

**Early Detection Works (EDW)  
Subcontractor Reimbursement Information**

|   |
|---|
| <b>Attachment B</b><br>Init. _____ Date _____ |
|---|

Subcontractor Name \_\_\_\_\_

Remit to Address, City, State, Zip \_\_\_\_\_

County \_\_\_\_\_ Contact Person \_\_\_\_\_

Phone Number \_\_\_\_\_ Fax Number \_\_\_\_\_ E-Mail \_\_\_\_\_

Federal Employer ID No. \_\_\_\_\_

Acting as subcontractor for \_\_\_\_\_

*Although EDW will reimburse providers according to the Reimbursement Fee Schedule (Attachment C), for CDC reporting purposes we must know **the subcontractor's customary charge** for each of the following. If you will not directly provide that service please indicate in the appropriate blanks.*

**OFFICE VISITS**

|             |   |          |
|-------------|---|----------|
| 99201 ..... | New patient visit – 10 minutes face-to-face .....         | \$ _____ |
| 99202 ..... | New patient visit – 20 minutes face-to-face .....         | \$ _____ |
| 99203 ..... | New patient visit – 30 minutes face-to-face .....         | \$ _____ |
| 99211 ..... | Established patient visit – 5 minutes face-to-face .....  | \$ _____ |
| 99212 ..... | Established patient visit – 10 minutes face-to-face ..... | \$ _____ |
| 99213 ..... | Established patient visit – 15 minutes face-to-face ..... | \$ _____ |
| 99214 ..... | Established patient visit – 25 minutes face-to-face ..... | \$ _____ |
| 99241 ..... | Consultation – 15 minutes face-to-face .....              | \$ _____ |
| 99242 ..... | Consultation – 30 minutes face-to-face .....              | \$ _____ |
| 99243 ..... | Consultation – 45 minutes face-to-face .....              | \$ _____ |

**BREAST**

|             |                                       |          |
|-------------|---------------------------------------|----------|
| 77057 ..... | Screening mammogram .....             | \$ _____ |
| 77057TC ... | Technical component .....             | \$ _____ |
| 77057PC ... | Professional component .....          | \$ _____ |
| 77055 ..... | Diagnostic unilateral mammogram ..... | \$ _____ |
| 77055TC ... | Technical component .....             | \$ _____ |
| 77055PC ... | Professional component .....          | \$ _____ |
| 77056 ..... | Diagnostic bilateral mammogram .....  | \$ _____ |
| 77056TC ... | Technical component .....             | \$ _____ |
| 77056PC ... | Professional component .....          | \$ _____ |
| 76645 ..... | Diagnostic ultrasound .....           | \$ _____ |
| 76645TC ... | Technical component .....             | \$ _____ |
| 76645PC ... | Professional component .....          | \$ _____ |

**FINE NEEDLE ASPIRATION**

|             |   |          |
|-------------|---|----------|
| 10021 ..... | Fine needle aspiration without imaging guidance .....   | \$ _____ |
| 10022 ..... | Fine needle aspiration with imaging guidance .....      | \$ _____ |
| 88172 ..... | Cytopathology, evaluation of fine needle aspirate ..... | \$ _____ |
| 88172TC ... | Technical component .....                               | \$ _____ |
| 88172PC ... | Professional component .....                            | \$ _____ |
| 88173 ..... | Interpretation of fine needle aspiration .....          | \$ _____ |
| 88173TC ... | Technical component .....                               | \$ _____ |
| 88173PC ... | Professional component .....                            | \$ _____ |

**EXCISIONAL BIOPSY**

|             |   |          |
|-------------|---|----------|
| 19100 ..... | Needle core biopsy, not using imaging guidance .....                            | \$ _____ |
| 19100FF ... | Facility fee .....  | \$ _____ |
| 19101 ..... | Open, incisional biopsy .....   | \$ _____ |
| 19101FF ... | Facility fee .....  | \$ _____ |
| 19102 ..... | Percutaneous, needle core, using imaging guidance .....                         | \$ _____ |
| 19102FF ... | Facility fee .....  | \$ _____ |
| 19103 ..... | Percutaneous, needle core, auto vacuum-assisted or rotating biopsy device ..... | \$ _____ |
| 19103FF ... | Facility fee .....  | \$ _____ |
| 19120 ..... | Excision of cyst .....  | \$ _____ |
| 19120FF ... | Facility fee .....  | \$ _____ |

**EXCISIONAL BIOPSY (continued)**

|         |  |          |
|---------|--|----------|
| 19125   | Excision of breast lesion, single                                      | \$ _____ |
| 19125FF | Facility fee   | \$ _____ |
| 19126   | Excision of breast lesion, each add=l. lesion separately identified    | \$ _____ |
| 19290   | Preoperative placement of needle localization wire                     | \$ _____ |
| 19291   | Preoperative placement of needle localization wire, each add=l. lesion | \$ _____ |
| 19295   | Image guided placement, metallic localization clip                     | \$ _____ |

**INCISIONAL BIOPSY**

|       |   |          |
|-------|---|----------|
| 19000 | Puncture aspiration of cyst of breast                   | \$ _____ |
| 19001 | Puncture aspiration of cyst of breast, each add=l. cyst | \$ _____ |

**RADIOLOGY**

|         |   |          |
|---------|---|----------|
| 77031   | Stereotactic localization guidance for breast biopsy/needle placement | \$ _____ |
| 77031TC | Technical component   | \$ _____ |
| 77031PC | Professional component  | \$ _____ |
| 77032   | Preoperative placement of needle localization wire (radiological)     | \$ _____ |
| 77032TC | Technical component   | \$ _____ |
| 77032PC | Professional component  | \$ _____ |
| 76098   | Radiological examination, surgical specimen                           | \$ _____ |
| 76098TC | Technical component   | \$ _____ |
| 76098PC | Professional component  | \$ _____ |
| 76942   | Ultrasonic guidance for needle placement                              | \$ _____ |
| 76942TC | Technical component   | \$ _____ |
| 76942PC | Professional component  | \$ _____ |

**LAB AND PATHOLOGY**

|         |   |          |
|---------|---|----------|
| 88305   | Breast biopsy interpretation  | \$ _____ |
| 88305TC | Technical component   | \$ _____ |
| 88305PC | Professional component  | \$ _____ |
| 88307   | Surgical pathology, gross & microscopic exam requiring eval of surgical margins | \$ _____ |
| 88307TC | Technical component   | \$ _____ |
| 88307PC | Professional component  | \$ _____ |
| 88331   | First tissue block, with frozen section(s), single specimen                     | \$ _____ |
| 88331TC | Technical component   | \$ _____ |
| 88331PC | Professional component  | \$ _____ |
| 88332   | Surgical pathology, gross & micro exam requiring micro eval of surgical margins | \$ _____ |
| 88332TC | Technical component   | \$ _____ |
| 88332PC | Professional component  | \$ _____ |

**CERVICAL**

|         |  |          |
|---------|--|----------|
| 88164   | Pap test   | \$ _____ |
| 88142   | Pap test, liquid-based   | \$ _____ |
| 88141   | Cytopathology, cervical or vaginal, interpretation by physician                    | \$ _____ |
| 87621   | Lab, HPV, amplified probe technique  | \$ _____ |
| 57452   | Colposcopy without biopsy  | \$ _____ |
| 57454   | Colposcopy with biopsy & endocervical curettage                                    | \$ _____ |
| 57455   | Colposcopy with biopsy   | \$ _____ |
| 57456   | Colposcopy with biopsy with endocervical curettage                                 | \$ _____ |
| 57460   | Colposcopy of the cervix w/loop electrode biopsy(s) of the cervix                  | \$ _____ |
| 57461   | Colposcopy of the cervix w/loop electrode conization of the cervix                 | \$ _____ |
| 57500   | Biopsy, single or multiple or local excision of lesion with or without fulgaration | \$ _____ |
| 57505   | Endocervical curettage (not done as part of a dilation and curettage)              | \$ _____ |
| 57520   | Conization of cervix   | \$ _____ |
| 57520FF | Facility fee   | \$ _____ |
| 57522   | Loop electrode excision  | \$ _____ |
| 57522FF | Facility fee   | \$ _____ |
| 58100   | Endometrial sampling with or w/o endocervical sampling, w/o cervical dilation      | \$ _____ |
| 88305   | Cervical biopsy interpretation   | \$ _____ |
| 88305TC | Technical component  | \$ _____ |
| 88305PC | Professional component   | \$ _____ |

**ANESTHESIA**

|         |                    |          |
|---------|--------------------|----------|
| ANESTH. | General anesthesia | \$ _____ |
|---------|--------------------|----------|