OPTUM360™

www.optumcoding.com

The Essential RBRVS

A comprehensive listing of RBRVS values for CPT® and HCPCS codes

Contents

Introduction

Development

The Essential RBRVS incorporates the relative values produced by the Centers for Medicare and Medicaid Services (CMS) for the Medicare Physician Fee Schedule (MPFS) into a comprehensive reference of resource-based relative value scale (RBRVS) relative values.

Even though RBRVS was developed specifically for assigning reimbursement rates to Medicare services, over 75 percent of non-Medicare payers use Medicare RBRVS to establish fees or maximum allowables for physician services. This works well for those services assigned relative values by CMS for Medicare. However, because Medicare does not assign a value to all services, the MPFS has gaps. In order to create a complete RBRVS-based fee schedule, these gap services need to have relative values assigned.

The Essential RBRVS Gap Methodology

The gaps in *The Essential RBRVS* are created when the Medicare Physician Fee Schedule (MPFS) does not provide values for procedure or supply codes. The gaps are created using various methodologies depending on the code.

For most codes, gap relative values are calculated by using relative value information from the Optum Relative Value Scale and adjusted to a scale similar to the MPFS relative values (RBRVS). The Optum relative values are developed by and are proprietary to Optum. Optum relative values are assigned when Optum has an understanding of how the procedure is typically billed by the industry and how it relates to other procedures. Relative values are based on difficulty, time, work, risk, and resources. Relative values are established by Optum employees, including an Optum Medical Director, clinicians, certified procedural coders, and analysts. Optum also consults with a panel of outside physicians and dentists during the relative value development process for certain codes.

Because Optum relative values are on a different scale than RBRVS relative values, we develop ratios relating the RBRVS and Optum scales for approximately 250 code ranges (within the CPT®, HCPCS, and CDT systems). These ratios are multiplied by the Optum relative value to create the gap value. If Optum does not assign a relative value to a code, a gap value is not calculated. An example of the methodology is as follows (numbers used are for example purposes only): Procedure code 15828 is not valued in the MPFS. Optum has a relative value of 185 for this procedure code. The calculated ratio of Optum to the MPFS relative value units for the range of codes that this procedure code falls in is .292. The gap value would be 185 x .292 = 54.02.

Codes that are valued by Medicare's Clinical Lab Fee Schedule (CLAB); Durable Medical Equipment, Prosthetics/ Orthotics, & Supplies Fee Schedule (DMEPOS); or the Medicare ASP (average sale price) drug pricing files are treated differently. For these codes, the dollar values (national limit in CLAB) are used and relative values are created by dividing the dollar amounts by the MPFS national conversion factor. The CLAB, DMEPOS, and ASP files used are the most recent available at the time of printing. These files may update throughout the year.

Note: Gap relative values should not be used to calculate a Medicare reimbursement rate. In addition, the gap work relative value should not be used to calculate the outpatient prospective payment system (OPPS) rate.

Features

The Essential RBRVS is the most comprehensive resource-based relative value scale available. Here are *The Essential RBRVS* features:

- Physician services, including those not part of the MPFS.
- Clinical laboratory services.
- Level II codes, such as durable medical equipment (DME), medical and surgical supplies, and transportation.
- J codes (injectable drugs).
- Appendix A — This table provides the information necessary to determine if Medicare allows or makes adjustments to payment for the following: PC/TC component, assistant-at-surgery, multiple procedures, bilateral procedures, co-surgery or team surgery. The preop, intraop, and postop splits, the endoscopic base code, as well as the indicator identifying the level of physician supervision of diagnostic tests, if any, are also listed in appendix A. The special payment rules for each are identified at the beginning of the table.
- Appendix B — Payment for the technical component (TC) portion of a radiology service will be limited to the lesser of the Medicare Physician Fee Schedule (MPFS) amount or the Outpatient Prospective Payment System (OPPS) amount in 2016. This is referred to by CMS as

	Code	M	S	Description	Work Value	Non-Fac PE	Fac PE	Mal-practice	Non-Fac Total	Fac Total	Global	Gap	OPPS
	65710		**A**	Keratoplasty (corneal transplant); anterior lamellar	14.45	15.92	15.92	1.07	31.44	31.44	090		
	65730		**A**	penetrating (except in aphakia or pseudophakia)	16.35	17.29	17.29	1.21	34.85	34.85	090		
	65750		**A**	penetrating (in aphakia)	16.90	16.89	16.89	1.25	35.04	35.04	090		
	65755		**A**	penetrating (in pseudophakia)	16.79	16.82	16.82	1.24	34.85	34.85	090		
	65756		**A**	endothelial	16.84	15.58	15.58	1.25	33.67	33.67	090		
+	**65757**		**C**	Backbench preparation of corneal endothelial allograft prior to transplantation (List separately in addition to code for primary procedure)	0.00	0.00	0.00	0.00	0.00	0.00	ZZZ		
	65760		**N**	Keratomileusis	15.98	13.91	13.91	3.31	33.20	33.20	XXX	■	
	65765		**N**	Keratophakia	23.17	20.17	20.17	4.80	48.14	48.14	XXX	■	
	65767		**N**	Epikeratoplasty	21.57	18.78	18.78	4.47	44.82	44.82	XXX	■	
	65770		**A**	Keratoprosthesis	19.74	18.69	18.69	1.45	39.88	39.88	090		
	65771		**N**	Radial keratotomy	8.79	7.65	7.65	1.82	18.26	18.26	XXX	■	
	65772		**A**	Corneal relaxing incision for correction of surgically induced astigmatism	5.09	7.32	6.09	0.37	12.78	11.55	090		
	65775		**A**	Corneal wedge resection for correction of surgically induced astigmatism	6.91	8.24	8.24	0.50	15.65	15.65	090		
	65778		**A**	Placement of amniotic membrane on the ocular surface; without sutures	1.00	39.52	0.60	0.07	40.59	1.67	000		
	65779		**A**	single layer, sutured	2.50	31.41	1.65	0.18	34.09	4.33	000		
	65780		**A**	Ocular surface reconstruction; amniotic membrane transplantation, multiple layers	7.81	11.96	11.96	0.57	20.34	20.34	090		
	65781		**A**	limbal stem cell allograft (eg, cadaveric or living donor)	18.14	18.40	18.40	1.34	37.88	37.88	090		
	65782		**A**	limbal conjunctival autograft (includes obtaining graft)	15.43	16.10	16.10	1.15	32.68	32.68	090		
●	**65785**		**A**	Implantation of intrastromal corneal ring segments	5.39	53.80	4.91	0.75	59.94	11.05	090		
	65800		**A**	Paracentesis of anterior chamber of eye (separate procedure); with removal of aqueous	1.53	1.74	0.96	0.11	3.38	2.60	000		
	65810		**A**	with removal of vitreous and/or discission of anterior hyaloid membrane, with or without air injection	5.82	6.97	6.97	0.43	13.22	13.22	090		
	65815		**A**	with removal of blood, with or without irrigation and/or air injection	6.00	11.64	7.12	0.44	18.08	13.56	090		
⓼	**65820**		**A**	Goniotomy	8.91	11.69	11.69	0.65	21.25	21.25	090		
	65850		**A**	Trabeculotomy ab externo	11.39	11.61	11.61	0.84	23.84	23.84	090		
▲	**65855**		**A**	Trabeculoplasty by laser surgery	2.66	4.88	3.95	0.19	7.73	6.80	010		
	65860		**A**	Severing adhesions of anterior segment, laser technique (separate procedure)	3.59	4.90	3.34	0.26	8.75	7.19	090		
	65865		**A**	Severing adhesions of anterior segment of eye, incisional technique (with or without injection of air or liquid) (separate procedure); goniosynechiae	5.77	7.23	7.23	0.42	13.42	13.42	090		
	65870		**A**	anterior synechiae, except goniosynechiae	7.39	8.85	8.85	0.54	16.78	16.78	090		
	65875		**A**	posterior synechiae	7.81	9.51	9.51	0.57	17.89	17.89	090		
	65880		**A**	corneovitreal adhesions	8.36	9.82	9.82	0.62	18.80	18.80	090		
	65900		**A**	Removal of epithelial downgrowth, anterior chamber of eye	12.51	13.82	13.82	0.91	27.24	27.24	090		
	65920		**A**	Removal of implanted material, anterior segment of eye	9.99	11.67	11.67	0.74	22.40	22.40	090		
	65930		**A**	Removal of blood clot, anterior segment of eye	8.39	9.10	9.10	0.61	18.10	18.10	090		
	66020		**A**	Injection, anterior chamber of eye (separate procedure); air or liquid	1.64	3.52	1.98	0.12	5.28	3.74	010		
	66030		**A**	medication	1.30	3.29	1.75	0.10	4.69	3.15	010		

Code	M	S	Description	Work Value	Non-Fac PE	Fac PE	Mal-practice	Non-Fac Total	Fac Total	Global	Gap
88166		**X**	with manual screening and computer-assisted	0.00	0.40	0.40	0.00	0.40	0.40	XXX	■
	26		rescreening under physician supervision	0.00	0.00	0.00	0.00	0.00	0.00	XXX	■
	TC			0.00	0.40	0.40	0.00	0.40	0.40	XXX	■
88167		**X**	with manual screening and computer-assisted	0.00	0.40	0.40	0.00	0.40	0.40	XXX	■
	26		rescreening using cell selection and review	0.00	0.00	0.00	0.00	0.00	0.00	XXX	■
	TC		under physician supervision	0.00	0.40	0.40	0.00	0.40	0.40	XXX	■
88172		**A**	Cytopathology, evaluation of fine needle aspirate;	0.69	0.90	0.90	0.03	1.62	1.62	XXX	
	26	**A**	immediate cytohistologic study to determine	0.69	0.35	0.35	0.02	1.06	1.06	XXX	
	TC	**A**	adequacy for diagnosis, first evaluation episode, each site	0.00	0.55	0.55	0.01	0.56	0.56	XXX	
88173		**A**	interpretation and report	1.39	2.90	2.90	0.05	4.34	4.34	XXX	
	26	**A**		1.39	0.65	0.65	0.03	2.07	2.07	XXX	
	TC	**A**		0.00	2.25	2.25	0.02	2.27	2.27	XXX	
88174		**X**	Cytopathology, cervical or vaginal (any reporting	0.00	0.81	0.81	0.00	0.81	0.81	XXX	■
	26		system), collected in preservative fluid, automated	0.00	0.00	0.00	0.00	0.00	0.00	XXX	■
	TC		thin layer preparation; screening by automated system, under physician supervision	0.00	0.81	0.81	0.00	0.81	0.81	XXX	■
88175		**X**	with screening by automated system and	0.00	1.01	1.01	0.00	1.01	1.01	XXX	■
	26		manual rescreening or review, under	0.00	0.00	0.00	0.00	0.00	0.00	XXX	■
	TC		physician supervision	0.00	1.01	1.01	0.00	1.01	1.01	XXX	■
88177		**A**	Cytopathology, evaluation of fine needle aspirate;	0.42	0.42	0.42	0.01	0.85	0.85	ZZZ	
	26	**A**	immediate cytohistologic study to determine	0.42	0.21	0.21	0.01	0.64	0.64	ZZZ	
	TC	**A**	adequacy for diagnosis, each separate additional evaluation episode, same site (List separately in addition to code for primary procedure)	0.00	0.21	0.21	0.00	0.21	0.21	ZZZ	
88182		**A**	Flow cytometry, cell cycle or DNA analysis	0.77	2.36	2.36	0.04	3.17	3.17	XXX	
	26	**A**		0.77	0.27	0.27	0.01	1.05	1.05	XXX	
	TC	**A**		0.00	2.09	2.09	0.03	2.12	2.12	XXX	
88184		**A**	Flow cytometry, cell surface, cytoplasmic, or	0.00	2.12	2.12	0.01	2.13	2.13	XXX	
	26		nuclear marker, technical component only; first	0.00	0.00	0.00	0.00	0.00	0.00	XXX	■
	TC		marker	0.00	2.12	2.12	0.01	2.13	2.13	XXX	■
88185		**A**	each additional marker (List separately in	0.00	1.29	1.29	0.00	1.29	1.29	ZZZ	
	26		addition to code for first marker)	0.00	0.00	0.00	0.00	0.00	0.00	ZZZ	■
	TC			0.00	1.29	1.29	0.00	1.29	1.29	ZZZ	■
88187		**A**	Flow cytometry, interpretation; 2 to 8 markers	1.36	0.61	0.61	0.07	2.04	2.04	XXX	
88188		**A**	9 to 15 markers	1.69	0.81	0.81	0.09	2.59	2.59	XXX	
88189		**A**	16 or more markers	2.23	0.86	0.86	0.10	3.19	3.19	XXX	
88199		**C**	Unlisted cytopathology procedure	0.00	0.00	0.00	0.00	0.00	0.00	XXX	
	26	**C**		0.00	0.00	0.00	0.00	0.00	0.00	XXX	
	TC	**C**		0.00	0.00	0.00	0.00	0.00	0.00	XXX	
88230		**X**	Tissue culture for non-neoplastic disorders;	0.00	4.43	4.43	0.00	4.43	4.43	XXX	■
	26		lymphocyte	0.00	0.00	0.00	0.00	0.00	0.00	XXX	■
	TC			0.00	4.43	4.43	0.00	4.43	4.43	XXX	■
88233		**X**	skin or other solid tissue biopsy	0.00	5.35	5.35	0.00	5.35	5.35	XXX	■
	26			0.00	0.00	0.00	0.00	0.00	0.00	XXX	■
	TC			0.00	5.35	5.35	0.00	5.35	5.35	XXX	■
88235		**X**	amniotic fluid or chorionic villus cells	0.00	5.60	5.60	0.00	5.60	5.60	XXX	■
	26			0.00	0.00	0.00	0.00	0.00	0.00	XXX	■
	TC			0.00	5.60	5.60	0.00	5.60	5.60	XXX	■
88237		**X**	Tissue culture for neoplastic disorders; bone	0.00	4.80	4.80	0.00	4.80	4.80	XXX	■
	26		marrow, blood cells	0.00	0.00	0.00	0.00	0.00	0.00	XXX	■
	TC			0.00	4.80	4.80	0.00	4.80	4.80	XXX	■
88239		**X**	solid tumor	0.00	5.61	5.61	0.00	5.61	5.61	XXX	■
	26			0.00	0.00	0.00	0.00	0.00	0.00	XXX	■
	TC			0.00	5.61	5.61	0.00	5.61	5.61	XXX	■
88240		**X**	Cryopreservation, freezing and storage of cells,	0.00	0.38	0.38	0.00	0.38	0.38	XXX	■
	26		each cell line	0.00	0.00	0.00	0.00	0.00	0.00	XXX	■
	TC			0.00	0.38	0.38	0.00	0.38	0.38	XXX	■