

## FEE SCHEDULES FOR CARDIAC PROGRAM

Service Code	Service Description	Provider Type	Service Place	Service Type	Effective Date End Date	Fee	Limit	Description
33200	INS PERM PACEMAKER W/EPICARD ELEC;THORCTBY THORACOTOMY	00	00	20	4/1/1989	\$598.50		
33200	INS PERM PACEMAKER W/EPICARD ELEC;THORCTBY THORACOTOMY	00	00	40	4/1/1989	\$295.50		
33206	Insertion or replacement of permanent pacemaker with transvenous electrode(s); atrial	00	00	10	1/1/1998	\$118.00		
33206	Insertion or replacement of permanent pacemaker with transvenous electrode(s); atrial	00	00	20	1/1/1998	\$590.00		
33206	Insertion or replacement of permanent pacemaker with transvenous electrode(s); atrial	00	00	40	1/1/1998	\$264.00		
33210	Insertion or replacement of temporary transvenous single chamber cardiac electrode or pacemaker catheter (separate procedure)	00	00	20	4/1/1989	\$202.50		
33210	Insertion or replacement of temporary transvenous single chamber cardiac electrode or pacemaker catheter (separate procedure)	00	00	27	7/1/1999	\$776.00		
33210	Insertion or replacement of temporary transvenous single chamber cardiac electrode or pacemaker catheter (separate procedure)	00	00	40	4/1/1989	\$138.00		
33216	Insertion of a transvenous electrode; single chamber (1 electrode) permanent pacemaker or single chamber pacing cardioverter-defibrillator	00	00	20	1/1/1998	\$590.00		
33216	Insertion of a transvenous electrode; single chamber (1 electrode) permanent pacemaker or single chamber pacing cardioverter-defibrillator	00	00	27	7/1/1999	\$776.00		

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33216	Insertion of a transvenous electrode; single chamber (1 electrode) permanent pacemaker or single chamber pacing cardioverter-defibrillator	00	00	40	1/1/1998	\$177.50		
33220	Repair of 2 transvenous electrodes for a dual chamber permanent pacemaker or dual chamber pacing cardioverter-defibrillator	00	00	10	1/1/1998	\$67.36		
33220	Repair of 2 transvenous electrodes for a dual chamber permanent pacemaker or dual chamber pacing cardioverter-defibrillator	00	00	20	1/1/1998	\$336.78		
33220	Repair of 2 transvenous electrodes for a dual chamber permanent pacemaker or dual chamber pacing cardioverter-defibrillator	00	00	40	1/1/1998	\$133.00		
33235	Removal of transvenous pacemaker electrode(s); dual lead system	00	00	10	1/1/1998	\$73.05		
33235	Removal of transvenous pacemaker electrode(s); dual lead system	00	00	20	1/1/1998	\$365.24		
33235	Removal of transvenous pacemaker electrode(s); dual lead system	00	00	40	1/1/1998	\$182.00		
33400	Valvuloplasty, aortic valve; open, with cardiopulmonary bypass	00	00	10	1/1/1998	\$200.00		
33400	Valvuloplasty, aortic valve; open, with cardiopulmonary bypass	00	00	20	4/1/1989	\$1,000.00		
33400	Valvuloplasty, aortic valve; open, with cardiopulmonary bypass	00	00	40	4/1/1989	\$788.00		

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33401	Valvuloplasty, aortic valve; open, with inflow occlusion	00	00	10	1/1/1998	\$200.00		
33401	Valvuloplasty, aortic valve; open, with inflow occlusion	00	00	20	1/1/1998	\$1,000.00		
33401	Valvuloplasty, aortic valve; open, with inflow occlusion	00	00	40	1/1/1998	\$486.00		
33403	Valvuloplasty, aortic valve; using transventricular dilation, with cardiopulmonary bypass	00	00	10	1/1/1998	\$200.00		
33403	Valvuloplasty, aortic valve; using transventricular dilation, with cardiopulmonary bypass	00	00	20	1/1/1998	\$1,000.00		
33403	Valvuloplasty, aortic valve; using transventricular dilation, with cardiopulmonary bypass	00	00	40	1/1/1998	\$486.00		
33404	Construction of apical-aortic conduit	00	00	10	1/1/1998	\$200.00		
33404	Construction of apical-aortic conduit	00	00	20	1/1/1998	\$1,000.00		
33404	Construction of apical-aortic conduit	00	00	40	1/1/1998	\$550.00		
33405	Replacement, aortic valve, with cardiopulmonary bypass; with prosthetic valve other than homograft or stentless valve	00	00	10	1/1/1998	\$200.00		

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33405	Replacement, aortic valve, with cardiopulmonary bypass; with prosthetic valve other than homograft or stentless valve	00	00	20	4/1/1989	\$1,000.00		
33405	Replacement, aortic valve, with cardiopulmonary bypass; with prosthetic valve other than homograft or stentless valve	00	00	40	4/1/1989	\$776.00		
33406	Replacement, aortic valve, with cardiopulmonary bypass; with allograft valve (freehand)	00	00	10	1/1/1998	\$200.00		
33406	Replacement, aortic valve, with cardiopulmonary bypass; with allograft valve (freehand)	00	00	20	1/1/1998	\$1,000.00		
33406	Replacement, aortic valve, with cardiopulmonary bypass; with allograft valve (freehand)	00	00	40	1/1/1998	\$486.00		
33411	Replacement, aortic valve; with aortic annulus enlargement, noncoronary cusp	00	00	10	1/1/1998	\$200.00		
33411	Replacement, aortic valve; with aortic annulus enlargement, noncoronary cusp	00	00	20	1/1/1998	\$1,000.00		
33411	Replacement, aortic valve; with aortic annulus enlargement, noncoronary cusp	00	00	40	1/1/1998	\$788.00		
33412	Replacement, aortic valve; with transventricular aortic annulus enlargement (Konno procedure)	00	00	10	1/1/1998	\$200.00		
33412	Replacement, aortic valve; with transventricular aortic annulus enlargement (Konno procedure)	00	00	20	1/1/1998	\$1,000.00		

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33412	Replacement, aortic valve; with transventricular aortic annulus enlargement (Konno procedure)	00	00	40	1/1/1998	\$788.00		
33413	Replacement, aortic valve; by translocation of autologous pulmonary valve with allograft replacement of pulmonary valve (Ross procedure)	00	00	10	1/1/1998	\$200.00		
33413	Replacement, aortic valve; by translocation of autologous pulmonary valve with allograft replacement of pulmonary valve (Ross procedure)	00	00	20	1/1/1998	\$1,000.00		
33413	Replacement, aortic valve; by translocation of autologous pulmonary valve with allograft replacement of pulmonary valve (Ross procedure)	00	00	40	1/1/1998	\$486.00		
33414	Repair of left ventricular outflow tract obstruction by patch enlargement of the outflow tract	00	00	10	1/1/1998	\$200.00		
33414	Repair of left ventricular outflow tract obstruction by patch enlargement of the outflow tract	00	00	20	1/1/1998	\$1,000.00		
33414	Repair of left ventricular outflow tract obstruction by patch enlargement of the outflow tract	00	00	40	1/1/1998	\$486.00		
33415	Resection or incision of subvalvular tissue for discrete subvalvular aortic stenosis	00	00	10	1/1/1998	\$200.00		
33415	Resection or incision of subvalvular tissue for discrete subvalvular aortic stenosis	00	00	20	1/1/1998	\$1,000.00		
33415	Resection or incision of subvalvular tissue for discrete subvalvular aortic stenosis	00	00	40	1/1/1998	\$788.00		

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Service Code	Service Description	Provider Type	Service Place	Service Type	Effective Date End Date	Fee	Limit	Description
33416	Ventriculomyotomy (-myectomy) for idiopathic hypertrophic subaortic stenosis (eg, asymmetric septal hypertrophy)	00	00	10	1/1/1998	\$200.00		
33416	Ventriculomyotomy (-myectomy) for idiopathic hypertrophic subaortic stenosis (eg, asymmetric septal hypertrophy)	00	00	20	1/1/1998	\$1,000.00		
33416	Ventriculomyotomy (-myectomy) for idiopathic hypertrophic subaortic stenosis (eg, asymmetric septal hypertrophy)	00	00	40	1/1/1998	\$788.00		
33417	Aortoplasty (gusset) for supraaortic stenosis	00	00	10	1/1/1998	\$200.00		
33417	Aortoplasty (gusset) for supraaortic stenosis	00	00	20	1/1/1998	\$1,000.00		
33417	Aortoplasty (gusset) for supraaortic stenosis	00	00	40	1/1/1998	\$788.00		
33420	Valvotomy, mitral valve; closed heart	00	00	10	1/1/1998	\$200.00		
33420	Valvotomy, mitral valve; closed heart	00	00	20	4/1/1989	\$1,000.00		
33420	Valvotomy, mitral valve; closed heart	00	00	40	4/1/1989	\$788.00		
33422	Valvotomy, mitral valve; open heart, with cardiopulmonary bypass	00	00	10	1/1/1998	\$200.00		

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33422	Valvotomy, mitral valve; open heart, with cardiopulmonary bypass	00	00	20	1/1/1998	\$1,000.00		
33422	Valvotomy, mitral valve; open heart, with cardiopulmonary bypass	00	00	40	1/1/1998	\$788.00		
33425	Valvuloplasty, mitral valve, with cardiopulmonary bypass;	00	00	10	1/1/1998	\$200.00		
33425	Valvuloplasty, mitral valve, with cardiopulmonary bypass;	00	00	20	4/1/1989	\$1,000.00		
33425	Valvuloplasty, mitral valve, with cardiopulmonary bypass;	00	00	40	4/1/1989	\$788.00		
33426	Valvuloplasty, mitral valve, with cardiopulmonary bypass; with prosthetic ring	00	00	10	1/1/1998	\$200.00		
33426	Valvuloplasty, mitral valve, with cardiopulmonary bypass; with prosthetic ring	00	00	20	1/1/1998	\$1,000.00		
33426	Valvuloplasty, mitral valve, with cardiopulmonary bypass; with prosthetic ring	00	00	40	1/1/1998	\$788.00		
33427	Valvuloplasty, mitral valve, with cardiopulmonary bypass; radical reconstruction, with or without ring	00	00	10	1/1/1998	\$200.00		
33427	Valvuloplasty, mitral valve, with cardiopulmonary bypass; radical reconstruction, with or without ring	00	00	20	1/1/1998	\$1,000.00		

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33427	Valvuloplasty, mitral valve, with cardiopulmonary bypass; radical reconstruction, with or without ring	00	00	40	1/1/1998	\$788.00		
33430	Replacement, mitral valve, with cardiopulmonary bypass	00	00	10	1/1/1998	\$200.00		
33430	Replacement, mitral valve, with cardiopulmonary bypass	00	00	20	4/1/1989	\$1,000.00		
33430	Replacement, mitral valve, with cardiopulmonary bypass	00	00	40	4/1/1989	\$813.50		
33460	Valvectomy, tricuspid valve, with cardiopulmonary bypass	00	00	10	1/1/1998	\$200.00		
33460	Valvectomy, tricuspid valve, with cardiopulmonary bypass	00	00	20	4/1/1989	\$1,000.00		
33460	Valvectomy, tricuspid valve, with cardiopulmonary bypass	00	00	40	4/1/1989	\$788.00		
33463	Valvuloplasty, tricuspid valve; without ring insertion	00	00	10	1/1/1998	\$200.00		
33463	Valvuloplasty, tricuspid valve; without ring insertion	00	00	20	1/1/1998	\$1,000.00		
33463	Valvuloplasty, tricuspid valve; without ring insertion	00	00	40	1/1/1998	\$788.00		

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33464	Valvuloplasty, tricuspid valve; with ring insertion	00	00	10	1/1/1998	\$200.00		
33464	Valvuloplasty, tricuspid valve; with ring insertion	00	00	20	1/1/1998	\$1,000.00		
33464	Valvuloplasty, tricuspid valve; with ring insertion	00	00	40	1/1/1998	\$788.00		
33465	Replacement, tricuspid valve, with cardiopulmonary bypass	00	00	10	1/1/1998	\$200.00		
33465	Replacement, tricuspid valve, with cardiopulmonary bypass	00	00	20	4/1/1989	\$1,000.00		
33465	Replacement, tricuspid valve, with cardiopulmonary bypass	00	00	40	4/1/1989	\$788.00		
33468	Tricuspid valve repositioning and plication for Ebstein anomaly	00	00	10	1/1/1998	\$200.00		
33468	Tricuspid valve repositioning and plication for Ebstein anomaly	00	00	20	1/1/1998	\$1,000.00		
33468	Tricuspid valve repositioning and plication for Ebstein anomaly	00	00	40	1/1/1998	\$788.00		
33470	Valvotomy, pulmonary valve, closed heart; transventricular	00	00	10	1/1/1998	\$200.00		

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33470	Valvotomy, pulmonary valve, closed heart; transventricular	00	00	20	4/1/1989	\$1,000.00		
33470	Valvotomy, pulmonary valve, closed heart; transventricular	00	00	40	4/1/1989	\$788.00		
33471	Valvotomy, pulmonary valve, closed heart; via pulmonary artery	00	00	10	1/1/1998	\$200.00		
33471	Valvotomy, pulmonary valve, closed heart; via pulmonary artery	00	00	20	1/1/1998	\$1,000.00		
33471	Valvotomy, pulmonary valve, closed heart; via pulmonary artery	00	00	40	1/1/1998	\$788.00		
33472	Valvotomy, pulmonary valve, open heart; with inflow occlusion	00	00	10	1/1/1998	\$200.00		
33472	Valvotomy, pulmonary valve, open heart; with inflow occlusion	00	00	20	1/1/1998	\$1,000.00		
33472	Valvotomy, pulmonary valve, open heart; with inflow occlusion	00	00	40	1/1/1998	\$788.00		
33474	Valvotomy, pulmonary valve, open heart; with cardiopulmonary bypass	00	00	10	1/1/1998	\$200.00		
33474	Valvotomy, pulmonary valve, open heart; with cardiopulmonary bypass	00	00	20	1/1/1998	\$1,000.00		

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33474	Valvotomy, pulmonary valve, open heart; with cardiopulmonary bypass	00	00	40	1/1/1998	\$788.00		
33475	Replacement, pulmonary valve	00	00	10	1/1/1998	\$200.00		
33475	Replacement, pulmonary valve	00	00	20	1/1/1998	\$1,000.00		
33475	Replacement, pulmonary valve	00	00	40	1/1/1998	\$788.00		
33476	Right ventricular resection for infundibular stenosis, with or without commissurotomy	00	00	10	1/1/1998	\$200.00		
33476	Right ventricular resection for infundibular stenosis, with or without commissurotomy	00	00	20	1/1/1998	\$1,000.00		
33476	Right ventricular resection for infundibular stenosis, with or without commissurotomy	00	00	40	1/1/1998	\$788.00		
33478	Outflow tract augmentation (gusset), with or without commissurotomy or infundibular resection	00	00	10	1/1/1998	\$200.00		
33478	Outflow tract augmentation (gusset), with or without commissurotomy or infundibular resection	00	00	20	1/1/1998	\$1,000.00		
33478	Outflow tract augmentation (gusset), with or without commissurotomy or infundibular resection	00	00	40	1/1/1998	\$788.00		

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Service Code	Service Description	Provider Type	Service Place	Service Type	Effective Date End Date	Fee	Limit	Description
33500	Repair of coronary arteriovenous or arteriocardiac chamber fistula; with cardiopulmonary bypass	00	00	10	1/1/1998	\$189.00		
33500	Repair of coronary arteriovenous or arteriocardiac chamber fistula; with cardiopulmonary bypass	00	00	20	1/1/1998	\$945.00		
33500	Repair of coronary arteriovenous or arteriocardiac chamber fistula; with cardiopulmonary bypass	00	00	40	1/1/1998	\$450.00		
33505	Repair of anomalous coronary artery from pulmonary artery origin; with construction of intrapulmonary artery tunnel (Takeuchi procedure)	00	00	10	1/1/1998	\$200.00		
33505	Repair of anomalous coronary artery from pulmonary artery origin; with construction of intrapulmonary artery tunnel (Takeuchi procedure)	00	00	20	4/1/1989	\$1,000.00		
33505	Repair of anomalous coronary artery from pulmonary artery origin; with construction of intrapulmonary artery tunnel (Takeuchi procedure)	00	00	40	4/1/1989	\$788.00		
33530	Reoperation, coronary artery bypass procedure or valve procedure, more than 1 month after original operation (List separately in addition to code for primary procedure)	00	00	10	1/1/1998	\$200.00		
33530	Reoperation, coronary artery bypass procedure or valve procedure, more than 1 month after original operation (List separately in addition to code for primary procedure)	00	00	20	4/1/1989	\$1,000.00		
33530	Reoperation, coronary artery bypass procedure or valve procedure, more than 1 month after original operation (List separately in addition to code for primary procedure)	00	00	40	1/1/1998	\$778.50		
33533	Coronary artery bypass, using arterial graft(s); single arterial graft	00	00	10	1/1/1998	\$200.00		

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33533	Coronary artery bypass, using arterial graft(s); single arterial graft	00	00	20	1/1/1998	\$1,000.00		
33533	Coronary artery bypass, using arterial graft(s); single arterial graft	00	00	40	1/1/1998	\$778.50		
33536	Coronary artery bypass, using arterial graft(s); 4 or more coronary arterial grafts	00	00	10	1/1/1998	\$200.00		
33536	Coronary artery bypass, using arterial graft(s); 4 or more coronary arterial grafts	00	00	20	1/1/1998	\$1,000.00		
33536	Coronary artery bypass, using arterial graft(s); 4 or more coronary arterial grafts	00	00	40	1/1/1998	\$778.50		
33572	Coronary endarterectomy, open, any method, of left anterior descending, circumflex, or right coronary artery performed in conjunction with coronary artery bypass graft procedure, each vessel (List separately in addition to primary procedure)	00	00	10	1/1/1998	\$59.42		
33572	Coronary endarterectomy, open, any method, of left anterior descending, circumflex, or right coronary artery performed in conjunction with coronary artery bypass graft procedure, each vessel (List separately in addition to primary procedure)	00	00	20	1/1/1998	\$297.11		
33572	Coronary endarterectomy, open, any method, of left anterior descending, circumflex, or right coronary artery performed in conjunction with coronary artery bypass graft procedure, each vessel (List separately in addition to primary procedure)	00	00	40	1/1/1998	\$148.00		
33600	Closure of atrioventricular valve (mitral or tricuspid) by suture or patch	00	00	10	1/1/1998	\$200.00		

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33600	Closure of atrioventricular valve (mitral or tricuspid) by suture or patch	00	00	20	4/1/1989	\$1,000.00		
33600	Closure of atrioventricular valve (mitral or tricuspid) by suture or patch	00	00	40	4/1/1989	\$788.00		
33641	Repair atrial septal defect, secundum, with cardiopulmonary bypass, with or without patch	00	00	10	1/1/1998	\$200.00		
33641	Repair atrial septal defect, secundum, with cardiopulmonary bypass, with or without patch	00	00	20	4/1/1989	\$1,000.00		
33641	Repair atrial septal defect, secundum, with cardiopulmonary bypass, with or without patch	00	00	40	1/1/1998	\$788.00		
33660	Repair of incomplete or partial atrioventricular canal (ostium primum atrial septal defect), with or without atrioventricular valve repair	00	00	10	1/1/1998	\$200.00		
33660	Repair of incomplete or partial atrioventricular canal (ostium primum atrial septal defect), with or without atrioventricular valve repair	00	00	20	4/1/1989	\$1,000.00		
33660	Repair of incomplete or partial atrioventricular canal (ostium primum atrial septal defect), with or without atrioventricular valve repair	00	00	40	4/1/1989	\$788.00		
33681	Closure of single ventricular septal defect, with or without patch;	00	00	10	1/1/1998	\$200.00		
33681	Closure of single ventricular septal defect, with or without patch;	00	00	20	1/1/1998	\$1,000.00		

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33681	Closure of single ventricular septal defect, with or without patch;	00	00	40	1/1/1998	\$804.50		
33690	Banding of pulmonary artery	00	00	10	1/1/1998	\$144.00		
33690	Banding of pulmonary artery	00	00	20	1/1/1998	\$720.00		
33690	Banding of pulmonary artery	00	00	40	1/1/1998	\$354.50		
33697	Complete repair tetralogy of Fallot with pulmonary atresia including construction of conduit from right ventricle to pulmonary artery and closure of ventricular septal defect	00	00	10	1/1/1998	\$200.00		
33697	Complete repair tetralogy of Fallot with pulmonary atresia including construction of conduit from right ventricle to pulmonary artery and closure of ventricular septal defect	00	00	20	1/1/1998	\$1,000.00		
33697	Complete repair tetralogy of Fallot with pulmonary atresia including construction of conduit from right ventricle to pulmonary artery and closure of ventricular septal defect	00	00	40	1/1/1998	\$804.50		
33702	Repair sinus of Valsalva fistula, with cardiopulmonary bypass;	00	00	10	1/1/1998	\$200.00		
33702	Repair sinus of Valsalva fistula, with cardiopulmonary bypass;	00	00	20	1/1/1998	\$1,000.00		
33702	Repair sinus of Valsalva fistula, with cardiopulmonary bypass;	00	00	40	1/1/1998	\$788.00		

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33735	Atrial septectomy or septostomy; closed heart (Blalock-Hanlon type operation)	00	00	10	1/1/1998	\$180.00		
33735	Atrial septectomy or septostomy; closed heart (Blalock-Hanlon type operation)	00	00	20	1/1/1998	\$899.00		
33735	Atrial septectomy or septostomy; closed heart (Blalock-Hanlon type operation)	00	00	40	1/1/1998	\$445.00		
33737	Atrial septectomy or septostomy; open heart, with inflow occlusion	00	00	10	1/1/1998	\$200.00		
33737	Atrial septectomy or septostomy; open heart, with inflow occlusion	00	00	20	1/1/1998	\$1,000.00		
33737	Atrial septectomy or septostomy; open heart, with inflow occlusion	00	00	40	1/1/1998	\$563.50		
33750	Shunt; subclavian to pulmonary artery (Blalock-Taussig type operation)	00	00	10	1/1/1998	\$191.00		
33750	Shunt; subclavian to pulmonary artery (Blalock-Taussig type operation)	00	00	20	1/1/1998	\$955.00		
33750	Shunt; subclavian to pulmonary artery (Blalock-Taussig type operation)	00	00	40	1/1/1998	\$594.00		
33766	Shunt; superior vena cava to pulmonary artery for flow to 1 lung (classical Glenn procedure)	00	00	10	1/1/1998	\$180.00		

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33766	Shunt; superior vena cava to pulmonary artery for flow to 1 lung (classical Glenn procedure)	00	00	20	1/1/1998	\$899.00		
33766	Shunt; superior vena cava to pulmonary artery for flow to 1 lung (classical Glenn procedure)	00	00	40	1/1/1998	\$445.00		
33774	Repair of transposition of the great arteries, atrial baffle procedure (eg, Mustard or Senning type) with cardiopulmonary bypass;	00	00	10	1/1/1998	\$200.00		
33774	Repair of transposition of the great arteries, atrial baffle procedure (eg, Mustard or Senning type) with cardiopulmonary bypass;	00	00	20	1/1/1998	\$1,000.00		
33774	Repair of transposition of the great arteries, atrial baffle procedure (eg, Mustard or Senning type) with cardiopulmonary bypass;	00	00	40	1/1/1998	\$788.00		
33780	Repair of transposition of the great arteries, aortic pulmonary artery reconstruction (eg, Jatene type); with closure of ventricular septal defect	00	00	10	1/1/1998	\$200.00		
33780	Repair of transposition of the great arteries, aortic pulmonary artery reconstruction (eg, Jatene type); with closure of ventricular septal defect	00	00	20	4/1/1989	\$1,000.00		
33780	Repair of transposition of the great arteries, aortic pulmonary artery reconstruction (eg, Jatene type); with closure of ventricular septal defect	00	00	40	1/1/1998	\$788.00		
33781	Repair of transposition of the great arteries, aortic pulmonary artery reconstruction (eg, Jatene type); with repair of subpulmonic obstruction	00	00	10	1/1/1998	\$200.00		
33781	Repair of transposition of the great arteries, aortic pulmonary artery reconstruction (eg, Jatene type); with repair of subpulmonic obstruction	00	00	20	4/1/1989	\$1,000.00		

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33781	Repair of transposition of the great arteries, aortic pulmonary artery reconstruction (eg, Jatene type); with repair of subpulmonic obstruction	00	00	40	4/1/1989	\$788.00		
33800	Aortic suspension (aortopexy) for tracheal decompression (eg, for tracheomalacia) (separate procedure)	00	00	10	1/1/1998	\$163.80		
33800	Aortic suspension (aortopexy) for tracheal decompression (eg, for tracheomalacia) (separate procedure)	00	00	20	1/1/1998	\$819.00		
33800	Aortic suspension (aortopexy) for tracheal decompression (eg, for tracheomalacia) (separate procedure)	00	00	40	1/1/1998	\$408.50		
33802	Division of aberrant vessel (vascular ring);	00	00	10	1/1/1998	\$144.00		
33802	Division of aberrant vessel (vascular ring);	00	00	20	1/1/1998	\$720.00		
33802	Division of aberrant vessel (vascular ring);	00	00	40	1/1/1998	\$354.50		
33814	Obliteration of aortopulmonary septal defect; with cardiopulmonary bypass	00	00	10	1/1/1998	\$200.00		
33814	Obliteration of aortopulmonary septal defect; with cardiopulmonary bypass	00	00	20	1/1/1998	\$1,000.00		
33814	Obliteration of aortopulmonary septal defect; with cardiopulmonary bypass	00	00	40	1/1/1998	\$788.00		

## FEE SCHEDULES FOR CARDIAC PROGRAM

Service Code	Service Description	Provider Type	Service Place	Service Type	Effective Date	Fee	Limit	Description
33822	Repair of patent ductus arteriosus; by division, younger than 18 years	00	00	10	1/1/1998	\$163.50		
33822	Repair of patent ductus arteriosus; by division, younger than 18 years	00	00	20	1/1/1998	\$818.50		
33822	Repair of patent ductus arteriosus; by division, younger than 18 years	00	00	40	1/1/1998	\$408.50		
33852	Repair of hypoplastic or interrupted aortic arch using autogenous or prosthetic material; without cardiopulmonary bypass	00	00	10	1/1/1998	\$200.00		
33852	Repair of hypoplastic or interrupted aortic arch using autogenous or prosthetic material; without cardiopulmonary bypass	00	00	20	1/1/1998	\$1,000.00		
33852	Repair of hypoplastic or interrupted aortic arch using autogenous or prosthetic material; without cardiopulmonary bypass	00	00	40	1/1/1998	\$788.00		
33853	Repair of hypoplastic or interrupted aortic arch using autogenous or prosthetic material; with cardiopulmonary bypass	00	00	10	1/1/1998	\$200.00		
33853	Repair of hypoplastic or interrupted aortic arch using autogenous or prosthetic material; with cardiopulmonary bypass	00	00	20	1/1/1998	\$1,000.00		
33853	Repair of hypoplastic or interrupted aortic arch using autogenous or prosthetic material; with cardiopulmonary bypass	00	00	40	1/1/1998	\$804.50		
35180	Repair, congenital arteriovenous fistula; head and neck	00	00	10	1/1/1998	\$189.00		

## FEE SCHEDULES FOR CARDIAC PROGRAM

Service Code	Service Description	Provider Type	Service Place	Service Type	Effective Date End Date	Fee	Limit	Description
35180	Repair, congenital arteriovenous fistula; head and neck	00	00	20	1/1/1998	\$945.00		
35180	Repair, congenital arteriovenous fistula; head and neck	00	00	40	1/1/1998	\$413.50		
35182	Repair, congenital arteriovenous fistula; thorax and abdomen	00	00	10	1/1/1998	\$189.00		
35182	Repair, congenital arteriovenous fistula; thorax and abdomen	00	00	20	1/1/1998	\$945.00		
35182	Repair, congenital arteriovenous fistula; thorax and abdomen	00	00	40	1/1/1998	\$450.00		
35184	Repair, congenital arteriovenous fistula; extremities	00	00	10	1/1/1998	\$189.00		
35184	Repair, congenital arteriovenous fistula; extremities	00	00	20	1/1/1998	\$945.00		
35184	Repair, congenital arteriovenous fistula; extremities	00	00	40	1/1/1998	\$325.00		
71010	Radiologic examination, chest; single view, frontal	00	00	54	4/1/1989	\$19.00		
71010	Radiologic examination, chest; single view, frontal	00	00	57	4/1/1989	\$7.50		

## FEE SCHEDULES FOR CARDIAC PROGRAM

Service Code	Service Description	Provider Type	Service Place	Service Type	Effective Date End Date	Fee	Limit Description
71010	Radiologic examination, chest; single view, frontal	00	00	RD	4/1/1989	\$11.50	
71020	Radiologic examination, chest, 2 views, frontal and lateral;	00	00	54	4/1/1989	\$30.00	
71020	Radiologic examination, chest, 2 views, frontal and lateral;	00	00	57	4/1/1989	\$15.00	
71020	Radiologic examination, chest, 2 views, frontal and lateral;	00	00	RD	4/1/1989	\$15.00	
71030	Radiologic examination, chest, complete, minimum of 4 views;	00	00	54	4/1/1989	\$37.50	
71030	Radiologic examination, chest, complete, minimum of 4 views;	00	00	57	4/1/1989	\$15.00	
71030	Radiologic examination, chest, complete, minimum of 4 views;	00	00	RD	4/1/1989	\$22.50	
80049	BASIC MATEBOLIC PANEL WHICH INCLUDES CARBON DIOXIDE (82374); CHLORIDE (82435); CREATININE (82565); GLUCOSE (82947); POTASSIUM (84132); SODIUM (84295); UREA NITROGEN (BUN) (84520).	00	00	86	7/1/1999	\$8.00	
80051	Electrolyte panel This panel must include the following: Carbon dioxide (82374) Chloride (82435) Potassium (84132) Sodium (84295)	00	00	86	7/1/1999	\$7.00	

## FEE SCHEDULES FOR CARDIAC PROGRAM

Service Code	Service Description	Provider Type	Service Place	Service Type	Effective Date End Date	Fee	Limit	Description
80054	COMP METABOLIC PANEL WHICH INCL ALBU(82040); BILIRU, TOTAL OR DIRECT(82250); CALC(82310); CHLOR(82435); CREAT(82565); GLUC(82947); PHOS, ALKALINE(84075); POTASS(84132); PROT, TOTAL(84155); SODIUM(84295); TRANSFERASE, ASPARTATE AMINO(AST)(SGOT)(84450); UREA NITRO (BUN)(84520)	00	00	86	7/1/1999	\$8.00		
80058	HEPATIC FUNCTION PANEL WHICH INCLUDES: ALBUMIN (82040); BILIRUBIN, TOTAL AND DIRECT (82251); PHOSPHATASE, ALKALINE (84075); TRANSFERASE, ALANINE AMINO (ALT) (SGPT) (84460); TRANSFERASE, ASPARTATE AMINO (AST) (SGOT) (84450).	00	00	86	7/1/1999	\$8.00		
80059	HEPATITIS PANEL WHICH INCLUDES: HEPATITIS B SURFACE ANTIGEN (HBSAG) (87340); HEPATITIS B SURFACE ANTIBODY (HBSAB) (86706); HEPATITIS B CORE ANTIBODY (HBCAB), IGG AND IGM (86704); HEPATITIS A ANTIBODY (HAAB), IGG AND IGM (86708); HEPATITIS C ANTIBODY (86803).	00	00	86	7/1/1999	\$41.00		
80061	Lipid panel This panel must include the following: Cholesterol, serum, total (82465) Lipoprotein, direct measurement, high density cholesterol (HDL cholesterol) (83718) Triglycerides (84478)	00	00	86	7/1/1999	\$14.00		
80162	Digoxin	00	00	86	1/1/1998	\$11.00		
81000	Urinalysis, by dip stick or tablet reagent for bilirubin, glucose, hemoglobin, ketones, leukocytes, nitrite, pH, protein, specific gravity, urobilinogen, any number of these constituents; non-automated, with microscopy	00	00	86	1/1/1998	\$4.37		
82306	Calcifediol (25-OH Vitamin D-3)	00	00	86	1/1/1998	\$40.91		
82310	Calcium; total	00	00	86	7/1/1999	\$7.11		

## FEE SCHEDULES FOR CARDIAC PROGRAM

Service Code	Service Description	Provider Type	Service Place	Service Type	Effective Date End Date	Fee	Limit	Description
82550	Creatine kinase (CK), (CPK); total	00	00	86	7/1/1999	\$7.19		
82652	Dihydroxyvitamin D, 1, 25-	00	00	86	1/1/1998	\$54.46		
83970	Parathormone (parathyroid hormone)	00	00	86	1/1/1998	\$42.50		
84075	Phosphatase, alkaline;	00	00	86	7/1/1999	\$7.14		
84100	Phosphorus inorganic (phosphate);	00	00	86	7/1/1999	\$6.55		
84132	Potassium; serum, plasma or whole blood	00	00	86	7/1/1999	\$6.34		
84295	Sodium; serum, plasma or whole blood	00	00	86	7/1/1999	\$6.60		
84436	Thyroxine; total	00	00	86	1/1/1998	\$9.50		
84479	Thyroid hormone (T3 or T4) uptake or thyroid hormone binding ratio (THBR)	00	00	86	1/1/1998	\$8.95		
85002	Bleeding time	00	00	86	1/1/1998	\$5.00		

## FEE SCHEDULES FOR CARDIAC PROGRAM

Service Code	Service Description	Provider Type	Service Place	Service Type	Effective Date End Date	Fee	Limit	Description
85013	Blood count; spun microhematocrit	00	00	86	1/1/1998	\$3.27		
85025	Blood count; complete (CBC), automated (Hgb, Hct, RBC, WBC and platelet count) and automated differential WBC count	00	00	86	1/1/1998	\$6.00		
85044	Blood count; reticulocyte, manual	00	00	86	1/1/1998	\$4.00		
85345	Coagulation time; Lee and White	00	00	00	4/1/1989	\$4.00		
85590	PLATELET;MANUAL COUNT	00	00	86	1/1/1998	\$3.00		
85610	Prothrombin time;	00	00	86	4/1/1989	\$4.00		
85651	Sedimentation rate, erythrocyte; non-automated	00	00	86	1/1/1998	\$3.00		
85730	Thromboplastin time, partial (PTT); plasma or whole blood	00	00	86	4/1/1989	\$7.50		
86038	Antinuclear antibodies (ANA);	00	00	86	1/1/1998	\$15.00		
86039	Antinuclear antibodies (ANA); titer	00	00	86	1/1/1998	\$15.00		

## FEE SCHEDULES FOR CARDIAC PROGRAM

Service Code	Service Description	Provider Type	Service Place	Service Type	Effective Date End Date	Fee	Limit	Description
86060	Antistreptolysin O; titer	00	00	86	4/1/1989	\$7.00		
86140	C-reactive protein;	00	00	86	1/1/1998	\$3.00		
86430	Rheumatoid factor; qualitative	00	00	86	1/1/1998	\$7.00		
86431	Rheumatoid factor; quantitative	00	00	86	1/1/1998	\$7.73		
86850	Antibody screen, RBC, each serum technique	00	00	86	1/1/1998	\$8.45		
86880	Antihuman globulin test (Coombs test); direct, each antiserum	00	00	86	1/1/1998	\$7.43		
86885	Antihuman globulin test (Coombs test); indirect, qualitative, each reagent red cell	00	00	86	1/1/1998	\$7.90		
86900	Blood typing; ABO	00	00	86	1/1/1998	\$4.12		
86901	Blood typing; Rh (D)	00	00	86	1/1/1998	\$6.05		
92982	Percutaneous transluminal coronary balloon angioplasty; single vessel	00	00	25	1/1/1998	\$820.00		

## FEE SCHEDULES FOR CARDIAC PROGRAM

Service Code	Service Description	Provider Type	Service Place	Service Type	Effective Date End Date	Fee	Limit	Description
92992	Atrial septectomy or septostomy; transvenous method, balloon (eg, Rashkind type) (includes cardiac catheterization)	00	00	25	1/1/1998	\$1,000.00		
93000	Electrocardiogram, routine ECG with at least 12 leads; with interpretation and report	00	00	80	4/1/1989	\$21.50		
93005	Electrocardiogram, routine ECG with at least 12 leads; tracing only, without interpretation and report	00	00	AZ	4/1/1989	\$11.50		
93010	Electrocardiogram, routine ECG with at least 12 leads; interpretation and report only	00	00	AY	4/1/1989	\$7.50		
93014	Telephonic transmission of post-symptom electrocardiogram rhythm strip(s), 24-hour attended monitoring, per 30 day period of time; physician review with interpretation and report only	00	00	AY	1/1/1998	\$31.00		
93015	Cardiovascular stress test using maximal or submaximal treadmill or bicycle exercise, continuous electrocardiographic monitoring, and/or pharmacological stress; with physician supervision, with interpretation and report	00	00	80	1/1/1998	\$189.00		
93017	Cardiovascular stress test using maximal or submaximal treadmill or bicycle exercise, continuous electrocardiographic monitoring, and/or pharmacological stress; tracing only, without interpretation and report	00	00	AZ	1/1/1998	\$46.50		
93018	Cardiovascular stress test using maximal or submaximal treadmill or bicycle exercise, continuous electrocardiographic monitoring, and/or pharmacological stress; interpretation and report only	00	00	AY	1/1/1998	\$45.00		
93040	Rhythm ECG, 1-3 leads; with interpretation and report	00	00	80	4/1/1989	\$19.00		

## FEE SCHEDULES FOR CARDIAC PROGRAM

Service Code	Service Description	Provider Type	Service Place	Service Type	Effective Date End Date	Fee	Limit Description
93041	Rhythm ECG, 1-3 leads; tracing only without interpretation and report	00	00	AZ	1/1/1998	\$11.50	
93042	Rhythm ECG, 1-3 leads; interpretation and report only	00	00	AY	4/1/1989	\$7.50	
93224	Wearable electrocardiographic rhythm derived monitoring for 24 hours by continuous original waveform recording and storage, with visual superimposition scanning; includes recording, scanning analysis with report, physician review and interpretation	00	00	80	1/1/1998	\$173.00	
93225	Wearable electrocardiographic rhythm derived monitoring for 24 hours by continuous original waveform recording and storage, with visual superimposition scanning; recording (includes connection, recording, and disconnection)	00	00	AZ	1/1/1998	\$18.25	
93226	Wearable electrocardiographic rhythm derived monitoring for 24 hours by continuous original waveform recording and storage, with visual superimposition scanning; scanning analysis with report	00	00	AY	1/1/1998	\$55.00	
93226	Wearable electrocardiographic rhythm derived monitoring for 24 hours by continuous original waveform recording and storage, with visual superimposition scanning; scanning analysis with report	00	00	AZ	1/1/1998	\$55.00	
93227	Wearable electrocardiographic rhythm derived monitoring for 24 hours by continuous original waveform recording and storage, with visual superimposition scanning; physician review and interpretation	00	00	AY	1/1/1998	\$36.00	
93320	Doppler echocardiography, pulsed wave and/or continuous wave with spectral display (List separately in addition to codes for echocardiographic imaging); complete	00	00	80	1/1/1998	\$76.50	

## FEE SCHEDULES FOR CARDIAC PROGRAM

Service Code	Service Description	Provider Type	Service Place	Service Type	Effective Date End Date	Fee	Limit	Description
93320	Doppler echocardiography, pulsed wave and/or continuous wave with spectral display (List separately in addition to codes for echocardiographic imaging); complete	00	00	AY	1/1/1998	\$30.00		
93320	Doppler echocardiography, pulsed wave and/or continuous wave with spectral display (List separately in addition to codes for echocardiographic imaging); complete	00	00	AZ	1/1/1998	\$46.50		
93501	Right heart catheterization	00	00	25	1/1/1998	\$140.00		
93510	Left heart catheterization, retrograde, from the brachial artery, axillary artery or femoral artery; percutaneous	00	00	25	4/1/1989	\$187.50		
93524	Combined transeptal and retrograde left heart catheterization	00	00	25	1/1/1998	\$187.50		
93526	Combined right heart catheterization and retrograde left heart catheterization	00	00	25	1/1/1998	\$187.50		
93545	Injection procedure during cardiac catheterization; for selective coronary angiography (injection of radiopaque material may be by hand)	00	00	25	3/1/1999	\$98.00		
93736	Electronic analysis of single chamber internal pacemaker system (may include rate, pulse amplitude and duration, configuration of wave form, and/or testing of sensory function of pacemaker), telephonic analysis	00	00	80	1/1/1998	\$31.00		
93736	Electronic analysis of single chamber internal pacemaker system (may include rate, pulse amplitude and duration, configuration of wave form, and/or testing of sensory function of pacemaker), telephonic analysis	00	00	AY	1/1/1998	\$12.40		

## FEE SCHEDULES FOR CARDIAC PROGRAM

Service Code	Service Description	Provider Type	Service Place	Service Type	Effective Date End Date	Fee	Limit Description
93736	Electronic analysis of single chamber internal pacemaker system (may include rate, pulse amplitude and duration, configuration of wave form, and/or testing of sensory function of pacemaker), telephonic analysis	00	00	AZ	1/1/1998	\$18.60	
93799	Unlisted cardiovascular service or procedure	00	00	00	3/1/1999	\$37.50	
99204	Office or other outpatient visit for the evaluation and management of a new patient, which requires these 3 key components: A comprehensive history; A comprehensive examination; Medical decision making of moderate complexity. Counseling and/or coordinatio	00	00	60	1/1/1998	\$20.00	
99215	Office or other outpatient visit for the evaluation and management of an established patient, which requires at least 2 of these 3 key components: A comprehensive history; A comprehensive examination; Medical decision making of high complexity. Counseling	00	00	60	1/1/1998	\$20.00	
99223	Initial hospital care, per day, for the evaluation and management of a patient, which requires these 3 key components: A comprehensive history; A comprehensive examination; and Medical decision making of high complexity. Counseling and/or coordination of	00	00	60	1/1/1998	\$42.00	
99231	Subsequent hospital care, per day, for the evaluation and management of a patient, which requires at least 2 of these 3 key components: A problem focused interval history; A problem focused examination; Medical decision making that is straightforward or o	00	00	60	1/1/1998	\$17.00	
99243	Office consultation for a new or established patient, which requires these 3 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	00	00	90	1/1/1998	\$30.00	

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## FEE SCHEDULES FOR CARDIAC PROGRAM

Service Code	Service Description	Provider Type	Service Place	Service Type	Effective Date End Date	Fee	Limit Description
99245	Office consultation for a new or established patient, which requires these 3 key components: A comprehensive history; A comprehensive examination; and Medical decision making of high complexity. Counseling and/or coordination of care with other providers	00	00	90	1/1/1998	\$49.00	
99272	CONFIRM CONSULT FOR NEW OR ESTAB PT. PROBLEM OF LOW SEVERITY	00	00	90	1/1/1998	\$30.00	
99274	CONFIRMATORY CONSULT FOR PT. PROBLEM OF MODERATE TO HIGH SEVERITY	00	00	90	1/1/1998	\$49.00	
ADJ	ADJUSTMENT FOR PRIOR CLAIM (FOR DEPT OF HEALTH USE ONLY)	00	00	00	4/1/1989	\$1,000.00	
DRG	INPATIENT HOSPITAL COSTS (FOR DEPT OF HEALTH USE ONLY)	00	00	00	10/1/1997	50,000.00	