

Selected Breast Cancer Services Medicare Reimbursement Rates *

These Medicare reimbursement rates are from the Center for Medicare & Medicaid Services based on national reimbursement rates. Rates in individuals states may differ from these national rates. For Medicare reimbursement rates for your location, visit the website in the asterisk notation below or contact your state's National Breast and Cervical Cancer Early Detection Program (NBCCEDP) program. These rates are only provided as guidance; they are NOT required to be used by Affiliates.

CPT Code	Description	4/6/2018	
99201	History, exam, straight forward decision-making, new patient (Non-Facility Price- used to represent clinical breast exam component)	Technical (TC)	NA
		Professional (26)	NA
		Total	\$45.36
77057	Analog, Screening Mammogram- Bilateral (Facility Price)	Technical (TC)	NA
		Professional (26)	NA
		Total	\$0.00
77055	Analog, Diagnostic Mammogram- Unilateral (Facility Price)	Technical (TC)	NA
		Professional (26)	NA
		Total	\$0.00
77056	Analog, Diagnostic Mammogram- Bilateral (Facility Price)	Technical (TC)	NA
		Professional (26)	NA
		Total	\$0.00
G0202/ 77067	Digital, Screening Mammogram- Bilateral (Facility Price)- Beginning 2017 includes CAD	Technical (TC)	\$101.52
		Professional (26)	\$38.88
		Total	\$140.40
G0206/77065	Digital, Diagnostic Mammogram- Unilateral (Facility Price)-Beginning 2017 includes CAD	Technical (TC)	\$96.12
		Professional (26)	\$41.76
		Total	\$137.88
G0204/77066	Digital, Diagnostic Mammogram- Bilateral (Facility Price)-Beginning 2017 includes CAD	Technical (TC)	\$122.76
		Professional (26)	\$51.48
		Total	\$174.24
77051/77052	Computer Aided Detection (Facility Price)	Technical (TC)	NA
		Professional (26)	NA
		Total	\$0.00
76641	Ultrasound, complete examination of breast including axilla, unilateral (Facility Price)	Technical (TC)	\$72.72
		Professional (26)	\$37.44
		Total	\$110.16
76642	Ultrasound, limited examination of breast including axilla, unilateral (Facility Price)	Technical (TC)	\$55.44
		Professional (26)	\$34.92
		Total	\$90.36
77058	Breast MRI, with and/or without contrast, unilateral (Facility Price)	Technical (TC)	\$468.71
		Professional (26)	\$83.52
		Total	\$552.23
77059	Breast MRI, with and/or without contrast, bilateral (Facility Price)	Technical (TC)	\$466.19
		Professional (26)	\$83.52
		Total	\$549.71
10021/10022	Fine needle aspiration with/without imaging (Facility Price) (Note: The Hospitals and ASC's rate is the difference between the Facility Price and non-facility price and can be paid to the facility)	Code 10021 Physician Facility price	\$71.64
		Code 10022 Physician Facility price	\$67.68
		Average physician cost	\$69.66
		Code 10021 Hospital/ACS price	\$53.28
		Code 10022 Hospital/ACS price	\$76.32
		Average Hospital/ACS cost	\$64.80
		Total	\$134.46
19081/19083/19085	Breast biopsy, with placement of localization device and imaging of biopsy specimen, percutaneous, stereotactic/MRI/ultrasound guidance (Note: The Hospitals and ASC's rate is the difference between the Facility Price and non-facility price and can be paid to the facility)	Code 19081 Physician Facility price	\$174.60
		Code 19083 Physician Facility price	\$164.16
		Code 19085 Physician Facility price	\$190.44
		Average physician cost	\$176.40
		Code 19081 Hospital/ACS price	\$532.07
		Code 19083 Hospital/ACS price	\$523.07
		Code 19085 Hospital/ACS price	\$836.27
		Average Hospital/ACS cost	\$630.47
Total	\$806.87		

*Accessed from CMS (<https://www.cms.gov/apps/physician-fee-schedule/>)