

## Kit for the Preparation of Technetium Tc 99m

# Sulfur Colloid Injection

For Subcutaneous, Intraperitoneal, Intravenous and Oral Use  
For Diagnostic Use by Prescription Only

## 2018 vs 2019 Final Rule Medicare Reimbursement

(1Q 2018 vs 1Q 2019 Physician Office/IDTF Procedure Allowables)

(1Q 2018 vs 1Q 2019 Hospital Outpatient Procedure Rates)

### Radiopharmaceutical

HCPCS Level II Code	Descriptor	MEDICARE HOSPITAL OUTPATIENT		MEDICARE PHYSICIAN OFFICE & INDEPENDENT DIAGNOSTIC TESTING FACILITIES (IDTF)		
		SI	PAYMENT RATE 2019 vs 2019	TC 2018 vs 2019	PC 2018 vs 2019	GLOBAL 2018 vs 2019
A9541	Technetium tc-99m sulfur colloid, diagnostic, per study dose, up to 20 millicuries	N	Packaged Payment w/ Procedure	% of AWP or Invoice Cost Check with Medicare Administrative Contractor		

### Imaging Procedures

CPT® Code	Descriptor	MEDICARE HOSPITAL OUTPATIENT				MEDICARE PHYSICIAN OFFICE & INDEPENDENT DIAGNOSTIC TESTING FACILITIES (IDTF)					
		APC		PAYMENT RATE		TC		PC		GLOBAL	
		2018	2019	2018	2019	2018	2019	2018	2019	2018	2019
38792	Injection procedure; radioactive tracer for identification of sentinel node	5591	5591	\$349	\$354	NA	NA	NA	NA	\$41	\$84
78102	Bone marrow imaging; limited area	5591	5591	\$349	\$354	\$152	\$149	\$27	\$27	\$179	\$176
78103	Bone marrow imaging; multiple areas	5591	5591	\$349	\$354	\$192	\$190	\$36	\$36	\$228	\$226
78104	Bone marrow imaging; whole body	5591	5591	\$349	\$354	\$221	\$218	\$40	\$40	\$261	\$258
78195	Lymphatics and lymph nodes imaging	5592	5592	\$453	\$456	\$316	\$310	\$60	\$60	\$376	\$370
78201	Liver imaging; static only	5593	5593	\$1203	\$1229	\$178	\$176	\$22	\$22	\$200	\$198
78202	Liver imaging; with vascular flow	5593	5593	\$1203	\$1229	\$186	\$186	\$24	\$24	\$211	\$210
78205	Liver imaging (SPECT);	5593	5593	\$1203	\$1229	\$188	\$185	\$34	\$34	\$222	\$219
78215	Liver and spleen imaging; static only	5591	5591	\$349	\$354	\$180	\$177	\$25	\$25	\$205	\$202
78216	Liver and spleen imaging; with vascular flow	5591	5591	\$349	\$354	\$105	\$105	\$28	\$28	\$133	\$133
78262	Gastroesophageal reflux study	5591	5591	\$349	\$354	\$221	\$217	\$34	\$34	\$255	\$251
78264	Gastric emptying study	5591	5591	\$349	\$354	\$315	\$308	\$40	\$40	\$355	\$348
78291	Peritoneal-venous shunt patency test (eg, for LeVeen, Denver shunt)	5591	5591	\$349	\$354	\$227	\$223	\$44	\$44	\$270	\$266



CPT® Code	Descriptor	MEDICARE HOSPITAL OUTPATIENT				MEDICARE PHYSICIAN OFFICE & INDEPENDENT DIAGNOSTIC TESTING FACILITIES (IDTF)					
		APC		PAYMENT RATE		TC		PC		GLOBAL	
		2018	2019	2018	2019	2018	2019	2018	2019	2018	2019
78800	Radiopharmaceutical localization of tumor or distribution of radiopharmaceutical agent(s); limited area	5591	5591	\$349	\$354	\$169	\$167	\$35	\$35	\$203	\$202
78803	Radiopharmaceutical localization of tumor or distribution of radiopharmaceutical agent(s); tomographic (SPECT)	5592	5592	\$453	\$456	\$309	\$300	\$53	\$53	\$361	\$354

To identify the Medicare Physician payment rate for your specific geographical region visit the CMS website at: <http://cms.gov/Medicare/Medicare-Fee-for-Service-Payment/PFSlookup/index.html>

**Click here** for more information for Medicare HOPPS References or paste this link in your browser: <https://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/HospitalOutpatientPPS/Hospital-Outpatient-Regulations-and-Notices-Items/CMS-1695-CN2.html?DLPage=1&DLEntries=10&DLSort=2&DLSortDir=descending>

**Click here** for more information for Medicare PFS References or paste link in your browser: <https://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/PhysicianFeeSched/PFS-Federal-Regulation-Notices-Items/CMS-1693-CN2.html?DLPage=1&DLEntries=10&DLSort=2&DLSortDir=descending>

For calculation of 1Q 2018 rates in the above Table, the conversion factor \$35.9998 was used.  
 For calculation of 1Q 2019 rates in the above Table, the conversion factor \$35.8887 was used.

For more information including reimbursement guidance, please see the Society of Nuclear Medicine and Molecular Imaging (SNMMI) Practice Management Coding Corner Q & A “[Coding Sentinel Node Injection With and Without Imaging.](#)”

For additional reference several [SNMMI Practice Guidelines](#) describing the use of Technetium Tc 99m sulfur colloid imaging for [Gastric Emptying](#), [Small-Bowel and Colon Transit](#), [Liver and Spleen](#), [Hepatic and Splenic](#), [Cystography](#), [Cystography in Children](#), Lymphatic or Sentinel Node for [Breast Cancer](#) or for [Melanoma](#), can be found in the Quality and Practice section under Guidance followed by Guidelines of the SNMMI website.

## Disclaimer

Choose CPT codes for procedures separately ordered, medically necessary and performed following AMA and Specialty Society coding guidelines. Above rates are national and are not wage adjusted.

Be aware of Correct Coding Initiative quarterly updates, Title XVIII of the Social Security Act, section 1862 (a) (1) (A). This section allows coverage and payment for only those services that are considered to be medically reasonable and necessary.

Procedure coding is a listing of descriptive terms and identifying codes for reporting medical services and procedures performed by physicians. Coding should be based upon procedures and supplies provided to the patient that accurately describe the medical, surgical, and diagnostic services provided. Coding and reimbursement information is provided to you for educational purposes only and does not assure coverage in a specific case or setting. Neither Pharmalucence nor Merlino Healthcare Consulting, Inc. makes any guarantee of coverage or reimbursement of fees. Contact your commercial plan representative, local Medicare Administrative Contractor or the Centers for Medicare and Medicaid Services (CMS) for specific information as payment rates listed are National and subject to change. To the extent that you submit cost information to Medicare, Medicaid or any other reimbursement program to support claims for services or items, you are obligated to accurately report the actual price paid for such items, including any subsequent adjustments. Current Procedural Terminology numeric codes, descriptions, and modifiers are trademarks and copyrights of the AMA.

See [Package Insert](#) for full prescribing Information