Update on 2009 CPT, HCPCS and CDT Codes

Phase I: Listed 2009 CPT, HCPCS and CDT Codes Available for Billing


Effective immediately, the 2009 codes listed above can be billed with dates of service on and after Jan. 1, 2009.

Claims already submitted and denied with dates of service on and after Jan. 1, 2009, will be reprocessed. Providers will be notified when the affected claims are reprocessed.

For any physician/outpatient-facility administered drugs listed above, NDC and NDC quantity must be billed by provider types 12, 14, 17, 20, 21, 22, 24, 25, 27, 29, 36, 45, 64, 72, 74 and 77. For details, see the National Drug Code (NDC) Billing Reference.

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Phase II of the 2009 CPT and HCPCS Codes

Providers will be notified when Phase II codes are updated in the MMIS. Phase II codes are 82375, J1750, J7611-J7614. Any claims with these codes that are billed now and denied will be reprocessed at a later date. Providers will be notified when the affected claims are reprocessed.