

**New York State Department of Health Cancer Services Program**

**Reimbursement Schedule 4/1/2020-3/31/2021**

<b>Breast/Cervical Procedures</b>	<b>Codes</b>	<b>CPT Code(s)***</b>	<b>Rates</b>
Screening mammogram - bilateral (Full Field digital or Tomosynthesis) **	SIF	77067+77063	\$ 133.33
Screening mammogram - bilateral diagnostic (film or digital) **	SIF	G-0279 + 77063, 66	\$ 164.67
Screening mammogram - unilateral diagnostic (film or digital) **	SIF	G0279 +77065	\$ 130.67
Assessment, education and CBE	SIF	99201	\$ 44.65
Assessment, education and pelvic exam with Pap test	SIF, 73	99201	\$ 44.65
Repeat CBE	2	Half of 99201	\$ 22.33
Diagnostic mammogram - unilateral (special views)(film or digital) **	1	G0279+77065	\$ 130.67
Diagnostic Mammogram bilateral (special views) (film or digital)**	90	G0279 +77066	\$ 164.67
Diagnostic Breast US ( <b>unilateral or bilateral</b> ) w/image documentation	4	76641, 76642, 76942	\$ 104.62
Fine needle aspiration biopsy without image guidance	29	10021,10004, 19000	\$ 96.68
Fine needle aspiration biopsy with image guidance (includes image guidance)	7	76942+10021, 10005,	\$ 153.10
Core biopsy	8	19100	\$ 150.35
Incisional biopsy	9	19101	\$ 328.66
Pre-operative ultrasonic needle localization and wire placement	22	19285	\$ 447.29
additional US needle loc and wire placement for second lesion	85	19286	\$ 381.25
Pre-operative mammographic needle localization and wire placement	15	19281	\$ 241.32
additional mammographic needle loc and wire placement second lesion	83	19282	\$ 169.86
Excisional biopsy	10	19120	\$ 495.13
Stereotactic biopsy procedure- breast- <b>all inclusive</b> of placement of breast localization device(s), imaging of specimen, percutaneous bx; first lesion, stereotactic guidance	16	19081	\$ 598.23
each additional lesion, including stereotactic guidance	84	19082	\$ 481.56
US guided Vaccum-assisted biopsy breast- <b>all inclusive</b> of placement of breast localization device(s), imaging of specimen, percutaneous bx; first lesion, ultrasound guidance	25	19083	\$ 591.72
each additional lesion, including US guidance	86	19084	\$ 468.64
Mammary ductogram/galactogram	17	77053	\$ 55.29
Article 28 Facility Fee - Core Biopsy	23	APC 5071	\$ 576.39
Article 28 Facility Fee - Incisional/Excisional Biopsy	24	APC 5072-73	\$ 1,118.44
<b>Cervical Procedures</b>			
Colposcopy without biopsy	52	57452	\$ 118.71
Colposcopy with cervical biopsy and ECC	66	57454	\$ 162.13
Colposcopy with one or more cervical biopsies	53	57455	\$ 152.87
Colposcopy with ECC	67	57456	\$ 143.66
Endometrial biopsy	68	58100, 58110	\$ 96.38
High Risk HPV DNA Hybrid Capture 2 or Cervista HR or genotypes 16/18/45	SIF,	87624, 87625	\$ 37.82
Pap smear cytology, liquid based prep	SIF, 71	88142, 43, 74, 75	\$ 23.04
Diagnostic LEEP/LEETZ	56	57460, 57461, 57522	\$ 302.13
Diagnostic Cone Biopsy- Cold knife or Laser	CKC	57520	\$ 330.26
Article 28 Facility Fee - Diagnostic LEEP/LEETZ, etc	69	APC 5414	\$ 1,235.31
<b>Colorectal Procedures</b>			
FIT	SIF	82274	\$ 15.92
Colonoscopy	36	45378 G0121/G0105	\$ 325.16
Colonoscopy w/biopsy single or multiple	37	45380	\$ 418.79
Colonoscopy w/removal of tumor(s), polyp(s) by hot biopsy...	38	45384	\$ 466.27
Colonoscopy w/removal of tumor(s), polyp(s) by snare technique	39	45385	\$ 437.99
Sigmoidoscopy	32	45330	\$ 171.45
Sigmoidoscopy with polypectomy	33	45333	\$ 306.94
Flexible sigmoidoscopy with biopsy	34	45331	\$ 269.68
Radiological exam; colon, barium enema	35	74270	\$ 150.31
2nd Technique- Colonoscopy dir bx	50	n/a	\$ 115.86
Article 28 Facility Fee - Colonoscopy	49	APC 5312	\$ 507.42
Article 28 Facility Fee - Sigmoidoscopy	48	APC 5311	\$ 385.98
<b>Other Procedures</b>			
Surgical Consultation	3, 54,	99203	\$ 105.25
Anesthesiologist fee	18, 70,	n/a	\$ 162.00
Chest X-ray Pre op	19, 62,	71046	\$ 31.79
CBC - Complete Blood Count pre-operative testing	21, 64,	85025	\$ 7.77
EKG	20, 63,	93000	\$ 16.58
Fluid cytology, Breast and nipple, (Not vaginal / cervical)	1,114	88173	\$ 151.70
Surgical pathology - Level IV-Gross and microscopic	12, 59,	88305, 88331, 88332	\$ 69.13
Surgical pathology - Level IV- needing examination of surgical margins	82, 87, 88	88307	\$ 270.14
<b>NOTES</b>			
** NYS program reimbursement is for full field digital mammography including Tomosynthesis mammography at the same rate and			
*** These CPT codes are for reference only. Other CPT codes that fulfill the service/procedure as listed may also be reimbursed at these			