

Office Procedures Special Premium

To receive the Office Procedures Special Premium payment (\$2000), a physician must submit valid claims for the following services rendered to enrolled patients, totaling a minimum of \$1,200.00 in any fiscal year. The procedures must be provided in the physician's office.

G420 Ear syringing and or extensive curetting or debridement

Incision: Abscess or Hematoma

Z101	Local anesthetic – Subcutaneous - One
Z173	Local anesthetic – Subcutaneous - Two
Z174	Local anesthetic – Subcutaneous - Three or more
Z103	Palmar or plantar spaces
Z106	Ischiorectal or pilonidal
Z104	Perianal
Z114	Foreign body removal local anesthetic
Z118	Aspiration of superficial lump for cytology
Z116	Biopsy(s) – any method when sutures are used
Z113	Any method when sutures are not used

Excision (with or without Biopsy) with the following fee schedule codes:

Group 1 – E.G. VERRUCA, KERATOSIS, PYOGENIC GRANULOMA

Z156	Removal by excision and suture – single lesion
Z157	Removal by excision and suture – two lesions
Z158	Removal by excision and suture – three or more lesions
Z159	Removal by electrocoagulation and/or curetting – single lesion
Z160	Removal by electrocoagulation and/or curetting – two lesions
Z161	Removal by electrocoagulation and/or curetting – three or more lesions

Group 2 – NEVUS

Z162	Removal by excision and suture – single lesion
Z163	Removal by excision and suture – two lesions
Z164	Removal by excision and suture – three or more lesions

Group 3 – CYST, HAEMANGIOMA, LIPOMA

	Face or neck	Other areas
Local anesthetic – single lesion	Z122	Z125
Local anesthetic – two lesions	Z123	Z126
Local anesthetic – three or more lesions	Z124	Z127

Group 4 – OTHER LESIONS

Z096 Lipoma – 5 -10 cm

	Face or Neck –simple excision	Other areas – simple excision
Malignant Lesions including biopsy of each lesion each lesion – single lesion	R048	R094
Malignant Lesions including biopsy of each lesion each lesion – two lesions	R049	R040
Malignant Lesions including biopsy of each lesion each lesion – three or more lesions	R050	R041

	Face or neck	Other areas
Curettage, electrodesiccation or cryosurgery – single lesion	R018	R031
Curettage, electrodesiccation or cryosurgery – two lesions	R019	R032

Curettage, electrodesiccation or cryosurgery – three or more lesions	R020	R033
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TREATMENT OF EPISTAXIS (NASAL HAEMORRHAGE)

Z314	Cauterization (IOP) – unilateral
Z315	Anterior packing – unilateral
Z316	Posterior packing – unilateral or bilateral

Injection – Joint

G370	Injection of bursa, or injection and/or aspiration of joint, ganglion or tendon sheath
G371	Each additional bursa, joint, ganglion or tendon sheath, to a maximum of 5

OPERATION ON THE MUSCULOSKELETAL SYSTEM

Reduction – Fractures

F004	Phalanx - no reduction, rigid immobilization
F005	Phalanx - Closed reduction
E558	Phalanx - Each additional
F006	Intra-articular – closed reduction
F008	Metacarpal – no reduction, one or more, rigid immobilization
F009	Metacarpal – closed reduction
E504	Metacarpal - each additional
F012	Bennett’s – no reduction, rigid immobilization
F013	Bennett’s – Closed reduction
F102	Carpus – no reduction, rigid immobilization

F016	Closed, one or more
F017	Open, one or more
F018	Scaphoid – no reduction, rigid immobilization

Reductions – Dislocations

D001	Finger – closed – one
E576	Each additional
D004	Metacarpal/phalangeal – closed – one
E577	Each additional
D007	Carpal – closed
D012	Radial head – closed, pulled elbow

Casts

Z200	Application of Unna's paste
Z201	Finger
Z202	Hand
Z203	Arm, forearm, or wrist
Z204	Removal of plaster (not associated with fractures or dislocation) within 2 weeks of initial treatment
Z211	Whole leg
Z213	Below knee, knee splints

Suture of Lacerations (IOP)

Z154	Up to 5cm if on face and/or requires tying of bleeders and/or closure in layers
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Z175	5.1 to 10 cm
Z177	5.1 cm – 10cm if on face and/or requires tying of bleeders and/or closure in layers
Z179	10.1 to 15 cm
Z190	10.1 to 15 cm if on face and/or requires tying of bleeders and/or closure in layers
Z191	More than 15.1 cm – other than face
Z192	More than 15.1 cm – on face

Finger or Toe-nail (IOP)

Z110 Extensive debridement of onychogryphotic nail involving removal of multiple laminae

Simple, partial or complete, nail excision requiring anesthesia

Z128	One
Z129	Multiple
Z130	Radical, including destruction of nail bed - one
Z131	Multiple

Chemical and/or cryotherapy treatment of minor skin lesions

Z117 one or more lesions, per treatment

OPERATIONS ON THE BREAST

Z141	Needle biopsy – one or more (IOP)
Z139	Aspiration of cyst – one or more (IOP)

ENDOSCOPIES (IOP)

Z515	Esophagoscopy, with or without biopsy(ies) (IOP)
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Z567	Subsequent procedure by same physician (within three months following previous endoscopic procedure) (IOP)
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STOMACH – ENDOSCOPIES (IOP)

Z527	Gastroscopy (may include biopsies, photography and removal of polyps = or < 1cm)
Z547	Gastroscopy with removal of foreign body
Z528	Subsequent (within three months following previous gastroscopy)

Intestines (except rectum) – Endoscopy (IOP)

Z580 Endoscopy (using 60cm. flexible endoscope)

Endoscope:

Z555	Of sigmoid to descending colon
E740	To splenic flexure
E740	To hepatic flexure
E740	To cecum
E705	Into terminal ileum

Endoscopic Sigmoidoscopy (with rigid scope) with or without anoscope (IOP)

Z535	Note to be billed with Z555 or Z580
Z536	With biopsy(ies)

VULVA AND INTROITUS – INCISION

Z714 Abscess of vulva, Bartholin or Skene’s gland (IOP) – incision and drainage: Local anesthetic

Vulva and Introitus – Excision – Condylomas – single or multiple (IOP)

Z733	Chemical and/or cryosurgery – one or more
Z736	Local anesthetic

CORNEA – INCISION

Removal imbedded foreign body (IOP) – local anesthetic

Z847	One foreign body
Z848	Two foreign bodies
Z845	Three or more foreign bodies

EYELIDS – INCISION

Z854 Drainage of abscess (IOP) – local anesthetic

EYELIDS – EXCISION

Z874 Chalazion – single or multiple (IOP) – local anesthetic

EXTERNAL EAR – ENDOSCOPY

Z915 Removal of foreign body – simple

EXTERNAL EAR – EXCISION

Z904 Local excision, polyp – office (IOP)

GYNECOLOGY

G378 Insertion of intrauterine contraceptive device

G552 Removal of intrauterine contraceptive device

G361 Endometrial flushing

Z770 Endometrial sampling