

Mammography

2011 CODING & REIMBURSEMENT GUIDE

Physician Payment

Global and Professional

CPT® CODE ¹	DESCRIPTION	LOCATION	RVU ²	2011 NATIONAL PAYMENT AVERAGE ^{2,3}
77057	Screening film mammography	Office/IDTF	2.39	\$81.20
		Hospital	1.03	\$35.00
77055	Diagnostic film mammography, unilateral	Office/IDTF	2.55	\$86.64
		Hospital	1.03	\$35.00
77056	Diagnostic film mammography, bilateral	Office/IDTF	3.26	\$110.76
		Hospital	1.28	\$43.49
G0202	Screening mammography digital	Office/IDTF	4.13	\$140.32
		Hospital	1.03	\$35.00
G0204	Diagnostic mammography digital, bilateral	Office/IDTF	4.94	\$167.84
		Hospital	1.27	\$43.15
G0206	Diagnostic mammography digital, unilateral	Office/IDTF	3.91	\$132.85
		Hospital	1.03	\$35.00
77051	Computer aided detection, diagnostic (Add-on code to be used in conjunction with codes 77055, 77056, G0204 and G0206. List each code separately.)	Office/IDTF	.34	\$11.55
		Hospital	.09	\$3.06
77052	Computer aided detection, screening (Add-on code to be used in conjunction with codes 77057 and G0202. List each code separately.)	Office/IDTF	.34	\$11.55
		Hospital	.09	\$3.06
19290	Preoperative placement of needle localization wire, breast	Office/IDTF	4.69	\$159.35
		Hospital	1.92	\$65.23
19291	Preoperative placement of needle localization wire, breast; each additional lesion	Office/IDTF	1.99	\$67.61
		Hospital	.94	\$31.94
10021	Fine needle aspiration without image guidance	Office/IDTF	4.19	\$142.36
		Hospital	2.07	\$70.33
10022	Fine needle aspiration with image guidance	Office/IDTF	4.02	\$136.59
		Hospital	1.93	\$65.37

1. American Medical Association, CPT® 2010, Professional Edition and HCPCS 2010, Professional Edition.

2. Physician relative value units (RVUs) are based on a correction notice to the Medicare 2011 Physician Fee Schedule Final Rule published in the Federal Register on December 30, 2010. The National Average Medicare rates are based on the 2011 conversion factor of \$33.9764. Actual payment to a physician will vary based on geographic location. Payment for a given procedure in a given locality is available in the Medicare Physician Fee Schedule Look-up file posted in the Physician Center of the CMS website. The payment rates could be further revised if Congress were to enact legislation that would change the conversion factor, which has typically occurred in recent years.

3. Medicare 2011 Outpatient Final Rule published in the Federal Register, November 2, 2010.

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Facility Payment
Location: Hospital Outpatient

Technical Component

CPT® CODE¹	DESCRIPTION	RVU²	2011 NATIONAL PAYMENT AVERAGE²,³
77057	Screening film mammography	1.36	\$46.21
77055	Diagnostic film mammography, unilateral	1.52	\$51.64
77056	Diagnostic film mammography, bilateral	1.98	\$67.27
G0202	Screening mammography digital	3.10	\$105.33
G0204	Diagnostic mammography digital, bilateral	3.67	\$124.69
G0206	Diagnostic mammography digital, unilateral	2.88	\$97.85
77051	Computer aided detection, diagnostic (Add-on code to be used in conjunction with codes 77055, 77056, G0204 and G0206. List each code separately.)	.25	\$8.49
77052	Computer aided detection, screening (Add-on code to be used in conjunction with codes 77057 and G0202. List each code separately.)	.25	\$8.49
19290	Preoperative placement of needle localization wire, breast		Packaged
19291	Preoperative placement of needle localization wire, breast; each additional lesion.		Packaged
10021	Fine needle aspiration without image guidance	APC 0002	\$108.16
10022	Fine needle aspiration with image guidance	APC 0004	\$315.75

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