

CY 2024 October Rates Compared to Final 2025 Rates											
Medicare Hospital Outpatient Prospective Payment System HOPPS (APC) Medicine Procedures, Radiopharmaceuticals, and Drugs											
October 2024 Rates					Final 2025 Rates						
Updated 11/11/2024					File updated by CMS 11/7/2024						
Status Indicator	Item/Code/Service				OPPS Payment Status						
A	Services furnished to a hospital outpatient that are paid under a fee schedule or payment system other than OPPS,* for example:				Not paid under OPPS. Paid by MACS under a fee schedule or payment system other than OPPS.						
	<ul style="list-style-type: none"> Separately Payable Clinical Diagnostic Laboratory Services (Not subject to deductible or coinsurance.) Unclassified drugs and biologicals reportable under HCPCS code C9399 				Services are subject to deductible or coinsurance unless indicated otherwise.						
D	Discontinued Codes				Not paid under OPPS or any other Medicare payment system.						
E1	Items and Services:				Not paid by Medicare when submitted on outpatient claims (any outpatient bill type).						
	<ul style="list-style-type: none"> Not covered by any Medicare outpatient benefit Statutorily excluded by Medicare Not reasonable and necessary 										
	Items and Services:										
E2	<ul style="list-style-type: none"> for which pricing information and claims data are not available 				Not paid by Medicare when submitted on outpatient claims (any outpatient bill type).						
G	Pass-Through Drug/ Biologicals				Paid under OPPS; separate APC payment						
K	NonPass-Through Drugs and nonimplantable Biologicals, including Therapeutic Radiopharmaceuticals				Paid under OPPS; separate APC payment						
N	Items and Services packaged into APC rate				Paid under OPPS; payment is packaged into payment for other services. Therefore, there is no separate APC payment.						
Q1	STV-Packaged Codes				Paid under OPPS; Addendum B displays APC assignments when services are separately payable.						
					(1) Packaged APC payment if billed on the same claim as a HCPCS code assigned status indicator "S," "T," or "V."						
					(2) Composite APC payment if billed with specific combinations of services based on OPPS composite-specific payment criteria. Payment is packaged into a single payment for specific combinations of services.						
S	Procedure or Service, Not Discounted When Multiple				(3) In other circumstances, payment is made through a separate APC payment.						
T	Significant Procedure, Multiple Procedure Reduction Applies				Paid under OPPS; separate APC payment						
U	Brachytherapy Sources				Paid under OPPS; separate APC payment						
CPT/				Trade	Oct 2024	Final 2025	Oct 2024	Final 2025	Oct 2024	Final 2025	%
HCPCS	HCPCS	Description		Name	APC	APC	SI	SI	Payment Rate	Payment Rate	Change
38792	38792	Injection procedure; <u>radioactive tracer</u> for identification of sentinel node			5591	5591	Q1	Q1	\$392.97	\$401.83	2.3%
38900	38900	Intraoperative identification (eg, mapping) of sentinel lymph node(s) includes injection of non-radioactive dye, when performed (List separately in addition to code for primary procedure) (For injection of radioactive tracer for identification of sentinel node, use 38792) (Use in conjunction with 19302,19307,38500,38510,38520,38525,38530,38542,38740,38745)			N/A	N/A	N	N	Packaged into APC rate	Packaged into APC rate	Providers should code and bill so costs are realized for future rates
49427	49427	Injection procedure (eg, contrast media) for evaluation of previously placed peritoneal-venous shunt (For radiological supervision and interpretation, see 75809, 78291)			N/A	N/A	N	N	Packaged into APC rate	Packaged into APC rate	Providers should code and bill so costs are realized for future rates
51701	51701	Insertion of non-indwelling bladder catheter (eg, straight catheterization for residual urine)			5734	5734	Q1	Q1	\$121.71	\$128.90	5.9%
51702	51702	Insertion of temporary indwelling bladder catheter; simple (eg, Foley)			5734	5734	Q1	Q1	\$121.71	\$128.90	5.9%
51703	51703	Insertion of temporary indwelling bladder catheter; complicated (eg, altered anatomy, fractured catheter/balloon)			5721	5721	S	S	\$148.83	\$156.46	5.1%
77080	77080	Dual-energy X-ray absorptiometry, bone density study, 1 or more sites; axial skeleton (eg, hips, pelvis, spine)			5522	5522	S	S	\$104.75	\$106.34	1.5%
77081	77081	Dxa bone density (peripheral) (eg, radius, wrist, heel)			5521	5521	S	S	\$86.58	\$88.05	1.7%
77085	77085	Dual-energy X-ray absorptiometry (DXA), bone density study, 1 or more sites; axial skeleton (eg, hips, pelvis, spine), including vertebral fracture assessment			5522	5522	Q1	Q1	\$104.75	\$106.34	1.5%
77086	77086	Vertebral fractureassessment via dual-energy X-rayabsorptiometry (DXA)			5521	5521	Q1	Q1	\$86.58	\$88.05	1.7%
77261	77261	Therapeutic radiology treatment planning; simple			0		B	B	\$0.00	\$0.00	N/A
77262	77262	Therapeutic radiology treatment planning; intermediate			0		B	B	\$0.00	\$0.00	N/A
77263	77263	Therapeutic radiology treatment planning; complex			0		B	B	\$0.00	\$0.00	N/A
77295	77295	3-dimensional radiotherapy plan, including dose-volume histograms			5613	5613	S	S	\$1,320.21	\$1,368.26	3.6%
77300	77300	Basic radiation dosimetry calculation, central axis depth dose calculation, TDF, NSD, gap calculation, off axis factor, tissue inhomogeneity factors, calculation of non-ionizing radiation surface and depth dose, as required during course of treatment, only when prescribed by the treating physician			5611	5611	S	S	\$129.28	\$132.77	2.7%
77370	77370	Special medical radiation physics consultation			5611	5611	S	S	\$129.28	\$132.77	2.7%

CPT/		Trade	Oct 2024	Final 2025	Oct 2024	Final 2025	Oct 2024	Final 2025	%
HCP	HCP	Description	APC	APC	SI	SI	Payment Rate	Payment Rate	Change
NUCLEAR MEDICINE Modified in 2013 INTRODUCTORY SECTION - The services listed do not include the radiopharmaceutical or drug. To separately report supply of diagnostic and therapeutic radiopharmaceuticals and drugs, use the appropriate supply code(s), in addition to the procedure code.									
78012	78012	Thyroid uptake, single or multiple quantitative measurement(s) (including stimulation, suppression, or discharge, when performed)	5591	5591	S	S	\$392.97	\$401.83	2.3%
78013	78013	Thyroid imaging (including vascular flow, when performed)	5591	5591	S	S	\$392.97	\$401.83	2.3%
78014	78014	Thyroid imaging (including vascular flow, when performed); with single or multiple uptake(s) quantitative measurement(s) (including stimulation, suppression, or discharge, when performed)	5591	5591	S	S	\$392.97	\$401.83	2.3%
78015	78015	Thyroid carcinoma metastases imaging; limited are (eg, neck and chest only)	5591	5591	S	S	\$392.97	\$401.83	2.3%
78016	78016	Thyroid carcinoma metastases imaging; with additional studies (eg, urinary recovery)	5591	5591	S	S	\$392.97	\$401.83	2.3%
78018	78018	Thyroid carcinoma metastases imaging; whole body	5592	5592	S	S	\$514.99	\$538.27	4.5%
78020 + add on	78020 +	Thyroid carcinoma metastases uptake (Use in conjunction with code 78018 only)	N/A	N/A	N	N	Packaged into APC rate	Packaged into APC rate	Providers should code and bill so costs are realized for future rates
78070	78070	Parathyroid planar imaging (including subtraction, when performed)	5591	5591	S	S	\$392.97	\$401.83	2.3%
78071	78071	Parathyroid planar imaging (including subtraction, when performed); with tomographic (SPECT)	5591	5591	S	S	\$392.97	\$401.83	2.3%
78072	78072	Parathyroid planar imaging (including subtraction, when performed); with tomographic (SPECT), and concurrently acquired computed tomography (CT) for anatomical localization	5592	5592	S	S	\$514.99	\$538.27	4.5%
78075	78075	Adrenal imaging, cortex and/or medulla	5593	5593	S	S	\$1,352.93	\$1,305.48	-3.5%
78099	78099	Unlisted endocrine procedure, diagnostic nuclear medicine	5591	5591	S	S	\$392.97	\$401.83	2.3%
78102	78102	Bone marrow imaging; limited area	5591	5591	S	S	\$392.97	\$401.83	2.3%
78103	78103	Bone marrow imaging; multiple areas	5591	5591	S	S	\$392.97	\$401.83	2.3%
78104	78104	Bone marrow imaging; whole body	5591	5591	S	S	\$392.97	\$401.83	2.3%
78110	78110	Plasma volume, radiopharmaceutical volume-dilution technique (separate procedure); single sampling	5593	5593	S	S	\$1,352.93	\$1,305.48	-3.5%
78111	78111	Plasma volume, radiopharmaceutical volume-dilution technique (separate procedure); multiple sampling	5593	5593	S	S	\$1,352.93	\$1,305.48	-3.5%
78120	78120	Red cell volume determination (separate procedure); single sampling	5591	5591	S	S	\$392.97	\$401.83	2.3%
78121	78121	Red cell volume determination (separate procedure); multiple sampling	5592	5592	S	S	\$514.99	\$538.27	4.5%
78122	78122	Whole blood volume determination, including separate measurement of plasma volume and red cell volume (radiopharmaceutical volume-dilution technique)	5592	5592	S	S	\$514.99	\$538.27	4.5%
78130	78130	Red cell survival study;	5591	5591	S	S	\$392.97	\$401.83	2.3%
78140	78140	Labeled red cell sequestration, differential organ/tissue, (eg, splenic and/or hepatic)	5591	5591	S	S	\$392.97	\$401.83	2.3%
78185	78185	Spleen imaging only, with or without vascular flow (If combined with liver study, use procedures 78215 and 78216)	5591	5591	S	S	\$392.97	\$401.83	2.3%
78191	78191	Platelet survival study	5591	5591	S	S	\$392.97	\$401.83	2.3%
78195	78195	Lymphatics and lymph nodes imaging (For sentinel node identification without scintigraphy imaging, use 38792)	5592	5592	S	S	\$514.99	\$538.27	4.5%
78199	78199	Unlisted hematopoietic, Reticuloendothelial and lymphatic procedure, diagnostic nuclear medicine	5591	5591	S	S	\$392.97	\$401.83	2.3%
78201	78201	Liver imaging; static only	5592	5592	S	S	\$514.99	\$538.27	4.5%
78202	78202	Liver imaging; with vascular flow	5592	5592	S	S	\$514.99	\$538.27	4.5%
78215	78215	Liver and spleen imaging; static only	5591	5591	S	S	\$392.97	\$401.83	2.3%
78216	78216	Liver and spleen imaging; with vascular flow	5591	5591	S	S	\$392.97	\$401.83	2.3%
78226	78226	Hepatobiliary system imaging, including gallbladder when present	5591	5591	S	S	\$392.97	\$401.83	2.3%
78227	78227	Hepatobiliary system imaging, including gallbladder when present; with pharmacologic intervention, including quantitative measurement(s) when performed	5592	5592	S	S	\$514.99	\$538.27	4.5%
78230	78230	Salivary gland imaging;	5591	5591	S	S	\$392.97	\$401.83	2.3%
78231	78231	Salivary gland imaging; with serial images	5591	5591	S	S	\$392.97	\$401.83	2.3%
78232	78232	Salivary gland function study	5591	5591	S	S	\$392.97	\$401.83	2.3%
78258	78258	Esophageal motility	5591	5591	S	S	\$392.97	\$401.83	2.3%
78261	78261	Gastric mucosa imaging	5591	5591	S	S	\$392.97	\$401.83	2.3%
78262	78262	Gastroesophageal reflux study	5591	5591	S	S	\$392.97	\$401.83	2.3%
78264	78264	Gastric Emptying Imaging Study (eg, solid, liquid or both)	5591	5591	S	S	\$392.97	\$401.83	2.3%
78265	78265	Gastric Emptying Imaging Study (eg, solid, liquid or both); with small bowel transit	5591	5591	S	S	\$392.97	\$401.83	2.3%
78266	78266	Gastric Emptying Imaging Study (eg, solid, liquid or both); with small bowel and colon transit, multiple days	5592	5592	S	S	\$514.99	\$538.27	4.5%
78267	78267	Urea breath test, C-14 (isotopic); acquisition for analysis	N/A	N/A	A	A	\$0.00	\$0.00	N/A
78268	78268	Urea breath test, C-14 (isotopic); analysis	N/A	N/A	A	A	\$0.00	\$0.00	N/A

CPT/			Trade	Oct 2024	Final 2025	Oct 2024	Final 2025	Oct 2024	Final 2025	%
HCPCS	HCPCS	Description	Name	APC	APC	SI	SI	Payment Rate	Payment Rate	Change
78278	78278	Acute gastrointestinal blood loss imaging		5591	5591	S	S	\$392.97	\$401.83	2.3%
78282	78282	Gastrointestinal protein loss		5591	5591	S	S	\$392.97	\$401.83	2.3%
78290	78290	Intestine imaging (eg, ectopic gastric mucosa, Meckel's localization, volvulus)		5591	5591	S	S	\$392.97	\$401.83	2.3%
78291	78291	Peritoneal-venous shunt patency test (eg, for LeVein, Denver shunt)		5591	5591	S	S	\$392.97	\$401.83	2.3%
78299	78299	Unlisted gastrointestinal procedure, diagnostic nuclear medicine		5591	5591	S	S	\$392.97	\$401.83	2.3%
78300	78300	Bone and/or joint imaging; limited area		5591	5591	S	S	\$392.97	\$401.83	2.3%
78305	78305	Bone and/or joint imaging; multiple areas		5591	5591	S	S	\$392.97	\$401.83	2.3%
78306	78306	Bone and/or joint imaging; whole body		5591	5591	S	S	\$392.97	\$401.83	2.3%
78315	78315	Bone and/or joint imaging; 3 three phase study		5591	5591	S	S	\$392.97	\$401.83	2.3%
78350	78350	Bone density (bone mineral content) study , 1 or more sites; single photon absorptiometry		N/A	N/A	E1	E1	\$0.00	\$0.00	N/A
78351	78351	Bone density (bone mineral content) study , 1 or more sites; dual photon absorptiometry one or more sites		N/A	N/A	E1	E1	\$0.00	\$0.00	N/A
78399	78399	Unlisted musculoskeletal procedure, diagnostic nuclear medicine		5591	5591	S	S	\$392.97	\$401.83	2.3%
78414	78414	Determination of central c-v hemodynamics (non-imagine) (eg, ejection fraction with probe technique) with or without pharmacologic intervention or exercise, single or multiple determinations		5592	5592	S	S	\$514.99	\$538.27	4.5%
78428	78428	Cardiac shunt detection		5591	5591	S	S	\$392.97	\$401.83	2.3%
78429	78429	Myocrd img pet 1 std w/ct Myocardial imaging, positron emission tomography (PET), metabolic evaluation study (including ventricular wall motion(s), and/or ejection fraction(s), when performed) single study; with concurrently acquired computed tomography transmission scan		5594	5594	S	S	\$1,490.60	\$1,458.59	-2.1%
78430	78430	Myocardial imaging, positron emission tomography, perfusion study (including ventricular wall motion(s), and/or ejection fractions(s), when performed); single study, at rest or stress (exercise or pharmacologic), with concurrently acquired computed tomography transmission scan		5594	5594	S	S	\$1,490.60	\$1,458.59	-2.1%
78431	78431	Myocardial imaging, positron emission tomography, perfusion study (including ventricular wall motion(s), and/or ejection fractions(s), when performed); multiple studies at rest and stress (exercise or pharmacologic), with concurrently acquired computed tomography transmission scan		1522	1522	S	S	\$2,250.50	\$2,250.50	0.0%
78432	78432	Myocrd img pet 2rtracer Myocardial imaging, positron emission tomography, combined perfusion with metabolic evaluation study (including ventricular wall motion(s), and/or ejection fraction(s), when performed), dual radiotracer (eg, myocardial viability)		1520	1520	S	S	\$1,850.50	\$1,850.50	0.0%
78433	78433	Myocrd img pet 2rtracer ct Myocardial imaging, positron emission tomography, combined perfusion with metabolic evaluation study (including ventricular wall motion(s), and/or ejection fraction(s), when performed), dual radiotracer (eg, myocardial viability); with concurrently acquired computed tomography transmission scan		1521	1521	S	S	\$1,950.50	\$1,950.50	0.0%
78434 + add on	78434 +	Absolute quantitation of myocardial blood flow (AQMBF), positron emission tomography (PET), rest and pharmacologic stress (List separately in addition to code for primary procedure) (Use 78434 in conjunction with 78431, 78492) (for CT coronary calcium scoring, use 75571)		N/A	N/A	N	N	Packaged into APC rate is part of new technology payment	Packaged into APC rate is part of new technology payment	Providers should code and bill so costs are realized for future rates
78445	78445	Non-cardiac vascular flow imaging (ie, angiography, venography)		5591	5591	S	S	\$392.97	\$401.83	2.3%
78451	78451	Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); single study, at rest or stress (exercise or pharmacologic)		5593	5593	S	S	\$1,352.93	\$1,305.48	-3.5%
78452	78452	Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or stress (exercise or pharmacologic) and/or redistribution and/or rest reinjection		5593	5593	S	S	\$1,352.93	\$1,305.48	-3.5%
●+0742T	●+0742T	Absolute quantitation of myocardial blood flow (AQMBF), single-photon emission computed tomography (SPECT), with exercise or pharmacologic stress, and at rest, when performed (List separately in addition to code for primary procedure).		N/A	N/A	N	N	N/A	Packaged into APC rate is part of primary service payment	Providers should code and bill so costs are realized for future rates
78453	78453	Myocardial perfusion imaging, planar (including qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); single study, at rest or stress (exercise or pharmacologic)		5593	5593	S	S	\$1,352.93	\$1,305.48	-3.5%
78454	78454	Myocardial perfusion imaging, planar (including qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or stress (exercise or pharmacologic) and/or redistribution and/or rest reinjection		5593	5593	S	S	\$1,352.93	\$1,305.48	-3.5%
78456	78456	Acute venous thrombus imaging, peptide		5593	5593	S	S	\$1,352.93	\$1,305.48	-3.5%
78457	78457	Venous thrombosis imaging, venogram; unilateral		5592	5592	S	S	\$514.99	\$538.27	4.5%

CPT/			Trade	Oct 2024	Final 2025	Oct 2024	Final 2025	Oct 2024	Final 2025	%
HCPCS	HCPCS	Description	Name	APC	APC	SI	SI	Payment Rate	Payment Rate	Change
78458	78458	Venous thrombosis imaging, venogram; bilateral		5591	5591	S	S	\$392.97	\$401.83	2.3%
78459	78459	Myocardial imaging, positron emission tomography (PET), metabolic evaluation study (including ventricular wall motion(s), and/or ejection fraction(s), when performed) single study		5593	5593	S	S	\$1,352.93	\$1,305.48	-3.5%
78466	78466	Myocardial imaging, infarct avid, planar; qualitative or quantitative		5591	5591	S	S	\$392.97	\$401.83	2.3%
78468	78468	Myocardial imaging, infarct avid, planar; with ejection fraction by first pass technique		5592	5592	S	S	\$514.99	\$538.27	4.5%
78469	78469	Myocardial imaging, infarct avid, planar; tomographic SPECT with or without quantification		5592	5592	S	S	\$514.99	\$538.27	4.5%
78472	78472	Cardiac blood pool imaging, gated equilibrium; planar, single study at rest or stress (exercise and/or pharmacologic), wall motion study plus ejection fraction, with or without additional quantitative processing (or assessment of cardiac function by first pass technique, use 78496)		5591	5591	S	S	\$392.97	\$401.83	2.3%
78473	78473	Cardiac blood pool imaging, gated equilibrium; multiple studies, wall motion study plus ejection fraction, at rest and stress (exercise and/or pharmacologic), with or without additional quantification		5591	5591	S	S	\$392.97	\$401.83	2.3%
78481	78481	Cardiac blood pool imaging (planar), first pass technique; single study, at rest or with stress (exercise and/or pharmacologic), wall motion study plus ejection fraction, with or without quantification		5592	5592	S	S	\$514.99	\$538.27	4.5%
78483	78483	Cardiac blood pool imaging (planar), first pass technique; multiple studies, at rest and with stress (exercise and/or pharmacologic), wall motion study plus ejection fraction, with or without quantification		5592	5592	S	S	\$514.99	\$538.27	4.5%
78491	78491	Myocardial imaging, positron emission tomography, perfusion study (including ventricular wall motion(s), and/or ejection fractions(s), when performed); single study, at rest or stress (exercise or pharmacologic)		5594	5594	S	S	\$1,490.60	\$1,458.59	-2.1%
#78430	78430	Myocardial imaging, positron emission tomography, perfusion study (including ventricular wall motion(s), and/or ejection fractions(s), when performed); single study, at rest or stress (exercise or pharmacologic), with concurrently acquired computed tomography transmission scan		5594	5594	S	S	\$1,490.60	\$1,458.59	-2.1%
78492	78492	Myocardial imaging, positron emission tomography, perfusion study (including ventricular wall motion(s), and/or ejection fractions(s), when performed); multiple studies at rest and stress (exercise or pharmacologic)		5594	5594	S	S	\$1,490.60	\$1,458.59	-2.1%
#78431	78431	Myocardial imaging, positron emission tomography, perfusion study (including ventricular wall motion(s), and/or ejection fractions(s), when performed); multiple studies at rest and stress (exercise or pharmacologic), with concurrently acquired computed tomography transmission scan		1522	1522	S	S	\$2,250.50	\$2,250.50	0.0%
#78432	78432	Myocardial imaging, positron emission tomography, combined perfusion with metabolic evaluation study (including ventricular wall motion(s), and/or ejection fraction(s), when performed), dual radiotracer (eg, myocardial viability)		1520	1520	S	S	\$1,850.50	\$1,850.50	0.0%
#78433	78433	Myocardial imaging, positron emission tomography, combined perfusion with metabolic evaluation study (including ventricular wall motion(s), and/or ejection fraction(s), when performed), dual radiotracer (eg, myocardial viability); with concurrently acquired computed tomography transmission scan		1521	1521	S	S	\$1,950.50	\$1,950.50	0.0%
#78434 + add on	78434 +	Absolute quantitation of myocardial blood flow (AQMBF), positron emission tomography (PET), rest and pharmacologic stress (List separately in addition to code for primary procedure) (Use 78434 in conjunction with 78431, 78492) (for CT coronary calcium scoring, use 75571)		N/A	N/A	N	N	Packaged into APC rate is part of new technology payment	Packaged into APC rate is part of new technology payment	Providers should code and bill so costs are realized for future rates
78494	78494	Cardiac blood pool imaging, gated equilibrium, SPECT, at rest, wall motion study plus ejection fraction, with or without quantitative processing		5591	5591	S	S	\$392.97	\$401.83	2.3%
78496 + add on	78496 +	Cardiac blood pool imaging, gated equilibrium, single study, at rest, with right ventricular ejection fraction by first pass technique (Use 78496 in conjunction with 78472)		N/A	N/A	N	N	Packaged into APC rate	Packaged into APC rate	Providers should code and bill so costs are realized for future rates
78499	78499	Unlisted cardiovascular procedure, diagnostic nuclear medicine		5591	5591	S	S	\$392.97	\$401.83	2.3%
0331T	0331T	Myocardial sympathetic innervation, imaging, planar qualitative assessment		5593	5593	S	S	\$1,352.93	\$1,305.48	-3.5%
0332T	0332T	Myocardial sympathetic innervation, imaging, planar qualitative and quantitative assessment; with tomographic SPECT		5593	5593	S	S	\$1,352.93	\$1,305.48	-3.5%
78579	78579	Pulmonary ventilation imaging (eg, aerosol or gas)		5591	5591	S	S	\$392.97	\$401.83	2.3%
78580	78580	Pulmonary perfusion imaging (eg, particulate)		5591	5591	S	S	\$392.97	\$401.83	2.3%
78582	78582	Pulmonary ventilation imaging (eg, aerosol or gas) and perfusion imaging		5592	5592	S	S	\$514.99	\$538.27	4.5%
78597	78597	Quantitative differential pulmonary perfusion, including imaging when performed		5591	5591	S	S	\$392.97	\$401.83	2.3%
78598	78598	Quantitative differential pulmonary perfusion and ventilation (eg aerosol or gas), including imaging when performed		5592	5592	S	S	\$514.99	\$538.27	4.5%
78599	78599	Unlisted respiratory procedure, diagnostic nuclear medicine		5591	5591	S	S	\$392.97	\$401.83	2.3%

CPT/		Trade	Oct 2024	Final 2025	Oct 2024	Final 2025	Oct 2024	Final 2025	%
HCP	HCP	Description	APC	APC	SI	SI	Payment Rate	Payment Rate	Change
78600	78600	Brain imaging, less than 4 static views;	5591	5591	S	S	\$392.97	\$401.83	2.3%
78601	78601	Brain imaging, less than 4 static views; with vascular flow	5591	5591	S	S	\$392.97	\$401.83	2.3%
78605	78605	Brain imaging, minimum 4 static views;	5592	5592	S	S	\$514.99	\$538.27	4.5%
78606	78606	Brain imaging, minimum 4 static views; with vascular flow	5592	5592	S	S	\$514.99	\$538.27	4.5%
78608	78608	Brain imaging, positron emission tomography (PET); metabolic evaluation	5594	5594	S	S	\$1,490.60	\$1,458.59	-2.1%
78609	78609	Brain imaging, positron emission tomography (PET); perfusion evaluation	N/A	N/A	E1	E1	\$0.00	\$0.00	N/A
78610	78610	Brain imaging, vascular flow only	5592	5592	S	S	\$514.99	\$538.27	4.5%
78630	78630	Cerebrospinal fluid flow, imaging (not including introduction of material); cisternography (For injection procedure, see 61000-61070, 62270-62319)	5592	5592	S	S	\$514.99	\$538.27	4.5%
78635	78635	Cerebrospinal fluid flow, imaging (not including introduction of material); ventriculography (For injection procedure, see 61000-61070, 62270-62294)	5592	5592	S	S	\$514.99	\$538.27	4.5%
78645	78645	Cerebrospinal fluid flow, imaging (not including introduction of material); shunt evaluation (For injection procedure, see 61000-61070, 62270-62294)	5592	5592	S	S	\$514.99	\$538.27	4.5%
78650	78650	Cerebrospinal fluid leakage detection and localization	5593	5593	S	S	\$1,352.93	\$1,305.48	-3.5%
78660	78660	Radiopharmaceutical dacryocystography	5591	5591	S	S	\$392.97	\$401.83	2.3%
78699	78699	Unlisted nervous system procedure, diagnostic nuclear medicine	5591	5591	S	S	\$392.97	\$401.83	2.3%
78700	78700	Kidney imaging morphology	5591	5591	S	S	\$392.97	\$401.83	2.3%
78701	78701	Kidney imaging morphology with vascular flow	5591	5591	S	S	\$392.97	\$401.83	2.3%
78707	78707	Kidney imaging morphology with vascular flow and function, single study without pharmacological intervention	5592	5592	S	S	\$514.99	\$538.27	4.5%
78708	78708	Kidney imaging morphology with vascular flow and function, single study, with pharmacological intervention (eg, angiotensin converting enzyme inhibitor and/or diuretic)	5592	5592	S	S	\$514.99	\$538.27	4.5%
78709	78709	Kidney imaging morphology with vascular flow and function, multiple studies, with and without pharmacological intervention (eg, angiotensin converting enzyme inhibitor and/or diuretic)	5592	5592	S	S	\$514.99	\$538.27	4.5%
78725	78725	Kidney function study, non-imaging radioisotopic study	5591	5591	S	S	\$392.97	\$401.83	2.3%
78730 + add on	78730 +	Urinary bladder residual study (List separately in addition to code for primary procedure) (Use 78730 in conjunction with 78740) (For measurement of postvoid residual urine and/or bladder capacity by ultrasound, nonimaging, use 51798) (For ultrasound imaging of the bladder only, with measurement of postvoid residual urine when performed, use 78857)	N/A	N/A	N	N	Packaged into APC rate	Packaged into APC rate	Providers should code and bill so costs are realized for future rates
78740	78740	Ureteral reflux study (radiopharmaceutical voiding cystogram) For catheterization see 51701, 51702, 51703	5591	5591	S	S	\$392.97	\$401.83	2.3%
78761	78761	Testicular imaging with vascular flow	5591	5591	S	S	\$392.97	\$401.83	2.3%
78799	78799	Unlisted genitourinary procedure; diagnostic nuclear medicine	5591	5591	S	S	\$392.97	\$401.83	2.3%
78800	78800	Radiopharmaceutical localization of tumor, inflammatory process or distribution of radiopharmaceutical agent(s) (includes vascular flow and blood pool imaging, when performed); planar, single area (eg, head, neck, chest, pelvis), single day imaging	5591	5591	S	S	\$392.97	\$401.83	2.3%
78801	78801	Radiopharmaceutical localization of tumor, inflammatory process or distribution of radiopharmaceutical agent(s) (includes vascular flow and blood pool imaging, when performed); planar, 2 or more areas (eg, abdomen and pelvis, head and chest), 1 or more days imaging or single area imaging over 2 or more days	5591	5591	S	S	\$392.97	\$401.83	2.3%
78802	78802	Radiopharmaceutical localization of tumor, inflammatory process or distribution of radiopharmaceutical agent(s), (includes vascular flow and blood pool imaging when performed); planar, whole body, single day of imaging	5593	5593	S	S	\$1,352.93	\$1,305.48	-3.5%
78803	78803	Radiopharmaceutical localization of tumor, inflammatory process or distribution of radiopharmaceutical agent(s), (includes vascular flow and blood pool imaging when performed); tomographic (SPECT) single area (eg, Head, neck, chest, pelvis) or acquisition , single day of imaging	5593	5593	S	S	\$1,352.93	\$1,305.48	-3.5%
78830	78830	Rp loclzj tum spect w/ct 1 Radiopharmaceutical localization of tumor, inflammatory process or distribution of radiopharmaceutical agent(s), (includes vascular flow and blood pool imaging when performed); tomographic (SPECT) with concurrently acquired computed tomography (CT) transmission scan for anatomical review, localization and determination/detection of pathology, single area (eg, head, neck, chest, pelvis) or acquisition , single day of imaging	5593	5593	S	S	\$1,352.93	\$1,305.48	-3.5%
#78804	78804	Radiopharmaceutical localization of tumor, inflammatory process or distribution of radiopharmaceutical agent(s), (includes vascular flow and blood pool imaging when performed); Planar, whole body, 2 or more days imaging	5593	5593	S	S	\$1,352.93	\$1,305.48	-3.5%

CPT/		Trade	Oct 2024	Final 2025	Oct 2024	Final 2025	Oct 2024	Final 2025	%
HCPCS	HCPCS	Description	APC	APC	SI	SI	Payment Rate	Payment Rate	Change
78831	78831	Rp loclzj tum spect 2 areas Radiopharmaceutical localization of tumor, inflammatory process or distribution of radiopharmaceutical agent(s), (includes vascular flow and blood pool imaging when performed); tomographic (SPECT), minimum 2 areas (eg, pelvis and knees, chest and abdomen), or separate acquisitions (eg, lung ventilation and perfusion), single day of imaging, or single area or acquisition, over 2 or more days	5593	5593	S	S	\$1,352.93	\$1,305.48	-3.5%
78832	78832	Rp loclzj tum spect w/ct 2 Radiopharmaceutical localization of tumor, inflammatory process or distribution of radiopharmaceutical agent(s), (includes vascular flow and blood pool imaging when performed); tomographic (SPECT) with concurrently acquired computed tomography (CT) transmission scan for anatomical review, localization and determination/detection of pathology, minimum 2 areas (eg, pelvis and knees, chest and abdomen), or separate acquisitions (eg, lung ventilation and perfusion), single day of imaging, or single area or acquisition, over 2 or more days	5594	5594	S	S	\$1,490.60	\$1,458.59	-2.1%
78808	78808	Injection procedure for radiopharmaceutical localization by non-imaging probe study, intravenous (eg, parathyroid adenoma) (For sentinel lymph node identification, use 38792)	5591	5591	Q1	Q1	\$392.97	\$401.83	2.3%
78811	78811	Positron emission tomography (PET) imaging; limited area (eg, chest, head/neck)	5593	5593	S	S	\$1,352.93	\$1,305.48	-3.5%
78812	78812	Positron emission tomography (PET) imaging; skull base to mid-thigh	5594	5594	S	S	\$1,490.60	\$1,458.59	-2.1%
78813	78813	Positron emission tomography (PET) imaging; whole body	5594	5594	S	S	\$1,490.60	\$1,458.59	-2.1%
78814	78814	Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; limited area (eg, chest, head/neck)	5594	5594	S	S	\$1,490.60	\$1,458.59	-2.1%
78815	78815	Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; skull base to mid-thigh	5594	5594	S	S	\$1,490.60	\$1,458.59	-2.1%
78816	78816	Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	5594	5594	S	S	\$1,490.60	\$1,458.59	-2.1%
78831	78831	Rp loclzj tum spect 2 areas Radiopharmaceutical localization of tumor, inflammatory process or distribution of radiopharmaceutical agent(s), (includes vascular flow and blood pool imaging when performed); tomographic (SPECT), minimum 2 areas (eg, pelvis and knees, chest and abdomen), or separate acquisitions (eg, lung ventilation and perfusion), single day of imaging, or single area or acquisition, over 2 or more days	5593	5593	S	S	\$1,352.93	\$1,305.48	-3.5%
78832	78832	Rp loclzj tum spect w/ct 2 Radiopharmaceutical localization of tumor, inflammatory process or distribution of radiopharmaceutical agent(s), (includes vascular flow and blood pool imaging when performed); tomographic (SPECT) with concurrently acquired computed tomography (CT) transmission scan for anatomical review, localization and determination/detection of pathology, minimum 2 areas (eg, pelvis and knees, chest and abdomen), or separate acquisitions (eg, lung ventilation and perfusion), single day of imaging, or single area or acquisition, over 2 or more days	5594	5594	S	S	\$1,490.60	\$1,458.59	-2.1%
78835 + add on	78835 +	Rp quan meas single area NEW FOR 2020 Radiopharmaceutical quantification measurement(s) single area (Use 78835 in conjunction with 78830, 78832) (Report multiple units of 78835 if quantitation is more than 1 day or more than 1 area)	N/A	N/A	N	N	Packaged into APC rate	Packaged into APC rate	Providers should code and bill so costs are realized for future rates
78999	78999	Unlisted miscellaneous procedure, diagnostic nuclear medicine	5591	5591	S	S	\$392.97	\$401.83	2.3%
C9898	C9898	Radiolabeled product provided during a hospital inpatient stay	N/A	N/A	N	N	Packaged into APC rate	Packaged into APC rate	Providers should code and bill so costs are realized for future rates
79005	79005	Radiopharmaceutical therapy, by oral administration (For monoclonal antibody by intravenous infusion, use 79403)	5661	5661	S	S	\$237.04	\$224.13	-5.4%
79101	79101	Radiopharmaceutical therapy, by intravenous administration (Do not report 79101 in conjunction with 36400, 35410, 79403, 90780, 96408) (For monoclonal antibody by intravenous infusion, use 79403) (For infusion or instillation of non-antibody radioelement solution that includes three months follow-up care, use 77750)	5661	5661	S	S	\$237.04	\$224.13	-5.4%
79200	79200	Radiopharmaceutical therapy, by intracavitary administration	5661	5661	S	S	\$237.04	\$224.13	-5.4%
79300	79300	Radiopharmaceutical therapy, by interstitial radioactive colloid administration	5661	5661	S	S	\$237.04	\$224.13	-5.4%
79403	79403	Radiopharmaceutical therapy, radiolabeled monoclonal antibody by intravenous infusion (For pre-treatment imaging, see 78802, 78804) (Do not use in conjunction with 79101)	5661	5661	S	S	\$237.04	\$224.13	-5.4%
79440	79440	Radiopharmaceutical therapy, by intra-articular administration	5661	5661	S	S	\$237.04	\$224.13	-5.4%
79445	79445	Radiopharmaceutical therapy, by intra-arterial particulate administration (Do not report 79445 in conjunction with 90783, 96420) (Use appropriate procedural and radiological supervision and interpretation codes for the angiographic and interventional procedures provided pre-requisite to intra-arterial radiopharmaceutical therapy)	5661	5661	S	S	\$237.04	\$224.13	-5.4%

CPT/			Trade	Oct 2024	Final 2025	Oct 2024	Final 2025	Oct 2024	Final 2025	%
HCPCS	HCPCS	Description	Name	APC	APC	SI	SI	Payment Rate	Payment Rate	Change
79999	79999	Radiopharmaceutical therapy, unlisted procedure		5661	5661	S	S	\$237.04	\$224.13	-5.4%
93017	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		5722	5722	Q1	Q1	\$299.06	\$311.40	4.1%
96413	96413	Chemotherapy administration, intravenous infusion technique; up to one hour, single or initial substance/drug		5694	5694	S	S	\$322.68	\$331.69	2.8%
G0219	G0219	PET imaging whole body; melanoma for non-covered indications		0		E1	E1	\$0.00	\$0.00	N/A
G0235	G0235	PET IMAGING, ANY SITE, NOT OTHERWISE SPECIFIED		5591	5591	S	S	\$392.97	\$401.83	2.3%
G0252	G0252	PET imaging, full & partial-ring PET scanner only, for initial diagnosis of breast cancer and/or surgical planning for breast cancer (eg, initial staging of axillary lymph nodes)		0		E1	E1	\$0.00	\$0.00	N/A
RADIOPHARMACEUTICALS & NUCLEAR MEDICINE RELATED DRUGS				APC Oct 24	APC FR 25	SI Oct 24	SI FR 25	2024 Oct	2025 Final	% Change
Q9969	Q9969	Non-HEU TC-99m Add-On per study dose Tc-99m from non-highly enriched uranium source, full cost recovery add-on, per study dose	95 percent NON-HEU Product	1442	1442	K	K	\$10.00	\$10.00	0.0%
Q9982	Q9982	Flutemetamol f18 diagnostic Flutemetamol F-18, diagnostic, per study dose, up to 5 millicuries	Vizamy!™ G.E. NDC # 17156-067-30	N/A	9459	N	K	\$0.00	\$874.40	100.0%
Q9983	Q9983	Florbetaben f18 diagnostic Florbetaben F-18, diagnostic, per study dose, up to 8.1 millicuries	Neuracec™ Life Molecular Imaging (formerly Piramal) NDC # 54828-001-30	N/A	9458	N	K	\$0.00	\$1,273.76	100.0%
A4641	A4641	Radiopharm dx agent noc RADIOPHARMACEUTICAL, DIAGNOSTIC, NOT OTHERWISE CLASSIFIED	NOC	N/A	N/A	N	N	Packaged into APC rate	Packaged into APC rate	Providers should code and bill so costs are realized for future rates
A4642	A4642	In111 satumomab INDIUM IN-111 SATUMOMAB PENDETIDE, DIAGNOSTIC, PER STUDY DOSE, UP TO 6 MILLICURIES	ONCOSCINT®	N/A	N/A	N	N	Packaged into APC rate	Packaged into APC rate	Providers should code and bill so costs are realized for future rates
A9500	A9500	Tc99m sestamibi TECHNETIUM TC-99M SESTAMIBI, DIAGNOSTIC, PER STUDY DOSE, UP TO 40 MILLICURIES	CARDIOLITE® / MIRALUMA®	N/A	N/A	N	N	Packaged into APC rate	Packaged into APC rate	Providers should code and bill so costs are realized for future rates
A9501	A9501	Technetium TC-99m teboroxime TECHNETIUM TC-99M TEBOROXIME, DIAGNOSTIC, PER STUDY DOSE	CardioTec® TEBO	N/A	N/A	N	N	Packaged into APC rate	Packaged into APC rate	Providers should code and bill so costs are realized for future rates
A9502	A9502	Tc99m tetrofosmin TECHNETIUM TC-99M TETROFOSMIN, DIAGNOSTIC, PER STUDY DOSE	MYOVUE®	N/A	N/A	N	N	Packaged into APC rate	Packaged into APC rate	Providers should code and bill so costs are realized for future rates
A9503	A9503	Tc99m medronate TECHNETIUM TC-99M MEDRONATE, DIAGNOSTIC, PER STUDY DOSE, UP TO 30 MILLICURIES	MDP	N/A	N/A	N	N	Packaged into APC rate	Packaged into APC rate	Providers should code and bill so costs are realized for future rates
A9504	A9504	Tc99m apcitide TECHNETIUM TC-99M APCITIDE, DIAGNOSTIC, PER STUDY DOSE, UP TO 20 MILLICURIES	ACUTECT®	N/A	N/A	N	N	Packaged into APC rate	Packaged into APC rate	Providers should code and bill so costs are realized for future rates
A9505	A9505	TL201 thallium THALLIUM TL-201 THALLOUS CHLORIDE, DIAGNOSTIC, PER MILLICURIE	THALLIUM 201	N/A	N/A	N	N	Packaged into APC rate	Packaged into APC rate	Providers should code and bill so costs are realized for future rates
A9507	A9507	In111 capromab INDIUM IN-111 CAPROMAB PENDETIDE, DIAGNOSTIC, PER STUDY DOSE, UP TO 10 MILLICURIES	PROSTASCINT®	N/A	N/A	N	N	Packaged into APC rate	Packaged into APC rate	Providers should code and bill so costs are realized for future rates
A9508	A9508	I131 iodobenguane, dx IODINE I-131 IOBENGUANE SULFATE, DIAGNOSTIC, PER 0.5 MILLICURIE	I-131 MIBG	N/A	N/A	N	N	Packaged into APC rate	Packaged into APC rate	Providers should code and bill so costs are realized for future rates
A9509	A9509	Iodine I-123 sod iodide mil IODINE I-123 SODIUM IODIDE, DIAGNOSTIC, PER MILLICURIE	Use for 1-4 mCi doses of I-123 for whole body imaging for less than 1 mCi and thyroid imaging see A9516	N/A	N/A	N	N	Packaged into APC rate	Packaged into APC rate	Providers should code and bill so costs are realized for future rates

CPT/			Trade	Oct 2024	Final 2025	Oct 2024	Final 2025	Oct 2024	Final 2025	%
HCP/CS	HCP/CS	Description	Name	APC	APC	SI	SI	Payment Rate	Payment Rate	Change
A9510	A9510	Tc99m disofenin TECHNETIUM TC-99M DISOFENIN, DIAGNOSTIC, PER STUDY DOSE, UP TO 15 MILLICURIES	DISIDA	N/A	N/A	N	N	Packaged into APC rate	Packaged into APC rate	Providers should code and bill so costs are realized for future rates
A9512	A9512	Tc99m pertechnetate TECHNETIUM TC-99M PERTECHNETATE, DIAGNOSTIC, PER MILLICURIE	Straight Tech Technescan Technelite	N/A	N/A	N	N	Packaged into APC rate	Packaged into APC rate	Providers should code and bill so costs are realized for
●A9506 New July 1, 2024	●A9506 New July 1, 2024	Graphite crucible for preparation of technetium tc 99m-labeled carbon aerosol, one crucible Tc-99m graphite crucible	Not an approved product sold by Cyclomedica Australia Pty Limited. (NDC 73814-986-20.) TECHNEGAS Tc 99m-Labeled Carbon Inhalation Aerosol Effective October 1, 2022 Pass-through End Date:	0760	0760	G	G	\$328.60	\$328.60	0.0%
A9513	A9513	Lutetium Lu 177 dotatate,tx Lutetium Lu 177, dotatate, therapeutic, 1 mCi	LUTATHERA® Pass-through July 1, 2018 to June 30, 2021 then separate payment (K) therapeutic Prior code C9031	9067	9067	K	K	\$296.25	\$296.25	0.0%
A9515	A9515	Choline c-11 Choline C-11, diagnostic, per study dose, up to 20 millicuries	C-11 Choline Zevacor or In-facility production	N/A	9461	N	K	\$0.00	\$2,062.94	100.0%
A9516	A9516	Iodine I-123 sod iodide mCi IODINE I-123 SODIUM IODIDE, DIAGNOSTIC, PER 100 MICROCURIES, UP TO 999 MICROCURIES	Dx I-123 Capsules. Use for A9516 for Thyroid uptakes and scans, for 1 mCi and greater and whole body imaging see A9509	N/A	N/A	N	N	Packaged into APC rate	Packaged into APC rate	Providers should code and bill so costs are realized for future rates
A9517	A9517	I131 iodide cap, rx IODINE I-131 SODIUM IODIDE CAPSULE(S), THERAPEUTIC, PER MILLICURIE	Rx I-131 Capsules	1064	1064	K	K	\$21.34	\$23.13	8.4%
A9520	A9520	Tc99 Tilmanocept Diag 0.5MCI TECHNETIUM TC-99M TILMANOCEPT, DIAGNOSTIC, UP TO 0.5 MILLICURIES	Lymphoseek™	N/A	N/A	N	N	Packaged into APC rate	Packaged into APC rate	Providers should code and bill so costs are realized for future rates
A9521	A9521	Tc99m exametazime TECHNETIUM TC-99M EXAMETAZIME, DIAGNOSTIC, PER STUDY DOSE, UP TO 25 MILLICURIES	CERETEC® HMPAO	N/A	0766	N	K	\$0.00	\$450.36	100.0%
A9524	A9524	I131 serum albumin, dx IODINE I-131 IODINATED SERUM ALBUMIN, DIAGNOSTIC, PER 5 MICROCURIES	I-131 Albumin	N/A	N/A	N	N	Packaged into APC rate	Packaged into APC rate	Providers should code and bill so costs are realized for future rates
A9526	A9526	Nitrogen N-13 ammonia NITROGEN N-13 AMMONIA, DIAGNOSTIC, PER STUDY DOSE, UP TO 40 MILLICURIES	N-13	N/A	N/A	N	N	Packaged into APC rate	Packaged into APC rate	Providers should code and bill so costs are realized for future rates
A9527	A9527	Iodine I-125 sodium iodide IODINE I-125, SODIUM IODIDE SOLUTION, THERAPEUTIC, PER MILLICURIE		2632	2632	U	U	\$60.15	\$208.58	246.8%
A9528	A9528	Iodine I-131 iodide cap, dx IODINE I-131 SODIUM IODIDE CAPSULE(S), DIAGNOSTIC, PER MILLICURIE	I-131 Dx caps per mCi	N/A	N/A	N	N	Packaged into APC rate	Packaged into APC rate	Providers should code and bill so costs are realized for future rates
A9529	A9529	I131 iodide sol, dx IODINE I-131 SODIUM IODIDE SOLUTION, DIAGNOSTIC, PER MILLICURIE	Dx I-131 sol per mCi	N/A	N/A	N	N	Packaged into APC rate	Packaged into APC rate	Providers should code and bill so costs are realized for future rates
A9530	A9530	I131 iodide sol, rx IODINE I-131 SODIUM IODIDE SOLUTION, THERAPEUTIC, PER MILLICURIE	Rx I-131 sol per mCi	1150	1150	K	K	\$20.40	\$20.88	2.4%
A9531	A9531	I131 max 100uCi IODINE I-131 SODIUM IODIDE, DIAGNOSTIC, PER MICROCURIE (UP TO 100 MICROCURIES)	Dx I-131 up to 100 uCi	N/A	N/A	N	N	Packaged into APC rate	Packaged into APC rate	Providers should code and bill so costs are realized for future rates
A9532	A9532	I125 serum albumin, dx IODINE I-125 SERUM ALBUMIN, DIAGNOSTIC, PER 5 MICROCURIES		N/A	N/A	N	N	Packaged into APC rate	Packaged into APC rate	Providers should code and bill so costs are realized for future rates

CPT/			Trade	Oct 2024	Final 2025	Oct 2024	Final 2025	Oct 2024	Final 2025	%
HCPCS	HCPCS	Description	Name	APC	APC	SI	SI	Payment Rate	Payment Rate	Change
A9536	A9536	Tc99m depreotide TECHNETIUM TC-99M DEPREOTIDE, DIAGNOSTIC, PER STUDY DOSE, UP TO 35 MILLICURIES	NEOTEC®	N/A	N/A	N	N	Packaged into APC rate	Packaged into APC rate	Providers should code and bill so costs are realized for future rates
A9537	A9537	Tc99m mebrofenin TECHNETIUM TC-99M MEBROFENIN, DIAGNOSTIC, PER STUDY DOSE, UP TO 15 MILLICURIES	CHOLETEC®	N/A	N/A	N	N	Packaged into APC rate	Packaged into APC rate	Providers should code and bill so costs are realized for future rates
A9538	A9538	Tc99m pyrophosphate TECHNETIUM TC-99M PYROPHOSPHATE, DIAGNOSTIC, PER STUDY DOSE, UP TO 25 MILLICURIES	PYROLITE® *Use this code for myocardial infarct imaging. Do not use this code for GBP, RVG or MUGA procedures see A9560	N/A	N/A	N	N	Packaged into APC rate	Packaged into APC rate	Providers should code and bill so costs are realized for future rates
A9539	A9539	Tc99m pentetate TECHNETIUM TC-99M PENTETATE, DIAGNOSTIC, PER STUDY DOSE, UP TO 25 MILLICURIES	Tc-99m DTPA	N/A	N/A	N	N	Packaged into APC rate	Packaged into APC rate	Providers should code and bill so costs are realized for future rates
A9540	A9540	Tc99m MAA TECHNETIUM TC-99M MACROAGGREGATED ALBUMIN, DIAGNOSTIC, PER STUDY DOSE, UP TO 10 MILLICURIES	MAA or new in 2020 see below Trade name: Pulmotech™ 5 vial carton NDC (69945-139-20) or 30 vial carton: NDC (69945- 139-40)	N/A	N/A	N	N	Packaged into APC rate	Packaged into APC rate	Providers should code and bill so costs are realized for future rates
A9541	A9541	Tc99m sulfur colloid TECHNETIUM TC-99M SULFUR COLLOID, DIAGNOSTIC, PER STUDY DOSE, UP TO 20 MILLICURIES	SULFUR COLLOID® (SC)	N/A	N/A	N	N	Packaged into APC rate	Packaged into APC rate	Providers should code and bill so costs are realized for future rates
A9542	A9542	In111 ibritumomab, dx INDIUM IN-111 IBRITUMOMAB TIUXETAN, DIAGNOSTIC, PER STUDY DOSE, UP TO 5 MILLICURIES	Dx In-111 ZEVALIN®	N/A	0769	N	K	\$0.00	\$798.02	100.0%
A9543	A9543	Y90 ibritumomab, rx YTTRIUM Y-90 IBRITUMOMAB TIUXETAN, THERAPEUTIC, PER TREATMENT DOSE, UP TO 40 MILLICURIES	Rx Y-90 ZEVALIN®	1643	1643	K	K	\$65,476.58	\$65,476.58	0.0%
A9546	A9546	Co57/58 COBALT CO-57/58, CYANOCOBALAMIN, DIAGNOSTIC, PER STUDY DOSE, UP TO 1 MICROCURIE	NYCOMED	N/A	N/A	N	N	Packaged into APC rate	Packaged into APC rate	Providers should code and bill so costs are realized for future rates
A9547	A9547	In111 oxyquinoline INDIUM IN-111 OXYQUINOLINE, DIAGNOSTIC, PER 0.5 MILLICURIE	See new codes A9570 and A9571 for WBC and Platelet Imaging	N/A	0770	N	K	\$0.00	\$772.64	100.0%
A9548	A9548	In111 pentetate INDIUM IN-111 PENTETATE, DIAGNOSTIC, PER 0.5 MILLICURIE	Indium DTPA	N/A	0771	N	K	\$0.00	\$715.29	100.0%
A9550	A9550	Tc99m gluceptate TECHNETIUM TC-99M SODIUM GLUCEPTATE, DIAGNOSTIC, PER STUDY DOSE, UP TO 25 MILLICURIES	GLUCOSCAN®	N/A	N/A	N	N	Packaged into APC rate	Packaged into APC rate	Providers should code and bill so costs are realized for future rates
A9551	A9551	Tc99m succimer TECHNETIUM TC-99M SUCCIMER, DIAGNOSTIC, PER STUDY DOSE, UP TO 10 MILLICURIES	DMSA	N/A	N/A	N	N	Packaged into APC rate	Packaged into APC rate	Providers should code and bill so costs are realized for future rates
A9552	A9552	F18 fdg FLUORODEOXYGLUCOSE F-18 FDG, DIAGNOSTIC, PER STUDY DOSE, UP TO 45 MILLICURIES	FDG / F-18	N/A	N/A	N	N	Packaged into APC rate	Packaged into APC rate	Providers should code and bill so costs are realized for future rates
A9553	A9553	Cr51 chromate CHROMIUM CR-51 SODIUM CHROMATE, DIAGNOSTIC, PER STUDY DOSE, UP TO 250 MICROCURIES		N/A	N/A	N	N	Packaged into APC rate	Packaged into APC rate	Providers should code and bill so costs are realized for future rates
A9554	A9554	I125 iothalamate, dx IODINE I-125 SODIUM IOTHALAMATE, DIAGNOSTIC, PER STUDY DOSE, UP TO 10 MICROCURIES		N/A	N/A	N	N	Packaged into APC rate	Packaged into APC rate	Providers should code and bill so costs are realized for future rates

CPT/			Trade	Oct 2024	Final 2025	Oct 2024	Final 2025	Oct 2024	Final 2025	%
HCPCS	HCPCS	Description	Name	APC	APC	SI	SI	Payment Rate	Payment Rate	Change
A9555	A9555	Rb82 rubidium RUBIDIUM RB-82, DIAGNOSTIC, PER STUDY DOSE, UP TO 60 MILLICURIES	Rb-82 CardioGen82	N/A	N/A	N	N	Packaged into APC rate	Packaged into APC rate	Providers should code and bill so costs are realized for future rates
A9556	A9556	Ga67 gallium GALLIUM GA-67 CITRATE, DIAGNOSTIC, PER MILLICURIE	GALLIUM	N/A	N/A	N	N	Packaged into APC rate	Packaged into APC rate	Providers should code and bill so costs are realized for future rates
A9557	A9557	Tc99m bismate TECHNETIUM TC-99M BICISATE, DIAGNOSTIC, PER STUDY DOSE, UP TO 25 MILLICURIES	NEUROLITE®	N/A	0774	N	K	\$0.00	\$683.80	100.0%
A9558	A9558	Xe133 xenon 10mci XENON XE-133 GAS, DIAGNOSTIC, PER 10 MILLICURIES	Xenon	N/A	N/A	N	N	Packaged into APC rate	Packaged into APC rate	Providers should code and bill so costs are realized for future rates
A9559	A9559	Co57 cyano COBALT CO-57 CYANOCOBALAMIN, ORAL, DIAGNOSTIC, PER STUDY DOSE, UP TO 1 MICROCURIE	Shillings Study Rubratope 57 Cobatope 57	N/A	N/A	N	N	Packaged into APC rate	Packaged into APC rate	Providers should code and bill so costs are realized for future rates
A9560	A9560	Tc99m labeled rbc TECHNETIUM TC-99M LABELED RED BLOOD CELLS, DIAGNOSTIC, PER STUDY DOSE, UP TO 30 MILLICURIES	ULTRATAG® or Cold PYP + 99m Tc Code to be used for both the in vivo/in vitro methods of tagging Red Blood Cells	N/A	N/A	N	N	Packaged into APC rate	Packaged into APC rate	Providers should code and bill so costs are realized for future rates
A9561	A9561	Tc99m oxidronate TECHNETIUM TC-99M OXIDRONATE, DIAGNOSTIC, PER STUDY DOSE, UP TO 30 MILLICURIES	HDP®	N/A	N/A	N	N	Packaged into APC rate	Packaged into APC rate	Providers should code and bill so costs are realized for future rates
A9562	A9562	Tc99m mertiatide TECHNETIUM TC-99M MERTIATIDE, DIAGNOSTIC, PER STUDY DOSE, UP TO 15 MILLICURIES	MAG-3®	N/A	N/A	N	N	Packaged into APC rate	Packaged into APC rate	Providers should code and bill so costs are realized for future rates
A9563	A9563	P32 Na phosphate SODIUM PHOSPHATE P-32, THERAPEUTIC, PER MILLICURIE		N/A	1675	N	K	\$0.00	\$179.12	100.0%
A9564	A9564	P32 chromic phosphate CHROMIC PHOSPHATE P-32 SUSPENSION, THERAPEUTIC, PER MILLICURIE	Phosphocol P-32	N/A		E1	E1	\$ -	\$ -	N/A
A9566	A9566	Tc99m fanolesomab TECHNETIUM TC-99M FANOLESOMAB, DIAGNOSTIC, PER STUDY DOSE, UP TO 25 MILLICURIES	NeuroSpec™	N/A	N/A	N	N	Packaged into APC rate	Packaged into APC rate	Providers should code and bill so costs are realized for future rates
A9567	A9567	Technetium TC-99m aerosol TECHNETIUM TC-99M PENTETATE, DIAGNOSTIC, AEROSOL, PER STUDY DOSE, UP TO 75 MILLICURIES	DTPA Aerosol For Lung Ventilation Studies	N/A	N/A	N	N	Packaged into APC rate	Packaged into APC rate	Providers should code and bill so costs are realized for future rates
A9568	A9568	Technetium tc99m arcitumomab TECHNETIUM TC-99M ARCITUMOMAB, DIAGNOSTIC, PER STUDY DOSE, UP TO 45 MILLICURIES	CEA-SCAN®	N/A	0775	N	K	\$0.00	\$809.51	100.0%
A9569	A9569	Technetium TC-99m auto WBC TECHNETIUM TC-99M EXAMETAZIME LABELED AUTOLOGOUS WHITE BLOOD CELLS, DIAGNOSTIC, PER STUDY DOSE	Use this code for infection or inflammation imaging do not use this code for brain imaging see A9521	N/A	0776	N	K	\$0.00	\$1,040.32	100.0%
A9570	A9570	Indium In-111 auto WBC INDIUM IN-111 LABELED AUTOLOGOUS WHITE BLOOD CELLS, DIAGNOSTIC, PER STUDY DOSE	When prepared with patient WBC use this new code do not use A9547	N/A	0777	N	K	\$0.00	\$1,031.39	100.0%
A9571	A9571	Indium IN-111 auto platelet INDIUM IN-111 LABELED AUTOLOGOUS PLATELETS, DIAGNOSTIC, PER STUDY DOSE	When prepared with patient platelets use this new code do not use A9547	N/A	N/A	N	N	Packaged into APC rate	Packaged into APC rate	Providers should code and bill so costs are realized for future rates

CPT/			Trade	Oct 2024	Final 2025	Oct 2024	Final 2025	Oct 2024	Final 2025	%
HCPCS	HCPCS	Description	Name	APC	APC	SI	SI	Payment Rate	Payment Rate	Change
A9572	A9572	Indium In-111 pentetretotide 'INDIUM IN-111 PENTETREOTIDE, DIAGNOSTIC, PER STUDY DOSE, UP TO 6 MILLICURIES	Octreoscan®	N/A	0779	N	K	\$0.00	\$1,914.61	100.0%
A9580	A9580	Sodium Fluoride F-18, Sodium Fluoride F-18, diagnostic, per study dose, up to 30 millicuries	F-18, NaF, Sodium Fluoride	N/A	N/A	N	N	Packaged into APC rate	Packaged into APC rate	Providers should code and bill so costs are realized for future rates.
A9582	A9582	Iodine i-123 iobenguane Iobenguane, I-123, diagnostic, per study dose, up to 15 millicuries	I-123 MIBG AdreView NDC 17156-0235-01	N/A	0780	N	K	\$0.00	\$2,074.81	100.0%
A9584	A9584	Iodine i-123 ioflupane Iodine I-123 ioflupane, diagnostic, per study dose, (up to 5 millicuries)	DaTscan® NDC #17156-210-01	N/A	0781	N	K	\$0.00	\$1,388.02	100.0%
A9586	A9586	Florbetapir F18 FLORBETAPIR F18, DIAGNOSTIC, PER STUDY DOSE, UP TO 10 MILLICURIES	Amyvid™ NDC #0002-1200-01 Passthrough: 10-1-2018- 9-30-2022 legislation extended extra two years past the normal 3 years	N/A	1664	N	K	\$0.00	\$2,194.62	100.0%
A9587	A9587	Gallium ga-68, dotatate, diagnostic, 0.1 millicurie	(NETSPOT™), NDC (69488-001-40) AAA) FDA-approved (6/2/16) PET imaging agent for the localization of somatostatin receptor-positive neuroendocrine tumors Passthrough: 1-1-2017- 12-31-2019	N/A	9056	N	K	\$0.00	\$51.09	100.0%
A9588	A9588	Fluciclovine f-18, diagnostic, 1 millicurie	(Axumin™), Blue Earth Diagnostic (BED) FDA-approved (5/31/16), a PET imaging agent for detecting biochemical recurrence of prostate cancer Passthrough: 1-1-2017- 12-31-2019	N/A	9052	N	K	\$0.00	\$268.42	100.0%
A9590	A9590	Iodine 131 iobenguane, 1 millicurie	AZEDRA NDC# 71258-0015-02: Single-dose 30 mL vial of AZEDRA containing a total volume of 22.5 (±2.5) mL of solution with a total radioactivity of 240-413 mCi/vial (8,880-15,281 MBq/vial) at calibration time Passthrough: 1-1-2019- 12-31-2021 then separate payment (K) therapeutic	9339		K	N	\$339.61	\$0.00	100.0%
A9591 NEW Jan 1, 2021	A9591	Fluoroestradiol f 18 Fluoroestradiol F-18, diagnostic, 1 mCi	Trade name: CERIANNA™ NDC (72874-0001-01) For all payers, all settings, effective January 1, 2021. Pass-through End Date: September 30, 2023	N/A	9370	N	K	\$0.00	\$498.67	100.0%
C9060 Use dates Oct 1, 2020 to December 31, 2020	C9060	Fluoroestradiol f 18 Fluoroestradiol F-18, diagnostic, 1 mCi	Trade name: CERIANNA™ NDC (72874-0001-01) Pass-through End Date: See A9591	9370	9370	D	D	N/A	N/A	Use for DOS Oct 1, 2020 to Dec 31, 2020 after see A9591
A9592 NEW April 1, 2021	A9592	Cu-64 dototate diag Copper Cu-64, dotatate, diagnostic, 1 millicurie	Trade name: Detectnet™ Cu-64 DOTATATE NDC (69945-0064-01) Effective Jan 1, 2021 Pass-through End Date: December 31, 2023	N/A	9383	N	K	\$0.00	\$468.21	100.0%
C9068 Use dates Jan 1, 2021 to March 31, 2021		Cu-64 dototate diag Copper Cu-64, dotatate, diagnostic, 1 millicurie	Trade name: Detectnet™ Cu-64 DOTATATE NDC (69945-0064-01) Effective Jan 1, 2021 to March 31, 2021. Pass-through End Date: see A9592	See A9592	See A9593	See A9594	See A9595	N/A	N/A	N/A
A9593 NEW July 1, 2021	A9593	Gallium ga-68 psma-11 ucsf Gallium ga-68 psma-11, diagnostic, (ucsf), 1 millicurie	No trade name UCSF Pass-through End Date: June 30, 2024	N/A	9409	N	K	\$0.00	\$534.91	100.0%
A9594 NEW July 1, 2021	A9594	Gallium ga-68 psma-11, ucla Gallium ga-68 psma-11, diagnostic, (ucla), 1 millicurie	No trade name UCLA Pass-through End Date: June 30, 2024	N/A	9410	N	K	\$0.00	\$372.17	100.0%

CPT/			Trade	Oct 2024	Final 2025	Oct 2024	Final 2025	Oct 2024	Final 2025	%
HCPCS	HCPCS	Description	Name	APC	APC	SI	SI	Payment Rate	Payment Rate	Change
A9595 NEW January 1, 2022	A9595	Piflu f-18, dia 1 millicurie Piflufolastat f-18, diagnostic, 1 millicurie	Trade name: Pylarify™ PSMA NDC (71258-0022-00) Effective January 1, 2022 Pass-through End Date: December 31, 2024	9430	9430	G	K	\$615.12	\$332.44	-46.0%
A9596 NEW July 1, 2022	A9596	Gallium iluuccix 1 millicure Gallium ga-68 gozetotide, diagnostic, (iluuccix), 1 millicurie	Trade name: Illuuccix® GE FAST lab or Eckert & Ziegler GalliaPharm NDCs (74725-0100-25, 74725-0100-64) Effective July 1, 2022 Pass-through End Date: June 30, 2025 • NDC 74725-0100-64 for Ga-68 produced from an IRE Galli Eo® Ge 68/Ga-68 generator	9443	9443	G	G	\$1,026.05	\$1,026.05	0.0%
A9597	A9597	Positron emission tomography radiopharmaceutical, diagnostic, for tumor identification, not otherwise classified	Generic code, use for newly FDA approved PET diagnostic radiopharmaceuticals	N/A	N/A	N	N	\$0.00	\$0.00	N/A
A9598	A9598	Positron emission tomography radiopharmaceutical, diagnostic, for non-tumor identification, not otherwise classified	Generic code, use for newly FDA approved PET diagnostic radiopharmaceuticals	N/A	N/A	N	N	\$0.00	\$0.00	N/A
A9598	A9598	Positron emission tomography radiopharmaceutical, diagnostic, for non-tumor identification, not otherwise classified Flurpiridaz F-18 dx, PSD With first use assume 1 unit	GE APPROVED September 28, 2024 Available in 2025 NDC 800-654-0118 Look for a new pass-through code in future updates	N/A	N/A	N	N	\$0.00	\$0.00	N/A
A9600	A9600	Strontium sr-89 chloride, therapeutic, per millicurie	Rx Metastron, Strontium, Strontium labeled metastron	0701	0701	K	K	\$4,146.34	\$4,146.34	0.0%
●A9601 NEW July 1, 2022	●A9601 NEW July 1, 2022	Flortaucipir inj 1 millicurie Flortaucipir f 18 injection, diagnostic, 1 millicurie	Trade name: Tauvid™ Eli Lilly and Company F-18 Flortaucipir NDCs (0002-1210-30, 0002-1210-50, 0002-1220-48, 0002-1220-50) Effective July 1, 2022 E2 = Pricing information not available to CMS No Pass-through at the time of publication in 2023 Subsequently CMS assigned pass-through January 1, 2024 End Pass-through 12-31-2026	0709	0709	G	G	\$3,710.00	\$3,710.00	0.0%
A9602 NEW July 1, 2022	A9602 NEW July 1, 2022	Fluorodopa f-18 diag per mci Fluorodopa f 18 injection, diagnostic, 1 millicurie	Trade name: None at time of print The Feinstein Institutes for Medical Research 350 Community Drive Manhasset New York 11030 Indicated for visualize dopaminergic nerve terminals in the striatum for the evaluation of adult patients with suspected Parkinsonian syndromes (PS). NDC (13267-346-57) Effective October 1, 2022 Pass-through End Date: September 30, 2025	9053	9053	G	G	\$446.88	\$498.62	11.6%
A9604	A9604	Samarium sm-153 lexidronam, therapeutic, per treatment dose, up to 150 millicuries	Rx Quadramet Samarium, Lexidronamm, 153Sm-EDTMP	1295	1295	K	K	\$17,259.85	\$17,259.85	0.0%
A9606	A9606	Radium Ra-223 dichloride, therapeutic, per microcurie	Xofigo™ NDC #50419-0208-01	1745	1745	K	K	\$165.25	\$165.25	0.0%
A9607 NEW Oct 1, 2022	A9607 NEW Oct 1, 2022	Lutetium lu 177 vipivotide Lutetium Lu 177 vipivotide tetraxetan, therapeutic, 1 millicurie	PLUVICTO™ Advanced Accelerator Applications USA, Inc NDCs (69488-003-01) Effective October 1, 2022 Pass-through End Date: September 30, 2025	9054	9054	G	G	\$241.24	\$241.24	0.0%
●A9608 NEW Oct 1, 2023	●A9608 NEW Oct 1, 2023	Flotufolastat f18, diagnostic, 1 millicurie	POSLUMA® (NDC 69932-002-01 or 69932-0002-01) Effective October 1, 2023 Pass-through End Date: September 30, 2026	9254	9254	G	G	\$651.67	\$651.67	0.0%
●A9609 NEW Jan 1, 2024	●A9609 NEW Jan 1, 2024	Fludeoxyglucose f18 up to 15 millicuries F18 fdg, 15 millicuries* for short, used in Therapeutic radiology.	DO NOT use for diagnostic NM PET or PET/CT services, see A9552. This code is for therapeutic uses of Fludeoxyglucose F18-guided external-beam radiation therapy (EBRT), a type of biology-guided radiotherapy (BgRT)	N/A	N/A	N	N	N/A	N/A	N/A

CPT/			Trade	Oct 2024	Final 2025	Oct 2024	Final 2025	Oct 2024	Final 2025	%
HCP/CS	HCP/CS	Description	Name	APC	APC	SI	SI	Payment Rate	Payment Rate	Change
C9156 NEW July 1, 2023	C9156 NEW July 1, 2023	Flotufolastat f18, diagnostic, 1 millicurie	POSOLUMA® (NDC 69932-002-01 or 69932-0002-01) Effective October 1, 2023 Pass-through End Date: September 30, 2026 See A9608	N/A	N/A	N/A	N/A	N/A	N/A	N/A
C9067 NEW Oct 1, 2020	C9067 NEW Oct 1, 2020	Gallium ga-68 dotatoc Gallium Ga-68, dotatoc, diagnostic, 0.01mCi	No trade name: UIHC C codes are Hospital Outpatient use only. Effective October 1, 2020 Pass-through End Date: September 30, 2023	N/A	9323	N	K	\$0.00	\$4.05	100.0%
●A9697 NEW Jan 1, 2025	●A9697 NEW Jan 1, 2025	Injection, carboxydextran-coated superparamagnetic iron oxide, per study dose	Not a Radiopharmaceutical MAGTRACE™ Effective Jan 1, 2025 Pass-through End Date: December 31, 2027	N/A	814	N/A	G	N/A	\$1,137.96	100.0%
A9699	A9699	Radiopharm rx agent noc RADIOPHARMACEUTICAL, THERAPEUTIC, NOT OTHERWISE CLASSIFIED	RX NOC	N/A	N/A	N	N	Packaged into APC rate	Packaged into APC rate	Providers should code and bill so costs are realized for future rates.
A9800 NEW Oct 1, 2022	A9800 NEW Oct 1, 2022	Gallium locametz 1 millicuri Gallium ga-68 gozetotide, diagnostic, (locametz), 1 millicurie	LOCAMETZ® Advanced Accelerator Applications USA, Inc NDCs (69488-003-01) Effective October 1, 2022 Pass-through End Date: September 30, 2025	9055	9055	G	G	\$873.44	\$873.44	0.0%
DRUGs Often Used in Nuclear Medicine Services, list is not all inclusive.										
J0153	J0153	Adenosine inj 1mg	ADENOSCAN Replaces J0150, J0151 and J0152	N/A	N/A	N	N	Packaged into APC rate	Packaged into APC rate	Providers should code and bill so costs are realized for future rates.
J0280	J0280	Aminophyllin up to 250 MG, inj.		N/A	N/A	N	N	Packaged into APC rate	Packaged into APC rate	Providers should code and bill so costs are realized for future rates.
J0461	J0461	Inj, atropine sulfate, 0.01 mg		N/A	N/A	N	N	Packaged into APC rate	Packaged into APC rate	Providers should code and bill so costs are realized for future rates.
J1120	J1120	Acetazolamide sodium injection, up to 500 mg	Diamox	N/A	N/A	N	N	Packaged into APC rate	Packaged into APC rate	Providers should code and bill so costs are realized for future rates.
J1160	J1160	Inj, digoxin, up to 0.5 mg	Lanoxin	N/A	N/A	N	N	Packaged into APC rate	Packaged into APC rate	Providers should code and bill so costs are realized for future rates.
J1245	J1245	Dipyridamole injection, per 10mg	Persantine IV	N/A	N/A	N	N	Packaged into APC rate	Packaged into APC rate	Providers should code and bill so costs are realized for future rates.
J1250	J1250	Inj dobutamine HCL/250 mg	Dobutrex	N/A	N/A	N	N	Packaged into APC rate	Packaged into APC rate	Providers should code and bill so costs are realized for future rates.
J1265	J1265	Injection, dopamine HCl, 40 mg	Intropin	N/A	N/A	N	N	Packaged into APC rate	Packaged into APC rate	Providers should code and bill so costs are realized for future rates.
J1610	J1610	Glucagon hydrochloride per 1MG	Glucagen	9042	9042	K	K	\$192.30	\$192.30	0.0%
J1800	J1800	Propranolol HCL injection, up to 1 mg	Inderal	N/A	N/A	N	N	Packaged into APC rate	Packaged into APC rate	Providers should code and bill so costs are realized for future rates.
J1940	J1940	Furosemide injection up to 20 mg	Lasix	N/A	N/A	N	N	Packaged into APC rate	Packaged into APC rate	Providers should code and bill so costs are realized for future rates.

CPT/			Trade	Oct 2024	Final 2025	Oct 2024	Final 2025	Oct 2024	Final 2025	%
HCPCS	HCPCS	Description	Name	APC	APC	SI	SI	Payment Rate	Payment Rate	Change
J1941	J1941	Injection, furosemide (furoscix), 20 mg	Effective July 1, 2023	N/A	N/A	E1	E1	Packaged into APC rate	Packaged into APC rate	Providers should code and bill so costs are realized for future rates.
J2270	J2270	Morphine sulfate injection, up to 10 mg	Replaces J2271	N/A	N/A	N	N	Packaged into APC rate	Packaged into APC rate	Providers should code and bill so costs are realized for future rates.
J2785	J2785	Injection, Regadenoson, <u>0.1 milligrams</u>	LexiScan NDC 00469-6501-89	N/A	N/A	N	N	Packaged into APC rate	Packaged into APC rate	Providers should code and bill so costs are realized for future rates.
J2805	J2805	Sincalide injection INJECTION, SINCALIDE, 5 MICROGRAMS	Kinevac®	N/A	N/A	N	N	Packaged into APC rate	Packaged into APC rate	Providers should code and bill so costs are realized for future rates.
J2806	J2806 DELETED	Injection, sincalide (maia) not therapeutically equivalent to J2805, 5 micrograms		N/A	N/A	N	D	N/A	N/A	N/A
J3240	J3240	Thyrotropin injection 0.9 mg n 1.1 mg vial	Thyrogen Thytropar	9108	9108	K	K	\$2,073.34	\$2,073.34	0.0%
J3420	J3420	Injection, vitamin B-12 cyanocobalamin, up to 1000 mcg		N/A	N/A	N	N	Packaged into APC rate	Packaged into APC rate	Providers should code and bill so costs are realized for future rates.
J7030	J7030	Normal saline solution infus (1000 CC)		N/A	N/A	N	N	Packaged into APC rate	Packaged into APC rate	Providers should code and bill so costs are realized for future rates.
J7040	J7040	Normal saline solution infus (500ML=1)		N/A	N/A	N	N	Packaged into APC rate	Packaged into APC rate	Providers should code and bill so costs are realized for future rates.
J7050	J7050	Normal saline solution infus (250 CC)		N/A	N/A	N	N	Packaged into APC rate	Packaged into APC rate	Providers should code and bill so costs are realized for future rates.
J9311	J9311	Inj rituximab, hyaluronidase	RituXan	9467	9467	K	K	\$36.94	\$36.94	0.0%
J9312	J9312	Inj., rituximab, 10 mg	RituXan	9186	9186	K	K	\$77.31	\$77.31	0.0%
Q9968	Q9968	Injection, non-radioactive, non-contrast, visualization adjunct (e.g., Methylene Blue, Isosulfan Blue), 1mg	Methylene Blue	1446	1446	K	K	\$8.53	\$8.53	0.0%

Disclaimer

The opinions referenced are those of the members of the SNMMI Coding and Reimbursement Committee and their consultants based on their coding experience. They are based on the commonly used codes in Nuclear Medicine, which are not all inclusive. Always check with your local insurance carriers as policies vary by region. The final decision for the coding of a procedure must be made by the physician considering regulations of insurance carriers and any local, state or federal laws that apply to the physicians practice. The SNMMI and its representatives disclaim any liability arising from the use of these opinions.