

NYS DOH - APG Significant Procedure Discounting Percentages Under APG Reimbursement
April 1, 2010

APG	APG Description	Discount Percentage	Date Added to discount list
1	PHOTOCHEMOTHERAPY	50%	4/1/2010
2	SUPERFICIAL NEEDLE BIOPSY AND ASPIRATION	50%	4/1/2010
3	LEVEL I SKIN INCISION AND DRAINAGE	50%	4/1/2010
4	LEVEL II SKIN INCISION AND DRAINAGE	50%	4/1/2010
5	NAIL PROCEDURES	50%	4/1/2010
6	LEVEL I SKIN DEBRIDEMENT AND DESTRUCTION	50%	4/1/2010
7	LEVEL II SKIN DEBRIDEMENT AND DESTRUCTION	50%	4/1/2010
8	LEVEL III SKIN DEBRIDEMENT AND DESTRUCTION	50%	4/1/2010
9	LEVEL I EXCISION AND BIOPSY OF SKIN AND SOFT TISSUE	50%	4/1/2010
10	LEVEL II EXCISION AND BIOPSY OF SKIN AND SOFT TISSUE	50%	4/1/2010
11	LEVEL III EXCISION AND BIOPSY OF SKIN AND SOFT TISSUE	50%	4/1/2010
12	LEVEL I SKIN REPAIR	50%	4/1/2010
13	LEVEL II SKIN REPAIR	50%	4/1/2010
14	LEVEL III SKIN REPAIR	50%	4/1/2010
15	LEVEL IV SKIN REPAIR	50%	4/1/2010
20	LEVEL I BREAST PROCEDURES	50%	4/1/2010
21	LEVEL II BREAST PROCEDURES	50%	4/1/2010
22	LEVEL III BREAST PROCEDURES	50%	4/1/2010
30	LEVEL I MUSCULOSKELETAL PROCEDURES EXCLUDING HAND AND FOOT	50%	4/1/2010
31	LEVEL II MUSCULOSKELETAL PROCEDURES EXCLUDING HAND AND FOOT	50%	4/1/2010
32	LEVEL III MUSCULOSKELETAL PROCEDURES EXCLUDING HAND AND FOOT	50%	4/1/2010
33	LEVEL I HAND PROCEDURES	50%	4/1/2010
34	LEVEL II HAND PROCEDURES	50%	4/1/2010
35	LEVEL I FOOT PROCEDURES	50%	4/1/2010
36	LEVEL II FOOT PROCEDURES	50%	4/1/2010
37	LEVEL I ARTHROSCOPY	50%	4/1/2010
38	LEVEL II ARTHROSCOPY	50%	4/1/2010
39	REPLACEMENT OF CAST	50%	4/1/2010
40	SPLINT, STRAPPING AND CAST REMOVAL	50%	4/1/2010
41	CLOSED TREATMENT FX & DISLOCATION OF FINGER, TOE & TRUNK	50%	4/1/2010
42	CLOSED TREATMENT FX & DISLOCATION EXC FINGER, TOE & TRUNK	50%	4/1/2010
43	OPEN OR PERCUTANEOUS TREATMENT OF FRACTURES	50%	4/1/2010
44	BONE OR JOINT MANIPULATION UNDER ANESTHESIA	50%	4/1/2010
45	BUNION PROCEDURES	50%	4/1/2010
46	LEVEL I ARTHROPLASTY	50%	4/1/2010
47	LEVEL II ARTHROPLASTY	50%	4/1/2010
48	HAND AND FOOT TENOTOMY	50%	4/1/2010
49	ARTHROCENTESIS AND LIGAMENT OR TENDON INJECTION	50%	4/1/2010
60	PULMONARY TESTS	50%	4/1/2010
61	NEEDLE AND CATHETER BIOPSY, ASPIRATION, LAVAGE AND INTUBATION	50%	4/1/2010
62	LEVEL I ENDOSCOPY OF THE UPPER AIRWAY	50%	4/1/2010
63	LEVEL II ENDOSCOPY OF THE UPPER AIRWAY	50%	4/1/2010
64	ENDOSCOPY OF THE LOWER AIRWAY	50%	4/1/2010
65	RESPIRATORY THERAPY	50%	4/1/2010
66	PULMONARY REHABILITATION	50%	4/1/2010
67	VENTILATION ASSISTANCE AND MANAGEMENT	50%	4/1/2010
80	EXERCISE TOLERANCE TESTS	50%	4/1/2010
81	ECHOCARDIOGRAPHY	50%	4/1/2010
82	CARDIAC ELECTROPHYSIOLOGIC TESTS	50%	4/1/2010
83	PLACEMENT OF TRANSVENOUS CATHETERS	50%	4/1/2010
84	DIAGNOSTIC CARDIAC CATHETERIZATION	50%	4/1/2010
85	ANGIOPLASTY AND TRANSCATHETER PROCEDURES	50%	4/1/2010
86	PACEMAKER INSERTION AND REPLACEMENT	50%	4/1/2010
87	REMOVAL AND REVISION OF PACEMAKER AND VASCULAR DEVICE	50%	4/1/2010
88	LEVEL I CARDIOTHORACIC PROCEDURES	50%	4/1/2010
89	LEVEL II CARDIOTHORACIC PROCEDURES	50%	4/1/2010
90	SECONDARY VARICOSE VEINS AND VASCULAR INJECTION	50%	4/1/2010
91	VASCULAR LIGATION AND RECONSTRUCTION	50%	4/1/2010
92	RESUSCITATION	50%	4/1/2010
93	CARDIOVERSION	50%	4/1/2010
94	CARDIAC REHABILITATION	50%	4/1/2010
95	THROMBOLYSIS	50%	4/1/2010
96	ATRIAL AND VENTRICULAR RECORDING AND PACING	50%	4/1/2010
97	AICD IMPLANT	50%	4/1/2010
110	PHARMACOTHERAPY BY EXTENDED INFUSION	50%	4/1/2010
111	PHARMACOTHERAPY EXCEPT BY EXTENDED INFUSION	50%	4/1/2010
112	PHLEBOTOMY	50%	4/1/2010
113	LEVEL I BLOOD AND BLOOD PRODUCT EXCHANGE	50%	4/1/2010
114	LEVEL II BLOOD AND BLOOD PRODUCT EXCHANGE	50%	4/1/2010
115	DEEP LYMPH STRUCTURE AND THYROID PROCEDURES	50%	4/1/2010
116	ALLERGY TESTS	50%	4/1/2010
117	HOME INFUSION	50%	4/1/2010
118	NUTRITION THERAPY	25%	4/1/2010
130	ALIMENTARY TESTS AND SIMPLE TUBE PLACEMENT	50%	4/1/2010
131	ESOPHAGEAL DILATION WITHOUT ENDOSCOPY	50%	4/1/2010
132	ANOSCOPY WITH BIOPSY AND DIAGNOSTIC PROCTOSIGMOIDOSCOPY	50%	4/1/2010
133	PROCTOSIGMOIDOSCOPY WITH EXCISION OR BIOPSY	50%	4/1/2010
134	DIAGNOSTIC UPPER GI ENDOSCOPY OR INTUBATION	50%	4/1/2010
135	THERAPEUTIC UPPER GI ENDOSCOPY OR INTUBATION	50%	4/1/2010
136	DIAGNOSTIC LOWER GASTROINTESTINAL ENDOSCOPY	50%	4/1/2010

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137	THERAPEUTIC COLONOSCOPY	50%	4/1/2010
138	ERCP AND MISCELLANEOUS GI ENDOSCOPY PROCEDURES	50%	4/1/2010
139	LEVEL I HERNIA REPAIR	50%	4/1/2010
140	LEVEL II HERNIA REPAIR	50%	4/1/2010
141	LEVEL I ANAL AND RECTAL PROCEDURES	50%	4/1/2010
142	LEVEL II ANAL AND RECTAL PROCEDURES	50%	4/1/2010
143	LEVEL I GASTROINTESTINAL PROCEDURES	50%	4/1/2010
144	LEVEL II GASTROINTESTINAL PROCEDURES	50%	4/1/2010
145	LEVEL I LAPAROSCOPY	50%	4/1/2010
146	LEVEL II LAPAROSCOPY	50%	4/1/2010
147	LEVEL III LAPAROSCOPY	50%	4/1/2010
148	LEVEL IV LAPAROSCOPY	50%	4/1/2010
160	EXTRACORPOREAL SHOCK WAVE LITHOTRIPSY	50%	4/1/2010
161	URINARY STUDIES AND PROCEDURES	50%	4/1/2010
162	URINARY CATHETERIZATION AND DILATATION	50%	4/1/2010
163	LEVEL I BLADDER AND KIDNEY PROCEDURES	50%	4/1/2010
164	LEVEL II BLADDER AND KIDNEY PROCEDURES	50%	4/1/2010
165	LEVEL III BLADDER AND KIDNEY PROCEDURES	50%	4/1/2010
166	LEVEL I URETHRA AND PROSTATE PROCEDURES	50%	4/1/2010
167	LEVEL II URETHRA AND PROSTATE PROCEDURES	50%	4/1/2010
168	HEMODIALYSIS	50%	4/1/2010
169	PERITONEAL DIALYSIS	50%	4/1/2010
180	TESTICULAR AND EPIDIDYMAL PROCEDURES	50%	4/1/2010
181	CIRCUMCISION	50%	4/1/2010
182	INSERTION OF PENILE PROSTHESIS	50%	4/1/2010
183	LEVEL I PENILE AND PROSTATE PROCEDURES	50%	4/1/2010
184	LEVEL II PENILE AND PROSTATE PROCEDURES	50%	4/1/2010
185	PROSTATE NEEDLE AND PUNCH BIOPSY	50%	4/1/2010
190	ARTIFICIAL FERTILIZATION	50%	4/1/2010
191	LEVEL I FETAL PROCEDURES	50%	4/1/2010
192	LEVEL II FETAL PROCEDURES	50%	4/1/2010
193	TREATMENT OF INCOMPLETE ABORTION	50%	4/1/2010
194	THERAPEUTIC ABORTION	50%	4/1/2010
195	VAGINAL DELIVERY	50%	4/1/2010
196	LEVEL I FEMALE REPRODUCTIVE PROCEDURES	50%	4/1/2010
197	LEVEL II FEMALE REPRODUCTIVE PROCEDURES	50%	4/1/2010
198	LEVEL III FEMALE REPRODUCTIVE PROCEDURES	50%	4/1/2010
199	DILATION AND CURETTAGE	50%	4/1/2010
200	HYSTEROSCOPY	50%	4/1/2010
201	COLPOSCOPY	50%	4/1/2010
210	EXTENDED EEG STUDIES	50%	4/1/2010
211	ELECTROENCEPHALOGRAM	50%	4/1/2010
212	ELECTROCONVULSIVE THERAPY	50%	4/1/2010
213	NERVE AND MUSCLE TESTS	50%	4/1/2010
214	NERVOUS SYSTEM INJECTIONS, STIMULATIONS OR CRANIAL TAP	50%	4/1/2010
215	LEVEL I REVISION OR REMOVAL OF NEUROLOGICAL DEVICE	50%	4/1/2010
216	LEVEL II REVISION OR REMOVAL OF NEUROLOGICAL DEVICE	50%	4/1/2010
217	LEVEL I NERVE PROCEDURES	50%	4/1/2010
218	LEVEL II NERVE PROCEDURES	50%	4/1/2010
219	SPINAL TAP	50%	4/1/2010
220	INJECTION OF ANESTHETIC AND NEUROLYTIC AGENTS	50%	4/1/2010
221	LAMINOTOMY AND LAMINECTOMY	50%	4/1/2010
222	SLEEP STUDIES	50%	4/1/2010
230	MINOR OPHTHALMOLOGICAL TESTS AND PROCEDURES	50%	4/1/2010
231	FITTING OF CONTACT LENSES	50%	4/1/2010
232	LASER EYE PROCEDURES	50%	4/1/2010
233	CATARACT PROCEDURES	50%	4/1/2010
234	LEVEL I ANTERIOR SEGMENT EYE PROCEDURES	50%	4/1/2010
235	LEVEL II ANTERIOR SEGMENT EYE PROCEDURES	50%	4/1/2010
236	LEVEL III ANTERIOR SEGMENT EYE PROCEDURES	50%	4/1/2010
237	LEVEL I POSTERIOR SEGMENT EYE PROCEDURES	50%	4/1/2010
238	LEVEL II POSTERIOR SEGMENT EYE PROCEDURES	50%	4/1/2010
239	STRABISMUS AND MUSCLE EYE PROCEDURES	50%	4/1/2010
240	LEVEL I REPAIR AND PLASTIC PROCEDURES OF EYE	50%	4/1/2010
241	LEVEL II REPAIR AND PLASTIC PROCEDURES OF EYE	50%	4/1/2010
250	COCHLEAR DEVICE IMPLANTATION	50%	4/1/2010
251	OTORHINOLARYNGOLOGIC FUNCTION TESTS	50%	4/1/2010
252	LEVEL I FACIAL AND ENT PROCEDURES	50%	4/1/2010
253	LEVEL II FACIAL AND ENT PROCEDURES	50%	4/1/2010
254	LEVEL III FACIAL AND ENT PROCEDURES	50%	4/1/2010
255	LEVEL IV FACIAL AND ENT PROCEDURES	50%	4/1/2010
256	TONSIL AND ADENOID PROCEDURES	50%	4/1/2010
257	AUDIOMETRY	25%	4/1/2010
270	OCCUPATIONAL THERAPY	25%	4/1/2010
271	PHYSICAL THERAPY	25%	4/1/2010
272	SPEECH THERAPY AND EVALUATION	25%	4/1/2010
273	MANIPULATION THERAPY	50%	4/1/2010
274	PHYSICAL THERAPY, GROUP	25%	4/1/2010
275	SPEECH THERAPY & EVALUATION, GROUP	25%	4/1/2010
280	VASCULAR RADIOLOGY EXCEPT VENOGRAPHY OF EXTREMITY	50%	4/1/2010
281	MAGNETIC RESONANCE ANGIOGRAPHY - HEAD AND/OR NECK	50%	4/1/2010
282	MAGNETIC RESONANCE ANGIOGRAPHY - CHEST	50%	4/1/2010
283	MAGNETIC RESONANCE ANGIOGRAPHY - OTHER SITES	50%	4/1/2010

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284	MYELOGRAPHY	50%	4/1/2010
285	MISCELLANEOUS RADIOLOGICAL PROCEDURES WITH CONTRAST	50%	4/1/2010
286	MAMMOGRAPHY	50%	4/1/2010
287	DIGESTIVE RADIOLOGY	50%	4/1/2010
288	DIAGNOSTIC ULTRASOUND EXCEPT OBS & VAS LE	50%	4/1/2010
289	VASCULAR DIAGNOSTIC ULTRASOUND OF LOWER EXTREMITIES	50%	4/1/2010
290	PET SCANS	50%	4/1/2010
291	BONE DENSITOMETRY	50%	4/1/2010
292	MRI- ABDOMEN	50%	4/1/2010
293	MRI- JOINTS	50%	4/1/2010
294	MRI- BACK	50%	4/1/2010
295	MRI- CHEST	50%	4/1/2010
296	MRI- OTHER	50%	4/1/2010
297	MRI- BRAIN	50%	4/1/2010
298	CAT SCAN BACK	50%	4/1/2010
299	CAT SCAN - BRAIN	50%	4/1/2010
300	CAT SCAN - ABDOMEN	50%	4/1/2010
301	CAT SCAN - OTHER	50%	4/1/2010
302	ANGIOGRAPHY, OTHER	50%	4/1/2010
303	ANGIOGRAPHY, CEREBRAL	50%	4/1/2010
310	DEVELOPMENTAL & NEUROPSYCHOLOGICAL TESTING	10%	4/1/2010
311	FULL DAY PARTIAL HOSPITALIZATION FOR SUBSTANCE ABUSE	50%	4/1/2010
312	FULL DAY PARTIAL HOSPITALIZATION FOR MENTAL ILLNESS	10%	4/1/2010
314	HALF DAY PARTIAL HOSPITALIZATION FOR MENTAL ILLNESS	50%	4/1/2010
315	COUNSELLING OR INDIVIDUAL BRIEF PSYCHOTHERAPY	10%	4/1/2010
316	INDIVIDUAL COMPREHENSIVE PSYCHOTHERAPY	10%	4/1/2010
317	FAMILY PSYCHOTHERAPY	10%	4/1/2010
318	GROUP PSYCHOTHERAPY	10%	4/1/2010
319	ACTIVITY THERAPY	50%	4/1/2010
320	CASE MANAGEMENT & TREATMENT PLAN DEVELOPMENT - MH/SA	10%	4/1/2010
321	CRISIS INTERVENTION	10%	4/1/2010
322	MEDICATION ADMINISTRATION & OBSERVATION	10%	4/1/2010
323	MENTAL HYGIENE ASSESSMENT	10%	4/1/2010
324	MENTAL HEALTH SCREENING & BRIEF ASSESSMENT	0%	4/1/2010
330	LEVEL I DIAGNOSTIC NUCLEAR MEDICINE	50%	4/1/2010
331	LEVEL II DIAGNOSTIC NUCLEAR MEDICINE	50%	4/1/2010
332	LEVEL III DIAGNOSTIC NUCLEAR MEDICINE	50%	4/1/2010
340	THERAPEUTIC NUCLEAR MEDICINE	50%	4/1/2010
341	RADIATION THERAPY AND HYPERTHERMIA	50%	4/1/2010
342	AFTERLOADING BRACHYTHERAPY	50%	4/1/2010
343	RADIATION TREATMENT DELIVERY	50%	4/1/2010
344	INSTILLATION OF RADIOELEMENT SOLUTIONS	50%	4/1/2010
345	HYPERTHERMIC THERAPIES	50%	4/1/2010
346	RADIOSURGERY	50%	4/1/2010
347	HIGH ENERGY NEUTRON RADIATION TREATMENT DELIVERY	50%	4/1/2010
348	PROTON TREATMENT DELIVERY	50%	4/1/2010
350	LEVEL I ADJUNCTIVE GENERAL DENTAL SERVICES	50%	4/1/2010
351	LEVEL II ADJUNCTIVE GENERAL DENTAL SERVICES	50%	4/1/2010
352	PERIODONTICS	50%	4/1/2010
353	LEVEL I PROSTHODONTICS, FIXED	50%	4/1/2010
354	LEVEL II PROSTHODONTICS, FIXED	50%	4/1/2010
355	LEVEL III PROSTHODONTICS, FIXED	50%	4/1/2010
356	LEVEL I PROSTHODONTICS, REMOVABLE	50%	4/1/2010
357	LEVEL II PROSTHODONTICS, REMOVABLE	50%	4/1/2010
358	LEVEL III PROSTHODONTICS, REMOVABLE	50%	4/1/2010
359	LEVEL I MAXILLOFACIAL PROSTHETICS	50%	4/1/2010
360	LEVEL II MAXILLOFACIAL PROSTHETICS	50%	4/1/2010
361	LEVEL I DENTAL RESTORATIONS	50%	4/1/2010
362	LEVEL II DENTAL RESTORATIONS	50%	4/1/2010
363	LEVEL III DENTAL RESTORATION	50%	4/1/2010
364	LEVEL I ENDODONTICS	50%	4/1/2010
365	LEVEL II ENDODONTICS	50%	4/1/2010
366	LEVEL III ENDODONTICS	50%	4/1/2010
367	LEVEL I ORAL AND MAXILLOFACIAL SURGERY	50%	4/1/2010
368	LEVEL II ORAL AND MAXILLOFACIAL SURGERY	50%	4/1/2010
369	LEVEL III ORAL AND MAXILLOFACIAL SURGERY	50%	4/1/2010
370	LEVEL IV ORAL AND MAXILLOFACIAL SURGERY	50%	4/1/2010
371	ORTHODONTICS	50%	4/1/2010
372	SEALANT	50%	4/1/2010
373	LEVEL I DENTAL FILM	50%	4/1/2010
374	LEVEL II DENTAL FILM	50%	4/1/2010
375	DENTAL ANESTHESIA	50%	4/1/2010
376	DIAGNOSTIC DENTAL PROCEDURES	50%	4/1/2010
377	PREVENTIVE DENTAL PROCEDURES	50%	4/1/2010