

CMAP Addendum B - OPPS Payment Type by Procedure Code

Changes Effective October 1, 2016

***CPT codes and descriptions only are copyright 2013 American Medical Association. All Rights Reserved. Applicable FARS/DFARS Apply. Dental codes (D codes) are copyright 2013 American Dental Association. All Rights Reserved.***

| Procedure Code | Short Descriptor             | Payment Type | Status Indicator | APC  | Relative Weight | Payment Rate | CT FEE SCHED | changed |
|----------------|------------------------------|--------------|------------------|------|-----------------|--------------|--------------|---------|
| 90371          | Hep b ig im                  | APC-PR       | K                | 1630 |                 | 111.33       |              | *       |
| 90375          | Rabies ig im/sc              | APC-PR       | K                | 9133 |                 | 305.48       |              | *       |
| 90376          | Rabies ig heat treated       | APC-PR       | K                | 9134 |                 | 294.59       |              | *       |
| 90585          | Bcg vaccine percut           | APC-PR       | K                | 9137 |                 | 123.2        |              | *       |
| 90620          | Menb rp w/omv vaccine im     | APC-PR       | K                | 1807 |                 | 147.37       |              | *       |
| 90675          | Rabies vaccine im            | APC-PR       | K                | 9139 |                 | 272.49       |              | *       |
| 90734          | Menacwy vaccine im           | APC-PR       | K                | 1843 |                 | 97.49        |              | *       |
| A9543          | Y90 ibritumomab, rx          | APC-PR       | K                | 1643 |                 | 46942.38     |              | *       |
| A9600          | Sr89 strontium               | APC-PR       | K                | 0701 |                 | 1281.39      |              | *       |
| A9604          | Sm 153 leixidronam           | APC-PR       | K                | 1295 |                 | 12113.48     |              | *       |
| A9606          | Radium ra223 dichloride ther | APC-PR       | K                | 1745 |                 | 127.07       |              | *       |
| C2623          | Cath, translumin, drug-coat  | APC-PR       | H                | 2623 |                 | 1688.84      |              | * DSS   |
| C9121          | Injection, argatroban        | APC-PR       | K                | 9121 |                 | 10.7         |              | *       |
| C9138          | Nuwiq Factor VIII recomb     | APC-PR       | G                | 1846 |                 | 1.5          |              | *       |
| C9139          | Idelvion, 1 i.u.             | APC-PR       | G                | 9171 |                 | 3.98         |              | N       |
| C9248          | Inj, clevidipine butyrate    | APC-PR       | K                | 9248 |                 | 2.89         |              | *       |
| C9293          | Injection, glucarpidase      | APC-PR       | K                | 9293 |                 | 284.27       |              | *       |
| C9349          | Puraply, puraply antimic     | APC-PR       | G                | 1657 |                 | 119.12       |              | *       |
| C9447          | Inj, phenylephrine ketorolac | APC-PR       | G                | 1663 |                 | 487.12       |              | *       |
| C9460          | Injection, cangrelor         | APC-PR       | G                | 9460 |                 | 15.48        |              | *       |
| C9470          | Aripiprazole lauroxil im     | APC-PR       | G                | 9470 |                 | 2.37         |              | *       |
| C9471          | Hymovis, 1 mg                | APC-PR       | G                | 9471 |                 | 16.41        |              | *       |
| C9472          | Inj talimogene laherparepvec | APC-PR       | G                | 9472 |                 | 46.28        |              | *       |
| C9473          | Injection, mepolizumab       | APC-PR       | G                | 9473 |                 | 25.93        |              | *       |
| C9474          | Inj, irinotecan liposome     | APC-PR       | G                | 9474 |                 | 39.55        |              | *       |
| C9475          | Injection, necitumumab       | APC-PR       | G                | 9475 |                 | 5.28         |              | *       |
| C9476          | Injection, daratumumab       | APC-PR       | G                | 9476 |                 | 46.85        |              | *       |
| C9479          | Instill, ciprofloxacin otic  | APC-PR       | G                | 9479 |                 | 30           |              | *       |
| C9480          | Injection, trabectedin       | APC-PR       | G                | 9480 |                 | 283.34       |              | *       |
| C9481          | Injection, reslizumab        | APC-PR       | G                | 9481 |                 | 8.67         |              | N       |
| C9482          | Sotalol hydrochloride IV     | APC-PR       | G                | 9482 |                 |              |              | N       |

CMAP Addendum B - OPPS Payment Type by Procedure Code

Changes Effective October 1, 2016

| Procedure Code | Short Descriptor               | Payment Type | Status Indicator | APC  | Relative Weight | Payment Rate | CT FEE SCHED | changed |
|----------------|--------------------------------|--------------|------------------|------|-----------------|--------------|--------------|---------|
| C9483          | Injection, atezolizumab        | APC-PR       | G                | 9483 |                 | 75.76        |              | N       |
| C9497          | Loxapine, inhalation powder    | APC-PR       | G                | 9497 |                 | 153.7        |              | *       |
| C9744          | Abd us w/contrast              | APC          | S                | 5571 | 3.2128          |              |              | N       |
| G0490          | Home visit RN, LPN by RHC/FQHC | No           | A                |      |                 |              |              | N       |
| G9679          | Acute care pneumonia           | No           | M                |      |                 |              |              | N       |
| G9680          | Acute care congestive heart    | No           | M                |      |                 |              |              | N       |
| G9681          | Acute care chronic obstruct    | No           | M                |      |                 |              |              | N       |
| G9682          | Acute care skin infection      | No           | M                |      |                 |              |              | N       |
| G9683          | Acute care fluid or electrol   | No           | M                |      |                 |              |              | N       |
| G9684          | Acute care urinary tract inf   | No           | M                |      |                 |              |              | N       |
| G9685          | Acute Nursing Facility Care    | No           | B                |      |                 |              |              | N       |
| G9686          | Nursing Facility Conference    | No           | B                |      |                 |              |              | N       |
| J0129          | Abatacept injection            | APC-PR       | K                | 9230 |                 | 44.75        |              | *       |
| J0132          | Acetylcysteine injection       | APC-PR       | K                | 1272 |                 | 1.51         |              | *       |
| J0135          | Adalimumab injection           | APC-PR       | K                | 1083 |                 | 861.45       |              | *       |
| J0178          | Aflibercept injection          | APC-PR       | K                | 1420 |                 | 980.46       |              | *       |
| J0180          | Agalsidase beta injection      | APC-PR       | K                | 9208 |                 | 164.42       |              | *       |
| J0202          | Injection, alemtuzumab         | APC-PR       | K                | 1809 |                 | 1738.36      |              | *       |
| J0207          | Amifostine                     | APC-PR       | K                | 7000 |                 | 416.53       |              | *       |
| J0221          | Lumizyme injection             | APC-PR       | K                | 1413 |                 | 159.39       |              | *       |
| J0256          | Alpha 1 proteinase inhibitor   | APC-PR       | K                | 0901 |                 | 4.83         |              | *       |
| J0257          | Glassia injection              | APC-PR       | K                | 1415 |                 | 4.37         |              | *       |
| J0287          | Amphotericin b lipid complex   | APC-PR       | K                | 9024 |                 | 13.41        |              | *       |
| J0289          | Amphotericin b liposome inj    | APC-PR       | K                | 0736 |                 | 19.01        |              | *       |
| J0401          | Inj aripiprazole ext rel 1mg   | APC-PR       | K                | 1468 |                 | 4.38         |              | *       |
| J0475          | Baclofen 10 mg injection       | APC-PR       | K                | 9032 |                 | 173.43       |              | *       |
| J0476          | Baclofen intrathecal trial     | APC-PR       | K                | 1631 |                 | 76.96        |              | *       |
| J0480          | Basiliximab                    | APC-PR       | K                | 1683 |                 | 3196.11      |              | *       |
| J0490          | Belimumab injection            | APC-PR       | K                | 1353 |                 | 42.02        |              | *       |
| J0561          | Penicillin g benzathine inj    | APC-PR       | K                | 1829 |                 | 10.31        |              | *       |
| J0585          | Injection,onabotulinumtoxina   | APC-PR       | K                | 0902 |                 | 5.93         |              | *       |
| J0586          | Abobotulinumtoxina             | APC-PR       | K                | 1289 |                 | 7.9          |              | *       |
| J0587          | Inj, rimabotulinumtoxinb       | APC-PR       | K                | 9018 |                 | 11.71        |              | *       |
| J0594          | Busulfan injection             | APC-PR       | K                | 1178 |                 | 38.37        |              | *       |

CMAF Addendum B - OPPS Payment Type by Procedure Code

Changes Effective October 1, 2016

| Procedure Code | Short Descriptor             | Payment Type | Status Indicator | APC  | Relative Weight | Payment Rate | CT FEE SCHED | changed |
|----------------|------------------------------|--------------|------------------|------|-----------------|--------------|--------------|---------|
| J0596          | Injection, ruconest          | APC-PR       | G                | 9445 |                 | 27.95        |              | *       |
| J0597          | C-1 esterase, berinert       | APC-PR       | K                | 9269 |                 | 46.52        |              | *       |
| J0598          | C-1 esterase, cinryze        | APC-PR       | K                | 9251 |                 | 55.55        |              | *       |
| J0630          | Calcitonin salmon injection  | APC-PR       | K                | 1433 |                 | 2321.14      |              | *       |
| J0637          | Caspofungin acetate          | APC-PR       | K                | 9019 |                 | 12.21        |              | *       |
| J0638          | Canakinumab injection        | APC-PR       | K                | 1311 |                 | 92.49        |              | *       |
| J0641          | Levoleucovorin injection     | APC-PR       | K                | 1236 |                 | 0.9          |              | *       |
| J0695          | Inj ceftolozane tazobactam   | APC-PR       | G                | 9452 |                 | 4.54         |              | *       |
| J0712          | Ceftaroline fosamil inj      | APC-PR       | K                | 1824 |                 | 2.48         |              | *       |
| J0714          | Ceftazidime and avibactam    | APC-PR       | K                | 1825 |                 | 77.05        |              | *       |
| J0716          | Centruroides immune f(ab)    | APC-PR       | K                | 1431 |                 | 4246.69      |              | *       |
| J0720          | Chloramphenicol sodium injec | APC-PR       | K                | 1831 |                 | 40.36        |              | *       |
| J0725          | Chorionic gonadotropin/1000u | APC-PR       | K                | 1668 |                 | 24.62        |              | *       |
| J0740          | Cidofovir injection          | APC-PR       | K                | 9033 |                 | 554.48       |              | *       |
| J0775          | Collagenase, clost hist inj  | APC-PR       | K                | 1340 |                 | 41.42        |              | *       |
| J0795          | Corticotropin ovine trifu    | APC-PR       | K                | 1684 |                 | 8.12         |              | *       |
| J0800          | Corticotropin injection      | APC-PR       | K                | 1280 |                 | 3555.35      |              | *       |
| J0850          | Cytomegalovirus imm iv /vial | APC-PR       | K                | 0903 |                 | 1126.55      |              | *       |
| J0875          | Injection, dalbavancin       | APC-PR       | G                | 1823 |                 | 15.22        |              | *       |
| J0881          | Darbepoetin alfa, non-esrd   | APC-PR       | K                | 1685 |                 | 3.93         |              | *       |
| J0882          | Darbepoetin alfa, esrd use   | APC-PR       | K                | 1482 |                 | 3.93         |              | *       |
| J0885          | Epoetin alfa, non-esrd       | APC-PR       | K                | 1686 |                 | 12.59        |              | *       |
| J0887          | Epoetin beta esrd use        | APC-PR       | K                | 1833 |                 | 1.48         |              | *       |
| J0894          | Decitabine injection         | APC-PR       | K                | 9231 |                 | 20.83        |              | *       |
| J0897          | Denosumab injection          | APC-PR       | K                | 9272 |                 | 16.23        |              | *       |
| J1160          | Digoxin injection            | APC-PR       | K                | 1834 |                 | 4.82         |              | *       |
| J1190          | Dexrazoxane hcl injection    | APC-PR       | K                | 0726 |                 | 184.05       |              | *       |
| J1205          | Chlorothiazide sodium inj    | APC-PR       | K                | 0747 |                 | 86.68        |              | *       |
| J1212          | Dimethyl sulfoxide 50% 50 ml | APC-PR       | K                | 1832 |                 | 481.94       |              | *       |
| J1290          | Ecaltantide injection        | APC-PR       | K                | 9263 |                 | 399.56       |              | *       |
| J1300          | Ecuzumab injection           | APC-PR       | K                | 9236 |                 | 221.12       |              | *       |
| J1322          | Elosulfase alfa, injection   | APC-PR       | G                | 1480 |                 | 221.77       |              | *       |
| J1327          | Eptifibatide injection       | APC-PR       | K                | 1607 |                 | 31.29        |              | *       |
| J1364          | Erythro lactobionate /500 mg | APC-PR       | K                | 1669 |                 | 59.29        |              | *       |

CMAF Addendum B - OPPS Payment Type by Procedure Code

Changes Effective October 1, 2016

| Procedure Code | Short Descriptor             | Payment Type | Status Indicator | APC  | Relative Weight | Payment Rate | CT FEE SCHED | changed |
|----------------|------------------------------|--------------|------------------|------|-----------------|--------------|--------------|---------|
| J1410          | Inj estrogen conjugate 25 mg | APC-PR       | K                | 9038 |                 | 261.4        |              | *       |
| J1438          | Etanercept injection         | APC-PR       | K                | 1608 |                 | 404.62       |              | *       |
| J1439          | Inj ferric carboxymaltos 1mg | APC-PR       | G                | 9441 |                 | 1.05         |              | *       |
| J1447          | Inj tbo filgrastim 1 microg  | APC-PR       | G                | 1748 |                 | 0.74         |              | *       |
| J1451          | Fomepizole, 15 mg            | APC-PR       | K                | 1689 |                 | 7.94         |              | *       |
| J1453          | Fosaprepitant injection      | APC-PR       | K                | 9242 |                 | 1.89         |              | *       |
| J1458          | Galsulfase injection         | APC-PR       | K                | 9224 |                 | 364.41       |              | *       |
| J1459          | Inj ivig privigen 500 mg     | APC-PR       | K                | 1214 |                 | 37.9         |              | *       |
| J1556          | Inj, imm glob bivigam, 500mg | APC-PR       | K                | 9130 |                 | 39.52        |              | *       |
| J1557          | Gammaplex injection          | APC-PR       | K                | 9270 |                 | 37.03        |              | *       |
| J1559          | Hizentra injection           | APC-PR       | K                | 1312 |                 | 9.83         |              | *       |
| J1561          | Gamunex-c/gammaked           | APC-PR       | K                | 0948 |                 | 38.58        |              | *       |
| J1566          | Immune globulin, powder      | APC-PR       | K                | 2731 |                 | 33.07        |              | *       |
| J1568          | Octagam injection            | APC-PR       | K                | 0943 |                 | 35.98        |              | *       |
| J1571          | Hepagam b im injection       | APC-PR       | K                | 0946 |                 | 56.06        |              | *       |
| J1572          | Flebogamma injection         | APC-PR       | K                | 0947 |                 | 36.8         |              | *       |
| J1573          | Hepagam b intravenous, inj   | APC-PR       | K                | 1138 |                 | 56.06        |              | *       |
| J1575          | Hyqvia 100mg immunoglobulin  | APC-PR       | K                | 1826 |                 | 12.74        |              | *       |
| J1595          | Injection glatiramer acetate | APC-PR       | K                | 1015 |                 | 198.58       |              | *       |
| J1602          | Golimumab for iv use 1mg     | APC-PR       | K                | 1475 |                 | 24.79        |              | *       |
| J1610          | Glucagon hydrochloride/1 mg  | APC-PR       | K                | 9042 |                 | 199.12       |              | *       |
| J1640          | Hemin, 1 mg                  | APC-PR       | K                | 1690 |                 | 22.86        |              | *       |
| J1670          | Tetanus immune globulin inj  | APC-PR       | K                | 1670 |                 | 433.06       |              | *       |
| J1725          | Hydroxyprogesterone caproate | APC-PR       | K                | 1354 |                 | 2.69         |              | *       |
| J1740          | Ibandronate sodium injection | APC-PR       | K                | 9229 |                 | 101.96       |              | *       |
| J1742          | Ibutilide fumarate injection | APC-PR       | K                | 9044 |                 | 186.19       |              | *       |
| J1743          | Idursulfase injection        | APC-PR       | K                | 9232 |                 | 522.04       |              | *       |
| J1744          | Icatibant injection          | APC-PR       | K                | 1443 |                 | 325.48       |              | *       |
| J1745          | Infliximab injection         | APC-PR       | K                | 7043 |                 | 82.87        |              | *       |
| J1750          | Inj iron dextran             | APC-PR       | K                | 1237 |                 | 12.41        |              | *       |
| J1786          | Imuglucerase injection       | APC-PR       | K                | 1327 |                 | 41.93        |              | *       |
| J1830          | Interferon beta-1b / .25 mg  | APC-PR       | K                | 0910 |                 | 390.11       |              | *       |
| J1833          | Injection, isavuconazonium   | APC-PR       | G                | 9456 |                 | 0.64         |              | *       |
| J1930          | Lanreotide injection         | APC-PR       | K                | 9237 |                 | 51.31        |              | *       |

CMAF Addendum B - OPPS Payment Type by Procedure Code

Changes Effective October 1, 2016

| Procedure Code | Short Descriptor             | Payment Type | Status Indicator | APC  | Relative Weight | Payment Rate | CT FEE SCHED | changed |
|----------------|------------------------------|--------------|------------------|------|-----------------|--------------|--------------|---------|
| J1950          | Leuprolide acetate /3.75 mg  | APC-PR       | K                | 0800 |                 | 1038.7       |              | *       |
| J2020          | Linezolid injection          | APC-PR       | K                | 9001 |                 | 15.78        |              | *       |
| J2278          | Ziconotide injection         | APC-PR       | K                | 1694 |                 | 7.31         |              | *       |
| J2315          | Naltrexone, depot form       | APC-PR       | K                | 0759 |                 | 3.24         |              | *       |
| J2323          | Natalizumab injection        | APC-PR       | K                | 9126 |                 | 17.89        |              | *       |
| J2325          | Nesiritide injection         | APC-PR       | K                | 1695 |                 | 72.73        |              | *       |
| J2353          | Octreotide injection, depot  | APC-PR       | K                | 1207 |                 | 168.11       |              | *       |
| J2355          | Oprelvekin injection         | APC-PR       | K                | 7011 |                 | 467.22       |              | *       |
| J2357          | Omalizumab injection         | APC-PR       | K                | 9300 |                 | 32.31        |              | *       |
| J2407          | Injection, oritavancin       | APC-PR       | G                | 1660 |                 | 24.64        |              | *       |
| J2425          | Palifermin injection         | APC-PR       | K                | 1696 |                 | 17.68        |              | *       |
| J2426          | Paliperidone palmitate inj   | APC-PR       | K                | 9255 |                 | 9.12         |              | *       |
| J2469          | Palonosetron hcl             | APC-PR       | K                | 9210 |                 | 22.88        |              | *       |
| J2502          | Inj, pasireotide long acting | APC-PR       | G                | 9454 |                 | 265.36       |              | *       |
| J2505          | Injection, pegfilgrastim 6mg | APC-PR       | K                | 9119 |                 | 4040.69      |              | *       |
| J2507          | Pegloticase injection        | APC-PR       | K                | 9281 |                 | 1642.46      |              | *       |
| J2510          | Penicillin g procaine inj    | APC-PR       | K                | 1836 |                 | 26.77        |              | *       |
| J2547          | Injection, peramivir         | APC-PR       | G                | 9451 |                 | 1.65         |              | *       |
| J2562          | Plerixafor injection         | APC-PR       | K                | 9252 |                 | 312.11       |              | *       |
| J2597          | Inj desmopressin acetate     | APC-PR       | K                | 1440 |                 | 14.04        |              | *       |
| J2724          | Protein c concentrate        | APC-PR       | K                | 1139 |                 | 15.23        |              | *       |
| J2760          | Phentolaine mesylate inj     | APC-PR       | K                | 1458 |                 | 402.51       |              | *       |
| J2770          | Quinupristin/dalfopristin    | APC-PR       | K                | 2770 |                 | 413.52       |              | *       |
| J2778          | Ranibizumab injection        | APC-PR       | K                | 9233 |                 | 383.23       |              | *       |
| J2783          | Rasburicase                  | APC-PR       | K                | 0738 |                 | 254.11       |              | *       |
| J2792          | Rho(d) immune globulin h, sd | APC-PR       | K                | 1609 |                 | 21.33        |              | *       |
| J2794          | Risperidone, long acting     | APC-PR       | K                | 9125 |                 | 7.82         |              | *       |
| J2796          | Romiplostim injection        | APC-PR       | K                | 9245 |                 | 62.14        |              | *       |
| J2800          | Methocarbamol injection      | APC-PR       | K                | 1837 |                 | 38.57        |              | *       |
| J2820          | Sargramostim injection       | APC-PR       | K                | 0731 |                 | 36.23        |              | *       |
| J2997          | Alteplase recombinant        | APC-PR       | K                | 7048 |                 | 80.29        |              | *       |
| J3060          | Inj, taliglucerase alfa 10 u | APC-PR       | K                | 9294 |                 | 40.46        |              | *       |
| J3070          | Pentazocine injection        | APC-PR       | K                | 1484 |                 | 140.39       |              | *       |
| J3090          | Inj tedizolid phosphate      | APC-PR       | G                | 1662 |                 | 1.28         |              | *       |

CMAF Addendum B - OPPS Payment Type by Procedure Code

Changes Effective October 1, 2016

| Procedure Code | Short Descriptor             | Payment Type | Status Indicator | APC  | Relative Weight | Payment Rate | CT FEE SCHED | changed |
|----------------|------------------------------|--------------|------------------|------|-----------------|--------------|--------------|---------|
| J3095          | Telavancin injection         | APC-PR       | K                | 9258 |                 | 5.02         |              | *       |
| J3101          | Tenecteplase injection       | APC-PR       | K                | 9002 |                 | 102.43       |              | *       |
| J3145          | Testosterone undecanoate 1mg | APC-PR       | G                | 1487 |                 | 1.22         |              | *       |
| J3240          | Thyrotropin injection        | APC-PR       | K                | 9108 |                 | 1571.3       |              | *       |
| J3243          | Tigecycline injection        | APC-PR       | K                | 9228 |                 | 3.13         |              | *       |
| J3246          | Tirofiban hcl                | APC-PR       | K                | 7041 |                 | 9            |              | *       |
| J3262          | Tocilizumab injection        | APC-PR       | K                | 9264 |                 | 4.1          |              | *       |
| J3315          | Triptorelin pamoate          | APC-PR       | K                | 9122 |                 | 460.85       |              | *       |
| J3355          | Urofollitropin, 75 iu        | APC-PR       | K                | 1741 |                 | 132.66       |              | *       |
| J3357          | Ustekinumab injection        | APC-PR       | K                | 9261 |                 | 174.57       |              | *       |
| J3380          | Injection, vedolizumab       | APC-PR       | G                | 1489 |                 | 17.43        |              | *       |
| J3385          | Velaglucerase alfa           | APC-PR       | K                | 9271 |                 | 343.35       |              | *       |
| J3396          | Verteporfin injection        | APC-PR       | K                | 1203 |                 | 10.88        |              | *       |
| J3465          | Injection, voriconazole      | APC-PR       | K                | 1052 |                 | 4.64         |              | *       |
| J3489          | Zoledronic acid 1mg          | APC-PR       | K                | 1356 |                 | 15.67        |              | *       |
| J7180          | Factor xiii anti-hem factor  | APC-PR       | K                | 1416 |                 | 8.18         |              | *       |
| J7181          | Factor xiii recomb a-subunit | APC-PR       | G                | 1746 |                 | 14.62        |              | *       |
| J7183          | Wilate injection             | APC-PR       | K                | 1352 |                 | 0.97         |              | *       |
| J7185          | Xyntha inj                   | APC-PR       | K                | 1268 |                 | 1.2          |              | *       |
| J7188          | Factor viii recomb obizur    | APC-PR       | K                | 1827 |                 | 4.53         |              | *       |
| J7194          | Factor ix complex            | APC-PR       | K                | 0928 |                 | 1.29         |              | *       |
| J7195          | Factor ix recombinant nos    | APC-PR       | K                | 0932 |                 | 1.52         |              | *       |
| J7197          | Antithrombin iii injection   | APC-PR       | K                | 1263 |                 | 3.43         |              | *       |
| J7198          | Anti-inhibitor               | APC-PR       | K                | 0929 |                 | 1.92         |              | *       |
| J7311          | Fluocinolone acetone implt   | APC-PR       | K                | 9225 |                 | 20126.6      |              | *       |
| J7312          | Dexamethasone intra implant  | APC-PR       | K                | 9256 |                 | 200.9        |              | *       |
| J7321          | Hyalgan/supartz inj per dose | APC-PR       | K                | 0873 |                 | 87.73        |              | *       |
| J7323          | Euflexxa inj per dose        | APC-PR       | K                | 0875 |                 | 155.32       |              | *       |
| J7324          | Orthovisc inj per dose       | APC-PR       | K                | 0877 |                 | 159.28       |              | *       |
| J7325          | Synvisc or synvisc-one       | APC-PR       | K                | 0874 |                 | 12.77        |              | *       |
| J7326          | Gel-one                      | APC-PR       | K                | 1417 |                 | 587.58       |              | *       |
| J7327          | Monovisc inj per dose        | APC-PR       | K                | 1747 |                 | 917.77       |              | *       |
| J7501          | Azathioprine parenteral      | APC-PR       | K                | 0887 |                 | 255.53       |              | *       |
| J7503          | Tacrol envarsus ex rel oral  | APC-PR       | G                | 1845 |                 | 1.23         |              | *       |

CMAF Addendum B - OPPS Payment Type by Procedure Code

Changes Effective October 1, 2016

| Procedure Code | Short Descriptor              | Payment Type | Status Indicator | APC  | Relative Weight | Payment Rate | CT FEE SCHED | changed |
|----------------|-------------------------------|--------------|------------------|------|-----------------|--------------|--------------|---------|
| J7504          | Lymphocyte immune globulin    | APC-PR       | K                | 0890 |                 | 1438.74      |              | *       |
| J7511          | Antithymocyte globulin rabbit | APC-PR       | K                | 9104 |                 | 690.84       |              | *       |
| J7525          | Tacrolimus injection          | APC-PR       | K                | 9006 |                 | 163.77       |              | *       |
| J8501          | Oral aprepitant               | APC-PR       | K                | 0868 |                 | 11.11        |              | *       |
| J8510          | Oral busulfan                 | APC-PR       | K                | 1839 |                 | 23.69        |              | *       |
| J8520          | Capecitabine, oral, 150 mg    | APC-PR       | K                | 7042 |                 | 4.12         |              | *       |
| J8521          | Capecitabine, oral, 500 mg    | APC-PR       | K                | 0934 |                 | 13.78        |              | *       |
| J8560          | Etoposide oral 50 mg          | APC-PR       | K                | 0802 |                 | 71.61        |              | *       |
| J8655          | Netupitant palonosetron oral  | APC-PR       | G                | 9448 |                 | 461.97       |              | *       |
| J8700          | Temozolomide                  | APC-PR       | K                | 1086 |                 | 2.66         |              | *       |
| J8705          | Topotecan oral                | APC-PR       | K                | 1238 |                 | 103.85       |              | *       |
| J9017          | Arsenic trioxide injection    | APC-PR       | K                | 9012 |                 | 64.62        |              | *       |
| J9019          | Erwinaze injection            | APC-PR       | K                | 9289 |                 | 402.74       |              | *       |
| J9025          | Azacitidine injection         | APC-PR       | K                | 1709 |                 | 2.84         |              | *       |
| J9027          | Clofarabine injection         | APC-PR       | K                | 1710 |                 | 152.44       |              | *       |
| J9031          | Bcg live intravesical vac     | APC-PR       | K                | 0809 |                 | 123.2        |              | *       |
| J9032          | Injection, belinostat, 10mg   | APC-PR       | G                | 1658 |                 | 33.54        |              | *       |
| J9033          | Bendamustine injection        | APC-PR       | K                | 9243 |                 | 27.01        |              | *       |
| J9035          | Bevacizumab injection         | APC-PR       | K                | 9214 |                 | 72.31        |              | *       |
| J9039          | Injection, blinatumomab       | APC-PR       | G                | 9449 |                 | 98.79        |              | *       |
| J9041          | Bortezomib injection          | APC-PR       | K                | 9207 |                 | 46.52        |              | *       |
| J9042          | Brentuximab vedotin inj       | APC-PR       | K                | 9287 |                 | 129.09       |              | *       |
| J9043          | Cabazitaxel injection         | APC-PR       | K                | 9276 |                 | 154.57       |              | *       |
| J9047          | Injection, carfilzomib, 1 mg  | APC-PR       | K                | 9295 |                 | 31.95        |              | *       |
| J9050          | Carmustine injection          | APC-PR       | K                | 0812 |                 | 3847.56      |              | *       |
| J9055          | Cetuximab injection           | APC-PR       | K                | 9215 |                 | 55.63        |              | *       |
| J9065          | Inj cladribine per 1 mg       | APC-PR       | K                | 0858 |                 | 21.75        |              | *       |
| J9070          | Cyclophosphamide 100 mg inj   | APC-PR       | K                | 1408 |                 | 43.97        |              | *       |
| J9098          | Cytarabine liposome inj       | APC-PR       | K                | 1166 |                 | 595.76       |              | *       |
| J9120          | Dactinomycin injection        | APC-PR       | K                | 0752 |                 | 1276.38      |              | *       |
| J9150          | Daunorubicin injection        | APC-PR       | K                | 0820 |                 | 40.03        |              | *       |
| J9151          | Daunorubicin citrate inj      | APC-PR       | K                | 0821 |                 | 243.67       |              | *       |
| J9155          | Degarelix injection           | APC-PR       | K                | 1296 |                 | 3.62         |              | *       |
| J9171          | Docetaxel injection           | APC-PR       | K                | 0823 |                 | 2.72         |              | *       |

CMAF Addendum B - OPPS Payment Type by Procedure Code  
Changes Effective October 1, 2016

| Procedure Code | Short Descriptor             | Payment Type | Status Indicator | APC  | Relative Weight | Payment Rate | CT FEE SCHED | changed |
|----------------|------------------------------|--------------|------------------|------|-----------------|--------------|--------------|---------|
| J9179          | Eribulin mesylate injection  | APC-PR       | K                | 1426 |                 | 106.08       |              | *       |
| J9200          | Floxuridine injection        | APC-PR       | K                | 0827 |                 | 52.8         |              | *       |
| J9202          | Goserelin acetate implant    | APC-PR       | K                | 0810 |                 | 327.12       |              | *       |
| J9207          | Ixabepilone injection        | APC-PR       | K                | 9240 |                 | 77.87        |              | *       |
| J9208          | Ifosfamide injection         | APC-PR       | K                | 0831 |                 | 28.18        |              | *       |
| J9211          | Idarubicin hcl injection     | APC-PR       | K                | 0832 |                 | 29.76        |              | *       |
| J9214          | Interferon alfa-2b inj       | APC-PR       | K                | 0836 |                 | 26.86        |              | *       |
| J9217          | Leuprolide acetate suspnsion | APC-PR       | K                | 9217 |                 | 225.01       |              | *       |
| J9225          | Vantas implant               | APC-PR       | K                | 1711 |                 | 3138.04      |              | *       |
| J9226          | Supprelin la implant         | APC-PR       | K                | 1142 |                 | 26205.5      |              | *       |
| J9228          | Ipilimumab injection         | APC-PR       | K                | 9284 |                 | 142.65       |              | *       |
| J9230          | Mechlorethamine hcl inj      | APC-PR       | K                | 0751 |                 | 265.89       |              | *       |
| J9245          | Inj melphalan hydrochl 50 mg | APC-PR       | K                | 0840 |                 | 1871.63      |              | *       |
| J9261          | Nelarabine injection         | APC-PR       | K                | 0825 |                 | 152.21       |              | *       |
| J9262          | Inj, omacetaxine mep, 0.01mg | APC-PR       | K                | 9297 |                 | 2.69         |              | *       |
| J9263          | Oxaliplatin                  | APC-PR       | K                | 1738 |                 | 0.39         |              | *       |
| J9264          | Paclitaxel protein bound     | APC-PR       | K                | 1712 |                 | 10.32        |              | *       |
| J9266          | Pegaspargase injection       | APC-PR       | K                | 0843 |                 | 13911.23     |              | *       |
| J9268          | Pentostatin injection        | APC-PR       | K                | 0844 |                 | 1887.77      |              | *       |
| J9271          | Inj pembrolizumab            | APC-PR       | G                | 1490 |                 | 46.5         |              | *       |
| J9280          | Mitomycin injection          | APC-PR       | K                | 1232 |                 | 103.17       |              | *       |
| J9293          | Mitoxantrone hydrochl / 5 mg | APC-PR       | K                | 0864 |                 | 36.75        |              | *       |
| J9299          | Injection, nivolumab         | APC-PR       | G                | 9453 |                 | 26.06        |              | *       |
| J9301          | Obinutuzumab inj             | APC-PR       | G                | 1476 |                 | 56.2         |              | *       |
| J9302          | Ofatumumab injection         | APC-PR       | K                | 9260 |                 | 51.87        |              | *       |
| J9303          | Panitumumab injection        | APC-PR       | K                | 9235 |                 | 105.6        |              | *       |
| J9305          | Pemetrexed injection         | APC-PR       | K                | 9213 |                 | 62.78        |              | *       |
| J9306          | Injection, pertuzumab, 1 mg  | APC-PR       | K                | 1471 |                 | 10.65        |              | *       |
| J9307          | Pralatrexate injection       | APC-PR       | K                | 9259 |                 | 229.72       |              | *       |
| J9308          | Injection, ramucirumab       | APC-PR       | G                | 1488 |                 | 55.93        |              | *       |
| J9310          | Rituximab injection          | APC-PR       | K                | 0849 |                 | 792.92       |              | *       |
| J9315          | Romidepsin injection         | APC-PR       | K                | 9265 |                 | 306.79       |              | *       |
| J9320          | Streptozocin injection       | APC-PR       | K                | 0850 |                 | 323.6        |              | *       |
| J9328          | Temozolomide injection       | APC-PR       | K                | 9253 |                 | 8.24         |              | *       |



CMAP Addendum B - OPPS Payment Type by Procedure Code  
Changes Effective October 1, 2016

| Procedure Code | Short Descriptor             | Payment Type | Status Indicator | APC  | Relative Weight | Payment Rate | CT FEE SCHED | changed |
|----------------|------------------------------|--------------|------------------|------|-----------------|--------------|--------------|---------|
| J9330          | Temsirolimus injection       | APC-PR       | K                | 1168 |                 | 66.67        |              | *       |
| J9340          | Thiotepa injection           | APC-PR       | K                | 0851 |                 | 1035.21      |              | *       |
| J9355          | Trastuzumab injection        | APC-PR       | K                | 1613 |                 | 92.09        |              | *       |
| J9357          | Valrubicin injection         | APC-PR       | K                | 1235 |                 | 1148.73      |              | *       |
| J9371          | Inj, vincristine sul lip 1mg | APC-PR       | G                | 1466 |                 | 2506.49      |              | *       |
| J9395          | Injection, fulvestrant       | APC-PR       | K                | 9120 |                 | 95.77        |              | *       |
| J9400          | Inj, ziv-aflibercept, 1mg    | APC-PR       | K                | 9296 |                 | 8.45         |              | *       |
| J9600          | Porfimer sodium injection    | APC-PR       | K                | 0856 |                 | 20910.92     |              | *       |
| P9041          | Albumin (human),5%, 50ml     | APC-PR       | K                | 0961 |                 | 11.02        |              | *       |
| Q0138          | Ferumoxytol, non-esrd        | APC-PR       | K                | 1297 |                 | 0.88         |              | *       |
| Q0139          | Ferumoxytol, esrd use        | APC-PR       | K                | 1485 |                 | 0.88         |              | *       |
| Q2017          | Teniposide, 50 mg            | APC-PR       | K                | 7035 |                 | 2377.68      |              | *       |
| Q2043          | Sipuleucel-t auto cd54+      | APC-PR       | K                | 9273 |                 | 37763.36     |              | *       |
| Q2050          | Doxorubicin inj 10mg         | APC-PR       | K                | 7046 |                 | 435.44       |              | *       |
| Q3027          | Inj beta interferon im 1 mcg | APC-PR       | K                | 1472 |                 | 45.37        |              | *       |
| Q5101          | Inj filgrastim gcsf biosimil | APC-PR       | G                | 1822 |                 | 0.83         |              | *       |
| Q5102          | Inj., infliximab biosimilar  | NO           | E                |      |                 |              |              | *       |
| Q9950          | Inj sulf hexa lipid microsph | APC-PR       | G                | 9457 |                 | 22.33        |              | *       |
| Q9968          | Visualization adjunct        | APC-PR       | K                | 1446 |                 | 2.22         |              | *       |
| Q9981          | Rolapitant, oral, 1mg        | APC-PR       | K                | 1761 |                 | 12.65        |              | *       |
| V2785          | Corneal tissue processing    | APC-PR       | F                |      |                 | 1422.11      |              | * DSS   |

**Connecticut Addendum B - OPPS Payment Type by Procedure Code - Legend**

Effective July 1, 2106

| Field Label                        | Field Description                                                                                                                                                                                                                                                | Valid Values                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
|------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Procedure Code</b>              | Five digit CPT or HCPCS code.                                                                                                                                                                                                                                    | See CPT or HCPCS manual.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |
| <b>Short Descriptor</b>            | Short description for the procedure code field.                                                                                                                                                                                                                  | See CPT or HCPCS manual.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |
| <b>Payment Type</b>                | Identifies the payment method used by DSS to determine if and how the procedure code will be reimbursed.                                                                                                                                                         | APC — Reimbursed using APC methodology.<br>APC-FS — APC (packaged) except a claim for a 'non-patient', then reimbursed based on the Lab fee schedule.<br>APC-PR — APC reimbursed based on payment rate.<br>FS — Reimbursed based on the CT fee schedule listed in the CT Fee Schedule field.<br>FS-CMAP - Reimbursed based on the CT fee schedule listed in CT Fee Schedule field. These codes are not on Medicare's version of Addendum B.<br>L1— Reimbursed based on the Lab fee schedule if the claim is for a non-patient.<br>MP — Manually priced.<br>No — Not covered by CT Medicaid (payment denied).<br>RCC — Reimbursed based on revenue center code pricing.<br>SURG — Surgical procedures manually priced. |
| <b>Status Indicator</b>            | The status indicator assigned by CMS. If the Payment Type value is APC, the status indicator will process according to CMS/Medicare guidelines.                                                                                                                  | See Medicare Addendum D1.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |
| <b>APC<sup>1</sup></b>             | The APC group assigned by CMS for that procedure code.                                                                                                                                                                                                           | See Medicare Addendum B for APC group and Medicare Addendum A for APC descriptions.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
| <b>Relative Weight<sup>1</sup></b> | The relative weight assigned by CMS for the APC group assigned.                                                                                                                                                                                                  | See Medicare Addendum A or Addendum B.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| <b>Payment Rate<sup>1</sup></b>    | For procedure codes with a payment type of APC-PR this field is the rate that the procedure code will be reimbursed. For procedure codes with payment type of SURG, this field indicates MP for manual priced or the rate the procedure code will be reimbursed. |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |
| <b>CT Fee Schedule</b>             | Identifies which fee schedule will be utilized for a given procedure code. Field is blank if service will not be paid using a fee schedule.                                                                                                                      | See CT Fee Schedule Legend.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |
| <b>Changed</b>                     | This field is only present on the Changes tab and indicates whether it is a changed, deleted or a new record.                                                                                                                                                    | D - The procedure code was deleted by CMS.<br>N - The procedure code was added by CMS.<br>** - The procedure code was updated by CMS.<br>* DSS' - The procedure code was a DSS change only.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |

<sup>1</sup> Text is grey if the value is available from Medicare but not applicable to CT Medicaid.

**Connecticut Addendum B - OPPS Payment Type by Procedure Code - CT Fee Schedule Legend**  
**Effective: July 1, 2016**

| <b>Fee Schedule Label</b>   | <b>Fee Schedule Description</b>                                                                                                                                       |
|-----------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Clinic-BH if RCC=900</b> | Clinic and Outpatient-Behavioral Health fee schedule, only if it is billed with a Behavioral Health RCC 900. All other instances are not covered.                     |
| <b>Clinic-BH if RCC=905</b> | Clinic and Outpatient-Behavioral Health fee schedule, only if it is billed with a Behavioral Health RCC 905. All other instances are not covered.                     |
| <b>Clinic-BH if RCC=906</b> | Clinic and Outpatient-Behavioral Health fee schedule, only if it is billed with a Behavioral Health RCC 906. All other instances are not covered.                     |
| <b>Clinic-BH if RCC=907</b> | Clinic and Outpatient-Behavioral Health fee schedule, only if it is billed with a Behavioral Health RCC 907. All other instances are not covered.                     |
| <b>Clinic-BH if RCC=913</b> | Clinic and Outpatient-Behavioral Health fee schedule, only if it is billed with a Behavioral Health RCC 913. All other instances are not covered.                     |
| <b>Clinic-BH if RCC=914</b> | Clinic and Outpatient-Behavioral Health fee schedule, only if it is billed with a Behavioral Health RCC 914. All other instances are not covered.                     |
| <b>Clinic-BH if RCC=915</b> | Clinic and Outpatient-Behavioral Health fee schedule, only if it is billed with a Behavioral Health RCC 915. All other instances are not covered.                     |
| <b>Clinic-BH if RCC=916</b> | Clinic and Outpatient-Behavioral Health fee schedule, only if it is billed with a Behavioral Health RCC 916. All other instances are not covered.                     |
| <b>Clinic-BH if RCC=918</b> | Clinic and Outpatient-Behavioral Health fee schedule, only if it is billed with a Behavioral Health RCC 918. All other instances are not covered.                     |
| <b>Clinic-BH if RCC=919</b> | Clinic and Outpatient-Behavioral Health fee schedule, only if it is billed with a Behavioral Health RCC 919. All other instances are not covered.                     |
| <b>Dialysis</b>             | Clinic-Dialysis fee schedule.                                                                                                                                         |
| <b>FP/OFOUT</b>             | For 340B providers use the Clinic-Family Planning fee schedule. For all others providers use the Physician Office and Outpatient fee schedule.                        |
| <b>LAB</b>                  | Lab fee schedule.                                                                                                                                                     |
| <b>LAB - ModL1</b>          | Lab fee schedule only if modifier L1 is present.                                                                                                                      |
| <b>MEDS - DME</b>           | MEDS-DME fee schedule.                                                                                                                                                |
| <b>MEDS - Hearing Aid</b>   | MEDS-Hearing Aid/Prosthetic Eye fee schedule.                                                                                                                         |
| <b>NDCLOW</b>               | Reimbursed based on the lower of Estimated Acquisition Cost (EAC), Federal Upper Limit (FUL), or State Maximum Allowable Cost (SMAC) for the NDC and units.           |
| <b>OFOUT</b>                | Physician Office and Outpatient fee schedule.                                                                                                                         |
| <b>PHRAD</b>                | Physician Radiology fee schedule.                                                                                                                                     |
| <b>RCC 401</b>              | The procedure code must be billed with RCC 401 and will be reimbursed based on the rate on file for RCC 401.                                                          |
| <b>RCC 403</b>              | The procedure code must be billed with RCC 403 and will be reimbursed based on the rate on file for RCC 403.                                                          |
| <b>RCC 771</b>              | The procedure code must be billed with RCC 771 and will be reimbursed based on the rate on file for RCC 771.                                                          |
| <b>RCC 901</b>              | The procedure code must be billed with RCC 901 and will be reimbursed based on the rate on file for RCC 901.                                                          |
| <b>RCC 953</b>              | The procedure code must be billed with RCC 953 and will be reimbursed based on the rate on file for RCC 953.                                                          |
| <b>Therapy RCCs</b>         | The procedure code must be billed with one of the appropriate therapy RCCs and will be reimbursed based on the rate on file for the RCC.<br>(421,424,431,434,441,444) |