgerv	1.27	12.2	1.08	0.40	0.42	0.08	3.56	3.82	2.18	2.06	XX 010
10060		Α.	Drainage of skin abscess	1.17	1.49	1.28	1.07	0.97	0.12	2.78	2.57	2.36	2.26	010
10061		< <	Drainage of skin abscess	2.40	2.05	1.89	1.49	1.50	0.26	4.71	4.55	4.15	4.16	010
10081		∢ ∢	Drainage of pilonidal cyst	2.45	3.46	3.93	1.42	1.48	0.11	6.15	4.27 6.62	8.3 11.4	4.17	010
10120		Α.	Remove foreign body	1.22	2.09	2.16	0.93	96.0	0.12	3.43	3.50	2.27	2.30	010
10121		∢ ∢	Remove foreign body	2.69	3.49	3.51	1.62	1.75	0.33	3.97	6.53	4.64	3.01	010
10160		< <	Puncture drainage of lesion	1.20	1.85	1.66	1.07	1.08	0.14	3.19	3.00	2.41	2.42	010
10180		∢ <	Complex drainage, wound	2.25	3.28	3.06	1.81	1.95	0.35	5.88	5.66	4.41	4.55	010
11001		< <	Debride infected skin add-on	0.30	0.23	0.02	0.08	0.10	0.0	0.57	0.57	0.42	0.88	ZZZ
11004		∢ ·	Debride genitalia & perineum	10.31	¥ :	Y :	3.00	3.68	0.67	¥ :	A :	13.98	14.66	000
11005			Debride abdom wall	13.75	¥ ž	Y S	3.98	5.18	0.96	¥ ž	¥ ž	18.69	19.89	000
11008		τ ∢	Debitue genit/per/abdon wall	5.00	₹ ₹ Z Z	Z Z	1.33	1.86	0.61	Z Z	Z Z	6.94	7.47	222
11010		۷.	Debride skin, fx	4.19	6.71	6.85	2.29	2.55	0.66	11.56	11.70	7.14	7.40	010
11011		∢ ⊲	Debride skin/muscle, tx	4.94 8.7	7.04	7.90	2.0.5 2.0.5	2.27	1 16	12.72	13.58	11.08	11.95	000
11040		< <	Debride skin, partial	0.50	0.68	0.56	0.16	0.20	90:0	1.24	1.12	0.72	0.76	000
11041		∢ <	Debride skin, full	0.82	0.77	0.69	0.24	0.31	0.10	1.69	1.61	1.16	1.23	000
11043		(∢	Debride tissue/muscle	3.00	3.61	3.45	2.68	2.62	0.32	6.93	6.77	00.9	5.94	010
		ζ «	Debride tissue/muscle/bone	4.05	4.91	4.57	3.64	3.73	0.43	9.39	9.05	8.12	8.21	010
11055		œ o	Trim skin lesion	0.43	0.81	0.62	0.1	0.16	0.05	1.29	1.10	0.59	0.64	000
11057		<u> </u>	Trim skin lesions, over 4	0.79	66.0	0.80	0.20	0.28	0.0	88.	1.69	1.09	1.17	800
		4	Biopsy, skin lesion	0.81	1.86	1.40	0.38	0.37	0.03	2.70	2.24	1.22	1.21	000
11101		∢ <	Biopsy, skin add-on	0.41	0.40	0.35	0.19	0.19	0.02	0.83	0.78	0.62	0.62	777
11201		< <	Remove skin tags add-on	0.29	0.16	0.16	0.11	0.79	0.02	0.47	0.47	0.42	0.43	ZZZ
11300		∢ <	Shave skin lesion	0.51	1.18	1.04	0.20	0.21	0.03	1.72	1.58	0.74	0.75	000
11302		∢ ∢	Shave skin lesion	1.05	1.75	1.41	0.47	0.38	0.09	2.85	2.03	1.57	1.56	000
11303		∢.		1.24	1.99	1.68	0.53	0.52	0.07	3.30	2.99	1.84	1.83	000
11305		∢ ⊲	Shave skin lesion	0.67	1.05	0.90	0.20	0.25	0.07	1.79	1.64	0.94	0.99	000
11307		(∢	Shave skin lesion	1.1	1.68	1.39	0.46	0.48	0.07	2.89	2.60	1.67	69.1	888
		∢.	Shave skin lesion	1.41	1.72	1.52	0.50	0.57	0.13	3.26	3.06	2.04	2.11	000
11310		∢ <	Shave skin lesion	0.73	1.37	1.18	0.31	0.32	0.04	2.14	1.95	1.08	1.09	000
11312		۷ ح	Shave skin lesion	1.20	1.89		0.55	0.55	0.00	3.15	2.80		. t. 8: 18:	000
•		۷.	Shave skin lesion	1.62	2.15	1.90	0.71	0.72	0.10	3.87	3.62	2.43	2.44	000
11400		∢ ⊲	Exc tr-ext b9+marg 0.5 < cm	- 0.85 23	1.86	7.6.0	0.92	0.89	0.06	2.7.7	2.88	1.83	1.80	010
11402		< ∢	Exc tr-ext b9+marg 1.1–2 cm	1.40	2.35	2.26	1.4	-	0.13	3.88	3.79	2.71	2.64	010
11403		∢ •	Exc tr-ext b9+marg 2.1-3 cm	1.79	2.52	2.43	1.54	1.38	0.17	4.48	4.39	3.50	3.34	010
11404			Exc tr-ext b9+marg 3.1-4 cm	2.06	2.83	2.74	1.61	1.45	0.21	5.10	5.01	3.88	3.72	010
		+		5	5	5	2	1	10.5		1	5	2	2

¹CPT codes and descriptors only are copyright 2005 American Medical Association. All rights reserved. Applicable FARS/DFARS apply. ² Copyright 2005 American Dental Association. All rights reserved. ³ Indicates RVUs are not used for Medicare payment.

ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

ADE	LINDOIN	שטטושסטא. באוואם שיוואם איוואם אי	LATIVE VALUE ONITS (NYOS) AND DELATED INTORNATION OSED IN DETERMINING MEDICARE LATMENTS FOR	שואופר		101 C),!!!!!!!!!!	בְּכְיִלְיִיתְיִיתְּ	ייאור ר		/007	CONTINOED	ב
CPT 1 HCPCS ²	Mod	Status	Description	Physician work RVUs ³	Fully im- plement- ed non- facility PE RVUs	Year 2007 transi- tronal non-facil- ity PE RVUs	Fully implemented facility	Year 2007 transi- tional fa- cility PE RVUs	Mal-prac- tice RVUs	Fully implemented non-facility total	Year 2007 transi- tional non-facil- ity total	Fully implemented facility	Year 2007 transi- tional fa- cility total	Global
11420		∢ <	Exc h-f-nk-sp b9+marg 0.5 <	0.98	1.81	1.78	0.92	0.93	0.09	2.88	2.85	1.99	2.00	010
11422			Exc II-I-IIK-sp b9+IIIalg 0.8-1 Exc II-I-IK-sp b9+marg 1.1-2	1.63	2.38	2.29	1.49	1.37	0.16	2.12	4.08	3.28	3.16	010
			Exc h-f-nk-sp b9+marg 2.1-3	2.01	2.62	2.60	1.62	1.49	0.20	4.83	4.81	3.83	3.70	010
11424			Exc h-f-nk-sp b9+marg 3.1–4	2.43	2.93	2.84	1.74	1.64	0.25	5.61	5.52	4.42	4.32	010
11440			Exc face-mm b9+marg 0.5 < cm	1.08	1.98	2.15	1.29	1.31	0.08	3.06	3.23	2.37	2.39	010
			Exc face-mm b9+marg 0.6-1 cm	1.48	2.34	2.34	1.52	1.50	0.13	3.95	3.95	3.13	3.11	010
11442		∢ <	Exc face-mm b9+marg 1.1–2 cm	1.72	2.58	2.56	1.61	1.58	0.16	4.46	4.44	3.49	3.46	010
11443			Exc race-mm b9+marg 2.1-3 cm Exc face-mm b9+marg 3.1-4 cm	3.23	8.9 6.	3.41	9/ 0/	1.81	0.22	5.32	0.40	5.47	4.32 25.5	010
			Exc face-mm b9+marg > 4 cm	4.73	3.86	4.00	2.47	2.70	0.43	9.05	9.16	7.63	7.86	010
11450		∢ ⊲	Removal, sweat gland lesion	3.10	5.15	5.07	2.41	2.13	0.34	8.59	11.34	5.85	5.57	060
11462		_		2.88	5.31	5.17	2.45	2.13	0.32	8.51	8.37	5.65	5.33	060
		Α.	Removal, sweat gland lesion	4.31	6.58	6.78	2.94	2.75	0.54	11.43	11.63	7.79	7.60	060
11470		_	Removal, sweat gland lesion	3.62	5.57	5.20	2.67	2.37	0.40	9.59	9.22	69.9	6.39	060
11471			Removal, sweat gland lesion	4.77	6.42	6.65	2.95	2.82	0.58	11.77	12:00	8.30	8.17	090
11601			Exc tr-ext mlg+marg 0.5 < cm	00.0	3.27	2.65	1.0	1.25	0.0	5.39	4.97	3.47	3.37	010
			Exc tr-ext mlg+marg 1.1–2 cm	2.20	3.65	3.04	1.52	1.33	0.12	5.97	5.36	3.84	3.65	010
11603		4	Exc tr-ext mlg+marg 2.1-3 cm	2.75	3.85	3.27	1.69	1.42	0.16	9.76	6.18	4.60	4.33	010
11604		⋖ •	Exc tr-ext mlg+marg 3.1–4 cm	3.10	4.15	3.57	1.76	1.48	0.20	7.45	6.87	5.06	4.78	010
11620			Exc tr-ext mig+marg > 4 cm Exc h-f-nk-sn min+marg 0.5 <	4.95	97.5	78.4	1 05	/8.L 0.98	0.30	10.59	9.68	7.58	7.18 2.64	010
		_	Exc h-f-nk-sp mlg+marg 0.6-1	2.01	3.32	2.86	1.38	1.28	0.12	5.45	4.99	3.51	3.41	010
11622			Exc h-f-nk-sp mlg+marg 1.1-2	2.34	3.70	3.15	1.57	4.	0.14	6.18	5.63	4.05	3.92	010
11623		⋖ <	Exc h-f-nk-sp mlg+marg 2.1–3	3.04	3.92	3.49	1.78		0.20	7.16	6.73	5.02	4.87	010
11626			Exc h-f-nk-sp mig+narg 3.1-4Exc h-f-nk-sp mla+mar > 4 cm	4.54 4.54	4.88	4.70	2.26	2.37	0.45	9.87	69.6	7.25	7.36	010
		_	Exc face-mm malig+marg 0.5 <	1.60	2.89	2.72	1.14	1.12	0.11	4.60	4.43	2.85	2.83	010
11641			Exc face-mm malig+marg 0.6-1	2.10	3.44	3.13	44.	1.51	0.16	5.70	5.39	3.70	3.77	010
11643		< <	Exc face-mm malig+marg 2.1-3	3.35	4.06	3.87	1.92	1.96	0.26	7.67	7.48	5.53	5.57	010
11644			Exc face-mm malig+marg 3.1-4	4.27	4.82	4.72	2.25	2.41	0.37	9.46	9.36	6.89	7.05	010
11646			Exc face-mm mlg+marg > 4 cm	6.19	5.73	5.76	3.01	3.36	0.61	12.53	12.56	9.81	10.16	010
11720			Debride nail. 1–5	0.32	0.30	0.20	90.0	0.00	0.02	0.83	0.73	0.65 5.44	0.47	000
		A	Debride nail, 6 or more	0.54	0.54	0.47	0.14	0.19	0.07	1.15	1.08	0.75	08.0	000
11730		_	Removal of nail plate	1.13	1.34	1.1	0.29	0.40	0.14	2.61	2.38	1.56	1.67	000
11/32			Remove nail plate, add-on	0.57	0.54	0.47	0.14	0.20	0.0	1.18	1.1	0.78	0.84	777
11750			Removal of nail bed	2.36	2.94	2.36	1.86	1.79	0.22	5.52	4.94	4.44	4.37	010
		Α.	Remove nail bed/finger tip	3.42	4.07	3.27	2.77	2.94	0.35	7.84	7.04	6.54	6.71	010
11755			Biopsy, nail unit	1.37	2.01	1.68	0.75	1 70	0.14	3.46	3.13	2.20	2.22	000
11762			Reconstruction of nail bed	2.89	3.67	3.09	1.66	2.18	0.36	6.92	6.34	4.91	5.43	010
11765			Excision of nail fold, toe	0.69	2.67	2.01	1.00	0.82	0.08	3.44	2.78	1.77	1.59	010
11770			Removal of pilonidal lesion	2.61 9.1	3.47	3.49	1.52	1.51	0.33	13.32	6.43	4.46	4.45	010
11772			Removal of pilonidal lesion	7.15	8.00	7.64	5.51	5.19	0.89	16.04	15.68	13.55	13.23	060
11900			Injection into skin lesions	0.52	0.90	0.71	0.24	0.22	0.05	1.44	1.25	0.78	0.76	000
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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

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CPT 1 HCPCS 2	Mod	Status	Description	Physician work RVUs ³	Fully implemented nonfacility PE	Year 2007 transi- tional non-facil- ity PE RVUs	Fully implemented facility	Year 2007 transi- tional fa- cility PE RVUs	Mal-prac- tice RVUs	Fully implemented nonfacility total	Year 2007 transi- tional non-facil- ity total	Fully implemented facility	Year 2007 transi- tional fa- cility total	Global
11901		∢ Œ	Added skin lesions injection	0.80	1.00	0.75	0.38	0.36	0.03	1.83	1.58	1.21	1.19	000
11921			Correct skin color defects	1.93	2.63	3.64	1.24	1.26	0.29	4.85	5.86	3.46	3.48	000
11922		œ c	Correct skin color defects	0.49	0.92	1.09	0.22	0.24	0.07	1.48	1.65	0.78	0.80	ZZZ
11951			Therapy for contour defects	1.19	1.17	1.41	0.52	0.51	0.00	2.47	2.71	2. 1.	8. 18.	800
11952		· œ	Therapy for contour defects	1.69	1.69	1.82	0.79	0.71	0.16	3.54	3.67	2.64	2.56	000
11954		œ •	Therapy for contour defects	1.85	1.78	2.28	0.77	0.87	0.25	3.88	4.38	2.87	2.97	000
11960			Insert tissue expander(s)	7.80	Y Y	¥ ¥	10.40	10.42	1.31	Z Z	K K	14.79	14.95	060
11971			Remove tissue expander(s)	3.13	7.33	8.69	3.95	3.84	0.32	10.78	12.14	7.40	7.29	060
11975			Insert contraceptive cap	1.48	1.53	1.45	0.33	0.51	0.17	3.18	3.10	1.98	2.16	×
11977			Removal of contraceptive cap	3.30	1.96	2.20	0.45	1.13	0.37	5.63	5.87	44.4	4.80	3 X
11980			Implant hormone pellet(s)	1.48	1.17	1.10	0.55	0.54	0.13	2.78	2.71	2.16	2.15	000
11981		⋖ <	Insert drug implant device	1.48	1.96	1.77	0.61	0.66	0.12	3.56	3.37	2.21	2.26	× }
11982		۷ ۵	Remove drug Implant device	3.78	2.09	1.99	1.38	1 45) I O	4.04	9.0.0 4.0.0	2.68	2.76	××
12001			Repair superficial wound(s)	1.70	1.71	1.92	0.71	0.76	0.15	3.56	3.77	2.56	2.61	010
12002				1.86	1.77	1.98	0.82	0.88	0.17	3.80	4.01	2.85	2.91	010
12004				2.24	2.05	2.26	0.90	0.98	0.21	4.50	4.71	3.35	3.43	010
12005			Repair supericial wound(s)	3.80	3.00	3.30	1.03	1.10	0.27	2.03	2.88	2.7.	5.46	010
12007			Repair superficial wound(s)	4.11	3.37	3.72	1.46	1.73	0.45	7.93	8.28	6.02	6.29	010
12011		Α,		1.76	1.88	2.08	0.74	0.77	0.16	3.80	4.00	2.66	2.69	010
12013			Repair superficial wound(s)	1.99	2.03	2.22	0.87	0.92	0.18	4.20 4.94	4.39 1.9	3.04	3.09	010
12015			Repair superficial wound(s)	3.19	2.73	3.04	1.09	1.21	0.29	6.21	6.52	4.57	4.69	010
12016				3.92	3.12	3.45	1.26	1.46	0.37	7.41	7.74	5.55	5.75	010
12017			Repair superficial wound(s)	4.70 5.70	₹ ₹ Z Z	4 4 2 2	24.1 24.1	0.79 21.80	0.47	₹ 4 Z Z	¥ 4	0.62 10.40	0.90 2.90	010
12020			Closure of split wound	2.62	3.73	3.81	1.76	1.89	0:30	6.65	6.73	4.68	4.81	010
12021			Closure of split wound	1.84	1.84	1.83	1.32	1.39	0.24	3.92	3.91	3.40	3.47	010
12031			Layer closure of wound(s)	2.15	3.84	2.68	1.74	91.1	0.17	6.16	0.00	4 4 90.4 86	3.48 54.54	010
12034			Layer closure of wound(s)	2.92	4.52	3.53	1.94	1.57	0.25	7.69	6.70	5.11	4.74	010
12035			Layer closure of wound(s)	3.42	5.23	5.22	2.07	2.14	0.39	9.04	9.03	5.88	5.95	010
12037			Layer closure of wound(s)	4.66	5.90	6.06	2.57	2.87	0.66	11.22	11.38	7.89	8.19	010
12041			closure of wound(s)	2.37	3.78	2.86	1.72	1.28	0.19	6.34	5.42	4.28	3.84	010
12042			closure of	2.74	4.40	3.55	2.06	1.61	0.17	7.31	6.46	4.97	4.52	010
12045			Layer closure of wound(s)	3.63	5.04	5.22	2.04	2.23	0.41	0.00	9.26	9.73 6.08	9.00	010
			closure of wound(s)	4.24	5.60	6.29	2.24	2.63	0.54	10.38	11.07	7.02	7.41	010
12047			Layer closure of wound(s)	4.64	6.11	6.30	2.47	2.94	0.58	11.33	11.52	7.69	8.16	010
12057			Layer closure of wound(s)	2.47	4.03	3.51	%:- %:- %:- %:-	S. 5.	0.20	0.70	6.45	4. c	52.4 53.4	010
12053			Layer closure of wound(s)	3.12	5.26	3.75	2.06	1.66	0.23	8.61	7.10	5.41	5.01	010
12054			Layer closure of wound(s)	3.45	5.31	4.01	2.00	1.72	0.30	9.06	7.76	5.75	5.47	010
12056			Layer closure of wound(s)	4. r.	0.30	6.62	2.00	2 6	0.45	11.97	12.44	8.33	8.39 8.70	010
12057			Layer closure of wound(s)	5.95	7.34	6.45	2.74	3.51	0.56	13.85	12.96	9.25	10.02	010
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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

ADD	ADDENDOM B	<u>بر</u> ا	RELATIVE VALUE UNITS (RVUS) AND P	AND KELALED INFORMATION USED IN DELEKMINING MEDICAKE PAYMENTS FOR	INTORMA A	ION CVE			MEDICA	HE LAYINI	בלי טואם	_/ _/\n\n_/	ZOU/—CONTINUED	<u>:</u>
CPT 1 HCPCS 2	Mod	Status	Description	Physician work RVUs ³	Fully implemented non-facility PE	Year 2007 transi- tional non-facil- ity PE RVUs	Fully implemented facility	Year 2007 transi- tional fa- cility PE RVUs	Mal-prac- tice RVUs	Fully implemented nonfacility	Year 2007 transi- tional non-facil- ity total	Fully implemented facility	Year 2007 transi- tional fa- cility total	Global
13100		∢ <	Repair of wound or lesion	3.12	4.34	4.13	2.40	2.33	0.26	7.72	7.51	5.78	5.71	010
13102		(∢	Repair wound/lesion add-on	1.24	1.33	1.21	0.52	0.56	0.13	2.70	2.58	1.89	1.93	ZZZ
13120		∢ •	Repair of wound or lesion	3.30	4.48	4.23	2.51	2.39	0.26	8.04	7.79	6.07	5.95	010
13121			Repair of wound or lesion	4.32	6.13	5.18	3.10	2.88	0.25	10.70	9.75	7.67	7.45	010 777
13131			Repair of wound or lesion	3.78	4.90	4.50	2.80	2.72	0.26	8.94	8.54	6.84	6.76	010
13132			Repair of wound or lesion	6.44	7.73	6.37	4.83	4.34	0.32	14.49	13.13	11.59	11.10	010
13150			Repair wound/lesion add-on	3.80	4.60	1.70	2.63	2.74	0.34	8.74	8.95	6.77	6.88 88.0	222 010
			Repair of wound or lesion	4.44	5.39	4.96	3.13	3.15	0.31	10.14	9.71	7.88	7.90	010
13152			Repair of wound or lesion	6.32	7.38	6.38	3.80	3.99	0.40	14.10	13.10	10.52	10.71	010
13160			Repair wound/lesion add-on	11.76	0 K	5 Z	76.0 86.9	7.13	1.54	80.4 NA	, v. 4 V. 4 V. 4	20.28	20.43	777
			Skin tissue rearrangement	6.75	8.78	8.10	5.91	5.29	0.59	16.12	15.44	13.25	12.93	060
14001			Skin tissue rearrangement	9.52	10.90	9.81	7.40	7.17	0.82	21.24	20.15	17.74	17.51	060
14020			Skin tissue rearrangement	7.58	9.80	8.92	6.70	6.59	0.64	18.02	17.14	14.92	14.81	060
14040			Skin tissue rearrangement	8.36	10.23	9.18	7.06	7.18	0.62	19.21	18.16	16.04	16.16	060
			Skin tissue rearrangement	12.59	13.27	11.28	9.10	8.80	0.73	26.59	24.60	22.42	22.12	060
14060			Skin tissue rearrangement	8.99	9.94	60.6	7.47	7.46	0.68	19.61	18.76	17.14	17.13	060
•			Skin tissue rearrangement	13.5/	14.52	12.35	9.92	9.00 50.00	1.0	28.85	26.68	24.25	23.90	060
14350			Skin tissue rearrangement	10.72	S Z Z	- AN	6.78	70.7	- - -	S. Y	NA N	18.84	19.13	060
		<	Wound prep, 1st 100 sq cm	3.99	4.19	3.90	1.70	2.07	0.54	8.72	8.43	6.23	09.9	000
15001		⋖ <	Wound prep, addl 100 sq cm	0.0	0.55	1.15	0.34	0.39	0.14	1.69	2.29	1.48	1.53	ZZZ
15050			Skin pinch graft	00.7	3.07 7.58 7.58	25.4	1.01	2. 5.	0.24	13 44	12.95	10.83	10.94	000
			Skin splt grft, trnk/arm/leg	99.6	10.25	12.03	7.16	79.7	1.28	21.19	22.97	18.10	18.61	060
15101			Skin splt grft t/a/l, add-on	1.72	2.48	3.43	0.85	1.09	0.24	4.44	5.39	2.81	3.05	222
15110			Epidrm autogrtt trnk/arm/legEpidrm autogrtt t/a/l add-on	10.82	8.81	10.23	6.40	6.87	1.31	20.94	330	18.53	19.00	090
15115			Epidrm a-grtf face/nck/hf/g	11.13	9.05	9.20	6.58	7.17	1.15	21.33	21.48	18.86	19.45	060
15116			Epidrm a-grft f/n/hf/g addl	2.50	1.20	1.49	0.86	1.06	0.33	4.03	4.32	3.69	3.89	ZZZ
			Skn splt a-grtt fac/nck/ht/g	10.88	11.06	10.83	7.22	7.66	1.16	23.10	22.87	19.26	19.70	090
15130			Derm autograft, trnk/arm/leg	7.33	7.94	9.40	5.56	6.16	0.92	16.24	17.70	13.86	14.46	960
15131		⋖	Derm autograft t/a/l add-on	1.50	0.68	0.97	0.51	0.61	0.21	2.39	2.68	2.22	2.32	ZZZ
		∢ ⊲	Derm autograft face/nck/hf/g	10.83	9.30	9.75	6.89	7.84	1.23	21.36	21.81	18.95	19.90	090
15150		(∢	Cult epiderm grft t/arm/leg	9.24	7.12	8.14	5.83	6.30	1.14	17.50	18.52	16.21	16.68	060
15151		∢.	Cult epiderm grft t/a/l addi	2.00	0.88	1.20	0.68	0.81	0.28	3.16	3.48	2.96	3.09	ZZZ
		∢ <	Cult epiderm graft t/a/1+%	2.50	1.05	1.43	0.85	1.01	0.35	3.90	4.28	3.70	3.86	ZZZ
15156		(∢	Cult epidrm arft f/n/hfa add	2.75	1.16	1.46	0.95	1.17	0.36	4.27	4.57	4.06	4.28	ZZZ
		⋖	Cult epiderm grft f/n/hfg +%	3.00	1.34	1.67	1.04	1.27	0.39	4.73	2.06	4.43	4.66	ZZZ
15170		∢ <	Acell graft trunk/arms/legs	5.99	3.60	3.78	2.31	2.36	0.55	10.14	10.32	8.85	8.90	090
15175		(∢	Acellular graft, f/n/hf/a	2.99	5.12	5.37	3.68	3.93	0.82	13.98	14.18	12.49	12.74	060
15176		⋖	Acell graft, f/n/hf/g add-on	2.45	1.05	1.10	0.79	0.94	0.29	3.79	3.84	3.53	3.68	ZZZ
15200		∢ ∢	Skin full graft, trunk	8.89	9.76	9.51	6.22	6.22	0.98	19.63	19.38	16.09	16.09	090
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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

		.												
CPT ¹ HCPCS ²	Mod	Status	Description	Physician work RVUs ³	Fully implemented non-facility PE	Year 2007 transi- tional non-facil- ity PE RVUs	Fully implemented facility	Year 2007 transi- tional fa- cility PE RVUs	Mal-prac- tice RVUs	Fully im- plement- ed non- facility total	Year 2007 transi- tional non-facil- ity total	Fully im- plement- ed facility total	Year 2007 transi- tional fa- cility total	Global
15220		∢ ∢	Skin full graft sclp/arm/legSkin full graft add-on	7.86	10.19	9.46	6.48	6.65	0.84	18.89	18.16	15.18	15.35	060 ZZZ
		۷.	Skin full grit face/genit/hf	10.03	11.05	10.44	7.96	7.97	0.92	22.00	21.39	18.91	18.92	060
15241		∢ ⊲	Skin full graft add-on	1.86	2.48	2.46	0.78 20.0	0.88	0.23	4.5 / 24.65	4.55 22.83	21.03	20.69	777
15261		< <	Skin full graft add-on	2.23	2.89	2.75	1.1	1.33	0.21	5.33	5.19	3.55	3.77	ZZZ
15300		∢.	Apply skinallogrft, t/arm/lg	4.65	3.31	3.24	2.06	2.20	0.49	8.45	8.38	7.20	7.34	060
15301		∢	Apply sknallogrft t/a/l addl	1.00	0.47	3.65	0.33	0.38	0.14	1.61	1.61	1.47 1.0 x	1.52	ZZZ
15321		< <	Aply sknallogrif f/n/hfg add	1.50	0.67	0.69	0.49	0.57	0.21	2.38	2.40	2.20	2.28	ZZZ
15330		∢ <	Aply acell alogrift t/arm/leg	3.99	3.10	3.18	1.86	2.14	0.49	7.58	7.66	6.34	6.62	080
15335		< <	Apiy acell grit va/l add-on	00	3.35	3.45	2.02	2.34	0.55	8.40	8.50	7.07	7.39	060
15336	_	⋖	Aply acell grft f/n/hf/g add	1.43	0.70	0.69	0.47	0.55	0.20	2.33	2.32	2.10	2.18	ZZZ
15340		∢ <	Apply cult skin substitute	3.72	3.74	3.94	2.68	2.74	0.41	7.87	8.07	6.81	6.87	010
15360		(∢	Apply cult derm sub, t/a/l	3.87	4.26	4.43	3.07	3.09	0.00	8.56	8.73	7.37	7.39	060
15361		∢	Aply cult derm sub t/a/l add	1.15	0.56	0.58	0.37	0.44	0.14	1.85	1.87	1.66	1.73	ZZZ
15365		∢ •	Apply cult derm sub f/n/hf/g	4.15	4.30	4.50	3.14	3.19	0.46	8.91	9.11	7.75	7.80	080
15366		∢ ⊲	Apply cuit derm t/nt/g add	1.45	0.67	0.69	0.47 9.66	3 93	0.17	2.29	2.3 0.0	2.09	2.17	777
15401		(∢	Apply skii xenograf, va/ Apply skii xenograf t/a/l add	1.00	1.01	1.68	0.33	0.41	0.14	2.15	2.82	1.47	1.55	ZZZ
15420		⋖	Apply skin xgraft, f/n/hf/g	4.83	5.01	4.85	3.82	3.81	0.52	10.36	10.20	9.17	9.16	060
15421		∢ <	Apply skn xgrft f/n/hf/g add	1.50	1.18	1.29	0.50	0.59	0.21	2.89	3.00	2.21	2.30	ZZZ
15570		(∢	Form skin pedicle flap	9.94	10.21	11.05	6.35	6.67	1.34	21.49	22.33	17.63	17.95	060
15572		⋖	Form skin pedicle flap	9.88	9.61	9.54	6.51	6.48	1.20	20.69	20.62	17.59	17.56	060
15574		∢ <	Form skin pedicle flap	10.48	10.26	10.60	6.8	7.56	1.20	21.94	22.28	18.49	19.24	060
15600		< <	Skin graft	1.91	25.27	2.03	2.67	2.97	0.87	7.39	9.74	4.85	5.15	060
		< <	Skin graft	2.42	5.49	4.90	2.99	3.32	0.35	8.26	79.7	5.76	6.09	060
15620		∢ <	Skin graft	3.56	6.26	7.42	3.74	3.85	0.35	10.17	11.33	7.65	7.76	060
15650		(∢	Transfer skin pedicle flap	4.58	7.00	7.12	4.19	4.21	0.34	12.00	12.12	9.19	9.23	060
15732		∢.	Muscle-skin graft, head/neck	19.62	14.42	17.17	10.88	11.91	1.99	36.03	38.78	32.49	33.52	060
15734		∢ ∢	Muscle-skin graft, trunk	16.86	13.54	17.36	11.12	12.09	2.61	37.08	39.49	33.25	34.22	060
15738		< <	Muscle-skin graff, leg	18.86	13.82	16.97	10.22	11.37	2.65	35.33	38.48	31.73	32.88	060
15740		< <	Island pedicle flap graft	11.47	13.20	10.92	9.13	8.49	0.63	25.30	23.02	21.23	20.59	060
15756		∢ ∢	Neurovascular pedicie graft Free mvo/skin flan microvasc	36.64	ζ	Z Z	47.98	9.00	24 4.61	4 4 2 2	ξ Z Z	59.23	61.39	060
		< <	Free skin flap, microvasc	36.85	Υ Z	Z A	16.45	20.35	3.89	Z A	Z A	57.19	61.09	060
15758		∢.	Free fascial flap, microvasc	36.60	Ϋ́Z	N A	16.06	20.24	4.23	NA	NA	56.89	61.07	060
15760		∢ ⊲	Composite skin graft	09.60	10.03 NA	10.05 NA	6.74	7.15	0.85	20.48 NA	20.50 NA	17.19	17.60	060
15775		<u> </u>	Hair transplant punch grafts	3.95	3.51	4.06	1.70	1.40	0.52	7.98	8.53	6.17	5.87	000
15776		ш.	Hair transplant punch grafts	5.53	3.91	5.01	1.56	2.50	0.72	10.16	11.26	7.81	8.75	000
15780		< <	Abrasion treatment of skin	8.40	11.63	11.57	6.71	7.88	0.67	20.70	20.64	15.78	16.95	060
15782		∢ ∢	Abrasion treatment of skin	4. 4. 4. 5. 4. 5.	9.52	9.79	5.49	5.41	0.34	13.65	14.44	10.67	10.59	060
15783			Abrasion treatment of skin	4.28	7.95	7.16	4.97	4.39	0.28	12.51	11.72	9.53	8.95	060
15786			Abrasion, lesion, single	2.03	3.77	3.46	1.22	1.30	0.11	5.91	2.60	3.36	3.44	010
TOO!	Colo bac 1:	20,040,	Total A local and a social on A TOO Administration of the	della II A	A boundor: -1	- Classia -	ָרָלְיִלְיִילְיִי							

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

ADL	JEINDOIN	ADDENDOM D.—RELATIVE	VALUE UNITS (NVOS) AND	שואופר	NELATED INFORMATION			DELERIMINING IMEDIOARE L'ATMENTS FOR	יל כייחווו בייחווו	אייוי ארן אר	[5] 0 N	/007		
CPT 1 HCPCS 2	Mod	Status	Description	Physician work RVUs ³	Fully im- plement- ed non- facility PE RVUs	Year 2007 transi- tional non-facil- ity PE RVUs	Fully implemented facility	Year 2007 transi- tional fa- cility PE RVUs	Mal-prac- tice RVUs	Fully implemented non-facility	Year 2007 transi- tional non-facil- ity total	Fully implemented facility	Year 2007 transi- tional fa- cility total	Global
15787 15788		∢ Œ	Abrasion, lesions, add-on	0.33	0.82	1.02	0.10	0.15	0.04	1.19	1.39	0.47	0.52	ZZZ 060
15789			Chemical peel, face, dermal	4.91 1.86	9.11	8.36	5.63	5.02	0.20	14.22	13.47	10.74	10.13	060
			Chemical peel, nonfacial	3.73	5.47	6.09	3.22	4.10	0.19	9.39	10.01	7.14	8.02	060
15819			Plastic surgery, neck	10.37	NA 008	NA 77	6.54	7.04	0.97	12 SO	N N	17.88	18.38	060
15821			Revision of lower eyelid	6.58	6.32	7.11	5.08	5.57	0.45	13.35	14.14	12.11	12.60	060
15822			Revision of upper eyelid	4.44	4.97	5.63	3.88	4.35	0.37	9.78	10.44	8.69	9.16	060
158231		∢ ⊲	Hevision of upper eyelid	8.08 5.04	4 L.\	99./ NA	5.91 78.87	6.32	0.50	15.68 NA	16.23 NA	73.88	14.86 23.59	060
		< ∢	Excise excessive skin tissue	12.57	Y V	Z Z	8.11	8.30	1.66	Z Z	Y V	22.34	22.53	060
15833			Excise excessive skin tissue	11.62	Y Z	Y Z	7.11	7.95	1.49	₹ Z	A Z	20.22	21.06	060
15835		< <	Excise excessive skin tissue	12.71	₹ ₹ 2 Z	Z Z	79.7	7.59	1.60	ZZ	Z Z	21.98	21.90	060
		⋖	Excise excessive skin tissue	10.33	N A	NA	6.78	08.9	1.34	N A	A A	18.45	18.47	060
15837		⋖・	Excise excessive skin tissue	9.29	8.63	8.59	5.65	6.96	1.18	19.10	19.06	16.12	17.43	060
15838			Excise excessive skin tissue	7.99	A C	A S	4.79	5.76	0.58	NA Po 62	A S	13.36	14.33	060
15840		τ ∢	Graft for face nerve ballsv	14.66	Z N	0.94 NA	8.37	9.59	2.52	/0.07 NA	04.07 NA	24.35	25.57	060
		< <	Graft for face nerve palsy	25.57	N A	A A	12.70	14.45	2.54	Y Y	A A	40.81	42.56	060
15842		∢ .	Flap for face nerve palsy	40.54	Y S	N :	20.48	22.36	4.93	¥2	Y :	65.95	67.83	060
15845		< □	Skin and muscle repair, face	13.92	A C	N Y	8.43	9.11	0.81	A S	A S	23.16	23.84	060
15851		۵ ح	Removal of sufures	0.78	23.50	1.59	0.73	0.29	0.00	20.2	25.5	1.01	2.5	X 00
		< <	Dressing change not for burn	0.86	1.61	1.79	0.25	0.31	0.09	2.56	2.74	1.20	1.26	000
15860			Test for blood flow in graft	1.95	0.68	0.79	0.68	0.76	0.27	2.90	3.01	2.90	2.98	000
15920		∢ ⊲	Removal of tail bone ulcer	8.06	A Z	A N	5.74	5.61	1.04	Y Z	₹ Z	18.84	14.71	060
15931		< <	Remove sacrum pressure sore	9.89	Z Z	Y Y	5.50	5.65	1.25	Z Z	Z	16.64	16.79	060
15933		∢.	Remove sacrum pressure sore	11.49	Y :	Y.	7.27	7.72	1.52	¥2	Y :	20.28	20.73	060
15934		∢ ⊲	Remove sacrum pressure sore	13.45	A Z	A N	7.50	7.92	1.78	Y Z	Y Z	22.73	23.15	060
15936		< ∢	Remove sacrum pressure sore	12.96	A Z	Z Z	7.38	8.03	1.76	Z Z	Z Z	22.10	22.75	060
		∢.	sacrum pressure sore	14.91	AN:	Y :	8.81	9.59	2.06	YZ:	Y :	25.78	26.56	060
15940		∢ <	Remove hip pressure sore	10.05	Y Z	Y Z	5.76	6.08	1.31	Y S	Y Z	17.12	17.44	060
15944		< <	Remove hip pressure sore	12.15	Z Z	Z Z	8.10	8.49	65	Z Z	₹ ₹	21.91	22.30	060
		⋖	Remove hip pressure sore	13.45	A A	NA	8.99	9.50	1.84	N A	Z A	24.28	24.79	060
15946		∢ <	Remove hip pressure sore	23.72	Y S	Y S	13.66	14.22	3.16	Y S	Z Z	40.54	41.10	060
15951			Remove thigh pressure sore	11.30	A Z	Z Z	2.33	787	1 49	Y Y	Y Y	20.63	20.66	060
			Remove thigh pressure sore	12.03	N A	Y Y	7.66	7.74	1.60	Z Y	Ž	21.29	21.37	060
		∢.	Remove thigh pressure sore	13.27	AN:	Y :	8.91	8.99	1.79	YZ:	¥.	23.97	24.05	060
15956		∢ ⊲	Remove thigh pressure sore	16.46	A Z	A Z	9.51	10.48	2.21	Y Z	Y Z	28.18	29.15	060
16000			Initial treatment of burn(s)	0.89	0.72	0.83	0.23	0.25	0.08	1.69	1.80	1.20	1.22	000
16020			Dress/debrid p-thick burn, s	0.80	1.10	1.24	0.55	0.57	0.08	1.98	2.12	1.43	1.45	000
16025		∢ <	Dress/debrid p-thick burn, m	1.85	1.59	1.73	0.87	0.94	0.19	3.63	3.77	2.91	2.98	000
16035			Dress/deprid p-triick burn, I	3.74		Z Z	4.00	1 49	0.24	4.Z.A	4.4 4 A	5.43	5.69	000
16036			Escharotomy; addll incision	1.50	N A	Z Z	0.47	0.57	0.20	Y Y	A A	2.17	2.27	ZZZ
TOO!	000	de o canada	Circum A Control of Co	dein II A meit	, 100000		00 47 0,00			_				

ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

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CPT 1 HCPCS 2	Mod	Status	Description	Physician work RVUs ³	Fully implemented non-facility PE	Year 2007 transi- tional non-facil- ity PE RVUs	Fully im- plement- ed facility PE RVUs	Year 2007 transi- tional fa- cility PE RVUs	Mal-prac- tice RVUs	Fully im- plement- ed non- facility total	Year 2007 transi- tional non-facil- ity total	Fully im- plement- ed facility total	Year 2007 transi- tional fa- cility total	Global
17000		44	Destroy benign/premlg lesion	0.60	1.38	1.07	0.72	0.59	0.03	2.01	1.70	1.35	1.22	010 ZZZ
17004		∢ <	Destroy lesions, 15 or more	1.58	1.94	2.22	1.32	1.52	0.11	3.63	3.91	3.01	3.21	010
17107		∢ ∢	Destruction of skin lesions	9.15	7.14	7.20	5.05	3.30	0.63	16.92	16.98	14.83	8.23	060
		< <	Destruction of skin lesions	13.18	9.25	9.28	69.9	7.43	0.54	22.97	23.00	20.41	21.15	060
17110		∢ •	Destruct lesion, 1–14	0.65	1.74	1.65	0.85	0.74	0.05	2.44	2.35	1.55	4. 4	010
17111		∢ ⊲	Destruct lesion, 15 or more	0.92	2.25	1.82	1.10	0.88	0.02	3.22	1.80	2.07	1.85	010
		(∢	Destruction of skin lesions	0.91	1.39	1.5.	0.69	0.68	0.04	2.34	2.26	1.64	1.63	010
17261		∢•	Destruction of skin lesions	1.17	2.45	1.82	2.5	0.88	0.05	3.67	3.04	2.26	2.10	010
17263		∢ ∢	Destruction of skin lesions	20. 1	3.01	21.2	42. 5	20.0	0.00	24.4	3.76	3 . 88	3.72	010
17264		∶∢	Destruction of skin lesions	1.94	3.22	2.48	1.40	1.19	0.08	5.24	4.50	3.42	3.21	010
17266		∢ <	skin	2.34	3.47	2.75	1.56	1.31	0.09	5.90	5.18	3.99	3.74	010
17271		∢ ∢	Destruction of skin lesions	28.1	2.40	88.	1.07	1.03	0.00	3.77	3.25	2.44	2.29	010
		< <		1.77	2.92	2.23	1.33	1.17	0.07	4.76	4.07	3.17	3.01	010
17273		⋖ ·	skin lesions	2.05	3.16	2.45	1.46	1.27	0.08	5.29	4.58	3.59	3.40	010
17274		< •	Destruction of skin lesions	2.59	3.56	2.82	1.71	1.51	0.10	6.25	5.51	4.40	4.20	010
17280		۷ ۵	Destruction of skin lesions	3.20	 	1.79	40.1	0.86	0.0	3.54	3.01	2.30	. o	010
		< ⋖	Destruction of skin lesions	1.72	2.69	2.11	1.30	1.14	0.07	4.48	3.90	3.09	2.93	010
17282		⋖	Destruction of skin lesions	2.04	3.09	2.39	1.46	1.30	0.08	5.21	4.51	3.58	3.42	010
17283		∢ <	Destruction of skin lesions	2.64	3.50	2.79	1.73	1.55	0.1	6.25	5.54	4.48	4.30	010
17286		(∢	Destruction of skin lesions	4.43	4.31	3.84	2.40	2.44	0.23	8.97	8.50	7.06	2.10	010
17304		< <	1 stage mohs, up to 5 spec	7.59	11.81	9.15	3.65	3.59	0.30	19.70	17.04	11.54	11.48	000
17305		∢•	2 stage mohs, up to 5 spec	2.85	6.85	4.64	1.37	1.35	0.11	9.81	7.60	4.33	4.31	000
17306		∢ ⊲	3 stage mons, up to 5 spec	2.83 8.5	7.09 6.84	4.71	8. 6	8. %	. c	0.05	7.97	4.32	4.31	900
17310		(∢	Mohs any stage > 5 spec each	0.95	1.97	1.71	0.46	0.46	0.03	2.95	2.69	3 4.	44. 1.44.	ZZZ
17340		∢.	Cryotherapy of skin	0.76	0.32	0.36	0.36	0.36	0.05	1.13	1.17	1.17	1.17	010
1736019000		∢ ⊲	Skin peel therapy	1.43	1.40	1.43	0.97	06.0	90.0	2.89	2.92	2.46	2.39	010
19001		< <	Drain breast lesion add-on	0.42	0.26	0.25	0.13	0.14	0.0	0.72	0.71	0.59	09:0	ZZZ
19020		⋖ ·	Incision of breast lesion	3.68	6.64	6.42	3.02	2.77	0.45	10.77	10.55	7.15	6.90	060
19030		∢ ⊲	Injection for breast x-ray	1.53	2.76	2.84	0.53	0.51	0.09	85.4	3.52	2.15	2.13 1.83	000
19101		∶∢	Biopsy of breast, open	3.18	4.34	4.47	1.76	1.88	0.39	7.91	8.04	5.33	5.45	010
19102		∢ •	Bx breast percut w/image	2.00	3.58	3.78	0.66	99.0	0.14	5.72	5.92	2.80	2.80	000
19103		∢ ∢	Bx breast percut w/device	ა 4 80.0	0.42	5.96	3.25	22	0.30	14.41	10.82	. c	7.83	060
		(∢	Excise breast duct fistula	3.66	6.26	6.13	3.14	2.80	0.48	10.40	10.27	7.28	6.94	060
19120		∢•	Removal of breast lesion	5.80	5.08	4.68	3.35	3.14	0.73	11.61	11.21	9.88	9.67	060
19125		∢ ⊲	Excision, breast lesion	6.55 9.93	5.55 VA	4.98 NA	3.64	3.38	0.6	12.90 NA	12.33 NA	10.99	10.73	090
19140		< <	Removal of breast tissue	5.13	8.01	7.37	3.81	3.50	0.69	13.83	13.19	9.63	9.32	060
19160		⋖・	Partial mastectomy	5.98	₹ Z	Y :	3.60	3.47	0.79	Y :	Y :	10.37	10.24	060
19162		∢ <	P-mastectomy w/In removal	13.81	▼	Y Z	6.08	6.28	1.79	Y Z	Y Z	21.68	21.88	060
19182		< <	Removal of breast	7.72		Z Z	4.97	18.4	1.04	. Δ Ζ Ζ	(13.73	13.57	060
19200		. ∢		17.13	A A	A A	8.11	8.01	1.92	A A	Y Y	27.16	27.06	060
FOOT	7000	0 0	Cicoso Control of the		V 7000	- 1411-	0							

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

ADL	PENDOM	ADDENDOM B.—MELATIVE	VALUE UNITS (RVUS) A	DELA ED	ND DELATED INFORMATION OSED IN			DETERMINING INEDICARE	MEDICA	L	AYMEN IS FOR	1007	CONTINOE	
CPT 1 HCPCS 2	Мод	Status	Description	Physician work RVUs ³	Fully im- plement- ed non- facility PE RVUs	Year 2007 transi- tional non-facil- ity PE RVUs	Fully implemented facility	Year 2007 transi- tional fa- cility PE RVUs	Mal-prac- tice RVUs	Fully im- plement- ed non- facility total	Year 2007 transi- tional non-facil- ity total	Fully im- plement- ed facility total	Year 2007 transi- tional fa- cility total	Global
19220		∢∢.	Removal of breast	17.73	Y Y Z	Z Z :	8.58	8.35	2.07	Y Z Z	Y Y Z	28.38	28.13	060
19260		۷ ۷	Removal of chest wall lesion	17.52	Z Z	4 4 Z Z	10.28	10.96	2.13	Z Z	Z Z	29.93	30.61	060
19272		∢ ⊲	Extensive chest wall surgery	24.68	A C	AN 0	17.30	18.56	2.99	NA 4.34	NA 424	44.97	46.23	060
19291		< ∢	Place needle wire, breast	0.63	1.18	1.20	0.22	0.21	0.04	1.85	1.87	0.89	0.88	ZZZ
1929519296		۷ ۷	Place breast clip, percut	0.00	2.38	2.62	4 6 5	AN 45	0.01	2.39	2.63	N 2	A 4	ZZZ 000
		. ∢ ∘	Place breast cath for rad	1.72	A S	N N	0.46	0.60	0.17	Z	A S	2.35	2.49	ZZZ
19398		∢ ∢	Place breast rad tube/cathsSuspension of breast	6.00 10.92	23.02 NA	74.78 NA	6.94 6.94	7.38	1.64	29.45 NA	98.89 NA	19.50	19.94	060
•		< •	Reduction of large breast	15.85	Y S	Y S	9.75	10.84	2.92	Y S	Z Z	28.52	29.61	060
19325		∢ ∢	Enlarge breast Enlarge breast with implant	6.59 8.44	Y Y	4 4 2 2	6.33	4.82 6.49	1.33	4 4 2 2	4 4 2 2	16.10	16.25	060
•		. ⋖	Removal of breast implant	6.29	Y.	Z:	4.94	5.01	0.91	Y.	Y Z	12.14	12.21	060
19330		∢ ⊲	Removal of implant material	8. 83 8. 83 8. 83	A Z	Y Z	5.96	6.03	1.26	A Z	A Z	15.55	15.62	090
19342		(∢	Delayed breast prosthesis	12.30	ZZ	(8.68	88.8	.83	(Z Z	22.81	23.01	060
19350		∢ •	Breast reconstruction	8.91	9.75	12.85	6.46	7.01	1.41	20.07	23.17	16.78	17.33	060
193551		∢ ∢	Correct Inverted hippie(s)	28.8 133	/9./ AN	9.63 A A	15 17	15.54	0.92	06.9L	18.86 NA	38 43	38.80	060
		< <	Breast reconstruction	20.63	Y Z	A A	12.06	12.37	2.92	A A	¥	35.61	35.92	060
19364		< <	Breast reconstruction	42.30	Y S	Y S	22.32	23.29	6.22	Y S	¥ ž	70.84	71.81	060
19367		∢ ∢	Breast reconstruction Breast reconstruction	26.12	Y Z	ξ q Z Z	14.97	16.30	3.24 4.03	Y Y	A A	34.78	36.05 46.84	060
		. ⋖	Breast reconstruction	33.51	N A	Y Y	17.75	18.67	5.52	A A	Ą	56.78	57.70	060
19369		∢ •	Breast reconstruction	30.92	Y S	Y S	15.55	17.73	4.50	Y S	¥ ž	50.97	53.15	060
19370		∢ ∢	Surgery or breast capsule Removal of breast capsule	10.34	Y Y	4 4 2 2	7.57	7.77	62.1	4 4 2 2	4 4 2 2	16.91	19.73	060
		. ⋖	Revise breast reconstruction	10.13	N A	Y Y	7.50	7.67	1.4	N A	A A	19.07	19.24	060
19396		∢ <	Design custom breast implant	2.17	4.46	1.93	1.21	1.05	0.30	6.93	4.40	3.68	3.52	000
20005		۷ ح	Incision of deep abscess	3.53	3.70	3.55	20.5	2.20	0.46	7.69	2.03	0.00	6.19	010
		< ∢	Explore wound, neck	10.31	N A N	N A	3.56	4.24	1.21	N A N	N A A	15.08	15.76	010
20101		∢ <	Explore wound, chest	3.22	6.46	6.07	1.50	1.59	44.0	10.12	9.73	5.16	5.25	010
20103		(∢	Explore wound, actremity	5.29	7.63	8.36	2.68	3.22	0.75	13.67	14.40	8.72	9.26	010
20150		∢.	Excise epiphyseal bar	14.54	AN S	Y Y	7.57	7.18	2.03	AN.	AN.	24.14	23.75	060
20200		∢ ⊲	Muscle biopsy	1.46	3.16	3.07	0.70	0.74	0.23	4.85	6.76	2.39	2.43	000
20206		< <	Needle biopsy, muscle	0.99	5.45	6.25	0.57	0.62	0.07	6.51	7.31	1.63	1.68	000
20220		∢ <	Bone biopsy, trocar/needle	1.27	2.81	4.13	0.68	0.76	0.08	4.16	5.48	2.03	2.1	000
20225		∢ ∢	Bone blopsy, trocar/needle	3.23	13.50 NA	/ N N)0 0.0 0.0	2 - 2	0. C	0.03 AN	23.86 NA	3.10	3.2 1.1	000
		. ⋖	Bone biopsy, excisional	8.71	Y Z	Z	5.70	6.37	1.31	Z	Z	15.72	16.39	010
20250		< <	Open bone biopsy	5.14	Y S	Z Z	3.67	3.55	1.02	Y S	¥ ž	9.83	9.71	010
20500		< <	Open bone blobsy	1.23	1.33	2.04	0.87	1.37	0.12	2.68	3.39	2.22	2.72	010
		⋖ ·	Inject sinus tract for x-ray	0.76	2.47	2.81	0.27	0.26	0.04	3.27	3.61	1.07	1.06	000
20520		< <	Removal of foreign body	1.85	2.57	2.83	1.42	1.68	0.21	4.63	12.63	3.48	3.74	010
20529		(∢	Ther injection, carp tunnel	0.94	0.80	0.93	0.40	0.49	0.13	1.87	2.00	1.47	1.56	000
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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

2	ADDEINOM D JELATIVE	֡֝֝ <u>֚</u> ב	ELATIVE VALUE OINTS (1100s) AND I	ורוא ורא] 		ואסוטיואו			7007		ב
CPT 1 HCPCS 2	Мод	Status	Description	Physician work RVUs ³	Fully implemented non-facility PE	Year 2007 transi- tional non-facil- ity PE RVUs	Fully implemented facility	Year 2007 transi- tional fa- cility PE RVUs	Mal-prac- tice RVUs	Fully implemented nonfacility total	Year 2007 transi- tional non-facil- ity total	Fully implemented facility	Year 2007 transi- tional fa- cility total	Global
20550		44	Inj tendon sheath/ligament	0.75	0.62	0.69	0.28	0.24	0.09	1.46	1.53	1.12	1.08	000
20552		∢ <	Inj trigger point, 1/2 muscl	0.66	0.58	0.69	0.24	0.21	0.05	1.29	1.40	0.95	0.92	000
20600		∢ ∢	Inject trigger points, =/> 3	0.66	0.66	0.65	0.31	0.34	0.08	1.40	1.39	50.	. t. 8. 6.	000
		⋖	Drain/inject, joint/bursa	0.68	0.73	0.75	0.32	0.35	0.08	1.49	1.51	1.08	Ξ.	000
20610		∢ <	Drain/inject, joint/bursa	0.79	1.06	0.98	0.39	0.41	0.1	1.96	1.88	1.29	1.3	000
20615		< <	Aspirate/inj ganglion cyst	2.28	2.69	3.31	1.39	1.74	0.20	5.17	5.79	3.87	4.22	010
20650		∢•	Insert and remove bone pin	2.23	2.47	2.40	1.45	1.53	0.31	5.01	4.94	3.99	4.07	010
20660	•	∢ ⊲	Apply, rem tixation device	2.51	3.33 NA	3.13 NA	1.46	1.57	0.59	6.43 NA	6.23 NA	4.56	11.36	000
		< ∢	Application of pelvis brace	6.18	Z Z	Z Z	4.96	5.40	0.56	Z Z	Ž Ž	11.70	12.14	060
20663		∢ <	Application of thigh brace	5.54	₹ \$ Z 2	Y Z	5.04	4.89	0.94	¥ ž	Z Z	11.52	11.37	060
20665		< <	Removal of fixation device	1.31	1.40	1.97	0.98	1.26	0.19	2.90	3.47	2.48	2.76	010
		< <	Removal of support implant	1.74	6.63	10.34	1.66	2.00	0.28	8.65	12.36	3.68	4.02	010
20680		⋖ <	Removal of support implant	5.86	8.09	8.63	4.02	3.80	0.56	14.51	15.05	10.44	10.22	060
20690		< <	Apply bone fixation device	5.63 6.40	ζ	4 4 2 2	3 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	3.64	1.05	¥ ¥ Z Z	Z Z	10.65	11.09	060
20693		< <	Adjust bone fixation device	5.91	Y Z	Z Z	4.45	5.21	0.98	Z Z	Z	11.34	12.10	060
20694		∢ •	Remove bone fixation device	4.15	5.29	69.9	3.50	3.91	0.71	10.15	11.55	8.36	8.77	060
20802		∢ ⊲	Replantation, arm, complete	51.10	ζ	A A	23.96	34.00	3.8 4 84	Y Y	Y Z	28.93	87.46	060
		< ∢	Replantation hand, complete	62.63	Z Z	Z Z	37.95	41.24	6.86	Y Y	Z Z	107.4	110.7	060
20816		∢ <	Replantation digit, complete	31.64	Y S	Y S	24.04	34.4	4.52	Y S	Y S	60.20	70.60	060
20824		< <	Replantation thumb, complete	31.64	(ζ ζ Z Z	25.31	33.82	4.61	₹ ₹ 2 Z	Z Z	61.56	70.07	060
		∶∢	Replantation thumb, complete	27.12	Υ Z	A A	23.48	33.31	3.66	N A	Y Y	54.26	64.09	060
20838		∢ <	Replantation foot, complete	42.42	A S	NA S	13.13	20.04	1.12	NA NA	NA NA	56.67	63.58	060
20902		< <	Removal of bone for graft	2.69 7.90	- A	0.04 VA	5.74	6.61	1.30	9.0 4 N	7.5. V. V.	14.94	15.81	060
		⋖	Remove cartilage for graft	5.33	ΥZ	NA	4.54	5.04	0.71	Y Y	N A	10.58	11.08	060
20912		∢ ⊲	Remove cartilage for graft	6.34 7.36	₹ ¤	¥ Z	4.58	5.50	0.69	Y Z	Z Z	11.61	12.53	060
20922		< <	Removal of fascia for graft	6.78	7.54	7.56	4.97	4.90	0.70	15.02	15.04	12.45	12.38	060
20924		∢.	Removal of tendon for graft	6.53	Y :	¥ :	4.91	5.65	1.04	Y Z	Y :	12.48	13.22	060
20926		∢ ∢	Removal of fissue for graft Spinal bone allograft	0.0 1.84	ζ	4 4 2 2	56.4	0.87	0.87	Y Y	Y Y	9.0	3.5	222
		< <	Spinal bone autograft	2.79	Z Z	Z Z	1.06	1.35	0.54	Y Y	Z Y	4.39	4.68	777
20938		⋖ •	Spinal bone autograft	3.02	Υ Σ Σ	A S	1.13	1.45	0.64	A S	N S	4.79	5.11	ZZZ
20955		∢ ∢	Fibula bone draft. microvasc	39.90	4 - Z 4 Q	0. A	17.66	22.67	0.20	0.60 NA	46. N	62.45	67.46	060
			lliac bone graft, microvasc	40.79	Ą Z	A A	20.30	23.68	7.01	N A	Y Y	68.10	71.48	060
20957		∢ <	Mt bone graft, microvasc	42.17	₹ Z	₹ Z	18.97	18.99	7.05	Y S	Ϋ́	68.19	68.21	060
		< ⊲	Bone/skin graft microvasc	39.21 44.99	ζ Δ Ζ Ζ	ξ	19.75	22.13	6.33	ζ Δ Ζ Ζ	₹ 4 2 2	60.49	74.75	060
20970		< <	Bone/skin graft, illac crest	44.14	Z Z	Z Z	19.85	24.05	6.60	Z Z	Z Z	70.59	74.79	060
20972		⋖ ·	Bone/skin graft, metatarsal	44.07	Y Z	A :	17.15	19.77	5.30	Y :	YZ:	66.52	69.14	060
20973		∢ ⊲	Bone/skin graft, great toe	46.83	Z S	AN C	14.61	22.58	5.54	NA 1	A N	66.98	1 26	060
20975		< <	Electrical bone stimulation	2.60	Y Z	Z V V	1.45	1.65	0.51	N A	Z A	4.56	4.76	000
20979		∢	Us bone stimulation	0.62	0.61	0.75	0.20	0.31	0.09	1.32	1.46	0.91	1.02	000
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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

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CPT¹ HCPCS²	Mod	Status	Description	Physician work RVUs ³	Fully implemented non-facility PE	Year 2007 transi- tional non-facil- ity PE RVUs	Fully implemented facility	Year 2007 transi- tional fa- cility PE RVUs	Mal-prac- tice RVUs	Fully im- plement- ed non- facility total	Year 2007 transi- tional non-facil- ity total	Fully implemented facility	Year 2007 transi- tional fa- cility total	Global
20982		۷ ۷	Ablate, bone tumor(s) perq	7.27	86.78 NA	104.1 NA	2.87	2.95	0.69	94.74 NA	112.1 NA	10.83 18.28	10.91	060
21015		∢ ◆	Resection of facial tumor	5.53	NA 12.43	NA 12 32	4.34 65	4.85	0.70	NA VZ ZZ	NA 83	10.57	11.08	060
21026		(∢	Excision of facial bone(s)	5.46	8.65	8.07	5.79	6.20	09:0	14.71	14.13	11.85	12.26	060
21029		⋖ ·	Contour of face bone lesion	8.20	9.15	9.34	6.18	6.82	0.94	18.29	18.48	15.32	15.96	060
21030		∢	Excise max/zygoma b9 tumor	4.74	7.18	6.56	3.51	4.95	0.54	12.46	11.84	9.95	10.23	060
21032		(∢	Remove exostosis, maxilla	3.24	6.08	5.54	3.38	3.49	0.47	9.79	9.15	7.09	7.20	060
		∢ <	Excise max/zygoma mlg tumor	17.09	12.98	15.22	9.35	11.86	1.71	31.78	34.02	28.15	30.66	060
21040		∢ ∢	Excise mandible lesion	12.53	92. V	0.62 NA	7.38	4.72 8.90	1.12	12:54 AN	08.1 NA	21.03	22.55	060
		∢.	Extensive jaw surgery	18.03	¥ :	Y S	9.84	11.75	1.52	Ą.	Y :	29.39	31.30	060
21046		۷ ۵	Remove mandible cyst complex	13.85	▼ 4 Z Z	4 4 2 2	98.11	11.80	- 6 - 6 - 6	A A	A Z	31.45	34.35	060
21048		< <	Remove maxilla cyst complex	14.35	Z Z	Z Z	1.34	11.96	1.76	Z Z	Z Z	27.45	28.07	060
21049		∢•	Excis uppr jaw cyst w/repair	18.96	Y S	Z Z	8.93	12.03	1.59	Y :	Y :	29.48	32.58	060
		∢ <	Removal of jaw joint	11.44	▼	Υ S	8.10	9.13	1.47	Υ S	Υ S	21.01	22.04	060
21070		∢ ∢	Remove jaw joint cartilage	8.03	Z Z	Y Y	6.09	8.8 9.86	1.38	¥ ¥	A A	15.80	20.55	060
		< <	Prepare face/oral prosthesis	13.40	7.88	11.26	4.81	8.73	1.99	23.27	26.65	20.20	24.12	010
21077		∢ •	Prepare face/oral prosthesis	33.70	18.22	28.12	12.26	22.63	4.55	56.47	66.37	50.51	60.88	060
210/9		∢ <	Prepare face/oral prosthesis	22.37	13.41	19.52	8.32	14.98	3.15	38.87	44.98	33.78	40.44	060
21081		< <	Prepare face/oral prostnesis	22.85	14.23	20.33	8.51 8.51	15.28	3.20	40.28	46.38	34.56	45.00	060
		⋖	prosthesis	20.84	14.20	18.10	8.46	13.95	3.11	38.15	42.05	32.41	37.90	060
		∢ <	prosthesis	19.27	14.14	17.67	7.96	12.84	2.88	36.29	39.82	30.11	34.99	060
21085		∢ ∢	Prepare face/oral prosthesis	6.7	0.09	7.02	3.02	20.00	1.27	16.82	18.13	13.84	16.26	090
		< <	Prepare face/oral prosthesis	24.88	12.72	21.04	8.70	16.79	3.71	41.31	49.63	37.29	45.38	060
21087		⋖ •	Prepare face/oral prosthesis	24.88	12.92	20.74	8.87	16.66	9. 6. 44. 6.	41.24	49.06	37.19	44.98	060
21110		∢ ∢	Maxilloracial tixation	5.70	13.92	10.53	9.95	8.43	0.34	19.76	16.95	16.37	15.19	060
		⋖	Injection, jaw joint x-ray	0.81	2.47	3.87	0.22	0.30	90.0	3.34	4.74	1.09	1.17	000
21120		⋖ <	Reconstruction of chin	4.92	10.08	10.48	6.95	7.37	0.60	15.60	16.00	12.47	12.89	060
21122		(∢	Reconstruction of chin	8.51	¥.Z	NA AN	7.54	8.37	1.07	NAN	NA Y	17.12	17.95	060
21123		∢.	Reconstruction of chin	11.14	A S	NA	10.14	10.66	1.40	AN S	AN S	22.68	23.20	060
		∢ ⊲	Augmentation, lower jaw bone	10.60	68.82	58.74	7.07	E0.8	0.79	1017	67.80	18.40	19.40	060
21137		< <	Reduction of forehead	10.06	Y Z	NA	6.18	7.36	1.32	Z A	N AN	17.56	18.74	060
21138		⋖	Reduction of forehead	12.67	Y Y	A A	8.46	9.29	1.74	A A	A A	22.87	23.70	060
21139		< <	Reduction of forehead	14.84	Υ S	Z Z	6.89	10.04	1.18	Y S	Υ S	22.91	26.06	060
21142		< <	Reconstruct midface, lefort	19.84	ζ	ξ	10.35	12.23	2, 33	ξ Z Z	₹ ₹ Z Z	32.57	34.30	060
		< <	lefort	20.61	Y Z	Z Z	8.69	12.94	1.66	A Z	Z Z	30.96	35.21	060
21145		∢ •	midface, lefort	23.52	₹ ż	Y S	12.44	13.57	2.84	Y S	Y S	38.80	39.93	060
21147		∢ ∢	Reconstruct midface, lefort	26.01	ζ	4 4 2 2	13.44	14.68	3.03 1.84	Y Y	4 4 2 2	30.05 41.29	42 53	060
21150		∶∢	midface,	25.70	Z Z	Z	13.48	15.98	2.55	Z	Z	41.73	44.23	060
21151		⋖ ·	lefort	28.76	Y Z	Y S	11.43	20.12	2.30	¥.	Y :	42.49	51.18	060
21154		∢ ∢	Reconstruct midface, lefort Reconstruct midface, lefort	30.95	Z Z	Z Z	13.09	22.58	2. 48 6. 64	Z Z	K K	54.19	56.01	060
		: :		, ,	 :		33.					;	_ ; ;	;

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

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CPT¹ HCPCS²	Mod	Status	Description	Physician work RVUs ³	Fully im- plement- ed non- facility PE RVUs	Year 2007 transi- tional non-facil- ity PE RVUs	Fully implemented facility	Year 2007 transi- tional fa- cility PE RVUs	Mal-prac- tice RVUs	Fully implemented nonfacility	Year 2007 transi- tional non-facil- ity total	Fully implemented facility	Year 2007 transi- tional fa- cility total	Global
21159		۷ ۵	Reconstruct midface, lefort	42.80	ZZ	4 4 Z Z	14.87	25.59	8.18	Z Z	4 4 Z Z	65.85	76.57	060
		. ⋖		28.01	Y Y	Y Y	12.81	13.55	3.55	Z Z	Z :	44.37	45.11	060
		⋖ <	Reconstruct orbit/forehead	33.37	Υ S	Υ S	12.26	16.45	4.83	₹ \$ Z 2	Υ S	50.46	54.65	060
21180		< <	Reconstruct entire forehead	25.40	₹ ₹ 2 Z	₹ ₹ 2 Z	12.14	14.60	3.48	Z Z	Z Z	41.02	43.48	060
		< <	Contour cranial bone lesion	10.14	N A	Y Y	6.63	7.27	1.32	¥ Z	A A	18.09	18.73	060
21182		⋖ <	Reconstruct cranial bone	32.39	Ψ S	Y S	13.71	17.81	2.80	Υ S	Υ S	48.90	53.00	060
21184		∢ <	Reconstruct cranial bone	38.43	ξ Z Z	₹ ₹ 2 Z	20.38	21.60	5.70	₹ ₹ Z Z	Y Y	04.99 04.51	59.40	060
		⋖	Reconstruction of midface	22.91	Ϋ́Z	N A	14.49	17.81	1.69	ΥZ	AN	39.09	42.41	060
21193		∢ •	Reconst lwr jaw w/o graft	18.55	Ψ.	¥ S	96.6	12.01	2.23	Υ 'n	Y ?	30.74	32.79	060
21194		∢ ∢	Reconst lwr jaw w/graft Reconst lwr jaw w/o fixation	18.76	Z Z	K K	13.08	13.15	2.02	K K	A A	33.48	36.59	060
		∶ ∢	Reconst lwr jaw w/fixation	20.43	Ϋ́	A Z	13.01	15.06	2.07	A Z	A N	35.51	37.56	060
21198		∢	Reconstr lwr jaw segment	15.38	Ϋ́	A A	10.89	12.28	1.44	A A	A A	27.71	29.10	060
		⋖ <	Reconstr lwr jaw w/advance	16.56	Ψ S	Y Z	6.65	8.52	1.39	¥ ž	Y S	24.60	26.47	060
		∢ <	Augmentation of facial bones	13.70	NA 20 00	NA 10	7.65	12.30		¥ 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	36 90	10.77	24.03	060
21209		(∢	Reduction of facial bones	7.46	12.20	11.17	7.33	7.90	06:0	20.56	19.53	15.69	16.26	060
		<	Face bone graft	11.28	44.00	29.71	7.72	8.97	1.30	56.58	42.29	20.30	21.55	060
21215		⋖ ·	Lower jaw bone graft	11.82	86.93	53.23	8.01	9.02	1.53	100.3	66.58	21.36	22.40	060
21230		∢ •	Rib cartilage graft	11.00	A S	A S	6.67	7.71	1.29	Z Į	NA NA	18.96	20.00	060
		∢ ⊲	Ear cartilage graft	12.7 78.71	9.63 NA	18.6 VN	5.83	6.28	0.61	17.45	.63./ L	13.65	29.60	060
21242		< <	Reconstruction of jaw joint	14.20	Z Z	₹ ₹	10.36	11.25	1.78	(4 2 Z	¥ Z	26.34	27.23	060
		⋖	Reconstruction of jaw joint	23.83	Ϋ́	A A	15.37	16.95	3.25	Ϋ́	A	42.45	44.03	060
21244		⋖ <	Reconstruction of lower jaw	13.23	Y Z	Y Y	10.80	11.80	1.25	Z Z	A S	25.28	26.28	060
21246		< <	Reconstruction of jaw	12.70	0 4 2 2	2 A	6.58	9.37	1.35	CI./2	20.10 NA	20.63	22.54	060
		< <	Reconstruct lower jaw bone	23.91	A Z	A Z	13.25	16.36	2.83	Ą Z	Z Z	39.99	43.10	060
21248		∢.	Reconstruction of jaw	12.46	12.63	12.29	7.52	8.95	1.55	26.64	26.30	21.53	22.96	060
21249		∢ <	Reconstruction of jaw	18.49	16.05	16.59	9.87	12.02	2.48	37.02	37.56	30.84	32.99	060
21256		(∢	Reconstruction of orbit	17.32	Z Z	Z Z	9.67	11.31	1.50	Z Z	¥ ¥	28.49	30.13	060
		⋖	Revise eye sockets	17.66	Ą Z	AN	9.32	11.93	0.97	ΥZ	AN	27.95	30.56	060
21261		⋖ <	Revise eye sockets	33.66	Ψ S	Z Z	14.53	21.86	3.42	₹ S	Υ S	51.61	58.94	060
21263		∢ ⊲	Revise eye sockets	30.60	₹ 4 Z Z	4 4 2 2	15.78	18.81	1 2.02	ζ	A Z	37.83	51.03	060
21268		< ⋖	Revise eye sockets	26.66	Ψ Z	Z Z	15.47	19.07	3.65	Z Z	Z Z	45.78	49.38	060
21270		⋖	Augmentation, cheek bone	10.46	10.98	11.51	5.74	68.9	0.72	22.16	22.69	16.92	18.07	060
21275		⋖ ·	Revision, orbitofacial bones	11.59		Y :	7.17	7.93	1.29	Y :	A S	20.05	20.81	060
		∢ <	Revision of eyelid	6.84	▼	Υ S	5.64	5.87	0.42	∀	Υ S	12.90	13.13	060
21295		۷ ∢	Revision of jaw muscle/hone	50.4	₹ 4 2 2	ξ	7. c	4.59 57.75	0.20	ζ	ξ Δ Ζ Ζ	4.52	6.70 4.49	060
		< <	Revision of jaw muscle/bone	4.61	A Z	A Z	5.45	5.05	0.34	Ą Z	Z Z	10.40	10.00	060
21300		⋖・	Treatment of skull fracture	0.72	0.27	1.85	0.27	0.26	0.13	1.12	2.70	1.12	- ;	000
21315		∢ ∢	Treatment of nose fracture	1.76	1.95	4 2 8	1.0	1 83	0.03	6.30	2.04	3.53	3.73	010
21320		: ∢	Treatment of nose fracture	1.85	4.00	3.94	1.23	1.52	0.18	6.03	5.97	3.26	3.55	010
21325		⋖ ·	Treatment of nose fracture	4.01	A :	A :	6.67	8.15	0.31	¥:	A :	10.99	12.47	060
21330		∢ ◊	Treatment of nose fracture	5.62	A Z	A Z	7.31	9.13	0.56	A N	A Z	13.49	15.31	060
		נ .	Heathent Of Hose Hacture	3		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	17. I	7.0	;;	ני	CNI	17:71	2.0	200

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

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CPT 1 HCPCS ²	Мод	Status	Description	Physician work RVUs ³	Fully implemented non- facility PE RVUs	Year 2007 transi- tional non-facil- ity PE RVUs	Fully implemented facility	Year 2007 transi- tional fa- cility PE RVUs	Mal-prac- tice RVUs	Fully im- plement- ed non- facility total	Year 2007 transi- tional non-facil- ity total	Fully im- plement- ed facility total	Year 2007 transi- tional fa- cility total	Global
21336		44	Treat nasal septal fracture	6.46 3.20	NA 5.80	NA 6.06	8.03	9.24	0.55	NA 9.28	NA 9.54	15.04	16.25	060
21338		۷ ۷	Treat nasoethmoid fracture	6.70 8.33	Y Z	A A	9.58	12.94	0.82	4	∢ ∢ Z Z	17.10	20.46	060
		∢ <	Treatment of nose fracture	11.25	Z Z	₹ S	7.17	8.11	1.15	Y Z	¥ S	19.57	20.51	060
21344		(∢	Treatment of sinus fracture	21.26	Z Z	Z Z	12.89	15.64	2.43	Z Z	₹ ₹	36.58	39.33	060
		∢ <	Treat nose/jaw fracture	8.77	9.60	9.80	5.91	6.87	0.92	19.29	19.49	15.60	16.56	060
21347		۷4	Treat nose/jaw fracture	13.29	X Z	Z Z	11.39	15.03	1.47	ζ <u>ζ</u> Ζ	₹ ₹	26.15	29.79	060
21348		۷ ۷	Treat nose/jaw fracture Treat cheek bone fracture	17.28	N 2.55	NA 808	6.74	10.04	2.48	10.15	NA 10.68	26.50	29.80	090
21356		. ∢ ⋅	Treat cheek bone fracture	4.64	6.70	7.03	3.86	4.39	0.46	11.80	12.13	8.96	9.49	010
21360		∢ ∢	Treat cheek bone fracture	6.95 16.42	Δ Z	∢ ∢ Z Z	5.17	5.76	1.69	Z Z	4 4 2 2	12.86 26.84	13.45 28.44	060
		∢.	Treat cheek bone fracture	18.36	¥:	¥ :	10.04	11.03	2.49	Y :	¥:	30.89	31.88	060
21385		∢ ⊲	Treat eye socket fracture	9.40	Z Z	A Z	6.77	7.92	0.97	A Z	Y Z	17.14	18.29	060
		< ∢	Treat eye socket fracture	9.94	Z Z	Z Z	7.14	8.52	1.08	Y Y	Z Z	18.16	19.54	060
		∢ <	Treat eye socket fracture	11.01	Y S	¥ ž	6.64	7.53	0.90	Z Z	Y S	18.55	19.44	060
21400		(∢	Treat eye socket fracture	1.40	2.68	2.64	1.94	1.90	0.15	4.23	4.19	3.49	3.45	060
21401		< •		3.51	7.07	7.78	3.02	3.38	0.38	10.96	11.67	6.91	7.27	060
21406		< <	Treat eye socket fracture	6.25 8.85	▼	₹ ₹ Z Z	5.68	5.80 6.58	0.73	4 4 2 2	∢	15.89	13.78	060
		⋖	eye socket fracture	12.61	ΥZ	A A	7.66	8.60	1.44	A A	N A	21.71	22.65	060
		∢ ⊲		5.70	12.01 NA	10.02 NA	8.89	8.47	0.73	18.44 NA	16.45 NA	15.32	14.90	060
21423		< <	Treat mouth roof fracture	10.63	A A	A A	7.16	8.80	1.27	N A	Ϋ́	19.06	20.70	060
:		∢ <	Treat craniofacial fracture	7.66	Z Z	¥ Z	9.33	9.50	0.70	Y Z	₹ Z	17.69	17.86	060
21433		< <	Treat craniofacial fracture	26.05	Z Z	Z Z	12.22	15.39	2.78	Z Z	Z Z	41.05	44.22	060
		∢ •	craniofacial fracture	19.92	A S	¥ ž	10.63	12.21	1.98	Z Z	Y S	32.53	34.11	060
21436		∢ ∢	Treat craniotacial fracture	3.20	10.28	NA 7.91	7.61	6.54	90.50 90.38	13.86	11.49	11.19	50.42 10.12	060
		⋖ ·	Treat dental ridge fracture	5.94	12.42	10.44	8.55	8.43	0.78	19.14	17.16	15.27	15.15	060
21450		∢ ∢	I reat lower jaw fracture Treat lower jaw fracture	3.47	10.39	8.15	7.63	7.08	0.93	14.19	11.95	11.43	10.88	060
		⋖ -	lower jaw fracture	2.23	11.76	12.74	5.88	4.94	0.27	14.26	15.24	8.38	7.44	060
		∢ ∢	Treat lower jaw fracture Treat lower jaw fracture	6.28	14.68 NA	11.75 NA	11.54	10.96	0.74	21.70 NA	18.77 NA	18.56	13.99	060
21461		< <	Treat lower jaw fracture	8.95	41.00	28.65	12.50	12.65	0.98	50.93	38.58	22.43	22.58	060
		∢ <	Treat lower jaw fracture	10.65	42.32	31.35	13.10	12.84	1.27	54.24	43.27	25.02	24.76	060
21470		τ∢	Treat lower jaw fracture	17.12	Z Z	Z Z	9.90	11.51	1.96	Z Z	Z Z	28.98	30.59	060
		∢ •	Reset dislocated jaw	0.61	1.50	1.71	0.17	0.19	0.06	2.17	2.38	0.84	0.86	000
21485		∢ ∢	Reset dislocated Jaw	4.48 12.59	12.24 NA	9.24 VA	7.75	8.06 9.23	1.96	NA	14.23 NA	14.20	13.05	060
		<	Treat hyold bone fracture	6.43	Y Y	Y Y	9.46	8.70	0.46	Y Y	Z A	16.35	15.59	060
21497		∢ <	Interdental wiring	4.35	11.91	9.33	9.09	8.02	0.50	16.76	14.18	13.94	12.87	060
21502			Drain chest lesion	7.35	Z Z	P Z	4.75	5.43	0.97	NA NA	AN AN	13.07	13.75	060
21510			Drainage of bone lesion	5.97	AN	A N	4.68	5.43	0.80	NA	NA	11.45	12.20	060
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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

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CPT 1 HCPCS 2	Mod	Status	Description	Physician work RVUs ³	Fully implemented non-facility PE	Year 2007 transi- tional non-facil- ity PE RVUs	Fully implemented facility	Year 2007 transi- tional fa- cility PE RVUs	Mal-prac- tice RVUs	Fully implemented nonfacility	Year 2007 transi- tional non-facil- ity total	Fully im- plement- ed facility total	Year 2007 transi- tional fa- cility total	Global
21550		⋖ <	Biopsy of neck/chest	2.06	4.36	3.78	1.76	1.73	0.16	6.58	6.00	3.98	3.95	010
21556		۲∢	Remove lesion, neckchest	5.56	N V	0.30 AN	3.87	4.05	0.96	NA NA	0.40 NA	10.08	10.26	060
21557		⋖	Remove tumor, neck/chest	8.87	Υ	Y Y	4.35	5.12	1.08	¥ V	A A	14.30	15.07	060
		∢	Partial removal of rib	7.06	A A	Δ Z	5.72	5.74	0.99	A A	A A	13.77	13.79	060
21615		< <	Removal of rib	10.22	₹ Z	Z Z	5.52	6.41	1.45	Z Z	Z Z	17.19	18.08	060
21616		⋖ <	Removal of rib and nerves	12.44	Υ S	Y S	7.22	7.84	1.86	¥ ž	Y S	21.52	22.14	060
21627		∢ ∢	Partial removal of sternum Sternal debridement	7.10	¥ ¥ Z Z	4 4 2 2	5.63	6.15	1.02	₹ ₹ Ζ Ζ	₹ ₹ Z Z	13.75	14.27	060
		< <	Extensive sternum surgery	18.89	Ϋ́	Y Z	10.40	11.50	2.58	A A	N A	31.87	32.97	060
21632		∢ ◊	Extensive sternum surgery	19.40	A Z	Y Z	9.70	10.78	2.65	∢ ¤	Ψ Z	31.75	32.83	060
21700		< <	Revision of neck muscle	6.18	Z Z	Z Z	3.98	4.33	0.32	Z Z	Z Z	10.48	10.83	060
21705		∢ •	Revision of neck muscle/rib	9.77	Y S	A S	4.86	5.42	1.43	A S	N S	16.06	16.62	060
21720		∢	Revision of neck muscle	2.67	1.94 A N	2.34 NA	4 4 5 5 5	2.93	- 0.91 - 2.91	8.52 NA	8.92 NA	10.87	13.48	060
21740		< <	Reconstruction of sternum	17.43	₹ Z	Z Z	8.70	8:58	2.36	Z Z	Z Z	28.49	28.37	060
21750		∢.	Repair of sternum separation	11.33	Y :	Y :	5.50	5.97	1.63	¥ :	A :	18.46	18.93	060
21800		∢	Treatment of rib fracture	0.96	∀	Y Z	1.40	1.36	0.09	A Z	A Z	2.45	2.41	060
21810		(∢	Treatment of rib fracture(s)	6.85	(∢ Z Z	(<u>4</u>	5.28	5.06	0.94	Z Z	Z Z	13.07	12.85	060
21820		⋖	Treat sternum fracture	1.28	1.78	1.82	1.84	1.79	0.16	3.22	3.26	3.28	3.23	060
		∢ <	Treat sternum fracture	7.58	A N	N S	5.46	6.17		NA	NA	14.15	14.86	000
21925		τ ∢	Biopsy soft tissue of back	4.48	5.47	5.25	3.43	3.30	0.60	10.55	10.33	8.51	8.38	060
		⋖	Remove lesion, back or flank	4.99	6.01	5.80	3.74	3.49	0.66	11.66	11.45	9.39	9.14	060
21935		∢ <	Remove tumor, back	18.29	∀ \$ 2 2	Y S	8.40	9.34	2.47	Y S	Y S	29.16	30.10	060
22015		∢ ∢	l&d, p-spine, c/vcerv-tnor I&d, p-spine, I/s/ls	12.38	¥ ¥ Z Z	₹ ₹ Ζ Ζ	8.08	8.70	1.73	₹ ₹ Z Z	¥ ¥ Z Z	22.28	22.32	060
		∢.	Remove part of neck vertebra	10.72	Y :	¥ :	7.85	7.63	2.13	A :	¥.	20.70	20.48	060
22101		∢	Remove part, thorax vertebra	10.80	A A	Y Y	7.79	7.78	1.90	₹ Z	A Z	20.49	20.48	060
22103		< <	Remove extra spine segment	2.34	(4	ZZ	0.86	1.12	- 0 - 4	Z Z	Z Z	3.64	3.90	ZZZ
		∢•	Remove part of neck vertebra	13.72	Y Z	Y S	8.8	9.11	2.76	Y S	Y :	25.36	25.59	060
22112		∢ ⊲	Remove part, thorax vertebra	13.79	4 4 2 2	Z Z	8.76	9.17	2.52	A A	A Z	25.07	25.48	060
22116		< <	Remove extra spine segment	2.32	₹ 2	Z Z	0.84	1.09	0.50	Z Z	Z Z	3.66	3.91	ZZZ
22210		⋖ <	Revision of neck spine	25.03	∀ \$ 2	Y S	14.35	15.18	5.4	¥ ž	Y S	44.82	45.65	060
22212		∢ ∢	Revision of lumbar spine	20.64	4 4 2 2	Ψ Z Z Z	12.20	13.03	3.90	A A	A A	36.74	38.04	060
		< <	Revise, extra spine segment	6.03	Z Z	Ϋ́	2.30	2.93	1.29	A A	¥ Z	9.62	10.25	ZZZ
		∢ <	Revision of neck spine	22.59	∀ \$ 2	Y S	13.09	13.52	5.06	¥ ž	Y S	40.74	41.17	060
22222		∢	Revision of Iumbar spine	22.74	∀	Z Z	12.03	11.38	4.12	A Z	¥ ₹	38.86 08.86	38.24	060
22226		< <	Revise, extra spine segment	6.03	{	Z Z	2.08	2.85	1.29	Z Z	ž Ž	9.40	10.17	ZZZ
22305		∢.	Treat spine process fracture	2.05	2.12	2.27	1.77	1.89	0.39	4.56	4.71	4.21	4.33	060
22310		∢ ∢	I reat spine fracture Treat spine fracture	3.61	2.94	2.84	2.45	2.38	0.50	7.05	6.95	6.56	6.49	060
		∶∢	Treat odontoid fx w/o graft	22.46	Z V	N N	12.88	13.29	5.28	Z Z	N N	40.62	41.03	060
22319		∢.	Treat odontoid fx w/graft	25.07	A S	Y :	13.69	14.49	6.03	Y ?	Y :	44.79	45.59	060
22325		4 4	Treat spine fracture	19.52	A A	 & & Z Z	11.67	12.00	3.87	A Z	A Z	35.06	35.39	060
				45; A C C C C C C C C C	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \				1	-	-	?	;	?
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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

700	ADDENDOM B.——DELATIVE	 -	VALUE OINII 3 (110 OS)	AIN DELATED INFORMATION COED				טוואוואיריז ייז	ו אראטוטאואו ג			/007		ב
CPT 1 HCPCS 2	Mod	Status	Description	Physician work RVUs ³	Fully implemented non- facility PE RVUs	Year 2007 transi- tional non-facil- ity PE RVUs	Fully implemented facility	Year 2007 transi- tional fa- cility PE RVUs	Mal-prac- tice RVUs	Fully im- plement- ed non- facility total	Year 2007 transi- tional non-facil- ity total	Fully im- plement- ed facility total	Year 2007 transi- tional fa- cility total	Global
22327		∢ <	Treat thorax spine fracture	20.42	4 4 Z Z	4 4 Z 2	11.94	12.29	3.98	4 4 Z Z	4 4 Z 2	36.34	36.69	060
22505		(∢	Manipulation of spine	1.87	. ∢ Σ Ζ	ZZ	5 6.	0.97	0.36	Z Z	Z Z	3.27	3.20	010
		⋖	Percut vertebroplasty thor	9.15	46.33	96'29	4.66	2.00	1.71	57.19	68.82	15.52	15.86	010
22521		∢ <	Percut vertebroplasty lumb	8.58	47.63	54.01	4.46	4.84	1.60	57.81	64.19	14.64	15.02	010
22523		< <	Percut vertebroplasty addil	9.19	4	₹ ₹ Z Z	4.74	5.63	1.71	4 4 2 2	₹ ₹ Z Z	15.64	16.53	010
		< <	Percut kyphoplasty, lumbar	8.79	Ϋ́	A A	4.59	5.43	1.60	A A	N A	14.98	15.82	010
22525		∢ •	Percut kyphoplasty, add-on	4.47	₹ Z	Y S	1.67	2.13	0.82	¥ ż	Y S	6.96	7.42	ZZZ
22532		∢ <	Lat thorax spine tusion	25.73	Y Y	Y Z	13.40	14.50	4.34 45.4	A Z	Y Z	43.47	44.57	060
22534		(∢	Lat thor/lumb, addll seg	5.99	₹ Z	Z Z	2.25	2.84	1.25	Z Z	Z Z	9.49	10.08	ZZZ
		⋖	Neck spine fusion	26.78	A N	A A	14.66	15.55	5.59	A A	A A	47.03	47.92	060
22554		∢ •	Neck spine fusion	17.48	Y Z	Υ ·	11.21	12.09	4.45	Υ ·	Υ ?	33.14	34.02	060
22556		∢ ⊲	I norax spine fusion	24.42	¥ 4	∀	12.78	14.27	45. 64 45. 74	A Z	∀	41.54	39.24	060
22585		< ∢	Additional spinal fusion	5.52	Z Z	Z Z	2.02	2.61	1.25	Z Z	Z Z	8.79	9.38	ZZZ
		⋖	Spine & skull spinal fusion	21.48	A N	ΥZ	12.77	13.21	4.78	ΥZ	AN	39.03	39.47	060
22595		∢•	Neck spinal fusion	20.36	Υ Z	Y S	12.29	12.73	4.40	¥:	Y :	37.05	37.49	060
22600		∢ <	Neck spine fusion	17.12	Υ	∀	11.00	11.17	3.72	₹ ₹	Υ S	31.84	32.01	060
22612		(∢	Limbar spine fusion	22.50	ζ 4 2 Z	ζ	12.63	13.83	3.32 4.46	ζ ζ Z Z	ζ	39.57	40.79	060
		< <	Spine fusion, extra segment	6.43	Z Z	Z Z	2.42	3.13	1.38	ΥZ	Z Z	10.23	10.94	ZZZ
		⋖	Lumbar spine fusion	21.81	A Z	A A	12.31	13.31	4.72	A A	A A	38.84	39.84	060
22632		⋖ ·	Spine fusion, extra segment	5.22	₹ Z	Y:	1.95	2.49	1.16	Y :	Y :	8.33	8.87	222
22800		∢ <	Fusion of spine	19.22	Y S	Y Z	10.91	12.34	3.75	¥ ž	Y S	33.88	35.31	060
		۲ ۵	Fision of spine	37.00	ζ φ Ζ Ζ	(4 2 Z	17.76	21.51	0 0	(4 2 Z	ζ Δ Ζ Ζ	92.70	96.67	060
22808		< ∢	Fusion of spine	27.23	Z Z	Z Z	13.54	15.65	4.92	Z Z	Z Z	45.69	47.80	060
22810		⋖	Fusion of spine	31.22	A N	Ϋ́	14.63	17.47	5.13	ΥZ	Y Y	50.98	53.85	060
22812		< <	Fusion of spine	33.90	▼ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	Z Z	16.45	19.20	5.28	Z Z	Z Z	55.63	58.38	060
22819		< <	Kyphectomy, 1-z segments	39.12	ζ	ξ	18.97	19.83	7.65	K K	¥ 4 Z Z	50.65	20.03	060
		< <	Exploration of spinal fusion	11.07	Z Z	Z	6.95	7.72	2.29	¥ Y	Z	20.31	21.08	060
22840		⋖ ·	Insert spine fixation device	12.52	Y Z	YZ:	4.70	90.9	2.78	A :	¥.	20.00	21.36	ZZZ
22842		∢ <	Insert spine fixation device	12.56	Υ S	Y Z	4.72	6.07	2.74	¥ ž	¥ S	20.02	21.37	777
22844		(∢	Insert spine fixation device	16.42	ζ	(6.29	8.16	3.18	Z Z	¥ ₹	25.89	27.76	777
		< <	Insert spine fixation device	11.94	Y Z	A A	4.40	2.67	2.85	A A	A	19.19	20.46	ZZZ
22846		∢ ·	Insert spine fixation device	12.40	Y :	Y :	4.57	5.91	2.95	₹ Z	¥:	19.92	21.26	ZZZ
22847		∢ <	Insert spine fixation device	13.78	Υ	Y Z	5.17	6.57	2.99	¥ ž	Y S	21.94	23.34	77.
22849		< <	Reinsert spinal fixation	19.02	ζ 4 2 Z	(4 2 Z	06.0	11.30	68.6	(4 2 Z	X A	32.83	34.2	7 060
		< <	Remove spine fixation device	69.6	Y Z	Ą Z	6.26	6.82	2.04	ΥZ	Z Z	17.99	18.55	060
22851		⋖ ·	Apply spine prosth device	6.70	Y Z	Y S	2.50	3.15	1.49	A S	Y S	10.69	1.34	222
22852		∢ <	Remove spine fixation device	9.24	Υ S	∀ \$ 2 2	5.99	6.61	1.89	∀ \$ 2 2	Υ S	17.12	17.74	060
22900		< <	Remove abdominal wall lesion	6.09	ζ	ξ	3.47	3 29	0.76	K K	¥ 4 Z Z	10.32	10.14	060
		< <	Removal of calcium deposits	4.35	7.75	8.35	3.63	4.23	0.68	12.78	13.38	8.66	9.26	060
23020		⋖	Release shoulder joint	9.16	Ϋ́	A A	6.37	7.28	1.54	NA	Ą	17.07	17.98	060
23030			Drain shoulder lesion	3.42	6.26	7.12	2.38	2.78	0.57	10.25	11.1	6.37	6.77	010
23031	:	-	Drain snoulder bursa	4.74	0.44	2C.1	Z. 13	700.7	0.40	40.0	10.72	5.03	0.00	2
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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

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CPT ¹ HCPCS ²	Mod	Status	Description	Physician work RVUs ³	Fully im- plement- ed non- facility PE RVUs	Year 2007 transi- tional non-facil- ity PE RVUs	Fully implemented facility	Year 2007 transi- tional fa- cility PE RVUs	Mal-prac- tice RVUs	Fully implemented non-facility total	Year 2007 transi- tional non-facil- ity total	Fully implemented facility	Year 2007 transi- tional fa- cility total	Global
23035		۷ ۵	Drain shoulder bone lesion	8.96	A Z	A N	6.91	7.95	1.47	A A	A N	17.34	18.38	060
23044		< <	Exploratory shoulder surgery	7.41	Z Z	Z Z	5.48	6.21	1.24	Z Z	Z Z	14.13	14.86	060
		⋖	Biopsy shoulder tissues	2.27	2.93	2.60	1.71	1.64	0.20	5.40	2.07	4.18	4.11	010
23066		∢ ⊲	Biopsy shoulder tissues	4.15	7.67	7.69	3.56	3.88	0.63	12.45	12.47	8.34	8.66	090
23076		(∢	Removal of shoulder lesion	7.68	- 4	00.5 V	5.25	5.49	1.13	ţ Z	- A	14.06	14.30	060
		⋖	Remove tumor of shoulder	17.98	ΑN	A A	9.29	10.08	2.33	NA	A A	29.90	30.39	060
23100		∢ <	Biopsy of shoulder joint	6.02	Y S	Y S	5.04	5.51	40.6	Y S	Y Z	12.10	12.57	060
23101		∢ ⊲	Shoulder joint surgery	2.5/	4 4 Z Z	4 4 2 2	4.49 99.49	5.14 6.85	1 42	A A	4 4 2 2	15.69	10.67	060
		< <	Incision of collarbone joint	5.95	Ą Z	Y Y	4.55	5.43	0.99	Z A	Y V	11.49	12.37	060
23107			Explore treat shoulder joint	8.67	Y Z	Y S	6.14	7.09	1.49	Z S	Y S	16.30	17.25	060
23120		< ⊲	Partial removal, collar bone	01.7	₹	∀	0.38 0.00	12.0	1.73	¥	∀	13.77	18.30	060
23130		(∢	Remove shoulder bone, part	7.54	ζ ∢ Ζ Ζ	Z Z	5.98	6.86	1.3	Z Z	Z Z	14.82	15.70	060
		∢	Removal of bone lesion	6.94	ΑN	Ν	4.73	5.11	1.08	Ϋ́	N	12.75	13.13	060
23145			Removal of bone lesion	9.20	₹ Z	Y V	5.70	7.02	1.49	ΥZ	Y V	16.39	17.71	060
23146		< <	Removal of bone lesion	7.88	₹ Ş	Y S	5.86	6.81	 	Y S	¥ ž	15.09	16.04	060
23155			Removal of humerus lesion	10.63	₹ ₹ 2 Z	ζ <u> </u>	7.20	8.08	1.80	Z Z	₹ ₹ 2 Z	19.63	20.49	060
			Removal of humerus lesion	8.91	Ą Z	Z	6.28	7.12	1.50	Ϋ́	A A	16.69	17.53	060
23170		⋖	Remove collar bone lesion	7.03	A N	AN	5.01	2.78	1.12	A N	ΑN	13.16	13.93	060
		∢ <	Remove shoulder blade lesion	7.13	₹ Z	Z Z	4.90	5.95	2.5	Y S	Z Z	13.04	14.09	060
231/4		< ⊲	Remove numerus lesion	9.80	₹ ₹ ₹	¥ 4 Z Z	6.15	8.07	1.00	₹ ₹	4 4 2 2	17.19	18.52	060
23182			Remove shoulder blade lesion	8.38	Z Z	Z Z	6.80	8.13	1.37	Z Z	Z Z	16.55	17.88	060
23184			Remove humerus lesion	6.67	A'N	Ν	7.41	8.86	1.63	N A	Ν	18.71	20.16	060
23190		< <	Partial removal of scapula	7.29	₹ \$	Z Z	5.32	5.97	1.17	Z Z	Z Z	13.78	14.43	060
:		< ⊲	Removal of collar hone	12.60	ζ	ξ	7.41	8 42	1.70	₹ ₹ 2 Z	ξ	10.01	20.04	060
23210			Removal of shoulder blade	13.07	Z Z	Z Z	8.09	8.79	2.02	Z Z	Z Z	23.18	23.88	060
23220		∢ .	Partial removal of humerus	15.26	₹ Z	Y S	8.92	10.37	2.48	₹ Z	Y S	26.66	28.11	060
23221			Partial removal of humerus	18.31 25.36	₹ ₹	Y Z	6.48	10.43	3.05	Z Z	Y Z	27.84	31.79	060
23330		< <	Remove shoulder foreign body	1.85	3.34	3.60	1.51	1.80	0.24	5.43	5.69	3.60	3.89	010
:		⋖	Remove shoulder foreign body	7.43	A'N	N A	2.77	6.55	1.27	N A	A A	14.47	15.25	060
23332		< •	Remove shoulder foreign body	12.14	AN 0	Ψ.	7.85	8.98	2.02	AN O	A I	22.01	23.14	060
23350		∢ ⊲	Injection for shoulder x-ray	0 4 1- 00	Z.83	0.3 NA	11.05	10.34	0.00	3.89 VA	4.37 NA	32 14	33.55	000
23397		(∢	Muscle transfers	16.53	ζ ∢ Ζ Ζ	Z Z	9.49	10.92	2.73	Z Z	Z Z	28.75	30.18	060
•		⋖	Fixation of shoulder blade	13.64	A N	Y Y	8.38	6.67	2.29	N A	A A	24.31	25.60	060
23405		< •	Incision of tendon & muscle	8.36	Ψ.	¥ :	5.85	6.67	1.45	Υ :	¥ :	15.66	16.48	060
23406		∢ ⊲	Incise tendon(s) & muscle(s)	10.83	A Z	∀	6.80	76.7	1.87	A Z	4 4 Z Z	19.50	20.67	060
23412			Repair rotator cuff, chronic	13.47	. «	- X	. 8 . 8 . 9	9.45	2.3	Z	. X	23.82	25.23	060
			Release of shoulder ligament	10.02	Ϋ́Z	Z	6.48	7.63	1.73	Z Z	Z Z	18.23	19.38	060
23420		⋖	Repair of shoulder	14.65	A N	ΑN	9.58	10.55	2.31	Y Y	AN A	26.54	27.51	060
23430		⋖ <	Repair biceps tendon	9.97	A S	 Z 2	6.66	7.76	1.73	Z Z	Z Z	18.36	19.46	060
23450			Repair shoulder capsule	13.50	۷ کر کا کا	ζ 4	8 00	20.7	20.5	_ ζ Ζ Ζ Ζ	ζ 4	23.84	25.23	060
23455			Repair shoulder capsule	14.47	Z Z	Z Z	8.41	96.6	2.49	Z Z	Z Y	25.37	26.92	060
-	.]						

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

ADD	ADDENDOM B.—PELATIVE		VALUE OINIIS (NVOS)	אטוו אייהטיאוו טפו אופר טיוא			ت آ	,	ם האטוטחואן שאוואוואוחם וחס			7007	OOMINOLE	כ כ
CPT 1 HCPCS 2	Mod	Status	Description	Physician work RVUs ³	Fully im- plement- ed non- facility PE RVUs	Year 2007 transi- tional non-facil- ity PE RVUs	Fully implemented facility	Year 2007 transi- tional fa- cility PE RVUs	Mal-prac- tice RVUs	Fully implemented nonfacility total	Year 2007 transi- tional non-facil- ity total	Fully implemented facility	Year 2007 transi- tional fa- cility total	Global
23460 23462		44	Repair shoulder capsule	15.59 15.52	A A	A A	9.17	10.84	2.66	Z Z A A	Z Z A A	27.42 27.01	29.09	060
23465		۷ ۵	Repair shoulder capsule	16.07	Z Z	Z Z	9.40	10.76	2.76	A A	Z Z	28.23	29.59	060
23470		∶∢ •	Reconstruct shoulder joint	17.66	Y Z	4 2	66.6	11.72	2.98	Z Z	Z	30.63	32.36	060
23472		۷ ۷	Reconstruct shoulder joint	11.34	Y Y	₹ ₹ Z Z	7.21	13.84	3.66	Z Z	ς ς Z Z	20.49	23.89	060 060
		∢.	Revision of collar bone	13.71	₹ Z	Y :	8.14	9.48	2.33	¥ :	Y Z	24.18	25.52	060
23490 23491		۷ ۷	Reinforce clavicle	11.96	A A	Δ Z	6.76 8.69	8.23 10.23	1.47	Z Z	Z Z	20.19	27.00	060 060
23500		∢ ◊	Treat clavicle fracture	2.08	2.61	2.81	2.68	2.57	0.30	4.99 8.26	5.19	5.06	4.95	060
23515		(∢	Treat clavicle fracture	7.40	S Z	Z Z	5.48	6.30	1.28	NA NA	S Z	14.16	14.98	060
23520		∢ <	Treat clavicle dislocation	2.16	2.60	2.80	2.67	2.73	0.34	5.10	5.30	5.17	5.23	060
23530		< <	Treat clavicle dislocation	7.30	4.4 C A N	5.5 V A	5.18	5.76	1.20	0.50 NA	0.20 VA	13.68	14.26	060
		∢.	Treat clavicle dislocation	8.00	A S	A S	5.97	6.74	1.38	Y Y	AN I	15.35	16.12	060
23540		∢ <	Treat clavicle dislocation	2.23	2.59	2.80	2.66	2.44	0.29	5.11	5.32	5.18	4.96	060
23550		< <	Treat clavicle dislocation	7.41	S N	0.4 V A	5.43	6.15	1.25	S N	08. N	14.09	14.81	060
		⋖	Treat clavicle dislocation	8.62	N A	A N	6.12	7.04	1.46	A N	AN	16.20	17.12	060
23570		∢ ⊲	Treat shoulder blade fx	2.23	2.76	2.96	2.90	2.90	0.36	5.35	5.55	5.49	5.49	060
23585		(∢	Treat scapula fracture	9.07	e AN	1, Z	6.38	7.34	1.54	0.93	8.58 AN	16.99	17.95	060
		< <	Treat humerus fracture	2.93	4.03	4.43	3.61	3.57	0.48	7.44	7.84	7.02	6.98	060
		< <	Treat humerus fracture	4.86	5.34	5.96	4.55	4.98	0.84	11.04	11.66	10.25	10.68	060
23615		∢ ∢	Treat humerus fracture	21.60	₹ Z Z	ξ Z Z Z	11.29	13.46	3.69	ξ Z Z	ζ ζ Z Z	36.58	38.75	060
		⋖	Treat humerus fracture	2.40	3.38	3.56	3.11	3.02	0.40	6.18	98.9	5.91	5.82	060
23625		∢ <	Treat humerus fracture	3.92	4.37	4.81	3.85	4.18	0.67	8.96	9.40	8.44	8.77	060
23650		< <	Treat shoulder dislocation	3.38	3.24	3.65	2.77	2.77	0:30	6.92	7.33	6.45	6.45	060
		⋖ ·	Treat shoulder dislocation	4.56	¥:	Y Y	4.11	4.16	0.69	Y :	¥.	9.36	9.41	060
•		∢ ⊲	Treat dislocation/fracture	7.48	AN 4	AN R	5.52	6.18	1.29	9 94	10.38	14.29	14.95	060
23670		< <	Treat dislocation/fracture	7.95	¥ X	N A	5.75	6.58	1.36	N A	N A A	15.06	15.89	060
23675		∢ •	dislocation/fracture	6.04	90.9	6.65	5.08	5.66	1.0	13.11	13.70	12.13	12.71	060
23700		< <	Fixation of shoulder	2.52	▼ Z Z	Z Z	1.88	2.11	c, 7.	₹ ₹ Z Z	¥ ¥ Z Z	8.84 4.84	5.07	010
23800		< -	Fusion of shoulder joint	14.50	¥ Z	Y Y	7.41	9.68	2.35	Y Z	Y Z	24.26	26.53	060
23802		∢ <	Fusion of shoulder joint	18.07	Υ < Ζ 2	Z Z	10.76	10.34	2.70	¥ ž	Y S	31.53	31.11	060
23920		< <	Amputation at shoulder joint	15.95	¥ ¥	ζ Z	9.37	9.81	2.46	Z Z	Z Z	27.78	28.22	060
		⋖	Amputation follow-up surgery	5.54	N A	N	4.80	5.05	0.78	A A	A A	11.12	11.34	060
23930		∢ <	Drainage of arm lesion	2.94	4.97	6.00	1.97	2.23	0.43	8.34	9.37	5.34	5.60	010
23935		< <	Drain arm/elbow bone lesion	6.20	05.4 A A	2.5 AN	5.04	5.71	1.05) NA	96. N	12.29	12.96	060
24000		⋖	Exploratory elbow surgery	5.93	N A	N A	4.69	5.25	0.97	₹ Z	N A	11.59	12.15	060
24006		< •	Release elbow joint	9.54	A C	Z Z	6.53	7.46	1.50	N C	N N	17.57	18.50	000
24065		∢ ∢	Biopsy arm/elbow soft tissue Rionsy arm/elbow soft tissue	2.08	4.12 8.25	3.45 8.78	– 8 8 8 8 8	8/.1	0.80 0.80	14.25	5.70 14.78	4-1-4	40.4 10.08	060 0
24075		. ∢	Remove arm/elbow lesion	3.91	7.16	7.32	3.24	3.37	0.56	11.63	11.79	7.71	7.84	060
24076		⋖	Remove arm/elbow lesion	6.29	A A	NA	4.51	4.78	0.95	A V	A A	11.75	12.02	060
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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

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CPT 1 HCPCS 2	Mod	Status	Description	Physician work RVUs ³	Fully implemented nonfacility PERVUs	Year 2007 transi- tional non-facil- ity PE RVUs	Fully implemented facility	Year 2007 transi- tional fa- cility PE RVUs	Mal-prac- tice RVUs	Fully implemented nonfacility	Year 2007 transi- tional non-facil- ity total	Fully implemented facility	Year 2007 transi- tional fa- cility total	Global
24077		∢	Remove tumor of arm/elbow	11.86	NA	NA	6.82	7.53	1.72	NA	NA	20.40	21.11	060
24100		∢ •	Biopsy elbow joint lining	4.92	Υ S	¥ ż	4.19	4.45	0.85	¥ ż	¥ ż	9.6	10.22	060
24101		∢ ⊲	Explore/treat elbow joint	0 21.0 80.0	4 Φ	¥	9.4 8.00	5.71	50.5	₹ 4 Z Z	₹ ₹	12.13	12.86 17.99	060
24105		< ∢	Removal of elbow bursa	3.60	Y Z	A A	3.96	4.29	0.61	Υ Υ	¥ Z	8.17	8.50	060
		4	Remove humerus lesion	7.38	A A	A A	5.55	6.40	1.28	Y Y	A N	14.21	15.06	060
24115		∢ •	Remove/graft bone lesion	9.95	Y :	¥:	6.68	7.09	1.67	Υ ?	¥:	18.27	18.68	060
24116		∢	Remove/graft bone lesion	12.03	∀	∀	7.50	8.70	- K.	4 Z	Z Z	12 86 21	13.48	060
24125		< ∢	Remove/graft bone lesion	7.94	Z Z	Z Z	5.90	6.11	1.06	Z Z	Z Z	14.90	15.11	060
		4	Remove/graft bone lesion	8.45	N A	A	60.9	08.9	1.16	A N	A A	15.67	16.38	060
24130		۷,	Removal of head of radius	6.24	Y :	Y :	5.02	5.79	40.1	Ψ.	Υ ?	12.30	13.07	060
24134		∢ <	Removal of arm bone lesion	10.02	Κ < Ζ Ζ	A S	7.35	8.50	1.64	▼ < Z	₹ S	19.01	20.16	060
24138		(⊲	Remove albow hone lesion	8.52 22.80	ζ 4	(d		7.50	28.	(d	ζ	16.14	17.06	060
		< ∢	Partial removal of arm bone	9.35	Z Z	ΥZ	7.07	8.62	1.51	Ą Z	A Z	17.93	19.48	060
		4	Partial removal of radius	7.63	A A	₹ Z	6.19	7.61	1.25	₹ Z	ΥZ	15.07	16.49	060
		⋖	Partial removal of elbow	7.59	A A	A A	6.79	8.16	1.30	Y Y	Y V	15.68	17.05	060
		4	Radical resection of elbow	15.80	A A	Y Z	10.66	11.40	2.34	Ϋ́Z	¥ Z	28.80	29.54	060
24150		∢ •	Extensive humerus surgery	13.61	Y :	Y :	8.37	9.61	2.32	Y :	Y :	24.30	25.54	060
24151		∢	Extensive numerus surgery	15.98	4 4 2 2	¥ Z	9.58	11.05	2.59 - 48	∀	Z Z	28.15 17.81	29.62	060
		(∢	Extensive radius surgery	11.64	Z Z	(4 2 Z	6.32	27.5	0.74	(4 2 Z	(4 2 Z	18.70	18 15	060
24155		< ∢	Removal of elbow joint	11.89	Z Z	ξ Z	7.46	8.18	1.92	Z Z	Y Z	21.27	21.99	060
		⋖	Remove elbow joint implant	7.82	A A	ΥZ	5.73	6.62	1.30	ΥZ	ΥZ	14.85	15.74	060
24164		۷.	Remove radius head implant	6.28	Z Z	AN C	4.84	5.55	1.03	Y Z	Ϋ́	12.15	12.86	060
24200		∢ <	Removal of arm foreign body	1.76	2.75	3.25	1.36	1.56	0.20	4.71	5.21	3.32	3.52	010
24220		۲ ۷	nemoval of arm foreign body	5.55 1.31	2.73	3.41	0.45	0.40	0.08	2.5	4.62	0.93 1.84	1.83	000
		⋖	Manipulate elbow w/anesth	3.74	A A	₹ Z	5.10	5.57	0.65	₹ Z	٧Z	9.49	96.6	060
24301		Α,	Muscle/tendon transfer	10.18	Y Z	₹ Z	6.72	7.83	1.66	Y Z	Y Z	18.56	19.67	060
24305		∢ <	Arm tendon lengthening	7.44	Κ < Ζ Ζ	A S	5.56	6.44	1.15	Ψ <u> </u>	Υ S	14.15	15.03	060
24320		ζ 4	Repair of arm tendon	10.66	X A	(4 2 Z	6.97	7.41	0.30	(4 2 Z	(19.36	19.80	060
		. ⋖	Revision of arm muscles	9.59	Z Z	ΥZ	6.52	7.56	1.60	Ą Z	A Z	17.71	18.75	060
		⋖	Revision of arm muscles	10.75	A A	A A	6.40	8.13	1.77	Y Y	ΥZ	18.92	20.65	060
24332		⋖ •	Tenolysis, triceps	7.69	Υ S	¥ ž	5.69	6.52	1.23	₹ \$ Z 2	¥ S	14.61	15.44	060
24340		< ⊲	Repair arm tendon/muscle	0.70	Z Z	ζ Δ Ζ Ζ	5.69 7.40	7.7		₹ 4 2 2	(d	17.90	18.31	060
24342		< ∢	Repair of ruptured tendon	10.66	Z Z	(∢ Z Z	6.97	8.15	185	(∢ Z Z	(∢ Z Z	19.48	20.66	060
		A	Repr elbow lat ligmnt w/tiss	8.89	AN	ΥZ	06.9	7.85	1.43	Ϋ́Z	AN	17.22	18.17	060
24344		⋖ ·	Reconstruct elbow lat ligmnt	14.85	Y :	Υ Z	9.86	11.13	2.36	₹ Z	Ž:	27.07	28.34	060
		⋖ •	Repr elbw med ligmnt w/tissu	8.89	Υ S	Υ S	6.85	7.74	4.6	Υ S	Υ S	17.18	18.07	060
24346		∢ ⊲	Reconstruct elbow med ligmint	7.24 7.24	4 Δ 2 Ζ	A N	9.87	00.11	2.33	4 4 2 2	Z Z	27.U5 10.92	11.51	060
24351		(∢	Repair of tennis elbow	5.90	ζ ζ Ζ	(4 2 Z	4.92	5.69	1.02	(4 2 Z	Z Z	11.84	12.61	060
		. ⋖	Repair of tennis elbow	6.42	Z Z	ΥZ	5.13	5.93	1.10	Ą Z	Ą Z	12.65	13.45	060
		4	Repair of tennis elbow	6.47	A A	Y Y	5.16	5.95	1.07	ΥZ	Ą Z	12.70	13.46	060
24356		⋖ •	Revision of tennis elbow	6.67	Υ S	¥ ž	5.23	90.9	1.1	₹ \$ Z 2	¥ ž	13.01	13.84	060
24360		∢ <	Reconstruct elbow joint	12.44	4 4 2 2	4 4 2 2	7.82	9.08	2.03	₹ ₹	¥ \$ 2	22.31	23.57	060
24362		(∢	Reconstruct elbow joint	15.09	ζ ζ Z Z	Z Z	9.11	9.83	2.60	ζ	Z Z	26.80	27.52	060

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

ADE	FINDOW	ADDENDOM B.—DELATIVE	VALUE UNITS (NVUS)	AND DELATED INFORMATION OSED IN DETERMINING MEDICARE LAYMENTS FOR	ליאירטראוו)))	ت ا آ	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	ואור ניייויי	יייוע - שט	- 0 - 0 - 0 - 0 - 0 - 0 - 0 - 0 - 0 - 0	1		:
CPT 1 HCPCS 2	Mod	Status	Description	Physician work RVUs ³	Fully im- plement- ed non- facility PE RVUs	Year 2007 transi- tional non-facil- ity PE RVUs	Fully implemented facility	Year 2007 transi- tional fa- cility PE RVUs	Mal-prac- tice RVUs	Fully im- plement- ed non- facility total	Year 2007 transi- tional non-facil- ity total	Fully implemented facility	Year 2007 transi- tional fa- cility total	Global
24363		۷ ۵	Replace elbow joint	22.39	Z Z	Z Z	12.69	13.49	3.01	4 4 Z Z	4 4 Z Z	38.09	38.89	060
		< <	Reconstruct head of radius	9.18	¥ X	Z Z	6.19	7.22	1.52	Z Z	Y Y	16.89	17.92	060
24400		∢ <	Revision of humerus	11.10	₹ Z	Y S	7.48	8.53	1.92	Y S	Y Z	20.50	21.55	060
24420		∢ ∢	Revision of humerus	13.48	▼	Z Z	8.65	10.09	2.5/	X X	¥ 4 Z Z	24.30	25.74	060
		< <		14.99	¥ ¥	Z Y	8.73	9.51	2.21	A A	Y Y	25.93	26.71	060
24435		۷,	Repair humerus with graft	14.64	¥ ?	Z Z	9.68	10.60	2.27	¥:	Z Z	26.59	27.51	060
24495		∢ ∢	Revision of elbow joint	8.73	Ψ Ψ Z Z	ξ ς Z Z	6.68	7.38	1.48	ζ ζ Z Z	4 4 2 2	16.09	17.66	060
		Α.	Reinforce humerus	12.08	¥ X	Z	7.59	8.87	2.06	N A	Z A	21.73	23.01	060
24500		⋖ •	Treat humerus fracture	3.21	4.38	4.74	3.75	3.71	0.50	8.09	8.45	7.46	7.42	060
24515		< <	Treat humerus fracture	11.87	0.78 V V	4.0 4.0 4.0 4.0	7.94	9.70	2.02	28. SA	0.40 NA	21.83	22.93	060
		. ∢	humerus fracture	11.99	Y V	Y Y	7.56	8.75	2.02	A A	A A	21.57	22.76	060
24530		⋖ <	Treat humerus fracture	3.49	4.67	2.08	3.94	4.02	0.57	8.73	9.14	8.00	8.08	060
		∢ <	Treat himerus fracture	0.80	0.73 NA	8C:/	7.17	0.42	1.18	14.77 VIV	13.6Z	18.81	10 51	060
24545		< <	Treat humerus fracture	10.80	Υ Υ	Z Z	7.10	8.13		Z Z	Z Z	19.72	20.75	060
		⋖	Treat humerus fracture	15.91	A V	N A	9.12	10.79	2.73	A A	N A	27.76	29.43	060
24560		⋖・	Treat humerus fracture	2.80	4.00	4.37	3.33	3.23	0.44	7.24	7.61	6.57	6.47	060
		∢ <	humerus fracture	5.55	5.76	6.41	4.88	5.38	0.93	12.24	12.89	11.36	11.86	060
24575		∢	Treat humerus fracture	10.94	Z Z	Z Z	08.90	, 83 10 10	 08. 1.	Z Z	Y Z	19.97	20.93	060
24576		< ⋖	humerus fracture	2.86	4.38	4.67	3.68	3.71	0.46	7.70	7.99	7.00	7.03	060
		⋖	humerus fracture	2.78	5.95	6.70	5.01	5.65	0.95	12.68	13.43	11.74	12.38	060
24579		∢ •	Treat humerus fracture	11.88	Y Z	Y :	7.53	8.53	2.02	Y ?	Y :	21.43	22.43	060
24582		∢	Treat elbow fracture	9.79	Z Z	Z Z	8.07	10.74	2.64	A Z	Z Z	19.34	20.14	060
24587		< <	Treat elbow fracture	15.56	A Z	Z	9.23	10.60	2.52	Z Z	Z Z	27.31	28.68	060
24600		∢.	Treat elbow dislocation	4.22	3.82	4.61	3.24	3.44	0.50	8.54	9.33	7.96	8.16	060
24605		۷ ۵	Treat elbow dislocation	5.41	A Z	Y Z	4.88 6.46	5.26	0.89	A N	Y Z	11.18	11.56	060
24620		< ∢	Treat elbow fracture	6.97	Z Z	Z Z	5.38	6.05	1.07	Υ Υ	Z Z	13.42	14.09	060
24635		۷.	Treat elbow fracture	13.47	¥.	Y !	10.05	13.08	2.28	A S	A S	25.80	28.83	060
24640		∢ <	Treat elbow dislocation	1.20	1.46	1.75	0.79	0.80	0.12	2.78	3.07	2.11	2.12	010
24655		< <	Treat radius fracture	4.39	5.13	5.76	4.35	4.69	0.70	10.22	10.85	9.44	9.78	060
24665		⋖	Treat radius fracture	8.13	A N	N A	6.23	7.21	1.41	Υ V	N A	15.77	16.75	060
24666		< <	Treat radius fracture	9.66	A S	A S	9.68	7.74	1.62	A S	A C	17.96	19.02	060
24675		∢ ∢	Treat ulhar fracture	47.7	3.68 7.74	10.4.0	3.1- 4 44	3.09 4.85	0.4	10.76	0.90	00.0	10.37	060
		< ∢	Treat ulnar fracture	8.85	NA V	N A A	6.17	7.20	1.52	N N	N A	16.54	17.57	060
24800		⋖ ·	Fusion of elbow joint	11.18	Y S	Y S	7.51	8.46	1.63	Y :	Y S	20.32	21.27	060
24802		⋖ <	Fusion/graft of elbow joint	14.09	Y S	Y S	8.42	9.91	2.37	▼	Y Z	24.88	26.37	060
24920		(∢	Amputation of upper arm	9.95	Υ Υ	ζ ζ Ζ	92.9	6.79		(4 2 Z	ζ	17.84	18.35	060
		< <	Amputation follow-up surgery	7.12	Y V	Y Y	4.92	5.81	1.14	A A	A A	13.18	14.07	060
24930		۷.	Amputation follow-up surgery	10.65	¥ ?	Z Z	5.88	6.92	1.67	¥ ?	Z Z	18.20	19.24	060
24931		∢ <	Amputate upper arm & Implant	13.24	Y S	Υ S	8.08	6.33	1.89	₹ 2 2	Υ S	23.21	21.46	060
25000		τ <	Incision of tendon sheath	3.37	¥ ₹ 2 Z	ζ <u> </u>	4.99	6.42	0.55	₹	Z Z	8.91	10.34	060
FOOT	7000		Signal A Locitor A modition A Horizonto Can VI	tdoi: IIV	7	- oldooilaa	00 4 1 0,000							

ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

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CPT 1 HCPCS 2	Mod	Status	Description	Physician work RVUs ³	Fully implemented non-facility PE	Year 2007 transi- tional non-facil- ity PE RVUs	Fully implemented facility	Year 2007 transi- tional fa- cility PE RVUs	Mal-prac- tice RVUs	Fully im- plement- ed non- facility total	Year 2007 transi- tional non-facil- ity total	Fully implemented facility	Year 2007 transi- tional fa- cility total	Global
25001		4	Incise flexor carpi radialis	3.62	AN	NA	3.79	4.13	0.55	AN	AN	7.96	8.30	060
25020			Decompress forearm 1 space		₹ Z	Υ Z	6.81	8.90	0.93	₹ Z	∢ Z	13.65	15.74	060
25023			Decompress forearm 1 space		₹ S	Ψ < Z Z	11.31	14.06	2.03	∀	∀ < Z Z	26.94	29.69	060
25024			Decompress forearm 2 spaces		ζ Δ Ζ Ζ	(d	- 00 8	04.7	5. 6	ζ Δ Ζ Ζ	(d	28.41	20.50	060
			Drainage of forearm lesion		∑ Z	(4	6.19	7.68	0.81	Σ Z	(4	12.24	13.73	060
			Drainage of forearm bursa		Ϋ́Z	₹ Z	5.40	7.31	0.63	Ϋ́	₹ Z	10.16	12.07	060
25035			Treat forearm bone lesion		AN A	A A	8.75	12.41	1.24	ΑN	Y Y	17.46	21.12	060
25040			Explore/treat wrist joint		AN,	A C	5.80	6.94	1.15	AN (Ψ Z Z	14.30	15.44	060
25065			Biggs foreign soft tissues		4.23 4.73	3.48	26. 7	1.91	0.15	6.37	5.62	4.06	4.05	010
			Bemoval forearm lesion subcu		₹ 4 2 Z	(d	0.39	0.00	0.64	₹ 4 2 2	(d	9.13	9 93	060
25076			Removal forearm lesion deep		Z Z	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	683	8.89	0.74	Z Z	Z Z	12.48	14.54	060
			Remove tumor, forearm/wrist		Ϋ́	₹ Z	8.82	11.30	1.42	ΑN	Ϋ́Z	20.05	22.53	060
25085			Incision of wrist capsule		A N	Y Y	5.36	6.70	0.85	Y Y	A A	11.70	13.04	060
25100			Biopsy of wrist joint		Y Z	Y Z	4.21	5.05	0.59	Υ Z	∢ Z	8.69	9.50	060
25101			Explore/treat wrist joint		¥ :	Y :	4.75	5.62	0.75	₹ Z	Y :	10.18	11.05	060
25105			Remove wrist joint lining		Y :	Ψ.	5.73	6.92	0.92	Ψ.	Y :	12.49	13.68	060
25107			Remove wrist joint cartilage		Υ S	Ψ 2 2	40.7	8.03	0.99	Z Z	∀	15.45	16.44	060
25110			Domove wrist tondon lesion		Υ Υ	Υ Υ	2.23	10.0	0.02	₹ 5	₹ < Z Z	9.76	11.14	060
			Deremove wrist tendon lesion		ζ <u> </u>	(< Z	2.45		0.33	(< Z	(< Z	08.7	0.40	060
25115			Remove wrist/forearm lesion		(4 2 Z	(4 2 Z	10.05	13.07	1.7	(4 2 Z	(4 2 Z	21.17	24 19	060
			Remove wrist/forearm lesion		Z Z	Z Z	8.95	12.12		Z Z	Z	17.34	20.51	060
25118			Excise wrist tendon sheath		A A	ΥZ	4.56	5.46	0.68	Ϋ́	ΥZ	9.60	10.50	060
25119			Partial removal of ulna		Y Z	₹ Z	5.77	7.16	0.96	Y Z	∢ Z	12.76	14.15	060
25120			Removal of forearm lesion		₹ Z	Υ S	7.82	11.05	1.00	Υ S	Υ S	14.91	18.14	060
25125			Domovo/graft forgarm lesion		¥	4 S	8.03	11.82	1.06	₹ < Z Z	₹ < Z Z	17.16	20.35	060
25130			Removal of wrist lesion		Ç ∢ Z Z	Z Z	5.13	6.11	0.80	ζ	Z Z	11.18	12.16	060
			Remove & graft wrist lesion		A N	₹ Z	6.02	7.15	1.02	Ϋ́	Ϋ́Z	13.92	15.05	060
			Remove & graft wrist lesion		AN A	A N	5.44	6.32	1.03	ΑN	Y Y	12.43	13.31	060
25145			Remove forearm bone lesion		Y :	Y :	8.00	11.07	1.01	Ψ.	Y :	15.37	18.44	060
25150			Partial removal of ulna		Υ S	Ψ 2 2	6.27	7.74	1.14	Z Z	₹ \$ Z Z	14.61	16.08	060
			Extensive forearm surgery		(4 2 Z	(d	10.33	13 90	1.10	₹	(d	73.30	27.03	060
25210			Removal of wrist bone		∑ Z	(4	4.0	6.47	0.88	ΣZ	(4 (2 2	12.26	13.29	060
			Removal of wrist bones		A A	ΥZ	6.72	8.27	1.19	ΑN	₹ Z	15.85	17.40	060
25230			Partial removal of radius		Y V	ΥZ	4.88	5.84	0.79	ΥZ	₹ Z	10.89	11.85	060
25240		∢ •	Partial removal of ulna	5.16	A S	AN (5.19	6.53	0.81	AN.	ΨV.	11.16	12.50	060
25246		∢ <	Injection for wrist x-ray	1.45	2.80	3.29	15.0	0.49	0.09	4.34	4.83 5.83	2.05	2.03	000
		< <	Removel of wrist prosthesis	. o.	ζ φ Ζ Ζ	(4 2 Z	0.50 0.50	0.03	10.72	₹ ₹	(12.33	13.50	060
2525		(∢	Removal of wrist prosthesis	60.0 60.0	ζ 4 2 Z	(4 2 Z	6.59	2.90	1.0	(4 2 Z	(4 2 Z	17.47	18 48	060
		< ∢	Manipulate wrist w/anesthes	3.74	A N	ΥZ	5.06	5.57	0.62	Z Z	ΥZ	9.42	9.93	060
		⋖	Repair forearm tendon/muscle	7.79	ΑN	ΥZ	9.08	12.28	1.19	Ϋ́	ΥZ	18.06	21.26	060
25263		∢ ·	Repair forearm tendon/muscle	7.81	₹ :	Υ :	8.83	12.18	1.18	₹ Z	₹ Z	17.82	21.17	060
25265		∢ <	Repair forearm tendon/muscle	9.87	∀	A Z	9.85	13.23	1.47	Z Z	A Z	21.19	24.57	060
25272		(⊲	Benair forearm tendon/muscle	7.03	(4 2 Z	(d	2, x	11.69	5.5	(d	(d	16.39	19.83	060
25274		< <	Repair forearm tendon/muscle	8.74	Υ Z	Z Z	90.6	12.51	1.36	Z Z	Z Z	19.16	22.61	060
25275		4	Repair forearm tendon sheath	8.74	A A	A N	6.38	7.30	1.31	Ϋ́	ΥZ	16.43	17.35	060
25280		⋖	Revise wrist/forearm tendon	7.21	NA	NA NA	8.33	11.59	1.08	NA	NA	16.62	19.88	060
	-				•		0	-						

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

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CPT 1 HCPCS 2	Mod	Status	Description	Physician work RVUs ³	Fully implemented non-facility PE	Year 2007 transi- tional non-facil- ity PE RVUs	Fully implemented facility	Year 2007 transi- tional fa- cility PE RVUs	Mal-prac- tice RVUs	Fully implemented nonfacility	Year 2007 transi- tional non-facil- ity total	Fully implemented facility	Year 2007 transi- tional fa- cility total	Global
25290		4 4	Incise wrist/forearm tendon	5.28	Z Z A Z	N N AN	9.05	13.54	0.82	A N N	N N A A	15.15	19.64	060
		4	Fusion of tendons at wrist	8.79	A N	N A		8.12	1.26	A A	N	17.11	18.17	060
25301		∢ •	Fusion of tendons at wrist	8.39	Ψ.	¥ ż		7.71	1.29	Y ?	Υ S	16.29	17.39	060
25310		∢ ⊲	Transplant forearm tendon	8.19 9.19	₹ ¤	A Z		11.97	[2. F	∀	Z Z	18.08	23.88	060
25315		< ∢	Revise palsy hand tendon(s)	10.48	₹ Z Z	Z Z		13.29	1.58	Z Z	ξ Z	21.88	25.35	060
		< <	Revise palsy hand tendon(s)	12.67	₹ Z	A A		14.93	1.74	ΥN	Ϋ́Z	25.30	29.34	060
25320		۷.	Repair/revise wrist joint	12.28	₹ Z	Y :		11.12	1.61	Y :	Y S	24.09	25.01	060
25332		< <	Revise wrist joint	11.51	₹ Z	Υ S		8.80	1.83	Υ S	₹ Ş	20.93	22.14	060
		∢ ∢	Reconstruct ulba/radioulbar	13.16	4	Z Z		10.43	28.	A Z	A Z	28.13	23.51	060
25350		(∢	Revision of radius	8 89	Z Z	(4 2 Z		12.79	1.6	ζ 4 Ζ Ζ	ζ 4 Ζ Ζ	19.47	23.14	060
		< <	Revision of radius	10.33	Z Z	ΥZ		13.45	1.73	A N	Z Z	21.92	25.51	060
		V	Revision of ulna	8.54	Ą Z	NA		12.68	1.41	AN	A N	18.94	22.63	060
25365		⋖・	Revise radius & ulna	12.68	Y :	Y :		14.49	2.15	Y :	¥ :	25.71	29.32	060
25370		< •	Revise radius or ulna	13.82	Y :	Ϋ́		15.03	2.28	Υ :	Ϋ́ Z	27.86	31.13	060
253/5		< <	Revise radius & ulna	13.32	₹ ₹	₹ < Z Z		15.14	Z.Z0	4 < 2 2	¥ \$ 2	20.72	30.72	060
		(⊲	Shorten radius of unita	14.05	ζ Δ Ζ Ζ	(d		15.4 20.4	63	ζ Δ Ζ Ζ	ζ Δ Ζ Ζ	27.70	31.58	060
25392		(∢	Shorten radius & ulna	14.35	Z Z	(4 2 Z		14.91	2.10	ζ 4 Ζ Ζ	ζ ζ Ζ	28.04	31.36	060
		< <	Lengthen radius & ulna	16.33	A N	A N		16.45	2.76	A N	A N	31.99	35.54	060
		⋖	Repair carpal bone, shorten	10.63	AN	ΥZ		7.73	1.59	AN	AN	18.89	19.95	060
25400		⋖ -	Repair radius or ulna	11.08	₹ Z	Y Z		13.93	1.82	Ϋ́	₹ Z	22.91	26.83	060
25405		< •	Repair/graft radius or ulna	14.78	Y :	Ϋ́		15.92	5.35	Υ :	Ϋ́ Z	28.82	33.02	060
25415		∢ <	Repair radius & ulna	13.57	¥ S	A Z		15.12	2.17	Y Y	Ψ	26.55	30.86	060
25425		(∢	Repair/graft radius or ulna	13.49	Z Z	(4 2 Z		19.57	0.0	Z Z	(4 Z Z	29.48	35.14	060
		< <	Repair/graft radius & ulna	16.22	Z Z	A Z		15.52	2.54	A Z	¥ Z	31.03	34.28	060
25430		⋖	Vasc graft into carpal bone	9.49	AN	ΥZ		7.19	1.27	A A	A N	17.43	17.95	060
25431		⋖・	Repair nonunion carpal bone	10.67	Y :	Y :		8.10	1.90	Y :	¥:	19.70	20.67	060
25440		∢ <	Repair/graft wrist bone	10.48	₹ S	Υ <u> </u>		8.91	1.63	Υ < Ζ 2	Υ S	19.47	20.12	060
25442		(∢	Reconstruct wrist joint	10.89	Z Z	(4 2 Z		84.8	1.53	Z Z	Z Z	19.61	20.50	060
		< <	Reconstruct wrist joint	10.43	Z Z	ΥZ		8.24	1.37	A N	¥ Z	18.34	20.04	060
		⋖	Reconstruct wrist joint	11.19	A N	A N		8.67	1.71	AN	A A	20.41	21.57	060
25445		⋖・	Reconstruct wrist joint	9.68	₹ :	Y :		7.66	1.55	Y :	Ϋ́ Z	17.82	18.89	060
25446		< <	Wrist replacement	17.07	¥ ×	₹ ₹ ₹		38.11	2.47	4 4 Z Z	¥	29.22	30.92	060
25449		(∢	Remove wrist joint implant	14.71	Z Z	(4 2 Z		10.24	5.0	ζ	ζ	25.79	27.16	060
		< <	Revision of wrist joint	7.86	Ą Z	¥ X		9.47	1.36	Y Y	Υ Z	16.44	18.69	060
		⋖	Revision of wrist joint	9.48	A N	ΥZ		9.76	96.0	A A	A N	16.82	20.20	060
25490		⋖ ·	Reinforce radius	9.53	Y S	₹ Z		12.66	1.43	Y S	₹ Z	20.28	23.62	060
25491		< <	Reinforce ulna	9.95	₹ Ş	Z Z		13.27	1.60	Υ S	▼	21.12	24.82	060
		(⊲	Treat fracture of radius	2.45	60 6	3.51		2.75	0.35	50 9	6.3.1 1.0.1	7.65	5 55	060
25505		< <	Treat fracture of radius	5.20	5.78	6.37		5.31	0.90	11.88	12.47	11.03	11.41	060
25515		⋖	Treat fracture of radius	9.29	A N	A N		7.22	1.59	AN	A N	17.32	18.10	060
25520		⋖・	Treat fracture of radius	6.25	5.89	6.63		5.89	1.08	13.22	13.96	12.64	13.22	060
25525		∢ <	Treat fracture of radius	12.59	₹ Ş	Υ S		9.61	2 5	Υ S	Υ Z	23.10	24.32	060
25530		∢ ⊲	Treat fracture of ulpa	2.30	3 43	3.69		2.67	2 - S	7 YA	6 1 A	75.57	5.31	060
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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

7	AUDENDOM D.—TAELATIVE	֝֝֝֝֝֝֝֝֝֝֝֝ ב	ELATIVE VALUE CINIS (1100S) AND I	ורואן הוא					וראטוטוואו ג	-		,		ב
CPT 1 HCPCS 2	Mod	Status	Description	Physician work RVUs ³	Fully implemented non-facility PE	Year 2007 transi- tional non-facil- ity PE RVUs	Fully implemented facility	Year 2007 transi- tional fa- cility PE RVUs	Mal-practice RVUs	Fully implemented nonfacility total	Year 2007 transi- tional non-facil- ity total	Fully implemented facility	Year 2007 transi- tional fa- cility total	Global
25535 25545		44	Treat fracture of ulna	5.13 9.01	5.60 NA	5.92 NA	4.85	5.20	0.89	11.62 NA	11.94 NA	10.87	11.22	060
		⋖ <	fracture radius &	2.44	3.34	3.61	2.83	2.67	0.35	6.13	6.40	5.62	5.46	060
25574		∢ ∢	Treat fracture radius & ulna	7.37	0.88 NA	- V	6.34	7.00	1.21	24.3 NA	2.08 NA	14.92	15.58	060
		Α.	Treat fracture radius/ulna	11.92	A N	Z	8.65	9.32	1.81	N A	NA	22.38	23.05	060
25600		∢	Treat fracture radius/ulna	2.63 6.00	3.64	3.99	3.13	3.02	0.42	6.69	7.04	6.18	6.07	060
25611		< <	Treat fracture radius/ulna	9.13	NA NA	Į V	8.01	8.75	8.5	Y A	N A	18.48	19.22	060
25620		⋖ •	fracture radius/ulna	8.54	A C	Y Y	5.98	96.9	1.42	NA S	N N	15.94	16.92	060
25624		∢ ∢	Treat wrist bone fracture	2.61 4.52	3.85	6.12	3.31	3.16 4.98	0.41	10.80	11.40	9.95	10.26	060
		∶∢ •	wrist bone fracture	9.42	NA	Y S	7.02	7.64	1.37	A S	A S	17.81	18.43	060
25630	_	∢	Treat wrist bone fracture	2.88 2.88	3.77	7.07	3.20	3.01	0.45	10.43	10 92	6.53	6.34 45.0	060
25645		< <	Treat wrist bone fracture	7.24	S N	SS N	5.52	6.37	1.20	NA N	NA NA	13.96	14.81	060
25650		۷,	Treat wrist bone fracture	3.05	3.80	4.19	3.40	3.24	0.45	7.30	7.69	06.9	6.74	060
25651		∢ <	Pin ulnar styloid fracture	5.60	₹ \$ Z 2	Y S	5.04	5.39	0.86	▼	▼	11.50	11.85	060
25660		۷ ح	Treat wrist dislocation	4.75	₹ ₹ 2 Z	₹ ₹	4.42	6.79 4.65	0.58	Z Z	Z Z	9.75	96.6	060
		. ∢	Treat wrist dislocation	7.91	Υ Z	A A	5.70	6.68	1.28	Ą Z	Ϋ́Z	14.89	15.87	060
25671		∢ •	Pin radioulnar dislocation	6.24	NA.	Z Z	5.44	5.99	1.00	AN S	N S	12.68	13.23	060
250/5		∢ ⊲	Treat wrist dislocation	φ. 00.4 00.0	4.8Z	0.40 NA	90.4 20.0	26.52	1.02	0.10	4 Z	9.37	9.80	060
25680		< <	Treat wrist fracture	5.98	ZZZ	Z Z	4.29	4.64	0.78	Z Z	Z Z	11.05	11.40	060
25685		∢ •	Treat wrist fracture	9.89	Y S	Z Z	6.38	7.46	1.60	Z Z	A S	17.87	18.95	060
25690	•	∢ ∢	Treat wrist dislocation	5.49 8.33	A Z	4 4 2 2	5.76	5.33 5.83	- 0.88	Y Z	Z Z	15.55	16.46	060
25800		< <	Fusion of wrist joint	9.87	₹ Z	Z Z	7.15	8.63	1.57	Z Z	Z Z	18.59	20.07	060
25805		∢ <	Fusion/graft of wrist joint	11.50	Y S	Z Z	8.02	9.72	1.80	Z Z	¥ ż	21.32	23.02	060
25810		∢ ∢	Fusion/gran of wrist joint	7.44	¥ ¥	4 4 2 2	6.18	7.45	1.67	Y Y	¥ ¥	14.84	16.11	060
		< <	Fuse hand bones with graft	9.44	N A	A A	7.43	8.80	1.41	Y Y	A A	18.28	19.65	060
25830		⋖ •	Fusion, radioulnar jnt/ulna	10.61	Y S	Y S	10.30	13.41	1.55	Z Z	¥:	22.46	25.57	060
25900		∢ ∢	Amputation of forearm	9.30	Y Z	4 4 2 2	8.39	11.35	08.1 1.40	Y Y	Z Z	19.82	22.40	060
		< <	Amputation follow-up surgery	7.91	N N	A A	7.75	10.78	1.10	Y Y	A A	16.76	19.79	060
25909		∢ <	Amputation follow-up surgery	9.13	Z Z	Z Z	8.90	11.46	4.6	Y S	Y S	19.47	22.03	060
25920		< <	Amputate hand at wrist	8.85	X Z	Z Z	6.61	7.56	1.35	Z Z	Z Z	16.81	17.76	060
25922		∢.	Amputate hand at wrist	7.47	₹ Z	Y :	6.27	6.87	1.12	Y :	A :	14.86	15.46	060
25924	•	∢	Amputation follow-up surgery	8.63 9.4	A Z	₹ Z	6.58 5.1	7.73	1.32	Z Z	Z Z	16.53	17.68	060
25929		< <	Amputation follow-up surgery	7.64	₹ Z	ZZ	5.30	5.74	1.14	ζ ζ Ζ	(∢ Z Z	14.08	14.52	060
		∢.	Amputation follow-up surgery	7.86	NA	Y Y	8.38	10.71	1.15	NA	N A	17.39	19.72	060
26010		∢ <	Drainage of finger abscess	1.54	3.98	 8	1.49	1.60	0.18	5.70	6.90	3.21	3.32	010
26020		۲ ح	Drain hand tendon sheath	4.90	0.22 NA	0 Z	4.67	5.20	0.73	0.7 4.N	- A	10.30	10.83	060
		4	Drainage of palm bursa	4.93	A N	N A	4.38	4.94	0.76	A N	A V	10.07	10.63	060
26030		∢ <	Drainage of palm bursa(s)	6.10	Y Z	Y Z	4.90	5.53	0.95	Z Z	₹ S	11.92	12.55	060
26035		< <	Decompress fingers/hand	1.04	ξ ζ Ζ	Z Z	7.85	7.88	1.47	Z Z	Z Z	20.36	20.39	060
26037		٧	Decompress fingers/hand	7.42	NA	NA	5.41	6.11	1.13	N	A A	13.96	14.66	060
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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

704	ADDENDOM B.—CREATIVE	֡֟֝֝֟֝֟֝֝֟֝֝֟֝֝֟֝	VALUE (IN OS)	AND DECATED INFORMATION OSED IN				סוואוואיריז ייז	י שהאטוטשועו ג			7007	OOMINOLD	2
CPT 1 HCPCS 2	Mod	Status	Description	Physician work RVUs ³	Fully im- plement- ed non- facility PE RVUs	Year 2007 transi- tional non-facil- ity PE RVUs	Fully implemented facility	Year 2007 transi- tional fa- cility PE RVUs	Mal-prac- tice RVUs	Fully implemented nonfacility	Year 2007 transi- tional non-facil- ity total	Fully implemented facility	Year 2007 transi- tional fa- cility total	Global
26040		۷ ۷	Release palm contractureRelease palm contracture	3.33	4 4 Z Z	4 4 Z Z	3.54	3.93	0.53	4 4 Z Z	A A	7.40	7.79	060
		< <	Incise finger tendon sheath	2.94	8.65	12.96	3.45	3.83	0.43	12.02	16.33	6.82	7.20	060
26060		∢ <	Incision of finger tendon	2.81	₹ Z	Y S	3.00	3.39	0.45	Y S	Y S	6.26	6.65	060
26075		∢ ∢	Explore/treat nand joint	3.08	Y Y	Z Z	3.36	3.78	0.48	Y Y	Y Y	7.13	7 66	060
26080		< <	Explore/treat finger joint	4.29	¥ Z	Z Z	4.27	4.71	0.66	Z Z	Z Z	9.22	99.6	060
		∢.	Biopsy hand joint lining	3.66	¥ :	Y S	3.52	3.99	0.54	¥ :	Y :	7.72	8.19	060
26105		∢ ∢	Biopsy finger joint lining	3.70	Y Y	A A	3.68	3.92	0.53	K K	K K	7.97	8.39	060
		< <	Removal hand lesion subcut	3.85	9.73	12.28	4.16	4.63	0.59	14.17	16.72	8.60	9.07	060
26116		∢ <	Removal hand lesion, deep	5.52	¥ ₹	Y S	5.21	5.82	0.84	Y S	Y S	11.57	12.18	060
26121		∢ ∢	Release palm contracture	7.53	Ψ Z Z	ξ Z Z	5.83	6.69	1.20	¥ ¥	¥ ¥	15.89	15.39	060
		< <	Release palm contracture	10.53	Y V	Z A	8.08	89.8	1.43	N A	A A	20.04	20.64	060
26125		∢ <	Release palm contracture	4.60	₹ Z	Y S	1.85	2.30	0.70	Y S	¥ ž	7.15	7.60	ZZZ
26130		< ⊲	Revise finder joint liming	2.4 - 4	Z Z	ζ Δ Ζ Ζ	4.70 30	2.0	10.94	¥ 4	¥ 4	13.41	00:17	060
26140		< <	Revise finger joint, each	6.16	√	Z Z	5.08	5.82	0.92	ZZ	Z Z	12.16	12.90	060
		⋖	Tendon excision, palm/finger	6.31	A N	N	5.10	5.83	0.97	N A	A A	12.38	13.11	060
26160		∢ •	Remove tendon sheath lesion	3.40	8.79	11.51	3.73	4.03	0.49	12.68	15.40	7.62	7.92	060
26170		∢ <	Removal of palm tendon, each	4.76	Α < Ζ 2	4 < Z Z	4.29	4.79	0.69	Υ < Ζ Ζ	Ψ < Z Z	9.74	10.24	060
		∢ ⊲	Removal of Inger tendon	5.17	Z Z	A A	4.69	5.25	0.78	A Z	A A	10.64	13.02	060
26200		< ⋖	Remove hand bone lesion	5.50	Y Y	Y Y	4.51	5.16	0.88	A Z	Z Z	10.89	11.54	060
		⋖	Remove/graft bone lesion	7.75	Y Z	N A	5.75	6.62	1.20	Y Y	AN.	14.70	15.57	060
		⋖ <	Removal of finger lesion	5.14	Υ S	Z Z	4.67	5.25	0.79	¥ ž	Y S	10.60	1.18	060
26230		∢ ∢	Partial removal of hand bone	6.32	⊈	Z Z	5.40 4.92	5.68	1.01	¥ ¥ Z Z	₹ ₹ Z Z	12.25	13.01	060
		< <	Partial removal, finger bone	6.18	Y V	Y Y	4.87	5.59	0.95	A A	A A	12.00	12.72	060
26236		∢•	Partial removal, finger bone	5.31	Y Z	¥:	4.47	5.12	0.81	¥ :	¥ :	10.59	11.24	060
26255		∢ ∢	Extensive hand surgery	45.7	Y Y	Y Z	0.14 0.04	Z - 6	70.1	A Z	A A	13.75	23.50	060
		< <	Extensive finger surgery	7.02	Z Z	Z Z	5.27	5.97	1.01	N N	A A	13.30	14.00	060
26261		∢•	Extensive finger surgery	9.20	Y S	Z :	6.74	6.33	1.14	¥ :	¥ :	17.08	16.67	060
26262		∢ ⊲	Partial removal of finger	3 97	Z Z	Z Z	84.58	5.16	0. 0. 2. 0. 0.	A Z	¥ Z	21.11 70.8	0/.11	060
26340		< ∢	Manipulate finger w/anesth	2.50	Z Z	Z Z	4.54	4.80	0.39	Z Z	Z Z	7.43	7.69	060
26350		⋖	Repair finger/hand tendon	2.98	A N	N	9.32	13.32	0.93	A A	AN AN	16.23	20.23	060
26352		∢ <	Repair/graft hand tendon	7.67	Υ S	Υ S	9.89	14.02	1.13	Υ S	Υ S	18.69	22.82	060
26356		∢ ⊲	Repair finger/hand tendon	90.06	A A	A Z	13.47	17.18	2. 5.	A Z	4 4 2 2	24.74	28.45	060
26358		< ∢	Repair/graft hand tendon	9.13	Z Z	Z Z	10.64	15.18	1.38	Υ Z	Z Z	21.15	25.69	060
		⋖	Repair finger/hand tendon	7.10	Y Z	N A	9.36	13.70	1.12	Y Y	AN.	17.58	21.92	060
26372		∢ <	Repair/graft hand tendon	8.8	Υ < Ζ 2	Y Z	10.32	15.02	1.40	Y S	Y S	20.53	25.23	060
26390		(∢	Revise hand/finger tendon	9.24	Υ Υ	ζ	9.93	12.22	1.40	ζ	ζ	19.57	22.86	060
		. ∢	Repair/graft hand tendon	10.30	Z A	Z Z	10.84	15.29	1.57	A N	Y Y	22.71	27.16	060
26410		۷.	Repair hand tendon	4.62	 V 2	A S	7.46	10.84	0.73	Y S	¥ ž	12.81	16.19	060
26412		∢ <	Repair/graft hand tendon	6.30	Υ < Ζ 2	Ψ < Z Z	8.45	12.10	0.97	Υ < Ζ Ζ	Ψ < Z Z	15.72	19.37	060
26416		< <	Graft hand or finger tendon	9.36	¥ ₹ 2 Z	ζ Z	8.62	13.13	0.30	Z Z	Z Z	18.77	23.28	060
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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

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CPT 1 HCPCS 2	Mod	Status	Description	Physician work RVUs ³	Fully implemented nonfacility PERVUS	Year 2007 transi- tional non-facil- ity PE RVUs	Fully implemented facility	Year 2007 transi- tional fa- cility PE RVUs	Mal-prac- tice RVUs	Fully implemented non-	Year 2007 transi- tional non-facil- ity total	Fully implemented facility	Year 2007 transi- tional fa- cility total	Global
26418		⋖ <	Repair finger tendon	4.24	4 2 2	Y S	7.97	11.26	0.67	Y S	₹ Z	12.88	16.17	060
26426		τ ∢	Repair finger/hand tendon	6.14	Z Z	Z Z	8.40	12.00	0.95	Z Z	Z Z	15.49	19.09	060
		∢.	Repair/graft finger tendon	7.20	Y S	Y S	9.05	12.69	1.09	Y S	Y S	17.34	20.98	060
26432		∢	Repair finger tendon	4.01	Y Y	A N	6.62	9.37	0.64	Υ Z	Υ Z	11.27	14.02	060
26434		< <	Repair/graft finger tendon	6.08	Z Z	Z Z	7.75	10.62	0.93	Σ Z	Z Z	14.76	17.63	060
		⋖	Realignment of tendons	5.81	A N	Y V	7.61	10.60	0.89	Y V	Y V	14.31	17.30	060
26440		∢ <	Release palm/finger tendon	5.01	Υ S	Y Z	8.35	12.18	0.75	Y S	Y S	14.08	17.94	060
26445		∢ ∢	Release paim & linger tendon	9.8	₹ ₹ Z Z	Z Z	- - - - - - - - - - - - - - - - - - -	11.89	0.65	4 4 2 Z	₹ ₹ Z Z	12.95	75.45 16.84	060
		A	Release forearm/hand tendon	8.24	A A	NA	11.14	14.65	1.06	N A	N A	20.44	23.95	060
26450		∢ •	Incision of palm tendon	3.66	¥ S	Y S	5.04	6.77	0.59	Y S	Y S	9.29	11.02	060
26455		∢ ⊲	Incision of Imger tendon	3.63	4 Z	4 A	4.99 4.99	6.72	0.58	₹ 4 Z Z	ξ Δ	9.20 8.20	10.93	060
26471		< <	Fusion of finger tendons	5.72	Z Z	Z Z	7.55	10.34	0.88	ζ ζ Ζ	Z Z	14.15	16.94	060
		4	Fusion of finger tendons	5.31	A A	Ϋ́Z	7.38	10.41	0.76	₹ Z	ΥZ	13.45	16.48	060
		⋖	Tendon lengthening	5.17	A A	Ϋ́	7.29	10.04	0.79	Y Y	Ϋ́	13.25	16.00	060
26477		۷٠	Tendon shortening	5.14	Y :	Ž:	7.37	10.16	0.81	Υ :	¥:	13.32	16.11	060
26478		∢ <	Lengthening of hand tendon	5.79	Z Z	∀	7.56	10.79	0.00	∀	Υ S	14.25	17.48	060
26480		τ «	Transplant hand tendon	6.68	ζ	Z Z	4. 6	13.67	1.02	Z Z	Z Z	17.14	21.37	060
		< <	Transplant/graft hand tendon	8.28	A N	Ϋ́	10.07	14.17	1.26	ΥZ	A A	19.61	23.71	060
		4	Transplant palm tendon	7.69	N A	N A	9.79	14.00	1.15	A A	A A	18.63	22.84	060
26489		⋖・	Transplant/graft palm tendon	9.66	Y :	₹ Z	10.13	11.60	1.26	Y :	Y :	21.05	22.52	060
26490		∢ ⊲	Revise thumb tendon	9.40	A Z	A N	9.75	11.83	1.2.1	A N	A N	18.36	23.64	060
26494		< ∢	Hand tendon/muscle transfer	8.46	Z Z	Z Z	8.87	11.98	1.28	Z Z	Z Z	18.61	21.72	060
		∢.	Revise thumb tendon	9.58	Y :	Y :	9.30	12.28	1.45	Y :	Y :	20.33	23.31	060
26497		⋖ <	Finger tendon transfer	9.56	Υ S	Υ S	9.27	12.53	1.41	∀ \$ 2 2	Υ · 2 Ζ · 2	20.24	23.50	060
26499		۲ ۷	Revision of finger	8.97	ζ	Z Z	8.61	11.96	1.35	Z Z	Z Z	18.93	22.28	060
		< <	Hand tendon reconstruction	5.95	Y Y	Ϋ́Z	7.62	10.51	06.0	Ϋ́Z	Ϋ́	14.47	17.36	060
		Α.	Hand tendon reconstruction	7.13	Y :	Y :	8.20	11.09	1.13	Y :	¥:	16.46	19.35	060
26504		∢ <	Hand tendon reconstruction	7.46	Υ < Ζ 2	∀ < Z Z	8.46	11.58	1.24	₹ < Z Z	Ψ <u> </u>	17.16	20.28	060
26510		< <	Thumb tendon transfer	5.45	₹ Z	Z Z	7.46	10.39	0.79	Z Z	Z Z	13.67	16.60	060
		A	Fusion of knuckle joint	7.14	A A	ΥZ	8.11	11.23	1.10	ΥZ	A N	16.35	19.47	060
26517		∢ <	Fusion of knuckle joints	8.8	¥ S	Y S	9.07	12.42	4. 4	Y S	Y S	19.36	22.71	060
26518		۷ ۵	Fusion of knuckle joints	9.07 9.09	A A	Z Z	60.8 60.8	12.35	ე. წ. ე	Z Z	Z Z	19.51	18.77	060
26525		< ∢	Release finger contracture	5.32	Z Z	Z Z	8.70	12.68	0.81	. Υ Υ Υ Υ	Z Z	14.83	18.81	060
		V	Revise knuckle joint	6.68	A A	Ϋ́	5.33	5.95	1.04	ΥZ	¥ V	13.05	13.67	060
26531		∢ <	Revise knuckle with implant	7.90	Y S	Y S	6.05	6.87	1.17	Y S	Y S	15.12	15.94	060
26535		(⊲	Revise/implant finger ioint	9.23	2 2	(d	9.97	0.0	0.7	(d	(d	16.91	16.84	060
26540		< ∢	Repair hand joint	6.42	Z Z	Z Z	7.86	10.89	0.99	Z Z	Z Z	15.27	18.30	060
		4	Repair hand joint with graft	8.61	A A	N A	8.90	12.30	1.28	Υ V	A A	18.79	22.19	060
26542		∢ <	Repair hand joint with graft	6.77	¥ S	Y S	8.01	11.05	1.02	₹ S	₹ S	15.80	18.84	060
26546		< ⋖	Repair nonunion hand	10.41	ζ	(11.25	21.4	3 4	(4 2 Z	(23.10	25.97	060
		(∢	Reconstruct finger joint	8.02	Z	Z Z	8.66	11.83	1.20	Z N	Z Z	17.88	21.05	060
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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

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CPT 1 HCPCS 2	Mod	Status	Description	Physician work RVUs ³	Fully implemented non-facility PE	Year 2007 transi- tional non-facil- ity PE RVUs	Fully implemented facility	Year 2007 transi- tional fa- cility PE RVUs	Mal-prac- tice RVUs	Fully implemented non-facility total	Year 2007 transi- tional non-facil- ity total	Fully implemented facility	Year 2007 transi- tional fa- cility total	Global
26550		4	Construct thumb replacement	21.46		NA	15.12	17.00	2.45	NA	AN	39.03	40.91	060
26551		∢ <	Great toe-hand transfer	48.09	₹ Z	Y S	21.34	29.73	7.96	Y S	Y S	77.39	85.78	060
26554		۲ ∢	Double transfer toe-hand	56.57		ξ	19.02	32.03	2.4	Z Z	Z Z	85.00	98.97	060
		< ⋖	Positional change of finger	16.86		ΥZ	13.64	17.08	2.48	ξ Z	Υ Z	32.98	36.42	060
		⋖	Toe joint transfer	49.27		Ą Z	17.66	29.48	2.57	A N	AN	69.50	81.32	060
		⋖	Repair of web finger	5.37		A A	7.00	9.12	0.85	A A	A N	13.22	15.34	060
26561		⋖	Repair of web finger	10.90		Y Z	60.6	11.56	1.45	Y Y	Y Y	21.44	23.91	060
26562		⋖・	Repair of web finger	16.30		Y :	13.61	16.30	2.23	Y :	¥:	32.14	34.83	060
26565		< <	Correct metacarpal flaw	6.73		Υ S	7.79	10.98	0.5	Υ S	Υ S	15.52	18.71	060
		< <	Correct Inger deformity	0.81		4 S	8.02	10.99	40	4 4 2 2	¥ < Z	15.87	18.84	060
26580		(∢	Repair hand deformity	19.40		(4 2 Z	11 48	13 - 15	80°°°	(4 2 Z	Z Z	33.16	34.00	060
		< <	Reconstruct extra finger	14.28		ΥZ	8.28	00.6	1.53	Z Z	Z Z	24.09	24.81	060
		⋖	Repair finger deformity	18.43		ΥZ	10.51	13.11	2.77	AN	A N	31.71	34.31	060
26591		⋖	Repair muscles of hand	3.25		ΥZ	60.9	8.76	0.48	A A	A N	9.85	12.49	060
26593		⋖ ·	Release muscles of hand	5.30		Y :	7.63	10.28	0.78	Y :	Y :	13.71	16.36	060
26596		⋖ ·	Excision constricting tissue	8.94		Y N	7.35	8.48	1.43	A !	A N	17.72	18.85	060
26600		< <	Treat metacarpal fracture	2.40		3.55	3.01	2.75	0.30	6.05	6.25	5.71	5.45	060
20002		< <	Treet metacarpal fracture	Z Z Z		44.4	3.45	19.5	0.49	/S./	8/:/	6.79	0.62	060
		< ⊲	Treat metacarpal fracture	0.35 3.35		ζ Δ Ζ Ζ	09.4 16.00	5.92 200 R	0.0	ζ Δ Ζ Ζ	₹ 4 2 Z	20.1	12.7	060
26615		< ⋖	Treat metacarpal fracture	5.32		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	4 49	5.22	0.86	Z Z	Z Z	10.67	11 29	060
		< <	Treat thumb dislocation	3.93		4.47	3.49	3.53	0.39	8.46	8.79	7.81	7.85	060
		⋖	Treat thumb fracture	4.40		5.03	3.87	4.12	0.67	9.63	10.10	8.94	9.19	060
		⋖	Treat thumb fracture	5.71		₹ Z	5.53	6.42	0.94	Y Z	₹ Z	12.18	13.07	060
		< <	Treat thumb fracture	7.65		A S	5.59	6.37	06.0	Z L	Α L	14.14	14.92	060
26670		< <	Treat hand dislocation	3.68		4.08	Z 2.3Z	48.8	0.39	7.58	8.13	6.99	10.7	060
26676		(∢	Pin hand dislocation	5.51		Z Z	5.48	6.40	0.91	2 Z	Z Z	11.90	12.82	060
		<	Treat hand dislocation	7.03		A Z	5.16	5.91	1.09	A N	AN	13.28	14.03	060
		⋖	Treat hand dislocation	7.99		A A	5.83	6.65	1.24	A A	A N	15.06	15.88	060
26700		< •	Treat knuckle dislocation	3.68		3.65	2.92	2.88	0.35	7.32	7.68	6.95	6.91	060
26/05		< <	reat knuckle dislocation	4.18 8.18		5.20	4.03	42.4	0.60	8.58	10.01	8.87	9.08	060
26715		< <	Treat knuckle dislocation	5.73		. ∢ Ζ Ζ	4.66	5.3	16:0	₹ ₹	₹ Z Z	11.30	11.95	060
		⋖	Treat finger fracture, each	1.66		2.73	2.28	2.12	0.24	4.45	4.63	4.18	4.02	060
26725		⋖・	Treat finger fracture, each	3.33		4.60	3.37	3.48	0.53	7.90	8.46	7.23	7.34	060
26727		∢ <	Treat finger fracture, each	5.22		Y S	5.12	5.97	0.84	Y S	Y Z	11.18	12.03	060
		< ⊲	Treat finder fracture, each	1 94		χ α α α	9.74	02.50	0.95	Υ Υ Υ Υ	7 2	4 87	4 94	060
26742		(∢	Treat finger fracture, each	3.84		4.82	3.56	9.8	0.58	8.69	9.26	7.98	8.23	060
		< <	Treat finger fracture, each	5.80		Y Z	4.70	5.36	0.91	AZ AZ	Y Y	11.41	12.07	060
		<	Treat finger fracture, each	1.70		2.42	2.23	2.07	0.22	4.14	4.34	4.15	3.99	060
26755		۷.	Treat finger fracture, each	3.10		4.26	2.93	2.99	0.42	7.26	7.78	6.45	6.51	060
26/56		< <	Fin Inger tracture, each	85.4		4 < Z Z	4.78	5.50	0.71	Ψ < Z Z	¥ Ş	9.87	90.00	060
26770		< <	Treat finger dislocation	3.02		3.30	2.50	2.44	0.27	6.17	6.59	5.79	5.73	060
		<	Treat finger dislocation	3.70		5.03	3.76	3.81	0.54	8.73	9.27	8.00	8.05	060
26776		⋖	Pin finger dislocation	4.79		₹ Z	4.94	5.75	0.77	Y Z	Y Z	10.50	11.31	060
26785		< <	Treat finger dislocation	4.20		Υ S	3.84	4.37	0.68	Υ S	₹ S	8.72	9.25	060
Z08ZU		1	Thumb lusion with grant	0.60		۲	0:00	17:11	J. J.	Į.	۲ <u>۲</u>	1.01	71.00	020
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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

Global	28 2 2 3 2 3 2 3 3 3 3 3 3 3 3 3 3 3 3 3	
Year 2007 transi-	20.39 20.30 20	
Fully implement- ed facility total	4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4	
Year 2007 transitional non-facility total		
Fully implement ed non-facility total	AZAZAZAZAZAZAZAZAZAZAZAZAZAZAZAZAZAZAZ	
Mal-prac-	1.1. 1.1. 1.1. 1.1. 1.1. 1.1. 1.1. 1.1	
Year 2007 transi- tronal fa- cility PE RVUs		
Fully implemented facility	88888888888888888888888888888888888888	
Year 2007 transitional non-facil-ity PE RVUs	2 Z Z Z Z Z Z Z Z Z Z Z Z Z Z Z Z Z Z Z	X 6.2 X X X X X X X X X X X X X X X X X X X
Fully implemented non-facility PE RVUs	2	8 2 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8
Physician work RVUs ³	7.80.80.80.41.70.87.80.80.80.80.80.80.80.80.80.80.80.80.80.	6.74 1.87 8.65 11.49
Description	Fusion of thumb Thumb fusion with graft Fusion of hand joint Fusion of knuckle with graft Fusion of knuckle with graft Fusion of knuckle with graft Fusion of knuckle with add-on Fusion of finger joint Amputation of finger joint Amputation of finger/thumb Amputation of finger/thumb Drainage of pelvis bursa Drainage of pelvis bursa Drainage of bone lesion Incision of hip tendon Incision of hip tend	Removal of tail bone, Remove hip foreign body Remove hip foreign body Removal of hip prosthesis
tat	444444444444444444444444444444444444444	
Wod S 2 S 2 S 3 S 3 S 3 S 3 S 3 S 3 S 3 S 3		
CPT 1 CPT 1 HCPCS 2	26842 26843 26844 26844 26844 26846 26846 26856 26861 26861 26861 26863 26863 26863 26863 26863 26864 26864 26864 26864 26864 26864 26864 26864 26865 26866 26867 26866 27005 27006 27006 27044 27044 27046 27046 27046 27066 27066 27067 27067 27077 27077	

ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

ADD	FINDOIN	ADDENDOM D RELATIVE	VALUE UNITS (NVUS)	AND DELATED INFORMATION OSED IN	YNC OLNI				NIEDICARE L			/007		ב
CPT¹ HCPCS²	Mod	Status	Description	Physician work RVUs ³	Fully im- plement- ed non- facility PE RVUs	Year 2007 transi- tional non-facil- ity PE RVUs	Fully implemented facility	Year 2007 transi- tional fa- cility PE RVUs	Mal-prac- tice RVUs	Fully implemented non-facility total	Year 2007 transi- tional non-facil- ity total	Fully implemented facility	Year 2007 transi- tional fa- cility total	Global
27095 27096		۷ ۷	Injection for hip x-ray	1.50	3.78	5.25	0.51	0.52	0.14	5.42	6.89	2.15	2.16	000
		∢.	Revision of hip tendon	60.6	¥:	¥ :	6.23	6.38	1.57	A :	Y :	16.89	17.04	060
27098		∢ <	Transfer of abdominal muscle	9.12	Α < Ζ 2	Y Z	4.73	6.46	0.95	Υ S	Y Z	14.80	16.53	060
27105		< <	Transfer of spinal muscle	11.81	Υ Υ	(7.77	8.84	1.72	Z Z	₹ ₹ 2 Z	21.30	22.37	060
		< <	Transfer of Iliopsoas muscle	13.54	A A	A A	8.45	8.97	2.18	A N	N A	24.17	24.69	060
27111		⋖ <	Transfer of iliopsoas muscle	12.37	Z Z	Z Z	7.98	8.87	1.94	Y S	Y Z	22.29	23.18	060
27122		۲ ح	Reconstruction of hip socket	15.86	Y Y	₹ ₹ 2 Z	9.29	10.63	2.03	Z Z	₹ ₹ 2 Z	27.76	29.10	060
		∢.	Partial hip replacement	16.38	¥ :	Y :	9.49	10.36	2.54	A :	Y :	28.41	29.28	060
27130		∢ <	Total hip arthroplasty	17.40	Y Z	Y Z	9.46	12.37	3.50	¥ ž	Y S	30.36	33.27	060
27134		< <	Revise hip joint replacement	30.07	Z Z	Z Z	14.52	17.01	4. 4. 4. 94	Z Z	Z Z	49.53	52.02	060
		∢.	Revise hip joint replacement	22.49	¥:	Y :	11.59	13.38	3.67	A :	AN:	37.75	39.54	060
27138		∢	Revise hip joint replacement	23.49	V Z	Y Z	11.97	13.82	3.84	A Z	A Z	39.30	41.15	060
27146		(∢	Incision of hip bone	18.64	Υ Υ	(10.51	11.76	2.96	(<u> </u>	₹ ₹	32.11	33.36	060
		< <	Revision of hip bone	21.79	Z Z	Z Z	11.73	12.90	3.57	A N	Z A	37.09	38.26	060
27151		∢ <	Incision of hip bones	23.84	Y S	Y S	12.10	0.6	3.91	¥ ž	Y S	39.85	36.75	060
27158		∢ ∢	Revision of pelvis	20.79	▼	4 4 2 2	6.99	10.00	3.16	Y Y	¥ ¥ Z Z	30.94	33.95	060
		< <	Incision of neck of femur	17.64	Z Z Z	Ą Z	10.20	11.66	2.94	ΥZ	Z Z	30.78	32.24	060
		⋖ ·	Incision/fixation of femur	19.96	¥.	Y S	11.48	12.58	3.10	A :	Y S	34.54	35.64	060
27170		⋖・	Repair/graft femur head/neck	17.40	Y S	Υ :	9.61	10.90	2.81	Υ ·	Y ?	29.82	31.11	060
27175		∢ ∢	Treat slipped epiphysis	9.23	Ψ Z Z	4 4 2 2	9.69	9.84	1.46	A A	Y Y	23.01	23.72	060
		< <	Treat slipped epiphysis	15.84	Z Z	ΥZ	9.50	10.57	2.61	Ą Z	Y Z	27.95	29.05	060
27178		⋖ ·	Treat slipped epiphysis	12.69	Y Z	Y :	8.10	8.36	2.08	¥:	¥ :	22.87	23.13	060
27179		∢	Treat clinned eniphysis	13.74	Z Z	¥ Z	8. 38 8. 38	10.01	2.25	A Z	A Z	24.37	25.60	060
27185		< <	Revision of femur epiphysis	9.59	Z Z	Z Z	6.56	7.30	2.39	ZZ	ζ ∀ Ζ Ζ	18.54	19.28	060
27187		⋖ .	Reinforce hip bones	14.00	Y Z	Y Z	8.55	06.6	2.37	∢ Z	Y Z	24.92	26.27	060
27193		∢ ⊲	Treat pelvic ring fracture	5.92	4.56 NA	4.97	4.70 8.78	5.00	0.96	11.44 AN	11.85 NA	11.58	11.88	060
27200		< ∢	Treat tail bone fracture	1.8	2.05	2.19	2.20	2.17	0.28	4.17	4.31	4.32	4.29	060
		∢.	Treat tail bone fracture	7.21	¥:	YZ:	11.31	15.51	1.06	¥.	AN:	19.58	23.78	060
2/215		∢ ⊲	Treat pelvic ripo fracture	10.39	Z Z	∀	6.41 0.05	0.93	7.97	¥ Z	∀	18.77	92.61	060
27217		< <	Treat pelvic ring fracture	14.57	Z Z	Z Z	8.52	9.76	2.41	Z Z	Z Z	25.50	26.74	060
		∢.	pelvic ring fracture	20.85	A A	Y Y	11.15	11.36	3.48	A N	AN.	35.48	35.69	060
		∢ <	nip socket fracture	6.65	5.18	2.60	5.09	5.51	1.07	12.90	13.32	12.81	13.23	060
27222		∢ ላ	Treat hip wall fracture	13.88	Z Z	4 4 2 2	8. 8. 8. 8.	90.9	2.19	A A	4 4 2 2	24.42	25.66	060
27227		< <	Treat hip fracture(s)	25.13	Z Z	ZZ	13.14	14.87	4.05	Z Z	Z Z	42.32	44.05	060
		Α	Treat hip fracture(s)	29.02	N A	N A	14.69	16.93	4.66	N A	N A	48.40	50.64	060
		⋖ <	Treat thigh fracture	5.61	4.90	5.37	4.83	5.04	0.95	11.46	11.93	11.39	11.60	060
27235		∢ ⊲	Treat thick fracture	12.80	Z Z	¥ 4 Z Z	2.90	0.0	0 1 1	۲ م ۲ ک	¥ 4	19.37	23.99	000
27236		< <	Treat thigh fracture	14.54	 ₹ Z	ZZ	8.53	10.44	2.71	Z Z	Z Z	25.78	27.69	060
27238		٧	Treat thigh fracture	2.57	A N	A A	4.61	5.05	0.89	A A	A A	11.07	11.48	060
27240		A	Treat thigh fracture	13.56	NA NA	NA	2.96	9.12	2.16	NA	NA	23.68	24.84	060
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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

5	EIN C	: :	ADDENDOM D IELATIVE VALUE ONITS (1100S) AND	ורר ר						ן. ייייור -		7007		נ
CPT 1 HCPCS ²	Mod	Status	Description	Physician work RVUs ³	Fully implemented non-facility PE	Year 2007 transi- tional non-facil- ity PE RVUs	Fully implemented facility	Year 2007 transi- tional fa- cility PE RVUs	Mal-prac- tice RVUs	Fully im- plement- ed non- facility total	Year 2007 transi- tional non-facil- ity total	Fully implemented facility	Year 2007 transi- tional fa- cility total	Global
27244		۷ ۷	Treat thigh fracture	17.00	Z Z	Z Z	9.50	10.87	2.77	A A	Z Z Z Z	29.27	30.64	060
		< <	Treat thigh fracture	4.70	3.87	4.32	3.90	4.30	0.81	9.38	9.83	9.41	9.81	060
		∢ <	Treat thigh fracture	10.73	₹ S	Y S	6.87	7.89	1.81	Y S	Y S	19.41	20.43	060
27250		∢ ⊲	I reat hip dislocation	7.12 10.85	₹ ₹ Z Z	A A	6.22	4.53	1 0.62	Z Z	Z Z	28.90	19.69	060
27253		< <	Treat hip dislocation	13.38	Z Z	Z Z	7.71	9.29	2.24	Z Z	Z Z	23.33	24.91	060
27254		⋖	Treat hip dislocation	18.71	Y Z	A A	10.34	11.62	3.17	A A	A A	32.22	33.50	060
27256		∢ <	Treat hip dislocation	4.23	2.40	3.25	1.38	1.91	0.46	7.09	7.94	6.07	6.60	010
27258		∢ ∢	Treat hip dislocation	5.33 15.95	ζ	ξ Z Z	9.26	10.49	2.63	Z Z	Z Z	8.50	29.08	060
		< <	Treat hip dislocation	22.95	Y Z	A A	12.64	13.78	3.74	Z A	¥ ¥	39.33	40.47	060
27265		∢ •	Treat hip dislocation	5.04	₹ Z	¥ ;	3.93	4.58	0.63	Z Z	Z Z	9.60	10.25	060
27206		∢ <	Manipulation of his idiat	7.60	₹ ₹	¥	0.45 0.45	0. IS	92.0	¥ < 2	¥ < Z	14.34	15.02	090
27280		(∢	Fusion of sacrolliac ioint	14.39	(4 2 Z	ζ	8.87	2.03	2.53	ζ <u> </u>	ζ <u> </u>	25.79	26.86	060
		⋖	Fusion of pubic bones	11.62	Ϋ́Z	N A	69.7	7.94	1.86	Υ V	₹ Z	21.17	21.42	060
27284		⋖	Fusion of hip joint	24.85	Y Y	N A	12.57	14.24	3.92	A N	A N	41.34	43.01	060
27286		∢ •	Fusion of hip joint	24.89	Y Z	Y S	13.18	15.18	3.12	Υ ?	Υ ?	41.19	43.19	060
27290		∢ <	Amputation of leg at hip	24.27 19.46	Z Z	A N	12.25	13.64	3.43	Z Z	Z Z	39.95	41.34	060
27301		(∢	Drain thigh/knee lesion	6.60	8.17	9.62	4.61	5.05	1.04	15.81	17.26	12.25	12.66	060
		⋖	Drainage of bone lesion	8.45	Υ V	N A	5.96	6.74	1.43	A Z	A Z	15.84	16.62	060
27305		∢•	Incise thigh tendon & fascia	6.03	₹ Z	Z :	4.58	5.05	1.01	Y :	Z :	11.62	12.09	060
27306		∢ <	Incision of thigh tendon	1.61	Υ S	Y S	4.01	4.55	0.85	Υ S	Υ S	9.47	10.01	060
27310		< <	Exploration of knee joint	6.6 6.80	(K K	6.59	7.35	2. 6.	Z Z	ζ ζ Z Z	18.00	18.76	060
		< <	Partial removal, thigh nerve	7.02	Ϋ́Z	N	5.20	5.05	1.09	N A	N A	13.31	13.13	060
27320		∢•	Partial removal, thigh nerve	6.29	Y ?	A S	4.54	5.07	1.06	A S	A S	11.89	12.42	060
•		∢ ⊲	Blopsy, thigh soft tissues	2.28	4.11 AN	3.67 NA	7.88	68. 00.	0.24	6.63 NA	6.19 NA	4.40 4.3	0.73	010
27327		< <	Removal of thigh lesion	4.46	6.04	6.02	3.57	3.69	0.64	11.14	11.12	8.67	8.79	060
		⋖ .	Removal of thigh lesion	5.56	Y Z	Y S	4.00	4.29	0.84	YZ:	¥:	10.40	10.69	060
27329		∢ <	Remove tumor, thigh/knee	15.60	₹	Y Z	8.40	8.89	2.14	Y S	Y S	26.14	26.63	060
27331		< <	Explore/treat knee joint	5.87	Z Z	Z Z	4.73	5.34	1.02	Z Z	Z Z	11.62	12.23	060
27332		∢.	Removal of knee cartilage	8.26	Y Z	A :	6.01	6.86	1.43	¥2	Y :	15.70	16.55	060
27333		∢ <	Removal of knee cartilage	7. s	¥	Y Z	5.61	6.42	1.26	Υ S	Υ S	14.22	15.03	060
27335		(∢	Remove knee joint lining	10.35	(ζ	6.90	7.91	1.74	ζ <u> </u>	Z Z	18.99	20.00	060
		. ∢	Removal of kneecap bursa	4.17	Υ Z	A A	3.96	4.42	0.72	Y Y	Z Y	8.85	9.31	060
27345		∢•	Removal of knee cyst	5.91	Υ Z	¥:	4.79	5.43	1.00	Y :	¥:	11.70	12.34	060
27347		∢ <	Remove knee cyst	6.52	Υ S	Z Z	5.14	5.37	0.98	Υ S	Υ S	12.64	12.87	060
27355		< <	Remove femur lesion	6.40 7.82	(K K	5.74	6.53	1.32	Z Z	ζ ζ Z Z	14.88	15.67	060
		< <	Remove femur lesion/graft	9.89	Y Y	A A	6.71	7.58	1.65	A N	A N	18.25	19.12	060
27357		⋖	Remove femur lesion/graft	10.93	Y Z	A A	7.38	8.39	1.95	Y Y	Y Y	20.26	21.27	060
27358		< <	Remove femur lesion/fixation	4.73	Υ S	Y S	1.85	2.36	0.85	Υ S	₹ Ż	7.40	7.91	ZZZ
27360		∢ ∢	Partial removal, leg bone(s) Extensive leg surgery	11.25	 ∢	 {	10.27	9.14	2.79	 {	 ∢	30.91	31.99	060 060
27370			Injection for knee x-ray	0.96	2.85	3.51	0.33	0.32	0.08	3.89	4.55	1.37	1.36	000
27372			Removal of foreign body	2.06	8.27	9.63	4.00	4.53	0.84	14.17	15.53	06.6	10.43	060
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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

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CPT ¹ HCPCS ≥	Mod	Status	Description	Physician work RVUs ³	Fully im- plement- ed non- facility PE RVUs	Year 2007 transi- tional non-facil- ity PE RVUs	Fully implemented facility	Year 2007 transi- tional fa- cility PE RVUs	Mal-prac- tice RVUs	Fully implemented nonfacility total	Year 2007 transi- tional non-facil- ity total	Fully im- plement- ed facility total	Year 2007 transi- tional fa- cility total	Global
		∢ <	Repair of kneecap tendon	7.27	AN 2	A S	5.83	6.93	1.24	A S	A S	14.34	15.44	060
27385		< <	Repair/grait kheecap tendon	7.93	₹ ₹ Z Z	¥ ¥	6.10	8.00	1.36	Y Z	ξ Z	15.39	16.55	060
		< <	Repair/graft of thigh muscle	10.90	₹ Z	A A	7.69	9.08	1.85	N A	Z A	20.44	21.83	060
27390		⋖・	Incision of thigh tendon	5.38	Y Z	¥ :	4.52	4.97	0.92	Y Z	Y S	10.82	11.27	060
27391		∢ <	Incision of thigh tendons	1.37	Y Y	A Z	5.42	6.29	5.7.	4 Z	Z Z	13.96	14.83	060
27393		(∢	Lenathenina of thigh tendon	6.44		Z Z	4.95	5.63	1.10	Z Z	Z Z	12.49	13.17	060
		۷.	Lengthening of thigh tendons	8.61	¥:	Y S	90.9	6.95	1.47	AN:	A :	16.16	17.03	060
27395		∢ <	Lengthening of thigh tendons	12.01	Υ Υ	Y S	7.83	8.97	2.04	₹ \$ Z 2	Y Z	21.88	23.02	060
27397		< <	Transplant of thigh tendons	12.38	₹ ₹ Z Z	Y Y	9.08 2.25	8.87	4. %	Z Z	X X	22.45	23.07	060
		۷.	Revise thigh muscles/tendons	9.13	₹ Z	A A	6.10	6.98	1.31	N N	Z Z	16.54	17.42	060
27403		⋖ ·	Repair of knee cartilage	8.44	Y Z	₹ Z	5.97	6.89	1.44	Ϋ́	₹ Z	15.85	16.77	060
27405		∢ <	Repair of knee ligament	8.88	Ψ < Z Z	Y S	6.33	7.22	1.51	Υ S	▼	16.72	17.61	060
27409		۲ ∢	Repair of knee ligaments	13 48	ζ φ Ζ Ζ	Z Z	6.55	20.00 57.00	2.70	Z Z	Δ Δ Ζ Ζ	09.00	25.27	060
		< <	Autochondrocyte implant knee	24.43	Z Z	Z Z	13.45	14.49	4.35	A Z	¥ Z	42.23	43.27	060
		⋖	Osteochondral knee allograft	19.69	A N	N A	11.62	12.35	4.35	AN	₹ Z	35.66	36.39	060
		⋖	Repair degenerated kneecap	11.37	A Z	A A	7.46	8.56	1.88	Y Y	Y Y	20.71	21.81	060
27420		⋖・	Revision of unstable kneecap	10.06	Y :	Ψ.	6.82	7.80	1.71	Υ ?	ΨZ:	18.59	19.57	060
27422		∢ <	Revision of unstable kneecap	10.01	¥	4 < Z Z	6.78	7.80	0.70	₹ ₹	₹ < Z Z	18.49	19.51	060
		< ∢	Lat retinacular release open	2.0.5	ζ 4 2 Z	Z Z	0.70	5.31	0/.0	ζ	X Z	10.74	11.42	060
27427		< <	Reconstruction, knee	9.59	Y Z	A N	6.57	7.51	1.63	ΥZ	A Z	17.79	18.73	060
27428		⋖	Reconstruction, knee	15.23	A N	AN	9.93	10.94	2.42	Y Y	Ą V	27.58	28.59	060
27429		∢ •	Reconstruction, knee	17.12	Y :	Y :	11.1	12.12	2.70	₹ :	ΨZ:	30.93	31.94	060
27430		∢ ⊲	Revision of thigh muscles	9.96	₹ 4 Z Z	Z Z	6.75	0/./	9. 6	Z Z	Z Z	18.40	19.35	060
27437		< ∢	Revise kneecap	8.75	Z Z		6.12	6.98	1.49	{	Z Z	16.36	17.22	060
		< <	Revise kneecap with implant	11.69	Y Z	N A	7.42	8.28	1.95	Ϋ́	Ϋ́Z	21.06	21.92	060
27440		⋖	Revision of knee joint	10.89	A N	Y Y	7.03	6.27	1.81	Y Y	Y Y	19.73	18.97	060
		⋖ •	Revision of knee joint	11.34	Υ S	Y S	7.35	6.83	1.88	₹ Z	Υ S	20.57	20.11	060
27442		∢ ⊲	Revision of knee joint	12.17	Ψ Φ Ζ Ζ	∀	7.03	0.0	2.09	4 4 2 2	₹ 4 Z Z	20.37	22.87	060
27445		< ∢	Revision of knee joint	18.43	Z Z	Z Z	10.31	11.87	3.08	Z Z	 { Z Z	31.82	33.38	060
		⋖	Revision of knee joint	16.18	A N	NA	9.18	10.77	2.80	AN	Ϋ́Z	28.16	29.75	060
27447		∢ .	Total knee arthroplasty	20.81	YZ:	Y Z	11.48	13.85	3.79	Ϋ́	₹ Z	36.08	38.45	060
27448		∢ <	Incision of thigh	11.40	Υ S	Y S	7.23	8.27	1.94	▼	Y S	20.57	21.61	060
		(∢	Realignment of thigh bone	18.89	ζ	ξ	10.53	12.04	3.42	ζ	(32.54	34.05	060
27455		< ∢	Realignment of knee	13.16	Z Z		8.16	9.47	2.24	ξ Z	 ₹ Z	23.56	24.87	060
		< <	Realignment of knee	13.85	Ϋ́	Ϋ́	8.09	9.49	2.34	Ϋ́	Ϋ́	24.28	25.68	060
27465		⋖ ·	Shortening of thigh bone	18.36	Y Z	Y S	10.09	10.21	2.47	Y Z	₹ Z	30.92	31.04	060
27466		< <	Lengthening of thigh bone	17.03	▼ \$ 2 2	Y S	9.94	11.38	2.77	Υ S	¥ ž	29.74	31.18	060
27470		∢ ∢	Snorten/lengthen trigns	16.87	₹ ₹ Z Z	Y Y	- 6 - 6 - 8	1.05	3.30	Y Z	Z Z	24.00 24.00	31.00	060
		< <	Repair/graft of thigh	18.47	Y Z	A N	10.50	12.17	3.07	Υ Z	A Z	32.04	33.71	060
27475		⋖	Surgery to stop leg growth	8.75	A N	AN	99.9	7.09	1.36	Y Y	Y Y	16.77	17.20	060
		∢ <	Surgery to stop leg growth	9.6	▼	Y S	6.52	7.44	1.73	Y S	Z Z	18.21	19.13	060
2/4/9		∢	Surgery to stop leg growth	12.30	Y X	YY.	4.30	0.30	۲.70	- AN	Z Z	ZU.12	74.24	080
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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

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CPT 1 HCPCS 2	Mod	Status	Description	Physician work RVUs ³	Fully implemented non-facility PE	Year 2007 transi- tional non-facil- ity PE RVUs	Fully implemented facility	Year 2007 transi- tional fa- cility PE RVUs	Mal-practice RVUs	Fully im- plement- ed non- facility total	Year 2007 transi- tional non-facil- ity total	Fully implemented facility	Year 2007 transi- tional fa- cility total	Global
27485		∢ 4	Surgery to stop leg growth	8.95	A Z	AN	6.12	7.10	1.53	4 4 Z Z	A Z	16.60	17.58	060
27487		< ∢	Revise/replace knee joint	26.83	A Z	Z Z	13.83	15.91	4.39	Z Z	₹ Z	45.05	47.13	060
		∢ •	Removal of knee prosthesis	17.32	A :	Y S	10.13	11.33	2.74	Y S	Y S	30.19	31.39	060
27495		∢ <	Reinforce thigh	16.31	∀	Y S	9.50	10.96	2.71	▼	Ψ < Z Z	28.52	29.98	060
27497		(∢	Decompression of thigh/knee	7.64	Z Z	₹ ₹ 2 Z	4.61	5.24	1.15	X X	ζ Z	13.40	14.03	060
		⋖	Decompression of thigh/knee	8.46	N A	Y Z	5.36	5.85	1.24	Y Y	Y Y	15.06	15.52	060
27499			Decompression of thigh/knee	9.23	NA R 2	A N	5.76	6.57	1.47	NA 10 F2	N F	16.46	17.27	060
27501		(∢	Treatment of thigh fracture	6.28	4.95	5.60	4.86	5.27	1.02	12.26	12.91	12.17	12.58	060
27502		∢.	Treatment of thigh fracture	11.16	Y :	¥ :	6.79	7.80	1.78	Y :	¥:	19.73	20.74	060
27503			reatment of thigh fracture	11.05	A Z	Z Z	7.12	12.36	2. 8. 4. 8. 7. 8. 7. 8.	Z Z	A A	20.01	34.71	060
		< <	Treatment of thigh fracture	14.33	₹ Z	Y Y	8.03	9.41	2.42	N A	¥ Z	24.78	26.16	060
27508		∢ ·	Treatment of thigh fracture	6.00	5.62	6.27	4.99	5.37	0.97	12.59	13.24	11.96	12.34	060
27509		< •	Treatment of thigh fracture	7.94	₹ Ż	Υ S	6.36	7.58	45.	Ϋ́ Z	Υ S	15.64	16.86	060
			Treatment of thigh fracture	13.86	4	4 4 2 2	8 6.22 7.5	10.7	237	A Z	A A	27.33	26.87	060
27513			Treatment of thigh fracture	19.37	ξ Z Z	Z Z	11.43	13.30	3.12	Z Z	Z Z	33.92	35.79	060
27514		⋖	Treatment of thigh fracture	18.99	A N	A A	11.55	12.93	3.00	N	N	33.54	34.95	060
27516			Treat thigh fx growth plate	5.36	5.60	6.18	4.97	5.39	0.81	11.77	12.35	11.14	11.56	060
27519		∢ ⊲	I reat thigh fx growth plate	8.89	4 Z Z	4 4 Z Z	5.93 50.0	1.09	2.5	Z Z	A A	16.04	29.36	060
27520		< ∢	Treat kneecap fracture	2.86	4.05	4.43	3.48	3.46	0.47	7.38	7.76	6.81	6.79	060
27524			Treat kneecap fracture	10.17	Υ Y	AN A	6.83	7.90	1.74	Y Y	Z Z	18.74	19.81	060
27530			Treat knee fracture	3.89	4.76	2.19	4.20	4.37	0.65	9.30	9.73	8.74	8.91	060
27535			Treat knee fracture	11.72	6.33 AN	Z Z	7:92	9.59	2.00	9.4 VA	2.7.2 NA	21.64	23.31	060
			Treat knee fracture	17.11	A A	Z	10.07	11.25	2.73	NA	N A	29.91	31.09	060
27538			Treat knee fracture(s)	4.86	5.46	5.98	4.84	5.12	0.84	11.16	11.68	10.54	10.82	060
27550			Treat knee dislocation	5.75	5,26	5.84	4.55	9.12 4.84	0.76	11.77	12.35	11.06	11.35	060
			Treat knee dislocation	7.95	Ϋ́	Z	6.01	6.73	1.36	NA	NA	15.32	16.04	060
27556		∢ <	Treat knee dislocation	14.87	₹ Ş	Z Z	9.06	11.03	2.50	Z Z	Z Z	26.43	28.40	060
27558			Treat knee dislocation	17.93	Z Z	ZZ	10.33	12.39	3.08	Z Z	Z Z	31.34	33.40	060
27560			Treat kneecap dislocation	3.81	3.89	4.61	3.37	3.24	0.40	8.10	8.82	7.58	7.45	060
27562			I reat kneecap dislocation	5.78	A A	∀	4.38 86.7	4.68 93	0.94	Z Z	Z Z	11.10	11.40	060
27570			Fixation of knee joint	1.74	Υ Z	Y Y	1.60	1.74	0:30	Z Y	Z Y	3.64	3.78	010
27580		⋖ •	Fusion of knee	20.82	Ϋ́ Z	Y S	12.03	14.14	3.37	Y S	Y S	36.22	38.33	060
27590			Amputate leg at thigh	13.27	A Z	4 4 Z Z	6.15	6.56	1.74 202	Z Z	Z Z	23.06	24.09	060
27592			Amputate leg at thigh	10.78	Υ Z	Z Z	5.51	6.02	1.45	Z Z	Z Z	17.74	18.25	060
27594			Amputation follow-up surgery	7.09	₹ Z	Z :	4.74	5.07	1.02	Y Z	Z :	12.85	13.18	060
27598		∢ ∢	Amputation follow-up surgery	10.06	4 4 2 2	4 4 2 2	6.03	0.03	1.5/	Z Z	A A	18.66	19.26	060
27600			Decompression of lower leg	5.88	Ą Z	Z	3.86	4.37	0.86	Υ Z	Z Z	10.60	11.1	060
27601			Decompression of lower leg	5.87	₹ :	Y :	4.25	4.71	0.80	Y S	Y S	10.92	11.38	060
27602 27603			Decompression of lower leg	7.64 5.05	7.07	NA 7.39	3.86	4.96 4.09	1.10	12.80	13.18	13.17	13.70	060
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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

ADL	LINDOM	ADDENDOM D.—MELATIVE	VALUE UNITS (NVUS) A	nelai eu	AND LANGE	ND RELATED INFORMATION OSED IN			DELERMINING MEDICARE T	1	AYMEN IS FOR	7007		
CPT 1 HCPCS ²	Мод	Status	Description	Physician work RVUs ³	Fully im- plement- ed non- facility PE RVUs	Year 2007 transi- tional non-facil- ity PE RVUs	Fully implemented facility	Year 2007 transi- tional fa- cility PE RVUs	Mal-prac- tice RVUs	Fully im- plement- ed non- facility total	Year 2007 transi- tional non-facil- ity total	Fully implemented facility	Year 2007 transi- tional fa- cility total	Global
27604		∢ ∢	Drain lower leg bursa	4.46	6.41	6.18	3.37	3.82	0.69	11.56	11.33	8.52	8.97	090
		Α.	Incision of achilles tendon	4.13	NA	NA	2.62	3.18	0.69	NA	A N	7.44	8.00	010
27607		∢ <	Treat lower leg bone lesion	8.44	Y S	Y S	5.64	6.05	1.3	Y S	Z Z	15.39	15.80	060
27612		τ <	Explore/treat ankle joint	7.92	Z Z	Z Z	5.23	5.89	1.13	Z Z	Z Z	14.28	14.94	060
		⋖	Biopsy lower leg soft tissue	2.17	3.82	3.39	1.72	1.79	0.20	6.19	2.76	4.09	4.16	010
27614		∢ <	Biopsy lower leg soft tissue	5.65	7.82	7.32	3.95	4.33	0.78	14.25	13.75	10.38	10.76	060
27618		< <	Remove lower leg lesion	5.08	6.35	6.11	3.74	3.94	0.72	12.15	11.91	9.54	9.74	060
27619		۷,	Remove lower leg lesion	8.39	9.97	9.65	5.21	5.78	1.25	19.61	19.29	14.85	15.42	060
27620			Explore/treat ankle joint	5.97	∀	Y Z	4.50	5.24	0.97	Y Z	Y Z	4. 1.	12.18	060
27626			Remove ankle joint lining	8.90	Z Z	Z Z	5.82	6.66	1.48	Z Z	Z Z	16.20	17.04	060
		Α.	Removal of tendon lesion	4.79	7.88	7.66	3.74	4.23	0.74	13.41	13.19	9.27	9.76	060
27635		< <	Remove lower leg bone lesion	7.83	Υ S	Z Z	5.56	6.46	1.3	Y S	Z Z	14.70	15.60	060
27638			Remove/graft leg bone lesion	10.08	₹ 4 Z Z	4 4 2 2	7.0.7	8.00 7.94	9. 4	A N	4 4 2 2	19.81	20.74	080
			Partial removal of tibia	12.01	Ψ Z	Z Z	8.08	9.77	. 88.	Z Z	Z Z	21.93	23.66	060
			Partial removal of fibula	9.65	Ϋ́	A A	89.9	7.94	1.46	AN	N A	17.79	19.05	060
•		< <	Extensive lower leg surgery	14.69	Υ S	Z Z	9.36	11.40	2.41	Y S	Z Z	26.46	28.50	060
27647		۷ ۵	Extensive lower leg surgery	12.12	₹ 4 Z Z	4 4 2 2	8.30 6.48	7.24	2.05	A N	Y Z	23.73	21.05	060
27648		< <	Injection for ankle x-ray	0.96	2.77	3.34	0.32	0.33	0.08	3.81	4.38	1.36	1.37	000
27650			Repair achilles tendon	98.6	Ϋ́	AN	6.16	7.19	1.59	AN	AN	17.61	18.64	060
27652			Repair/graft achilles tendon	10.55	▼	Y S	6.30	7.61	1.71	Y S	Y Z	18.56	19.87	060
27656			Repair leg fascia defect	4.56	8.10	8.44	3.67	3.75	0.69	13.35	13.69	8.92	00.6	060
		⋖	Repair of leg tendon, each	4.97	Ϋ́Z	Z	3.84	4.39	0.79	N A	Z	9.60	10.15	060
27659			Repair of leg tendon, each	6.92	Ψ S	Z Z	4.79	5.44	1.09	Y S	Z Z	12.80	13.45	060
27665			Repair of leg tendon, each	8.39 8.39	ξ Z Z	₹	3.88 4.40	85.4 4.84	0.70	₹ ₹ Z Z	₹	10.68	11.12	060
			Repair lower leg tendons	7.17	Ϋ́Z	Ν	4.64	5.47	1.1	Ϋ́	Ϋ́Z	12.92	13.75	060
27676		∢ •	Repair lower leg tendons	8.53	Z S	Y S	5.64	6.49	1.37	Y S	Y S	15.54	16.39	060
27681			Release of lower leg tendon	5.73	₹ 4 Z Z	4 4 2 2	4.28	19.4 19.7	1.93	A N	4 4 2 2	12.69	13.64	060
27685			Revision of lower leg tendon	6.49	8.73	7.67	4.52	5.24	0.97	16.19	15.13	11.98	12.70	060
27686		< •	Revise lower leg tendons	7.57	Ψ.Z.Z	Y S	5.27	6.20	1.24	Y S	Y S	14.08	15.01	060
27690			Revision of call tendon	6.23 8.83 8.83	₹ 4 Z Z	4 4 2 2	4.4 7.4.6 7.4.6	5.5	9. 5	4 Z	Z Z	17.55	7 2.33	060
			Revise lower leg tendon	10.19	A A	Y Y	6.57	7.48	1.00	A A	Y Y	18.40	19.31	060
			Revise additional leg tendon	1.87	Υ S	Z Z	0.71	0.88	0.32	Z Z	Z Z	2.90	3.07	ZZZ
27695		∢ <	Repair of ankle ligament	6.50 8.38	¥ ×	¥ ₹	06.4 06.4	40.0 40.0	1.05	¥ 2	₹ ₹ Z Z	12.45	13.19	060
27698			Repair of ankle ligament	9.41	Z Z	ζ <u> </u>	5.78	6.67	1.47	Z Z	ζ <u> </u>	16.66	17.55	060
			Revision of ankle joint	9.46	Ϋ́	AN	5.03	5.53	1.30	ΑN	AN	15.79	16.29	060
27702			Reconstruct ankle joint	14.19	₹ Z	Y :	8.56	10.01	2.37	¥ :	Y :	25.12	26.57	060
27703		∢ <	Reconstruction, ankle joint	16.69	₹ < Z Z	Υ < Z	9.69	10.87	2.76	Ψ < Z Z	¥ Ş	29.14	30.32	060
27705			herroval of affice implant	10.66	₹ ₹ 2 Z	ξ	9.00	7.84	1.80	Z Z	ζ	19.24	20.30	060
27707			Incision of fibula	4.60	Ϋ́	A Z	4.42	4.82	0.76	A Z	Z Z	9.78	10.18	060
27709				17.24	Ϋ́	N A	9.47	8.48	1.73	AN	A A	28.44	27.45	060
TOO .	7000	400 00 010	L	1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -		1 0140011	0	100						

ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

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CPT¹ HCPCS²	Mod	Status	Description	Physician work RVUs ³	Fully implemented non-facility PE	Year 2007 transi- tional non-facil- ity PE RVUs	Fully implemented facility	Year 2007 transi- tional fa- cility PE RVUs	Mal-practice RVUs	Fully implemented nonfacility	Year 2007 transi- tional non-facil- ity total	Fully implemented facility	Year 2007 transi- tional fa- cility total	Global
27712 27715		∢∢	Realignment of lower legRevision of lower leg	15.59	Z Z	A A	8.98	10.32	2.47	Z Z	A Z Z	27.04	28.38	060
27720		⋖ <	Repair of tibia	12.13	Y Z	Y S	7.81	9.03	2.04	A S	₹ Z	21.98	23.20	060
27724		< <	Repair/graft of tibia	19.12	Y Y Z Z	4 4 2 2	10.10	11.83	3.16	4 4 2 2	Z Z	32.38	34.1	060 060
		⋖ .	Repair of lower leg	17.07	A :	Y S	10.41	11.56	2.71	Y Y	N	30.19	31.34	060
27727		∢	Repair of lower leg	14.59	A A	Z Z	8.40	9.88	2.43	Υ Z	Y Z	25.42	26.90	060
27732		< <	Repair of fibula epiphysis	5.31	Y Y	Z Z	4.60	4.86	0.77	Z Z	Z Z	10.68	10.94	060
27734		∢ •	Repair lower leg epiphyses	8.65	Y S	Y S	6.08	6.25	1.35	Y S	Z Z	16.08	16.25	060
27742		∢ ∢	Repair of leg epiphyses	10.40	3.04	4.95	6.52	7.64	1.62	15.23	17.14	17.38	18.67	060
27745		∶∢	Reinforce tibia	10.29	Z A	N A N	6.87	7.86	1.75	NA	Y Y	18.91	19.90	060
27750		∢ •	Treatment of tibia fracture	3.19	4.26	4.64	3.68	3.82	0.55	8.00	8.38	7.42	7.56	060
27756		∢ ∢	reatment of tibia fracture	6.07	5.86 AN	6.48 NA	5.05 5.65	5.53	1.01	72.97 NA	13.56 NA	12.13	12.61	060
27758		< ∢	Treatment of tibia fracture	12.31	₹ Z	¥ Z	7.90	8.88	2.03	Ž	Z Z	22.24	23.22	060
27759		⋖ ·	Treatment of tibia fracture	14.23	Y N	AN !	8.54	68.6	2.38	ΥZ	NA	25.15	26.50	060
27760		∢ <	Treatment of ankle fracture	3.01	4.23	4.58	3.63	3.61	0.48	7.72	8.07	7.12	7.10	060
27766		(∢	Treatment of ankle fracture	8.65	Q Z	t Z	6.16	6.97	3 4.	S N	NA NA	16.25	17.06	060
27780		⋖		2.65	3.84	4.10	3.28	3.24	0.41	06.9	7.16	6.34	6.30	060
27781		⋖・	Treatment of fibula fracture	4.39	4.89	5.36	4.27	4.56	0.73	10.01	10.48	9.39	89.6	060
27786		∢ ∢	Treatment of tibula tracture	45. C	4 0 1	NA 4.36	3.39	3 35	0.23	NA 7.34	NA 7 66	14.07	14.81	060
27788		< <	Treatment of ankle fracture	4.44	4.93	5.48	4.20	4.55	0.74	10.11	10.66	9.38	9.73	060
27792		⋖ ·	Treatment of ankle fracture	7.83	¥ Z	Y.	5.83	69.9	1.32	A S	A N	14.98	15.84	060
27808		∢ ላ	Treatment of ankle fracture	2.83	4.34 38	69.4	3.65	3.70	0.46	7.63	7.98	6.94	10.94	060
27814		< <		11.02	Y Z	A N	7.13	8.22	1.85	Z	NA NA	20.00	21.09	060
27816		∢ <	Treatment of ankle fracture	2.89	3.98	4.29	3.31	3.39	0.43	7.30	7.61	6.63	6.71	060
27822		∢ ∢	Treatment of ankle fracture	12.04	9.30 AN	ο. Α	8.71	10.19	1.91	\ 9. A N	12.44 A N	10.71	24.14	060
27823		< <	Treatment of ankle fracture	14.18	¥ Z	A A	9.33	10.96	2.25	N A	Y Y	25.76	27.39	060
27824		∢ <		3.14	3.69	3.98	3.50	3.55	0.45	7.28	7.57	7.09	7.14	060
27826		(∢	Treat lower leg fracture	8.89	NA A	A N	6.89	8.36	1.47	NA AN	NA NA	17.25	18.72	060
27827		∢.	Treat lower leg fracture	15.65	₹ Z	¥:	10.62	12.26	2.43	Y :	Y :	28.70	30.34	060
27828		∢ ⊲	Treat lower leg tracture	78.07	Z Z	Z Z	72.12 5.44	13.51	2.87 7.90 7.95	Z Z	A Z	33.00	34.39	060
27830		< <	Treat lower leg dislocation	3.78	4.25	4.36	3.70	3.82	0.54	8.57	8.68	8.02	8.14	060
27831		∢•	Treat lower leg dislocation	4.55	Y S	¥ :	3.94	4.34	0.73	¥ :	Z Z	9.22	9.62	060
27832		∢ ⊲	Treat lower leg dislocation	6.60	Z Z	Z Z	4.65 50 50	18.6	1.03	A Z	A Z	12.28 8.63	13.44	060
27842		(∢	Treat ankle dislocation	6.26	Z Z	Z Z	2.5 18.4	5.05	5.6	Z Z	Z Z	12.07	12.31	060
27846		∢.	Treat ankle dislocation	10.08	¥ ?	¥ :	6.73	7.65	1.70	Y S	Y S	18.51	19.43	060
27860		∢ ⊲	I reat ankle dislocation	2.34	A A	A A	1.57	9.20	1.94	Z Z	A N	20.99	22.62	090
27870		< <	Fusion of ankle joint, open	15.13	Z Z	Z Z	00.6	10.16	2.36	Z Z	Z Z	26.49	27.65	060
27871		⋖	Fusion of tibiofibular joint	9.34	Y V	A A	6.40	7.30	1.59	Ϋ́Z	NA	17.33	18.23	060
27880		∢ ⊲	Amputation of lower leg	15.18	Y Z	Z Z	7.13	7.15	1.75	₹ Z	Y Z	24.06	24.08	060
		(Tipatation of lower log	37.01	5	5	2t. /	5	2	5	5	20:32	1.03	8

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

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CPT 1 HCPCS 2	Mod	Status	Description	Physician work RVUs ³	Fully im- plement- ed non- facility PE RVUs	Year 2007 transi- tional non-facil- ity PE RVUs	Fully implemented facility	Year 2007 transi- tional fa- cility PE RVUs	Mal-prac- tice RVUs	Fully im- plement- ed non- facility total	Year 2007 transi- tional non-facil- ity total	Fully implemented facility	Year 2007 transi- tional fa- cility total	Global
27882		⋖ <	Amputation of lower leg	9.59	A N	AN	5.61	6.28	1.29	A Z	A Z	16.49	17.16	060
27886		< <	Amputation follow-up surgery	9.79	X X	₹ ₹ 2 Z	5.74	0.00	1.40	Z Z	Z Z	16.93	17.52	060
27888		⋖	Amputation of foot at ankle	10.14	Ϋ́Z	Ν	6.19	7.19	1.51	AN	NA	17.84	18.84	060
27889		∢ <	Amputation of foot at ankle	10.63	Y S	₹ S	5.44	6.23	1.46	₹ S	₹ S	17.53	18.32	060
27893		(∢	Decompression of leg	7.70	Z Z	Z Z	5.05	5.37	1.1	Z Z	Z Z	13.85	14.17	060
		⋖	Decompression of leg	12.32	AN	A A	7.30	7.67	1.65	A A	A A	21.27	21.64	060
		∢ <	Drainage of bursa of foot	2.73	3.99	3.24	1.60	1.87	0.33	7.05	6.30	4.66	4.93	010
28002		< <	Treatment of foot infection	27.7	6.09	5.47 5.63	3.50 4.54	5.07	1.12	13.02	16.63	9.89	15.07	060
28005		< <	Treat foot bone lesion	9.21	Y Y	N A A	5.24	5.86	1.16	Y Y	N A A	15.61	16.23	060
28008		⋖ ·	Incision of foot fascia	4.44	6.15	4.96	2.97	3.15	0.57	11.16	9.97	7.98	8.16	060
28010		∢ <	Incision of toe tendon	2.84	2.83	2.49	2.31	2.36	0.36	6.03	5.69	5.51	5.56	060
28020		(∢	Exploration of foot joint	2.00	7.48	68.9	3.62	4.01	0.39	13.20	101	9.76	9.73	060
		< <	Exploration of foot joint	4.66	6.85	5.62	3.27	3.71	0.62	12.13	10.90	8.55	8.99	060
		∢	Exploration of toe joint	4.37	6.62	5.58	3.13	3.73	0.58	11.57	10.53	8.08	89.8	060
28030		∢ ·	Removal of foot nerve	6.14	Y Y	AN S	3.30	3.57	0.74	AN :	AN .	10.18	10.45	060
28035		∢ <	Decompression of tibia nerve	5.08	7.40	6.25	3.60	3.98	0.70	13.18	12.03	9.38	9.76	060
28045		< ⋖	Excision of foot lesion	5.52	7.03	2.00	3.73	3.52	0.40	12.37	0.00	0.71	98.8	060
		< <	Resection of tumor, foot	10.46	10.35	9.18	5.72	6.30	1.36	22.17	21.00	17.54	18.12	060
28050		⋖	Biopsy of foot joint lining	4.24	6.83	5.38	3.22	3.51	09.0	11.67	10.22	8.06	8.35	060
28052		۷.	Biopsy of foot joint lining	3.93	6.40	5.29	2.91	3.31	0.53	10.86	9.75	7.37	7.77	060
28054		∢ ⊲	Biopsy of toe joint lining	3.44 2.00	6.18	5.09 7.89	3.73	3.75	0.46	13.01	14.89	6.64 9.45	7.02 17.02	060
28062		< ∢	Removal of foot fascia	6.51	7.80	6.85	3.78	3.96	0.83	15.14	14.19	11.12	11.30	060
		⋖	Removal of foot joint lining	2.09	7.18	5.72	3.42	3.72	0.73	13.00	11.54	9.24	9.54	060
28072		⋖ •	Removal of foot joint lining	4.57	7.58	6.05	3.59	4.13	0.68	12.83	11.30	8.84	9.38	060
28080		∢ <	Removal of toot lesion	4.5/	7.63	5.75	9.16	T8.5.	0.47	12.67	10.79	9.20	8.85	060
28088		< ⋖	Excise foot tendon sheath	3.85	6.94	6.06	3.14	3.71	0.61	11.40	10.52	7.60	8.17	060
28090		⋖	Removal of foot lesion	4.40	6.75	5.55	3.15	3.38	0.59	11.74	10.54	8.14	8.37	060
28092		⋖・	Removal of toe lesions	3.63	6.46	5.54	2.97	3.39	0.49	10.58	9.66	7.09	7.51	060
28100		∢ ⊲	Removal of ankle/heel lesion	5.65	8.18 AN	8.03 NA	4.03	4.53 69	1 14	14.65 NA	04.50 NA	10.50	14.55	060
28103		< <	Remove/graft foot lesion	6.49	Z Z	A Z	4.10	4.49	0.91	ΥZ	ΥZ	11.50	11.89	060
28104		⋖	Removal of foot lesion	5.11	7.20	5.93	3.43	3.81	0.70	13.01	11.74	9.24	9.65	060
28106		∢ <	Remove/graft foot lesion	7.15	N N	NA 90	4.37	4.42	0.97	Y ;	NA P	12.49	12.54	060
28108		(⊲	Removal of toe lesions	2.33	7.07	5.03	2.70	3.19	0.73	11.01	9.71	7.64	787	060
		< <	Part removal of metatarsal	4.07	6.93	5.66	3.04	3.18	0.54	11.54	10.27	7.65	7.79	060
28111		⋖	Part removal of metatarsal	2.00	7.31	6.55	3.28	3.57	0.67	12.98	12.22	8.95	9.24	060
28112		⋖・	Part removal of metatarsal	4.48	7.22	6.17	3.24	3.50	0.61	12.31	11.26	8.33	8.59	060
28113		∢ <	Part removal of metatarsal	5.78	8.38	6.65	4.60	4.39	0.63	14.79	13.06	1.0.	10.80	060
28116		(∢	Revision of foot	8.86	9.42	7.46	5.30	5.21	1.03	19.31	17.35	15.19	15.10	060
28118		< <	Removal of heel bone	5.92	7.89	6.67	3.98	4.26	0.84	14.68	13.46	10.77	11.05	060
28119		⋖ ·	Removal of heel spur	5.38	7.18	5.88	3.54	3.68	0.70	13.26	11.96	9.65	9.76	060
28120		∢ ⊲	Part removal of ankle/heel	5.57	8.04 8.45	7.49	3.92	4.30	0.77	14.38	13.83	10.26	10.64	060
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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

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CPT 1 HCPCS 2	Mod	Status	Description	Physician work RVUs ³	Fully implemented non-facility PE	Year 2007 transi- tronal non-facil- ity PE RVUs	Fully implemented facility	Year 2007 transi- tional fa- cility PE RVUs	Mal-prac- tice RVUs	Fully implemented nonfacility	Year 2007 transi- tional non-facil- ity total	Fully implemented facility	Year 2007 transi- tional fa- cility total	Global
28124 28126		4 ح	Partial removal of toe	4.80	6.73	5.43	3.41	3.60	0.60	12.13 9.88	10.83	8.81 6.59	9.00	060
28130		۷ ۵	Removal of ankle bone	9.22	NA 7 84	NA 7.39	5.78	6.49	1.26	NA 15.72	15.27	16.26	16.97	060
		< ∢	Removal of toe	4.08	6.39	5.23	2.98	3.21	0.53	11.00	9.84	7.59	7.82	060
28153		∢ ⊲	Partial removal of toe	3.65	6.15	4.78	2.84 2.94	3.73	0.47	10.27	8.90	6.96	6.85	060
28171		< <	Extensive foot surgery	9.72	8 Z	S Z	5.10	5.36	1.33	S N	NA	16.20	16.46	060
28173		∢ ◊	Extensive foot surgery	8.97	8.74	7.89	4.60	5.06	1.12	18.83	17.98	14.69	15.15	060
28190		(∢	Removal of foot foreign body	1.96	4.00	3.55	1.32		0.22	6.18	5.73	3.50	3.62	010
28192		∢.	Removal of foot foreign body	4.63	6.71	5.80	3.17	3.53	0.61	11.95	11.04	8.41	8.77	060
28193		∢ ∢	Removal of foot foreign body	5.72	7.29	6.04	3.58	3.84	0.73	13.74	12.49	10.03	10.29	060
		: ∢	Repair/graft of foot tendon	6.89	7.91	7.40	4.00	4.38	0.91	15.71	15.20	11.80	12.18	060
28208		∢ •	Repair of foot tendon	4.36	6.64	5.28	3.14	3.27	0.58	11.58	10.22	8.08	8.21	060
		∢ <	Repair/graft of foot tendon	6.34	7.50	6.55	3.84	3.98	0.81	14.65	13.70	10.99	11.13	060
2822		(∢	Release of foot tendons	5.61	6.84	5.65	3.27	3.92	0.69	13.14	11.95	9.57	10.22	060
		< <	Release of foot tendon	3.65	5.99	4.72	2.69	2.86	0.46	10.10	8.83	08.9	6.97	060
		⋖ <	Release of foot tendons	4.52	6.94	5.34	3.27	3.63	0.58	12.04	10.44	8.37	8.73	060
28230		∢ ⊲	Incision of toe tendon(s)	5.2.5 5.3.8	6.20	2.08	2.85	3.47	0.55	9 73	9.80	6.47	8.23	060
28234		< <	Incision of foot tendon	3.36	6.25	5.07	3.01	3.27	9 0	10.05	8.87	6.81	7.07	060
		< <	Revision of foot tendon	7.78	8.28	7.52	4.28	4.78	1.06	17.12	16.36	13.12	13.62	060
28240		∢ <	Release of big toe	4.35	6.38	2.08	2.95	3.36	0.58	11.31	10.01	7.88	8.29	060
28250		< <	Revision of foot fascia	5.9 10.8 10.8	7.37	6.83	3.70 4.64	4.03 191	1.82	17.68	16.04	13.79	10.76	060
		< <	Revision of foot tendon	12.83	10.60	9.12	6.26	7.06	1.57	25.00	23.52	20.66	21.46	060
28262		∢ •	Revision of foot and ankle	16.93	15.42	14.05	9.62	10.61	2.59	34.94	33.57	29.14	30.13	060
28264		∢ ⊲	Release of foot contracture	10.45	10.30	8.39	5.91	6.95	4.0	12.29	20.38	17.90	18.94	060
28272		(∢	Release of toe joint, each	3.79	5.80	4.59	2.62	2.80	0.46	10.05	8.84	6.87	7.05	060
28280		∢.	Fusion of toes	5.18	7.31	6.52	3.53	4.25	0.73	13.22	12.43	9.44	10.16	060
28285		∢ ⊲	Repair of hammertoe	4.58	6.67	5.32	3.31	3.40	0.59	11.84	10.49	8.48 7.7	8.57	060
28288		< <	Partial removal of foot bone	5.73	8.58	6.61	4.66	4.83	0.65	14.96	12.99	11.04	11.21	060
28289		< <	Repair hallux rigidus	8.03	9.38	8.35	5.29	5.66	1.02	18.43	17.40	14.34	14.71	060
28292		< <	Correction of bunion	0.00	10.27	4 6	90.9	5.68	0.02	19.78	12.61	15.59	15.19	060
		< <	Correction of bunion	10.96	14.40	11.68	6.84	6.30	1.13	26.49	23.77	18.93	18.39	060
28294		∢ •	Correction of bunion	8.55	9.03	7.85	4.50	4.67	1.09	18.67	17.49	14.14	14.31	060
28296		∢ ⊲	Correction of burnion	9.23	9.51	8.51	4.73	5.26	1.19	19.93	18.93	15.15	15.68	060
28298		(∢	Correction of bunion	7.93	9.16	7.71	4.49	4.88	1.05	18.14	16.69	13.47	13.86	060
28299		⋖	Correction of bunion	11.31	10.46	9.21	5.64	5.97	1.37	23.14	21.89	18.32	18.65	060
28300		∢ ⊲	Incision of ankle bone	9.53	¥ ₹	Z Z	5.99	6.79	1.54	V Δ	Y Z	16.60	17.86	060
28304		< <	Incision of midfoot bones	9.21	9.46	8.34	5.00	5.56	1.27	19.94	18.82	15.48	16.04	060
28305		∢.	Incise/graft midfoot bones	10.54	AN C	AN I	5.48	6.43	1.27	NA.	AN .	17.29	18.24	060
28306		< <		5.85	8.28	7.21	3.80	4.09	0.84	14.97	13.90	10.49	10.78	060
28308		۲4	Incision of metatarsal	5.28	7.84	6.28	3.76	3.71	0.70	13.82	12.26	9.74	9.69	060
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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

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CPT 1 HCPCS 2	Мод	Status	Description	Physician work RVUs ³	Fully implemented non-facility PERVUs	Year 2007 transi- tional non-facil- ity PE RVUs	Fully implemented facility	Year 2007 transi- tional fa- cility PE RVUs	Mal-prac- tice RVUs	Fully im- plement- ple non- facility total	Year 2007 transi- tional non-facil- ity total	Fully implemented facility	Year 2007 transi- tional fa- cility total	Global
28309		44	Incision of metatarsalsRevision of big toe	13.88	NA 7.45	NA 6.18	7.63	7.89	2.04	NA 13.57	NA 12.30	23.55	23.81	060
28312		۷ ۹	Revision of toe	4.54	7.32	5.92	3.19	3.53	0.63	12.49	11.09	8.36	8.70	060
28315		∢ ∢	Removal of sesamoid bone	5.00 4.85	6.65	5.34	3.19	2.53 3.30	0.63	12.13	10.82	9.34	8.78	060
		Α.	Repair of foot bones	9.17	N	Y Y	2.67	6.47	1.43	N A	Y Y	16.27	17.07	060
28322		∢ ላ	Repair of metatarsals	8.33 6.07	9.92	9.38	5.39	6.11	1.27	19.52	18.98	14.99	15.71	060
28341		< <	Resect enlarged toe	8.52	8.57	7.36	4.38	4.71	1.01	18.10	16.89	13.91	14.24	060
28344		< <	Repair extra toe(s)	4.25	6.74	6.01	3.13	3.51	0.51	11.50	10.77	7.89	8.27	060
28360		∢ ∢	Reconstruct cleft foot	14.57	7./2 NA	0.03 V	3.82 6.24	9.45	0.80	24.43 VA	3.30 NA	23.09	26.30	060
		. Α	Treatment of heel fracture	2.16	3.34	3.57	2.89	3.02	0.35	5.85	6.08	5.40	5.53	060
28405		< <	Treatment of heel fracture	4.56	4.47	4.75	3.70	4.40	0.73	9.76	10.04	8.99	9.69	060
28406		< ⊲	Treatment of heel tracture	6.36	4 4 Z Z	∀	10.70	12.67	1.11	Z Z	₹ ¤	30.80	33.95	060
28420		(∢	Treat/graft heel fracture	16.98	₹ Z	Z Z	86.6	12.21	2.80	Z Z	Z Z	29.76	31.99	060
		⋖	Treatment of ankle fracture	2.09	3.10	3.33	2.55	2.57	0.31	5.50	5.73	4.95	4.97	060
28435		∢ •	Treatment of ankle fracture	3.39	3.72	3.85	3.04	3.57	0.55	7.66	7.79	6.98	7.51	060
28436		< <	Treat ankle fracture	4.70	₹ ₹	Z Z	9.79	5.65 10.68	0.81	A N	Z Z	10.30	30.75	060
28450		< <	Treat midfoot fracture, each	1.90	2.90	3.07	2.40	2.46	0.28	5.08	5.25	4.58	4.64	060
28455		⋖	Treat midfoot fracture, each	3.09	3.47	3.44	2.84	3.28	0.44	7.00	6.97	6.37	6.81	060
28456		∢ <	Treat midfoot fracture	2.68	Y S	Z Z	3.46	3.99	44.5	Y S	Y S	6.58	7.11	060
		< ⊲	Treat metatarsal fracture	00.7	280	4 V	9.30	0.99	- 0	4 Z	7 Y	13.14	47.13	060
28475		< <	Treat metatarsal fracture	2.97	3.14	3.29	2.52	3.05	9.0	6.55	6.70	5.93	6.46	060
28476		< <	Treat metatarsal fracture	3.37	Y Z	Z Z	4.17	4.79	0.54	Y S	Z Z	8.08	8.70	060
28485		∢ ∢	Treat metatrical tracture	5.70 1.09	2.09	204 204	1.67	1.65	0.83	332 332	3.27	20.1	2.88	060
28495		< <	Treat big toe fracture	1.58	2.45	2.25	1.85	2.02	0.20	4.23	4.03	3.63	3.80	060
28496		∢ <	Treat big toe fracture	2.33	7.14	7.99	2.86	3.12	0.36	9.83	10.68	5.55	5.81	060
28505		۷ ح	Treatment of toe fracture	3.80 1.09	1.43	1.95	2.23	1.55	0.30	6/	2.3	5. c	0.10	060
		< <	Treatment of toe fracture	1.46	2.22	1.98	1.82	1.88	0.18	3.86	3.62	3.46	3.52	060
28525		∢ ·	Treat toe fracture	3.32	6.84	7.36	2.87	3.30	0.49	10.65	11.17	6.68	7.11	060
28530		∢ ላ	Treat sesamoid bone fracture	1.06	1.63	1.49	45.1 90.0	1.42	0.14	2.83	9.29	2.54	2.62	060
28540		. ∢	Treat foot dislocation	2.04	2.74	2.49	2.30	2.38	0.26	5.04	4.79	4.60	4.68	060
28545		⋖・	Treat foot dislocation	2.45	3.28	2.58	2.68	2.43	0.37	6.10	5.40	5.50	5.25	060
28546		∢ ∢	I reat 1001 dislocation	3.20 6.35	99.7	LL./	3.43	4.15	1 0.52	17.12	10.83	12.28	12.88	060
		< <	Treat foot dislocation	1.66	2.57	2.47	1.98	2.25	0.23	4.46	4.36	3.87	4.14	060
28575		< <	Treat foot dislocation	3.31	4.32	3.88	3.63	3.71	0.56	8.19	7.75	7.50	7.58	060
28576		< <	Densit foot dislocation	4.40 10	AN O	1 A A	3.92	4. IZ	0.09	NA 01 01	17 21	9.01	9 t	060
28600		τ «	Treat foot dislocation	1.89	3.02	2.87	2.37	2.63	0.27	5.18	5.03	4.53	4.77	060
28605		⋖	Treat foot dislocation	2.71	3.69	3.27	3.10	3.12	0.40	6.80	6.38	6.21	6.23	060
28606		⋖ <	Treat foot dislocation	4.89	A Z	A Z	4.26	4.59	0.82	 Z Z	Z Z	9.97	10.30	060
28630			Treat toe dislocation	1.70	1.94	1.66	0.93	0.98	0.20	3.84	3.56	2.83	2.88	010
			Treat toe dislocation	1.91	2.24	2.08	1.31	1.48	0.26	4.41	4.25	3.48	3.65	010
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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

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CPT 1 HCPCS 2	Mod	Status	Description	Physician work RVUs ³	Fully implemented non-facility PERVUs	Year 2007 transi- tional non-facil- ity PE RVUs	Fully implemented facility	Year 2007 transi- tional fa- cility PE RVUs	Mal-prac- tice RVUs	Fully im- plement- ed non- facility total	Year 2007 transi- tional non-facil- ity total	Fully implemented facility	Year 2007 transi- tional fa- cility total	Global
28636 28645		۷ ۷	Treat toe dislocation	2.77	4.36	4.00	2.03	2.48	0.43	7.56	7.20	5.23 7.92	5.68	010
28660			Treat toe dislocation	1.23	1.29	1.27	0.77	0.79	0.13	2.65	2.63	2.13	2.15	010
28666			Treat toe dislocation	2.66	5.25	5.74	1.89	2.42	0.20	8.34	8.83	4.98	5.51	010
		∢.	Repair of toe dislocation	2.92	99.9	7.04	2.83	3.23	0.45	10.03	10.41	6.20	09.9	060
28705		∢ ∢	Fusion of foot bones	20.04	Y Z	Z Z	10.54	11.99	3.08	Z Z	A A	33.66	35.11	060
28725		∶∢	Fusion of foot bones	11.89	Z	Z Z	6.79	7.89	1.86	Z Z	Z	20.54	21.64	060
28730		∢ <	Fusion of foot bones	12.11	Y Z	A Z	7.63	8.28	1.70	A Z	Y Z	21.44	22.09	060
28737		< <	Revision of foot bones	10.75	Z Z	Z Z	5.97	6.61	1.47	Z Z	Z Z	18.19	18.83	060
28740		∢ •	Fusion of foot bones	9.01	10.82	10.87	5.94	6.35	1.22	21.05	21.10	16.17	16.58	060
28755		∢ ∢	Fusion of big toe joint	8.29 4.73	7.21	11.64	3.34	3.65	0.65	12.59	11.77	15.26 8.69	9.61	060
		< <	Fusion of big toe joint	8.86	98.6	8.46	5.24	5.46	1.05	19.77	18.37	15.15	15.37	060
28800			Amputation of midfoot	8.56	Y S	¥ :	5.05	5.62	1.15	¥ :	¥ :	14.76	15.33	060
28805		∢ ⊲	Amputation thru metatarsal	12.47	A A	A Z	6.04	5.76	1.18	A Z	A Z	19.69	19.41	060
28820			Amputation of toe	4.82	7.74	7.61	3.58	3.74	0.61	13.17	13.04	9.01	9.17	060
28825			Partial amputation of toe	3.64	7.21	7.06	3.15	3.41	0.50	11.35	11.20	7.29	7.55	060
29000			High energy eswt, plantar t	8.30 9.30	4.59	3.40	1 81	1 76	0.41	8.30	91.6	5.98	5.85	060
			Application of body cast	2.06	3.33	3.30	1.30	1.66	0.45	5.84	5.81	3.81	4.17	000
29015			Application of body cast	2.41	3.32	3.07	4.	1.56	0.28	6.01	5.76	4.13	4.25	000
29025			Application of body cast	2.40	3.58	3.26	1.56	1.79	0.28	6.42	6.10	3.83	4.63	8 8
			Application of body cast	1.77	3.66	3.63	1.46	1.55	0.28	5.71	5.68	3.51	3.60	000
29040			Application of body cast	2.22	3.59	2.75	1.47	1.50	0.36	6.17	5.33	4.05	4.08	000
29046			Application of body cast	2.41	4.16	3.47	3.7.	2.02	0.42	6.99	6.30	4.60	4.85	800
29049			Application of figure eight	0.89	1.16	1.27	0.61	0.55	0.13	2.18	2.29	1.63	1.57	000
29055			Application of shoulder cast	1.78	2.88	2.96	1.29	1.43	0.30	4.96	5.04	3.37	3.51	000
29065			Application of long arm cast	0.87	1.27	1.32	0.69	0.74	0.15	2.29	2.34	1.71	1.76	000
29075		∢ <	Application of forearm cast	0.77	01.1	1.22	0.65	0.67	0.13	2.00	2.12	1.55	1.57	000
29085			Apply nand/wrist cast Apply finger cast	0.87	2. L 2. L 3. L	7.2.1	0.53	0.64	0.07	1.72	1.67	1.69	1.65 1.95	000
		< <	Apply long arm splint	0.87	1.08	1.19	0.53	0.52	0.12	2.07	2.18	1.52	1.51	000
29125		∢ <	Apply forearm splint	0.59	0.96	1.01	0.42	0.40	0.07	1.62	1.67	1.08	1.06	000
29126		∢ ∢	Apply forearm splint	0.70	0.100	01.10	0.47	0.46	0.0	1.84 0.99	1.00	1.31	05.1	8 8
29131		< <	Application of finger splint	0.55	0.62	0.71	0.26	0.25	0.03	1.20	1.29	0.84	0.83	800
29200		∢ •	Strapping of chest	0.65	0.61	0.69	0.35	0.34	0.04	1.30	1.38	1.04	1.03	000
29240			Strapping of low back	0.04	0.67	0.69	0.38	0.38	0.0	8 4. 8 4.	1.58	1.15	00. 1	000
			Strapping of elbow or wrist	0.55	0.65	0.72	0.36	0.33	0.05	1.25	1.32	96.0	0.93	000
29280			Strapping of hand or finger	0.51	0.66	0.77	0.37	0.33	0.03	1.20	1.31	0.91	0.87	000
29325			Application of hip cast	2.32	3.66	3.57	1.73	1.90	0.33	6.38	6.29	4.45	4.62	800
			Application of long leg cast	1.40	1.65	1.74	0.93	1.03	0.24	3.29	3.38	2.57	2.67	000

ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

ADD	ADDENDUM B	ַב 	RELATIVE VALUE UNITS (RVUS) AND F	AELA I EU	INFORMA	RELATED INFORMATION USED	Z	DE I ERMINING	MEDICARE	KE PAYMENIS	ENIS FOR		ZOO/ ——CONTINUED	Ë
CPT 1 HCPGS 2	Wod	Status	Description	Physician work RVUs ³	Fully implemented non-facility PE	Year 2007 transi- tional non-facil- ity PE RVUs	Fully implemented facility	Year 2007 transi- tional fa- cility PE RVUs	Mal-prac- tice RVUs	Fully im- plement- ed non- facility total	Year 2007 transi- tional non-facil- ity total	Fully implemented facility	Year 2007 transi- tional fa- cility total	Global
29355		∢ <	Application of long leg cast	1.53	1.61	1.69	0.93	1.07	0.26	3.40	3.48	2.72	2.86	000
29365		∢ ∢	Apply long leg cast brace	24.1	1.56	1.64	0.92	0.92	0.20	2.94	3.02	2.22	2.30	000
29405		⋖ .	Apply short leg cast	0.86	1.19	1.21	0.65	0.70	0.14	2.19	2.21	1.65	1.70	000
29425		∢ <	Apply short leg cast	1.01	1.22	1.23	0.65	0.72	0.15	25.38	2.39	1.81	 88. c	000
29440		< <	Apply short leg cast	0.57	0.61	0.67	0.25	0.30	0.20	1.26	1.32	0.90	0.92	88
		< <	Apply rigid leg cast	1.78	1.60	1.76	0.91	0.95	0.27	3.65	3.81	2.96	3.00	000
29450		∢ •	Application of leg cast	2.08	1.50	1.48	0.84	1.03	0.27	3.85	3.83	3.19	3.38	000
29505		∢ ⊲	Application, long leg splint	0.69	1.05	0.15	0.44	0.45	80.0	1.82	1.92	1.2.1	 	88
29520		< <	Strapping of hip	0.54	0.67	0.81	0.38	0.45	0.03	1.24	1.38	0.95	1.02	000
29530		∢ <	Strapping of knee	0.57	0.65	0.76	0.36	0.34	0.05	1.27	1.38	0.98	96.0	000
29550		(∢	Strapping of toes	0.3	10.56	0.46	0.30	62.0	90.0	- 60	20 66.0	0.83	0.88	888
29580		< <	Application of paste boot	0.57	0.72	0.67	0.34	0.35	0.07	1.36	1.31	0.98	0.99	000
29590		∢•	Application of foot splint	0.76	0.59	0.53	0.26	0.28	0.09	1.44	1.38	1.1	1.13	000
29700		∢ <	Removal/revision of cast	0.57	0.96	0.91	0.26	0.28	0.08	1.61	1.56	1 25	0.93	000
29710		< <	Removal/revision of cast	1.34	1.43	1.5.1	0.62	0.68	0.20	2.97	3.05	2.16	2.22	888
		⋖		0.94	1.12	1.16	0.40	0.40	0.09	2.15	2.19	1.43	1.43	000
29720		∢ •	Repair of body cast	0.68	4.1	1.16	0.34	0.38	0.12	1.94	1.96	1.14	1.18	000
29730		∢ <	Windowing of cast	0.75	0.75	0.80	0.34	0.35	0.12	1.62	1.67	1.21	2, 5	000
29750		< <	Wedging of cast Wedging of clubfoot cast	1.26	40:-0 0:00	1.02	0.43	0.43	0.10	2.37	2.49	1.90	2.01	88
		⋖	Jaw arthroscopy/surgery	29.9	Ϋ́	N A	5.64	6.65	0.99	N A	N A	13.30	14.31	060
29804		⋖ •	Jaw arthroscopy/surgery	8.63	Y Z	Y S	7.33	7.56	1.38	Υ S	Y S	17.34	17.57	060
29806		∢ ∢	Shoulder arthroscopy, dx	2.88	4 4 2 2	ξ Z Z	00.4	10.70	20.1	A A	A Z	26.56	28.33	060
		⋖	Shoulder arthroscopy/surgery	14.38	A Z	A Z	9.10	10.54	2.41	A Z	Y Y	25.89	27.33	060
29819			Shoulder arthroscopy/surgery	7.61	Y Z	Z Z	5.56	6.50	1.32	¥ S	¥:	14.49	15.43	060
29820			Shoulder arthroscopy/surgeryShoulder arthroscopy/surgery	7.06	4 4 2 2	Z Z	5.12 8.72	5.96	2. 5.	¥ Z	A N	13.40	14.24	060
29822			Shoulder arthroscopy/surgery	7.42	Z Z	ZZ	5.51	6.41	1.28	Z Z	ΣŽ	14.21	15.11	060
29823			Shoulder arthroscopy/surgery	8.16	Z Z	Z Z	5.96	6.92	1.41	Y S	¥:	15.53	16.49	060
29824			Shoulder arthroscopy/surgery	7.61	4 4 2 2	Y Z	0.43 75.7	6.48	24.5	A A	A N	16.61	15.44	060
			Shoulder arthroscopy/surgery	8.98	Ą Z	Z	6.11	7.19	1.55	Y Z	¥ Z	16.64	17.72	060
29827			Arthroscop rotator cuff repr	15.34	Y S	Y S	9.19	10.97	2.66	Y S	Y S	27.19	28.97	060
29830			Elbow arthroscopy/surgery	6.73	₹ ₹ Z Z	Z Z	44.4	2.50	1.08	Y Z	Y Z	12.18	12.94	060
			Elbow arthroscopy/surgery	6.47	Υ Z	Z Y	4.90	5.65	1.13	N A	N A	12.50	13.25	060
29836			Elbow arthroscopy/surgery	7.54	Y Z	Y :	5.48	6.48	1.22	Y :	Y :	14.24	15.24	060
29837			Elbow arthroscopy/surgery	6.86	∀	Y Z	5.06	5.88	1.19	Y Z	Y Z	13.11	13.93	060
29840			Wrist arthroscopy	5.53	(Z Z	45.5 45.5	5.14	0.84	₹ ₹ 2 Z	ζ ∢ Ζ Ζ	10.91	11.51	060
29843		⋖	Wrist arthroscopy/surgery	00.9	Ϋ́Z	NA	4.83	5.44	0.92	AN	AN	11.75	12.36	060
29844		∢ •	Wrist arthroscopy/surgery	6.36	ΨZ:	Υ :	4.87	5.60	1.04	Y :	Y :	12.27	13.00	060
29845		∢ ⊲	Wrist arthroscopy/surgery	6.74	A Z	 &	5.01 -	5.87	0.99	A Z	A Z	13.91	13.62	060 060
29847		< <	Wrist arthroscopy/surgery	7.07	¥ Z	Z	5.08	5.93	1.08	Z Z	Z Z	13.23	14.08	060
29848		∢	Wrist endoscopy/surgery	6.18	NA	A N	5.20	5.52	0.86	AN	NA	12.24	12.56	060
						:								

ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

100	AUDENDOM C.—TELATIVE	<u>:</u>	ELATIVE VALUE OINTS (1100S) AND I	ורר ר		200	ב ב ב		ול אולים אינו אינו אינו אינו אינו אינו אינו אינו	ן. ייין ר -		7007		ָב
CPT 1 HCPCS 2	Мод	Status	Description	Physician work RVUs ³	Fully implemented non-facility PE	Year 2007 transi- tional non-facil- ity PE RVUs	Fully implemented facility	Year 2007 transi- tional fa- cility PE RVUs	Mal-prac- tice RVUs	Fully implemented nonfacility	Year 2007 transi- tional non-facil- ity total	Fully im- plement- ed facility total	Year 2007 transi- tional fa- cility total	Global
29850		۷٠	Knee arthroscopy/surgery	8.18	AN :	A S	5.13	5.07	1.25	A :	A :	14.56	14.50	060
29851		∢ ⊲	arthroscopy/surgery	13.08	A Z	A A	8.16	9.41	2.5. 4.5.5.	4 4 Z Z	Ψ Z Z Z	23.58	24.83	060
29856		< ∢	Tibial arthroscopy/surgery	14.12	Z Z	Z Z	8.58	10.17	2.39	Z Z	Z Z	25.09	26.68	060
		⋖		8.79	N A	A A	6.11	92.9	1.36	A A	N A	16.26	16.91	060
29861		۷.	Hip arthroscopy/surgery	9.89	Y :	Y :	6.51	7.15	1.59	Y :	ΨZ:	17.99	18.63	060
29862		∢	Hip arthroscopy/surgery	10.89	Z Z	Y Z	7.48	8.31	29.5	¥ Z	¥ Z	19.99	20.82	060
29866		< <	Autarft implot, knee w/scope	14.38	ζ	₹ Z	9:36	10.88	2.39	Z Z	Z Z	26.13	27.65	060
		< <	Allgrft implnt, knee w/scope	18.08	A N	A A	11.02	12.70	2.78	N A	N A	31.88	33.56	060
29868		۷,	Meniscal trnspl, knee w/scpe	24.79	Y Z	¥ :	13.64	16.04	4.35	Y :	Y S	42.78	45.18	060
29870		۷ ۵	Knee arthroscopy, dx	5.06 54.06	A A	A A	4.11 4.94	7.70	0.85	4 4 2 2	4 4 2 2	10.02	13.33	060
		< ∢	Knee arthroscopy/surgery	5.99	Z Z	Z Z	5.52	6.32	1.0	Z Z	Z Z	12.55	13.35	060
		⋖	Knee arthroscopy/surgery	7.04	N A	Υ Y	5.08	5.84	1 .	N A	A A	13.23	13.99	060
29875		۷.	Knee arthroscopy/surgery	6.30	Y S	Y :	4.83	5.61	1.09	¥ :	Y :	12.22	13.00	060
29876		∢ <	Knee arthroscopy/surgery	8.66	Z Z	Y S	6.12	18.0	1.37	Υ S	Υ S	16.15	16.84	060
29877		۷ ۵	arthroscopy/surgery	8 0.09 7 8 7 8	Z Z	Ψ Δ Ζ Ζ	9.08	40.0	02. 0	4 4 2 2	ξ δ	16.33	15.91	060
29880		< <	Knee arthroscopy/surgery	9.24	ζ	₹ Z	6.36	7.13	1.47	₹ 2	(<u>4</u>	17.07	17.84	060
•		< <	arthroscopy/surgery	8.50	Y Z	A A	6.07	6.75	1.34	N A	A A	15.91	16.59	060
29882		∢	Knee arthroscopy/surgery	9.39	Ϋ́	A A	6:39	7.04	1.50	Y Y	Y Y	17.28	17.93	060
29883		∢ •	Knee arthroscopy/surgery	11.53	Y S	Z :	7.50	8.69	1.92	¥ :	Y :	20.95	22.14	060
29884		∢ <		8.07	Υ < Ζ Ζ	Y S	5.90	6.52	1.27	Υ < Ζ 2	4 < Z Z	15.24	15.86	060
29886		< <	Knee arthroscopy/surgery	8.28	ζ	ζ <u> </u>	5.97	6.65	9.50	₹ ₹ 2 Z	ζ <u> </u>	15.55	16.23	060
		< <	arthroscopy/surgery	9.90	Y V	A A	6.91	7.69	1.57	A	N A	18.38	19.16	060
29888		۷,	Knee arthroscopy/surgery	14.06	Y Z	¥ :	8.17	9.72	2.41	¥ S	Y S	24.64	26.19	060
29889		∢ <	Knee arthroscopy/surgery	c0.71	4 < Z	₹ <u>₹</u>	10.53	99.11	2.78	4 < Z Z	4 < Z Z	30.36	31.82	060
29892		< <	Ankle arthroscopy/surgery	66.6 66.6	ζ	(6.45	7.43	g. 1.	₹ ₹ 2 Z	ζ <u> </u>	17.85	18.83	060
		< <		5.96	8.75	6.91	4.59	4.15	0.63	15.34	13.50	11.18	10.74	060
29894		⋖ .	Ankle arthroscopy/surgery	7.20	Y S	Y :	4.61	5.27	1.15	¥ :	Y :	12.96	13.62	060
29895		∢ ⊲	Ankle arthroscopy/surgery	6.98	Z Z	Z Z	4.45	5.23	1.1	¥ Z	∀	12.54	13.32	060
29898		< ∢	Ankle arthroscopy/surgery	8.31	Z Z	Z Z	5.19	5.96	1.28	Z Z	Z Z	14.78	15.55	060
29899		⋖	Ankle arthroscopy/surgery	15.13	A N	A A	9.12	10.21	2.40	AN A	AN.	26.65	27.74	060
29900		∢ •	Mcp joint arthroscopy, dx	5.66	Z Z	Y S	4.65	5.57	0.94	Υ :	Y S	11.25	12.17	060
2990		∢ ∢	Mcp joint arthroscopy, surg	6.37 6.94	K K	4 4 2 2	3.61	5.07	9	Y Y	4 4 2 2	11.67	13.88	060
30000		< <	Drainage of nose lesion	1.43	3.70	3.99	1.21	1.35	0.12	5.25	5.54	2.76	2.90	010
30020		⋖	Drainage of nose lesion	1.43	3.82	3.42	1.24	1.41	0.12	5.37	4.97	2.79	2.96	010
30100		∢ <	Intranasal biopsy	0.94	2.39	2.08	0.68	0.79	0.07	3.40	3.09	1.69	1.80	000
30110		∢ ⊲	Removal of nose polyp(s)	 	3.59 AN	3.34 NA	08. R	06.7	4 5	5.36 NA	0.0 V	3.07	3.27	010
30117		< <	Removal of intranasal lesion	3.16	16.76	14.08	4.46	4.60	0.26	20.18	17.50	7.88	8.02	060
		4	Removal of intranasal lesion	9.74	AN	Υ	7.61	8.82	0.78	N A	A A	18.13	19.34	060
30120		∢ •	Revision of nose	5.26	6.74	6.57	4.81	5.72	0.52	12.52	12.35	10.59	11.50	060
30124		∢ ⊲	Removal of nose lesion	3.10	4 4 2 2	Z Z	3.59 9.19	7.08	0.75	4 4 2 2	¥ \$	0.94	0.90 15.76	060
30130		۲ ۷	Excise inferior turbinate	3.37	Y Y	Z Z	5.21	5.51	0.31	Z Z	ξ ζ Z	8.89	9.19	060
	:	:				:	- 1].						

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

Ĩ	ADDENDOM B.—DELATIVE	֡֝֝֝֝֝֝֝֝֝֝ <u>֚</u>	VALUE OINIS (NVOS) AI	ובראובה	און טפט אטון איירט און טפול בול טא))			ט ו אפואודא ד פהאטוטפואן שאוואוואורפ ופס	יון איין ר		_/007	CONTINOED	<u> </u>
CPT 1 HCPCS 2	Mod	Status	Description	Physician work RVUs ³	Fully implemented non- facility PE RVUs	Year 2007 transi- tional non-facil- ity PE RVUs	Fully implemented facility	Year 2007 transi- tional fa- cility PE RVUs	Mal-prac- tice RVUs	Fully implemented non-facility total	Year 2007 transi- tional non-facil- ity total	Fully implemented facility	Year 2007 transi- tional fa- cility total	Global
30140		۷ ۷	Resect inferior turbinate	3.42	4 4 Z Z	4 4 Z Z	6.47	6.28	0.35	4 4 Z Z	4 4 Z Z	10.24	10.05	060
			Removal of nose	9.81	Y Y	Z Z	7.99	9.68	0.88	¥ Z	Z	18.68	20.37	060
30200			Injection treatment of nose	0.78	1.86	1.68	0.60	0.71	0.00	2.70	2.52	4. 5	1.55	000
30220			hasar sirius trierapy	- L	5.29	4.52	1.7	147	0.0	2.40	0.00 1.00 1.00 1.00	5.0	3.13	010
			Remove nasal foreign body	1.04	4.09	4.50	1.76	1.88	0.08	5.21	5.62	2.88	3.00	010
30310			Remove nasal foreign body	1.96	Y :	Y :	2.68	3.00	0.16	A :	Y S	4.80	5.12	010
30320	•		Remove nasal foreign body	4.51	Υ « Z Z	Y S	5.85	6.76	0.39	Y S	Y Z	10.75	11.66	060
30410			Reconstruction of nose	13.60	ζ	Z Z	14.12	17.35	4.42	Z Z	X X	29.14	32.37	060
			Reconstruction of nose	16.50	Y V	A A	14.47	17.09	1.46	N A	Z A	32.43	35.05	060
30430			Revision of nose	7.84	₹ Z	Υ S	12.60	15.20	0.77	₹ S	Z Z	21.21	23.81	060
30450			Revision of nose	19.26	ζ	ζ <u> </u>	15.82	20.42	1.96	Z Z	Z Z	37.04	41.64	060
			Revision of nose	10.20	Z Z	A A	7.05	9.24	1.03	Z A	Z	18.28	20.47	060
30462			Revision of nose	20.04	N A	N A	14.04	18.74	2.53	N A	N	36.61	41.31	060
30465			Repair nasal stenosis	12.12	Y :	¥:	10.08	11.52	1.06	Y :	Υ :	23.26	24.70	060
30520	•		Repair of nasal septum	7.63	Z Z	Y S	6.88 6.88	6./3	0.46	Y S	Y S	14.97	14.82	060
30545			Repair nasal defect	11.42	ζ	(9.88	11.42	1.70	ζ <u> </u>	ζ <u> </u>	23.00	24.54	060
			Release of nasal adhesions	1.26	4.88	4.81	1.84	2.07	0.10	6.24	6.17	3.20	3.43	010
30580			Repair upper jaw fistula	99.9	8.13	7.88	4.66	5.52	0.89	15.70	15.45	12.23	13.09	060
30600			Repair mouth/nose fistula	6.01	7.43	7.51	4.00	4.77	0.70	14.14	14.22	10.71	11.48	060
30630			Repair nasal septum defect	7.11	ζ	(<u>4</u>	96.9	7.72	0.61	ζ	ζ ζ Ζ	14.68	15.44	060
			Ablate inf turbinate, superf	1.09	3.98	4.10	1.94	1.93	0.09	5.16	5.28	3.12	3.11	010
30802			Cauterization, inner nose	2.03	4.55	4.60	2.27	2.35	0.16	6.74	6.79	4.46	4.54	010
30903			Control of nosebleed	1.45	3.04	2.80	0.37	0.51	0.0	6.2	4.47	20.5	20 2	88
			Control of nosebleed	1.97	3.69	3.56	0.45	0.68	0.17	5.83	5.70	2.59	2.82	000
30906			Repeat control of nosebleed	2.45	3.92	3.91	0.64	1.06	0.20	6.57	6.56	3.29	3.71	000
30915	-		Ligation, nasal sinus artery	10.07	Z Z	Z Z	7.67	6.46	0.58	A N	Z Z	13.60	14.35	060
30930			Ther fx, nasal inf turbinate	1.26	Z Z	Z Z	1.50	1.59	0.12	Z Z	Z Z	2.88	2.97	010
31000			Irrigation, maxillary sinus	1.15	2.98	2.88	1.22	1.36	0.09	4.22	4.12	2.46	2.60	010
			Irrigation, sphenoid sinus	1.91	N N	N S	2.49	3.06	0.15	N S	N S	4.55	5.12	010
31030			Exploration, maxillary sinus	5.91	9.65	11.06	5.93	6.49	0.60	16.16	17.57	12.44	13.00	060
31032			Explore sinus, remove polyps	92.9	N A	Ν	6.38	7.03	0.59	A A	A N	13.53	14.18	060
31040			Exploration behind upper jaw	9.59	Κ Σ Z	¥ ž	7.13	9.17	0.87	Y S	Z Z	17.59	19.63	060
31051			Sphenoid sinus surgery	7.10	ζ	Z Z	7.58	8.09	0.62	Z Z	Z Z	15.30	15.81	060
			Exploration of frontal sinus	4.27	Y V	A A	5.61	5.87	0.38	N A	Y Y	10.26	10.52	060
31075			Exploration of frontal sinus	9.33	Y Z	Y S	8.36	9.41	0.75	Y S	Y S	18.44	19.49	060
31080			Removal of frontal sinus	12.40	Z Z	4 Δ 2 Ζ	10.25	12.74	2.73	Z Z	Z Z	23.94	30.52	060
				14.67	Z Z	Z Z	11.64	13.07	1.19	Z Z	Z	27.50	28.93	060
31085				15.36	Y Z	Y Y	12.67	13.67	1.72	Y Z	Y Z	29.75	30.75	060
31086			Removal of frontal sinus	14.08	Z Z	Y S	11.48	12.86	1.07	Υ S	Υ S	26.63	28.01	060
31090			Exploration of sinuses	10.78	⊈	4 4 2 Z	12.11	12.47	0.94	ξ ς Z Z	ξ ς Z Z	23.83	24.19	060
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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

300			I DNA (SOVI) SIIND BOAR BUIRTELI	ובראובה		20	֓֝֝֝֜֝֝֜֝֝֝֝֓֞֝֝֝֓֓֞֝֝֡֝֟֝֡֝֟֝֡֝֟֝֟֝֟֝֟֝֟֝֟֝֜֜֟֝֟֝֜֜֝֟֝֜֝֡֡֟֝		אוובטוסאויו ג			7007		ב
CPT 1 HCPCS 2	Mod	Status	Description	Physician work RVUs ³	Fully implemented nonfacility PE	Year 2007 transi- tional non-facil- ity PE RVUs	Fully implemented facility	Year 2007 transi- tional fa- cility PE RVUs	Mal-prac- tice RVUs	Fully im- plement- ple non- facility total	Year 2007 transi- tional non-facil- ity total	Fully implemented facility	Year 2007 transi- tional fa- cility total	Global
31200		4	Removal of ethmoid sinus	4.96	AN	AN	7.32	8.76	0.29	AN	AN	12.57	14.01	060
31201		4	Removal of ethmoid sinus	8.45	A A	A N	8.11	8.93	0.82	A A	A A	17.35	18.17	060
31205		⋖	Removal of ethmoid sinus	10.40	Y Y	Y Z	9.33	11.27	0.67	₹ Z	₹ Z	20.40	22.34	060
31225		< ∙	Removal of upper jaw	26.34	Y :	Υ :	16.42	17.51	1.59	ΨZ:	Υ :	44.35	45.44	060
31230		< <	Removal of upper jaw	30.46	A C	N O	17.08	18.84	//.٢	Z ,	A L	49.31	70.13	060
31231		< <	Nasal/signs and assembly dx	0 - 0	3.30	3.37	0.68	0.83	0.00	4.4 9.7 70	4.36	1.87	2.02	000
		(⊲	Nacal/cipus endoscopy, dx	2.10	0.03	17.4	1 1	5. 7.	0.20	7 1 4	7.03	2.5	27.5	
31237		< ∢	Nasal/sinus endoscopy, surg	2.98	4.46	5.05	1.20	1.72	0.28	7.72	8.28	4.46	4.98	000
		⋖	Nasal/sinus endoscopy, surg	3.26	4.38	5.03	1.27	1.89	0.27	7.91	8.56	4.80	5.45	000
31239		⋖	Nasal/sinus endoscopy, surg	9.19	A A	Y Y	6.14	7.55	0.62	A A	Y Y	15.95	17.36	010
31240		⋖ ·	Nasal/sinus endoscopy, surg	2.61	Y :	Y :	1.10	1.58	0.24	₹ Z	Y :	3.95	4.43	000
31254		< <	Revision of ethmoid sinus	4.64	Υ S	Z Z	1.66	2.56	0.45	Υ S	Υ S	6.75	7.65	000
•		τ <	Exploration maxillary sinus	9.93	Υ < 2 2	ζ <u>ς</u>	2.23	3.00	0.70	Υ <u>Υ</u> Σ	₹ <u>₹</u> 2	9.97	45. T	88
31267		(∢	Endoscopy maxillary sinus	5.45	Z Z	(4 Z Z	2, 1	- 56.	0.55	(4 2 Z	Z Z	7 4.30	. 80 . 95	
		. ⋖	Sinus endoscopy, surgical	8.84	Z Z	Y Z	2.80	4.55	0.92	₹ Z	Ž	12.56	14.31	000
		4	Nasal/sinus endoscopy, surg	3.91	Ϋ́	AN	1.45	2.21	0.39	AN	AN	5.75	6.51	000
		4		4.57	AN	ΥN	1.63	2.52	0.46	Ϋ́	A A	99.9	7.55	000
31290		<		18.46	Ϋ́	A A	7.82	11.02	1.40	ΑN	A A	27.68	30.88	010
31291		⋖	Nasal/sinus endoscopy, surg	19.41	A A	Y V	8.42	11.49	1.68	Y Y	Y Y	29.51	32.58	010
31292		∢ ·	Nasal/sinus endoscopy, surg	15.75	Y :	Υ :	7.06	9.75	1.21	ΨZ:	¥:	24.02	26.71	010
31293		< <	Nasal/sinus endoscopy, surg	17.32	Υ S	Υ S	7.66	10.47	1.28	Υ S	Υ S	26.26	29.07	010
31300		< ⊲	Removal of larvax lesion	70. lo	ζ Δ Ζ Ζ	ξ	13.22	14.58	1.55	₹ 4 2 Z	₹ 4 2 Z	30.05	34.38	000
		. ≺	Diagnostic incision. larvnx	5.55	Υ Z	Υ Z	9.07	10.02	0.46	Z Z	Ź	15.08	16.03	060
		⋖	Removal of larynx	27.23	AN	N A	16.41	16.68	1.38	N	A A	45.02	45.29	060
31365		⋖	Removal of larynx	34.85	Y Y	Y Z	18.52	19.95	1.97	Z Z	Y Z	55.34	26.77	060
•		< <	Partial removal of larynx	27.11	Υ Ś	¥ ž	19.04	21.22	1.78	Y S	¥ S	47.93	50.11	060
		۲ ۵	Partial removal of larynx	92.73	ζ Δ Ζ Ζ	(d	19 92	24.70	1 74	₹ 4 2 Z	₹ 4 2 2	36.23 48.77	50.69	060
31375		< ∢	Partial removal of larynx	25.61	Z Z	Z Z	18.36	19.92	1.63	₹ 2 2	Z Z	45.60	47.16	060
31380		⋖	Partial removal of larynx	25.11	AN	A N	18.05	20.01	1.70	A Z	¥ Y	44.86	46.82	060
31382		⋖	Partial removal of larynx	28.11	Y Y	Y Z	20.22	21.31	1.67	Z Z	₹ Z	20.00	51.09	060
31390		< <	Removal of larynx & pharynx	38.72	Υ S	¥ ž	22.23	23.90	2.23	Υ S	∀ \$ 2 2	63.18	64.85	060
		< <	Reconstruct larynx & pnarynx	43.34	4 < 2 Z	4	20.33	12.18/	2.48	₹ < Z Z	₹ <u>₹</u> 2	72.15	73.69	060
31420		(∢	Removal of eniglottis	1.5	Z Z	(4 Z Z	72.1	0 0	0.00	(4 2 Z	ζ <u>Ψ</u>	19.78	21.18	060
31500		. ∢	Insert emergency airway	2.33	Z Z	Z Z	0.42	0.52	0.17	₹ Z	₹ Z	2.92	3.02	000
31502		⋖	Change of windpipe airway	0.65	0.16	0.27	0.20	0.26	0.05	0.86	0.97	06.0	96.0	000
31505		⋖	Diagnostic laryngoscopy	0.61	1.32	1.42	0.54	0.59	0.05	1.98	2.08	1.20	1.25	000
31510		< •	Laryngoscopy with biopsy	1.92	2.95	3.22	0.89	1.16	0.16	5.03	5.30	2.97	3.24	000
31511		< <	Remove foreign body, larynx	2.16	2.72	3.03	L9.0	20.1	0.70	5.07	5.38	3.26	3.3/	000
		< ⊲	Injection into vocal cord	2.07	Z.63 AN	0.0 V A	20.00 20.00	2.5	0.0	45.4 4 A	0.0 V A	3 6	3.50	
31515		< ∢	Laryndoscopy for aspiration	1.80	3.04	3.42	0.82	8 8	41.0	4.98	5.36	2.76	26.0	000
		< ∢	Dx laryndoscopy, newborn	2.56	Z Z	N A	1.07	4.	0.20	Z Z) Z	3.83	4.20	000
31525		⋖	Dx laryngoscopy excl nb	2.63	3.18	3.53	1.08	1.52	0.21	6.02	6.37	3.92	4.36	000
31526		⋖ ·	Dx laryngoscopy w/oper scope	2.57	Y S	¥ :	1.08	1.56	0.21	₹ Z	Y :	3.86	4.34	000
31527		< •	Laryngoscopy for treatment	3.27	Υ S	Υ ·	1.26	1.73	0.26	Ϋ́ Z	₹ Z	4.79	5.26	000
31529		∢ ∢	Laryngoscopy and dilation	2.37	A A	Z Z	1.07	S. 7.	0.19	Z Z	4 4 2 2	3.97	3.89 4.45	000
- 1 1									-	:	-			1

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

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CPT 1 HCPCS 2	Мод	Status	Description	Physician work RVUs ³	Fully implemented non- facility PE RVUs	Year 2007 transi- tional non-facil- ity PE RVUs	Fully implemented facility	Year 2007 transi- tional fa- cility PE RVUs	Mal-prac- tice RVUs	Fully im- plement- ed non- facility total	Year 2007 transi- tional non-facil- ity total	Fully implemented facility	Year 2007 transi- tional fa- cility total	Global
31530		44	Laryngoscopy w/fb removal	3.38	₹ ₹ Z Z	4 4 S	1.26	1.79	0.29	₹ ₹ Z Z	Y Y	4.93	5.46	000
31535		4 4	Laryngoscopy w/biopsy	3.16	A A	4 4 Z Z	1.24	1.81	0.26	4 4 Z Z	4 4 Z Z	4.66	5.23	000
31540		. ∢	Laryngoscopy w/exc of tumor	4.12	Z A	N A	1.51	2.29	0.33	Z A	Z Z	5.96	6.74	000
31541		∢ ◊	Larynscop w/tumr exc + scope	4.52	Y ₹	Z Z	1.62	2.50	0.37	Z Z	Z Z	6.51	7.39	000
31546		< <	Remove vc lesion scope/graft	9.73	Z Z	Z Z	3.62	4.64	0.78	Z Z	Z Z	14.13	15.15	800
31560		< <	Laryngoscop w/arytenoidectom	5.45	₹ S	Y S	1.83	2.83	0.43	Y S	Z Z	7.71	8.71	000
31570		< <	Laryngoscope w/vc inj	3.86	3.88	5.24	1.43	2.15	0.31	8.05	9.41	5.60	6.32	88
31571		۷,	Laryngoscop w/vc inj + scope	4.26	₹.	A S	1.55	2.35	0.35	A C	A S	6.16	96.9	000
31576		∢ ∢	Diagnostic laryngoscopy	1.97	3.24	3.56	0.92	1.20	0.09	5.73	5.67	3.03	3.31	900
		Α.	Remove foreign body, larynx	2.47	3.19	3.63	1.07	1.42	0.21	5.87	6.31	3.75	4.10	000
		∢ ላ	Removal of larynx lesion	2.84	3.61	4.12	1.16	1.43	0.23	6.68	7.19	4.23	4.50	000
31580		(∢	Revision of larynx	14.38	S Z	Q Z	13.18	15.27	.00.	N AN	N A	28.56	30.65	060
		V	Revision of larynx	22.73	A A	Z A	19.99	24.40	1.75	A A	N A	44.47	48.88	060
31584		∢ <	Treat larynx fracture	20.27	₹ S	∀	13.86	17.12	1.71	Y S	Y Z	35.84	39.10	060
31588		< <	Revision of larynx	14.48	¥ Ž	Z Z	11.11	13.02	1.06	Z Z	Z Z	26.65	28.56	060
		V	Reinnervate larynx	7.53	₹ Z	A A	11.97	14.68	0.84	Y Y	Y Y	20.34	23.05	060
31595		⋖ <	Larynx nerve surgery	8.69	Υ S	Z Z	8.77	10.13	0.68	Z Z	Z Z	18.14	19.50	060
31601		< ⋖	Incision of windpipe	/ · · · 4 44	4 4 2 2	ξ	1.78	2.3	0.80	¥ 4 Z Z	ξ	6.42	7.04	000
		٧	Incision of windpipe	4.14	A A	Z	1.09	1.56	0.44	N A	Z A	2.67	6.14	000
31605		∢ <	Incision of windpipe	3.57	₹ S	Y S	0.81	1.10	0.40	Z Z	Z Z	4.78	5.07	000
31611		(∢	Surgery/speech prosthesis	5.87	√	Z Z	6.36	06.9	0.46	Z Z	Z Z	12.69	13.23	060
		Α.	Puncture/clear windpipe	0.91	1.06	1.09	0.24	0.32	0.08	2.05	2.08	1.23	1.31	000
31613		< <	Repair windpipe opening	4.58	▼ \$ Z 2	Z Z	5.73	5.94	0.42	Z Z	Z Z	10.73	10.94	060
31615		∢ ∢	repair windpipe opening	2.39	2.18	2.50	0.93	1.13	0.38	4.43	4.75	3.18	3.38	888
		¥	Endobronchial us add-on	1.40	2.98	5.74	0.33	0.50	0.11	7.49	7.25	1.84	2.01	ZZZ
31622		< <	Dx bronchoscope/wash	2.78	5.21	5.56	0.88	1.02	0.18	8.17	8.52	3.84	3.98	000
31624		< <	Dx bronchoscope/lavage	2.88	5.32	5.67	0.88	0. 0.	0.13	8.33	8.68	3.89	4.02	000
31625		Α	Bronchoscopy w/biopsy(s)	3.36	5.46	5.74	1.00	1.16	0.18	9.00	9.28	4.54	4.70	000
31628		∢ <	Bronchoscopy/lung bx, each	3.80	6.93	7.01	1.08	1.25	0.18	10.91	10.99	5.06	5.23	000
31630		۲ ح	Bronchoscopy/rieedie bx, each	3.81	96. A	- Y - X	1.23	4.09.	0.32	NA NA	98: Y	5.36	5.73	88
:		⋖	Bronchoscopy, dilate w/stent	4.36	ΥZ	Z A	1.38	1.67	0.34	A A	A A	90.9	6.37	000
31632		⋖ <	Bronchoscopy/lung bx, addll	.03	0.85	0.82	0.23	0.29	0.18	2.06	2.03	4. 5	1.50	777
31635		(<	Bronchoscopy W/fb removal	3.67	5.16	2.89	1.1	1.35	0.10	2.40	24.7	5.02	2.60	700
			Bronchoscopy, bronch stents	4.30	A A	N A A	1.35	1.67	0.31	N A	N A A	5.96	6.28	000
31637		∢ ·	Bronchoscopy, stent add-on	1.58	ΨZ:	Y :	0.41	0.52	0.13	Y :	Y :	2.12	2.23	222
31638		∢ <	Bronchoscopy, revise stent	4.88	Ψ 4 2 2	Y S	1.53	1.87	0.22	Y S	Y Z	6.63	6.97	000
31641		< <	Bronchoscopy, treat blockage	5.05	₹ ₹ Z Z	₹ ₹ 2 Z	1.46	1.78	0.35	ζ ζ Z Z	Z Z	6.83	7.15	88
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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

CPT 1 HCPCS 2	Mod	Status	Description	Physician work RVUs ³	Fully implemented non-facility PE	Year 2007 transi- tional non-facil- ity PE RVUs	Fully implemented facility	Year 2007 transi- tional fa- cility PE RVUs	Mal-practice RVUs	Fully im- plement- ed non- facility total	Year 2007 transi- tional non-facil- ity total	Fully implemented facility	Year 2007 transi- tional fa- cility total	Global
31643		∢.	Diag bronchoscope/catheter	3.49	AN !	Y Y	1.03	1.18	0.20	Y Y	A N	4.72	4.87	000
31645		∢	Bronchoscopy, clear airways	3.16	1.4	5.04	0.95	80.0	0.16	8.03	8.36	4.27	4.40	99
31656		< <	Bronchoscopy, inj for x-ray	2.17	5.29	6.81	0.0	0.78	0.15	7.61	9.13	2.96	3.10	800
		4	Insertion of airway catheter	1.34	2.29	2.19	0.67	0.68	0.08	3.71	3.61	2.09	2.10	000
31708		∢ •	Instill airway contrast dye	1.41	1.27	1.85	0.42	0.45	0.07	2.75	3.33	1.90	1.93	000
31/10		∢ <	Insertion of airway catheter	S	¥	Z Z	0.45	0.42	20.0	4 4 Z Z	Y Z	1.8/	28. t	000
31717		< <	Bronchial brush biopsy	2.12	5.81	7.66	0.74	0.33	0.07	8.07	9.92	3.00	1.0.E	000
31720		. ∢	Clearance of airways	1.06	0.25	0.31	0.25	0.31	0.07	1.38	1.44	1.38	4.	000
31725		∢ •	Clearance of airways	1.96	0.44	0.60	0.4	0.55	0.14	2.54	2.70	2.54	2.65	000
31/30	_	∢ <	Intro, windpipe wire/tube	7.85	25.49 NA	8.02 N	0.71	0.93	12.0 20.1	28.55 NA	80.LL	32.77	33.99	000
31755		< <	Repair of windbibe	17.05	₹ ₹ 2 Z	Z Z	21.88	23.91	1.29	ζ <u> </u>	Z Z	40.22	42.25	060
		< <	Repair of windpipe	23.28	A Z	A Z	9.87	10.52	2.94	Y Z	¥ Z	36.09	36.74	060
		⋖	Reconstruction of windpipe	31.52	Ϋ́	A A	11.44	13.13	4.52	AN	A	47.48	49.17	060
31770		∢	Repair/graft of bronchus	23.44	Υ Z	Y Y	9.05	96.6	2.83	Y Z	Y Y	35.29	36.23	060
31775		⋖・	Reconstruct bronchus	24.46	Y :	Υ :	8.87	11.08	3.01	Υ ?	Υ :	36.34	38.55	060
•	•	∢ <	Reconstruct windpipe	19.62	¥	Ψ < Z Z	7.96	10.30	1.65	Υ S	Ψ < Z Z	29.23	31.57	060
31785	_	< <	Reconstruct wirtupipe	18.05	₹	₹	9.9	14-	2.24	¥ 2	ζ <u>δ</u>	36.13	20.07 00.00	060
31786		< <	Remove windpipe lesion	25.29	Z Z	Z Z	9.83	12.30	3.29	(Z Z	38.39	40.88	060
31800		⋖	Repair of windpipe injury	8.05	A N	A Z	8.31	9.03	0.79	Ϋ́	A N	17.15	17.87	060
31805		∢	Repair of windpipe injury	13.29	ΥN	N A	6.45	7.04	1.82	Ϋ́	N A	21.56	22.15	060
31820		∢ •	Closure of windpipe lesion	45.54	5.37	5.60	2.94	3.48	0.38	10.29	10.52	7.86	8.40	060
31825		۷ ۵	Repair of windpipe defect	6.92 4.49	6.69 7.74	7.43	8. 8. 8. 8. 8. 8.	3 82	0.53	14.14	14.88	85.17	12.48	060
32000		< <	Drainage of chest	1.54	2.46	2.91	0.46	0.48	0.08	4.08	4.53	2.08	2.10	000
		⋖	Treatment of collapsed lung	2.19	2.94	3.15	1.03	1.05	0.12	5.25	5.46	3.34	3.36	000
32005		∢.	Treat lung lining chemically	2.19	5.12	6.13	0.59	0.67	0.23	7.54	8.55	3.01	3.09	000
32019		∢ <	Insert pleural catheter	4.17	15.73	18.95	1.47	1.61	0.42	20.32	23.54	6.06	6.20	000
32035		۲ ۵	Exploration of chest	11 13	ζ	ζ 4	5 99	08.7	2.45	X Z	X A	18.38	18.29	060
		< <	Exploration of chest	12.14	Y Z	Z Y	6.31	6.42	1.43	Ą Z	A A	19.88	19.99	060
32095	-	∢.	Biopsy through chest wall	10.03	Ϋ́Z :	Y :	5.31	5.36	1.22	₹ Z	¥ :	16.56	16.61	060
32100	-	∢ <	Exploration/biopsy of chest	16.04	¥	Y S	7.19	7.68	2.23	∀ < ≥ ≥	Y Z	25.46	25.95	060
32120		< <	Re-exploration of chest	14.23	Z Z	₹ ₹	7.02	70.7	1.63	₹ ₹	₹ ₹ 2 Z	22.88	22.93	060
		4	Explore chest free adhesions	15.29	Ϋ́	A N	7.20	7.22	1.89	AN	A N	24.38	24.40	060
32140		∢ •	Removal of lung lesion(s)	16.50	Y :	Υ :	7.58	7.67	1.96	Υ ?	Υ :	26.04	26.13	060
32141		∢ ⊲	Remove/treat lung lesions	16.66	₹ 4 2 2	Ψ Φ Ζ Ζ	7.80	7.63	900	₹	¥ 4 Z Z	26.94	26.77	060
32151		< <	Remove luna foreign body	16.78	Z Z	ζ ζ Ζ Ζ	40.6	8.28	2 503	ζ ζ Ζ	ζ ζ Ζ	27.85	27.09	060
		4	Open chest heart massage	13.00	Ϋ́	A N	5.96	5.45	1.31	AN	A N	20.27	19.76	060
32200		⋖ ·	Drain, open, lung lesion	18.42	AZ	NA	9.10	8.75	2.13	Y Z	AN !	29.65	29.30	060
32201		∢ <	Drain, percut, lung lesion	60.0	20.79	20.77	1.40	1.33	0.24	25.02	25.00	5.63	5.56	000
32220		< <	Release of lund	26.31	(X X	12.24	12.80	3.56	ζ <u> </u>	¥ ₹	42.11	42.67	060
	_	< <	Partial release of lung	16.59	¥ Z	Z Z	7.61	7.66	2.06	Z Z	Z Z	26.26	26.31	060
32310		⋖	Removal of chest lining	15.13	Y Z	N A	7.05	7.32	1.99	AN.	A A	24.17	24.44	060
32320		∢ <	Free/remove chest lining	26.96	A S	Z Z	11.73	12.08	3.51	A V	¥ Ş	42.20	42.55	060
32400	-	: ا		0/-	7 - 7 - 7 - 7	2 :	0.00		5	70.4	5.	14.7	4.7	8

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

ADL	ADDENDOM D RELATIVE	<u>.</u>	VALUE UNITS (NVUS)	AND DELATED INFORMATION OSED IN				י ההסוטחויו מיוויוויים וחס	INITION		ATMEN IS FOR	7007		.
CPT 1 HCPCS 2	Mod	Status	Description	Physician work RVUs ³	Fully implemented non-facility PE	Year 2007 transi- tronal non-facil- ity PE RVUs	Fully implemented facility	Year 2007 transi- tional fa- cility PE RVUs	Mal-prac- tice RVUs	Fully im- plement- ed non- facility total	Year 2007 transi- tional non-facil- ity total	Fully implemented facility	Year 2007 transi- tional fa- cility total	Global
32402		۷ ۵	Open biopsy chest lining	8.85	NA 0.68	NA 0.67	4.84	5.05	1.07	NA 27.2	NA 17.5	14.76	14.97	060
	_	< <	Puncture/clear lung	2.18	N A A	A N	0.74	0.70	0.12	Z A	Ϋ́	3.04	3.00	000
32440		⋖	Removal of lung	27.11	Y V	Y Y	11.21	12.50	3.68	A A	¥.	45.00	43.29	060
32442		⋖・	Sleeve pneumonectomy	37.74	Υ :	Υ Σ	14.53	14.73	3.84	Υ :	Υ :	56.11	56.31	060
32445	•	∢ ⊲	Removal of lung	40.73 25.65	Z Z	Z Z	16.04	14.59	3.77	A Z	A A	30.48	59.03	060
32482		< <	Bilobectomy	27.22	√	Z Z	11.30	12.54	3.66	Z Z	Z Z	42.18	43.42	060
		< <	Segmentectomy	22.67	N A	A A	9.74	10.99	3.03	A A	N A	35.44	36.69	060
32486		⋖ ·	Sleeve lobectomy	31.72	₹ Z	A :	12.98	13.21	3.51	Y :	Y :	48.21	48.44	060
32488		∢ ¤	Completion pneumonectomy	32.69	Z Z	Y Z	13.02	13.62	3.80	₹ Z	Y Z	49.51	50.11	060
32500		C 4	Partial removal of lund	24.42	(4 2 Z	Z Z	10.53	11.93	3.25	(4 2 Z	Z Z	38.02	39.60	060
		< <	Repair bronchus add-on	4.68	ΥZ	A N	1.38	1.50	0.65	A A	Z Z	6.71	6.83	ZZZ
32503		⋖	Resect apical lung tumor	31.55	ΥZ	AN	12.41	14.44	4.37	ΥZ	A A	48.33	50.36	060
32504		∢ ·	Resect apical lung tum/chest	36.35	₹ Z	¥:	13.85	16.00	5.07	¥:	¥ :	55.27	57.42	060
32540		< <	Removal of lung lesion	23.68	▼ \$	▼	10.38	9.84	2.07	∀	Υ S	36.13	35.59	060
32601	_	∢ <	Thoracoscopy, diagnostic	5.45 7.05	₹ ₹ 2	¥	2.13	2.30	0.80	₹ ₹	4 4 Z Z	85.0	8.55	88
	_	(⊲	Thoracoscopy, diagnostic	7.80	(d	(4 2 Z	2.57	3 5	1 14	(4 2 Z	ζ 4	11.95	11 97	
32604		< <	Thoracoscopy, dragnostic	8.77	∑ Z	Z Z	3.10	3.37	1.25	. ∢ Σ Ζ	Z Z	13.12	13.39	800
		<	Thoracoscopy, diagnostic	6.92	Ϋ́	A A	2.59	2.83	1.00	Ϋ́	A N	10.51	10.75	000
		⋖		8.39	Ϋ́Z	AN	3.05	3.27	1.22	ΥZ	AN	12.66	12.88	000
32650		∢ •	Thoracoscopy, surgical	10.73	₹ Z	¥:	5.36	6.43	1.58	¥:	¥ :	17.67	18.74	060
32651		∢ <	surgical	16.28	Ψ ξ 2	¥ Ş	6.99	7.19	1.86	Ψ 2 2	Υ S	25.13	25.33	060
32653		< ⊲	Thoracoscopy, surgical	19.86	Z Z	4 Z	24.8	99.99	1.72	4 4 2 Z	Y Y	35.49 29.34	20.05 80.03 80.03	060
32654		< <		18.49	Z Z	¥ Z	7.37	7.51	1.63	Υ Z	Z Z	27.49	27.63	060
32655		⋖	Thoracoscopy, surgical	14.95	NA	A	6.64	7.11	1.89	AN	N A	23.48	23.95	060
32656		⋖ ·	Thoracoscopy, surgical	13.14	∢ Z	¥:	6.07	7.49	1.89	₹ Z	Y S	21.10	22.52	060
32657		∢ <		14.54	Z Z	Y Z	6.52	7.41	1.99	¥ Ş	Y S	23.05	23.94	060
•	-	(⊲	Thoracoccopy, surgical	11.82	(d	ζ Z	9.00	7 11	. 63	(d	ζ Δ Ζ Ζ	19.45	20.53	060
32660		< <		17.65	 { Z Z	Z Z	7.59	9.03	2.08	Z Z	Z Z	27.32	28.76	060
		⋖		13.23	Ϋ́Z	A	6.30	7.43	1.92	₹ Z	AN	21.45	22.58	060
32662		∢ •	Thoracoscopy, surgical	17.00	ΨZ:	¥:	7.28	8.46	2.17	¥:	Y :	26.45	27.63	060
32663		∢ ⊲	Thoracoscopy, surgical	19.96	∀	¥ Z	8.99 8.99	10.34	2.72	¥ Z	A Z	73.15/ 90.00	33.02 23.86	060
32665		(∢	Thoracoscopy, surgical	17.37	ζ « Z Z	Z Z	7.66	8.03	2.15	(4 2 Z	ζ <u> </u>	27.18	27.55	060
		< <		15.56	Ϋ́	AN	7.14	7.36	1.98	ΥZ	A	24.68	24.90	060
32810		⋖	Close chest after drainage	14.80	ΥZ	A	7.16	7.45	1.93	ΥZ	AN	23.89	24.18	060
32815		⋖ -	Close bronchial fistula	37.94	Y Z	A N	14.13	11.78	3.27	∢ Z	Y Z	55.34	52.99	060
32820		∢ •	Reconstruct injured chest	22.27	ΨZ:	¥:	11.58	12.05	2.52	Ψ.	Υ :	36.37	36.84	060
32851		∢ <	Lung transplant, single	40.72	▼ \$ 2	¥ ž	21.07	26.07	5.56	∀ \$ 2	Υ S	67.35	72.35	060
32852		∢ ⊲	Lung transplant Mith Dypass	44.3/	₹ ₹ Z Z	₹	24.10	30.97 20.74	9.00	₹ 4 2 2	₹ ₹ 2	/4.4/ 80.38	86.68	060
32854		< <	Lung transplant with bypass	53.60	(4 2 Z	Z Z	26.89	32.85	7.20	(4 2 Z	₹ ₹ 2	87.69	93.65	060
32900		<	Removal of rib(s)	23.66	Ϋ́	AN	68.6	9.91	2.93	A Z	AN	36.48	36.50	060
32905			Revise & repair chest wall	23.13	Ϋ́	ΑN	9.72	10.05	3.15	Y Y	A A	36.00	36.33	060
32906			Revise & repair chest wall	29.14	 V 2	A S	11.47	11.94	3.97	A S	A S	44.58	45.05	060
32940		_	Hevision of lung	Z1.18	NA	Z Y	۵.72	9.31	7.80	NA NA	NA NA	32.10	33.37	080
1 CPT 2000	מטק קיניי	or or or or	signal Applications Amorizant Applications of the signature of the signatu	+4~:- \ \	V PO140001	T clacelle	ממערמ/ממע	1						

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

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CPT 1 HCPCS ²	Mod	Status	Description	Physician work RVUs ³	Fully implemented non-facility PE	Year 2007 transi- tional non-facil- ity PE RVUs	Fully implemented facility	Year 2007 transi- tional fa- cility PE RVUs	Mal-prac- tice RVUs	Fully im- plement- ed non- facility total	Year 2007 transi- tional non-facil- ity total	Fully implemented facility	Year 2007 transi- tional fa- cility total	Global
32960		⋖ :	Therapeutic pneumothorax	1.84	1.65	1.72	0.70	0.60	0.16	3.65	3.72	2.70	2.60	000
32997		۷ ۵	lotal lung lavage	5.99	A N	A N	05.1	1.82	0.55	A Z	A N	8.04	98.80	000
33011		< <	Repeat drainage of heart sac	2.24	Z Z	Z Z	3.1.	0.89	0.15	Z Z	ΣŽ	3.52	3.28	000
		4	Incision of heart sac	8.41	A N	Υ Y	5.15	5.01	0.65	AN	¥	14.21	14.07	060
33020		∢ <	Incision of heart sac	14.84	Y S	Y S	6.59	6.75	1.79	¥ ž	Y S	23.22	23.38	060
33030		< <	Partial removal of heart sac	22.23	Υ	(9.35	9.50	2.83	Z Z	Z Z	34.41	34.56	060
		. ∢	Partial removal of heart sac	25.27	¥ ∀	Ϋ́	10.10	10.07	3.13	A A	Ž Ž	38.50	38.47	060
33050		∢ •	Removal of heart sac lesion	16.81	¥ :	Y S	7.70	7.82	2.14	¥ :	Z S	26.65	26.77	060
33120		∢	Removal of heart lesion	27.29	Z Z	4 Δ Ζ Ζ	08.00	90.0	9.69	4 Z	Z Z	36.51	36.99	060
33140		< <	Heart revascularize (tmr)	22.72	Z Z	Z Z	10.19	10.73	2.85	Z Z	Z Z	35.76	36.30	060
33141		⋖	Heart tmr w/other procedure	4.83	A A	Ν A	1.53	1.57	69.0	Y Y	Ϋ́	7.05	7.09	ZZZ
33200		∢ <		14.69	▼	₹ S	7.55	7.03	1.70	₹ S	Y Z	23.94	23.42	060
33206		< <	Insertion of heart pacemaker	7.27	 ₹ Z	Z Z	5.24	4.66	0.52	Z Z	Z Z	13.03	12.45	060
		4		9.03	N A	ΑN	5.89	4.98	0.59	ΥZ	NA	15.51	14.60	060
33208		⋖ ·	Insertion of heart pacemaker	8.12	Y Z	Y :	5.54	4.97	0.56	A :	Y S	14.22	13.65	060
33210		∢ <	Insertion of heart electrode	3.30	Y S	Y S	1.73	1.37	0.18	¥ ž	Y Z	5.21	4.85	000
33212		< <	Insertion of pulse generator	5.51	 ₹ Z	Z Z	3.82	3.48	0.43	Z Z	₹₹	9.76	9.42	060
		4	Insertion of pulse generator	6.36	AN	Υ V	4.35	3.89	0.45	AN	A	11.16	10.70	060
33214		∢ <	Upgrade of pacemaker system	7.74	₹ Z	Y S	5.48	5.05	0.58	¥ ž	ŽΞ	13.80	13.37	060
33215		∢ ⊲	Reposition pacing-delib lead	77.7	Z Z	4 Δ 2 Ζ	3.38 4.67	5.29 4.33	0.36	A A	A A	10.80	8.53 10.46	060
		. ∢	Insert lead pace-defib, dual	5.74	A A	Y Y	4.58	4.33	0.39	A A	Z Z	10.71	10.46	060
33218		⋖ <	Repair lead pace-defib, one	5.93	₹ S	Υ S	4.92	4.46	0.37	₹ Z	Y S	11.22	10.76	060
33222		۲ ۷	Revise pocket, pacenaker	4.95	Υ	(4 2 Z	4.39	4.46	0.37	ζ « Z Z	X	6.11	9.70	060
		< <	Revise pocket, pacing-defib	6.45	Z Z	A A	5.07	4.72	0.45	Z A	Z	11.97	11.62	060
33224		∢ <	Insert pacing lead & connect	9.04	Υ Υ	Υ S	5.15	4.30	0.54	Z Z	Y S	14.73	13.88	000
33226		۷ ح	E verring lead add-orr	89.8 8.68	¥ ₹ 2 Z	ζ <u> </u>	4.33	5.30 4.12	0.59	Z Z	Z Z	14.24	13.39	700
		⋖	Removal of pacemaker system	3.29	Y N	Y Y	3.35	3.30	0.22	A A	N	98.9	6.81	060
33234		∢ <	Removal of pacemaker system	7.81	Y Z	Y S	5.63	5.10	0.56	Y Z	Y Z	14.00	13.47	060
33236		< <	Remove electrode/thoracotomy	12.58	 ₹ Ζ	(4 2 Z	6.76	7.28	1.68	Z Z	Z Z	21.02	21.54	060
33237		⋖	Remove electrode/thoracotomy	13.69	A N	Υ	7.78	7.80	1.59	AN	NA	23.06	23.08	060
33238		∢ <	Remove electrode/thoracotomy	15.20	¥ ź	Y S	8.40	8.27	2.05	¥ ž	Y Z	25.62	25.49	060
33241		< <	Remove pulse generator	3.24	Z	(<u>4</u> Z	3.10	9:0 0:0	0.18	Z Z	ΣŽ	6.52	6.42	060
33243		⋖	Remove eltrd/thoracotomy	23.36	A N	N A	10.96	11.36	2.09	Y Y	NA	36.41	36.81	060
33244		∢ •	Remove eltrd, transven	13.74	Y S	Y S	9.73	9.12	0.99	¥ ż	¥ :	24.46	23.85	060
33245		< <	Insert epic eltra pace-dello	20.81	Υ < 2 2	₹ ≤	8.05	10.46	2.01	4 S	₹ 2	26.87	26.77	060
33249		< <	ilisert epic eitragerierator Eltra/insert pace-defib	14.96	ζ ζ Ζ Ζ	₹ ₹	10.55	8.92	0.77	Z Z	Z Z	26.28	24.65	060
		< <		25.75	Y Z	A A	10.24	10.85	3.18	A A	N A	39.17	39.78	060
33251		∢ <	Ablate heart dysrhythm focus	28.77	₹ Z	¥ ž	11.25	11.58	3.59	Υ S	Y S	43.61	43.94	060
33261		۲ ∢	Ablate heart dysrhythm focus	28.52	Υ Φ	ζ <u> </u>	11 49	11.72	3.45	(4 2 Z	ζ	49.13	43.94	060
33282		< <	Implant pat-active ht record	4.66	Z Z	Z Z	4.37	4.12	0.23	Z Z	Ž	9.26	9.01	060

ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

ADL	FINDOM	ADDENDOM D RELATIVE	VALUE UNITS (AVUS) A	ND RELATED INFORMATION USED IN	ANTOLNI	ION COL			DELERIMINA MEDICARE L'ATMENTS	1	בטר טוואי	/007		ם
CPT 1 HCPCS 2	Mod	Status	Description	Physician work RVUs ³	Fully implemented non- facility PE RVUs	Year 2007 transi- tional non-facil- ity PE RVUs	Fully implemented facility	Year 2007 transi- tional fa- cility PE RVUs	Mal-prac- tice RVUs	Fully implemented nonfacility total	Year 2007 transi- tional non-facil- ity total	Fully implemented facility	Year 2007 transi- tional fa- cility total	Global
33284		۷4٠	Remove pat-active ht record	3.00	ZZZ	4 4 5 Z Z Z	3.46	3.52	0.14	Y Y Y	4 4 5 Z Z Z	6.60	6.66	060
33305 33310		۷ ۷	Hepair of heart wound	33.67	Y Y	Δ Z Z Z	12.81	9.44	3.12	A A	4 4 Z Z	49.60 31.70	47.97 32.21	060
		∢ •	Exploratory heart surgery	26.01	Y :	¥ ?	10.51	10.81	3.27	₹ Z	Y :	39.79	40.09	060
33320		∢ ∢	Repair major blood vessel(s) Repair major vessel	18.42	Y Y	4 4 2 2	10.81	8.38	2.07	Ζ Z	Z Z	34.01	33.54	060
		Α.	Repair major blood vessel(s)	24.26	¥ Z	Z Z	9.95	10.28	2.85	Z Z	¥ Z	37.06	37.39	060
33330		⋖ ⋖	Insert major vessel graft	25.13 24.42	Y Z	4 4 Z Z	9.94	10.20	3.02	A A	Y Z	37.88	38.14	060
		٠٧٠	Insert major vessel graft	33.75	Y Z	∀ ?	13.13	13.31	4.27	Z Z	Y :	51.15	51.33	060
33400		∢ ∢	Repair of aortic valve	39.23 24.33	Y Y	4 4 2 Z	15.49	15.66	3.56	Y Y	¥ ¥	58.82	58.99 40.55	060
		< <	Valvuloplasty, w/cp bypass	25.31	Y Y	A A	10.70	13.43	3.54	A A	Z Z	39.55	42.28	060
33404		∢ ላ	Prepare heart-aorta conduit	39.97	A A	Z Z	12.40	14.04	4.32	A Z	A Z	47.93	49.57	060
33406		< ∢	Replacement of aortic valve	48.87	Z Z	Z Z	18.67	19.05	5.43	₹ ₹	Z Z	72.97	73.35	060
33410		۷,	Replacement of aortic valve	38.69	¥ S	Z Z	15.15	16.26	4.68	₹ Z	A S	58.52	59.63	060
33411		∢ ∢	Replacement of aortic valve	57.11	A A	Ψ Ψ Z Z	21.08	19.36	5.46	Z Z	A A	83.65	81.93 69.60	060
33413		< ∢	Replacement of aortic valve	55.27	A A	Y Y	20.25	20.72	6.51	Z Z	A A	82.03	82.50	060
33414		⋖・	Repair of aortic valve	39.27	Y S	Y S	16.30	14.70	4.56	¥:	¥:	60.13	58.53	060
33415		∢ ላ	Revision, subvalvular tissue	29.70	Z Z	₹ ₹	11.18	11.83	4.13	Z Z	A Z	45.01 54.55	45.66 54.51	060
33417		< <	Repair of aortic valve	29.13	Z Z	Z Z	12.30	13.31	9.4	Z Z	Z Z	45.52	46.53	060
		۷.	Revision of mitral valve	25.64	A :	Y :	8.74	9.38	1.81	¥.	¥:	36.19	36.83	060
33422		∢ <	Revision of mitral valve	29.57	Υ	Y S	12.61	13.42	3.93	▼	Y S	46.11	46.92	060
33426		< <	Repair of mitral valve	41.28	Y Y	₹ ₹	16.14	16.92	5.01	¥ ₹ 2 Z	ΣŽ	62.43	63.21	060
33427		Α.	Repair of mitral valve	42.78	¥ Z	Y S	16.52	18.70	6.07	A S	¥.	65.37	67.55	060
33430		∢ ∢	Replacement of mitral valve	49.81	Y Y	ς ς Z Z	18.82	17.71	3.08	Z Z	Y Y	73.71	72.60	060
		< <	Valvuloplasty, tricuspid	42.57	Y V	Y Y	16.20	13.76	3.86	A A	N A	62.63	60.19	060
33464		< <	Valvuloplasty, tricuspid	30.93	Y S	Z Z	12.84	13.38	4.14	ΥZ Z	Y Z	47.91	48.45	060
33468		(∢	Revision of tricuspid valve	32.78	 {	Z Z	15.74	14.20	4.06	Z Z	Z Z	52.58	51.04	060
		۷.	Revision of pulmonary valve	21.24	¥ :	¥ :	8.84	10.25	1.03	¥ :	¥:	31.11	32.52	060
33471		∢ ∢	Valvotomy, pulmonary valve	22.79	Y Z	4 4 2 2	7.07	9.39	8. 8. 5. 45.	4 4 Ζ Ζ	Υ Υ Σ Σ	33.47	37.09	060
: :		< <	Revision of pulmonary valve	25.85	Z Z	A A	12.31	11.26	3.21	₹ Z	A A	41.37	40.32	060
33475		∢ <	Replacement, pulmonary valve	44.81	Y S	Y S	16.89	15.78	4.92	ΥZ Z	₹ Z	66.62	65.51	060
33478		ζ «	Revision of heart chamber	27.34	Y Y	Z Z	11.15	12.61	3.88	Z Z	₹Ź	42.37	43.83	060
		۷.	Repair, prosth valve clot	29.67	A :	Y :	11.64	12.50	4.12	¥.	A :	45.43	46.29	060
33500		∢ ⊲	Repair heart vessel fistula	27.79	A A	₹ ₹	11.18	11.41	3.86	Ζ Z	Z Z	42.83 29.57	43.06 29.59	060
33502		< ∢	Coronary artery correction	21.65	Y Y	Z Z	9.42	10.68	2.99	Z Z	Z Z	34.06	35.32	060
33503		∢ ·	Coronary artery graft	22.21	Y :	Y :	10.80	10.02	1.77	A :	¥:	34.78	34.00	060
33504		< <	Coronary artery graft	25.26	Y Z	Y Z	10.37	11.47	3.35	▼ Z	¥ Z	38.98	40.08	060
33506			Repair artery, translocation	37.78	. Α Ζ Ζ	Z Z	16.92	15.18	4.65	 ₹ Z		59.35	57.61	060
33507			Repair art, intramural	31.33	N A	Z A	11.93	13.24	4.05	¥ Y	¥	47.31	48.62	060
TOO!	000	9000	00000 \	All minute	V	- Hacker	00 4 7 0, 0 0 4						_	

ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

	Appendon D.—Trecalive	<u>۔</u> د	LEATIVE VALUE (1100s) AND I	וררי)		·				,		1
CPT 1 HCPCS 2	Мод	Status	Description	Physician work RVUs ³	Fully implemented non-facility PE	Year 2007 transi- tronal non-facil- ity PE RVUs	Fully implemented facility	Year 2007 transi- tional fa- cility PE RVUs	Mal-practice RVUs	Fully implemented nonfacility total	Year 2007 transi- tional non-facil- ity total	Fully implemented facility	Year 2007 transi- tional fa- cility total	Global
33508		۷ ۵	Endoscopic vein harvestCABG. vein single	0.31	4 4 2 2	Z Z	0.10	0.10	0.04	A A	A A	0.45	0.45	ZZZ 080
		< <	CABG, vein, two	34.59	NA	A A	14.66	16.51	4.55	A A	N A	53.80	55.65	060
33512		∢ <	CABG, vein, three	38.73	₹ \$	Y S	15.96	17.23	4.66	Υ Σ	Υ S	59.35	60.62	060
33514		< <	CABG. vein, five	39.69 40.50	₹ ₹ 2 Z	Z Z	16.68	17.75	4.07	Z Z	X X	61.94	63.03	060
33516		< <	Cabg, vein, six or more	41.96	₹ Z	A A	17.58	18.53	5.11	¥ X	¥ X	64.65	65.60	060
33517		∢.	CABG, artery-vein, single	2.57	₹ Z	¥ :	0.80	0.83	0.39	¥ :	¥ :	3.76	3.79	777
33518		∢ ⊲	CABG, artery-vein two	4.84 11	₹ 4	A Z	1.50	1.56	1 0.73	Z Z	Z Z	10.7	10.45	77.
33521		< <	CABG, artery-vein, four	9.39	₹ Z	Z Z	2.93	3.04	1.37	Z Z	Z Z	13.69	13.80	777
33522		⋖	CABG, artery-vein, five	11.65	₹ Z	A A	3.60	3.77	1.77	A A	A A	17.02	17.19	ZZZ
33523		∢ <	Corpusar artery bypass/reon	13.93	A Z	A Z	4.35	4.49	2.12	▼ Z Z	Y Z	20.40 8.54	20.54 8 62	777
33533		(∢	CABG. arterial. single	37.38	₹ ₹ 2 Z	(4 2 Z	15.18	16.18	4.55	(4 2 Z	ζ ς Z Z	57.11	58.11	060
		< <	CABG, arterial, two	38.81	Ą Z	A A	15.92	17.30	4.69	¥ Z	¥ X	59.42	60.80	060
33535		⋖	CABG, arterial, three	41.48	A A	Y Y	16.88	17.86	5.01	Y Y	Y Z	63.37	64.35	060
33536			Cabg, arterial, four or more	40.79	₹ ?	¥ :	16.50	17.88	5.42	Υ 'n	¥:	62.71	64.09	060
33542		∢ <	Removal of heart lesion	32.65	₹ \$	A Z	12.79	12.97	4.37	₹ < Z Z	₹ S	49.81	49.99	060
33548		(∢	Restore/remodel. ventricle	42.46	₹ ₹ 2 Z	Z Z	16.72	18.69	5.51	(4 2 Z	ξ Υ	64.69	99.99	060
		< <	Open coronary endarterectomy	4.44		A A	1.36	1.43	0.65	₹ Z	¥	6.45	6.52	222
33600		⋖	Closure of valve	30.11		Y Y	12.61	12.57	4.41	Y Z	Y Z	47.13	47.09	060
33602		∢ <	Closure of valve	29.14		Y S	13.58	12.76	3.81	Ψ Z Z	Ϋ́ Z	46.53	45.71	060
33608		< ⊲	Repair anomaly w/conduit	2.5 5.0 8.0 8.0 8.0		(d	13.61	15.57	4.40	(4 2 Z	(d	50.03	49.10 50.42	060
33610		< <	Repair by enlargement	31.20		Z Z	11.17	13.02	4.55	Z Z	Z Z	46.92	48.77	060
		⋖	Repair double ventricle	35.47		A A	12.05	13.64	4.36	A A	A	51.88	53.47	060
		∢ <	Repair double ventricle	36.47		Z Z	13.15	14.68	5.28	Υ Ζ	Y Z	54.90	56.43	060
		∢ ⊲	Repair, modified fortial	38.92		Z Z	16.73	16.21	4.3-	ζ	4 4 2 2	92.30	53.05 60.77	060
33619			Repair single ventricle	48.56		Z Z	18.62	20.30	6.4	Z Z	Z Z	73.62	75.30	060
33641			Repair heart septum defect	28.47		¥ :	10.55	9.84	3.22	₹ :	Ž:	42.24	41.53	060
33645			Revision of heart veins	27.94		A Z	11.08	13.49	3 .3	Z Z	Z Z	42.80	43.34	060
33660		< <	Repair of heart defects	31.73		Z Z	12.27	13.21	4.48	Z Z	Z Z	48.48	49.42	060
33665		∢•	Repair of heart defects	34.75		¥ :	13.51	13.78	3.99	¥:	¥ :	52.25	52.52	060
33681		∢ ∢	Repair of neart septium defect	30.50		A A	13.08	14.41	4.04 4.04	Α Δ Ζ Ζ	4 4 2 2	50.00	50.95	060
		< <	Repair heart septum defect	34.27		A A	20.80	15.45	3.38	Ą Z	A N	58.45	53.10	060
33688		∢•	Repair heart septum defect	34.65		¥:	9.78	10.32	4.72	¥:	Ž:	49.15	49.69	060
33690		∢ <	Reinforce pulmonary artery	20.16		A S	8.74	9.83	1.96	₹ < Z Z	Ψ 2 2	30.86	31.95	060
33694		(∢	Repair of heart defects	35.47		Z Z	9.04	13.16	5.26	Z Z	Z Z	50.60	53.89	060
		⋖	Repair of heart defects	37.47		N A	22.18	16.73	4.08	ΥZ	A A	63.73	58.28	060
33702		∢ •	Repair of heart defects	27.07		¥ ž	11.76	12.39	3.67	₹ Z	₹ S	42.50	43.13	060
33720		∢ ⊲	Repair of heart defect	27.08 97.09		ζ Δ Ζ Ζ	11.35	12.08	4. 6. 7. 6. 8.8.	ζ	₹ 4 2 Z	40.55	48.13	060
33722		< <	Repair of heart defect	29.01		A A	8.51	12.55	1.30	Ą Z	A N	38.82	42.86	060
33730		⋖ ·	Repair heart-vein defect(s)	35.97		A :	13.47	13.99	5.01	₹ Z	A :	54.45	54.97	060
33732			Repair heart-vein detect	28.76 22.00		Z Z	9.66	13.81	3.67	σ Z Z Z	¥ ¥	33.57	33.06	060
- 1 1		- 1		i		T :	;	;				-)

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

Mod Status A A A A A A A A A A A A A A A A A A A	Description					10 A	Fully im- plement-	Year 2007 transi-	Fully im-	Year 2007 transi-	
		work ed r RVUs³ facilii RV	ed non-tional facility PE ity PE RVUs RVUs	ed facility PE RVUs	transi- tional fa- cility PE RVUs	mar-prac- tice RVUs	ed non- facility total		ed facility total	tional fa- cility total	Global
	Revision of heart chamber	24.12		10.93	11.64	3.08	Z Z Z Z	A A	38.13	38.84	060
	Major vessel shunt	22.02		11.54	10.57	1.16	Y S	¥ S	34.72	33.75	060
_	Major vessel shunt	22.40		7.03	0 0	3.73	4 4 2 Z	4 4 2 2	32.56	34.20	060
-	Major vessel shunt & graft	22.40		9.26	10.00	3.00	Ą Z	Y Z	34.66	35.40	060
4 •		23.37		8.48	10.90	3.69	Y S	¥ ?	35.54	37.96	060
۲ <	Major vessel snunt	8.00		2.23	2.56	1.19	¥ ¥	⊈	11.40	11.75	ZZZ
	Repair great véssels defect	39.00		11.10	13.82	5.72	N A	A A	55.82	58.54	060
	Repair great vessels defect	40.56		11.05	12.08	5.66	Z Z	₹ S	57.27	58.30	060
۲ <	Repair great vessels defect	32.79		9.94	13.76	4.98	Z Z	¥ ₹ Z Z	40.00	51.53	060
	Repair great vessels defect	34.45		13.53	15.27	5.07	Υ Υ	Y Z	53.05	54.79	060
∢ «	Repair great vessels defect	33.87		9.74	14.18	5.47	Y S	¥ ž	49.08	53.52	060
	Repair great vessels defect	42.58		15.44	16.57	6.18	₹ 4 Z Z	¥ Z	64.20 57.92	65.33	060
< <	Repair great vessels defect	43.83		12.19	17.40	3.67	ξ ξ Ζ	ζ ζ Ζ	59.69	64.90	060
	Repair great vessels defect	43.14		15.46	13.89	5.95	N A	A A	64.55	62.98	060
	Repair arterial trunk	41.70		11.19	15.37	5.69	Ϋ́ Z	¥ :	58.58	62.76	060
	Aortic suspension	17.22		9.71 7.45	7 96	4.02 2 45	₹ 4 Z Z	¥ Z	40.95	42.65 27.61	060
	Repair vessel defect	18.20		7.47	8.81	2.26	₹ Z	Z Z	27.93	29.27	060
	Repair vessel defect	20.14		6.30	8.92	3.19	N A	¥ Z	29.63	32.25	060
	Repair septal defect	21.19		9.15	10.49	3.12	Ψ.	Y ?	33.46	34.80	060
	Revise major vessel	16.59		8.53	8.42	2.84 2.34	¥ Z	▼	27.46	42.39 27.35	060
	Revise major vessel	17.61		5.87	8.20	2.67	Ϋ́	A N	26.15	28.48	060
	Revise major vessel	20.06		8.70	9.68	2.88	₹ Z	¥ :	31.64	32.62	060
	Remove aorta constriction	21.17		9.00	10.01	3 2 2	₹ ₹ ₹	Z Z	32.38	33.33	060
	Remove aorta constriction	21.81		08.6	10.36	3.17	Z Z	Z Z	34.28	35.34	060
	Repair septal defect	24.24		10.04	11.05	2.15	Ϋ́ Z	Y Z	36.43	37.44	060
_	Repair septal defect	32.31		13.28	14.47	4.47 7.77	₹	Ψ Φ Ζ Ζ	50.06 64.95	51.25	060
	Ascending aortic graft	43.88		16.31	17.40	6.35	ξ Z	₹	66.54	67.63	060
	Ascending aortic graft	48.52		17.87	18.52	6.57	A :	₹	72.96	73.61	060
	Thoracic aortic arch graft	45.87 35.64		16.88	13.04	0.60	∀	Z Z	53.80	74.46	060
	Thoracoabdominal graft	57.75		18.74	16.96	5.92	Υ Z	Z Z	82.41	80.63	060
	Endovasc taa repr incl subcl	34.44		11.00	12.88	2.74	Υ Υ	Y Z	48.18	90.09	060
	Endovasc taa repr w/o subcl	29.44		9.71	11.42	2.32	₹ S	Υ S	41.47	43.18	060
	Insert endovasc prostn, taa	20.95		FE. 7	8.74 2.46	2.10	4 4 Z Z	A A	30.36	31./9	080
	Endovasc prosth, delayed	17.95		6.51	7.82	1.79	Υ Z	¥ Z	26.25	27.56	060
	Artery transpose/endovas taa	15.92		4.32	4.97	2.17	₹ Z	Y Z	22.41	23.06	000
	Car-car bp grtf/endovas taa	20.00		6.73	6.92	2.72	∀	ΨZ Z	29.45	29.64	000
	Remove lung artery emboli	24.80		10.57		3 4.	Ç Z	 [36.81	36.13	060
	Surgery of great vessel	28.26		10.99	11.28	3.66	NA	Z A	42.91	43.20	060
	Repair pulmonary artery	25.10		10.43	11.77	3.69	A S	¥:	39.22	40.56	060
-	Repair pulmonary atresia	32.54		11.37	13.24	4.37	NA	AN	48.28	50.15	060
	444444444444444444444444444444444444444	<<<<<<<<<<<<<<<<<<<<<<<<<<<<<<<<<<<<<<	<<<<<<<<<<<<<<<<<<<<<<<<<<<<<<<<<<<<<<	Hepair arterial trunk A Revision of pulmonary artery A Adric suspension A Repair vessel defect A Repair septal defect A Repair septal defect A Revise major vessel A Revise major vessel A Remove aorta constriction A Remove aorta constriction A Repair septal defect A Recending aortic graft A Ascending aortic graft A Renovasc taa repr w/o subcl A Renovasc taa repr w/o subcl A Redovasc prosth, taa, add-on A Actery transpose/endovas taa A Redovasc prosth, delayed A Artery transpose/endovas taa A Remove lung artery emboli Surgery of great vessel A Repair pulmonary artersia	A Repair arterial trunk 47.70 NA A A Revision of pulmonary artery 77.22 NA A Repair vessel defect 17.20 NA A Repair vessel defect 20.14 NA A Repair septal defect 20.14 NA A Revise major vessel 16.59 NA A Revise major vessel 17.61 NA A Revise major vessel 16.59 NA A Revise major vessel 17.61 NA A Revise major vessel 17.61 NA A Revise major vessel 20.06 NA A Remove aorta constriction 22.73 NA A Repair septal defect 24.24 NA A Repair septal defect 24.24 NA A Ascending aortic graft 43.13 NA A Ascending aortic graft 43.14 NA A Thoracca aortic graft 45.87 NA	A Repair arterial trunk 41.70 NA A Revision of pulmonary artery 47.22 NA NA A Revise and of pulmonary artery 17.20 NA NA A Repair vessel defect 20.14 NA NA A Repair septal defect 20.19 NA NA A Revise major vessel 16.59 NA NA A Revise major vessel 16.59 NA NA A Revise major vessel 20.06 NA NA A Revise major vessel 17.61 NA NA A Remove aorta constriction 21.17 NA NA A Remove aorta constriction 21.81 NA NA A Repair septal defect 21.31 NA NA A Repair septal defect 21.31 NA NA A A Scending aortic graft 24.24 NA NA A Ascending aortic graft 48.52 NA NA A A Torraccerse aortic graft 24.24 NA NA A Torraccid aortic graft 24.24	A Hebpair arterial trunk 41.70 NA NA NA 17.19 A Aortic suspension A Repair vessel defect 17.20 NA NA 7.47 A Repair vessel defect 20.14 NA 7.47 A Repair septal defect 20.14 NA 9.71 A Repair septal defect 20.14 NA 9.30 A Revise major vessel 16.59 NA NA 9.06 A Revise major vessel 20.06 NA NA 9.06 A Remove aorta constriction 21.17 NA NA 9.30 A Remove aortic constriction 22.73 NA NA 9.30 A Remove aortic constriction 22.11 NA NA 9.30 A Remove aortic graft 43.13 NA NA 16.08 A Scending aortic graft 43.88 NA NA 16.08 A Ascending aortic graft 43.88 NA NA 16.08 A A Transverse aortic graft A Transverse aortic graft 45.87 NA	A Repear affectal trunk 41.70 NA NA 11.19 15.37 A Acritic suspension 41.70 NA NA 11.20 7.41 11.41 A Repair vessel defect 20.14 NA NA 7.47 8.81 A Repair vessel defect 20.14 NA NA 7.47 8.81 A Repair septal defect 20.14 NA NA 6.75 10.49 A Revise major vessel 16.59 NA NA 8.25 10.49 A Revise major vessel 17.61 NA NA 8.53 8.20 A Revise major vessel 17.61 NA NA 8.70 9.68 A Revise major vessel 17.61 NA NA 8.70 9.68 A Revise major vessel 17.61 NA NA 8.70 9.68 A Remove acrta constriction 21.17 NA NA 9.76 10.99 A Remove acrta constriction 22.73 NA NA 10.67 11.41	A Prepair actival fund. A 1.70 NA NA 9.17 1 1.50 S 69 A Acric suspension of cultural fund. A 2.70 NA NA 7.47 1.56 2.26 A Acric suspension of cultural fund. 27.20 NA NA 7.47 1.56 2.45 A Repair septial defect 20.119 NA NA 9.15 1.049 3.12 A Repair septial defect 20.114 NA NA 9.15 1.049 3.12 A Repair septial defect 20.13 NA NA NA 9.16 10.04 2.15 A Remove anglor vessel 20.06 NA NA 8.70 9.68 2.88 A Remove acria constriction 21.17 NA NA 9.06 10.01 2.15 A Repair septial defect 20.17 NA NA NA 9.06 10.01 2.15 A Repair septial defect 20.11 NA NA 10.04 9.06 10.01 2.15 A Repair septial defect	A Revision of pulmonary artery 27.20 NA NA 11.19 15.37 5.69 NA A Achde suspension of pulmonary artery 27.20 NA NA 11.19 15.37 15.69 NA A Achde suspension of pulmonary artery 27.20 NA NA 10.67 12.19 NA Revise major vessel defect 26.37 NA NA 10.67 12.19 NA NA 10.67	A Hepetra arterial trunk. 41.70 NA NA 1719 153.7 5.69 NA NA A Andic suspension of the control of

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

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CPT ¹ HCPCS ²	Мод	Status	Description	Physician work RVUs ³	Fully implemented non-facility PE	Year 2007 transi- tional non-facil- ity PE RVUs	Fully implemented facility	Year 2007 transi- tional fa- cility PE RVUs	Mal-practice RVUs	Fully implemented nonfacility	Year 2007 transi- tional non-facil- ity total	Fully implemented facility	Year 2007 transi- tional fa- cility total	Global
33922		۷ ۵	Transect pulmonary artery	24.05	Z Z	A A	11.61	11.10	3.09	Z Z	A A	38.75	38.24	090
		< <	Rpr pul art unifocal w/o cpb	31.23	A N	Y Z	10.03	13.53	4.60	A A	Y Y	45.86	49.36	060
33926		∢ (Repr pul art, unifocal w/cpb	44.66	Y S	Y S	14.31	16.88	6.20	Y S	Y Z	65.17	67.74	060
33935		r m	Transplantation, nearf/lung	61.56	∀	Z Z	19 19	28.66	9.03	Α Δ Ζ Ζ	¥ 2	98.66	99.25	060
33960		- -	External circulation assist	19.33	ζ ∢ Ζ Ζ	ZZ	5.63	5.10	2.66	ζ ζ Ζ	Z Z	27.62	27.09	000
		4	External circulation assist	10.91	₹ Z	N A	2.85	3.43	0.88	₹ Z	N A	14.64	15.22	ZZZ
33967		< <	Insert is percut device	4.84	Y S	Y S	2.50	2.01	0.35	Y S	Y Z	7.69	7.20	000
33970		۷ <	Nemove adruc assist device	6.74	¥ Z	ζ ζ Z Z	2.59	2.37	0.07	X X	ζ ζ Z Z	10.15	0.65 0.63	8 8
		⋖	Aortic circulation assist	11.89	A N	N A	6.17	90.9	1.25	AN	N A	19.31	19.20	060
33973		< <	Insert balloon device	9.75	Y S	Y S	3.94	3.48	1.26	Y S	Y Z	14.95	14.49	000
33975		۲ ۵	Implant ventricular device	20 97	₹ 4 2 2	₹ 4 2 Z	7.30	06.7	ა - ა ი	₹ 4 2 2	₹ 4 2 2	30.75	30.44	OSO X
33976		< <	Implant ventricular device	22.97	Z Z	Z Z	7.98	7.67	3.25	Z Z	ž Ž	34.20	33.89	X
33977		4	Remove ventricular device	19.99	AN AN	N	9.49	10.70	2.80	ΥZ	A	32.28	33.49	060
33978		< <	Remove ventricular device	22.43	₹ Z	Y S	10.66	11.50	3.30	Υ Ý	Y Z	36.39	37.23	060
33979		∢ <	Insert intracorporeal device	45.93	₹ S	Y S	14.55	14.86	6.95	₹ < Z Z	Y S	67.43	67.74	×××
34001		< <	Removal of artery clot	17.74	Ç Ç	Z Z	7.02	6.80	8. 48.	√	Z Z	26.60	26.38	060
		4	Removal of artery clot	16.85	Ϋ́	A N	7.07	7.62	2.20	Ϋ́	A Z	26.12	26.67	060
34101		4	Removal of artery clot	10.81	Y Y	A A	4.59	5.18	1.41	Y Y	A V	16.81	17.40	060
•		< <	Removal of arm artery clot	10.81	₹ Ş	Y S	4.66	5.19	1.40	Υ S	Z Z	16.87	17.40	060
34151		< ⊲	artery clot	18 40	4 4 2 Z	ξ	9.02	5.75	45	₹ ₹	Ψ	38.92 26.57	25.60	060
		< ∢	Removal of leg artery clot	17.67	Υ Z	Z Z	6.85	7.77	2.35	₹ Z	¥ Z	26.87	27.79	060
		∢ ·	Removal of vein clot	26.35	Y :	¥ :	9.79	10.47	3.09	Y :	Y :	39.23	39.91	060
34421		∢ ⊲	Removal of vain clot	13.25	¥ Z	Z Z	5.62	11 13	1.55	¥	Z Z	20.42	20.94	060
34471		(∢	Removal of vein clot	20.94	ξ ∢ Ζ Ζ	Z Z	7.58	5.89	1.18	ζ ζ Ζ	Z Z	29.70	28.01	060
		٧	Removal of vein clot	10.79	Ą Z	N	4.63	5.24	1.41	₹ Z	A	16.83	17.44	060
34501		< •	Repair valve, femoral vein	16.68	Ϋ́ Z	Y S	7.16	8.17	2.34	Y Z	Y :	26.18	27.19	060
34502		∢ ⊲	Reconstruct Vena cava	19.74	₹ ₹	Y Z	7 19	12.01	2.62	Α Ζ Ζ	A Z	42.45 29.25	30.94	060
34520		< <	Cross-over vein graft	18.99	A N	Z Z	9.51	8.73	2.28	A Z	¥ Z	30.78	30.00	060
34530		∢ ·	Leg vein fusion	17.69	₹ Z	Y :	8.10	8.50	1.73	Y :	Y S	27.52	27.92	060
34800		۷.		21.42	ΨZ:	Υ S	7.73	8.83	2.45	Υ S	Υ ź	31.60	32.70	060
34802		∢ ⊲	Endovas aaa repr w/2-p part	23.67	₹ ₹	Z Z	80.8 40.8	9.52	2 2.32	Α Ζ Ζ	A N	35.32	36.54	060
34804		< <	Endovas aaa repr w/1-p part	23.67	A Z	Z	8.47	9.49	2.29	Z Z	Z Z	34.43	35.45	060
34805		4	Endovas aaa repr w/long tube	22.55	AN A	A N	7.66	9.17	2.00	A Z	A N	32.21	33.72	060
34808		۷.	Endovas iliac a device addon	4.12	Ϋ́ Z	Y :	1.16	1.32	0.59	₹ Z	Y :	5.87	6.03	ZZZ
34812		∢ <	Xpose for endoprosth, temori	6.74	₹ Ş	Y S	1.79	2.13	1.18	Υ S	Y S	9.71	10.05	000
34820		< ∢	Xpose for endoprosth, iliac	9.79	ζ « Z Z	ζ <u> </u>	2.56	3.07	1.50	(4 2 Z	Z Z	13.80	14.31	277
		< <	Endovasc extend prosth, init	12.68	Ą Z	Y Y	5.43	5.98	1.28	A N	N A	19.39	19.94	060
34826		< •	Endovasc exten prosth, addll	4.12	Ϋ́ Z	Y S	1.21	1.33	0.44	Y Z	¥:	5.77	5.89	ZZZ
34830		∢ <	Open aortic tube prosth repr	35.04	₹ S	Y S	11.14	13.08	4.54	₹ < Z Z	Y S	50.72	52.66	060
34832		< <	Open aortofemor prosth repr	37.79	Z Z	X X	12.04	14.01	6. 4. 8. 4. 8. 84	Z Z	X X	54.67	56.64	060
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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

CPT 1 HCPCS 2 34833														
34833	Mod	Status	Description	Physician work RVUs ³	Fully implemented non-facility PE	Year 2007 transi- tional non-facil- ity PE RVUs	Fully implemented facility	Year 2007 transi- tional fa- cility PE RVUs	Mal-practice RVUs	Fully implemented in nortacility total	Year 2007 transi- tional non-facil- ity total	Fully implemented facility	Year 2007 transi- tional fa- cility total	Global
		⋖	Xpose for endoprosth, iliac	11.98	AN	AN	3.47	4.20	1.69	A N	NA	17.14	17.87	000
34834		∢ •	Xpose, endoprosth, brachial	5.34	Y S	¥ ?	1.70	2.08	0.76	¥ :	Y Z	7.80	8.18	000
35001		۷ ۵	Endovasc Illac repr W/gran	16.73	▼ 4 Z Z	Z Z	0.61	ري. / 1.35	98	4 4 2 2	A Z	25.33	26.07 32.58	060
35002		< <	Repair artery rupture, neck	22.05	Z Z	Z Z	8,09	9.31	2.99	Ž	₹ Z	33.13	34.35	060
		<	Repair defect of artery	19.11	Ϋ́	Ϋ́Z	8.75	8.84	1.76	Ϋ́	A Z	29.62	29.71	060
35011		Α,	Repair defect of artery	18.46	Y Z	Y Y	6.61	7.65	2.54	Y Z	₹ Z	27.61	28.65	060
35013		∢ <	Repair artery rupture, arm	23.04	Υ \$ Ζ 2	Υ S	8.23	6.33	3.09	ď s Z Z	₹ Ż	34.36	35.46	060
35021		∢	Repair defect of artery	22.03	▼	A Z	8.8 99.8	05.90	2, 86 4, 86	∀	Z Z	33.78	38.19	060
35045		< ∢	Repair defect of arm artery	17.91	. Υ Υ Υ Υ	Z Z	6:59	7.29	2. 2.	(Z Z	26.94	27.64	060
		4	Repair defect of artery	33.31	Y V	A A	10.82	11.32	4.00	Ϋ́	A N	48.13	48.63	060
35082		⋖ ·	Repair artery rupture, aorta	41.87	Υ Z	₹ Z	13.45	14.86	5.45	₹ Z	Y :	60.74	62.15	060
35091		∢ <	Repair defect of artery	35.35	Υ S	₹ ₹	10.80	12.90	5.12	₹ \$ Z Z	Υ S	51.27	53.37	060
35092		< <	Repair arery rupture, aorta	50.75	₹ 5	₹ < Z Z	15.5/	17.15	0.38	₹ ₹	₹ ₹	72.70	74.28	080
		۲ ∢	Repair artery riptine ordin	43 43	Z Z	Z Z	13.58	15.31	7.47	(4 2 Z	Z Z	62.25	92.34 64 48	060
35111		(∢	Repair defect of arterv	26.11	ζ 4 Ζ Ζ	(4 2 Z	08.8	10.07	3.46	(4 2 Z	ζ ζ Ζ	38.37	39.64	060
		. ∢	Repair artery rupture, spleen	32.38	Z Z	A Z	10.60	11.64	4.07	Ą Z	Y Z	47.05	48.09	060
35121		⋖	Repair defect of artery	31.35	٧Z	۷Z	10.75	11.99	4.29	Ϋ́Z	A N	46.39	47.63	060
35122		Α,	Repair artery rupture, belly	37.70	₹ Z	Y Y	12.21	13.43	4.74	Y Z	₹ Z	54.65	22.87	060
35131		⋖・	Repair defect of artery	26.23	ΨZ:	Y :	9.13	10.36	3.79	₹ Z	ΨZ:	39.15	40.38	060
35132		∢ <	Repair artery rupture, groin	32.38	Υ S	▼ × Z	10.56	11.95	4.29	ď s Z Z	Υ S	47.23	48.62	060
35141		< <	Bessir artery rinture thinh	20.79	₹ ₹	₹ ₹	14.7	00.00	2.89	₹ ₹	₹ ₹	37.09	32.24 38.31	060
35151		< <	Repair defect of arterv	23.55		Z Z	8.27	9.58	3.23	(ζ ∢ Ζ Ζ	35.05	36.36	060
			Repair artery rupture, knee	27.47	Ϋ́	ΥZ	9.47	10.92	3.60	A Z	A Z	40.54	41.99	060
35180			Repair blood vessel lesion	14.95	A A	AN	99.9	6.89	1.00	Ϋ́	A N	22.61	22.84	060
35182			Repair blood vessel lesion	31.52	Y ?	Y :	11.86	12.59	4.35	₹ Z	₹ :	47.73	48.46	060
35184			Repair blood vessel lesion	18.67	Υ S	Υ S	7.18	8.03	2.52	₹ \$ Z Z	Υ S	28.37	29.22	060
•			Repair blood vessel lesion	29 79	₹ 4 2 Z	(d	10.22	1.33	2.4	(d	ζ <u>4</u>	44.01	45.33	060
35190			Repair blood vessel lesion	13.27		Z Z	5.54	6.25	1.79	Z Z	Υ Z	20.60	21.31	060
			Repair blood vessel lesion	16.78	AN	A	6.59	7.66	2.33	Ϋ́Z	AN	25.70	26.77	060
35206		⋖ -	Repair blood vessel lesion	13.72	Y V	∢ Z	5.49	6.30	1.86	₹ Z	Y Y	21.07	21.88	060
35207		< <	Repair blood vessel lesion	10.79	▼ \$ 2 2	Υ Ś	44.6	7.14	1.48	ď s Z Z	Υ Ś	18.71	19.41	060
35216			Repair blood vessel lesion	36 43	Ψ Z	4 4 2 2	13.50	10.05	5 S	ζ	4 Z	52.57	38.17 49.20	060
			Repair blood vessel lesion	26.50	Z Z	Z	8.67	9.64	3.36	Z	Z Z	38.53	39.50	060
			Repair blood vessel lesion	15.18	Ϋ́	ΥZ	6.07	7.11	2.01	A Z	Ϋ́	23.26	24.30	060
35231			Repair blood vessel lesion	21.04	A A	ΥZ	7.87	9.31	2.88	ΥZ	A N	31.79	33.23	060
35236			Repair blood vessel lesion	17.90	Y Y	∢ Z	6.64	7.59	2.42	₹ Z	Y Z	26.96	27.91	060
35241			Repair blood vessel lesion	25.44	Υ ?	Υ ?	10.08	10.88	3.52	Y :	¥ ?	39.04	39.84	060
35246			Repair blood vessel lesion	28.11	₹ ₹	₹ < Z Z	12.33	11.6/	3.85	4 < 2 2	₹ <u>₹</u>	44.29	43.63	060
35256			Repair blood vessel lesion	18.94	ζ 4 Ζ Ζ	(4 2 Z	683	2 99	2 62	(4 2 Z	ζ	28.39	29.55	060
			Repair blood vessel lesion	18.84	Ϋ́	Ϋ́	7.43	7.88	2.60	A Z	ΥZ	28.87	29.32	060
35266		⋖	Repair blood vessel lesion	15.71	A A	ΥZ	5.87	6.73	2.09	ΥZ	A N	23.67	24.53	060
		۷.	Repair blood vessel lesion	24.44	Y ?	A :	9.78	10.35	3.15	Y :	Y Z	37.37	37.94	060
35276		∢ <	Repair blood vessel lesion	25.66	A S	 &	9.72	10.85	3.48	¥ ź	Z Z	38.86	39.99	060
		٤ .	hepair blood vessel lesion	79.67	YN.	¥N.	40.0	5.1	3.90	¥ 2	¥.	43.0/	40.14	060

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

	ים ואוטטאוםטטס.		HEEALIVE VALUE (11403) AIND I	ורראור		OLD OCED III)			-				נ
CPT 1 HCPCS 2	Mod	Status	Description	Physician work RVUs ³	Fully implemented non-facility PE	Year 2007 transi- tional non-facil- ity PE RVUs	Fully implemented facility	Year 2007 transi- tional fa- cility PE RVUs	Mal-prac- tice RVUs	Fully im- plement- ed non- facility total	Year 2007 transi- tional non-facil- ity total	Fully implemented facility	Year 2007 transi- tional fa- cility total	Global
35286		44	Repair blood vessel lesionRechanneling of artery	17.00 19.49	AN AN	A A A A	6.66	7.72	2.34	A A A	A N A	26.00	27.06 30.26	060
35311		∢ ⊲	Rechanneling of artery	28.48	Z Z	4 4 Z Z	9.84	11.29	3.41	Z Z	A N	41.73	43.18	060
35331		< <	Rechanneling of artery	27.55	Z Z	Z Z	9.29	10.77	3.82	Z Z	Z Z	40.66	42.14	060
35341		∢ ⊲	Rechanneling of artery	26.03	A A	4 4 Z Z	8.88	10.39	3.77	Z Z	A N	38.68	40.19	060
35355		< <	Rechanneling of artery	19.74	Z Z	ZZ	6.78	7.77	2.66	ZZ	Z Z	29.18	30.17	060
35361		۷,	Rechanneling of artery	30.05	A S	Z Z	10.02	11.30	4.14	Y S	A S	44.21	45.49	060
35371		∢ ∢	Rechanneling of artery	32.16	ς ς Z Z	4 4 2 2	10.84	6.67	25.32	₹ ₹ Z Z	X X	23.07	23.99 	060
		. ∢		18.46	N A	A A	6.61	7.70	2.62	Y Y	N A	27.69	28.78	060
35381		∢ <	Rechanneling of artery	16.63	Y Z	₹ S	6.57	7.52	2.25	Y S	Z Z	25.45	26.40	090
35400		< <	Angioscopy	3.00	₹ Ž	Z Z	0.78	50.	0.43	Z Z	Z Z	4.23	4.46	777
35450		< <	Repair arterial blockage	10.05	Ϋ́Z	A A	3.33	3.51	1.25	N A	N A	14.63	14.81	000
35452		∢.	Repair arterial blockage	06.9	₹ Z	¥:	2.18	2.50	0.94	¥ :	¥:	10.02	10.34	000
35454		∢ <		6.03	∀	Y Z	1.88	2.21	0.87	Y S	¥ ž	8.78	9.11	000
35458		τ «	Repair arterial blockage	9.48	(X Z	2.97	3.35	1.26	Z Z	¥ ₹	13.71	14.09	8 8
		< <		8.62	Ϋ́Z	A A	2.59	3.03	1.21	N A	N A	12.42	12.86	000
35460		Α.	Repair venous blockage	6.03	Z Z	AN	1.81	2.16	0.83	Y Y	N A	8.67	9.05	000
35470		∢ <	Repair arterial blockage	8.62	63.65	82.75	3.64	3.43	0.69	72.96	92.06	12.95	12.74	000
35472		τ «	Repair arterial blockage	06.9	49.41	92.31	2.97	2.79	0.58	56.89	68.24	10.39	10.27	8 8
		< <	Repair arterial blockage	6.03	48.33	57.09	2.62	2.48	0.51	54.87	63.63	9.16	9.05	000
35474		۷ ۷	Repair arterial blockage	7.35	62.75	81.67	3.14	2.96	0.57	70.67	89.59	11.06	10.88	000
35475		Υ 4	Repair arterial blockage	9.48 6.03	50.48	54.82	3.56	3.57	0.62	60.58	64.92	13.66	13.67	000
		. ⋖	Atherectomy, open	11.06	₹ Z	A A	4.03	4.05	1.28	A A	A N	16.37	16.39	000
35481		∢ <	Atherectomy, open	7.60	₹ S	Y Z	2.54	2.80	1.13	Y S	¥ ž	11.27	11.53	000
35483		< <	Atherectomy, open	9.08	ξ Z	X X	2.84	2.98	1.15	Z Z	₹ ₹ 2 Z	12.08	12.22	88
		4	Atherectomy, open	10.42	N A	AN	3.10	3.61	1.27	Y Y	N A	14.79	15.30	000
35485		∢ <	Atherectomy, open	9.48	Υ S	Y S	3.08	3.43	1.35	Y S	¥ ž	13.91	14.26	000
35491		۲ ح	Atherectomy, percutaneous	7.60	₹ ₹ Z	ζ Z Z	3.98	3.47	0.74	ζ ζ Z Z	Z Z	12.32	18.1	88
35492		∢.		6.64	¥ Z	Y:	3.73	3.33	0.43	YZ:	Y :	10.80	10.40	000
35493		∢ <	Atherectomy, percutaneous	8.09	∀	Y Z	4.29	3.93	0.56	Y S	Y Z	12.94	12.58	000
35495		< <	Atherectomy, percutaneous	9.48	Z Z	Z Z	4.79	4.50	0.69	ZZ	Z Z	14.96	14.67	888
35500		۷.	Harvest vein for bypass	6.44	₹ Z	Y :	1.74	1.96	0.93	¥2	Y :	9.11	9.33	ZZZ
35501		∢ ◊	Artery bypass graft	19.70	Z Z	Y Z	7.54	8.25	2.80	Y Z	Ψ Z	30.04	30.75	060
35507		< <	Artery bypass graft	20.60	Z Z	Z Z	7.83	9.05	2.84	ZZ	Z Z	31.27	32.49	060
35508		∢ •	bypass	25.95	¥ :	¥ :	9.84	9.56	2.77	Z Z	Y S	38.56	38.28	060
35510		∢ ∢	Artery bypass graft Artery bypass graft	18.94	ξ Z	ξ Z Z	7.98	9.30	2 2.0	4 4 2 2	Y Y	34.34	36.01	060
35511		< <	bypass	22.08	Z Z	A A	7.57	8.93	2.90	Y Y	A A	32.55	33.91	060
35512		۷.	bypass graft	23.75	₹ Z	¥:	7.83	9.48	2.1	Y S	¥ :	33.69	35.34	060
35515		∢ ∢	Artery bypass graft Artery bypass graft	25.95 24.07	Δ Z	σ σ Z Z	9.26 8.46	9.30	2.77	≼ ≼ Z Z	Z Z	37.98	33.63	060
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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

Ĭ	AUDENDOM B.—TRELATIVE	<u>.</u> ב	VALUE CIVILIS (110 CS)	AND TELATED INTORNIATION OSED NITURIALION OSED NITURIALIONE I ATMENIS FOR)		\.\.\.\.\.\.\.\.\.\.\.\.\.\.\.\.\.\.\	ניין דיי	- J) -) -	1007		
CPT 1 HCPCS 2	Mod	Status	Description	Physician work RVUs ³	Fully implemented non- facility PE RVUs	Year 2007 transi- tional non-facil- ity PE RVUs	Fully implemented facility	Year 2007 transi- tional fa- cility PE RVUs	Mal-prac- tice RVUs	Fully implemented nonfacility	Year 2007 transi- tional non-facil- ity total	Fully im- plement- ed facility total	Year 2007 transi- tional fa- cility total	Global
35518		4 4	Artery bypass graftArtery bypass graft	22.53	4 4 Z Z	ZZ	7.70	8.68	3.02	4 4 Z Z	Z Z	33.25	34.23	060
		< <		23.01	¥ ¥	Y Y	7.69	9.26	2.11	N A	Z Y	32.81	34.38	060
35525		∢ •	Artery bypass graft	21.55	₹ Z	Y S	7.36	8.89	2.11	Y S	Y S	31.02	32.55	060
35531		∢ ⊲	Artery bypass graft	38.92	▼	4 4 2 2	18.64	13.95	3.62	A A	Z Z	56.59	58.12	060
35533		< <	Artery bypass graft	29.73	₹ Z	Z Z	10.16	11.35	3.84	Z Z	Z Z	43.73	44.92	060
35536		∢ ·	Artery bypass graft	33.54	₹ Z	Y S	11.17	12.53	4.61	A :	Y :	49.32	50.68	060
•		∢ ⊲	Artery bypass graft	26.90	₹ ¤	Y Z	9.38 0.0	10.77	3.70	A Z	Z Z	39.98	41.37	060
35548		(∢	Artery bypass graft	22.50	. ∢ Z Z	ZZ	8.14	9.12	2.97	ZZ	Z Z	33.61	34.59	060
		⋖		24.27	A N	A A	9.28	10.12	3.29	N A	N A	36.84	37.68	060
35551		⋖ <	Artery bypass graft	27.65	∢	Z Z	10.01	11.14	3.74	Y S	Z Z	41.40	42.53	060
		۲ ۵	Artery bypass graft	22.96	ζ φ Ζ Ζ	ζ	0 00 0 00 0 00 0 00 0 00 0 00 0 00 0 0	90.6	00.00 00.00	ζ	ζ	34.76	35.19	060
35560		< <	Artery bypass graft	33.84	Z Z	Z Z	11.10	12.79	4.74	Z Z	Z Z	49.68	51.37	060
35563	_	4	Artery bypass graft	25.93	A N	AN	8.83	10.12	3.51	AN	Ϋ́	38.27	39.56	060
35565		⋖	Artery bypass graft	24.94	Y Y	Y Y	8.72	9.80	3.29	Y Y	A A	36.95	38.03	060
35566		⋖ <	Artery bypass graft	32.16	Υ S	Z Z	10.55	11.20	3.82	Y S	Y S	46.53	47.18	060
355/1	-	∢ <	Arrery bypass graft	25.33	¥	₹ < Z Z	9.02	10.41	3.42	4 < Z Z	¥ < Z	37.77	39.16	090
35583		(∢	Vein bypass graft	27.56	₹ ₹ 2 Z	Z Z	9.54	10.02	3.16	Z Z	Z Z	40.26	40.74	7 060
		< <	Vein bypass graft	32.16	A Z	A Z	10.81	11.89	4.01	AN	A N	46.98	48.06	060
35587	÷	⋖	Vein bypass graft	26.02	A N	AN.	9.44	10.97	3.51	N A	N	38.97	40.50	060
35600		∢ •	Harvest artery for cabg	4.94	Ψ.	Υ :	1.56	1.61	0.73	Α :	Ϋ́ Ξ	7.23	7.28	ZZZ 222
35601		∢ ⊲	Artery bypass graft	18.31	4 4 Z Z	4 4 Z Z	6.91	8.21	2.49	A A	A Z	33.26	29.01	060
35612		< <	Artery bypass graft	16.64	Z Z	Ϋ́ Z	6.63	7.58	2.08	Z Z	₹ Z	25.35	26.30	060
35616		⋖	Artery bypass graft	21.70	A Z	A A	7.75	8.03	2.19	A A	N	31.64	31.92	060
35621		⋖・	Artery bypass graft	20.91	Y Z	Υ ?	7.22	8.33	2.91	Y ?	Υ Z	31.04	32.15	060
35626		∢ ⊲	bypass graft, not vein	20.03	▼	4 4 2 2	10.55	11.01	3.45	A A	A A	38.05	39.29	060
35631		< <	Artery bypass graft	35.84	Z Z	Z Z	11.44	13.26	4.95	Z Z	Z Z	52.23	54.05	060
		⋖		31.56	A N	A A	10.19	11.80	4.09	N A	N A	42.84	47.45	060
35641		⋖ •	Artery bypass graft	26.24	Y S	Y S	9.44	10.68	3.53	Y ?	Y S	39.21	40.45	060
35645		< <	Artery bypass graft	18.78	(4 2 Z	Z Z	7.66	8 0.0	2.27	ζ	ζ 4 Ζ Ζ	28.43	28.97	060
		< <		32.78	Y Z	Z Z	11.10	12.63	4.43	A Z	A Z	48.31	49.84	060
35647		⋖ -	Artery bypass graft	29.56	Y Z	Y S	10.01	11.35	3.98	Y Z	Y Z	43.55	44.89	060
35650		< <	Artery bypass graft	20.04	Υ S	Υ S	7.05	8.05	2.71	Υ S	Υ S	29.80	30.80	060
35651		∢ ⊲	Artery bypass graft	25.90	Ψ Φ Ζ Ζ	4 4 2 2	8. 8. 9. 8. 8. 8.	10.29	3. S. S.	A A	Z Z	38.15	30.54	060
35656		< <	Artery bypass graft	20.35	Z Z	Z Z	7.28	8.29	2.79	A Z	A Z	30.42	31.43	060
		⋖		20.16	A N	A A	7.56	8.60	2.71	AN	N A	30.43	31.47	060
35663		⋖ <	Artery bypass graft	23.74	Υ S	Y Z	8.36	9.29	3.10	Y S	Y S	35.20	36.43	060
35666		< ⊲	Artery bypass graft	23.47	ζ 4 2 Z	Z Z	, o. / 0. 8	10.23	3.00	K K	ζ	35.54	36.85	060
	_	< <		20.58	Y Z	Z	8.05	90.6	2.77	Z Z	Z Z	31.40	32.41	060
35681		⋖ -	Composite bypass graft	1.60	Y Z	AN:	0.43	0.51	0.23	AN:	A :	2.26	2.34	ZZZ
35682		< <	Composite bypass graft	7.19	Υ S	Υ S	1.86	2.26	1.03	Υ S	Υ S	10.08	10.48	777
35685			Composite bypass graft	8.49	Δ Δ Ζ Ζ	4 4 2 2	12.2	2.08	0.20	A A	A A	11.90	12.37	712
TOO T	7	- 1	Signal Parallel Parallel Annual Annua						2			5	2	

ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

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CPT ¹ HCPCS ²	Mod	Status	Description	Physician work RVUs ³	Fully implemented non-facility PE	Year 2007 transi- tional non-facil- ity PE RVUs	Fully implemented facility	Year 2007 transi- tional fa- cility PE RVUs	Mal-prac- tice RVUs	Fully implemented nonfacility	Year 2007 transi- tional non-facil- ity total	Fully implemented facility	Year 2007 transi- tional fa- cility total	Global
35686			Bypass graft/av fist patency	3.34	A N	A A	0.87	1.07	0.47	A N	NA	4.68	4.88	ZZZ
35691		∢ <	Arterial transposition	18.26	Z Z	Z Z	6.61	7.97	2.58	Y S	Y S	27.45	28.81	060
35694		۲ ۷	Arterial transposition	19.13	₹ ₹ Z Z	ζ	6.86	8.18	2.69	ζ Z Z	X X	28.68	30.00	060
			Arterial transposition	19.91	Ą Z	Z	96.9	8.17	2.73	Y Y	A A	29.60	30.81	060
35697		4	Reimplant artery each	3.00	A'N	A A	0.80	0.97	0.41	A A	A N	4.21	4.38	ZZZ
35700		∢ ·	Reoperation, bypass graft	3.08	₹ :	¥ :	0.82	0.97	0.44	Y :	Υ :	4.34	4.49	ZZZ
35701		< <	Exploration, carotid artery	9.07	₹ Ş	Y S	4.35	4.96		Y S	¥ ž	14.54	15.15	060
35741		۲ ۷	Exploration popliteal artery	8.57	ζ	ζ	4.09	62.4 53.4	3 5	Z Z	ζ ζ Z Z	13.78	14.22	060
		< <	Exploration of artery/vein	5.78	Ą Z	Z	3.57	3.91	0.75	Z Z	Y Y	10.10	10.44	060
35800		⋖	Explore neck vessels	7.94	A'N	A A	4.06	4.51	0.95	N A	N A	12.95	13.40	060
35820		۷,	Explore chest vessels	30.08	Υ ?	Y S	11.49	8.29	1.94	¥ :	¥ :	43.51	40.31	060
35840			Explore abdominal vessels	10.81	₹ Ş	Υ S	4.91	5.20	1.34	Υ S	Ψ < Z	17.06	17.35	060
35870		۲ ۷	Bepair vessel graft defect	24.31	ζ	ξ	3.00 8.48	9.46	3.00	Z Z	Y Y	35.79	36.77	060
35875		< <	Removal of clot in graft	10.60	₹ Z	Υ Z	4.55	5.04	1.41	Z Z	Z	16.56	17.05	060
35876		⋖	Removal of clot in graft	17.70	Ϋ́	A N	6.37	7.24	2.39	A N	Y Y	26.46	27.33	060
35879			Revise graft w/vein	17.24	A'N	Ν	6.34	7.37	2.27	A A	Y Y	25.85	26.88	060
35881	-	⋖	Revise graft w/vein	19.16	₹ Z	Y Y	7.00	8.27	2.55	Y Z	∢ Z	28.71	29.98	060
35901		⋖ .	Excision, graft, neck	8.18	ΨZ:	Y :	4.41	5.09	1.15	Y Z	Y :	13.74	14.42	060
35903		∢ <	Excision, graft, extremity	86.9	₹ Z	Y Z	5.27	5.95	1.30	Υ S	Ψ ς 2	15.95	16.63	060
35905	-		Excision, graff, abdomen	33.33	₹ 4 Z Z	∀	40. L1 47. L1	12.68	4.43	∀	K Z	48.80	50.44 75.78	060
36000		< ∢	Place needle in vein	0.18	0.47	0.55	90.0	0.05	0.01	0.66	0.74	0.25	0.24	××
		⋖	Pseudoaneurysm injection trt	1.96	2.33	2.74	0.88	0.95	0.17	4.46	4.87	3.01	3.08	000
36005		⋖ •	Injection ext venography	0.95	8.80	7.95	0.39	0.33	0.05	9.80	8.95	1.39	1.33	000
36010	_		Place catheter in Vein	2.43	11.57	17.41	0.79	0.79	0.20	14.20	20.04	3.42	3.42	××
36012		< <	Place catheter in vein	3.51	21.19	19.55	1.29	2.5	0.23	24.93	23.29	5.03	4 4	XX
		< <	Place catheter in artery	2.52	19.63	20.97	0.98	0.76	0.25	22.40	23.74	3.75	3.53	××
36014		۷.	Place catheter in artery	3.02	19.93	20.12	1.12	1.05	0.19	23.14	23.33	4.33	4.26	X
36015	_		Place catheter in artery	2.5	13.70	11.06	9.5	4 5	0.21	22.42	16.19	27.72	98.4	<u> </u>
36120			Establish access to artery	2.02	9.57	10.44	0.61	0.64	0.14	11.72	12.59	2.76	2.79	XX
		⋖	artery	2.01	10.78	12.30	0.73	99.0	0.16	12.95	14.47	2.90	2.83	××
36145		∢ •	Artery to vein shunt	2.01	10.73	12.13	0.67	0.66	0.11	12.85	14.25	2.79	2.78	X
36160			Establish access to aorta	2.52	12.09	13.16	0.78		0.26	14.87	15.94	3.56	3.61	×;
36215			Place catheter in arterv	4.67	26.82	27.04	50.	1.69	0.27	31.76	31.98	6.87	6.63	XX
			Place catheter in artery	5.27	29.00	29.12	2.12	1.88	0.31	34.58	34.70	7.70	7.46	××
36217		⋖	Place catheter in artery	6.29	47.85	53.66	2.46	2.25	0.44	54.58	60.39	9.19	8.98	××
36218		۷.	Place catheter in artery	1.01	3.91	4.80	0.39	0.35	0.07	4.99	5.88	1.47	1.43	ZZZ
36245		∢ <	Place catheter in artery	4.67	29.77	31.58	2.18	1.87	0.31	34.75	36.56	7.16	6.79	××
36247	-	۷ ح	Place catheter in artery	62.9	47.04	49.00	2.47	20.0	0.38	53.80	55.76	27.7	+ 66 + 66	XX
		< <	Place catheter in artery	1.01	3.31	3.87	0.39	0.35	0.07	4.39	4.95	1.47	1.43	ZZZ
36260		⋖	Insertion of infusion pump	9.76	A N	ΑN	4.92	4.90	1.29	Y Y	ΥZ	15.97	15.95	060
36261		∢ •	Revision of infusion pump	5.50	Ψ.	¥ :	3.36	3.59	0.70	Y ?	Υ 'n	9.56	9.79	060
36262			Removal of Infusion pump	10.4 10.4 10.6	AN C	AN O	4.14	67.70	40.0	NA 77	A P	7.29	7.31) (2)
36405			Bi draw < 3 yrs scalp vein	0.31	0.28	0.30	0.08	0.08	0.03	0.62	0.61	0.32	0.3	XX
H		- 7	- LOCO 4				1							

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

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CPT 1 HCPCS 2	Mod	Status	Description	Physician work RVUs ³	Fully implemented non-facility PERVUS	Year 2007 transi- tional non-facil- ity PE RVUs	Fully implemented facility	Year 2007 transi- tional fa- cility PE RVUs	Mal-practice RVUs	Fully im- plement- ed non- facility total	Year 2007 transi- tional non-facil- ity total	Fully implemented facility	Year 2007 transi- tional fa- cility total	Global
36406		4	BI draw < 3 yrs other vein	0.18	0:30	0.29	0.08	0.06	0.01	0.49	0.48	0.27	0.25	XX
36410		⋖	Non-routine bl draw > 3 yrs	0.18	0.32	0.30	0.05	0.02	0.01	0.51	0.49	0.24	0.24	××
36420		⋖ •	Vein access cutdown < 1 yr	1.01	0.20	0.31	0.20	0.25	0.07	1.28	1.39	1.28	1.33	×
36425		∢ <	Vein access cutdown > 1 yr	0.76	A S	A C	0.22	0.22	0.06	A C	A L	40.L	40.5	× ×
36430		∢ ⊲	Blood transfusion service	0.00	4 N	0.6.0 0.0	A 4	A S	0.00	00. V	0.0. V	1 57 L	A P	X X
36450		(∢	Bl exchange/transfuse nb	2 6	Z Z	Z Z	62.0	0.33	2.00	ζ	Z Z	3.53	3.17	XX X
		< ∢		2.43	Y Z	Υ Z	0.74	0.94	0.15	Υ Z	Z Z	3.32	3.52	×
		< <	Transfusion service, fetal	6.58	Y Y	Ą Z	1.64	2.10	0.79	Ϋ́	₹ Z	9.01	9.47	××
36470		⋖ ·	Injection therapy of vein	1.09	2.48	2.64	0.66	0.71	0.12	3.69	3.85	1.87	1.92	010
		∢ <	Injection therapy of veins	1.57	2.62	2.97	0.81	0.92	0.19	4.38	4.73	2.57	2.68	010
36475		∢ <	Endovenous II, 1st vein	0.72	37.50	48.03	2.03	4.7	0.37	44.09	11.03	9.7	9.50	000
36478		(∢	Endovenous laser. 1st vein	6.72	34.37	43.78	20.32	2.44	0.37	41.46	50.87	62.6	55.6	000
		<	Endovenous laser vein addon	3.38	6.67	7.68	1.04	1.12	0.18	10.23	11.24	4.60	4.68	ZZZ
36481		⋖	Insertion of catheter, vein	86.9	3.02	2.07	2.18	2.50	0.55	10.55	12.60	9.71	10.03	000
36500		⋖	Insertion of catheter, vein	3.51	A N	A N	1.33	1.36	0.20	A N	A A	5.04	2.07	000
36510		⋖	Insertion of catheter, vein	1.09	1.08	3.20	0:30	0.53	0.10	2.27	4.39	1.49	1.72	000
36511		⋖ ·	Apheresis wbc	1.74	₹ Z	₹ Z	0.57	0.69	0.08	Υ Z	Y Z	2.39	2.51	000
36512		۷.	Apheresis rbc	1.74	ΨZ:	Ψ.	09.0	0.71	0.08	Ψ.	¥:	2.42	2.53	000
36513		∢ <		1.74	Z Z	A C	0.50	79.0	0.17	A C	N N	2.41	2.58	000
36514		∢ <	Apheresis plasma	47.1	10.47	15.38	0.52	0.00	0.0	12.29	02.71	45.3	84.2	88
		(⊲	Apheresis, adsorb/relinase	47.1	45.04	75.66	0.30	0.02	0000	51.06	76.96	1.52	2.44 7.7	888
36522		< ∢	Photopheresis	1.67	35.01	33.10	0.85	0.93	0.13	36.81	34.90	2.65	2.73	000
		⋖	Office/outpatient visit, est	0.17	0.33	0.38	90.0	0.31	0.01	0.51	0.56	0.24	0.49	××
36555		⋖ ·	Insert non-tunnel cv cath	2.68	4.17	5.37	0.61	0.75	0.11	96.9	8.16	3.40	3.54	000
36556		⋖ -	Insert non-tunnel cv cath	2.50	2.92	4.96	0.57	0.70	0.19	5.61	7.65	3.26	3.39	000
36557		< <	Insert tunneled cv cath	5.09	15.41	19.75	2.48	2.62	0.57	21.07	25.41	8.14	8 5 1 8 1 8	010
36560		∢ <	Insert tunneled cv catri	97.4	01.45	9.69	2.40	2.52	0.57	20.81	27.05	0/./	7.88	0.00
36561		(∢	Insert tunneled ov cath	5.99	22.76	27.93	2.33	288	0.57	29.32	34.50	0.00	9.73	010
		<	Insert tunneled cv cath	6.19	23.31	25.94	2.61	2.90	0.84	30.34	32.97	9.64	9.93	010
36565		⋖	Insert tunneled cv cath	2.99	18.05	23.09	2.55	2.86	0.57	24.61	29.65	9.11	9.45	010
36566		⋖ ·	Insert tunneled cv cath	6.49	115.6	48.08	2.69	3.01	0.57	122.7	55.14	9.75	10.07	010
36568		< •	Insert picc cath	1.92	5.86	7.13	0.58	0.58	0.11	7.89	9.16	2.61	2.61	000
36570		∢ ⊲	Insert picc cath	28 R	93.71	90.0	0.67	0.60	0.19	0.09	36.76	2.68	ν. Ευν Ευν Ευν Ευν Ευν Ευν Ευν Ευν Ευν Ευν	000
36571		(∢	Insert pickad cath	5.29	25.38	31.35	2.46	2.66	0.57	31.24	37.21	8 .32	8.52	010
		<	Repair tunneled cv cath	0.67	3.41	3.90	0.24	0.26	0.20	4.28	4.77	1.1	1.13	000
36576		⋖	Repair tunneled cv cath	3.19	2.98	6.72	1.57	1.78	0.19	9:36	10.10	4.95	5.16	010
36578		⋖ ·	Replace tunneled cv cath	3.49	9.39	10.72	2.00	2.23	0.19	13.07	14.40	5.68	5.91	010
36580		∢ •	Replace cvad cath	1.31	4.11	6.25	0.43	0.42	0.19	5.61	7.75	1.93	1.92	000
36581		∢ ⊲	Replace tunneled cv cath	2.43 2.43	21 14	18.72	77.1	98	0. C	19.84	30.34	5.39	0.0 - 0.0	0.00
36583		< ∢	Replace tunneled cv cath	5.24	21.73	25.02	2.55	2.81	0.19	27.16	30.45	7.98	8.24	010
		< <	Replace picc cath	1.20	4.16	6.28	0.62	0.57	0.19	5.55	7.67	2.01	1.96	000
36585		⋖	Replace picvad cath	4.79	23.48	26.80	2.42	2.66	0.19	28.46	31.78	7.40	7.64	010
36589		∢ •	Removal tunneled cv cath	2.27	1.92	2.17	1.26	1.36	0.24	4.43	4.68	3.77	3.87	010
36590		∢ <	Memoval tunneled cv cath	3.30	3.68	3.46	09.1	1.69	0.44	7.42	7.20	45.0 45.0	5.43	010
36596		۲ ۷	Mech remov tunneled cv cath	0.75	2.70	3.45	0.45	0.49	0.05	3.50	4.25	1.25	1.29	800
- -	2					1 0 1400 110	- 0							

ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

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CPT 1 HCPCS 2	Mod	Status	Description	Physician work RVUs ³	Fully implemented non-facility PE	Year 2007 transi- tronal non-facil- ity PE RVUs	Fully implemented facility	Year 2007 transi- tional fa- cility PE RVUs	Mal-practice RVUs	Fully implemented nonfacility total	Year 2007 transi- tional non-facil- ity total	Fully implemented facility	Year 2007 transi- tional fa- cility total	Global
36597		∢⊢	Reposition venous catheter	1.21	2.12	2.34	0.45	0.44	0.07	3.40	3.62	1.73	1.72	000
36600		∢ <	Withdrawal of arterial blood	0.32	0.49 AN	0.49	0.07	0.09	0.02	0.83	0.83	0.41	0.43	XX
36625		_	Insertion catheter, artery	2.13	 Z Z	Z Z	0.49	0.52	0.07	Z Z	Z Z	2.86	2.89	800
		∢ •	Insertion catheter, artery	2.10	₹ Z	Y :	0.90	1.01	0.21	Y :	Y :	3.21	3.32	000
36660			Insertion catheter, artery	04.1	A N	A N	0.19	0.38	0.14	Z Z	Y Z	1.73	1.92	000
36800			Insertion of cannula	2.43	₹ ₹ 2 Z	Z Z	1.55	1.75	0.25	Z Z	ZZ	4.23	4.43	000
36810		∢ «	Insertion of cannula	3.96	₹ Z	A S	1.37	1.60	0.45	Z Z	Z Z	5.78	6.01	000
36818			Insertion of cannula	2.62	▼	ξ Z Z	4.97	5.78	0.35	ξ Z Z	4 4 2 2	18.63	19.44	060
			Av fuse, uppr arm, basilic	14.35	₹ Z	Z Y	5.34	6.13	1.95	Z Y	Z	21.64	22.43	060
•			Av fusion/forearm vein	14.35	Ψ <u>Ψ</u>	Y S	5.40	6.15	1.94	Υ S	Z Z	21.69	22.44	060
36822			Av lusion direct any site	5.47	₹ ₹ 2 Z	X X	3.85	4.32	0.79	Z Z	¥ ¥	10.11	10.52	060
			Insertion of cannula(s)	22.74	Ϋ́Z	N	8.87	9.27	2.88	Ϋ́Z	N A	34.49	34.89	060
36825			Artery-vein autograft	9:92	₹ Z	A :	4.37	4.89	1.35	₹ Z	¥.	15.67	16.19	060
36830			Artery-vein nonautograft	11.98	Δ Z	A Z	4.31	3.02	99.	A Z	Y Z	17.95	18.66	060
36832			Av fistula revision, open	10.48	Z Z	Z Z	3.91	4.53	3 4	Z Z	ž Ž	15.83	16.45	060
			Av fistula revision	11.93	A A	N A	4.31	4.99	1.65	Ϋ́	A	17.89	18.57	060
36834		⋖・	Repair A-V aneurysm	11.07	Y :	Υ :	4.40	4.70	1.37	ΨZ:	Υ :	16.84	17.14	060
36835			Artery to vein shunt	7.38	Δ Z	A Z	3.93	4.23	0.98	A Z	Y Z	12.29	12.59	060
36860			External cannula declotting	2.01	3.36	2.18	0.61	0.66	0.1	5.48	4.30	2.73	2.78	000
			Cannula declotting	2.52	A Z	N A	1.27	1.44	0.27	N	N	4.06	4.23	000
36870			Percut thrombect av fistula	5.15	42.53 NA	50.52 NA	2.83	3.08	0.29	47.97	55.96 NA	8.27	8.52	060
37145			Revision of circulation	26.05	¥ Z Z	Z Z	8.94	10.40	3.25	Z Z	Z Z	38.24	39.70	060
		⋖	Revision of circulation	23.05	¥.	N A	8.28	9.03	2.81	Y Y	Y S	34.14	34.89	060
37180			Revision of circulation	26.05	¥ ₹	Z Z	8.97	9.98	334	Z Z	Y Z	38.36	39.37	060
37182			Insert hepatic shunt (tips)	16.97	(∢ 2 Z	Z Z	6.32	6.14	1.00	Z Z	Z Z	24.29	24.11	000
37183			Remove hepatic shunt (tips)	7.99	A N	N	3.09	3.04	0.47	Ϋ́	N	11.55	11.50	000
37184			Prim art mech thrombectomy	8.66	51.62	66.83	3.22	3.33	0.55	60.83	76.04	12.43	12.54	000
37186			Sec art m-thrombect add-on	4.92	35.40	46.00	5 49.	1.66	0.32	40.64	51.24	6.88	6.90	77
			Venous mech thrombectomy	8.03	50.43	62.39	3.01	3.12	0.51	58.97	73.93	11.55	11.66	000
37188			Venous m-thrombectomy add-on	5.71	43.99	57.61	2.23	2.34	0.37	50.07	63.69	8.31	8.42	000
37201			Transcatheter therapy infuse	4.99	 Z Z	Z Z	2.40	2.51	0.33	Z Z	X X	7.72	7.83	800
			Transcatheter therapy infuse	29.9	ΥZ	NA	3.47	3.15	0.43	Ą Z	N A	9.57	9.25	000
37203			Transcatheter retrieval	5.05	31.47	32.60	2.10	2.06	0.29	36.78	37.91	7.41	7.37	000
			Transcath iv stent percit	8 27	ζ 4 2 Z	(6.23 4 08	3 84	94.0	₹ 4 2 Z	ξ Z	12.95	12 71	
37206			Transcath iv stent/perc addl	4.12	₹ ₹ 2	Z Z	1.67	1.49	0.31	Z Z	Z Z	6.10	5.92	ZZZ
37207		⋖ -	Transcath iv stent, open	8.27	₹ Z	N Y	2.52	3.01	1.17	₹ Z	Y :	11.96	12.45	000
37208			Transcath iv stent/open addl	4.12	¥ ₹	Z Z	1.10	1.31	0.59	Z Z	Y Z	5.81	6.02 3 18	ZZZ
37215		c Œ	Transcath stent, cca w/eps	19.54		Z Z	10.47	9.46	1.09	Z	Z	31.10	30.08	060
37216			Transcath stent, cca w/o eps	18.81	NA	AN	9.14	8.92	1.04	N	A N	28.99	28.77	060
	-	•												

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

ADL	FINDOIN	ADDENDOM B.——NELATIVE	VALUE UNITS (NVOS)	ייט וובראובט					ואראטוטחואו נ	סו אםואודא דו חר	0 - 0 - 0 - 0 - 0	/007	CONTINOEL	2
CPT 1 HCPCS ²	Mod	Status	Description	Physician work RVUs ³	Fully implemented non- facility PE RVUs	Year 2007 transi- tional non-facil- ity PE RVUs	Fully implemented facility	Year 2007 transi- tional fa- cility PE RVUs	Mal-prac- tice RVUs	Fully im- plement- ed non- facility total	Year 2007 transi- tional non-facil- ity total	Fully implemented facility	Year 2007 transi- tional fa- cility total	Global
37250 37251		۷ ۷	Iv us first vessel add-on	2.10	4 4 Z Z	Z Z	0.83	0.77	0.21	Z Z A A	ZZ	3.14	3.08	777
37500		∢ •	Endoscopy ligate perf veins	11.48	Y :	Y Z	5.54	6.54	1.54	Y S	¥ ?	18.56	19.56	060
37600		∢ ∢	Ligation of neck vein	11.93	A A	Z Z	5.11	5.51	1.33	4 4 Z Z	Ψ Ψ Z Z	18.37	18.77	060
		< ∢	Ligation of neck artery	14.16	ď Z	Z Z	5.69	6.61	1.98	Y Y	Y Y	21.83	22.75	060
37606		∢ <	Ligation of neck artery	8.65	Y S	Y S	5.03	4.69	1.23	Y S	Y S	14.91	14.57	060
37609		∢ ∢	Ligation of a-v listula	3.00	4.22	4.44 4.44	3. - 1.82	1.93	0.36	7.58	7.80	5.18	5.29	010
37615		۷,	Ligation of neck artery	7.67	¥ ?	Y S	3.97	4.08	0.68	Y S	Y S	12.32	12.43	060
37616		∢ ∢	Ligation of chest artery	18.84	Y Y	4 4 Z Z	8.00	80.88	2.32	Z Z	4 4 2 2	29.16	35.52	060
		< •	Ligation of extremity artery	5.89	Y Z	Y Z	3.43	3.57	0.67	Z Z	Z Z	9.99	10.13	060
37650		∢ ⊲	Revision of major vein	1.44 27.8	Z Z	4 Δ 2 Ζ	5.57 4.29	5.69	1 0.9	¥ 4	ξ Z	13.67	18.04	060
37660		< ∢	Revision of major vein	22.16	₹ Z	Z Z	8.33	8.89	2.48	Z Z	Z Z	32.97	33.53	060
37700		⋖	Revise leg vein	3.72	Y Z	A A	2.48	2.72	0.53	AN.	Y Y	6.73	6.97	060
37718		< <	Ligate/strip short leg vein	7.01	Υ Υ	Y S	3.56	3.94	0.14	Z Z	Z Z	10.71	11.09	060
37735		< <	Elgate/strip forlg leg vellt	10.75	ξ	K K	20.5	7.4.	0.90	Z Z	ξ	16.96	17.55	060
		< <	Ligation, leg veins, open	10.63	Z Z	A A	4.60	5.17	1.4	A A	Y Y	16.67	17.24	060
37765		⋖ ·	Phleb veins - extrem - to 20	7.59	Y S	Y S	3.66	4.39	0.48	YZ:	¥Z:	11.73	12.46	060
37766		< <	Phleb veins - extrem 20+	9.54	Υ	Y Z	4.21	5.06	0.48	Y S	Y Z	14.23	15.08	060
37785		(<	Ligate/divide/excise vein	3.83 3.83	5,00	5.16	2.93	2.70	0.54	9.37	9.53	66.9	7.07	060
		< <	Revascularization, penis	23.13	A N	AN	12.17	9.88	2.25	N A	A A	37.55	35.26	060
37790		⋖ •	Penile venous occlusion	8.33	Y ?	¥ :	5.20	4.59	0.59	Y S	Y S	14.12	13.51	060
38100		∢ ∢	Removal of spleen, total	19.43	▼ 4 Z Z	Z Z	0.85	6.30	1.97	Y Y	Y Z	28.19	27.70	060
		Α.	Removal of spleen, total	4.79	¥ Z	A A	1.25	1.54	0.63	N A	Y Y	6.67	96.9	ZZZ
38115		< <	Repair of ruptured spleen	21.76	Y S	Y S	7.50	6.87	2.08	Z Z	¥ S	31.34	30.71	060
38200		(∢	Injection for spleen x-ray	2.67	Ζ Z	Z Z	1.03	0.93	0.14	Z Z	Z Z	3.81	3.71	000
		<u>~</u>	Harvest allogenic stem cells	1.50	¥ Z	Y Y	0.54	0.64	0.07	Y Y	Y Y	2.11	2.21	000
38206		Υ <	Harvest auto stem cells	1.50	NA Sep	N N	0.53	0.64	0.07	NA 80 %	A N	2.10	2.21	000
38221		< <	Bone marrow biopsy	1.37	2.83	3.66	0.57	0.63	0.02	4.25	5.10	2.01	2.07	ξ× ×
38230		<u>د</u> ر	Bone marrow collection	4.78	Y S	Y :	2.73	3.11	0.48	¥ :	Y :	7.99	8.37	010
38240		x a	Bone marrow/stem transplant	2.24	Α Δ Ζ Ζ	A Z	0.94	5.5	0.1	¥ ¤	Z Z	3.29	98.6	××
38242		. ≺	Lymphocyte infuse transplant	1.71	Y Y	Z Z	0.70	0.76	0.08	Z Z	Z Z	2.49	2.55	000
38300		۷,	Drainage, lymph node lesion	2.24	3.74	4.17	1.81	2.00	0.25	6.23	99.9	4.30	4.49	010
38305		< ⊲	Drainage, lymph node lesion	6.49	Z Z	A Z	3.58	4.23 7.05	0.88	Z Z	¥ ₹	10.95	11.60	060
38380		< <	Thoracic duct procedure	8.26	Z Z	Z Z	4.63	5.43	0.74	Z Z	Z Z	13.63	14.43	060
38381		∢ ·	Thoracic duct procedure	13.28	Y S	Y :	6.16	6.72	4. 5	¥ :	Y :	21.28	21.84	060
38382		∢ ⊲	I horacic duct procedure	3 74	NA 3.75	NA 371	2.50	5.70	1.37	4 N N	7 9 A	17.29	17.49	090
		< <	Needle biopsy, lymph nodes	1.14	2.15	2.08	0.72	0.77	0.09	3.37	3.31	1.95	2.00	200
38510		⋖	Biopsy/removal, lymph nodes	6.67	5.16	5.46	2.92	3.35	0.72	12.55	12.85	10.31	10.74	010
38520			Biopsy/removal, lymph nodes	6.91	Y Z	Y Z	3.68	3.97	0.84	Y Z	₹ ₹ Z Z	11.43	11.72	060
		⊣ ;	Copoly Company (1) The Copoly of the Copoly	2				5.5	8		131	2	2	8

ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

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CPT 1 HCPCS 2	Mod	Status	Description	Physician work RVUs ³	Fully im- plement- ed non- facility PE RVUs	Year 2007 transi- tional non-facil- ity PE RVUs	Fully implemented facility	Year 2007 transi- tional fa- cility PE RVUs	Mal-practice RVUs	Fully implemented nonfacility total	Year 2007 transi- tional non-facil- ity total	Fully implemented facility	Year 2007 transi- tional fa- cility total	Global
38530		∢ •	Biopsy/removal, lymph nodes	8.22	AN	A Z	4.10	4.33	1.12	N S	N S	13.44	13.67	060
38550		∢ ∢	Explore deep node(s), neck	50.0	A Z	4 4 2 2	3.69 1.09	92.4	0.00	4 4 2 2	ξ Z	12.00	11.78	060
		< <	Removal, neck/armpit lesion	15.30	₹ Z	A N	7.18	8.21	1.75	Z Z	Z Z	24.23	25.26	060
38562		⋖	Removal, pelvic lymph nodes	10.83	ΑN	AN	5.74	2.78	1.20	Ϋ́	Ϋ́	17.77	17.81	060
38564		∢ •	Removal, abdomen lymph nodes	11.23	₹ ?	¥ :	5.21	5.25	1.32	Y :	¥:	17.76	17.80	060
385/0			Laparoscopy, lymph node blop	9.24	∀	Ψ	3.99	3.98 0.08	5. t	Z Z	Y S	14.36	14.35	010
		< <	Laparoscopy, lymphademectomy	16.80	₹ ₹ Z Z	4 4 2 2	50.9 80.9	0.09		Z Z	Z Z	24.04	25.56	010
38700		< ∢	Removal of lymph nodes, neck	12.62	. ∠ . ∠	Z Z	5.93	6.17	0.72	Z Z	Z Z	19.27	19.51	060
		∢	Removal of lymph nodes, neck	21.64	NA	A A	8.82	9.24	1.20	N A	N	31.66	32.08	060
38724		∢ <	Removal of lymph nodes, neck	23.64	∀ \$ 2	ΥZ Z	9.38	9.74	1.28	Y S	Y S	34.30	34.66	060
38/40	_	∢ <	Domovo armait lymph nodes	10.51	¥	₹ ≤ 2	9. 4 0.00	4.95	1.32	¥ < Z	¥ < Z	01.9	16.78 21.4E	060
38746		(∢	Remove thoracic lymph nodes	4 88	ζ	Z Z	1.46	1.57	0.72	ζ 4 2 Z	ζ	7.08	71.7	222
		< <	Remove abdominal lymph nodes	4.88	₹ Z	A N	1.26	1.57	0.64	Z Z	Z Z	6.78	7.09	777
38760		⋖	Remove groin lymph nodes	13.43	ΑN	A	5.89	90.9	1.71	A N	A N	21.03	21.22	060
38765			Remove groin lymph nodes	21.72	Ϋ́	AN	8.71	8.80	2.47	A A	A A	32.90	32.99	060
38770		∢ .	Remove pelvis lymph nodes	13.93	₹ :	¥:	96.9	90.9	1.40	Ψ.	Ψ.	22.29	21.39	060
38780			Remove abdomen lymph nodes	17.47	A L	A S	7.92	8.15	1.88	A N	A C	27.27	27.50	060
38792			Inject for lymphatic x-ray	0.53	CZ.C	90.0 4 N	0.73	0.70	0.0	0.0 V	0.20 VA	107	4 . 10	
38794			Access thoracic lymph duct	44.4	 {	₹ ₹	3.24	3.41	0.32	ζ ζ Ζ	ζ ζ Ζ	8.00	8.17	060
39000			Exploration of chest	7.45	ΑN	A	4.40	4.60	0.89	A N	A N	12.74	12.94	060
39010		⋖ ·	Exploration of chest	13.07	₹Z	Y :	6.23	7.23	1.75	Y S	Y S	21.05	22.05	060
39200			Removal chest lesion	15.02	∀ \$ 2	Ϋ́ Z	6.30	7.24	2.02	Υ S	Υ :	23.34	24.28	060
39220			Kemoval chest lesion	18.42	▼	A Z	3.65	8.97	2.45 2.83	Z Z	Z Z	10 44	29.84	090
39501			Repair diaphragm laceration	13.83	Z Z	5.87	6.32	1.77	A N	Υ Z	21.47	21.92	060)
39502			Repair paraesophageal hernia	17.03	Ą	A A	6.55	7.01	2.16	NA	N	25.74	26.20	060
39503			Repair of diaphragm hernia	108.57	¥ :	¥:	31.89	33.08	10.95	Y :	Y :	151.4	152.6	060
39520			Repair of diaphragm hernia	16.56	A Z	Z Z	6.87	7.76	2.23	Z Z	Z Z	25.66	26.55	060
39531			Repair of diaphragm hernia	17.18	 {	Z Z	6.56	7.19	2.21	Z Z	Z Z	25.95	26.58	060
				14.47	ΑN	AN	5.56	6.07	1.79	N A	N A	21.82	22.33	060
39541			Repair of diaphragm hernia	15.62	₹ ?	¥:	6.13	6.48	1.92	Y :	Y :	23.67	24.02	060
39545			Revision of diaphragm	12 91	₹ 4 Z Z	4 Δ Ζ Ζ	7. 7.	64.7 11.0	. 63	Z Z	Z Z	23.63	23.84	060
39561			Resect diaphragm, complex	19.69	Z Z	¥ Z	9.43	9:38	2.44	₹ Z	₹ Z	31.56	31.51	060
			Biopsy of lip	1.22	2.04	1.73	0.56	09.0	0.05	3.31	3.00	1.83	1.87	000
40500			Partial excision of lip	4.27	7.63	7.09	4.16	4.30	0.38	12.28	11.74	8.81	8.95	060
40510	-		Partial excision of lip	4.69	6.48	6.59	3.44 7.8	3.88	0.49	11.66	11.77	8.62	9.06	060
			Beconstruct lin with flan	2.4.0	† 47.	00. V	5. R	90.6	0.02	26:1-1	τ ΔΝ	13.53	14 42	060
40527			Reconstruct lip with flap	9.12	Z Z	Z Z	5.75	6.97	0.97	Z Z	ξ Z	15.84	17.06	060
40530			Partial removal of lip	5.39	7.19	7.67	4.01	4.45	0.55	13.13	13.61	9.95	10.39	060
40650		< <	Repair lip	3.63	5.86	6.57	9.00 0.00	3.25	0.38	9.87	10.58	7.10	7.26	060
40652			Repair lip	α. γ. σ. σ.	0.94	00.7	3.92 7.52	8 - 4	0.52	13.83	12.33	8.69	8.85	060
4020			Repair cleft lip/nasal	13.89	7.97 AN	0.43 A N	9.25	40.4	0.90	2.02 NA	NA A	24.08	23.98	060
I C		- `												

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

	CODENDOM C LECATIVE		VALUE CIVIL S (114 CS)	וררא ה			j 	/,, 	2	- 1				ב
CPT¹ HCPGS²	Wod	Status	Description	Physician work RVUs ³	Fully im- plement- ed non- facility PE RVUs	Year 2007 transi- tional non-facil- ity PE RVUs	Fully implemented facility	Year 2007 transi- tional fa- cility PE RVUs	Mal-prac- tice RVUs	Fully implemented nonfacility	Year 2007 transi- tional non-facil- ity total	Fully implemented facility	Year 2007 transi- tional fa- cility total	Global
40701		۷ ۷	Repair cleft lip/nasalRepair cleft lip/nasal	16.95	A N	Z Z	10.87	11.24	1.65	A Z	Z Z A A	29.47	29.84	060
		∢ <		14.46	₹ Z	Y S	8.73	9.62	1.79	A S	Z Z	24.98	25.87	060
40/61		∢ ∢	Repair clert lip/nasal	15.63	3.84 3.84	8 S	4.62	88.6	0.93	NA 2.14	4 4 49	3 17	3.10	090
40801		< <	Drainage of mouth lesion	2.53	4.84	4.23	2.54	2.70	0.31	7.68	7.07	5.38	5.54	010
40804		∢ •	Removal, foreign body, mouth	1.24	3.62	3.46	1.75	1.83	0.11	4.97	4.81	3.10	3.18	010
40805		∢ ∢	Removal, roreign body, mouth	0.3	2.38	1.98	2.35	2.75	0.032	8.05	7.64	5.50 0.85	5.76 0.85	000
		< <	Biopsy of mouth lesion	96.0	3.51	2.87	1.57	1.50	0.10	4.57	3.93	2.63	2.56	010
40810		∢ <	Excision of mouth lesion	1.31	3.55	3.06	1.65	1.66	0.13	4.99	4.50	3.09	3.10	010
40814		< <	Excise/repair mouth lesion	3.41	5.61	5.32	3.63	3.83	0.41	9.43	8.94	7.45	7.65	060
		⋖	Excision of mouth lesion	3.66	5.77	5.33	3.67	3.93	0.40	9.83	9.39	7.73	7.99	060
40818		∢ •	Excise oral mucosa for graft	2.66	5.73	5.32	3.67	3.90	0.21	8.60	8.19	6.54	6.77	060
40819		∢ ∢	Excise lip or cheek told	1.28	78.4	4.29	3.06	3.09 2.54	0.29	6.50	6.99	5.76	3.93	090
40830		< ∢	Repair mouth laceration	1.76	4.07	3.82	1.99	2.07	0.19	6.02	5.77	3.94	4.02	010
		4	Repair mouth laceration	2.46	5.30	4.83	2.71	2.97	0.30	8.06	7.59	5.47	5.73	010
40840		<u>د</u> د	Reconstruction of mouth	8.97	06.6	9.83	5.46	6.61	9. 9	19.95	19.88	15.51	16.66	060
40842		rα	Reconstruction of mouth	12.56	9.68	9.99	5.29	6.42	80. 6	19.73	20.04	15.34	16.47	060
40844			Reconstruction of mouth	16.47	14.78	15.55	8.74	10.88	66.	33.24	34.01	27.20	45.62	060
		. œ	Reconstruction of mouth	19.03	14.86	16.55	9.31	12.27	2.00	35.89	37.58	30.34	33.30	060
41000		∢.	Drainage of mouth lesion	1.30	2.48	2.36	1.28	1.38	0.12	3.90	3.78	2.70	2.80	010
41005		۷ ۵	Drainage of mouth lesion	3.24	4.22	3.56	1.71	3.06	0.12	2.60	4.94	3.09	3.10	010
41007		< ∢	Drainage of mouth lesion	3.10	5.31	5.19	2.69	2.95	0.31	8.72	8.60	6.10	6.36	060
		⋖ ·	Drainage of mouth lesion	3.36	5.39	4.87	2.77	3.10	0.45	9.17	8.65	6.55	6.88	060
41009		∢ <	Drainage of mouth lesion	3.58	5.78	5.18	3.10	3.46	0.47	9.83	9.23	7.15	7.51	090
41015		< <	Drainage of mouth lesion	3,95	6.19	5.61	3.91	5 60.4	0.07	10.60	10.02	8.32	8,50	060
		< <	Drainage of mouth lesion	4.06	6.12	5.75	3.99	4.17	0.53	10.71	10.34	8.58	8.76	060
41017		∢ <	Drainage of mouth lesion	4.06	6.29	5.81	4.06	4.25	0.53	10.88	10.40	8.65	8.84	060
41100		< ∢	Biopsy of fondile	1.37	0.0	2.47	1.12	135	0.00	4 10	98.8	2.06	2.87	010
		< <	Biopsy of tongue	1.42	2.54	2.37	1.12	1.27	0.13	4.09	3.92	2.67	2.82	010
41108		∢ ·	Biopsy of floor of mouth	1.05	2.38	2.16	1.01	1.10	0.10	3.53	3.31	2.16	2.25	010
41110		∢ ⊲	Excision of tongue lesion	1.5.1 27.2	3.43 5.04	3.10	2.52	ا6.۲ 00.۶	0.13	2.07	4.74	3.16	3.25	010
41113		< <	Excision of tongue lesion	3.19	5.36	4.90	3.28	3.43	0.34	80.80	8.43	6.81	6.96	060
		< <	Excision of tongue lesion	8.64	Ϋ́	A A	5.88	6.88	0.83	A A	N	15.35	16.35	060
41115		۷.	Excision of tongue fold	1.74	4.26	3.54	1.74	1.83	0.18	6.18	5.46	3.66	3.75	010
		∢ <	Excision of mouth lesion	2.44	97.5 87.7	4.59 V N	2.63	77.7	0.23	36.7	7.26	5.30	5.44	060
41130		< <	Partial removal of tongue	15.43	₹ ₹ 2 Z	Z Z	15.08	15.95	0.93	Z Z	ξ	31.44	32.31	060
		4	Tongue and neck surgery	29.71	Ϋ́	NA	19.78	22.41	1.88	N A	N	51.37	54.00	060
41140		۷,	Removal of tongue	28.69	A S	A S	21.51	25.44	2.26	Y S	A S	52.46	56.39	060
41145		∢ <	Tongue removal, neck surgery	37.47	4 < Z	Z Z	26.58	29.62	7.54 4.05	4 <	₹ <u>₹</u>	66.59	69.63	060
41153		₹ ∢	Tongue, mouth, jaw surgery	33.16	 {	Σ Z	22.28	24.39	2.00	ζ Z	Σ Z Z	57.44	59.55	280 060
H	7000		to in one A local and a second		7									

ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

				i i										
CPT 1 HCPCS 2	Мод	Status	Description	Physician work RVUs ³	Fully implemented non-facility PE	Year 2007 transi- tional non-facil- ity PE RVUs	Fully implemented facility	Year 2007 transi- tional fa- cility PE RVUs	Mal-prac- tice RVUs	Fully im- plement- ed non- facility total	Year 2007 transi- tional non-facil- ity total	Fully implemented facility	Year 2007 transi- tional fa- cility total	Global
41155		4 4	Tongue, jaw, & neck surgeryBepair tongue laceration	39.84	NA 3.76	N S	23.96	26.15	2.33	NA S	NA 5.09	66.13	68.32	090
41251		. ∢	Repair tongue laceration	2.27	3.12	3.24	1.62	1.57	0.22	5.61	5.73	4.11	4.06	010
41252		∢ <	Repair tongue laceration	2.97	4.31	4.00	1.94	2.18	0.29	7.57	7.26	5.20	5.44	010
41510		∢ ∢	Fixation of tongue	3.70	Y Y	¥ ¥ Z Z	6.94 6.94	7.70	0.30	Y Y	Y Y	10.46	7 E	060
		: ∢	Reconstruction, tongue fold	2.73	5.71	4.90	3.19	3.52	0.27	8.71	7.90	6.19	6.52	060
41800		⋖ <	Drainage of gum lesion	1.17	4.75	3.14	2.09	1.48	0.12	6.04	4.43	3.38	2.77	010
41806		∢ ∢	Removal foreign body, gum	2.69	5.89	ري 1.4 71.4	3.37	3.12	0.13	6. FO 8.95	4.56	6.43	6.18	010
		<u> </u>	Excision of gum lesion	2.31	4.67	4.09	1.78	1.86	0.31	7.29	6.71	4.40	4.48	010
41823		œ <	Excision of gum lesion	3.55	6.52	5.82	3.76	3.96	0.47	10.54	9.84	7.78	7.98	000
41826		∢ ∢	Excision of gum lesion	2.3	5.12	3.11	2.58	2.23	0:30	7.73	5.72	5.19	3.30 4.84	010
41827		⋖	Excision of gum lesion	3.66	6.61	5.80	3.35	3.59	0.35	10.62	9.81	7.36	7.60	060
41828		т a	Excision of gum lesion	3.09	4.13	3.89	3 14	2.64	0. c	7.66	7.42	5.18	6.17	010
41872		- 00	Repair dum	2 8	5.80	5.52	. 6. 1 6.	3.40	08.0	20.8	9.36	6.33	6.54	060
41874		· œ	Repair tooth socket	3.09	5.76	5.08	2.76	3.08	0.45	9.30	8.62	6.30	6.62	060
42000		< <	Drainage mouth roof lesion	1.23	2.31	2.51	1.12	27.5	0.12	3.66	3.86	2.47	2.57	010
42100		< <	Biopsy roof of mouth roof Excision lesion, mouth roof	.: 1 E 48	3 5.10	2.11	1.19		0.0	3.60	4.57	3.37	3.36	010
42106		< <	Excision lesion, mouth roof	2.10	4.40	3.52	2.03	2.35	0.25	6.75	5.87	4.38	4.70	010
42107		∢ •	Excision lesion, mouth roof	4.43	6.27	5.87	3.51	3.85	0.44	11.14	10.74	8.38	8.72	060
42120		∢ ⊲	Remove parate/lesion	11.62	AN A	NA 284	12.17	2 S	0.52	NA P R	A R	24.31	24.03	060
42145		< ∢	Repair palate, pharynx/uvula	9.57	NA N	S N	6.64	7.29	0.65	N A	S N	16.86	17.51	060
42160		∢ •	Treatment mouth roof lesion	1.80	3.59	4.09	1.58	2.12	0.17	5.56	90.9	3.55	4.09	010
42180 42182		∢ ∢	Repair palate Repair palate	3.82	3.95	3.90	2.32	2.02	0.40	5.90	5.82 8.12	6.54	7.08	010
		: ∢	Reconstruct cleft palate	12.35	¥Z Y	N A	7.99	9.68	1.27	Z A	N A	21.61	23.30	060
42205		∢ <	Reconstruct cleft palate	13.51	Z Z	Z Z	7.37	9.42	1.58	Y S	Z Z	22.46	24.51	060
42215		(∢	Reconstruct cleft palate	8.8 18.8	Z Z	Z Z	7.08	8.60	1.3	Z Z	Z Z	17.20	18.72	060
42220		∢.	Reconstruct cleft palate	7.01	AN:	Y :	6.72	6.78	0.73	Y :	Y Z	14.46	14.52	060
42225 42226		∢ ∢	Reconstruct cleft palate	9.59	Z Z	K K	11.81	15.79	0.86	Z Z	4 4 Z Z	22.26	26.24	060
42227		< <	Lengthening of palate	9.75	Υ Z	A A	9.54	14.08	0.98	Z Y	A A	20.27	24.81	060
42235		∢ <	Repair palate	7.86	A S	N S	10.32	11.50	0.72	NA 77	NA S	18.90	20.08	060
42280		(∢	Preparation, palate mold	1.54	2.26	2.04	0.84	1.07	0.19	3.99	3.77	2.57	2.80	010
•		⋖	Insertion, palate prosthesis	1.93	2.79	2.68	1.53	1.79	0.17	4.89	4.78	3.63	3.89	010
42300		∢ <	Drainage of salivary gland	1.93	2.89	2.85	1.58	1.76	0.16	4.98	4.94	3.67	3.85	010
42310		< <	Drainage of salivary gland	1.56	2.16	2.24	2.3 0.30	1.48	0.13	3.85	3.93	2.99	3.17	010
		4	Drainage of salivary gland	2.35	3.51	3.34	1.74	2.01	0.21	6.07	2.90	4.30	4.57	010
42330		∢ <	Removal of salivary stone	2.21	3.15	3.15	1.57	1.78	0.19	5.55	5.55	3.97	4.18	010
42340		۲ ۷	Removal of salivary stone	4 59	6.20	9.03	3.17	3.75	0.23	11.23	11 11	81.8	8 76	060
42400		< ∢	Biopsy of salivary gland	0.78	1.91	1.72	09:0	0.69	90:0	2.75	2.56	1.44	1.53	000
42405		∢ <	Biopsy of salivary gland	3.29	3.66	3.92	1.95	2.33	0.28	7.23	7.49	5.52	5.90	010
PGC .		c .	Lycisial of sally aly cyst	2			30.0		P S	2	5	200	P F F	8

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

Mod	Status	Description	Physician work RVUs ³	Fully implemented non-facility PERVUs	Year 2007 transi- tional non-facil- ity PE RVUs	Fully implemented facility	Year 2007 transi- tional fa- cility PE RVUs	Mal-prac- tice RVUs	Fully implemented nonfacility total	Year 2007 transi- tional non-facil- ity total	Fully implemented facility total	Year 2007 transi- tional fa- cility total	Global
	۷.	Drainage of salivary cyst	2.81	5.02	4.65	2.35	2.67	0.27	8.10	7.73	5.43	5.75	060
	∢ <	Excise parotid gland/lesion	9.39	▼	Y Z	4.81	5.88	0.91	∀	Ψ < Z Z	15.11	16.18	060
	(∢		20.79	 (∢ Z Z	Z Z	8.32	11.39	. 65	((∢ 2 Z	30.76	33.83	060
	4	Excise parotid gland/lesion	13.24	AN	A Z	5.92	7.95	1.05	Ϋ́	A N	20.21	22.24	060
	⋖	Excise parotid gland/lesion	22.46	Y Y	A A	8.59	11.94	1.80	A A	A A	32.85	36.20	060
	۷.	Excise submaxillary gland	7.02	Ψ.	A S	3.40	4.45	0.59	AN S	AN .	11.01	12.06	060
	< <	Excise sublingual gland	4.61	5.81	2.89	3.61	4.10	0.42	10.84	10.92	8.64	9.13	060
	∢ ⊲	Repair salivary duct	6.29 17	5.73	207	4.26	40.4	0.4	13.38	13.74	10.98	11.82	060
	< <	Parotid duct diversion	6.10		Z Z	5.82	6.37	0.49	2	Y Z	12.41	12.96	060
_	< <	Parotid duct diversion	9.15	Ϋ́	N A	7.45	8.13	1.04	Ϋ́	Y Z	17.64	18.32	060
	⋖	Parotid duct diversion	11.58	A A	A Z	8.61	9.85	0.93	A A	A A	21.12	22.33	060
	∢ •	Parotid duct diversion	8.20	A S	AN S	6.24	7.42	0.66	AN 0	AN,	15.10	16.28	060
	∢ <	Injection for salivary x-ray	55.5	2.36	3.01	0.44	0.42	0.07	3.68	4.33	1./6	1.74	000
_	∢ <	Closure of salivary listula	0.4	0.40	0.00	3.27	3.92	0.43	1.04	1.79	0.0	9.10	060
	۲ ۵	Dilation of salivary duct	1.0	1 43	137	0.00	0.00	60.0	2.02	95.0	- 1	20.0	
_	< ⋖	Ligation of salivary duct	2.53	4.66	4.30	2.12	2.49	0.23	7.42	2.06	4.93	5.25	060
	< <	Drainage of tonsil abscess	1.62	2.71	2.67	1.49	1.65	0.13	4.46	4.42	3.24	3.40	010
_		Drainage of throat abscess	6.31	4.22	4.69	2.79	3.55	0.44	10.97	11.44	9.54	10.30	010
_		Drainage of throat abscess	12.22	Y Y	Υ V	6.46	7.80	0.91	A A	Y Z	19.59	20.93	060
		Biopsy of throat	1.39	2.24	2.20	1.16	1.34	0.11	3.74	3.70	2.66	2.84	010
		Biopsy of throat	45.	3.79	4.53	1.50	1.93	0.12	5.45	6.19	3.16	3.59	010
_		Biggs of upper nose/throat	42.L	3.29	3.64	1.35	1.64	0.10	4.63	4.98	2.69	2.98	010
_		Excise pharvnx lesion	06. 08.	- 600	3.06	. t	20.	200	5.42	5.55	3.5	25.53	0.00
		Remove pharynx foreign body	1.8	2.10	2.28	1.23	E	0.16	4.07	4.25	3.20	3.28	010
	4	Excision of neck cyst	3.25	2.67	5.72	3.36	3.50	0.29	9.21	9.26	06.9	7.04	060
-	∢ •	Excision of neck cyst	7.18	Υ ?	Z :	5.62	6.23	0.61	₹ Z	Y Z	13.41	14.02	060
	∢ <	Remove tonsils and adenoids	4.15	Ψ ς 2	Υ S	2.48	3.10	0.31	Υ S	Z Z	6.94	7.56	060
	∢ <	Remove tonsils and adenoids	82.58	₹ ₹	Z Z	2.63	3.29	0.35	¥	4 6 2 2	92.9	7.92	060
_	< ⊲	Bemoval of tonsils	3337	(4 2 Z	ζ 4	25.5	28.0	0.23	(4 2 Z	ζ Υ	0.9	6.50	060
	< <	Removal of adenoids	2.57	Z Z	Υ Z	2.16	2.47	0.20	A N	¥ Z	4.93	5.24	060
	4	Removal of adenoids	2.71	A A	A Z	2.37	2.73	0.22	A A	A A	5.30	5.66	060
	۷.	Removal of adenoids	2.30	Ψ.	Ϋ́ Z	1.76	2.29	0.21	ΨZ:	¥ :	4.27	4.80	060
•	∢ <	Removal of adenoids	3.18	₹ ₹	₹ < Z Z	75.37	7.82	0.20	₹ <u>₹</u>	¥ \$	5.81	05.20	060
_	< <	Extensive surgery of throat	17.49	 {	ζ « Z Z	14.26	15.78	1.16	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	ζ <u> </u>	32.91	34.43	060
	4	Extensive surgery of throat	32.27	ΑN	A Z	20.22	22.49	1.98	Ϋ́	A A	54.47	56.74	060
	Δ.	Excision of tonsil tags	2.22	Y Z	A A	2.07	2.33	0.18	A A	Y Y	4.47	4.73	060
	∢ •	Excision of lingual tonsil	5.39	Υ ?	Υ :	7.88	8.41	0.44	ΨZ:	Y ?	13.71	14.24	060
_	∢ <	Partial removal of pharynx	18.84	Υ S	Υ S	13.48	14.01	1.05	Z Z	Υ S	33.37	33.90	060
	∢ ⊲	Revision of pharyngeal walls	25.67	₹	₹	16.85	21.13	1.28	₹ ₹	₹	43.80 55.56	44.08 56.96	060
	< ⋖	Repair throat wound	5.24	(4 2 Z	Z Z	2.66	3.42	0.50	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	Z Z	8.40	9.16	010
	< <	Reconstruction of throat	8.09		Z Z	10.08	11.45	0.72	Z	Z Z	18.89	20.26	060
	4	Repair throat, esophagus	9.25	A A	A A	12.70	16.21	0.88	Ϋ́	A N	22.83	26.34	060
	⋖ ·	Surgical opening of throat	7.86	Υ Z	₹ Z	9.33	10.36	0.80	₹ Z	Y :	17.99	19.02	060
	< •	Control throat bleeding	2.33	ς ς Z	Z Z	1.57	1.87	0.19	Υ S	Υ S	4.09	4.39	010
		Control throat bleeding	40.0 40.0	₹ 4 2 2	₹	20.4	4.7 4.0	0.45	₹	X	10.12	13.43	060
	- 1	יייייייייייייייייייייייייייייייייייייי	7.			- C	3	3	1871	176.1	<u></u>	2 5	2
		444444444444444444444444444444444444444	Prainage of salivary or Excise parotid gland/life Excise submaxillary gland/life Excise submaxillary gland/life Excise submaxillary gland/life Excise submaxillary gland/life Excise parotid gland/life Excise submaxillary gland/life Excise parotid gland/life Excise submaxillary gland/life Excise parotid gland/life Excise submaxillary duct in Parotid duct diversion A Parial glo of salivary duct A Biopsy of throat mose/A A Biopsy of throat mose/A A Biopsy of upper nose/A A Bemove tonsils and a A Bemoval of adenoids A A Bemoval of adenoids A A Bemoval of adenoids A Bersive surgery of th Extensive surgery of th Extensive surgery of th Extensive surgery of the Extensive s	A Excise parotid glandfesion 2.36	A Excise paroid glandlesion 2.81 5.02	A Excise paroid glandlesion 2.81 5.02	Racial	Profitage of salivary cyst Control salivary cys	A	A Eccise participation of salivary cyst A Eccise submay duct A	A Eccise practic glandfaston 7275 NA NA 526 528 588 156 NA NA 526 528 156 NA NA 526 156 NA NA	Maintage of salukary cyst	A Eccine pareld glandfelden 7.94 A

ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

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CPT 1 HCPCS 2	Мод	Status	Description	Physician work RVUs ³	Fully implemented non-facility PE	Year 2007 transi- tronal non-facil- ity PE RVUs	Fully implemented facility	Year 2007 transi- tional fa- cility PE RVUs	Mal-practice RVUs	Fully im- plement- ed non- facility total	Year 2007 transi- tional non-facil- ity total	Fully implemented facility	Year 2007 transi- tional fa- cility total	Global
42970		4 4	Control nose/throat bleeding	5.72	A Z	A N	3.44	4.00	0.39	Z Z	Z Z	9.55	10.11	060
		< ∢		7.49	Z Z	Z Z	4.35	5.38	0.62	Z Z	Z Z	12.46	13.49	060
43020		∢•	Incision of esophagus	8.08	₹ Z	Y :	4.29	5.15	0.87	Z :	Z :	13.24	14.10	060
43030		∢ ⊲	I hroat muscle surgery	, 2 86.	₹ ¤	∀	10.14	5.15	0.70	Z Z	Z Z	12.63 34.34	13.71	060
43100		< <	Excision of esophagus lesion	9.48	(4 2 Z	ZZ	4.97	5.92	0.93	Z Z	Z Z	15.38	16.33	060
43101		⋖ ·	Excision of esophagus lesion	16.94	₹ Z	Y :	7.23	7.73	2.31	Y :	Y :	26.48	26.98	060
43107		∢ <	Removal of esophagus	43.89	∢ S Z Z	Y Z	16.66	17.90	5.22	Y Z	Y S	65.77	67.01	060
43112		(∢	Removal of esophagus	47.21	ζ « Z Z	Z Z	17.22	18.87	5.79	Z Z	Z Z	70.22	71.87	060
		⋖	Removal of esophagus	46.95	Ą Z	Z A	17.97	15.86	4.45	N	N A	69.34	67.23	060
43116		∢ <	Partial removal of esophagus	71.39	Z Z	Y Z	21.91	18.03	3.05	Z Z	Z Z	96.35	92.47	060
43118		< <	Partial removal of esophagus	52.07	Q Q	₹ ₹ 2 Z	16.85	14.58	. 4	(ζ	73.02	70.75	060
		< <	Partial removal of esophagus	46.35	ď Z	A A	16.28	14.35	3.90	Z A	Z A	66.53	64.60	060
43122		⋖	Partial removal of esophagus	43.89	₹ Z	Y Z	15.66	17.00	5.40	Y Z	Y Y	64.95	66.29	060
43123		< <	Partial removal of esophagus	63.83	₹ Ş	Z Z	20.07	15.62	4.15	Z Z	Z Z	88.05	83.60	060
		∢ ⊲	Removal of esophagus	12.33	4	4 4 2 2	21.43	15.20	3.73	A A	A A	19.79	83.50	060
43135		< ∢	Removal of esophagus pouch	22.37	Υ Z	Z Z	9.07	8.35	2.33	Υ Z	Z Z	33.77	33.05	060
		⋖	Esophagus endoscopy	1.59	3.55	3.99	0.91	1.03	0.13	5.27	5.71	2.63	2.75	000
43201		⋖・	Esoph scope w/submucous inj	2.09	5.69	4.90	1.21	1.13	0.15	7.93	7.14	3.45	3.37	000
43202		∢ ⊲	Esophagus endoscopy, biopsy	1.89	5.22 NA	5.48 NA	0.99	0.95	0.15	7.26 NA	7.52 NA	3.03	2.99	000
43205		< <	Esophagus endoscopy/ligation	3.78	Z Z	ZZ	2.12	1.67	0.28	Z Z	Z Z	6.18	5.73	800
•		⋖ .	Esophagus endoscopy	2.60	₹ Z	Y S	1.29	1.22	0.22	Y S	Y S	4.11	4.04	000
43216		∢ <	Esophagus endoscopy/lesion	2.40	N N	A S	1.24	1.1	0.20	NA 80 80 80 80 80 80 80 80 80 80 80 80 80	NA V	3.84	3.71	000
43219		∢ ⊲	Esophagus endoscopy	2 v 8 0	0.72 AA	9.0 P N	5.4.	. t 5. 14	0.20	0.00 V	0.01 AN	6.79 6.79	4.4	
43220		< <	Esoph endoscopy, dilation	2.10	ď Z	A A	1.15	1.02	0.17	Z Z	¥ Z	3.42	3.29	000
43226			Esoph endoscopy, dilation	2.34	Y S	Y S	1.32	다. 다.	0.19	A S	Ϋ́	3.85	3.63	000
4322/ 43228		∢ ⊲	Esoph endoscopy, repair	3.59	∀	∀	88. 5	5. F	0.28	Z Z	Z Z	5.75	5.43	000
43231		< <	Esoph endoscopy w/us exam	3.19	Y Z	Z Z	1.79	1.43	0.23	Z Z	Z Z	5.21	4.85	000
43232		⋖ ·	Esoph endoscopy w/us fn bx	4.47	₹ ¦	AN	2.44	1.98	0.34	NA.	N A	7.25	6.79	000
43234		∢ ⊲	Upper GI endoscopy, exam	2.01	5.07	5.27	1.03	0.91	0.17	7.25	7.45	3.21	3.09	000
43236		< <	Uppr gi scope w/submuc inj	2.92	6.90	6.54	1.7	1.34	0.21	10.03	9.67	4.84	4.47	000
43237		∢.	Endoscopic us exam, esoph	3.98	₹ :	Y :	2.23	1.75	0.43	₹ Z	Y Z	6.64	6.16	000
43238		∢ <	Uppr gi endoscopy w/us fn bx	5.02	A N	N A	2.63	2.14	0.43	NA 000	AN a	8.08	7.59	000
43240		(∢	Soph endoscope w/drain cvst	6.85	0.50 AN	0.82 V	3.58	2.85	0.56	e AN	4 Z	10.99	10.26	000
		< <	Upper GI endoscopy with tube	2.59	₹ Z	Z A	1.46	1.19	0.21	N	N	4.26	3.99	000
43242		∢ •	Uppr gi endoscopy w/us fn bx	7.30	Ϋ́	Υ ·	3.81	3.01	0.53	ΨZ	Υ S	11.64	10.84	000
43243		∢ ∢	Upper gl endoscopy & Inject	4.56 5.04	4 4 2 2	Y Y	2.45	2.16	0.33	ξ Z	ξ Z Z	8.15	6.85	000
		< <	Uppr gi scope dilate strictr	3.18	Ą Z	ΥZ	1.68	1.40	0.26	Ϋ́	ĄZ	5.12	4.84	0000
43246		∢.	Place gastrostomy tube	4.32	₹ Z	Y :	2.18	1.81	0.34	Y S	¥:	6.84	6.47	000
4324/ 43248		∢ ⊲	Uper di endoscopy/mide wire	2.38 45	₹ ₹ ₹	¥ 4 Z Z	- 1 86. 4 4. 7	94. L	0.27	₹	₹	0.49 0.00	0. L4 7 83	
43249			Esoph endoscopy, dilation	2.90	Z Z	Z Z		1.33	0.22	Z Z	₹ ₹ ₹	4.80	4.45	800
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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

ADL	JEINDOIN	ADDENDOM B.——DELATIVE	VALUE UNITS (NVUS)	שושע	NO MELATED INFORMATION OSED IN)			בהאטוטפואו שאוואוואוה ופס		2 2 2	7007	OOMINOLE	ב
CPT 1 HCPCS 2	Mod	Status	Description	Physician work RVUs ³	Fully im- plement- ed non- facility PE RVUs	Year 2007 transi- tional non-facil- ity PE RVUs	Fully implemented facility	Year 2007 transi- tional fa- cility PE RVUs	Mal-prac- tice RVUs	Fully implemented non-facility total	Year 2007 transi- tional non-facil- ity total	Fully im- plement- ed facility total	Year 2007 transi- tional fa- cility total	Global
43250		44	Upper GI endoscopy/tumor	3.20	4 4 4 Z Z Z	Z Z Z	1.68	1.40	0.26	Y Y Z	Z Z Z	5.14	5.59	0000
43256		∢ ∢	Uppr ai endoscopy w/stent	8.4 8.34	ξ Z		2.92	1.87	0.32	ξ Z	4 4 2 2		6.53	8 8
		4	Uppr gi scope w/thrml txmnt	2.50	Y Y		2.07	2.18	0.36	Y Y	N A		8.04	000
43258	•	∢ ⊲	Operative upper GI endoscopy	4.54	Z Z		2.47	1.96	0.33	Z Z	A A		6.83	000
43260		< ∢	Endo cholangiopancreatograph	5.95	Z Z		3.18	2.51	0.43	Z Z	Z Z		8.89	800
43261		∢ <		6.26	Y Z		3.34	2.64	0.46	Z Z	¥ ž		9.36	000
43263		< <	Endo cholangiopancreatograph	7.28	Z Z		3.88	3.05	0.54	ξ <u>ξ</u> Ζ	Z Z		10.87	000
•				8.89	Y :		4.62	3.65	0.65	¥ :	Y :		13.19	000
43265		∢ ∢	Endo cholangiopancreatographFndo cholangiopancreatograph	10.00	Z Z		3.77	3.04	0.73	Z Z	A Z		10.96	000
		< ∢	Endo cholangiopancreatograph	7.38	Z Z		4.04	3.18	0.54	Z Z	A A		11.10	000
43269		∢ <		8.20	Y Z		4.27	3.38	0.60	Y Z	Y S		12.18	000
43272		< <	Endo cholangioparicreatograph	2.38	(96.8	3.08	0.04	X X	X X		11.00	000
		< ∢	asty	17.96	Z Z		6.64	7.13	2.27	Z Z	Z Z Z		27.36	060
43300		∢ •	Repair of esophagus	9.13	¥:		5.13	6.08	1.12	¥:	Y S		16.33	060
4330543310			Repair esophagus and fistula	26.13	Z Z		10.16	10.86	9.50 40.	ξ Z	A A		40.59	060
			Repair esophagus and fistula	29.22	Z Z		10.01	11.44	4.00	Z Z	₹ Ž		44.66	060
43313		۷.	Esophagoplasty congenital	48.07	¥ :		17.09	18.42	5.45	A :	¥:		71.94	060
43314			Tracheo-esophagoplasty cong	53.05	A N		18.47	19.05	6.63	A N	A N		78.73	060
43324		< <	Revise esophagus & stomach	22.80	Z Z		8.30	8.67	2.75	Z Z	Z Z		34.22	060
		∢ •	Revise esophagus & stomach	22.41	Y :		8.35	8.70	2.59	¥ :	Y :		33.70	060
43326		∢ ⊲	Revise esophagus & stomach	22.09	₹ 4 Z Z		9.37	9.33	2.84	Z Z	Z Z		33.07	060
43331		< ∢	Repair of esophagus	22.87	Z Z		9.61	9.76	2.93	Z Z	Z Z		35.56	060
43340		∢.	Fuse esophagus & intestine	22.80	¥ Z		9.02	9.01	2.45	A :	¥.		34.26	060
43341			Fuse esophagus & intestine	24.04	Y Z		10.24	10.09	2.91	Y Z	Z Z		37.04	060
43351			Surgical opening, esophagus	21.79	(4 2 Z		9.61	9.77	2.46	Z Z	Z Z		34.02	060
43352			Surgical opening, esophagus	17.62	Y :		8.17	8.34	2.05	A :	A S		28.01	060
43360			Gastrointestinal repair Gastrointestinal repair	39.82	₹ ₹ Z Z		16.90	15.29	4.96 4.49	ξ Z	Υ Υ Σ Σ		66.83	060
			Ligate esophagus veins	25.41	N A		13.84	10.56	1.95	N A	N A		37.92	060
43401		∢ <	Esophagus surgery for veins	26.30	Y S		9.37	9.48	3.04	Υ S	Y S		38.82	060
4340543410		∢ ∢	Ligate/staple esopnagusRepair esophagus wound	16.22	ξ		7.48	7.61	1.71	ξ Z Z	ξ Z Z		25.54	060
:		∢	Repair esophagus wound	28.62	Ϋ́Z		11.95	11.82	3.52	N A	N		43.96	060
43420		∢ •	Repair esophagus opening	16.59	Υ ·		6.72	7.25	1.43	¥ :	Y S		25.27	060
43425	-	∢ ⊲	Repair esophagus opening	24.85	NA 275		10.23	0.00	3.02	A 2 2	Z Z		37.93	060
43453			Dilate esophagus	1.5.	6.50		1.05	0.81	0.0	8.12	7.81		2.43	800
43456		∢ •	Dilate esophagus	2.57	13.40		1.51	1.20	0.20	16.17	16.46		3.97	000
43458			Drace in treatment accorbanic	3.06	ε		1.67	85. 1	0.24	10.43	90.01 NA		4.68 86.7	88
43500			Surgical opening of stomach	12.67	Z Z		5.22	5.04	1.45	Z Z	¥ Ž		19.16	060
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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

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CPT ¹ HCPCS ²	Мод	Status	Description	Physician work RVUs ³	Fully implemented non-facility PE	Year 2007 transi- tional non-facil- ity PE RVUs	Fully implemented facility	Year 2007 transi- tional fa- cility PE RVUs	Mal-prac- tice RVUs	Fully implemented nonfacility total	Year 2007 transi- tional non-facil- ity total	Fully implemented facility	Year 2007 transi- tional fa- cility total	Global
43501		∢ ◊	Surgical repair of stomach	22.41	Z Z	4 4 Z 2	8.06	8.26	2.64	ZZ	Z Z	33.11	33.31	060
43510			Surgical opening of stomach	14.95	ζ ζ Z Z	ZZ	6.81	6.65	1.48	Z Z	¥ Z	23.24	23.08	060
			Incision of pyloric muscle	11.17	A N	N	4.88	5.17	1.36	A	A	17.41	17.70	060
43600			Biopsy of stomach	1.91	ΨZ:	Υ ?	0.83	0.70	0.14	Υ :	Y Z	2.88	2.75	000
43605	_		Biopsy of stomach lesion	13.60	∀	Z Z	5.39 00.9	5.32	2.58	Z Z	Κ Δ Ζ Ζ	20.57	20.50	060
43611			Excision of stomach lesion	20.19	(4 2 Z	Z Z	7.49	7.56	2.35	Z Z	Z Z	30.03	30.10	060
			Removal of stomach	33.85	Y Z	N A	11.02	11.62	3.95	N A	A A	48.85	49.45	060
43621			Removal of stomach	39.34	₹ Ş	Y S	12.36	12.09	4.03	A S	Y S	55.73	55.46	060
43627			Removal of stomach partial	39.84 24.32	4 4 2 Z	ξ	8.55	60.2	87.4 98.0	Z Z	Z Z	35.85	36.32	060
			Removal of stomach, partial	34.95	Ą Z	Z	11.24	9.70	2.98	A A	Z Z	49.17	47.63	060
43633		⋖	Removal of stomach, partial	32.95	A A	A A	10.74	9.70	3.05	Ϋ́	ΥZ	46.74	45.70	060
43634		∢ <	Removal of stomach, partial	36.45	₹ Z	Y S	11.69	10.51	3.32	A S	Υ Σ	51.46	50.28	030
43640			Vacotomy & pylonis repair	19.37	₹ ₹ Z Z	Z Z	7.97	0.00	0.27	₹ ₹ 2 Z	ζ 4	28.80	98.80	777
			Vagotomy & pylorus repair	19.62	Z V	Z Z	7.30	7.36	2.24	Ą Z	Z Z	29.16	29.22	060
			Lap gastric bypass/roux-en-y	29.18	Ą Z	AN	10.13	10.96	3.15	ΥZ	ΥZ	42.46	43.29	060
43645			Lap gastr bypass incl smll i	31.31	₹ Z	ΥZ:	11.28	11.85	3.53	₹ Z	Y Z	46.12	46.69	060
43651				10.13	₹ S	Y S	4.59	4.73	1.33	∀	Υ < Ζ 2	16.05	16.19	080
43653			l anaroscony, dagus lielve	2.5	ζ	ζ Z	3.10 4.34	9.60	5.5	(4 2 Z	(4 2 Z	13.69	13.58	060
			Place gastrostomy tube	4.60	Z V	Z Z	1.77	2.09	0.43	A N	Ž	6.80	7.12	010
43752			Nasal/orogastric w/stent	0.81	0.26	0.28	0.26	0.26	0.02	1.09	1.11	1.09	1.09	000
43760			Change gastrostomy tube	1.10	13.41	4.92	0.40	0.44	0.09	14.60	6.11	1.59	1.63	000
•			reposition gastrostomy tube	17.79	CO. A		0.09	79.0	. c	ე გ გ	3.28 NA	27.50	27.65	000
43771			Lap, revise adjust gast band	20.58	Ą Z	Z Z	8.10	8.48	2.54	A N	Z Z	31.22	31.60	060
43772			Lap, remove adjust gast band	15.58	Y Y	A A	5.94	6.32	1.92	Ϋ́	Y Y	23.44	23.82	060
43773			Lap, change adjust gast band	20.58	₹ Z	Y S	8.10	8.48	2.55	Υ S	Υ S	31.23	31.61	060
43774		< ⊲	Reconstruction of pylonis	15.31	₹ ₹ Z Z	Z Z	5.79	6. c.	- 10.	₹ ₹ 2 Z	ζ ζ Ζ	22.63	23.00	060
43810		< ⋖	Fusion of stomach and bowel	16.76	Z Z	Z Z	6.13	6.18	1.93	Z Z	ξ Z	24.82	24.87	060
43820		⋖	Fusion of stomach and bowel	22.34	₹ Z	Y Y	7.54	6.70	2.03	Z Z	Y Z	31.91	31.07	060
43825			Fusion of stomach and bowel	21.57	₹ Ş	Y Z	7.82	7.98	2.53	▼	Υ S	31.92	32.08	060
43831			Place gastrostomy tube	8.31	(∢ 2 Z	Z Z	5.1.5	4.67	1.03	Z Z	Z Z	14.45	14.01	060
			Place gastrostomy tube	17.22	Ą Z	A A	7.09	6.92	1.97	NA	NA	26.28	26.11	060
43840			Repair of stomach lesion	22.64	A S	Y S	8.10	7.11	2.05	Y Z	Y Z	32.79	31.80	060
43843			V-balld gastroplasty	20.02	ζ	Z Z	7.76	7.7	2 45	(4 2 Z	ζ ζ Ζ	31.33	31.03	060
			Gastroplasty duodenal switch	33.04	9.83	10.56	12.86	11.32	4.05	46.92	47.65	49.95	48.41	060
43846			Gastric bypass for obesity	27.15	A A	A A	9.90	10.01	3.18	Ϋ́	N A	40.23	40.34	060
43847			Gastric bypass incl small i	30.02	₹ Ş	Y S	10.55	10.83	3.55	A S	A S	44.12	44.40	060
43850			Revise stomach-bowel fusion	27.39	₹ ₹	Z Z	9.28	9.70	3.27	Z Z	Z Z	39.94	40.36	060
			Revise stomach-bowel fusion	28.50	Ą Z	A N	9.61	10.17	3.46	Ϋ́Z	A N	41.57	42.13	060
43860			Revise stomach-bowel fusion	27.70	₹ Z	Y :	9.38	9.84	3.30	₹ Z	Y Z	40.38	40.84	060
43865		∢ ∢	Revise stomach-bowel fusion	28.86 11.32	Z Z	Ψ Ψ Z Z	9.93	10.38	3.50	Z Z	Δ Δ Z Z	42.29 17.56	42.74	060
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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

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CPT¹ HCPCS²	Mod	Status	Description	Physician work RVUs ³	Fully implemented non-facility PE	Year 2007 transi- tronal non-facil- ity PE RVUs	Fully implemented facility	Year 2007 transi- tional fa- cility PE RVUs	Mal-prac- tice RVUs	Fully im- plement- ed non- facility total	Year 2007 transi- tional non-facil- ity total	Fully implemented facility	Year 2007 transi- tional fa- cility total	Global
4388043886		∢ ∢	Repair stomach-bowel fistula	26.99	ZZ	ZZ	9.22	9.75	3.26	4 4 Z Z	Z Z	39.47	40.00	060
		< <	Remove gastric port, open	4.20	Z Z	A A	3.02	2.84	0.51	Z Z	A A	7.73	7.55	060
43888		∢ •	Change gastric port, open	6.30	₹ Z	Y :	3.96	3.82	0.70	¥ :	¥ :	10.96	10.82	060
		∢ <	Freeing of bowel adhesion	18.34	₹ Ş	¥ ž	6.53	6.68	2.14	∀ \$ 2	Υ S	27.01	27.16	060
44010		(∢	Incision of sinal bower	7	(4 2 Z	ζ	0.47	0.40	0.35	ζ	Y Y	3.65	3.80	777
44020		< ∢	Explore small intestine	16.10	₹ Z	Z Z	5.93	5.95	1.85	ΥZ	Υ Z	23.88	23.90	060
		⋖	Decompress small bowel	16.19	Ϋ́	N A	6.23	6.04	1.86	AN	NA	24.28	24.09	060
44025		⋖	Incision of large bowel	16.39	Υ Z	Y Y	90.9	6.05	1.89	₹ Z	ΥZ	24.34	24.33	060
44050		۷,	Reduce bowel obstruction	15.40	Y :	¥ :	5.76	5.92	1.85	Ψ.	Y :	23.01	23.17	060
44055		∢ <	Correct mairotation of bowel	25.49	₹ < Z Z	¥	8.43	8.67	2.90	₹ < Z Z	4 < Z Z	36.82	37.06	060
		(⊲	acion(c)	12.01	(d	(4 2 Z	5.47	5.70	1 55	(d	ζ Δ	20.10	20.77	000
44111		< ∢	Excision of bowel lesion(s)	16.40	Z Z	Z Z	6.07	6.11	1.86	Z Z	₹ ₹	24.33	24.37	060
		∶ ∢	Removal of small intestine	20.70	¥ Z	ΥZ	7.25	7.13	2.24	ΥZ	ΥZ	30.19	30.07	060
44121		4	Removal of small intestine	4.44	Ϋ́	ΥN	1.12	1.42	0.58	Ϋ́Z	ΥZ	6.14	6.44	ZZZ
		4	Removal of small intestine	19.89	Ϋ́	A N	7.00	7.20	2.26	ΥZ	A N	29.15	29.35	060
44126		⋖	Enterectomy w/o taper, cong	41.94	A N	Y Y	13.72	14.04	4.68	Y Y	Y Y	60.34	99.09	060
44127		⋖	Enterectomy w/taper, cong	49.01	A N	A A	14.56	15.46	5.75	₹ Z	Y Z	69.32	70.22	060
44128		۷.	Enterectomy cong, add-on	4.44	Y :	Υ :	1.04	1.41	0.61	Y :	Y :	6.09	6.46	ZZZ
44130		∢ •	Bowel to bowel fusion	21.92	Y S	Υ ·	7.56	6.56	1.87	Υ S	ς ς Z	31.35	30.35	080
44139		∢ <	Mobilization of colon	2.23	₹ Ş	Υ S	0.55	0.71	0.28	Ψ 2 2	Y S	3.06	3.22	777
44140		∢ <	Partial removal of colon	22.40	₹ ₹	Υ Υ	3.00	8.52	2.70 5.70	₹ < Z Z	₹ < Z Z	33.10	33.62	060
		۲ ۵	Partial removal of colon	23.63	(d	ζ Δ Ζ Ζ	10.85	10.37	20.5	(d	Z Z	41.46	41.36	060
44144		< ∢	Partial removal of colon	29.69	Z Z	Z Z	10.91	96.6	2.85	Z Z	Z Z	43.45	42.50	060
		< <	of colon	28.39	Ϋ́	A N	10.06	10.64	3.28	A Z	Ą	41.73	42.31	060
		⋖	Partial removal of colon	35.08	Ϋ́	Ν	13.52	13.05	3.40	ΥZ	A A	52.00	51.53	060
44147		⋖ .	Partial removal of colon	33.50	Y N	Y :	11.29	9.36	2.55	₹ Z	Y Z	47.34	45.41	060
		< <	Removal of colon	29.91	Υ S	¥ ž	12.96	12.28	3.03	∀ \$ 2	Υ S	45.90	45.22	060
44151		∢ <		34.05	₹ ₹	Υ Υ	10.40	13.73	3.48	₹ < Z Z	₹ 5	32.74	01.80	060
		< <	Bemovel of colon/fleostomy	23.31	ζ	(10.30	1.51		(< Z	2 2	43.60	74.73 51.08	060
44155		< ∢	Removal of colon/ileostomy	34 .5	Z Z	(4 2 Z	14.02	13.51	3 2 2	(4 2 Z	(4 2 Z	51.44	50.93	060
		. ∢	Removal of colon/ileostomy	37.15	Y X	ΥZ	15.47	15.17	3.94	Z	ΥZ	56.56	56.26	060
		<	Removal of colon	20.72	AN	A Z	7.49	7.69	2.36	Ϋ́	Υ Z	30.57	30.77	060
44180		⋖	Lap, enterolysis	15.15	A N	A A	5.79	6.14	1.85	Y Y	A A	22.79	23.14	060
44186		⋖	Lap, jejunostomy	10.26	Z	Y Z	4.58	4.75	1.27	₹ Z	ΥZ	16.11	16.28	060
44187		⋖ ·	Lap, ileo/jejuno-stomy	17.21	Υ Σ	Ψ:	8.15	8.26	1.95	Y :	Ψ.	27.31	27.42	060
44188		< •	Lap, colostomy	19.14	Z Z	Υ ·	8.72	8.83	2.23	∀ \$ 2	ς ς Z	30.09	30.20	060
44202		∢ <	Lap, enterectomy	23.20	Y S	Y S	87.58	8.78	2.84	Ψ «	Ψ « Z Z	34.32	34.82	080
		₹ ◆	Lab resect s/intestine, addi	4.44	₹ ₹ Z Z	ζ Δ Ζ Ζ	8 86	14.1	0.57	₹ ₹	ζ	38 10	30.02	777
44205		< ∢	Labard partal coeconity	22.83	(4 2 Z	(4 2 Z	7.77	8,60	2.74	(4 2 Z	(4 2 Z	33.3	34.14	060
		< <	Lap part colectomy w/stoma	29.57	¥ Z	Y Z	10.45	11.07	3.45	Z Z	Z Z	43.47	44.09	060
		< <		31.73	A Z	A A	10.06	11.15	3.66	Ϋ́	N A	45.45	46.54	060
44208		⋖	L colectomy/coloproctostomy	33.80	A N	Y Y	11.98	12.87	3.87	Y Y	Y Y	49.65	50.54	060
44210		⋖ ·	Laparo total proctocolectomy	29.80	₹ Z	Y :	11.12	11.71	3.41	₹ Z	Y :	44.33	44.92	060
44211		۷.	Laparo total proctocolectomy	36.79	Y S	Υ ·	13.67	14.45	4.16	Υ :	Υ ·	54.62	55.40	060
44212		∢	Laparo total proctocolectomy	34.23	- ¥N	ĮN	13.1	13.30	0.11	۲ ۲	Į.	51.63	91.04	080
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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

CPT ¹ HCPCS ²	Mod	Status	Description	Physician work RVUs ³	Fully implemented non-facility PE	Year 2007 transi- tional non-facil- ity PE RVUs	Fully implemented facility	Year 2007 transi- tional fa- cility PE RVUs	Mal-prac- tice RVUs	Fully implemented non-facility	Year 2007 transi- tional non-facil- ity total	Fully implemented facility	Year 2007 transi- tional fa- cility total	Global
44213		٨	Lap, mobil splenic fl add-on	3.50	A N	A A	0.87	1.13	0.44	A A	N	4.81	20.9	ZZZ
44227		⋖	Lap, close enterostomy	28.43	Y Y	N A	9.45	10.35	3.37	Y Y	∢ Z	41.25	42.15	060
44300		∢ •	Open bowel to skin	13.61	Ψ.	Ϋ́ Z	5.58	5.52	1.60	Υ :	Ψ.	20.79	20.73	060
44310		∢ •	lleostomy/jejunostomy	17.45	Ζ :	Z Z	6.37	6.63	3.98	Υ S	ζ « Ζ :	25.80	26.06	060
44312		< <	Revision of ileostomy	9.29	₹ ₹ Z Z	ξ Δ Ζ Ζ	4 0. 4 4 0. 8	9.10	0.92	₹	₹ 4	04.85	14.37	060
44316		< ∢	Devise howel pouch	23.40	₹ ₹ 2 Z	Z Z	+ EE	8.75	2.37	ζ	(4 2 Z	35.10	34.52	060
44320		< ∢	Colostomy	19.69	Z Z	Z Z	7.58	7.65	2.25	Z Z	A Z	29.52	29.59	060
		<	Colostomy with biopsies	13.04	Ϋ́	A A	9.43	8.80	1.54	A Z	Ϋ́Z	24.01	23.38	060
44340		⋖	Revision of colostomy	90.6	A A	A	4.94	4.44	0.99	ΥZ	NA	14.99	14.49	060
44345		∢ ·	Revision of colostomy	17.00	Y :	Z :	6.89	06.9	1.96	Y :	Ψ.	25.85	25.86	060
44346		∢ •	Revision of colostomy	19.41	Υ S	Z S	7.51	7.43	2.42	Υ S	∀ ° 2 2	29.04	28.96	060
44360		∢ <	Small bowel endoscopy	2.59	▼	Z Z	1.50	2 5	0. 0	₹ ₹ Z Z	¥ Z	46.4	00.4	000
44363		< ∢	Small bowel endoscopy	3.49	(4 2 Z	ζ « Z Z	000	5 75	0.27	Z Z	Z Z	5.78	5.30	000
		< ∢		3.73	Z Z	Z Z	2.10	1.64	0.27	Y Z	ΥZ	6.10	5.64	000
44365		4		3.31	AN	N	1.85	1.48	0.24	AN	۷Z	5.40	5.03	000
44366		4	Small bowel endoscopy	4.40	Y Y	Ϋ́	2.48	1.93	0.32	A A	Y Y	7.20	6.65	000
44369		∢	Small bowel endoscopy	4.51	Y Y	N A	2.51	1.93	0.33	Y Z	٧Z	7.35	6.77	000
44370		⋖ ·	Small bowel endoscopy/stent	4.79	Y :	₹ Z	2.66	2.15	0.37	Y:	Y :	7.82	7.31	000
44372		∢ •	Small bowel endoscopy	4.40	Ψ.	Z :	2.20	1.86	0.35	Υ :	Ψ.	6.95	6.61	000
443/3		∢ <		3.49 1.49	Ψ 2 2	Υ S	28.	7.52	0.27	Y S	Ψ 2 2	5.58	2.28	000
443/6		∢ <	Small bowel endoscopy	5.75 7.75	▼	Z Z	2.53 0.03	2.10	24.0	₹ ₹ Z Z	¥ Z	02.8	7.83 7.83	000
44378		< ∢	Small bowel endoscopy	7.12	 { Z	Z Z	3.69	2.95	0.52	Z Z	∑	11.33	10.59	000
		< <	S bowel endoscope w/stent	7.46	Ϋ́	A A	3.38	3.04	0.62	Ϋ́	¥.	11.46	11.12	0000
44380		∢.	Small bowel endoscopy	1.05	Y :	A :	0.77	0.61	0.08	Y :	A :	1.90	1.74	000
44382		∢ •	Small bowel endoscopy	1.27	ΨZ:	Υ :	0.81	0.68	0.12	Υ :	Ψ.	2.20	2.07	000
44383		∢ <	lleoscopy w/stent	2.94	A C	N C	1.68	1.37	0.21	NA P	NA NA	4.83	4.52	000
44386		۲ ۵	Endoscopy of bower pouch Prices	2 - c	4.99 0.90	6.72	1.07	0.79	0.00	0.90	9.74	3.39	2.70	
44388		(∢	Colonoscopy	2.82	6.25	5.38	88.	12.5	0.26	9.33	8.46	4.46	4.29	000
		4	Colonoscopy with biopsy	3.13	7.27	6.80	1.62	1.36	0.27	10.67	10.20	5.05	4.76	000
44390		⋖ -	Colonoscopy for foreign body	3.85	8.17	7.39	1.84	1.58	0.32	12.31	11.53	5.98	5.72	000
44391		∢ <	Colonoscopy for bleeding	4.3	9.24	8.87	2.29	1.84	0.34	13.89	13.52	6.94	6.49	000
44393		۲ ۵	Colonoscopy & polypectorily	0.0 4 83	7.32 20.8	7.00	47	0.00	0.34	13.97	12.45	2.69	2.70	
44394		< <	Colonoscopy w/snare	4.42	8.70	8.05	2.12	1.82	0.38	13.50	12.85	6.92	6.62	000
		<	Colonoscopy w/stent	4.70	A V	A A	2.37	1.94	0.39	Ϋ́Z	A A	7.46	7.03	000
44500		٧	Intro, gastrointestinal tube	0.49	ΨZ	Υ V	0.17	0.16	0.03	Y Y	ΥZ	69.0	0.68	000
44602		⋖ •	Suture, small intestine	24.60	Υ ?	Y S	7.61	6.71	2.7	Υ « Z	¥ ž	34.32	33.42	060
44603		< ⊲	Suture large intestine	18.72	¥ 4	¥ 4	8.40 7.00	6.37	4.0	¥ 4 Z Z	ζ Δ Ζ Ζ	26.64	37.30	060
44605		(∢	Sature, raige intestine	21.96	V	ζ <u> </u>	7.86	8.27	2.51	(4 2 Z	Z Z	32.33	32.74	060
		< <	Intestinal stricturoplasty	18.04	Y Z	A A	6.54	6.65	2.06	Ϋ́	N A	26.64	26.75	060
44620		⋖ -	Repair bowel opening	14.31	Y Z	N A	5.48	5.38	1.51	Y Z	N A	21.30	21.20	060
44625		∢ •	Repair bowel opening	17.16	Υ ?	A S	6.14	6.28	1.85	Υ S	Υ ·	25.15	25.29	060
44626		< <	Repair bowel opening	27.78	₹ < Z Z	₹ < Z Z	90.0	9.60	3.20	₹ ₹	₹ < Z Z	39.93	40.04	060
44650		(∢	Repair bowel-skill listula	25.00	ζ	ζ	8.27	8.75	2.92	(Z Z	36.19	36.67	060
44660		<	Repair bowel-bladder fistula	23.79	A V	N A	9.84	8.73	2.13	Ϋ́Z	A	35.76	34.65	060
44661		⋖	Repair bowel-bladder fistula	27.23	AN	N	9.45	9.54	2.80	NA	NA	39.45	39.57	060
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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

	ADDENDOM B.—AELAIIVE	ב ב	VALUE (IN OS)	AND DECATED INFORMATION OSED IN					י ההסוטחויו מיוויוויים וחס			1004		ב
CPT 1 HCPCS 2	Mod	Status	Description	Physician work RVUs ³	Fully implemented non-facility PE	Year 2007 transi- tronal non-facil- ity PE RVUs	Fully implemented facility	Year 2007 transi- tional fa- cility PE RVUs	Mal-prac- tice RVUs	Fully implemented non-facility total	Year 2007 transi- tional non-facil- ity total	Fully implemented facility	Year 2007 transi- tional fa- cility total	Global
44680		۷ ۷	Surgical revision, intestine	17.84	Z Z	ZZ	6.56	6.49	1.99	Z Z	ZZ	26.39	26.32	060
44701		∢ •	Intraop colon lavage add-on	3.10	A S	Y S	0.76	0.99	0.37	A S	Z Z	4.23	4.46	ZZZ
44721		∢ ∢	Prep donor intestine/venous	2.00	Z Z	Y Y	3 1	5.59 46.5	0.37	Y Y	Y Y	6.59 9.74	10.26	ž×
		< <	Excision of bowel pouch	11.87	Υ Z	A A	5.51	5.43	1.47	A A	A A	18.85	18.77	060
44820		∢ •	Excision of mesentery lesion	13.59	Y S	Z Z	5.59	5.52	1.59	¥ :	Z Z	20.77	20.70	060
44850		∢ ⊲	Repair of mesentery	11.99	Z Z	4 4 Z Z	4.99 0.7	5.01	93.33	A A	A Z	18.37	18.39	060
		< ∢	Drain app abscess, percut	3.37	20.70	26.15	1.16	1.12	0.22	24.29	29.74	4.75	4.71	000
44950		∢ ⊲	Appendectomy	10.48	Y Z	Z Z	4.04	4.25	1.31	A Z	Y Z	15.83	16.04	090
44960		(∢	Appendectomy	14.33	Z Z	ZZ	5.39	5.36	1.63	Z Z	Z Z	21.35	21.32	060
44970		⋖	Laparoscopy, appendectomy	9.31	Y V	AN.	4.19	4.12	1.14	AN AN	AN.	14.64	14.57	060
45000		∢ <	Drainage of pelvic abscess	6.16	N S	A S	3.59	3.13	0.52	NA S	AN a	10.27	9.81	090
45020		(∢	Drainage of rectal abscess	8.37	0 Z	Y AN	4.58	3.61	0.55	NA AN	NA NA	13.50	12.53	060
		4	Biopsy of rectum	3.92	Ϋ́Z	A N	2.83	2.49	0.44	A N	AN	7.19	6.85	060
45108		∢ •	Removal of anorectal lesion	5.00	₹ ż	Y S	3.06	2.85	0.59	Y S	Y S	8.65	8.44	060
45110		∢ <	Removal of rectum	30.49	¥ 4	Z Z	11.83	12.28	3.35	A Z	A Z	45.67	46.12	060
45112		(∢	Removal of rectum	32.99	Z Z	Z Z	10.24	11.40	3.42	Z Z	Z Z	46.65	47.81	060
45113		⋖	Partial proctectomy	33.03	A Z	A A	11.44	12.33	3.48	A A	A A	47.95	48.84	060
45114		∢ <	Partial removal of rectum	30.57	Y Z	Z Z	10.29	10.75	3.35	₹ Z	₹ Z	44.21	44.67	060
		۲ ∢	Remove rectum w/reservoir	33.29	(4 2 Z	X A	11.56	12.26	3.35	ζ	ζ	48.20	48.90	060
45120		< <	Removal of rectum	26.15	Z Z	Z V	9.31	9.94	2.89	Z Z	Z V	38.35	38.98	060
45121		∢ <	Removal of rectum and colon	28.83	Υ S	Z Z	10.19	10.90	3.24	Y S	¥ ž	42.26	42.97	060
45123		∢ ∢	Parial proctectomy	18.64	Z Z	Y Y	6.99	18.73	28.7	¥ ¥ Z Z	¥ ¥	70.25	27.39	060
		< <	Excision of rectal prolapse	18.31	Z Z	A A	6.65	6.75	1.79	A A	A A	26.75	26.85	060
45135		∢ <	Excision of rectal prolapse	22.07	Y S	Z Z	9.27	8.64	2.35	Y S	Z Z	33.69	33.06	060
45150		< <	Excision of rectal stricture	5.72	(4 2 Z	X A	3.39	3.08	0.61	ζ	X A	9.72	14.6	060
45160		< <	Excision of rectal lesion	16.11	A A	N A	6.53	6.63	1.67	A A	N A	24.31	24.41	060
45170		∢ <	Excision of rectal lesion	12.42	Υ S	Y Z	5.35	5.28	1.35	Y S	Y S	19.12	19.05	060
45190		∢ ⊲	Proctosiomoidoscopy dx	0.23	Α C	1 65	4.94 3.5	0.30	. I.3	NA 2 42	NA 70.0	05.90	0.07	060
		< <	Proctosigmoidoscopy dilate	0.44	19.69	18.97	0.38	0.34	0.05	20.18	19.46	0.87	0.83	000
45305		∢.	Proctosigmoidoscopy w/bx	1.01	3.31	2.81	0.53	0.51	0.11	4.43	3.93	1.65	1.63	000
45307		∢ ⊲	Proctosigmoidoscopy tb	0.94	3.50	3.16	0.50	0.49	0.11	4.55	4.21 3.25	1.55	1.54	000
45309		< <	Proctosigmoidoscopy removal	2.01	3.74	3.05	0.83	0.84	0.22	5.97	5.28	3.06	3.07	000
45315		∢.	Proctosigmoidoscopy removal	1.40	3.75	3.09	0.65	0.64	0.15	5.30	4.64	2.20	2.19	000
45317		∢ <	Proctosigmoidoscopy bleed	1.50	3.85	2.79	0.66	0.66	0.15	5.50	4.44	2.31	2.31	000
45321		(∢	Proctosiamoidoscopy volvul	1.15	Q Z	N AN	0.66	0.59	0.13	N N	00.5 AN	1.96	1.89	800
		. ∢	Proctosigmoidoscopy w/stent	1.65	N A	Z	0.86	0.73	0.16	A A	A A	2.67	2.54	000
45330		۷,	Diagnostic sigmoidoscopy	0.96	2.54	2.35	0.63	0.53	0.08	3.58	3.39	1.67	1.57	000
45331		∢ ⊲	Sigmoidoscopy and blopsy	1.15	3.34 7.7	3.15	1.87	0.65	0.09	4.58	4.39 7.1	2.05		96
45333			Sigmoidoscopy & polypectomy	1.79	5.76	5.10	9:1-	0.85	0.15	7.70	7.04	2.95	2.79	88
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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

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CPT ¹ HCPCS ²	Mod	Status	Description	Physician work RVUs ³	Fully implemented non-facility PE	Year 2007 transi- tional non-facil- ity PE RVUs	Fully implemented facility	Year 2007 transi- tional fa- cility PE RVUs	Mal-prac- tice RVUs	Fully implemented non-facility total	Year 2007 transi- tional non-facil- ity total	Fully implemented facility	Year 2007 transi- tional fa- cility total	Global
45334		∢ •	Sigmoidoscopy for bleeding	2.73	N I	A S	1.58	1.25	0.20	N S	N N	4.51	4.18	000
45335		∢ ⊲	Sigmoidoscopy W/submuc Inj	1.46 2.36	5.47 NA	3.78 NA	0.93	1.07	1.0	7.04 AN	5.35 NA	3.50	2.32	000
45338			Sigmoidoscopy w/tumr remove	2.34	6.02	5.43	. t.	1.08	0.19	8.55	7.96	3.84	3.61	000
			Sigmoidoscopy w/ablate tumr	3.14	5.92	4.08	1.73	1.39	0.26	9.32	7.48	5.13	4.79	000
45340			Sig w/balloon dilation	1.89	10.51	7.27	1.07	0.89	0.15	12.55	9.31	3.11	2.93	000
45341			Sigmoidoscopy w/ultrasound	2.60	Υ S	A S	1.51	1.18	0.19	A S	Y S	4.30	3.97	000
•			Sigmoidoscopy w/stent	5. C	Z Z	Z Z	1.60	1.72	0.50	Z Z	Z Z	0.00	6.07	
45355			Surgical colonoscopy	3.51	Z Z	Z Z	1.59	1.43	0.36	Z Z	Z Z	5.46	5.30	800
45378			Diagnostic colonoscopy	3.69	6.55	6.26	1.88	1.57	0.30	10.54	10.25	2.87	5.56	000
45378	53	∢ <	Diagnostic sigmoidoscopy	0.96	2.54	2.35	0.63	0.53	0.08	3.58	3.39	1.67	1.57	000
45379		۷ ۵	Colonoscopy w/Ib removal	4.68 4.43	8.37 7.96	7.85	2.28	- t-	0.35	13.44	12.92	25.7	0.7	000
45381		< <	Colonoscopy, submucous ini	4.19	7.94	7.33	2.24	1.80	0:30	12.43	11.82	6.73	6.29	000
45382		⋖	Colonoscopy/control bleeding	5.68	10.67	10.15	3.00	2.39	0.41	16.76	16.24	60.6	8.48	000
45383		∢ .	Lesion removal colonoscopy	5.86	8.78	8.15	2.73	2.36	0.48	15.12	14.49	9.07	8.70	000
45384		∢ <	Lesion remove colonoscopy	4.69	7.40	6.97	2.27	1.94	0.38	12.47	12.04	7.34	7.01	000
•		< ⊲	Colonoscopy dilate stricture	5.30 4.57	8.59 12.65	12.49	7.07 2.07	1 91	24.0	14.31	17.45	7.23	78.7	86
45387		< ∢	Colonoscopy w/stent	5.90	NA V	AN AN	3.01	2.51	0.48	Z Z	Y A	9.39	8.89	000
		⋖	Colonoscopy w/endoscope us	5.09	Ϋ́	Ϋ́Z	2.66	2.15	0.42	Ϋ́	A N	8.17	7.66	000
45392		⋖	Colonoscopy w/endoscopic fnb	6.54	N A	A	3.23	2.68	0.45	A	N	10.19	9.64	000
45395		⋖・	Lap, removal of rectum	32.71	Y S	¥:	12.90	13.51	3.62	ΨZ:	Y :	49.23	49.84	060
45397		∢ ⊲	Lap, remove rectum W/pouch	36.21 19.25	Z Z	Z Z	13.43	14.08	3.60	A A	A A	28.30	28.52	060
45402		< ∢	Lap proctobexy w/sig resect	26.32	Z Z	Z Z	8.74	69.6	2.81	Z Z	Z Z	37.87	38.82	060
45500		⋖	Repair of rectum	7.58	A N	A A	3.79	3.60	0.75	A	N A	12.12	11.93	060
45505		∢ •	Repair of rectum	8.14	A S	A S	4.52	4.03	0.86	AN O	A S	13.52	13.03	060
45520		∢ ⊲	Correct rectal prolapse	17.98	3.08 NA	2.00 NA	0.41	0.38	1 0.05	3.08 NA	Z.60 NA	1.01 25.55	0.98 96.96	000
45541		< <	Correct rectal prolapse	14.66	ZZ	¥ Z	5.96	5.96	1.55	₹ Z	ΥZ	22.17	22.17	060
		⋖		24.61	N A	A	8.34	9.05	2.61	A	N A	35.56	36.24	060
45560		∢ <	Repair of rectocele	11.38	Υ Υ	Z Z	4.95	5.03	1.13	Y Z	Y S	17.46	17.54	060
45563		(∢	Exploration/repair of rectum	26.14	ζ	X X	10.28	10.48	3.10	Z Z	ζ ζ Z Z	39.52	39.72	060
		< <	Repair rect/bladder fistula	20.12	Y Z	A A	8.67	7.75	1.85	Z A	Z A	30.64	29.72	060
45805		∢ ·	Repair fistula w/colostomy	23.13	Y Z	¥:	8.51	9.28	2.02	Y :	Z :	33.66	34.43	060
45820		∢ <	Repair rectourethral fistula	20.18	Z Z	Υ Z	8.82	7.94	1.58	Z Z	Y Z	30.58	29.70	060
45900		(∢	Reduction of rectal prolapse	2.93	ζ	Z Z	1.68	1.55	0:30	Z Z	Z Z	4.92	4.79	010
		< <	Dilation of anal sphincter	2.30	Y Z	Ϋ́	1.65	1.49	0.27	N A	N A	4.22	4.06	010
45910		⋖ ·	Dilation of rectal narrowing	2.80	Y N	A S	1.81	1.70	0.30	NA	N N	4.91	4.80	010
45915		∢ <	Remove rectal obstruction	3.14	4.26 NA	L8.3	20.2	2.09	0.30	0/:/	6/./	5.48	5.53	010
45390		< <	Surg ux exam, anorecial	2.90	3.27	2.57	2.35	1.98	0.31	6.48	5.78	5.56	5.19	010
		⋖	Removal of rectal marker	1.23	1.89	1.49	0.81	0.74	0.14	3.26	2.86	2.18	2.11	010
46040		⋖ •	Incision of rectal abscess	5.20	6.71	5.81	4.14	3.73	0.62	12.53	11.63	96.6	9.55	060
46045		< ⊲	Incision of anal absences	5.75 1 19	ν σ σ	0 71	3.83	5.13	45.0	A 50	4 Z Z	0.12	9.42	090
46060		< <	Incision of rectal abscess	6.18	2 X	Y A	3.82	3.39	0.67	N A	Į V	10.67	10.24	060
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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

ADL	JEINDOIN	ADDENDOM B.—-RELATIVE	VALUE UNITS (AVUS) A	חבואובט	ND DELATED INFORMATION OSED IN				MEDICA	DELERIMINA MEDICARE L'ATMENTS	בט מואו	1007		ב
CPT 1 HCPCS 2	Mod	Status	Description	Physician work RVUs ³	Fully implemented non- facility PE RVUs	Year 2007 transi- tional non-facil- ity PE RVUs	Fully implemented facility	Year 2007 transi- tional fa- cility PE RVUs	Mal-prac- tice RVUs	Fully im- plement- ed non- facility total	Year 2007 transi- tional non-facil- ity total	Fully implemented facility	Year 2007 transi- tional fa- cility total	Global
46070		44	Incision of anal septum	2.71	NA 3.07	NA 2.55	1.86	1.85	0.36	NA 5.86	NA 5.34	4.93	4.92	090
46083		< <	Incise external hemorrhoid	1.40	2.34	2.48	0.94	0.93	0.15	3.89	4.03	2.49	2.48	010
46200	•		Removal of anal fissure	3.41	6.30 5.96	7.47	3.72	2.08	0.39	01.01	8.27	7.52 6.34	6.88	060
46211			Removal of anal crypts	4.24	7.18	5.86	4.12	3.66	0.48	11.90	10.58	8.84	8.38	060
46220			Removal of anal tag	1.56	3.00	2.48	1.09	0.99	0.17	4.73	4.21	2.82	2.72	010
46230			Ligation of hemormoid(s)	2.57	3.74	3.19	1.32		0.30	6.37	5.44	4.32	4.33	010
			Hemorrhoidectomy	4.13	5.99	5.49	2.84	2.68	0.48	10.60	10.10	7.45	7.29	060
46255			Hemorrhoidectomy Remove hemorrhoids & fissure	4.84 5.64	6.41 NA	5.99 NA	3.10	2.91	0.58	11.83 NA	11.41 NA	8.52	8.33 2.55	060
		. ⋖	Remove hemorrhoids & fistula	6.22	Z Z	Z	3.85	3.42	0.68	Z Z	Z	10.75	10.32	060
46260			Hemorrhoidectomy	6.61	Y ?	Y S	3.46	3.26	0.76	Υ ?	¥ ž	10.83	10.63	060
46261			Remove hemorrhoids & fisture	7.57	A A	Y Y	4.17	3.75	0.79	K K	A A	12.53	12.11	060
			Removal of anal fistula	4.75	5.94	5.24	3.53	3.01	0.46	11.15	10.45	8.74	8.22	060
46275			Removal of anal fistula	5.25	6.28	5.05	3.63	3.14	0.52	12.05	10.82	9.40	8.91	060
46280			Removal of anal fistula	6.22 7.22	NA NA	NA A A	3.79	3.39	0.66	11 76	A C	10.67	10.27	060
46288			Repair anal fistula	7.62	S Z	P A	4.09	3.78	0.79	Z Z	Y A	12.50	12.19	060
•			Removal of hemorrhoid clot	1.61	2.41	2.20	0.88	0.86	0.18	4.20	3.99	2.67	2.65	010
46500			Injection into hemorrhoid(s)	1.61	3.61	2.49	1.24	1.17	0.16	5.38	4.26	3.01	2.94	010
46505			Chemodenervation anal musc	3.11	3.28	154	0.37	2.05	0.05	6.53	6.30	0.54	08.0	000
	_		Anoscopy and dilation	1.31	12.66	10.03	0.58	0.61	0.12	14.09	11.46	2.01	2.04	000
46606			Anoscopy and biopsy	0.81	4.01	3.85	0.47	0.44	0.09	4.91	4.75	1.37	46.1	000
46608			Anoscopy, remove for body	1.51	4.04	4.32	0.61	0.64	0.16	5.71	5.99	2.28	2.31	000
			Anoscopy	1.8.1	2.88	3.23	0.72	0.77	0.19	4.88	5.23	2.72	2.77	000
46612			Anoscopy, remove lesions	2.34	5.54	5.29	0.95	0.97	0.28	8.16	7.91	3.57	3.59	000
46615			Anoscopy, control bleeding	2.01	2.79 2.49	2.45	0.83	4 .0. 4 .04	0.20	5.43	5.48	3.04	3.05	86
			Repair of anal stricture	9.62	Y Z	Z A	4.55	4.30	0.94	S N	S N	15.11	14.86	060
46705			Repair of anal stricture	7.25	Y Z	Y S	3.55	3.66	0.91	Z Z	¥:	11.71	11.82	060
46706			Repr of anal fistula W/glue	16.95	Y Y	4 4 2 2	7.70	7.75	0.28	4 4 2 2	A A	76.03	26.08	060
			Repr per/vag pouch dbl proc	36.26	Z Z	¥ X	13.98	14.81	3.66	A A	A A	53.90	54.73	060
			Rep perf anoper fistu	7.49	₹ Z	Y S	3.24	3.50	0.92	Y Z	Z Z	11.65	11.91	060
46730			nep per anoper/vestib listu	30.05	¥ ¥	Z Z	10.92	11.77	2.46	Z Z	¥ ¥	43.43	44.28	060
			Construction of absent anus	35.54	Y V	A A	12.73	13.37	3.20	Y Y	¥ V	51.47	52.11	060
46740		_	Construction of absent anus	33.30	Y ?	¥:	13.86	13.41	2.41	Y S	¥:	49.57	49.12	060
46742			Repair of closes and anus	39.54	Z Z	Z Z	15.36	16.91	3.19	A Z	A Z	58.09	59.64	060
46746			Repair of cloacal anomaly	64.79	Z Z	Z Z	18.82	23.61	7.68	Z Z	Z Z	91.29	96.08	060
			Repair of cloacal anomaly	70.77	Y V	A A	20.16	22.82	3.36	NA	A A	94.29	96.95	060
46750			Repair of anal sphincter	11.96	Υ S	Y S	5.19	5.09	1.10	Z Z	¥ ž	18.25	18.15	060
46/5146753			Reconstruction of anus	8.12	K K	4 4 2 2	9.9 10.1	0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.0	0.0 9.00 9.00	Y Y	Z Z	13.72	13.60	060
46754			Removal of suture from anus	2.82	3.70	3.63	2.25	1.82	0.19	6.71	6.64	5.26	4.83	010
46760			Repair of anal sphincter	17.11	 VA	N A	79.7	7.24	1.59	NA	N A	26.37	25.94	060
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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

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CPT 1 HCPCS 2	Mod	Status	Description	Physician work RVUs ³	Fully implemented non-facility PE	Year 2007 transi- tional non-facil- ity PE RVUs	Fully implemented facility	Year 2007 transi- tional fa- cility PE RVUs	Mal-prac- tice RVUs	Fully im- plement- ed non- facility total	Year 2007 transi- tional non-facil- ity total	Fully implemented facility	Year 2007 transi- tional fa- cility total	Global
46761		∢	Repair of anal sphincter	15.10	AN	A	5.83	5.97	1.43	NA	AN	22.36	22.50	060
46762		⋖ <	Implant artificial sphincter	14.58	A C	A C	6.23	5.71	1.24	N N	NA S	22.05	21.53	090
46900		∢ <	Destruction, anal lesion(s)		3.62	2.85	92.1	87. 6	7.0	5.70	2.4.0 2.0	3.3/	3.36	010
46910		< <	Destruction, anal lesion(s)	8. 4	3.88	. v.	- t	90.1	0.0	5.63	5.20	3.24	4.6	010
46917		< ∢	Laser surgery, anal lesions	9. 6	0.73	9.00	8.8	54.		10.78	11.11	3.52	3.40	010
46922		< <	Excision of anal lesion(s)	1.86	4.13	3.49	1.19	1.10	0.22	6.21	5.57	3.27	3.18	010
		. ∢	Destruction, anal lesion(s)	2.76	9.62	8.94	1.52	1.39	0.26	12.64	11.96	4.54	4.41	010
46934		⋖	Destruction of hemorrhoids	3.75	5.42	2.17	2.80	2.92	0.32	9.49	9.24	6.87	66.9	060
46935		∢.	Destruction of hemorrhoids	2.43	3.68	3.52	1.07	1.18	0.23	6.34	6.18	3.73	3.84	010
46936		∢ <	Destruction of hemorrhoids	3.68	6.25	5.22	2.64	2.54	45.0	10.27	9.24	99.9	6.56	090
•		∢ ⊲	Cryotherapy of rectal lesion	2 4 65 7	4.06	3.10 4.45	3 63	75 02.E	0. O	11.04	0.0 0.0 0.0 0.0	6. 8 6. 8 6. 8 6. 8	4.20 8.43	000
46940		< ∢	Treatment of anal fissure	2.32	2.84	2.21	1.03	1.08	0.23	5.39	4.76	3.58	3.63	010
46942		⋖	Treatment of anal fissure	2.04	2.81	2.08	0.95	1.00	0.19	5.04	4.31	3.18	3.23	010
46945		∢	Ligation of hemorrhoids	2.09	4.86	3.67	3.01	2.61	0.19	7.14	5.95	5.29	4.89	060
46946		∢ .	Ligation of hemorrhoids	2.58	4.70	3.97	2.69	2.47	0.27	7.55	6.82	5.54	5.32	060
46947		∢ •	Hemorrhoidopexy by stapling	5.45	AN 0	AN,	3.09	2.81	0.75	A N	A S	9.29	9.01	060
47000		∢ <	Needle biopsy of liver	96.	8.03	4.32	0.69	0.65	0.12	10.05	6.34	2.71	2.67	000
47010		۷ ۵	Open drainage liver lesion	 5	₹ 4 2 Z	ξ	9.0 6.0 0.0	0.0	0.73	Z Z	Z Z	29.3	20.70	777
47011		< ∢	Percut drain. liver lesion	3.69	Z Z	Z	1.30	1.23	0.22	Z Z	Z Z	5.21	5.14	000
_		⋖	Inject/aspirate liver cyst	18.31	Ϋ́	Ϋ́	7.77	7.57	1.83	Ψ Z	A N	27.91	27.71	060
47100		⋖	Wedge biopsy of liver	12.72	Y Z	Ϋ́	6.19	60.9	1.53	A A	N	20.44	20.34	060
47120		∢ •	Partial removal of liver	38.74	Z Z	Υ Υ	13.87	14.85	4.65	Υ ·	Z Z	57.26	58.24	060
47122		∢ ⊲	Extensive removal of liver	59.29	₹ 4 Z Z	4 4 2 2	18.54	20.76	6.19	A Z	A N	85.02 76.13	78 18	060
47130		< ∢	Partial removal of liver	57.00	Z Z	(4 2 Z	17.83	20.22	6.94	(4 2 Z	Z Z	81.77	84.16	060
		<u> </u>	Transplantation of liver	83.15	Ą Z	Z	27.52	30.57	9.93	A A	Y Y Y	120.6	123.7	060
47136			Transplantation of liver	70.25	Ą Z	ΥZ	23.37	26.16	8.41	A N	A V	102.0	104.8	060
47140		∢ .	Partial removal, donor liver	59.14	₹ Z	Y Z	21.53	22.13	5.17	₹ Z	Y :	85.84	86.44	060
47141		∢ •	Partial removal, donor liver	71.17	Y S	Υ S	25.24	26.55	5.17	Υ ·	Z Z	101.6	102.9	060
47142		∢ ⊲	Pren donor liver/venous	9.9	₹ 4 Z Z	¥	27.24	78.97	7.0	¥ Z	A N	0.1 L	113.3 8.75	060 X
47147		< <	Prep donor liver/arterial	20.0	 {	Z Z	1.76	2.24	0.97		ZZ	9.73	10.21	XXX
		∢	Surgery for liver lesion	17.95	Ϋ́Z	Ν	7.50	7.31	1.98	Ϋ́	NA	27.43	27.24	060
47350		∢	Repair liver wound	22.30	Y Y	ΥN	8.72	8.82	2.58	A N	N A	33.60	33.73	060
47360		∢ •	Repair liver wound	31.12	Y S	Υ S	11.32	11.53	3.37	Υ ·	Z Z	45.81	46.02	060
47367		∢ <	Repair liver wound	52.41 23.35	¥	₹ ₹	16.60	18.07	5.85	¥	Z Z	74.80	76.33	060
47370		(∢	Laparo ablate liver tumor rf	20.61	(4 2 Z	(7.64	80.80	2.55	(Z Z	30.80	31.18	060
		< <	Laparo ablate liver cryosurg	20.61	Z Z	A Z	8.10	8.15	2.60	Z Z	Z Z	31.31	31.36	060
•		∢	Open ablate liver tumor rf	24.37	Ϋ́Z	Ν	8.60	9.19	2.86	Ϋ́	NA	35.83	36.42	060
47381		∢	Open ablate liver tumor cryo	24.64	Y Y	ΥN	9.12	9.49	2.84	A N	N A	36.60	36.97	060
47382		⋖ ·	Percut ablate liver rf	15.17	Y :	Y :	6.21	6.12	0.96	Y :	Y :	22.34	22.25	010
47400		∢ •	Incision of liver duct	36.17	Y S	Υ S	13.15	13.39	3.07	Υ ·	Z Z	52.39	52.63	060
47420		∢ <		21.86	Ψ Υ	₹ ₹	8.44	8.70	2.62	Ψ « Z Z	Υ Υ	32.92	33.18	060
47460	_	< ⊲	Incision of bile duct	22. T	₹ 4 Z Z	₹ 4	9. 6 6. 0	0.74	- 000	₹	¥ 4 Z Z	31.55	31.09	060
47480		< <	Incision of gallbladder	13.06	Z Z	Υ Z	6.55	6.08	1.42	Z Z	Z Z	21.03	20.56	060
47490		< <	Incision of gallbladder	8.00	Ą Z	Z	5.29	5.51	0.43	A A	Z Z	13.72	13.94	060
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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

CPT 1 HCPCS 2	Mod	Status	Description	Physician work RVUs ³	Fully implemented non-facility PE	Year 2007 transi- tional non-facil- ity PE RVUs	Fully implemented facility	Year 2007 transi- tional fa- cility PE RVUs	Mal-prac- tice RVUs	Fully implemented non-facility total	Year 2007 transi- tional non-facil- ity total	Fully implemented facility	Year 2007 transi- tional fa- cility total	Global
47500		۷	Injection for liver x-rays	1.96	A N	N A	0.70	99.0	0.12	A A	A A	2.78	2.74	000
47505		⋖・	Injection for liver x-rays	0.76	Y :	Y :	0.27	0.26	0.04	Y :	Y :	1.07	1.06	000
47510		∢ <	Insert catheter, bile duct	7.88	Υ	¥ \$	4.69	4.94	0.46	Υ	Ψ ×	13.03	13.28	060
47525		(⊲	Change hile duct catheter	5.74	15.68	15.27	9.03	92.0	0.02	21 55	21 14	5.6	24.0 84.0	030
		< ∢	Revise/reinsert bile tube	5.90	32.21	33.46	3.52	3.67	0.37	38.48	39.73	9.79	9.94	060
		4	Bile duct endoscopy add-on	3.02	AN	A N	0.77	96.0	0.40	A N	Ϋ́	4.19	4.38	ZZZ
47552		⋖	Biliary endoscopy thru skin	6.03	A A	A A	2.52	2.42	0.45	A A	Y Y	8.97	8.87	000
47553		∢ .	Biliary endoscopy thru skin	6.34	Y :	Y :	2.25	2.12	0.37	Y :	ΨZ:	8.96	8.83	000
4/554		∢ <	Billary endoscopy thru skin	9.05	Ψ « Z 2	Y S	3.27	45.50	0.96	Y S	Y S	13.28	13.35	000
47555		∢ <	Biliary endoscopy thru skin	7.55	Υ Υ	Υ < Z	2.76	2.54	0.45	Υ < Ζ 2	¥ Ş	10.76	10.54	88
		(⊲	Laparoscopy w/cholandio	6.93	Z Z	ζ Δ Ζ Ζ	1.04	1.56	0.30	ζ 4 Ζ Ζ	ζ	6.77	90.7	8 6
		< ⊲	Laparo w/cholandio/bionsy	5 17	۷ ۲ ۲	A Z	11.	20. 1	99.0	Z Z	Δ Z	7.38	7.66	
		< ∢	Laparoscopic cholecystectomy	11.57	 {	(4 2 Z	4.87	4.96	1.46	Z Z	ζ ď Z	17.90	17.99	060
47563		< <	Laparo cholecystectomy/graph	11.98	Z Z	Y Z	5.06	5.25	1.58	Z Z	₹ Z	18.62	18.81	060
		⋖	Laparo cholecystectomy/explr	14.21	Ϋ́	AN	5.45	5.83	1.88	AN	AN	21.51	21.92	060
		⋖	Laparo cholecystoenterostomy	12.56	AN	A N	5.04	5.30	1.65	AN	Ϋ́Z	19.25	19.51	060
		⋖	Removal of gallbladder	15.44	Ϋ́Z	AN	6.12	6.14	1.79	AN	Ϋ́	23.35	23.37	060
47605		∢	Removal of gallbladder	15.86	Y V	A N	6.24	6.44	1.94	A A	A A	24.04	24.24	060
47610		⋖	Removal of gallbladder	20.80	Ϋ́	A A	7.54	7.84	2.48	A A	A A	30.82	31.12	060
47612		∢	Removal of gallbladder	21.09	A A	Y Y	7.55	7.81	2.47	Y Y	Y Y	31.11	31.37	060
47620		∢	Removal of gallbladder	22.95	Y N	Y Z	8.05	8.41	2.73	Y Z	₹ Z	33.73	34.09	060
47630		∢ .	Remove bile duct stone	9.55	Y :	Ψ.	4.86	4.88	0.65	Ψ.	ΨZ:	15.03	15.05	060
47700		∢ <	Exploration of bile ducts	16.32	Z Z	Y S	7.11	7.34	2.06	Υ S	Υ S	25.49	25.72	060
		∢ <	Bile duct revision of bile dust tumor	26.55	₹ <	Υ < 2 2	9.83	0.03	9.07	Υ < 2 2	₹ < Z Z	42.07 20 1E	15.51	060
47712		(∢	Excision of hile duct tumor	33.53	ζ 4	(4 Z Z	11.36	12.17	† 0.	ζ 4	(4 2 Z	48.81	49.62	060
		< <	Excision of bile duct cvst	21.36	Z Z	Z Z	8.40	8.43	2.48	Z Z	Z Z	32.24	32.27	060
		⋖	Fusion of bile duct cyst	19.01	A V	A N	7.73	7.81	2.14	A N	Ϋ́	28.88	28.96	060
47720		⋖	Fuse gallbladder & bowel	18.15	A A	A A	7.57	7.50	2.10	A A	A A	27.82	27.75	060
47721		⋖ ·	Fuse upper gi structures	21.80	Y :	Y :	8.44	8.54	2.52	Y :	₹ :	32.76	32.86	060
47740		∢ •	Fuse gallbladder & bowel	21.04	Z Z	Y S	8.33	8.37	2.41	Υ S	Z Z	31.78	31.82	060
47760		∢ <	Fuse gailpladder & bowel	24.02	₹ <	Υ < 2 2	9.08	9.73	2.82	Υ < 2 2	₹ < Z Z	35.92	30.09	060
47765		(∢	Fuse liver ducts & bowel	51.95	V 4	(4 2 Z	16.38	12.20	- 60 - 60 - 60 - 60 - 60 - 60 - 60 - 60	ζ	(4 2 Z	71.62	67.44	060
		∶ ∢	Fuse bile ducts and bowel	42.08	Z Z	Y X	13.80	11.87	3.49	Z Z	₹ Z	59.37	57.44	060
		⋖	Fuse bile ducts and bowel	55.95	NA	AN	17.31	14.03	4.09	AN	A N	77.35	74.07	060
47800		∢	Reconstruction of bile ducts	25.98	N A	A N	9.56	9.94	3.07	A A	A A	38.61	38.99	060
47801		∢	Placement, bile duct support	17.41	Ϋ́	Y Y	8.57	8.26	1.16	Y Y	Y Y	27.14	26.83	060
47802		∢	Fuse liver duct & intestine	24.74	Υ Z	Y Y	9.32	09.6	2.85	Y Y	Y Y	36.94	37.19	060
47900		∢ .	Suture bile duct injury	22.25	Y :	Y :	8.56	8.80	2.64	Y :	ΨZ:	33.45	33.69	060
48000		∢ •	Drainage of abdomen	31.76	Δ .	Υ S	10.94	11.38	3.47	Υ S	Z Z	46.17	46.61	060
48001		∢ <	Pracement of drain, pancreas	39.50	₹ < Z Z	Υ Υ	12.34	16.30	4.08 2.4	4 < 2 Z	₹ < Z Z	20.72	27.74	080
48020		(∢	Removal of pancreatic stone	18.90	V 4 Z Z	₹ ₹ 2 Z	7.43	7.34	2.5	ζ <u> </u>	Z Z	28.45	28.36	060
		∶ ∢	Biopsy of pancreas, open	14.34	Z	Y Z	5.79	5.65	1.62	A Z	Ϋ́Z	21.75	21.61	060
		∢	Needle biopsy, pancreas	4.67	10.07	8.50	1.91	1.94	0.28	15.02	13.45	98.9	6.89	010
48120		⋖	Removal of pancreas lesion	18.29	Ϋ́	A A	92.9	6.84	5.09	A A	A A	27.14	27.22	060
48140		4	Partial removal of pancreas	26.13	A A	AN A	9.21	9.47	3.02	N A	N A A	38.36	38.62	060
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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

						,								
CPT 1 HCPCS 2	Mod	Status	Description	Physician work RVUs ³	Fully im- plement- ed non- facility PE RVUs	Year 2007 transi- tional non-facil- ity PE RVUs	Fully implemented facility	Year 2007 transi- tional fa- cility PE RVUs	Mal-prac- tice RVUs	Fully implemented non-facility	Year 2007 transi- tional non-facil- ity total	Fully implemented facility	Year 2007 transi- tional fa- cility total	Global
48145		⋖	Partial removal of pancreas	27.20	AN	A A	9:26	9.77	3.17	A A	NA	39.93	40.14	060
48146		۷.	Pancreatectomy	30.34	ΨZ:	¥:	11.72	11.93	3.49	Y :	¥:	45.55	45.76	060
48148		< <	Removal of pancreatic duct	20.20	Y S	¥ S	7.93	7.69	2.29	Υ S	Υ S	30.42	30.18	060
48150		∢ <	Partial removal of pancreas	22.22	₹ ₹	¥	16.47	19.12	6.30	₹ < Z Z	₹ <u>₹</u>	70.72	74.97	060
•	_	-	Pancreatectomy	40.59 50.53	Z Z	ζ Δ Ζ Ζ	17.71	19 11	0/.0	ζ 4	ζ Δ Ζ Ζ	76.53	26.17	060
48154		_	Pancreatectomy	48.62	Σ Z	Z Z	16.73	17.88	5.82	(4 2 Z	ζ q Z	71.17	72.32	060
48155			$\overline{}$	29.19	A N	A A	11.82	11.72	3.26	A Z	A N	44.27	44.17	060
48180		4	Fuse pancreas and bowel	27.90	A A	AN	9.76	10.07	3.27	ΥZ	A A	40.93	41.24	060
48400		_	Injection, intraop add-on	1.95	Y Y	A	0.88	0.70	0.15	Y Y	Y Z	2.98	2.80	ZZZ
48500		∢ •	Surgery of pancreatic cyst	17.97	Ψ.	¥ :	7.95	7.49	2.05	Y S	¥:	27.94	27.48	060
48510		-	Drain papereatic pseudocyst	00.71	NA 10	2 PA	7.48	7.46	28.5	NA OF AD	NA NA	26.30	26.28	060
48520		< ∢	First pancreas cyst and howel	18.03	AN AN	2 N	6.63	69.9	2.05	AN AN	43.53 AN	26.71	26.77	060
48540		< <	Fuse pancreas cyst and bowel	21.82	Z Z	¥ X	7.59	7.99	2.60	Z Z	ΥZ	32.01	32.41	060
48545		<		22.04	ΥN	A	7.98	7.99	2.37	A N	A Z	32.39	32.40	060
48547		∢	Duodenal exclusion	30.19	AN	AN	10.16	10.42	3.41	AN	A N	43.76	44.02	060
48552		∢	Prep donor pancreas/venous	4.30	A A	A A	1.13	1.38	0.31	AN	A A	5.74	5.99	××
48554			Transpl allograft pancreas	36.77	Y Y	A	20.52	18.86	4.18	Y Y	Y Z	61.47	59.81	060
48556		-	Removal, allograft pancreas	19.16	₹ Z	Y :	9.41	8.41	2.07	₹ Z	₹ Z	30.64	29.64	060
49000		_	Exploration of abdomen	12.40	Ψ Z	¥:	5.20	5.34	1.52	Υ :	Υ :	19.12	19.26	060
49002		∢ <	Reopening of abdomen	17.51	Y S	Z Z	6.65	5.43	1.37	Y S	Υ ·	25.53	24.31	060
49010		-	Exploration benind abdomen	15.94	¥	¥	0.63	0.00	1.51	₹ < Z Z	¥ < Z	24.08	23.54	060
49021		< ∢	Drain abdominal abscess	3.37	20.65	21.00	1.19	1.13	0.20	24.22	24.57	4.76	4.70	000
49040		< <	Drain, open, abdom abscess	16.35	N A	N A	6.53	6.46	1.69	Z	Y Z	24.57	24.50	060
49041		4	Drain, percut, abdom abscess	3.99	20.90	19.90	1.41	1.34	0.24	25.13	24.13	5.64	5.57	000
49060		∢	Drain, open, retrop abscess	18.36	A A	AN	7.38	7.43	1.74	A A	A A	27.48	27.53	060
49061		< <	Drain, percut, retroper absc	3.69	20.77	19.95	1.31	1.24	0.22	24.68	23.86	5.22	5.15	000
49062		∢ ⊲	Dracture peritoneal cavity	7.08 - 35	NA 0.84	4 V	5.27	0.40	90.0	NA 107	N L	1 01	18.87	060
49081		(∢	Removal of abdominal fluid	 	3.04	2.70	0.47	44.0	60.0	4.39	4.05	. 6	92.1	
		< <	Remove abdomen foreign body	13.97	A Z	A N	5.56	5.52	1.62	Ϋ́	Ϋ́	21.15	21.11	060
49180	-		Biopsy, abdominal mass	1.73	2.57	2.98	0.61	0.58	0.10	4.40	4.81	2.44	2.41	000
49200		∢ ·	Removal of abdominal lesion	10.89	Y :	¥:	4.88	4.99	1.24	₹ Z	Y :	17.01	17.12	060
49201		∢ <	Remove abdom lesion, complex	15.60	▼	Y Z	6.39	6.88	1.87	Y Z	Y S	23.86	24.35	060
49220		-	Multiple surgery abdomen	15.64	(4 2 Z	ζ <u>Υ</u>	6.23	6.54	. . .	(4 2 Z	V 4	23.75	24.06	060
	_		Excision of umbilicus	8.88	Ϋ́	A	4.27	4.27	1.08	A N	A Z	14.23	14.23	060
49255		_	Removal of omentum	12.35	A N	A	5.61	5.62	1.43	A A	A A	19.39	19.40	060
49320		4	Diag laparo separate proc	5.34	A A	A	2.50	2.61	0.65	ΥZ	A A	8.49	8.60	010
49321			Laparoscopy, biopsy	5.39	₹ Z	Y:	2.55	2.63	0.70	₹ Z	₹ Z	8.64	8.72	010
49322			Laparoscopy, aspiration	5.94	Α S	¥ Ş	2.62	2.91	0.71	Υ S	A S	9.27	9.56	010
	_		Laparo drain lymphocele	10.09	NA RR C	0 0 S	04.70	4.55 68.6	0.20	NA RA	NA NA	0.99	15.84 7.84	060
49419		< <	Insit abdom cath for chemotx	7.01	S Z	SS.2	3.54	3.56	0.8	S Z	S N	11.36	11.38	060
			Insert abdom drain, temp	2.22	A N	A N	1.21	1.12	0.21	A N	Y X	3.64	3.55	000
49421		_	Insert abdom drain, perm	5.83	Ϋ́Z	NA	3.17	3.16	0.74	A A	NA	9.74	9.73	060
49422			Remove perm cannula/catheter	6.24	Y Y	AN	2.64	2.84	0.83	Y Y	ΥN	9.71	9.91	010
49423		4	Exchange drainage catheter	1.46	13.85	14.05	0.56	0.53	0.09	15.40	15.60	2.11	2.08	000
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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

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CPT¹ HCPCS≥	Mod	Status	Description	Physician work RVUs ³	Fully implemented non-facility PE	Year 2007 transi- tional non-facil- ity PE RVUs	Fully implemented facility	Year 2007 transi- tional fa- cility PE RVUs	Mal-prac- tice RVUs	Fully im- plement- ed non- facility total	Year 2007 transi- tional non-facil- ity total	Fully implemented facility	Year 2007 transi- tional fa- cility total	Global
49424		∢ ⊲	Assess cyst, contrast inject	0.76	3.24 NA	3.60	0.30	0.29	0.04	4.04	4.40	1.10	1.09	000
49426		(∢	Revise abdomen-venous shunt	10.28	ZZ	Z Z	4.55	4.72	1.28	Z Z	Z Z	16.11	16.28	060
49427		⋖ <	Injection, abdominal shunt	0.89	Y S	¥ ž	0.31	0.30	0.07	Y S	Y S	1.27	1.26	000
49429		∢ ∢	Elgation of shunt	6.73	₹ ₹ Ζ Ζ	X X	3.01	3,33	1.02	X X	X X	11.42	11.74	010
		< <	Rpr hern preemie reduc	12.36	A A	A A	5.39	5.14	1.40	NA	A A	19.15	18.90	060
		⋖ <	Rpr ing hern premie, blocked	15.26	Υ S	Y S	5.76	6.03	1.80	Y S	Y S	22.82	23.09	060
49495		∢ ∢	Rpr ing nernia baby, reduc Rpr ing hernia baby. blocked	9.28	4 4 2 Z	¥ ¥	4.36	96.3	1.07	Z Z	X X	14.71	9.83	060
		< <	Rpr ing hernia, init, reduce	5.72	A A	A A	3.57	3.23	0.71	NA	N A	10.00	99.6	060
49501		∢ •	Rpr ing hernia, init blocked	9.24	Υ S	¥ ž	4.24	4.22	1.12	Y S	¥ ž	14.60	14.58	060
49507		∢ ∢	Prp I/hern init educ >5 yr Prp i/hern init block >5 vr	48. / 48. 93	4 4 2 Z	X X	3.88 4.45	3.78	1.27	Z Z	₹ ₹ Z	15.65	15.66	060
		⋖	Rerepair ing hernia, reduce	9.87	A A	₹ Z	4.37	4.42	1.28	Ϋ́	₹ Z	15.52	15.57	060
49521		∢.	Rerepair ing hernia, blocked	12.32	Y :	₹ Z	4.98	5.18	1.59	₹ Z	∢ :	18.89	19.09	060
49525		∢ <	Repair ing hernia, sliding	8.81	Υ S	¥ ž	4.13	4.09	1.13	Z Z	Z Z	14.07	14.03	060
		(⊲	Depail fullipal Herria	8 87	ζ Δ Ζ Ζ	(d	4.63	4.72	1.57	(d 2 Z	(d	14 11	14.13	060
49553		< ⋖	Rpr fem hernia, init blocked	9.80	Z Z	ΥZ	4.40	4.42	1.24	Z Z	Y X	15.44	15.46	060
		⋖	Rerepair fem hernia, reduce	9.27	N A	ΥZ	4.21	4.26	1.20	Ϋ́	۷Z	14.68	14.73	060
		∢•	Rerepair fem hernia, blocked	11.50	Y Z	¥:	4.84	4.95	1.47	Y S	¥ :	17.81	17.92	060
		∢ <	Rpr ventral hern init, reduc	11.80	Z Z	∀ \$ 2	4.86	5.08	1.52	Z Z	∀ \$ 2	18.18	18.40	060
49561 49565		∢ ∢	Rpr ventral nern Init, block	15.26	4 4 Z Z	A A	5.79	0.00	8 5	Z Z	X Z	18.87	18.97	060
		< ∢	Rerepair ventri hern, block	15.41	Z Z	ΥZ	5.84	6.07	1.90	Z	ΥZ	23.15	23.38	060
49568		⋖	Hernia repair w/mesh	4.88	Y Z	A N	1.24	1.56	0.64	N N	Y Y	97.9	7.08	ZZZ
		∢ <	Rpr epigastric hern, reduce	5.93	Υ S	∀ \$ 2 2	3.33	3.21	0.75	Υ S	∀ \$ 2 2	10.01	9.89	060
495/2		∢ ∢	Rpr umbil hern, reduc < 5 vr	4.35	¥ ¥ Z Z	Z Z	3.00	2.70	0.54	Z Z	₹	7.89	7.59	060
		⋖	Rpr umbil hern, block < 5 yr	7.01	A A	₹ Z	3.60	3.50	0.88	Ϋ́	A V	11.49	11.39	060
49585		⋖・	Rpr umbil hern, reduc > 5 yr	6.47	Y S	¥ ż	3.51	3.35	0.82	Y S	¥ ż	10.80	10.64	060
4958/		∢ <	Rpr umbil hern, block > 5 yr	7.92	4 4 2 2	4 4 Z Z	3.86	3.77	0.99	∀	₹ ₹ ₹	7.2.7	12.68	060
49600		(∢	Repair umbilical lesion	11.42	Z Z	Z Z	5.18	5.30	1.32	ZZ	Z Z	17.92	18.04	060
		⋖	Repair umbilical lesion	86.79	A A	Y Y	26.31	28.01	9.36	Ϋ́	A A	122.5	124.2	060
49606		∢ <	Repair umbilical lesion	18.87	Υ S	¥ ž	6.57	7.42	2.45	Z Z	Z Z	27.89	28.74	060
49610		۲ ۵	Repair umbilical lesion	9.70	ζ	(4 2 Z	3.87	0.10	70.1	₹ 4 2 Z	4 Z	13.86	16.30	060
		< ⋖	Laparo hernia repair initial	6.26	Z Z	Z Z	3.34	3.24	0.93	Z Z	Z Z	10.53	10.43	060
49651		⋖	Laparo hernia repair recur	8.23	A A	Y Y	4.16	4.08	1.14	Ϋ́	Y V	13.53	13.45	060
49900		∢ <	Repair of abdominal wall	12.26	Υ S	∀ \$ 2	6.26	6.25	1.62	Υ S	Υ S	20.14	20.13	060
49904		۷ ۵	Omental Ilap, extra-abdom	22.06 5.06 5.4	A A	A A	11.99	14.44	2.69	Z Z	Z Z	36.74	96.19	080
50010		< <	Exploration of kidney	12.07	A Z	Z Z	7.02	5.68	0.93	Z Z	Y Y	20.02	18.68	060
		⋖	Renal abscess, open drain	17.80	Y Y	A A	8.80	8.02	1.34	N A	A A	27.94	27.16	060
50021		∢ <	Renal abscess, percut drain	3.37	22.24	21.84	1.21	1.13	0.20	25.81	25.41	4.78	4.70	000
50045		(∢	Exploration of kidney	16.61	ζ	Z Z	8.73	7.14	1.24	Z Z	₹ Z	26.58	24.99	060
		< <	Removal of kidney stone	20.74	AN	AN	11.44	8.74	1.36	NA	AN	33.54	30.84	060
50065		۷,	Incision of kidney	22.1	¥ S	¥ ż	12.04	7.58	1.59	Z S	Z Z	35.74	31.28	060
50070		∢	Incision of kidney	21.64	A Z	A Z	11.85	9.14		A A	A Z	34.93 42.84	32.22	060
		c	וופוווסעמו כו מימוסץ פיכוום	3			1.	5		.,,,		7.1	5.50)

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

				: i	:			İ			i			
CPT 1 HCPCS 2	Mod	Status	Description	Physician work RVUs ³	Fully implemented nonfacility PE	Year 2007 transi- tronal non-facil- ity PE RVUs	Fully implemented facility	Year 2007 transi- tional fa- cility PE RVUs	Mal-prac- tice RVUs	Fully implemented non-facility total	Year 2007 transi- tional non-facil- ity total	Fully implemented facility	Year 2007 transi- tional fa- cility total	Global
50080		۷ ۷	Removal of kidney stone	15.55 23.24	Z Z	Z Z	8.91 12.70	6.95	1.04	Z Z	Z Z	25.50 37.48	23.54	060
50100		⋖ <	Revise kidney blood vessels	17.24	Y Z	Y Z	7.21	7.65	2.06	Y S	Z Z	26.51	26.95	060
50125		∢ ∢	Exploration of kidney	17.61	Z Z	Z Z	10.15	7.77	1.43	¥ ¥ Z Z	₹ ₹ Z Z	29.19	26.81	060
		۷	Removal of kidney stone	18.61	AN	NA	10.41	7.99	1.22	AN	N A	30.24	27.82	060
50135		∢ <	Exploration of kidney	20.38	Y S	Y S	7.7	8.62	1.33	Y S	Z Z	32.82	30.33	060
50205		∢ ∢	Biopsy of kidney	12.15	Z Z	Z Z	5.62	5.17	1.30	¥ ¥ Z Z	₹ ₹ 2 Z	19.07	18.62	060
		< -	Remove kidney, open	18.47	Y.	Y Z	9.89	7.91	1.35	Y S	Y :	29.71	27.73	060
50225		∢	Removal kidney open, complex	21.67	A Z	A N	11.46	8.99	1.50	A Z	A Z	34.63	32.16	060
50234		< <	Removal of kidney & ureter	23.84	ZZ	Z Z	12.56	9.78	1.59	ZZ	Z Z	37.99	35.21	060
		∢	Removal of kidney & ureter	26.66	ΑN	NA	14.52	11.33	1.76	Y Y	AN.	42.94	39.75	060
50240		∢	Partial removal of kidney	23.93	Y Z	Y Z	13.15	10.06	1.55	Y Z	A Z	38.63	35.54	060
50280		< <	Removal of kidney lesion	16.88	Z Z	Z Z	9.60	7.43	1.19	Z Z	Z Z	27.67	25.50	060
		4	Removal of kidney lesion	15.94	Y Y	NA	8.37	6.95	1.41	A N	AN	25.72	24.30	060
50320		∢ <	Remove kidney, living donor	22.18	Y S	Y S	12.63	11.17	2.35	₹ Z	Y S	37.16	35.70	060
50327		∢ ∢	Prep renal graft/venous	00.4	4 4 2 2	A A	90.1	5. 1	0.29	4 Z	4 4 2 2	5.38	2.58	ž ž
50329		< ∢	Prep renal graft/ureteral	3.34	Z Z	Z Z	0.99	1.0	0.25	Z Z	Z Z	4.58	4.69	××
50340		⋖	Removal of kidney	13.78	AN	Ϋ́	7.64	6.79	1.65	AN	A N	23.07	22.22	060
50360		∢ <	Transplantation of kidney	40.27	Y S	Y S	18.85	16.35	3.81	Y S	Z Z	62.93	60.43	060
		₹ 4	Remove transplanted kidney	18.60	ζ	Z Z	00.00	25.02	7.4.7	ζ	Z Z	29.29	27.97	060
50380		< <	Reimplantation of kidney	29.47	N N	Z Z	16.48	13.16	2.50	N N	Z V	48.45	45.13	060
50382		∢ •	Change ureter stent, percut	5.50	27.61	34.07	2.04	1.91	0.34	33.45	39.91	7.88	7.75	000
50384		∢ ∢	Remove ureter stent, percut	0.00	13.31	33.10	0.80	0.69	0.31	31.75	38.41	/ L. /	7.06 1.85	000
50389		< <	Remove renal tube w/fluoro	1.10	7.05	11.35	0.40	0.38	0.07	8.22	12.52	1.57	1.55	000
50390		∢ •	Drainage of kidney lesion	1.96	A !	¥!	0.70	99.0	0.12	A N	NA	2.78	2.74	000
50392		∢ ∢	Instit ix agnit into mai tub	3.37	CC. AN	S. A	1.53	1.52	0.20	3.03 AN	0.5 NA	5.32	5.09	000
		۷	Insert ureteral tube	4.15	ΥN	NA	1.81	1.80	0.25	AN	N A	6.21	6.20	000
50394		∢ <	Injection for kidney x-ray	0.76	1.97	2.51	0.60	0.65	0.05	2.78	3.32	1.41	1.46	000
50396		< <	Measure kidney pressure	2.09	Z Z	ZZ	1.10	1.09	0.13	ZZZ	Z Z	3.32	3.31	800
50398		۷.	Change kidney tube	1.46	12.52	15.40	0.57	0.53	0.09	14.07	16.95	2.12	2.08	000
50405		∢ ∢	Revision of kidney/ureter	25.06	Y Z	Z Z	13.53	10.17	1.38	A Z	¥ Z	33.89	37.22	060
		< <	Repair of kidney wound	21.01	ZZ	ZZZ	9.37	8.64	2.01	Z Z	Z Z	32.39	31.66	060
50520		Α.	Close kidney-skin fistula	18.67	Y :	N :	9.59	7.98	1.49	Y :	YZ:	29.75	28.14	060
50525		∢ <	Repair renal-abdomen fistula	24.13	Y Z	Y Z	11.13	9.55	1.83	Y Z	Y Z	37.09	35.51	060
50540		(∢	Revision of horseshoe kidney	20.02	ζ	Z Z	11.09	14.6	36.1	ζ	ζ	33.34	31.78	060
		∶∢	Laparo ablate renal cyst	16.72	Ą Z	N A	9.08	7.15	1.13	Z Z	A A	26.93	25.00	060
50542		۷.	Laparo ablate renal mass	21.12	Ϋ́ Ξ	Z :	11.61	9.05	1.39	A S	Y :	34.12	31.53	060
50543		∢	Laparo partial nephrectomy	27.10	A Z	A N	14.62	11.32	1.80	A Z	¥ Z	43.52 36.68	40.22 34.18	060
50545		< <	Laparo radical nephrectomy	24.89	Z Z	Z Z	12.72	10.09	1.70	Z Z	Z Z	39.31	36.68	060
50546		∢	Laparoscopic nephrectomy	21.63	A N	AN	11.70	9.21	1.57	N	NA	34.90	32.41	060

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

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CPT 1 HCPCS 2	Mod	Status	Description	Physician work RVUs ³	Fully implemented non-facility PE	Year 2007 transi- tronal non-facil- ity PE RVUs	Fully implemented facility	Year 2007 transi- tional fa- cility PE RVUs	Mal-prac- tice RVUs	Fully implemented nonfacility	Year 2007 transi- tional non-facil- ity total	Fully im- plement- ed facility total	Year 2007 transi- tional fa- cility total	Global
50547		۷ ۷	Laparo removal donor kidney	26.20	4 4 Z Z	ZZ	12.68	11.52	2.76	4 4 Z Z	₹ ₹ Z Z	41.64	40.48	060
		< √	Kidney endoscopy	5.59	4.73	4.30	2.74	2.17	0.40	10.72	10.29	8.73	8.16	000
50553		∢ <	Kidney endoscopy	5.98	4.65	4.44	2.70	2.31	0.39	11.02	10.81	9.07	8.68	000
50557		(∢	Kidnev endoscopy & treatment	6.61	5.42	4.80	3.16	2.52	0.47	12.50	11.88	10.10	09.6	8 8
		< <	Kidney endoscopy & treatment	7.58	5.99	5.32	3.56	2.88	0.54	14.11	13.44	11.68	11.00	000
50562		∢ <	Renal scope w/tumor resect	10.90	¥ Z	Y S	5.59	4.64	0.73	Y S	Y S	17.22	16.27	060
50572		< <	Nidney endoscopy	10.33	₹ ₹ Z Z	Z Z	4.41	3.52	0.85	¥ ¥ Z Z	ξ Z Z	15.93	15.00	88
		⋖		11.00	A N	Y V	5.03	4.07	0.77	A N	N A	16.80	15.84	000
50575		∢ <	Kidney endoscopy	13.96	₹ S	Y S	6.25	5.04	0.99	¥ S	Z Z	21.20	19.99	000
50580		(∢	Kidney endoscopy & treatment	11.84	ζ	ξ	5.34	10.4	0.83	Z Z	Z Z	18.01	16.98	800
		< <	Fragmenting of kidney stone	9.58	17.79	13.77	6.49	4.71	0.65	28.02	24.00	16.72	14.94	060
50592		∢ <	Perc rf ablate renal tumor	6.75	79.58	132.0	2.99	2.99	0.43	86.76	139.2	10.17	10.17	010
50605		< ⋖	Exploration of dreter	16.60	ζ	ξ	0.70	7.10	2 45	ξ Z Z	Z Z	26.20	25.32	060
		< ⋖	Removal of ureter stone	17.06	Z Z	Y Y	9.30	7.56	1.43	N N	Z Z	27.79	26.05	060
		∢ ·	Removal of ureter stone	16.24	Y :	Y :	9.22	7.07	1.07	¥ :	Y S	26.53	24.38	060
50630		∢ <	Removal of ureter stone	16.02	Z Z	Z Z	8.49	%. %	1.09	¥ Z	A N	25.60 30.28	23.95	060
5060		(∢	Removal of ureter	20.81	ζ ζ Ζ	∑	11.16	8.77	27.1	ζ	¥ Z	33.35	30.96	060
		∶∢	Injection for ureter x-ray	0.76	4.25	4.80	99.0	0.52	0.05	5.06	5.61	1.47	1.33	000
50686		⋖・	Measure ureter pressure	1.51	2.04	3.10	0.70	0.79	0.11	3.66	4.72	2.32	2.41	000
50690		∢ ∢	Change of urefer tube/stent	7.1	1.50	1.75	0.76	1.04	0.07	NA 2.73	NA 2.98	7 7 7	2.28	000
		۲ ح	Revision of ureter	16.48	Z Z	A N	8.79	7.55	1.27	Y Z	4Z	26.54	25.30	060
50715		∢•	Release of ureter	20.43	Y Z	Z :	8.61	8.72	2.13	¥ Z	Y Z	31.17	31.28	060
50722		∢ ⊲	Release of ureter	17.74	Z Z	4	8.01 78.0	78.7	96	A Z	Z Z	31.38	16.72	060
50727		< <	Revise ureter	8.17	Z Z	Z	5.91	4.69	0.61	A Z	Υ Z	14.69	13.47	060
		⋖ ·	Revise ureter	12.00	Y Z	Y :	7.35	6.02	1.00	¥ :	Y S	20.35	19.02	060
50740		∢ ⊲	Fusion of ureter & kidney	19.86	¥ Z Z	Ψ Δ Z Z	9.13 9.8	8.10 5.70	1.98 8.88	Ψ Z	Z Z	30.95	29.92	060
50760		< <	Fusion of ureters	19.86	Z Z	Z Z	10.02	8.27	1.55	Z Z	Z Z	31.43	29.68	060
50770		∢ ·	Splicing of ureters	21.01	Y Z	Y :	10.99	8.74	1.45	Y :	Y S	33.45	31.20	060
50780		∢ <	Reimplant ureter in bladder	19.74	ς ς Z Z	Y S	10.38	8.30	1.51	Υ < Ζ Ζ	₹ Ş	31.63	29.55	060
50783		(∢	Reimplant ureter in bladder	20.52	X	ξ	10.24	8.73	- 86	ζ	ξ	32.74	31.23	060
		⋖	Reimplant ureter in bladder	22.02	Y V	A A	11.48	9.10	1.45	Ϋ́	Υ Z	34.95	32.57	060
50800		∢.	Implant ureter in bowel	16.15	Y Z	Y :	9.59	7.26	1.19	¥ :	Y :	26.93	24.60	060
50810		∢ ⊲	Fusion of ureter & bowel	22.28	Z Z	∀	9.60	9.23	2.31	¥ Z	Z Z	34.19	33.82	060
50820		< ∢	Construct bowel bladder	23.81	Z Z	Z Z	12.30	9.57	1.89	Z Z	ξ Z	38.00	35.27	060
		⋖ ·	Construct bowel bladder	30.40	Y Z	Y S	15.50	12.24	2.07	Y :	Y S	47.97	44.71	060
50830		∢ •	Revise urine flow	33.49	Υ S	¥ ž	16.37	13.24	2.37	Υ S	Υ S	52.23	49.10	060
50840		∢ ⊲	Replace ureter by bowel	22.1	Z Z	₹ Z	12.26	9.40 88	1.47	¥ Z	Z Z	35.84	32.98	060
50860		< <	Transplant ureter to skin	16.87	Z Z	Z	9.41	7.33	1.29	Z Z	Υ Z	27.57	25.49	060
20900		⋖	Repair of ureter	14.83	AN	N A	8.28	89.9	1.14	N A	NA	24.25	22.65	060
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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

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CPT 1 HCPCS 2	Mod	Status	Description	Physician work RVUs ³	Fully implemented nonfacility PERVUs	Year 2007 transi- tional non-facil- ity PE RVUs	Fully implemented facility	Year 2007 transi- tional fa- cility PE RVUs	Mal-prac- tice RVUs	Fully implemented non- facility total	Year 2007 transi- tional non-facil- ity total	Fully implemented facility	Year 2007 transi- tional fa- cility total	Global
		⋖・	Closure ureter/skin fistula	15.60	A S	Z Z	8.79	7.13	1.01	Y S	Y S	25.40	23.74	060
50930		< <	Ciosure ureter/bowel fistula Belease of ureter	19.98	₹ ₹ Z Z	ζ ζ Z Z	10.54	8.62	2.78	Y Y	4 4 2 2	25.39	88.88	060
		< <	Laparoscopy ureterolithotomy	17.83	A A	A A	9.01	7.54	1.36	A A	Z A	28.20	26.73	060
50947		∢ <	Laparo new ureter/bladder	25.57	Z Z	Y S	12.82	10.49	2.16	Y S	Z Z	40.55	38.22	060
50951		τ ∢	Eabaro new dieter/bladder	5.83	4.99	4.47	2.87	2.26	0.41	11.23	10.71	9.14	34.30 8.50	000
		< <	Endoscopy of ureter	6.23	5.19	4.61	3.41	2.63	0.43	11.85	11.27	10.07	9.29	000
50955		∢ <	Ureter endoscopy & biopsy	6.74	5.45	6.19	3.65	2.93	0.48	12.67	13.41	10.87	10.15	000
50961		< <	Ureter endoscopy & treatment	6.04	5.00	4.81	3.20 2.93	2.38	0.48	11.45	10.98	0.52 8.38	83. 83.	800
		. ⋖	Ureter endoscopy	7.13	A N	AN	3.40	2.70	0.52	A N	Y Y	11.05	10.35	000
50972		∢ <	Ureter endoscopy & catheter	6.88	Z Z	Y S	3.28	2.67	0.49	₹ Z	Z Z	10.65	10.04	000
50976		< <	Ureter endoscopy & treatment	9.03	₹ ₹ 2 Z	Z Z	3.95	3.29	0.0	Z Z	Z Z	13.64	12.98	800
		< <	Ureter endoscopy & treatment	6.84	Ϋ́	AN	3.25	2.60	0.48	N A	A	10.57	9.92	000
51000		۷.	Drainage of bladder	0.78	0.96	1.70	0.28	0.25	0.05	1.79	2.53	Ξ:	1.08	000
51005		∢ <	Drainage of bladder	1.02	2.44	4.14	0.30	0.33	0.10	3.56	5.26	1.42	1.45	000
51010		< ⊲	Urainage of bladder	4.25	4.90 AN	5.44 NA	2.44 45	Z.0Z 4 26	0.28	9.43 VA	9.8 V N	13.42	0.35	000
		. ∠	Incise & treat bladder	7.62	Z Z		4.70	4.16	0.58	Z Z	. ∠ Z	12.90	12.36	060
		<	Incise & drain bladder	4.39	₹ Z	∢ Z	3.82	3.03	0.31	Y V	Ϋ́	8.52	7.73	060
51045		⋖	Incise bladder/drain ureter	7.62	₹ Z	∢ Z	5.40	4.30	0.52	Y Z	Y Y	13.54	12.44	060
		∢ <	Removal of bladder stone	7.83	Ž Ž	¥ ž	5.53	4.12	0.49	¥ ž	Z Z	13.85	12.44	060
		۲ ۵	Remove ureter calculus	97.6	ζ Δ	(d	0.00	2.03	0.02	ζ 4 Ζ Ζ	ζ Δ Ζ	16.92	15.75	060
51080		< <	Drainage of bladder abscess	6.57	Ž	¥ X	4.49	3.79	0.43	Y Y	Z Z	11.49	10.79	060
51500		⋖・	Removal of bladder cyst	10.86	Υ 'n	¥:	5.84	5.22	1.03	¥ :	Y S	17.73	17.11	060
51520		∢ ⊲	Removal of bladder lesion	10.02	₹ 4 Z Z	A A	8 9.08	2.0	69.0	4 4 2 2	A Z	17.39 25.13	15.89	060
51530		< <	Removal of bladder lesion	13.52	Y Z	Y Y	7.47	6.19	1.05	Y Y	Z Z	22.04	20.76	060
51535		۷.	Repair of ureter lesion	13.71	Y :	A :	7.68	6.51	1.23	¥ :	¥2	22.62	21.45	060
		∢ <	Partial removal of bladder	17.04	₹ ₹	Υ Z	9.12	7.34	1.31	Y Z	Y Z	27.47	25.69	060
51565		< <	Revise bladder & ureter(s)	23.42	(< Z	Z Z	12.37	9.83		Z Z	ZZ	37.42	34.88	060
		4	Removal of bladder	27.24	Y Y	AN	13.72	10.75	1.71	A A	A A	42.67	39.70	060
51575		∢ <	Removal of bladder & nodes	33.93	Z Z	Y S	17.31	13.37	2.16	¥ ž	Z Z	53.40	49.46	060
51585		< <	Removal of bladder & nodes	39.32	₹ ₹ 2 Z	Z Z	20.24	15.36	2.48	Z Z	ζ <u> </u>	62.04	57.16	060
		4	Remove bladder/revise tract	36.08	A A	ΥZ	18.00	13.98	2.27	A A	Ϋ́Z	56.35	52.33	060
51595		⋖・	Remove bladder/revise tract	41.03	Υ :	¥:	20.38	15.72	2.59	¥ :	Y S	64.00	59.34	060
		< ⊲	Remove bladder/create pouch	43.90	₹ Z	V Z	22.03	16.95	2.77	Ψ Z	Y Z	68.70	63.62	060
51600		τ «	Injection for bladder x-ray	0.88	4.4	4.90	0.33	0:30	0.00	5.35	5.84	1.27	1.24	000
51605		. ⋖	Preparation for bladder xray	0.64	3.04	5.31	0.44	0.37	0.04	3.72	5.99	1.12	1.05	000
		∢ <	Injection for bladder x-ray	1.05	1.99	2.22	0.73	0.63	0.07	3.11	3.34	1.85	1.75	000
51701		< <	Insert bladder catheter	0.50	1.06	1.45	0.25	0.20	0.0	1.60	1.99	0.79	0.75	000
51702		4	Insert temp bladder cath	0.50	1.56	1.96	0.35	0.27	0.04	2.10	2.50	0.89	0.81	000
51703		∢ <	Insert bladder cath, complex	1.47	2.34	2.64	0.84	0.63	0.10	3.91	4.21	2.41	2.20	000
51705		∢ ∢	Change of bladder tube	1.02	2.08	3.21	1.22	0.88	0.07	3.17	4.81	2.82 2.82	2.48	010
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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

25		<u>:</u>	ADDENDON D. ILECATIVE VALUE (1100) AND I	1 - C - L 1				· · · · · · · · · · · · · · · · · · ·	;	- 1	AND THE PARTY OF T			j
CPT 1 HCPCS 2	Mod	Status	Description	Physician work RVUs ³	Fully im- plement- ed non- facility PE RVUs	Year 2007 transi- tronal non-facil- ity PE RVUs	Fully implemented facility	Year 2007 transi- tional fa- cility PE RVUs	Mal-prac- tice RVUs	Fully implemented nonfacility	Year 2007 transi- tional non-facil- ity total	Fully implemented facility	Year 2007 transi- tional fa- cility total	Global
51715		∢ •	Endoscopic injection/implant	3.73	2.84	3.64	1.80	1.46	0.29	6.86	7.66	5.82	5.48	000
51725		∢ ∢	reatment of bladder lesion	1.50	1.68	1.73	0.78 NA	L .O	0.14	3.32	3.37	2.42 NA	SS:S	000
	26	< ∢	Simple cystometrogram	1.51	0.58	0.51	0.58	0.51	0.12	2.21	2.14	2.21	2.14	000
51725	TC	⋖	Simple cystometrogram	0.00	3.81	4.79	A A	Ą	0.04	3.85	4.83	Ą	A A	000
51726		∢ <	Complex cystometrogram	1.7	7.29	7.46	¥ S	A S	0.18	9.18	9.35	A S	¥ S	000
51/26	 7.	∢	Complex existemetrogram	L 0	0.66	0.59	0.00 NA	95.0 NA	0. O	2.50	2.43	2.50 NA	2.43 NA	96
51736	2	< <	Urine flow measurement	0.00	0.92	0.62	₹ ₹	₹₹	0.00	1.59	1.34	₹	₹ ₹	800
	26	< <	Urine flow measurement	0.61	0.23	0.21	0.23	0.21	0.02	0.89	0.87	0.89	0.87	000
51736	TC	∢ •	Urine flow measurement	0.00	0.69	0.46	¥:	₹:	0.01	0.70	0.47	₹:	¥:	000
51741	36	∢ <	Electro-uroflowmetry, first	41.1	1.30	0.92	NA A A	NA 0%	0.11	2.55	2.17	NA 80	A S	000
51741	 TC	(∢	Electro-uroflowmetry, first	† 0 - 0	0.40	0.53	AN A	85.5 AN	0.00	0.86	20.1	6 Z	AN AN	
			Urethra pressure profile	1.61	5.12	5.47	Y Y	A Z	0.20	6.93	7.28	A N	A Z	000
51772	26		Urethra pressure profile	1.61	0.56	0.55	0.56	0.55	0.15	2.32	2.31	2.32	2.31	000
51772			Urethra pressure profile	0.00	4.57	4.92	Y Y	Y S	0.05	4.62	4.97	Y Y	Y S	000
51784		∢ <	Anal/urinary muscle study	1.53	3.89	3.97	A S	¥ ¿	0.16	2.58	5.66	Y Y	A S	000
	0 Z 1 Z	∢ <	Anal/urings, muscle study	5.53	0.52	0.51	0.52	0.5	0.0	7.7.0	2.70	Z. Z.	N . IO	88
51785	2	< <	Anal/urinary muscle study	1.53	4.59	4.49	₹₹	₹₹	0.04	6.27	6.17	₹₹	₹ ₹	800
51785	26	< <	Anal/urinary muscle study	1.53	0.57	0.52	0.57	0.52	0.11	2.21	2.16	2.21	2.16	000
51785	TC	⋖	Anal/urinary muscle study	0.00	4.02	3.97	¥	Ą	0.04	4.06	4.01	Ą	¥	000
51792		⋖ ·	Urinary reflex study	1.10	5.07	5.78	Y Y	Y Y	0.20	6.37	7.08	Ψ.	Y Y	000
51792	26	۷ ۵	Urinary reflex study	1.10	0.40	0.41	0.40 NA	0.41 NA	0.07	1.57	1.58	1.57 NA	1.58 NA	000
51795)	< <	Urine voiding pressure study	1.53	68.9	7.21	Ž Z	Ž Ž	0.22	8.64	8.96	Ž	Z Z	000
	26	< <		1.53	0.59	0.52	0.59	0.52	0.12	2.24	2.17	2.24	2.17	000
51795	TC	⋖	Urine voiding pressure study	0.00	6.30	6.68	Y Y	Υ Υ	0.10	6.40	6.78	Y Y	Y Y	000
51797		∢ <	Intraabdominal pressure test	9. 1	4.96	5.59	¥ S	A F	0.17	6.73	7.36	N S	N S	000
	 7. 1.0.	∢ <	Intrabdominal pressure test	09.	0.62	0.55	0.62 NA	0.55	2.0 Z R	2.34	2.27	X.34	72.2	000
51798	2	< <	Us urine capacity measure	0.00	0.61	0.41	₹₹	¥ Ž	0.08	0.69	0.49	ΣŽ	¥ ₹	3 ×
51800		⋖	Revision of bladder/urethra	18.68	ΥZ	N A	10.38	8.28	1.32	A A	A N	30.38	28.28	060
51820		∢ <	Revision of urinary tract	19.33	Y S	Y S	10.81	8.93	1.74	¥ Z	Z Z	31.88	30.00	060
51841		< <	Attach bladder/urethra	13.55	ζ	Z Z	6.91	6.52	1.24	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	ξ	21.70	21.31	060
		< <	Repair bladder neck	10.02	A N	N A	5.98	5.06	0.79	Ą Z	N	16.79	15.87	060
51860		⋖ ·	Repair of bladder wound	12.42	₹ Z	¥:	6.93	90.9	1.16	Y S	Y :	20.51	19.64	060
51865		< <	Repair of bladder wound	15.62	Z Z	¥ ż	8.67	7.19	1.23	Y S	Υ Ś	25.52	24.04	060
51880		∢ <	Repair of pladder opening	17.7	₹ ₹ 2	₹ ₹	4.79 10	4.17	1.72	4 4 2 2	₹ ₹	13.28	12.66	060
51920		< <	Close bladder-uterus fistula	13.20	(Z Z	7.97	6.23	1.18	ζ	₹ ₹ 2 Z	22.35	20.61	060
		< <	Hysterectomy/bladder repair	17.27	A Z	A N	10.57	9.12	2.03	A Z	Z Z	29.87	28.42	060
		⋖	Correction of bladder defect	30.40	Ϋ́	Ä	11.32	11.91	2.14	AN	A N	43.86	44.45	060
51960		⋖	Revision of bladder & bowel	25.12	A S	A N	13.51	10.62	1.63	A N	NA.	40.26	37.37	060
51980		۷,	Construct bladder opening	12.38	A S	¥ ?	7.48	5.91	0.86	¥ :	A S	20.72	19.15	060
51990		∢ <	Laparo urethral suspension	13.22	▼	Y S	5.96	6.11	1.39	Υ S	Υ S	20.57	20.72	060
52000			Laparo siing operation	2.23	3 NA	3.27	0.63	0.87	0.14	N 7	7.0 7.64	3.57	3.24	2000
		-	G) 500000 J	i	;	,		;	;	1,2,5		;		;

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

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CPT 1 HCPCS 2	Mod	Status	Description	Physician work RVUs ³	Fully im- plement- ed non- facility PE RVUs	Year 2007 transi- tional non-facil- ity PE RVUs	Fully implemented facility	Year 2007 transi- tional fa- cility PE RVUs	Mal-prac- tice RVUs	Fully implemented non-facility total	Year 2007 transi- tional non-facil- ity total	Fully implemented facility	Year 2007 transi- tional fa- cility total	Global
52001		A	Cystoscopy, removal of clots	5.44	4.84	5.02	2.57	2.05	0.39	10.67	10.85	8.40	7.88	000
52005		< <	Cystoscopy & ureter catheter	2.37	5.54	5.57	1.32	9.5	0.17	8.08	8.1	3.86	3.54	000
52010		< <	Cystoscopy and propsy	3.02	8:38	10.18	69.	1.29	0.21	1.6.1	13.41	26.4	4.52	000
		< <	Cystoscopy	2.59	8.58	13.06	4.1	1.04	0.17	11.34	15.82	4.20	3.80	0000
52214		4	Cystoscopy and treatment	3.70	20.50	33.78	1.91	1.48	0.26	24.46	37.74	5.87	5.44	000
52224		4	Cystoscopy and treatment	3.14	19.66	32.34	1.68	1.28	0.22	23.02	35.70	5.04	4.64	000
52234		∢ •	Cystoscopy and treatment	4.62	Υ ?	Y S	2.38	1.84	0.33	Υ :	¥:	7.33	6.79	000
52235		∢ <	Cystoscopy and treatment	5.44 7.44	Υ S	Y S	2.76	2.15	0.39	∀ < Z Z	Y S	8.59	86.7	000
52250		۲ ۷	Cystoscopy and radiotracer	4 49	ζ	ζ <u> </u>	4.30	1.84	0.03	(4 2 Z	Z Z	7.23	6.65	
52260		< ≺	Cystoscopy and treatment	3.91	A N	Y Y	2.03	1.57	0.28	Υ Z	Ϋ́	6.22	5.76	0000
52265		V	and treatment	2.94	7.89	12.01	1.57	1.23	0.22	11.05	15.17	4.73	4.39	000
52270		Α	Cystoscopy & revise urethra	3.36	7.24	10.11	1.82	1.39	0.24	10.84	13.71	5.45	4.99	000
52275		∢ •	Cystoscopy & revise urethra	4.69	9.61	14.10	2.38	1.84	0.33	14.63	19.12	7.40	6.86	000
52276		∢ <	Cystoscopy and treatment	4.99	Υ S	Υ S	2.56	1.98	0.35	Υ S	₹ Ş	7.90	7.32	000
522//		< <		0.0	Y N	AN O	78.7	Z 4.7 Z 6.0	9 6	AN O	NA P	4.57	9.02	000
		< ⊲	Overocopy and treatment	00.9	07.C	0.63 AN	- 02 - 02	2 46	0.20	0.20 QN	9.63 VA	4.02	22.4	
52283		< ⋖	Oystoscopy, implant stent	3.73	3.97	3.96	1.97	1.53	96.0	2,00	7.95	5.96	55.52	
		. ∢		3.60	4.19	4.06	1.94	1.48	0.26	8.05	7.92	5.80	5.34	000
52290		٧	Cystoscopy and treatment	4.58	A N	A N	2.37	1.83	0.32	Ϋ́	Ą Z	7.27	6.73	000
52300		4	Cystoscopy and treatment	5.30	Y Y	Y Y	2.72	2.11	0.38	Ϋ́	Ą Z	8.40	7.79	000
52301		< <	Cystoscopy and treatment	5.50	Υ S	Z Z	2.15	2.03	0.46	A S	¥ S	8.1	7.99	000
52305		< <	Cystoscopy and treatment	5.30	A L	NA FE	7.01	2.03	0.38	NA 1	NA 7	8.29	7.73	000
52315		< <	Cystoscopy and treatment	5.20	6.87	8.24	2.59	2.03	0.20	12.44	13.81	8.16	7.60	000
		4	Rémove bladder stone	6.71	17.64	26.18	3.14	2.50	0.48	24.83	33.37	10.33	69.6	000
52318		4	Remove bladder stone	9.18	Y Z	Y Y	4.24	3.39	0.65	Ϋ́Z	Y Y	14.07	13.22	000
52320		< <	Cystoscopy and treatment	4.69	Υ S	Υ S	2.31	1.80	0.33	Υ S	₹ S	7.33	6.82	000
52325		∢ ⊲	Cystoscopy, stone removal	0 0 0 0	18 36	08 52	7.83 8.43	2.33	44.0	23 Q1	34 07	4.0.9 40.04	8.9Z 7.52	
52330		< 4	Cystoscopy and treatment	5.03	21.07	34.47	2.46	76.	0.36	26.46	39.86	7.85	7.33	000
		. ≺		2.83	4.44	5.43	1.55	1.18	0.21	7.48	8.47	4.59	4.22	0000
52334		4	Create passage to kidney	4.82	A N	A A	2.42	1.91	0.35	Ϋ́	Ą V	7.59	7.08	000
52341		۷.	Cysto w/ureter stricture tx	5.99	ΥZ:	Y :	3.14	2.45	0.43	₹ Z	₹ Z	9.56	8.87	000
52342		∢ <	Cysto w/up stricture tx	6.49	▼	Y S	3.36	2.60	0.46	Z Z	¥ S	10.31	9.55	000
52344		< <	Cysto/uretero. stricture tx	7.69	ζ ζ Ζ	ζ	60.5	3.11	0.55	(ζ	12.27	11.35	000
		. ∢	Cysto/uretero w/up stricture	8.19	Υ Z	Υ Z	4.25	3.28	0.58	₹ Z	Υ Z	13.02	12.05	000
		٧	Cystouretero w/renal strict	9.22	A N	A Z	4.66	3.63	0.65	Ϋ́	A Z	14.53	13.50	000
52351		Α-	Cystouretero & or pyeloscope	5.85	₹ Z	YZ:	3.09	2.39	0.41	₹ Z	YZ:	9.35	8.65	000
52352		۷.	Cystouretero w/stone remove	6.87	¥ :	Y:	3.63	2.79	0.49	₹ Z	Y:	10.99	10.15	000
52353		< <	Cystouretero w/lithotripsy	7.96	₹ Ş	Y S	4.09	3.17	0.57	A S	Y S	12.62	11.70	000
52354		< <	Cystouretero w/biopsy	7.33 50.0	¥	₹ < Z Z	3.82	2.97	0.52	₹ < Z Z	Ψ < Z	11.6/	10.82	000
52400		(∢	Cystouretero w/congen repr	10.01	ζ	ζ <u> </u>	5.4.7.	4.50	0.68	(4 2 Z	ζ <u> </u>	16.36	14.94	060
		< <	Cystourethro cut ejacul duct	5.27	Υ Z	Υ V	2.27	1.84	0.40	Z Z	Υ Z	7.94	7.51	0000
52450		V	Incision of prostate	7.63	A N	A A	5.71	4.19	0.54	ΥZ	Ą Z	13.88	12.36	060
52500		۷.	Revision of bladder neck	9.33	Υ :	Y :	6.42	4.55	0.60	ΨZ:	Y :	16.35	14.48	060
52510		∢ ⊲	Dilation prostatic urethra	7.45	Y Z	Y Z	5.09	3.61	0.48	Z Z	Y Y	13.02	45. F2 45. P2	060
		נ .	riostatectorily (Total)	5		- :	3	2	5		1.78.1	70:17	7	3

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

ADC	AUDENDOM D.—TELATIVE	֝֝֝֝֝֝֝֝֝֝֝֝֝ ֡	ACCE CIVID (IVAC)	אוראודר	AND ITERALED INFORMATION OSED IN))			ואור ב			1007		
CPT 1 HCPCS ²	Mod	Status	Description	Physician work RVUs ³	Fully im- plement- ed non- facility PE RVUs	Year 2007 transi- tional non-facil- ity PE RVUs	Fully implemented facility	Year 2007 transi- tional fa- cility PE RVUs	Mal-prac- tice RVUs	Fully implemented nonfacility	Year 2007 transi- tional non-facil- ity total	Fully implemented facility	Year 2007 transi- tional fa- cility total	Global
52606		∢ ∢	Control postop bleeding	8.80	4 4 Z Z	Z Z	5.73	4.10	0.57	4 4 Z Z	Z Z	15.10	13.47	060
		< <	Prostatectomy, second stage	7.75	₹ Z	Z Z	5.60	3.91	0.48	Z Z	Z Z	13.83	12.14	060
		⋖	Remove residual prostate	7.15	A N	N A	4.77	3.44	0.47	N A	A	12.39	11.06	060
52630		∢ <	Remove prostate regrowth	7.61	e V Z	Z Z	4.99	3.65	0.51	¥ Z	Y Z	13.11	11.77	060
52647		(∢	Laser surgery of prostate	11.09	41.57	66.01	7.17	5.20	0.73	53.39	77.83	18.99	17.02	060
		⋖	Laser surgery of prostate	11.94	41.88	80.99	7.51	5.48	0.79	54.61	78.81	20.24	18.21	060
52700		∢ <	Drainage of prostate abscess	7.35	₹ Z	Y S	5.14	3.68	0.48	Y S	Y Z	12.97	11.51	090
53010		∢ ∢	Incision of urethra	82.28	Y Y	Z Z	98. 6	3 17	0.16	A A	Z Z	9.45 8.45	4.06	060
		< ∢	Incision of urethra	1.77	1.95	2.75	0.99	0.75	0.13	3.85	4.65	2.89	2.65	000
53025		∢ <	Incision of urethra	1.13	1.74	3.24	0.69	0.56	0.08	2.95	4.45	1.90	1.77	000
53040		< ⊲	Drainage of urethra abscess	0.40	NA 1	V C	8.58 8.54	3.73	0.45	AN V	NA 1 08	11.48	10.63	030
53080		(∢	Drainage of urinary leakage	6.78	6 Z	N A	5.05	5.74	0.52	AN AN	NA A	12.35	13.04	060
		⋖	Drainage of urinary leakage	10.99	A V	N A	4.50	6.69	0.92	AN	₹ Z	16.41	18.60	060
53200		⋖ ·	Biopsy of urethra	2.59	1.75	1.43	1.34	1.07	0.20	4.54	4.22	4.13	3.86	000
53210		∢ <	Removal of urethra	13.53	Υ S	Y S	8.00	6.39	0.89	Y S	¥ ž	22.42	20.81	060
53220		۲ ∢	Treatment of urethra lesion	7.49	Z Z	ζ 4 2 Z	5.16	80.4	0.10	X A	ξ	13.14	12.06	060
		< <	Removal of urethra lesion	10.25	Z Z	Z	6.67	5.21	0.73	Z Z	Υ Z	17.65	16.19	060
53235		⋖	Removal of urethra lesion	10.80	N A	A A	7.17	5.48	0.72	AN	A N	18.69	17.00	060
53240		∢ •	Surgery for urethra pouch	6.94	Y Z	Y S	4.90	3.87	0.52	¥ S	Y S	12.36	11.33	060
		∢ <	Removal of urethra gland	9.00	NA	NA C	28.4 08.4	3.69	0.49	NA 7 Z	NA RA	11.72	10.56	080
53265		< <	Treatment of urethra lesion	3.12	3.05	2.80	2.07	5. 5.	0.24	6.41	6.16	5.43	4.94	010
		⋖	Removal of urethra gland	3.09	2.31	2.24	1.72	1.59	0.30	2.70	5.63	5.11	4.98	010
53275		∢ <	Repair of urethra defect	4.52	¥ S	Y S	2.86	2.41	0.32	¥ S	Z Z	7.70	7.25	010
53405		(∢	Revise urethra, stage 2	15.45	Υ Υ	Z Z	62.6	7.06	1.10	ζ	ζ	25.78	23.61	060
		< <	Reconstruction of urethra	17.47	A A	Y Y	10.13	7.84	1.16	N A	A A	28.76	26.47	060
53415		⋖ ·	Reconstruction of urethra	20.49	Y :	₹ Z	11.33	8.35	1.37	Y :	¥:	33.19	30.21	060
53420		∢ <	Reconstruct urethra, stage 1	14.98	Z Z	Z Z	6.53	6.36	0.96	¥ Z	Z Z	22.47	22.30 25.58	060
53430		< ∢	Reconstruction of urethra	17.24	Z Z	Z Z	8.90	7.48	1.15	Z Z	ξ Z	27.29	25.87	060
		∢.	Reconstruct urethra/bladder	20.97	¥:	Y :	11.37	8.90	1.41	¥.	A :	33.75	31.28	060
•		∢ <	Male sling procedure	15.33	Z Z	Z Z	9.58	6.89	0.96	4 4 Z Z	Ψ	25.87	23.18	060
53444		< ∢	Insert tandem cuff	14.00	Z Z	Z Z	8.32	6.50	0.94	Z Z	ζ ζ Z Z	23.26	21.44	060
		⋖	Insert uro/ves nck sphincter	15.15	¥ N	Y Y	9.53	7.71	0.99	A N	N	25.67	23.85	060
53446		∢ •	Remove uro sphincter	10.83	Z Z	Υ S	7.30	5.75	0.72	Υ :	Ϋ́ Z	18.85	17.30	060
53447		∢ <	Remove/replace ur sphincter	23.20	Z Z	Z Z	12.00	L0.7	0.95	4 4 2 2	∀	23.77	22.05	060
53449		(∢	Repair uro sphincter	10.37	Υ Υ	Z Z	06.90	5.27	0.68	ζ	Z Z	17.95	16.32	060
		< <	Revision of urethra	6.63	Y Z	Z A	4.91	3.70	0.43	Y Y	Y Z	11.97	10.76	060
53460		⋖ ·	Revision of urethra	7.61	Y S	Y :	5.31	4.10	0.50	Y S	₹ Z	13.42	12.21	060
53500		∢ <	Urethrlys, transvag w/ scope	12.81	Z Z	Υ S	7.64	6.58	0.90	Υ S	Υ S	21.35	20.29	060
53505		∢ ⊲	Hepair of urethra injury	α α 7 τ	Y Y	Z Z	2. c	4 4 02.4 30	0.02	A A	Ζ Z	13.90	12.02	080
53510			Repair of urethra injury	10.77	Z Z	Υ Z	6.97	5.62	0.74	Z Z	Υ Z	18.48	17.13	060
53515			Repair of urethra injury	14.03	A A	NA	8.09	6.48	1.05	AN	NA	23.17	21.56	060
TOO!	700	900		1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -		- Indecise	00 470,004							

ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

		! i		;))	! !	i)	1
CPT 1 HCPCS 2	Mod	Status	Description	Physician work RVUs ³	Fully implemented nonfacility PERVUS	Year 2007 transi- tional non-facil- ity PE RVUs	Fully implemented facility	Year 2007 transi- tional fa- cility PE RVUs	Mal-prac- tice RVUs	Fully implemented nonfacility	Year 2007 transi- tional non-facil- ity total	Fully im- plement- ed facility total	Year 2007 transi- tional fa- cility total	Global
53520		⋖	Repair of urethra defect	9.29	NA	NA	6.34	4.95	0.61	NA	NA	16.24	14.85	060
53600		∢ •	Dilate urethra stricture	1.21	1.19	1.15	0.59	0.47	0.09	2.49	2.45	1.89	1.77	000
53601		∢ <	Dilate urethra stricture	0.98	1.41	1.37	0.54	0.41	0.07	2.46	2.36	1.59	1.46	000
		< <	Dilate urethra stricture	1.20	176	¥ 5	0.33	0.44	0.00	Y Z	2 E Z	9.90	1.01	88
53621		(∢	Dilate urethra stricture	25.	1.72	1000	0.0	0.00	0.0	. c.	3.67	2.50	66.7	888
53660		∶∢	Dilation of urethra	0.71	1.35	1.32	0.47	0.35	0.05	2.11	2.08	1.23	1.1	000
		⋖	Dilation of urethra	0.72	1.34	1.31	0.43	0.33	0.02	2.11	2.08	1.20	1.10	000
		⋖	Dilation of urethra	0.76	AN	Y Y	0.27	0.26	90.0	ΥZ	¥ X	1.09	1.08	000
53850		⋖ ·	Prostatic microwave thermotx	9.94	50.76	83.44	6.12	4.49	0.67	61.37	94.05	16.73	15.10	060
53852		∢ <	Prostatic rf thermotx	10.62	47.85	78.74	6.94	5.02	0.70	59.17	90.06	18.26	16.34	060
53853		∢ <	Prostatic water thermother	2.48	30.02	2.04 2.00 2.00	4.52	3.28	0.3	35.87	24.98	10.37	9.13	030
		(⊲	Sitting of prepare	400	21.8	20.0 4	5.5	00.1	0.0	4.τ 4.α 4.α	4.04 7.04	3.10 4.06	27.7	0 0
54015		< ∢	Drain penis lesion	5.33	† 4 2	2 Z	3.30	27.5	0.0	Q Z	AN AN	66.8	8.8	010
		. ⋖	Destruction, penis lesion(s)	1.24	2.07	1.76	1.38	1.12	0.08	3.39	3.08	2.70	2.44	010
		<	Destruction, penis lesion(s)	1.22	2.01	1.68	1.26	0.92	0.08	3.31	2.98	2.56	2.22	010
		4		1.24	2.33	1.85	1.50	1.22	90.0	3.63	3.15	2.80	2.52	010
		⋖	Laser surg, penis lesion(s)	1.24	2.67	2.33	1.39	0.97	0.09	4.00	3.66	2.72	2.30	010
54060		⋖	Excision of penis lesion(s)	1.93	3.17	3.13	1.68	1.22	0.13	5.23	5.19	3.74	3.28	010
54065		⋖	Destruction, penis lesion(s)	2.42	3.28	2.80	1.98	1.42	0.13	5.83	5.35	4.53	3.97	010
54100		⋖ ·	Biopsy of penis	1.90	3.36	2.95	1.37	96.0	0.10	5.36	4.95	3.37	2.96	000
54105		∢ <	Biopsy of penis	3.49	4.13	4.25	2.54	2.09	0.25	7.87	66.7	6.28	5.83	010
54110		∢ <	Treat nonic locion and the	10.73	4 < Z Z	4 < Z Z	6.77	57.5	0.72	₹ 2	4 < Z Z	18.22	16.71	060
		(⊲	Treat penis lesion, glant	16.77	(4 2 Z	(4 2 Z	5.0	7 53	0.9	(4 2 Z	ζ 4	27.58	25.12	060
54115		< <	Treatment of penis lesion	6.76	6.01	4.79	5.16	3.89	0.43	13.20	11.98	12.35	11.08	060
		⋖	Partial removal of penis	10.82	Ϋ́	ΥZ	7.01	5.26	0.68	Ϋ́Z	A A	18.51	16.76	060
54125		⋖	Removal of penis	14.37	AN	Y Y	8.48	6.50	0.95	Y Y	A N	23.80	21.82	060
54130		⋖ ·	Remove penis & nodes	21.58	₹ Z	Y :	11.74	90.6	1.52	Y :	Y :	34.84	32.18	060
54135		∢ <	Remove penis & nodes	27.91	A S	Y C	14.75	11.33	1.87	Z Z	A C	44.53	41.11	060
		< <	Orcumologion	- 6	10.7	3.9Z	0.38 1.76	70.0	0.0	00.4	0.00 V	7.00	2.04	000
54160		(∢	Circumcision	2.2	377	4 06	1.70	5 - 0	0.0	6 44	6 73	4.50	1986	200
		< <	Circumcision	3.27	AN	AZ AZ	2.28	1.74	0.23	AZ.	A N	5.78	5.24	010
		⋖	Lysis penil circumic lesion	3.25	4.12	4.53	2.32	1.66	0.21	7.58	7.99	5.78	5.12	010
54163		⋖	Repair of circumcision	3.25	A N	∢ Z	2.97	2.22	0.21	₹ Z	₹ Z	6.43	5.71	010
54164		∢ ·	Frenulotomy of penis	2.75	ΨV.	Ψ! V	2.72	2.06	0.18	A N	A S	5.65	4.99	010
54200		∢ <	Treatment of penis lesion	1.06	2.07	1.87	1.34	1.06	0.08	3.21	3.01	2.48	2.20	010
		(⊲	Treatment of penis lesion	0.70	07.0	7 7 7	0.47	10.14	0.30	4 F	AN 9	19.01	3.66	060
54230		(∢	Prepare penis study	1.34	1 45	1 1 2	- 0 - 46 - 0	12.0	60.0	- 88	09.0	2.37	20.00	
		< <	Dynamic cavernosometry	2.04	1.91	1.51	1.21	96.0	0.16	4.11	3.71	3.41	3.16	000
		⋖	Pénile injection	1.19	1.44	1.08	0.92	79.0	0.08	2.71	2.35	2.19	1.94	000
		⋖	Penis study	1.31	1.57	1.17	A A	A A	0.17	3.05	2.65	N A	A A	000
54240	26		Penis study	1.31	0.51	0.45	0.51	0.45	0.11	1.93	1.87	1.93	1.87	000
54240	: :		Penis study	0.00	1.06	0.72	¥ ×	Z Z	0.00	21.12	3.40	¥ ×	Y Y	88
54250	26		Penis study	200	08.0	02.0	6	0 76	0.0	0 00	3.10	80.8	8 E	
	25		Penis study	00:0	0.38	0.25	Z AZ	N N	0.02	0.40	0.27	N A	Z Z	000
54300		⋖	Revision of penis	11.01	AN	A A	7.29	6.01	0.76	Y Y	A N	19.06	17.78	060
54304		4	Revision of penis	13.09	NA	NA	8.30	6.83	0.88	NA.	- V V	22.27	20.80	060
	-					:		,						

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

ADL	FINDOM	ADDENDOM B.——NELATIVE	VALUE UNITS (NVUS) A	חבואוברו	NO HELATED INFORMATION OSED IN			DELEANING INICARE		_		7007	CONTINOE	ם
CPT 1 HCPCS 2	Мод	Status	Description	Physician work RVUs ³	Fully implemented non-facility PE	Year 2007 transi- tional non-facil- ity PE RVUs	Fully implemented facility	Year 2007 transi- tional fa- cility PE RVUs	Mal-prac- tice RVUs	Fully im- plement- ed non- facility total	Year 2007 transi- tional non-facil- ity total	Fully im- plement- ed facility total	Year 2007 transi- tional fa- cility total	Global
54308 54312		۷ ۷	Reconstruction of urethraReconstruction of urethra	12.43	4 4 Z Z	ZZ	9.14	6.51	0.84	Z Z	A Z	21.38	19.78	060
54316		∢ <		17.84	₹ Z	Y S	10.55	8.61	1.21	Y S	Z Z	29.60	27.66	060
54378		∢ ∢	Reconstruction of urethra	13.22	4 4 2 2	A A	6.50 8.41	96.0 96.0	95 09	4 4 2 2	A A	20.1	19.60	060
54324		< <	Reconstruction of urethra	17.34	Z Z	Y Y	10.37	8.57	1.14	Z Z	Ž	28.85	27.05	060
54326			Reconstruction of urethra		Y Z	Y :	10.11	8.37	- - 5	Y :	¥:	28.03	26.29	060
54328			Revise penis/urethra		A A	A A	10.69	7.97	1.98	4 4 2 2	A A	30.06	25.63	060
			Revise penis/urethra		Z Z	A A	12.42	10.84	2.20	Z Z	Y Y	35.98	34.40	060
54340			Secondary urethral surgery		₹ :	Y :	6.79	5.48	0.63	Z Z	Y :	16.94	15.63	060
54344			Secondary urethral surgery		Y Y	A A	91.01	78.37	Z. C.	4 4 2 2	A A	28.57	26.76	060
			Reconstruct urethra/penis		Z Z	Y Y	14.32	11.98	2.24	Y Y	Y Y	42.43	40.09	060
54360			Penis plastic surgery		Y :	¥ :	8.07	6.55	0.84	¥ :	A :	21.50	19.98	060
54380			Repair penis		A A	A A	5.70	6.39	0.93	4 4 2 2	A A	20.60	25.73	060
			Repair penis and bladder		Z Z	Y Z	7.50	8.95	1.54	Z Z	Y Y	31.55	33.00	060
54400			Insert semi-rigid prosthesis		Y :	Y :	5.97	4.76	0.64	¥ :	Y :	15.65	14.44	060
54401			Insert self-contd prosthesis		Z Z	A Z	8.50	6.43	0.73	Y Z	A Z	19.49	17.42	060
54406			Remove muti-comp penis pros		Z Z	Z Z	7.92	6.05	0.86	Z Z	Z Z	21.48	19.61	060
			Repair multi-comp penis pros		A N	A A	8.55	6.44	06.0	A A	Ϋ́	23.12	21.01	060
54410			Remove/replace penis prosth		Y S	Y S	9.73	7.41	1.10	Y S	Y S	27.25	24.93	060
54411			Remov/repic penis pros. comp		Z Z	A A	08.0	7.99 17.4	5 - C	4 4 2 2	A N	15.50	13 98	060
54416			Remv/repl penis contain pros		Z Z	Z Z	8.18	6.08	0.77	Z Z	Z Z	20.74	18.64	060
54417			Remv/replc penis pros, compl		¥ :	Y :	9.26	6.95	1.00	Y :	Y :	26.14	23.83	060
54420		∢ ላ	Revision of penis	12.20	Z Z	A Z	7.78	6.13	0.81	¥ Z	A Z	20.79	19.14	060
54435		< <	Revision of penis	6.67	Z Z	Z Z	5.12	3.99	0.43	Z Z	Z Z	12.21	11.09	060
		۷	Preputial stretching	1.12	0.88	0.93	0.50	0.46	0.08	2.08	2.13	1.70	1.66	000
54500		∢ •	Biopsy of testis	1.31	0.64	0.62	0.85	0.63	0.10	2.05	2.03	2.23	2.04 4.04	000
54512		< <	Blobsy of testis	0.45 0.19	ζ	ξ ς Z Z	5.87	4.57	0.67	¥ 4 2 Z	X X	15.73	14.43	060
		⋖	Removal of testis	5.22	N A	A A	3.81	3.05	0.50	N A	₹ Z	9.53	8.77	060
54522		∢ <	Orchiectomy, partial	10.11	Υ S	Υ S	5.89	5.13	0.89	Z Z	Υ S	16.89	16.13	060
54535		(∢	Extensive testis surgery	13.00	X A	ζ <u> </u>	07.7	6.17	0.00	ζ	Z Z	21.72	20.06	060
		⋖	Exploration for testis	8.27	NA	AN	5.47	4.23	0.59	NA	¥.	14.33	13.09	060
54560		⋖・	Exploration for testis	11.91	Y S	Y S	6.56	5.51	0.90	Y S	Y S	19.37	18.32	060
54600		∢ <	Reduce testis torsion	7.50	4 < 2 2	Y S	5.29	3.99	0.51	Ψ < Z Z	₹ Z	13.30	22.00	080
54640		< <	Suspension of testis	7.53	ζ	Z Z	5.59	4.20	0.62	Z Z	Z Z	13.74	12.35	060
		⋖	Orchiopexy (Fowler-Stephens)	12.18	NA	N	7.95	6.05	1.16	AN	NA	21.29	19.39	060
54660		⋖・	Revision of testis	5.60	Υ ·	Y :	4.52	3.38	0.44	Y S	¥ ż	10.56	9.42	060
546/0		∢ <	Repair testis injury	6.52	∀	Y Z	16.97	88.6	0.47	Y S	Ψ < Z Z	08.11	10.87	060
54690		< <	Relocation of testis(es)	11.56	Z Z	K K	6.31	0.08	- 1	Y Y	K K	18.89	17.86	060
54692		<	Laparoscopy, orchiopexy	13.60	Ϋ́	Ϋ́	7.89	6.05	1.30	Υ	Ϋ́Z	22.79	20.95	060
54700		⋖		3.42	A A	A A	2.46	2.07	0.28	NA	AN	6.16	2.77	010
TOO!	700	do orotaina	icoco (coibol) accisom (2000 their seconds		v	P - Lile - Hear	0,00							

ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

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CPT 1 HCPCS 2	Mod	Status	Description	Physician work RVUs ³	Fully implemented non-facility PE	Year 2007 transi- tional non-facil- ity PE RVUs	Fully implemented facility	Year 2007 transi- tional fa- cility PE RVUs	Mal-prac- tice RVUs	Fully im- plement- ed non- facility total	Year 2007 transi- tional non-facil- ity total	Fully implemented facility	Year 2007 transi- tional fa- cility total	Global
54800		∢	Biopsy of epididymis	2.33	0.87	0.92	1.01	0.93	0.23	3.43	3.48	3.57	3.49	000
54820		∢ <	Exploration of epididymis	5.63	₹ Z	¥ 2	4.38	3.30	0.40	¥ ż	¥ ż	10.41	9.33	060
54830		∢ <	Remove epididymis lesion	79.0	₹ ₹	¥	00.4	14.5	0.41	₹ < Z Z	₹ < Z Z	10.84	90.0	060
		۲ ۵	Remove epidiayillis lesion	 	₹ 4 2 Z	ξ	5.30 0.00	3.00	0.37	(d	(d	9.40	11.00	060
54861		< <	Removal of epididymis	9.51	. Υ Ζ Ζ	Z Z	6.46	4.85	0.63	Z Z	Z Z	16.60	14.99	060
		. ⋖	Fusion of spermatic ducts	13.99	Ϋ́	A A	5.12	5.63	0.93	ΥZ	A A	20.04	20.55	060
		⋖	Fusion of spermatic ducts	18.84	AN	N	6.43	7.26	1.82	ΥZ	NA	27.09	27.92	060
55000		⋖ ·	Drainage of hydrocele	1.43	1.90	2.03	0.94	0.72	0.11	3.44	3.57	2.48	2.26	000
55040		∢ •	Removal of hydrocele	5.35	Υ :	¥ :	40.7	3.19	0.43	Υ :	¥ :	9.85	8.97	060
55041		∢ <	Removal of hydroceles	8. 6 8. 5	Ψ < Z	A S	5.85	4.44	0.60	∀ < Z Z	₹ ₹	08.41	98.80	060
55100		< ⊲	Drainage of scrottim absense	0.0	N C	8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8	40. 0	0.43	0.46	7 Y	A 2.	10.11	9.92	030
55110		< ∢	Explore scrotum	6.19	0 Z	N A	4.63	3.51	0.43	2 Z	13.0 NA	11.25	10.13	060
		⋖	Removal of scrotum lesion	5.58	Ϋ́	Α	4.41	3.32	0.39	Ϋ́Z	Ϋ́Z	10.38	9.29	060
55150		⋖	Removal of scrotum	7.95	A A	NA	5.62	4.29	0.56	ΥZ	ΥZ	14.13	12.80	060
55175		⋖	Revision of scrotum	5.73	Y V	A	4.49	3.38	0.37	∢ Z	∢ Z	10.59	9.48	060
55180		∢ ·	Revision of scrotum	11.57	Y (Y S	7.47	5.90	0.90	Y !	Y S	19.94	18.37	060
55200		∢ <	Incision of sperm duct	4.48	8.46	11.38	3.47	2.65	0.33	13.27	16.19	8.28	7.46	060
55250		< ⊲	Removal of sperm duct(s)	3.29	88.7	0.60 NA	3.00	2.43	0.25	74.I.	4.4 4 A	0.00	5.97 10	060
55400		(⊲	Repair of sperm duct	8.48	Z Z	ζ <u>Ζ</u>	. 5 . 6 . 6	4 46	0.62	(d	ζ	14.78	13.58	060
		< ⋖	Ligation of sperm duct	4.36	6 5	6.80	26.0	41.0	6000	10.80	11.45	7.59	6.79	010
		< <	Removal of hydrocele	6.08	Y Z	A A	4.29	3.39	0.55	Z Z	Y Y	10.92	10.02	060
55520		⋖	Removal of sperm cord lesion	6.52	Y Y	ΥZ	3.80	3.39	0.75	Ϋ́	Ϋ́	11.07	10.66	060
55530		∢ •	Revise spermatic cord veins	5.65	Υ :	¥:	4.23	3.32	0.45	¥ :	¥ :	10.33	9.42	060
55535		∢ <	Revise spermatic cord veins	7.05	Υ S	Z Z	4.96	3.79	0.47	∀	∀	12.48	11.31	060
55540		∢ ⊲	Revise nernia & sperm veins	8.10 7.80	₹ 4 Z Z	ξ Δ Ζ Ζ	4.Z3 4.Z3	3.9	0.94	4 4 2 2	₹ ₹	12.35	13.01	060
55600		< ⋖	Incise sperm duct pouch	6.87	ζ 4	ζ <u> </u>	50.5	3.76	0.00	(4 2 Z	(4 2 Z	12.54	11.55	060
		< <	Incise sperm duct pouch	8.57	Υ V	A A	4.95	4.46	0.64	₹ Z	A A	14.16	13.67	060
55650		⋖	Remove sperm duct pouch	12.46	A A	A A	7.46	5.83	0.92	Ϋ́	A A	20.84	19.21	060
55680		∢ ·	Remove sperm pouch lesion	5.55	Υ V	¥ ;	3.93	3.21	0.47	Y !	YZ (9.95	9.23	060
55700		∢ <	Biography of prostate	2.58	3.84	11.4	1.39	0.83	0.11	6.53	08.90	4.08	3.52	0000
55720		< ∢	Drainage of prostate abscess	7.63	ζ	ζ	4 98	4.4	0.95	(4 2 Z	ζ	13.56	25.7	060
55725		< <	Drainage of prostate abscess	9.84	Ϋ́Z	A A	6.67	5.04	0.70	Z Z	N N	17.21	15.58	060
55801		⋖	Removal of prostate	19.54	¥ Z	Ϋ́Z	10.98	8.46	1.34	Ϋ́	ΥZ	31.86	29.34	060
55810		∢ •	Extensive prostate surgery	24.08	Υ ?	¥:	12.91	9.94	1.60	Υ :	Ψ.	38.59	35.62	060
55812		∢ <	Extensive prostate surgery	29.61	▼ < Z	Y Z	15.54	12.13	2.04	Υ S	Υ ×	47.19	43.78	060
•		۲ ۵	Removal of prostate	15.57	Z Z	ζ	20.7	9.19	2.15	(d	(d	25.64	23.50	060
55831		< ∢	Removal of prostate	17.00	Z Z	Z Z	9.67	7.41	1.10	Z Z	ž Ž	27.77	25.51	060
		⋖	Extensive prostate surgery	24.37	AN	A	13.24	10.28	1.61	Ϋ́Z	NA	39.22	36.26	060
55842		⋖	Extensive prostate surgery	26.23	A A	A A	14.08	10.91	1.72	Ϋ́	ΥZ	42.03	38.86	060
55845		∢	Extensive prostate surgery	30.46	Y V	AN	15.54	12.09	2.02	₹ Z	∢ Z	48.02	44.57	060
55859		∢ •	Percut/needle insert, pros	13.25	Υ :	¥:	8.12	6.42	0.89	Ψ.	¥ :	22.26	20.56	060
55860		∢ <	Surgical exposure, prostate	15.65	Ψ 2 2	Y Z	9.01	7.06	1.02	∀	Y Z	25.68	23.73	060
55865		(<	Extensive prostate surgery	24.93	(d	₹	13.36	0.00	. t	(< Z	(30.49	36.23	060
55866		< <	Labaro radical prostatectomy	32.17	√	X X	16.64	12.96	2.16	Z Z	Z Z	50.97	47.29	060
H	200				_ <	_ L								

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

וחסר	5	<u>.</u>	ADDENDOM D. TELATIVE VALOE (1100) (1100) AND TELATICE IN CHIMATICAL COSED IN DETERMINING INEDICALLE FAINTENES OF	ורואור		5	֡֝֝֝֜֝֝֜֝֝֝֜֝֝֝֝֝֓֜֝֝֝֡֝֝֝֝֡֝֝֡֝֝֡֝֝֜֜֜֝֝֡֜֝֜֜֝֜֜֝֜֜֜֝֜	, ,	;		-)	2001		בׁ
CPT 1 HCPCS 2	Mod	Status	Description	Physician work RVUs ³	Fully im- plement- ed non- facility PE RVUs	Year 2007 transi- tional non-facil- ity PE RVUs	Fully implemented facility	Year 2007 transi- tional fa- cility PE RVUs	Mal-prac- tice RVUs	Fully im- plement- ed non- facility total	Year 2007 transi- tional non-facil- ity total	Fully implemented facility	Year 2007 transi- tional fa- cility total	Global
55870		∢ <	Electroejaculation	2.58	2.53	1.78	1.49	1.18	0.16	5.27	4.52	4.23	3.92	000
56405		(∢	I & D of vulva/perineum	1.44	1.16	1.29	21.1	1.14	0.17	2.77	2.90	2.75	2.75	010
		⋖ -	Drainage of gland abscess	1.39	1.50	2.09	0.76	0.97	0.16	3.05	3.64	2.31	2.52	010
		⋖ <	Surgery for vulva lesion	2.84	Z Y	A S	1.51	1.66	0.34	A C	NA S	4.69	4.84	010
56501		∢ ∢	Lysis or labral lesion(s)	1.53	1.72	1.80	8. 5	. 4. 	0.20	333	3.97	3.73	3.62 29.4	010
		∶∢	Destroy vulva lesion/s compl	3.01	2.34	2.50	1.70	1.79	0.33	5.68	5.84	5.04	5.13	010
56605			Biopsy of vulva/perineum		0.89	1.03	0.34	0.43	0.13	2.12	2.26	1.57	1.66	000
56620			Biopsy of vulva/perificalifi		0.30 AN	0.40 V A	4.28	4.67	0.00	0.30 NA	0. N	13.56	13.95	77 060
			Complete removal of vulva		¥ Z	¥ :	4.68	5.17	1.02	Y :	¥ :	15.19	15.68	060
56630			Extensive vulva surgery		Υ < Z	Y S	6.07	6.66	1.49	₹ ₹	A S	22.17	22.76	060
56632			Extensive vulva surgery		Z Z	Z Z	9.05	9.41	2.38	Z Z	Z Z	32.91	33.30	060
			Extensive vulva surgery		A N	A A	7.54	8.34	1.97	A A	A A	28.92	29.72	060
56634			Extensive vulva surgery		Υ S	Y S	8.03	9.10	2.16	Υ : Ζ :	Y S	30.61	31.68	060
56640			Extensive Vulva surgery		▼ 4 Z Z	Ψ Δ Ζ Ζ	9.13	10.61	2.60	4 Z	A N	36.26	37.72	060
56700			Partial removal of hymen		Υ Χ	Z Z	1.75	1.82	0.30	. Δ Ζ Ζ	¥ Z	4.82	4.89	010
			Incision of hymen		Ą V	A A	0.51	0.51	0.08	AN	A A	1.27	1.27	000
56740			Remove vagina gland lesion		Y :	Y :	2.28	2.50	0.56	₹ Z	Y :	7.65	7.87	010
56800			Repair of vagina		Υ S	Y Z	1.97	2.14	0.44	Υ S	¥ ž	6.29	6.46	010
56810		< ⊲	Repair of perineum	9.69	Z Z	ξ	00.0	0.00	0 49	ζ	Z Z	92.99 6.76	96.96	030
		۷.	Exam of vulva w/scope	1.50	1.18	1.28	0.52	0.62	0.18	2.86	2.96	2.20	2.30	000
56821		⋖ ·	Exam/biopsy of vulva w/scope	2.05	1.52	1.70	0.67	0.85	0.25	3.82	4.00	2.97	3.15	000
57000		∢ <	Exploration of vagina	2.97	Y Z	Y Z	1.70	1.72	0.31	Υ Z	A Z	4.98	5.00	010
57020			Drainage of pelvic fluid		0.75	0.89	0.43	0.55	0.18	2.43	2.57	2.11	2.23	000
			1 & d vaginal hematoma, pp		A A	Z	1.42	1.47	0.26	AN	¥ Z	4.36	4.41	010
			I & d vag hematoma, non-ob		Z ,	A S	2.36	2.53	0.58	A S	A S	8.05	8.22	010
57065			Destroy vag lesions, simple		00.1	1.61	1.10	1.12	0.15	2.90 1.90	5.14	7.50 4.39	25.52	010
			Biopsy of vagina		0.92	1.04	0.36	0.45	0.14	2.26	2.38	1.70	1.79	000
57105			Biopsy of vagina		1.57	1.74	1.32	1.40	0.20	3.46	3.63	3.21	3.29	010
57107			Remove vagina wall, partial		▼ 4 Z Z	4 4 2 2	2.4 0.88	10.09	0.73	Z Z	A A	35.96	37 17	060
			Vaginectomy partial w/nodes		Ą Z	Z	10.14	10.99	3.21	Y N	Z Z	41.54	42.39	060
57110		⋖	Remove vagina wall, complete	15.34	¥ Z	Y V	6.11	7.00	1.73	ΑN	A A	23.18	24.07	060
57111		⋖ •	Remove vagina tissue, compl	28.19	Υ S	Y S	9.99	11.99	3.17	Υ : Ζ :	Y S	41.35	43.35	060
5/112		∢ <	Vaginectomy w/nodes, compl	30.31	▼	Z Z	11.45	96. [7	3.07	∀	¥ Z	44.83	45.34	060
57130		(∢	Remove vagina lesion	2.43	1.96	2.11	1.47	1.52	0.29	4.68	4.83	4.19	424	010
		⋖	Remove vagina lesion	2.67	2.01	2.21	1.51	1.62	0.31	4.99	5.19	4.49	4.60	010
57150		∢ <	Treat vagina infection	0.55	0.57	0.97	0.15	0.20	0.07	01.1	1.59	0.77	0.85	000
57160		۲ ۵	Insert uteri tahdems/ovolds	0.73	1 P	Z C	0. 14 0. 25	14.2	0.43	4 C	4 C	1 24		060
57170		< ∢	Fitting of diaphragm/cap	0.91	2.68	1.78	0.25	0.31	0.13	3.70	2.80	1.27	1.33	000
57180		∢ •	Treat vaginal bleeding	1.58	1.83	2.09	0.91	1.17	0.19	3.60	3.86	2.68	2.94	010
57200		⋖	Repair of vagina	4.30	AN	NA NA	2.90	2.90	0.46	AN	AN	7.66	7.66	060

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

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CPT¹ HCPCS≥	Mod	Status	Description	Physician work RVUs ³	Fully im- plement- ed non- facility PE RVUs	Year 2007 transi- tional non-facil- ity PE RVUs	Fully implemented facility	Year 2007 transi- tional fa- cility PE RVUs	Mal-prac- tice RVUs	Fully implemented nonfacility	Year 2007 transi- tional non-facil- ity total	Fully implemented facility	Year 2007 transi- tional fa- cility total	Global
57210		۷.	Repair vagina/perineum	5.59	Y :	Y :	3.20	3.38	0.62	A :	A :	9.41	9.59	060
57220		∢ <	Revision of urethra	4.73	₹ \$ Z Z	Y Z	2.95	3.07	0.51	4 4 Z 2	¥ \$	8.19	8.31	060
57240		(∢	Repair bladder & vagina	11.38	ζ ∢ Ζ Ζ	Z Z	5.55	4.25	0.62	(¥	17.55	16.25	060
		4	Repair rectum & vagina	11.38	ΑN	ΥZ	4.82	3.89	0.65	AN	₹ Z	16.85	15.92	060
		⋖	Repair of vagina	14.32	Y Y	Ϋ́	5.82	5.09	0.97	A N	Y Z	21.11	20.38	060
57265		∢ •	Extensive repair of vagina	15.82	₹ Z	Υ S	6.29	6.11	1.32	Y ?	Υ ·	23.43	23.25	060
5/26/		∢ ⊲	Insert mesn/pelvic fir addon	4.88	₹ ₹	Z Z	1.50 9.05	08.1	0.04	4 4 2 2	¥ Z	7.02	12.38	777
57270		(∢	Repair of bowel pouch	13.53	(Z Z	5.60	4.10	1.42	ζ	Z Z	20.55	21.05	060
57280		< <	Suspension of vagina	16.58	Υ Z	Y Y	6.94	7.27	1.67	Y Y	¥ X	25.19	25.52	060
57282		⋖	Colpopexy, extraperitoneal	7.78	A N	ΥZ	4.35	4.47	1.02	A A	Y Y	13.15	13.27	060
57283		⋖ ·	Colpopexy, intraperitoneal	11.54	Ϋ́ Z	₹ Z	5.15	5.74	1.02	Y :	₹ Z	17.71	18.30	060
		∢ <	Repair paravaginal defect	13.43	Υ S	Z Z	6.69	7.04	1.41	Υ S	∀ \$ 2	21.53	21.88	060
57288		< ⊲	Renair bladder defect	2 1 1 1 1 1 1 1	ζ Δ Ζ Ζ	(d	0.34	0.73	1.12	ζ Δ Ζ Ζ	ζ Δ Ζ Ζ	22 19	0.00	060
57289		< ∢	Repair bladder & vagina	12.63	₹ Z	Z Z	6.19	6.09	1.21	Z Z	Z Z	20.03	19.93	060
		<	Construction of vagina	8.50	ΥZ	A Z	4.23	4.76	0.93	A N	A Z	13.66	14.19	060
		⋖	Construct vagina with graft	13.87	Ϋ́	Ϋ́Z	5.90	69.9	1.58	AN	₹ Z	21.35	22.14	060
		∢	Change vaginal graft	7.70	ΑN	ΥZ	3.65	4.24	0.91	N A	Y Y	12.26	12.85	060
27300		⋖ .	Repair rectum-vagina fistula	8.52	Y Y	∢ Z	4.40	4.32	0.87	Y Y	∢ Z	13.79	13.71	060
57305		∢ •	Repair rectum-vagina fistula	15.18	Ψ.	ΨZ:	6.11	6.24	1.72	Y :	Ψ:	23.01	23.14	060
57307		∢ <	Fistula repair & colostomy	16.96	Υ S	∀	6.77	6.95	2.01	Υ S	Υ S	25.74	25.92	060
57310		۲ ۵	Renair urethrovacinal lesion	7 51	ξ Δ Ζ Ζ	(d	4.70 10	5.02	0 	ζ Δ Ζ Ζ	ζ Δ Ζ Ζ	13.27	10.00	060
57311		< ∢	Repair urethrovaginal lesion	8.77	₹ Z	Z Z	5.22	4.40	0.65	Z Z		14.64	13.82	060
		< <	Repair bladder-vagina lesion	8.74	Ϋ́Z	Ϋ́Z	5.40	4.63	69.0	A N	₹ Z	14.83	14.06	060
57330		⋖	Repair bladder-vagina lesion	13.07	A N	ΥZ	7.29	6.11	1.06	AN	Y Y	21.42	20.24	060
57335		∢ •	Repair vagina	19.81	₹ Z	¥ ż	8.95	9.03	1.91	Y Z	¥ ż	30.67	30.75	060
5/400		∢ <	Dakic examination	2.27	NA NA	AN L	0.97	80.1	0.20	NA 232	AN 6	3.50	10.50 Cg C	000
		(⊲	Remove vacinal foreign body	2.73	es.	00. V	1.50	1 44	0.10	3.32 NA	97.5 AN	4 16	2.03 4 10	000
57420		< ∢	Exam of vagina w/scope	1.60	1.22	1.32	0.55	0.64	0.19	3.01	3.11	2.34	2.43	000
		4	Exam/biopsy of vag w/scope	2.20	1.58	1.78	0.71	06:0	0.27	4.05	4.25	3.18	3.37	000
57425		⋖	Laparoscopy, surg, colpopexy	16.89	Y Y	₹ Z	6.77	89.9	1.75	Y Y	∢ Z	25.41	25.32	060
5/452		∢ <	Exam of cervix w/scope	1.50	7.1	22.1	0.73	0.75	0.18	2.85	2.93	2.41	2.43	000
		∢ ⊲	Biopsy of cervix w/scope	2.33	1.30	00	0.94	01.10	0.20	0.00 0.00	4 c	0.50 0.80 0.80	0.7 0.7	88
57456		< ∢	Endocery curettage w/scope	1.85	44.	1.60	0.62	0.77	0.22	3.51	3.67	2.69	2.84	000
		⋖	Bx of cervix w/scope, leep	2.83	4.27	5.46	1.08	1.31	0.34	7.44	8.63	4.25	4.48	000
57461		⋖	Conz of cervix w/scope, leep	3.43	4.57	5.73	1.05	1.37	0.41	8.41	9.57	4.89	5.21	000
27500		⋖ .	Biopsy of cervix	1.20	2.00	2.41	0.64	0.63	0.12	3.32	3.73	1.96	1.95	000
57505		∢ <	Endocervical curettage	4.6	1.30	1.42	1.05	60.1	0.14	2.58	2.70	2.33	2.37	010
•		(⊲	Cryocalitery of cervix	06.1	. L	24.9	0.09 1.05	96.	0.23	9.42	3.02	3.02 3.38	9.13	010
57513		< ∢	Laser surgery of cervix	1.90	1.55	1.68	1.26	1.37	0.23	3.68	3.81	3.39	3.50	010
		∢	Conization of cervix	4.03	3.33	3.79	2.47	2.78	0.49	7.85	8.31	66.9	7.30	060
57522		⋖ .	Conization of cervix	3.60	2.74	3.06	2.23	2.40	0.41	6.75	7.07	6.24	6.41	060
57530		∢ •	Removal of cervix	5.15	Ϋ́ Z	Y :	3.06	3.31	0.58	Y :	Υ ·	8.79	9.04	060
5/531		∢ <	Removal of cervix, radical	79.71	₹ ₹ Z Z	Z Z	10.39	05.50	43.34	4 4 2 2	∀ Z	43.44	45.55	060
				2			2	2	2			2.53	2:01	8

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

ADL	LINDOM	ADDENDOM D RELATIVE	VALUE OINIIS (NVOS)	ובראובה	ZNICOLNII	ND DELATED INFORMATION OSED IN		י ההסוטפועו מעוועוועהם ופס	נְלֵלְוֹחְוּאוֹ עֵּ		0 - 0	/007	CONTINCED	ב
CPT 1 HCPCS 2	Мод	Status	Description	Physician work RVUs ³	Fully implemented non- facility PE RVUs	Year 2007 transi- tional non-facil- ity PE RVUs	Fully implemented facility	Year 2007 transi- tional fa- cility PE RVUs	Mal-prac- tice RVUs	Fully im- plement- ed non- facility total	Year 2007 transi- tional non-facil- ity total	Fully implemented facility	Year 2007 transi- tional fa- cility total	Global
57545 57550		۷ ح	Remove cervix/repair pelvisRemoval of residual cervix	13.96	₹ ₹ Z Z	4 4 Z Z	6.16	6.56	1.52	4 4 Z Z	∢ ∢ Z Z	21.64	22.04	060
57555		4 4	Remove cervix/repair vagina	9.80	Y Y	4 4 Z Z	4.71	5.00	1.09	4 4 Z Z	4 4 Z Z	15.60	15.89	060
		< -	Revision of cervix	4.16	¥.	¥:	3.16	3.12	0.41	¥ :	₹:	7.73	7.69	060
57800		∢ ∢	Revision of cervix	0.77	0.70	NA 0.75	2.86	3.05	0.49	NA 1.56	N 1-	1.27	8.03	060
		Α.	D & c of residual cervix	1.67	1.33	1.44	1.03	1.	0.20	3.20	3.31	2.90	2.98	010
58110		⋖ ⋖	Biopsy of uterus lining	1.53	0.39	1.27	0.57	0.68	0.18	2.83	2.98	2.28	2.39	000 ZZZ
		< •	Dilation and curettage	3.52	2.07	2.25	1.63	1.82	0.39	5.98	6.16	5.54	5.73	010
58145		∢ ∢	Myomectomy abdom method	8.77	¥ ¥ Z Z	₹ ₹ Z Z	4.18	6.87 4.65	0.97	Ψ Z Z Z	4 4 2 2	13.92	14.39	060
58146		۷.	Myomectomy abdom complex	20.20	Y :	Y :	7.16	8.56	2.32	A S	Z Z	29.68	31.08	060
58150		∢ ∢	Total hysterectomy	17.17	Z Z	4 4 2 2	6.42	7.23	1.84	Z Z	g g	25.43	33.55	060
		< <	Partial hysterectomy	16.46	N A	Y Y	6.22	7.16	1.64	N A	N A	24.32	25.26	060
58200		∢ <	Extensive hysterectomy	22.96	Y S	Y S	7.94	9.50	2.54	Y S	Y S	33.44	35.00	060
58240		< <	Extensive hysterectority	43.13	ξ ζ Z Z	ζ Z Z	15.63	17.15	4.22	X X	ξ Z Z	62.98	64.50	060
58260		∢.	Vaginal hysterectomy	13.98	Y :	Y :	5.69	6.46	1.57	Y :	Y :	21.24	22.01	060
58262		< <	Vag hyst including to	15.77	∀	Y Z	6.15	7.09	1.79	Z Z	Y Z	23.71	24.65	060
58267		< <	Vag Hyst Wurinary repair	18.17	Z Z	Z Z	6.88	8.01	2.06	Z Z	Z Z	27.11	28.24	060
58270		⋖	Vag hyst w/enterocele repair	15.16	Y Z	Y Y	5.84	6.77	1.73	Y Z	Y Z	22.73	23.66	060
58275		∢	Hysterectomy/revise vaginaHysterectomy/revise vagina	16.84	Z Z	Y Z	6.54	7.48	1.91	Z Z	Z Z	25.29	26.23 28.13	060
58285		< ∢	Extensive hysterectomy	23.26	Z Z	Z Z	7.73	9.41	2.70	Z Z	Z Z	33.69	35.37	060
58290		۷,	Vag hyst complex	20.13	¥:	Y S	7.24	8.67	2.29	Z S	Y S	29.66	31.09	060
58292		< <	Vag nyst incl vo, complex	23.21	X X	Z Z	8.13	9.00 4.00	2.52	X X	¥ ¥	34.01	35.78	060
		Α.	Vag hyst w/uro repair, compl	24.19	Y Z	₹ Z	8.32	10.09	2.78	Y Y	Y Z	35.29	37.06	060
58294		∢ 2	Vag hyst w/enterocele, compl	21.41	N N	A S	7.04	8.95	2.39	A N	NA P C	30.84	32.75	060
58301		z ∢	Remove intrauterine device	1.27	1.04	1.25	0.34	0.45	0.15	2.46	2.67	1.76	1.87	6
58321		∢ ·	Artificial insemination	0.92	0.96	1.10	0.24	0.34	0.10	1.98	2.12	1.26	1.36	000
58322		∢ ላ	Artificial insemination	1.10	1.03	1.16	0.30	0.39	0.13	2.26	2.39	1.53	1.62	000
		< ∢	Catheter for hysterography	0.88	2.17	2.92	0.57	0.63	0.09	3.14	3.89	1.54	1.60	000
58345		⋖・	Reopen fallopian tube	4.65	Υ 'n	Y :	2.06	2.35	0.41	Ψ.	Y Z	7.12	7.41	010
58350		∢ ∢	Insert heyman uteri capsule	44.7	132	1 45	88.0 98.0	3.79	0.56	NA 2 45	NA 258	85.1.	9/:11	090
		< <	Endometr ablate, thermal	3.55	22.89	32.54	1.68	1.97	0.43	26.87	36.52	5.66	5.95	010
58356		۷,	Endometrial cryoablation	6.36	43.33	57.04	1.80	2.48	0.82	50.51	64.22	8.38	99.6	010
58400		∢ ∢	Suspension of uterus	13.66	Z Z	ξ Z	3.80	3.91 6.29	0.75	Z Z	Ψ Ψ Z Z	70.02	21.68	060
		< ∢	Repair of ruptured uterus	13.34	Z Z	Z Y	5.35	5.88	1.47	A A	Z Y	20.16	20.69	060
58540		∢ •	Revision of uterus	15.57	₹ Z	Z Z	6.09	6.75	1.78	A S	¥:	23.44	24.10	060
58545		∢ ⊲	Laparoscopic myomectomy	15.65	Z Z	Y Z	5.88	6.87	1.77	Z Z	Y Z	23.30	24.29	060
58550			Laparo-asst vag hysterectomy	14.91	. ∢ Ζ Ζ	Z Z	6.05	7.00	1.72	. ∢ Ζ Ζ	Z Z	22.68	23.63	060
58552			Laparo-vag hyst incl t/o	16.23	AN	A A	6.33	7.61	1.72	N	N A	24.28	25.56	060
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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

700	יים ואוטטאוווטטער.		TIETATIVE VALUE (IIVOS) AND I	ורר רי)		,,,	;	##! ##! ##!)			נ
CPT ¹ HCPCS ²	Mod	Status	Description	Physician work RVUs ³	Fully im- plement- ed non- facility PE RVUs	Year 2007 transi- tronal non-facil- ity PE RVUs	Fully implemented facility	Year 2007 transi- tional fa- cility PE RVUs	Mal-practice RVUs	Fully implemented nonfacility total	Year 2007 transi- tional non-facil- ity total	Fully im- plement- ed facility total	Year 2007 transi- tional fa- cility total	Global
58553		∢ <	Laparo-vag hyst, complex	20.13	A S	Y S	7.04	8.47	2.30	A Z	A S	29.47	30.90	060
58555		(<	Hysteroscopy, dx. sep proc	3.33	1.88	2.12	1.22	1.47	0.40	5.61	5.85	4.95	5.20	000
		<	Hysteroscopy, biopsy	4.74	Ϋ́	A A	1.63	2.04	0.57	A	A A	6.94	7.35	000
58559		⋖	Hysteroscopy, Iysis	9.16	Ϋ́	Y Z	2.01	2.56	0.74	₹ Z	Y Z	8.91	9.46	000
58560		< <	Hysteroscopy, resect septum	6.90	Υ S	Υ S	2.24	2.88	0.84	Υ S	₹ ż	10.07	10.71	000
58562		۷ ۵	Hysteroscopy, remove myoma	99.30	4 4 2 2	A Z	3.07	2.99	12.1	Z Z	Y Z	7.56	8 .5 8 .3	000
		< <	Hysteroscopy, ablation	6.16	37.31	51.59	2.02	2.58	0.74	44.21	58.49	8.92	9.48	000
58565		⋖ ·	Hysteroscopy, sterilization	7.02	34.36	45.87	3.31	3.76	1.19	42.57	54.08	11.52	11.97	060
58600		< <	Division of fallopian tube	5.84	Υ S	Y S	2.82	3.22	0.66	Y S	Z Z	9.35	9.72	060
58611		۷ ۷	Ligate oviduat(s) add-on	1.45	ζ	Y Y	7.07	0.53	0.29	Z Z	ξ		2 .02	727
		. ≺	Occlude fallopian tube(s)	3.89	Ϋ́Z	A A	1.95	2.52	0.47	¥ Z	N A	6.31	6.88	010
58660		⋖	Laparoscopy, lysis	11.52	Y Y	AN AN	4.34	5.04	1.40	Y Z	A V	17.26	17.96	060
		< <	Laparoscopy, remove adnexa	11.28	Υ S	¥ ž	3.93	4.83	46.1	∢	Y S	16.55	17.45	010
58602		< <	Laparoscopy, excise lesions	20.2	₹ ₹	¥ 4 Z Z	19.4	2.50	1.43	₹ ₹	¥	80.8	8.98	060
58671		< <	Laparoscopy, tubal block	5.84	₹ ₹ 2 Z	¥ ≥	2.80	3.16	0.68	(ζ <u> </u>	9.32	9.68	060
		<	Laparoscopy, fimbrioplasty	12.86	Ϋ́	Y Z	4.69	5.82	1.60	Ϋ́Z	ΥZ	19.15	20.28	060
58673		⋖	Laparoscopy, salpingostomy	13.97	₹ Z	Y V	5.12	6.22	1.69	₹ Z	Y V	20.78	21.88	060
58700		∢ •	Removal of fallopian tube	12.80	¥ :	Υ :	5.45	5.86	1.51	Y :	¥:	19.76	20.17	060
58720		∢ <	Hemoval of ovary/tube(s)	12.04	4	Ψ < Z Z	5.01	5.60	1.39	₹ < Z Z	Υ S	18.44	19.03	060
58750		< <	Repair oviduct	15.52	₹ ₹ 2 Z	Z Z	5.97	7.03	1.84	(ζ <u> </u>	23.33	24.39	060
58752		4	Revise ovarian tube(s)	15.52	AN	A A	5.93	02.9	1.80	ΥZ	N	23.25	24.02	060
58760		∢ •	Remove tubal obstruction	13.81	Ϋ́ Ξ	¥ :	5.51	6.43	1.79	₹ Z	Y :	21.11	22.03	060
58770		∢ <	Create new tubal opening	14.65	NA 201	NA RR	5.66	6.61	1.73	NA 17	Δ V Q V	22.04	22.99	060
58805		< <	Drainage of ovarian cyst(s)	6.30	t AN	Z Z	3.50	3.51	69.0	Z	Y Z	10.49	10.50	060
		4	Drain ovary abscess, open	4.58	AN	N A	2.82	3.18	0.52	₹ Z	N	7.92	8.28	060
58822		⋖	Drain ovary abscess, percut	11.67	Ϋ́	Y Y	5.20	5.25	1.16	Y Z	Y Y	18.03	18.05	060
58823		< <	Drain pelvic abscess, percut	3.37	20.91	21.26	41.1	1.13	0.24	24.52	24.87	4.75	4.74	000
58900		۷ ۷	Iransposition, ovary(s)	6.47	ζ	Y Y	3.48	3.56	25	Z Z	ξ	10.64	10.72	060
•		. ≺	Partial removal of ovary(s)	11.83	Ϋ́	A Z	5.15	5.48	1.43	A Z	A Z	18.41	18.74	060
58925		⋖ -	Removal of ovarian cyst(s)	12.29	Y Z	Y :	5.20	5.58	1.41	Y :	Y S	18.90	19.28	060
58940		∢ •	Removal of ovary(s)	80.8	Υ ?	Υ :	11.4	4.11	0.91	Υ S	Υ ?	13.10	13.10	060
58943		∢ ⊲	Removal of ovarian malignancy	26.38	₹	∀	7.12	8.78	2 22	₹ 4 Z Z	Z Z	28.72	29.88	060
58951		< <	Resect ovarian malignancy	24.11	ζ ∢ Ζ Ζ	Z Z	8.42	96.6	2.63	 {	Z Z	35.16	36.70	060
		<		27.09	Ϋ́Z	Y Z	9.57	11.23	3.02	Ą Z	₹ Z	39.68	41.34	060
58953		4	Tah, rad dissect for debulk	33.91	Y Y	Y Y	11.33	13.77	3.83	Y Z	Y Y	49.07	51.51	060
58954		< <	Tah rad debulk/lymph remove	36.91	₹ Ş	¥ ž	12.15	14.85	4.17	∀ \$ 2 2	Z Z	53.23	55.93	060
58960		۲ ۷	Exploration of abdomen	15.64	Z Z	Z Z	6.30	20.0	1 79	ζ	ξ	73.62 73.62	24.51	060
		∶∢	Retrieval of oocyte	3.52	1.79	2.19	1.23	1.43	0.43	5.74	6.14	5.18	5.38	000
58976		∢ .	Transfer of embryo	3.82	1.92	2.50	1.18	1.67	0.47	6.21	6.79	5.47	5.96	000
59000		< <	Amniocentesis, diagnostic	1.30	1.73	1.99	0.54	0.64	0.31	3.34	3.60	2.15	2.25	000
59012		∢ ∢	Amniocentesis, therapeutic	3.44	Σ Z	 ζ Ζ Ζ Ζ	5 L .	- 1 2 4.	0.82	 {	ξ ζ Ζ Ζ	5.39	5.70	300
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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

7	ביים וייסטויים סטק		HEEATIVE VALUE (1140) AIND	ורוא רוא			֓֝֝֝֜֜֝֝֡֜֝֝֝֝֓֓֓֓֜֝֝֡֜֝֝֡֓֜֝֜֝֡֓֜֝֝֡֜֜֝֝֡֓֜֝֡֜֜֝֝֡֜֜֝֜֜֝֡֡֜֝֡֜֜֝֡֜		יייי אייי	ייייור - או		7007		נ
CPT 1 HCPCS ²	Мод	Status	Description	Physician work RVUs ³	Fully im- plement- ed non- facility PE RVUs	Year 2007 transi- tional non-facil- ity PE RVUs	Fully implemented facility	Year 2007 transi- tional fa- cility PE RVUs	Mal-prac- tice RVUs	Fully im- plement- ed non- facility total	Year 2007 transi- tional non-facil- ity total	Fully implemented facility total	Year 2007 transi- tional fa- cility total	Global
59015		۷ ۷	Chorion biopsyFetal contract stress test	2.20	1.41	1.52	0.79 AN	0.98 NA	0.52	4.13	4.24	3.51 NA	3.70 NA	000
	26	< <		0.66	0.18	0.24	0.18	0.24	0.16	1.00	1.06	1.00	1.06	000
59020	10 	∢ <	Fetal contract stress test	0.00	0.89	0.61	¥ ž	¥ S	0.10	0.99	0.71	Z Z	¥ ž	000
59025	96	∢ ⊲	Fetal non-stress test	0.53	0.62	0.49	A C	A C	0.0	08.0) . 0 85	A C	NA 85	000
59025	22	(∢	Fetal non-stress test	0.00	0.48	0.29	± Z	2 8	0.02	0.50	0.31	8.8 X	S Z	000
59030		. ∢	Fetal scalp blood sample	1.99	A Z	N A	0.54	0.71	0.47	N A	N A	3.00	3.17	000
59050		⋖	Fetal monitor w/report	0.89	Y Y	ΑN	0.26	0.33	0.21	N A	AN.	1.36	1.43	×
		< <	Fetal monitor/interpret only	0.74	Z Z	NA V	0.20	0.27	0.17	A S	Z S	1.1	1.18	X
59072		۷ ۷	Transabdom aminiomius W/us	9.28	04.4 O A N	78.4 AN	7	3 0.5	0.28	9.8 V N	9.5 Q A N	11 95	12.20	000
59074		< ∢	Fetal fluid drainage w/us	5.24	3.84	4.40	1.66	2.16	0.28	9.36	9.92	7.18	7.68	000
92069		⋖	Fetal shunt placement, w/us	8.99	A N	NA	2.34	2.93	0.16	A N	ΥZ	11.49	12.08	000
59100		∢ ·	Remove uterus lesion	13.22	ΨZ:	¥:	5.68	6.27	2.94	Z :	Y :	21.84	22.43	060
59120		∢ <	Treat ectopic pregnancy	12.52	Y S	Υ Z	5.34 8.03	6.03	2.72	Y Z	Y Z	20.58	21.27	060
		(∢	Treat ectopic pregnancy	14.94	ζ	Z Z	5.99	27.00	9.79	ζ	(4 2 Z	24.31	23.42	060
59135		< ∢	Treat ectopic pregnancy	14.78	 {	Z Z	4.98	9.9	3.30	Z Z	Z Z	23.06	24.76	060
		4	Treat ectopic pregnancy	14.11	A N	NA	5.62	6.37	3.13	Ϋ́	Ϋ́Z	22.86	23.61	060
59140		۷.	Treat ectopic pregnancy	5.82	1.31	1.99	2.85	2.38	1.29	8.42	9.10	96.6	9.49	060
59150		∢ <	Treat ectopic pregnancy	12.15	Υ S	Ψ Υ	5.00	5.76	2.78	Υ S	Y S	19.93	20.69	060
59151		∢ ⊲	Treat ectopic pregnancy	9.11	1 07	NA 700	4.89	2.78	2.73	NA 30	NA 832	8.58 7.51	20.48	030
59200		(∢	Insert cervical dilator	0.79	0.93	1.13	0.22	0.28	0.19	1.91	2.11	1.20	1.26	000
		⋖	Episiotomy or vaginal repair	2.41	2.19	2.18	1.01	0.97	0.57	5.17	5.16	3.99	3.95	000
59320		∢.	Revision of cervix	2.48	ΥZ:	¥:	0.99	1.18	0.59	₹ Z	Y :	4.06	4.25	000
59325		∢ <	Revision of cervix	4.06	Y S	Y S	1.20	1.73	0.88	Y S	Y S	6.14	6.67	000
59400		(∢	Obstetrical care	26.52	 Σ Ζ	Z Z	14.06	15.04	5.48	Z Z	Z Z	46.06	47.04	MMM
		< <		13.48	A Z	N A	3.64	4.90	3.21	N A	N	20.33	21.59	MMM
59410		⋖	Obstetrical care	15.25	A N	A	4.83	5.95	3.51	A N	Ϋ́	23.59	24.71	MMM
59412		∢ •	Antepartum manipulation	1.7	Ψ.	¥ :	0.63	0.77	0.40	Υ :	Y :	2.74	2.88	MMM
59414		∢ ⊲	Deliver placenta	1.61	A 7 4	4 20	0.43	0.59	1 14	11 44	11 46	2.42	82.5	
59426		∶∢	Antepartum care only	10.84	7.68	7.59	2.88	3.14	1.97	20.49	20.40	15.69	15.95	MMM
59430		⋖	Care after delivery	2.13	1.02	1.18	0.64	0.87	0.50	3.65	3.81	3.27	3.50	MMM
59510		∢ ·	Cesarean delivery	30.04	Ψ.	Y :	15.69	16.91	6.23	Ψ.	Y :	51.96	53.18	MMM
59514		∢ <	Cesarean delivery only	15.95	▼	Y Z	4.36	5.76	3.79	Y Z	Y Z	24.10	25.50	MMM
59525		(∢	Remove uterus after cesarean	8.53	 Σ Ζ	Z Z	2.32	3.06	1.94	Z Z	(<u> </u>	12.79	13.53	ZZZ
		. ⋖	Vbac delivery	27.95	¥ Z	ΥZ	14.30	15.51	5.85	Z Z	Z Z	48.10	49.31	MMM
59612		⋖	Vbac delivery only	15.04	A N	NA	4.14	5.59	3.58	A N	ΥZ	22.76	24.21	MMM
59614		۷٠	Vbac care after delivery	16.57	Υ :	¥:	5.03	6.47	3.88	Z :	Y :	25.48	26.92	MM
59618		∢ <	Attempted vbac delivery	31.48	¥ S	A Z	16.02 4 65	17.72	6.59	Z Z	¥ S	54.09	55.79	
59622		< <	Attempted vbac after care	19.64	Z Z	Z Z	6.50	8.12	4.49	Z Z	Z Z	30.63	32.25	WWW
		⋖	Treatment of miscarriage	4.37	A N	N A	2.32	2.49	0.95	N	A A	7.64	7.81	060
59820		۷.	Care of miscarriage	4.64	4.03	4.33	3.43	3.54	0.95	9.62	9.92	9.05	9.13	060
59821		∢ ⊲	Treatment of miscarriage	4.94 6.47	3.78 NA	4.16 NA	3.12	8. 8. 4. 8.	90.1	9.78 NA	10.16 NA	9.12	9.34	060
	-	<u>.</u>		;			- C					-	-	3

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

7		i)	: ! !		1)))	j
CPT 1 HCPCS 2	Mod	Status	Description	Physician work RVUs ³	Fully implemented non-facility PE	Year 2007 transi- tronal non-facil- ity PE RVUs	Fully implemented facility	Year 2007 transi- tional fa- cility PE RVUs	Mal-prac- tice RVUs	Fully im- plement- ed non- facility total	Year 2007 transi- tional non-facil- ity total	Fully implemented facility	Year 2007 transi- tional fa- cility total	Global
59840		œ a	Abortion	3.01	N S	N S	1.77	2.04	0.71	N P	NA OSO	5.49	5.76	010
59850		<u> </u>	Abortion	5:90	- X	, Z	2.61	3.10	1.28	- 8N	NA NA	9.79	10.28	060
		ш		26.95	A N	N A	3.26	3.63	1.28	A A	A A	10.46	10.83	060
59852		<u>د</u> ا	Abortion	8.23	¥ :	Y :	3.68	4.71	1.80	Y :	¥:	13.71	14.74	060
59855		<u>~</u> c		6.36	₹ Ş	Υ S	2.89	3.39	1.45	Υ S	Υ S	10.70	11.20	060
59857		במב	Abortion	9.78	4 4 2 Z	Z Z	9.7	60.4 00.5	2.70	Y Y	¥ ¥	14.40	15.50	060
		: œ	Abortion (mpr)	3.99	Z Z	Z Z	1.22	1.73	0.87	Z Z	Z Z	6.08	6.59	000
59870		⋖	Evacuate mole of uterus	6.32	A N	N	4.08	4.39	1.42	A N	N A	11.82	12.13	060
59871		< <	Remove cerclage suture	2.13	1.12	1.59	0.92	7.08	0.50	3.75	4.22	3.55	3.71	000
60000		∢ ⊲	Drain triyrold/tongue cyst Asnirate/inject thyriod cyst	0.10	2.03	5. to	00 00 00	0.70	0.0	3.00	2.87	1.33	13.0	
_		< ∢	Biopsy of thyroid	1.56	1.33	1.38	0.50	0.52	0.10	2.99	3.04	2.16	2.18	000
		⋖	Remove thyroid lesion	9.84	AN AN	N	5.13	2.78	1.01	A N	N A	15.98	16.63	060
60210		∢ •	Partial thyroid excision	11.11	₹ Z	Y S	4.96	5.48	1.23	Υ ?	¥ :	17.30	17.82	060
60212		∢ <	Partial tnyroid excision	10.20	₹ <u>₹</u>	₹ <u>₹</u>	0.45 0.00	7.38	40.	₹ < Z Z	¥ \$	24.65	25.58	060
		۲ ۵	Partial removal of thyroid	14.59	₹ 4 2 Z	ξ Δ Ζ	0.70 7.75	2.94	1.32	ξ Z	ζ Δ Ζ Ζ	10.03	19.51	060
60240		< ∢	Removal of thyroid	16.16	Z Z	Z Z	6.04	7.21	1.85	A Z	Z Z	24.05	25.22	060
		∢	Removal of thyroid	21.82	Ϋ́	AN	8.23	9.62	2.29	AN	A A	32.34	33.76	060
60254		∢	Extensive thyroid surgery	28.23	Ϋ́	Y Y	10.07	13.15	2.60	Y Y	Y Y	40.90	43.98	060
60260		∢ ·	Repeat thyroid surgery	18.14	₹ :	Y :	6.84	8.21	1.93	Y :	Y :	26.91	28.28	060
60270		∢ <	Removal of thyroid	23.01	₹ Ş	Y Z	8.81	10.06	2.32	Y Z	Y Z	34.14	35.39	060
60280		(∢	Remove thyroid duct lesion	25.98	(ζ	2.03	4.51	0.54	ζ 4 Ζ Ζ	ζ	10.53	11.03	060
		< <	Remove thyroid duct lesion	8.64	Ą Z	Z	4.65	5.55	0.73	Z Z	A A	14.02	14.92	060
		⋖	Explore parathyroid glands	16.63	Y Y	N A	6.64	7.23	2.00	A N	N A	25.27	25.86	060
60502		< <	Re-explore parathyroids	20.92	₹ Z	Z Z	8.34	9.12	2.53	Υ Ś	Y S	31.79	32.57	060
60505		∢ ⊲	Explore paratriyrold glands	4 44	₹ 4 Z Z	Ψ Δ Ζ Ζ	9. t	10.50	2.04 4.04	4 Z	¥ 2	34.38 6.13	35.95 6.47	080
60520		< ∢	Removal of thymus gland	17.03	₹ Z	Z Z	06.9	7.96	2.19	Z Z	Z Z	26.12	27.18	060
		⋖	Removal of thymus gland	19.09	A'N	N	8.37	9.27	2.81	AN	A A	30.27	31.17	060
60522		∢ <	Removal of thymus gland	23.31	Z Z	Z Z	9.87	10.94	3.26	Y S	¥ S	36.44	37.51	060
60545		(∢	Explore adrenal gland	20.75	(4 2 Z	ζ	8.93	8.65	2.07	ζ ζ Ζ	ζ	31.75	31.47	060
		<	Remove carotid body lesion	24.95	₹ Z	N A	9.76	10.68	2.19	A N	N A	36.90	37.82	060
60605		⋖ ·	Remove carotid body lesion	31.82	₹ Z	Y :	13.01	12.47	2.49	Ϋ́	Y S	47.32	46.78	060
60650		⋖ <	Laparoscopy adrenalectomy	20.59	∀	Y Z	8.15	8.04	2.28	Y S	Y S	31.02	30.91	060
		(∢	Remove cranial cavity liuid	1 49	ζ ζ Ζ	ζ <u> </u>	25. 1	1.10	2.0	ζ	ξ	2.85	2.75	888
61020		< ∢	Remove brain cavity fluid	1.51	Υ Z	Z Z	1.54	1.39	0.34	Y Z	Z Z	3.39	3.24	000
		⋖	Injection into brain canal	1.69	A'N	AN	1.48	1.41	0.33	AN	A N	3.50	3.43	000
61050		∢.	Remove brain canal fluid	1.51	₹ Z	ΥZ:	1.16	1.24	0.11	Y :	Y Z	2.78	2.86	000
61055			Injection into brain canal	2.10	₹ Ş	Y Z	1.34	1.40	0.17	Υ S	Y S	3.61	3.67	000
61105			Twist drill hole	5.38	ζ ∢ Ζ Ζ	Z Z	4.77	4.15	1.32	Z Z	Z Z	11.47	10.85	060
			Drill skull for implantation	4.99	₹ Z	N	1.79	2.35	1.29	A N	A A	8.07	8.63	000
61108		⋖	Drill skull for drainage	11.45	₹ Z	Y Y	8.21	7.42	2.63	Y Z	Y Y	22.29	21.50	060
61120			Burr hole for puncture	9.48	Z Z	Z Z	6.51	6.14	2.09	Y S	Y S	18.08	17.71	060
0+1140		-1	Tierce skull for blobsy	t0. /	<u> </u>	۲ ۲ ۲	-	9.30	1	<u> </u>	1	31.20	01.11	080

ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

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CPT 1 HCPCS ²	Mod	Status	Description	Physician work RVUs ³	Fully implemented non-facility PE	Year 2007 transi- tronal non-facil- ity PE RVUs	Fully implemented facility	Year 2007 transi- tional fa- cility PE RVUs	Mal-prac- tice RVUs	Fully implemented nonfacility total	Year 2007 transi- tional non-facil- ity total	Fully implemented facility	Year 2007 transi- tional fa- cility total	Global
61150 61151		۷ ۷	Pierce skull for drainage	18.76 13.37	Z Z	Z Z	10.49	10.42	4.31	A A	Y Y	33.56	33.49	060
61154		∢ ⊲	Pierce skull & remove clot	16.86	A Z	A Z	10.07	9.65	4.20	Y Z	Z Z	31.13	30.71	060
61210		< <	Pierce skull, implant device	5.83	Z Z	Z Z	2.11	2.72	1.50	Z Z	Z Z	9.44	10.05	000
61215		۷,	Insert brain-fluid device	5.73	Y S	Y S	5.30	4.33	1.26	Z Z	Z Z	12.29	11.32	060
61253		∢ ∢	Pierce skull & explore Pierce skull & explore	13.37	¥ Z	¥ ¥	7.59	6.99	2.61	ξ Z	ξ ς Z Z	23.57	23.68	060
		۷٠	Open skull for exploration	23.27	A :	Y.	12.24	12.71	5.61	Y Z	Z.	41.12	41.59	060
61312		∢ ∢	Open skull for drainage	30.03	Y Z	Z Z	16.63	15.17	6.34	ΖΖ Ζ	∢ ∢ Z Z	49.14 53.00	51.84	060 060
61313		Α.	Open skull for drainage	27.88	N A	Z Z	15.03	14.89	6.43	N A	Z	49.34	49.20	060
61314		< ∢	Open skull for drainage	25.71	A Z	A A	13.81	13.26	6.26	Z Z	Z Z	45.78	45.23 52.42	060
		< ∢	Implt cran bone flap to abdo	1.39	A A	Y Y	0.51	0.58	0.35	A A	Y Y	2.25	2.32	ZZZ
61320		∢ <	Open skull for drainage	27.28	Y S	₹ Z	13.87	14.56	6.60	Y Z	Y S	47.75	48.44	060
61322		τ «	Open skull for draftiage	34.00	Z Z	Z Z	17.25	16.10	7.61	Z Z	X Z	58.86	57.71	060
		V	Decompressive lobectomy	34.87	NA	A A	16.53	16.23	8.01	NA	N A	59.41	59.11	060
61330		∢ ◊	Decompress eye socket	25.11	A Z	A Z	11.52	13.20	2.31	Z Z	Y Z	38.94	40.62	060
61333		< <	Explore orbit/remove lesion	29.13	Z Z	Z Z	12.91	14.94	3.91	Z Z	Z Z	45.95	47.98	060
		۷.	Explore orbit/remove object	19.46	Y :	¥ :	8.87	10.21	1.74	A :	¥ :	30.07	31.41	060
61340		∢	Subtemporal decompression	19.97	Y Z	A Z	11.06	11.13	4.83 7.63	A N	Y Z	35.86	35.93	060
61345		< ∢	Relieve cranial pressure	29.04	A Z	Z Z	14.59	15.22	7.02	Z Z	¥ Z	50.65	51.28	060
61440		∢ ·	Incise skull for surgery	28.47	₹ Z	A :	13.33	14.01	6.88	A :	Y :	48.68	49.36	060
61450		< ∢	Incise skull for surgery	27.55	A Z	A A	12.17	13.78	5.77	Z Z	Z Z	45.49	47.10 50.92	060
:		. ≺	Incise skull for surgery	30.05	NA	A A	14.50	15.97	6.02	N A	Y Y	50.57	52.04	060
61470		∢ <	Incise skull for surgery	27.48	Y S	₹ Z	12.55	13.56	5.88	Y Z	Y S	45.91	46.92	060
61490		< <	Incise skull for surgery	27.08	ζ	Y Y	13.14	14.06	06.9	X X	¥	42.50	48.04	060
		Α.	Removal of skull lesion	18.99	N A	Z Z	10.15	10.66	4.10	N A	Z	33.24	33.75	060
61501			Remove infected skull bone	16.16 30.55	Y Z	A Z	9.12	9.20	3.21	Z Z	Z Z	28.49	28.57	060
61512			Remove brain lining lesion	36.93	Z Z	Z Z	17.81	19.25	9.02	Z Z	Z Z	63.79	65.23	060
61514		⋖	Removal of brain abscess	27.04	Υ Υ	A A	13.90	14.33	6.52	Ϋ́	A A	47.46	47.89	060
61516		∢ <	Removal of brain lesion	26.39	₹ S	Z Z	13.67	14.14	6.33	Z Z	¥ S	46.39	46.86	090
61518		(<	Removal of brain lesion	39.61	ζ ∢ Z Z	Z Z	19.64	20.77	9.62	Z Z	ΣŽ	68.87	70.00	060
		¥	Remove brain lining lesion	43.22	NA	N A	19.98	22.03	10.60	NA	N A	73.80	75.85	060
61520		∢ <	Removal of brain lesion	56.81	Y S	Υ S	24.67	28.98	11.18	Y Z	Y S	92.66	96.97	060
61522		(∢	Removal of brain abscess	31.35	Ç ∢ Z Z	Z Z	14.89	16.07	7.60	Z Z	Z Z	53.84	55.02	060
		Α.	Removal of brain lesion	29.70	NA	A A	15.09	15.56	7.14	N A	Ϋ́	51.93	52.40	060
61526			Removal of brain lesion	53.84	Ϋ́ Z	¥:	20.86	27.39	7.05	ΨZ	¥:	81.75	88.28	060
61530		∢ ⊲	Removal of brain lesion	16.24	A Z	A Z	97.6	23.23	6.13	A Z	Z Z	69.07 29.81	74.73	060
61533		< <	Implant brain electrodes	21.32	Υ Z	Z Z	11.23	11.48	5.10	Υ Z	¥ Z	37.65	37.90	060
61534		4	Removal of brain lesion	22.82	NA	AN	12.62	12.25	5.45	A	N A	40.86	40.49	060
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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

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CPT 1 HGPCS 2	Mod	Status	Description	Physician work RVUs ³	Fully implemented non-facility PERVUS	Year 2007 transi- tional non-facil- ity PE RVUs	Fully implemented facility	Year 2007 transi- tional fa- cility PE RVUs	Mal-prac- tice RVUs	Fully implemented non- facility total	Year 2007 transi- tional non-facil- ity total	Fully im- plement- ed facility total	Year 2007 transi- tional fa- cility total	Global
61535		∢ .	Remove brain electrodes	13.01	Y Z	Ϋ́	8.47	7.70	3.01	Y S	Y Y	24.49	23.72	060
61536		⋖ <		37.53	₹ \$	Y S	17.70	19.31	9.18	Y S	¥ S	64.41	66.02	060
61538		< <	Removal of brain tissue	39.31	₹ ₹ Z Z	ξ	18.75	16.20	6.92	Z Z	Z Z	64.98	50.74	060
		< <	Removal of brain tissue	34.09	A N	ΥZ	14.79	17.06	8.30	Z Z	Ą Z	57.18	59.45	060
61540		⋖		31.24	AN A	A N	15.44	16.83	8.30	A A	A A	54.98	56.37	060
61541		∢ •	Incision of brain tissue	30.75	Ϋ́ Z	¥:	15.41	16.04	6.58	Υ :	¥:	52.74	53.37	060
61542		∢ <	Removal of brain tissue	32.97	₹ Ş	Ψ < Z Z	16.18	17.45	8.01	Υ <u>Υ</u>	₹ Ş	57.16	58.43	060
61544		< <	Remove & treat brain lesion	27.12	₹ ₹ Z Z	K K	13.75	13.83	7.04	Z Z	Z Z	46.92	94.09	060
		< <	Excision of brain tumor	46.15	₹ Z	A A	21.88	23.68	10.60	Υ V	N A	78.63	80.43	060
		⋖ -	Removal of pituitary gland	33.25	₹ Z	∢ Z	15.92	17.14	7.65	Y Z	₹ Z	26.85	58.04	060
61548		∢ <	Removal of pituitary gland	23.23	₹ Z	Ψ ξ 2	10.87	12.33	3.42	Υ S	Υ S	37.52	38.98	060
61552		(⊲	Release of skull seams	20.30	ζ	(d	3.01 6.42	9.12	1.06	ζ Δ Ζ Ζ	ζ Δ Ζ Ζ	97.69	20.73	060
61556		< <	Incise skull/sutures	23.96	₹ Z	₹ 2 2	12.20	11.59	4.64	Z Z	Z Z	40.80	40.19	060
61557		∶∢	Incise skull/sutures	23.10	Ž Ž	ΥZ	13.12	13.53	5.78	A Z	Ϋ́	42.00	42.41	060
		⋖	Excision of skull/sutures	26.29	AN	ΥZ	7.91	12.65	1.36	A N	A N	35.56	40.30	060
61559		⋖	Excision of skull/sutures	33.74	AN AN	A A	18.22	19.08	8.48	A N	A A	60.44	61.30	060
61563		⋖	Excision of skull tumor	28.31	₹ Z	₹ Z	13.71	14.89	5.15	Ϋ́	Y Z	47.17	48.35	060
61564		∢ •	Excision of skull tumor	34.53	ΨZ:	Υ ·	15.61	17.65	8.75	Υ ?	Υ :	58.89	60.93	060
61566		∢ <	Removal of brain tissue	32.26	Ψ	Ψ 4 2 2	16.15	17.40	6.92	Υ <u>Υ</u>	¥ Ş	55.33	56.58	060
		< ⊲	Remove foreign body brain	26.70	₹ 4 2 2	(d	13.55	13.85	0.3Z	ξ Δ Ζ Ζ	ζ Δ Ζ Ζ	20.00	46.03	060
61571		< <	Incise skull for brain wound	28.23	₹ Z	₹ 2 2	14.54	15.02	6.77	₹ Z	₹ Z	49.54	50.02	060
		⋖	Skull base/brainstem surgery	36.37	A N	AN	14.97	18.51	5.35	Ϋ́Z	N	26.66	60.20	060
61576		⋖	Skull base/brainstem surgery	55.03	₹ Z	ΥZ	25.34	32.46	5.56	Y Y	Y Y	85.93	93.05	060
61580		< <	Craniofacial approach, skull	34.26	₹ Z	¥ ž	20.27	24.31	3.36	Y Z	Y Z	57.89	61.93	060
		(⊲		34.83	ζ	(d	30 11	28.06	0.30	ζ Δ Ζ Ζ	ζ Δ Ζ Ζ	70 13	70.08	060
61583		< <	Oraniofacial approach, skull	38.37	₹ Z	Z Z	25.25	25.20	9.18	Z Z	Z Z	72.80	72.75	060
		⋖	Orbitocranial approach/skull	37.57	A N	ΥZ	24.96	24.68	8.16	AN	A N	70.69	70.41	060
61585		⋖	Orbitocranial approach/skull	42.40	₹ Y	Y Z	24.18	25.97	7.01	Y Y	A A	73.59	75.38	060
61586		∢ <	Resect nasopharynx, skull	27.20	₹ Ş	Z Z	23.74	22:92	4.36	▼	¥ S	55.30	54.48	060
61591		< ⊲	Infratemporal approach/skull	46.79	₹ 4 2 2	ζ 4 Ζ Ζ	23.24	22: /2	0.23 6.43	¥ 2 Z	₹ 4 2 2	75.69	80.47	060
		< <	Orbitocranial approach/skull	42.94	A N	ΥZ	26.82	26.64	10.04	A Z	Υ V	79.80	79.62	060
61595		⋖	Transtemporal approach/skull	33.49	A N	A A	18.82	21.51	3.97	A N	Ą V	56.28	58.97	060
61596		∢ ·	Transcochlear approach/skull	39.25	₹ :	¥:	18.02	22.89	3.39	₹ Z	Y :	99.09	65.53	060
61597		< <	Transcondylar approach/skull	40.67 36.35	₹ ₹	4 4 2 2	22.37	22.89	8.81	₹ ₹	¥	71.85	72.37	060
61600		< ⋖	Resect/excise cranial lesion	29.29	ξ 4 Ζ Ζ	(4 2 Z	17.83	19.33	3.78	ζ ζ Ζ	ζ ζ Ζ	51.37	52.87	060
		< <	Resect/excise cranial lesion	31.00	A N	ΥZ	21.93	20.90	6.61	A Z	Υ Z	59.54	58.51	060
		⋖	Resect/excise cranial lesion	32.32	A N	ΥZ	17.26	20.83	2.85	AN	A N	52.43	26.00	060
61606		⋖	Resect/excise cranial lesion	41.88	Υ Υ	ΥZ	23.64	24.83	8.94	Y Y	Y Y	74.46	75.65	060
61607		∢ <	Resect/excise cranial lesion	40.76	₹ Z	Y S	20.04	22.90	0.88	Υ S	Y S	67.68	70.54	060
61608		∢ <	Hesect/excise cranial lesion	45.03 88.00	₹ <u>₹</u> ₹	Į Z	77.07	44.07	10.72 0.55	₹ < 2 Z	¥ 4	Ø80	82.35 16.08	080
61610		< <	Transect artery, sinus	29.63	Z Z	₹ ₹ 2 Z	10.81	12.59	7.66	ζ <u> </u>	ζ <u> </u>	48.10	49.88	777
61611		∶ ∢	Transect artery, sinus	7.41	AN A	N A	2.70	3.55	1.88	ΑN	Z	11.99	12.84	222
61612		⋖	Transect artery, sinus	27.84	NA	AN	7.90	11.99	4.30	AN	AN	40.04	44.13	ZZZ
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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

ו נייני	֡֝֝֝֜֝֜֝֝֓֜֝֝֝֓֓֓֓֝֝֡֓֓֓֓֓֓֓֓֓֓֡֓֜֝֓֓֓֓֓֡֓֜֜֜֓֡֓֜֓֜֓֡֓֜֜֜֡֓֡֓֜֜֜֡֓֡֓֜֜֡֓֜֜		ADDENDON D. TIEEATIVE VALOE ONLY (1100) AND I			000	j -	· · · · · · · · · · · · · · · · · · ·			-)	2		j
CPT 1 HCPCS 2	Mod	Status	Description	Physician work RVUs ³	Fully im- plement- ed non- facility PE RVUs	Year 2007 transi- tional non-facil- ity PE RVUs	Fully implemented facility	Year 2007 transi- tional fa- cility PE RVUs	Mal-prac- tice RVUs	Fully im- plement- ed non- facility total	Year 2007 transi- tional non-facil- ity total	Fully implemented facility	Year 2007 transi- tional fa- cility total	Global
61613		∢ ∢	Remove aneurysm, sinus Resect/excise lesion_skull	44.88	4 4 Z Z	ZZ	26.76	26.45	8.42	4 4 Z Z	4 4 Z Z	80.06	79.75	060
		. ∢	Resect/excise lesion, skull	46.54	Z Z	N A	25.81	28.00	8.24	A A	Z	80.59	82.78	060
61618		∢ <		18.52	¥ ₹	Y S	9.63	10.26	3.71	Y S	¥ ž	31.86	32.49	060
61623		< <	Findovasc tempory vessel occl	9.95	Υ	ζ <u> </u>	3.63	3.98	1.05	X X	ξ	14.63	14.98	000
		< ∢	Transcath occlusion, cns	20.12	¥ Z	Z Z	7.25	7.00	1.95	¥ Z	Z Z	29.32	29.07	000
		∢:	Transcath occlusion, non-cns	16.60	¥ :	Y :	5.93	5.63	1.24	A :	Z :	23.77	23.47	000
61630		zz	Intracranial angioplasty	22.03 24.24	A A	Ψ Ψ Z Z	08.90 08.90	10.97	2.03	A A	A A	33.24	38.33	060
61680		۷.	Intracranial vessel surgery	32.34	¥ ¥	Y Y	16.16	17.15	7.93	¥ X	A A	56.43	57.42	060
61682		∢ ·	Intracranial vessel surgery	63.27	Y Z	¥ :	26.23	30.78	15.85	¥ :	¥ :	105.4	109.9	060
61684		∢ ⊲	Intracranial vessel surgery	41.43	A A	Ψ Z Z Z	19.63	33.40	10.28	A A	4 4 Z Z	113.1	73.16	060
61690		< <	Intracranial vessel surgery	31.14	A Z	Z Z	15.24	16.39	6.92	Y Y	Z Z	53.30	54.45	060
		⋖ ·	Intracranial vessel surgery	54.39	¥.	Y :	23.81	26.62	13.39	Y S	Y S	91.59	94.40	060
61697		∢ •	Brain aneurysm repr, complx	63.16	Υ S	Y S	28.59	28.22	12.81	Υ S	Υ S	104.6	104.2	060
61698		∢ <	Brain aneurysm repr, complx	69.39	Υ S	Y S	30.54	27.71	12.50	Ψ < Z Z	Υ	112.4	109.6	060
61702		∢ ⊲	Inner skull vessel surgen	20.4	Z Z	ξ	25.50	25.0	10.76	Z Z	Y Y	96.16	96.54	060
		< ∢	Clamp neck artery	18.66	Z Z	Υ Z	10.41	10.47	4.05	ΥZ	Z Z	33.12	33.18	060
		⋖	Revise circulation to head	37.91	A V	Ν	17.47	18.85	8.84	N A	N	64.22	65.60	060
61708		∢ .	Revise circulation to head	37.01	Y Z	Y :	14.20	14.94	2.50	₹ Z	Y Z	53.71	54.45	060
61710		∢ <	Revise circulation to head	31.15	¥ S	Y S	13.64	13.67	4.51	¥ ž	Y Z	49.30	49.33	060
		τ ∢	Incise skull/brain surgery	17.48	Z Z	ζ <u> </u>	00.71	9.45	9.39	(4 2 Z	ζ	28.05	29.70	060
61735		۲∢	Incise skull/brain surgery	22.16	¥ X	Y Y	11.16	11.94	2.72	Z Z	A A	36.04	36.82	060
61750		∢.	Incise skull/brain biopsy	19.69	Y S	Y :	10.45	10.59	4.71	¥:	¥ :	34.85	34.99	060
61751		∢ ⊲	Brain blopsy w/ct/mr guide	18.58	A N	Ψ Z Z Z	10.91	10.87	4.55 40	A N	4 4 Z Z	39.04	34.00	060
61770		< <	Incise skull for treatment	23.05	Y Y	Z Z	9.50	11.59	3.54	Z Z	Z Z	36.09	38.18	060
61790		∢•	Treat trigeminal nerve	11.46	¥ :	Y S	7.37	6.29	2.81	¥ ?	Z Z	21.64	20.56	060
61/91		∢ <	Four registion been	15.27	Α < Ζ Ζ	Υ <u>Υ</u>	7.23	16.8	3.39	₹ < Z Z	Υ < Ζ 2	25.89	27.17	060
61795		(∢	Brain surgery using computer	4.03	Z Z	Z Z	1.32	1.86	0.79	Z Z	Z Z	6.14	6.68	ZZZ
61850		⋖	Implant neuroelectrodes	13.22	A N	A V	5.29	7.09	3.21	ΥZ	Y Y	21.72	23.52	060
61860		∢ <	Implant neuroelectrodes	22.12	Υ Υ	Z Z	10.67	11.74	4.94	Z Z	Y S	37.73	38.80	060
61864		(∢	Implant neuroelectrde, addl	4.49	 ₹ Z	Z Z	1.64	2.13	5.4	Z Z	Z Z	11.54	12.03	ZZZ
		۷.	Implant neuroelectrode	32.82	Y Z	A A	16.19	17.60	5.41	¥ X	A A	54.45	55.83	060
61868		∢ <	Implant neuroelectrde, addll	7.91	₹ Z	Y S	2.86	3.73	5.41	Y S	Y Z	16.18	17.05	ZZZ
61875		∢ ⊲	Implant neuroelectrodes	16.20	Z Z	Ψ Δ Ζ Ζ	8.73 7.44	9.30	3.80 0.00	¥ 2	¥ 2	28.29	29.42	060
61880		(∢	Revise/remove neuroelectrode	6.83	Z Z	ZZ	5.1	4.72	1.66	Z Z	¥ Ž	13.63	13.21	060
61885		⋖ ·	Insrt/redo neurostim 1 array	7.29	Y Z	Y S	7.07	5.76	1.59	A :	Y S	15.95	14.64	060
		∢ <	Implant neurostim arrays	9.65	Υ S	Z Z	8.33	6.86	1.96	Z Z	Z Z	19.94	18.47	090
62000		< ⋖	Treat skull fracture	13.79	Z Z	ξ	2.50	96.5	 	X X	¥ ¥	22.10	20.81	060
		∶∢	Treat skull fracture	17.49	Z	Z	9.03	8.87	3.86	Y Y	¥ N	30.38	30.22	060
62010		⋖	Treatment of head injury	21.24	N A	N A	11.37	11.65	5.12	A A	A A	37.73	38.01	060
62100		∢ <	Repair brain fluid leakage	23.34	Υ S	Z Z	1.34	12.45	4.83	Y S	Z Z	39.51	40.62	060
		: ا	neduction of skull defect	24.00 1		ַר ב ב	25.5	. 16.03	j t	ζ.		t	12.04	200

ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

						,		i		!	i			
CPT ¹ HCPGS ²	Mod	Status	Description	Physician work RVUs ³	Fully implemented non-facility PE	Year 2007 transi- tional non-facil- ity PE RVUs	Fully implemented facility	Year 2007 transi- tional fa- cility PE RVUs	Mal-prac- tice RVUs	Fully implemented nonfacility	Year 2007 transi- tional non-facil- ity total	Fully implemented facility	Year 2007 transi- tional fa- cility total	Global
62116		∢	Reduction of skull defect	24.82	NA	NA	12.71	13.23	60.9	NA	AN	43.62	44.14	060
62117		∢ <	Reduction of skull defect	28.20	Υ Υ	₹ Ş	14.04	15.07	4.52	¥ ž	Y S	46.76	47.79	060
62120		∢ ⊲	Repair skull cavity lesion	24.3	¥ 4	ζ 4 Ζ Ζ	13.50	77.71	68.7	ζ Δ Ζ Ζ	₹	42.80	45.07	060
62140		(∢	Benair of skull defect	14 41	ζ 4 Ζ Ζ	(4 2 Z	8.17	0.8	3.46	(4 2 Z	Z Z	26.75	26.17	060
62141		< <	Repair of skull defect	15.93	X X	Z Z	8.85	9.05	3.75	Z Z	Ž	28.53	28.70	060
62142		. ⋖	Remove skull plate/flap	11.69	Z Z	ΥZ	7.34	7.09	2.72	A Z	¥ Z	21.75	21.50	060
62143		⋖	Replace skull plate/flap	14.01	A N	₹ Z	8.34	8.13	3.36	Y V	A N	25.71	25.50	060
62145		⋖	Repair of skull & brain	19.95	A A	Y V	9.81	10.64	4.49	A A	A A	34.25	35.08	060
62146		∢.	Repair of skull with graft	17.14	Y ?	¥:	8.64	9.41	3.61	Ϋ́Z :	Z :	29.39	30.16	060
62147		< •	Repair of skull with graft	20.53	Υ S	Υ ·	10.11	11.03	4.31	Υ ·	Υ S	34.95	35.87	060
62148		∢ <	Neuropadoscopy add-on	9.50	▼	Z Z	0.73	0.83	0.48	4 Z	Z Z	73.5 78.4	3.3.7 0.7	777
62161		(⊲	Dissect brain w/scope	21.00	2 2	2 2	11 72	12.042	71.7	2 2	ζ <u>Φ</u>	27.98	38.05	770
62162		< <	Remove colloid cvst w/scope	26.61	 { Z	. ∢ Σ Ζ	13.45	14.53	5.89	ζ <u>Ψ</u>	Z Z	45.95	47.03	060
62163		<	Neuroendoscopy w/fb removal	16.34	Ϋ́	ΥZ	10.23	10.02	4.00	ΥZ	¥ Z	30.57	30.36	060
62164		⋖	Remove brain tumor w/scope	29.19	AN	ΥZ	14.54	14.88	5.36	AN A	A N	49.09	49.43	060
62165		∢	Remove pituit tumor w/scope	23.04	Y Y	A V	11.12	12.85	3.00	A A	A A	37.16	38.89	060
62180		∢	Establish brain cavity shunt	22.41	Ϋ́	Y Z	11.45	12.10	4.97	A A	A A	38.83	39.48	060
62190		⋖	Establish brain cavity shunt	12.03	Ψ Z	Y Z	7.28	7.15	2.79	Y Z	Y Y	22.10	21.97	060
62192		∢ •	Establish brain cavity shunt	13.21	Υ Z	Υ Z	7.96	7.72	3.01	Y :	Y :	24.18	23.94	060
62194		∢ <	Replace/irrigate catheter	5.64	Ψ «	Ψ < Z	3.75	2.76	0.92	Υ S	¥ Ş	10.28	9.32	010
62200		∢ <	Establish brain cavity shurt wescen	19.15	▼ < Z Z	Ψ S	10.18	10.70	4.64	4 4 2 2	¥	33.97	34.49	060
62220		(∢	Establish brain cavity shint	13.96	(4 2 Z	(4 2 Z	7.02	0.0	9.00	ζ 4	Z Z	25.25	25.30	060
		. ⋖	Establish brain cavity shunt	13.84	Z Z	Ą Z	86.8	8.44	3.13	A Z	A N	25.95	25.41	060
62225		⋖	Replace/irrigate catheter	6.07	A A	A N	5.15	4.36	1.39	A A	A A	12.61	11.82	060
62230		۷.	Replace/revise brain shunt	11.31	Y Y	¥.	6.89	09.9	2.70	AN (Y S	20.90	20.61	060
62252	36	∢ <	Cst shurt reprogram	0.74	1./4	46.1	NA 90 0	NA NA	12.0	N.69	2.49	NA PA	NA 1 27	××
62252	 CD TC	(∢	Csf shurt reprogram	0.00	1.48	1.20	0.20 AN	4 AN	0.00	1.50	122	e Z	N N	XX
		< <		7.26	Z	 ₹ Z	5.53	4.91	1.71	Y Z	Į Z	14.50	13.88	060
		⋖	Replace brain cavity shunt	15.50	Ϋ́	ΥZ	8.81	8.76	3.73	A N	Ϋ́	28.04	27.99	060
62263		⋖	Epidural lysis mult sessions	6.37	9.12	11.83	2.84	3.11	0.41	15.90	18.61	9.65	68.6	010
62264		⋖・	Epidural lysis on single day	4.42	5.74	7.25	1.28	1.39	0.27	10.43	11.94	5.97	6.08	010
62268		∢ <	Needle biggs, gainel cord	4.73	6.99	10.42	48. L	2.07	0.43	12.15	15.58	7.00	7.23	000
62270		(∢	Spinal fluid fap. diagnostic	137	24.5	2.86	0.57	0.56	0.0	3.89	4.31	000	50.7	
		∶∢	Drain cerebro spinal fluid	1.35	3.19	3.51	0.62	0.69	0.18	4.72	5.04	2.15	2.22	000
		⋖	Inject epidural patch	2.15	1.70	2.47	0.58	0.68	0.13	3.98	4.75	2.86	2.96	000
62280		⋖	Treat spinal cord lesion	2.63	4.23	6.27	1.05	1.02	0.30	7.16	9.20	3.98	3.95	010
62281		⋖	Treat spinal cord lesion	5.66	3.77	5.20	0.90	0.89	0.19	6.62	8.05	3.75	3.74	010
62282		∢ <	Treat spinal canal lesion	2.33	3.95	7.27	1.06	0.96	0.17	6.45	9.77	3.56	3.46	010
62287		(⊲	Percutaneous diskertomy	- x	0.93 NA	4.7 Z	4 22	0.63	0.0	3.02 AN	9.39 AN	13.62	2.30 14.63	000
62290		< ∢	Inject for spine disk x-ray	3.00	4.49	6.49	1.14	1.32	0.23	7.72	9.72	4.37	4.55	000
		⋖	Inject for spine disk x-ray	2.91	4.29	5.54	1.08	1.19	0.26	7.46	8.71	4.25	4.36	000
62292		⋖	Injection into disk lesion	9.10	Y Y	Y Z	3.16	4.15	0.82	Y Y	A N	13.08	14.07	060
62294		∢ •	Injection into spinal artery	12.73	Α ί	ΑV,	5.58	5.60	1.24	A C	A S	19.55	19.57	060
		∢ <	Inject spine c/t	1.91	3.05	4.38	0.57	0.63	0.12	5.08	6.41	2.60	2.66	000
02311		1	Inject spirie //s (cd)	ф	2.70	15.4	0.53	0.00	0.03	4.33	0.00	Z. 10	7.2	000

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

		בייולים וייסטיים לייסטיים לייס	אפוואייים ואוו שבואבון שיא (פסאוי) פוואס בסבא באוואבי	ין - רבים - רבים - רבים - רבים - רבים - רבים - רבים - רבים - רבים - רבים - רבים - רבים - רבים - רבים - רבים -			ון בי	/,	; ;			7007		j
CPT¹ HCPCS²	Mod	Status	Description	Physician work RVUs ³	Fully implemented non-facility PE	Year 2007 transi- tional non-facil- ity PE RVUs	Fully implemented facility	Year 2007 transi- tional fa- cility PE RVUs	Mal-prac- tice RVUs	Fully implemented nonfacility	Year 2007 transi- tional non-facil- ity total	Fully im- plement- ed facility total	Year 2007 transi- tional fa- cility total	Global
62318		∢ ∢	Inject spine w/cath, c/t	2.04	3.24	5.12	0.47	0.61	0.12	5.40	7.28	2.63	2.77	000
		∢.	Implant spinal canal cath	7.96	¥:	¥ :	4.02	3.97	1.02	Y :	¥ :	13.00	12.95	060
62351		∢ <	Implant spinal canal cath	11.46	Z Z	Y Y	7.39	7.20	2.24	A Z	Y Z	21.09	20.90	060
62360		(∢	Insert spine infusion device	3.60	Z Z	Z Z	3.31	2.85	0.34	Z Z	Z Z	7.25	6.79	060
		⋖	Implant spine infusion pump	6.51	A N	A A	3.87	3.92	08.0	A A	N A	11.18	11.23	060
62362		∢ <	Implant spine infusion pump	8.50	¥ S	Y Z	4.61	4.43	1.18	¥ ž	Y S	14.29	14.11	060
62367		(∢	Analyze spine infusion pump	0.48	0.41	0.56	0.11	0.10	0.03	0.92	1.07	0.62	0.61	S X
62368		∢ ·	Analyze spine infusion pump	0.75	09:0	0.67	0.18	0.17	0.06	1.41	1.48	0.99	0.98	XX
63001		∢ <	Removal of spinal lamina	17.47	Z Z	Y Y	9.62	9.56	3.76	A Z	Y Z	30.85	30.79	060
63005		(∢	Removal of spinal lamina	16.22	ζ ζ Ζ	Z Z	9.53	9.88	3.34	Z Z	ZZ	29.09	29.44	060
		⋖	Removal of spinal lamina	15.72	A N	A A	9.00	8.47	3.37	N A	N A	28.09	27.56	060
63012		⋖・	Removal of spinal lamina	16.66	Υ ·	Y S	67.6	10.01	3.48	¥ :	Y S	29.73	30.15	060
63015		∢ <	Removal of spinal lamina	20.64	4 4 2 2	¥	11.68	1.82	4.75	₹ ₹	¥	30.78 30.88	37.24	060
63017		< <	Removal of spinal lamina	17.12	ζ	ζ <u> </u>	10.16	10.36	3.63	Z Z	Z Z	30.91	31.11	060
		< <	Neck spine disk surgery	15.99	Z Z	A A	9.73	9.71	3.71	¥ X	Z	29.43	29.41	060
63030		⋖ ·	Low back disk surgery	12.97	Y :	Y :	8.46	8.45	3.00	¥:	Y :	24.43	24.42	060
63035		∢ <	Spinal disk surgery add-on	3.15	Z Z	Υ S	1.17	1.49	0.79	∀ \$ 2	Υ S	5.11	5.43	777
63040		∢ ⊲	Laminotomy, single cervical	20.12 18.55	Z Z	¥ ¤	10.80	11.35	4.67	A Z	Z Z	32.59	38.14	060
63045		(∢	Removal of spinal lamina	17.76	ζ	(<u>4</u>	10.13	10.32	3.98	Z Z	Z Z	31.87	32.06	060
		< <	Removal of spinal lamina	17.06	Z Z	Y Y	9.63	10.07	3.55	A A	Y Y	30.24	30.68	060
		⋖	Removal of spinal lamina	15.16	A N	A A	9.18	9.74	3.23	ΥZ	A N	27.57	28.13	060
63048		∢ <	Remove spinal lamina add-on	3.26	Υ Υ Ζ Ζ	Y Z	1.21	1.55	0.72	¥ ž	Y Z	5.19	5.53	ZZZ
63051		< ∢	C-laminoplasty // C-laminoplasty w/craft/plate	25.32	Z Z	ζ <u> </u>	11.43	12.99	4.66	(4 2 Z	ζ	41.41	42.97	060
		< <	Decompress spinal cord	23.36	Z Z	Z	12.07	12.90	5.27	Y Y	¥ Z	40.70	41.53	060
		⋖	Decompress spinal cord	21.67	N A	N A	11.11	12.23	4.75	Y Y	A A	37.53	38.65	060
63057		∢ •	Decompress spine cord add-on	5.25	Y :	Y :	1.91	2.46	1.22	Y :	Υ :	8.38	8.93	ZZZ
63064		∢ <	Decompress spinal cord	26.03	Z Z	Z Z	13.04	14.11	5.69	₹ Z	Z Z	44.76	45.83	080
63075		< <	Neck spine disk surgery	19.41	Z Z	Z Z	10.99	11.84	4.62	Z Z	Z Z	35.02	35.87	060
		⋖	Neck spine disk surgery	4.04	AN	Ν	1.49	1.92	96.0	NA	NA	6.49	6.92	ZZZ
63077		∢ •	Spine disk surgery, thorax	22.69	Y :	Y :	10.94	12.36	3.98	¥:	Y :	37.61	39.03	060
63078		∢ <	Spine disk surgery, thoraxBemoval of vertebral body	3.28	Z Z	Z Z	13.05	1.52	0.66	A Z	Y Y	5.17	5.46	777
63082		(∢	Remove vertebral body add-on	4.36	ζ	(<u>4</u>	1.61	2.08	1.02	¥	Z Z	66.9	7.46	ZZZ
		< <	Removal of vertebral body	29.29	Z Z	Y Y	13.49	15.01	4.48	A A	Ϋ́	47.26	48.78	060
63086		⋖	Remove vertebral body add-on	3.19	Y Y	Y Y	1.14	1.48	0.59	∢ Z	Y Z	4.92	5.26	222
		⋖ <	Removal of vertebral body	37.32	Υ S	Y S	16.46	18.75	6.20	¥ ž	¥ S	59.98	62.27	090
63090		۲ ∢	Removal of vertebral body	30.71	Z Z	ξ	13.90	15.54	4 21	Z Z	Z Z	48.82	50.46	777
63091		< ∢	Remove vertebral body add-on	3.03	Z Z	Z Z	1.10	1.37	0.48	Z Z	Z Z	4.61	4.88	ZZZ
63101		⋖	Removal of vertebral body	33.84	A N	A A	16.71	18.68	5.69	ΥZ	Ą Ą	56.24	58.21	060
63102		⋖・	Removal of vertebral body	33.84	A S	Z Z	16.45	18.61	5.69	A S	¥ S	55.98	58.14	030
63170		∢ ⊲	Remove vertebral body add-on	4.8Z	A N	Z Z	12.72	11.99	0.69 4	A A	Z Z	39 17	78.7	777
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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

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CPT¹ HCPCS²	Мод	Status	Description	Physician work RVUs ³	Fully implemented non-facility PE	Year 2007 transi- tional non-facil- ity PE RVUs	Fully implemented facility	Year 2007 transi- tional fa- cility PE RVUs	Mal-prac- tice RVUs	Fully im- plement- ed non- facility total	Year 2007 transi- tional non-facil- ity total	Fully implemented facility	Year 2007 transi- tional fa- cility total	Global
63172		۷ ۵	Drainage of spinal cyst	19.61	4 Z Z	Z Z	10.97	10.75	4.48	A N	A N	35.06	34.84	060
63180		<	Revise spinal cord ligaments	20.35	Z Z	Y Y	10.70	10.93	3.95	Z Z	Z Z	35.00	35.23	060
63182		∢.	Revise spinal cord ligaments	22.64	Y :	A :	7.04	10.00	5.30	Y :	Y :	34.98	37.94	060
63185		∢ <	Incise spinal column/nerves	16.30	Z Z	Y Z	9.87	8.55	2.79	Y S	Y Z	28.96	27.64	060
63191		(∢	Incise spinal column/nerves	18.73	ζ	ζ	10.50	10.50	6.34	ζ	ζ	35.57	35.57	060
		< <	Incise spinal column & cord	21.91	Z Z	Z Z	7.01	10.56	3.26	A A	A A	32.18	35.73	060
63195		۷,	Incise spinal column & cord	21.50	¥ :	Z Z	11.83	11.26	4.87	Z Z	¥:	38.20	37.63	060
63196		∢ ⊲	Incise spinal column & cord	22.08 23.08	A Z	A Z	13.47	13.43	5.76	4 4 2 2	A Z	44.31	44.27	060
63198		< <	Incise spinal column & cord	29.69	Z Z	Z Z	8.74	8.52	6.43	Z Z	Z Z	44.86	44.64	060
63199		⋖	Incise spinal column & cord	31.26	Y Z	Y Y	9.10	13.58	1.40	AN.	AN.	41.76	46.24	060
63200			Release of spinal cord	21.26	Z Z	Z Z	11.23	11.30	4.96	Υ S	Υ S	37.45	37.52	060
63251			Revise spinal cord vessels	43.68 44.42	K K	4 4 2 2	20.22	20.04	10.9.01	Y Y	Y Y	75.33	76.94	060
63252			Revise spinal cord vessels	44.41	Z Z	A N	20.68	21.89	10.64	Z Z	Z Z	75.73	76.94	060
			Excise intraspinal lesion	23.64	N A	A	12.53	12.73	5.43	A A	A A	41.60	41.80	060
63266			Excise intraspinal lesion	24.50	Y S	¥:	12.72	13.09	5.54	Y :	Y :	42.76	43.13	060
63267			Excise intraspinal lesion	19.26	Υ S	Y Z	10.74	11.01	4.37	Y Z	Y Z	34.37	34.64	060
63270		(∢	Excise intraspinal lesion	20.62	Z Z	ζ	15.05	15.39	0.00	Z Z	X A	51.49	51.83	060
		< <	Excise intraspinal lesion	29.74	Z Z	Y Y	14.72	15.39	06.9	Z Z	Z	51.36	52.03	060
63272		⋖ ·	Excise intraspinal lesion	27.31	Y :	Y :	13.73	14.47	6.18	Y S	Y S	47.22	47.96	060
63273		∢ <	Excise intraspinal lesion	26.28	Z Z	Y Z	13.25	14.09	5.74	Y Z	Y Z	45.27	46.11	060
63276			Biopsy/excise spinal tumor	25.50	X A	ζ	13.17	13.58	25.00	ξ	ζ	44.50	44.91	060
			Biopsy/excise spinal tumor	22.20	Z Z	Z Z	11.66	12.33	5.01	A A	A A	38.87	39.54	060
63278		∢ ·	Biopsy/excise spinal tumor	21.93	Y Z	Y :	11.58	12.21	4.55	¥ :	Y :	38.06	38.69	060
63280		∢ ⊲	Biopsylexcise spinal tumor	30.08	Z Z	A Z	15.35	16.10	7.27	A Z	Y Z	52.70	53.45	060
63282		(∢	Biopsy/excise spinal tumor	27.94	ζ	Z Z	14.49	15.14	6.76	ζ 4 2 Ζ	ζ ∢ Ζ Ζ	49.19	49.84	060
		< <	Biopsy/excise spinal tumor	26.55	Z Z	A A	13.62	14.42	6.26	Z	Z	46.43	47.23	060
63285		۷,	Biopsy/excise spinal tumor	37.84	¥ Z	Z Z	18.27	19.56	9.18	Z Z	Z Z	65.29	66.58	060
63287		∢ ⊲	Biopsy/excise spinal tumor	39.86	Z Z	A A	18.03	79.47	9.29	4 4 2 2	4 4 2 2	67.94	90.09 80.09	060
		< ∢	Biopsy/excise spinal tumor	40.60	Z Z	Y Y	19.25	20.29	9.05	Z Z	Z Z	68.87	69.91	060
63295		⋖ ·	Repair of laminectomy defect	5.25	Y S	Y S	1.29	1.94	1.03	Y S	Y S	7.57	8.22	222
63300		∢ <	Removal of vertebral body	26.62	Z Z	Y Z	13.00	14.00	5.97	Y Z	Y Z	45.59	46.59	060
63302		(∢	Removal of vertebral body	30.93	ζ ∀ Ζ Ζ	ζ <u> </u>	14.36	15.51	5.53	Z Z	¥ Ž	50.82	51.97	060
		⋖	Removal of vertebral bodý	33.37	AN	AN	14.23	16.27	4.68	NA	A	52.28	54.32	060
63304		∢ •	Removal of vertebral body	33.64	Y Z	¥ :	16.35	17.07	6.41	Y S	¥:	56.40	57.12	060
63305		∢ <	Removal of vertebral body	36.03	4 < Z	¥ Z	16.98	17.81	5.77 2.33	₹ < Z Z	₹ <u>₹</u>	58.72	59.55	060
63307			Removal of vertebral body	34.74	ζ	Z Z	16.93	16.87	4.46	Z Z	¥ Ž	56.13	56.07	060
			Remove vertebral body add-on	5.24	AN	N	1.88	2.43	1.29	N A	N	8.41	8.96	ZZZ
63600		⋖・	Remove spinal cord lesion	14.98	AN (AN S	4.52	5.19	1.52	N S	N I	21.02	21.69	060
63610		∢ <	Stimulation of spinal cord	7.7.2	13.99	48.39	1.50	2.07	0.86	73.57	76.76	30.11	11.65	000
63650		< <	Implant neuroelectrodes	7.53	Y Y Z Z	ζ ζ Z Z	2.85	3.10	0.53	Z Z	Z Z	10.91	11.16	060
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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

ADC	ADDENDOM B.		I DNA (SOVI) SIINO BOLA BUIRDEN	NI DELATED INFORMATION OSED IN								/007		ב
CPT 1 HCPCS 2	Mod	Status	Description	Physician work RVUs ³	Fully im- plement- ed non- facility PE RVUs	Year 2007 transi- tional non-facil- ity PE RVUs	Fully implemented facility	Year 2007 transi- tional fa- cility PE RVUs	Mal-prac- tice RVUs	Fully im- plement- ed non- facility total	Year 2007 transi- tional non-facil- ity total	Fully implemented facility	Year 2007 transi- tional fa- cility total	Global
63655		۵	Implant neuroelectrodes	11.37	AN	AN	7 47	7 05	2 43	Ą	A Z	21.27	20.85	060
		. ⋖	Revise/remove neuroelectrode	6.83	Y Y	A N	3.21	3.52	0.78	A N	¥ Z	10.82	11.13	060
		⋖	Insrt/redo spine n generator	7.83	Ϋ́Z	A N	3.59	4.01	1.05	Ϋ́Z	A N	12.47	12.89	060
63688		4	Revise/remove neuroreceiver	90.9	AN	AN	3.44	3.53	0.89	AN	A A	10.39	10.48	060
63700		⋖	Repair of spinal herniation	17.26	ΥZ	A A	9.40	10.10	3.52	ΥZ	A A	30.18	30.88	060
63702		⋖	Repair of spinal herniation	19.20	Ϋ́Z	A A	10.51	10.92	4.12	ΥZ	Y Y	33.83	34.24	060
63704		⋖	Repair of spinal herniation	22.15	A A	Y Y	12.16	12.75	4.57	A A	ΥZ	38.88	39.47	060
63706		⋖・	Repair of spinal herniation	25.07	Υ :	Υ :	14.44	13.82	6.23	Υ :	Y :	45.74	45.12	060
63/0/		∢ <	Repair spinal fluid leakage	12.46	Υ S	Υ S	95.7	7.68	12.51	Υ S	Υ S	22.53	22.65	060
63710		∢ ⊲	Repair spinal litild leakage	15.21	4 4 2 2	₹ 4 2 2	0.00 0.00 0.00	9.24	9.09 0.09	¥ 4 Z Z	₹	27.24	27.79	060
63740		< ∢	Install spinal shunt	44.51	Z Z	Z Z	7.87	7.49	5 6	Z Z	Z Z	23.24	22.72	060
		∶ ∢	Install spinal shunt	8.98	Y X	Z Z	4.66	4.74	1.66	A Z	ΥZ	15.30	15.38	060
		۷	Revision of spinal shunt	8.82	AN	AN	5.76	5.39	1.89	AN	A N	16.47	16.10	060
63746			Removal of spinal shunt	7.21	ΥZ	A A	4.48	3.96	1.53	ΥZ	A A	13.22	12.70	060
64400			N block inj, trigeminal		1.40	1.78	0.44	0.43	0.07	2.58	2.96	1.62	1.61	000
64402			N block inj, facial	1.25	1.44	1.57	0.52	0.58	0.09	2.78	2.91	1.86	1.92	000
			N block inj, occipital	1.32	01.10	 	94.0	74.0	0.0	2.50	2.79	- 0 - 0	/8	000
64408			N Block inj. skranjo	- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	44. C a	0.55	0.09	0.0	0 0	2.93	3.00	02.20	2.32	88
64412			N block ini spinal accessor	5	20.0	1.00	20.0	0.40	0.00	1 000	3.76	1.02	1 72	
			N block ini, cervical plexus	1.40	1.29	1.71	0.47	0.49	0.08	2.77	3.19	1.95	1.97	000
64415			N block inj, brachial plexus	1.48	1.49	2.48	0.34	0.43	0.09	3.06	4.05	1.91	2.00	000
64416			N block cont infuse, b plex	3.85	Ψ.	₹Z	0.56	0.73	0.31	Y Y	A :	4.72	4.89	010
6441/			N block inj, axillary	44. 44.	1.50	2.66	0.35	0.46	0.11	3.05	12.4	06.	10.5	000
64418			N block inj intercost sna	. t	88 0	2.44	0.0	0.46	0.0	3.27	3.83	9. 5		
64421			N block ini. intercost, mlt	1.68	3.52	5.46	0.52	0.52	0.13	5.31	7.25	2.31	2.31	000
			N block inj, ilio-ing/hypogi	1.75	1.33	1.57	0.55	0.54	0.13	3.21	3.45	2.43	2.42	000
64430			N block inj, pudendal	1.46	2.47	2.51	0.81	0.62	0.10	4.03	4.07	2.37	2.18	000
64435			N block inj, paracervical	1.45	1.97	2.39	0.54	0.65	0.16	3.58	4.00	2.15	2.26	000
64445			N bik ini sciatic cont inf	40 40	00.1 V	Z-4Z	0.51	0.50	0.0	3.23 NA	90.4 V V	2 Z	2.08	960
64447			N block ini fem single	1.50	ζ 4 Ζ Ζ	Z Z	000	0.37	60.0	Z Z	(4 2 Z	1 79	1.96	000
			N block inj fem, cont inf	3.36	Ϋ́	Ϋ́	0.46	0.72	0.18	Ϋ́	ΥZ	4.00	4.26	010
64449			N block inj, lumbar plexus	3.24	A A	A A	0.48	0.84	0.15	A N	A N	3.87	4.23	010
64450			N block, other peripheral	1.27	1.28	1.25	0.49	0.48	0.13	2.68	2.65	1.89	1.88	000
64470			Inj paravertebral c/t	1.85	3.84	6.40	0.70	0.71	0.11	5.80	8.36	2.66	2.67	000
64472		∢ ⊲	Inj paravertebral C/t add-on	5.5	3.72	2.06	0.33	45.0	0.08	7.58 2.59	5.43	0.70	1.71	777
64476		< ∢		86.0	2.7	1.88	0.23	0.24	0.07	2.16	2.93	1.28	1.29	222
		< <	Inj foramen epidural c/t	2.20	3.78	6.58	0.81	0.87	0.12	6.10	8.90	3.13	3.19	000
		A		1.54	1.48	2.51	0.37	0.45	0.10	3.12	4.15	2.01	2.09	ZZZ
64483		∢ •		1.90	3.83	6.89	0.75	0.81	0.11	5.84	8.90	2.76	2.82	000
64484		∢ <	Inj toramen epidural add-on	 	1.61	2.87	0.32	0.36	0.08	3.02	4.28	1.73	1.77	777
64508		(∢	N block carotid sinus s/p	5 - 1	- 1	76.6	0.7	0.0	0.07	3.07	4.16	1.67	1.87	
		. ⋖	N block, stellate ganglion	1.22	1.91	3.07	0.43	0.49	0.07	3.20	4.36	1.72	1.78	000
64517		∢ .	N block inj, hypogas plxs	2.20	1.69	2.47	99.0	0.82	0.11	4.00	4.78	2.97	3.13	000
64520		∢ <	N block, lumbar/thoracic	1.35	2.62	4.52	0.52	0.54	0.08	4.05	5.95	1.95	1.97	000
64550		(∢	Apply neurostimulator	0.18	0.20	0.26	0.00	0.05	0.0	0.39	0.45	0.25	0.24	800
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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

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CPT 1 HCPCS 2	Mod	Status	Description	Physician work RVUs ³	Fully im- plement- da non- facility PE RVUs	Year 2007 transi- tional non-facil- ity PE RVUs	Fully implemented facility	Year 2007 transi- tional fa- cility PE RVUs	Mal-prac- tice RVUs	Fully implemented nonfacility	Year 2007 transi- tional non-facil- ity total	Fully implemented facility	Year 2007 transi- tional fa- cility total	Global
64553		۷	Implant neuroelectrodes	2.31	2.47	2.75	1.33	1.73	0.18	4.96	5.24	3.82	4.22	010
•		∢ <	Implant neuroelectrodes	2.27	2.56	2.97	1.35	1.23	0.19	5.02	5.43	3.81	3.69	010
64561		< ⊲	Implant neuroelectrodes	2.30	20.5	27.71	46. 40.	05 05 05	0.22	5.09	35.07	3.92	3.88	0.00
64565		(∢	Implant neuroelectrodes	1.76	2.42	3.07	1.25	1.26	0.13	4.31	4.96	3.14	3.15	010
		< <	Implant neuroelectrodes	8.11	Y Z	A N	5.17	5.24	1.60	Ϋ́Z	A A	14.88	14.95	060
64575		⋖	Implant neuroelectrodes	4.34	A A	A A	1.89	2.48	0.61	A N	ΥZ	6.84	7.43	060
64577		⋖	Implant neuroelectrodes	4.61	Y Y	A	2.74	3.15	1.04	ΥZ	N A	8.39	8.80	060
64580		⋖・	Implant neuroelectrodes	4.11	Υ :	¥:	2.56	3.31	0.36	Ψ.	¥:	7.03	7.78	060
64581		⋖ <	Implant neuroelectrodes	14.13	A C	A S	6.89	5.77	1.05	Y Y	A S	22.07	20.95	060
64580		∢ <	heat/redo perah a generator	0.00	0.00	9.92	2.27	Z. I./	0.20	0 4 c	12.21	50.4 CL 7	4. 4. 4. 4. 4. 4. 4. 4. 4. 4. 4. 4. 4. 4	0.00
64595		(∢	Revise/remove neuroreceiver	1.40	6.04	9.47	2.2	5.00	0 0	8.54	11.39	9.10	3.93 4.03	010
		< <	Injection treatment of nerve	3.44	5.25	8.35	1.56	1.63	0.34	9.03	12.13	5.34	5.41	010
64605		⋖	Injection treatment of nerve	5.60	7.56	9.08	2.34	2.23	0.79	13.95	15.47	8.73	8.62	010
64610		4	Injection treatment of nerve	7.15	9.23	86.8	3.43	3.65	1.58	17.96	17.71	12.16	12.38	010
64612		⋖	Destroy nerve, face muscle	1.96	1.49	2.24	1.31	1.32	0.11	3.56	4.31	3.38	3.39	010
64613		4	Destroy nerve, neck muscle	1.96	1.33	2.54	1.10	1.19	0.11	3.40	4.61	3.17	3.26	010
64614		⋖ ·	Destroy nerve, extrem musc	2.20	1.59	2.82	1.28	1.30	0.10	3.89	5.12	3.58	3.60	010
64620		< <	Injection treatment of nerve	2.84	3.44	4.66	1.16	1.29	0.20	6.48	7.70	4.20	4.33	010
64622		∢ <	Doot not not not not not not not not not	3.00	4.07	6.85	3.55	48	81.0	7.25	10.03	4.43 50.43	4.52	010
•		۲ ⊲	Destrugated and off	3.78	1.04	7.04	1 20	1 02	0.00	8,03	11.01	07-1 7 82	72 R	010
64627		(∢	Destruction in add-on	1.16	2.70	4.00	1.04	92.0	0.20	3.60	5.23	1.47	1.49	222
		< <	Injection treatment of nerve	3.00	2,82	2.76	1.89	1.53	0.22	6.04	5.98	5.11	4.75	010
		<	Injection treatment of nerve	2.76	2.41	3.75	1.41	1.74	0.29	5.46	08.9	4.46	4.79	010
64650		4	Chemodenerv eccrine glands	0.70	0.77	0.85	0.17	0.27	90.0	1.53	1.61	0.93	1.03	000
64653		⋖	Chemodenery eccrine glands	0.88	0.81	0.89	0.21	0.34	0.08	1.77	1.85	1.17	1.30	000
64680		< •	Injection treatment of nerve	2.62	4.03	6.06	1.10	1.35	0.18	6.83	8.86	3.90	4.15	010
64681		∢ <	Injection treatment of nerve	8/.9	4.90	8.22	08. F	3.88	0.28	8.96	82.2	5.36	5.94	010
•		∢ <	Devise hand/foot nerve	0.0Z	₹ ₹	4 < 2 2	20.4	9.5 R. G	0.61	₹ 5	₹ 5	0.00	0.01 40.04	060
64708		< ∢	Revise arm/leg nerve	6.17	Υ Δ Ζ Ζ	ζ 4 Ζ Ζ	4.08	4.67	96.0	(4 2 Z	(4 2 Z	12:1	11.80	060
		< <	Revision of sciatic nerve	7.92	Υ Z	A A	4.30	4.80	0.95	A A	Y Y	13.17	13.67	060
64713		⋖	Revision of arm nerve(s)	11.22	Y Y	A	6.29	5.99	1.82	Ϋ́	N A	19.33	19.03	060
64714		∢ •	Revise low back nerve(s)	10.37	Ψ.	Ψ.	4.69	4.33	1.19	Ψ.	Ψ.	16.25	15.89	060
64/16		∢ <	Revision of cranial nerve	08.90	▼	Υ S	5.04	5.75	0.63	Ψ < Z Z	Υ Z	12.47	13.18	060
•		۲ ۵	Bevise ulhar nerve at elbow	0.30	₹ 4 2 2	¥ 2	0.30 90 90 90	6.00	03	(d	(d	10.4	0.4.0	060
64721		< ⊲	Carnal trinnel surgery	4 78	(4 2 Z	(4 2 Z	4 64	5.50	0.73	(4 2 Z	(4 2 Z	10.15	10.22	060
		< <	Relieve pressure on nerve(s)	4.69	Z Z	Y Z	2.70	2.96	0.48	Z Z	_	7.87	8.13	060
64726		<	Release foot/toe nerve	4.17	Ϋ́	Ϋ́	2.57	2.74	0.54	ΥZ	ΥZ	7.28	7.45	060
64727		⋖	Internal nerve revision	3.10	A A	A A	1.19	1.42	0.48	A N	ΥZ	4.77	2.00	ZZZ
64732		⋖ ·	Incision of brow nerve	4.77	₹ Z	Y S	4.02	3.64	0.98	₹ Z	Y S	9.77	9.39	060
64734		∢ •	Incision of cheek nerve	5.41	Ψ.	Ϋ́Z :	4.38	4.14	0.89	Υ :	ς :	10.68	10.44	060
64739		∢ <	Indision of its posses	5.09 20.09	₹ ₹	¥	3.70	3.95 0.85	0.52	4 S	¥	9.31	9.50	060
64740		(⊲	Incision of tonglie perve	22.0	(d	(10.4	4.40	900	(d	(4 2 Z	45.11	11 71	060
64742		< ∢	Incision of facial nerve	6.71		Z Z	41.4	4.57	0.73		ž Ž	11.58	12.01	060
64744		4	Incise nerve, back of head	2.60	Ϋ́	A N	4.33	3.92	1.16	ΥZ	A Z	11.09	10.68	060
64746		∢	Incise diaphragm nerve	6.45	NA	NA	3.77	4.33	0.82	AN	NA	11.01	11.57	060

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

ADL	PENDOM	آ۔ آ۔	ADDENDOM B.——RELATIVE VALUE ONITS (RVOS) AND	nela i eu	ND MELATED INFORMATION OSED IN			DEI ERMINING INEDICARE	NEUCA E	AE MAYMENIS	N O LON	1007	-CONTINUED	ם
CPT 1 HCPCS 2	Mod	Status	Description	Physician work RVUs ³	Fully implemented nonfacility PE	Year 2007 transi- tional non-facil- ity PE RVUs	Fully implemented facility	Year 2007 transi- tional fa- cility PE RVUs	Mal-prac- tice RVUs	Fully im- plement- ed non- facility total	Year 2007 transi- tional non-facil- ity total	Fully implemented facility	Year 2007 transi- tional fa- cility total	Global
64752 64755		44	Incision of vagus nerve	7.55 14.93	₹ ₹ Z Z	Y Y	3.91	4.20	0.93	Y Y	ZZ	12.39	12.68	060
64760 64761		⋖ ⋖	Incision of vagus nerve	7.45	4 4 Z Z	Ψ Ψ Z Z	3.70	3.52 3.62	0.81	4 4 Z Z	4 4 Z Z	11.96	11.78	060 060
		< <	Incise hip/thigh nerve	7.42	Y S	Z Z	4.83	5.12	0.94	Z Z	Z Z	13.19	13.48	060
64771		∢ ∢	Incise nip/tnigh nerve Sever cranial nerve	9.28	ξ Z Z	Z Z	5.05	5.4	1.06	Z Z	Z Z	15.41	15.55	060
		< •	Incision of spinal nerve	7.70	Y Z	Y :	5.06	4.96	1.40	Z :	Y Z	14.16	14.06	060
64774			Remove skin nerve lesion Remove digit nerve lesion	5.66	Y Z	Y Y	3.56	3.83	0.74	Y Y	4 4 2 2	10.19	10.23	060
		< •	Digit nerve surgery add-on	3.11	Y Z	Z Z	1.16	1.42	0.46	Z Z	Z Z	4.73	4.99	ZZZ
64783		∢ ∢	Hemove limb nerve lesion	6.72 3.71	Z Z	Z Z	1.37	3.81	0.86	Z Z	Z Z	11.49	5.94	060 ZZZ
64784			Remove nerve lesion	10.43	Y Y	Z	5.95	6.45	1.38	Y Z	Z	17.76	18.26	060
64786			Remove sciatic nerve lesion	16.06	Z Z	Z Z	8.63	9.55	2.60	Y Z	Z Z	27.29	28.21	060
64788			Remove skin nerve lesion	5.10	Z Z	Z Z	3.68	3.52	0.73	ζ ∢ Ζ Ζ	Z Z	9.51	9.35	060
64790			Removal of nerve lesion	11.91	A :	Z :	09.9	7.07	2.10	Z :	Y :	20.61	21.08	060
64792		∢ ∢	Hemoval of nerve lesion	3.01	Z Z	Z Z	1.42	8.67 1.53	0.52	4 4 2 2	Z Z	26.24	26.80	060
			Remove sympathetic nerves	10.18	Ą Z	Z	4.08	4.88	1.29	Z Z	Y Y	15.55	16.35	060
64804			Remove sympathetic nerves	15.72	₹ Z	YZ:	6.10	6.91	2.14	Y S	Y :	23.96	24.77	060
64809			Remove sympathetic nerves	14.57	Z Z	Z Z	6.58	5.98	1.50	Y Z	Z Z	22.65 16.85	22.05	060
64820			Remove sympathetic nerves	10.60	Z Z	Z Z	6.76	7.05	1.49	Z Z	Z Z	18.85	19.14	060
64821			Remove sympathetic nerves	9.11	A S	Z Z	6.51	7.15	1.24	Z Z	Y :	16.86	17.50	060
64822 64823			Hemove sympathetic nerves	10.72	Z Z	4 4 2 2	6.32 7 0 80	7.02	1.30	4 4 2 2	4 4 2 2	16.73	20.17	060
			Repair of digit nerve	10.17	A A	Y Y	6.41	6.92	1.4.	Z V	A A	17.99	18.50	060
64832		∢ <	Repair nerve add-on	5.65	₹ Z	Z Z	2.28	2.78	0.85	Y Z	¥ ž	8.78	9.28	ZZZ
64834 64835			Repair of hand or toot nerve	10.67	ς ς Z	Z Z	7.03	6.91	1.54	Z Z	Z Z	18.53	20.81	060
			Repair of hand or foot nerve	11.54	₹ Z	A A	6.78	7.46	1.67	N A	A A	19.99	20.67	060
64837		∢ <	Repair nerve add-on	6.25	Y S	Y S	2.62	3.09	0.97	Y S	Y S	9.84	10.31	ZZZ
64840 64856			Hepair of leg nerve	13.81	4 4 2 2	4 4 2 2	98.8	9.00	2.12	Y Y	¥ ¥	20.04	26.90	060
			Repair arm/leg nerve	15.63	N A	Z	8.61	9.40	2.21	Y Z	Y V	26.45	27.24	060
64858			Repair sciatic nerve	17.63	Y Z	Y Z	9.80	10.55	3.33	Y Z	Y Z	30.76	31.51	080
64861			Repair of arm nerves	20.68	Z Z	Y Y	9.71	11.28	4.08	Y Y	Z Z	34.47	36.04	060
64862			Repair of low back nerves	20.88	Y S	Z Z	6.55	10.61	4.31	Z Z	¥ ž	31.74	35.80	060
64865			Repair of facial nerve	15.90	X X	4 4 2 2	9.72	12.60	1.50	ξ Z Z	Z Z	27.12	30.00	060
•			Fusion of facial/other nerve	16.64	Ϋ́	Z A	12.02	12.91	2.04	A A	A A	30.70	31.59	060
64868			Fusion of facial/other nerve	14.76	Z Z	Z Z	8.96 8.00	10.84	1.43	Y Z	Z Z	25.15	27.03	060
64872			Subsequent repair of nerve	1.99	A Z	Z	0.79	1.01	0.29	Z Z	Z Z	3.07	3.29	ZZZ
64874		∢ •	Repair & revise nerve add-on	2.98	A S	Z Z	1.17	44.	0.42	Z Z	Y :	4.57	4.84	222
64876			Hepair nerve/shorten bone	3.37	¥ ₹	4	0.76	1.50	0.47	∀	4	97 79	45.3 20.05	777
64886			Nerve graft, head or neck	20.72	Z Z	Z Z	9.55	12.57	2.08	Z Z	A A	32.35	35.37	060
64890		4	Nerve graft, hand or foot	16.05	NA	AN	8.75	9.70	2.29	NA	AN	27.09	28.04	060
1CPT code	s and des	criptors only	¹ CPT codes and descriptors only are convirunt 2005 American Medical Associa	tion All righ	te recenved A	Annlicable F.	ARS/DFARS	vlone						

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

2	ביייים בייי	<u>.</u>	ADDENDOM D NECATIVE VALOE ONITS (11009) AND I	ורל הלו		0.00	j -		ולכול מילולי	- -				j
CPT 1 HCPCS ²	Mod	Status	Description	Physician work RVUs ³	Fully implemented non-facility PE	Year 2007 transi- tronal non-facil- ity PE RVUs	Fully implemented facility	Year 2007 transi- tional fa- cility PE RVUs	Mal-prac- tice RVUs	Fully implemented nonfacility total	Year 2007 transi- tional non-facil- ity total	Fully implemented facility	Year 2007 transi- tional fa- cility total	Global
64891 64892		4 4	Nerve graft, hand or foot	17.16	Z Z	A A	9.52	8.08	1.63	Z Z	Z Z	28.31	26.87	060
			graft,	16.68	NA	Z A	9.32	9.75	2.61	NA	¥ Z	28.61	29.04	060
64895	•		Nerve graft, hand or foot	20.20	∢	Y S	9.73	9.69	2.57	Y Z	₹ S	32.50	32.46	060
64897		< <	Nerve graft, Italia of 100t	19.19	₹ ₹ 2 Z	₹ ₹ 2 Z	10.05	10.55	2.54	Z Z	Z Z	31.78	32.28	060
64898		< <	Nerve graft, arm or leg	20.76	Ą V	N A	10.88	11.59	2.77	N A	A A	34.41	35.12	060
64901		∢ •	Nerve graft add-on	10.20	₹ Z	Y S	3.71	4.89	1.37	A S	¥:	15.28	16.46	777
64902			Nerve graft add-on	11.81	A A	¥ ¥ Z Z	4.14 6.59	5.5Z 8.03	2.00	ξ Z	₹ ₹	23.51	18.88	777
			Nerve pedicle transfer	19.84	A N	Z A	6.14	10.96	3.16	NA	¥ Y	29.14	33.96	060
65091			Revise eye	7.07	₹ S	Y Z	6.66	7.94	0.32	A S	₹ S	14.05	15.33	060
65101			Removal of eve	8.02 8.02	Z Z	ζ ζ Z Z	0.70	8.25 9.13	0.35	ξ Z Z	₹ ₹ Ζ Ζ	16.23	17.50	060
		⋖	Remove eye/insert implant	8.56	₹ Z	Y V	8.09	9.34	0.37	N A	Y Z	17.02	18.27	060
65105			Remove eye/attach implant	9.60	₹ ₹	Y Z	8.74	10.05	0.42	Y S	▼	18.76	20.07	060
65112			Remove eve/revise socket	18.04	ζ	X A	12.57	15.28	0.0-	(4 2 Z	(4 2 Z	31.91	34.62	060
			Remove eye/revise socket	19.18	₹ Z	Z Z	13.21	15.60	1.02	Z Z	Z Z	33.41	35.80	060
65125			Revise ocular implant	3.12	6.73	8.31	3.13	3.49	0.19	10.04	11.62	6.44	08.9	060
65130		_	Insert ocular implant	8.14 3.37	A Z	4 4 Z Z	7.68	8.82	0.35 36	Z Z	Z Z	16.18	17.31	060
65140			Attach ocular implant	9.13	₹ Z	Z	8.27	9.49	0.40	Ą Z	A A	17.80	19.02	060
65150		∢.	Revise ocular implant	6.25	₹ Z	Y :	6.24	7.55	0.31	A :	¥ :	12.80	14.11	060
65155			Reinsert ocular implant	9.77	₹ \$	Y S	8.52	10.01	0.50	▼	₹ Z Z	18.79	20.28	060
65205			Remove foreign body from eve	0.71	0.57	0.62	0.32	0:30	0.03	1.31	1.36	1.06	1.04	000
			Remove foreign body from eye	0.84	0.72	0.79	0.39	0.38	0.04	1.60	1.67	1.27	1.26	000
65220			Remove foreign body from eye	0.71	0.59	0.63	0.28	0.28	0.02	1.35	1.39	40. 6	40:1	000
65235		(∢	Remove foreign body from eye	8.68	O AZ	N S	6.44	6.68	0.37	N A	F A	15.49	15.73	060
65260			Remove foreign body from eye	12.19	A S	Z Z	8.59	9.41	0.57	A S	A S	21.35	22.17	060
65265			Remove foreign body from eye	13.94	3.76	4 8 7	9.40	10.34	0.62	NA 5 75	NA 86	3.15	3.32	090
			Repair of eye wound	4.43	6.23	7.36	3.10	3.25	0.19	10.85	11.98	7.72	78.7	060
65273		⋖ <	Repair of eye wound	4.97	₹ Z	A S	3.30	3.52	0.22	A L	A S	8.49	8.71	060
65280			Repair of eye wound	8.77	- 82 V A	0.30 NA	5.65	6.10	0.38	NA N	N A A	14.80	15.25	060
	•		Repair of eye wound	14.31	N	A A	8.19	8.98	0.64	N A	Y Y	23.14	23.93	060
65286	•		Repair of eye wound	6.37	8.69	10.55	4.34	4.56	0.27	15.33	17.19	10.98	11.20	060
65400			Removal of eye lesion	7.17	7.51	8.14	5.89	6.08	0.30	14.98	15.61	13.36	13.55	060
			Biopsy of cornea	1.47	1.69	2.01	0.87	0.95	0.07	3.23	3.55	2.41	2.49	000
65420			Removal of eye lesion	4.16	6.91	8.39	3.98	4.33	0.21	11.28	12.76	8.35	8.70	060
65430			Corneal smear	0.00 1 47	0.20	3.72	78.0	0.95	0.63	2.64	20.07	2.70	0.33	000
			Curette/treat cornea	0.92	0.87	0.97	0.66	0.70	0.0	1.83	1.93	1.62	1.66	800
65436		∢.	Curette/treat cornea	4.68	3.79	4.02	3.46	3.63	0.21	8.68	8.91	8.35	8.52	060
65450			Treatment of corneal lesion	3.27	3.68	3.98	3.61	3.87	0.16	7.11	7.41 9.05	7.04	7.30	060
65710			Corneal transplant	13.97	₹ Z	N A	10.39	11.02	0.61	A N	A A	24.97	25.60	060
65730		_	Corneal transplant	15.87	NA	NA	10.90	11.76	0.70	NA	NA N	27.47	28.33	060
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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

	AUDENDOM D.—TELATIVE	= 	VALUE CIVIL 3 (110 GS)	אטויאוייט דאון טווא		50	5 5 1	/,	ו פראטוטפואן שאוואוואים ופס	יייין ע - שט	בטר ט ויוחואיז א	7007		
CPT 1 HCPCS 2	Мод	Status	Description	Physician work RVUs ³	Fully im- plement- ed non- facility PE RVUs	Year 2007 transi- tional non-facil- ity PE RVUs	Fully implemented facility	Year 2007 transi- tional fa- cility PE RVUs	Mal-prac- tice RVUs	Fully im- plement- ed non- facility total	Year 2007 transi- tional non-facil- ity total	Fully im- plement- ed facility total	Year 2007 transi- tional fa- cility total	Global
65750 65755		۷ ۷	Corneal transplant	16.48	Z Z	Z Z	10.72	11.68	0.74	A Z	Z Z	27.94	28.90	060
		< <	Revise cornea with implant	19.27	N A	Z	11.83	12.89	0.87	A A	A A	31.97	33.03	060
65772		∢ ⊲	Correction of astigmatism	4.90	4.89 NA	5.39 NA	3.95	4.09	0.21	10.00 NA	10.50 NA	9.06	9.20	060
65780		< <	Ocular reconst, transplant	10.23	Z Z	Z Z	8.98	66.6	0.44	Z Z	Z Z	19.65	20.66	060
		⋖ ·	Ocular reconst, transplant	17.64	Y S	A S	11.64	13.19	0.44	Y :	A N	29.72	31.27	060
65782		∢ <	Ocular reconst, transplant	14.98	A S	NA 1	10.27	11.58	0.44	NA C	NA 7.7	25.69	27.00	060
65805		(∢	Drainage of eye	. 6.	1.72	2.07	- - 2 5	1.15	0.0	3.72	4.07	3.04 40.05	3.15	88
65810		∢ •	Drainage of eye	5.61	NA S	A S	4.49	4.66	0.24	AN S	A i	10.34	10.51	060
65815		∢ ⊲	Drainage of eye	5.79 8.63	7.92 VN	9.50 VN	4.56	97.4	0.25	13.96 NA	15.54	10.60	10.80	060
65850		(∢	Incision of eye	11.14	Z Z	Z Z	7.27	8.16	0.52	Z Z	Z Z	18.93	19.82	060
65855		∢ ·	Laser surgery of eye	3.84	3.52	4.12	2.64	2.99	0.19	7.55	8.15	6.67	7.02	010
65860		∢ ⊲	Incise inner eye adhesions	3.54	3.29 NA	3.86	2.10	2.41	0.18	7.01	7.58 NA	5.82	6.13	060
65870		(∢	Incise inner eye adhesions	7.13	(₹ Z	5.79	6.27	0.31	(4 2 Z	ζ <u>φ</u>	13.23	13.71	060
		< <	Incise inner eye adhesions	7.53	Z Z	Z Z	6.20	99.9	0.32	Z Z	¥	14.05	14.51	060
65880		⋖	Incise inner eye adhesions	8.08	Y Y	A A	6.41	6.89	0.35	A N	¥.	14.84	15.32	060
65900		∢ <	Remove eye lesion	12.16	Υ S	¥ ž	9.00	96.6	0.54	¥ ž	¥ ž	21.70	22.66	060
		∢ ⊲	Remove Implant of eye	90.00	₹ 4 2 Z	¥	00.7	0.02	0.4	(d	ζ Δ Ζ Ζ	14.57	15.19	060
66020		< ∢	Injection treatment of eye	1.59	2.44	2.96	1.28	1.40	0.08	4.11	4.63	2.95	3.07	010
		⋖	Injection treatment of eye	1.25	2.32	2.81	1.16	1.25	0.06	3.63	4.12	2.47	2.56	010
66130		∢ <	Remove eye lesion	7.68	7.41	9.06 VIV	4.79	5.42	0.38	15.47	17.15 NA	12.85	13.48	060
66155		(∢	Glaucoma surgery	10.03	ζ ∢ Ζ Ζ	Z Z	8.77	9.23	0.40	Z Z	Z Z	19.21	19.67	060
66160		⋖		11.90	N A	A A	9.50	10.04	0.50	A A	A A	21.90	22.44	060
66165		< <	Glaucoma surgery	9.75	Υ S	Y S	8.72	9.13	0.40	Y S	¥ ž	18.87	19.28	060
66172		< <	Glaucoma surgery	18.02	ξ Z Z	Z Z	14.39	15.03	0.60	ξ Z Z	¥ ¥	33.15	33.79	060
		⋖	Implant eye shunt	15.90	₹ Z	NA	9.74	10.53	0.71	AN	AN	26.35	27.14	060
66185		∢ <	Revise eye shunt	9.25	Y S	Y S	7.20	7.35	0.40	Y S	Υ S	16.85	17.00	060
66225		< <	Repair/draft eye lesion	12.28	(₹ ₹ 2	8 22	8.63	0.55	Z Z	₹ ₹ 2	21.05	21.46	060
		⋖	Follow-up surgery of eye	6.84	9.23	11.10	5.21	5.43	0.30	16.37	18.24	12.35	12.57	060
66500		∢ •	Incision of iris	3.70	ΨZ:	¥ :	3.87	4.46	0.18	Ψ.	Y :	7.75	8.34	060
66505		∢	Incision of Iris	97.07	Z Z	A Z	4.20 1.6	9.4 x	0.20	A A	A N	18.38	18.44	060
66505		< ∢	Removal of iris	13.89	₹ Z	Z Z	9.29	9.86	0.77	Z Z	Z Z	23.95	24.52	060
66625		⋖	Removal of iris	12	Y Y	A A	4.15	4.59	0.26	A A	A A	9.53	6.97	060
66630		∢ <	Removal of iris	7.02	Υ S	¥ ž	5.30	5.62	0.31	¥ ž	¥ ž	12.63	12.95	060
66680 66680		۲ ۵	Benair iris & ciliary body	- 6	ζ	Z Z	2.53	5.00	0.31	(4 2 Z	(4 2 Z	11.63	11.71	060
66682		< ∢	Repair iris & ciliary body	7.07	Υ Z	A N	6.64	6.63	0.31	A A	A A	14.02	14.01	060
		⋖	Destruction, ciliary body	5.05	4.78	5.14	3.60	3.86	0.24	10.04	10.40	8.86	9.12	060
66710		⋖ <	Ciliary transsleral therapy	5.02	4.47 NA	5.00 NA	3.51	3.77	0.23	9.72 NA	10.25 NA	8.76	9.02	060
66720		< <	Destruction, ciliary body	4.77	5.21	5.66	4.20	4.60	0.26	10.24	10.69	9.23	9.63	060
66740		⋖	Destruction, ciliary body	5.05	4.49	4.95	3.61	3.89	0.23	9.74	10.20	8.86	9.14	060
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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

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CPT 1 HCPCS 2	Mod	Status	Description	Physician work RVUs ³	Fully implemented non-facility PE	Year 2007 transi- tional non-facil- ity PE RVUs	Fully implemented facility	Year 2007 transi- tional fa- cility PE RVUs	Mal-prac- tice RVUs	Fully implemented non-facility total	Year 2007 transi- tional non-facil- ity total	Fully implemented facility	Year 2007 transi- tional fa- cility total	Global
66761		۷ ۵	Revision of iris	4.81	4.99	5.46	4.19	4.29	0.20	10.00	10.47	9.20	99.66	060
			Removal of inner eye lesion	5.92	5.51	5.95	4.60	4.76	0.26	11.69	12.13		10.94	060
66820			Incision, secondary cataract	3.88	AN 0	ΑN,	4.59	5.52	0.19	NA NA	Z :		9.59	060
66825		∢ ∢	After cataract laser surgery	8.78 7.7	3.83 AN	0.4 0.5 A	3.46	3.59	0.11	82. AN	44. A N		17.84	060
66830		< ∢	Removal of lens lesion	9.19	Ą Z	Z Z	6.42	6.83	0.36	Z Z	¥ Z		16.38	060
66840		∢ •	Removal of lens material	8.90	A S	¥ S	6.37	6.75	0.39	Z Z	Y S		16.04	060
66850			Removal of lens material	10.22	4 4 Z Z	∀	7.12	7.53	0.45	∀	Z Z	19.79	18.20	060
66920			Extraction of lens	9.85	Υ Z	Z Z	6.71	7.17	0.44	Z Z	Z Z	17.00	17.46	060
		∢.	Extraction of lens	11.28	Y :	¥ :	7.52	8.00	0.49	Y :	Y :	19.29	19.77	060
66940			Extraction of lens	10.04 14.73	Z Z	Z Z	90.7	9.69	0.43	4 4 Z Z	Y Z	17.53 24.43	17.95 25.05	060
		< ∢	Cataract surg w/iol, 1 stage	10.10	Z Z	Z Z	6.14	6.13	0.14	Z Z	Z Z	16.38	16.37	060
66984		⋖ ·	Cataract surg w/iol, 1 stage	10.28	¥ Z	Y :	6.46	7.20	0.39	Y S	Y :	17.13	17.87	060
66985			Insert lens prosthesis	9.63	Y S	Y S	7.11	7.38	0.36	Υ S	Υ S	17.10	17.37	060
66986			Exchange lens prosthesis	12.26	₹ ₹	Y Y	8.00	8.90	0.60	A Z	Z Z	20.86	21.76	090
67005			Partial removal of eye fluid	5.69	(∢ 2 Z	Z Z	4.37	4.75	0.28	Z Z	Z Z	10.34	10.72	060
			Partial removal of eye fluid	98.9	Ϋ́	Y Y	4.79	5.27	0.34	AN A	N A	11.99	12.47	060
67015			Release of eye fluid	6.91	Ψ.	Y S	5.54	6.24	0.34	Ψ.	Ψ.	12.79	13.49	060
67025		∢ <	Replace eye fluid	7.83	7.81	8.89	5.87	6.15	0.34	15.98	17.06	14.04	14.32	060
67028		(∢	Impraint eye drug system	2.52	2.16	2.57	1.26	4. 4.	0.34	4.80	5.21	3.90	4.05	000
			Incise inner eye strands	5.83	Y Z	Y Y	5.48	5.77	0.24	N A	Z	11.55	11.84	060
67031			Laser surgery, eye strands	4.28	4.03	4.47	3.42	3.59	0.18	8.49	8.93	7.88	8.05	060
67036			Removal of inner eye fluid	12.99	Z Z	∀	8.24	8.92	0.58	Y Z	Y Z	21.81	22.49	060
67039			Laser treatment of retina	16.25	(4 2 Z	Z Z	11.05	11.93	0.71	Z Z	Z Z	28.01	28.83	060
		⋖	Laser treatment of retina	19.07	A N	Y Y	12.34	13.38	0.85	A A	N A	32.26	33.30	060
67101			Repair detached retina	8.52 8.27	8.45	8.98	6.13	6.45	0.37	17.34	17.87	15.02	15.34	060
67107			Repair detached retina	16.26	Ş Z	AN AN	10.36	11.09	0.73	N A V	NAN	27.35	28.08	060
67108		⋖ ·	Repair detached retina	22.39	Y Z	Y V	12.97	14.09	1.02	N A	A N	36.38	37.50	060
67110			Repair detached retina	9.92	8.88	9.92	6.92	7.29	0.44	19.24 N	20.28 NA	17.28	17.65	060
67115			Release encircling material	5.85	Z Z	ZZ	4.87	5.04	0.25	Z Z	Z Z	10.97	11.15	060
			Remove eye implant material	6.84	7.31	8.28	5.24	5.47	0.29	14.44	15.41	12.37	12.60	060
67121			Remove eye implant material	11.90	NA NA	NA 7	7.92	8.39	0.53	NA 11	NA F	20.35	20.82	060
67145		(∢	Treatment of retina	6.11	5.29	5.63	4.68	4.88	0.27	11.67	12.01	11.06	11.26	060
		< <	Treatment of retinal lesion	7.44	5.60	6.01	5.18	5.44	0.33	13.37	13.78	12.95	13.21	060
			Treatment of retinal lesion	9.31	5.73	6.38	5.27	5.74	0.44	15.48	16.13	15.02	15.49	060
67230			Treatment of retinal lesion	20. 1	A O	¥ 2 C F	0.03 4.03	6/.II	0.92	NA 23.05	NA 20	31.65	32.83	060
67221			Ocular photodynamic ther	3.45	2.96	4.00	1.40	1.71	0.20	6.61	7.65	5.05	5.36	000
		⋖	Eye photodynamic ther add-on	0.47	0.23	0.25	0.17	0.20	0.05	0.72	0.74	99.0	69.0	ZZZ
67227			Treatment of retinal lesion	7.32	5.96	6.44	5.13	5.44	0.33	13.61	14.09	12.78	13.09	060
67250			Reinforce eve wall	9.40	6.82 V	2 4	7.57	67.8	0.63	- 4.2. AN	AN.	17.44	18.66	060
67255			Reinforce/graft eye wall	9.89	A N	A A	8.31	9.52	0.44	N A	A A	18.64	19.85	060
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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

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CPT 1 HCPCS 2	Mod	Status	Description	Physician work RVUs ³	Fully implemented nonfacility PERVUs	Year 2007 transi- tional non-facil- ity PE RVUs	Fully implemented facility	Year 2007 transi- tional fa- cility PE RVUs	Mal-prac- tice RVUs	Fully im- plement- ed non- facility total	Year 2007 transi- tional non-facil- ity total	Fully implemented facility	Year 2007 transi- tional fa- cility total	Global
67311		∢ <	Revise eye muscle	7.51	4 4 2 2	Z Z	5.58	5.93	0.37	A Z	4 5 2 2	13.46	13.81	060
67314		(∢	Revise eye muscle	8.51	Z Z	Z Z	6.15	6.47	0.39	Z Z	Z Z	15.05	15.37	060
		∢ ·	Revise two eye muscles	10.65	¥ :	Y S	6.93	7.37	0.49	Y :	¥:	18.07	18.51	060
67318		∢ ⊲	Revise eye muscle(s)	8.8 4 6.8	₹ Z	A N	6.53	6.85	0.41	A N	A Z	15.78	16.10	090
67331		< <	Eye surgery follow-up add-on	4.05	Z Z	ZZZ	1.46	1.75	0.21	Z Z	Z Z	5.72	6.01	777
		⋖	Rerevise eye muscles add-on	4.48	A N	N N	1.62	1.93	0.23	N N	Y V	6.33	6.64	ZZZ
67334		⋖ <	Revise eye muscle w/suture	3.97	¥ ž	Y S	1.42	1.71	0.20	Y S	¥ ž	5.59	2.88	ZZZ 222
67340		∢ ∢	Eye suture during surgery	2.49	K K	Z Z	0.90	70.1	0.13	Z Z	Z Z	3.52 6.94	3.69	77.
		< <	Release eye tissue	8.21	Ž	N N	6.05	6.41	0.37	Z Z	Y Y	14.63	14.99	060
67345		⋖・	Destroy nerve of eye muscle	2.96	2.23	2.50	1.73	1.95	0.17	5.36	5.63	4.86	5.08	010
67400		∢	Blopsy eye muscle	78.8	4 4 2 2	A N	1.64 7.0	1.82	ა . ა .	A N	¥ Z	4.66 20.68	4.84 4.84	000
67405		< <	Explore/drain eye socket	8.92	(∢ Z Z	Z Z	8.09	9.37	0.44	Z Z	Z Z	17.45	18.73	060
		⋖	Explore/treat eye socket	10.11	₹ Z	N	8.50	10.35	0.48	Ϋ́	₹ Z	19.09	20.94	060
		⋖	Explore/treat eye socket	66.6	Y Y	Ϋ́	8.48	10.22	0.50	Ϋ́	ΥZ	18.97	20.71	060
67414		∢ •	Explr/decompress eye socket	17.72	Υ :	Z :	11.56	11.94	0.65	Ž:	¥:	29.93	30.31	060
67415		< <	Aspiration, orbital contents	1.76	∀ \$ 2	Z Z	0.61	0.72	0.09	Υ S	Υ \$ Ζ 2	2.46	2.57	000
67430		∢ ⊲	Explore/treat eye socket	21.52	K K	A A	12.90	14.22	0.15	Z Z	4 A	30.63 27.80	39.24 29.95	060
67440		< <	Explore/drain eve socket	14.44	Z	Ž	11.56	13.62	0.70	Z	Z	26.70	28.76	060
		. ≺	Explr/decompress eye socket	18.90	¥ Z	Z Z	12.47	13.58	06:0	Z Z Z	¥ X	32.27	33.38	060
67450		<	Explore/biopsy eye socket	14.99	A A	Ϋ́	12.01	14.05	0.68	Ϋ́	ΥZ	27.68	29.72	060
67500			Inject/treat eye socket		0.60	0.65	0.46	0.33	0.05	2.09	2.14	1.95	1.82	000
67515			Inject/treat eye socket		0.32	0.63	0.53	24.0	0.0	1.04	70.0	- '.' - '.'	2 6	
			Insert eye socket implant		S Z	S A	9.53	10.88	0.72	N N	S A	21.67	23.02	060
67560			Revise eye socket implant		Y Y	NA	9.57	10.94	09.0	Ϋ́	Y V	22.00	23.37	060
67570			Decompress optic nerve		NA 961	NA	10.87	12.93	0.68	NA V	A S	25.68	27.74	090
67710			Drainage or eyend abscess		3.74	2.05 4.98	- 1	1.18	0.00	4.81	6.05	2.15	2.25	010
		. ⋖	Incision of eyelid fold	1.22	3.85	5.01	1.16	1.26	0.06	5.13	6.29	2.44	2.54	010
67800		∢ .	Remove eyelid lesion	1.38	1.41	1.57	0.91	1.01	0.07	2.86	3.02	2.36	2.46	010
67807		∢	Remove eyelid lesions	 88. c	1.69	09.1	90. 6	2 2 2	0.00	3.66	3.87	3.06	3.00	010
67808		< <	Remove evelid lesion(s)	4.41	- K	S A	3.62	3.74	- 61.0	r e	2	8.22	8.34	060
		⋖	Biopsy of eyelid	1.48	3.86	3.47	99.0	0.68	90.0	5.40	5.01	2.20	2.22	000
67820		< <	Revise eyelashes	0.71	0.44	0.56	0.51	0.55	0.04	1.19	1.31	1.26	1.30	000
67830		< ⊲	Revise eyelashes		14.1	717	1.27	85. 1 AB. AB.	0.0	7.80 7.80	3. – 9. – 9. –	2.72	2.83	0 0
67835		< <	Revise evelashes	5,55	t e	Y N	50. 40.	4.48	0.28	AN AN	5 Z	9.87	10.31	060
		< <	Remove eyelid lesion	2.04	3.94	5.10	1.46	1.60	0.10	6.08	7.24	3.60	3.74	010
67850		∢ •	Treat eyelid lesion	1.69	3.24	3.35	1.42	1.46	0.07	5.00	5.11	3.18	3.22	010
67875		∢ <	Closure of eyelid by suture	1.35	2.40	3.08	0.84 50	0.92	0.07	3.82	4.50	2.26	2.34 36	000
67882		(∢	Revision of eyelid	5.81	6.43	7.35	4.51	4.74	0.25	12.49	13.41	10.57	10.80	060
00629		4	Repair brow defect	6.63	7.38	99.8	4.60	5.10	0.38	14.39	15.67	11.61	12.11	060
67901		∢ •	Repair eyelid defect	7.39	Υ «	Y S	5.18	5.36	0.54	Y S	¥ ż	13.1	13.29	060
67903		∢ ∢	Repair eyelid defect Bepair evelid defect	9.60	NA 6.68	NA 8.86	6.31	5.24	0.60	13.51	15.69	16.51	15.89	060
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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

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CPT ¹ HCPCS ²	Mod	Status	Description	Physician work RVUs ³	Fully implemented non-facility PE	Year 2007 transi- tional non-facil- ity PE RVUs	Fully im- plement- ed facility PE RVUs	Year 2007 transi- tional fa- cility PE RVUs	Mal-prac- tice RVUs	Fully im- plement- ed non- facility total	Year 2007 transi- tional non-facil- ity total	Fully implemented facility	Year 2007 transi- tional fa- cility total	Global
67904		∢.	Repair eyelid defect	7.75	7.99	9.24	5.11	5.22	0.41	16.15	17.40	13.27	13.38	060
67906		∢ ⊲		6.78	3.91	5.02	4.52	4.91 7.04	0.46	11.15	12.26	11.76	12.15	060
67909		(∢	Revise evelid defect	5.39	6.26	7.60	4.22	4.78	0.31	11.96	13.30	9.92	10.48	060
		< <	Revise eyelid defect	7.30	A N	A A	4.89	4.82	0.31	Ϋ́	A A	12.50	12.43	060
67912		⋖	Correction eyelid w/implant	6.17	12.98	17.48	4.64	5.35	0.28	19.43	23.93	11.09	11.77	060
67914		∢ ·	Repair eyelid defect	3.67	4.79	5.97	2.70	2.97	0.19	8.65	9.83	6.56	6.83	060
67915		∢ <	Repair eyelid defect	3.18	4.46	5.62	2.51	2.74	0.16	7.80	8.96	5.85	6.08	060
67916		∢ ⊲		5.30 0.40	6.40	29.7 8.08	4.16	4.62	0.28	17.98	13.23	9.74	10.20	060
67921		< ∢	Repair evelid defect	3.39	4.67	5.83	2.58	2.82	0.17	8.23	9:39	6.14	6.38	060
67922		⋖	Repair eyelid defect	3.06	4.36	5.54	2.45	2.68	0.15	7.57	8.75	5.66	5.89	060
67923		∢ •	Repair eyelid defect	5.87	6.50	7.73	4.36	4.83	0:30	12.67	13.90	10.53	11.00	060
67924		∢ <		2.78	6.98	8.46	4.09	4.54	0.30	13.06	14.54	71.01	29.0L	090
67935		∢ ⊲	Repair eyelid would	0.60 10.00	4. 4. - 0.8.	0.40	3.79	4 22	6.0 6.0	13.42	9.19	10.20	10.82	060
67938		< ∢	Remove evelid foreign body	1.33	3.90	5.03	1.24	1.26	0.00	5.29	6.42	2.63	2.65	010
	_	<	Revision of eyelid	5.81	6.67	8.16	4.37	5.05	0.36	12.84	14.33	10.54	11.19	060
		4	Revision of eyelid	5.68	6.87	8.25	4.33	4.86	0.33	12.88	14.26	10.34	10.87	060
99629		4	Revision of eyelid	8.75	8.02	8.88	5.43	5.54	0.37	17.14	18.00	14.55	14.66	060
67971		∢ .	Reconstruction of eyelid	9.78	ΨZ:	₹ Z	6.23	7.03	0.53	Ψ.	Y :	16.54	17.34	060
6/9/3		∢ <	Reconstruction of eyelid	12.85	Υ S	Υ S	7.81	8.96	0.75	Υ S	Ψ « Z 2	21.41	22.56	060
6/9/4	_	∢ <	Reconstruction of eyelid	12.82	Α < Ζ 2	Y Z	7.83	8.90	0.75	4 < Z	A Z	27.40	22.47	060
		(∢		1.37	125	1.37	1.06	1.17	0.00	2.68	2.80	2.63	2.50	010
68040	_	< <	Treatment of eyelid lesions	0.85	0.61	0.69	0.35	0.41	0.04	1.50	1.58	1.24	1.30	000
		< <	Biopsy of eyelid lining	1.35	2.37	3.04	0.86	0.93	0.07	3.79	4.46	2.28	2.35	000
68110		⋖	Remove eyelid lining lesion	1.77	3.10	3.86	1.49	1.61	0.09	4.96	5.72	3.35	3.47	010
68115		∢ <		2.36	4.37	5.58	2.5	1.87	0.12	6.85	8.06	4.18	4.35	010
•	•	∢ ⊲	Remove eyelid lining lesion	4.9Z	0.74	4 7 7	4.09 1.48	24.4	0.24	3.53	3.70	9.23	9.0° 40.0°	030
68200		(∢	Treat evelid by injection	0.49	0.45	0.52	0.29	0.32	0.03	0.96	1.03	0.80	0.83	200
68320		4	Revise/graft eyelid lining	6.36	9.25	10.80	5.35	5.49	0.27	15.88	17.43	11.98	12.12	060
68325		⋖ ·	Revise/graft eyelid lining	8.35	Y Z	A :	6.02	6.43	0.44	Y :	Y :	14.81	15.22	060
68326		∢ <	Revise/graft eyelid lining	8.14	Y S	Y S	5.97	6.32	0.35	Υ <u>Υ</u>	¥ Ş	14.46	14.81	060
68330		(∢	Revise evelid lining	5.57	7.50	896	6.30 4 49	4.67	0.04	1331	14.77	10.30	10.48	060
68335		∶∢	Revise/graft eyelid lining	8.18	A N	A A	5.98	6.30	0.36	Ϋ́	Y Y	14.52	14.84	060
68340		⋖	Separate eyelid adhesions	4.78	6.94	8.41	3.90	4.06	0.21	11.93	13.40	8.89	9.02	060
68360		∢ .	Revise eyelid lining	4.98	6.48	7.67	3.98	4.14	0.22	11.68	12.87	9.18	9.34	060
68362		∢ <	Revise eyelid lining	8.33	Z Z	Υ S	6.03	6.32	0.36	Υ S	Ψ <u> </u>	14.72	15.01	090
68400		< <	harvest eye tissue, alogran	4. 1	AN 6	A A	4.09 4.09	4.38 8.66	44.0	NA NA	4 2 0 V	9.42	9.6	0.00
68420		(∢	Incise/drain tear gland	2.30	55.4	5.80	1.39	1.93	0.00	6.96	8.21	3.80	45.34	010
	_	< <	Incise tear duct opening	0.94	1.18	1.86	1.15	1.24	0.05	2.17	2.85	2.14	2.23	010
68500		⋖	Removal of tear gland	12.37	AN	N	8.65	9.48	0.55	Ϋ́	NA	21.57	22.40	060
68505		∢ ·	Partial removal, tear gland	12.29	A S	Y S	8.78	10.21	0.55	YN,	Y !	21.62	23.05	060
68510		∢ <	Biopsy of tear gland	4.60	5.23	6.82	2.04	2.09	0.23	10.06	11.65	6.87	6.92	000
68520		< <	Rioney of tear sac	8.50	Z Z	₹	0.30	7 . 6	0.37	ζ Δ Ζ Ζ	۲ م ۲ م	5.43 20.43	9.09	060
68530		< <	Clearance of tear duct	3.65	5.57	7.54	2.05	2.50	0.18	9.40	11.37	5.88	6.33	010
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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

ADL	ADDENDOM D.—MELATIVE	ت آ آ	VALUE UNITS (AVUS) A	שואשע	יוי טפט אטוואייטרטיוי טפראודט טא),;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;	בל בלים בלים	DELENIMINA INEDICARE L'ATMENIO		/007		ם
CPT 1 HCPCS ²	Mod	Status	Description	Physician work RVUs ³	Fully implemented non- facility PE RVUs	Year 2007 transi- tional non-facil- ity PE RVUs	Fully implemented facility	Year 2007 transi- tional fa- cility PE RVUs	Mal-prac- tice RVUs	Fully implemented non-facility total	Year 2007 transi- tional non-facil- ity total	Fully implemented facility	Year 2007 transi- tional fa- cility total	Global
68540 68550		۷ ۷ ۰	Remove tear gland lesion	11.83	Y Y Z	ZZ	8.28	9.14	0.52	ZZ	Z Z Z	20.63	21.49	060
68700		∢ ∢	Repair tear ducts	7.59	306	8 80 8 80	2.60	5.90	0.32	N 2.	NA 90	13.51	13.81	090
68720		∶∢	Create tear sac drain	9.70	A A	N A A	6.86	7.63	0.44	N A A	N A A	17.00	17.77	060
68745		∢ <	Create tear duct drain	9.62	Z Z	Y Z	7.21	7.71	0.52	Z Z	Z Z	17.35	17.85	060
68760		< <	Close tear duct opening	1.73	2.62	3.32	1.47	1.59	0.09	4.44	5.14	3.29	3.41	010
68761		∢ <	Close tear duct opening	1.36	1.85	2.17	1.26	1.31	0.06	3.27	3.59	2.68	2.73	010
68801		< <	Dilate tear duct opening	0.94	1.79	1.91	1.43	1.47	0.05	2.78	2.90	2.42	2.46	010
•		∢ <	Probe nasolacrimal duct	2.59	3.42	3.61	2.70	2.69	0.10	6.11	6.30	5.39	5.38	010
68815		∢ ∢	Probe nasolacrimal duct	3.20	NA 6.46	7.81	2. 5 4. 5	2.35	0.13	NA 9.83	11.18	0. 10.	6.10	010
		< €	Explore/irrigate tear ducts	1.25	1.32	1.53	1.09	- -	0.00	2.63	2.84	2.40	2.42	010
68850		∢ ⊲	Injection for tear sac x-ray	0.80	0.74	0.85	0.61	0.66	0.0 4 c	1.58	1.69	1.45	1.50	000
69005		< <	Drain external ear lesion	2.1	2.71	2.88	5.43	2.7.	0.17	4.99	5.16	3.71	4.02	010
•		4	Drain outer ear canal lesion	1.48	3.80	3.95	1.74	1.99	0.12	5.40	5.55	3.34	3.59	010
69100		∢ <	Biopsy of external ear	0.81	1.82	1.74	0.38	0.39	0.03	2.66	2.58	1.22	1.23	000
69110		< <	Biopsy of external ear carial	3.43	7.49	6.94	4.22	4.42	0.30	11.22	10.67	7.95	8.15	060
		Α.	Removal of external ear	4.04	Y Y	Z Y Y	5.01	5.90	0.38	Y Y	A A	9.43	10.32	060
69140		∢ •	Remove ear canal lesion(s)	7.96	Y S	Y S	12.17	13.03	0.65	A S	AN S	20.78	21.64	060
69150		∢ ∢	Remove ear canal lesion(s)	13 41	74.0 V A N	9.6 V N	10.38	2.53	1.20	9.30 AA	0.80 NA	25.01	6.08 27.31	060
		< ∢	Extensive ear/neck surgery	22.96	Z Z	Z Z	14.75	18.39	1.92	Z Z	Z Z	39.63	43.27	060
69200		∢ •	Clear outer ear canal	0.77	2.02	2.30	0.56	0.55	0.06	2.85	3.13	1.39	1.38	000
69205		∢ ∢	Clear outer ear canal	0.20	0 55 C	0 A	7 5	 છે. ૮	0.0	1 2 A	1 2 7	2.42	2.60	200
		∶∢	Clean out mastoid cavity	0.83	2.35	2.37	09.0	0.70	0.07	3.25	3.27	1.50	1.60	000
69222		∢ (Clean out mastoid cavity	1.40	3.63	3.80	1.7	1.98	0.12	5.15	5.32	3.23	3.50	010
69300		Υ Φ	Revise external ear	6.35	ΨZ Z	Y Y	4.44	4.28	0.72	Y Z	A A	11.51	11.35	\ \ \
69320		< <	Rebuild outer ear canal	16.93	Z Z	Z Z	17.92	20.91	1.37	Z Z	Z Z	36.22	39.21	060
69400		∢.	Inflate middle ear canal	0.83	2.58	2.27	0.61	0.66	0.07	3.48	3.17	1.51	1.56	000
69401		∢ ∢	Intiate middle ear canal	0.63	3.34	3.47	0.55	0.63	0.05	2, 6	1.97	1.23	7.37	000
		. ∢	Incision of eardrum	1.33	3.02	3.13	1.39	1.54	0.11	4.46	4.57	2.83	2.98	010
69421		∢ •	Incision of eardrum	1.73	Y !	Y S	1.66	2.04	0.15	Y S	A S	3.54	3.92	010
69424		∢ ⊲	Remove ventilating tube	0.85	2.15	8 1.3	0.61	0.66	0.07	3.07	3.10	1.53	3.24	000
: :		< ∢	Create eardrum opening	1.96.1	N A N	N A	1.70	2.15	0.19	Z Y	N N	3.85	4.30	010
69440		∢.	Exploration of middle ear	7.56	¥ :	Y :	8.20	8.65	0.61	¥ :	Y :	16.37	16.82	060
69450		∢ <	Modelidademy	5.56	Ψ < Z Z	Y S	6.88	r0. /	0.45	Υ S	Z Z	12.89	13.02	060
69502		< <	Mastoidectomy	12.36	Z Z	ζ <u>Ψ</u>	9.87	11.18	1.00	Z Z	Z Z	23.23	24.54	060
69505		⋖ ·	Remove mastoid structures	12.97	¥ :	Y :	14.57	16.57	1.05	YZ:	Y :	28.59	30.59	060
69511		∢ <	Extensive mastoid surgery	13.50	Ψ 4 2 2	Y S	14.69	16.81	1.09	Y Z	Y S	29.28	31.40	060
69535		∢ ∢	Extensive mastold surgery	37.17	 ₹ ₹ Z	₹ ₹ 2 Z	23.79	29.99	2.92	₹ ₹ 2 Z	Z Z	63.88	70.08	060
TOO!	7	a o or oterine	Modical Accession		_ <	- 1400:100	0 4 1 0 0	- and h.						

ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

Č	ADDENDOM D LECATIVE	: :	ELATIVE VALUE CIVITS (11VOS) AND I	ורל הלול הלול		2	ב ב ב		ויורטוטחויו			2001		נ
CPT 1 HCPCS 2	Mod	Status	Description	Physician work RVUs ³	Fully implemented non-facility PE	Year 2007 transi- tional non-facil- ity PE RVUs	Fully implemented facility	Year 2007 transi- tional fa- cility PE RVUs	Mal-prac- tice RVUs	Fully implemented non-facility total	Year 2007 transi- tional non-facil- ity total	Fully implemented facility	Year 2007 transi- tional fa- cility total	Global
69540		4 4	Remove ear lesion	1.20	3.58	3.71 NA	1.68	1.91	0.10	4.88 NA	5.01 NA	2.98	3.21	010
				19.61	Z Z	Z	16.31	19.63	1.59	Z Z	Z	37.51	40.83	060
69554			Remove ear lesion	35.63	₹ \$ Z 2	Z Z	22.05	28.33	2.91	Z Z	Z Z	60.59	66.87	060
69602			Mastold surgery revision	13.56	₹ ₹ Z Z	X X Z Z	11.39	12.80	1.10	Z Z	ξ	26.05	27.46	060
				14.00	Y V	A A	14.84	17.52	1.14	Y Y	Y Y	29.98	32.66	060
69604			Mastoid surgery revision	14.00	∀	Y Z	11.50	13.17	4.6	Y Z	₹ S	26.64	28.31	060
69610			Repair of eardrum	4.42 4.42	4.4	5.28	2.26	3.03	0.36	9.19	10.06	7.04	7.81	010
•			Repair of eardrum	5.88	9.93	10.85	5.21	6.04	0.48	16.29	17.21	11.57	12.40	060
69631		∢ <	Repair eardrum structures	9.85	Υ S	Y S	10.36	11.01	0.80	Y S	₹ S	21.01	21.66	060
69633		(∢	Rebuild eardrum structures	12.08	₹ Z	Z Z	11.75	12.76	0.98	X Z	ζ	24.81	25.82	060
69635		∢.	Repair eardrum structures	13.31	Y Z	A :	14.64	16.25	1.08	YZ:	¥:	29.03	30.64	060
69636		∢ <	Rebuild eardrum structures	15.20	₹ S	Y S	16.39	18.62		Y S	¥ ź	32.82	35.05	060
69641		< <	Revise middle ear & mastoid	12.69	(4 2 Z	ζ	11.15	12.40	1.5	ζ	Z Z	24.87	26.12	060
		< <	Revise middle ear & mastoid	16.81	Z Z	A A	13.84	15.71	1.36	Y Y	Y Y	32.01	33.88	060
69643		∢.	Revise middle ear & mastoid	15.36	Y :	¥:	12.63	14.30	1.24	₹ Z	Y Z	29.23	30.90	060
69644		∢	Revise middle ear & mastoid	17.00	¥ ₹	A N	16.86	19.56	1.37	Ψ Z Z Z	A N	35.23	37.93	060
69646		< <	Revise middle ear & mastoid	18.14	Z Z	Z Z	17.19	19.91	1.46	ZZ	Z Z	36.79	39.51	060
		⋖	Release middle ear bone	9.62	Y V	N A	8.53	69.6	0.78	A A	¥	18.96	20.02	060
69660	•		Revise middle ear bone	11.88	₹ Z	Y Z	9.37	10.75	0.96	Y Z	¥ Z	22.21	23.59	060
69662			Revise middle ear bone	15.42	Z Z	Z Z	11.11	13.12	1.25	ZZ	Z Z	27.78	29.79	060
			Repair middle ear structures	9.74	Y Z	Y Y	8.79	9.70	0.79	Y S	¥	19.32	20.23	060
69667			Repair middle ear structures	9.75	₹ ₹	Y Z	8.70	9.68	0.79	Y Z	¥ Z	19.24	20.22	060
69676			Remove middle ear nerve	9.51	Y Z	Y Y	9.50	10.46	0.81	Z Z	Y Y	19.82	20.78	060
00269		∢.	Close mastoid fistula	8.22	₹ Z	Y :	7.54	8.84	0.67	Y :	¥ :	16.43	17.73	060
69/11			Hemove/repair hearing aid	10.42	4 4 2 2	A N	9.29	10.44	0.83	∀	A Z	20.54	21.69	060
69715			Temple bne implnt w/stimulat	18.72	Z Z	Z Z	11.74	14.24	1.48	Z Z	₹ Ž	31.94	34.45	060
69717		∢.	Temple bone implant revision	15.21	₹ Z	A :	11.34	13.72	0.90	Y Z	¥.	27.45	29.83	060
69/18			Revise temple bone implant	18.97	₹ 4 Z Z	Z Z	19.76	16.45	13.5	∀	A Z	41.94 00.00	38.63	060
69725			Release facial nerve	27.36	Z Z	Z Z	16.01	19.15	2.44	Z Z	Z Z	45.81	48.95	060
69740		∢.	Repair facial nerve	16.12	Y :	A :	10.97	12.83	1.27	Y :	¥:	28.36	30.22	060
69745			Repair tacial nerve	16.84 8 55	₹	Y Z	11.69	14.18	1.14	Y Z	₹ S	29.67	32.16	060
69802			Incise inner ear	13.32	(Z Z	10.38	11.87	1.06	(<u>4</u>	¥ Ž	24.76	26.25	060
			Explore inner ear	14.49	Ą Z	A A	9.64	11.34	1.12	A A	A A	25.25	26.95	060
90869			Explore inner ear	12.45	Υ S	Y S	9.22	10.61	0.0	Y S	¥ ż	22.67	24.06	060
69840			Estabilish linner ear window	10.32	ζ	Y Y	9.60	10.83	0.30	4 4 2 2	Z Z	20.88	23.07	060
			Remove inner ear	11.08	Y Z	A A	9.94	11.02	0.90	Z	¥	21.92	23.00	060
69910			Remove inner ear & mastoid	13.73	Y Z	A :	9.64	11.37	1.07	YZ:	Y :	24.44	26.17	060
69915			Incise inner ear nerve	22.56	∀	Y Z	13.10	15.66	1.69	Y Z	Y Z	37.35	39.91	060
69950			Incise inner ear nerve	27.38	(₹ ₹	14.99	17.96	2.28	(44.65	47.62	060
69955			Release facial nerve	29.14	¥ Y	A A	16.71	20.26	2.48	Z A	A A	48.33	51.88	060
10DT pod	sab bue sabou	descriptore	only are conviight 2005 American Medical Associa	doi: IIV doi:	A boynoady at	noticeble E	ABC/DEABC	, inco						

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

ADL	FINDOM		ADDENDOM D.——RELATIVE VALUE ONITS (RVOS) AND	עם ואוםר	ND RELATED INFORMATION USED IN				DELERIMINING IMEDICARE L'ATMENTS	TATIVE	בטר טוא:	7007	-CONTINOED	<u>۔</u>
CPT 1 HCPCS 2	Mod	Status	Description	Physician work RVUs ³	Fully im- plement- ed non- facility PE RVUs	Year 2007 transi- tional non-facil- ity PE RVUs	Fully implemented facility	Year 2007 transi- tional fa- cility PE RVUs	Mal-prac- tice RVUs	Fully implemented non-facility	Year 2007 transi- tional non-facil- ity total	Fully im- plement- ed facility total	Year 2007 transi- tional fa- cility total	Global
09669 07669		4 4	Release inner ear canal	29.14 32.13	A A	A A	15.12 17.46	18.86	2.17	A A	A A	46.43	50.17	060
69990		α <	Microsurgery add-on	3.46	A S	A N	1.24	1.66	0 0	NA 10	NA 7	5.59		22.5
70010	26	∢ ∢	Contrast x-ray of brain	1.19	0.41	0.40	0.41	0.40		1.65	1.64	1.65		XX
70010		۷,	Contrast x-ray of brain	0.00	2.50	3.88	Ž:	₹ :	0 0	2.72	4.10	₹ :		X
70015	26		Contrast x-ray of brain Contrast x-ray of brain	1.19	0.42	2.05	0.42	0,40		1.69	3.40	N 1-		žž
	TC	< •	Contrast x-ray of brain	0.00	2.57	1.66	Ž:	¥:		2.65	1.74	¥:		XX
70030	26		A-ray eye for foreign bodyX-ray eye for foreign body	0.17	0.06	0.52	0.08	90.0		0.83	0.72	0.24		žž
	TC		X-ray eye for foreign body	0.00	0.57	0.46	N A	N		0.59	0.48	N		X
70100	26		X-ray exam of jaw X-ray exam of jaw	0.18	0.05	09:0	A C	AN O		0.86	0.81	O 24		××
	15		X-ray exam of jaw	0.00	09:0	0.54	Z Z	Z Z		0.62	0.56	Z Z		X
70110	96		X-ray exam of jaw	0.25	0.83	0.73	AN C	A S		1.13	1.03	N S		××
70110	122		X-ray exam of jaw	0.00	0.75	0.65	N S	N A	0.0	0.79	0.69	Z Y		ξ× ×
70120			X-ray exam of mastoids	0.18	0.71	0.69	NA	NA		0.94	0.92	NA		XX
70120	26	∢ <	X-ray exam of mastoids	0.18	0.05	0.06	0.05	90:0		0.24	0.25	0.24		×}
70130	<u>:</u> د	۲ ۷	X-ray exam of mastoids	0.00	1.19	0.97	¥ ¥	¥ ¥		1.60	1.38	¥ ¥		ž
	26	< <	X-ray exam of mastoids	0.34	0.11	0.11	0.11	0.11	0.02	0.47	0.47	0.47		X
70130	10		X-ray exam of mastoids	0.00	1.08	0.86	¥ ž	¥ S		1.13	0.91	¥ S		× š
70134	26	۷ ۵	X-ray exam of middle ear	9. C	0.90	0.87	A L	A L		0.47	0.47	NA 0 47		X X
	12	< ∢	X-ray exam of middle ear	0.00	0.84	0.76	Z Z	Z	0.05	0.89	0.81	Z		X
70140			X-ray exam of facial bones	0.19	0.56	0.65	A S	¥ 8		0.80	0.89	¥ c		X
70140	 10 10	∢ ∢	X-ray exam of facial bonesX-rav exam of facial bones	0.00	0.05	0.06	0.05 AN	0.06 NA		0.25	0.26	CZ.O		×××
)	< ∢	X-ray exam of facial bones	0.26	0.88	0.87	A A	Z Z		1.20	1.19	Z Z		X
70150	26	⋖ ·	X-ray exam of facial bones	0.26	0.08	0.08	0.08	0.08		0.35	0.35	0.35		X
70150	 ၁	∢ ⊲	X-ray exam of facial bonesX-ray exam of nasal hones	0.00	0.80	0.79	A A	₹ Z	0.05	0.85	0.84	₹ Z		××
70160	26	۷.	X-ray exam of nasal bones	0.17	0.05	0.06	0.05	90.0		0.23	0.24	0.23		X
70160	TC	∢ <	X-ray exam of nasal bones	0.00	0.67	0.56	Ϋ́	¥ 2		0.69	0.58	¥ 2		X
70170	26	∢ ∢	X-ray exam of tear duct	0.30	0.10	0.10	0.10	0.10		0.47	0.41	0.41		žž
	TC	⋖	X-ray exam of tear duct	0.00	0.00	0.71	Υ A	Z		90.0	0.77	Z		XX
70190	6		X-ray exam of eye sockets	0.2	0.75	0.71	N S	N S		1.01	0.97	Y S		× š
70190			X-ray exam of eve socketsX-ray exam of eve sockets	0.00	0.0	0.07	è Z	S Z	0.0	0.72	0.68	NA NA		ξ××
			X-ray exam of eye sockets	0.28	0.91	0.88	N	NA		1.25	1.22	NA		XX
70200	26		X-ray exam of eye sockets	0.28	0.09	0.09	0.09	0.00		0.38	0.38	0.38		×}
70210)		X-ray exam of sinuses	0.00	0.57	0.65	¥ ₹	¥ ₹		0.79	0.87	¥ Ž		XX
	26	4	X-ray exam of sinuses	0.17	0.05	90.0	0.05	90.0		0.23	0.24	0.23		XX
70210	 2 	∢ <	X-ray exam of sinuses	0.00	0.53	0.60	¥ ž	Y S		0.57	0.64	¥ S		×}
70220	26	۲ ۵	X-ray exam of sinuses	0.73	70.0	0.00	A 0	Z C		0.00	0.34	NA 0.33		X X
70220	22		X-ray exam of sinuses	0.00	0.67	0.75	Ž Ž	S Z		0.72	0.80	S Z		X
TOO!	י טמט	400000	Signal Accident Accident Accident	1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	/ Post and Oct.	/ = 0 400 10 = 1	0,00							

ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

קל	FINDOM	֝֝֝֝֝֝֝ ֡֡	ADDENDOM D NELATIVE VALUE ONITS (1100S) AND I	ורר ר			ان 1	/,	בילטוטוואו ג	1 1 1	בט מואוז	,		נ
CPT 1 HCPCS ²	Мод	Status	Description	Physician work RVUs ³	Fully implemented non-facility PERVUs	Year 2007 transi- tional non-facil- ity PE RVUs	Fully implemented facility	Year 2007 transi- tional fa- cility PE RVUs	Mal-prac- tice RVUs	Fully im- plement- ed non- facility total	Year 2007 transi- tional non-facil- ity total	Fully implemented facility	Year 2007 transi- tional fa- cility total	Global
70240		ح ح	X-ray exam, pituitary saddleX-ray exam, pituitary saddle	0.19	0.62	0.52	0.06	NA 0.06	0.03	0.84	0.74	NA 0.26	NA 0.26	××
70240		∢ ₫	X-ray exam, pituitary saddleX-ray exam of skull	0.00	0.56	0.46	A Z	A Z	0.02	0.58	0.48	A N	Z Z	××
70250			X-ray exam of skull	0.24	0.07	0.08	0.07	0.08	0.0	0.32	0.33	0.32	0.33	ξ× ×
70250	TC		X-ray exam of skull	0.00	0.65	0.63	Ϋ́	¥ S	0.04	0.69	0.67	Z Z	¥ ž	×}
70260	26		A-ray exam of skull	0.9 48.0	0.10	0.30	0.10	0.17	0.00	0.46	0.47	0.46	0.47	XX
		Α.	X-ray exam of skull	0.00	0.81	0.87	Y S	N N	0.00	0.87	0.93	Z	Ϋ́ Y	×
70300	26		X-ray exam of teethx-ray exam of teeth	0.10	0.24	0.29	N C	N O	0.03	0.37	0.42	A P	N O	××
70300	100		X-ray exam of teeth	0.00	0.03	0.25	S.S.	S \(\frac{\dagger}{4} \)	0.02	0.23	0.27	Y AN	N S	₹×
70310			X-ray exam of teeth	0.16	0.83	0.58	AN S	A !	0.03	1.02	0.77	A S	A S	X
70310	26		X-ray exam of teeth	0.16	0.05	0.07	0.05	0.07	0.0	0.22	0.24	0.22	0.24	× }
70320	<u>:</u> د		A-ray exam of teeth	0.00	0.98	0.59	¥ ¥	¥ ¥	0.02	1.26	0.53	¥ ¥	¥ ¥	ž×
	26	< <	Full mouth x-ray of teeth	0.22	90.0	0.08	90.0	0.08	0.01	0.29	0.31	0.29	0.31	X
	2	⋖ ·	Full mouth x-ray of teeth	0.00	0.92	0.82	₹ Z	¥:	0.05	0.97	0.87	¥:	₹ Z	X
70328	. 0	∢ <	X-ray exam of jaw joint	0.18	0.64	0.57	NA 90 C	N S	0.03	0.85	0.78	A S	NA R	××
70328		< <	X-ray exam of jaw joint	0.00	0.58	0.51	N A	8. ≥	0.02	0.60	0.53	NAN A	NA AN	₹×
		⋖	X-ray exam of jaw joints	0.24	1.04	0.95	₹ Z	N A	90.0	1.34	1.25	¥ N	₹ V	×
70330	26		X-ray exam of jaw joints	0.24	0.08	0.08	0.08	0.08	0.01	0.33	0.33	0.33	0.33	X
703307	္မ		X-ray exam of jaw jointsX-ray exam of jaw ioint	0.00	0.96	0.87	A Z	Z Z	0.05	1.01	0.92	A A	A Z	××
	26		X-ray exam of jaw joint	0.54	0.17	0.19	0.17	0.19	0.02	0.73	0.75	0.73	0.75	X
70332	2		X-ray exam of jaw joint	0.00	1.32	1.91	₹ Z	¥:	0.12	1.44	2.03	¥.	₹ Z	X
70336	26		Magnetic image, jaw joint	1.48 4.48	12.94	12.03	NA 53	A C	0.66	15.08	14.17	AN C	NA P. S.	××
70336	22	< <	Magnetic image, jaw joint	0.00	12.41	11.53	NA NA	Z Z	0.59	13.00	12.12	N A	N A	X
70350		∢.	X-ray head for orthodontia	0.17	0.33	0.42	A S	A !	0.03	0.53	0.62	¥ S	A S	X
70350	76		X-ray head for orthodontiaX-ray head for orthodontia	/L.0	0.05	0.07	0.05 AN)0.0 NA	10.0	0.23	0.25	0.23 NA	0.25 NA	××
			Panoramic x-ray of jaws	0.20	0.31	0.56	N A	Ž	0.05	0.56	0.81	¥ Y	A A	X
70355	26	∢ <	Panoramic x-ray of jaws	0.20	0.07	0.07	0.07	0.07	0.0	0.28	0.28	0.28	0.28	× }
70360	2	< <	X-ray exam of neck	0.00	0.59	0.51	ΣŽ	¥ ₹	0.03	0.79	0.71	ΣŽ	ΣŽ	₹×
70360	26		X-ray exam of neck	0.17	0.06	0.06	90.0	90:0	0.01	0.24	0.24	0.24	0.24	X
70360	္က		X-ray exam of neck	0.00	1 70	0.45	A Z	A A	0.00	0.56	0.47	A A	A N	××
			Throat x-ray & fluoroscopy	0.32	0.10	0.10	0.10	0.10	0.01	0.43	0.43	0.43	0.43	X
70370			Throat x-ray & fluoroscopy	0.00	1.60	1.38	¥ ž	Y S	0.07	1.67	1.45	¥ ž	¥ ž	× }
70371	26	< <	Speech evaluation, complex	0.0 4.8.0	0.27	0.28	0.27	0.28	0.0	1.15	1.10	1.15	1.16	XX
	2	⋖	Speech evaluation, complex	0.00	1.27	1.90	N	N A	0.12	1.39	2.02	¥ Z	A A	××
70373	: 0		Contrast x-ray of larynx	4.0	1.70	1.87	N S	Y S	0.13	2.27	2.44	AN C	NA 8	× }
70373	20		Contrast x-ray of larynx	0.0	1.57	1.74	N S	<u>+</u> &	0.02	1.68	1.85	S N	0.90 AN	XX
70380			X-ray exam of salivary gland	0.17	0.82	0.75	NA	Y Y	0.05	1.04	0.97	NA.	N S	X
7038070380	9 E		X-ray exam of salivary glandX-ray exam of salivary gland) C C	0.05	0.06	0.05 NA	90:00 NA	10.0	0.23	0.24	0.23 NA	0.24 NA	××
70390			X-ray exam of salivary duct	0.38	2.44	2.04	Z Z	Z Z	0.13	2.95	2.55	Z Z	Z Z	XX
						1	1]		-	-			

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

		<u>.</u>		ורלים היים היים)	20		<u> </u>)			2		1
CPT 1 HCPCS 2	Mod	Status	Description	Physician work RVUs ³	Fully implemented non- facility PE RVUs	Year 2007 transi- tional non-facil- ity PE RVUs	Fully implemented facility	Year 2007 transi- tional fa- cility PE RVUs	Mal-prac- tice RVUs	Fully im- plement- ed non- facility total	Year 2007 transi- tional non-facil- ity total	Fully implemented facility	Year 2007 transi- tional fa- cility total	Global
70390	26		X-ray exam of salivary duct		0.13	0.12	0.13	0.12	0.05	0.53	0.52	0.53	0.52	XX
70390	TC	⋖・	X-ray exam of salivary duct	0.00	2.31	1.92	Υ Z	¥:	0.11	2.42	2.03	¥:	¥:	X
70450	90		Ct head/brain w/o dye		5.0	9.0.0 9.0.0	A C	AN C	82.0	17.0	6.18	Σ Σ Σ	Y Y	ž š
70450			Ot head/brain w/o dye		4.84	4.76	S N	NA N	0.25	5.09	5.01	2 X	<u> </u>	××××××××××××××××××××××××××××××××××××××
70460			Ct head/brain w/dye		6.81	6.24	A V	Ϋ́	0.35	8.29	7.72	Y V	A A	××
70460	26		Ct head/brain w/dye		0.39	0.38	0.39	0.38	0.05	1.57	1.56	1.57	1.56	×
	٠ د		Ct head/brain w/dye		6.41	5.86	¥ Ş	¥ Ş	0.30	6.71	6.16	¥ S	Υ S	× }
70470	90		Ct head/brain w/o & w/dye		8.78	- / . /	Z Z	A C	0.43	9.99	9.4	¥ [NA 76	ž
70470	22		Ct head/brain w/o & w/dye		7.85	7.28	ž	2 8	0.37	8.22	7.65	ž	2 Z	××××××××××××××××××××××××××××××××××××××
			Ct orbit/ear/fossa w/o dye		8.85	6.08	A V	₹ Z	0.31	10.44	7.67	Ą Z	Ą Z	××
70480	26		Ct orbit/ear/fossa w/o dye		0.44	0.43	0.44	0.43	90.0	1.78	1.77	1.78	1.77	××
70480	۳ 		Ct orbit/ear/fossa w/o dye		8.41	5.65	Y :	¥:	0.25	8.66	5.90	¥ :	¥:	X
70481			Ct orbit/ear/fossa w/dye		10.46	7.21	Y S	V S	0.36	12.20	8.95	Y S	A S	× ?
70481	07 E		Ct orbit/ear/fossa w/dye		84.0	0.40	84.0	0.40	0.00	26.01	1.90	28.7	06. Z	<u> </u>
	: 2		Ct orbit/ear/fossa w/o&w/dye		11 00	0.70	₹	X 4	0.30	12.87	10.56	Υ Δ Ζ	Z Z	< ×
70482	26		Ct orbit/ear/fossa w/o&w/dye		0.51	0.00	0.51	0.49	0.00	202	2.00	202	2002	XX
	2		Ct orbit/ear/fossa w/o&w/dye		11.48	8.19	N A V	¥Z	0.37	11.85	8.56	Y Y	Z Y	XX
			Ct maxillofacial w/o dye		7.07	5.59	Ą	Ą	0.30	8.51	7.03	Ϋ́	A A	××
70486	26		Ct maxillofacial w/o dye		0.39	0.38	0.39	0.38	0.02	1.58	1.57	1.58	1.57	××
70486	10 		Ct maxillofacial w/o dye		6.67	5.22	Y Y	Y Y	0.25	6.92	5.47	Y Z	Y Y	×
70487			Ct maxillofacial w/dye		8.75	6.77	A S	¥ S	0.36	10.41	8.43	Y S	A S	× š
	C		Of maxillofocial w/dyo		0.40	44.0	0.40	4 5	0.00	20.1	00.1	20.7	00.	< >
70488	2		Ct maxillofacial w/dye		10.86	85.9	Y Y	¥	0.30	12.71	10.23	¥ ₹	₹ ₹	ξ×
	26		Ct maxillofacial w/o & w/dye		0.49	0.47	0.49	0.47	0.06	1.97	1.95	1.97	1.95	××
70488	TC		Ct maxillofacial w/o & w/dye		10.37	7.91	Y Y	¥.	0.37	10.74	8.28	N	Y Y	×
70490			Ct soft tissue neck w/o dye		6.78	5.56	A i	A S	0.31	8.37	7.15	V V	¥!	×
70490	0 Z E		Ct soft tissue neck W/o dye		0.45	0.43 5.43	0.45	0.43 6.72	0.00	6.79	1.//	6/.	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	×
70491	<u>:</u>		Ct soft tissue neck w/dve		0,00	0.70	Z Z	Z Z	0.36	10.13	9.30 8.44	Z Z	Z Z	XX X
	26		Ct soft tissue neck w/dye		0.48	0.46	0.48	0.46	0.00	1.92	1.90	1.92	1.90	××
70491	7C		Ct soft tissue neck w/dye		7.91	6.24	N A	A A	0.30	8.21	6.54	A A	A A	××
70492			Ct sft tsue nck w/o & w/dye		10.53	8.30	Y Z	A S	0.43	12.41	10.18	A S	Ψ,	×
70492	0 Z E		Ct sit tsue nck w/o & w/dye		0.51	0.48	15.0	0.48	0.00	2.02	99.1	Z.OZ	56. Z	××
70496	<u>:</u>		Ct andiodraphy head		17.86	12.87	Z Z	Z Z	0.97	20.33	15.28	Z Z	Z Z	XX X
	26		Ct angiography, head		0.62	0.58	0.62	0.58	0.08	2.45	2.41	2.45	2.41	××
70496	TC		Ct angiography, head		17.24	12.28	Ϋ́	A A	0.58	17.82	12.86	A A	N A	××
70498			Ct angiography, neck		17.92	12.88	Y Y	₹ Z	99.0	20.33	15.29	Y Y	Y Y	×
70498	26		Ct angiography, neck		0.63	0.59	0.63	0.59	0.08	2.46	2.42	2.46	2.42	×
70498	 		Ct angiography, neck		17.29	12.30	¥ Ş	¥ ž	0.58	17.87	12.88	¥ S	Υ S	×}
70540	90		Mri orbit/food/not/ w/o dye		86.40	12.50	Y 0 0	A C	0.45	0.70	14.30	Y S	Y S	<
	 T C		Mri orbit/face/neck w/o dye		14.50	12.05	0.40 NA	0.43 VA	00.0	14.89	12 44	90. AN	00.1 AN	X X
70542)		Mri orbit/face/neck w/dye		16.03	14.52	Z Z	¥ Z	0.54	18.19	16.68	¥ Z	Z Z	××
	26	⋖	Mri orbit/face/neck w/dye	1.62	0.57	0.54	0.57	0.54	0.07	5.26	2.23	2.26	2.23	×
70542	TC	⋖	Mri orbit/face/neck w/dye	0.00	15.46	13.98	Y Y	₹ Z	0.47	15.93	14.45	Y Z	Y Y	×
70543		∢ •	Mri orbt/fac/nck w/o & w/dye	2.15	19.81	24.20	A S	Ϋ́	0.94	22.90	27.29	Y Z	A !	X
/0543	92	<	Mri orbt/fac/nck w/o & w/dye	2.15	0.76	0.72	0.76	0.72	0.10	3.01	7.87	3.01	2.97	XX

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

קל	יייסטייי	<u>.</u>	ADDENDOM D NELATIVE VALUE ONITS (1100S) AND I	ורר ר		200			ואור	- ⊔				د
CPT 1 HCPCS ²	Mod	Status	Description	Physician work RVUs ³	Fully implemented non- facility PE RVUs	Year 2007 transi- tional non-facil- ity PE RVUs	Fully im- plement- ed facility PE RVUs	Year 2007 transi- tional fa- cility PE RVUs	Mal-prac- tice RVUs	Fully im- plement- ed non- facility total	Year 2007 transi- tional non-facil- ity total	Fully implemented facility	Year 2007 transi- tional fa- cility total	Global
7054370544	TC	۷ د	Mri orbt/fac/nck w/o & w/dye	0.00	19.05	23.48	Z Z	A A	0.84	19.89	24.32	A A	A A	××
		⋖ <		1.20	0.42	0.41	0.42	0.41	0.05	1.67	1.66	1.67	1.66	× }
70545	<u>:</u> د	∢ ∢	Mr angiography nead w/o dye	0.00	16.20	12.85	¥ ¥	¥ ¥	0.59	18.38	14.69	¥ ¥	¥ ¥	ž×
	26	< <	Mr angiography head w/dye	1.20	0.42	0.40	0.45	0.40	0.05	1.67	1.65	1.67	1.65	X
70545) 	∢ <	Mr angiography head w/dye	0.00	16.13	12.46	¥ Ž	¥ Ž	0.59	16.72	13.05	¥ ž	Y Z	××
70546	26	(∢	Mr angiograph head w/o&w/dye	 8	0.63	09:0	0.63	09:0	0.08	2.51	2.48	2.51	2.48	XX
70546	TC	⋖ <	Mr angiograph head w/o&w/dye	0.00	24.66	23.02	¥ S	¥ ž	0.59	25.25	23.61	Z Z	Ϋ́	× }
70547	26	∢ ∢	Mr angiography neck w/o dye	1.20	0.42	0.40	0.42	0.40	0.05	18.42	1.65	1.67	1.65	žž
	TC	<		0.00	16.16	12.46	Z Y	¥ Z	0.59	16.75	13.05	Z	N A	×
70548		∢ <	Mr angiography neck w/dye	1.20	17.44	13.08	A C	Z S	0.64	19.28	14.92	₹;	Υ L	× š
70548	1C	< <	Mr angiography neck w/dye	0.00	17.02	12.68	NA A	0.40 A	0.59	17.61	13.27	è. ₹	6. A	XX
		< <	Mr angiograph neck w/o&w/dye	1.80	25.26	23.61	Υ Σ	¥ ¥	0.67	27.73	26.08	Ž	Ą Z	X
•	26		Mr angiograph neck w/o&w/dye	1.80	0.63	0.60	0.63	09:0	0.08	2.51	2.48	2.51	2.48	X
70549	ည	∢ <	Mr hrain w/o dvo	0.00	24.63	23.01	¥ ž	¥ S	0.59	25.22	23.60	¥ ź	Y S	××
70551	26		Mri brain w/o dye	1.48	0.52	0.50	0.52	0.50	0.00	2.07	2.05	2.07	2.05	₹×
	10		Mri brain w/o dye	0.00	14.68	12.09	N A	Ϋ́	0.59	15.27	12.68	Z Z	N A	X
70552		۷.	Mri brain w/dye	1.78	16.31	14.63	Y S	ΑŞ	0.78	18.87	17.19	¥ ;	¥ (X
70552		∢	Mri brain w/dye	8/.	0.62	0.60	0.62 NA	0.60 NA	0.08	2.48	2.46	2.48 NA	2.46 NA	××
70553	2	< <	Mri brain w/d & w/dye	2.36	19.01	24.05	Z Z	₹₹	1.41	22.78	27.82	ξŽ	ξŽ	ξ× ×
		∢.	Mri brain w/o & w/dye	2.36	0.82	0.79	0.82	0.79	0.10	3.28	3.25	3.28	3.25	X
70553	ည ဗွ		Mri brain w/o & w/dye	00.0	18.19	23.26	A S	A C	1.31	19.50	24.57	39 NA	A N 4	××
	26	. ∢	Mri brain w/dye	3.20	1.13	1.21	1.13	1.2.	0.10	4.43	4.51	4.43	4.51	X
70559	26	∢ •	Mri brain w/o & w/dye	3.20	1.1	1.21	<u>-</u> :	1.21	0.12	4.43	4.53	4.43	4.53	X
71010	26	∢ ∢	Chest x-ray	0.18	0.00	0.0	0.06	90.0	0.03	0.25	0.72	0.25	0.25	ž×
	10 10	< <	Chest x-ray	0.00	0.39	0.45	A	N A	0.05	0.41	0.47	N A	A	×
:	9	∢ <	Chest x-ray	0.21	0.59	0.59	N S	N S	0.03	0.83	0.83	A S	A S	× }
71015	10		Clest X-ray	0.00	0.52	0.52	S N) A	0.02	0.54	0.54	NA NA	NA NA	₹×
71020		∢.	Chest x-ray	0.22	0.59	0.67	Y Y	ΑŞ	0.05	0.86	0.94	Ϋ́	¥ S	X
71020	76	۷ ۵	Chest x-ray	0.22	0.07	0.07	0.0 NA	0.07 NA	0.0	0.30	0.30	0.30 NA	0:30 NA	××
		∶∢	Chest x-ray	0.27	0.73	0.80	¥ Y	Ž	0.00	1.06	1.13	Ž	Y Y	X
71021	26	∢ •	Chest x-ray	0.27	0.09	0.09	60.0	0.09	0.01	0.37	0.37	0.37	0.37	X
71021	<u>:</u>	∢ ⊲	Chest x-ray	0.00	0.65	0.77	A A	A Z	0.00	0.70	1.22	A A	Z Z	××
71022	26		Chest x-ray	0.31	0.10	0.10	0.10	0.10	0.01	0.42	0.42	0.42	0.42	X
71022	TC	∢ <	Chest x-ray	0.00	0.82	0.75	¥ S	¥ S	0.05	0.87	0.80	¥ ż	Ϋ́	× š
71023	26	∢ ∢	Chest x-ray and fluoroscopy	0.38	0.15	0.10	0.15	0 41 41	0.00	0.54	0.53	0.54 45.0	0.53	X X
71023	10		Chest x-ray and fluoroscopy	0.00	1.45	0.95	Ž	¥.	0.05	1.50	1.00	¥:	¥.	X
71030	9	∢ <		0.31	0.95	0.90	Z G	¥ S	0.00	1.32	1.27	¥ S	A C	× }
71030	10 10 10		Chest x-ray	0.00	0.10	0.80	2 A	2 Z	0.02	0.90	0.42	NA A	0.4 NA	XX
- 1 - 1	-					1								

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

ADL	PENDOW	- -	ADDENDOM B.—MELATIVE VALUE ONITS (N.O.S) AND	חבראובט	מהאטועפואן שאוואוואחבופע און עפט אטוואאורטיאון עבוצופרן עא)		\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	ואורעולן	ט ואורוא כ	ביי כי ייי	1007	OCIVIENDED	ב
CPT 1 HCPCS 2	Mod	Status	Description	Physician work RVUs ³	Fully im- plement- ed non- facility PE RVUs	Year 2007 transi- tronal non-facil- ity PE RVUs	Fully implemented facility	Year 2007 transi- tional fa- cility PE RVUs	Mal-practice RVUs	Fully im- plement- ed non- facility total	Year 2007 transi- tional non-facil- ity total	Fully im- plement- ed facility total	Year 2007 transi- tional fa- cility total	Global
71034	26	44	Chest x-ray and fluoroscopy	0.46	2.13	1.73	0.19	NA 0.17	0.10	2.69	2.29	NA 0.67	0.65	××
71034			Chest x-ray and fluoroscopy	0.00	1.94	1.57	A N	¥ ₹	0.08	2.02	1.65	¥ Z	A N	××
71035	26		Chest x-ray	0.18	0.06	0.06	90.0	90.0	0.01	0.25	0.25	0.25	0.25	XX
71035		∢ <	Chest x-ray	0.00	0.75	0.58	¥ ž	₹ S	0.05	0.77	0.60	₹ Z	¥ ž	×}
71040	26		Contrast x-ray of bronchi	0.58	0.17	0.19	0.17	0.19	0.03	0.78	0.80	0.78	0.80	XX
	TC		Contrast x-ray of bronchi	0.00	1.96	1.59	¥:	¥:	0.08	2.04	1.67	₹:	¥2	XX
71060	26		Contrast x-ray of bronchi Contrast x-ray of bronchi	0.74	3.19	2.64	0.25	0.24	0.16	1.02	1.01	A 1.02	A 10.	ž×
	TC	< <	Contrast x-ray of bronchi	0.00	2.95	2.40	Z Z	¥ Z	0.13	3.08	2.53	Ž	Z Z	×
71090	90	∢ <	X-ray & pacemaker insertion	0.54	0.29	1.49	AN C	NA 0	0.13	0.96	2.16	NA R	N C	××
71090	122	< <	X-ray & pacemaker insertion	0.00	0.00	1.26	NA	NA	0.11	0.11	1.37	S Z	S A	X
71100		⋖	X-ray exam of ribs	0.22	0.64	0.64	¥ X	N	0.02	0.91	0.91	NA	Ą Ż	×
71100		< •	X-ray exam of ribs	0.22	0.07	0.07	0.07	0.07	0.01	0.30	0.30	0.30	0:30	X
71100	<u>:</u> د	۷ ۵	X-ray exam of ribs	0.00	75.0	0.57	A N	A Z	0.0 4.00 7.00	1.61	10.0	A A	A N	×××
	26	۲.	X-ray exam of ribs/chest	0.27	0.09	0.09	0.09	0.09	0.01	0.37	0.37	0.37	0.37	X
71101	TC	∢ <	X-ray exam of ribs/chest	0.00	0.70	0.68	¥ S	Y S	0.04	0.74	0.72	¥ S	Ϋ́	×
	90	∢ <	X-ray exam of ribs	0.27	0.80	0.85	AN C	Y O	0.00	1.13	1.18	NA 36	NA 0	<u> </u>
71110		< <	X-ray exam of ribs	0.00	0.00	0.03	8. Z	9.03 V	0.00	0.30	0.87	0 S.S	Š Z	XX
		⋖	X-ray exam of ribs/chest	0.32	1.10	1.02	A A	NA	0.07	1.49	1.41	NA	Ā	XX
71111	26	∢ <	X-ray exam of ribs/chest	0.32	0.10	0.10	0.10	0.10	0.01	0.43	0.43	0.43	0.43	× >
71120	2	(∢	X-ray exam of breastbone	0.20	0.65	0.70	¥	¥ ¥	0.00	06:0	0.95	ΣŽ	Z Z	XX
:	26	⋖	X-ray exam of breastbone	0.20	0.07	0.07	0.07	0.07	0.01	0.28	0.28	0.28	0.28	×
71120	TC	∢ <	X-ray exam of breastbone	0.00	0.58	0.63	¥ ž	¥ S	0.04	0.62	1.05	₹ S	¥ ž	× >
71130	26	(∢	X-ray exam of breastbone	0.22	0.08	0.07	0.08	0.07	0.0	0.31	0:30	0.31	0.30	XX
	TC	⋖	X-ray exam of breastbone	00.0	0.70	0.71	A A	Z	0.04	0.74	0.75	Z	N A	XX
71250		< <	Ct thorax w/o dye	1.16	6.74	6.42	A S	A S	0.36	8.26	7.94	Ϋ́	Ϋ́,	×
71250		< <	Ct thorax w/o dye	0.00	0.40	6.03	0.40 AA	95.0 AA	0.05	1.0.1	0.90	• X	09. AN	ž ×
		⋖	Ct thorax w/dye	1.24	8.35	7.71	N	NA	0.42	10.01	9.37	N A	N A	×
71260	26	۷.	Ct thorax w/dye	1.24	0.43	0.42	0.43	0.42	0.05	1.72	1.71	1.72	1.71	X
71260	 ၁	∢ <	Ct thorax w/dye	0.00	7.92	0.30	¥ Ş	¥ ¥	0.37	8.29	11.52	Z Z	₹ Ş	×××
71270	26	(∢	Ot thorax w/o & w/dve	8	0.48	0.46	0.48	0.46	0.06	1.92	1.90	1.92	1.90	XX
	2	<	Ct thorax w/o & w/dye	00.0	10.06	9.18	₹ Z	N A	0.46	10.52	9.64	N A	Ϋ́Z	××
71275		∢ •	Ct angiography, chest	1.92	12.29	12.86	A S	N S	0.48	14.69	15.26	N S	N S	XX
	0 Z 1 Z	∢ <	Ct angiography, chest	26.	11.61	0.64	89.0	0.0 4 V	0.09	2.69	2.65	Z.69	2.65	××
71550	2	(∢	Mri chest w/o dve	1.46	17.27	13.10	¥ Ž	¥ 2	0.51	19.24	15.07	Z Z	ΣŽ	₹××
	26		Mri chest w/o dye	1.46	0.52	0.49	0.52	0.49	90.0	2.04	2.01	2.04	2.01	XX
71550	TC		Mri chest w/o dye	0.00	16.76	12.61	¥ ž	Y S	0.45	17.21	13.06	¥ ž	¥ S	××
	26		Mri chest w/dye	27.7	0.00	0.58	7 6	25.0	0.00	2 42	76.7	2 42	08.0	XX
71551	22		chest w/dye	0.00	18.20	14.66	N A	A A	0.52	18.72	15.18	Z Z	NA NA	XX

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

	ADDEINDOIM D.		TIEFATIVE VALUE (11VOS) AIND	ו היירון		5)	ב ק	FFIVITAL	יין אורן ג)]	j
CPT 1 HCPCS 2	Mod	Status	Description	Physician work RVUs ³	Fully implemented non-facility PE	Year 2007 transi- tional non-facil- ity PE RVUs	Fully implemented facility	Year 2007 transi- tional fa- cility PE RVUs	Mal-practice RVUs	Fully implemented nonfacility total	Year 2007 transi- tional non-facil- ity total	Fully implemented facility	Year 2007 transi- tional fa- cility total	Global
71552	96	∢ ⊲	Mri chest w/o & w/dye	2.26	23.67	25.19	NA F8	NA 75	0.78	26.71	28.23	NA 7	N P	XX
71552	10 10 10	< <	Mri chest w/o & w/dye	0.00	22.86	24.43	Z Z	S Z	0.68	23.54	25.11	ž Š	N S	XX
71555		œ (Mri angio chest w or w/o dye	1.87	16.14	12.91	A S	N S	0.67	18.62	15.39	A G	¥ ¿	X
71555	9 Z 1 Z		Mri angio chest w or w/o dye	F8: C	15.47	12.29	79:0 NA	0.62 NA	0.08	2.56	12.51	2.56 NA	L6.2	××
72010)		X-ray exam of spine	0.45	1.45	1.24	₹ Ž	Z Z	0.08	1.98	1.77	₹	₹ ₹	××
72010	26		X-ray exam of spine	0.45	0.13	0.15	0.13	0.15	0.05	0.60	0.62	09.0	0.62	X
72010	ည		X-ray exam of spineX-ray exam of spine	0.00	1.32	1.10	¥ ¥	₹ Z Z	0.09	1.38	1.16	A A	Y Y	××
	26	< <	X-ray exam of spine	0.15	0.05	0.05	0.05	0.05	0.01	0.21	0.21	0.21	0.21	X
72020	TC	⋖ <	X-ray exam of spine	0.00	0.43	0.42	Z Z	₹ Z	0.02	0.45	0.44	₹ S	 ₹	× >
72040	26	< <	X-ray exam of neck spineX-ray exam of neck spine	0.22	0.07	0.07	0.07	0.07	0.0	0.30	0:30	0.30	0.30	₹××
72040	TC	⋖ ·	X-ray exam of neck spine	0.00	0.72	0.63	Y S	N A	0.04	0.76	0.67	¥.	¥:	X
72050	90		X-ray exam of neck spine	0.31	-	1.02	Z	A S	0.07	1.49	1.40	A S	Z C	×}
72050	0 Z C T		X-ray exam of neck spine	- 0 - 0	0.6	0.00	0.10 NA	0.10 NA	0.0	1.06	0.42	0.4Z	24.0 A N	XX
			X-ray exam of neck spine	0.36	1.43	1.30	₹ Ž	Z Z	0.08	1.87	1.74	≦ ₹	¥ Z	XX
72052	26		X-ray exam of neck spine	0.36	0.12	0.12	0.12	0.12	0.05	0.50	0.50	0.50	0.50	××
72052	 ၁		X-ray exam of neck spine	0.00	1.31	1.18	Y Z	Y Z	0.00	1.37	1.24	¥ Z	¥ Ž	××
72069	26		X-ray exam of trunk spine	0.22	0.08	0.08	80.0	80.0	0.0	0.31	0.31	0,31	0,31	XX
	TC		X-ray exam of trunk spine	0.00	0.70	0.54	Y Y	NA	0.02	0.72	0.56	¥.	¥	X
72070			X-ray exam of thoracic spine	0.22	0.66	0.71	Y S	NA	0.02	0.93	0.98	A S	A S	××
72070			X-ray exam of thoracic spine	0.00	0.07	0.07) N	0.0 V	0.0	0.30	0.30	0.30 NA	05.0 AN	X X
		< <	X-ray exam of thoracic spine	0.22	0.80	0.80	Y Y	N A	90.0	1.08	1.08	¥ Z	¥	X
72072	26	∢ •	X-ray exam of thoracic spine	0.22	0.07	0.07	0.07	0.07	0.01	0.30	0.30	0.30	0.30	X
72074	٥		X-ray exam of thoracic spine	0.00	0.98	0.73	₹ ₹	₹ ₹	0.05	1.27	1.27	¥ ¥	 ₹ ₹	ž ž
72074	26	⋖	X-ray exam of thoracic spine	0.22	0.07	0.07	0.07	0.07	0.01	0.30	0.30	0.30	0.30	××
72074	٦٥ 	⋖ <	X-ray exam of thoracic spine	0.00	0.91	0.91	¥ S	¥ Z	0.06	0.97	0.97	¥ ž	¥ Ş	××
72080	26	∢ ∢	X-ray exam of trunk spineX-rav exam of trunk spine	0.22	0.08	0.73	0.08	0.07	0.03	0.31	0.30	0.31	0.30	X X
	TC	⋖	X-ray exam of trunk spine	0.00	0.63	99.0	N A	Z	0.04	0.67	0.70	¥ N	¥ Y	××
72090	90		X-ray exam of trunk spine	0.28	40.1	0.83	Z S	A S	0.02	1.37	1.16	A S	N S	× >
72090			X-ray exam of trunk spine	0.00	0.93	0.09	2 Z	90.0 V	0.0	0.97	0.38	95.59 AN	0.5 8 8	{
		< <	X-ray exam of lower spine	0.22	0.83	0.76	Y Y	NA	0.02	1.10	1.03	¥	¥	×
72100	26	⋖ <	X-ray exam of lower spine	0.22	0.07	0.07	0.07	0.07	0.01	0.30	0.30	0:30	0:30	×
72100	<u>:</u>		X-ray exam of lower spineX-ray exam of lower spine	0.00	0.76	0.69	Z Z	A Z	0.04	0.80	0.73	A A	A A	××
	26		X-ray exam of lower spine	0.31	0.11	0.10	0.11	0.10	0.01	0.43	0.42	0.43	0.42	X
72110	TC		X-ray exam of lower spine	0.00	1.07	0.95	Ϋ́	¥ ž	90.0	1.13	1.01	¥ Z	¥ Z	××
72114	26	(∢	X-ray exam of lower spine	0.36	1.0	0.12	0.13	0 12	0.00	0.51	0.50	0.51	2020	XXX
	12	< <	X-ray exam of lower spine	0.00	1.48	1.26	N A	¥ Y	90.0	1.54	1.32	¥.	¥	×
72120		∢ •	X-ray exam of lower spine	0.22	1.09	0.99	A S	N S	0.07	1.38	1.28	A S	A S	X
72120	7C	∢ ∢	X-ray exam of lower spine X-ray exam of lower spine	0.00	0.08	0.07	0.08 A)0.0 V	0.0	1.07	0.30	LE.O.	0.30 AA	××
						!					1			

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

ADL	ADDENDUM B.	Б.— П	.—HELATIVE VALUE UNITS (HVUS) AND	7ELA I EU	INFORMA	IION OSE	D IN DEI	FEMINING	INEDICA	HE MAYMI	ND KELATED INFORMATION USED IN DELERMINING MEDICARE PAYMENTS FOR		ZOO / —CON LINUED	ם
CPT 1 HCPCS 2	Mod	Status	Description	Physician work RVUs ³	Fully im- plement- ed non- facility PE RVUs	Year 2007 transi- tional non-facil- ity PE RVUs	Fully implemented facility	Year 2007 transi- tional fa- cility PE RVUs	Mal-prac- tice RVUs	Fully im- plement- ed non- facility total	Year 2007 transi- tional non-facil- ity total	Fully im- plement- ed facility total	Year 2007 transi- tional fa- cility total	Global
72125	96	∢ ∢	Ct neck spine w/o dye	1.16	6.75	6.42	NA 40	NA 39	0.36	8.27	7.94	N P	N P	××
72125	22	(∢	e	0.00	6.34	6.03	P Z	S N	0.31	6.65	6.34	<u> </u>	N A	××××××××××××××××××××××××××××××××××××××
	90		Ct neck spine w/dye	1.22	8.37	7.71	N S	A F	0.42	10.01	9.35	A S	NA P	× }
72126			Ct neck spine w/dye	00.0	7.95	7.31	S AN	4. A	0.03	8.32	7.68	O'A	9. Z	XX
			Ct neck spine w/o & w/dye	1.27	10.41	9.58	N A	Ž	0.52	12.20	11.37	Z	¥ Z	X
72127	26		eck	1.27	0.46	0.43	0.46	0.43	0.06	1.79	1.76	1.79	1.76	X
72128	<u>:</u> د		Ct chest spine w/o & w/dye	0.00	9.95 6.74	6.42	¥ ¥	¥ ¥	0.46	10.41	7.94	¥ ¥	¥ ¥	žž
	26		Ct chest spine w/o dye	1.16	0.40	0.39	0.40	0.39	0.05	1.61	1.60	1.61	1.60	X
72128))		hest spine w/o dy	0.0	6.34	6.03	¥ ž	¥ ž	0.31	6.65	6.34	Y S	¥ ž	× }
72129	26		Ct chest spine w/dve	7 5	0.38	0.41	0.43	0 4 1	0.42	1.02	9.33	Z C	4 8 P	ž ž
	21		Ct chest spine w/dye	0.00	7.95	7.31	N A A	Z Z	0.37	8.32	7.68	N N	N N	X
72130		∢ ·	Ct chest spine w/o & w/dye	1.27	10.37	9.57	Y S	¥ ;	0.52	12.16	11.36	Ϋ́	Υ Y	X
72130	26	∢ <	Ct chest spine w/o & w/dye	1.27	0.46	0.43	0.46	0.43	0.06	1.79	1.76	1.79	1.76	× }
72131)	< <	Ct criest spline w/o & w/dye	1.16	6.73	6.42	¥ ¥	¥ ₹	0.36	8.25	7.94	Z Z	¥ ¥	XX
	26	< <	Ct lumbar spine w/o dye	1.16	0.40	0.39	0.40	0.39	0.05	1.61	1.60	1.61	1.60	X
72131	10 	⋖	Ct lumbar spine w/o dye	0.00	6.32	6.03	¥ Z	¥	0.31	6.63	6.34	NA	Y Y	××
72132			Ct lumbar spine w/dye	1.22	8.37	7.71	A G	¥ ;	0.42	10.01	9.35	Ψ,	¥,	×
72132		∢ <	imbar spine w/dye	1.22	0.43	0.41	0.43	0.41	0.05	1.70	1.68	1.70	1.68	× ×
	: ວ	∢ ⊲	Ct lumbar spine w/dye	0.00	10.53	0.30	A N	Z Z	0.37	12.32	11.40	A A	A N	ž ž
72133	26		Ct lumbar spine w/o & w/dye	1.27	0.44	0.43	4.0	0.43	0.00	1.77	1.76	1.77	1.76	X
72133	10	⋖ -	Ct lumbar spine w/o & w/dye	0.00	10.09	9.18	A :	¥:	0.46	10.55	9.64	Y S	¥.	X
	9	∢ <	Mri neck spine w/o dye	9.5	13.15	12.1	N S	Z S	0.66	15.41	14.37	¥ S	Υ c	× }
	 ZC TC		Mri neck spine w/o dye	00.0	12.58	11.57	VC.O	4 N	0.0	13 17	12.21	AZ.Z	AN AN	X X
72142)		Mri neck spine w/dye	1.92	16.37	14.68	¥ Z	Ž	0.79	19.08	17.39	Z Y	¥ Z	××
72142	26		Mri neck spine w/dye	1.92	0.67	0.65	0.67	0.65	0.09	2.68	2.66	2.68	2.66	X
	: :	∢ ⊲	Mri chest spine w/dye	0.0	13.70	14.04	Z Z	¥ Z	0.70	16.40	14.74	A N	Υ Δ Ζ	×××
72146	26		Mri chest spine w/o dve	. 69	0.56	0.54	0.56	0.57	0.07	2.23	2.21	2.23	2.21	X X
	10 		chest spine w/o dye	0.00	12.59	12.51	A	¥	0.64	13.23	13.15	NA	AN	×
72147		∢ <	Mri chest spine w/dye	1.92	14.19	14.13	NA 20	A S	0.79	16.90	16.84	A S	A S	× }
	0 Z		Mri chest spine w/dye	- 0 26. 0	13.52	13.49	79.0 AN	40.0 AN	0.03	4 200	2.63	2.00 NA	20.2 AN	XX
72148	2		Mri lumbar spine w/o dye	1.48	13.11	13.01	¥ ×	₹Ž	0.71	15.30	15.20	Z Z	ξ Z	××××××××××××××××××××××××××××××××××××××
	26	⋖	Mri lumbar spine w/o dye	1.48	0.52	0.50	0.52	0.50	0.07	2.07	2.05	2.07	2.05	××
72148	1 2 2		Mri lumbar spine w/o dye	0.00	12.59	12.51	¥ S	¥:	0.64	13.23	13.15	Z S	¥ ?	×
	90		Mri lumbar spine w/dye	7.78	16.32	14.64	NA 63	NA P	0.78	18.88	17.20	NA C	NA V	××
72149	2		Mri lumbar spine w/dve	0.00	15.70	14.04	8.82 AN	5.8	0.70	16.40	14.74	ST: AN	¥.Z	X X
)		Mri neck spine w/o & w/dye	2.57	18.72	24.03	A	¥	1.42	22.71	28.02	N N	Ą	X
72156	26	∢	Mri neck spine w/o & w/dye	2.57	06.0	0.86	06.0	0.86	0.11	3.58	3.54	3.58	3.54	××
72156	 ဝ	< <	Mri neck spine w/o & w/dye	1.00	17.82	23.17	₹ ź	¥ ž	1.31	19.13	24.48	¥ S	Υ S	×
72157	26	₹ 4	Mri chest spine W/o & W/dye	2.57	0.90	73.60	4N 06:0	- NN 0.86	0.11	3.58	3.54	3.58	3,54	ź×
72157	15		Mri chest spine w/o & w/dye	0.0	16.13	22.75	A A A	ž Ž	1.31	17.44	24.06	Y Y	, A	XX
- 1			Mri lumbar spine w/o & w/dye	2.36	18.65	23.96	A A	NA	1.41	22.42	27.73	AN	AN	XX

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

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CPT 1 HCPCS 2	Mod	Status	Description	Physician work RVUs³	Fully im- plement- ed non- facility PE RVUs	Year 2007 transi- tional non-facil- ity PE RVUs	Fully implemented facility	Year 2007 transi- tional fa- cility PE RVUs	Mal-prac- tice RVUs	Fully implemented nonfacility total	Year 2007 transi- tional non-facil- ity total	Fully implemented facility	Year 2007 transitional facility total	Global
72158	26	-	Mri lumbar spine w/o & w/dye	2.36	0.83	0.79	0.83	0.79	0.10	3.29	3.25	3.29	3.25	XX
72158		∢ 2	Mr angio gaino w/o & w/dye	0.00	17.81	23.17	NA 8	NA S	1.31	19.12	24.48	NA 14 10 10 10 10 10 10 10 10 10 10 10 10 10	N N	×
72159	26	zz	Mr angio spine w/o&w/dye	. 6	0.40	0.62	0.40	0.62	0.10	2.30	2.52	2.30	2.52	XX
			Mr angio spine w/o&w/dye	00.0	14.24	12.76	14.24	12.76	0.64	14.88	13.40	14.88	13.40	××
72170			X-ray exam of pelvis	0.17	0.51	0.56	Ą V	AN	0.03	0.71	0.76	AN	N A	×××
72170	26		X-ray exam of pelvis	0.17	90.0	90.0	90.0	90.0	0.01	0.24	0.24	0.24	0.24	×××
72170	10 		X-ray exam of pelvis	0.00	0.45	0.50	Υ Υ	Y Y	0.05	0.47	0.52	Y Y	Ą Z	×××
72190			X-ray exam of pelvis	0.21	0.87	0.77	AN 0	A !	0.05	1.13	1.03	A S	A S	XX
72190	 76	∢ <	X-ray exam of pelvis	0.21	0.07	0.07	0.07	0.07	0.01	0.29	0.29	0.29	0.29	×
72190	<u>:</u> د		A-ray exam of pelvis	0.00	0.80	0.70	¥ S	4 S	40.0	48.0	17.76	¥	Y <	× >
	96		Ct angiograph pelv W/o&w/dye	<u>.</u>	1.92	16.40	780	¥ 6	7.0	0.5.4	0.70	2 2 2	2 2 2	×××
72191	27 C		Ct angiograph pely w/o&w/dye	000	11.26	11.86	S N	A Z	- 6E O	11.65	12.25	t S	S N	×××
			Ot pelvis w/o dve	1.09	6.29	6.29	Z Z	Z Z	0.36	7.74	7.74	Ź	Ž	××
72192	26		Ct pelvis w/o dye	1.09	0.38	0.37	0.38	0.37	0.02	1.52	1.51	1.52	1.51	××
72192	TC		Ct pelvis w/o dye	00.0	5.91	5.93	∀ Z	A A	0.31	6.22	6.24	A	Ą Z	××
72193			Ot pelvis w/dye	1.16	7.88	7.40	Y Y	Ϋ́	0.41	9.45	8.97	Ϋ́	Ą V	××
72193	26		Ct pelvis w/dye	1.16	0.40	0.39	0.40	0.39	0.02	1.61	1.60	1.61	1.60	××
72193	1 2 2		Ct pelvis w/dye	0.00	7.48	7.02	Y V	A A	0.36	7.84	7.38	₹Z	Ą Z	××
72194			Ct pelvis w/o & w/dye	1.22	10.57	9.33	Y Y	Y Z	0.48	12.27	11.03	A V	Y Y	×
72194	26		Ot pelvis w/o & w/dye	1.22	0.43	0.41	0.43	0.41	0.05	1.70	1.68	1.70	1.68	X
72194	 ၁		Ct pelvis w/o & w/dye	0.00	10.14	8.92	Y S	Y S	0.43	10.57	9.35	Z :	Z :	×××
72195	90		Mri polyis w/o dye	04.1	15.17	7.58	NA F3	A C	0.51	17.14	6.55	¥ S	Z C	× >
72195	•	(⊲	Mri pelvis w/o dve		14.65	0.43	AN AN	AN AN	0.00	15.04	10.54	φ.Ν.	0.2 V	XXX
72196	2	(∢	Mri pelvis w/dve	1.73	16.25	14.60	¥ Z	¥	09.0	18.58	16.93	¥ ₹	Z Z	XXX
	26		Mri pelvis w/dye	1.73	0.61	0.58	0.61	0.58	0.08	2.42	2.39	2.42	2.39	××
	TC		Mri pelvis w/dye	00.0	15.64	14.02	Ą V	AN	0.52	16.16	14.54	AN	N A	×××
72197		⋖	Mri pelvis w/o & w/dye	2.26	19.94	24.25	Y V	N A	1.02	23.22	27.53	₹ Z	Ą Z	××
72197	26	۷.	Mri pelvis w/o & w/dye	2.26	0.80	0.76	0.80	0.76	0.10	3.16	3.12	3.16	3.12	X
72197	: ပ	∢ <	17	0.00	19.14	23.50	₹ Ş	Y S	0.92	20.06	24.42	¥ S	¥ ₹	×××
72400		ζ <	M anglo pelvis w/o & w/dye	9.6	00.00	10.04	T 10	7 7	9.0	0.00	0.0	2 0	Z (< >
72198	•	(⊲	Mr andio pelvis w/o & w/dye	00.0	15.25	10.01	0.00 VA	9.0 AN	0.00	15.84	10.83	V.33	Δ1. ΔΝ	×××
72200	: : :	. Δ	X-ray exam sacrolliac ioints	0.17	0.62	0.59	A N	₹ Z	0.03	0.80	62.0	₹ Z	A Z	XXX
72200	26	. ⋖	X-rav exam sacroiliac joints	0.17	0.06	0.00	90.0	0.00	0.01	0.24	0.24	0.24	0.24	××
	٦ 	4	X-ray exam sacroiliac joints	00.00	0.56	0.53	Ϋ́	Ą	0.05	0.58	0.55	Ϋ́	Ą	××
72202		4	X-ray exam sacroiliac joints	0.19	0.76	0.70	A N	A A	0.02	1.00	0.94	Ϋ́	Ą Z	××
72202	26	4	X-ray exam sacroiliac joints	0.19	90.0	90.0	90.0	90.0	0.01	0.26	0.26	0.26	0.26	××
72202	TC	⋖	X-ray exam sacroiliac joints	0.00	0.70	0.64	¥ Z	Y Y	0.04	0.74	0.68	Y Y	Z Z	××
72220		۷.	X-ray exam of tailbone	0.17	09:0	0.62	AN S	Y Y	0.05	0.82	0.84	Y S	Y Y	X
72220	26	۷.	X-ray exam of tailbone	0.17	0.05	0.06	0.05	0.06	0.01	0.23	0.24	0.23	0.24	XX
72220	ည	< <	X-ray exam of tailbone	0.00	0.54	0.56	₹ Ş	Y S	0.04	0.58	0.60	Z Z	Z Z	×××
72240		∢ <	Contrast x-ray or neck spine	20.0	7.04	24.4 C C C C	Y E	A C	0.29	43.84	0.00	A S	A L	×××
72240	0 Z 1 Z	∢ <	Contrast x-ray of neck spine	9.0	0.3	0.30	15.0 NA	0.30	90.0	02.1	0.4.4	0 4 4	0 V V	<u> </u>
72255	2	(∢	Contrast x-ray thorax spine	1600	23.5	4 05	ζ <u>4</u> Ζ	¥ ₹ Z	0.25	3.50	1.10	Z Z	ζ <u>4</u>	×××
72255	26	: ∢	Contrast x-ray, thorax spine	0.91	0.29	0.28	0.29	0.28	0.04	1.24	1.23	1.24	1.23	×××
72255	TC	⋖	Contrast x-ray, thorax spine	0.00	2.06	3.77	A	¥ N	0.22	2.28	3.99	A N	A V	×××
		∢ <	Contrast x-ray, lower spine	0.83	2.61	3.90	A S	A S	0.26	3.70	4.99	A L	¥ ç	XX
72265		-	Contrast x-ray, lower spine	U.83	0.28	0.26	0.28	0.20	U.04	C1.1	1.13	1.15	1.13	XXX
H	-						0							

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

		: i)		, 						1
CPT 1 HCPCS 2	Mod	Status	Description	Physician work RVUs ³	Fully im- plement- ed non- facility PE RVUs	Year 2007 transi- tronal non-facil- ity PE RVUs	Fully implemented facility	Year 2007 transi- tional fa- cility PE RVUs	Mal-prac- tice RVUs	Fully implemented nonfacility	Year 2007 transi- tional non-facil- ity total	Fully implemented facility	Year 2007 transi- tional fa- cility total	Global
70065	C	٨	Contract v.ray lower enine	000	0 33	2.67	δN	ΔIN	00.0	0 55	286	ΔIV	ΔN	XXX
72270)	< ∢	Contrast x-ray, spine	1.33	4.13	5.94	₹ Z	₹ Z	0.39	5.85	7.66	¥ Z	¥ Z	×
	26	⋖	Contrast x-ray, spine	1.33	0.47	0.43	0.47	0.43	90.0	1.86	1.82	1.86	1.82	××
72270	7 	∢	Contrast x-ray, spine	0.00	3.66	5.51	Ϋ́	NA	0.33	3.99	5.84	¥ V	¥ X	××
72275		∢	Epidurography	92.0	1.72	2.16	Ϋ́	Y Y	0.26	2.74	3.18	Y Y	¥ Z	××
72275	26	∢	Epidurography	0.76	0.19	0.20	0.19	0.20	0.04	0.99	1.00	0.99	1.00	×
72275	TC		Epidurography		1.53	1.97	¥:	Y :	0.22	1.75	2.19	¥ :	¥ :	X
72285			X-ray c/t spine disk		1.45	6.93	A S	A S	0.50	3.11	8.59	A C	A i	×
72285	0 C		X-ray c/t spine disk	91.1	0.30	0.35	0.30	0.35	0.07		1.58	55.7	20.7	×
	: 2		X-ray of lower spine disk		L	6.03	X 4	Z Z	0.43	02.0	20.7	Υ Δ Ζ	₹ 4 2 2	XX
	26	(⊲	X-ray of lower spine disk		2 c	960	0 03	900	9 0	11.1	7.1	1 0	7 -	×××
72295	22	< <	X-ray of lower spine disk		1.20	6.21	N N	A Z	0.40	1.60	6.61	Z Z	Q Z	×
			X-rav exam of collar bone		0.57	0.57	₹ Z	¥ Z	0.03	0.76	0.76	Ž	₹ Z	×
	26	. ∢	X-ray exam of collar bone	0.16	0.05	0.05	0.05	0.05	0.01	0.22	0.22	0.22	0.22	×
73000	7 	⋖	X-ray exam of collar bone	0.00	0.51	0.52	Ϋ́	A V	0.05	0.53	0.54	Ą	Ϋ́	××
73010		4	X-ray exam of shoulder blade	0.17	0.59	0.58	A A	Ϋ́	0.03	0.79	0.78	Ϋ́	Ą	××
73010	26	⋖	X-ray exam of shoulder blade	0.17	90.0	90.0	90.0	90.0	0.01	0.24	0.24	0.24	0.24	××
73010	TC	∢	X-ray exam of shoulder blade	0.00	0.53	0.52	A	A A	0.02	0.55	0.54	A A	A A	××
73020		⋖	X-ray exam of shoulder	0.15	0.46	0.51	Ϋ́	N A	0.03	0.64	69.0	A A	Y Y	×
73020	26	∢ .	X-ray exam of shoulder	0.15	0.05	0.05	0.05	0.05	0.01	0.21	0.21	0.21	0.21	×
73020	ည	∢ •	X-ray exam of shoulder	0.00	0.40	0.45	₹ :	¥ :	0.02	0.42	0.47	¥ :	Z :	×
73030		∢ •	X-ray exam of shoulder	0.18	0.58	0.62	N S	A S	0.05	0.81	0.85	A N	A S	×
73030	 7 Kg	∢ <	X-ray exam of shoulder	0.18	0.06	0.06	0.06	0.06	0.0	0.25	0.25	0.25	0.25	×;
	2	(⊲	Contrast x-ray of shoulder	0.00	0.32	0.30	Z Z	Z Z	41.0	00.0	0.00	ζ Δ Ζ	ζ Δ Ζ	XXX
73040	26	< ∢	Contrast x-ray of shoulder	0.54	0.19	0.18	0.19	0.18	0.02	0.75	0.74	0.75	0.74	X
	TC	< <	Contrast x-ray of shoulder	0.00	2.13	2.12	¥ X	Ϋ́Z	0.12	2.25	2.24	N A	¥Z	×
73050		∢	X-ray exam of shoulders	0.20	0.74	0.74	A A	NA	0.05	0.99	0.99	A A	¥ Y	××
73050	26	∢	X-ray exam of shoulders	0.20	0.07	0.07	0.07	0.07	0.01	0.28	0.28	0.28	0.28	××
73050	TC	∢ ·	X-ray exam of shoulders	0.00	0.67	0.67	¥:	Y :	0.04	0.71	0.71	¥ :	¥:	X
73060		∢ •	X-ray exam of humerus	0.17	0.59	0.62	A S	A S	0.05	0.81	0.84	A S	Z S	×
73060	9 F	∢ <	A-ray exam or numerus). 0.0	0.00	0.06	0.00	0.00	0.0	0.24	0.24	42.0	42.0	×
	: :	(⊲	X-ray exam of elbow	0.00	0.93	0.36	₹	(0.0	0.57	0.60	₹	₹	< >
73070	26	< ∢	X-ray exam of elbow	0.15	0.05	0.05	0.05	0.05	0.0	0.21	0.21	0.21	0.21	X
		< <	X-ray exam of elbow	0.00	0.52	0.52	¥Z,	AZ AZ	0.05	0.54	0.54	¥Z	¥Z	×
73080		4	X-ray exam of elbow	0.17		0.67	Ϋ́	Ϋ́	0.02	1.00	0.89	Ϋ́	Ą	××
73080	26	⋖	X-ray exam of elbow	0.17		90.0	90.0	90.0	0.01	0.24	0.24	0.24	0.24	××
73080	10 	∢	X-ray exam of elbow	0.00		0.61	A A	Y Y	0.04	0.76	0.65	Y Y	Y Y	×
73085		∢ .	Contrast x-ray of elbow	0.54		2.19	¥ !	Y S	0.14	2.54	2.87	Υ ¦	¥ ¦	×
73085	26		Contrast x-ray of elbow	0.54		0.19	0.17	0.19	0.02	0.73	0.75	0.73	0.75	×
73085	 	∢ <	Contrast x-ray of elbow	0.00	1.69	2.01	Υ S	Υ S	0.12	1.81	2.13	Y S	Υ S	× }
	90		V my over of foreign	0.0	0.57	0.57	Y Y	AN C	3.0	0.70	0.70	2 0	¥ 5	{ }
	0 Z		X-ray exam of forearm	0.10	0.03	0.03	0.03 AN	0.00 V	0.0	0.22	0.62	0.22 NA	0.22 AN	< ×
73092)	< <	X-ray exam of arm. infant	0.16	0.60	0.56	ž Ž	Ž Ž	0.03	0.79	0.75	₹ Z	¥ Ž	X
	26	<	X-ray exam of arm, infant	0.16	0.05	0.05	0.05	0.05	0.01	0.22	0.22	0.22	0.22	××
73092	TC	⋖	X-ray exam of arm, infant	0.00	0.55	0.51	AN	A A	0.05	0.57	0.53	NA	AN	×
73100		∢	X-ray exam of wrist	0.16	0.61	0.56	Y Y	Y Y	0.03	0.80	0.75	Y Y	¥ Y	××
73100	26		X-ray exam of wrist	0.16	90.0	0.05	90.0	0.05	0.01	0.23	0.22	0.23	0.22	X

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

N I INOED	Year 2007 transi- tional fa- cility total	4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4	
Z007—7002	Fully im- 2 plement- tra ed facility tion total cility	A A 4 A A A A A A A A A A A A A A A A A	0.22 83.8 0.24 A A A
ביי טיים	Year 2007 transi- tional non-facil- ity total	0.53 0.53 0.54 0.50	0.243 0.72 0.243 0.24
TATIVIE	Fully im- plement- ed non- facility total	0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.0	0.70 0.70 0.70 0.44 0.44
INEDICA	Mal-prac- tice RVUs	0.000000000000000000000000000000000000	0.00 0.03 0.03 0.01
	Year 2007 transi- tional fa- cility PE RVUs	A N O O N N O O N O O O O O O O O O O O	0.00 4 A N O O O O O O
	Fully implemented facility	4 4 6 6 4 4 6 6 4 4 6 6 4 6 6 6 6 6 6 6	14.24 NA NA AN
O NOI	Year 2007 transi- tional non-facil- ity PE RVUs	0.000000000000000000000000000000000000	0.60 0.52 0.52 0.06
NOIL AMPOUNT	Fully im- plement- ed non- facility PE RVUs	0.000000000000000000000000000000000000	0.39 0.50 0.50 0.06 0.06
DELAIEU	Physician work RVUs ³	0.000 0.0000 0.000 0.000 0.000 0.000 0.000 0.000 0.000 0.000 0.0000 0.000 0.000 0.000 0.000 0.000 0.000 0.000 0.000 0.0000 0.000 0.000 0.000 0.000 0.000 0.000 0.000 0.000 0.0000 0.000 0.000 0.000 0.000 0.000 0.000 0.000 0.000 0.0000 0.000 0.000 0.000 0.000 0.000 0.000 0.000 0.000 0.0000 0.000 0.000 0.000 0.000 0.000 0.000 0.000 0.000 0.0000 0.000 0.000 0.000 0.000 0.000 0.000 0.000 0.000 0.00000 0.00000 0	00.00
LATIVE VALUE UNITS (NVOS) AND	Description	X-ray exam of wrist X-ray exam of wrist X-ray exam of wrist X-ray exam of wrist Contrast x-ray of wrist Contrast x-ray of wrist Contrast x-ray of wrist Contrast x-ray of wrist Contrast x-ray of wrist Contrast x-ray of wrist X-ray exam of hand X-ray exam of han	Mr anglo up extr w/o&w/dye Mr anglo upr extr w/o&w/dye X-ray exam of hip X-ray exam of hip X-ray exam of hip
ADDENDOM B.——DELATIVE	Status		
EINDOIN	Mod	5 6 7 8 <td>26 7C 7C</td>	26 7C 7C
וחחע	CPT 1 HCPCS 2	73100 73110 73110 73111 73111 73111 73120 73120 73130 73130 73130 73200 73	

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

ADE	IEINDOINI IEINDOINI		ADDENDON B.——RELATIVE VALUE ONITS (RVOS) AND	JELA I EU	IND DELATED INFORMATION OSED IN DETERMINING MEDICARE FATMENTS				בְּלֵילִים בְלֵילִים ביים	1 X 1 X 1	בטר טואו			ב
CPT 1 HCPCS 2	Mod	Status	Description	Physician work RVUs ³	Fully implemented non- facility PE RVUs	Year 2007 transi- tional non-facil- ity PE RVUs	Fully implemented facility	Year 2007 transi- tional fa- cility PE RVUs	Mal-prac- tice RVUs	Fully im- plement- ed non- facility total	Year 2007 transi- tional non-facil- ity total	Fully implemented facility	Year 2007 transi- tional fa- cility total	Global
73510	26	∢ ላ	X-ray exam of hip	0.21	0.07	0.07	0.07 AN	0.07 NA	0.01	0.29	0.29	0.29 NA	0.29 NA	××
73520)		X-ray exam of hips	0.26	0.81	0.77	ž Ž	₹ Z	0.05	1.12	1.08	₹ Z	₹ Ž	××
73520	26		X-ray exam of hips	0.26	0.09	0.09	60.0	0.09	0.01	0.36	0.36	0.36	0.36	X
73525	: ວ		A-ray exam of nips	0.00	1.0	0.00	A N	Z Z	0.04	0.70	27.0	Z Z	4 4 2 Z	X X
73525	26	∶ ∢	Contrast x-ray of hip	0.54	0.18	0.18	0.18	0.18	0.03	0.75	0.75	0.75	0.75	X
73525	10	۷,	Contrast x-ray of hip	0.00	1.66	2.00	¥ :	Ž :	0.12	1.78	2.12	Z S	₹:	X
73530	26	∢ ∢	X-ray exam of hip	0.29	0.10	0.49	0.10	0.10	0.03	0.42	0.81	NA 0.40	0.40	ž ž
		< <	X-ray exam of hip	0.00	0.00	0.39	N A A	Z Z	0.02	0.02	0.41	N N	₹ Ž	X
73540			X-ray exam of pelvis & hips	0.20	0.80	0.68	A I	A S	0.05	1.05	0.93	N S	¥ 8	X
73540	92 L		X-ray exam of pelvis & nips	0.70	0.07	0.07)0.0 VN)0.0 NA	10.0	0.78	0.28	0.28 NA	0.28 NA	×××
73542			X-ray exam, sacrolliac joint	0.59	1.1	1.98	ξŽ	ΣŽ	0.15	1.85	2.72	Z Z	 { Z	X
	26		X-ray exam, sacroiliac joint	0.59	0.14	0.16	0.14	0.16	0.03	0.76	0.78	0.76	0.78	XX
73542	ည က		X-ray exam, sacroiliac joint	0.00	0.98	1.83	Y Y	¥:	0.12	1.10	1.95	¥:	Y Z	×
73550			X-ray exam of thigh	0.17	0.56	0.61	A S	A S	0.05	0.78	0.83	A S	Z S	× }
73550	0 Z E		X-ray exam of thigh	- 6	0.00	0.00	0.00	0.00 NA	0.00	0.24	0.24	47.0 NA	4 VI	X X
73560	2		X-ray exam of knee, 1 or 2	0.17	0.60	0.59	¥ ×	ΣŽ	0.03	0.80	0.79	Z Z	 { Z Z	X X
73560	26		X-ray exam of knee, 1 or 2	0.17	90.0	90.0	90.0	90.0	0.01	0.24	0.24	0.24	0.24	XX
73560	10	Α.	X-ray exam of knee, 1 or 2	0.00	0.54	0.53	¥:	¥:	0.02	0.56	0.55	¥:	¥ :	X
73562		∢ <	X-ray exam of knee, 3	0.18	0.74	0.66	A S	A S	0.05	0.97	0.89	A C	A C	× }
73562		< <	X-ray exam of knee, 3X-ray exam of knee, 3	0.00	0.00	0.00	0 Z	9.0 Y	0.0	0.72	0.64	0.23 AA	0.63 A	ž
		⋖	X-ray exam, knee, 4 or more	0.22	0.88	0.74	A	N N	0.02	1.15	1.01	N	Υ V	×
73564	26	۷.	X-ray exam, knee, 4 or more	0.22	0.08	0.07	0.08	0.07	0.01	0.31	0:30	0.31	0:30	X
73564	<u>်</u>	∢ <	X-ray exam, knee, 4 or moreX-ray exam of knees	0.00	0.80	0.67	¥ S	Z Z	40.0	0.84 78.0	0.70	Z Z	Y S	×××
73565	26	< <	X-ray exam of knees	0.17	0.00	0.00	0.06	0.06	0.0	0.24	0.75	0.24	0.24	XX
73565	TC	⋖	X-ray exam of knees	0.00	0.59	0.52	A	N A	0.05	0.61	0.54	NA	NA	XX
73580		∢ •	Contrast x-ray of knee joint	0.54	2.41	2.70	A S	Y S	0.17	3.12	3.41	Y Y	Z Z	X 3
73580	0 Z	∢ ⊲	Contrast x-ray of knee joint	4. C	0.0	0.17	0. IQ) . I	0.03	0.73	0.74	0.73 NA	4 N	XX
73590	2	< ∢	X-ray exam of lower leg	0.17	0.55	0.57	Z Z	ΣŽ	0.03	0.75	0.77	Z Z	¥ Ž	X X
73590	26	⋖	X-ray exam of lower leg	0.17	90.0	90.0	90.0	90.0	0.01	0.24	0.24	0.24	0.24	XX
73590	10	۷.	X-ray exam of lower leg	0.00	0.50	0.52	¥:	¥:	0.02	0.52	0.54	¥:	Y S	X
73592	96	∢	X-ray exam of leg, infant	0.16	0.61	0.56	NA PA	N C	0.03	0.80	0.75	NA 20	A C	×××
73592	- C	(∢	X-ray exam of leg, infant	00.0	0.56	0.03	S AN	S A	0.0	0.58	0.53	NA NA	AN AN	X X
		. ∢	X-ray exam of ankle	0.16	0.57	0.55	Ą	Z Z	0.03	0.76	0.74	Z Z	₹ Z	X
73600	26	⋖	X-ray exam of ankle	0.16	0.05	0.05	0.05	0.05	0.01	0.22	0.22	0.22	0.22	××
73600	 ပ	∢ <	X-ray exam of ankle	0.00	0.52	0.50	¥ ž	Y S	0.02	0.54	0.52	Y S	¥ ≨	× }
73610	26	< <	X-ray exam of ankle	0.17	0.00	0.06	0.06	0.06	0.0	0.24	0.24	0.24	0.24	XX
	12	٨	X-ray exam of ankle	0.00	0.63	0.56	N A	A A	0.02	0.65	0.58	A A	A A	×
73615		۷.	Contrast x-ray of ankle	0.54	1.92	2.20	¥,	Y S	0.15	2.61	2.89	Y S	Y N	X
73615	26 T.C.	∢	Contrast x-ray of ankle	45.0	0.17	0.18	0.17 NA	0.18 NA	0.03	1 87	0.75	0.74 NA	0.75 NA	×××
200	2		Collidat ATay of aline	?	:	1			?	<u>.</u>	j			

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

בׁ	Global	****	XX
	Year 2007 transi- tional fa- cility total	A A A A A A A A A A A A A A A A A A A	¥ V
7007	Fully implemented facility	2.2 A 8.3 A 8.3 A 8.5 A	NA
בטר טואוי	Year 2007 transi- tional non-facil- ity total	0.72 0.02 0.02 0.02 0.02 0.02 0.02 0.02 0.03 0.03 0.04 0.05	1.06
T A I III	Fully implemented non-	0.75 0.02 0.03 0.05 0.05 0.05 0.05 0.05 0.05 0.05	1.16
NEDICAL	Mal-prac- tice RVUs	0.000 0.0000 0.000	0.02
	Year 2007 transi- tional fa- cility PE RVUs	A S S A S A S	NA
IN DE	Fully implemented facility	Z 2 Z Z Z Z Z Z Z Z Z Z Z Z Z Z Z Z Z Z	NA !
	Year 2007 transi- tional non-facil- ity PE RVUs	0.55 0.05	0.74
ANICOLNI ANI	Fully im- plement- ed non- facility PE RVUs	0.000 0.0000 0.000 0.000 0.000 0.000 0.000 0.000 0.000 0.000 0.0000 0.000 0.000 0.000 0.000 0.000 0.000 0.000 0.000 0.00000 0.00000 0	0.84
DELA I EU	Physician work RVUs ³	00000000000000000000000000000000000000	0.27
ADDENDONN D.—TELATIVE VALUE ONITS (N.O.S) AND	Description	X-ray exam of foot X-ray exam of foot X-ray exam of foot X-ray exam of foot X-ray exam of foot X-ray exam of foot X-ray exam of heel X-ray exam of heel X-ray exam of heel X-ray exam of toe(s) X-ray exam of toe(s) X-ray exam of toe(s) X-ray exam of toe(s) X-ray exam of toe(s) X-ray exam of toe(s) X-ray exam of toe(s) X-ray exam of toe(s) X-ray exam of toe(s) X-ray exam of toe(s) X-ray exam of toe(s) X-ray exam of toe(s) X-ray exam of toe(s) X-ray exam of toe(s) X-ray exam of toe(s) X-ray exam of toe(s) X-ray exam of abdomen X-ray exam of abdomen X-ray exam of abdomen X-ray exam of abdomen X-ray exam of abdomen X-ray exam of abdomen X-ray exam of abdomen X-ray exam of abdomen X-ray exam of abdomen X-ray exam of abdomen	X-ray exam of abdomen
[] S	Status		
	Mod	85	
ָ נ	CPT 1 HCPCS 2	73620 73620 73620 73630 73630 73650 73650 73660 7360 73700 73701 73701 73701 73701 73701 73702 73702 73702 73702 73702 73702 73702 73702 73702 73702 73702 73702 73703 74703 7	74020

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

		ı)		i	5					<u> </u>
CPT 1 HCPCS 2	Mod	Status	Description	Physician work RVUs ³	Fully implemented non-facility PE	Year 2007 transi- tional non-facil- ity PE RVUs	Fully implemented facility	Year 2007 transi- tional fa- cility PE RVUs	Mal-prac- tice RVUs	Fully im- plement- ed non- facility total	Year 2007 transi- tional non-facil- ity total	Fully implemented facility	Year 2007 transi- tional fa- cility total	Global
74020	26	44	X-ray exam of abdomen	0.27	0.09	0.09	0.09 AN	0.09 NA	0.01	0.37	0.37	0.37 NA	0.37 NA	XX
7402274022	26	⋖ ⋖	X-ray exam series, abdomenX-rav exam series. abdomen	0.32	1.02	0.10	0.1 A	0.10	0.00	1.40	1.26	A 9	NA 0.43	××
	12	. ∢	X-ray exam series, abdomen	0.00	0.91	0.78	Z Z	NA	0.05	96:0	0.83	¥ Z	₹ Z	×
74150	. 9		Ct abdomen w/o dye	9.1	6.33	6.14	Z Z	A S	0.35	7.87	7.68	NA R	₹ ₹	××
74150		< <	Ct abdomen w/o dye	00.0	5.91	5.74	¥. Z	P N	0.30	6.21	6.04	S A	₹ ₹	₹×
74160	. 0		Ct abdomen w/dye	1.27	9.21	7.76	A S	N S	0.42	10.90	9.45	¥.	NA 75	× }
74160			Ct abdomen w/dye	0.00	8.77	7.34	¥ Z	NA AN	0.36	9.13	7.70	Ž Ž	9 Y	₹×
74170		⋖	abdomen w/o &	1.40	12.75	9.95	¥	¥.	0.49	14.64	11.81	NA	¥	X
74170	26 .	∢ ◊	Ct abdomen w/o & w/dye	1.40	0.49	0.47	0.49 NA	0.47 NA	0.06	12.69	1.93	1.95 AN	1.93	××
74175		< ∢	Ct angio abdom w/o & w/dye	1.90	12.86	12.73	₹ Ž	₹	0.47	15.23	15.10	ZZ	₹	X
74175	26		Ct angio abdom w/o & w/dye	1.90	0.69	0.64	0.69	0.64	0.08	2.67	2.62	2.67	2.62	X
741/5		_	Ct anglo abdom W/o & W/dye	0.00	2 2 2 2	12.09	Z Z	A A	0.39	12.57	12.48	A N	Z Z	××
74181			Mri abdomen w/o dye	1.46	0.51	0.49	0.51	0.49	0.00	2.03	2.01	2.03	2.01	X
74181			Mri abdomen w/o dye	0.00	12.58	11.57	¥:	¥:	0.45	13.03	12.02	Z :	₹:	X
74182			Mri abdomen w/dye	1.73	18.28	15.1	¥ 9	N 0	0.60	20.61	17.44	NA 141	N 0	××
74182			Mri abdomen w/dye	00.0	17.68	14.53	S Z	S Z	0.52	18.20	15.05	N A	N A V	X
74183		∢ ·	Mri abdomen w/o & w/dye	2.26	19.98	24.26	A A	¥.	1.02	23.26	27.54	NA	¥,	X
74183	. Z6 T	∢ <	Mri abdomen w/o & w/dye	2.26	0.79	0.75	0.79	0.75	0.10	3.15	3.11	3.15	3.11	× }
74185		ζ Œ	Mri andio, abdom w orw/o dve	1.80	15.88	12.84	₹ ₹	₹ ₹	0.67	18.35	15.31	Z Z	 ₹	XX
	-	Œ	Mri angio, abdom w orw/o dye	1.80	0.64	09.0	0.64	09.0	0.08	2.52	2.48	2.52	2.48	XX
74185		Υ <	Mri angio, abdom w orw/o dyeX-ray exam of paritone im	0.00	15.24	12.23	A N	¥ Z	0.59	15.83	12.82	A N	Z Z	×××
74190	26	(∢	X-ray exam of peritoneum	0.48	0.17	0.16	0.17	0.16	0.03	0.67	0.66	0.67	0.66	XX
	2	⋖	X-ray exam of peritoneum	00.00	00.00	0.98	¥	¥	0.07	0.07	1.05	NA	N A	XX
74210	: 6		Contrst x-ray exam of throat	0.36	1.85	1.45	A S	¥ 5	0.08	2.29	1.89	A S	Z C	× }
74210	 10 10 10		Contrst x-ray exam of throat	00.0	1.72	1.32	N S	- N	0.00	1.78	1.38	O.SO AN	0.50 V	ž×
		⋖		0.46	2.10	1.53	N A	Ϋ́	0.08	2.64	2.07	NA	¥	××
74220	26	∢ <	Contrast x-ray, esophagus	0.46	0.16	0.15	0.16	0.15	0.05	0.64	0.63	0.64	0.63	× }
74230		< <	Cine/vid x-ray, esophagus	0.00	2.03	1.62	¥ ¥	₹ ₹	0000	2.65	2.24	Z Z	₹ ₹	X X
	-	∢	Cine/vid x-ray, throat/esoph	0.53	0.18	0.17	0.18	0.17	0.05	0.73	0.72	0.73	0.72	XX
74230			Cine/vid x-ray, throat/esoph	0.00	1.84	1.44	¥ 3	¥ 3	0.07	1.91	1.51	Y N	A S	X
74235			Hemove esophagus obstructionX-ray exam under di tract	1.19	0.43	0.40	0.43	0.40 NA	0.05	1.67	1.64	1.67 NA	1.64 NA	×××
74240	26		X-ray exam, upper gi tract	69.0	0.24	0.23	0.24	0.23	0.03	0.96	0.95	0.96	0.95	XX
74240	2	∢	X-ray exam, upper gi tract	0.00	2.16	1.64	Y Y	¥	0.08	2.24	1.72	NA	Y Y	××
74241		∢	X-ray exam, upper gi tract	0.69	2.67	1.96	A &	NA 0	0.11	3.47	2.76	A S	A C	××
74241	22	(∢	X-ray exam, upper grunder	00.00	243	1.73	S S	S S	0.08	2.51	1.81	S A	- A	{X
74245		< <	X-ray exam, upper gi tract	0.91	4.13	3.05	Ž	¥	0.17	5.21	4.13	Z	¥	X
74245	26	∢ <	X-ray exam, upper gi tract	0.91	0.32	0.31	0.32	0.31	0.04	1.27	1.26	1.27	1.26	×;
	· ·	ζ	evairi, upper gr	00.0	0	2 1	ָבְּבְּבְּבְּבְּבְּבְּבְּבְּבְּבְּבְּבְּב	2	2	r S	200.3	2	5	XX

ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

ממע	ADDENDOM B		TIEFATIVE VALUE (11403) AIND I	וברא - רי)	֓֞֝֝֝֜֜֝֝֝֜֜֝֝֡֓֜֝֝֡֜֜֝֝֡֓֜֝֝֡֜֜֝֝֡֓֜֝֝֡֜֜֝֡֜֜		רולטוטבוויו ג	אווי אווי		7007		נ
CPT 1 HCPCS 2	Mod	Status	Description	Physician work RVUs ³	Fully im- plement- ed non- facility PE RVUs	Year 2007 transi- tional non-facil- ity PE RVUs	Fully implemented facility	Year 2007 transi- tional fa- cility PE RVUs	Mal-prac- tice RVUs	Fully implemented nonfacility	Year 2007 transi- tional non-facil- ity total	Fully implemented facility	Year 2007 transi- tional fa- cility total	Global
74246			Contrst x-ray uppr gi tract	69.0	2.91	2.13	A N	AN	0.13	3.73	2.95	NA	A N	XX
74246	26	⋖ <	Contrst x-ray uppr gi tract	0.69	0.24	0.23	0.24	0.23	0.03	0.96	0.95	96.0	0.95	× š
74246	<u>:</u> د		Control x-ray uppr gl tract	00.0	2.67	1.90	¥ ×	Z Z	0.0	7.7.7	2.00	¥ \$	₹	X X
74247	26		Control x-ray uppr gi tract	69.0	0.30	0.23	42.0	2 2	0 0	0.96	0.95	96.0	0.95	XX
	22		Contrat x-ray uppr gi tract	0.00	3.12	2.04	A N	NAN NA	0.11	3.23	2.5	Q Z	A N	X
74249			Contrst x-ray uppr gi tract	0.91	4.53	3.29	A Z	Z Z	0.18	5.62	4.38	A V	¥ Z	××
74249	26		Contrst x-ray uppr gi tract	0.91	0.32	0.31	0.32	0.31	0.04	1.27	1.26	1.27	1.26	××
74249	TC	⋖	Contrst x-ray uppr gi tract	0.00	4.22	2.99	A A	N A	0.14	4.36	3.13	N A	A A	XXX
74250			X-ray exam of small bowel	0.47	2.59	1.74	₹ Z	Y N	0.09	3.15	2.30	Y Y	Y Y	×
74250	26		X-ray exam of small bowel	0.47	0.16	0.15	0.16	0.15	0.02	0.65	0.64	0.65	0.64	X
74250	ည		X-ray exam of small bowel	0.00	2.43	1.59	₹ ż	Z Z	0.07	2.50	1.66	ď s	Υ S	× š
7.4251	96	< <	X-ray exam of small bowel	69.0	0.48	3.78	¥ 50	N 0	0.0	77.11	4.0.7 0.05	AN C	NA O	X
74251	 C.	(⊲	X-ray exam of small bowel	60.0	10.24	3.54	AN AN	AN AN	0.02	10.31	3.63	AN AN	AN AN	XXX
)		X-rav exam of small bowel	0.50	8.69	3.41	Ž	Ž	0.10	9.29	4.01	¥ Z	¥ Z	×
74260	26		X-ray exam of small bowel	0.50	0.17	0.16	0.17	0.16	0.05	0.69	0.68	0.69	0.68	××
74260	TC		X-ray exam of small bowel	0.00	8.52	3.25	Ϋ́	A A	0.08	8.60	3.33	A A	AN	××
74270			Contrast x-ray exam of colon	69.0	3.73	2.38	A A	A V	0.14	4.56	3.21	NA	A A	XX
74270	26	Α.	Contrast x-ray exam of colon	69.0	0.24	0.23	0.24	0.23	0.03	96.0	0.95	96.0	0.95	××
74270)))	⋖ •	Contrast x-ray exam of colon	0.00	3.49	2.15	Y Z	Y Z	0.11	3.60	2.26	Y Y	¥ :	×
74280			Contrast x-ray exam of colon	66.0	5.17	3.21	A S	AN 0	0.17	6.33	4.37	¥ Į	¥,	X
74280	92		Contrast x-ray exam of colon	0.99	0.34	0.33	0.34	0.33	40.0	1.37	3.36	\S.L \S.L	95.1	× ×
74280	:: ວ	∢ ⊲	Contrast x-ray exam of colon	0.00	2.63	2.03	₹	₹	0.0	4. τ 09. α 7. α	3.02 7.72	ζ Δ Ζ Ζ	₹	X
74283	26	< ∢	Contrast x-ray exam of colon	20.2	99.0	0.67	890	79.0	60.0	62.6	22.0	62.0	2 78	XXX
74283	25		Contrast x-ray exam of colon	0.00	2.92	2.66	A N	Ž	0.14	3.06	2.80	Z	N A	×
			Contrast x-ray, gallbladder	0.32	1.62	1.03	₹ Z	A A	90.0	2.00	1.41	Ϋ́	AN	××
74290	26	⋖ ·	Contrast x-ray, gallbladder	0.32	0.11	0.10	0.11	0.10	0.01	0.44	0.43	0.44	0.43	×
74290	 ၁	∢ •	Contrast x-ray, gallbladder	0.00	1.52	0.93	Y :	Y :	0.05	1.57	0.98	Y :	¥ :	X
74291			Contrast x-rays, gallbladder	0.50	1.65	0.78	N C	NA V	0.03	88.	1.0.1	A S	A S	× }
74291	0 Z		Contrast x-rays, galibladder	0.50	1.50	0.07) O.O.) O.O.	0.0	0.20	0.20	0.20 NA	0.20 NA	<u> </u>
•	 		X-ray bile direts/hancreas	98.0	2.0	- 0.7.0	0	010	20.0	- 6.0	0.50	020	02.0	×××
74301	26		X-rays at surgery add-on	0.21	0.07	0.07	0.07	0.07	0.01	0.29	0.29	0.29	0.29	727
		<	X-ray bile ducts/pancreas	0.42	0.15	0.73	¥Z	₹ Z	0.07	0.64	1.22	Y Z	Y X	X
74305	26		X-ray bile ducts/pancreas	0.42	0.15	0.14	0.15	0.14	0.05	0.59	0.58	0.59	0.58	××
74305	1 2 		X-ray bile ducts/pancreas	0.00	0.00	0.59	Y Y	A A	0.02	0.05	0.64	N A	A A	××
74320		⋖	Contrast x-ray of bile ducts	0.54	2.23	3.06	A N	A A	0.19	2.96	3.79	Y Y	A	×
74320	26	∢.	Contrast x-ray of bile ducts	0.54	0.19	0.18	0.19	0.18	0.02	0.75	0.74	0.75	0.74	X
74320	 2 L		Contrast x-ray of bile ducts	0.00	2.04	2.88	¥:	Y Z	0.17	2.21	3.05	¥ :	¥:	X
74327			X-ray bile stone removal	0.70	3.14	2.29	A C	A S	0.14	3.98	3.13	A S	N S	X
74327	26		X-ray bile stone removal	0.70	0.25	0.24	0.25	0.24	0.03	0.98	0.97	86.0	76.0	× š
7432/	: :		X-ray bile stone removal	0.00	2.89	2.05	¥ S	¥ ×	1.0	3.00	2.76	¥ \$	₹ <u>₹</u>	××
	96		X-ray bile duct elidoscopy	0.0	0.20	20.0	2 0	200	0.20	0 0	20.0	2 0	200	< ×
74328		(∢	X-ray bile duct endoscopy	0.0	0.50	2.37	NA AN	4 N	0.03	0.33	25.0	9.50 AN	SS A	XXX
74329	9	< <	X-ray for pancreas endoscopy	0.70	0.26	0.24	0.26	0.24	0.03	0.99	0.97	0.99	0.97	×
74330			X-ray bile/panc endoscopy	06.0	0.33	2.67	AN	NA	0.21	1.44	3.78	N N	A N	××
74330	26		X-ray bile/panc endoscopy	0.00	0.33	0.30	0.33	0:30	0.04	1.27	1.24	1.27	1.24	×
74330	 2 	∢ ⊲	X-ray bile/panc endoscopyX-ray onide for GI tube	0.00	0.00	2.37	Z Z	A A	0.17	0.17	2.54	₹ Z	A A	××
2		ς .	A lay galace to table	;	;	- i			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,) i		:	

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

ממל		<u>.</u>	COURTINOIS C. LIEFALIVE VALOE (11) (11) (11) (12) (13) (13) (13) (13) (14) (15) (15) (15) (15) (15) (15) (15) (15	ווייי דריייייייייייייייייייייייייייייייי		5	֡֝֝֝֝֜֝֝֝֝֝֝֝֡֝֝֝֝֡֝֝֡֝֝֡֝֝֡֝֝֡֝֡֝֝֡֝֜֜֝֡֝֡֜֜֝֡֜֝֜֜֜֜֝֡֜֜֝֡֡֡֜֝֡֡֜֝֜֜֝֡֡֜֜֝֡֡֡֡֜֝֡֡֡֡֜֝֜֜֝֡֡֜֜֝֡֡֡֜֜֝֡֡֜֜֝֡֡֜֜	/	ב ב ב		5	,		j
CPT 1 HCPCS 2	Mod	Status	Description	Physician work RVUs ³	Fully im- plement- ed non- facility PE RVUs	Year 2007 transi- tional non-facil- ity PE RVUs	Fully implemented facility	Year 2007 transi- tional fa- cility PE RVUs	Mal-prac- tice RVUs	Fully implemented nonfacility	Year 2007 transi- tional non-facil- ity total	Fully implemented facility	Year 2007 transi- tional fa- cility total	Global
74340	26	∢ ⊲	X-ray guide for GI tubeX-ray guide for GI tube	0.54	0.19	0.18	0.19 AN	0.18 NA	0.02	0.75	0.74	0.75 NA	0.74 NA	××
74350		< ⋖	X-ray guide, stomach tube	0.76	2.33	3.14	¥	Ž	0.20	3.29	4.10	Ž	¥	X
74350	26	⋖ ·	X-ray guide, stomach tube	0.76	0.28	0.26	0.28	0.26	0.03	1.07	1.05	1.07	1.05	X
74350	 ပ		X-ray guide, stomach tube	0.00	2.06	2.89	Υ S	Z Z	0.17	2.23	3.06	¥ Ş	Y S	×
74355	26		X-ray guide, intestinal tubeX-ray guide, intestinal tube	0.76	0.27	0.26	0.27	0.26	0.03	1.06	1.05	1.06		X X
	22		X-ray guide, intestinal tube	0.00	0.00	1.97	Ž	Z Y	0.14	0.14	2.11	N N	Y Y	X
74360			X-ray guide, GI dilation	0.54	0.25	2.58	N A	N N	0.19	0.98	3.31	AN	¥ N	XX
74360	26		X-ray guide, GI dilation	0.54	0.25	0.21	0.25	0.21	0.05	0.81	0.77	0.81	0.77	X
74360	္ ဗ		X-ray guide, Gl dilation	0.00	0.00	2.37	A C	A C	0.17	0.17	2.54	A S	A S	× }
		۷ ۵	A-ray, bile duct dilation	0.88	0.32	0.30	0.3Z	0.30 NA	40.0	93.54 33.44	2 68	42. AA	Z N	X X
74400	26	< ∢	Contrst x-ray, urinary tract	0.49	0.17	0.16	0.17	0.16	0.02	0.68	0.67	0.68	0.67	×
	TC	4		00.0	2.55	1.90	AN	ĄZ	0.11	2.66	2.01	NA	AN	××
74410		⋖		0.49	2.83	2.30	A A	Y Y	0.13	3.45	2.92	Y Y	A A	××
74410	26	⋖ ·		0.49	0.18	0.17	0.18	0.17	0.05	0.69	0.68	69.0	0.68	×
74410	 	< <	Contrst x-ray, urinary tract	0.00	2.65	2.13	¥ :	Z Z	0.11	2.76	2.24	Y S	Υ S	×
74415	96	< <	Control x-ray, urinary tract	94.0	3.43	6.00	4 1	Z Y	4 6	9.40	3.21	NA 0	N 0	< >
74415	 	< ∢		000	3.25	2.5	Y Z	0 A	0.02	3.37	25.0	9.5 A	S Z	XX X
)	< <	Contrst x-ray, urinary tract	0.36	0.13	2.10	Z Z	₹ Z	0.16	0.65	2.62	Z Z	Z Z	×
	26	4		0.36	0.13	0.12	0.13	0.12	0.02	0.51	0.50	0.51	0.50	××
	TC	⋖	Contrst x-ray, urinary tract	0.00	0.00	1.97	Y Y	Y Y	0.14	0.14	2.11	Y Y	Y Y	××
74425		< <	Contrst x-ray, urinary tract	0.36	0.13	1.11	A S	Y V	60.0	0.58	1.56	Y Z	A S	×
74425	07 L	∢ ⊲	Contrst x-ray, urinary tract	9.00	0.13	0.12	0.13 NA	0.1Z	0.02	0.51	0.50	10.0 NA	0.50 NA	žž
74430)	< ∢	Contrast x-ray, dimaily tract	0.32	2.05	1.37	₹ ₹ 2	Z Z	0.0	2.44	1.77	Z Z	ζ <u> </u>	XX
74430	26	< <	Contrast x-ray, bladder	0.32	0.12	0.11	0.12	0.11	0.02	0.46	0.45	0.46	0.45	X
74430	TC	∢	Contrast x-ray, bladder	0.00	1.93	1.27	Y Y	Y Y	90.0	1.99	1.33	Y Y	Y Y	X
74440			X-ray, male genital tract	0.38	2.26	1.50	A S	A S	0.08	2.72	1.96	A i	A S	×
74440	0 Z 1 Z		X-ray, male genital tract	88.0	0.13	0.13	0.13	5 V	0.02	0.55	0.53	0.55	0.53	×
74445)		X-ray, male german mact	1.14	0.46	1.24	₹ ₹ 2	₹ ₹	0.13	1.73	2.51	¥ Ž	¥ ₹	XX
	26	⋖	X-ray exam of penis	1.14	0.46	0.39	0.46	0.39	0.07	1.67	1.60	1.67	1.60	XX
74445	TC	∢ ·	X-ray exam of penis	0.00	0.00	0.85	Y :	Y S	0.06	0.06	0.91	¥ :	Y :	X
74450	36	∢ <	X-ray, urethra/bladder	0.33	21.0	1.2.1	N N	Z F	0.10	0.55	1.64	NA C	NA NA	×××
74450	22	< ∢	X-ray, urethra/bladder	0.00	0.00	1.10	2 Z	Z Z	0.08	0.08	1.18	ž Ž	Y Z	XX
		< <	X-ray, urethra/bladder	0.33	2.26	1.83	Ą	Y Y	0.12	2.71	2.28	A Z	Y Z	X
74455	26	⋖		0.33	0.13	0.12	0.13	0.12	0.05	0.48	0.47	0.48	0.47	X
74455	٦ 	⋖	X-ray, urethra/bladder	0.00	2.13	1.72	A A	₹ Z	0.10	2.23	1.82	Y N	Y Y	×
74470		< <	X-ray exam of kidney lesion	0.54	0.17	1.12	Z Y	N S	0.09	0.80	1.75	N S	A I	× š
74470	07 L	< ⊲	X-ray exam of kidney lesion	4.0	0.0	0.0) N	0.0	0.02	0.73	10.7	0.73 NA	4.0 VA	* * *
74475)	(∢	X-ray control. cath insert	0.54	2.22	3.75	¥	₹ ₹	0.07	3.00	4.53	¥ Ž	¥ ₹	XX
	26	< <	X-ray control, cath insert	0.54	0.19	0.18	0.19	0.18	0.05	0.75	0.74	0.75	0.74	X
74475	TC	⋖	X-ray control, cath insert	0.00	2.03	3.57	¥.	Y :	0.22	2.25	3.79	A :	¥:	X
74480		∢ •	X-ray control, cath insert	0.54	2.23	3.75	¥ S	N S	0.24	3.01	4.53	NA	NA KA	×}
74480	 7.F	∢ <	X-ray control, cath insert	0.54	0.20	0.19	0.20	6 2	0.02	0.76	9.75	97.0	0.75	×××
	2	τ	A-lay comusi, cam most	5	, t	5	ζ.	1781	77.0	F.F.	5	SNI	ζ.	\\\\\

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

700	ADDENDOM D LECATIVE	<u>.</u> ב	TEATIVE VALUE (110 (110 G) AND I	ורול היי		5	; ; ;		110001	_		,		3
CPT 1 HCPCS 2	Mod	Status	Description	Physician work RVUs ³	Fully implemented non-facility PE	Year 2007 transi- tronal non-facil- ity PE RVUs	Fully implemented facility	Year 2007 transi- tional fa- cility PE RVUs	Mal-practice RVUs	Fully implemented nonfacility total	Year 2007 transi- tional non-facil- ity total	Fully implemented facility	Year 2007 transi- tional fa- cility total	Global
74485 74485	26	۷ ۷	X-ray guide, GU dilationX-ray guide, GU dilation	0.54 0.54	2.38	3.09	NA 0.21	NA 0.18	0.20	3.12	3.83	NA 0.78	NA 0.75	××
74485	TC		X-ray guide, GU dilationX-ray measurement of pelvis	0.00	2.18	2.92	A A	A A	0.17	2.35	3.09	A Z	Y Y	××
	26		X-ray measurement of pelvis	0.34	0.12	0.11	0.12	0.11	0.05	0.48	0.47	0.48	0.47	X
74710	TC		X-ray measurement of pelvisX-ray female genital tract	0.00	0.56	0.93	A A	A A	0.00	0.62	0.99	A N	Z Z	××
74740	26		X-ray, female genital tract	0.38	0.13	0.13	0.13	0.13	0.02	0.53	0.53	0.53	0.53	××××××××××××××××××××××××××××××××××××××
74740	TC %		X-ray, female genital tractX-ray fallonian tuhe	0.00	1.70	1.41	A o	A C	0.07	1.77	1.48	NA S	N O	××
74775	0		X-ray exam of perineum	0.62	0.21	1.31	2 Z	NA NA	0.0	0.94	2.04	8.9 A	S S	₹×
74775	26		X-ray exam of perineum	0.62	0.21	0.21	0.21	0.21	0.03	0.86	0.86	0.86	0.86	X
74775	ည		X-ray exam of perineum	0.00	0.00	13.81	⊈ ₹ Z Z	4 4 2 2	0.08	0.08	1.18	¥ ¥	₹ ₹	××
:	26	. ∢	Heart mri for morph w/o dye	1.60	0.61	0.55	0.61	0.55	0.07	2.28	2.22	2.28	2.22	X
75552	TC	∢ <	Heart mri for morph w/o dye	0.00	19.35	13.26	₹ ž	¥ ž	0.59	19.94	13.85	¥ ž	Ϋ́	×}
75553	26	< <	Heart mri for morph w/dye	00.0	0.98	0.73	86.0	0.73	0.00	3.05	2.80	3.05	280	ž ž
	2	< <	Heart mri for morph w/dye	0.00	23.82	14.38	Z Z Z	NA	0.59	24.41	14.97	N N	₹ Z	X
75554		∢•	Cardiac MRI/function	1.83	27.96	15.89	A S	A S	0.66	30.45	18.38	Υį	ΑŞ	X
	9 Z C		Cardiac MRI/function	.83	0.84	0.69	9.84 AN	0.69 NA	0.07	27.74	2.59	2.74 NA	2.59 AN	××
75555	2	< <		1.74	28.19	15.95	Z Z	Z Z	0.66	30.59	18.35	₹₹	ξŞ	××××××××××××××××××××××××××××××××××××××
•	26	⋖ ·	Cardiac MRI/limited study	1.74	0.87	0.70	0.87	0.70	0.07	2.68	2.51	2.68	2.51	X
75555	 	∢ <		0.00	27.32	15.25	Υ S	¥ S	0.59	27.91	15.84	¥ ž	¥ Ş	×}
75600	26		Contrast x-ray exam of aorta	0.49	0.26	0.21	0,26	0.21	0.02	0.77	0.72	0.74	0.72	žž
	TC			0.00	6.33	11.06	¥	NA	0.65	6.98	11.71	Ϋ́	NA A	XX
75605	30	∢ <	Contrast x-ray exam of aorta	4.5	3.70	10.71	A G	A S	0.70	5.54	12.55	ξį	¥ و	×>
75605	 22	< <		0.0	3.18	10.28	A A	NA A	0.65	3.83	10.93	₹ 2	Z Z	₹×
		⋖		1.14	3.49	10.64	Y Y	N	0.71	5.34	12.49	¥.	¥	X
75625	26	∢ <	Contrast x-ray exam of aorta	4.6	0.44	0.40	44.0	0.40	0.06	1.64	1.60	4.5 7.5	0.E	×;
75630	2		X-ray aorta, leg arteries	1.79	3.89	11.31	₹₹	₹ ₹	08.0	6.48	13.90	ΣŽ	₹ Z	₹×
75630	26		X-ray aorta, leg arteries	1.79	0.74	0.64	0.74	0.64	0.11	2.64	2.54	2.64	2.54	X
75635	<u>ن</u>		X-ray aorta, leg arteries	0.00	3.14	15.91	≰ ≰ Z Z	≰ ≰ Ž Ž	0.50	3.83	18.81	¥ ¥	≰	××
	26		Ct angio abdominal arteries	2.40	0.90	0.82	06.0	0.82	0.11	3.41	3.33	3.41	3.33	X
75635			Ct angio abdominal arteries	0.00	12.47	15.09	₹ ž	¥ S	0.39	12.86	15.48	¥ ž	Z Z	× }
75650	26	۲∢	Artery x-rays, flead & fleck	1.49	0.59	0.52	0.59	0.52	0.07	2.15	2.08	2.15	2.08	₹×
	TC	∢.	Artery x-rays, head & neck	0.00	3.06	10.25	¥:	¥:	0.65	3.71	10.90	¥:	¥:	X
75658	30	∢ <	Artery x-rays, arm	<u>ਦ</u> ਦ	3.98	10.83	A F	A S	0.72	6.01	12.86	N N	N A	× }
75658	 22 22	۲ ح	Artery x-rays, arm	0.00		10.35	S Z	NA A	0.07	4.12	11.00		8 ₹	{×
:		∢.	head	1.3	4.07	10.83	¥,	N A	0.71	6.09	12.85	¥.	Y Y	X
75660	26	∢ <	Artery x-rays, head & neck		0.52	10.37	0.52 NA	0.46 NA	0.06	1.89	1.83	1.89	1.83	××
75662	2	(∢	head	1.66	5.24	11.23	₹ ₹	Z Z	0.71	7.61	13.60	₹ ₹	ξŞ	ξ× ×
75662	26		Artery x-rays, head & neck	1.66	0.75	0.63	0.75	0.63	0.06	2.47	2.35	2.47	2.35	X
75662 75665	 ၁ 	⋖ ⋖	Artery x-rays, head & neck	0.00	4.49 4.25	10.60	Z Z	 8	0.65	5.14	11.25	Z Z	 <u> </u>	××
- 1 1]:									

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

]])	;	: 1	i)	j
CPT 1 HCPCS ²	Mod	Status	Description	Physician work RVUs ³	Fully im- plement- ed non- facility PE RVUs	Year 2007 transi- tional non-facil- ity PE RVUs	Fully implemented facility	Year 2007 transi- tional fa- cility PE RVUs	Mal-prac- tice RVUs	Fully im- plement- ed non- facility total	Year 2007 transi- tional non-facil- ity total	Fully implemented facility	Year 2007 transi- tional fa- cility total	Global
75665	26	⋖・	Artery x-rays, head & neck	1.31	0.49	0.45	0.49	0.45	0.09	1.89	1.85	1.89	1.85	X
75655	<u></u>	∢	Artery x-rays, head & neck	0.00	3.76	10.42	A Z	A N	0.65	7.66	13.59	¥ ₹	A Z	××
75671	26	< ∢	Artery x-rays, head & neck	99:1	0.65	0.58	0.65	0.58	0.07	2.38	2.31	2.38	2.31	××××××××××××××××××××××××××××××××××××××
75671	TC	A	head &	0.00	4.63	10.64	N A	N A	0.65	5.28	11.29	¥	N	××
75676		۷.	Artery x-rays, neck	1.3	4.00	10.81	¥ S	¥,	0.72	6.03	12.84	¥ !	¥,	X
75676	26	∢ <	Artery x-rays, neck	1.31	0.49	0.45	0.49	0.45	0.07	1.87	1.83	1.87	1.83	×
75680	<u>:</u>	۷ ح	Artery x-rays, neck	1.66	4.77	11.09	¥	₹ ₹	0.72	7.15	13.47	₹ ₹	¥	XX
75680	26	< <	Artery x-rays, neck	1.66	0.67	0.58	0.67	0.58	0.07	2.40	2.31	2.40	2.31	X
75680	TC	∢.	Artery x-rays, neck	0.00	4.09	10.50	¥:	¥:	0.65	4.74	11.15	¥:	¥.	X
75685		∢ <		E 5	4.04	10.81	A G	A S	0.71	6.06	12.83	A S	A S	××
	 107 107	< ⊲	Artery x-rays spine	5.0	0.52	10.36	2C.0	0.43 AN	0.00	71.4	10.11	90.7 V	20.1 AN	{
75705)	< ∢		2.18	4.27	11.10	¥ ×	₹ Ž	0.78	7.23	14.06	ž Ž	¥ Z	×××
	26	A		2.18	0.79	0.75	0.79	0.75	0.13	3.10	3.06	3.10	3.06	××
75705	TC	⋖		0.00	3.49	10.35	Y Y	Y Y	0.65	4.14	11.00	Y Y	₹ Z	×
75710		∢ •		4	4.10	10.80	Y ;	AN (0.72	5.96	12.66	Y S	¥ ;	X
75710	 7.6 7.0	∢ <		41.1	0.44	0.40	0.44	0.40	0.07	1.65	1.61	3.65	1.61 1.61	×××
75716	<u>:</u> د	∢ ∢	Artery x-rays, armi/leg	13.00	3.00	11.08	A N	Y Y	0.62	15.4 13.	13.11	¥ ¥	A N	X X
75716	26	< ∢		1.3	0.52	0.45	0.52	0.45	0.07	1.90	1.83	1.90	1.83	X
	TC	A		0.00	4.58	10.63	A	N A	0.65	5.23	11.28	¥	N	××
75722		⋖		1.14	4.00	10.78	Y Y	Y Y	0.70	5.84	12.62	Y Y	₹ Z	×
75722	26	∢ <	kidney	1.14	0.49	0.42	0.49	0.42	0.05	1.68	1.61	1.68	1.61	× ×
75797	: ၁	< <	Artery x-rays, kidney	0.00	 	11.30	₹ <u>₹</u>	¥ \$	0.63	01.4	13.42	ξ	₹ 5	{ }
75724	26	< <	Artery x-rays, kidneys	1.49	0.77	0.61	0.77	0.61	0.02	2.31	2.15	2.31	2.15	₹×
75724	TC	۷		0.00	4.52	10.61	AN	Y Y	0.65	5.17	11.26	AN	Ą	××
75726		⋖ ·		1.1	3.92	10.74	Y Y	¥,	0.70	5.76	12.58	Y Y	Υ Y	X
75726	26	∢ •		4.14	0.42	0.38	0.42	0.38	0.05	1.61	1.57	1.61	1.57	X }
75731	<u>:</u> د	∢ ∢	Artery x-rays, abdomen	0.00	3.50	10.36	A N	Y Z	0.65	7.90	10.11	A A	A N	X X
75731	26	< ∢	Artery x-rays, adrenal gland	4-	0.45	0.39	0.45	0.39	0.06	1.65	1.59	1.65	1.59	×
75731	TC	4	adrenal gland	0.00	3.60	10.38	A A	Ą	0.65	4.25	11.03	A A	A A	××
75733		∢ •	Artery x-rays, adrenals	E. 5	5.42	11.17	A S	¥ S	0.71	7.44	13.19	¥ S	A S	X
75700	 7 Z Q	∢ <		F. C.	0.62	0.49	0.62	0.49	0.06	1.99	1.86	96.L	98.	×××
	: :	۲ ۵	Ariery x-rays, adrerials	0.00	4.80	10.00	Z Z	Z Z	0.63	5.45	25.0	X Z	Z Z	XX
75736	26	< ∢	Artery x-rays, pelvis	1 4	0.44	0.40	0.44	0.40	0.06	1.64	1.60	1.64	1.60	××
	2	< <		0.00	3.58	10.38	¥ Z	¥ X	0.65	4.23	11.03	Z Z	₹ Z	X
75741		⋖	Artery x-rays, lung	1.31	3.29	10.63	Y Y	N A	0.71	5.31	12.65	A A	¥ X	××
75741	26	∢ ·	Artery x-rays, lung	1.31	0.49	0.45	0.49	0.45	0.06	1.86	1.82	1.86	1.82	X
75741	 2	∢ <		0.00	2.81	10.18	Υ S	¥ ž	0.65	3.46	10.83	Υ S	₹ Ş	××
75743	26	∢ ∢	Artery x-rays, lungs	9. 1.	3.70	0.56	0.62	NA 0.56	0.07	2.35	2.29	2.35	2.29 	{X
	25	∶ ∢		0.00	3.08	10.25	Ϋ́	¥.	0.65	3.73	10.90	Ž	Į Ą	×
75746		4	Artery x-rays, lung	1.14	3.60	10.67	A	N N	0.70	5.44	12.51	¥ N	A	××
75746	26	∢ ·	Artery x-rays, lung	1.1	0.39	0.38	0.39	0.38	0.05	1.58	1.57	1.58	1.57	X
75/46	:: : : :		Artery x-rays, lung	0.00	3.21	10.28	Z Z	NA	C0.02	3.80	10.93	AN	Y Y	XX

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

5	בילון. בי	: :	CODE INDOM C: LIEENINE ANCOE CIVILO (11900) DIN)				J				1
CPT ¹ HCPCS ²	Mod	Status	Description	Physician work RVUs ³	Fully implemented non-facility PE	Year 2007 transi- tional non-facil- ity PE RVUs	Fully implemented facility	Year 2007 transi- tional fa- cility PE RVUs	Mal-prac- tice RVUs	Fully im- plement- ed non- facility total	Year 2007 transi- tional non-facil- ity total	Fully implemented facility	Year 2007 transi- tional fa- cility total	Global
75756 75756	26	∢∢	Artery x-rays, chest	1. L 4. L.	4.51	10.95	NA 0.62	NA 0.49	0.69	6.34	12.78	1.80	NA 1.67	××
75756	TC		Artery x-rays, chest	0.00	3.90	10.46	A A	Y Z	0.65	4.55	11.11	A Z	A A	XXX
75774	26	< <	Artery x-ray, each vessel	0.36	0.14	0.13	0.14	0.13	0.02	0.52	0.51	0.52	0.51	ZZZ
7577475790	 2L	⋖	Artery x-ray, each vessel	0.00	3.24	10.10	A Z	A N	0.65	3.12	10.75	A Z	Z Z	Z X
75790	26	< <	Visualize A-V shunt		0.61	0.60	0.61	09.0	0.09	2.54	2.53	2.54	2.53	X
75790	TC	∢ <	Visualize A-V shunt	0.00	2.63	1.67	Z Z	¥ ž	0.08	2.71	1.75	Z Z	Z Z	××
75801	26	(∢	Lymph vessel x-ray, arm/leg	0.81	0.22	0.26	0.22	0.26	0.08	1.1	1.15	<u>-</u>	1.15	XX
75801	TC		Lymph vessel x-ray, arm/leg	0.00	0.00	4.07	Z Z	¥ ž	0.29	0.29	4.36	¥ S	¥ ž	×>
75803	26		Lymph vessel x-ray,arms/legs	1.17	0.38	0.38	0.38	0.38	0.05	1.60	1.60	1.65 F	8. 8.	ξ× ×
75803	TC	∢ <	Lymph vessel x-ray,arms/legs	0.00	0.00	4.07	¥ S	¥ S	0.29	0.29	4.36	Z Z	¥ S	× }
75805	26	(∢	Lymph vessel x-ray, trunk	0.81	0.23	0.26	0.23	0.26	0.02	1.09	1.12	1.09	1.12	₹×
	10 		Lymph vessel x-ray, trunk	0.00	0.00	4.59	A A	¥	0.33	0.33	4.92	Ϋ́	Υ Y	XX
75807	26	∢ <	Lymph vessel x-ray, trunk	1.17	0.41	0.39	0.41	0.39	0.05	1.63	1.61	1.63	1.61	×}
75809	26	(∢	Nonvascular shunt, x-ray	0.47	0.16	0.15	0.16	0.15	0.02	0.65	0.64	0.65	0.64	₹×
:	٦ 		Nonvascular shunt, x-ray	0.00	2.12	1.12	A A	¥	0.02	2.17	1.17	¥	A A	XX
75810			Vein x-ray, spleen/liver	1.14	0.43	9.87	A S	A S	0.70	2.27	11.71	₹ S	A S	× }
75810			vein x-ray, spieen/liver Vein x-ray, spieen/liver	0.00	0.00	9.48	0.43 8 A	0.39 AA	0.02	0.65	10.13	Z A	8.5 8. ₹	žž
		⋖	Vein x-ray, arm/leg	0.70	3.11	1.66	A A	Ϋ́	0.09	3.90	2.45	¥	N A	XX
75820	26	∢ <	Vein x-ray, arm/leg	0.70	0.29	0.25	0.29	0.25	0.03	1.02	0.98	1.02	0.98 VN	×}
75822	2	< <	Veill X-tay, amilyleg	1.06	3.32	2.20	ΣŽ	¥ ₹	0.00	4.51	3.39	ΣŽ	₹Ž	₹X
75822	26	⋖ .	Vein x-ray, arms/legs	1.06	0.38	0.36	0.38	0.36	0.02	1.49	1.47	1.49	1.47	X
75822))		Vein x-ray, arms/legsVein x-ray, trunk	0.00	3.07	1.85	¥ ¥	g g	0.08	3.03	12.39	¥ ¥	₹ ₹	××
	26	. ∢	Vein x-ray, trunk	1.14	0.39	0.38	0.39	0.38	0.07	1.60	1.59	1.60	1.59	×
75825	ည	∢ ላ	Vein x-ray, trunk	0.00	3.10	10.15	A Z	A A	0.65	3.32	10.80	A Z	Z Z	××
75827	26	< <	Vein x-ray, chest	1.1	0.39	0.38	0.39	0.38	0.05	1.58	1.57	1.58	1.57	X
75827	고 :::	∢ <		0.00	2.71	10.16	Ϋ́	₹ Z	0.65	3.36	10.81	ŽΣ	¥ S	×}
75831	26		vein x-ray, kluney	1. 1.	0.39	0.38	0.39	0.38	0.00	1.59	1.58	1.59	1.58	žž
	10 			0.00	2.79	10.18	NA	¥ Y	0.65	3.44	10.83	¥	N A	XX
75833	90	∢ <		1.49	3.86	10.81	N S	A G	0.74	6.09	13.04	¥ S	¥ 8	×>
75833		< <	veill x-lay, klulleys	0.00	3.35	10.32	- K	0.30 A	0.09	4.00	10.97	8.03 AN	8.00 A	XX
	:	⋖ ·	Vein x-ray, adrenal gland	1.14	3.41	10.62	N	¥.	0.72	5.27	12.48	NA	Y Y	X
75840	26 TC		Vein x-ray, adrenal gland	1.14	0.48	0.41	0.48	0.41	0.07	1.69	1.62	1.69	1.62	××
75842	2		Vein x-ray, adrenal glands	1.49	3.87	10.81	ΣŽ	₹Ź	0.72	6.08	13.02	ΣŽ	₹Ž	₹×
75842	26		Vein x-ray, adrenal glands	1.49	0.54	0.50	0.54	0.50	0.07	2.10	2.06	2.10	2.06	X
7584275860	 ၁	∢	Vein x-ray, adrenal glands	0.00	3.33	10.31	Z Z	A A	0.65	3.98	10.96	A N	₹ ₹	××
75860	26	< <	Vein x-ray, neck	1.1	0.52	0.42	0.52	0.42	0.04	1.70	1.60	1.70	1.60	X
75860	TC		Vein x-ray, neck	0.00	3.03	10.24	NA	AA	0.65	3.68	10.89	NA	NA	XX

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

ADL	ADDENDOM D RELATIVE		VALUE OINIS (NVOS)	ובראו בה	AD LIEEATED HAI OTHINATION OSED HA	20.00		טיואוואור ו אראטוטאוא טאוואוואורא ואס	ואר היים ביים ביים ביים ביים ביים ביים ביים	- - -		/007		נ
CPT 1 HCPCS 2	Мод	Status	Description	Physician work RVUs ³	Fully implemented non-facility PE	Year 2007 transi- tronal non-facil- ity PE RVUs	Fully implemented facility	Year 2007 transi- tional fa- cility PE RVUs	Mal-prac- tice RVUs	Fully implemented non-facility total	Year 2007 transi- tional non-facil- ity total	Fully implemented facility	Year 2007 transi- tional fa- cility total	Global
75870	26	۷ ۷	Vein x-ray, skull	1. L 4 L. L	3.35	10.61	NA 0.42	0.40	0.70	5.19	12.45	1.61	1.59	××
75870	70	∢ <	Vein x-ray, skull	0.00	2.93	10.21	¥ Ž	¥ Z	0.65	3.58	10.86	Z Z	Z Z	××
75872	26	(∢	Vein x-ray, skull	1.1	0.42	0.38	0.42	0.38	0.13	1.70	1.66	1.70	99.	XX
75872		∢ <	Vein x-ray, skull	0.00	3.47	10.35	¥ ž	¥ S	0.65	4.12	11.00	¥ ž	¥ ž	×3
75880		∢ ∢	Vein x-ray, eye socket	0.70	3.07	0.23	0.24	0.23	0.03	3.86	0.96	0.97	96.0	žž
:	2	∢.	Vein x-ray, eye socket	0.00	2.83	1.42	¥:	¥:	0.06	2.89	1.48	Ϋ́	¥:	XX
75885	26	∢ ∢	Vein x-ray, liver Vein x-rav. liver	- - - - - - - -	3.34	10.67	0.52	NA 0.48	0.71	5.49	12.82	2.02		××
: :	10	. ⋖	iver	0.00	2.82	10.19	Y Y	¥	0.65	3.47	10.84	N A	Ž	×
75887	90	< <	Vein x-ray, liver	+ + + + +	3.48	10.70	NA R	A S	0.71	5.63	12.85	N S	 ¥ 8	××
75887	100	(∢	Vein X-ray, liver	0.0	2.94	10.22	S A	S A	0.00	3.59	10.87	S.S.	8: N	₹×
75889	: 6	۷,	je.	1.14	3.24	10.57	A S	A S	0.70	5.08	12.41	¥ Ş	≱ !	X
75889	7 Z	∢ <	Vein x-ray, liver	1.14	0.42	0.38	0.42	0.38 NA	0.05	1.61	1.57	1.61	1.57 NA	××
75891	2	(∢	Vein x-ray, liver	1.14	3.21	10.56	¥ Ž	ΣŹ	0.70	5.05	12.40	¥ Ž	¥ Ž	ξ× ×
75891	26	⋖・		1.14	0.41	0.38	0.41	0.38	0.05	1.60	1.57	1.60	1.57	X
75893	 ၁	۷ ۵	Vein x-ray, liver	0.00	2.80	10.18	A A	A Z	0.65	3.45	10.83	A Z	Z Z	××
	26	< <	Venous sampling by catheter	0.54	0.19	0.18	0.19	0.18	0.02	0.75	0.74	0.75	0.74	X
75893	TC	∢ <	Venous sampling by catheter	0.00	2.80	10.18	¥ Z	¥ ž	0.65	3.45	10.83	Z Z	¥ ž	× }
75894	26		X-rays, transcath therapyX-rays, transcath therapy	. E	0.46	0.44	0.46	4.0	0.08	1.85	1.83	1.85	— ₹ 8:	₹×
	2		X-rays, transcath therapy	0.00	0.00	18.15	¥.	¥.	1.27	1.27	19.42	¥.	¥	X
7589675896	26	∢ ⊲	X-rays, transcath therapyX-rays transcath therapy	<u>.</u> .	0.54	16.26	A S	A C	1.15	3.00	18.72	¥ S	¥ 8	××
75896	25	< <	X-rays, transcath therapy	0.0	00:0	15.79	A N	¥ X	1.10	1.10	16.89	Z Z	₹	××
75898			Follow-up angiography	1.65	0.65	1.36	A S	A S	0.13	2.43	3.14	N S	¥8	X
75898	- C - C - C		Follow-up anglographyFollow-up anglography	00°C	0.00	0.58	0.65 AA	0.58 AN	0.0	2.37	2.30	75.3 NA	08.3 V A	žž
		. ∢	Intravascular cath exchange	0.49	0.17	0.16	0.17	0.16	0.03	0.69	0.68	69.0	0.68	×
75901	26	∢ ∢	Hemove cva device obstruct	0.49	4.39	0.16	0.17	0.16	0.82	5.73	3.54	NA 0.68	NA 0.67	××
	12	< <	Remove cva device obstruct	0.00	4.22	2.04	₹ Z	₹ Z	0.83	5.05	2.87	N S	Z Z	×
75902	26	∢	Remove eva lumen obstruct	0.39	1.72	1.51	A Z	N C	0.85	2.96	2.75	NA R	A Z	ž
75902	12	< <	Remove cva lumen obstruct	0.00	1.58	1.38	Y A	Z S	0.83	2.41	2.21	S Z	₹ Z	××
75940			X-ray placement, vein filter	0.54	0.18	99.6	A S	A S	0.69	1.41	10.89	A S	Z S	X
759407	0 Z		X-ray placement, vein Illter X-ray placement vein filter	0.0 40.0	0.0	0.18	0.18 B A N	0.18 NA	0.0	0.76	10.76	0.76 NA	0./0 NA	ž×
75945	:	< <	Intravascular us	0.40	0.16	3.57	¥ Z	Ž Ž	0.28	0.84	4.25	Z Z	₹ Ž	XX
75945	26	۷.	Intravascular us	0.40	0.16	0.15	0.16	0.15	0.04	0.60	0.59	0.60	0.59	X
75946	20 20 20 20		Intravascular us	0.00	0.00	3.43	0.13	0.14	0.24	0.24	3.67	NA 0.58	NA 0.59	XXX
:	26	⋖	Endovasc repair abdom aorta	4.49	1.38	1.46	1.38	1.46	0.43	6.30	6.38	6.30	6.38	××
75953	26	∢ ⊲	Abdom aneurysm endovas rpr	1.36 2.25	0.42	0.44	0.42	0.44	0.13	1.91	1.93	1.91	1.93	××
75956	26	< <	Xray, endovasc thor ao repr	7.00	1.57	2.43	1.57	2.43	0.69	9.26	10.12	9.26	10.12	XX
75957	26	4	Xray, endovasc thor ao repr	00.9	1.35	2.08	1.35	2.08	0.59	7.94	8.67	7.94	8.67	×

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

				i i	;			i	İ					
CPT 1 HCPCS 2	Mod	Status	Description	Physician work RVUs ³	Fully implemented non-facility PE	Year 2007 transi- tional non-facil- ity PE RVUs	Fully im- plement- ed facility PE RVUs	Year 2007 transi- tional fa- cility PE RVUs	Mal-practice RVUs	Fully im- plement- ed non- facility total	Year 2007 transi- tional non-facil- ity total	Fully implemented facility	Year 2007 transi- tional fa- cility total	Global
75958	26	∢ ∢	Xray, place prox ext thor aoXray, place dist ext thor ao	4.00	0.90	1.39	0.90	1.39	0.39	5.29	5.78	5.29	5.78	××
75960		< <	Transcath iv stent rs&i	0.82	0.33	11.50	¥	A A	0.82	1.97	13.14	A	AN	×
75960				0.82	0.33	0.29	0.33	0.29	0.05	1.20	1.16	1.20	1.16	×
7596075961		∢	Transcath iv stent rs&i	0.00	0.00	11.21	¥ ₹	A A	0.77	0.77	11.98	A N	A A	××
75961	26	< <	Retrieval, broken catheter	4.24	1.50	1.42	1.50	1.42	0.18	5.92	5.84	5.92	5.84	X
75961	TC	۷,	Retrieval, broken catheter	0.00	3.32	8.73	₹:	Z S	0.55	3.87	9.28	¥ :	¥ 2	X
759627	26	∢ ∢	Repair arterial blockage	4 7 7	3.63	12.89	A C	A C	98.0	5.03	14.29	NA 0 78	NA 0 76	××
	12	<	Repair arterial blockage	0.00	3.43	12.70	¥ Y	N N	0.83	4.26	13.53	NA	NA N	X
75964		∢ •	Repair artery blockage, each	0.36	2.45	7.01	A S	A S	0.46	3.27	7.83	A S	¥ ¿	777
75964	1C C	∢ ∢	Repair artery blockage, each	0.00	2.31	0.12	2 A S	N N	0.03	0.52	7.32	NA NA	N A	777
:		⋖	Repair arterial blockage	1.31	4.31	13.27	¥	¥ Z	0.89	6.51	15.47	NA	Ϋ́	XX
75966	26 .	∢	Repair arterial blockage	1.31	9.59	12.77	0.59 NA	0.49 NA	0.00	1.96	13.60	1.96 NA	1.86 NA	××
75968			Repair artery blockade, each	0.36	2.72	7.03	¥	(4 2 Z	0.45	5.60	7.84	Z Z	₹ ₹ 2 Z	727
			Repair artery blockage, each	0.36	0.16	0.14	0.16	0.14	0.02	0.54	0.52	0.54	0.52	ZZZ
75968		∢ <	Repair artery blockage, each	0.00	2.34	6.89	₹ S	¥ ž	0.43	2.77	7.32	Z Z	¥ ž	ZZZ X X X
75970	26	(∢	Vascular biopsy	0.83	0.31	0.29	0.31	0.29	0.0	1.18	1.16	1.18	1.16	XX
	7	⋖	Vascular biopsý	0.00	00.00	89.8	A A	A A	09.0	09:0	9.28	NA	N A	××
75978	: 0	∢ <	Repair venous blockage	0.54	3.39	12.83	A S	A S	0.85	4.78	14.22	N S	N S	× }
75978		< <	Repair venous blockage	00.0	3.21	12.65	9 Z	0 K	0.02	4.04	13.48	7.7 VA	7. O	XX
:	! !	Α.	Contrast xray exam bile duct	4.	0.52	4.56	¥	¥ Z	0.35	2.31	6.35	Z	N A	X
75980	26 .	∢ ◊	Contrast xray exam bile duct	4.5	0.52	0.48	0.52 NA	0.48 NA	0.06	2.02	1.98	2.02	1.98 AN	××
75982		< <	Contrast xray exam bile duct	2.4	0.52	0.48	0.52	0.48	90.0	2.02	1.98	2.02	1.98	X
•	: 6	∢ <	Xray control catheter change	0.72	2.43	2.25	A S	ΣŞ	0.14	3.29	3.11	¥ 5	A S	×}
75984		∢ ∢	Xray control catheter changeXray control catheter change	0.00	0.26	2.01	0.20 AN	9.24 A A	0.03	2.28	2.12	- X	0.99 AN	žž
	! !	Α.	Abscess drainage under x-ray	1.19	2.33	3.25	¥	¥ Z	0.22	3.74	4.66	Z	A N	X
7598975989	26. T.C.	∢	Abscess drainage under x-ray	- 1 - 19 - 19	0.42	0.40	0.42 NA	0.40 NA	0.05	1.66	1.64	1.66 NA	1.64 NA	××
75992		< <	Atherectomy, x-ray exam	0.54	0.24	12.05	₹ Ž	₹ Ž	0.86	1.64	13.45	₹ Ž	ΣŽ	XX
75992	26	∢ •	Atherectomy, x-ray exam	0.54	0.24	0.20	0.24	0.20	0.03	0.81	0.77	0.81	0.77	× š
75993	 ၁ ဗ	∢ ∢	Atherectomy, x-ray exam Atherectomy, x-ray exam	0.00	0.00	11.84	0.15	0 A 4 1	0.83	0.83	12.67	NA 0.53	0.52	XXX
	26		Atherectomy, x-ray exam	1.31	0.63	0.50	0.63	0.50	0.07	2.01	1.88	2.01	1.88	×
75995		⋖ •	Atherectomy, x-ray exam	1.31	0.52	0.48	0.52	0.48	0.05	1.88	1.84	1.88	1.84	XX 1X
75998	9Z	∢ ∢	Atherectomy, x-ray exam	0.38	0.15	0.13	0.13 AN	0.13 NA	0.02	3.34	0.51	NA NA	LC:O	77.
: :	- (4	< <	Fluoroguide for vein device	0.38	0.13	0.13	0.13	0.13	0.01	0.52	0.52	0.52	0.52	ZZ
75998		∢ <	Fluoroguide for vein device	0.00	2.72	1.66	¥ S	Z Z	0.10	2.82	1.76	¥ S	¥ ž	ZZZ
76000	26	(∢	Fluoroscope examination	0.17	0.06	0.05	90.0	0.05	0.00	0.24	0.23	0.24	0.23	XX
	2	Α.	Fluoroscope examination	0.00	2.76	1.67	¥.	¥ Z	0.07	2.83	1.74	Z	N N	×
76001	. 0	∢ <	Fluoroscope exam, extensive	0.67	0.23	2.20	N C	A S	0.19	1.09	3.06	NA P	A S	×
76001		< <	Fluoroscope exam, extensive	0.00	0.00	1.97	AN AN	N N	0.03	0.14	2.11	S.S.	NA A	××××××××××××××××××××××××××××××××××××××

ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

Global	
Year 2007 transitional factorial total	A N N N N N N N N N N N N N N N N N N N
Fully implemented facility	A L A A L A S L A S S A A S S
rim- Year Pully im- 2007 ent- transi- Inc RVUs cility PE RVUs RVUs RVA Fully im- 2007 plement- transi- 2007 plement- transi-	2000 2000
Fully im- plement- ed non- facility total	1.0.1.1.1.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0
Mal-practice RVUs	00000000000000000000000000000000000000
Year 2007 transi-transi-cility PE RVUs	A L A A L A S S A A A A A A A A A A A A
Fully implement- ed facility PE RVUs	A 1. A A 1. A 8. A 8. A 8. A 8. A 8. A 8
Year 2007 2007 transi- tional non-facil- ity PE RVUs	1.42 0.17 1.29 0.15 0.05
Fully im- plement- ed non- facility PE RVUs	1.23 0.162 0.066 0
Physician work RVUs ³	4.5.00000000000000000000000000000000000
Mod Status Description Asia Revues Asia Revues Revu	Needle localization by x-ray Needle localization by x-ray Needle localization by x-ray Needle localization by x-ray Needle localization by x-ray Needle localization by x-ray Fluoroguide for spine inject Fluoroguide for spine inject Fluoroguide for spine inject X-ray stress view X-ray, nose to rectum X-ray, nose to rectum X-ray for bone age X-rays for bone age X-rays bone evaluation X-rays, bone evaluation X-rays, bone survey X-rays, bone survey X-rays, bone survey X-rays, bone survey X-rays, bone survey X-rays, bone survey X-rays, bone survey X-rays, bone survey X-rays, bone evaluation X-rays, bone survey X-rays, bone survey X-rays, bone evaluation X-rays, bone evaluati
Status	
pow W	85 85 88 85 85 85 85 85 85 85 85 85 85 8
CPT 1 CPT 1 HCPCS 2	76003 76003 76005 76005 76005 76005 76010 76010 76010 76020 76020 76060 76060 76060 76060 76060 76060 76070

ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

	ביים היים))		1
CPT 1 HCPCS 2	Mod	Status	Description	Physician work RVUs ³	Fully im- plement- ed non- facility PE RVUs	Year 2007 transi- tional non-facil- ity PE RVUs	Fully implemented facility	Year 2007 transi- tional fa- cility PE RVUs	Mal-prac- tice RVUs	Fully implemented non-facility total	Year 2007 transi- tional non-facil- ity total	Fully im- plement- ed facility total	Year 2007 transi- tional fa- cility total	Global
76082	26	44	Computer mammogram add-on	0.00	0.02	0.02	0.02 NA	0.02 NA	0.01	0.09	0.09	0.09 NA	0.09 NA	222
76083	26	< <	Computer mammogram add-on	90:0 0:00	0.21	0.38	0.02	0.02	0.02	0.29	0.46	0.09	A 0.0	777
		. ⋖ .	Computer mammogram add-on	0.00	0.19	0.36	¥:	A :	0.01	0.20	0.37	¥:	Ž:	ZZZ
76086	26	< <	X-ray of mammary ductX-ray of mammary duct	0.36	0.12	2.38	0,12	0.12	0.16	1.80	0.50	NA 0,50	0.50	××
76086	10	. ⋖ ·	X-ray of mammary duct	0.00	1.16	2.26	Z :	Y S	0.14	1.30	2.40	¥ :	Z:	X
76088	96	< ⊲	X-ray of mammary ductsX-ray of mammary ducts	0.45	1.75	3.30	N C	N A	0.21	2.41	3.96	NA P	N O	××
76088	TC	(∢	X-ray of mammary ducts	0.00	1.59	3.15	N S	N S	0.19	1.78	3.34	8.8 8	NA NA	ξ× ×
76090		∢ <	Mammogram, one breast	0.70	1.70	1.39	A S	A S	0.09	2.49	2.18	NA	N S	X }
76090		< <	Mammogram, one breast	0.00	1.46	1.15	0.24 NA	N A	0.00	1.52	1.21	S A	0.30 AN	XX
•			Mammogram, both breasts	0.87	2.21	1.75	N A	¥ V	0.11	3.19	2.73	NA	N A	XX
76091	26		Mammogram, both breasts	0.87	0.30	0.29	0.30	0.29	0.04	1.21	1.20	1.27	1.20	××
76097	2	< <	Mammodram: Screening	0.00	1.92	1.47	Z Z	Z Z	0.0	2.29	2.27	Z Z	₹ ₹ 2 Z	X X
	26	. ∢	Mammogram, screening	0.70	0.24	0.23	0.24	0.23	0.03	0.97	96.0	0.97	96.0	×
76092	TC	< <	Mammogram, screening	0.00	1.25	1.24	¥ S	Y S	0.07	1.32	1.31	Y S	¥ ž	×
76093	26	< <	Magnetic image, breast	1.63	0.57	0.54	0.57	0.54	0.07	2.27	2.24	2.27	2.24	₹×
		4	Magnetic image, breast	0.00	22.24	18.81	A	A	0.92	23.16	19.73	NA	Ą Ą	XX
76094	90	< <	Magnetic image, both breasts	1.63	22.75	24.07	N S	N N	1.31	25.69	27.01	NA 20	N S	× >
76094	10	< <	Magnetic image, both breasts	0.00	22.17	23.53	S S	t N	1.24	23.41	24.77	NA NA	43.2 AN	XX
		. ∢	Stereotactic breast biopsy	1.59	1.91	6.25	Y Y	N N	0.46	3.96	8.30	N N	N A	X
76095	26	⋖ <	Stereotactic breast biopsy	1.59	0.52	0.52	0.52	0.52	0.09	2.20	2.20	2.20	2.20	× }
96097	<u>:</u> د	۷ <	Stereotactic preast blopsyX-ray of needle wire. breast	0.00	98.0	1.33	¥ ¥	¥ ¥	0.09	1.51	1.98	Z Z	¥ ¥	XX
96092	26	< <	X-ray of needle wire, breast	0.56	0.19	0.18	0.19	0.18	0.05	0.77	0.76	0.77	0.76	××
76096	TC	< <	X-ray of needle wire, breastX-ray of needle wire, breast energines	0.00	0.67	1.15	Y Z	¥ Ž	0.07	0.74	1.22	Y Z	Y Z	××
76098	26		X-ray exam, breast specimen	0.16	0.05	0.05	0.05	0.05	0.0	0.22	0.22	0.22	0.22	×××
•	TC		X-ray exam, breast specimen	0.00	0.28	0.39	Y:	¥:	0.05	0.30	0.41	Y :	A :	X
76100	26		X-ray exam of body section	0.58	3.62	1.99	A C	N C	0.10	0.82	2.67	A C	A C	××
76100	22 22		X-ray exam of body section	0.00	3.42	1.79	Z A	NA	0.07	3.49	1.86	NA NA	Ş Z	X
76101			Complex body section x-ray	0.58	5.37	2.55	A S	N S	0.11	90.9	3.24	NA	N S	X
76101	9 Z 1 Z 2 Z	∢ ⊲	Complex body section x-ray	0.58	0.19	0.19	0.19 VIA	9L.0	0.03	0.80	0.80	0.80 NA	0.80	××
76102	<u> </u>	(∢	Complex body section x-rays	0.58	7.85	3.41	ΣŽ	ΣŽ	0.14	8.57	4.13	ΣŽ	Z Z	×××
76102	26	⋖	Complex body section x-rays	0.58	0.19	0.19	0.19	0.19	0.03	0.80	0.80	0.80	0.80	××
76102		∢ ⊲	Complex body section x-rays	0.00	7.66	3.22	Z Z	A N	0.1	7.77	3.33	A N	A N	××
76120	26	< <	Cinc, video x-rays	0.38	0.15	0.14	0.15	0.14	0.02	0.55	0.54	0.55	0.54	××××××××××××××××××××××××××××××××××××××
		< <	Cine/video x-rays	0.00	1.83	1.25	¥:	A :	0.00	1.89	1.31	¥.	Y S	X
76125	9		Cine/video x-rays add-on	0.27	0.1	0.68	Z S	NA C	0.06	0.44	1.01	NA S	NA 8	777
76125	10	< <	Cine/video x-rays add-on Cine/video x-rays add-on	0.00	00:0	0.59	- 4 - 2	2 Z	0.05	0.05	0.64	NA PS-S-S-S-S-S-S-S-S-S-S-S-S-S-S-S-S-S-S-	S S	722
		۷ <	X-ray exam, dry process	0.00	0.68	0.49	¥ Ž	A N	0.02	0.70	0.51	Y Z	A Z	XX
		٢ .	of scan for localization	1.4	20.30	1./1	Z Z	ξ	74.0	10.22	13.42	ξ	Υ <u>Σ</u>	*

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

ADL	PENDOM	آ. آر	AUDENDUM D.—TELATIVE VALUE UNITS (NVOS)	חבראובט	UND TELATED INTOMINATION COED IN DELENIMINATION MEDIODE L'ATMENTS	101 001),		 יייור ר		/007	ZOON HINDER	ב
CPT 1 HCPCS ²	Мод	Status	Description	Physician work RVUs ³	Fully im- plement- ed non- facility PE RVUs	Year 2007 transi- tional non-facil- ity PE RVUs	Fully implemented facility	Year 2007 transi- tional fa- cility PE RVUs	Mal-prac- tice RVUs	Fully im- plement- ed non- facility total	Year 2007 transi- tional non-facil- ity total	Fully implemented facility	Year 2007 transi- tional fa- cility total	Global
76355 76355	26	۷ ۷	Ct scan for localization	1.21	0.39	0.40	0.39 AN	0.40 NA	0.05	1.65	1.66	1.65 NA	1.66 NA	××
76360	90	⋖ <	scan for needle biopsy	1.16	2.42	7.10	Z S	N S	0.47	4.05	8.73	NA S	¥ S	× }
76360	10		Ct scan for needle biopsy	0.00	2.01	6.71	¥ Z	NA AN	0.42	2.43	7.13	S A	8. A	₹×
76362			Ct guide for tissue ablation	3.99	1.37	7.53	¥ Ş	A S	1.64	7.00	13.16	A I	A S	X
76362	 1 0 E		Ct guide for tissue ablation	3.99	0.00	1.32 1.22	ν.:- ΑΝ	ZS.T	0.18	1.46	5.49	5.54 NA	5.49 NA	×××
			Ct scan for therapy guide	0.85	4.51	3.56	¥ Z	A N	0.20	5.56	4.61	N A	¥.	X
76370	26		Ct scan for therapy guide	0.85	0.25	0.27	0.25	0.27	0.04	41.1	1.16	1.14	1.16	×}
76376	<u>:</u> ၁		Stander w/o postprocess	0.00	1.46	2.59	¥ ¥	Z Z	0.0	1.76	3.29	Y Y	¥ ¥	ž×
	26		3d render w/o postprocess	0.20	0.07	0.07	0.07	0.07	0.02	0.29	0.29	0.29	0.29	X
76376	 		3d render w/o postprocess	0.00	1.39	2.92	¥ S	Y S	0.08	1.47	3.00	¥ Z	₹ S	× }
76377	26		3d rendering w/postprocess	0.79	0.28	0.27	2 8	72.0	0.09	1.15	1.14	1.15	7 7	X X
			3d rendering w/postprocess	0.00	1.17	2.87	Ϋ́	Ž	0.31	1.48	3.18	N A	Z Z	X
		4	CAT scan follow-up study	0.98	4.91	4.10	A A	Ϋ́	0.22	6.11	5.30	NA	A A	××
•	26	⋖ •	CAT scan follow-up study	0.98	0.34	0.33	0.34	0.33	0.04	1.36	1.35	1.36	1.35	× š
76390		(Z	Mr spectroscopy	0.00	4.37	3.78	0 A2	10 90	0.0	11.48	13.05	11 AB	4 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	< ×
76390	- (4	zz	Mr spectroscopy	1.40	0.31	0.43	0.31	0.43	0.02	1.78	1.90	1.78	1.90	X X
	5	z	Mr spectroscopy	0.00	9.11	10.56	9.11	10.56	0.59	9.70	11.15	9.70	11.15	××
76393			guidance for r	1.50	10.17	11.34	Y Y	Y Y	0.64	12.31	13.48	AN.	Y Y	X
76393	26		Mr guidance for needle place	1.50	0.53	0.51	0.53	0.51	0.09	2.12	2.10	2.12	2.10	× }
76394	<u>:</u>	< <	Mri guldance 101 needle place	0.00 4.24	1.46	9.85	Z Z	Z Z	1.81	7.51	15.87	Y Y	ζ Δ Z Z	X X
76394	26	< <	Mri for tissue ablation	4.24	1.46	1.40	1.46	1.40	0.24	5.94	5.88	5.94	5.88	X
76394	10	∢ ·	Mri for tissue ablation	0.00	0.00	8.42	¥:	¥:	1.57	1.57	66.6	¥.	Y :	X
76400	96		Magnetic image, bone marrow	1.60	15.25	12.63	N C	NA Z	0.66	17.51	14.89	NA 2 S	NA 2	×××
76400	22		Magnetic image, bone marrow	0.0	14.66	12.09	Z Z	Σ×	0.59	15.25	12.68	NA AN	N A	X
		4	Echo exam of head	0.63	2.90	1.97	N A	NA	0.14	3.67	2.74	AN	A	XX
76506	26	۷.	Echo exam of head	0.63	0.21	0.23	0.21	0.23	0.06	0.90	0.92	0.00	0.92	X
76510	<u>်</u>	∢ ⊲	Echo exam of head	0.00	2.69	1./4	Z Z	A N	0.08	3.92	1.82	A A	A A	××
76510		< ∢	Ophth us, b & quant a	1.55	0.56	0.65	0.56	0.65	0.03	2.14	2.23	2.14	2.23	X
76510	TC	4	Ophth us, b & quant a	0.00	1.71	2.07	N A	Ϋ́	0.07	1.78	2.14	NA	A A	X
76511		∢ •	Ophth us, quant a only	0.94	1.37	2.17	AN S	¥ 8	0.10	2.41	3.21	¥ Ş	¥,	×
76511	26	∢ <	Ophth us, quant a only	0.94	0.34	0.39	0.34	0.39	0.03	E. ±	1.36	1.37	1.36	×××
	: : :	۲ ۵	Ophthus hw/hon-duant a	0.00	1 17	1.79	₹ 4 2 2	Z Z	0.0	0	3.03	Y Y	Z Z	X X
76512	26	< <	Ophth us, b w/non-quant a	0.94	0.33	0.40	0.33	0.40	0.02	1.29	1.36	1.29	1.36	X
76512	TC	Α-	Ophth us, b w/non-quant a	0.00	0.84	1.58	¥:	Y Y	0.10	0.94	1.68	Y :	Y :	X
76513			Echo exam of eye, water bath	0.66	1.55	1.75	¥ S	Y S	0.12	2.33	2.53	A S	A G	× }
76513	 TO		Echo exam of eye, water bath	00.0	1.31	1 47	4 N	O.Zo NA	0.02	1 41	1.57	NA AN	0.:0 AN	XXX
76514	2	: ∢	Echo exam of eye, thickness	0.17	0.13	0.13	Z Z	Ž	0.02	0.32	0.32	Ž	. ₹	X
	26	⋖	Echo exam of eye, thickness	0.17	90.0	0.08	90.0	0.08	0.01	0.24	0.26	0.24	0.26	XX
76514	 	< <	Echo exam of eye, thickness	0.00	0.07	0.06	¥ S	¥ S	0.01	0.08	0.07	¥ S	¥ Ş	× }
0.00		τ	Edilo exalli ol eye	ţ	1.1.	60.	2	2	0.00	67:1	7.0	2	5	***

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

			())	: !										
CPT 1 HCPCS 2	Mod	Status	Description	Physician work RVUs ³	Fully implemented non- facility PE RVUs	Year 2007 transi- tional non-facil- ity PE RVUs	Fully im- plement- ed facility PE RVUs	Year 2007 transi- tional fa- cility PE RVUs	Mal-prac- tice RVUs	Fully im- plement- ed non- facility total	Year 2007 transi- tional non-facil- ity total	Fully implemented facility	Year 2007 transi- tional fa- cility total	Global
76516	26	A	exam of	0.54	0.19	0.23	0.19	0.23	0.01	0.74	0.78	0.74	0.78	XX
76516	 ၁	∢ ⊲	Echo exam of eye	0.00	0.99	1.16	¥ ₹	A N	0.07	1.06	1.23	A N	A N	××
76519	26	< <	exam of	0.54	0.19	0.23	0.19	0.23	0.00	0.74	0.78	0.74	0.78	\\
		< <	exam of	0.00	- -	1.26	¥	NA	0.07	1.18	1.33	NA	A	××
76529		⋖ ·	Echo exam of eye	0.57	1.17	1.32	¥.	N	0.10	1.84	1.99	N N	Υ Υ	X
76529	26	∢ <	Echo exam of eye	0.57	0.21	0.23	0.21	0.23	0.02	0.80	0.82	0.80	0.82 NA	××
76536	2	(∢	Us exam of head and neck	0.00	2.77	98.1	₹ ₹	Z Z	0.00	3.43	2.55	ΣŽ	¥ ž	\ \ \ \
:	26	< <	Us exam of head and neck	0.56	0.18	0.18	0.18	0.18	0.02	0.76	0.76	0.76	0.76	×
76536	TC	∢ •	Us exam of head and neck	0.00	2.59	1.71	₹:	Y Y	0.08	2.67	1.79	Y :	¥:	X
76604	26		Us exam, chest, b-scan	0.35	06.0	0.59	A 0	N C	0.09	2.54	2.23	NA 0.76	NA 0.75	ž×
٠.	12		exam, chest, b-scan	0.00	1.71	1.4.1	A Z	N N	0.07	1.78	1.48	Z	₹Z Y	XX
76645		∢.	exam,	0.54	2.20	1.47	¥ ;	N S	0.08	2.82	2.09	Y N	Y N	X
76645	26		breast(s)	0.54	0.18	0.18	0.18	0.18	0.02	0.74	0.74	0.74	0.74	× }
76700	<u>:</u> د		Us exam, preast(s)	0.00	2.01	82 74.0	Ψ Δ Ζ Ζ	Y Z	0.00	2.07	3.43	Z Z	4	žž
76700	26		exam.	0.81	0.28	0.27	0.28	0.27	0.0	1.13	1.12	1.13	1.12	×
76700	TC		Us exam, abdom, complete	0.00	2.86	2.20	Y Y	NA	0.11	2.97	2.31	NA	Ą	××
76705		∢.	Echo exam of abdomen	0.59	2.45	1.82	Y Y	N Y	0.11	3.15	2.52	Z	¥ ∑	X
76705	26	∢ <	Echo exam of abdomen	0.59	0.20	0.19	0.20	0.19	0.03	0.82	0.81	0.82	0.81	× }
76770	<u></u>	∢ ላ	I is exam abdo back wall comp	0.00	2.25	1.63	¥ Z	Z Z	0.08	2.33	7.7	Z Z	∀	××
76770	26		Us exam abdo back wall, comp	0.74	0.26	0.25	0.26	0.25	0.03	1.03	1.02	1.03	1.02	XX
	TC		Us exam abdo back wall, comp	00.0	2.78	2.18	¥	NA	0.11	2.89	2.29	NA	NA	××
76775		⋖	Us exam abdo back wall, lim	0.58	2.52	1.84	Z	Y Y	0.11	3.21	2.53	Υ Υ	¥ Z	×
76775	26	∢ <	Us exam abdo back wall, lim	0.58	0.21	0.20	0.21	0.20	0.03	0.82	0.81	0.82	0.81	××
76778	2	< <	Us exam kidney transplant	0.74	3.37	2.51	₹	Z Z	0.0	4.25	3.39	ΣŽ	¥ Ž	XX
76778	26	< <	Us exam kidney transplant	0.74	0.25	0.24	0.25	0.24	0.03	1.02	1.01	1.02	1.01	X
76778	TC	∢ ·	Us exam kidney transplant	0.00	3.11	2.26	Y Z	Z :	0.11	3.22	2.37	Y :	₹ :	X
76800	36	∢ <	Us exam, spinal canal	5.13	2.31	1.90	AN C	NA 33	0.13	3.57	3.16	NA L	A F	×××
76800	22	< <	Us exam: spinal canal	00.0	2.02	1.57	6.53 S	S N	0.08	2.10	1.65	ž	<u>-</u> ₹	XX
		<	< 14 wks, single	0.99	2.53	2.47	Ą Z	N	0.16	3.68	3.62	A N	₹ Z	××
76801	26	∢ •	Ob us < 14 wks, single fetus	0.99	0.32	0.34	0.32	0.34	0.04	1.35	1.37	1.35	1.37	X
76801	<u>်</u>	∢ <	Ob us < 14 wks, single fetus	0.00	2.22	2.14	₹ S	Z Z	0.12	2.34	2.26	Z Z	₹ Ş	XXX
76802	26	< <	Ob us < 14 wks, addll fetus	0.83	0.26	0.28	0.26	0.28	9.0	1.13	1.15	1.13	1.15	777
:	75 	<	Ob us < 14 wks, addll fetus	0.00	0.73	0.97	Y Y	N	0.12	0.85	1.09	Y Y	₹ Z	ZZZ
76805		⋖	Ob us >/= 14 wks, sngl fetus	66.0	3.10	2.61	A N	A A	0.16	4.25	3.76	¥ V	Ą	××
76805	26	⋖ ·	Ob us >/= 14 wks, sngl fetus	0.99	0.30	0.33	0.30	0.33	0.04	1.33	1.36	1.33	1.36	X
76805	 ၁	∢ <	Ob us >/= 14 wks, sngl fetus	0.00	2.80	2.28	Υ S	¥ ž	0.12	2.92	2.40	¥ ž	₹ Ż	X
76810	26	∢ ∢	Ob us >/= 14 wks, addl retus	86.0	99.1	0.33	AN 0	NA 0 33	0.20	1.32	1.35	- A	135	7 [
	1	< <	Ob us >/= 14 wks, addl fetus	0.00	1.39	1.14	¥	N N	0.22	1.61	1.36	Z	₹ Z	ZZZ
76811		⋖ ·	Ob us, detailed, sngl fetus	1.90	3.06	3.95	¥.	NA	0.52	5.48	6.37	NA	NA	X
•	26	∢ <	Ob us, detailed, sngl fetus	1.90	0.54	0.67	0.54	0.67	0.09	2.53	2.66	2.53	2.66	×}
76812	: ວ	۲ ۷	Ob us, detailed, srighteurs	0.00	3.97	2.58	₹ ₹ Z	Y Z	0.43	6.93	4.55	Z Z	Y Z	XXX
				2	5	2			2	. !	2			

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

ADE	ADDENDUM B	й - 	.—RELATIVE VALUE UNITS (RVUS) AND	RELATED INFORMATION USED IN	INFORMA	IION USE	D IN DELL	EKMINING	DETERMINING MEDICARE PAYMENTS	HE LAYIM	ENIS FOR	_/002	CONTINUED	n I
CPT 1 HCPCS 2	Mod	Status	Description	Physician work RVUs ³	Fully implemented non-facility PE	Year 2007 transi- tional non-facil- ity PE RVUs	Fully implemented facility	Year 2007 transi- tional fa- cility PE RVUs	Mal-prac- tice RVUs	Fully implemented nonfacility	Year 2007 transi- tional non-facil- ity total	Fully implemented facility total	Year 2007 transi- tional fa- cility total	Global
7681276812	26 TC	∢ ∢	Ob us, detailed, addl fetusOb us, detailed, addl fetus	1.78	0.51	0.62	0.51 NA	0.62 NA	0.08	2.37	2.48	2.37 NA	2.48 NA	222
76815			Ob us, limited, fetus(s)	0.65	1.83	1.70	₹ Z	N N	0.11	2.59	2.46	NA	Z Y	IX
	26.	∢ <	Ob us, limited, fetus(s)	0.65	0.19	0.22	0.19	0.22	0.03	0.87	0.90	0.87	0.90	×}
76816		(∢	Ob us, follow-up, per fetus	0.82	2.39	1.67	¥	¥ Ž	0.10	3.34	2.62	₹₹	₹	XX
			Ob us, follow-up, per fetus	0.85	0.24	0.30	0.24	0.30	0.04	1.13	1.19	1.13	1.19	××
76816		∢ <	Ob us, follow-up, per fetus	0.00	2.15	1.37	¥ S	¥ ž	0.00	2.21	1.43	¥ ž	¥ ź	××
76817		(∢	Transvaginal us, obstetric	0.75	0.23	0.25	0.23	0.25	0.03	1.01	1.03	10.	1.03	₹×
76817	10	∢ •	Transvaginal us, obstetric	0.00	1.83	1.60	¥:	Y S	0.06	1.89	1.66	Y S	¥ :	X
768187	26	∢ ∢	Fetal biophys profile w/nst	50.1	0.23	2.06	N 0	0.37	0.15	3.43	3.26	A P	4 L	××
	12	< <	Fetal biophys profile w/nst	0.00	1.92	1.69	Z Z	N N	0.10	2.02	1.79	¥ ×	Ž	X
76819	-	∢	Fetal biophys profil w/o nst	0.77	1.65	1.83	Y Y	¥	0.13	2.55	2.73	¥	Ą V	×
76819	26 7		Fetal biophys profil w/o nst	0.77	0.23	0.27	0.23	0.27	0.03	1.03	1.07	1.03	1.07	× }
76820			Umbilical artery echo	0.00	0.57	1.49	ζ <u> </u>	¥ Z	0.10	22.1	2.15	₹ ₹	Υ Δ Σ Ζ	XX
			Umbilical artery echo	0.50	0.14	0.18	0.14	0.18	0.03	0.67	0.71	0.67	0.71	X
•	2		Umbilical artery echo	0.00	0.43	1.32	Y :	¥:	0.12	0.55	1.44	¥:	₹ Z	X
76821	: 0		Middle cerebral artery echo	0.70	1.88	1.88	Z C	A S	0.15	2.73	2.73	A S	₹ 8	× }
76821		τ ∢	Middle cerebral artery echo	00.0	1.68	1.63	S N	SZ.O	0.03	1.80	1.75	0.95 AN	0.30 AN	XX
	2 !	< <	Echo exam of fetal heart	1.67	4.34	3.02	¥	¥ Y	0.18	6.19	4.87	¥	₹ Z	X
76825		∢ ·	Echo exam of fetal heart	1.67	0.48	0.57	0.48	0.57	0.07	2.22	2.31	2.22	2.31	X
768257	: :		Echo exam of fetal heart	0.00	3.86	2.45	A A	A A	LL:0	3.97	2.56	A A	₹ ₹	××
76826			Echo exam of fetal heart	0.83	0.23	0.28	0.23	0.28	0.03	1.09	1.14	1.09	1.14	X
76826	2	∢.	Echo exam of fetal heart	0.00	2.50	1.16	¥:	¥:	0.05	2.55	1.21	₹:	¥:	X
76827	96	∢	Echo exam of fetal heart	0.58	1.07	1.72	N C	A C	0.14	1.79	2.44	¥ C	A C	ž ž
76827		< ∢	Echo exam of fetal heart	0.00	06:0	1.52	¥ Z	S N	0.12	1.02	1.64	₹ 2	Y Y	X
		4	Echo exam of fetal heart	0.56	0.63	1.16	N A	¥ N	0.11	1.30	1.83	¥	N A	XX
76828	26 .		Echo exam of fetal heart	0.56	0.15	0.20	0.15	0.20	0.03	0.74	0.79	0.74	0.79	× }
76830		< <	Transvaginal us, non-ob	0.00	2.85	2.03	¥	₹ ₹	0.00	3.67	2.85	₹₹	₹₹	XX
	-		Transvaginal us, non-ob	0.69	0.22	0.23	0.22	0.23	0.03	0.94	0.95	0.94	0.95	XX
76830	TC		Transvaginal us, non-ob	0.00	2.62	1.80	Y ?	¥ :	0.10	2.72	1.90	₹ :	¥ :	X
76831	26		Echo exam, uterus	0.72	2.76	2.02	N 0	NA 0.24	0.13	3.61	78.7	AN 0	¥ 6	××
			Echo exam, uterus	0.00	2.55	1.78	Z	Z Z	0.10	2.65	1.88	¥ ×	NA N	X
:			Us exam, pelvic, complete	0.69	2.90	2.04	Z Z	¥ V	0.13	3.72	2.86	¥	¥ Y	×
76856	26 .	∢ <	Us exam, pelvic, complete	0.69	0.24	0.23	0.24	0.23	0.03	0.96	0.95	96.0	0.95	× }
76857		(∢	Us exam. pelvic, limited	0.38	2.59	2.02	¥ ₹	₹	0.08	3.05	2.48	₹	Y Y	X X
			Us exam, pelvic, limited	0.38	0.15	0.13	0.15	0.13	0.02	0.55	0.53	0.55	0.53	X
76857	TC	∢ •	Us exam, pelvic, limited	0.00	2.44	1.89	¥:	¥:	0.06	2.50	1.95	¥:	¥ :	X
7687076870		∢ <	Us exam, scrotum	0.64	2.94	2.03	NA S	A C	0.13	3.71	2.80	A S	A S	××
76870			exam,	0.00	2.72	1.82	N S S S	¥ N	0.10	2.82	1.92	S N		
	2 !		transrectal	0.69	3.50	2.56	ĕ	NA	0.14	4.33	3.39	NA	¥ V	××
	:					1 1								

ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

<u>ק</u>	בי וויסטויוסטי			ורר ר ר		<u> </u>	֡֞֝֞֝֜֜֝֞֜֝֞֝֜֝֞֝֞֜֜֝֞֝֞֝֞֝֞֝֞֝֞֜֜֝֞֝֞֜֜֝֞֡֞֝֜֜֝֞֡֜֜֝֞֡֜֜֝֡֡		2	- 1)	,		<u> </u>
CPT 1 HCPCS 2	Mod	Status	Description	Physician work RVUs ³	Fully implemented nonfacility PE RVUs	Year 2007 transi- tional non-facil- ity PE RVUs	Fully implemented facility	Year 2007 transi- tional fa- cility PE RVUs	Mal-prac- tice RVUs	Fully implemented nonfacility total	Year 2007 transi- tional non-facil- ity total	Fully implemented facility	Year 2007 transi- tional fa- cility total	Global
76872	26	۷ ۷	Us, transrectal	0.00	0.28	0.24	0.28 NA	0.24 NA	0.04	1.01	0.97	1.01 AN	0.97 AN	X X
		< <		1.55	3.45	2.82	¥ Z	NA	0.25	5.25	4.62	Z	A A	×
76873	26	∢ <	Echograp trans r, pros study	1.55	0.53	0.51	0.53	0.51	0.09	2.17	2.15	2.17	2.15	××
76880	2	< <	Us exam, extremity	0.00	3.25	2.02	₹₹	Z Z	0.15	3.95	2.72	ΣŽ	¥ Ž	{ ×
76880	26	< <		0.59	0.18	0.19	0.18	0.19	0.03	0.80	0.81	08.0	0.81	X
76880	TC	∢ <	Us exam, extremity	0.00	3.07	1.83	₹ S	Z Z	0.08	3.15	1.91	Y S	¥ ž	× }
76885	26	∢ ∢	Us exam infant rips, dynamic	0.74	3.30	0.24	0.24	0.24	0.03	1.01	1.01	10.1	1.0.T	žž
	TC	∢.	Us exam infant hips, dynamic	0.00	3.11	1.92	A :	¥:	0.10	3.21	2.02	¥:	¥.	X
76886	96	∢ ⊲	Us exam infant hips, static	0.62	2.36	1.81	AN C	A C	0.11	3.09	2.54	NA NA	NA PR	××
76886	122	< <	Us exam infant hips, static	0.00	2 5 5	1.61	2 ₹	NA	0.08	2.26	1.69	S A	S N	X
76930		∢ ·	Echo guide, cardiocentesis	0.67	2.15	1.87	Ϋ́	Y S	0.12	2.94	2.66	Y S	N S	X
76930	26	∢ <	Echo guide, cardiocentesis	0.67	0.35	0.28	0.35	0.28 NA	0.02	40.1	1.69	40.1	0.97 NA	××
76932	2	< <	Echo guide for heart biopsy	0.00	0.36	6. 4. C. 4.	₹ ₹	Z Z	0 0	08.1	2.03	Z Z	ζ <u> </u>	XX
76932	26		Echo guide for heart biopsy	0.67	0.36	0.28	0.36	0.28	0.02	1.05	0.97	1.05	0.97	X
76932	TC		Echo guide for heart biopsy	0.00	0.00	1.14	¥	N N	0.10	0.10	1.24	N N	₹ Z	××
76936	36	∢ <	Echo guide for artery repair	1.99	6.28	0.80	A C	NA	0.47	8.74	9.26	NA Pa	A G	××
76936		(∢	Echo guide for artery repair	00.0	5.56	6.12	N AN	N A	0.34	5.90	6.46	t S V	AN A	XX
		< <	Us guide, vascular access	0.30	0.65	0.52	¥	Z Z	0.13	1.08	0.95	N N	Ą	ZZZ
76937	26	∢ •	Us guide, vascular access	0.30	0.10	0.10	0.10	0.10	0.03	0.43	0.43	0.43	0.43	77
769377	 	۷ ۵	Us guide, vascular access	9.00	0.54	0.42	₹ ₹	Z Z	01.0	3.23	0.52	A Z	A N	7 X
76940	26	< ∢	Us guide, tissue ablation	2.00	0.63	0.65	0.63	0.65	0.31	2.94	2.96	2.94	2.96	××
76940	TC	∢ ·	Us guide, tissue ablation	0.00	0.00	1.14	¥:	Y :	0.29	0.29	1.43	Y S	¥:	X
76941	90	∢ <	Echo guide for transfusion	4.34	0.43	1.61	A S	NA	0.15	1.92	3.10	NA NA	NA PA	× }
76941		(∢	Echo guide for transfusion	0.00	0.00	1.15	5. K	NA AA	0.0	0.08	1.23	± ₹	<u>§</u> 8	₹ ×
		⋖	Echo guide for biopsy	0.67	4.98	3.53	¥ Y	NA	0.13	2.78	4.33	NA	N A	××
76942	26	∢ <	Echo guide for biopsy	0.67	0.24	0.23	0.24	0.23	0.03	0.94	0.93	0.94	0.93	× }
76945	<u>:</u> د	< <	Echo guide for blobsy	0.00	0.21	1.37	¥ ¥	Z Z	0.0	20.9	2.15	Z Z	¥ ¥	X X
	26	< <	Echo guide, villus sampling	0.67	0.21	0.22	0.21	0.22	0.03	0.91	0.92	0.91	0.92	X
76945	고 	∢ •	Echo guide, villus sampling	0.00	0.00	1.15	₹ :	Z S	0.08	0.08	1.23	¥ S	¥ :	X
76946	96	∢ ⊲	Echo guide for amniocentesis	85.0	0.45	1.36	A F	Z Z	2 C C	0.95	1.86	NA F3	NA S	××
76946	22	(∢	Echo guide for amniocentesis	0.00	0.34	1.23		Z Z	0.10	0.44	1.33	S N	S.S.	ξ× ×
		< <	Echo guide, ova aspiration	0.38	0.44	1.35	¥	N A	0.12	0.94	1.85	N	₹ Z	××
76948	26	∢ •	Echo guide, ova aspiration	0.38	0.10	0.12	0.10	0.12	0.02	0.50	0.52	0.50	0.52	X
76948	ည	∢ <	Echo guide, ova aspiration	0.00	0.34	1.23	¥ ź	Y S	0.10	0.44	1.33	Y S	¥ S	××
76950	26	(∢	Echo guidance radiotherapy	0.58	0.16	0.18	0.16	0.18	0.03	0.77	0.79	0.77	0.79	₹ ×
	TC	∢	Echo guidance radiotherapy	0.00	1.01	1.24	¥	NA	0.07	1.08	1.31	NA	¥ N	××
76965	90	∢ ‹	Echo guidance radiotherapy	 8. 9	1.20	4.82	A S	NA A	0.37	2.91	6.53	¥ 5	NA 104	× }
76965	1C -	٤∢	Echo guidance radiotherapyEcho guidance radiotherapy	- 0 5 0	0.71	4.37	5.4 S ≺	S S	0.29	1.00	4.66	- X	<u>-</u>	
)	∶∢	ound exam follow-up	0.40	2.15	1.42	¥ Z	¥ Z	0.08	2.63	1.90	Ž	Z Z	XX
						i	- 0] -						

¹CPT codes and descriptors only are copyright 2005 American Medical Association. All rights reserved. Applicable FARS/DFARS apply. ²Copyright 2005 American Dental Association. All rights reserved. ³ Indicates RVUs are not used for Medicare payment.

ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

ADL	FINDOM	- -	UNA (60% H) SIING AROE ONI 3 (400)	ובראובה	ZNICOLNI	ND DELATED INFORMATION OSED IN),,,	ו ההסוספועו שאוואוואירם וחס	ייייוע - שר		7007		ב
CPT 1 HCPCS 2	Mod	Status	Description	Physician work RVUs ³	Fully im- plement- ed non- facility PE RVUs	Year 2007 transi- tional non-facil- ity PE RVUs	Fully implemented facility	Year 2007 transi- tional fa- cility PE RVUs	Mal-prac- tice RVUs	Fully implemented non-facility	Year 2007 transi- tional non-facil- ity total	Fully im- plement- ed facility total	Year 2007 transi- tional fa- cility total	Global
76970	26	44	Ultrasound exam follow-up	0.40	2.04	0.13	0. 11.0 4.0 1.0 1.0 1.0 1.0 1.0 1.0 1.0 1.0 1.0 1	0.13 NA	0.02	0.53	1.36	0.53 NA	0.55 NA	××
76975	26	۷ <	GI endoscopic ultrasound	0.81	0.31	0.29	0.31	0.29	0.04	1.76	1.14	1.16	A 4.	žž
:	TC	۷ <	endoscopic ultrasound	0.00	0.00	1.14	A Z	Z Z	0.10	0.10	1.24	¥ Z	A S	××
76977	26	< <	Us bone density measure	0.05	0.0	0.02	0.0	0.02	0.0	0.07	0.08	0.07	0.08	₹×
•	10	< <	Us bone density measure	0.00	0.09	0.64	¥ ž	Z Z	0.05	0.14	0.69	Y S	¥ ž	× }
76986	26	∢ ∢	Ultrasound guide intraoper Ultrasound guide intraoper	1.20	0.35	0.39	0.35	0.39	0.13	1.68	1.72	1.68	1.72	žž
76986	 2	∢ ⊲	Ultrasound guide intraoper	0.00	0.00	1.97	N O	A S	0.14	0.14	2.11	AN 8	A 6	××
77262		τ∢	Radiation therapy planning	2.11	0.59	0.71	0.59	0.71	0.1	2.81	2.93	2.81	2.93	₹×
77263		∢ <	Radiation therapy planning	3.14	0.88	1.05	0.88	1.05	0.16	4.18	4.35	4.18	4.35	×}
77280	26		Set radiation therapy field	0.70	0.20	0.22	0.20	0.22	0.0	0.94	0.96	0.94	96.0	₹×
77280	TC		Set radiation therapy field	0.00	4.20	3.66	¥ ?	Z Z	0.18	4.38	3.84	¥ :	₹ Z	×
77285	26		Set radiation therapy field	. c	00.00	0.45	4 60 7 0	0 33	0.35	9.40	1.85	A 7	43 L	ž×
	2		Set radiation therapy field	0.00	7.70	6.12	₹	A A	0.30	8.00	6.42	Y Y	₹ Z	×
	90	< <	Set radiation therapy field	1.56	13.37	8.62	¥ S	Y S	0.43	15.36	10.61	N S	ZZ	×}
77290	1C	< <	Set radiation therapy field	0.00	12.93	84.0 84.0	5 X	9.5 V A	0.08	13.28	8.48	8.08 NA	2. A	žž
		< <	Set radiation therapy field	4.56	7.00	23.85	¥	¥ Y	1.71	13.27	30.12	Z Z	Y Y	×
77295	26	∢ •	Set radiation therapy field	4.56	1.28	1.42	1.28	1.42	0.23	6.07	6.21	6.07	6.21	X
77300	<u></u>	۷ ۵	Set radiation therapy field	0.00	9.72	1 43	¥ ¥	A A	94.0	1.82	23.92	Z Z	Y Y	X X
	26	< <	Radiation therapy dose plan	0.62	0.17	0.19	0.17	0.19	0.03	0.82	0.84	0.82	0.84	X
77300	TC	∢ •	Radiation therapy dose plan	0.00	0.92	1.24	¥:	¥ :	0.07	0.99	1.31	Y S	¥:	X
:	26	۷ ۵	Radiotherapy dose plan, Imrt	96. / 2 99	54.08 2.24	36.46	2 V	NA 0 49	- 0 - 88 - 0 - 40	63.95	10.88	10 63	10 88 10 88	××
77301	12	< <	Radiotherapy dose plan, imrt	0.00	51.84	33.97	A A	S N	1.48	53.32	35.45	Z Z	8 Z	X
77305		⋖・	Teletx isodose plan simple	0.70	0.86	1.79	¥ S	¥ S	0.15	1.71	2.64	Y S	A S	X
77305	26 T.C.	∢ ⊲	Teletx isodose plan simple	0.70	0.20	0.22	0.20 NA	0.22 NA	0.0	0.94	0.96	0.94 NA	96:0 VA	××
		< <	Teletx isodose plan intermed	1.05	1.19	2.31	Ž	Ž Ž	0.18	2.42	3.54	Ž	Z Z	X
77310	26	∢ •	Teletx isodose plan intermed	1.05	0.29	0.33	0.29	0.33	0.05	1.39	1.43	1.39	1.43	X
77310	ည	∢ ⊲	Teletx isodose plan intermed	0.00	0.90	1.98	¥ ₹	¥ ¤	0.13	3.77	2.11	A N	Z Z	××
77315	26		Teletx isodose plan complex	1.56	0.44	0.49	0.44	0.49	0.08	2.08	2.13	2.08	2.13	X
77315	1 2 2	∢.	Teletx isodose plan complex	0.00	1.56	2.39	¥:	¥:	0.14	1.70	2.53	¥:	Y S	X
77321	26	∢ ⊲	Special teletx port plan	0.95	1.40	3.61	0 0 A	A 0	0.70	197	1 29	1 2 A		X X
77321	100	< <	Special teletx port plan	0.00	1.13	3.32	N A	NA NA	0.21	1.34	3.53	NA NA	Ş V	ξ× ×
		∢,	Brachytx isodose calc simp	0.93	2.81	2.71	¥8	A S	0.18	3.92	3.82	Y S	₹!	X
:	7 7	∢	Brachyty isodose calc simp	0.93	0.26	0.29	0.26 NA	0.29 NA	0.00	1.24	7.27	1.24 NA	72.L VAN	ž ž
77327	2		Brachytx isodose calc interm	1.39	3.89	3.91	₹ ₹	¥ Z	0.25	5.53	5.55	ΣŽ	¥₹	₹ X
77327	26		Brachytx isodose calc interm	1.39	0.39	0.43	0.39	0.43	0.07	1.85	1.89	1.85	1.89	×
77327	10 10 10	∢ <	sodose calc interm	0.00	3.50	3.49	 ≰	Z Z	0.18	3.68	3.67	¥ Z	 &	× >
77328	26	(∢	Brachytx isodose plan compl	2.09	0.59	0.65	0.59	0.65	0.11	2.79	2.85	2.79	2.85	X X
	2		Brachytx isodose plan compl	0.00	4.41	4.83	¥	Z Z	0.25	4.66	5.08	N N	Ž	×
TOO	7000	400000000000000000000000000000000000000				/ 4 - 14 - 14 - 1	0							

ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

ADL	JEINDOIN	 	ADDENDOM D.—TELATIVE VALUE ONITS (NVOS) AND	DELA I EU	L DELATED INFORMATION				DEI ERIMINING IMEDICARE	Ĺ	ATMEN S TOR	7 / / / /		
CPT 1 HCPCS ²	Mod	Status	Description	Physician work RVUs ³	Fully im- plement- ed non- facility PE RVUs	Year 2007 transi- tional non-facil- ity PE RVUs	Fully implemented facility	Year 2007 transi- tional fa- cility PE RVUs	Mal-practice RVUs	Fully implemented nonfacility	Year 2007 transi- tional non-facil- ity total	Fully implemented facility	Year 2007 transi- tional fa- cility total	Global
77331	26	44	Special radiation dosimetrySpecial radiation dosimetry	0.87	0.73	0.77	NA 0.24	NA 0.27	0.06	1.66	1.70	1.15	1.18	××
77331	TC	۷ ۷	Special radiation dosimetry	0.00	0.49	0.50	∀ ₹	∢ ∢ Z Z	0.02	0.51	0.52	<u>4</u> 4	▼ 4 Z Z	××
	26	. ∢	Radiation treatment aid(s)	0.54	0.15	0.17	0.15	0.17	0.03	0.72	0.74	0.72	0.74	×
77332		∢ ⊲	Radiation treatment aid(s)	0.00	1.38	1.35	₹ Z	Y Z	0.07	1.45	1.42	Z Z	A Z	××
77333		(∢	Radiation treatment aid(s)	0.84	0.24	0.26	0.24	0.26	0.0	1.12	1.14	1.12	1.1	XX
77333	•	∢ <	Radiation treatment aid(s)	0.00	0.23	1.48	¥ ž	Y Z	0.11	0.34	1.59	¥ ž	¥ ž	×}
77334			Radiation treatment aid(s)	124	0.35	0.39	0.35	0.39	90.0	1.65	1.69	1.65	1.69	XX
77334	TC	∢	Radiation treatment aid(s)	0.00	2.30	3.02	A N	A Z	0.17	2.47	3.19	A A	A A	××
		< <	Radiation physics consult	0.0	2.36	3.22	Z Z	₹ Ž	0.18	2.54	3.40	ΣŽ	¥ Ž	XX
77401			Radiation treatment delivery	0.00	0.50	1.46	Z Z	Z Z	0.0	0.61	1.57	¥ Ż	¥ ₹	XX
77403			Radiation treatment delivery	00.0	3.77	2.28	¥ Ž Ž	¥ Z	0.0	3.88	2.39	ΣŽ	¥ Ž Ž	₹×
			Radiation treatment delivery	0.00	4.22	2.39	¥.	¥.	0.11	4.33	2.50	¥:	¥:	X
77406			Radiation treatment delivery	00.0	4.23 4.23	2.39	¥ S	¥ ž	0.11	4.34	2.50	Y S	¥ ž	× >
77408		< <	Radiation treatment delivery	0.00	5.24	2.89	Z Z	₹	0.12	5.36	3.01	ΣŽ	Z Z	ξ× ×
77409			Radiation treatment delivery	0.00	5.84	3.04	¥.	¥	0.12	5.96	3.16	Y Y	Y Y	×
			Radiation treatment delivery	0.0	5.73	3.01	¥ ž	¥ ž	0.12	5.85	3.13	¥ S	¥ Ş	× }
77413			Radiation treatment delivery	0.00	0.89	3.47	¥ ¥	¥	0.0.	06.90	3.60	¥ ¥	¥ ¥	XX
77414			Radiation treatment delivery	0.00	7.74	3.69	A A	Ϋ́	0.13	7.87	3.82	N A	Ϋ́	×
77416			Radiation treatment delivery	0.0	7.73	3.69	¥ ž	¥ ž	0.13	7.86	3.82	Z Z	¥ ž	×
77418		< <	Radiation tx delivery, imrt	00.0	13.15	16.84	¥ Z	₹ Ž	0.13	13.28	16.97	ΣŽ	ΣŽ	₹×
77421			Stereoscopic x-ray guidance	0.39	1.97	3.11	¥.	Ϋ́	0.12	2.48	3.62	Ą Z	Z	×
77421	26		Stereoscopic x-ray guidance	0.39	0.11	0.13	0.11 NA	0.13 NA	0.02	0.52	0.54	0.52 NA	0.54 NA	××
77422			Neutron beam tx, simple	0.00	7.59	3.18	Z Z	¥ Z	0.13	7.72	3.31	ΣŽ	Z Z	×××
77423		∢.	Neutron beam tx, complex	0.00	12.53	4.83	¥,	¥.	0.13	12.66	4.96	A S	¥.	X
77431			Radiation tx management, x5		01.1	70.1	01.1	70.1	71.0	2.58	4.55 5.58	2.59	4.55 58	××
			Stereotactic radiation trmt	7.92	2.21	2.74	2.21	2.74	0.41	10.54	11.07	10.54	11.07	×
77470	26		Special radiation treatment	2.09	1.79	9.34	A C	N O	0.70	4.58	12.13	NA Z	NA R	××
77470			Special radiation treatment	0.00	1.20	8.69	S S	S Z	0.59	1.79	9.28	S Z	N S	X
77600			Hyperthermia treatment	1.56	9.38	5.02	A S	¥.	0.24	11.18	6.82	Y S	¥ ;	X
77600	26 .		Hyperthermia treatment	1.56	0.36	0.47	0.36	0.47	0.08	2.00	2.11	2.00 NA	2.11	××
77605		<u> </u>	Hyperthermia treatment	2.09	16.95	7.79	Z Z	Z Z	0.38	19.42	10.26	ΣZ	Z Z	ξ× ×
77605		<u>~</u>	Hyperthermia treatment	5.09	0.53	0.63	0.53	0.63	0.16	2.78	2.88	2.78	2.88	×
77605		œ œ	Hyperthermia treatment	0.00	16.42	7.16	₹ ₹	Y Y	0.22	16.64	7.38	A A	A A	××
77610			Hyperthermia treatment	1.56	0.43	0.49	0.43	0.49	0.08	2.07	2.13	2.07	2.13	X
77610	TC		Hyperthermia treatment	0.00	16.20	6.35	¥ Z	¥ S	0.16	16.36	6.51	Y S	¥ Z	× }
77615	26	c ac	Hyperthermia treatment	60.2	0.56	0.64	0.56	0.64	0.33	2.76	2.84	2.76	28.5 48.5	X X
77615	TC		Hyperthermia treatment	0.00	24.11	9.08	Z Z	N A	0.22	24.33	9.30	Z Z	Y Y	XX

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

ADL	FINDOM	آ	ADDENDOM D.——RELATIVE VALUE ONITS (RVOS) AND	nelai eu	ND DELATED INFORMATION OSED IN				DELERMINING MEDICARE PAYMENTS	AT ATIVIE	ENIO POR	- / / / /	-CONTINOED	
CPT 1 HCPCS 2	Mod	Status	Description	Physician work RVUs ³	Fully implemented non-facility PERVÜS	Year 2007 transi- tional non-facil- ity PE RVUs	Fully implemented facility	Year 2007 transi- tronal fa- cility PE RVUs	Mal-prac- tice RVUs	Fully im- plement- ed non- facility total	Year 2007 transi- tional non-facil- ity total	Fully implemented facility	Year 2007 transi- tional fa- cility total	Global
77620	26	œ æ ı	Hyperthermia treatment	1.56	9.51	5.06	0.40	NA 0.49	0.36	11.43	6.98	2.16	NA 2.25	××
77620		Œ 4	Hyperthermia treatment	0.00	9.11	3.25	A A	A N	0.16	9.27	4.73 8.47	Y Z	A A	XXX
	26	< ∢	Infuse radioactive materials	4.90	1.38	1.53	1.38	1.53	0.25	6.53	6.68	6.53	6.68	060
•))	∢ <	Infuse radioactive materials	0.00	2.88	1.72	Z Z	Z Z	0.07	2.95	1.79	Z Z	Z Z	060
77761	26	۲ ح	Apply Intreav radiat simple	3.80	1.08	1.09	1.08	1.09	0.33	5.07	5.08	5.07	5.08	060
		⋖ ·	Apply intrcav radiat simple	0.00	4.60	3.03	Y:	¥:	0.14	4.74	3.17	¥:	¥:	060
77762	96	∢	Apply intreav radiat interm	5.71	6.67	5.76	AN P	AN L	0.48	12.86	11.95	NA 7	AN V	060
77762	120	< <	Apply introav radiat interm	0.00	5.08	3.99	S A	S N	0.19	5.27	4.18	S A	S Z	060
77763	90	∢ <	Apply intreav radiat compl	8.56	8.99	7.69	NA 28	NA 86	0.66	18.21	16.91	NA 11 27	N F F F	060
77763	22		Apply intreav radiat compl	0.00	6.61	5.03	NA AN	8.5 A	0.23	6.84	5.26	ξΧ	2 Z	060
			Apply interstit radiat simpl	4.65	6.77	4.05	N	Ä	0.57	11.99	9.27	NA	A A	060
77776	26		Apply interstit radiat simpl	4.65	1.58	+- c	1.58	- - 5	44.6	6.67	6.20	6.67	6.20	060
77777	<u>:</u> د		Apply Interstit radiat simple	7.47	20.7	6.73	¥ ¥	¥ ¥	0.61	15.15	14.81	Z Z	¥ ¥	060
	26		Apply interstit radiat inter	7.47	2.25	2.35	2.25	2.35	0.39	10.11	10.21	10.11	10.21	060
77778			Apply interstit radiat compl	11.17	9.77	8.98	Α I	¥!	0.84	21.78	20.99	NA S	A S	060
8	7 S	∢ <	Apply interstit radiat compl	/[.[.	3.15	3.47 7.47	3.15 AN	3.47	0.57	14.89	15.21 87.8	14.89 NA	15.61 VN	060
77781)	< <	High intensity brachytherapy	1.66	4.80	16.87	ΣŽ	₹₹	1.14	7.60	19.67	ΣŽ	Y Y	060
	26		High intensity brachytherapy	1.66	0.46	0.51	0.46	0.51	0.08	2.20	2.25	2.20	2.25	060
77781	10 		High intensity brachytherapy	0.00	4.34	16.36	¥:	¥:	1.06	5.40	17.42	Z :	Ϋ́ Z	060
77782	96		ntensity brachytherapy	2.49	12.68	19.04	N O	A C	01.1	16.36	22.72	NA 33	NA	060
77782	22		High intensity brachytherapy	0.00	11.99	18.27	S N	<u>}</u> ₹	1.06	13.05	19.33	S N	65.5 V	060
:		⋖	High intensity brachytherapy	3.72	24.45	22.28	N	Ą	1.25	29.42	27.25	NA	A V	060
77783	26	∢ <	ntensity brachytherapy	3.72	1.03	1.15	1.03	1.15	0.19	4.94	5.06	4.94 VN	5.06 NA	060
77784	2	< <	High intensity brachytherapy	5.60	45.62	28.03	¥ Z	₹₹	1.35	52.57	34.98	ΣŽ	 {	060
	26	⋖	ntensity brachytherapy	2.60	1.55	1.74	1.55	1.74	0.29	7.44	7.63	7.44	7.63	060
77784)))	∢ <	High intensity brachytherapy	0.00	44.07	26.29	¥ S	Z Z	90.	45.13	27.35	Z Z	₹ Ş	060
77789	26	(∢	Apply surface radiation	1.1.	0.35	0.37	0.35	0.37	0.0	1.53	1.55	1.53	1.55	800
68222	70	∢.	Apply surface radiation	0.00	1.60	0.74	¥:	¥:	0.05	1.62	0.76	Y S	¥.	000
77790	90		Radiation handling	 	1.18	0.93	A C	A S	0.07	2.30	2.05	A S	N P	××
77790	22		Radiation handling	0.00	0.89	09:0	S A	S Z	0.02	0.91	0.62	Z Z	<u>₹</u>	××××××××××××××××××××××××××××××××××××××
78000		⋖ -	Thyroid, single uptake	0.19	1.92	1.25	₹ Z	¥	0.07	2.18	1.51	N	¥ Z	×
78000	26	< <	Thyroid, single uptake	0.19	0.06	0.00	90.0	90.0	0.01	0.26	0.26	0.26	0.26	×
78001	<u>:</u> د	∢ ∢	Thyroid, multiple uptake	0.00	1.86	1.19	Z Z	X X	0.00	29.1	2. F	Z Z	₹ ₹	×××
	26	< <	Thyroid, multiple uptakes	0.26	60.0	0.09	60.0	0.00	0.01	0.36	0.36	0.36	0.36	X
78001	10 	∢ •	Thyroid, multiple uptakes	0.00	2.28	1.55	¥:	¥:	0.07	2.35	1.62	Z :	Ϋ́ Z	X
78003	90	∢ <	Thyroid suppress/stimul	0.33	99.0		N S	A F	0.0	2.38 7.48	L./.	NA R	NA C	X X
78003		< <	Thyroid suppress/stimul	0.00	- 1.88	1.20	- Z	- ₹	0.0	1.94	1.26	0.43 VA	0.43 AN	XX
			Thyroid imaging with uptake	0.49	6.49	3.54	Ą Z	Ϋ́Z	0.15	7.13	4.18	Y Z	Ą Z	××
78006	26	A	Thyroid imaging with uptake	0.49	0.17	0.16	0.17	0.16	0.05	0.68	0.67	0.68	0.67	XX
TOOL	ook bac	do orotaina	212 020 A 12015 AM 22012 CM A 2000 + designation of the selection of the s	dain II A mait.	V	, Lacian	טם אַ דַּמַיְ טְם אַ							

ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

ADL	ADDENDOM D RELATIVE		VALUE OINIS (NVOS) AI	ובראובה	און טפט אטון איירט און טפול בול טא)	ואור היינו		0 - 0 - 1	1007		<u> </u>
CPT 1 HCPCS ²	Мод	Status	Description	Physician work RVUs ³	Fully implemented non-facility PE	Year 2007 transi- tional non-facil- ity PE RVUs	Fully implemented facility	Year 2007 transi- tional fa- cility PE RVUs	Mal-prac- tice RVUs	Fully implemented non-facility total	Year 2007 transi- tional non-facil- ity total	Fully implemented facility	Year 2007 transi- tional fa- cility total	Global
7800678007	TC	۷ ۷	Thyroid imaging with uptakeThyroid image, mult uptakes	0.00	6.32	3.37	¥ ¥	₹ Z	0.13	6.45	3.52	Z Z	A A	××
78007	26	⋖ •	Thyroid image, mult uptakes	0.50	0.17	0.17	0.17	0.17	0.02	69.0	0.69	0.69	0.69	X
78010	<u>:</u> د	∢ ∢	Inyroid image, mult uptakesThyroid imaging	0.00	2.99	2.56	¥ ¥	¥ ¥	0.13	3.13	3.08	¥ ¥	¥ ₹	ž ž
	26	4	Thýroid imaging	0.39	0.13	0.13	0.13	0.13	0.05	0.54	0.54	0.54	0.54	××
78010	10 	∢ <	Thyroid imaging	0.00	4.23	2.43	¥ ž	¥ ž	0.1	4.34	2.54	Y Z	¥ ≨	××
78011	26	(∢	Thyroid imaging with flow	0.45	0.15	0.15	0.15	0.15	0.02	0.62	0.62	0.62	0.62	ξ× ×
	TC	⋖ <	Thyroid imaging with flow	0.00	4.54	2.95	¥ ž	¥ ž	0.13	4.67	3.08	Z Z	¥ ž	× }
78015	26	∢ ∢	Inyroid met imaging	0.67	5.61 0.22	3.51	0.22	NA 0.23	0.03	6.45 0.92	0.93	0.92	0.93	žž
:		∢.	Thyroid met imaging	0.00	5.39	3.28	¥:	¥:	0.14	5.53	3.42	Y:	₹:	X
78016	96	∢	I hyroid met imaging/studiesThyroid met imaging/studies	0.82	8.96	5.07	A C	A C	0.27	9.69	6.10	A P	A C	××
78016	10	< <	Thyroid met imaging/studies	0.00	8.68	4.79	S A	N A	0.18	8.86	4.97	Z Z	<u>₹</u>	X
78018		∢ •	Thyroid met imaging, body	0.86	8.25	6.37	¥ 8	A S	0.33	9.44	7.56	¥,	₹ .	X
78018	 1 1 1 1 1	∢ ∢	Inyroid met imaging, bodyThyroid met imaging, body	98.0	0.29	0.30	65.0 87.0 87.0	08.9 V	0.09	8.25 8.25	0.20	9 Y	 S. 4	ž ž
		⋖	Thyroid met uptake	0.60	1.85	1.60	¥	¥	0.16	2.61	2.36	¥	₹	ZZZ
78020	26	∢ ⊲	Thyroid met uptake	09.0	0.20	0.21	0.20 NA	0.21 NA	0.02	0.82	0.83	0.82 NA	0.83 NA	77.
78070)		Parathyroid nuclear imaging	0.82	3.59	4.32	₹	Z Z	0.15	4.56	5.29	≦ ₹	₹	X
78070	26		Parathyroid nuclear imaging	0.82	0.28	0.28	0.28	0.28	0.04	41.1	1.14	1.14	4.7	×}
78075	2	۲ ح	Adrenal nuclear imaging	0.00	11.98	7.27	₹ ₹	₹ ₹	0.32	13.04	8.33	₹Ź	₹ ₹	₹×
	26	∢.	Adrenal nuclear imaging	0.74	0.25	0.26	0.25	0.26	0.03	1.02	1.03	1.02	1.03	X
78075	ည	∢ ∢	Adrenal nuclear imaging	0.00	11.74	7.02	¥ ¥	<u> </u>	0.29	12.03	7.31	¥ ¥	 ≰ ₹	××
: :	26		Bone marrow imaging, ltd	0.55	0.18	0.19	0.18	0.19	0.05	0.75	0.76	0.75	0.76	X
78102	<u> </u>	∢ <	Bone marrow imaging, ltd	0.00	4.14	2.57	₹ ž	₹ ž	0.12	4.26	2.69	¥ S	₹ S	× }
78103	26	۷ ح	Bone marrow imaging, mult	0.75	0.25	0.26	0.25	0.26	0.03	1.03	1.04	1.03	- 5 9:	XX
	TC	∢.	Bone marrow imaging, mult	0.00	5.38	3.73	₹	₹:	0.17	5.55	3.90	¥:	¥:	XX
78104	26		Bone marrow imaging, body	0.80	6.52	0.28	0.29 AA	NA 0.28	0.25	1.12	5.94	1 A	¥ <u>-</u>	××
	TC		Bone marrow imaging, body	0.00	6.22	4.62	¥:	¥:	0.22	6.44	4.84	Y.	₹:	×
78110	96	∢ ⊲	Plasma volume, single	0.19	97.79	1.31	A S	A C	0.0	2.45	1.57	NA 92	N 0	××
	10	<	Plasma volume, single	0.00	2.13	1.25	¥ ¥	Z Y	0.06	2.19	1.31	Ž Š	ž	X
78111		⋖ <	Plasma volume, multiple	0.22	2.23	2.55	A S	A S	0.15	2.60	2.92	Z S	¥ c	× š
78111	0 Z 1 Z 2 Z	∢ ∢	Plasma volume, multiple	0.0	0.07	0.08)0.0 AN	0.08 A	0.0	0.30	0.31	0.30 NA	D. S. S. A. A. A. A. A. A. A. A. A. A. A. A. A.	X X
			mass,	0.23	2.16	1.91	Ž	Ž	0.12	2.51	2.26	N A	₹ Z	X
78120	26	⋖・	Red cell mass, single	0.23	0.08	0.08	0.08	0.08	0.01	0.32	0.32	0.32	0.32	X
78120	<u>.</u>	∢ ∢		0.00	2.09	2.83	<u>₹</u> ₹	<u>₹</u> ₹	0.15	2.20	3.31	¥ ¥	 ₹ ₹	žž
	26		Red cell mass, multiple	0.32	0.10	0.11	0.10	0.11	0.01	0.43	0.44	0.43	0.44	××
78121	TC	∢ ⊲	Red cell mass, multiple	0.00	2.16	2.73	A Z	A A	0.14	2.30	2.87	A Z	A A	××
78122	26	. ∢	Blood volume	0.45	0.15	0.16	0.15	0.16	0.02	0.62	0.63	0.62	0.63	X
78122	TC	-	Blood volume	0.00	2.17	4.00	¥	A A	0.24	2.41	4.24	¥ V	¥	×

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

ADL	JEINDOIN	기	ADDENDOM D.—TELATIVE VALUE ONITS (NVOS) AND	ND RELATED INFORMATION USED IN	Y OLNI	ION COL			DELERIMINING IMEDIOARE		[2] [2]	1007	CONTINCED	ם
CPT 1 HCPCS 2	Mod	Status	Description	Physician work RVUs ³	Fully implemented non-facility PE	Year 2007 transi- tional non-facil- ity PE RVUs	Fully implemented facility	Year 2007 transi- tional fa- cility PE RVUs	Mal-prac- tice RVUs	Fully implemented nonfacility total	Year 2007 transi- tional non-facil- ity total	Fully im- plement- ed facility total	Year 2007 transi- tional fa- cility total	Global
78130	26	۷ ۷	survival survival	0.61	3.73	3.24	NA 0.22	0.21	0.17	4.51	4.02	NA 0.86	NA 0.85	××
78130	7C	∢ <	Red cell survival study	0.00	3.52	3.03	¥ ž	A Z	0.14	3.66	3.17	₹ Z	Z Z	××
78135	26		survival	0.0	0.21	0.22	0.21	0.22	0.03	0.88	0.80	0.88	0.89	₹×
78135	10 		Red cell survival kinetics	0.00	8.66	5.83	¥ ž	Y S	0.25	8.91	6.08	₹ ź	¥ ž	×}
78140	26		Red cell sequestration Red cell sequestration	0.61	3.02	0.20	0.21	0.20	0.03	0.85	0.84	NA 0.85	0.84 48.0	žž
	2		Red cell sequestration	0.00	2.81	3.66	¥.	N S	0.21	3.02	3.87	¥:	¥	XX
78185	26		Spleen imaging	0.40	5.42 0.14	3.24	0.14	0.14	0.02 0.02	5.97	3.79	NA 0.56	0.56	žž
	2		Spleen imaging	0.00	5.29	3.10	N A	¥	0.13	5.45	3.23	N A	N A	××
78190			Platelet survival, kinetics	1.09	9.21	6.89	NA R	NA 38	0.38	10.68	8.36	AN C	A r	××
78190			Platelet survival, kinetics	0.0	8.85	6.51	S Z	8.5 8	0.30	9.15	6.81	N A	<u>8</u> ₹	ξ× ×
78191			Platelet survival	0.61	3.62	6.58	Ϋ́	Α̈́	0.40	4.63	7.59	A S	₹	X
78191	1 70 1 70		Platelet survival	0.61	0.21	0.20	12.0	0.20	0.03	0.85	0.84	0.85	0.84	×;
78195		_	Flatelet sulvival Lymph system imaging	1.20	9.02	5.62	¥ ¥	₹ ₹	0.28	10.50	7.10	¥ ¥	¥ \(\frac{1}{2} \)	XX
			Lymph system imaging	1.20	0.40	0.41	0.40	0.41	90.0	1.66	1.67	1.66	1.67	××
78195	 ၁၂		Lymph system imaging	0.00	8.62	5.22	₹ ź	¥ ź	0.22	8.84	5.44	Y S	<u>₹</u> ≨	× >
78201	26		Liver imagina	9 0	0.15	0.15	0.15	0.15	0.02	0.61	0.61	0.61	0.61	X X
	2		Liver imaging	0.00	4.80	2.98	Y Y	¥	0.13	4.93	3.11	N A	Z Y	X
78202			imaging with flow	0.51	5.50	3.67	Y S	Y S	0.16	6.17	4.34	N S	N O	× š
7820278202	 22 22 23 24		Liver imaging with flow	0.5	5.33	3.50) . U) . V	0.02	5.47	3.64	0.70 NA	0.70 NA	X X
78205	2 !		Liver imaging (3D)	0.71	5.48	00.9	¥ Ž	¥	0.34	6.53	7.05	Z Z	¥ Ž	X
78205			Liver imaging (3D)	0.71	0.24	0.24	0.24	0.24	0.03	0.98	0.98	0.98	0.98	X
78205	<u>:</u> د	_	Liver imaging (3D)	0.00	15.15	5.76 8.48	₹ ₹ Z	₹ ₹	0.31	16.26	0.0 9.59	Y Y	▼ ₹ 2 2	×××
			Liver image (3d) with flow	0.96	0.33	0.33	0.33	0.33	0.04	1.33	1.33	1.33	1.33	X
78206			Liver image (3d) with flow	0.00	14.82	8.15	¥ :	¥ :	0.11	14.93	8.26	Z :	¥:	X
7821578215	26		Liver and spleen imaging	0.49	5.02	3.59	N O	NA 16	9 . O	5.67	4.24	N 0	N 0	××
	12		Liver and spleen imaging	0.00	4.85	3.43	¥ X	¥ Y	0.14	4.99	3.57	N N	¥ X	X
78216	: 6		Liver & spleen image/flow	0.57	2.94	3.50	Z S	¥ 5	0.20	3.71	4.27	N S	Z S	X }
7821678216	0 C		Liver & spleen image/flow	0.5	0.19	3.6	0 . B	0 - N	0.02	0.78	3.49	0.78 NA	0.78 AN	X X
78220			Liver function study	0.49	3.19	3.72	₹₹	₹₹	0.21	3.89	4.42	Z Z	¥ Z	××××××××××××××××××××××××××××××××××××××
78220			Liver function study	0.49	0.17	0.16	0.17	0.16	0.05	0.68	0.67	0.68	0.67	XX
			Liver function study	0.00	3.02	3.55	¥ ž	¥ ž	0.19	3.21	3.74	Y S	¥ ž	× }
78223	26		Hepatobiliary imaging	0.84	0.29	0.28	0.29	0.28	0.04	1.17	1.16	1.1	1.16	ž ž
	7	_	Hepatobiliary imaging	0.00	8.58	4.90	Ą Z	¥	0.19	8.77	2.09	N N	A V	XX
78230			Salivary gland imaging	0.45	4.31	2.83	¥ ;	Y S	0.15	4.91	3.43	A S	¥ 8	X
78230	9 7		Salivary gland Imaging	0.45	0.15	0.15	61.0 61.0	61.0	0.02	0.62	0.62	0.62	0.62	×;
78231			Serial salivary imaging	0.00	2.89	3.24	¥ ¥	¥ ¥	0. 0. 5. 19	3.60	3.95	₹ ₹	¥ ₹	ž ž
78231			Serial salivary imaging	0.52	0.17	0.18	0.17	0.18	0.05	0.71	0.72	0.71	0.72	X
78231	1C		Serial salivary imaging	0.00	2.72	3.07	¥	¥ V	0.17	2.89	3.24	NA	¥	XX
1 OPT 2000	מסף שמכ י	ac carrier-		doi: I A	A 1	/ L - 14 17 1								

ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

Ā	ADDENDOM D.—MELATIVE	<u>.</u>	VALUE UNITS (NVUS) AI	טבואוםר	ND DELATED INFORMATION OSED IN	ION COF			בלילון ויי	DELENING INICIONAL L'ATMENTS	בט מואו	/007		
CPT 1 HCPCS 2	Mod	Status	Description	Physician work RVUs ³	Fully implemented non-facility PE	Year 2007 transi- tional non-facil- ity PE RVUs	Fully implemented facility	Year 2007 transi- tional fa- cility PE RVUs	Mal-prac- tice RVUs	Fully im- plement- ed non- facility total	Year 2007 transi- tional non-facil- ity total	Fully implemented facility total	Year 2007 transi- tional fa- cility total	Global
78232		۷ ح	Salivary gland function exam	0.47	2.86	3.50	NA 0.15	NA 0.16	0.20	3.53	4.17	0.64	NA 0.65	××
78232	2		Salivary gland function exam	0.00	2.71	3.34	¥ ž	Y S	0.18	2.89	3.52	Z Z	₹ ź	×
78258			Esophageal motility study	0.74	0.28	0.26	0.28	0.26	0.03	1.05	1.03	1.05	1.03	₹×
78258	2		Esophageal motility study	0.00	5.74	3.60	¥ ž	Y S	0.14	5.88	3.74	Z Z	¥ ž	× š
78261	26	∢ ∢	Gastric mucosa imaging	69.0	0.24	4.85 0.24	0.24	NA 0.24	0.03	0.96	96.0	0.96		žž
: :	2	< <	Gastric mucosa imaging	0.00	60.9	4.61	Z Y	N N	0.22	6.31	4.83	NA	¥ Z	X
78262			Gastroesophageal reflux exam	0.68	6.11	4.90	N S	NA 20	0.25	7.04	5.83	NA S	¥ 8	××
78262			Gastroesophageal reflux exam	0.00	5.89	4.67	N A	NA NA	0.22	6.11	4.89	NA NA	4 N	₹×
78264	. 6		Gastric emptying study	0.78	7.47	5.17	NA 72	NA 90	0.25	8.50	6.20	N N	N S	× }
78264		τ ∢	Gastric emptying study	00.00	7.20	4.91	N A	0.20 NA	0.02	7.42	5.13	<u>8</u> ₹) Y	XX
		< <	B-12	0.20	2.00	1.72	N A	¥	0.11	2.31	2.03	¥.	¥	××
	26	∢ •	Vit B-12 absorption exam	0.20	0.06	0.07	90.0	0.07	0.01	0.27	0.28	0.27	0.28	ž š
78271			Vit b-12 absroption exam	0.00	46.1	1.05	₹ ₹ Ž Ž	¥ ¥	0.10	2.04	2.08	¥ ¥	▼ 4	žž
•	-		Vit b-12 absrp exam, int fac	0.20	0.05	0.07	0.05	0.07	0.01	0.26	0.28	0.26	0.28	×
78271			Vit B-12 absrp exam, int fac	0.00	1.88	1.70	Y Z	¥ Z	0.10	1.98	1.80	¥ Z	Z Z	××
78272	26		8-12 12	0.27	0.07	0.09	0.07	0.09	0.01	0.35	0.37	0.35	0.37	X
	<u> </u>		Vit B-12 absorp, combined	0.00	1.97	2.24	¥ ž	Z Z	0.13	2.10	2.37	Y S	₹ Z	× š
78278	26	_	Acute GI blood loss imaging	66.0	0.30	0.5	2 S	NA 0.33	0.73	1.37	1.36	137	1 36 L	žž
: :	12		Acute GI blood loss imaging	0.00	8.62	5.82	Z A	₹ Y	0.25	8.87	6.07	₹ Z	₹ Z	X
78282		∢ <	GI protein loss exam	0.38	0.13	0.13	0.13 NA	0.13 NA	0.02	0.53	0.53	0.53 NA	0.53 NA	××
78290	26		Meckells divert exam	0.68	0.23	0.23	0.23	0.23	0.03	0.94	0.94	0.94	0.94	ξ× ×
78290			Meckells divert exam	0.00	8.62	4.45	ŽΞ	¥ ż	0.16	8.78	4.61	¥ ž	¥ ?	X §
78291	26		Leveen/shunt patency exam	0.88	0.30	0.30	0.30	0.30	0.20	1.22	1.22	1.22		žž
	2		Leveen/shunt patency exam	0.00	6.12	3.83	₹:	N S	0.16	6.28	3.99	N S	¥:	X
78300	26		Bone imaging, limited area	0.62	4.39	3.12	AN C	NA 120	0.03	5.18	3.91	NA 0.86	NA 0.86	××
	12		Bone imaging, limited area	0.00	4.18	2.91	Z S	Z	0.14	4.32	3.05	NA S	₹ 2	×
78305	. 0		Bone imaging, multiple areas	0.83	5.66	4.38 0.00	A C	AN C	0.23	6.72	5.44	A F	A L	××
78305			Bone imaging, multiple areas	0.00	5.39	4.10	S S	S S	0.19	5.58	4.29	2 2	Z Z	X
78306		∢ •	Bone imaging, whole body	0.86	6.32	5.01	A S	N S	0.26	7.44	6.13	N S	¥,	X
78306	 1 20 1 20		Bone imaging, whole body	98.0	0.30	0.29	05.0 AN	0.29 NA	0.0 40.0	1.20 6.25	49.4 49.4	02.L	6 Z	×××
) !		maging	1.02	8.95	60.9	Ϋ́	¥	0.29	10.26	7.40	¥	¥	×
78315	26 .		Bone imaging, 3 phase	1.02	0.35	0.34	0.35	0.34	0.04	1.41	1.40	1.4	1.40	× }
78320			maging	40.F	5.57	6.11	ξŞ	₹₹	0.35	6.96	7.50	₹₹	¥ Ž	₹×
	-		Bone imaging (3D)	1.04	0.35	0.36	0.35	0.36	0.04	1.43	1.44	1.43	1.4	X
78320	 ၁		Bone imaging (3D)	0.00	5.21	5.75	₹ ₹	A N	0.31	5.52	6.06	A N	¥ ₹	××
78350	26		mineral,	0.22	0.07	0.07	0.07	0.07	0.01	0.30	0.30	0:30	0.30	×
78350	 2 2	_	Bone mineral, single photon	0.00	1.84	1.02	A A	NA	0.02	1.89	1.07	NA	¥ V	×
FOOT	COP Pac 1	20,020	A COURT A COUR	tina All sink	A 60,00000	Toldering F.	מם יום יים יי	11011						

ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

j	2	<u>:</u>	TOTAL OF THE STREET CHIEF (11,00) AND THE THE THE STREET CHIEF THE STREET CHIEF TO THE STREET CHIEF THE STRE	וני היי		200	, ,		ואור ל פריים אינור ביינים אינים אינור ביינים אות ביינים אינור ביינים אינור ביינים אינור ביינים אינור ביינים אותר ביינים אינור ביינים אינור ביינים אינור ביינים אינור ביינים אינור ביינים אינור ביינים אינור ביינים אינור ביינים אינור ביינים אינור ביינים אינור ביינים אינור ביינים אינור ביינים אינור ביינים אינור ביינים אינור ביינים אינור ביינים אינור ביינים אינור ביינים אות ביינים אינור ביינים אינור ביינים אינים ביינים אינור ביינים אינור ביינים אינור ביינים אינים ביינים אינים ביינים אינור ביינים אינים ביינים אינים ביינים ביי			2		j
CPT 1 HCPCS 2	Mod	Status	Description	Physician work RVUs ³	Fully implemented non-facility PERVUS	Year 2007 transi- tional non-facil- ity PE RVUs	Fully implemented facility	Year 2007 transi- tional fa- cility PE RVUs	Mal-prac- tice RVUs	Fully implemented nonfacility total	Year 2007 transi- tional non-facil- ity total	Fully implemented facility	Year 2007 transi- tional fa- cility total	Global
78351	96	z	Bone mineral, dual photon	0.30	2.77	1.98	0.07	0.11	0.01	3.08	2.29	0.38	0.42	XX
78428		(∢	Cardiac shunt imagina	0.78	5.47	3.28	† 4	2 X	0.16	6.41	4.22	5. S	8.8 8	XX
78428	26	< <	Cardiac shunt imaging	0.78	0.39	0.32	0.39	0.32	0.03	1.20	1.13	1.20	1.13	×
78428	10 12	⋖ ·	Cardiac shunt imaging	0.00	5.08	2.97	₹ Z	Ž:	0.13	5.21	3.10	¥:	Y :	X
78445		∢ •	Vascular flow imaging	0.49	4.73	2.71	A S	Y S	0.13	5.35	3.33	V N	A S	×
78445	 7 E	∢ <	Vascular flow imaging	0.49	0.19	0.18	9F.0	81.0	0.05	0.70	0.69	0.70	99.0 VIV	× >
78456	<u>:</u> 2	< ∢	Vascular IIOW IIIIagirilg	00.7	10.25	1.07	ξ	Z Z	0.0	11.58	7.14	Z Z	X X	X X
	26	< <	Acute venous thrombus image	1.00	0.52	0.39	0.52	0.39	0.04	1.56	1.43	1.56	1.43	X
	TC	⋖	Acute venous thrombus image	00.00	9.74	5.43	A A	¥	0.29	10.03	5.72	NA	A A	X
78457		∢ .	Venous thrombosis imaging	0.77	4.86	3.41	Ψ.	Y S	0.17	5.80	4.35	Y S	Y S	X
7845/	97	∢ <	Venous thrombosis imaging	0.7.	0.25	0.26	0.25 VN	0.26	0.03	1.05	1.06	ე: ე: გ	90.1	×××
78458	26		Ven thrombosis images, bilat	06.0	0.29	0.31	0,29	0,31	0.04	1.23	1.25	1.23	1.25	X X
	2		Ven thrombosis images, bilat	00.0	4.42	4.13	Y Y	Y Y	0.21	4.63	4.34	Ž	Y Z	X
	26	⋖	Heart muscle imaging (PET)	1.50	0.58	0.57	0.58	0.57	0.05	2.13	2.12	2.13	2.12	××
78460		∢ •	Heart muscle blood, single	0.86	4.86	3.21	A S	AN S	0.17	5.89	4.24	Y ?	Α V	X
78460	26	∢ <	Heart muscle blood, single	0.86	0.31	0.30	0.31	0:30	0.04	1.21	1.20	1.21	1.20	× }
78460	: ၁	< <	Heart muscle blood, single	0.00	4.04	2.9	¥ \$	¥ \$	0.0	4.07 7.07	3.04 4.04	₹	¥	* * *
78461	26	< <	Heart muscle blood, multiple	1.23	0.45	0.44	0.45	4.0	0.00	1.73	1.72	1,73	1.72	X X
	12	< <	Heart muscle blood, multiple	00.0	3.75	4.49	Ž Ž	Y Z	0.25	4.00	4.74	Y Z	Y Z	××
		⋖	Heart image (3d), single	1.09	6.05	7.12	Ą V	Ϋ́	0.41	7.55	8.62	NA	¥ N	XX
78464	26	⋖ ·	Heart image (3d), single	1.09	0.51	0.41	0.51	0.41	0.04	1.64	1.54	1.64	1.54	×
7846478465	<u>်</u>	∢ ⊲	Heart Image (3d), single	0.00	1.81	6.70	A N	A N	0.37	13.94	14.34	A Z	¥ Z	××
78465	26	< ∢	Heart image (3d), multiple	1.46	0.73	0.57	0.73	0.57	0.05	2.24	2.08	2.24	2.08	×
	TC	⋖	Heart image (3d), multiple	0.00	11.08	11.64	¥Z	¥	0.62	11.70	12.26	N	¥.	X
78466		∢ •	Heart infarct image	0.69	4.66	3.32	Y S	A N	0.17	5.52	4.18	A S	A !	×
78466			Heart infanct image	0.69	0.27	9.025	0.27 NA	0.25 NA	0.03	0.99	9.97	96.0	\6.0 VN	××
78468	2	(∢	Heart infarct image (ef)	0.80	6.19	4.50	¥ Z	¥ ₹	0.22	7.21	5.52	Z Z	¥	××××××××××××××××××××××××××××××××××××××
	26	< <	Heart infarct image (ef)	0.80	0.43	0.31	0.43	0.31	0.03	1.26	1.14	1.26	1.14	X
78468	10 10	⋖ ·	Heart infarct image (ef)	0.00	5.76	4.19	₹ Z	Z:	0.19	5.95	4.38	¥:	Y :	X
78469	90	∢ <	Heart Intarct Image (3D)	0.92	6.39	5.76	A S	AN C	0.31	7.62	6.99	A C	A S	×;
78469		۲ ۷	Heart infarct image (3D)	0.92	5.95	5.42	4 N	4 N	0.00	 	5.70	ec. AN	SZ.	XX
		< ∢	Gated heart, planar, single	0.98	5.20	5.70	Ž	Z Z	0.34	6.52	7.02	¥ Z	Z Z	×
	26	⋖	Gated heart, planar, single	86.0	0.42	0.36	0.42	0.36	0.04	1.44	1.38	1.4	1.38	×
78472	TC	∢	Gated heart, planar, single	0.00	4.77	5.34	Y Y	Y Y	0.30	2.07	2.64	Y Y	Y Y	×
78473			Gated heart, multiple	1.47	9.63	9.00	A S	A !	0.48	11.58	10.95	Y S	N S	×
78473	 76		Gated heart, multiple	1.47	0.65	0.55	0.65	0.55	0.06	2.18	2.08	2.18	2.08	×
78478	: : :	∢ ⊲	Gated Heart, Molliple	0.00	0.00	0.40	4 4 2 Z	Y Y	0.42	9.4	0.00	Z Z	X X	X X
78478	26		Heart wall motion add-on	0.50	0.25	0.24	0.25	0.24	0.02	0.77	0.76	0.77	0.76	×
	TC		Heart wall motion add-on	00.00	0.58	1.32	A A	¥	0.10	0.68	1.42	NA	A A	X
78480			Heart function add-on	0.30	0.73	1.52	Α V	N S	0.12	1.15	1.94	Ϋ́	A S	×
7848078480	26 T.C.		Heart function add-on	05.0	0.15	0.20	0.15 NA	0.20 NA	0.02	0.47	0.52	0.47 NA	0.52 NA	××
78481	2	< ⊲	Heart first pass single	00.0	1.30	4 53	ζ <u>4</u>	Z Z	0.00	0.00	24.5	Z Z	Z Z	XX X
	26	< <	Heart first pass, single	86.0	0.51	0.40	0.51	0.40	0.03	1.52	1.41	1.52	1.41	X

ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

2		! i		1	5			; 						
CPT 1 HCPCS 2	Mod	Status	Description	Physician work RVUs³	Fully im- plement- ed non- facility PE RVUs	Year 2007 transi- tional non-facil- ity PE RVUs	Fully implemented facility	Year 2007 transi- tional fa- cility PE RVUs	Mal-practice RVUs	Fully implemented nonfacility total	Year 2007 transi- tional non-facil- ity total	Fully implemented facility	Year 2007 transi- tional fa- cility total	Global
78481	TC	4 4	Heart first pass, singleHeart first pass multiple	0.00	0.79	4.13 81.8	A A	A A	0.28	1.07	10.11	A Z	Z Z	XX
			Heart first pass, multiple	1.47	0.81	0.61	0.81	0.61	0.05	2.33	2.13	2.33	2.13	XX
78483	TC		Heart first pass, multiple	0.00	6.61	7.57	NA	N S	0.41	7.02	7.98	N S	N C	×;
78492	 0 0 0 0		Heart image (pet), single	58.7	0.63	0.0	0.03	0.0	0.08	287	2.73	2.2	2.73	XX
78494	2		Heart image, spect	1.19	6.42	7.24	S Z	2 Z	0.35	7.96	8.78	S N	N A	XX
78494	26	⋖	Heart image, spect	1.19	0.56	0.46	0.56	0.46	0.05	1.80	1.70	1.80	1.70	××
78494	_		Heart image, spect	0.00	5.86	6.78	Ϋ́	¥ :	0.30	6.16	7.08	¥:	¥ S	i X
78496	. 90	∢ ⊲	Heart first pass add-on	0.50	0.95	5.69	A C	A C	0.32	//·L	0.57	A C	N N	777
78496		< <	Heart first pass add-on	0.00	0.69	5.49	S N	N S	0:30	66.0	5.79	Z Z	AN AN	222
78580		⋖	Lung perfusion imaging	0.74	5.33	4.10	N A	Ą	0.21	6.28	20.9	Ϋ́	N A	××
78580		⋖ ·	Lung perfusion imaging	0.74	0.26	0.25	0.26	0.25	0.03	1.03	1.02	1.03	1.02	X
78580		∢ <	Lung perfusion imaging	00.0	5.07	3.85	¥ S	¥ ź	0.18	5.25	4.03	¥ ź	¥ ž	×
78584	26		Lung V/Q image single breath	66.0	0.34	5.50 5.33	75.0	0.33	0.0	1.37	1.36	1.37	38	XXX
78584	2		Lung V/Q image single breath	00.0	2.76	3.10	AN AN	AN	0.17	2.93	3.27	AN AN	A Z	XX
78585			Lung V/Q imaging	1.09	8.99	92.9	A A	A A	0.35	10.43	8.20	NA	¥ Y	××
78585			Lung V/Q imaging	00.0	0.37	0.36	0.37	0.36	0.05	1.51	1.50	1.51	1.50	×
		۲ ۵	Lung V/Q imaging	0.00	0.01	0.40	₹ 4 2 2	₹	0.30	0.9	0.70	ζ Δ Ζ Ζ	₹ 4 2 2	XX
78586	26		Aerosol lung image, single	0.40	0.14	0.13	0.14	0.13	0.02	0.56	0.55	0.56	0.55	X
	7 2		Aerosol lung image, single	0.00	4.19	3.00	ĄZ	₹ Z	0.14	4.33	3.14	Y Y	Ϋ́Z	××
78587		⋖	Aerosol lung image, multiple	0.49	5.64	3.65	Y Y	Y Y	0.16	6.29	4.30	Y Y	A A	XX
78587	26 T		Aerosol lung image, multiple	0.49	0.17	0.17	0.17	0.17	0.05	0.68	0.68	0.68	0.68	×
78588		(∢	Perfusion lung image	1.09	9.05	4.93	ζ <u>∢</u> Ζ Ζ	₹ ₹	0.23	10.34	6.25	₹	 ∑ Z	XXX
	-		Perfusion lung image	1.09	0.37	0.36	0.37	0.36	0.05	1.51	1.50	1.51	1.50	×××
78588	TC	⋖・	Perfusion lung image	0.00	8.64	4.57	¥ ?	₹ i	0.18	8.82	4.75	¥ :	₹ ?	X
78591	. 9		Vent Image, 1 breath, 1 proj	0.40	4.33	3.33	A 0	A C	0. O	0.56	0.89	A 92	NA 55	××
78591			Vent image, 1 breath, 1 proj	0.00	4.19	9.5	¥ Z	2 S	0.14	4.33	3.33	S Z	Z Z	XX
78593	-	4	Vent image, 1 proj, gas	0.49	5.01	3.97	Ą V	¥	0.20	5.70	4.66	N N	Ą Ą	××
78593			Vent image, 1 proj, gas	0.49	0.17	0.16	0.17	0.16	0.02	0.68	0.67	0.68	0.67	XX
78593	 ၁	∢ <	Vent Image, 1 proj. gas	0.00	4.84 4.84	. 3.87 . 4.67	¥ S	∀	0.18	5.02	3.99	4 S	₹ <u>₹</u>	××
78594			Vent image, man proj, gas	0.53	0.17	0.18	0.17	0.18	0.05	0.72	0.73	0.72	0.73	XXX
	2		Vent image, mult proj, gas	0.00	5.31	5.07	₹ Z	¥	0.25	5.56	5.35	N A	A A	××
78596		∢ •	Lung differential function	1.27	8.98	7.88	AN (¥ ;	0.42	10.67	9.57	Ϋ́,	Ϋ́	XX
78596	26		Lung differential function	1.27	0.39	0.41	0.39 VIV	0.41	0.05	1.71	1.73	1.7.1	1.73	× >
78600		∢ ⊲	Lung differential function	0.00	8.59	7.4.7	¥ ¤	₹	0.37	8.90	7.84	¥	₹ 4 Z Z	×××
78600		< <	Brain imaging, its static	9.0	0.15	0.15	0.15	0.15	0.05	0.61	0.61	0.61	0.61	XX
	5	⋖	Brain imaging, Itd static	0.00	7.39	4.02	N	¥.	0.14	7.53	4.16	¥.	N A	XX
78601	: 6	⋖ •	Brain imaging, Itd w/flow	0.51	5.58	4.08	Z S	Y S	0.20	6.29	4.79	N S	A S	×
78601	97 L	∢ ⊲	Brain imaging, Itd W/flow	16.0	0.17	391	/L.0	/L.0 NA	0.02	0.70	0.70	0.70 NA	0.70 NA	×××
78605	2	< <	Brain imaging, complete	0.53	4.96	3.93	Z	Ž	0.20	5.69	4.66	Z Z	Z Z	X
78605	26	⋖ ·	Brain imaging, complete	0.53	0.18	0.18	0.18	0.18	0.05	0.73	0.73	0.73	0.73	XX
78605			Brain imaging, complete	0.00	8.78	3.75	 V Z	A Z	0.18	4.96	3.93	A N	A A	××
			DIGILI III GGIIIG, COIIIPI WIICW	5	3	715			2	;	5		- 1.74	

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

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CPT 1 HCPCS 2	Mod	Status	Description	Physician work RVUs ³	Fully implemented nonfacility PE	Year 2007 transi- tional non-facil- ity PE RVUs	Fully implemented facility	Year 2007 transi- tional fa- cility PE RVUs	Mal-prac- tice RVUs	Fully im- plement- ed non- facility total	Year 2007 transi- tional non-facil- ity total	Fully im- plement- ed facility total	Year 2007 transi- tional fa- cility total	Global
78606	26	44	Brain imaging, compl w/flowBrain imaging, compl w/flow	0.64	0.22	0.21	0.22 NA	0.21 NA	0.03	0.89	0.88	0.89 NA	0.88 NA	××
78607	90	< <		1.23	15.67	9.17	Z Z	Y S	0.40	17.30	10.80	N S	A F	× ×
78607	22	< <	Brain imaging (3D)	0.00	15.26	8.74	Y AN	5 A	0.35	15.61	60.6	S N	Y Y	₹×
78608	26	∢ •	Brain imaging (PET)	1.50	0.50	0.51	0.50	0.51	0.06	2.06	2.07	2.06	2.07	X
78609	92	∢ ∢	Brain flow imaging (PET)	0.50	0.52	0.51	0.52 NA	10.51 NA	0.06	2.08	2.07	2.08 NA	2.07 NA	××
	26	< <	Brain flow imaging only	0.30	0.10	0.11	0.10	0.11	0.01	0.41	0.42	0.41	0.45	XX
78610		∢	Brain flow imaging only	0.00	4.52	2.32	¥ ₹	¥ ₹	0.10	4.62	2.42	¥ ₹	A N	××
78615	26		Cerebral vascular flow image	0.42	0.15	0.15	0.14	0.15	0.02	0.58	0.59	0.58	0.59	XX
78615	TC		Cerebral vascular flow image	0.00	5.39	4.24	¥ Z	¥ 2	0.21	5.60	4.45	¥ 2	Ϋ́	X
78630	26	∢ ∢	Cerebrospinal fluid scan	0.68	0.23	0.23	0.23	0,23	0.30	9.97	0.94	0.94	0.94	ž×
	TC		Cerebrospinal fluid scan	0.00	8.76	5.98	N	N A	0.27	9.03	6.25	N A	Z	××
78635		∢ •	CSF ventriculography	0.61	8.91	4.31	Y S	Y S	0.16	9.68	5.08	Y S	Y S	X
7863578635	26 T.C	∢ ⊲	CSF ventriculography	0.61	0.21	0.23	0.21 AN	0.23 NA	0.02	0.84	0.86	0.84 NA	0.86 NA	××
78645	2		CSF shunt evaluation	0.57	8.80	4.92	Z Z	Z Z	0.20	9.57	5.69	Z Z	Z Z	×××
78645	26		CSF shunt evaluation	0.57	0.19	0.19	0.19	0.19	0.05	0.78	0.78	0.78	0.78	X
78645	ည	< <	CSF shunt evaluation	0.00	8.61	4.73	₹ Ż	¥ S	0.18	8.79	4.91	¥ S	₹ Z	× }
78647	26		Cerebrospinal fluid scan	06.0	0.28	8.30	NA 0	NA 0.30	0.30	1.22	9.60	- A	124 124	ž ×
	2		Cerebrospinal fluid scan	0.00	14.40	8.05	N A A	N A A	0.31	14.71	8.36	Z	N A	×
78650			CSF leakage imaging	0.61	8.97	5.89	A S	Y S	0.27	9.85	6.77	A S	A G	×
78650	02 L		CSF leakage Imaging	0.0	0.21	12.0	12.0 AN	Z.O	0.03	0.80	0.83	C8:0	0.83 VA	× ×
78660	2	< <	Nuclear exam of tear flow	0.53	4.40	2.83	¥ Ž	Z Z	0.14	5.02	3.50	Z Z	Z Z	₹×
	26	⋖ -	Nuclear exam of tear flow	0.53	0.18	0.18	0.18	0.18	0.05	0.73	0.73	0.73	0.73	×
78660	 ၁		Nuclear exam of tear flow	0.00	4.22	2.65	¥ ž	Y S	0.12	4.34	2.77	Y S	Y S	×
78700	26	_	Kidney imaging, static	0.45	0.16	0.15	0.16	0.15	0.00	0.63	0.62	0.63	29.0	X X
	7 		Kidney imaging, static	0.00	4.47	3.41	A	N A	0.16	4.63	3.57	N A	Z	×
78701			Kidney imaging with flow	0.49	2.60	4.20	N N	A S	0.20	6.29	4.89	A S	NA S	× }
78701	0 Z		Kidney imaging with flow	9.0	0.17	0 5)	0.10	0.02	0.00	797	0.00 VA) O.O	{
78704	2	(∢	Imaging renogram	0.74	5.67	4.58	¥ Ž	ΣŽ	0.24	6.65	5.56	ΣŽ	Z Z	₹×
78704	26		Imaging renogram	0.74	0.25	0.25	0.25	0.25	0.03	1.02	1.02	1.02	1.02	XX
78704	10 10	∢ <	Imaging renogram	0.00	5.41	4.32	¥ ž	¥ S	0.21	5.62	4.53	¥ S	¥ ž	×××
78707	26		Kidney flow/function image	0.90	0.77	0.03	NA 0	A C	0.27	4 8.9	0.20	Z Z	1 N	X X
78707	12	< <	Kidney flow/function image	0.00	5.38	4.71	N A	N N	0.23	5.61	4.94	Z Y	NA	X
78708		⋖	Kidney flow/function image	1.21	3.59	4.57	N	NA	0.28	2.08	90.9	NA	Ā	××
78708	26	∢ <	Kidney flow/function image	1.21	0.42	0.41	0.42	0.41	0.05	1.68	1.67	1.68	1.67	××
78709	2	< <	Kidney flow/function image	141	9.55	6.03	X X	Z Z	0.29	10.95	7.73	Z Z	ζ « Z Z	X X
78709	26		Kidney flow/function image	4.	0.48	0.47	0.48	0.47	90.0	1.95	1.94	1.95	1.94	X
78709	7C		Kidney flow/function image	0.00	8.76	5.55	A V	Y N	0.23	8.99	2.78	N N	₹ Z	×
78710	36		Kidney imaging (3D)	0.66	5.48	5.98	NA 0	A C	0.34	6.48	6.98	A P	A 6	××
2		-	(20) Billigg in a single in a singl	8	77:0	0.55	0.55	77.0	5	5.5	5	0.0	5.0	***

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

ADE	FINDOW	ADDENDOM B.——DELATIVE	LATIVE VALUE UNITS (NVOS) AND	חם ואוםר	NOT AWAD IN				ומה אינו ויוויון ו	AE LAYMENIO	בטר טואו	1007		
CPT 1 HCPCS 2	Mod	Status	Description	Physician work RVUs ³	Fully im- plement- ed non- facility PE RVUs	Year 2007 transi- tional non-facil- ity PE RVUs	Fully implemented facility	Year 2007 transi- tional fa- cility PE RVUs	Mal-prac- tice RVUs	Fully implemented non-facility total	Year 2007 transi- tional non-facil- ity total	Fully implemented facility	Year 2007 transi- tional fa- cility total	Global
78710	тс	4 4	Kidney imaging (3D)	0.00	5.26	5.76	A N	AN AN	0.31	5.57	6.07	A A	A N	XXX
78715	26	< ∢	Renal vascular flow exam	0.30	0.13	0.12	0.13	0.12	0.0	0.44	0.43	0.45	0.43	××××××××××××××××××××××××××××××××××××××
78715	TC	∢	Renal vascular flow exam	0.00	4.84	2.40	¥.	N N	0.10	4.94	2.50	A A	¥	XX
78725		⋖・	Kidney function study	0.38	2.44	2.05	¥ 5	¥ 5	0.13	2.95	2.56	A S	A S	ž š
78725	76 T	∢ <	Kidney function studyKidney function study	86.0	21.0	0.13	2L.0	0.13	0.02	0.52	0.53	0.52	0.53	ž Š
78730)	< <	Urinary bladder retention	0.36	5.70	2.61	₹	₹ ₹	0.0	6.16	3.07	₹ ₹	ζ	X X
:	26	< <	Urinary bladder retention	0.36	0.15	0.13	0.15	0.13	0.05	0.53	0.51	0.53	0.51	X
78730	TC	∢ •	Urinary bladder retention	0.00	5.55	2.48	¥ ž	¥ 2	0.08	5.63	2.56	¥ S	¥ ?	×
78740	26	∢ ∢	Ureteral reflux study	0.57	0.04	0.0	A 0	A 0	0.0	05.0	0.87	A 0	4 C	ž ×
	2	< <	Ureteral reflux study	0.00	5.45	2.96	ž Ž	N N	0.12	5.57	3.08	A N	Z Z	×
78760		4	Testicular imaging	99.0	4.68	3.35	¥	N A	0.17	5.51	4.18	A A	N A	×××
78760	26	∢ •	Testicular imaging	99.0	0.23	0.22	0.23	0.22	0.03	0.92	0.91	0.92	0.91	X
78760	<u>း</u> ၁	∢ <	Testicular imaging	0.00	4.44	3.13	¥ ž	¥ ž	0.14	4.58	3.27	Y S	Y S	×
78761	26	τ ⊲	Testicular imaging/ now	0.7	0.25	0.24	5 7 7 7	0 24	0.20	66.0	7.7	66	2 6	XXX
78761		< ⋖	Testicular imagina/flow	00.0	4.85	3.62	S A N	Y A	0.12	5.05	3.79	A Z	A S	XXX
		. ⋖	Tumor imaging, limited area	99.0	4.44	3.83	Y Z	Y Y	0.22	5.32	4.71	¥ Z	Z	××
•	26	⋖	Tumor imaging, limited area	99.0	0.21	0.22	0.21	0.22	0.04	0.91	0.92	0.91	0.92	××
78800	TC	⋖		0.00	4.23	3.62	A V	AN	0.18	4.41	3.80	A	N A	××
78801		⋖	Tumor imaging, mult areas	0.79	6.33	4.96	Y Y	Y Y	0.27	7.39	6.02	Y Y	Y Y	××
78801	26	∢ •	Tumor imaging, mult areas	0.79	0.26	0.27	0.26	0.27	0.05	1.10		1.10	- :	X
78801	: :	∢ <	Tumor imaging, mult areas	0.00	6.07	99.4	¥	¥ \$ 2	0.22	67.0	16.4	¥	Y < Z	× }
•	26	(⊲	Tumor imaging, whole body	98.0	0.40	0.00	000	000	0.04	9.00	119	7 0	7 5	XX
78802	12	< ⋖	Tumor imaging, whole body	00.0	8.19	6.21	Z Z	AZ AZ	0:30	8.49	6.51	Y Z	Z Z	×
	:	۷	Tumor imaging (3D)	1.09	15.50	60.6	¥	A A	0.40	16.99	10.58	AN	N A	××
78803	26	Α,	Tumor imaging (3D)	1.09	0.37	0.38	0.37	0.38	0.02	1.51	1.52	1.51	1.52	×
78803	TC	⋖・	Tumor imaging (3D)	0.00	15.14	8.71	¥:	¥:	0.35	15.49	9.06	¥:	Y Z	X
78804		∢ <	Tumor imaging, whole body	1.07	15.48	12.47	A S	N C	0.34	16.89	13.88	Z Y	Z Z	×
•	 1 V	(<	Timor imaging, whole body	0.0	0.30	10.57	0.30).S.O	90.0	1.4.1 C / 71	04.01	4.7	04. V V	< >
78805	2	< <	Abscess imaging, Micre Body	0.73	4.38	3.84	₹	₹	0.21	5.32	4.78	Z Z	Z Z	XX
:	26	<	Abscess imaging, Itd area	0.73	0.25	0.25	0.25	0.25	0.03	1.01	1.01	1.01	1.01	××
78805	TC	V	Abscess imaging, Itd area	0.00	4.14	3.59	₹	¥.	0.18	4.32	3.77	Y Z	Y Z	××
78806		< <	Abscess imaging, whole body	0.86	8.70	7.23	₹ 8	A S	0.39	9.95	8.48	Y Y	Z Ţ	× }
78806	0 Z	₹ 4	Abscess imaging, whole body	0.00	0.73 8.41	0.29	97.0 NA	82.0 NA	0.04	98	7.29	9 N	0 AN	XX
78807	2	< ∢	Nuclear localization/abscess	1.09	14.72	8:90	₹	ž Ž	0.39	16.20	10.38	Z Z	Z Z	××××××××××××××××××××××××××××××××××××××
	26	< <	Nuclear localization/abscess	1.09	0.36	0.38	0.36	0.38	0.04	1.49	1.51	1.49	1.51	××
78807	TC	⋖	Nuclear localization/abscess	0.00	14.36	8.52	A N	A A	0.35	14.71	8.87	AN	N A	××
78811	26	⋖ ·	Tumor imaging (pet), limited	1.54	0.53	0.53	0.53	0.53	0.11	2.18	2.18	2.18	2.18	×
		∢ <	Tumor image (pet)/skul-thigh	1.93	0.66	0.66	0.66	0.66	0.1	2.70	2.70	2.70	2.70	×;
78814	26	(⊲	Tumor image (pet) full body	00.7	0.09	0.69	0.69	0.69	. c	2.00	2.00	2.00	2.00	< ×
78815	26	< ∢	Tumorimage pet/ct skul-thigh	2.44	0.83	0.84	0.83	0.84	0 0	3.38	3.39	3.38	3.39	×××
78816	26	⋖	Tumor image pet/ct full body	2.50	0.85	0.86	0.85	0.86	0.11	3.46	3.47	3.46	3.47	××
78890		B 1	Nuclear medicine data proc	0.05	0.39	1.10	Z	Y Y	0.07	0.51	1.22	Y Y	Z	×
7889078890	26 T.C.	m m	Nuclear medicine data proc	0.00	0.01	0.02	10.0 AN	0.02 NA	0.0	0.07	0.08	0.07 NA	0.08 NA	××
	- 1	נ		2	9	2	1	1	8	5	:	1		
1 CPT codes	and descript	rintors only	ly are convridt 2005 American Medical Associa	tion All rich	polynogou of	Annlinable FA	BS/DEABS	Made						

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

ADL	JEINDOIVI	ADDENDOM B.—RELAIIVE	VALUE UNITS (NVOS) AI	ואופרי	ANIZOLNI ANIZOLNI	ND DELATED INFORMATION OSED IN DETERMINING MEDICARE PAYMENTS		ייוואוואורו	יל כולודווו ג	יייין א - חר	בט מואו	7007	CONTINOED	<u> </u>
CPT 1 HCPCS 2	POW	Status	Description	Physician work RVUs ³	Fully implemented non-facility PE	Year 2007 transi- tronal non-facil- ity PE RVUs	Fully implemented facility	Year 2007 transi- tional fa- cility PE RVUs	Mal-practice RVUs	Fully implemented nonfacility	Year 2007 transi- tional non-facil- ity total	Fully im- plement- ed facility total	Year 2007 transi- tional fa- cility total	Global
78891	26	88		0.10	0.88	2.22	0.02	0.0 40.0	0.14	1.12	2.46	NA 0.13	NA 0.15	××
7889179005		ω ⊲	Nuclear med data proc	0.00	0.85	2.19	A Z	A A	0.13	0.98	2.32	A Z	A Z	××
79005		< ∢	Nuclear rx, oral admin	.8	0.56	0.59	0.56	0.59	0.08	2.44	2.47	2.44	2.47	XX
79005	_		Nuclear IX, oral admin	0.00	1.29	2.30	¥ Z	¥ Z	0.14	1.43	2.44	¥ Z	¥ Ż	××
79101			Nuclear rx, iv admin	1.96	0.70	0.68	0.70	0.68	0.08	2.74	2.72	2.74	2.72	₹×
79101	2		Nuclear rx, iv admin	0.0	1.44	2.33	¥ S	¥ S	0.14	1.58	2.47	¥ Z	Y S	× }
79200		< <	Nuclear IX, Intracay admin	1.99	0.61	0.67	0.61	79.0	0.09	2.69	2.75	2.69	2.75	₹×
79200	25		Nuclear rx, intracav admin	0.00	1.64	2.38	A S	A !	0.14	1.78	2.52	NA	¥ 8	X
79300		∢ ⊲	Nuclr rx, interstit colloid	1.60	0.50	0.55	0.50 NA	0.55 NA	0.13	2.23	2.28	2.23 NA	2.28 NA	××
79403		< ∢	Hematopoietic nuclear tx	2.25	0.71	0.85	0.71	0.85	0.10	3.06	3.20	3.06	3.20	X
79403	_		Hematopoietic nuclear tx	0.00	2.21	3.76	Ϋ́	¥ S	0.14	2.35	3.90	¥ S	¥ \$	×}
7944079440	. 6		Nuclear rx, intra-articular	 	08.0	2.39	0 68 68	A L	22.0	7.1-0 7.7-0	2.20	NA 275	NA 0	XX
79440			Nuclear rx, intra-articular	0.00	1.22	2.28	S A	Z	0.14	1.36	2.42	N A	Y Z	X
79445	26		Nuclear rx, intra-arterial	2.40	0.83	0.82	0.83	0.82	0.12	3.35	3.34	3.35	3.34	X
80500	•		Lab pathology consultation	0.37	0.19	0.21	0.11	0.15	0.0	0.57	0.59	0.49	0.53	ž ž
83020	26	_	Lab parifology correction	0.37	0.11	0.14	0.11	0.14	0.0	0.49	0.52	0.49	0.52	ξ× ×
	26		Genetic examination	0.37	0.11	0.12	0.11	0.12	0.01	0.49	0.50	0.49	0.50	×
84165			Protein e-phoresis, serum	0.37	0.11	0.13	0.1	0.13	0.01	0.49	0.51	0.49	0.51	ž š
84166	2 20	_	Protein e-phoresis/urine/csi	0.37	. c	0.13	0.0	0.13	0.0	0.49	0.51	0.49	0.51	X X
84182			Protein, western blot test	0.37	0.11	0.15	0.11	0.15	0.02	0.50	0.54	0.50	0.54	X
85060		۷,	Blood smear interpretation	0.45	0.14	0.17	0.14	0.17	0.02	0.61	0.64	0.61	0.64	X
85097			Bone marrow Interpretation	0.94	1.29	0.13	0.27	0.38	9. C	2.27	2.74	52. L	1.36	×××
85396			Clotting assay, whole blood	0.37	Z Z	S Z	0.04	0.13	9.0	S N	S N	0.90	0.54	XX
85576	26		Blood platelet aggregation	0.37	0.12	0.15	0.12	0.15	0.01	0.50	0.53	0.50	0.53	X
86077			Physician blood bank service	0.94	0.37	0.39	0.29	0.37	0.03	1.34	1.36	1.26	 & &	××
86079			Physician blood bank service	0.94	0.37	0.43	0.29	0.38	0.03	1.34	1.40	1.26	1.35	X
86255			Fluorescent antibody, screen	0.37	0.11	0.14	0.1	0.14	0.01	0.49	0.52	0.49	0.52	X
862508	9 6		Sering imminoalectrophoresis	0.37		4 7	- 5	2.0	0.0	94.0 04.0	0.52	0.49	0.52	Ž
86325			Other immunoelectrophoresis	0.37	0.1	0.13	0.0	0.13	0.0	0.49	0.51	0.49	0.51	××××××××××××××××××××××××××××××××××××××
86327	26		Immunoelectrophoresis assay	0.45	0.13	0.17	0.13	0.17	0.05	0.57	0.61	0.57	0.61	××
86334	26		Immunofix e-phoresis, serum	0.37	0.0	0.14	1.5	0.14	0.0	0.49	0.52	0.49	0.52	× }
86490			Coccidioidomycosis skin test	0.00	0.12	0.25	- Z	2 Z	0.00	0.49	0.27	0.40 VA	- S	ž ž
			Histoplasmosis skin test	00.0	0.14	0.28	Ą V	NA	0.05	0.16	0.30	NA	A A	XX
86580	: 6		TB intradermal test	0.00	0.16	0.23	A S	A S	0.05	0.18	0.25	A S	A C	× š
87207	9 0		Cmoor enecial stain	0.37	0.0		0.0	0.0	0.0	0.50	0.50	0.50	0.50	X
88104			Cytopathology, fluids	0.56	1.15	0.93	S S	Z Z S Z	90.0	1.75	1.53	P A	S. N	₹×
88104	26.		Cytopathology, fluids	0.56	0.15	0.22	0.15	0.22	0.02	0.73	0.80	0.73	0.80	× š
88104	: : :		Cytopathology, fluids	0.00	00:1	0.7	Z Z	Į.	0.02	1.02	0.70	Ţ	¥N	XX
TOO!	ייטלי לייני יי	day or other	V 200 CONVICED TOOK AMORIOSE MACINE ASSOCIA	doi: IV doi:to	A Location of	Indecident	ADO/004	71000						_

ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

				i i]))				<u>.</u>)) 		
CPT ¹ HCPCS ²	Wod	Status	Description	Physician work RVUs ³	Fully im- plement- ed non- facility PE RVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility	Year 2007 transi- tronal fa- cility PE RVUs	Mal-prac- tice RVUs	Fully implemented non-facility total	Year 2007 transi- tional non-facil- ity total	Fully implemented facility total	Year 2007 transi- tional fa- cility total	Global
88106		44	Cytopathology, fluids	0.56	1.50	1.39	0.15	0.22	0.04	2.10	1.99	NA 0.73	0.80	××
88106	 22 	۷ ۵	Cytopathology, fluids	0.00	1.35	1.17	A A	Y Y	0.02	1.37	1.19	A A	A A	××
88107	-	< <	Cytopathology, fluids	0.76	0.22	0.30	0.22	0.30	0.03	1.01	1.09	1.0	1.09	X
88107	 21	∢	Cytopathology, fluids	0.00	1.76	1.35	₹ Z	Z Z	0.02	1.78	1.37	Z Z	A A	××
88108		(∢	Cytopath, concentrate tech	0.56	0.15	0.22	0.15	0.22	0.02	0.73	0.80	0.73	08.0	XX
88108		∢ <	Cytopath, concentrate tech	0.00	1.32	1.06	Ž Ž	¥ ž	0.02	1.34	1.08	Ϋ́	¥ ž	×
88112		∢ ∢	Cytopath, cell enhance tech	8	0.29	0.46	0.29	0.46	0.09	1.49	3.07	1.49 		ž ž
	2	⋖ ·	Cytopath, cell enhance tech	0.00	1.21	1.40	¥:	₹:	0.05	1.23	1.42	¥:	¥:	×
88125 88125	26	⋖ ⋖	Forensic cytopathology	0.26	0.25	0.27	0.08 0.08	0.10 A 01.0	0.02	0.53	0.55	NA 0.33	NA 0.37	××
	12	. ∢		0.00	0.19	0.17	Ž	₹ Z	0.01	0.20	0.18	N A	Ž	×
88141		∢ <	Cytopath, c/v, interpret	0.42	0.38	0.21	0.38	0.21	0.02	0.85	0.65	0.82 NA	0.65	× >
88160	26	< ∢	Cytopath smear, other source	0.50	0.30	0.19	0.13	0.19	0.02	0.65	0.71	0.65	0.71	XX
	12	< 4	Cytopath smear, other source	0.00	0.77	0.66	Ž	₹ Z	0.02	0.79	0.68	¥.	Ž	X
88161			Oytopath smear, other source	0.50	1.12	0.00	A F	A C	0.0 40.0	1.66	1.53	N O	A C	××
88161			Cytopath smear, other source	0.00	0.97	0.79	2 8	NA A	0.02	0.99	0.81	S Z	Z Z	X
88162		⋖ ·	Cytopath smear, other source	0.76	1.16	1.06	Y Y	A N	0.05	1.97	1.87	N A	Y Y	X
88162	. 26 T.C	∢	Cytopath smear, other source	0.76	0.16	0.29	0.16 NA	0.29 NA	0.03	0.95	1.08	0.95 NA	1.08 NA	××
88172	2 !	< <	Cytopathology eval of fna	09:0	0.85	0.76	Z Z	Z Z	0.04	1.49	1.40	ΣŽ	 ₹ ₹	×××
88172	-	۷,	Cytopathology eval of fna	09.0	0.18	0.24	0.18	0.24	0.02	0.80	0.86	0.80	98.0	X
88172	<u>်</u>	∢ ∢	Cytopathology eval of tha	0.00	0.67	0.52	≰ ≰ Ž Ž	₹ ₹	0.02	3.76	3.64	₹ ₹	≰ ≰ Ž Ž	ž ž
88173	. 26	⋖	Cytopath eval, fna, report	1.39	0.39	0.54	0.39	0.54	0.05	1.83	1.98	1.83	1.98	×
88173		4 4	Cytopath eval, fna, report	0.00	1.91	1.64	⊈ Z Z	₹ Z	0.02	1.93	1.66	A A	A A	××
		< <		0.77	0.12	0.28	0.12	0.28	0.03	0.92	1.08	0.92	1.08	X
88182	_	∢ <	Cell marker study	0.0	1.83	1.70	Z Z	₹ S	0.0	1.87	1.74	¥ S	Z Z	× }
88185		< <	Flowcytometry/tc, add-on	00.0	1.52	0.86	₹Ž	Z Z	0.02	1.54	0.88	Z Z	¥ Ž	ZZZ
88187		∢ •	Flowcytometry/read, 2-8	1.36	0.38	0.43	0.38	0.43	0.01	1.75	1.80	1.75	1.80	×
88188		∢ ∢	Flowcytometry/read, 9-15Flowcytometry/read, 16 & >	2.23	0.43	0.54	0.43	0.08	0.0	2.13	2.24	2.13	2.24	žž
		. ∢	Cyto/molecular report	0.52	0.27	0.20	0.27	0.20	0.02	0.81	0.74	0.81	0.74	X
88300	. 6	∢ <	Surgical path, gross	0.08	0.59	0.49	₹ S	A S	0.02	0.69	0.59	¥ E	A C	××
88300		< <	Surgical path, gross	00.0	0.56	0.46	S Z	S A	0.0	0.57	0.47	Z Z	Z Z	×××
		∢•	Tissue exam by pathologist	0.13	1.29	1.10	Ϋ́	A S	0.03	1.45	1.26	A S	¥ 8	X
88302	20 1	∢	Lissue exam by pathologist	0.13	0.04	0.06	0.04 4 AN	90:0 VA	0.0	0.18	0.20	0.18 NA	0.20 NA	××
88304		< <	Tissue exam by pathologist	0.22	1.53	1.37	Ž	Ž	0.03	1.78	1.62	Ž	Ž	X
88304		∢ •	<u></u> ≩.	0.22	0.06	0.08	0.06	0.08	0.01	0.29	0.31	0.29	0.31	X
88304	<u>်</u>	∢ ∢	lissue exam by pathologist	0.00	2.18	98.1	≰	₹ ₹	0.02	3.00	2.80	₹ ₹	≰ ≰ Ž Ž	××
88305	. 26	< •	Tissue exam by pathologist	0.75	0.21	0.30	0.21	0.30	0.03	0.99	1.08	0.99	1.08	X
cocoo	ا ا ا	1	Ilssue exam by partiologist	00.0	06:	00.1	1 C	<u> </u>	90.0	2.02	7/:1	<u> </u>	<u> </u>	¥

ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

TOE	JEINDOIN	ADDENDOM D.—MELAIIVE	VALUE UNITS (AVUS) A	חבראובה	ND DELATED INFORMATION OSED IN			DELERIMINING IMEDIOARE	נְלֵלְוֹחְוּאוֹ עִּ		בט מואו	- / / / /		ב
CPT 1 HCPCS 2	Mod	Status	Description	Physician work RVUs ³	Fully implemented non-facility PE	Year 2007 transi- tional non-facil- ity PE RVUs	Fully implemented facility	Year 2007 transi- tional fa- cility PE RVUs	Mal-prac- tice RVUs	Fully im- plement- ed non- facility total	Year 2007 transi- tional non-facil- ity total	Fully im- plement- ed facility total	Year 2007 transi- tional fa- cility total	Global
88307	26	44		1.59	4.48	3.49	NA 0.47	NA 0.63	0.12	6.19	5.20	2.12	2.28	××
88307	10	4 4	Tissue exam by pathologist	0.00	4.02	2.87	A A	A Z	0.06	4.08	2.93	A N	A A	××
88309	26	< ∢	Tissue exam by pathologist	2.80	0.82	0.93	0.82	0.93	0.08	3.70	3.81	3.70	3.81	××××××××××××××××××××××××××××××××××××××
88309	TC	∢ <	Tissue exam by pathologist	0.00	5.46	3.94	Ϋ́	¥ S	0.06	5.52	4.00	Z Z	¥ ž	× }
88311		∢ ∢	Decalcify tissue	0.24	0.25	0.09	0.07	0.09	0.02	0.32	0.34	0.32	0.34 	žž
	2	∢ •		0.00	0.18	0.14	¥:	¥ :	0.01	0.19	0.15	¥ ?	¥:	XX
88312	26	∢ ∢	Special stains	0.54	0.14	0.21	0.14 41.0	NA 0,21	0.03	3.06	2.33	0.70	0.7 P	ž ž
	12	< <		0.00	2.34	1.55	Z A	Ž	0.01	2.35	1.56	Z Y	¥ Z	X
88313	: 0	∢ <	Special stains	0.24	1.94	1.42	NA 90 C	A S	0.02	2.20	1.68	NA S	A S	×>
88313		(∢	Special stains	0.00	1.88	1.33	8. S		0.0	1.89	1.34	S A	y ₹	XX
88314		⋖	Histochemical stain	0.45	1.98	2.05	N	¥ V	0.04	2.47	2.54	NA	¥ ¥	XX
88314		∢ •	Histochemical stain	0.45	0.14	0.18	0.14	0.18	0.02	0.61	0.65	0.61	0.65	X 3
88314	: :	∢ ⊲	Histochemical stain	0.00	1.84 80 C	1.87	A Z	A A	0.02 0.02	3.43	1.89	A N	Z Z	××
88318	26		Chemical histochemistry	0.42	0.12	0.17	0.12	0.17	0.02	0.56	0.61	0.56	0.61	X
88318	2		`	0.00	2.85	1.82	Ϋ́	¥ à	0.01	2.86	1.83	Z Z	¥ ž	X
88319	. 90	∢ <	Enzyme histochemistry	0.53	3.25	3.38	N C	A C	40.0	3.82	3.95	Z C	AN C	××
88319		(∢	Enzyme histochemistry	0.00	3.10	3.18	N N	S.S.	0.02	3.12	3.20	S A	S S	XX
88321		⋖	Microslide consultation	1.63	0.73	0.78	0.47	0.54	0.02	2.41	2.46	2.15	2.22	XX
88323		∢ <			2.21	1.89	N S	N S	0.07	4.11	3.79	NA S	A S	× }
88323	 O Z	۲ ۷	Microslide consultation	8.0	1.76	135	0.45 AA	4 N	0.00	1.33	1.37	NA NA	2.4Z	ž×
		< <	Comprehensive review of data	2.50	2.24	2.77	0.61	0.87	0.07	4.81	5.34	3.18	3.44	X
88329		∢ <		0.67	0.68	0.66	0.20	0.27	0.02	1.37	1.35	0.89	96:0	× }
88331	26		Path consult intraop, 1 bloc	<u> </u>	0.36	0.47	0.36	0.47	0.00	15.5	1.70	1.59	¥ 02	ž×
	12		Path consult intraop, 1 bloc	0.00	0.87	0.66	Z A	Ž	0.04	0.91	0.70	Z Y	Y Z	X
88332	: 6	∢ <	Path consult intraop, addll	0.59	0.47	0.46	Z Z	A S	0.0	1.10	1.09	NA S	¥ S	X }
88332	TC C	< ∢	Path consult intraop, addll	000	0.29	0.23	Y Z	S AN	0.02	0.78	0.25	NA NA	9. S	ž×
:	: !	< <		1.20	1.34	1.15	Z Y	Ž Ž	0.08	2.62	2.43	Z V	¥ X	X
88333		∢ •	- 1	1.20	0.37	0.49	0.37	0.49	0.04	1.61	1.73	1.61	1.73	X 3
88333	<u>:</u>	∢ ⊲	Intraop cyto path consult, 1	0.00	0.97	0.66	Z Z	Z Z	40.0 40.0	1.01	1.27	A N	4 4 2 2	××
88334	26	< ∢		0.59	0.17	0.24	0.17	0.24	0.02	0.78	0.85	0.78	0.85	X
88334	TC	∢.	Intraop cyto path consult, 2	0.00	0.57	0.40	¥:	¥:	0.02	0.59	0.42	Y :	¥:	X
88342	26	∢ ⊲	Immunohistochemistry	0.85	2.03	1.60	A C	N C	0.05	2.93	2.50	A C	₹ <u>5</u>	××
88342		< ∢	Immunohistochemistry	0.00	1.81	1.28	N A	Z Y	0.02	1.83	1.30	Ž	Z V	X
88346		⋖ -	Immunofluorescent study	0.86	1.96	1.67	N A	Y Y	0.02	2.87	2.58	N	¥.	X
88346	26		Immunofluorescent study	0.86	0.23	0.33	0.23	0.33	0.03	1.12	1.22	1.12	1.22	×
88347	د	∢ ∢	Immunofluorescent study	0.80	1.34	45.1 1.28	¥ ¥	¥ ¥	0.02	2.25	2.19	Z Z	¥ ¥	žž
88347	26			0.86	0.19	0.31	0.19	0.31	0.03	1.08	1.20	1.08	1.20	XX
88347	TC		Immunofluorescent study	0.00	1.16	0.97	NA	NA	0.05	1.18	0.99	NA	NA	XX
TOO!	000	de o cu oterini	Signature A Locale of A marine and A DOO television of the selection of th	delia II A	V 100 m	/ L	ָרָ בְּיִבְּיִבְּיִבְּיִבְּיִבְּיִבְּיִבְּיִ							

ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

קל	FINDOM	<u>-</u> -	ADDENDOM D NECATIVE VALOE ONITS (11009) AND I	ורר רי די		5	j 		ן וייניטיין א	-		1007		j
CPT 1 HCPCS ²	Mod	Status	Description	Physician work RVUs ³	Fully implemented non-facility PE	Year 2007 transi- tional non-facil- ity PE RVUs	Fully implemented facility	Year 2007 transi- tional fa- cility PE RVUs	Mal-prac- tice RVUs	Fully im- plement- ed non- facility total	Year 2007 transi- tional non-facil- ity total	Fully implemented facility	Year 2007 transi- tional fa- cility total	Global
88348	26	۷ ۷	Electron microscopy	1.5.1	18.07	11.55	NA 0.40	NA 0.58	0.13	19.71	13.19	NA 1.97	NA 2.15	××
88348	2		Electron microscopy	0.00	17.67	10.97	Ϋ́	¥ S	0.07	17.74	11.04	¥ :	Ϋ́	XX
88349	26	∢ ∢	Scanning electron microscopy	0.76	8.90	0.30	0.22	0,30	0.09	1.01	5.75	A 10.	4 N	××
	2	< -	Scanning electron microscopy	0.00	8.69	4.60	N S	¥.	0.00	8.75	4.66	¥ Z	Y.	×
88355		∢	Analysis, skeletal muscle	1.85 78.78	3.37	7.44	N O	A O	0.13	5.35	9.42	NA 5.	NA F3	××
88355			Analysis, skeletal muscle	0.0	2.98	6.75	S Z	S Z	0.00	3.04	6.81	S N	S N	XX X
88356	. 9	∢ ◊	Analysis, nerve	3.02	6.64	4.80	NA 25	Y S	0.19	9.85	8.01	A S	NA 80 L	××
88356		(∢	Analysis, nerve	0.00	5.88	3.67	NA NA	<u>†</u> ₹	0.07	5.95	3.74	S.S.	AN AN	₹×
		⋖ ·	Analysis, tumor	0.95	1.12	0.91	N A	A S	0.17	2.24	2.03	¥.	AN S	X
88358	26 .	∢ <	Analysis, tumor	0.95	0.16	0.34	0.16	0.34	0.10	1.2	1.39	1.21	1.39	× }
88360		(∢	Tumor immunohistochem/manual	1.10	2.31	1.88	ΣŽ	₹₹	0.08	3.49	3.06	¥ ₹	ξŞ	₹×
			Tumor immunohistochem/manual	1.10	0.27	0.45	0.27	0.42	90.0	1.43	1.58	1.43	1.58	××
88360			Tumor immunohistochem/manual	0.00	2.03	1.45	Ϋ́	¥ ż	0.05	2.05	1.47	¥ S	Y S	×
88361			Tumor immunohistochem/comput	. t	2.76	2.96	N O	NA 0.43	71.0	1 4.1 1 53	1 7 1	- 53 &	NA 171	××
88361			Tumor immunohistochem/comput	0.0	2.51	2.53	NA AN	Z Z	0.07	2.58	2.60	8 ₹	¥ E Z	×××
88362	-		Nerve teasing preparations	2.17	5.23	4.83	¥Z	Ϋ́	0.15	7.55	7.15	¥	¥Z	XX
88362	26	∢ <	Nerve teasing preparations	2.17	0.58	0.84	0.58	0.84	0.09	2.84	3.10	2.84	3.10	× ×
88365	<u>:</u> د	< <	Nerve teasing preparations	1.20	2.95	2.34	¥ ¥	¥ ¥	0.00	4.70	3.59	₹ ₹	¥ ¥	XX
		< <	Insitu hybridization (fish)	1.20	0.24	0.44	0.24	0.44	0.03	1.47	1.67	1.47	1.67	×
88365				0.00	2.71	1.89	Ϋ́	¥:	0.02	2.73	1.91	¥:	¥ ?	X
88367	26		Insitu hybridization, auto	 	5.27	4.35	0.22	NA 0.46	21.0	6.69	5.77	AN 1.	1.82	××
	1	⋖	Insitu hybridization, auto	0.00	2.05	3.89	Y S	¥	0.00	5.11	3.95	¥	Y S	×
88368	9		Insitu hybridization, manual	1.40	4.79	3.00	N S	A C	0.12	6.31	4.52	NA F	A S	××
88368			Insitu hybridization, manual	0.00	4.58	2.50	NA AN	S.S.	0.00	4.64	2.56	è Z	S A	₹×
	26 .	∢.	Protein, western blot tissue	0.37	0.10	0.12	0.10	0.12	0.01	0.48	0.50	0.48	0.50	X
88372		∢	Protein analysis w/probe	0.37	0.11	0.15	0.11 NA	0.15 NA	0.01	0.49	0.53	0.49 NA	0.53 NA	××
88385	26	< <	Eval molecul probes, 51–250	1.50	0.22	0.54	0.22	0.54	0.06	1.78	2.10	1.78	2.10	X
88385		⋖ <	Eval molecul probes, 51–250	0.00	14.44	8.45	Ϋ́	¥ ž	0.06	14.50	8.51	¥ ž	¥ S	×
88386	26	< <	Eval molecul probes, 231–300	8 8 8	0.28	0.69	0.28	69.0	0.08	2.24	2.65	2.24	2.65	ž×
	12	<	Eval molecul probes, 251–500	0.00	14.28	8.24	N A	¥ Y	0.08	14.36	8.32	Į Ž	N A	X
89049	: 6	⋖ <	Chet for mal hyperthermia	1.40	3.59	3.57	0.18	0.25	0.06	5.05	5.03	49.5	1.71	× }
89100	07	< <	Sample intestinal contents	0.60	9.16	3.67	0.62	0.31	0.03	9.79	4.30	1.25	0.94	₹×
89105		⋖ .	Sample intestinal contents	0.50	7.70	3.60	0.45	0.24	0.05	8.22	4.12	0.97	0.76	×
89130		∢	Sample stomach contents	0.45	6.96	3.05	0.40	0.20	0.02	7.43	3.52	0.87	0.67	××
89135		< <	Sample stomach contents	0.79	9.15	3.71	0.70	0.36	0.0	9.68	4.54	1.53	1.19	X
89136		∢.	Sample stomach contents	0.21	7.05	3.07	0.32	0.15	0.01	7.27	3.29	0.54	0.37	X
89140		∢ ⊲	Sample stomach contents	0.94	0.8 7.0 7.0	3.50	0.49	0.33	40.0	6.79	4.25	4. 60		X X
89220		(∢	Sputum specimen collection	0.00	0.36	0.41	. Z	N S	0.02	0.38	0.43	S S	Z Z	XX
						1 :					1			

¹CPT codes and descriptors only are copyright 2005 American Medical Association. All rights reserved. Applicable FARS/DFARS apply. ²Copyright 2005 American Dental Association. All rights reserved. ³Indicates RVUs are not used for Medicare payment.

ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

				l i			: :	i						!
CPT 1 HCPCS ²	Мод	Status	Description	Physician work RVUs ³	Fully implemented nonfacility PE	Year 2007 transi- tional non-facil- ity PE RVUs	Fully implemented facility	Year 2007 transi- tional fa- cility PE RVUs	Mal-practice RVUs	Fully im- plement- ed non- facility total	Year 2007 transi- tional non-facil- ity total	Fully implemented facility	Year 2007 transi- tional fa- cility total	Global
89230		∢ ∢	Collect sweat for test	0.00	0.08	0.10	Z Z	A A	0.02	0.10	0.12	Z Z	A A	××
90466		⋖ @	Immune admin addl inj, < 8 y	0.15	0.12	0.13	NA C	A S	0.01	0.28	0.29	AN RC	AN C	ZZZ
90468		c ac		0.15	0.10	0.1	0.03	0.05	0.0	0.26	0.27	0.19	0.21	ZZZ
90471		< <	Ther/proph/diag inj, sc/im	0.17	0.45	0.35	¥ ž	¥ S	0.01	0.63	0.53	¥ ž	Y S	XX
90473		ξ Œ	Immunization admin, each add	0.15	0.12	0.18	0.0 40.0	90:0	0.0	0.34	0.36	0.22	0.24	XX XX
90474		ш.	Immune admin oral/nasal addl	0.15	0.07	0.09	0.03	0.05	0.01	0.23	0.25	0.19	0.21	ZZZ
90761		∢ ∢	Hydration iv infusion, init	0.09 0.09	0.32	0.38	¥ ¥	₹ ₹	0.00	0.45	1.64	₹ ₹	¥ ¥	XXX XXX
		< <	Ther/proph/diag iv inf, init	0.21	1.63	1.73	Ž	A A	0.07	1.91	2.01	¥ Z	¥.	X
90766		∢ ∢	Ther/proph/dg iv inf, add-on	0.18	0.38	0.44	A Z	A A	0.0 4.00	0.60	0.66	A A	A A	777
•		. ∢	Ther/diag concurrent inf	0.17	0.33	0.41	Ž	A A	0.04	0.54	0.62	¥ Z	¥.	ZZZ
90772		∢ ◊	Ther/proph/diag inj, sc/imTher/proph/diag inj is	0.17	0.45	0.35	¥ Z	¥ Z	0.01	0.63	0.53	Y Z	Y Z	××
90774		(∢	Ther/proph/diag inj, ia	0.18	1.35	1.31	₹ ₹	Z Z	0.0	1.57	1.53	ΣŽ	¥ Ž	\X
:		⋖ ·	Ther/proph/diag inj add-on	0.10	0.51	0.56	¥.	A S	0.04	0.65	0.70	A S	AN S	ZZZ
90801		< <	Psy dx interview	2.80	1.43	1.24	0.57	0.84	0.06	4.29	4.10	3.43	3.70	××
90804		< <	Psytx, office, 20-30 min	12.1	0.53	0.50	0.20	0.34	0.03	1.77	1.74	4.	1.58	XX
90805		∢ •	Psytx, off, 20-30 min w/e&m	1.37	0.58	0.52	0.23	0.37	0.03	1.98	1.92	1.63	1.77	X
90806		∢ ∢	Psytx, off, 45-50 min	8. c	0.50	0.65	0.34 1.34	0.53	0.04	2.40	2.55	2.2.2	2.43	××
		< <	Psytx, office, 75-80 min	2.79	0.65	0.94	0.47	0.79	90.0	3.50	3.79	3.32	3.64	×
90809		∢ <	Psytx, off, 75-80, w/e&m	2.95	0.83	0.96	0.50	0.82	0.07	3.85	3.98	3.52	3.84	××
90810		< <	Intac psytx, 20–30 IIIII	1.48 1.48	0.30	09.0	0.25	0.41	0.0	2.22	2.12	5	1.93	₹X
90812		∢ ·	Intac psytx, off, 45-50 min	1.97	0.62	0.75	0.33	0.56	0.04	2.63	2.76	2.34	2.57	X
90813		∢ ∢	Intac psytx, 45-50 min w/e&m	2.13 2.90	0.80	0.78	0.36	0.59	0.05	3.72	2.96 3.98	3.45	3.82	××
:		< <	Intac psytx, 75-80 w/e&m	3.06	96.0	1.03	0.51	0.84	0.07	4.09	4.16	3.64	3.97	X
90816		∢ <	Psytx, hosp, 20–30 min	1.25	₹ Z	Y S	0.31	0.42	0.03	Z Z	Y S	1.59	1.70	×;
90818		< <	Psytx, hosp, 45–50 min w/earn	1.89	Z Z	Z Z	0.41	0.62	0.0	Z Z	Z Z	2.34	2.55	ξ× ×
90819		< <	Psytx, hosp, 45–50 min w/e&m	2.05	¥ ż	Y S	0.45	09.0	0.05	Y S	Y S	2.55	2.70	× š
90822		< <	Psytx, flosp, 75–80 filli	2.99	₹ ₹ Z Z	Z Z	0.57	0.90	0.08	Z Z	Z Z	3.68	3.94	₹×
		<	Intac psytx, hosp, 20-30 min	1.36	N A	N A	0.33	0.44	0.03	N	N A	1.72	1.83	×
90824		∢ <	Intac psytx, hsp 20–30 w/e&m	1.52	₹ S	Y Z	0.36	0.46	0.04	Y Z	Y Z	1.92	2.02	××
90827		< <	Intac psytx, hsp 45–50 w/e&m	2.16	Z Z	Z Z	0.46	0.63	0.05	ZZ	Z Z	2.67	2.84	×××
90828		∢ •	Intac psytx, hosp, 75-80 min	2.94	Y S	Y :	0.59	0.94	0.06	Y S	Y :	3.59	3.94	X
90829		∢ ∢	Intac psytx, nsp /5–80 w/e&m	3.10	NA 0.37	NA 0.53	0.62	0.89	0.0	NA 0	NA 2.36	3.79 7.3	4.06 90.4 0.8	××
90846		. œ	Family psytx w/o patient	1.83	0.49	0.61	0.41	0.59	0.0	2.36	2.48	2.28	2.46	X
90847		<u>د</u> ا	Family psytx w/patient	2.21	0.71	0.79	0.47	69.0	0.05	2.97	3.05	2.73	2.95	X
90849		π «	Multiple family group psytxGroup psychotherapy	0.59	0.30	0.28	0.19	0.23	0.02	0.91	0.89	0.80	0.84	××
			Intac group psytx	0.63	0.35	0.31	0.20	0.24	0.01	0.99	0.95	0.84	0.88	X
90862			Medication management	0.95	09:0	0.45	0.26	0.31	0.05	1.57	1.42	1.23	1.28	×
TOO!	op page	da o o o o da	Circle A Local Annual Control of the	dein II A meit	le como com ot	A Idealla	מם אחלי מכי							

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

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CPT 1 HCPCS 2	Mod	Status	Description	Physician work RVUs ³	Fully implemented non- facility PE RVUs	Year 2007 transi- tional non-facil- ity PE RVUs	Fully implemented facility	Year 2007 transi- tional fa- cility PE RVUs	Mal-prac- tice RVUs	Fully im- plement- ed non- facility total	Year 2007 transi- tional non-facil- ity total	Fully implemented facility	Year 2007 transi- tional fa- cility total	Global
90865		∢ <	Narcosynthesis	2.84	1.16	1.31	0.62	0.84	0.12	4.12	4.27	3.58	3.80	×S
90875		ζZ	Psychophysiological therapy	1.20	0.52	0.81	0.27	0.41	0.0	1.76	2.05	1.51	1.65	3××
		z	Psychophysiological therapy	1.90	99.0	1.04	0.43	99.0	0.05	2.61	2.99	2.38	2.61	×
90880		< □	Hypnotherapy	2.19	0.55	0.92	0.36	0.61	0.05	2.79	3.16	2.60	2.82	×}
90887		۵ ۵	Psy evaluation of records	1.48	0.60	0.33	0.33	0.50	0.0	2.12	2.29	1.85	2.02	žž
		A	Biofeedback train, any meth	0.41	0.48	0.61	0.11	0.13	0.02	0.91	1.04	0.54	0.56	000
90911		∢.	Biofeedback peri/uro/rectal	0.89	1.40	1.52	0.31	0.31	0.06	2.35	2.47	1.26	1.26	000
90918			ESRD related services, month	11.16	4.64 2 9 8	3.75	3.68	2.52	0.38	16.16	17.28	15.20	17.04	××
90920		_	ESRD related services, month	7.26	2.70	3.50	2.23	3.38	0.23	10.19	10.99	9.72	10.87	XX
90921			ESRD related services, month	4.46	1.68	2.26	1.59	2.24	0.14	6.28	6.86	6.19	6.84	× }
90923			Esho lelated services, day	0.28	0.09	0.12	0.08	0.12	0.0	0.38	0.30	0.37	0.57	\ \ \ \
90924		_	Esrd related services, day	0.24	0.09	0.11	0.07	0.11	0.01	0.34	0.36	0.32	0.36	X
90925		_ <	Esrd related services, day	0.15	0.05	0.07	0.05	0.07	0.01	0.21	0.23	0.21	0.23	XX
90935		∢ ∢	Hemodialysis, one evaluation	22.5	4 4 2 Z	Y Z	0.53	0.0 40.0	0.04	Z Z	4 4 2 2	2.79	9.5	900
		< <	Dialysis, one evaluation	1.28	Z Z	Z A	0.55	99.0	0.04	A A	Z	1.87	1.98	000
90947		∢ •	Dialysis, repeated eval	2.16	Y Z	Z Z	0.78	0.94	0.07	A S	Ϋ́	3.01	3.17	000
90997		∢ <	Hemopertusion	86. C	NA S	A S	0.49	0.62	0.06	A C	NA F7	2.39	2.52	000
91000	26	(∢	Esophageal Intubation	0.73	0.24	0.25	0.24	0.25	0.0	1.00) 10.1	5	¥ 6.	88
91000	TC		Esophageal intubation	0.00	1.98	0.56	A V	Ą Z	0.01	1.99	0.57	NA	Ą	000
91010		∢ <	Esophagus motility study	1.25	4.79	4.51	¥!	N N	0.12	6.16	2.88	A S	A F	000
91010	20	(∢	Esophagus motility study	0.00	4.22	4.04	Š Ž	Y A	0.00	4.28	4.10	- N	N N	800
91011			Esophagus motility study	1.50	5.59	5.33	Y Y	A A	0.13	7.22	96.9	NA	N A	000
91011	26		Esophagus motility study	1.50	0.74	0.58	0.74	0.58	0.07	2.31	2.15	2.31	2.15	000
91012	2	< <	Esophagus motility study	1.46	5.78	5.77	₹Ž	ΣŽ	0.00	7.37	7.36	₹₹	ΣŽ	800
91012	26	∢.	Esophagus motility study	1.46	0.72	0.56	0.72	0.56	0.06	2.24	2.08	2.24	2.08	000
91012	<u>:</u>	∢ ⊲	Esophagus motility study	0.00	5.06	5.21 4.66	Ψ Δ Z Z	∀	0.07	5.13	5.28	Z Z	A Z	000
91020	26	< <	Gastric motility studies	4.	0.63	0.53	0.63	0.53	0.07	2.14	2.04	2.14	2.04	000
91020	TC	∢ <	Gastric motility studies	0.00	4.40	61.13	¥ ž	¥ ž	0.06	4.46	4.19	Y S	¥ Z	000
91022	26		Duodenal motility study	1 4	0.63	0.54	0.63	0.57	0.07	2.14	2.05	2.14	2.05	000
	TC		Duodenal motilitý studý	0.00	2.56	3.57	A A	A A	90.0	2.62	3.63	NA	A	000
	9		Acid perfusion of esophagus	0.91	3.03	2.59	A Z	A S	0.06	4.00	3.56	Z S	A S	000
91030			Acid perfusion of esophagus	00.0	0.45	0.33	0.45 AN	0.35 AN	900	2.60	05.9	04. VA	S. A	000
		< ∢	Gastroesophageal reflux test	0.97	5.81	5.39	Ž	¥	0.12	6.90	6.48	N N	¥ N	000
91034	26		Gastroesophageal reflux test	0.97	0.43	0.36	0.43	0.36	0.06	1.46	1.39	1.46	1.39	000
91034	 2 2		Gastroesophageal reflux test	0.00	5.38	5.03	¥ ₹	A A	0.06	13.37	12.75	A N	A N	000
91035	26	< <	G-esoph reflx tst w/electrod	1.59	0.73	0.60	0.73	09.0	0.06	2.38	2.25	2.38	2.25	000
91035	TC	∢.	G-esoph reflx tst w/electrod	0.00	10.93	10.44	¥:	¥:	0.06	10.99	10.50	¥:	¥:	000
9103/	36	∢ <	Esoph imped function test	76.0	3.50	3.08	A Z	NA 37	21.0	4.59	71.4	A L	A C	000
91037	10 10 10	< <	Esoph imped function test	0.00	3.06	2.72	₹ Z	S Z	0.00	3.12	2.78	¥.	- A	800

ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

ADL	JEINDOIN	ADDENDOM B.—RELATIVE	LATIVE VALUE UNITS (AVUS) AND DELATED INFORMATION USED IN	JELA I EU	INTOTAINA MA				DELERMINING IMEDICARE PAYMENTS FOR	1 1 1 1 1 1 1 1 1	בטב עוואו	/007	CONTINUEL	
CPT 1 HCPCS 2	Mod	Status	Description	Physician work RVUs ³	Fully im- plement- ed non- facility PE RVUs	Year 2007 transi- tional non-facil- ity PE RVUs	Fully implemented facility	Year 2007 transi- tional fa- cility PE RVUs	Mal-prac- tice RVUs	Fully im- plement- ed non- facility total	Year 2007 transi- tional non-facil- ity total	Fully implemented facility	Year 2007 transi- tional fa- cility total	Global
91038	26	44	Esoph imped funct test > 1h	1.10	2.85	2.39	NA 0.52	0.42	0.12	4.07	3.61	NA 1.68	1.58	000
91038		∢ ⊲	Esoph imped funct test > 1hFsoph halloon distension tet	0.00	2.32	1.96	A N	A A	0.06	2.38	2.02	A Z	A A	000
91040			Esoph balloon distension tst	0.97	0.39	0.35	0.39	0.35	0.06	1.42	1.38	1.42	1.38	000
91040	10 		sion tst	0.00	9.15	10.40	¥ ž	Y S	0.06	9.21	10.46	¥ Z	¥ Z	000
91052	26		Gastric analysis test	0.79	0.39	2.62	NA 0.39	NA 133	0.05	3.94	3.46	4 L	A 1.	000
	12		Gastric analysis test	0.00	2.71	2.31	Z	¥ Z	0.02	2.73	2.33	Z	Z Z	000
	. 0		Gastric intubation for smear	0.94	2.42	2.82	N C	NA 20	0.07	3.43	3.83	NA P	A S	000
91055			Gastric intubation for smear	0.00	2.15	2.55	NA NA	NA NA	0.02	2.17	2.57	NA AN	S N	888
			Gastric saline load test	0.45	1.64	1.89	Y S	A !	0.05	2.14	2.39	NA.	¥.	000
91060	1 20 1 20		Gastric saline load test	0.45	0.11	0.13	0.11	0.13	0.03	0.59	0.61	0.59	0.61	000
91065	2		Gastilic saillife load test	0.20	65.1	1.44	₹ ₹	ΣŽ	0.03	1.62	1.67	₹ ₹	₹ ₹	88
91065	-		Breath hydrogen test	0.20	0.07	0.07	0.07	0.07	0.01	0.28	0.28	0.28	0.28	000
91065			Breath hydrogen test	0.00	1.32	1.37	¥ S	Y S	0.02	1.34	1.39	¥.	¥.	000
			Pass intestine bleeding tube	1.08	2.15	2.64	0.37	0.30	0.07	3.30	3.79	1.52	1.45	000
91110			Gi tract capsule endoscopy	3.64	21.22	21.99). A	SO:O	0.03	25.02	25.79	4.0 AN	0.43 NA	3 ×
	-		Gi tract capsule endoscopy	3.64	1.74	1.40	1.74	1.40	0.09	5.47	5.13	5.47	5.13	×
	2		Gi tract capsule endoscopý	00.0	19.48	20.59	A A	NA	0.07	19.55	20.66	NA	¥	××
91120			Rectal sensation test	0.97	9.15	10.55	A S	A S	0.11	10.23	11.63	¥ S	¥!	X
	7 Kg		Rectal sensation test	0.97	0.30	0.33	0.30	0.33	0.07	1.34	1.37	45.L	1.37	××
91122			Anal pressure record	1.7	3.83	4.79	¥ ¥	ΣŽ	0.2	5.81	6.77	₹ ₹	₹ ₹	8
			Anal pressure record	1.77	0.52	0.58	0.52	0.58	0.13	2.42	2.48	2.42	2.48	000
91122	22.6	∢ •	Anal pressure record	0.00	3.32	4.21	N S	A S	0.08	3.40	4.29	A S	¥ į	000
91132	56		Electrogastrography	0.52	0.27	0.20	0.27	0.20	0.02	1.81	0.74	1 00	0.74	××
92002	3 :		Eve exam, new patient	0.88	96:0	0.97	0.26	0.32	0.02	1.86	1.87	1.16	1.22	×××
		_	Eye exam, new patient	1.67	1.57	1.67	0.52	0.64	0.04	3.28	3.38	2.23	2.35	××
92012			Eye exam established pat	0.67	0.93	1.01	0.23	0.28	0.02	1.62	1.70	0.92	0.97	× š
92014			Eye exam & rearment	0 . 0	1.30	0.5 4.	0.30	44.0	0.00	24.5	1.01	94	1.57	XX
			New eye exam & treatment	2.50	A N	Z	0.88	1.02	0.07	N A	N A A	3.45	3.59	X
92019			Eye exam & treatment	1.31	A A	Ν	0.45	0.53	0.03	Y Y	¥	1.76	1.87	XX
92020			Special eye evaluation	0.37	0.25	0.32	0.13	0.15	0.01	0.63	0.70	0.51	0.53	X
92060	96		Special eye evaluation	69.0	0.77	0.74	NA NA	N C	0.03	94.1	0.40	AN C	AN C	ž ž
92060			Special eye evaluation	0.00	0.55	0.47	NA AN	NA NA	0.0	0.56	0.48	AN AN	85.9 AN	XX
			Orthoptic/pleoptic training	0.37	0.87	0.62	A A	NA	0.05	1.26	1.01	NA	NA	××
92065	26		Orthoptic/pleoptic training	0.37	0.09	0.14	60.0	0.14	0.0	0.47	0.52	0.47	0.52	× š
92065		_	Urnoptic/pleoptic training	0.00	0.78	84.0	A C	AN C	0.0	0.79	0.49	NA	A S	X }
92081			Visual field examination(s)	0.36	0.96	0.95	NA AN	NA A	0.02	1.34	1.33	S N	- N	{×
92081	26		Visual field examination(s)	0.36	0.11	0.14	0.11	0.14	0.01	0.48	0.51	0.48	0.51	X
92081	70			0.00	0.85	0.81	¥.	Y Y	0.01	0.86	0.82	¥.	¥	××
	: 0			0.0	1.34	1.26	¥ 5	Z S	0.02	1.80	1.72	A G	A S	×;
32002		_	AIIOLI (44.0		9	7.0	0.0	0.0	60.0	0.03	0.09	0.03	XX
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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

אַר	FINDOW	<u>:</u> د	ADDENDOM D: ILLEATIVE VALOE ONITS (11005) AND	ורר י י		000	ز : ا		וייין)	,		١
CPT 1 HCPCS 2	Мод	Status	Description	Physician work RVUs ³	Fully implemented non-facility PE	Year 2007 transi- tional non-facil- ity PE RVUs	Fully implemented facility	Year 2007 transi- tional fa- cility PE RVUs	Mal-practice RVUs	Fully implemented nonfacility total	Year 2007 transi- tional non-facil- ity total	Fully implemented facility	Year 2007 transi- tional fa- cility total	Global
92082	TC	۷ ۷	Visual field examination(s)Visual field examination(s)	0.00	1.20	1.08	A A	A N	0.01	1.21	1.09	A S	A A	××
92083	26			0.50	0.17	0.21	0.17	0.21	0.01	0.68	0.72	0.68	0.72	X
92083	<u>ن</u>	∢ ∢	Visual field examination(s)	0.00	1.3/	133	0.28	0.34	0.0	2.20	1.26	122	NA 1	ž×
		< <	Tonography & eye evaluation	0.81	66:0	1.05	0.25	0.30	0.02	1.82	1.88	1.08	1.13	X
		∢ <	Water provocation tonography	0.81	1.19	1.26	0.27	0.35	0.02	2.02	2.09	1.10	1.18	× }
92135	26	∢ ∢	Optnalmic dx imaging	0.35	0.80	0.79	0.12	0.14	0.02	0.48	0.50	0.48	0.50	žž
	TC	Α.	Opthalmic dx imaging	0.00	0.68	0.65	¥.	N S	0.01	0.69	0.66	N S	¥.	X
92136	96	∢	Ophthalmic biometry	0.54	1.41	1.59	AN C	N O	0.08	2.03	2.21	NA V	A C	××
92136	1 2 2 2 1	< <	Ophthalmic biometry	0.0	1.22	1.36	2 S	NA NA	0.07	1.29	1.43	Z Z	S Z	××××××××××××××××××××××××××××××××××××××
92140		⋖	Glaucoma provocative tests	0.50	0.91	0.97	0.15	0.20	0.01	1.42	1.48	99.0	0.71	XX
92225		∢ ∢	Special eye exam, initial	0.38	0.18	0.21	0.12	0.15	0.0	0.57	0.60	0.51	0.54	××
92230		< <	Eye exam with photos	0.60	0.69	1.32	0.20	0.20	0.02	1.31	1.94	0.82	0.82	X
			Eye exam with photos	0.81	2.27	2.53	Ϋ́	¥	0.08	3.16	3.42	Ϋ́	Ϋ́	××
92235	26		Eye exam with photos	0.81	0.29	0.35	0.29	0.35	0.02	1.12	1.18	1.12	1.18	× }
92240	<u>ا</u> د		Eye exam with photos	1.10	90 4.43	5.70	¥ ¥	₹ ₹	0000	5.62	6.89	¥ ¥	¥ ¥	ž
	26		lcg angiography	1.10	0.40	0.48	0.40	0.48	0.03	1.53	1.61	1.53	1.61	X
92240	10		lcg angiography	0.00	4.03	5.22	₹:	¥ ?	0.06	4.09	5.28	¥:	¥:	X
92250	90		Eye exam with photos	0.4 4 4	1.31	2.48	A Z	A C	0.02	7./ 050	1.94	NA PA	N C	××
92250	2		Eye exam with photos	0.0	1.16	1.30	† X	8 Z	0.0	1.17	1.31	8.5 X	8. Z	ξ××
			Ophthalmoscopy/dynamometry	0.20	0.19	0.24	0.07	0.09	0.01	0.40	0.45	0.28	0.30	××
92265	90		Eye muscle evaluation	0.81	0.99	1.37	N S	NA 20	0.06	1.86	2.24	A S	A C	× }
92265	22		Eye muscle evaluation	0.00	0.76	1.10	S A	Š.S A	0.02	0.78	1.1	<u>8</u> ₹	¥ \	XX
			Electro-oculography	0.81	1.41	1.50	¥.	¥.	0.02	2.27	2.36	Ϋ́	¥ Y	XX
92270	26		Electro-oculography	0.81	0.24	0.31	0.24	0.31	0.03	1.08	1.15	1.08	1.15	× š
92275	2	۷ ح	Electro-oculography	1.01	2.45	2.07	₹ ₹	₹ ₹	0.02	3.51	3.13	ΣŹ	₹ ₹	ξ××
92275	26	∢.	Electroretinography	1.01	0.35	0.41	0.35	0.41	0.03	1.39	1.45	1.39	1.45	X
92275	ည	∢	Electroretinography	0.00	2.10	1.66	Z Z	¥ Z	0.02	2.12	1.68	A Z	Z Z	××
92283	26		Color vision examination	0.17	0.05	0.07	0.05	0.07	0.01	0.23	0.25	0.23	0.25	X
	TC		Color vision examination	0.00	0.95	0.82	¥ :	¥:	0.01	0.96	0.83	¥:	¥ :	X
92284	26		Dark adaptation eye exam	0.24	0.08	0.08	80°0	0.08	0.02	0.33	98 0.33	0.33	NA 0.33	ž
	2		Dark adaptation eye exam	0.00	1.14	1.64	¥	¥ Y	0.01	1.15	1.65	¥	¥	X
92285		∢ •	Eye photography	0.20	0.81	0.95	¥ ¿	A S	0.02	1.03	1.17	Ϋ́	Ϋ́	X
92285	92 L	∢ ⊲	Eye photography	0.20	0.07	0.09)0:0 VN	90.0 NA	0.0	0.28	0.30	87.0 NA	05.0 AN	ž
92286	2		Internal eye photography	0.66	2.14	2.83	₹ Ž	₹	0.0	2.84	3.53	ž Ž	₹ Z	X
92286	26	⋖ ·	Internal eye photography	0.66	0.23	0.28	0.23	0.28	0.05	0.91	0.96	0.91	96.0	X
92286	ည		Internal eye photography	0.00	1.92	2.56	A S	A S	0.02	1.94	2.58	A C	A F	××
92310		Z	Contact lens fitting	1.17	1.05	1.10	0.26	0.40	0.0	2.26	2.31	1.47	1.61	××××××××××××××××××××××××××××××××××××××
92311		A	Contact lens fitting	1.08	1.28	1.14	0.31	0.34	0.03	2.39	2.25	1.42	1.45	XX
H ()	-					:								

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

ADL	FINDOIN	ADDENDOM B.——DELATIVE	VALUE UNITS (NVOS) AI	חבראובט	ND DELATED INFORMATION OSED IN DETERMINING MEDICARE FAYMENTS	10N C OF		ייייייייייייייייייייייייייייייייייייייי	ב כייחווי] - -	בטר טואו	/007		
CPT 1 HCPCS 2	Mod	Status	Description	Physician work RVUs ³	Fully im- plement- ed non- facility PE RVUs	Year 2007 transi- tional non-facil- ity PE RVUs	Fully implemented facility	Year 2007 transi- tional fa- cility PE RVUs	Mal-prac- tice RVUs	Fully im- plement- ed non- facility total	Year 2007 transi- tional non-facil- ity total	Fully implemented facility	Year 2007 transi- tional fa- cility total	Global
92312		A	Contact lens fitting	1.26	1.48	1.18	0.34	0.46	0.03	2.77	2.47	1.63	1.75	××
92313		∢:	Contact lens fitting	0.92	1.46	1.16	0.32	0.30	0.02	2.40	2.10	1.26	1.24	×
92314		z	Prescription of contact lens	0.69	1.13	0.99	0.15	0.24	0.01	1.83	1.69	0.85	0.94	×
92315		< <	Prescription of contact lens	0.45	1.33	0.97	0.13	0.15	0.01	1.79	1.43	0.59	19.0	× }
92316		< <	Prescription of contact lens	0.08	1.00	0 - 1	0.73	0.28	0.02	2.30	08.1 CR.	0.93	0.98	X
92325		(∢	Modification of contact lens	9.0	24 78.0	15.0	2 Z	0 A	9.0	0.85	0.52	0.33	- AN	XXX
		< <	Replacement of contact lens	00.00	0.75	1.41	Ž	₹ Z	0.06	0.81	1.47	Ž	_ Z	×
92340		z	Fitting of spectacles	0.37	0.44	0.64	0.08	0.13	0.01	0.82	1.02	0.46	0.51	X
92341		z	Fitting of spectacles	0.47	0.46	0.67	0.11	0.16	0.01	0.94	1.15	0.59	0.64	X
92342		Zı	Fitting of spectacles	0.53	0.48	0.69	0.12	0.19	0.01	1.02	1.23	0.66	0.73	X
92352		<u></u>	Special spectacles fitting	0.37	0.56	0.65	0.08	0.13	0.01	0.94	1.03	0.46	0.51	×
92354		ם מ	Special speciacles litting	0.50	0.09	0.70	- N). N	0.02	- 0	- 77 - 78 - 78 - 78 - 78	0.0 NA	90.0 V	ž×
92355			Special spectacles fifting	00.0	0.44	3.37	Ψ Z	A Z	0.01	0.45	333	¥ Z	Y Z	×××
		В	Eye prosthesis service	0.00	0.23	0.79	A V	A V	0.05	0.28	0.84	A A	A N	××
92370		z	Repair & adjust spectacles	0.32	0.39	0.51	0.07	0.12	0.05	0.73	0.85	0.41	0.46	××
92371		<u> </u>	Repair & adjust spectacles	0.00	0.24	0.53	Υ Σ	Υ Υ	0.05	0.26	0.55	A A	A A	×
92502		⋖ -	Ear and throat examination	1.51	ΥZ	Y Z	0.76	1.02	0.05	Y Y	A V	2.32	2.58	000
92504		< •	Ear microscopy examination	0.18	0.55	0.51	0.05	0.08	0.01	0.74	0.70	0.24	0.27	×
92506		< <	Speech/hearing evaluation	0.86	3.25	2.76	42.0	0.36	0.03	4.14	3.65	21.13	62. L	ž Š
•		(∢	Speech/hearing therapy	0.02	00	5.5	± &	2.0	20.0	27.0	70 87.0	0.00	0.73	XXX
92511		(∢	Speciality and approximately supported to the support of the suppo	0.20	20.0	. e.	09.0	0.74	0.0	3.76	4.08	1.47	1.61	500
		< <	Nasal function studies	0.55	0.93	1.09	0.15	0.17	0.05	1.50	1.66	0.72	0.74	××
		⋖	Facial nerve function test	0.43	1.14	1.19	0.12	0.20	0.01	1.58	1.63	0.56	0.64	××
92520		⋖	Laryngeal function studies	0.75	0.93	0.62	0.24	0.35	0.03	1.71	1.40	1.02	1.13	××
92526		< <	Oral function therapy	0.55	1.68	1.65	0.16	0.19	0.05	2.25	2.22	0.73	0.76	X }
92541	96		Spontaneous nystagmus test	0.40	41.1	1.06	A F	A C	40.0	1.58	1.50	NA S	NA P	ž ž
92541			Spontaneous hystagillus test	900	- 0	080	- AZ	A Z	20.0	40.1	16.0	S.S.	S AN	XXX
		<	Positional nystagmus test	0.33	1.28	1.18	Y Y	Ž	0.03	1.64	1.54	Z Z	A N	X
92542	26	⋖	Positional nystagmus test	0.33	60.0	0.14	60.0	0.14	0.01	0.43	0.48	0.43	0.48	××
92542	1 2 2	⋖・	Positional nystagmus test	0.00	1.18	1.03	Y Z	₹:	0.02	1.20	1.05	¥:	Y S	ž š
92543	90	< <	Caloric Vestibular test	0.70	0.65	0.59	Z C	NA PO C	0.02	0.7	0.71	A F	N C	×;
•	 O L	< ⊲	Caloric vestibular test	2 6	0.03	0.03	0.02 AN	0.03	0.0	0.0	0.10	0. U	0 N	XXX
92544)	< <	Optokinetic nystaamus test	0.26	1.04	0.94	Ž	Ž	0.03	1.33	1.23	Ź	Ž	×
	26	⋖	Optokinetic nystagmus test	0.26	0.07	0.11	0.07	0.11	0.01	0.34	0.38	0.34	0.38	××
92544	TC	⋖	Optokinetic nystagmus test	0.00	96.0	0.83	N A	N A	0.05	0.98	0.85	A A	Y Y	××
92545		⋖・	Oscillating tracking test	0.23	1.01	0.85	N S	¥ ;	0.03	1.27	1.1	N S	N S	X S
92545	92	< <	Oscillating tracking test	0.23	0.06	0.10	90.0	00	0.0	0.30	0.34	0.30	48.0	×;
92343	: :	< ⊲	Oscillating tracking test	0.00	0.93	1.06	₹ ₹	₹ 4	0.02	0.97	0.70	₹ 2	₹	< >
92546	26	(∢	Sinusoidal rotational test	0.29	0.08	0.12	0.08	0.12	0.0	0.38	0.42	0.38	0.42	ž Ž
	12	< <	Sinusoidal rotational test	0.00	1.78	1.84	Z Y	Z	0.02	1.80	1.86	¥Z	Z Z	×
		⋖	Supplemental electrical test	0.00	0.11	0.09	Ϋ́Z	¥	90.0	0.17	0.15	NA	Ϋ́Z	222
92548		⋖	Posturography	0.50	1.68	2.12	Y Y	Y Y	0.15	2.33	2.77	A A	Y Y	××
92548	26	< •	Posturography	0.50	0.14	0.23	0.14	0.23	0.05	0.66	0.75	0.66	0.75	×
92548	 ၁	< <	Posturography	0.00	1.54	1.89	¥ S	Ψ Υ	0.13	1.67	2.02	¥ Ş	Y Y	×;
92553			Fure torie audiometry, all	9 6	0.38	0.47	Z Z	Z Z	90.0	0.00	0.23	Z Z	χ	XX
1 H	7	⊣ ;	V											

ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

	בי וויסטוווסטר		TIELATIVE VALUE (IIVOS) AND I	ובראובה)			ואכוטוואן	_		7007		3
CPT 1 HCPCS 2	Mod	Status	Description	Physician work RVUs ³	Fully implemented non- facility PE RVUs	Year 2007 transitional non-facil- ity PE RVUs	Fully implemented facility	Year 2007 transi- tional fa- cility PE RVUs	Mal-practice RVUs	Fully implemented nonfacility total	Year 2007 transi- tional non-facil- ity total	Fully implemented facility total	Year 2007 transi- tional fa- cility total	Global
92555 92556		44	Speech threshold audiometrySpeech audiometry, complete	0.00	0.38	0.38	A A	A Z Z	0.04	0.42	0.42	A N N	Y Z Z	XXX
92557		4 4	Comprehensive hearing test	00.0	1.25	1.21	Y Y	Y Y	0.12	1.37	1.33	Y Z	4 4 2 2	××
		< <	Loudness balance test	0.00	0.67	0.48	¥ ¥	Z Z	0.04	0.71	0.52	Ž	A A	X
92563		∢ ◊	Tone decay hearing test	0.00	0.51	0.41	¥ Z	Y Z	0.0 40.0	0.55	0.45	A N	A N	××
92565		(∢	Stenger test, pure tone	0.00	0.26	0.37	₹ Ž	¥ Ž	9.0	0.30	0.41	ΣŽ	ΣŽ	₹×
92567		∢ •	Tympanometry	0.00	0.49	0.51	¥:	Y S	0.06	0.55	0.57	¥:	¥2	X
92568		∢ ∢	Acoustic refl threshold tst	00.0	0.15	0.32	Z Z	A A	0.0 40.0	0.10	0.36	A Z	A A	××
		< <	Filtered speech hearing test	0.00	0.40	0.39	Z Y	¥ X	0.04	0.44	0.43	NA	Z Y	X
92572		∢	Staggered spondaic word test	0.00	0.60	0.22	¥ ₹	¥ ₹	0.00	0.61	0.23	A N	A N	××
92575		< <	Sensorineural acuity test	0.00	1.09	0.50	₹ Ž	Z Z Z	0.02	1.1	0.52	¥ X	Y Y	X
92576		< <	Synthetic sentence test	0.00	0.53	0.46	¥ ž	Z Z	0.02	0.58	0.51	¥ ž	Ϋ́	××
925//		∢ ⊲	Stenger test, speech	00.0	0.27	0.61	₹ 4	Z Z	0.07	0.34 4.00 0.34	0.68	¥ Z	∀	XX
92582		(∢	Conditioning play audiometry	00.0	1.07	0.82	₹₹	Z Z	90:0	1.13	0.88	₹₹	ΣŽ	₹×
92583		∢.	Select picture audiometry	0.00	0.69	0.84	¥:	Z :	0.08	0.77	0.92	¥:	¥:	X
92584		∢ ∢	Electrocochleography	0.00	1.25	2.17	₹ ₹	A A	0.21	1.46	2.38	A Z	A Z	××
92585	26	< <	Auditor evoke potent, compre	0.50	0.15	0.20	0.15	0.20	0.03	0.68	0.73	0.68	0.73	×
92585	TC	∢ <	Auditor evoke potent, compre	0.00	1.82	1.85	¥ ž	Z Z	0.14	1.96	1.99	¥ ž	Y S	××
92587		۷ ۵	Auditor evoke potent, limit	0.00	39 61	4 /: -	4 4 2 Z	Y Z	. c	- C	1.88	Y Y	4	ž×
92587	26		Evoked auditory test	0.13	0.03	0.05	0.03	0.05	0.01	0.17	0.19	0.17	0.19	X
92587	TC		Evoked auditory test	0.00	0.57	1.13	¥ Ž	Y Z	0.0	0.68	1.24	A Z	A Z	××
92588	26	(∢	Evoked auditory test	0.36	0.10	0.15	0.10	0.15	0.0	0.47	0.52	0.47	0.52	ξ× ×
92588	TC	∢ •	Evoked auditory test	0.00	0.93	1.34	₹ Z	¥ Z	0.13	1.06	1.47	Ϋ́	Ϋ́	×
92597		< <	Cral speech device eval	0.00	1.67	0.00	0.24	0.40	0.00	0.39	2.58	1.13	4 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	X X
		< <	Cochlear implt f/up exam < 7	0.00	4.82	3.84	Z Y	A N	0.07	4.89	3.91	NA	Z Y	X
92602		∢ <	Reprogram cochlear implt < 7	00.0	3.31	2.62	₹ ź	Z Z	0.07	3.38	2.69	¥ ž	Z Z	× >
92604		(∢	Reprogram cochlear implt 7 >	0.00	2.07	1.53	₹Ž	₹ ₹	0.07	2.14	1.60	ΣŽ	Z Z	ξ× ×
92607		< •	Ex for speech device rx, 1hr	0.00	4.20	3.37	¥:	Z S	0.05	4.25	3.42	¥ i	Ϋ́	X
92608		< <	Ex for speech device fx addl	00.0	0.83	1.76	₹ ₹ 2	Y Y	0.00 0.00	2.31	1.80	¥ ¥	¥ ¥	ž×
•		< <	Evaluate swallowing function	0.00	1.61	2.98	Ž	Z	0.08	1.69	3.06	Ž	Y Y	×
•		∢ <	Motion fluoroscopy/swallow	0.00	1.93	3.06	AN C	NA	0.08	2.01	3.14	NA P	A S	× }
92613		< <	Endoscopy swallow tst (fees)	0.71	0.22	0.36	0.33	0.35	0.09	0.98	1.12	0.98	 1.1.	₹×
92614		∢.	Laryngoscopic sensory test	1.27	2.21	2.44	0.35	0.58	0.04	3.52	3.75	1.66	1.89	X
92615		∢ ∢	Eval laryngoscopy sense tst	0.63	0.17	3.27	0.17	0.31	0.05	0.85	0.99	0.85	0.99	××
		< <	Interprit fees/laryngeal test	0.79	0.22	0.39	0.22	0.39	0.05	1.06	1.23	1.06	1.23	X
92620		∢ <	Auditory function, 60 min	0.00	1.85	1.32	¥ Ž	Y Z	0.06	1.91	1.38	A Z	Y Z	XX
92625		(∢	Tinnitus assessment	0.00	1.80	1.29	₹ Z	Z Z	90:0	1.86	1.35	₹Ž	ΣŽ	‡×
92626		۷	Eval and rehab status	00.00	1.83	2.11	A A	NA	90.0	1.89	2.17	NA	NA	XX
	-				•	:	() () () () () () () () () ()							

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

		ADDENDOM D LIELALIVE	IN OSED VINITA (IIVOS) AND LIEERIED INFORMATION OSED IN	ובראובה	לואור) בואור)			/	ואור כל	ייייוע - שר	DELENIMINA INTENIORE I ATMENIA FOR	1007	OOMINOED	ב ב
CPT 1 HCPGS 2	Mod	Status	Description	Physician work RVUs ³	Fully implemented nonfacility PE	Year 2007 transi- tional non-facil- ity PE RVUs	Fully implemented facility	Year 2007 transi- tional fa- cility PE RVUs	Mal-prac- tice RVUs	Fully im- plement- ed non- facility total	Year 2007 transi- tional non-facil- ity total	Fully im- plement- ed facility total	Year 2007 transi- tional fa- cility total	Global
92627		4	Eval aud status rehab add-on	0.00	0.42	0.52	NA	A	0.02	0.44	0.54	NA	NA	ZZZ
92950		∢ <	Heart/lung resuscitation cpr	3.79	3.22	3.96	0.75	0.92	0.28	7.29	8.03	4.82	4.99	000
92953		∢ ∢	Terriporary external pacing	0.43 2.55	4 4 4 9	NA 5.87	1.07	1.07	0.02	681 184	A 19	3 82	3.57	
		< <	Cardioversion, electric, int	4.59	Y Z	Z Z	2.55	2.21	0.29	Y Z	A N	7.43	7.09	000
92970		⋖	Cardioassist, internal	3.51	Y Y	A N	1.65	1.21	0.16	Y Y	Ą Ą	5.35	4.88	000
92971		⋖・	Cardioassist, external	1.77	Y ?	¥:	1.10	0.91	0.06	¥:	¥ :	2.93	2.74	90
92973		∢ <	Percut coronary thrombectomy	3.28	₹ S	Υ	1.83	1.43	0.23	Υ Z	Y S	5.34	4.94	777
92975		۲ ላ	Dissolve clot heart vessel	3.00 7.24	X Z	Z Z	96 8	. c.	0.50	(4 2 Z	X A	11 70	10.85	700
		< <	Dissolve clot, heart vessel	0.00	1.75	6.49	Y Y	Ž	0.46	2.21	6.95	Z Z	A Z	X
92978		⋖	Intravasc us, heart add-on	1.80	1.00	4.21	AN	Y V	0.30	3.10	6.31	NA	A A	ZZZ
92978	26	⋖ <	Intravasc us, heart add-on	1.80	1.00	0.78	0.5	0.78	0.06	2.86	2.64	2.86	2.64	ZZZ 222
9297.0	: : 2	< ⊲	Intravasc us, near add-on	0.00	0.00	24.0 78.0	Z Z	₹ \$ 2 2	0.24	0.24	3.08	Z Z	Z Z	722
92979	26	(∢	Intravasc us, neart add-on	4	0.80	0.62	0.80	0.62	0.00	2.30	2.12	2.30	21.2	727
	건 :::	⋖	Intravasc us, heart add-on	0.00	0.00	1.73	Ϋ́	Ą Z	0.13	0.13	1.86	N A	A A	222
92980		⋖	Insert intracoronary stent	14.82	A A	ΥZ	8.49	89.9	1.03	A A	¥ X	24.34	22.53	000
92981		∢ ·	Insert intracoronary stent	4.16	ΥZ:	¥ :	2.33	1.81	0.29	¥:	¥ :	6.78	6.26	ZZZ
92982		< <	Coronary artery dilation	10.96	Υ S	∀	6.34	4.99	0.76	Κ ς Ζ 2	Υ S	18.06	16.71	000
92984		∢ ⊲	Coronary artery dilation	22.97	4 4 2 2	4 4 2 2	16.03	12 9	1 51	¥ 2	A Z	4.83	37.05	770
92987		< ∢	Revision of mitral valve	23.42	₹ Z	Z Z	16.45	13.30	1.59		Z Z	41.46	38.31	060
		< <	Revision of pulmonary valve	18.06	Ą Z	A A	11.35	10.20	1.20	A A	A A	30.61	29.46	060
		⋖	Coronary atherectomy	12.07	A A	ΥZ	96.9	5.47	0.84	A A	A A	19.87	18.38	000
92996		⋖ •	Coronary atherectomy add-on	3.26	₹ Z	¥ ż	1.83	1.41	0.10	¥ ż	Y S	5.19	4.77	ZZZ
92997		∢ <	Pul art balloon repr, percut	11.98	₹	∀	5.75	4.94 4.94	0.40	4 < Z Z	4 S	59.71	17.32	000
93000		(∢	Electrocardiogram, complete	0.17	0.35	0.47	NA NA	S.A	0.03	0.55	0.67	S.S.	N A	3×
93005		⋖	Electrocardiogram, tracing	0.00	0.28	0.41	A A	Ϋ́	0.05	0.30	0.43	NA	A A	X
93010		∢ <	Electrocardiogram report	0.17	0.07	0.00	0.07	90:0	0.01	0.25	0.24	0.25	0.24	×}
93012		۲ ۷	Report on transmitted eco	0.00	1.60	0.20	2 7	200	0.00	0.75	0.10	0 75	0 74	XX
		< <	Cardiovascular stress test	0.75	1.96	1.96	Z Y	Z Z	0.14	2.85	2.85	N N	Z Y	X
93016		⋖ ·	Cardiovascular stress test	0.45	0.23	0.19	0.23	0.19	0.05	0.70	0.66	0.70	0.66	X
		∢ <	Cardiovascular stress test	0.00	1.58	1.66	NA TA	A C	0.0	1.69	1.77	NA AB	A S	ž Š
93024		< <	Cardiac drug stress test	1.17	2.46	1.79	2 2	Z Z	0.12	3.75	3.08	Z Z	Y Z	××××××××××××××××××××××××××××××××××××××
	26	⋖	Cardiac drug stress test	1.17	09.0	0.49	09:0	0.49	0.04	1.81	1.70	1.81	1.70	××
93024	10 	∢ •	Cardiac drug stress test	0.00	1.87	1.31	Y :	¥ :	0.08	1.95	1.39	¥:	Y :	× š
93025	96	∢ <	Microvolt t-wave assess	0.75	4.00	6.71	NA 30	N C	41.0	4.89	7.60	N L	A C	×××
93025		(∢	Microvolt t-wave assess	0.00	3.61	6.39	85.58 AN	NA NA	0.03	3.72	6.50	È Z	2 Z	XX
		<	Rhythm ECG with report	0.16	0.19	0.20	A A	A V	0.05	0.37	0.38	A V	A Z	××
93041		⋖ ·	Rhythm ECG, tracing	0.00	0.15	0.15	¥	Y Y	0.01	0.16	0.16	NA	¥	X
93042		∢ <	Rhythm ECG, report	0.16	0.05	0.05	0.05	0.05	0.01	0.22	0.22	0.22	0.22	× }
93225		∢ ∢	ECG monitor/report, 24 hrs ECG monitor/record, 24 hrs	0.52	1.09	3.22	₹ ₹	¥ ¥	0.08	1.17	1.28	₹ ₹	¥	ž×
		4	ECG monitor/report, 24 hrs	00.0	0.63	1.80	AN	Ϋ́	0.14	0.77	1.94	Ϋ́	A A	××
93227		⋖ ·	ECG monitor/review, 24 hrs	0.52	0.28	0.21	0.28	0.21	0.05	0.82	0.75	0.82	0.75	X
93230		∢ ⊲	ECG monitor/report, 24 hrs	0.52	1.81	3.38	¥ ₹	Y Z	0.26	2.59	4.16	¥ ₹	Y Z	××
F.0.	-	ς :		3 -	200	- - - - -			5	5	÷			¥
TOO!	מכול הייי	to on opposite	8	11.0	1 100.00									

ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

מל	֡֝֞֝֞֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓	ָר - -	ACCE CITION (114 CS) AND THE CONTROL (114 CS) AND THE CONTROL CONTROL (114 CS) AND THE CONTROL CONTROL (114 CS)	חבראיו רי		20,00	ָבׁ פֿר	7	ואור	111111111111111111111111111111111111111	5 - 2 -	1000		ָב
CPT 1 HCPCS 2	Mod	Status	Description	Physician work RVUs ³	Fully implemented nonfacility PE RVUs	Year 2007 transi- tional non-facil- ity PE RVUs	Fully implemented facility	Year 2007 transi- tional fa- cility PE RVUs	Mal-prac- tice RVUs	Fully implemented non-facility total	Year 2007 transi- tional non-facil- ity total	Fully implemented facility	Year 2007 transi- tional fa- cility total	Global
93232		-	ECG monitor/report. 24 hrs	0.00	0.62		¥	A N	0.13	0.75	1.93	Ą	Ž	XX
93233			ECG monitor/review, 24 hrs	0.52	0.24		0.24	0.20	0.02	0.78	0.74	0.78	0.74	××
93235		∢	ECG monitor/report, 24 hrs	0.45	0.22		₹ Z	₹ Z	0.16	0.83	2.76	Y Z	₹ Z	××
93236			ECG monitor/report, 24 hrs	0.00	0.00		AN 0	A S	0.14	0.14	2.11	AN (A S	XX
93237		< <	ECG monitor/review, 24 hrs	0.45	0.22		0.22	0.18	0.02	0.69	0.65	69.0	0.65	× ?
93268		∢ <	ECG record/review	0.52	0.83		¥ ×	¥ \$	0.28	2.63	0.60	¥ ×	¥ Ş	××
93270		(<	Fod recolding	00.0	1 08		<u> </u>	ζ <u>ς</u>	0.00	0.39	90 00	<u> </u>	₹ <u>₹</u>	< >
93272			Ecg/momoral and analysis	0.00	1.90		720	000	900	0.78	0.20	0.78	0.74	XX
			ECG/signal-averaged	0.25	0.59		Į Z	Z Z	0.12	0.96	1.46	Y Z	₹Z Y	XX
93278	26		ECG/signal-averaged	0.25	0.10		0.10	0.10	0.01	0.36	0.36	0.36	0.36	XX
93278	TC	۷		00.00	0.49		Ą V	N A	0.11	09.0	1.10	A V	¥ X	××
93303				1.30	4.70		Υ Υ	Y Y	0.27	6.27	6.01	Y Y	Υ Υ	××
93303	26		Echo transthoracic	1.30	0.58		0.58	0.51	0.04	1.92	1.85	1.92	1.85	×
93303		۷.	Echo transthoracic	0.00	4.12		¥:	¥ :	0.23	4.35	4.16	¥ :	¥ :	XX
93304		۷ <	Echo transtnoracic	0.75	3.22		A C	A C	0.15	21.4	3.38	¥ S	Z ,	× ×
93304	0 K	∢ <	Echo transtnoracic	0.75	0.32		0.32	62.0	0.05	90.1	90.1	60.1	90.1	××××
93304	: :	∢ <	Echo transtnoracic	0.00	2.90		Y S	¥ S	0.13	3.03 8.03	2.32	Y S	¥ s	X X
93307			Echo exam of heart	26.0	3.84		Y I	Y S	0.70	5.02	5.3	Z ,	Y C	X X
93307			Echo exam of hoot	26.0	74.0		4.5	0.50	0.00	74.0	5.0	74.	5.5	<
	2	(<	Echo exam of heart	0.00	0.30		ζ <u>Φ</u>	2 2	0.23	2. c.	20.0	ζ <u>Φ</u>	2 2	X X
93308	26		Echo exam of heart	0.53	0.28		0.28	0.22	0.02	0.83	0.77	0.83	77.0	XX
	2		Echo exam of heart	00.00	2.41		Y Y	Y Z	0.13	2.54	2.20	AN	\ Z	X
93312)	. ⋖	Echo transesophageal	2.20	7.67		Ž	Υ Z	0.37	10.24	7.92	Ž	₹ Z	×
	26	4	Echo transesophageal	2.20	1.03		1.03	0.85	0.08	3.31	3.13	3.31	3.13	XXX
93312	TC			00.00	6.64		A A	A A	0.29	6.93	4.79	A V	¥ X	××
93313		<	Echo transesophageal	0.95	A A		0.14	0.19	90.0	A N	A A	1.15	1.20	××
93314		∢ •	Echo transesophageal	1.25	7.37		A C	A C	0.33	8.95	6.62	NA NA	NA Y	XX
93314	0 C	∢ <	Ecno transesopnageal	27.0	0.58		86.0	0.50	40.0	1.87	0.79	/8:-	6/:	X X
93314	: ا ا		Echo transesophageal	0.00	0.79		A L	¥ Ç	0.29	80.7	26.4	¥ c	Z C	X
			Echo transesophiageal	0.72	S N		 90	0.25	0.05	AN AN	(Z	1.26	1.05	XXX
93317	26		Echo transesonhadeal	1 83	620		62.0	07.0	80.0	2.70	261	02.0	2 61	XXX
	26			2.20	06:0		06:0	0.59	0.14	3.24	2.93	3.24	2.93	×
93320		<	Doppler echo exam, heart	0.38	1.72		Ϋ́	¥ Z	0.13	2.23	2.34	ΑN	Ϋ́	ZZZ
93320	26		Doppler echo exam, heart	0.38	0.20		0.20	0.16	0.01	0.59	0.55	0.59	0.55	ZZZ
93320		<	Doppler echo exam, heart	0.00	1.53		Y Z	₹ Z	0.12	1.65	1.79	Y Y	Z	ZZZ
93321		۷.	Doppler echo exam, heart	0.15	0.63		AN S	A I	0.09	0.87	1.28	AN S	AN 0	727
93321	92.	< <	Doppler echo exam, heart	0.15	80.0		80.0	\0.0 \0.0	0.0	0.24	0.23	0.24	0.23	777
93321	<u>:</u> د	∢ <	Doppler ecno exam, neart	0.00	0.00		¥	¥	80.0	0.03	1.05	Y S	¥	777
	26		Doppler color flow add-on	0.0	0.00		2 5	Y 00	0.22	0.97	0.07	Z C	¥ ;	722
			Donnlar color flow add-on	900	0.00		φ.Ν.	0.0 V	20.0	2.0	0.0	NA N	- 4Z	777
93350)	(∢	Echo transthoracic	1.48	5.25		Z Z	Z Z	0.18	06:9	4.73	Z Z	₹ Z	X X
93350	26		Echo transthoracic	1.48	0.79		0.79	0.63	0.05	2.32	2.16	2.32	2.16	X
			Echo transthoracic	00:00	4.45		Y Z	Z AZ	0.13	4.58	2.57	Į V	Z Z	×
			Right heart catheterization	3.02	23.45	_	Ą	A A	1.26	27.73	23.72	AN A	Ą	000
93501	26		Right heart catheterization	3.02	1.65		1.65	1.28	0.21	4.88	4.51	4.88	4.51	000
93501		⋖・	Right heart catheterization	00.0	21.80	_	AN S	A S	1.05	22.85	19.21	AN (Z į	000
93503		∢ ⊲	Insert/place heart catheter	2.91	NA 25.50	A C	0.48 NA	0.63 NA	0.20	30 33	13.96	3.59 NA	3.74 NA	000
	-	-			·	-			:					;

¹CPT codes and descriptors only are copyright 2005 American Medical Association. All rights reserved. Applicable FARS/DFARS apply. ²Copyright 2005 American Dental Association. All rights reserved. ³ Indicates RVUs are not used for Medicare payment.

ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

HOPCES No. Statut Description Physician Fully in the control of the control o									
25		Fully implemented facility	Year 2007 transi- tional fa- cility PE RVUs	Mal-prac- tice RVUs	Fully im- plement- ed non- facility total	Year 2007 transi- tional non-facil- ity total	Fully implemented facility	Year 2007 transi- tional fa- cility total	Global
26 A Cath placement, angography 4.08 28.8 2.14 NA NA TC A Cath placement, angography 4.08 2.88 2.14 NA NA TC A Left heart catheterization 0.00 18.55 31.9 NA NA TC A Left heart catheterization 0.00 18.55 31.9 1.04 NA 26 A Left heart catheterization 0.00 18.55 1.04 NA NA 26 A Left heart catheterization 0.00 18.55 1.04 NA NA 26 A Left heart catheterization 0.00 18.55 1.04 NA NA 26 A Left heart catheterization 0.00 18.55 1.04 NA NA 26 A A Left heart catheterization 0.00 18.55 NA NA 26 A A R.E. I heart catheterization 0.00 18.55			1.86 NA	0.30	7.06	6.53	7.06 NA	6.53 NA	000
The control of the art catheters are catheters are control of the art catheters are catheters are control of the art catheters are catheters are control of the art catheters are	-		A F	0.93	23.78	20.76	NA	N P	000
26 A Lieth heart catherization 4.22 2.40 2.44 NA NA TC A Lieth heart catherization 5.02 2.40 2.24 NA NA 26 A Lieth heart catherization 5.02 2.20 2.77 2.84 26 A Lieth heart catherization 6.04 4.00 3.93 3.77 2.99 26 A Lieth heart catherization 6.04 4.00 3.84 3.00 3.77 2.99 26 A Lieth heart catherization 6.04 4.00 3.84 3.00 3.77 3.99 3.77 3.99 3.77 3.99 3.77 3.99 3.77 3.89 3.77 3.99 3.77 3.99 3.77 3.99 3.77 3.94 3.80 3.77 3.99 3.77 3.99 3.77 3.99 3.77 3.77 4.06 3.90 3.77 3.79 3.94 3.80 3.77 3.77 4.06 3.90			N N N	0.65	0.65	14.25	0.63 AA	rc.o A	900
26 A Lieft heart catherisation 432 2.44 2.24 2.24 2.40 2.24 76 A Lieft heart catherisation 502 2.71 NA NA 76 A Lieft heart catherization 502 2.73 NA NA 76 A Lieft heart catherization 6.04 3.29 3.74 NA NA 26 A Lieft heart catherization 6.04 3.29 3.74 NA NA 26 A Lieft heart catherization 6.04 3.09 3.34 NA NA 26 A Ris & Liheart catherization 6.00 6.00 3.55 NA NA 26 A Ris & Liheart catherization 6.00 6.00 3.55 3.00 3.34 26 A Ris & Liheart catherization 6.00 6.00 3.57 3.00 3.34 26 A Ris & Liheart catherization 6.00 6.00 6.00 3.00	-		¥	2.61	25.88	41.10	Ϋ́	A	000
26 A Left heart catherization 5.02 3.30 2.9.73 NA NA 26 A Left heart catherization 5.02 3.30 2.9.73 NA NA 26 A Left heart catherization 6.94 4.40 8.84 NA NA 26 A Left heart catherization 6.94 4.40 8.84 NA NA 26 A Left heart catherization 0.00 0.59 3.24 3.71 2.82 3.71 2.89 3.74 NA NA 26 A Left heart catherization 0.00 0.59 3.24 4.70 NA NA 26 A R R & Li heart catherization 0.00 3.52 2.65 3.93 3.74 4.70 NA NA 26 A R R & Li heart catherization 0.00 0.59 3.57 NA NA NA 26 A A R R & Li heart catherization 0.00 0.59 3.57			2.24	0.30	7.02	6.86	7.02	6.86	000
26 A Left heart catheterization 5.0 2.7 2.5 2.7 1.0			⊈ <u>₹</u>	2.59	10.91	34.24	¥ ¥	¥ ¥	000
15			2.52	0.35	8.08	7.89	8.08	7.89	000
26 A Left heart catheterization 6.94 4.42 38.41 3.43 3.84 3.54 3.54 3.54 3.54 3.54 3.8	-		N Y	2.24	2.83	29.44	N S	N C	000
26 A Left heart catheterization 6.94 3.80 3.51 NA NA 26 A R. B. Li heart catheterization 5.98 34.54 47.07 NA NA 26 A R. B. Li heart catheters 0.00 31.22 2.99 3.32 2.95 26 A R. B. Li heart catheters 0.00 6.66 3.51 NA NA 26 A R. B. Li heart catheters 0.00 0.60 3.51 NA NA 26 A R. B. Li heart catheters 0.00 0.60 3.51 NA NA 26 A R. B. Li heart catheters 0.00 0.60 3.51 NA NA 26 A R. B. Li heart catheters 0.00 0.60 3.51 NA NA 26 A R. B. Li heart catheters 0.00 0.60 3.51 NA NA 26 A R. B. Li heart catheters 0.00 0.60 3.52 NA			è N	3.43	14.77	49.21	NA NA	N A	88
TC A RR & Lt heart cathelerisation 0.00 0.00 35.51 NA NA 26 A A RR & Lt heart catheleris 5.98 3.24 4.707 NA NA 7 A RR & Lt heart catheleris 5.98 3.22 4.95 3.22 2.95 7 A RR & Lt heart cathelers 7.27 4.06 3.51 4.08 NA NA 26 A RR & Lt heart cathelers 8.99 5.37 39.73 NA NA 26 A RR & Lt heart cathelers 8.99 5.37 39.73 NA NA 26 A RR & Lt heart cathelerszelion 0.00 0.60 0.55.51 NA NA 26 A RR & Lt heart cathelerszelion 4.79 3.28 3.59 NA NA 26 A RR & Lt heart cathelerszelion 4.79 3.28 3.58 NA NA 26 A RR & Lt heart cathelerszelion 4.22	-		3.34	0.48	11.22	10.76	11.22	10.76	000
26 A RR & It heart catheters 5.98 3.22 2.95 3.32 2.84 70 A RR & It heart catheters 7.27 4.66 3.51 4.02 4.06 3.51 4.02 4.06 3.51 4.06 3.51 4.06 3.51 4.06 3.51	-		¥ ž	2.95	3.55	38.46	¥ ž	¥ ž	000
TC A RR & LI heart catheters 0.00 3122 4413 NA NA 26 A RR & LI heart catheters 7.27 4.66 35.51 1.06 3.51 1.04 NA NA 26 A RR & LI heart catheters 0.00 0.05 0.57 35.51 NA NA 26 A RR & LI heart catheters 0.00 0.05 35.51 NA NA 26 A RR & LI heart catheterszation 4.79 2.68 2.38 2.88			2.95	0.42	9.72	9.35	9.72	9.35	800
26 A Rit & Li heart catheters 7.27 4.66 39.01 NA NA 7C A Rit & Li heart catheters 7.27 4.66 35.51 NA NA 7C A Rit & Li heart catheters 8.99 4.78 4.23 4.78 4.06 35.51 NA NA 26 A Rit & Li heart catheters 8.99 4.78 4.28 4.78 4.88 1.84 4.78 4.88 1.84 NA <	-		¥	3.04	34.26	47.17	N A	A	000
26 A HR & LI heart cathelers 7.27 4.06 3.51 NA NA 26 A RR & LI heart cathelers 8.99 5.37 39.73 NA NA 26 A RR & LI heart cathelers 8.99 5.37 39.73 NA NA 70 A RR & LI heart cathelers ation 0.00 0.59 35.80 NA NA 26 A RR & Li heart cathelers ation 0.00 0.69 35.51 NA NA 26 A RR I, the art cathelers ation 0.00 0.60 35.51 NA NA 26 A RR, the art cath congenital 4.22 1.428 1.9	-		Ϋ́	3.46	15.39	49.74	Ϋ́	¥ S	000
26 A Fit & Lit heart catheters 8.99 5.37 39.73 N.M. NA NA NA 1.23 1.23 NA	-		3.51	0.51 2 o c	11.84	38.46	11.84 ₽ ₽	92.TT	9 6
26 A Rt & Lt heart catheters 8.39 4.78 4.23 4.78 4.29 TC A Rt & Lt heart catheterization 4.79 3.28 35.50 NA NA 26 A Rt. It heart catheterization 0.00 0.60 35.51 NA NA 26 A Rt. It heart cath. congenital 0.00 0.60 35.51 NA NA 26 A Rt heart cath. congenital 0.00 0.54 1.43 1.88 1.93 TC A Rt heart cath. congenital 0.00 0.54 1.42 1.47 NA NA 26 A Rt heart cath. congenital 0.00 0.54 4.26 1.88 1.93 1.88 1.93 1.84 1.93 1.84 1.93 1.88 1.93 1.84 1.93 1.84 1.93 1.88 1.93 1.94 1.93 1.93 1.88 1.93 1.93 1.94 1.93 1.93 1.94 1.93 <			₹ ₹	3.57	17.93	52.29	₹Ź	ΣŽ	888
TC A Rt & tt heart cathelers 0.00 0.59 35.50 NA NA 26 A Rt, it heart cathelerization 4.79 2.68 2.38 2.88 2.38 0.04 0.05 35.51 NA NA 1C A Rt, it heart cathelerization 0.00 0.60 0.55 1.477 NA			4.23	0.62	14.39	13.84	14.39	13.84	000
26 A Rt. it heart catheterization 4.79 268 2.38 2.68 2.38 TC A Rt. it heart catheterization 0.00 0.00 3.55.1 NA NA E A Rt heart cath congenital 4.22 1.88 1.93 1.88 1.93 TC A Rt heart cath, congenital 0.00 0.54 12.88 1.88 1.93 TC A Rt heart cath, congenital 0.00 0.54 12.88 1.89 1.93 TC A Rt leart cath, congenital 0.00 0.55 3.64 NA NA 26 A Rt & I heart cath, congenital 0.00 0.55 3.64 NA NA 26 A Rt & I heart cath, congenital 0.00 0.55 3.64 NA NA 26 A Rt & I heart cath, congenital 0.00 0.55 3.64 NA NA 26 A Rt & I heart cath, congenital 0.00 0.45	0.00		₹	2.95	3.54	38.45	¥:	₹ Z	000
TC A Rt, it heart cath congenital 0.00 0.60 35.51 NA NA TC A Rt heart cath, congenital 4.22 1.88 1.93 1.88 1.93 TC A Rt heart cath, congenital 0.00 0.54 12.85 NA NA 26 A R & I heart cath, congenital 8.34 4.34 40.10 NA NA 26 A R & I heart cath, congenital 8.34 3.80 3.64 NA NA 26 A R & I heart cath, congenital 8.34 3.80 3.64 NA NA 26 A R & I heart cath, congenital 9.99 4.26			NA S	3.28	11.35	45.96	AN V	NA P	000
26 A Rt heart cath, congenital 4.22 2.42 1.477 NA NA TC A Rt heart cath, congenital 4.22 1.88 1.93 1.88 1.93 TC A Rt heart cath, congenital 8.34 3.64 NA NA 26 A R & I heart cath, congenital 8.34 3.64 NA NA 26 A R & I heart cath, congenital 8.34 3.64 NA NA 26 A R & I heart cath, congenital 8.34 3.64 NA NA 26 A R & I heart cath, congenital 6.69 3.09 2.87 3.09 3.64 26 A R & I heart cath, congenital 6.69 3.09 2.87 3.09 2.87 26 A R & R I heart cath, congenital 6.69 3.09 2.87 3.09 2.87 26 A Injection for leart cath, congenital 6.69 3.09 2.87 3.09 2.87			8.3 A	2.95	3.55	38.46	8: X	0 X	800
26 A Rt heart cath, congenital 4.22 1.88 1.93 1.88 1.93 TC A Rt heart cath, congenital 0.00 0.54 4.34 40.10 NA NA 26 A R & I heart cath, congenital 0.00 0.55 3646 NA NA 26 A R & I heart cath, congenital 0.00 0.55 3646 NA NA 26 A R & I heart cath, congenital 0.00 0.55 3646 NA NA 26 A R & I heart cath, congenital 0.00 0.29 NA NA 0.12 0.18 26 A R & I heart cath, congenital 0.43 NA NA 0.22 0.18 26 A R R & I heart cath, congenital 0.29 NA NA 0.16 0.12 27 A Injection, cardiac cath 0.29 NA NA 0.16 0.12 28 A Injection for heart x-rays 0.29			¥	1.34	7.98	20.33	Z	N A	000
26 A R & I heart cath, congenital 0.00 0.55 36.4 12.83 1.04 NA 0.18 1.18 0.18 1.18 0.1			1.93	0.29	6.39	6.44	6.39	6.44 4.5	000
26 A R & I heart cath, congenital 8.34 3.80 3.64 NA NA TC A R & I heart cath, congenital 0.00 0.55 3.64 NA 0.28 4.26 6.29 0.18 0.18 0.18 0.18 0.18 0.18 0.18 0.18			₹ ₹	3.62	16.30	52.06	₹₹	ΣŽ	800
TC A R & I heart cath, congenital 0.00 0.55 36.46 NA NA NA 26 A R & I heart cath, congenital 6.69 3.09 4.26	-		3.64	0.58	12.72	12.56	12.72	12.56	000
26 A H & H beart cath, congenital 9.99 4.26 0.18 0.18 0.18 0.18 0.18 0.18 0.18 0.18 0.18 0.18 0.18 0.12 0.18 0.12 0.14 0.14 0.12 0.	00.00		¥ S	3.04	3.59	39.50	¥ S	N S	000
hijection, cardiac cath hijection, cardiac cath hijection, cardiac cath hijection, cardiac cath hijection for lung angiogram 0.29	55 G		92.40	0.69	10.25	10.03	10.25	10.03	88
A Injection, cardiac cath 0.43 NA NA 0.19 A Injection for lung angiogram 0.29 NA NA 0.12 A Injection for lung angiogram 0.29 NA NA 0.16 0.12 A Injection for lor acronary x-rays 0.29 NA NA 0.16 0.12 B A Injection for acronary x-rays 0.25 NA NA 0.14 0.11 B A Inject for coronary x-rays 0.81 0.66 5.12 NA NA B A Inmaging, cardiac cath 0.81 0.45 0.35 0.45 0.35 C A Imaging, cardiac cath 0.83 0.45 7.92 NA NA C A Imaging, cardiac cath 0.00 0.49 7.56 NA NA C A Imaging, cardiac cath 0.00 0.49 7.56 NA NA C A Cardiac cuth 0.50	0.40		0.18	0.01	AN	A V	0.63	0.59	000
Main	-		0.19	0.0	¥ S	Y S	0.68	0.63	000
Injection for heart x-rays D.29			0.0	0.0	ξ	Z Z	0.40	0.42	86
Managing, cardiac cath 0.25 NA NA 0.14 0.11 TC A Imaging, cardiac cath 0.40 NA 0.25 0.18 TC A Imaging, cardiac cath 0.81 0.66 5.12 NA NA TC A Imaging, cardiac cath 0.00 0.21 4.77 NA NA TC A Imaging, cardiac cath 0.00 0.21 4.77 NA NA TC A Imaging, cardiac cath 0.83 0.95 7.92 NA NA TC A Imaging, cardiac cath 0.83 0.46 0.36 NA NA TC A Imaging, cardiac cath 0.83 0.46 0.36 NA NA TC A Imaging, cardiac cath 0.00 0.49 7.56 NA NA TC A Imaging, cardiac cath 0.00 0.49 7.56 NA NA TC A Cardiac cuthut measurement 0.50 0.14 0.16 0.14 0.16 TC			0.12	0.01	A N	Z	0.46	0.42	000
March A Inject for coronary x-rays 0.40 NA 0.22 0.18	-		0.11	0.01	Y :	Y S	0.40	0.37	000
26 A Imaging, cardiac cath 0.00 0.21 0.75	0.40		0.18	0.01	A V	A C	0.63	0.59	98 }
TC A Imaging, cardiac cath 0.00 0.21 4.77 NA NA 26 A Imaging, cardiac cath 0.00 0.83 0.95 7.92 NA NA TC A Imaging, cardiac cath 0.83 0.46 0.36 0.46 0.36 TC A Imaging, cardiac cath 0.50 0.14 0.55 NA NA Cardiac output measurement 0.50 0.14 0.16 0.14 0.16 0.14 0.16 TC A Cardiac output measurement 0.00 0.00 0.00 0.00 NA NA	0.0		0.35	0.03	1.29	0.30	1.29	1 19	XX
A Imaging, cardiac cath 0.83 0.95 7.92 NA NA 26 A Imaging, cardiac cath 0.83 0.46 0.36 0.46 0.36 0.36 TC A Imaging, cardiac cath 0.00 0.49 7.56 NA NA A Cardiac output measurement 0.50 0.14 0.55 NA NA A Cardiac output measurement 0.00 0.00 0.01 0.01 0.01 0.01 0.01 0.01 NA NA NA			¥	0.34	0.55	5.11	Ϋ́	₹ Z	X
26 A Imaging, cardiac cath 0.83 0.45 0.36 0.45 0.36 0.45 0.36 0.45 0.36 0.45 0.36 0.45 0.36 0.45 0.36 0.45 0.36 0.45 0.36 0.44 0.36 0.45 0.36 0.44 0.36 0.44 0.36 0.44 0.36 0.44 0.36 0.44 0.36 0.44 0.55 NA NA 0.06 26 A Cardiac output measurement 0.00 0.00 0.016 0.14 0.16 0.14 0.16 0.06 TC A Cardiac output measurement 0.00 0.00 0.39 NA NA NA 0.0	-		¥ 8	0.54	2.32	9.29	A S	A S	X
Cardiac output measurement Cardiac output	0.83		0.36	0.03	 	7.22	ZS. 7	Z	×;
			¥	0.08	0.72	1.13	¥ ₹	¥ Ž	XX 8
TC A Cardiac output measurement 0.00 0.00 0.39 NA NA 0.			0.16	0.02	0.66	0.68	99.0	0.68	000
			NA	0.06	0.06	0.45	NA	A N	000

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

7	LIVO:	<u>:</u>	ADDENDOM D NECATIVE VALUE ONITS (1100S) AND 1	ור היי		0 00	ָ קר	/	ויין אין אין	- -		,	1	נ
CPT 1 HCPCS 2	Mod	Status	Description	Physician work RVUs ³	Fully implemented non-facility PE	Year 2007 transi- tional non-facil- ity PE RVUs	Fully implemented facility	Year 2007 transi- tional fa- cility PE RVUs	Mal-practice RVUs	Fully im- plement- ed non- facility total	Year 2007 transi- tional non-facil- ity total	Fully implemented facility	Year 2007 transi- tional fa- cility total	Global
93562	26	44	Cardiac output measurement	0.16	0.03	0.29	0.03	NA 0.05	0.05	0.24	0.50	0.20	0.22	000
93562	ည	∢ ∢	Cardiac output measurement	0.00	00:0	0.24	₹ ₹	¥ ¥	0.04	3.10	0.28	¥ ¥	₹ ₹	000 ZZZ
		< <	Heart flow reserve measure	1.80	1.00	0.76	0.5	0.76	0.06	2.86	2.62	2.86	2.62	222
93572	26	< <	Heart flow reserve measure	9.5 4.1	0.00	0.56	0.75	0.56	0.04	2.23	2.04	2.23	2.04	777
•		⋖ •	Transcath closure of asd	17.97	A S	Y S	9.78	8.00	1.25	Y S	A Z	29.00	27.22	000
93581		∢ ∢	Bundle of His recording	24.39	1.1. A 1.1.	2.37	3.45 NA	NA	0.29	3.52	4.78	39.55 NA	SO.53	800
93600	26	∢ <	Bundle of His recording	2.12	1.1	0.90	1.1	0.90	0.16	3.39	3.18	3.39	3.18	000
93602	2	۷ ح	Puridie of his recording	2.12 2.12	1.10	1.72	₹₹	₹ ₹	0.24	3.46	4.08	¥ ¥	₹₹	000
93602	26	⋖・	Intra-atrial recording	2.12	1.10	0.89	1.10	0.89	0.17	3.39	3.18	3.39	3.18	000
93602	<u>်</u>	∢ ∢	Intra-atrial recording	0.00	00.0	0.83	Z Z	A Z	0.07	3.50	0.90	A Z	Z Z	000
			Right ventricular recording	2.12	1.09	0.88	1.09	0.88	0.18	3.39	3.18	3.39	3.18	000
93603			Right ventricular recording	0.0	0.00	1.26	¥ S	¥ ž	0.11	0.1	1.37	¥ S	¥ S	000
93609	26	∢ ∢	Map tacnycardia, add-on	4. 4 99. 499	2.74	2.16	2.74	NA 2.16	0.35	8.73	7.50	80.8	7.50	777
: :	12		Map tachycardia, add-on	0.00	0.00	2.05	¥ Y	¥ ¥	0.17	0.17	2.22	¥ Y	Z Z	ZZZ
93610	90	∢ <	Intra-atrial pacing	3.02	1.54	2.27	N A	NA P	0.34	4.90	5.63	A S	NA S	000
93610	 2 2 2 1	< <	Intra-atrial pacing	0.00	0.00	1.01	5 ≥	8 ¥	0.10	0.10	1.11	6.4 See ₹	A A	88
		< <	Intraventricular pacing	3.02	1.49	2.45	N A	¥.	0.36	4.87	5.83	¥.	N A	000
	26 T		Intraventricular pacing	3.02	1.49	1.24	1.49 NA	1.24	0.25	4.76	4.51	4.76	4.51	000
93613	2	(∢	Electrophys map 3d, add-on	6.99	N AN	N A	3.85	3.04	0.49	S Z	AN AN	11.33	10.52	ZZZ
93615		⋖・	Esophageal recording	0.99	0.50	0.57	ΑŞ	A S	0.05	1.54	1.61	A S	ΑŞ	000
93615	0 C C C		Esophageal recording	0.99	0.50	0.33	0.50 AN	0.33 NA	0.03	25.1	0.26	7.52. AN	SS.P	000
		< <		1.49	0.37	0.42	0.37	0.42	0.09	1.95	2.00	1.95	2.00	000
93618			Heart rhythm pacing	4.25	2.37	4.82	Z S	Αğ	0.54	7.16	9.61	¥ 8	Z S	000
93618	1C	۲ ح	Heart rhythm pacing	0.00	0.00	2.98	S.S. AN	 8. ₹	0.30	0.32	3.22	NA NA	0.40 A	000
93619			Electrophysiology evaluation	7.31	4.37	9.28	A S	A S	0.98	12.66	17.57	¥!	N S	000
93619	 1 2 1 2 1		Electrophysiology evaluation	0.00	3.95	5.90	2.9. A	85.5 A	0.51	0.89	6.37	` ₹ Ξ	S N	000
			Electrophysiology evaluation	11.57	6.37	5.23	6.37	5.23	0.80	18.74	17.60	18.74	17.60	000
93621	26		Electrophysiology evaluation	2.10	1.16	133	1.16	0.91	0.15	3.41	3.16	3.41	3.16	777
93623			Stimulation, pacing heart	2.85	1.57	1.23	1.57	1.23	0.20	4.62	4.28	4.62	4.28	777
	: 6		Electrophysiologic study	4.80	3.12	3.92	A S	¥8	0.46	8.38	9.18	¥ S	A !	000
93624	- C - C - C		Electrophysiologic study	0.00	2.69	1.60	7.69 V.69	2.32 NA	0.33	0.56	1.73	28. A	74.7 VAN	000
:			Heart pacing, mapping	7.59	2.81	2.79	2.81	2.79	0.97	11.37	11.35	11.37	11.35	000
93640	96		Evaluation heart device		1.93	6.90	A 6	A C	0.66	6.10	11.07	A S	N N N	000
	12	< <	Evaluation heart device	0.0	0.00	5.39	₽ E E	S Z	0.42	0.42	5.81	S Z	S Z	000
93641	90		Electrophysiology evaluation	5.92	3.26	7.95	NA 90 6	NA 56	0.83	10.01	14.70	NA 50	NA 80	000
93641	TC 22		Electrophysiology evaluation	0.00	0.00	5.39	S N	NA NA	0.42	0.42	5.81	S.S.	S N	888
93642		⋖	Electrophysiology evaluation	4.88	7.59	8.96	N N	NA	0.57	13.04	14.41	NA	N N	000
. H						:								

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

ADE	ADDENDUM B		.—RELATIVE VALUE UNITS (RVUS) AND I	⊀ELATED	ND KELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS	TION USE	D IN DET	ERMINING	MEDICAL	RE PAYM	ENTS FOR	-/nnz	ZOU/—CONTINUED	_ _
CPT 1 HCPCS 2	Mod	Status	Description	Physician work RVUs ³	Fully implemented non-tacility PERVUs	Year 2007 transitional non-facility PE RVUs	Fully implemented facility	Year 2007 transi- tional fa- cility PE RVUs	Mal-prac- tice RVUs	Fully implemented non-facility total	Year 2007 transi- tional non-facil- ity total	Fully implemented facility total	Year 2007 transitional facility total	Global
93642	26	∢ ∢	Electrophysiology evaluationElectrophysiology evaluation	4.88	2.69	2.34	2.69 NA	2.34 NA	0.15	7.72	7.37	7.72 NA	7.37 NA	000
93650		< <	Ablate heart dysrhythm focus	10.49	NA	N N	6.10	4.86	0.73	NA	N A N	17.32	16.08	000
93651		∢ <		16.23	Z Z	Z Z	8.93	6.99	1.13	Y S	Y S	26.29	24.35	000
93660		< <	Ablate Healt dyshrightin locus	1.89	3.11	2.59	S.S.	9. Y	0.08	5.08	4.56	19:07 NA	20.43 NA	8 8
	26	< <	Tilt table evaluation	1.89	1.01	0.81	1.01	0.81	90.0	2.96	2.76	2.96	2.76	000
93660	10 10	⋖ -	Tilt table evaluation	0.00	2.10	1.79	¥.	¥.	0.05	2.12	1.81	¥.	Z	000
93662		∢	Intracardiac ecg (ice)	2.80	1.54	1.22	1.54 AN	1.22 N	0.00	4.43	11.4	4.43	4.11 AN	Z X
93701	26	< ∢	Bioimpedance, thoracic	0.17	0.06	0.07	0.06	0.07	0.01	0.24	0.25	0.24	0.25	X
93701	10	۷,	Bioimpedance, thoracic	0.00	0.65	0.85	Ž:	¥:	0.01	99.0	0.86	¥ ?	₹:	X
:		∢ <	lotal body plethysmography	71.0	1.29	0.89	Y S	¥ ž	0.07	1.53	51.1	¥ Ş	Y S	×××
93722		(⊲	Pletilysillography tracilig	0.0	70.0	0.02	0 7 7	200	90.0	0 0 0	0.00	200	2 60	X X
: :		< <	Analyze pacemaker system	4.88	3.56	5.31	Z	¥	0.39	8.83	10.58	Į Ž	Z Y Y	000
93724	26	⋖	Analyze pacemaker system	4.88	2.63	2.10	2.63	2.10	0.15	7.66	7.13	7.66	7.13	000
93724	TC	⋖ ·	Analyze pacemaker system	0.00	0.93	3.21	Z	Y Y	0.24	1.17	3.45	Y Y	Z	000
93727		∢ <	Analyze ilr system	0.52	0.66	0.32	99.0	0.32	0.02	1.20	0.86	1.20	98.0	X }
•	96	< ⊲	Analyze pacernaker system	0.45	0.0	0.70	7 C C	4 C	0.03	1.5.	0.50	7 7	A 9 0	ž
93731	1C	< ⋖	Analyze pacemaker system	00.0	0.56	0.51	S Z	2 Z	90.0	0.60	0.55	- 4 - Z	Y Y	XXX
		< <		0.92	1.19	0.94	Ž	Ž	0.07	2.18	1.93	¥	Z Z	X
93732	26	⋖	Analyze pacemaker system	0.92	0.50	0.39	0.50	0.39	0.03	1.45	1.34	1.45	1.34	X
93732))	∢ <	Analyze pacemaker system	0.00	0.69	0.56	¥ S	¥ ž	0.04	0.73	0.60	¥ ž	₹ ž	× š
93733	26	۲ ۷	Telephone analy, pacemaker	0.1	0.32	0.08	60 0	4 C	0.0	0.50	0.92	0 27		ž×
93733	12	< ∢	Telephone analy, pacemaker	0.00	0.23	0.61	S Z	S Z	0.0	0.29	0.67	įΣ	Z	×
93734		⋖	Analyze pacemaker system	0.38	0.72	0.56	Y Y	¥	0.03	1.13	0.97	A A	A N	XX
93734	26	∢ •	Analyze pacemaker system	0.38	0.21	0.17	0.21	0.17	0.01	0.60	0.56	0.60	0.56	X §
93/34	<u>:</u>	∢ <		0.00	0.51	0.39	¥ S	¥	0.02	0.53	1.41	₹ <u>₹</u>	Υ S	ž Š
93735	26	(∢	Analyze pacemaker system	0.74	0.40	0.31	0.40	0.31	0.02	1.16	1.07	1.16	1.07	Ž
	<u>۲</u>	<	Analyze pacemaker system	0.00	0.59	0.48	Υ Z	¥	0.04	0.63	0.52	₹ Z	Y Z	×
93736		⋖	Telephonic analy, pacemaker	0.15	0.28	0.59	Y Y	¥	0.07	0.50	0.81	¥ Z	A A	××
93736	26	⋖ ·	Telephonic analy, pacemaker	0.15	0.08	0.07	0.08	0.07	0.01	0.24	0.23	0.24	0.23	X
93736	ည	۱ ک	Telephonic analy, pacemaker	0.00	0.21	0.53	Υ S	₹ Ş	0.06	0.27	0.59	Υ S	Z Z	×
93/40	9	ם מ	Temperature gradient studies	0.0	40.0	0.50	Z S	¥ 5	0.02	0.22	0.33	Y C	¥ 5	X
•	•	ο α	Temperature gradient studies	9 0	40.0	41.0	0.0 4 Z	40.0	0.0	0.2	0.21	0.Z	0.2	< >
93741)) «	Analyze ht pace device snal	0.00	1.06	00	(4 2 Z	(4 2 Z	0.07	1.93	1.87	(4 2 Z	ζ 4	X X
: :	26	< <	Analyze ht pace device snal	0.80	0.44	0.34	0.44	0.34	0.03	1.27	1.17	1.27	1.17	×
	TC	⋖		0.00	0.61	99.0	Ϋ́	¥	0.04	0.65	0.70	Υ Υ	N A	××
93742		⋖	ht pace device	0.91	1.20	1.07	Y Y	Y Y	0.07	2.18	2.05	Y Y	A A	××
93742	26		Ħ.	0.91	0.51	0.40	0.51	0.40	0.03	1.45	1.34	1.45	1.34	×
93742	ည	< <	t	0.00	0.69	0.68	Υ S	¥ à	0.04	0.73	0.72	¥ ž	Υ S	× š
93/43	9	< <	Analyze nt pace device dual	 	4 7 7	0.10	Z Z	Z 5	0.00	N.34	Z.Z0	A S	Z Y	<u> </u>
	0 Z	∢ ⊲	Analyze III pace device dual	50.0	0.57	0.44	7C.O AN	4.0 AN	0.00	50.1	0.50	50.1 AN	OC: I	X X
93744)	< ⋖	Analyze ht pace device dual	1.08	1.39	1.20	ζ « Z	(4 2 Z	0.08	2.65	2.46	(4 2 Z	Σ Δ Ζ	X X
	26	< ∢	ht pace device dual	1.18	0.65	0.51	0.65	0.51	0.04	1.87	1.73	1.87	1.73	X
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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

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CPT 1 HCPCS 2	Mod	Status	Description	Physician work RVUs ³	Fully implemented nonfacility PE	Year 2007 transi- tional non-facil- ity PE RVUs	Fully implemented facility	Year 2007 transi- tional fa- cility PE RVUs	Mal-prac- tice RVUs	Fully implemented non-facility total	Year 2007 transi- tional non-facil- ity total	Fully im- plement- ed facility total	Year 2007 transi- tional fa- cility total	Global
93744	TC	< 8 €	Analyze ht pace device dual	0.00	0.74	0.69	A A S	A A I	0.02	0.78	0.73	A N S	A A S	XX
93770	76	മമ	Measure venous pressure	0.16	0.00	0.05	0.04 VA	0.05 AN	0.0	0.01	0.22	12.0 F N	0.22 VA	××
93784		∢ <	Ambulatory BP monitoring	0.38	1.37	1.51	Y S	¥ S	0.03	1.78	1.92	₹ S	A S	×
93788		∢ ∢	Ambulatory BP analysis	0.00	0.73	0.96	¥ ¥	¥ ¥	0.0	0.74	0.58	₹ <u>₹</u>	₹ ₹ 2	žž
		∢ •	Review/report BP recording	0.38	0.14	0.13	0.14	0.13	0.01	0.53	0.52	0.53	0.52	XX
93/9/		∢ ∢	Cardiac renab	0.18	0.33	0.31	0.09	0.08	0.0	0.52	0.50	0.28	0.27	000
93875			Extracranial study	0.22	2.64	2.42	N S	A S	0.12	2.98	2.76	A S	A S	×}
93875	 1 2 1 2 1		Extracranial study Extracranial study	0.00	0.08	0.08	80.0 A	90.0 80.0	0.0	0.31	2.45	E. O	N.3.	žž
93880		. ∢	study	0.60	6.36	5.77	Z Z	¥ Z	0.39	7.35	6.76	Ž	Ž	X
93880	26	∢ <	Extracranial study	0.60	0.21	0.20	0.21	0.20	0.04	0.85	0.84	0.85	0.84	× >
93882	2	< <		0.40	4.23	3.69	¥ Z	ΣŽ	0.26	4.89	4.35	Z Z	¥ Ž	₹×
93882	26	∢.	Extracranial study	0.40	0.12	0.14	0.12	0.14	0.04	0.56	0.58	0.56	0.58	X
93882	 ၁	∢ <	Extracranial study	0.00	4.11	3.56	¥ ž	¥ S	0.22	4.33	3.78	Y S	¥ S	××
93886	26	< ∢	Intracranial study	0.94	0.30	0.35	0.30	0.35	90.0	1.30	1.35	1.30	1.35	××××××××××××××××××××××××××××××××××××××
	70	4	Intracranial study	0.00	6.91	6.52	¥ V	Ž	0.39	7.30	6.91	NA	¥.	XX
93888	90	∢ <	Intracranial study	0.62	4.94	4.42	A S	A S	0.32	2.88	5.36	NA 0	A S	×;
93888	 2 2 1	< <	Intracranial study	0.00	4.74	4.20	O.S.O AN	N A	0.03	5.01	4.47	è Z	0.00 V	{ ×
93890		∢.	Tcd, vasoreactivity study	1.00	6.40	5.28	N A	Y Y	0.45	7.85	6.73	NA	¥.	XX
93890	26 T.C	∢ ⊲	Ted vasoreactivity study	0.0	0.32	0.38	0.32 NA	0.38 NA	90.0	1.38	1.44	1.38 NA		××
93892	2	< <	Tcd, emboli detect w/o inj	1.15	6.93	5.61	¥ Ž	ΣŽ	0.45	8.53	7.21	ZZ	ΣŹ	×××
93892	26		Tcd, emboli detect w/o inj	1.15	0.37	0.44	0.37	0.44	0.00	1.58	1.65	1.58	1.65	X
93892	 2L	∢	Tcd, emboli detect w/o inj	0.00	6.57	5.18	¥ Z	Z Z	0.39	6.96 8.21	5.57	Y Z	¥ Z	××
93893	26		Tcd, emboli detect w/inj	1.15	0.37	0.44	0.37	0.44	90.0	1.58	1.65	1.58	1.65	×××
93893	TC		Tcd, emboli detect w/inj	0.00	6.24	5.00	Z Z	Z Z	0.39	6.63	5.39	¥ ?	¥ ž	X
93922	26	∢ ∢	Extremity study	0. N 0. N 0. N 0. N	3.20	2.82	A 0	A S	51.0 50.0	3.60	3.22	NA 0.35	NA 0.35	××
	25	∶∢	Extremity study	0.00	3.12	2.74	N N	Z Z	0.13	3.25	2.87	NA NA	N N	X
93923	90		Extremity study	0.45	4.86	4.25	N P	N S	0.26	5.57	4.96	NA 8	N S	× >
93923	20		Extremity study Extremity study	0.00	4.71	4.10	2 Z	2 X	0.25	4.93	4.32	ξ Z	5. A	{×
93924		4	Extremity study	0.50	6.12	5.13	¥ V	¥ Y	0.30	6.92	5.93	NA	A A	××
93924	26		Extremity study	0.50	0.17	0.17	0.17	0.17	0.05	0.72	0.72	0.72	0.72	× }
93925	2	∢ ∢	Extremity study Lower extremity study	0.58	8.31 8.31	7.18	₹ ₹	žΣ	0.39	9.28	8.15	¥ ¥	₹ ₹	{×
	26	Α.	study	0.58	0.20	0.20	0.20	0.20	0.04	0.82	0.82	0.82	0.82	×
93925))	∢ <	Lower extremity study	0.00	8.11	6.98	¥ ž	¥ S	0.35	8.46	7.33	¥ S	₹ S	× >
93926	26	< <	Lower extremity study	0.39	0.12	0.13	0.12	0.13	0.04	0.55	0.56	0.55	0.56	XX
93926	70	⋖ ·	Lower extremity study	0.00	5.25	4.26	¥:	Ϋ́	0.23	5.48	4.49	Y.	¥:	X
93930	30		study	0.46	6.45	5.64	A E	NA PA	0.41	7.32	6.51	NA	NA 0 66	× >
93930	10 10 10		Upper extremity study	0.0	6.30	5.48	S N	Z Z	0.37	6.67	5.85	S Z	8.8 8	ξ× ×
FOO	7000	2000	Circum V Local Land V Local V			- L	1	-1-						

ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

7	L'a MODEINDOIM B'.	ı	TIELATIVE VALUE OINTS (11VOS) AIND	וררא ו ר)			ואכוליואו			7007		<u> </u>
CPT 1 HCPCS ²	Мод	Status	Description	Physician work RVUs ³	Fully im- plement- ed non- facility PE RVUs	Year 2007 transi- tronal non-facil- ity PE RVUs	Fully implemented facility	Year 2007 transi- tional fa- cility PE RVUs	Mal-prac- tice RVUs	Fully im- plement- ed non- facility total	Year 2007 transi- tional non-facil- ity total	Fully im- plement- ed facility total	Year 2007 transi- tional fa- cility total	Global
93931		∢,		0.31	4.40	3.72	A S	N S	0.27	4.98	4.30	AN.	A S	XX
93931	7. 7. 7. 7.	∢ <	Upper extremity study		0.10	0.10	0.10 VI	01.0	0.03	0.44 4 7 7	0.44	0.44 NA	0.44 4 N	××
93965)	(∢	Opper extremity study Extremity study	0.35	5. E	28.5	Z Z	Z Z	0.14	3.63	988	Z Z	ζ <u> </u>	XX
93965	26	<	Extremity study	0.35	0.11	0.12	0.11	0.12	0.02	0.48	0.49	0.48	0.49	×
93965	TC	⋖ -	Extremity study	0.00	3.02	2.77	₹ Z	¥:	0.12	3.14	2.89	Y Y	Y Z	X
93970		∢ <	Extremity study	0.68	6.47	5.56	A S	Y S	0.46	7.61	6.70	A S	Y S	X }
93970	 2 2 2 3 3	∢ ⊲	Extremity study	0.00	0.0	53.4	NA N	SZ.O NA	0.00	0.90	75.7	0.90 AN) S.O.	ž×
93971	2	< ∢	Extremity study	0.45	4.25	3.76	₹₹	Z Z	0.30	2:00	4.51	ΣŽ	₹	X
93971	26	∢	Extremity study	0.45	0.15	0.15	0.15	0.15	0.03	0.63	0.63	0.63	0.63	××
93971	TC	⋖ ·	Extremity study	0.00	4.10	3.61	₹ Z	Y Z	0.27	4.37	3.88	₹ Z	Y Z	×
93975		∢ •	Vascular study	1.80	8.79	7.94	A C	A S	0.56	11.15	10.30	A C	A Z	×
93975	9 F	∢ <	Vascular study	08.5	0.65	0.61	0.65	19.0	0.13 5.13	2.58	7.54	N.58	7.54 4.57	××,
•	: 2	< ⊲	Vascular study	0.00	0.14	7.52 7.44 7.45	₹ 4 2 2	Z Z	0.45 3.5	0.07	6.7.3	₹	Z Z	< ×
93976	26	< ∢	Vascular study	i 5	0.42	0.41	0.42	0.41	0.05	1.68	1.67	1.68	1.67	X
93976	2	. ∢	Vascular study	0.00	4.34	4.04	Į K	Z Z	0:30	4.64	4.34	Z Z	Z Z	×
93978		∢		0.65	6.18	4.94	Ϋ́	A A	0.43	7.26	6.02	A A	N A	××
93978	26	∢	Vascular study	0.65	0.23	0.22	0.23	0.25	90.0	0.94	0.93	0.94	0.93	××
93978	TC	∢	study	0.00	5.96	4.72	₹ Z	₹ Z	0.37	6.33	2.09	Υ Υ	Z Z	×
93979		∢ ·	Vascular study	0.44	4.45	3.53	Y !	Y S	0.27	5.16	4.24	Y Y	Y S	X
93979	26	∢ <	Vascular study	0.0	0.17	0.16	0.17	0.16	0.03	0.64	0.63	0.64	0.63	×}
93980	<u>:</u> ວ	∢ ⊲	Vascular study	2.00	8.75 8.75 8.75	3.03	¥ ¥	Z Z	0.24	4.0 7.0 7.0	4.70	Z Z	Z Z	X X
93980	26		Penile vascular study	1.25	0.45	0.42	0.45	0.42	0.08	1.78	1.75	1.78	1.75	×
	-1 -:-		Penile vascular studý	0.00	3.09	2.61	Ϋ́	N A	0.34	3.43	2.95	N N	A V	××
93981		∢		0.44	2.93	2.89	Υ Υ	Υ Υ	0.33	3.70	3.66	A A	Υ Υ	×
93981	26	۷.	Penile vascular study	0.44	0.17	0.15	0.17	0.15	0.02	0.63	0.61	0.63	0.61	X
93981	: ၁	∢ <	Penile vascular study	0.00	2.76	2.75	₹ Ş	Υ S	0.31	3.07	3.06	Z Z	Y S	× }
93990	36	∢ ⊲	Doppler flow testing	0.25	9.44	4.30	4 Z	Z C	0.20	0.90 0.90	4.87	NA SA	NA 0	X
06666	TC	(∢	Doppler flow testing	0.00	5.37	20.0	S Z	S Z	0.00	5.60	15.7	S Z	S Z	XXX
		. ∢	Breathing capacity test	0.17	0.73	0.69	Ž	Ž	0.03	0.93	0.89	Ž	Z Z	×
94010	26	∢	Breathing capacity test	0.17	0.04	0.05	0.04	0.05	0.01	0.22	0.23	0.22	0.23	××
94010	TC	∢	Breathing capacity test	0.00	69.0	0.64	Y Y	A A	0.05	0.71	99.0	A A	A V	××
94014		∢ •	Patient recorded spirometry	0.52	0.90	0.80	¥ :	Y :	0.03	1.45	1.35	¥ :	Y :	×
94015		∢ <	Patient recorded spirometry	0.00	0.74	0.63	A C	N N	0.0	0.75	0.64	N N	N Z	× }
94016		∢ <	Review patient spirornetry	0.52	9 - 5	. t	9.5	2 5	0.02	1.60	0.4	0.70	7.0	< >
94060	26		Evaluation of wheezing	0.31	0.07	0.09	0.07	60.0	0.0	0.39	0.41	0.39	0.41	XX X
	12		Evaluation of wheezing	0.00	1.23	1.04	¥Z	Z	0.00	1.29	1.10	Y Y	Z	××
94070		⋖	Evaluation of wheezing	09.0	0.99	0.86	Ą Z	N A	0.13	1.72	1.59	Ą V	A V	××
94070	26	⋖ ·	Evaluation of wheezing	0.60	0.15	0.17	0.15	0.17	0.03	0.78	0.80	0.78	0.80	×
94070		∢ [Evaluation of wheezing	0.00	0.84	0.69	₹ Ż	Υ S	0.10	0.94	0.79	Z Z	Υ S	×
94150	90	ם מ		0.0	84.0	0.47	A C	A C	0.02	0.57	0.56	Y C	Z Z	×;
94150		0 00	Vital capacity test Vital capacity test	0.00	0.02	0.03	N A	S A	0.0	0.10	0.46	N S	- A	{ ×
		. ∢	Lung function test (MBC/MVV)	0.11	0.50	0.46	Ž	Ž	0.03	0.64	09:0	Ž	Ž	×
	26	< <		0.11	0.03	0.03	0.03	0.03	0.01	0.15	0.15	0.15	0.15	XX
94200	با ا	∢ •	Lung function test (MBC/MVV)	0.00	0.48	0.43	Y S	¥ ž	0.02	0.50	0.45	Z Z	 \ \ \ \ \ \ \	×}
34740		•	Hesidual lung capacity	0.Z0	0.00	0.70	Y.	Y.	or.vo	1.13	1.02	Z.	Z Z	*
1 CPT codes	s and descript	criptors only	y are convright 2005 American Medical Associa	All rick	, hourson of	Annlinable F	ARS/DEARS	yluna						

ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

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CPT 1 HCPCS 2	Mod	Status	Description	Physician work RVUs ³	Fully implemented nonfacility PERVUS	Year 2007 transi- tional non-facil- ity PE RVUs	Fully im- plement- ed facility PE RVUs	Year 2007 transi- tional fa- cility PE RVUs	Mal-prac- tice RVUs	Fully implemented nonfacility total	Year 2007 transi- tional non-facil- ity total	Fully implemented facility total	Year 2007 transi- tional fa- cility total	Global
94240	26	44.	Residual lung capacity	0.26	0.06	0.08	0.06 NA	0.08 NA	0.01	0.33	0.35	0.33 NA	0.35 NA	XXX
94250	26	⋖ ⋖	Expired gas collection Expired gas collection	0.11	0.56	0.62	NA 0.03	NA 0.03	0.02	0.69	0.75	0.15	0.15	××
	12	Α.	Expired gas collection	0.00	0.52	0.59	Ž	Z	0.01	0.53	09.0	Ž	¥.	X
94260	96	∢ ⊲	Thoracic gas volume	0.13	0.76	0.63	A S	A S	0.05	0.94	0.81	A P	N C	××
94260	122	< <	Thoracic gas volume	0.00	0.73	0.59	S Z	Z Z	0.0	0.77	0.63	₹	NA S	XX
94350			Lung nitrogen washout curve	0.26	0.65	0.73	Y S	A S	0.05	0.96	1.04	Ϋ́	A S	XX
94350	 70 TC		Lung nitrogen washout curve	0.26	0.07	0.08	0.07 AN	0.08 AA	0.0	0.34	0.35	0.34 AN	0.35 NA	××
94360		< <	Measure airflow resistance	0.26	0.97	0.77	₹	₹ Ž	0.07	1.30	1.10	₹	ΣŽ	XX
94360	26	∢ <	Measure airflow resistance	0.26	0.06	0.08	90.0	0.08	0.01	0.33	0.35	0.33	0.35	XX
94370)	< <	Breath airway closing volume	0.26	0.65	0.70	₹ ₹	¥ ₹	0.09	0.94	0.99	₹₹	₹ ₹ 2	×××
94370	26	< <	Breath airway closing volume	0.26	0.08	0.08	0.08	0.08	0.01	0.35	0.35	0.35	0.35	×××
94370	TC	⋖ ·	Breath airway closing volume	0.00	0.57	0.62	₹ Z	¥:	0.02	0.59	0.64	Y S	₹ Z	XX
94375			Respiratory flow volume loop	0.31	0.74	0.64	A S	A S	0.03	1.08	0.98	A S	A S	×
	0Z L		Respiratory flow volume loop	0.3	0.08	0.09	0.08 NA	0.09 AN	0.0	0.40	0.41	0.40 NA	14.0 AN	×××
94400)	< <	CO2 breathing response curve	0.40	1.02	0.89	Z Z	A Z	0.00	1.51	1.38	Z Z	Ž	××
94400	26	4	CO2 breathing response curve	0.40	0.10	0.12	0.10	0.12	0.03	0.53	0.55	0.53	0.55	××
94400	10	∢ •	CO2 breathing response curve	0.00	0.92	0.77	Y :	¥ :	0.06	0.98	0.83	¥:	₹:	X
94450	26	∢ ⊲	Hypoxia response curve	0.40	1.02	0.89	AN C	A F	0.0	1.46	1.33	A C	NA 53	××
94450	22	< <	Hypoxia response curve	0.00	0.94	0.78	8 Z	- X	0.02	96:0	0.30	S Z	S Z	××××
		⋖	Hast w/report	0.31	1.18	1.06	Ϋ́	¥ Z	0.04	1.53	1.41	¥	A A	××
94452	26		Hast w/report	0.31	0.08	0.09	0.08	60.0	0.05	0.41	0.42	0.41	0.42	×
94453	<u>:</u> د	∢ ∢	Hast W/oxygen titrate	0.00	1.66	1.55	¥ ¥	¥ ¥	0.0	21.12	0.99	¥ ₹	A A	××
94453	26	< <	Hast w/oxygen titrate	0.40	0.11	0.12	0.11	0.12	0.02	0.53	0.54	0.53	0.54	×××
94453			Hast w/oxygen titrate	0.00	1.55	1.43	¥ S	¥ ž	0.05	1.57	1.45	¥ ž	¥ ž	×
	26	< ⊲	Pulmonary stress test/simple	0.04	0.80	2.09	Z C	¥ 00	0.0	.03 .03	2.80	A 9	787	XXX
94620	22	<	Pulmonary stress test/simple	0.00	0.67	1.89	<u>₹</u>	N A	0.10	0.77	1.99	¥ ×	ξZ Y	×××
94621		∢ .	Pulm stress test/complex	1.42	3.17	2.45	Z Z	¥.	0.16	4.75	4.03	Y Y	₹ Z	××
94621	26	∢ ⊲	Pulm stress test/complex	1.42	0.44	0.44	0.44 4 A	0.44 4 A	0.06	1.92	1.92	1.92 NA	1.92 NA	××
94640)	< <	Airway inhalation treatment	0.00	0.36	0.32	₹ Ž	¥ ₹	0.05	0.38	0.34	≦≝	₹ Z	×××
94656		⋖	Initial ventilator mgmt	1.22	1.11	1.15	0.23	0.30	90.0	2.39	2.43	1.51	1.58	×××
94657		∢ •	Continued ventilator mgmt	0.83	1.13	1.02	0.19	0.24	0.04	2.00	1.89	1.06		XX
94660		∢ ⊲	Neg press ventilation can	0.76	0.81 V	0.09 V	0.0	0.22	40.0	1.6.1	94.1 Q A N	0.99	1.02	×××
94664		< <	Evaluate pt use of inhaler	0.00	0.40	0.33	2 X	N A	0.04	0.44	0.37	Ž Ž	¥.	XX
94667		⋖ ·	Chest wall manipulation	0.00	0.55	0.53	Y Z	¥ :	0.05	0.60	0.58	Y :	₹ Z	X
94668		∢ ∢	Chest wall manipulation	0.00	0.50	0.46	A A	A A	0.05	0.52	0.48	A A	A N	××
94680	26		Exhaled air analysis, o2	0.26	0.07	0.08	0.07	0.08	0.01	0.34	0.35	0.34	0.35	××
94680	7C		.≝ .	0.00	1.03	1.60	¥:	¥:	0.06	1.09	1.66	₹:	¥:	XX
94681	96		air analysis, o2/co2	0.20	80.L 20.0	/ L.S.	A C	A 0	0.0	1.41	2.50	A 0	NA 0 27	××
94681			Exhaled air analysis, o2/co2	0.00	1.03	2.11	Y S S S	N S S S	0.12	1.15	2.23	į Š	įŽ	XXX
-	-	-]-	:	1]-	1					

¹CPT codes and descriptors only are copyright 2005 American Medical Association. All rights reserved. Applicable FARS/DFARS apply. ²Copyright 2005 American Dental Association. All rights reserved. ³ Indicates RVUs are not used for Medicare payment.

ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

ADL	JEINDOIN	ADDENDOM B.—RELATIVE	VALUE UNITS (AVUS) A	חבראובט	ND RELATED INFORMATION USED IN	ION COL	.⊒. .⊒.	DELERMINING MEDICARE PAYMENTS	יל כולודווו ג	1	בטר טואו	- / / / /		ב
CPT 1 HCPCS 2	Mod	Status	Description	Physician work RVUs ³	Fully implemented non- facility PE RVUs	Year 2007 transi- tional non-facil- ity PE RVUs	Fully implemented facility	Year 2007 transi- tional fa- cility PE RVUs	Mal-practice RVUs	Fully implemented nonfacility total	Year 2007 transi- tional non-facil- ity total	Fully implemented facility	Year 2007 transi- tional fa- cility total	Global
94690	26	۷ ۷	Exhaled air analysisExhaled air analysis	0.07	0.88	1.72	0.02	NA 0.02	0.05	1.00	1.84	0.10	0.10	××
94690	TC	۷ ۵	Exhaled air analysis	0.00	0.86	1.70	Z Z	A Z	0.04	0.90	1.74	A Z	A A	××
94720	26		Monoxide diffusing capacity	0.26	90:0	0.08	90.0	0.08	0.01	0.33	0.35	0.33	0.35	X
94720	고 	∢ <	Monoxide diffusing capacity	0.00	1.10	0.97	Ϋ́	¥ S	0.06	1.16	1.03	¥ S	Ϋ́	× }
94725	26	< <	Membrane diffusion capacity	0.26	0.09	0.08	0.09	0.08	0.0	0.36	0.35	0.36	0.35	₹×
94725			Membrane diffusion capacity	0.00	0.98	2.38	Y:	¥:	0.12	1.10	2.50	¥:	¥:	XX
94750	26		Pulmonary compliance study	0.23	1.85	1.47	AN O	NA V	0.05	2.13	0.31	NA 131	N N	××
	12		Pulmonary compliance study	0.00	1.78	1.40	S A	A N	0.04	1.82	1.44	A N	S A	X
94760		- -	Measure blood oxygen level	00.0	0.06	0.05	A A	A N	0.02	0.08	0.07	A A	Y Z	××
		. ∢	Measure blood oxygen level	0.00	0.93	0.59	Y Y	Ž Ž	0.10	1.03	0.69	Z	A A	X
94770		∢ <	Exhaled carbon dioxide test	0.15	0.83	0.77	¥ S	¥ S	0.08	1.06	00.0	A S	A S	× }
94770	 OZ L		Exhaled carbon dioxide test	0.0	0.04 40.0	0.04	0.0 4 ∆	40.0 A A	0.0	0.20	0.20	0.20 NA	0.20 AN	X X
95004	2 !		Percut allergy skin tests	0.00	0.16	0.12	Ž	Ž	0.01	0.17	0.13	Ž	¥ Z	X
95010			Percut allergy titrate test	0.15	0.29	0.31	0.04	90:0	0.01	0.45	0.47	0.20	0.22	X
95075		∢ ∢	id allergy titrate-drug/bug	cr.0	0.20	0.16	0.0 4 A	0.0 NA	0.0	0.36	0.32	0.50 NA	O S S	×××
		< <		0.00	0.24	0.17	N A	Ž		0.25	0.18	Z Z	₹ Z	X
95028		∢ •	ld allergy test-delayed type	0.00	0.29	0.25	Ϋ́	Ž:	0.01	0.30	0.26	Ϋ́	Ϋ́	X
95044			Allergy patch tests	900	ა . ა .	0.19	Z Z	Z Z	0.0	0.16	0.20	Z Z	¥ ¤	××
95056			Photosensitivity tests	0.00	1.1	0.43	ΣŽ	ΣŽ	0.0	1.20	0.44	Z Z	ΣŽ	X
95060		∢ •	Eye allergy tests	0.00	0.74	0.45	Ϋ́	¥:	0.02	0.76	0.47	¥:	Ϋ́	X
95055			Nose allergy test	0.00	0.68	0.32	Z Z	Z Z	D. O	0.69	0.33	Z Z	Z Z	×××
			Bronchial allergy tests	0.00	0.88	2.42	Y Y	Ž	0.02	06:0	2.44	Z Z	₹ Z	X
95075		⋖ <	Ingestion challenge test	0.95	0.66	0.78	0.25	0.35	0.03	1.64	1.76	1.23	1.33	X }
95115		∢ ∢	Provocative testing	0.00	0.34	0.35	¥ ¥	ž ž	0.02	0.36	0.37	Z Z	¥ ¥	žž
			Immunotherapy injections	0.00	0.27	0.44	N A	Z Z	0.02	0.29	0.46	Z Z	N A	X
95144			Antigen therapy services	0.06	0.26	0.21	0.02	0.02	0.0	0.33	0.28	0.00	0.00	××
95146			Antigen therapy services	0.00	0.66	0.50	0.02	0.03	0.0	0.73	0.57	0.0	0.10	ξ× ×
		⋖ ·	Antigen therapy services	0.00	0.64	0.48	0.05	0.05	0.01	0.71	0.55	0.09	0.00	X
95148			Antigen therapy services	0.00	0.95	0.67	0.02	0.03	0.01	1.02	0.74	0.00	0.10	× }
95165			Antigen therapy services	0.00	0.25	0.92	0.02	0.03	0.0	0.32	0.39	60.0	0.00	žž
			Antigen therapy services	90.0	0.20	0.15	0.05	0.03	0.01	0.27	0.22	0.09	0.10	XX
95180			Rapid desensitization	2.01	1.59	1.93	0.72 NA	0.88	0.0	3.64	3.98	2.77	2.93 NA	××
95251			Gluc monitor, cont, phys i&r	0.52	0.16	0.18	0.16	0.18	0.02	0.70	0.72	0.70	0.72	₹×
			Multiple sleep latency test	1.88	7.14	14.77	N	¥	0.43	9.42	17.08	NA	Ą Ą	X
95805	26		Multiple sleep latency test	1.88	0.49	0.62	0.49	0.62	0.09	2.46	2.59	2.46	2.59	×
95805	<u></u>		Multiple sleep latency test	0.00	3.97	3.50	Z Z	A A	9.0 9.0 0.0	6.99	14.49	A N	A Z	××
95806	26		Sleep study, unattended	1.66	0.48	0.53	0.48	0.53	0.08	2.22	2.27	2.22	2.27	X
95806	TC	_	Sleep study, unattended	0.00	3.48	2.97	NA	NA	0.31	3.79	3.28	NA	NA	XX
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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

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CPT 1 HCPCS 2	Wod	Status	Description	Physician work RVUs ³	Fully im- plement- ed non- facility PE RVUs	Year 2007 transi- tional non-facil- ity PE RVUs	Fully implemented facility	Year 2007 transi- tional fa- cility PE RVUs	Mal-prac- tice RVUs	Fully implemented non-facility	Year 2007 transi- tional non-facil- ity total	Fully implemented facility	Year 2007 transi- tional fa- cility total	Global
95807	26	∢∢	Sleep study, attended	1.66	13.62	12.32	NA 0.48	NA 0.52	0.50	15.78	14.48	NA 2.22	NA 2.26	××
95807			Sleep study, attended	0.00	13.14	11.80	¥:	Y :	0.42	13.56	12.22	Y S	¥2	X
95808	26		Polysomnography, 1–3 Polysomnography, 1–3	2.65	16.81	14.13	NA 0.66	N O	0.55	3.44	17.33	8 NA	ν Α 24	××
	12		Polysomnography, 1–3	0.0	16.15	13.27	Z Y	N N	0.42	16.57	13.69	Z	S A	X
95810			Polysomnography, 4 or more	3.52	19.68	18.08	A S	A S	0.59	23.79	22.19	¥ S	¥ Ş	X
95810			Polysomnography, 4 or more	3.35 0.00	18.74	16.96	9.9 4 A	¥ .	0.17	19.16	17.38	86.4 So.4	8. A	žž
	2 !		Polysomnography w/cpap	3.79	21.86	19.90	Z Z	¥	0.61	26.26	24.30	¥.	Z Z	×
95811	26 7		Polysomnography w/cpap	3.79	1.00	1.20	0.5	1.20	0.18	4.97	5.17	4.97	5.17	× }
95812			Folyson nography wichap	1.08	5.82	4.49	ΣŽ	ΣZ	0.45	7.07	5.74	ΣŽ	ΣŽ	₹X
95812	-		Eeg, 41-60 minutes	1.08	0.30	0.41	0.30	0.41	0.00	1.44	1.55	1.44	1.55	××
95812	<u>'</u>	∢ <	Eeg, 41–60 minutes	0.00	5.53	4.08	Z Z	Z Z	0.11	5.64	4.19	Z Z	Z Z	× }
95813	26	_	Eeg, over 1 hour	73	0.33	0.65	0.48	0.65	0.20	0.40	7.24	230	74.5	XX
	12		Eeg, over 1 hour	0.00	6.07	4.77	Z Z	N	0.11	6.18	4.88	N N	Ϋ́	X
		⋖	Eeg, awake and drowsy	1.08	5.22	4.10	¥	NA	0.16	6.46	5.34	NA	N	XX
95816	26. T		Eeg, awake and drowsy	- 08 - 08	0.29	0.42	0.29	0.42	0.00	1.43	1.56	1.43	1.56	×
95819			Eeg, awake and asleep	1.08	6.07	3.76	ΣŽ	Z Z	0.10	7.31	5.00	Z Z	¥ ₹	{ ×
			Eeg, awake and asleep	1.08	0.29	0.42	0.29	0.42	0.00	1.43	1.56	1.43	1.56	X
95819	_		Eeg, awake and asleep	0.00	5.77	3.34	Y S	¥ Z	0.10	87	3.44	¥ Z	Y S	× ×
95822	. 6		Eeg, coma or sleep only		0.45 0.00	4.82	A C	NA O 40	0.0	0.72	60.09	NA 1	NA PA	×××
95822			Eeg, coma or sleep only	0.0	5.16	4.40	2.53 AA	NA A	0.13	5.29	4.53	P N	S A	×××
	26 .		Eeg, cerebral death only	0.74	0.20	0.28	0.20	0.28	0.04	0.98	1.06	0.98	1.06	××
95827			Eeg, all night recording	1.08	11.40	4.88	NA S	NA S	0.19	12.67	6.15	¥ E	A F	××
95827			Eeg, all night recording	00:0	11.13	4.51	25.5 A	S S	0.00	11.27	4.65	ΞŽ	₹	××××××××××××××××××××××××××××××××××××××
	-		Surgery electrocorticogram	6.20	25.15	29.61	N N	NA	0.50	31.85	36.31	NA	N	××
95829	 76		Surgery electrocorticogram	6.20	1.74	2.18	1.74	2.18	0.48	8.42	8.86	8.42	8.86	×;
95830			Surgery electrocol accopiant	1.70	2.94	3.21	0.40	0.65	0.02	4.75	5.02	2.21	2.46	{×
		⋖	Limb muscle testing, manual	0.28	0.38	0.44	0.09	0.12	0.01	0.67	0.73	0.38	0.41	××
95832	•	∢ <	Hand muscle testing, manual	0.29	0.36	0.34	0.09	0.1	0.02	0.67	0.65	0.40	0.42	××
95834			Body muscle testing, manual	0.60	0.55	0.61	0.13	0.25	0.03	1.18	1.24	0.80	0.88	XX
			Range of motion measurements	0.16	0.26	0.34	0.04	0.07	0.01	0.43	0.51	0.21	0.24	××
95852			Range of motion measurements	0.1	0.21	0.25	0.03	0.05	0.0	0.33	0.37	0.15	0.17	× š
9585/95860			Hensilon test	0.53	0.58	0.60	0.16 NA	LZ:O	0.02	0.13	- C	0.71 NA	0.76 NA	××
95860			Muscle test, one limb	0.96	0.31	0.39	0.31	0.39	0.02	1.32	1.40	1.32	1.40	××
95860	2		one limb	0.00	0.83	96.0	¥	NA	0.05	0.85	0.98	NA	Ą Ą	XX
95861	0			1.54	1.64	1.47	A S	A S	0.13	3.31	3.14	Z S	A S	× }
95861	0 Z		Muscle test, 2 limbs	4. C	0.49 7 1	0.63	0.49 NA	0.03 NA	0.0	12.10	0.24	Z.IO NA	AZ.Z	X X
95863				1.87		1.78	Z	₹	0.15	3.92	3.80	₹	Z Z	: X
95863	-			1.87	0.56	0.74	0.56	0.74	0.09	2.52	2.70	2.52	2.70	X
95863	<u></u>	∢ .	Muscle test, 3 limbs	0.00	1.34	±0.1	NA	ĭ	0.00	1.40	0.1.	ĭ	ĭ	YYY
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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

ADL	JENDON	ADDENDOM D.—MELAIIVE	LATIVE VALUE UNITS (AVOS) AND DELATED INFORMATION	JELA I EU	INTORINA		OSED IN DEI		MEDICA	DELEKIMINING IMEDICARE PAYMENTS FOR	בטן טואי	_/007	CONTINUED	<u>ت</u>
CPT 1 HCPCS 2	Wod	Status	Description	Physician work RVUs ³	Fully implemented nonfacility PE	Year 2007 transi- tional non-facil- ity PE RVUs	Fully implemented facility	Year 2007 transi- tional fa- cility PE RVUs	Mal-prac- tice RVUs	Fully implemented non-facility	Year 2007 transi- tional non-facil- ity total	Fully im- plement- ed facility total	Year 2007 transi- tional fa- cility total	Global
95864	26	۷ ۷ ۰		1.99	2.16	2.54	0.61	0.81	0.21	4.36	4.74	2.69	2.89	XX
95864			Muscle test, 4 limbs	0.00	1.55	1.73	Y Y	Y Y	0.12	3.00	3.10	∢ ∢ Z Z	4 4 2 2	××
				1.57	0.45	69.0	0.45	0.69	0.08	2.10	2.34	2.10	2.34	X
95865	 	∢ <		0.00	0.87	0.73	¥ ž	Y S	0.03	0.90	0.76	¥ S	¥ ž	× }
95866	26	< <	Muscle test, nemidiaphragm	1.25	0.39	0.90	0.39	0.52	0.07	1.71	1.84	 7	1.84 1.84	₹×
95866	2	⋖ ·	Muscle test, hemidiaphragm	0.00	0.92	0.38	¥.	N S	0.03	0.95	0.41	N	A :	XX
95867		∢ ⊲	Muscle test cran nerv unilat	0.79	1.10	0.97	Z S	N S	0.07	1.96	1.83	¥ Z	A F	××
95867		(∢	Muscle test cran nerv unilat	0.00	0.88	0.92	NA NA	NA A	0.0	0.92	0.70	ž	<u>+</u> &	₹×
95868	: 6		cran nerve	1.18	1.40	1.26	A S	N S	0.10	2.68	2.54	₹!	Y S	X
92868	0 C		Muscle test cran nerve bilat	<u> </u>	1.07	0.47	45.0 AN	74.0 VAN	0.00	 	0.70	C: AN	O.Y.	X X
95869		< ∢	Muscle test, thor paraspinal	0.37	1.02	0.53	¥ Z	Ž	0.0	1.43	0.94	Ž	¥ ×	××
95869	-			0.37	0.11	0.15	0.11	0.15	0.05	0.50	0.54	0.50	0.54	XX
95869	_		Muscle test, thor paraspinal	0.00	0.90	0.38	¥:	¥:	0.05	0.92	0.40	¥:	¥ :	X
95870		∢	Muscle test, nonparaspinal	0.37	0.98	0.52	A F	N C	9.0 40.0	0.39	0.93	NA OZ	NA PA	××
95870		< ∢	Muscle test, nonparaspinal	0.0	0.87	0.38	Z Z	Z Z	0.02	0.89	0.40	N A	Y Y	××
	-	4	Muscle test, one fiber	2.00	1.39	1.27	A A	NA	0.13	3.52	3.40	NA	A	××
95872			Muscle test, one fiber	2.00	0.62	0.63	0.62	0.63	0.08	2.70	2.71	2.70	2.71	X }
95872	<u>:</u>		Muscle test, one fiber	0.00	0.77	0.64	A A	Z Z	0.05	1.35	0.69	A N	A N	XXX
			Guide nerv destr, elec stim	0.37	0.11	0.15	0.11	0.15	0.02	0.50	0.54	0.50	0.54	777
95873	2		Guide nerv destr, elec stim	0.00	0.82	0.36	¥:	¥:	0.02	0.84	0.38	¥:	₹ Z	ZZZ
95874	. 6	∢ ⊲	Guide nery destr, needle emg	0.37	0.95	0.52	A C	N O	0.0 40.0	1.36	0.93	NA F3	NA 55	777
95874		< <	Guide nerv destr, needle emg	0.0	0.83	0.36	Z Z	Z Z	0.02	0.85	0.38	Z Z	S A	777
95875		۷.	Limb exercise test	1.10	1.29	1.41	¥ ¿	A S	0.11	2.50	2.62	¥,	¥,	X
95875	26. T		Limb exercise test	c	0.31	0.43	0.31	0.43 NA	0.05	1.46	1.58	1.46 NA	1.58 NA	××
95900			Motor nerve conduction test	0.42	0.93	1.18	₹ ₹	ΣŽ	0.0	1.39	1.64	Z Z	¥ Ž	×××
95900	C(I)		Motor nerve conduction test	0.42	0.14	0.17	0.14	0.17	0.05	0.58	0.61	0.58	0.61	X
95900			Motor nerve conduction test	0.00	0.79	1.01	¥ ž	Y S	0.02	0.81	1.03	Y S	¥ \$	××
95903	26		Motor nerve conduction test	0.60	0.17	0.24	0.17	0.24	0.03	0.80	0.87	0.80	0.87	{×
	2		Motor nerve conduction test	0.00	0.85	0.91	¥ Z	NA	0.02	0.87	0.93	Z	A A	×
95904			Sense nerve conduction test	0.34	0.86	1.03	Y S	¥ ;	0.04	1.24	1.41	Ϋ́	Υ Y Y	X
95904	7 Z		Sense nerve conduction test	0.0 8.0 8.0	0.10	0.14	01.0 AN	41.0 AN	0.02	0.46	0.50	0.46 NA	0.50 NA	××
95920			Intraop nerve test add-on	2.11	1.76	2.12	Ž	Ž	0.23	4.10	4.46	Ž	ž Ž	ZZZ
95920	26	۷.	Intraop nerve test add-on	2.11	0.64	0.86	0.64	0.86	0.16	2.91	3.13	2.91	3.13	ZZZ
95920			Intraop nerve test add-on	00.0	1.12	1.26	Y Z	Z Z	0.07	1.19	1.33	Y Z	A A	77.7
95921			Autonomic nerv function test	0.90	0.24	0.31	0.24	0.31	0.0	1.18	1.25	1.18	1.25	×××
	2		Autonomic nerv function test	0.00	0.89	0.51	A A	NA	0.05	0.91	0.53	NA	A A	××
95922			Autonomic nerv function test	0.96	1.63	0.99	N S	NA S	0.07	2.66	2.02	Y S	¥ S	× š
95922			Autonomic nery function test	00.0	1.37	0.63	NA AA	V.S.	0.00	139	0.65	o AN	8. N	XX
	2		Autonomic nerv function test	0.90	2.10	1.98	¥ Y	Z	0.07	3.07	2.95	Z Z	A N	X
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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

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CPT 1 HCPCS 2	Mod Status	Description	Physician work RVUs ³	Fully implemented nonfacility PE	Year 2007 transi- tronal non-facil- ity PE RVUs	Fully implemented facility	Year 2007 transi- tional fa- cility PE RVUs	Mal-prac- tice RVUs	Fully implemented non-facility	Year 2007 transi- tional non-facil- ity total	Fully implemented facility	Year 2007 transi- tional fa- cility total	Global
95923	26 A	Autonomic nery function test	0.90	0.23	0.34	0.23	0.34	0.05	1.18	1.29	1.18	1.29	XX
95923		Autonomic nerv function test	0.00	1.87	1.64	¥ ž	¥ ž	0.02	1.89	1.66	¥ ž	¥ ź	××
95925	26 A	Somatosensory testing	4.50	0.0	1.00	0.16	12.0	0.0	0.79	0.79	0.74	62.0	{ ×
: :		Somatosensory testing	00.0	2.99	1.43	A Z	ž Ž	0.00	3.05	1.49	Z	Z	××
95926		Somatosensory testing	0.54	3.00	1.61	A V	¥	0.09	3.63	2.24	¥ Y	A N	××
95926		Somatosensory testing	0.54	0.15	0.21	0.15	0.21	0.03	0.72	0.78	0.72	0.78	X
95926	C	Somatosensory testing	0.00	2.85	1.40	Υ S	¥ ž	0.06	2.91	1.46	¥ ž	Y S	× }
95927	26 A A	Somatosensory testing	0.04	3.04		0 15	Z 0	0. O	3.08	0.81	Z 23	Z 6	X X
95927		Somatosensory testing	00.0	2.88	1.40	Y Z	S N	0.06	2.94	1.46	Z Z	Z Z	×××
95928		C motor evoked, uppr limbs	1.50	3.93	3.26	Υ V	¥ V	0.09	5.52	4.85	N A	N A	××
95928	26 A	C motor evoked, uppr limbs	1.50	0.44	0.60	44.5	09.0	0.06	2.00	2.16	2.00	2.16	××
•	-	C motor evoked lwr limbs	0.00	3.40 4.24	2.00	ζ Δ Ζ Ζ	ζ Δ Ζ Ζ	50.0	. c. c.	2.03 7.03	ζ <u>Φ</u>	ζ Δ Ζ Ζ	{
95929	26 A	motor	1.50	0.44	09:0	6 4 4 5	09:0	0.00	2.00	2.16	2.00	2.16	XX X
:		Visual evoked potential test	0.35	2.60	2.34	Υ Σ	¥	0.03	2.98	2.72	Ą	A N	××
95930		Visual evoked potential test	0.35	0.10	0.14	0.10	0.14	0.05	0.47	0.51	0.47	0.51	××
95930	TC	Visual evoked potential test	0.00	2.50	2.20	Y :	₹:	0.01	2.51	2.21	¥:	Y :	X
95933		Blink reflex test	0.59	- 0	40.1	Z Z	A C	0.0	//.	1.73	Y C	NA P	X
95955		Blink reflex test	0.39	0.0	0.22	À N	NA NA	0.00	0.00	0.00	0.00 NA	0.03 AN	×××
		H-reflex test	0.51	0.88	0.54	Z Z	Z Z	0.00	2.5	1.09	₹ Z	Z Z	XX
95934		H-reflex test	0.51	0.16	0.21	0.16	0.21	0.02	0.69	0.74	69.0	0.74	××
95934	TC		0.00	0.72	0.34	A V	A A	0.02	0.74	0.36	A A	N A	××
95936		H-reflex test	0.55	0.60	0.49	Y Y	¥ S	0.05	1.20	1.09	ΣĮ	A S	XX
95936			0.55	7.0	0.22	7.0	0.22	0.03	0.75	0.80	0.75	0.80	×;
95937		Neuromuscular inotion test	0.00	9.0	72.0	ξ δ 2 Ζ	¥ ¥	0.02	0.40	1.43	Y Y	Z Z	XX
95937	26 A	Neuromuscular junction test	0.65	0.19	0.25	0.19	0.25	0.08	0.92	0.98	0.92	0.98	XX
	:	Neuromuscular junction test	0.00	0.71	0.43	Υ V	Ą Z	0.05	0.73	0.45	Ϋ́	A N	××
95950	-	Ambulatory eeg monitoring	1.51	4.87	4.17	A V	¥.	0.51	6.89	6.19	A A	N A	××
95950	:	Ambulatory eeg monitoring	1.51	0.40	0.58	0.40	0.58	0.08	1.99	2.17	1.99	2.17	XX
95950		Ambulatory eeg monitoring	0.00	4.46	3.59	NA P	A S	0.43	4.89	4.02	Z Z	N S	×
95951		FEG monitoring/videorectia	66.6	7 13	7.51	5 AN	AN AN	0.32	11.03	11 41	4 N	† AN	XXX
95953	26 A	EEG monitoring/computer	3.30	06:0	1.19	06.0	1.19	0.17	4.37	4.66	4.37	4.66	XX
95953	TC	EEG monitoring/computer	0.00	6.23	6.32	NA	A A	0.43	99.9	6.75	A A	NA	××
95954		EEG monitoring/giving drugs	2.45	4.85	4.39	A S	¥ ¿	0.19	7.49	7.03	A S	A S	X
95954		EEG monitoring/giving drugs	2.45	0.50	0.91	0.50	P.O.	0.13	3.08	3.49	3.08	3.49	× }
•		FEG Horing Surgery	0.0	2. c	0.40	ζ Δ Ζ Ζ	Z Z	0.00	4.4	9.00 9.00 9.00 9.00	Y Y	Υ Δ Ζ Ζ	×××
95955	26 A	EEG during surgery	5 6	0.28	0.34	0.28	0.34	0.05	1.34	1.40	13.5	1.40	××××××××××××××××××××××××××××××××××××××
		EEG during surgery	0.00	3.23	2.29	AZ	¥.	0.17	3.40	2.46	Ž	Z Y	XX
92626	A	Eeg monitoring, cable/radio	3.08	16.73	15.77	NA	A A	0.59	20.40	19.44	A A	NA	××
95956	-	Eeg monitoring, cable/radio	3.08	0.97	1.22	0.97	1.22	0.16	4.21	4.46	4.21	4.46	××
95956	TC	Eeg monitoring, cable/radio	0.00	15.76	14.55	Y :	₹:	0.43	16.19	14.98	¥:	Y :	X
95957			86.1	5.80	3.36	A P	Z C	0.23	28.01	5.57	A C	NA O	× }
93937		digital analysis	96. 0	0.0 4 0 4 0	0.7.0	φ. Δ Δ	AN AN		20.5	2.00	2.03 AN	2.00 AN	×××
95958		EEG monitoring/function test	4.24	6.67	4.29	₹ Ž	≦ ₹	0.34	11.25	8.87	Z Z	₹₹	XX
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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

JOK YOL	JEINDOIN	ADDENDOM B.—- NELATIVE	VALUE UNITS (NVUS) A	חבראובט	ט האפולא ו פראטוטפואי שאוויווויום און ספט אטון אווירטדאון טפו אפוד סאו			ייייייייייייייייייייייייייייייייייייייי	בְּלֵבְיִלְ בְּלֵבְיִלְ	1 1 1 1 1 1	בט מואו	/007		ם
CPT 1 HCPCS 2	Mod	Status	Description	Physician work RVUs ³	Fully implemented non- facility PE RVUs	Year 2007 transi- tional non-facil- ity PE RVUs	Fully implemented facility	Year 2007 transi- tional fa- cility PE RVUs	Mal-prac- tice RVUs	Fully im- plement- ed non- facility total	Year 2007 transi- tional non-facil- ity total	Fully im- plement- ed facility total	Year 2007 transi- tional fa- cility total	Global
95958	26 TC	۷4.	EEG monitoring/function testEEG monitoring/function test	4.24	1.21	1.62	1.21 NA	1.62 NA	0.21	5.66	6.07	5.66 NA	6.07 NA	XX
95961	_		Electrode stimulation, brain Electrode stimulation. brain	2.97	3.06	1.21	NA 0.87	A 12	0.55	6.58	6.26	4.32	A 4.66	××
	TC		Electrode stimulation, brain	0.00	2.19	1.53	¥:	¥:	0.07	2.26	1.60	₹:	₹:	X
95962	26		Electrode stim, brain add-on Electrode stim, brain add-on	8. 8. 2. 5.	0.88	1.26	NA 0.88	1.26	0.39	5.76	6.17	4 A 4	4 79	772
	21		Electrode stim, brain add-on	0.00	1.28	1.30	Z Y	N A	0.07	1.35	1.37	₹ Z	Z Z	222
95965	26		Meg, spontaneous	7.99	2.23	3.13	2.23	3.13	0.46	10.68	11.58	10.68	11.58	××
95967	26	(∢	Meg, evoked, each addll	3.49	1.10	1.16	1.10	1.16	0.16	4.75	4.81	4.75	4.81	ZZZ
95970		∢ •	Analyze neurostim, no prog	0.45	0.88	0.86	0.12	0.14	0.03	1.36	1.34	0.60	0.62	× š
95971		∢ ∢	Analyze neurostim, simple Analyze neurostim, complex	0.78	0.62	1.21	0.20	0.22	0.07	1.47	2.85	2.10	2.12	ž ž
		∢.	Analyze neurostim, complex	0.92	0.55	0.60	0.24	0.32	0.07	1.54	1.59	1.23	1.31	222
95974		∢ <	Cranial neurostim, complex	3.00	1.45	1.64	0.82	1.18	0.16	4.61	4.80	3.98	4.34 a A B	XXX
95978			Graffia Hedrostini, complex	3.50	181	191	1.02	1 23	0.7	5.49	5.59	4.70	16.4	3×
			Analyz neurostim brain addon	1.64	0.71	0.83	0.45	0.63	0.08	2.43	2.55	2.17	2.35	ZZZ
95990		∢ <	Spin/brain pump refil & main	0.00	1.65	1.54	N S	N P	0.06	1.71	1.60	Ϋ́	A S	× }
00096		∢ ∢	Spir/orani pump reili & main	1.80	00. A	c. A	0.58	0.54	0.00	2.43 A A	4.5.A A A	2.49	2.45	ž
		<	Motion test w/ft press meas	2.15	₹ Z	N A	0.51	0.62	0.10	N	N A	2.76	2.87	X
96002		∢ •	Dynamic surface emg	0.41	₹ ż	¥ ż	0.10	0.14	0.02	Y S	Ϋ́	0.53	0.57	X
96003		∢ ⊲	Dynamic line wire emg	0.37	A C	0 84	0.14	0.13	0.02	NA 277	80 S	0.53	2.0 2.0 2.0 2.0	ž ž
96101			Psycho testing by psych/phys	1.86	0.34	0.57	0.32	0.55	0.05	2.25	2.48	2.23	2.46	X
96102		∢ <	Psycho testing by technician	0.50	1.17	0.79	0.09	0.15	0.01	1.68	1.30	0.60	99.0	× }
96105		< <	Assessment of aphasia	0.00	2.04	1.84	© ₹	<u>?</u> ₹	0.02	2.22	2.02	NA NA	S Z	ξ× ×
		⋖	Developmental test, lim	0.00	0.18	0.18	N A	¥	0.18	0.36	0.36	Z	N A	××
96111			Developmental test, extend	2.60	0.64	0.95	A 5	NA S	0.18	3.42	3.73	NA AF	 8 8 8	××
96118		< <	Neuropsych tst by psych/phys	1.86	0.79	1.24	0.31	0.55	0.18	2.83	3.28	2.35	2.59	××××××××××××××××××××××××××××××××××××××
96119		∢ •	Neuropsych testing by tech	0.55	1.49	1.14	0.09	0.17	0.18	2.22	1.87	0.82	0.90	X
96150			Neuropsych ist admin W.comp	0.50	0.10	0.75	60.0	0.15	0.02	0.61	0.67	0.62	0.67	žž
			Assess htth/behave, subseq	0.48	60.0	0.16	0.08	0.15	0.01	0.58	0.65	0.57	0.64	××
96152		∢ ⊲	Intervene hith/behave, indiv	0.46	0.09	0.15	0.08	0.14	0.0	0.56	0.62	0.55	0.61	××
96154		< <	Interv htth/behav, fam w/pt	0.45	0.09	0.15	0.08	0.14	0.0	0.55	0.61	0.54	0.60	××××××××××××××××××××××××××××××××××××××
			Interv hlth/behav fam no pt	0.44	0.10	0.16	0.10	0.15	0.02	0.56	0.62	0.56	0.61	X
96401		∢ ⊲	Chemo, anti-neopl, sq/im	0.21	1.88	1.35	Z Z	¥ Z	0.0	2:10	1.57	Y Z	¥ Ş	žž
96405		(∢	Chemo intralesional, up to 7	0.52	3.53	2.71	0.22	0.24	0.03	4.08	3.26	0.77	0.79	000
96406			Chemo intralesional over 7	0.80	3.27	3.08	0.27	0.29	0.03	4.10	3.91	1.10	1.12	00 }
96411			Chemo, iv push, addl drug	0.20	1.51	1.59	₹Ž	₹₹	0.00	1.77	1.85	ΣŽ	₹ ₹	X
		∢.	Chemo, iv infusion, 1 hr	0.28	3.66	4.07	¥:	A :	0.08	4.02	4.43	¥:	¥:	X
96415			Chemo, iv infusion, addl hr	0.19	0.66	0.74	₹ ź	¥ ź	0.07	0.92	1.00	Y S	₹ Ş	222
96417			Chemo iv infus each addl seq	0.21	1.74	1.90	ξŞ	ΣŽ	0.00	2.02	2.18	₹ ₹	¥ ₹ ₹	XXX ZZZ ZZZ
FOO!	7	⊣ :		1 1 4			0							

ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

	ADDENDOM B.		TIEFATIVE VALUE (11403) AIND I	ובראובה		NI GSED NOTIVINO ONI	ב		מייין איי	טואוואו א ו דר		/003	CONTINOED	ב
CPT¹ HCPCS²	Мод	Status	Description	Physician work RVUs ³	Fully implemented non- facility PE RVUs	Year 2007 transi- tional non-facil- ity PE RVUs	Fully implemented facility	Year 2007 transi- tional fa- cility PE RVUs	Mal-prac- tice RVUs	Fully im- plement- ple non- facility total	Year 2007 transi- tional non-facil- ity total	Fully implemented facility	Year 2007 transi- tional fa- cility total	Global
96420		۷ ۷	Chemo, ia, push tecnique	0.17	2.74	2.69	A N	A N	0.08	2.99	2.94	A N	Z Z	X X
96423		< ∢	Chemo ia infuse each addl hr	0.17	1.88	1.89	ž	Ž Ž	0.02	2.07	2.08	₹ Ž	₹ Ž	ZZZ
96425		⋖ ·	Chemotherapy, infusion method	0.17	4.56	4.50	A S	Y N	0.08	4.81	4.75	¥.	Y Y	XX
96440		∢ <	Chemotherapy, intracavitary	2.37	5.55	7.50	0.98	1.17	0.17	8.09	10.04	3.52	3.71	000
96450		(∢	Chemotherapy, Intracavitary	1.53	5.11	0.40	0.95	7	. O	6.73	9.78	2.27	0.40	000
		. ∢	Refill/maint, portable pump	0.21	3.17	3.62	§ ₹	Ž	0.00	3.44	3.89	¥.	₹	X
96522		∢ ⊦	Refill/maint pump/resvr syst	0.21	2.76	2.68	Σź	A S	0.06	3.03	2.95	Y S	¥ ž	×
96542		- <	Irrig drug delivery device	0.04	3.59	4.09	0.33	0.58	0.0	0.70	4.91	1.15	140 40	ž×
		< <	Photodynamic tx, skin	0.00	3.70	2.40	¥	Ž	0.04	3.74	2.44	Ž	¥ ¥	X
96570		⋖ •	Photodynamic tx, 30 min	01.1	₹ Z	Y S	0.42	0.38	0.11	Y S	Y S	1.63	1.59	777
96900		∢ ⊲	Photodynamic tx, addi 15 min	0.33	AA O	NA 0.47	0.20 NA	0. U	0.03	A C	NA 0 49	87.0 NA	70 V0	77X
96902		<u> </u>	Trichogram	0.41	0.11	0.16	0.09	0.14	0.01	0.53	0.58	0.51	0.56	X
96910		⋖	Photochemotherapy with UV-B	0.00	1.98	1.24	Ϋ́	Ϋ́	0.04	2.02	1.28	¥	Y Y	×
96912		∢ <	Photochemotherapy with UV-A	0.00	2.55	1.58	₹ S	Z Z	0.05	2.60	1.63	¥ ž	¥ S	× }
96970		(∢	Filotocilefilotiferapy, OV-A of B	0.00	3.54	07.7	55.5	0.56	0.0	471	3.96	- C	1 73	X 00
		< <	Laser tx, skin 250–500 sq cm	1.17	3.44	2.82	0.52	0.56	0.03	4.64	4.02	1.72	1.76	000
96922		⋖	Laser tx, skin > 500 sq cm	2.10	4.53	3.75	1.00	0.72	0.04	6.67	5.89	3.14	2.86	000
97001		∢ •	Pt evaluation	1.20	0.69	0.74	0.30	0.41	0.05	1.94	1.99	1.55	1.66	X
97002		∢ <	Pt re-evaluation	0.60	0.43	0.44	0.14	0.21	0.02	1.05	1.06	0.76	0.83	×××
97003		< <	Ot re-evaluation	0.60	0.55	0.64	0.38	0.39	0.00	1.17	1.26	0.80	0.81	X X
		Ф	Hot or cold packs therapy	90.0	0.07	90.0	A A	Ϋ́	0.01	0.14	0.13	Ϋ́	A A	×
97012		⋖.	Mechanical traction therapy	0.25	0.15	0.14	₹	A S	0.01	0.41	0.40	¥ 8	ΣŞ	X
97014		_ <	Electric stimulation therapy	8 2	0.19	91.0	40.0 VA	CL.O	0.0	0.38	0.38	0.23 NA	0.34 4 N	×××
97018		< <	Paraffin bath therapy	0.00	0.17	0.12	₹Ž	₹Ž	0.0	0.24	0.19	₹₹	₹₹	ξ× ×
		⋖	Whirlpool therapy	0.17	0.34	0.24	A	A	0.01	0.52	0.42	Ϋ́	₹ Z	×
97024		۷.	Diathermy e.g., microwave	90.0	0.08	0.07	¥:	¥:	0.01	0.15	0.14	¥:	¥:	X
97026		∢	Intrared therapy	90.0	0.07	0.06	Z Z	A N	0.0	41.0	0.13	Y Z	Z Z	××
97032		< ∢	Electrical stimulation	0.25	0.21	0.17	₹ ¥	ΣŽ	0.0	0.47	0.43	₹	₹	X
97033		⋖	Electric current therapy	0.26	0.46	0.32	Ϋ́	Ϋ́	0.01	0.73	0.59	Ϋ́	Y Y	××
97034		< •	Contrast bath therapy	0.21	0.21	0.17	¥ i	¥ S	0.01	0.43	0.39	₹ ż	Y :	×
97035		∢ ⊲	Ultrasound therapy	12.0	0.11	0.10	Z Z	A A	0.0	0.33	0.32	Z Z	Z Z	××
97110		. ∢	Therapeutic exercises	0.45	0.33	0.29	Ž	Ž	0.02	0.80	0.76	Ž	¥ ¥	X
97112		⋖	Neuromuscular reeducation	0.45	0.36	0.32	A V	Ϋ́	0.01	0.82	0.78	¥	A A	××
97113		∢ •	Aquatic therapy/exercises	44.0	0.56	0.43	₹:	¥:	0.01	1.01	0.88	¥:	₹:	X
97116		∢ <	Gait training therapy	0.40	0.29	0.25	¥ S	¥ S	0.0	0.70	0.66	¥ ž	¥ Ş	×××
97140		< <	Manual therapy	0.43	0.30	0.26	₹	₹Ž	0.0	0.74	0.70	₹Ž	₹	XX
		⋖	Group therapeutic procedures	0.27	0.23	0.19	A	A	0.01	0.51	0.47	Ϋ́	₹ Z	×
97530		⋖・	Therapeutic activities	4.6	0.40	0.34	¥:	Ž:	0.01	0.85	0.79	₹:	Ψ.	X
97532		∢ <	Cognitive skills development	44.0	0.23	12.0 7.0	Z Z	A N	0.0	0.68	0.66	¥ Z	Y Y	×××
97535		< <	Self care mngment training	0.45	0.39	0.35	Z Z	Z Z	0.0	0.85	0.81	Z Z	Z Z	₹X

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

ADL	IEINDOINI MENDOINI	ADDENDOM B.——DELATIVE	VALUE OINIIS (NVOS)	וובראובה	טיייפועזא ו פראטיטפאין שייואייפן פע און טפט אטן אייטרטיאין טפובאפן טאי)))),		יייור - חר	ביט מואוי	7007		ב
CPT 1 HCPCS 2	Mod	Status	Description	Physician work RVUs ³	Fully implemented non- facility PE RVUs	Year 2007 transi- tional non-facil- ity PE RVUs	Fully implemented facility	Year 2007 transi- tional fa- cility PE RVUs	Mal-prac- tice RVUs	Fully implemented non-facility total	Year 2007 transi- tional non-facil- ity total	Fully im- plement- ed facility total	Year 2007 transi- tional fa- cility total	Global
97537 97542		44	Community/work reintegration	0.45	0.29	0.27	₹ ₹	ZZ	0.01	0.75	0.73	<u> </u>	₹ ₹ Z Z	××
97597		4 4	Active wound care/20 cm or <	0.58	1.14	0.78	A A	A A	0.05	1.77	1.41	Y Y	A A	××
		∶∢	Neg press wound tx, < 50 cm	0.55	0.43	0.36	0.13	0.20	0.05	1.00	0.93	0.70	0.77	X
97606		∢ ◊	Neg press wound tx, > 50 cm	0.60	0.44	0.37	0.14 AN	0.22	0.03	1.07	1.00	0.77	0.85 NA	××
97755		< <	Assistive technology assess	0.62	0.29	0.28	ΣŽ	¥ Z	0.02	0.93	0.92	₹₹	₹	ξ× ×
97760		< <	Orthotic mgmt and training	0.45	0.44	0.37	0.10	0.18	0.03	0.92	0.85	0.58	0.66	× }
97762		< <	C/o for orthotic/prosth use	0.25	0.76	0.50	0.00	0.16	0.02	1.03	0.78	0.33	0.43	₹×
97802		۷.	Medical nutrition, indiv, in	0.00	0.35	0.44	¥ :	¥:	0.01	0.36	0.45	Y :	¥:	X
97803		∢ ላ	Med nutrition, indiv, subseq	00.0	0.31	0.43	A A	A A	0.0	0.32	0.44	A A	Z Z	××
		z	Acupunct w/o stimul 15 min	09.0	0.25	0.35	0.13	0.21	0.03	0.88	0.98	0.76	0.84	X
97811		zz	Acupunct w/o stimul addl 15m	0.50	0.15	0.23	0.11	0.17	0.03	0.68	0.76	0.64	0.70	223
97813		zz	Acupunct w/stimul 15 min	0.65	0.27	0.37	0.0	0.23	0.03	0.95	0.03	0.83	0.9	¥ £
98925		. ∢	Osteopathic manipulation	0.45	0.28	0.31	0.11	0.13	0.02	0.75	0.78	0.58	09:0	000
98926		۷.	Osteopathic manipulation	0.65	0.36	0.40	0.16	0.23	0.03	1.04	1.08	0.84	0.91	000
98927		∢ ⊲	Osteopathic manipulation	1.03	0.44	0.49	12.0 52.0	0.27	0.03	1.34	1.39	1.1	7.1	000
98929		< <	Osteopathic manipulation	1.19	0.56	0.64	0.28	0.35	0.05	1.80	1.88	1.52	1.59	000
98940		۷.	Chiropractic manipulation	0.45	0.20	0.22	0.12	0.12	0.01	0.66	0.68	0.58	0.58	000
98941		⋖ <	Chirographic manipulation	0.65	0.26	0.29	0.17	0.17	0.01	0.92	0.95	0.83	0.83	000
98942		ζZ	Chiropractic manipulation	0.97	0.17	0.22	0.09	0.23	0.02	0.58	0.63	0.50	0.55	3 X
		V	Anogenital exam, child	1.75	1.50	1.70	0.49	0.54	0.08	3.33	3.53	2.32	2.37	000
99175		< <	Induction of vomiting	0.00	0.33	 6	A S	A S	0.10	0.43	1.23	N S	Y S	× }
99185		< <	nyperband oxygen trerapy Regional hypothermia	9.00	1.67	0.90	0.30 A	8. S	0.0	1.71	0.94	S S	<u>o</u> ₹	XX
		⋖	Total body hypothermia	0.00	1.41	1.70	A	A	0.45	1.86	2.15	NA	¥ Z	××
99195		⋖ ·	Phlebotomy	0.00	2.62	0.99	A A	N A	0.05	2.64	1.01	N	¥ Z	X
99201		∢ ላ	Office/outpatient visit, new	0.45	0.54	0.50	0.15	0.15	0.03	1.02	0.98	0.63	0.63	ž ž
99203		< ∢	Office/outpatient visit, new	1.34	1.09	1.12	0.41	0.46	0.09	2.52	2.55	1.84	1.89	X
99204		۷.	Office/outpatient visit, new	2.30	1.48	1.50	0.70	0.71	0.12	3.90	3.92	3.12	3.13	X
		< <	Office/outpatient visit, new	3.00	1.77	1.78	0.80	0.94	0.15	4.92	4.93	4.04	4.09	× }
99212		∢ ∢	Office/outpatient visit, est Office/outpatient visit, est	0.17	0.55	0.38	0.00	0.00	0.0	1.03	1.02	0.63	0.64	žž
		< <	Office/outpatient visit, est	0.92	0.76	0.71	0.28	0.25	0.03	1.71	1.66	1.23	1.20	X
99214		⋖	Office/outpatient visit, est	1.42	1.10	1.05	0.43	0.45	0.02	2.57	2.52	1.90	1.89	×
99215		∢ ◊	Office/outpatient visit, est	2.00	1.38 NA	1.34 4 N	0.60	0.64	0.08	3.46 NA	3.42 NA	2.68	2.72	××
99218		(∢	Observation care	1.28		Z Z	0.38	0.43	0.00	ZZ	Z Z	1.72	1.72	ž Ž
		⋖	Observation care	2.14	ΥZ	Ν	0.59	0.69	0.10	N A	N A	2.83	2.93	XX
99220		∢ ·	Observation care	2.99	Y :	¥:	0.84	0.98	0.14	ΥZ:	¥ :	3.97	4.11	X
99221		∢ ላ	Initial hospital care	1.88 7.6	Z Z	Y Z	0.54	0.47	0.07	Z Z	₹ Z	2.49	2.42	×××
99223		(∢	Initial hospital care	3.78	 Σ Ζ	Z Z	1.07	5.6.	0.13		Z Z	4.98	4.95	X X
99231		V	=	0.76	¥ X	Ν	0.24	0.23	0.03	N A	A A	1.03	1.02	XX
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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

7	ים הסקווסטר	- i	ILECTIVE VALUE CIVIS (11VOS) AND	ורבאור		0.00	ב ב ב) !!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!	בל היים היים היים היים היים היים היים היים	1	5	1007		ב
CPT 1 HCPCS 2	Mod St	Status	Description	Physician work RVUs ³	Fully implemented nonfacility PERVUs	Year 2007 transi- tronal non-facil- ity PE RVUs	Fully implemented facility	Year 2007 transi- tional fa- cility PE RVUs	Mal-prac- tice RVUs	Fully im- plement- ed non- facility total	Year 2007 transi- tional non-facil- ity total	Fully im- plement- ed facility total	Year 2007 transi- tional fa- cility total	Global
99232	A 4		Subsequent hospital care	1.39	A Z	Y Y	0.42	0.38	0.04	Y Z	4 4 2 2	1.85	1.81	××
99234	(∢		Observ/hosp same date	2.56	Z Z	Z Z	0.78	0.86	0.13	Z Z	Z Z	3.47	3.55	{×
	Α		Observ/hosp same date	3.41	NA	Ą Z	0.98	1.1	0.16	Ν	¥ N	4.55	4.68	××
99236	∀ •		Observ/hosp same date	4.26	¥ :	Y ?	1.23	1.39	0.19	Y S	¥:	5.68	5.84	X
99238	4 4		Hospital discharge day	2, 5	Υ Z	A Z	0.49	0.53	0.05	¥ Z	¥ Z	28.5	1.86	××
99241	(∢		Office consultation	0.64	0.66	0.65	0.22	0.22	0.02	1.35	1.34	0.91	0.91	XX
99242	∢		Office consultation	1.34	1.08	1.05	0.47	0.46	0.10	2.52	2.49	1.91	1.90	××
99243	₹ •		Office consultation	1.88	1.45	1.41	99.0	0.64	0.13	3.46	3.42	2.67	2.65	X
99244			Office consultation	3.02	1.95	1.86	1.09	0.96	0.16	5.13	5.04	4.27	4.14	×
99251	€ 4		Unice consultation	0.7	AZ AZ	2.20 AN	. c	0 2.0	0.2	0.23 AN	O.S.O A.N	1.36	1.31	XX
99252			Initial inpatient consult	1.50	Z Z	A N	0.50	0.50	0.09	Z Z	A A	2.09	2.09	××
99253	∢			2.27	Y V	A A	0.81	0.71	0.11	A A	Y Y	3.19	3.09	××
99254	< <		Initial inpatient consult	3.29	∀ \$ 2 2	Υ S	1.20	4. 6	0.13	Υ Ś	Υ S	4.62	4.46	× }
99255	<		Initial Inpatient consult	0.4 0.6	₹ ₹	¥ 4	04	ව. ව	0.0	4 4 2 2	4 4 2 2	5.58	9.00 9.00	<u> </u>
99282			Emergency dept visit	6.0	(4 2 Z	(4 2 Z	0.03	0.03	20.0	ζ	(4 2 Z	0.0	1.07	XX
	< <		Emergency dept visit	46.	Z Z	Z Z	0.24	0.29	0.09	Υ Z	Z Z	1.67	1.72	×
			Emergency dept visit	2.56	Y Z	A Z	0.45	0.47	0.14	Ϋ́	ΥZ	3.15	3.17	××
99285	∢		Emergency dept visit	3.80	Ϋ́	A A	0.65	0.70	0.23	AN	ΥZ	4.68	4.73	××
99289	∢		Ped crit care transport	4.79	ΥZ	A A	1.08	1.36	0.24	Y Y	ΥZ	6.11	6.39	×
99290	∢ •		Ped crit care transport addl	2.40	ΥN	A S	0.58	0.75	0.12	AN (ΨZ,	3.10	3.27	ZZZ
99291			Critical care, first nour	00.4 00.0	2.75	2.50	01.1	1.24	12.0	0.90	12.7	25.81	0.60	XXX
99293	< <		Ped critical care, initial	15.98	0.80 AN	98.5 V	3.48	44.4	1.12	2 Z	NA NA	20.58	21.54	XX
99294			Ped critical care, subseq	7.99	Y Z	Ą Z	1.67	2.23	0.45	Y Z	Ą Z	10.11	10.67	××
99295	∢		Neonate crit care, initial	18.46	₹ Z	Y Z	4.26	5.11	1.16	Y Z	Y Z	23.88	24.73	××
99296	< <		Neonate critical care subseq	7.99	∀ \$ 2 2	Υ S	1.71	2.34	0.32	Υ Ś	Υ S	10.02	10.65	X }
99298			Ic for Ibw Infant < 1500 gm	2.75	Υ Z	¥ Z	0.64	0.86	0.17	Z Z	¥ Z	3.56	3.78	××
99300	< <		Ic, infant pbw 2501–5000 gm	2.40	₹ Z	ξ ζ Ζ	0.71	0.81	0.15	Z Z	₹ Z	3.26	3.36	XX
99304	∢		Nursing facility care, init	1.20	0.44	0.48	0.44	0.48	0.05	1.69	1.73	1.69	1.73	××
99305	∢ ∢		Nursing facility care, init	1.61	0.55	0.61	0.55	0.61	0.07	2.23	2.29	2.23	2.29	X
99307	€ 4		Nursing facility care, Illit	0.0	0.04	0.72	0.04	0.72	0.03	0.89	2.02	7.7 0.89	2000	XX
99308	< <		Nursing fac care, subseq	1.00	0.42	0.44	0.42	0.44	0.04	1.46	1.48	1.46	1.48	××
60266	∢		Nursing fac care, subseq	1.42	0.57	0.61	0.57	0.61	0.06	2.05	5.09	2.02	2.09	×
99310	∢ <		Nursing fac displaced	1.77	0.71	0.76	0.71	0.76	0.08	2.56	2.61	2.56	2.61	×
99316	< <		Nursing fac discharge day	1.50	0.50	0.57	0.50	0.57	0.00	2.06	2.13	2.06	2.13	{X
99318	_		Annual nursing fac assessmnt	1.20	0.44	0.48	0.44	0.48	0.05	1.69	1.73	1.69	1.73	××
			Domicil/r-home visit new pat	1.01	0.42	0.47	N	¥	0.02	1.48	1.53	¥	NA	××
99325	∢ ∢		Domicil/r-home visit new pat	1.52	0.55	0.65	Y :	¥ :	0.07	2.14	2.24	¥ :	Y Z	X
99326			Domicil/r-home visit new pat	2.27	0.7	1.10	Z Z	Z Z	0.0	3.08	3.24	Z Z	¥ ¤	××
99328	< <		Domicil/r-home visit new pat	3.78	1.07	1.33	Z Z	ξŞ	0.16	5.01	5.27	ξŽ	Z Z	XX
99334	-		Domicil/r-home visit est pat	0.76	0.35	0.39	N A	A	0.04	1.15	1.19	N N	Υ V	××
99335	∢ •		Domicil/r-home visit est pat	1.26	0.47	0.55	Y :	₹:	0.06	1.79	1.87	≨:	ΨZ:	X
99336	₹ 4		Domicil/r-home visit est pat	20.0	0.64	0.78	Z Z	A Z	0.09	2.75	2.89	Z Z	Y Y	××
H	- 7	1	C. C. C. C. C. C. C. C. C. C. C. C. C. C) V)			2		!			

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

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CPT ¹ HCPCS ²	Mod	Status	Description	Physician work RVUs ³	Fully im- plement- ed non- facility PE RVUs	Year 2007 transi- tional non-facil- ity PE RVUs	Fully implemented facility	Year 2007 transi- tional fa- cility PE RVUs	Mal-prac- tice RVUs	Fully im- plement- ed non- facility total	Year 2007 transi- tional non-facil- ity total	Fully im- plement- ed facility total	Year 2007 transi- tional fa- cility total	Global
99341		∢.	Home visit, new patient	1.01	0.25	0.42	Y:	¥:	0.05	1.31	1.48	Y S	¥:	X
99342		∢ <	Home visit, new patient	1.52	0.38	0.61	¥ Ş	¥ ž	0.07	1.97	2.20	Y S	Y S	×
99344		(∢	Home visit, new patient	3.03	0.72	1.07	¥	₹₹	0.10	3.88	3.22 4.23	Z Z	¥ ₹	XX
		<	Home visit, new patient	3.78	0.88	1.29	A A	¥	0.16	4.82	5.23	NA	A A	×
99347		∢	Home visit, est patient	92.0	0.19	0.35	¥ Z	¥	0.04	66.0	1.15	NA	Y Y	×
99348		< <	Home visit, est patient	1.26	0.31	0.51	¥ ž	¥ ž	0.00	1.63	1.83	¥ S	₹ S	× ×
99349		∢ ⊲	Home visit est patient	20.2	0.48	1.07	¥ 2	¥ Z	0.09	2.59	2.85	Z Z	X Z	××
99354		(∢	Prolonged service, office	1.7	0.65	0.74	0.49	0.62	0.08	2.50	2.59	2.34	2.47	XXX ZZ
		< <	Prolonged service, office	1.77	0.67	0.73	0.52	09.0	0.07	2.51	2.57	2.36	2.44	ZZZ
		⋖	Prolonged service, inpatient	1.71	A N	AN	0.50	0.59	0.07	Ϋ́	Ą Ą	2.28	2.37	ZZZ
99357		۱ ⊳	Prolonged service, inpatient	1.7	A S	A S	0.49	0.60	0.08	A S	Ϋ́	2.28	2.39	ZZZ
993/4		_ מ	Home health care supervision	1.10	0.54	0.66	0.25	0.38	0.02	99.1	T.8.1	04.1	1.53	×;
99377		_ @	Hospice care supervision	1.7	0.74	0.66	0.39	02.0	0.0	1.69	1 2 1	1.9	3.00	X X
99378) _	Hospice care supervision	1.73	0.74	1.65	0.39	1.56	0.07	2.54	3.45	2.19	3.36	×
		В	Nursing fac care supervision	1.10	0.54	0.66	0.25	0.38	0.04	1.68	1.80	1.39	1.52	××
		В	Nursing fac care supervision	1.73	0.74	0.93	0.39	0.59	90.0	2.53	2.72	2.18	2.38	××
99381		z	Prev visit, new, infant	1.19	0.99	1.37	0.27	0.41	0.05	2.23	2.61	1.51	1.65	X
99382		Z	Prev visit, new, age 1–4	1.36	1.03	1.41	0.31	0.47	0.05	2.44	2.82	1.72	1.88	× }
		zz	Prev visit new, age 3-11	1.50	20.1		0.0	0.47	0.03	24.2 24.0 24.0	2.70	1.02	0 10	{ }
		zz	Prev visit new, age 12-17	5.5	1.06	24.7	93.0	0.53	90.0	2.03	3.02	 	2 c	X X
99386		z	Prev visit, new, age 40–64	1.88	1.14	1.60	0.42	0.65	0.07	3.09	3.55	2.37	2.60	×
		z	Prev visit, new, 65 & over	2.06	1.27	1.73	0.46	0.71	0.07	3.40	3.86	2.59	2.84	XX
99391		z	Prev visit, est, infant	1.02	0.86	0.98	0.23	0.35	0.04	1.92	2.04	1.29	1.41	X
99392		z	Prev visit, est, age 1–4	0 0	0.83	1.04	0.27	0.41	0.05	2,13	2.28		1.65	×
		zz	Prev visit est age 3-11	1	0.00	20.1	0.27	0.41	0.03	2.5	2.49		8. 80	X X
99395		z	Prev visit, est, age 18–39	1.36	0.93	1.10	0.31	0.47	0.05	2.34	2.51	1.72	1.88	×
		z	Prev visit, est, age 40-64	1.53	0.97	1.18	0.34	0.53	90.0	2.56	2.77	1.93	2.12	××
99397		z	Prev visit, est, 65 & over	1.71	- - :	1.30	0.38	0.59	0.06	2.88	3.07	2.15	2.36	×
99401		zz	Preventive counseling, Indiv	0.48	0.36	0.56	11.0	7L.0	0.0	0.85	1.05	0.60	0.66	×
99403		zz	Preventive counseling, indiv	1.46	0.58	0.96	0.33	0.50	20.0	2.08	2.46	1 8	2.00	××××××××××××××××××××××××××××××××××××××
		z	Preventive counseling, indiv	1.95	69.0	1.16	0.44	0.67	0.05	5.69	3.16	2.44	2.67	××
99411		z	Preventive counseling, group	0.15	0.22	0.19	0.03	0.05	0.01	0.38	0.35	0.19	0.21	X
99412		z <	Preventive counseling, group	0.25	0.24 NA	0.25	0.00	0.09	0.01	0.50	0.51	0.32	0.35	×;
99432		(∢	Newborn care, not in hosp	1.26	100	0.95	0.28	0.37	0.02	2.33	2.28	19.	1.70	×××
		. ⋖	Normal newborn care/hospital	0.62	A Z	AN	0.14	0.19	0.02	Ϋ́Z	A N	0.78	0.83	××
		⋖	Newborn discharge day hosp	1.50	A N	AN	0.45	0.56	90.0	Ϋ́	A A	2.01	2.12	××
99436		∢ •	Attendance, birth	1.50	Υ ?	¥:	0.33	0.44	0.06	Ψ.	Υ :	1.89	2.00	X
99440		∢ ⊲	Newborn resuscitation	2.93	NA NA	NA PA	0.66	0.86	21.0	NA PA	A C	3.77	3.91	××
G0102		(∢	Office/outpatient visit, est	0.17	0.33	0.38	0.06	0.00	0.0	0.51	0.56	0.24	0.24	₹×
G0104		⋖	Diagnostic sigmoidoscopy	96.0	2.54	2.35	0.63	0.53	0.08	3.58	3.39	1.67	1.57	000
G0105			Diagnostic colonoscopy	3.69	6.55	6.26	1.88	1.57	0.30	10.54	10.25	5.87	5.56	000
G0105	53		Contract v-ray exam of colon	0.90	2.54	2.35	0.63	0.53	0.08	3.58	3.39	/9.L	/c.r	90 >
G0106	26		Contrast x-ray exam of colon	0.99	0.34	0.33	0.34	0.33	0.0	1.37	1.36	1.37	1.36	ξ× ×
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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

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CPT 1 HCPGS 2	Mod	Status	Description	Physician work RVUs ³	Fully implemented non-facility PERVUS	Year 2007 transi- tional non-facil- ity PE RVUs	Fully implemented facility	Year 2007 transi- tional fa- cility PE RVUs	Mal-practice RVUs	Fully implemented nonfacility	Year 2007 transi- tional non-facil- ity total	Fully implemented facility	Year 2007 transi- tional fa- cility total	Global
G0106	TC	∢	Contrast x-ray exam of colon	0.00	4.83	2.89	A A	A	0.13	4.96	3.02	A A	Y Y	××
G0108		⋖	Diab manage trn per indiv	0.00	0.59	0.77	₹ Z	Y Y	0.01	0.60	0.78	Y Y	Y Y	×
		∢ ⊦	Diab manage trn ind/group	0.00	0.31	0.44	Z S	Z S	0.01	0.32	0.45	N G	N S	× }
G011/			Glaucoma som bah risk direc	0.43	0.80	0.74	0.13	8 .0	0.0	0.26	02.1	0.09	40.0	X
00100		- <	Contract v_ray exam of colon	- 00	0.00	3.21	0.00 V	0.00	0.0	0.90	0.70	4 N	4 N	\ \ \ \
G0120	26	< <	Contrast x-ray exam of colon	66.0	0.34	0.33	0.34	0.33	0.0	1.37	1.36	1.37	38.	\ X
	12	< ∢	Contrast x-ray exam of colon	0.00	4.83	2.89	Z Z	N N	0.13	4.96	3.02	Ž	A Z	×
G0121			Diagnostic colonoscopy	3.69	6.55	6.26	1.88	1.57	0:30	10.54	10.25	5.87	5.56	000
G0121	53		Diagnostic sigmoidoscopy	96.0	2.54	2.35	0.63	0.53	0.08	3.58	3.39	1.67	1.57	000
G0122		z	Colon ca scrn; barium enema	66.0	5.63	3.34	5.63	3.34	0.18	6.80	4.51	08.9	4.51	×
G0122	26	z 2	Colon ca scrn; barium enema	0.00	0.22	0.34	0.22	0.34	0.05	1.26	1.38	1.26	1.38	× }
G0122	<u>:</u> د	z	Colon ca scrn; barium enema	0.00	14.0	3.00	14.0	0.00	0.0	9.00	3 S	40.0	3.13	X
G0124		ζα	Trim nail(s)	0.42	0.30	9.0	0.38	90.0	0.02	0.62	0.63	0.92	0.03	X
G0128			CORF skilled nursing service	0.08	0.02	0.03	0.02	0.03	0.0	0.11	0.12	0.11	0.12	S X
G0130		< <	Single energy x-ray study	0.22	0.56	0.79	Y Y	A V	0.00	0.84	1.07	Y Y	AZ	××
G0130	26		Single energy x-ray study	0.22	90.0	0.07	90.0	0.07	0.01	0.29	0.30	0.29	0.30	××
G0130	TC		Single energy x-ray study	0.00	0.50	0.73	A A	N	0.02	0.55	0.78	N	A A	XX
G0141		⋖	Cytopath, c/v, interpret	0.42	0.38	0.21	0.38	0.21	0.05	0.82	0.65	0.82	0.65	×
G0166		∢	Extrnl counterpulse, per tx	0.07	4.62	3.84	0.04	0.03	0.01	4.70	3.92	0.12	0.11	×
G0168		< •	Wound closure by adhesive	0.45	1.56	1.85	0.20	0.22	0.03	2.04	2.33	0.68	0.70	000
G01/9 G0180		< <	MD recentlication HHA nationt	0.43	0.47	0.03	¥ 2	¥ ¥	0.02	1.26	05.1	¥ ¤	¥ 4	XX
90180		(∢	Home health care supervision	1 73	0000	5.6	ζ <u>4</u> Ζ	Z Z	0.00	03.5	2.7	Z Z	Z Z	XXX
G0182		< ∢	Hospice care supervision	1.73	0.82	1.45	₹ Z	¥ Z	0.07	2.62	3.25	Ž	ž Ž	X
G0202		⋖	Screeningmammographydigital	0.70	2.82	2.79	Ϋ́Z	N	0.10	3.62	3.59	N	A A	××
G0202	26		Screeningmammographydigital	0.70	0.24	0.23	0.24	0.23	0.03	0.97	96.0	0.97	0.96	×
G0202	TC		Screeningmammographydigital	0.00	2.58	2.56	¥ S	¥ S	0.07	2.65	2.63	¥ 2	¥ ž	× š
G0204	90	∢ <	Diagnosticmammographydigital	0.87	3.42	28.3	A C	A C	L 0	4.40		₹ E	A S	× }
G0204		(⊲		20.0	3.00	0.2.0	00 AN	9.23 AN	0.0	2.5	0.50	12:1 AN	AN	X X
G0206))	< ∢	Diagnosticmammographydigital	0.70	2.68	2.37	Σ	Ž	0.09	3.47	3.16	Ž	ž Ž	X
G0206	26	⋖		0.70	0.24	0.23	0.24	0.23	0.03	0.97	96.0	0.97	96.0	XX
G0206	TC	∢ •	Diagnosticmammographydigital	0.00	2.44	2.13	¥:	¥ :	0.06	2.50	2.19	¥ :	¥ :	X
G023/		< ⊲	Oth resp proc indiv	0.00	0.2	4. 0	₹	Z Z	0.02	0.23	24.0 24.0	Z Z	ξ δ 2 2	X X
G0239		< ∢	Oth resp proc. group	00.0	0.31	0.33	₹ Z	Y Z	0.02	0.33	0.35	Z Z	Z Z	XX
		∶ ∢	Office/outpatient visit, new	0.88	0.83	0.80	0.29	0.31	0.05	1.76	1.73	1.22	1.24	×
G0246		⋖	Office/outpatient visit, est	0.45	0.55	0.54	0.15	0.16	0.03	1.03	1.02	0.63	0.64	××
G0247		⋖	Debride skin, partial	0.50	0.68	0.56	0.16	0.20	90.0	1.24	1.12	0.72	0.76	ZZZ
G0248		æ	Demonstrate use home inr mon	0.00	3.21	5.78	₹ Z	Y V	0.01	3.22	5.79	Y Y	Y Y	×
G0249		œ 1	Provide test material, equipm	0.00	2.31	3.56	Υ Y	Y V	0.01	2.32	3.57	Y V	Y Y	X
G0250			MD review interpret of test	0.18	0.08	0.07	0.08	0.07	0.01	0.27	0.26	0.27	0.26	X
G0252	97		PEI Imaging initial dx	1.50	9.0.0 45.0	0.54	0.34	46.0	40.0	88.	2.08	88.	2.08	XXX
G0220		۷ ۵	Med nutrition indiv subseq	0.0	0.59	0.62) N	NA NA	0.0 20.0	1.22	0.44	0.80 NA	0.80 AN	90 X
G0271		< ⊲	Medical nutrition group	00.0	0.0	0.10	₹ Z	AN	10.0	41.0	0 0	Y N	ξ Z	×××
G0275		< <	Renal andio, cardiac cath	0.25	0 K	₹ 2	0.14	0.11	0.0	Y Z	2 8	0.40	0.37	ZZZ

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ADDENDUM B.—RELATIVE VALUE UNITS (RVUS) AND RELATED INFORMATION USED IN DETERMINING MEDICARE PAYMENTS FOR 2007—CONTINUED

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CPT 1 HCPCS 2	Mod	Status	Description	Physician work RVUs ³	Fully im- plement- ed non- facility PE RVUs	Year 2007 transi- tional non-facil- ity PE RVUs	Fully implemented facility	Year 2007 transi- tional fa- cility PE RVUs	Mal-prac- tice RVUs	Fully implemented nonfacility	Year 2007 transi- tional non-facil- ity total	Fully implemented facility	Year 2007 transi- tional fa- cility total	Global
G0278		۵	lliac art andio cardiac cath	0.25	ĄN	AN	0 14	0 11	0.01	AN	A Z	0 40	0.37	777
			Elec stim unattend for press		0.15	0.12	Į Ž	Ž	0.01	0.34	0.31	Y X	Y Z	I X
G0283			Elec stim other than wound		0.15	0.12	N A	A V	0.01	0.34	0.31	A V	A N	××
G0288			Recon, CTA for surg plan		1.03	8.24	A A	A V	0.18	1.21	8.42	A N	A A	××
G0289			Arthro, loose body + chondro		Ϋ́Z	A Z	0.58	0.75	0.26	AN	AN	2.32	2.49	ZZZ
G0308			ESRD related svc 4+mo < 2yrs		5.43	7.78	5.43	7.78	0.42	18.59	20.94	18.59	20.94	××
G0309			ESRD related svc 2-3mo <2yrs		4.77	6.53	4.77	6.53	0.36	15.74	17.50	15.74	17.50	××
G0310			ESRD related svc 1 vst <2yrs		2.79	4.97	2.79	4.97	0.28	11.56	13.74	11.56	13.74	××
G0311			ESRD related svs 4+mo 2-11yr		3.50	4.42	3.50	4.42	0.34	13.57	14.49	13.57	14.49	×
G0312			ESRD relate svs 2–3 mo 2–11y		2.60	3.60	2.60	3.60	0.29	11.00	12.00	11.00	12.00	×
G0313			ESRD related svs 1 mon 2–11y		1.80	2.81	1.80	2.81	0.22	8.51	9.52	8.51	9.52	×
G0314			ESRD related svs 4+ mo 12–19		3.36	4.16	3.36	4.16	0.27	11.91	12.71	11.91	12.71	×
G0315			ESHD related svs 2–3mo/12–19		2.55	3.40	2.55	3.40	0.23	9.68	10.53	9.68	10.53	× ×
0.0016			ESAD related svs 1vls/12=19y		00.0	2 6	00.0	20.0	0. 0	7.34	0.32	7.04	0.32	{ }
			ESRD related eve 2–3 mo 20±v		1.67	100	1 67	2.7	9 0	2. A	0.0	5.7 50.8	9.9	XX
			ESBD related eye twisit 20+y		5	171	5. 5.	1 7 1	5 0	20.0		2.62	, r	× ×
G0320			ESD related sys lyisit 20+3		25.5	5.99	2.59	2.99	0.36	13.56	16.96	13.56	16.96	ž ×
G0321			ESBDralatadeve home mo 2–11v		1 00	0.00	1 92	3.43	00.0	10.32	11.83	10.32	11.83	XXX
G0322			ESRD related svs hom mo12–19		1.67	3.18	1.67	3.18	0.23	8.80	10.31	8.80	10.31	X
			ESRD related svs home mo 20+		1.12	2.07	1.12	2.07	0.14	5.50	6.45	5.50	6.45	××
G0324		⋖	ESRD relate svs home/dy <2yr	0.35	0.16	0.22	0.16	0.22	0.01	0.52	0.58	0.52	0.58	××
G0325			ESRD relate home/day/ 2-11yr		60.0	0.11	60.0	0.11	0.01	0.33	0.35	0.33	0.35	××
G0326			ESRD relate home/dy 12-19yr		0.10	0.12	0.10	0.12	0.01	0.38	0.40	0.38	0.40	×
G0327			ESRD relate home/dy 20+yrs		90.0	0.08	90.0	0.08	0.01	0.21	0.23	0.21	0.23	×
G0329			Electromagntic tx for ulcers		0.16	0.15	0.01	0.05	0.01	0.23	0.22	0.08	0.09	X
G0337			Hospice evaluation preelecti		0.30	0.46	0.30	0.46	0.09	1.73	1.89	1.73	1.89	×× S
			Lapara obolecystactomy/graph		20.5 V V) N	2 - 1 0 - 3 0 - 3	2.30 20.30		0.00 V	2.50 VA	18.62	20.02	000
G0343			Incision of bile duct		Z Z	ζ <u>Ψ</u>	25.8	8.70	2.62	ζ ζ Ζ	Z Z	32.92	33.18	060
G0344		∶ ∢	Office/outpatient visit, new	1.34	1.09	1.12	0.41	0.46	0.09	2.52	2.55	1.84	1.89	××
G0364		4	Bone marrow aspirate &biopsy	0.16	0.17	0.15	0.07	90.0	0.04	0.37	0.35	0.27	0.26	ZZZ
G0365		⋖	Doppler flow testing	0.25	5.44	4.36	A A	Y Y	0.26	5.95	4.87	Y Y	A A	××
G0365	26		Doppler flow testing	0.25	0.07	0.09	0.07	0.09	0.03	0.35	0.37	0.35	0.37	×
G0365	 ၁		Doppler flow testing	0.00	5.37	4.28	¥ ż	₹ :	0.23	5.60	4.51	¥ ž	Υ :	X 3
G0366		∢ <	Electrocardiogram, complete	71.0	0.35	0.47	Y S	¥ S	0.03	0.55	0.67	Z Z	Y S	×××
G0367		∢ <	Electrocardiogram, tracing	0.00	0.28	9.0	Y 2	Y S	0.02	0.30	0.43	AN O	A S	X
G0372		< <	MD service required for PMD	0.17	40.0	0.00	0.0	0.00	0.0	0.23	0.48	0.20	0.24	ξ× ×
		. ⋖	Smoke/tobacco counselng 3-10	0.24	0.07	60:0	0.07	0.09	0.01	0.32	0.34	0.32	0.34	×
G0376		< <	Smoke/tobacco counseling >10	0.48	0.13	0.17	0.13	0.16	0.01	0.62	99.0	0.62	0.65	X
M0064		⋖	Visit for drug monitoring	0.37	0.87	0.47	90.0	0.11	0.01	1.25	0.85	0.44	0.49	××
P3001		⋖	Cytopath, c/v, interpret	0.42	0.38	0.21	0.38	0.21	0.05	0.82	0.65	0.82	0.65	×
Q0035			Cardiokymography	0.17	0.30	0.41	A V	Y Y	0.03	0.50	0.61	Y Y	Y Y	×
Q0035	26		Cardiokymography	0.17	0.05	0.06	0.05	90.0	0.01	0.23	0.24	0.23	0.24	× }
	<u>:</u> 2		Obtaining screen han smear	0.00	0.23	0.36	Y C	7 2	0.02	1 - 1	1.08	070	2 2 2	< >
00000		۲ ۵	Set up port yrav equipment	0.37	0.73	0.36	0 .0 V	0. IS	0.02	0.47	0.37	0.43 AA	AN AN	X X
1		:	יייייייייייייייייייייייייייייייייייייי	;;;	;	,,,,,			,	;	;	:	- :	:

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ADDENDUM C .- CODES WITH WORK RVUS SUBJECT TO COMMENT

CPT Code ¹	Mod	Descriptor	Proposed work RVU
00797		Anesth, Surgery for Obesity	11.00
10060		Drainage of skin abscess	1.17
11040		Debride skin, partial	0.50
11041		Debride skin, full	0.82
11042		Debride skin/tissue	1.12
11100		Biopsy, skin lesion Exc tr-ext b9+marg 0.5 <cm< td=""><td>0.81 0.85</td></cm<>	0.81 0.85
11401		Exc tr-ext b9+marg 0.6-1cm	1.23
11402		Exc tr-ext b9+marg 1.1-2 cm	1.40
11403		Exc tr-ext b9+marg 2.1-3 cm	1.79
11404		Exc tr-ext b9+marg 3.1-4 cm	2.06
11406		Exc tr-ext b9+marg >4.0cm	3.45
11420		Exc h-f-nk-sp b9+marg 0.5<	0.98
11421		Exc h-f-nk-sp b9+marg 0.6-1	1.42
11422		Exc h-f-nk-sp b9+marg 1.1-2	1.63
11423 11424		Exc h-f-nk-sp b9+marg 2.1-3 Exc h-f-nk-sp b9+marg 3.1-4	2.01 2.43
11424		Exc h-f-nk-sp b9+marg >4.0 cm	4.02
11440		Exc face-mm b9+marg 0.5 < cm	1.00
11441		Exc face-mm b9+marg 0.6-1 cm	1.48
11442		Exc face-mm b9+marg 1.1-2 cm	1.72
11443		Exc face-mm b9+marg 2.1-3 cm	2.29
11444		Exc face-mm b9+marg 3.1-4 cm	3.14
11446		Exc face-mm b9+marg >4 cm	4.73
11600		Exc tr-ext mlg+marg 0.5 <cm< td=""><td>1.56</td></cm<>	1.56
11601		Exc tr-ext mlg+marg 0.6-1cm	2.00
11602 11603		Exc tr-ext mlg+marg 1.1-2cm Exc tr-ext mlg+marg 2.1-3 <cm< td=""><td>2.20 2.75</td></cm<>	2.20 2.75
11604		Exc tr-ext mlg+marg 3.1-4cm	3.10
11606		Exc tr-ext mlg+marg >4cm	4.95
11620		Exc h-f-nk-sp mlg+marg 0.5<	1.57
11621		Exc h-f-nk-sp mlg+marg 0.6-1	2.01
11622		Exc h-f-nk-sp mlg+marg 1.1-2	2.34
11623		Exc h-f-nk-sp mlg+marg 2.1-3	3.04
11624		Exc h-f-nk-sp mlg+marg 3.1-4	3.55
11626		Exc h-f-nk-sp mlg+marg >4cm	4.54
11640		Exc face-mm malig+marg 0.5<	1.60
11641 11642		Exc face-mm malig+marg 1.1-2	2.10 2.55
11643		Exc face-mm malig+marg 2.1-3	3.35
11644		Exc face-mm malig+marg 3.1-4	4.27
11646		Exc face-mm malig+marg>4	6.19
11730		Removal of nail plate	1.13
12052		Layer closure of wound(s)	2.77
13121		Repair of wound or lesion	4.32
14040		Skin tissue rearrangement	8.36
14060		Skin tissue rearrangement	8.99
15100 15240		Skin split graft	9.66
15734		Muscle-skin graft, trunk	19.52
17003		Destroy lesions, 2-14	0.07
17004		Destroy lesions, 15 or more	1.58
17262		Destruction of skin lesions	1.58
17281		Destruction of skin lesions	1.72
19180		Removal of breast	15.61
20600		Drain/inject, joint/bursa	0.66
20610		Drain/inject, joint/bursa	0.79
20680 21145		Removal of support implant Reconstruct midface, lefort	5.86 23.52
21145		Reconstruct midface, lefort	23.52
21147		Reconstruct midface, lefort	26.01
21395		Treat eye socket fracture	14.58
22520		Percut vertebroplasty thor	9.15
22554		Neck spine fusion	17.48
22612		Lumbar spine fusion	22.50
22840	1	Insert spine fixation device	12.52
24363	l	Replace elbow joint	22.39

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Note: The proposed work RVUs for 10- and 90-day global period codes include the application of the RUC- recommended values for the E/M services that are included as part of the global period for the service.

CP1 Code	Mod	Descriptor	Proposed work RVU
24430	 	Repair of humerus	14.99
25447		Repair wrist joint(s)	10.85
26055 26160		Incise finger tendon sheath	2.94 3.40
26600		Treat metacarpal fracture	2.40
26951		Amputation of finger/thumb	5.75
27130		Total hip arthroplasty	17.40 14.54
27236 27447		Treat thigh fracture	20.81
27465		Shortening of thigh bone	18.36
27470		Repair of thigh	16.87
27709 27880		Incision of tibia and fibula	17.24 15.18
28805		Amputation thru metatarsal	12.47
29075	 	Application of forearm cast	0.77
29580		Application of paste boot	0.57
30520 31225		Repair of nasal septum	7.63 26.34
31230		Removal of upper jaw	30.46
31360	 	Removal of larynx	27.23
31365		Removal of larynx	34.85
31367 31368		Partial removal of larynx	27.11 33.73
31370		Partial removal of larynx	27.11
31375		Partial removal of larynx	25.61
31380		Partial removal of larynx	25.11
31382 31390		Partial removal of larynx	28.11 38.72
31395		Reconstruct larynx & pharynx	43.34
31575		Diagnostic laryngoscopy	1.10
31579		Diagnostic laryngoscopy	2.26
31622 32141		Dx bronchoscope/wash	2.78 17.14
32442		Sleeve pneumonectomy	37.74
32445		Removal of lung	40.73
32484		Segmentectomy	22.67
32486 32488		Sleeve lobectomy	31.72 32.69
32540		Removal of lung lesion	23.68
32651		Thoracoscopy, surgical	16.28
32652		Thoracoscopy, surgical	23.34
32653 32654		Thoracoscopy, surgical	19.86 18.49
32655		Thoracoscopy, surgical	14.95
32657		Thoracoscopy, surgical	14.54
32662		Thoracoscopy, surgical	17.00
32663		Thoracoscopy, surgical	19.96
32665 32815		Thoracoscopy, surgical	17.37 37.94
33140		Heart vevascularize (lmr)	22.72
33141		Heart Imr w/other procedure	4.83
33208 33300		Insertion of heart pacemaker	8.12 29.93
33300		Repair of heart wound Repair of heart wound	33.67
33400		Repair of aortic valve	39.23
33405		Replacement of aortic valve	39.97
33406 33410		Replacement of aortic valve	48.87
33410		Replacement of aortic valve	38.69 57.11
33413		Replacement of aortic valve	55.27
33414		Repair of aortic valve	39.27
33415		Revision, subvalvular tissue	29.70
33416 33425		Revise ventricule muscle	36.39 38.37
33426		Repair of mitral valve	41.28
33427		Repair of mitral valve	42.78
33430	 l	Replacement of mitral valve	49.81

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CPT Code ¹	Mod	Descriptor	Prop work
3460		Revision of tricuspid valve	
3463		Valvuloplasty, tricuspid	
3464 3465		Valvuloplasty, tricuspid	
3474		Revision of pulmonary valve	
475		Replacement, pulmonary valve	
505		Repair artery w/tunnel	
510		CABG, vein, single-vein single	
511		CABG, vein, two	
512 513		CABG, vein, three	
514		CABG, vein, five	
516		Cabg, vein, six or more	
517		CABG, artery	
518		CABG, artery-vein, two	
519 521		CABG, artery-vein, three	
522		CABG, artery-vein, five	
523		Cabg, art-vein, six or more	
30		Coronary artery, bypass/reop	
533		CABG, arterial, single	
534 535		CABG, arterial, two	
536		CABG, arterial, three	
542		Removal of heart lesion	
545		Repair of heart demage	
641		Repair heart septum defect	
665		Repair of heart defects	
684 688		Repair heart septum defect	
771		Repair heart septum defect	
779		Repair great vessels defect	
781		Repair great vessels defect	
860		Ascending aortic graft	
863		Ascending aortic graft	
877		Thoracoabdominal graft	
945 001		Transplantation of heart Removal of artery clot	
201		Removal of artery clot	
471		Removal of vein clot	
081		Repair defect of artery	
102		Repair defect of artery	
216		Repair blood vessel lesion	
506		Artery bypass graft	
508 515		Artery bypass graft Artery bypass graft	
516		Artery bypass graft	
556		Artery bypass graft	
566		Artery bypass graft	
583		Vein bypass graft	
585 606		Vein bypass graft	
616		Artery bypass graft Artery bypass graft	
320		Explore chest vessels	
100		Removal of spleen, total	
01		Removal of spleen, partial	
15		Repair of ruptured spleen	
700		Removal of lymph nodes, neck	
720 724		Removal of lymph nodes, neck	
220		Removal chest lesion	
400		Visualization of chest	
100		Biopsy of tongue	
120		Partial removal of tongue	
130		Partial removal of tongue	
405		Tongue and neck surgery	1

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CPT Code ¹	Mod	Descriptor	Proposed work RVU
11145		Tongue removal, neck surgery	37.4
11150		Tongue, mouth, jaw surgery	29.4
1153		Tongue, mouth, neck surgery	33.1
1155		Tongue, jaw, & neck surgery	39.8
2120		Remove plate/lesion	11.6
2842		Extensive surgery of throat	11.9 17.4
2844 2845		Extensive surgery of throat	32.2
2890		Partial removal of pharynx	18.8
2892		Revision of pharyngeal walls	25.6
2894		Revision of pharyngeal walls	33.4
3108		Removal of esophagus	63.2
3113		Removal of esophagus	46.9
3116		Partial removal of esophagus	71.3
3118		Partial removal of esophagus	52.0
3121		Partial removal of esophagus	46.3
3123		Partial removal of esophagus	63.8
3124		Removal of esophagus	64.6
3135		Removal of esophagus pouch	22.3
3235		Uppr gi endoscopy, diagnosis	2.3
3246		Place gastrostomy tube	4.3
3620		Removal of stomach	33.8
3621		Removal of stomach	39.3
3622		Removal of stomach	39.8
3632		Removal of stomach, partial	34.9
3633		Removal of stomach, partial	32.9
3634		Removal of stomach, partial	36.4 4.6
3750 3820		Place gastrostomy tube	22.3
3840		Repair of stomach lesion	22.6
4120		Removal of small intenstive	20.7
4130		Bowel to bowel fusion	21.9
4140		Partial removal of colon	22.4
4141		Partial removal of colon	29.6
4143		Partial removal of colon	29.6
4144		Partial removal of colon	27.5
4145		Partial removal of colon	28.3
4146		Partial removal of colon	35.0
4147		Partial removal of colon	33.5
4150		Removal of colon	29.9
4151		Removal of colon/leostomy	34.6
4155		Removal of colon/leostomy	34.1
4156		Removal of colon/leostomy	37.1
4602		Suture, small intestine	24.6
4603		Suture, small intestine	27.9
5020 5300		Drainage of rectal abscess	8.3
		Proctosigmoidoscopy w/bx	0.3
5303 5305		Proctosigmoidoscoy dilate	0.4
5305		Proctosigmoidoscopy tb	0.9
5307		Proctosigmoidoscopy removal	0.8
5309		Proctosigmoidoscopy removal	2.0
5315		Proctosigmoidoscopy removal	1.4
5317		Proctosigmoidoscopy bleed	1.5
5320		Proctosigmoidoscopy ablate	1.5
5321		Proctosigmoidoscopy volvul	1.3
5327		Proctosigmoidoscopy w/slent	1.6
5330		Diagnostic sigmoidoscopy	0.9
5378		Diagnostic colonoscopy	3.6
6040		Incision of rectal abscess	5.2
6045		Incision of rectal abscess	5.7
6060		Incision of rectal abscess	6.
6270		Removal of anal fistula	4.7
6275		Removal of anal fistula	5.2
6280		Removal of anal fistula	6.2
6285		Removal of anal fistula	5.2
		Diagnostic anoscopy	0.5

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CPT Code ¹	Mod	Descriptor	Proposed work RVU
46604		Anoscopy and dilation	1.31
46606		Anoscopy and biopsy	0.81
46608 46610		Anoscopy, remove for body	1.51 1.32
46611		Anoscopy	1.81
46612		Anoscopy, remove lesions	2.34
46614		Anoscopy, control bleeding	2.01
46615 47562		AnoscopyLaparoscopic cholecystectomy	2.68 11.57
47600		Removal of gallbladder	15.44
47760		Fuse bile ducts and bowel	38.08
47765 47780		Fuse liver ducts and bowel	51.95 42.08
47785		Fuse bile ducts and bowel	55.95
49002		Reopening of abdomen	17.51
49010		Exploration behind abdomen	15.94
49505 50590		Prp i/hern init reduc >5 yr Fragmenting of kidney stone	7.84 9.58
51720		Treatment of bladder lesion	1.50
51798		Us urine capacity measure	0.00
52000		Cystoscopy	2.23
52204 52601		Cystoscopy	2.59 15.07
55700		Biopsy of prostate	2.58
57160		Insert pessary/other device	0.89
57240		Repair bladder & vagina	11.38
57250		Repair rectum & vagina	11.38
57260 57265		Repair vagina	14.32 15.82
57288		Repair bladder defect	13.95
57500		Biopsy of cervix	1.20
58120		Dilation and curettage	3.52
58150 58720		Total hysterectomy	17.17 12.04
60600		Remove carotid body lesion	24.95
60605		Remove carotid body lesion	31.82
61154		Pierce skull & remove clot	16.86
61312 61537		Open skull for drainage	30.03 36.31
61538		Removal of brain tissue	39.31
61697		Brain aneurysm repr, complx	63.16
61698		Brain aneurysm repr, complx	69.39
61700 61702		Brain aneurysm repr, simple	50.44 59.80
62270		Spinal fluid tap, diagnostic	1.37
63047		Removal of spinal lamina	15.16
63048		Remove spinal lamina add-on	3.26
63075 64702		Neck spine disk surgery	19.41 6.02
64721		Carpal tunnel surgery	4.78
65426		Removal of eye lesion	5.85
65850		Incision of eye	11.14
66761 66821		Revision of iris	4.81 3.28
66984		After cataract laser surgery	10.28
67221		Ocular photodynamic ther	3.45
67414		Explr/decompress eye socket	17.72
67445		Explr/decompress eye socket	18.90
67500 67505		Inject/treat eye socket	1.44 1.27
67515		Inject/treat eye socket	1.40
67820		Revise eyelashes	0.71
67840		Remove eyelid lesion	2.04
67904 67911		Repair eyelid defect	7.75 7.30
67966		Revision of eyelid	8.75
		Explore/irrigate tear ducts	1.25

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CPT Code ¹	Mod	Descriptor	Proposed work RVU
69210		Remove impacted ear wax	0.61
70355		Panoramic x-ray of jaws	0.20
71010 71020		Chest x-ray	0.18 0.22
71260		Ct thorax w/dye	1.24
72192		Ct pelvis w/o dye	1.09
72193		Ct pelvis w/dye	1.16
73100 73110		X-ray exam of wrist	0.16 0.17
73120		X-ray exam of hand	0.16
73130		X-ray exam of hand	0.17
73140		X-ray exam of finger(s)	0.13
74000 74020		X-ray exam of abdomen	0.18 0.27
74022		X-ray exam series, abdomen	0.32
74150		Ct abdomen w/o dye	1.19
74160 76075		Ct abdomen w/dye	1.27 0.20
76519		Echo exam of eye	0.20
76700		Us exam, abdom, complete	0.81
76830		Transvaginal us, non-ob	0.69
77263 77280		Radiation therapy planning	3.14 0.70
77290		Set radiation therapy field	1.56
77300		Radiation therapy dose plan	0.62
77315		Teletx isodose plan complex	1.56
77331 77334		Special radiation dosimetry	0.87 1.24
77470		Special radiation treatment	2.09
78306		Bone imaging, whole body	0.86
78315		Bone imaging, 3 phase	1.02
78465 78478		Heart image (3d), multipleHeart wall motion add-on	1.46 0.50
78480		Heart function add-on	0.30
88309		Tissue exam by pathologist	2.80
88321		Microslide consultation	1.63
88323 88325		Microslide consultation	1.83 2.50
92083		Visual field examination(s)	0.50
92226		Special eye exam, subsequent	0.33
92235		Eye exam with photos	0.81
92250 93010		Eye exam with photos Electrocardiogram report	0.44 0.17
93015		Cardiovascular stress test	0.75
93018		Cardiovascular stress test	0.30
94010		Breathing capacity test	0.17
95144 95165		Antigen therapy services	0.06 0.06
95816		Eeg, awake and drowsy	1.08
95819		Eeg, awake and asleep	1.08
95861		Muscle test, 2 limbs	1.54
95872 95900		Muscle test, one fiber	2.00 0.42
95900		Sense nerve conduction test	0.42
95925		Somatosensory testing	0.54
95926		Somatosensory testing	0.54
95927		Somatosensory testing	0.54
95953 99201		EEG monitoring/computer	3.30 0.45
99202		Office/outpatient visit, new	0.88
99203		Office/outpatient visit, new	1.34
99204		Office/outpatient visit, new	2.30
99205 99211		Office/outpatient visit, new	3.00
99212		Office/outpatient visit, est	0.17
99213		Office/outpatient visit, est	0.92
99214		Office/outpatient visit, est	1.42

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CPT Code ¹	Mod	Descriptor	Proposed work RVU
99215		Office/outpatient visit, est	2.00
99221		Initial hospital care	1.88
99222		Initial hospital care	2.56
99223		Initial hospital care	3.78
99231		Subsequent hospital care	0.76
99232		Subsequent hospital care	1.39
99233		Subsequent hospital care	2.00
99238		Hospital discharge day	1.28
99239		Hospital discharge day	1.90
99241		Office consultation	0.64
99242		Office consultation	1.34
99243		Office consultation	1.88
99244		Office consultation	3.02
99245		Office consultation	3.77
99251		Initial inpatient consult	1.00
99252		Initial inpatient consult	1.50
99253		Initial inpatient consult	2.27
99254		Initial inpatient consult	3.29
99255		Initial inpatient consult	4.00
99281		Emergency dept visit	0.45
99282		Emergency dept visit	0.88
99283		Emergency dept visit	1.34
99284		Emergency dept visit	2.56
99285		Emergency dept visit	3.80
99291		Critical care, first hour	4.50
99292		Critical care, addl 30 min	2.25

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