

**GOVERNMENT OF THE DISTRICT OF COLUMBIA**  
**Department of Health Care Finance**



Office of the Senior Deputy Director/Medicaid Director

**Transmittal # 18-34**

**TO:** All District of Columbia Medicaid Providers

**FROM:** Melisa Byrd *mb*  
Senior Deputy Director and State Medicaid Director

**DATE:** December 28, 2018

**SUBJECT: 2019 Special Pricing CPT-HCPCS Codes Updates**

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Each year the Center for Medicare and Medicaid Services (CMS) releases modifications of the Healthcare Common Procedure Coding System (HCPCS) code set. Level I of the HCPCS are CPT (Current Procedural Terminology) codes, maintained by the American Medical Association (AMA), that are used primarily to identify medical services and procedures furnished by physicians and other health care professionals. Level II of the HCPCS is a standardized coding system that is used primarily to identify products, supplies, and services not included in the CPT codes, such as ambulance services and durable medical equipment.

For additional information about HCPCS code set, please visit the CMS website at <http://www.cms.hhs.gov/MedHCPCSGenInfo/>

The Department of Health Care Finance (DHCF) will adopt new CPT-HCPCS codes for dates of service beginning January 1, 2019. Discontinued codes will not be accepted after December 31, 2018.

DHCF has special pricing arrangements with certain providers or groups of providers which are needed in order to implement various policy priorities and programs. For January 1, 2019, seventeen HCPCS codes used in these special pricing arrangements will be discontinued from the national code set. Claims billed with these discontinued codes will be denied effective January 1, 2019. The listing of discontinued special pricing CPT-HCPCS codes with their corresponding replacement base codes is attached to this transmittal. In some cases, multiple codes replace a single discontinued code; in other instances, one code replaces multiple discontinued codes. Please review HCPCS code descriptions carefully and bill accordingly.

The per-unit rates in the special pricing arrangements have not changed. Providers should also continue to use the same modifiers that were used with the discontinued codes. This transmittal with the list of special pricing CPT-HCPCS changes for 2019 will also be available at the DC Medicaid website <https://www.dc-medicaid.com> by January 2, 2019.

The 2019 full fee schedule will be available beginning January 19<sup>th</sup>, 2019 on the DC Medicaid web portal. For questions, please call the Conduit Provider Inquiry Unit at (202) 906-8319 (inside DC metro area) or (866) 752-9233 (outside DC metro area).

Discon'd Codes	Discontinued Code Desc	Replacement Code 1	Replacement Code 2	Replacement Code 3
20005	Incision and drainage of soft tissue abscess	<b>10060</b> Drainage of abscess		
41500	Wiring of tongue to jaw bone	<b>41512</b> Suture of tongue		
96101	Psychological testing (includes psychodiagnostic assessment of emotionality, intellectual abilities, personality and psychopathology, eg, MMPI, Rorschach, WAIS), per hour of the psychologist's or physician's time, both face-to-face time administering tests to the patient and time interpreting these test results and preparing the report	<b>96130</b> Psychological testing evaluation by qualified health care professional, first 60 minutes	<b>96131</b> Psychological testing evaluation by qualified health care professional, additional 60 minutes	
96111	Developmental testing	<b>96112</b> Developmental test administration by qualified health care professional with interpretation and report, first 60 minutes	<b>96113</b> Developmental test administration by qualified health care professional with interpretation and report, additional 30 minutes	
96118	Neuropsychological testing, interpretation, and report by psychologist or physician per hour	<b>96132</b> Neuropsychological testing evaluation by qualified health care professional, first 60 minutes	<b>96133</b> Neuropsychological testing evaluation by qualified health care professional, additional 60 minutes	
0364T	Behavior treatment by protocol administered by technician first 30 minutes	<b>97153</b> Adaptive behavior treatment by protocol, administered by technician under direction of qualified health care professional to one patient, each 15 minutes		
0365T	Behavior treatment by protocol administered by technician each additional 30 minutes			
0366T	Group behavior treatment by protocol administered by technician first 30 minutes			
0367T	Group behavior treatment by protocol administered by technician each additional 30 minutes	<b>97154</b> Adaptive behavior treatment by protocol, administered by technician under direction of qualified health care professional to multiple patients, each 15 minutes		
0368T	Behavior treatment with protocol modification administered by physician or other qualified health care professional first 30 minutes	<b>97155</b> Adaptive behavior treatment with protocol modification administered by qualified health care professional to one patient, each 15 minutes		
0369T	Behavior treatment with protocol modification administered by physician or other qualified health care professional each additional 30 minutes			
D1515	Space maintainer-fixed bilateral	<b>D1516</b> Space maintainer - fixed - bilateral, maxillary	<b>D1517</b> Space maintainer - fixed - bilateral, mandibular	
D9940	Occlusal guards, by report	<b>D9944</b> Occlusal guard - hard appliance, full arch	<b>D9945</b> Occlusal guard - soft appliance, full arch	<b>D9946</b> Occlusal guard - hard appliance, partial arch
V5170	Hearing aid, CROS, in the ear	<b>V5171</b> Hearing aid, contralateral routing device, monaural, in the ear (ITE)	<b>V5172</b> Hearing aid, contralateral routing device, monaural, in the canal (ITC)	
V5180	Hearing aid, CROS, behind the ear	<b>V5181</b> Hearing aid, contralateral routing device, monaural, behind the ear (BTE)		
V5210	Hearing aid, BICROS, in the ear	<b>V5211</b> Hearing aid, contralateral routing system, binaural, ITE/ITE	<b>V5212</b> Hearing aid, contralateral routing system, binaural, ITE/ITC	

Discon'd Codes	Discontinued Code Desc	Replacement Code 1	Replacement Code 2	Replacement Code 3
V5220	Hearing aid, BICROS, behind the ear	<b>V5213</b> Hearing aid, contralateral routing system, binaural, ITE/BTE	<b>V5215</b> Hearing aid, contralateral routing system, binaural, ITC/BTE	<b>V5221</b> Hearing aid, contralateral routing system, binaural, BTE/BTE
<b>Notes</b> 1. The per-unit pricing for the special pricing arrangements are not changing with this update; however in some instances, the units of service on the discontinued codes are different than those of the replacement codes so prices have been converted accordingly. 2. The maximum per day unit of service limitations on these codes are not changing with this update; however in some instances, the units of service on the discontinued codes are different than those of the replacement codes so maximum unit values have been converted accordingly.				