Required scalamer. Please note that coverage may vary by plan type and may not follow the listed services. These codes are updated quarterly. Additionally, these coding lists do not reflect information regarding immunizations, sectable drugs, or specialty medications and should be directed to the Pharmacy link option within the website. 1950 Therapy for contour defects Therapy for contour defects X -1951 Therapy for contour defects X -1952 Therapy for contour defects X -1954 Therapy for contour defects X -1955 Therapy for contour defects X -1956 Hair transplant punch grafts X -1957 Hair transplant punch grafts X -1958 Abrasion treatment of skin X -1959 Abrasion treatment of skin X -1959 Abrasion treatment of skin X -1959 Abrasion, lesions, single X -1959 Chemical peel, face, epiderm X -1959 Chemical peel, nonfacial X -1959 Plastic surgery, neck X -1959 Required sections and should be directed to the Pharmacy link option within the website. X -1950 Abrasion treatment of skin X -1951 Abrasion treatment of skin X -1952 Abrasion, lesion, single X -1953 Chemical peel, face, dermal X -1954 Chemical peel, nonfacial X -1959 Chemical peel, nonfacial X -	Codes		Small Employer and Individual			
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5789 Chemical peel, face, dermal X - 5792 Chemical peel, nonfacial X - 5793 Chemical peel, nonfacial X - 5819 Plastic surgery, neck X - 5820 Revision of lower eyelid - X 5821 Revision of lower eyelid - X 5822 Revision of upper eyelid - X 5823 Revision of upper eyelid - X 5824 Removal of forehead wrinkles X - 5825 Removal of neck wrinkles X - 5826 Removal of brow wrinkles X - 5828 Removal of face wrinkles X - 5829 Removal of skin wrinkles X - 5820 Removal of skin wrinkles X - 5820 Removal of skin wrinkles X - 5821 Excise excessive skin tissue X - 5822 Removal of skin wrinkles X - 5823 Excise excessive skin tissue X - 5833 Excise excessive skin tissue X - 5835 Excise excessive skin tiss	15787	Abrasion, lesions, add-on	Х	-		
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5823 Revision of upper eyelid - X 5824 Removal of forehead wrinkles X - 5825 Removal of neck wrinkles X - 5826 Removal of brow wrinkles X - 5828 Removal of face wrinkles X - 5829 Removal of skin wrinkles X - 5832 Excise excessive skin tissue X - 5833 Excise excessive skin tissue X - 5834 Excise excessive skin tissue X - 5835 Excise excessive skin tissue X - 5836 Excise excessive skin tissue X -	15821	Revision of lower eyelid	-	Х		
5824 Removal of forehead wrinkles X - 5825 Removal of neck wrinkles X - 5826 Removal of brow wrinkles X - 5828 Removal of face wrinkles X - 5829 Removal of skin wrinkles X - 5832 Excise excessive skin tissue X - 5833 Excise excessive skin tissue X - 5834 Excise excessive skin tissue X - 5835 Excise excessive skin tissue X - 5836 Excise excessive skin tissue X -	15822	Revision of upper eyelid	-	Χ		
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5826 Removal of brow wrinkles X - 5828 Removal of face wrinkles X - 5829 Removal of skin wrinkles X - 5832 Excise excessive skin tissue X - 5833 Excise excessive skin tissue X - 5834 Excise excessive skin tissue X - 5835 Excise excessive skin tissue X - 5836 Excise excessive skin tissue X -	15824	Removal of forehead wrinkles	Х	-		
5828 Removal of face wrinkles X - 5829 Removal of skin wrinkles X - 5832 Excise excessive skin tissue X - 5833 Excise excessive skin tissue X - 5834 Excise excessive skin tissue X - 5835 Excise excessive skin tissue X - 5836 Excise excessive skin tissue X -	15825	Removal of neck wrinkles	Х	-		
5829 Removal of skin wrinkles X - 5832 Excise excessive skin tissue X - 5833 Excise excessive skin tissue X - 5834 Excise excessive skin tissue X - 5835 Excise excessive skin tissue X - 5836 Excise excessive skin tissue X -	15826	Removal of brow wrinkles	Х	-		
5832 Excise excessive skin tissue X - 5833 Excise excessive skin tissue X - 5834 Excise excessive skin tissue X - 5835 Excise excessive skin tissue X - 5836 Excise excessive skin tissue X -	15828	Removal of face wrinkles	Х	-		
5833 Excise excessive skin tissue X - 5834 Excise excessive skin tissue X - 5835 Excise excessive skin tissue X - 5836 Excise excessive skin tissue X -	15829	Removal of skin wrinkles	Х	-		
5834 Excise excessive skin tissue X - 5835 Excise excessive skin tissue X - 5836 Excise excessive skin tissue X -	15832	Excise excessive skin tissue	Х	-		
5835 Excise excessive skin tissue X - 5836 Excise excessive skin tissue X -	15833	Excise excessive skin tissue	Х	-		
5836 Excise excessive skin tissue X -	15834	Excise excessive skin tissue	Х			
	15835	Excise excessive skin tissue	Х	-		
5837 Excise excessive skin tissue X -	15836	Excise excessive skin tissue	Х	-		
	15837	Excise excessive skin tissue	X	-		

^{*}Preauth needed after certain number of visits. Limit depends on plan/provider type.

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	Description	Small Employer and Individual		
Codes		Not Covered	Preauthorization Required	
	Please note that coverage may vary by plan type and may not follow the listed services. These codes are updated quarterly. Additionally, these coding lists do not re lrugs, or specialty medications and should be directed to the Pharmacy link option within the website.	flect information re		
15838	Excise excessive skin tissue	Х	-	
15845	Skin and muscle repair, face	Х	-	
15847	Excision, excessive skin and subcutaneous tissue (includes lipectomy), abdomen (eg, abdominoplasty) (includes umbilical	Х	-	
15850	Removal of sutures	Х	-	
15876	Suction assisted lipectomy	Х	-	
15877	Suction assisted lipectomy	Х	-	
15878	Suction assisted lipectomy	Х	-	
15879	Suction assisted lipectomy	Х	-	
17360	Skin peel therapy	X	-	
17380	Hair removal by electrolysis	Х	-	
19105	Ablation, cryosurgical, of fibroadenoma, including ultrasound guidance, each fibroadenoma	Х	-	
19355	Correct inverted nipple(s)	Х	-	
20930	Allograft, morselized, or placement of osteopromotive material, for spine surgery only (list separately in addition to code for primary procedure)	Х	-	
20936	Spinal bone autograft	Х	-	
20985	Computer-assisted surgical navigational procedure for musculoskeletal procedures, image-less (list separately in additio	Х	-	
21084	Prepare face/oral prosthesis	Х	-	
	Interdental fixation	Х	-	
21120	Reconstruction of chin	Х	-	
21121	Reconstruction of chin	Х	-	
21122	Reconstruction of chin	Х	-	
21123	Reconstruction of chin	Х	-	
21280	Revision of eyelid	-	Х	
	Revision of eyelid	-	Х	
21295	Revision of jaw muscle/bone	Х	-	
21296	Revision of jaw muscle/bone	Х	-	
21497	Interdental wiring	Х	-	
22505	Manipulation of spine	Х	-	
22510	Perq cervicothoracic inject	-	Х	
22511	Perg lumbosacral injection	-	Х	

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		Small Emp	Small Employer and Individual		
Codes	Description	Not Covered	Preauthorization Required		
	Please note that coverage may vary by plan type and may not follow the listed services. These codes are updated quarterly. Additionally, these coding lists do not rerugs, or specialty medications and should be directed to the Pharmacy link option within the website.	flect information re	garding immunizations,		
22512	Vertebroplasty addl inject	-	Х		
22513	Perq vertebral augmentation	-	Х		
22514	Perq vertebral augmentation	-	Χ		
22515	Perq vertebral augmentation	-	Х		
2526	Percutaneous intradiscal electrothermal annuloplasty, unilateral or bilateral including fluoroscopic guidance; single le	Х	-		
2527	Percutaneous intradiscal electrothermal annuloplasty, unilateral or bilateral including fluoroscopic guidance; one or mo	Х	-		
2533	Arthrodesis, lateral extracavitary technique, including minimal diskectomy to prepare interspace; lumbar	-	Х		
	Neck spine fuse&remove	-	Х		
2552	Neck spine fuse&remove addl	-	Х		
2554	Neck spine fusion	-	X		
2558	Lumbar spine fusion	-	X		
2586	Prescrl fuse /w instr I5/1	Х	-		
2600	Neck spine fusion	-	X		
	arthrodesis, posterior or posterolateral technique, single interspace; thoracic (with lateral transverse technique, when performed)	-	Х		
	Arthrodesis, posterior or posterolateral technique, single level; lumbar (with lateral transverse technique, when performed)	-	Х		
2614	Spine fusion, extra segment	-	Х		
2630	Lumbar spine fusion	-	Х		
2632	Spine fusion, extra segment	-	Х		
	Arthrodesis, combined posterior or posterolateral technique with posterior interbody technique including laminectomy and/or discectomy sufficient to prepare interspace(other t	-	Х		
	Fusion of spine	-	Х		
2802	Fusion of spine	-	Х		
	Fusion of spine	-	Х		
2836	Anterior thoracic vertebral body tethering, including thoracoscopy	Х	-		
2837	Anterior thoracic vertebral body tethering, including thoracoscopy	Х	-		
2838	Anterior thoracic vertebral body tethering, including thoracoscopy	Х	-		
	Total disc arthroplasty (artificial disc), anterior approach, including discectomy with end plate preparation (includes	-	Х		

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	Description	Small Employer and Individual	
Codes		Not Covered	Preauthorization Required
	Please note that coverage may vary by plan type and may not follow the listed services. These codes are updated quarterly. Additionally, these coding lists do not regrey, or specialty medications and should be directed to the Pharmacy link option within the website.	eflect information re	garding immunizations,
22857	Total disc arthroplasty (artificial disc), anterior approach, including discectomy to prepare interspace (other than for	-	Х
22858	Second level cer diskectomy	-	Х
22860	Total disc arthroplasty (artificial disc), anterior approach, including discectomy to prepare interspace (other than for decompression); second interspace, lumbar (list separately in addition to code for primary procedure)	-	Х
22867	Insertion of interlaminar/interspinous process stabilization/distraction device, without fusion, including image guidance when performed, with open decompression, lumbar; sing	X	-
22868	Insertion of interlaminar/interspinous process stabilization/distraction device, without fusion, including image guidance when performed, with open decompression, lumbar; seco	Х	-
22869	Insertion of interlaminar/interspinous process stabilization/distraction device, without open decompression or fusion, including image guidance when performed, lumbar; single	Х	-
22870	Insertion of interlaminar/interspinous process stabilization/distraction device, without open decompression or fusion, including image guidance when performed, lumbar; second	Х	-
23472	Reconstruct shoulder joint	-	Х
24357	Tenotomy, elbow, lateral or medial (eg, epicondylitis, tennis elbow, golfer's elbow); percutaneous	Х	-
7130	Total hip replacement	-	X
7278	Arthrodesis, sacroiliac joint, percutaneous, with image guidance, including placement of intra-articular implant(s)	Х	-
7447	Total knee replacement	-	Х
7702	Reconstruct ankle joint	-	Х
28890	Extracorporeal shock wave, high energy, performed by a physician, requiring anesthesia other than local, including ultra	Х	-
30400	Reconstruction of nose	Х	-
30410	Reconstruction of nose	Х	-
0430	Revision of nose	Х	-
0435	Revision of nose	Х	-
0450	Revision of nose	Х	-
0468	Repair of nasal valve collapse with subcutaneous/submucosal lateral wall implant(s)	Х	-
30469	Repair of nasal valve collapse with low energy, temperature-controlled (ie, radiofrequency) subcutaneous/submucosal remodeling	х	-
30620	Intranasal reconstruction	Х	-

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	Description	Small Employer and Individual		
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32491	Removal of lung, other than pneumonectomy; with resection-plication of emphysematous lung(s) (bullous or non-	Х	_	
	bullous) for lung volume reduction, sternal split or transthoracic	^	-	
32701	Thorax stereo rad target w/tx	-	Χ	
	Donor pneumonectomy	-	Χ	
	Lung transplant, single	-	Χ	
32852	Lung transplant with bypass	-	Χ	
32853	Lung transplant, double	-	Χ	
32854	Lung transplant with bypass	-	Χ	
32855	Backbench standard preparation of cadaver donor lung allograft; unilateral	-	Χ	
32856	Backbench standard preparation of cadaver donor lung allograft; bilateral	-	Х	
32994	Ablation therapy for reduction or eradication of 1 or more pulm tumor(s)	Х	-	
33140	Heart revascularize (tmr)	Х	-	
33141	Heart tmr w/other procedure	Х	-	
33542	Removal of heart lesion	Х	-	
33930	Removal of donor heart/lung	-	Х	
33933	Backbench standard preparation of cadaver donor heart/lung allograft	-	X	
33935	Transplantation, heart/lung	-	Х	
33940	Removal of donor heart	- 1	Х	
33944	Backbench standard preparation of cadaver donor heart allograft	- 1	Х	
	Transplantation of heart	- 1	Х	
34839	Plnning pt spec fenest graft	Х	-	
	Place needle in vein	Х	-	
36416	Collection of capillary blood specimen (eg, finger, heel, ear stick)	Х	-	
	Inj of non-comp foam sclerosant w/ultrasound comp maneuvers, single incompetent vein	Х	-	
36466	Inj of non-comp foam sclerosant w/ultrasound comp maneuvers, mult incompetent veins	Х	-	
	Injection(s), spider veins	Х	-	
36470	Injection therapy of vein	Х	-	
	Injection therapy of veins	Х	-	
36475		'		
	Endovenous ablation therapy of incompetent vein, extremity, percutaneous, radiofrequency; first vein treated	-	X	
36476	Endovenous ablation therapy incompetent vein, extremity, percut, radiofreq; 2nd & subsequent veins, same extrem, sep sites	-	Х	

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	Description	Small Employer and Individual		
Codes		Not Covered	Preauthorization Required	
	Please note that coverage may vary by plan type and may not follow the listed services. These codes are updated quarterly. Additionally, these coding lists do not rerugs, or specialty medications and should be directed to the Pharmacy link option within the website.	eflect information re	garding immunizations,	
36478	Endovenous ablation therapy of incompetent vein, extremity, percutaneous, laser; first vein treated	-	Х	
36479	Endovenous ablation therapy incompetent vein, extremity, percutaneous, laser; 2nd & subseq veins, same extrem, sep sites	-	Х	
36482	Endovenous ablation therapy of incompetent vein, extremity, percutaneous; first vein treated	-	Х	
36483	Endovenous ablation therapy of incompetent vein, extremity, percutaneous; sub vein treated	-	Х	
37186	Secondary percutaneous transluminal thrombectomy (eg, nonprimary mechanical, snare basket, suction technique), noncorona	Х	-	
37500	Vascular endoscopy, surgical, with ligation of perforator veins, subfascial (seps)	Х	-	
	Revise leg vein	-	Х	
37718	Ligation, division, and stripping, short saphenous vein	-	Х	
37722	Ligation, division, and stripping, long (greater) saphenous veins from saphenofemoral junction to knee or below	-	Х	
37735	Removal of leg veins/lesion	-	Х	
37760	Ligation of perforator veins, subfascial, radical (linton type), including skin graft, when performed, open,1 leg	-	Х	
37761	Ligation of perforator vein(s), subfascial, open, including ultrasound guidance, when performed, 1 leg	-	Х	
37765	Stab phlebectomy of varicose veins, one extremity; 10-20 stab incisions	Х	-	
37766	Stab phlebectomy of varicose veins, one extremity; more than 20 incisions	Х	-	
37780	Revision of leg vein	-	Х	
37785	Revise secondary varicosity	-	Х	
38204	Management of recipient hematopoietic progenitor cell donor search and cell acquisition	Х	-	
38205	Blood-derived hematopoietic progenitor cell harvesting for transplantation, per collection; allogenic	-	Χ	
38206	Blood-derived hematopoietic progenitor cell harvesting for transplantation, per collection; autologous	-	Χ	
38207	Transplant preparation of hematopoietic progenitor cells; cryopreservation and storage	-	Χ	
38208	Transplant preparation of hematopoietic progenitor cells; thawing of previously frozen harvest, without washing, per donor	-	X	
38209	Transplant preparation of hematopoietic progenitor cells; thawing of previously frozen harvest, with washing, per donor	-	Х	
38210	Transplant preparation of hematopoietic progenitor cells; specific cell depletion within harvest, t-cell depletion	-	Х	
38211	Transplant preparation of hematopoietic progenitor cells; tumor cell depletion	-	Х	
38212	Transplant preparation of hematopoietic progenitor cells; red blood cell removal	-	Х	

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38213	Transplant preparation of hematopoietic progenitor cells; platelet depletion	-	Х
38214	Transplant preparation of hematopoietic progenitor cells; plasma (volume) depletion	-	Х
38215	Transplant preparation of hematopoietic progenitor cells; cell concentration in plasma, mononuclear, or buffy coat layer	-	Х
38230	Bone marrow harvesting for transplantation; allogenic	-	Х
38232	Bone marrow harvesting for transplantation; autologous	-	Χ
38240	Bone marrow/stem transplant	-	Χ
38241	Bone marrow/stem transplant	-	Χ
38242	Bone marrow or blood-derived peripheral stem cell transplantation; allogenic donor lymphocyte infusions	-	X
41512	Tongue base suspension, permanent suture technique	Х	-
41530	Submucosal ablation of the tongue base, radiofrequency, one or more sites, per session	Х	-
41821	Excision of gum flap	Х	-
41822	Excision of gum lesion	Х	-
41823	Excision of gum lesion	Х	-
41825	Excision of gum lesion	Х	-
41826	Excision of gum lesion	Х	-
41827	Excision of gum lesion	Х	-
41828	Excision of gum lesion	Х	-
41830	Removal of gum tissue	Х	-
41850	Treatment of gum lesion	Х	-
41870	Gum graft	Х	-
41872	Repair gum	Х	-
41874	Repair tooth socket	Х	-
42820	Remove tonsils and adenoids	-	Χ
42821	Remove tonsils and adenoids	-	Χ
42825	Removal of tonsils	-	Χ
42826	Removal of tonsils	-	Χ
42830	Removal of adenoids	-	Χ
42831	Removal of adenoids	-	Χ
42835	Removal of adenoids	-	Х
12836	Removal of adenoids	-	X
43206	Esoph optical endomicroscopy	Х	-

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43252	Upper gi optical endomicrscopy	Х	-	
43290	Esophagogastroduodenoscopy, flexible, transoral; with deployment of intragastric bariatric balloon	Х	-	
43644	Laparoscopy, surg, gastric restrictive procedure; w gastric bypass and roux-en-y gastroenterostomy (roux limb <= 150 cm)	-	Х	
43645	Laparoscopy, surgical, gastric restrictive procedure; with gastric bypass and small intestine reconstruction	-	Х	
43770	Laparoscopy, surgical, gastric restrictive procedure; placement of adjustable gastric band (gastric band and subcutaneou	Х	-	
43771	Laparoscopy, surgical, gastric restrictive procedure; revision of adjustable gastric band component only	Х	-	
43772	Laparoscopy, surgical, gastric restrictive procedure; removal of adjustable gastric band component only	Х	-	
43773	Laparoscopy, surgical, gastric restrictive procedure; removal and replacement of adjustable gastric band component only	Х	-	
43774	Laparoscopy, surgical, gastric restrictive procedure; removal of adjustable gastric band and subcutaneous port component	-	Х	
43775	Laparoscopy, surgical, gastric restrictive procedure; longitudinal gastrectomy (ie, sleeve gastrectomy)	-	Х	
43842	Gastroplasty for obesity	Х	-	
43843	Gastroplasty for obesity	Х	-	
43845	Gastric revision for obesity	-	Х	
43846	Gastric bypass for obesity	-	Х	
43847	Gastric bypass for obesity	Х	-	
43848	Revision gastroplasty	-	Х	
43860	Revise stomach-bowel fusion	-	Х	
43865	Revise stomach-bowel fusion	-	Х	
43886	Gastric restrictive procedure, open; revision of subcutaneous port component only	Х	-	
43887	Gastric restrictive procedure, open; removal of subcutaneous port component only	Х	-	
43888	Gastric restrictive procedure, open; removal and replacement of subcutaneous port component only	Х	-	
44132	Enterectomy, cadaver donor	Х	-	
44133	Enterectomy, live donor	X	-	
44135	Intestine transplnt, cadaver	-	Χ	
	Intestine transplant, live	-	Χ	
	Removal of transplanted intestinal allograft, complete	-	Χ	
	Backbench standard preparation of cadaver or living donor intestine allograft	Х	-	
44720	Backbench reconstruction of cadaver or living donor intestine allograft; venous anastomosis, each	X	-	

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sclaimer: ectable d	Please note that coverage may vary by plan type and may not follow the listed services. These codes are updated quarterly. Additionally, these coding lists do not rerugs, or specialty medications and should be directed to the Pharmacy link option within the website.	flect information re	
4721	Backbench reconstruction of cadaver or living donor intestine allograft; arterial anastomosis, each	Х	-
16601	Diagnostic anoscopy	Х	-
6607	Diagnostic anoscopy & biopsy	Х	-
6930	Destruction of internal hemorrhoid(s) by thermal energy (eg, infrared coagulation, cautery, radiofrequency)	×	-
7133	Removal of donor liver	-	Х
7135	Transplantation of liver	-	Χ
7140	Donor hepatectomy, with preparation and maintenance of allograft, living donor; left lateral segment only	-	Χ
7141	Donor hepatectomy, with preparation and maintenance of allograft, living donor; total left lobectomy	-	Х
7142	Donor hepatectomy, with preparation and maintenance of allograft, living donor; total right lobectomy	-	Χ
7143	Backbench standard preparation of cadaver donor whole liver graft; without trisegment or lobe split	-	Χ
7144	Backbench standard preparation of cadaver donor whole liver graft; w trisegment split of graft into two partial grafts	-	Х
7145	Backbench standard preparation of cadaver donor whole liver graft; with lobe split of graft into two partial grafts	-	Х
7146	Backbench reconstruction of cadaver or living donor liver graft prior to allotransplantation; venous anastomosis, each	-	Х
7147	Backbench reconstruction of cadaver or living donor liver graft prior to allotransplantation; arterial anastomosis, each	-	Х
8550	Donor pancreatectomy	-	Х
8551	Backbench standard preparation of cadaver donor pancreas allograft	-	Χ
8552	Backbench reconstruction of cadaver donor pancreas allograft prior to transplantation, venous anastomosis, each	-	X
8554	Transpl allograft pancreas	-	Х
8556	Removal, allograft pancreas	- 1	Х
0300	Removal of donor kidney	-	Χ
0320	Removal of donor kidney	-	Х
0323	Backbench standard preparation of cadaver donor renal allograft	-	Х
0325	Backbench standard preparation of living donor renal allograft (open or laparoscopic)	-	Х
0327	Backbench reconstruction of cadaver or living donor renal allograft prior to transplantation; venous anastomosis, each	-	Х

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mer: Please note that coverage may vary by plan type and may not follow the listed services. These codes are updated quarterly. Additionally, these coding lists do not refole drugs, or specialty medications and should be directed to the Pharmacy link option within the website.	lect information re		
Backbench reconstruction of cadaver or living donor renal allograft prior to transplantation; arterial anastomosis, each	-	Х	
Backbench reconstruction of cadaver or living donor renal allograft prior to transplantation; ureteral anastomosis, each	-	Х	
40 Removal of kidney	-	X	
Transplantation of kidney	-	Х	
Transplantation of kidney	-	Х	
70 Remove transplanted kidney	-	Х	
Reimplantation of kidney	-	Х	
Removal (via snare/capture) and replacement of internally dwelling ureteral stent via percutaneous approach, including r	Х	-	
47 Laparo removal donor kidney	-	Х	
25 Hysterectomy/bladder repair	-	Х	
31 Urethroplasty with tubularization of posterior urethra and/or lower bladder for incontinence	Х	-	
14 Insertion of tandem cuff (dual cuff)	Х	-	
Transurethral rf treatment	Х	-	
70 Treatment of penis lesion	Х	-	
75 Treatment of penis lesion	Х	-	
20 Treatment of penis lesion	Х	-	
Prepare penis study	Х	-	
31 Dynamic cavernosometry	Х	-	
Penile injection	Х	-	
40 Penis study	Х	-	
Penis study	Х	-	
Removal of all components of a multi-component, inflatable penile prosthesis without replacement of prosthesis	Х	-	
08 Repair of component(s) of a multi-component, inflatable penile prosthesis	Χ	-	
Removal and replacement of all component(s) of a multi-component, inflatable penile prosthesis, same operative session	Х	-	
Removal and replacement multi-component inflatable penile prosthesis, infected field, same op sess, w irrig & debridemnt	Х	-	
15 Removal of non-inflatable or inflatable (self-contained) penile prosthesis, wo replacement of prosthesis	Χ	-	

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54416	Removal and replacement of non-inflatable or inflatable (self-contained) penile prosthesis, same operative session	Х	-	
54417	Removal and replacement of inflat/non-inflatable penile prosthesis, infected field, same op sess, w irrig & debridement	Х	-	
54660	Revision of testis	Х	-	
55400	Repair of sperm duct	Х	-	
55870	Electroejaculation	Х	-	
55880	Ablation of malignant prostate tissue, transrectal, with high intensity-focused ultrasound (hifu), including ultrasound guidance	Х	-	
55970	Sex transformation, male to female	-	Х	
55980	Sex transformation, female to male	-	Х	
57465	Computer-aided mapping of cervix uteri during colposcopy, including optical dynamic spectral imaging and algorithmic quantification of the acetowhitening effect (list separately in addition to code for primary procedure)	х	-	
58150	Total hysterectomy	-	X	
	Total hysterectomy	-	Χ	
	Partial hysterectomy	-	Χ	
58200	Extensive hysterectomy	-	Χ	
58260	Vaginal hysterectomy, for uterus 250 grams or less;	-	X	
58262	Vaginal hysterectomy, for uterus 250 grams or less; with removal of tube(s), and/or ovary(s)	-	X	
58263	Vaginal hysterectomy, for uterus 250 grams or less; with removal of tube(s), and/or ovary(s), with repair of enterocele	-	X	
58267	Vaginal hysterectomy, for uterus 250 grams or less; with colpo-urethrocystopexy (marshall-marchetti-krantz type, pereyra	-	Χ	
58270	Vaginal hysterectomy, for uterus 250 grams or less; with repair of enterocele	-	Х	
58275	Hysterectomy/revise vagina	-	Х	
58280	Hysterectomy/revise vagina	-	Х	
58290	Vaginal hysterectomy, for uterus greater than 250 grams;	-	Х	
58291	Vaginal hysterectomy, for uterus greater than 250 grams; with removal of tube(s) and/or ovary(s)	-	Х	
58292	Vaginal hysterectomy, for uterus greater than 250 grams; with removal of tube(s) and/or ovary(s), with repair of enteroc	-	Х	
58294	Vaginal hysterectomy, for uterus greater than 250 grams; with repair of enterocele	-	Х	

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58321	Artificial insemination; intra-cervical	-	Х
58322	Artificial insemination; intra-uterine	-	Χ
58323	Sperm washing for artificial insemination	-	Χ
58541	Laparoscopy, surgical, supracervical hysterectomy, for uterus 250 g or less;	-	Χ
58542	Laparoscopy, surgical, supracervical hysterectomy, for uterus 250 g or less; with removal of tube(s) and/or ovary(s)	-	Х
58543	Laparoscopy, surgical, supracervical hysterectomy, for uterus greater than 250 g;	-	Х
58544	Laparoscopy, surgical, supracervical hysterectomy, for uterus greater than 250 g; with removal of tube(s) and/or ovary(s	-	Х
58550	Laparoscopy surgical, with vaginal hysterectomy, for uterus 250 grams or less;	-	Χ
58552	Laparoscopy surgical, with vaginal hysterectomy, for uterus 250 grams or less; with removal of tube(s) and/or ovary(s)	-	Х
58553	Laparoscopy, surgical, with vaginal hysterectomy, for uterus greater than 250 grams;	-	Χ
58554	Laparoscopy, surgical, with vaginal hysterectomy, for uterus greater than 250 grams; with removal of tube(s) and/or ovar	-	Х
58565	Hysteroscopy, surgical; with bilateral fallopian tube cannulation to induce occlusion by placement of permanent implants	Х	-
58570	Laparoscopy, surgical, with total hysterectomy, for uterus 250 g or less;	-	Χ
58571	Laparoscopy, surgical, with total hysterectomy, for uterus 250 g or less; with removal of tube(s) and/or ovary(s)	-	Х
58572	Laparoscopy, surgical, with total hysterectomy, for uterus greater than 250 g;	-	Χ
58573	Laparoscopy, surgical, with total hysterectomy, for uterus greater than 250 g; with removal of tube(s) and/or ovary(s)	-	Х
58673	Laparoscopy, salpingostomy	Х	-
58750	Repair oviduct	Х	-
58770	Create new tubal opening	Х	-
58970	Retrieval of oocyte	Х	<u> </u>
58974	Transfer of embryo	Х	-
	Transfer of embryo	Х	-
	Transabdominal amnioinfusion, including ultrasound guidance	Х	-
	Fetal umbilical cord occlusion, including ultrasound guidance	Х	-
59840	Procedure associated with miscarriage or terminated pregnancy	X	-

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59841	Procedure associated with miscarriage or terminated pregnancy	Х	-	
59850	Procedure associated with miscarriage or terminated pregnancy	Х	-	
59851	Procedure associated with miscarriage or terminated pregnancy	Х	-	
59852	Procedure associated with miscarriage or terminated pregnancy	X	-	
59866	Abortion (mpr)	X	-	
61630	Balloon angioplasty, intracranial (eg, atherosclerotic stenosis), percutaneous	X	-	
61635	Transcatheter placement of intravascular stent(s), intracranial (eg, atherosclerotic stenosis), including balloon angiop	×	-	
61640	Balloon dilatation of intracranial vasospasm, percutaneous; initial vessel	Х	-	
61641	Balloon dilatation of intracranial vasospasm, percutaneous; each additional vessel in same vascular family (list separat	Х	-	
61642	Balloon dilatation of intracranial vasospasm, percutaneous; each additional vessel in different vascular family (list se	Х	-	
61736	Laser interstitial thermal therapy (litt) of lesion, intracranial, including burr hole(s), with magnetic resonance imaging guidance, when performed; single trajectory for 1 simple lesion	Х	-	
61737	Laser interstitial thermal therapy (litt) of lesion, intracranial, including burr hole(s), with magnetic resonance imaging guidance, when performed; multiple trajectories for multiple or complex lesion(s)	Х	-	
31796	Stereotactic radiosurgery (particle beam, gamma ray, or linear accelerator); 1 simple cranial lesion	-	X	
61797	Stereotactic radiosurgery (particle beam, gamma ray, or linear accelerator); each additional cranial lesion, simple (lis	-	Х	
31798	Stereotactic radiosurgery (particle beam, gamma ray, or linear accelerator); 1 complex cranial lesion	-	Х	
61799	Stereotactic radiosurgery (particle beam, gamma ray, or linear accelerator); each additional cranial lesion, complex (li	-	Х	
31800	Application of stereotactic headframe for stereotactic radiosurgery (list separately in addition to code for primary pro	-	Х	
62263	Percutaneous lysis of epidural adhesions using solution injection (eg, hypertonic saline, enzyme) or mechanical means (e	Х	-	
62264	Percutaneous lysis of epidural adhesions using solution injection (eg, hypertonic saline, enzyme) or mechanical means (e	Х	-	
62287	Decompression procedure, percutaneous, of nucleus pulposus of intervertebral disc, any method utilizing needle based technique to remove disc material under fluoroscopic imagi	Х	-	

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62380	Endoscopic decompression of spinal cord, nerve root(s), including laminotomy, partial facetectomy, foraminotomy, discectomy and/or excision of herniated intervertebral disc, 1	Х	-
63052	Laminectomy, facetectomy, or foraminotomy (unilateral or bilateral with decompression of spinal cord, cauda equina and/or nerve root[s] [eg, spinal or lateral recess stenosis]), during posterior interbody arthrodesis, lumbar; single vertebral segment (list separately in addition to code for primary procedure)	-	X
63053	Laminectomy, facetectomy, or foraminotomy (unilateral or bilateral with decompression of spinal cord, cauda equina and/or nerve root[s] [eg, spinal or lateral recess stenosis]), during posterior interbody arthrodesis, lumbar; each additional segment (list separately in addition to code for primary procedure)	-	Х
63620	Stereotactic radiosurgery (particle beam, gamma ray, or linear accelerator); 1 spinal lesion	-	Х
63621	Stereotactic radiosurgery (particle beam, gamma ray, or linear accelerator); each additional spinal lesion (list separat	-	Х
64490	Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joi	-	Х
64491	Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joi	-	Х
64492	Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joi	-	Х
64493	Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joi	-	Х
64494	Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joi	-	Х
64495	Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joi	-	Х
64505	Injection, anesthetic agent; sphenopalatine ganglion	Х	-
64582	Open implantation of hypoglossal nerve neurostimulator array, pulse generator, and distal respiratory sensor electrode or electrode array	Х	-
64583	Revision or replacement of hypoglossal nerve neurostimulator array and distal respiratory sensor electrode or electrode array, including connection to existing pulse generator	Х	-
64584	Removal of hypoglossal nerve neurostimulator array, pulse generator, and distal respiratory sensor electrode or electrode array	Х	-

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64628	Thermal destruction of intraosseous basivertebral nerve, including all imaging guidance; first 2 vertebral bodies, lumbar or sacral	-	X
64629	Thermal destruction of intraosseous basivertebral nerve, including all imaging guidance; each additional vertebral body, lumbar or sacral (list separately in addition to code for primary procedure)	-	Х
64633	Destruction by neurolytic agent, paravertebral facet joint nerve(s), with imaging guidance (fluoroscopy or ct); cervical or thoracic, single facet joint	-	Х
64634	Destruction by neurolytic agent, paravertebral facet joint nerve(s), with imaging guidance (fluoroscopy or ct); cervical or thoracic, each additional facet joint (list separat	-	Х
64635	Destruction by neurolytic agent, paravertebral facet joint nerve(s), with imaging guidance (fluoroscopy or ct); lumbar or sacral, single facet joint	-	Х
64636	Destruction by neurolytic agent, paravertebral facet joint nerve(s), with imaging guidance (fluoroscopy or ct); lumbar or sacral, each additional facet joint (list separately	-	Х
5760	Revision of cornea	Х	-
55765	Revision of cornea	Х	-
5767	Corneal tissue transplant	Х	-
55770	Revise cornea with implant	Х	-
55771	Radial keratotomy	Х	-
6762	Revision of iris	Х	-
67027	Implant eye drug system	-	X
37516	Suprachoroidal space injection of pharmacologic agent (separate procedure)	Х	-
37715	Incision of eyelid fold	Х	-
7900	Repair brow defect	-	Χ
7901	Repair eyelid defect	-	Х
7902	Repair eyelid defect	-	Χ
7903	Repair eyelid defect	-	Χ
7904	Repair eyelid defect	-	Χ
7906	Repair eyelid defect	-	Χ
	Repair eyelid defect	-	Χ
7909	Revise eyelid defect	-	Χ
	Revise eyelid defect	-	Χ
	Insertion of drug-eluting implant, including punctal dilation when performed, into lacrimal canaliculus, each	Х	-
9090	Pierce earlobes	X	-

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69300	Revise external ear	Х	-	
69710	Implantation or replacement of electromagnetic bone conduction hearing device in temporal bone	-	Χ	
69711	Removal or repair of electromagnetic bone conduction hearing device in temporal bone	-	Χ	
69714	Implant temple bone w/stimul	-	Χ	
69716	Implantation, osseointegrated implant, skull; with magnetic transcutaneous attachment to external speech processor	-	Χ	
69717	Temple bone implant revision	-	X	
69719	Revision or replacement (including removal of existing device), osseointegrated implant, skull; with magnetic transcutaneous attachment to external speech processor	-	Х	
69726	Removal, osseointegrated implant, skull; with percutaneous attachment to external speech processor	-	Х	
69727		-	Х	
	Removal, osseointegrated implant, skull; with magnetic transcutaneous attachment to external speech processor			
69728	Removal, entire osseointegrated implant, skull; with magnetic transcutaneous attachment to external speech processor, outside the mastoid and involving a bony defect greater than or equal to 100 sq mm surface area of bone deep to the outer cranial cortex	-	X	
69729	Implantation, osseointegrated implant, skull; with magnetic transcutaneous attachment to external speech processor, outside of the mastoid and resulting in removal of greater than or equal to 100 sq mm surface area of bone deep to the outer cranial cortex	-	Х	
69730	Replacement (including removal of existing device), osseointegrated implant, skull; with magnetic transcutaneous attachment to external speech processor, outside the mastoid and involving a bony defect greater than or equal to 100 sq mm surface area of bone deep to the outer cranial cortex	-	Χ	
69930	Implant cochlear device	-	Χ	
74263	Computed tomographic (ct) colonography, screening, including image postprocessing	Х	-	
76140	X-ray consultation	Х	-	
76948	Echo guide, ova aspiration	Х	-	
76977	Us bone density measure	Х	-	
77078	Computed tomography, bone mineral density study, 1 or more sites; axial skeleton (eg, hips, pelvis, spine) old code 760	Х	-	
77081	Dual-energy x-ray absorptiometry (dxa), bone density study, 1 or more sites; appendicular skeleton (peripheral) (eg, rad	Х	-	
77086	Fracture assessment via dxa	Х	-	

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77089				
	Trabecular bone score (tbs), structural condition of the bone microarchitecture; using dual x-ray absorptiometry (dxa) or other imaging data on gray-scale variogram, calculation, with interpretation and report on fracture-risk	X	-	
77090	Trabecular bone score (tbs), structural condition of the bone microarchitecture; technical preparation and transmission of data for analysis to be performed elsewhere	X	-	
77091	Trabecular bone score (tbs), structural condition of the bone microarchitecture; technical calculation only	Х	-	
77092	Trabecular bone score (tbs), structural condition of the bone microarchitecture; interpretation and report on fracture-risk only by other qualified health care professional	Х	-	
77371	Radiation treatment delivery, stereotactic radiosurgery (srs), complete course of treatment of cerebral lesion(s) consis	-	Х	
77372	Radiation treatment delivery, stereotactic radiosurgery (srs), complete course of treatment of cerebral lesion(s) consis	-	Х	
77373	Stereotactic body radiation therapy, treatment delivery, per fraction to 1 or more lesions, including image guidance, en	-	Х	
77423	High energy neutron radiation treatment delivery; 1 or more isocenter(s) with coplanar or non-coplanar geometry with blo	Х	-	
77432	Stereotactic radiation trmt	-	Х	
77435	Stereotactic body radiation therapy, treatment management, per treatment course, to one or more lesions, including image	-	Х	
77520	Proton trmt, simple w/o comp	-	Х	
77522	Proton trmt, simple w/comp	-	Х	
77523	Proton trmt, intermediate	-	Х	
77525	Proton treatment, complex	-	Χ	
78350	Bone mineral, single photon	Х	-	
80320	Alcohols	X	-	
80321	Alcohol biomarkers; 1 or 2	Х	-	
	Alcohol biomarkers; 3 or more	X	-	
	Alkaloids, not otherwise specified	Х	-	
	Amphetamines; 1 or 2	Х	-	
	Amphetamines; 3 or 4	Х	-	
	Amphetamines; 5 or more	Х	-	
80327	Anabolic steroids; 1 or 2	X	-	

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80328	Anabolic steroids; 3 or more	Х	-	
80329	Analgesics, non-opioid; 1 or 2	Х	-	
80330	Analgesics, non-opioid; 3-5	Х	-	
80331	Analgesics, non-opioid; 6 or more	Х	-	
80332	Antidepressants, serotonergic class; 1 or 2	Х	-	
80333	Antidepressants, serotonergic class; 3-5	Х	-	
80334	Antidepressants, serotonergic class; 6 or more	Х	-	
80335	Antidepressants, tricyclic and other cyclicals; 1 or 2	Х	-	
80336	Antidepressants, tricyclic and other cyclicals; 3-5	Х	-	
80337	Antidepressants, tricyclic and other cyclicals; 6 or more	Х	-	
80338	Antidepressants, not otherwise specified	Х	-	
80339	Antiepileptics, not otherwise specified; 1-3	Х	-	
80340	Antiepileptics, not otherwise specified; 4-6	Х	-	
80341	Antiepileptics, not otherwise specified; 7 or more	Х	-	
80342	Antipsychotics, not otherwise specified; 1-3	Х	-	
80343	Antipsychotics, not otherwise specified; 4-6	Х	-	
80344	Antipsychotics, not otherwise specified; 7 or more	Х	-	
80345	Barbiturates	Х	-	
80346	Benzodiazepines; 1-12	Х	-	
80347	Benzodiazepines; 13 or more	Х	-	
80348	Buprenorphine	Х	-	
80349	Cannabinoids, natural	Х	-	
80350	Cannabinoids, synthetic; 1-3	Х	-	
80351	Cannabinoids, synthetic; 4-6	Х	-	
	Cannabinoids, synthetic; 7 or more	Х	-	
80353	Cocaine	Х	-	
80354	Fentanyl	Х	-	
80355	Gabapentin, non-blood	Х	-	
	Heroin metabolite	Х	-	
80357	Ketamine and norketamine	Х	-	
80358	Methadone	Х	-	
80359	Methylenedioxyamphetamines (mda, mdea, mdma)	Х	-	

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30360	Methylphenidate	Х	-	
	Opiates, 1 or more	Х	-	
0362	Opioids and opiate analogs; 1 or 2	Х	-	
30363	Opioids and opiate analogs; 3 or 4	Х	-	
0364	Opioids and opiate analogs; 5 or more	Х	-	
0365	Oxycodone	Х	-	
0366	Pregabalin	Х	-	
0367	Propoxyphene	Х	-	
0368	Sedative hypnotics (non-benzodiazepines)	Х	-	
0369	Skeletal muscle relaxants; 1 or 2	Х	-	
0370	Skeletal muscle relaxants; 3 or more	Х	-	
0371	Stimulants, synthetic	Х	-	
0372	Tapentadol	Х	-	
0373	Tramadol	Х	-	
0374	Stereoisomer anal single drug class	Х	-	
0375	Drug(s) definitive, qual or quant nos 1-3	Х	-	
0376	Drug(s) definitive, qual or quant unlisted 4-6	Х	-	
0377	Drug(s) definitive, qual or quant nos 7 or more	Х	-	
1120	Idh1 (isocitrate dehydrogenase 1 [nadp+], soluble) (eg, glioma), common variants (eg, r132h, r132c)	-	X	
1121	Idh2 (isocitrate dehydrogenase 2 [nadp+], mitochondrial) (eg, glioma), common variants (eg, r140w, r172m)	-	Х	
1162	Brca1, brca2 (breast cancer 1 and 2) (eg, hereditary breast and ovarian cancer) gene analysis; full sequence analysis and full duplication/deletion analysis	-	Х	
1163	Brca1 (brca1, dna repair associated), brca2 (brca2, dna repair associated) (eg, hereditary breast and ovarian cancer) gene analysis; full sequence analysis	-	Х	
1164	Brca1 (brca1, dna repair associated), brca2 (brca2, dna repair associated) (eg, hereditary breast and ovarian cancer) gene analysis; full duplication/deletion analysis (ie, de	-	Х	
1165	Brca1 (brca1, dna repair associated) (eg, hereditary breast and ovarian cancer) gene analysis; full sequence analysis	-	Х	
1166	Brca1 (brca1, dna repair associated) (eg, hereditary breast and ovarian cancer) gene analysis; full duplication/deletion analysis (ie, detection of large gene rearrangements)	-	Х	

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81167	Brca2 (brca2, dna repair associated) (eg, hereditary breast and ovarian cancer) gene analysis; full duplication/deletion analysis (ie, detection of large gene rearrangements)	-	Χ	
81173	Ar (androgen receptor) (eg, spinal and bulbar muscular atrophy, kennedy disease, x chromosome inactivation) gene analysis; full gene sequence	-	Х	
81174	Ar (androgen receptor) (eg, spinal and bulbar muscular atrophy, kennedy disease, x chromosome inactivation) gene analysis; known familial variant	-	Х	
	Asxl1 (additional sex combs like 1, transcriptional regulator) (eg, myelodysplastic syndrome, myeloproliferative neoplasms, chronic myelomonocytic leukemia), gene analysis; full gene sequence	-	Х	
81176	Asxl1 (additional sex combs like 1, transcriptional regulator) (eg, myelodysplastic syndrome, myeloproliferative neoplasms, chronic myelomonocytic leukemia), gene analysis; targeted sequence analysis (eg, exon 12)	-	X	
81177	Atn1 (atrophin 1) (eg, dentatorubral-pallidoluysian atrophy) gene analysis, evaluation to detect abnormal (eg, expanded) alleles	-	Х	
81178	Atxn1 (ataxin 1) (eg, spinocerebellar ataxia) gene analysis, evaluation to detect abnormal (eg, expanded) alleles	-	Х	
81179	Atxn2 (ataxin 2) (eg, spinocerebellar ataxia) gene analysis, evaluation to detect abnormal (eg, expanded) alleles	-	Х	
81180	Atxn3 (ataxin 3) (eg, spinocerebellar ataxia, machado-joseph disease) gene analysis, evaluation to detect abnormal (eg, expanded) alleles	-	X	
81181	Atxn7 (ataxin 7) (eg, spinocerebellar ataxia) gene analysis, evaluation to detect abnormal (eg, expanded) alleles	-	Х	
81182	Atxn8os (atxn8 opposite strand [non-protein coding]) (eg, spinocerebellar ataxia) gene analysis, evaluation to detect abnormal (eg, expanded) alleles	-	Х	
81183	Atxn10 (ataxin 10) (eg, spinocerebellar ataxia) gene analysis, evaluation to detect abnormal (eg, expanded) alleles	-	Х	
81184	Cacna1a (calcium voltage-gated channel subunit alpha1 a) (eg, spinocerebellar ataxia) gene analysis; evaluation to detect abnormal (eg, expanded) alleles	-	Х	
81185	Cacna1a (calcium voltage-gated channel subunit alpha1 a) (eg, spinocerebellar ataxia) gene analysis; full gene sequence	-	Х	
81186	Cacna1a (calcium voltage-gated channel subunit alpha1 a) (eg, spinocerebellar ataxia) gene analysis; known familial variant	-	Х	

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81187	Cnbp (cchc-type zinc finger nucleic acid binding protein) (eg, myotonic dystrophy type 2) gene analysis, evaluation to detect abnormal (eg, expanded) alleles	-	Х	
81188	Cstb (cystatin b) (eg, unverricht-lundborg disease) gene analysis; evaluation to detect abnormal (eg, expanded) alleles	-	Х	
81189	Cstb (cystatin b) (eg, unverricht-lundborg disease) gene analysis; full gene sequence	- 1	Х	
	Cstb (cystatin b) (eg, unverricht-lundborg disease) gene analysis; known familial variant(s)	- 1	Х	
81191	Ntrk1 (neurotrophic receptor tyrosine kinase 1) (eg, solid tumors) translocation analysis	-	Х	
81192	Ntrk2 (neurotrophic receptor tyrosine kinase 2) (eg, solid tumors) translocation analysis	-	Х	
81193	Ntrk3 (neurotrophic receptor tyrosine kinase 3) (eg, solid tumors) translocation analysis	-	Χ	
81194	Ntrk (neurotrophic-tropomyosin receptor tyrosine kinase 1, 2, and 3) (eg, solid tumors) translocation analysis	-	Х	
81201	Apc gene analysis; full sequence	-	Χ	
81202	Apc gene analysis; known fam variants	-	Χ	
81203	Apc gene analysis; duplication/deletion variants	-	X	
81204	Ar (androgen receptor) (eg, spinal and bulbar muscular atrophy, kennedy disease, x chromosome inactivation) gene analysis; characterization of alleles (eg, expanded size or me	-	Х	
81209	Blm (bloom syndrome, recq helicase-like) (eg, bloom syndrome) gene analysis, 2281del6ins7 variant	- 1	Х	
81210	Braf (v-raf murine sarcoma viral oncogene homolog b1) (eg, colon cancer), gene analysis, v600e variant	-	X	
81212	Brca1, brca2 (breast cancer 1 and 2) (eg, hereditary breast and ovarian cancer) gene analysis; 185delag, 5385insc, 6174delt variants	-	Х	
31215	Brca1 (breast cancer 1) (eg, hereditary breast and ovarian cancer) gene analysis; known familial variant	- 1	Х	
31216	Brca2 (breast cancer 2) (eg, hereditary breast and ovarian cancer) gene analysis; full sequence analysis	-	Х	
81217	Brca2 (breast cancer 2) (eg, hereditary breast and ovarian cancer) gene analysis; known familial variant	-	X	
81218	Cebpa (ccaat/enhancer binding protein [c/ebp], alpha) (eg, acute myeloid leukemia), gene analysis, full gene sequence	-	Х	
81223	. Cftr (cystic fibrosis transmembrane conductance regulator) (eg, cystic fibrosis) gene analysis; full gene sequence	-	Х	
81225	Cyp2c19 (cytochrome p450, family 2, subfamily c, polypeptide 19) (eg, drug metabolism), gene analysis, common variants (eg, *2, *3, *4, *8, *17)	-	Х	
81226	Cyp2d6 (cytochrome p450, family 2, subfamily d, polypeptide 6) (eg, drug metabolism), gene analysis, common variants (eg, *2, *3, *4, *5, *6, *9, *10, *17, *19, *29, *35, *41,	-	Х	

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81227	Cyp2c9 (cytochrome p450, family 2, subfamily c, polypeptide 9) (eg, drug metabolism), gene analysis, common variants (eg, *2, *3, *5, *6)	-	X	
81228	Cytogenomic constitutional (genome-wide) microarray analysis; interrogation of genomic regions for copy number variants (eg, bacterial artificial chromosome [bac] or oligo-bas	-	Х	
81229	Cytogenomic constitutional (genome-wide) microarray analysis; interrogation of genomic regions for copy number and single nucleotide polymorphism (snp) variants for chromosoma	-	Х	
81230	Cyp3a4, gene analysis, common variant(s)	-	Х	
31231	Cyp3a5, gene analaysis, common variants	-	Х	
81233	Btk (bruton's tyrosine kinase) (eg, chronic lymphocytic leukemia) gene analysis, common variants (eg, c481s, c481f)	-	Х	
81234	Dmpk (dm1 protein kinase) (eg, myotonic dystrophy type 1) gene analysis; evaluation to detect abnormal (expanded) alleles	-	Х	
31235	Egfr gene analysis; common variants	-	Χ	
81236	Ezh2 (enhancer of zeste 2 polycomb repressive complex 2 subunit) (eg, myelodysplastic syndrome, myeloproliferative neoplasms) gene analysis, full gene sequence	-	Х	
81237	Ezh2 (enhancer of zeste 2 polycomb repressive complex 2 subunit) (eg, diffuse large b-cell lymphoma) gene analysis, common variant(s) (eg, codon 646)	-	Х	
81239	Dmpk (dm1 protein kinase) (eg, myotonic dystrophy type 1) gene analysis; characterization of alleles (eg, expanded size)	-	Х	
81242	Fancc (fanconi anemia, complementation group c) (eg, fanconi anemia, type c) gene analysis, common variant (eg, ivs4+4a>t)	-	Х	
81250	G6pc (glucose-6-phosphatase, catalytic subunit) (eg, glycogen storage disease, type 1a, von gierke disease) gene analysis, common variants (eg, r83c, q347x)	-	Х	
81251	Gba (glucosidase, beta, acid) (eg, gaucher disease) gene analysis, common variants (eg, n370s, 84gg, l444p, ivs2+1g>a)	-	Х	
81252	Gjb2 (gap junction protein, beta 2, 26kda, connexin 26) (eg, nonsyndromic hearing loss) gene analysis; full gene sequence	-	Х	
31254	Gjb6 gene com variants	-	Х	
81257	Hba1/hba2 (alpha globin 1 and alpha globin 2) (eg, alpha thalassemia, hb bart hydrops fetalis syndrome, hbh disease), gene analysis, for common deletions or variant (eg, south	-	Х	
81260	Ikbkap (inhibitor of kappa light polypeptide gene enhancer in b-cells, kinase complex-associated protein) (eg, familial dysautonomia) gene analysis, common variants (eg,2507+6	-	Х	

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81261	Igh@ (immunoglobulin heavy chain locus) (eg, leukemias and lymphomas, b-cell), gene rearrangement analysis to detect abnormal clonal population(s); amplified methodology (eg,	-	X	
81262	Igh@ (immunoglobulin heavy chain locus) (eg, leukemias and lymphomas, b-cell), gene rearrangement analysis to detect abnormal clonal population(s); direct probe methodology (e	-	Х	
81263	Igh@ (immunoglobulin heavy chain locus) (eg, leukemia and lymphoma, b-cell), variable region somatic mutation analysis	-	Х	
81264	Igk@ (immunoglobulin kappa light chain locus) (eg, leukemia and lymphoma, b-cell), gene rearrangement analysis, evaluation to detect abnormal clonal population(s)	-	Х	
81272	Kit (v-kit hardy-zuckerman 4 feline sarcoma viral oncogene homolog) (eg, gastrointestinal stromal tumor [gist], acute myeloid leukemia, melanoma), gene analysis, targeted sequ	-	Х	
81273	Kit (v-kit hardy-zuckerman 4 feline sarcoma viral oncogene homolog) (eg, mastocytosis), gene analysis, d816 variant(s)	-	Х	
81275	Kras (v-ki-ras2 kirsten rat sarcoma viral oncogene) (eg, carcinoma) gene analysis, variants in codons 12 and 13	-	Х	
81276	Kras (kirsten rat sarcoma viral oncogene homolog) (eg, carcinoma) gene analysis; additional variant(s) (eg, codon 61, codon 146)	-	Х	
81278	Igh@/bcl2 (t(14;18)) (eg, follicular lymphoma) translocation analysis, major breakpoint region (mbr) and minor cluster region (mcr) breakpoints, qualitative or quantitative	-	Х	
31279	Jak2 (janus kinase 2) (eg, myeloproliferative disorder) targeted sequence analysis (eg, exons 12 and 13)	-	Χ	
31284	Fxn (frataxin) (eg, friedreich ataxia) gene analysis; evaluation to detect abnormal (expanded) alleles	-	Χ	
31285	Fxn (frataxin) (eg, friedreich ataxia) gene analysis; characterization of alleles (eg, expanded size)	-	Х	
31286	Fxn (frataxin) (eg, friedreich ataxia) gene analysis; full gene sequence	-	Χ	
31287	Mgmt gene methylation anal	-	Х	
31288	Mlh1 gene methylation anal	-	Х	
31291	Mthfr (5,10-methylenetetrahydrofolate reductase) (eg, hereditary hypercoagulability) gene analysis, common variants (eg, 677t, 1298c)	Х	-	
81292	Mlh1 (mutl homolog 1, colon cancer, nonpolyposis type 2) (eg, hereditary non-polyposis colorectal cancer, lynch syndrome) gene analysis; full sequence analysis	-	Х	
81293	Mlh1 (mutl homolog 1, colon cancer, nonpolyposis type 2) (eg, hereditary non-polyposis colorectal cancer, lynch syndrome) gene analysis; known familial variants	-	Х	
31294	Mlh1 (mutl homolog 1, colon cancer, nonpolyposis type 2) (eg, hereditary non-polyposis colorectal cancer, lynch syndrome) gene analysis; duplication/deletion variants	-	Х	

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	Msh2 (muts homolog 2, colon cancer, nonpolyposis type 1) (eg, hereditary non-polyposis colorectal cancer, lynch syndrome) gene analysis; full sequence analysis	-	Х	
1296	Msh2 (muts homolog 2, colon cancer, nonpolyposis type 1) (eg, hereditary non-polyposis colorectal cancer, lynch syndrome) gene analysis; known familial variants	-	Х	
1297	Msh2 (muts homolog 2, colon cancer, nonpolyposis type 1) (eg, hereditary non-polyposis colorectal cancer, lynch syndrome) gene analysis; duplication/deletion variants	-	Х	
	Msh6 (muts homolog 6 [e. coli]) (eg, hereditary non-polyposis colorectal cancer, lynch syndrome) gene analysis; full sequence analysis	-	Х	
	Msh6 (muts homolog 6 [e. coli]) (eg, hereditary non-polyposis colorectal cancer, lynch syndrome) gene analysis; duplication/deletion variants	-	Х	
1301	Microsatellite instability analysis (eg, hereditary non-polyposis colorectal cancer, lynch syndrome) of markers for mismatch repair deficiency (eg, bat25, bat26), includes com	-	Х	
1305	Myd88 (myeloid differentiation primary response 88) (eg, waldenstrom's macroglobulinemia, lymphoplasmacytic leukemia) gene analysis, p.leu265pro (l265p) variant	-	Х	
1307	Palb2 gene full gene seq	-	Х	
1309	Pik3ca gene trgt seq alys	-	Х	
1311	Nras (neuroblastoma ras viral [v-ras] oncogene homolog) (eg, colorectal carcinoma), gene analysis, variants in exon 2 (eg, codons 12 & 13) and exon 3 (eg, codon61)	-	Х	
31312	Pabpn1 (poly[a] binding protein nuclear 1) (eg, oculopharyngeal muscular dystrophy) gene analysis, evaluation to detect abnormal (eg, expanded) alleles	-	Х	
1313	Pca3 klk3	-	Х	
	Pdgfra (platelet-derived growth factor receptor, alpha polypeptide) (eg, gastointestinal stromal tumor [gist]), gene analysis, targeted sequence analysis (eg, exons 12, 18)	-	Х	
1316				
	Pml/raralpha, (t(15;17)), (promyelocytic leukemia/retinoic acid receptor alpha) (eg, promyelocytic leukemia) translocation analysis; single breakpoint (eg, intron 3, intron 6 or exon 6), qualitative or quantitative	-	Χ	
31317	Pms2 (postmeiotic segregation increased 2 [s. cerevisiae]) (eg, hereditary non-polyposis colorectal cancer, lynch syndrome) gene analysis; full sequence analysis	-	Х	
1318	Pms2 (postmeiotic segregation increased 2 [s. cerevisiae]) (eg, hereditary non-polyposis colorectal cancer, lynch syndrome) gene analysis; known familial variants	-	Х	
1319	Pms2 (postmeiotic segregation increased 2 [s. cerevisiae]) (eg, hereditary non-polyposis colorectal cancer, lynch syndrome) gene analysis; duplication/deletion variants	-	Х	

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81320	Plcg2 (phospholipase c gamma 2) (eg, chronic lymphocytic leukemia) gene analysis, common variants (eg, r665w, s707f, l845f)	-	Х
81321	Pten gene analysis;full seq analysis	-	X
81323	Pten gene analysis; duplication/deletion variant	-	Х
81324	Pmp22 gene analysis; dup/deletion analysis	-	Х
31325	Pmp22 gene analysis; full seq analysis	-	Χ
31326	Pmp22 (peripheral myelin protein 22) gene analysis; known fam variant	-	Х
	Sept9 (septin9) (eg, colorectal cancer) methylation analysis	Х	-
	Slc01b1, gene analysis, common variant(s)	-	Х
31330	Smpd1(sphingomyelin phosphodiesterase 1, acid lysosomal) (eg, niemann-pick disease, type a) gene analysis, common variants (eg, r496l, l302p, fsp330)	-	Х
31333	Tgfbi (transforming growth factor beta-induced) (eg, corneal dystrophy) gene analysis, common variants (eg, r124h, r124c, r124l, r555w, r555q)	-	Х
31334	Runx1 (runt related transcription factor 1) (eg, acute myeloid leukemia, familial platelet disorder with associated myeloid malignancy), gene analysis, targeted sequence analysis (eg, exons 3-8)	-	Х
31338	Mpl (mpl proto-oncogene, thrombopoietin receptor) (eg, myeloproliferative disorder) gene analysis; common variants (eg, w515a, w515k, w515l, w515r)	-	Х
31339	Mpl (mpl proto-oncogene, thrombopoietin receptor) (eg, myeloproliferative disorder) gene analysis; sequence analysis, exon 10	-	Х
31340	Trb@ (t cell antigen receptor, beta) (eg, leukemia and lymphoma), gene rearrangement analysis to detect abnormal clonal population(s); using amplification methodology (eg, pol	-	Х
31341	Trb@ (t cell antigen receptor, beta) (eg, leukemia and lymphoma), gene rearrangement analysis to detect abnormal clonal population(s); using direct probe methology (eg, southe	-	Х
31342	Trg@ (t cell antigen receptor, gamma) (eg, leukemia and lymphoma), gene rearrangement analysis, evaluation to detect abnormal clonal population(s)	-	Х
31343	Ppp2r2b (protein phosphatase 2 regulatory subunit bbeta) (eg, spinocerebellar ataxia) gene analysis, evaluation to detect abnormal (eg, expanded) alleles	-	Х
31344	Tbp (tata box binding protein) (eg, spinocerebellar ataxia) gene analysis, evaluation to detect abnormal (eg, expanded) alleles	-	Х
31345	Tert (telomerase reverse transcriptase) (eg, thyroid carcinoma, glioblastoma multiforme) gene analysis, targeted sequence analysis (eg, promoter region)	-	Х

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81347	Sf3b1 (splicing factor [3b] subunit b1) (eg, myelodysplastic syndrome/acute myeloid leukemia) gene analysis, common variants (eg, a672t, e622d, l833f, r625c, r625l)	-	Χ
81348	Srsf2 (serine and arginine-rich splicing factor 2) (eg, myelodysplastic syndrome, acute myeloid leukemia) gene analysis, common variants (eg, p95h, p95l)	-	Х
81349	Cytogenomic (genome-wide) analysis for constitutional chromosomal abnormalities; interrogation of genomic regions for copy number and loss-of-heterozygosity variants, low-pass sequencing analysis	-	Х
81351	Tp53 (tumor protein 53) (eg, li-fraumeni syndrome) gene analysis; full gene sequence	-	Х
81352	Tp53 (tumor protein 53) (eg, li-fraumeni syndrome) gene analysis; targeted sequence analysis (eg, 4 oncology)	-	Х
81355	Vkorc1 (vitamin k epoxide reductase complex, subunit 1) (eg, warfarin metabolism), gene analysis, common variants (eg, -1639/3673)	-	Х
81357	U2af1 (u2 small nuclear rna auxiliary factor 1) (eg, myelodysplastic syndrome, acute myeloid leukemia) gene analysis, common variants (eg, s34f, s34y, q157r, q157p)	-	Х
81360	Zrsr2 (zinc finger ccch-type, rna binding motif and serine/arginine-rich 2) (eg, myelodysplastic syndrome, acute myeloid leukemia) gene analysis, common variant(s) (eg, e65fs, e122fs, r448fs)	-	Х
81400	Molecular pathology procedure, level 1 (eg, identification of single germline variant [eg, snp] by techniques such as restriction enzyme digestion or melt curve analysis)acadm	-	Х
81401	Molecular pathology procedure, level 2 (eg, 2-10 snps, 1 methylated variant, or 1 somatic variant [typically using nonsequencing target variant analysis], or detection of a dy	-	Х
81402	Molecular pathology procedure, level 3 (eg, >10 snps, 2-10 methylated variants, or 2-10 somatic variants [typically using non-sequencing target variant analysis], immunoglobul	-	Х
81403	Molecular pathology procedure, level 4 (eg, analysis of single exon by dna sequence analysis, analysis of >10 amplicons using multiplex pcr in 2 or more independent reactions,	-	Х
81404	Molecular pathology procedure, level 5 (eg, analysis of 2-5 exons by dna sequence analysis, mutation scanning or duplication/deletion variants of 6-10 exons, or characterizati	-	Х
81405	Molecular pathology procedure, level 6 (eg, analysis of 6-10 exons by dna sequence analysis, mutation scanning or duplication/deletion variants of 11-25 exons) cyp21a2 (cytoch	-	Х
81406	Molecular pathology procedure, level 7 (eg, analysis of 11-25 exons by dna sequence analysis, mutation scanning or duplication/deletion variants of 26-50 exons, cytogenomic ar	-	Х
81407	Molecular pathology procedure, level 8 (eg, analysis of 26-50 exons by dna sequence analysis, mutation scanning or duplication/deletion variants of >50 exons, sequence analysi	-	Х

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81408	Molecular pathology procedure, level 9 (eg, analysis of >50 exons in a single gene by dna sequence analysis) fbn1 (fibrillin 1) (eg, marfan syndrome), full gene sequence nf1 (-	Χ	
81410	Gsps for aortic dysfnc or dilat	-	X	
81411	Gsps for aortic dysfnc or dilat dupe delete anal	-	Χ	
81412	Ashkenazi jewish associated disorders (eg, bloom syndrome, canavan disease, cystic fibrosis, familial dysautonomia faconi anemia group c. gaucher disease, tay-sachs disease),	-	Х	
81413	Cardiac ion channelopathies (eg, brgada syndrome, long qt syndrome, short qt syndrome, catecholaminergic polymorphic ventricular tachycardia); genomic sequence analysis panel,	-	Х	
81414	Cardiac ion channelopathies (eg. brugada syndrome, long qt syndrome, short qt syndrome, catecholaminergic polymorphic ventricular tachycardia); duplication deletion gene analy	-	Х	
81415	Exome sequence anal	-	Х	
81416	Exome sequence anal ea add	-	Χ	
81417	Exome sequence anal re-eval	-	Χ	
81418	Drug metabolism (eg, pharmacogenomics) genomic sequence analysis panel, must include testing of at least 6 genes, including cyp2c19, cyp2d6, and cyp2d6 duplication/deletion analysis	Х	-	
81419	Epilepsy genomic sequence analysis panel, must include analyses for aldh7a1, cacna1a, cdkl5, chd2, gabrg2, grin2a, kcnq2, mecp2, pcdh19, polg, prrt2, scn1a, scn1b, scn2a, scn8a, slc2a1, slc9a6, stxbp1, syngap1, tcf4, tpp1, tsc1, tsc2, and zeb2	-	X	
81422	Fetal chromosomal microdeletion(s) genomic sequence analysis (eg, digeorge syndrome, cri-du-chat syndrome), circulating cell-free fetal dna in maternal blood	Х	-	
81425	Gsps for unex costitut heritable ds	-	Χ	
81426	Gsps for unex costitut heritable ds ea add	-	Χ	
81427	Gsps for unex costitut heritable ds re-eval	-	Χ	
81430	Gsps for hearing loss	-	Χ	
	Gsps for hearing loss dupe delete anal	-	Χ	
81432	Hereditary breast cancer-related disorders (eg, hereditary breast, ovarian endometrial cancer); must include genomic sequencing of at least 14 genes: atm brca1 brca2 brip1 cdh	-	X	
81433	Hereditary breast cancer-related disorders (eg, hereditary breast, ovarian endometrial cancer); duplication/deletion analysis panel, must include analyses for brca1 brca2 mlh1	-	Х	
81434	Hereditary retinal disorders (eg, retinitis pigmentosa, leber congenital amaurosis, cone-rod dystophy); must inc genomic sequencing 15 genes: abca4 cnga1 crb1 eys pde6a pde6b	-	Х	
81435	Gsps for colon ca	-	Χ	

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81436	Gsps for colon ca dupe delete anal	-	Х
81437	Hereditary neuroendocrine tumor disorders (eg, medullary throid or parathyroid cancer, malignant pheochromocytoma or paragangliom); must incl genomic sequencing 6 genes: max s	-	Х
81438	Hereditary neuroendocrine tumor disorders; duplication/deletion analysis panel, must include analyses for sdhb sdhc sdhd vhl	-	Х
81439	Inherited cardiomyopathy (eg. hypertrophic cardiomyopathy, dilated cardiomyopathy, arrhythmogenic right ventricular cardiomyopathy) genomic sequence analysis panel, must inclu	-	Х
81440	Gsps nuclear encod mitochondrial genes	-	Х
81441	Inherited bone marrow failure syndromes (ibmfs) (eg, fanconi anemia, dyskeratosis congenita, diamond-blackfan anemia, shwachman-diamond syndrome, gata2 deficiency syndrome, congenital amegakaryocytic thrombocytopenia) sequence analysis panel, must include sequencing of at least 30 genes, including brca2, brip1, dkc1, fanca, fancb, fancc, fancd2, fance, fancf, fancg, fanci, fancl, gata1, gata2, mpl, nhp2, nop10, palb2, rad51c, rpl11, rpl35a, rpl5, rps10, rps19, rps24, rps26, rps7, sbds, tert, and tinf2	-	Χ
81442	Noonan spectrum disorders (eg, noonan syndrome, cardio-facio-cutaneous syndrome, costello syndrome leopard syndrome, noonan-like syndrome); must incl genomic sequencing 12 ge	-	X
81445	Gsps for solid organ neoplasm	-	Χ
81448	Hereditary peripheral neuropathies (eg, charcot-marie-tooth, spastic paraplegia), genomic sequence analysis panel, must include sequencing of at least 5 peripheral neuropathy-related genes (eg, bscl2, gjb1, mfn2, mpz, reep1, spast, spg11, sptlc1)	-	Х
81449	Targeted genomic sequence analysis panel, solid organ neoplasm, 5-50 genes (eg, alk, braf, cdkn2a, egfr, erbb2, kit, kras, met, nras, pdgfra, pdgfrb, pgr, pik3ca, pten, ret), interrogation for sequence variants and copy number variants or rearrangements, if performed; rna analysis	-	Х
81450	Gsps hematolymphoid neo 5-50 genes	-	Χ
81451	Targeted genomic sequence analysis panel, hematolymphoid neoplasm or disorder, 5-50 genes (eg, braf, cebpa, dnmt3a, ezh2, flt3, idh1, idh2, jak2, kit, kras, mll, notch1, npm1, nras), interrogation for sequence variants, and copy number variants or rearrangements, or isoform expression or mrna expression levels, if performed; rna analysis	-	X
81455	Gsps hematolymphoid neo =/>51 genes	-	Х

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81456				
	Targeted genomic sequence analysis panel, solid organ or hematolymphoid neoplasm or disorder, 51 or greater genes (eg, alk, braf, cdkn2a, cebpa, dnmt3a, egfr, erbb2, ezh2, flt3, idh1, idh2, jak2, kit, kras, met, mll, notch1, npm1, nras, pdgfra, pdgfrb, pgr, pik3ca, pten, ret), interrogation for sequence variants and copy number variants or rearrangements, or isoform expression or mrna expression levels, if performed; rna analysis	-	X	
81457	Solid organ neoplasm, genomic sequence analysis panel, interrogation for sequence variants; DNA analysis, microsatellite instability	-	Х	
81458	Solid organ neoplasm, genomic sequence analysis panel, interrogation for sequence variants; DNA analysis, copy number variants and microsatellite instability	-	Х	
81459	Solid organ neoplasm, genomic sequence analysis panel, interrogation for sequence variants; DNA analysis or combined DNA and RNA analysis, copy number variants, microsatellite instability, tumor mutation burden, and rearrangements	-	Χ	
81460	Gsps for whole mitochondrial genome	-	Х	
81462	Solid organ neoplasm, genomic sequence analysis panel, cell-free nucleic acid (eg, plasma), interrogation for sequence variants; DNA analysis or combined DNA and RNA analysis, copy number variants and rearrangements	-	Χ	
81463	Solid organ neoplasm, genomic sequence analysis panel, cell-free nucleic acid (eg, plasma), interrogation for sequence variants; DNA analysis, copy number variants, and microsatellite instability	-	Х	
81464	Solid organ neoplasm, genomic sequence analysis panel, cell-free nucleic acid (eg, plasma), interrogation for sequence variants; DNA analysis or combined DNA and RNA analysis, copy number variants, microsatellite instability, tumor mutation burden, and rearrangements	-	Х	
81465	Gsps for whole mitochondrial genome lg delete anal	-	Χ	
	Gsps for xlid at least 60 genes	-	Χ	
	Gsps for xlid at least 60 genes	-	Χ	
	Unlisted molecular pathology	-	X	
81490	Autoimmune (rheumatoid arthritis), analysis of 12 biomarkers using immunoassays, utilizing serum, prognostic algorithm reported as a disease activity score	Х	-	
81493	Coronary artery disease, mrna, gene expression profiling by real-time rt-pcr of 23 genes, utilizing whole peripheral blood, algorithm reported as a risk score	-	Х	
81500	Maaa 2 serum proteins	Х	-	
81503	Maaa 2 serum proteins	Х	-	
81504	Oncology tissue of origin	-	Х	

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81506	Maaa 7 serum/plasma analytes	Χ	-	
	Fetal aneuploidy trisom risk	-	Χ	
81512	Maaa 5 maternal serum analytess	Х	-	
81517	Liver disease, analysis of 3 biomarkers (hyaluronic acid [HA], procollagen III amino terminal peptide [PIIINP], tissue inhibitor of metalloproteinase 1 [TIMP-1]), using immunoassays, utilizing serum, prognostic algorithm reported as a risk score and risk of liver fibrosis and liver-related clinical events within 5 years	Х	-	
81518	Oncology (breast), mrna, gene expression profiling by real-time rt-pcr of 11 genes (7 content and 4 housekeeping), utilizing formalin-fixed paraffin-embedded tissue, algorithm	-	X	
81519	Gsps onco (brst) 21 genes	-	Х	
81520	Oncology (breast), mrna gene exp profil by hybrid cap of 58 genes	-	Χ	
81521	Oncology (breast), mrna microarray gene exp profil of 70 cont genes & 465 housekeep genes	-	Х	
81522	Onc breast mrna 12 genes	-	Χ	
81523	Oncology (breast), mrna, next-generation sequencing gene expression profiling of 70 content genes and 31 housekeeping genes, utilizing formalin-fixed paraffin-embedded tissue, algorithm reported as index related to risk to distant metastasis	-	X	
81525	Oncology (colon), mrna, gene expression profiling by real-time rt-pcr of 12 genes (7 content and 5 housekeeping), utilizing formalin-fixed paraffin embedded tissue, algorithm	-	Х	
81529	Oncology (cutaneous melanoma), mrna, gene expression profiling by real-time rt-pcr of 31 genes (28 content and 3 housekeeping), utilizing formalin-fixed paraffin-embedded tissue, algorithm reported as recurrence risk, including likelihood of sentinel lymph node metastasis	Х	-	
81535	Oncology (gynecologic), live tumor cell culture and chemotherapeutic response by dapi stain and morphology, predictive algorithm reported as a drug response score; first singl	Х	-	
81536	Oncology (gynecologic), live tumor cell culture and chemotherapeutic response by dapi stain and morphology, predictive algorithm reported as a drug response score; each additi	Х	-	
81538	Oncology (lung), mass spectrometric 8-protein signature, including amyloid a, utilizing serum, prognostic and predictive algorithm reported as good versus poor overall surviva	Х	-	
81539	Oncology (high-grade prostate cancer), biochemical assay of four proteins (total psa, free psa, intact psa and human kallikrein-2 [hk2]) utilizing plasma or serum, prognostic	Х	-	
81540	Oncology (tumor of unknown origin), mrna, gene expression profiling by real-time rt-pcr of 92 genes (87 content and 5 housekeeping) to classify tumor into main cancer type and	-	Х	
81541	Oncology (prostate), mrna gene exp profil by real-time rt-pcr of 46 genes	-	Χ	
81542	Onc prostate mrna 22 cnt gen	-	Х	

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81546	Oncology (thyroid), mrna, gene expression analysis of 10,196 genes, utilizing fine needle aspirate, algorithm	_	Х	
	reported as a categorical result (eg, benign or suspicious)			
81551	Oncology (prostate), promoter methylation profil by real-time pcr of 3 genes	-	X	
81552	Onc breast mrna 12 genes	-	X	
81554	Pulmonary disease (idiopathic pulmonary fibrosis [ipf]), mrna, gene expression analysis of 190 genes, utilizing transbronchial biopsies, diagnostic algorithm reported as categorical result (eg, positive or negative for high probability of usual interstitial pneumonia [uip])	-	Х	
81560	Transplantation medicine (allograft rejection, pediatric liver and small bowel), measurement of donor and third-party-induced cd154+t-cytotoxic memory cells, utilizing whole peripheral blood, algorithm reported as a rejection risk score	х	-	
81595	Cardiology (heart transplant), mrna, gene expression profiling by real-time quantitative pcr of 20 genes (11 content and 9 housekeeping), utilizing subfraction of peripheral b	-	Х	
81596	Infectious disease, chronic hepatitis c virus (hcv) infection, six biochemical assays (alt, a2-macroglobulin, apolipoprotein a-1, total bilirubin, ggt, and haptoglobin) utiliz	Х	-	
82777	Assay of galectin-3	Х	-	
83006	Assay growth hormone (st2)	Х	-	
83701	Lipoprotein, blood; high resolution fractionation and quantitation of lipoproteins including lipoprotein subclasses when	Х	-	
83704	Lipoprotein, blood; quantitation of lipoprotein particle numbers and lipoprotein particle subclasses (eg, by nuclear mag	Х	-	
83950	Oncoprotein; her-2/neu	Х	-	
83951	Oncoprotein; des-gamma-carboxy-prothrombin (dcp)	Х		
83987	Ph; exhaled breath condensate	Х	-	
83992	Assay for phencyclidine	Х	-	
86005	Allergen specific ige; qualitative, multiallergen screen (eg, disk, sponge, card)	Х		
86152	Cell enumeration	Х	-	
86153	Cell enumeration phys interp	Х	-	
86343	Leukocyte histamine release	Х	-	
86352	Cellular function assay involving stimulation (eg, mitogen or antigen) and detection of biomarker (eg, atp)	Х	-	
86923	Compatibility test each unit; electronic	Х	-	
87623	Hpv low-risk types	Х	-	
87900	Infectious agent drug susceptibility phenotype prediction using regularly updated genotypic bioinformatics	Х	-	

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	Not Covered	Preauthorization Required	
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88120 Cytp urne 3-5 probes ea spec	Х	-	
88121 Cytp urine 3-5 probes cmptr	Х	-	
88375 Optical endomicroscopy interp	Х	-	
88738 Hemoglobin (hgb), quantitative, transcutaneous	Х	-	
88740 Hemoglobin, quantitative, transcutaneous, per day; carboxyhemoglobin	Х	-	
88741 Hemoglobin, quantitative, transcutaneous, per day; methemoglobin	X	-	
89049 Caffeine halothane contracture test (chct) for malignant hyperthermia susceptibility, including interpretation and repor	Х	-	
89250 Fertilization of oocyte	Х	-	
89251 Culture oocyte w/embryos	Х	-	
89253 Embryo hatching	Х	-	
89254 Oocyte identification	X	-	
89255 Prepare embryo for transfer	Х	-	
89257 Sperm identification	X	-	
89258 Cryopreservation, embryo	Х	-	
89259 Cryopreservation, sperm	Х	-	
89260 Sperm isolation, simple	Х	-	
89261 Sperm isolation, complex	Х	-	
B9268 Insemination of oocytes	Х	-	
B9272 Extended culture of oocyte(s)/embryo(s), 4-7 days	Х	-	
89280 Assisted oocyte fertilization, microtechnique; less than or equal to 10 oocytes	Х	-	
89281 Assisted oocyte fertilization, microtechnique; greater than 10 oocytes	Х	-	
89290 Biopsy, oocyte polar body or embryo blastomere, microtechnique; less than or equal to 5 embryos	Х	-	
Biopsy, oocyte polar body or embryo blastomere, microtechnique; greater than 5 embryos	Х	-	
89300 Semen analysis	X	-	
89329 Sperm evaluation test	Х	-	
89335 Cryopreservation, reproductive tissue, testicular	X	-	
89337 Cryopreservation, mature oocyte(s)	Х	-	
89342 Storage, (per year); embryo(s)	Х	-	
89343 Storage, (per year); sperm/semen	Х	-	
89344 Storage, (per year); reproductive tissue, testicular/ovarian	Х	-	
89346 Storage, (per year); oocyte	X	-	

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89352	Thawing of cryopreserved; embryo(s)	Х	-	
89353	Thawing of cryopreserved; sperm/semen, each aliquot	Х	-	
89354	Thawing of cryopreserved; reproductive tissue, testicular/ovarian	Х	-	
89356	Thawing of cryopreserved; oocytes, each aliquot	Х	-	
90581	Anthrax vaccine, for subcutaneous or intramuscular use	Х	-	
90585	Bcg vaccine, percut	Х	-	
90587	Dengue vaccine quadrivalent live 3 dose schedule for subcutaneous use	Х	-	
90625	Cholera vaccine, live, adult dosage, 1 dose schedule, for oral use	Х	-	
90664	Influenza virus vaccine, pandemic formulation, live, for intranasal use	Х	-	
90666	Influenza virus vaccine, pandemic formulation, split virus, preservative free, for intramuscular use	Х	-	
90667	Influenza virus vaccine, pandemic formulation, split virus, adjuvanted, for intramuscular use	Х	-	
90668	Influenza virus vaccine, pandemic formulation, split virus, for intramuscular use	Х	-	
90690	Typhoid vaccine, oral	Х	-	
90691	Typhoid vaccine, im	Х	-	
90717	Yellow fever vaccine, sc	Х	-	
90738	Japanese encephalitis virus vaccine, inactivated, for intramuscular use	Х	-	
90865	Narcosynthesis	Х	-	
90875	Psychophysiological therapy	Х	-	
90876	Psychophysiological therapy	Х	-	
90880	Hypnotherapy	Х	-	
90882	Environmental manipulation	Х	-	
90885	Psy evaluation of records	Х	-	
90887	Consultation with family	Х	-	
90889	Preparation of report	Х	-	
90901	Biofeedback train, any meth	Х	-	
90912	Biofeedback training, perineal muscles, anorectal or urethral sphincter, including emg and/or manometry, when performed; initial 15 minutes of one-on-one physician or other qualified health care professional contact with the patient	х	-	
90913	Biofeedback training, perineal muscles, anorectal or urethral sphincter, including emg and/or manometry, when performed; each additional 15 minutes of one-on-one physician or other qualified health care professional contact with the patient (list separately in addition to code for primary procedure)	х	-	

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91111	Gastrointestinal tract imaging, intraluminal (eg, capsule endoscopy), esophagus with physician interpretation and report	Х	-		
91112	Gi wireless capsule measure	Х	-		
91113	Gastrointestinal tract imaging, intraluminal (eg, capsule endoscopy), colon, with interpretation and report	Х	-		
91117	Colon motility 6 hr study	Х	-		
92145	Corneal hysteresis deter	Х	-		
92229	Imaging of retina for detection or monitoring of disease; point-of-care automated analysis and report, unilateral or bilateral	Х	-		
92311	Contact lens fitting	Х	-		
92312	Contact lens fitting	Х	-		
92315	Prescription of contact lens	Х	-		
92316	Prescription of contact lens	Х	-		
92352	Special spectacles fitting	Х	-		
92353	Special spectacles fitting	Х	-		
92354	Special spectacles fitting	Х	-		
92355	Special spectacles fitting	Х	-		
92358	Eye prosthesis service	Х	-		
92370	Repair & adjust spectacles	Х	-		
92371	Repair & adjust spectacles	Х	-		
92531	Spontaneous nystagmus study	Х	-		
92532	Positional nystagmus study	Х	-		
92533	Caloric vestibular test	Х	-		
92534	Optokinetic nystagmus	Х	-		
92571	Filtered speech hearing test	Х	-		
92572	Staggered spondaic word test	Х	-		
92575	Sensorineural acuity test	Х	-		
92576	Synthetic sentence test	Χ	-		
92590	Hearing aid exam, one ear	-	Х		
92591	Hearing aid exam, both ears	-	Х		
92592	Hearing aid check, one ear	-	Х		
	Hearing aid check, both ears	-	Х		
92594	Electrohearng aid test, one	-	Χ		

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92595	Electrohearng aid tst, both	-	Х	
92596	Ear protector evaluation	Х	-	
92605	Evaluation for prescription of non-speech-generating augmentative and alternative communication device, face-to-face with the patient; first hour	Х	-	
92606	Therapeutic service(s) for the use of non-speech-generating device, including programming and modification	Х	-	
92618	Evaluation for prescription of non-speech-generating augmentative and alternative communication device, face-to-face with the patient; each additional 30 minutes (list separat	Х	-	
92921	Prq cardiac angio addl art	Х	-	
92925	Prq card angio/athrect addl	Х	-	
92929	Prq card stent w/angio addl	Х	-	
92934	Prq card stent/ath/angio	Х	-	
92938	Prq revasc byp graft addl	Х	-	
92944	Percut translum revasc of chronic total occusion, corn artery, corn artery branch, or bypass graft; each addl	Х	-	
93025	Microvolt t-wave alterans for assessment of ventricular arrhythmias	Х	-	
93050	Arterial pressure waveform analysis for assessment of central arterial pressures, includes obtaining waveform(s), digitization and application of nonlinear mathematical transf	Х	-	
93590	Percutaneous transcatheter closure of paravalvular leak; initial occlusion device, mitral valve	Х	-	
93591	Percutaneous transcatheter closure of paravalvular leak; initial occlusion device, aortic valve	Х	-	
93592	Percutaneous transcatheter closure of paravalvular leak; each additional occlusion device (list separately in addition to code for primary procedure)	Х	-	
93701	Bioimpedance-derived physiologic cardiovascular analysis	Х	-	
93702	Bis xtracell fluid analysis	Х	-	
93740	Temperature gradient studies	Х	-	
93770	Measure venous pressure	Χ	-	
93895	Carotid intima atheroma eval	Χ	-	
94005	Home ventilator management care plan oversight of a patient (patient not present) in home, domiciliary or rest home (eg,	Х	-	
94011	Measurement of spirometric forced expiratory flows in an infant or child through 2 years of age	Х	-	
	Measurement of spirometric forced expiratory flows, before and after bronchodilator, in an infant or child through 2 yea	Х	-	

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94013	Measurement of lung volumes (ie, functional residual capacity [frc], forced vital capacity [fvc], and expiratory reserve	Х	-	
94150	Vital capacity test	Х	-	
94452	High altitude simulation test (hast), with physician interpretation and report;	Х	-	
94453	High altitude simulation test (hast), with physician interpretation and report; with supplemental oxygen titration	Х	-	
94660	Continuous positive airway pressure ventilation (CPAP), initiation and management	Х	-	
95957	Eeg digital analysis	Х	-	
96000	Comprehensive computer-based motion analysis by video-taping and 3-d kinematics	Х	-	
96001	Comprehensive computer-based motion analysis by video-taping and 3-d kinematics; with plantar pressure measurements	Х	-	
96002	Dynamic surface electromyography, during walking or other functional activities, 1-12 muscles	Х	-	
96003	Dynamic fine wire electromyography, during walking or other functional activities, 1 muscle	Х	-	
96004	Physician review & interp of motion analysis, plantar pressures, surface electromyography, and fine wire emg, w report	Х	-	
96105	Assessment of aphasia	Х	-	
96902	Trichogram	Х	-	
96904	Whole body integumentary photography, for monitoring of high risk patients with dysplastic nevus syndrome or a history o	Х	-	
96931	Reflectance confocal microscopy (rcm) for cellular and sub-cellular imaging of skin; image acquisition and interpretation and report, first lesion	Х	-	
96932	Reflectance confocal microscopy (rcm) for cellular and sub-cellular imaging of skin; image acquisition only, first lesion	Х	-	
96933	Reflectance confocal microscopy (rcm) for cellular and sub-cellular imaging of skin; interpretation and report only, first lesion	Х	-	
96934	Reflectance confocal microscopy (rcm) for cellular and sub-cellular imaging of skin; image acquisition and interpretation and report, each additional lesion (list separately i	Х	-	
96935	Reflectance confocal microscopy (rcm) for cellular and sub-cellular imaging of skin; image acquisition only, each additional lesion (list separately in addition to code for p	Х	-	
96936	Reflectance confocal microscopy (rcm) for cellular and sub-cellular imaging of skin; interpretation and report only, each additional lesion (list separately in addition to cod	Х	-	
97010	Hot or cold packs therapy	Х	-	

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97026	Infrared therapy	Х	-	
97037	Application of a modality to 1 or more areas; low-level laser therapy (ie, nonthermal and non-ablative) for post- operative pain reduction	Х	-	
97169	Athletic training evaluation, low complexity, requiring these components: a history and physical activity profile with no comorbidities that affect phsical activity;	Х	-	
97170	Athletic training evaluation, moderate complexity, requiring these components: a history and physical activity profile with no comorbidities that affect phsical activity;	Х	-	
97171	Athletic training evaluation, high complexity, requiring these components: a history and physical activity profile with no comorbidities that affect phsical activity;	Х	-	
97172	Reevaluation of athletic training established plan of care, requiring these components: an assessment of patient's current functional status when there is a documented change	Х	-	
97550	Caregiver training in strategies and techniques to facilitate the patient's functional performance in the home or community	Х	-	
97551	Caregiver training in strategies and techniques to facilitate the patient's functional performance in the home or community (eg, activities of daily living [adls], instrumental adls [iadls], transfers, mobility,	Х	-	
97552	Group caregiver training in strategies and techniques to facilitate the patient's functional performance in the home or community (eg, activities of daily living [adls]	Х	-	
97602	Wound care non-selective	Х	-	
97610	Low frequency non-thermal us	Х	-	
98960	Education and training for patient self-management by a qualified, nonphysician health care professional using a standar	Х	-	
98961	Education and training for patient self-management by a qualified, nonphysician health care professional using a standar	Х	-	
98962	Education and training for patient self-management by a qualified, nonphysician health care professional using a standar	Х	-	
98970	Qualified nonphysician health care professional online digital evaluation and management service, for an established patient, for up to 7 days, cumulative time during the 7 days; 5-10 minutes	Х	-	
98971	Qualified nonphysician health care professional online digital evaluation and management service, for an established patient, for up to 7 days, cumulative time during the 7 days; 11-20 minutes	Х	-	
98972	Qualified nonphysician health care professional online digital evaluation and management service, for an established patient, for up to 7 days, cumulative time during the 7 days; 21 or more minutes	Х	-	
99000	Specimen handling	Х	-	

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•	rugs, or specialty medications and should be directed to the Pharmacy link option within the website.	T v T	
	Specimen handling	X	-
	Device handling	X	-
	Postop follow-up visit	X	-
	Hospital mandated on call service; in-hospital, each hour	X	-
	Hospital mandated on call service; out-of-hospital, each hour	X	-
	Special supplies	X	-
	Patient education materials	Х	-
	Addl supl matrl&staf tm phe	Х	-
	Medical testimony	Х	-
	Group health education	X	-
	Special reports or forms	Х	-
	Unusual physician travel	X	-
	Anesthesia with hypothermia	X	-
	Initial hospital care	-	X
	Initial hospital care	-	X
	Initial hospital care	-	X
	Subsequent hospital care	-	X
99232	Subsequent hospital care	-	Χ
99233	Subsequent hospital care	-	Χ
9241	Office consultation	Х	-
9242	Office consultation	Х	-
99243	Office consultation	Х	-
99244	Office consultation	Х	-
99245	Office consultation	Х	-
9251	Initial inpatient consult	Х	-
9252	Initial inpatient consult	Х	-
99253	Initial inpatient consult	Х	-
99254	Initial inpatient consult	Х	-
99255	Initial inpatient consult	Х	-
9304	Initial nursing facility care, per day, for the evaluation and management of a patient which requires these three	_	Х
	key co		* *

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Codes		Not Covered	Preauthorization Required	
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99305	Initial nursing facility care, per day, for the evaluation and management of a patient which requires these three key co	-	Х	
99306	Initial nursing facility care, per day, for the evaluation and management of a patient, which requires these three key c	-	Х	
99307	Subsequent nursing facility care, per day, for the evaluation and management of a patient, which requires at least two o	-	Х	
99308	Subsequent nursing facility care, per day, for the evaluation and management of a patient, which requires at least two o	-	Х	
99309	Subsequent nursing facility care, per day, for the evaluation and management of a patient, which requires at least two o	-	Х	
99310	Subsequent nursing facility care, per day, for the evaluation and management of a patient, which requires at least two o	-	Х	
99318	Evaluation and management of a patient involving an annual nursing facility assessment, which requires these three key c	-	Х	
99339	Individual physician supervision of a patient (patient not present) in home, domiciliary or rest home (eg, assisted livi	Х	-	
99358	Prolong service w/o contact	Х	-	
99359	Prolong serv w/o contact add	Х	-	
99366	Medical team conference with interdisciplinary team of health care professionals, face-to-face with patient and/or famil	Х	-	
99367	Medical team conference with interdisciplinary team of health care professionals, patient and/or family not present, 30	Х	-	
99368	Medical team conference with interdisciplinary team of health care professionals, patient and/or family not present, 30	Х	-	
99374	Home health care supervision	Х	-	
99377	Hospice care supervision	Х	-	
9379	Nursing fac care supervision	Х	-	
99380	Nursing fac care supervision	Х	-	

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99417				
	Prolonged office or other outpatient evaluation and management service(s) beyond the minimum required time of the primary procedure which has been selected using total time, requiring total time with or without direct patient contact beyond the usual service, on the date of the primary service, each 15 minutes of total time (list separately in addition to codes 99205, 99215 for office or other outpatient evaluation and management services)	Х	-	
99450	Life/disability evaluation	Х	-	
99452	Interprofessional telephone/internet/electronic health record referral service(s) provided by a treating/requesting physician or other qualified health care professional, 30 m	Х	-	
99455	Disability examination	Х	-	
99456	Disability examination	Х	-	
99474				
	Self-measured blood pressure using a device validated for clinical accuracy; separate self-measurements of two readings one minute apart, twice daily over a 30-day period (minimum of 12 readings), collection of data reported by the patient and/or caregiver to the physician or other qualified health care professional, with report of average systolic and diastolic pressures and subsequent communication of a treatment plan to the patient	Х	-	
99485	Suprv interfacilty transport	Х	-	
99486	Suprv interfac trnsport addl	Х	-	
99500	Home visit for prenatal assessment inc fetal heart rate, non-stress test, uterine monitoring, and diabetes monitoring	-	Х	
99501	Home visit for postnatal assessment and follow-up care	-	X	
99502	Home visit for newborn care and assessment	-	Х	
99503	Home visit for respiratory therapy care (eg, bronchodilator, oxygen therapy, respiratory assessment, apnea evaluation)	-	Х	
99504	Home visit for mechanical ventilation care	-	Х	
99505	Home visit for stoma care and maintenance including colostomy and cystostomy	-	Х	
99506	Home visit for intramuscular injections	-	Х	
9507	Home visit for care and maintenance of catheter(s) (eg, urinary, drainage, and enteral)	Х		
9509	Home visit for assistance with activities of daily living and personal care	Х	-	
99510	Home visit for individual, family, or marriage counseling	Х	-	
99511	Home visit for fecal impaction management and enema administration	Х	-	
99512	Home visit for hemodialysis, per diem	-	Χ	

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99605	Medication therapy management service(s) provided by a pharmacist, individual, face-to-face with patient, with assessmen	Х	-	
99606	Medication therapy management service(s) provided by a pharmacist, individual, face-to-face with patient, with assessmen	Х	-	
99607	Medication therapy management service(s) provided by a pharmacist, individual, face-to-face with patient, with assessmen	Х	-	
0001F	Heart failure assessed (includes assessment of all the following components) (cad)	Х	-	
	Rbc dna hea 35 ag 11 bld grp whl bld cmn allel	-	X	
0002M	Liver disease, 10 biochem assays	Х	-	
0002U	Onc clrct quan 3 ur metabolites alg adnmts plp	Х	-	
0003M	Liver disease, 10 biochem assays	Х	-	
0003U	Onc ovarian assay 5 proteins serum alg scor	Х	-	
0004M	Scoliosis dna alys	Х	-	
0005F	Osteoarthritis assessed (oa)	Х	-	
0005U	Onco prst8 3 gene ur alg	-	Х	
0006M	Onc hep gene risk classifier	Х	-	
007M	Onc gastro 51 gene nomogram	Х	-	
0007U	Drug test(s), presumptive, with definitive confirmation of positive results, any number of drug classes, urine, includes specimen verification including dna authentication in	Х	-	
U8000	Helicobacter pylori detection and antibiotic resistance, dna, 16s and 23s rrna, gyra, pbp1, rdxa and rpob, next generation sequencing, formalin-fixed paraffin-embedded or fres	Х	-	
0009U	Oncology (breast cancer), erbb2 (her2) copy number by fish, tumor cells from formalin-fixed paraffin-embedded tissue isolated using image-based dielectrophoresis (dep) sorting	Х	-	
0010U	Infectious disease (bacterial), strain typing by whole genome sequencing, phylogenetic-based report of strain relatedness, per submitted isolate	Х	-	
0011M	Onc prst8 ca mrna 12 genes bld plsm &/ur alg	-	Х	
0011U	Prescription drug monitoring, evaluation of drugs present by lc-ms/ms, using oral fluid, reported as a comparison to an estimated steady-state range, per date of service inclu	Х	-	
0012F	Community acquired bacterial pneumonia assessed (cap)	Х	-	
	Onc mrna 5 genes ur alg risk urothelial cancer	Х	-	
	Germline disorders, gene rearrangement detection by whole genome next-generation sequencing, dna, whole blood, report of specific gene rearrangement(s)	-	Х	

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Codes	Description	Not Covered	Preauthorization Reguired
Disclaimer injectable o	Please note that coverage may vary by plan type and may not follow the listed services. These codes are updated quarterly. Additionally, these coding lists do not refuge, or specialty medications and should be directed to the Pharmacy link option within the website.	eflect information re	
0013M	Onc mrna 5 genes ur alg risk recr urothelial ca	Х	-
0013U	Oncology (solid organ neoplasia), gene rearrangement detection by whole genome next-generation sequencing, dna, fresh or frozen tissue or cells, report of specific gene rearra	-	Х
0014F	Comprehensive preoperative assessment performed for cataract surgery with intraocular lens (iol) placement (includes ass	Х	-
0014U	Hematology (hematolymphoid neoplasia), gene rearrangement detection by whole genome next-generation sequencing, dna, whole blood or bone marrow, report of specific gene rearra	-	Х
0015F	Melanoma follow up completed (includes assessment of all of the following components) (ml)5: history obtained regarding	Х	-
0015M	Adrnl cortcl tum bchm asy 25	Х	-
0016M	Onc bladder mrna 219 gen alg	Х	-
0017M	Oncology (diffuse large b-cell lymphoma [dlbcl]), mrna, gene expression profiling by fluorescent probe hybridization of 20 genes, formalin-fixed paraffinembedded tissue, algorithm reported as cell of origin	Х	-
0018M	Trnsplj rnl meas cd154+cll	Х	-
0018U	Oncology (thyroid), microrna profiling by rt-pcr of 10 microrna sequences, utilizing fine needle aspirate, algorithm reported as a positive or negative result for moderate to	-	Х
0019M	Cardiovascular disease, plasma, analysis of protein biomarkers by aptamer-based microarray and algorithm reported as 4-year likelihood of coronary event in high-risk populations	Х	-
0019U	Oncology, rna, gene expression by whole transcriptome sequencing, formalin-fixed paraffin embedded tissue or fresh frozen tissue, predictive algorithm reported as potential	-	Х
0021U	Oncology (prostate), detection of 8 autoantibodies (arf 6, nkx3-1, 5¿-utr-bmi1, cep 164, 3¿-utr-ropporin, desmocollin, aurkaip-1, csnk2a2), multiplexed immunoassay and flow	Х	-
0022U	Targeted genomic sequence analysis panel, non-small cell lung neoplasia, dna and rna analysis, 23 genes, interrogation for sequence variants and rearrangements, reported as pr	Х	-
0024U	Glyca nuc mr spectroscopy quantitative	Х	-
0025U	Tenofovir liq chrom tandem mass spect ur quan	Х	-
0026U	Onc thyr dna&mrna 112 genes fna ndul alg alys	-	Χ
0029U	Rx metab advrs rx rxn & rspse trgt seq alys	-	Х
0030U	Rx metab warfarin rx response trgt seq alys	-	Χ
	Comt gene analysis c.472g>a variant	-	Χ
003 3U	Htr2a htr2c gene analysis common variants	-	Χ

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isclaimer: jectable c	Please note that coverage may vary by plan type and may not follow the listed services. These codes are updated quarterly. Additionally, these coding lists do not rerugs, or specialty medications and should be directed to the Pharmacy link option within the website.	flect information re	
035U	Neurology (prion disease), cerebrospinal fluid, detection of prion protein by quaking-induced conformational conversion, qualitative	X	-
036U	Exome (i.e., somatic mutations), paired formalin-fixed paraffin-embedded tumor tissue and normal specimen, sequence analyses	-	Х
037U	Trgt gen seq alys sld orgn neo dna 324 genes	-	Х
	Vitamin d, 25 hydroxy d2 and d3, by lc-ms/ms, serum microsample, quantitative	Х	-
	Deoxyribonucleic acid (dna) antibody, double stranded, high avidity	Х	-
0040U	Bcr/abl1 (t (9;22)) (e.g., chronic myelogenous leukemia) translocation analysis, major breakpoint, quantitative	-	Х
045U	Onc brst dux carc is mrna 12 genes alg rsk scor	-	Х
0046U	Flt3 (fms-related tyrosine kinase 3) (eg, acute myeloid leukemia) internal tandem duplication (itd) variants, quantitative	-	Х
0047U	Onc prst8 mrna gen xprs prfl 17 gen alg rsk scor	-	Х
	Onc sld org neo dna 468 cancer associated genes	-	Х
	Targeted genomic sequence analysis panel, acute myelogenous leukemia, dna analysis, 194 genes, interrogation for sequence variants, copy number variants or rearrangements	-	Х
052U	Lpoprtn bld w/5 maj class auto prfl ucentrfugtn	Χ	_
	Oncology (prostate cancer), fish analysis of 4 genes (asap1, hdac9, chd1 and pten), needle biopsy specimen, algorithm reported as probability of higher tumor grade	Х	-
0054T	Computer-assisted musculoskeletal surgical navigational orthopedic procedure, with image-guidance based on fluoroscopic	Х	-
)054U	Rx mntr 14+ class drugs & sbsts capillary blood	Х	-
0055T	Computer-assisted musculoskeletal surgical navigational orthopedic procedure, with image-guidance based on ct/mri images	Х	-
)055U	Cardiology (heart transplant), cell-free dna, pcr assay of 96 dna target sequences (94 single nucleotide polymorphism targets and two control targets), plasma	-	Х
056U	Hem aml dna gene rearrangement blood/bone marrow	-	Х
	Oncology (merkel cell carcinoma), detection of antibodies to the merkel cell polyoma virus oncoprotein (small t antigen), serum, quantitative	Х	-
059U	Oncology (merkel cell carcinoma), detection of antibodies to the merkel cell polyoma virus capsid protein (vp1), serum, reported as positive or negative	Х	-

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0060U	Twin zygosity, genomic targeted sequence analysis of chromosome 2, using circulating cell-free fetal dna in maternal blood	X	-	
0061U	Tc meas 5 biomarkers w/sfdi multi-spectral alys	Х	-	
0070U	Cyp2d6 gen com&slct rar vrnt	-	Х	
0071T	Focused ultrasound ablation of uterine leiomyomata, including mr guidance: total leiomyomata volume less than 200 cc of	Х	-	
0071U	Cyp2d6 full gene sequence	-	Х	
0072T	Focused ultrasound ablation of uterine leiomyomata, including mr guidance: total leiomyomata volume less than 200 cc of	Х	-	
0072U	Cyp2d6 gen cyp2d6-2d7 hybrid	-	Х	
0073U	Cyp2d6 gen cyp2d7-2d6 hybrid	-	X	
0074U	Cyp2d6 nonduplicated gene	-	Х	
0075U	Cyp2d6 5' gene dup/mlt	-	X	
0076U	Cyp2d6 3' gene dup/mlt	-	Х	
0078U	Pain mgt opi use gnotyp pnl	Х	-	
0079U	Comparative dna analysis using multiple selected single-nucleotide polymorphisms (snps), urine and buccal dna, for specimen identity verification	-	Х	
U0800	Onc Ing 5 clin rsk factr alg	Х	-	
0082U	Rx test def 90+ rx/sbsts ur	Х	-	
0083U	Onc rspse chemo cntrst tomog	Х	-	
0084U	Red blood cell antigen typing, dna, genotyping of 10 blood groups with phenotype prediction of 37 red blood cell antigens	Х	-	
0086U	Infectious disease (bacterial and fungal), organism identification, blood culture, using rrna fish, 6 or more organism targets, reported as positive or negative with phenotypi	Х	-	
0087U	Cardiology (heart transplant), mrna gene expression profiling by microarray of 1283 genes, transplant biopsy tissue, allograft rejection and injury algorithm reported as a pro	-	Х	
U8800	Transplantation medicine (kidney allograft rejection), microarray gene expression profiling of 1494 genes, utilizing transplant biopsy tissue, algorithm reported as a probabil	-	Х	
0089U	Oncology (melanoma), gene expression profiling by rtqpcr, prame and linc00518, superficial collection using adhesive patch(es)	Х	-	
0090U	Oncology (cutaneous melanoma), mrna gene expression profiling by rt-pcr of 23 genes (14 content and 9 housekeeping), utilizing formalin-fixed paraffin-embedded tissue, algorit	Х	-	

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0091U	Oncology (colorectal) screening, cell enumeration of circulating tumor cells, utilizing whole blood, algorithm, for the presence of adenoma or cancer, reported as a positive o	×	-	
0092U	Oncology (lung), three protein biomarkers, immunoassay using magnetic nanosensor technology, plasma, algorithm reported as risk score for likelihood of malignancy	Х	-	
0093U	Prescription drug monitoring, evaluation of 65 common drugs by lc-ms/ms, urine, each drug reported detected or not detected	Х	-	
0094U	Genome (eg, unexplained constitutional or heritable disorder or syndrome), rapid sequence analysis	-	Х	
0095U	Inflammation (eosinophilic esophagitis), elisa analysis of eotaxin-3 (ccl26 [c-c motif chemokine ligand 26]) and major basic protein (prg2 [proteoglycan 2, pro eosinophil majo	Х	-	
0097U	Gastrointestinal pathogen, multiplex reverse transcription and multiplex amplified probe technique, multiple types or subtypes, 22 targets (campylobacter [c. jejuni/c. coli/c.	Х	-	
0100T	Placement of a subconjunctival retinal prosthesis receiver and pulse generator, and implantation of intra-ocular retina	Х	-	
0101T	Extracorporeal shock wave involving musculoskeletal system, not otherwise specified; high energy	Х	-	
0101U	Hereditary colon cancer disorders (eg, lynch syndrome, pten hamartoma syndrome, cowden syndrome, familial adenomatosis polyposis), genomic sequence analysis panel utilizing a	-	Х	
0102T	Extracorporeal shock wave, high energy, performed by a physician, requiring anesthesia other than local, involving later	Х	-	
0102U	Hereditary breast cancer-related disorders (eg, hereditary breast cancer, hereditary ovarian cancer, hereditary endometrial cancer), genomic sequence analysis panel utilizing	-	Х	
0103U	Hereditary ovarian cancer (eg, hereditary ovarian cancer, hereditary endometrial cancer), genomic sequence analysis panel utilizing a combination of ngs, sanger, mlpa, and arr	-	Х	
0105U	Neph ckd mult eclia tum nec	Х	-	
0106T	Quantitative sensory testing (qst), testing and interpretation per extremity; using touch pressure stimuli to assess lar	Х	-	
0107T	Quantitative sensory testing (qst), testing and interpretation per extremity; using vibration stimuli to assess large di	Х	-	
0107U	C diff tox ag detcj ia stool	Х	-	
0108T	Quantitative sensory testing (qst), testing and interpretation per extremity; using cooling stimuli to assess small nerv	Х	-	
0108U	Gi barrett esoph 9 prtn bmrk	Х	-	

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0109T	Quantitative sensory testing (qst), testing and interpretation per extremity; using heat-pain stimuli to assess small n	Х	-			
0109U	Id aspergillus dna 4 species	Х	-			
0110T	Quantitative sensory testing (qst), testing and interpretation per extremity; using other stimuli to assess sensation	Х	-			
0110U	Rx mntr 1+oral onc rx&sbsts	Х	-			
0111U	Onc colon ca kras&nras alys	-	Χ			
	ladi 16s&18s rrna genes	X	-			
0113U	Onc prst8 pca3&tmprss2- erg	-	Χ			
	Gi barretts esoph vim&ccna1	-	Χ			
0115U	Respir iadna 18 viral&2 bact	X	-			
)116U	Rx mntr nzm ia 35+oral flu	Х	-			
)117U	Pain mgmt 11 endogenous anal	Х	-			
0118U	Trnsplj don-drv cll-fr dna	-	Χ			
0119U	Crd ceramides liq chrom plsm	X	-			
0120U	Onc b cll lymphm mrna 58 gen	-	Χ			
)121U	Sc dis vcam-1 whole blood	Х	-			
0122U	Sc dis p-selectin whl blood	Х	-			
0123U	Mchnl fragility rbc prflg	Х	-			
)129U	Hered brst ca rltd do panel	-	Χ			
0130U	Hered colon ca do mrna pnl	-	Χ			
0131U	Hered brst ca rltd do pnl 13	-	Χ			
0132U	Hered ova ca rltd do pnl 17	-	Χ			
0133U	Hered prst8 ca rltd do 11	-	X			
0134U	Hered pan ca mrna pnl 18 gen	-	Χ			
0135U	Hered gyn ca mrna pnl 12 gen	-	Χ			
0136U	Atm mrna seq alys	-	Χ			
	Palb2 mrna seq alys	-	Χ			
0138U	Brca1 brca2 mrna seq alys	-	Χ			
0140U	Nfct ds fungi dna 15 trgt	Х	-			
0141U	Nfct ds bact&fng gram pos	Х	-			
)142U	Nfct ds bact&fng gram neg	Х	-			

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0143U	Drug assay 120+ rx/metablt	Х	-	
0144U	Drug assay 160+ rx/metablt	Х	-	
0145U	Drug assay 65+ rx/metablt	Х	-	
0146U	Drug assay 80+ rx/metablt	Х	-	
0147U	Drug assay 85+ rx/metablt	Х	-	
)148U	Drug assay 100+ rx/metablt	Х	-	
)149U	Drug assay 60+ rx/metablt	Х	-	
)150U	Drug assay 120+ rx/metablt	Х	-	
)152U	Nfct bct fng prst dna >1000	X	-	
)153U	Onc breast mrna 101 genes	-	Χ	
	Fgfr3 gene analysis	-	Χ	
)155U	Pik3ca gene analysis	-	Χ	
)156U	Copy number sequence alys	X	-	
)157U	Apc mrna seq alys	-	Χ	
)158U	Mlh1 mrna seq alys	-	Χ	
	Msh2 mrna seq alys	-	X	
)160U	Msh6 mrna seq alys	-	Χ	
)161U	Pms2 mrna seq alys	-	Χ	
	Hered colon ca trgt mrna pnl	-	X	
0163T	Total disc arthroplasty (artificial disc), anterior approach, including discectomy to prepare interspace (other than for	-	X	
)163U	Onc clrct scr 3 prtn alg	Х	-	
)164U	Gi ibs ia anticdtb&vinculin	Х	-	
)165U	Peanut allg spec asmt 64 epi	Х	-	
)166U	Liver ds 10 biochem asy srm	Х	-	
)168U	Ftl aneuploidy dna seq alys	-	Х	
	Neuro asd rna next gen seq	Х	-	
)171U	Trgt gen seq alys pnl dna 23	-	Х	
)172U	Onc sld tum alys brca1 brca2	-	Х	
)173U	Psyc gen alys panel 14 genes	Х	-	
0174T	Computer aided detection (cad) (computer algorithm analysis of digital image data for lesion detection) with further phy	Х	-	

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New York Company Com			Small Employer and Individual		
Actable drugs, or specially medications and should be directed to the Pharmacy link option within the website. 1751	Codes			Preauthorization Required	
1751			t reflect information re	garding immunizations,	
further phy	0174U	Onc solid tumor 30 prtn trgt	Х	-	
176U Cdtb&vinculin igg antb ia X -	0175T		х	-	
177U Onc brst ca dna pik3ca 11 -	0175U	Psyc gen alys panel 15 genes	Х	-	
178U Peanut allg asmt epi clin rx	0176U	Cdtb&vinculin igg antb ia	X	-	
179U Onc nonsm cll lng ca alys 23 -	0177U	Onc brst ca dna pik3ca 11	-	X	
180U Abo gnotyp abo 7 exons	0178U	Peanut allg asmt epi clin rx	Х	-	
181U Co gnotyp aqp1 exon 1	0179U	Onc nonsm cll lng ca alys 23	-	Х	
182U Crom gnotyp cd55 exons 1-10	0180U	Abo gnotyp abo 7 exons	Х	-	
183U Di gnotyp slc4a1 exon 19	0181U	Co gnotyp aqp1 exon 1	Х	-	
184U Do gnotyp art4 exon 2	0182U	Crom gnotyp cd55 exons 1-10	Х	-	
185U Fut1 gnotyp fut1 exon 4	0183U	Di gnotyp slc4a1 exon 19	Х	-	
186U Fut2 gnotyp fut2 exon 2	0184U	Do gnotyp art4 exon 2	X	-	
187U Fy gnotyp ackr1 exons 1-2	0185U	Fut1 gnotyp fut1 exon 4	Х	-	
188U Ge gnotyp gypc exons 1-4	0186U	Fut2 gnotyp fut2 exon 2	Х	-	
189U Gypa gnotyp ntrns 1 5 exon 2	0187U	Fy gnotyp ackr1 exons 1-2	Х	-	
190U Gypb gnotyp ntrns 1 5 seux 3	0188U	Ge gnotyp gypc exons 1-4	Х	-	
191U In gnotyp cd44 exons 2 3 6	0189U	Gypa gnotyp ntrns 1 5 exon 2	Х	-	
192U Jk gnotyp slc14a1 exon 9	0190U	Gypb gnotyp ntrns 1 5 seux 3	Х	-	
193U Jr gnotyp abcg2 exons 2-26 194U Kel gnotyp kel exon 8 195U Klf1 targeted sequencing 196U Lu gnotyp bcam exon 3 197U Lw gnotyp icam4 exon 1 198U Rhd&rhce gntyp rhd1-10&rhce5 199U Sc gnotyp ermap exons 4 12 200T Percutaneous sacral augmentation (sacroplasty) unilateral injection(s) including the use of a balloon or	0191U	In gnotyp cd44 exons 2 3 6	Х	-	
194U Kel gnotyp kel exon 8 195U Klf1 targeted sequencing 196U Lu gnotyp bcam exon 3 197U Lw gnotyp icam4 exon 1 198U Rhd&rhce gntyp rhd1-10&rhce5 199U Sc gnotyp ermap exons 4 12 200T Percutaneous sacral augmentation (sacroplasty) unilateral injection(s) including the use of a balloon or)192U	Jk gnotyp slc14a1 exon 9	Х	=	
195U Klf1 targeted sequencing X - 196U Lu gnotyp bcam exon 3 197U Lw gnotyp icam4 exon 1 198U Rhd&rhce gntyp rhd1-10&rhce5 X - 199U Sc gnotyp ermap exons 4 12 X - 200T Percutaneous sacral augmentation (sacroplasty) unilateral injection(s) including the use of a balloon or	0193U	Jr gnotyp abcg2 exons 2-26	Х	-	
196U Lu gnotyp bcam exon 3 197U Lw gnotyp icam4 exon 1 198U Rhd&rhce gntyp rhd1-10&rhce5 199U Sc gnotyp ermap exons 4 12 200T Percutaneous sacral augmentation (sacroplasty) unilateral injection(s) including the use of a balloon or	0194U	Kel gnotyp kel exon 8	Х	-	
197U Lw gnotyp icam4 exon 1 198U Rhd&rhce gntyp rhd1-10&rhce5 X - 199U Sc gnotyp ermap exons 4 12 X - 200T Percutaneous sacral augmentation (sacroplasty) unilateral injection(s) including the use of a balloon or	0195U	Klf1 targeted sequencing	Х	-	
198U Rhd&rhce gntyp rhd1-10&rhce5 X - 199U Sc gnotyp ermap exons 4 12 X - 200T Percutaneous sacral augmentation (sacroplasty) unilateral injection(s) including the use of a balloon or	0196U	Lu gnotyp bcam exon 3	X	-	
199U Sc gnotyp ermap exons 4 12 200T Percutaneous sacral augmentation (sacroplasty) unilateral injection(s), including the use of a balloon or		• ,,	X	-	
200T Percutaneous sacral augmentation (sacroplasty), unilateral injection(s), including the use of a balloon or		•	X	-	
Percutaneous sacral augmentation (sacroplasty), unilateral injection(s), including the use of a balloon or	0199U	Sc gnotyp ermap exons 4 12	X	-	
mechanical de	0200T		х	-	
200U Xk gnotyp xk exons 1-3 X -	0200U	Xk gnotyp xk exons 1-3	X	-	

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0201T	Percutaneous sacral augmentation (sacroplasty), bilateral injections, including the use of a balloon or mechanical devic	Х	-
)201U	Yt gnotyp ache exon 2	Х	-
0202T	Posterior vertebral joint(s) arthroplasty (e.g., facet joint[s] replacement) including facetectomy, laminectomy, foramin	Х	-
0203U	Ai ibd mrna xprsn prfl 17	Х	-
)204U	Onc thyr mrna xprsn alys 593	-	Х
0205U	Oph amd alys 3 gene variants	Х	-
)206U	Neuro alzheimer cell aggregj	Х	-
0207T	Evacuation of meibomian glands, automated, using heat and intermittent pressure, unilateral	Х	-
)207U	Neuro alzheimer quan imaging	Х	-
)209U	Cytog const alys interrog	-	Х
)210U	Syphilis tst antb ia quan	Х	-
)211U	Onc pan-tum dna&rna gnrj seq	-	X
)212U	Rare ds gen dna alys proband	-	Χ
)213T	Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joi	-	Х
)213U	Rare ds gen dna alys ea comp	-	X
)214T	Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joi	-	Х
)214U	Rare ds xom dna alys proband	-	X
0215T	Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joi	-	Х
)215U	Rare ds xom dna alys ea comp	-	Х
)216T	Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joi	-	Х
)216U	Neuro inh ataxia dna 12 com	-	Х
)217T	Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joi	-	Х
)217U	Neuro inh ataxia dna 51 gene	-	Х
	Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joi	-	Х

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218U	Neuro musc dys dmd seq alys	-	Χ
)219T	Placement of posterior intrafacet implant(s), unilateral or bilateral, including imaging and placement of bone graft(s)	Х	-
219U	Nfct agt hiv gnrj seq alys	X	-
)220T	Placement of posterior intrafacet implant(s), unilateral or bilateral, including imaging and placement of bone graft(s)	Х	-
220U	Onc brst ca ai assmt 12 feat	X	-
221T	Placement of posterior intrafacet implant(s), unilateral or bilateral, including imaging and placement of bone graft(s)	Х	-
221U	Abo gnotyp next gnrj seq abo	Х	-
222T	Placement of posterior intrafacet implant(s), unilateral or bilateral, including imaging and placement of bone graft(s)	Х	-
222U	Rhd&rhce gntyp next gnrj seq	Х	-
	Rx asy prsmv 30+rx/metablt	X	-
228U	Onc prst8 ma molec prfl alg	X	-
229U	Bcat1 promoter mthyltn alys	Х	-
230U	Ar full sequence analysis	-	Х
231U	Cacna1a full gene analysis	-	Х
232T	Injection(s), platelet rich plasma, any tissue, including image guidance, harvesting and preparation when performed	х	-
232U	Cstb full gene analysis	-	Х
233U	Fxn gene analysis	-	Х
235U	Pten full gene analysis	-	Х
	Car ion chnlpthy gen seq pnl	-	Х
239U	Trgt gen seq alys pnl 311+	-	Χ
242U	Targeted genomic sequence analysis panel, solid organ neoplasm, cell-free circulating dna analysis of 55-74 genes, interrogation for sequence variants, gene copy number amplifications, and gene rearrangements	-	Х
243U	Obstetrics (preeclampsia), biochemical assay of placental-growth factor, time-resolved fluorescence immunoassay, maternal serum, predictive algorithm reported as a risk score for preeclampsia	Х	-

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0244U	Oncology (solid organ), dna, comprehensive genomic profiling, 257 genes, interrogation for single-nucleotide variants, insertions/deletions, copy number alterations, gene rearrangements, tumor-mutational burden and microsatellite instability, utilizing formalin-fixed paraffinembedded tumor tissue	х	-	
0245U	Oncology (thyroid), mutation analysis of 10 genes and 37 rna fusions and expression of 4 mrna markers using next-generation sequencing, fine needle aspirate, report includes associated risk of malignancy expressed as a percentage	-	Х	
0246U	Red blood cell antigen typing, dna, genotyping of at least 16 blood groups with phenotype prediction of at least 51 red blood cell antigens	Х	-	
0247U	Obstetrics (preterm birth), insulin-like growth factor–binding protein 4 (ibp4), sex hormone– binding globulin (shbg), quantitative measurement by lc-ms/ms, utilizing maternal serum, combined with clinical data, reported as predictive-risk stratification for spontaneous preterm birth	Х	-	
0248U	Onc brn sphrd cll 12 rx pnl	Х	-	
	Onc brst alys 32 phsprtn alg	Х	-	
0250U	Onc sld org neo dna 505 gene	-	Χ	
0251U	Hepcidin-25 elisa serum/plsm	Х	-	
0252U	Ftl aneuploidy str alys dna	-	X	
	Rprdtve med rna gen prfl 238	-	Χ	
0254U	Reprdtve med alys 24 chrmsm	-	Χ	
0255U	Andrology infertility assmt	X	-	
0256U	Tma/tmao prfl ms/ms ur alg	Х	-	
0257U	Vlcad leuk nzm actv whl bld	Х	-	
0258U	Ai psor mrna 50-100 gen alg	Х	-	
0259U	Neph ckd nuc mrs meas gfr	Х	-	
0260U	Rare ds id opt genome mapg	-	Χ	
0261U	Onc clrct ca img alys w/ai	Х	-	
0262U	Onc sld tum rtpcr 7 gen	-	Χ	
0263T	Im autol b1 mrw cel ther 1 leg compl incl hrvst	Х	-	
0263U	Neuro asd meas 16 c metblt	Х	-	
0264T	Im autol b1 mrw cel ther 1 leg compl xcl hrvst	Х	-	
026 <mark>4U</mark>	Rare ds id opt genome mapg	-	Х	
0265T	Im autol b1 mrw cel ther uni/bi hrvst only	Х	-	
0265U	Rar do whl gn&mtcdrl dna als	-	Χ	

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Codes		Not Covered	Preauthorization Required
	Please note that coverage may vary by plan type and may not follow the listed services. These codes are updated quarterly. Additionally, these coding lists do not regs, or specialty medications and should be directed to the Pharmacy link option within the website.	eflect information re	garding immunizations,
0266T	Impltj/rplcmt crtd sns brorflx actv dev tot sys	Х	-
	Unxpl cnst hrtbl do gn xprsn	-	X
	Impltj/rplcmt crtd sns brorflx actv dev lead uni	Х	=
)267U	Rare do id opt gen mapg&seq	-	X
0268T	Impltj/rplcmt crtd sns brorflx actv dev pls gen	Х	-
)269T	Rev/remvl crtd sns brorflx actv dev tot sys	Х	-
)269U	Hem aut dm cgen trmbctpna 14	-	Χ
)270T	Rev/remvl crtd sns brorflx actv dev lead uni	Х	-
)270U	Hem cgen coagj do 20 genes	-	Χ
)271T	Rev/remvl crtd sns brorflx actv dev pls gen	Х	-
)271U	Hem cgen neutropenia 23 gen	-	Χ
)272T	Interrogation eval crtd sns brorflx actv sys	Х	-
)272U	Hem genetic bld do 51 genes	-	Χ
)273T	Interrogation eval crtd sns brorflx w/progrmg	Х	-
)273U	Hem gen hyprfibrnlysis 8 gen	-	Χ
)274T	Perq lamot/lam any meth single/mlt lvl crv/thrc	Х	-
)274U	Hem gen pltlt do 43 genes	-	Χ
)275T	Perq lamot/lam any meth single/mlt lvl lumbar	Х	-
)275U	Hem heprn nduc trmbctpna srm	Х	-
)276U	Hem inh thrombocytopenia 23	-	Χ
)277U	Hem gen pltlt funcj do 31	-	Х
0278T	Transcutaneous electrical modulation pain reprocessing (eg, scrambler therapy), each treatment session (includes placement of electrodes).	Х	-
)278U	Hem gen thrombosis 12 genes	-	Х
)279U	Hem vw factor&clgn iii bndg	Х	-
)280U	Hem vw factor&clgn iv bndg	Х	-
)281U	Hem vwd propeptide ag lvl	Х	
)282U	Rbc dna gntyp 12 bld grp gen	Х	-
)283U	Vw factor type 2b eval plsm	Х	-
)284U	Vw factor type 2n eval plsm	Х	-
)285U	Onc rsps radj cll fr dna tox	-	Х
)287U	Onc thyr dna&mrna 112 genes	-	Х

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	Please note that coverage may vary by plan type and may not follow the listed services. These codes are updated quarterly. Additionally, these coding lists do not rrugs, or specialty medications and should be directed to the Pharmacy link option within the website.	eflect information re	egarding immunizations,	
0288U	Onc lung mrna quan pcr 11&3	-	Х	
0289U	Neuro alzheimer mrna 24 gen	Х	-	
0290U	Pain mgmt mrna gen xprsn 36	Х	-	
0291U	Psyc mood do mrna 144 genes	Х	-	
0292U	Psyc strs do mrna 72 genes	Х	-	
0293U	Psyc suicidal idea mrna 54	Х	-	
)294U	Lngvty&mrtlty rsk mrna 18gen	Х	-	
)295U	Onc brst dux carc 7 proteins	Х	-	
)296U	Onc orl&/orop ca 20 mlc feat	-	Х	
)297U	Onc pan tum whl gen seq dna	-	Х	
)298U	Onc pan tum whl trns seq rna	-	Х	
)299U	Onc pan tum whl gen opt mapg	-	Х	
)300U	Onc pan tum whl gen seq&opt	-	Х	
)301U	Adna bartonella ddpcr	Х	-	
)302U	Adna brtnla ddpcr flwg liq	Х	-	
)303U	Hem rbc ads whl bld hypoxic	Х	-	
)304U	Hem rbc ads whl bld normoxic	Х	-	
)305U	Hem rbc fnclty&dfrm shr strs	Х	-	
)306U	Onc mrd nxt-gnrj alys 1st	-	Х	
)307U	Onc mrd nxt-gnrj alys sbsq	-	Х	
)308T	Insertion of ocular telescope prothesis including removal of crystalline lens	Х	-	
)308U	Crd cad alys 3 prtn plsm alg	Х	-	
309U	Crd cv ds aly 4 prtn plm alg	Х	-	
)310U	Ped vsclts kd alys 3 bmrks	Х	-	
)311U	Nfct ds bct quan antmcrb sc	Х	-	
)312T	Laps impltj nstim vagus	Х	-	
)312U	Ai ds sle alys 8 igg autoant	Х	-	
)313T	Vagus nerve blocking therapy (morbid obesity); laparoscopic removal of vagal trunk neurostimulator electrode array and pulse generator	Х	-	
)313U	Onc pncrs dna&mrna seq 74	-	Х	
	Vagus nerve blocking therapy (morbid obesity); laparoscopic removal of vagal trunk neurostimulator	Х	-	
	Onc cutan mlnma mrna 35 gene	X	_	

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		Small Employer and Individual		
Codes	Description	Not Covered	Preauthorization	
Disclaimer	EPlease note that coverage may vary by plan type and may not follow the listed services. These codes are updated quarterly. Additionally, these coding lists do not re		Required egarding immunizations.	
	drugs, or specialty medications and should be directed to the Pharmacy link option within the website.			
0315T	Rmvl vagus nerve pls gen	Х	-	
0315U	Onc cutan sq cll ca mrna 40	Х	-	
0316T	Replc vagus nerve pls gen	Х	-	
0316U	B brgdrferi lyme ds ospa evl	Х	-	
0317T	Elec analysis vagus nerve pls gen	Х	-	
0317U	Onc lung ca 4-prb fish assay	-	Χ	
0318U	Ped whl gen mthyltn alys 50+	-	Χ	
0319U	Neph rna pretrnspl perph bld	-	Χ	
0320U	Neph rna psttrnspl perph bld	-	Χ	
0321U	ladna gu pthgn 20bct&fng org	Х	-	
0322U	Neuro asd meas 14 acyl carn	Х	-	
0323U	ladna cns pthgn next gen seq	Х	-	
0324U	Onc ovar sphrd cell 4 rx pnl	Х	-	
0325U	Onc ovar sphrd cell parp	Х	-	
0326U	Trgt gen seq alys pnl 83+	-	Χ	
0328U	Drug assay 120+ rx&metablt	Х	-	
0329T	Mntr io press 24hrs/> uni/bi	Х	-	
0329U	Onc neo xome&trns seq alys	-	Χ	
0330T	Tear film img uni/bi w/i&r	Х	-	
0330U	ladna vag pthgn panel 27 org	Х	-	
0331T	Heart symp image plnr	Х	-	
0331U	Onc hl neo opt gen mapping	-	Χ	
0332T	Heart symp image plnr spect	Х	-	
0332U	Onc pan tum gen prflg 8 dna	-	Χ	
0333T	Visual ep acuity screen auto	Х	-	
0333U	Onc lvr surveilanc hcc cfdna	-	Χ	
0334U	Onc sld orgn tgsa dna 84/+	-	Х	
0335U	Rare ds whl gen seq fetal	-	Х	
0336U	Rare ds whl gen seq bld/slv	-	Х	
0337U	Onc plsm cell do & myeloma id	Х	-	
0338T	Trnscth renal symp denrv unl	Х	-	
0338U	Onc sld tum crcg tum cl slct	Х	-	

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Codes		Not Covered	Preauthorization Required	
	Please note that coverage may vary by plan type and may not follow the listed services. These codes are updated quarterly. Additionally, these coding lists do not rugs, or specialty medications and should be directed to the Pharmacy link option within the website.	eflect information re	garding immunizations,	
0339T	Trnscth renal symp denrv bil	X	-	
0339U	Onc prst8 mrna hoxc6 & dlx1	Х	-	
0340U	Onc pan ca alys mrd plasma	-	Х	
0341U	Ftl aneup dna seq cmpr alys	-	X	
0342U	Onc pncrtc ca mult ia eclia	Х	-	
0343U	Onc prst8 xom aly 442 sncrna	Х	-	
)344U	Hep nafld semiq evl 28 lipid	Х	-	
)345U	Psyc genom alys pnl 15 gen	X	-	
)346U	Beta amyl aβ40 & aβ42 lc-ms/ms	Х	-	
)347T	Ins bone device for rsa	X	-	
)347U	Rx metab/pcx dna 16 gen alys	X	-	
)348T	Rsa spine exam	Х	-	
)348U	Rx metab/pcx dna 25 gen alys	Х	-	
)349T	Rsa upper extr exam	Х	-	
349U	Rx metab/pcx dna 27gen rx ia	Х	-	
)350T	Rsa lower extr exam	Х	-	
350U	Rx metab/pcx dna 27 gen alys	Х	-	
)351T	Intraop oct brst/node spec	Х	-	
)351U	Nfct ds bct/viral trail ip10	Х	-	
)352T	Oct brst/node i&r per spec	Х	-	
353T	Intraop oct breast cavity	Х	-	
354T	Oct breast surg cavity i&r	Х	-	
354U	Hpv hi rsk qual mrna e6/e7	Х	-	
)355U	Apol1 (apolipoprotein I1) (eg, chronic kidney disease), risk variants (g1, g2)	Х	-	
)356U	Oncology (oropharyngeal), evaluation of 17 dna biomarkers using droplet digital pcr (ddpcr), cell-free dna, algorithm reported as a prognostic risk score for cancer recurrence	х	-	
357U	Oncology (melanoma), artificial intelligence (ai)-enabled quantitative mass spectrometry analysis of 142 unique pairs of glycopeptide and product fragments, plasma, prognostic, and predictive algorithm reported as likely, unlikely, or uncertain benefit from immunotherapy agents	х	-	
)358T	Bia whole body	Х	-	
)358U	Neurology (mild cognitive impairment), analysis of β-amyloid 1-42 and 1-40, chemiluminescence enzyme immunoassay, cerebral spinal fluid, reported as positive, likely positive, or negative	х	-	

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Codes		Not Covered	Preauthorization Required	
Disclaimer: injectable d	Please note that coverage may vary by plan type and may not follow the listed services. These codes are updated quarterly. Additionally, these coding lists do not re rugs, or specialty medications and should be directed to the Pharmacy link option within the website.	flect information re		
0359U	Oncology (prostate cancer), analysis of all prostate-specific antigen (psa) structural isoforms by phase separation and immunoassay, plasma, algorithm reports risk of cancer	×	-	
0360U	Oncology (lung), enzyme-linked immunosorbent assay (elisa) of 7 autoantibodies (p53, ny-eso-1, cage, gbu4-5, sox2, mage a4, and hud), plasma, algorithm reported as a categorical result for risk of malignancy	Х	-	
0361U	Neurofilament light chain, digital immunoassay, plasma, quantitative	Х	-	
0362U	Oncology (papillary thyroid cancer), gene-expression profiling via targeted hybrid capture–enrichment rna sequencing of 82 content genes and 10 housekeeping genes, formalin-fixed paraffin embedded (ffpe) tissue, algorithm reported as one of three molecular subtypes	-	Х	
0363U	Oncology (urothelial), mrna, geneexpression profiling by real-time quantitative pcr of 5 genes (mdk, hoxa13, cdc2 [cdk1], igfbp5, and cxcr2), utilizing urine, algorithm incorporates age, sex, smoking history, and macrohematuria frequency, reported as a risk score for having urothelial carcinoma	-	X	
0364U	Oncology (hematolymphoid neoplasm), genomic sequence analysis using multiplex (pcr) and next-generation sequencing with algorithm, quantification of dominant clonal sequence(s), reported as presence or absence of minimal residual disease (mrd) with quantitation of disease burden, when appropriate	Х	-	
0365U	Oncology (bladder), analysis of 10 protein biomarkers (a1at, ang, apoe, ca9, il8, mmp9, mmp10, pai1, sdc1 and vegfa) by immunoassays, urine, algorithm reported as a probability of bladder cancer	Х	-	
0366U	Oncology (bladder), analysis of 10 protein biomarkers (a1at, ang, apoe, ca9, il8, mmp9, mmp10, pai1, sdc1 and vegfa) by immunoassays, urine, algorithm reported as a probability of recurrent bladder cancer	Х	-	
0367U	Oncology (bladder), analysis of 10 protein biomarkers (a1at, ang, apoe, ca9, il8, mmp9, mmp10, pai1, sdc1 and vegfa) by immunoassays, urine, diagnostic algorithm reported as a risk score for probability of rapid recurrence of recurrent or persistent cancer following transurethral resection	Х	-	
0368U	Oncology (colorectal cancer), evaluation for mutations of apc, braf, ctnnb1, kras, nras, pik3ca, smad4, and tp53, and methylation markers (myo1g, kcnq5, c9orf50, fli1, clip4, znf132 and twist1), multiplex quantitative polymerase chain reaction (qpcr), circulating cell-free dna (cfdna), plasma, report of risk score for advanced adenoma or colorectal cancer	х	-	
0369U	Infectious agent detection by nucleic acid (dna and rna), gastrointestinal pathogens, 31 bacterial, viral, and parasitic organisms and identification of 21 associated antibiotic-resistance genes, multiplex amplified probe technique	Х	-	
0370U	Infectious agent detection by nucleic acid (dna and rna), surgical wound pathogens, 34 microorganisms and identification of 21 associated antibioticresistance genes, multiplex amplified probe technique, wound swab	х	-	

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0371U	Infectious agent detection by nucleic acid (dna or rna), genitourinary pathogen, semiquantitative identification, dna from 16 bacterial organisms and 1 fungal organism, multiplex amplified probe technique via quantitative polymerase chain reaction (qpcr), urine	Х	-
0372U	Infectious disease (genitourinary pathogens), antibiotic-resistance gene detection, multiplex amplified probe technique, urine, reported as an antimicrobial stewardship risk score	Х	-
0373U	Infectious agent detection by nucleic acid (dna and rna), respiratory tract infection, 17 bacteria, 8 fungus, 13 virus, and 16 antibiotic-resistance genes, multiplex amplified probe technique, upper or lower respiratory specimen	Х	-
0374U	Infectious agent detection by nucleic acid (dna or rna), genitourinary pathogens, identification of 21 bacterial and fungal organisms and identification of 21 associated antibiotic-resistance genes, multiplex amplified probe technique, urine	Х	-
0375U	Oncology (ovarian), biochemical assays of 7 proteins (follicle stimulating hormone, human epididymis protein 4, apolipoprotein a-1, transferrin, beta-2 macroglobulin, prealbumin [ie, transthyretin], and cancer antigen 125), algorithm reported as ovarian cancer risk score	Х	-
0376U	Oncology (prostate cancer), image analysis of at least 128 histologic features and clinical factors, prognostic algorithm determining the risk of distant metastases, and prostate cancerspecific mortality, includes predictive algorithm to androgen deprivationtherapy response, if appropriate	Х	-
0377U	Cardiovascular disease, quantification of advanced serum or plasma lipoprotein profile, by nuclear magnetic resonance (nmr) spectrometry with report of a lipoprotein profile (including 23 variables)	Х	-
0378U	Rfc1 (replication factor c subunit 1), repeat expansion variant analysis by traditional and repeat-primed pcr, blood, saliva, or buccal swab	Х	-
0379U	Targeted genomic sequence analysis panel, solid organ neoplasm, dna (523 genes) and rna (55 genes) by nextgeneration sequencing, interrogation for sequence variants, gene copy number amplifications, gene rearrangements, microsatellite instability, and tumor mutational burden	Х	-
0380U	Drug metabolism (adverse drug reactions and drug response), targeted sequence analysis, 20 gene variants and cyp2d6 deletion or duplication analysis with reported genotype and phenotype	Х	-
0381U	Maple syrup urine disease monitoring by patient-collected blood card sample, quantitative measurement of alloisoleucine, leucine, isoleucine, and valine, liquid chromatography with tandem mass spectrometry (lcms/ms)	Х	-
0382U	Hyperphenylalaninemia monitoring by patient-collected blood card sample, quantitative measurement of phenylalanine and tyrosine, liquid chromatography with tandem mass spectrometry (lc-ms/ms)	Х	-

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0383U	Tyrosinemia type i monitoring by patient-collected blood card sample, quantitative measurement of tyrosine, phenylalanine, methionine, succinylacetone, nitisinone, liquid chromatography with tandem mass spectrometry (lc-ms/ms)	×	-	
0384U				
	Nephrology (chronic kidney disease), carboxymethyllysine, methylglyoxal hydroimidazolone, and carboxyethyl lysine by liquid chromatography with tandem mass spectrometry (lcms/ms) and hba1c and estimated glomerular filtration rate (gfr), with risk score reported for predictive progression to high-stage kidney disease	Х	-	
0385U	Nephrology (chronic kidney disease), apolipoprotein a4 (apoa4), cd5 antigen-like (cd5l), and insulin-like growth factor binding protein 3 (igfbp3) by enzyme-linked immunoassay (elisa), plasma, algorithm combining results with hdl, estimated glomerular filtration rate (gfr) and clinical data reported as a risk score for developing diabetic kidney disease	х	-	
0386U	Gastroenterology (barrett's esophagus), p16, runx3, hpp1, and fbn1 methylation analysis, prognostic and predictive algorithm reported as a risk score for progression to high-grade dysplasia or esophageal cancer	Х	-	
0387U	Oncology (melanoma), autophagy and beclin 1 regulator 1 (ambra1) and loricrin (amlo) by immunohistochemistry, formalinfixed paraffin-embedded (ffpe) tissue, report for risk of progression	Х	-	
0388U	Oncology (non-small cell lung cancer), next-generation sequencing with identification of single nucleotide variants, copy number variants, insertions and deletions, and structural variants in 37 cancer-related genes, plasma, with report for alteration detection	Х	-	
0389U	Pediatric febrile illness (kawasaki disease [kd]), interferon alphainducible protein 27 (ifi27) and mast cell-expressed membrane protein 1 (mcemp1), rna, using reverse transcription polymerase chain reaction (rt-qpcr), blood, reported as a risk score for kd	х	-	
0390U	Obstetrics (preeclampsia), kinase insert domain receptor (kdr), endoglin (eng), and retinol-binding protein 4 (rbp4), by immunoassay, serum, algorithm reported as a risk score	Х	-	
0391U				
	Oncology (solid tumor), dna and rna by next-generation sequencing, utilizing formalin-fixed paraffin-embedded (ffpe) tissue, 437 genes, interpretive report for single nucleotide variants, splicesite variants, insertions/deletions, copy number alterations, gene fusions, tumor mutational burden, and microsatellite instability, with algorithm quantifying immunotherapy response score	-	Х	
0392U	Drug metabolism (depression, anxiety, attention deficit hyperactivity disorder [adhd]), gene-drug interactions, variant analysis of 16 genes, including deletion/duplication analysis of cyp2d6, reported as impact of gene-drug interaction for each drug	-	Х	

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0393U	Neurology (eg, parkinson disease, dementia with lewy bodies), cerebrospinal fluid (csf), detection of misfolded α -synuclein protein by seed amplification assay, qualitative	Х	-
0394T	High dose rate electronic brachytherapy, skin surface application, per fraction, includes basic dosimetry, when performed	Х	-
0394U	Perfluoroalkyl substances (pfas) (eg, perfluorooctanoic acid, perfluorooctane sulfonic acid), 16 pfas compounds by liquid chromatography with tandem mass spectrometry (lc-ms/ms), plasma or serum, quantitative	Х	-
0395T	High dose rate electronic brachytherapy, interstitial or intracavitary treatment, per fraction, includes basic dosimetry, when performed	Х	-
0395U	Oncology (lung), multi-omics (microbial dna by shotgun nextgeneration sequencing and carcinoembryonic antigen and osteopontin by immunoassay), plasma, algorithm reported as malignancy risk for lung nodules in early-stage disease	х	-
0396U	Obstetrics (pre-implantation genetic testing), evaluation of 300000 dna single-nucleotide polymorphisms (snps) by microarray, embryonic tissue, algorithm reported as a probability for single-gene germline conditions	х	-
0397T	Endoscopic retrograde cholangiopancreatography (ercp), with optical endomicroscopy (list separately in addition to code for primary procedure)	Х	-
0397U	Oncology (non-small cell lung cancer), cell-free dna from plasma, targeted sequence analysis of at least 109 genes, including sequence variants, substitutions, insertions, deletions, select rearrangements, and copy number variations	х	-
0398T	Magnetic resonance image guided high intensity focused ultrasound (mrgfus), stereotactic ablation lesion, intracranial for movement disorder including stereotactic navigation	Х	-
0398U	Gastroenterology (barrett esophagus), p16, runx3, hpp1, and fbn1 dna methylation analysis using pcr, formalin-fixed paraffin-embedded (ffpe) tissue, algorithm reported as risk score for progression to high-grade dysplasia or cancer	Х	-
0399U	Neurology (cerebral folate deficiency), serum, detection of anti-human folate receptor iggbinding antibody and blocking autoantibodies by enzyme-linked immunoassay (elisa), qualitative, and blocking autoantibodies, using a functional blocking assay for igg or igm, quantitative, reported as positive or not detected	х	-
0400U	Obstetrics (expanded carrier screening), 145 genes by nextgeneration sequencing, fragment analysis and multiplex ligationdependent probe amplification, dna, reported as carrier positive or negative	-	Х

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0401U	Cardiology (coronary heart disease [cad]), 9 genes (12 variants), targeted variant genotyping, blood, saliva, or buccal swab, algorithm reported as a genetic risk score for a coronary event	Х	-	
0403U	Oncology (prostate), mrna, gene expression profiling of 18 genes, first-catch post-digital rectal examination urine (or processed first-catch urine), algorithm reported as percentage of likelihood of detecting clinically significant prostate cancer	-	Х	
0404U	Oncology (breast), semiquantitative measurement of thymidine kinase activity by immunoassay, serum, results reported as risk of disease progression	Х	-	
0405U	Oncology (pancreatic), 59 methylation haplotype block markers, next-generation sequencing, plasma, reported as cancer signal detected or not detected	Х	-	
0406U	Oncology (lung), flow cytometry, sputum, 5 markers (meso-tetra [4- carboxyphenyl] porphyrin [tcpp], cd206, cd66b, cd3, cd19), algorithm reported as likelihood of lung cancer	Х	-	
0407U	Nephrology (diabetic chronic kidney disease [ckd]), multiplex electrochemiluminescent immunoassay (eclia) of soluble tumor necrosis factor receptor 1 (stnfr1), soluble tumor necrosis receptor 2 (stnfr2), and kidney injury molecule 1 (kim-1) combined with clinical data, plasma, algorithm reported as risk for progressive decline in kidney function	Х	-	
0408T	Insertion or replacement of permanent cardiac contractility modulation system, including contractility evaluation when performed, and programming of sensing and therapeutic pa	Х	-	
0408U	Infectious agent antigen detection by bulk acoustic wave biosensor immunoassay, severe acute respiratory syndrome coronavirus 2 (sars-cov-2) (coronavirus disease [covid-19])	Х	-	
0409T	Insertion or replacement of permanent cardiac contractility modulation system, including contractility evaluation when performed, and programming of sensing and therapeutic pa	Х	-	
0409U	Oncology (solid tumor), dna (80 genes) and rna (36 genes), by next-generation sequencing from plasma, including single nucleotide variants, insertions/deletions, copy number alterations, microsatellite instability, and fusions, report showing identified mutations with clinical actionability	-	Х	
0410T	Insertion or replacement of permanent cardiac contractility modulation system, including contractility evaluation when performed, and programming of sensing and therapeutic pa	Х	-	
0410U	Oncology (pancreatic), dna, whole genome sequencing with 5-hydroxymethylcytosine enrichment, whole blood or plasma, algorithm reported as cancer detected or not detected	Х	-	
0411T	Insertion or replacement of permanent cardiac contractility modulation system, including contractility evaluation when performed, and programming of sensing and therapeutic pa	Х	-	

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)411U				
	Psychiatry (eg, depression, anxiety, attention deficit hyperactivity disorder [adhd]), genomic analysis panel, variant analysis of 15 genes, including deletion/duplication analysis of cyp2d6 (for additional pla code with identical clinical descriptor, see 0345u. see appendix o to determine appropriate code assignment)	Х	-	
0412T	Removal of permanent cardiac contractility modulation system; pulse generator only	Х	-	
0412U	Beta amyloid, aβ42/40 ratio, immunoprecipitation with quantitation by liquid chromatography with tandem mass spectrometry (lc-ms/ms) and qualitative apoe isoformspecific proteotyping, plasma combined with age, algorithm reported as presence or absence of brain amyloid pathology	Х	-	
0413T	Removal of permanent cardiac contractility modulation system; transvenous electrode (atrial or ventricular)	Х	-	
0413U	Oncology (hematolymphoid neoplasm), optical genome mapping for copy number alterations, aneuploidy, and balanced/complex structural rearrangements, dna from blood or bone marrow, report of clinically significant alterations	-	Х	
0414T	Removal and replacement of permanent cardiac contractility modulation system pulse generator only	Х	-	
0414U	Oncology (lung), augmentative algorithmic analysis of digitized whole slide imaging for 8 genes (alk, braf, egfr, erbb2, met, ntrk1-3, ret, ros1), and kras g12c and pd-I1, if performed, formalin-fixed paraffinembedded (ffpe) tissue, reported as positive or negative for each biomarker	-	Х	
0415T	Repositioning of previously implanted cardiac contractility modulation transvenous electrode, (atrial or ventricular lead)	Х	-	
0415U	Cardiovascular disease (acute coronary syndrome [acs]), il-16, fas, fasligand, hgf, ctack, eotaxin, and mcp-3 by immunoassay combined with age, sex, family history, and personal history of diabetes, blood, algorithm reported as a 5-year (deleted risk) score for acs	х	-	
0416T	Relocation of skin pocket for implanted cardiac contractility modulation pulse generator	Х	-	
0416U	Infectious agent detection by nucleic acid (dna), genitourinary pathogens, identification of 20 bacterial and fungal organisms, including identification of 20 associated antibiotic-resistance genes, if performed, multiplex amplified probe technique, urine	Х	-	
	Programming device evaluation (in person) with iterative adjustment of the implantable device to test the function of the device and select optimal permanent programmed values	Х	-	
)417U	Rare diseases (constitutional/heritable disorders), whole mitochondrial genome sequence with heteroplasmy detection and deletion analysis, nuclear-encoded mitochondrial gene analysis of 335 nuclear genes, including sequence changes, deletions, insertions, and copy number variants analysis, blood or saliva, identification and categorization of mitochondrial disorder—associated genetic variants	х	-	

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0418T	Interrogation device evaluation (in person) with analysis, review and report, includes connection, recording and disconnection per patient encounter; implantable cardiac contr	Х	-	
0418U	Oncology (breast), augmentative algorithmic analysis of digitized whole slide imaging of 8 histologic and immunohistochemical features, reported as a recurrence score	Х	-	
0419U	Neuropsychiatry (eg, depression, anxiety), genomic sequence analysis panel, variant analysis of 13 genes, saliva or buccal swab, report of each gene phenotype	Х	-	
0420U	Oncology (urothelial), mRNA expression profiling by real-time quantitative PCR of MDK, HOXA13, CDC2, IGFBP5, and CXCR2 in combination with droplet digital PCR (ddPCR) analysis of 6 single-nucleotide polymorphisms (SNPs) genes TERT and FGFR3, urine, algorithm reported as a risk score for urothelial carcinoma	-	Х	
0421U	Oncology (colorectal) screening, quantitative real-time target and signal amplification of 8 rna markers (gapdh, smad4, acy1, areg, cdh1, kras, tnfrsf10b, egln2) and fecal hemoglobin, algorithm reported as a positive or negative for colorectal cancer risk	Х	-	
0422T	Tactile breast imaging by computer-aided tactile sensors, unilateral or bilateral	Х	-	
0422U	Oncology (pan-solid tumor), analysis of DNA biomarker response to anti-cancer therapy using cell-free circulating DNA, biomarker comparison to a previous baseline pre-treatment cell-free circulating DNA analysis using next-generation sequencing, algorithm reported as a quantitative change from baseline, including specific alterations, if appropriate	х	-	
0423U	Psychiatry (eg, depression, anxiety), genomic analysis panel, including variant analysis of 26 genes, buccal swab, report including metabolizer status and risk of drug toxicity by condition	Х	-	
0424U	Oncology (prostate), exosome-based analysis of 53 small noncoding RNAs (sncRNAs) by quantitative reverse transcription polymerase chain reaction (RT-qPCR), urine, reported as no molecular evidence, low-, moderate- or elevated-risk of prostate cancer	Х	-	
0425U	Genome (eg, unexplained constitutional or heritable disorder or syndrome), rapid sequence analysis, each comparator genome (eg, parents, siblings)	-	X	
0426U	Genome (eg, unexplained constitutional or heritable disorder or syndrome), ultra-rapid sequence analysis	-	Χ	
	Monocyte distribution width, whole blood (List separately in addition to code for primary procedure)	Х	-	
0428U	Oncology (breast), targeted hybrid-capture genomic sequence analysis panel, circulating tumor DNA (ctDNA) analysis of 56 or more genes, interrogation for sequence variants, gene copy number amplifications, gene rearrangements, microsatellite instability, and tumor mutation burden	-	Х	
0429U	Human papillomavirus (HPV), oropharyngeal swab, 14 high-risk types (ie, 16, 18, 31, 33, 35, 39, 45, 51, 52, 56, 58, 59, 66, and 68)	Х	-	

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0431U	Glycine receptor alpha1 IgG, serum or cerebrospinal fluid (CSF), live cell-binding assay (LCBA), qualitative	Х	-
0432U	Kelch-like protein 11 (KLHL11) antibody, serum or cerebrospinal fluid (CSF), cell-binding assay, qualitative	X	-
0433U	Oncology (prostate), 5 DNA regulatory markers by quantitative PCR, whole blood, algorithm, including prostate- specific antigen, reported as likelihood of cancer	Х	-
0434U	Drug metabolism (adverse drug reactions and drug response), genomic analysis panel, variant analysis of 25 genes with reported phenotypes	Х	-
0435U	Oncology, chemotherapeutic drug cytotoxicity assay of cancer stem cells (CSCs), from cultured CSCs and primary tumor cells, categorical drug response reported based on cytotoxicity percentage observed, minimum of 14 drugs or drug combinations	х	-
0436U	Oncology (lung), plasma analysis of 388 proteins, using aptamer-based proteomics technology, predictive algorithm reported as clinical benefit from immune checkpoint inhibitor therapy	Х	-
0437U	Psychiatry (anxiety disorders), mRNA, gene expression profiling by RNA sequencing of 15 biomarkers, whole blood, algorithm reported as predictive risk score	Х	-
0438U	analysis of 33 genes, including deletion/duplication analysis of CYP2D6, including reported phenotypes and	Х	-
	Myocrd contrast prfuj echo	Х	=
	(rs11716050 [LOC105376934], rs6560711 [WDR37], rs3735222 [SCIN/LOC107986769], rs6820447 [intergenic],	Х	-
0440T	Ablation, percutaneous, cryoablation, includes imaging guidance; upper extremity distal/peripheral nerve	Х	-
0440U	(rs710987 [LINC010019], rs1333048 [CDKN2B-AS1], rs12129789 [KCND3], rs942317 [KTN1-AS1], rs1441433	Х	-
0441T	Ablation, percutaneous, cryoablation, includes imaging guidance; lower extremity distal/peripheral nerve	Х	-
0441U		Х	-
0442T	plexus, pudendal nerve)	Х	-
0442U		Х	-
0443T	Real time spectral analysis of prostate tissue by fluorescence spectroscopy	Х	-
0443U	Neurofilament light chain (NfL), ultra-sensitive immunoassay, serum or cerebrospinal fluid	Х	-
0444T	unilateral or bilateral	Х	-
0444U	fusions, translocations, or other rearrangements, using DNA from formalin-fixed paraffin-embedded (FFPE)	-	Х
	removal of existing insert, unilateral or bilateral	Х	-
0445U		Х	-
0446T	Crtj subq insj impltbl glucose sensor sys	Х	-
0447T	Rmvl impltbl glucose sensor subq pocket via inc	Х	_

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0448T	Rmvl insj impltbl gluc sensor dif anatomic site	Х	-
0448U			
	Oncology (lung and colon cancer), DNA, qualitative, nextgeneration sequencing detection of single-nucleotide variants and deletions in EGFR and KRAS genes, formalin-fixed paraffinembedded (FFPE) solid tumor samples, reported as presence or absence of targeted mutation(s), with recommended therapeutic options	-	Χ
0449U			
	Carrier screening for severe inherited conditions (eg, cystic fibrosis, spinal muscular atrophy, beta hemoglobinopathies [including sickle cell disease], alpha thalassemia), regardless of race or self-identified ancestry, genomic sequence analysis panel, must include analysis of 5 genes (CFTR, SMN1, HBB, HBA1, HBA2)	Х	-
0464T	Visual ep testing for glaucoma w/interpj & reprt	Х	-
0470T	Oct skn img acquisj i&r 1st	Х	-
0471T	Oct skn img acquisj i&r addl	Х	-
0472T	Prgrmg io rta eltrd ra	Х	-
0473T	Reprgrmg io rta eltrd ra	Х	-
0474T	Insj aqueous drg dev io rsvr	Х	-
0485T	Oct middle ear with i&r unilateral	Х	-
0486T	Oct middle ear with i&r bilateral	Х	-
0488T	Diabetes prev online/electronic prgrm pr 30 days	Х	-
0489T	Autol regn cell tx scleroderma hands	Х	-
0490T	Autol regn cell tx scldr mlt inj one or both hands	Х	-
0500F	Initial prenatal care visit	Х	-
0501F	Prenatal flow sheet documented in medical record by first prenatal visit	Х	-
0502F	Subsequent prenatal care visit	Х	-
0503F	Postpartum care visit2	Х	-
0505F	Hemodialysis plan of care documented (esrd)	Х	-
0507F	Peritoneal dialysis plan of care documented (esrd)	Х	-
0509F	Urinary incontinence plan of care documented (ger)	Х	-
0510T	Removal of sinus tarsi implant	Х	-
0511T	Removal and reinsertion of sinus tarsi implant	Х	-
0512T	Extracorporeal shock wave for integumentary wound healing, high energy, including topical application and dressing care; initial wound	Х	-
0513F	Elevated blood pressure plan of care documented (ckd)1	Х	-

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0513T	Esw integ wnd hlg ea addl	Х	-
0514F	Plan of care for elevated hemoglobin level documented for patient receiving erythropoiesis-stimulating agent (esa) thera	Х	-
0516F	Anemia plan of care documented (esrd)1	Х	-
0517F	Glaucoma plan of care documented (ec)5	Х	-
0518F	Falls plan of care documented (ger)5	Х	-
0519F	Planned chemotherapy regimen, including at a minimum: drug(s) prescribed, dose, and duration, documented prior to initia	Х	-
0520F	Normal tissue dose constraints established within five treatment days from the initiation of a course of 3d conformal ra	Х	-
0521F	Plan of care to address pain documented (onc)1	Х	-
)524T	Ev cath dir chem abltj w/img	Х	-
0525F	Initial visit for episode (bkp)2	Х	-
0526F	Subsequent visit for episode (bkp)2	Х	-
0528F	Recommended follow-up interval for repeat colonoscopy of at least 10 years documented in colonoscopy report (end/polyp)	Х	-
0529F	Interval of 3 or more years since patient's last colonoscopy, documented (end/polyp)	Х	-
0535F	Dyspnea management plan of care, documented (pall cr)	Х	-
0537T	Chimeric antigen receptor t-cell (car-t) therapy; harvesting of blood-derived t lymphocytes for development of genetically modified autologous car-t cells, per day	Х	-
0538T	Chimeric antigen receptor t-cell (car-t) therapy; preparation of blood-derived t lymphocytes for transportation (eg, cryopreservation, storage)	Х	-
)539T	Chimeric antigen receptor t-cell (car-t) therapy; receipt and preparation of car-t cells for administration	Х	-
)540F	Glucorticoid management plan documented (ra)	Х	-
)540T	Chimeric antigen receptor t-cell (car-t) therapy; car-t cell administration, autologous	Х	-
)543T	Transapical mitral valve repair, including transthoracic echocardiography, when performed, with placement of artificial chordae tendineae	х	-
)544T	Transcatheter mitral valve annulus reconstruction, with implantation of adjustable annulus reconstruction device, percutaneous approach including transseptal puncture	Х	-
0545F	Plan for follow-up care for major depressive disorder, documented (mdd adol)	Х	-
0545T	Transcatheter tricuspid valve annulus reconstruction with implantation of adjustable annulus reconstruction device, percutaneous approach	Х	-

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0547T	Bone-material quality testing by microindentation(s) of the tibia(s), with results reported as a score	Х	-	
0550F	Cytopath report-nongyn spcmn	Х	-	
0551F	Cytopath report non-routine	Х	-	
0552T	Low-level laser therapy, dynamic photonic and dynamic thermokinetic energies, provided by a physician or other qualified health care professional	Х	-	
0554T	Bone strength and fracture risk using finite element analysis of functional data, and bone-mineral density, utilizing data from a computed tomography scan; retrieval and transmission of the scan data, assessment of bone strength and fracture risk and bone mineral density, interpretation and report	Х	-	
0555F	Symptom management plan of care documented (hf)	Х	-	
0555T	Bone strength and fracture risk using finite element analysis of functional data, and bone-mineral density, utilizing data from a computed tomography scan; retrieval and transmission of the scan data	Х	-	
0556F	Plan of care to achieve lipid control documented (cad)	Х	-	
0556T	·			
	Bone strength and fracture risk using finite element analysis of functional data, and bone-mineral density, utilizing data from a computed tomography scan; assessment of bone strength and fracture risk and bone mineral density	X	-	
0557F	Plan of care to manage anginal symptoms documented (cad)	Х	-	
0557T	Bone strength and fracture risk using finite element analysis of functional data, and bone-mineral density, utilizing data from a computed tomography scan; interpretation and report	Х	-	
0558T	Computed tomography scan taken for the purpose of biomechanical computed tomography analysis	Х	-	
0559T	Anatomic model 3d-printed from image data set(s); first individually prepared and processed component of an anatomic structure	Х	-	
0560T	Anatomic model 3d-printed from image data set(s); each additional individually prepared and processed component of an anatomic structure (list separately in addition to code for primary procedure)	Х	-	
0561T	Anatomic guide 3d-printed and designed from image data set(s); first anatomic guide	Х	-	
0562T	Anatomic guide 3d-printed and designed from image data set(s); each additional anatomic guide (list separately in addition to code for primary procedure)	Х	-	
0563T	Evac meibomian glnd heat bi	Х	-	
0564T	Onc chemo rx cytotox csc 14	Х	-	
0565T	Autol cell implt adps hrvg	Х	-	
0566T	Autol cell implt adps njx	Х	-	
0569T	Ttvr perq appr 1st prosth	Х	-	
0570T	Ttvr perq ea addl prosth	Х	-	

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75F Hiv rna control plan of care, documented (hiv)	X	-
80F Multidisciplinary care plan	X	-
Pt trnsfrd from anesth to cc	Х	-
82F No trnsfr from anesth to cc	Х	-
83F Transfer care checklist used	Х	-
No transfer care chklist used	Х	-
Perq islet cell transplant	Х	-
B5T Laps islet cell transplant	X	-
B6T Open islet cell transplant	Х	-
91T Hlth&wb coaching indiv 1st	X	-
92T Hlth&wb coaching indiv f-up	Х	-
93T Hlth&wb coaching group	Х	-
94T Osteot hum xtrnl lngth dev	Х	-
96T Temp fml iu vlv-pmp 1st insj	Х	-
97T Temp fml iu valve-pmp rplcmt	Х	-
98T Ncntc r-t fluor wnd img 1st	Х	-
99T Ncntc r-t fluor wnd img ea	Х	-
00T Ire abltj 1+tum organ perq	Х	-
01T Ire abltj 1+tumors open	Х	-
02T Transdermal gfr measurements	Х	-
03T Transdermal gfr monitoring	Х	-
04T Rem oct rta dev setup&educaj	Х	-
05T Rem oct rta techl sprt min 8	Х	-
06T Rem oct rta phys/qhp ea 30d	Х	-
07T Rem mntr pulm flu mntr setup	Х	-
08T Rem mntr pulm flu mntr alys	Х	-
09T Mrs disc pain acquisj data	Х	-
10T Mrs disc pain transmis data	Х	-
11T Mrs disc pain alg alys data	Х	-
12T Mrs discogenic pain i&r	Х	-
13T Perq tcat intratrl septl sht	Х	-
15T Eye mvmt alys w/o calbrj i&r	X	-

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0621T	Trabeculostomy interno laser	X	-
0622T	Trabeculostomy int lsr w/scp	Х	-
0623T	Auto quantification c plaque	X	-
0624T	Auto quan c plaq data prep	Х	-
0625T	Auto quan c plaq cptr alys	Х	-
0626T	Auto quan c plaq i&r	Х	-
0627T	Perq njx algc fluor Imbr 1st	Х	-
0628T	Perq njx algc fluor Imbr ea	Х	-
0629T	Perq njx algc ct lmbr 1st	Х	-
0630T	Perq njx algc ct Imbr ea	Х	-
0632T	Perq tcat us abltj nrv p-art	Х	-
0633T	Ct breast w/3d uni c	Х	-
0634T	Ct breast w/3d uni c+	Х	-
0635T	Ct breast w/3d uni c-/c+	Х	-
0636T	Ct breast w/3d bi c	Х	-
0637T	Ct breast w/3d bi c+	Х	-
0638T	Ct breast w/3d bi c-/c+	Х	-
0639T	Wrls skn snr anisotropy meas	Х	-
0640T	Noncontact near-infrared spectroscopy studies of flap or wound (eg, for measurement of deoxyhemoglobin, oxyhemoglobin, and ratio of tissue oxygenation [sto2]); image acquisition, interpretation and report, each flap or wound	Х	-
0643T	Transcatheter left ventricular restoration device implantation including right and left heart catheterization and left ventriculography when performed, arterial approach	Х	-
0644T	Transcatheter removal or debulking of intracardiac mass (eg, vegetations, thrombus) via suction (eg, vacuum, aspiration) device, percutaneous approach, with intraoperative reinfusion of aspirated blood, including imaging guidance, when performed	Х	-
0645T	Transcatheter implantation of coronary sinus reduction device including vascular access and closure, right heart catheterization, venous angiography, coronary sinus angiography, imaging guidance, and supervision and interpretation, when performed	Х	-
0647T	Insertion of gastrostomy tube, percutaneous, with magnetic gastropexy, under ultrasound guidance, image documentation and report	Х	-

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0651T	Magnetically controlled capsule endoscopy, esophagus through stomach, including intraprocedural positioning of capsule, with interpretation and report	Х	-	
0652T	Esophagogastroduodenoscopy, flexible, transnasal; diagnostic, including collection of specimen(s) by brushing or washing, when performed (separate procedure)	Х	-	
0653T	Esophagogastroduodenoscopy, flexible, transnasal; with biopsy, single or multiple	Х	-	
0654T	Esophagogastroduodenoscopy, flexible, transnasal; with insertion of intraluminal tube or catheter	Х	-	
0655T	Transperineal focal laser ablation of malignant prostate tissue, including transrectal imaging guidance, with mr- fused images or other enhanced ultrasound imaging	Х	-	
0656T	Vertebral body tethering, anterior; up to 7 vertebral segments	Х	-	
0657T	Vertebral body tethering, anterior; 8 or more vertebral segments	Х	-	
0658T	Electrical impedance spectroscopy of 1 or more skin lesions for automated melanoma risk score	Х	-	
0659T	Transcatheter intracoronary infusion of supersaturated oxygen in conjunction with percutaneous coronary revascularization during acute myocardial infarction, including catheter placement, imaging guidance (eg, fluoroscopy), angiography, and radiologic supervision and interpretation	Х	-	
0660T	Implantation of anterior segment intraocular nonbiodegradable drug-eluting system, internal approach	Х	-	
0661T	Removal and reimplantation of anterior segment intraocular nonbiodegradable drug-eluting implant	Х	-	
0662T	Scalp cooling, mechanical; initial measurement and calibration of cap	Х	-	
0663T	Scalp cooling, mechanical; placement of device, monitoring, and removal of device (list separately in addition to code for primary procedure)	Х	-	
0664T	Donor hysterectomy (including cold preservation); open, from cadaver donor	Х	-	
	Donor hysterectomy (including cold preservation); open, from living donor	Х	-	
0666T	Donor hysterectomy (including cold preservation); laparoscopic or robotic, from living donor	Х	-	
0667T	Donor hysterectomy (including cold preservation); recipient uterus allograft transplantation from cadaver or living donor	Х	-	
0668T	Backbench standard preparation of cadaver or living donor uterine allograft prior to transplantation, including dissection and removal of surrounding soft tissues and preparation of uterine vein(s) and uterine artery(ies), as necessary	Х	-	
0669T	Backbench reconstruction of cadaver or living donor uterus allograft prior to transplantation; venous anastomosis, each	Х	-	
0670T	Backbench reconstruction of cadaver or living donor uterus allograft prior to transplantation; arterial anastomosis, each	Х	-	
0672T	Ndovag cryg rf remdl tiss	Х	-	

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0673T Ablti b9 thyr ndul perg lasr	X		
0674T Laps insj nw/rpcmt prm isdss	X	-	
0675T Laps insj nw/rpcmt isdss 1ld	X	-	
0676T Laps insj nw/rpcmt isdss ea	X	-	
0677T Laps repos lead isdss 1st ld	X	-	
0678T Laps repos lead isdss ea add	X	-	
0679T Laps rmvl lead isdss	X	-	
0680T Insj/rplcmt pg only isdss	X	-	
0681T RIcj pulse gen only isdss	X	-	
0682T Removal pulse gen only isdss	X	-	
0683T Prgrmg dev eval isdss ip	X	-	
0684T Peri-px dev eval isdss ip	X	-	
0685T Interrog dev eval isdss ip	X	-	
0686T Histotripsy mal hepatcel tis	X	-	
0687T Tx amblyopia dev setup 1st	X	-	
0688T Tx amblyopia assmt w/report	X	-	
0689T Quan us tis charac w/o dx us	X	-	
0690T Quan us tis charac w/dx us	X	-	
0691T Auto alys xst ct std vrt fx	X	-	
0692T Therapeutic ultrafiltration	X	-	
0693T Compre ful bdy 3d mtn alys	X	-	
0694T 3d vol img&rcnstj brst/ax	X	-	
0695T Bdy srf mpg pm/cvdfb tm impl	X	-	
0696T Bdy surf mapg pm/cvdfb f/up	X	-	
0697T Quan mr tis wo mri mlt orgn	X	-	
0698T Quan mr tiss w/mri mlt orgn	X	-	
0700T Molec fluor img sus nev 1st	X	-	
0701T Molec fluor img sus nev ea	X	-	
0704T Rem tx amblyopia setup&edu	X	-	
0705T Rem tx amblyopia tech sprt	X	-	
0706T Rem tx amblyopia i&r phy/qhp	X	-	
0707T Njx b1 sub mtrl sbchdrl dfct	X	-	

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708T	Id ca immntx prep & 1st njx	Х	-	
709T	Id ca immntx each addl njx	Х	-	
710T	N-invas artl plaq alys	Х	-	
711T	N-nvs artl plaq alys dat prp	Х	-	
712T	N-nvs artl plaq alys quan	Х	-	
713T	N-nvs artl plaq alys rvw i&r	Х	-	
714T	Tprnl lsr ablt b9 prst8 hypr	Х	-	
716T	Car acous wavfrm rec cad rsk	Х	-	
717T	Adrc ther prtl rc tear	Х	-	
718T	Adrc ther prtl rc tear njx	Х	-	
719T	Pst vrt jt rplcmt lmbr 1 sgm	Х	-	
720T	Prq elc nrv stim cn wo implt	Х	-	
721T	Quan ct tiss charac w/o ct	Х	-	
722T	Quan ct tiss charac w/ct	Х	-	
723T	Qmrcp w/o dx mri sm anat ses	Х	-	
724T	Qmrcp w/dx mri same anatomy	Х	-	
725T	Vestibular dev impltj uni	Х	-	
726T	Rmvl implt vstibular dev uni	Х	-	
727T	Rmvl&rplcmt implt vstblr dev	Х	-	
728T	Dx alys vstblr implt uni 1st	Х	-	
729T	Dx alys vstblr implt uni sbq	Х	-	
730T	Trabeculotomy lsr w/oct gdn	Х	-	
731T	Augmnt ai-based fcl phnt a/r	Х	-	
732T	Immntx admn electroporatn im	Х	-	
733T	Rem bdy&lmb knmtc ther sply	Х	-	
734T	Rem bdy&lmb knmtc tx mgmt	Х	-	
736T	Colonic lavage 35+l water	Х	-	
737T	Xenograft impltj artclr surf	Х	-	
	Treatment planning for magnetic field induction ablation of malignant prostate tissue, using data from previously performed magnetic resonance imaging (mri) examination	Х	-	

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0739T	Ablation of malignant prostate tissue by magnetic field induction, including all intraprocedural, transperineal needle/catheter placement for nanoparticle installation and intraprocedural temperature monitoring, thermal dosimetry, bladder irrigation, and magnetic field nanoparticle activation	×	-	
0740T	Remote autonomous algorithm-based recommendation system for insulin dose calculation and titration; initial set- up and patient education	Х	-	
0741T	Remote autonomous algorithm-based recommendation system for insulin dose calculation and titration; provision of software, data collection, transmission, and storage, each 30 days	Х	-	
0742T	Absolute quantitation of myocardial blood flow (aqmbf), single-photon emission computed tomography (spect), with exercise or pharmacologic stress, and at rest, when performed (list separately in addition to code for primary procedure)	х	-	
0743T	Bone strength and fracture risk using finite element analysis of functional data and bone-mineral density, with concurrent vertebral fracture assessment, utilizing data from a computed tomography scan, retrieval and transmission of the scan data, measurement of bone strength and bone mineral density and classification of any vertebral fractures, with overall fracture risk assessment, interpretation and report	Х	-	
0744T	Insertion of bioprosthetic valve, open, femoral vein, including duplex ultrasound imaging guidance, when performed, including autogenous or nonautogenous patch graft (eg, polyester, eptfe, bovine pericardium), when performed	Х	-	
0748T	Injections of stem cell product into perianal perifistular soft tissue, including fistula preparation (eg, removal of setons, fistula curettage, closure of internal openings)	Х	-	
0749T	Bone strength and fracture-risk assessment using digital x-ray radiogrammetrybone mineral density (dxr-bmd) analysis of bone mineral density (bmd) utilizing data from a digital x ray, retrieval and transmission of digital x ray data, assessment of bone strength and fracture-risk and bmd, interpretation and report;	Х	-	
0750T	Bone strength and fracture-risk assessment using digital x-ray radiogrammetrybone mineral density (dxr-bmd) analysis of bone mineral density (bmd) utilizing data from a digital x ray, retrieval and transmission of digital x ray data, assessment of bone strength and fracture-risk and bmd, interpretation and report; with single-view digital x-ray examination of the hand taken for the purpose of dxr-bmd	Х	-	
0751T	Digitization of glass microscope slides for level ii, surgical pathology, gross and microscopic examination (list separately in addition to code for primary procedure)	Х	-	

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0752T	Digitization of glass microscope slides for level iii, surgical pathology, gross and microscopic examination (list separately in addition to code for primary procedure)	Х	-
0753T	Digitization of glass microscope slides for level iv, surgical pathology, gross and microscopic examination (list separately in addition to code for primary procedure)	Х	-
0754T	Digitization of glass microscope slides for level v, surgical pathology, gross and microscopic examination (list separately in addition to code for primary procedure)	Х	-
	Digitization of glass microscope slide for level vi, surgical pathology, gross and microscopic examination (list separately in addition to code for primary procedure)	Х	-
0756T	Digitization of glass microscope slides for special stain, including interpretation and report, group i, for microorganisms (eg, acid fast, methenamine silver) (list separately in addition to code for primary procedure)	Х	-
0757T	Digitization of glass microscope slides for special stain, including interpretation and report, group ii, all other (eg, iron, trichrome), except stain for microorganisms, stains for enzyme constituents, or immunocytochemistry and immunohistochemistry (list separately in addition to code for primary procedure)	х	-
0758T	Digitization of glass microscope slides for special stain, including interpretation and report, histochemical stain on frozen tissue block (list separately in addition to code for primary procedure)	Х	-
0759T	Digitization of glass microscope slides for special stain, including interpretation and report, group iii, for enzyme constituents (list separately in addition to code for primary procedure)	Х	-
0760T	Digitization of glass microscope slides for immunohistochemistry or immunocytochemistry, per specimen, initial single antibody stain procedure (list separately in addition to code for primary procedure)	Х	-
0761T	Digitization of glass microscope slides for immunohistochemistry or immunocytochemistry, per specimen, each additional single antibody stain procedure (list separately in addition to code for primary procedure)	Х	-
0762T	Digitization of glass microscope slides for immunohistochemistry or immunocytochemistry, per specimen, each multiplex antibody stain procedure (list separately in addition to code for primary procedure)	Х	-
0763T	Digitization of glass microscope slides for morphometric analysis, tumor immunohistochemistry (eg, her-2/neu, estrogen receptor/progesterone receptor), quantitative or semiquantitative, per specimen, each single antibody stain procedure, manual (list separately in addition to code for primary procedure)	Х	-
0764T	Assistive algorithmic electrocardiogram risk-based assessment for cardiac dysfunction (eg, low-ejection fraction, pulmonary hypertension, hypertrophic cardiomyopathy); related to concurrently performed electrocardiogram (list separately in addition to code for primary procedure)	х	-

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0765T	Assistive algorithmic electrocardiogram risk-based assessment for cardiac dysfunction (eg, low-ejection fraction, pulmonary hypertension, hypertrophic cardiomyopathy); related to previously performed electrocardiogram	х	-	
0766T	Transcutaneous magnetic stimulation by focused low-frequency electromagnetic pulse, peripheral nerve, initial treatment, with identification and marking of the treatment location, including noninvasive electroneurographic localization (nerve conduction localization), when performed; first nerve	Х	-	
0767T	Transcutaneous magnetic stimulation by focused low-frequency electromagnetic pulse, peripheral nerve, initial treatment, with identification and marking of the treatment location, including noninvasive electroneurographic localization (nerve conduction localization), when performed; each additional nerve (list separately in addition to code for primary procedure)	Х	-	
0770T	Virtual reality technology to assist therapy (list separately in addition to code for primary procedure)	Х	-	
0771T	Virtual reality (vr) procedural dissociation services provided by the same physician or other qualified health care professional performing the diagnostic or therapeutic service that the vr procedural dissociation supports, requiring the presence of an independent, trained observer to assist in the monitoring of the patient's level of dissociation or consciousness and physiological status; initial 15 minutes of intraservice time, patient age 5 years or older	х	-	
0772T	Virtual reality (vr) procedural dissociation services provided by the same physician or other qualified health care professional performing the diagnostic or therapeutic service that the vr procedural dissociation supports, requiring the presence of an independent, trained observer to assist in the monitoring of the patient's level of dissociation or consciousness and physiological status; each additional 15 minutes intraservice time (list separately in addition to code for primary service)	х	-	
0773T	Virtual reality (vr) procedural dissociation services provided by a physician or other qualified health care professional other than the physician or other qualified health care professional performing the diagnostic or therapeutic service that the vr procedural dissociation supports; initial 15 minutes of intraservice time, patient age 5 years or older	х	-	
0774T	Virtual reality (vr) procedural dissociation services provided by a physician or other qualified health care professional other than the physician or other qualified health care professional performing the diagnostic or therapeutic service that the vr procedural dissociation supports; initial 15 minutes of intraservice time, patient age 5 years or older each additional 15 minutes intraservice time (list separately in addition to code for primary service	Х	-	

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0776T	Therapeutic induction of intra-brain hypothermia, including placement of a mechanical temperature-controlled cooling device to the neck over carotids and head, including monitoring (eg, vital signs and sport concussion assessment tool 5 [scat5]), 30 minutes of treatment	X	-
0777T	Real-time pressure-sensing epidural guidance system (list separately in addition to code for primary procedure)	Х	-
0778T	Surface mechanomyography (smmg) with concurrent application of inertial measurement unit (imu) sensors for measurement of multi-joint range of motion, posture, gait, and muscle function	Х	-
0779T	Gastrointestinal myoelectrical activity study, stomach through colon, with interpretation and report	Х	-
0780T	Instillation of fecal microbiota suspension via rectal enema into lower gastrointestinal tract	Χ	-
0781T	Bronchoscopy, rigid or flexible, with insertion of esophageal protection device and circumferential radiofrequency destruction of the pulmonary nerves, including fluoroscopic guidance when performed; bilateral mainstem bronchi	Х	-
0782T	Bronchoscopy, rigid or flexible, with insertion of esophageal protection device and circumferential radiofrequency destruction of the pulmonary nerves, including fluoroscopic guidance when performed; unilateral mainstem bronchus	Х	-
)783T	Transcutaneous auricular neurostimulation, set-up, calibration, and patient education on use of equipment	X	-
0784T	Insertion or replacement of percutaneous electrode array, spinal, with integrated neurostimulator, including imaging guidance, when performed	Х	-
)785T	Revision or removal of neurostimulator electrode array, spinal, with integrated neurostimulator	Х	-
)786T	Insertion or replacement of percutaneous electrode array, sacral, with integrated neurostimulator, including imaging guidance, when performed	Х	-
787T	Revision or removal of neurostimulator electrode array, sacral, with integrated neurostimulator	Х	-
)790T	Revision (eg, augmentation, division of tether), replacement, or removal of thoracolumbar or lumbar vertebral body tethering, including thoracoscopy, when performed	Х	-
)794T			
	Patient-specific, assistive, rules-based algorithm for ranking pharmaco-oncologic treatment options based on the patient's tumor-specific cancer marker information obtained from prior molecular pathology, immunohistochemical, or other pathology results which have been previously interpreted and reported separately	Х	-
)809T	Arthrodesis, sacroiliac joint, percutaneous or minimally invasive (indirect visualization), with image guidance, placement of transfixing device(s) and intraarticular implant(s), including allograft or synthetic device(s)	Х	-

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0859T			
	Noncontact near-infrared spectroscopy (eg, for measurement of deoxyhemoglobin, oxyhemoglobin, and ratio of tissue oxygenation), other than for screening for peripheral arterial disease, image acquisition, interpretation, and report; each additional anatomic site (List separately in addition to code for primary procedure)	Х	-
0860T	Noncontact near-infrared spectroscopy (eg, for measurement of deoxyhemoglobin, oxyhemoglobin, and ratio of tissue oxygenation), for screening for peripheral arterial disease, including provocative maneuvers, image acquisition, interpretation, and report, one or both lower extremities	Х	-
1000F	Tobacco use, smoking, assessed1	Х	-
1002F	Anginal symptoms and level of activity assessed (nma - no measure associated)	Х	-
1003F	Level of activity assessed (nma no measure associated)	Х	-
1004F	Clinical symptoms of volume overload (excess) assessed (nma - no measure associated)	X	-
1005F	Asthma symptoms evaluated (includes physician documentation of numeric frequency of symptoms or patient completion of an asthma assessment tool/survey/questionnaire) (nma - no	Х	-
1006F	Osteoarthritis symptoms and functional status assessed	Х	-
1007F	Use of anti-inflammatory or analgesic over-the-counter (otc) medications for symptom relief assessed	Х	-
1008F	Gastrointestinal and renal risk factors assessed for patients on prescribed or otc nsaids	X	-
1010F	Severity of angina assessed by level of activity (cad)	Х	-
1011F	Angina present (cad)	X	-
1012F	Angina absent (cad)	Х	-
1015F	Chronic obstructive pulmonary disease (copd) symptoms assessed (includes assessment of at least one of the following:	Х	-
1018F	Dyspnea assessed, not present (copd)	Х	-
1019F	Dyspnea assessed, present (copd)	Х	-
1022F	Pneumococcus immunization status assessed (cap, copd)	Х	-
1026F	Co-morbid conditions assessed 9eg, includes assessment for presence or absence of: malignancy, liver disease,	Х	-
1030F	Influenza immunization status assessed (cap)	Х	-
1031F	Smoking status and exposure to second hand smoke in the home assessed (asthma)	Х	-
	Current tobacco smoker or currently exposed to secondhand smoke (asthma)	Х	-
	Current tobacco non-smoker and not currently exposed to secondhand smoke (asthma)	Х	-
1034F	Current tobacco smoker (cad, cap, copd, dm, pv)	Х	-
1035F	Current smokeless tobacco user (eg chew, snuff)(pv)	Х	-

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1036F	Current tobacco non-user (cad, cap, copd, pv), (dm), (ibd)	Х	-	
1038F	Persistent asthma (mild, moderate or severe)	Х	-	
1039F	Intermittent asthma	Х	-	
1040F	Dsm-iv¿ criteria for major depressive disorder documented (mdd)	Х	-	
1050F	History obtained regarding new or changing moles (ml)	Х	-	
1052F	Type, anatomic location, and activity all assessed (ibd)	Х	-	
1055F	Visual functional staus assessed (ec)	Х	-	
1060F	Documentation of permanent or persistent or paroxysmal atrial fibrillation (str)	Х	-	
1061F	Documentation of absence of permanent and persistent and paroxysmal atrial fibrillation (str)	Х	-	
	Ischemic stroke symptom onset of less than 3 hours prior to arrival (str)	Х	-	
1066F	Ischemic stroke symptom onset greater than or equal to 3 hours prior to arrival (str)	Х	-	
1070F	Alarm symptoms (involuntary weight loss, dysphagia, or gastrointestinal bleeding) assessed; none present (gerd)	Х	-	
1071F	Alarm symptoms (involuntary weight loss, dysphagia, or gastrointestinal bleeding) assessed; one or more present (gerd)	Х	-	
1090F	Presence or absence of urinary incontinence assessed (ger)	Х	-	
1091F	Urinary incontinence characterized (eg frequency, volume, timing, type of symptoms, how bothersome) (ger)	Х	-	
1100F	Patient screened for future fall risk; documentation of two or more falls in the past year or any fall with injury in the	Х	-	
1101F	Patient screened for fall risk; documentation of no falls in the past year or only one fall without injury in the past y	Х	-	
1110F	Patient discharged from an inpatient facility (eg hospital, skilled nursing facility, or rehabilitation facility) within	Х	-	
	Discharge medications reconciled with the current medication list in outpatient medical record (ger)	Х	-	
	Auricular or periauricular pain assessed (aoe)	Х	-	
	Gerd symptoms assessed after 12 months of therapy (gerd)5	Х	-	
	Initial evaluation for condition (hep c)1	Х	-	
	Subsequent evaluation for condition (hep c)1	Х	-	
1123F	Advance care planning discussed and documented advance care plan or surrogate decision maker documented in the medical record (dem) (ger, pall cr)	Х	-	

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1124F	Advance care planning discussed and documented in the medical record, patient did not wish or was not able to name a surrogate decision maker or provide an advance care plan (Х	-
1125F	Pain severity quantified; pain present (onc)1	Х	-
	Pain severity quantified; no pain present (onc)1	Х	_
	New episode for condition (nma-no measure associated)	Х	-
	Subsequent episode for condition (nma-no measure associated)	Х	-
	Back pain and function assessed, including all of the following: pain assessment and functional status and patient histo	Х	-
1134F	Episode of back pain lasting 6 weeks or less (bkp)	Х	-
	Episode of back pain lasting longer than six weeks (bkp)2	X	-
	Episode of back pain lasting 12 weeks or less (bkp)2	X	-
	Episode of back pain lasting longer than 12 weeks (bkp)2	Х	-
	Documentation that a patient has a substantial risk of death within 1 year (pall cr)	Х	-
	Documentation that a patient does not have a substantial risk of death within one year (pall cr)	Х	-
	Documentation of advanced disease diagnosis, goals of care prioritize comfort (pall cr)	Х	-
	Documentation of advanced disease diagnosis, goals of care do not prioritize comfort (pall cr)	Х	-
1157F	Advance care plan or similar legal document present in the medical record (coa)	Х	-
1158F	Advance care planning discussion documented in the medical record (coa)	Х	-
1159F	Medication list documented in medical record (coa)	Х	-
1160F	Rvw meds by rx/dr in rcrd	Х	-
1170F	Functional status assessed (coa) (ra)	Х	-
1175F	Functional status for dementia assessed and results reviewed (dem)	Х	-
1180F	All specified thromboembolic risk factors assessed (afib)	Х	-
1181F	Neuropsychiatric symptoms assessed and results reviewed (dem)	Х	-
1182F	Neuropsychiatric symptoms, one or more present (dem)	Х	-
1183F	Neuropsychiatric symptoms, absent (dem)	Х	-
1200F	Seizure type(s) and current seizure frequency(ies) documented (epi)	Х	-
1205F	Etiology of epilepsy or epilepsy syndrome(s) reviewed and documented (epi)	Х	-
1220F	Patient screened for depression (sud)	Х	-
1400F	Prkns diag rviewed	Х	
1450F	Symptoms improved or remained consistent with treatment goals since last assessment (hf)	Х	-
1451F	Symptoms demonstrated clinically important deterioration since last assessment (hf)	Х	-

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1460F	Qualifying cardiac event/diagnosis in previous 12 months (cad)	Х	-	
1461F	No qualifying cardiac event/diagnosis in previous 12 months (cad)	Х	-	
1490F	Dementia severity classified, mild (dem)	Х	-	
1491F	Dementia severity classified, moderate (dem)	Х	-	
1493F	Dementia severity classified, severe (dem)	Х	-	
1494F	Cognition assessed and reviewed (dem)	Х	-	
1500F	Symptom + sign symm polyneuro	Х	-	
1501F	Not initial eval for cond	Х	-	
1502F	Pt queried pain fxn w/instr	Х	-	
1503F	Pt queried symp resp insufficient	Х	-	
1504F	Pt has resp insufficiency	Х	-	
1505F	Pt has no resp insufficiency	Х	-	
2000F	Blood pressure measured (ckd)(dm)	Х	-	
2001F	Weight recorded (pag)	Х	-	
2002F	Clinical signs of volume overload (excess) assessed (nma - no measure associated)	Х	-	
2004F	Initial examination of the involved joint(s)	Х	-	
2010F	Vital signs recorded (includes at minimum: temperature, pulse, respiration, and blood pressure)(cap)	Х	-	
2014F	Mental status assessed (normal/mildly impaired/severely impaired)(cap)	Х	-	
2015F	Asthma impairment assessed (asthma)	Х	-	
2016F	Asthma risk assessed (asthma)	Х	-	
2018F	Hydration status assessed (normal/mildly dehydrated/severely dehydrated)	Х	-	
	Dilated macular exam performed, including documentation of the presence or absence of macular thickening or hemmorrhage	Х	-	
2020F	Dilated fundus evaluation performed within six months prior to cataract surgery (ec)	Х	-	
2021F	Dilated macular or fundus exam performed, including documentation of the presence or absence of macular edema and level	Х	-	
2022F	Dilated retinal eye exam with interpretation by an ophthalmologist or optometrist documented and reviewed (dm)	Х	-	
2023F	Dilat rta xm w/o rtnopthy	Х	-	
2024F	Seven standard field stereoscopic photos with interpretation by an ophthalmologist or optemetrist documented and review	Х	-	
2025F	F 7 fld rta photo w/o rtnopthy	Х	-	
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isclaimer njectable	Please note that coverage may vary by plan type and may not follow the listed services. These codes are updated quarterly. Additionally, these coding lists do not redrugs, or specialty medications and should be directed to the Pharmacy link option within the website.	flect information re	
2026F	Eye imaging validated to match diagnosis from seven standard field stereoscopic photos results documented and reviewed	Х	-
2027F	Optic nerve head evaluation performed (ec)	Х	-
2028F	Foot examination performed (includes examination through visual inspection, sensory exam with monofilament, and pulse	Х	-
2029F	Complete physical skin exam performed (ml)	Х	-
2030F	Hydration status documented, normally hydrated (pag)	Х	-
2031F	Hydration status documented, dehydrated (pag)	Х	-
2033F	Eye img valid w/o rtnopthy	Х	-
2035F	Tympanic membrane mobility assessed with pneumatic otoscopy or tympanometry (ome)	Х	-
2040F	Physical examination on the date of the initial visit for low back pain performed, in accordance with specifications (bk	Х	-
2044F	Documentation of mental health assessment prior to intervention (back surgery or epidural steroid injection) or for back	Х	-
2050F	Wound characteristics including size and nature of wound base tissue and amount of drainage prior to debridement documented (cwc)	Х	-
2060F	Patient interviewed directly by evaluating clinician on or before date of diagnosis of major depressive disorder (mdd ad	Х	-
3006F	Chext xray results documented and reviewed (cap)	Х	-
3008F	Body mass index (bmi), documented (pv)	Х	-
3011F	Lipid panel results documented and reviewed (must include total cholesterol, hdl-c, triglycerides and calculated ldl-c)	Х	-
3014F	Screening mammography results documented and reviewed	Х	-
3015F	Cervical cancer screening results documented and reviewed (pv)	Х	-
3016F	Patient screened for unhealthy alcohol use using a systematic screening method (pv)	Х	-
3017F	Colorectal cancer screening results documented and reviewed (pv) includes: fecal occult blood testing annually, flexible	Х	-
3018F	Pre-procedure risk assessment and depth of insertion and quality of the bowel prep and complete description of polyp(s) found, including location of each polyp, size, number and gross morphology and recommendations for follow-up in final colonoscopy report documented (end/polyp)	Х	-
3019F	Left ventricular ejection fraction (lvef) assessment planned post discharge (hf)	Х	_

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3020F	Left ventricular function (lvf) assessment (eg, echocardiography, nuclear test, or ventriculography) documented in the medical record (includes quantitative or qualitative ass	Х	-
3021F	Left ventricular ejection fraction (Ivef) <40% or documentation of moderately or severely depressed left ventricular	Х	-
3022F	Left ventricular ejection fraction (lvef)>=40% or documentation as normal or mildly depressed left ventricular systolic	Х	-
3023F	Spirometry results documented and reviewed (copd)	Х	-
3025F	Spirometry test results demonstrate fev1/fvc<70% with copd symptoms (eg, dyspnea, cough/sputum, wheezing)	Х	-
3027F	Spirometry test results demonstrate fev1/fvc>=70% or patient does not have copd symptoms (copd)	Х	-
3028F	Oxygen saturation results documneted and reviewed (includes assessment through pulse oximetry or arterial blood gas	Х	-
3035F	Oxygen saturation ,=88% or a pao2<=55 hg1 (copd)	Х	-
3037F	Oxygen saturation > 88% or pao2 > 55mmhg1 (copd)	Х	-
3038F	Pulmonary function test performed within 12 months prior to surgery (lung/esop cx)	Х	-
3040F	Functional expiratory volume (fev1) <40% of predicted value (copd)	Х	-
3042F	Functional expiratory volume (fev1) >=40% of predicted value (copd)	Х	-
3044F	Most recent hemoglobin a1c level <7.0% (dm)	Х	-
3046F	Hemoglobin a1c level > 9.0%	Х	-
3048F	Most recent Idl-c less than 100 mg/dl (cad) (dm)	Х	-
3049F	Most recent IdI-c 100-129 mg/dl (cad) (dm)	Х	-
3050F	Most recent Idl-c greater than or equal to 130 mg/dl (cad) (dm)	Х	-
3051F	Hg a1c>equal 7.0%<8.0%	Х	-
3052F	Hg a1c>equal 8.0%	Х	-
3055F	Left ventricular ejection fraction (Ivef) less than or equal to 35% (hf)	Х	-
3056F	Left ventricular ejection fraction (Ivef) greater than 35% or no Ivef result available (hf)	Х	-
3060F	Positive microalbuminuria test result documneted and reviewed (dm)	Х	-
3061F	Negative microalbuminuria test result documented and reviewed (dm)	Х	-
3062F	Positive macroalbuminuria test result documented and reviewed (dm)	Х	-
3066F	Documentation of treatment for nephropathy (eg, patient receiving dialyssi, patient being treated for esrd, crf, arf	Х	-
3072F	Low risk for retinopathy (no evidence of retinopathy in the prior year) (dm)	Х	-

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3073F	Pre-surgical (cataract) axial length, corneal power measurement and method of intraocular lens power calculation documen	Х	-	
3074F	Most recent systolic blood pressure less than 130 mm hg (dm) (htn, ckd, cad)	Х	-	
3075F	Most recent systolic blood pressure 130 - 139 mm hg (dm) (htn, ckd, cad)	Х	-	
3077F	Most recent systolic blood pressure greater than or equal to 140 mm hg (htn, ckd, cad) (dm)	Х	-	
3078F	Most recent diastolic blood pressure less than 80 mm hg (htn, ckd, cad) (dm)	Х	-	
3079F	Most recent diastolic blood pressure 80-89 mm hg (htn, ckd, cad) (dm)	Х	-	
3080F	Most recent diastolic blood pressure greater than or equal to 90 mm hg (htn, ckd, cad) (dm)	Х	-	
3082F	Kt/v <1.2 (clearance of urea (kt)/volume (v)) (esrd)	Х	-	
3083F	Kt/v equal to or greater than 1.2 and less than 1.7 (clearance of urea (kt)/volume (v)) (esrd)	Х	-	
3084F	Kt/v >= 1.7 (clearance of urea (kt)/volume (v)) (esrd)	Х	-	
3085F	Suicide risk assessed (mdd)	Х	-	
3088F	Major depressive disorder, mild (mdd)	Х	-	
3089F	Major depressive disorder, moderate (mdd)	Х	-	
3090F	Major depressive disorder, severe without psychotic features (mdd)	Х	-	
3091F	Major depressive disorder, severe with psychotic features (mdd)	Х	-	
3092F	Major depressive disorder, in remission (mdd)	Х	-	
3093F	Documentation of new diagnosis of initial or recurrent episode of major depressive disorder (mdd)	Х	-	
3095F	Central dual - energy x-ray absorptionmetry (dxa) results documented (op)	Х	-	
3096F	Central dual - energy x-ray absorptionmetry (dxa) ordered (op)	Х	-	
3100F	Carotid imaging study report includes direct or indirect reference to measurements of distal internal carotid diameter a	Х	-	
3110F	Documentation in final ct or mri report of presence or absence of hemorrhage and mass lesion and acute infarction (str)	Х	-	
3111F	Ct or mri of the brain performed in the hospital within 24 hours of arrival or performed in an outpatient imaging center, to confirm initial diagnosis of stroke, tia or intrac	Х	-	
3112F	Ct or mri of the brain performed greater than 24 hours after arrival to the hospital or performed in an outpatient imaging center for purpose other than confirmation of initia	Х	-	
3115F	Quantitative results of an evaluation of current level of activity and clinical symptoms (hf)	Х	-	
3117F	Heart failure disease specific structured assessment tool completed (hf)	Х	-	
3118F	New york heart association (nyha) class documented (hf)	Х	-	
3119F	No evaluation of level of activity or clinical symptoms (hf)	Х	-	

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3120F	12-lead ecg performed (em)	Х	-	
3126F	Esoph bx rprt w/dyspl info	Х	-	
3130F	Upper gastrointestinal endoscopy performed (gerd)	Х	-	
3132F	Documentation of referral for upper gastrointestinal endoscopy (gerd)	Х	-	
	Upper gastrointestinal endoscopy report indicates suspicion of barrett's esophagus (gerd)	Х	-	
3141F	Upper gastrointestinal endoscopy report indicates no suspicion of barrett's esophagus (gerd)	Х	-	
	Barium swallow test ordered (gerd)	Х	-	
3150F	Forceps esophageal biopsy performed (gerd)	Х	-	
3155F	Cytogenetic testing performed on bone marrow at time of diagnosis or prior to initiating treatment (hem)	Х	-	
3160F	Documentation of iron stores prior to initiating erythropoietin therapy (hem)	Х	-	
3170F	Flow cytometry studies performed at time of diagnosis or prior to initiating treatment (hem)	Х	-	
3200F	Barium swallow test not ordered (gerd)	Х	-	
	Group a strep test performed (phar)	Х	-	
3215F	Patient has documented immunity to hepatitis a (hep-c)	Х	-	
3216F	Patient has documented immunity to hepatitis b (hep-c)	Х	-	
3218F	Rna testing for hepatitis c documented as performed within six months prior to initiation of antiviral treatment for hep	Х	-	
3220F	Hepatitis c quantitative rna testing documented as performed at 12 weeks from initiation of antiviral treatment (hep-c)	Х	-	
3230F	Documentation that hearing test was performed within 6 months prior to tympanostomy tube insertion (ome)	Х	-	
3250F	Specimen biopsy site other than anatomic location of primary tumor (eg, liver biopsy, lymph node biopsy) (path)	X	-	
3260F	Pt category (primary tumor), pn category (regional lymph nodes), and histologic grade documented in pathology report (pa	х	-	
3265F	Ribonucleic acid (rna) testing for hepatitis c viremia ordered or results documented (hep c)1	Х	-	
3266F	Hepatitis c genotype testing documented as performed prior to initiation of antiviral treatment for hepatitis c (hep c)1	Х	-	
3267F	Pathology report includes pt category, pn category, gleason score and statement about margin status (path)	Х	-	
3268F	Prostate-specific antigen (psa), and primary tumor (t) stage, and gleason score documented prior to initiation of treatm	Х	-	

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3269F	Bone scan performed prior to initiation of treatment or at any time since diagnosis of prostate cancer (prca)1	Х	-
3270F	Bone scan not performed prior to initiation of treatment nor at any time since diagnosis of prostate cancer (prca)1	Х	-
3271F	Low risk of recurrence, prostate cancer (prca)1	Х	-
3272F	Intermediate risk of recurrence, prostate cancer (prca)1	Х	-
3273F	High risk of recurrence, prostate cancer (prca)1	Х	-
3274F	Prostate cancer risk of recurrence not determined or neither low, intermediate nor high (prca)1	Х	-
3278F	Serum levels of calcium, phosphorus, intact parathyroid hormone (pth) and lipid profile ordered (ckd)1	Х	-
3279F	Hemoglobin level greater than or equal to 13 g/dl (ckd, esrd)1	Х	-
3280F	Hemoglobin level 11 g/dl to 12.9 g/dl (ckd, esrd)1	Х	-
3281F	Hemoglobin level less than 11 g/dl (ckd, esrd)1	Х	-
3284F	Intraocular pressure (iop) reduced by a value of greater than or equal to 15% from the pre-intervention level (ec)5	Х	-
3285F	Intraocular pressure (iop) reduced by a value less than 15% from the pre-intervention level (ec)5	Х	-
3288F	Falls risk assessment documented (ger)5	Х	-
3290F	Patient is d (rh) negative and unsensitized (prenatal)1	Х	-
3291F	Patient is d (rh) positive or sensitized (prenatal)1	Х	-
3292F	Hiv testing ordered or documented and reviewed during the first or second prenatal visit (prenatal)1	Х	-
	Abo and rh blood typing documented as performed (pre-cr)	Х	-
	Group b streptococcus (gbs) screening documented as performed during week 35-37 gestation (pre-cr)	Х	-
3300F	American joint committee on cancer (ajcc) stage documented and reviewed prior to the initiation of therapy (onc)1	Х	-
3301F	Cancer stage documented in medical record as metastatic and reviewed prior to the initiation of therapy (onc)1	Х	-
3315F	Estrogen receptor (er) or progesterone receptor (pr) positive breast cancer (onc)1	Х	-
3316F	Estrogen receptor (er) and progesterone receptor (pr) negative breast cancer (onc)1	Х	-
3317F	Pathology report confirming malignancy documented in the medical record and reviewed prior to the initiation of chemothe	Х	-
3318F	Pathology report confirming malignancy documented in the medical record and reviewed prior to the initiation of radiatio	Х	-

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3319F	One of the following diagnostic imaging studies ordered: (chest x-ray, ct, ultrasound, mri, pet, or nuclear medicine sca	Х	-
3320F	None of the following diagnostic imaging studies ordered: (chest x-ray, ct, ultrasound, mri, pet, or nuclear medicine sc	Х	-
3321F	Ajcc cancer stage 0 or ia melanoma, documented (ml)	Х	-
3322F	Melanoma greater than ajcc stage 0 or ia (ml)	Х	-
3323F	Clinical tumor, node and metastases (tnm) staging documented and reviewed prior to surgery (lung/esop cx)	Х	-
3324F	Mri or ct scan ordered, reviewed or requested (epi)	Х	-
3325F	Preoperative assessment of functional or medical indication(s) for surgery prior to the cataract surgery with intraocula	Х	-
3328F	Performance status documented and reviewed within 2 weeks prior to surgery(lung/esop cx)	Х	-
	Imaging study ordered (bkp)2	Х	-
3331F	Imaging study not ordered (bkp)2	Х	-
3340F	Breast imaging-reporting and data system (bi-rads) assessment category 0, documented (rad)5	Х	-
3341F	Breast imaging-reporting and data system (bi-rads) assessment category 1, documented (rad)5	Х	-
3342F	Breast imaging-reporting and data system (bi-rads) assessment category 2, documented (rad)5	Х	-
3343F	Breast imaging-reporting and data system (bi-rads) assessment category 3, documented (rad)5	Х	-
3344F	Mammogram assessment category of "suspicious," documented (rad)	Х	-
3345F	Breast imaging-reporting and data system (bi-rads) assessment category 5, documented (rad)5	Х	-
3350F	Mammogram assessment category of "known biopsy proven malignancy", documented (rad)	Х	-
3351F	Negative screen for depressive symptoms as categorized by using a standardized depression screening/assessment tool(mdd)	Х	-
3352F	No significant depressive symptoms as categorized by using a standardized depression assessment tool (mdd)	Х	-
3353F	Mild to moderate depressive symptoms as categorized by using a standardized depression screening/assessment tool (mdd)	Х	-
3354F	Clinically significant depressive symptoms as categorized by using a standardized depression screening/assessment tool (Х	-
3370F	Ajcc breast cancer stage 0, documented (onc)	Х	-
	Ajcc breast cancer stage i: t1mic, t1a or t1b (tumor size ? 1 cm), documented (onc)	Х	-
3374F	Ajcc breast cancer stage i: t1c (tumor size > 1cm to 2 cm), documented (onc)	Х	-

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3376F Ajcc breast cancer stage ii, documented (onc)	X	-
3378F Ajcc breast cancer stage iii, documented (onc)	X	-
3380F Ajcc breast cancer stage iv, documented (onc)	X	-
3382F Ajcc colon cancer, stage 0, documented (onc)	X	-
3384F Ajcc colon cancer, stage i, documented (onc)	X	-
3386F Ajcc colon cancer, stage ii, documented (onc)	Х	-
3388F Ajcc colon cancer, stage iii, documented (onc)	X	-
3390F Ajcc colon cancer, stage iv, documented (onc)	X	-
Quantitative her2 immunohistochemistry (ihc) evaluation of breast cancer consistent with the scoring system defined in the asco/cap guidelines (path)	Х	-
Quantitative non-her2 immunohistochemistry (ihc) evaluation of breast cancer (eg, testing for estrogen or progesterone receptors [er/pr]) performed (path)9	Х	-
3450F Dyspnea screened, no dyspnea or mild dyspnea (pall cr)	Х	-
3451F Dyspnea screened, moderate or severe dyspnea (pall cr)	Х	-
3452F Dyspnea not screened (pall cr)	Х	-
Tb screening performed and results interpreted within six months prior to initiation of first-time biologic disease modifying anti-rheumatic drug therapy for ra (ra)	X	-
Rheumatoid arthritis (ra) disease activity, low (ra)	Х	-
Rheumatoid arthritis (ra) disease activity, moderate (ra)	X	_
Rheumatoid arthritis (ra) disease activity, high (ra)	Х	_
3475F Disease prognosis for rheumatoid arthritis assessed, poor prognosis documented (ra)	Х	-
3476F Disease prognosis for rheumatoid arthritis assessed, good prognosis documented (ra)	Х	-
3490F History of aids-defining condition (hiv)	Х	-
3491F Hiv indeterminate (infants of undetermined hiv status born of hiv-infected mothers) (hiv)	Х	-
3492F History of nadir cd4+ cell count <350 cells/mm (hiv)	Х	-
No history of nadir cd4+ cell count <350 cells/mm and no history of aids-defining condition (hiv)	Х	-
3494F Cd4+ cell count <200 cells/mm (hiv)	Х	-
3495F Cd4+ cell count 200 - 499 cells/mm (hiv)	Х	-
3496F Cd4+ cell count >=500 cells/mm (hiv)	X	-
3497F Cd4+ cell percentage <15% (hiv)	Х	-
3498F Cd4+ cell percentage >=15% (hiv)	Х	
3500F Cd4+ cell count or cd4+ cell percentage documented as performed (hiv)	Х	-

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3502F	Hiv rna viral load below limits of quantification (hiv)	Х	-
3503F	Hiv rna viral load not below limits of quantification (hiv)	Х	-
3510F	Documentation that tuberculosis (tb) screening test performed and results interpreted (hiv)	Х	-
3511F	Chlamydia and gonorrhea screenings documented as performed (hiv)	Х	-
3512F	Syphilis screening documented as performed (hiv)	Х	-
3513F	Hepatitis b screening documented as performed (hiv)	Х	-
3514F	Hepatitis c screening documented as performed (hiv)	Х	-
3515F	Patient has documented immunity to hepatitis c (hiv)	Х	-
3517F	Hepatitis b virus (hbv) status assessed and results interpreted within one year prior to receiving a first course of anti-tnf (tumor necrosis factor) therapy (ibd)	Х	-
3520F	Clostridium difficile testing performed (ibd)	Х	-
3550F	Low risk for thromboembolism (afib)	Х	-
3551F	Intermediate risk for thromboembolism (afib)	Х	-
3552F	High risk for thromboembolism (afib)	Х	-
3555F	Patient had international normalized ratio (inr) measurement performed (afib)	Х	-
3570F	Final report for bone scintigraphy study includes correlation with existing relevant imaging studies (eg, x-ray, mri, ct	Х	-
3572F	Patient considered to be potentially at risk for fracture in a weight-bearing site (nuc_med)	Х	-
	Patient not considered to be potentially at risk for fracture in a weight-bearing site (nuc_med)	Х	-
3650F	Electroencephalogram (eeg) ordered, reviewed or requested (epi)	Х	-
3700F	Psych disorders assessed	Х	-
3720F	Cognit impairment assessed	Х	-
3725F	Screening for depression performed (dem)	Х	-
3750F	Patient not receiving dose of corticosteroids greater than or equal to 10mg/day for 60 or greater consecutive days (ibd)	Х	-
3751F	Electrodiag polyneuro6mon	Х	-
	No electrodiag polyneuro6mon	Х	-
3753F	Pt has symp plus signs neuropathy	Х	-
3754F	Screening tests dm done	Х	-
3755F	Cog and behav imprmnt scrng done	Х	-
3756F	Pt /w pseudobulbar affect, sialorrhea or als rltd sysmptom	Х	
3757F	Pt /w no pseudobulbar affect, sialorrhea or als rltd sysmptom	Х	-

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3758F	Pt ref pulmon fx test with peak flow	Х	-
	Pt scrn dysphag /wt loss/nutrition	Х	-
	Pt w/ dysphag /wt loss/nutr	X	-
3761F	Pt not exhbt dysphagia, wt loss, or impaired nutrition	X	-
3762F	Patient is dysarthric	X	-
3763F	Patient is not dysarthric	X	-
	Adenoma detected screening	X	-
776F	Adenoma not detect screening	X	-
	Tobacco use cessation intervention, counseling (copd, cap, cad, asthma)(dm)(pv)	X	-
001F	Tobacco use cessation intervention, pharmacologic therapy (copd, cad, cap, pv, asthma) (dm)(pv)	X	-
1003F	Patient education, written/oral, appropriate for patients with heart failure, performed (nma - no measure associated)	Х	-
004F	Patient screened for tobacco use and received tobacco cessation intervention (counseling, pharmacotherapy, or both), if identified as a tobacco user (pv, cad)	Х	-
1005F	Pharmacologic therapy (other than minerals/vitamins) for osteoporosis prescribed (op)(ibd)	X	-
1008F	Beta-blocker therapy prescribed or currently being taken (cad,hf)	Х	-
1010F	Angiotensin converting enzyme (ace) inhibitor or angiotensin receptor blocker (arb) therapy prescribed or currently being taken (cad, ckd, hf) (dm)	Х	-
1011F	Oral antiplatelet therapy, prescribed (eg, aspirin, clopidogrel/plavix, or comb aspirin and dipyridamole/aggrenox)1	Х	-
012F	Warfarin therapy prescribed (nma-no measure associated)	Х	-
	Statin therapy prescribed or currently being taken (cad)	Х	-
	Written discharge instructions provided to heart failure patients discharged home (instructions include all of the following components: activity level, diet, discharge medica	Х	-
015F	Persistent asthma, preferred long term control medication or an acceptable alternative treatment, prescribed (nma - no measure associated) (note: there are no medical exclusio	Х	-
016F	Anti-inflammatory/analgesic agent prescribed [use for prescribed or continued medication(s), including otc medication(s)]	Х	-
017F	Gastrointestinal prophylaxis for nsaid use prescribed	Х	-
018F	Therapeutic exercise for the involved joint(s) instructed or physical or occupational therapy prescribed	Х	-
1019F	Documentation of receipt of counseling on exercise and either both calcium and vitamin d use or counseling regarding bot	Х	-

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4025F Inhaled bronchodilator prescribed (copd)	Х	-
4030F Long term oxygen therapy prescribed (more than fifteen hours per day) (copd)	Х	-
Pulmonary rehabilitation exercise training recommended (copd)	Х	-
4035F Influenza immunization recommended (copd)(ibd)	Х	-
1037F Influenza immunization ordered or administered (copd, pv)	Х	-
4040F Pneumococcal vaccine administer or previously received (copd) (pv)	Х	-
4041F Documentation of order for cefazolin or cefuroxime for antimicrobial prophylaxis (peri 2)	Х	-
Documentation that prophylactic antibiotics were neither given within 4 hours prior to surgical incision nor given intra	Х	-
Documentation that an order was given to discontinue prophylactic antibiotics within 48 hours of surgical end time, card	Х	-
Documentation that an order was given for venous thromboembolism (vte) prophylaxis to be given within 24 hrs	s x	-
4045F Appropriate empiric antibio0	Х	-
Documentation that prophylactic antibiotics were given within 4 hours prior to surgical incision or given intraoperative	Х	-
Documentation of order for prophylactic parenteral antibiotics to be given within one hour (if fluoroquinolone or vancom	Х	-
Documentation that administration of prophylactic parenteral antibiotic was initiated within one hour (if fluoroguinolon	Х	-
Documentation that order was given to discontinue prophylactic antibiotics within 24 hours of surgical end time, non-car	Х	-
1050F Hypertension plan of care documented as appropriate (nma - no measure associated)	Х	-
1051F Referred for an arterio-venous (av) fistula (esrd)	Х	-
1052F Hemodialysis via functioning arterio-venous (av) fistula (esrd)	X	-
1053F Hemodialysis via functioning arterio-venous (av) graft (esrd)	Х	-
1054F Hemodialysis via catheter (esrd)	X	-
Patient receiving peritoneal dialysis (esrd)	Х	-
Appropriate oral rehydration solution recommended (pag)	X	-
1058F Pediatric gastroenteritis education provided to caregiver (pag)	X	-
1060F Psychotherapy services provided (mdd)	Х	-
4062F Patient referral for psychotherapy documented (mdd)	X	-

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4063F	Antidepressant pharmacotherapy considered and not prescribed (mdd adol)	Х	-
4064F	Antidepressant pharmacotherapy prescribed (mdd)	Х	-
4065F	Antipsychotic pharmacotherapy prescribed (mdd)	Х	-
4066F	Electroconvulsive therapy (ect) provided (mdd)	X	-
4067F	Patient referral for electroconvulsive therapy (ect) documented (mdd)	X	-
4069F	Venous thromboembolism (vte) prophylaxis received (ibd)	Х	-
4070F	Deep vein thrombosis (dvt) prophylaxis received by end of hospital day 2 (str)	Х	-
4073F	Oral antiplatelet therapy prescribed at discharge (str)	Х	-
4075F	Anticoagulant therapy prescribed at discharge (str)	Х	=
4077F	Documentation that tissue plasminogen activator (t-pa) administration was considered (str)	Х	-
4079F	Documentation that rehabilitation services were considered (str)	Х	-
4084F	Aspirin received within 24 hours before emergency department arrival or during emergency department stay (em)	Х	-
4086F	Aspirin or clopidogrel prescribed or currently being taken (cad)	Х	-
	Patient receiving erythropoietin therapy (hem)	Х	-
	Patient not receiving erythropoietin therapy (hem)	Х	-
4100F	Bisphosphonate therapy, intravenous, ordered or received (hem)	Х	-
4110F	Internal mammary artery graft performed for primary, isolated coronary artery bypass graft procedure (cabg)	Х	-
4115F	Beta blocker administered within 24 hours prior to surgical incision (cabg)	Х	-
4120F	Antibiotic prescribed or dispensed (uri, phar)	Х	-
4124F	Antibiotic neither prescribed nor dispensed (uri, phar)	Х	-
4130F	Topical preparations (including otc) prescribed for acute otitis externa (aoe)	Х	-
4131F	Systemic antimicrobial therapy prescribed (aoe)	Х	-
4132F	Systemic antimicrobial therapy not prescribed (aoe)	Х	-
4133F	Antihistamines or decongestants prescribed or recommended (ome)	Х	-
4134F	Antihistamines or decongestants neither prescribed nor recommended (ome)	Х	-
4135F	Systemic corticosteroids prescribed (ome)	Х	-
4136F	Systemic corticosteroids not prescribed (ome)	Х	-
4140F	Inhaled corticosteroids prescribed (asthma)	Х	-
4142F	Corticosteroid sparing therapy prescribed (ibd)	Х	-
4144F	Alternative long-term control medication prescribed (asthma)	Х	-

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4145F	Two or more anti-hypertensive agents prescribed or currently being taken (cad, htn)	Х	-
4148F	Hepatitis a vaccine injection administered or previously received (hep-c)	Х	-
4149F	Hepatitis b vaccine injection administered or previously received (hep-c, hiv)	Х	-
4150F	Patient receiving antiviral treatment for hepatitis c (hep-c)	Х	-
4151F	Patient not receiving antiviral treatment for hepatitis c (hep-c)	Х	-
4153F	Combination peginterferon and ribavirin therapy prescribed (hep-c)	Х	-
4155F	Hepatitis a vaccine series previously received (hep-c)	X	-
4157F	Hepatitis b vaccine series previously received (hep-c)	Х	-
4158F	Patient counseled about risks of alcohol use (hep-c)	X	-
4159F	Counseling regarding contraception received prior to initiation of antiviral treatment (hep-c)	Х	-
	Patient counseling at a minimum on all of the following treatment options for clinically localized prostate cancer: acti	Х	-
4164F	Adjuvant (ie, in combination with external beam radiotherapy to the prostate for prostate cancer) hormonal therapy (gona	Х	-
4165F	Three-dimensional conformal radiotherapy (3d-crt) or intensity modulated radiation therapy (imrt) received (prca)1	Х	-
1167F	Head of bed elevation (30-45 degrees) on first ventilator day ordered (crit)1	Х	-
1168F	Patient receiving care in the intensive care unit (icu) and receiving mechanical ventilation, 24 hours or less (crit)1	Х	-
1169F	Patient either not receiving care in the intensive care unit (icu) or not receiving mechanical ventilation or receiving	Х	-
171F	Patient receiving erythropoiesis-stimulating agents (esa) therapy (ckd)1	X	-
172F	Patient not receiving erythropoiesis-stimulating agents (esa) therapy (ckd)1	Х	-
1174F	Counseling about the potential impact of glaucoma on visual functioning and quality of life, and importance of treatment	Х	-
1175F	Best-corrected visual acuity of 20/40 or better (distance or near) achieved within the 90 days following cataract surger	Х	-
176F	Counseling about value of protection from uv light and lack of proven efficacy of nutritional supplements in prevention	Х	-
177F	Counseling about the benefits and/or risks of the age-related eye disease study (areds) formulation for preventing progr	Х	-
	Anti-d immune globulin received between 26 and 30 weeks gestation (prenatal)1	Х	

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4179F	Tamoxifen or aromatase inhibitor (ai) prescribed (onc)1	Х	-
4180F	Adjuvant chemotherapy referred, prescribed, or previously received for stage iii colon cancer (onc)	Х	-
4181F	Conformal radiation therapy received (onc)1	Х	-
4182F	Conformal radiation therapy not received (onc)1	Х	-
4185F	Continuous (12-months) therapy with proton pump inhibitor (ppi) or histamine h2 receptor antagonist (h2ra) received (ger	Х	-
4186F	No continuous (12-months) therapy with either proton pump inhibitor (ppi) or histamine h2 receptor antagonist (h2ra) rec	Х	-
4187F	Disease modifying anti-rheumatic drug therapy prescribed or dispensed (ra)2	Х	-
4188F	Appropriate angiotensin converting enzyme (ace)/angiotensin receptor blockers (arb) therapeutic monitoring test ordered	Х	-
4189F	Appropriate digoxin therapeutic monitoring test ordered or performed (am)2	Х	-
4190F	Appropriate diuretic therapeutic monitoring test ordered or performed (am)2	Х	-
4191F	Appropriate anticonvulsant therapeutic monitoring test ordered or performed (am)2	Х	-
4192F	Patient not receiving glucocorticoid therapy (ra)	Х	-
4193F	Patient receiving <10 mg daily prednisone (or equivalent), or ra activity is worsening, or glucocorticoid use is for less than 6 months (ra)	х	-
4194F	Patient receiving >=10 mg daily prednisone (or equivalent) for longer than 6 months, and improvement or no change in disease activity (ra)	Х	-
4195F	Patient receiving first-time biologic disease modifying anti-rheumatic drug therapy for rheumatoid arthritis (ra)	Х	-
4196F	Patient not receiving first-time biologic disease modifying anti-rheumatic drug therapy for rheumatoid arthritis (ra)	Х	-
4200F	External beam radiotherapy as primary therapy to the prostate with or without nodal irradiation (prca)	Х	-
4201F	External beam radiotherapy with or without nodal irradiation as adjuvant or salvage therapy for prostate cancer patient	Х	-
4210F	Angiotensin converting enzyme (ace) or angiotensin receptor blockers (arb) medication therapy for 6 months or more (mm)2	Х	-
4220F	Digoxin medication therapy for 6 months or more (mm)2	Х	-
	Diuretic medication therapy for 6 months or more (mm)2	Х	-
4230F	Anticonvulsant medication therapy for 6 months or more (mm)2	Х	-

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4240F	Instruction in therapeutic exercise with follow-up by the physician provided to patients during episode of back pain las	Х	-
4242F	Counseling for supervised exercise program provided to patients during episode of back pain lasting longer than 12 weeks	Х	-
4245F	Patient counseled during the initial visit to maintain or resume normal activities (bkp)2	Х	-
4248F	Patient counseled during the initial visit for an episode of back pain against bed rest lasting 4 days or longer (bkp)2	Х	-
4250F	Active warming used intraoperatively for the purpose of maintaining normothermia, or at least one body temperature equal	Х	-
4255F	Duration of general or neuraxial anesthesia 60 minutes or longer, as documented in the anesthesia record (crit)	Х	-
4256F	Duration of general or neuraxial anesthesia less than 60 minutes, as documented in the anesthesia record (crit)	Х	-
4260F	Wound surface culture technique used (cwc)	Х	-
4261F	Tech other than surfc cultr	Х	-
4265F	Use of wet to dry dressings prescribed or recommended (cwc)	X	-
4266F	Use of wet to dry dressings neither prescribed nor recommended (cwc)	X	-
4267F	Compression therapy prescribed (cwc)	X	-
4268F	Patient education regarding the need for long term compression therapy including interval replacement of compression stockings received (cwc)	Х	-
4269F	Appropriate method of offloading (pressure relief) prescribed (cwc)	Х	-
4270F	Patient receiving potent antiretroviral therapy for 6 months or longer (hiv)	X	-
4271F	Patient receiving potent antiretroviral therapy for less than 6 months or not receiving potent antiretroviral therapy (h	Х	-
4274F	Influenza immunization administered or previously received (hiv)	Х	-
	Potent antiretroviral therapy prescribed (hiv)	Х	-
	Pneumocystis jiroveci pneumonia prophylaxis prescribed (hiv)	Х	-
4280F	Pneumocystis jiroveci pneumonia prophylaxis prescribed within 3 months of low cd4+ cell count or percentage (hiv)	Х	-
4290F	Patient screened for injection drug use (hiv)	Х	-
4293F	Patient screened for high-risk sexual behavior (hiv)	Х	
4300F	Patient receiving warfarin therapy for nonvalvular atrial fibrillation or atrial flutter (afib)	Х	-

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4301F	Patient not receiving warfarin therapy for nonvalvular atrial fibrillation or atrial flutter (afib)	Х	-
4305F	Patient education regarding appropriate foot care and daily inspection of the feet received (cwc)	Х	-
4306F	Patient counseled regarding psychosocial and pharmacologic treatment options for opioid addiction (sud)	Х	-
4320F	Patient counseled regarding psychosocial and pharmacologic treatment options for alcohol dependence (sud)	Х	-
4322F	Caregiver provided with education and referred to additional resources for support (dem)	Х	-
4324F	Pt queried prkns complic	Х	-
4325F	Med txmnt options rvwd w/pt	Х	-
4326F	Pt asked re symp auto dysfxn	Х	-
4328F	Pt asked re sleep disturb	Х	-
4330F	Counseling about epilepsy specific safety issues provided to patient (or caregiver (s)) (epi)	Х	-
4340F	Counseling for women of childbearing potential with epilepsy (epi)	Х	-
4350F	Counseling provided on symptom management, end of life decisions, and palliation (dem)	Х	-
4400F	Rehab thxpy options w/pt	Х	-
4450F	Self-care education provided to patient (hf)	Х	-
4470F	Implantable cardioverter-defibrillator (icd) counseling provided (hf)	Х	-
4480F	Patient receiving ace inhibitor/arb therapy and beta-blocker therapy for 3 months or longer (hf)	Х	-
4481F	Patient receiving ace inhibitor/arb therapy and beta-blocker therapy for less than 3 months (hf)	Х	-
4500F	Referred to an outpatient cardiac rehabilitation program (cad)	Х	-
4510F	Previous cardiac rehabilitation for qualifying cardiac event completed (cad)	Х	-
4525F	Neuropsychiatric intervention ordered (dem)	Х	-
4526F	Neuropsychiatric intervention received (dem)	Х	-
4540F	Disease modified pharmacothxpy	Х	-
4541F	Pt offered tx for pseudobulb	Х	-
4550F	Noninvas resp support talk	Х	-
4551F	Nutritional support offered	Х	-
4552F	Pt ref for speech lang path	Х	-
4553F	Pt asst re end life issues	Х	-
4554F	Pt recvd inhal anesthetic	Х	-
4555F	Pt recvd no inhal anesthic	Х	-
4556F	Ptw/3+ post-op nausea and vommiting	Х	-
4557F	Pt w/o 3+ pot-op nausea and vommiting	Х	-

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4558F	Pt recvd 2 rx anti-emetagnts	Х	-
	1 bodytemp >=35.5 cw/in 30 mins	Х	-
560F	Anesth w/o general or neurax anesth	Х	-
	Pt w/ cornonary artery stent	Х	-
562F	Patient does not have coronary artery stent	Х	-
563F	Pt recvd aspirin w/in 24 hours	Х	-
005F	Patient counseled on self - examination for new or changing moles (ml)	Х	-
010F	Findings of dilated macular or fundus exam communicated to the physician managing the diabetes care (ec)	Х	-
015F	Documentation of communication that a fracture occurred and that the patient was or should be tested or treated for oste	Х	-
020F	Treatment summary report communicated to physician(s) managing continuing care and to the patient within one month of co	Х	-
050F	Treatment plan communicated to provider(s) managing continuing care within one month of diagnosis (ml)5	X	-
	Findings from diagnostic mammogram communicated to practice managing patient; s on-going care within 3 business days of e	Х	-
062F	Documentation of direct communication of diagnostic mammogram findings by telephone or in person [by the diagnostic imag	Х	-
100F	Potential risk for fracture communicated to the referring physician within 24 hours of completion of the imaging study (nuc_med)	Х	-
200F	Consideration of referral for a neurological evaluation of appropriateness for surgical therapy for intractable epilepsy	Х	-
250F	Asthma discharge plan present (asthma)	Х	-
	Rationale (eg, severity of illness and safety) for level of care (eg, home hospital) documented.	Х	-
010F	Dysphagia screening conducted prior to order for or receipt of any foods, fluids or medication by mouth (str)	Х	-
015F	Patient receiving or eligible to receive foods, fluids or medication by mouth (str)	Х	-
	Npo (nothing by mouth) ordered (str)	Х	-
	All elements of maximal sterile barrier technique followed including: cap and mask and sterile gown and sterile gloves a	Х	-
040F	Use of appropriate radiation dose reduction devices or manual techniques for appropriate moderation of exposure, documen	Х	-

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6045F	Radiation exposure or exposure time in final report for procedure using fluoroscopy, documented (rad)5	Х	-
6070F	Patient queried and counseled about anti-epileptic drug (aed) side effects (epi)	Х	-
6080F	Pt/caregiver queried falls	Х	-
6090F	Pt/caregiver counsel safety	Х	-
	Timeout to verify correct patient, correct site, and correct procedure, documented (path)9	Х	-
6101F	Safety counsel dementia prov	Х	-
6102F	Safety counsel dementia ord	Х	-
6110F	Counsel risks driving and alternatives	Х	-
6150F	Patient not receiving a first course of anti-tnf (tumor necrosis fact0r) therapy (ibd)	X	-
7010F	Patient information entered into a recall system that includes: target date for the next exam specified and a process to	Х	-
7020F	Breast imaging-reporting and data system (bi-rads) assessment category entered into an internal database to allow for a	Х	-
7025F	Patient information entered into a reminder system with a target due date for the next mammogram (rad)5	Х	-
9001F	Immunohisto antibod add slid	Х	-
9002F	Aortic aneurysm 5-5.4cm diam	Х	-
9003F	Aortic anrysm5.5-5.9cm diam	Х	-
9004F	Aortic anrysm 6/> cm diam	Х	-
9005F	Asympt carot/vrtbrbas sten	Х	-
9006F	Sympt sten-tia/strk<120days	Х	-
9007F	Other carot sten 120 days/>	Х	-
A0080	Noninterest escort in non er	Х	-
A0090	Interest escort in non er	Х	-
A0100	Nonemergency transport taxi	X	-
A0110	Nonemergency transport bus	Х	-
A0120	Noner transport mini-bus	Х	-
A0160	Noner transport case worker	Х	-
A0170	Noner transport parking fees	Х	-
	Noner transport lodgng recip	Х	-
	Noner transport meals recip	Х	-
	Noner transport lodgng escrt	Х	-
A0210	Noner transport meals escort	Х	-

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sclaimer. Please note that coverage may vary by plan type and may not follow the listed services. These codes are updated quarterly. Additionally, these coding lisectable drugs, or specialty medications and should be directed to the Pharmacy link option within the website.	ts do not reflect information re	egarding immunizations,
0420 Ambulance waiting 1/2 hr	Х	-
0424 Extra ambulance attendant	X	-
0432 Pi volunteer ambulance co	Х	-
0888 Noncovered ambulance mileage	X	-
2002 Mirragen adv wnd mat per sq	X	-
2003 Bio-connekt wound matrix	Х	-
2004 Xcellistem, 1 mg	Х	-
2005 Microlyte matrix, per sq cm	Х	-
2006 Novosorb synpath per sq cm	Х	-
2008 Theragenesis, per sq cm	Х	-
2009 Symphony, per sq cm	Х	-
2010 Apis, per square centimeter	Х	-
2011 Supra sdrm, per square cm	Х	-
2012 Suprathel, per sq cm	Х	-
2014 Omeza collagen matrix, per 100 mg	X	-
2015 Phoenix wound matrix, per square centimeter	Х	-
2016 Permeaderm b, per square centimeter	X	-
2017 Permeaderm glove, each	X	-
2018 Permeaderm c, per square centimeter	X	-
2019 Kerecis marigen shld sq cm	X	-
2020 Ac5 wound system	Х	-
2021 Neomatrix per sq cm	Х	-
2022 Innovaburn or innovamatrix xl, per square centimeter	X	-
2023 Innovamatrix pd, 1 mg	X	-
2024 Resolve matrix, per square centimeter	X	-
2025 Miro3d, per cubic centimeter	Х	-
4100 Skin sub fda clrd as dev nos	X	-
4226 Supplies for maintenance of insulin infusion pump	X	-
4238 Adju cgm supply allowance	-	Х
Supply allowance for non-adjunctive, non-implanted continuous glucose monitor (cgm), includes all supplied accessories, 1 month supply = 1 unit of service	es and -	Х
4257 Replacement lens shield cartridge for use with laser skin piercing device, each	Х	-

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A4262	Temporary tear duct plug	Х	-
A4263	Permanent tear duct plug	Х	-
44265	Paraffin	Х	-
44267	Contraceptive supply, condom, male, each	Х	-
4268	Contraceptive supply, condom, female, each	Х	-
4269	Contraceptive supply, spermicide (e.g., foam, gel), each	Х	-
4270	Disposable endoscope sheath	Х	-
4281	Tubing for breast pump, replacement	Х	-
4282	Adapter for breast pump, replacement	Х	-
4283	Cap for breast pump bottle, replacement	Х	-
\4284	Breast shield and splash protector for use with breast pump, replacement	Х	-
4285	Polycarbonate bottle for use with breast pump, replacement	Х	-
\4286	Locking ring for breast pump, replacement	Х	-
4287	Disposable collection and storage bag for breast milk, any size, any type, each	Х	-
\4300	Cath impl vasc access portal	Х	-
4335	Incontinence supply	Х	-
4453	Rec cath man pump enema repl	Х	-
44457	Enema tube, with or without adapter, any type, replacement only, each	Х	-
44458	Enema bag with tubing, reusable	Х	-
44459	Manual pump enema, reusable	Х	-
4465	Non-elastic extremity binder	Х	-
4468	Exsufflation belt, includes all supplies and accessories	Х	-
	Incontinence garment anytype	Х	-
4542	Supplies and accessories for external upper limb tremor stimulator of the peripheral nerves of the wrist	Х	-
\4550	Surgical trays	Х	-
4553	Nondisp underpads, all sizes	Х	-
	Disposable underpads	Х	-
	Conductive paste or gel	X	-
	Nmes disposable	Х	-
	Hyperbaric o2 chamber disps	Х	-
	Cast supplies (plaster)	Х	-
	Special casting material	X	-

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A4595 Tens suppl 2 lead per month	Х	-
A4596 Cranial electrotherapy stimulation (ces) system supplies and accessories, per month	Х	-
A4601 Lithium ion battery for non-prosthetic use, replacement	Х	-
4611 Heavy duty battery	X	-
.4612 Battery cables	Х	-
4613 Battery charger	X	-
4630 Repl bat t.e.n.s. own by pt	X	-
4634 Replacement bulb for therapeutic light box, tabletop model	X	-
4638 Replacement battery for patient-owned ear pulse generator, each	X	-
4639 Replacement pad for infrared heating pad system, each	X	-
4642 Satumomab pendetide per dose	X	-
4660 Esrd blood pressure device	X	-
4663 Esrd blood pressure cuff	X	-
4670 Auto blood pressure monitor	-	Х
4680 Activated carbon filters	X	-
4690 Dialyzers	X	-
4931 Oral thermometer, reusable, any type, each	X	-
4932 Rectal thermometer, reusable, any type, each	X	-
5200 Percutaneous catheter anchor	X	-
5503 Diabetic shoe w/roller/rockr	X	-
5504 Diabetic shoe with wedge	X	-
5505 Diab shoe w/metatarsal bar	X	-
5506 Diabetic shoe w/off set heel	X	-
5507 Modification diabetic shoe	X	-
5508 Diabetic deluxe shoe	X	-
For diabetics only, direct formed, compression molded to patient's foot without external heat source, multip density i	ole- X	-
Non-contact wound warming wound cover for use with the non-contact wound warming device and warmin	g card X	-
6413 Adhesive bandage, first-aid type, any size, each	X	-
.6550 Dressing set for negative pressure wound therapy electrical pump, stationary or portable, each	-	Х
17020 Interface, cough stim device	-	X

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A7023	Mechanical allergen particle barrier/inhalation filter, cream, nasal, topical	Х	-
A7049	Epap nasal valve	X	-
A9150	Misc/exper non-prescript dru	X	-
A9152	Single vitamin nos	X	-
49153	Multi-vitamin nos	X	-
49155	Artificial saliva, 30 ml	X	-
1 9180	Naturopaths	X	-
19268	Programmer for transient, orally ingested capsule	X	-
19269	Programable, transient, orally ingested capsule, for use with external programmer, per month	X	-
19270	Non-covered item or service	X	-
49272	Mechanical wound suction, disposable, includes dressing, all accessories and components, each	-	Χ
19273	Hot/cold h2obot/cap/col/wrap	X	-
49274	External ambulatory insulin delivery system, disposable, each, includes all supplies and accessories	-	Х
49275	Home glucose disposable monitor, includes test strips	X	-
49277	Transmitter; external, for use with interstitial continuous glucose monitoring system	-	Х
49278	Receiver (monitor); external, for use with interstitial continuous glucose monitoring system	-	Х
A9279	Monitoring feature/device, stand-alone or integrated, any type, includes all accessories, components and electronics, no	Х	-
49281	Reaching/grabbing device, any type, any length, each	Х	-
	Wig, any type, each	X	-
	Foot pressure off loading/supportive device, any type, each	Х	-
	Inversion eversion cor devic	Х	-
19286	Any hygienic item, device	Х	-
	Pres digital behav thera fda	Х	-
A9292	Prescription digital visual therapy, software-only, fda cleared, per course of treatment	Х	-
A9293	Fertility cycle (contraception & conception) tracking software application, fda cleared, per month, includes accessories (e.g., thermometer)	Х	-
1 9300	Exercise equipment	Х	-
	Technetium tc-99m teboroxime, diagnostic, per study dose	X	-
	Technetium tc 99m apcitide	X	-
	Indium/111 capromab pendetid	Х	-
	lobenguane sulfate i-131	X	_

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A9513 Lutetium lu 177 vipivotide tetraxetan, therapeutic, 1 millicurie	-	X	
A9532 Supply of radiopharmaceutical therapeutic agent, iodinated i-125, serumm albumin, 5 microcuries	Х	-	
A9536 Technetium tc-99m depreotide, diagnostic, per study dose, up to 35 millicuries	Х	-	
A9546 Cobalt co-57/58, cyanocobalamin, diagnostic, per study dose, up to 1 microcurie	X	-	
A9550 Technetium tc-99m sodium gluceptate, diagnostic, per study dose, up to 25 millicuries	X	-	
A9559 Cobalt co-57 cyanocobalamin, oral, diagnostic, per study dose, up to 1 microcurie	Х	-	
A9566 Technetium tc-99m fanolesomab, diagnostic, per study dose, up to 25 millicuries	Х	-	
A9568 Technetium tc-99m arcitumomab, diagnostic, per study dose, up to 45 millicuries	Х	-	
A9574 Air poly intrauterine foam	Х	-	
A9586 Florbetapir f18, diagnostic, per study dose, up to 10 millicuries	Х	-	
A9600 Strontium-89 chloride	Х	-	
A9606 Lutetium lu 177, dotatate, therapeutic, 1 millicurie	-	Х	
A9607 Lutetium lu 177 vipivotide tetraxetan, therapeutic, 1 millicurie	-	Х	
A9697 Injection, carboxydextran-coated superparamagnetic iron oxide, per study dose	X	-	
A9901 Delivery/set up/dispensing	X	-	
B4100 Food thickener, administered orally, per ounce	X	-	
B4105 In-line cartridge containing digestive enzyme(s) for enteral feeding, each	X	-	
C1734 Orth/devic/drug bn/bn,tis/bn	X	-	
C1747 Endoscope, single-use (i.e. disposable), urinary tract, imaging/illumination device (insertable)	X	-	
C1748 Endoscope, single, ugi	Х	-	
C1749 Endoscope, retrograde imaging/illumination colonoscope device implantable)	X	-	
C1754 Catheter, intradiscal	X	-	
C1759 Catheter, intracardiac echocardiography	X	-	
C1770 Imaging coil, magnetic resonance (insertable)	X	-	
C1773 Retrieval device, insertable (used to retrieve fractured medical devices)	X	-	
C1815 Prothesis, urinary sphincter (implantable)	-	Х	
C1819 Tissue localization excision	X	-	
C1821 Interspinous process distraction device (implantable) x-stop	Х	-	
C1824 Generator, ccm, implant	Х	-	
C1825 Gen, neuro, carot sinus baro	-	Х	
C1831 Personalized interbody cage	Х	-	
C1832 Auto cell process sys	Х	-	

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C1834	Pressure sensor system, includes all components (e.g., introducer, sensor), intramuscular (implantable),		Х
	excludes mobile (wireless) software application	_	^
	Lens, intraocular (telescopic)	X	-
	Retinal prosthesis, includes all internal and external components; add-on	X	-
	Retinal prosthesis	X	-
C1849	Skin substitute, synthetic	X	-
C1881	Dialysis access system (implantable)	X	-
	No implantable/insertable device used with device-intensive procedures	Х	-
C1891	Infusion pump, non-programmable, permanent (implantable)	-	Χ
C2613	Lung bx plug w/deliv sys	X	-
C2614	Probe, percutaneous lumbar discectomy	X	-
C2624	Wireless pressure sensor	-	Χ
C7504			
	Percutaneous vertebroplasties (bone biopsies included when performed), first cervicothoracic and any additional cervicothoracic or lumbosacral vertebral bodies, unilateral or bilateral injection, inclusive of all imaging guidance	-	Χ
C7505	Percutaneous vertebroplasties (bone biopsies included when performed), first lumbosacral and any additional cervicothoracic or lumbosacral vertebral bodies, unilateral or bilateral injection, inclusive of all imaging guidance	-	Х
C7507	Percutaneous vertebral augmentations, first thoracic and any additional thoracic or lumbar vertebral bodies, including cavity creations (fracture reductions and bone biopsies included when performed) using mechanical device (eg, kyphoplasty), unilateral or bilateral cannulations, inclusive of all imaging guidance	-	Х
C7508	Percutaneous vertebral augmentations, first lumbar and any additional thoracic or lumbar vertebral bodies, including cavity creations (fracture reductions and bone biopsies included when performed) using mechanical device (eg, kyphoplasty), unilateral or bilateral cannulations, inclusive of all imaging guidance	-	X
C9293	Injection, glucarpidase, 10 units	Х	=
C9725	Placement of endorectal intracavitary applicator for high intensity brachytherapy	Х	-
C9726	Placement and removal (if performed) of applicator into therapy	Х	-
C9734	Focused ultrasound ablation/therapeutic intervention, other than uterine leiomyomata, with or without magnetic resonance (mr) guidance	Х	-
C9756	Intraoperative near-infrared fluorescence lymphatic mapping of lymph node(s) (sentinel or tumor draining) with administration of indocyanine green (icg) (list separately in addition to code for primary procedure)	Х	-
C9757	Spine/lumbar disk surgery	Х	-

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29758	Interatrial shunt ide	-	Х
C9760	Non-blind interatrial shunt	-	Х
C9776	Intraoperative near-infrared fluorescence imaging of major extra-hepatic bile duct(s) (e.g., cystic duct, common bile duct and common hepatic duct) with intravenous administration of indocyanine green (icg) (list separately in addition to code for primary procedure)	х	-
29781	Arthro/shoul surg; w/spacer	-	Х
9782	Blind myocar trpl bon marrow	Х	-
29783	Blind cor sinus reducer impl	Х	-
C9784	Gastric restrictive procedure, endoscopic sleeve gastroplasty, with esophagogastroduodenoscopy and intraluminal tube insertion, if performed, including all system and tissue anchoring components	х	-
C9785	Endoscopic outlet reduction, gastric pouch application, with endoscopy and intraluminal tube insertion, if performed, including all system and tissue anchoring components	-	Х
C9790	Histotripsy (ie, non-thermal ablation via acoustic energy delivery) of malignant renal tissue, including image guidance	Х	-
29791	Magnetic resonance imaging with inhaled hyperpolarized xenon-129 contrast agent, chest, including preparation and administration of agent	Х	-
C9792	Blinded or nonblinded procedure for symptomatic new york heart association (nyha) class ii, iii, iva heart failure; transcatheter implantation of left atrial to coronary sinus shunt using jugular vein access, including all imaging necessary to intra procedurally map the coronary sinus for optimal shunt placement (e.g., tee or ice ultrasound, fluoroscopy), performed under general anesthesia in an approved investigational device exemption (ide) study)	х	-
09793	3D predictive model generation for preplanning of a cardiac procedure, using data from cardiac computed tomographic angiography with report	Х	-
9795	Stereotactic body radiation therapy, treatment delivery, per fraction to 1 or more lesions, including image guidance and real-time positron emissions-based delivery adjustments to 1 or more lesions, entire course not to exceed 5 fractions	-	Х
9899	Implanted prosthetic device, payable only for inpatients who do not have inpatient coverage	Х	
0170	Re-evaluation - limited problem focused (established patient; not post-operative visit)	Х	-
0171	Re-evaluation- post operative office visit	Х	-
0180	Comprehensive periodontal evaluation - new or established patient	Х	-
0190	A screening, including state or federally mandated screening, to determine an individual's need to be seen by a dentist	Х	-

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D0191	A limited clinical inspection that is performed to identify possible signs of oral or systemic disease, malformation, or injury, and the potential need for referral for diagno	х	-
D0220	Intraoral- periapical first radiographic image	X	-
D0230	Intraoral- periapical each additional radiographic image	Х	-
D0240	Intraoral- occlusal radiographic image	Х	-
D0250	Extra-oral 2d projection radiographic image created using a stationary radiation source, and detector	Х	-
D0251	Extra-oral posterior dental radiographic image	Х	-
D0310	Sialography	Х	-
D0322	Tomographic survey	Х	-
D0340	2d cephalometric radiographic image-acquisition, measurement and analysis	Х	-
D0350	2d oral/facial photographic image obtained intra-orally or extra-orally	Х	-
D0351	3d photographic image	Х	-
D0364	Cone beam ct capture and interpretation with limited field of view-less than one whole jaw	Х	-
D0365	Cone beam ct capture and interpretation with field of view of one dental arch-mandible	Х	-
D0366	Cone beam ct capture and interpretation with field of view of one full dental arch-maxilla, with or without cranium	Х	-
D0367	Cone beam ct capture and interpretation with field of view of both jaws, with or without cranium	Х	-
D0368	Cone beam ct capture and interpretation for tmj series including two or more exposures	Х	-
D0369	Maxillofacial mri capture and interpretation	Х	-
D0370	Maxillofacial ultrasound capture and interpretation	Х	-
D0371	Sialoendoscopy capture and interpretation	Х	-
D0372	Intraoral tomosynthesis - comprehensive seris of rediographic images	Х	-
D0373	Intraoral tomosynthesis - bitewing radiographic image	Х	-
D0374	Intraoral tomosynthesis - periapical radiographic image	Х	-
D0380	Cone beam ct image capture with limited field of view- less than one whole jaw	Х	-
D0381	Cone beam ct image capture with field of view of one full dental arch-mandilbe	X	-
D0382	Cone beam ct image capture with field of view of one full dental arch-maxilla, with or without cranium	Х	-
D0383	Cone beam ct image capture with field of view of both jaws, with or without cranium	Х	-
D0384	Cone beam ct image capture for tmj series including two or more exposures	Х	-
D0385	Maxillofacial mri image capture	Х	-
D0386	Maxillofacial ultrasound image capture	Х	-
D0387	Intraoral tomosynthesis - comprehensive seris of rediographic images - image capture only	Х	-

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D0388	Intraoral tomosynthesis - bitewing radiographic image - image capture only	Х	-
	Intraoral tomosynthesis - periapical radiographic image- image capture only	X	-
D0391	Interpretation of diagnostic image by a practitioner not associated with capture of the image, including report	Х	-
D0393	Treatment simulation using 3d image volume	Х	-
	Digital subtraction of two or more images or image volumes of the same modality	Х	-
	Fusion of two or more 3d image volumes of one or more modalities	Х	-
	3D printing of a 3D dental surface scan	Х	-
D0411	Hba1c in-office point of service testing	X	-
D0412	Blood glucose level test-in-office using a glucose meter	Х	-
D0414	Laboratory processing of microbial specimen to include culture and sensitivity studies, preparation and transmission of written report	Х	-
D0415	Bacteriologic studies for determination of pathologic agents	X	-
	Viral culture	X	-
	Collection and preparation of saliva sample for laboratory diagnostic testing	X	-
	Analysis of saliva sample	Х	-
D0419	Assessment of salivary flow by measurement	Х	-
D0422	Collection and preparation of genetic sample material for laboratory analysis and report	Х	-
D0423	Genetic test for susceptibility to diseases- specimen analysis	X	-
D0425	Caries susceptibility tests	X	-
D0431	Diag tst detect mucos abnorm	X	-
D0460	Pulp vitality tests	Х	-
D0470	Diagnostic casts	Х	-
D0472	Accession of tissue gross examination prep/transmission of written report	Х	-
D0473	Accession of tissue gross and microscopic examination prep/trans of report	Х	-
D0474	Accession of tissue gross/micro exam assess of surg margins for presence of disease prep/trans of report	Х	-
D0475	Decalcification procedure	Х	-
D0476	Spec stains for microorganis	Х	-
D0477	Spec stains not for microorg	X	-
D0478	Immunohistochemical stains	Х	-
	Tissue in-situ hybridization	Х	-
D0480	Processing and interpretation of cytologic smears incl the prep/trans of written report	Х	-

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	Electron microscopy	Х	_
	Direct immunofluorescence	X	
	Indirect immunofluorescence	X	
	Consult slides prep elsewher	X	-
	Consult inc prep of slides	X	-
	Laboratory accession of transepithelial cytologic sample, microscopic examination preparation and transmission of written report	X	-
D0502	Other oral pathology procedures, by report	Х	-
	Non-ionizing diagnostic procedure capable of quantifying, monitoring, and recording changes in structure of enamel, dentin, and cementum	Х	-
D0601	Caries risk assessment and documentation, with a finding of low risk	X	-
	Caries risk assessment and documentation, with a finding of moderate risk	Х	-
	Caries risk assessment and documentation, with a finding of high risk	X	-
D0636	Cone beam - three-dimensional image reconstruction using existing data, includes multiple images	Х	-
D0701	Panoramic radiographic image – image capture only	Х	-
D0702	2-d cephalometric radiographic image – image capture only	Х	-
D0703	2-d oral/facial photographic image obtained intra-orally or extra-orally – image capture only	Х	-
D0704	3-d photographic image – image capture only	Х	-
D0705	Extra-oral posterior dental radiographic image – image capture only	Х	-
D0706	Intraoral – occlusal radiographic image – image capture only	Х	-
D0707	Intraoral – periapical radiographic image – image capture only	Х	-
D0708	Intraoral – bitewing radiographic image – image capture only	Х	-
D0709	Intraoral – complete series of radiographic images – image capture only	Х	-
D0801	3d dental scan direct	X	-
D0802	3d dental scan indirect	Х	-
D0803	3d facial scan direct	X	-
D0804	3d facial scan indirect	X	-
	Unspecified diagnostic procedure, by report	X	-
	Prophylaxis-adult	X	-
	Prophylaxis-child	X	-
	Topical application of fluoride varnish	X	-
D1208	Topical application of fluoride- excluding varnish	X	-

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D1301	Immunization counseling	Х	-
	Nutritional counseling for the control of dental disease	Х	-
D1320	Tobacco counseling for the control and prevention of oral disease	Х	-
D1321	Counseling for the control and prevention of adverse oral, behavioral, and systemic health effects associated with high-risk substance use	Х	-
D1330	Oral hygiene instruction	Х	-
D1351	Sealant-per tooth	Х	-
D1352	Prev resin rest, perm tooth	Х	-
D1353	Sealant repair- per tooth	Х	-
D1354	Interim caries arresting medicament application-per tooth	X	-
D1355	Caries preventive medicament application – per tooth	X	-
D1510	Space maintainer-fixed unilateral	Х	-
	Space maintainer-fixed-bilateral, maxillary	Х	-
D1517	Space maintainer-fixed-bilateral, mandibular	X	-
D1520	Space maintainer-removable unilateral	Х	-
D1526	Space maintainer -removable-bilateral, maxillary	X	-
D1527	Space maintainer -removable-bilateral, mandibular	X	-
D1551	Re-cement or re-bond bilateral space maintainer-maxillary	X	-
D1552	Re-cement or re-bond bilateral space maintainer-mandibular	X	-
D1553	Re-cement or re-bond unilateral space maintainer-per quadrant	X	-
D1556	Removal of fixed unilateral space maintainer- per quadrant	X	-
D1557	Removal of fixed bilateral space maintainer- maxillary	X	-
D1558	Removal of fixed bilateral space maintainer- mandibular	X	-
D1575	Distal shoe space maintainer-fixed-unilateral	X	-
D1781	Vaccine administration - human papillomavisrus - dose 1	X	-
D1782	Vaccine administration - human papillomavisrus - dose 2	X	-
D1783	Vaccine administration - human papillomavisrus - dose 3	Х	-
D1999	Unspecified preventive procedure, by report	Х	-
D2140	Amalgam-one surface, permanent	Х	-
D2150	Amalgam-two surfaces, permanent	Х	-
	Amalgam-three surfaces, permanent	Х	-
D2161	Amalgam-fouror more surfaces, permanent	Х	-

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aimer: Please note that coverage may vary by plan type and may not follow the listed services. These codes are updated quarterly. Additionally, these coding able drugs, or specialty medications and should be directed to the Pharmacy link option within the website.	lists do not reflect information re	garding immunizations,
330 Resin-one surface, anterior	Х	-
331 Resin-two surfaces, anterior	X	-
Resin-three surfaces, anterior	X	-
Resin-fouror more surfacesor involving incisal angle (anterior)	Х	-
390 Resin-based composite crown, anterior	Х	-
391 Resin-based composite - one surface, posterior	X	-
392 Resin-based composite - two surfaces, posterior	Х	-
393 Resin-based composite - three surfaces, posterior	Х	-
Resin-based composite - four or more surfaces, posterior	X	-
410 Gold foil-one surface	Х	-
420 Gold foil-two surfaces	Х	-
430 Gold foil-three surfaces	X	-
510 Inlay-metallic-one surface	X	-
520 Inlay-metallic-two surfaces	X	-
530 Inlay-metallic-three surfaces	Х	-
542 Onlay - metallic - two surfaces	Х	-
543 Onlay - metallic - three surfaces	Х	-
544 Onlay - metallic - four or more surfaces	Х	-
610 Inlay-porcelain/ceramic-one surface	X	-
620 Inlay-porcelain/ceramic-two surfaces	Х	-
630 Inlay-porcelain/ceramic-three surfaces	X	-
642 Onlay - porcelain/ceramic - two surfaces	Х	-
643 Onlay - porcelain/ceramic - three surfaces	Х	-
644 Onlay - porcelain/ceramic - four or more surfaces	X	-
650 Inlay-composite/resin-one surface (laboratory processed)	X	-
651 Inlay-composite/resin-two surfaces (laboratory processed)	Х	-
652 Inlay-composite/resin-three surfaces (laboratory processed)	X	-
662 Onlay - composite/resin - two surfaces (laboratory processed)	X	-
663 Onlay - composite/resin - three surfaces (laboratory processed)	Х	
664 Onlay - composite/resin - four or more surfaces (laboratory processed)	X	-
710 Crown resin (laboratory)	Х	-
712 Crown 3/4 resin-based compos	X	-

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D2720	Crown-resin with high noble metal	Х	_	
	Crown-resin with predominantly base metal	Х	-	
	Crown-resin with noble metal	Х	-	
D2740	Crown-porcelain/ceramic	Х	-	
D2750	Crown-porcelain fused to high noble metal	Х	-	
D2751	Crown-procelain fused to predominantly base metal	Х	-	
D2752	Crown-porcelain fused to noble metal	Х	-	
D2753	Crown-porcelain fused to titanium and titanium alloys	Х	-	
D2780	Crown - 3/4 cast high noble metal	Х	-	
D2781	Crown - 3/4 cast predominately base metal	Х	-	
D2782	Crown - 3/4 cast noble metal	Х	-	
D2783	Crown - 3/4 porcelain/ceramic	Х	-	
D2790	Crown-full cast high noble metal	Х	-	
D2791	Crown-full cast predominantly base metal	Х	-	
D2792	Crown-full cast noble metal	Х	-	
D2794	Crown-titanium	Х	-	
D2799	Provisional crown- further treatment or completion of diagnosis necessary prior to final impression	Х	-	
D2910	Re-cement or re-bond inlay, onlay, veneer or partial coverage restoration	Х	-	
D2915	Re-cement or re-bond indirectly fabricated or prefabricated post and core	Х	-	
D2920	Re-cement or re-bond crown	Х	-	
D2921	Reattachment of tooth fragment, incisal edge or cusp	Х	-	
D2928	Prefabricated porcelain/ceramic crown – permanent tooth	Х	-	
D2929	Prefabricated porcelain/ceramic crown- primary tooth	Х	-	
D2930	Prefabricated stainless steel crown-primary tooth	Х	-	
D2931	Prefabricated stainless steel crown-permanent tooth	Х	-	
D2932	Prefabricated resin crown	Х	-	
D2933	Prefabricated stainless steel crown with resin window	Х	-	
D2934	Prefab steel crown primary	Х	-	
D2940	Protective restoration	Х	-	
D2941	Interim therapeutic restoration- primary dentition	Х	-	
D2949	Restorative foundation for an indirect restoration	Х	-	
D2950	Core buildup, including any pins when required	Х	-	

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D2951	Pin retention-per tooth, in addition to restoration	X	_		
	Cast post and core in addition to crown	Х	-		
	Each additional cast post - same tooth	Х	-		
D2954	Prefabricated post and core in addition to crown	Х	-		
D2955	Post removal	Х	-		
D2957	Each additional prefabricated post - same tooth	Х	-		
D2960	Labial veneer (laminate)-chairside	Х	-		
D2961	Labial veneer (resin laminate)-laboratory	X	-		
D2962	Labial veneer (porcelain laminate)-laboratory	Х	-		
D2971	Add proc construct new crown	Х	-		
D2975	Coping	Х	-		
D2976	Band stabilization – per tooth	Х	-		
D2980	Crown repair necessitated by restorative material failure	Х	-		
D2981	Inlay repair necessitated by restorative material failure	Х	-		
D2982	Onlay repair necessitated by restorative material failure	Х	-		
D2983	Veneer repair necessitated by restorative material failure	Х	-		
D2989	Excavation of a tooth resulting in the determination of non-restorability	Х	-		
D2990	Placement of an infiltration resin restoration for strengthening, stabilizing, and/or limiting the progression of the lesion	Х	-		
D2991	Application of hydroxyapatite regeneration medicament – per tooth	Х	-		
D2999	Unspecified restorative procedure, by report	Х	-		
D3110	Pulp cap-direct (excluding final restoration)	Х	-		
D3120	Pulp cap-indirect (excluding final restoration)	Х	-		
D3220	Therapeutic pulpotomy (excluding final restoration)	Х	-		
D3221	Gross pulpal debridement primary and permanent teeth	Х	-		
D3222	Partial pulpotomy for apexogenesis - permanent tooth with incomplete root development	Х	-		
D3230	Pulpal therapy (resorbable filling) - anterior, primary tooth (exclud	Х	-		
	Pulpal therapy (resorbable filling) - posterior, primary tooth (exclu	Х	-		
	Anterior (excluding final restoration)	Х	-		
D3320	Endodontic therapy, premolar tooth (excluding final restoration)	Х	-		
D3330	Endodontic therapy, molar tooth (excluding final restoration)	Х	-		
D3331	Treatment of root canal obstruction; non-surgical access	Х	-		

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D3332	Incomplete endodontic therapy; inoperable or fractured tooth	Х	-		
D3333	Internal root repair of perforation defects	Х	-		
	Retreatment-anterior, by report	Х	-		
D3347	Retreatment of previous root canal therapy-premolar	Х	-		
D3348	Retreatment-molar, by report	Х	-		
D3351	Apexification/recalcification- initial visit (apical closure/calcific repair of perforations, root resorption, etc.)	Х	-		
D3352	Apexification/recalcification initial visit (apical closure/calcific repair of perforations, root resorption, pulp space disinfection, etc.)	X	-		
D3353	Apexification/recalcification-final visit (includes completed root can	Х	-		
D3355	Pulpal regeneration- initial visit	Х	-		
D3356	Pulpal regeneration- interim medication replacement	Х	-		
D3357	Pulpal regeneration- completion of treatment	Х	-		
D3410	Apicoectomy-anterior	Х	-		
D3421	Apicoectomy-premolar (first root)	Х	-		
D3425	Apicoectomy - molar (first root)	Х	-		
D3426	Apicoectomy - (each additional root)	Х	-		
D3428	Bone graft in conjunction with periradicular surgery- per tooth, single site	Х	-		
D3429	Bone graft in conjunction with periradicular surgery- each additional contiguous tooth in the same surgical site	Х	-		
D3430	Retrograde filling-per root	Х	-		
D3431	Biologic materials to aid in soft and osseous tissue regeneration in conjunction with periradicular surgery	Х	-		
D3432	Guided tissue regeneration, resorbable barrier, per site, in conjunction with periradicular surgery	Х	-		
D3450	Root amputation-per root	Х	-		
D3460	Endodontic endosseous implant	Х	-		
D3470	Intentional replantation (including necessary splinting)	Х	-		
D3471	Surgical repair of root resorption - anterior	Х	-		
D3472	Surgical repair of root resorption – premolar	Х	-		
	Surgical repair of root resorption – molar	Х	-		
	Surgical exposure of root surface without apicoectomy or repair of root resorption – anterior	Х	-		
D3502	Surgical exposure of root surface without apicoectomy or repair of root resorption – premolar	Х	-		
	Surgical exposure of root surface without apicoectomy or repair of root resorption – molar	Х	-		
D3910	Surgical procedure for isolation of tooth with rubber dam	Х	-		

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D3911	Intraorifice barrier	X	-	
	Hemisection (including any root removal), not including root canal the	Х	-	
D3921	Decoronation or submergence of an erupted tooth	Х	-	
D3950	Canal preparation and fitting of preformed dowelor post	Х	-	
D3999	Unspecified endodontic procedure, by report	X	-	
D4210	Gingivectomyor gingivoplasty-per quadrant	Х	-	
D4211	Gingivectomyor gingivoplasty-per tooth	X	-	
D4212	Gingivectomy or gingivoplasty to allow access for restorative procedure, per tooth	X	-	
D4230	Anatomical crown exposure - four or more contiguous teeth or tooth bounded spaces per quadrant	X	-	
D4231	Anatomical crown exposure - one to three teeth or tooth bounded spaces per quadrant	X	-	
	Gingival flap procedure, including root planing-per quadrant	X	-	
D4241	Gingival flap procedure, including root planing - one to three teeth, perquadrant	Х	-	
	Apically positioned flap	Х	-	
D4249	Crown lengthening-hard and soft tissue, by report	Х	-	
D4260	Osseous surgery (including elevation of a full thickness flap and closure)- four or more contiguous teeth or tooth bounded spaces per quadrant	Х	-	
D4261	Osseous surgery (including elevation of a full thickness flap and closure)- one to three contiguous teeth or tooth bounded spaces per quadrant	Х	-	
D4263	Bone replacement graft - retained natural tooth - first site in quadrant	Х	-	
D4264	Bone replacement graft - retained natural tooth - each additional site in quadrant	Х	-	
D4265	Biologic materials to aid in soft and osseous tissue regeneration	Х	-	
D4266	Guided tissue regeneration - resorbable barrier, per site, per tooth	Х	-	
D4267	Guided tissue regeneration - non-resorbable barrier, per site, per too	Х	-	
D4268	Surgical revision procedure per tooth	Х	-	
D4270	Pedicle soft tissue graft procedure	Х	-	
D4273	Autogenous connective tissue graft procedure (including donor and recipient surgical sites) first tooth, implant, or edentulous tooth position in graft	Х	-	
D4274	Mesial/distal wedge procedure, single tooth (when not performed in conjunction with surgical procedures in the same anatomical area)	Х	-	
D4275	Non-autogenous connective tissue graft (including recipient site and donor material) first tooth, implant, or edentulous tooth position in graft	Х	-	
D4276	Combined connective tissue and double pedicle graft	Х	-	

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D4277	Free soft tissue graft procedure (including recipient and donor surgical sites) first tooth, implant, or edentulous tooth position in graft	Х	-	
D4278	Free soft tissue graft procedure (including recipient and donor surgical sites), each additional contiguous tooth, implant or edentulous tooth position in same graft site	Х	-	
D4283	Autogenous connective tissue graft procedure (including donor and recipient surgical sites)- each additional contiguous tooth, implant or edentulous tooth position in same gra	Х	-	
D4285	Non-autogenous connective tissue graft procedure (including recipient surgical site and donor material)- each additional contiguous tooth, implant or edentulous tooth position	Х	-	
D4286	Removal of non-resorbable barrier	Х	-	
D4320	Provisional splinting-intracoronal	Х	-	
D4321	Provisional splinting-extracoronal	Х	-	
D4322	Splint - intra-coronal; natural teeth or prosthetic crowns	Х	-	
D4323	Splint - extra-coronal; natural teeth or prosthetic crowns	Х	-	
D4341	Periodontal scaling and root planing-per quadrant	Х	-	
D4342	Periodontal scaling and root planing - one to three teeth, per quadrant	Х	-	
D4346	Scaling in presence of generalized moderate or severe gingival inflammation- full mouth, after oral evaluation	Х	-	
D4355	Full mouth debridement to enable comprehensive oral evaluation and diagnosis on a subsequent visit	Х	-	
D4381	Localized delivery of antimicrobial agents via a controlled release vehicle into diseased crevicular tissue, per tooth	Х	-	
D4910	Periodontal maintenance procedures (following active therapy)	Х	-	
D4920	Unscheduled dressing change (by someone other than treating dentist)	Х	-	
D4921	Gingival irrigation- per quadrant	Х	-	
D4999	Unspecified periodontal procedure, by report	Х	-	
D5110	Complete upper	Х	-	
D5120	Complete lower	Х	-	
D5130	Immediate upper	Х	-	
D5140	Immediate lower	Х	-	
D5211	Maxillary partial denture - resin base (including retentive/clasping materilas, rest, and teeth)	Х	-	
D5212	Mandibular partial denture - resin base (including retentive/clasping materials, rest, and teeth)	Х	-	
D5213	Upper partial-cast metal base with resin saddles (including any conven	Х	-	
D5214	Lower partial-cast metal base with resin saddles (including any conven	Х	-	

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D5221	Immediate maxillary partial denture- resin base (including any conventional clasps, rests and teeth)	Х	-
D5222	Immediate mandibular partial denture- resin base (including any conventional clasps, rests and teeth)	Х	-
D5223	Immediate maxillary partial denture- cast metal framework with resin denture bases (including any conventional clasps, rests and teeth	Х	-
D5224	Immediate mandibular partial denture- cast metal framework with resin denture bases (including any conventional clasps, rests and teeth	Х	-
D5225	Maxillary part denture flex	Х	-
D5226	Mandibular part denture flex	X	-
D5227	Immediate maxillary partial denture - flexible base (including any clasps, rests and teeth)	Х	-
D5228	Immediate mandibular partial denture - flexible base (including any clasps, rests and teeth)	Х	-
D5282	Removable unilateral partial denture-one piece cast metal (including clasps and teeth), maxillary	Х	-
D5283	Removable unilateral partial denture-one piece cast metal (including clasps and teeth), mandibular	Х	-
D5284	Removable unilateral partial denture-one piece flexible base (including clasps and teeth) – per quadrant	Х	-
D5286	Removable unilateral partial denture-one piece resin (including clasps and teeth) – per quadrant	Х	-
D5410	Adjust complete denture-upper	Х	-
D5411	Adjust complete denture-lower	Х	-
D5421	Adjust partial denture-upper	Х	-
D5422	Adjust partial denture-lower	X	-
D5511	Repair broken complete denture base, mandibular	Х	-
D5512	Repair broken complete denture base, maxillary	X	-
D5520	Replace missingor broken teeth-complete denture (each tooth)	Х	-
D5611	Repair resin partial denture base, mandibular	X	-
D5612	Repair resin partial denture base, maxillary	Х	-
D5621	Repair cast partial framework, mandibular	X	-
D5622	Repair cast partial framework, maxillary	Х	-
D5630	Repair or replace broken retentive/clasping materials per tooth	X	-
D5640	Replace broken teeth-per tooth	Х	-
D5650	Add tooth to existing partial denture	Х	-
D5660	Add clasp to existing partial denture- per tooth	Х	-
D5670	Replace all teeth and acrylic on cast metal framework (maxillary)	Х	-
D5671	Replace all teeth and acrylic on cast metal framework (mandibular)	Х	-
D5710	Rebase complete upper denture	Х	-

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drugs, or specialty medications and should be directed to the Pharmacy link option within the website. Rebase complete lower denture Rebase upper partial denture Rebase lower partial denture Rebase hybrid prosthesis Reline upper complete denture (chairside) Reline lower complete denture (chairside) Reline upper partial denture (chairside)	X X X X X X X X	
Rebase upper partial denture Rebase lower partial denture Rebase hybrid prosthesis Reline upper complete denture (chairside) Reline lower complete denture (chairside) Reline upper partial denture (chairside)	X X X X X X X	- - - - - -
Rebase lower partial denture Rebase hybrid prosthesis Reline upper complete denture (chairside) Reline lower complete denture (chairside) Reline upper partial denture (chairside)	X X X X X X	- - - - - -
Rebase hybrid prosthesis Reline upper complete denture (chairside) Reline lower complete denture (chairside) Reline upper partial denture (chairside)	X X X X X	- - - - -
Reline upper complete denture (chairside) Reline lower complete denture (chairside) Reline upper partial denture (chairside)	X X X X	- - - - -
Reline lower complete denture (chairside) Reline upper partial denture (chairside)	X X X X	- - -
Reline upper partial denture (chairside)	X X X	- - -
,, ,	X	-
	Х	-
Reline lower partial denture (chairside)		
Reline upper complete denture (laboratory)	Y	-
Reline lower complete denture (laboratory)	^	-
Reline upper partial denture (laboratory)	Х	-
Reline lower partial denture (laboratory)	X	-
Soft liner for complete or partial removable denture - indirect	X	-
Interim complete denture (upper)	X	-
Interim complete denture (lower)	X	-
Interim partial denture (upper)	X	-
Interim partial denture (lower)	X	-
Tissue conditioning, upper-per denture unit	X	-
Tissue conditioning, lower-per denture unit	X	-
Precision attachment, by report	X	-
Overdenture- complete maxillary	Х	-
Overdenture- partial maxillary	X	-
Overdenture- complete mandibular	Х	-
Overdenture- partial mandibular	X	-
Replacement of replaceable part of semi-precision/attachment (m/f component)	X	-
Modification of removable prosthesis following implant surgery	X	-
Add metal substructure to acrylic full denture (per arch)	Х	-
Unspecified removable prosthodontic procedure, by report	Х	-
Facial moulage (sectional)	X	-
Pacial moulage (complete)	Х	-
Nasal prosthesis	Х	-
Auricular prosthesis	Х	-

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D5915	Orbital prosthesis	Х	-			
D5916	Ocular prosthesis	Х	-			
05919	Facial prosthesis	Х	-			
05922	Nasal septal prosthesis	Х	-			
05923	Ocular prosthesis, interim	Х	-			
05924	Cranial prosthesis	Х	-			
05925	Facial augmentation implant prosthesis	Х	-			
05926	Nasal prosthesis, replacement	Х	-			
05927	Auricular prosthesis, replacement	Х	-			
05928	Orbital prosthesis, replacement	Х	-			
05929	Facial prosthesis, replacement	Х	-			
5931	Obturator prosthesis, surgical	Х	-			
5932	Obturator prosthesis, definitive	Х	-			
5933	Obturator prosthesis, modification	Х	-			
05934	Mandibular resection prosthesis with guide flange	Х	-			
05935	Mandibular resection prosthesis without guide flange	Х	-			
05936	Obturator/prosthesis, interim	Х	-			
05937	Trismus appliance (not for tm treatment)	Х	-			
05951	Feeding aid	Х	-			
)5952	Speech aid prosthesis, pediatric	Х	-			
5953	Speech aid prosthesis, adult	Х	-			
5954	Palatal augmentation prosthesis	Х	-			
5955	Palatal lift prosthesis, definitive	Х	-			
5958	Palatal lift prosthesis, interim	Х	-			
5959	Palatal lift prosthesis, modification	Х	-			
5960	Speech aid prosthesis, modification	Х	-			
5982	Surgical stent	Х	-			
5983	Radiation carrier	Х	-			
5984	Radiation shield	Х	-			
5985	Radiation cone locator	Х	-			
5986	Fluoride gel carrier	Х	-			
5987	Commissure splint	Х	-			

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D5988	Surgical splint	Х	-		
D5991	Vesiculobullous disease medicament carrier	X	-		
D5992	Adjust max prost appliance	X	-		
D5993	Main/clean max prosthesis	Х	-		
05995	Periodontal medicament carrier with peripheral seal – laboratory processed – maxillary	X	-		
D5996	Periodontal medicament carrier with peripheral seal – laboratory processed – mandibular	X	-		
5999	Unspecified maxillofacial prosthesis, by report	X	-		
06010	Surgical placement of implant body: endosteal implant. see also 21248	Х	-		
06011	Second stage implant surgery	X	-		
06012	Surgical placement of interim implant body for transitional prosthesis: endosteal implant	Х	-		
06013	Surgical placement of mini implant	X	-		
6040	Subperiosteal implant	Х	-		
06050	Transosseous implant	X	-		
06051	Includes placement and removal. a healing cap is not an interim abutment	X	-		
06055	Implant connecting bar	Х	-		
06056	Prefabricated abutment- includes modification and placement	Х	-		
06057	Custom fabricated abutment- includes placement	Х	-		
06058	Abutment supported porcelain/ceramic crown	Х	-		
6059	Abutment supported porcelain fused to metal crown (high noble metal)	Х	-		
06060	Abutment supported porcelain fused to metal crown (predominantly base metal)	X	-		
6061	Abutment supported porcelain fused to metal crown (noble metal)	Х	-		
6062	Abutment supported cast metal crown (high noble metal)	Х	-		
6063	Abutment supported cast metal crown (predominantly base metal)	X	-		
06064	Abutment supported cast metal crown (noble metal)	Х	-		
06065	Implant supported porcelain/ceramic crown	X	-		
6066	Implant supported porcelain fused to metal crown (titanium/alloy high noble metal)	Х	-		
6067	Implant supported metal crown (titanium/alloy high noble metal)	X	-		
06068	Abutment supported retainer for porcelain/ceramic fpd	X	-		
06069	Abutment supported retainer for porcelain fused to metal fpd (high noble metal)	Х	-		
6070	Abutment supported retainer for porcelain fused to metal fpd (predominately base metal)	X	-		
06071	Abutment supported retainer for porcelain fused to metal fpd (noble metal)	Х	-		
06072	Abutment supported retainer for cast metal fpd (high noble metal)	X	-		

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D6073	Abutment supported retainer for cast metal fpd (predominately base metal)	Х	-
D6074	Abutment supported retainer for cast metal fpd (noble metal)	X	-
D6075	Implant supported retainer for ceramic fpd	X	-
D6076	Implant supported retainer for porcelain fused to metal fpd (titanium/alloy or high noble metal)	X	-
D6077	Implant supported retainer for cast metal fpd (titanium/alloy or high noble metal)	X	-
D6080	Implant maintenance procedures, when prostheses are removed and reinserted, including cleansing of prostheses and abutments	Х	-
D6081	Scaling and debridement in the presence of inflammation of mucositis of a single implant, including cleaning of the implant surfaces, without flap entry and closure	Х	-
D6082	Implant supported crown-porcelain fused to predominantly base alloys	Х	-
D6083	Implant supported crown-porcelain fused to noble alloys	Х	-
D6084	Implant supported crown-porcelain fused to titanium and titanium alloys	Х	-
D6085	Provisional implant crown	Х	-
D6086	Implant supported crown-predominantly base alloys	Х	-
D6087	Implant supported crown-noble alloys	X	-
D6088	Implant supported crown-titanium and titanium alloys	Х	-
D6089	Accessing and retorquing loose implant screw - per screw	Х	-
D6090	Repair implant, by report	X	-
D6091	Replacement of semi-precision or precision attachment (male or female component) of implant/abutment supported prosthesi	Х	-
06092	Re-cement or re-bond implant/abutment supported crown	Х	-
06093	Re-cement or re-bond implant/abutment supported fixed partial denture	Х	-
D6094	Abut support crown titanium	X	-
D6095	Repair implant abutment, by report. see also code 21299	Х	-
D6096	Remove broken implant retaining screw	Х	-
D6097	Abutment supported crown-porcelain fused to titanium and titanium alloys	Х	
D6098	Implant supported retainer-porcelain fused to predominantly base alloys	Х	-
D6099	Implant supported retainer for fpd-porcelain fused to noble alloys	Х	-
D6100	Implant removal, by report	Х	-
D6101	Debridement of a peri-implant defect or defects surrounding a single implant, and surface cleaning of the exposed implant surfaces, including flap entry and closure	х	-

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D6102	Debridement and osseous contouring of a peri-implant defect- or defects surrounding a single implant and includes surface cleaning of the exposed implant surfaces	Х	-	
D6103	Bone graft for repair of peri-implant defect- does not include flap entry and closure.	Х	-	
D6104	Placement of a barrier membrane, or biologic materials to aid in osseous regeneration are reported separately	Х	-	
D6105	Removal of implant body not requiring bone removal nor flap elevation	Х	-	
D6106	Guided tissue regeneration - resorbable barrier, per implant	Х	-	
D6107	Guided tissue regeneration - non-resorbable barrier, per implant	Х	-	
D6110	Implant/abutment supported removable denture for edentulous arch-maxillary	Х	-	
D6111	Implant/ abutment supported removable denture for edentulous arch- mandibular	Х	-	
D6112	Implant/ abutment supported removable denture for partially edentulous arch- maxillary	Х	-	
D6113	Implant/ abutment supported removable denture for partially edentulous arch- mandibular	Х	-	
D6114	Implant/ abutment supported fixed denture for edentulous arch- maxillary	Х	-	
D6115	Implant/ abutment supported fixed denture for edentulous arch- mandibular	Х	-	
D6116	Implant/ abutment supported fixed denture for partially edentulous arch- maxillary	Х	-	
D6117	Implant/ abutment supported fixed denture for partially edentulous arch- mandibular	Х	-	
D6118	Implant/abutment supported interim fixed denture for edentulous arch ¿ mandibular	Х	-	
D6119	Implant/abutment supported interim fixed denture for edentulous arch ¿ maxillary	Х	-	
D6120	Implant supported retainer -porcelain fused to titanium and titanium alloys	Х	-	
D6121	Implant supported retainer for metal fpd -predominantly base alloys	Х	-	
D6122	Implant supported retainer for metal fpd -noble alloys	Х	-	
D6123	Implant supported retainer for metal fpd -titanium and titanium alloys	Х	-	
D6190	Radio/surgical implant index	Х	-	
D6191	Semi-precision abutment – placement	Х	-	
D6192	Semi-precision attachment – placement	Х	-	
D6194	Abut support retainer titani	Х	-	
D6195	Abutment supported retainer-porcelain fused to titanium and titanium alloys	Х	-	
D6197	Replacement of restorative material used to close an access opening of a screw-retained implant supported prosthesis, per implant	Х	-	
D6198	Remove interim implant component	Х	-	
	Unspecified implant procedure, by report	Х	-	
	Pontic-indirect resin based	X	-	

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D6210	Pontic-cast high noble metal	X	-			
D6211	Pontic-cast predominantly base metal	Х	-			
D6212	Pontic-cast noble metal	Х	-			
D6214	Pontic titanium	Х	-			
D6240	Pontic-porcelain fused to high noble metal	Х	-			
D6241	Pontic-porcelain fused to predominantly base metal	Х	-			
D6242	Pontic-porcelain fused to noble metal	Х	-			
D6243	Pontic-porcelain fused to titanium and titanium alloys	Х	-			
D6245	Pontic - porcelain/ceramic	Х	-			
D6250	Pontic-resin with high noble metal	Х	-			
D6251	Pontic-resin with predominantly base metal	Х	-			
06252	Pontic-resin with noble metal	Х	-			
06253	Provisional pontic- further treatment or completion of diagnosis necessary prior to final impression	Х	-			
D6545	Retainer-cast metal for acid etched fixed prosthesis	X	-			
06548	Retainer - porcelain/ceramic for resin bonded fixed prosthesis	Х	-			
06549	Resin retainer- for resin bonded fixed prosthesis	Х	-			
06600	Retainer inlay-porcelain/ceramic, two surfaces	Х	-			
D6601	Retainer inlay - porcelain/ceramic, three or more surfaces	Х	-			
06602	Retainer inlay - cast high noble metal, two surfaces	Х	-			
06603	Retainer inlay - cast high noble metal, three or more surfaces	Х	-			
06604	Retainer inlay - cast predominantly base metal, two surfaces	Х	-			
06605	Retainer inlay - cast predominantly base metal, three or more surfaces	Х	-			
06606	Retainer inlay - cast noble metal, two surfaces	Х	-			
06607	Retainer inlay - cast noble metal, three or more surfaces	Х	-			
06608	Retainer onlay - porcelain/ceramic, two surfaces	Х	-			
06609	Retainer onlay - porcelain/ceramic, three or more surfaces	Х	-			
06610	Retainer onlay - cast high noble metal, two surfaces	Х	-			
D6611	Retainer onlay - cast high noble metal, three or more surfaces	Х	-			
D6612	Retainer onlay - cast predominantly base metal, two surfaces	Х	-			
	Retainer onlay - cast predominantly base metal, three or more surfaces	Х	-			
06614	Retainer onlay - cast noble metal, two surfaces	Х	-			
06615	Retainer onlay - cast noble metal, three or more surfaces	Х	-			
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•	Retainer inlay titanium	X		
	Retainer onlay titanium	X		
	Retainer crown-indirect resin based composite	X		
	Retainer crown-resin with high noble metal	X	-	
	Retainer crown-resin with predominantly base metal	X	-	
	Retainer crown-resin with noble metal	X	-	
	Retainer crown - porcelain/ceramic	X	-	
	Retainer crown-porcelain fused to high noble metal	X	-	
	Retainer crown-porcelain fused to predominantly base metal	X	-	
	Retainer crown-porcelain fused to noble metal	X	-	
D6753	Retainer crown-porcelain fused to titanium and titanium alloys	Х	-	
	Retainer crown-3/4 cast high noble metal	Х	-	
D6781	Retainer crown - 3/4 cast predominately based metal	Х	-	
D6782	Retainer crown - 3/4 cast noble metal	Х	-	
D6783	Retainer crown - 3/4 porcelain/ceramic	Х	-	
D6784	Retainer crown 3/4-titanium and titanium alloys	Х	-	
D6790	Retainer crown-full cast high noble metal	Х	-	
D6791	Retainer crown-full cast predominantly base metal	Х	-	
D6792	Retainer crown-full cast noble metal	Х	-	
D6793	Provisional retainer crown- further treatment or completion of diagnosis necessary prior to final impression	Х	-	
D6794	Retainer crown titanium	Х	-	
D6920	Connector bar	Х	-	
D6930	Re-cement or re-bond fixed partial denture	X	-	
D6940	Stress breaker	Х	-	
D6950	Precision attachment	X	-	
	Fixed partial denture repair, necessitated by restorative material failure	X	-	
	Pediatric partial denture, fixed	X	-	
	Unspecified fixed prosthodontic procedure, by report	Х	-	
	Extraction, coronal remnants - primary tooth	X	-	
	Extraction, erupted tooth or exposed root (elevation and/or forceps removal)	X	-	
D7210	Extraction, erupted tooth requiring removal of bone and/or sectioning of tooth, and including elevation of mucoperiopsteal flap if indicated.	Х	-	

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D7220	Removal of impacted tooth-soft tissue	Х	-
	Removal of impacted tooth-partially bony	Х	-
D7240	Removal of impacted tooth-completely bony	Х	-
D7241	Removal of impacted tooth-completely bony, with unusual surgical compl	X	-
D7250	Removal of residual tooth roots (cutting procedure)	Х	-
D7251	Coronectomy	X	-
D7260	Oral antral fistula closure	Х	-
D7261	Primary closure of a sinus perforation	Х	-
D7270	Tooth re-implantation and/or stabilization of accidentally evulsedor d	X	-
D7272	Tooth transplantation	X	-
D7280	Exposure of an unerupted tooth	X	-
D7282	Mobilization of erupted or malpositioned tooth to aid eruption	Х	-
D7283	Place device impacted tooth	X	-
D7284	Excisional biopsy of minor salivary glands	Х	-
D7285	Incisional biopsy of oral tissue-hard (bone, tooth)	X	-
D7286	Incisional biopsy of oral tissue-soft	Х	-
D7287	Cytology sample collection	X	-
D7288	Brush biopsy	X	-
D7290	Surgical repositioning of teeth	X	-
D7291	Transseptal fiberotomy	X	-
	Placement of temporary anchorage device (screw retained plate) requiring flap; includes device removal	X	-
D7293	Placement of temporary anchorage device requiring flap; includes device removal	X	-
D7294	Placement of temporary anchorage device without flap; includes device removal	X	-
D7295	Bone harvest,auto graft proc	X	-
D7296	Corticotomy ¿ one to three teeth or tooth spaces, per quadrant	X	-
D7297	Corticotomy ¿ four or more teeth or tooth spaces, per quadrant	X	-
D7298	Removal of temporary anchorage device (screw retained plate), requiring flap	Х	-
D7299	Removal of temporary anchorage device, requiring flap	Х	-
	Removal of temporary anchorage device without flap	Х	-
	Alveoloplasty in conjunction with extractions - per quadrant	Х	-
	Alveoloplasty w/extract 1-3	X	-
D7320	Alveoloplasty not in conjunction with extractions - per quadrant	Х	-

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D7321 Alveoloplasty not w/extracts		Χ	-	
D7340 Vestibuloplasty-ridge extension (second epithelialization)		Χ	-	
D7350 Vestibuloplasty-ridge extension (including soft tissue grafts, muscle		Χ	-	
D7410 Radical excision-lesion diameter up to 1.25 cm		Χ	-	
D7411 Excision of benign lesion greater than 1.25 cm		Χ	-	
D7412 Excision of benign lesion, complicated		Χ	-	
D7413 Excision of malignant lesion up to 1.25 cm		Χ	-	
D7414 Excision of malignant lesion greater than 1.25 cm		Χ	-	
D7415 Excision of malignant lesion, complicated		Χ	-	
D7440 Excision of malignant tumor-lesion diameter up to 1.25 cm		Χ	-	
D7441 Excision of malignant tumor-lesion diameter greater than 1.25 cm		Χ	-	
D7450 Removal of odontogenic cystor tumor-lesion diameter up t0 1.25 cm		Χ	=	
D7451 Removal of odontogenic cystor tumor-lesion diameter greater than 1	.25	Χ	-	
D7460 Removal of nonodontogenic cystor tumor-lesion diameter up to 1.25	cm	Χ	-	
D7461 Removal of nonodontogenic cystor tumor-lesion diameter greater that	an 1.	Χ	-	
D7465 Destruction of lesion(s) by physicalor chemical methods, by report		Χ	-	
D7471 Removal of exostosis - per site		Χ	-	
D7472 Removal of torus palatinus		Χ	-	
D7473 Removal of torus mandibularis		Χ	-	
D7485 Reduction of osseous tuberosity		Χ	-	
D7490 Radical resection of mandible with bone graft		Χ	-	
D7509 Marsupialization of odontogenic cyst		Χ	-	
D7510 Incision and drainage of abscess-intraoral soft tissue		Χ	-	
D7511 Incision/drain abscess intra		Χ	-	
D7520 Incision and drainage of abscess-extraoral soft tissue		Χ	-	
D7521 Incision/drain abscess extra		Χ	-	
O7530 Removal of foreign body, skin,or subcutaneous areolar tissue		Χ	-	
D7540 Removal of reaction-producing foreign bodies-musculoskeletal system	m	Χ	-	
D7550 Sequestrectomy for osteomyelitis		Χ	-	
D7560 Maxillary sinusotomy for removal of tooth fragmentor foreign body		Χ	-	
D7610 Maxilla-open reduction (teeth immobilized if present)		Χ	-	
D7620 Maxilla-closed reduction (teeth immobilized if present)		Χ	-	

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D7630	Mandible-open reduction (teeth immobilized if present)	Х	-
D7640	Mandible-closed reduction (teeth immobilized if present)	Х	-
D7650	Malar and/or zygomatic arch-open reduction	Х	-
	Malar and/or zygomatic arch-closed reduction	Х	-
D7670	Alveolus-stabilization of teeth, open reduction splinting	Х	-
D7671	Alveolus - open reduction, may include stabilization of teeth	Х	-
D7680	Facial bones-complicated reduction with fixation and mul- tiple surgic	Х	-
D7710	Maxilla-open reduction	Х	-
D7730	Mandible-open reduction	Х	-
D7750	Malar and/or zygomatic arch-open reduction	Х	-
D7760	Malar and/or zygomatic arch-closed reduction	Х	-
D7770	Alveolus-stabilization of teeth, open reduction splinting	Х	-
D7771	Alveolus, closed reduction stabilization of teeth	Х	-
D7780	Facial bones - complicated reduction with fixation and multiple approaches	Х	-
D7810	Open reduction of dislocation	Х	-
D7881	Oclussal orthotic device adjustment	Х	-
D7910	Suture of recent small wounds up to 5 cm	Х	-
D7911	Complicated suture-up to 5 cm	Х	-
D7912	Complicated suture-greater than 5 cm	Х	-
D7920	Skin grafts (identify defect covered, location, and type of graft)	Х	-
D7921	Collection and application of autologous blood concentrate product	Х	-
D7922	Placement of intra-socket biological dressing to aid in hemostasis or clot stabilization, per site	Х	-
D7939	A guide is stabilized to the teeth and/or the bone to allow for virtual guidance of osteotomy.	Х	-
D7940	Osteoplasty-for orthognathic deformities	Х	-
D7946	Lefort i (maxilla-total)	Х	-
D7947	Lefort i (maxilla-segmented)	Х	-
D7948	Lefort iior lefort iii (osteoplasty of facial bones for midface hypopl	Х	-
D7949	Lefort iior lefort iii-with bone graft	Х	-
D7950	Osseous, osteoperiosteal, periosteal, or cartilage graft of the mandibl	Х	-
D7951	Sinus augmentation with bone or bone substitutes via a lateral open approach	Х	-
	The augmentation of the sinus to increase alveolar height by vertical access through the ridge crest by raising the floor of the sinus and grafting as necessary. this include	Х	-

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D7953 Bone replacement graft	Х	-	
D7955 Repair of maxillofacial soft and hard tissue defects	X	-	
D7956 Guided tissue regeneration, edentulous area - resorbable barrier, per site	X	-	
D7957 Guided tissue regeneration, edentulous area - non-resorbable barrier, per site	X	-	
D7961 Buccal / labial frenectomy (frenulectomy)	X	-	
D7962 Lingual frenectomy (frenulectomy)	X	-	
D7963 Frenuloplasty	X	-	
D7970 Excision of hyperplastic tissue-per arch	X	-	
D7971 Excision of pericoronal gingiva	X	-	
D7972 Surgical reduction of fibrous tuberosity	X	-	
D7979 Non ¿ surgical sialolithotomy	X	-	
D7980 Surgical sialolithotomy	X	-	
D7981 Excision of salivary gland	X	-	
D7982 Sialodochoplasty	X	-	
D7983 Closure of salivary fistula	X	-	
D7990 Emergency tracheotomy	X	-	
D7991 Coronoidectomy	X	-	
D7993 Surgical placement of craniofacial implant – extra oral	X	-	
D7994 Surgical placement: zygomatic implant	X	-	
D7995 Synthetic graft - mandible or facial bones, by report. see also 21299	X	-	
D7996 Implant - mandible for augmentation purposes see also code 21299	X	-	
D7997 Appliance removal (not by dentist who placed appliance) incl removal of archbar	X	-	
D7998 Intraoral placement of a fixation device not in conjunction with a fracture	X	-	
D7999 Unspecified oral surgery procedure, by report	X	-	
D8010 Limited orthodontic treatment of the primary dentition	X	-	
D8020 Limited orthodontic treatment of the transitional dentition	X	-	
D8030 Limited orthodontic treatment of the adolescent dentition	X	-	
D8040 Limited orthodontic treatment of the adult dentition	X	-	
D8050 Interceptive orthodontic treatment of the primary dentition	Х	-	
D8060 Interceptive orthodontic treatment of the transitional dentition	Х	-	
D8070 Comprehensive orthodontic treatment of the transitional dentition	Х	-	
D8080 Comprehensive orthodontic treatment of the adolescent dentition	X	-	

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D8090 C	Comprehensive orthodontic treatment of the adult dentition	Х	-	
D8210 R	Removable appliance therapy	X	-	
D8220 F	ixed appliance therapy	Х	-	
D8660 P	Pre-orthodintic treatment examination to monitor growth and development	X	-	
D8670 P	Periodic orthodontic treatment visit (as part of contract)	Х	-	
08680 C	Orthodontic retention (removal of appliances, construction and placem	X	-	
08681 R	Removable orthodontic retainer adjustment	X	-	
08690 C	Orthodontic treatment (alternative billing to a contract fee)	X	-	
08695 R	Removal of fixed orthodontic appliances for reasons other than completion of treatment	X	-	
08696 R	Repair of orthodontic appliance-maxillary	X	-	
08697 R	Repair of orthodontic appliance-mandibular	X	=	
08698 R	Re-cement or re-bond fixed retainer-maxillary	Х	-	
08699 R	Re-cement or re-bond fixed retainer-mandibular	Х	-	
08701 R	Repair of fixed retainer, includes reattachment-maxillary	Х	-	
08702 R	Repair of fixed retainer, includes reattachment-mandibular	Х	-	
08703 R	Replacement of lost or broken retainer-maxillary	Х	-	
08704 R	Replacement of lost or broken retainer-mandibular	Х	-	
08999 L	Inspecified orthodontic procedure, by report	Х	-	
09110 P	Palliative (emergency) treatment of dental pain-minor procedures	X	-	
9120 F	ixed partial denture sectioning	Х	-	
9130 T	emporomandibular joint dysfunction-non-invasive physical therapies	X	-	
9210 L	ocal anesthesia n0t in conjunction with operativeor surgical procedu	X	=	
9211 R	Regional block anesthesia	X	-	
9212 T	rigeminal division block anesthesia	X	-	
09215 L	.cl ansthsa w oprtv or srgcl prcdrs	X	-	
9219 E	Evaluation for moderate sedation, deep sedation or general anesthesia	X	-	
)9222 D	Deep sedation/general anesthesia ¿ first 15 minutes	Х	-	
09223 D	Deep sedation/general anesthesia-each subsequent 15 minute increment	Х	-	
09230 Ir	nhltn ntrs oxd/anlgsa, anxlyss	Х	-	
	ntravenous moderate (conscious) sedation/analgesia ¿ first 15 minutes	Х	-	
09243 Ir	ntravenous moderate (conscious) sedation/analgesia-each subsequent 15 minute increment	Х		
)9248 N	Non-intravenous conscious sedation	Х	-	

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D9310 Consultation (diagnostic service provided b	y dentistor physician other	Х	-	
D9311 Consultation with a medical health care pro	fessional	Х	-	
D9410 House call		Х	=	
D9420 Hsptl or asc call		Х	-	
O9430 Office visit for observation (during regularly	scheduled hours) no oth	X	-	
Oghice visit-after regularly scheduled hours		Х	-	
D9450 Case presentation, detailed and extensive t	reatment planning	Х	-	
D9610 Therapeutic drug injection, by report		Х	-	
D9612 Therapeutic parenteral drugs, two or more	administrations, different medications	Х	-	
19613 Infiltration of sustained release therapeutic	drug-single or multiple sites	X	-	
D9630 Drugs or medicaments dispensed in the off	ice for home use	X	-	
99910 Application of desensitizing medicaments		Х	-	
D9911 Application of desensitizing resin for cervica	al and/or root surface per tooth	Х	-	
D9912 Pre-visit patient screening		Х	-	
D9920 Behavior management, by report		Х	-	
D9930 Treatment of complications (postsurgical) -	unusual circumstances, by	Х	-	
D9932 Cleaning and inspection of removable comp	olete denture, maxillary	Х	-	
D9933 Cleaning and inspection of removable comp	plete denture, mandibular	Х	-	
D9934 Cleaning and inspection of removable partia	al denture, maxillary	Х	-	
D9935 Cleaning and inspection of removable partia	al denture, mandibular	Х	-	
D9938 Fabrication of a custom removable clear pla	astic temporary aesthetic appliance	Х	-	
D9939 Placement of a custom removable clear pla	stic temporary aesthetic appliance	Х	-	
D9941 Fabrication of athletic mouthguards		Х	-	
D9942 Repair/reline occlusal guard		Х	-	
Occlusal guard adjustment		Х	-	
09944 Occlusal guard-hard appliance, full arch		Х	-	
Occlusal guard-soft appliance, full arch		Х	-	
D9946 Occlusal guard-hard appliance, partial arch		Х	-	
D9947 Custom sleep apnea appliance fabrication a	and placement	Х	-	
D9948 Adjustment of custom sleep apnea appliance	ce	Х	-	
D9949 Repair of custom sleep apnea appliance		Х	-	
D9950 Occlusion analysis-mounted case		Х	-	

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D9953	Reline custom sleep apnea appliance (indirect)	Х	-	
D9956	Administration of home sleep apnea test	Х	-	
D9957	Screening for sleep related breathing disorders	Х	-	
D9961	Duplicate/copy patient's records	Х	-	
D9970	Enamel microabrasion	Х	-	
D9971	Odontoplasty 1-2 teeth; includes removal of enamel projections	Х	-	
D9972	External bleaching- per arch- perfmored in offic	Х	-	
D9973	External bleaching - per tooth	Х	-	
D9974	Internal bleaching - per tooth	Х	-	
D9975	External bleaching for home application, per arch; includes materials and fabrication of custom trays	Х	-	
D9985	Sales tax	Х	-	
D9986	Missed appointment	Х	-	
D9987	Cancelled appointment	Х	-	
D9990	Certified translation or sign-certified translation or sign-language services per visit	Х	-	
D9991	Dental case management- addressing appointment compliance barriers	Х	-	
D9992	Dental case management- care coordination	Х	-	
D9993	Dental case management- motivational interviewing	Х	-	
D9994	Dental case management- patient education to improve oral health literacy	Х	-	
D9995	Teledentistry ¿ synchronous; real-time encounter	Х	-	
D9996	Teledentistry asynchronous; information stored and forwarded to dentist for subsequent review	Х	-	
D9997	Dental case management-patients with special health care needs	Х	-	
D9999	Unspecified adjunctive procedure, by report	Х	-	
E0117	Crutch, underarm, articulating, spring assisted, each	Х	-	
E0152	Walker, battery powered, wheeled, folding, adjustable or fixed height	Х	-	
E0160	Sitz type bath or equipment	Х	-	
E0161	Sitz bath/equipment w/faucet	Х	-	
E0162	Sitz bath chair	Х	-	
E0163	Commode chair stationry fxd	Х	-	
E0165	Commode chair stationry det	Х	-	
E0167	Commode chair pail or pan	Х	-	
	Heavyduty/wide commode chair	Х	-	
E0170	Commode chair with integrated seat lift mechanism, electric, any type	Х	-	

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E0171 Commode chair with integrated seat lift mechanism, non-electric, any type	Х	-		
E0172 Seat lift mechanism placed over or on top of toilet, any type	Х	-		
E0175 Commode chair foot rest	Х	-		
E0190 Positioning cushion/pillow/wedge, any shape or size	Х	-		
E0194 Air fluidized bed	-	Χ		
E0200 Heat lamp without stand	X	-		
E0203 Therapeutic lightbox, minimum 10,000 lux, table top model	X	-		
E0205 Heat lamp with stand	X	-		
E0210 Electric heat pad standard	X	-		
E0215 Electric heat pad moist	X	-		
E0217 Water circ heat pad w pump	X	-		
E0218 Water circ cold pad w pump	X	-		
E0221 Infrared heating pad system	X	-		
E0225 Hydrocollator unit	X	-		
Non-contact wound warming device (temperature control unit, ac adapter and power cord) for use with warming card and wou	X	-		
E0232 Warming card for use with the non-contact wound warming device and non-contact wound warming wound cover	Х	-		
E0235 Paraffin bath unit portable	Х	-		
E0236 Pump for water circulating p	Х	-		
E0239 Hydrocollator unit portable	Х	-		
E0241 Bath tub wall rail	Х	-		
E0242 Bath tub rail floor	Х	-		
E0243 Toilet rail	Х	-		
E0244 Toilet seat raised	Х	-		
E0245 Tub stool or bench	Х	-		
E0246 Transfer tub rail attachment	Х	-		
E0247 Transfer bench for tub or toilet with or without commode opening	Х	-		
E0248 Transfer bench, heavy duty, for tub or toilet with or without commode opening	Х	-		
E0249 Pad for water circulating heat unit, for replacement only	Х	-		
E0271 Mattress innerspring	Х	-		
E0273 Bed board	Х	-		

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0274	Over-bed table	Х	-
0275	Bed pan standard	Х	-
0276	Bed pan fracture	Х	-
0280	Bed cradle	Х	-
0302	Hospital bed, extra heavy duty, extra wide, with weight capacity greater than 600 lbs w/rails w/o mattress	-	Χ
0315	Bed accessory brd/tbl/supprt	Х	-
0316	Safety enclosure frame/canopy for use with hospital bed, any type	Х	-
0325	Urinal male jug-type	Х	-
0326	Urinal female jug-type	Х	-
0350	Control unit bowel system	Х	-
0352	Disposable pack w/bowel syst	Х	-
0370	Air elevator for heel	Х	-
0425	Gas system stationary compre	Х	-
0435	Oxygen system liquid portabl	Х	-
0440	Oxygen system liquid station	Х	-
0446	Topical ox deliver sys, nos	Х	-
0462	Rocking bed w/ or w/o side r	-	Х
0481	Intrapulmonary percussive ventilation system and related accessories	Х	-
0490	Power source and control electronics unit for oral device/appliance for neuromuscular electrical stimulation of the tongue muscle, controlled by hardware remote	Х	-
0491	Oral device/appliance for neuromuscular electrical stimulation of the tongue muscle, used in conjunction with the power source and control electronics unit, controlled by hardware remote, 90-day supply	Х	-
0492	Power source and control electronics unit for oral device/appliance for neuromuscular electrical stimulation of the tongue muscle, controlled by phone application	Х	-
0493	Oral device/appliance for neuromuscular electrical stimulation of the tongue muscle, used in conjunction with the power source and control electronics unit, controlled by phone application, 90-day supply	Х	-
0530	Electronic positional obstructive sleep apnea treatment, with sensor, includes all components and accessories, any type	Х	-
0574	Ultrasonic generator w svneb	Х	-
	Breast pump	Х	-
0604	Breast pump, heavy duty, hospital grade, piston operated, pulsatile vacuum suction/release cycles, vacuum regulator, sup	-	Х

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E0605	Vaporizer room type	Х	-		
	Patient lift sling or seat	Х	-		
E0625	Patient lift bathroom or toi	Х	-		
E0627	Seat lift incorp lift-chair	Х	-		
0629	Seat lift for pt furn-non-el	Х	-		
0630	Patient lift hydraulic	Х	-		
E0635	Patient lift electric	Х	-		
E0636	Multipositional patient support system, with integrated lift, patientaccessible controls	Х	-		
E0637	Combination sit to stand frame/table system, any size including pediatric, with seat lift feature, with or without wheels	Х	-		
E0638	Standing frame/table system, one position (e.g. upright, supine or prone stander), any size including pediatric, with or without wheels	Х	-		
0639	Moveable patient lift system	Х	-		
	Fixed patient lift system	Х	-		
	Segmental pneumatic appliance for use with pneumatic compressor, trunk	Х	-		
0657	Segmental pneumatic appliance for use with pneumatic compressor, chest	Х	-		
E0660	Pneumatic appliance full leg	-	Х		
E0677	Non pneum seq comp trunk	-	Х		
	Nonpneumatic sequential compression garment, full leg	Х	-		
0679	Nonpneumatic sequential compression garment, half leg	Х	-		
0681	Nonpneumatic compression controller without calibrated gradient pressure	Х	-		
0700	Safety equipment, device or accessory, any type	Х	-		
0705	Transfer board or device, any type, each	Х	-		
0710	Restraints any type	Х	-		
E0711	Ue enclosure restr rom	Х	-		
0732	Cranial electrotherapy stimulation (CES) system, any type	Х	-		
0734	External upper limb tremor stimulator of the peripheral nerves of the wrist	Х			
0735	Noninvasive vagus nerve stimulator	Х	-		
0738	Upper extremity rehabilitation system providing active assistance to facilitate muscle re-education, include microprocessor, all components and accessories	Х	-		
E0739	Rehab system with interactive interface providing active assistance in rehabilitation therapy, includes all components and accessories, motors, microprocessors, sensors	Х	-		

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E0740	Incontinence treatment systm	Х	-
E0744	Neuromuscular stim for scoli	Х	-
E0745	Neuromuscular stim for shock	Х	-
E0746	Electromyograph biofeedback	Х	-
0747	Elec osteogen stim not spine	-	Х
0748	Elec osteogen stim spinal	-	Х
0749	Elec osteogen stim implanted	-	Х
0760	Osteogen ultrasound stimltor	-	Х
0761	Non-thermal pulsed high frequency radiowaves, high peak power electromagneticenergy treatment device	Х	-
0762	Transcutaneous electrical joint stimulation device system, includes all accessories	Х	-
E0764	Functional neuromuscular stimulator, transcutaneous stimulation of muscles of ambulation with computer control, used for	х	-
0765	Nerve stimulator for tx n&v	Х	_
E0770	Functional electrical stimulator, transcutaneous stimulation of nerve and/or muscle groups, any type, complete system, n	Х	-
-0783	Programmable infusion pump	_	X
	Ext amb infusn pump insulin	_	X
	Implantable pump replacement	_	X
	Cgs dose adj insulin inf pmp	Х	-
	Parenteral infusion pump sta	-	X
	Cervical pneum trac equip	Х	-
	Traction stand free standing	X	_
	Cervical traction equipment	Х	_
	Cervical traction device, cervical collar with inflatable air bladder	Х	-
	Tract equip cervical tract	Х	-
	Trac stand free stand extrem	Х	-
0900	Trac stand free stand pelvic	Х	-
	Gravity assisted traction de	X	-
	Wheelchair commode seat	Х	-
0986	Manual wheelchair accessory, push-rim activated power assist, each	-	Х
	Manual wheelchair accessory, lever-activated, wheel drive, pair	-	Х
	Wheelchair accessory, power seating system, tilt only	_	Х

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E1003	Wheelchair accessory, power seating system, recline only, without shear	-	Х	
E1004	Wheelchair accessory, power seating system, recline only, with mechanical shear	-	Х	
E1005	Wheelchair accessory, power seatng system, recline only, with power shear	-	Χ	
E1006	Wheelchair accessory, power seating system, combination tilt and recline, w/o shear reduction	-	Х	
E1007	Wheelchair accessory, power seating system, combination tilt and recline, with manual shear reduction	-	Х	
E1008	Wheelchair accessory, power seating system, combination tilt and recline, with power shear reduction	-	Х	
E1029	Wheelchair accessory, ventilator tray, fixed	-	Х	
E1030	Wheelchair accessory, ventilator tray, gimbaled	-	X	
E1031	Rollabout chair with casters	Х	-	
E1035	Multi-positional patient transfer system, with integrated seat, operated by care giver, patient weight capacity up to an	Х	-	
E1036	Multi-positional patient transfer system, extra-wide, with integrated seat, operated by caregiver, patient weight capaci	Х	-	
E1039	Transport chair pt wt>300lb	Х	-	
	Whelchr fxd full length arms	-	Х	
E1060	Wheelchair detachable arms	-	Х	
E1070	Wheelchair detachable foot r	-	Х	
E1083	Hemi-wheelchair fixed arms	-	Х	
E1084	Hemi-wheelchair detachable a	-	Х	
E1085	Hemi-wheelchair fixed arms	-	Х	
E1086	Hemi-wheelchair detachable a	-	Х	
E1087	Wheelchair lightwt fixed arm	-	Χ	
E1088	Wheelchair lightweight det a	-	Х	
	Wheelchair lightwt fixed arm	-	Х	
E1090	Wheelchair lightweight det a	-	Х	
E1092	Wheelchair wide w/ leg rests	-	Х	
E1093	Wheelchair wide w/ foot rest	-	Х	
E1100	Whchr s-recl fxd arm leg res	-	Х	
	Wheelchair semi-recl detach	-	Х	
E1130	Whichr stand fxd arm ft rest	-	X	
E1140	Wheelchair standard detach a	-	X	
E1150	Wheelchair standard w/ leg r	-	Х	

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E1160 Wheelchair fixed arms	-	Х
E1161 Manual adult size wheelchair, includes tilt in space	-	Х
E1170 Whichr ampu fxd arm leg rest	-	Х
E1171 Wheelchair amputee w/o leg r	-	Х
E1172 Wheelchair amputee detach ar	-	Х
E1180 Wheelchair amputee w/ foot r	-	X
E1190 Wheelchair amputee w/ leg re	-	Χ
E1195 Wheelchair amputee heavy dut	-	Х
E1200 Wheelchair amputee fixed arm	-	Χ
E1220 Whlchr special size/constrc	-	Х
E1221 Wheelchair spec size w foot	-	Χ
E1222 Wheelchair spec size w/ leg	-	Х
E1223 Wheelchair spec size w foot	-	Χ
E1224 Wheelchair spec size w/ leg	-	Χ
E1225 Wheelchair spec sz semi-recl	-	Χ
E1226 Wheelchair spec sz full-recl	-	Χ
E1227 Wheelchair spec sz spec ht a	-	Χ
E1228 Wheelchair spec sz spec ht b	-	Χ
E1229 Pediatric wheelchair nos	-	Χ
E1230 Power operated vehicle	Х	-
E1231 Wheelchair, pediatric size, tilt-in-space, rigid, adjustable, with seatingsystem	-	Χ
E1232 Wheelchair, pediatric size, tilt-in-space, folding, adjustable, with seatingsystem	-	Χ
E1233 Wheelchair, pediatric size, tilt-in-space, rigid, adjustable, without seatingsystem	-	Χ
E1234 Wheelchair, pediatric size, tilt-in-space, folding, adjustable, without seatingsystem	-	Χ
E1235 Wheelchair, pediatric size, rigid, adjustable, with seating system	-	Χ
E1236 Wheelchair, pediatric size, folding, adjustable, with seating system	-	Χ
E1237 Wheelchair, pediatric size, rigid, adjustable, without seating system	-	Х
E1238 Wheelchair, pediatric size, folding, adjustable, without seating system	-	Χ
E1239 Ped power wheelchair nos	-	Χ
E1240 Whchr litwt det arm leg rest	-	Х
E1250 Wheelchair lightwt fixed arm	-	Х
E1260 Wheelchair lightwt foot rest	-	Х

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1270 Wheelchair lightweight leg r	-	Χ
1280 Whchr h-duty det arm leg res	-	Х
1285 Wheelchair heavy duty fixed	-	Х
1290 Wheelchair hvy duty detach a	-	Х
1295 Wheelchair heavy duty fixed	-	Х
1296 Wheelchair special seat heig	-	Х
1297 Wheelchair special seat dept	-	Х
1298 Wheelchair spec seat depth/w	-	Х
1300 Whirlpool portable	Х	-
1310 Whirlpool non-portable	X	-
1356 Oxygen accessory, battery pack/cartridge for portable concentrator, any type, replacement only, each	Х	-
1392 Portable oxygen concentrator, rental	-	Х
1520 Heparin infusion pump for di	-	X
1530 Air bubble detector for dial	-	X
1540 Pressure alarm for dialysis	-	Х
1550 Bath conductivity meter	-	Х
1570 Adjustable chair for esrd pt	Х	-
1592 Auto interm peritoneal dialy	-	Х
1594 Cycler dialysis machine	-	X
1620 Blood pump for dialysis	-	Х
1625 Water softening system	Х	-
1630 Reciprocating peritoneal dia	-	Х
1639 Scale, for dialysis, each	Х	-
1700 Jaw motion rehab system	Х	-
1701 Repl cushions for jaw motion	Х	-
1702 Repl measr scales jaw motion	Х	-
1905 Vr cbt therapy	Х	-
2100 Blood glucose monitor with integrated voice synthesizer	Х	-
2102 Adjunctive continuous glucose monitor or receiver	-	X
2103 Non-adjunctive, non-implanted continuous glucose monitor or receiver	-	Х
2201 Manual wheelchair accessory, nonstandard seat frame, width 20-24 in.	-	Х
2202 Manual wheelchair accessory, nonstandard seat frame width, 24-27 inches	-	Х

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E2203	Manual wheelchair accessory, nonstandard seat frame depth, 20-22 in.	-	Х
E2204	Manual wheelchair accessory, nonstandard seat frame depth, 22 to 25 inches	-	Χ
E2205	Manual wc accessory, handrim	-	Χ
E2206	Complete wheel lock assembly	-	Χ
E2207	Wheelchair accessory, crutch and cane holder, each	-	Χ
E2208	Wheelchair accessory, cylinder tank carrier, each	-	Χ
E2209	Wheelchair accessory, arm trough, each	-	Χ
E2210	Wheelchair accessory, bearings, any type, replacement only, each	-	Χ
E2211	Manual wheelchair accessory, pneumatic propulsion tire, any size, each	-	Χ
E2212	Manual wheelchair accessory, tube for pneumatic propulsion tire, any size, each	-	Χ
E2213	Manual wheelchair accessory, insert for pneumatic propulsion tire (removable), any type, any size, each	-	Χ
E2214	Manual wheelchair accessory, pneumatic caster tire, any size, each	-	Χ
E2215	Manual wheelchair accessory, tube for pneumatic caster tire, any size, each	-	Χ
E2216	Manual wheelchair accessory, foam filled propulsion tire, any size, each	-	Χ
E2217	Manual wheelchair accessory, foam filled caster tire, any size, each	-	Χ
E2218	Manual wheelchair accessory, foam propulsion tire, any size, each	-	Χ
	Manual wheelchair accessory, foam caster tire, any size, each	-	Χ
E2220	Manual wheelchair accessory, solid (rubber/plastic) propulsion tire, any size, each	-	Χ
E2221	Manual wheelchair accessory, solid (rubber/plastic) caster tire (removable), any size, each	-	Χ
E2222	Manual wheelchair accessory, solid (rubber/plastic) caster tire with integrated wheel, any size, each	-	Χ
	Manual wheelchair accessory, propulsion wheel excludes tire, any size, each	-	X
E2225	Manual wheelchair accessory, caster wheel excludes tire, any size, replacement only, each	-	Χ
E2226	Manual wheelchair accessory, caster fork, any size, replacement only, each	-	Χ
	Manual wheelchair accessory, gear reduction drive wheel, each	-	Χ
E2228	Manual wheelchair accessory, wheel braking system and lock, complete, each	-	X
E2230	Manual wheelchair accessory, manual standing system	-	Χ
E2231	Manual wheelchair accessory, solid seat support base (replaces sling seat), 'includes any type mounting hardware	-	Χ
E2291	Planar back for ped size wc	-	Χ
	Planar seat for ped size wc	-	Х
	Contour back for ped size wc	-	Х
E2294	Contour seat for ped size wc	-	Χ

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E2295	Manual wheelchair accessory, for pediatric size wheelchair, dynamic seating 'frame, allows coordinated movement of multi	-	Х
E2298	Complex rehabilitative power wheelchair accessory, power seat elevation system, any type	-	Х
E2300	Power wheelchair accessory, power seat elevation system	Х	-
E2301	Power wheelchair accessory, power standing system	Х	-
E2310	Power wheelchair accessory, electronic connection between wheelchair controller	Х	-
E2313	Power wheelchair accessory, harness for upgrade to expandable controller, including all fasteners, connectors and mounti	-	Х
E2321	Power wheelchair accessory, hand control interface, remote joystick,	-	Х
	Power wheelchair accessory, hand control interface, multiple mechanical switches	- 1	Х
	Power wheelchair accessory, specialty joystick handle for hand control	-	Х
	Power wheelchair accessory, chin cup for chin control interface	- 1	Х
E2325	Power wheelchair accessory, sip and puff interface, nonproportional	-	Х
E2326	Power wheelchair accessory, breath tube kit for sip and puff interface	-	Х
E2327	Power wheelchair accessory, head control interface, mechanical, proportional	-	Х
E2328	Power wheelchair accessory, head control or extremity control interface, electronic, proportional	-	Х
	Power wheelchair accessory, head control interface, contact switch mechanism, nonproportional	-	Х
E2330	Power wheelchair accessory, head control interface, proximity switch mechanism, nonproportional	-	Х
E2331	Power wheelchair accessory, attendant control, proportional, including all electronics and hardware	-	Х
E2340	Power wheelchair accessory, nonstandard seat frame width, 20-23 inches	-	Х
E2341	Power wheelchair accessory, nonstandard seat frame width, 24-27 inches	-	Х
E2342	Power wheelchair accessory, nonstandard seat frame depth, 20 or 21 inches	-	Х
E2343	Power wheelchair accessory, nonstandard seat frame depth, 22-25 inches	-	Х
E2351	Power wheelchair accessory, electronic interface to operate speech generating device	Х	-
E2358	Power wheelchair accessory, group 34 non-sealed lead acid battery, each	-	Х
E2359	Power wheelchair accessory, group 34 sealed lead acid battery, each (e.g., gel cell, absorbed glass mat)	-	Х
E2360	Power wheelchair accessory, 22 nf non-sealed lead acid battery, each	-	Х
E2361	Power wheelchair accessory, 22nf sealed lead acid battery, each	-	Х
E2362	Power wheelchair accessory, group 24 non-sealed lead acid battery, each	-	Х
E2363	Power wheelchair accessory, group 24 sealed lead acid battery, each	-	Х
E2364	Power wheelchair accessory, u-1 non-sealed lead acid battery, each	-	Χ
E2365	Power wheelchair accessory, u-1 sealed lead acid battery, each	-	Х

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	Power wheelchair accessory, battery charger, single mode, for use with only one battery type	-	Χ
	Power wheelchair accessory, battery charger, dual mode, for use with either battery type	-	Χ
	Power wc motor replacement	-	X
	Pwr wc gear box replacement	-	X
	Pwr wc motor/gear box combo	-	X
	Power wheelchair accessory, group 27 sealed lead acid battery, (e.g. gel cell, absorbed glassmat), each	-	X
E2372	Power wheelchair accessory, group 27 non-sealed lead acid battery, each	-	Χ
E2373	Power wheelchair accessory, hand or chin control interface, mini-proportional, compact, or short throw remote joystick o	-	Χ
E2374	Power wheelchair accessory, hand or chin control interface, standard remote joystick (not including controller), proport	-	Х
E2375	Power wheelchair accessory, non-expandable controller, including all related electronics and mounting hardware, replacem	-	Х
E2376	Power wheelchair accessory, expandable controller, including all related electronics and mounting hardware, replacement	-	Х
E2377	Power wheelchair accessory, expandable controller, including all related electronics and mounting hardware, upgrade prov	-	Х
E2381	Power wheelchair accessory, pneumatic drive wheel tire, any size, replacement only, each	-	Х
= 2382	Power wheelchair accessory, tube for pneumatic drive wheel tire, any size, replacement only, each	-	Х
2383	Power wheelchair accessory, insert for pneumatic drive wheel tire (removable), any type, any size, replacement only, eac	-	Х
2384	Power wheelchair accessory, pneumatic caster tire, any size, replacement only, each	-	Х
	Power wheelchair accessory, tube for pneumatic caster tire, any size, replacement only, each	-	X
	Power wheelchair accessory, foam filled drive wheel tire, any size, replacement only, each	-	Х
	Power wheelchair accessory, foam filled caster tire, any size, replacement only, each	-	Χ
2388	Power wheelchair accessory, foam drive wheel tire, any size, replacement only, each	-	X
= 2389	Power wheelchair accessory, foam caster tire, any size, replacement only, each	-	Х
2390	Power wheelchair accessory, solid (rubber/plastic) drive wheel tire, any size, replacement only, each	-	Х
E2391	Power wheelchair accessory, solid (rubber/plastic) caster tire (removable), any size, replacement only, each	-	Х
E2392	Power wheelchair accessory, solid (rubber/plastic) caster tire with integrated wheel, any size, replacement only, each	-	Х

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	se note that coverage may vary by plan type and may not follow the listed services. These codes are updated quarterly. Additionally, these coding lists do not re or specialty medications and should be directed to the Pharmacy link option within the website.	eflect information re	egarding immunizations,
E2394 Pow	wer wheelchair accessory, drive wheel excludes tire, any size, replacement only, each	-	Χ
	wer wheelchair accessory, caster wheel excludes tire, any size, replacement only, each	-	Χ
E2396 Pow	wer wheelchair accessory, caster fork, any size, replacement only, each	-	Χ
E2402 Neg	gative pressure wound therapy electrical pump, stationary or portable	-	Χ
E2500 Spe	eech generating device, digitized speech, using pre-recorded messages, 8 min. or less	Х	-
E2502 Spe	eech generating device, digitized speech, using pre-recorded messages, 8-20 min.	X	-
E2504 Spe	eech generating device, digitized speech, using pre-recorded messages, 20-40 min.	Х	-
E2506 Spe	eech generating device, digitized speech, using pre-recorded messages, over 40 min.	Х	-
E2508 Spe	eech generating device, synthesized speech, requiring message formulation by spelling	Х	-
E2511 Spe	eech generating software program, for personal computer or personal digital assistant	X	-
E2512 Acc	cessory for speech generating device, mounting system	X	-
E2601 Gen	n w/c cushion wdth < 22 in	-	Χ
E2602 Gen	n w/c cushion wdth >=22 in	-	Χ
E2603 Skir	n protect wc cus wd <22in	-	X
E2604 Skir	n protect wc cus wd>=22in	-	Χ
E2605 Pos	sition wc cush wdth <22 in	-	Χ
E2606 Pos	sition wc cush wdth>=22 in	-	Χ
E2607 Skir	n pro/pos wc cus wd <22in	-	Χ
E2608 Skir	n pro/pos wc cus wd>=22in	-	Χ
E2609 Cus	stom fabricate w/c cushion	-	X
E2610 Pow	wered w/c cushion	-	X
E2611 Gen	n use back cush wdth <22in	-	Χ
E2612 Gen	n use back cush wdth>=22in	-	X
E2613 Pos	sition back cush wd <22in	-	X
E2614 Pos	sition back cush wd>=22in	-	X
E2615 Pos	s back post/lat wdth <22in	-	Χ
E2616 Pos	s back post/lat wdth>=22in	-	Х
E2617 Cus	stom fab w/c back cushion	-	Х
E2619 Rep	place cover w/c seat cush	-	Χ
E2620 Wc	planar back cush wd <22in	-	Х
E2621 Wc	planar back cush wd>=22in	-	Χ
E2622 Adj	skin pro w/c cus wd<22in	-	Х

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E2623	Adj skin pro wc cus wd>=22in	-	Х
E2624	Adj skin pro/pos cus<22in	-	Χ
E2625	Adj skin pro/pos wc cus>=22	-	Χ
E2626	Wheelchair accessory, shoulder elbow, mobile arm support attached to wheelchair, balanced, adjustable	-	Χ
E2627	Wheelchair accessory, shoulder elbow, mobile arm support attached to wheelchair, balanced, adjustable rancho type	-	Х
E2628	Wheelchair accessory, shoulder elbow, mobile arm support attached to wheelchair, balanced, reclining	-	Χ
E2629	Wheelchair accessory, shoulder elbow, mobile arm support attached to wheelchair, balanced, friction arm support (friction dampening to proximal and distal joints)	-	Х
E2630	Wheelchair accessory, shoulder elbow, mobile arm support, monosuspension arm and hand support, overhead elbow forearm hand sling support, yoke type suspension support	-	Х
E2631	Wheelchair accessory, addition to mobile arm support, elevating proximal arm	-	Χ
E2632	Wheelchair accessory, addition to mobile arm support, offset or lateral rocker arm with elastic balance control	-	Х
E2633	Wheelchair accessory, addition to mobile arm support, supinator	-	X
E3000	Speech volume modulation system, any type, including all components and accessories	Х	-
G0023	Principal illness navigation services by certified or trained auxiliary personnel under the direction of a physician or other practitioner, including a patient navigator, 60 minutes per calendar month, in the following activities:	Х	-
G0024	Principal illness navigation services, additional 30 minutes per calendar month (list separately in addition to G0023)	Х	-
G0027	Semen analysis	Х	-
G0028	Doc med rsn no scr tob	Х	-
G0029	No tob scr/cess int	Χ	-
G0030	Pt scr tob & cess int	Х	-
G0031	Pall serv during meas	Х	-
G0032	2+ antipsy schiz	Х	-
G0033	2+ benzo seiz	Х	-
G0034	Pall serv during meas	Х	-
G0035	Pt ed pos 23	Х	-
G0036	Pt/ptn decln assess	Х	-
G0037	Pt not able to participate	Х	-

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G0038	Clin pt no ref	X	-	
30039	Pt no ref, rn spec	X	-	
30040	Pt phys/occ therapy	X	-	
0041	Pt/ptn decln referral	X	-	
0042	Ref to therapy	X	-	
30043	Pt mech pros ht valv	X	-	
90044	Pt mitral stenosis	X	-	
30045	Mrs 90 days post stk	X	-	
30046	No mrs 90 days post stk	X	-	
30047	Ped blunt hd traum	X	-	
30048	Pall serv during meas	X	-	
60049	Main hemo in-cntr	X	-	
30050	Pt w/ Imted life expec	X	-	
30051	Pt hospice mnth	X	-	
30052	Pt peri dialysis dur mo	X	-	
0053	Adv rheum pt care mvp	X	-	
30054	Strk cr prev pos outcme mvp	X	-	
0055	Adv care heart dx mvp	X	-	
0057	Best pct pt safety em mvp	X	-	
30058	Imprv care le jnt repr mvp	X	-	
0059	Pt sfty pos exp w aneth mvp	X	-	
0060	Allergy/immunology ss	X	-	
0061	Anesthesiology ss	X	-	
0062	Audiology ss	X	-	
30063	Cardiology ss	X	-	
0064	Cert nurse midwife ss	X	-	
30065	Chiropractic ss	X	-	
	Clinical social work ss	X	-	
60067	Dentistry ss	Х	-	
30068	Adm of infusion drug in home	-	Х	
60069	Professional services for the administration of subcutaneous immunotherapy for each infusion drug administration calendar day in the individual's home, each 15 minutes	-	Х	

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G0070	Professional services for the administration of chemotherapy for each infusion drug administration calendar day in	_	Х
	the individual's home, each 15 minutes		
	Comm svcs by rhc/fqhc 5 min	Х	-
	Care manag h vst new pt 20 m	Х	-
	Care manag h vst new pt 30 m	Х	-
	Care manag h vst new pt 45 m	Х	-
	Care manag h vst new pt 60 m	X	-
	Care manag h vst new pt 75 m	Х	-
	Care man h v ext pt 20 mi	X	-
G0082	Care man h v ext pt 30 m	X	-
G0083	Care man h v ext pt 45 m	X	-
G0084	Care man h v ext pt 60 m	X	-
G0085	Care man h v ext pt 75 m	Х	-
G0086	Care man home care plan 30 m	Х	-
G0087	Care man home care plan 60 m	Х	-
G0088	Adm iv drug 1st home visit	-	X
G0089	Adm subq drug 1st home visit	-	Χ
G0128	Corf skilled nursing service	Х	-
G0130	Single energy x-ray study	Х	-
G0136	Administration of a standardized, evidence-based social determinants of health risk assessment tool, 5 to 15 minutes	х	-
G0137	Intensive outpatient services, weekly bundle, minimum of 9 services over a 7 contiguous day period, which can include:	-	Х
G0140	Principal illness navigation-peer support by certified or trained auxiliary personnel under the direction of a physician or other practitioner, including a certified peer specialist, 60 minutes per calendar month, in the following activities:	Х	-
G0146	Principal illness navigation-peer support, additional 30 minutes per calendar month (list separately in addition to G0140)	Х	-
G0156	Services of home health/hospice aide in home health or hospice settings, each 15 minutes	-	Х
G0157	Hhc pt assistant ea 15	Х	-
G0158	Hhc ot assistant ea 15	Х	-
G0175	Opps service, sched team conf	Х	-

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G0176	Opps/php;activity therapy	Х	-
G0177	Opps/php; train & educ serv	Х	-
	Md recertification hha patient	Χ	-
	Md certification hha patient	Χ	-
30219	Pet img wholebody melanoma nonco	Χ	-
0255	Current perception threshold/sensory nerve conduction test, (snct) per limb, any nerve	Х	-
30269	Placement of occlusive device into either a venous or arterial access site, post surgical or interventional procedure (e.	Х	-
0276	Pild/placebo control clin tr	Х	-
0282	Electrical stimulation, (unattended), to one or more areas, for wound careother than described in g0281	Х	-
	Noncovered surgical procedure(s) using conscious sedation, regional, general orspinal anesthesia in a medicare qualifyin	Х	-
90294	Noncovered procedure(s) using either no anesthesia or local anesthesia only, ina medicare qualifying clinical trial, per	Х	-
30295	Electromagnetic stimulation, to one or more areas	Х	-
0299			
	Direct skilled nursing services of a registered nurse (rn) in the home health or hospice setting, each 15 minutes	-	X
30300	Direct skilled nursing services of a license practical nurse (lpn) in the home health or hospice setting, each 15 minutes	-	Х
30302	Pre-operative pulmonary surgery services for preparation for lvrs, complete	Х	-
0303	Pre-operative pulmonary surgery services for preparation for lvrs, 10 to 15	Х	-
0304	Pre-operative pulmonary surgery services for preparation for lvrs, 1 to 9 days	Х	-
0305	Post-discharge pulmonary surgery services after lvrs, minimum of 6 days	Х	-
30308	180 d implant glucose sensor	Х	-
30309	Rem/inser glu sensor dif sit	Х	-
90310	Immunization counseling by a physician or other qualified health care professional when the vaccine(s) is not administered on the same date of service, 5 to 15 mins time (this code is used for medicaid billing purposes)	Х	-
G0311	Immunization counseling by a physician or other qualified health care professional when the vaccine(s) is not administered on the same date of service, 16-30 mins time (this code is used for medicaid billing purposes)	Х	-

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G0312	Immunization counseling by a physician or other qualify ed health care professional when the vaccine(s) is not administered on the same date of service for ages under 21, 5 to 15 mins time (this code is used for medicaid billing purposes)	Х	-
G0313	Immunization counseling by a physician or other qualified health care professional when the vaccine(s) is not administered on the same date of service for ages under 21, 16-30 mins time (this code is used for medicaid billing purposes)	Х	-
G0314	Immunization counseling by a physician or other qualified health care professional for covid-19, ages under 21, 16-30 mins time (this code is used for the medicaid early and periodic screening, diagnostic, and treatment benefit (epsdt)	Х	-
G0315	Immunization counseling by a physician or other qualified health care professional for covid-19, ages under 21, 5-15 mins time (this code is used for the medicaid early and periodic screening, diagnostic, and treatment benefit (epsdt)	х	-
G0321	Home health services furnished using synchronous telemedicine rendered via telephone or other real-time interactive audio-only telecommunications system	Х	-
G0327	Colon ca scrn;bld-bsd biomrk	Х	-
G0329	Therapy plan of care	Х	-
G0330	Facility services for dental rehabilitation procedure(s) performed on a patient who requires monitored anesthesia (e.g., general, intravenous sedation (monitored anesthesia care) and use of an operating room	-	Χ
G0337	Hospice evaluation and counseling services, pre-election	-	Х
G0339	Image guided robotic linear accelerator base sterotactic radiosurgery, complete course therapy in one session, or first	-	Х
G0340	Image guided robotic linear accelerator based stereotactic radiosurgery, delivery including collimator changes and custo	-	Х
G0341	Percutaneous islet cell transplant, includes portal vein catherization and infusion	Х	-
G0342	Laparascopy for iselt cell transplant, includes portal vein catherization and infusion	Χ	-
G0343	Laparaotomy for iselt cell transplant, includes vein catherization and infusion	Х	-
G0398	Home sleep study test (HST) with type II portable monitor, unattended; minimum of 7 channels: EEG, EOG, EMG, ECG/heart rate, airflow, respiratory effort and oxygen saturation	Х	-
G0399	Home sleep test (HST) with type III portable monitor, unattended; minimum of 4 channels: 2 respiratory movement/airflow, 1 ECG/heart rate and 1 oxygen saturation	Х	-
G0400	Home sleep test (HST) with type IV portable monitor, unattended; minimum of 3 channels	Х	-

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G0402	Initial preventive physical examination; face-to-face visit, services limited to new beneficiary during the first 12 mon	Х	-
G0409	Social work and psychological services, directly relating to and/or furthering the patient's rehabilitation goals, each	-	Х
G0410	Group psychotherapy other than of a multiple-family group, in a partial hospitalization setting, approximately 45 to 50	Х	-
G0411	Interactive group psychotherapy, in a partial hospitalization setting, approximately 45 to 50 minutes	Х	-
	Collagen meniscus implant procedure for filling meniscal defects (e.g., cmi, collagen scaffold, menaflex)	Х	-
G0438	Ppps, initial visit	Х	-
G0439	Ppps, subseq visit	Х	-
G0451	Development testing, with interpretation and report, per standardized instrument form	Х	-
G0454	Physician documentation of face-to-face visit for durable medical equipment determination performed by nurse practitioner, physician assistant or clinical nurse specialist	Х	-
G0459	Inpatient telehealth pharmacologic management, including prescription, use, and review of medication with no more than minimal medical psychotherapy	Х	-
G0460	Autolog prp not diab ulcer	Х	-
G0465	Autolog prp diab wound ulcer	Х	-
G0468	Fqhc visit, ippe or awv	Х	-
G0490	Home visit rn, lpn by rhc/fq	Х	-
G0493	Rn care ea 15 min hh/hospice	-	X
G0494	Lpn care ea 15min hh/hospice	-	Χ
G0495	Rn care train/edu in hh	-	Χ
G0496	Lpn care train/edu in hh	-	Χ
G0513	Prolong prev svcs, first 30m	Х	-
G0514	Prolong prev svcs, addl 30m	X	-
G0516	Insert drug del implant, >4	X	-
G0517	Remove drug implant	X	-
	Remove w insert drug implant	Х	-
	Improvement in visual function achieved within 90 days following cataract surgery	Х	-
	patient care survey was not completed by patient	Х	-
	Improvement in visual function not achieved within 90 days following cataract surgery	Х	-
G0916	Satisfaction with care achieved within 90 days following cataract surgery	X	-

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G0917 Patient satisfaction survey was not completed by patient	X	-	
G0918 Satisfaction with care not achieved within 90 days following cataract surgery	X	-	
G1001 Cdsm evicore	X	-	
G1002 Cdsm medcurrent	X	-	
G1003 Cdsm medicalis	X	-	
G1004 Cdsm ndsc	X	-	
G1007 Cdsm aim	X	-	
G1008 Cdsm cranberry pk	X	-	
G1010 Cdsm stanson	X	-	
G1011 Cdsm qualified nos	X	-	
G1012 Cdsm agilemd	X	-	
G1013 Cdsm evidencecare	X	-	
G1014 Cdsm inveniqa	X	-	
G1015 Cdsm reliant	X	-	
G1016 Cdsm speed of care	X	-	
G1017 Cdsm healthhelp	X	-	
G1018 Cdsm infinx	X	-	
G1019 Cdsm logicnets	X	-	
G1020 Cdsm curbside	X	-	
G1021 Cdsm ehealthline	X	-	
G1022 Cdsm intermountain	X	-	
G1023 Cdsm persivia	X	-	
G1024 Cdsm radrite	X	-	
G1025 Pt mnth 1 mcp prov	X	-	
G1026 Pt hemo > 3mo	X	-	
G1027 Pt hemo < 3mo	X	-	
G1028 Take home supply 8mg per 0.1	X	-	
G2001 Post d/c h vst new pt 20 m	X	-	
G2002 Post-d/c h vst new pt 30 m	X	-	
G2003 Post-d/c h vst new pt 45 m	X	-	
G2004 Post-d/c h vst new pt 60 m	X	-	
G2005 Post-d/c h vst new pt 75 m	X	-	

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32006	Post-d/c h vst ext pt 20 m	Х	-
32007	Post-d/c h vst ext pt 30 m	Х	-
2008	Post-d/c h vst ext pt 45 m	Х	-
2009	Post-d/c h vst ext pt 60 m	Х	-
2013	Post-d/c h vst ext pt 75 m	Х	-
2014	Post-d/c care plan overs 30m	Х	-
32015	Post-d/c care plan overs 60m	Х	-
32020	Services for high intensity clinical services associated with the initial engagement and outreach of beneficiaries assigned to the sip component of the pcf model (do not bill with chronic care management codes)	Х	-
2021	Hea care pract tx in place	X	
	Benef refuses service, mod	X	<u> </u>
	Dis site tele svcs rhc/fghc	X	_
	Pt 66+ snp or Itc pos > 90d	X	
	Visit esketamine 56m or less	X	
	Visit esketamine, > 56m	X	
	Pt 66+ frailty and med dem	X	_
	Pt 66+ frailty and adv ill	X	-
	Ace arb arni	X	-
	Med doc rsn no ace arn arni	X	-
	Pt rsn no ace arn arni	Х	-
2095	Sys rsn no ace arn arni	Х	-
	No rsn ace arb arni	Х	-
2097	Child dx uri 3d of other dx	Х	-
2098	Pt 66+ frailty and med dem	X	-
	Pt 66+ frailty and adv ill	Х	-
	Pt 66+ frailty and med dem	Х	-
	Pt 66+ frailty and adv ill	Х	-
	Pt 66+ lt ints > 90	Х	-
2106	Pt 66+ lt ints > 90	Х	-
2107	Pt 66+ frailty and adv ill	X	-
2112	Pred<=5 mg ra glu <6m	Х	-

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	ould be directed to the Pharmacy link option within the website.		_
G2113 Pred>5 mg >6m, no chg o		X	-
G2115 Pt 66+ frailty and med de	n	X	-
G2116 Pt 66+ frailty and adv ill		X	-
G2118 Pt 81+ frailty		X	-
G2121 Psy dep anx ap and icd a		X	-
G2122 Psy/dep/anx/apandicd no	asse	X	-
G2125 Pt 81+ frailty		X	-
G2126 Pt 66+ frailty adv ill		X	-
G2127 Pt 66+ frailty med dem		X	-
G2128 No aspirin med rsn		X	-
G2129 No bp outpt		X	-
Bk pain vas 6-20wk = 3		X	-
G2137 Bk pain vas 6-20wk > 3		X	-
G2138 Bk pain vas 9-15mo = 3		X	-
32139 Bk pain vas 9-20mo > 3		X	-
G2140 Leg pain vas 6-20wk = 3		X	-
G2141 Leg pain vas 6-20wk > 3		X	-
G2142 Fs odi 9-15mo postop<= 2	22	X	-
G2143 Fs odi 9-15mo > 22		X	-
G2144 Fs odi 6-20wk postop > 2	2	X	-
G2145 Fsodi 6-20wk >22 or chg	30pt	X	-
G2146 Leg pain vas 9-15mo <= 3	3	X	-
G2147 Leg pain vas 9-15mo > 3		X	-
G2148 Mpm used		X	-
G2149 No mpm med rsn		X	-
G2150 No mpm		X	-
G2151 Dx degen neuro		X	-
G2152 Res change sc =0		X	-
G2167 Res change sc < 0		X	-
G2168 Svs by pt in home health		X	-
G2169 Svs by ot in home health		X	-

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G2172 All inclusive payment for services related to highly coordinated and integrated opioid use disorder (oud) treatmen	nt X				
services furnished for the demonstration project					
G2173 Uri w comorb 12m oth dx	X	-			
G2174 Uri new rx antibiotic 30d	X	-			
G2175 Pt comorb dx 12m of epi	X	-			
G2176 Outpt ed obs w inpt admit	X	-			
G2177 Bronch w rx antibx 30d	X	-			
G2178 Pt not elig low neuro ex	X	-			
G2179 Med doc rsn no low ex	X	-			
G2180 Inelig footwr eval	X	-			
Bmi not doc medrsn ptref	Х	-			
G2182 Pt 1st biolog antirheum	Х	-			
G2183 Doc pt unable comm	Х	-			
G2184 No caregiver	Х	-			
G2185 Caregiver dem trained	Х	-			
G2186 Pt ref app rsrcs	Х	-			
G2187 Clin ind img hd trauma	Х	-			
G2188 Pt 50 yrs w/clin ind hd	Х	-			
G2189 Img hd abnml neuro exam	Х	-			
G2190 Ind img hd rad neck	Х	-			
G2191 Ind img hd pos hd ache	Х	-			
G2192 >55 yrs temp hd ache	Х	-			
G2193 <6yr new onset hd ache	Х	-			
G2194 New hdache ped pt dis	Х	-			
G2195 Occip hdache child	Х	-			
G2196 Screen unhithy etoh use	Х	-			
G2197 Screen hithy etoh use	Х	-			
G2198 Med rsn no unhlthy etoh	Х	-			
G2199 Not scrn etoh no rsn	Х	-			
G2200 Unhlthy etoh rcvd couns	Х	-			
G2201 Med rsn no brief couns	Х	-			
G2202 No rsn no brief couns	Х	-			

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^{**}Plan coverage limited to ACA 10 essential health benefits.

	Small Em	ployer and Individual				
Codes Description	Not Covered	Preauthorization Required				
Disclaimer: Please note that coverage may vary by plan type and may not follow the listed services. These codes are updated quarterly. Additionally, these coding lists do not reflect information regarding immunizations, njectable drugs, or specialty medications and should be directed to the Pharmacy link option within the website.						
G2203 Med rsn no etoh couns	X	-				
G2204 Pt 50-85 w/ scope	X	-				
G2205 Preg drng adjv trtmt	X	-				
G2206 Adjv trtmt chemo her2	X	-				
G2207 Rsn no trtmt chem her2	X	-				
G2208 No trtmt chemo and her2	X	-				
G2209 Refused to participate	X	-				
G2210 No neck fs prom no rsn	X	-				
G2215 Home supply nasal naloxone	X	-				
G2216 Home supply inject naloxon	X	-				
G4000 Dermatology ss	X	-				
G4001 Diagnostic rad ss	X	-				
G4002 Ep cardio ss	X	-				
G4003 Emergency med ss	X	-				
G4004 Endocrinology ss	X	-				
G4005 Family medicine ss	X	-				
G4006 Gastroenterology ss	X	-				
G4007 General surgery ss	X	-				
G4008 Geriatrics ss	X	-				
G4009 Hospitalists ss	X	-				
G4010 Infectious disease ss	X	-				
G4011 Internal medicine ss	X	-				
G4012 Interventional rad ss	X	-				
G4013 Mentl/behav health ss	X	-				
G4014 Nephrology ss	X	-				
G4015 Neurology ss	X	-				
G4016 Neurosurgical ss	X	-				
G4017 Nutrition/dietician ss	X	-				
G4018 Ob/gyn ss	X	-				
G4019 Oncology/hema ss	X	-				
G4020 Ophthalmology ss	Х	-				
G4021 Orthopedic surgery ss	X	-				

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		Small Employer and Individua	loyer and Individual
Codes	Description	Not Covered	Preauthorization Required
	Please note that coverage may vary by plan type and may not follow the listed services. These codes are updated quarterly. Additionally, these coding lists do not rugs, or specialty medications and should be directed to the Pharmacy link option within the website.	reflect information re	garding immunizations,
G4022	Otolaryngology ss	Х	-
G4023	Pathology ss	X	-
G4024	Pediatric ss	Х	-
G4025	Physical medicine ss	Х	-
G4026	Phys/occ therapy ss	X	-
G4027	Plastic surgery ss	Х	-
G4028	Podiatry ss	Х	-
G4029	Preventive medicine ss	Х	-
G4030	Pulmonology ss	Х	-
G4031	Radiation oncology ss	Х	-
34032	Rheumatology ss	Х	-
4033	Skilled nursing facility ss	Х	-
34034	Speech language path ss	Х	-
34035	Thoracic surgery ss	X	-
34036	Urgent care ss	X	-
34037	Urology ss	Х	-
34038	Vascular surgery ss	X	-
38395	Left ventricular ejection fraction (lvef) >= 40% or documentation as normal or mildly depressed left ventricular systoli	Х	-
8396	Left ventricular ejection fraction (Ivef) not performed or documented	Х	-
	Dilated macular or fundus exam performed, including documentation of the presence or absence of macular edema and level	х	-
S8399	Patient with central dual-energy x-ray absorptiometry (dxa) results documented or ordered or pharmacologic therapy (othe	Х	-
98400	Patient with central dual-energy x-ray absorptiometry (dxa) results not documented or not ordered or pharmacologic thera	Х	-
8404	Lower extremity neurological exam performed and documented	X	-
	Lower extremity neurological exam not performed	Х	-
8410	Footwear evaluation performed and documented	X	-
	Footwear evaluation was not performed	Х	-
8416	Clinician documented that patient was not an eligible candidate for footwear evaluation measure	X	-
38417	Bmi >= 30 was calculated and a follow-up plan was documented in the medical record	Х	-

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		Small Employer and Indiv	oloyer and Individual
Codes	Description	Not Covered	Preauthorization Required
	ease note that coverage may vary by plan type and may not follow the listed services. These codes are updated quarterly. Additionally, these coding lists do not ref gs, or specialty medications and should be directed to the Pharmacy link option within the website.	flect information re	
38418 B	3mi < 22 was calculated and a follow-up plan was documented in the medical record	Х	-
G8419 B	3mi >= 30 or < 22 was calculated, but no follow-up plan was documented in the medical record	Х	-
38420 B	3mi < 30 and >= 22 was calculated and documented	Х	-
38421 B	Bmi not calculated	Χ	-
38427 C	Ooc cur meds by prov	Х	-
38428 C	Cur meds not document	Χ	-
38430 D	Occumentation that patient is not eligible for medication assessment	Х	-
	Positive screen for clinical depression using an age appropriate standardized tool and a follow-up plan ocumented	Х	-
98432 N	lo documentation of clinical depression screening using an age appropriate standardized tool	Х	-
	Screening for clinical depression using an age appropriate standardized tool not documented, patient not ligible/appropriate	Х	-
	Beta-blocker therapy prescribed for patients with left ventricular ejection fraction (lvef) <40% or documentation as mod	Х	-
	Clinician documented patient with left ventricular ejection fraction (lvef) <40% or documentation as moderately or ever	Х	-
38452 B	Beta-blocker therapy not prescribed for patients with left ventricular ejection fraction (lvef) <40% or documentation is	Х	-
38465 H	ligh risk of recurrence of prostate cancer	Х	-
98473 A	Angiotensin converting enzyme (ace) inhibitor or angiotensin receptor blocker (arb) therapy prescribed	Х	-
	Ingiotensin converting enzyme (ace) inhibitor or angiotensin receptor blocker (arb) therapy not prescribed for easons d	Х	-
	ingiotensin converting enzyme (ace) inhibitor or angiotensin receptor blocker (arb) therapy not prescribed, eason not s	Х	-
	Most recent blood pressure has a systolic measurement of <130 mm/hg and a diastolic measurement of <80 mm/hg	Х	-
	Most recent blood pressure has a systolic measurement of >=130 mm/hg and/or a diastolic measurement of =80 mm/hg	Х	-
68478 B	Blood pressure measurement not performed or documented, reason not specified	Х	-
8482 Ir	nfluenza immunization administered or previously received	Х	-
8483 Ir	nfluenza immunization was not ordered or administered for reasons documented by clinician	Х	-
38484 Ir	nfluenza immunization was not ordered or administered, reason not specified	Х	-

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		Small Employer and Individu	
Codes	Description	Not Covered	Preauthorization Required
	Please note that coverage may vary by plan type and may not follow the listed services. These codes are updated quarterly. Additionally, these coding lists do not re rugs, or specialty medications and should be directed to the Pharmacy link option within the website.	flect information re	garding immunizations,
G8510	Negative screen for clinical depression using an age appropriate standardized tool, follow-up not required	Х	-
G8511	Positive screen for clinical depression using an age appropriate standardized tool documented, follow up plan not documented, reason not specified	Х	-
G8535	No documentation of an elder maltreatment screen, patient not eligible	Х	-
G8536	No documentation of an elder maltreatment screen, reason not specified	Х	-
G8539	Documentation of a current functional outcome assessment using a standardized tool and documentation of a care plan based on identified deficiencies	Х	-
G8540	Documentation that the patient is not eligible for a functional outcome assessment using a standardized tool	Х	-
G8541	No documentation of a current functional outcome assessment using a standardized tool, reason not specified	Х	-
G8542	Documentation of a current functional outcome assessment using a standardized tool; no functional deficiencies identified, care plan not required	Х	-
G8543	Documentation of a current functional outcome assessment using a standardized tool; no documentation of a care plan, reas	Х	-
G8559	Patient referred to a physician (preferably a physician with training in disorders of the ear) for an otologic evaluatio	Х	-
G8560	Patient has a history of active drainage from the ear within the previous 90 days	Х	-
G8561	Patient is not eligible for the referral for otologic evaluation for patients with a history of active drainage measure	Х	-
G8562	Patient does not have a history of active drainage from the ear within the previous 90 days	Х	-
G8563	Patient not referred to a physician (preferably a physician with training in disorders of the ear) for an otologic evalu	Х	-
G8564	Patient was referred to a physician (preferably a physician with training in disorders of the ear) for an otologic evalu	Х	-
G8565	Verification and documentation of sudden or rapidly progressive hearing loss	Х	-
	Patient is not eligible for the "referral for otologic evaluation for sudden or rapidly progressive hearing loss" measur	Х	-
G8567	Patient does not have verification and documentation of sudden or rapidly progressive hearing loss	Х	-
	Patient was not referred to a physician (preferably a physician with training in disorders of the ear) for an otologic e	Х	-
G8569	Prolonged intubation (>24 hrs) required	Х	-
	Prolonged intubation (>24 hrs) not required	Х	-

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		Small Emp	oloyer and Individual			
Codes	Description	Not Covered	Preauthorization Required			
	bisclaimer: Please note that coverage may vary by plan type and may not follow the listed services. These codes are updated quarterly. Additionally, these coding lists do not reflect information regarding immajectable drugs, or specialty medications and should be directed to the Pharmacy link option within the website.					
G8575	Developed postoperative renal failure or required dialysis	Х	-			
G8576	No postoperative renal failure/dialysis not required	Х	-			
G8577	Reexploration required due to mediastinal bleeding with or without tamponade, graft occlusion, valve dysfunction or other cardiac reason	х	-			
G8578	Reexploration not required due to mediastinal bleeding with or without tamponade, graft occlusion, valve dysfunction or other cardiac reason	Х	-			
G8598	Aspirin or another antithrombotic therapy used	Х	-			
G8599	Aspirin or another antithrombotic therapy not used, reason not otherwise specified	Х	-			
G8600	Iv t-pa initiated within three hours (<= 180 minutes) of time last known well	Х	-			
G8601	Iv t-pa not initiated within three hours (<= 180 minutes) of time last known well for reasons documented by clinician	Х	-			
G8602	Iv t-pa not initiated within three hours (<= 180 minutes) of time last known well, reason not specified	Х	-			
G8633	Pharm ther osteo rx	Х	-			
G8635	No pharm ther osteo rx	Х	-			
G8647	Fun stat score knee >= 0	Х	-			
G8648	Fun stat score knee < 0	Х	-			
G8650	Rafs crs ki no scor no surv	Х	-			
G8651	Fun stat score hip >= 0	Х	-			
G8652	Fun stat score hip < 0	Х	-			
G8654	Rafs crs hi no scor no surv	Х	-			
G8655	Fun stat score le >= 0	Х	-			
G8656	Fun stat score le < 0	Х	-			
G8658	Fun stat score le not done	Х	-			
G8659	Fun stat score ls >= 0	Х	-			
G8660	Fun stat score ls < 0	Х	-			
G8661	Fun stat score Is pt no elg	Х	-			
G8662	Rafs crs lbi no scor no surv	Х	-			
G8663	Fun stat score shdl >=0	Х	-			
G8664	Fun stat score shdl < 0	Х	-			
G8666	Rafs crs si no scor no surv	Х	-			
G8667	Fun stat score ue >=0	Х				
G8668	Fun stat score ue < 0	Х	-			

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Required claimer. Please note that coverage may vary by plan type and may not follow the listed services. These codes are updated quarterly. Additionally, these coding lists do not reflect information regarding immunizations, criable drugs, or specially medications and should be directed to the Pharmacy link option within the website. 8708 [Rafis crs ewh no scor no surv			Small Emp	oloyer and Individual
table drugs, or specialty medicalions and should be directed to the Pharmacy link option within the website. 8694 Left ventricular ejection fraction (lvef) < 40% 8708 Patient not prescribed or dispensed antibiotic 8709 Patient prescribed or dispensed antibiotic or documented medical reason(s) 8710 Patient prescribed or dispensed antibiotic 8711 Prescribed or dispensed antibiotic 8712 Antibiotic not prescribed or dispensed antibiotic 8712 Antibiotic not prescribed or dispensed 8712 Antibiotic not prescribed or dispensed 8713 Pcategory (primary tumor), pn category (regional lymph nodes), and histologic grade were documented in pathology report 8722 Medical reason(s) documented for not including pt category, pn category and histologic grade in the pathology 8722 report 8723 Specimen site is other than anatomic location of primary tumor 8724 Pc tactgory, pn category and histologic grade were not documented in the pathology report, reason not otherwise specified 8733 Documentation of a positive elder maltreatment screen and documented follow-up plan 8736 Elder maltreatment screen documented as negative, no follow-up required 8737 Elder maltreatment screen documented as positive, follow-up plan not documented, reason not specified 8749 Elder maltreatment screen documented as positive, follow-up plan not documented, reason not specified 8749 Elder maltreatment screen documented as positive, follow-up plan not documented, reason not specified 8750 Most recent systolic blood pressure < 90 mmhg 8751 Most recent systolic blood pressure >= 90 mmhg 8752 Most recent disatolic blood pressure >= 90 mmhg 8753 Most recent disatolic blood pressure >= 90 mmhg 8754 Most recent disatolic blood pressure >= 90 mmhg 8755 Most recent disatolic blood pressure >= 90 mmhg 8756 No documentation of blood pressure sevening net performed as recommended by screening interval, reason not otherwise specified 8767 Specimen site other than anatomic location of esophagus 8778 Specimen site other than anatomic location of	Codes	Description	Not Covered	Preauthorization Required
Left ventricular ejection fraction (lvef) < 40% X			flect information re	egarding immunizations,
Patient not prescribed or dispensed antibiotic X	G8670	Rafs crs ewh no scor no surv	Х	-
Patient prescribed or dispensed antibiotic for documented medical reason(s) X -8710 Patient prescribed or dispensed antibiotic X -8711 Prescribed or dispensed X -8711 Prescribed or dispensed antibiotic X -8712 Prescribed or dispense X -8712 Prescribed or dispensed	G8694	Left ventricular ejection fraction (lvef) < 40%	Х	-
Patient prescribed or dispensed antibiotic	G8708	Patient not prescribed or dispensed antibiotic	Х	-
Prescribed or dispensed antibiotic X -	G8709	Patient prescribed or dispensed antibiotic for documented medical reason(s)	Х	-
Antibiotic not prescribed or dispensed X - 8721 Pt category (primary tumor), pn category (regional lymph nodes), and histologic grade were documented in pathology report 8722 Medical reason(s) documented for not including pt category, pn category and histologic grade in the pathology report 8723 Specimen site is other than anatomic location of primary tumor 8724 Pt category, pn category and histologic grade were not documented in the pathology report, reason not otherwise specified 8733 Documentation of a positive elder maltreatment screen and documented follow-up plan 8734 Elder maltreatment screen documented as negative, no follow-up required 8735 Elder maltreatment screen documented as positive, follow-up plan not documented, reason not specified 8749 Absence of signs of melanoma (cough, dyspnea, tenderness, localized neurologic signs such as weakness, jaundice or any other sign suggesting systemic spread) or absence of syp 8752 Most recent systolic blood pressure < 140 mmhg X - 8755 Most recent systolic blood pressure < 140 mmhg X - 8756 Most recent diastolic blood pressure < 90 mmhg X - 8757 Most recent diastolic blood pressure >= 90 mmhg X - 8758 Most recent diastolic blood pressure >= 90 mmhg X - 8768 No documentation of blood pressure measurement, reason not otherwise specified X - 8769 Specimen site other than anatomic location of spophagus 8798 Specimen site other than anatomic location of spophagus 8799 Specimen site other than anatomic location of spophagus 8790 Transabdominal or transvaginal ultrasound not performed by clinician X	G8710	Patient prescribed or dispensed antibiotic	Х	-
Pt category (primary tumor), pn category (regional lymph nodes), and histologic grade were documented in pathology report Medical reason(s) documented for not including pt category, pn category and histologic grade in the pathology report X - 28722 Medical reason(s) documented for not including pt category, pn category and histologic grade in the pathology report X - 28723 Specimen site is other than anatomic location of primary tumor X - 28724 Pt category, pn category and histologic grade were not documented in the pathology report, reason not otherwise specified X - 28733 Documentation of a positive elder maltreatment screen and documented follow-up plan X - 28734 Elder maltreatment screen documented as negative, no follow-up required X - 28735 Elder maltreatment screen documented as positive, follow-up plan not documented, reason not specified X - 28736 Mosence of signs of melanoma (cough, dyspnea, tenderness, localized neurologic signs such as weakness, jaundice or any other sign suggesting systemic spread) or absence of syp 8752 Most recent systolic blood pressure > 140 mmhg X - 28753 Most recent diastolic blood pressure > 90 mmhg X - 28754 Most recent diastolic blood pressure > 90 mmhg X - 28755 Most recent diastolic blood pressure > 90 mmhg X - 28756 Most recent diastolic blood pressure > 90 mmhg X - 38756 Most recent diastolic blood pressure as recommended by the defined screening interval X - 38757 Blood pressure screening performed as recommended by screening interval, reason not otherwise specified X - 38758 Specimen site other than anatomic location of esophagus X - 38759 Specimen site other than anatomic location of prostate X - 38806 Performance of transabdominal or transvaginal ultrasound X - 38807 Transabdominal or transvaginal ultrasound not performed for reasons documented by clinician	G8711	Prescribed or dispensed antibiotic	Х	-
pathology report Medical reason(s) documented for not including pt category, pn category and histologic grade in the pathology report report R723 Specimen site is other than anatomic location of primary tumor R724 Pt category, pn category and histologic grade were not documented in the pathology report, reason not otherwise specified R733 Documentation of a positive elder maltreatment screen and documented follow-up plan R734 Elder maltreatment screen documented as negative, no follow-up required R735 Elder maltreatment screen documented as positive, follow-up plan not documented, reason not specified R749 Absence of signs of melanoma (cough, dyspnea, tenderness, localized neurologic signs such as weakness, jaundice or any other sign suggesting systemic spread) or absence of syp R752 Most recent systolic blood pressure >= 140 mmhg R753 Most recent systolic blood pressure >= 140 mmhg R754 Most recent diastolic blood pressure >= 90 mmhg R755 Most recent diastolic blood pressure >= 90 mmhg R756 Most recent diastolic blood pressure >= 90 mmhg R757 No documentation of blood pressure >= 90 mmhg R758 Blood pressure screening performed as recommended by the defined screening interval R758 Blood pressure screening not performed as recommended by screening interval, reason not otherwise specified R757 Specimen site other than anatomic location of esophagus R758 Specimen site other than anatomic location of prostate R759 Specimen site other than anatomic location of prostate R750 Ferformance of transabdominal or transvaginal ultrasound not performed for reasons documented by clinician	G8712	Antibiotic not prescribed or dispensed	Х	-
report 8723 Specimen site is other than anatomic location of primary tumor Pt category, pn category and histologic grade were not documented in the pathology report, reason not otherwise specified 8733 Documentation of a positive elder maltreatment screen and documented follow-up plan 8734 Elder maltreatment screen documented as negative, no follow-up required 8735 Elder maltreatment screen documented as positive, follow-up plan not documented, reason not specified 8749 Absence of signs of melanoma (cough, dyspnea, tenderness, localized neurologic signs such as weakness, jaundice or any other sign suggesting systemic spread) or absence of syp 8752 Most recent systolic blood pressure < 140 mmhg 8753 Most recent systolic blood pressure < 140 mmhg 8754 Most recent diastolic blood pressure < 90 mmhg 8755 Most recent diastolic blood pressure >= 90 mmhg 8756 No documentation of blood pressure measurement, reason not otherwise specified 8786 No documentation of blood pressure measurement, reason not otherwise specified 87878 Blood pressure screening performed as recommended by the defined screening interval 8788 Blood pressure screening not performed as recommended by screening interval, reason not otherwise specified 8798 Specimen site other than anatomic location of esophagus 8798 Specimen site other than anatomic location of prostate 8806 Performance of transabdominal or transvaginal ultrasound 8707 Transabdominal or transvaginal ultrasound not performed for reasons documented by clinician	G8721		Х	-
Pt category, pn category and histologic grade were not documented in the pathology report, reason not otherwise specified 8733 Documentation of a positive elder maltreatment screen and documented follow-up plan 8734 Elder maltreatment screen documented as negative, no follow-up required 8735 Elder maltreatment screen documented as positive, follow-up plan not documented, reason not specified X - 8749 Absence of signs of melanoma (cough, dyspnea, tenderness, localized neurologic signs such as weakness, jaundice or any other sign suggesting systemic spread) or absence of syp 8752 Most recent systolic blood pressure < 140 mmhg X - 8753 Most recent systolic blood pressure >= 140 mmhg X - 8754 Most recent diastolic blood pressure < 90 mmhg X - 8755 Most recent diastolic blood pressure >= 90 mmhg X - 8766 No documentation of blood pressure measurement, reason not otherwise specified X - 8787 Blood pressure screening performed as recommended by the defined screening interval X - 8787 Specimen site other than anatomic location of esophagus 8797 Specimen site other than anatomic location of prostate X - 8806 Performance of transabdominal or transvaginal ultrasound not performed for reasons documented by clinician	G8722		Х	-
Pt category, pn category and histologic grade were not documented in the pathology report, reason not otherwise specified 8733 Documentation of a positive elder maltreatment screen and documented follow-up plan 8734 Elder maltreatment screen documented as negative, no follow-up required 8735 Elder maltreatment screen documented as positive, follow-up plan not documented, reason not specified 8749 Absence of signs of melanoma (cough, dyspnea, tenderness, localized neurologic signs such as weakness, jaundice or any other sign suggesting systemic spread) or absence of syp 8752 Most recent systolic blood pressure < 140 mmhg 8753 Most recent systolic blood pressure >= 140 mmhg 8754 Most recent diastolic blood pressure < 90 mmhg 8755 Most recent diastolic blood pressure >= 90 mmhg 8766 No documentation of blood pressure measurement, reason not otherwise specified 8778 Blood pressure screening performed as recommended by the defined screening interval 8787 Specimen site other than anatomic location of esophagus 8797 Specimen site other than anatomic location of prostate 8798 Specimen site other than anatomic location of prostate 8707 Transabdominal or transvaginal ultrasound not performed for reasons documented by clinician	G8723	· ·	Х	-
Elder maltreatment screen documented as negative, no follow-up required X - 8735 Elder maltreatment screen documented as positive, follow-up plan not documented, reason not specified X - 8749 Absence of signs of melanoma (cough, dyspnea, tenderness, localized neurologic signs such as weakness, jaundice or any other sign suggesting systemic spread) or absence of syp 8752 Most recent systolic blood pressure < 140 mmhg X - 8753 Most recent systolic blood pressure >= 140 mmhg X - 8754 Most recent diastolic blood pressure < 90 mmhg X - 8755 Most recent diastolic blood pressure >= 90 mmhg X - 8756 No documentation of blood pressure measurement, reason not otherwise specified 876 No documentation of blood pressure measurement, reason not otherwise specified 8778 Blood pressure screening performed as recommended by the defined screening interval 8787 Specimen site other than anatomic location of esophagus 8797 Specimen site other than anatomic location of prostate X - 8806 Performance of transabdominal or transvaginal ultrasound X - 8807 Transabdominal or transvaginal ultrasound not performed for reasons documented by clinician		Pt category, pn category and histologic grade were not documented in the pathology report, reason not otherwise	Х	-
Elder maltreatment screen documented as negative, no follow-up required X - 8735 Elder maltreatment screen documented as positive, follow-up plan not documented, reason not specified X - 8749 Absence of signs of melanoma (cough, dyspnea, tenderness, localized neurologic signs such as weakness, jaundice or any other sign suggesting systemic spread) or absence of syp 8752 Most recent systolic blood pressure < 140 mmhg X - 8753 Most recent systolic blood pressure >= 140 mmhg X - 8754 Most recent diastolic blood pressure < 90 mmhg X - 8755 Most recent diastolic blood pressure >= 90 mmhg X - 8756 No documentation of blood pressure measurement, reason not otherwise specified 876 No documentation of blood pressure measurement, reason not otherwise specified 8778 Blood pressure screening performed as recommended by the defined screening interval 8787 Specimen site other than anatomic location of esophagus 8797 Specimen site other than anatomic location of prostate X - 8806 Performance of transabdominal or transvaginal ultrasound X - 8807 Transabdominal or transvaginal ultrasound not performed for reasons documented by clinician	G8733	Documentation of a positive elder maltreatment screen and documented follow-up plan	Х	-
Elder maltreatment screen documented as positive, follow-up plan not documented, reason not specified X - 8749 Absence of signs of melanoma (cough, dyspnea, tenderness, localized neurologic signs such as weakness, jaundice or any other sign suggesting systemic spread) or absence of syp 8752 Most recent systolic blood pressure < 140 mmhg X - 8753 Most recent systolic blood pressure >= 140 mmhg X - 8754 Most recent diastolic blood pressure < 90 mmhg X - 8755 Most recent diastolic blood pressure >= 90 mmhg X - 8756 No documentation of blood pressure measurement, reason not otherwise specified X - 8768 Blood pressure screening performed as recommended by the defined screening interval X - 8768 Blood pressure screening not performed as recommended by screening interval, reason not otherwise specified X - 8779 Specimen site other than anatomic location of esophagus X - 8798 Specimen site other than anatomic location of prostate X - 8806 Performance of transabdominal or transvaginal ultrasound X - 8807 Transabdominal or transvaginal ultrasound not performed for reasons documented by clinician X -			Х	-
Absence of signs of melanoma (cough, dyspnea, tenderness, localized neurologic signs such as weakness, jaundice or any other sign suggesting systemic spread) or absence of syp 8752 Most recent systolic blood pressure < 140 mmhg 8753 Most recent systolic blood pressure >= 140 mmhg 8754 Most recent diastolic blood pressure <= 90 mmhg 8755 Most recent diastolic blood pressure >= 90 mmhg 8756 No documentation of blood pressure measurement, reason not otherwise specified 8767 No documentation of blood pressure measurement, reason not otherwise specified 8768 Blood pressure screening performed as recommended by the defined screening interval 8768 Blood pressure screening not performed as recommended by screening interval, reason not otherwise specified 877 Specimen site other than anatomic location of esophagus 878 Specimen site other than anatomic location of prostate 879 Specimen site other than anatomic location of prostate 870 Performance of transabdominal or transvaginal ultrasound 870 Transabdominal or transvaginal ultrasound not performed for reasons documented by clinician 870 Absence of signs was weakness, 870 Absence of signs and seakness, 871 Absence of signs was weakness, 872 Absence of signs was weakness, 873 Absence of signs was weakness, 874 Absence of syp 875 Absence of syp 875 Absence of syp 876 Absence of syp 877 Absence of syp 878 Absence of syp 878 Absence of syp 878 Absence of syp 878 Absence of syp 879 Absence of syp 879 Absence of syp 870 Absence of syp	G8735	Elder maltreatment screen documented as positive, follow-up plan not documented, reason not specified	Х	-
Most recent systolic blood pressure < 140 mmhg X -		Absence of signs of melanoma (cough, dyspnea, tenderness, localized neurologic signs such as weakness,	Х	-
Most recent systolic blood pressure >= 140 mmhg	G8752		X	-
Most recent diastolic blood pressure < 90 mmhg 8755 Most recent diastolic blood pressure >= 90 mmhg X - 8756 No documentation of blood pressure measurement, reason not otherwise specified 8783 Blood pressure screening performed as recommended by the defined screening interval 8785 Blood pressure screening not performed as recommended by screening interval 8786 Specimen site other than anatomic location of esophagus 8797 Specimen site other than anatomic location of prostate 8798 Specimen site other than anatomic location of prostate 8806 Performance of transabdominal or transvaginal ultrasound X - 8807 Transabdominal or transvaginal ultrasound not performed for reasons documented by clinician X -		· · · · · · · · · · · · · · · · · · ·		_
Most recent diastolic blood pressure >= 90 mmhg		· · · · · · · · · · · · · · · · · · ·		_
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Blood pressure screening performed as recommended by the defined screening interval X - Blood pressure screening not performed as recommended by screening interval, reason not otherwise specified X - Brood pressure screening not performed as recommended by screening interval, reason not otherwise specified X - Brood pressure screening not performed as recommended by screening interval, reason not otherwise specified X - Brood pressure screening not performed as recommended by screening interval, reason not otherwise specified X - Brood pressure screening not performed as recommended by screening interval X - Brood pressure screening not performed as recommended by screening interval X - Brood pressure screening not performed as recommended by screening interval X - Brood pressure screening not performed as recommended by screening interval X - Brood pressure screening not performed as recommended by screening interval X - Brood pressure screening not performed as recommended by screening interval X - Brood pressure screening not performed as recommended by screening interval X - Brood pressure screening not performed as recommended by screening interval X - Brood pressure screening not performed as recommended by screening interval X - Brood pressure screening not performed as recommended by screening interval X - Brood pressure screening not performed as recommended by screening interval X - Brood pressure screening not performed as recommended by screening interval, reason not otherwise specified X - Brood pressure screening not performed as recommended by screening interval, reason not otherwise specified X - Brood pressure screening not performed as recommended by screening interval, reason not otherwise specified X - Brood pressure screening not performed as recommended by screening interval, reason not otherwise specified X - Brood pressure screening not performed as recommended by screening interval, reason not otherwise specified X - Brood pressure screening not		-	X	-
Blood pressure screening not performed as recommended by screening interval, reason not otherwise specified X - Blood pressure screening not performed as recommended by screening interval, reason not otherwise specified X - Specimen site other than anatomic location of esophagus X - Brook Specimen site other than anatomic location of prostate X - Brook Performance of transabdominal or transvaginal ultrasound X - Transabdominal or transvaginal ultrasound not performed for reasons documented by clinician X -		•		-
Blood pressure screening not performed as recommended by screening interval, reason not otherwise specified 8797 Specimen site other than anatomic location of esophagus X - 8798 Specimen site other than anatomic location of prostate X - 8806 Performance of transabdominal or transvaginal ultrasound X - 8807 Transabdominal or transvaginal ultrasound not performed for reasons documented by clinician X -	G8785	, ,		
8797 Specimen site other than anatomic location of esophagus X - 8798 Specimen site other than anatomic location of prostate X - 8806 Performance of transabdominal or transvaginal ultrasound X - 8807 Transabdominal or transvaginal ultrasound not performed for reasons documented by clinician X -		Blood pressure screening not performed as recommended by screening interval, reason not otherwise specified	X	-
8798 Specimen site other than anatomic location of prostate X - 8806 Performance of transabdominal or transvaginal ultrasound X - 8807 Transabdominal or transvaginal ultrasound not performed for reasons documented by clinician X -	G8797	, , ,	Х	-
8806 Performance of transabdominal or transvaginal ultrasound X - 8807 Transabdominal or transvaginal ultrasound not performed for reasons documented by clinician X -		· ·	-	-
8807 Transabdominal or transvaginal ultrasound not performed for reasons documented by clinician X -				-
· ·			Х	-
		· · · · · · · · · · · · · · · · · · ·		-

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		Small Em	oloyer and Individual
Codes	Description	Not Covered	Preauthorization Required
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G8815	Statin therapy not prescribed for documented reasons	Х	-
G8816	Statin medication prescribed at discharge	Х	-
G8817	Statin therapy not prescribed at discharge, reason not specified	Х	-
G8826	Patient discharge to home no later than postoperative day #2 following evar	Х	-
G8833	Patient not discharge to home by postoperative day #2 following evar	Х	-
G8834	Patient discharged to home no later than postoperative day #2 following cea	Х	-
G8838	Patient not discharged to home by postoperative day #2	Х	-
G8839	Sleep apnea symptoms assessed, including presence or absence of snoring and daytime sleepiness	Х	-
G8840	Documentation of reason(s) for not performing an assessment of sleep symptoms (e.g., patient didn't have initial daytime sleepiness, patient visits between initial testing and	Х	-
G8841	Sleep apnea symptoms not assessed, reason not otherwise specified	Х	-
G8842	Apnea hypopnea index (ahi) or respiratory disturbance index (rdi) measured at the time of initial diagnosis	Х	-
G8843	Documentation of reason(s) for not measuring an apnea hypopnea index (ahi) or a respiratory disturbance index (rdi) at the time of initial diagnosis	Х	-
G8844	Apnea hypopnea index (ahi) or respiratory disturbance index (rdi) not measured at the time of initial diagnosis, reason not specified	Х	-
G8845	Positive airway pressure therapy prescribed	Х	-
G8846	Moderate or severe obstructive sleep apnea (apnea hypopnea index (ahi) or respiratory disturbance index (rdi) of 15 or greater)	Х	-
G8849	Documentation of reason(s) for not prescribing positive airway pressure therapy	Х	-
G8850	Positive airway pressure therapy not prescribed, reason not otherwise specified	Х	-
	Objective measurement of adherence to positive airway pressure therapy, documented	Х	-
G8854	Documentation of reason(s) for not objectively measuring adherence to positive airway pressure therapy	Х	-
G8855	Objective measurement of adherence to positive airway pressure therapy not performed, reason not otherwise specified	Х	-
G8856	Referral to a physician for an otologic evaluation performed	Х	-
	Patient is not eligible for the referral for otologic evaluation measure (e.g., patients who are already under the care of a physician for acute or chronic dizziness)	Х	-
G8858	Referral to a physician for an otologic evaluation not performed, reason not specified	Х	-
	Patients not assessed for risk of bone loss, reason not otherwise specified	X	-
	Pneumococcal vaccine administered or previously received	X	-
		^	

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		Small Employ	loyer and Individual
Codes	Description	Not Covered	Preauthorization Required
isclaimer: njectable d	Please note that coverage may vary by plan type and may not follow the listed services. These codes are updated quarterly. Additionally, these coding lists do not rerugs, or specialty medications and should be directed to the Pharmacy link option within the website.	eflect information re	garding immunizations,
G8865	Documentation of medical reason(s) for not administering or previously receiving pneumococcal vaccine (e.g., patient allergic reaction, potential adverse drug reaction)	X	-
38866	Documentation of patient reason(s) for not administering or previously receiving pneumococcal vaccine (e.g., patient refusal)	Х	-
G8867	Pneumococcal vaccine not administered or previously received, reason not otherwise specified	Х	-
G8869	Patient has documented immunity to hepatitis b and is receiving a first course of anti-tnf therapy	Х	-
38875	Clinician diagnosed breast cancer preoperatively by a minimally invasive biopsy method	Х	-
38876	Documentation of reason(s) for not performing minimally invasive biopsy to diagnose breast cancer preoperatively	Х	-
38877	Clinician did not attempt to achieve the diagnosis of breast cancer preoperatively by a minimally invasive biopsy method, reason not otherwise specified	Х	-
38878	Sentinel lymph node biopsy procedure performed	Х	-
38880	Documentation of reason(s) sentinel lymph node biopsy not performed	Х	-
	Stage of breast cancer is greater than t1n0m0 or t2n0m0	Х	-
38882	Sentinel lymph node biopsy procedure not performed	Х	-
38907	Patient documented not to have experienced any of the following events: a burn prior to discharge; a fall within the facility; wrong site/side/patient/procedure/implant event;	Х	-
38908	Patient documented to have received a burn prior to discharge	Х	-
	Patient documented not to have received a burn prior to discharge	Х	-
38910	Patient documented to have experienced a fall within asc	Х	-
	Patient documented not to have experienced a fall within ambulatory surgical center	Х	-
	Patient documented to have experienced a wrong site, wrong side, wrong patient, wrong procedure or wrong implant event	Х	-
38913	Patient documented not to have experienced a wrong site, wrong side, wrong patient, wrong procedure or wrong implant event	Х	-
G8914	Patient documented to have experienced a hospital transfer or hospital admission upon discharge from asc	Х	-
G8915	Patient documented not to have experienced a hospital transfer or hospital admission upon discharge from asc	Х	-
38916	Patient with preoperative order for iv antibiotic surgical site infection (ssi) prophylaxis, antibiotic initiated on time	Х	-
S8917	Patient with preoperative order for iv antibiotic surgical site infection (ssi) prophylaxis, antibiotic not initiated on time	Х	-

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Description Not Covered Properties Patient coverage may vary by plan type and may not follow the listed services. These codes are updated quarterly. Additionally, these coding lists do not reflect information regarding decided drugs, or specially medications and should be directed to the Pharmacy link option within the website. Sample Patient without preoperative order for iv antibiotic surgical site infection (ssi) prophylaxis X	reauthorization Required g immunizations,
Season Patient without preoperative order for iv antibiotic surgical site infection (ssi) prophylaxis X	g immunizations,
G8923 Left ventricular ejection fraction (lvef) < 40% or documentation of moderately or severely depressed left ventricular systolic function Spirometry test results demonstrate fev1/fvc <60% with copd symptoms (e.g. dyspnea, cough/sputum, wheezing) Left ventricular ejection fraction (lvef) < 40% or documentation of moderately or severely depressed left ventricular systolic function Clinician prescribed angiotensin converting enzyme (ace) inhibitor or angiotensin receptor blocker (arb) therapy Clinician documented that patient was not an eligible candidate for angiotensin converting enzyme (ace) inhibitor or angiotensin receptor blocker (arb) therapy Clinician did not prescribe angiotensin converting enzyme (ace) inhibitor or angiotensin receptor blocker (arb) therapy, reason not given Clinician did not prescribe angiotensin converting enzyme (ace) inhibitor or angiotensin receptor blocker (arb) therapy, reason not given Clinician did not prescribe angiotensin converting enzyme (ace) inhibitor or angiotensin receptor blocker (arb) therapy, reason not given X Clinician did not prescribe angiotensin converting enzyme (ace) inhibitor or angiotensin receptor blocker (arb) therapy, reason not given X Clinician documented functional outcomes assessment and care plan within the previous 30 days X Clinician did not prescribe angiotensin converting enzyme (ace) inhibitor or angiotensin receptor blocker (arb) X Clinician did not prescribe angiotensin converting enzyme (ace) inhibitor or angiotensin receptor blocker (arb) X Clinician documented functional outcomes assessment and care plan within the previous 30 days X Clinician did not prescribe angiotensin converting enzyme (ace) inhibitor or angiotensin receptor blocker (arb) X Clinician documented functional outcomes assessment and care plan within the previous 30 days X Clinician documented functional outcomes assessment and care plan within the previous 30 days X Clinician documented functional outcomes assessment and care plan within the pre	- - -
ventricular systolic function Spirometry test results demonstrate fev1/fvc <60% with copd symptoms (e.g., dyspnea, cough/sputum, wheezing) Left ventricular ejection fraction (lvef) <40% or documentation of moderately or severely depressed left ventricular systolic function Clinician prescribed angiotensin converting enzyme (ace) inhibitor or angiotensin receptor blocker (arb) therapy Clinician documented that patient was not an eligible candidate for angiotensin converting enzyme (ace) inhibitor or angiotensin receptor blocker (arb) therapy Clinician did not prescribe angiotensin converting enzyme (ace) inhibitor or angiotensin receptor blocker (arb) therapy, reason not given Cases Documented functional outcomes assessment and care plan within the previous 30 days A jcc melanoma cancer stage 0 through lic melanoma X minimally invasive biopsy method attempted but not diagnostic of breast cancer (e.g., high risk lesion of breast such as atypical ductal hyperplasia, lobular neoplasia, atypic Cases Pre-hypertensive or hypertensive blood pressure reading documented, indicated follow-up not documented, reason not given	-
Spirometry test results demonstrate fev1/fvc <60% with copd symptoms (e.g., dyspnea, cough/sputum, wheezing) Left ventricular ejection fraction (lvef) <40% or documentation of moderately or severely depressed left ventricular systolic function Clinician prescribed angiotensin converting enzyme (ace) inhibitor or angiotensin receptor blocker (arb) therapy Clinician documented that patient was not an eligible candidate for angiotensin converting enzyme (ace) inhibitor or angiotensin receptor blocker (arb) therapy Clinician did not prescribe angiotensin converting enzyme (ace) inhibitor or angiotensin receptor blocker (arb) therapy, reason not given Clinician did not prescribe angiotensin converting enzyme (ace) inhibitor or angiotensin receptor blocker (arb) X Clinician did not prescribe angiotensin converting enzyme (ace) inhibitor or angiotensin receptor blocker (arb) X Clinician did not prescribe angiotensin converting enzyme (ace) inhibitor or angiotensin receptor blocker (arb) X Clinician did not prescribe angiotensin converting enzyme (ace) inhibitor or angiotensin receptor blocker (arb) X Clinician did not prescribe angiotensin converting enzyme (ace) inhibitor or angiotensin receptor blocker (arb) X Clinician did not prescribe angiotensin converting enzyme (ace) inhibitor or angiotensin receptor blocker (arb) X Clinician did not prescribe angiotensin converting enzyme (ace) inhibitor or angiotensin receptor blocker (arb) X Clinician did not prescribe angiotensin converting enzyme (ace) inhibitor or angiotensin receptor blocker (arb) X Clinician did not prescribe angiotensin converting enzyme (ace) inhibitor or angiotensin receptor blocker (arb) X Clinician did not prescribe angiotensin converting enzyme (ace) inhibitor or angiotensin receptor blocker (arb) X Clinician did not prescribe angiotensin converting enzyme (ace) inhibitor or angiotensin receptor blocker (arb) X Clinician did not prescribe angiotensin converting enzyme (ace) inhibitor or angiotensin receptor blocker (ar	-
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Clinician documented that patient was not an eligible candidate for angiotensin converting enzyme (ace) inhibitor or angiotensin receptor blocker (arb) therapy Clinician did not prescribe angiotensin converting enzyme (ace) inhibitor or angiotensin receptor blocker (arb) therapy, reason not given Clinician did not prescribe angiotensin converting enzyme (ace) inhibitor or angiotensin receptor blocker (arb) therapy, reason not given CR8942 Documented functional outcomes assessment and care plan within the previous 30 days CR8944 Ajcc melanoma cancer stage 0 through iic melanoma CR8946 Minimally invasive biopsy method attempted but not diagnostic of breast cancer (e.g., high risk lesion of breast such as atypical ductal hyperplasia, lobular neoplasia, atypic CR8950 Pre-hypertensive or hypertensive blood pressure reading documented, indicated follow-up documented, reason not given	-
therapy, reason not given G8942 Documented functional outcomes assessment and care plan within the previous 30 days X G8944 Ajcc melanoma cancer stage 0 through iic melanoma X G8946 Minimally invasive biopsy method attempted but not diagnostic of breast cancer (e.g., high risk lesion of breast such as atypical ductal hyperplasia, lobular neoplasia, atypic G8950 Pre-hypertensive or hypertensive blood pressure reading documented, indicated follow-up documented X G8952 Pre-hypertensive or hypertensive blood pressure reading documented, indicated follow-up not documented, reason not given	-
Ajcc melanoma cancer stage 0 through iic melanoma X S8946 Minimally invasive biopsy method attempted but not diagnostic of breast cancer (e.g., high risk lesion of breast such as atypical ductal hyperplasia, lobular neoplasia, atypic S8950 Pre-hypertensive or hypertensive blood pressure reading documented, indicated follow-up documented X S8952 Pre-hypertensive or hypertensive blood pressure reading documented, indicated follow-up not documented, reason not given	-
Minimally invasive biopsy method attempted but not diagnostic of breast cancer (e.g., high risk lesion of breast such as atypical ductal hyperplasia, lobular neoplasia, atypic G8950 Pre-hypertensive or hypertensive blood pressure reading documented, indicated follow-up documented X G8952 Pre-hypertensive or hypertensive blood pressure reading documented, indicated follow-up not documented, reason not given	_
such as atypical ductal hyperplasia, lobular neoplasia, atypic September 1989 1989 2015	-
Pre-hypertensive or hypertensive blood pressure reading documented, indicated follow-up documented X Pre-hypertensive or hypertensive blood pressure reading documented, indicated follow-up not documented, reason not given	-
reason not given	-
38955 Most recent assessment of adequacy of volume management	-
A I I I I I I I I I I I I I I I I I I I	_
B8956 Patient receiving maintenance hemodialysis in an outpatient dialysis facility X	-
Assessment of adequacy of volume management not documented, reason not given X	_
G8961 Cardiac stress imaging test primarily performed on low-risk surgery patient for preoperative evaluation within 30 days preceding this surgery	-
Cardiac stress imaging test performed on patient for any reason including those who did not have low risk surgery or test that was performed more than 30 days preceding low ri	-
Cardiac stress imaging test primarily performed on low chd risk patient for initial detection and risk assessment	-
G8966 Cardiac stress imaging test performed on symptomatic or higher than low chd risk patient or for any reason other than initial detection and risk assessment	
G8967 Warfarin or another oral anticoagulant that is fda approved prescribed X	-

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		Small Emp	loyer and Individual
Codes	Description	Not Covered	Preauthorization Required
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G8968	Documentation of medical reason(s) for not prescribing warfarin or another oral anticoagulant that is fda approved not prescribed (e.g., allergy, risk of bleeding, transient o	X	-
G8969	Documentation of patient reason(s) for not prescribing warfarin or another oral anticoagulant that is fda approved (e.g., economic, social, and/or religious impediments, nonco	Х	-
G8970	No risk factors or one moderate risk factor for thromboembolism	Х	-
G9001	Mccd, initial rate	Х	-
G9002	Mccd,maintenance rate	Х	-
G9003	Mccd, risk adj hi, initial	Х	-
G9004	Mccd, risk adj lo, initial	Х	-
G9005	Mccd, risk adj, maintenance	Х	-
G9006	Mccd, home monitoring	Х	-
G9007	Mccd, sch team conf	Х	-
G9008	Mccd,phys coor-care ovrsght	Х	-
G9009	Coordinated care fee, risk adjusted maintenance, level 3	Х	-
G9010	Coordinated care fee, risk adjusted maintenance, level 4	Х	-
G9011	Coordinated care fee, risk adjusted maintenance, level 5	Х	-
G9012	Other specified case mgmt	Х	-
G9013	Esrd demo basic bundle level i	Х	-
G9014	Esrd demo expanded bundle including venous access and related services	Х	-
G9016	Demo-smoking cessation coun	Х	-
G9050	Oncology; primary focus of visit; work up, evaluation, or staging at the time of cancer diagnosis or recurrence	Х	-
G9051	Oncology; primary focus of visit; treatment decision making after disease is staged or restaged, discussion of treatment	Х	-
G9052	Oncology; primary focus of visit; surveillance for disease recurrence for patient who has completed definitive cancer	Х	-
G9053	Oncology; primary focus of visit; expectant management of patient with evidence of cancer	Х	-
G9054	Oncology; primary focus of visit; supervising, coordinating or managing care of patient with terminal cancer	Х	-
G9055	Oncology; primary focus of visit; other, unspecified service not otherwise listed	Х	-
G9056	Oncology; practice guidelines; management adheres to guidelines	Х	-

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G9057	Oncology; practice guidelines; management differs from guidelines as a result of patient enrollment in an institutional	Х	-
G9058	Oncology; practice guidelines; management differs from guidelines because the treating physician disagrees with guidelin	Х	-
G9059	Oncology; practice guidelines; management differs from guidelines because the patient, after being offered treatment	Х	-
G9060	Oncology; practice guidelines; management differs from guidelines associated with patient comorbid illness	Х	-
	Oncology; practice guidelines; patients condition not addressed by available guidelines	Х	-
	Oncology; practice guidelines; management differs from guidelines for other reasons not listed	Х	-
G9063	Oncology; disease status; limited to non small cell lung cancer; extent of disease initially established as stage 1	Х	-
G9064	Oncology; disease status; limited to non small cell lung cancer; extent of disease initially established as stage ii	Х	-
G9065	Oncology; disease status; limited to non small cell lung cancer; extent of disease initially established as stage iii	Х	-
G9066	Oncology; disease status; limited to non small cell lung cancer; stage iii b-iv at diagnosis, metastatic	Х	-
G9067	Oncology; disease status; limited to non small cell lung cancer; extent of disease unknown, under evaluation	Х	-
G9068	Oncology; disease status; limited to small cell and combined small cell/non small cell	Х	-
G9069	Oncoloyg; disease status; small cell lung cancer, limited to small cell and combined small cell/non small cell	Х	-
G9070	Oncology; disease status; small cell lung cancer, limited to small cell and combined small cell/non small	Х	-
G9071	Oncology; disease status; invasive female breast cancer; adenocarcinoma as predominant cell type	Х	-
G9072	Oncology; disease status; invasive female breast cancer; adenocarcinoma as predominant cell type	Х	-
G9073	Oncology; disease status; invasive female breast cancer; adenocarcinoma as predominant cell type	Х	-
G9074	Oncology; disease status; invasive female breast cancer; adenocarcinoma as predominant cell type	Х	-
G9075	Oncology; disease status; invasive female breast cancer; adenocarcinoma as predominant cell type	Х	-
	Oncology; disease status; prostate cancer, limited to adenocarcinoma as predominant cell type	Х	-
	Oncology; disease status; prostate cancer, limited to adenocarcinoma as predominant cell type	Х	-
	Oncology; disease status; prostate cancer, limited to adenocarcinoma as predominant cell type	Х	-
	Oncology; disease status; prostate cancer, limited to adenocarcinoma	Х	-
G9083	Oncoloyg; disease status; prostate cancer limited to adenocarcinoma; extent of disease unknown	Х	-

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Codes	Description	Not Covered	Preauthorization Required
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G9084		Х	-
	Oncology; disease status; colon cancer, limited to invasive cancer, adenocarcinoma as predominant cell type		
G9085	Oncology; disease status; colon cancer, limited to invasive cancer, adenocarcinoma as predominant cell type	Х	-
G9086	Oncology; disease status; colon cancer, limited to invasive cancer, adenocarcinoma as predominant cell type	Х	-
G9087		1	
	Oncology; disease status; colon cancer, limited to invasive cancer, adenocarcinoma as predominant cell type	Х	-
G9088	Oncology; disease status; colon cancer, limited to invasive cancer, adenocarcinoma as predominant cell type	X	-
G9089	Oncology; disease status; colon cancer, limited to invasive cancer, adenocarcinoma as predominant cell type	Х	-
G9090	у,	V	
	Oncology; disease status; rectal cancer, limited to invasive cancer, adenocarcinoma as predominant cell type	X	-
G9091	Oncology; disease status; rectal cancer, limited to invasive cancer, adenocarcinoma as predominant cell type	Х	-
G9092		Х	-
G9093	Oncoloyg; disease status; rectal cancer, limited to invasive cancer, adenocarcinoma as predominant cell type	+	
G9093	Oncology; disease status; rectal cancer, limited to invasive cancer, adenocarcinoma as predominant cell type	Х	-
G9094	Oncology; disease status; rectal cancer, limited to invasive cancer, adenocarcinoma as predominant cell type	х	-
G9095	Oncology; disease status; rectal cancer, limited to invasive cancer, adenocarcinoma as predominant cell type	Х	-
G9096	Oncology; disease status; esophageal cancer, limited to adenocarcinoma or squamous cell carcinoma	Х	-
	Oncology; disease status; esophageal cancer, limited to adenocarcinoma or squamous cell carcinoma	Х	-
G9098	Oncology; disease status; esophageal cancer, limited to adenocarcinoma or squamous cell carcinoma as predominant cell ty	Х	-
G9099	Oncology; disease status; esophageal cancer, limited to adenocarcinoma or squamous cell carcinoma	Х	-
	Oncology; disease status; gastric cancer, limited to adenocarcinoma as predominant cell type	Х	-
	Oncology; disease status; gastric cancer, limited to adenocarcinoma as predominant cell type	Х	-
G9102	Oncology; disease status; gastric cancer, limited to adenocarcinoma as predominant cell type	Х	-

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Codes	Description	Not Covered	Preauthorization Required
	Please note that coverage may vary by plan type and may not follow the listed services. These codes are updated quarterly. Additionally, these coding lists do not re rugs, or specialty medications and should be directed to the Pharmacy link option within the website.	flect information re	egarding immunizations,
G9103	Oncology; disease status; gastric cancer, limited to adenocarcinoma as predominant cell type	Х	-
	Oncology; disease status; gastric cancer, limited to adenocarcinoma as predominant cell type	X	-
G9105	Oncology; disease status, pancreatic cancer, limited to adenocarcinoma as predominant cell type	X	-
	Oncology; disease status; pancreatic cancer, limited to adenocarcinoma	X	-
G9107	Oncology; disease status; pancreatic cancer, limited to adenocarcinoma; u nresectable at diagnosis	X	-
G9108	Oncology; disease status; pancreatic cancer, limited to adenocarcinoma; extent of disease unknown	X	-
G9109	Oncoloyg; disease status; head and neck cancer, limited to cancers of oral cavity, pharynx and larynx with squamous cell	Х	-
G9110	Oncology; disease status; head and neck cancer, limited to cancers of oral cavity, pharynx and larynx with squamous cell	Х	-
G9111	Oncology; disease status; head and neck cancer, limited to cancers of oral cavity, pharynx and larynx with squamous cell	Х	-
G9112	Oncology; disease status; head and neck cancer, limited to cancers of oral cavity, pharynx and larynx with squamous cell	Х	-
G9113	Oncology; disease status, ovarian cancer, limited to epithelial cancer, pathologic stage ia-b	Х	-
	Oncology; disease status; ovarian cancer, limited to epithelial cancer; pathologic stage ia-b	Х	-
	Oncology; disease status; ovarian cancer, limited to epithelial cancer; pathologic stage iii-iv	Х	-
G9116	Oncology; disease status; ovarian cancer, limited to epithelial cancer; evidence of disease progression	X	-
G9117	Oncology; disease status; ovarian cancer, limited to epithelial cancer; extent of disease unknown	X	-
G9123	Oncology; disease status; non hodgkins lymphoma, limited to follicular lymphoma, mantle cell lymphoma	Х	-
G9124	Oncology; disease status; non hodgkins lymphoma, limited to follicular lymphoma, mantle cell lymphoma	Х	-
G9125	Oncology; disease status; non hodgkins lymphoma, limited to follicular lymphoma, mantle cell lymphoma	Х	-
G9126	Oncology; disease statu; ovarian cancer, limited to pathologically stage patients with epithelial cancer, stage ia/ib	Х	-
G9128	Oncology; disease status; limited to multiple myeloma, systemic disease; stage ii or higher	Х	-
	Oncology; disease status; chronic myelogenous leukemia, limited to philadelphia chromosome positive and/or bcr-abl posit		-
G9130	Oncoloyg; disease status; limited to multiple myeloma, systemic disease; extent of disease unknown	Х	-
	Oncology; disease status; invasive female breast cancer (does not include ductal carcinoma in situ); adenocarcinoma as p	Х	-
G9132	Oncology; disease status; prostate cancer, limited to adenocarcinoma; hormone-refractory/androgen-independent (e.g., ris	Х	-

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		Small Employ	ployer and Individual
Codes	Description	Not Covered	Preauthorization Required
Disclaimer njectable o	Please note that coverage may vary by plan type and may not follow the listed services. These codes are updated quarterly. Additionally, these coding lists do not redrugs, or specialty medications and should be directed to the Pharmacy link option within the website.	eflect information re	
G9133	Oncology; disease status; prostate cancer, limited to adenocarcinoma; hormone-responsive; clinical metastases or m1 at d	Х	-
G9134	Oncology; disease status; non-hodgkin's lymphoma, any cellular classification; stage i, ii at diagnosis, not relapsed, n	Х	-
G9135	Oncology; disease status; non-hodgkin's lymphoma, any cellular classification; stage iii, iv, not relapsed, not refracto	Х	-
G9136	Oncology; disease status; non-hodgkin's lymphoma, transformed from original cellular diagnosis to a second cellular clas	Х	-
G9137	Oncology; disease status; non-hodgkin's lymphoma, any cellular classification; relapsed/refractory (for use in a medicar	Х	-
G9138	Oncology; disease status; non-hodgkin's lymphoma, any cellular classification; diagnostic evaluation, stage not determin	Х	-
G9139	Oncology; disease status; chronic myelogenous leukemia, limited to philadelphia chromosome positive and/or bcr abl posit	Х	-
G9140	Equal to or greater than 4 hours; weather or other conditions must prevent transfer or the case falls into a category of	Х	-
G9143	Wayfarin responsiveness testing by genetic technique using any method, any number of specimen(s)	-	Х
G9147	Outpatient intravenous insulin treatment (oivit) either pulsatile or continuous, by any means, guided by the results of measurements for: respiratory quotient; and/or, urine	Х	-
G9148	National committee for quality assurance - level 1 medical home	Х	-
G9149	National committee for quality assurance - level 2 medical home	Х	-
3 9150	National committee for quality assurance - level 3 medical home	Х	-
39151	Mapcp demonstration - state provided services	Х	-
39152	Mapcp demonstration - community health teams	Х	-
39153	Mapcp demonstration - physician incentive pool	Х	-
39156	Evaluation for wheelchair requiring face to face visit with physician	Х	-
G9187	Bpci home visit	Х	-
39188	Beta not given no reason	Χ	-
G9189	Beta pres or already taking	Χ	-
G9190	Medical reason for no beta	Χ	-
G9191	Pt reason for no beta	Χ	-
G9196	Med reason for no ceph	Х	-

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G9197	Order for ceph	Х	-
G9198	No order for ceph no reason	Х	-
G9212	Doc of dsm-iv init eval	Х	-
G9213	No doc of dsm-iv	Х	-
G9223	Pjp proph ordered cd4 low	Х	-
G9225	Norsn no foot exam	Х	-
G9226	3 comp foot exam completed	Х	-
39227	Docrsn no care plan	Х	-
G9228	Gc chl syp documented	Х	-
G9230	Norsn for gc chl syp test	Х	-
G9231	Doc esrd dia trans preg	Х	-
39242	Doc viral load >=200	Х	-
G9243	Doc viral load <200	Х	-
G9246	No med visit in 24mo	Х	-
G9247	1 med visit in 24mo	Х	-
G9250	Doc of pain comfort 48hr	Х	-
G9251	Doc no pain comfort 48hr	Х	-
39254	Doc pt dischg >2d	Х	-
G9255	Doc pt dischg <=2d	Х	-
G9273	Sys<140 and dia<90	Х	-
39274	Bp out of nrml limits	Х	-
39275	Doc of non tobacco user	Х	-
39276	Doc of tobacco user	Х	-
39277	Doc daily aspirin or contra	Х	-
39278	Doc no daily aspirin	Х	-
39279	Pne scrn done doc vac done	Х	-
39280	Pne not given norsn	Х	-
G9281	Pne scrn done doc not ind	Х	-
G9282	Doc medrsn no histo type	Х	-
39283	Hist type doc on report	Х	-
39284	No hist type doc on report	Х	-
39285	Site not small cell lung ca	Х	-

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	Please note that coverage may vary by plan type and may not follow the listed services. These codes are updated quarterly. Additionally, these coding lists do not re	eflect information re		
•	rugs, or specialty medications and should be directed to the Pharmacy link option within the website. Doc antibio order w in 7d	Х	_	
	No doc antibio order w in 7d	X	<u>-</u>	
	Doc medrsn no hist type rpt	X	<u> </u>	
	Doc type nsm lung ca	X		
	No doc type nsm lung ca	X		
	Not nsm lung ca	X		
	Medrsn no pt category	X		
	No pt category on report	X		
	Pt cat and thek on report	X		
	Non cutaneous loc	X		
	Doc share dec prior proc	X		
	No doc share dec prior proc	X		
	Eval risk vte card 30d prior	X	_	
	No eval riskk vte card prior	X	_	
	No interv reg for leak	X	_	
	Interv reg for leak	X	_	
	No ret for surg w in 30d	X	_	
	Unplnd ret to surg w in 30d	X	_	
	No unplnd hosp readm in 30d	X	-	
	Unplnd hosp readm in 30d	X	-	
	No surg site infection	X	-	
	Surgical site infection	Х	-	
	Docrsn not first line amox	Х	-	
	Norsn not first line amox	Х	-	
	Doc first line amox	X	-	
	Doc comm risk calc	X	-	
	No doc comm risk calc	Х	-	
G9318	Image std nomenclature	Х	-	
	Image not std nomenclature	Х	-	
	Doc count of ct in 12mo	Х	-	
G9322	No doc count of ct in 12mo	Х	-	
G9341	Srch for ct w in 12 mos	Х	-	

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•	No srch for ct in 12mo norsn	Х	-
G9344	Sysrsn no dicom srch	Х	-
G9345	Follow up pulm nod	Х	-
G9347	No follow up pulm nod norsn	Х	-
G9351	Doc >1 sinus ct w 90d dx	Х	-
G9352	Not >1 sinus ct w 90d dx	Х	-
G9353	Medrsn >1 sinus ct w 90d dx	Х	-
G9354	Norsn >1 sinus ct w 90d dx	Х	-
G9355	No early ind/delivery	Х	-
G9356	Early ind/delivery	Х	-
G9357	Pp eval/edu perf	Х	-
G9358	Pp eval/edu not perf	Х	-
39359	Neg mgd pos tb notact	Х	-
39360	No doc of neg or man pos tb	Х	-
G9361	Medical indication for elective delivery or early induction	Х	-
G9364	Sinus caus bac inx	Х	-
39367	2high risk med ord	Х	-
39368	2high risk no ord	Х	-
39380	Off assis eol iss	Х	-
G9382	No off assis eol	Х	-
G9383	Recd scrn hcv infec	Х	-
G9384	Doc med reas no offer eol	Х	-
G9385	Doc pt reas not rec hcv srn	Х	-
G9386	Scrn hcv infec not recd	Х	-
G9393	Ini phq9 >9 remiss <5	Х	-
G9394	Dx bipol, death, nhres, hosp	Х	-
G9395	Ini phq9 >9 no remiss >=5	Х	-
G9396	Ini phq9 >9 not assess	Х	-
G9402	Recd f/u w/in 30d disch	Х	-
G9403	Doc reas no 30 day f/u	Х	-
	No 30 day f/u	Х	-
39405	Recd f/u w/in 7d dc	Х	-

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rer. Please note that coverage may vary by plan type and may not follow the listed services. These codes are updated quarterly. Additionally, these coding lists do not reflect drugs, or specialty medications and should be directed to the Pharmacy link option within the website. Doc reas no 7d f/u	t information re-	Preauthorization Required garding immunizations,
le drugs, or specialty medications and should be directed to the Pharmacy link option within the website. Doc reas no 7d f/u	X X X X X X	
No 7d f/u Recard tamp w/in 30d No card tamp e/in 30d No admit w/in 180d req remov No admit w/in 180d req surg rev No admit w/in 180d req surg rev No admit req surg rev Admit req surg rev Adose menig vac btwn 11 & 13 No 1dose meni vac btwn 11 & 13 Tap or td or 1tet/dipth No tdap or td or 1tet/dipth Lungcx bx rpt docs class Med reas no rpt histo type Recard R	X X X X X X	- - - - -
Card tamp w/in 30d No card tamp e/in 30d Admit w/in 180d req remov No admit w/in 180d req remov Admit w/in 180d req surg rev No admit req surg rev Admit req surg rev Adose menig vac btwn 11 & 13 No 1dose meni vac btwn 11 & 13 Tap or td or 1tet/dipth No tdap or td or 1tet/dipth Lungcx bx rpt docs class Med reas no rpt histo type Company to the class histo type Red reas rpt no histo type Med reas rpt no histo type Spec rpt no doc class histo Spec rpt no doc class histo	X X X X X	- - - -
No card tamp e/in 30d Admit w/in 180d req remov Admit w/in 180d req remov Admit w/in 180d req surg rev Admit req surg rev Admit req surg rev Adsoe menig vac btwn 11 & 13 No 1dose menig vac btwn 11 & 13 And tale or td or 1tet/dipth And tale or td or 1tet/dipth Lungcx bx rpt docs class Med reas no rpt histo type Applications of the strength of the streng	X X X X	- - -
Admit w/in 180d req remov 1 No admit w/in 180d req remov 2 Admit w/in 180d req surg rev 3 No admit req surg rev 4 1 dose menig vac btwn 11 & 13 5 No 1 dose meni vac btwn 11 & 13 6 Tdap or td or 1tet/dipth 7 No tdap or td or 1tet/dipth 8 Lungcx bx rpt docs class 9 Med reas no rpt histo type 20 Spec site no lung 11 Lung cx bx rpt no doc class 22 Rpt doc class histo type 23 Med reas rpt no histo type 24 Site no lung or lung cx 25 Spec rpt no doc class histo	X X X	
11 No admit w/in 180d req remov 12 Admit w/in 180d req surg rev 13 No admit req surg rev 14 1 dose menig vac btwn 11 & 13 15 No 1 dose meni vac btwn 11 & 13 16 Tdap or td or 1tet/dipth 17 No tdap or td or 1tet/dipth 18 Lungcx bx rpt docs class 19 Med reas no rpt histo type 20 Spec site no lung 21 Lung cx bx rpt no doc class 22 Rpt doc class histo type 23 Med reas rpt no histo type 24 Site no lung or lung cx 25 Spec rpt no doc class histo	X X X	
Admit w/in 180d req surg rev Admit w/in 180d req surg rev Adose menig vac btwn 11 & 13 No 1dose meni vac btwn 11 & 13 Tdap or td or 1tet/dipth No tdap or td or 1tet/dipth Lungcx bx rpt docs class Med reas no rpt histo type Spec site no lung Lung cx bx rpt no doc class Rpt doc class histo type Med reas rpt no histo type Med reas rpt no histo type Spec rpt no doc class histo Spec rpt no doc class histo	X	-
No admit req surg rev Id 1 dose menig vac btwn 11 & 13 In 15 No 1 dose meni vac btwn 11 & 13 In 16 Tdap or td or 1 tet/dipth In 17 No tdap or td or 1 tet/dipth In 18 Lungcx bx rpt docs class In 19 Med reas no rpt histo type In 19 Spec site no lung In 19 Lung cx bx rpt no doc class In 20 Spec site no lung In 21 Lung cx bx rpt no doc class In 22 Rpt doc class histo type In 23 Med reas rpt no histo type In 24 Site no lung or lung cx In 25 Spec rpt no doc class histo	Х	
14 I dose menig vac btwn 11 & 13 15 No 1dose meni vac btwn 11 & 13 16 Tdap or td or 1tet/dipth 17 No tdap or td or 1tet/dipth 18 Lungcx bx rpt docs class 19 Med reas no rpt histo type 20 Spec site no lung 21 Lung cx bx rpt no doc class 22 Rpt doc class histo type 23 Med reas rpt no histo type 24 Site no lung or lung cx 25 Spec rpt no doc class histo		-
15 No 1dose meni vac btwn 11&13 16 Tdap or td or 1tet/dipth 17 No tdap or td or 1tet/dipth 18 Lungcx bx rpt docs class 19 Med reas no rpt histo type 20 Spec site no lung 21 Lung cx bx rpt no doc class 22 Rpt doc class histo type 23 Med reas rpt no histo type 24 Site no lung or lung cx 25 Spec rpt no doc class histo	V	-
Tdap or td or 1tet/dipth To No tdap or td or 1tet/dipth Lungcx bx rpt docs class Med reas no rpt histo type Lung cx bx rpt no doc class Lung cx bx rpt no doc class Rpt doc class histo type Med reas rpt no histo type Site no lung or lung cx Site no lung or lung cx Spec rpt no doc class histo	^	-
No tdap or td or 1tet/dipth Lungcx bx rpt docs class Med reas no rpt histo type Spec site no lung Lung cx bx rpt no doc class Rpt doc class histo type Med reas rpt no histo type Site no lung or lung cx Spec rpt no doc class histo	Χ	-
18 Lungcx bx rpt docs class 19 Med reas no rpt histo type 20 Spec site no lung 21 Lung cx bx rpt no doc class 22 Rpt doc class histo type 23 Med reas rpt no histo type 24 Site no lung or lung cx 25 Spec rpt no doc class histo	Χ	-
19 Med reas no rpt histo type 20 Spec site no lung 21 Lung cx bx rpt no doc class 22 Rpt doc class histo type 23 Med reas rpt no histo type 24 Site no lung or lung cx 25 Spec rpt no doc class histo	Х	-
20 Spec site no lung 21 Lung cx bx rpt no doc class 22 Rpt doc class histo type 23 Med reas rpt no histo type 24 Site no lung or lung cx 25 Spec rpt no doc class histo	Х	-
Lung cx bx rpt no doc class Rpt doc class histo type Med reas rpt no histo type Site no lung or lung cx Spec rpt no doc class histo	Х	-
22 Rpt doc class histo type 23 Med reas rpt no histo type 24 Site no lung or lung cx 25 Spec rpt no doc class histo	Х	-
23 Med reas rpt no histo type 24 Site no lung or lung cx 25 Spec rpt no doc class histo	Х	-
24 Site no lung or lung cx 25 Spec rpt no doc class histo	Х	-
25 Spec rpt no doc class histo	Х	-
	Х	-
	Х	-
26 Impr med time edarr pain med	Х	-
No impro med time pain med	Х	-
Rpt pt cat and pt1	Х	-
29 Doc med reas no pt cat	Х	-
30 Spec site no cutaneous	Х	-
No pt cat and pt1	Х	-
32 Asth controlled	Х	-
Asth not controlled	Х	-
52 Doc med reas no scrn hcv	Х	-
Abd imag w/us, ct or mri	Х	-
Doc med pt reas no hcc scrn	Х	-
No abd imag w/o reason		-

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	rugs, or specialty medications and should be directed to the Pharmacy link option within the website. Tob user recd cess interv	l v l	
	Tob non-user	X	-
	No tob assess or cess inter	X	-
	No recd cortico>=10mg/d >60d	X	-
	No rec cortico>60d 1rx 600mg	X	-
	W/in 2yr dxa not order	X	<u>-</u>
	Services performed by chaplain in the hospice setting, each 15 minutes	X	-
	Services performed by dietary counselor in the hospice setting, each 15 minutes	X	
		X	-
	Services performed by other counselor in the hospice setting, each 15 minutes Services performed by volunteer in the hospice setting, each 15 minutes	X	-
	Services performed by care coordinator in the hospice setting, each 15 minutes	X	-
	Services performed by other qualified therapist in the hospice setting, each 15 minutes	X	<u>-</u>
	Services performed by qualified pharmacist in the hospice setting, each 15 minutes	X	-
	Admission to medicare care choice model program (mccm)	X	-
	Remote e/m new pt 10mins		-
	Remote e/m new pt 20mins	X	-
	Remote e/m new pt 30mins	X	-
	Remote e/m new pt 45mins	X	-
	Remote e/m new pt 60mins	X	-
	Remote e/m est. pt 10mins	Х	-
	Remote e/m est. pt 15mins	Х	-
	Remote e/m est. pt 25mins	Х	-
	Remote e/m est. pt 40mins	Х	-
	Joint replac mod home visit	Х	-
	Seen pre-operatively by anesthesiologist or proxy prior to the day of surgery	Х	-
	Antibiotic regimen prescribed	Х	-
39500	Radiation exposure indices, exposure time or number of fluorographic images in final report for procedures using fluoroscopy, documented	Х	-
G9501	Radiation exposure indices, exposure time or number of fluorographic images not documented in final report for procedure using fluoroscopy, reason not given	Х	-
39502	Med reas no perf foot exam	Х	-
	Doc reas no hby status	X	_

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G9505	Antibiotic regimen prescribed within 10 days after onset of symptoms for documented medical reason	Х	-
G9506	Biologic immune response modifier prescribed	Х	-
G9507	Doc reas on statin or contra	Х	-
G9508	Documentation that the patient is not on a statin medication	Х	-
G9509	Remission at twelve months as demonstrated by a twelve month (+/-30 days) phq-9 score of less than 5	Х	-
G9510	Remis12m not phq-9 score <5	Х	-
G9511	Index date phq-9 score greater than 9 documented during the twelve month denominator identification period	Х	-
G9512	Individual had a pdc of 0.8 or greater	X	-
G9513	Individual did not have a pdc of 0.8 or greater	X	-
G9514	Patient required a return to the operating room within 90 days of surgery	Х	-
G9515	Patient did not require a return to the operating room within 90 days of surgery	Х	-
G9516	Patient achieved an improvement in visual acuity, from their preoperative level, within 90 days of surgery	Х	-
G9517	Patient did not achieve an improvement in visual acuity, from their preoperative level, within 90 days of surgery, reason not given	Х	-
G9518	Documentation of active injection drug use	Х	_
	Final ref +/- 1.0 w/in 90d	X	-
	Refract not +/- 1.0 w/in 90d	X	-
G9521		Х	-
G9522	Total number of emergency department visits and inpatient hospitalizations less than two in the past 12 months Total number of emergency department visits and inpatient hospitalizations equal to or greater than two in the past 12 months or patient not screened, reason not given	Х	-
G9529	Patient with minor blunt head trauma had an appropriate indication(s) for a head ct	Х	-
	Patient presented within 24 hours of a minor blunt head trauma with a gcs score of 15 and had a head ct ordered for trauma by an emergency care provider	Х	-
G9531		Х	-
	Patient with minor blunt head trauma did not have an appropriate indication(s) for a head ct	X	-
	Documentation of system reason(s) for ordering an advanced brain imaging study (i.e., needed as part of a clinical trial; other clinician ordered the study)	X	-
	Intent for potential removal at time of placement	Х	
G9539			
	Patient alive 3 months post procedure	X	

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isclaimer jectable o	Please note that coverage may vary by plan type and may not follow the listed services. These codes are updated quarterly. Additionally, these coding lists do not re rugs, or specialty medications and should be directed to the Pharmacy link option within the website.	flect information re	garding immunizations,	
39542	Documented re-assessment for the appropriateness of filter removal within 3 months of placement	Х	-	
G9543	Documentation of at least two attempts to reach the patient to arrange a clinical re-assessment for the appropriateness of filter removal within 3 months of placement	Х	-	
3 9544	No filt remov w/in 3mos plcm	Х	-	
39547	Cys ren les or adren	Х	-	
39548	No f/u rec image study	Х	-	
9549	Doc med rsn for f/u imag	Х	-	
9550	Imag rec	Х	-	
9551	Imag no les	Х	-	
39552	Incidental thyroid nodule < 1.0 cm noted in report	Х	-	
9553	Prior thyroid disease diagnosis	Х	-	
39554	Final reports for ct or mri of the chest or neck or ultrasound of the neck with follow-up imaging recommended	х	-	
39555	Doc med reas no follow imag	Х	-	
39556	Final reports for ct or mri of the chest or neck or ultrasound of the neck with follow-up imaging not recommended	Х	-	
G9557	Final reports for ct or mri studies of the chest or neck or ultrasound of the neck without a thyroid nodule < 1.0 cm noted	Х	-	
39580	Door to puncture time of less than 2 hours	Х	-	
9582	Door to puncture time of greater than 2 hours, no reason given	Х	-	
39593	Pediatric patient with minor blunt head trauma classified as low risk according to the pecarn prediction rules	Х	-	
9594	Patient presented within 24 hours of a minor blunt head trauma with a gcs score of 15 and had a head ct ordered for trauma by an emergency care provider	Х	-	
9595	Doc shnt/tum/coag	Х	-	
9597				
	Pediatric patient with minor blunt head trauma not classified as low risk according to the pecarn prediction rules	X	-	
9598	Aortic aneurysm 5.5 - 5.9 cm maximum diameter on centerline formatted ct or minor diameter on axial formatted ct	Х	-	
G9599	Aortic aneurysm 6.0 cm or greater maximum diameter on centerline formatted ct or minor diameter on axial formatted ct	Х	-	
39603	Patient survey score improved from baseline following treatment	Х	-	

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G9604	Patient survey results not available	Х	-
G9605	Patient survey score did not improve from baseline following treatment	Х	-
G9606	Intraoperative cystoscopy performed to evaluate for lower tract injury	Х	-
G9607	Patient is not eligible (e.g., patient death during procedure, absent urethra or an otherwise inaccessible bladder)	Х	-
G9608	Intraoperative cystoscopy not performed to evaluate for lower tract injury	Х	-
G9609	Documentation of an order for anti-platelet agents or p2y12 antagonists	Х	-
G9610	Doc md rsn no antipla/p2y12	Х	-
G9611	Order for anti-platelet agents or p2y12 antagonists was not documented, reason not otherwise specified	Х	-
G9618	Documentation of screening for uterine malignancy or those that had an ultrasound and/or endometrial sampling of any kind	X	-
G9620	Patient not screened for uterine malignancy, or those that have not had an ultrasound and/or endometrial sampling of any kind, reason not given	Х	-
G9621	Patient identified as an unhealthy alcohol user when screened for unhealthy alcohol use using a systematic screening method and received brief counseling	Х	-
G9622	Patient not identified as an unhealthy alcohol user when screened for unhealthy alcohol use using a systematic screening method	Х	-
G9623	Documentation of medical reason(s) for not screening for unhealthy alcohol use (e.g., limited life expectancy, other medical reasons)	Х	-
G9624	Patient not screened for unhealthy alcohol screening using a systematic screening method or patient did not receive brief counseling, reason not given	Х	-
G9625	Patient sustained bladder injury at the time of surgery or subsequently up to 1 month post-surgery	Х	-
G9626	Pt not elig	Х	-
G9627	Patient did not sustained bladder injury at the time of surgery or subsequently up to 1 month post-surgery	Х	-
G9628	Patient sustained major viscus injury at the time of surgery or subsequently up to 1 month post-surgery	Х	-
G9629	Pt not elig	Х	-
G9630	Patient did not sustain major viscus injury at the time of surgery or subsequently up to 1 month post-surgery	Х	-
G9631	Patient sustained ureter injury at the time of surgery or discovered subsequently up to 1 month post-surgery	Х	-
G9632	Pt not elig	Х	-
G9633	Patient did not sustain ureter injury at the time of surgery or subsequently up to 1 month post-surgery	Х	-

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Disscription Disscription Dissc	Preauthorization Required arding immunizations,
Injectable drugs, or specialty medications and should be directed to the Pharmacy link option within the website. Section 2002 Section 2002 Section 2003 Section	
G9638 No doc >1 dose reduc tech G9642 Current cigarette smokers X G9643 Elective surgery X G9644 Patients who abstained from smoking prior to anesthesia on the day of surgery or procedure X G9645 Patients who did not abstain from smoking prior to anesthesia on the day of surgery or procedure X G9646 Patients with 90 day mrs score of 0 to 2 X G9647 Patients with 90 day mrs score greater than 2 X G9648 Patients with 90 doc/no bnchmk X G9651 Psori tool doc w/benchmk X G9652 Monitored anesthesia care (mac) G9655 A transfer of care protocol or handoff tool/checklist that includes the required key handoff elements is used X G9658 Patient transferred directly from anesthetizing location to pacu X G9659 >85y no hx colo ca/rsn scope X G9660 Doc med rsn scope pt >85y X G9661 >85y scope othr rsn X G9662 Previously diagnosed or have an active diagnosis of clinical ascvd X G9666 Patients who are currently statin therapy users or received an order (prescription) for statin therapy X G9666 Patients who are currently statin therapy users or received an order (prescription) for statin therapy	- - - -
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G9649 Psori tool doc w/benchmk G9651 Psori tool doc/no bnchmk met X G9654 Monitored anesthesia care (mac) X G9655 A transfer of care protocol or handoff tool/checklist that includes the required key handoff elements is used X G9656 Patient transferred directly from anesthetizing location to pacu X G9658 A transfer of care protocol or handoff tool/checklist that includes the required key handoff elements is not used X G9659 >85y no hx colo ca/rsn scope X G9660 Doc med rsn scope pt >85y X G9661 >85y scope othr rsn X G9662 Previously diagnosed or have an active diagnosis of clinical ascvd X G9664 Patients who are currently statin therapy users or received an order (prescription) for statin therapy X G9665	-
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G9662 Previously diagnosed or have an active diagnosis of clinical ascvd G9663 Fast/dir Idl <= 190 mg/dl X G9664 Patients who are currently statin therapy users or received an order (prescription) for statin therapy X G9665	-
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G9663 Fast/dir IdI <= 190 mg/dl G9664 Patients who are currently statin therapy users or received an order (prescription) for statin therapy X G9665	-
G9665	-
G9665	-
Patients who are not currently statin therapy users or did not receive an order (prescription) for statin therapy	-
G9666 The highest fasting or direct Idl-c laboratory test result of 70?189 mg/dl in the measurement period or two years prior to the beginning of the measurement period	-
G9674 Patients with clinical ascvd diagnosis X	-
G9675 Patients who have ever had a fasting or direct laboratory result of ldl-c = 190 mg/dl X	-
G9676 40-75y w/type 1/2 w/ldl-c rs X	-
G9679 Acute care pneumonia X	-
G9680 Acute care congestive heart X	-
G9681 Acute care chronic obstruct X	
G9682 Acute care skin infection X	-

^{*}Preauth needed after certain number of visits. Limit depends on plan/provider type.

^{**}Plan coverage limited to ACA 10 essential health benefits.

		Small Emp	oloyer and Individual
Codes	Description	Not Covered	Preauthorization Required
	Please note that coverage may vary by plan type and may not follow the listed services. These codes are updated quarterly. Additionally, these coding lists do not rerugs, or specialty medications and should be directed to the Pharmacy link option within the website.	eflect information re	
G9683	Acute care fluid or electrol	Х	-
G9684	Acute care urinary tract inf	Х	-
G9685	Acute nursing facility care	Х	-
G9687	Hospice anytime msmt per	Х	-
G9688	Pt w/hosp anytime msmt per	Х	-
G9689	Inpt elect carotid intervent	Х	-
G9690	Pt rec hospice dur msmt per	Х	-
G9691	Pt hosp dur msmt period	Х	-
G9692	Hosp recd by pt dur msmt per	Х	-
G9693	Pt use hosp during msmt per	Х	-
G9694	Hosp srv used pt in msmt per	X	-
39695	Long act inhal bronchdil pre	Х	-
39696	Med rsn no presc bronchdil	Х	-
39698	Sys rsn no presc bronchdil	Х	-
G9699	Long inhal bronchdil no pres	Х	-
39700	Pt is w/hosp during msmt per	Х	-
G9702	Pt use hosp during msmt per	X	-
G9703	Child anbx 30 prior dx phary	Х	-
G9704	Ajcc br ca stg i: t1 mic/t1a	Х	-
39705	Ajcc br ca stg ib	Х	-
39706	Low recur prost ca	Х	-
39707	Pt had hosp dur msmt per	X	-
39708	Bilat mast/hx bi /unilat mas	X	-
39709	Hosp srv used pt in msmt per	Х	-
G9710	Pt prov hosp srv msmt per	X	-
39711	Pt hx tot col or colon ca	Х	-
	Doc med rsn presc anbx	Х	-
	Pt use hosp during msmt per	X	-
	Pt is w/hosp during msmt per	Х	-
	Bmi not norm, no follow, doc	X	-
	Doc dx depr/dx bipol, no scr	Х	-
39718	Hospice anytime msmt per	Х	-

^{*}Preauth needed after certain number of visits. Limit depends on plan/provider type.

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Description Please note that coverage may vary by plan type and may not follow the listed services. These codes are updated quarterly. Additionally, these coding lists do not redrugs, or specialty medications and should be directed to the Pharmacy link option within the website. Pt not ambul/immob/wc Hospice anytime msmt per Pt not ambul/immob/wc Doc hx renal fail or cr+ >4 Hosp recd by pt dur msmt per Pt w/doc use anticoag mst yr Refused to participate Pt unable cmplt knee fs prom Refused to participate Pt unbl cmplt hip fs prom Refused to participate Pt unbl cmplt ft/ank fs prom Refused to participate Pt unbl cmplt florak fs prom Refused to participate Pt unbl cmplt bfs prom Refused to participate Pt unbl cmplt bfs prom Refused to participate Pt unbl cmplt bfs prom Refused to participate Pt unbl cmplt shid fs prom Refused to participate Pt unbl cmplt the fs prom Refused to participate Pt unbl cmplt the fs prom Refused to participate Pt unbl cmplt ewh fs prom Refused to participate Pt unbl cmplt ewh fs prom Refused no participate Pt unbl cmplt ewh fs prom Refused no participate Pt unbl cmplt ewh fs prom Refused no participate Pt unbl cmplt ewh fs prom Refused no participate Pt unbl cmplt ewh fs prom Refused no participate Pt unbl cmplt ewh fs prom Refused no participate Pt unbl cmplt ewh fs prom Refused no participate Pt unbl cmplt ewh fs prom Refused no participate Pt unbl cmplt ewh fs prom Refused no participate Pt unbl cmplt ewh fs prom	Not Covered effect information re	Preauthorization Required egarding immunizations,
drugs, or specialty medications and should be directed to the Pharmacy link option within the website. Pt not ambul/immob/wc Hospice anytime msmt per Pt not ambul/immob/wc Doc hx renal fail or cr+ >4 Hosp recd by pt dur msmt per Pt w/doc use anticoag mst yr Refused to participate Pt unable cmplt knee fs prom Refused to participate Pt unbl cmplt hip fs prom Refused to participate Pt unbl cmplt ft/ank fs prom Refused to participate Pt unbl cmplt ft/shk fs prom Refused to participate Pt unbl cmplt lb fs prom Refused to participate Pt unbl cmplt lb fs prom Refused to participate Pt unbl cmplt lb fs prom Refused to participate Pt unbl cmplt shld fs prom Refused to participate Pt unbl cmplt shld fs prom Refused to participate Pt unbl cmplt shld fs prom Refused to participate Pt unbl cmplt ewh fs prom Hosp srv to pt dur msmt per	X X X X X X X X X X X	
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Doc hx renal fail or cr+ >4 Hosp recd by pt dur msmt per Pt w/doc use anticoag mst yr Refused to participate Pt unable cmplt knee fs prom Refused to participate Pt unbl cmplt hip fs prom Refused to participate Pt unbl cmplt ft/ank fs prom Refused to participate Pt unbl cmplt lb fs prom Refused to participate Pt unbl cmplt lb fs prom Refused to participate Pt unbl cmplt shid fs prom Refused to participate Pt unbl cmplt shid fs prom Refused to participate Pt unbl cmplt shid fs prom Refused to participate Pt unbl cmplt ewh fs prom Hosp srv to pt dur msmt per Pt w/hosp anytime msmt per	X X X X X X X X	- - - - - - - -
Hosp recd by pt dur msmt per Pt w/doc use anticoag mst yr Refused to participate Pt unable cmplt knee fs prom Refused to participate Pt unbl cmplt hip fs prom Refused to participate Pt unbl cmplt ft/ank fs prom Refused to participate Pt unbl cmplt lb fs prom Refused to participate Pt unbl cmplt lb fs prom Refused to participate Pt unbl cmplt shid fs prom Refused to participate Pt unbl cmplt shid fs prom Refused to participate Pt unbl cmplt shid fs prom Refused to participate Pt unbl cmplt ewh fs prom Refused to participate Pt unbl cmplt ewh fs prom Hosp srv to pt dur msmt per Pt w/hosp anytime msmt per	X X X X X X X	- - - - - - -
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Refused to participate Pt unable cmplt knee fs prom Refused to participate Pt unbl cmplt hip fs prom Refused to participate Pt unbl cmplt ft/ank fs prom Refused to participate Pt unbl cmplt lb fs prom Refused to participate Pt unbl cmplt lb fs prom Refused to participate Pt unbl cmplt shld fs prom Refused to participate Pt unbl cmplt shld fs prom Refused to participate Pt unbl cmplt ewh fs prom Hosp srv to pt dur msmt per Pt w/hosp anytime msmt per	X X X X X	- - - - -
Pt unable cmplt knee fs prom Refused to participate Pt unbl cmplt hip fs prom Refused to participate Pt unbl cmplt ft/ank fs prom Refused to participate Pt unbl cmplt lb fs prom Refused to participate Pt unbl cmplt lb fs prom Refused to participate Pt unbl cmplt shld fs prom Refused to participate Pt unbl cmplt shld fs prom Refused to participate Pt unbl cmplt ewh fs prom Refused to participate Pt unbl cmplt ewh fs prom Hosp srv to pt dur msmt per Pt w/hosp anytime msmt per	X X X X	- - - - -
Refused to participate Pt unbl cmplt hip fs prom Refused to participate Pt unbl cmplt ft/ank fs prom Refused to participate Pt unbl cmplt lb fs prom Refused to participate Pt unbl cmplt lb fs prom Refused to participate Pt unbl cmplt shld fs prom Refused to participate Pt unbl cmplt shld fs prom Refused to participate Pt unbl cmplt ewh fs prom Hosp srv to pt dur msmt per Pt w/hosp anytime msmt per	X X X	- - - -
Pt unbl cmplt hip fs prom Refused to participate Pt unbl cmplt ft/ank fs prom Refused to participate Pt unbl cmplt lb fs prom Refused to participate Pt unbl cmplt shld fs prom Refused to participate Pt unbl cmplt shld fs prom Refused to participate Pt unbl cmplt ewh fs prom Hosp srv to pt dur msmt per Pt w/hosp anytime msmt per	X X X	- - - -
Refused to participate Pt unbl cmplt ft/ank fs prom Refused to participate Pt unbl cmplt lb fs prom Refused to participate Pt unbl cmplt shld fs prom Refused to participate Pt unbl cmplt shld fs prom Refused to participate Pt unbl cmplt ewh fs prom Hosp srv to pt dur msmt per Pt w/hosp anytime msmt per	X	- - -
Pt unbl cmplt ft/ank fs prom Refused to participate Pt unbl cmplt lb fs prom Refused to participate Pt unbl cmplt shld fs prom Refused to participate Pt unbl cmplt shld fs prom Refused to participate Pt unbl cmplt ewh fs prom Hosp srv to pt dur msmt per Pt w/hosp anytime msmt per	Х	- - -
Refused to participate Pt unbl cmplt lb fs prom Refused to participate Pt unbl cmplt shld fs prom Refused to participate Pt unbl cmplt shld fs prom Refused to participate Pt unbl cmplt ewh fs prom Hosp srv to pt dur msmt per Pt w/hosp anytime msmt per		-
Pt unbl cmplt lb fs prom Refused to participate Pt unbl cmplt shld fs prom Refused to participate Pt unbl cmplt ewh fs prom Hosp srv to pt dur msmt per Pt w/hosp anytime msmt per	Х	_
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Pt unbl cmplt shld fs prom Refused to participate Pt unbl cmplt ewh fs prom Hosp srv to pt dur msmt per Pt w/hosp anytime msmt per	Х	-
Pt unbl cmplt ewh fs prom Hosp srv to pt dur msmt per Pt w/hosp anytime msmt per	Х	-
Hosp srv to pt dur msmt per Pt w/hosp anytime msmt per	Х	-
Pt w/hosp anytime msmt per	Х	-
	Х	-
Pt not elig, dx htn	Х	-
	Х	-
Doc rsn no scr high bp	Х	-
Mit sten, valve or trans af	Х	-
Pt died w/in 24 mos rpt time	Х	-
Urgent surgery	Х	-
Doc no dicom, ct other fac	Х	-
Incid pulm nodule	Х	-
Doc med rsn for imaging	Х	-
Surg proc w/silicone oil	Х	-
Surg proc w/silicone oil	Х	-
Hospice or term phase	Х	-
Pt w/hosp anytime msmt per	Х	_

^{*}Preauth needed after certain number of visits. Limit depends on plan/provider type.

^{**}Plan coverage limited to ACA 10 essential health benefits.

		Small Employer and Individual	
Codes	Description	Not Covered	Preauthorization Required
	lease note that coverage may vary by plan type and may not follow the listed services. These codes are updated quarterly. Additionally, these coding lists do not regs, or specialty medications and should be directed to the Pharmacy link option within the website.	eflect information re	garding immunizations,
G9761 P	Pt w/hosp anytime msmt per	X	-
G9762 P	Pt had hpv b/t 9-13 yr	Х	-
G9763 P	Pt no hpv b/t 9-13 yr	Х	-
G9764 P	Pt tx oral syst/bio med psor	Х	-
G9765 P	Pt decl chan/conind or <6m	Х	-
G9766 C	Cva stroke dx tx transf fac	Х	-
39767 H	Hosp new dx cva consid evst	Х	-
39768 P	Pt w/hosp anytime msmt per	Х	-
39769 B	3n den 2yr/got ost med/ther	Х	-
39770 P	Perip nerve block	Х	-
39771 A	Anes end, 1 temp >35.5(95.9)	Х	-
39772 D	Ooc med rsn no temp >= 35.5	Х	-
39773 N	No temp >35.5(95.9), anes	Х	-
39774 P	Pt had hyst	Х	-
39775 R	Recd 2 anti-emet pre/intraop	Х	-
39776 D	Ooc med rsn no proph antiem	Х	-
39777 P	Pt no antiemet pre/intraop	Х	-
39778 P	Pts dx w/pregn	Х	-
39779 P	Pts breastfeeding	Х	-
39780 P	Pts dx w/rhabdomyolysis	Х	-
39781 D	Ooc rsn no statin	Х	-
39782 H	dx dx fam/pure hypercholes	Х	=
39784 P	Path/derm 2nd opin bx	Х	-
39785 P	Path report sent	Х	-
39786 P	Path report not sent	Х	-
39787 P	Pt alive lst day msmt yr	X	-
	Most rct bp = 140/90</td <td>Х</td> <td>-</td>	Х	-
	Record bp ip, er, urg/self	Х	-
39790 N	Most rct bp >/= 140/90	Х	-
39791 N	Most rct tob stat free	Х	-
39792 N	Nost rct tob stat not free	Х	
39793 P	Pt on daily asa/antiplat	Х	-

^{*}Preauth needed after certain number of visits. Limit depends on plan/provider type.

^{**}Plan coverage limited to ACA 10 essential health benefits.

Description Picauthorization Picauthorization			Small Employer and Individual	
Stable drugs, or specialty medicalizons and should be directed to the Pharmacy link option within the website.	Codes	Description	Not Covered	Preauthorization Required
9795 Pt no daily asa/antiplat			flect information re	egarding immunizations,
Protection Pro	G9794	Doc med rsn no asa/antiplat	Х	-
9797 Pt currently on statin X - 9806 Pt whosp anytime msmt per X - 9807 Pt no reed cerv cyto/hpv X - 9808 Pt no asthm cont med mst per X - 9809 Pt no stome continued mst per X - 9809 Pt no stome continued mst per X - 9809 Pt whosp anytime msmt per X - 9810 Pdc 75% w/asth cont med X - 9811 Pto ded during inpt/30d aft X - 9812 Pt died during inpt/30d aft X - 9813 Pt not died w/in 30d of proc X - 9813 Pt not died w/in 30d of proc X - 9814 Doc sex activity X - 9815 Doc chlam ser test wffollow X - 9820 Doc chlam ser test wffollow X - 9821 Rob doc holm ser ts wffollow X - 9822 Endo abl proc yr prev ind dt X - 9823 Endo smpl/hyst bx res no doc X - 9824 Endo smpl/hyst bx res no doc X - 9825 Br ca dx i, no t1/t1a/t1b X - 9826 Pt net dis at dx X - 9827 Pt net dis at dx X - 9828 Pt net dis at dx X - 9829 Pt net dis at dx X - 9820	G9795	Pt no daily asa/antiplat	Х	-
Pt w/hosp anytime msmt per X -	G9796	Pt not currently on statin	Х	-
Pt recd cerv cyto/hpv	G9797	Pt currently on statin	Х	-
Pt no recd cerv cyto/hpv X	G9805	Pt w/hosp anytime msmt per	Х	-
9808 Pt no asthm cont med mst per X - 9809 Pt w/hosp anytime msmt per X - 9811 No pdc 75% w/asth cont med X - 9811 No pdc 75% w/asth cont med X - 9812 Pt died during inpt/30d aft X - 9813 Pt not died w/in 30d of proc X - 9814 Doc sex activity X - 9819 Pt w/hosp anytime msmt per X - 9820 Doc chlam scr test w/follow X - 9821 No doc chlam scr test w/follow X - 9822 Endo abl proc yr prev ind dt X - 9823 Endo smpl/hyst bx res doc X - 9824 Endo smpl/hyst bx res no doc X - 9825 Endo smpl/hyst bx res no doc X - 9826 Endo smpl/hyst bx res no doc X - 9827 Str teat x i i or i ii X - 9828 Pt met dis at dx X - 9839 Pt met dis at dx X - 9840 Kras tst bfr beg anti moab - X 9841 No kras tst bfr beg anti moab - X 9842 Pt met dis at dx X - 9844 Pt no recd anti-egfr ther X - 9845 Pt recd anti-egfr ther X - 9846 Pt recd anti-egfr ther X - 9847 Pt recd anti-egfr ther X - 9848 Pt recd anti-egfr ther X - 9849 Pt recd anti-egfr ther X - 9840 Pt recd anti-egfr ther X - 9841 Pt recd anti-egfr ther X - 984	G9806	Pt recd cerv cyto/hpv	Х	-
Pt w/hosp anytime msmt per X	G9807	Pt no recd cerv cyto/hpv	Х	-
Pdc 75% w/asth cont med X -	G9808	Pt no asthm cont med mst per	Х	-
1981 No pdc 75% w/asth cont med X - 1981 Pt died during inpt/30d aft X - 1981 Pt not died w/in 30d of proc X - 1981 Doc sex activity X - 1981 Doc sex activity X - 1982 Doc chlam scr test w/follow X - 1982 Doc chlam scr test w/follow X - 1982 No doc chlam scr ts w/follow X - 1982 Endo abl proc yr prev ind dt X - 1982 Endo smpl/hyst bx res doc X - 1982 Endo smpl/hyst bx res no doc X - 1982 Endo smpl/hyst bx res no doc X - 1983 Her-2 pos X - 1983 Her-2 pos X - 1983 Brt ca dx i, no t1/t1a/t1b X - 1983 Pt met dis at dx X - 1983 Pt met dis at dx X - 1984 Rras tst bfr beg ant moab - X 1984 Pt met dis at dx X - 1984 Pt no red anti-egfr ther X - 1984 Pt no red anti-egfr ther X - 1984 Pt recd anti-egfr ther X - 1985 Pt recd an	G9809	Pt w/hosp anytime msmt per	Х	-
Pt died during inpt/30d aft X -	G9810	Pdc 75% w/asth cont med	Х	-
9813 Pt not died w/in 30d of proc X - 9818 Doc sex activity X - 9819 Pt w/hosp anytime msmt per X - 9820 Doc chlam scr test w/follow X - 9821 No doc chlam scr ts w/follow X - 9822 Endo abl proc yr prev ind dt X - 9823 Endo smpl/hyst bx res doc X - 9824 Endo smpl/hyst bx res no doc X - 9830 Her-2 pos X - 9831 Ajcc stg brt ca dx ii or iii X - 9832 Brt ca dx i, no t1/t1a/t1b X - 9833 Pt met dis at dx X - 9834 Ncras tst bfr beg anti moab X - 9844 No kras tst bfr beg anti moab - X 9842 Pt met dis at dx X - 9843 Kras gene mut X - 9844 Pt no recd anti-egfr ther X - 9845 Pt recd anti-egfr ther X -	G9811	No pdc 75% w/asth cont med	Х	-
9818 Doc sex activity X - 9819 Pt w/hosp anytime msmt per X - 9820 Doc chlam scr test w/follow X - 9821 No doc chlam scr ts w/follow X - 9822 Endo abl proc yr prev ind dt X - 9823 Endo smpl/hyst bx res doc X - 9824 Endo smpl/hyst bx res no doc X - 9830 Her-2 pos X - 9831 Ajcc stg brt ca dx ii or iii X - 9832 Brt ca dx i, no t1/t1a/t1b X - 9838 Pt met dis at dx X - 9840 Kras tst bfr beg ant moab - X 9841 No kras tst bfr beg ant moab - X 9842 Pt met dis at dx X - 9843 Kras gene mut X - 9844 Pt no recd anti-egfr ther X - 9845 Pt recd anti-egfr ther X -	G9812	Pt died during inpt/30d aft	Х	-
Pt w/hosp anytime msmt per X - 1	G9813	Pt not died w/in 30d of proc	Х	-
9820 Doc chlam scr test w/follow X - 9821 No doc chlam scr ts w/follow X - 9822 Endo abl proc yr prev ind dt X - 9823 Endo smpl/hyst bx res doc X - 9824 Endo smpl/hyst bx res no doc X - 9825 Endo smpl/hyst bx res no doc X - 9826 Endo smpl/hyst bx res no doc X - 9827 Endo smpl/hyst bx res no doc X - 9828 Her-2 pos X - 9829 Ari-eg br tca dx ii or iii X - 9829 Brt ca dx i, no t1/t1a/t1b X - 9829 Brt ca dx i, no t1/t1a/t1b X - 9830 Pt met dis at dx X - 9840 Kras tst bfr beg anti moab - X 9841 No kras tst bfr beg ant moab - X 9842 Pt met dis at dx X - 9843 Kras gene mut X - 9844 Pt no recd anti-egfr ther X - 9845 Pt recd anti-egfr ther X - 9845 Pt recd anti-egfr ther X - 9846 Endo smpl/hyst bx res to with the containing the con	G9818	Doc sex activity	Х	-
9821 No doc chlam scr ts w/follow X - 9822 Endo abl proc yr prev ind dt X - 9823 Endo smpl/hyst bx res doc X - 9824 Endo smpl/hyst bx res no doc X - 9830 Her-2 pos X - 9831 Ajcc stg brt ca dx ii or iii X - 9832 Brt ca dx i, no t1/t1a/t1b X - 9838 Pt met dis at dx X - 9849 Anti-egfr mon anti ther X - 9840 Kras tst bfr beg anti moab - X 9841 No kras tst bfr beg ant moab - X 9842 Pt met dis at dx X - 9843 Kras gene mut X - 9844 Pt no recd anti-egfr ther X - 9845 Pt recd anti-egfr ther X -	G9819	Pt w/hosp anytime msmt per	Х	-
9822 Endo abl proc yr prev ind dt X - 9823 Endo smpl/hyst bx res doc X - 9824 Endo smpl/hyst bx res no doc X - 9830 Her-2 pos X - 9831 Ajcc stg brt ca dx ii or iii X - 9832 Brt ca dx i, no t1/t1a/t1b X - 9838 Pt met dis at dx X - 9840 Kras tst bfr beg anti moab - X 9841 No kras tst bfr beg ant moab - X 9842 Pt met dis at dx X - 9843 Kras gene mut X - 9844 Pt no recd anti-egfr ther X - 9845 Pt recd anti-egfr ther X -	G9820	Doc chlam scr test w/follow	Х	-
9823 Endo smpl/hyst bx res doc	G9821	No doc chlam scr ts w/follow	Х	-
9824 Endo smpl/hyst bx res no doc X - 9830 Her-2 pos X - 9831 Ajcc stg brt ca dx ii or iii X - 9832 Brt ca dx i, no t1/t1a/t1b X - 9838 Pt met dis at dx X - 9839 Anti-egfr mon anti ther X - 9840 Kras tst bfr beg anti moab - X 9841 No kras tst bfr beg ant moab - X 9842 Pt met dis at dx X - 9843 Kras gene mut X - 9844 Pt no recd anti-egfr ther X - 9845 Pt recd anti-egfr ther X -	G9822	Endo abl proc yr prev ind dt	Х	-
9830 Her-2 pos	G9823	Endo smpl/hyst bx res doc	Х	-
9831 Ajcc stg brt ca dx ii or iii X - 9832 Brt ca dx i, no t1/t1a/t1b X - 9838 Pt met dis at dx X - 9839 Anti-egfr mon anti ther X - 9840 Kras tst bfr beg anti moab - X 9841 No kras tst bfr beg ant moab - X 9842 Pt met dis at dx X - 9843 Kras gene mut X - 9844 Pt no recd anti-egfr ther X - 9845 Pt recd anti-egfr ther X -	G9824	Endo smpl/hyst bx res no doc	Х	-
9832 Brt ca dx i, no t1/t1a/t1b X - 9838 Pt met dis at dx X - 9839 Anti-egfr mon anti ther X - 9840 Kras tst bfr beg anti moab - X 9841 No kras tst bfr beg ant moab - X 9842 Pt met dis at dx X - 9843 Kras gene mut X - 9844 Pt no recd anti-egfr ther X - 9845 Pt recd anti-egfr ther X -	G9830	Her-2 pos	Х	-
9838 Pt met dis at dx X - 9839 Anti-egfr mon anti ther X - 9840 Kras tst bfr beg anti moab - X 9841 No kras tst bfr beg ant moab - X 9842 Pt met dis at dx X - 9843 Kras gene mut X - 9844 Pt no recd anti-egfr ther X - 9845 Pt recd anti-egfr ther X -	39831	Ajcc stg brt ca dx ii or iii	Х	-
9839 Anti-egfr mon anti ther X - 9840 Kras tst bfr beg anti moab - X 9841 No kras tst bfr beg ant moab - X 9842 Pt met dis at dx X - 9843 Kras gene mut X - 9844 Pt no recd anti-egfr ther X - 9845 Pt recd anti-egfr ther X -	3 9832	Brt ca dx i, no t1/t1a/t1b	Х	-
9840 Kras tst bfr beg anti moab - X 9841 No kras tst bfr beg ant moab - X 9842 Pt met dis at dx X - 9843 Kras gene mut X - 9844 Pt no recd anti-egfr ther X - 9845 Pt recd anti-egfr ther X -	39838	Pt met dis at dx	Х	-
9841 No kras tst bfr beg ant moab - X 9842 Pt met dis at dx X - 9843 Kras gene mut X - 9844 Pt no recd anti-egfr ther X - 9845 Pt recd anti-egfr ther X -	G9839	Anti-egfr mon anti ther	Х	-
9842 Pt met dis at dx X - 9843 Kras gene mut X - 9844 Pt no recd anti-egfr ther X - 9845 Pt recd anti-egfr ther X -	39840	Kras tst bfr beg anti moab	-	Х
9842 Pt met dis at dx X - 9843 Kras gene mut X - 9844 Pt no recd anti-egfr ther X - 9845 Pt recd anti-egfr ther X -		·	-	Х
9843 Kras gene mut X - 9844 Pt no recd anti-egfr ther X - 9845 Pt recd anti-egfr ther X -			Х	-
9844 Pt no recd anti-egfr ther X - 9845 Pt recd anti-egfr ther X -	G9843	Kras gene mut	Х	-
9845 Pt recd anti-egfr ther X -				-
·			Х	-
		·		-

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		Small Emp	oloyer and Individual
Codes	Description	Not Covered	Preauthorization Required
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G9847	Pt recd chemo last 14d life	Х	-
G9848	Pt no chemo last 14d life	Х	-
G9858	Pt enroll hospice	Х	-
G9859	Pt died from cancer	Х	-
G9860	Pt less 3d hospice	X	-
G9861	Pt more than 3d hospice	Х	-
G9862	Doc rsn no 10 yr follow	Х	-
G9868	Receipt and analysis of remote, asynchronous images for dermatologic and/or ophthalmologic evaluation, for use under the next generation aco model, less than 10 minutes	Х	-
G9869	Receipt and analysis of remote, asynchronous images for dermatologic and/or ophthalmologic evaluation, for use under the next generation aco model, 10-20 minutes	Х	-
G9870	Receipt and analysis of remote, asynchronous images for dermatologic and/or ophthalmologic evaluation, for use under the next generation aco model, 20 or more minutes	Х	-
G9873	1 em core session	Х	-
G9874	4 em core sessions	Х	-
G9875	9 em core sessions	Х	-
G9876	2 em core ms mo 7-9 no wl	Х	-
G9877	2 em core ms mo 10-12 no wl	Х	-
G9878	2 em core ms mo 7-9 wl	Х	-
G9879	2 em core ms mo 10-12 wl	Х	-
G9880	Em 5 percent wl	Х	-
G9881	Em 9 percent wl	Х	-
G9882	2 em ongoing ms mo 13-15 wl	Х	-
G9883	2 em ongoing ms mo 16-18 wl	Х	-
G9884	2 em ongoing ms mo 19-21 wl	Х	-
39885	2 em ongoing ms mo 22-24 wl	Х	-
G9890	Em bridge payment	Х	-
G9891	Em session reporting	Х	-
G9892	Doc pt rsn no dil mac exam	Х	-
G9893	No mac exam	Х	-
G9894	Adr dep thrpy prescribed	Χ	-
39895	Doc med rsn no adr dep thrpy	Х	-

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		Small Employer and Individual	
Codes	Description	Not Covered	Preauthorization Required
	Please note that coverage may vary by plan type and may not follow the listed services. These codes are updated quarterly. Additionally, these coding lists do not re frugs, or specialty medications and should be directed to the Pharmacy link option within the website.	eflect information re	egarding immunizations,
•	Doc pt rsn no adr dep thrpy	Х	-
	Pt nt prsc adr dep thrpy rng	Х	-
G9898	Pt 66+ snp or ltc pos	Х	-
G9899	Scrn mam perf rslts doc	Х	-
G9900	Scrn mam perf rslts not doc	Х	-
G9901	Pt 66+ snp or ltc pos	Х	-
G9902	Pt scrn tbco and id as user	Х	-
G9903	Pt scrn tbco id as non user	Х	-
G9904	Doc med rsn no tbco scrn	Х	-
G9905	No pt tbco scrn rng	Х	-
G9906	Pt recv tbco cess interv	Х	-
39907	Doc med rsn no tbco interv	Х	-
G9908	No pt tbco cess interv rng	Х	-
39909	Doc med rsn no tbco interv	Х	-
39910	Pt 66+ snp or ltc pos	Х	-
G9911	Node neg pre/post syst ther	Х	-
39912	Hbv status assesed and int	Х	-
G9913	No hbv status assesd and int	Х	-
39914	Pt receiving anti-tnf agent	Х	-
G9915	No documntd hbv results rcd	Х	-
G9916	Funct status past 12 months	Х	-
G9917	Adv dem crgvr limited	Х	-
G9918	No funct stat perf, rsn nos	Х	-
G9919	Scrn nd pos nd prov of rec	Х	-
G9920	Scrning perf and negative	Х	-
G9921	No or part scrn nd rng or os	Х	-
39922	Sfty cncrns scrn nd mit recs	Х	-
G9923	Safty cncrns scrn and neg	Х	-
G9925	No scrn prov rsn nos	Х	-
39926	Sfty cncrns scrn but no recs	Х	-
39928	No warf or fda drug presc	Х	-
39929	Trs/rev af	Х	-

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	Small Em	Small Employer and Individual	
Codes Description	Not Covered	Preauthorization Required	
Disclaimer: Please note that coverage may vary by plan type and may not follow the listed services. These codes are updated quarterly. Addition injectable drugs, or specialty medications and should be directed to the Pharmacy link option within the website.	onally, these coding lists do not reflect information r	egarding immunizations,	
G9930 Com care	X	-	
G9931 No chad or chad scr 0 or 1	X	-	
G9932 Doc pt rsn no tb scrn recrds	Х	-	
G9938 Pt 66+ snp or ltc pos	X	-	
G9939 Same path/derm perf biopsy	X	-	
G9940 Doc reas no statin therapy	X	-	
G9942 Adtl spine proc on same date	X	-	
G9943 Bk pn nt msr vas scl pre/pst	X	-	
G9945 Pt w/cancer scoliosis	X	-	
G9946 Bk pain no vas	X	-	
G9949 Leg pain no vas	X	-	
G9954 Pt >2 rsk fac post-op vomit	X	-	
G9955 InhInt anesth only for induc	X	-	
G9956 Combo thrpy of >= 2 prophly	X	-	
G9957 Doc med rsn no combo thrpy	X	-	
G9958 No combo prohpyl thrp for pt	X	-	
Systemic antimicro not presc	X	-	
G9960 Med rsn sys antimi nt rx	X	-	
Systemic antimicro presc	X	-	
G9962 Embolization doc separatly	X	-	
Sepsion Embolization not doc separat	X	-	
G9964 Pt recv >=1 well-chld visit	X	-	
9965 No well-chld vist recv by pt	X	-	
G9968 Pt refrd 2 pvdr/spclst in pp	X	-	
9969 Pvdr rfrd pt rprt rcvd	X	-	
99970 Pvdr rfrd pt no rprt rcvd	X	-	
G9974 Dil mac exam performed	X	-	
G9975 Doc med rsn no mac exm perf	X	-	
G9976 Doc pat rsn no mac exm perf	X	-	
G9977 Dil mac exam no perf rsn nos	X	-	
G9978 Remote e/m new pt 10 mins	X	-	
S9979 Remote e/m new pt 20 mins	Х	-	

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	Small E	
Codes Description	Not Covered	Preauthorization Required
isclaimer: Please note that coverage may vary by plan type and may not follow the listed services. These codes are updated quarterly. Additionall jectable drugs, or specialty medications and should be directed to the Pharmacy link option within the website.	ly, these coding lists do not reflect information re	egarding immunizations,
G9980 Remote e/m new pt 30 mins	Х	_
G9981 Remote e/m new pt 45 mins	X	-
G9982 Remote e/m new pt 60 mins	X	-
G9983 Remote e/m est. pt 10 mins	X	-
G9984 Remote e/m est. pt 15 mins	X	-
G9985 Remote e/m est. pt 25 mins	X	-
G9986 Remote e/m est. pt 40 mins	X	-
G9987 Bpci advanced in home visit	X	-
G9988 Pall serv during meas	X	-
G9989 Med rsn no pneum vax	X	-
G9990 No pneum vax admin 60+	X	-
G9991 Pneum vax admin 60+	X	-
G9992 Pall serv during meas	X	-
9993 Pall serv during meas	X	-
G9994 Pall serv during meas	X	-
G9996 Doc pt pal or hospice	X	-
G9997 Doc pt preg dur msrmt pd	X	-
G9998 Doc med rsn <3 colon	X	-
G9999 Doc sys rsn <3 colon	X	-
H0015 Alcohol and/or drug services	-	Х
H0019 Alcohol and/or drug services	X	-
H0021 Alcohol and/or drug training	X	-
H0022 Alcohol and/or drug interven	X	-
H0023 Alcohol and/or drug outreach	X	-
H0024 Alcohol and/or drug preventi	X	-
H0025 Alcohol and/or drug preventi	X	-
H0026 Alcohol and/or drug preventi	X	-
H0027 Alcohol and/or drug preventi	X	-
H0029 Alcohol and/or drug preventi	X	-
H0030 Alcohol and/or drug hotline	X	-
H0031 Mental health assessment, by non-physician	X	-
H0032 Mental health service plan development by non-physician	X	-

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	·	Small Employer and Individual	
Codes		Not Covered	Preauthorization Required
	Please note that coverage may vary by plan type and may not follow the listed services. These codes are updated quarterly. Additionally, these coding lists do not retrust, or specialty medications and should be directed to the Pharmacy link option within the website.	eflect information re	garding immunizations,
H0034	Medication training and support, per 15 minutes	Х	-
	Mental health partial hospitalization, treatment, less than 24 hours	-	Χ
10036	Community psychiatric supportive treatment, face-to-face, per 15 minutes	Х	-
H0037	Community psychiatric supportive treatment program, per diem	Х	-
H0038	Self-help/peer services, per 15 minutes	X	-
10039	Assertive community treatment, face-to-face, per 15 minutes	Х	-
10040	Assertive community treatment program, per diem	Х	-
10041	Foster care, child, non-therapeutic, per diem	X	-
10042	Foster care, child, non-therapeutic, per month	Х	-
	Supported housing, per diem	X	-
	Supported housing, per month	Х	-
	Respite care services, not in the home, per diem	Х	-
10048	Alcohol and/or other drug testing: collection and handling only, specimensother than blood	Х	-
10049	Alcohol/drug screening	Х	-
10050	Alcohol/drug service 15 min	Х	-
10051	Traditional healing service	Х	-
11000	Prenatal care, at-risk assessment	-	Χ
11001	Prenatal care, at-risk enhanced service; antepartum management	-	Х
11002	Prenatal care, at-risk enhanced service; care coordination	-	X
11003	Prenatal care, at-risk enhanced service; education	Х	-
11004	Prenatal care, at-risk enhanced service; follow-up home visit.	-	X
11005	Prenatal care, at-risk enhanced service package (includes h1001-h1004)	-	Х
11010	Non-medical family planning education, per session	Х	-
11011	Family assessment by licensed behavioral health professional for state definedpurposes	Х	-
12000	Comprehensive multidisciplinary evaluation	Х	-
12001	Rehabilitation program, per 1/2 day	Х	-
	Comprehensive medication services, per 15 minutes	Х	-
12011	Crisis intervention service, per 15 minutes	Х	-
12012	Behavioral health day treatment, per hour		Х
12013	Psychiatric health facility service, per diem	-	Х
	Skills training and development, per 15 minutes	Х	-
12015	Comprehensive community support services, per 15 minutes	Х	-

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	Please note that coverage may vary by plan type and may not follow the listed services. These codes are updated quarterly. Additionally, these coding lists do not re rugs, or specialty medications and should be directed to the Pharmacy link option within the website.	flect information re	egarding immunizations,	
H2016	Comprehensive community support services, per diem	Х	-	
H2017	Psychosocial rehabilitation services, per 15 minutes	Х	-	
H2018	Psychosocial rehabilitation services, per diem	Х	-	
H2019	Therapeutic behavioral services, per 15 minutes	Х	-	
H2020	Therapeutic behavioral services, per diem	Х	-	
H2021	Community-based wrap-around services, per 15 minutes	Х	-	
H2022	Community-based wrap-around services, per diem	Х	-	
H2023	Supported employment, per 15 minutes	Х	-	
H2024	Supported employment, per diem	Х	-	
H2025	Ongoing support to maintain employment, per 15 minutes	Х	-	
H2026	Ongoing support to maintain employment, per diem	Х	-	
12027	Psychoeducational service, per 15 minutes	Х	-	
12028	Sexual offender treatment service, per 15 minutes	Х	-	
12029	Sexual offender treatment service, per diem	Х	-	
H2030	Mental health clubhouse services, per 15 minutes	Х	-	
12031	Mental health clubhouse services, per diem	Х	-	
12032	Activity therapy, per 15 minutes	Х	-	
12033	Multisystemic therapy for juveniles, per 15 minutes	Х	-	
12034	Alcohol and/or drug abuse halfway house services, per diem	Х	-	
H2037	Developmental delay prevention activities, dependent child of client, per 15 minutes	Х	-	
12038	Skill train and dev/diem	Х	-	
12040	Coordinated specialty care, team-based, for first episode psychosis, per month	Х	-	
12041	Coordinated specialty care, team-based, for first episode psychosis, per encounter	Х	-	
<0553	Ther cgm supply allowance	-	Х	
<0554	Ther cgm receiver/monitor	-	Х	
<0606	Automatic external defibrillator, with integrated electrocardiogram analysis, garment type	-	Х	
<0607	Replacement battery for automated external defibrillator, garment type only, each	Х	-	
< 0669	Wheelchair accessory, wheelchair seat or back cushion, does not meet specific code criteria or no written coding verification from dme pdac	-	Х	
K0733	Power wheelchair accessory, 12 to 24 amp hour sealed lead acid battery, each (e.g. gel cell, absorbed glassmat)	-	Х	
K0743	Portable home suction pump	-	Х	
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K0800	Pov group 1 std up to 300 lbs	-	Х	
K0801	Pov group 1 hd 301-450 lbs	-	Х	
K0802	Pov group 1 vhd 451-600 lbs	-	Χ	
K0806	Pov group 2 std up to 300lbs	-	Χ	
K0807	Pov group 2 hd 301-450 lbs	-	Χ	
K0808	Pov group 2 vhd 451-600 lbs	-	Χ	
K0812	Power operated vehicle noc	-	Χ	
K0813	Pwc gp 1 std port seat/back	-	Χ	
< 0814	Pwc gp 1 std port cap chair	-	Χ	
< 0815	Pwc gp 1 std seat/back	-	Х	
K0816	Pwc gp 1 std cap chair	-	Х	
< 0820	Pwc gp 2 std port seat/back	-	Х	
< 0821	Pwc gp 2 std port cap chair	-	Х	
< 0822	Pwc gp 2 std seat/back	-	Х	
< 0823	Pwc gp 2 std cap chair	-	Х	
K0824	Pwc gp 2 hd seat/back	-	Х	
< 0825	Pwc gp 2 hd cap chair	-	Х	
K0826	Pwc gp2 vhd seat/back	-	Х	
K0827	Pwc gp 2 vhd cap chair	-	Х	
< 0828	Pwc gp 2 xtra hd seat/back	-	Х	
(0829	Pwc gp 2 xtra hd cap chair	-	Х	
< 0830	Pwc gp2 std seat elevate s/b	-	Х	
< 0831	Pwc gp2 std seat elevate cap	-	Х	
< 0835	Pwc gp2 std sing pow opt s/b	-	Х	
< 0836	Pwc gp2 std sing pow opt cap	-	Х	
(0837	Pwc gp 2 hd sing pow opt s/b	-	Х	
< 0838	Pwc gp 2 hd sing pow opt cap	-	Х	
< 0839	Pwc gp2 vhd sing pow opt s/b	-	Х	
< 0840	Pwc gp2 xhd sing pow opt s/b	-	Х	
< 0841	Pwc gp2 std mult pow opt s/b	-	Х	
	Pwc gp2 std mult pow opt cap	-	Х	
	Pwc gp2 hd mult pow opt s/b	-	Х	

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	Small Emp	Small Employer and Individual	
Codes Description	Not Covered	Preauthorization Required	
isclaimer. Please note that coverage may vary by plan type and may not follow the listed services. These codes are updated quarterly. Additionally, t jectable drugs, or specialty medications and should be directed to the Pharmacy link option within the website.	these coding lists do not reflect information re	garding immunizations,	
K0848 Pwc gp 3 std seat/back	- 1	Х	
K0849 Pwc gp 3 std cap chair	-	Х	
K0850 Pwc gp 3 hd seat/back	-	Х	
K0851 Pwc gp 3 hd cap chair	-	Х	
K0852 Pwc gp 3 vhd seat/back	-	Х	
K0853 Pwc gp 3 vhd cap chair	-	Х	
K0854 Pwc gp 3 xhd seat/back	-	Х	
K0855 Pwc gp 3 xhd cap chair	-	Х	
(0856 Pwc gp3 std sing pow opt s/b	-	Х	
(0857 Pwc gp3 std sing pow opt cap	-	Х	
K0858 Pwc gp3 hd sing pow opt s/b	-	Х	
(0859 Pwc gp3 hd sing pow opt cap	-	Х	
(0860 Pwc gp3 vhd sing pow opt s/b	-	Х	
(0861 Pwc gp3 std mult pow opt s/b	-	Х	
(0862 Pwc gp3 hd mult pow opt s/b	-	Х	
(0863 Pwc gp3 vhd mult pow opt s/b	-	Х	
(0864 Pwc gp3 xhd mult pow opt s/b	-	Х	
(0868 Pwc gp 4 std seat/back	-	X	
(0869 Pwc gp 4 std cap chair	-	Х	
(0870 Pwc gp 4 hd seat/back	-	Х	
(0871 Pwc gp 4 vhd seat/back	-	Х	
0877 Pwc gp4 std sing pow opt s/b	-	Х	
0878 Pwc gp4 std sing pow opt cap	-	Х	
(0879 Pwc gp4 hd sing pow opt s/b	-	Х	
(0880 Pwc gp4 vhd sing pow opt s/b	-	Х	
0884 Pwc gp4 std mult pow opt s/b	-	Х	
0885 Pwc gp4 std mult pow opt cap	-	Х	
0886 Pwc gp4 hd mult pow s/b	-	Χ	
(0890 Pwc gp5 ped sing pow opt s/b	-	Χ	
0891 Pwc gp5 ped mult pow opt s/b	-	Х	
0898 Power wheelchair noc	-	Х	
0899 Power mobility device, not coded by dme pdac or does not meet criteria	X	-	

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K1004	Lo freq us diathermy device	Х	-	
K1007	Bil hkaf pc s/d micro sensor	Х	-	
K1035	Mol diag reader self-admn	Х	-	
K1036	Supplies and accessories (e.g., transducer) for low frequency ultrasonic diathermy treatment device, per month	Х	-	
K1037	Docking station for use with oral device/appliance used to reduce upper airway collapsibility	Х	-	
L2006	Kaf sng/dbl swg/stn mcpr cus	-	Х	
L3000	Ft insert ucb berkeley shell	Х		
L3001	Foot insert remov molded spe	Х	-	
L3002	Foot insert plastazote or eq	X	-	
L3003	Foot insert silicone gel eac	Х	-	
_3010	Foot longitudinal arch suppo	Х	-	
_3020	Foot longitud/metatarsal sup	Х	-	
L3030	Foot arch support remov prem	Х	-	
L3031	Foot, insert/plate, removable, addition to lower extremity orthosis, high strength	Х	-	
L3040	Ft arch suprt premold longit	Х	-	
L3050	Foot arch supp premold metat	Х	-	
L3060	Foot arch supp longitud/meta	Х	-	
_3070	Arch suprt att to sho longit	Х	-	
_3080	Arch supp att to shoe metata	Х	-	
_3090	Arch supp att to shoe long/m	Х	-	
_3100	Hallus-valgus nght dynamic s	Х	-	
_3201	Oxford w supinat/pronat inf	Х	-	
L3202	Oxford w/ supinat/pronator c	Х	-	
_3203	Oxford w/ supinator/pronator	Х	-	
_3204	Hightop w/ supp/pronator inf	Х	-	
_3206	Hightop w/ supp/pronator chi	Х	-	
_3207	Hightop w/ supp/pronator jun	Х	-	
	Orthopedic ftwear ladies oxf	Х	-	
L3216	Orthoped ladies shoes dpth i	Х	-	
L3217	Ladies shoes hightop depth i	Х	-	
L3219	Orthopedic mens shoes oxford	Х	-	

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•	Orthopedic mens shoes dpth i	Х	
	Mens shoes hightop depth inl	X	-
	Woman's shoe oxford brace	X	
	Man's shoe oxford brace	X	
	Custom shoes depth inlay	X	
	Custom mold shoe remov prost	X	_
	Shoe molded to pt silicone s	X	_
	Shoe molded plastazote cust	X	_
	Shoe molded plastazote cust	X	_
	Orth foot non-stndard size/w	X	-
	Orth foot non-standard size/	X	_
	Orth foot add charge split s	X	_
	Plastazote sandal each	X	-
	Sho lift taper to metatarsal	X	_
	Shoe lift elev heel/sole neo	X	-
L3320	Shoe lift elev heel/sole cor	Х	-
L3330	Lifts elevation metal extens	Х	-
L3332	Shoe lifts tapered to one-ha	Х	-
L3334	Shoe lifts elevation heel /i	Х	-
L3340	Shoe wedge sach	Х	-
L3350	Shoe heel wedge	Х	-
L3360	Shoe sole wedge outside sole	Х	-
L3370	Shoe sole wedge between sole	Х	-
L3380	Shoe clubfoot wedge	Х	-
L3390	Shoe outflare wedge	Х	-
L3400	Shoe metatarsal bar wedge ro	Х	-
L3410	Shoe metatarsal bar between	Х	-
L3420	Full sole/heel wedge btween	Х	-
	Sho heel count plast reinfor	Х	-
L3440	Heel leather reinforced	Х	-
L3450	Shoe heel sach cushion type	Х	-
L3455	Shoe heel new leather standa	Х	-

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L3460	Shoe heel new rubber standar	Х	-	
L3465	Shoe heel thomas with wedge	Х	-	
L3470	Shoe heel thomas extend to b	Х	-	
L3480	Shoe heel pad & depress for	Х	-	
L3485	Shoe heel pad removable for	Х	-	
L3500	Ortho shoe add leather insol	Х	-	
L3510	Orthopedic shoe add rub insl	Х	-	
L3520	O shoe add felt w leath insl	Х	-	
L3530	Ortho shoe add half sole	Х	-	
L3540	Ortho shoe add full sole	Х	-	
L3550	O shoe add standard toe tap	Х	-	
L3560	O shoe add horseshoe toe tap	Х	-	
L3570	O shoe add instep extension	Х	-	
L3580	O shoe add instep velcro clo	Х	-	
L3590	O shoe convert to sof counte	Х	-	
L3595	Ortho shoe add march bar	Х	-	
L3600	Trans shoe calip plate exist	Х	-	
L3610	Trans shoe caliper plate new	Х	-	
L3620	Trans shoe solid stirrup exi	Х	-	
L3630	Trans shoe solid stirrup new	X	-	
L3640	Shoe dennis browne splint bo	X	-	
L5010	Mold socket ank hgt w/ toe f	-	Χ	
L5020	Tibial tubercle hgt w/ toe f	-	Χ	
L5050	Ank symes mold sckt sach ft	-	Χ	
L5060	Symes met fr leath socket ar	-	Χ	
L5100	Molded socket shin sach foot	-	Χ	
	Plast socket jts/thgh lacer	-	Χ	
	Mold sckt ext knee shin sach	-	Χ	
L5160	Mold socket bent knee shin s	-	Χ	
L5200	Kne sing axis fric shin sach	-	Χ	
L5210	No knee/ankle joints w/ ft b	Х	-	
L5220	No knee joint with artic ali	Х	-	

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L5230	Fem focal defic constant fri	X	-	
L5250	Hip canad sing axi cons fric	-	Х	
L5260	Ankle, Symes, metal frame, molded leather socket, articulated ankle/foot	Х	-	
L5270	Tilt table locking hip sing	-	Х	
L5280	Hemipelvect canad sing axis	-	Х	
L5301	Below knee, molded socket, shin, sach foot, endoskeletal system	-	X	
L5312	Knee disarticulation (or through knee), molded socket, single axis knee, pylon, sach foot, endoskeletal system	-	X	
L5321	Above knee, molded socket, open end, sach foot, endoskeletal system, single axis knee	-	Χ	
L5331	Hip disarticulation, canadian type, molded socket, endoskeletal system, hip joint, single axis knee, sach foot	-	Χ	
L5341	Hemipelvectomy, canadian type, molded socket, endoskeletal system, hip joint, single axis knee, sach foot	-	X	
L5400	Postop dress & 1 cast chg bk	-	X	
L5410	Postop dsg bk ea add cast ch	-	Х	
L5420	Postop dsg & 1 cast chg ak/d	-	X	
L5430	Postop dsg ak ea add cast ch	-	Χ	
L5450	Postop app non-wgt bear dsg	-	X	
L5460	Postop app non-wgt bear dsg	-	Χ	
L5500	Init bk ptb plaster direct	-	Χ	
L5505	Init ak ischal plstr direct	-	Χ	
L5510	Prep bk ptb plaster molded	-	Χ	
	Perp bk ptb thermopls direct	-	Χ	
L5530	Prep bk ptb thermopls molded	-	Χ	
L5535	Prep bk ptb open end socket	-	Χ	
L5540	Prep bk ptb laminated socket	-	Χ	
L5560	Prep ak ischial plast molded	-	Χ	
	Prep ak ischial direct form	-	Χ	
L5580	Prep ak ischial thermo mold	-	Χ	
	Prep ak ischial open end	-	Χ	
	Prep ak ischial laminated	-	Χ	
	Hip disartic sach thermopls	-	Χ	
L5600	Hip disart sach laminat mold	-	Χ	

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L5610	Above knee hydracadence	-	X		
L5611	Ak 4 bar link w/fric swing	-	Χ		
L5613	Ak 4 bar ling w/hydraul swig	-	Χ		
L5614	4-bar link above knee w/swng	-	Χ		
L5615	Addition, endoskeletal knee-shin system, 4 bar linkage or multiaxial, fluid swing and stance phase control	-	Х		
L5616	Ak univ multiplex sys frict	-	Х		
L5617	Ak/bk self-aligning unit ea	-	Х		
L5618	Test socket symes	-	Х		
L5620	Test socket below knee	-	Х		
L5622	Test socket knee disarticula	-	X		
L5624	Test socket above knee	-	Х		
L5626	Test socket hip disarticulat	-	Χ		
L5628	Test socket hemipelvectomy	-	Х		
L5629	Below knee acrylic socket	-	Х		
L5630	Syme typ expandabl wall sckt	-	Х		
L5631	Ak/knee disartic acrylic soc	-	Х		
L5632	Symes type ptb brim design s	-	Х		
L5634	Symes type poster opening so	-	Х		
L5636	Symes type medial opening so	-	Х		
L5637	Below knee total contact	-	Х		
L5638	Below knee leather socket	-	Х		
L5639	Below knee wood socket	-	Х		
L5640	Knee disarticulat leather so	-	X		
L5642	Above knee leather socket	-	Х		
L5643	Hip flex inner socket ext fr	-	Х		
L5644	Above knee wood socket	-	Х		
L5645	Bk flex inner socket ext frame	-	Х		
L5646	Below knee air cushion socke	-	Х		
L5647	Below knee suction socket	-	Χ		
L5648	Above knee air cushion socke	-	Χ		
L5649	Isch containmt/narrow m-l so	-	Χ		
L5650	Tot contact ak/knee disart s	-	Х		

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L5651	Ak flex inner socket ext fra	-	Х	
L5652	Suction susp ak/knee disart	-	Χ	
L5653	Knee disart expand wall sock	-	Χ	
L5654	Socket insert symes	-	X	
L5655	Socket insert below knee	-	Х	
L5656	Socket insert knee articulat	-	X	
L5658	Socket insert above knee	-	Х	
L5661	Multi-durometer symes	-	Х	
_5665	Multi-durometer below knee	-	Х	
_5666	Below knee cuff suspension	-	Х	
_5668	Socket insert w/o lock lower	-	Х	
_5670	Bk molded supracondylar susp	-	X	
_5671	Addition lower extremity, below knee/above knee suspension locking mechanism (shuttle, lanyard or equal),		V	
	includes socke	- 1	Х	
L5672	Bk removable medial brim sus	-	Х	
_5673	Addition to lower extremity, below knee/above knee, custom fabricated	-	Х	
_5676	Bk knee joints single axis p	-	Х	
_5677	Bk knee joints polycentric p	-	Х	
_5678	Bk joint covers pair	-	Х	
_5679	Addition to lower extremity, below knee/above knee, custom fabricated	-	Х	
5680	Bk thigh lacer non-molded	-	Χ	
5681	Addition to lower extremity, below knee/above knee, custom fabricated socket insert	-	Х	
-5682	Bk thigh lacer glut/ischia m	-	Χ	
5683	Addition to lower extremity, below knee/above knee, custom fabricated socket insert	-	Χ	
_5684	Bk fork strap	-	Χ	
5686	Bk back check	-	Χ	
5688	Bk waist belt webbing	-	Χ	
_5690	Bk waist belt padded and lin	-	Х	
5692	Ak pelvic control belt light	-	Х	
-5694	Ak pelvic control belt pad/l	-	Х	
5695	Ak sleeve susp neoprene/equa	-	Х	
5696	Ak/knee disartic pelvic join	-	Х	

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L5697	Ak/knee disartic pelvic band	-	Х
L5698	Ak/knee disartic silesian ba	-	X
L5699	Shoulder harness	-	X
L5700	Replace socket below knee	-	Χ
_5701	Replace socket above knee	-	Χ
_5702	Replace socket hip	-	Χ
L5703	Ankle, symes, molded to patient model, socket without solid ankle cushion heel (sach) fott, replacement only	-	Х
	Custom shape covr below knee	-	X
	Custm shape cover above knee	-	Χ
	Custm shape cvr knee disart	-	Χ
	Custm shape cover hip disart	-	Χ
	Kne-shin exo sng axi mnl loc	-	Χ
	Knee-shin exo mnl lock ultra	-	Χ
_5712	Knee-shin exo frict swg & st	-	Χ
_5714	Knee-shin exo variable frict	-	Χ
_5716	Knee-shin exo mech stance ph	-	Χ
	Knee-shin exo frct swg & sta	-	Χ
	Knee-shin pneum swg frct exo	-	Χ
_5724	Knee-shin exo fluid swing ph	-	Χ
	Knee-shin ext jnts fld swg e	-	Χ
	Knee-shin fluid swg & stance	-	Χ
_5780	Knee-shin pneum/hydra pneum	-	Χ
_5781	Addition to lower limb prosthesis, vacuum pump, residual limb volume managementand moisture evacuation system	-	Х
5782	Addition to lower limb prosthesis, vacuum pump, residual limb volume managementand moisture evacuation system, heavy dut	-	Х
5783	Addition to lower extremity, user adjustable, mechanical, residual limb volume management system	-	Χ
	Exoskeletal bk ultralt mater	-	Х
5790	Exoskeletal ak ultra-light m	-	Х
	Exoskel hip ultra-light mate	-	Х
_5810	Endoskel knee-shin mnl lock	-	Х

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L5811	Endo knee-shin mnl lck ultra	-	Х
L5812	Endo knee-shin frct swg & st	-	Χ
_5814	Endo knee-shin hydral swg ph	-	Χ
_5816	Endo knee-shin polyc mch sta	-	Χ
_5818	Endo knee-shin frct swg & st	-	Χ
5822	Endo knee-shin pneum swg frc	-	Χ
5824	Endo knee-shin fluid swing p	-	Χ
5826	Miniature knee joint	-	Χ
5828	Endo knee-shin fluid swg/sta	-	Χ
5830	Endo knee-shin pneum/swg pha	-	X
5840	Multi-axial knee/shin system	-	Χ
.5841	Addition, endoskeletal knee-shin system, polycentric, pneumatic swing, and stance phase control	-	Χ
.5845	Knee-shin sys stance flexion	-	Χ
5848	Addition to endoskeletal, knee-shin system, hydraulic stance extension,dampening feature, adjustable	-	Χ
5850	Endo ak/hip knee extens assi	-	Χ
-5855	Mech hip extension assist	-	Χ
5856	Elec knee-shin swing/stance	-	Χ
.5857	Elec knee-shin swing only	-	Χ
-5858	Addition to lower extremity prosthesis, endoskeletal knee shin system, microprocessor control feature, stance phase only	-	Х
.5910	Endo below knee alignable sy	-	Х
5920	Endo ak/hip alignable system	-	Х
5925	Above knee manual lock	-	Х
5926	Addition to lower extremity prosthesis, endoskeletal, knee disarticulation, above knee, hip disarticulation,		V
	positional rotation unit, any type	- 1	Х
.5930	High activity knee frame	-	Х
5940	Endo bk ultra-light material	-	Х
5950	Endo ak ultra-light material	-	Х
5960	Endo hip ultra-light materia	-	Х
5962	Below knee flex cover system	-	Х
5964	Above knee flex cover system		Х
.5966	Hip flexible cover system	-	Х

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L5968	Multiaxial ankle w dorsiflex	-	Х
L5970	Foot external keel sach foot	-	Х
L5971	All lower extremity prosthesis, solid ankle cushion heel (sach) foot, replacement only	-	Χ
L5972	Flexible keel foot	-	Х
	Endoskeletal ankle foot system, microprocessor controlled feature, dorsiflexion and/or plantar flexion control, includes	-	Х
L5974	Foot single axis ankle/foot	-	X
L5975	Combo ankle/foot prosthesis	-	Х
L5976	Energy storing foot	-	Х
L5978	Ft prosth multiaxial ankl/ft	-	Χ
L5979	Multi-axial ankle/ft prosth	-	Χ
L5980	Flex foot system	-	X
L5981	Flex-walk sys low ext prosth	-	Χ
L5982	Exoskeletal axial rotation u	-	Χ
L5984	Endoskeletal axial rotation	-	Χ
L5985	Lwr ext dynamic prosth pylon	-	Х
L5986	Multi-axial rotation unit	-	Χ
L5987	Shank ft w vert load pylon	-	Χ
L5988	Vertical shock reducing pylo	-	Χ
	Addition to lower extremity prosthesis, user adjustable heel height	-	Χ
L5991	Addition to lower extremity prostheses, osseointegrated external prosthetic connector	-	Χ
	Partial hand, thumb remaining	-	Χ
L6010	Partial hand, little and/or ring finger remaining	-	Χ
L6020	Partial hand, no finger remaining	-	Χ
L6050	Wrst mld sck flx hng tri pad	-	Χ
L6055	Wrst mold sock w/exp interfa	-	Χ
L6100	Elb mold sock flex hinge pad	-	Χ
L6110	Elbow mold sock suspension t	-	Х
L6120	Elbow mold doub splt soc ste	-	Χ
L6130	Elbow stump activated lock h	-	Х
L6200	Elbow mold outsid lock hinge	-	Х
L6205	Elbow molded w/ expand inter	-	Х

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	rugs, or specialty medications and should be directed to the Pharmacy link option within the website.		garanig illinanizatione,
L6250	Elbow inter loc elbow forarm	-	Х
L6300	Shider disart int lock elbow	-	X
L6310	Shoulder passive restor comp	-	Х
L6320	Shoulder passive restor cap	-	Х
L6350	Thoracic intern lock elbow	-	Χ
L6360	Thoracic passive restor comp	-	Χ
L6370	Thoracic passive restor cap	-	Χ
L6380	Postop dsg cast chg wrst/elb	-	Χ
L6382	Postop dsg cast chg elb dis/	-	Χ
L6384	Postop dsg cast chg shlder/t	-	Χ
L6386	Postop ea cast chg & realign	-	Χ
_6388	Postop applicat rigid dsg on	-	Х
L6400	Below elbow prosth tiss shap	-	Χ
_6450	Elb disart prosth tiss shap	-	Х
L6500	Above elbow prosth tiss shap	-	X
L6550	Shldr disar prosth tiss shap	-	Х
L6570	Scap thorac prosth tiss shap	-	Х
L6580	Wrist/elbow bowden cable mol	-	Х
L6582	Wrist/elbow bowden cbl dir f	-	Х
_6584	Elbow fair lead cable molded	-	Х
_6586	Elbow fair lead cable dir fo	-	Х
_6588	Shdr fair lead cable molded	-	Х
_6590	Shdr fair lead cable direct	-	Х
_6600	Polycentric hinge pair	-	Х
L6605	Single pivot hinge pair	-	Х
_6610	Flexible metal hinge pair	-	Х
L6611	Addition to upper extremity prosthesis, external powered, additional switch, any type	-	Х
L6615	Disconnect locking wrist uni	-	Х
L6616	Disconnect insert locking wr	-	X
L6620	Flexion-friction wrist unit	-	Χ
L6621	Upper extremity prosthesis addition, flexion/extension wrist with or without friction, for use with external powered ter	-	Х

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Codes		Not Covered	Preauthorization Required
	at coverage may vary by plan type and may not follow the listed services. These codes are updated quarterly. Additionally, these coding lists do not re Ity medications and should be directed to the Pharmacy link option within the website.	flect information re	
L6623 Spring-as	s rot wrst w/ latch	-	Χ
L6624 Upper ext	remity addition, flexion/extension and rotation wrist unit	-	Х
L6625 Rotation v	vrst w/ cable lock	-	Х
L6628 Quick disc	conn hook adapter o	-	Х
L6629 Laminatio	n collar w/ couplin	-	Х
_6630 Stainless	steel any wrist	-	Х
_6632 Latex sus	pension sleeve each	-	Х
_6635 Lift assist	for elbow	-	Х
_6637 Nudge co	ntrol elbow lock	-	Х
_6638 Upper ext	remity addition to prosthesis, electric locking feature, only for usewith manually powered elbow	-	Х
_6640 Shoulder	abduction joint pai	-	Х
_6641 Excursion	amplifier pulley t	-	Х
_6642 Excursion	amplifier lever ty	-	Х
_6645 Shoulder	flexion-abduction j	-	Х
_6646			Х
Upper ext	remity addition, shoulder joint, multipositional locking, flexion,adjustable abduction friction control, for us	-	^
_6647 Upper ext	remity addition, shoulder lock mechanism, body powered actuator	-	Χ
_6648 Upper ext	remity addition, shoulder lock mechanism, external powered actuator	-	Х
L6650 Shoulder	universal joint	-	Χ
_6655 Standard	control cable extra	-	Х
_6660 Heavy dut	ty control cable	-	Χ
_6665 Teflon or	equal cable lining	-	Х
_6670 Hook to h	and cable adapter	-	Χ
_6672 Harness of	chest/shider saddle	-	Χ
_6675 Harness f	igure of 8 sing con	-	Χ
_6676 Harness f	igure of 8 dual con	-	Χ
_6677 Upper ext	remity addition, harness, triple control, simultaneous operation of terminal device and elbow	-	Х
L6680 Test sock	wrist disart/bel e	-	Х
L6682 Test sock	elbw disart/above	_	Х
L6684 Test sock	et shldr disart/tho	-	X
L6686 Suction so	ocket	_	Х
_6687 Frame typ	socket bel elbow/w	-	Х

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L6688	Frame typ sock above elb/dis	-	Х
_6689	Frame typ socket shoulder di	-	Χ
6690	Frame typ sock interscap-tho	-	Χ
.6691	Removable insert each	-	Χ
6692	Silicone gel insert or equal	-	Χ
.6693	Lockingelbow forearm cntrbal	-	X
.6694	Elbow socket ins use w/lock	-	Χ
.6695	Elbow socket ins use w/o lck	-	X
.6696	Cus elbo skt in for con/atyp	-	Χ
.6697	Cus elbo skt in not con/atyp	-	Χ
.6698	Below/above elbow lock mech	-	Χ
6703	Terminal device, passive hand/mitt, any material, any size	-	Χ
6704	Terminal device, sport/recreational/work attachment, any material, any size	-	Χ
.6706	Terminal device, hook, mechanical, voluntary opening, any material, any size, lined or unlined	-	Χ
6707	Terminal device, hook, mechanical, voluntary closing, any material, any size, lined or unlined	-	Χ
6708	Terminal device, hand, mechanical, voluntary opening, any material, any size	-	Χ
6709	Terminal device, hand, mechanical, voluntary closing, any material, any size	-	Χ
6711	Terminal device, hook, mechanical, voluntary opening, any material, any size, 'lined or unlined, pediatric	-	Χ
6712	Terminal device, hook, mechanical, voluntary closing, any material, any size, lined or unlined, pediatric	-	Х
.6713	Terminal device, hand, mechanical, voluntary opening, any material, any size, pediatric	-	Χ
6714	Terminal device, hand, mechanical, voluntary closing, any material, any size, pediatric	-	Χ
.6721	Terminal device, hook or hand, heavy duty, mechanical, voluntary opening, any 'material, any size, lined or unlined	-	Х
.6722	Terminal device, hook or hand, heavy duty, mechanical, voluntary closing, any 'material, any size, lined or unlined	-	Х
6805	Modifier wrist flexion unit	-	X
6810	Pincher tool otto bock or eq	-	Χ
.6880	Electric hand, switch or myoelectric controlled, independently articulating digits, any grasp pattern or combination of grasp patterns, includes motor(s)	-	Х
6882	Microprocessor control feature, addition to upper limb prosthesis terminal device	-	Х
	Replacement socket, below elbow/wrist disarticulation, molded to patient model, for use with or without external power	-	Х

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Required release note that coverage may vary by plan type and may not follow the listed services. These codes are updated quarterly. Additionally, these coding fields do not reflect information regarding immunication citable drugs, or specially medications and should be directed to the Pharmacy link option within the website. Replacement socket, above elibow disarticulation, molded to patient model, for use with or without external power Replacement socket, shoulder disarticulation/interscapular thoracic, molded to patient model, for use with or without external power Replacement socket, shoulder disarticulation/interscapular thoracic, molded to patient model, for use with or without external power - X Replacement socket, above elibow disarticulation/interscapular thoracic, molded to patient model, for use with or without external power - X Replacement socket, above elibow disarticulation/interscapular thoracic, molded to patient model, for use with or without external power - X Replacement socket, above elibow disarticulation/interscapular thoracic, molded to patient model, for use with or without external power without external power - X Replacement socket, above elibow disarticulation glove - X Substance - X Replacement socket, above elibow disarticulation for a X Replacement socket, above elibow disarticulation for a X Replacement socket, above elibow multiple fire - X Replacement socket, above elibow fire fire fire fire fire fire fire fire			Small Employer and Individual		
Replacement socket, above elbow disarticulation, molded to patient model, for use with or without external power with external power without external power without external power without external power with external	Codes	Description	Not Covered	Preauthorization Required	
Replacement socket, above elbow disarticulation, molded to patient model, for use with or without external power without external power without ex with ex without ex without ex with ex without ex without ex without ex with ex with ex without ex with ex without ex with ex with ex without ex with			flect information re	egarding immunizations,	
without ex without ex 6899 (Production glove) - X 6895 (Custom glove) - X 6900 (Hand restoration multiple files) - X 6910 (Hand restoration no fingers) - X 6915 (Hand restoration replacming) - X 6916 (Hand restoration replacming) - X 6917 (Hand restoration replacming) - X 6918 (Hand restoration replacming) - X 6920 (Wrist disarticul switch ctrl - X 6921 (Wrist disart myoelectronic c - X 6930 (Below elbow myoelectronic ct - X 6931 (Below disarticulation switch - X 6945 (Elbow disarticulation switch control - X 6945 (Elbow disarticulation switch control - X 6955 (Above elbow myoelectronic ct - X 6955 (Above elbow myoelectronic ct - X 6965 (Shifd disartic witch control - X 6975 (Interscap-thor myoelectronic - X	L6884	Replacement socket, above elbow disarticulation, molded to patient model, for use with or without external power	-	Х	
Custom glove -	L6885		-	Х	
Hand restorat thumb/1 finger	L6890	Production glove	-	Х	
Hand restoration multiple fi	L6895	Custom glove	-	Х	
6910 Hand restoration no fingers - X 6915 Hand restoration replacmnt g - X 6920 Wrist disarticul switch ctrl - X 6920 Wrist disart myoelectronic c - X 6930 Below elbow switch control - X 6930 Below elbow myoelectronic ct - X 6940 Elbow disart myoelectronic c - X 6940 Elbow disarticulation switch - X 6945 Elbow disart myoelectronic c - X 6945 Elbow disart myoelectronic ct - X 6955 Above elbow switch contro - X 6955 Shldr disartic switch contro - X 6965 Shldr disartic myoelectronic - X 6975 Interscapular-thor switch ct - X 6975 Interscap-thor myoelectronic - X 7004 Electric hand, switch or myoelectronic - X 7045	L6900	Hand restorat thumb/1 finger	-	Χ	
Hand restoration replacement g	L6905	Hand restoration multiple fi	-	Χ	
6920 Wrist disarticul switch ctrl - X 6925 Wrist disart myoelectronic c - X 6930 Below elbow switch control - X 6935 Below elbow myoelectronic ct - X 6940 Elbow disart myoelectronic c - X 6945 Elbow disart myoelectronic c - X 6950 Above elbow switch control - X 6955 Above elbow myoelectronic ct - X 6960 Shldr disartic switch contro - X 6970 Interscapular-thor switch ct - X 6975 Interscap-thor myoelectronic - X 7008 Electric hand, switch or myoelectronic - X 7040 Prehensile actuator hosmer s - X 7045 Electron hook child michigan - X 7170 Electronic elbow utah myoele - X 7181 Electronic elbow utah myoele - X 7185	L6910	Hand restoration no fingers	-	X	
6925 Wrist disart myoelectronic c - X 6930 Below elbow switch control - X 6935 Below elbow myoelectronic ct - X 6940 Elbow disart myoelectronic c - X 6945 Elbow disart myoelectronic c - X 6950 Above elbow switch control - X 6955 Above elbow myoelectronic ct - X 6960 Shldr disartic switch contro - X 6965 Shldr disartic myoelectronic - X 6975 Interscap-thor switch ct - X 6975 Interscap-thor myoelectronic - X 7008 Electric hand, switch or myoelectric, controlled, pediatric X - 7040 Prehensile actuator hosmer s - X 7045 Electron hook child michigan - X 7170 Electronic elbow hosmer swit - X 7181 Electronic elbow utah myoele - X	L6915	Hand restoration replacmnt g	-	Х	
6930 Below elbow switch control - X 6935 Below elbow myoelectronic ct - X 6940 Elbow disart invoelectronic c - X 6945 Elbow disart myoelectronic c - X 6950 Above elbow switch control - X 6955 Above elbow myoelectronic ct - X 6960 Shldr disartic switch contro - X 6955 Shldr disartic myoelectronic - X 6960 Shldr disartic myoelectronic - X 6970 Interscapular-thor switch ct - X 6975 Interscap-thor myoelectronic - X 7008 Electric hand, switch or myoelectric, controlled, pediatric X - 7040 Prehensile actuator hosmer s - X 7045 Electron hook child michigan - X 7170 Electronic elbow hosmer swit - X 7180 Electronic elbow utah myoele - X	L6920	Wrist disarticul switch ctrl	-	X	
6935 Below elbow myoelectronic ct - X 6940 Elbow disarticulation switch - X 6945 Elbow disart myoelectronic c - X 6950 Above elbow switch control - X 6955 Above elbow myoelectronic ct - X 6960 Shldr disartic switch contro - X 6955 Shldr disartic myoelectronic - X 6970 Interscapular-thor switch ct - X 6975 Interscap-thor myoelectronic - X 7008 Electric hand, switch or myoelectric, controlled, pediatric X - 7040 Prehensile actuator hosmer s - X 7045 Electron hook child michigan - X 7170 Electronic elbow hosmer swit - X 7180 Electronic elbow utah myoele - X 7181 Electronic elbow adolescent sw - X 7186 Electron elbow child switch - X	L6925	Wrist disart myoelectronic c	-	Χ	
6940 Elbow disarticulation switch - X 6945 Elbow disart myoelectronic c - X 6950 Above elbow switch control - X 6955 Above elbow myoelectronic ct - X 6960 Shldr disartic switch contro - X 6965 Shldr disartic myoelectronic - X 6970 Interscapular-thor switch ct - X 6971 Interscap-thor myoelectronic - X 7008 Electric hand, switch or myoelectric, controlled, pediatric X - 7040 Prehensile actuator hosmer s - X 7045 Electron hook child michigan - X 7170 Electronic elbow hosmer swit - X 7180 Electronic elbow utah myoele - X 7181 Electronic elbow utah myoele - X 7185 Electron elbow adolescent sw - X 7186 Electron elbow child switch - X 7190 Elbow adolescent myoelectron - X	L6930	Below elbow switch control	-	Χ	
6945 Elbow disart myoelectronic c - X 6950 Above elbow switch control - X 6955 Above elbow myoelectronic ct - X 6960 Shldr disartic switch contro - X 6965 Shldr disartic myoelectronic - X 6970 Interscapular-thor switch ct - X 6975 Interscap-thor myoelectronic - X 7008 Electric hand, switch or myoelectric, controlled, pediatric X - 7040 Prehensile actuator hosmer s - X 7045 Electron hook child michigan - X 7170 Electronic elbow hosmer swit - X 7180 Electronic elbow utah myoele - X 7181 Electronic elbos simultaneous - X 7185 Electron elbow adolescent sw - X 7180 Electron elbow child switch - X 7180 Electron elbow adolescent sw - X	L6935	Below elbow myoelectronic ct	-	Χ	
6950 Above elbow switch control - X 6955 Above elbow myoelectronic ct - X 6960 Shldr disartic switch contro - X 6965 Shldr disartic myoelectronic - X 6970 Interscapular-thor switch ct - X 6975 Interscap-thor myoelectronic - X 7008 Electric hand, switch or myoelectric, controlled, pediatric X - 7040 Prehensile actuator hosmer s - X 7045 Electron hook child michigan - X 7170 Electronic elbow hosmer swit - X 7180 Electronic elbow utah myoele - X 7181 Electronic elbow adolescent sw - X 7185 Electron elbow child switch - X 7190 Elbow adolescent myoelectron - X	L6940	Elbow disarticulation switch	-	Χ	
6955 Above elbow myoelectronic ct - X 6960 Shldr disartic switch contro - X 6965 Shldr disartic myoelectronic - X 6970 Interscapular-thor switch ct - X 6975 Interscap-thor myoelectronic - X 7008 Electric hand, switch or myoelectric, controlled, pediatric X - 7040 Prehensile actuator hosmer s - X 7045 Electron hook child michigan - X 7170 Electronic elbow hosmer swit - X 7180 Electronic elbow utah myoele - X 7181 Electronic elbow simultaneous - X 7185 Electron elbow adolescent sw - X 7186 Electron elbow child switch - X 7190 Elbow adolescent myoelectron - X	L6945	Elbow disart myoelectronic c	-	Х	
6960 Shldr disartic switch contro - X 6965 Shldr disartic myoelectronic - X 6970 Interscapular-thor switch ct - X 6975 Interscap-thor myoelectronic - X 7008 Electric hand, switch or myoelectric, controlled, pediatric X - 7040 Prehensile actuator hosmer s - X 7045 Electron hook child michigan - X 7170 Electronic elbow hosmer swit - X 7180 Electronic elbow utah myoele - X 7181 Electronic elbos simultaneous - X 7185 Electron elbow adolescent sw - X 7186 Electron elbow child switch - X 7190 Elbow adolescent myoelectron - X	L6950	Above elbow switch control	-	X	
6965 Shldr disartic myoelectronic - X 6970 Interscapular-thor switch ct - X 6975 Interscap-thor myoelectronic - X 7008 Electric hand, switch or myoelectric, controlled, pediatric X - 7040 Prehensile actuator hosmer s - X 7045 Electron hook child michigan - X 7170 Electronic elbow hosmer swit - X 7180 Electronic elbow utah myoele - X 7181 Electronic elbos simultaneous - X 7185 Electron elbow adolescent sw - X 7186 Electron elbow child switch - X 7190 Elbow adolescent myoelectron - X	L6955	Above elbow myoelectronic ct	-	X	
6970 Interscapular-thor switch ct - X 6975 Interscap-thor myoelectronic - X 7008 Electric hand, switch or myoelectric, controlled, pediatric X - 7040 Prehensile actuator hosmer s - X 7045 Electron hook child michigan - X 7170 Electronic elbow hosmer swit - X 7180 Electronic elbow utah myoele - X 7181 Electronic elbow simultaneous - X 7185 Electron elbow adolescent sw - X 7186 Electron elbow child switch - X 7190 Elbow adolescent myoelectron - X	L6960	Shldr disartic switch contro	-	Х	
Interscap-thor myoelectronic Tools Electric hand, switch or myoelectric, controlled, pediatric Tournows Electron hook child michigan Electron hook child michigan Electronic elbow hosmer swit Electronic elbow utah myoele Electronic elbow utah myoele Electronic elbos simultaneous Electron elbow adolescent sw Electron elbow child switch Electron elbow child switch Electron elbow adolescent myoelectron Elbow adolescent myoelectron Elbow adolescent myoelectron	L6965	Shldr disartic myoelectronic	-	Х	
From Electric hand, switch or myoelectric, controlled, pediatric X - 7040 Prehensile actuator hosmer s Electron hook child michigan - X 7170 Electronic elbow hosmer swit Flectronic elbow utah myoele Electronic elbow utah myoele This Electronic elbo simultaneous Flectron elbow adolescent sw Flectron elbow child switch Electron elbow child switch Electron elbow adolescent myoelectron Elbow adolescent myoelectron X - X X X X X X X X X X X	L6970	Interscapular-thor switch ct	-	Х	
7040 Prehensile actuator hosmer s 7045 Electron hook child michigan 7170 Electronic elbow hosmer swit 7180 Electronic elbow utah myoele 7181 Electronic elbo simultaneous 7185 Electron elbow adolescent sw 7186 Electron elbow child switch 7190 Elbow adolescent myoelectron 7190 Elbow adolescent myoelectron	L6975	Interscap-thor myoelectronic	-	X	
7045 Electron hook child michigan 7170 Electronic elbow hosmer swit 7180 Electronic elbow utah myoele 7181 Electronic elbo simultaneous 7185 Electron elbow adolescent sw 7186 Electron elbow child switch 7190 Elbow adolescent myoelectron 720	L7008	Electric hand, switch or myoelectric, controlled, pediatric	Х	-	
7170 Electronic elbow hosmer swit 7180 Electronic elbow utah myoele 7181 Electronic elbo simultaneous 7185 Electron elbow adolescent sw 7186 Electron elbow child switch 7190 Elbow adolescent myoelectron 7190 Elbow adolescent myoelectron 7180 Electron elbow child switch 7180 Electron elbow child switch 7180 Electron elbow child switch 7180 Elbow adolescent myoelectron 7180 Elbow adolescent myoelectron 7180 Elbow adolescent myoelectron 7180 Elbow adolescent myoelectron 7180 Electronic elbow utah myoelectron 7180 Electronic elbow adolescent sw	L7040	Prehensile actuator hosmer s	-	Х	
7180 Electronic elbow utah myoele 7181 Electronic elbo simultaneous 7185 Electron elbow adolescent sw 7186 Electron elbow child switch 7190 Elbow adolescent myoelectron 7180 Electron elbow thild switch 7180 Electron elbow child switch 7180 Elbow adolescent myoelectron 7180 Elbow adolescent myoelectron 7180 Electronic elbow utah myoele 7181 Electronic elbow adolescent sw 7185 Electron elbow adolescent sw 7186 Electron elbow child switch 7186 Electron elbow child switch 7187 Electronic elbow utah myoele 7180 Electronic elbow adolescent sw 7180 Electron elbow adolescent sw 7180 Electron elbow child switch 7180 Electron elbow child switch 7180 Electron elbow adolescent myoelectron	L7045	Electron hook child michigan	-	Х	
7181 Electronic elbo simultaneous 7185 Electron elbow adolescent sw 7186 Electron elbow child switch 7190 Elbow adolescent myoelectron - X X X	L7170	Electronic elbow hosmer swit	-	Х	
7185 Electron elbow adolescent sw - X 7186 Electron elbow child switch - X 7190 Elbow adolescent myoelectron - X	L7180	Electronic elbow utah myoele	-	Χ	
7186 Electron elbow child switch - X 7190 Elbow adolescent myoelectron - X	L7181	Electronic elbo simultaneous	-	X	
7190 Elbow adolescent myoelectron - X	L7185	Electron elbow adolescent sw	-	Χ	
,	L7186	Electron elbow child switch	-	Χ	
7191 Elbow child myoelectronic ct - X	L7190	Elbow adolescent myoelectron	-	Χ	
	L7191	Elbow child myoelectronic ct	-	Х	

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L7360	Six volt bat otto bock/eq ea	Х	-	
L7362	Battery chrgr six volt otto	Х	-	
L7364	Twelve volt battery utah/equ	Х	-	
L7366	Battery chrgr 12 volt utah/e	Х	-	
L7367	Lithium ion battery, replacement	Х	-	
_7368	Lithium ion battery charger, replacement only	Х	-	
L7400	Addition to upper extremity prosthesis, below elbow/wrist disarticulation, ultralight material (titanium, carbon fiber o	-	Х	
_7401	Addition to upper extremity prosthesis, above elbow disarticulation, ultralight material (titanium, carbon fiber or equa	-	Х	
_7402	Addition to upper extremity prosthesis, shoulder disarticulation/interscapular thoracic, ultralight material (titanium,	-	Х	
7403	Addition to upper extremity prosthesis, below elbow/wrist disarticulation, acrylic material	-	Х	
7404	Addition to upper extremity prosthesis, above elbow disarticulation, acrylic material	-	Х	
_7405	Addition to upper extremity prosthesis, shoulder disarticulation/interscapular thoracic, acrylic material	-	Х	
7499	Upper extremity prosthes nos	-	Х	
_8033	Nipple prosthesis custom, ea	Х	-	
_8039	Breast prosthesis nos	-	Х	
8040	Nasal prosthesis	-	Х	
8041	Midfacial prosthesis	-	Х	
8042	Orbital prosthesis	-	Х	
8043	Upper facial prosthesis	-	Х	
8044	Hemi-facial prosthesis	-	Х	
_8045	Auricular prosthesis	-	Х	
_8046	Partial facial prosthesis	-	Х	
_8047	Nasal septal prosthesis	-	Х	
8048	Unspec maxillofacial prosth	-	Х	
8049	Repair maxillofacial prosth	-	X	
8500	Artificial larynx	-	X	
_8501	Tracheostomy speaking valve	-	X	
_8505	Artificial larynx replacement battery/accessory, any type	Х	-	
L8507	Tracheo-esophageal voice prosthesis, patient inserted, any type, each	-	Х	

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L8509	Tracheo-esophageal voice prosthesis, inserted by a licensed health care provider, any type	-	Х	
L8510	Voice amplifier	X	-	
L8600	Implant breast silicone/eq	-	Х	
L8605	Injectable bulking agent, dextranomer/hyaluronic acid copolymer implant, anal canal, 1 ml, includes shipping and necessary supplies	Х	-	
L8609	Artificial cornea	Х	-	
L8610	Ocular implant	Х	-	
L8613	Ossicular implant	Х	-	
L8630	Metacarpophalangeal implant	Х	-	
L8631	Metacarpal phalangeal joint replacement, two or more pieces, metal	-	Х	
L8659	Interphalangeal finger joint replacement, 2 or more pieces, metal	-	Х	
L8670	Vascular graft, synthetic	Х	-	
L8685	Implantable neurostimulator pulse generator, single array, rechargeable, includes extension	-	Х	
L8686	Implantable neurostimulator pulse generator, single array, non-rechargeable, includes extension	-	Х	
L8687	Implantable neurostimulator pulse generator, dual array, rechargeable, includes extension	-	Χ	
L8688	Implantable neurostimulator pulse generator, dual array, non-rechargeable, includes extension	-	Χ	
L8690	Auditory osseointegrated device, includes all internal and external components	-	Χ	
L8692	Auditory osseointedgrated device, external sound processor, used without osseiontegration, body worn, includes headband	-	Χ	
L8701	Pow ue rom dev ewh uprt cust	-	Х	
L8702	Pow ue rom dev ewhf uprt cus	-	Х	
M0001	Advancing cancer care mips value pathways	Х	-	
M0002	Optimal care for kidney health mips value pathways	Х	-	
M0003	Optimal care for patients with episodic neurological conditions mips value pathways	Х	-	
M0004	Supportive care for neurodegenerative conditions mips value pathways	Х	-	
M0005	Promoting wellness mips value pathways	Х	-	
M0010	Eom meos payment	Х	-	
M0075	Cellular therapy	Х	-	
M0076	Prolotherapy	Х	-	
M0100	Intragastric hypothermia	Х	-	
	Iv chelationtherapy	Х	-	
M0301	Fabric wrapping of aneurysm	Х	-	

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M1003	Tb screening performed and results interpreted within twelve months prior to initiation of first-time biologic disease modifying anti-rheumatic drug therapy for ra	Х	-	
M1004	Doc med rsn no srn tb	Х	-	
M1005	Tb screening not performed or results not interpreted, reason not given	Х	-	
M1006	Disease activity not assessed, reason not given	Х	-	
M1007	>=50% of total number of a patient's outpatient ra encounters assessed	Х	-	
M1008	<50% of total number of a patient's outpatient ra encounters assessed	Х	-	
M1009	Dc eoc doc med rec	Х	-	
M1010	Dc eoc doc med rec	Х	-	
M1011	Dc eoc doc med rec	Х	-	
M1012	Dc eoc doc med rec	Х	-	
M1013	Dc eoc doc med rec	Х	-	
M1014	Dc epi care doc medrec	Х	-	
M1016	Female patients unable to bear children	Х	-	
M1017	Patient admitted to palliative care services	Х	-	
M1018	Pt dx hst cr pt sk lg cr scr	Х	-	
M1019	Adl pt mj dep ds rs 12 phq<5	Х	-	
M1020	Adl pt mj dep ds no rs 12 mo	Х	-	
M1021	Patient had only urgent care visits during the performance period	Х	-	
M1027	Imaging of the head (ct or mri) was obtained	Х	-	
M1028	Documentation of patients with primary headache diagnosis and imaging other than ct or mri obtained	Х	-	
M1029	Imaging of the head (ct or mri) was not obtained, reason not given	Х	-	
M1032	Adults currently taking pharmacotherapy for oud	Х	-	
M1034	Adults who have at least 180 days of continuous pharmacotherapy with a medication prescribed for oud without a gap of more than seven days	Х	-	
M1035	Adults who are deliberately phased out of medication assisted treatment (mat) prior to 180 days of continuous treatment	Х	-	
M1036	Adults who have not had at least 180 days of continuous pharmacotherapy with a medication prescribed for oud without a gap of more than seven days	Х	-	
M1037	Patients with a diagnosis of lumbar spine region cancer at the time of the procedure	Х	-	
	Patients with a diagnosis of lumbar spine region fracture at the time of the procedure	Х	-	
	Patients with a diagnosis of lumbar spine region infection at the time of the procedure	Х	-	

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M1040	Patients with a diagnosis of lumbar idiopathic or congenital scoliosis	Х	-
M1041	Patient had cancer, fracture or infection related to the lumbar spine or patient had idiopathic or congenital scoliosis	х	-
M1043	Fs no odi 9-15mo	Х	-
M1045	Fs oks 9-15mo = 37	Х	-
M1046	Fs oks 9-15mo = 37	Х	-
M1049	Fs wth scr no odi pre and p	Х	-
M1051	Patient had cancer, fracture or infection related to the lumbar spine or patient had idiopathic or congenital scoliosis	Х	-
M1052	Lg pn not meas w/ vas 1yr po	Х	-
M1054	Patient had only urgent care visits during the performance period	Х	-
M1055	Aspirin or another antiplatelet therapy used	Х	-
M1056	Presc antico med in pp	Х	-
M1057	Aspirin or another antiplatelet therapy not used, reason not given	Х	-
M1058	Patient was a permanent nursing home resident at any time during the performance period	Х	-
M1059	Patient was in hospice or receiving palliative care at any time during the performance period	Х	-
M1060	Patient died prior to the end of the performance period	Х	-
M1067	Hospice services for patient provided any time during the measurement period	Х	-
M1068	Adults who are not ambulatory	Х	-
M1069	Patient screened for future fall risk	Х	=
M1070	Patient not screened for future fall risk, reason not given	Х	-
M1071	Patient had any additional spine procedures performed on the same date as the lumbar discectomy/laminotomy	х	-
M1072	Rom rad therapy anal, pc	Х	-
M1073	Rom rad therapy anal, tc	Х	-
M1074	Rom rad therapy bladder, pc	Х	-
M1075	Rom rad therapy bladder, to	Х	-
M1076	Rom rad ther bone mets, pc	Х	-
M1077	Rom rad ther bone mets, tc	Х	-
M1078	Rom rad ther brain mets, pc	Х	-
M1079	Rom rad ther brain mets, tc	Х	
M1080	Rom rad therapy breast, pc	Х	-

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	Small Emp	loyer and Individual
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M1081 Rom rad therapy breast, tc	X	-
M1082 Rom rad therapy cervical, pc	X	-
M1083 Rom rad therapy cervical, tc	X	-
M1084 Rom rad therapy cns, pc	X	-
M1085 Rom rad therapy cns, tc	X	-
M1086 Rom rad ther colorectal, pc	X	-
M1087 Rom rad ther colorectal, tc	X	-
M1088 Rom rad ther head/neck, pc	X	-
M1089 Rom rad ther head/neck, tc	X	-
M1094 Rom rad therapy lung, pc	X	-
M1095 Rom rad therapy lung, tc	X	-
M1096 Rom rad therapy lymphoma, pc	X	-
M1097 Rom rad therapy lymphoma, tc	X	-
M1098 Rom rad therapy pancreas, pc	X	-
M1099 Rom rad therapy pancreas, pc	X	-
M1100 Rom rad therapy prostate, pc	X	-
M1101 Rom rad therapy prostate, tc	X	-
M1102 Rom rad therapy gi, pc	X	-
M1103 Rom rad therapy gi, tc	X	-
M1104 Rom rad therapy uterus, pc	X	-
M1105 Rom rad therapy uterus, tc	Х	-
M1106 Start eoc doc med rec	X	-
M1107 Docu dx degen neuro	X	-
M1108 Oc ni pt 1-2 vis	X	-
M1109 Oc ni pt dc 1-2 vis	X	-
M1110 Oc ni pt selfdc 1-2 vis	X	-
M1111 Start eoc doc med rec	X	-
M1112 Docu dx degen neuro	X	-
M1113 Oc ni pt 1-2 vis	X	-
M1114 Oc ni pt dc 1-2 vis	X	-
M1115 Oc ni pt selfdc 1-2 vis	X	-
M1116 Start eoc doc med rec	X	-

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Disclaimer: Please note that coverage may vary by plan type and may not follow the listed services. These codes are updated quarterly. Addition injectable drugs, or specialty medications and should be directed to the Pharmacy link option within the website.	onally, these coding lists do not reflect information re	egarding immunizations,		
M1117 Docu dx degen neuro	X	-		
M1118 Oc ni pt 1-2 vis	X	-		
M1119 Oc ni pt dc 1-2 vis	X	-		
M1120 Oc ni pt selfdc 1-2 vis	X	-		
M1121 Start eoc doc med rec	X	-		
M1122 Docu dx degen neuro	X	-		
M1123 Oc ni pt 1-2 vis	X	-		
M1124 Oc ni pt dc 1-2 vis	X	-		
M1125 Oc ni pt selfdc 1-2 vis	X	-		
M1126 Start eoc doc med rec	X	-		
M1127 Docu dx degen neuro	X	-		
M1128 Oc ni pt 1-2 vis	X	-		
M1129 Oc ni pt dc 1-2 vis	X	-		
M1130 Oc ni pt self dc 1-2 vis	X	-		
M1131 Docu dx degen neuro	X	-		
M1132 Oc ni pt 1-2 vis	X	-		
M1133 Oc ni pt dc 1-2 vis	X	-		
M1134 Oc ni pt self dc 1-2 vis	X	-		
M1135 Start eoc doc med rec	X	-		
M1141 Fs no oks	X	-		
M1142 Emerge cases	X	-		
M1143 Ni rehab med chiro	X	-		
M1146 Ongoing care not ind	X	-		
M1147 Care not poss med rsn	X	-		
M1148 Pt self dschg	X	-		
M1149 No neck fs prom incap	X	-		
M1150 Left ventricular ejection fraction (Ivef) less than or equal to 40% or documentation of moder depressed left ventricular systolic function	rately or severely X	-		
M1151 Patients with a history of heart transplant or with a left ventricular assist device (Ivad)	X	-		
M1152 Patients with a history of heart transplant or with a left ventricular assist device (Ivad)	X	-		
M1153 Patient with diagnosis of osteoporosis on date of encounter	X	-		
M1154 Hospice services provided to patient any time during the measurement period	X	-		

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M1155	Patient had anaphylaxis due to the pneumococcal vaccine any time during or before the measurement period	Х	-	
M1159	Hospice services provided to patient any time during the measurement period	Х	-	
M1160	Patient had anaphylaxis due to the meningococcal vaccine any time on or before the patient's 13th birthday	Х	-	
M1161	Patient had anaphylaxis due to the tetanus, diphtheria or pertussis vaccine any time on or before the patient's 13th birthday	Х	-	
M1162	Patient had encephalitis due to the tetanus, diphtheria or pertussis vaccine any time on or before the patient's 13th birthday	Х	-	
M1163	Patient had anaphylaxis due to the hpv vaccine any time on or before the patient's 13th birthday	Х	-	
M1164	Patients with dementia any time during the patient's history through the end of the measurement period	Х	-	
M1165	Patients who use hospice services any time during the measurement period	Х	-	
M1166	Pathology report for tissue specimens produced from wide local excisions or re-excisions	Х	-	
M1167	In hospice or using hospice services during the measurement period	Х	-	
M1168	Patient received an influenza vaccine on or between july 1 of the year prior to the measurement period and june 30 of the measurement period	Х	-	
M1169	Documentation of medical reason(s) for not administering influenza vaccine (e.g., prior anaphylaxis due to the influenza vaccine)	Х	-	
M1170	Patient did not receive an influenza vaccine on or between july 1 of the year prior to the measurement period and june 30 of the measurement period	Х	-	
M1171	Patient received at least one td vaccine or one tdap vaccine between nine years prior to the encounter and the end of the measurement period	Х	-	
M1172	Documentation of medical reason(s) for not administering td or tdap vaccine (e.g., prior anaphylaxis due to the td or tdap vaccine or history of encephalopathy within seven days after a previous dose of a td-containing vaccine)	х	-	
M1173	Patient did not receive at least one td vaccine or one tdap vaccine between nine years prior to the encounter and the end of the measurement period	Х	-	
M1174	Patient received at least one dose of the herpes zoster live vaccine or two doses of the herpes zoster recombinant vaccine (at least 28 days apart) anytime on or after the patient's 50th birthday before or during the measurement period	Х	-	
M1175	Documentation of medical reason(s) for not administering zoster vaccine (e.g., prior anaphylaxis due to the zoster vaccine)	Х	-	

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M1176	Patient did not receive at least one dose of the herpes zoster live vaccine or two doses of the herpes zoster recombinant vaccine (at least 28 days apart) anytime on or after the patient's 50th birthday before or during the measurement period	x	-	
M1177	Patient received any pneumococcal conjugate or polysaccharide vaccine on or after their 60th birthday and before the end of the measurement period	Х	-	
M1178	Documentation of medical reason(s) for not administering pneumococcal vaccine (e.g., prior anaphylaxis due to the pneumococcal vaccine)	Х	-	
M1179	Patient did not receive any pneumococcal conjugate or polysaccharide vaccine, on or after their 60th birthday and before or during measurement period	Х	-	
M1180	Patients on immune checkpoint inhibitor therapy	Х	-	
<i>I</i> 1181	Grade 2 or above diarrhea and/or grade 2 or above colitis	Х	-	
И1182	Patients not eligible due to pre-existing inflammatory bowel disease (ibd) (e.g., ulcerative colitis, crohn's disease)	Х	-	
M1183	Documentation of immune checkpoint inhibitor therapy held and corticosteroids or immunosuppressants prescribed or administered	Х	-	
И1184	Documentation of medical reason(s) for not prescribing or administering corticosteroid or immunosuppressant treatment (e.g., allergy, intolerance, infectious etiology, pancreatic insufficiency, hyperthyroidism, prior bowel surgical interventions, celiac disease, receiving other medication, awaiting diagnostic workup results for alternative etiologies, other medical reasons/contraindication)	х	-	
M1185	Documentation of immune checkpoint inhibitor therapy not held and/or corticosteroids or immunosuppressants prescribed or administered was not performed, reason not given	Х	-	
<i>I</i> 1186	Patients who have an order for or are receiving hospice or palliative care	Х	-	
/11187	Patients with a diagnosis of end stage renal disease (esrd)	Х	-	
/11188	Patients with a diagnosis of chronic kidney disease (ckd) stage 5	Х	-	
<i>I</i> 11189	Documentation of a kidney health evaluation defined by an estimated glomerular filtration rate (egfr) and urine albumin-creatinine ratio (uacr) performed	Х	-	
M1190	Documentation of a kidney health evaluation was not performed or defined by an estimated glomerular filtration rate (egfr) and urine albumin-creatinine ratio (uacr)	Х	-	
И1191	Hospice services provided to patient any time during the measurement period	Х	-	
И1192	Patients with an existing diagnosis of squamous cell carcinoma of the esophagus	Х	-	
	Surgical pathology reports that contain impression or conclusion of or recommendation for testing of mmr by immunohistochemistry, msi by dna-based testing status, or both	Х	-	

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V11194				
	Documentation of medical reason(s) surgical pathology reports did not contain impression or conclusion of or recommendation for testing of mmr by immunohistochemistry, msi by dna-based testing status, or both tests were not included (e.g., patient will not be treated with checkpoint inhibitor therapy, no residual carcinoma is present in the sample [tissue exhausted or status post neoadjuvant treatment], insufficient tumor for testing)	X	-	
M1195	Surgical pathology reports that do not contain impression or conclusion of or recommendation for testing of mmr by immunohistochemistry, msi by dna-based testing status, or both, reason not given	Х	-	
M1196	Initial (index visit) numeric rating scale (nrs), visual rating scale (vrs), or itchyquant assessment score of greater than or equal to 4	Х	-	
M1197	Itch severity assessment score is reduced by 2 or more points from the initial (index) assessment score to the follow-up visit score	Х	-	
M1198	Itch severity assessment score was not reduced by at least 2 points from initial (index) score to the follow-up visit score or assessment was not completed during the follow-up encounter	Х	-	
M1199	Patients receiving rrt	Х	-	
M1200	Ace inhibitor (ace-i) or arb therapy prescribed during the measurement period	Х	-	
M1201	Documentation of medical reason(s) for not prescribing ace inhibitor (ace-i) or arb therapy during the measurement period (e.g., pregnancy, history of angioedema to ace-i, other allergy to ace-i and arb, hyperkalemia or history of hyperkalemia while on ace-i or arb therapy, acute kidney injury due to ace-i or arb therapy), other medical reasons)	х	-	
M1202	Documentation of patient reason(s) for not prescribing ace inhibitor or arb therapy during the measurement period, (e.g., patient declined, other patient reasons)	Х	-	
M1203	Ace inhibitor or arb therapy not prescribed during the measurement period, reason not given	X	-	
M1204	Initial (index visit) numeric rating scale (nrs), visual rating scale (vrs), or itchyquant assessment score of greater than or equal to 4	Х	-	
M1205	Itch severity assessment score is reduced by 2 or more points from the initial (index) assessment score to the follow-up visit score	Х	-	
M1206	Itch severity assessment score was not reduced by at least 2 points from initial (index) score to the follow-up visit score or assessment was not completed during the follow-up encounter	Х	-	
M1207	Number of patients screened for food insecurity, housing instability, transportation needs, utility difficulties, and interpersonal safety	Х	-	
M1208	Number of patients not screened for food insecurity, housing instability, transportation needs, utility difficulties, and interpersonal safety	Х	-	

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sclaimer: ectable d	Please note that coverage may vary by plan type and may not follow the listed services. These codes are updated quarterly. Additionally, these coding lists do not rerugs, or specialty medications and should be directed to the Pharmacy link option within the website.	eflect information re	garding immunizations,	
/11209	At least two orders for high-risk medications from the same drug class, (table 4), not ordered	Х	-	
M1210	At least two orders for high-risk medications from the same drug class, (table 4), not ordered	Х	-	
/11211	Most recent hemoglobin A1c level > 9.0%	Х	-	
/11212	Hemoglobin A1c level is missing, or was not performed during the measurement period (12 months)	Х	-	
M1213	No history of spirometry results with confirmed airflow obstruction (FEV1/FVC < 70%) and present spirometry is >= 70%	Х	-	
<i>I</i> 1214	Spirometry results with confirmed airflow obstruction (FEV1/FVC < 70%) documented and reviewed	Х	-	
/l1215	Documentation of medical reason(s) for not documenting and reviewing spirometry results (e.g., patients with dementia or tracheostomy)	Х	-	
/l1216	No spirometry results with confirmed airflow obstruction FEV1/FVC < 70%) documented and/or no spirometry performed with results documented during the encounter	Х	-	
/11217	Documentation of system reason(s) for not documenting and reviewing spirometry results (e.g., spirometry equipment not available at the time of the encounter)	Х	-	
<i>I</i> 1218	Patient has COPD symptoms (e.g., dyspnea, cough/sputum, wheezing)	Х	-	
/11219	Anaphylaxis due to the vaccine on or before the date of the encounter	Х	-	
/l1220	Dilated retinal eye exam with interpretation by an ophthalmologist or optometrist or artificial intelligence (AI) interpretation documented and reviewed; with evidence of retinopathy	Х	-	
<i>I</i> 11221	Dilated retinal eye exam with interpretation by an ophthalmologist or optometrist or artificial intelligence (AI) interpretation documented and reviewed; without evidence of retinopathy	Х	-	
/11222	Glaucoma plan of care not documented, reason not otherwise specified	Х	-	
11223	Glaucoma plan of care documented	Х	-	
11224	Intraocular pressure (IOP) reduced by a value less than 20% from the pre-intervention level	Х	-	
11225	Intraocular pressure (IOP) reduced by a value of greater than or equal to 20% from the pre-intervention level	х	-	
11226	IOP measurement not documented, reason not otherwise specified	X	-	
	Evidence-based therapy was prescribed	X	-	
	Patient, who has a reactive HCV antibody test, and has a follow up HCV viral test that detected HCV viremia, has HCV treatment initiated within 3 months of the reactive HCV antibody test	Х	-	
11229	Patient, who has a reactive HCV antibody test, and has a follow up HCV viral test that detected HCV viremia, is referred within 1 month of the reactive HCV antibody test to a clinician who treats HCV infection	Х	-	

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M1230	Patient has a reactive HCV antibody test and does not have a follow-up HCV viral test, or patient has a reactive HCV antibody test and has a follow-up HCV viral test that detects HCV viremia and is not referred to a clinician who treats HCV infection within 1 month and does not have HCV treatment initiated within 3 months of the reactive HCV antibody test, reason not given	х	-
M1231	Patient receives HCV antibody test with nonreactive result	Х	-
M1232	Patient receives HCV antibody test with reactive result	Х	-
	Patient does not receive HCV antibody test or patient does receive HCV antibody test but results not documented, reason not given	Х	-
M1234	Patient has a reactive HCV antibody test, and has a follow-up HCV viral test that does not detect HCV viremia	Х	-
M1235	Documentation or patient report of HCV antibody test or HCV RNA test which occurred prior to the performance period	Х	-
M1236	Baseline MRS > 2	Х	-
M1237	Patient reason for not screening for food insecurity, housing instability, transportation needs, utility difficulties, and interpersonal safety (e.g., patient declined or other patient reasons)	Х	-
M1238	Documentation that administration of second recombinant zoster vaccine could not occur during the performance period due to the recommended 2 to 6 month interval between doses (i.e, first dose received after October 31)	х	-
M1239	Patient did not respond to the question of "Patient felt heard and understood by this provider and team"	Х	-
M1240	Patient did not respond to the question of "Patient felt this provider and team put my best interests first when making recommendations about my care"	Х	-
M1241	Patient did not respond to the question of "Patient felt this provider and team saw me as a person, not just someone with a medical problem"	Х	-
M1242	Patient did not respond to the question of "Patient felt this provider and team understood what is important to me in my life"	Х	-
M1243	Patient provided a response other than "completely true" for the question of "Patient felt heard and understood by this provider and team"	Х	-
M1244	Patient provided a response other than "completely true" for the question of "Patient felt this provider and team put my best interests first when making recommendations about my care"	Х	-
M1245	Patient provided a response other than "completely true" for the question of "Patient felt this provider and team saw me as a person, not just someone with a medical problem"	Х	-

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M1246	Patient provided a response other than "completely true" for the question of "Patient felt this provider and team understood what is important to me in my life"	Х	-
M1247	Patient responded "completely true" for the question of "Patient felt this provider and team put my best interests first when making recommendations about my care"	Х	-
M1248	Patient responded "completely true" for the question of "Patient felt this provider and team saw me as a person, not just someone with a medical problem"	Х	-
M1249	Patient responded "completely true" for the question of "Patient felt this provider and team understood what is important to me in my life"	Х	-
M1250	Patient responded as "completely true" for the question of "Patient felt heard and understood by this provider and team"	Х	-
M1251	Patients for whom a proxy completed the entire HU survey on their behalf for any reason (no patient involvement)	Х	-
M1252	Patients who did not complete at least one of the four patient experience HU survey items and return the HU survey within 60 days of the ambulatory palliative care visit	Х	-
M1253	Patients who respond on the patient experience HU survey that they did not receive care by the listed ambulatory palliative care provider in the last 60 days (disavowal)	Х	-
M1254	Patients who were deceased when the HU survey reached them	Х	-
M1255	Patients who have another reason for visiting the clinic [not prenatal or postpartum care] and have a positive pregnancy test but have not established the clinic as an OB provider (e.g., plan to terminate the pregnancy or seek prenatal services elsewhere)	х	-
M1256	Prior history of known CVD	Х	-
M1257	CVD risk assessment not performed or incomplete (e.g., CVD risk assessment was not documented), reason not otherwise specified	Х	-
M1258	CVD risk assessment performed, have a documented calculated risk score	Х	-
M1259	Patients listed on the kidney-pancreas transplant waitlist or who received a living donor transplant within the first year following initiation of dialysis	Х	-
M1260	Patients who were not listed on the kidney-pancreas transplant waitlist or patients who did not receive a living donor transplant within the first year following initiation of dialysis	Х	-
M1261	Patients who were on the kidney or kidney-pancreas waitlist prior to initiation of dialysis	Χ	
M1262	Patients who had a transplant prior to initiation of dialysis	Х	-
	Patients in hospice on their initiation of dialysis date or during the month of evaluation	Х	-
M1264	Patients age 75 or older on their initiation of dialysis date	Х	-

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M1265	CMS Medical Evidence Form 2728 for dialysis patients: initial form completed	Х	-
M1266	Patients admitted to a skilled nursing facility (SNF)	Х	-
M1267	Patients not on any kidney or kidney-pancreas transplant waitlist or is not in active status on any kidney or kidney-pancreas transplant waitlist as of the last day of each month during the measurement period	Х	-
	Patients on active status on any kidney or kidney-pancreas transplant waitlist as of the last day of each month during the measurement period	Х	-
	Receiving ESRD MCP dialysis services by the provider on the last day of the reporting month	Х	-
	Patients not on any kidney or kidney-pancreas transplant waitlist as of the last day of each month during the measurement period	Х	-
И1271	Patients with dementia at any time prior to or during the month	Х	-
M1272	Patients on any kidney or kidney-pancreas transplant waitlist as of the last day of each month during the measurement period	Х	-
/l1273	Patients who were admitted to a skilled nursing facility (SNF) within 1 year of dialysis initiation according to the CMS-2728 Form	Х	-
M1274	Patients who were admitted to a skilled nursing facility (SNF) during the month of evaluation were excluded from that month	Х	-
M1275	Patients determined to be in hospice were excluded from month of evaluation and the remainder of reporting period	Х	-
И1276	BMI documented outside normal parameters, no follow-up plan documented, no reason given	Х	-
/11277	Colorectal cancer screening results documented and reviewed	Х	-
/11278	Elevated or hypertensive blood pressure reading documented, and the indicated follow-up is documented	Х	-
/l1279	Elevated or hypertensive blood pressure reading documented, indicated follow-up not documented, reason not given	Х	-
/l1280	Women who had a bilateral mastectomy or who have a history of a bilateral mastectomy or for whom there is evidence of a right and a left unilateral mastectomy	Х	-
<i>I</i> 1281	Blood pressure reading not documented, reason not given	Х	-
/11282	Patient screened for tobacco use and identified as a tobacco non-user	Х	-
11283	Patient screened for tobacco use and identified as a tobacco user	Х	-
Л1284	Patients age 66 or older in institutional special needs plans (SNP) or residing in long-term care with POS code 32, 33, 34, 54, or 56 for more than 90 consecutive days during the measurement period	Х	-
	Screening, diagnostic, film, digital or digital breast tomosynthesis (3D) mammography results were not documented and reviewed, reason not otherwise specified	Х	-

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M1286	BMI is documented as being outside of normal parameters, follow-up plan is not completed for documented medical reason	х	-
M1287	BMI is documented below normal parameters and a follow-up plan is documented	Х	-
	Documented reason for not screening or recommending a follow-up for high blood pressure	Х	-
	Patient identified as tobacco user did not receive tobacco cessation intervention during the measurement period or in the 6 months prior to the measurement period (counseling and/or pharmacotherapy)	Х	-
M1290	Patient not eligible due to active diagnosis of hypertension	Х	-
M1291	Patients 66 years of age and older with at least one claim/encounter for frailty during the measurement period and a dispensed medication for dementia during the measurement period or the year prior to the measurement period	Х	-
M1292	Patients 66 years of age and older with at least one claim/encounter for frailty during the measurement period and either one acute inpatient encounter with a diagnosis of advanced illness or two outpatient, observation, ED or nonacute inpatient encounters on different dates of service with an advanced illness diagnosis during the measurement period or the year prior to the measurement period	х	-
M1293	BMI is documented above normal parameters and a follow-up plan is documented	Х	-
M1294	Normal blood pressure reading documented, follow-up not required	X	-
M1295	Patients with a diagnosis or past history of total colectomy or colorectal cancer	X	-
M1296	BMI is documented within normal parameters and no follow-up plan is required	Х	-
M1297	BMI not documented due to medical reason or patient refusal of height or weight measurement	X	-
M1298	Documentation of patient pregnancy anytime during the measurement period prior to and including the current encounter	Х	-
M1299	Influenza immunization administered or previously received	X	-
M1300	Influenza immunization was not administered for reasons documented by clinician (e.g., patient allergy or other medical reasons, patient declined or other patient reasons, vaccine not available or other system reasons)	х	-
M1301	Patient identified as a tobacco user received tobacco cessation intervention during the measurement period or in the 6 months prior to the measurement period (counseling and/or pharmacotherapy)	Х	-
M1302	Screening, diagnostic, film digital or digital breast tomosynthesis (3D) mammography results documented and reviewed	Х	-
M1303	Hospice services provided to patient any time during the measurement period	Х	-
M1304	Patient did not receive any pneumococcal conjugate or polysaccharide vaccine on or after their 19th birthday and before the end of the measurement period	Х	-

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M1305	Patient received any pneumococcal conjugate or polysaccharide vaccine on or after their 19th birthday and before the end of the measurement period	Х	-	
M1306	Patient had anaphylaxis due to the pneumococcal vaccine any time during or before the measurement period	Х	-	
M1307	Documentation stating the patient has received or is currently receiving palliative or hospice care	Х	-	
M1308	Influenza immunization was not administered, reason not given	Х	-	
	Palliative care services provided to patient any time during the measurement period	Х	-	
M1310	Patient screened for tobacco use and received tobacco cessation intervention during the measurement period or in the 6 months prior to the measurement period (counseling, pharmacotherapy, or both), if identified as a tobacco user	Х	-	
M1311	Anaphylaxis due to the vaccine on or before the date of the encounter	X	-	
M1312	Patient not screened for tobacco use	X	-	
M1313	Tobacco screening not performed or tobacco cessation intervention not provided during the measurement period or in the 6 months prior to the measurement period	Х	-	
M1314	BMI not documented and no reason is given	Х	-	
	Colorectal cancer screening results were not documented and reviewed; reason not otherwise specified	Х	-	
	Current tobacco non-user	Х	-	
M1317	Patients who are counseled on connection with a CSP and explicitly opt out	Х	-	
	Patients who did not have documented contact with a CSP for at least one of their screened positive HRSNS within 60 days after screening or documentation that there was no contact with a CSP	Х	-	
M1319	Patients who had documented contact with a CSP for at least one of their screened positive HRSNS within 60 days after screening	Х	-	
M1320	Patients who screened positive for at least 1 of the 5 HRSNS	Х	-	
M1321	Patients who were not seen within 7 weeks following the date of injection for follow-up or who did not have a documented IOP or no plan of care documented if the IOP was >25 mm Hg	Х	-	
M1322	Patients seen within 7 weeks following the date of injection and are screened for elevated intraocular pressure (IOP) with tonometry with documented IOP =<25 mm Hg for injected eye	Х	-	
M1323	Patients seen within 7 weeks following the date of injection and are screened for elevated intraocular pressure (IOP) with tonometry with documented IOP >25 mm Hg and a plan of care was documented	Х	-	
M1324	Patients who had an intravitreal or periocular corticosteroid injection (e.g., triamcinolone, preservative-free triamcinolone, dexamethasone, dexamethasone intravitreal implant, or fluocinolone intravitreal implant)	Х	-	

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M1325	Patients who were not seen for reasons documented by clinician for patient or medical reasons (e.g., inadequate time for follow-up, patients who received a prior intravitreal or periocular steroid injection within the last 6 months and had a subsequent IOP evaluation with IOP <25mm Hg within 7 weeks of treatment)	х	-
M1326	Patients with a diagnosis of hypotony	Χ	-
M1327	Patients who were not appropriately evaluated during the initial exam and/or who were not re-evaluated within 8 weeks	X	-
M1328	Patients with a diagnosis of acute vitreous hemorrhage	Х	-
M1329	Patients with a post-operative encounter of the eye with the acute PVD within 2 weeks before the initial encounter or 8 weeks after initial acute PVD encounter	Х	-
M1330	Documentation of patient reason(s) for not having a follow-up exam (e.g., inadequate time for follow-up)	Х	-
M1331	Patients who were appropriately evaluated during the initial exam and were re-evaluated no later than 8 weeks from initial exam	Х	-
M1332	Patients who were not appropriately evaluated during the initial exam and/or who were not re-evaluated within 2 weeks	Х	-
M1333	Acute vitreous hemorrhage	Х	-
M1334	Patients with a post-operative encounter of the eye with the acute PVD within 2 weeks before the initial encounter or 2 weeks after initial acute PVD encounter	Х	-
M1335	Documentation of patient reason(s) for not having a follow-up exam (e.g., inadequate time for follow-up)	Х	-
M1336	Patients who were appropriately evaluated during the initial exam and were re-evaluated no later than 2 weeks	Х	-
M1337	Acute PVD	Χ	-
M1338	Patients who had follow-up assessment 30 to 180 days after the index assessment who did not demonstrate positive improvement or maintenance of functioning scores during the performance period	Х	-
M1339	Patients who had follow-up assessment 30 to 180 days after the index assessment who demonstrated positive improvement or maintenance of functioning scores during the performance period	Х	-
M1340	Index assessment completed using the 12-item WHODAS 2.0 or SDS during the denominator identification period	Х	-
M1341	Patients who did not have a follow-up assessment or did not have an assessment within 30 to 180 days after the index assessment during the performance period	Х	-
M1342	Patients who died during the performance period	Х	-
M1343	Patients who are at PAM level 4 at baseline or patients who are flagged with extreme straight line response sets on the PAM	Х	-

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M1344	Patients who did not have a baseline PAM score and/or a second score within 6 to 12 month of baseline PAM score	Х	-
M1345	Patients who had a baseline PAM score and a second score within 6 to 12 month of baseline PAM score	Х	-
M1346	Patients who did not have a net increase in PAM score of at least 6 points within a 6 to 12 month period	Х	-
M1347	Patients who achieved a net increase in PAM score of at least 3 points in a 6 to 12 month period (passing)	Х	-
M1348	Patients who achieved a net increase in PAM score of at least 6 points in a 6 to 12 month period (excellent)	Х	-
M1349	Patients who did not have a net increase in PAM score of at least 3 points within 6 to 12 month period	Х	-
M1350	Patients who had a completed suicide safety plan initiated, reviewed, or updated in collaboration with their clinician (concurrent or within 24 hours of the index clinical encounter)	Х	-
M1351	Patients who had a suicide safety plan initiated, reviewed, or updated and reviewed and updated in collaboration with the patient and their clinician (concurrent or within 24 hours of clinical encounter and within 120 days after initiation)	х	-
M1352	Suicidal ideation and/or behavior symptoms based on the C-SSRS or equivalent assessment	Х	-
M1353	Patients who did not have a completed suicide safety plan initiated, reviewed, or updated in collaboration with their clinician (concurrent or within 24 hours of the index clinical encounter)	Х	-
M1354	Patients who did not have a suicide safety plan initiated, reviewed, or updated or reviewed and updated in collaboration with the patient and their clinician (concurrent or within 24 hours of clinical encounter and within 120 days after initiation)	х	-
M1355	Suicide risk based on their clinician's evaluation or a clinician-rated tool	Х	-
M1356	Patients who died during the measurement period	Х	-
M1357	Patients who had a reduction in suicidal ideation and/or behavior upon follow-up assessment within 120 days of index assessment	Х	-
M1358	Patients who did not have a reduction in suicidal ideation and/or behavior upon follow-up assessment within 120 days of index assessment	Х	-
M1359	Index assessment during the denominator period when the suicidal ideation and/or behavior symptoms or increased suicide risk by clinician determination occurs and a non-zero C-SSRS score is obtained	Х	-
M1360	Suicidal ideation and/or behavior symptoms based on the C-SSRS	Х	-
	Suicide risk based on their clinician's evaluation or a clinician-rated tool	X	-
	Patients who died during the measurement period	Х	-
	Patients who did not have a follow-up assessment within 120 days of the index assessment	Х	-
M1364	Calculated 10-year ASCVD risk score of >=20 percent during the performance period	Х	-

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M1365 Patient encounter during the performance period with hospice and palliative care specialty code 17	X	-		
M1366 Focusing on women's health MIPS value pathway	Х	-		
M1367 Quality care for the treatment of ear, nose, and throat disorders MIPS value pathway	Х	-		
M1368 Prevention and treatment of infectious disorders including hepatitis C and HIV MIPS value pathway	X	-		
M1369 Quality care in mental health and substance use disorders MIPS value pathway	Х	-		
/1370 Rehabilitative support for musculoskeletal care MIPS value pathway	Х	-		
P2031 Hair analysis	Х	-		
P9020 Plaelet rich plasma unit	Х	-		
P9603 One-way allow prorated miles	Х	-		
P9604 One-way allow prorated trip	Х	-		
Q0035 Cardiokymography	Х	-		
20092 Set up port xray equipment	X	-		
Q0113 Pinworm examinations	Х	-		
Q0114 Fern test	X	-		
Q0115 Post-coital mucous exam	Х	-		
Q0478 Power adapter, combo vad	-	X		
20479 Power module combo vad, rep	-	X		
Q0480 Driver for use with pneumatic ventricular assist device, replacement only	-	X		
Q0481 Microprocessor control unit for use with electric ventricular assist device, replacement only	-	Х		
Microprocessor control unit for use with electric/pneumatic combination ventricular assist device, replacement only	-	Х		
00483 Monitor/display module for use with electric ventricular assist device, replacement only	-	Х		
20484				
Monitor/display module for use with electric or electric/pneumatic ventricular assist device, replacement only	-	X		
00485 Monitor control cable for use with electric ventricular assist device, replacement only	-	Х		
00486 Monitor control cable for use with electric/pneumatic ventricular assist device, replacement only	-	Х		
Q0487 Leads (pneumatic/electrical) for use with any type electric/pneumatic ventricular assist device, replacement only	-	Х		
20488 Power pack base for use with electric ventricular assist device, replacement only	-	Х		
20489 Power pack base for use with electric/pneumatic ventricular assist device, replacement only	-	Х		
20490 Emergency power source for use with electric ventricular assist device, replacement only	-	Х		
Q0491 Emergency power source for use with electric/pneumatic ventricular assist device, replacement only	-	Х		

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Q0492	Emergency power supply cable for use with electric ventricular assist device, replacement only	-	Х
Q0493	Emergency power supply cable for use with electric/pneumatic ventricular assist device, replacment only	-	Х
Q0494	Emergency hand pump for use with electric or electric/pneumatic ventricular assist device, replacement only	-	X
Q0495	Battery/power pack charger for use with electric or electric/pneumatic ventricular assist device, replacement only	Х	-
Q0496	Battery, other than lithium-ion, for use with electric or electric/pneumatic ventricular assist device, replacement only	Х	-
Q0497	Battery clips for use with electric or electric/pneumatic ventricular assist device, replacement only	Х	-
Q0498	Holster for use with electric or electric/pneumatic ventricular assist device, replacement only	-	Χ
Q0499	Belt/vest elec/combo vad rep	-	Х
Q0500	Filters for use with electric or electric/pneumatic ventricular assist device, replacement only	-	X
Q0501	Shower cover for use with electric or electric/pneumatic ventricular assist device, replacement only	-	X
Q0502	Mobility cart for pneumatic ventricular assist device, replacement only	-	X
Q0503	Battery for pneumatic ventricular assist device, replacement only, each	-	X
Q0504	Power adapter for pneumatic ventricular assist device, replacement only, vehicle type	-	X
Q0506	Battery, lithium-ion, for use with electric or electric/pneumatic ventricular assist device, replacement only	Х	-
Q0510	Pharmacy supply fee for initial immunosuppressive drug(s), first month following implant	Х	-
Q0511	Pharmacy supply fee for oral anti-cancer, oral anti-emetic or immunosuppressive drug(s); for the first presription in a	Х	-
Q0512	Pharmacy supply fee for oral anti-cancer, oral anti-emetic or immunosuppressive drug(s); for a subsequent prescription i	Х	-
Q0513	Pharmacy dispensing fee for inhalation drug(s); per 30 days	Х	-
Q0514	Pharmacy dispensing fee for inhalation drug(s); per 90 days	Х	-
Q0516	Pharmacy supplying fee for HIV pre-exposure prophylaxis FDA-approved prescription drug, per 30-days	Х	-
Q0517	Pharmacy supplying fee for HIV pre-exposure prophylaxis FDA-approved prescription drug, per 60-days	Х	-
Q0518	Pharmacy supplying fee for HIV pre-exposure prophylaxis FDA-approved prescription drug, per 90-days	Х	-
Q1004	Ntiol category 4	Х	-
Q1005	Ntiol category 5	Х	-
Q3014	Telehealth originating site facility fee	Х	-
Q3031	Collagen skin test	Х	-
Q4100	Skin substitute, not otherwise specified	Х	-

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Q4130	Strattice tm, per square centimeter	X	-
	Hmatrix, per square centimeter	Х	-
Q4135	Mediskin, per square centimeter	Х	-
Q4136	Ez-derm, per square centimeter	Х	-
Q4137	Amnioexcel or biodexcel, 1cm	Х	-
Q4138	Biodfence dryflex, 1cm	Х	-
	Amnio or biodmatrix, inj 1cc	Х	-
Q4140	Biodfence 1cm	Х	-
Q4142	Xcm biologic tiss matrix 1cm	Х	-
Q4143	Repriza, 1cm	Х	-
Q4145	Epifix, inj, 1mg	Х	-
Q4146	Tensix, 1cm	Х	-
Q4147	Architect ecm, 1cm	Х	-
Q4148	Neox 1k, 1cm	Х	=
Q4149	Excellagen, 0.1 cc	Х	-
Q4150	Allowrap ds or dry 1 sq cm	Х	-
Q4151	Amnioband, guardian 1 sq cm	Х	-
Q4152	Dermapure 1 square cm	Х	-
Q4153	Dermavest 1 square cm	Х	-
Q4154	Biovance 1 square cm	Х	-
Q4155	Neoxflo or clarixflo 1 mg	Х	-
Q4156	Neox 100 1 square cm	Х	-
Q4157	Revitalon 1 square cm	Х	-
Q4158	Kerecis omega3, per sq cm	Х	-
Q4159	Affinity1 square cm	Х	-
Q4160	Nushield 1 square cm	X	-
Q4161	Bio-connekt wound matrix, per square centimeter	Х	-
Q4162	Wndex flw, bioskn flw, 0.5cc	Х	-
Q4163	Woundex, bioskin, per sq cm	Х	-
	Helicoll, per square centimeter	Х	-
Q4165	Keramatrix, per square centimeter	Х	-
Q4167	Truskin, per sq centimeter	Х	-

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Q4168 Amnioband, 1 mg	X	-	
Q4169 Artacent wound, per sq cm	X	-	
Q4170 Cygnus, per sq cm	X	-	
Q4171 Interfyl, 1 mg	X	-	
Q4173 Palingen or palingen xplus	X	-	
04174 Palingen or promatrx	X	-	
04175 Miroderm	X	-	
14176 Neopatch, per sq centimeter	X	-	
04177 Floweramnioflo, 0.1 cc	X	-	
04179 Flowerderm, per sq cm	X	-	
04180 Revita, per sq cm	X	-	
A4181 Amnio wound, per square cm	X	-	
14182 Transcyte, per sq centimeter	X	-	
14183 Surgigraft, per square centimeter	X	-	
24184 Cellesta, per square centimeter	X	-	
24185 Cellesta flowable amnion (25 mg per cc); per 0.5 cc	X	-	
24187 Epicord, per square centimeter	X	-	
A4188 Amnioarmor, per square centimeter	X	-	
Artacent ac, 1 mg	X	-	
Attacent ac, per square centimeter	X	-	
14191 Restorigin, per square centimeter	X	-	
14192 Restorigin, 1 cc	X	-	
A4193 Coll-e-derm, per square centimeter	X	-	
14194 Novachor, per square centimeter	X	-	
4195 Puraply, per square centimeter	X	-	
4196 Puraply am, per square centimeter	X	-	
14197 Puraply xt, per square centimeter	X	-	
04198 Genesis amniotic membrane, per square centimeter	X	-	
24199 Cygnus matrix, per square centimeter	X	-	
24200 Skin te, per square centimeter	X	-	
4201 Matrion, per square centimeter	X	-	
14202 Keroxx (2.5g/cc), 1cc	Х	-	

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•	Derma-gide, per square centimeter	Х	-	
Q4204	Xwrap, per square centimeter	Х	-	
	Fluid flow or fluid gf 1 cc	Х	-	
Q4209	Surgraft per sq cm	Х	-	
Q4210	Axolotl graf dualgraf sq cm	Х	-	
Q4211	Amnion bio or axobio sq cm	Х	-	
Q4212	Allogen, per cc	Х	-	
24213	Ascent, 0.5 mg	Х	-	
24214	Cellesta cord per sq cm	Х	-	
Q4215	Axolotl ambient, cryo 0.1 mg	X	-	
24216	Artacent cord per sq cm	Х	-	
24217	Woundfix biowound plus xplus	Х	-	
24218	Surgicord per sq cm	Х	-	
24219	Surgigraft dual per sq cm	Х	-	
24220	Bellacell hd, surederm sq cm	Х	-	
24221	Amniowrap2 per sq cm	Х	-	
24222	Progenamatrix, per sq cm	Х	-	
24224	Hhf10-p per sq cm	Х	-	
24225	Amniobind, per sq cm	Х	-	
24226	Myown harv prep proc sq cm	Х	-	
24227	Amniocore per sq cm	Х	-	
24228	Bionextpatch, per sq cm	Х	-	
24229	Cogenex amnio memb per sq cm	Х	-	
24230	Cogenex flow amnion 0.5 cc	Х	-	
24231	Corplex p, per cc	Х	-	
4232	Corplex, per sq cm	Х	-	
24233	Surfactor /nudyn per 0.5 cc	Х	-	
24234	Xcellerate, per sq cm	Х	-	
	Amniorepair or altiply sq cm	Х	-	
24236	Carepatch per sq cm	Х	-	
	Cryo-cord, per sq cm	Х	-	
	Derm-maxx, per sq cm	Х	-	

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04239 Amnio-maxx or lite per sq cm	X	-
Q4240 Corecyte topical only 0.5 cc	Х	-
Q4241 Polycyte, topical only 0.5cc	Х	-
04242 Amniocyte plus, per 0.5 cc	Х	-
04244 Procenta, per 200 mg	Х	-
Q4245 Amniotext, per cc	X	-
24246 Coretext or protext, per cc	X	-
04247 Amniotext patch, per sq cm	X	-
04248 Dermacyte amn mem allo sq cm	X	-
04249 Amniply, per sq cm	X	-
04250 Amnioamp-mp per sq cm	X	-
04251 Vim, per square centimeter	X	-
04252 Vendaje, per square centimeter	X	-
24253 Zenith amniotic membrane, per square centimeter	X	-
24255 Reguard, topical use per sq	X	-
04256 Mlg complet, per sq cm	X	-
24257 Relese, per sq cm	X	-
24258 Enverse, per sq cm	X	-
24259 Celera dual layer or celera dual membrane, per square centimeter	X	-
04260 Signature apatch, per square centimeter	X	-
14261 Tag, per square centimeter	Х	-
04262 Dual layer impax membrane, per square centimeter	X	-
04263 Surgraft tl, per square centimeter	Х	-
24264 Cocoon membrane, per square centimeter	X	-
04265 Neostim tl, per square centimeter	Х	-
04266 Neostim membrane, per square centimeter	Х	-
Neostim dl, per square centimeter	Х	-
24268 Surgraft ft, per square centimeter	X	-
24269 Surgraft xt, per square centimeter	Х	-
04270 Complete sl, per square centimeter	X	
24271 Complete ft, per square centimeter	Х	
24272 Esano a, per square centimeter	Х	-

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Q4273 Esano aaa, per square centimeter	X	-
Q4274 Esano ac, per square centimeter	X	-
Q4275 Esano aca, per square centimeter	X	-
Q4276 Orion, per square centimeter	X	-
Q4277 Woundplus membrane or e-graft, per square centimeter	Х	-
Q4278 Epieffect, per square centimeter	Х	-
Q4279 Vendaje AC, per sq cm	Х	-
Q4280 Xcell amnio matrix, per square centimeter	Х	-
Q4281 Barrera sl or barrera dl, per square centimeter	X	-
Q4282 Cygnus dual, per square centimeter	Х	-
Q4283 Biovance tri-layer or biovance 3I, per square centimeter	Х	-
Q4284 Dermabind sl, per square centimeter	Х	-
Q4287 DermaBind DL, per sq cm	Х	-
Q4288 DermaBind CH, per sq cm	Х	-
Q4289 RevoShield+ Amniotic Barrier, per sq cm	X	-
Q4290 Membrane Wrap-Hydro™, per sq cm	X	-
Q4291 Lamellas XT, per sq cm	Х	-
Q4292 Lamellas, per sq cm	Х	-
Q4293 Acesso DL, per sq cm	X	-
Q4294 Amnio Quad-Core, per sq cm	Х	-
Q4295 Amnio Tri-Core Amniotic, per sq cm	Х	-
Q4296 Rebound Matrix, per sq cm	X	-
Q4297 Emerge Matrix, per sq cm	Х	-
Q4298 AmniCore Pro, per sq cm	X	-
Q4299 AmniCore Pro+, per sq cm	Х	-
Q4300 Acesso TL, per sq cm	X	-
Q4301 Activate Matrix, per sq cm	X	-
Q4302 Complete ACA, per sq cm	X	-
Q4303 Complete AA, per sq cm	X	-
Q4304 Grafix plus, per sq cm	X	-
Q4305 American amnion ac tri-layer, per square centimeter	X	-
Q4306 American amnion ac, per square centimeter	Х	-

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Q4307	American amnion, per square centimeter	X	-
Q4308	Sanopellis, per square centimeter	X	-
Q4309	Via matrix, per square centimeter	Х	-
Q4310	Procenta, per 100 mg	Х	-
Q5001	Hospice in patient home	-	Х
Q5002	Hospice in assist living	-	Х
Q5003	Hospice in It/non-skilled nf	-	Χ
Q5004	Hospice in snf	-	Х
Q5005	Hospice, inpatient hospital	-	Х
Q5006	Hospice in hospice facility	-	X
Q5007	Hospice in Itch	-	Х
Q5008	Hospice in inpatient psych	-	X
Q5009	Hospice, nos	-	X
Q5010	Hospice home care provided in a hospice facility	-	Х
Q9001	Va chaplain assessment	Х	-
Q9002	Va chaplain counsel individu	Х	-
Q9003	Va chaplain counsel group	Х	-
Q9004	Va whole health partner serv	Х	-
Q9950	Injection, sulfur hexafluoride lipid microspheres, per ml	Х	-
R0075	Transport port x-ray multipl	Х	-
₹0076	Transport portable ekg	Х	-
S0201	Partial hospitalization services, less than 24 hours, per diem	-	Х
S0207	Paramedic intercept, non-hospital based als service, non-voluntary, non-transport	Х	-
S0208	Paramedic intercept, hospital-based als service (non-voluntary), non transport	Х	-
S0209	Wheelchair van, mileage, per mile	Х	-
S0215	Non-emergency transportation; mileage	Х	-
S0220	Medical conference by physic	Х	-
S0221	Medical conference, 60 min	Х	-
S0250	Comprehensive geriatric assessment and treatment planning performed by assessment team	Х	-
S0260	History and physical (outpatient or office) related to surgical procedure (list separately in addition to code for appro	Х	-
S0270	Physician management f patient home care standard monthly case rate per 30 days	X	-

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S0271	Physician management of patient home care hospice monthly case rate per 30 days	Х	-	
	Physician management of patient home care episodic care monthly case rate per 30 days	Х	-	
S0274	Nurse practioner visit at members home outside of a capitation arrangement	Х	-	
S0280	Medical home program, comprehensive care coordination and planning, initial plan	Х	-	
S0281	Medical home program, comprehensive care coordination and planning, maintenance of plan	Х	-	
S0285	Colonoscopy consultation performed prior to a screening colonoscopy procedure	Х	-	
S0302	Completed early periodic screening diagnosis and treatment (epsdt) service (list in addition to code for appropriate eva	Х	-	
S0310	Hospitalist services (list separately in addition to code for appropriate evaluation and management service.)	Х	-	
S0311	Comprehensive management and care coordination for advanced illness, per calendar month	Х	-	
S0315	Disease management program, initial assessment and initiation of program	Х	-	
S0316	Disease management program, followup assessment	Х	-	
S0317	Disease management program; per diem	Х	-	
S0320	Telephone calls by reg nurse to disease management program member	Х	-	
S0340	Lifestyle modification program for management for coronary artery disease, including all supportive services; first quar	Х	-	
S0341	Lifestyle modification program for management for coronary artery disease, including all supportive services; second or	Х	-	
S0342	Lifestyle modification program for management for coronary artery disease, including all supportive services; fourth qua	Х	-	
S0353	Treatment planning and care coordination management for cancer initial treatment	-	Х	
S0354	Treatment planning and care coordination management for cancer established patient with a change of regimen	-	Х	
S0395	Impression casting of a foot performed by a practitioner other than the manufacturer of the orthotic	Х	-	
30504	Single vision prescription lens (safety, athletic, or sunglass), per lens	Х	-	
30506	Bifocal vision prescription lens (safety, athletic, or sunglass), per lens	Х	-	
30508	Trifocal vision prescription lens (safety, athletic, or sunglass), per lens	Х	-	
30510	Non-prescription lens (safety, athletic, or sunglass), per lens	Х	-	
30516	Safety eyeglass frames	Х	-	
30518	Sunglasses frames	Х	-	
30580	Polycarbonate lens (list this code in addition to the basic code for the lens)	Х	-	
S0581	Nonstandard lens (list this code in addition to the basic code for the lens)	Х	-	

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Disclaimer: njectable d	Please note that coverage may vary by plan type and may not follow the listed services. These codes are updated quarterly. Additionally, these coding lists do not rugs, or specialty medications and should be directed to the Pharmacy link option within the website.	eflect information re	
S0590	Integral lens service, miscellaneous services reported separately	Х	-
S0595	Dispensing new spectacle lenses for patient supplied frame	Х	-
S0596	Phakic intraocular lens for correction of refractive error	Х	-
S0622	Physical exam for college, new or established patient (list separately in addition to appropriate evaluation and managem	X	-
S0800	Laser in situ keratomileusis	Х	-
S0810	Photorefractive keratectomy	Х	-
S0812	Phototheraputic keratectomy (ptk)	Х	-
S1001	Deluxe item, patient aware (list in addition to code for basic item)	Х	-
S1002	Customized item (list in addition to code for basic item)	X	-
S1030	Continuous noninvasive glucose monitoring device, purchase (for physician interpretation of data, use cpt code)	-	X
S1031	Continuous noninvasive glucose monitoring device, rental, including sensor, sensor replacement, and download to monitor	-	Х
S2053	Transplantation of small int	Х	-
S2054	Transplantation of multivisc	Х	-
S2055	Harvesting of donor multivis	Х	-
S2060	Lobar lung transplantation	-	Χ
S2061	Donor lobectomy (lung)	-	Χ
	Simultaneous pancreas kidney transplantation	-	Χ
S2083	Adjustment of gastric band diameter via subcutaneous port by injection or aspiration of saline	X	-
S2102	Islet cell tissue transplant	X	-
S2103	Adrenal tissue transplant	X	-
S2107	Adoptive immunotherapy i.e. development of specific anti-tumor reactivity (e.g.tumor-infiltrating lymphocyte therapy) pe	X	-
S2140	Cord blood harvesting	-	Х
S2142	Cord blood-derived stem-cell	Х	-
S2150	Bone marrow or blood-derived peripheral stem cell harvesting and transplantation, allogenic or autologous, including phe	-	Х
S2152	Solid organ(s), complete or segmental, single organ or combination of organs; deceased or living donor(s), procurement,	Х	-
S2202	Echosclerotherapy	Х	-

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S2230	Implantation of magnetic component of semi-implantable hearing device on ossicles in middle ear	Х	-
	Induced abortion, 17 to 24 weeks, any surgical method	Х	-
S2265	Abortion for fetal indication, 25-28 weeks	Х	-
S2266	Abortion for fetal indication, 29-31 weeks	Х	-
S2267	Abortion for fetal induction, 32 weeks or greater	Х	-
S2300	Arthroscopy, shoulder, surgi	Х	-
S2348	Decompress disc rf lumbar	Х	-
S2350	Diskectomy, anterior, with d	Х	-
S2351	Diskectomy, anterior, with d	Х	-
S2405	Repair of sacrococcygeal teratoma in the fetus, procedure performed in utero	Х	-
S2409	Repair, congenital malformation of fetus, procedure performed in utero, not otherwise classified	Х	-
S2900	Surgical techniques requiring use of robotic surgical system (list separately in addition to code for primary procedure	Х	-
S3005	Performance measurement, evaluation of patient self assessment, depression	Х	-
S3650	Saliva test, hormone level;	Х	-
S3652	Saliva test, hormone level;	Х	-
3800	Genetic testing for amyotrophic lateral sclerosis (als)	-	Х
S3840	Dna analysis for germline mutations of the ret proto-oncogene for susceptibility to multiple endocrine neoplasia type 2	-	Х
S3841	Genetic testing for retinoblastoma	-	Χ
3842	Genetic testing for von hippel-lindau disease	-	Х
3844	Dna analysis of the connexin 26 gene (gjb2) for susceptibility to congenital, profound deafness	-	Х
33845	Genetic testing for alpha-thalassemia	-	Χ
33846	Genetic testing for hemoglobin e beta-thalassemia	-	Х
S3849	Genetic testing for niemann-pick disease	-	Χ
S3850	Genetic testing for sickle cell anemia	-	Х
33852	Dna analysis for apoe epilson 4 allele for susceptibility to alzheimer's disease	Х	-
3853	Genetic testing for myotonic muscular dystrophy	-	Х
S3854	Gene expression profiling panel for use in the management of breast cancer treatment	-	Х
S3861	Genetic testing, sodium channel, voltage-gated, type v, alpha subunit (scn5a) and variants for suspected brugada syndrome	-	Х
S3865	Comprehensive gene sequence analysis for hypertrophic cardiomyopathy	-	Χ

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S3866	Genetic analysis for a specific gene mutation for hypertrophic cardiomyopathy (hcm) in an individual with a known hcm mu	-	Х
S3870	Comparative genomic hybrization (cgh) microarray testing for developmental delay, autism spectrum disorder and/or mental	-	Х
S3900	Surface electromyography (emg)	Х	-
	Masters two step	Х	-
S4005	Interim labor facility global (labor occurring but not resulting in delivery)	Х	-
S4011	In vitro fertilization; including but not limited to identification and incubation of mature oocytes, fertilization with	Х	-
S4013	Complete cycle, gamete intrafallopian transfer (gift), case rate	Х	-
S4014	Complete cycle, zygote intrafallopian transfer (zift), case rate	Х	-
S4015	Complete in vitro fertilization cycle, case rate	Х	-
S4016	Frozen in vitro fertilization cycle, case rate	Х	-
S4017	Incomplete cycle, treatment cancelled prior to stimulation, case rate	Х	-
S4018	Frozen embryo transfer procedure cancelled before transfer, case rate	Х	-
S4020	In vitro fertilization procedure cancelled before aspiration, case rate	Х	-
S4021	In vitro fertilization procedure cancellation after aspiration, case rate	Х	-
S4022	Assisted oocyte fertilization, case rate	Х	-
S4023	Donor egg cycle, incomplete, case rate	Х	-
S4025	Donor services for in vitro fertilization (sperm or embryo), case rate	Х	-
S4026	Procurement of donor sperm from sperm bank	Х	-
S4027	Storage of previously frozen embryos	Х	-
S4028	Microsurgical epididymal sperm aspiration (mesa)	Х	-
S4030	Sperm procurement and cryopreservation services; initial visit	Х	-
S4031	Sperm procurement and cryopreservation services; subsequent visit	Х	-
S4035	Stimulated intrauterine insemination (IUI), case rate	-	Χ
S4037	Cryopreserved embryo transfer, case rate	Х	-
S4040	Monitoring and storage of cryopreserved embryos, per 30 days	Х	-
	Ovulation mgmt per cycle	Х	-
	Penile contracture device, manual, greater than 3 lbs traction force	Х	-
	Nicotine patches, legend	Х	-
	Nicotine patches, non-legend	Х	-

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S4993	Contraceptive pills for birth control	Х	-
S4995	Smoking cessation gum	Х	-
S5000	Prescription drug, generic	Х	-
S5001	Prescription drug,brand name	Х	-
S5035	Home infusion therapy, routine service of infusion device (e.g., pump maintenance)	-	Х
S5036	Home infusion therapy, repair of infusion device (e.g., pump repair)	-	X
S5100	Day care services, adult, per 15 minutes	Х	-
S5101	Day care services, adult, per half day	Х	-
S5102	Day care services, adult, per diem	Х	-
S5105	Day care services, center based, not incl in program fee, per diem	Х	-
S5108	Home care training to home care client, per 15 minutes	-	Х
S5109	Home care training to home care client, per 15 minutes per session	-	Х
S5110	Home care training, family, per 15 minutes	Х	-
S5111	Home care training, family, per session	Х	-
S5115	Home care training, non-family, per 15 minutes	Х	-
S5116	Home care training, non-family, per session	Х	-
S5120	Chore services, per 15 minutes	Х	-
S5121	Home care training, family, per diem	Х	-
S5125	Attendant care services, per 15 minutes	Х	-
S5126	Attendant care services, per diem	Х	-
S5130	Homemaker service, nos, per 15 minutes	Х	-
S5131	Homemaker services, nos, per diem	Х	-
S5135	Companion care, adult, per 15 minutes	Х	-
S5136	Companion care, adult, per diem	Х	-
S5140	Foster care, adult, per diem	Х	-
S5141	Foster care, adult, per month	Х	-
S5145	Foster care, therapeutic, child, per diem	Х	-
S5146	Foster care, therapeutic, child, per month	Χ	-
S5150	Unskilled respite care, not hospice, per 15 minutes	Х	-
S5151	Unskilled respite care, not hospice, per diem	Х	-
S5160	Emergency response system, installation and testing	Х	-
S5161	Emergency response system, service fee per month	Х	-

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S5162	Emergency response system, purchase only	Х	-
	Home modifications, per service	Х	-
S5170	Home delivered meals, including preparation, per meal	Х	-
S5175	Laundry service, external, professional, per order	Х	-
S5180	Home health respiratory therapy, initial evaluation	-	Х
S5181	Home health respiratory therapy, nos, per diem	-	Х
S5185	Medication reminder services, no face to face, per month	Х	-
S5190	Wellness assessment, performed by non-physician	Х	-
S8030	Scleral application of tantalum ring(s) for localization of lesions for proton beam therapy	Х	-
S8035	Magnetic source imaging	Х	-
S8040	Topographic brain mapping	Х	-
S8085	Fluorine-18 fluorodeoxygluco	Х	-
S8092	Electron beam computed tomog	Х	-
S8130	Interferential current stimulator, 2 channel	Х	-
S8131	Interferential current stimulator, 4 channel	Х	-
S8415	Supplies for home delivery of infant	Х	-
S8930	Auricular electrostim	Х	-
S8940	Equestrian/hippotherapy, per session	Х	-
S8948	Application of a modality (requiring constant provider attendance) to one or	Х	-
S8950	Complex lymphedema therapy,	Х	-
S8990	Physical or manipulative therapy performed for maintenance rather than restoration	Х	-
	Home uterine monitor with or	Х	-
S9002	Intra-vaginal motion sensor system, provides biofeedback for pelvic floor muscle rehabilitation device	Х	-
S9007	Ultrafiltration monitor	-	X
S9024	Paranasal sinus ultrasound	Х	-
S9034	Extracorporeal shockwave lithotripsy for gall stones (if performed with ercp,	Х	-
S9055	Procuren or other growth fac	Х	-
S9056	Coma stimulation per diem	Х	-
S9090	Vertebral axial decompressio	Х	-
S9097	Home visit for wound care	-	Х
S9098	Home visit, phototherapy services (e.g., bililite), including equipment rental, nursing services, blood draw, supplies a	-	Х

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S9110	Telemonitoring of patient in their home, including all necessary equipment; computer system, connections, and	X	_	
	software; maintenance; patient education and support; per	^	-	
S9122	Home health aide or certifie	-	X	
S9125	Respite care, in the home, p	Х	-	
S9126	Hospice care, in the home, p	-	Χ	
S9127	Social work visit, in the home	-	Χ	
S9140	Diabetic management program,	Х	-	
S9141	Diabetic management program,	X	-	
S9145	Insulin pump initiation, instruction in initial use of pump (pump not included)	Х	-	
S9150	Evaluation by ocularist	X	-	
S9381	Delivery or service to high risk areas requiring escort or extra protection, per visit	Х	-	
S9430	Pharmacy compounding and dispensing services	Х	-	
S9432	Med food non inborn err meta	Х	-	
S9436	Childbirth preparation/lamaze classes, non-physician provider, per session	Х	-	
S9437	Childbirth refresher classes, non-physician provider, per session	Х	-	
S9438	Cesarean birth classes, non-physician provider, per session	Х	-	
S9439	Vbac (vaginal birth after cesarean) classes, non-physician provider, per session	Х	-	
S9442	Birthing classes, non-physician provider, per session	Х	-	
S9444	Parenting classes, non-physician provider, per session	Х	-	
S9447	Infant safety (including cpr) classes, non-physician provider, per session	Х	-	
S9449	Weight management classes, non-physician provider, per session	Х	-	
S9451	Exercise classes, non-physician provider, per session	Х	-	
S9453	Smoking cessation classes, non-physician provider, per session	Х	-	
S9454	Stress management classes, non-physician provider, per session	Х	-	
S9472	Cardiac rehabilitation progr	Х	-	
S9473	Pulmonary rehabilitation pro	Х	-	
S9474	Enterostomal therapy by a re	Х	-	
S9475	Ambulatory setting substance	-	Х	
S9476	Vestibular rehabilitation program, non-physician provider, per diem	Х	-	
S9480	Intensive outpatient psychia	-	Х	
S9482	Family stabilization services, per 15 minutes	Х	-	
S9484	Crisis intervention mental health services, per hour	_	X	

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S9485	Crisis intervention mental h	-	Х	
S9900	Services by a journal-listed christian science practitioner for the purpose of healing, per diem	Х	-	
S9901	Christian sci nurse visit	Х	-	
S9960	Air ambulanc nonemerg fixed	Х	-	
S9961	Air ambulan nonemerg rotary	Х	-	
S9970	Health club membership, annual	Х	-	
S9975	Transplant related lodging, meals and transportation, per diem	Х	-	
S9976	Lodging, per diem, not otherwise specified	Х	-	
S9977	Meals, per diem, not otherwise specified	X	-	
S9981	Medical records copying fee, administrative	X	-	
S9982	Medical records copying fee, per page	Х	-	
S9986	Not medically necessary service (patient is aware that service not medically necessary)	Х	-	
S9989	Services provided outside of the united states of america (list in addition to code(s) for service(s)	Х	-	
S9992	Transportation costs to and	Х	-	
S9994	Lodging costs (e.g. hotel ch	Х	-	
S9996	Meals for clinical trial par	Х	-	
T1000	Private duty/independent nursing service(s) - licensed, up to 15 minutes	-	X	
T1001	Nursing assessment/evaluation	-	Х	
T1002	Rn services, up to 15 minutes	-	Х	
T1003	Lpn/lvn services, up to 15 minutes	-	Χ	
Γ1004	Services of a qualified nursing aide, up to 15 minutes	X	-	
T1005	Respite care services, up to 15 minutes	Х	-	
Γ1006	Alcohol and/or substance abuse services, family/couple counseling	X	-	
Γ1007	Alcohol and/or substance abuse services, treatment plan development and/or modification	Х	-	
T1009	Child sitting services for children of the individual receiving alcohol and/or substance abuse services	Х	-	
	Meals for individuals receiving alcohol and/or substance abuse services (when meals not included in the program)	Х	-	
	Alcohol and/or substance abuse services, skills development	Х	_	
	Sign language or oral interpreter services	X	-	
	Telehealth transmission, per minute, professional services bill separately	X	_	
	Clinic visit/encounter, all-inclusive	X	-	
	Case management, each 15 minutes	X	_	

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T1017	Targeted case management, each 15 minutes	Х	-
T1018	School-based individualized education program (iep) services, bundled	Х	-
T1019	Personal care services, per 15 minutes, not for an inpatient or resident of ahospital, nursing facility, icf/mr or imd,	Х	-
T1020	Personal care services, per diem, not for an inpatient or resident of ahospital, nursing facility, icf/mr or imd, part o	Х	-
T1021	Home health aide or certified nurse assistant, per visit	Х	-
T1022	Contracted home health agency services, all services provided under contract, per day	Х	_
T1023	Screening to determine the appropriateness of consideration of an individualfor participation in a specified program, pr	Х	-
T1024	Evaluation and treatment by an integrated, specialty team contracted to providecoordinated care to multiple or severely	Х	-
T1025	Intensive, extended multidisciplinary services provided in a clinic setting tochildren with complex medical, physical, m	Х	-
T1026	Intensive, extended multidisciplinary services provided in a clinic setting tochildren with complex medical, physical, m	Х	-
T1027	Family training and counseling for child development, per 15 minutes	Х	-
T1028	Assessment of home, physical and family environment, to determine suitabilityto meet patient's medical needs	Х	-
T1029	Comprehensive environmental lead investigation, not including laboratoryanalysis, per dwelling	Х	-
T1030	Nursing care, in the home, by registered nurse, per diem	-	Х
T1031	Nursing care, in the home, by licensed practical nurse, per diem	-	Х
T1032	Services performed by a doula birth worker, per 15 minutes	Х	-
T1033	Services performed by a doula birth worker, per diem	Х	-
T1040	Comm bh clinic svc per diem	Х	-
	Comm bh clinic svc per month	Х	-
	Elec med comp dev, noc	Х	-
	Non-emergency transportation; patient attendant/escort	Х	-
	Non-emergency transportation; per diem	Х	_
	Non-emergency transportation; encounter/trip	Х	-
	Non-emergency transport; commercial carrier, multi-pass	Х	-
T2005	Non-emergency transportation; non-ambulatory stretcher van	Х	-

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T2007	Transportation waiting time, air ambulance and non-emergency vehicle, one-half(1/2) hour increments	X	-	
T2010	Preadmission screening and resident review (pasrr) level i id screening, per screen	X	-	
T2011	Preadmission screening and resident review (pasrr) level ii eval, per eval	X	-	
T2012	Habilitation, educational; waiver, per diem	X	-	
T2013	Habilitation, educational, waiver; per hour	X	-	
T2014	Habilitation, prevocational, waiver; per diem	X	-	
T2015	Habilitation, prevocational, waiver; per hour	X	-	
T2016	Habilitation, residential, waiver; per diem	X	-	
T2017	Habilitation, residential, waiver; 15 minutes	X	-	
T2018	Habilitation, supported employment, waiver; per diem	X	-	
T2019	Habilitation, supported employment, waiver; per 15 minutes	X	-	
T2020	Day habilitation, waiver; per diem	X	-	
T2021	Day habilitation, waiver; per 15 minutes	X	-	
T2022	Case management, per month	X	-	
T2023	Targeted case management; per month	X	-	
T2024	Service assessment/plan of care development, waiver	X	-	
T2025	Waiver services; not otherwise specified (nos)	X	-	
T2026	Specialized childcare, waiver; per diem	X	-	
T2027	Specialized childcare, waiver; per 15 minutes	X	-	
T2028	Specialized supply, not otherwise specified, waiver	X	-	
T2029	Specialized medical equipment, not otherwise specified, waiver	X	-	
T2030	Assisted living, waiver; per month	X	-	
T2031	Assisted living; waiver, per diem	X	-	
T2032	Residential care, not otherwise specified (nos), waiver; per month	X	-	
T2033	Residential care, not otherwise specified (nos), waiver; per diem	X	-	
T2034	Crisis intervention, waiver; per diem	X	-	
T2035	Utility services to support medical equipment and assistive technology/devices, waiver	X	-	
T2036	Therapeutic camping, overnight, waiver; each session	X	-	
T2037	Therapeutic camping, day, waiver; each session	X	-	
T2038	Community transition, waiver; per service	X	-	
T2039	Vehicle modifications, waiver; per service	X	-	
T2040	Financial management, self-directed, waiver; per 15 minutes	Х	-	

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	Small Em	all Employer and Individual	
Codes Description	Not Covered	Preauthorization Required	
Disclaimer: Please note that coverage may vary by plan type and may not follow the listed services. These codes are updated quarterly. Ad injectable drugs, or specialty medications and should be directed to the Pharmacy link option within the website.	ditionally, these coding lists do not reflect information	regarding immunizations,	
T2041 Supports brokerage, self-directed, waiver; per 15 minutes	X	-	
T2042 Hospice routine home care; per diem	-	X	
T2043 Hospice continuous home care; per hour	-	X	
T2044 Hospice inpatient respite care; per diem	X	-	
T2045 Hospice general inpatient care; per diem	-	X	
T2046 Hospice long term care, room and board only; per diem	X	-	
T2047 Hab prevo waiver per 15	X	-	
T2048 Behavioral health; long-term care residential (non-acute care in a residential program, per	er diem X	-	
T2049 Non-emergency transportation; stretcher van, mileage; per mile	X	-	
T2050 Financial mgt waiver/diem	X	-	
T2051 Support broker waiver/diem	X	-	
T4521 Adult size brief/diaper sm	X	-	
T4522 Adult size brief/diaper med	X	-	
T4523 Adult size brief/diaper lg	X	-	
T4524 Adult size brief/diaper xl	X	-	
T4525 Adult size pull-on sm	X	-	
T4526 Adult size pull-on med	X	-	
T4527 Adult size pull-on Ig	X	-	
T4528 Adult size pull-on xl	X	-	
T4529 Ped size brief/diaper sm/med	X	-	
T4530 Ped size brief/diaper lg	X	-	
T4531 Ped size pull-on sm/med	X	-	
T4532 Ped size pull-on lg	X	-	
T4533 Youth size brief/diaper	X	-	
T4534 Youth size pull-on	X	-	
T4535 Disposable liner/shield/pad	X	-	
T4536 Reusable pull-on any size	X	-	
T4537 Reusable underpad bed size	X	-	
T4538 Diaper serv reusable diaper	X	-	
T4539 Reuse diaper/brief any size	X	-	
T4540 Reusable underpad chair size	X	-	
T4541 Large disposable underpad	X	-	

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T4542	Small disposable underpad	X	-
T4543	Disposable incontinence product, brief/diaper, bariatric, each	Х	-
T4544	Adlt disp und/pull on abv xl	Х	-
T4545	Incontinence product, disposable, penile wrap, each	Х	-
T5001	Positioning seat for persons with special orthopedic needs, for use in vehicles	Х	-
V2020	Vision svcs frames purchases	Х	-
V2025	Eyeglasses delux frames	Х	-
V2399	Lens trifocal speciality	Х	-
V2410	Lens variab asphericity sing	Х	-
V2430	Lens variable asphericity bi	Х	-
V2499	Variable asphericity lens	Х	-
V2524	Cntct lens hydrophil photoch	Х	-
V2526	Contact lens, hydrophilic, with blue-violet filter, per lens	Х	-
V2600	Hand held low vision aids	Х	-
V2610	Single lens spectacle mount	Х	-
V2615	Telescop/othr compound lens	Х	-
V2702	Deluxe lens feature	Х	-
V2718	Fresnell prism press-on lens	Х	-
V2744	Tint photochromatic lens/es	Х	-
V2745	Addition to lens, tint, any color, solid, gradient or equal, excludes photocroatic	Х	-
V2750	Anti-reflective coating	Х	-
V2755	Uv lens/es	Х	-
V2756	Eye glass case	Х	-
V2760	Scratch resistant coating	Х	-
V2761	Mirror coating, any type, solid, gradient or equal, any lens material, per lens	Х	-
V2762	Polarization, any lens material, per lens	Х	-
V2770	Occluder lens/es	Х	-
V2780	Oversize lens/es	Х	-
V2781	Progressive lens per lens	Х	-
	Lens, index 1.54 to 1.65 plastic or 1.60 to 1.79 glass, excludes polycarbonate, per lens	Х	-
	Lens, index greater than or equal to 1.66 plastic or greater than or equal to 1.80 glass	Х	-
	Lens, polycarbonate or equal, any index, per lens	Х	-

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V2786	Specialty occupational multifocal lens, per lens	Х	-	
V2787	Astigmatism correcting function of intraocular lens	Х	-	
V2788	Presbyopia correcting function of intraocular lens	Х	-	
V2797	Vision supply, accessory and/or service component of another hcpcs vision code	Х	-	
V5010	Assessment for hearing aid	-	Х	
V5011	Hearing aid fitting/checking	-	Х	
V5014	Hearing aid repair/modifying	-	Χ	
V5020	Conformity evaluation	-	Х	
V5030	Body-worn hearing aid air	-	Χ	
V5040	Body-worn hearing aid bone	Х	-	
V5050	Hearing aid monaural in ear	-	Χ	
V5060	Behind ear hearing aid	-	Х	
V5070	Glasses air conduction	-	Х	
V5080	Glasses bone conduction	Х	-	
V5090	Hearing aid dispensing fee	Х	-	
V5095	Semi-implantable middle ear hearing prosthesis	Х	-	
V5100	Body-worn bilat hearing aid	-	Χ	
V5110	Hearing aid dispensing fee	-	X	
V5120	Body-worn binaur hearing aid	-	Χ	
V5130	In ear binaural hearing aid	-	Х	
V5140	Behind ear binaur hearing ai	-	Χ	
V5150	Glasses binaural hearing aid	-	Χ	
V5160	Dispensing fee binaural	-	X	
V5171	Hearing aid, contralateral routing device, monaural, in the ear (ite)	Х	-	
V5172	Hearing aid, contralateral routing device, monaural, in the canal (itc)	Х	-	
V5181	Hearing aid, contralateral routing device, monaural, behind the ear (bte)	Х	-	
V5190	Glasses cros hearing aid	Х	-	
V5200	Cros hearing aid dispens fee	Х	-	
V5211	Hearing aid, contralateral routing system, binaural, ite/ite	Х	-	
V5212	Hearing aid, contralateral routing system, binaural, ite/itc	Х	-	
V5213	Hearing aid, contralateral routing system, binaural, ite/bte	Х	-	
V5214	Hearing aid, contralateral routing system, binaural, itc/itc	Х	-	

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V5215	Hearing aid, contralateral routing system, binaural, itc/bte	Х	-
V5221	Hearing aid, contralateral routing system, binaural, bte/bte	Х	-
V5230	Glasses bicros hearing aid	Х	-
k	Dispensing fee bicros	Х	-
V5241	Dispensing fee, monaural healing aid, any type	-	Χ
V5242	Hearing aid, analog, monaural, cic (completely in the ear canal)	-	Х
V5243	Hearing aid, analog, monaural, itc (in the canal)	-	Χ
V5244	Hearing aid, digitally programmable analog, monaural, cic	-	Χ
V5245	Hearing aid, digitally programmable analog, monaural, itc	-	Χ
V5246	Hearing aid, digitally programmable analog, monaural, ite (in the ear)	-	Χ
V5247	Hearing aid, digitally programmable analog, monaural, bte (behind the ear)	-	Χ
V5248	Hearing aid, analog, binaural, cic	-	Χ
V5249	Hearing aid, analog, binaural, itc	-	Χ
V5250	Hearing aid, digitally programmable analog, binaural, cic	-	Х
V5251	Hearing aid, digitally programmable analog, binaural, itc	-	Х
V5252	Hearing aid, digitally programmable binaural, ite	-	Х
V5253	Hearing aid, digitally programmable binaural, bte	-	Х
V5254	Hearing aid, digital, monaural, cic	-	Х
V5255	Hearing aid, digital, monaural, itc	-	Х
V5256	Hearing aid, digital, monaural, ite	-	Х
V5257	Hearing aid, digital, monaural, bte	-	Х
V5258	Hearing aid, digital, binaural, cic	-	Х
V5259	Hearing aid, digital, binaural, itc	-	Х
V5260	Hearing aid, digital, binaural, ite	-	Х
V5261	Hearing aid, digital, binaural, bte	-	X
V5262	Hearing aid, disposable, and type, monaural	-	Х
V5263	Hearing aid, disposable, and type, binaural	-	Х
V5266	Battery for use in hearing device	Х	-
V5267	Hearing aid supplies/accessories	-	Х
V5268	Assistive listening device, telephone amplifier, any type	Х	-
V5269	Assistive listening device, alerting, any type	Х	-
V5270	Assistive listening device, television amplifier, any type	Х	-

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/5271	Assistive listening device, television caption decoder	Х	-
/5272	Assistive listening device, tdd	Х	-
/5273	Assistive listening device, for use with cochlear implant	Х	-
/5274	Assistive listening devise, not otherwise specified	Х	-
/5275	Ear impression, each	Х	-
/5281	Assistive listening device, personal fm/dm system, monaural, (1 receiver, transmitter, microphone), any type	Х	-
/5282	Assistive listening device, personal fm/dm system, binaural, (2 receivers, transmitter, microphone), any type	Х	-
/5283	Assistive listening device, personal fm/dm neck, loop induction receiver	Х	-
/5284	Assistive listening device, personal fm/dm, ear level receiver	Х	-
/5285	Assistive listening device, personal fm/dm, direct audio input receiver	Х	-
/5286	Assistive listening device, personal blue tooth fm/dm receiver	Х	-
	Assistive listening device, personal fm/dm receiver, not otherwise specified	Х	-
/5288	Assistive listening device, personal fm/dm transmitter assistive listening device	Х	-
/5289	Assistive listening device, personal fm/dm adapter/boot coupling device for receiver, any type	X	-
/5290	Assistive listening device, transmitter microphone, any type	Х	-
/5298	Hearing aid, not otherwise classified	-	Χ
/5336	Repair communication device	X	-
/5362	Speech screening	X	-
/5363	Language screening	Х	-
/5364	Dysphagia screening	Х	-

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