

2019

HCPCS Fee Analyzer

National fee information and
Medicare fees for your area

Sample Page



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Using the Analyzer

In the Introduction, a number of applications were listed to illustrate ways that the *Analyzer* data might be used. In this section some of these applications are described in more depth. However, before beginning this analysis and adjusting fees, consider the following:

1. How will the new fees compare with what payers are willing to reimburse?
2. How will patients react to a change in charges?
3. Do the new fees accurately reflect the cost of the supplies?
4. Realize that reimbursement may be restricted by Preferred Provider Organization (PPO) and Health Maintenance Organization (HMO) contracts, as well as Medicare and workers' compensation fee schedules.
5. Because the percentiles in the *Analyzer* are based on national data, assess how charging patterns for a particular area relate to these national prices.

Initial Comparison of Current Fees to Area Fee

Initially, compare a few of the most frequently reported HCPCS Level II codes to get an idea of how current fees compare to both Medicare allowables and national claims data.

Step One

Select HCPCS Level II codes from all sections of HCPCS as they apply to the practice. This might include separately reportable office medical supplies (A codes), injectable drugs and biologicals (J codes), and orthotics/prosthetics (L codes).

Step Two

Using a spreadsheet, list the following items in separate columns:

Column 1	HCPCS Level II code
Column 2	Modifier
Column 3	Supply description
Column 4	Current fee
Column 5	Medicare allowable
Columns 6–9	<i>Analyzer</i> fees at the 25th, 50th, 75th, and 85th percentiles

HCPCS Code	Mod 1	Mod 2	Sub Description	Medicare	Medicare	Natl	Natl	Natl	Natl
				Allowable	Allowable Rural	25th	50th	75th	85th
A7017	NU		NEB GLASS/AUTOCLAV NOT USE W/O2	118.56	123.99	-	-	-	-
A7017	RR		NEB GLASS/AUTOCLAV NOT USE W/O2	11.86	12.40	-	-	-	-
A7017	UE		NEB GLASS/AUTOCLAV NOT USE W/O2	88.92	93.00	-	-	-	-
A7018			H2O DIST USE W/LG VOL NEB 1000 ML	0.31	0.35	0.50	0.83	2.22	2.00
A7020	NU		INTERFACE COUGH STIMULAT DEVC REPLACEMENT ONLY	16.01	-	15.52	31.96	51.99	60.08
A7025			HI FREQ CHST WALL OSCILLAT SYS VEST REPL PT OWND	-	-	-	-	-	-
A7025	RR		HI FREQ CHST WALL OSCILLAT SYS VEST REPL PT OWND	48.09	-	-	-	-	-
A7026	NU		HI FREQ CHST WALL OSCILLAT SYS HOSE REPL PT OWND	31.78	-	-	-	-	-
A7027	NU		COMB ORAL/NASAL MASK USED W/CPAP DEVICE EACH	119.23	130.44	199.99	233.09	309.97	390.04
A7028	NU		ORAL CUSHION COMB ORAL/NASAL MASK REPL ONLY EACH	32.52	36.68	60.39	65.00	104.98	120.01
A7029	NU		NASAL PILLOWS COMB ORAL/NASL MASK REPL ONLY PAIR	14.62	16.79	25.39	40.00	50.11	63.75
A7030	NU		FULL FACE MASK USED W/POS ARWAY PRESS DEVICE EA	88.22	98.00	189.93	226.95	306.04	350.01
A7031	NU		FACE MASK INTERFACE REPLCMT FULL FACE MASK EA	33.60	37.28	82.22	87.31	123.01	132.97
A7032	NU		CUSHN NASAL MASK INTERFACE REPLACEMENT ONLY EACH	18.69	20.79	48.36	52.11	74.99	99.00
A7033	NU		PILLW NASL CANNULA TYPE INTERFCE REPL ONLY PAIR	15.36	16.88	34.05	39.00	53.08	71.91
A7034	NU		NASL INTRFCE POS ARWAY PRSS DEVC W/WO HEAD STRAP	56.21	61.02	118.03	147.06	199.99	224.99
A7035	NU		HEADGEAR USED W/POSITIVE AIRWAY PRESSURE DEVICE	18.25	20.15	38.06	49.68	66.22	74.99
A7036	NU		CHINSTRAP USED W/POSITIVE AIRWAY PRESSURE DEVICE	10.22	11.49	19.09	22.75	32.10	40.00
A7037	NU		TUBING USED WITH POSITIVE AIRWAY PRESSURE DEVICE	12.17	13.32	37.01	49.04	69.02	73.93
A7038	NU		FILTER DISPBL USED W/POS ARWAY PRESSURE DEVICE	2.08	2.31	6.43	8.03	9.24	10.00
A7039	NU		FILTER NON DISPBL USED W/POS ARWAY PRESS DEVICE	6.04	6.66	16.69	18.02	22.10	27.08
A7040			ONE WAY CHEST DRAIN VALVE	45.31	-	-	-	-	-
A7041			WATER SEAL DRAINAGE CONTAINER & TUBING	85.11	-	-	-	-	-
A7044	NU		ORAL INTERFACE USED W/POS ARWAY PRESS DEVICE EA	80.01	89.91	184.15	185.06	195.05	199.97
A7045	NU		EXHALATION PORT W/WO SWIVEL REPLACEMENT ONLY	11.02	13.23	30.09	37.31	55.05	56.10
A7045	RR		EXHALATION PORT W/WO SWIVEL REPLACEMENT ONLY	1.10	1.32	-	-	-	-
A7045	UE		EXHALATION PORT W/WO SWIVEL REPLACEMENT ONLY	8.27	9.92	-	-	-	-
A7046	NU		WATR CHAMB HUMDIFIR USED W/POS ARWAY PRSS DEVC R	13.19	14.42	23.08	29.42	45.03	53.00
A7047	NU		ORAL INTERFACE USED RESPIRATORY SUCTION PUMP EA	133.66	-	-	-	-	-
A7048			VACUUM DRAINAGE COLLECTION UNIT & TUBING KIT EA	47.38	-	85.03	85.03	85.03	85.03
A7501			TRACHEOSTOMA VALVE INCLUDING DIAPHRAGM EACH	116.10	-	-	-	-	-
A7502			REPL DIAPHRAGM/FCEPLATE TRACHEOSTOMA VALVE EA	55.19	-	-	-	-	-
A7503			FLTR HOLDER/CAP REUSBL TRACHEOSTOMA EXCHG SYS EA	12.54	-	11.36	11.37	11.54	12.41
A7504			FLTR USE TRACHEOSTOMA HEAT&MOISTR EXCHG SYS EA	0.75	-	0.77	0.78	0.80	1.02
A7505			HOUSING REUSABL W/O ADHES EXCHG SYS&/ VALV EA	5.18	-	5.02	5.09	5.23	6.42
A7506			ADHES DISC EXCHG SYS &/ W/TRACHEOSTOMA VALV EA	0.37	-	0.80	0.73	0.81	1.17
A7507			FLTR HLDR&INTGR FLTR W/O ADHES TRACHEOSTMA EXCHG	2.75	-	2.78	4.66	6.08	7.04
A7508			HOUS&INTGR ADHES TRACHEOSTOMA EXCHG SYS &/ VALV	3.17	-	3.78	5.72	7.20	9.85
A7509			FLTR HLDR&INTGR FLTR HOUS&ADHES TRACHEOSTOMA	1.56	-	3.03	5.35	12.05	14.36
A7520			TRACHEOST/LARYNGECT TUBE NON-CUFFED POLYVINYLCHL	52.49	-	78.44	101.83	154.91	200.00
A7521			TRACHEOST/LARYNGECT TUBE CUFFED PVC SILICONE/= EA	52.00	-	75.03	122.05	217.74	288.04
A7522			TRACHEOST/LARYNGECT TUBE STNLESS STEEL/EQUAL EA	49.93	-	48.02	68.01	125.05	189.05

HCPCS Code	Mod 1	Mod 2	Sub	Description	Medicare					
					Medicare Allowable	Allowable Rural	Natl 25th	Natl 50th	Natl 75th	Natl 85th
J9280				INJECTION MITOMYCIN 5 MG	103.17	-	122.06	155.04	211.00	232.58
J9293				INJECTION MITOXANTRONE HCL PER 5 MG	36.75	-	86.89	270.14	651.02	832.98
J9299		N		INJECTION NIVOLUMAB 1 MG	26.06	-	50.06	61.03	66.03	75.00
J9300				INJECTION GEMTUZUMAB OZOGAMICIN 5 MG	-	-	-	-	-	-
J9301				INJECTION OBINUTUZUMAB 10 MG	56.20	-	100.06	130.00	154.02	155.05
J9302				INJECTION OFATUMUMAB 10 MG	51.87	-	89.00	110.91	132.03	144.97
J9303				INJECTION PANITUMUMAB 10 MG	105.60	-	171.01	218.05	267.00	286.01
J9305				INJECTION PEMETREXED 10 MG	62.78	-	99.94	123.97	150.05	152.01
J9306				INJECTION PERTUZUMAB 1 MG	10.65	-	20.02	24.02	26.05	30.68
J9307				INJECTION PRALATREXATE 1 MG	229.72	-	378.90	414.03	525.91	548.02
J9308		N		INJECTION RAMUCIRUMAB 5 MG	55.93	-	99.94	127.53	138.00	138.00
J9310				INJECTION RITUXIMAB 100 MG	792.92	-	1,000.09	1,386.28	1,824.87	1,955.90
J9315				INJECTION ROMIDEPSIN 1 MG	306.79	-	432.64	556.91	730.92	743.08
J9320				INJECTION STREPTOZOCIN 1 G	323.60	-	472.06	754.72	942.91	1,007.03
J9328				INJECTION TEMOZOLOMIDE 1 MG	8.24	-	9.64	15.99	17.03	17.03
J9330				INJECTION TEMSIROLIMUS 1 MG	66.67	-	96.01	122.04	154.92	166.01
J9340				INJECTION THIOTEPA 15 MG	-	-	-	-	-	-
J9351				INJECTION TOPOTECAN 0.1 MG	3.06	-	10.02	34.94	55.03	71.06
J9354				INJ ADO-TRASTUZUMAB EMTANSINE 1 MG	29.22	-	57.94	70.05	75.03	81.34
J9355				INJECTION TRASTUZUMAB 10 MG	92.09	-	135.05	174.03	212.94	227.92
J9357				INJECTION VALRUBICIN INTRAVESICAL 200 MG	1,148.73	-	1,250.40	1,500.31	2,636.07	2,893.49
J9360				INJECTION VINBLASTINE SULFATE 1 MG	3.54	-	6.04	8.02	10.03	11.03
J9370				VINCISTINE SULFATE 1 MG	4.25	-	20.01	42.03	52.02	60.02
J9371				INJECTION VINCISTINE SULFATE LIPOSOME 1 MG	2,506.49	-	2,148.75	2,896.71	2,896.71	5,335.77
J9390				INJECTION VINOURELBINE TARTRATE 10 MG	10.35	-	40.02	95.06	140.02	149.94
J9395				INJECTION FULVESTRANT 25 MG	95.77	-	161.94	206.00	237.95	241.94
J9400				INJECTION ZIV-AFLIBERCEPT 1 MG	8.45	-	19.22	34.03	39.92	43.01
J9600				INJECTION PORFIMER SODIUM 75 MG	-	-	-	-	-	-
J9999				NOT OTHERWISE CLASSIFIED ANTINEOPLASTIC DRUG	-	-	-	-	-	-
K0001		NU		STANDARD WHEELCHAIR	-	-	341.03	552.53	650.04	850.02
K0001		RR		STANDARD WHEELCHAIR	21.70	24.97	59.07	69.99	100.03	118.02
K0001		UE		STANDARD WHEELCHAIR	-	-	-	-	-	-
K0002		NU		STANDARD HEMI WHEELCHAIR	-	-	-	-	-	-
K0002		RR		STANDARD HEMI WHEELCHAIR	41.82	42.97	77.22	90.83	105.00	119.94
K0002		UE		STANDARD HEMI WHEELCHAIR	-	-	-	-	-	-
K0003		NU		LIGHTWEIGHT WHEELCHAIR	-	-	494.98	820.42	1,018.66	1,065.84
K0003		RR		LIGHTWEIGHT WHEELCHAIR	32.39	37.71	98.80	112.05	124.95	143.00
K0003		UE		LIGHTWEIGHT WHEELCHAIR	-	-	-	-	-	-
K0004		NU		HIGH STRENGTH LIGHTWEIGHT WHEELCHAIR	-	-	854.00	1,345.40	2,999.62	2,999.60
K0004		RR		HIGH STRENGTH LIGHTWEIGHT WHEELCHAIR	39.22	46.80	139.46	150.07	174.06	184.96
K0004		UE		HIGH STRENGTH LIGHTWEIGHT WHEELCHAIR	-	-	-	-	-	-
K0005		NU		ULTRALIGHTWEIGHT WHEELCHAIR	2,043.83	-	2,001.42	2,133.51	2,494.80	2,932.06