MS Assessment: Services* & Rates for WWWP
Effective 4/01/07 to 3/31/08

WWWP COORDINATOR: Case Manage Multiple Sclerosis Referrals

CPT Code	Description	Rate
N/A	Help with referrals to participating primary care provider and MS Center, case manage referrals to MS Center and to NMSS if support services are needed for MS testing.	$ 50.00 1-time per woman referred

Participating PRIMARY CARE PROVIDER: Initial MS Assessment* & Referral

CPT Code	Description	Rate
99214	Eval/Mgmt office visit – 25 min. Estab. patient, moderate-high severity	$ 86.59
99215	Eval/Mgmt office visit – 40 min. Estab. patient, high severity	$ 117.29
99203	Eval/Mgmt office visit – 30 min. New patient, moderate severity (referred by WWWP Coordinator or other WWWP provider).	$ 87.90
99204	Eval/Mgmt office visit – 45 min. New patient, mod-high severity (referred)	$ 134.28
99205	Eval/Mgmt office visit – 60 min. New patient, high severity (referred)	$ 168.80

Participating MS CENTER: Consultation & Diagnostic Testing for Multiple Sclerosis *

CPT Code	Description	Global Rate	TC Rate	26 Rate
99243	Consultation – outpat., 40 min., mod severity	$ 117.04		
99244	Consultation – outpat., 60 min., mod. severity	$ 172.64		
99245	Consultation – outpat., 80 min., high severity	$ 214.15		
99203	Eval/Mgmt visit – 30 min., New pt. mod. severity	$ 87.90		
99204	Eval/Mgmt visit – 45 min., New pt. mod-high sev.	$ 134.28		
99205	Eval/Mgmt visit – 60 min., New pt. mod-high sev.	$ 168.80		
99214	Eval/Mgmt office visit – 25 min., Est. pt. mod-high	$ 86.59		
99215	Eval/Mgmt office visit – 40 min., Est. pt. mod- high	$ 117.29		
70551	MRI brain, w/o contrast material	$ 495.20	$ 426.35	$ 68.85
70552	MRI brain, w contrast material	$ 579.39	$ 496.53	$ 82.87
70553	MRI brain, w/o & w contrast, + add'l sequences	$ 942.25	$ 832.82	$ 109.44
72141	MRI cervical spine, w/o contrast material	$ 484.03	$ 409.61	$ 74.42
72142	MRI cervical spine, w contrast material	$ 586.01	$ 496.18	$ 89.83
72156	MRI cervical spine, w/o & w contrast, add'l seq.	$ 949.40	$ 830.03	$ 119.37
72148	MRI lumbar spine, w/o contrast material	$ 512.71	$ 443.51	$ 69.20
72149	MRI lumbar spine, w contrast material	$ 579..74	$ 496.53	$ 83.21
72158	MRI lumbar spine, w/o & w contr, add'l seq.	$ 939.46	$ 830.03	$ 109.44
J2060/3360	Anti-anxiety if needed for MRI	$1.22/$ 0.78		
95930	Visual evoked potential	$ 94.22	$ 77.00	$ 17.22
95925	Somatosensory evoked potential, upper limbs	$ 78.35	$ 51.28	$ 27.07
95926	Somatosensory evoked potential, lower limbs	$ 76.66	$ 49.88	$ 26.77
92585	Auditory evoked potential, comprehensive	$ 92.49	$ 67.93	$ 24.56
62270	Spinal puncture lumbar - diagnostic	$ 147.29		
83916	CSF Oligoclonal bands	$ 28.09		
82784	CSF Gammaglobulin; IgA, IgD, IgG, IgM, each	$ 12.99		
89051	CSF cell count w differential	$ 7.70		
84155	CSF protein	$ 5.12		
82945	CSF glucose	$ 5.48		

*** MS Services:**

- MS services are limited to women enrolled in WWWP and who have a high probability of having MS.
- Only listed MS services are covered and when provided by WWWP providers participating in the new MS services.
- Non-listed procedures are <u>not covered</u> by WWWP and should be discussed with the client before they are provided.