



## Update to list of Category II Codes dated December 21, 2009

Please note: The following list of Category II codes has been added to the Web to allow a posting of the latest Category II codes developed. This listing of Category II codes is intended to identify those codes that have been added to the Category II coding set since the latest printing of the CPT coding manual (CPT 2010). Therefore, the codes noted within this Web listing will include only those codes that are not listed in the latest edition of the CPT coding manual. For a complete listing of all existing Category II codes, this listing should be appended to the codes included in the latest edition of the CPT coding manual.

As is utilized in the CPT coding manual, a bullet (●) precedes code additions while a triangle/delta symbol (▲) precedes revised codes.

Within this document, the term “release date” is intended to identify the date of publication of the noted change by the American Medical Association (AMA). The term “implementation date” is intended to identify the date that the change officially becomes a part of the CPT code set. Please note that payers may use the term “implementation date” or “effective date” to specify the start date for use of a code in a designated program (eg, PQRI). Start dates may vary from payer to payer and may differ from the AMA implementation dates. Therefore, check with the payer for specific payer information regarding use of these codes as part of any program.

The “\*” symbol is used in this document to notate codes that have been changed since the original listing on the AMA Web site prior to inclusion within the CPT Codebook. When this symbol is listed, the added or deleted code, text change, or other noted revision will be presented with underling (eg, underlining), strike throughs (eg, ~~strike-throughs~~), or bow ties (eg, ►◄). In addition, the posting date of the revision as well as the date of implementation for the change (ie, date of inclusion for the change as part of the CPT code set) will also be included in the table. Finally, the date that the new change will appear in the CPT Codebook is also included in the table in the last column. The “\*” symbol will be appended to each part of the listing that reflects a change from the previously posted information.

### Category II Codes

The following section of *Current Procedural Terminology (CPT)* contains a set of supplemental tracking codes that can be used for performance measurement. It is anticipated that the use of Category II codes for performance measurement will decrease the need for record abstraction and chart review, thereby minimizing administrative burden on physicians, other health care professionals, hospitals, and entities seeking to measure the quality of patient care. These codes are intended to facilitate data collection about the quality of care rendered by coding certain services and test results that support nationally established performance measures and that have an evidence base as contributing to quality patient care.

The use of these codes is optional. The codes are not required for correct coding and may not be used as a substitute for Category I codes.

These codes describe clinical components that may be typically included in evaluation and management services or clinical services and, therefore, do not have a relative value associated with them. Category II codes may also describe results from clinical laboratory or radiology tests

#### Footnotes

<sup>1</sup> Physician Consortium for Performance Improvement, [www.physicianconsortium.org](http://www.physicianconsortium.org)

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<sup>3</sup> Joint Commission on Accreditation of Healthcare Organizations (JCAHO), ORYX Initiative Performance Measures, [www.jcaho.org/pms](http://www.jcaho.org/pms)

<sup>4</sup> National Diabetes Quality Improvement Alliance (NDQIA), [www.nationaldiabetesalliance.org](http://www.nationaldiabetesalliance.org)

<sup>5</sup> Joint measure from The Physician Consortium for Performance Improvement, [www.physicianconsortium.org](http://www.physicianconsortium.org) and National Committee on Quality Assurance (NCQA), [www.ncqa.org](http://www.ncqa.org)

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<sup>7</sup> Ingenix, [www.ingenix.com](http://www.ingenix.com)

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and other procedures, identified processes intended to address patient safety practices, or services reflecting compliance with state or federal law.

Category II codes described in this section make use of alphabetical characters as the 5th character in the string (ie, 4 digits followed by the letter **F**). These digits are not intended to reflect the placement of the code in the regular (Category I) part of the *CPT* codebook. To promote understanding of these codes and their associated measures, users are referred to Appendix H, which contains information about performance measurement exclusion modifiers, measures, and the measures' source(s).

Composite Measures .....	0001F-0015F
Patient Management .....	0500F-0575F
Patient History .....	1000F-1220F
Physical Examination .....	2000F-2060F
Diagnostic/Screening Processes or Results .....	3006F-3650F
Therapeutic, Preventive or Other Interventions .....	4000F-4340F
Follow-up or Other Outcomes .....	5005F-5200F
Patient Safety .....	6005F-6070F
Structural Measures .....	7010F-7025F

**Composite Codes**

No new codes for this section at this time.

**Patient Management**

●0545F Plan for follow-up care for major depressive disorder, documented (MDD ADOL) <sup>1</sup>	Released: July 1, 2009 Implemented: January 1, 2010	<b>CPT 2011</b>
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**Patient History**

Patient history codes describe measures for select aspects of patient history or review of systems.

1040F DSM-IV criteria for major depressive disorder documented at the initial evaluation (MDD, MDD ADOL) <sup>1</sup>	Released: July 1, 2009 Implemented: January 1, 2010	<b>CPT 2011</b>
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1111F Discharge medications reconciled with the current medication list in ambulatory medical record (COA)<sup>2</sup> (GER)<sup>5</sup> Released: November 18, 2008  
Implemented: January 1, 2009 **CPT 2010**

1119F Initial evaluation for condition (HEP C)<sup>1</sup> (EPI)<sup>8</sup> Released: September 15, 2009  
Implemented: January 1, 2010 **CPT 2011**

1121F Subsequent evaluation for condition (HEP C)<sup>1</sup> (EPI)<sup>8</sup> Released: September 15, 2009  
Implemented: January 1, 2010 **CPT 2011**

(Codes 1127F and 1128F have been deleted) Released: September 15, 2009  
Implemented: January 1, 2010 **CPT 2011**

●1200F Seizure type(s) and current seizure frequency(ies) documented (EPI)<sup>8</sup> Released: September 15, 2009  
Implemented: January 1, 2010 **CPT 2011**

●1205F Etiology of epilepsy or epilepsy syndrome(s) reviewed and documented (EPI)<sup>8</sup> Released: September 15, 2009  
Implemented: January 1, 2010 **CPT 2011**

**Physical Examination**

Physical examination codes describe aspects of physical examination or clinical assessment.

●2060F Patient interviewed directly by evaluating clinician on or before date of diagnosis of major depressive disorder (MDD ADOL)<sup>1</sup> Released: July 1, 2009  
Implemented: January 1, 2010 **CPT 2011**

**Diagnostic/Screening Processes or Results**

**Footnotes**

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Diagnostic/screening processes or results codes describe results of tests ordered (clinical laboratory tests, radiological or other procedural examinations, and conclusions of medical decision-making).

●3008F Body Mass Index (BMI), documented (PV) <sup>1</sup>	Released: July 1, 2009 Implemented: January 1, 2010	<b>CPT 2011</b>
●3015F Cervical cancer screening results documented and reviewed (PV) <sup>1</sup>	Released: July 1, 2009 Implemented: January 1, 2010	<b>CPT 2011</b>
●3038F Pulmonary function test performed within 12 months prior to surgery (Lung/Esophagus) <sup>6</sup>	Released: September 15, 2009 Implemented: January 1, 2010	<b>CPT 2011</b>
3085F Suicide risk assessed (MDD, MDD ADOL) <sup>1</sup>	Released: July 1, 2009 Implemented: January 1, 2010	<b>CPT 2011</b>
▲3110F Documentation in final CT or MRI report of presence or absence of hemorrhage and mass lesion and acute infarction (STR) <sup>5</sup>	Released: September 15, 2009 Implemented: January 1, 2010	<b>CPT 2011</b>
▲3111F CT or MRI of the brain performed in the hospital within 24 hours of arrival to the hospital OR performed in an outpatient imaging center, to confirm initial diagnosis of stroke, TIA or hemorrhage (STR) <sup>5</sup>	Released: September 15, 2009 Implemented: January 1, 2010	<b>CPT 2011</b>
▲3112F CT or MRI of the brain performed greater than 24 hours after arrival to the hospital OR performed in an outpatient imaging center for purpose other than confirmation of initial diagnosis of stroke, TIA, or hemorrhage (STR) <sup>5</sup>	Released: September 15, 2009 Implemented: January 1, 2010	<b>CPT 2011</b>

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|-------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------|-----------------|
| ●3293F ABO and Rh blood typing documented as performed (Pre-Cr) <sup>7</sup>                                                  | Released:<br>July 1, 2009<br>Implemented:<br>January 1, 2010       | <b>CPT 2011</b> |
| ●3294F Group B Streptococcus (GBS) screening documented as performed during week 35-37 gestation (Pre-Cr) <sup>7</sup>        | Released:<br>July 1, 2009<br>Implemented:<br>January 1, 2010       | <b>CPT 2011</b> |
| ●3323F Clinical tumor, node and metastases (TNM) staging documented and reviewed prior to surgery (Lung/Esop Cx) <sup>6</sup> | Released:<br>September 15, 2009<br>Implemented:<br>January 1, 2010 | <b>CPT 2011</b> |
| ●3324F MRI or CT scan ordered, reviewed or requested (EPI) <sup>8</sup>                                                       | Released:<br>September 15, 2009<br>Implemented:<br>January 1, 2010 | <b>CPT 2011</b> |
| ●3328F Performance status documented and reviewed within 2 weeks prior to surgery(Lung/Esop Cx) <sup>6</sup>                  | Released:<br>September 15, 2009<br>Implemented:<br>January 1, 2010 | <b>CPT 2011</b> |
| ●3650F Electroencephalogram (EEG) ordered, reviewed or requested (EPI) <sup>8</sup>                                           | Released:<br>September 15, 2009<br>Implemented:<br>January 1, 2010 | <b>CPT 2011</b> |

### Therapeutic, Preventive or Other Interventions

Therapeutic, preventive or other interventions codes describe pharmacologic, procedural, or behavioral therapies, including preventive services such as patient education and counseling.

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|--------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------|-----------------|
| ●4004F Patient screened for tobacco use AND received tobacco cessation counseling, if identified as a tobacco user (PV) <sup>1</sup> | Released:<br>July 1, 2009<br>Implemented:<br>January 1, 2010 | <b>CPT 2011</b> |
|--------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------|-----------------|

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4040F Pneumococcal vaccine administered or previously received (COPD) <sup>1</sup> , (PV) <sup>1,2</sup>	Released: July 1, 2009 Implemented: January 1, 2010	<b>CPT 2011</b>
▲4047F Documentation of order for prophylactic <u>parenteral</u> antibiotics to be given within one hour (if fluoroquinolone or vancomycin, two hours) prior to surgical incision (or start of procedure when no incision is required) (PERI 2) <sup>5</sup>	Released: September 15, 2009 Implemented: January 1, 2010	<b>CPT 2011</b>
▲4048F Documentation that <u>administration of prophylactic parenteral antibiotic was initiated given</u> within one hour (if fluoroquinolone or vancomycin, two hours) prior to surgical incision (or start of procedure when no incision is required), <u>as ordered</u> (PERI 2) <sup>5</sup>	Released: September 15, 2009 Implemented: January 1, 2010	<b>CPT 2011</b>
4060F Psychotherapy services provided (MDD, <u>MDD ADOL</u> ) <sup>1</sup>	Released: July 1, 2009 Implemented: January 1, 2010	<b>CPT 2011</b>
4062F Patient referral for psychotherapy documented (MDD, <u>MDD ADOL</u> ) <sup>1</sup>	Released: July 1, 2009 Implemented: January 1, 2010	<b>CPT 2011</b>
●4063F Antidepressant pharmacotherapy considered and not prescribed (MDD ADOL) <sup>1</sup>	Released: July 1, 2009 Implemented: January 1, 2010	<b>CPT 2011</b>
4064F Antidepressant pharmacotherapy prescribed (MDD, <u>MDD ADOL</u> ) <sup>1</sup>	Released: July 1, 2009 Implemented: January 1, 2010	<b>CPT 2011</b>
●4255F Duration of general or neuraxial anesthesia 60 minutes or longer, as documented in the anesthesia record (CRIT) <sup>5</sup>	Released: September 15, 2009 Implemented: January 1, 2010	<b>CPT 2011</b>

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- 4256F Duration of general or neuraxial anesthesia less than 60 minutes, as documented in the anesthesia record (CRIT)<sup>5</sup>

Released: September 15, 2009  
Implemented: January 1, 2010

**CPT 2011**
- 4330F Counseling about epilepsy specific safety issues provided to patient (or caregiver (s)) (EPI)<sup>8</sup>

Released: September 15, 2009  
Implemented: January 1, 2010

**CPT 2011**
- 4340F Counseling for women of childbearing potential with epilepsy (EPI)<sup>8</sup>

Released: September 15, 2009  
Implemented: January 1, 2010

**CPT 2011**

**Follow-up or Other Outcomes**

Follow-up or other outcomes codes describe review and communication of test results to patients, patient satisfaction or experience with care, patient function status, and patient morbidity and mortality.

- 5200F Consideration of referral for a neurological evaluation of appropriateness for surgical therapy for intractable epilepsy within the past 3 years (EPI)<sup>8</sup>

Released: September 15, 2009  
Implemented: January 1, 2010

**CPT 2011**

**Patient Safety**

- 6070F Patient queried and counseled about anti-epileptic drug (AED) side effects (EPI)<sup>8</sup>

Released: September 15, 2009  
Implemented: January 1, 2010

**CPT 2011**

**Structural Measures**

- ▲7010F Patient information entered into a recall system that includes: with the target date for the next exam specified AND a process to follow up with patients regarding missed or unscheduled appointments (ML)<sup>5</sup>

Released: September 15, 2009  
Implemented: January 1, 2010

**CPT 2011**

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