

This prior authorization guide applies to Medicaid, Medicare, and Marketplace.

DOS Effective 10/1/19; Posted 10/30/19

All Inpatient services require prior authorization

***All Medicaid services subject to the limitations in the provider billing guides and fee schedules at <https://www.hca.wa.gov/billers-providers/claims-and-billing/professional-rates-and-billing-guides> ***

*** All Medicare services subject to the limitations in the CMS billing guide and fee schedules at <https://www.cms.gov/> ***

Code	Code Description	Comments	Apple Health & IMC Medical				IMC / BHSO (Mental Health covered svcs)	Medicare	Market Place
			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
00100	ANESTHESIA SALIVARY GLANDS WITH BIOPSY		No	No	Not Cov	No	No	No	
00102	ANESTHESIA CLEFT LIP INVOLVING PLASTIC REPAIR		No	No	Not Cov	No	No	No	
00103	ANESTHESIA EYELID RECONSTRUCTIVE PROCEDURE		No	No	Not Cov	No	No	No	
00104	ANESTHESIA ELECTROCONVULSIVE THERAPY		No	No	Not Cov	No	No	No	
00120	ANESTHESIA EXTERNAL MIDDLE AND INNER EAR W BX NOS		No	No	Not Cov	No	No	No	
00124	ANES EXTERNAL MIDDLE AND INNER EAR W BX OTOSCOPY		No	No	Not Cov	No	No	No	
00126	ANES XTRNL MID AND INNER EAR W BX TYMPANOTOMY		No	No	Not Cov	No	No	No	
00140	ANESTHESIA EYE NOT OTHERWISE SPECIFIED		No	No	Not Cov	No	No	No	
00142	ANESTHESIA EYE LENS SURGERY		No	No	Not Cov	No	No	No	
00144	ANESTHESIA EYE CORNEAL TRANSPLANT		No	No	Not Cov	No	No	No	
00145	ANESTHESIA EYE VITREORETINAL SURGERY		No	No	Not Cov	No	No	No	
00147	ANESTHESIA EYE IRIDECTOMY		No	No	Not Cov	No	No	No	
00148	ANESTHESIA EYE OPHTHALMOSCOPY		No	No	Not Cov	No	No	No	
00160	ANESTHESIA NOSE AND ACCESSORY SINUSES NOS		No	No	Not Cov	No	No	No	
00162	ANES NOSE AND ACCESSORY SINUSES RADICAL SURGERY		No	No	Not Cov	No	No	No	
00164	ANES NOSE AND ACCESSORY SINUSES BIOPSY SOFT TISSUE		No	No	Not Cov	No	No	No	
00170	ANESTHESIA INTRAORAL WITH BIOPSY NOS		No	No	Not Cov	No	No	No	
00172	ANES INTRAORAL W BIOPSY REPAIR CLEFT PALATE		No	No	Not Cov	No	No	No	
00174	ANES INTRAORAL W BX EXC RETROPHARYNGEAL TUMOR		No	No	Not Cov	No	No	No	
00176	ANESTHESIA INTRAORAL W BIOPSY RADICAL SURGERY		No	No	Not Cov	No	No	No	
00190	ANESTHESIA FACIAL BONES OR SKULL NOS		No	No	Not Cov	No	No	No	
00192	ANES FACIAL BONES SKULL RAD SURG W PROGNATHISM		No	No	Not Cov	No	No	No	
00210	ANESTHESIA INTRACRANIAL PROCEDURE NOS		No	No	Not Cov	No	No	No	
00211	ANES INTRACRANIAL CRANIOTOMY CRANIECTOMY HMTMA		No	No	Not Cov	No	No	No	
00212	ANESTHESIA INTRACRANIAL PROCEDURE SUBDURAL TAPS		No	No	Not Cov	No	No	No	
00214	ANES INTRACRANIAL BURR HOLES W VENTRICULOGRAPHY		No	No	Not Cov	No	No	No	
00215	ANES INTRACRANIAL ELEVATION DEPRSD SKULL FX XDRL		No	No	Not Cov	No	No	No	
00216	ANESTHESIA INTRACRANIAL VASCULAR PROCEDURE		No	No	Not Cov	No	No	No	
00218	ANES INTRACRANIAL PROCEDURE IN SITTING POSITION		No	No	Not Cov	No	No	No	
00220	ANES INTRACRANIAL CEREBROSPINAL FLUID SHUNTING		No	No	Not Cov	No	No	No	
00222	ANES INTRACRANIAL ELECTROCOAGULATION ICRA NERVE		No	No	Not Cov	No	No	No	
00300	ANES INTEG MUSC AND NRV HEAD NECK AND POSTERIOR TRUNK		No	No	Not Cov	No	No	No	

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
00320	ANES ESOPH THYRD LARYNX TRACH AND LYMPH NECK 1YR		No	No	Not Cov	No		No	No
00322	ANES ESOPH THYRD LARX TRACH AND LYMPH NCK BX THYRD		No	No	Not Cov	No		No	No
00326	ANESTHESIA LARYNX AND TRACHEA CHILDREN UNDER 1 YEAR		No	No	Not Cov	No		No	No
00350	ANESTHESIA MAJOR VESSELS NECK NOS		No	No	Not Cov	No		No	No
00352	ANESTHESIA MAJOR VESSELS NECK SIMPLE LIGATION		No	No	Not Cov	No		No	No
00400	ANES INTEG EXTREMITIES ANT TRUNK AND PERINEUM NOS		No	No	Not Cov	No		No	No
00402	ANESTHESIA RECONSTRUCTION BREAST		No	No	Not Cov	No		No	No
00404	ANESTHESIA RADICAL MODIFIED RADICAL BREAST		No	No	Not Cov	No		No	No
00406	ANES RADICAL MODIFIED RADICAL BREAST W NODES		No	No	Not Cov	No		No	No
00410	ANES INTEG SYS ELEC CONVERSION ARRHYTHMIAS		No	No	Not Cov	No		No	No
00450	ANESTHESIA CLAVICLE AND SCAPULA NOS		No	No	Not Cov	No		No	No
00454	ANESTHESIA CLAVICLE AND SCAPULA BIOPSY CLAVICLE		No	No	Not Cov	No		No	No
00470	ANESTHESIA PARTIAL RIB RESECTION NOS		No	No	Not Cov	No		No	No
00472	ANESTHESIA PARTIAL RIB RESECTION THORACOPLASTY		No	No	Not Cov	No		No	No
00474	ANESTHESIA PARTIAL RIB RESECTION RADICAL		No	No	Not Cov	No		No	No
00500	ANESTHESIA ESOPHAGUS		No	No	Not Cov	No		No	No
00520	ANESTHESIA CLOSED CHEST W BRONCHOSCOPY NOS		No	No	Not Cov	No		No	No
00522	ANESTHESIA CLOSED CHEST NEEDLE BIOPSY PLEURA		No	No	Not Cov	No		No	No
00524	ANESTHESIA CLOSED CHEST PNEUMOCENTESIS		No	No	Not Cov	No		No	No
00528	ANES MEDIASTINOSCOPY AND THORACOSCOPY W O 1 LUNG VNTJ		No	No	Not Cov	No		No	No
00529	ANES MEDIASTINOSCOPY AND THORACOSCOPY W 1 LUNG VNT		No	No	Not Cov	No		No	No
00530	ANES PERMANENT TRANSVENOUS PACEMAKER INSERTION		No	No	Not Cov	No		No	No
00532	ANESTHESIA ACCESS CENTRAL VENOUS CIRCULATION		No	No	Not Cov	No		No	No
00534	ANES TRANSVENOUS INSJ REPLACEMENT PACING CVDFB		No	No	Not Cov	No		No	No
00537	ANES CARDIAC ELECTROPHYSIOL STDY W RF ABLATION		No	No	Not Cov	No		No	No
00539	ANESTHESIA TRACHEOBRONCHIAL RECONSTRUCTION		No	No	Not Cov	No		No	No
00540	ANES THORACOTOMY AND THORACOSCOPY NOS		No	No	Not Cov	No		No	No
00541	ANES THORACOTOMY AND THORACOSCOPY W 1 LUNG VNTJ		No	No	Not Cov	No		No	No
00542	ANES THORACOTOMY AND THORACOSCOPY DECORTICATION		No	No	Not Cov	No		No	No
00546	ANES THORACOTOMY AND THORACOSCOPY PULMONARY RESC		No	No	Not Cov	No		No	No
00548	ANES THORACOTOMY AND THORACOSCOPY TRACHEA AND BRONCHI		No	No	Not Cov	No		No	No
00550	ANESTHESIA FOR STERNAL DEBRIDEMENT		No	No	Not Cov	No		No	No
00560	ANES HRT PERICARDIAL SAC AND GRT VESLS W O PMP OXT		No	No	Not Cov	No		No	No

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00561	ANES HRT PERICARD SAC AND GREAT VSLS W PMP OXTJ UNDER 1YR		No	No	Not Cov	No		No	No
00562	ANES HRT PERICRD SAC AND GRT VSLS W PMP OXTJ OVER 1MO PO		No	No	Not Cov	No		No	No
00563	ANES HRT PRCRD SAC AND GREAT VSL W PUMP OXTJ HYPHT		No	No	Not Cov	No		No	No
00566	ANES DIRECT CABG W O PUMP OXYGENATOR		No	No	Not Cov	No		No	No
00567	ANES DIRECT CABG W PUMP OXYGENATOR		No	No	Not Cov	No		No	No
00580	ANES HEART TRANSPLANT HEART LUNG TRANSPLANT		No	No	Not Cov	No		No	No
00600	ANESTHESIA CERVICAL SPINE AND CORD NOS		No	No	Not Cov	No		No	No
00604	ANES CERVICAL SPINE AND CORD W PATIENT SITTING		No	No	Not Cov	No		No	No
00620	ANESTHESIA THORACIC SPINE AND CORD NOS		No	No	Not Cov	No		No	No
00625	ANES THRC SPINE AND CORD ANT APPR W O 1 LUNG VENTJ		No	No	Not Cov	No		No	No
00626	ANES THORACIC SPINE AND CORD ANT APPR W 1 LNG VENT		No	No	Not Cov	No		No	No
00630	ANESTHESIA LUMBAR REGION NOS		No	No	Not Cov	No		No	No
00632	ANESTHESIA LUMBAR REGION LUMBAR SYMPATHECTOMY		No	No	Not Cov	No		No	No
00635	ANES DIAGNOSTIC THERAPEUTIC LUMBAR PUNCTURE		No	No	Not Cov	No		No	No
00640	ANES MANIPULATE SPINE CLSD CRV THORC LUMBR SPINE		No	No	Not Cov	No		No	No
00670	ANESTHESIA EXTENSIVE SPINE AND SPINAL CORD		No	No	Not Cov	No		No	No
00700	ANESTHESIA UPPER ANTERIOR ABDOMINAL WALL NOS		No	No	Not Cov	No		No	No
00702	ANES UPR ANT ABDL WALL PERCUTANEOUS LIVER BX		No	No	Not Cov	No		No	No
00730	ANESTHESIA UPPER POSTERIOR ABDOMINAL WALL		No	No	Not Cov	No		No	No
00731	ANESTHESIA UPPER GI ENDOSCOPIC PX NOS		No	No	Not Cov	No		No	No
00732	ANESTHESIA UPPER GI ENDOSCOPIC PX ERCP		No	No	Not Cov	No		No	No
00750	ANESTHESIA HERNIA REPAIR UPPER ABDOMEN NOS		No	No	Not Cov	No		No	No
00752	ANES HRNA RPR UPR ABD LMBR AND VENTRAL HERNIA AND DEHISC		No	No	Not Cov	No		No	No
00754	ANES HERNIA REPAIR UPPER ABDOMEN OMPHALOCELE		No	No	Not Cov	No		No	No
00756	ANES HRNA REPAIR UPR ABD TABDL RPR DIPHRG HRNA		No	No	Not Cov	No		No	No
00770	ANESTHESIA MAJOR ABDOMINAL BLOOD VESSELS		No	No	Not Cov	No		No	No
00790	ANES INTRAPERITONEAL UPPER ABDOMEN W LAPS NOS		No	No	Not Cov	No		No	No
00792	ANES LAPS PARTIAL HEPATECTOMY W MGMT LIVER HEMOR		No	No	Not Cov	No		No	No
00794	ANES LAPAROSCOPIC PARTIAL TOTAL PANCREATECTOMY		No	No	Not Cov	No		No	No
00796	ANES LAPAROSCOPIC LIVER TRANSPLANT		No	No	Not Cov	No		No	No
00797	ANES IPR UPPER ABDOMEN LAPS GASTRIC RSTCV MO		No	No	Not Cov	No		No	No
00800	ANESTHESIA LOWER ANTERIOR ABDOMINAL WALL NOS		No	No	Not Cov	No		No	No

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			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
00802	ANES LOWER ANT ABDOMINAL WALL PANNICULECTOMY		No	No	Not Cov	No		No	No
00811	ANESTHESIA LOWER INTST ENDOSCOPIC PX NOS		No	No	Not Cov	No		No	No
00812	ANESTHESIA LOWER INTST ENDOSCOPIC PX SCR COLSC		No	No	Not Cov	No		No	No
00813	ANESTHESIA COMBINED UPPER AND LOWER GI ENDOSCOPIC PX		No	No	Not Cov	No		No	No
00820	ANESTHESIA LOWER POSTERIOR ABDOMINAL WALL		No	No	Not Cov	No		No	No
00830	ANESTHESIA HERNIA REPAIR LOWER ABDOMEN NOS		No	No	Not Cov	No		No	No
00832	ANES LWR ABD VENTRAL AND INCISIONAL HERNIA REPAIR		No	No	Not Cov	No		No	No
00834	ANES HERNIA REPAIR LOWER ABDOMEN NOS AND 1YR AGE		No	No	Not Cov	No		No	No
00836	ANES HRNA RPR LWR ABD NOS INFTS UNDER 37WK BRTH 50WK		No	No	Not Cov	No		No	No
00840	ANESTHESIA INTRAPERITONEAL LOWER ABD W LAPS NOS		No	No	Not Cov	No		No	No
00842	ANES IPER LOWER ABDOMEN W LAPS AMNIOCENTESIS		No	No	Not Cov	No		No	No
00844	ANES IPER LOWER ABD W LAPS ABDOMINOPRNL RESCJ		No	No	Not Cov	No		No	No
00846	ANES IPER LOWER ABD W LAPS RAD HYSTERECTOMY		No	No	Not Cov	No		No	No
00848	ANES IPER LOWER ABD W LAPS PELVIC EXENTERATION		No	No	Not Cov	No		No	No
00851	ANES IPER LWR ABD W LAPS TUBAL LIGATION TRANSECT		No	No	Not Cov	No		No	No
00860	ANES EXTRAPERITONEAL LWR ABD W URINARY TRACT NOS		No	No	Not Cov	No		No	No
00862	ANES XTRPRTL LOWER ABD UR TRACT RENAL DON NFRCT		No	No	Not Cov	No		No	No
00864	ANES XTRPRTL LWER ABD W URINARY TRACT TOT CYSTEC		No	No	Not Cov	No		No	No
00865	ANES XTRPRTL LWR ABD W URINARY TRACT RAD PRSTECT		No	No	Not Cov	No		No	No
00866	ANES XTRPRTL LOWER ABD W URIN TRACT ADRENLECTOMY		No	No	Not Cov	No		No	No
00868	ANES XTRPRTL LWR ABD W URIN TRACT RENAL TRANSPL		No	No	Not Cov	No		No	No
00870	ANES XTRPRTL LWR ABD W URIN TRACT CSTOLITHOTOMY		No	No	Not Cov	No		No	No
00872	ANES LITHOTRP XTRCORP SHOCK WAVE W WATER BATH		No	No	Not Cov	No		No	No
00873	ANES LITHOTRP XTRCORP SHOCK WAVE W O WATER BATH		No	No	Not Cov	No		No	No
00880	ANESTHESIA MAJOR LOWER ABDOMINAL VESSELS NOS		No	No	Not Cov	No		No	No
00882	ANES MAJOR LOWER ABDOMINAL VESSELS IVC LIGATION		No	No	Not Cov	No		No	No
00902	ANESTHESIA ANORECTAL PROCEDURE		No	No	Not Cov	No		No	No
00904	ANESTHESIA RADICAL PERINEAL PROCEDURE		No	No	Not Cov	No		No	No
00906	ANESTHESIA VULVECTOMY		No	No	Not Cov	No		No	No
00908	ANESTHESIA PERINEAL PROSTATECTOMY		No	No	Not Cov	No		No	No

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00910	ANES TRANSURETHRAL W URETHROCYSTOSCOPY NOS		No	No	Not Cov	No	No	No	
00912	ANES TRANSURETHRAL RESECTION OF BLADDER TUMOR		No	No	Not Cov	No	No	No	
00914	ANESTHESIA TRANSURETHRAL RESECTION OF PROSTATE		No	No	Not Cov	No	No	No	
00916	ANES TRURL POST-TRURL RESECTION BLEEDING		No	No	Not Cov	No	No	No	
00918	ANES TRURL FRAGMNTJ MANJ AND RMVL URETERAL CALCULUS		No	No	Not Cov	No	No	No	
00920	ANESTHESIA MALE GENITALIA INCL OPEN URETHRAL PX		No	No	Not Cov	No	No	No	
00921	ANES VASECTOMY UNI BI INCL OPEN URETHRAL PX		No	No	Not Cov	No	No	No	
00922	ANES SEMINAL VESICLES INCL OPEN URETHRAL PX		No	No	Not Cov	No	No	No	
00924	ANES UNDESCND TESTIS UNI BI INCL OPEN URTL PX		No	No	Not Cov	No	No	No	
00926	ANES RAD ORCHIECTOMY INGUN INCL OPEN URTL PX		No	No	Not Cov	No	No	No	
00928	ANES RAD ORCHIECTOMY ABDOMINAL INCL OPN URTL		No	No	Not Cov	No	No	No	
00930	ANES ORCHIOPEXY UNI BI INCL OPEN URETHRAL PX		No	No	Not Cov	No	No	No	
00932	ANES COMPLETE AMPUTATION PENIS INCL OPEN URTL		No	No	Not Cov	No	No	No	
00934	ANES RAD AMP PENIS W BI INGUINAL LYMPH NODE RMVL		No	No	Not Cov	No	No	No	
00936	ANES RAD AMP PENIS W BI INGUNL AND ILIAC LYMPH RMOVL		No	No	Not Cov	No	No	No	
00938	ANES INSJ PENILE PROSTH PRNL INCL OPEN URTL		No	No	Not Cov	No	No	No	
00940	ANESTHESIA VAGINAL PROCEDURE W BIOPSY NOS		No	No	Not Cov	No	No	No	
00942	ANES COLPTMY VAGNC COLPRPHY INCL BX W OPN URTL		No	No	Not Cov	No	No	No	
00944	ANESTHESIA VAGINAL HYSTERECTOMY INCL BIOPSY		No	No	Not Cov	No	No	No	
00948	ANESTHESIA CERVICAL CERCLAGE INCLUDING BIOPSY		No	No	Not Cov	No	No	No	
00950	ANESTHESIA CULDOSCOPY INCLUDING BIOPSY		No	No	Not Cov	No	No	No	
00952	ANES HYSTEROSCOPY AND HYSTEROSALPINGOGRAPHY W BX		No	No	Not Cov	No	No	No	
01112	ANES BONE MARROW ASPIR AND BX ANT PST ILIAC CREST		No	No	Not Cov	No	No	No	
01120	ANESTHESIA ON BONY PELVIS		No	No	Not Cov	No	No	No	
01130	ANESTHESIA BODY CAST APPLICATION OR REVISION		No	No	Not Cov	No	No	No	
01140	ANESTHESIA INTERPELVI ABDOMINAL AMPUTATION		No	No	Not Cov	No	No	No	
01150	ANES RADICAL TUMOR PELVIS XCP HINDQUARTER AMP		No	No	Not Cov	No	No	No	
01160	ANES CLOSED SYMPHYSIS PUBIS SACROILIAC JOINT		No	No	Not Cov	No	No	No	
01170	ANES OPEN SYMPHYSIS PUBIS SACROILIAC JOINT		No	No	Not Cov	No	No	No	
01173	ANES OPN RPR DISRPJ PELVIS COLUMN FX ACETABULUM		No	No	Not Cov	No	No	No	
01200	ANESTHESIA CLOSED HIP JOINT PROCEDURE		No	No	Not Cov	No	No	No	
01202	ANESTHESIA ARTHROSCOPIC HIP JOINT PROCEDURE		No	No	Not Cov	No	No	No	
01210	ANESTHESIA OPEN HIP JOINT PROCEDURE NOS		No	No	Not Cov	No	No	No	
01212	ANESTHESIA OPEN HIP JOINT DISARTICULATION		No	No	Not Cov	No	No	No	
01214	ANESTHESIA OPEN TOTAL HIP ARTHROPLASTY		No	No	Not Cov	No	No	No	
01215	ANESTHESIA OPEN REVISION TOTAL HIP ARTHROPLASTY		No	No	Not Cov	No	No	No	

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01220	ANESTHESIA CLOSED PROCEDURES UPPER 2 3 FEMUR		No	No	Not Cov	No		No	No
01230	ANESTHESIA OPEN PROCEDURES UPPER 2 3 FEMUR NOS		No	No	Not Cov	No		No	No
01232	ANESTHESIA UPPER 2 3 FEMUR AMPUTATION		No	No	Not Cov	No		No	No
01234	ANES UPPER 2 3 FEMUR RADICAL RESECTION		No	No	Not Cov	No		No	No
01250	ANES NERVE MUSC TENDON FASCIA AND BURSAE UPPER LEG		No	No	Not Cov	No		No	No
01260	ANES VEINS OF UPPER LEG INCLUDING EXPLORATION		No	No	Not Cov	No		No	No
01270	ANESTHESIA ARTERIES UPPER LEG INCL BYPASS GRAFT		No	No	Not Cov	No		No	No
01272	ANES ART UPPER LEG W BYPASS GRAFT FEM ART LIG		No	No	Not Cov	No		No	No
01274	ANES UPPER LEG W BYPASS GRFT FEM ART EMBOLCTOMY		No	No	Not Cov	No		No	No
01320	ANES NERVE MUSC TENDON FASCIA AND BURSA KNEE AND POPLT		No	No	Not Cov	No		No	No
01340	ANESTHESIA CLOSED PROCEDURES LOWER 1 3 FEMUR		No	No	Not Cov	No		No	No
01360	ANESTHESIA OPEN PROCEDURES LOWER 1 3 FEMUR		No	No	Not Cov	No		No	No
01380	ANESTHESIA CLOSED PROCEDURES KNEE JOINT		No	No	Not Cov	No		No	No
01382	ANESTH DIAGNOSTIC ARTHROSCOPIC PROC KNEE JOINT		No	No	Not Cov	No		No	No
01390	ANES CLOSED PROC UPPER END TIBIA FIBULA PATELLA		No	No	Not Cov	No		No	No
01392	ANES OPEN PROC UPPER ENDS TIBIA FIBULA AND PATELLA		No	No	Not Cov	No		No	No
01400	ANES OPEN SURG ARTHROSCOPIC PROC KNEE JOINT NOS		No	No	Not Cov	No		No	No
01402	ANESTH OPEN SURG ARTHRS TOTAL KNEE ARTHROPLASTY		No	No	Not Cov	No		No	No
01404	ANESTH OPEN SURG ARTHRS KNEE DISARTICULATION		No	No	Not Cov	No		No	No
01420	ANES CAST APPLICATION REMOVAL REPAIR KNEE JOINT		No	No	Not Cov	No		No	No
01430	ANESTHESIA VEINS KNEE AND POPLITEAL AREA NOS		No	No	Not Cov	No		No	No
01432	ANES KNEE AND POPLITEAL ARTERY VEIN FISTULA NOS		No	No	Not Cov	No		No	No
01440	ANES ARTERIES OF KNEE AND POPLITEAL AREA NOS		No	No	Not Cov	No		No	No
01442	ANES ART KNEE POPLITEAL TEAEC W WO PATCH GRAFT		No	No	Not Cov	No		No	No
01444	ANES ART KNEE POPLITEAL EXC AND GRF RPR OCCLS ARYS		No	No	Not Cov	No		No	No
01462	ANESTHESIA CLOSED PROC LOWER LEG ANKLE AND FOOT		No	No	Not Cov	No		No	No
01464	ANESTHESIA ARTHROSCOPIC PROCEDURE ANKLE AND FOOT		No	No	Not Cov	No		No	No
01470	ANES NRV MUS TND FASC LOWER LEG ANKLE FOOT NOS		No	No	Not Cov	No		No	No
01472	ANES RPR RUPTURED ACHILLES TENDON W WO GRAFT		No	No	Not Cov	No		No	No
01474	ANESTHESIA GASTROCNEMIUS RECESSION		No	No	Not Cov	No		No	No
01480	ANES OPEN PROC BONES LOWER LEG ANKLE FOOT NOS		No	No	Not Cov	No		No	No
01482	ANES RADICAL RESECT INCL BELOW KNEE AMPUTATION		No	No	Not Cov	No		No	No
01484	ANES OPEN OSTEOTOMY OSTEOPLASTY TIBIA AND FIBULA		No	No	Not Cov	No		No	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
01486	ANESTHESIA OPEN TOTAL ANKLE REPLACEMENT		No	No	Not Cov	No	No	No	
01490	ANES LOWER LEG CAST APPLICATION REMOVAL REPAIR		No	No	Not Cov	No	No	No	
01500	ANESTHESIA ARTERIES LOWER LEG W BYPASS GRAFT NOS		No	No	Not Cov	No	No	No	
01502	ANES ART LOWER LEG W BYP GRAFT EMBLC DIR W CATH		No	No	Not Cov	No	No	No	
01520	ANESTHESIA VEINS OF LOWER LEG NOS		No	No	Not Cov	No	No	No	
01522	ANES VEINS LOWER LEG VENOUS THRMBC DIR W CATH		No	No	Not Cov	No	No	No	
01610	ANES NRV MUSC TNDN FSCIA BURSA SHOULDER AND AXILLA		No	No	Not Cov	No	No	No	
01620	ANES CLOSED HUMRL H N STRNCLAV JOINT AND SHO JOINT		No	No	Not Cov	No	No	No	
01622	ANES DIAG ARTHROSCOPIC SHOULDER JOINT PROC NOS		No	No	Not Cov	No	No	No	
01630	ANES ARTHRS HUMERAL H N STRNCLAV AND SHOULDER NOS		No	No	Not Cov	No	No	No	
01634	ANESTHESIA ARTHROSCOPIC SHOULDER DISARTICULATION		No	No	Not Cov	No	No	No	
01636	ANES ARTHRS INTERTHORACOSCAPULAR AMPUTATION		No	No	Not Cov	No	No	No	
01638	ANES ARTHROSCOPIC TOTAL SHOULDER REPLACEMENT		No	No	Not Cov	No	No	No	
01650	ANESTHESIA ARTERIES SHOULDER AND AXILLA NOS		No	No	Not Cov	No	No	No	
01652	ANESTHESIA AXILLARY-BRACHIAL ANEURYSM		No	No	Not Cov	No	No	No	
01654	ANES ARTERIES SHOULDER AND AXILLA BYPASS GRAFT		No	No	Not Cov	No	No	No	
01656	ANESTHESIA AXILLARY-FEMORAL BYPASS GRAFT		No	No	Not Cov	No	No	No	
01670	ANESTHESIA VEINS SHOULDER AND AXILLA		No	No	Not Cov	No	No	No	
01680	ANES SHOULDER CAST APPL REMOVAL REPAIR NOS		No	No	Not Cov	No	No	No	
01710	ANES NRV MUSC TDN FSCA AND BRS UPR ARM ELBOW NOS		No	No	Not Cov	No	No	No	
01712	ANESTHESIA OPEN TENOTOMY ELBOW TO SHOULDER		No	No	Not Cov	No	No	No	
01714	ANESTHESIA TENOPLASTY ELBOW TO SHOULDER		No	No	Not Cov	No	No	No	
01716	ANESTHESIA BICEPS TENODESIS RUPTURE LONG TENDON		No	No	Not Cov	No	No	No	
01730	ANESTHESIA CLOSED PROCEDURES HUMERUS AND ELBOW		No	No	Not Cov	No	No	No	
01732	ANESTHESIA ELBOW JOINT DIAGNOSTIC ARTHROSCOPIC		No	No	Not Cov	No	No	No	
01740	ANES OPEN SURG ARTHROSCOPIC ELBOW PROC NOS		No	No	Not Cov	No	No	No	
01742	ANESTHESIA OPEN SURG ARTHRS OSTEOTOMY HUMERUS		No	No	Not Cov	No	No	No	
01744	ANES OPEN SURG ARTHRS REPRS NON MALUNION HUMERUS		No	No	Not Cov	No	No	No	
01756	ANESTHESIA OPEN SURG ARTHRS RADICAL PROC ELBOW		No	No	Not Cov	No	No	No	
01758	ANESTH OPEN SURG ARTHRS EXC CYST TUMOR HUMERUS		No	No	Not Cov	No	No	No	

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
01760	ANESTH OPEN SURG ARTHRS TOTAL ELBOW REPLACEMENT		No	No	Not Cov	No		No	No
01770	ANESTHESIA ARTERIES UPPER ARM AND ELBOW NOS		No	No	Not Cov	No		No	No
01772	ANESTHESIA ARTERIES UPPER ARM AND ELBOW EMBOLLECTOM		No	No	Not Cov	No		No	No
01780	ANESTHESIA VEINS UPPER ARM AND ELBOW NOS		No	No	Not Cov	No		No	No
01782	ANESTHESIA VEINS UPPER ARM AND ELBOW PHLEBORRHAPHY		No	No	Not Cov	No		No	No
01810	ANES NERVE MUSCLE TDN FASCIA AND BURSA FOREARM WRIST		No	No	Not Cov	No		No	No
01820	ANES RADIUS ULNA WRIST HAND BONES CLOSED PX		No	No	Not Cov	No		No	No
01829	ANESTHESIA DIAGNOSTIC ARTHROSCOPIC PROC WRIST		No	No	Not Cov	No		No	No
01830	ANES ARTHRS ENDSCPY DSTL RADIUS ULNA WRIST HAND		No	No	Not Cov	No		No	No
01832	ANESTHESIA ARTHRS ENDOSCPIC TOTAL WRIST REPLCMT		No	No	Not Cov	No		No	No
01840	ANESTHESIA ARTERIES FOREARM WRIST AND HAND NOS		No	No	Not Cov	No		No	No
01842	ANES ARTERIES FOREARM WRIST AND HAND EMBOLLECTOMY		No	No	Not Cov	No		No	No
01844	ANESTHESIA VASCULAR SHUNT SHUNT REVISION		No	No	Not Cov	No		No	No
01850	ANESTHESIA VEINS FOREARM WRIST AND HAND NOS		No	No	Not Cov	No		No	No
01852	ANES VEINS FOREARM WRIST AND HAND PHLEBORRHAPHY		No	No	Not Cov	No		No	No
01860	ANES FOREARM WRIST HAND CAST APPL RMVL REPAIR		No	No	Not Cov	No		No	No
01916	ANESTHESIA DIAGNOSTIC ARTERIOGRAPHY VENOGRAPH		No	No	Not Cov	No		No	No
01920	ANES C-CATHJ W C ANGIOGRAPHY AND VENTRICULOGRAPHY		No	No	Not Cov	No		No	No
01922	ANES NON-INVASIVE IMAGING RADIATION THERAPY		No	No	Not Cov	No		No	No
01924	ANESTHESIA THER IVNTL RADIOLOGICAL ARTERIAL		No	No	Not Cov	No		No	No
01925	ANESTHESIA CAROTID CORONARY THER IVNTL RAD		No	No	Not Cov	No		No	No
01926	ANES ICRA ICAR AORTIC THER IVNTL RAD ARTL		No	No	Not Cov	No		No	No
01930	ANES VENOUS LYMPHATIC NOS THER IVNTL RAD NOS		No	No	Not Cov	No		No	No
01931	ANESTHESIA INTRAHEPATIC PORTAL THER IVNTL RAD		No	No	Not Cov	No		No	No
01932	ANESTHESIA INTRATHORACIC JUGULAR THER IVNTL RAD		No	No	Not Cov	No		No	No
01933	ANES INTRACRANIAL THER IVNTL RAD VENS LYMPHTC		No	No	Not Cov	No		No	No
01935	ANESTHESIA PERQ IMAGE GUIDED SPINE DIAGNOSTIC		No	No	Not Cov	No		No	No
01936	ANESTHESIA PERQ IMAGE GUIDED SPINE THERAPEUTIC		No	No	Not Cov	No		No	No
01951	ANES 2 3 DGR BRN EXC DBRDMT W WO GRFT 4 PCT TBSA		No	No	Not Cov	No		No	No
01952	ANES 2 3 DGR BRN EXC DBRDMT W WO GRFT 4-9 PCT TBSA		No	No	Not Cov	No		No	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
01953	ANES 2 3 DGR BRN EXC DBRDMT W WO GRF EA 9PCT TBS		No	No	Not Cov	No		No	No
01958	ANESTHESIA EXTERNAL CEPHALIC VERSION		No	No	Not Cov	No		No	No
01960	ANESTHESIA VAGINAL DELIVERY ONLY		No	No	Not Cov	No		No	No
01961	ANESTHESIA CESAREAN DELIVERY ONLY		No	No	Not Cov	No		No	No
01962	ANES URGENT HYSTERECTOMY FOLLOWING DELIVERY		No	No	Not Cov	No		No	No
01963	ANESTHESIA C HYST W O ANY LABOR ANALG ANES CARE		No	No	Not Cov	No		No	No
01965	ANESTHESIA INCOMPLETE MISSED ABORTION		No	No	Not Cov	No		No	No
01966	ANESTHESIA INDUCED ABORTION		No	No	Not Cov	No		No	No
01967	NEURAXIAL LABOR ANALG ANES PLND VAGINAL DELIVERY		No	No	Not Cov	No		No	No
01968	ANES CESARN DLVR FLWG NEURAXIAL LABOR ANALG ANES		No	No	Not Cov	No		No	No
01969	ANES CESARN HYST FLWG NEURAXIAL LABOR ANALG ANES		No	No	Not Cov	No		No	No
01990	PHYSIOL SUPPORT HARVEST ORGAN FROM BRAIN-DEAD PT		Not Cov	No	Not Cov	No		No	No
01991	ANES DX THER NRV BLK NJX OTH THN PRONE POS		No	No	Not Cov	No		No	No
01992	ANES DX THER NERVE BLOCK INJECTION PRONE POS		No	No	Not Cov	No		No	No
01996	DAILY HOSP MGMT EDRL SARACH CONT DRUG ADMN		No	No	Not Cov	No		No	No
01999	UNLISTED ANESTHESIA PROCEDURE		Yes	Yes	Not Cov	Yes		Yes	Yes
10004	FINE NEEDLE ASPIRATION BX W O IMG GDN EA ADDL		No	No	Not Cov	No		No	No
10005	FINE NEEDLE ASPIRATION BX W US GDN 1ST LESION		No	No	Not Cov	No		No	No
10006	FINE NEEDLE ASPIRATION BX W US GDN EA ADDL		No	No	Not Cov	No		No	No
10007	FINE NEEDLE ASPIRATION BX W FLUOR GDN 1ST LESION		No	No	Not Cov	No		No	No
10008	FINE NEEDLE ASPIRATION BX W FLUOR GDN EA ADDL		No	No	Not Cov	No		No	No
10009	FINE NEEDLE ASPIRATION BX W CT GDN 1ST LESION		No	No	Not Cov	No		No	No
10010	FINE NEEDLE ASPIRATION BX W CT GDN EA ADDL		No	No	Not Cov	No		No	No
10011	FINE NEEDLE ASPIRATION BX W MR GDN 1ST LESION		No	No	Not Cov	No		No	No
10012	FINE NEEDLE ASPIRATION BX W MR GDN EA ADDL		No	No	Not Cov	No		No	No
10021	FINE NEEDLE ASPIRATION W O IMAGING GUIDANCE		No	No	Not Cov	No		No	No
10030	IMAGE-GUIDED CATHETER FLUID COLLECTION DRAINAGE		No	No	Not Cov	No		No	No
10035	PERQ SFT TISS LOC DEVICE PLMT 1ST LES W GDNCE		No	No	Not Cov	No		No	No
10036	PERQ SFT TISS LOC DEVICE PLMT ADD LES W GDNCE		No	No	Not Cov	No		No	No
10040	ACNE SURGERY		Yes	Yes	Not Cov	No		Yes	Yes
10060	INCISION AND DRAINAGE ABSCESS SIMPLE SINGLE		No	No	Not Cov	No		No	No
10061	INCISION AND DRAINAGE ABSCESS COMPLICATED MULTIPLE		No	No	Not Cov	No		No	No
10080	INCISION AND DRAINAGE PILONIDAL CYST SIMPLE		No	No	Not Cov	No		No	No
10081	INCISION AND DRAINAGE PILONIDAL CYST COMPLICATED		No	No	Not Cov	No		No	No
10120	INCISION AND REMOVAL FOREIGN BODY SUBQ TISS SIMPLE		No	No	Not Cov	No		No	No

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10121	INCISION AND REMOVAL FOREIGN BODY SUBQ TISS COMPL		No	No	No	No		No	No
10140	I AND D HEMATOMA SEROMA FLUID COLLECTION		No	No	Not Cov	No		No	No
10160	PUNCTURE ASPIRATION ABSCESS HEMATOMA BULLA CYST		No	No	Not Cov	No		No	No
10180	INCISION AND DRAINAGE COMPLEX PO WOUND INFECTION		No	No	No	No		No	No
11000	DBRDMT EXTENSV ECZEMA INFECT SKN UP 10PCT BDY SURF		No	No	Not Cov	No		No	No
11001	DBRDMT EXTNSVE ECZEMA INFECT SKN EA 10PCT BDY SURF		No	No	Not Cov	No		No	No
11004	DBRDMT SKN SUBQ T M F NECRO INFCTJ GENT AND PR		No	No	Not Cov	No		No	No
11005	DBRDMT SKN SUBQ T M F NECRO INFCTJ ABDL WALL		No	No	Not Cov	No		No	No
11006	DBRDMT SKN SUBQ T M F NECRO INFCTJ GENT ABDL		No	No	Not Cov	No		No	No
11008	REMOVAL PROSTHETIC MATRL ABDL WALL FOR INFECTION		No	No	Not Cov	No		No	No
11010	DBRDMT W RMVL FM FX AND DISLC SKIN AND SUBQ TISSUS		No	No	No	No		No	No
11011	DBRDMT W RMVL FM FX AND DISLC SKN SUBQ T M F MUSC		No	No	No	No		No	No
11012	DBRDMT FX AND DISLC SUBQ T M F BONE		No	No	No	No		No	No
11042	DEBRIDEMENT SUBCUTANEOUS TISSUE 20 SQ CM OR LESS		No	No	No	No		No	No
11043	DEBRIDEMENT MUSCLE AND FASCIA 20 SQ CM OR LESS		No	No	No	No		No	No
11044	DEBRIDEMENT BONE MUSCLE AND FASCIA 20 SQ CM OR LESS		No	No	No	No		No	No
11045	DBRDMT SUBCUTANEOUS TISSUE EA ADDL 20 SQ CM		No	No	No	No		No	No
11046	DEBRIDEMENT MUSCLE AND FASCIA EA ADDL 20 SQ CM		No	No	No	No		No	No
11047	DEBRIDEMENT BONE EACH ADDITIONAL 20 SQ CM		No	No	No	No		No	No
11055	PARING CUTTING BENIGN HYPERKERATOTIC LESION 1		No	No	Not Cov	No		Not Cov	No
11056	PARING CUTTING BENIGN HYPERKERATOTIC LESION 2-4		No	No	Not Cov	No		No	No
11057	PARING CUTTING BENIGN HYPERKERATOTIC LESION OVER 4		No	No	Not Cov	No		No	No
11102	TANGENTIAL BIOPSY SKIN SINGLE LESION		No	No	Not Cov	No		No	No
11103	TANGENTIAL BIOPSY SKIN EA SEP ADDITIONAL LESION		No	No	Not Cov	No		No	No
11104	PUNCH BIOPSY SKIN SINGLE LESION		No	No	Not Cov	No		No	No
11105	PUNCH BIOPSY SKIN EA SEP ADDITIONAL LESION		No	No	Not Cov	No		No	No
11106	INCISIONAL BIOPSY SKIN SINGLE LESION		No	No	Not Cov	No		No	No
11107	INCISIONAL BIOPSY SKIN EA SEP ADDITIONAL LESION		No	No	Not Cov	No		No	No
11200	REMOVAL SKN TAGS MLT FIBRQ TAGS ANY AREA UPW 15		Not Cov	Not Cov	Not Cov	Not Cov		No	No
11201	REMOVAL SK TGS MLT FIBRQ TAGS ANY AREA EA 10		Not Cov	Not Cov	Not Cov	Not Cov		No	No
11300	SHAVING SKIN LESION 1 TRUNK ARM LEG DIAM 0.5CM OR LESS		No	No	Not Cov	No		No	No

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			Outpatient		ASC	Office Setting			
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11301	SHVG SKIN LESION 1 TRUNK ARM LEG DIAM 0.6-1.0 CM		No	No	Not Cov	No	No	No	
11302	SHVG SKN LESION 1 TRUNK ARM LEG DIAM 1.1-2.0 CM		No	No	Not Cov	No	No	No	
11303	SHVG SKIN LESION 1 TRUNK ARM LEG DIAM OVER 2.0 CM		No	No	Not Cov	No	No	No	
11305	SHAVING SKIN LESION 1 S N H F G DIAM 0.5 CM OR LESS		No	No	Not Cov	No	No	No	
11306	SHAVING SKIN LESION 1 S N H F G DIAM 0.6-1.0 CM		No	No	Not Cov	No	No	No	
11307	SHAVING SKIN LESION 1 S N H F G DIAM 1.1-2.0 CM		No	No	Not Cov	No	No	No	
11308	SHAVING SKIN LESION 1 S N H F G DIAM OVER 2.0 CM		No	No	Not Cov	No	No	No	
11310	SHAVING SKIN LESION 1 F E E N L M DIAM 0.5 CM OR LESS		No	No	Not Cov	No	No	No	
11311	SHVG SKIN LESION 1 F E E N L M DIAM 0.6-1.0 CM		No	No	Not Cov	No	No	No	
11312	SHVG SKIN LESION 1 F E E N L M DIAM 1.1-2.0 CM		No	No	Not Cov	No	No	No	
11313	SHAVING SKIN LESION 1 F E E N L M DIAM OVER 2.0 CM		No	No	Not Cov	No	No	No	
11400	EXC B9 LESION MRGN XCP SK TG T A L 0.5 CM OR LESS		No	No	Not Cov	No	No	No	
11401	EXC B9 LESION MRGN XCP SK TG T A L 0.6-1.0 CM		No	No	Not Cov	No	No	No	
11402	EXC B9 LESION MRGN XCP SK TG T A L 1.1-2.0 CM		No	No	Not Cov	No	No	No	
11403	EXC B9 LESION MRGN XCP SK TG T A L 2.1-3.0 CM		No	No	Not Cov	No	No	No	
11404	EXC B9 LESION MRGN XCP SK TG T A L 3.1-4.0 CM		No	No	No	No	No	No	
11406	EXC B9 LESION MRGN XCP SK TG T A L OVER 4.0 CM		No	No	No	No	No	No	
11420	EXC B9 LESION MRGN XCP SK TG S N H F G 0.5 CM OR LESS		No	No	Not Cov	No	No	No	
11421	EXC B9 LESION MRGN XCP SK TG S N H F G 0.6-1.0CM		No	No	Not Cov	No	No	No	
11422	EXC B9 LESION MRGN XCP SK TG S N H F G 1.1-2.0CM		No	No	Not Cov	No	No	No	
11423	EXC B9 LESION MRGN XCP SK TG S N H F G 2.1-3.0CM		No	No	Not Cov	No	No	No	
11424	EXC B9 LESION MRGN XCP SK TG S N H F G 3.1-4.0CM		No	No	No	No	No	No	
11426	EXC B9 LESION MRGN XCP SK TG S N H F G OVER 4.0CM		No	No	No	No	No	No	
11440	EXC B9 LESION MRGN XCP SK TG F E E N L M 0.5CM OR LESS		No	No	Not Cov	No	No	No	
11441	EXC B9 LES MRGN XCP SK TG F E E N L M 0.6-1.0CM		No	No	Not Cov	No	No	No	
11442	EXC B9 LES MRGN XCP SK TG F E E N L M 1.1-2.0CM		No	No	Not Cov	No	No	No	
11443	EXC B9 LES MRGN XCP SK TG F E E N L M 2.1-3.0CM		No	No	Not Cov	No	No	No	
11444	EXC B9 LES MRGN XCP SK TG F E E N L M 3.1-4.0CM		No	No	No	No	No	No	
11446	EXC B9 LESION MRGN XCP SK TG F E E N L M OVER 4.0CM		No	No	No	No	No	No	
11450	EXCISION HIDRADENITIS AXILLARY SMPL INTRM RPR		No	No	No	No	No	No	
11451	EXCISION HIDRADENITIS AXILLARY COMPLEX REPAIR		No	No	No	No	No	No	
11462	EXCISION HIDRADENITIS INGUINAL SMPL INTRM RPR		No	No	No	No	No	No	
11463	EXCISION HIDRADENITIS INGUINAL COMPLEX REPAIR		No	No	No	No	No	No	
11470	EXCISION H P P U SIMPLE INTERMEDIATE REPAIR		No	No	No	No	No	No	
11471	EXCISION H P P U COMPLEX REPAIR		No	No	No	No	No	No	
11600	EXCISION MAL LESION TRUNK ARM LEG 0.5 CM OR LESS		No	No	Not Cov	No	No	No	
11601	EXCISION MAL LESION TRUNK ARM LEG 0.6-1.0 CM		No	No	Not Cov	No	No	No	
11602	EXCISION MAL LESION TRUNK ARM LEG 1.1-2.0 CM		No	No	Not Cov	No	No	No	

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This prior authorization guide applies to Medicaid, Medicare, and Marketplace.

DOS Effective 10/1/19; Posted 10/30/19

All Inpatient services require prior authorization

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*** All Medicare services subject to the limitations in the CMS billing guide and fee schedules at <https://www.cms.gov/> ***

Code	Code Description	Comments	Apple Health & IMC Medical				IMC / BHSO (Mental Health covered svcs)	Medicare	Market Place
			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
11603	EXCISION MAL LESION TRUNK ARM LEG 2.1-3.0 CM		No	No	Not Cov	No		No	No
11604	EXCISION MAL LESION TRUNK ARM LEG 3.1-4.0 CM		No	No	No	No		No	No
11606	EXCISION MALIGNANT LESION TRUNK ARM LEG OVER 4.0 CM		No	No	No	No		No	No
11620	EXCISION MALIGNANT LESION S N H F G 0.5 CM OR LESS		No	No	Not Cov	No		No	No
11621	EXCISION MALIGNANT LESION S N H F G 0.6-1.0 CM		No	No	Not Cov	No		No	No
11622	EXCISION MALIGNANT LESION S N H F G 1.1-2.0 CM		No	No	Not Cov	No		No	No
11623	EXCISION MALIGNANT LESION S N H F G 2.1-3.0 CM		No	No	Not Cov	No		No	No
11624	EXCISION MALIGNANT LESION S N H F G 3.1-4.0 CM		No	No	No	No		No	No
11626	EXCISION MALIGNANT LESION S N H F G OVER 4.0 CM		No	No	No	No		No	No
11640	EXCISION MALIGNANT LESION F E E N L 0.5 CM OR LESS		No	No	Not Cov	No		No	No
11641	EXCISION MALIGNANT LESION F E E N L 0.6-1.0 CM		No	No	Not Cov	No		No	No
11642	EXCISION MALIGNANT LESION F E E N L 1.1-2.0 CM		No	No	Not Cov	No		No	No
11643	EXCISION MALIGNANT LESION F E E N L 2.1-3.0 CM		No	No	Not Cov	No		No	No
11644	EXCISION MALIGNANT LESION F E E N L 3.1-4.0 CM		No	No	No	No		No	No
11646	EXCISION MALIGNANT LESION F E E N L OVER 4.0 CM		No	No	No	No		No	No
11719	TRIMMING NONDYSTROPHIC NAILS ANY NUMBER	>20yrs (coverage based on approved HCA ICD list)	No	No	Not Cov	No		No	No
11720	DEBRIDEMENT NAIL ANY METHOD 1-5	>20yrs (coverage based on approved HCA ICD list)	No	No	Not Cov	No		No	No
11721	DEBRIDEMENT NAIL ANY METHOD 6 OR GRT	>20yrs (coverage based on approved HCA ICD list)	No	No	Not Cov	No		No	No
11730	AVULSION NAIL PLATE PARTIAL COMPLETE SIMPLE 1	>20yrs (coverage based on approved HCA ICD list)	No	No	Not Cov	No		No	No
11732	AVULSION NAIL PLATE PARTIAL COMP SIMPLE EA ADDL	>20yrs (coverage based on approved HCA ICD list)	No	No	Not Cov	No		No	No
11740	EVACUATION SUBUNGUAL HEMATOMA	>20yrs (coverage based on approved HCA ICD list)	No	No	Not Cov	No		No	No
11750	EXCISION NAIL MATRIX PERMANENT REMOVAL	>20yrs (coverage based on approved HCA ICD list)	No	No	Not Cov	No		No	No
11755	BIOPSY NAIL UNIT SEPARATE PROCEDURE	>20yrs (coverage based on approved HCA ICD list)	No	No	Not Cov	No		No	No
11760	REPAIR NAIL BED	>20yrs (coverage based on approved HCA ICD list)	No	No	No	No		No	No
11762	RECONSTRUCTION NAIL BED W GRAFT	>20yrs (coverage based on approved HCA ICD list)	No	No	Not Cov	No		No	No
11765	WEDGE EXCISION SKIN NAIL FOLD	>20yrs (coverage based on approved HCA ICD list)	No	No	Not Cov	No		No	No
11770	EXCISION PILONIDAL CYST SINUS SIMPLE		No	No	No	No		No	No
11771	EXCISION PILONIDAL CYST SINUS EXTENSIVE		No	No	No	No		No	No
11772	EXCISION PILONIDAL CYST SINUS COMPLICATED		No	No	No	No		No	No
11900	INJECTION INTRALESIONAL UP TO AND INCLUD 7 LESIONS		No	No	Not Cov	No		Yes	No
11901	INJECTION INTRALESIONAL OVER 7 LESIONS		No	No	Not Cov	No		Yes	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
11920	TATTOOING INCL MICROPIGMENTATION 6.0 CM OR LESS	MD & MP No PA w/ Breast Cancer Dx C50*, D05*	Yes	Yes	Not Cov	Yes		Not Cov	Yes
11921	TATTOOING INCL MICROPIGMENTATION 6.1-20.0 CM		No	No	Not Cov	No		Not Cov	No
11922	TATTOOING INCL MICROPIGMENTATION EA 20.0 CM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
11950	SUBCUTANEOUS INJECTION FILLING MATERIAL 1 CC OR LESS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
11951	SUBCUTANEOUS INJECTION FILLING MATRL 1.1-5.0 CC		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
11952	SUBCUTANEOUS INJECTION FILLING MATRL 5.1-10.0CC		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
11954	SUBCUTANEOUS INJECTION FILLING MATRL OVER 10.0 CC		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
11960	INSERTION TISSUE EXPANDER INCL SBSQ XPNSJ		No	No	No	No		No	No
11970	REPLACEMENT TISS EXPANDER PERMANENT PROSTHESIS		No	No	No	No		No	No
11971	REMOVAL TISS EXPANDER W O INSERTION PROSTHESIS		No	No	No	No		No	No
11976	REMOVAL IMPLANTABLE CONTRACEPTIVE CAPSULES		No	No	Not Cov	No		Not Cov	No
11980	SUBCUTANEOUS HORMONE PELLETT IMPLANTATION		No	No	Not Cov	No		No	No
11981	INSJ NON-BIODEGRADABLE DRUG DELIVERY IMPLANT		No	No	Not Cov	No		No	No
11982	REMOVAL NON-BIODEGRADABLE DRUG DELIVERY IMPLANT		No	No	Not Cov	No		No	No
11983	RMVL W RINSJ NON-BIODEGRADABLE DRUG DLVR IMPLT		No	No	Not Cov	No		No	No
12001	SIMPLE REPAIR SCALP NECK AX GENIT TRUNK 2.5CM OR LESS		No	No	Not Cov	No		No	No
12002	SMPL REPAIR SCALP NECK AX GENIT TRUNK 2.6-7.5CM		No	No	Not Cov	No		No	No
12004	SIMPLE RPR SCALP NECK AX GENIT TRUNK 7.6-12.5CM		No	No	Not Cov	No		No	No
12005	SMPL RPR SCALP NECK AX GENIT TRUNK 12.6-20.0CM		No	No	No	No		No	No
12006	SMPL RPR SCALP NECK AX GENIT TRUNK 20.1-30.0CM		No	No	No	No		No	No
12007	SIMPLE REPAIR SCALP NECK AX GENIT TRUNK OVER 30.0CM		No	No	No	No		No	No
12011	SIMPLE REPAIR F E E N L M 2.5CM OR LESS		No	No	Not Cov	No		No	No
12013	SIMPLE REPAIR F E E N L M 2.6CM-5.0 CM		No	No	Not Cov	No		No	No
12014	SIMPLE REPAIR F E E N L M 5.1CM-7.5 CM		No	No	Not Cov	No		No	No
12015	SIMPLE REPAIR F E E N L M 7.6CM-12.5 CM		No	No	No	No		No	No
12016	SIMPLE REPAIR F E E N L M 12.6CM-20.0 CM		No	No	No	No		No	No
12017	SIMPLE REPAIR F E E N L M 20.1CM-30.0 CM		No	No	No	No		No	No
12018	SIMPLE REPAIR F E E N L M OVER 30.0 CM		No	No	No	No		No	No
12020	TX SUPERFICIAL WOUND DEHISCENCE SIMPLE CLOSURE		No	No	No	No		No	No
12021	TX SUPERFICIAL WOUND DEHISCENCE W PACKING		No	No	No	No		No	No
12031	REPAIR INTERMEDIATE S A T E 2.5 CM OR LESS		No	No	Not Cov	No		No	No
12032	REPAIR INTERMEDIATE S A T E 2.6-7.5 CM		No	No	Not Cov	No		No	No
12034	REPAIR INTERMEDIATE S A T E 7.6-12.5 CM		No	No	No	No		No	No
12035	REPAIR INTERMEDIATE S A T E 12.6-20.0CM		No	No	No	No		No	No
12036	REPAIR INTERMEDIATE S A T E 20.1-30.0 CM		No	No	No	No		No	No
12037	REPAIR INTERMEDIATE S A T E OVER 30.0 CM		No	No	No	No		No	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
12041	REPAIR INTERMEDIATE N H F XTRNL GENT 2.5CM OR LESS		No	No	Not Cov	No		No	No
12042	REPAIR INTERMEDIATE N H F XTRNL GENT 2.6-7.5 CM		No	No	Not Cov	No		No	No
12044	REPAIR INTERMEDIATE N H F XTRNL GENT 7.6-12.5CM		No	No	No	No		No	No
12045	REPAIR INTERMEDIATE N H F XTRNL GENT 12.6-20 CM		No	No	No	No		No	No
12046	RPR INTERMEDIATE N H F XTRNL GENT 20.1-30.0 CM		No	No	No	No		No	No
12047	REPAIR INTERMEDIATE N H F XTRNL GENT OVER 30.0 CM		No	No	No	No		No	No
12051	REPAIR INTERMEDIATE F E E N L AND MUC 2.5 CM OR LESS		No	No	Not Cov	No		No	No
12052	REPAIR INTERMEDIATE F E E N L AND MUC 2.6-5.0 CM		No	No	Not Cov	No		No	No
12053	REPAIR INTERMEDIATE F E E N L AND MUC 5.1-7.5 CM		No	No	Not Cov	No		No	No
12054	REPAIR INTERMEDIATE F E E N L AND MUC 7.6-12.5 CM		No	No	No	No		No	No
12055	REPAIR INTERMEDIATE F E E N L AND MUC 12.6-20.0CM		No	No	No	No		No	No
12056	REPAIR INTERMEDIATE F E E N L AND MUC 20.1-30.0CM		No	No	No	No		No	No
12057	REPAIR INTERMEDIATE F E E N L AND MUC OVER 30.0 CM		No	No	No	No		No	No
13100	REPAIR COMPLEX TRUNK 1.1-2.5 CM		No	No	No	No		No	No
13101	REPAIR COMPLEX TRUNK 2.6-7.5 CM		No	No	No	No		No	No
13102	REPAIR COMPLEX TRUNK EACH ADDITIONAL 5 CM OR LESS		No	No	No	No		No	No
13120	REPAIR COMPLEX SCALP ARM LEG 1.1-2.5 CM		No	No	No	No		No	No
13121	REPAIR COMPLEX SCALP ARM LEG 2.6-7.5 CM		No	No	No	No		No	No
13122	REPAIR COMPLEX SCALP ARM LEG EA ADDL 5 CM OR LESS		No	No	No	No		No	No
13131	REPAIR COMPLEX F C C M N AX G H F 1.1-2.5 CM		No	No	No	No		No	No
13132	REPAIR COMPLEX F C C M N AX G H F 2.6-7.5 CM		No	No	No	No		No	No
13133	REPAIR COMPLEX F C C M N AX G H F EA ADDL 5 CM OR LESS		No	No	No	No		No	No
13151	REPAIR COMPLEX EYELID NOSE EAR LIP 1.1-2.5 CM		No	No	No	No		No	No
13152	REPAIR COMPLEX EYELID NOSE EAR LIP 2.6-7.5 CM		No	No	No	No		No	No
13153	REPAIR COMPLX EYELID NOSE EAR LIP EA ADDL 5 CM OR LESS		No	No	No	No		No	No
13160	SECONDARY CLOSURE SURG WOUND DEHSN EXTSV COMPLIC ADJACENT TISSUE TRANSFER REARGMT TRUNK 10 SQCM OR LESS		No	No	No	No		No	No
14000			No	No	No	No		No	No
14001	ADJNT TIS TRANSFR REARRANGE TRUNK 10.1-30.0 SQCM		No	No	No	No		No	No
14020	ADJT TIS TRNSFR REARGMT SCALP ARM LEG 10 SQ CM OR LESS		No	No	No	No		No	No
14021	ADJT REARRGMT SCALP ARM LEG 10.1-30.0 SQ CM		No	No	No	No		No	No
14040	ADJT TIS TRNS REARGMT F C C M N A G H F 10SQCM OR LESS		No	No	No	No		No	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
14041	ADJT REARGMT F C C M N AX G H F 10.1-30.0 SQ CM		No	No	No	No		No	No
14060	ADJT TIS TRNSFR REARRGMT E N E L DFCT 10 SQ CM OR LESS		No	No	No	No		No	No
14061	ADJT TIS REARGMT EYE NOSE EAR LIP 10.1-30.0 SQCM		No	No	No	No		No	No
14301	ADJNT TIS TRNSFR REARGMT ANY AREA 30.1-60 SQ CM		No	No	No	No		No	No
14302	ADJT TIS TRNSFR REARGMT DEFEC EA ADDL 30 SQCM		No	No	No	No		No	No
14350	FILLETED FINGER TOE FLAP W PREPJ RECIPIENT SITE		No	No	No	No		No	No
15002	PREP SITE TRUNK ARM LEG 1ST 100 SQ CM 1PCT		No	No	No	No		No	No
15003	PREP SITE TRUNK ARM LEG ADDL 100 SQ CM 1PCT		No	No	No	No		No	No
15004	PREP SITE F S N H F G M D GT 1ST 100 SQ CM 1PCT		No	No	No	No		No	No
15005	PREP SITE F S N H F G M D GT ADDL 100 SQ CM 1PCT		No	No	No	No		No	No
15040	HARVEST SKIN TISSUE CLTR SKIN AGRFT 100 CM OR LESS		No	No	No	No		No	No
15050	PINCH GRAFT 1 MLT SM ULCER TIP OTH AREA 2CM		No	No	No	No		No	No
15100	SPLIT AGRFT T A L 1ST 100 CM AND 1PCT BDY INFT CHLD		No	No	No	No		No	No
15101	SPLIT AGRFT T A L EA 100 CM EA 1PCT BDY INFT CHLD		No	No	No	No		No	No
15110	EPIDRM AGRFT T A L 1ST 100 CM AND 1PCT BDY INFT CHLD		No	No	No	No		No	No
15111	EPIDRM AGRFT T A L EA 100 CM EA 1PCT BDY INFT CHLD		No	No	No	No		No	No
15115	EPIDERMAL AGRFT F S N H F G M D GT 1ST 100 CM OR LESS		No	No	No	No		No	No
15116	EPIDERMAL AGRFT F S N H F G M D GT EA 100 CM		No	No	No	No		No	No
15120	SPLIT AGRFT F S N H F G M D GT 1ST 100 CM OR LESS 1 PCT		No	No	No	No		No	No
15121	SPLIT AGRFT F S N H F G M D GT EA 100 CM EA 1 PCT		No	No	No	No		No	No
15130	DERMAL AUTOGRAFT TRUNK ARM LEG 1ST 100 CM		No	No	No	No		No	No
15131	DERMAL AUTOGRAFT TRUNK ARM LEG EA 100 CM EA		No	No	No	No		No	No
15135	DERMAL AUTOGRAFT F S N H F G M D GT 1ST 100		No	No	No	No		No	No
15136	DERMAL AGRFT F S N H F G M D GT EA 100 CM EA		No	No	No	No		No	No
15150	CLTR SKIN AUTOGRAFT T A L 1ST 25 CM OR LESS		No	No	No	No		No	No
15151	CLTR SKIN AGRFT T A L ADDL 1 CM-75 CM		No	No	No	No		No	No
15152	CLTR SKIN AGRFT T A L EA 100 CM EA 1PCT BODY AREA		No	No	No	No		No	No
15155	CLTR SKIN AGRFT F S N H F G M D GT 1ST 25CM OR LESS		No	No	No	No		No	No
15156	CLTR SKIN AGRFT F S N H F G M D GT ADDL 1-75CM		No	No	No	No		No	No
15157	CLTR SKIN AGRFT F S N H F G M D GT EA 100 EA		No	No	No	No		No	No
15200	FTH GFT FREE W DIRECT CLOSURE TRUNK 20 CM OR LESS		No	No	No	No		No	No
15201	FTH GFT FR W DIR CLSR TRNK EA ADDL 20 CM OR LESS		No	No	No	No		No	No
15220	FTH GFT FREE W DIRECT CLOSURE S A L 20 CM OR LESS		No	No	No	No		No	No
15221	FTH GFT FR W DIR CLSR S A L EA ADDL 20 CM OR LESS		No	No	No	No		No	No
15240	FTH GFT FR W DIR CLSR F C C M N AX G H F 20 CM OR LESS		No	No	No	No		No	No
15241	FTH GT FR W DIR CLSR F C C M N AX G H F EA20CM OR LESS		No	No	No	No		No	No

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			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
15260	FTH GFT FREE W DIRECT CLOSURE N E E L 20 SQ CM OR LESS		No	No	No	No		No	No
15261	FTH GFT FREE W DIR CLSR N E E L EA 20 SQ CM OR LESS		No	No	No	No		No	No
15271	APP SKN SUB GRFT T A L AREA 100SQ CM OR LESS 1ST 25		No	No	No	No		No	No
15272	APP SKN SUB GRFT T A L AREA 100SQ CM EA ADL 25SC		No	No	No	No		No	No
15273	APP SKN SUBGRFT T A L AREA 100SQ CM 1ST 100SQ CM		No	No	No	No		No	No
15274	APP SKN SUB GRFT T A L AREAGRT THN EQ100SCM ADL 100SQCM		No	No	No	No		No	No
15275	SUB GRFT F S N H F G M D UNDER 100SQ CM 1ST 25 SQ CM		No	No	No	No		No	No
15276	SUB GRFT F S N H F G M D UNDER 100SQ CM EA ADDL25SQ CM		No	No	No	No		No	No
15277	SUB GRFT F S N H F G M D GRT THN EQ 100SCM 1ST 100SQ CM		No	No	No	No		No	No
15278	SUB GRFT F S N H F G M D GRT THN EQ 100SCM ADL 100SQ CM		No	No	No	No		No	No
15570	FRMJ DIRECT TUBED PEDICLE W WO TRANSFER TRUNK		No	No	No	No		No	No
15572	FRMJ DIRECT TUBE PEDICLE W WO TR SCALP ARMS LEGS		No	No	No	No		No	No
15574	FRMJ DIR TUBE PEDCL W WOTR FH CH CH M N AX G H F		No	No	No	No		No	No
15576	FRMJ DIRECT TUBED PEDICLE W WOTR E N E L NTRORAL		No	No	No	No		No	No
15600	DELAY FLAP SECTIONING FLAP TRUNK		No	No	No	No		No	No
15610	DELAY FLAP SECTIONING FLAP SCALP ARMS LEGS		No	No	No	No		No	No
15620	DELAY FLAP SECTIONING FLAP F C C N AX G H F		No	No	No	No		No	No
15630	DELAY FLAP SCTJ FLAP EYELIDS NOSE EARS LIPS		No	No	No	No		No	No
15650	TRANSFER ANY PEDICLE FLAP ANY LOCATION		No	No	No	No		No	No
15730	MIDFACE FLAP W PRESERVATION OF VASCULAR PEDICLES		No	No	Not Cov	No		Yes	No
15731	FOREHEAD FLAP W PRESERVATION VASCULAR PEDICLE		No	No	No	No		No	No
15733	MUSC MYOQ FSCQ FLAP HEAD AND NECK W NAMED VASC PEDCL		No	No	Not Cov	No		Yes	No
15734	MUSC MYOCUTANEOUS FASCIOCUTANEOUS FLAP TRUNK		No	No	No	No		No	No
15736	MUSC MYOCUTANEOUS FASCIOCUTANEOUS FLAP UXTR		No	No	No	No		No	No
15738	MUSC MYOCUTANEOUS FASCIOCUTANEOUS FLAP LXTR		No	No	No	No		No	No
15740	FLAP ISLAND PEDICLE ANATOMIC NAMED AXIAL ARTERY		No	No	No	No		No	No
15750	FLAP NEUROVASCULAR PEDICLE		No	No	No	No		No	No
15756	FREE MUSCLE MYOCUTANEOUS FLAP W MVASC ANAST		No	No	Not Cov	No		No	No
15757	FREE SKIN FLAP W MICROVASCULAR ANASTOMOSIS		No	No	Not Cov	No		No	No
15758	FREE FASCIAL FLAP W MICROVASCULAR ANASTOMOSIS		No	No	Not Cov	No		No	No
15760	GRAFT COMPOSITE W PRIMARY CLOSURE DONOR AREA		No	No	No	No		No	No

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Code	Code Description	Comments	Apple Health & IMC Medical				IMC / BHSO (Mental Health covered svcs)	Medicare	Market Place
			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
15770	GRAFT DERMA-FAT-FASCIA		No	No	No	No		No	No
15775	PUNCH GRAFT HAIR TRANSPLANT 1-15 PUNCH GRAFTS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Yes
15776	PUNCH GRAFT HAIR TRANSPLANT OVER 15 PUNCH GRAFTS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Yes
15777	IMPLNT BIO IMPLNT FOR SOFT TISSUE REINFORCEMENT		No	No	Not Cov	No		No	No
15780	DERMABRASION TOTAL FACE		Yes	Yes	Not Cov	Yes		Yes	Yes
15781	DERMABRASION SEGMENTAL FACE		Yes	Yes	Not Cov	Yes		Yes	Yes
15782	DERMABRASION REGIONAL OTHER THAN FACE		Yes	Yes	Not Cov	Yes		Yes	Yes
15783	DERMABRASION SUPERFICIAL ANY SITE		Yes	Yes	Not Cov	Yes		Yes	Yes
15786	ABRASION 1 LESION		Yes	Yes	Not Cov	No		Yes	Yes
15787	ABRASION EACH ADDITIONAL 4 LESIONS OR LESS		Yes	Yes	Not Cov	No		Yes	Yes
15788	CHEMICAL PEEL FACIAL EPIDERMAL		Yes	Yes	Not Cov	Yes		Not Cov	Yes
15789	CHEMICAL PEEL FACIAL DERMAL		Yes	Yes	Not Cov	Yes		Not Cov	Yes
15792	CHEMICAL PEEL NONFACIAL EPIDERMAL		Yes	Yes	Not Cov	Yes		Not Cov	Yes
15793	CHEMICAL PEEL NONFACIAL DERMAL		Yes	Yes	Not Cov	Yes		Yes	Yes
15819	CERVICOPLASTY		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
15820	BLEPHAROPLASTY LOWER EYELID		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
15821	BLEPHAROPLASTY LOWER EYELID HERNIATED FAT PAD		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
15822	BLEPHAROPLASTY UPPER EYELID		Yes	Yes	Yes	Yes		Yes	Yes
15823	BLEPHAROPLASTY UPPER EYELID W EXCESSIVE SKIN		Yes	Yes	Yes	Yes		Yes	Yes
15824	RHYTIDECTOMY FOREHEAD		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Yes
15825	RHYTIDECTOMY NECK W PLATYSMAL TIGHTENING		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Yes
15826	RHYTIDECTOMY GLABELLAR FROWN LINES		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Yes
15828	RHYTIDECTOMY CHEEK CHIN AND NECK		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Yes
15829	RHYTIDECTOMY SMAS FLAP		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Yes
15830	EXCISION SKIN ABD INFRAUMBILICAL PANNICULECTOMY		Yes	Yes	Yes	No		Yes	Yes
15832	EXCISION EXCESSIVE SKIN AND SUBQ TISSUE THIGH		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
15833	EXCISION EXCESSIVE SKIN AND SUBQ TISSUE LEG		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
15834	EXCISION EXCESSIVE SKIN AND SUBQ TISSUE HIP		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
15835	EXCISION EXCESSIVE SKIN AND SUBQ TISSUE BUTTOCK		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
15836	EXCISION EXCESSIVE SKIN AND SUBQ TISSUE ARM		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
15837	EXC EXCESSIVE SKIN AND SUBQ TISSUE FOREARM HAND		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
15838	EXC EXCSV SKIN AND SUBQ TISSUE SUBMENTAL FAT PAD		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
15839	EXCISION EXCESSIVE SKIN AND SUBQ TISSUE OTHER AREA		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
15840	GRAFT FACIAL NERVE PARALYSIS FREE FASCIAL GRAFT		No	No	No	No		No	No
15841	GRAFT FACIAL NERVE PARALYSIS FREE MUSCLE GRAFT		No	No	No	No		No	No
15842	GRF FACIAL NRV PALYSS FR MUSCLE FLAP MICROSURG		No	No	No	No		No	No
15845	GRF FACIAL NERVE PARALYSIS REGIONAL MUSCLE TR		No	No	No	No		No	No
15847	EXCISION EXCESSIVE SKIN AND SUBQ TISSUE ABDOMEN		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
15850	REMOVAL SUTURES UNDER ANESTHESIA SAME SURGEON		No	No	No	No		Not Cov	No
15851	REMOVAL SUTURES UNDER ANESTHESIA OTHER SURGEON		No	No	Not Cov	No		No	No
15852	DRESSING CHANGE UNDER ANESTHESIA		No	No	Not Cov	No		No	No
15860	IV INJECTION TEST VASCULAR FLOW FLAP GRAFT		No	No	No	No		No	No
15876	SUCTION ASSISTED LIPECTOMY HEAD AND NECK		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Yes
15877	SUCTION ASSISTED LIPECTOMY TRUNK		Not Cov	Not Cov	Not Cov	Not Cov	Not Cov	Not Cov	Yes
15878	SUCTION ASSISTED LIPECTOMY UPPER EXTREMITY		Not Cov	Not Cov	Not Cov	Not Cov	Not Cov	Not Cov	Yes
15879	SUCTION ASSISTED LIPECTOMY LOWER EXTREMITY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Yes
15920	EXC COCCYGEAL PR ULC W COCCYGECTOMY W PRIM SUTR		No	No	No	No		No	No
15922	EXC COCCYGEAL PR ULC W COCCYGECTOMY W FLAP CLSR		No	No	No	No		No	No
15931	EXCISION SACRAL PRESSURE ULCER W PRIMARY SUTURE		No	No	No	No		No	No
15933	EXC SACRAL PRESSURE ULC W PRIM SUTR W OSTECTOMY		No	No	No	No		No	No
15934	EXCISION SACRAL PRESSURE ULCER W SKIN FLAP CLSR		No	No	No	No		No	No
15935	EXC SACRAL PR ULCER W SKN FLAP CLSR W OSTECTOMY		No	No	No	No		No	No
15936	EXC SAC PR ULC PREPJ MUSC MYOQ FLAP SKN GRF CLSR		No	No	No	No		No	No
15937	EXC SAC PR ULC PREPJ MUSC MYOQ FLAP SKN GRF OSTC		No	No	No	No		No	No
15940	EXC ISCHIAL PRESSURE ULCER W PRIMARY SUTURE		No	No	No	No		No	No
15941	EXC ISCHIAL PR ULC W PRIM SUTR W OSTC ISCHIECT		No	No	No	No		No	No
15944	EXC ISCHIAL PRESSURE ULCER W SKIN FLAP CLOSURE		No	No	No	No		No	No
15945	EXC ISCHIAL PR ULC W SKN FLAP CLSR W OSTECTOMY		No	No	No	No		No	No
15946	EXC ISCHIAL PR ULCER W OSTC MUSC MYOQ FLAP SKIN		No	No	No	No		No	No
15950	EXC TROCHANTERIC PRESSURE ULCER W PRIMARY SUTR		No	No	No	No		No	No
15951	EXC TRCHNTRIC PR ULCER W PRIM SUTR W OSTECTOMY		No	No	No	No		No	No
15952	EXC TROCHANTERIC PR ULCER W SKIN FLAP CLOSURE		No	No	No	No		No	No
15953	EXC TRCHNTRIC PR ULC W SKN FLAP CLSR W OSTECTOMY		No	No	No	No		No	No
15956	EXC TROCHANTERIC PR ULCER MUSC MYOQ FLAP SKIN		No	No	No	No		No	No
15958	EXC TRCHNTRIC PR ULC MUSC MYOQ FLAP SKIN W OSTC		No	No	No	No		No	No
15999	UNLISTED PROCEDURE EXCISION PRESSURE ULCER		Yes	Yes	Not Cov	Yes		Yes	Yes
16000	INITIAL TX 1ST DEGREE BURN LOCAL TX		No	No	Not Cov	No		No	No
16020	DRS AND DBRDMT PRTL-THKNS BURNS 1ST SBSQ SMALL		No	No	Not Cov	No		No	No
16025	DRS AND DBRDMT PRTL-THKNS BURNS 1ST SBSQ MEDIUM		No	No	No	No		No	No
16030	DRS AND DBRDMT PRTL-THKNS BURNS 1ST SBSQ LARGE		No	No	No	No		No	No
16035	ESCHAROTOMY FIRST INCISION		No	No	No	No		No	No

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			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
16036	ESCHAROTOMY EACH ADDITIONAL INCISION		No	No	Not Cov	No	No	No	
17000	DESTRUCTION PREMALIGNANT LESION 1ST		No	No	Not Cov	No	No	No	
17003	DESTRUCTION PREMALIGNANT LESION 2-14 EA		No	No	Not Cov	No	No	No	
17004	DESTRUCTION PREMALIGNANT LESION 15 OR GRT		Yes	Yes	Not Cov	No	Yes	Yes	
17106	DESTRUCTION CUTANEOUS VASC PROLIFERATIVE UNDER 10CM		No	No	Not Cov	No	No	No	
17107	DSTRJ CUTANEOUS VASCULAR LESIONS 10.0-50.0 SQ CM		No	No	Not Cov	No	No	No	
17108	DSTRJ CUTANEOUS VASCULAR LESIONS OVER 50.0 SQ CM		No	No	Not Cov	No	No	No	
17110	DESTRUCTION BENIGN LESIONS UP TO 14		No	No	Not Cov	No	No	No	
17111	DESTRUCTION BENIGN LESIONS 15 OR GRT		No	No	Not Cov	No	No	No	
17250	CHEMICAL CAUTERIZATION OF GRANULATION TISSUE		No	No	Not Cov	No	No	No	
17260	DESTRUCTION MALIGNANT LESION T A L 0.5 CM OR LESS		No	No	Not Cov	No	No	No	
17261	DESTRUCTION MAL LESION TRUNK ARM LEG 0.6-1.0 CM		No	No	Not Cov	No	No	No	
17262	DESTRUCTION MAL LESION TRUNK ARM LEG 1.1-2.0CM		No	No	Not Cov	No	No	No	
17263	DESTRUCTION MAL LESION TRUNK ARM LEG 2.1-3.0CM		No	No	Not Cov	No	No	No	
17264	DESTRUCTION MAL LESION TRUNK ARM LEG 3.1-4.0CM		No	No	Not Cov	No	No	No	
17266	DESTRUCTION MAL LESION TRUNK ARM LEG OVER 4.0 CM		No	No	Not Cov	No	No	No	
17270	DESTRUCTION MALIGNANT LESION S N H F G 0.5 CM OR GRT		No	No	Not Cov	No	No	No	
17271	DESTRUCTION MALIGNANT LESION S N H F G 0.6-1.0CM		No	No	Not Cov	No	No	No	
17272	DESTRUCTION MALIGNANT LESION S N H F G 1.1-2.0CM		No	No	Not Cov	No	No	No	
17273	DESTRUCTION MALIGNANT LESION S N H F G 2.1-3.0CM		No	No	Not Cov	No	No	No	
17274	DESTRUCTION MALIGNANT LESION S N H F G 3.1-4.0CM		No	No	Not Cov	No	No	No	
17276	DSTRJ MAL LESION S N H F G LESION DIAM OVER 4.0 CM		No	No	Not Cov	No	No	No	
17280	DESTRUCTION MALIGNANT LESION F E E N L M 0.5CM OR LESS		No	No	Not Cov	No	No	No	
17281	DESTRUCTION MAL LESION F E E N L M 0.6-1.0CM		No	No	Not Cov	No	No	No	
17282	DESTRUCTION MAL LESION F E E N L M 1.1-2.0CM		No	No	Not Cov	No	No	No	
17283	DESTRUCTION MAL LESION F E E N L M 2.1-3.0CM		No	No	Not Cov	No	No	No	
17284	DESTRUCTION MAL LESION F E E N L M 3.1-4.0CM		No	No	Not Cov	No	No	No	
17286	DESTRUCTION MAL LESION F E E N L M OVER 4.0 CM		No	No	Not Cov	No	No	No	
17311	MOHS MICROGRAPHIC H N H F G 1ST STAGE 5 BLOCKS		No	No	Not Cov	No	No	No	
17312	MOHS MICROGRAPHIC H N H F G EACH ADDL STAGE		No	No	Not Cov	No	No	No	
17313	MOHS TRUNK ARM LEG 1ST STAGE 5 BLOCKS		No	No	Not Cov	No	No	No	
17314	MOHS TRUNK ARM LEG EA STAGE AFTER 1ST STAGE		No	No	Not Cov	No	No	No	
17315	MOHS TRUNK ARM LEG EA ADDL BLOCK ANY STAGE		No	No	Not Cov	No	No	No	
17340	CRYOTHERAPY CO2 SLUSH LIQUID N2 ACNE		No	No	Not Cov	No	No	No	

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17360	CHEMICAL EXFOLIATION ACNE		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
17380	ELECTROLYSIS EPILATION EACH 30 MINUTES	Bill through DSHS	Not Cov	Not Cov	Not Cov	Not Cov	Not Cov	Not Cov	Yes
17999	UNLISTED PX SKIN MUC MEMBRANE AND SUBQ TISSUE		Yes	Yes	Not Cov	Yes		Yes	Yes
19000	PUNCTURE ASPIRATION CYST BREAST		No	No	Not Cov	No		No	No
19001	PUNCTURE ASPIRATION BREAST EACH ADDITIONAL CYST		No	No	Not Cov	No		No	No
19020	MASTOTOMY W EXPLORATION DRAINAGE ABSCESS DEEP		No	No	No	No		No	No
19030	INJECTION MAMMARY DUCTOGRAM GALACTOGRAM		No	No	Not Cov	No		No	No
19081	BX BREAST W DEVICE 1ST LESION STEREOTACTIC GUID		No	No	No	No		No	No
19082	BX BREAST W DEVICE ADDL LESION STEREOTACT GUID		No	No	Not Cov	No		No	No
19083	BX BREAST W DEVICE 1ST LESION ULTRASOUND GUID		No	No	No	No		No	No
19084	BX BREAST W DEVICE ADDL LESION ULTRASOUND GUID		No	No	Not Cov	No		No	No
19085	BX BREAST W DEVICE 1ST LESION MAGNETIC RES GUID		No	No	No	No		No	No
19086	BX BREAST W DEVICE ADDL LESION MAGNET RES GUID		No	No	Not Cov	No		No	No
19100	BX BREAST NEEDLE CORE W O IMAGING GUIDANCE SPX		No	No	No	No		No	No
19101	BIOPSY BREAST OPEN INCISIONAL		No	No	No	No		No	No
19105	ABLTY CRYOSURGICAL W US GUID EA FIBROADENOMA		Not Cov	Not Cov	Not Cov	Not Cov		No	No
19110	NIPPLE EXPLORATION		No	No	No	No		No	No
19112	EXCISION LACTIFEROUS DUCT FISTULA		No	No	No	No		No	No
19120	EXC CYST ABERRANT BREAST TISSUE OPEN 1 OR GRT LESION		No	No	No	No		No	No
19125	EXC BREAST LES PREOP PLMT RAD MARKER OPEN 1 LES		No	No	No	No		No	No
19126	EXC BRST LES PREOP PLMT RAD MARKER OPN EA ADDL		No	No	No	No		No	No
19260	EXCISION CHEST WALL TUMOR INCLUDING RIBS		No	No	Not Cov	No		No	No
19271	EXC CHEST TUMOR W RCNSTJ W O MEDSTNL LMPHADEC		No	No	Not Cov	No		No	No
19272	EXC CHEST TUMOR W RCNSTJ W MEDSTNL LMPHADEC		No	No	Not Cov	No		No	No
19281	PERQ DEVICE PLACEMENT BREAST LOC 1ST LES W GDNCE		No	No	Not Cov	No		No	No
19282	PERQ DEVICE PLACEMT BREAST LOC EA LESION W GDNCE		No	No	Not Cov	No		No	No
19283	PERQ BREAST LOC DEVICE PLACEMT 1ST STRTCTC GDNCE		No	No	Not Cov	No		No	No
19284	PERQ BREAST LOC DEVICE PLACEMT EA LESION STRTCTC		No	No	Not Cov	No		No	No
19285	PERQ BREAST LOC DEVICE PLACEMT 1ST LESIO US IMAG		No	No	Not Cov	No		No	No
19286	PERQ BREAST LOC DEVICE PLACEMT EACH LES US IMAGE		No	No	Not Cov	No		No	No
19287	PERQ BREAST LOC DEVICE PLACEMT 1ST LESIO MR GUID		No	No	Not Cov	No		No	No

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19288	PERQ BREAST LOC DEVICE PLACEMT ADD LESIO MR GUID		No	No	Not Cov	No		No	No
19294	PREP TUMOR CAVITY IORT W PARTIAL MASTECTOMY		Not Cov	Yes	Not Cov	No		Yes	Yes
19296	PLMT EXPANDABLE CATH BRST FOLLOWING PRTL MAST		No	No	No	No		No	No
19297	PLMT EXPANDABLE CATH BRST CONCURRENT PRTL MAST		No	No	No	No		No	No
19298	PLMT RADTHX BRACHYTX BRST FOLLOWING PRTL MAST		No	No	No	No		No	No
19300	MASTECTOMY GYNECOMASTIA	MD & MP No PA w/ Breast Cancer Dx C50*, D05*	Yes	Yes	Yes	Yes		Yes	Yes
19301	MASTECTOMY PARTIAL		No	No	No	No		No	No
19302	MASTECTOMY PARTIAL W AXILLARY LYMPHADENECTOMY		No	No	No	No		No	No
19303	MASTECTOMY SIMPLE COMPLETE		No	No	No	No		No	No
19304	MASTECTOMY SUBCUTANEOUS		No	No	No	No		No	No
19305	MAST RAD W PECTORAL MUSCLES AXILLARY LYMPH NODES		Not Cov	No	Not Cov	No		No	No
19306	MAST RAD W PECTORAL MUSC AX INT MAM LYMPH NODES		Not Cov	No	Not Cov	No		No	No
19307	MAST MODF RAD W AX LYMPH NOD W WO PECT ALIS MIN		No	No	Not Cov	No		No	No
19316	MASTOPEXY	MD & MP No PA w/ Breast Cancer Dx C50*, D05*	Yes	Yes	Yes	Yes		Yes	Yes
19318	REDUCTION MAMMAPLASTY	MD & MP No PA w/ Breast Cancer Dx C50*, D05*	Yes	Yes	Yes	Yes		Yes	Yes
19324	MAMMAPLASTY AUGMENTATION W O PROSTHETIC IMPLANT	Bill through DSHS	Not Cov	Not Cov	Not Cov	Not Cov	Not Cov	Yes	Yes
19325	MAMMAPLASTY AUGMENTATION W PROSTHETIC IMPLANT	Bill through DSHS	Not Cov	Not Cov	Not Cov	Not Cov	Not Cov	Yes	Yes
19328	REMOVAL INTACT MAMMARY IMPLANT	MD & MP No PA w/ Breast Cancer Dx C50*, D05*	Yes	Yes	Yes	Yes		Yes	Yes
19330	REMOVAL MAMMARY IMPLANT MATERIAL	MD & MP No PA w/ Breast Cancer Dx C50*, D05*	Yes	Yes	Yes	Yes		Yes	Yes
19340	IMMT INSJ BRST PROSTH FLWG MASTOPEXY MAST RCNSTJ	MD & MP No PA w/ Breast Cancer Dx C50*, D05*	Yes	Yes	Yes	Yes		No	Yes
19342	DLYD INSJ BRST PROSTH FLWG MASTOPEXY MAST RCNSTJ	MD & MP No PA w/ Breast Cancer Dx C50*, D05*	Yes	Yes	Yes	Yes		Yes	Yes
19350	NIPPLE AREOLA RECONSTRUCTION	MD & MP No PA w/ Breast Cancer Dx C50*, D05*	Yes	Yes	Yes	Yes		Yes	Yes
19355	CORRECTION INVERTED NIPPLES	MD & MP No PA w/ Breast Cancer Dx C50*, D05*	Yes	Yes	Yes	Yes		Yes	Yes
19357	BRST RCNSTJ IMMT DLYD W TISS EXPANDER SBSQ XPNSJ		No	No	No	No		No	No
19361	BRST RCNSTJ W LATSMS D SI FLAP WO PRSTHC IMPL		Not Cov	No	Not Cov	No		No	No
19364	BREAST RECONSTRUCTION FREE FLAP		No	No	Not Cov	No		No	No
19366	BREAST RECONSTRUCTION OTHER TECHNIQUE		No	No	No	No		No	No
19367	BREAST RECONSTRUCTION TRAM FLAP 1 PEDICLE		No	No	Not Cov	No		No	No

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			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
19368	BREAST RECONSTRUCTION TRAM 1 PEDCL MVASC ANAST		Not Cov	No	Not Cov	No		No	No
19369	BREAST RECONSTRUCTION TRAM FLAP DOUBLE PEDICLE		No	No	Not Cov	No		No	No
19370	OPEN PERIPROSTHETIC CAPSULOTOMY BREAST		No	No	No	No		No	No
19371	PERIPROSTHETIC CAPSULECTOMY BREAST		No	No	No	No		No	No
19380	REVISION RECONSTRUCTED BREAST		No	No	No	No		No	No
19396	PREPARATION MOULAGE CUSTOM BREAST IMPLANT	MD & MP No PA w/ Breast Cancer Dx C50*, D05*	Yes	Yes	Yes	Yes		Yes	Yes
19499	UNLISTED PROCEDURE BREAST		Yes	Yes	Not Cov	Yes		Yes	Yes
20100	EXPLORATION PENETRATING WOUND SPX NECK		No	No	Not Cov	No		No	No
20101	EXPLORATION PENETRATING WOUND SPX CHEST		No	No	Not Cov	No		No	No
20102	EXPL PENETRATING WOUND SPX ABDOMEN FLANK BACK		No	No	Not Cov	No		No	No
20103	EXPLORATION PENETRATING WOUND SPX EXTREMITY		No	No	No	No		No	No
20150	EXCISION EPIPHYSEAL BAR		No	No	No	No		No	No
20200	BIOPSY MUSCLE SUPERFICIAL		No	No	No	No		No	No
20205	BIOPSY MUSCLE DEEP		No	No	No	No		No	No
20206	BIOPSY MUSCLE PERCUTANEOUS NEEDLE		No	No	No	No		No	No
20220	BIOPSY BONE TROCAR NEEDLE SUPERFICIAL		No	No	No	No		No	No
20225	BIOPSY BONE TROCAR NEEDLE DEEP		No	No	No	No		No	No
20240	BIOPSY BONE OPEN SUPERFICIAL		No	No	No	No		No	No
20245	BIOPSY BONE OPEN DEEP		No	No	No	No		No	No
20250	BIOPSY VERTEBRAL BODY OPEN THORACIC		No	No	No	No		No	No
20251	BIOPSY VERTEBRAL BODY OPEN LUMBAR CERVICAL		No	No	No	No		No	No
20500	INJECTION SINUS TRACT THERAPEUTIC SEPARATE PROC		No	No	Not Cov	No		No	No
20501	INJECTION SINUS TRACT DIAGNOSTIC		No	No	Not Cov	No		No	No
20520	REMOVAL FOREIGN BODY MUSCLE TENDON SHEATH SIMPLE		No	No	Not Cov	No		No	No
20525	RMVL FOREIGN BODY MUSCLE TENDON SHEATH DEEP COMP		No	No	No	No		No	No
20526	INJECTION THERAPEUTIC CARPAL TUNNEL		No	No	Not Cov	No		No	No
20527	INJECTION ENZYME PALMAR FASCIAL CORD		No	No	Not Cov	No		No	No
20550	INJECTION 1 TENDON SHEATH LIGAMENT APONEUROSIS		No	No	Not Cov	No		No	No
20551	INJECTION SINGLE TENDON ORIGIN INSERTION		No	No	Not Cov	No		No	No
20552	INJECTION SINGLE MLT TRIGGER POINT 1 2 MUSCLES		No	No	Not Cov	No		No	No
20553	INJECTION SINGLE MLT TRIGGER POINT 3 OR GRT MUSCLES		No	No	Not Cov	No		No	No
20555	PLACEMENT NEEDLES MUSCLE SUBSEQUENT RADIOELEMENT		No	No	Not Cov	No		No	No
20600	ARTHROCENTESIS ASPIR AND INJ SMALL JT BURSA W O US		No	No	Not Cov	No		No	No
20604	ARTHROCNT ASPIR AND INJ SMALL JT BURSA W US REC RPRT		No	No	Not Cov	No		No	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
20605	ARTHROCENTESIS ASPIR AND INJ INTERM JT BURS W O US		No	No	Not Cov	No		No	No
20606	ARTHROCENTESIS ASPIR AND INJ INTERM JT BURS W US		No	No	Not Cov	No		No	No
20610	ARTHROCENTESIS ASPIR AND INJ MAJOR JT BURSA W O US		No	No	Not Cov	No		No	No
20611	ARTHROCENTESIS ASPIR AND INJ MAJOR JT BURSA W US		No	No	Not Cov	No		No	No
20612	ASPIRATION AND INJECTION GANGLION CYST ANY LOCATJ		No	No	Not Cov	No		No	No
20615	ASPIRATION AND INJECTION TREATMENT BONE CYST		No	No	Not Cov	No		No	No
20650	INSERTION WIRE PIN W APPL SKELETAL TRACTION SPX		No	No	No	No		No	No
20660	APPL CRANIAL TONG STRTCTC FRAME W REMOVAL SPX		No	No	Not Cov	No		No	No
20661	APPLICATION HALO CRANIAL INCLUDING REMOVAL		Not Cov	No	Not Cov	No		No	No
20662	APPLICATION HALO PELVIC INCLUDING REMOVAL		No	No	Not Cov	No		No	No
20663	APPLICATION HALO FEMORAL INCLUDING REMOVAL		No	No	Not Cov	No		No	No
20664	APPL HALO 6 OR GRT PINS THIN SKULL OSTEOLOGY		No	No	Not Cov	No		No	No
20665	REMOVAL TONG HALO APPLIED BY ANOTHER INDIVIDUAL		No	No	No	No		No	No
20670	REMOVAL IMPLANT SUPERFICIAL SEPARATE PROCEDURE		No	No	No	No		No	No
20680	REMOVAL IMPLANT DEEP		No	No	No	No		No	No
20690	APPLICATION UNIPLANE EXTERNAL FIXATION SYSTEM		No	No	No	No		No	No
20692	APPLICATION MULTIPLANE EXTERNAL FIXATION SYSTEM		No	No	No	No		No	No
20693	ADJUSTMENT REVJ XTRNL FIXATION SYSTEM REQ ANES		No	No	No	No		No	No
20694	REMOVAL EXTERNAL FIXATION SYSTEM UNDER ANES		No	No	No	No		No	No
20696	XTRNL FIX W STEREOTACTIC ADJUSTMENT 1ST AND SUBQ		No	No	No	No		No	No
20697	XTRNL FIX W STRTCTC ADJUSTMENT EXCHANGE STRUT		No	No	No	No		No	No
20802	REPLANTATION ARM COMPLETE AMPUTATION		Not Cov	No	Not Cov	No		No	No
20805	REPLANTATION FOREARM COMPLETE AMPUTATION		Not Cov	No	Not Cov	No		No	No
20808	REPLANTATION HAND COMPLETE AMPUTATION		Not Cov	No	Not Cov	No		No	No
20816	RPLJ DGT EXCEPT THMB MTCARPHLNGJ JT COMPL AMP		Not Cov	No	Not Cov	No		No	No
20822	RPLJ DGT EXCLUDING THMB SUBLIMIS TDN COMPL AMP		No	No	No	No		No	No
20824	RPLJ THMB CARP MTCRPL JT MP JT COMPL AMPUTATION		Not Cov	No	Not Cov	No		No	No
20827	RPLJ THUMB DISTAL TIP MP JOINT COMPL AMPUTATION		No	No	Not Cov	No		No	No
20838	REPLANTATION FOOT COMPLETE AMPUTATION		Not Cov	No	Not Cov	No		No	No
20900	BONE GRAFT ANY DONOR AREA MINOR SMALL		No	No	No	No		No	No
20902	BONE GRAFT ANY DONOR AREA MAJOR LARGE		No	No	No	No		No	No
20910	CARTILAGE GRAFT COSTOCHONDRAL		No	No	No	No		No	No
20912	CARTILAGE GRAFT NASAL SEPTUM		No	No	No	No		No	No
20920	FASCIA LATA GRAFT BY STRIPPER		No	No	No	No		No	No

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			Outpatient		ASC	Office Setting			
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20922	FASCIA LATA GRAFT INCISION AND AREA EXPOSURE		No	No	No	No		No	No
20924	TENDON GRAFT FROM A DISTANCE		No	No	No	No		No	No
20926	TISSUE GRAFTS OTHER		No	No	No	No		No	No
20930	ALLOGRAFT FOR SPINE SURGERY ONLY MORSELIZED		Yes	Yes	Not Cov	No		Not Cov	Yes
20931	ALLOGRAFT FOR SPINE SURGERY ONLY STRUCTURAL		No	No	Not Cov	No		No	No
20932	OSTEOARTICULAR ALLOGRAFT W ARTICULAR SURF AND BONE		No	No	Not Cov	No		No	No
20933	HEMICORTICAL INTERCALARY ALLOGRAFT PARTIAL		No	No	Not Cov	No		No	No
20934	INTERCALARY ALLOGRAFT COMPLETE		No	No	Not Cov	No		No	No
20936	AUTOGRAFT SPINE SURGERY LOCAL FROM SAME INCISION		No	No	Not Cov	No		Not Cov	No
20937	AUTOGRAFT SPINE SURGERY MORSELIZED SEP INCISION		No	No	Not Cov	No		No	No
20938	AUTOGRAFT SPINE SURGERY BICORT TRICORT SEP INC		No	No	Not Cov	No		No	No
20939	BONE MARROW ASPIRATION BONE GRFG SPI SURG ONLY		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
20950	MNTR INTERSTITIAL FLUID PRESSURE CMPRT SYNDROME		No	No	No	No		No	No
20955	BONE GRAFT MICROVASCULAR ANASTOMOSIS FIBULA		Not Cov	No	Not Cov	No		No	No
20956	BONE GRAFT MICROVASCULAR ANAST ILIAC CREST		Not Cov	No	Not Cov	No		No	No
20957	BONE GRAFT MICROVASCULAR ANAST METATARSAL		No	No	Not Cov	No		No	No
20962	BONE GRF W MVASC ANAST OTH THN ILIAC CREST METAR		Not Cov	No	Not Cov	No		No	No
20969	FREE OSTQ FLAP W MVASC ANAST METAR GREAT TOE		Not Cov	No	Not Cov	No		No	No
20970	FREE OSTQ FLAP W MVASC ANASTOMOSIS ILIAC CREST		Not Cov	No	Not Cov	No		No	No
20972	FREE OSTQ FLAP W MVASC ANASTOMOSIS METATARSAL		No	No	No	No		No	No
20973	FR OSTQ FLAP W MVASC ANAST GRT TOE W WEB SPACE		No	No	Not Cov	No		No	No
20974	ELECTRICAL STIMULATION BONE HEALING NONINVASIVE		No	No	Not Cov	No		No	No
20975	ELECTRICAL STIMULATION BONE HEALING INVASIVE		No	No	Not Cov	No		No	No
20979	LOW INTENSITY US STIMJ BONE HEALING NONINVASIVE		No	No	Not Cov	No		No	No
20982	ABLATION BONE TUMOR RF PERQ W IMG GDN WHEN DONE		No	No	No	No		No	No
20983	ABLATJ BONE TUMOR CRYO PERQ W IMG GDN WHEN PRFMD		No	No	No	No		No	No
20985	CPTR-ASST SURGICAL NAVIGATION IMAGE-LESS		Not Cov	Not Cov	Not Cov	Not Cov		No	No
20999	UNLISTED PROCEDURE MUSCSKELETAL SYSTEM GENERAL		Yes	Yes	Not Cov	Yes		Yes	Yes
21010	ARTHROTOMY TEMPOROMANDIBULAR JOINT		No	No	No	No		No	No
21011	EXCISION TUMOR SOFT TISS FACE SCALP SUBQ UNDER 2CM		No	No	Not Cov	No		No	No
21012	EXCISION TUMOR SOFT TISS FACE SCALP SUBQ 2 CM OR GRT		No	No	Not Cov	No		No	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
21013	EXC TUMOR SOFT TISS FACE AND SCALP SUBFASCIAL UNDER 2CM		No	No	Not Cov	No		No	No
21014	EXC TUMOR SOFT TISS FACE AND SCALP SUBFASCIAL 2 CM OR GRT		No	No	Not Cov	No		No	No
21015	RAD RESECTION TUMOR SOFT TISS FACE SCALP UNDER 2CM		No	No	No	No		No	No
21016	RAD RESECTION TUMOR SOFT TISS FACE SCALP 2 CM OR GRT		No	No	No	No		No	No
21025	EXCISION BONE MANDIBLE		No	No	No	No		No	No
21026	EXCISION FACIAL BONE		No	No	No	No		No	No
21029	REMOVAL CONTOURING BENIGN TUMOR FACIAL BONE		No	No	No	No		No	No
21030	EXC BENIGN TUMOR CYST MAXL ZYGOMA ENCL AND CURTG		No	No	Not Cov	No		No	No
21031	EXCISION TORUS MANDIBULARIS		No	No	Not Cov	No		No	No
21032	EXCISION MAXILLARY TORUS PALATINUS		No	No	Not Cov	No		No	No
21034	EXCISION MALIGNANT TUMOR MAXILLA ZYGOMA		No	No	No	No		No	No
21040	EXCISION BENIGN TUMOR CYST MANDIBLE ENCL AND CURT		No	No	No	No		No	No
21044	EXCISION MALIGNANT TUMOR MANDIBLE		No	No	No	No		No	No
21045	EXCISION MALIGNANT TUMOR MANDIBLE RADICAL		No	No	Not Cov	No		No	No
21046	EXC BENIGN TUMOR CYST MNDBL INTRA-ORAL OSTEOT		No	No	No	No		No	No
21047	EXC B9 TUM CST MNDBL XTR-ORAL OSTEOT AND PRTL MNDB		No	No	No	No		No	No
21048	EXC BENIGN TUMOR CYST MAXL INTRA-ORAL OSTEOT		No	No	Not Cov	No		No	No
21049	EXC B9 TUM CST MAXL XTR-ORAL OSTEOT AND PRTL MAXLC		No	No	Not Cov	No		No	No
21050	CONDYLECTOMY TEMPOROMANDIBULAR JOINT SPX		No	No	No	No		No	No
21060	MENISCECTOMY PRTL COMPL TEMPOROMANDIBULAR JT SPX		No	No	No	No		No	No
21070	CORONOIDECTOMY SEPARATE PROCEDURE		No	No	No	No		No	No
21073	MANIPULATION TMJ THERAPEUTIC REQUIRE ANESTHESIA		Yes	Yes	Not Cov	No		Yes	Yes
21076	IMPRESSION AND PREPARATION SURG OBTURATOR PROSTHES		No	No	Not Cov	No		No	No
21077	IMPRESSION AND PREPARATION ORBITAL PROSTHESIS		No	No	Not Cov	No		No	No
21079	IMPRESSION AND PREPARATION INTERIM OBTURATOR PROST		No	No	Not Cov	No		No	No
21080	IMPRESSION AND PREPJ DEFINITIVE OBTURATOR PROSTHES		No	No	Not Cov	No		No	No
21081	IMPRESSION AND PREPJ MANDIBULAR RESECTION PROSTHES		No	No	Not Cov	No		No	No
21082	IMPRESSION AND PREPJ PALATAL AUGMENTATION PROSTHES		No	No	Not Cov	No		No	No
21083	IMPRESSION AND PREPARATION PALATAL LIFT PROSTHESIS		No	No	Not Cov	No		No	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
21084	IMPRESSION AND PREPARATION SPEECH AID PROSTHESIS		No	No	Not Cov	No		No	No
21085	IMPRESSION AND PREPARATION ORAL SURGICAL SPLINT		No	No	Not Cov	No		No	No
21086	IMPRESSION AND PREPARATION AURICULAR PROSTHESIS		No	No	Not Cov	No		No	No
21087	IMPRESSION AND PREPARATION NASAL PROSTHESIS		No	No	Not Cov	No		No	No
21088	IMPRESSION AND PREPARATION FACIAL PROSTHESIS		No	No	Not Cov	No		No	No
21089	UNLISTED MAXILLOFACIAL PROSTHETIC PROCEDURE		Yes	Yes	Not Cov	Yes		Yes	Yes
21100	APPL HALO APPLIANCE MAXILLOFACIAL FIXATION SPX		No	No	No	No		No	No
21110	APPL INTERDENTAL FIXATION DEVICE NON-FX DISLC		No	No	Not Cov	No		No	No
21116	INJECTION TEMPOROMANDIBULAR JOINT ARTHROGRAPHY		No	No	Not Cov	No		No	No
21120	GENIOPLASTY AUGMENTATION		Yes	Yes	Yes	No		Yes	Yes
21121	GENIOPLASTY SLIDING OSTEOTOMY SINGLE PIECE		Yes	Yes	Yes	No		Yes	Yes
21122	GENIOPLASTY 2 OR GRT SLIDING OSTEOTOMIES		Yes	Yes	Yes	No		Yes	Yes
21123	GENIOP SLIDING AGMNTJ W INTERPOSAL BONE GRAFTS		Yes	Yes	Yes	No		Yes	Yes
21125	AGMNTJ MNDBLR BODY ANGLE PROSTHETIC MATERIAL		Yes	Yes	Yes	No		Yes	Yes
21127	AGMNTJ MNDBLR BDY ANGL W GRF ONLAY INTERPOSAL		Yes	Yes	Yes	No		Yes	Yes
21137	REDUCTION FOREHEAD CONTOURING ONLY		Yes	Yes	Yes	No		Yes	Yes
21138	RDCTJ FHD CNTRG AND PROSTHETIC MATRL BONE GRAFT		Yes	Yes	Yes	No		Yes	Yes
21139	RDCTJ FHD CNTRG AND SETBACK ANT FRONTAL SINUS WALL		Yes	Yes	Yes	No		Yes	Yes
21141	RCNSTJ MIDFACE LEFORT I 1 PIECE W O BONE GRAFT		Not Cov	Yes	Not Cov	No		Yes	Yes
21142	RCNSTJ MIDFACE LEFORT I 2 PIECES W O BONE GRAFT		Not Cov	Yes	Not Cov	No		Yes	Yes
21143	RCNSTJ MIDFACE LEFORT I 3 OR GRT PIECE W O BONE GRAFT		Yes	Yes	Not Cov	No		Yes	Yes
21145	RCNSTJ MIDFACE LEFORT I 1 PIECE W BONE GRAFTS		Yes	Yes	Not Cov	No		Yes	Yes
21146	RCNSTJ MIDFACE LEFORT I 2 PIECES W BONE GRAFTS		Yes	Yes	Not Cov	No		Yes	Yes
21147	RCNSTJ MIDFACE LEFORT I 3 OR GRT PIECE W BONE GRAFTS		Yes	Yes	Not Cov	No		Yes	Yes
21150	RCNSTJ MIDFACE LEFORT II ANTERIOR INTRUSION		Yes	Yes	Yes	No		Yes	Yes
21151	RCNSTJ MIDFACE LEFORT II W BONE GRAFTS		Not Cov	Yes	Not Cov	No		Yes	Yes
21154	RCNSTJ MIDFACE LEFORT III W O LEFORT I		Not Cov	Yes	Not Cov	No		Yes	Yes
21155	RCNSTJ MIDFACE LEFORT III W LEFORT I		Not Cov	Yes	Not Cov	No		Yes	Yes
21159	RCNSTJ MIDFACE LEFORT III W FHD W O LEFORT I		Not Cov	Yes	Not Cov	No		Yes	Yes
21160	RCNSTJ MIDFACE LEFORT III W FHD W LEFORT I		Not Cov	Yes	Not Cov	No		Yes	Yes
21172	RCNSTJ SUPERIOR-LATERAL ORBITAL RIM AND LOWER FHD		Yes	Yes	Not Cov	No		Yes	Yes
21175	RCNSTJ BIFRONTAL SUPERIOR-LAT ORB RIMS AND LWR FHD		Yes	Yes	Not Cov	No		Yes	Yes
21179	RCNSTJ FOREHEAD AND SUPRAORB RIMS W ALGRF PROSTC		Not Cov	No	Not Cov	No		No	No

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			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
21180	RCNSTJ FOREHEAD AND SUPRAORBITAL RIMS W AUTOGRAFT		Not Cov	No	Not Cov	No		No	No
21181	RCNSTJ CONTOURING BENIGN TUMOR CRNL BONES XTRC		No	No	No	No		No	No
21182	RCNSTJ ORBIT FHD NASETHMD EXCBONE TUM GRF UNDER 40SQCM		Not Cov	No	Not Cov	No		No	No
21183	RCNSTJ ORBIT FHD NASETHMD EXC BONE GRF OVER 40 UNDER 80		Not Cov	No	Not Cov	No		No	No
21184	RCNSTJ ORBIT FHD NASETHMD EXC BONE TUM GRF OVER 80SQ		Not Cov	No	Not Cov	No		No	No
21188	RCNSTJ MDFC OTH THN LEFORT OSTEOT AND BONE GRAFTS		Not Cov	No	Not Cov	No		No	No
21193	RCNSTJ MNDBLR RAMI HRZNTL VER C L OSTEOT W O GRF		No	No	Not Cov	No		No	No
21194	RCNSTJ MNDBLR RAMI HRZNTL VER C L OSTEOT W GRAFT		Not Cov	No	Not Cov	No		No	No
21195	RCNSTJ MNDBLR RAMI AND BODY SGTL SPLT W O INT RGD		No	No	Not Cov	No		No	No
21196	RCNSTJ MNDBLR RAMI AND BDY SGTL SPLT W INT RGD FI		Not Cov	No	Not Cov	No		No	No
21198	OSTEOTOMY MANDIBLE SEGMENTAL		No	No	No	No		No	No
21199	OSTEOTOMY MANDIBLE SGMTL W GENIOGLOSSUS ADVMNT		No	No	No	No		No	No
21206	OSTEOTOMY MAXILLA SEGMENTAL		No	No	No	No		No	No
21208	OSTEOPLASTY FACIAL BONES AUGMENTATION		No	No	No	No		No	No
21209	OSTEOPLASTY FACIAL BONES REDUCTION		No	No	No	No		No	No
21210	GRAFT BONE NASAL MAXILLARY MALAR AREAS		No	No	No	No		No	No
21215	GRAFT BONE MANDIBLE		No	No	No	No		No	No
21230	GRAFT RIB CRTLG AUTOGENOUS FACE CHIN NOSE EAR		No	No	No	No		No	No
21235	GRAFT EAR CRTLG AUTOGENOUS NOSE EAR		No	No	No	No		No	No
21240	ARTHRP TEMPOROMANDIBULAR JOINT W WO AUTOGRAFT		Yes	Yes	Yes	No		Yes	Yes
21242	ARTHROPLASTY TEMPOROMANDIBULAR JT W ALLOGRAFT		Yes	Yes	Yes	No		Yes	Yes
21243	ARTHRP TMPRMAND JOINT W PROSTHETIC REPLACEMENT		Yes	Yes	Yes	No		Yes	Yes
21244	RCNSTJ MNDBL XTRORAL W TRANSOSTEAL BONE PLATE		No	No	No	No		No	No
21245	RCNSTJ MNDBL MAXL SUBPRIOSTEAL IMPLANT PARTIAL		No	No	No	No		No	No
21246	RCNSTJ MNDBL MAXL SUBPRIOSTEAL IMPLANT COMPLETE		No	No	No	No		No	No
21247	RCNSTJ MNDBLR CONDYLE W BONE CARTLG AUTOGRAFTS		Not Cov	No	Not Cov	No		No	No
21248	RCNSTJ MANDIBLE MAXL ENDOSTEAL IMPLANT PARTIAL		No	No	No	No		No	No

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21249	RCNSTJ MANDIBLE MAXL ENDOSTEAL IMPLANT COMPLETE		No	No	No	No		No	No
21255	RCNSTJ ZYGMTC ARCH GLENOID FOSSA W BONE CARTLG RECONSTRUCTION ORBIT W OSTEOTOMIES AND BONE GRAFTS		No	No	Not Cov	No		No	No
21256	PERIORBITAL OSTEOTOMIES BONE GRAFTS EXTRACRANIAL		No	No	Not Cov	No		No	No
21260	PERIORBITAL OSTEOTOMIES W BONE GRAFTS ICRA AND XTR		No	No	Not Cov	No		No	No
21261	PERIORBITAL OSTEOTOMIES W BONE GRAFTS W FOREHEAD		No	No	Not Cov	No		No	No
21263	ORBITAL REPOSITIONING W BONE GRAFTS EXTRACRANIAL		No	No	No	No		No	No
21267	ORBITAL REPOSITIONING W BONE GRAFTS ICRA AND XTRC		Not Cov	No	Not Cov	No		No	No
21268	MALAR AUGMENTATION PROSTHETIC MATERIAL		Yes	Yes	Yes	No		Yes	Yes
21275	SECONDARY REVISION ORBITOCRANIOFACIAL RCNSTJ		No	No	No	No		No	No
21280	MEDIAL CANTHOPEXY SEPARATE PROCEDURE		Yes	Yes	Yes	No		Yes	Yes
21282	LATERAL CANTHOPEXY		Yes	Yes	Yes	No		Yes	Yes
21295	REDUCTION MASSETER MUSCLE AND BONE EXTRAORAL		Yes	Yes	Yes	No		Yes	Yes
21296	REDUCTION MASSETER MUSCLE AND BONE INTRAORAL		Yes	Yes	Yes	No		Yes	Yes
21299	UNLISTED CRANIOFACIAL AND MAXILLOFACIAL PROCEDURE		Yes	Yes	Not Cov	Yes		Yes	Yes
21310	CLOSED TREATMENT NASAL FRACTURE W O MANIPULATION		No	No	No	No		No	No
21315	CLOSED TX NASAL FRACTURE W O STABILIZATION		No	No	No	No		No	No
21320	CLOSED TREATMENT NASAL FRACTURE W STABILIZATION		No	No	No	No		No	No
21325	OPEN TREATMENT NASAL FRACTURE UNCOMPLICATED		No	No	No	No		No	No
21330	OPEN TX NASAL FX COMP W INT AND XTRNL SKELETAL FI		No	No	No	No		No	No
21335	OPEN TX NASAL FX W CONCOMITANT OPTX FXD SEPTUM		No	No	No	No		No	No
21336	OPEN TX NASAL SEPTAL FRACTURE W WO STABILIZATION		No	No	No	No		No	No
21337	CLOSED TX NASAL SEPTAL FRACT W WO STABILIZATION		No	No	No	No		No	No
21338	OPEN TX NASOETHMOID FX W O EXTERNAL FIXATION		No	No	No	No		No	No
21339	OPEN TX NASOETHMOID FX W EXTERNAL FIXATION		No	No	No	No		No	No
21340	PERCUTANEOUS TX NASOETHMOID COMPLEX FRACTURE		No	No	No	No		No	No
21343	OPEN TX DEPRESSED FRONTAL SINUS FRACTURE		No	No	Not Cov	No		No	No
21344	OPEN TX COMPLICATED FRONTAL SINUS FRACTURE		Not Cov	No	Not Cov	No		No	No
21345	CLOSED TX NASOMAXILLARY COMPLEX FRACTURE		No	No	No	No		No	No

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This prior authorization guide applies to Medicaid, Medicare, and Marketplace.

DOS Effective 10/1/19; Posted 10/30/19

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
21346	OPTX NASOMAX CPLX FX LEFT II TYPE W WIRG AND FXJ		No	No	Not Cov	No		No	No
21347	OPTX NASOMAX CPLX FX LEFT II TYPE REQ MLT OPN		Not Cov	No	Not Cov	No		No	No
21348	OPTX NASOMAX CPLX FX LEFT II TYPE W BONE GRAFT		Not Cov	No	Not Cov	No		No	No
21355	PERCUTANEOUS TX MALAR AREA FRACTURE		No	No	No	No		No	No
21356	OPEN TX DEPRESSED ZYGOMATIC ARCH FRACTURE		No	No	No	No		No	No
21360	OPEN TX DEPRESSED MALAR FRACTURE		No	No	No	No		No	No
21365	OPEN TX COMP FX MALAR W INTERNAL FX AND MULT SURG		No	No	Not Cov	No		No	No
21366	OPEN TX COMP FRACTURE MALAR AREA W BONE GRAFT		Not Cov	No	Not Cov	No		No	No
21385	OPEN TX ORBITAL FLOOR BLOWOUT FX TRANSANTRAL		No	No	Not Cov	No		No	No
21386	OPEN TX ORBITAL FLOOR BLOWOUT FX PERIORBITAL		No	No	Not Cov	No		No	No
21387	OPEN TX ORBITAL FLOOR BLOWOUT FX COMBINED APPR		No	No	Not Cov	No		No	No
21390	OPTX ORB FLOOR BLWT FX PRI BITAL APPR W ALLPLSTC		No	No	No	No		No	No
21395	OPTX ORB FLOOR BLWT FX PRI BITAL APPR W BONE GRF		No	No	Not Cov	No		No	No
21400	CLSD TX FX ORBIT EXCEPT BLOWOUT W O MANIPULATION		No	No	No	No		No	No
21401	CLOSED TX FX ORBIT EXCEPT BLOWOUT W MANIPULATION		No	No	No	No		No	No
21406	OPEN TX FX ORBIT EXCEPT BLOWOUT W O IMPLANT		No	No	No	No		No	No
21407	OPEN TX FX ORBIT EXCEPT BLOWOUT W IMPLANT		No	No	No	No		No	No
21408	OPEN TX FX ORBIT EXCEPT BLOWOUT W BONE GRAFT		No	No	Not Cov	No		No	No
21421	CLOSED TX PALATAL MAXILLARY FX W FIXATION SPLINT		No	No	No	No		No	No
21422	OPEN TREATMENT PALATAL MAXILLARY FRACTURE		No	No	Not Cov	No		No	No
21423	OPEN TX PALATAL MAXILLARY FX COMP MULTIPLE APPR		Not Cov	No	Not Cov	No		No	No
21431	CLOSED TX CRANIOFACIAL SEPARATION		Not Cov	No	Not Cov	No		No	No
21432	OPEN TX CRANIOFACIAL SEP W WIRING AND INT FIXJ		Not Cov	No	Not Cov	No		No	No
21433	OPEN TX CRANIOFACIAL SEP COMPLICATED MLT APPR		Not Cov	No	Not Cov	No		No	No
21435	OPEN TX CRANIOFACIAL SEP COMP W INT AND XTRNL FIX		Not Cov	No	Not Cov	No		No	No
21436	OPTX CRNFCL SEP LFT III TYP COMP INT FIXJ W BONE		Not Cov	No	Not Cov	No		No	No
21440	CLTX MANDIBULAR MAXILLARY ALVEOLAR RIDGE FX SPX		No	No	Not Cov	No		No	No
21445	OPTX MANDIBULAR MAXILLARY ALVEOLAR RIDGE FX SPX		No	No	No	No		No	No
21450	CLOSED TX MANDIBULAR FRACTURE W O MANIPULATION		No	No	No	No		No	No
21451	CLOSED TX MANDIBULAR FRACTURE W MANIPULATION		No	No	No	No		No	No
21452	PERCUTANEOUS TX MANDIBULAR FX W EXTERNAL FIXJ		No	No	No	No		No	No
21453	CLOSED TX MANDIBULAR FX W INTERDENTAL FIXATION		No	No	No	No		No	No
21454	OPEN TX MANDIBULAR FX W EXTERNAL FIXATION		No	No	No	No		No	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
21461	OPEN TX MANDIBULAR FX W O INTERDENTAL FIXATION		No	No	No	No		No	No
21462	OPEN TX MANDIBULAR FX W INTERDENTAL FIXATION		No	No	No	No		No	No
21465	OPEN TREATMENT MANDIBULAR CONDYLAR FRACTURE		No	No	No	No		No	No
21470	OPTX COMP MANDIBULAR FX MLT APPR W INT FIXATION		No	No	Not Cov	No		No	No
21480	CLOSED TX TEMPOROMANDIBULAR DISLOCATION 1ST SBSQ		No	No	No	No		No	No
21485	CLOSED TX TEMPOROMANDIBULAR DISLC COMP 1ST SBSQ		No	No	No	No		No	No
21490	OPEN TREATMENT TEMPOROMANDIBULAR DISLOCATION		No	No	No	No		No	No
21497	INTERDENTAL WIRING OTHER THAN FRACTURE		No	No	No	No		No	No
21499	UNLISTED MUSCULOSKELETAL PROCEDURE HEAD		Yes	Yes	Not Cov	Yes		Yes	Yes
21501	I AND D DEEP ABSC HMTMA SOFT TISSUE NECK THORAX		No	No	No	No		No	No
21502	I AND D DP ABSC HMTMA SOFT TISS NCK THORAX PRTL RI		No	No	No	No		No	No
21510	INCISION DEEP OPENING BONE CORTEX THORAX		Not Cov	No	Not Cov	No		No	No
21550	BIOPSY SOFT TISSUE NECK THORAX		No	No	No	No		No	No
21552	EXC TUMOR SOFT TIS NECK ANT THORAX SUBQ 3 CM OR GRT		No	No	No	No		No	No
21554	EXC TUMOR SOFT TISSUE NECK THORAX SUBFASC 5 CM OR GRT		No	No	No	No		No	No
21555	EXC TUMOR SOFT TISSUE NECK ANT THORAX SUBQ UNDER 3CM		No	No	No	No		No	No
21556	EXC TUMOR SOFT TISS NECK THORAX SUBFASCIAL UNDER 5CM		No	No	No	No		No	No
21557	RAD RESECT TUMOR SOFT TISS NECK ANT THORAX UNDER 5CM		No	No	No	No		No	No
21558	RAD RESECT TUMOR SOFT TISS NECK ANT THORAX 5CM OR GRT		No	No	No	No		No	No
21600	EXCISION RIB PARTIAL		No	No	No	No		No	No
21610	COSTOTRANSVERSECTOMY SEPARATE PROCEDURE		No	No	No	No		No	No
21615	EXCISION 1ST AND CERVICAL RIB		Not Cov	No	Not Cov	No		No	No
21616	EXCISION 1ST AND CERVICAL RIB W SYMPATHECTOMY		Not Cov	No	Not Cov	No		No	No
21620	OSTECTOMY STERNUM PARTIAL		Not Cov	No	Not Cov	No		No	No
21627	STERNAL DEBRIDEMENT		No	No	Not Cov	No		No	No
21630	RADICAL RESECTION STERNUM		Not Cov	No	Not Cov	No		No	No
21632	RADICAL RESECTION STERNUM W MEDSTNL LMPHADEC		Not Cov	No	Not Cov	No		No	No
21685	HYOID MYOTOMY AND SUSPENSION		No	No	No	No		No	No
21700	DIVISION SCALENUS ANTICUS W O RESCJ CERVICAL RIB		No	No	No	No		No	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
21705	DIVISION SCALENUS ANTICUS RESECTION CERVICAL RIB		Not Cov	No	Not Cov	No		No	No
21720	DIVISION STERNOCLEIDOMASTOID OPEN W O CAST		No	No	No	No		No	No
21725	DIVISION STERNOCLEIDOMASTOID OPEN W CAST		No	No	No	No		No	No
21740	REPAIR PECTUS EXCAVATUM CARINATUM OPEN		Not Cov	No	Not Cov	No		No	No
21742	REPAIR PECTUS EXCAVATM CARINATM MINLY W O THRSC		No	No	Not Cov	No		No	No
21743	REPAIR PECTUS EXCAVATM CARINATM MINLY W THRSC		No	No	Not Cov	No		No	No
21750	CLOSE MEDIAN STERNOTOMY SEP W WO DEBRIDEMENT SPX		Not Cov	No	Not Cov	No		No	No
21811	OPEN TX RIB FX W FIXJ THORACOSCOPIC VIS 1-3 RIBS		No	No	Not Cov	No		No	No
21812	OPEN TX RIB FX W FIXJ THORACOSCOPIC VIS 4-6 RIBS		No	No	Not Cov	No		No	No
21813	OPEN TX RIB FX W FIXJ THORACOSCOPIC VIS 7 PLUS RIBS		No	No	Not Cov	No		No	No
21820	CLOSED TREATMENT STERNUM FRACTURE		No	No	No	No		No	No
21825	OPEN TX STERNUM FRACTURE W WO SKELETAL FIXATION		No	No	Not Cov	No		No	No
21899	UNLISTED PROCEDURE NECK THORAX		Yes	Yes	Not Cov	Yes		Yes	Yes
21920	BIOPSY SOFT TISSUE BACK FLANK SUPERFICIAL		No	No	Not Cov	No		No	No
21925	BIOPSY SOFT TISSUE BACK FLANK DEEP		No	No	No	No		No	No
21930	EXCISION TUMOR SOFT TISSUE BACK FLANK SUBQ UNDER 3CM		No	No	No	No		No	No
21931	EXCISION TUMOR SOFT TIS BACK FLANK SUBQ 3 CM OR GRT		No	No	No	No		No	No
21932	EXC TUMOR SOFT TISS BACK FLANK SUBFASCIAL UNDER 5CM		No	No	No	No		No	No
21933	EXC TUMOR SOFT TISS BACK FLANK SUBFASCIAL 5 CM OR GRT		No	No	No	No		No	No
21935	RAD RESECTION TUMOR SOFT TISSUE BACK FLANK UNDER 5CM		No	No	No	No		No	No
21936	RAD RESECTION TUMOR SOFT TISSUE BACK FLANK 5CM OR GRT		No	No	No	No		No	No
22010	I AND D DEEP ABSCESS PST SPINE CRV THRC CERVICOTHR		Not Cov	No	Not Cov	No		No	No
22015	I AND D DEEP ABSCESS PST SPINE LUMBAR SAC LUMBOSAC		Not Cov	No	Not Cov	No		No	No
22100	PRTL EXC PST VRT INTRNSC B1Y LES 1 VRT SGM CRV		Yes	Yes	Not Cov	No		Yes	Yes
22101	PRTL EXC PST VRT INTRNSC B1Y LES 1 VRT SGM THRC		Yes	Yes	Not Cov	No		Yes	Yes
22102	PRTL EXC PST VRT INTRNSC B1Y LES 1 VRT SGM LMBR		Yes	Yes	Yes	No		Yes	Yes
22103	PRTL EXC PST VRT INTRNSC B1Y LES 1 VRT SGM EA		Yes	Yes	Yes	No		Yes	Yes
22110	PRTL EXC VRT BDY B1Y LES W O SPI CORD 1 SGM CRV		Not Cov	Yes	Not Cov	No		Yes	Yes
22112	PRTL EXC VRT BDY B1Y LES W O SPI CORD 1 SGM THRC		Not Cov	Yes	Not Cov	No		Yes	Yes
22114	PRTL EXC VRT BDY B1Y LES W O SPI CORD 1 SGM LMBR		Not Cov	Yes	Not Cov	No		Yes	Yes
22116	PRTL EXC VRT BDY B1Y LES W O SPI CORD 1 SGM EA		Not Cov	Yes	Not Cov	No		Yes	Yes
22206	OSTEOTOMY SPINE POSTERIOR 3 COLUMN THORACIC		Yes	Yes	Not Cov	No		Yes	Yes
22207	OSTEOTOMY SPINE POSTERIOR 3 COLUMN LUMBAR		Yes	Yes	Not Cov	No		Yes	Yes

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22208	OSTEOTOMY SPINE POSTERIOR 3 COLUMN EA ADDL SGM		Yes	Yes	Not Cov	No		Yes	Yes
22210	OSTEOTOMY SPINE PST PSTLAT APPR 1 VRT SGM CRV		Not Cov	Yes	Not Cov	No		Yes	Yes
22212	OSTEOTOMY SPINE PST PSTLAT APPR 1 VRT SGM THRC		Not Cov	Yes	Not Cov	No		Yes	Yes
22214	OSTEOTOMY SPINE PST PSTLAT APPR 1 VRT SGM LMBR		Not Cov	Yes	Not Cov	No		Yes	Yes
22216	OSTEOT SPI PST PSTLAT APPR 1 VRT SGM EA VRT SGM		Not Cov	Yes	Not Cov	No		Yes	Yes
22220	OSTEOTOMY SPINE W DSKC ANT APPR 1 VRT SGM CRV		Not Cov	Yes	Not Cov	No		Yes	Yes
22222	OSTEOTOMY SPINE W DSKC ANT APPR 1 VRT SGM THRC		Yes	Yes	Not Cov	No		Yes	Yes
22224	OSTEOTOMY SPINE W DSKC ANT APPR 1 VRT SGM LMBR		Not Cov	Yes	Not Cov	No		Yes	Yes
22226	OSTEOT SPI W DSKC ANT APPR 1 VRT SGM EA VRT SGM		Not Cov	Yes	Not Cov	No		Yes	Yes
22310	CLTX VRT BDY FX W O MANJ REQ AND W CSTING BRACING		No	No	No	No		No	No
22315	CLTX VRT FX AND DISLC CSTING BRACING MANJ TRCJ		No	No	No	No		No	No
22318	OPTX AND RDCTJ ODNTD FX AND DISLC ANT FIXJ W O GRAFT		Not Cov	No	Not Cov	No		No	No
22319	OPTX AND RDCTJ ODNTD FX AND DISLC ANT W INT FIXJ		Not Cov	No	Not Cov	No		No	No
22325	OPTX AND RDCTJ VRT FX AND DISLC PST 1 VRT SGM LM		Not Cov	No	Not Cov	No		No	No
22326	OPTX AND RDCTJ VRT FX AND DISLC PST 1 VRT SGM CR		Not Cov	No	Not Cov	No		No	No
22327	OPTX AND RDCTJ VRT FX AND DISLC PST 1 VRT SGM TH		Not Cov	No	Not Cov	No		No	No
22328	OPTX AND RDCTJ VRT FX AND DISLC PST 1 VRT SGM EA		Not Cov	No	Not Cov	No		No	No
22505	MANIPULATION SPINE REQUIRING ANESTHESIA		Yes	Yes	Yes	No		Yes	Yes
22510	PERQ VERTEBROPLASTY UNI BI INJX CERVICOTHORACIC		Not Cov	Not Cov	Not Cov	Not Cov		No	No
22511	PERQ VERTEBROPLASTY UNI BI INJECTION LUMBOSACRAL		Not Cov	Not Cov	Not Cov	Not Cov		No	No
22512	VERTEBROPLASTY EACH ADDL CERVICOTHOR LUMBOSACRAL		Not Cov	Not Cov	Not Cov	Not Cov		No	No
22513	PERQ VERT AGMNTJ CAVITY CRTJ UNI BI CANNULATION		Not Cov	Not Cov	Not Cov	Not Cov		No	No
22514	PERQ VERT AGMNTJ CAVITY CRTJ UNI BI CANNULJ LMBR		Not Cov	Not Cov	Not Cov	Not Cov		No	No
22515	PERQ VERT AGMNTJ CAVITY CRTJ UNI BI CANNULJ EACH		Not Cov	Not Cov	Not Cov	Not Cov		No	No
22526	PERQ INTRDSCL ELECTROTHRM ANNULOPLASTY 1 LEVEL		Yes	Yes	Not Cov	No		Not Cov	Yes
22527	PERQ INTRDSCL ELECTROTHRM ANNULOPLASTY ADDL LVL		Yes	Yes	Not Cov	No		Not Cov	Yes
22532	ARTHRODESIS LATERAL EXTRACAVITARY THORACIC		Not Cov	Yes	Not Cov	No		Yes	Yes
22533	ARTHRODESIS LATERAL EXTRACAVITARY LUMBAR		Not Cov	Yes	Not Cov	No		Yes	Yes

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22534	ARTHRODESIS LAT EXTRACAVITARY EA ADDL THRC LMBR		Not Cov	Yes	Not Cov	No		Yes	Yes
22548	ARTHRODESIS ANT TRANSORL XTRORAL C1-C2 W WO EXC ODNTD		Not Cov	Yes	Not Cov	No		Yes	Yes
22551	ARTHRODESIS ANT INTERBODY DECOMPRESS CERVICAL BELW C2		Not Cov	Yes	Not Cov	No		Yes	Yes
22552	ARTHRODESIS ANT INTERDY CERVCL BELW C2 EA ADDL NTRSPC		Not Cov	Yes	Not Cov	No		Yes	Yes
22554	ARTHRODESIS ANT MIN DISCECT INTERBODY CERV BELOW C2		Yes	Yes	Not Cov	No		Yes	Yes
22556	ARTHRODESIS ANT MIN DISCECTOMY INTERBODY THORACIC		Not Cov	Yes	Not Cov	No		Yes	Yes
22558	ARTHRODESIS ANTERIOR INTERBODY LUMBAR		Yes	Yes	Not Cov	No		Yes	Yes
22585	ARTHRODESIS ANTERIOR INTERBODY EA ADDL NTRSPC		Yes	Yes	Not Cov	No		Yes	Yes
22586	ARTHRODESIS PRESACRAL INTRBDY W INSTRUMENT L5-S1		Yes	Yes	Not Cov	No		Yes	Yes
22590	ARTHRODESIS POSTERIOR CRANIOCERVICAL		Not Cov	Yes	Not Cov	No		Yes	Yes
22595	ARTHRODESIS POSTERIOR ATLAS-AXIS C1-C2		Not Cov	Yes	Not Cov	No		Yes	Yes
22600	ARTHRODESIS PST PSTLAT CERVICAL BELW C2 SGM		Yes	Yes	Not Cov	No		Yes	Yes
22610	ARTHRODESIS POSTERIOR POSTEROLATERAL THORACIC		Not Cov	Yes	Not Cov	No		Yes	Yes
22612	ARTHRODESIS POSTERIOR POSTEROLATERAL LUMBAR		Yes	Yes	Yes	No		Yes	Yes
22614	ARTHRODESIS POSTERIOR POSTEROLATERAL EA ADDL		Yes	Yes	Not Cov	No		Yes	Yes
22630	ARTHRODESIS POSTERIOR INTERBODY LUMBAR		Yes	Yes	Not Cov	No		Yes	Yes
22632	ARTHRODESIS POSTERIOR INTERBODY EA ADDL		Yes	Yes	Not Cov	No		Yes	Yes
22633	ARTHRODESIS POST POSTEROLATRL POSTINTERBODY LUMBAR		Not Cov	Yes	Not Cov	No		Yes	Yes
22634	ARTHRODESIS POST POSTERLATRL POSTINTRBDYADL SPC SEG		Not Cov	Yes	Not Cov	No		Yes	Yes
22800	ARTHRODESIS POSTERIOR SPINAL DFRM UP 6 VRT SEG		Not Cov	Yes	Not Cov	No		Yes	Yes
22802	ARTHRODESIS POSTERIOR SPINAL DFRM 7-12 VRT SEG		Not Cov	Yes	Not Cov	No		Yes	Yes
22804	ARTHRODESIS POSTERIOR SPINAL DFRM 13 OR GRT VRT SEG		Not Cov	Yes	Not Cov	No		Yes	Yes
22808	ARTHRODESIS ANTERIOR SPINAL DFRM 2-3 VRT SEG		Not Cov	Yes	Not Cov	No		Yes	Yes
22810	ARTHRODESIS ANTERIOR SPINAL DFRM 4-7 VRT SEG		Not Cov	Yes	Not Cov	No		Yes	Yes
22812	ARTHRODESIS ANTERIOR SPINAL DFRM 8 OR GRT VRT SEG		Not Cov	Yes	Not Cov	No		Yes	Yes
22818	KYPHECTOMY SINGLE OR TWO SEGMENTS		Not Cov	Yes	Not Cov	No		Yes	Yes
22819	KYPHECTOMY 3 OR MORE SEGMENTS		Not Cov	Yes	Not Cov	No		Yes	Yes
22830	EXPLORATION SPINAL FUSION		Yes	Yes	Not Cov	No		Yes	Yes
22840	POSTERIOR NON-SEGMENTAL INSTRUMENTATION		Yes	Yes	Not Cov	No		Yes	Yes
22841	INTERNAL SPINAL FIXATION WIRING SPINOUS PROCESS		Not Cov	Yes	Not Cov	No		Not Cov	Yes
22842	POSTERIOR SEGMENTAL INSTRUMENTATION 3-6 VRT SEG		Not Cov	Yes	Not Cov	No		Yes	Yes
22843	POSTERIOR SEGMENTAL INSTRUMENTATION 7-12 VRT SEG		Not Cov	Yes	Not Cov	No		Yes	Yes

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
22844	POSTERIOR SEGMENTAL INSTRUMENTATION 13 OR GRT VRT SE		Not Cov	Yes	Not Cov	No		Yes	Yes
22845	ANTERIOR INSTRUMENTATION 2-3 VERTEBRAL SEGMENTS		Yes	Yes	Not Cov	No		Yes	Yes
22846	ANTERIOR INSTRUMENTATION 4-7 VERTEBRAL SEGMENTS		Yes	Yes	Not Cov	No		Yes	Yes
22847	ANTERIOR INSTRUMENTATION 8 OR GRT VERTEBRAL SEGMENTS		Not Cov	Yes	Not Cov	No		Yes	Yes
22848	PELVIC FIXATION OTHER THAN SACRUM		Not Cov	Yes	Not Cov	No		Yes	Yes
22849	REINSERTION SPINAL FIXATION DEVICE		Not Cov	Yes	Not Cov	No		Yes	Yes
22850	REMOVAL POSTERIOR NONSEGMENTAL INSTRUMENTATION		Yes	Yes	Not Cov	No		Yes	Yes
22852	REMOVAL POSTERIOR SEGMENTAL INSTRUMENTATION		Not Cov	Yes	Not Cov	No		Yes	Yes
22853	INSJ BIOMCHN DEV INTERVERTEBRAL DSC SPC W ARTHRD		No	No	Not Cov	No		No	No
22854	INSJ BIOMCHN DEV VRT CORPECTOMY DEFECT W ARTHRD		No	No	Not Cov	No		No	No
22855	REMOVAL ANTERIOR INSTRUMENTATION		Yes	Yes	Not Cov	No		Yes	Yes
22856	TOT DISC ARTHRP ART DISC ANT APPRO 1 NTRSPC CRV		Yes	Yes	Not Cov	No		Yes	Yes
22857	TOT DISC ARTHRP ART DISC ANT APPRO 1 NTRSPC LMBR		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
22858	TOT DISC ARTHRP ANT APPR DISC 2ND LEVEL CERVICAL		No	No	Not Cov	No		No	No
22859	INSJ BIOMCHN DEV NTRVRT DISC SPACE W O ARTHRD		No	No	Not Cov	No		No	No
22861	REVJ RPLCMT DISC ARTHROPLASTY ANT 1 NTRSPC CRV		Not Cov	Yes	Not Cov	No		Yes	Yes
22862	REVJ RPLCMT DISC ARTHROPLASTY ANT 1 NTRSPC LMBR		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
22864	RMVL DISC ARTHROPLASTY ANT 1 INTERSPACE CERVICAL		Not Cov	Yes	Not Cov	No		Yes	Yes
22865	RMVL DISC ARTHROPLASTY ANT 1 INTERSPACE LUMBAR		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
22867	INSJ STABLJ DEV W DCMPRN LUMBAR SINGLE LEVEL		Yes	Yes	Not Cov	No		Yes	Yes
22868	INSJ STABLJ DEV W DCMPRN LUMBAR SECOND LEVEL		Yes	Yes	Not Cov	No		Yes	Yes
22869	INSJ STABLJ DEV W O DCMPRN LUMBAR SINGLE LEVEL		Yes	Yes	Not Cov	No		Yes	Yes
22870	INSJ STABLJ DEV W O DCMPRN LUMBAR SECOND LEVEL		Yes	Yes	Not Cov	No		Yes	Yes
22899	UNLISTED PROCEDURE SPINE		Yes	Yes	Not Cov	Yes		Yes	Not Cov
22900	EXC TUMOR SOFT TISSUE ABDL WALL SUBFASCIAL UNDER 5CM		No	No	No	No		No	No
22901	EXC TUMOR SOFT TISSUE ABDL WALL SUBFASCIAL 5CM OR GRT		No	No	No	No		No	No
22902	EXC TUMOR SOFT TISSUE ABDOMINAL WALL SUBQ UNDER 3CM		No	No	No	No		No	No
22903	EXC TUMOR SOFT TISSUE ABDOMINAL WALL SUBQ 3 CM OR GRT		No	No	No	No		No	No
22904	RAD RESECTION TUMOR SOFT TISSUE ABDL WALL UNDER 5CM		No	No	No	No		No	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
22905	RAD RESECTION TUMOR SOFT TISSUE ABDL WALL 5 CM OR GRT		No	No	No	No		No	No
22999	UNLISTED PX ABDOMEN MUSCULOSKELETAL SYSTEM		Yes	Yes	Not Cov	Yes		Yes	Yes
23000	REMOVAL SUBDELTOID CALCAREOUS DEPOSITS OPEN		No	No	No	No		No	No
23020	CAPSULAR CONTRACTURE RELEASE		No	No	No	No		No	No
23030	I AND D SHOULDER DEEP ABSCESS HEMATOMA		No	No	No	No		No	No
23031	I AND D SHOULDER INFECTED BURSA		No	No	No	No		No	No
23035	INCISION BONE CORTEX SHOULDER AREA		No	No	No	No		No	No
23040	ARTHROTOMY GLENOHUMERAL JT EXPL DRG RMVL FB		No	No	No	No		No	No
23044	ARTHRT ACROMCLAV STRNCLAV JT EXPL DRG RMVL FB		No	No	No	No		No	No
23065	BIOPSY SOFT TISSUE SHOULDER SUPERFICIAL		No	No	Not Cov	No		No	No
23066	BIOPSY SOFT TISSUE SHOULDER DEEP		No	No	No	No		No	No
23071	EXCISION TUMOR SOFT TISSUE SHOULDER SUBQ 3 CM OR GRT		No	No	No	No		No	No
23073	EXC TUMOR SOFT TISSUE SHOULDER SUBFASCIAL 5 CM OR GRT		No	No	No	No		No	No
23075	EXCISION TUMOR SOFT TISSUE SHOULDER SUBQ UNDER 3CM		No	No	No	No		No	No
23076	EXC TUMOR SOFT TISS SHOULDER SUBFASC UNDER 5CM		No	No	No	No		No	No
23077	RAD RESECTION TUMOR SOFT TISSUE SHOULDER UNDER 5CM		No	No	No	No		No	No
23078	RAD RESECTION TUMOR SOFT TISSUE SHOULDER 5 CM OR GRT		No	No	No	No		No	No
23100	ARTHROTOMY GLENOHUMERAL JOINT W BIOPSY		No	No	No	No		No	No
23101	ARTHRT ACROMCLAV STRNCLAV JT W BX AND EXC CRTLG		No	No	No	No		No	No
23105	ARTHRT GLENOHUMRL JT W SYNOVECTOMY W WO BIOPSY		No	No	No	No		No	No
23106	ARTHRT GLENOHUMRL JT STRNCLAV JT W SYNVTCT W WOBX		No	No	No	No		No	No
23107	ARTHRT GLENOHMRL JT W JT EXPL W WO RMVL LOOSE FB		No	No	No	No		No	No
23120	CLAVICULECTOMY PARTIAL		No	No	No	No		No	No
23125	CLAVICULECTOMY TOTAL		No	No	No	No		No	No
23130	PARTIAL REPAIR OR REMOVAL OF SHOULDER BONE		No	No	No	No		No	No
23140	EXC CURTGT BONE CYST BENIGN TUMOR CLAV SCAPULA		No	No	No	No		No	No
23145	EXC CURTGT BONE CST B9 TUM CLAV SCAPULA W AGRFT		No	No	No	No		No	No
23146	EXC CURTGT BONE CST B9 TUM CLAV SCAPULA W ALGRFT		No	No	No	No		No	No
23150	EXC CURTGT BONE CYST BENIGN TUMOR PROX HUMERUS		No	No	No	No		No	No
23155	EXC CURTGT BONE CYST BENIGN TUM PROX HUM W AGRFT		No	No	No	No		No	No
23156	EXC CURTGT BONE CYST BENIGN TUM PROX HUM W ALGRFT		No	No	No	No		No	No
23170	SEQUESTRECTOMY CLAVICLE		No	No	No	No		No	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
23172	SEQUESTRECTOMY SCAPULA		No	No	No	No		No	No
23174	SEQUESTRECTOMY HUMERAL HEAD SURGERY NECK		No	No	No	No		No	No
23180	PARTIAL EXCISION BONE CLAVICLE		No	No	No	No		No	No
23182	PARTIAL EXCISION BONE SCAPULA		No	No	No	No		No	No
23184	PARTIAL EXCISION BONE PROXIMAL HUMERUS		No	No	No	No		No	No
23190	OSTECTOMY SCAPULA PARTIAL		No	No	No	No		No	No
23195	RESECTION HUMERAL HEAD		No	No	No	No		No	No
23200	RADICAL RESECTION TUMOR CLAVICLE		Not Cov	No	Not Cov	No		No	No
23210	RADICAL RESECTION TUMOR SCAPULA		Not Cov	No	Not Cov	No		No	No
23220	RADICAL RESECTION BONE TUMOR PROXIMAL HUMERUS		Not Cov	No	Not Cov	No		No	No
23330	REMOVAL FOREIGN BODY SHOULDER SUBCUTANEOUS		No	No	No	No		No	No
23333	REMOVAL SHOULDER FOREIGN BODY DEEP SUBFASCIAL IM		No	No	No	No		No	No
23334	PROSTHESIS REMOVAL HUMERAL GLENOID COMPONENT		No	No	Not Cov	No		No	No
23335	PROSTHESIS REMOVAL HUMERAL AND GLENOID COMPONENT		No	No	Not Cov	No		No	No
23350	INJECTION SHOULDER ARTHROGRAPHY CT MRI ARTHG		No	No	Not Cov	No		No	No
23395	MUSCLE TRANSFER SHOULDER UPPER ARM SINGLE		No	No	No	No		No	No
23397	MUSCLE TRANSFER SHOULDER UPPER ARM MULTIPLE		No	No	No	No		No	No
23400	SCAPULOPEXY		No	No	No	No		No	No
23405	TENOTOMY SHOULDER AREA 1 TENDON		No	No	No	No		No	No
23406	TENOTOMY SHOULDER MULTIPLE THRU SAME INCISION		No	No	No	No		No	No
23410	OPEN REPAIR OF ROTATOR CUFF ACUTE		No	No	No	No		No	No
23412	OPEN REPAIR OF ROTATOR CUFF CHRONIC		Yes	Yes	Yes	No		Yes	Yes
23415	CORACOACROMIAL LIGAMENT RELEAS W WOACROMIOPLASTY		No	No	No	No		No	No
23420	RECONSTRUCTION ROTATOR CUFF AVULSION CHRONIC		No	No	No	No		No	No
23430	TENODESIS LONG TENDON BICEPS		No	No	No	No		No	No
23440	RESECTION TRANSPLANTATION LONG TENDON BICEPS		No	No	No	No		No	No
23450	CAPSULORRHAPHY ANTERIOR PUTTI-PLATT MAGNUSON		No	No	No	No		No	No
23455	CAPSULORRHAPHY ANTERIOR W LABRAL REPAIR		No	No	No	No		No	No
23460	CAPSULORRHAPHY ANTERIOR WITH BONE BLOCK		No	No	No	No		No	No
23462	CAPSULORRHAPHY ANTERIOR W CORACOID PROCESS TR		No	No	No	No		No	No
23465	CAPSULORRHAPHY GLENOHUMERAL JT PST W WO BONE BLK		No	No	No	No		No	No
23466	CAPSULORRHAPHY GLENOHUMRL JT MULTI-DIRIONAL INS		No	No	No	No		No	No
23470	ARTHROPLASTY GLENOHUMRL JT HEMIARTHROPLASTY		Yes	Yes	Not Cov	No		Yes	Yes
23472	ARTHROPLASTY GLENOHUMERAL JOINT TOTAL SHOULDER		No	No	Not Cov	No		No	No

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23473	REVIS SHOULDER ARTHRPLSTY HUMERAL GLENOID COMPNT		No	No	Not Cov	No		No	No
23474	REVIS SHOULDER ARTHRPLSTY HUMERAL AND GLENOID COMPNT		No	No	Not Cov	No		No	No
23480	OSTEOTOMY CLAVICLE W WO INTERNAL FIXATION		No	No	No	No		No	No
23485	OSTEOTOMY CLAV W WO INT FIXJ W BONE GRF NON MAL		No	No	No	No		No	No
23490	PROPH TX W WO METHYLMETHACRYLATE CLAVICLE		No	No	No	No		No	No
23491	PROPH TX W WO METHYLMETHACRYLATE PROX HUMERUS		No	No	No	No		No	No
23500	CLSD TX CLAVICULAR FRACTURE W O MANIPULATION		No	No	No	No		No	No
23505	CLSD TX CLAVICULAR FRACTURE W MANIPULATION		No	No	No	No		No	No
23515	OPEN TX CLAVICULAR FRACTURE INTERNAL FIXATION		No	No	No	No		No	No
23520	CLSD TX STERNOCLAVICULAR DISLC W O MANIPULATION		No	No	No	No		No	No
23525	CLOSED TX STERNOCLAVICULAR DISLC W MANIPULATION		No	No	No	No		No	No
23530	OPEN TX STERNOCLAVICULAR DISLC ACUTE CHRONIC		No	No	No	No		No	No
23532	OPTX STRNCLAV DISLC ACUTE CHRONIC W FASCIAL GRF		No	No	No	No		No	No
23540	CLSD TX ACROMIOCLAVICULAR DISLC W O MANIPULATION		No	No	No	No		No	No
23545	CLSD TX ACROMIOCLAVICULAR DISLC W MANIPULATION		No	No	No	No		No	No
23550	OPEN TX ACROMIOCLAVICULAR DISLC ACUTE CHRONIC		No	No	No	No		No	No
23552	OPTX ACROMCLAV DISLC ACUTE CHRONIC W FASCIAL GRF		No	No	No	No		No	No
23570	CLOSED TX SCAPULAR FRACTURE W O MANIPULATION		No	No	No	No		No	No
23575	CLTX SCAPULAR FX W MANJ W WO SKELETAL TRACTION		No	No	No	No		No	No
23585	OPEN TX SCAPULAR FX W INTERNAL FIXATION IF PFRMD		No	No	No	No		No	No
23600	CLTX PROXIMAL HUMERAL FRACTURE W O MANIPULATION		No	No	Not Cov	No		No	No
23605	CLTX PROX HUMRL FX W MANJ W WO SKELETAL TRACJ		No	No	No	No		No	No
23615	OPEN TREATMENT PROXIMAL HUMERAL FRACTURE		No	No	No	No		No	No
23616	OPEN PROX HUMERAL FRACTURE PROSTHETIC RPLCMT		No	No	No	No		No	No
23620	CLTX GREATER HUMERAL TUBEROSITY FX W O MANJ		No	No	Not Cov	No		No	No
23625	CLTX GRTER HUMERAL TUBEROSITY FX W MANIPULATION		No	No	No	No		No	No
23630	OPEN TREATMENT GRTER HUMERAL TUBEROSITY FRACTURE		No	No	No	No		No	No
23650	CLSD TX SHOULDER DISLC W MANIPULATION W O ANES		No	No	No	No		No	No
23655	CLSD TX SHOULDER DISLC W MANIPULATION REQ ANES		No	No	No	No		No	No
23660	OPEN TX ACUTE SHOULDER DISLOCATION		No	No	No	No		No	No

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23665	CLTX SHOULDER DISLC W FX HUMERAL TUBRST W MANJ		No	No	No	No		No	No
23670	OPEN TX SHOULDER DISLC W HUMERAL TUBEROSITY FX		No	No	No	No		No	No
23675	CLTX SHOULDER DISLC W SURG ANTMCL NECK FX W MANJ		No	No	No	No		No	No
23680	OPEN TX SHOULDER DISLOCATION W NECK FRACTURE		No	No	No	No		No	No
23700	MANJ W ANES SHOULDER JOINT W FIXATION APPARATUS		No	No	No	No		No	No
23800	ARTHRODESIS GLENOHUMERAL JOINT		No	No	No	No		No	No
23802	ARTHRODESIS GLENOHUMERAL JT W AUTOGENOUS GRAFT		No	No	No	No		No	No
23900	INTERTHORACOSCAPULAR AMPUTATION		Not Cov	No	Not Cov	No		No	No
23920	DISARTICULATION SHOULDER		Not Cov	No	Not Cov	No		No	No
23921	DISRTCJ SHOULDER SECONDARY CLSR SCAR REVISION		No	No	No	No		No	No
23929	UNLISTED PROCEDURE SHOULDER		Yes	Yes	Not Cov	Yes		Yes	Yes
23930	I AND D UPPER ARM ELBOW DEEP ABSCESS HEMATOMA		No	No	No	No		No	No
23931	INCISION AND DRAINAGE UPPER ARM ELBOW BURSA		No	No	No	No		No	No
23935	INC DEEP W OPENING BONE CORTEX HUMERUS ELBOW		No	No	No	No		No	No
24000	ARTHRT ELBOW W EXPLORATION DRAINAGE REMOVAL FB		No	No	No	No		No	No
24006	ARTHRT ELBOW CAPSULAR EXCISION CAPSULAR RLS SPX		No	No	No	No		No	No
24065	BIOPSY SOFT TISSUE UPPER ARM ELBOW SUPERFICIAL		No	No	Not Cov	No		No	No
24066	BIOPSY SOFT TISSUE UPPER ARM ELBOW AREA DEEP		No	No	No	No		No	No
24071	EXC TUMOR SOFT TISSUE UPPER ARM ELBOW SUBQ 3CM OR GRT		No	No	No	No		No	No
24073	EXC TUMOR SOFT TISS UPPER ARM ELBW SUBFASC 5CM OR GRT		No	No	No	No		No	No
24075	EXC TUMOR SOFT TISS UPPER ARM ELBOW SUBQ UNDER 3CM		No	No	No	No		No	No
24076	EXC TUMOR SOFT TISS UPR ARM ELBOW SUBFASC UNDER 5CM		No	No	No	No		No	No
24077	RAD RESECT TUMOR SOFT TISS UPPER ARM ELBOW UNDER 5CM		No	No	No	No		No	No
24079	RAD RESECT TUMOR SOFT TISS UPPER ARM ELBOW 5CM OR GRT		No	No	No	No		No	No
24100	ARTHROTOMY ELBOW W SYNOVIAL BIOPSY ONLY		No	No	No	No		No	No
24101	ARTHRT ELBOW W JNT EXPL W WOBX W WORMVL LOOSE FB		No	No	No	No		No	No
24102	ARTHROTOMY ELBOW W SYNOVECTOMY		No	No	No	No		No	No
24105	EXCISION OLECRANON BURSA		No	No	No	No		No	No
24110	EXCISION CURTGT BONE CYST BENIGN TUMOR HUMERUS		No	No	No	No		No	No

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			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
24115	EXC CURTGT BONE CYST BENIGN TUMOR HUMERUS W AGRFT		No	No	No	No		No	No
24116	EXC CURTGT BONE CYST BENIGN TUM HUMERUS W ALGRFT		No	No	No	No		No	No
24120	EXC CURTGT BONE CYST BENIGN TUMOR H N RDS OLECRN		No	No	No	No		No	No
24125	EXC CURTGT BONE CST B9 TUM H N RDS OLECRN W AGRFT		No	No	No	No		No	No
24126	EXC CURTGT BONE CST B9 TUM H N RDS OLECRN W ALGRFT		No	No	No	No		No	No
24130	EXCISION RADIAL HEAD		No	No	No	No		No	No
24134	SEQUESTRECTOMY SHAFT DISTAL HUMERUS		No	No	No	No		No	No
24136	SEQUESTRECTOMY RADIAL HEAD OR NECK		No	No	No	No		No	No
24138	SEQUESTRECTOMY OLECRANON PROCESS		No	No	No	No		No	No
24140	PARTIAL EXCISION BONE HUMERUS		No	No	No	No		No	No
24145	PARTIAL EXCISION BONE RADIAL HEAD NECK		No	No	No	No		No	No
24147	PARTIAL EXCISION BONE OLECRANON PROCESS		No	No	No	No		No	No
24149	RAD RESCJ CAPSL TISS AND HTRTPC BONE ELBW CONTRCT		No	No	No	No		No	No
24150	RADICAL RESECTION TUMOR SHAFT DISTAL HUMERUS		No	No	Not Cov	No		No	No
24152	RADICAL RESECTION TUMOR RADIAL HEAD NECK		No	No	No	No		No	No
24155	RESECTION ELBOW JOINT ARTHRECTOMY		No	No	No	No		No	No
24160	PROSTHESIS REMOVAL HUMERAL AND ULNAR COMPONENTS		No	No	No	No		No	No
24164	PROSTHESIS REMOVAL RADIAL HEAD		No	No	No	No		No	No
24200	RMVL FOREIGN BODY UPPER ARM ELBOW SUBCUTANEOUS		No	No	Not Cov	No		No	No
24201	REMOVAL FOREIGN BODY UPPER ARM ELBOW DEEP		No	No	No	No		No	No
24220	INJECTION ELBOW ARTHROGRAPHY		No	No	Not Cov	No		No	No
24300	MANIPULATION ELBOW UNDER ANESTHESIA		No	No	No	No		No	No
24301	MUSCLE TENDON TRANSFER UPPER ARM ELBOW SINGLE		No	No	No	No		No	No
24305	TENDON LENGTHENING UPPER ARM ELBOW EA TENDON		No	No	No	No		No	No
24310	TENOTOMY OPEN ELBOW TO SHOULDER EACH TENDON		No	No	No	No		No	No
24320	TENOPLASTY ELBOW TO SHOULDER SINGLE		No	No	No	No		No	No
24330	FLEXOR-PLASTY ELBOW		No	No	No	No		No	No
24331	FLEXOR-PLASTY ELBOW W EXTENSOR ADVANCEMENT		No	No	No	No		No	No
24332	TENOLYSIS TRICEPS		No	No	No	No		No	No
24340	TENODESIS BICEPS TENDON ELBOW SEPARATE PROCEDURE		No	No	No	No		No	No
24341	REPAIR TENDON MUSCLE UPPER ARM ELBOW EA		No	No	No	No		No	No
24342	RINSJ RPTD BICEPS TRICEPS TDN DSTL W WO TDN GRF		No	No	No	No		No	No
24343	REPAIR LATERAL COLLATERAL LIGAMENT ELBOW		No	No	No	No		No	No
24344	RCNSTJ LAT COLTRL LIGM ELBOW W TENDON GRAFT		No	No	No	No		No	No
24345	REPAIR MEDIAL COLLATERAL LIGAMENT ELBOW		No	No	No	No		No	No

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This prior authorization guide applies to Medicaid, Medicare, and Marketplace.

DOS Effective 10/1/19; Posted 10/30/19

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Code	Code Description	Comments	Apple Health & IMC Medical				IMC / BHSO (Mental Health covered svcs)	Medicare	Market Place
			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
24346	RCNSTJ MEDIAL COLTRL LIGM ELBW W TDN GRF		No	No	No	No	No	No	
24357	TENOTOMY ELBOW LATERAL MEDIAL PERCUTANEOUS		No	No	No	No	No	No	
24358	TNOT ELBOW LATERAL MEDIAL DEBRIDE OPEN		No	No	No	No	No	No	
24359	TNOT ELBOW LATERAL MEDIAL DEBRIDE OPEN TDN RPR		No	No	No	No	No	No	
24360	ARTHROPLASTY ELBOW W MEMBRANE		No	No	No	No	No	No	
24361	ARTHROPLASTY ELBOW W DISTAL HUMRL PROSTC RPLCMT		No	No	No	No	No	No	
24362	ARTHRP ELBOW W IMPLT AND FSCA LATA LIGAMENT RCNSTJ		No	No	No	No	No	No	
24363	ARTHROPLASTY ELBOW W DISTAL HUM AND PROX UR PROSTC RPLCM		No	No	No	No	No	No	
24365	ARTHROPLASTY RADIAL HEAD		No	No	No	No	No	No	
24366	ARTHROPLASTY RADIAL HEAD W IMPLANT		No	No	No	No	No	No	
24370	REVIS ELBOW ARTHRPLSTY HUMERAL ULNA COMPNT		No	No	Not Cov	No	No	No	
24371	REVIS ELBOW ARTHRPLSTY HUMERAL AND ULNA COMPNT		No	No	Not Cov	No	No	No	
24400	OSTEOTOMY HUMERUS W WO INTERNAL FIXATION		No	No	No	No	No	No	
24410	MLT OSTEOT W RELIGNMT IMED ROD HUMERAL SHAFT		No	No	No	No	No	No	
24420	OSTEOPLASTY HUMERUS		No	No	No	No	No	No	
24430	REPAIR NON MALUNION HUMERUS W O GRAFT		No	No	No	No	No	No	
24435	REPAIR NON MALUNION HUMERUS W ILIAC OTH AGRFT		No	No	No	No	No	No	
24470	HEMIEPIPHYSEAL ARREST		No	No	No	No	No	No	
24495	DECOMPRESSION FASCT F ARM W BRACH ART EXPL		No	No	No	No	No	No	
24498	PROPH TX W WO METHYLMETHACRYLATE HUMERAL SHAFT		No	No	No	No	No	No	
24500	CLSD TX HUMERAL SHAFT FRACTURE W O MANIPULATION		No	No	No	No	No	No	
24505	CLTX HUMERAL SHFT FX W MANJ W WO SKELETAL TRACJ		No	No	No	No	No	No	
24515	OPTX HUMERAL SHFT FX W PLATE SCREWS W WOCERCLAGE		No	No	No	No	No	No	
24516	TX HUMRAL SHAFT FX W INSJ IMED IMPLT W W CERCLGE		No	No	No	No	No	No	
24530	CLTX SPRCNDYLR TRANSCNDYLR HUMERAL FX W WO MANJ		No	No	No	No	No	No	
24535	CLTX SPRCNDYLR TRANSCNDYLR HUMERAL FX W MANJ		No	No	No	No	No	No	
24538	PRQ SKEL FIXJ SPRCNDYLR TRANSCNDYLR HUMERAL FX		No	No	No	No	No	No	
24545	OPEN TX HUMERAL SUPRACONDYLAR FRACTURE W O XTN		No	No	No	No	No	No	
24546	OPEN TX HUMERAL SUPRACONDYLAR FRACTURE W XTN		No	No	No	No	No	No	
24560	CLTX HUMERAL EPICONDYLAR FX MEDIAL LAT W O MANJ		No	No	No	No	No	No	
24565	CLTX HUMERAL EPICONDYLAR FX MEDIAL LAT W MANJ		No	No	No	No	No	No	

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
24566	PRQ SKEL FIXJ HUMRL EPCNDYLR FX MEDIAL LAT MANJ		No	No	No	No		No	No
24575	OPEN TX HUMERAL EPICONDYLAR FRACTURE		No	No	No	No		No	No
24576	CLTX HUMERAL CONDYLAR FX MEDIAL LAT W O MANJ		No	No	No	No		No	No
24577	CLTX HUMERAL CONDYLAR FX MEDIAL LATERAL W MANJ		No	No	No	No		No	No
24579	OPEN TREATMENT HUMERAL CONDYLAR FRACTURE		No	No	No	No		No	No
24582	PRQ SKEL FIXJ HUMRL CNDYLR FX MEDIAL LAT W MANJ		No	No	No	No		No	No
24586	OPTX PERIARTICULAR FRACTURE AND DISLOCATION ELBO		No	No	No	No		No	No
24587	OPTX PRIARTICULAR FX AND DISLC ELBW W IMPLT ARTHR		No	No	No	No		No	No
24600	TREATMENT CLOSED ELBOW DISLOCATION W O ANES		No	No	No	No		No	No
24605	TREATMENT CLOSED ELBOW DISLOCATION REQ ANES		No	No	No	No		No	No
24615	OPEN TX ACUTE CHRONIC ELBOW DISLOCATION		No	No	No	No		No	No
24620	CLOSED TX MONTEGGIA FX DISLOCATION ELBOW W MANJ		No	No	No	No		No	No
24635	OPEN TX MONTEGGIA FRACTURE DISLOCATION ELBOW		No	No	No	No		No	No
24640	CLTX RDL HEAD SUBLXTJ CHLD NURSEMAID ELBW W MANJ		No	No	Not Cov	No		No	No
24650	CLOSED TX RADIAL HEAD NECK FX W O MANIPULATION		No	No	Not Cov	No		No	No
24655	CLOSED TX RADIAL HEAD NECK FX W MANIPULATION		No	No	No	No		No	No
24665	OPEN TX RADIAL HEAD NECK FRACTURE		No	No	No	No		No	No
24666	OPEN TX RADIAL HEAD NECK FRACTURE PROSTHETIC		No	No	No	No		No	No
24670	CLOSED TX ULNAR FRACTURE PROXIMAL END W O MANJ		No	No	No	No		No	No
24675	CLOSED TX ULNAR FRACTURE PROXIMAL END W MANJ		No	No	No	No		No	No
24685	OPEN TREATMENT ULNAR FRACTURE PROXIMAL END		No	No	No	No		No	No
24800	ARTHRODESIS ELBOW JOINT LOCAL		No	No	No	No		No	No
24802	ARTHRODESIS ELBOW JOINT W AUTOGENOUS GRAFT		No	No	No	No		No	No
24900	AMPUTATION ARM THRU HUMERUS W PRIMARY CLOSURE		Not Cov	No	Not Cov	No		No	No
24920	AMPUTATION ARM THRU HUMERUS OPEN CIRCULAR		Not Cov	No	Not Cov	No		No	No
24925	AMP ARM THRU HUMERUS SECONDARY CLSR SCAR REVJ		No	No	No	No		No	No
24930	AMPUTATION ARM THRU HUMERUS RE-AMPUTATION		Not Cov	No	Not Cov	No		No	No
24931	AMPUTATION ARM THRU HUMERUS W IMPLANT		Not Cov	No	Not Cov	No		No	No
24935	STUMP ELONGATION UPPER EXTREMITY		No	No	Not Cov	No		No	No
24940	CINEPLASTY UPPER EXTREMITY COMPLETE PROCEDURE		Not Cov	No	Not Cov	No		No	No
24999	UNLISTED PROCEDURE HUMERUS ELBOW		Yes	Yes	Not Cov	Yes		Yes	Yes
25000	INCISION EXTENSOR TENDON SHEATH WRIST		No	No	No	No		No	No
25001	INCISION FLEXOR TENDON SHEATH WRIST		No	No	No	No		No	No
25020	DCMPRN FASCT F ARM AND WRST FLXR XTNSR W O DBRDMT		No	No	No	No		No	No
25023	DCMPRN FASCT F ARM AND WRST FLXR XTNSR W DBRDMT		No	No	No	No		No	No
25024	DCMPRN FASCT F ARM AND WRST FLXR AND XTNSR W O DB		No	No	No	No		No	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
25025	DCMPRN FASCT F ARM AND WRST FLXR AND XTNSR DBRDMT		No	No	No	No		No	No
25028	I AND D FOREARM AND WRIST DEEP ABSCESS HEMATOMA		No	No	No	No		No	No
25031	INCISION AND DRAINAGE FOREARM AND WRIST BURSA		No	No	No	No		No	No
25035	INCISION DEEP BONE CORTEX FOREARM AND WRIST		No	No	No	No		No	No
25040	ARTHRT RDCRPL MIDCARPL JT W EXPL DRG RMVL FB		No	No	No	No		No	No
25065	BIOPSY SOFT TISSUE FOREARM AND WRIST SUPERFICIAL		No	No	Not Cov	No		No	No
25066	BIOPSY SOFT TISSUE FOREARM AND WRIST DEEP		No	No	No	No		No	No
25071	EXC TUMOR SOFT TISS FOREARM AND WRIST SUBQ 3CM OR GRT		No	No	No	No		No	No
25073	EXC TUMOR SFT TISS FOREARM AND WRIST SUBFASC 3CM OR GRT		No	No	No	No		No	No
25075	EXC TUMOR SOFT TISSUE FOREARM AND WRIST SUBQ UNDER 3CM		No	No	No	No		No	No
25076	EXC TUMOR SOFT TISS FOREARM AND WRIST SUBFASC UNDER 3CM		No	No	No	No		No	No
25077	RAD RESECT TUMOR SOFT TISS FOREARM AND WRIST UNDER 3 CM		No	No	No	No		No	No
25078	RAD RESCJ TUM SOFT TISSUE FOREARM AND WRIST 3 CM OR GRT		No	No	No	No		No	No
25085	CAPSULOTOMY WRIST		No	No	No	No		No	No
25100	ARTHROTOMY WRIST JOINT WITH BIOPSY		No	No	No	No		No	No
25101	ARTHRT WRST W JT EXPL W WO BX W WO RMVL LOOSE FB		No	No	No	No		No	No
25105	ARTHROTOMY WRIST JOINT WITH SYNOVECTOMY		No	No	No	No		No	No
25107	ARTHROTOMY DSTL RADIOULNAR JOINT RPR CARTILAGE		No	No	No	No		No	No
25109	EXC TENDON FOREARM AND WRIST FLEXOR EXTENSOR EA		No	No	No	No		No	No
25110	EXCISION LESION TENDON SHEATH FOREARM AND WRIST		No	No	No	No		No	No
25111	EXCISION GANGLION WRIST DORSAL VOLAR PRIMARY		No	No	No	No		No	No
25112	EXCISION GANGLION WRIST DORSAL VOLAR RECURRENT		No	No	No	No		No	No
25115	RAD EXC BURSA SYNVA WRST F ARM TDN SHTHS FLXRS		No	No	No	No		No	No
25116	RAD EXC BURSA SYNVA WRST F ARM TDN SHTHS XTNSRS		No	No	No	No		No	No
25118	SYNOVECTOMY EXTENSOR TENDON SHTH WRIST 1 CMPRT		No	No	No	No		No	No
25119	SYNVCT XTNSR TDN SHTH WRST 1 RESCJ DSTL ULNA		No	No	No	No		No	No
25120	EXCISION CURETTAGE CYST TUMOR RADIUS ULNA		No	No	No	No		No	No
25125	EXC CURTG CYST TUMOR RADIUS ULNA W AUTOGRAFT		No	No	No	No		No	No
25126	EXC CURTG CYST TUMOR RADIUS ULNA W ALLOGRAFT		No	No	No	No		No	No

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			Outpatient		ASC	Office Setting			
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25130	EXCISION CURETTAGE CYST TUMOR CARPAL BONES		No	No	No	No		No	No
25135	EXC CURTGT CYST TUMOR CARPAL BONES W AUTOGRAFT		No	No	No	No		No	No
25136	EXC CURTGT CYST TUMOR CARPAL BONES W ALLOGRAFT		No	No	No	No		No	No
25145	SEQUESTRECTOMY FOREARM AND WRIST		No	No	No	No		No	No
25150	PARTIAL EXCISION BONE ULNA		No	No	No	No		No	No
25151	PARTIAL EXCISION BONE RADIUS		No	No	No	No		No	No
25170	RADICAL RESECTION TUMOR RADIUS OR ULNA		No	No	Not Cov	No		No	No
25210	CARPECTOMY 1 BONE		No	No	No	No		No	No
25215	CARPECTOMY ALL BONES PROXIMAL ROW		No	No	No	No		No	No
25230	RADICAL STYLOIDECTOMY SEPARATE PROCEDURE		No	No	No	No		No	No
25240	EXCISION DISTAL ULNA PARTIAL COMPLETE		No	No	No	No		No	No
25246	INJECTION WRIST ARTHROGRAPHY		No	No	Not Cov	No		No	No
25248	EXPL W REMOVAL DEEP FOREIGN BODY FOREARM WRIST		No	No	No	No		No	No
25250	REMOVAL WRIST PROSTHESIS SEPARATE PROCEDURE		No	No	No	No		No	No
25251	REMOVAL WRIST PROSTH COMPLICATED W TOTAL WRIST		No	No	No	No		No	No
25259	MANIPULATION WRIST UNDER ANESTHESIA		No	No	No	No		No	No
25260	RPR TDN MUSC FLXR F ARM AND WRST PRIM 1 EA TDN MU		No	No	No	No		No	No
25263	RPR TDN MUSC FLXR F ARM AND WRIST SEC 1 EA TDN MUS		No	No	No	No		No	No
25265	RPR TDN MUSC FLXR F ARM AND WRISTSEC FR GRF EA		No	No	No	No		No	No
25270	RPR TDN MUSC XTNSR F ARM AND WRIST PRIM 1 EA TDN		No	No	No	No		No	No
25272	RPR TDN MUSC XTNSR F ARM AND WRIST SEC 1 EA TDN MU		No	No	No	No		No	No
25274	RPR TDN MUSC XTNSR F ARM AND WRST SEC FR GRF EA TDN		No	No	No	No		No	No
25275	RPR TENDON SHEATH EXTENSOR F ARM AND WRIST W GRAFT		No	No	No	No		No	No
25280	LNGTH SHRT FLXR XTNSR TDN F ARM AND WRIST 1 EA TDN		No	No	No	No		No	No
25290	TNOT FLXR XTNSR TENDON FOREARM AND WRIST 1 EA		No	No	No	No		No	No
25295	TNOLS FLXR XTNSR TENDON FOREARM AND WRIST 1 EA		No	No	No	No		No	No
25300	TENODESIS WRIST FLEXORS FINGERS		No	No	No	No		No	No
25301	TENODESIS WRIST EXTENSORS FINGERS		No	No	No	No		No	No
25310	TDN TRNSPLJ TR FLXR XTNSR F ARM AND WRST 1 EA TDN		No	No	No	No		No	No
25312	TDN TRNSPLJ TR FLXR XTNSR F ARM AND WRST 1 TDN GR		No	No	No	No		No	No
25315	FLEXOR ORIGIN SLIDE FOREARM AND WRIST		No	No	No	No		No	No

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			Outpatient		ASC	Office Setting			
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25316	FLEXOR ORIGIN SLIDE F ARM AND WRST TENDON TRANSFE		No	No	No	No		No	No
25320	CAPSL-RHPHY RCNSTJ WRST OPN CARPL INS		No	No	No	No		No	No
25332	ARTHRP WRST W WO INTERPOS W WO XTRNL INT FIXJ		No	No	No	No		No	No
25335	CENTRALIZATION WRST ULNA		No	No	No	No		No	No
25337	RCNSTJ STABLJ DSTL U DSTL JT 2 SOFT TISS STABLJ		No	No	No	No		No	No
25350	OSTEOTOMY RADIUS DISTAL THIRD		No	No	No	No		No	No
25355	OSTEOTOMY RADIUS MIDDLE PROXIMAL THIRD		No	No	No	No		No	No
25360	OSTEOTOMY ULNA		No	No	No	No		No	No
25365	OSTEOTOMY RADIUS AND ULNA		No	No	No	No		No	No
25370	MLT OSTEOTOMIES W RELIGNMT IMED ROD RADIUS ULNA		No	No	No	No		No	No
25375	MLT OSTEOTOMIES W RELIGNMT IMED ROD RADIUS AND ULNA		No	No	No	No		No	No
25390	OSTEOPLASTY RADIUS ULNA SHORTENING		No	No	No	No		No	No
25391	OSTEOPLASTY RADIUS ULNA LENGTHENING W AUTOGRAFT		No	No	No	No		No	No
25392	OSTEOPLASTY RADIUS AND ULNA SHORTENING		No	No	No	No		No	No
25393	OSTEOPLASTY RADIUS AND ULNA LENGTHENING W AUTOGRAF		No	No	No	No		No	No
25394	OSTEOPLASTY CARPAL BONE SHORTENING		No	No	No	No		No	No
25400	RPR NONUNION MALUNION RADIUS ULNA W O AUTOGRAFT		No	No	No	No		No	No
25405	RPR NONUNION MALUNION RADIUS ULNA W AUTOGRAFT		No	No	No	No		No	No
25415	RPR NONUNION MALUNION RADIUS AND ULNA W O AUTOGRAF		No	No	No	No		No	No
25420	RPR NONUNION MALUNION RADIUS AND ULNA W AUTOGRAFT		No	No	No	No		No	No
25425	REPAIR DEFECT W AUTOGRAFT RADIUS ULNA		No	No	No	No		No	No
25426	REPAIR DEFECT W AUTOGRAFT RADIUS AND ULNA		No	No	No	No		No	No
25430	INSERTION VASCULAR PEDICLE CARPAL BONE		No	No	No	No		No	No
25431	REPAIR NONUNION CARPAL BONE EACH BONE		No	No	No	No		No	No
25440	RPR NONUNION SCAPHOID CARPAL BNE W WO RDL STYLEC		No	No	No	No		No	No
25441	ARTHROPLASTY W PROSTHETIC RPLCMT DISTAL RADIUS		No	No	No	No		No	No
25442	ARTHROPLASTY W PROSTHETIC RPLCMT DISTAL ULNA		No	No	No	No		No	No
25443	ARTHROPLASTY W PROSTHETIC RPLCMT SCAPHOID CARPAL		No	No	No	No		No	No
25444	ARTHROPLASTY W PROSTHETIC REPLACEMENT LUNATE		No	No	No	No		No	No
25445	ARTHROPLASTY W PROSTHETIC REPLACEMENT TRAPEZIUM		No	No	No	No		No	No
25446	ARTHRP W PROSTC RPLCMT DSTL RDS AND PRTL CARPUS		No	No	No	No		No	No
25447	ARTHRP INTERPOS INTERCARPAL METACARPAL JOINTS		Yes	Yes	Yes	No		Yes	Yes
25449	REVJ ARTHRP W REMOVAL IMPLANT WRIST JOINT		No	No	No	No		No	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
25450	EPIPHYSL ARST EPIPHYSIOD STAPLING DSTL RDS U		No	No	No	No		No	No
25455	EPIPHYSL ARST EPIPHYSIOD STAPLING DSTL RDS AND ULNA		No	No	No	No		No	No
25490	PROPH TX N P PLTWR W WO METHYLACRYLATE RADIUS		No	No	No	No		No	No
25491	PROPH TX N P PLTWR W WO METHYLMETHACRYLATE ULNA		No	No	No	No		No	No
25492	PROPH TX N P PLTWR W WO METHYLMECRYLATE RAD AND UL		No	No	No	No		No	No
25500	CLOSED TX RADIAL SHAFT FRACTURE W O MANIPULATION		No	No	Not Cov	No		No	No
25505	CLOSED TX RADIAL SHAFT FRACTURE W MANIPULATION		No	No	No	No		No	No
25515	OPEN TREATMENT RADIAL SHAFT FRACTURE		No	No	No	No		No	No
25520	CLTX RDL SHFT FX AND CLTX DISLC DSTL RAD ULN JT		No	No	No	No		No	No
25525	OPEN RDL SHAFT FX CLOSED RAD ULN JT DISLOCATE		No	No	No	No		No	No
25526	OPEN RDL SHAFT FX OPEN RAD ULN JT DISLOCATE		No	No	No	No		No	No
25530	CLOSED TX ULNAR SHAFT FRACTURE W O MANIPULATION		No	No	Not Cov	No		No	No
25535	CLOSED TX ULNAR SHAFT FRACTURE W MANIPULATION		No	No	No	No		No	No
25545	OPEN TREATMENT OF ULNAR SHAFT FRACTURE		No	No	No	No		No	No
25560	CLOSED TX RADIAL AND ULNAR SHAFT FRACTURES W O MAN		No	No	Not Cov	No		No	No
25565	CLOSED TX RADIAL AND ULNAR SHAFT FRACTURES W MANJ		No	No	No	No		No	No
25574	OPEN TX RADIAL AND ULNAR SHAFT FX W FIXJ RADIUS ULNA		No	No	No	No		No	No
25575	OPEN TX RADIAL AND ULNAR SHAFT FX W FIXJ RADIUS AND ULNA		No	No	No	No		No	No
25600	CLTX DSTL RADIAL FX EPIPHYSL SEP W O MANJ		No	No	Not Cov	No		No	No
25605	CLTX DSTL RDL FX EPIPHYSL SEP W MANJ WHEN PERF		No	No	No	No		No	No
25606	PERQ SKEL FIXJ DISTAL RADIAL FX EPIPHYSL SEP		No	No	No	No		No	No
25607	OPTX DSTL RADL X-ARTIC FX EPIPHYSL SEP		No	No	No	No		No	No
25608	OPTX DSTL RADL I-ARTIC FX EPIPHYSL SEP 2 FRAG		No	No	No	No		No	No
25609	OPTX DSTL RADL I-ARTIC FX EPIPHYSL SEP 3 FRAG		No	No	No	No		No	No
25622	CLOSED TX CARPAL SCAPHOID FRACTURE W O MANJ		No	No	Not Cov	No		No	No
25624	CLOSED TX CARPAL SCAPHOID FRACTURE W MANJ		No	No	No	No		No	No
25628	OPEN TX CARPAL SCAPHOID NAVICULAR FRACTURE		No	No	No	No		No	No
25630	CLTX CARPAL BONE FX W O MANJ EACH BONE		No	No	Not Cov	No		No	No
25635	CLTX CARPAL BONE FX W MANJ EACH BONE		No	No	No	No		No	No
25645	OPEN TX CARPAL BONE FRACTURE OTH THN SCAPHOID EA		No	No	No	No		No	No
25650	CLOSED TREATMENT ULNAR STYLOID FRACTURE		No	No	Not Cov	No		No	No
25651	PRQ SKELETAL FIXATION ULNAR STYLOID FRACTURE		No	No	No	No		No	No
25652	OPEN TREATMENT ULNAR STYLOID FRACTURE		No	No	No	No		No	No

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DOS Effective 10/1/19; Posted 10/30/19

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Code	Code Description	Comments	Apple Health & IMC Medical				IMC / BHSO (Mental Health covered svcs)	Medicare	Market Place
			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
25660	CLTX RDCRPL INTERCARPL DISLC 1 OR GRT BONES W MANJ		No	No	No	No		No	No
25670	OPEN TX RADIOCARPAL INTERCARPAL DISLC 1 OR GRT BONES		No	No	No	No		No	No
25671	PRQ SKELETAL FIXJ DISTAL RADIOULNAR DISLOCATION		No	No	No	No		No	No
25675	CLOSED TX DISTAL RADIOULNAR DISLOCATION W MANJ		No	No	No	No		No	No
25676	OPEN TX DISTAL RADIOULNAR DISLC ACUTE CHRONIC		No	No	No	No		No	No
25680	CLTX TRANS-SCAPHOPRILUNAR TYP FX DISLC W MANJ		No	No	No	No		No	No
25685	OPEN TX TRANS-SCAPHOPERILUNAR FRACTURE DISLC		No	No	No	No		No	No
25690	CLOSED TX LUNATE DISLOCATION W MANIPULATION		No	No	No	No		No	No
25695	OPEN TREATMENT LUNATE DISLOCATION		No	No	No	No		No	No
25800	ARTHRODESIS WRIST COMPLETE W O BONE GRAFT		No	No	No	No		No	No
25805	ARTHRODESIS WRIST W SLIDING GRAFT		No	No	No	No		No	No
25810	ARTHRODESIS WRIST W ILIAC OTHER AUTOGRAFT		No	No	No	No		No	No
25820	ARTHRODESIS WRIST LIMITED W O BONE GRAFT		No	No	No	No		No	No
25825	ARTHRODESIS WRIST LIMITED W AUTOGRAFT		No	No	No	No		No	No
25830	ARTHRD DSTL RAD ULN JT SGM TL RSCJ ULNA W WO BONE		No	No	No	No		No	No
25900	AMPUTATION FOREARM THROUGH RADIUS AND ULNA		Not Cov	No	Not Cov	No		No	No
25905	AMP FOREARM THRU RADIUS AND ULNA OPEN CIRCULAR		Not Cov	No	Not Cov	No		No	No
25907	AMP F ARM THRU RADIUS AND ULNA SEC CLOSURE SCAR RE		No	No	No	No		No	No
25909	AMP FOREARM THRU RADIUS AND ULNA RE-AMPUTATION		No	No	Not Cov	No		No	No
25915	KRUKENBERG PROCEDURE		Not Cov	No	Not Cov	No		No	No
25920	DISARTICULATION THROUGH WRIST		Not Cov	No	Not Cov	No		No	No
25922	DISARTICULATION THRU WRIST SEC CLOSURE SCAR REVJ		No	No	No	No		No	No
25924	DISARTICULATION THRU WRIST RE-AMPUTATION		Not Cov	No	Not Cov	No		No	No
25927	TRANSMETACARPAL AMPUTATION		Not Cov	No	Not Cov	No		No	No
25929	TRANSMETACARPAL AMPUTATION SEC CLOSURE SCAR REVJ		No	No	No	No		No	No
25931	TRANSMETACARPAL AMPUTATION RE-AMPUTATION		No	No	No	No		No	No
25999	UNLISTED PROCEDURE FOREARM WRIST		Yes	Yes	Not Cov	Yes		Yes	Yes
26010	DRAINAGE FINGER ABSCESS SIMPLE		No	No	Not Cov	No		No	No
26011	DRAINAGE FINGER ABSCESS COMPLICATED		No	No	No	No		No	No
26020	DRAINAGE TENDON SHEATH DIGIT AND PALM EACH		No	No	No	No		No	No
26025	DRAINAGE OF PALMAR BURSA SINGLE BURSA		No	No	No	No		No	No
26030	DRAINAGE OF PALMAR BURSA MULTIPLE BURSA		No	No	No	No		No	No
26034	INCISION BONE CORTEX HAND FINGER		No	No	No	No		No	No
26035	DECOMPRESSION FINGERS AND HAND INJECTION INJURY		No	No	No	No		No	No
26037	DECOMPRESSIVE FASCIOTOMY HAND		No	No	No	No		No	No
26040	FASCIOTOMY PALMAR PERCUTANEOUS		No	No	No	No		No	No

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DOS Effective 10/1/19; Posted 10/30/19

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Code	Code Description	Comments	Apple Health & IMC Medical				IMC / BHSO (Mental Health covered svcs)	Medicare	Market Place
			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
26045	FASCIOTOMY PALMAR OPEN PARTIAL		No	No	No	No	No	No	
26055	TENDON SHEATH INCISION		No	No	No	No	No	No	
26060	TENOTOMY PERCUTANEOUS SINGLE EACH DIGIT		No	No	No	No	No	No	
26070	ARTHRT EXPL DRG RMVL LOOSE FB CARP MTCRPL JT		No	No	No	No	No	No	
26075	ARTHRT EXPL DRG RMVL LOOSE FB MTCARPHLNGL JT EA		No	No	No	No	No	No	
26080	ARTHRT EXPL DRG RMVL LOOSE FB IPHAL JT EA		No	No	No	No	No	No	
26100	ARTHROTOMY BIOPSY CARP MTCRPL JOINT EACH		No	No	No	No	No	No	
26105	ARTHROTOMY BIOPSY MTCARPHLNGL JOINT EACH		No	No	No	No	No	No	
26110	ARTHROTOMY BIOPSY INTERPHALANGEAL JOINT EACH		No	No	No	No	No	No	
26111	EX TUM VASC MALF SFT TISS HAND FNGR SUBQ 1.5CM OR GRT		No	No	No	No	No	No	
26113	EX TUM VASC MAL SFT TIS HAND FNGR SUBFSC 1.5CM OR GRT		No	No	No	No	No	No	
26115	EXC TUM VASC MAL SFT TISS HAND FNGR SUBQ UNDER 1.5CM		No	No	No	No	No	No	
26116	EXC TUM VAS MAL SFT TIS HAND FNGR SUBFASC UNDER 1.5CM		No	No	No	No	No	No	
26117	RAD RESECT TUMOR SOFT TISSUE HAND FINGER UNDER 3CM		No	No	No	No	No	No	
26118	RAD RESCJ TUM SOFT TISSUE HAND FINGER 3 CM OR GRT		No	No	No	No	No	No	
26121	FASCT PALM W WO Z-PLASTY TISSUE REARGMT SKN GRFT		No	No	No	No	No	No	
26123	FASCT PRTL PALMAR 1 DGT PROX IPHAL JT W WO RPR		No	No	No	No	No	No	
26125	FASCT PRTL PALMR ADDL DGT PROX IPHAL JT W WO RPR		No	No	No	No	No	No	
26130	SYNOVECTOMY CARPOMETACARPAL JOINT		No	No	No	No	No	No	
26135	SYNVCT MTCARPHLNGL JT W INTRNSC RLS AND XTNSR HOOD		No	No	No	No	No	No	
26140	SYNVCT PROX IPHAL JT W XTNSR RCNSTJ EA IPHAL JT		No	No	No	No	No	No	
26145	SYNVCT TDN SHTH RAD FLXR TDN PALM AND FNGR EA TDN		No	No	No	No	No	No	
26160	EXC LESION TDN SHTH JT CAPSL HAND FNGR		No	No	No	No	No	No	
26170	EXCISION TENDON PALM FLEXOR EXTENSOR SINGLE EACH		No	No	No	No	No	No	
26180	EXCISION TENDON FINGER FLEXOR EXTENSOR EACH		No	No	No	No	No	No	
26185	SESAMOIDECTOMY THUMB FINGER SEPARATE PROCEDURE		No	No	No	No	No	No	
26200	EXCISION CURETTAGE CYST TUMOR METACARPAL		No	No	No	No	No	No	
26205	EXC CURETTAGE CYST TUMOR METACARPAL W AUTOGRAFT		No	No	No	No	No	No	
26210	EXCISION CURETTAGE CYST TUMOR PHALANX FINGER		No	No	No	No	No	No	
26215	EXC CURETTAGE CYST TUMOR PHALANX FINGER W AGRAFT		No	No	No	No	No	No	
26230	PARTIAL EXCISION BONE METACARPAL		No	No	No	No	No	No	

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
26235	PARTIAL EXCISION PROXIMAL MIDDLE PHALANX FINGER		No	No	No	No		No	No
26236	PARTIAL EXCISION DISTAL PHALANX FINGER		No	No	No	No		No	No
26250	RADICAL RESECTION TUMOR METACARPAL		No	No	No	No		No	No
26260	RAD RESECTION TUMOR PROX MIDDLE PHALANX FINGER		No	No	No	No		No	No
26262	RADICAL RESECTION TUMOR DISTAL PHALANX FINGER		No	No	No	No		No	No
26320	REMOVAL IMPLANT FROM FINGER HAND		No	No	No	No		No	No
26340	MANIPULATION FINGER JOINT UNDER ANES EACH JOINT		No	No	No	No		No	No
26341	MANIPLATN PALAR FASCIAL CRD POST INJ SINGLE CORD		No	No	No	No		No	No
26350	RPR ADVMNT FLXR TDN N Z 2 W O FR GRAFT EA TENDON		No	No	No	No		No	No
26352	RPR ADVMNT FLXR TDN N Z 2 W FR GRAFT EA TENDON		No	No	No	No		No	No
26356	RPR ADVMNT FLXR TDN ZONE 2 W O FR GRFT EA TENDON		No	No	No	No		No	No
26357	RPR ADVMNT FLXR TDN ZONE 2 W O FR GRFT EA TENDON		No	No	No	No		No	No
26358	RPR ADVMNT FLXR TDN ZONE 2 W FR GRAFT EA TENDON		No	No	No	No		No	No
26370	RPR ADVMNT TDN W NTC SUPFCIS TDN PRIM EA TDN		No	No	No	No		No	No
26372	RPR ADVMNT TDN W NTC SUPFCIS TDN W FREE GRAFT EA		No	No	No	No		No	No
26373	RPR ADVMNT TDN W NTC SUPFCIS TDN W O FREE GRF EA		No	No	No	No		No	No
26390	EXC FLXR TDN W IMPLTJ SYNTH ROD DLYD TDN GRF H F		No	No	No	No		No	No
26392	RMVL SYNTH ROD AND INSJ FLXR TDN GRF H F EA ROD		No	No	No	No		No	No
26410	REPAIR EXTENSOR TENDON HAND W O GRAFT EACH		No	No	No	No		No	No
26412	REPAIR EXTENSOR TENDON HAND W GRAFT EACH		No	No	No	No		No	No
26415	EXC XTNSR TDN W IMPLTJ SYNTH ROD DLYD GRF H F EA		No	No	No	No		No	No
26416	RMVL SYNTH ROD AND INSJ XTNSR TDN GRF H F EA ROD		No	No	No	No		No	No
26418	REPAIR EXTENSOR TENDON FINGER W O GRAFT EACH		No	No	No	No		No	No
26420	REPAIR EXTENSOR TENDON FINGER W GRAFT EACH		No	No	No	No		No	No
26426	RPR XTNSR TDN CNTRL SLIP TISS W LAT BAND EA FNGR		No	No	No	No		No	No
26428	RPR XTNSR TDN CNTRL SLIP SEC W FR GRFT EA FINGER		No	No	No	No		No	No
26432	CLTX DSTL XTNSR TDN INSJ W WO PERCUTAN PINNING		No	No	No	No		No	No
26433	REPAIR EXTENSOR TENDON DISTAL INSERTION W O GRF		No	No	No	No		No	No
26434	REPAIR EXTENSOR TENDON DISTAL INSERTION W GRAFT		No	No	No	No		No	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
26437	REALIGNMENT EXTENSOR TENDON HAND EACH TENDON		No	No	No	No		No	No
26440	TENOLYSIS FLEXOR TENDON PALM FINGER EACH TENDON		No	No	No	No		No	No
26442	TENOLYSIS FLEXOR TENDON PALM AND FINGER EACH TENDON		No	No	No	No		No	No
26445	TENOLYSIS EXTENSOR TENDON HAND FINGER EACH		No	No	No	No		No	No
26449	TENOLYSIS CPLX XTNSR TENDON FINGER W FOREARM EA		No	No	No	No		No	No
26450	TENOTOMY FLEXOR PALM OPEN EACH TENDON		No	No	No	No		No	No
26455	TENOTOMY FLEXOR FINGER OPEN EACH TENDON		No	No	No	No		No	No
26460	TENOTOMY EXTENSOR HAND FINGER OPEN EACH TENDON		No	No	No	No		No	No
26471	TENODESIS PROXIMAL INTERPHALANGEAL JOINT EACH		No	No	No	No		No	No
26474	TENODESIS DISTAL JOINT EACH		No	No	No	No		No	No
26476	LENGTHENING TENDON EXTENSOR HAND FINGER EACH		No	No	No	No		No	No
26477	SHORTENING TENDON EXTENSOR HAND FINGER EACH		No	No	No	No		No	No
26478	LENGTHENING TENDON FLEXOR HAND FINGER EACH		No	No	No	No		No	No
26479	SHORTENING TENDON FLEXOR HAND FINGER EACH		No	No	No	No		No	No
26480	TR TRNSPL TDN CARP MTCRPL HAND W O FR GRF EA TDN		No	No	No	No		No	No
26483	TENDON TRANSFER TRANSPLANT CARP MTCRPL GRAFT		No	No	No	No		No	No
26485	TRANSFER TRANSPLANT TENDON PALMAR W O GRAFT EACH		No	No	No	No		No	No
26489	TRANSFER TRANSPLANT TENDON PALMAR W GRAFT EACH		No	No	No	No		No	No
26490	OPPONENSPLASTY SUPFCIS TDN TR TYP EA TDN		No	No	No	No		No	No
26492	OPPONENSPLASTY TDN TR W GRF EA TDN		No	No	No	No		No	No
26494	OPPONENSPLASTY HYPOTHENAR MUSC TR		No	No	No	No		No	No
26496	OPPONENSPLASTY OTHER METHODS		No	No	No	No		No	No
26497	TR TDN RESTORE INTRNSC FUNCJ RING AND SM FNGR		No	No	No	No		No	No
26498	TR TDN RESTORE INTRNSC FUNCJ ALL 4 FNGRS		No	No	No	No		No	No
26499	CORRECTION CLAW FINGER OTHER METHODS		Yes	Yes	Yes	No		Yes	Yes
26500	RCNSTJ TENDON PULLEY EACH W LOCAL TISSUES SPX		No	No	No	No		No	No
26502	RCNSTJ TDN PULLEY EA TDN W TDN FSCAL GRF SPX		No	No	No	No		No	No
26508	RELEASE THENAR MUSCLE		No	No	No	No		No	No
26510	CROSS INTRINSIC TRANSFER EACH TENDON		No	No	No	No		No	No
26516	CAPSULODESIS MTCARPHLNGL JOINT SINGLE DIGIT		No	No	No	No		No	No
26517	CAPSULODESIS MTCARPHLNGL JOINT 2 DIGITS		No	No	No	No		No	No
26518	CAPSULODESIS MTCARPHLNGL JOINT 3 4 DIGITS		No	No	No	No		No	No
26520	CAPSULECTOMY CAPSULOTOMY MTCARPHLNGL JOINT EACH		No	No	No	No		No	No
26525	CAPSULECTOMY CAPSULOTOMY IPHAL JOINT EACH		No	No	No	No		No	No
26530	ARTHROPLASTY METACARPOPHALANGEAL JOINT EACH		No	No	No	No		No	No
26531	ARTHROPLASTY MTCARPHLNGL JT W PROSTC IMPLT EA JT		No	No	No	No		No	No
26535	ARTHROPLASTY INTERPHALANGEAL JOINT EACH		No	No	No	No		No	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
26536	ARTHROPLASTY INTERPHALANGEAL JT W PROSTHETIC EA		No	No	No	No		No	No
26540	RPR COLTRL LIGM MTCARPHLNGL IPHAL JT		No	No	No	No		No	No
26541	RCNSTJ COLTRL LIGM MTCARPHLNGL 1 W TDN FSCAL GRF		No	No	No	No		No	No
26542	RCNSTJ COLTRL LIGM MTCARPHLNGL 1 W LOCAL TISS		No	No	No	No		No	No
26545	RCNSTJ COLTRL LIGM IPHAL JT 1 W GRF EA JT		No	No	No	No		No	No
26546	RPR NON-UNION MTCRPL PHALANX		No	No	No	No		No	No
26548	RPR AND RCNSTJ FINGER VOLAR PLATE INTERPHALANGEAL		No	No	No	No		No	No
26550	POLLICIZATION DIGIT		No	No	No	No		No	No
26551	TR TOE-TO-HAND W MVASC ANAST GRT TOE WRP ARND		Not Cov	No	Not Cov	No		No	No
26553	TR TOE-TO-HAND W MVASC ANAST OTH THN GRT TOE 1		Not Cov	No	Not Cov	No		No	No
26554	TR TOE-TO-HAND W MVASC ANAST OTH THN GRT TOE 2		Not Cov	No	Not Cov	No		No	No
26555	TR FNGR AXH POS W O MVASC ANAST		No	No	No	No		No	No
26556	TRANSFER FREE TOE JOINT W MVASC ANASTOMOSIS		Not Cov	No	Not Cov	No		No	No
26560	REPAIR SYNDACTYLY EACH SPACE W SKIN FLAPS		No	No	No	No		No	No
26561	REPAIR SYNDACTYLY EACH SPACE W SKIN FLAPS AND GRAFT		No	No	No	No		No	No
26562	REPAIR SYNDACTYLY EACH SPACE COMPLEX		No	No	No	No		No	No
26565	OSTEOTOMY METACARPAL EACH		No	No	No	No		No	No
26567	OSTEOTOMY PHALANX FINGER EACH		No	No	No	No		No	No
26568	OSTEOPLASTY LENGTHENING METACARPAL PHALANX		No	No	No	No		No	No
26580	REPAIR CLEFT HAND		No	No	No	No		No	No
26587	RCNSTJ POLYDACTYLOUS DIGIT SOFT TISSUE AND BONE		No	No	No	No		No	No
26590	REPAIR MACRODACTYLIA EACH DIGIT		No	No	No	No		No	No
26591	REPAIR INTRINSIC MUSCLES HAND EACH MUSCLE		No	No	No	No		No	No
26593	RELEASE INTRINSIC MUSCLES HAND EACH MUSCLE		No	No	No	No		No	No
26596	EXC CONSTRICTING RING FNGR W MLT Z-PLASTIES		No	No	No	No		No	No
26600	CLTX METACARPAL FX W O MANIPULATION EACH BONE		No	No	Not Cov	No		No	No
26605	CLTX METACARPAL FX W MANIPULATION EACH BONE		No	No	No	No		No	No
26607	CLTX METACARPAL FX W MANJ W XTRNL FIXJ EA BONE		No	No	No	No		No	No
26608	PRQ SKELETAL FIXJ METACARPAL FX EACH BONE		No	No	No	No		No	No
26615	OPEN TX METACARPAL FRACTURE SINGLE EA BONE		No	No	No	No		No	No
26641	CLTX CARPO METACARPAL DISLOCATION THUMB W MANJ		No	No	Not Cov	No		No	No
26645	CLTX CARPO METACARPAL FX DISLC THUMB W MANJ		No	No	No	No		No	No
26650	PRQ SKELETAL FIX CARPO METACARPAL FX DISLC THUMB		No	No	No	No		No	No
26665	OPEN TX CARPOMETACARPAL FRACTURE DISLOCATE THUMB		No	No	No	No		No	No
26670	CLTX CARPO METACARPL DISLC THMB MANJ EA W O ANES		No	No	Not Cov	No		No	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
26675	CLTX CARPO MTCRPL DISLC THUMB MANJ EA JT W ANES		No	No	No	No		No	No
26676	PRQ SKEL FIXJ CARPO MTCRPL DISLC THMB MANJ EA JT		No	No	No	No		No	No
26685	OPEN TX CARPOMETACARPAL DISLOCATE NOT THUMB		No	No	No	No		No	No
26686	OPTX CARP MTCRPL DISLC THMB CPLX MLT DLYD RDCTJ		No	No	No	No		No	No
26700	CLTX METACARPOPHALANGEAL DISLC W MANJ W O ANES		No	No	Not Cov	No		No	No
26705	CLTX METACARPOPHALANGEAL DISLC W MANJ W ANES		No	No	No	No		No	No
26706	PRQ SKEL FIXJ METACARPOPHALANGEAL DISLC W MANJ		No	No	No	No		No	No
26715	OPEN TREATMENT METACARPOPHALANGEAL DISLOCATION		No	No	No	No		No	No
26720	CLTX PHLNGL FX PROX MIDDLE PX F T W O MANJ EA		No	No	Not Cov	No		No	No
26725	CLTX PHLNGL FX PROX MIDDLE PX F T W MANJ EA		No	No	Not Cov	No		No	No
26727	PRQ SKEL FIXJ PHLNGL SHFT FX PROX MIDDLE PX F T		No	No	No	No		No	No
26735	OPEN TX PHALANGEAL SHAFT FRACTURE PROX MIDDLE EA		No	No	No	No		No	No
26740	CLTX ARTCLR FX INVG MTCRPHLNGL IPHAL JT W O MANJ		No	No	Not Cov	No		No	No
26742	CLTX ARTCLR FX INVG MTCRPHLNGL IPHAL JT W MANJ		No	No	No	No		No	No
26746	OPEN TX ARTICULAR FRACTURE MCP IP JOINT EA		No	No	No	No		No	No
26750	CLTX DSTL PHLNGL FX FNDR THMB W O MANJ EA		No	No	Not Cov	No		No	No
26755	CLTX DSTL PHLNGL FX FNDR THMB W MANJ EA		No	No	No	No		No	No
26756	PRQ SKEL FIXJ DSTL PHLNGL FX FNDR THMB EA		No	No	No	No		No	No
26765	OPEN TX DISTAL PHALANGEAL FRACTURE EACH		No	No	No	No		No	No
26770	CLTX IPHAL JT DISLC W MANJ W O ANES		No	No	No	No		No	No
26775	CLTX IPHAL JT DISLC W MANJ REQ ANES		No	No	Not Cov	No		No	No
26776	PRQ SKEL FIXJ IPHAL JT DISLC W MANJ		No	No	No	No		No	No
26785	OPEN TX INTERPHALANGEAL JOINT DISLOCATION		No	No	No	No		No	No
26820	FUSION OPPOSITION THUMB W AUTOGENOUS GRAFT		No	No	No	No		No	No
26841	ARTHRD CARPO METACARPAL JT THUMB W WO INT FIXJ		No	No	No	No		No	No
26842	ARTHRD CRP MTACRPL JT THMB W WO INT FIXJ W AGRFT		No	No	No	No		No	No
26843	ARTHRD CARP MTCRPL JT DGT OTHER THAN THUMB EACH		No	No	No	No		No	No
26844	ARTHRD CARP MTCRPL JT DGT OTH THN THMB W AGRFT		No	No	No	No		No	No
26850	ARTHRODESIS METACARPOPHALANGEAL JT W WO INT FIXJ		No	No	No	No		No	No
26852	ARTHRODESIS MTCRPL JT W WO INT FIXJ W AUTOGRAFT		No	No	No	No		No	No
26860	ARTHRODESIS INTERPHALANGEAL JT W WO INT FIXJ		No	No	No	No		No	No
26861	ARTHRODESIS IPHAL JT W WO INT FIXJ EA IPHAL JT		No	No	No	No		No	No
26862	ARTHRODESIS IPHAL JT W WO INT FIXJ W AUTOGRAFT		No	No	No	No		No	No
26863	ARTHRODESIS IPHAL JT W WO INT FIXJ W AGRFT EA JT		No	No	No	No		No	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
26910	AMP MTCRPL W FINGER THUMB W WO INTEROSS TRANSFER		No	No	No	No		No	No
26951	AMP F TH 1 2 JT PHALANX W NEURECT W DIR CLSR		No	No	No	No		No	No
26952	AMP F TH 1 2 JT PHALANX W NEURECT LOCAL FLAP		No	No	No	No		No	No
26989	UNLISTED PROCEDURE HANDS FINGERS		Yes	Yes	Not Cov	Yes		Yes	Yes
26990	I AND D PELVIS HIP JT AREA DEEP ABSCESS HEMATOMA		No	No	No	No		No	No
26991	I AND D PELVIS HIP JOINT AREA INFECTED BURSA		No	No	No	No		No	No
26992	INCISION BONE CORTEX PELVIS AND HIP JOINT		No	No	Not Cov	No		No	No
27000	TENOTOMY ADDUCTOR HIP PERCUTANEOUS SPX		No	No	No	No		No	No
27001	TENOTOMY ADDUCTOR HIP OPEN		No	No	No	No		No	No
27003	TX ADDUXOR SUBQ OPN W OBTURATOR NEURECTOMY		No	No	No	No		No	No
27005	TENOTOMY HIP FLEXOR OPEN SEPARATE PROCEDURE		No	No	Not Cov	No		No	No
27006	TENOTOMY ABDUCTORS AND EXTENSOR HIP OPEN SPX		No	No	Not Cov	No		No	No
27025	FASCIOTOMY HIP THIGH ANY TYPE		No	No	Not Cov	No		No	No
27027	DECOMPRESSION FASCIOTOMY PELVIC COMPARTMENT UNI		No	No	Not Cov	No		No	No
27030	ARTHROTOMY HIP W DRAINAGE		Not Cov	No	Not Cov	No		No	No
27033	ARTHROTOMY HIP EXPLORATION REMOVAL FOREIGN BODY		No	No	No	No		No	No
27035	DNRVTJ HIP JT INTRAPEL XTRPEL INTRA-ARTCLR BRNCH		No	No	No	No		No	No
27036	CAPSLCTOMY CAPSUL HIP W RLS HIP FLXR MUSC		Not Cov	No	Not Cov	No		No	No
27040	BIOPSY SOFT TISSUE PELVIS AND HIP AREA SUPERFICIAL		No	No	No	No		No	No
27041	BIOPSY SOFT TISSUE PELVIS AND HIP DEEP SUBFSCAL IM		No	No	No	No		No	No
27043	EXCISION TUMOR SOFT TISSUE PELVIS AND HIP SUBQ 3CM OR GRT		No	No	No	No		No	No
27045	EXC TUMOR SOFT TISSUE PELVIS AND HIP SUBFASC 5CM OR GRT		No	No	No	No		No	No
27047	EXC TUMOR SOFT TISSUE PELVIS AND HIP SUBQ UNDER 3CM		No	No	No	No		No	No
27048	EXC TUMOR SOFT TISSUE PELVIS AND HIP SUBFASC UNDER 5CM		No	No	No	No		No	No
27049	RAD RESECT TUMOR SOFT TISSUE PELVIS AND HIP UNDER 5 CM		No	No	No	No		No	No
27050	ARTHROTOMY W BIOPSY SACROILIAC JOINT		No	No	No	No		No	No
27052	ARTHROTOMY W BIOPSY HIP JOINT		No	No	No	No		No	No
27054	ARTHROTOMY W SYNOVECTOMY HIP JOINT		Not Cov	No	Not Cov	No		No	No
27057	DCMPRN FASCIOTOMY PELVIC CMPRT DBRDMT MUSCLE UNI		No	No	Not Cov	No		No	No
27059	RAD RESECTION TUMOR SOFT TISS PELVIS AND HIP 5 CM OR GRT		No	No	No	No		No	No
27060	EXCISION ISCHIAL BURSA		No	No	No	No		No	No
27062	EXCISION TROCHANTERIC BURSA CALCIFICATION		No	No	No	No		No	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
27065	EXCISION BONE CYST BNIGN TUMOR SUPERFICIAL		No	No	No	No		No	No
27066	EXCISION BONE CYST BENIGN TUMOR DEEP		No	No	No	No		No	No
27067	EXC B1 CST B9 TUM W AGRFT REQ SEP INC		No	No	No	No		No	No
27070	PARTIAL EXCISION SUPERFICIAL PELVIS		Not Cov	No	Not Cov	No		No	No
27071	PARTIAL EXCISION DEEP PELVIS		Not Cov	No	Not Cov	No		No	No
27075	RAD RESCT TUMOR WING OF ILIUM 1 PUBIC ISCHIAL		Not Cov	No	Not Cov	No		No	No
27076	RAD RESCT TUMOR ILIUM ACETABULUM BOTH PUBIC		Not Cov	No	Not Cov	No		No	No
27077	RADICAL RESCTION TUMOR INNOMINATE BONE TOTAL		Not Cov	No	Not Cov	No		No	No
27078	RAD RESCT TUMOR ISCHIAL TUBEROSITY AND GRT TRCHNTR		Not Cov	No	Not Cov	No		No	No
27080	COCCYGECTOMY PRIMARY		No	No	No	No		No	No
27086	RMVL FOREIGN BODY PELVIS HIP SUBCUTANEOUS TISS		No	No	No	No		No	No
27087	REMOVAL FOREIGN BODY PELVIS HIP DEEP		No	No	No	No		No	No
27090	REMOVAL HIP PROSTHESIS SEPARATE PROCEDURE		Not Cov	No	Not Cov	No		No	No
27091	RMVL HIP PROSTH COMP W TOT HIP PROSTH MMA		Not Cov	No	Not Cov	No		No	No
27093	INJECTION HIP ARTHROGRAPHY W O ANESTHESIA		No	No	Not Cov	No		No	No
27095	INJECTION HIP ARTHROGRAPHY W ANESTHESIA		No	No	Not Cov	No		No	No
27096	INJECT SI JOINT ARTHRGRPHY AND ANES STEROID W IMA		Not Cov	Yes	Not Cov	Yes		Yes	Yes
27097	RELEASE RECESSION HAMSTRING PROXIMAL		No	No	No	No		No	No
27098	TRANSFER ADDUCTOR ISCHIUM		No	No	No	No		No	No
27100	TR XTRNL OBLQ MUSC TRCHNTR W FSCAL TDN XTN GRF		No	No	No	No		No	No
27105	TR PARASPI MUSC HIP FASC TDN XTN GRF		No	No	No	No		No	No
27110	TRANSFER ILIOPSOAS GREATER TROCHANTER FEMUR		No	No	No	No		No	No
27111	TRANSFER ILIOPSOAS FEMORAL NECK		No	No	No	No		No	No
27120	ACETABULOPLASTY		Not Cov	Yes	Not Cov	No		Yes	Yes
27122	ACETABULOPLASTY RESECTION FEMORAL HEAD		Not Cov	Yes	Not Cov	No		Yes	Yes
27125	HEMIARTHROPLASTY HIP PARTIAL		Not Cov	Yes	Not Cov	No		Yes	Yes
27130	ARTHRP ACETBLR PROX FEM PROSTC AGRFT ALGRFT		Yes	Yes	Not Cov	No		Yes	Yes
27132	CONV PREV HIP TOT HIP ARTHRP W WO AGRFT ALGRFT		Not Cov	Yes	Not Cov	No		Yes	Yes
27134	REVJ TOT HIP ARTHRP BTH W WO AGRFT ALGRFT		Not Cov	Yes	Not Cov	No		Yes	Yes
27137	REVJ TOT HIP ARTHRP ACTBLR W WO AGRFT ALGRFT		Not Cov	Yes	Not Cov	No		Yes	Yes
27138	REVJ TOT HIP ARTHRP FEM ONLY W WO ALGRFT		Not Cov	Yes	Not Cov	No		Yes	Yes
27140	OSTEOTOMY AND TRANSFER GREATER TROCHANTER SPX		Not Cov	No	Not Cov	No		No	No
27146	OSTEOTOMY ILIAC ACETABULAR INNOMINATE BONE		Not Cov	No	Not Cov	No		No	No
27147	OSTEOTOMY ILIAC ACETABULAR INNOMINATE HIP RDCTJ		Not Cov	No	Not Cov	No		No	No
27151	OSTEOTOMY ILIAC ACETABULAR INNOMINATE FEM OSTEOT		Not Cov	No	Not Cov	No		No	No
27156	OSTEOT ILIAC ACTBLR INNOMINATE BONE OSTEOT RDCTJ		Not Cov	No	Not Cov	No		No	No
27158	OSTEOTOMY PELVIS BILATERAL		Not Cov	No	Not Cov	No		No	No
27161	OSTEOTOMY FEMORAL NECK SEPARATE PROCEDURE		Not Cov	No	Not Cov	No		No	No

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27165	OSTEOT INTERTRCHNTRIC SUBTRCHNTRIC W INT XTRNL		Not Cov	No	Not Cov	No		No	No
27170	B1 GRF FEM H N INTERTRCHNTRIC SUBTRCHNTRIC AREA		Not Cov	No	Not Cov	No		No	No
27175	TX SLP FEMORAL EPIPHYSIS TRCJ W O REDUCTION		Not Cov	No	Not Cov	No		No	No
27176	TX SLP FEM EPIPHYSIS SINGLE MULTIPL PINNING SITU		No	No	Not Cov	No		No	No
27177	OPTX SLP FEM EPIPHYSIS SINGLE MULT PIN BONE GRFT		Not Cov	No	Not Cov	No		No	No
27178	OPTX SLP FEM EPIPHYSIS CLSD MANJ SINGL MLTPL PIN		Not Cov	No	Not Cov	No		No	No
27179	OPTX SLP FEM EPIPHYSIS OSTPL FEM NCK HEYMAN PX		No	No	Not Cov	No		No	No
27181	OPTX SLP FEM EPIPHYSIS OSTEOT AND INT FIXJ		Not Cov	No	Not Cov	No		No	No
27185	EPIPHYSL ARRST EPIPHYSIOD STAPLING TRCHNTR FEMUR		Not Cov	No	Not Cov	No		No	No
27187	PROPH TX N P PLTWR W WO MMA FEM NCK AND PROX FEMUR		Not Cov	No	Not Cov	No		No	No
27197	CLSD TX PELVIC RING FX W O MANIPULATION		No	No	No	No		No	No
27198	CLSD TX PELVIC RING FX W MANIPULATION W ANES		No	No	No	No		No	No
27200	CLOSED TREATMENT COCCYGEAL FRACTURE		No	No	Not Cov	No		No	No
27202	OPEN TREATMENT COCCYGEAL FRACTURE		No	No	No	No		No	No
27215	OPTX ILIAC TUBRST AVLS WING FX FIXJ IF PRFRMD		Not Cov	No	Not Cov	No		Not Cov	No
27216	PERQ SKELETAL FIXATION PST PELVIC BONE FX AND DIS		No	No	Not Cov	No		Not Cov	No
27217	OPTX ANT PELVIC BONE FX AND DISLC INT FIXJ IF PFR		Not Cov	No	Not Cov	No		Not Cov	No
27218	OPTX POST PEL BONE FX AND DISLC INT FIXJ IF PFRMD		Not Cov	No	Not Cov	No		Not Cov	No
27220	CLTX ACETABULUM HIP SOCKT FX W O MANJ		No	No	No	No		No	No
27222	CLTX ACETABULM HIP SOCKT FX MANJ W WO SKEL TRACJ		Not Cov	No	Not Cov	No		No	No
27226	OPTX PST ANT ACTBLR WALL FX W INT FIXJ		Not Cov	No	Not Cov	No		No	No
27227	OPTX ACTBLR FX INVG ANT PST 1 COLUMN FX W INT		Not Cov	No	Not Cov	No		No	No
27228	OPTX ACTBLR FX INVG ANT AND POST 2 COLUMNS FX W INT		Not Cov	No	Not Cov	No		No	No
27230	CLTX FEM FX PROX END NCK W O MANJ		No	No	No	No		No	No
27232	CLTX FEM FX PROX END NCK W MANJ W WO SKEL TRACJ		Not Cov	No	Not Cov	No		No	No
27235	PRQ SKEL FIXJ FEMORAL FX PROX END NECK		No	No	Not Cov	No		No	No
27236	OPTX FEM FX PROX END NCK INT FIXJ PROSTC RPLCMT		Not Cov	No	Not Cov	No		No	No
27238	CLTX INTER PERI SUBTROCHANTERIC FEM FX W O MANJ		No	No	No	No		No	No
27240	CLTX INTR PERI SBTRCHNTC FEMORAL FX W MANJ		Not Cov	No	Not Cov	No		No	No
27244	TX INTER PR SUBTRCHNTRIC FEMORAL FX SCREW IMPLT		Not Cov	No	Not Cov	No		No	No
27245	TX INTER PR SUBTRCHNTRIC FEM FX IMED IMPLTSCREW		Not Cov	No	Not Cov	No		No	No
27246	CLTX GREATER TROCHANTERIC FX W O MANJ		No	No	No	No		No	No
27248	OPEN TREATMENT GREATER TROCHANTERIC FRACTURE		Not Cov	No	Not Cov	No		No	No
27250	CLTX HIP DISLOCATION TRAUMATIC W O ANESTHESIA		No	No	No	No		No	No

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			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
27252	CLTX HIP DISLOCATION TRAUMATIC REQ ANESTHESIA		No	No	No	No		No	No
27253	OPTX HIP DISLOCATION TRAUMATIC W O INTERNAL FIXJ		Not Cov	No	Not Cov	No		No	No
27254	OPTX HIP DISLC TRAUMTC W ACTBLR WALL AND FEM HEAD		Not Cov	No	Not Cov	No		No	No
27256	TX SPONTAN HIP DISLC ABDCT SPLNT TRCJ W O ANES		No	No	No	No		No	No
27257	TX SPON HIP DISLC ABDCT SPLNT TRCJ W MANJ ANES		No	No	No	No		No	No
27258	OPTX SPON HIP DISLC RPLCMT FEM HEAD ACTBLM		Not Cov	No	Not Cov	No		No	No
27259	OPTX SPON HIP DISLC RPLCMT FEM HEAD ACTBLM SHRT		Not Cov	No	Not Cov	No		No	No
27265	CLTX POST HIP ARTHRP DISLC W O ANES		No	No	No	No		No	No
27266	CLTX POST HIP ARTHRP DISLC REQ ANES		No	No	No	No		No	No
27267	CLOSED TX FEMORAL FRACTURE PROX HEAD W O MANJ		No	No	No	No		No	No
27268	CLOSED TX FEMORAL FRACTURE PROX HEAD W MANJ		No	No	Not Cov	No		No	No
27269	OPEN TX FEMORAL FRACTURE PROXIMAL END HEAD		No	No	Not Cov	No		No	No
27275	MANIPULATION HIP JOINT GENERAL ANESTHESIA		No	No	No	No		No	No
27279	ARTHRODESIS SACROILIAC JOINT PERCUTANEOUS		Yes	Yes	Not Cov	Yes		Yes	Yes
27280	ARTHRODESIS SACROILIAC JOINT W OBTAINING GRAFT		Not Cov	No	Not Cov	No		No	No
27282	ARTHRODESIS SYMPHYSIS PUBIS W OBTAINING GRAFT		Not Cov	No	Not Cov	No		No	No
27284	ARTHRODESIS HIP JOINT W OBTAINING GRAFT		Not Cov	No	Not Cov	No		No	No
27286	ARTHRD HIP JT W OBTG GRF W SUBTRCNTRIC OSTEOT		Not Cov	No	Not Cov	No		No	No
27290	INTERPELVABDOMINAL AMPUTATION		Not Cov	No	Not Cov	No		No	No
27295	DISARTICULATION HIP		Not Cov	No	Not Cov	No		No	No
27299	UNLISTED PROCEDURE PELVIS HIP JOINT		Not Cov	Yes	Not Cov	Yes		Yes	Yes
27301	I AND D DEEP ABSC BURSA HEMATOMA THIGH KNEE REGION		No	No	No	No		No	No
27303	INC DEEP W OPNG BONE CORTEX FEMUR KNEE		No	No	Not Cov	No		No	No
27305	FASCIOTOMY ILIOTIBIAL OPEN		No	No	No	No		No	No
27306	TENOTOMY PRQ ADDUCTOR HAMSTRING 1 TENDON SPX		No	No	No	No		No	No
27307	TENOTOMY PRQ ADDUCTOR HAMSTRING MULTIPLE TENDON		No	No	No	No		No	No
27310	ARTHRT KNE W EXPL DRG RMVL FB		No	No	No	No		No	No
27323	BIOPSY SOFT TISSUE THIGH KNEE AREA SUPERFICIAL		No	No	No	No		No	No
27324	BIOPSY SOFT TISSUE THIGH KNEE AREA DEEP		No	No	No	No		No	No
27325	NEURECTOMY HAMSTRING MUSCLE		No	No	No	No		No	No
27326	NEURECTOMY POPLITEAL		No	No	No	No		No	No
27327	EXCISION TUMOR SOFT TISSUE THIGH KNEE SUBQ UNDER 3CM		No	No	No	No		No	No
27328	EXC TUMOR SOFT TISSUE THIGH KNEE SUBFASC UNDER 5CM		No	No	No	No		No	No
27329	RAD RESECT TUMOR SOFT TISSUE THIGH KNEE UNDER 5CM		No	No	No	No		No	No

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			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
27330	ARTHROTOMY KNEE W SYNOVIAL BIOPSY ONLY		No	No	No	No	No	No	
27331	ARTHRT KNE W JT EXPL BX RMVL LOOSE FB		No	No	No	No	No	No	
27332	ARTHRT W EXC SEMILUNAR CRTLG KNEE MEDIAL LAT		No	No	No	No	No	No	
27333	ARTHRT W EXC SEMILUNAR CRTLG KNEE MEDIAL AND LAT		No	No	No	No	No	No	
27334	ARTHROTOMY W SYNOVECTOMY KNEE ANTERIOR POSTERIOR		No	No	No	No	No	No	
27335	ARTHRT W SYNVT KNE ANT AND POST W POP AREA		No	No	No	No	No	No	
27337	EXCISION TUMOR SOFT TISSUE THIGH KNEE SUBQ 3 CM OR GRT		No	No	No	No	No	No	
27339	EXC TUMOR SOFT TISSUE THIGH KNEE SUBFASC 5 CM OR GRT		No	No	No	No	No	No	
27340	EXCISION PREPATELLAR BURSA		No	No	No	No	No	No	
27345	EXCISION SYNOVIAL CYST POPLITEAL SPACE		No	No	No	No	No	No	
27347	EXCISION LESION MENISCUS CAPSULE KNEE		No	No	No	No	No	No	
27350	PATELLECTOMY HEMIPATELLECTOMY		No	No	No	No	No	No	
27355	EXCISION CURETTAGE CYST TUMOR FEMUR		No	No	No	No	No	No	
27356	EXCISION CURETTAGE CYST TUMOR FEMUR W ALLOGRAFT		No	No	No	No	No	No	
27357	EXCISION CURETTAGE CYST TUMOR FEMUR W AUTOGRAFT		No	No	No	No	No	No	
27358	EXCISION CURETTAGE CYST TUMOR FEMUR INT FIXATION		No	No	No	No	No	No	
27360	PRTL EXC BONE FEMUR PROX TIBIA AND FIBULA		No	No	No	No	No	No	
27364	RAD RESECTION TUMOR SOFT TIS THIGH KNEE 5 CM OR GRT		No	No	No	No	No	No	
27365	RADICAL RESECTION TUMOR FEMOR OR KNEE		Not Cov	No	Not Cov	No	No	No	
27369	NJX PX CNTRST KNE ARTHG CNTRST ENHNCD CT MRI KNE		No	No	Not Cov	No	No	No	
27372	REMOVAL FOREIGN BODY DEEP THIGH KNEE		No	No	No	No	No	No	
27380	SUTURE INFRAPATELLAR TENDON PRIMARY		No	No	No	No	No	No	
27381	SUTR INFRAPATELLAR TDN 2 RCNSTJ W FSCAL TDN GRF		No	No	No	No	No	No	
27385	SUTURE QUADRICEPS HAMSTRING RUPTURE PRIMARY		No	No	No	No	No	No	
27386	SUTR QUADRICEPS HAMSTRING MUSC RPT RCNSTJ		No	No	No	No	No	No	
27390	TENOTOMY OPEN HAMSTRING KNEE HIP SINGLE TENDON		No	No	No	No	No	No	
27391	TENOTOMY OPN HAMSTRING KNEE HIP MULTIPLE 1 LEG		No	No	No	No	No	No	
27392	TENOTOMY OPEN HAMSTRING KNEE HIP MULTIPLE BI		No	No	No	No	No	No	
27393	LENGTHENING HAMSTRING TENDON SINGLE		No	No	No	No	No	No	
27394	LENGTHENING HAMSTRING TENDON MULTIPLE 1 LEG		No	No	No	No	No	No	
27395	LENGTHENING HAMSTRING TENDON MULTIPLE BILATERAL		No	No	No	No	No	No	
27396	TRANSPLANT TRANSFER THIGH XTNSR TO FLXR 1 TENDON		No	No	No	No	No	No	

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
27397	TRANSPLANT TRANSFER THIGH XTNSR TO FLXR MULT TDN		No	No	No	No		No	No
27400	TRANSFER TENDON MUSCLE HAMSTRINGS FEMUR		No	No	No	No		No	No
27403	ARTHROTOMY W MENISCUS REPAIR KNEE		No	No	No	No		No	No
27405	RPR PRIMARY TORN LIGM AND CAPSULE KNEE COLLATERAL		No	No	No	No		No	No
27407	REPAIR PRIMARY TORN LIGM AND CAPSULE KNEE CRUCIAT		No	No	No	No		No	No
27409	RPR 1 TORN LIGM AND CAPSL KNE COLTRL AND CRUCIATE		No	No	No	No		No	No
27412	AUTOLOGOUS CHONDROCYTE IMPLANTATION KNEE		Not Cov	Not Cov	Not Cov	Not Cov		No	No
27415	OSTEOCHONDRAL ALLOGRAFT KNEE OPEN		No	No	No	No		No	No
27416	OSTEOCHONDRAL AUTOGRAFT KNEE OPEN MOSAICPLASTY		No	No	No	No		No	No
27418	ANTERIOR TIBIAL TUBERCLEPLASTY		No	No	No	No		No	No
27420	RCNSTJ DISLOCATING PATELLA		No	No	No	No		No	No
27422	RCNSTJ DISC PATELLA W XTNSR RELIGNMT AND MUSC RL		No	No	No	No		No	No
27424	RCNSTJ DISC PATELLA W PATELLECTOMY		No	No	No	No		No	No
27425	LATERAL RETINACULAR RELEASE OPEN		No	No	No	No		No	No
27427	LIGAMENOUS RECONSTRUCTION KNEE EXTRA-ARTICULAR		No	No	No	No		No	No
27428	LIGAMENOUS RECONSTRUCTION KNEE INTRA-ARTICULAR		No	No	No	No		No	No
27429	LIGMOUS RCNSTJ AGMNTJ KNE INTRA-ARTICULAR XTR		No	No	No	No		No	No
27430	QUADRICEPSPLASTY		No	No	No	No		No	No
27435	CAPSULOTOMY POSTERIOR CAPSULAR RELEASE KNEE		No	No	No	No		No	No
27437	ARTHROPLASTY PATELLA W O PROSTHESIS		No	No	No	No		No	No
27438	ARTHROPLASTY PATELLA W PROSTHESIS		Yes	Yes	Yes	No		Yes	Yes
27440	ARTHROPLASTY KNEE TIBIAL PLATEAU		Yes	Yes	Yes	No		Yes	Yes
27441	ARTHRP KNEE TIBIAL PLATEAU DBRDMT AND PRTL SYNVCCT		Yes	Yes	Yes	No		Yes	Yes
27442	ARTHROPLASTY FEM CONDYLES TIBIAL PLATEAU KNEE		Yes	Yes	Yes	No		Yes	Yes
27443	ARTHRP FEM CONDYLES TIBL PLATU KNE DBRDMT AND PRTL		Yes	Yes	Yes	No		Yes	Yes
27445	ARTHROPLASTY KNEE HINGE PROSTHESIS		Not Cov	Yes	Not Cov	No		Yes	Yes
27446	ARTHRP KNEE CONDYLE AND PLATEAU MEDIAL LAT CMPRT		Yes	Yes	Yes	No		Yes	Yes
27447	ARTHRP KNE CONDYLE AND PLATU MEDIAL AND LAT COMPARTMENTS		Yes	Yes	Not Cov	No		Yes	Yes
27448	OSTEOTOMY FEMUR SHAFT SUPRACONDYLAR W O FIXATION		Not Cov	No	Not Cov	No		No	No
27450	OSTEOTOMY FEMUR SHAFT SUPRACONDYLAR W FIXATION		Not Cov	No	Not Cov	No		No	No
27454	OSTEOT MLT W RELIGNMT IMED ROD FEM SHFT		Not Cov	No	Not Cov	No		No	No
27455	OSTEOT PROX TIBIA FIB EXC OSTEOT BEFORE EPIPHYSL		No	No	Not Cov	No		No	No
27457	OSTEOT PROX TIBIA FIB EXC OSTEOT AFTER EPIPHYSL		No	No	Not Cov	No		No	No

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DOS Effective 10/1/19; Posted 10/30/19

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Code	Code Description	Comments	Apple Health & IMC Medical				IMC / BHSO (Mental Health covered svcs)	Medicare	Market Place
			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
27465	OSTEOPLASTY FEMUR SHORTENING EXCLUDING 64876		Not Cov	No	Not Cov	No		No	No
27466	OSTEOPLASTY FEMUR LENGTHENING		Not Cov	No	Not Cov	No		No	No
27468	OSTPL FEMUR CMBN LNGTH AND SHRT W FEMORAL SGM TRNSFR		Not Cov	No	Not Cov	No		No	No
27470	RPR NON MAL FEMUR DSTL H N W O GRF		Not Cov	No	Not Cov	No		No	No
27472	RPR NON MAL FEMUR DSTL H N W ILIAC AUTOG BONE		Not Cov	No	Not Cov	No		No	No
27475	ARREST EPIPHYSEAL DISTAL FEMUR		No	No	No	No		No	No
27477	ARREST EPIPHYSEAL TIBIA AND FIBULA PROXIMAL		No	No	Not Cov	No		No	No
27479	ARRST EPIPHYSL CMBN DSTL FEMUR PROX TIBFIB		No	No	No	No		No	No
27485	ARRST HEMIEPIPHYSL DSTL FEMUR PROX TIBIA FIBULA		Not Cov	No	Not Cov	No		No	No
27486	REVJ TOTAL KNEE ARTHRP W WO ALGRFT 1 COMPONENT		Not Cov	Yes	Not Cov	No		Yes	Yes
27487	REVJ TOT KNEE ARTHRP FEM AND ENTIRE TIBIAL COMPONE		Not Cov	Yes	Not Cov	No		Yes	Yes
27488	RMVL PROSTH TOT KNEE PROSTH MMA W WO INSJ SPACER		Not Cov	No	Not Cov	No		No	No
27495	PROPH TX N P PLTWR W WO METHYLMETHACRYLATE FEMUR		Not Cov	No	Not Cov	No		No	No
27496	DECOMPRESSION FASCIOTOMY THIGH AND KNEE 1 COMPONENT		No	No	No	No		No	No
27497	DCMPRN FASCT THIGH AND KNEE DBRDMT MUSCLE AND NERVE		No	No	No	No		No	No
27498	DCMPRN FASCIOTOMY THIGH AND KNEE MLT COMPARTMENTS		No	No	No	No		No	No
27499	DCMPRN FASCT THIGH AND KNEE MLT DBRDMT NV MUSC AND NRVE		No	No	No	No		No	No
27500	CLOSED TX FEMORAL SHAFT FX W O MANIPULATION		No	No	No	No		No	No
27501	CLTX SPRCNDYLR TRNSCNDYLR FEM FX W O MANJ		No	No	No	No		No	No
27502	CLTX FEM SHFT FX W MANJ W WO SKIN SKELETAL TRACJ		No	No	No	No		No	No
27503	CLTX SPRCNDYLR TRNSCNDYLR FEM FX W MANJ		No	No	No	No		No	No
27506	OPTX FEM SHFT FX W INSJ IMED IMPLT W WO SCREW		Not Cov	No	Not Cov	No		No	No
27507	OPTX FEM SHFT FX W PLATE SCREWS W WO CERCLAGE		Not Cov	No	Not Cov	No		No	No
27508	CLTX FEM FX DSTL END MEDIAL LAT CONDYLE W O MANJ		No	No	No	No		No	No
27509	PRQ SKELETAL FIXJ FEMORAL FX DISTAL END		No	No	No	No		No	No
27510	CLTX FEM FX DSTL END MEDIAL LAT CONDYLE W MANJ		No	No	No	No		No	No
27511	OPEN TX FEMORAL SUPRACONDYLAR FRACTURE W O XTN		Not Cov	No	Not Cov	No		No	No
27513	OPEN TX FEMORAL SUPRACONDYLAR FRACTURE W XTN		Not Cov	No	Not Cov	No		No	No
27514	OPEN TX FEMORAL FRACTURE DISTAL MED LAT CONDYLE		Not Cov	No	Not Cov	No		No	No
27516	CLTX DISTAL FEMORAL EPIPHYSL SEPARATION W O MANJ		No	No	No	No		No	No
27517	CLTX DSTL FEM EPIPHYSL SEP W MANJ W WO SKIN SKEL		No	No	No	No		No	No
27519	OPEN TX DISTAL FEMORAL EPIPHYSEAL SEPARATION		Not Cov	No	Not Cov	No		No	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
27520	CLOSED TX PATELLAR FRACTURE W O MANIPULATION		No	No	No	No		No	No
27524	OPTX PATLLR FX W INT FIXJ PATLLC AND SOFT TISS RPR		No	No	Not Cov	No		No	No
27530	CLTX TIBIAL FX PROXIMAL W O MANIPULATION		No	No	No	No		No	No
27532	CLTX TIBIAL FX PROXIMAL W WO MANJ W SKEL TRACJ		No	No	No	No		No	No
27535	OPEN TX TIBIAL FRACTURE PROXIMAL UNICONDYLAR		No	No	Not Cov	No		No	No
27536	OPTX TIBIAL FX PROX BICONDYLAR W WO INT FIXJ		No	No	Not Cov	No		No	No
27538	CLTX INTERCONDYLAR SPI AND TUBRST FX KNE W WO MAN		No	No	No	No		No	No
27540	OPEN TX INTERCONDYLAR SPINE TUBRST FRACTURE KNEE		No	No	Not Cov	No		No	No
27550	CLOSED TX KNEE DISLOCATION W O ANESTHESIA		No	No	No	No		No	No
27552	CLOSED TX KNEE DISLOCATION W ANESTHESIA		No	No	No	No		No	No
27556	OPEN TX KNEE DISLOCATION W O LIGAMENOUS REPAIR		Not Cov	No	Not Cov	No		No	No
27557	OPEN TX KNEE DISLOCATION W LIGAMENOUS REPAIR		Not Cov	No	Not Cov	No		No	No
27558	OPEN TX KNEE DISLOCATION W REPAIR RECONSTRUCTION		Not Cov	No	Not Cov	No		No	No
27560	CLOSED TX PATELLAR DISLOCATION W O ANESTHESIA		No	No	No	No		No	No
27562	CLOSED TX PATELLAR DISLOCATION W ANESTHESIA		No	No	No	No		No	No
27566	OPTX PATELLAR DISLC W WO PRTL TOT PATELLECTOMY		No	No	No	No		No	No
27570	MANIPULATION KNEE JOINT UNDER GENERAL ANESTHESIA		No	No	No	No		No	No
27580	ARTHRODESIS KNEE ANY TECHNIQUE		Not Cov	No	Not Cov	No		No	No
27590	AMPUTATION THIGH THROUGH FEMUR ANY LEVEL		Not Cov	No	Not Cov	No		No	No
27591	AMP THI THRU FEMUR LVL IMMT FITG TQ W 1ST CST		Not Cov	No	Not Cov	No		No	No
27592	AMPUTATION THIGH THRU FEMUR OPEN CIRCULAR		Not Cov	No	Not Cov	No		No	No
27594	AMP THIGH THRU FEMUR SEC CLOSURE SCAR REVISION		No	No	No	No		No	No
27596	AMPUTATION THIGH THROUGH FEMUR RE-AMPUTATION		Not Cov	No	Not Cov	No		No	No
27598	DISARTICULATION KNEE		Not Cov	No	Not Cov	No		No	No
27599	UNLISTED PROCEDURE FEMUR KNEE		Yes	Yes	Not Cov	Yes		Yes	Yes
27600	DCMPRN FASCT LEG ANT AND LAT COMPARTMENTS ONLY		No	No	No	No		No	No
27601	DCMPRN FASCT LEG POST COMPARTMENT ONLY		No	No	No	No		No	No
27602	DCMPRN FASCT LEG ANT AND LAT AND PST CMPRT		No	No	No	No		No	No
27603	INCISION AND DRAINAGE LEG ANKLE ABSCESS HEMATOMA		No	No	No	No		No	No
27604	INCISION AND DRAINAGE LEG ANKLE INFECTED BURSA		No	No	No	No		No	No
27605	TENOTOMY PRQ ACHILLES TENDON SPX LOCAL ANES		No	No	No	No		No	No
27606	TENOTOMY PRQ ACHILLES TENDON SPX GENERAL ANES		No	No	No	No		No	No
27607	INCISION LEG ANKLE		No	No	No	No		No	No
27610	ARTHROTOMY ANKLE W EXPL DRAINAGE REMOVAL FB		No	No	No	No		No	No
27612	ARTHRT PST CAPSUL RLS ANKLE W WO ACHLL TDN LNGTH		No	No	No	No		No	No
27613	BIOPSY SOFT TISSUE LEG ANKLE AREA SUPERFICIAL		No	No	Not Cov	No		No	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
27614	BIOPSY SOFT TISSUE LEG ANKLE AREA DEEP		No	No	No	No		No	No
27615	RAD RESECTION TUMOR SOFT TISSUE LEG ANKLE UNDER 5CM		No	No	No	No		No	No
27616	RAD RESECTION TUMOR SOFT TISSUE LEG ANKLE 5 CM OR GRT		No	No	No	No		No	No
27618	EXC TUMOR SOFT TISSUE LEG ANKLE SUBQ UNDER 3CM		No	No	No	No		No	No
27619	EXC TUMOR SOFT TISSUE LEG ANKLE SUBFASCIAL UNDER 5CM		No	No	No	No		No	No
27620	ARTHRT ANKLE W EXPL W WO BX W WO RMVL LOOSE FB		No	No	No	No		No	No
27625	ARTHROTOMY W SYNOVECTOMY ANKLE		No	No	No	No		No	No
27626	ARTHROTOMY W SYNOVECTOMY ANKLE TENOSYNOVECTOMY		No	No	No	No		No	No
27630	EXCISION LESION TENDON SHEATH CAPSULE LEG AND ANK		No	No	No	No		No	No
27632	EXCISION TUMOR SOFT TISSUE LEG ANKLE SUBQ 3 CM OR GRT		No	No	No	No		No	No
27634	EXC TUMOR SOFT TISSUE LEG ANKLE SUBFASC 5 CM OR GRT		No	No	No	No		No	No
27635	EXCISION CURETTAGE BONE CYST TUMOR TIBIA FIBULA		No	No	No	No		No	No
27637	EXC CURETTAGE CYST TUMOR TIBIA FIBULA W AGRAFT		No	No	No	No		No	No
27638	EXC CURETTAGE CYST TUMOR TIBIA FIBULA W ALGRAFT		No	No	No	No		No	No
27640	PARTIAL EXCISION BONE TIBIA		No	No	No	No		No	No
27641	PARTIAL EXCISION BONE FIBULA		No	No	No	No		No	No
27645	RADICAL RESECTION OF TUMOR TIBIA		Not Cov	No	Not Cov	No		No	No
27646	RADICAL RESECTION TUMOR BONE FIBULA		Not Cov	No	Not Cov	No		No	No
27647	RADICAL RESECTION OF TUMOR TALUS OR CALCANEUS		No	No	No	No		No	No
27648	INJECTION ANKLE ARTHROGRAPHY		No	No	Not Cov	No		No	No
27650	REPAIR PRIMARY OPEN PRQ RUPTURED ACHILLES TENDON		No	No	No	No		No	No
27652	RPR PRIMARY OPEN PRQ RUPTURED ACHILLES W GRAFT		No	No	No	No		No	No
27654	REPAIR SECONDARY ACHILLES TENDON W WO GRAFT		No	No	No	No		No	No
27656	REPAIR FASCIAL DEFECT LEG		No	No	No	No		No	No
27658	REPAIR FLEXOR TENDON LEG PRIMARY W O GRAFT EACH		No	No	No	No		No	No
27659	RPR FLEXOR TENDON LEG SECONDARY W O GRAFT EACH		No	No	No	No		No	No
27664	RPR EXTENSOR TENDON LEG PRIMARY W O GRAFT EACH		No	No	No	No		No	No
27665	RPR EXTENSOR TENDON LEG SECONDRY W WO GRAFT EACH		No	No	No	No		No	No
27675	RPR DISLOC PERONEAL TENDON W O FIBULAR OSTEOTOMY		No	No	No	No		No	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
27676	REPAIR DISLOCATING PERONEAL TENDON W FIB OSTEOT		No	No	No	No		No	No
27680	TENOLYSIS FLXR XTNSR TENDON LEG AND ANKLE 1 EACH		No	No	No	No		No	No
27681	TNOLS FLXR XTNSR TDN LEG AND ANKLE MLT TDN		No	No	No	No		No	No
27685	LNGTH SHRT TENDON LEG ANKLE 1 TENDON SPX		No	No	No	No		No	No
27686	LNGTH SHRT TDN LEG ANKLE MLT TDN SAME INC EA		No	No	No	No		No	No
27687	GASTROCNEMIUS RECESSION		No	No	No	No		No	No
27690	TR TRNSPL 1 TDN W MUSC REDIRION REROUTING SUPFC		No	No	No	No		No	No
27691	TR TRNSPL 1 TDN W MUSC REDIRION REROUTING DP		No	No	No	No		No	No
27692	TR TRNSPL 1 TDN W MUSC REDIRION REROUTING EA TDN		No	No	No	No		No	No
27695	RPR PRIMARY DISRUPTED LIGAMENT ANKLE COLLATERAL		No	No	No	No		No	No
27696	RPR PRIM DISRUPTED LIGM ANKLE BTH COLTRL LIGMS		No	No	No	No		No	No
27698	REPAIR SECONDARY DISRUPTED LIGAMENT ANKLE COLTRL		No	No	No	No		No	No
27700	ARTHROPLASTY ANKLE		No	No	No	No		No	No
27702	ARTHROPLASTY ANKLE W IMPLANT		Not Cov	No	Not Cov	No		No	No
27703	ARTHROPLASTY ANKLE REVISION TOTAL ANKLE		Not Cov	No	Not Cov	No		No	No
27704	REMOVAL ANKLE IMPLANT		No	No	No	No		No	No
27705	OSTEOTOMY TIBIA		No	No	No	No		No	No
27707	OSTEOTOMY FIBULA		No	No	No	No		No	No
27709	OSTEOTOMY TIBIA AND FIBULA		No	No	No	No		No	No
27712	OSTEOT MLT W RELIGNMT IMED ROD		Not Cov	No	Not Cov	No		No	No
27715	OSTEOPLASTY TIBIA AND FIBULA LENGTHENING SHORTENIN		No	No	Not Cov	No		No	No
27720	REPAIR NONUNION MALUNION TIBIA W O GRAFT		No	No	No	No		No	No
27722	REPAIR NONUNION MALUNION TIBIA W SLIDING GRAFT		No	No	Not Cov	No		No	No
27724	RPR NON MAL TIBIA W ILIAC OTH AGRFT		No	No	Not Cov	No		No	No
27725	RPR NON MAL TIBIA SYNOSTOSIS W FIBULA ANY METH		Not Cov	No	Not Cov	No		No	No
27726	REPAIR FIBULA NONUNION MALUNION W INT FIXATION		No	No	No	No		No	No
27727	REPAIR CONGENITAL PSEUDARTHROSIS TIBIA		Not Cov	No	Not Cov	No		No	No
27730	ARREST EPIPHYSEAL OPEN DISTAL TIBIA		No	No	No	No		No	No
27732	ARREST EPIPHYSEAL OPEN DISTAL FIBULA		No	No	No	No		No	No
27734	ARREST EPIPHYSEAL OPEN DISTAL TIBIA AND FIBULA		No	No	No	No		No	No
27740	ARREST EPIPHYSEAL ANY METHOD TIBIA AND FIBULA		No	No	No	No		No	No
27742	ARRST EPIPHYSL ANY METH TIBFIB AND DSTL FEMUR		No	No	No	No		No	No
27745	PROPH TX N P PLTWR W WO METHYLMETHACRYLATE TIBIA		No	No	No	No		No	No
27750	CLTX TIBIAL SHAFT FX W O MANIPULATION		No	No	No	No		No	No
27752	CLTX TIBIAL SHAFT FX W MANJ W WO SKEL TRACJ		No	No	No	No		No	No
27756	PRQ SKELETAL FIXATION TIBIAL SHAFT FRACTURE		No	No	No	No		No	No

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This prior authorization guide applies to Medicaid, Medicare, and Marketplace.

DOS Effective 10/1/19; Posted 10/30/19

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Code	Code Description	Comments	Apple Health & IMC Medical				IMC / BHSO (Mental Health covered svcs)	Medicare	Market Place
			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
27758	OPTX TIBIAL SHFT FX W PLATE SCREWS W WO CERCLAGE		No	No	No	No		No	No
27759	TX TIBL SHFT FX IMED IMPLT W WO SCREWS AND CERCLA		No	No	No	No		No	No
27760	CLTX MEDIAL MALLEOLUS FX W O MANIPULATION		No	No	No	No		No	No
27762	CLTX MEDIAL MALLS FX W MANJ W WO SKN SKEL TRACJ		No	No	No	No		No	No
27766	OPEN TREATMENT MEDIAL MALLEOLUS FRACTURE		No	No	No	No		No	No
27767	CLOSED TREATMENT PST MALLEOLUS FRACTURE W O MANJ		No	No	No	No		No	No
27768	CLOSED TREATMENT PST MALLEOLUS FRACTURE W MANJ		No	No	No	No		No	No
27769	OPEN TREATMENT POSTERIOR MALLEOLUS FRACTURE		No	No	No	No		No	No
27780	CLTX PROX FIBULA SHFT FX W O MANJ		No	No	No	No		No	No
27781	CLTX PROX FIBULA SHFT FX W MANJ		No	No	No	No		No	No
27784	OPEN TREATMENT PROXIMAL FIBULA SHAFT FRACTURE		No	No	No	No		No	No
27786	CLTX DSTL FIBULAR FX LAT MALLS W O MANJ		No	No	No	No		No	No
27788	CLTX DSTL FIBULAR FX LAT MALLS W MANJ		No	No	No	No		No	No
27792	OPEN TX DISTAL FIBULAR FRACTURE LAT MALLEOLUS		No	No	No	No		No	No
27808	CLOSED TX BIMALLEOLAR ANKLE FRACTURE W O MANJ		No	No	No	No		No	No
27810	CLOSED TX BIMALLEOLAR ANKLE FRACTURE W MANJ		No	No	No	No		No	No
27814	OPEN TREATMENT BIMALLEOLAR ANKLE FRACTURE		No	No	No	No		No	No
27816	CLTX TRIMALLEOLAR ANKLE FX W O MANIPULATION		No	No	No	No		No	No
27818	CLTX TRIMALLEOLAR ANKLE FX W MANIPULATION		No	No	No	No		No	No
27822	OPEN TX TRIMALLEOLAR ANKLE FX W O FIXJ PST LIP		No	No	No	No		No	No
27823	OPEN TX TRIMALLEOLAR ANKLE FX W FIXJ PST LIP		No	No	No	No		No	No
27824	CLTX FX W8 BRG ARTCLR PRTN DSTL TIBIA W O MANJ		No	No	No	No		No	No
27825	CLTX FX W8 BRG ARTCLR PRTN DSTL TIB W SKEL TRACJ		No	No	No	No		No	No
27826	OPEN TREATMENT FRACTURE DISTAL TIBIA FIBULA		No	No	No	No		No	No
27827	OPEN TREATMENT FRACTURE DISTAL TIBIA ONLY		No	No	No	No		No	No
27828	OPEN TREATMENT FRACTURE DISTAL TIBIA AND FIBULA		No	No	No	No		No	No
27829	OPEN TX DISTAL TIBIOFIBULAR JOINT DISRUPTION		No	No	No	No		No	No
27830	CLTX PROX TIBFIB JT DISLC W O ANES		No	No	No	No		No	No
27831	CLTX PROX TIBFIB JT DISLC REQ ANES		No	No	No	No		No	No
27832	OPEN TX PROX TIBFIB JOINT DISLOCATE EXC PROX FIB		No	No	No	No		No	No
27840	CLOSED TX ANKLE DISLOCATION W O ANESTHESIA		No	No	No	No		No	No
27842	CLTX ANKLE DISLC REQ ANES W WO PRQ SKEL FIXJ		No	No	No	No		No	No
27846	OPTX ANKLE DISLOCATION W O REPAIR INTERNAL FIXJ		No	No	No	No		No	No
27848	OPTX ANKLE DISLOCATION W REPAIR INT XTRNL FIXJ		No	No	No	No		No	No
27860	MANIPULATION ANKLE UNDER GENERAL ANESTHESIA		No	No	No	No		No	No
27870	ARTHRODESIS ANKLE OPEN		No	No	No	No		No	No
27871	ARTHRODESIS TIBIOFIBULAR JOINT PROXIMAL DISTAL		No	No	No	No		No	No
27880	AMPUTATION LEG THROUGH TIBIA AND FIBULA		Not Cov	No	Not Cov	No		No	No
27881	AMP LEG THRU TIBFIB W IMMT FITG TQ W 1ST CST		Not Cov	No	Not Cov	No		No	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
27882	AMPUTATION LEG THRU TIBIA AND FIBULA OPEN CIRCULAR		Not Cov	No	Not Cov	No		No	No
27884	AMP LEG THRU TIBIA AND FIBULA SEC CLOSURE SCAR REV		No	No	No	No		No	No
27886	AMP LEG THRU TIBIA AND FIBULA RE-AMPUTATION		No	No	Not Cov	No		No	No
27888	AMP ANKLE-MALLI TIBFIB W PLSTC CLSR AND RESCJ NRV		Not Cov	No	Not Cov	No		No	No
27889	ANKLE DISARTICULATION		No	No	No	No		No	No
27892	DCMPRN FASCT LEG ANT AND LAT W DBRDMT MUSC AND NERVE		No	No	No	No		No	No
27893	DCMPRN FASCT LEG PST W DBRDMT MUSC AND NRV		No	No	No	No		No	No
27894	DCMPRN FASCT LEG ANT AND LAT AND PST W DBRDMT MUS		No	No	No	No		No	No
27899	UNLISTED PROCEDURE LEG ANKLE		Yes	Yes	Not Cov	Yes		Yes	Yes
28001	INCISION AND DRAINAGE BURSA FOOT		No	No	Not Cov	No		No	No
28002	I AND D BELOW FASCIA FOOT 1 BURSAL SPACE		No	No	No	No		No	No
28003	I AND D BELOW FASCIA FOOT MULTIPLE AREAS		No	No	No	No		No	No
28005	INCISION BONE CORTEX FOOT	>20yrs (coverage based on approved HCA ICD list)	Yes	Yes	Yes	No		Yes	Yes
28008	FASCIOTOMY FOOT AND TOE	>20yrs (coverage based on approved HCA ICD list)	Yes	Yes	Yes	No		Yes	Yes
28010	TENOTOMY PERCUTANEOUS TOE SINGLE TENDON	>20yrs (coverage based on approved HCA ICD list)	Yes	Yes	Not Cov	No		Yes	Yes
28011	TENOTOMY PERCUTANEOUS TOE MULTIPLE TENDON	>20yrs (coverage based on approved HCA ICD list)	Yes	Yes	Yes	No		Yes	Yes
28020	ARTHRT W EXPL DRG RMVL LOOSE FB NTRTRSL TARS JT	>20yrs (coverage based on approved HCA ICD list)	No	No	No	No		No	No
28022	ARTHRT W EXPL DRG RMVL LOOSE FB MTTARPHLNGL JT	>20yrs (coverage based on approved HCA ICD list)	No	No	No	No		No	No
28024	ARTHRT W EXPL DRG RMVL LOOSE FB IPHAL JT	>20yrs (coverage based on approved HCA ICD list)	No	No	No	No		No	No
28035	RELEASE TARSAL TUNNEL	>20yrs (coverage based on approved HCA ICD list)	Yes	Yes	Yes	No		Yes	Yes
28039	EXCISION TUMOR SOFT TIS FOOT TOE SUBQ 1.5 CM OR GRT	>20yrs (coverage based on approved HCA ICD list)	No	No	No	No		No	No
28041	EXC TUMOR SOFT TISSUE FOOT TOE SUBFASC 1.5 CM OR GRT	>20yrs (coverage based on approved HCA ICD list)	No	No	No	No		No	No
28043	EXCISION TUMOR SOFT TISSUE FOOT TOE SUBQ UNDER 1.5CM	>20yrs (coverage based on approved HCA ICD list)	No	No	No	No		No	No
28045	EXC TUMOR SOFT TISSUE FOOT TOE SUBFASC UNDER 1.5CM	>20yrs (coverage based on approved HCA ICD list)	No	No	No	No		No	No
28046	RAD RESECTION TUMOR SOFT TISSUE FOOT TOE UNDER 3CM	>20yrs (coverage based on approved HCA ICD list)	No	No	No	No		No	No
28047	RAD RESECTION TUMOR SOFT TISSUE FOOT TOE 3 CM OR GRT	>20yrs (coverage based on approved HCA ICD list)	No	No	No	No		No	No
28050	ARTHRT W BX INTERTARSAL TARSOMETATARSAL JOINT	>20yrs (coverage based on approved HCA ICD list)	No	No	No	No		No	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
28052	ARTHRTOMY W BX METATARSOPHALANGEAL JOINT	>20yrs (coverage based on approved HCA ICD list)	No	No	No	No		No	No
28054	ARTHRTOMY W BX INTERPHALANGEAL JOINT	>20yrs (coverage based on approved HCA ICD list)	No	No	No	No		No	No
28055	NEURECTOMY INTRINSIC MUSCULATURE OF FOOT	>20yrs (coverage based on approved HCA ICD list)	No	No	No	No		No	No
28060	FASCIECTOMY PLANTAR FASCIA PARTIAL SPX	>20yrs (coverage based on approved HCA ICD list)	Yes	Yes	Yes	No		Yes	Yes
28062	FASCIOTOMY PLANTAR FASCIA RADICAL SPX	>20yrs (coverage based on approved HCA ICD list)	Yes	Yes	Yes	No		Yes	Yes
28070	SYNVCT INTERTARSAL TARSOMETATARSAL JT EA SPX	>20yrs (coverage based on approved HCA ICD list)	No	No	No	No		No	No
28072	SYNOVECTOMY METATARSOPHALANGEAL JOINT EACH	>20yrs (coverage based on approved HCA ICD list)	No	No	No	No		No	No
28080	EXCISION INTERDIGITAL MORTON NEUROMA SINGLE EACH	>20yrs (coverage based on approved HCA ICD list)	Yes	Yes	Yes	No		Yes	Yes
28086	SYNOVECTOMY TENDON SHEATH FOOT FLEXOR	>20yrs (coverage based on approved HCA ICD list)	No	No	No	No		No	No
28088	SYNOVECTOMY TENDON SHEATH FOOT EXTENSOR	>20yrs (coverage based on approved HCA ICD list)	No	No	No	No		No	No
28090	EXC LESION TENDON SHEATH CAPSULE W SYNVCT FOOT	>20yrs (coverage based on approved HCA ICD list)	Yes	Yes	Yes	No		Yes	Yes
28092	EXC LESION TENDON SHEATH CAPSULE W SYNVCT TOE EA	>20yrs (coverage based on approved HCA ICD list)	Yes	Yes	Yes	No		Yes	Yes
28100	EXCISION CURETTAGE CYST TUMOR TALUS CALCANEUS	>20yrs (coverage based on approved HCA ICD list)	Yes	Yes	Yes	No		Yes	Yes
28102	EXC CURTGT CST B9 TUM TALUS CLCNS W ILIAC AGRFT	>20yrs (coverage based on approved HCA ICD list)	Yes	Yes	Yes	No		Yes	Yes
28103	EXC CURETTAGE CYST TUMOR TALUS CALCANEUS ALGRFT	>20yrs (coverage based on approved HCA ICD list)	Yes	Yes	Yes	No		Yes	Yes
28104	EXC CURTGT BONE CYST B9 TUMORTARSAL METATARSAL	>20yrs (coverage based on approved HCA ICD list)	Yes	Yes	Yes	No		Yes	Yes
28106	EXC CURTGT CST B9 TUM TARSAL METAR W ILIAC AGRFT	>20yrs (coverage based on approved HCA ICD list)	Yes	Yes	Yes	No		Yes	Yes
28107	EXC CURTGT CST B9 TUM TARSAL METAR W ALGRFT	>20yrs (coverage based on approved HCA ICD list)	Yes	Yes	Yes	No		Yes	Yes
28108	EXC CURTGT CST B9 TUM PHALANGES FOOT	>20yrs (coverage based on approved HCA ICD list)	Yes	Yes	Yes	No		Yes	Yes
28110	OSTECTOMY PRTL 5TH METAR HEAD SPX	>20yrs (coverage based on approved HCA ICD list)	Yes	Yes	Yes	No		Yes	Yes
28111	OSTECTOMY COMPLETE 1ST METATARSAL HEAD	>20yrs (coverage based on approved HCA ICD list)	Yes	Yes	Yes	No		Yes	Yes
28112	OSTECTOMY COMPLETE OTHER METATARSAL HEAD 2 3 4	>20yrs (coverage based on approved HCA ICD list)	Yes	Yes	Yes	No		Yes	Yes
28113	OSTECTOMY COMPLETE 5TH METATARSAL HEAD	>20yrs (coverage based on approved HCA ICD list)	Yes	Yes	Yes	No		Yes	Yes

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28114	OSTC COMPL ALL METAR HEADS W PRTL PROX PHALANGC	>20yrs (coverage based on approved HCA ICD list)	Yes	Yes	Yes	No		Yes	Yes
28116	OSTECTOMY TARSAL COALITION	>20yrs (coverage based on approved HCA ICD list)	Yes	Yes	Yes	No		Yes	Yes
28118	OSTECTOMY CALCANEUS	>20yrs (coverage based on approved HCA ICD list)	Yes	Yes	Yes	No		Yes	Yes
28119	OSTECTOMY CALCANEUS SPUR W WO PLNTAR FASCIAL RLS	>20yrs (coverage based on approved HCA ICD list)	Yes	Yes	Yes	No		Yes	Yes
28120	PARTIAL EXCISION BONE TALUS CALCANEUS	>20yrs (coverage based on approved HCA ICD list)	Yes	Yes	Yes	No		Yes	Yes
28122	PRTL EXC B1 TARSAL METAR B1 XCP TALUS CALCANEUS	>20yrs (coverage based on approved HCA ICD list)	Yes	Yes	Yes	No		Yes	Yes
28124	PARTICAL EXCISION BONE PHALANX TOE	>20yrs (coverage based on approved HCA ICD list)	Yes	Yes	Yes	No		Yes	Yes
28126	RESECTION PARTIAL COMPLETE PHALANGEAL BASE EACH	>20yrs (coverage based on approved HCA ICD list)	Yes	Yes	Yes	No		Yes	Yes
28130	TALECTOMY ASTRAGALECTOMY	>20yrs (coverage based on approved HCA ICD list)	Yes	Yes	Yes	No		Yes	Yes
28140	METATARSECTOMY	>20yrs (coverage based on approved HCA ICD list)	Yes	Yes	Yes	No		Yes	Yes
28150	PHALANGECTOMY TOE EACH TOE	>20yrs (coverage based on approved HCA ICD list)	Yes	Yes	Yes	No		Yes	Yes
28153	RESECTION CONDYLE DISTAL END PHALANX EACH TOE	>20yrs (coverage based on approved HCA ICD list)	Yes	Yes	Yes	No		Yes	Yes
28160	HEMIPHALANGECTOMY INTERPHALANGEAL JOINT EXC TOE	>20yrs (coverage based on approved HCA ICD list)	Yes	Yes	Yes	No		Yes	Yes
28171	RAD RESCJ TUMOR TARSAL EXCEPT TALUS CALCANEUS	>20yrs (coverage based on approved HCA ICD list)	Yes	Yes	Yes	No		Yes	Yes
28173	RADICAL RESECTION TUMOR METATARSAL	>20yrs (coverage based on approved HCA ICD list)	Yes	Yes	Yes	No		Yes	Yes
28175	RADICAL RESECTION TUMOR PHALANX OR TOE	>20yrs (coverage based on approved HCA ICD list)	Yes	Yes	Yes	No		Yes	Yes
28190	REMOVAL FOREIGN BODY FOOT SUBCUTANEOUS		No	No	Not Cov	No		No	No
28192	REMOVAL FOREIGN BODY FOOT DEEP		No	No	No	No		No	No
28193	REMOVAL FOREIGN BODY FOOT COMPLICATED		No	No	No	No		No	No
28200	RPR TDN FLXR FOOT 1 2 W O FREE GRAFG EACH TENDON	>20yrs (coverage based on approved HCA ICD list)	Yes	Yes	Yes	No		Yes	Yes
28202	RPR TENDON FLXR FOOT SEC W FREE GRAFT EA TENDON	>20yrs (coverage based on approved HCA ICD list)	Yes	Yes	Yes	No		Yes	Yes
28208	REPAIR TENDON EXTENSOR FOOT 1 2 EACH TENDON	>20yrs (coverage based on approved HCA ICD list)	Yes	Yes	Yes	No		Yes	Yes
28210	RPR TENDON XTNSR FOOT SEC W FREE GRAFT EA TENDON	>20yrs (coverage based on approved HCA ICD list)	Yes	Yes	Yes	No		Yes	Yes
28220	TENOLYSIS FLEXOR FOOT SINGLE TENDON	>20yrs (coverage based on approved HCA ICD list)	Yes	Yes	Not Cov	No		Yes	Yes
28222	TENOLYSIS FLEXOR FOOT MULTIPLE TENDONS	>20yrs (coverage based on approved HCA ICD list)	Yes	Yes	Yes	No		Yes	Yes

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			Outpatient		ASC	Office Setting			
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28225	TENOLYSIS EXTENSOR FOOT SINGLE TENDON	>20yrs (coverage based on approved HCA ICD list)	Yes	Yes	Yes	No		Yes	Yes
28226	TENOLYSIS EXTENSOR FOOT MULTIPLE TENDON	>20yrs (coverage based on approved HCA ICD list)	Yes	Yes	Yes	No		Yes	Yes
28230	TX OPN TENDON FLEXOR FOOT SINGLE MULT TENDON SPX	>20yrs (coverage based on approved HCA ICD list)	Yes	Yes	Not Cov	No		Yes	Yes
28232	TX OPEN TENDON FLEXOR TOE 1 TENDON SPX	>20yrs (coverage based on approved HCA ICD list)	Yes	Yes	Not Cov	No		Yes	Yes
28234	TENOTOMY OPEN EXTENSOR FOOT TOE EACH TENDON	>20yrs (coverage based on approved HCA ICD list)	Yes	Yes	Yes	No		Yes	Yes
28238	RCNSTJ PST TIBL TDN W EXC ACCESSORY TARSL NAVCLR	>20yrs (coverage based on approved HCA ICD list)	Yes	Yes	Yes	No		Yes	Yes
28240	TENOTOMY LENGTHENING RLS ABDUCTOR HALLUCIS MUSC	>20yrs (coverage based on approved HCA ICD list)	Yes	Yes	Yes	No		Yes	Yes
28250	DIVISION PLANTAR FASCIA AND MUSCLE SPX	>20yrs (coverage based on approved HCA ICD list)	Yes	Yes	Yes	No		Yes	Yes
28260	CAPSULOTOMY MIDFOOT MEDIAL RELEASE ONLY SPX	>20yrs (coverage based on approved HCA ICD list)	Yes	Yes	Yes	No		Yes	Yes
28261	CAPSULOTOMY MIDFOOT W TENDON LENGTHENING	>20yrs (coverage based on approved HCA ICD list)	Yes	Yes	Yes	No		Yes	Yes
28262	CAPSUL MIDFOOT W PST TALOTIBL CAPSUL AND TDN LNGTH	>20yrs (coverage based on approved HCA ICD list)	Yes	Yes	Yes	No		Yes	Yes
28264	CAPSULOTOMY MIDTARSAL	>20yrs (coverage based on approved HCA ICD list)	Yes	Yes	Yes	No		Yes	Yes
28270	CAPSUL MTTARPHLNGL JT W WO TENORRHAPHY EA JT SPX	>20yrs (coverage based on approved HCA ICD list)	Yes	Yes	Yes	No		Yes	Yes
28272	CAPSULOTOMY IPHAL JOINT EACH JOINT SPX	>20yrs (coverage based on approved HCA ICD list)	Yes	Yes	Not Cov	No		Yes	Yes
28280	SYNDACTYLIZATION TOES	>20yrs (coverage based on approved HCA ICD list)	Yes	Yes	Yes	No		Yes	Yes
28285	CORRECTION HAMMERTOES	>20yrs (coverage based on approved HCA ICD list)	Yes	Yes	Yes	No		Yes	Yes
28286	CORRECTION COCK-UP 5TH TOE W PLASTIC CLOSURE	>20yrs (coverage based on approved HCA ICD list)	Yes	Yes	Yes	No		Yes	Yes
28288	OSTC PRTL EXOSTC CONDYLIC METAR HEAD	>20yrs (coverage based on approved HCA ICD list)	Yes	Yes	Yes	No		Yes	Yes
28289	HALLUX RIGIDUS W CHEILECTOMY 1ST MP JT W O IMPLT		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
28291	HALLUX RIGIDUS W CHEILECTOMY 1ST MP JT W IMPLT		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
28292	CORRJ HALLUX VALGUS W SESMDC W RESCJ PROX PHAL		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
28295	CORRJ HALLUX VALGUS W SESMDC W PROX METAR OSTEOT		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
28296	CORRJ HALLUX VALGUS W SESMDC W DIST METAR OSTEOT		Not Cov	Not Cov	Yes	Not Cov		Yes	Yes
28297	CORRJ HALLUX VALGUS W SESMDC W 1METAR MEDIAL CNF		Not Cov	Not Cov	Yes	Not Cov		Yes	Yes

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28298	CORRJ HALLUX VALGUS W SESMDC W PROX PHLNX OSTEOT		Not Cov	Not Cov	Yes	Not Cov		Yes	Yes
28299	CORRJ HALLUX VALGUS W SESMDC W 2 OSTEOT		Not Cov	Not Cov	Yes	Not Cov		Yes	Yes
28300	OSTEOTOMY CALCANEUS W WO INTERNAL FIXATION	>20yrs (coverage based on approved HCA ICD list)	Yes	Yes	Yes	No		Yes	Yes
28302	OSTEOTOMY TALUS	>20yrs (coverage based on approved HCA ICD list)	Yes	Yes	Yes	No		Yes	Yes
28304	OSTEOTOMY TARSAL BONES OTH THN CALCANEUS TALUS	>20yrs (coverage based on approved HCA ICD list)	Yes	Yes	Yes	No		Yes	Yes
28305	OSTEOT TARSAL OTH THN CALCANEUS TALUS W AGRFT	>20yrs (coverage based on approved HCA ICD list)	Yes	Yes	Yes	No		Yes	Yes
28306	OSTEOT W WO LNGTH SHRT CORRJ 1ST METAR	>20yrs (coverage based on approved HCA ICD list)	Yes	Yes	Yes	No		Yes	Yes
28307	OSTEOT W WO LNGTH SHRT CORRJ METAR XCP 1ST TOE	>20yrs (coverage based on approved HCA ICD list)	Yes	Yes	Yes	No		Yes	Yes
28308	OSTEOT W WO LNGTH SHRT CORRJ METAR XCP 1ST EA	>20yrs (coverage based on approved HCA ICD list)	Yes	Yes	Yes	No		Yes	Yes
28309	OSTEOT W WO LNGTH SHRT ANGULAR CORRJ METAR MLT	>20yrs (coverage based on approved HCA ICD list)	Yes	Yes	Yes	No		Yes	Yes
28310	OSTEOT SHRT CORRJ PROX PHALANX 1ST TOE	>20yrs (coverage based on approved HCA ICD list)	Yes	Yes	Yes	No		Yes	Yes
28312	OSTEOT SHRT CORRJ OTH PHALANGES ANY TOE	>20yrs (coverage based on approved HCA ICD list)	Yes	Yes	Yes	No		Yes	Yes
28313	RCNSTJ ANGULAR DFRM TOE SOFT TISS PX ONLY	>20yrs (coverage based on approved HCA ICD list)	Yes	Yes	Yes	No		Yes	Yes
28315	SESAMOIDECTOMY FIRST TOE SPX	>20yrs (coverage based on approved HCA ICD list)	Yes	Yes	Yes	No		Yes	Yes
28320	REPAIR NONUNION MALUNION TARSAL BONES	>20yrs (coverage based on approved HCA ICD list)	Yes	Yes	Yes	No		Yes	Yes
28322	RPR NON MALUNION METARSAL W WO BONE GRAFT	>20yrs (coverage based on approved HCA ICD list)	Yes	Yes	Yes	No		Yes	Yes
28340	RCNSTJ TOE MACRODACTYLY SOFT TISSUE RESECTION	>20yrs (coverage based on approved HCA ICD list)	Yes	Yes	Yes	No		Yes	Yes
28341	RCNSTJ TOE MACRODACTYLY REQUIRING BONE RESECTION	>20yrs (coverage based on approved HCA ICD list)	Yes	Yes	Yes	No		Yes	Yes
28344	RECONSTRUCTION TOE POLYDACTYLY	>20yrs (coverage based on approved HCA ICD list)	Yes	Yes	Yes	No		Yes	Yes
28345	RCNSTJ TOE SYNDACTYLY W WO SKIN GRAFT EACH WEB	>20yrs (coverage based on approved HCA ICD list)	Yes	Yes	Yes	No		Yes	Yes
28360	RECONSTRUCTION CLEFT FOOT	>20yrs (coverage based on approved HCA ICD list)	Yes	Yes	Not Cov	No		Yes	Yes
28400	CLOSED TX CALCANEAL FRACTURE W O MANIPULATION		No	No	No	No		No	No
28405	CLOSED TX CALCANEAL FRACTURE W MANIPULATION		No	No	No	No		No	No
28406	PRQ SKELETAL FIXJ CALCANEAL FRACTURE W MANJ		No	No	No	No		No	No
28415	OPEN TREATMENT CALCANEAL FRACTURE		No	No	No	No		No	No
28420	OPEN TREATMENT CALCANEAL FRACTURE W BONE GRAFT		No	No	No	No		No	No

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DOS Effective 10/1/19; Posted 10/30/19

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Code	Code Description	Comments	Apple Health & IMC Medical				IMC / BHSO (Mental Health covered svcs)	Medicare	Market Place
			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
28430	CLOSED TX TALUS FRACTURE W O MANIPULATION		No	No	Not Cov	No	No	No	
28435	CLOSED TX TALUS FRACTURE W MANIPULATION		No	No	No	No	No	No	
28436	PRQ SKELETAL FIXATION TALUS FRACTURE W MANJ		No	No	No	No	No	No	
28445	OPEN TREATMENT TALUS FRACTURE		No	No	No	No	No	No	
28446	OPEN OSTEOCHONDRAL AUTOGRAFT TALUS		No	No	No	No	No	No	
28450	TX TARSAL BONE FX XCP TALUS AND CALCN W O MANJ		No	No	Not Cov	No	No	No	
28455	TX TARSAL BONE FX XCP TALUS AND CALCN W MANJ		No	No	Not Cov	No	No	No	
28456	PRQ SKEL FIXJ TARSL FX XCP TALUS AND CALCNS W MANJ		No	No	No	No	No	No	
28465	OPEN TX TARSAL FRACTURE XCP TALUS AND CALCANEUS EA		No	No	No	No	No	No	
28470	CLOSED TX METATARSAL FRACTURE W O MANIPULATION		No	No	Not Cov	No	No	No	
28475	CLTX METAR FX W MANJ		No	No	Not Cov	No	No	No	
28476	PRQ SKEL FIXJ METAR FX W MANJ		No	No	No	No	No	No	
28485	OPEN TREATMENT METATARSAL FRACTURE EACH		No	No	No	No	No	No	
28490	CLTX FX GRT TOE PHLX PHLG W O MANJ		No	No	Not Cov	No	No	No	
28495	CLTX FX GRT TOE PHLX PHLG W MANJ		No	No	Not Cov	No	No	No	
28496	PRQ SKEL FIXJ FX GRT TOE PHLX PHLG W MANJ		No	No	No	No	No	No	
28505	OPEN TX FRACTURE GREAT TOE PHALANX PHALANGES		No	No	No	No	No	No	
28510	CLTX FX PHLX PHLG OTH THN GRT TOE W O MANJ		No	No	Not Cov	No	No	No	
28515	CLTX FX PHLX PHLG OTH THN GRT TOE W MANJ		No	No	Not Cov	No	No	No	
28525	OPEN TX FRACTURE PHALANX PHALANGES NOT GREAT TOE		No	No	No	No	No	No	
28530	CLOSED TREATMENT SESAMOID FRACTURE		No	No	Not Cov	No	No	No	
28531	OPEN TX SESAMOID FRACTURE W WO INTERNAL FIXATION		No	No	No	No	No	No	
28540	CLTX TARSAL DISLC OTH THN TALOTARSAL W O ANES		No	No	Not Cov	No	No	No	
28545	CLTX TARSAL DISLC OTH THN TALOTARSAL W ANES		No	No	No	No	No	No	
28546	PRQ SKEL FIXJ TARSL DISLC XCP TALOTARSAL W MANJ		No	No	No	No	No	No	
28555	OPEN TREATMENT TARSAL BONE DISLOCATION		No	No	No	No	No	No	
28570	CLOSED TX TALOTARSAL JOINT DISLC W O ANES		No	No	Not Cov	No	No	No	
28575	CLOSED TX TALOTARSAL JOINT DISLOCATION W ANES		No	No	No	No	No	No	
28576	PRQ SKEL FIXJ TALOTARSAL JT DISLC W MANJ		No	No	No	No	No	No	
28585	OPEN TREATMENT TALOTARSAL JOINT DISLOCATION		No	No	No	No	No	No	
28600	CLOSED TX TARSOMETATARSAL DISLOCATION W O ANES		No	No	Not Cov	No	No	No	
28605	CLOSED TX TARSOMETATARSAL DISLOCATION W ANES		No	No	No	No	No	No	
28606	PRQ SKEL FIXJ TARS JT DISLC W MANJ		No	No	No	No	No	No	
28615	OPEN TREATMENT TARSOMETATARSAL JOINT DISLOCATION		No	No	No	No	No	No	
28630	CLTX METATARSOPHLNGL JT DISLC W O ANES		No	No	Not Cov	No	No	No	
28635	CLTX METATARSOPHLNGL JT DISLC REQ ANES		No	No	No	No	No	No	
28636	PRQ SKEL FIXJ METATARSOPHLNGL JT DISLC W MANJ		No	No	No	No	No	No	
28645	OPEN TX METATARSOPHALANGEAL JOINT DISLOCATION		No	No	No	No	No	No	

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			Outpatient		ASC	Office Setting			
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28660	CLTX INTERPHALANGEAL JOINT DISLOCATION W O ANES		No	No	Not Cov	No		No	No
28665	CLTX INTERPHALANGEAL JOINT DISLOCATION REQ ANES		No	No	No	No		No	No
28666	PRQ SKEL FIXJ INTERPHALANGEAL JOINT DISLC W MANJ		No	No	No	No		No	No
28675	OPEN TREATMENT INTERPHALANGEAL JOINT DISLOCATION		No	No	No	No		No	No
28705	ARTHRODESIS PANTALAR	>20yrs (coverage based on approved HCA ICD list)	Yes	Yes	Yes	No		Yes	Yes
28715	ARTHRODESIS TRIPLE	>20yrs (coverage based on approved HCA ICD list)	Yes	Yes	Yes	No		Yes	Yes
28725	ARTHRODESIS SUBTALAR	>20yrs (coverage based on approved HCA ICD list)	Yes	Yes	Yes	No		Yes	Yes
28730	ARTHRD MIDTARSL TARSOMETATARSAL MULT TRANSVRS	>20yrs (coverage based on approved HCA ICD list)	Yes	Yes	Yes	No		Yes	Yes
28735	ARTHRD MIDTARSL TARS MLT TRANSVRS W OSTEOT	>20yrs (coverage based on approved HCA ICD list)	Yes	Yes	Yes	No		Yes	Yes
28737	ARTHRD W TDN LNGTH AND ADVMNT TARSL NVCLR-CUNEIFOR	>20yrs (coverage based on approved HCA ICD list)	Yes	Yes	Yes	No		Yes	Yes
28740	ARTHRODESIS MIDTARSOMETATARSAL SINGLE JOINT	>20yrs (coverage based on approved HCA ICD list)	Yes	Yes	Yes	No		Yes	Yes
28750	ARTHRODESIS GREAT TOE METATARSOPHALANGEAL JOINT	>20yrs (coverage based on approved HCA ICD list)	Yes	Yes	Yes	No		Yes	Yes
28755	ARTHRODESIS GREAT TOE INTERPHALANGEAL JOINT	>20yrs (coverage based on approved HCA ICD list)	Yes	Yes	Yes	No		Yes	Yes
28760	ARTHRD W XTNSR HALLUCIS LONGUS TR 1ST METAR NCK	>20yrs (coverage based on approved HCA ICD list)	Yes	Yes	Yes	No		Yes	Yes
28800	AMPUTATION FOOT MIDTARSAL	>20yrs (coverage based on approved HCA ICD list)	Not Cov	No	Not Cov	No		No	No
28805	AMPUTATION FOOT TRANSMETARSAL	>20yrs (coverage based on approved HCA ICD list)	No	No	Not Cov	No		No	No
28810	AMPUTATION METATARSAL W TOE SINGLE	>20yrs (coverage based on approved HCA ICD list)	No	No	No	No		No	No
28820	AMPUTATION TOE METATARSOPHALANGEAL JOINT	>20yrs (coverage based on approved HCA ICD list)	No	No	No	No		No	No
28825	AMPUTATION TOE INTERPHALANGEAL JOINT	>20yrs (coverage based on approved HCA ICD list)	No	No	No	No		No	No
28890	ESWT HI NRG PHYS QHP W US GDN INVG PLNTAR FASCIA		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
28899	UNLISTED PROCEDURE FOOT TOES		Yes	Yes	Not Cov	Yes		Yes	Yes
29000	APPLICATION HALO TYPE BODY CAST		No	No	No	No		No	No
29010	APPLICATION RISSER JACKET LOCALIZER BODY ONLY		No	No	Not Cov	No		No	No
29015	APPLICATION RISSER JACKET LOCALIZER BODY W HEAD		No	No	Not Cov	No		No	No
29035	APPLICATION BODY CAST SHOULDER HIPS		No	No	Not Cov	No		No	No
29040	APPLICATION BODY CAST SHOULDER HIPS HEAD MINERVA		No	No	No	No		No	No

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			Outpatient		ASC	Office Setting			
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29044	APPLICATION BODY CAST SHOULDER HIPS W ONE THIGH		No	No	Not Cov	No		No	No
29046	APPLICATION BODY CAST SHOULDER HIPS BOTH THIGHS		No	No	No	No		No	No
29049	APPLICATION CAST FIGURE-OF-8		No	No	Not Cov	No		No	No
29055	APPLICATION CAST SHOULDER SPICA		No	No	Not Cov	No		No	No
29058	APPLICATION CAST PLASTER VELPEAU		No	No	Not Cov	No		No	No
29065	APPLICATION CAST SHOULDER HAND LONG ARM		No	No	Not Cov	No		No	No
29075	APPLICATION CAST ELBOW FINGER SHORT ARM		No	No	Not Cov	No		No	No
29085	APPLICATION CAST HAND AND LOWER FOREARM GAUNTLET		No	No	Not Cov	No		No	No
29086	APPLICATION CAST FINGER		No	No	Not Cov	No		No	No
29105	APPLICATION LONG ARM SPLINT SHOULDER HAND		No	No	Not Cov	No		No	No
29125	APPLICATION SHORT ARM SPLINT FOREARM-HAND STATIC		No	No	Not Cov	No		No	No
29126	APPLICATION SHORT ARM SPLINT DYNAMIC		No	No	Not Cov	No		No	No
29130	APPLICATION FINGER SPLINT STATIC		No	No	Not Cov	No		No	No
29131	APPLICATION FINGER SPLINT DYNAMIC		No	No	Not Cov	No		No	No
29200	STRAPPING THORAX		No	No	Not Cov	No		No	No
29240	STRAPPING SHOULDER		No	No	Not Cov	No		No	No
29260	STRAPPING ELBOW WRIST		No	No	Not Cov	No		No	No
29280	STRAPPING HAND FINGER		No	No	Not Cov	No		No	No
29305	APPLICATION HIP SPICA CAST 1 LEG		No	No	Not Cov	No		No	No
29325	APPL HIP SPICA CAST ONE AND ONE-HALF SPICA BOTH LEGS		No	No	Not Cov	No		No	No
29345	APPLICATION LONG LEG CAST THIGH-TOE		No	No	Not Cov	No		No	No
29355	APPLICATION LONG LEG CAST WALKER AMBULATORY TYPE		No	No	Not Cov	No		No	No
29358	APPLICATION LONG LEG CAST BRACE		No	No	Not Cov	No		No	No
29365	APPLICATION CYLINDER CAST THIGH ANKLE		No	No	Not Cov	No		No	No
29405	APPLICATION SHORT LEG CAST BELOW KNEE-TOE		No	No	Not Cov	No		No	No
29425	APPLICATION SHORT LEG CAST WALKING AMBULATORY		No	No	Not Cov	No		No	No
29435	APPLICATION PATELLAR TENDON BEARING CAST		No	No	Not Cov	No		No	No
29440	ADDING WALKER PREVIOUSLY APPLIED CAST		No	No	Not Cov	No		No	No
29445	APPLICATION RIGID TOTAL CONTACT LEG CAST		No	No	Not Cov	No		No	No
29450	APPL CLUBFOOT CAST MOLDING MANJ LONG SHORT LEG		No	No	Not Cov	No		No	No
29505	APPLICATION LONG LEG SPLINT THIGH ANKLE TOES		No	No	Not Cov	No		No	No
29515	APPLICATION SHORT LEG SPLINT CALF FOOT		No	No	Not Cov	No		No	No
29520	STRAPPING HIP		No	No	Not Cov	No		No	No
29530	STRAPPING KNEE		No	No	Not Cov	No		No	No
29540	STRAPPING ANKLE AND FOOT		No	No	Not Cov	No		No	No
29550	STRAPPING TOES		No	No	Not Cov	No		No	No
29580	STRAPPING UNNA BOOT		No	No	Not Cov	No		No	No
29581	APPL MLTLAYR COMPRES LEG BELOW KNEE W ANKLE FOOT		No	No	Not Cov	No		No	No

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			Outpatient		ASC	Office Setting			
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29584	APPL MLTLAYR COMPRES SYS UPARM LWARM HAND AND FING		Not Cov	Not Cov	Not Cov	Not Cov		No	No
29700	REMOVAL BIVALVING GAUNTLET BOOT BODY CAST		No	No	Not Cov	No		No	No
29705	REMOVAL BIVALVING FULL ARM FULL LEG CAST		No	No	Not Cov	No		No	No
29710	RMVL BIVALV SHO HIP SPICA MINERVA RISSER JACKET		No	No	Not Cov	No		No	No
29720	REPAIR SPICA BODY CAST JACKET		No	No	Not Cov	No		No	No
29730	WINDOWING CAST		No	No	Not Cov	No		No	No
29740	WEDGING CAST EXCEPT CLUBFOOT CASTS		No	No	Not Cov	No		No	No
29750	WEDGING CLUBFOOT CAST		No	No	Not Cov	No		No	No
29799	UNLISTED PROCEDURE CASTING STRAPPING		No	No	Not Cov	No		No	No
29800	ARTHRS TEMPOROMANDIBULR JT DX W WO SYNVAL BX SPX		No	No	No	No		No	No
29804	ARTHROSCOPY TEMPOROMANDIBULAR JOINT SURGICAL		No	No	No	No		No	No
29805	ARTHROSCOPY SHOULDER DX W WO SYNOVIAL BIOPSY SPX		No	No	No	No		No	No
29806	ARTHROSCOPY SHOULDER SURGICAL CAPSULORRHAPHY		Yes	Yes	Yes	No		Yes	Yes
29807	ARTHROSCOPY SHOULDER SURGICAL REPAIR SLAP LESION		Yes	Yes	Yes	No		No	Yes
29819	ARTHROSCOPY SHOULDER SURGICAL REMOVAL LOOSE FB		Yes	Yes	Yes	No		No	Yes
29820	ARTHROSCOPY SHOULDER SURG SYNOVECTOMY PARTIAL		Yes	Yes	Yes	No		No	Yes
29821	ARTHROSCOPY SHOULDER SURG SYNOVECTOMY COMPLETE		Yes	Yes	Yes	No		No	Yes
29822	ARTHROSCOPY SHOULDER SURG DEBRIDEMENT LIMITED		Yes	Yes	Yes	No		No	Yes
29823	ARTHROSCOPY SHOULDER SURG DEBRIDEMENT EXTENSIVE		Yes	Yes	Yes	No		No	Yes
29824	ARTHROSCOPY SHOULDER DISTAL CLAVICULECTOMY		Yes	Yes	Yes	No		No	Yes
29825	ARTHROSCOPY SHOULDER AHESIOLYSIS W WO MANIPJ		Yes	Yes	Yes	No		No	Yes
29826	ARTHROSCOPY SHOULDER W CORACOACRM LIGMNT RELEASE		Yes	Yes	Yes	No		No	Yes
29827	ARTHROSCOPY SHOULDER ROTATOR CUFF REPAIR		Yes	Yes	Yes	No		No	Yes
29828	ARTHROSCOPY SHOULDER BICEPS TENODESIS		Yes	Yes	Yes	No		No	Yes
29830	ARTHROSCOPY ELBOW DIAG W WO SYNOVIAL BIOPSY SPX		No	No	No	No		No	No
29834	ARTHROSCOPY ELBOW SURGICAL W REMOVAL LOOSE FB		No	No	No	No		No	No
29835	ARTHROSCOPY ELBOW SURGICAL SYNOVECTOMY PARTIAL		No	No	No	No		No	No
29836	ARTHROSCOPY ELBOW SURGICAL SYNOVECTOMY COMPLETE		No	No	No	No		No	No
29837	ARTHROSCOPY ELBOW SURGICAL DEBRIDEMENT LIMITED		No	No	No	No		No	No

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29838	ARTHROSCOPY ELBOW SURGICAL DEBRIDEMENT EXTENSIVE		No	No	No	No		No	No
29840	ARTHROSCOPY WRIST DIAG W WO SYNOVIAL BIOPSY SPX		No	No	No	No		No	No
29843	ARTHROSCOPY WRIST INFECTION LAVAGE AND DRAINAGE		No	No	No	No		No	No
29844	ARTHROSCOPY WRIST SURGICAL SYNOVECTOMY PARTIAL		No	No	No	No		No	No
29845	ARTHROSCOPY WRIST SURGICAL SYNOVECTOMY COMPLETE		No	No	No	No		No	No
29846	ARTHRS WRST EXC AND RPR TRIANG FIBROART AND JOINT		No	No	No	No		No	No
29847	ARTHROSCOPY WRIST SURG INT FIXJ FX INSTABILITY		No	No	No	No		No	No
29848	NDSC WRST SURG W RLS TRANSVRS CARPL LIGM		No	No	No	No		No	No
29850	ARTHROSCOPY AID TX SPINE AND FX KNEE W O FIXJ		No	No	No	No		No	No
29851	ARTHROSCOPY AID TX SPINE AND FX KNEE W FIXJ		No	No	No	No		No	No
29855	ARTHRS AID TIBIAL FRACTURE PROXIMAL UNICONDYLAR		No	No	No	No		No	No
29856	ARTHRS AID TIBIAL FX PROX UNICONDYLAR BICONDYLAR		No	No	No	No		No	No
29860	ARTHROSCOPY HIP DIAGNOSTIC W WO SYNOVIAL BY SPX		No	No	No	No		No	No
29861	ARTHROSCOPY HIP SURGICAL W REMOVAL LOOSE FB		No	No	No	No		No	No
29862	ARTHRS HIP DEBRIDEMENT SHAVING ARTICULAR CRTLG		No	No	No	No		No	No
29863	ARTHROSCOPY HIP SURGICAL W SYNOVECTOMY		No	No	No	No		No	No
29866	ARTHROSCOPY KNEE OSTEOCHONDRAL AGRFT MOSAICPLAST		No	No	No	No		No	No
29867	ARTHROSCOPY KNEE OSTEOCHONDRAL ALLOGRAFT		No	No	Not Cov	No		No	No
29868	ARTHROSCOPY KNEE MENISCAL TRNSPLJ MED LAT		No	No	Not Cov	No		No	No
29870	ARTHROSCOPY KNEE DIAGNOSTIC W WO SYNOVIAL BX SPX		No	No	No	No		No	No
29871	ARTHROSCOPY KNEE INFECTION LAVAGE AND DRAINAGE		No	No	No	No		No	No
29873	ARTHROSCOPY KNEE LATERAL RELEASE		Yes	Yes	Yes	No		No	Yes
29874	ARTHROSCOPY KNEE REMOVAL LOOSE FOREIGN BODY		Yes	Yes	Yes	No		No	Yes
29875	ARTHROSCOPY KNEE SYNOVECTOMY LIMITED SPX		Yes	Yes	Yes	No		No	Yes
29876	ARTHROSCOPY KNEE SYNOVECTOMY 2 OR GRT COMPARTMENTS		Yes	Yes	Yes	No		No	Yes
29877	ARTHRS KNEE DEBRIDEMENT SHAVING ARTCLR CRTLG		Yes	Yes	Yes	No		No	Yes
29879	ARTHRS KNEE ABRASION ARTHRP MLT DRLG MICROFX		Yes	Yes	Yes	No		No	Yes
29880	ARTHRS KNEE W MENISCECTOMY MED AND LAT W SHAVING		Yes	Yes	Yes	No		No	Yes
29881	ARTHRS KNE SURG W MENISCECTOMY MED LAT W SHVG		Yes	Yes	Yes	No		No	Yes
29882	ARTHROSCOPY KNEE W MENISCUS RPR MEDIAL LATERAL		Yes	Yes	Yes	No		No	Yes

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
29883	ARTHROSCOPY KNEE W MENISCUS RPR MEDIAL AND LATERAL		Yes	Yes	Yes	No		No	Yes
29884	ARTHROSCOPY KNEE W LYSIS ADHESIONS W WO MANJ SPX		Yes	Yes	Yes	No		No	Yes
29885	ARTHRS KNEE DRILL OSTEOCHONDRITIS DISSECANS GRFG		Yes	Yes	Yes	No		No	Yes
29886	ARTHRS KNEE DRILLING OSTEOCHOND DISSECANS LESION		Yes	Yes	Yes	No		No	Yes
29887	ARTHRS KNEE DRLG OSTEOCHOND DISSECANS INT FIXJ		Yes	Yes	Yes	No		No	Yes
29888	ARTHRS AIDED ANT CRUCIATE LIGM RPR AGMNTJ RCNSTJ		Yes	Yes	Yes	No		No	Yes
29889	ARTHRS AIDED PST CRUCIATE LIGM RPR AGMNTJ RCNSTJ		Yes	Yes	Yes	No		No	Yes
29891	ARTHRS ANKLE EXC OSTCHNDRL DFCT W DRLG DFCT		Yes	Yes	Yes	No		No	Yes
29892	ARTHRS AID RPR LES TALAR DOME FX TIBL PLAFOND FX		Yes	Yes	Yes	No		No	Yes
29893	ENDOSCOPIC PLANTAR FASCIOTOMY		Yes	Yes	Yes	No		No	Yes
29894	ARTHROSCOPY ANKLE W REMOVAL LOOSE FOREIGN BODY		Yes	Yes	Yes	No		Yes	Yes
29895	ARTHROSCOPY ANKLE SURGICAL SYNOVECTOMY PARTIAL		Yes	Yes	Yes	No		Yes	Yes
29897	ARTHROSCOPY ANKLE SURGICAL DEBRIDEMENT LIMITED		Yes	Yes	Yes	No		Yes	Yes
29898	ARTHROSCOPY ANKLE SURGICAL DEBRIDEMENT EXTENSIVE		Yes	Yes	Yes	No		Yes	Yes
29899	ARTHROSCOPY ANKLE SURGICAL W ANKLE ARTHRODESIS		Yes	Yes	Yes	No		Yes	Yes
29900	ARTHROSCOPY METACARPOPHALANGEAL SYNOVIAL BIOPSY		No	No	No	No		No	No
29901	ARTHRS METACARPOPHALANGEAL JOINT DEBRIDEMENT		No	No	No	No		No	No
29902	ARTHRS MTCARPHLNGL JT W RDCTJ UR COLTRL LIGM		No	No	No	No		No	No
29904	ARTHRS SUBTALAR JOINT REMOVE LOOSE FOREIGN BODY		No	No	No	No		No	No
29905	ARTHROSCOPY SUBTALAR JOINT WITH SYNOVECTOMY		No	No	No	No		No	No
29906	ARTHROSCOPY SUBTALAR JOINT WITH DEBRIDEMENT		No	No	No	No		No	No
29907	ARTHROSCOPY SUBTALAR JOINT SUBTALAR ARTHRODESIS		No	No	No	No		No	No
29914	ARTHROSCOPY HIP W FEMOROPLASTY		Yes	Not Cov	Yes	Not Cov		Yes	Yes
29915	ARTHROSCOPY HIP W ACETABULOPLASTY		Yes	Not Cov	Yes	Not Cov		Yes	Yes
29916	ARTHROSCOPY HIP W LABRAL REPAIR		Yes	Yes	Yes	No		Yes	Yes
29999	UNLISTED PROCEDURE ARTHROSCOPY		Yes	Yes	Not Cov	Yes		Yes	Yes
30000	DRAINAGE ABSCESS HEMATOMA NASAL INT APPROACH		No	No	Not Cov	No		No	No
30020	DRAINAGE ABSCESS HEMATOMA NASAL SEPTUM		No	No	Not Cov	No		No	No
30100	BIOPSY INTRANASAL		No	No	Not Cov	No		No	No
30110	EXCISION NASAL POLYP SIMPLE		No	No	Not Cov	No		No	No

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Code	Code Description	Comments	Apple Health & IMC Medical				IMC / BHSO (Mental Health covered svcs)	Medicare	Market Place
			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
30115	EXCISION NASAL POLYP EXTENSIVE		No	No	No	No		No	No
30117	EXCISION DESTRUCTION INTRANASAL LESION INT APPR		No	No	No	No		No	No
30118	EXCISION DESTRUCTION INTRANASAL LESION XTRNL		No	No	No	No		No	No
30120	EXCISION SURGICAL PLANING SKIN NOSE RHINOPHYMA		No	No	No	No		No	No
30124	EXCISION DERMOID CYST NOSE SIMPLE SUBCUTANEOUS		No	No	Not Cov	No		No	No
30125	EXC DERMOID CYST NOSE COMPLEX UNDER BONE CRTLG		No	No	No	No		No	No
30130	EXCISION INFERIOR TURBINATE PARTIAL COMPLETE		No	No	No	No		No	No
30140	SUBMUCOUS RESEJ INFERIOR TURBINATE PRTL COMPL		No	No	No	No		No	No
30150	RHINECTOMY PARTIAL		No	No	No	No		No	No
30160	RHINECTOMY TOTAL		No	No	No	No		No	No
30200	INJECTION TURBINATE THERAPEUTIC		No	No	Not Cov	No		No	No
30210	DISPLACEMENT THERAPY PROETZ TYPE		No	No	Not Cov	No		No	No
30220	INSERTION NASAL SEPTAL PROSTHESIS BUTTON		No	No	No	No		No	No
30300	REMOVAL FOREIGN BODY INTRANASAL OFFICE PROCEDURE		No	No	Not Cov	No		No	No
30310	REMOVAL FOREIGN BODY INTRANASAL GENERAL ANES		No	No	No	No		No	No
30320	RMVL FOREIGN BODY INTRANASAL LATERAL RHINOTOMY		No	No	No	No		No	No
30400	RHINP PRIM LAT AND ALAR CRTLGS AND ELVTN NASAL TI		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
30410	RHINP PRIM COMPLETE XTRNL PARTS		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
30420	RHINOPLASTY PRIMARY W MAJOR SEPTAL REPAIR		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
30430	RHINOPLASTY SECONDARY MINOR REVISION		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
30435	RHINOPLASTY SECONDARY INTERMEDIATE REVISION		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
30450	RHINOPLASTY SECONDARY MAJOR REVISION		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
30460	RHINP DFRM W COLUM LNGTH TIP ONLY		Yes	Yes	Yes	Yes		Yes	Yes
30462	RHINP DFRM COLUM LNGTH TIP SEPTUM OSTEOT		Yes	Yes	Yes	Yes		Yes	Yes
30465	REPAIR NASAL VESTIBULAR STENOSIS		No	No	No	No		Yes	No
30520	SEPTOPLASTY SUBMUCOUS RESEJ W WO CARTILAGE GRF		No	No	No	No		Yes	No
30540	REPAIR CHOANAL ATRESIA INTRANASAL		Yes	Yes	Yes	No		Yes	Yes
30545	REPAIR CHOANAL ATRESIA TRANSPALATINE		Yes	Yes	Yes	No		Yes	Yes
30560	LYSIS INTRANASAL SYNECHIA		No	No	No	No		No	No
30580	REPAIR FISTULA OROMAXILLARY		No	No	No	No		No	No
30600	REPAIR FISTULA ORONASAL		No	No	No	No		No	No
30620	SEPTAL OTHER INTRANASAL DERMATOPLASTY		No	No	No	No		No	No
30630	REPAIR NASAL SEPTAL PERFORATIONS		No	No	No	No		No	No
30801	ABLTY SOFT TIS INFERIOR TURBINATES UNI BI SUPFC		No	No	No	No		No	No
30802	ABLTY SOF TISS INF TURBS UNI BI SUPFC INTRAMURAL		No	No	No	No		No	No
30901	CONTROL NASAL HEMORRHAGE ANTERIOR SIMPLE		No	No	Not Cov	No		No	No
30903	CONTROL NASAL HEMORRHAGE ANTERIOR COMPLEX		No	No	No	No		No	No
30905	CTRL NSL HEMRRG PST NASAL PACKS AND CAUTERY 1ST		No	No	No	No		No	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
30906	CTRL NSL HEMRRG PST NASAL PACKS AND CAUTERY SUBSQ		No	No	No	No		No	No
30915	LIGATION ARTERIES ETHMOIDAL		No	No	No	No		No	No
30920	LIGATION ARTERIES INT MAXILLARY TRANSANTRAL		No	No	No	No		No	No
30930	FRACTURE NASAL INFERIOR TURBINATE THERAPEUTIC		No	No	No	No		No	No
30999	UNLISTED PROCEDURE NOSE		Yes	Yes	Not Cov	Yes		Yes	Yes
31000	LAVAGE CANNULATION MAXILLARY SINUS		No	No	Not Cov	No		No	No
31002	LAVAGE CANNULATION SPHENOID SINUS		No	No	Not Cov	No		No	No
31020	SINUSOTOMY MAXILLARY ANTROTOMY INTRANASAL		No	No	No	No		No	No
31030	SINUSOTOMY MAXILLARY RAD W O RMVL ANTROCH POLYPS		No	No	No	No		No	No
31032	SINUSOT MAX ANTRT RAD W RMVL ANTROCH POLYPS		No	No	No	No		No	No
31040	PTERYGOMAXILLARY FOSSA SURGERY ANY APPROACH		No	No	Not Cov	No		No	No
31050	SINUSOTOMY SPHENOID W WO BIOPSY		No	No	No	No		No	No
31051	SINUSOT SPHENOID W MUCOSAL STRIPPING RMVL POLYP		No	No	No	No		No	No
31070	SINUSOTOMY FRONTAL EXTERNAL SIMPLE		No	No	No	No		No	No
31075	SINUSOTOMY FRONTAL TRANSORBITAL UNILATERAL		No	No	No	No		No	No
31080	SINUSOTOMY FRNT OBLITERATIVE W O FLAP BROW INC		No	No	No	No		No	No
31081	SINUSOT FRNT OBLIT W O OSTPL FLAP CORONAL INC		No	No	No	No		No	No
31084	SINUSOT FRNT OBLIT W OSTPL FLAP BROW INC		No	No	No	No		No	No
31085	SINUSOT FRNT OBLIT W OSTPL FLAP CORONAL INC		No	No	No	No		No	No
31086	SINUSOT FRNT NONOBLIT W OSTPL FLAP BROW INC		No	No	No	No		No	No
31087	SINUSOT FRNT NONOBLIT W OSTPL FLAP CORONAL INC		No	No	No	No		No	No
31090	SINUSOT UNI 3 OR GRT PARANSL SINUSES		No	No	No	No		No	No
31200	ETHMOIDECTOMY INTRANASAL ANTERIOR		No	No	No	No		No	No
31201	ETHMOIDECTOMY INTRANASAL TOTAL		No	No	No	No		No	No
31205	ETHMOIDECTOMY EXTRANASAL TOTAL		No	No	No	No		No	No
31225	MAXILLECTOMY W O ORBITAL EXENTERATION		No	No	Not Cov	No		No	No
31230	MAXILLECTOMY W ORBITAL EXENTERATION		Not Cov	No	Not Cov	No		No	No
31231	NASAL ENDOSCOPY DIAGNOSTIC UNI BI SPX		No	No	Not Cov	No		No	No
31233	NASAL SINUS ENDOSCOPY DX MAXILLARY SINUSOSCOPY		No	No	No	No		No	No
31235	NASAL SINUS ENDOSCOPY DX SPHENOID SINUSOSCOPY		No	No	No	No		No	No
31237	NASAL SINUS NDSC SURG W BX POLYPECT DBRDMT SPX		Yes	Yes	Yes	Yes		No	Not Cov
31238	NASAL SINUS NDSC SURG W CONTROL NASAL HEMRRG		No	No	No	No		No	No
31239	NASAL SINUS NDSC SURG W DACRYOCSTORHINOSTOMY		No	No	No	No		No	No
31240	NASAL SINUS NDSC SURG W CONCHA BULLOSA RESECTION		No	No	No	No		No	No
31241	NASAL SINUS NDSC W LIG SPHENOPALATINE ARTERY		No	No	Not Cov	No		No	No
31253	NASAL SINUS NDSC TOT W FRNT SINS EXPL TISS RMVL		No	No	No	No		Yes	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
31254	NASAL SINUS NDSC W PARTIAL ETHMOIDECTOMY		No	No	No	No		No	No
31255	NASAL SINUS NDSC W TOTAL ETHMOIDECTOMY		No	No	No	No		No	No
31256	NASAL SINUS ENDOSCOPY W MAXILLARY ANTROSTOMY		No	No	No	No		No	No
31257	NASAL SINUS NDSC TOTAL WITH SPHENOIDOTOMY		No	No	No	No		Yes	No
31259	NASAL SINUS NDSC TOT W SPHENDT W SPHEN TISS RMVL		No	No	No	No		Yes	No
31267	NSL SINUS NDSC MAX ANTROST W RMVL TISS MAX SINUS		No	No	No	No		No	No
31276	NASAL SINUS NDSC W RMVL TISS FROM FRONTAL SINUS		No	No	No	No		No	No
31287	NASAL SINUS ENDOSCOPY W SPHENOIDOTOMY		No	No	No	No		No	No
31288	NSL SINUS NDSC SPHENDT RMVL TISS SPHENOID SINUS		No	No	No	No		No	No
31290	NASAL SINUS NDSC RPR CEREBRSP FLUID LEAK ETHMOID		No	No	Not Cov	No		No	No
31291	NASAL SINUS NDSC RPR CEREBRSP FLUID LEAK SPHENOID		No	No	Not Cov	No		No	No
31292	NSL SINUS NDSC SURG W MEDIAL INF ORB WALL DCMPRN		No	No	Not Cov	No		No	No
31293	NASAL SINUS NDSC MEDIAL ORB AND NF ORB WALL DCMPR		No	No	Not Cov	No		No	No
31294	NASAL SINUS NDSC SURG W OPTIC NERVE DCMPRN		No	No	Not Cov	No		No	No
31295	NASAL SINUS NDSC SURG W DILAT MAXILLARY SINUS		Not Cov	Not Cov	Yes	Not Cov		Yes	Yes
31296	NASAL SINUS NDSC SURG W DILATION FRONTAL SINUS		Not Cov	Not Cov	Yes	Not Cov		Yes	Yes
31297	NASAL SINUS NDSC SURG W DILATION SPHENOID SINUS		Not Cov	Not Cov	Yes	Not Cov		Yes	Yes
31298	NASAL SINUS NDSC W FRONTAL AND SPHEN SINS DILATION		No	No	Not Cov	No		Yes	No
31299	UNLISTED PROCEDURE ACCESSORY SINUSES		Yes	Yes	Not Cov	Yes		Yes	Not Cov
31300	LARYNGOTOMY W RMVL TUMOR LARYNGOCELE CORDECTOMY		No	No	No	No		No	No
31360	LARYNGECTOMY TOTAL W O RADICAL NECK DISSECTION		Not Cov	No	Not Cov	No		No	No
31365	LARYNGECTOMY TOTAL W RADICAL NECK DISSECTION		Not Cov	No	Not Cov	No		No	No
31367	LARYNGECTOMY STOT SUPRAGLOTTIC W O RAD NECK DSJ		Not Cov	No	Not Cov	No		No	No
31368	LARYNGECTOMY STOT SUPRAGLOTTIC W RAD NCK DSJ		Not Cov	No	Not Cov	No		No	No
31370	PARTIAL LARYNGECTOMY HEMILARYGECTOMY HORIZONTAL		Not Cov	No	Not Cov	No		No	No
31375	PARTIAL LARYNGECTOMY HEMILARYNG LATEROVERTICAL		No	No	Not Cov	No		No	No
31380	PARTIAL LARYNGECTOMY HEMILARYNG ANTEROVERTICAL		Not Cov	No	Not Cov	No		No	No
31382	PARTIAL LARYNG HEMILARYNG ANTERO-LATERO-VERTICAL		Not Cov	No	Not Cov	No		No	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
31390	PHARYNGOLARYNGECTOMY W RAD NECK DSJ W O RCNSTJ		Not Cov	No	Not Cov	No		No	No
31395	PHARYNGOLARYNGECTOMY W RAD NECK DSJ W RCNSTJ		Not Cov	No	Not Cov	No		No	No
31400	ARYTENOIDECTOMY ARYTENOIDOPEXY XTRNL APPROACH		No	No	No	No		No	No
31420	EPIGLOTTIDECTOMY		No	No	No	No		No	No
31500	INTUBATION ENDOTRACHEAL EMERGENCY PROCEDURE		No	No	No	No		No	No
31502	TRACHEOTOMY TUBE CHANGE PRIOR TO FISTULA TRACT		No	No	No	No		No	No
31505	LARYNGOSCOPY INDIRECT DIAGNOSTIC SPX		No	No	Not Cov	No		No	No
31510	LARYNGOSCOPY INDIRECT W BIOPSY		No	No	No	No		No	No
31511	LARYNGOSCOPY INDIRECT W REMOVAL FOREIGN BODY		No	No	No	No		No	No
31512	LARYNGOSCOPY INDIRECT W REMOVAL LESION		No	No	No	No		No	No
31513	LARYNGOSCOPY INDIRECT W VOCAL CORD INJECTION		No	No	No	No		No	No
31515	LARYNGOSCOPY W WO TRACHEOSCOPY ASPIRATION		No	No	No	No		No	No
31520	LARYNGOSCOPY W WO TRACHEOSCOPY DX NEWBORN		No	No	No	No		No	No
31525	LARYNGOSCOPY W WO TRACHEOSCOPY DX EXCEPT NEWBORN		No	No	No	No		No	No
31526	LARYNGOSCOPY W WO TRACHEOSCOPY W MICRO TELESCOPE		No	No	No	No		No	No
31527	LARYNGOSCOPY W WO TRACHEOSCOPY INSERT OBTURATOR		No	No	No	No		No	No
31528	LARYNGOSCOPY W WO TRACHEOSCOPY W DILATION IN		No	No	No	No		No	No
31529	LARYNGOSCOPY W WO TRACHEOSCOPY DILATION SUBSQ		No	No	No	No		No	No
31530	LARYNGOSCOPY W FOREIGN BODY REMOVAL		No	No	No	No		No	No
31531	LARYNGOSCOPY FOREIGN BODY RMVL MICRO TELESCOPE		No	No	No	No		No	No
31535	LARYNGOSCOPY DIRECT OPERATIVE W BIOPSY		No	No	No	No		No	No
31536	LARYNGOSCOPY W BIOPSY MICROSCOPE TELESCOPE		No	No	No	No		No	No
31540	LARYNGOSCOPY EXC TUM AND STRIPPING CORDS EPIGLOTT		No	No	No	No		No	No
31541	LARGSC EXC TUM AND STRPG CORDS EPIGL MCRSCP TLSCP		No	No	No	No		No	No
31545	LARGSC MICRO TELESCOPE RMVL LES VOCAL CORD FLAP		No	No	No	No		No	No
31546	LARGSC MICRO TELESCOPE RMVL LES VOCAL CORD GRAFT		No	No	No	No		No	No
31551	LARYNGOPLASTY LARYNGEAL STEN W O STENT UNDER 12 YRS		No	No	No	No		No	No
31552	LARYNGOPLASTY LARYNGEAL STEN W O STENT 12 YRS OVER		No	No	No	No		No	No

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			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
31553	LARYNGOPLASTY LARYNGEAL STEN W STENT UNDER 12 YRS		No	No	No	No		No	No
31554	LARYNGOPLASTY LARYNGEAL STEN W STENT 12 YRS OVER		No	No	No	No		No	No
31560	LARYNGOSCOPY DIRECT OPERATIVE W ARYTENOIDECTOMY		No	No	No	No		No	No
31561	LARGSC ARYTENOIDECTOMY MICROSCOPE TELESCOPE		No	No	No	No		No	No
31570	LARYNGOSCOPE INJECTION VOCAL CORD THERAPEUTIC		No	No	No	No		No	No
31571	LARGSC W NJX VOCAL CORD THER W MICRO TELESCOPE		No	No	No	No		No	No
31572	LARYNGOSCOPY FLEXIBLE ABLATJ DESTJ LESION(S) UNI		Not Cov	No	Not Cov	No		No	No
31573	LARYNGOSCOPY FLEXIBLE THERAPEUTIC INJECTION UNI		Not Cov	No	Not Cov	No		No	No
31574	LARYNGOSCOPY FLEXIBLE W INJECTION AGMNTJ UNI		Not Cov	No	Not Cov	No		No	No
31575	LARYNGOSCOPY FLEXIBLE DIAGNOSTIC		No	No	Not Cov	No		No	No
31576	LARYNGOSCOPY FLEXIBLE W BIOPSY(IES)		No	No	No	No		No	No
31577	LARYNGOSCOPY FLX RMVL FOREIGN BODY(S)		No	No	No	No		No	No
31578	LARYNGOSCOPY FLEXIBLE RMVL LESION(S) NON-LASER		No	No	No	No		No	No
31579	LARYNGOSCOPY FLX RGD TELESCOPIC W STROBOSCOPY		No	No	Not Cov	No		No	No
31580	LARYNGOPLASTY LARYN WEB W KEEL STENT INSERTION		No	No	No	No		No	No
31584	LARYNGOPLASTY W OPEN REDUCTION FRACTURE W TRACHS		Not Cov	No	Not Cov	No		No	No
31587	LARYNGOPLASTY CRICOID SPLIT W O GRAFT PLACEMENT		Not Cov	No	Not Cov	No		No	No
31590	LARYNGEAL REINNERVATION NEUROMUSCULAR PEDICLE		No	No	No	No		No	No
31591	LARYNGOPLASTY MEDIALIZATION UNLIATERAL		No	No	No	No		No	No
31592	CRICOTRACHEAL RESECTION		Not Cov	No	Not Cov	No		No	No
31599	UNLISTED PROCEDURE LARYNX		Yes	Yes	Not Cov	Yes		Yes	Yes
31600	TRACHEOSTOMY PLANNED SEPARATE PROCEDURE		No	No	Not Cov	No		No	No
31601	TRACHEOSTOMY PLANNED UNDER 2 YEARS SPX		No	No	Not Cov	No		No	No
31603	TRACHEOSTOMY EMERGENCY PROCEDURE TRANSTRACHEAL		No	No	No	No		No	No
31605	TRACHEOSTOMY EMERGENCY CRICOTHYROID MEMBRANE		No	No	No	No		No	No
31610	TRACHEOSTOMY FENESTRATION W SKIN FLAPS		No	No	Not Cov	No		No	No
31611	CONSTJ TRACHEOESOPHGL FSTL AND INSJ SP PROSTH		No	No	No	No		No	No
31612	TRACHEAL PNXR PRQ W TRANSTRACHEAL ASPIR AND NJX		No	No	No	No		No	No
31613	TRACHEOSTOMA REVJ SMPL W O FLAP ROTATION		No	No	No	No		No	No
31614	TRACHEOSTOMA REVJ CPLX W FLAP ROTATION		No	No	No	No		No	No
31615	TRACHEOBRNCHSC THRU EST TRACHS INC		No	No	No	No		No	No
31622	BRNCHSC INCL FLUOR GDNCE DX W CELL WASHG SPX		No	No	No	No		No	No
31623	BRNCHSC BRUSHING PROTECTED BRUSHINGS		No	No	No	No		No	No
31624	BRNCHSC W BRNCL ALVEOLAR LAVAGE		No	No	No	No		No	No

This prior authorization guide applies to Medicaid, Medicare, and Marketplace.

DOS Effective 10/1/19; Posted 10/30/19

All Inpatient services require prior authorization

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Code	Code Description	Comments	Apple Health & IMC Medical				IMC / BHSO (Mental Health covered svcs)	Medicare	Market Place
			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
31625	BRONCHOSCOPY BRONCHIAL ENDOBRNCL BX 1 PLUS SITES		No	No	No	No		No	No
31626	BRONCHOSCOPY W PLMT FIDUCIAL MARKERS SINGLE MULT		No	No	No	No		No	No
31627	BRONCHOSCOPY W CPTR-ASST IMAGE-GUIDED NAVIGATION		No	No	Not Cov	No		No	No
31628	BRONCHOSCOPY W TRANSBRONCHIAL LUNG BX 1 LOBE		No	No	No	No		No	No
31629	BRONCHOSCOPY NEEDLE BX TRACHEA MAIN STEM AND BRON		No	No	No	No		No	No
31630	BRNCHSC W TRACHEAL BRONCHIAL DILAT CLSD RDCTJ FX		No	No	No	No		No	No
31631	BRONCHOSCOPY W PLACEMENT TRACHEAL STENT		No	No	No	No		No	No
31632	BRONCHOSCOPY W TRANSBRONCHIAL LUNG BX EACH LOBE		No	No	No	No		No	No
31633	BRONCHOSCOPY W TRANSBRONCL NDL ASPIR BX EA LOBE		No	No	No	No		No	No
31634	BRONCHOSCOPY BALLOON OCCLUSION		No	No	No	No		No	No
31635	BRONCHOSCOPY W REMOVAL FOREIGN BODY		No	No	No	No		No	No
31636	BRNCHSC W PLACEMENT BRNCL STENT 1ST BRONCHUS		No	No	No	No		No	No
31637	BRONCHOSCOPY EACH MAJOR BRONCHUS STENTED		No	No	No	No		No	No
31638	BRNCHSC REVJ TRACHEAL BRNCL STENT INS PREV SESS		No	No	No	No		No	No
31640	BRONCHOSCOPY W EXCISION TUMOR		No	No	No	No		No	No
31641	BRNCHSC W DSTRJ TUM RELIEF STENOSIS OTH THN EXC		No	No	No	No		No	No
31643	BRNCHSC W PLMT CATH INTRCV RADIOELMNT APPL		No	No	No	No		No	No
31645	BRONCHOSCOPY W THER ASPIR TRACHBRNCL TREE 1ST		No	No	No	No		No	No
31646	BRONCHOSCOPY W THER ASPIR TRACHBRNCL TREE SBSQ		No	No	No	No		No	No
31647	BRNCHSC OCCLUSION AND INSERT BRONCH VALVE INIT LOBE		Not Cov	Not Cov	Not Cov	Not Cov		No	No
31648	BRNCHSC REMOVAL BRONCHIAL VALVE INITIAL		Not Cov	Not Cov	Not Cov	Not Cov		No	No
31649	BRNCHSC REMOVAL BRONCHIAL VALVE EA ADDL		Not Cov	Not Cov	Not Cov	Not Cov		No	No
31651	BRNCHSC OCCLUSION AND INSERT BRONCH VALVE ADDL LOBE		Not Cov	Not Cov	Not Cov	Not Cov		No	No
31652	BRNCHSC EBUS GUIDED SAMPL 1 2 NODE STATION STRUX		No	No	No	No		No	No
31653	BRNCHSC EBUS GUIDED SAMPL 3 OR GRT NODE STATION STRUX		No	No	No	No		No	No
31654	BRNCHSC TNDSC EBUS DX TX INTERVENTION PERPH LES		No	No	Not Cov	No		No	No
31660	BRONCHOSCOPIC THERMOPLASTY ONE LOBE		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
31661	BRONCHOSCOPIC THERMOPLASTY 2 OR GRT LOBES		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
31717	CATHETERIZATION W BRONCHIAL BRUSH BIOPSY		No	No	No	No		No	No
31720	CATHETER ASPIRATION NASOTRACHEAL SPX		No	No	No	No		No	No
31725	CATH ASPIR TRACHEOBRNCL FIBERSCOPE BEDSIDE SPX		Not Cov	No	Not Cov	No		No	No
31730	TTRACH INTRO NDL WIRE DIL STENT TUBE O2 THER		No	No	No	No		No	No

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DOS Effective 10/1/19; Posted 10/30/19

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
31750	TRACHEOPLASTY CERVICAL		No	No	No	No	No	No	
31755	TRACHEOPLASTY TRACHEOPHARYNGEAL FSTLJ EA STG		No	No	No	No	No	No	
31760	TRACHEOPLASTY INTRATHORACIC		Not Cov	No	Not Cov	No	No	No	
31766	CARINAL RECONSTRUCTION		Not Cov	No	Not Cov	No	No	No	
31770	BRONCHOPLASTY GRAFT REPAIR		Not Cov	No	Not Cov	No	No	No	
31775	BRONCHOPLASTY EXCISION STENOSIS AND ANASTOMOSIS		Not Cov	No	Not Cov	No	No	No	
31780	EXCISION TRACHEAL STENOSIS AND ANASTOMOSIS CERVICA		Not Cov	No	Not Cov	No	No	No	
31781	EXC TRACHEAL STENOSIS AND ANAST CERVICOTHORACIC		Not Cov	No	Not Cov	No	No	No	
31785	EXCISION TRACHEAL TUMOR CARCINOMA CERVICAL		No	No	Not Cov	No	No	No	
31786	EXCISION TRACHEAL TUMOR CARCINOMA THORACIC		Not Cov	No	Not Cov	No	No	No	
31800	SUTURE TRACHEAL WOUND INJURY CERVICAL		Not Cov	No	Not Cov	No	No	No	
31805	SUTURE TRACHEAL WOUND INJURY INTRATHORACIC		Not Cov	No	Not Cov	No	No	No	
31820	SURG CLSR TRACHEOSTOMY FISTULA W O PLASTIC RPR		No	No	No	No	No	No	
31825	SURG CLSR TRACHEOSTOMY FISTULA W PLASTIC RPR		No	No	No	No	No	No	
31830	REVISION TRACHEOSTOMY SCAR		No	No	No	No	No	No	
31899	UNLISTED PROCEDURE TRACHEA BRONCHI		Yes	Yes	Not Cov	Yes	Yes	Yes	
32035	THORACOSTOMY W RIB RESECTION EMPYEMA		Not Cov	No	Not Cov	No	No	No	
32036	THORACOSTOMY OPEN FLAP DRAINAGE EMPYEMA		Not Cov	No	Not Cov	No	No	No	
32096	THORACTOMY W DX BX LUNG INFILTRATE UNILATERAL		Not Cov	No	Not Cov	No	No	No	
32097	THORACTOMY W DX BX LUNG NODULE MASS UNILATERAL		Not Cov	No	Not Cov	No	No	No	
32098	THORACOTOMY W BIOPSY OF PLEURA		Not Cov	No	Not Cov	No	No	No	
32100	THORACOTOMY WITH EXPLORATION		Not Cov	No	Not Cov	No	No	No	
32110	THORCOM CTRL TRAUMTC HEMRRG AND RPR LNG TEAR		Not Cov	No	Not Cov	No	No	No	
32120	THORACOTOMY POSTOPERATIVE COMPLICATIONS		Not Cov	No	Not Cov	No	No	No	
32124	THORACOTOMY OPN INTRAPLEURAL PNEUMONOLYSIS		Not Cov	No	Not Cov	No	No	No	
32140	THORCOM W REMOVAL OF CYST		Not Cov	No	Not Cov	No	No	No	
32141	THORACOTOMY W RESECTION BULLAE		Not Cov	No	Not Cov	No	No	No	
32150	THORCOM W RMVL INTRAPLEURAL FB FIBRIN DEP		Not Cov	No	Not Cov	No	No	No	
32151	THORCOM W RMVL IPUL FB		Not Cov	No	Not Cov	No	No	No	
32160	THORACOTOMY W CARDIAC MASSAGE		Not Cov	No	Not Cov	No	No	No	
32200	PNEUMONOSTOMY W OPEN DRAINAGE ABSCESS CYST		Not Cov	No	Not Cov	No	No	No	
32215	PLEURAL SCARIFICATION REPEAT PNEUMOTHORAX		Not Cov	No	Not Cov	No	No	No	
32220	DECORTICATION PULMONARY TOTAL SEPARATE PROCEDURE		Not Cov	No	Not Cov	No	No	No	
32225	DECORTICATION PULMONARY PARTIAL SEPARATE PROC		Not Cov	No	Not Cov	No	No	No	
32310	PLEURECTOMY PARIETAL SEPARATE PROCEDURE		Not Cov	No	Not Cov	No	No	No	
32320	DECORTICATION AND PARIETAL PLEURECTOMY		Not Cov	No	Not Cov	No	No	No	
32400	BIOPSY PLEURA PERCUTANEOUS NEEDLE		No	No	No	No	No	No	
32405	BIOPSY LUNG MEDIASTINUM PERCUTANEOUS NEEDLE		No	No	No	No	No	No	
32440	REMOVAL OF LUNG PNEUMONECTOMY		Not Cov	No	Not Cov	No	No	No	

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Code	Code Description	Comments	Apple Health & IMC Medical				IMC / BHSO (Mental Health covered svcs)	Medicare	Market Place
			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
32442	REMOVAL LUNG PNEUMONECTOMY RESXN SGMNT TRACHEA		Not Cov	No	Not Cov	No		No	No
32445	REMOVAL LUNG PNEUMONECTOMY EXTRAPLEURAL		Not Cov	No	Not Cov	No		No	No
32480	RMVL LUNG OTHER THAN PNEUMONECTOMY 1 LOBE LOBECT		Not Cov	No	Not Cov	No		No	No
32482	RMVL LUNG OTHER THAN PNEUMONECT 2 LOBES BILOBEC		Not Cov	No	Not Cov	No		No	No
32484	RMVL LUNG OTHER THAN PNEUMONECT 1 SEGMENTECTOMY		Not Cov	No	Not Cov	No		No	No
32486	RMVL LUNG XCP TOT PNEUMONECTOMY SLEEVE LOBECTOMY		Not Cov	No	Not Cov	No		No	No
32488	RMVL LUNG OTHER THAN PNUMEC COMPLETION PNUMEC		Not Cov	No	Not Cov	No		No	No
32491	RMVL LUNG OTH THN PNUMEC RESXN-PLCTJ EMPHY LUNG		Not Cov	Yes	Not Cov	No		Yes	Yes
32501	RESCJ AND BRONCHOPLASTY PFRMD TM LOBEC SGMECTOMY		Not Cov	No	Not Cov	No		No	No
32503	RESCJ APICAL LUNG TUMOR W O CHEST WALL RCNSTJ		Not Cov	No	Not Cov	No		No	No
32504	RESCJ APICAL LUNG TUMOR W CHEST WALL RCNSTJ		Not Cov	No	Not Cov	No		No	No
32505	THORACOTOMY W THERAPEUTIC WEDGE RESEXN INITIAL		Not Cov	No	Not Cov	No		No	No
32506	THORACOTOMY W THERAP WEDGE RESEXN ADDL IPSILATRL		Not Cov	No	Not Cov	No		No	No
32507	THORACOTOMY W DX WEDGE RESEXN AND ANATOM LUNG RESE		Not Cov	No	Not Cov	No		No	No
32540	EXTRAPLEURAL ENUCLEATION EMPYEMA EMPYEMECTOMY		Not Cov	No	Not Cov	No		No	No
32550	INSERTION INDWELLING TUNNELED PLEURAL CATHETER		No	No	No	No		No	No
32551	TUBE THORACOSTOMY INCLUDES WATER SEAL		No	No	Not Cov	No		No	No
32552	RMVL NDWELLG TUNNELED PLEURAL CATHETER W CUFF		No	No	No	No		No	No
32553	PLMT NTRSTL DEV RADJ THX GID PRQ INTRATHRC 1 MLT		No	No	No	No		No	No
32554	THORACENTESIS NEEDLE CATH PLEURA W O IMAGING		No	No	No	No		No	No
32555	THORACENTESIS NEEDLE CATH PLEURA W IMAGING		No	No	No	No		No	No
32556	PERQ DRAINAGE PLEURA INSERT CATH W O IMAGING		No	No	No	No		No	No
32557	PERQ DRAINAGE PLEURA INSERT CATH W IMAGING		No	No	No	No		No	No
32560	INSTLJ VIA CHEST TUBE CATH AGENT FOR PLEURODESIS		No	No	Not Cov	No		No	No
32561	INSTLJ VIA CH TUBE CATH AGENT FBRNLYSIS 1ST DAY		No	No	Not Cov	No		No	No
32562	INSTLJ CH TUBE CATH AGENT FBRNLYSIS SBSQ DAY		No	No	Not Cov	No		No	No
32601	THORSC DX LUNGS PERICAR MED PLEURAL SPACE W O BX		No	No	Not Cov	No		No	No
32604	THORACOSCOPY DX PERICARDIAL SAC W BIOPSY SPX		No	No	Not Cov	No		No	No
32606	THORACOSCOPY DX MEDIASTINAL SPACE W BIOPSY SPX		No	No	Not Cov	No		No	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
32607	THORACOSCOPY W DX BX OF LUNG INFILTRATE UNILATRL		No	No	Not Cov	No		No	No
32608	THORACOSCOPY W DX BX OF LUNG NODULES UNILATRL		No	No	Not Cov	No		No	No
32609	THORACOSCOPY WITH BIOPSYIES OF PLEURA		No	No	Not Cov	No		No	No
32650	THORACOSCOPY W PLEURODESIS		No	No	Not Cov	No		No	No
32651	THORACOSCOPY W PARTIAL PULMONARY DECORTICATION		No	No	Not Cov	No		No	No
32652	THRSC TOT PULM DCRTCTJ INTRAPLEURAL PNEUMONOLSS		Not Cov	No	Not Cov	No		No	No
32653	THORACOSCOPY RMVL INTRAPLEURAL FB FIBRIN DEPOSIT		No	No	Not Cov	No		No	No
32654	THORACOSCOPY CONTROL TRAUMATIC HEMORRHAGE		No	No	Not Cov	No		No	No
32655	THORACOSCOPY W RESECTION BULLAE W WO PLEURAL PX		No	No	Not Cov	No		No	No
32656	THORACOSCOPY W PARIETAL PLEURECTOMY		No	No	Not Cov	No		No	No
32658	THORACOSCOPY W RMVL CLOT FB FROM PERICARDIAL SAC		No	No	Not Cov	No		No	No
32659	THRSC CRTJ PRCRD WINDOW PRTL RESCJ PRCRD SAC		No	No	Not Cov	No		No	No
32661	THORACOSCOPY W EXC PERICARDIAL CYST TUMOR MASS		No	No	Not Cov	No		No	No
32662	THORACOSCOPY W EXC MEDIASTINAL CYST TUMOR MASS		No	No	Not Cov	No		No	No
32663	THORACOSCOPY W LOBECTOMY SINGLE LOBE		Not Cov	No	Not Cov	No		No	No
32664	THORACOSCOPY W THORACIC SYMPATHECTOMY		No	No	Not Cov	No		No	No
32665	THORACOSCOPY W ESOPHAGOMYOTOMY HELLER TYPE		Not Cov	No	Not Cov	No		No	No
32666	THORACOSCOPY W THERA WEDGE RESEXN INITIAL UNILAT		Not Cov	No	Not Cov	No		No	No
32667	THORACOSCOPY W THERA WEDGE RESEXN ADDL IPSILATRL		Not Cov	No	Not Cov	No		No	No
32668	THORACOSCOPY W DX WEDGE RESEXN ANATO LUNG RESEXN		Not Cov	No	Not Cov	No		No	No
32669	THORACOSCOPY W SEGMENTECTOMY		Not Cov	No	Not Cov	No		No	No
32670	THORACOSCOPY W BILOBECTOMY		Not Cov	No	Not Cov	No		No	No
32671	THORACOSCOPY W PNEUMONECTOMY		Not Cov	No	Not Cov	No		No	No
32672	THORACOSCOPY W RESEXN-PLICAJ EMPHYSEMA LUNG UNIL		Not Cov	No	Not Cov	No		No	No
32673	THORACOSCOPY RESEXN THYMUS UNI BILATERAL		Not Cov	No	Not Cov	No		No	No
32674	THORCOSCPY W MEDIASTINL AND REGIONL LYMPHDENECTOMY		Not Cov	No	Not Cov	No		No	No
32701	THORAX STEREOTACTIC RADIATION TARGET W TX COURSE		No	No	Not Cov	No		No	No
32800	REPAIR LUNG HERNIA THROUGH CHEST WALL		Not Cov	No	Not Cov	No		No	No
32810	CLSR CH WALL FLWG OPN FLAP DRG EMPYEEMA		Not Cov	No	Not Cov	No		No	No
32815	OPEN CLOSURE MAJOR BRONCHIAL FISTULA		Not Cov	No	Not Cov	No		No	No
32820	MAJOR RECONSTRUCTION CHEST WALL POSTTRAUMATIC		Not Cov	No	Not Cov	No		No	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
32850	DONOR PNEUMONECTOMY FROM CADAVER DONOR		Not Cov	No	Not Cov	No		No	No
32851	LUNG TRANSPLANT 1 W O CARDIOPULMONARY BYPASS		Not Cov	No	Not Cov	No		No	No
32852	LUNG TRANSPLANT 1 W CARDIOPULMONARY BYPASS		Not Cov	No	Not Cov	No		No	No
32853	LUNG TRANSPLANT 2 W O CARDIOPULMONARY BYPASS		Not Cov	No	Not Cov	No		No	No
32854	LUNG TRANSPLANT 2 W CARDIOPULMONARY BYPASS		Not Cov	No	Not Cov	No		No	No
32855	BKBENCH PREPJ CADAVER DONOR LUNG ALLOGRAFT UNI		Not Cov	No	Not Cov	No		No	No
32856	BKBENCH PREPJ CADAVER DONOR LUNG ALLOGRAFT BI		Not Cov	No	Not Cov	No		No	No
32900	RESECTION RIBS EXTRAPLEURAL ALL STAGES		Not Cov	No	Not Cov	No		No	No
32905	THORACOPLASTY SCHEDE TYPE EXTRAPLEURAL		Not Cov	No	Not Cov	No		No	No
32906	THORACOP SCHEDE TYP XTRPLEURAL CLSR BRNCPLR FSTL		Not Cov	No	Not Cov	No		No	No
32940	PNEUMONOLYSIS XTRPRIOSTEAL W FILLING PACKING PX		Not Cov	No	Not Cov	No		No	No
32960	PNEUMOTHORAX THER INTRAPLEURAL INJECTION AIR		No	No	No	No		No	No
32994	ABLATION THER 1 PLUS PULM TUMORS PERQ CRYOABLATION		No	No	Not Cov	No		Yes	No
32997	TOTAL LUNG LAVAGE UNILATERAL		Not Cov	No	Not Cov	No		No	No
32998	ABLATION THER 1 PLUS PULM TUMORS PERQ RADIOFREQUENCY		Not Cov	Not Cov	Not Cov	Not Cov		No	No
32999	UNLISTED PROCEDURE LUNGS AND PLEURA		Yes	Yes	Not Cov	Yes		Yes	Yes
33010	PERICARDIOCENTESIS INITIAL		No	No	No	No		No	No
33011	PERICARDIOCENTESIS SUBSEQUENT		No	No	No	No		No	No
33015	TUBE PERICARDIOSTOMY		Not Cov	No	Not Cov	No		No	No
33020	PERICARDIOTOMY REMOVAL CLOT FOREIGN BODY PRIMARY		Not Cov	No	Not Cov	No		No	No
33025	CRTJ PERICARDIAL WINDOW PRTL RESECT W DRG BX		Not Cov	No	Not Cov	No		No	No
33030	PRICARDIECTOMY STOT COMPL W O CARDPULM BYPASS		Not Cov	No	Not Cov	No		No	No
33031	PRICARDIECTOMY STOT COMPL W CARDPULM BYPASS		Not Cov	No	Not Cov	No		No	No
33050	RESECTION PERICARDIAL CYST TUMOR		Not Cov	No	Not Cov	No		No	No
33120	EXC INTRACARDIAC TUMOR RESCJ CARDIOPULMONARY BYP		Not Cov	No	Not Cov	No		No	No
33130	RESECTION EXTERNAL CARDIAC TUMOR		Not Cov	No	Not Cov	No		No	No
33140	TRANSMYOCARDIAL LASER REVASCULAR THORACOTOMY SPX		Not Cov	Not Cov	Not Cov	Not Cov		No	No
33141	TRANSMYOCRD LASER REVSC PFRMD TM OTH OPN CAR PX		Not Cov	Not Cov	Not Cov	Not Cov		No	No
33202	INSERTION EPICARDIAL ELECTRODE OPEN		Not Cov	No	Not Cov	No		No	No
33203	INSERTION EPICARDIAL ELECTRODE ENDOSCOPIC		Not Cov	No	Not Cov	No		No	No
33206	INS NEW RPLCMT PRM PACEMAKR W TRANS ELTRD ATRIAL		Yes	Yes	Yes	Yes		Yes	Yes
33207	INS NEW RPLC PRM PACEMAKER W TRANSV ELTRD VENTR		Yes	Yes	Yes	Yes		Yes	Yes

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
33208	INS NEW RPLCMT PRM PM W TRANSV ELTRD ATRIAL AND VENT		Yes	Yes	Yes	Yes		Yes	Yes
33210	INSJ RPLCMT TEMP TRANSVNS 1CHMBR ELTRD PM CATH		No	No	No	No		No	No
33211	INSJ RPLCMT TEMP TRANSVNS 2CHMBR PACG ELTRDS SPX		No	No	No	No		No	No
33212	INS PM PLS GEN W EXIST SINGLE LEAD		No	No	No	No		Yes	No
33213	INS PACEMAKER PULSE GEN ONLY W EXIST DUAL LEADS		No	No	No	No		Yes	No
33214	UPG PACEMAKER SYS CONVERT 1CHMBR SYS 2CHMBR SYS		No	No	No	No		Yes	No
33215	RPSG PREV IMPLTED PM DFB R ATR R VENTR ELECTRODE		No	No	No	No		No	No
33216	INSJ 1 TRANSVNS ELTRD PERM PACEMAKER IMPLTBL DFB		No	No	No	No		No	No
33217	INSJ 2 TRANSVNS ELTRD PERM PACEMAKER IMPLTBL DFB		No	No	No	No		No	No
33218	RPR 1 TRANSVNS ELTRD PRM PM PACING IMPLNTBL DFB		No	No	No	No		No	No
33220	RPR 2 TRANSVNS ELECTRODES PRM PM IMPLANTABLE DFB		No	No	No	No		No	No
33221	INS PACEMAKER PULSE GEN ONLY W EXIST MULT LEADS		No	No	Not Cov	No		Yes	No
33222	RELOCATION OF SKIN POCKET FOR PACEMAKER		No	No	No	No		No	No
33223	RELOCATE SKIN POCKET IMPLANTABLE DEFIBRILLATOR		No	No	No	No		No	No
33224	INSJ ELTRD CAR VEN SYS ATTCH PREV PM DFB PLS GEN		Yes	Yes	Yes	No		Yes	Yes
33225	INSJ ELTRD CAR VEN SYS TM INSJ DFB PM PLS GEN		Yes	Yes	Yes	No		Yes	Yes
33226	RPSG PREV IMPLTED CAR VEN SYS L VENTR ELTRD		No	No	No	No		No	No
33227	REMLV PERM PM PLSE GEN W REPL PLSE GEN SNGL LEAD		No	No	Not Cov	No		Yes	No
33228	REMLV PERM PM PLS GEN W REPL PLSE GEN 2 LEAD SYS		No	No	Not Cov	No		Yes	No
33229	REMLV PERM PM PLS GEN W REPL PLSE GEN MULT LEAD		No	No	Not Cov	No		Yes	No
33230	INSJ IMPLNTBL DEFIB PULSE GEN W EXIST DUAL LEADS		Yes	Yes	Not Cov	No		Yes	Yes
33231	INSJ IMPLNTBL DEFIB PULSE GEN W EXIST MULTILEADS		Yes	Yes	Not Cov	No		Yes	Yes
33233	REMOVAL PERMANENT PACEMAKER PULSE GENERATOR ONLY		No	No	No	No		No	No
33234	RMVL TRANSVNS PM ELTRD 1 LEAD SYS ATR VENTR		No	No	No	No		No	No
33235	RMVL TRANSVNS PM ELTRD DUAL LEAD SYS		No	No	No	No		No	No
33236	RMVL PRM EPICAR PM AND ELTRDS THORCOM 1 LEAD SYS		Not Cov	No	Not Cov	No		No	No
33237	RMVL PRM EPICAR PM AND ELTRDS THORCOM DUAL LEAD SY		Not Cov	No	Not Cov	No		No	No
33238	RMVL PRM TRANSVENOUS ELECTRODE THORACOTOMY		Not Cov	No	Not Cov	No		No	No
33240	INSJ IMPLNTBL DEFIB PULSE GEN W 1 EXISTING LD		Yes	Yes	Yes	No		Yes	Yes

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
33241	REMOVAL IMPLANTABLE DEFIB PULSE GENERATOR ONLY		No	No	No	No		No	No
33243	RMVL 1 DUAL CHAMBER DEFIB ELECTRODE BY THORACOM		Not Cov	No	Not Cov	No		No	No
33244	RMVL1 DUAL CHMBR IMPLTBL DFB ELTRD TRNSVNS XTRJ		No	No	Not Cov	No		No	No
33249	INSJ RPLCMT PERM DFB W TRNSVNS LDS 1 DUAL CHMBR		Yes	Yes	Not Cov	Yes		Yes	Yes
33250	ABLATION ARRHYTHMOGENIC FOCI PATHWAY W O BYPASS		Not Cov	No	Not Cov	No		No	No
33251	ABLATION ARRHYTHMOGENIC FOCI PATHWAY W BYPASS		Not Cov	Yes	Not Cov	No		Yes	Yes
33254	ABLATION AND RECONSTRUCTION ATRIA LIMITED		Not Cov	Yes	Not Cov	No		Yes	Yes
33255	ABLATION AND RCNSTJ ATRIA EXTNSV W O BYPASS		Not Cov	No	Not Cov	No		No	No
33256	ABLATION AND RCNSTJ ATRIA EXTNSV W BYPASS		Not Cov	No	Not Cov	No		No	No
33257	ATRIA ABLATE AND RCNSTJ W OTHER PROCEDURE LIMITE		Not Cov	No	Not Cov	No		No	No
33258	ATRIA ABLTJ AND RCNSTJ W OTHER PX EXTENSIV W O BYP		Not Cov	No	Not Cov	No		No	No
33259	ATRIA ABLTJ AND RCNSTJ W OTHER PX EXTEN W BYPASS		Not Cov	No	Not Cov	No		No	No
33261	OPRATIVE ABLTJ VENTR ARRHYTHMOGENIC FOC W BYPASS		Not Cov	Yes	Not Cov	No		Yes	Yes
33262	RMVL IMPLTBL DFB PLSE GEN W REPL PLSE GEN 1 LEAD		No	No	Not Cov	No		Yes	No
33263	RMVL IMPLTBL DFB PLSE GEN W RPLCMT PLSE GEN 2 LD		No	No	Not Cov	No		Yes	No
33264	RMVL IMPLTBL DFB PLS GEN W RPLCMT PLS GEN MLT LD		No	No	Not Cov	No		Yes	No
33265	NDSC ABLATION AND RCNSTJ ATRIA LIMITED W O BYPAS		Not Cov	Yes	Not Cov	No		Yes	Yes
33266	NDSC ABLATION AND RCNSTJ ATRIA EXTEN W O BYPASS		Not Cov	Yes	Not Cov	No		Yes	Yes
33270	INS RPLCMNT PERM SUBQ IMPLTBL DFB W SUBQ ELTRD		Yes	Yes	Not Cov	Yes		Yes	Yes
33271	INSJ OF SUBQ IMPLANTABLE DEFIBRILLATOR ELECTRODE		No	No	Not Cov	No		No	No
33272	RMVL OF SUBQ IMPLANTABLE DEFIBRILLATOR ELECTRODE		No	No	Not Cov	No		No	No
33273	REPOS PREVIOUSLY IMPLANTED SUBQ IMPLANTABLE DFB		No	No	No	No		No	No
33274	TCAT INSJ RPL PERM LEADLESS PACEMAKER RV W IMG		Yes	Yes	Not Cov	Yes		Yes	Yes
33275	TCAT REMOVAL PERM LEADLESS PACEMAKER R VENTR		Yes	Yes	Not Cov	Yes		Yes	Yes
33285	INSERTION SUBQ CARDIAC RHYTHM MONITOR W PRGRMG		No	No	Not Cov	No		No	No
33286	REMOVAL SUBCUTANEOUS CARDIAC RHYTHM MONITOR		No	No	Not Cov	No		No	No
33289	TCAT IMPL WRLS P-ART PRS SNR L-T HEMODYN MNTR		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
33300	REPAIR CARDIAC WOUND W O BYPASS		Not Cov	No	Not Cov	No		No	No
33305	REPAIR CARDIAC WOUND W CARDIOPULMONARY BYPASS		Not Cov	No	Not Cov	No		No	No
33310	CARDIOT EXPL W RMVL FB ATR VENTR THRMB W O BYP		Not Cov	No	Not Cov	No		No	No
33315	CARDIOT EXPL RMVL FB ATR VENTR THRMB CARD BYP		Not Cov	No	Not Cov	No		No	No
33320	SUTR RPR AORTA GRT VSL W O SHUNT CARD BYP		Not Cov	No	Not Cov	No		No	No
33321	SUTR RPR AORTA GREAT VESSEL W SHUNT BYPASS		Not Cov	No	Not Cov	No		No	No
33322	SUTURE REPAIR AORTA GREAT VESSEL W BYPASS		Not Cov	No	Not Cov	No		No	No
33330	INSJ GRAFT AORTA GREAT VESSEL W O SHUNT BYPASS		Not Cov	No	Not Cov	No		No	No
33335	INSJ GRAFT AORTA GREAT VESSEL W BYPASS		Not Cov	No	Not Cov	No		No	No
33340	PERQ CLSR TCAT L ATR APNDGE W ENDOCARDIAL IMPLNT		Not Cov	Not Cov	Not Cov	Not Cov		No	No
33361	REPLACE AORTIC VALVE PERQ FEMORAL ARTRY APPROACH		Not Cov	No	Not Cov	No		No	No
33362	REPLACE AORTIC VALVE OPENFEMORAL ARTERY APPROACH		Not Cov	No	Not Cov	No		No	No
33363	REPLACE AORTIC VALVE OPEN AXILLRY ARTRY APPROACH		Not Cov	No	Not Cov	No		No	No
33364	REPLACE AORTIC VALVE OPEN ILIAC ARTERY APPROACH		Not Cov	No	Not Cov	No		No	No
33365	REPLACE AORTIC VALVE OPEN TRANSAORTIC APPROACH		Not Cov	No	Not Cov	No		No	No
33366	TRANSCATHETER TRANSAPICAL REPLACEMT AORTIC VALVE		No	No	Not Cov	No		No	No
33367	REPLACE AORTIC VALVE W BYP PRQ ART VENOUS APRCH		Not Cov	No	Not Cov	No		No	No
33368	REPLACE AORTIC VALVE W BYP OPEN ART VENOUS APRCH		Not Cov	No	Not Cov	No		No	No
33369	REPLACE AORTA VALVE W BYP CNTRL ART VENOUS APRCH		Not Cov	No	Not Cov	No		No	No
33390	VALVULOPLASTY AORTIC VALVE OPEN CARD BYP SIMPLE		No	No	Not Cov	No		No	No
33391	VALVULOPLASTY AORTIC VALVE OPEN CARD BYP COMPLEX		No	No	Not Cov	No		No	No
33404	CONSTRUCTION APICAL-AORTIC CONDUIT		Not Cov	No	Not Cov	No		No	No
33405	RPLCMT PROST AORTIC VALVE OPEN XCP HOMOGRF STENT		Not Cov	No	Not Cov	No		No	No
33406	RPLCMT AORTIC VALVE OPN ALLOGRAFT VALVE FREEHAND		Not Cov	No	Not Cov	No		No	No
33410	RPLCMT AORTIC VALVE OPN W STENTLESS TISSUE VALVE		Not Cov	No	Not Cov	No		No	No
33411	RPLCMT AORTIC VALVE ANNULUS ENLGMENT NONC SINUS		Not Cov	No	Not Cov	No		No	No
33412	REPLACEMENT AORTIC VALVE KONNO PROCEDURE		Not Cov	No	Not Cov	No		No	No
33413	REPLACEMENT AORTIC AND PULMON VALVES ROSS PROCEDURE		Not Cov	No	Not Cov	No		No	No

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			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
33414	RPR VENTR O F TRC OBSTR CJ PATCH ENLGMNT O F TRC		Not Cov	No	Not Cov	No		No	No
33415	RESECTION INCISION SUBVALVULAR TISSUE		Not Cov	No	Not Cov	No		No	No
33416	VENTRICULOMYOTOMY-MYECTOMY		Not Cov	No	Not Cov	No		No	No
33417	AORTOPLASTY SUPRAVALVULAR STENOSIS		Not Cov	No	Not Cov	No		No	No
33418	TCAT MITRAL VALVE REPAIR INITIAL PROSTHESIS		Not Cov	No	Not Cov	No		Not Cov	No
33419	TCAT MITRAL VALVE REPAIR ADDL PROSTHESIS		Not Cov	No	Not Cov	No		Not Cov	No
33420	VALVOTOMY MITRAL VALVE CLOSED HEART		Not Cov	No	Not Cov	No		No	No
33422	VALVOTOMY MITRAL VALVE OPEN HEART W BYPASS		Not Cov	No	Not Cov	No		No	No
33425	VALVULOPLASTY MITRAL VALVE W CARDIAC BYPASS		Not Cov	No	Not Cov	No		No	No
33426	VLVP MITRAL VALVE W CARD BYP W PROSTC RING		Not Cov	No	Not Cov	No		No	No
33427	VLVP MITRAL VALVE W BYPASS RAD RCNSTJ W WO RING		Not Cov	No	Not Cov	No		No	No
33430	REPLACEMENT MITRAL VALVE W CARDIOPULMONARY BYP		Not Cov	No	Not Cov	No		No	No
33440	RPLCMT AORTIC VALVE BY TLCJ AUTOL PULM VALVE		Yes	Yes	Not Cov	Yes		Yes	Yes
33460	VALVECTOMY TRICUSPID VALVE W CARDIOPULMONARY BYP		Not Cov	No	Not Cov	No		No	No
33463	VALVULOPLASTY TRICUSPID VALVE W O RING INSERTION		Not Cov	No	Not Cov	No		No	No
33464	VALVULOPLASTY TRICUSPID VALVE W RING INSERTION		Not Cov	No	Not Cov	No		No	No
33465	REPLACEMENT TRICUSPID VALVE W CARD BYPASS		Not Cov	No	Not Cov	No		No	No
33468	TRICUSPID VALVE RPSG AND PLCTJ EBSTEIN ANOMALY		Not Cov	No	Not Cov	No		No	No
33470	VALVOTOMY PULMONARY VALVE CLSD HEART TRANSVENTR		Not Cov	No	Not Cov	No		No	No
33471	VALVOTOMY PULM VALVE CLSD HEART VIA PULM ARTERY		Not Cov	No	Not Cov	No		No	No
33474	VALVOTOMY PULMONARY VALVE OPEN HEART W BYPASS		Not Cov	No	Not Cov	No		No	No
33475	REPLACEMENT PULMONARY VALVE		Not Cov	No	Not Cov	No		No	No
33476	R VENTRIC RESCJ INFUND STEN W WO COMMISSUROTOMY		Not Cov	No	Not Cov	No		No	No
33477	TCAT PULMONARY VALVE IMPLANTATION PRQ APPROACH		Not Cov	No	Not Cov	No		No	No
33478	OUTFLOW TRACT AGMNTJ W WO COMMISSUR INFUND RESCJ		Not Cov	No	Not Cov	No		No	No
33496	RPR NON-STRUCT PROSTC VALVE DYSFUNCTION W BYPASS		Not Cov	No	Not Cov	No		No	No
33500	RPR CORONARY AV ARTERIOCAR CHMBR FSTL W BYPASS		Not Cov	No	Not Cov	No		No	No
33501	RPR CORONARY AV ARTERIOCAR CHMBR FSTL W O BYPASS		Not Cov	No	Not Cov	No		No	No
33502	RPR ANOM CORONARY ART PULM ART ORIGIN LIGATION		Not Cov	No	Not Cov	No		No	No
33503	RPR ANOM CORONARY ARTERY PULM ART ORIGIN GRAFT		Not Cov	No	Not Cov	No		No	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
33504	RPR ANOM CORONARY ART PULM ART ORIGIN GRF W BYP		Not Cov	No	Not Cov	No		No	No
33505	RPR ANOM CORON ART W CONSTJ INTRAPULM ART TUNNEL		Not Cov	No	Not Cov	No		No	No
33506	RPR ANOM CORONARY ART FROM PULM ART TO AORTA		Not Cov	No	Not Cov	No		No	No
33507	RPR ANOM AORTIC ORIGIN CORONARY ART UNROOF TLCJ		Not Cov	No	Not Cov	No		No	No
33508	NDSC SURG W VIDEO-ASSISTED HARVEST VEIN CABG		No	No	Not Cov	No		No	No
33510	CORONARY ARTERY BYPASS 1 CORONARY VENOUS GRAFT		Not Cov	No	Not Cov	No		No	No
33511	CORONARY ARTERY BYPASS 2 CORONARY VENOUS GRAFTS		Not Cov	No	Not Cov	No		No	No
33512	CORONARY ARTERY BYPASS 3 CORONARY VENOUS GRAFTS		Not Cov	No	Not Cov	No		No	No
33513	CORONARY ARTERY BYPASS 4 CORONARY VENOUS GRAFTS		Not Cov	No	Not Cov	No		No	No
33514	CORONARY ARTERY BYPASS 5 CORONARY VENOUS GRAFTS		Not Cov	No	Not Cov	No		No	No
33516	CORONARY ARTERY BYPASS 6 PLUS CORONARY VENOUS GRAFT		Not Cov	No	Not Cov	No		No	No
33517	CORONARY ARTERY BYP W VEIN AND ARTERY GRAFT 1 VEIN		Not Cov	No	Not Cov	No		No	No
33518	CORONARY ARTERY BYP W VEIN AND ARTERY GRAFT 2 VEIN		Not Cov	No	Not Cov	No		No	No
33519	CORONARY ARTERY BYP W VEIN AND ARTERY GRAFT 3 VEIN		Not Cov	No	Not Cov	No		No	No
33521	CORONARY ARTERY BYP W VEIN AND ARTERY GRAFT 4 VEIN		Not Cov	No	Not Cov	No		No	No
33522	CORONARY ARTERY BYP W VEIN AND ARTERY GRAFT 5 VEIN		Not Cov	No	Not Cov	No		No	No
33523	CORONARY ARTERY BYP W VEIN AND ARTERY GRAFT 6 VEIN		Not Cov	No	Not Cov	No		No	No
33530	ROPRTJ CAB VALVE PX OVER 1 MO AFTER ORIGINAL OPERJ		Not Cov	No	Not Cov	No		No	No
33533	CABG W ARTERIAL GRAFT SINGLE ARTERIAL GRAFT		Not Cov	No	Not Cov	No		No	No
33534	CABG W ARTERIAL GRAFT TWO ARTERIAL GRAFTS		Not Cov	No	Not Cov	No		No	No
33535	CABG W ARTERIAL GRAFT THREE ARTERIAL GRAFTS		Not Cov	No	Not Cov	No		No	No
33536	CABG W ARTERIAL GRAFT FOUR OR GRT ARTERIAL GRAFTS		Not Cov	No	Not Cov	No		No	No
33542	MYOCARDIAL RESECTION		Not Cov	No	Not Cov	No		No	No
33545	RPR POSTINFRCJ VENTRICULAR SEPTAL DEFECT		Not Cov	No	Not Cov	No		No	No
33548	SURG VENTRICULAR RSTRJ PX W PROSTC PATCH PFRMD		Not Cov	Not Cov	Not Cov	Not Cov		No	No
33572	CORONARY ENDARTERCOMY OPEN ANY METHOD		Not Cov	No	Not Cov	No		No	No
33600	CLOSURE ATRIOVENTRICULAR VALVE SUTURE PATCH		Not Cov	No	Not Cov	No		No	No

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33602	CLOSURE SEMILUNAR VALVE AORTIC PULM SUTURE PATCH		Not Cov	No	Not Cov	No		No	No
33606	ANAST PULMONARY ART AORTA DAMUS-KAYE-STANSEL PX		Not Cov	No	Not Cov	No		No	No
33608	RPR CAR ANOMAL XCP PULM ATRESIA VENTR SEPTL DFCT		Not Cov	No	Not Cov	No		No	No
33610	RPR CAR ANOMAL SURG ENLGMT VENTR SEPTL DFCT		Not Cov	No	Not Cov	No		No	No
33611	RPR 2 OUTLET R VNTRC W INTRAVENTR TUNNEL RPR		Not Cov	No	Not Cov	No		No	No
33612	RPR 2 OUTLET R VNTRC RPR R VENTR O F TRC OBSTR CJ		Not Cov	No	Not Cov	No		No	No
33615	RPR CAR ANOMAL CLSR SEPTL DFCT SMPL FONTAN PX		Not Cov	No	Not Cov	No		No	No
33617	RPR COMPLEX CARDIAC ANOMALY MODIFIED FONTAN PX		Not Cov	No	Not Cov	No		No	No
33619	RPR 1 VNTRC W O F OBSTR CJ AND AORTIC ARCH HYOPLAS		Not Cov	No	Not Cov	No		No	No
33620	APPLICATION RIGHT AND LEFT PULMONARY ARTERY BAND		Not Cov	No	Not Cov	No		No	No
33621	TRANSTHORACIC CATHETER INSERTION FOR STENT PLMT		No	No	Not Cov	No		No	No
33622	RECONSTRUCTION COMPLEX CARDIAC ANOMALY		Not Cov	No	Not Cov	No		No	No
33641	RPR ATRIAL SEPTAL DFCT SECUNDUM W BYP W WO PATCH		Not Cov	No	Not Cov	No		No	No
33645	DIR PTCH CLS SINUS VENOSUS W WO ANOM PUL VEN DRG		Not Cov	No	Not Cov	No		No	No
33647	RPR ATRIAL AND VENTRIC SEPTAL DFCT DIR PATCH CLS		Not Cov	No	Not Cov	No		No	No
33660	RPR INCPLT PRTL AV CANAL W WO AV VALVE RPR		Not Cov	No	Not Cov	No		No	No
33665	RPR INTRM TRANSJ AV CANAL W WO AV VALVE RPR		Not Cov	No	Not Cov	No		No	No
33670	RPR COMPL AV CANAL W WO PROSTC VALVE		Not Cov	No	Not Cov	No		No	No
33675	CLOSURE MULTIPLE VENTRICULAR SEPTAL DEFECTS		Not Cov	No	Not Cov	No		No	No
33676	CLOSURE MULTIPLE VSD W RESECTION		Not Cov	No	Not Cov	No		No	No
33677	CLOSURE MULTIPLE VSD W REMOVAL ARTERY BAND		Not Cov	No	Not Cov	No		No	No
33681	CLSR 1 VENTRICULAR SEPTAL DEFECT W WO PATCH		Not Cov	No	Not Cov	No		No	No
33684	CLSR V-SEPTL DFCT W PULM VLVT INFUND RESCJ		Not Cov	No	Not Cov	No		No	No
33688	CLSR V-SEPTAL DFCT W RMVL P-ART BAND W WO GUSSET		Not Cov	No	Not Cov	No		No	No
33690	BANDING PULMONARY ARTERY		Not Cov	No	Not Cov	No		No	No
33692	COMPL RPR TETRALOGY FALLOT W O PULM ATRESIA		Not Cov	No	Not Cov	No		No	No
33694	COMPL RPR T-FALLOT W O PULM ATRESIA TANULR PATCH		Not Cov	No	Not Cov	No		No	No
33697	COMPL RPR T-FALLOT W PULM ATRESIA		Not Cov	No	Not Cov	No		No	No
33702	RPR SINUS VALSALVA FISTULA		Not Cov	No	Not Cov	No		No	No
33710	RPR SINUS VALSALVA FISTULA W RPR V-SEPTAL DEFECT		Not Cov	No	Not Cov	No		No	No
33720	RPR SINUS VALSALVA ANEURYSM		Not Cov	No	Not Cov	No		No	No
33722	CLOSURE AORTICO-LEFT VENTRICULAR TUNNEL		Not Cov	No	Not Cov	No		No	No
33724	REPAIR ISOLATED PARTIAL PULM VENOUS RETURN		Not Cov	No	Not Cov	No		No	No

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			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
33726	REPAIR PULMONARY VENOUS STENOSIS		Not Cov	No	Not Cov	No		No	No
33730	COMPLETE RPR ANOMALOUS PULMONARY VENOUS RETURN		Not Cov	No	Not Cov	No		No	No
33732	RPR COR TRIATM SUPVALVR RING RESCJ L ATRIAL MEMB		Not Cov	No	Not Cov	No		No	No
33735	ATRIAL SEPTECTOMY SEPTOSTOMY CLOSED HEART		Not Cov	No	Not Cov	No		No	No
33736	ATRIAL SEPTECTOMY SEPTOSTOMY OPEN HEART W BYPASS		Not Cov	No	Not Cov	No		No	No
33737	ATRIAL SEPTECT SEPTOST OPN HRT W INFL OCCLUSION		Not Cov	No	Not Cov	No		No	No
33750	SHUNT SUBCLAVIAN PULMONARY ARTERY		Not Cov	No	Not Cov	No		No	No
33755	SHUNT ASCENDING AORTA PULMONARY ARTERY		Not Cov	No	Not Cov	No		No	No
33762	SHUNT DESCENDING AORTA PULMONARY ARTERY		Not Cov	No	Not Cov	No		No	No
33764	SHUNT CENTRAL W PROSTHETIC GRAFT		Not Cov	No	Not Cov	No		No	No
33766	SHUNT SUPERIOR VENA CAVA PULMONARY ART 1 LUNG		Not Cov	No	Not Cov	No		No	No
33767	SHUNT SUPERIOR VENA CAVA PULM ARTERY BOTH LUNGS		Not Cov	No	Not Cov	No		No	No
33768	ANASTOMOSIS CAVOPULMARY 2ND SUPRIOR VENA CAVA		Not Cov	No	Not Cov	No		No	No
33770	RPR TRPOS GREAT VSLS W O ENLGMNT V-SEPTL DFCT		Not Cov	No	Not Cov	No		No	No
33771	RPR TRPOS GREAT VSLS W ENLGMNT V-SEPTL DFCT		Not Cov	No	Not Cov	No		No	No
33774	RPR TRPOS GREAT VSLS ATRIAL BAFFLE PX W BYPASS		Not Cov	No	Not Cov	No		No	No
33775	RPR TRPOS GREAT VSLS ATR BAFFLE W RMVL PULM BAND		Not Cov	No	Not Cov	No		No	No
33776	RPR TRPOS GRT VSL ATR BAFFLE W CLSR V-SEPTL DFCT		Not Cov	No	Not Cov	No		No	No
33777	RPR TRPOS GRT VSL ATR BAFFLE W BYP SBPULM OBSTRC		Not Cov	No	Not Cov	No		No	No
33778	RPR TRPOS GRT VESSEL AORTIC PULMONARY ART RCNSTJ		Not Cov	No	Not Cov	No		No	No
33779	RPR TGV AORTIC PULM ART RCNSTJ W RMVL PULM BAND		Not Cov	No	Not Cov	No		No	No
33780	RPR TGV AORTIC P-ART RCNSTJ W CLSR V-SEPTL DFCT		Not Cov	No	Not Cov	No		No	No
33781	RPR TGV AORTIC P-ART RCNSTJ RPR SBPULMC OBSTRCJ		Not Cov	No	Not Cov	No		No	No
33782	A-ROOT TLCJ VSD PULM STNS RPR W O C OST RIMPLTJ		Not Cov	No	Not Cov	No		No	No
33783	A-ROOT TLCJ VSD PULM STNS RPR W RIMPLTJ C OSTIA		Not Cov	No	Not Cov	No		No	No
33786	TOTAL REPAIR TRUNCUS ARTERIOSUS		Not Cov	No	Not Cov	No		No	No
33788	REIMPLANTATION ANOMALOUS PULMONARY ARTERY		Not Cov	No	Not Cov	No		No	No
33800	AORTIC SUSPENSION TRACHEAL DECOMPRESSION SPX		Not Cov	No	Not Cov	No		No	No
33802	DIVISION ABERRANT VESSEL VASCULAR RING		Not Cov	No	Not Cov	No		No	No
33803	DIVISION ABERRANT VESSEL W REANASTOMOSIS		Not Cov	No	Not Cov	No		No	No
33813	OBLTRJ AORTOPULMONARY SEPTAL DEFECT W O BYPASS		Not Cov	No	Not Cov	No		No	No
33814	OBLTRJ AORTOPULMONARY SEPTAL DEFECT W BYPASS		Not Cov	No	Not Cov	No		No	No
33820	REPAIR PATENT DUCTUS ARTERIOSUS LIGATION		Not Cov	No	Not Cov	No		No	No
33822	RPR PATENT DUXUS ARTERIOSUS DIV UNDER 18 YR		Not Cov	No	Not Cov	No		No	No
33824	RPR PATENT DUXUS ARTERIOSUS DIV 18 YR AND OLDER		Not Cov	No	Not Cov	No		No	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
33840	EXC COARCJ AORTA W WO PDA W DIRECT ANASTOMOSIS		Not Cov	No	Not Cov	No		No	No
33845	EXCISION COARCTATION AORTA W WO PDA W GRAFT		Not Cov	No	Not Cov	No		No	No
33851	EXC COARCJ AORTA W L SUBCLAV ART PROSTC GUSSET		Not Cov	No	Not Cov	No		No	No
33852	RPR HYOPLSTC A-ARCH W AGRFT PROSTC W O BYPASS		Not Cov	No	Not Cov	No		No	No
33853	RPR HYOPLSTC A-ARCH W AGRFT PROSTC W BYPASS		Not Cov	No	Not Cov	No		No	No
33860	ASCENDING AORTA GRF W CARD BYP AND VALVE SSP		Not Cov	No	Not Cov	No		No	No
33863	AS-AORT GRF W CARD BYP AND AORTIC ROOT RPLCMT		Not Cov	No	Not Cov	No		No	No
33864	ASCENDING AORTA GRF VALVE SPARE ROOT REMODEL		Not Cov	No	Not Cov	No		No	No
33866	AORTIC HEMIARCH GRAFT W ISOL AND CTRL ARCH VESSELS		Yes	Yes	Not Cov	Yes		Yes	Yes
33870	TRANSVERSE ARCH GRAFT W CARDIOPULMONARY BYPASS		Not Cov	No	Not Cov	No		No	No
33875	DESCENDING THORACIC AORTA GRAFT W WO BYPASS		Not Cov	No	Not Cov	No		No	No
33877	RPR THORACOABDOMINAL AORTIC ANEURYS W WO BYPASS		Not Cov	No	Not Cov	No		No	No
33880	EVASC RPR DTA COVERAGE ART ORIGIN 1ST ENDOPROSTH		Not Cov	No	Not Cov	No		No	No
33881	EVASC RPR DTA EXP COVERAGE W O ART ORIGIN		Not Cov	No	Not Cov	No		No	No
33883	PLMT PROX XTN PROSTH EVASC RPR DTA 1ST XTN		Not Cov	No	Not Cov	No		No	No
33884	PLMT PROX XTN PROSTH EVASC RPR DTA EA PROX XTN		Not Cov	No	Not Cov	No		No	No
33886	PLMT DSTL XTN PROSTH DLYD AFTER EVASC RPR DTA		Not Cov	No	Not Cov	No		No	No
33889	OPN SUBCLA CRTD ART TRPOS NCK INC ULAT		Not Cov	No	Not Cov	No		No	No
33891	BYP GRF W DESCENDING THORACIC AORTA RPR NECK INC		Not Cov	No	Not Cov	No		No	No
33910	PULMONARY ARTERY EMBOLECTOMY W CARD BYPASS		Not Cov	No	Not Cov	No		No	No
33915	PULMONARY ARTERY EMBOLECTOMY W O CARD BYPASS		Not Cov	No	Not Cov	No		No	No
33916	PULMONARY ENDARTERCOMY W WO EMBOLECTOMY W BYPASS		Not Cov	No	Not Cov	No		No	No
33917	RPR PULMONARY ART STENOSIS RCNSTJ W PATCH GRAFT		Not Cov	No	Not Cov	No		No	No
33920	RPR PULMONARY ATRESIA W CONSTJ RPLCMT CONDUIT		Not Cov	No	Not Cov	No		No	No
33922	TRANSECTION PULMONARY ARTERY W CARD BYPASS		Not Cov	No	Not Cov	No		No	No
33924	LIG AND TKDN SYSIC-TO-PULM ART SHUNT W CGEN HEART		Not Cov	No	Not Cov	No		No	No
33925	RPR P-ART ARBORIZJ ANOMAL UNIFCLIZJ W O BYPASS		Not Cov	No	Not Cov	No		No	No
33926	RPR P-ART ARBORIZJ ANOMAL UNIFCLIZJ W BYPASS		Not Cov	No	Not Cov	No		No	No
33927	IMPLTJ TOTAL RPLCMT HEART SYS W RCP CARDIECTOMY		No	No	Not Cov	No		No	No
33928	REMOVAL AND RPLCMT TOTAL RPLCMT HEART SYS		No	No	Not Cov	No		No	No
33929	REMOVAL TOTAL RPLCMT HEART SYS FOR HEART TRNSPL		No	No	Not Cov	No		No	No
33930	DONOR CARDIECTOMY-PNEUMONECTOMY		Not Cov	No	Not Cov	No		No	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
33933	BKBENCH PREPJ CADAVER DONOR HEART LUNG ALLOGRAFT		Not Cov	No	Not Cov	No		No	No
33935	HEART-LUNG TRNSPL W RECIPIENT CARDIECTOMY-PNUMEC		Not Cov	No	Not Cov	No		No	No
33940	DONOR CARDIECTOMY		Not Cov	No	Not Cov	No		No	No
33944	BKBENCH PREPJ CADAVER DONOR HEART ALLOGRAFT		Not Cov	No	Not Cov	No		No	No
33945	HEART TRANSPLANT W WO RECIPIENT CARDIECTOMY		Not Cov	No	Not Cov	No		No	No
33946	ECMO ECLS INITIATION VENO-VENOUS		Not Cov	Not Cov	Not Cov	Not Cov		No	No
33947	ECMO ECLS INITIATION VENO-ARTERIAL		Not Cov	Not Cov	Not Cov	Not Cov		No	No
33948	ECMO ECLS DAILY MANAGEMENT EACH DAY VENO-VENOUS		Not Cov	Not Cov	Not Cov	Not Cov		No	No
33949	ECMO ECLS DAILY MANAGEMENT EA DAY VENO-ARTERIAL		Not Cov	Not Cov	Not Cov	Not Cov		No	No
33951	ECMO ECLS INSJ OF PRPH CANNULA BIRTH-5 YRS PERQ		Not Cov	Not Cov	Not Cov	Not Cov		No	No
33952	ECMO ECLS INSJ OF PRPH CANNULA 6 YRS AND OLDER PERQ		Not Cov	Not Cov	Not Cov	Not Cov		No	No
33953	ECMO ECLS INSJ OF PRPH CANNULA BIRTH-5 YRS OPEN		Not Cov	Not Cov	Not Cov	Not Cov		No	No
33954	ECMO ECLS INSJ OF PRPH CANNULA 6 YRS AND OLDER OPEN		Not Cov	Not Cov	Not Cov	Not Cov		No	No
33955	ECMO ECLS INSJ OF CENTRAL CANNULA BIRTH-5 YRS		Not Cov	Not Cov	Not Cov	Not Cov		No	No
33956	ECMO ECLS INSJ OF CENTRAL CANNULA 6 YRS AND OLDER		Not Cov	Not Cov	Not Cov	Not Cov		No	No
33957	ECMO ECLS REPOS PERIPH CANNULA PERQ BIRTH-5 YRS		Not Cov	Not Cov	Not Cov	Not Cov		No	No
33958	ECMO ECLS REPOS PERPH CANNULA PRQ 6 YRS AND OLDER		Not Cov	Not Cov	Not Cov	Not Cov		No	No
33959	ECMO ECLS REPOS PERPH CANNULA OPEN BIRTH-5 YRS		Not Cov	Not Cov	Not Cov	Not Cov		No	No
33962	ECMO ECLS REPOS PERPH CANNULA OPEN 6 YRS AND OLDER		Not Cov	No	Not Cov	No		No	No
33963	ECMO ECLS REPOS CENTRAL PERPH CANNULA BIRTH-5YRS		Not Cov	No	Not Cov	No		No	No
33964	ECMO ECLS ECLS REPOS CENTRAL CNULA 6YRS AND OLDER		Not Cov	No	Not Cov	No		No	No
33965	ECMO ECLS RMVL OF PERPH CANNULA PERQ BIRTH-5 YRS		Not Cov	No	Not Cov	No		No	No
33966	ECMO ECLS RMVL OF PRPH CANNULA PRQ 6 YRS AND OLDER		Not Cov	No	Not Cov	No		No	No
33967	INSERTION INTRA-AORTIC BALLOON ASSIST DEV PERQ		Not Cov	No	Not Cov	No		No	No
33968	REMOVAL INTRA-AORTIC BALLOON ASSIST DEVICE PRQ		Not Cov	No	Not Cov	No		No	No
33969	ECMO ECLS RMVL OF PERPH CANNULA OPEN BIRTH-5 YRS		Not Cov	Not Cov	Not Cov	Not Cov		No	No
33970	INSJ INTRA-AORT BALO ASSIST DEV VIA FEM ART OPEN		Not Cov	No	Not Cov	No		No	No
33971	RMVL I-AORT BALO ASST DEV W RPR FEM ART W WO GRF		Not Cov	No	Not Cov	No		No	No
33973	INSJ I-AORT BALO ASSIST DEV VIA ASCENDING AORTA		Not Cov	No	Not Cov	No		No	No

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33974	RMVL ASCENDING-AORTA BALO DEV W RPR ASCEND-AORTA		Not Cov	No	Not Cov	No		No	No
33975	INSJ VENTRIC ASSIST DEV XTRCORP SINGLE VENTRICLE		Not Cov	No	Not Cov	No		No	No
33976	INSJ VENTRIC ASSIST DEV XTRCORP BIVENTRICULAR		Not Cov	No	Not Cov	No		No	No
33977	REMOVAL VENTR ASSIST DEVICE XTRCORP 1 VENTRICLE		Not Cov	No	Not Cov	No		No	No
33978	REMOVAL VENTR ASSIST DEVICE XTRCORP BIVENTR		Not Cov	No	Not Cov	No		No	No
33979	INSJ VENTR ASSIST DEV IMPLTABLE ICORP 1 VNTRC		Not Cov	Yes	Not Cov	Yes		Yes	Yes
33980	RMVL VENTR ASSIST DEV IMPLTABLE ICORP 1 VNTRC		Not Cov	No	Not Cov	No		No	No
33981	RPLCMT XTRCORP VAD 1 BIVENTR PUMP 1 EA PUMP		Not Cov	No	Not Cov	No		No	No
33982	PLCMT VAD PMP IMPLTBL ICORP 1 VENTR W O BYPASS		Not Cov	No	Not Cov	No		No	No
33983	RPLCMT VAD PMP IMPLTBL ICORP 1 VNTR W BYPASS		Not Cov	No	Not Cov	No		No	No
33984	ECMO ECLS RMVL PRPH CANNULA OPEN 6 YRS AND OLDER		Not Cov	Not Cov	Not Cov	Not Cov		No	No
33985	ECMO ECLS REMOVAL OF CENTRAL CANNULA BIRTH-5 YRS		Not Cov	Not Cov	Not Cov	Not Cov		No	No
33986	ECMO ECLS RMVL OF CENTRAL CANNULA 6 YRS AND OLDER		Not Cov	Not Cov	Not Cov	Not Cov		No	No
33987	ARTERY EXPOS GRAFT ARTERY PERFUSION ECMO ECLS		Not Cov	Not Cov	Not Cov	Not Cov		No	No
33988	INSERT LEFT HEART VENT BY THORACIC INC ECMO ECLS		Not Cov	Not Cov	Not Cov	Not Cov		No	No
33989	RMVL LEFT HEART VENT BY THORACIC INCIS ECMO ECLS		Not Cov	Not Cov	Not Cov	Not Cov		No	No
33990	INSJ PERQ VAD W IMAGING ARTERY ACCESS ONLY		Not Cov	No	Not Cov	No		No	No
33991	INSJ PERQ VAD TRNSPTAL W IMAGE ART AND VENOUS ACCESS		Not Cov	No	Not Cov	No		No	No
33992	REMOVAL PERCUTANEOUS VAD DIFFERENT SESSION		Not Cov	No	Not Cov	No		No	No
33993	REPOSITION VAD W IMAGING DIFFERENT SESSION		Not Cov	No	Not Cov	No		No	No
33999	UNLISTED CARDIAC SURGERY		Yes	Yes	Not Cov	Yes		Yes	Yes
34001	EMBLC THRMBC CATH CRTD SUBCLA INNOMINATE ART		Not Cov	No	Not Cov	No		No	No
34051	EMBLC THRMBC INNOMINATE SUBCLAVIAN ARTERY		Not Cov	No	Not Cov	No		No	No
34101	EMBLC THRMBC AX BRACH INNOMINATE SUBCLA ART		No	No	Not Cov	No		No	No
34111	EMBLC THRMBC W WO CATH RADIAL ULNAR ART ARM INC		No	No	Not Cov	No		No	No
34151	EMBLC THRMBC RNL CELIAC MESENTRY AORTO-ILIAC ART		Not Cov	No	Not Cov	No		No	No
34201	EMBLC THRMBC FEMORAL POPLITEAL AORTO-ILIAC ART		No	No	Not Cov	No		No	No
34203	EMBLC THRMBC POPLITEAL-TIBIO-PRONEAL ART LEG INC		No	No	Not Cov	No		No	No
34401	THRMBC DIR W CATH VENA CAVA ILIAC VEIN ABDL INC		Not Cov	No	Not Cov	No		No	No
34421	THRMBC DIR W CATH V C ILIAC FEMPOP VEIN LEG INC		No	No	Not Cov	No		No	No
34451	THRMBC DIR W CATH V C ILIAC FEMPOP VEIN ABDL AND LEG		Not Cov	No	Not Cov	No		No	No
34471	THRMBC DIR W CATH SUBCLAVIAN VEIN NECK INC		No	No	Not Cov	No		No	No
34490	THRMBC DIR W CATH AXILL AND SUBCLAVIAN VEIN ARM IN		No	No	No	No		No	No

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			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
34501	VALVULOPLASTY FEMORAL VEIN		No	No	Not Cov	No		No	No
34502	RECONSTRUCTION VENA CAVA ANY METHOD		Not Cov	No	Not Cov	No		No	No
34510	VENOUS VALVE TRANSPOSITION ANY VEIN DONOR		No	No	Not Cov	No		No	No
34520	CROSS-OVER VEIN GRAFT VENOUS SYSTEM		No	No	Not Cov	No		No	No
34530	SAPHENOPOPLITEAL VEIN ANASTOMOSIS		No	No	Not Cov	No		No	No
34701	EVASC RPR DPLMNT AORTO-AORTIC NDGFT		Not Cov	No	Not Cov	No		No	No
34702	EVASC RPR DPLMNT AORTO-AORTIC NDGFT RPT		Not Cov	No	Not Cov	No		No	No
34703	EVASC RPR DPLMNT AORTO-UN-ILIAC NDGFT		Not Cov	No	Not Cov	No		No	No
34704	EVASC RPR DPLMNT AORTO-UN-ILIAC NDGFT RPT		Not Cov	No	Not Cov	No		No	No
34705	EVASC RPR DPLMNT AORTO-BI-ILIAC NDGFT		Not Cov	No	Not Cov	No		No	No
34706	EVASC RPR DPLMNT AORTO-BI-ILIAC NDGFT RPT		Not Cov	No	Not Cov	No		No	No
34707	EVASC RPR DPLMNT ILIO-ILIAC NDGFT		Not Cov	No	Not Cov	No		No	No
34708	EVASC RPR DPLMNT ILIO-ILIAC NDGFT RPT		Not Cov	No	Not Cov	No		No	No
34709	PLACEMENT XTN PROSTH FOR ENDOVASCULAR RPR		Not Cov	No	Not Cov	No		No	No
34710	DLYD PLACEMENT XTN PROSTH FOR EVASC RPR 1ST VSL		Not Cov	No	Not Cov	No		No	No
34711	DLYD PLACEMENT XTN PROSTH FOR EVASC RPR EA ADDL		Not Cov	No	Not Cov	No		No	No
34712	TRANSCATHETER DLVR ENHNCD FIXATION DEVICES RS AND I		No	No	Not Cov	No		No	No
34713	PERQ ACCESS AND CLOSURE FEM ART FOR DELIVERY NDGFT		No	No	Not Cov	No		Yes	No
34714	OPN FEM ART EXPOS W CNDT CRTJ DLVR EVASC PROSTH		Not Cov	No	Not Cov	No		Yes	No
34715	OPN AX SUBCLA ART EXPOS DLVR EVASC PROSTH UNI		Not Cov	No	Not Cov	No		Yes	No
34716	OPN AXILLARY SUBCLAVIAN ART EXPOS W CNDT CRTJ		Not Cov	No	Not Cov	No		Yes	No
34808	EVASC PLACEMENT ILIAC ARTERY OCCLUSION DEVICE		Not Cov	No	Not Cov	No		No	No
34812	OPN FEM ART EXPOS DLVR EVASC PROSTH UNI		Not Cov	No	Not Cov	No		No	No
34813	PLMT FEM-FEM PROSTC GRF EVASC AORTIC ARYSM RPR		No	No	Not Cov	No		No	No
34820	OPN ILIAC ART EXPOS PROSTH ILIAC OCCLS EVASC UNI		Not Cov	No	Not Cov	No		No	No
34830	OPN RPR ARYSM RPR ARTL TRAUMA TUBE PROSTH		Not Cov	No	Not Cov	No		No	No
34831	OPN RPR ARYSM RPR ARTL TRMA AORTOBILIAC PROSTH		Not Cov	No	Not Cov	No		No	No
34832	OPN RPR ARYSM RPR ARTL TRMA AORTO-BIFEM PROSTH		Not Cov	No	Not Cov	No		No	No
34833	OPN ILIAC ART EXPOS CRTJ PROSTH EST CARD BYP		Not Cov	No	Not Cov	No		No	No
34834	OPN BRACHIAL ARTERY EXPOS DLVR EVASC PROSTH UNI		Not Cov	No	Not Cov	No		No	No
34839	PLNNING PT SPEC FENEST VISCERAL AORTIC GRAFT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
34841	ENDOVASC VISCER AORTA REPAIR FENEST 1 ENDOGRAFT		No	No	Not Cov	No		No	No
34842	ENDOVASC VISCER AORTA REPAIR FENEST 2 ENDOGRAFT		No	No	Not Cov	No		No	No
34843	ENDOVASC VISCER AORTA REPAIR FENEST 3 ENDOGRAFT		No	No	Not Cov	No		No	No

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			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
34844	ENDOVASC VISCER AORTA REPR FENEST 4 PLUS ENDOGRAFT		No	No	Not Cov	No		No	No
34845	VISCER AND INFRARENAL ABDOM AORTA 1 PROSTHESIS		No	No	Not Cov	No		No	No
34846	VISCER AND INFRARENAL ABDOM AORTA 2 PROSTHESIS		No	No	Not Cov	No		No	No
34847	VISCER AND INFRARENAL ABDOM AORTA 3 PROSTHESIS		No	No	Not Cov	No		No	No
34848	VISCER AND INFRARENAL ABDOM AORTA 4 PLUS PROSTHESIS		No	No	Not Cov	No		No	No
35001	DIR RPR ANEURYSM CAROTID-SUBCLAVIAN ARTERY		Not Cov	No	Not Cov	No		No	No
35002	DIR RPR RUPTD ANEURYSM CAROTID-SUBCLAVIAN ARTERY		Not Cov	No	Not Cov	No		No	No
35005	DIR RPR ANEURYSM VERTEBRAL ARTERY		Not Cov	No	Not Cov	No		No	No
35011	DIR RPR ANEURYSM AXIL-BRACHIAL ARM INCISION		No	No	Not Cov	No		No	No
35013	DIR RPR RUPTD ANEURYSM AXIL-BRACHIAL ARM INCIS		Not Cov	No	Not Cov	No		No	No
35021	DIR RPR ANEURYSM INNOMINATE SUBCLAVIAN ARTERY		Not Cov	No	Not Cov	No		No	No
35022	DIR RPR RUPTD ANEURYSM INNOMINATE SUBCLAVIAN		Not Cov	No	Not Cov	No		No	No
35045	DIR RPR RUPTD ANEURYSM RADIAL ULNAR ARTERY		No	No	Not Cov	No		No	No
35081	DIR RPR ANEURYSM ABDOMINAL AORTA		Not Cov	No	Not Cov	No		No	No
35082	DIR RPR RUPTD ANEURYSM ABDOMINAL AORTA		Not Cov	No	Not Cov	No		No	No
35091	DIR RPR ANEURYSM ABDOM AORTA W VISCERAL VESSELS		Not Cov	No	Not Cov	No		No	No
35092	DIR RPR RUPTD ANEURSM ABDOM AORTA W VISCERA VLSL		Not Cov	No	Not Cov	No		No	No
35102	DIR RPR ANEURYSM ABDOM AORTA W ILIAC VESSELS		Not Cov	No	Not Cov	No		No	No
35103	DIR RPR RUPTD ANEURYSM ABDOM AORTA W ILIAC VLSL		Not Cov	No	Not Cov	No		No	No
35111	DIR RPR ANEURYSM SPLENIC ARTERY		Not Cov	No	Not Cov	No		No	No
35112	DIR RPR RUPTD ANEURYSM SPLENIC ARTERY		Not Cov	No	Not Cov	No		No	No
35121	DIR RPR ANEURYSM HEPATIC CELIAC RENAL MESENTERIC		Not Cov	No	Not Cov	No		No	No
35122	DIR RPR RUPTD ANEURSM HEPATIC CELIAC RENAL MESEN		Not Cov	No	Not Cov	No		No	No
35131	DIR RPR ANEURYSM AND GRAFT ILIAC ARTERY		Not Cov	No	Not Cov	No		No	No
35132	DIR RPR RUPTD ANEURYSM AND GRAFT ILIAC ARTERY		Not Cov	No	Not Cov	No		No	No
35141	DIR RPR ANEURYSM AND GRAFT COMMON FEMORAL ARTERY		Not Cov	No	Not Cov	No		No	No
35142	DIR RPR RUPTD ANEURYSM AND GRF COMMON FEMORAL ART		Not Cov	No	Not Cov	No		No	No
35151	DIR RPR ANEURYSM AND GRAFT POPLITEAL ARTERY		Not Cov	No	Not Cov	No		No	No
35152	DIR RPR RUPTD ANEURYSM AND GRF POPLITEAL ARTERY		Not Cov	No	Not Cov	No		No	No
35180	REPAIR CONGENITAL AV FISTULA HEAD AND NECK		No	No	Not Cov	No		No	No

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Code	Code Description	Comments	Apple Health & IMC Medical				IMC / BHSO (Mental Health covered svcs)	Medicare	Market Place
			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
35182	RPR CONGENITAL AV FISTULA THORAX AND ABDOMEN		Not Cov	No	Not Cov	No		No	No
35184	RPR CONGENITAL AV FISTULA EXTREMITIES		No	No	Not Cov	No		No	No
35188	RPR TRAUMATIC AV FISTULA HEAD AND NECK		No	No	No	No		No	No
35189	RPR TRAUMATIC AV FISTULA THORAX AND ABDOMEN		Not Cov	No	Not Cov	No		No	No
35190	RPR TRAUMATIC AV FISTULA EXTREMITIES		No	No	Not Cov	No		No	No
35201	REPAIR BLOOD VESSEL DIRECT NECK		No	No	Not Cov	No		No	No
35206	REPAIR BLOOD VESSEL DIRECT UPPER EXTREMITY		No	No	Not Cov	No		No	No
35207	REPAIR BLOOD VESSEL DIRECT HAND FINGER		No	No	No	No		No	No
35211	RPR BLOOD VESSEL DIRECT INTRATHORACIC W BYPASS		Not Cov	No	Not Cov	No		No	No
35216	RPR BLOOD VESSEL DIRECT INTRATHORACIC W O BYPASS		Not Cov	No	Not Cov	No		No	No
35221	RPR BLOOD VESSEL DIRECT INTRA-ABDOMINAL		Not Cov	No	Not Cov	No		No	No
35226	RPR BLOOD VESSEL DIRECT LOWER EXTREMITY		No	No	Not Cov	No		No	No
35231	REPAIR BLOOD VESSEL W VEIN GRAFT NECK		No	No	Not Cov	No		No	No
35236	REPAIR BLOOD VESSEL W VEIN GRAFT UPPER EXTREMITY		No	No	Not Cov	No		No	No
35241	RPR BLOOD VESSEL VEIN GRAFT INTRATHORACIC W BYP		Not Cov	No	Not Cov	No		No	No
35246	RPR BLOOD VESSEL VEIN GRF INTRATHORACIC W O BYP		Not Cov	No	Not Cov	No		No	No
35251	REPAIR BLOOD VESSEL VEIN GRAFT INTRA-ABDOMINAL		Not Cov	No	Not Cov	No		No	No
35256	REPAIR BLOOD VESSEL VEIN GRAFT LOWER EXTREMITY		No	No	Not Cov	No		No	No
35261	REPAIR BLOOD VESSEL W GRAFT OTHER THAN VEIN NECK		No	No	Not Cov	No		No	No
35266	RPR BLOOD VSL GRF OTH THN VEIN UPPER EXTREMITY		No	No	Not Cov	No		No	No
35271	RPR BLOOD VSL GRF OTH THN VEIN INTRATHRC W BYP		Not Cov	No	Not Cov	No		No	No
35276	RPR BLOOD VSL GRF OTH THN VEIN INTRATHRC W O BYP		Not Cov	No	Not Cov	No		No	No
35281	RPR BLVSL W GRFT OTHER THAN VEIN INTRA-ABDOMINAL		Not Cov	No	Not Cov	No		No	No
35286	RPR BLVSL W GRF OTHER THAN VEIN LOWER EXTREMITY		No	No	Not Cov	No		No	No
35301	TEAEC W PATCH GRF CAROTID VERTB SUBCLAV NECK INC		Not Cov	No	Not Cov	No		No	No
35302	TEAEC W GRAFT SUPERFICIAL FEMORAL ARTERY		Not Cov	No	Not Cov	No		No	No
35303	TEAEC W GRAFT POPLITEAL ARTERY		No	No	Not Cov	No		No	No
35304	TEAEC W GRAFT TIBIOPERONEAL TRUNK ARTERY		No	No	Not Cov	No		No	No
35305	TEAEC W GRAFT TIBIAL PERONEAL ART 1ST VESSEL		No	No	Not Cov	No		No	No
35306	TEAEC W GRAFT EA ADDL TIBIAL PERONEAL ART		No	No	Not Cov	No		No	No
35311	TEAEC W WO PATCH GRF SUBCLAV INNOM THORACIC INC		Not Cov	No	Not Cov	No		No	No
35321	TEAEC W WO PATCH GRF AXILLARY-BRACHIAL		No	No	Not Cov	No		No	No
35331	TEAEC W WO PATCH GRAFT ABDOMINAL AORTA		Not Cov	No	Not Cov	No		No	No
35341	TEAEC W WO PATCH GRAFT MESENTERIC CELIAC RENAL		Not Cov	No	Not Cov	No		No	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
35351	TEAEC W WO PATCH GRAFT ILIAC		Not Cov	No	Not Cov	No		No	No
35355	TEAEC W WO PATCH GRAFT ILIOFEMORAL		Not Cov	No	Not Cov	No		No	No
35361	TEAEC W WO PATCH GRAFT COMBINED AORTOILIAC		Not Cov	No	Not Cov	No		No	No
35363	TEAEC W WO PATCH GRAFT COMBINED AORTOILIOFEMORAL		Not Cov	No	Not Cov	No		No	No
35371	TEAEC W WO PATCH GRAFT COMMON FEMORAL		Not Cov	No	Not Cov	No		No	No
35372	TEAEC W WO PATCH GRAFT DEEP PROFUNDA FEMORAL		Not Cov	No	Not Cov	No		No	No
35390	ROPRTJ CRTD TEAEC OVER 1 MO AFTER ORIGINAL OPRATIO		Not Cov	No	Not Cov	No		No	No
35400	ANGIOSCOPY NON-CORONARY VESSEL GRAFTS THER IVNTJ		Not Cov	No	Not Cov	No		No	No
35500	HARVEST UXTR VEIN 1 SGM LOWER EXTREMITY CABG PX		No	No	Not Cov	No		No	No
35501	BYPASS W VEIN COMMON-IPSILATERAL CAROTID		Not Cov	No	Not Cov	No		No	No
35506	BYPASS W VEIN CAROTID-SUBCLV SUBCLAVIAN CAROTID		Not Cov	No	Not Cov	No		No	No
35508	BYPASS W VEIN CAROTID-VERTEBRAL		Not Cov	No	Not Cov	No		No	No
35509	BYPASS W VEIN CAROTID-CONTRALATERAL CAROTID		Not Cov	No	Not Cov	No		No	No
35510	BYPASS W VEIN CAROTID-BRACHIAL		Not Cov	No	Not Cov	No		No	No
35511	BYPASS W VEIN SUBCLAVIAN-SUBCLAVIAN		Not Cov	No	Not Cov	No		No	No
35512	BYPASS W VEIN SUBCLAVIAN-BRACHIAL		No	No	Not Cov	No		No	No
35515	BYPASS W VEIN SUBCLAVIAN-VERTEBRAL		Not Cov	No	Not Cov	No		No	No
35516	BYPASS W VEIN SUBCLAVIAN-AXILLARY		Not Cov	No	Not Cov	No		No	No
35518	BYPASS W VEIN AXILLARY-AXILLARY		Not Cov	No	Not Cov	No		No	No
35521	BYPASS W VEIN AXILLARY-FEMORAL		Not Cov	No	Not Cov	No		No	No
35522	BYPASS W VEIN AXILLARY-BRACHIAL		No	No	Not Cov	No		No	No
35523	BYPASS W VEIN BRACHIAL-ULNAR -RADIAL		No	No	Not Cov	No		No	No
35525	BYPASS W VEIN BRACHIAL-BRACHIAL		No	No	Not Cov	No		No	No
35526	BYPASS W VEIN AORTOSUBCLAV CAROTID INNOMINATE		Not Cov	No	Not Cov	No		No	No
35531	BYPASS W VEIN AORTOCELIAC AORTOMESENTERIC		Not Cov	No	Not Cov	No		No	No
35533	BYPASS W VEIN AXILLARY-FEMORAL-FEMORAL		Not Cov	No	Not Cov	No		No	No
35535	BYPASS W VEIN HEPATORENAL		Not Cov	No	Not Cov	No		No	No
35536	BYPASS W VEIN SPLENORENAL		Not Cov	No	Not Cov	No		No	No
35537	BYPASS W VEIN AORTOILIAC		Not Cov	No	Not Cov	No		No	No
35538	BYPASS W VEIN AORTOBI-ILIAC		Not Cov	No	Not Cov	No		No	No
35539	BYPASS W VEIN AORTOFEMORAL		Not Cov	No	Not Cov	No		No	No
35540	BYPASS W VEIN AORTOBIFEMORAL		Not Cov	No	Not Cov	No		No	No
35556	BYPASS W VEIN FEMORAL-POPLITEAL		Not Cov	No	Not Cov	No		No	No
35558	BYPASS W VEIN FEMORAL-FEMORAL		Not Cov	No	Not Cov	No		No	No
35560	BYPASS W VEIN AORTORENAL		Not Cov	No	Not Cov	No		No	No
35563	BYPASS W VEIN ILIOILIAC		Not Cov	No	Not Cov	No		No	No
35565	BYPASS W VEIN ILIOFEMORAL		Not Cov	No	Not Cov	No		No	No
35566	BYP FEM-ANT TIBL PST TIBL PRONEAL ART OTH DSTL		Not Cov	No	Not Cov	No		No	No
35570	BYP TIBL-TIBL PRONEAL-TIBL TIBL PRONEAL TRK-TIBL		No	No	Not Cov	No		No	No
35571	BYP W VEIN POP-TIBL-PRONEAL ART OTH DSTL VSL		Not Cov	No	Not Cov	No		No	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
35572	HARVEST FEMPOP VEIN 1 SGM VASC RCNSTJ PX		No	No	Not Cov	No		No	No
35583	IN-SITU VEIN BYPASS FEMORAL-POPLITEAL		Not Cov	No	Not Cov	No		No	No
35585	IN-SITU FEM-ANT TIBL PST TIBL PRONEAL ART		Not Cov	No	Not Cov	No		No	No
35587	IN-SITU VEIN BY POP-TIBL PRONEAL		Not Cov	No	Not Cov	No		No	No
35600	HARVEST UPPER EXTREMITY ARTERY 1 SEGMENT CABG		Not Cov	No	Not Cov	No		No	No
35601	BYP OTH THN VEIN COMMON-IPSILATERAL CAROTID		Not Cov	No	Not Cov	No		No	No
35606	BYP OTH THN VEIN CAROTID-SUBCLAVIAN		Not Cov	No	Not Cov	No		No	No
35612	BYP OTH THN VEIN SUBCLAVIAN-SUBCLAVIAN		Not Cov	No	Not Cov	No		No	No
35616	BYP OTH THN VEIN SUBCLAVIAN-AXILLARY		No	No	Not Cov	No		No	No
35621	BYP OTH THN VEIN AXILLARY-FEMORAL		Not Cov	No	Not Cov	No		No	No
35623	BYP OTH THN VEIN AXILLARY-POPLITEAL -TIBIAL		Not Cov	No	Not Cov	No		No	No
35626	BYPASS NOT VEIN AORTOSUBCLA CAROTID INNOMINATE		Not Cov	No	Not Cov	No		No	No
35631	BYP OTH THN VEIN AORTOCELIAC AORTOMSN AORTORNL		Not Cov	No	Not Cov	No		No	No
35632	BYPASS GRAFT W OTHER THAN VEIN ILIO-CELIAC		Not Cov	No	Not Cov	No		No	No
35633	BYPASS GRAFT W OTHER THAN VEIN ILIO-MESENERIC		Not Cov	No	Not Cov	No		No	No
35634	BYPASS GRAFT W OTHER THAN VEIN ILIORENAL		Not Cov	No	Not Cov	No		No	No
35636	BYP OTH THN VEIN SPLENORENAL		Not Cov	No	Not Cov	No		No	No
35637	BYP OTH THN VEIN AORTOILIAC		Not Cov	No	Not Cov	No		No	No
35638	BYP OTH THN VEIN AORTOBI-ILIAC		Not Cov	No	Not Cov	No		No	No
35642	BYP OTH THN VEIN CAROTID-VERTEBRAL		Not Cov	No	Not Cov	No		No	No
35645	BYP OTH THN VEIN SUBCLAVIAN-VERTEBRAL		Not Cov	No	Not Cov	No		No	No
35646	BYP OTH THN VEIN AORTOBIFEMORAL		Not Cov	No	Not Cov	No		No	No
35647	BYP OTH THN VEIN AORTOFEMORAL		No	No	Not Cov	No		No	No
35650	BYP OTH THN VEIN AXILLARY-AXILLARY		Not Cov	No	Not Cov	No		No	No
35654	BYP OTH THN VEIN AXILLARY-FEMORAL-FEMORAL		Not Cov	No	Not Cov	No		No	No
35656	BYP OTH THN VEIN FEMORAL-POPLITEAL		Not Cov	No	Not Cov	No		No	No
35661	BYP OTH THN VEIN FEMORAL-FEMORAL		Not Cov	No	Not Cov	No		No	No
35663	BYP OTH THN VEIN ILIOILIAC		Not Cov	No	Not Cov	No		No	No
35665	BYP OTH THN VEIN ILIOFEMORAL		Not Cov	No	Not Cov	No		No	No
35666	BYP OTH THN VEIN FEM-ANT TIBL PST TIBL PRONEAL		Not Cov	No	Not Cov	No		No	No
35671	BYP OTH THN VEIN POPLITEAL-TIBIAL -PERONEAL ART		Not Cov	No	Not Cov	No		No	No
35681	BYPASS COMPOSITE GRAFT PROSTHETIC AND VEIN		Not Cov	No	Not Cov	No		No	No
35682	BYP AUTOG COMPOSIT 2 SEG VEINS FROM 2 LOCATIONS		Not Cov	No	Not Cov	No		No	No
35683	BYP AUTOG COMPOSIT 3 OR GRT SEG FROM 2 OR GRT LOCATION		Not Cov	No	Not Cov	No		No	No
35685	PLMT VEIN PATCH CUFF DSTL ANAST BYP CONDUIT		No	No	Not Cov	No		No	No
35686	CRTJ DSTL ARVEN FSTL LXTR BYP SURG NON-HEMO		No	No	Not Cov	No		No	No
35691	TRPOS AND RIMPLTJ VERTEBRAL CAROTID ART		Not Cov	No	Not Cov	No		No	No
35693	TRPOS AND RIMPLTJ VERTEBRAL SUBCLAVIAN ART		Not Cov	No	Not Cov	No		No	No
35694	TRPOS AND RIMPLTJ SUBCLAVIAN CAROTID ART		Not Cov	No	Not Cov	No		No	No
35695	TRPOS AND RIMPLTJ CAROTID SUBCLAVIAN ART		Not Cov	No	Not Cov	No		No	No
35697	RIMPLTJ VISC ART INFRARNL AORTIC PROSTH EA ART		Not Cov	No	Not Cov	No		No	No
35700	ROPRTJ OVER 1 MO AFTER ORIGINAL OPRATION		Not Cov	No	Not Cov	No		No	No
35701	EXPL N FLWD SURG RPR W WO LYSIS CAROTID ARTERY		No	No	Not Cov	No		No	No

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35721	EXPL N FLWD SURG RPR W WO LYSIS FEMORAL ARTERY		No	No	Not Cov	No		No	No
35741	EXPL N FLWD SURG RPR W WO LYSIS POPLITEAL ARTERY		No	No	Not Cov	No		No	No
35761	EXPL N FLWD SURG RPR W WO LYSIS OTHER ARTERY		No	No	No	No		No	No
35800	EXPL PO HEMRRG THROMBOSIS INFCTJ NCK		Not Cov	No	Not Cov	No		No	No
35820	EXPL PO HEMRRG THROMBOSIS INFCTJ CH		No	No	Not Cov	No		No	No
35840	EXPL PO HEMRRG THROMBOSIS INFCTJ ABD		Not Cov	No	Not Cov	No		No	No
35860	EXPL PO HEMRRG THROMBOSIS INFCTJ XTR		No	No	Not Cov	No		No	No
35870	RPR GRF-ENTERIC FSTL		Not Cov	No	Not Cov	No		No	No
35875	THRMBC ARTL VEN GRF OTH THN HEMO GRF FSTL		No	No	No	No		No	No
35876	THRMBC ARTL VEN GRF XCP HEMO GRF FSTL W REVJ GRF		No	No	No	No		No	No
35879	REVJ LXTR ARTL BYP OPN VEIN PATCH ANGIOP		No	No	Not Cov	No		No	No
35881	REVJ LXTR ARTL BYP OPN W SGM TL VEIN INTERPOS		No	No	Not Cov	No		No	No
35883	REVISION FEMORAL ANAST OPEN NONAUTOG GRAFT		No	No	Not Cov	No		No	No
35884	REVISION FEMORAL ANAST OPEN W AUTOG GRAFT		No	No	Not Cov	No		No	No
35901	EXCISION INFECTED NECK GRAFT		No	No	Not Cov	No		No	No
35903	EXCISION INFECTED GRAFT EXTREMITY		No	No	Not Cov	No		No	No
35905	EXCISION INFECTED GRAFT THORAX		Not Cov	No	Not Cov	No		No	No
35907	EXCISION INFECTED GRAFT ABDOMEN		Not Cov	No	Not Cov	No		No	No
36000	INTRODUCTION NEEDLE INTRACATHETER VEIN		No	No	Not Cov	No		Not Cov	No
36002	INJECTION PX PRQ TX EXTREMITY PSEUDOANEURYSM		No	No	No	No		No	No
36005	NJX PX XTR VNGRPH W INTRO NDL INTRACATH		No	No	Not Cov	No		No	No
36010	INTRO CATHETER SUPERIOR INFERIOR VENA CAVA		No	No	Not Cov	No		No	No
36011	SLCTV CATH PLMT VEN SYS 1ST ORDER BRANCH		No	No	Not Cov	No		No	No
36012	SLCTV CATH PLMT VEN SYS 2ND ORDER OR GRT SLCTV BRANC		No	No	Not Cov	No		No	No
36013	INTRO CATHETER RIGHT HEART MAIN PULMONARY ARTERY		No	No	Not Cov	No		No	No
36014	SLCTV CATHETER PLMT LEFT RIGHT PULMONARY ARTERY		No	No	Not Cov	No		No	No
36015	SLCTV CATH PLMT SEGMENTAL SUBSEGMENTAL PULM ART		No	No	Not Cov	No		No	No
36100	INTRO NEEDLE INTRACATH CAROTID VERTEBRAL ARTERY		No	No	Not Cov	No		No	No
36140	INTRO OF NEEDLE OR INTRACATHETER UPR LXTR ARTERY		No	No	Not Cov	No		No	No
36160	INTRO NEEDLE INTRACATH AORTIC TRANSLUMBAR		No	No	Not Cov	No		No	No
36200	INTRODUCTION CATHETER AORTA		No	No	Not Cov	No		No	No
36215	SLCTV CATHJ EA 1ST ORD THRC BRCH CPHLC BRNCH		No	No	Not Cov	No		No	No
36216	SLCTV CATHJ 1ST 2ND ORD THRC BRCH CPHLC BRNCH		No	No	Not Cov	No		No	No
36217	SLCTV CATHJ 3RD PLUS ORD SLCTV THRC BRCH CPHLC BRNCH		No	No	Not Cov	No		No	No
36218	SLCTV CATHJ EA 2ND PLUS ORD THRC BRCH CPHLC BRNCH		No	No	Not Cov	No		No	No

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			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
36221	NONSLCTV CATH THOR AORTA ANGIO INTR XTRCRANL ART		No	No	Not Cov	No		No	No
36222	SLCTV CATH CAROTID INNOM ART ANGIO XTRCRANL ART		No	No	Not Cov	No		No	No
36223	SLCTV CATH CAROTID INNOM ART ANGIO INTRCRANL ART		No	No	Not Cov	No		No	No
36224	SLCTV CATH INTRNL CAROTID ART ANGIO INTRCRNL ART		No	No	Not Cov	No		No	No
36225	SLCTV CATH SUBCLAVIAN ART ANGIO VERTEBRAL ARTERY		No	No	Not Cov	No		No	No
36226	SLCTV CATH VERTEBRAL ART ANGIO VERTEBRAL ARTERY		No	No	Not Cov	No		No	No
36227	SLCTV CATH XTRNL CAROTID ANGIO XTRNL CAROTD CIRC		No	No	Not Cov	No		No	No
36228	SLCTV CATH INTRCRNL BRNCH ANGIO INTRL CAROT VERT		No	No	Not Cov	No		No	No
36245	SLCTV CATHJ EA 1ST ORD ABDL PEL LXTR ART BRNCH		No	No	Not Cov	No		No	No
36246	SLCTV CATHJ 2ND ORDER ABDL PEL LXTR ART BRNCH		No	No	Not Cov	No		No	No
36247	SLCTV CATHJ 3RD PLUS ORD SLCTV ABDL PEL LXTR BRNCH		No	No	Not Cov	No		No	No
36248	SLCTV CATHJ EA 2ND PLUS ORD ABDL PEL LXTR ART BRNCH		No	No	Not Cov	No		No	No
36251	SLCTV CATH 1STORD W WO ART PUNCT FLUORO S AND I UN		No	No	Not Cov	No		No	No
36252	SLCTV CATH 1STORD W WO ART PUNCT FLUOR S AND I BIL		No	No	Not Cov	No		No	No
36253	SUPSLCTV CATH 2ND PLUS ORD RENAL AND ACCESSORY ARTERY S AN		No	No	Not Cov	No		No	No
36254	SUPSLCTV CATH 2ND PLUS ORD RENAL AND ACCESSORY ARTERY S AN		No	No	Not Cov	No		No	No
36260	INSJ IMPLANTABLE INTRA-ARTERIAL INFUSION PUM		No	No	No	No		No	No
36261	REVJ IMPLANTED INTRA-ARTERIAL INFUSION PUMP		No	No	No	No		No	No
36262	REMOVAL IMPLANTED INTRA-ARTERIAL INFUSION PUMP		No	No	No	No		No	No
36299	UNLISTED PROCEDURE VASCULAR INJECTION		Yes	Yes	Not Cov	Yes		Yes	Yes
36400	VNPNXR UNDER 3 YEARS PHY QHP SKILL FEMRAL JUGLAR VEIN		No	No	Not Cov	No		No	No
36405	VNPNXR UNDER 3 YEARS PHYS QHP SKILL SCALP VEIN		No	No	Not Cov	No		No	No
36406	VNPNXR UNDER 3 YEARS PHYS QHP SKILL OTHER VEIN		No	No	Not Cov	No		No	No
36410	VNPNXR 3 YEARS OR GRT PHYS QHP SKILL		No	No	Not Cov	No		No	No
36415	COLLECTION VENOUS BLOOD VENIPUNCTURE		No	No	Not Cov	No		No	No
36416	COLLECTION CAPILLARY BLOOD SPECIMEN		No	No	Not Cov	No		No	No
36420	VENIPUNCTURE CUTDOWN UNDER AGE 1 YR		No	No	Not Cov	No		No	No
36425	VENIPUNCTURE CUTDOWN AGE 1 YR OR GRT		No	No	Not Cov	No		No	No
36430	TRANSFUSION BLOOD BLOOD COMPONENTS		No	No	Not Cov	No		No	No
36440	PUSH TRANSFUSION BLOOD 2 YR UNDER		No	No	Not Cov	No		No	No
36450	EXCHNG TRANSFUSION BLOOD NEWBORN		No	No	Not Cov	No		No	No

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DOS Effective 10/1/19; Posted 10/30/19

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*** All Medicare services subject to the limitations in the CMS billing guide and fee schedules at <https://www.cms.gov/> ***

Code	Code Description	Comments	Apple Health & IMC Medical				IMC / BHSO (Mental Health covered svcs)	Medicare	Market Place
			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
36455	EXCHNG TRANSFUSION BLOOD OTHER THAN NEW BORN		No	No	No	No		No	No
36456	PRTL EXCHANGE TRANSFUSE BLOOD PLSM CRYST NEWBORN		No	No	Not Cov	No		No	No
36460	TRANSFUSION INTRAUTERINE FETAL		Yes	Yes	Not Cov	No		Yes	Yes
36465	NJX NONCMPND SCLEROSANT SINGLE INCMPTNT VEIN		Yes	Yes	Not Cov	No		Yes	Yes
36466	NJX NONCMPND SCLEROSANT MULTIPLE INCMPTNT VEINS		Yes	Yes	Not Cov	No		Yes	Yes
36468	INJECTIONS SCLEROSANT FOR SPIDER VEINS LIM TRNK		Not Cov	Yes	Not Cov	No		Yes	Yes
36470	INJECTION SCLEROSANT SINGLE INCMPTNT VEIN		Yes	Yes	Not Cov	No		Yes	Yes
36471	INJECTION SCLEROSANT MULTIPLE INCMPTNT VEINS		Yes	Yes	Not Cov	No		Yes	Yes
36473	ENDOVEN ABLTJ INCMPTNT VEIN MCHNCHEM 1ST VEIN		No	No	Not Cov	No		No	No
36474	ENDOVEN ABLTJ INCMPTNT VEIN MCHNCHEM SBSQ VEINS		No	No	Not Cov	No		No	No
36475	ENDOVEN ABLTJ INCMPTNT VEIN XTR RF 1ST VEIN		Yes	Yes	Not Cov	No		Yes	Yes
36476	ENDOVEN ABLTJ INCMPTNT VEIN XTR RF 2ND PLUS VEINS		Yes	Yes	Not Cov	No		Yes	Yes
36478	ENDOVEN ABLTJ INCMPTNT VEIN XTR LASER 1ST VEIN		Yes	Yes	Not Cov	No		Yes	Yes
36479	ENDOVEN ABLTJ INCMPTNT VEIN XTR LASER 2ND PLUS VEINS		Yes	Yes	Not Cov	No		Yes	Yes
36481	PRQ PORTAL VEIN CATHETERIZATION ANY METHOD		No	No	Not Cov	No		No	No
36482	ENDOVEN ABLTI THER CHEM ADHESIVE 1ST VEIN		Yes	Yes	Not Cov	No		Yes	Yes
36483	ENDOVEN ABLTI THER CHEM ADHESIVE SBSQ VEIN		Yes	Yes	Not Cov	No		Yes	Yes
36500	VEN CATHJ SLCTV ORGAN BLD SAMPLING		No	No	Not Cov	No		No	No
36510	CATHJ UMBILICAL VEIN DX THER NB		No	No	Not Cov	No		No	No
36511	THERAPEUTIC APHERESIS WHITE BLOOD CELLS		No	No	No	No		No	No
36512	THERAPEUTIC APHERESIS RED BLOOD CELLS		No	No	No	No		No	No
36513	THERAPEUTIC APHERESIS PLATELETS		No	No	No	No		No	No
36514	THERAPEUTIC APHERESIS PLASMA PHERESIS		Yes	Yes	Yes	No		Yes	Yes
36516	THER APHERESIS W EXTRACORPOREAL IMMUNOADSORPTION		No	No	Not Cov	No		No	No
36522	PHOTOPHERESIS EXTRACORPOREAL		No	No	No	No		No	No
36555	INSJ NON-TUNNELED CENTRAL VENOUS CATH AGE UNDER 5 Y		No	No	No	No		No	No
36556	INSJ NON-TUNNELED CENTRAL VENOUS CATH AGE 5 YR OR GRT		No	No	No	No		No	No
36557	INSERT TUNNELED CVC W O SUBQ PORT PMP AGE UNDER 5 YR		No	No	No	No		No	No
36558	INSJ TUNNELED CVC W O SUBQ PORT PMP AGE 5 YR OR GRT		No	No	No	No		No	No
36560	INSJ TUNNELED CTR VAD W SUBQ PORT UNDER 5 YR		No	No	No	No		No	No
36561	INSJ TUNNELED CTR VAD W SUBQ PORT AGE 5 YR OR GRT		No	No	No	No		No	No
36563	INSJ TUNNELED CTR VAD W SUBQ PUMP		No	No	No	No		No	No
36565	INSJ TUN VAD REQ 2 CATH 2 SITS W O SUBQ PORT PMP		No	No	No	No		No	No

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Code	Code Description	Comments	Apple Health & IMC Medical				IMC / BHSO (Mental Health covered svcs)	Medicare	Market Place
			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
36566	INSJ TUN VAD REQ 2 CATH 2 SITS W SUBQ PORT		No	No	No	No		No	No
36568	INSJ PRPH CVC W O SUBQ PORT PMP UNDER 5 YR		No	No	No	No		No	No
36569	INSJ PRPH CVC W O SUBQ PORT PMP AGE 5 YR OR GRT		No	No	No	No		No	No
36570	INSJ PRPH CTR VAD W SUBQ PORT UNDER 5 YR		No	No	No	No		No	No
36571	INSJ PRPH CTR VAD W SUBQ PORT AGE 5 YR OR GRT		No	No	No	No		No	No
36572	INSERTION PICC W RS AND I UNDER 5 YR		No	No	Not Cov	No		No	No
36573	INSERTION PICC W RS AND I 5 YR OR GRT		No	No	Not Cov	No		No	No
36575	RPR TUN NON-TUN CTR VAD CATH W O SUBQ PORT PMP		No	No	No	No		No	No
36576	RPR CTR VAD W SUBQ PORT PMP CTR PRPH INSJ SIT		No	No	No	No		No	No
36578	RPLCMT CATH CTR VAD SUBQ PORT PMP		No	No	No	No		No	No
36580	RPLCMT COMPL NON-TUN CVC W O SUBQ PORT PMP		No	No	No	No		No	No
36581	RPLCMT COMPL TUN CVC W O SUBQ PORT PMP		No	No	No	No		No	No
36582	RPLCMT COMPL TUN CTR VAD W SUBQ PORT		No	No	No	No		No	No
36583	RPLCMT COMPL TUN CTR VAD W SUBQ PMP		No	No	No	No		No	No
36584	RPLCMT COMPL PRPH CVC W O SUBQ PORT PMP		No	No	No	No		No	No
36585	RPLCMT COMPL PRPH CTR VAD W SUBQ PORT		No	No	No	No		No	No
36589	RMVL TUN CVC W O SUBQ PORT PMP		No	No	No	No		No	No
36590	RMVL TUN CTR VAD W SUBQ PORT PMP CTR PRPH INSJ		No	No	No	No		No	No
36591	COLLECT BLOOD FROM IMPLANT VENOUS ACCESS DEVICE		No	No	Not Cov	No		No	No
36592	COLLECT BLOOD FROM CATHETER VENOUS NOS		No	No	Not Cov	No		No	No
36593	DECLOT BY THROMBOLYTIC AGENT IMPLANT DEVICE CATH		No	No	Not Cov	No		No	No
36595	MCHNL RMVL PRICATH OBSTR CV DEV VIA VEN ACCESS		No	No	No	No		No	No
36596	MCHNL RMVL INTRAL OBSTR CV DEV THRU DEV LUMEN		No	No	No	No		No	No
36597	RPSG PREVIOUSLY PLACED CVC UNDER FLUOR GDNCE		No	No	No	No		No	No
36598	CNTRST NJX RAD EVAL CTR VAD FLUOR IMG AND REPRT		No	No	Not Cov	No		No	No
36600	ARTERIAL PUNCTURE WITHDRAWAL BLOOD DX		No	No	Not Cov	No		No	No
36620	ARTL CATHJ CANNULJ MNTR TRANSFUSION SPX PRQ		No	No	Not Cov	No		No	No
36625	ARTL CATHJ CANNULJ MNTR TRANSFUSION SPX CUTDOWN		No	No	Not Cov	No		No	No
36640	ARTL CATHJ PROLNG NFS THER CHEMOTX CUTDOWN		No	No	No	No		No	No
36660	CATHETERIZATION UMBILICAL NEWBORN ART DX THERAPY		Not Cov	No	Not Cov	No		No	No
36680	PLACEMENT NEEDLE INTRAOSSEOUS INFUSION		No	No	No	No		No	No
36800	INSJ CANNULA HEMO OTH PURPOSE SPX VEIN VEIN		No	No	No	No		No	No
36810	INSJ CANNULA HEMO OTH PURPOSE SPX ARVEN XTRNL		No	No	No	No		No	No
36815	INSJ CANNULA HEMO OTH SPX ARVEN XTRNL REVJ CLSR		No	No	No	No		No	No
36818	ARVEN ANAST OPN UPR ARM CEPHALIC VEIN TRPOS		No	No	No	No		No	No
36819	ARVEN ANAST OPN UPR ARM BASILIC VEIN TRPOS		No	No	No	No		No	No
36820	ARVEN ANAST OPN F ARM VEIN TRPOS		No	No	No	No		No	No
36821	ARTERIOVENOUS ANASTOMOSIS OPEN DIRECT		No	No	No	No		No	No
36823	INSJ CNULA ISLTD XC-CIRCJ REG CHEMOTX XTR RMVL		No	No	Not Cov	No		No	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
36825	CRTJ ARVEN FSTL XCP DIR ARVEN ANAST AUTOG GRF		No	No	No	No		No	No
36830	CRTJ ARVEN FSTL XCP DIR ARVEN ANAST NONAUTOG GRF		No	No	No	No		No	No
36831	THRMBC OPN ARVEN FSTL W O REVJ DIAL GRF		No	No	No	No		No	No
36832	REVJ OPN ARVEN FSTL W O THRMBC DIAL GRF		No	No	No	No		No	No
36833	REVJ OPN ARVEN FSTL W THRMBC DIAL GRF		No	No	No	No		No	No
36835	INSERTION THOMAS SHUNT SEPARATE PROCEDURE		No	No	No	No		No	No
36838	DSTL REVSC AND INTERVAL LIG UXTR HEMO ACCESS		No	No	Not Cov	No		No	No
36860	XTRNL CANNULA DECLTNG SPX W O BALO CATH		No	No	No	No		No	No
36861	XTRNL CANNULA DECLTNG SPX W BALO CATH		No	No	No	No		No	No
36901	INTRO CATH DIALYSIS CIRCUIT DX ANGRPH FLUOR S AND I		No	No	Not Cov	No		No	No
36902	INTRO CATH DIALYSIS CIRCUIT W TRLUML BALO ANGIOP		No	No	Not Cov	No		No	No
36903	INTRO CATH DIALYSIS CIRCUIT W TCAT PLMT IV STENT		No	No	Not Cov	No		No	No
36904	PERQ THRMBC NFS DIALYSIS CIRCUIT IMG DX ANGRPH		No	No	Not Cov	No		No	No
36905	PERQ THRMBC NFS DIAL CIRCUIT TRLUML BALO ANGIOP		No	No	Not Cov	No		No	No
36906	PERQ THRMBC NFS DIAL CIRCUIT TCAT PLMT IV STENT		No	No	Not Cov	No		No	No
36907	TRLUML BALO ANGIOP CTR DIALYSIS SEG W IMG S AND I		Not Cov	No	Not Cov	No		No	No
36908	STENT PLMT CENTRAL DIAALYSIS SEG PFRMD DIAL CIR		Not Cov	No	Not Cov	No		No	No
36909	DIALYSIS CIRCUIT VASC EMBOLI OCCLS EVASC IMG S AND I		Not Cov	No	Not Cov	No		No	No
37140	VENOUS ANASTOMOSIS OPEN PORTOCAVAL		Not Cov	No	Not Cov	No		No	No
37145	VENOUS ANASTOMOSIS OPEN RENOPORTAL		No	No	Not Cov	No		No	No
37160	VENOUS ANASTOMOSIS OPEN CAVAL-MESENERIC		Not Cov	No	Not Cov	No		No	No
37180	VENOUS ANASTOMOSIS OPEN SPLENORENAL PROXIMAL		Not Cov	No	Not Cov	No		No	No
37181	VENOUS ANASTOMOSIS OPEN SPLENORENAL DISTAL		Not Cov	No	Not Cov	No		No	No
37182	INSJ TRANSVNS INTRAHEPATC PORTOSYSIC SHUNT		Not Cov	No	Not Cov	No		No	No
37183	REVJ TRANSVNS INTRAHEPATIC PORTOSYSTEMIC SHUNT		No	No	Not Cov	No		No	No
37184	PRIM PRQ TRLUML MCHNL THRMBC N-COR N-ICRA 1ST		No	No	No	No		No	No
37185	PRIM PRQ TRLUML MCHNL THRMBC N-COR N-ICRA SBSQ		No	No	No	No		No	No
37186	SEC PRQ TRLUML THRMBC N-CORONARY N-INTRACRANIAL		No	No	No	No		No	No
37187	PRQ TRANSLUMINAL MECHANICAL THROMBECTOMY VEIN		No	No	No	No		No	No
37188	PRQ TRLUML MCHNL THRMBC VEIN REPEAT TX		No	No	No	No		No	No
37191	INS INTRVAS VC FILTR W WO VAS ACS VSL SELXN RS AND I		Yes	Yes	Not Cov	No		Yes	Yes
37192	REPSNG INTRVAS VC FILTR W WO ACS VSL SELXN RS AND I		No	No	Not Cov	No		No	No
37193	RTRVL INTRVAS VC FILTR W WO ACS VSL SELXN RS AND I		No	No	Not Cov	No		No	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
37195	THROMBOLYSIS CEREBRAL IV INFUSION		No	No	Not Cov	No		No	No
37197	PRQ TRANSCATHETER RTRVL INTRVAS FB WITH IMAGING		No	No	No	No		No	No
37200	TRANSCATHETER BIOPSY		No	No	No	No		No	No
37211	THROMBOLYSIS ARTERIAL INFUSION ICRA RS AND I INIT TX		Not Cov	No	Not Cov	No		No	No
37212	THROMBOLYSIS VENOUS INFUSION W IMAGING INIT TX		Not Cov	No	Not Cov	No		No	No
37213	THROMBOLYSIS ART VENOUS INFSN W IMAGE SUBSQ TX		Not Cov	No	Not Cov	No		No	No
37214	CESSATION THROMBOLYTIC THER W CATHETER REMOVAL		Not Cov	No	Not Cov	No		No	No
37215	TCAT IV STENT CRV CRTD ART EMBOLIC PROTECJ		Not Cov	No	Not Cov	No		No	No
37216	TCAT IV STENT CRV CRTD ART W O EMBOLIC PROTECJ		Not Cov	No	Not Cov	No		Not Cov	No
37217	TCATH STENT PLACEMT RETROGRAD CAROTID INNOMINATE		Not Cov	No	Not Cov	No		No	No
37218	TCATH STENT PLACEMT ANTEGRADE CAROTID INNOMINATE		Not Cov	No	Not Cov	No		No	No
37220	REVASCULARIZATION ILIAC ARTERY ANGIOP 1ST VSL		No	No	No	No		No	No
37221	REVSC OPN PRQ ILIAC ART W STNT PLMT AND ANGIOPLSTY		No	No	No	No		No	No
37222	REVASCULARIZATION ILIAC ART ANGIOP EA IPSI VSL		No	No	No	No		No	No
37223	REVSC OPN PRQ ILIAC ART W STNT AND ANGIOP IPSILATL		No	No	No	No		No	No
37224	REVSC OPN PRG FEM POP W ANGIOPLASTY UNI		No	No	No	No		No	No
37225	REVSC OPN PRQ FEM POP W ATHRC ANGIOP SM VSL		No	No	No	No		No	No
37226	REVSC OPN PRQ FEM POP W STNT ANGIOP SM VSL		No	No	No	No		No	No
37227	REVSC OPN PRQ FEM POP W STNT ATHRC ANGIOP SM VSL		No	No	Not Cov	No		No	No
37228	REVSC OPN PRQ TIB PERO W ANGIOPLASTY UNI		No	No	No	No		No	No
37229	REVSC OPN PRQ TIB PERO W ATHRC ANGIOP SM VSL		No	No	No	No		No	No
37230	REVSC OPN PRQ TIB PERO W STNT ANGIOP SM VSL		No	No	No	No		No	No
37231	REVSC OPN PRQ TIB PERO W STNT ATHR ANGIOP SM VSL		No	No	Not Cov	No		No	No
37232	REVSC OPN PRQ TIB PERO W ANGIOPLASTY UNI EA VSL		No	No	No	No		No	No
37233	REVSC OPN PRQ TIB PERO W ATHRC ANGIOP UNI EA VSL		No	No	No	No		No	No
37234	REVSC OPN PRQ TIB PERO W STNT ANGIOP UNI EA VSL		No	No	No	No		No	No
37235	REVSC OPN PRQ TIB PERO W STNT ATHR ANGIOP EA VSL		No	No	No	No		No	No
37236	OPEN PERQ PLACEMENT INTRAVASCULAR STENT INITIAL		No	No	No	No		No	No
37237	OPEN PERQ PLACEMENT INTRAVASCULAR STENT EA ADDL		No	No	No	No		No	No
37238	OPEN PERQ PLACEMENT INTRAVASCULAR STENT SAME 1ST		No	No	No	No		No	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
37239	OPEN PERQ PLACEMENT INTRAVASC STENT SAME EA ADDL		No	No	No	No		No	No
37241	VASCULAR EMBOLIZATION OR OCCLUSION VENOUS RS AND I		No	No	Not Cov	No		No	No
37242	VASCULAR EMBOLIZATION OR OCCLUSION ARTERIAL RS AND I		No	No	Not Cov	No		No	No
37243	VASCULAR EMBOLIZE OCCLUDE ORGAN TUMOR INFARCT		Yes	Yes	Not Cov	No		Yes	Yes
37244	VASCULAR EMBOLIZATION OR OCCLUSION HEMORRHAGE		No	No	Not Cov	No		No	No
37246	TRLML BALO ANGIOP OPEN PERQ IMG S AND I 1ST ART		Not Cov	No	Not Cov	No		No	No
37247	TRLML BALO ANGIOP OPEN PERQ IMG S AND I EA ADDL ART		Not Cov	No	Not Cov	No		No	No
37248	TRLML BALO ANGIOP OPEN PERQ W IMG S AND I 1ST VEIN		Not Cov	No	Not Cov	No		No	No
37249	TRLML BALO ANGIOP OPEN PERQ W IMG S AND I ADDL VEIN		Not Cov	No	Not Cov	No		No	No
37252	INTRAVASCULAR US NONCORONARY RS AND I INTIAL VESSEL		No	No	Not Cov	No		No	No
37253	INTRAVASCULAR US NONCORONARY RS AND I ADDL VESSEL		No	No	Not Cov	No		No	No
37500	VASC ENDOSCOPY SURG W LIG PERFORATOR VEINS SPX		No	No	No	No		No	No
37501	UNLISTED VASCULAR ENDOSCOPY PROCEDURE		Yes	Yes	Not Cov	Yes		Yes	Yes
37565	LIGATION INTERNAL JUGULAR VEIN		No	No	Not Cov	No		No	No
37600	LIGATION EXTERNAL CAROTID ARTERY		No	No	Not Cov	No		No	No
37605	LIGATION INTERNAL COMMON CAROTID ARTERY		No	No	Not Cov	No		No	No
37606	LIG INT COMMON CAROTID ART W GRADUAL OCCLUSION		No	No	Not Cov	No		No	No
37607	LIG BANDING ANGIOACCESS ARTERIOVENOUS FISTULA		No	No	No	No		No	No
37609	LIGATION BIOPSY TEMPORAL ARTERY		No	No	No	No		No	No
37615	LIGATION MAJOR ARTERY NECK		No	No	Not Cov	No		No	No
37616	LIGATION MAJOR ARTERY CHEST		Not Cov	No	Not Cov	No		No	No
37617	LIGATION MAJOR ARTERY ABDOMEN		Not Cov	No	Not Cov	No		No	No
37618	LIGATION MAJOR ARTERY EXTREMITY		No	No	Not Cov	No		No	No
37619	INS INTRVAS VC FILTR W WO VAS ACS VSL SELXN RS AND I		No	No	Not Cov	No		No	No
37650	LIGATION OF FEMORAL VEIN		No	No	No	No		No	No
37660	LIGATION OF COMMON ILIAC VEIN		Not Cov	No	Not Cov	No		No	No
37700	LIG AND DIV LONG SAPH VEIN SAPHFEM JUNCT INTERRUPT		Yes	Yes	Yes	No		Yes	Yes
37718	LIGJ DIVJ AND STRIPPING SHORT SAPHENOUS VEIN		Yes	Yes	Yes	No		Yes	Yes
37722	LIGJ DIVJ AND STRIP LONG SAPH SAPHFEM JUNCT KNE BELW		Yes	Yes	Yes	No		Yes	Yes
37735	LIGJ AND DIVJ RADICAL STRIP LONG SHORT SAPHENOUS		Yes	Yes	Yes	No		Yes	Yes

This prior authorization guide applies to Medicaid, Medicare, and Marketplace.

DOS Effective 10/1/19; Posted 10/30/19

All Inpatient services require prior authorization

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*** All Medicare services subject to the limitations in the CMS billing guide and fee schedules at <https://www.cms.gov/> ***

Code	Code Description	Comments	Apple Health & IMC Medical				IMC / BHSO (Mental Health covered svcs)	Medicare	Market Place
			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
37760	LIG PRFRATR VEIN SUBFSCAL RAD INCL SKN GRF 1 LEG		Yes	Yes	Yes	No		Yes	Yes
37761	LIG PRFRATR VEIN SUBFSCAL OPEN INCL US GID 1 LEG		Yes	Yes	Yes	No		Yes	Yes
37765	STAB PHLEBT VARICOSE VEINS 1 XTR 10-20 STAB INCS		Yes	Yes	Not Cov	No		Yes	Yes
37766	STAB PHLEBT VARICOSE VEINS 1 XTR OVER 20 INCS		Yes	Yes	Not Cov	No		Yes	Yes
37780	LIGJ AND DIV SHORT SAPH VEIN SAPHENOPOP JUNCT SPX		Yes	Yes	Yes	No		Yes	Yes
37785	LIGJ DIVJ AND EXCJ VARICOSE VEIN CLUSTER 1 LEG		Yes	Yes	Yes	No		Yes	Yes
37788	PENILE REVASCLARIZATION ARTERY W WO VEIN GRAFT		Not Cov	No	Not Cov	No		No	No
37790	PENILE VENOUS OCCLUSIVE PROCEDURE		No	No	No	No		No	No
37799	UNLISTED PROCEDURE VASCULAR SURGERY		Yes	Yes	Not Cov	Yes		Yes	Yes
38100	SPLENECTOMY TOTAL SEPARATE PROCEDURE		Not Cov	No	Not Cov	No		No	No
38101	SPLENECTOMY TOTAL EN BLOC W OTHER PROCEDURE		Not Cov	No	Not Cov	No		No	No
38102	SPLENC TOT EN BLOC EXTNSV DS CONJUNCT W OTH PX		Not Cov	No	Not Cov	No		No	No
38115	RPR RPTD SPLEEN SPLENORRHAPHY W WO PRTL SPLENECT		Not Cov	No	Not Cov	No		No	No
38120	LAPAROSCOPIC SURGICAL SPLENECTOMY		No	No	Not Cov	No		No	No
38129	UNLISTED LAPAROSCOPY PROCEDURE SPLEEN		Yes	Yes	Not Cov	Yes		Yes	Yes
38200	INJECTION PROCEDURE SPLENOPTOGRAPY		No	No	Not Cov	No		No	No
38204	MGMT RCP HEMATOP PROGENITOR CELL DONOR AND ACQUISJ		Yes	Yes	Not Cov	Yes		Not Cov	Yes
38205	BLD-DRV HEMATOP PROGEN CELL HRVG TRNSPLJ ALGNC		Not Cov	Yes	Not Cov	Yes		Yes	Yes
38206	BLD-DRV HEMATOP PROGEN CELL HRVG TRNSPLJ AUTOL		Yes	Yes	Not Cov	Yes		Yes	Yes
38207	TRNSPL PREPJ HEMATOP PROGEN CELLS CRYOPRSRV STOR		Yes	Yes	Not Cov	No		Not Cov	Yes
38208	TRNSPL PREP HEMATOP PROGEN THAW PREV HRV PER DNR		Yes	Yes	Not Cov	No		Not Cov	Yes
38209	TRNSP PREP HEMATOP PROG THAW PREV HRV WSH PER DNR		Yes	Yes	Not Cov	No		Not Cov	Yes
38210	TRNSPL PREPJ HEMATOP PROGEN DEPLJ IN HRV T-CELL		Yes	Yes	Not Cov	No		Not Cov	Yes
38211	TRNSPL PREPJ HEMATOP PROGEN TUM CELL DEPLJ		Yes	Yes	Not Cov	No		Not Cov	Yes
38212	TRNSPL PREPJ HEMATOP PROGEN RED BLD CELL RMVL		Yes	Yes	Not Cov	No		Not Cov	Yes
38213	TRNSPL PREPJ HEMATOP PROGEN PLTLT DEPLJ		Yes	Yes	Not Cov	No		Not Cov	Yes
38214	TRNSPL PREPJ HEMATOP PROGEN PLSM VOL DEPLJ		Yes	Yes	Not Cov	No		Not Cov	Yes
38215	TRNSPL PREPJ HEMATOP PROGEN CONCENTRATION PLSM		Yes	Yes	Not Cov	No		Not Cov	Yes
38220	DIAGNOSTIC BONE MARROW ASPIRATIONS		No	No	Not Cov	No		No	No
38221	DIAGNOSTIC BONE MARROW BIOPSIES		No	No	Not Cov	No		No	No
38222	DIAGNOSTIC BONE MARROW BIOPSIES AND ASPIRATIONS		No	No	Not Cov	No		No	No
38230	BONE MARROW HARVEST TRANSPLANTATION ALLOGENEIC		Yes	Yes	Not Cov	Yes		Yes	Yes
38232	BONE MARROW HARVEST TRANSPLANTATION AUTOLOGOUS		Yes	Yes	Not Cov	No		Yes	Yes

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
38240	TRNSPLJ ALLOGENEIC HEMATOPOIETIC CELLS PER DONOR		Yes	Yes	Not Cov	Yes		Yes	Yes
38241	TRNSPLJ AUTOLOGOUS HEMATOPOIETIC CELLS PER DONOR		Yes	Yes	Not Cov	Yes		Yes	Yes
38242	ALLOGENEIC LYMPHOCYTE INFUSIONS		Yes	Yes	Not Cov	Yes		Yes	Yes
38243	TRNSPLJ HEMATOPOIETIC CELL BOOST		Not Cov	Yes	Not Cov	Yes		Yes	Yes
38300	DRG LYMPH NODE ABSC LYMPHADENITIS SMPL		No	No	No	No		No	No
38305	DRG LYMPH NODE ABSC LYMPHADENITIS EXTNSV		No	No	No	No		No	No
38308	LYMPHANGIOTOMY OTH OPRATIONS LYMPHATIC CHANNELS		No	No	No	No		No	No
38380	SUTR AND LIG THORACIC DUCT CERVICAL APPROACH		No	No	Not Cov	No		No	No
38381	SUTR AND LIG THORACIC DUCT THORACIC APPROACH		Not Cov	No	Not Cov	No		No	No
38382	SUTR AND LIG THORACIC DUCT ABDOMINAL APPROACH		Not Cov	No	Not Cov	No		No	No
38500	BX EXC LYMPH NODE OPEN SUPERFICIAL		No	No	No	No		No	No
38505	BX EXC LYMPH NODE NEEDLE SUPERFICIAL		No	No	No	No		No	No
38510	BX EXC LYMPH NODE OPEN DEEP CERVICAL NODE		No	No	No	No		No	No
38520	BX EXC LYMPH NODE OPN DP CRV NODE W EXC FAT PAD		No	No	No	No		No	No
38525	BX EXC LYMPH NODE OPEN DEEP AXILLARY NODE		No	No	No	No		No	No
38530	BX EXC LYMPH NODE OPEN INT MAMMARY NODE		No	No	No	No		No	No
38531	OPEN BIOPSY EXCISION INGUINOFEMORAL NODES		No	No	Not Cov	No		No	No
38542	DISSECTION DEEP JUGULAR NODE		No	No	No	No		No	No
38550	EXC CSTIC HYGROMA AX CRV W O DP NEUROVASC DSJ		No	No	No	No		No	No
38555	EXC CSTIC HYGROMA AX CRV W DP NEUROVASC DSJ		No	No	No	No		No	No
38562	LMTD LMPHADEC STAGING SPX PEL AND PARA-AORTIC		Not Cov	No	Not Cov	No		No	No
38564	LMTD LMPHADEC STAGING SPX RPR AORTIC AND SPLENIC		Not Cov	No	Not Cov	No		No	No
38570	LAPS SURG RETROPERITONEAL LYMPH NODE BX 1 MLT		No	No	No	No		No	No
38571	LAPS SURG BILATERAL TOTAL PELVIC LMPHADECTOMY		No	No	No	No		No	No
38572	LAPS BI TOT PEL LMPHADEC AND PRI-AORTIC LYMPH BX 1		No	No	No	No		No	No
38573	LAPS W BI TOT PEL LMPHADEC AND OMNTC LYMPH BX		Not Cov	Yes	Not Cov	No		Yes	Yes
38589	UNLISTED LAPAROSCOPY PX LYMPHATIC SYSTEM		Yes	Yes	Not Cov	Yes		Yes	Yes
38700	SUPRAHYOID LYMPHADENECTOMY		No	No	No	No		No	No
38720	CERVICAL LYMPHADENECTOMY		No	No	Not Cov	No		No	No
38724	CERVICAL LYMPHADEC MODIFIED RADICAL NECK DSJ		Not Cov	No	Not Cov	No		No	No
38740	AXILLARY LYMPHADENECTOMY SUPERFICIAL		No	No	No	No		No	No
38745	AXILLARY LYMPHADENECTOMY COMPLETE		No	No	No	No		No	No
38746	THORCOM THRC W MEDSTNL AND REGIONAL LMPHADEC		No	No	Not Cov	No		No	No
38747	ABDL LMPHADEC REG CELIAC GSTR PORTAL PRIPNCRTC		Not Cov	No	Not Cov	No		No	No
38760	INGUINOFEM LMPHADEC SUPFC W CLOQUETS NODE SPX		No	No	No	No		No	No
38765	INGUINOFEM LMPHADEC SUPFC W PEL LMPHADEC		Not Cov	No	Not Cov	No		No	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
38770	PEL LMPHADEC W XTRNL ILIAC HYPOGSTR AND OBTURATOR		Not Cov	No	Not Cov	No		No	No
38780	RPR TABDL LMPHADEC EXTNSV W PEL AORTIC AND RNL		Not Cov	No	Not Cov	No		No	No
38790	INJECTION PROCEDURE LYMPHANGIOGRAPHY		No	No	Not Cov	No		No	No
38792	INJ RADIOACTIVE TRACER FOR ID OF SENTINEL NODE		No	No	Not Cov	No		No	No
38794	CANNULATION THORACIC DUCT		No	No	Not Cov	No		No	No
38900	INTRAOP SENTINEL LYMPH NODE ID W DYE INJECTION		No	No	Not Cov	No		No	No
38999	UNLISTED PROCEDURE HEMIC OR LYMPHATIC SYSTEM		Yes	Yes	Not Cov	Yes		Yes	Yes
39000	MEDIAST W EXPL DRG RMVL FB BX CRV APPR		No	No	Not Cov	No		No	No
39010	MEDIAST W EXPL DRG RMVL FB BX TTHRC APPR		No	No	Not Cov	No		No	No
39200	RESECTION OF MEDIASTINAL CYST		Not Cov	No	Not Cov	No		No	No
39220	RESECTION MEDIASTINAL TUMOR		Not Cov	No	Not Cov	No		No	No
39401	MEDIASTINOSCOPY INCLUDES MEDIASTINAL MASS BIOPSY		No	No	Not Cov	No		No	No
39402	MEDIASTINOSCOPY WITH LYMPH NODE BIOPSY IES		No	No	Not Cov	No		No	No
39499	UNLISTED PROCEDURE MEDIASTINUM		Yes	Yes	Not Cov	Yes		Yes	Yes
39501	REPAIR LACERATION DIAPHRAGM ANY APPROACH		Not Cov	No	Not Cov	No		No	No
39503	RPR NEONATAL DIPHRG HERNIA W WO CHEST TUBE INSJ		Not Cov	No	Not Cov	No		No	No
39540	RPR DIPHRG HRNA OTH THN NEONATAL TRAUMTC AQT		Not Cov	No	Not Cov	No		No	No
39541	RPR DIPHRG HRNA OTH THN NEONATAL TRAUMTC CHRNC		Not Cov	No	Not Cov	No		No	No
39545	IMBRICATION DIAPHRAGM EVENTRATION		No	No	Not Cov	No		No	No
39560	RESCJ DIAPHRAGM W SIMPLE REPAIR		Not Cov	No	Not Cov	No		No	No
39561	RESCJ DIAPHRAGM W COMPLEX REPAIR		Not Cov	No	Not Cov	No		No	No
39599	UNLISTED PROCEDURE DIAPHRAGM		Yes	Yes	Not Cov	Yes		Yes	Yes
40490	BIOPSY OF LIP		No	No	Not Cov	No		No	No
40500	VERMILIONECTOMY LIP SHV W MUCOSAL ADVMNT		No	No	No	No		No	No
40510	EXC LIP TRANSVRS WEDGE EXC W PRIM CLSR		No	No	No	No		No	No
40520	EXC LIP V-EXC W PRIM DIR LINR CLSR		No	No	No	No		No	No
40525	EXC LIP FULL THKNS RCNSTJ W LOCAL FLAP		No	No	No	No		No	No
40527	EXC LIP FULL THKNS RCNSTJ W CROSS LIP FLAP		No	No	No	No		No	No
40530	RESCJ LIP OVER ONE-FOURTH W O RCNSTJ		No	No	No	No		No	No
40650	RPR LIP FULL THICKNESS VERMILION ONLY		No	No	No	No		No	No
40652	RPR LIP FULL THICKNESS HALF OR LESS VERTICAL HEIGHT		No	No	No	No		No	No
40654	RPR LIP FULL THKNS OVER ONE-HALF VERT HEIGHT COMPLE		No	No	No	No		No	No
40700	PLSTC RPR CL LIP NSL DFRM PRIM PRTL COMPL UNI		No	No	No	No		No	No
40701	PLSTC RPR CL LIP NSL DFRM PRIM BI 1 STG PX		No	No	No	No		No	No
40702	PLSTC RPR CL LIP NSL DFRM PRIM BI 1 2 STGS		No	No	Not Cov	No		No	No
40720	PLSTC RPR CL LIP NSL DFRM SEC RECRTJ DFCT AND RECL		No	No	No	No		No	No
40761	PLSTC RPR CL LIP NSL DFRM W CROSS LIP PEDCL FLAP		No	No	No	No		No	No
40799	UNLISTED PROCEDURE LIPS		Yes	Yes	Not Cov	Yes		Yes	Yes

Guide is subject to change at any time. If a member belongs to a group delegated for UM, contact that group for authorization. Claim payment is subject to eligibility and benefits at the time of service. Claim processing edits will apply.

This prior authorization guide applies to Medicaid, Medicare, and Marketplace.

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
40800	DRG ABSC CST HMTMA VESTIBULE MOUTH SMPL		No	No	Not Cov	No	No	No	
40801	DRG ABSC CST HMTMA VESTIBULE MOUTH COMP		No	No	No	No	No	No	
40804	RMVL EMBEDDED FB VESTIBULE MOUTH SMPL		No	No	Not Cov	No	No	No	
40805	RMVL EMBEDDED FB VESTIBULE MOUTH COMP		No	No	Not Cov	No	No	No	
40806	INCISION LABIAL FRENUM FRENOTOMY		No	No	Not Cov	No	No	No	
40808	BIOPSY VESTIBULE MOUTH		No	No	Not Cov	No	No	No	
40810	EXC LES MUCOSA AND SBMCSL VESTIBULE MOUTH W O RPR		No	No	Not Cov	No	No	No	
40812	EXC LESION MUCOSA AND SBMCSL VESTIBULE SMPL RPR		No	No	Not Cov	No	No	No	
40814	EXC LESION MUCOSA AND SBMCSL VESTIBULE CPLX RPR		No	No	No	No	No	No	
40816	EXC LESION MUCOSA AND SBMCSL VESTIBULE CPLX EXC MUSC		No	No	No	No	No	No	
40818	EXC MUCOSA VESTIBULE MOUTH AS DON GRF		No	No	No	No	No	No	
40819	EXC FRENUM LABIAL BUCCAL		No	No	No	No	No	No	
40820	DSTRJ LES SCAR VESTIBULE MOUTH PHYSICAL METHS		No	No	Not Cov	No	No	No	
40830	CLOSURE LACERATION VESTIBULE MOUTH 2.5 CM OR LESS		No	No	No	No	No	No	
40831	CLOSURE LACERATION VESTIBULE MOUTH OVER 2.5 CM CPL		No	No	No	No	No	No	
40840	VESTIBULOPLASTY ANTERIOR		No	No	No	No	No	No	
40842	VESTIBULOPLASTY POSTERIOR UNILATERAL		No	No	No	No	No	No	
40843	VESTIBULOPLASTY POSTERIOR BILATERAL		No	No	No	No	No	No	
40844	VESTIBULOPLASTY ENTIRE ARCH		No	No	No	No	No	No	
40845	VESTIBULOPLASTY CPLX W RIDGE XTN MUSC RPSG		No	No	No	No	No	No	
40899	UNLISTED PROCEDURE VESTIBULE MOUTH		Yes	Yes	Not Cov	Yes	Yes	Yes	
41000	INTRAORAL I AND D TONGUE FLOOR LINGUAL		No	No	Not Cov	No	No	No	
41005	INTRAORAL I AND D TONGUE FLOOR SUBLNGL SUPFC		No	No	No	No	No	No	
41006	INTRAORAL I AND D TONGUE FLOOR SUBLNGL DP SPRMLHYD		No	No	No	No	No	No	
41007	INTRAORAL I AND D TONGUE FLOOR SUBMENTAL SPACE		No	No	No	No	No	No	
41008	INTRAORAL I AND D TONGUE FLOOR SUBMNDBLR SPACE		No	No	No	No	No	No	
41009	INTRAORAL I AND D TONGUE FLOOR MASTICATOR SPACE		No	No	No	No	No	No	
41010	INCISION LINGUAL FRENUM FRENOTOMY		No	No	No	No	No	No	
41015	XTRORAL I AND D ABSC CST HMTMA FLOOR MOUTH SUBLNGL		No	No	No	No	No	No	
41016	XTRORAL I AND D ABSC CST HMTMA FLOOR MOUTH SUBMENT		No	No	No	No	No	No	
41017	XTRORAL I AND D ABSC CST HMTMA FLOOR MOUTH SUBMNDDB		No	No	No	No	No	No	
41018	XTRORAL I AND D FLOOR MASTICATOR SPACE		No	No	No	No	No	No	
41019	PLACEMENT NEEDLE HEAD NECK RADIOELEMENT APPLICAT		No	No	No	No	No	No	

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
41100	BIOPSY TONGUE ANTERIOR TWO-THIRDS		No	No	Not Cov	No	No	No	
41105	BIOPSY TONGUE POSTERIOR ONE-THIRD		No	No	Not Cov	No	No	No	
41108	BIOPSY FLOOR MOUTH		No	No	Not Cov	No	No	No	
41110	EXCISION LESION TONGUE W O CLOSURE		No	No	Not Cov	No	No	No	
41112	EXC LESION TONGUE W CLSR ANTERIOR TWO-THIRDS		No	No	No	No	No	No	
41113	EXC LESION TONGUE W CLSR POSTERIOR ONE-THIRD		No	No	No	No	No	No	
41114	EXC LESION TONGUE W CLSR W LOCAL TONGUE FLAP		No	No	No	No	No	No	
41115	EXCISION LINGUAL FRENUM FRENECTOMY		No	No	Not Cov	No	No	No	
41116	EXCISION LESION FLOOR MOUTH		No	No	No	No	No	No	
41120	GLOSSECTOMY UNDER ONE-HALF TONGUE		No	No	No	No	No	No	
41130	GLOSSECTOMY HEMIGLOSSECTOMY		No	No	Not Cov	No	No	No	
41135	GLOSSECTOMY PRTL W UNI RADICAL NECK DSJ		Not Cov	No	Not Cov	No	No	No	
41140	GLSSC COMPL TOT W WOTRACHS W O RAD NECK DSJ		Not Cov	No	Not Cov	No	No	No	
41145	GLSSC COMPL TOT W WO TRACHS W UNI RAD NECK DSJ		Not Cov	No	Not Cov	No	No	No	
41150	GLSSC COMPOSIT W RESCJ FLOOR AND MANDIBULAR RESCJ		Not Cov	No	Not Cov	No	No	No	
41153	GLSSC COMPOSIT RESCJ FLOOR SUPRAHYOID NCK DSJ		Not Cov	No	Not Cov	No	No	No	
41155	GLSSC COMPOSIT RESCJ FLR MNDBLR RESCJ AND RAD NECK		Not Cov	No	Not Cov	No	No	No	
41250	RPR LAC 2.5 CM OR LESS MOUTH AND ANT TWO-THIRDS TONG		No	No	No	No	No	No	
41251	RPR LAC 2.5 CM OR LESS PST ONE-THIRD TONGUE		No	No	No	No	No	No	
41252	RPR LAC TONGUE FLOOR MOUTH OVER 2.6 CM CPLX		No	No	No	No	No	No	
41510	SUTURE TONGUE LIP MICROGNATHIA		No	No	No	No	No	No	
41512	TONGUE BASE SUSPENSION PERMANENT SUTURE TQ		No	No	No	No	No	No	
41520	FRENOPLASTY SURG REVJ FRENUM EG W Z-PLASTY		No	No	No	No	No	No	
41530	SUBMUCOSAL ABLTJ TONGUE RF 1 OR GRT SITES PR SESSION		No	No	No	No	No	No	
41599	UNLISTED PROCEDURE TONGUE FLOOR MOUTH		Yes	Yes	Not Cov	Yes	Yes	Yes	
41800	DRG ABSC CST HMTMA FROM DENTOALVEOLAR STRUXS		No	No	No	No	No	No	
41805	RMVL EMBEDDED FB FROM DENTALVLR STRUXS SOFT TISS		No	No	Not Cov	No	No	No	
41806	RMVL EMBEDDED FB FROM DENTOALVEOLAR STRUXS BONE		No	No	Not Cov	No	No	No	
41820	GINGIVECTOMY EXC GINGIVA EACH QUADRANT		No	No	Not Cov	No	Not Cov	No	
41821	OPRCULECTOMY EXC PRICORONAL TISSUE		No	No	No	No	Not Cov	No	
41822	EXC FIBROUS TUBEROSITIES DENTOALVEOLAR STRUXS		No	No	Not Cov	No	Not Cov	No	
41823	EXC OSS TUBEROSITIES DENTOALVEOLAR STRUXS		No	No	Not Cov	No	Not Cov	No	
41825	EXC LESION TUMOR DENTOALVEOLAR STRUX W O RPR		No	No	Not Cov	No	No	No	
41826	EXC LESION TUMOR DENTOALVEOLAR STRUX W SMPL RPR		No	No	Not Cov	No	No	No	
41827	EXC LESION TUMOR DENTALVEOLAR STRUX W CMLPX RPR		No	No	No	No	No	No	
41828	EXC HYPRPLSTC ALVEOLAR MUCOSA EA QUADRANT SPEC		No	No	Not Cov	No	Not Cov	No	

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			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
41830	ALVEOLECTOMY W CURTG OSTEITIS SEQUESTRECTOMY		No	No	Not Cov	No		Not Cov	No
41850	DESTRUCTION LESION DENTOALVEOLAR STRUCTURES		No	No	Not Cov	No		Not Cov	No
41870	PERIODONTAL MUCOSAL GRAFTING		No	No	No	No		Not Cov	No
41872	GINGIVOPLASTY EACH QUADRANT SPECIFY		No	No	Not Cov	No		Not Cov	No
41874	ALVEOLOPLASTY EACH QUADRANT SPECIFY		No	No	Not Cov	No		Not Cov	No
41899	UNLISTED PROCEDURE DENTOALVEOLAR STRUCTURES		Not Cov	Yes	Not Cov	Yes		No	Yes
42000	DRAINAGE ABSCESS PALATE UVULA		No	No	No	No		No	No
42100	BIOPSY PALATE UVULA		No	No	Not Cov	No		No	No
42104	EXC LESION PALATE UVULA W O CLOSURE		No	No	Not Cov	No		No	No
42106	EXC LESION PALATE UVULA W SMPL PRIM CLOSURE		No	No	Not Cov	No		No	No
42107	EXC LESION PALATE UVULA W LOCAL FLAP CLOSURE		No	No	No	No		No	No
42120	RESCJ PALATE EXTENSIVE RESCJ LESION		No	No	No	No		No	No
42140	UVULECTOMY EXCISION UVULA		No	No	No	No		No	No
42145	PALATOPHARYNGOPLASTY		No	No	No	No		No	No
42160	DSTRJ LESION PALATE UVULA THERMAL CRYO CHEM		No	No	Not Cov	No		No	No
42180	REPAIR LACERATION PALATE UNDER 2 CM		No	No	No	No		No	No
42182	REPAIR LACERATION PALATE OVER 2 CM COMPLEX		No	No	No	No		No	No
42200	PALATOP CL PALATE SOFT AND HARD PALATE ONLY		No	No	No	No		No	No
42205	PALATOPLASTY W CLSR ALVEOLAR RIDGE SOFT TISSUE		No	No	No	No		No	No
42210	PALATOP CLSR ALVEOLAR RIDGE GRF ALVEOLAR RIDGE		No	No	No	No		No	No
42215	PALATOPLASTY CLEFT PALATE MAJOR REVJ		No	No	No	No		No	No
42220	PALATOPLASTY CLEFT PALATE SEC LNTH PX		No	No	No	No		No	No
42225	PALATOP CL PALATE ATTACHMENT PHARYNGEAL FLAP		No	No	No	No		No	No
42226	LENGTHENING PALATE AND PHARYNGEAL FLAP		No	No	No	No		No	No
42227	LENGTHENING PALATE W ISLAND FLAP		No	No	No	No		No	No
42235	REPAIR ANTERIOR PALATE W VOMER FLAP		No	No	No	No		No	No
42260	REPAIR NASOLABIAL FISTULA		No	No	No	No		No	No
42280	MAXILLARY IMPRESJ PALATAL PROSTHESIS		No	No	Not Cov	No		No	No
42281	INSJ PIN-RETAINED PALATAL PROSTHESIS		No	No	No	No		No	No
42299	UNLISTED PROCEDURE PALATE UVULA		Yes	Yes	Not Cov	Yes		Yes	Yes
42300	DRAINAGE ABSCESS PAROTID SIMPLE		No	No	No	No		No	No
42305	DRAINAGE ABSCESS PAROTID COMPLICATED		No	No	No	No		No	No
42310	DRG ABSC SUBMAXILLARY SUBLINGUAL INTRAORAL		No	No	No	No		No	No
42320	DRAINAGE ABSCESS SUBMAXILLARY INTRAORAL		No	No	No	No		No	No
42330	SIALOT SUBMNDBLR SUBLNGL PRTD UNCOMP INTRAORAL		No	No	Not Cov	No		No	No
42335	SIALOLITHOTOMY SUBMNDBLR SUBMAX COMP INTRAORAL		No	No	Not Cov	No		No	No
42340	SIALOLITHOTOMY PRTD XTRORAL COMP INTRAORAL		No	No	No	No		No	No
42400	BIOPSY SALIVARY GLAND NEEDLE		No	No	Not Cov	No		No	No
42405	BIOPSY SALIVARY GLAND INCISIONAL		No	No	No	No		No	No
42408	EXC SUBLINGUAL SALIVARY CYST RANULA		No	No	No	No		No	No
42409	MARSUPIALIZATION SUBLNGL SALIVARY CST RANULA		No	No	No	No		No	No
42410	EXC PRTD TUM PRTD GLND LAT LOBE W O NRV DSJ		No	No	No	No		No	No
42415	EXC PRTD TUM PRTD GLND LAT DSJ AND PRSRV FACIAL NR		No	No	No	No		No	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
42420	EXC PRD TUM PRD GLND TOT DSJ AND PRSRV FACIAL NR		No	No	No	No		No	No
42425	EXCISION PAROTID TUMOR GLAND TOTAL EN BLOC RMVL		No	No	No	No		No	No
42426	EXC PRD TUM PRD GLND TOT W UNI RAD NCK DSJ		Not Cov	No	Not Cov	No		No	No
42440	EXCISION SUBMANDIBULAR SUBMAXILLARY GLAND		No	No	No	No		No	No
42450	EXISION OF SUBLINGUAL GLAND		No	No	No	No		No	No
42500	PLSTC RPR SALIVARY DUX SIALODOCHOPLASTY PRIM		No	No	No	No		No	No
42505	PLSTC RPR SALIVARY DUX SIALODOCHOPLASTY SEC COMP		No	No	No	No		No	No
42507	PAROTID DUCT DIVERSION BILATERAL WILKE PX		No	No	No	No		No	No
42509	PAROTID DUCT DVRJ BI W EXC BOTH SUBMNDBLR GLANDS		No	No	No	No		No	No
42510	PAROTID DUCT DVRJ BILATERAL WITH LIG BOTH DUCTS		No	No	No	No		No	No
42550	INJECTION PROCEDURE SIALOGRAPHY		No	No	Not Cov	No		No	No
42600	CLOSURE SALIVARY FISTULA		No	No	No	No		No	No
42650	DILATION SALIVARY DUCT		No	No	Not Cov	No		No	No
42660	DILAT AND CATHJ SALIVARY DUCT W WO INJECTION		No	No	Not Cov	No		No	No
42665	LIGATION SALIVARY DUCT INTRAORAL		No	No	No	No		No	No
42699	UNLISTED PX SALIVARY GLANDS DUCTS		Yes	Yes	Not Cov	Yes		Yes	Yes
42700	I AND D ABSCESS PERITONSILLAR		No	No	No	No		No	No
42720	I AND D ABSC RTRPHRNGL PARAPHARYNGEAL INTRAORAL		No	No	No	No		No	No
42725	I AND D ABSC RTRPHRNGL PARAPHARYNGEAL XTRNL APPR		No	No	No	No		No	No
42800	BIOPSY OROPHARYNX		No	No	Not Cov	No		No	No
42804	BIOPSY NASOPHARYNX VISIBLE LESION SIMPLE		No	No	No	No		No	No
42806	BX NASOPHARYNX SURVEY UNKNOWN PRIMARY LESION		No	No	No	No		No	No
42808	EXCISION DESTRUCTION LESION PHARYNX ANY METHOD		No	No	No	No		No	No
42809	REMOVAL FOREIGN BODY PHARYNX		No	No	No	No		No	No
42810	EXC BRANCHIAL CLEFT CYST CONFINED SKN AND SUBQ TIS		No	No	No	No		No	No
42815	EXC BRANCHIAL CLEFT CYST BELOW SUBQ TISS AND PHRYNX		No	No	No	No		No	No
42820	TONSILLECTOMY AND ADENOIDECTOMY UNDER AGE 12		No	No	No	No		No	No
42821	TONSILLECTOMY AND ADENOIDECTOMY AGE 12 OR GRT		No	No	No	No		No	No
42825	TONSILLECTOMY PRIMARY SECONDARY UNDER AGE 12		No	No	No	No		No	No
42826	TONSILLECTOMY PRIMARY SECONDARY AGE 12 OR GRT		No	No	No	No		No	No
42830	ADENOIDECTOMY PRIMARY UNDER AGE 12		No	No	No	No		No	No
42831	ADENOIDECTOMY PRIMARY AGE 12 OR GRT		No	No	No	No		No	No
42835	ADENOIDECTOMY SECONDARY UNDER AGE 12		No	No	No	No		No	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
42836	ADENOIDECTOMY SECONDARY AGE 12 OR GRT		No	No	No	No		No	No
42842	RADICAL RESECTION TONSIL W O CLOSURE		No	No	Not Cov	No		No	No
42844	RADICAL RESCJ TONSIL CLOSURE W LOCAL FLAP		No	No	Not Cov	No		No	No
42845	RADICAL RESCJ TONSIL CLOSURE W OTHER FLAP		Not Cov	No	Not Cov	No		No	No
42860	EXCISION TONSIL TAGS		No	No	No	No		No	No
42870	EXC DSTRJ LINGUAL TONSIL ANY METHOD SPX		No	No	No	No		No	No
42890	LIMITED PHARYNGECTOMY		No	No	No	No		No	No
42892	RESCJ LAT PHRNL WALL PYRIFORM SINUS DIR CLSR		No	No	No	No		No	No
42894	RESCJ PHRNL WALL CLSR W FLP OR FLP W MVASC ANAS		Not Cov	No	Not Cov	No		No	No
42900	SUTURE PHARYNX WOUND INJURY		No	No	No	No		No	No
42950	PHARYNGOPLASTY PLSTC RCNSTV OPRATION PHARYNX		No	No	No	No		No	No
42953	PHARYNGOESOPHAGEAL REPAIR		No	No	Not Cov	No		No	No
42955	PHARYNGOSTOMY FSTLJ PHARYNX XTRNL FEEDING		No	No	No	No		No	No
42960	CONTROL OROPHARYNGEAL HEMORRHAGE SIMPLE		No	No	No	No		No	No
42961	CTRL OROPHARYNGEAL HEMORRHAGE COMP REQ HOSPITJ		Not Cov	No	Not Cov	No		No	No
42962	CTRL OROPHARYNGEAL HEMORRHAGE W SEC SURG IVNTJ		No	No	No	No		No	No
42970	CTRL NASOPHARYNGEAL HEMRRG SMPL W PST NSL PACKS		No	No	Not Cov	No		No	No
42971	CTRL NASOPHARYNGEAL HEMRRG COMP REQ HOSPIZATION		Not Cov	No	Not Cov	No		No	No
42972	CTRL NASOPHARYNGEAL HEMORRHAGE W SEC SURG IVNTJ		No	No	No	No		No	No
42999	UNLISTED PROCEDURE PHARYNX ADENOIDS TONSILS		Yes	Yes	Not Cov	Yes		Yes	Yes
43020	ESOPHAGOTOMY CERVICAL APPR W RMVL FB		No	No	Not Cov	No		No	No
43030	CRICOPHARYNGEAL MYOTOMY		No	No	No	No		No	No
43045	ESOPHAGOTOMY THORACIC APPR W RMVL FB		Not Cov	No	Not Cov	No		No	No
43100	EXC LESION ESOPHOGUS W PRIM RPR CERVICAL APPR		No	No	Not Cov	No		No	No
43101	EXC LESION ESOPHAGUS W PRIM RPR THRC ABDL APPR		Not Cov	No	Not Cov	No		No	No
43107	TOT ESOPHAGECTOMY W O THORCOM W WO PYLOROPLASTY		Not Cov	No	Not Cov	No		No	No
43108	TOT ESOPHG W O THORCOM COLON NTRPSTJ INT RCNSTJ		Not Cov	No	Not Cov	No		No	No
43112	TOTAL ESOPHAGECTOMY W THORCOM W WO PYLORPLASTY		Not Cov	No	Not Cov	No		No	No
43113	TOT ESOPHG W THORCOM W COLON NTRPSTJ INT RCNSTJ		Not Cov	No	Not Cov	No		No	No
43116	PRTL ESOPHAGECTOMY CERVICAL W FREE INTSTINAL GRF		Not Cov	No	Not Cov	No		No	No
43117	PRTL ESOPHECT DSTL W WO PROX GASTRECT PYLORPLSTY		Not Cov	No	Not Cov	No		No	No
43118	PRTL ESOPH DSTL W WO PROX GASTRC W COLON NTRPSTJ		Not Cov	No	Not Cov	No		No	No
43121	PRTL ESOPHAGEC W WO PROX GASTREC PYLOROPLASTY		Not Cov	No	Not Cov	No		No	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
43122	PRTL ESOPHG THORACOABD W WO PROXGASTREC PYLOROPL		Not Cov	No	Not Cov	No		No	No
43123	PRTL ESPHG THORACOABDL ABDL APPR NTRPSTJ RCNSTJ		Not Cov	No	Not Cov	No		No	No
43124	TOT PRTL ESPHG W O RCNSTJ W CRV ESOPHAGOSTOMY		Not Cov	No	Not Cov	No		No	No
43130	DIVERTICULECTOMY HYPOPHARYNX ESOPH CRV APPR		No	No	No	No		No	No
43135	DIVERTICULECTOMY HYPOPHARYNX ESOPH THRC APPR		No	No	Not Cov	No		No	No
43180	ESOPHAGOSCP RIG TRANSORAL HYPOPHARYNX CRV ESOPH		No	No	No	No		No	No
43191	ESOPHAGOSCOPY RIGID TRANSORAL DIAGNOSTIC BRUSH		No	No	No	No		No	No
43192	ESOPHAGOSCOPY RIGID TRANSORAL INJ SUBMUCOSAL		No	No	No	No		No	No
43193	ESOPHAGOSCOPY RIGID TRANSORAL WITH BIOPSY		No	No	No	No		No	No
43194	ESOPHAGOSCOPY RIG TRANSORAL REMOVAL FOREIGN BODY		No	No	No	No		No	No
43195	ESOPHAGOSCOPY RIGID TRANSORAL BALLOON DILATION		No	No	No	No		No	No
43196	ESOPHAGOSCOPY RIG TRANSORAL GUIDE WIRE DILATION		No	No	No	No		No	No
43197	ESOPHAGOSCOPY FLEXIBLE TRANSNASAL DIAGNOSTIC		No	No	No	No		No	No
43198	ESOPHAGOSCOPY FLEXIBLE TRANSNASAL WITH BIOPSY		No	No	No	No		No	No
43200	ESOPHAGOSCOPY FLEXIBLE TRANSORAL DIAGNOSTIC		No	No	No	No		No	No
43201	ESOPHAGOSCOPY FLEXIBLE TRANSORAL W SUBMUCOUS INJ		No	No	No	No		No	No
43202	ESOPHAGOSCOPY FLEXIBLE TRANSORAL WITH BIOPSY		No	No	No	No		No	No
43204	ESOPHAGOSCOPY FLEX TRANSORAL INJECTION VARICES		No	No	No	No		No	No
43205	ESPHGOSCOPY FLEX W BAND LIGATION ESOPHGL VARICES		No	No	No	No		No	No
43206	ESOPHAGOSCOPY TRANSORAL W OPTICAL ENDOMICROSCOPY		Not Cov	Not Cov	Not Cov	Not Cov		No	No
43210	EGD PARTIAL COMPL ESOPHAGOGASTRIC FUNDOPLASTY		No	No	No	No		No	No
43211	ESOPHAGOSCOPY FLEXIBLE TRANSORAL MUCOSAL RESEXXN		No	No	No	No		No	No
43212	ESOPHAGOSCOPY TRANSORAL STENT PLACEMENT		No	No	No	No		No	No
43213	ESOPHAGOSCOPY RETROGRADE DILATE BALLOON OTHER		No	No	No	No		No	No
43214	ESOPHAGOSCOPY DILATE ESOPHAGUS BALLOON 30 MM		No	No	No	No		No	No
43215	ESOPHAGOSCOPY FLEXIBLE REMOVAL FOREIGN BODY		No	No	No	No		No	No
43216	ESPHAGOSCOPY FLEX LESION REMOVAL HOT BX FORCEPS		No	No	No	No		No	No
43217	ESOPHAGOSCOPY FLEXIB LESION REMOVAL TUMOR SNARE		No	No	No	No		No	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
43220	ESOPHAGOSCOPY FLEX BALLOON DILAT UNDER 30 MM DIAM		No	No	No	No		No	No
43226	ESOPHAGOSCOPY FLEXIBLE GUIDE WIRE DILATION		No	No	No	No		No	No
43227	ESOPHAGOSCOPY FLEXIBLE W BLEEDING CONTROL		No	No	Not Cov	No		No	No
43229	ESOPHAGOSCOPY FLEX TRANSORAL LESION ABLATION		No	No	No	No		No	No
43231	ESOPHAGOSCOPY FLEXIBLE TRANSORAL ULTRASOUND EXAM		No	No	No	No		No	No
43232	ESOPHAGOSCOPY INTRA TRANSMURAL NEEDLE ASPIRAT BX		No	No	No	No		No	No
43233	EGD ESOPHAGUS BALLOON DILATION 30 MM OR LARGER		No	No	No	No		No	No
43235	ESOPHAGOGASTRODUODENOSCOPY TRANSORAL DIAGNOSTIC		No	No	No	No		No	No
43236	ESOPHAGOGASTRODUODENOSCOPY SUBMUCOSAL INJECTION		No	No	No	No		No	No
43237	ESOPHAGOGASTRODUODENOSCOPY US SCOPE W ADJ STRXRS		No	No	No	No		No	No
43238	EGD INTRMURAL US NEEDLE ASPIRATE BIOPSY ESOPHAGS		No	No	No	No		No	No
43239	EGD TRANSORAL BIOPSY SINGLE MULTIPLE		No	No	No	No		No	No
43240	EGD TRANSORAL TRANSMURAL DRAINAGE PSEUDOCYST		No	No	No	No		No	No
43241	EGD INTRALUMINAL TUBE CATHETER INSERTION		No	No	No	No		No	No
43242	EGD INTRMURAL NEEDLE ASPIR BIOP ALTERED ANATOMY		No	No	No	No		No	No
43243	EGD INJECTION SCLEROSIS ESOPHGL GASTRIC VARICES		No	No	No	No		No	No
43244	EGD BAND LIGATION ESOPHGEAL GASTRIC VARICES		No	No	No	No		No	No
43245	EGD DILATION GASTRIC DUODENAL STRICTURE		No	No	No	No		No	No
43246	EGD PERCUTANEOUS PLACEMENT GASTROSTOMY TUBE		No	No	No	No		No	No
43247	EGD FLEXIBLE FOREIGN BODY REMOVAL		No	No	No	No		No	No
43248	EGD INSERT GUIDE WIRE DILATOR PASSAGE ESOPHAGUS		No	No	No	No		No	No
43249	EGD BALLOON DILATION ESOPHAGUS UNDER 30 MM DIAM		No	No	No	No		No	No
43250	EGD FLEX REMOVAL LESION(S) BY HOT BIOPSY FORCEPS		No	No	No	No		No	No
43251	EGD REMOVAL TUMOR POLYP OTHER LESION SNARE TECH		No	No	No	No		No	No
43252	EGD FLEX TRANSORAL W OPTICAL ENDOMICROSCOPY		Not Cov	Not Cov	Not Cov	Not Cov		No	No
43253	EGD US GUIDED TRANSMURAL INJXN FIDUCIAL MARKER		No	No	No	No		No	No
43254	EGD TRANSORAL ENDOSCOPIC MUCOSAL RESECTION		No	No	No	No		No	No
43255	EGD TRANSORAL CONTROL BLEEDING ANY METHOD		No	No	No	No		No	No
43257	EGD DELIVER THERMAL ENERGY SPHNCTR CARDIA GERD		Not Cov	Not Cov	Not Cov	Not Cov		No	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
43259	EDG US EXAM SURGICAL ALTER STOM DUODENUM JEJUNUM		No	No	No	No		No	No
43260	ERCP DX COLLECTION SPECIMEN BRUSHING WASHING		No	No	No	No		No	No
43261	ERCP W BIOPSY SINGLE MULTIPLE		No	No	No	No		No	No
43262	ERCP W SPHINCTEROTOMY PAPILOTOMY		No	No	No	No		No	No
43263	ERCP W PRESSURE MEASUREMENT SPHINCTER OF ODDI		No	No	No	No		No	No
43264	ERCP REMOVE CALCULI DEBRIS BILIARY PANCREAS DUCT		No	No	No	No		No	No
43265	ERCP DESTRUCTION LITHOTRIPSY CALCULI ANY METHOD		No	No	No	No		No	No
43266	EGD ENDOSCOPIC STENT PLACEMENT W WIRE AND DILATION		No	No	No	No		No	No
43270	EGD ABLATE TUMOR POLYP LESION W DILATION AND WIRE		No	No	No	No		No	No
43273	ENDOSCOPIC PAPILLA CANNULATION BILE PANCREATIC		No	No	No	No		No	No
43274	ERCP STENT PLACEMENT BILIARY PANCREATIC DUCT		No	No	No	No		No	No
43275	ERCP REMOVE FOREIGN BODY STENT BILIARY PANC DUCT		No	No	No	No		No	No
43276	ERCP BILIARY PANC DUCT STENT EXCHANGE W DIL AND WIRE		No	No	No	No		No	No
43277	ERCP BALLOON DILATE BILIARY PANC DUCT AMPULLA EA		No	No	No	No		No	No
43278	ERCP TUMOR POLYP LESION ABLATION W DILATION AND WIRE		No	No	No	No		No	No
43279	LAPS ESOPHAGOMYOTOMY W FUNDOPLASTY IF PERFORMED		No	No	Not Cov	No		No	No
43280	LAPS SURG ESOPG GSTR FUNDOPLASTY		No	No	Not Cov	No		No	No
43281	LAPS RPR PARAESPHGL HRNA INCL FUNDPLSTY W O MESH		No	No	Not Cov	No		No	No
43282	LAPS RPR PARAESPHGL HRNA INCL FUNDPLSTY W MESH		Not Cov	No	Not Cov	No		No	No
43283	LAPS ESOPHAGEAL LENGTHENING ADDL		No	No	Not Cov	No		No	No
43284	LAPS ESOPHGL SPHNCTR AGMNTJ PLMT DEV CRRPL		Not Cov	Not Cov	Not Cov	Not Cov		No	No
43285	REMOVAL ESOPHAGEAL SPHINCTER AGMNTJ DEVICE		Not Cov	Not Cov	Not Cov	Not Cov		No	No
43286	ESOPHAGECTOMY TOTAL NEAR TOTAL W LAPS MOBLJ		Not Cov	No	Not Cov	No		No	No
43287	ESOPHAGECTOMY DISTAL 2 3 W LAPAROSCOPIC MOBLJ		Not Cov	No	Not Cov	No		No	No
43288	ESOPHAGECTOMY TOTAL NEAR TOTAL W THRSC MOBLJ		Not Cov	No	Not Cov	No		No	No
43289	UNLISTED LAPAROSCOPIC PROCEDURE ESOPHAGUS		Yes	Yes	Not Cov	Yes		Yes	Yes
43300	ESPHGP CRV APPR W O RPR TRACHEOESOPHGL FSTL		No	No	Not Cov	No		No	No
43305	ESPHGP CRV APPR W RPR TRACHEOESOPHGL FSTL		No	No	Not Cov	No		No	No
43310	ESPHGP THRC APPR W O RPR TRACHEOESOPHGL FSTL		Not Cov	No	Not Cov	No		No	No
43312	ESPHGP THRC APPR W RPR TRACHEOESOPHGL FSTL		Not Cov	No	Not Cov	No		No	No
43313	ESPHGP CGEN DFCT THRC APPR W O RPR FSTL		Not Cov	No	Not Cov	No		No	No
43314	ESPHGP CGEN DFCT THRC APPR W RPR FSTL		Not Cov	No	Not Cov	No		No	No
43320	EGST W WO VAGOTOMY AND PYLOROPLASTY TABDL TTHRC AP		No	No	Not Cov	No		No	No

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This prior authorization guide applies to Medicaid, Medicare, and Marketplace.

DOS Effective 10/1/19; Posted 10/30/19

All Inpatient services require prior authorization

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Code	Code Description	Comments	Apple Health & IMC Medical				IMC / BHSO (Mental Health covered svcs)	Medicare	Market Place
			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
43325	ESOPG GSTR FUNDOPLASTY W FUNDIC PATCH		Not Cov	No	Not Cov	No		No	No
43327	ESOPG GSTR FUNDOPLASTY W LAPAROTOMY		Not Cov	No	Not Cov	No		No	No
43328	ESOPG GSTR FUNDOPLASTY W THORACOTOMY		Not Cov	No	Not Cov	No		No	No
43330	ESOPHAGOMYOTOMY HELLER TYPE ABDOMINAL APPROACH		Not Cov	No	Not Cov	No		No	No
43331	ESOPHAGOMYOTOMY HELLER TYPE THORACIC APPROACH		Not Cov	No	Not Cov	No		No	No
43332	RPR PARAESOPH HIATAL HERNIA W LAPT W O MESH		No	No	Not Cov	No		No	No
43333	LAPT RPR PARAESOPH HIATAL HERNIA W MESH		No	No	Not Cov	No		No	No
43334	RPR PARAESOPH HIATAL HERNIA W THORCOM W O MESH		No	No	Not Cov	No		No	No
43335	RPR PARAESOPH HIATAL HERNIA W THORCOM W MESH		No	No	Not Cov	No		No	No
43336	RPR PARAESOPH HIATAL HERNIA THORCOABDOM W O MESH		No	No	Not Cov	No		No	No
43337	RPR PARAESOPH HIATAL HERNIA THORCOABDOM W MESH		No	No	Not Cov	No		No	No
43338	ESOPHAGUS LENGTHENING		No	No	Not Cov	No		No	No
43340	ESOPHAGOJEJUNOSTOMY W O TOT GSTRCT ABDL APPR		Not Cov	No	Not Cov	No		No	No
43341	ESOPHAGOJEJUNOSTOMY W O TOT GSTRCT THRC APPR		Not Cov	No	Not Cov	No		No	No
43351	ESOPHAGOSTOMY FSTLJ ESOPH XTRNL THRC APPR		Not Cov	No	Not Cov	No		No	No
43352	ESOPHAGOSTOMY FSTLJ ESOPH XTRNL CRV APPR		Not Cov	No	Not Cov	No		No	No
43360	GI RCNSTJ PREV ESPHG EXCLUSION W STOMACH		Not Cov	No	Not Cov	No		No	No
43361	GI RCNSTJ PREV ESPHG EXCLUSION W COLON SM INT		Not Cov	No	Not Cov	No		No	No
43400	LIGATION DIRECT ESOPHAGEAL VARICES		Not Cov	No	Not Cov	No		No	No
43401	TRNSXJ ESOPH W RPR ESOPHAGEAL VARICES		No	No	Not Cov	No		No	No
43405	LIG STAPLING G-ESOP JUNCT PRE-ESOPHGL PRF8J		Not Cov	No	Not Cov	No		No	No
43410	SUTR ESOPHGL WND INJ CRV APPR		No	No	Not Cov	No		No	No
43415	SUTR ESOPHGL WND INJ TTHRC TABDL APPR		Not Cov	No	Not Cov	No		No	No
43420	CLSR ESOPHAGOSTOMY FSTL CRV APPR		No	No	Not Cov	No		No	No
43425	CLSR ESOPHAGOSTOMY FSTL TTHRC TABDL APPR		Not Cov	No	Not Cov	No		No	No
43450	DILATION ESOPH UNGUIDED SOUND BOUGIE 1 MULT PASS		No	No	No	No		No	No
43453	DILATION ESOPHAGUS GUIDE WIRE		No	No	No	No		No	No
43460	ESOPG GSTR TAMPONADE W BALO SENGSTAKEN TYPE		Not Cov	No	Not Cov	No		No	No
43496	FREE JEJUNUM TRSF W MICROVASC ANASTOMOSIS		Not Cov	No	Not Cov	No		No	No
43499	UNLISTED PROCEDURE ESOPHAGUS		Yes	Yes	Not Cov	Yes		Yes	Yes
43500	GASTROTOMY W EXPLORATION FOREIGN BODY REMOVAL		No	No	Not Cov	No		No	No
43501	GASTROTOMY W SUTURE REPAIR BLEEDING ULCER		Not Cov	No	Not Cov	No		No	No
43502	GASTROTOMY W SUTR RPR PRE-ESOPG GASTRIC LAC		Not Cov	No	Not Cov	No		No	No
43510	GSTRT W ESOPHGL DILAT AND INSJ PRM INTRAL TUBE		No	No	Not Cov	No		No	No
43520	PYLOROMYOTOMY CUTTING PYLORIC MUSC		Not Cov	No	Not Cov	No		No	No
43605	BIOPSY STOMACH LAPAROTOMY		Not Cov	No	Not Cov	No		No	No
43610	EXC LOCAL ULCER BENIGN TUMOR STOMACH		Not Cov	No	Not Cov	No		No	No
43611	EXC LOCAL MALIGNANT TUMOR STOMACH		Not Cov	No	Not Cov	No		No	No
43620	GSTRCT TOT W ESOPHAGOENTEROSTOMY		Not Cov	No	Not Cov	No		No	No

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Code	Code Description	Comments	Apple Health & IMC Medical				IMC / BHSO (Mental Health covered svcs)	Medicare	Market Place
			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
43621	GSTRCT TOT W ROUX-EN-Y RCNSTJ		Not Cov	No	Not Cov	No		No	No
43622	GSTRCT TOT W FRMJ INTSTINAL POUCH ANY TYPE		Not Cov	No	Not Cov	No		No	No
43631	GSTRCT PRTL DSTL W GASTRODUODENOSTOMY		Not Cov	No	Not Cov	No		No	No
43632	GSTRCT PRTL DSTL W GASTROJEJUNOSTOMY		Not Cov	No	Not Cov	No		No	No
43633	GSTRCT PRTL DSTL W ROUX-EN-Y RCNSTJ		Not Cov	No	Not Cov	No		No	No
43634	GSTRCT PRTL DSTL W FRMJ INTSTINAL POUCH		Not Cov	No	Not Cov	No		No	No
43635	VAGOTOMY PFRMD W PRTL DSTL GSTRCT		No	No	Not Cov	No		No	No
43640	VGTMY W PYLORPLSTY W WO GASTROST TRUNCAL SLCTV		Not Cov	No	Not Cov	No		No	No
43641	VGTMY W PYLOROPLASTY W WO GASTROST PARIETAL CELL		Not Cov	No	Not Cov	No		No	No
43644	LAPS GSTR RSTCV PX W BYP ROUX-EN-Y LIMB UNDER 150 CM		Not Cov	Yes	Not Cov	No		Yes	Not Cov
43645	LAPS GSTR RSTCV PX W BYP AND SM INT RCNSTJ		Not Cov	Yes	Not Cov	No		Yes	Not Cov
43647	LAPS IMPLTJ RPLCMT GASTRIC NSTIM ELTRD ANTRUM		Yes	Yes	Not Cov	No		Yes	Yes
43648	LAPS REVISION RMVL GASTRIC NSTIM ELTRD ANTRUM		Yes	Yes	Not Cov	No		Yes	Yes
43651	LAPS SURG TRNSXJ VAGUS NRV TRUNCAL		No	No	Not Cov	No		No	No
43652	LAPS SURG TRNSXJ VAGUS NRV SLCTV HILY SLCTV		No	No	Not Cov	No		No	No
43653	LAPS SURG GASTROSTOMY W O CONSTJ GSTR TUBE SPX		Yes	Yes	Yes	No		Yes	Yes
43659	UNLISTED LAPAROSCOPIC PROCEDURE STOMACH		Yes	Yes	Not Cov	Yes		Yes	Yes
43752	NASO ORO-GASTRIC TUBE PLMT REQ PHYS AND FLUOR GDNCE		No	No	No	No		No	No
43753	GASTRIC INTUBATJ AND ASPIRAJ W PHYS SKILL LAVAGE		No	No	No	No		No	No
43754	GASTRIC INTUBAT DX W ASPIRATION SINGLE SPECIMEN		No	No	No	No		No	No
43755	GASTRIC INTUBATION DX AND ASPIRATJ MULTIPLE SPEC		No	No	No	No		No	No
43756	DUODENAL INTUBAT W IMAG GUIDED SINGLE SPECIMEN		No	No	No	No		No	No
43757	DUODENAL INTUBAT W IMAG GUIDED MULTIPLE SPECIMEN		No	No	No	No		No	No
43761	REPOS NASO ORO GASTRIC FEEDING TUBE THRU DUO		No	No	No	No		No	No
43762	PERQ REPLACEMENT GTUBE NOT REQ REVJ GSTRST TRC		No	No	Not Cov	No		No	No
43763	PERQ REPLACEMENT GTUBE REQ REVJ GSTRST TRC		No	No	Not Cov	No		No	No
43770	LAPS GASTRIC RESTRICTIVE PROCEDURE PLACE DEVICE		Not Cov	Yes	Not Cov	No		Yes	Not Cov
43771	LAPS GASTRIC RESTRICTIVE PX REVISION DEVICE		Not Cov	Yes	Not Cov	No		Yes	Not Cov
43772	LAPS GASTRIC RESTRICTIVE PX REMOVE DEVICE		Not Cov	Yes	Not Cov	No		Yes	Not Cov
43773	LAPS GASTRIC RESTRICTIVE PX REMOVE AND RPLCMT DEVICE		Not Cov	Yes	Not Cov	No		Yes	Not Cov
43774	LAPS GASTRIC RESTRICTIVE PX REMOVE DEVICE AND PORT		Yes	Yes	Not Cov	No		Yes	Not Cov
43775	LAPS GSTRC RSTRCTIV PX LONGITUDINAL GASTRECTOMY		Not Cov	Yes	Not Cov	No		Yes	Yes
43800	PYLOROPLASTY		Not Cov	No	Not Cov	No		No	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
43810	GASTRODUODENOSTOMY		Not Cov	No	Not Cov	No		No	No
43820	GASTROJEJUNOSTOMY W O VAGOTOMY		Not Cov	No	Not Cov	No		No	No
43825	GASTROJEJUNOSTOMY W VAGOTOMY ANY TYPE		Not Cov	No	Not Cov	No		No	No
43830	GASTROSTOMY OPN W O CONSTJ GSTR TUBE SPX		No	No	Not Cov	No		No	No
43831	GASTROSTOMY OPN NEONATAL FEEDING		No	No	Not Cov	No		No	No
43832	GASTROSTOMY OPN W CONSTJ GSTR TUBE		Not Cov	No	Not Cov	No		No	No
43840	GASTRORRHAPHY SUTR PRF8 DUOL GSTR ULCER WND INJ		Not Cov	No	Not Cov	No		No	No
43842	GASTRIC RSTCV W O BYP VERTICAL-BANDED GASTROPLY		Not Cov	Yes	Not Cov	No		Not Cov	Not Cov
43843	GSTR RSTCV W O BYP OTH THN VER-BANDED GSTP		Not Cov	Yes	Not Cov	No		Yes	Not Cov
43845	GASTRIC RSTCV W PRTL GASTRECTOMY 50-100 CM		Not Cov	Yes	Not Cov	No		Yes	Yes
43846	GASTRIC RSTCV W BYP W SHORT LIMB 150 CM OR LESS		Not Cov	Yes	Not Cov	No		Yes	Not Cov
43847	GASTRIC RSTCV W BYP W SM INT RCNSTJ LIMIT ABSRPJ		Not Cov	Yes	Not Cov	No		Yes	Not Cov
43848	REVISION OPEN GASTRIC RESTRICTIVE PX NOT DEVICE		Not Cov	Yes	Not Cov	No		Yes	Not Cov
43850	REVJ GASTRODUOL ANAST W RCNSTJ W O VAGOTOMY		Not Cov	No	Not Cov	No		No	No
43855	REVJ GASTRODUOL ANAST W RCNSTJ W VGTMY		Not Cov	No	Not Cov	No		No	No
43860	REVJ GSTR JJ ANAST W RCNSTJ W O VGTMY		Not Cov	No	Not Cov	No		No	No
43865	REVJ GSTR JJ ANAST W RCNSTJ W VGTMY		Not Cov	No	Not Cov	No		No	No
43870	CLOSURE GASTROSTOMY SURG		No	No	No	No		No	No
43880	CLOSURE GASTROCOLIC FISTULA		No	No	Not Cov	No		No	No
43881	IMPLTJ RPLCMT GASTRIC NSTIM ELTRDE ANTRUM OPEN		Not Cov	Yes	Not Cov	No		Yes	Yes
43882	REVISION RMVL GASTRIC NSTIM ELTRDE ANTRUM OPEN		Not Cov	Yes	Not Cov	No		Yes	Yes
43886	GSTR RSTCV PX OPN REVJ SUBQ PORT COMPONENT ONLY		Yes	Yes	Yes	No		Yes	Not Cov
43887	GSTR RSTCV PX OPN RMVL SUBQ PORT COMPONENT ONLY		Yes	Yes	Yes	No		Yes	Not Cov
43888	GSTR RSTCV OPN RMVL AND RPLCMT SUBQ PORT		Yes	Yes	Yes	No		Yes	Not Cov
43999	UNLISTED PROCEDURE STOMACH		Yes	Yes	Not Cov	Yes		Yes	Yes
44005	ENTEROLSS FRING INTSTINAL ADHESION SPX		No	No	Not Cov	No		No	No
44010	DUODENOTOMY EXPLORATION BX FOREIGN BODY REMOVAL		Not Cov	No	Not Cov	No		No	No
44015	TUBE NEEDLE CATH JEJUNOSTOMY ANY METHOD		Not Cov	No	Not Cov	No		No	No
44020	ENTEROTOMY SM INT OTH THN DUO EXPL BX FB RMVL		No	No	Not Cov	No		No	No
44021	ENTEROTOMY SM INT OTH THN DUO DCMPRN		Not Cov	No	Not Cov	No		No	No
44025	COLOTOMY EXPLORATION BIOPSY FOREIGN BODY REMOVAL		Not Cov	No	Not Cov	No		No	No
44050	RDCTJ VOLVULUS INTUSSUSCEPTION INT HRNA LAPT		No	No	Not Cov	No		No	No
44055	CORRJ MALROTATION BANDS AND RDCTJ VOLVULUS		No	No	Not Cov	No		No	No
44100	BX INTESTINE CAPSULE TUBE PRORAL 1 OR GRT SPECIMENS		No	No	No	No		No	No
44110	EXC 1 OR GRT SMALL LARGE LESIONS INTESTINE ENTEROTOM		No	No	Not Cov	No		No	No

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			Outpatient		ASC	Office Setting			
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44111	EXC 1 OR GRT SM LG LESIONS INTESTNE MULT ENTEROTOMIE		Not Cov	No	Not Cov	No		No	No
44120	ENTRC RESCJ SMALL INTESTINE 1 RESCJ AND ANAST		Not Cov	No	Not Cov	No		No	No
44121	ENTERECTOMY RESCJ SMALL INTESTINE EA RESCJ AND ANA		Not Cov	No	Not Cov	No		No	No
44125	ENTERECTOMY RESCJ SMALL INTESTINE W ENTEROSTOMY		No	No	Not Cov	No		No	No
44126	ENTRC RESCJ ATRESIA RESCJ AND ANAST W O TAPRING		Not Cov	No	Not Cov	No		No	No
44127	ENTRC RESCJ ATRESIA RESCJ AND ANAST SGM W TAPRING		Not Cov	No	Not Cov	No		No	No
44128	ENTRC RESCJ ATRESIA EA RESCJ AND ANASTOMOSIS		Not Cov	No	Not Cov	No		No	No
44130	ENTEROENTEROST ANAST INT W WO CUTAN NTRSTM SPX		No	No	Not Cov	No		No	No
44132	DONOR ENTERECTOMY OPEN CADAVER DONOR		Not Cov	No	Not Cov	No		Not Cov	No
44133	DONOR ENTERECTOMY OPEN LIVING DONOR		Not Cov	No	Not Cov	No		Not Cov	No
44135	INTESTINAL ALLOTRANSPLANTATION CADAVER DONOR		Not Cov	No	Not Cov	No		Not Cov	No
44136	INTESTINAL ALLOTRANSPLANTATION LIVING DONOR		Not Cov	No	Not Cov	No		Not Cov	No
44137	RMVL TRNSPLED INTESTINAL ALLOGRAFT COMPL		Not Cov	No	Not Cov	No		No	No
44139	MOBLJ SPLENIC FLXR PFRMD CONJUNCT W PRTL COLCT		Not Cov	No	Not Cov	No		No	No
44140	COLECTOMY PARTIAL W ANASTOMOSIS		Not Cov	No	Not Cov	No		No	No
44141	COLECTOMY PRTL W SKIN LEVEL CECOST COLOSTOMY		No	No	Not Cov	No		No	No
44143	COLECTOMY PRTL W END COLOSTOMY AND CLSR DSTL SGMT		No	No	Not Cov	No		No	No
44144	COLECTOMY PRTL W COLOST ILEOST AND MUCOFISTULA		Not Cov	No	Not Cov	No		No	No
44145	COLECTOMY PRTL W COLOPROCTOSTOMY		Not Cov	No	Not Cov	No		No	No
44146	COLECTOMY PRTL W COLOPROCTOSTOMY AND COLOSTOMY		Not Cov	No	Not Cov	No		No	No
44147	COLECTOMY PRTL ABDOMINAL AND TRANSANAL APPROACH		Not Cov	No	Not Cov	No		No	No
44150	COLCT TOT ABDL W O PRCTECT W ILEOST ILEOPXTS		Not Cov	No	Not Cov	No		No	No
44151	COLCT TOT ABDL W O PRCTECT W CONTINENT ILEOST		Not Cov	No	Not Cov	No		No	No
44155	COLECTOMY TOT ABDL W PROCTECTOMY W ILEOSTOMY		Not Cov	No	Not Cov	No		No	No
44156	COLECTOMY TOT ABDL W PROCTECTOMY W CONTNT ILEOST		Not Cov	No	Not Cov	No		No	No
44157	COLECTOMY TOT ABD W PROCTECTOMY ILEOANAL ANAST		Not Cov	No	Not Cov	No		No	No
44158	COLCT TTL ABD W PRCTECT ILEOANAL ANAST AND RSVR		Not Cov	No	Not Cov	No		No	No
44160	COLECTOMY PRTL W RMVL TERMINAL ILEUM AND ILEOCOLOS		Not Cov	No	Not Cov	No		No	No
44180	LAPAROSCOPY ENTEROLYSIS SEPARATE PROCEDURE		No	No	Not Cov	No		No	No
44186	LAPAROSCOPY SURGICAL JEJUNOSTOMY		No	No	Not Cov	No		No	No
44187	LAPAROSCOPY SURG ILEOSTOMY JEJUNOSTOMY NON-TUBE		No	No	Not Cov	No		No	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
44188	LAPAROSCOPY SURG COLOSTOMY SKN LVL CECOSTOMY		No	No	Not Cov	No		No	No
44202	LAPS ENTERECT RESCJ 1 SMALL INTEST RESCJ AND ANA		Not Cov	No	Not Cov	No		No	No
44203	LAPAROSCOPY SMALL INTESTINE RESCJ AND ANASTOMOSIS		Not Cov	No	Not Cov	No		No	No
44204	LAPAROSCOPY COLECTOMY PARTIAL W ANASTOMOSIS		Not Cov	No	Not Cov	No		No	No
44205	LAPS COLECTOMY PRTL W RMVL TERMINAL ILEUM		Not Cov	No	Not Cov	No		No	No
44206	LAPS COLECTOMY PRTL W END CLST AND CLSR DSTL SGM		No	No	Not Cov	No		No	No
44207	LAPS COLECTOMY PRTL W COLOPXTSTMY LW ANAST		No	No	Not Cov	No		No	No
44208	LAPS COLECTMY PRTL W COLOPXTSTMY LW ANAST W CLST		No	No	Not Cov	No		No	No
44210	LAPS COLECTOMY TOT W O PRTECT W ILEOST ILEOPXTS		Not Cov	No	Not Cov	No		No	No
44211	LAPS COLCT TTL ABD W PRTECT ILEOANAL ANASTOMISIS		Not Cov	No	Not Cov	No		No	No
44212	LAPS COLECTOMY ABDL W PROTECTOMY W ILEOSTOMY		Not Cov	No	Not Cov	No		No	No
44213	LAPS MOBLJ SPLENIC FLXR PFRMD W PRTL COLECTOMY		No	No	Not Cov	No		No	No
44227	LAPS CLSR NTRSTM LG SM INT W RESCJ AND ANASTOMOSIS		Not Cov	No	Not Cov	No		No	No
44238	UNLISTED LAPAROSCOPY PX INTESTINE XCP RECTUM		Yes	Yes	Not Cov	Yes		Yes	Yes
44300	PLACEMENT ENTEROSTOMY CECOSTOMY TUBE OPEN		Not Cov	No	Not Cov	No		No	No
44310	ILEOSTOMY JEJUNOSTOMY NON-TUBE		Not Cov	No	Not Cov	No		No	No
44312	REVJ ILEOSTOMY SIMPLE RLS SUPERFICIAL SCAR SPX		No	No	No	No		No	No
44314	REVJ ILEOSTOMY COMPLIC RCNSTJ IN-DEPTH SPX		Not Cov	No	Not Cov	No		No	No
44316	CONTINENT ILEOSTOMY KOCK PROCEDURE SPX		Not Cov	No	Not Cov	No		No	No
44320	COLOSTOMY SKIN LEVEL CECOSTOMY		Not Cov	No	Not Cov	No		No	No
44322	COLOSTOMY SKN LVL CECOSTOMY W MULT BXS SPX		Not Cov	No	Not Cov	No		No	No
44340	REVJ COLOSTOMY SMPL RLS SUPFC SCAR SPX		No	No	No	No		No	No
44345	REVJ COLOSTOMY COMP RCNSTJ IN-DEPTH SPX		Not Cov	No	Not Cov	No		No	No
44346	REVJ COLOSTOMY W RPR PARACLST HERNIA SPX		No	No	Not Cov	No		No	No
44360	ENDOSCOPY UPPER SMALL INTESTINE		No	No	No	No		No	No
44361	ENDOSCOPY UPPER SMALL INTESTINE W BIOPSY		No	No	No	No		No	No
44363	ENTEROSCOPY OVER 2ND PRTN W RMVL FOREIGN BODY		No	No	No	No		No	No
44364	ENTEROSCOPY OVER 2ND PRTN W RMVL LESION SNARE		No	No	No	No		No	No
44365	ENTEROSCOPY OVER 2ND PRTN W RMVL LESION CAUTERY		No	No	No	No		No	No
44366	ENTEROSCOPY OVER 2ND PRTN W CONTROL BLEEDING		No	No	No	No		No	No
44369	ENTEROSCOPY OVER 2ND PRTN ABLTJ LESION		No	No	No	No		No	No
44370	ENTEROSCOPY OVER 2ND PRTN TNDSC STENT PLMT		No	No	No	No		No	No
44372	ENTEROSCOPY OVER 2ND PRTN W PLMT PRQ TUBE		No	No	No	No		No	No
44373	ENTEROSCOPY OVER 2ND PRTN CONV GSTRST TUBE		No	No	No	No		No	No

This prior authorization guide applies to Medicaid, Medicare, and Marketplace.

DOS Effective 10/1/19; Posted 10/30/19

All Inpatient services require prior authorization

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*** All Medicare services subject to the limitations in the CMS billing guide and fee schedules at <https://www.cms.gov/> ***

Code	Code Description	Comments	Apple Health & IMC Medical				IMC / BHSO (Mental Health covered svcs)	Medicare	Market Place
			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
44376	ENTEROSC OVER 2ND PRN W ILEUM W WO COLLJ SPEC SPX		No	No	No	No		No	No
44377	ENTEROSC OVER 2ND PRN W ILEUM W BX SINGLE MULTIPLE		No	No	No	No		No	No
44378	ENTEROSCOPY OVER 2ND PRN ILEUM CONTROL BLEEDING		No	No	No	No		No	No
44379	ENTEROSCOPY OVER 2ND PRN W ILEUM W STENT PLMT		No	No	No	No		No	No
44380	ILEOSCOPY THRU STOMA DX W COLLJ SPEC WHEN PRFMD		No	No	No	No		No	No
44381	ILEOSCOPY STOMA W BALLOON DILATION		No	No	No	No		No	No
44382	ILEOSCOPY STOMA W BX SINGLE MULTIPLE		No	No	No	No		No	No
44384	ILEOSCOPY STOMA W PLMT OF ENDOSCOPIC STENT		No	No	No	No		No	No
44385	NDSC EVAL INTSTINAL POUCH DX W COLLJ SPEC SPX		No	No	No	No		No	No
44386	NDSC EVAL INTSTINAL POUCH W BX SINGLE MULTIPLE		No	No	No	No		No	No
44388	COLONOSCOPY STOMA DX INCLUDING COLLJ SPEC SPX		No	No	No	No		No	No
44389	COLONOSCOPY STOMA W BIOPSY SINGLE MULTIPLE		No	No	No	No		No	No
44390	COLONOSCOPY STOMA W RMVL FOREIGN BODY		No	No	No	No		No	No
44391	COLONOSCOPY STOMA CONTROL BLEEDING		No	No	No	No		No	No
44392	COLONOSCOPY STOMA RMVL LES BY HOT BIOPSY FORCEPS		No	No	No	No		No	No
44394	COLONOSCOPY STOMA W RMVL TUM POLYP OTH LES SNARE		No	No	No	No		No	No
44401	COLONOSCOPY STOMA ABLATION LESION		No	No	No	No		No	No
44402	COLONOSCOPY STOMA W ENDOSCOPIC STENT PLCMT		No	No	No	No		No	No
44403	COLONOSCOPY STOMA W ENDOSCOPIC MUCOSAL RESCJ		No	No	No	No		No	No
44404	COLONOSCOPY STOMA W SUBMUCOSAL INJECTION		No	No	No	No		No	No
44405	COLONOSCOPY STOMA W BALLOON DILATION		No	No	No	No		No	No
44406	COLONOSCOPY STOMA W ENDOSCOPIC ULTRASOUND EXAM		No	No	No	No		No	No
44407	COLONOSCOPY STOMA W US GID NDL ASPIR BX		No	No	No	No		No	No
44408	COLONOSCOPY THROUGH STOMA WITH DECOMPRESSION		No	No	No	No		No	No
44500	INTRODUCTION LONG GI TUBE SEPARATE PROCEDURE		No	No	No	No		No	No
44602	ENTERORRHAPHY 1PERFORATION		No	No	Not Cov	No		No	No
44603	ENTERORRHAPHY MULTIPLE PERFORATIONS		No	No	Not Cov	No		No	No
44604	SUTR LG INTESTINE 1 MULT PERFORAT W O COLOSTOMY		Not Cov	No	Not Cov	No		No	No
44605	SUTR LG INTESTINE 1 MULT PERFORAT W COLOSTOMY		Not Cov	No	Not Cov	No		No	No
44615	INTSTINAL STRICTUROPLASTY W WO DILAT OBSTR CJ		No	No	Not Cov	No		No	No
44620	CLOSURE ENTEROSTOMY LG SMALL INTESTINE		No	No	Not Cov	No		No	No
44625	CLSR NTRSTM LG SM RESCJ AND ANAST OTH THN CLRCT		Not Cov	No	Not Cov	No		No	No
44626	CLSR NTRSTM LG SM RESCJ AND COLORECTAL ANASTOMOSIS		Not Cov	No	Not Cov	No		No	No
44640	CLOSURE INTESTINAL CUTANEOUS FISTULA		No	No	Not Cov	No		No	No

This prior authorization guide applies to Medicaid, Medicare, and Marketplace.

DOS Effective 10/1/19; Posted 10/30/19

All Inpatient services require prior authorization

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*** All Medicare services subject to the limitations in the CMS billing guide and fee schedules at <https://www.cms.gov/> ***

Code	Code Description	Comments	Apple Health & IMC Medical				IMC / BHSO (Mental Health covered svcs)	Medicare	Market Place
			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
44650	CLSR ENTEROENTERIC ENTEROCOLIC FSTL		No	No	Not Cov	No		No	No
44660	CLSR ENTEROVES FSTL W O INTSTINAL BLADDER RESCJ		Not Cov	No	Not Cov	No		No	No
44661	CLSR ENTEROVES FSTL W INTESTINE AND BLADDER RESCJ		Not Cov	No	Not Cov	No		No	No
44680	INTESTINAL PLICATION SEPARATE PROCEDURE		Not Cov	No	Not Cov	No		No	No
44700	EXCLUSION SM INT FROM PELVIS MESH PROSTH TISS		Not Cov	No	Not Cov	No		No	No
44701	INTRAOPERATIVE COLONIC LAVAGE		No	No	Not Cov	No		No	No
44705	PREPARE FECAL MICROBIOTA FOR INSTILLATION		No	No	Not Cov	No		Not Cov	No
44715	BKBENCH PREP CADAVER LIVING DONOR INTESTINE		Not Cov	Yes	Not Cov	Yes		Yes	Yes
44720	BKBENCH RCNSTJ INT ALGRFT VEN ANAST EA		Not Cov	Yes	Not Cov	Yes		Yes	Yes
44721	BKBENCH RCNSTJ INT ALGRFT ARTL ANAST EA		Not Cov	Yes	Not Cov	Yes		Yes	Yes
44799	UNLISTED PROCEDURE SMALL INTESTINE		Yes	Yes	Not Cov	Yes		Yes	Yes
44800	EXC MECKEL'S DIVERTICULUM OMPHALOMESENTERIC DUCT		Not Cov	No	Not Cov	No		No	No
44820	EXCISION LESION MESENTERY SEPARATE PROCEDURE		No	No	Not Cov	No		No	No
44850	SUTURE MESENTERY SEPARATE PROCEDURE		No	No	Not Cov	No		No	No
44899	UNLISTED PX MECKEL'S DIVERTICULUM AND MESENTERY		Yes	Yes	Not Cov	Yes		Yes	Yes
44900	INCISION AND DRAINAGE APPENDICEAL ABSCESS OPEN		No	No	Not Cov	No		No	No
44950	APPENDECTOMY		No	No	Not Cov	No		No	No
44955	APPENDEC INDICATED PURPOSE OTH MAJOR PX NOT SPX		No	No	Not Cov	No		No	No
44960	APPENDEC RPTD APPENDIX ABSC PRITONITIS		Not Cov	No	Not Cov	No		No	No
44970	LAPAROSCOPIC APPENDECTOMY		No	No	Not Cov	No		No	No
44979	UNLISTED LAPAROSCOPY PROCEDURE APPENDIX		Yes	Yes	Not Cov	Yes		Yes	Yes
45000	TRANSRECTAL DRAINAGE OF PELVIC ABSCESS		No	No	No	No		No	No
45005	I AND D SUBMUCOSAL ABSCESS RECTUM		No	No	No	No		No	No
45020	I AND D DP SUPRALEVATOR PELVIRCT RETRORCT ABSC		No	No	No	No		No	No
45100	BX ANORECTAL WALL ANAL APPROACH		No	No	No	No		No	No
45108	ANORECTAL MYOMECTOMY		No	No	No	No		No	No
45110	PRCTECT COMPL CMBN ABDOMINOPRNL W CLST		Not Cov	No	Not Cov	No		No	No
45111	PRCTECT PRTL RESCJ RECTUM TABDL APPR		Not Cov	No	Not Cov	No		No	No
45112	PRCTECT CMBN ABDOMINOPRNL PULL-THRU PX		Not Cov	No	Not Cov	No		No	No
45113	PRCTECT PRTL W MUCOSEC ILEOANAL ANAST RSVR		No	No	Not Cov	No		No	No
45114	PRCTECT PRTL W ANAST ABDL AND TRANSSAC APPROACH		Not Cov	No	Not Cov	No		No	No
45116	PRCTECT PRTL W ANAST TRANSSAC APPR ONLY		Not Cov	No	Not Cov	No		No	No
45119	PRCTECT CMBN PULL-THRU W RSVR W NTRSTM		Not Cov	No	Not Cov	No		No	No
45120	PRCTECT COMPL W PULL-THRU PX AND ANASTOMOSIS		Not Cov	No	Not Cov	No		No	No
45121	PRCTECT COMPL W STOT TOT COLCT W MLT BXS		Not Cov	No	Not Cov	No		No	No
45123	PRCTECT PRTL W O ANAST PRNL APPR		No	No	Not Cov	No		No	No
45126	PELVIC EXENTERATION COLORECTAL MALIGNANCY		Not Cov	No	Not Cov	No		No	No
45130	EXC RCT PROCIDENTIA W ANAST PERINEAL APPROACH		Not Cov	No	Not Cov	No		No	No
45135	EXC RCT PROCIDENTIA W ANAST ABDL AND PRNL APPROACH		Not Cov	No	Not Cov	No		No	No

This prior authorization guide applies to Medicaid, Medicare, and Marketplace.

DOS Effective 10/1/19; Posted 10/30/19

All Inpatient services require prior authorization

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Code	Code Description	Comments	Apple Health & IMC Medical				IMC / BHSO (Mental Health covered svcs)	Medicare	Market Place
			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
45136	EXC ILEOANAL RSVR W ILEOSTOMY		No	No	Not Cov	No	No	No	
45150	DIVISION STRICTURE RECTUM		No	No	No	No	No	No	
45160	EXC RCT TUM PROCTOTOMY TRANSSAC TRANSCOCCYGEAL		No	No	No	No	No	No	
45171	EXC RCT TUM NOT INCL MUSCULARIS PROPRIA		No	No	No	No	No	No	
45172	EXC RCT TUM INCL MUSCULARIS PROPRIA		No	No	No	No	No	No	
45190	DESTRUCTION RECTAL TUMOR TRANSANAL APPROACH		No	No	No	No	No	No	
45300	PROCTOSGMDSC RGD DX W WO COLLJ SPEC BR WA SPX		No	No	Not Cov	No	No	No	
45303	PROCTOSGMDSC RIGID W DILATION		No	No	Not Cov	No	No	No	
45305	PROCTOSGMDSC RIGID W BX SINGLE MULTIPLE		No	No	No	No	No	No	
45307	PROCTOSGMDSC RIGID W RMVL FOREIGN BODY		No	No	No	No	No	No	
45308	PROCTOSGMDSC RIGID RMVL 1 LESION CAUTERY		No	No	No	No	No	No	
45309	PROCTOSGMDSC RIGID RMVL 1 LESION SNARE TQ		No	No	No	No	No	No	
45315	PROCTOSGMDSC RIGID RMVL MULT TUMOR CAUTERY SNARE		No	No	No	No	No	No	
45317	PROCTOSGMDSC RIGID CONTROL BLEEDING		No	No	No	No	No	No	
45320	PROCTOSGMDSC RIGID ABLATION LESION		No	No	No	No	No	No	
45321	PROCTOSGMDSC RIGID DCMPRN VOLVULUS		No	No	No	No	No	No	
45327	PROCTOSGMDSC RIGID TNDSC STENT PLMT		No	No	No	No	No	No	
45330	SIGMOIDOSCOPY FLX DX W COLLJ SPEC BR WA IF PFRMD		No	No	Not Cov	No	No	No	
45331	SIGMOIDOSCOPY FLX W BIOPSY SINGLE MULTIPLE		No	No	No	No	No	No	
45332	SIGMOIDOSCOPY FLX W RMVL FOREIGN BODY		No	No	No	No	No	No	
45333	SIGMOIDOSCOPY FLX W RMVL TUMOR BY HOT BX FORCEPS		No	No	No	No	No	No	
45334	SIGMOIDOSCOPY FLX CONTROL BLEEDING		No	No	No	No	No	No	
45335	SGMDSC FLX DIREC SBMCSL NJX ANY SBST		No	No	No	No	No	No	
45337	SGMDSC FLX W DCMPRN W PLMT DCMPRN TUBE		No	No	No	No	No	No	
45338	SGMDSC FLX RMVL TUM POLYP OTH LES SNARE TQ		No	No	No	No	No	No	
45340	SIGMOIDOSCOPY FLX TNDSC BALO DILAT		No	No	No	No	No	No	
45341	SIGMOIDOSCOPY FLX NDSC US XM		No	No	No	No	No	No	
45342	SIGMOIDOSCOPY FLX TNDSC US GID NDL ASPIR BX		No	No	No	No	No	No	
45346	SIGMOIDOSCOPY FLX ABLATION TUMOR POLYP OTH LES		No	No	No	No	No	No	
45347	SIGMOIDOSCOPY FLX PLACEMENT OF ENDOSCOPIC STENT		No	No	No	No	No	No	
45349	SGMDSC FLX WITH ENDOSCOPIC MUCOSAL RESECTION		No	No	No	No	No	No	
45350	SIGMOIDOSCOPY FLX WITH WITH BAND LIGATION(S)		Not Cov	Not Cov	Not Cov	Not Cov	No	No	
45378	COLONOSCOPY FLX DX W COLLJ SPEC WHEN PFRMD		No	No	No	No	No	No	
45379	COLONOSCOPY FLX W REMOVAL OF FOREIGN BODY(S)		No	No	No	No	No	No	
45380	COLONOSCOPY W BIOPSY SINGLE MULTIPLE		No	No	No	No	No	No	
45381	COLSC FLX WITH DIRECTED SUBMUCOSAL NJX ANY SBST		No	No	No	No	No	No	
45382	COLSC FLEXIBLE W CONTROL BLEEDING ANY METHOD		No	No	No	No	No	No	
45384	COLSC FLX W REMOVAL LESION BY HOT BX FORCEPS		No	No	No	No	No	No	

This prior authorization guide applies to Medicaid, Medicare, and Marketplace.

DOS Effective 10/1/19; Posted 10/30/19

All Inpatient services require prior authorization

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Code	Code Description	Comments	Apple Health & IMC Medical				IMC / BHSO (Mental Health covered svcs)	Medicare	Market Place
			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
45385	COLSC FLX W RMVL OF TUMOR POLYP LESION SNARE TQ		No	No	No	No		No	No
45386	COLSC FLEXIBLE W TRANSENDOSCOPIC BALLOON DILAT		No	No	No	No		No	No
45388	COLONOSCOPY FLX ABLATION TUMOR POLYP OTHER LES		No	No	No	No		No	No
45389	COLONOSCOPY FLX WITH ENDOSCOPIC STENT PLACEMENT		No	No	No	No		No	No
45390	COLONOSCOPY FLX W ENDOSCOPIC MUCOSAL RESECTION		No	No	Not Cov	No		No	No
45391	COLSC FLX W NDSC US XM RCTM ET AL LMTD AND ADJ STRUX		No	No	No	No		No	No
45392	COLSC FLX W US GUID NDL ASPIR BX W US RCTM ET AL		No	No	No	No		No	No
45393	COLONOSCOPY FLEXIBLE WITH DECOMPRESSION		No	No	No	No		No	No
45395	LAPS PROCTECTOMY ABDOMINOPERINEAL W COLOSTOMY		Not Cov	No	Not Cov	No		No	No
45397	LAPS PROCTECTOMY COMBINED PULL-THRU W RESERVOIR		Not Cov	No	Not Cov	No		No	No
45398	COLONOSCOPY FLEXIBLE WITH BAND LIGATION(S)		No	No	Not Cov	No		No	No
45399	UNLISTED PROCEDURE COLON		Yes	Yes	Not Cov	Yes		Yes	Yes
45400	LAPAROSCOPY PROCTOPEXY PROLAPSE		No	No	Not Cov	No		No	No
45402	LAPAROSCOPY PROCTOPEXY PROLAPSE SIGMOID RESCJ		No	No	Not Cov	No		No	No
45499	UNLISTED LAPAROSCOPY PROCEDURE RECTUM		Yes	Yes	Not Cov	Yes		Yes	Yes
45500	PROCTOPLASTY STENOSIS		No	No	No	No		No	No
45505	PROCTOPLASTY PROLAPSE MUCOUS MEMBRANE		No	No	No	No		No	No
45520	PERIRECTAL INJ SCLEROSING SOLUTION PROLAPSE		No	No	Not Cov	No		No	No
45540	PROCTOPEXY ABDOMINAL APPROACH		Not Cov	No	Not Cov	No		No	No
45541	PROCTOPEXY PERINEAL APPROACH		No	No	No	No		No	No
45550	PROCTOPEXY W SIGMOID RESCJ ABDL APPR		Not Cov	No	Not Cov	No		No	No
45560	REPAIR RECTOCELE SEPARATE PROCEDURE		No	No	No	No		No	No
45562	EXPL RPR AND PRESACRAL DRG RECTAL INJURY		No	No	Not Cov	No		No	No
45563	EXPL RPR AND PRESACRAL DRG RECTAL INJ W COLOSTOMY		Not Cov	No	Not Cov	No		No	No
45800	CLOSURE RECTOVESICAL FISTULA		No	No	Not Cov	No		No	No
45805	CLSR RECTOVESICAL FISTULA W COLOSTOMY		Not Cov	No	Not Cov	No		No	No
45820	CLOSURE RECTOURETHRAL FISTULA		No	No	Not Cov	No		No	No
45825	CLOSURE RECTOURETHRAL FISTULA W COLOSTOMY		Not Cov	No	Not Cov	No		No	No
45900	RDCTJ PROCIDENTIA UNDER ANES SEPARATE PROCEDURE		No	No	No	No		No	No
45905	DILAT ANAL SPHNCTR SPX UNDER ANES OTH THN LOCAL		No	No	No	No		No	No
45910	DILAT RCT STRIX SPX UNDER ANES OTH THN LOCAL		No	No	No	No		No	No
45915	RMVL FECAL IMPACTION FB SPX UNDER ANES		No	No	No	No		No	No
45990	ANRCT XM SURG REQ ANES GENERAL SPI EDRL DX		No	No	No	No		No	No
45999	UNLISTED PROCEDURE RECTUM		Yes	Yes	Not Cov	Yes		Yes	Yes
46020	PLACEMENT SETON		No	No	No	No		No	No
46030	REMOVAL ANAL SETON OTHER MARKER		No	No	No	No		No	No
46040	I AND D ISCHIORECTAL AND PERIRECTAL ABSCESS SPX		No	No	No	No		No	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
46045	I AND D INTRAMURAL IM ABSC TRANSANAL ANES		No	No	No	No		No	No
46050	I AND D PERIANAL ABSCESS SUPERFICIAL		No	No	No	No		No	No
46060	I AND D ISCHIORCT INTRAMURAL ABSC W WO SETON		No	No	No	No		No	No
46070	INCISION ANAL SEPTUM INFANT		No	No	No	No		No	No
46080	SPHINCTEROTOMY ANAL DIVISION SPHINCTER SPX		No	No	No	No		No	No
46083	INCISION THROMBOSED HEMORRHOID EXTERNAL		No	No	Not Cov	No		No	No
46200	FISSURECTOMY INCL SPHINCTEROTOMY WHEN PERFORMED		No	No	No	No		No	No
46220	EXCISION SINGLE EXTERNAL PAPILLA OR TAG ANUS		No	No	No	No		No	No
46221	HEMORRHOIDECTOMY INTERNAL RUBBER BAND LIGATIONS		No	No	Not Cov	No		No	No
46230	EXCISION MULTIPLE EXTERNAL PAPILLAE TAGS ANUS		No	No	No	No		No	No
46250	HEMORRHOIDECTOMY XTRNL 2 OR GRT COLUMN GROUP		No	No	No	No		No	No
46255	HEMORRHOIDECTOMY NTRNL AND XTRNL 1 COLUMN GROUP		No	No	No	No		No	No
46257	HEMORRHOID NTRNL AND XTRNL 1 COLUMN W FISSURECTO		No	No	No	No		No	No
46258	HRHC 1 COL GRP W FSTULECTMY INCL FSSRECTOMY		No	No	No	No		No	No
46260	HEMORRHOIDECTOMY INT AND XTRNL 2 OR GRT COLUMN GRO		No	No	No	No		No	No
46261	HRHC NTRNL AND XTRNL 2 OR GRT COLUMN GROUP W FISSU		No	No	No	No		No	No
46262	HRHC 2 OR GRT COL GRP W FSTULECTMY INCL FSSRECTMY		No	No	No	No		No	No
46270	SURG TX ANAL FISTULA SUBQ		No	No	No	No		No	No
46275	SURG TX ANAL FISTULA INTERSPHINCTERIC		No	No	No	No		No	No
46280	TX ANAL FSTL TRANS SUPRA XTRASPHNCTRC INCL SETON		No	No	No	No		No	No
46285	SURG TX ANAL FISTULA 2ND STAGE		No	No	No	No		No	No
46288	CLSR ANAL FSTL W RCT ADVMNT FLAP		No	No	No	No		No	No
46320	EXC THROMBOSED HEMORRHOID XTRNL		No	No	Not Cov	No		No	No
46500	INJECTION SCLEROSING SOLUTION HEMORRHOIDS		No	No	Not Cov	No		No	No
46505	CHEMODENERVATION INTERNAL ANAL SPHINCTER		No	No	No	No		No	No
46600	ANOSCOPY DX W COLLJ SPEC BR WA SPX WHEN PRFRMD		No	No	Not Cov	No		No	No
46601	ANOSCOPY DX W HRA AND CHEM AGNTS ENHANCEMENT		Not Cov	Not Cov	Not Cov	Not Cov		No	Yes
46604	ANOSCOPY W DILATION		No	No	Not Cov	No		No	No
46606	ANOSCOPY W BX SINGLE MULTIPLE		No	No	Not Cov	No		No	No
46607	ANOSCOPY DX W HRA AND CHEM AGNTS ENHANCEMENT W BX		Not Cov	Not Cov	Not Cov	Not Cov		No	Yes
46608	ANOSCOPY W RMVL FOREIGN BODY		No	No	No	No		No	No
46610	ANOSCOPY W RMVL LESION CAUTERY		No	No	No	No		No	No
46611	ANOSC RMVL 1 TUM POLYP OTH LES SNARE TQ		No	No	No	No		No	No
46612	ANOSC RMVL MULT TUMORS CAUTERY SNARE		No	No	No	No		No	No
46614	ANOSCOPY CONTROL BLEEDING		No	No	Not Cov	No		No	No

Guide is subject to change at any time. If a member belongs to a group delegated for UM, contact that group for authorization. Claim payment is subject to eligibility and benefits at the time of service. Claim processing edits will apply.

This prior authorization guide applies to Medicaid, Medicare, and Marketplace.

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
46615	ANOSCOPY ABLATION LESION		No	No	No	No		No	No
46700	ANOPLASTY PLASTIC OPERATION STRICTURE ADULT		No	No	No	No		No	No
46705	ANOPLASTY PLASTIC OPERATION STRICTURE INFANT		No	No	Not Cov	No		No	No
46706	REPAIR ANAL FISTULA W FIBRIN GLUE		No	No	No	No		No	No
46707	REPAIR ANORECTAL FISTULA PLUG		No	No	No	No		No	No
46710	RPR ILEOANAL POUCH FSTL POUCH ADVMNT TPRNL APPR		No	No	Not Cov	No		No	No
46712	RPR ILEOANAL POUCH FSTL POUCH ADVMNT CMBN APPR		No	No	Not Cov	No		No	No
46715	RPR LW IMPERFORATE ANUS W ANOPRNL FSTL CUT-BK		No	No	Not Cov	No		No	No
46716	RPR LW IMPERFORATE ANUS W TRPOS FISTULA		No	No	Not Cov	No		No	No
46730	RPR HI IMPRF ANUS W O FSTL PRNL SACROPRNL APPR		Not Cov	No	Not Cov	No		No	No
46735	RPR HI IMPRF ANUS W O FISTULA CMBN APPR		Not Cov	No	Not Cov	No		No	No
46740	RPR HI IMPRF ANUS W FSTL PRNL SACROPRNL APPR		No	No	Not Cov	No		No	No
46742	RPR HI IMPRF ANUS W FSTL TABDL AND SACROPRNL		Not Cov	No	Not Cov	No		No	No
46744	RPR CLOACAL ANOMALY SACROPERINEAL		Not Cov	No	Not Cov	No		No	No
46746	RPR CLOACAL ANOMALY CMBN ABDL AND SACROPRNL		Not Cov	No	Not Cov	No		No	No
46748	RPR CLOACAL ANOMALY CMBN ABDL AND SACROPRNL W GRF		Not Cov	No	Not Cov	No		No	No
46750	SPHNCTROP ANAL INCONTINENCE PROLAPSE ADULT		No	No	No	No		No	No
46751	SPHNCTROP ANAL INCONTINENCE PROLAPSE CHLD		No	No	Not Cov	No		No	No
46753	GRAFT THIERSCH RCT INCONTINENCE AND PROLAPSE		No	No	No	No		No	No
46754	RMVL THIERSCH WIRE SUTURE ANAL CANAL		No	No	No	No		No	No
46760	SPHINCTEROPLASTY ANAL MUSCLE TRANSPLANT		No	No	No	No		No	No
46761	SPHNCTROP ANAL LEVATOR MUSC IMBRCJ		No	No	No	No		No	No
46900	DSTRJ LESION ANUS SIMPLE CHEMICAL		No	No	Not Cov	No		No	No
46910	DSTRJ LESION ANUS SMPL ELTRDSICCATION		No	No	Not Cov	No		No	No
46916	DSTRJ LESION ANUS SIMPLE CRYOSURGERY		No	No	Not Cov	No		No	No
46917	DSTRJ LESION ANUS SIMPLE LASER SURG		No	No	No	No		No	No
46922	DSTRJ LESION ANUS SIMPLE SURG EXCISION		No	No	No	No		No	No
46924	DSTRJ LESION ANUS EXTENSIVE		No	No	No	No		No	No
46930	DESTRUCTION INTERNAL HEMORRHOID THERMAL ENERGY		No	No	Not Cov	No		No	No
46940	CURTG CAUT ANAL FISSURE W DILAT SPHNCTR SPX 1ST		No	No	Not Cov	No		No	No
46942	CURTG CAUT ANAL FISSURE W DILAT SPHNCTR SPX SBSQ		No	No	Not Cov	No		No	No
46945	HRHC NTRNL LIG OTH THAN RBBR BAND 1 COL GRP		No	No	Not Cov	No		No	No
46946	HRHC NTRNL LIG OTH THAN RBBR BAND 2 OR GRT COL GRP		No	No	No	No		No	No
46947	HEMORRHOIDOPEXY STAPLING		No	No	No	No		No	No
46999	UNLISTED PROCEDURE ANUS		Yes	Yes	Not Cov	Yes		Yes	Yes
47000	BIOPSY LIVER NEEDLE PERCUTANEOUS		No	No	No	No		No	No
47001	BX LVR NDL DONE PURPOSE TM OTH MAJOR PX		No	No	Not Cov	No		No	No
47010	HEPATOTOMY OPEN DRAINAGE ABSCESS CYST 1 2 STAGES		Not Cov	No	Not Cov	No		No	No
47015	LAPT W ASPIR AND NJX HEPATC PARASITIC CYST ABSCESS		No	No	Not Cov	No		No	No

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DOS Effective 10/1/19; Posted 10/30/19

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
47100	BIOPSY LIVER WEDGE		Not Cov	No	Not Cov	No		No	No
47120	HEPATECTOMY RESCJ PARTIAL LOBECTOMY		Not Cov	No	Not Cov	No		No	No
47122	HEPATECTOMY RESCJ TRISEGMENTECTOMY		Not Cov	No	Not Cov	No		No	No
47125	HEPATECTOMY RESCJ TOTAL LEFT LOBECTOMY		Not Cov	No	Not Cov	No		No	No
47130	HEPATECTOMY RESCJ TOTAL RIGHT LOBECTOMY		Not Cov	No	Not Cov	No		No	No
47133	DONOR HEPATECTOMY CADAVER DONOR		Not Cov	Yes	Not Cov	Yes		Yes	Yes
47135	LVR ALTRNSPLJ ORTHOTOPIC PRTL WHL DON ANY AGE		Not Cov	Yes	Not Cov	Yes		Yes	Yes
47140	DONOR HEPATECTOMY LIVING DONOR SEG II AND III		Not Cov	Yes	Not Cov	Yes		Yes	Yes
47141	DONOR HEPATECTOMY LIVING DONOR SEG II III AND IV		Not Cov	Yes	Not Cov	Yes		Yes	Yes
47142	DONOR HEPATECTOMY LIVING DONOR SEG V VI VII AND VI		Not Cov	Yes	Not Cov	Yes		Yes	Yes
47143	BKBENCH PREP CADAVER DONOR		Not Cov	Yes	Not Cov	Yes		Yes	Yes
47144	BKBENCH PREPJ CADAVER WHOLE LIVER GRF I AND IV VII		Not Cov	Yes	Not Cov	Yes		No	Yes
47145	BKBENCH PREPJ CADAVER DONOR WHL LVR GRF I AND V VI		Not Cov	Yes	Not Cov	Yes		No	Yes
47146	BKBENCH RCNSTJ LVR GRF VENOUS ANAST EA		Not Cov	Yes	Not Cov	Yes		Yes	Yes
47147	BKBENCH RCNSTJ LVR GRF ARTL ANAST EA		Not Cov	Yes	Not Cov	Yes		Yes	Yes
47300	MARSUPIALIZATION CST ABSC LVR		Not Cov	No	Not Cov	No		No	No
47350	MGMT LVR HEMRRG SMPL SUTR LVR WND INJ		Not Cov	No	Not Cov	No		No	No
47360	MGMT LVR HEMRRG CPLX SUTR WND INJ		Not Cov	No	Not Cov	No		No	No
47361	MGMT LVR HEMRRG EXPL WND DBRDMT COAGJ SUTR		Not Cov	No	Not Cov	No		No	No
47362	MGMT LVR HEMRRG RE-EXPL WND RMVL PACKING		Not Cov	No	Not Cov	No		No	No
47370	LAPS SURG ABLTJ 1 OR GRT LVR TUM RF		No	No	Not Cov	No		No	No
47371	LAPS SURG ABLTJ 1 OVER LVR TUM CRYOSURG		No	No	Not Cov	No		No	No
47379	UNLIS LAPAROSCOPIC PROCEDURE LIVER		Yes	Yes	Not Cov	Yes		Yes	Yes
47380	ABLTJ OPN 1 OR GRT LVR TUM RF		Not Cov	Yes	Not Cov	No		Yes	Yes
47381	ABLTJ OPN 1 OR GRT LVR TUM CRYOSURG		Not Cov	Yes	Not Cov	No		Yes	Yes
47382	ABLTJ 1 OR GRT LVR TUM PRQ RF		Yes	Yes	Yes	No		Yes	Yes
47383	ABLATION 1 OR GRT LIVER TUMOR PERQ CRYOABLATION		No	No	No	No		No	No
47399	UNLISTED PROCEDURE LIVER		Yes	Yes	Not Cov	Yes		Yes	Yes
47400	HEPATCOTOMY HEPATCOSTOMY W EXPL DRG RMVL ST1		Not Cov	No	Not Cov	No		No	No
47420	CHOLEDOCHOT OST W O SPHNCTROTOMY SPHNCTROP		Not Cov	No	Not Cov	No		No	No
47425	CHOLEDOCHOT OST W SPHNCTROTOMY SPHNCTROP		Not Cov	No	Not Cov	No		No	No
47460	TRANSDUOL SPHINCTEROT PLASTY W WO RMVL CALCULUS		Not Cov	No	Not Cov	No		No	No
47480	CHOLECSTOT CHOLECSTOST W EXPL DRG RMVL ST1 SPX		Not Cov	No	Not Cov	No		No	No
47490	CHOLECYSTOSTOMY PRQ W IMAGING AND CATHETER PLMT		No	No	Not Cov	No		No	No
47531	NJX CHOLANGIO PRQ W IMG GID RS AND I EXISTING ACCESS		No	No	Not Cov	No		No	No
47532	NJX CHOLANGIO PRQ W IMG GID RS AND I NEW ACCESS		No	No	Not Cov	No		No	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
47533	PRQ PLMT BILIARY DRG CATH W IMG GID RS AND I EXTERNL		No	No	No	No		No	No
47534	PRQ PLMT BILIARY DRG CATH W IMG GID RS AND I INT-EXT		No	No	No	No		No	No
47535	CONV EXT BIL DRG CATH TO INT-EXT BIL DRG CATH		No	No	No	No		No	No
47536	EXCHANGE BILIARY DRG CATHETER PRQ W IMG GID RS AND I		No	No	No	No		No	No
47537	REMOVAL BILIARY DRG CATHETER REQ FLUOR GID RS AND I		No	No	No	No		No	No
47538	PLMT BILE DUCT STENT PRQ EXISTING ACCESS		No	No	No	No		No	No
47539	PLMT BILE DUCT STENT PRQ NEW ACCESS W O SEP CATH		No	No	No	No		No	No
47540	PLMT BILE DUCT STENT PRQ NEW ACCESS W SEP CATH		No	No	No	No		No	No
47541	PLMT ACCESS THRU BILIARY TREE INTO SMALL BWL NEW		No	No	No	No		No	No
47542	BALLOON DILAT BILIARY DUCT AMPULLA PRQ EACH DUCT		No	No	Not Cov	No		No	No
47543	ENDOLUMINAL BX BILIARY TREE PRQ ANY METH 1 MLT		No	No	Not Cov	No		No	No
47544	REMOVAL BILIARY DUCT AND GLBLDR CALCULI PERQ RS AND I		No	No	Not Cov	No		No	No
47550	BILIARY NDSC INTRAOPERATIVE		Not Cov	No	Not Cov	No		No	No
47552	BILIARY ENDO PRQ T-TUBE DX W COLLECT SPEC BRUSH		No	No	No	No		No	No
47553	BILIARY NDSC PRQ T-TUBE W BX SINGLE MULTIPLE		No	No	No	No		No	No
47554	BILIARY ENDOSCOPY PRQ VIA T-TUBE W RMVL CALCULUS		No	No	No	No		No	No
47555	BILIARY NDSC PRQ T-TUBE W DIL DUCT W O STENT		No	No	No	No		No	No
47556	BILIARY NDSC PRQ T-TUBE DILAT STRIX W STENT		No	No	No	No		No	No
47562	LAPAROSCOPY SURG CHOLECYSTECTOMY		No	No	No	No		No	No
47563	LAPS SURG CHOLECYSTECTOMY W CHOLANGIOGRAPHY		No	No	No	No		No	No
47564	LAPS SURG CHOLECSTC W EXPL COMMON DUCT		No	No	No	No		No	No
47570	LAPAROSCOPY SURG CHOLECYSTOENTEROSTOMY		No	No	Not Cov	No		No	No
47579	UNLISTED LAPAROSCOPY PROCEDURE BILIARY TRACT		Yes	Yes	Not Cov	Yes		Yes	Yes
47600	CHOLECYSTECTOMY		Not Cov	No	Not Cov	No		No	No
47605	CHOLECYSTECTOMY W CHOLANGIOGRAPHY		Not Cov	Yes	Not Cov	No		Yes	Yes
47610	CHOLECYSTECTOMY W EXPLORATION COMMON DUCT		Not Cov	Yes	Not Cov	No		Yes	Yes
47612	CHOLECYSTECTOMY EXPL DUCT CHOLEDOCHOENTEROSTOMY		Not Cov	Yes	Not Cov	No		Yes	Yes
47620	CHOLECSTC EXPL DUX SPHNCTROTOMY SPHNCTROP		Not Cov	Yes	Not Cov	No		Yes	Yes
47700	EXPL CONGENITAL ATRESIA BILE DUCTS		Not Cov	No	Not Cov	No		No	No
47701	PORTOENTEROSTOMY		Not Cov	No	Not Cov	No		No	No
47711	EXC BILE DUX TUM W WO PRIM RPR XTRHEPATC		Not Cov	No	Not Cov	No		No	No
47712	EXC BILE DUX TUM W WO PRIM RPR INTRAHEPATC		Not Cov	No	Not Cov	No		No	No
47715	EXCISION CHOLEDOCHAL CYST		Not Cov	No	Not Cov	No		No	No
47720	CHOLECYSTOENTEROSTOMY DIRECT		Not Cov	No	Not Cov	No		No	No
47721	CHOLECYSTOENTEROSTOMY W GASTROENTEROSTOMY		Not Cov	No	Not Cov	No		No	No
47740	CHOLECYSTOENTEROSTOMY ROUX-EN-Y		Not Cov	No	Not Cov	No		No	No
47741	CHOLECSTONTRSTM ROUX-EN-Y W GASTRONTRSTM		Not Cov	No	Not Cov	No		No	No

This prior authorization guide applies to Medicaid, Medicare, and Marketplace.

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
47760	ANAST XTRHEPATC BILIARY DUCTS AND GI TRACT		Not Cov	No	Not Cov	No		No	No
47765	ANAST INTRAHEPATC DUCTS AND GI TRACT		Not Cov	No	Not Cov	No		No	No
47780	ANAST ROUX-EN-Y XTRHEPATC BILIARY DUCTS AND GI		Not Cov	No	Not Cov	No		No	No
47785	ANAST ROUX-EN-Y INTRAHEPATC BILIARY DUCTS AND GI		Not Cov	No	Not Cov	No		No	No
47800	RCNSTJ PLSTC BILIARY DUCTS W END-TO-END ANAST		Not Cov	No	Not Cov	No		No	No
47801	PLACEMENT CHOLEDOCHAL STENT		No	No	Not Cov	No		No	No
47802	U-TUBE HEPATICOENTEROSTOMY		Not Cov	No	Not Cov	No		No	No
47900	SUTURE EXTRAHEPATIC BILE DUCT PRE-EXIST INJURY		Not Cov	No	Not Cov	No		No	No
47999	UNLISTED PROCEDURE BILIARY TRACT		Yes	Yes	Not Cov	Yes		Yes	Yes
48000	PLACE DRAIN PERIPANCREATIC ACUTE PANCREATITIS		No	No	Not Cov	No		No	No
48001	PLACE DRAIN PERIPANCREATIC W CHOLECYSTOSTOMY		No	No	Not Cov	No		No	No
48020	REMOVAL PANCREATIC CALCULUS		Not Cov	No	Not Cov	No		No	No
48100	BIOPSY PANCREAS OPEN		Not Cov	No	Not Cov	No		No	No
48102	BIOPSY PANCREA PERCUTANEOUS NEEDLE		No	No	No	No		No	No
48105	RESECT DBRDMT PANCREAS NECROTIZING PANCREATITIS		Not Cov	No	Not Cov	No		No	No
48120	EXCISION LESION PANCREAS		Not Cov	No	Not Cov	No		No	No
48140	PNCRTECT DSTL STOT W O PNCRTCOJEJUNOSTOMY		No	No	Not Cov	No		No	No
48145	PNCRTECT DSTL STOT W PNCRTCOJEJUNOSTOMY		Not Cov	No	Not Cov	No		No	No
48146	PNCRTECT DSTL NR-TOT W PRSRV DUO CHLD-TYP PX		Not Cov	No	Not Cov	No		No	No
48148	EXCISION AMPULLA VATER		Not Cov	No	Not Cov	No		No	No
48150	PNCRTECT PROX STOT W PANCREATOJEJUNOSTOMY		Not Cov	No	Not Cov	No		No	No
48152	PNCRTECT WHIPPLE W O PANCREATOJEJUNOSTOMY		Not Cov	No	Not Cov	No		No	No
48153	PNCRTECT W PANCREATOJEJUNOSTOMY		Not Cov	No	Not Cov	No		No	No
48154	PNCRTECT PROX STOT W O PANCREATOJEJUNOSTOMY		Not Cov	No	Not Cov	No		No	No
48155	PANCREATECTOMY TOTAL		Not Cov	No	Not Cov	No		No	No
48160	PANCREATECTOMY W TRNSPLJ PANCREAS ISLET CELLS		Yes	Yes	Not Cov	Yes		Not Cov	Yes
48400	INJECTION INTRAOPERATIVE PANCREATOGRAPHY		Not Cov	No	Not Cov	No		No	No
48500	MARSUPIALIZATION PANCREATIC CYST		Not Cov	No	Not Cov	No		No	No
48510	EXTERNAL DRAINAGE PSEUDOCYST OF PANCREAS OPEN		No	No	Not Cov	No		No	No
48520	INT ANAST PANCREATIC CYST GI TRACT DIRECT		Not Cov	No	Not Cov	No		No	No
48540	INT ANAST PANCREATIC CYST GI TRACT ROUX-EN-Y		Not Cov	No	Not Cov	No		No	No
48545	PANCREATORRHAPHY INJURY		Not Cov	No	Not Cov	No		No	No
48547	DUOL EXCLUSION W GASTROJEJUNOSTOMY PNCRTC INJ		Not Cov	No	Not Cov	No		No	No
48548	PANCREATICOJEJUNOSTOMY SIDE-TO-SIDE ANAST		Not Cov	No	Not Cov	No		No	No
48550	DONOR PANCREATECTOMY DUODENAL SGM TRANSPLANT		Yes	Yes	Not Cov	Yes		Yes	Yes
48551	BKBENCH PREPJ CADAVER DONOR PANCREAS ALLOGRAFT		Not Cov	Yes	Not Cov	Yes		Yes	Yes
48552	BKBENCH RCNSTJ CDVR PNCRS ALGRFT VEN ANAST EA		Not Cov	Yes	Not Cov	Yes		Yes	Yes
48554	TRANSPLANTATION PANCREATIC ALLOGRAFT		Not Cov	Yes	Not Cov	Yes		Not Cov	Yes
48556	RMVL TRANSPLANTED PANCREATIC ALLOGRAFT		Not Cov	Yes	Not Cov	Yes		Yes	Yes
48999	UNLISTED PROCEDURE PANCREAS		Yes	Yes	Not Cov	Yes		Yes	Yes

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			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
49000	EXPLORATORY LAPAROTOMY CELIOTOMY W WO BIOPSY SPX		No	No	Not Cov	No		No	No
49002	REOPENING RECENT LAPAROTOMY		No	No	Not Cov	No		No	No
49010	EXPL RETROPERITONEUM W WO BX SPX		No	No	Not Cov	No		No	No
49020	DRAINAGE PERITON ABSCESS LOCAL PERITONITIS OPEN		Not Cov	No	Not Cov	No		No	No
49040	DRAINAGE SUBDIAPHRAGMATIC SUBPHREN ABSCESS OPEN		Not Cov	No	Not Cov	No		No	No
49060	DRAINAGE OF RETROPERITONEAL ABSCESS OPEN		Not Cov	No	Not Cov	No		No	No
49062	DRG XTRAPERITONEAL LYMPHOCELE PERITON CAVITY OPN		Not Cov	No	Not Cov	No		No	No
49082	ABDOM PARACENTESIS DX THER W O IMAGING GUIDANCE		No	No	No	No		No	No
49083	ABDOM PARACENTESIS DX THER W IMAGING GUIDANCE		No	No	No	No		No	No
49084	PERITONEAL LAVAGE W WO IMAGING GUIDANCE		No	No	No	No		No	No
49180	BX ABDL RETROPERITONEAL MASS PRQ NEEDLE		No	No	No	No		No	No
49185	SCLEROTHERAPY FLUID COLLECTION PRQ W IMG GUID		No	No	Not Cov	No		No	No
49203	EXCISION DESTRUCTION OPEN ABDOMINAL TUMOR 5 CM OR LESS		Not Cov	No	Not Cov	No		No	No
49204	EXC DESTRUCTION OPEN ABDMNL TUMORS 5.1-10.0 CM		Not Cov	No	Not Cov	No		No	No
49205	EXC DESTRUCTION OPEN ABDOMINAL TUMORS OVER 10.0 CM		Not Cov	No	Not Cov	No		No	No
49215	EXC PRESAC SACROCOCCYGEAL TUMOR		No	No	Not Cov	No		No	No
49220	STAGING LAPAROTOMY HODGKINS DISEASE LYMPHOMA		No	No	Not Cov	No		No	No
49250	UMBILECTOMY OMPHALECTOMY EXC UMBILICUS SPX		No	No	No	No		No	No
49255	OMNTC EPIPLOECTOMY RESCJ OMENTUM SPX		Yes	Yes	Not Cov	No		Yes	Yes
49320	LAPS ABD PRTM AND OMENTUM DX W WO SPEC BR WA SPX		No	No	No	No		No	No
49321	LAPAROSCOPY SURG W BX SINGLE MULTIPLE		No	No	No	No		No	No
49322	LAPS SURG W ASPIR CAVITY CYST SINGLE MULTIPLE		No	No	No	No		No	No
49323	LAPS SURG W DRG LYMPHOCELE PRTL CAVITY		No	No	Not Cov	No		No	No
49324	LAPS INSERTION TUNNELED INTRAPERITONEAL CATHETER		No	No	No	No		No	No
49325	LAPS W REVISION INTRAPERITONEAL CATHETER		No	No	No	No		No	No
49326	LAPAROSCOPY W OMENTOPEXY		No	No	No	No		No	No
49327	LAPS W INSERTION NTRSTL DEV W IMG GUID 1 MLT		No	No	No	No		No	No
49329	UNLISTED LAPAROSCOPIC PX ABD PERTONEUM AND OMENTUM		Yes	Yes	Not Cov	Yes		Yes	Yes
49400	INJECTION AIR CONTRAST PERITONEAL CAVITY SPX		No	No	Not Cov	No		No	No
49402	REMOVAL PERITONEAL FOREIGN BODY FROM CAVITY		No	No	No	No		No	No
49405	IMAGE-GUIDE FLUID COLLXN DRAINAGE CATH VISC PERQ		No	No	Not Cov	No		No	No
49406	IMG-GUIDE FLUID COLLXN DRAINAG CATH PERITON PERQ		No	No	No	No		No	No

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			Outpatient		ASC	Office Setting			
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49407	IMAGE FLUID COLLXN DRAINAG CATH TRANSREC VAGINAL		No	No	No	No		No	No
49411	INTERSTITIAL DEV PLMT RADIATION THERAPY 1 MLT		No	No	No	No		No	No
49412	PLACEMENT INTRSTL DEV OPN W IMG GUID 1 MLT		No	No	Not Cov	No		No	No
49418	INSJ INTRAPERITONEAL CATHETER W IMG GUID		No	No	No	No		No	No
49419	INSERTION TUNNEL INTRAPERITONEAL CATH SUBQ PORT		No	No	No	No		No	No
49421	INSERTION TUNNEL INTRAPERITONEAL CATH DIAL OPEN		No	No	No	No		No	No
49422	REMOVAL TUNNELED INTRAPERITONEAL CATHETER		No	No	No	No		No	No
49423	EXCHNG ABSC CST DRG CATH RAD GID SPX		No	No	No	No		No	No
49424	CNTRST NJX ASSMT ABSC CST VIA DRG CATH TUBE SPX		No	No	Not Cov	No		No	No
49425	INSERTION PERITONEAL-VENOUS SHUNT		No	No	Not Cov	No		No	No
49426	REVIS PERITONEAL-VENOUS SHUNT		No	No	No	No		No	No
49427	INJECT EVALUATE PREVIOUS PERITONEAL-VENOUS SHUNT		No	No	Not Cov	No		No	No
49428	LIGATION PERITONEAL-VENOUS SHUNT		Not Cov	No	Not Cov	No		No	No
49429	RMVL PERITONEAL-VENOUS SHUNT		No	No	No	No		No	No
49435	INSJ SUBQ EXTENSION INTRAPERITONEAL CATHETER		No	No	No	No		No	No
49436	DELAYED CREATION EXIT SITE EMBEDDED CATHETER		No	No	No	No		No	No
49440	INSERT GASTROSTOMY TUBE PERCUTANEOUS		No	No	No	No		No	No
49441	INSERT DUODENOSTOMY JEJUNOSTOMY TUBE PERQ		No	No	No	No		No	No
49442	INSERT CECOSTOMY OTHER COLONIC TUBE PERCUTANEOUS		No	No	No	No		No	No
49446	CONVERT GASTROSTOMY-GASTRO-JEJUNOSTOMY TUBE PERQ		No	No	No	No		No	No
49450	REPLACE GASTROSTOMY CECOSTOMY TUBE PERCUTANEOUS		No	No	No	No		No	No
49451	REPLACE DUODENOSTOMY JEJUNOSTOMY TUBE PERQ		No	No	No	No		No	No
49452	REPLACEMENT GASTRO-JEJUNOSTOMY TUBE PERCUTANEOUS		No	No	No	No		No	No
49460	OBSTRUCTIVE MATERIAL REMOVAL FROM GI TUBE		No	No	No	No		No	No
49465	CONTRAST INJECTION PERQ RADIOLOGIC EVAL GI TUBE		No	No	No	No		No	No
49491	RPR 1ST INGUN HRNA PRETERM INFT RDC		No	No	Not Cov	No		No	No
49492	RPR 1ST INGUN HRNA PRETERM INFT INCARCERATED		No	No	Not Cov	No		No	No
49495	RPR 1ST INGUN HRNA FULL TERM INFT UNDER 6 MO RDC		No	No	No	No		No	No
49496	RPR 1ST INGUN HRNA FULL TERM INFT UNDER 6 MO INCARCER		No	No	No	No		No	No
49500	RPR 1ST INGUN HRNA AGE 6 MO-5 YRS REDUCIBLE		No	No	No	No		No	No
49501	RPR 1ST INGUN HRNA AGE 6 MO-5 YRS INCARCERATED		No	No	No	No		No	No
49505	RPR 1ST INGUN HRNA AGE 5 YRS OR GRT REDUCIBLE		No	No	No	No		No	No
49507	RPR 1ST INGUN HRNA AGE 5 YRS OR GRT INCARCERATED		No	No	No	No		No	No
49520	RPR RECRT INGUINAL HERNIA ANY AGE REDUCIBLE		No	No	No	No		No	No
49521	RPR RECRT INGUN HERNIA ANY AGE INCARCERATED		No	No	No	No		No	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
49525	RPR INGUN HERNIA SLIDING ANY AGE		No	No	No	No	No	No	
49540	REPAIR LUMBAR HERNIA		No	No	No	No	No	No	
49550	RPR 1ST FEM HRNA ANY AGE REDUCIBLE		No	No	No	No	No	No	
49553	RPR 1ST FEM HERNIA ANY AGE INCARCERATED		No	No	No	No	No	No	
49555	RPR RECRT FEM HERNIA REDUCIBLE		No	No	No	No	No	No	
49557	RPR RECRT FEM HRNA INCARCERATED		No	No	No	No	No	No	
49560	REPAIR FIRST ABDOMINAL WALL HERNIA		No	No	No	No	No	No	
49561	RPR 1ST INCAL VNT HERNIA INCARCERATED		No	No	No	No	No	No	
49565	RPR RECRT INCAL VNT HERNIA REDUCIBLE		No	No	No	No	No	No	
49566	RPR RECRT INCAL VNT HERNIA INCARCERATED		No	No	No	No	No	No	
49568	IMPLANT MESH OPN HERNIA RPR DEBRIDEMENT CLOSURE		No	No	No	No	No	No	
49570	RPR EPIGASTRIC HERNIA REDUCIBLE SPX		No	No	No	No	No	No	
49572	RPR EPIGASTRIC HERNIA INCARCERATED		No	No	No	No	No	No	
49580	RPR UMBILICAL HERNIA UNDER 5 YRS REDUCIBLE		No	No	No	No	No	No	
49582	RPR UMBILICAL HERNIA UNDER 5 YRS INCARCERATED		No	No	No	No	No	No	
49585	RPR UMBILICAL HRNA 5 YRS OR GRT REDUCIBLE		No	No	No	No	No	No	
49587	RPR UMBILICAL HERNIA AGE 5 YRS OR GRT INCARCERATED		No	No	No	No	No	No	
49590	RPR SPIGELIAN HERNIA		No	No	No	No	No	No	
49600	RPR SMALL OMPHALOCELE W PRIMARY CLOSURE		No	No	No	No	No	No	
49605	RPR LG OMPHALOCELE GASTROSCHISIS W WO PROSTH		Not Cov	No	Not Cov	No	No	No	
49606	RPR LG OMPHALOCELE GASTROSCHISIS RMVL PROSTH		No	No	Not Cov	No	No	No	
49610	RPR OMPHALOCELE GROSS TYP OPRATION 1ST STG		No	No	Not Cov	No	No	No	
49611	RPR OMPHALOCELE GROSS TYP OPRATION 2ND STG		Not Cov	No	Not Cov	No	No	No	
49650	LAPAROSCOPY SURG RPR INITIAL INGUINAL HERNIA		No	No	No	No	No	No	
49651	LAPS SURG RPR RECURRENT INGUINAL HERNIA		No	No	No	No	No	No	
49652	LAPS REPAIR HERNIA EXCEPT INCAL INGUN REDUCIBLE		No	No	No	No	No	No	
49653	LAP RPR HRNA XCPT INCAL INGUN NCRC8 STRANGULATED		No	No	No	No	No	No	
49654	LAPAROSCOPY REPAIR INCISIONAL HERNIA REDUCIBLE		No	No	No	No	No	No	
49655	LAPS RPR INCISIONAL HERNIA NCRC8 STRANGULATED		No	No	No	No	No	No	
49656	LAPS RPR RECURRENT INCISIONAL HERNIA REDUCIBLE		No	No	No	No	No	No	
49657	LAPS RPR RECURRENT INCAL HRNA NCRC8 STRANGULATED		No	No	No	No	No	No	
49659	UNLIS LAPS PX HRNAP HERNIORRHAPHY HERNIOTOMY		Yes	Yes	Not Cov	Yes	Yes	Yes	
49900	SEC ABDOMINAL WALL SUTURE EVISCERATION DEHSN		No	No	Not Cov	No	No	No	
49904	OMENTAL FLAP EXTRA-ABDOMINAL		Yes	Yes	Not Cov	No	Yes	Yes	
49905	OMENTAL FLAP INTRA-ABDOMINAL		Not Cov	Yes	Not Cov	No	Yes	Yes	
49906	FREE OMENTAL FLAP W MICROVASCULAR ANAST		Yes	Yes	Not Cov	No	Yes	Yes	
49999	UNLISTED PROCEDURE ABDOMEN PERITONEUM AND OMENTUM		Yes	Yes	Not Cov	Yes	Yes	Yes	
50010	RNL EXPL X NECESSITATING OTH SPEC PX		Not Cov	No	Not Cov	No	No	No	
50020	DRAINAGE PERIRENAL RENAL ABSCESS OPEN		No	No	Not Cov	No	No	No	
50040	NEPHROSTOMY NEPHROTOMY W DRAINAGE		Not Cov	No	Not Cov	No	No	No	
50045	NEPHROTOMY W EXPLORATION		Not Cov	No	Not Cov	No	No	No	
50060	NEPHROLITHOTOMY REMOVAL STAGE 1		Not Cov	No	Not Cov	No	No	No	

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
50065	NEPHROLITHOTOMY SECONDARY FOR CALCULUS		Not Cov	No	Not Cov	No		No	No
50070	NEPHROLITHOTOMY COMP CGEN KDN ABNORMALITY		Not Cov	No	Not Cov	No		No	No
50075	NEPHROLITHOTOMY RMVL LG STAGHORN STAGE 1		Not Cov	No	Not Cov	No		No	No
50080	PRQ NEPHROSTOLITHOTOMY PYELOSTOLITHOTOMY UNDER 2 CM		No	No	No	No		No	No
50081	PRQ NEPHROSTOLITHOTOMY PYELOSTOLITHOTOMY OVER 2 CM		No	No	No	No		No	No
50100	TRNSXJ REPOSITIONING ABERRANT RENAL VESSEL SPX		Not Cov	No	Not Cov	No		No	No
50120	PYELOTOMY W EXPLORATION		Not Cov	No	Not Cov	No		No	No
50125	PYELOTOMY W DRAINAGE PYELOTOMY		Not Cov	No	Not Cov	No		No	No
50130	PYELOTOMY W REMOVAL CALCULUS		Not Cov	No	Not Cov	No		No	No
50135	PYELOTOMY COMPLICATED		Not Cov	No	Not Cov	No		No	No
50200	RENAL BIOPSY PRQ TROCER NEEDLE		No	No	No	No		No	No
50205	RENAL BIOPSY SURG EXPOSURE KIDNEY		Not Cov	No	Not Cov	No		No	No
50220	NEPHRECTOMY W PRTL URETERECTOMY W OPEN RIB RESCJ		Not Cov	No	Not Cov	No		No	No
50225	NEPHRECTOMY W PRTL URETERECT OPN RIB RESCJ COMPL		Not Cov	No	Not Cov	No		No	No
50230	NEPHRECTOMY W PRTL URETERECT OPEN RIB RESCJ RAD		No	No	Not Cov	No		No	No
50234	NEPHRECTOMY W TOT URETERECT AND BLDR CUFF SAME INC		Not Cov	No	Not Cov	No		No	No
50236	NEPHRECTOMY TOT URETEREC AND BLDR CUFF SEPAR INCISN		Not Cov	No	Not Cov	No		No	No
50240	NEPHRECTOMY PARTIAL		Not Cov	No	Not Cov	No		No	No
50250	OPEN ABLATION RENAL MASS CRYOSURG ULTRASOUND		Not Cov	Not Cov	Not Cov	Not Cov		No	No
50280	EXCISION UNROOFING CYST KIDNEY		Not Cov	No	Not Cov	No		No	No
50290	EXCISION PERINEPHRIC CYST		Not Cov	No	Not Cov	No		No	No
50300	DONOR NEPHRECTOMY CADAVER DONOR UNI BILATERAL		Not Cov	Yes	Not Cov	Yes		Yes	Yes
50320	DONOR NEPHRECTOMY OPEN LIVING DONOR		Not Cov	Yes	Not Cov	Yes		Yes	Yes
50323	BKBENCH PREPJ CADAVER DONOR RENAL ALLOGRAFT		Not Cov	Yes	Not Cov	Yes		Yes	Yes
50325	BKBENCH PREPJ LIVING RENAL DONOR ALLOGRAFT		Not Cov	Yes	Not Cov	Yes		Yes	Yes
50327	BKBENCH RCNSTJ RENAL ALGRFT VENOUS ANAST EA		Not Cov	Yes	Not Cov	Yes		Yes	Yes
50328	BKBENCH RCNSTJ RENAL ALLOGRAFT ARTERIAL ANAST EA		Not Cov	Yes	Not Cov	Yes		Yes	Yes
50329	BKBENCH RCNSTJ ALGRFT URETERAL ANAST EA		Not Cov	Yes	Not Cov	Yes		Yes	Yes
50340	RECIPIENT NEPHRECTOMY SEPARATE PROCEDURE		Not Cov	Yes	Not Cov	Yes		Yes	Yes
50360	RENAL ALTRNSPLJ IMPLTJ GRF W O RCP NEPHRECTOMY		Not Cov	Yes	Not Cov	Yes		Yes	Yes
50365	RENAL ALTRNSPLJ IMPLTJ GRF W RCP NEPHRECTOMY		Not Cov	Yes	Not Cov	Yes		Yes	Yes
50370	RMVL TRNSPLED RENAL ALLOGRAFT		Not Cov	Yes	Not Cov	Yes		Yes	Yes
50380	RENAL AUTOTRNSPLJ REIMPLANTATION KIDNEY		Not Cov	Yes	Not Cov	Yes		Yes	Yes
50382	RMVL AND RPLCMT INTLY DWELLING URETERAL STENT PRQ		No	No	No	No		No	No
50384	REMOVAL INDWELLING URETERAL STENT PRQ		No	No	No	No		No	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
50385	REMOVE AND REPLACE INDWELL URETERAL STENT TRURTHRL		No	No	No	No		No	No
50386	REMOVE INT DWELL URETERAL STENT TRANSURETHRAL		No	No	Not Cov	No		No	No
50387	RMVL AND RPLCMT XTRNL ACCESSIBLE NEPHROURTRL CATH		No	No	No	No		No	No
50389	RMVL NFROS TUBE REQ FLUORO GUIDANCE		No	No	No	No		No	No
50390	ASPIR AND NJX RENAL CYST PELVIS NEEDLE PRQ		No	No	No	No		No	No
50391	INSTLJ THER AGENT RENAL PELVIS AND URETER VIA TUB		No	No	Not Cov	No		No	No
50396	MANOMETRIC STDS THRU TUBE NDWELLG URTRL CATH		No	No	No	No		No	No
50400	PYELOPLASTY SIMPLE		Not Cov	No	Not Cov	No		No	No
50405	PYELOPLASTY COMPLICATED		Not Cov	No	Not Cov	No		No	No
50430	NJX PX ANTEGRDE NFROSGRM AND URTRGRM NEW ACCESS		No	No	Not Cov	No		No	No
50431	NJX PX ANTEGRDE NFROSGRM AND URTRGRM EXSTNG ACES		No	No	Not Cov	No		No	No
50432	PLMT NEPHROSTOMY CATH PRQ NEW ACCESS RS AND I		No	No	No	No		No	No
50433	PLMT NEPHROURETERAL CATH PRQ NEW ACCESS RS AND I		No	No	No	No		No	No
50434	CONVERT NEPHROSTOMY CATH TO NEPHROURTRL CATH PRQ EXCHANGE NEPHROSTOMY CATHETER PRQ W IMG GID RS AND I		No	No	No	No		No	No
50435	PERQ DILATION XST TRC ENDOUROLOGIC PX W IMG		No	No	Not Cov	No		No	No
50436	PERQ DILATION XST TRC NEW ACCESS RENAL COLTJ SYS		No	No	Not Cov	No		No	No
50437	NEPHRORRHAPHY SUTURE KIDNEY WOUND INJURY		Not Cov	No	Not Cov	No		No	No
50500									
50520	CLOSURE NEPHROCUTANEOUS PYELOUTANEOUS FISTULA		Not Cov	No	Not Cov	No		No	No
50525	CLSR NEPHROVISCERAL FISTULA W VISC RPR ABDL APPR		Not Cov	No	Not Cov	No		No	No
50526	CLSR NEPHROVISCERAL FISTULA W VISC RPR THRC APPR		Not Cov	No	Not Cov	No		No	No
50540	SYMPHYSIOTOMY HORSESHOE KDN W WO PLOP UNI BI		Not Cov	No	Not Cov	No		No	No
50541	LAPAROSCOPY SURG ABLATION RENAL CYSTS		No	No	Not Cov	No		No	No
50542	LAPS ABLTJ RENAL MASS LESION W INTRAOP US		No	No	Not Cov	No		No	No
50543	LAPAROSCOPY SURG PARTIAL NEPHRECTOMY		No	No	Not Cov	No		No	No
50544	LAPAROSCOPY SURG PYELOPLASTY		No	No	Not Cov	No		No	No
50545	LAPAROSCOPY RADICAL NEPHRECTOMY		Not Cov	No	Not Cov	No		No	No
50546	LAPAROSCOPY NEPHRECTOMY W PARTIAL URETERECT		Not Cov	No	Not Cov	No		No	No
50547	LAPAROSCOPY DONOR NEPHRECTOMY LIVING DONOR		Not Cov	No	Not Cov	No		No	No
50548	LAPAROSCOPY NEPHRECTOMY W TOTAL URETERECTOMY		Not Cov	No	Not Cov	No		No	No
50549	UNLISTED LAPAROSCOPY PROCEDURE RENAL		Yes	Yes	Not Cov	Yes		Yes	Yes

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50551	RENAL ENDOSCOPY NEPHROSTOMY W WO IRRIGATION		No	No	No	No		No	No
50553	RENAL NDSC NEPHROST W URETERAL CATH W WO DILA		No	No	No	No		No	No
50555	RENAL NDSC NEPHROS PYELOSTOMY BIOPSY		No	No	No	No		No	No
50557	RENAL NDSC NEPHROS PYELOSTOMY FULG AND INC W WO BI		No	No	No	No		No	No
50561	RENAL NDSC NEPHROS PYELOSTOMY RMVL FB CALCULUS		No	No	No	No		No	No
50562	RENAL NDSC NEPHROS PYELOSTOMY RESCJ TUMOR		No	No	No	No		No	No
50570	RENAL NDSC NEPHROTOMY W WO IRRIGATION		No	No	No	No		No	No
50572	RNL NDSC NFROT W URTRL CATHJ W WO DILAT URETER		No	No	No	No		No	No
50574	RENAL NDSC NEPHROTOMY W BIOPSY		No	No	No	No		No	No
50575	RNL NDSC NFROT PLOT W ENDOPYELOTOMY		No	No	No	No		No	No
50576	RNL NDSC NFROT FULGURATION AND INCISION W WO BX		No	No	No	No		No	No
50580	RNL NDSC NFROT PLOT W RMVL FB CALCULUS		No	No	No	No		No	No
50590	LITHOTRIPSY XTRCORP SHOCK WAVE		Yes	Yes	Yes	No		Yes	Yes
50592	ABLTIJ 1 OR GRT RENAL TUMOR PRQ UNI RADIOFREQUENCY		No	No	No	No		No	No
50593	ABLATION RENAL TUMOR UNILATERAL PERQ CRYOTHERAPY		No	No	Not Cov	No		No	No
50600	URTROSTOMY W EXPL DRG SEPARATE PROCEDURE		Not Cov	No	Not Cov	No		No	No
50605	URETEROTOMY INSERTION INDWELLING STENT ALL TYPES		Not Cov	No	Not Cov	No		No	No
50606	ENDOLUMINAL BX URTR AND RNL PELVIS NONENDOSCOPIC		No	No	Not Cov	No		No	No
50610	URTROLITHOTOMY UPPER ONE-THIRD URETER		Not Cov	No	Not Cov	No		No	No
50620	URTROLITHOTOMY MIDDLE ONE-THIRD URETER		Not Cov	No	Not Cov	No		No	No
50630	URTROLITHOTOMY LOWER ONE-THIRD URETER		Not Cov	No	Not Cov	No		No	No
50650	URETRECTOMY W BLADDER CUFF SEPARATE PROCEDURE		Not Cov	No	Not Cov	No		No	No
50660	URETRECTOMY TOT ECTOPIC URETER CMBN APPR		Not Cov	No	Not Cov	No		No	No
50684	INJ PX URETEROGRAPHY URETEROPYLOGRAPHY CATH		No	No	Not Cov	No		No	No
50686	MANOMETRIC STDS THRU URTROST NDWELLG URTRL CATH		No	No	Not Cov	No		No	No
50688	CHNG URTROST TUBE XTRNLLY ACCESSIBLE STENT ILEAL		No	No	No	No		No	No
50690	NJX VISUALIZATION ILEAL CONDUIT AND URETEROPYELOG		No	No	Not Cov	No		No	No
50693	PLMT URTRL STENT PRQ PRE-EXISTING NFROS TRACT		No	No	No	No		No	No
50694	PLMT URTRL STNT PRQ NEW ACESS W O SEP NFROS CATH		No	No	No	No		No	No
50695	PLMT URTRL STENT PRQ NEW ACCESS W SEP NFROS CATH		No	No	No	No		No	No
50700	URETEROPLASTY PLASTIC OPERATION URETER		Not Cov	No	Not Cov	No		No	No

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50705	URETERAL EMBOLIZATION OCCLUSION W IMG GID RS AND I		No	No	Not Cov	No		No	No
50706	BALLOON DILAT URETERAL STRICTURE W IMG GID RS AND I		No	No	Not Cov	No		No	No
50715	URETEROLYSIS W WORPSG URETER RETROPERIT FIBROSIS		Not Cov	No	Not Cov	No		No	No
50722	URETEROLYSIS FOR OVARIAN VEIN SYNDROME		Not Cov	No	Not Cov	No		No	No
50725	URTROLSS RETROCAVAL URTR W REANAST		Not Cov	No	Not Cov	No		No	No
50727	REVJ URINARY-CUTANEOUS ANASTAMOSIS		No	No	No	No		No	No
50728	REVJ UR-CUTAN ANAST RPR FSCAL DFCT AND HERNIA		No	No	Not Cov	No		No	No
50740	EXC URACHAL CYST SINUS W WO UMBILICAL HERNIA RPR		Not Cov	No	Not Cov	No		No	No
50750	URETEROCALYCOSTOMY ANAST URETER RENAL CALYX		Not Cov	No	Not Cov	No		No	No
50760	URETEROURETEROSTOMY		Not Cov	No	Not Cov	No		No	No
50770	TRANSURETEROURETEROSTOMY ANAST URETER CLAT URTR		Not Cov	No	Not Cov	No		No	No
50780	URETERONEOCYSTOSTOMY ANAST 1 URETER BLADDER		Not Cov	No	Not Cov	No		No	No
50782	URETERONEOCYSTOSTOMY ANAST DUPLICATE URETER BLDR		Not Cov	No	Not Cov	No		No	No
50783	URETERONEOCYSTOSTOMY W URETERAL TAILORING		Not Cov	No	Not Cov	No		No	No
50785	URTRONEOCSTOST W VESICO-PSOAS HITCH BLDR FLAP		Not Cov	No	Not Cov	No		No	No
50800	URETEROENTEROSTOMY ANAST URETER INTESTINE		Not Cov	No	Not Cov	No		No	No
50810	URETEROSIGMOIDOSTOMY W SIGMOID BLADDER AND COLOSTO		Not Cov	No	Not Cov	No		No	No
50815	URETEROCOLON CONDUIT INTESTINE ANASTOMOSIS		Not Cov	No	Not Cov	No		No	No
50820	URETEROILEAL CONDUIT W INTESTINE ANASTOMOSIS		Not Cov	No	Not Cov	No		No	No
50825	CONTINENT DVRJ W INT ANAST ANY SGM SM AND LG INTSTN		Not Cov	No	Not Cov	No		No	No
50830	URINARY UNIDIVERSION		Not Cov	No	Not Cov	No		No	No
50840	RPLCMT ALL PART URETER INTESTINE SGM W ANAST		Not Cov	No	Not Cov	No		No	No
50845	CUTANANEOUS APPENDICO-VESICOSTOMY		No	No	Not Cov	No		No	No
50860	URETEROSTOMY TRANSPLANTATION URETER SKIN		Not Cov	No	Not Cov	No		No	No
50900	URETERORRHAPHY SUTURE URETER SEPARATE PROCEDURE		Not Cov	No	Not Cov	No		No	No
50920	CLOSURE URETEROCUTANEOUS FISTULA		Not Cov	No	Not Cov	No		No	No
50930	CLOSURE URETEROCUTANEOUS FISTULA W VISC RPR		Not Cov	No	Not Cov	No		No	No
50940	DELIGATION URETER		Not Cov	No	Not Cov	No		No	No
50945	LAPAROSCOPY URTROLITHOTOMY		No	No	Not Cov	No		No	No
50947	LAPS URTRONEOCSTOST W CSTSC AND URTRL STENT PLMT		No	No	No	No		No	No
50948	LAPS URTRONEOCSTOST W O CSTSC AND URTRL STENT PLMT		No	No	No	No		No	No
50949	UNLISTED LAPAROSCOPY PROCEDURE URETER		Yes	Yes	Not Cov	Yes		Yes	Yes
50951	URETERAL ENDOSCOPY VIA URETEROSTOMY		No	No	No	No		No	No
50953	URETERAL ENDOSCOPY VIA URETEROST W WO DIL URETER		No	No	No	No		No	No
50955	URETERAL ENDOSCOPY VIA URETEROSTOMY W BIOPSY		No	No	No	No		No	No

Guide is subject to change at any time. If a member belongs to a group delegated for UM, contact that group for authorization. Claim payment is subject to eligibility and benefits at the time of service. Claim processing edits will apply.

This prior authorization guide applies to Medicaid, Medicare, and Marketplace.

DOS Effective 10/1/19; Posted 10/30/19

All Inpatient services require prior authorization

***All Medicaid services subject to the limitations in the provider billing guides and fee schedules at <https://www.hca.wa.gov/billers-providers/claims-and-billing/professional-rates-and-billing-guides> ***

*** All Medicare services subject to the limitations in the CMS billing guide and fee schedules at <https://www.cms.gov/> ***

Code	Code Description	Comments	Apple Health & IMC Medical				IMC / BHSO (Mental Health covered svcs)	Medicare	Market Place
			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
50957	URETERAL ENDOSCOPY W DEST AND INC W WO BIOPSY		No	No	No	No		No	No
50961	URETERAL ENDOSCOPY VIA URETEROST W RMVL FB STONE		No	No	No	No		No	No
50970	URETERAL ENDOSCOPY VIA URETEROTOMY W O IMAGING		No	No	No	No		No	No
50972	NDSC URETEROTOMY URTRL CATHJ W WO DILAT URETER		No	No	No	No		No	No
50974	URETERAL ENDOSCOPY VIA URETEROT W O IMAGING W BX		No	No	No	No		No	No
50976	URETERAL ENDOSC VIA URETEROT W DEST AND INC W WO BX		No	No	No	No		No	No
50980	NDSC URETEROTOMY RMVL FB CALCULUS		No	No	No	No		No	No
51020	CYSTOTOMY CYSTOSTOMY FULG AND INSJ RADACT MATRL		No	No	No	No		No	No
51030	CSTOTOMY CSTOST CRYOSURG DSTRJ INTRAVESICAL LES		No	No	No	No		No	No
51040	CYSTOSTOMY CYSTOTOMY W DRAINAGE		No	No	No	No		No	No
51045	CYSTOTOMY W INSJ URETERAL CATH STENT SPX		No	No	No	No		No	No
51050	CYSTOLITHOTOMY CYSTOTOMY W RMVL CALCULUS		No	No	No	No		No	No
51060	TRANSVESICAL URETROLITHOTOMY		No	No	Not Cov	No		No	No
51065	CYSTOTOMY W CALCULUS BASKET XTRJ AND FRAGMENTATIO		No	No	No	No		No	No
51080	DRG PRIVESICAL PREVESICAL SPACE ABSC		No	No	No	No		No	No
51100	ASPIRATION BLADDER NEEDLE		No	No	Not Cov	No		No	No
51101	ASPIRATION BLADDER TROCAR INTRACATHETER		No	No	Not Cov	No		No	No
51102	ASPIRATION BLADDER INSERT SUPRAPUBIC CATHETER		No	No	No	No		No	No
51500	EXC URACHAL CYST SINUS W WO UMBILICAL HERNIA RPR		No	No	No	No		No	No
51520	CYSTOTOMY SIMPLE EXCISION VESICAL NECK		No	No	No	No		No	No
51525	CYSTOTOMY EXCISE BLADDER DIVERTICULUM 1 MULTIPLE		Not Cov	No	Not Cov	No		No	No
51530	CYSTOTOMY EXCISION BLADDER TUMOR		Not Cov	No	Not Cov	No		No	No
51535	CYSTOTOMY EXCISE INCISE REPAIR URETEROCELE		No	No	No	No		No	No
51550	CYSTEATOMY PARTIAL SIMPLE		Not Cov	No	Not Cov	No		No	No
51555	CYSTEATOMY PARTIAL COMPLICATED		Not Cov	No	Not Cov	No		No	No
51565	CSTC PRTL W RIMPLTJ URTR IN BLDR URTRONEOCSTOST		Not Cov	No	Not Cov	No		No	No
51570	CYSTEATOMY COMPLETE SEPARATE PROCEDURE		Not Cov	No	Not Cov	No		No	No
51575	CYSTEATOMY W BI PELVIC LYMPHADENECTOMY		Not Cov	No	Not Cov	No		No	No
51580	CYSTEATOMY W URETEROSIGMOIDOSTOMY W NODES		Not Cov	No	Not Cov	No		No	No
51585	CYSTEATOMY W URETEROSIGMOID BI PELV LYMPH NODES		Not Cov	No	Not Cov	No		No	No
51590	CSTC COMPL W URTROILEAL CONDUIT BLDR W INT ANAST		Not Cov	No	Not Cov	No		No	No
51595	CSTC COMPL W CONDUIT SIGMOID BLDR PEL LMPHADEC		Not Cov	No	Not Cov	No		No	No

This prior authorization guide applies to Medicaid, Medicare, and Marketplace.

DOS Effective 10/1/19; Posted 10/30/19

All Inpatient services require prior authorization

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*** All Medicare services subject to the limitations in the CMS billing guide and fee schedules at <https://www.cms.gov/> ***

Code	Code Description	Comments	Apple Health & IMC Medical				IMC / BHSO (Mental Health covered svcs)	Medicare	Market Place
			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
51596	CSTC COMPL W CONTINENT DVRJ OPN NEOBLDR		Not Cov	No	Not Cov	No		No	No
51597	PELVIC EXENTERATION COMPLETE MALIGNANCY		Not Cov	No	Not Cov	No		No	No
51600	NJX CSTOGRAPY VOIDING URETHROCSTOGRAPY		No	No	Not Cov	No		No	No
51605	NJX AND PLACEMENT CHAIN CONTRAST AND URETHROCSTOGRAPY		No	No	Not Cov	No		No	No
51610	NJX RETROGRADE URETHROCSTOGRAPY		No	No	Not Cov	No		No	No
51700	BLDR IRRIGATION SMPL LAVAGE AND INSTLJ		No	No	Not Cov	No		No	No
51701	INSJ NON-NDWELLG BLADDER CATHETER		No	No	Not Cov	No		No	No
51702	INSJ TEMP NDWELLG BLADDER CATHETER SIMPLE		No	No	Not Cov	No		No	No
51703	INSJ TEMP NDWELLG BLADDER CATHETER COMPLICATED		No	No	Not Cov	No		No	No
51705	CHANGE CYSTOSTOMY TUBE SIMPLE		No	No	Not Cov	No		No	No
51710	CHANGE CYSTOSTOMY TUBE COMPLICATED		No	No	No	No		No	No
51715	NDSC NJX IMPLT MATRL URT AND BLDR NCK		No	No	No	No		No	No
51720	BLADDER INSTILLATION ANTICARCINOGENIC AGENT		No	No	Not Cov	No		No	No
51725	SIMPLE CYSTOMETROGRAM		No	No	Not Cov	No		No	No
51726	BLADDER PRESSURE MEASUREMENT DURING FILLING		No	No	No	No		No	No
51727	COMPLEX CYSTOMETROGRAM URETHRAL PRESS PROFILE		No	No	Not Cov	No		No	No
51728	COMPLEX CYSTOMETROGRAM VOIDING PRESSURE STUDIES		No	No	Not Cov	No		No	No
51729	COMPLX CYSTOMETRO W VOID PRESS AND URETHRAL PROFIL		No	No	Not Cov	No		No	No
51736	SIMPLE UROFLOMETRY		No	No	Not Cov	No		No	No
51741	COMPLEX UROFLOMETRY		No	No	Not Cov	No		No	No
51784	EMG STDS ANAL URTL SPHNCTR OTH THN NDL		No	No	Not Cov	No		No	No
51785	NDL EMG STDS EMG ANAL URTL SPHNCTR ANY TQ		No	No	No	No		No	No
51792	STIMULUS EVOKED RESPONSE		No	No	Not Cov	No		No	No
51797	VOID PRESSURE STUDIES INTRAABDOMINAL		No	No	Not Cov	No		No	No
51798	MEAS POST-VOIDING RESIDUAL URINE AND BLADDER CAP		No	No	Not Cov	No		No	No
51800	CSTOPLASTY CSTOURTP PLSTC ANY		Not Cov	No	Not Cov	No		No	No
51820	CSTOURTP W UNI BI URTRONEOCSTOST		Not Cov	No	Not Cov	No		No	No
51840	ANT VESICURETHROPEXY URETHROPEXY SMPL		No	No	Not Cov	No		No	No
51841	ANT VESICURETHROPEXY URETHROPEXY COMP		Not Cov	No	Not Cov	No		No	No
51845	ABDOMINO-VAG VESICAL NCK SSP W WO NDSC CTRL		No	No	Not Cov	No		No	No
51860	CYSTORRHAPHY SUTR BLDR WND INJ RPT SIMPLE		No	No	Not Cov	No		No	No
51865	CYSTORRHAPHY SUTR BLDR WND INJ RPT COMPLICATED		Not Cov	No	Not Cov	No		No	No
51880	CLOSURE CYSTOSTOMY SEPARATE PROCEDURE		No	No	No	No		No	No
51900	CLSR VESICOVAGINAL FISTUL AABDL APPROACH		Not Cov	No	Not Cov	No		No	No
51920	CLOSURE VESICOUTERINE FISTULA		Not Cov	No	Not Cov	No		No	No
51925	CLSR VESICOUTERINE FISTULA W HYSTERECTOMY		Not Cov	No	Not Cov	No		No	No
51940	CLOSURE EXSTROPHY BLADDER		Not Cov	No	Not Cov	No		No	No
51960	ENTEROCYSTOPLASTY W INTESTINAL ANASTOMOSIS		Not Cov	No	Not Cov	No		No	No
51980	CUTANEOUS VESICOSTOMY		Not Cov	No	Not Cov	No		No	No

This prior authorization guide applies to Medicaid, Medicare, and Marketplace.

DOS Effective 10/1/19; Posted 10/30/19

All Inpatient services require prior authorization

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Code	Code Description	Comments	Apple Health & IMC Medical				IMC / BHSO (Mental Health covered svcs)	Medicare	Market Place
			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
51990	LAPAROSCOPY URETHRAL SUSPENSION STRESS INCONT		No	No	Not Cov	No		No	No
51992	LAPAROSCOPY SLING OPERATION STRESS INCONT		No	No	No	No		No	No
51999	UNLISTED LAPAROSCOPY PROCEDURE BLADDER		Yes	Yes	Not Cov	Yes		Yes	Yes
52000	CYSTOURETHROSCOPY		No	No	No	No		No	No
52001	CYSTO W IRRIG AND EVAC MULTIPLE OBSTRUCTING CLOTS		No	No	No	No		No	No
52005	CYSTO BLADDER W URETERAL CATHETERIZATION		No	No	No	No		No	No
52007	CYSTO W URTRL CATHJ BRUSH BX URTR AND RENAL PELVIS		No	No	No	No		No	No
52010	CYSTO W EJACULATORY DUCT CATHETERIZATION		No	No	No	No		No	No
52204	CYSTOURETHROSCOPY WITH BIOPSY		No	No	No	No		No	No
52214	CYSTO W DESTRUCTION OF LESIONS		No	No	No	No		No	No
52224	CYSTO W REMOVAL OF LESIONS SMALL		No	No	No	No		No	No
52234	CYSTO W REMOVAL OF TUMORS SMALL		No	No	No	No		No	No
52235	CYSTOURETHROSCOPY W DEST AND RMVL MED BLADDER TUM		No	No	No	No		No	No
52240	CYSTOURETHROSCOPY W DEST AND RMVL TUMOR LARGE		No	No	No	No		No	No
52250	CYSTOURETHROSCOPY INSJ RADIOACT SBST W WOBX FULG		No	No	No	No		No	No
52260	CYSTOURETHROSCOPY W DIL BLADDER GENERAL ANESTH		No	No	No	No		No	No
52265	CYSTOURETHROSCOPY W DIL BLADDER LOCAL ANESTHESIA		No	No	Not Cov	No		No	No
52270	CYSTOURETHROSCOPY W INTERNAL URETHROTOMY FEMALE		No	No	No	No		No	No
52275	CYSTOURETHROSCOPY W INTERNAL URETHROTOMY MALE		No	No	No	No		No	No
52276	CYSTOURETHROSCOPY W INTERNAL URETHROTOMY MALE		No	No	No	No		No	No
52277	CYSTOURETHROSCOPY W RESEJ EXTERNAL SPHINCTER		No	No	No	No		No	No
52281	CYSTO CALIBRATION DILAT URTRL STRIX STENOSIS		No	No	No	No		No	No
52282	CYSTOURETHROSCOPY INSERTION PERM URETHRAL STENT		No	No	No	No		No	No
52283	CYSTOURETHROSCOPY W STEROID INJECTION STRICTURE		No	No	No	No		No	No
52285	CYSTOURETHROSCOPY TX FEMALE URETHRAL SYNDROME		No	No	No	No		No	No
52287	CYSTOURETHROSCOPY INJ CHEMODENERVATION BLADDER		No	No	No	No		No	No
52290	CYSTOURETHROSCOPY W URETERAL MEATOTOMY UNI BI		No	No	No	No		No	No
52300	CYSTO W RESCJ FULG ORTHOPIC URETEROCELE UNI BI		No	No	No	No		No	No
52301	CYSTO W RESEJ ECTOPIC URETEROCELE UNI BI		No	No	No	No		No	No
52305	CYSTO INC RESCJ ORIFICE BLDR DIVERTICULUM 1 MLT		No	No	No	No		No	No
52310	CYSTO W SIMPLE REMOVAL STONE AND STENT		No	No	No	No		No	No

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This prior authorization guide applies to Medicaid, Medicare, and Marketplace.

DOS Effective 10/1/19; Posted 10/30/19

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Code	Code Description	Comments	Apple Health & IMC Medical				IMC / BHSO (Mental Health covered svcs)	Medicare	Market Place
			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
52315	CYSTO W COMPLEX REMOVAL STONE AND STENT		No	No	No	No		No	No
52317	LITHOLAPAXY SMPL SM UNDER 2.5 CM		No	No	No	No		No	No
52318	LITHOLAPAXY COMP LG OVER 2.5 CM		No	No	No	No		No	No
52320	CYSTOURETHROSCOPY W RMVL URETERAL CALCULUS		No	No	No	No		No	No
52325	CYSTO FRAGMENTATION URETERAL STONE		No	No	No	No		No	No
52327	CYSTO W SUBURTRIC NJX IMPLT MATRL		No	No	No	No		No	No
52330	CYSTO MANJ W O RMVL URETERAL STONE		No	No	No	No		No	No
52332	CYSTO W INSERT URETERAL STENT		No	No	No	No		No	No
52334	CYSTO INSJ URTRL GD WIRE PRQ NFROS RTRGR		No	No	No	No		No	No
52341	CYSTO W TX URETERAL STRICTURE		No	No	No	No		No	No
52342	CYSTO W TX URETEROPELVIC JUNCTION STRICTURE		No	No	No	No		No	No
52343	CYSTO W TX INTRA-RENAL STRICTURE		No	No	No	No		No	No
52344	CYSTO W URTROSCOPY W TX URETERAL STRICTURE		No	No	No	No		No	No
52345	CYSTO W URTROSCOPY W TX URTROPEL JUNCT STRIX		No	No	No	No		No	No
52346	CYSTO W URTROSCOPY W TX INTRA-RENAL STRICTURE		No	No	No	No		No	No
52351	CYSTO W URTROSCOPY AND PYELOSOCOPY DX		No	No	No	No		No	No
52352	CYSTO W URETEROSCOPY W RMVL MANJ STONES		No	No	No	No		No	No
52353	CYSTO W URETEROSCOPY W LITHOTRIPSY		No	No	No	No		No	No
52354	CYSTO PYELOSOCOPY BX AND FULGURATION PELIVC LESION		No	No	No	No		No	No
52355	CYSTO PYELOSOCOPY RESCJ PELVIC TUMOR		No	No	No	No		No	No
52356	CYSTO URETERO W LITHOTRIPSY AND INDWELL STENT INSRT		No	No	No	No		No	No
52400	CYSTO INC FULG RESCJ URTRL VALVES FOLDS		No	No	No	No		No	No
52402	CSTO W TRURL RESCJ INC EJACULATORY DUXS		No	No	No	No		No	No
52441	CYSTO INSERTION TRANSPROSTATIC IMPLANT SINGLE		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
52442	CYSTO INSERTION TRANSPROSTATIC IMPLANT EA ADDL		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
52450	TRANSURETHRAL INCISION PROSTATE		No	No	No	No		No	No
52500	TRANSURETHRAL RESECTION BLADDER NECK		No	No	No	No		No	No
52601	TRURL ELECTROSURG RESCJ PROSTATE BLEED COMPLETE		No	No	No	No		No	No
52630	TRURL RESCJ RESIDUAL REGROWTH OBSTR PRSTATE TISS		No	No	No	No		No	No
52640	TRURL RESCJ POSTOP BLADDER NECK CONTRACTURE		No	No	No	No		No	No
52647	LASER COAGULATION OF PROSTATE FOR URINE FLOW		No	No	No	No		No	No
52648	LASER VAPORIZATION OF PROSTATE FOR URINE FLOW		No	No	No	No		No	No
52649	LASER ENUCLEATION PROSTATE W MORCELLATION		Yes	Yes	Yes	No		Yes	Yes
52700	TRURL DRAINAGE PROSTATIC ABSCESS		No	No	No	No		No	No
53000	URTT URTS XTRNL SPX PENDULOUS URETHRA		No	No	No	No		No	No
53010	URETHROTOMY URETHROSTOMY XT SPX PERINEAL URETHRA		No	No	No	No		No	No
53020	MEATOTOMY CUTTING MEATUS SPX EXCEPT INFANT		No	No	No	No		No	No
53025	MEATOTOMY CUTTING MEATUS SPX INFANT		No	No	Not Cov	No		No	No
53040	DRAINAGE DEEP PERIURETHRAL ABSCESS		No	No	No	No		No	No
53060	DRG OF SKENE'S GLAND ABSCESS OR CYST		No	No	Not Cov	No		No	No
53080	DRG PERINEAL URINARY XTRVASATION UNCOMP SPX		No	No	No	No		No	No

This prior authorization guide applies to Medicaid, Medicare, and Marketplace.

DOS Effective 10/1/19; Posted 10/30/19

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Code	Code Description	Comments	Apple Health & IMC Medical				IMC / BHSO (Mental Health covered svcs)	Medicare	Market Place
			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
53085	DRG PERINEAL URINARY XTRVASATION COMPLIC		No	No	No	No		No	No
53200	BIOPSY URETHRA		No	No	No	No		No	No
53210	URETHRECTOMY TOT W CYSTOST FEMALE		No	No	No	No		No	No
53215	URETHRECTOMY TOT W CYSTOST MALE		No	No	No	No		No	No
53220	EXC FULGURATION CARCINOMA URETHRA		No	No	No	No		No	No
53230	EXC URETHRAL DIVERTICULUM SPX FEMALE		No	No	No	No		No	No
53235	EXC URETHRAL DIVERTICULUM SPX MALE		No	No	No	No		No	No
53240	MARSUPIALIZATION URTL DIVERTICULUM MALE FEMALE		No	No	No	No		No	No
53250	EXCISION OF BULBOURETHRAL GLAND		No	No	No	No		No	No
53260	EXC FULGURATION URETHRAL POLYP DSTL URETHRA		No	No	No	No		No	No
53265	EXC FULGURATION URETHRAL CARUNCLE		No	No	No	No		No	No
53270	EXCISION OR FULGURATION SKENES GLANDS		No	No	No	No		No	No
53275	EXCISION FULGURATION URETHRAL PROLAPSE		No	No	No	No		No	No
53400	URETHROPLASTY 1ST STG FISTULA DIVERTICULUM STRIX		No	No	No	No		No	No
53405	URETHROPLASTY 2ND STAGE W URINARY DIVERSION		No	No	No	No		No	No
53410	URETHROPLASTY 1 STG RECNST MALE ANTERIOR URETHRA		No	No	No	No		No	No
53415	URTP TRANSPUBIC PRNL 1 STG RCNSTJ RPR URT		No	No	Not Cov	No		No	No
53420	URTP 2-STG RCNSTJ RPR PROSTAT URETHRA 1ST STAGE		No	No	No	No		No	No
53425	URTP 2-STG RCNSTJ RPR PROSTAT URETHRA 2ND STAGE		No	No	No	No		No	No
53430	URETHROPLASTY RCNSTJ FEMALE URETHRA		No	No	No	No		No	No
53431	URTP W TUBULARIZATION POST URT AND LWR BLDR		No	No	No	No		No	No
53440	SLING OPRATION CORRJ MALE URINARY INCONTINENCE		No	No	No	No		No	No
53442	RMVL REVJ SLING MALE URINARY INCONTINENCE		No	No	No	No		No	No
53444	INSERTION TANDEM CUFF		No	No	No	No		No	No
53445	INSJ INFLATABLE URETHRAL BLADDER NECK SPHINCTER		No	No	No	No		No	No
53446	REMV L INFLATABLE URETHRAL BLADDER NECK SPHINCTER		No	No	No	No		No	No
53447	RMVL AND RPLCMT NFLTL URETHRAL BLADDER NECK SPHINC		No	No	No	No		No	No
53448	RMVL AND RPLCMT NFLTBL NCK SPHNCTR THRU INFCT FLD		No	No	Not Cov	No		No	No
53449	RPR NFLTBL URETHRAL BLADDER NECK SPHINCTER		No	No	No	No		No	No
53450	URETHROMEATOPLASTY W MUCOSAL ADVANCEMENT		No	No	No	No		No	No
53460	URETHROMEATOPLASTY W PRTL EXC DSTL URTL SGM		No	No	No	No		No	No
53500	URETHROLSS TRVG SEC OPN W CSTO		No	No	Not Cov	No		No	No
53502	URETHRORRHAPHY SUTR URETHRAL WOUND INJ FEMALE		No	No	No	No		No	No
53505	URETHRORRHAPHY SUTR URETHRAL WOUND INJ PENILE		No	No	No	No		No	No

This prior authorization guide applies to Medicaid, Medicare, and Marketplace.

DOS Effective 10/1/19; Posted 10/30/19

All Inpatient services require prior authorization

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*** All Medicare services subject to the limitations in the CMS billing guide and fee schedules at <https://www.cms.gov/> ***

Code	Code Description	Comments	Apple Health & IMC Medical				IMC / BHSO (Mental Health covered svcs)	Medicare	Market Place
			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
53510	URETHRRRHAPHY SUTR URETHRAL WOUND INJ PERINEAL		No	No	No	No		No	No
53515	URTORR SUTR URETHRAL WND INJ PROSTATOMEMBRANOUS		No	No	No	No		No	No
53520	CLSR URETHROSTOMY URETHROQ FSTL MALE SPX		No	No	No	No		No	No
53600	DILAT URETHRAL STRIX DILATOR MALE 1ST		No	No	Not Cov	No		No	No
53601	DILAT URETHRAL STRIX DILATOR MALE SBSQ		No	No	Not Cov	No		No	No
53605	DILAT URETHRAL STRIX VESICAL NCK DILAT MALE ANES		No	No	No	No		No	No
53620	DILAT URETHRAL STRIX FILIFORM AND FOLLWR MALE 1ST		No	No	Not Cov	No		No	No
53621	DILAT URETHRAL STRIX FILIFORM AND FOLLWR MALE SBSQ		No	No	Not Cov	No		No	No
53660	DILAT FEMALE URETHRA W SUPPOSITORY AND INSTLJ INI		No	No	Not Cov	No		No	No
53661	DILAT FEMALE URT W SUPPOSITORY AND INSTLJ SBSQ		No	No	Not Cov	No		No	No
53665	DILAT FEMALE URETHRA GENERAL CNDJ SPINAL ANES		No	No	No	No		No	No
53850	TRURL DSTRJ PRSTATE TISS MICROWAVE THERMOTH		Yes	Yes	Not Cov	No		Yes	Yes
53852	TRURL DSTRJ PRSTATE TISS RF THERMOTH		Yes	Yes	Not Cov	No		Yes	Yes
53854	TRURL DSTRJ PRST8 TISS RF WV THERMOTHERAPY		Yes	Yes	Not Cov	No		Yes	Yes
53855	INSERT TEMP PROSTATIC URETH STENT W MEASUREMENT		No	No	Not Cov	No		No	No
53860	TRURL RF FEMALE BLADDER NECK STRS URIN INCONT		Not Cov	Not Cov	Not Cov	Not Cov		No	No
53899	UNLISTED PROCEDURE URINARY SYSTEM		Yes	Yes	Not Cov	Yes		Yes	Yes
54000	SLITTING PREPUCE DORSAL LATERAL SPX NEWBORN		No	No	No	No		No	No
54001	SLITTING PREPUCE DORSAL LAT SPX XCP NEWBORN		No	No	No	No		No	No
54015	I AND D PENIS DEEP		No	No	No	No		No	No
54050	DSTRJ LESION PENIS SIMPLE CHEMICAL		No	No	Not Cov	No		No	No
54055	DSTRJ LESION PENIS SIMPLE ELECTRODESICCATION		No	No	Not Cov	No		No	No
54056	DSTRJ LESION PENIS SIMPLE CRYOSURGERY		No	No	Not Cov	No		No	No
54057	DSTRJ LESION PENIS SIMPLE LASER		No	No	No	No		No	No
54060	DSTRJ LESION PENIS SIMPLE SURG EXCISION		No	No	No	No		No	No
54065	DSTRJ LESION PENIS EXTENSIVE		No	No	No	No		No	No
54100	BIOPSY PENIS SEPARATE PROCEDURE		No	No	No	No		No	No
54105	BIOPSY PENIS DEEP STRUCTURES		No	No	No	No		No	No
54110	EXCISION OF PENILE PLAQUE		No	No	No	No		No	No
54111	EXC PENILE PLAQUE GRAFT AND 5 CM LENGTH		No	No	No	No		No	No
54112	EXC PENILE PLAQUE GRAFT OVER 5 CM LENGTH		No	No	No	No		No	No
54115	REMOVAL FOREIGN BODY DEEP PENILE TISSUE		No	No	No	No		No	No
54120	AMPUTATION PENIS PARTIAL		No	No	No	No		No	No
54125	AMPUTATION PENIS COMPLETE		Not Cov	No	Not Cov	No		No	No
54130	AMPUTATION PENIS RADW BI INGUINOFEMORAL LMPHADE		Not Cov	No	Not Cov	No		No	No
54135	AMPUTATION PENIS RADICAL W LYMPH NODES		Not Cov	No	Not Cov	No		No	No
54150	CIRCUMCISION W CLAMP OTH DEV W BLOCK	Restricted to specific diagnoses	No	No	No	No		No	No
54160	CIRCUMCISION NEONATE	Restricted to specific diagnoses	No	No	No	No		No	No
54161	CIRCUMCISION AGE OVER 28 DAYS	Restricted to specific diagnoses	No	No	No	No		No	No

This prior authorization guide applies to Medicaid, Medicare, and Marketplace.

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Code	Code Description	Comments	Apple Health & IMC Medical				IMC / BHSO (Mental Health covered svcs)	Medicare	Market Place
			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
54162	LYSIS EXCISION PENILE POSTCIRCUMCISION ADHESIONS		No	No	No	No		No	No
54163	REPAIR INCOMPLETE CIRCUMCISION		No	No	No	No		No	No
54164	FRENULOTOMY PENIS		No	No	No	No		No	No
54200	INJECTION PEYRONIE DISEASE		No	No	Not Cov	No		No	No
54205	NJX PEYRONIE W SURG EXPOS PLAQUE		No	No	No	No		No	No
54220	IRRIGATION CORPORA CAVERNOSA PRIAPISM		No	No	No	No		No	No
54230	INJECTION CORPORA CAVERNOSOGRAPY		No	No	Not Cov	No		No	No
54231	DYNAMIC CAVERNOSOMETRY NJX VASOACTIVE DRUGS		No	No	Not Cov	No		No	No
54235	NJX C P A CAVERNOSA W PHARMACOLOGIC AGT		No	No	Not Cov	No		No	No
54240	PENILE PLETHYSMOGRAPHY		Not Cov	Not Cov	Not Cov	Not Cov		No	No
54250	NOCTURNAL PENILE TUMESCENCE AND RIGIDITY TEST		Not Cov	Not Cov	Not Cov	Not Cov		No	No
54300	PENIS STRAIGHTENING CHORDEE		No	No	No	No		No	No
54304	PENIS CORRJ CHORDEE 1ST STAGE HYPOSPADIAS RPR		No	No	No	No		No	No
54308	URETHROPLASTY 2ND STAGE HYPOSPADIAS RPR UNDER 3 CM		No	No	No	No		No	No
54312	URETHROPLASTY 2ND STAGE HYPOSPADIAS RPR OVER 3 CM		No	No	No	No		No	No
54316	URETHROPLASTY 2ND STAGE HYPOSPADIAS RPR SKIN GRF		No	No	No	No		No	No
54318	URETHROPLASTY 3RD STG HYPOSPADIAS RPR RLS PENIS		No	No	No	No		No	No
54322	1 STG DSTL HYPOSPADIAS RPR W SMPL MEATAL ADVMNT		No	No	No	No		No	No
54324	1 STG DSTL HYPOSPADIAS RPR W URTP SKIN FLAPS		No	No	No	No		No	No
54326	1 STG DSTL HYPOSPADIAS RPR URTP SKN FLAPS		No	No	No	No		No	No
54328	1 STAGE DSTL HYPOSPADIAS RPR W EXTENSIVE DSJ		No	No	No	No		No	No
54332	1 STAGE PROX PENILE PENOSCROTAL HYPOSPADIAS RPR		No	No	Not Cov	No		No	No
54336	1 STG PERINEAL HYPOSPADIAS RPR W GRF AND FLAP		No	No	Not Cov	No		No	No
54340	RPR HYPOSPADIAS COMPLCTJS CLSR INC EXC SIMPLE		No	No	No	No		No	No
54344	RPR HYPOSPADIAS COMPLCTJS MOBLJ FLAPS AND URTP		No	No	No	No		No	No
54348	RPR HYPOSPADIAS COMPLCTJS DSJ AND URTP FLAP GRF		No	No	No	No		No	No
54352	RPR HYPOSPADIAS CRIPPLE W DSJ AND EXC AND GRFS FLAP		No	No	No	No		No	No
54360	PLASTIC RPR PENIS CORRECT ANGULATION		No	No	No	No		No	No
54380	PLASTIC RPR PENIS EPISPADIAS DSTL SPHNCTR		No	No	No	No		No	No
54385	PLASTIC PENIS EPISPADIAS DSTL SPHNCTR W INCONT		No	No	No	No		No	No
54390	PLASTIC RPR PENIS EPISPADIAS W EXSTROPHY BLADDER		No	No	Not Cov	No		No	No
54400	INSJ PENILE PROSTHESIS NON-INFLATABLE SEMI-RIGID		Not Cov	Not Cov	Not Cov	Not Cov		No	No
54401	INSJ PENILE PROSTHESOS INFLATABLE SELF-CONTAINED		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes

Guide is subject to change at any time. If a member belongs to a group delegated for UM, contact that group for authorization. Claim payment is subject to eligibility and benefits at the time of service. Claim processing edits will apply.

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
54405	INSJ MULTI-COMPONENT INFLATABLE PENILE PROSTH		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
54406	RMVL INFLATABLE PENILE PROSTH W O RPLCMT PROSTH		No	No	No	No		No	No
54408	RPR COMPONENT INFLATABLE PENILE PROSTHESIS		Not Cov	Not Cov	Not Cov	Not Cov		No	No
54410	RMVL AND RPLCMT INFLATABLE PENILE PROSTH SAME SESS		Not Cov	Not Cov	Not Cov	Not Cov		No	No
54411	RMVL AND RPLCMT NFLTBL PENILE PROSTH INFECTED FIEL		Not Cov	Not Cov	Not Cov	Not Cov		No	No
54415	RMVL NON-NFLTBL NFLTBL PENILE PROSTH W O RPLCMT		No	No	No	No		No	No
54416	RMVL AND RPLCMT NON-NFLTBL NFLTBL PENILE PROSTHESI		No	No	No	No		No	No
54417	RMVL AND RPLCMT PENILE PROSTHESIS INFECTED FIELD		No	No	Not Cov	No		No	No
54420	CORPORA CAVERNOSA-SAPHENOUS VEIN SHUNT UNI BI		No	No	No	No		No	No
54430	CORPORA CAVERNOSA-CORPUS SPONGIOSUM SHUNT UNI BI		No	No	Not Cov	No		No	No
54435	CORPORA CAVERNOSA-GLANS PENIS FSTLJ PRIAPISM		No	No	No	No		No	No
54437	REPAIR OF TRAUMATIC CORPOREAL TEAR(S)		No	No	No	No		No	No
54438	REPLANTATION PENIS COMP AMPUTATION W URETH REP		No	No	Not Cov	No		No	No
54440	PLASTIC OPERATION PENIS INJURY		No	No	No	No		No	No
54450	FORESKN MANJ W LSS PREPUTIAL ADS AND STRETCHING		No	No	No	No		No	No
54500	BIOPSY TESTIS NEEDLE SEPARATE PROCEDURE		No	No	No	No		No	No
54505	BIOPSY TESTIS INCISIONAL SEPARATE PROCEDURE		No	No	No	No		No	No
54512	EXC XTRPARENCHYMAL LESION TESTIS		No	No	No	No		No	No
54520	ORCHIECTOMY SIMPLE SCROTAL INGUINAL APPROACH		No	No	No	No		No	No
54522	ORCHIECTOMY PARTIAL		No	No	No	No		No	No
54530	ORCHIECTOMY RADICAL TUMOR INGUINAL APPROACH		No	No	No	No		No	No
54535	ORCHIECTOMY RADICAL TUMOR W ABDOMINAL EXPL		No	No	Not Cov	No		No	No
54550	EXPL UNDESCENDED TSTIS INGUN SCROTAL AREA		No	No	No	No		No	No
54560	EXPL UNDESCENDED TESTIS W ABDOMINAL EXPL		No	No	No	No		No	No
54600	RDCTJ TORSION TSTIS W WO FIXJ CLAT TESTIS		No	No	No	No		No	No
54620	FIXATION CONTRALATERAL TESTIS SEPARATE PROCEDURE		No	No	No	No		No	No
54640	ORCHIOPEXY INGUINAL APPROACH W WO HERNIA RPR		No	No	No	No		No	No
54650	ORCHIOPEXY ABDL APPROACH INTRA-ABDOMINAL TESTIS		No	No	Not Cov	No		No	No
54660	INSJ TESTICULAR PROSTH SEPARATE PROCEDURE	Bill through DSHS	Not Cov	Not Cov	Not Cov	Not Cov	Not Cov	No	No
54670	SUTURE REPAIR TESTICULAR INJURY		No	No	No	No		No	No
54680	TRANSPLANTATION TESTIS TO THIGH		No	No	No	No		No	No
54690	LAPAROSCOPY SURGICAL ORCHIECTOMY		No	No	No	No		No	No
54692	LAPAROSCOPY ORCHIOPEXY INTRA-ABDOMINAL TESTIS		No	No	No	No		No	No
54699	UNLISTED LAPAROSCOPY PROCEDURE TESTIS		Yes	Yes	Not Cov	Yes		Yes	Yes
54700	I AND D EPIDIDYMIS TSTIS AND SCROTAL SPACE		No	No	No	No		No	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
54800	BIOPSY EPIDIDYMIS NEEDLE		No	No	No	No		No	No
54830	EXCISION LOCAL LESION EPIDIDYMIS		No	No	No	No		No	No
54840	EXCISION SPERMATOCELE W WO EPIDIDYMECTOMY		No	No	No	No		No	No
54860	EPIDIDYMECTOMY UNILATERAL		No	No	No	No		No	No
54861	EPIDIDYMECTOMY BILATERAL		No	No	No	No		No	No
54865	EXPLORATION EPIDIDYMIS W WO BIOPSY		No	No	No	No		No	No
54900	EPIDIDYMOVASOSTOMY ANAST EPIDIDYMIS UNI		No	No	No	No		No	No
54901	EPIDIDYMOVASOSTOMY ANAST EPIDIDYMIS BI		No	No	No	No		No	No
55000	PNXR ASPIR HYDROCELE TUNICA VAGIS W WO NJX MED		No	No	Not Cov	No		No	No
55040	EXCISION HYDROCELE UNILATERAL		No	No	No	No		No	No
55041	EXCISION HYDROCELE BILATERAL		No	No	No	No		No	No
55060	RPR TUNICA VAGINALIS HYDROCELE BOTTLE TYPE		No	No	No	No		No	No
55100	DRAINAGE SCROTAL WALL ABSCESS		No	No	No	No		No	No
55110	SCROTAL EXPLORATION		No	No	No	No		No	No
55120	REMOVAL FOREIGN BODY SCROTUM		No	No	No	No		No	No
55150	RESECTION SCROTUM		No	No	No	No		No	No
55175	SCROTOPLASTY SIMPLE		No	No	No	No		No	No
55180	SCROTOPLASTY COMPLICATED		No	No	No	No		No	No
55200	VASOTOMY CANNULIZATION W WO VAS INC UNI BI SPX		No	No	No	No		No	No
55250	VASECTOMY UNI BI SPX W POSTOP SEMEN EXAMS		No	No	No	No		No	No
55300	VASOTOMY VASOGRAMS UNI BI		No	No	Not Cov	No		No	No
55400	VASOVASOSTOMY VASOVASORRHAPHY		Not Cov	Not Cov	Not Cov	Not Cov		No	No
55500	EXC HYDROCELE SPRMATIC CORD UNI SPX		No	No	No	No		No	No
55520	EXC LESION SPERMATIC CORD SEPARATE PROCEDURE		No	No	No	No		No	No
55530	EXC VARICOCELE LIGATION SPERMATIC VEINS SPX		No	No	No	No		No	No
55535	EXC VARICOCELE LIGATION SPERMATIC VEINS ABDL		No	No	No	No		No	No
55540	EXC VARICOCELE LIGATION VEINS W HERNIA RPR		No	No	No	No		No	No
55550	LAPS LIGATION SPERMATIC VEINS VARICOCELE		No	No	No	No		No	No
55559	UNLISTED LAPROSCOPY PROCEDURE SPERMATIC CORD		Yes	Yes	Not Cov	Yes		Yes	Yes
55600	VESICULOTOMY		No	No	Not Cov	No		No	No
55605	VESICULOTOMY COMPLICATED		No	No	Not Cov	No		No	No
55650	VESICULECTOMY ANY APPROACH		No	No	Not Cov	No		No	No
55680	EXCISION MULLERIAN DUCT CYST		No	No	No	No		No	No
55700	PROSTATE NEEDLE BIOPSY ANY APPROACH		No	No	No	No		No	No
55705	BIOPSY PROSTATE INCISIONAL ANY APPROACH		No	No	No	No		No	No
55706	BX PROSTATE STRTCTC SATURATION SAMPLING IMG GID		No	No	No	No		No	No
55720	PROSTATOTOMY EXTERNAL DRG ABSCESS SIMPLE		No	No	No	No		No	No
55725	PROSTATOTOMY EXTERNAL DRG ABSCESS COMPLICATED		No	No	No	No		No	No
55801	PROSTATECTOMY PERINEAL SUBTOTAL		Not Cov	No	Not Cov	No		No	No
55810	PROSTATECTOMY PERINEAL RADICAL		Not Cov	No	Not Cov	No		No	No
55812	PROSTATECTOMY PERINEAL RADICAL W LYMPH NODE BX		Not Cov	No	Not Cov	No		No	No

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			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
55815	PROSTATECTOMY PERINEAL RAD W BI PELVIC LYMPH EXC		Not Cov	No	Not Cov	No		No	No
55821	PROSTATECTOMY SUPRAPUBIC SUBTOTAL 1 2 STAGES		Not Cov	No	Not Cov	No		No	No
55831	PROSTATECTOMY RETROPUBIC SUBTOTAL		Not Cov	No	Not Cov	No		No	No
55840	PROSTATECTOMY RETROPUBIC W WO NERVE SPARING		Not Cov	No	Not Cov	No		No	No
55842	PROSTECT RETROPUBIC RAD W WO NRV SPAR W LYMPH BX		No	No	Not Cov	No		No	No
55845	PROSTECT RETROPUB RAD W WO NRV SPAR AND BI PLV LYM		Not Cov	No	Not Cov	No		No	No
55860	EXPOS PROSTATE ANY APPROACH INSJ RADIOACT SUBST		No	No	No	No		No	No
55862	EXPOS PROSTATE INSJ RADIOACT SBST W LYMPH BX		Not Cov	No	Not Cov	No		No	No
55865	EXPOS PROSTATE INSJ RADIOAC SBST W BI PELV LYMPH		Not Cov	No	Not Cov	No		No	No
55866	LAPS PROSTECT RETROPUBIC RAD W NRV SPARING ROBOT		No	No	Not Cov	No		No	No
55870	ELECTROEJACULATION		Not Cov	Not Cov	Not Cov	Not Cov		No	No
55873	CRYOSURGICAL ABLATION PROSTATE W US AND MONITORI		No	No	No	No		No	No
55874	TRANSPERINEAL PLMT BIODEGRADABLE MATRL 1 MLT NJX		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
55875	TRANSPERINEAL PLMT NDL CATHS PROSTATE RADJ INSJ		No	No	No	No		No	No
55876	PLMT INTERSTITIAL DEV RADIAT TX PROSTATE 1 MULT		No	No	Not Cov	No		No	No
55899	UNLISTED PROCEDURE MALE GENITAL SYSTEM		Yes	Yes	Not Cov	Yes		Yes	Yes
55920	PLACEMENT NEEDLE PELVIC ORGAN RADIOELEMENT APPL		No	No	No	No		No	No
55970	INTERSEX SURG MALE FEMALE	Bill through DSHS	Not Cov	Not Cov	Not Cov	Not Cov	Not Cov	Not Cov	Yes
55980	INTERSEX SURG FEMALE MALE	Bill through DSHS	Not Cov	Not Cov	Not Cov	Not Cov	Not Cov	Not Cov	Yes
56405	I AND D VULVA PERINEAL ABSCESS		No	No	Not Cov	No		No	No
56420	I AND D OF BARTHOLINS GLAND ABSCESS		No	No	Not Cov	No		No	No
56440	MARSUPIALIZATION BARTHOLINS GLAND CYST		No	No	No	No		No	No
56441	LYSIS LABIAL ADHESIONS		No	No	No	No		No	No
56442	HYMENOTOMY SIMPLE INCISION		No	No	No	No		No	No
56501	DESTRUCTION LESIONS VULVA SIMPLE		No	No	Not Cov	No		No	No
56515	DESTRUCTION LESIONS VULVA EXTENSIVE		No	No	No	No		No	No
56605	BIOPSY VULVA PERINEUM 1 LESION SPX		No	No	Not Cov	No		No	No
56606	BIOPSY VULVA PERINEUM EACH ADDL LESION		No	No	Not Cov	No		No	No
56620	VULVECTOMY SIMPLE PARTIAL		No	No	No	No		No	No
56625	VULVECTOMY SIMPLE COMPLETE		No	No	No	No		No	No
56630	VULVECTOMY RADICAL PARTIAL		Not Cov	No	Not Cov	No		No	No
56631	VULVECTOMY RAD PRTL UNI INGUINFEM LMPHADECTOMY		Not Cov	No	Not Cov	No		No	No
56632	VULVECTOMY RAD PRTL BI INGUINFEM LMPHADECTOMY		Not Cov	No	Not Cov	No		No	No
56633	VULVECTOMY RADICAL COMPLETE		Not Cov	No	Not Cov	No		No	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
56634	VULVECTOMY RAD COMPL UNI INGUINOFEM LMPHADECTOMY		Not Cov	No	Not Cov	No		No	No
56637	VULVECTOMY RAD COMPL BI INGUINOFEM LMPHADECTOMY		Not Cov	No	Not Cov	No		No	No
56640	VULVECTOMY RAD COMPL ILIAC AND PELVIC LMPHADECTOMY		Not Cov	No	Not Cov	No		No	No
56700	PRTL HYMENECTOMY REVJ HYMENAL RING		No	No	No	No		No	No
56740	EXC BARTHOLINS GLAND CYST		No	No	No	No		No	No
56800	PLASTIC REPAIR INTROITUS		No	No	No	No		No	No
56805	CLITOROPLASTY INTERSEX STATE		No	No	No	No		No	No
56810	PERINEOPLASTY RPR PERINEUM NONOBSTETRICAL SPX		No	No	No	No		No	No
56820	COLPOSCOPY VULVA		No	No	Not Cov	No		No	No
56821	COLPOSCOPY VULVA W BIOPSY		No	No	Not Cov	No		No	No
57000	COLPOTOMY W EXPLORATION		No	No	No	No		No	No
57010	COLPOTOMY W DRAINAGE PELVIC ABSCESS		No	No	No	No		No	No
57020	COLPOCENTESIS SEPARATE PROCEDURE		No	No	No	No		No	No
57022	I AND D VAGINAL HEMATOMA OBSTETRICAL POSTPARTUM		No	No	Not Cov	No		No	No
57023	I AND D VAGINAL HEMATOMA NON-OBSTETRICAL		No	No	No	No		No	No
57061	DESTRUCTION VAGINAL LESIONS SIMPLE		No	No	Not Cov	No		No	No
57065	DESTRUCTION VAGINAL LESIONS EXTENSIVE		No	No	No	No		No	No
57100	BIOPSY VAGINAL MUCOSA SIMPLE		No	No	Not Cov	No		No	No
57105	BIOPSY VAGINAL MUCOSA EXTENSIVE		No	No	No	No		No	No
57106	VAGINECTOMY PARTIAL REMOVAL VAGINAL WALL		No	No	Not Cov	No		No	No
57107	VAGINECTOMY PRTL RMVL VAG WALL AND PARAVAGINAL T		No	No	Not Cov	No		No	No
57109	VAGNC PRTL RMVL VAG WALL W BI TOT PEL LMPHADEC		No	No	Not Cov	No		No	No
57110	VAGINECTOMY COMPLETE REMOVAL VAGINAL WALL		Not Cov	No	Not Cov	No		No	No
57111	VAGINECTOMY COMPL RMVL VAG WALL AND PARAVAG TISS		Not Cov	No	Not Cov	No		No	No
57112	VAGNC COMPL RMVL VAG WALL TOT PEL LMPHADEC BX		Not Cov	No	Not Cov	No		No	No
57120	COLPOCLEISIS LE FORT TYPE		No	No	No	No		No	No
57130	EXCISION VAGINAL SEPTUM		No	No	No	No		No	No
57135	EXCISION VAGINAL CYST TUMOR		No	No	No	No		No	No
57150	IRRIGATION VAGINA AND APPL MEDICAMENT TX DISEASE		No	No	Not Cov	No		No	No
57155	INSERTION UTERINE TANDEM AND VAGINAL OVOIDS		No	No	No	No		No	No
57156	INSERTION VAGINAL RADIATION DEVICE		No	No	No	No		No	No
57160	FIT AND INSJ PESSARY OTH INTRAVAGINAL SUPPORT DEVI		No	No	Not Cov	No		No	No
57170	DIAPHRAGM CERVICAL CAP FITTING W INSTRUCTIONS		No	No	Not Cov	No		No	No
57180	INTRO ANY HEMOSTATIC AGENT PACK VAG HEMRRG SPX		No	No	No	No		No	No
57200	COLPORRHAPHY SUTURE INJURY VAGINA		No	No	No	No		No	No
57210	COLPOPERINEORRHAPHY SUTURE INJ VAGINA AND PERINEU		No	No	No	No		No	No

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Code	Code Description	Comments	Apple Health & IMC Medical				IMC / BHSO (Mental Health covered svcs)	Medicare	Market Place
			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
57220	PLASTIC URETHRAL SPHINCTER VAGINAL APPROACH		No	No	No	No		No	No
57230	PLASTIC REPAIR URETHROCELE		No	No	No	No		No	No
57240	ANTERIOR COLPORRAPHY RPR CYSTOCELE W CYSTO		No	No	No	No		No	No
57250	POST COLPORRHAPHY RECTOCELE W WO PERINEORRHAPHY		No	No	No	No		No	No
57260	CMBND ANTERPOST COLPORRAPHY W CYSTO		No	No	No	No		No	No
57265	CMBND ANTERPOST COLPORRAPHY W CYSTO W NTRCL RPR		No	No	No	No		No	No
57267	INSJ MESH PROSTH PELVIC FLOOR DEFECT EACH SITE		No	No	No	No		No	No
57268	REPAIR ENTEROCELE VAGINAL APPROACH SPX		No	No	No	No		No	No
57270	REPAIR ENTEROCELE ABDOMINAL APPROACH SPX		Not Cov	No	Not Cov	No		No	No
57280	COLPOPEXY ABDOMINAL APPROACH		Not Cov	No	Not Cov	No		No	No
57282	COLPOPEXY VAGINAL EXTRAPERITONEAL APPROACH		No	No	Not Cov	No		No	No
57283	COLPOPEXY VAGINAL INTRAPERITONEAL APPROACH		No	No	Not Cov	No		No	No
57284	PARAVAGINAL DEFECT REPAIR OPEN ABDOMINAL APPR		No	No	Not Cov	No		No	No
57285	PARAVAGINAL DEFECT REPAIR VAGINAL APPROACH		No	No	Not Cov	No		No	No
57287	RMVL REVJ SLING STRESS INCONTINENCE		No	No	No	No		No	No
57288	SLING OPERATION STRESS INCONTINENCE		Yes	Yes	Yes	No		Yes	Yes
57289	PEREYRA PX W ANTERIOR COLPORRHAPHY		Yes	Yes	Yes	No		Yes	Yes
57291	CONSTRUCTION ARTIFICIAL VAGINA W O GRAFT	Bill through DSHS	Not Cov	Not Cov	Not Cov	Not Cov	Not Cov	No	No
57292	CONSTRUCTION ARTIFICIAL VAGINA W GRAFT	Bill through DSHS	Not Cov	Not Cov	Not Cov	Not Cov	Not Cov	No	No
57295	REVJ RMVL PROSTHETIC VAGINAL GRAFT VAGINAL APP		No	No	No	No		No	No
57296	REVJ W RMVL PROSTHETIC VAGINAL GRAFT ABDML APPR		No	No	Not Cov	No		No	No
57300	CLSR RECTOVAGINAL FISTULA VAGINAL TRANSANAL APPR		No	No	No	No		No	No
57305	CLSR RECTOVAGINAL FISTULA ABDOMINAL APPROACH		Not Cov	No	Not Cov	No		No	No
57307	CLSR RECTOVAG FSTL ABDL APPR W CONCOMITANT CLST		Not Cov	No	Not Cov	No		No	No
57308	CLSR RECTOVAG FSTL TPRNL PRNL BDY RCNSTJ		Not Cov	No	Not Cov	No		No	No
57310	CLOSURE URETHROVAGINAL FISTULA		No	No	No	No		No	No
57311	CLSR URETHROVAG FSTL W BULBOCAVERNOSUS TRNSPL		Not Cov	No	Not Cov	No		No	No
57320	CLOSURE VESICOVAGINAL FISTULA VAGINAL APPROACH		No	No	No	No		No	No
57330	CLSR VESICOVAG FSTL TRANSVESICAL AND VAG APPR		No	No	Not Cov	No		No	No
57335	VAGINOPLASTY INTERSEX STATE	Bill through DSHS	Not Cov	Not Cov	Not Cov	Not Cov	Not Cov	No	No
57400	DILATION VAGINA W ANESTHESIA OTHER THAN LOCAL		No	No	No	No		No	No
57410	PELVIC EXAMINATION W ANESTHESIA OTHER THAN LOCAL		No	No	No	No		No	No
57415	REMOVAL IMPACTED VAG FB SPX W ANES OTH THN LOCAL		No	No	No	No		No	No
57420	COLPOSCOPY ENTIRE VAGINA W CERVIX IF PRESENT		No	No	Not Cov	No		No	No
57421	COLPOSCOPY ENTIRE VAGINA W VAGINA CERVIX BX		No	No	Not Cov	No		No	No
57423	PARAVAGINAL DEFECT REPAIR LAPAROSCOPIC APPROACH		No	No	Not Cov	No		No	No

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Code	Code Description	Comments	Apple Health & IMC Medical				IMC / BHSO (Mental Health covered svcs)	Medicare	Market Place
			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
57425	LAPAROSCOPY COLPOPEXY SUSPENSION VAGINAL APEX		No	No	Not Cov	No		No	No
57426	REVISION PROSTHETIC VAGINAL GRAFT LAPAROSCOPIC		No	No	No	No		No	No
57452	COLPOSCOPY CERVIX UPPER ADJACENT VAGINA		No	No	Not Cov	No		No	No
57454	COLPOSCOPY CERVIX BX CERVIX AND ENDOCRV CURRETAGE		No	No	Not Cov	No		No	No
57455	COLPOSCOPY CERVIX UPPR ADJCNT VAGINA W CERVIX BX		No	No	Not Cov	No		No	No
57456	COLPOSCOPY CERVIX ENDOCERVICAL CURETTAGE		No	No	Not Cov	No		No	No
57460	COLPOSCOPY CERVIX VAG LOOP ELTRD BX CERVIX		No	No	Not Cov	No		No	No
57461	COLPOSCOPY CERVIX VAG ELTRD CONIZATION CERVIX		No	No	Not Cov	No		No	No
57500	BIOPSY CERVIX SINGLE MULT EXCISION OF LESION SPX		No	No	Not Cov	No		No	No
57505	ENDOCERVICAL CURETTAGE W DILATION AND CURETTAGE		No	No	Not Cov	No		No	No
57510	CAUTERY CERVIX ELECTRO THERMAL		No	No	Not Cov	No		No	No
57511	CAUTERY CERVIX CRYOCAUTERY INITIAL REPEAT		No	No	Not Cov	No		No	No
57513	CAUTERY CERVIX LASER ABLATION		No	No	No	No		No	No
57520	CONIZATION CERVIX W WO D AND C RPR KNIFE LASER		No	No	No	No		No	No
57522	CONIZATION CERVIX W WO D AND C RPR ELTRD EXC		No	No	No	No		No	No
57530	TRACHELECTOMY CERVICECTOMY AMP CERVIX SPX		No	No	No	No		No	No
57531	RAD TRACHELECTOMY W BI PEL LMPHADEC		Not Cov	No	Not Cov	No		No	No
57540	EXCISION CERVICAL STUMP ABDOMINAL APPROACH		Not Cov	No	Not Cov	No		No	No
57545	EXC CERVICAL STUMP ABDL APPR W PELVIC FLOOR RPR		Not Cov	No	Not Cov	No		No	No
57550	EXCISION CERVICAL STUMP VAGINAL APPROACH		No	No	No	No		No	No
57555	EXC CRV STUMP VAG APPR W ANT AND POST REPAIR		No	No	Not Cov	No		No	No
57556	EXC CRV STUMP VAG APPR W RPR NTRCL		No	No	No	No		No	No
57558	DILATION AND CURETTAGE CERVICAL STUMP		No	No	No	No		No	No
57700	CERCLAGE UTERINE CERVIX NONOBSTETRICAL		No	No	No	No		No	No
57720	TRACHELORRHAPHY PLSTC RPR UTERINE CERVIX VAG		No	No	No	No		No	No
57800	DILATION CERVICAL CANAL INSTRUMENTAL SPX		No	No	Not Cov	No		No	No
58100	ENDOMETRIAL BX W WO ENDOCERVIX BX W O DILAT SPX		No	No	Not Cov	No		No	No
58110	ENDOMETRIAL BX CONJUNCT W COLPOSCOPY		No	No	Not Cov	No		No	No
58120	DILATION AND CURETTAGE DX AND THER NONOBSTETRIC MYOMECTOMY 1-4 MYOMAS W 250 GM OR LESS		No	No	No	No		No	No
58140	ABDOMINAL APPR		Not Cov	No	Not Cov	No		No	No
58145	MYOMECTOMY 1-4 MYOMAS 250 GM OR LESS VAGINAL APPR		No	No	No	No		No	No
58146	MYOMECTOMY 5 OR GRT MYOMAS AND OR GRT 250 GM ABDOMINA		Not Cov	No	Not Cov	No		No	No
58150	TOTAL ABDOMINAL HYSTERECT W WO RMVL TUBE OVARY		Not Cov	Yes	Not Cov	No		Yes	Yes
58152	TOT ABD HYST W WO RMVL TUBE OVARY W COLPURETHRXY		Not Cov	Yes	Not Cov	No		Yes	Yes
58180	SUPRACERVICAL ABDL HYSYTER W WO RMVL TUBE OVARY		Not Cov	Yes	Not Cov	No		Yes	Yes

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Code	Code Description	Comments	Apple Health & IMC Medical				IMC / BHSO (Mental Health covered svcs)	Medicare	Market Place
			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
58200	TOT ABD HYST W PARAORTIC AND PELVIC LYMPH NODE SAM		Not Cov	Yes	Not Cov	No		Yes	Yes
58210	RAD ABDL HYSTERECTOMY W BI PELVIC LMPHADENECTOMY		Not Cov	Yes	Not Cov	No		Yes	Yes
58240	PEL EXNTJ GYNECOLOGIC MAL		Not Cov	Yes	Not Cov	No		Yes	Yes
58260	VAGINAL HYSTERECTOMY UTERUS 250 GM OR LESS		Yes	Yes	Yes	No		Yes	Yes
58262	VAG HYST 250 GM OR LESS W RMVL TUBE AND OVARY		Yes	Yes	Yes	No		Yes	Yes
58263	VAG HYST 250 GM OR LESS W RMVL TUBE OVARY W RPR NTRCL		Yes	Yes	Not Cov	No		Yes	Yes
58267	VAG HYST 250 GM OR LESS W COLPO-URTCSTOPEXY		Yes	Yes	Not Cov	No		Yes	Yes
58270	VAGINAL HYSTERECTOMY 250 GM OR LESS W RPR ENTEROCELE		Yes	Yes	Not Cov	No		Yes	Yes
58275	VAGINAL HYSTERECTOMY W TOT PRTL VAGINECTOMY		Not Cov	Yes	Not Cov	No		Yes	Yes
58280	VAG HYSTER W TOT PRTL VAGINECT W RPR ENTEROCELE		Not Cov	Yes	Not Cov	No		Yes	Yes
58285	VAGINAL HYSTERECTOMY RADICAL SCHAUTA OPERATION		Not Cov	Yes	Not Cov	No		Yes	Yes
58290	VAGINAL HYSTERECTOMY UTERUS OVER 250 GM		Yes	Yes	Not Cov	No		Yes	Yes
58291	VAG HYST OVER 250 GM RMVL TUBE AND OVARY		Yes	Yes	Not Cov	No		Yes	Yes
58292	VAG HYST OVER 250 GM RMVL TUBE AND OVARY W RPR ENTRCLE		Yes	Yes	Not Cov	No		Yes	Yes
58293	VAG HYST OVER 250 GM COLPOURTCSTOPEXY W WO NDSC CTR		Not Cov	Yes	Not Cov	No		Yes	Yes
58294	VAGINAL HYSTERECTOMY OVER 250 GM RPR ENTEROCELE		Yes	Yes	Not Cov	No		Yes	Yes
58300	INSERTION INTRAUTERINE DEVICE IUD		No	No	Not Cov	No		Not Cov	No
58301	REMOVAL INTRAUTERINE DEVICE IUD		No	No	Not Cov	No		No	No
58321	ARTIFICIAL INSEMINATION INTRA-CERVICAL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
58322	ARTIFICIAL INSEMINATION INTRA-UTERINE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
58323	SPERM WASHING ARTIFICIAL INSEMINATION		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
58340	CATH AND SALINE CONTRAST SONOHYSTER HYSTEROSALPI		No	No	Not Cov	No		No	No
58345	TRANSCERV FALLOPIAN TUBE CATH W WO HYSTOSALPING		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Not Cov
58346	INSERTION HEYMAN CAPSULES CLINICAL BRACHYTHERAPY		No	No	No	No		No	No
58350	CHROMOTUBATION OVIDUCT W MATERIALS		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
58353	ENDOMETRIAL ABLTJ THERMAL W O HYSTEROSCOPIC GUID		No	No	No	No		No	No
58356	ENDOMETRIAL CRYOABLATION W US AND ENDOMETRIAL CR		Yes	Yes	Not Cov	No		Yes	Yes
58400	UTERINE SUSPENSION W WO SHORTENING LIGAMENTS SPX		No	No	Not Cov	No		No	No
58410	UTERINE SUSP W WO SHORT LIGAMNTS W SYMPATHECTOMY		No	No	Not Cov	No		No	No

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			Outpatient		ASC	Office Setting			
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58520	HYSTERORRHAPHY REPAIR RUPT UTERUS NONOBSTETRICAL		No	No	Not Cov	No		No	No
58540	HYSTEROPLASTY RPR UTERINE ANOMALY		Yes	Yes	Not Cov	No		Yes	Yes
58541	LAPAROSCOPY SUPRACERVICAL HYSTERECTOMY 250 GM OR LESS		Yes	Yes	Yes	No		Yes	Yes
58542	LAPS SUPRACRV HYSTERECT 250 GM OR LESS RMVL TUBE OVARY		Yes	Yes	Yes	No		Yes	Yes
58543	LAPS SUPRACERVICAL HYSTERECTOMY OVER 250		Yes	Yes	Yes	No		Yes	Yes
58544	LAPS SUPRACRV HYSTEREC OVER 250 G RMVL TUBE OVARY		Yes	Yes	Yes	No		Yes	Yes
58545	LAPS MYOMECTOMY EXC 1-4 MYOMAS 250 GM OR LESS		Yes	Yes	Yes	No		Yes	Yes
58546	LAPS MYOMECTOMY EXC 5 OR GRT MYOMAS OVER 250 GRAMS		Yes	Yes	Yes	No		Yes	Yes
58548	LAPS W RAD HYST W BILAT LMPHADEC RMVL TUBE OVARY		Not Cov	Yes	Not Cov	No		Yes	Yes
58550	LAPS VAGINAL HYSTERECTOMY UTERUS 250 GM OR LESS		Yes	Yes	Yes	No		Yes	Yes
58552	LAPS W VAG HYSTERECT 250 GM AND RMVL TUBE AND OVARIES		Yes	Yes	Yes	No		Yes	Yes
58553	LAPS W VAGINAL HYSTERECTOMY OVER 250 GRAMS		Yes	Yes	Yes	No		Yes	Yes
58554	LAPS VAGINAL HYSTERECT OVER 250 GM RMVL TUBE AND OVARY		Yes	Yes	Yes	No		Yes	Yes
58555	HYSTEROSCOPY DIAGNOSTIC SEPARATE PROCEDURE		No	No	No	No		No	No
58558	HYSTEROSCOPY BX ENDOMETRIUM AND POLYPC W WO D AND C		No	No	No	No		No	No
58559	HYSTEROSCOPY LYSIS INTRAUTERINE ADHESIONS		No	No	No	No		No	No
58560	HYSTEROSCOPY DIV RESCJ INTRAUTERINE SEPTUM		No	No	No	No		No	No
58561	HYSTEROSCOPY REMOVAL LEIOMYOMATA		No	No	No	No		No	No
58562	HYSTEROSCOPY REMOVAL IMPACTED FOREIGN BODY		No	No	No	No		No	No
58563	HYSTEROSCOPY ENDOMETRIAL ABLATION		No	No	No	No		No	No
58565	HYSTEROSCOPY BI TUBE OCCLUSION W PERM IMPLNTS		No	No	No	No		No	No
58570	LAPAROSCOPY W TOTAL HYSTERECTOMY UTERUS 250 GM OR LESS		Yes	Yes	Yes	No		Yes	Yes
58571	LAPS TOTAL HYSTERECT 250 GM OR LESS W RMVL TUBE OVARY		Yes	Yes	Yes	No		Yes	Yes
58572	LAPAROSCOPY TOTAL HYSTERECTOMY UTERUS OVER 250 GM		Yes	Yes	Not Cov	No		Yes	Yes
58573	LAPAROSCOPY TOT HYSTERECTOMY OVER 250 G W TUBE OVARY		Yes	Yes	Yes	No		Yes	Yes
58575	LAPS TOT HYSTERECTOMY RESJ MALIGNANCY W OMNTC		Not Cov	No	Not Cov	No		No	No
58578	UNLISTED LAPAROSCOPY PROCEDURE UTERUS		Yes	Yes	Not Cov	Yes		Yes	Yes
58579	UNLISTED HYSTEROSCOPY PROCEDURE UTERUS		Yes	Yes	Not Cov	Yes		Yes	Yes
58600	LIG TRNSXJ FLP TUBE ABDL VAG APPR UNI BI		No	No	No	No		No	No
58605	LIG TRNSXJ FLP TUBE ABDL VAG POSTPARTUM SPX		Not Cov	No	Not Cov	No		No	No
58611	LIG TRNSXJ FALOPIAN TUBE CESAREAN DEL ABDML SURG		Not Cov	No	Not Cov	No		No	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
58615	OCCLUSION FLP TUBE DEV VAG SUPRAPUBIC APPR		No	No	No	No		No	No
58660	LAPAROSCOPY W LYSIS OF ADHESIONS		No	No	No	No		Yes	Yes
58661	LAPAROSCOPY W RMVL ADNEXAL STRUCTURES		No	No	No	No		Yes	Yes
58662	LAPS FULG EXC OVARY VISCERA PERITONEAL SURFACE		No	No	No	No		Yes	Yes
58670	LAPAROSCOPY FULGURATION OVIDUCTS		No	No	No	No		No	No
58671	LAPAROSCOPY W PLMT OCCLUSION DEVICE OVIDUCTS		No	No	No	No		No	No
58672	LAPAROSCOPY FIMBRIOPLASTY		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
58673	LAPAROSCOPY SALPINGOSTOMY		Yes	Yes	Yes	No		Yes	Yes
58674	LAPS ABLTJ UTERINE FIBROIDS W INTRAOP US GDN		No	No	Not Cov	No		Not Cov	No
58679	UNLISTED LAPAROSCOPY PROCEDURE OVIDUCT OVARY		Yes	Yes	Not Cov	Yes		Yes	Yes
58700	SALPINGECTOMY COMPLETE PARTIAL UNI BI SPX		Not Cov	Yes	Not Cov	No		Yes	Yes
58720	SALPINGO-OOPHORECTOMY COMPL PRTL UNI BI SPX		Not Cov	Yes	Not Cov	No		Yes	Yes
58740	LYSIS OF ADHESIONS SALPINX OVARY		Yes	Yes	Not Cov	No		Yes	Yes
58750	TUBOTUBAL ANASTATOMOSIS		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Not Cov
58752	TUBOUTERINE IMPLANTATION		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Not Cov
58760	FIMBRIOPLASTY		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Not Cov
58770	SALPINGOSTOMY		Yes	Yes	Not Cov	No		Yes	Yes
58800	DRAINAGE OVARIAN CYST UNI BI SPX VAGINAL APPR		No	No	No	No		No	No
58805	DRAINAGE OVARIAN CYST UNI BI SPX ABDOMINAL		No	No	No	No		No	No
58820	DRAINAGE OVARIAN ABSCESS VAGINAL APPR OPEN		No	No	No	No		No	No
58822	DRAINAGE OVARIAN ABSCESS ABDOMINAL APPROACH		Not Cov	No	Not Cov	No		No	No
58825	TRANSPOSITION OVARY		Not Cov	No	Not Cov	No		No	No
58900	BIOPSY OVARY UNI BI SEPARATE PROCEDURE		No	No	No	No		No	No
58920	WEDGE RESCJ BISCTJ OVARY UNI BI		No	No	Not Cov	No		No	No
58925	OVARIAN CYSTECTOMY UNI BI		No	No	Not Cov	No		No	No
58940	OOPHORECTOMY PARTIAL TOTAL UNI BI		Not Cov	Yes	Not Cov	No		Yes	Yes
58943	OOPHORECTOMY PRTL TOT UNI BI OVARIAN MALIGNANCY		Not Cov	Yes	Not Cov	No		Yes	Yes
58950	RESCJ OVARIAN TUBAL PERITONEAL MALIGNANCY W BSO		Not Cov	Yes	Not Cov	No		Yes	Yes
58951	RESCJ PRIM PRTL MAL W BSO AND OMNTC TAH AND LMPHAD		Not Cov	Yes	Not Cov	No		Yes	Yes
58952	RESCJ PRIM PRTL MAL W BSO AND OMNTC RAD DEBULKING BSO W OMENTECTOMY TAH AND RAD DEBULKING		Not Cov	Yes	Not Cov	No		Yes	Yes
58953	DISSECTION		Not Cov	Yes	Not Cov	No		Yes	Yes
58954	BSO W OMENTECTOMY TAH DEBULKING W LMPHADECTOMY		Not Cov	Yes	Not Cov	No		Yes	Yes
58956	BSO W TOT OMENTECTOMY AND HYSTERECTOMY MALIGNANC		Not Cov	Yes	Not Cov	No		Yes	Yes
58957	RESEJ RECUR OVARIAN TUBAL PERITONEAL MALIGNANCY		Not Cov	Yes	Not Cov	No		Yes	Yes
58958	RESECTION RECRT MAL W OMENTECTOMY PEL LMPHADEC		Not Cov	Yes	Not Cov	No		Yes	Yes
58960	LAPT STG RESTG OVARIAN TUBAL PRIM MAL 2ND LOOK		No	No	Not Cov	No		No	No
58970	FOLLICLE PUNCTURE OOCYTE RETRIEVAL ANY METHOD		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
58974	EMBRYO TRANSFER INTRAUTERINE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov

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Code	Code Description	Comments	Apple Health & IMC Medical				IMC / BHSO (Mental Health covered svcs)	Medicare	Market Place
			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
58976	GAMETE ZYGOTE EMBRYO FALLOPIAN TRANSFER ANY METH		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
58999	UNLISTED PX FEMALE GENITAL SYSTEM NONOBSTETRICAL		Yes	Yes	Not Cov	Yes		Yes	Yes
59000	AMNIOCENTESIS DIAGNOSIC		No	No	Not Cov	No		No	No
59001	AMNIOCENTESIS THER AMNIOTIC FLUID RDCTJ US GUID		No	No	Not Cov	No		No	No
59012	CORDOCENTESIS INTRAUTERINE		No	No	No	No		No	No
59015	CHORIONIC VILLUS SAMPLING		No	No	Not Cov	No		No	No
59020	FETAL CONTRACTION STRESS TEST		No	No	Not Cov	No		No	No
59025	FETAL NONSTRESS TEST		No	No	Not Cov	No		No	No
59030	FETAL SCALP BLOOD SAMPLING		No	No	Not Cov	No		No	No
59050	FETAL MONITORING LABOR PHYS WRITTEN REPORT		No	No	Not Cov	No		No	No
59051	FETAL MONITR LABOR PHYS WRTTN REPRT INTERPJ ONLY		Not Cov	No	Not Cov	No		No	No
59070	TRANSABDOMINAL AMNIOINFUSION W ULTRSND GUIDANCE		Yes	Yes	Yes	No		Yes	Yes
59072	FETAL UMBILICAL CORD OCCLUSION W ULTRSND GUIDNCE		Yes	Yes	Yes	No		Yes	Yes
59074	FETAL FLUID DRAINAGE W ULTRASOUND GUIDANCE		Yes	Yes	Yes	No		Yes	Yes
59076	FETAL SHUNT PLACEMENT W ULTRASOUND GUIDANCE		Yes	Yes	Yes	No		Yes	Yes
59100	HYSTEROTOMY ABDOMINAL		No	No	Not Cov	No		No	No
59120	TX ECTOPIC PREGNANCY ABDOMINAL VAGINAL APPR		No	No	Not Cov	No		No	No
59121	TX ECTOPIC PREGNANCY W O SALPING AND OOPHORECTOMY		No	No	Not Cov	No		No	No
59130	TX ECTOPIC PREGNANCY ABDL PREGNANCY		Not Cov	No	Not Cov	No		No	No
59135	TX ECTOPIC PREGNANCY NTRSTL REQ TOT HYST		Not Cov	No	Not Cov	No		No	No
59136	TX ECTOPIC PREGNANCY NTRSTL PRTL RESCJ UTER		Not Cov	No	Not Cov	No		No	No
59140	TX ECTOPIC PREGNANCY CERVICAL W EVACUATION		Not Cov	No	Not Cov	No		No	No
59150	LAPS TX ECTOPIC PREG W O SALPING AND OOPHORECTOMY		No	No	No	No		No	No
59151	LAPS TX ECTOPIC PREG W SALPING AND OOPHORECTOMY		No	No	No	No		No	No
59160	CURETTAGE POSTPARTUM		No	No	No	No		No	No
59200	INSERTION CERVICAL DILATOR SEPARATE PROCEDURE		No	No	Not Cov	No		No	No
59300	EPISIOTOMY VAG RPR OTH THN ATTENDING		No	No	Not Cov	No		No	No
59320	CERCLAGE CERVIX PREGNANCY VAGINAL		No	No	No	No		No	No
59325	CERCLAGE CERVIX PREGNANCY ABDOMINAL		No	No	Not Cov	No		No	No
59350	HYSTERORRHAPHY RUPTURED UTERUS		Not Cov	No	Not Cov	No		No	No
59400	OB CARE ANTEPARTUM VAG DLVR AND POSTPARTUM	Notification Only	Not Cov	No	Not Cov	No		No	No
59409	VAGINAL DELIVERY ONLY	Notification Only	No	No	Not Cov	No		No	No
59410	VAGINAL DELIVERY ONLY W POSTPARTUM CARE	Notification Only	Not Cov	No	Not Cov	No		No	No
59412	EXTERNAL CEPHALIC VERSION W WO TOCOLYSIS		No	No	No	No		No	No
59414	DELIVERY PLACENTA SEPARATE PROCEDURE		No	No	No	No		No	No
59425	ANTEPARTUM CARE ONLY 4-6 VISITS		Not Cov	No	Not Cov	No		No	No
59426	ANTEPARTUM CARE ONLY 7 OR GRT VISITS		Not Cov	No	Not Cov	No		No	No
59430	POSTPARTUM CARE ONLY SEPARATE PROCEDURE		Not Cov	No	Not Cov	No		No	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
59510	OB ANTEPARTUM CARE CESAREAN DLVR AND POSTPARTUM	Notification Only	Not Cov	No	Not Cov	No		No	No
59514	CESAREAN DELIVERY ONLY	Notification Only	Not Cov	No	Not Cov	No		No	No
59515	CESAREAN DELIVERY ONLY W POSTPARTUM CARE	Notification Only	Not Cov	No	Not Cov	No		No	No
59525	STOT TOT HYSTERECTOMY AFTER CESAREAN DELIVERY	Notification Only	Not Cov	No	Not Cov	No		No	No
59610	ROUTINE OB CARE VAG DLVRY AND POSTPARTUM CARE VB	Notification Only	Not Cov	No	Not Cov	No		No	No
59612	VAGINAL DELIVERY AFTER CESAREAN DELIVERY	Notification Only	No	No	Not Cov	No		No	No
59614	VAGINAL DELIVERY AND POSTPARTUM CARE VBAC		Not Cov	No	Not Cov	No		No	No
59618	ROUTINE OBSTETRICAL CARE ATTEMPTED VBAC	Notification Only	Not Cov	No	Not Cov	No		No	No
59620	CESAREAN DELIVERY ATTEMPTED VBAC	Notification Only	Not Cov	No	Not Cov	No		No	No
59622	CESAREAN DLVRY AND POSTPARTUM CARE ATTEMPTED VBA	Notification Only	Not Cov	No	Not Cov	No		No	No
59812	TX INCOMPLETE ABORTION ANY TRIMESTER SURGICAL		No	No	No	No		No	No
59820	TX MISSED ABORTION FIRST TRIMESTER SURGICAL		No	No	No	No		No	No
59821	TX MISSED ABORTION SECOND TRIMESTER SURGICAL		No	No	No	No		No	No
59830	TX SEPTIC ABORTION SURGICAL		No	No	Not Cov	No		No	No
59840	INDUCED ABORTION DILATION AND CURETTAGE	Elective bill through DSHS	No	No	Yes	No		No	No
59841	INDUCED ABORTION DILATION AND EVACUATION	Elective bill through DSHS	No	No	Yes	No		No	No
59850	INDUCED ABORTION 1 OR GRT AMNIOTIC INJX W D AND C EVACJ	Elective bill through DSHS	No	No	Not Cov	No		No	No
59851	INDUCE ABORT 1 OR GRT AMNIOT NJXS DLVR FETUS D AND C	Elective bill through DSHS	No	No	Not Cov	No		No	No
59852	INDUCE ABORT 1 OR GRT AMNIOT NJXS DLVR FETUS HYSTOTM	Elective bill through DSHS	Not Cov	No	Not Cov	No		No	No
59855	INDUCED ABORT 1 OR GRT VAG SUPPOSITORIES DLVR FETUS	Elective bill through DSHS	Not Cov	No	Not Cov	No		No	No
59856	INDUCED ABORT 1 OR GRT VAG SUPP DLVR FETUS D AND C AND	Elective bill through DSHS	Not Cov	No	Not Cov	No		No	No
59857	INDUCED ABORT 1 OR GRT VAG SUPPOS DLVR FETUS HYSTOT	Elective bill through DSHS	Not Cov	No	Not Cov	No		No	No
59866	MULTIFETAL PREGNANCY REDUCTION		Not Cov	Not Cov	Not Cov	Not Cov		No	No
59870	UTERINE EVACUATION AND CURETTAGE HYDATIDIFORM MOLE		No	No	No	No		No	No
59871	REMOVAL CERCLAGE SUTURE UNDER ANESTHESIA		No	No	No	No		No	No
59897	UNLISTED FETAL INVASIVE PX W ULTRASOUND		Yes	Yes	Not Cov	Yes		Yes	Yes
59898	UNLISTED LAPAROSCOPY PX MATERNITY CARE AND DELIVERY		Yes	Yes	Not Cov	Yes		Yes	Yes
59899	UNLISTED PROCEDURE MATERNITY CARE AND DELIVERY		Yes	Yes	Not Cov	Yes		Yes	Yes
60000	I AND D THYROGLOSSAL DUCT CYST INFECTED		No	No	No	No		No	No
60100	BIOPSY THYROID PERCUTANEOUS CORE NEEDLE		No	No	Not Cov	No		No	No
60200	EXC CYST ADENOMA THYROID TRANSECTION ISTHMUS		No	No	No	No		No	No
60210	PRTL THYROID LOBECTOMY UNI W WO ISTHMUSECTOMY		No	No	No	No		No	No
60212	PRTL THYROID LOBEC UNI W CONTRATLAT STOT LOBEC		No	No	No	No		No	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
60220	TOTAL THYROID LOBECTOMY UNI W WO ISTHMUSECTOMY		No	No	No	No		No	No
60225	TOTAL THYROID LOBEC UNI W CONTRALAT STOT LOBEC		No	No	No	No		No	No
60240	THYROIDECTOMY TOTAL COMPLETE		No	No	No	No		No	No
60252	THYROIDECTOMY TOTAL SUBTOTAL LMTD NECK DISSECT		No	No	Not Cov	No		No	No
60254	THYROIDECTOMY TOTAL SUBTOTAL RAD NECK DISSECT		Not Cov	No	Not Cov	No		No	No
60260	THYROIDECTOMY RMVL REMAINING TISS FLWG PRTL RMVL		No	No	Not Cov	No		No	No
60270	THYROIDECT W SUBSTERNAL SPLIT TRANSTHORACIC		Not Cov	No	Not Cov	No		No	No
60271	THYROIDECTOMY SUBSTERNAL CERVICAL APPROACH		No	No	Not Cov	No		No	No
60280	EXCISION THYROGLOSSAL DUCT CYST SINUS		No	No	No	No		No	No
60281	EXCISION THYROGLOSSAL DUCT CYST SINUS RECURRENT		No	No	No	No		No	No
60300	ASPIRATION AND OR INJECTION THYROID CYST		No	No	Not Cov	No		No	No
60500	PARATHYROIDECTOMY EXPLORATION PARATHYROIDS		No	No	Not Cov	No		No	No
60502	PARATHYROIDECTOMY EXPLOR PARATHYROIDS RE-EXPLOR		No	No	Not Cov	No		No	No
60505	PARATHYRDEC EXPL PARATHYR MEDSTNL STERNAL TTHRC		Not Cov	No	Not Cov	No		No	No
60512	PARATHYROID AUTOTRANSPLANTATION ADD-ON		No	No	Not Cov	No		No	No
60520	THYMECTOMY PRTL TOT TRANSCERVICAL APPR SPX		No	No	Not Cov	No		No	No
60521	THYMECTOMY PRTL TOT W O RAD MEDSTNL DSJ SPX		Not Cov	No	Not Cov	No		No	No
60522	THYMECTOMY PRTL TOT RAD MEDSTNL DSJ SPX		Not Cov	No	Not Cov	No		No	No
60540	ADRENALECTOMY W EXPL W WO BX ABDL LMBR DRSL SPX		Not Cov	No	Not Cov	No		No	No
60545	ADRENALECTOMY EXPL W EXC RETROPERTINEAL TUMOR		Not Cov	No	Not Cov	No		No	No
60600	EXC CAROTID BODY TUMOR W O EXC CAROTID ARTERY		Not Cov	No	Not Cov	No		No	No
60605	EXC CAROTID BODY TUMOR W EXC CAROTID ARTERY		Not Cov	No	Not Cov	No		No	No
60650	LAPAROSCOPY ADRENALECTOMY PRTL COMPL TABDL		Not Cov	No	Not Cov	No		No	No
60659	UNLISTED LAPAROSCOPY PROCEDURE ENDOCRINE SYSTEM		Yes	Yes	Not Cov	Yes		Yes	Yes
60699	UNLISTED PROCEDURE ENDOCRINE SYSTEM		Yes	Yes	Not Cov	Yes		Yes	Yes
61000	SUBDURAL TAP FONTANELLE SUTUR INFANT UNI BI INIT		No	No	Not Cov	No		No	No
61001	SUBDURAL TAP FONTANELLE SUTUR INFANT UNI BI SBSQ		No	No	Not Cov	No		No	No
61020	VENTRICULAR PUNCTURE PREVIOUS BURR HOLE W O NJX		No	No	No	No		No	No
61026	VENTRICULAR PUNCTURE PREVIOUS BURR HOLE W INJ		No	No	No	No		No	No
61050	CISTERNAL LATERAL C1-C2 PUNCTURE W O INJ SPX		No	No	No	No		No	No
61055	CISTERNAL LATERAL C1-C2 PUNCTURE W INJECTION		No	No	No	No		No	No
61070	PUNCTURE SHUNT TUBE RESERVOIR ASPIRATION INJ PX		No	No	No	No		No	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
61105	TWIST DRILL HOLE SUBDURAL VENTRICULAR PUNCTURE		Not Cov	No	Not Cov	No		No	No
61107	TWIST DRILL HOLE IMPLT VENTRICULAR CATH DEVICE		Not Cov	No	Not Cov	No		No	No
61108	TWIST DRILL HOLE EVAC AND DRG SUBDURAL HEMATOMA		Not Cov	No	Not Cov	No		No	No
61120	BURR HOLE VENTRICULAR PUNCTURE		Not Cov	No	Not Cov	No		No	No
61140	BURR HOLE TREPHINE W BX BRAIN INTRACRNIAL LESION		Not Cov	No	Not Cov	No		No	No
61150	BURR HOLE TREPHINE W DRG BRAIN ABSCESS CYST		Not Cov	No	Not Cov	No		No	No
61151	BURR HOLE TREPHINE W SBSQ TAPPING ICRA ABSC CST		Not Cov	No	Not Cov	No		No	No
61154	BURR HOLE W EVAC AND DRG HEMATOMA XDRL SDRL		Not Cov	No	Not Cov	No		No	No
61156	BURR HOLE W ASPIR HEMATOMA CYST INTRACEREBRAL		Not Cov	No	Not Cov	No		No	No
61210	BURR HOLE IMPLANT VENTRICULAR CATH OTHER DEVICE		Not Cov	No	Not Cov	No		No	No
61215	INSJ SUBQ RSVR PUMP INFUSION SYSTEM VENTRIC CATH		No	No	No	No		No	No
61250	BURR HOLE TREPHINE SUPRATENTORIAL W O OTH SURG		Not Cov	No	Not Cov	No		No	No
61253	BURR HOLE TREPHINE INFRATENTORIAL UNI BI		Not Cov	No	Not Cov	No		No	No
61304	CRANIECTOMY CRANIOTOMY EXPL SUPRATENTORIAL		Not Cov	No	Not Cov	No		No	No
61305	CRANIECTOMY CRANIOTOMY EXPL INFRATENTORIAL		Not Cov	No	Not Cov	No		No	No
61312	CRANIECTOMY HMTMA SUPRATENTORIAL EXTRA SUBDURAL		Not Cov	No	Not Cov	No		No	No
61313	CRANIECTOMY HMTMA SUPRATENTORIAL INTRACEREBRAL		Not Cov	No	Not Cov	No		No	No
61314	CRANIECTOMY HMTMA INFRATENTORIAL EXTRA SUBDURAL		Not Cov	No	Not Cov	No		No	No
61315	CRANIECTOMY HMTMA SUPRATENTORIAL INTRACEREBRAL		Not Cov	No	Not Cov	No		No	No
61316	INCISION AND SUBCUTANEOUS PLMT CRANIAL BONE GRAF		Not Cov	No	Not Cov	No		No	No
61320	CRANIECTOMY CRANIOTMY DRG ABSCESS SUPRATENTORIAL		Not Cov	No	Not Cov	No		No	No
61321	CRANIECTOMY CRANIOTMY DRG ABSCESS INFRATENTORIAL		Not Cov	No	Not Cov	No		No	No
61322	CRANIECT CRANIOT W WO DURAPLASTY W O LOBECTOMY		Not Cov	No	Not Cov	No		No	No
61323	CRANIECT CRANIOT W WO DURAPLASTY W LOBECTOMY		Not Cov	No	Not Cov	No		No	No
61330	DECOMPRESSION ORBIT ONLY TRANSCRANIAL APPROACH		No	No	No	No		No	No
61333	EXPL ORBIT TRANSCRANIAL APPROACH W RMVL LESION		Not Cov	No	Not Cov	No		No	No
61340	SUBTEMPORAL CRANIAL DECOMPRESSION		Not Cov	No	Not Cov	No		No	No

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			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
61343	CRNEC SUBOCCIPITAL CRV LAM DCMPRN MEDULLA AND CORD		Not Cov	No	Not Cov	No		No	No
61345	OTHER CRANIAL DECOMPRESSION POSTERIOR FOSSA		Not Cov	No	Not Cov	No		No	No
61450	CRNEC STPL SCTJ COMPRESSION DCMPRN GANGLION		Not Cov	No	Not Cov	No		No	No
61458	CRNEC SOPL EXPL DCMPRN CRNL NRV		Not Cov	No	Not Cov	No		No	No
61460	CRANIECTOMY SUBOCCIPITAL SECTION 1 OR GRT CRANIAL NR		Not Cov	No	Not Cov	No		No	No
61500	CRANIECTOMY W EXCISION TUMOR LESION SKULL		Not Cov	No	Not Cov	No		No	No
61501	CRANIECTOMY OSTEOMYELITIS		Not Cov	No	Not Cov	No		No	No
61510	CRANIEC TREPHINE BONE FLP BRAIN TUMOR SUPRTENTOR		Not Cov	No	Not Cov	No		No	No
61512	CRNEC TREPHINE BONE FLAP MENINGIOMA SUPRATENTOR		Not Cov	No	Not Cov	No		No	No
61514	CRNEC TREPHINE BONE FLAP BRAIN ABSC SUPRATENTOR		Not Cov	No	Not Cov	No		No	No
61516	CRNEC TREPHINE BONE FLAP FENEST CYST SUPRATENTOR		Not Cov	No	Not Cov	No		No	No
61517	IMPLTJ BRAIN INTRACAVITARY CHEMOTHERAPY AGENT		Not Cov	No	Not Cov	No		No	No
61518	CRNEC EXC BRAIN TUMOR INFRATENTORIAL POST FOSSA		Not Cov	No	Not Cov	No		No	No
61519	CRNEC EXC TUM INFRATENTOR POST FOSSA MENINGIOMA		Not Cov	No	Not Cov	No		No	No
61520	CRNEC TUM INFRATTL POSTFOSSA CRBLOPNT ANGLE TUM		Not Cov	No	Not Cov	No		No	No
61521	CRNEC TUM INFRATTL PFOSSA MIDLINE TUM BASE SKULL		Not Cov	No	Not Cov	No		No	No
61522	CRNEC INFRATNTORIAL POST FOSSA EXC BRAIN ABSCESS		Not Cov	No	Not Cov	No		No	No
61524	CRNEC INFRATNTOR POSTFOSSA EXC FENESTRATION CYST		Not Cov	No	Not Cov	No		No	No
61526	CRNEC TRANSTEMPOR EXC CEREBELLOPONTINE ANGLE TUM		Not Cov	No	Not Cov	No		No	No
61530	CRNEC EXC CEREBELLOPNTIN ANGLE TUM MID POSTFOSSA		Not Cov	No	Not Cov	No		No	No
61531	SUBDURAL IMPLTJ ELECTRODES SEIZURE MONITORING		Not Cov	No	Not Cov	No		No	No
61533	CRANIOT SUBDURAL IMPLT ELCTRD SEIZURE MONITORING		Not Cov	No	Not Cov	No		No	No
61534	CRANIOT EPILEPTOGENIC FOC W O ELECTRCORTICOGRPHY		Not Cov	No	Not Cov	No		No	No
61535	CRANIOT RMVL EPID SUBDURL ELCTRD W O EXC TIS SPX		Not Cov	No	Not Cov	No		No	No
61536	CRANIOT EPILEPTOGENIC FOCUS W ELECTROCORTCOGRPHY		Not Cov	No	Not Cov	No		No	No
61537	CRANIOT TEMPORAL LOBE W O ELECTROCORTICOGRAPHY		Not Cov	No	Not Cov	No		No	No

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			Outpatient		ASC	Office Setting			
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61538	CRANIOT LOBEC TEMPORAL LOBE W ELECTROCORTCOGRPHY		Not Cov	No	Not Cov	No		No	No
61539	CRANIOT LOBECTOMY OTH THN TEMPORAL LOBE W ECOG		Not Cov	No	Not Cov	No		No	No
61540	CRANIOT LOBECTOMY OTH THN TEMPORAL LOBE W O ECOG		Not Cov	No	Not Cov	No		No	No
61541	CRANIOTOMY TRANSECTION CORPUS CALLOSUM		Not Cov	No	Not Cov	No		No	No
61543	CRANIOTOMY PARTIAL SUBTOTAL HEMISPHERECTOMY		Not Cov	No	Not Cov	No		No	No
61544	CRANIOTOMY EXCISION COAGULATION CHOROID PLEXUS		Not Cov	No	Not Cov	No		No	No
61545	CRANIOTOMY EXCISION CRANIOPHARYNGIOMA		Not Cov	No	Not Cov	No		No	No
61546	CRANIOT HYPOPHYSEC EXC PITUITARY TUMOR ICRL APPR		Not Cov	No	Not Cov	No		No	No
61548	HYPOPHYSEC EXC PITUITARY TUM TRANSNASAL SEPTAL		Not Cov	No	Not Cov	No		No	No
61550	CRANIECTOMY CRANIOSYNOSTOSIS 1 CRANIAL SUTURE		Not Cov	No	Not Cov	No		No	No
61552	CRANIECT CRANIOSYNOSTOSIS MULT CRANIAL SUTURES		Not Cov	No	Not Cov	No		No	No
61556	CRANIEC CRANIOSYNOSTOSIS FRONT PARIET BONE FLAP		Not Cov	No	Not Cov	No		No	No
61557	CRANIECTOMY CRANIOSYNOSTOSIS BIFRONTAL BONE FLAP		Not Cov	No	Not Cov	No		No	No
61558	XTN CRANIECT MULTIPLE SUTURE CRANIOSYNOSTOSIS		Not Cov	No	Not Cov	No		No	No
61559	XTN CRNEC MLT SUTR CRANIOSYNOSTOSIS W BONE GRAFT		Not Cov	No	Not Cov	No		No	No
61563	EXC BENIGN TUM CRANIAL BONE W O OPTIC NRV DCMPRN		Not Cov	No	Not Cov	No		No	No
61564	EXC BENIGN TUM CRANIAL BONE W OPTIC NRV DCMPRN		Not Cov	No	Not Cov	No		No	No
61566	CRANIOTOMY SELECTIVE AMYGDALOHIPPOCAMPECTOMY		Not Cov	No	Not Cov	No		No	No
61567	CRANIOTOMY MULTIPLE SUBPIAL TRANSECTIONS W ECOG		Not Cov	No	Not Cov	No		No	No
61570	CRANIECTOMY CRANIOTOMY EXC FOREIGN BODY BRAIN		Not Cov	No	Not Cov	No		No	No
61571	CRANIECTOMY CRANIOTOMY TX PENETRATNG WOUND BRAIN		Not Cov	No	Not Cov	No		No	No
61575	TRNSRAL SKULL BSE BR STEM CORD BX DCOMPR EXC LES		Not Cov	No	Not Cov	No		No	No
61576	TRNSRL SKUL BSE BR STM CORD BX DCMP SPLT TONGUE		No	No	Not Cov	No		No	No
61580	CRANIOFACIAL ANT CRANIAL FOSSA W O ORBITAL EXNTJ		Not Cov	No	Not Cov	No		No	No
61581	CRANIOFACIAL ANT CRANIAL FOSSA W ORBITAL EXNTJ		Not Cov	No	Not Cov	No		No	No
61582	CRANFCL ANT CRANIAL FOSSA UNI BI CRANIOT OSTEOT		Not Cov	No	Not Cov	No		No	No
61583	CRANFCL ANT CRANIAL FOSSA UNI BIFRNTL ELEV LOBE		Not Cov	No	Not Cov	No		No	No

Guide is subject to change at any time. If a member belongs to a group delegated for UM, contact that group for authorization. Claim payment is subject to eligibility and benefits at the time of service. Claim processing edits will apply.

This prior authorization guide applies to Medicaid, Medicare, and Marketplace.

DOS Effective 10/1/19; Posted 10/30/19

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
61584	ORBITOCRANIAL ANT CRANIAL FOSSA W O ORBIT EXNTJ		Not Cov	No	Not Cov	No		No	No
61585	ORBITOCRANIAL ANT CRANIAL FOSSA W ORBITAL EXNTJ		Not Cov	No	Not Cov	No		No	No
61586	BICORONAL TRANSZYGMTC AND LEFORT I W O BONE GRFT		Not Cov	No	Not Cov	No		No	No
61590	INFRATEMPORAL MID CRANIAL FOSSA W WO DISARTICLTN		Not Cov	No	Not Cov	No		No	No
61591	INFRATEMPO MID CRANIAL FOSSA W WO DCOMPR AND MOBI		Not Cov	No	Not Cov	No		No	No
61592	ORBITOCRNL APPR MID CRANIAL FOSSA TEMPORAL LOBE		Not Cov	No	Not Cov	No		No	No
61595	TRANSTEMP APPR POST CRAN FOSSA DCOMPR SINUS NRV		Not Cov	No	Not Cov	No		No	No
61596	TRANSCOCHLR POST CRNL FOSSA W WO MOBIL NRV ART		Not Cov	No	Not Cov	No		No	No
61597	TRNSCONDLR POST CRNL FOSSA DCOMPR ART W WO MOBIL		Not Cov	No	Not Cov	No		No	No
61598	TRANSPTRSAL POST CRNL FOSSA CLIVUS FORAMN MAGNUM		Not Cov	No	Not Cov	No		No	No
61600	RESCJ EXC LES BASE ANT CRANIAL FOSSA EXTRADURAL		Not Cov	No	Not Cov	No		No	No
61601	RESCJ EXC LES BASE ANT CRNL FOSSA INDRL W WO GRF		Not Cov	No	Not Cov	No		No	No
61605	RESCJ EXC LES INFRATEMPOR FOSSA SPACE APEX XDRL		Not Cov	No	Not Cov	No		No	No
61606	RESCJ EXC LES ITPRL FOSSA SPACE APEX IDRL W RPR		Not Cov	No	Not Cov	No		No	No
61607	RESCJ EXC LES PARASELLAR SINUS CLIVUS MSB XDRL		Not Cov	No	Not Cov	No		No	No
61608	RESCJ EXC LES PARASELLAR SINUS CLIVUS MSB IDRL		Not Cov	No	Not Cov	No		No	No
61611	TRNSXJ LIG CAROTID ARTERY PETROUS CANAL W O RPR		Not Cov	No	Not Cov	No		No	No
61613	OBLTRJ CAROTID ARYSM ARTVEN CAROTID FISTULA DSJ		Not Cov	No	Not Cov	No		No	No
61615	RESCJ EXC LES BASE POST CRNL FOSSA JUG FRMN XDRL		Not Cov	No	Not Cov	No		No	No
61616	RESCJ EXC LES BASE PCF FORAMEN VRT BODIES IDRL		Not Cov	No	Not Cov	No		No	No
61618	SECONDARY RPR DURA CSF LEAK FREE TISSUE GRAFT		Not Cov	No	Not Cov	No		No	No
61619	SEC RPR DURA CSF LEAK LOCAL REGIONALIZED FLAP		Not Cov	No	Not Cov	No		No	No
61623	EVASC TEMP BALLOON ARTL OCCLUSION HEAD NECK		No	No	Not Cov	No		No	No
61624	TCAT PERMANENT OCCLUSION EMBOLIZATION PRQ CNS		Not Cov	No	Not Cov	No		No	No
61626	TCAT PERMANT OCCLUSION EMBOLIZATION PRQ NON-CNS		No	No	Not Cov	No		No	No
61630	BALLOON ANGIOPLASTY INTRACRANIAL PERCUTANEOUS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
61635	TCAT PLMT IV STENT ICRA W BALO ANGIOP IF PFRMD		Not Cov	Not Cov	Not Cov	Not Cov		No	No
61640	BALLOON DILAT INTRACRANIAL VASOSPASM PRQ INITIAL		No	No	Not Cov	No		Not Cov	No
61641	BALLOON DILAT INCRNL VASOSPSM PRQ EA VESSEL		No	No	Not Cov	No		Not Cov	No
61642	BALLOON DILAT INCRNL VASOSPSM PRQ EA VESSEL		No	No	Not Cov	No		Not Cov	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
61645	PERQ ART TRLUML M-THROMBEC AND NFS INTRACRANIAL		No	No	Not Cov	No		No	No
61650	EVASC INTRACRANIAL PROLNG ADMN RX AGENT ART 1ST		No	No	Not Cov	No		No	No
61651	EVASC INTRACRANIAL PROLNG ADMN RX AGENT ART ADDL		Not Cov	No	Not Cov	No		No	No
61680	INTRACRANIAL ARVEN MALFRMJ SUPRATENTRL SMPL		Not Cov	No	Not Cov	No		No	No
61682	INTRACRANIAL ARVEN MALFRMJ SUPRATENTRL CMPL		Not Cov	No	Not Cov	No		No	No
61684	INTRACRANIAL ARVEN MALFRMJ INFRATENTRL SMPL		Not Cov	No	Not Cov	No		No	No
61686	INTRACRANIAL ARVEN MALFRMJ INFRATENTRL CMPL		Not Cov	No	Not Cov	No		No	No
61690	INTRACRANIAL ARVEN MALFRMJ DURAL SMPL		Not Cov	No	Not Cov	No		No	No
61692	INTRACRANIAL ARVEN MALFRMJ DURAL CMPL		Not Cov	No	Not Cov	No		No	No
61697	COMPLX INTRACRANIAL ARYSM CAROTID CIRCULATION		Not Cov	No	Not Cov	No		No	No
61698	CPLX INTRACRANIAL ARYSM VERTEBROBASILAR CRCJ		Not Cov	No	Not Cov	No		No	No
61700	SIMPLE INTRACRANIAL ARYSM CAROTID CIRCULATION		Not Cov	No	Not Cov	No		No	No
61702	SIMPLE INTRACRANIAL ARYSM VERTEBROBASILAR CRCJ		Not Cov	No	Not Cov	No		No	No
61703	ICRA CRV APPL OCCLUDING CLAMP CRV CRTD ART		Not Cov	No	Not Cov	No		No	No
61705	ARYSM VASC MALFRMJ CRTD-OCCLUSION CRTD ART		Not Cov	No	Not Cov	No		No	No
61708	ARYSM VASC MALFRMJ ICRA ELECTROTHROMBOSIS		Not Cov	No	Not Cov	No		No	No
61710	ARYSM VASC MALFRMJ IA EMBOLIZATION		Not Cov	No	Not Cov	No		No	No
61711	ANAST ARTL EXTRACRANIAL-INTRACRANIAL ARTERIES		Not Cov	No	Not Cov	No		No	No
61720	CRTJ LES STRTCTC BURR GLOBUS PALLIDUS THALAMUS		No	No	Not Cov	No		No	No
61735	CRTJ LES STRTCTC BURR SUBCORTICAL STRUX OTH THN		Not Cov	No	Not Cov	No		No	No
61750	STEREOTACTIC BX ASPIR EXC BURR INTRACRANIAL LES		Not Cov	No	Not Cov	No		No	No
61751	STRTCTC BX ASPIR EXC BURR ICRA LESION W CT AND I MR		Not Cov	No	Not Cov	No		No	No
61760	STRTCTC IMPLTJ ELTRD CEREBRUM SEIZURE MONITORING		Not Cov	No	Not Cov	No		No	No
61770	STRTCTC LOCLZJ INSJ CATH PRB PLMT RADJ SRC		No	No	No	No		No	No
61781	STRTCTC CPTR ASSTD PX CRANIAL INTRADURAL		No	No	Not Cov	No		No	No
61782	STRTCTC CPTR ASSTD PX EXTRADURAL CRANIAL		No	No	Not Cov	No		No	No
61783	STEREOTACTIC COMPUTER ASSISTED PX SPINAL		No	No	Not Cov	No		No	No
61790	CREATE LESION STRTCTC PRQ NEUROLYTIC GASSERIAN		No	No	No	No		No	No
61791	CREATE LES STRTCTC PRQ NEUROLYTIC TRIGEMINAL TRC		No	No	No	No		No	No
61796	STEREOTACTIC RADIOSURGERY 1 SIMPLE CRANIAL LES		No	No	Not Cov	No		No	No
61797	STRTCTC RADIOSURGERY EA ADDL CRANIAL LES SIMPLE		No	No	Not Cov	No		No	No
61798	STEREOTACTIC RADIOSURGERY 1 COMPLEX CRANIAL LES		Yes	Yes	Not Cov	Yes		No	Yes
61799	STRTCTC RADIOSURGERY EA ADDL CRANIAL LES COMPLEX		No	No	Not Cov	No		No	No
61800	APPL STRTCTC HEADFRAME STEREOTACTIC RADIOSURGERY		No	No	Not Cov	No		No	No
61850	TWIST BURR HOLE IMPLTJ NSTIM ELTRD CORTICAL		No	No	Not Cov	No		No	No
61860	CRNEC CRX IMPLTJ NSTIM ELTRD CERE CORTICAL		Not Cov	No	Not Cov	No		No	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
61863	STRTCTC IMPLTJ NSTIM ELTRD W O RECORD 1ST ARRAY		Not Cov	Yes	Not Cov	No		Yes	Yes
61864	STRTCTC IMPLTJ NSTIM ELTRD W O RECORD EA ARRAY		Not Cov	Yes	Not Cov	No		Yes	Yes
61867	STRTCTC IMPLTJ NSTIM ELTRD W RECORD 1ST ARRAY		Not Cov	Yes	Not Cov	No		Yes	Yes
61868	STRTCTC IMPLTJ NSTIM ELTRD W RECORD EA ARRAY		Not Cov	Yes	Not Cov	No		Yes	Yes
61870	CRNEC IMPLTJ NSTIM ELTRD CEREBELLAR CORTICAL		Not Cov	No	Not Cov	No		No	No
61880	REVJ RMVL INTRACRANIAL NEUROSTIMULATOR ELTRDS		No	No	No	No		No	No
61885	INSJ RPLCMT CRANIAL NEUROSTIM PULSE GENERATOR		Yes	Yes	Yes	No		Yes	Yes
61886	INSJ RPLCMT CRANIAL NEUROSTIM GENER 2 OR GRT ELTRDS		Yes	Yes	Yes	No		Yes	Yes
61888	REVJ RMVL NEUROSTIMULATOR PULSE GENERATOR		No	No	No	No		No	No
62000	ELEVATION DEPRESSED SKULL FX SIMPLE EXTRADURAL		No	No	Not Cov	No		No	No
62005	ELVTN DEPRS SKL FX COMPOUND COMMIND XDRL		Not Cov	No	Not Cov	No		No	No
62010	ELVTN DEPRS SKL FX W RPR DURA AND DBRDMT BRN		Not Cov	No	Not Cov	No		No	No
62100	CRX RPR DURAL CSF LEAK RHINORRHEA OTORRHEA		Not Cov	No	Not Cov	No		No	No
62115	RDCTJ CRANIOMEGALIC SKULL W O GRAFT CRANIOPLASTY		Not Cov	No	Not Cov	No		No	No
62117	RDCTJ CRANIOMEGALIC CRANIO AND RECNSTJ W WO GRAFT		Not Cov	No	Not Cov	No		No	No
62120	RPR ENCEPHALOCELE SKULL VAULT W CRANIOPLASTY		Not Cov	No	Not Cov	No		No	No
62121	CRANIOTOMY FOR ENCEPHALOCELE REPAIR SKULL BASE		Not Cov	No	Not Cov	No		No	No
62140	CRANIOPLASTY SKULL DEFECT UNDER 5 CM DIAMETER		Not Cov	No	Not Cov	No		No	No
62141	CRANIOPLASTY SKULL DEFECT OVER 5 CM DIAMETER		Not Cov	No	Not Cov	No		No	No
62142	RMVL BONE FLAP PROSTHETIC PLATE SKULL		Not Cov	No	Not Cov	No		No	No
62143	RPLCMT BONE FLAP PROSTHETIC PLATE SKULL		Not Cov	No	Not Cov	No		No	No
62145	CRANIOPLASTY SKULL DEFECT REPARATIVE BRAIN SURG		Not Cov	No	Not Cov	No		No	No
62146	CRANIOPLASTY W AUTOGRAFT UNDER 5 CM DIAMETER		Not Cov	No	Not Cov	No		No	No
62147	CRANIOPLASTY W AUTOGRAFT OVER 5 CM DIAMETER		Not Cov	No	Not Cov	No		No	No
62148	INCISE AND RETRIEVAL SUBQ CRANIOPLASTY BONE GRAFT		Not Cov	No	Not Cov	No		No	No
62160	NUNDSC ICRA PLMT RPLCMT VENTR CATH SHUNT SYS		No	No	Not Cov	No		No	No
62161	NUNDSC ICRA DSJ ADS FENESTRATION SEPTUM CSTS		Not Cov	No	Not Cov	No		No	No
62162	NUNDSC ICRA FENESTEXC CYST W VENTRIC CATH DRG		Not Cov	No	Not Cov	No		No	No
62163	NEUROENDOSCOPY ICRA W RETRIEVAL FOREIGN BODY		Not Cov	No	Not Cov	No		No	No
62164	NEUROENDOSCOPY ICRA W RETRIEVAL FOREIGN BODY		Not Cov	No	Not Cov	No		No	No
62165	NUNDSC ICRA EXC PITUITRY TUM TRNSNSL SPHENOID		Not Cov	No	Not Cov	No		No	No
62180	VENTRICULOCISTERNOSTOMY		Not Cov	No	Not Cov	No		No	No
62190	CRTJ SHUNT SARACH SDRL-ATR-JUG-AUR		Not Cov	No	Not Cov	No		No	No
62192	CRTJ SHUNT SARACH SDRL-PRTL-PLEURAL OTH		Not Cov	No	Not Cov	No		No	No
62194	RPLCMT IRRG SUBARACHNOID SUBDURAL CATHETER		No	No	No	No		No	No
62200	VENTRICULOCISTERNOSTOMY 3RD VENTRICLE		Not Cov	No	Not Cov	No		No	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
62201	VENTRICULOCISTERNOSTOMY 3RD VNTRC NEURONDSC		Not Cov	No	Not Cov	No		No	No
62220	CRTJ SHUNT VENTRICULO-ATR-JUG-AUR		Not Cov	No	Not Cov	No		No	No
62223	CRTJ SHUNT VENTRICULO-PERITNEAL-PLEURAL TERMINUS		Not Cov	No	Not Cov	No		No	No
62225	RPLCMT IRRIGATION VENTRICULAR CATHETER		No	No	No	No		No	No
62230	RPLCMT REVJ CSF SHUNT VALVE CATH SHUNT SYS		No	No	No	No		No	No
62252	REPRGRMG PROGRAMMABLE CEREBROSPINAL SHUNT		No	No	Not Cov	No		No	No
62256	RMVL COMPL CSF SHUNT SYSTEM W O RPLCMT SHUNT		Not Cov	No	Not Cov	No		No	No
62258	RMVL COMPLETE CSF SHUNT SYSTEM W RPLCMT SHUNT		Not Cov	No	Not Cov	No		No	No
62263	PRQ LYSIS EPIDURAL ADHESIONS MULT SESS 2 OR GRT DAYS		Yes	Yes	Yes	Yes		Yes	Yes
62264	PRQ LYSIS EPIDURAL ADHESIONS MULT SESSIONS 1 DAY		Yes	Yes	Yes	Yes		Yes	Yes
62267	PRQ ASPIR PULPOSUS INTERVERTEBRAL DISC PVRT TISS		No	No	No	No		No	No
62268	PERCUTANEOUS ASPIRATION SPINAL CORD CYST SYRINX		No	No	No	No		No	No
62269	BIOPSY SPINAL CORD PERCUTANEOUS NEEDLE		No	No	No	No		No	No
62270	SPINAL PUNCTURE LUMBAR DIAGNOSTIC		No	No	No	No		No	No
62272	SPINAL PUNCTURE THER DRAIN CEREBROSPINAL FLUID		No	No	No	No		No	No
62273	INJECTION EPIDURAL BLOOD CLOT PATCH		No	No	No	No		No	No
62280	INJX INFUSION NEUROLYTIC SUBSTANCE SUBARACHNOID		No	No	No	No		No	No
62281	INJX INFUS NEUROLYT SUBST EPIDURAL CERV THORACIC		No	No	No	No		No	No
62282	INJX INFUS NEUROLYT SBST EPIDURAL LUMBAR SACRAL		No	No	No	No		No	No
62284	INJECTION PROCEDURE MYELOGRAPHY CT LUMBAR		No	No	Not Cov	No		No	No
62287	DCMPRN PERQ NUCLEUS PULPOSUS 1 OR GRT LEVELS LUMBAR		No	No	No	No		No	No
62290	INJECTION PX DISCOGRAPHY EACH LEVEL LUMBAR		No	No	Not Cov	No		No	No
62291	INJECTION PX DISCOGRPHY EA LVL CERVICAL THORACIC		No	No	Not Cov	No		No	No
62292	INJECTION PX CHEMONUCLEOLYSIS 1 MLT LUMBAR		Not Cov	Not Cov	Not Cov	Not Cov		No	No
62294	NJX ARTERIAL OCCLUSION ARVEN MALFRMJ SPINAL		No	No	No	No		No	No
62302	MYELOGRAPHY VIA LUMBAR INJECTION RS AND I CERVICAL		No	No	Not Cov	No		No	No
62303	MYELOGRAPHY VIA LUMBAR INJECTION RS AND I THORACIC		No	No	Not Cov	No		No	No
62304	MYELOGRAPHY VIA LUMBAR INJECT RS AND I LUMBOSACRAL		No	No	Not Cov	No		No	No
62305	MYELOGRAPHY VIA LUMBAR INJECTION RS AND I 2 PLUS REGIONS		No	No	Not Cov	No		No	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
62320	NJX DX THER SBST INTRLMNR CRV THRC W O IMG GDN		Yes	Yes	Yes	Yes		Yes	Yes
62321	NJX DX THER SBST INTRLMNR CRV THRC W IMG GDN		Yes	Yes	Yes	Yes		Yes	Yes
62322	NJX DX THER SBST INTRLMNR LMBR SAC W O IMG GDN		Yes	Yes	Yes	Yes		Yes	Yes
62323	NJX DX THER SBST INTRLMNR LMBR SAC W IMG GDN		Yes	Yes	Yes	Yes		Yes	Yes
62324	NJX DX THER SBST INTRLMNR CRV THRC W O IMG GDN		Yes	Yes	Yes	No		Yes	Yes
62325	NJX DX THER SBST INTRLMNR CRV THRC W IMG GDN		Yes	Yes	Yes	No		Yes	Yes
62326	NJX DX THER SBST INTRLMNR LMBR SAC W O IMG GDN		Yes	Yes	Yes	No		Yes	Yes
62327	NJX DX THER SBST INTRLMNR LMBR SAC W IMG GDN		Yes	Yes	Yes	No		Yes	Yes
62350	IMPLTJ REVJ RPSG ITHCL EDRL CATH PMP W O LAM		Yes	Yes	Yes	Yes		Yes	Yes
62351	IMPLTJ REVJ RPSG ITHCL EDRL CATH W LAM		Yes	Yes	Not Cov	Yes		Yes	Yes
62355	RMVL PREVIOUSLY IMPLTED ITHCL EDRL CATH		No	No	No	No		No	No
62360	IMPLTJ RPLCMT ITHCL EDRL DRUG NFS SUBQ RSVR		Yes	Yes	Yes	Yes		Yes	Yes
62361	IMPLTJ RPLCMT FS NON-PRGRBL PUMP		Yes	Yes	Yes	Yes		Yes	Yes
62362	IMPLTJ RPLCMT ITHCL EDRL DRUG NFS PRGRBL PUMP		Yes	Yes	Yes	Yes		Yes	Yes
62365	RMVL SUBQ RSVR PUMP INTRATHECAL EPIDURAL INFUS		No	No	No	No		No	No
62367	ELECT ANLYS IMPLT ITHCL EDRL PMP W O REPRG REFIL		Yes	Yes	Not Cov	Yes		Yes	Yes
62368	ELECT ANALYS IMPLT ITHCL EDRL PUMP W REPRGRMG		Yes	Yes	Not Cov	Yes		Yes	Yes
62369	ELECT ANLYS IMPLT ITHCL EDRL PMP W REPRG AND REFIL		Yes	Yes	Not Cov	No		Yes	Yes
62370	ELEC ANLYS IMPLT ITHCL EDRL PMP W REPR PHYS QHP		Yes	Yes	Not Cov	No		Yes	Yes
62380	NDSC DCMPRN SPINAL CORD 1 W LAMOT NTRSPC LUMBAR		Yes	Yes	Not Cov	No		Yes	Yes
63001	LAM W O FACETEC FORAMOT DSKC 1 2 VRT SEG CRV		Yes	Yes	Yes	No		Yes	Yes
63003	LAMINECTOMY W O FFD 1 2 VERT SEG THORACIC		Yes	Yes	Yes	No		Yes	Yes
63005	LAMINECTOMY W O FFD 1 2 VERT SEG LUMBAR		Yes	Yes	Yes	No		Yes	Yes
63011	LAMINECTOMY W O FFD 1 2 VERT SEG SACRAL		Yes	Yes	Not Cov	No		Yes	Yes
63012	LAMINECTOMY W RMVL ABNORMAL FACETS LUMBAR		Yes	Yes	Not Cov	No		Yes	Yes
63015	LAMINECTOMY W O FFD OVER 2 VERT SEG CERVICAL		Yes	Yes	Not Cov	No		Yes	Yes
63016	LAMINECTOMY W O FFD OVER 2 VERT SEG THORACIC		Yes	Yes	Not Cov	No		Yes	Yes
63017	LAMINECTOMY W O FFD OVER 2 VERT SEG LUMBAR		Yes	Yes	Not Cov	No		Yes	Yes
63020	LAMNOTMY INCL W DCMPRSN NRV ROOT 1 INTRSPC CERV		Yes	Yes	Yes	No		Yes	Yes
63030	LAMNOTMY INCL W DCMPRSN NRV ROOT 1 INTRSPC LUMBR		Yes	Yes	Yes	No		Yes	Yes
63035	LAMNOTMY W DCMPRSN NRV EACH ADDL CRVCL LMBR		Yes	Yes	Not Cov	No		Yes	Yes
63040	LAMOT PRTL FFD EXC DISC REEXPL 1 NTRSPC CERVICAL		Yes	Yes	Not Cov	No		Yes	Yes
63042	LAMOT PRTL FFD EXC DISC REEXPL 1 NTRSPC LUMBAR		Yes	Yes	Yes	No		Yes	Yes
63043	LAMOT PRTL FFD EXC DISC REEXPL 1 NTRSPC EA CRV		Yes	Yes	Not Cov	No		Yes	Yes
63044	LAMOT W PRTL FFD HRNA8 REEXPL 1 NTRSPC EA LMBR		Yes	Yes	Not Cov	No		Yes	Yes
63045	LAM FACETECTOMY AND FORAMOTOMY 1 SEGMENT CERVICAL		Yes	Yes	Yes	No		Yes	Yes

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DOS Effective 10/1/19; Posted 10/30/19

All Inpatient services require prior authorization

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Code	Code Description	Comments	Apple Health & IMC Medical				IMC / BHSO (Mental Health covered svcs)	Medicare	Market Place
			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
63046	LAM FACETECTOMY AND FORAMOTOMY 1 SEGMENT THORACIC		Yes	Yes	Yes	No		Yes	Yes
63047	LAM FACETECTOMY AND FORAMOTOMY 1 SEGMENT LUMBAR		Yes	Yes	Yes	No		Yes	Yes
63048	LAM FACETECTOMY AND FORAMTOMY 1 SGM EA CRV THRC LMBR		Yes	Yes	Not Cov	No		Yes	Yes
63050	LAMOP CERVICAL W DCMPRN SPI CORD 2 OR GRT VERT SEG		Yes	Yes	Not Cov	No		Yes	Yes
63051	LAMOPLASTY CERVICAL DCMPRN CORD 2 OR GRT SEG RCNSTJ		Yes	Yes	Not Cov	No		Yes	Yes
63055	TRANSPEDICULAR DCMPRN SPINAL CORD 1 SEG THORACIC		Yes	Yes	Yes	No		Yes	Yes
63056	TRANSPEDICULAR DCMPRN SPINAL CORD 1 SEG LUMBAR		Yes	Yes	Yes	No		Yes	Yes
63057	TRANSPEDICULAR DCMPRN 1 SEG EA THORACIC LUMBAR		Yes	Yes	Not Cov	No		Yes	Yes
63064	COSTOVERTEBRAL DCMPRN SPINAL CORD THORACIC 1 SEG		Yes	Yes	Not Cov	No		Yes	Yes
63066	COSTOVERTEBRAL DCMPRN SPINE CORD THORACIC EA SEG		Yes	Yes	Not Cov	No		Yes	Yes
63075	DISCECTOMY ANT DCMPRN CORD CERVICAL 1 NTRSPC		Yes	Yes	Not Cov	No		Yes	Yes
63076	DISCECTOMY ANT DCMPRN CORD CERVICAL EA NTRSPC		Yes	Yes	Not Cov	No		Yes	Yes
63077	DISCECTOMY ANT DCMPRN CORD THORACIC 1 NTRSPC		Not Cov	Yes	Not Cov	No		Yes	Yes
63078	DISCECTOMY ANT DCMPRN CORD THORACIC EA NTRSPC		Not Cov	Yes	Not Cov	No		Yes	Yes
63081	VERTEBRAL CORPECTOMY ANT DCMPRN CERVICAL 1 SEG		Not Cov	Yes	Not Cov	No		Yes	Yes
63082	VERTEBRAL CORPECTOMY DCMPRN CERVICAL EA SEG		Not Cov	Yes	Not Cov	No		Yes	Yes
63085	VERTEBRAL CORPECTOMY DCMPRN CORD THORACIC 1 SEG		Not Cov	Yes	Not Cov	No		Yes	Yes
63086	VERTEBRAL CORPECTOMY DCMPRN CORD THORACIC EA SEG		Not Cov	Yes	Not Cov	No		Yes	Yes
63087	VCRPEC THORACOLMBR DCMPRN LWR THRC LMBR 1 SEG		Not Cov	Yes	Not Cov	No		Yes	Yes
63088	VCRPEC THORACOLMBR DCMPRN LWR THRC LMBR EA SEG		Not Cov	Yes	Not Cov	No		Yes	Yes
63090	VCRPEC TRANSPRTL RPR DCMPRN THRC LMBR SAC 1 SEG		Not Cov	Yes	Not Cov	No		Yes	Yes
63091	VCRPEC TRANSPRTL RPR DCMPRN THRC LMBR SAC EA SEG		Not Cov	Yes	Not Cov	No		Yes	Yes
63101	VERTEB CORPECT LAT XTRCAVITARY DCMPRN THRC 1 SEG		Not Cov	Yes	Not Cov	No		Yes	Yes
63102	VERTEB CORPECT LAT XTRCAVITARY DCMPRN LMBR 1 SEG		Not Cov	Yes	Not Cov	No		Yes	Yes
63103	VCRPEC LAT XTRCAVITARY DCMPRN THRC LMBR EA SEG		Not Cov	Yes	Not Cov	No		Yes	Yes
63170	LAM W MYELOTOMY CERVICAL THORACIC THORACOLUMBAR		Not Cov	No	Not Cov	No		No	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
63172	LAM W DRG INTRMEDULLARY CYST SYRINX SUBARACHNOID		Not Cov	No	Not Cov	No		No	No
63173	LAM W DRG INTRMEDULRY CYST SYRINX PRTL PLEURAL		Not Cov	No	Not Cov	No		No	No
63180	LAM AND SCTJ DENTATE LIG W WO DURAL GRF CRV 1 2 SEG		Not Cov	No	Not Cov	No		No	No
63182	LAM AND SCTJ DENTATE LIG W WO DURAL GRF CRV OVER 2 SEG		Not Cov	No	Not Cov	No		No	No
63185	LAMINECTOMY W RHIZOTOMY 1 2 SEGMENTS		Not Cov	No	Not Cov	No		No	No
63190	LAMINECTOMY W RHIZOTOMY OVER 2 SEGMENTS		Not Cov	No	Not Cov	No		No	No
63191	LAMINECTOMY W SECTION SPINAL ACCESSORY NERVE		No	No	Not Cov	No		No	No
63194	LAM CORDOTOMY SCTJ 1 SPINOTHALMIC TRACT CERVICAL		Not Cov	No	Not Cov	No		No	No
63195	LAM CORDOTOMY SCTJ 1 SPINOTHALMIC TRACT THORACIC		Not Cov	No	Not Cov	No		No	No
63196	LAM CORDOTOMY SCTJ BOTH SPINOTHALMIC TRACTS CRV		Not Cov	No	Not Cov	No		No	No
63197	LAM CORDOTOMY SCTJ BOTH SPINOTHALMIC TRACT THRC		Not Cov	No	Not Cov	No		No	No
63198	LAM CORDOTOMY SCTJ BOTH TRACTS 2 STAGES CERVICAL		Not Cov	No	Not Cov	No		No	No
63199	LAM CORDOTOMY SCTJ BOTH TRACTS 2 STAGES THORACIC		Not Cov	No	Not Cov	No		No	No
63200	LAMINECTOMY RELEASE TETHERED SPINAL CORD LUMBAR		Not Cov	No	Not Cov	No		No	No
63250	LAM EXC OCCLUSION AVM SPINAL CORD CERVICAL		Not Cov	No	Not Cov	No		No	No
63251	LAM EXC OCCLUSION AVM SPINAL CORD THORACIC		Not Cov	No	Not Cov	No		No	No
63252	LAM EXC OCCLUSION AVM SPI CORD THORACOLUMBAR		Not Cov	No	Not Cov	No		No	No
63265	LAM EXC EVAC ISPI LES OTH THN NEO XDRL CERVICAL		Not Cov	No	Not Cov	No		No	No
63266	LAM EXC EVAC ISPI LES OTH THN NEO XDRL THORACIC		Not Cov	No	Not Cov	No		No	No
63267	LAM EXC EVAC ISPI LESION OTH THN NEO XDRL LUMBAR		No	No	Not Cov	No		No	No
63268	LAM EXC EVAC ISPI LES OTH THN NEO XDRL SACRAL		Not Cov	No	Not Cov	No		No	No
63270	LAM EXC ISPI LES OTH THN NEO IDRL CERVICAL		Not Cov	No	Not Cov	No		No	No
63271	LAM EXC ISPI LES OTH THN NEO IDRL THORACIC		Not Cov	No	Not Cov	No		No	No
63272	LAM EXC ISPI LES OTH THN NEO IDRL LUMBAR		Not Cov	No	Not Cov	No		No	No
63273	LAM EXC ISPI LES OTH THN NEO IDRL SACRAL		Not Cov	No	Not Cov	No		No	No
63275	LAMINECTOMY BX EXC ISPI NEO XDRL CERVICAL		Not Cov	No	Not Cov	No		No	No
63276	LAMINECTOMY BX EXC ISPI NEO XDRL THORACIC		Not Cov	No	Not Cov	No		No	No
63277	LAMINECTOMY BX EXC ISPI NEO XDRL LUMBAR		Not Cov	No	Not Cov	No		No	No
63278	LAMINECTOMY BX EXC ISPI NEO XDRL SACRAL		Not Cov	No	Not Cov	No		No	No
63280	LAM BX EXC ISPI NEO IDRL XMED CERVICAL		Not Cov	No	Not Cov	No		No	No
63281	LAM BX EXC ISPI NEO IDRL XMED THORACIC		Not Cov	No	Not Cov	No		No	No
63282	LAM BX EXC ISPI NEO IDRL XMED LUMBAR		Not Cov	No	Not Cov	No		No	No
63283	LAM BX EXC ISPI NEO IDRL SACRAL		Not Cov	No	Not Cov	No		No	No
63285	LAM BX EXC ISPI NEO IDRL IMED CERVICAL		Not Cov	No	Not Cov	No		No	No
63286	LAM BX EXC ISPI NEO IDRL IMED THORACIC		Not Cov	No	Not Cov	No		No	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
63287	LAM BX EXC ISPI NEO IDRL IMED THORACOLMBR		Not Cov	No	Not Cov	No	No	No	
63290	LAM BX EXC ISPI NEO XDRL-IDRL LES ANY LVL		Not Cov	No	Not Cov	No	No	No	
63295	OSTPL RCNSTJ DORSAL SPI ELMNTS FLWG ISPI PX		Not Cov	No	Not Cov	No	No	No	
63300	VCRPEC LES 1 SGM XDRL CERVICAL		Not Cov	No	Not Cov	No	No	No	
63301	VCRPEC LES 1 SGM XDRL THORACIC TTHRC		Not Cov	No	Not Cov	No	No	No	
63302	VCRPEC LES 1 SEG XDRL THRC THORACOLMBR		Not Cov	No	Not Cov	No	No	No	
63303	VCRPEC LES 1 SEG XDRL LMBR SAC TRANSPRTL RPR		Not Cov	No	Not Cov	No	No	No	
63304	VERTEBRAL CORPECTOMY EXC LES 1 SEG IDRL CERVICAL		Not Cov	No	Not Cov	No	No	No	
63305	VERTEBRAL CORPECTOMY LES 1 SEG IDRL THRC TTHRC		Not Cov	No	Not Cov	No	No	No	
63306	VERTEBRAL CORPECT LES 1 SEG IDRL THRC THORACOLMBR		Not Cov	No	Not Cov	No	No	No	
63307	VCRPEC LES 1 SEG IDRL LMBR SAC TRANSPRTL RPR		Not Cov	No	Not Cov	No	No	No	
63308	VERTEBRAL CORPECTOMY EXC INDRL LES EACH SEG		Not Cov	No	Not Cov	No	No	No	
63600	CREATION LES SPINAL CORD STEREOTACTIC METHOD PRQ		No	No	No	No	No	No	
63610	STRCTC STIMJ SPI CORD PRQ SPX N FLWD OTH SURG		No	No	No	No	No	No	
63620	STEREOTACTIC RADIOSURGERY 1 SPINAL LESION		Yes	Yes	Not Cov	Yes	No	Yes	
63621	STEREOTACTIC RADIOSURGERY EA ADDL SPINAL LESION		No	No	Not Cov	No	No	No	
63650	PRQ IMPLTJ NSTIM ELECTRODE ARRAY EPIDURAL		Yes	Yes	Yes	Yes	Yes	Yes	
63655	LAM IMPLTJ NSTIM ELTRDS PLATE PADDLE EDRL		Yes	Yes	Yes	Yes	Yes	Yes	
63661	RMVL SPINAL NSTIM ELTRD PRQ ARRAY INCL FLUOR		Yes	Yes	Yes	Yes	Yes	Yes	
63662	RMVL SPINAL NSTIM ELTRD PLATE PADDLE INCL FLUOR		Yes	Yes	Yes	Yes	Yes	Yes	
63663	REVJ INCL RPLCMT NSTIM ELTRD PRQ RA INCL FLUOR		Yes	Yes	Not Cov	Yes	Yes	Yes	
63664	REVJ INCL RPLCMT NSTIM ELTRD PLT PDLE INCL FLUOR		Yes	Yes	Not Cov	Yes	Yes	Yes	
63685	INSJ RPLCMT SPI NPGR DIR INDUXIVE COUPLING		Yes	Yes	Yes	Yes	Yes	Yes	
63688	REVJ RMVL IMPLANTED SPINAL NEUROSTIM GENERATOR		Yes	Yes	Yes	Yes	Yes	Yes	
63700	REPAIR MENINGOCELE UNDER 5 CM DIAMETER		Not Cov	No	Not Cov	No	No	No	
63702	REPAIR MENINGOCELE OVER 5 CM DIAMETER		Not Cov	No	Not Cov	No	No	No	
63704	REPAIR MYELOMENINGOCELE UNDER 5 CM DIAMETER		Not Cov	No	Not Cov	No	No	No	
63706	REPAIR MYELOMENINGOCELE OVER 5 CM DIAMETER		Not Cov	No	Not Cov	No	No	No	
63707	RPR DURAL CEREBROSPINAL FLUID LEAK X REQ LAM		No	No	Not Cov	No	No	No	
63709	RPR DURAL CSF LEAK PSEUDOMENINGOCELE W LAM		Not Cov	No	Not Cov	No	No	No	
63710	DURAL GRAFT SPINAL		Not Cov	No	Not Cov	No	No	No	
63740	CRTJ SHUNT LMBR SARACH-PRTL-PLEURAL OTH W LAM		Not Cov	No	Not Cov	No	No	No	
63741	CRTJ SHUNT LMBR SARACH-PRTL-PLEURAL PRQ X LAM		No	No	Not Cov	No	No	No	
63744	RPLCMT IRRIGATION REVJ LUMBOSARACH SHUNT		No	No	No	No	No	No	
63746	RMVL ENTIRE LUMBOSARACH SHUNT SYS W O RPLCMT		No	No	No	No	No	No	
64400	NJX ANES TRIGEMINAL NRV ANY DIV BRANCH		No	No	Not Cov	No	No	No	
64402	INJECTION ANESTHETIC AGENT FACIAL NERVE		No	No	Not Cov	No	No	No	
64405	INJECTION ANESTHETIC AGENT GREATER OCCIPITAL NRV		No	No	Not Cov	No	No	No	
64408	INJECTION ANESTHETIC AGENT VAGUS NERVE		No	No	Not Cov	No	No	No	
64410	INJECTION ANESTHETIC AGENT PHRENIC NERVE		No	No	No	No	No	No	

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			Outpatient		ASC	Office Setting			
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64413	INJECTION ANESTHETIC AGENT CERVICAL PLEXUS		No	No	Not Cov	No		No	No
64415	SINGLE NERVE BLOCK INJECTION ARM NERVE		No	No	No	No		No	No
64416	INJECTION ANES BRACHIAL PLEXUS CONT NFS CATH		No	No	No	No		No	No
64417	INJECTION ANESTHETIC AGENT AXILLARY NERVE		No	No	No	No		No	No
64418	INJECTION ANESTHETIC AGENT SUPRASCAPULAR NERVE		No	No	Not Cov	No		No	No
64420	INJECTION ANESTHETIC AGENT 1 INTERCOSTAL NERVE		No	No	No	No		No	No
64421	MULTIPLE NERVE BLOCK INJECTIONS RIB NERVES		No	No	No	No		No	No
64425	INJECTION ANES ILIOINGUINAL ILIOHYPOGASTRIC NRVS		No	No	Not Cov	No		No	No
64430	INJECTION ANESTHETIC AGENT PUDENDAL NERVE		No	No	No	No		No	No
64435	INJECTION ANESTHETIC PARACERVICAL UTERINE NERVE		No	No	Not Cov	No		No	No
64445	INJECTION ANESTHETIC AGENT SCIATIC NRV SINGLE		No	No	Not Cov	No		No	No
64446	INJECTION ANES SCIATIC NERVE CONT INFUSION CATH		No	No	No	No		No	No
64447	INJECTION ANESTHETIC AGENT FEMORAL NERVE SINGLE		No	No	Not Cov	No		No	No
64448	INJECTION ANES FEMORAL NERVE CONT INFUSION CATH		No	No	No	No		No	No
64449	INJECTION ANES LUMBAR PLEXUS POST CONT NFS CATH		No	No	No	No		No	No
64450	INJECTION ANES OTHER PERIPHERAL NERVE BRANCH		No	No	Not Cov	No		Yes	No
64455	NJX ANES AND STERIOD PLANTAR COMMON DIGITAL NERVE		No	No	Not Cov	No		No	No
64461	PVB THORACIC SINGLE INJECTION SITE W IMG GID	No PA w DX G89.18	Not Cov	Yes	Not Cov	Yes		No	Yes
64462	PVB THORACIC SECOND AND ADDL INJ SITE W IMG GID	No PA w DX G89.18	Not Cov	Yes	Not Cov	Yes		No	Yes
64463	PVB THORACIC CONT CATHETER INFUSION W IMG GID	No PA w DX G89.18	Not Cov	Yes	Not Cov	Yes		No	Yes
64479	NJX ANES AND STRD W IMG TFRML EDRL CRV THRC 1 LVL		Yes	Yes	Yes	Yes		Yes	Yes
64480	NJX ANES AND STRD W IMG TFRML EDRL CRV THRC EA LV		Yes	Yes	Yes	Yes		Yes	Yes
64483	NJX ANES AND STRD W IMG TFRML EDRL LMBR SAC 1 LVL		Yes	Yes	Yes	Yes		Yes	Yes
64484	NJX ANES AND STRD W IMG TFRML EDRL LMBR SAC EA LV		Yes	Yes	Yes	Yes		Yes	Yes
64486	TAP BLOCK UNILATERAL BY INJECTION(S)	No PA w DX G89.18	Yes	Yes	Not Cov	Yes		Yes	Yes
64487	TAP BLOCK UNILATERAL BY CONTINUOUS INFUSION(S)	No PA w DX G89.18	Yes	Yes	Not Cov	Yes		Yes	Yes
64488	TAP BLOCK BILATERAL BY INJECTION(S)	No PA w DX G89.18	Yes	Yes	Not Cov	Yes		Yes	Yes
64489	TAP BLOCK BILATERAL BY CONTINUOUS INFUSION(S)	No PA w DX G89.18	Yes	Yes	Not Cov	Yes		Yes	Yes
64490	NJX DX THER AGT PVRT FACET JT CRV THRC 1 LEVEL		Yes	Yes	Yes	Yes		Yes	Yes
64491	NJX DX THER AGT PVRT FACET JT CRV THRC 2ND LEVEL		Yes	Yes	Yes	Yes		Yes	Yes
64492	NJX DX THER AGT PVRT FACET JT CRV THRC 3 PLUS LEVEL		Yes	Yes	Yes	Yes		Yes	Yes
64493	NJX DX THER AGT PVRT FACET JT LMBR SAC 1 LEVEL		Yes	Yes	Yes	Yes		Yes	Yes
64494	NJX DX THER AGT PVRT FACET JT LMBR SAC 2ND LEVEL		Yes	Yes	Yes	Yes		Yes	Yes

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			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
64495	NJX DX THER AGT PVRT FACET JT LMBR SAC 3 PLUS LEVEL		Yes	Yes	Yes	Yes		Yes	Yes
64505	INJECTION ANES AGENT SPHENOPALATINE GANGLION		No	No	Not Cov	No		No	No
64510	NJX ANES STELLATE GANGLION CRV SYMPATHETIC		No	No	No	No		No	No
64517	INJECTION ANES SUPERIOR HYPOGASTRIC PLEXUS		No	No	No	No		No	No
64520	INJECTION ANES LMBR THRC PARAVERTBRL SYMPATHETIC		No	No	No	No		No	No
64530	INJX ANES CELIAC PLEXUS W WO RADIOLOGIC MONITRNG		No	No	No	No		No	No
64553	PRQ IMPLTJ NEUROSTIMULATOR ELTRD CRANIAL NERVE		Yes	Yes	Yes	No		Yes	Yes
64555	PRQ IMPLTJ NEUROSTIMULATOR ELTRD PERIPHERAL NRV		No	No	No	No		No	No
64561	PRQ IMPLTJ NEUROSTIM ELTRD SACRAL NRVE W IMAGING		No	No	No	No		No	No
64566	POST TIB NEUROSTIMULATION PRQ NEEDLE ELECTRODE		Not Cov	Not Cov	Not Cov	Not Cov		No	No
64568	INC IMPLTJ CRNL NRV NSTIM ELTRDS AND PULSE GENER		Yes	Yes	Yes	No		Yes	Yes
64569	REVISION REPLMT NEUROSTIMLATOR ELTRD CRANIAL NRV		Yes	Yes	Yes	No		Yes	Yes
64570	REMOVAL CRNL NRV NSTIM ELTRDS AND PULSE GENERATO		Yes	Yes	Yes	No		Yes	Yes
64575	INC IMPLTJ PERIPH NERVE NEUROSTIMULATOR ELTRD		No	No	No	No		No	No
64580	INC IMPLTJ NSTIM ELTRD NEUROMUSCULAR		No	No	No	No		No	No
64581	INC IMPLTJ NEUROSTIMULATOR ELTRD SACRAL NERVE		No	No	No	No		No	No
64585	REVJ RMVL PERIPHERAL NEUROSTIMULATOR ELECTRODE		No	No	No	No		No	No
64590	INSERTION RPLCMT PERIPHERAL GASTRIC NPGR		Yes	Yes	Yes	No		Yes	Yes
64595	REVISION RMVL PERIPHERAL GASTRIC NPGR		Yes	Yes	Yes	No		Yes	Yes
64600	DSTRJ TRIGEMINAL NRV SUPRAORB INFRAORB BRANCH		Yes	Yes	Yes	Yes		Yes	Yes
64605	DSTRJ NEUROLYTIC TRIGEMINAL NRV 2 3 DIV BRANCH		No	No	No	No		No	No
64610	DSTRJ NEURLYTIC TRIGEM NRV 2 3 DIV RADIO MONITOR		No	No	No	No		No	No
64611	CHEMODENERV PAROTID AND SUBMANDIBL SALIVARY GLNDS		No	No	Not Cov	No		No	No
64612	CHEMODNRVTJ MUSC MUSC INNERVATED FACIAL NRV UNIL		No	No	No	No		No	No
64615	CHEMODERVATE FACIAL TRIGEM CERV MUSC MIGRAINE		No	No	Not Cov	No		No	No
64616	CHEMODENERVATION MUSCLE NECK UNILAT FOR DYSTONIA		No	No	No	No		No	No
64617	CHEMODENERVATION MUSCLE LARYNX UNILAT W EMG		No	No	No	No		No	No
64620	DSTRJ NEUROLYTIC AGENT INTERCOSTAL NERVE		No	No	No	No		No	No
64630	DSTRJ NEUROLYTIC AGENT PUDENDAL NERVE		No	No	No	No		No	No

This prior authorization guide applies to Medicaid, Medicare, and Marketplace.

DOS Effective 10/1/19; Posted 10/30/19

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Code	Code Description	Comments	Apple Health & IMC Medical				IMC / BHSO (Mental Health covered svcs)	Medicare	Market Place
			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
64632	DSTRJ NEUROLYTIC PLANTAR COMMON DIGITAL NERVE		No	No	Not Cov	No		No	No
64633	DSTR NROLYTC AGNT PARVERTEB FCT SNGL CRVCL THORA		Yes	Yes	Yes	Yes		Yes	Yes
64634	DSTR NROLYTC AGNT PARVERTEB FCT ADDL CRVCL THORA		Yes	Yes	Yes	Yes		Yes	Yes
64635	DSTR NROLYTC AGNT PARVERTEB FCT SNGL LMBR SACRAL		Yes	Yes	Yes	Yes		Yes	Yes
64636	DSTR NROLYTC AGNT PARVERTEB FCT ADDL LMBR SACRAL		Yes	Yes	Yes	Yes		Yes	Yes
64640	DSTRJ NEUROLYTIC AGENT OTHER PERIPHERAL NERVE		Yes	Yes	Not Cov	Yes		Yes	Yes
64642	CHEMODENERVATION ONE EXTREMITY 1-4 MUSCLE		No	No	No	No		No	No
64643	CHEMODENERVATION 1 EXTREMITY EA ADDL 1-4 MUSCLE		No	No	Not Cov	No		No	No
64644	CHEMODENERVATION 1 EXTREMITY 5 OR MORE MUSCLES		No	No	No	No		No	No
64645	CHEMODENERVATION 1 EXTREMITY EA ADDL 5 OR GRT MUSCLES		No	No	Not Cov	No		No	No
64646	CHEMODENERVATION OF TRUNK MUSCLE 1-5 MUSCLES		No	No	No	No		No	No
64647	CHEMODENERVATION OF TRUNK 6 OR MORE MUSCLES		No	No	No	No		No	No
64650	CHEMODENERVATION ECCRINE GLANDS BOTH AXILLAE		No	No	Not Cov	No		No	No
64653	CHEMODENERVATION ECCRINE GLANDS OTH AREA PER DAY		No	No	Not Cov	No		No	No
64680	DSTRJ NEUROLYTIC W WO RAD MONITOR CELIAC PLEXUS		No	No	No	No		No	No
64681	DSTRJ NULYT W WORAD MNTR SUPRIOR HYPOGSTR PLEXUS		No	No	No	No		No	No
64702	NEUROPLASTY DIGITAL 1 BOTH SAME DIGIT		No	No	No	No		No	No
64704	NEUROPLASTY NERVE HAND FOOT		No	No	No	No		No	No
64708	NEURP MAJOR PRPH NRV ARM LEG OPN OTH THN SPEC		No	No	No	No		No	No
64712	NEURP MAJOR PRPH NRV OPN ARM LEG SCIATIC NRV		No	No	No	No		No	No
64713	NEURP MAJOR PRPH NRV OPN ARM LEG BRACH PLEXUS		No	No	No	No		No	No
64714	NEURP MAJOR PRPH NRV OPN ARM LEG LMBR PLEXUS		No	No	No	No		No	No
64716	NEUROPLASTY AND TRANSPOSITION CRANIAL NERVE		No	No	No	No		No	No
64718	NEUROPLASTY AND TRANSPOSITION ULNAR NERVE ELBOW		No	No	No	No		No	No
64719	NEUROPLASTY AND TRANSPOSITION ULNAR NERVE WRIST		No	No	No	No		No	No
64721	NEUROPLASTY AND TRANSPOS MEDIAN NRV CARPAL TUNNE		No	No	No	No		No	No
64722	DECOMPRESSION UNSPECIFIED NERVE		No	No	No	No		No	No
64726	DECOMPRESSION PLANTAR DIGITAL NERVE		No	No	No	No		No	No
64727	INTERNAL NEUROLYSIS REQ OPERATING MICROSCOPE		No	No	No	No		No	No
64732	TRANSECTION AVULSION SUPRAORBITAL NERVE		No	No	No	No		No	No
64734	TRANSECTION AVULSION INFRAORBITAL NERVE		No	No	No	No		No	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
64736	TRANSECTION AVULSION MENTAL NERVE		No	No	No	No		No	No
64738	TRANSECTION AVULSION INF ALVEOLAR NRV W OSTEO		No	No	No	No		No	No
64740	TRANSECTION AVULSION LINGUAL NERVE		No	No	No	No		No	No
64742	TRANSECTION AVULSION FACIAL NRV DIFFERENT CMPL		No	No	No	No		No	No
64744	TRANSECTION AVULSION GREATER OCCIPITAL NERVE		No	No	No	No		No	No
64746	TRANSECTION AVULSION PHRENIC NERVE		No	No	No	No		No	No
64755	TRANSECTION AVULSION VAGUS NERVES		Not Cov	No	Not Cov	No		No	No
64760	TRANSECTION AVULSION VAGUS NERVE ABDOMINAL		Not Cov	No	Not Cov	No		No	No
64763	TRNSXJ AVLSN OBTURAT NRV XPELV W WO TENOTOMY		No	No	No	No		No	No
64766	TRNSXJ AVLSN OBTURAT NRV INPELV W WO TENOTOMY		No	No	No	No		No	No
64771	TRANSECTION AVULSION OTH CRANIAL NRV XDRL		No	No	No	No		No	No
64772	TRANSECTION AVULSION OTH SPINAL NRV XDRL		No	No	No	No		No	No
64774	EXC NEUROMA CUTAN NRV SURGLY IDENTIFIABLE		No	No	No	No		No	No
64776	EXC NEUROMA DIGITAL NERVE 1 OR BOTH SAME DIGIT		No	No	No	No		No	No
64778	EXCISION NEUROMA DIGITAL NRV EA ADDL DIGIT		No	No	No	No		No	No
64782	EXC NEUROMA HAND FOOT XCP DIGITAL NERVE		No	No	No	No		No	No
64783	EXC NEUROMA HAND FOOT EA NRV XCP SM DGT		No	No	No	No		No	No
64784	EXC NEUROMA MAJOR PERIPHERAL NRV XCP SCIATIC		No	No	No	No		No	No
64786	EXCISION NEUROMA SCIATIC NERVE		No	No	No	No		No	No
64787	IMPLANTATION NERVE END BONE MUSCLE		No	No	No	No		No	No
64788	EXC NEUROFIBROMA NEUROLEMMOMA CUTAN NRV		No	No	No	No		No	No
64790	EXC NEUROFIBROMA NEUROLEMMOMA MAJOR PRPH NRV		No	No	No	No		No	No
64792	EXC NEUROFIBROMA NEUROLEMMOMA EXTNSV		No	No	No	No		No	No
64795	BIOPSY NERVE		No	No	No	No		No	No
64802	SYMPATHECTOMY CERVICAL		No	No	No	No		No	No
64804	SYMPATHECTOMY CERVICOTHORACIC		No	No	Not Cov	No		No	No
64809	SYMPATHECTOMY THORACOLUMBAR		Not Cov	No	Not Cov	No		No	No
64818	SYMPATHECTOMY LUMBAR		No	No	Not Cov	No		No	No
64820	SYMPATHECTOMY DIGITAL ARTERIES EACH DIGIT		No	No	No	No		No	No
64821	SYMPATHECTOMY RADIAL ARTERY		No	No	No	No		No	No
64822	SYMPATHECTOMY ULNAR ARTERY		No	No	No	No		No	No
64823	SYMPATHECTOMY SUPERFICIAL PALMAR ARCH		No	No	No	No		No	No
64831	SUTURE DIGITAL NERVE HAND FOOT 1 NERVE		No	No	No	No		No	No
64832	SUTR DIGITAL NRV HAND FOOT EA DGTAL NRV		No	No	No	No		No	No
64834	SUTURE 1 NERVE HAND FOOT COMMON SENSORY NERVE		No	No	No	No		No	No
64835	SUTURE 1 NERVE MEDIAN MOTOR THENAR		No	No	No	No		No	No
64836	SUTURE 1 NERVE ULNAR MOTOR		No	No	No	No		No	No
64837	SUTURE EACH ADDITIONAL NERVE HAND FOOT		No	No	No	No		No	No
64840	SUTURE POSTERIOR TIBIAL NERVE		No	No	No	No		No	No
64856	SUTR PRPH NRV ARM LEG XCP SCIATIC W TRPOS		No	No	No	No		No	No
64857	SUTR PRPH NRV ARM LEG XCP SCIATIC W O TRPOS		No	No	No	No		No	No
64858	SUTURE SCIATIC NERVE		No	No	No	No		No	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
64859	SUTURE EACH ADDITIONAL PERIPHERAL NERVE		No	No	No	No		No	No
64861	SUTURE BRACHIAL PLEXUS		No	No	No	No		No	No
64862	SUTURE LUMBAR PLEXUS		No	No	No	No		No	No
64864	SUTURE FACIAL NERVE EXTRACRANIAL		No	No	No	No		No	No
64865	SUTURE FACIAL NERVE INFRATEMPORAL W WO GRAFT		No	No	No	No		No	No
64866	ANASTOMOSIS FACIAL-SPINAL ACCESSORY		No	No	Not Cov	No		No	No
64868	ANASTOMOSIS FACIAL HYPOGLOSSAL		No	No	Not Cov	No		No	No
64872	SUTURE NERVE REQ SECONDARY DELAYED SUTURE		No	No	No	No		No	No
64874	SUTURE NERVE REQ XTNSV MOBIL TRPOS NERVE		No	No	No	No		No	No
64876	SUTURE NERVE REQ SHORTENING BONE EXTREMITY		No	No	No	No		No	No
64885	NERVE GRAFT HEAD NECK UNDER 4 CM		No	No	No	No		No	No
64886	NERVE GRAFT HEAD NECK OVER 4 CM		No	No	No	No		No	No
64890	NERVE GRAFT 1 STRAND HAND FOOT UNDER 4 CM		No	No	No	No		No	No
64891	NRV GRF 1 STRAND HAND FOOT OVER 4 CM		No	No	No	No		No	No
64892	NERVE GRAFT 1 STRAND ARM LEG UNDER 4 CM		No	No	No	No		No	No
64893	NERVE GRAFT 1 STRAND ARM LEG OVER 4 CM		No	No	No	No		No	No
64895	NERVE GRAFT MLT STRANDS HAND FOOT UNDER 4 CM		No	No	No	No		No	No
64896	NERVE GRAFT MLT STRANDS HAND FOOT OVER 4 CM		No	No	No	No		No	No
64897	NERVE GRAFT MLT STRANDS ARM LEG UNDER 4 CM		No	No	No	No		No	No
64898	NERVE GRAFT MLT STRANDS ARM LEG OVER 4 CM		No	No	No	No		No	No
64901	NERVE GRAFT EACH NERVE 1 STRAND		No	No	No	No		No	No
64902	NERVE GRAFT EACH NERVE MULTIPLE STRANDS		No	No	No	No		No	No
64905	NERVE PEDICLE TRANSFER FIRST STAGE		No	No	No	No		No	No
64907	NERVE PEDICAL TRANSFER SECOND STAGE		No	No	No	No		No	No
64910	NERVE REPAIR W CONDUIT EACH NERVE		No	No	No	No		No	No
64911	NERVE REPAIR W AUTOGENOUS VEIN GRAFT EA NERVE		No	Not Cov	Not Cov	Not Cov		No	No
64912	NERVE REPAIR W NERVE ALLOGRAFT FIRST STRAND		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
64913	NERVE REPAIR W NERVE ALLOGRAFT EA ADDL STRAND		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
64999	UNLISTED PROCEDURE NERVOUS SYSTEM		Yes	Yes	Not Cov	Yes		Yes	Yes
65091	EVISCERATION OCULAR CONTENTS W O IMPLANT		No	No	No	No		No	No
65093	EVISCERATION OCULAR CONTENTS W IMPLANT		No	No	No	No		No	No
65101	ENUCLEATION OF EYE W O IMPLANT		No	No	No	No		No	No
65103	ENUCLEATION EYE IMPLT MUSC X ATTACHED IMPLT		No	No	No	No		No	No
65105	ENUCLEATION EYE IMPLT MUSC ATTACHED IMPLT		No	No	No	No		No	No
65110	EXENTERATION ORBIT REMVL ORBITAL CONTENTS ONLY		No	No	No	No		No	No
65112	EXENTERATION ORBIT RMVL ORBIT CONTENTS AND BONE		No	No	No	No		No	No
65114	EXNTJ ORBIT RMVL ORB CNTS W MUSC MYOQ FLAP		No	No	No	No		No	No
65125	MODIFICAJ OC IMPLT W PLMT RPLCMT PEGS SPX		No	No	No	No		No	No
65130	INSJ OC IMPLT SEC AFTER EVSC SCLL SHELL		No	No	No	No		No	No
65135	INSJ OC IMPLT AFTER ENCL MUSC X ATTACHED		No	No	No	No		No	No
65140	INSJ OC IMPLT AFTER ENCL MUSC ATTACHED		No	No	No	No		No	No
65150	REINSERTION OCULAR IMPLT W WO CONJUNCTIVAL GRAFT		No	No	No	No		No	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
65155	REINSERTION OCULAR IMPLT RNFCMT AND ATTACH MUSCLE		No	No	No	No		No	No
65175	REMOVAL OCULAR IMPLANT		No	No	No	No		No	No
65205	REMOVAL FB EYE CONJUNCTIVAL SUPERFICIAL		No	No	Not Cov	No		No	No
65210	RMVL FB XTRNL EYE EMBED SCJNCL SCLERAL NONPERFOR		No	No	Not Cov	No		No	No
65220	RMVL FB XTRNL EYE CORNEAL W O SLIT LAMP		No	No	No	No		No	No
65222	RMVL FB XTRNL EYE CORNEAL W SLIT LAMP		No	No	Not Cov	No		No	No
65235	RMVL FB INTRAOCULAR ANT CHAMBER EYE LENS		No	No	No	No		No	No
65260	RMVL FB IO FROM POST SEG MAG XTRJ ANT POST ROUTE		No	No	No	No		No	No
65265	RMVL FB IO FROM POST SEG NONMAGNETIC XTRJ		No	No	No	No		No	No
65270	RPR LAC CJNC W WO NONPERFOR LAC SCLERA DIR CLSR		No	No	No	No		No	No
65272	RPR LAC CJNC MOBLJ AND REARGMT W O HOSPITALIZATION		No	No	No	No		No	No
65273	RPR LAC CJNC MOBLJ AND REARGMT W HOSPIZATION		Not Cov	No	Not Cov	No		No	No
65275	RPR LAC CORNEA NONPERFOR W WO RMVL FOREIGN BODY		No	No	No	No		No	No
65280	RPR LAC CORNEA AND SCLERA PERFOR X INVG UVEAL TIS		No	No	No	No		No	No
65285	RPR LAC CORN AND SCLRA PERF W REPOS RESCJ UVEAL T		No	No	No	No		No	No
65286	RPR LAC APPL TISSUE GLUE WOUND CORNEA AND SCLERA		No	No	Not Cov	No		No	No
65290	RPR WND EXTRAOCULAR MUSCLE TENDON AND TENON CAPSU		No	No	No	No		No	No
65400	EXCISION LESION CORNEA XCP PTERYGIUM		No	No	No	No		No	No
65410	BIOPSY CORNEA		No	No	No	No		No	No
65420	EXCISION TRANSPOSITION PTERYGIUM W O GRAFT		No	No	No	No		No	No
65426	EXCISION TRANSPOSITION PTERYGIUM W GRAFG		No	No	No	No		No	No
65430	CORNEA SCRAPING DIAGNOSTIC SMEAR AND CULTURE		No	No	Not Cov	No		No	No
65435	RMVL CORNEAL EPITHELIUM W WO CHEMOCAUTERIZATION		No	No	Not Cov	No		No	No
65436	RMVL CORNEAL EPITHELIUM W APPL CHELATING AGENT		No	No	Not Cov	No		No	No
65450	DSTRJ LESION CRYOTHER PHOTO THERMOCAUTZATION		No	No	No	No		No	No
65600	MULTIPLE PUNCTURES ANTERIOR CORNEA		No	No	Not Cov	No		No	No
65710	KERATOPLASTY ANTERIOR LAMELLAR		No	No	No	No		No	No
65730	KERATOPLASTY PENTRG EXCEPT APHAKIA PSEUDOPHAKIA		No	No	No	No		No	No
65750	KERATOPLASTY PENETRAING APHAKIA		No	No	No	No		No	No
65755	KERATOPLASTY PENETRATING PSEUDOPHAKIA		No	No	No	No		No	No
65756	KERATOPLASTY ENDOTHELIAL		No	No	No	No		No	No
65757	BACKBENCH PREPJ CORNEAL ENDOTHELIAL ALLOGRAFT		No	No	Not Cov	No		No	No

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			Outpatient		ASC	Office Setting			
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65760	KERATOMILEUSIS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
65765	KERATOPHAKIA		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
65767	EPIKERATOPLASTY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
65770	KERATOPROSTHESIS		No	No	No	No		No	No
65771	RADIAL KERATOTOMY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Yes
65772	CRNL RELAXING INC CORRJ INDUCED ASTIGMATISM		Yes	Yes	Yes	No		Yes	Yes
65775	CRNL WEDGE RESCJ CORRJ INDUCED ASTIGMATISM		Yes	Yes	Yes	No		Yes	Yes
65778	PLACE AMNIOTIC MEMBRA OCULAR SURFACE W O SUTURES		No	No	Not Cov	No		No	No
65779	PLACE AMNIOTIC MEMBRANE OCULAR SURFACE SUTURED		No	No	No	No		No	No
65780	OCULAR SURFACE RECONSTRUCTION AMNIOTIC MEMBRANE		No	No	No	No		No	No
65781	OCULAR SURFACE RECONSTRUCTION LIMBAL ALLOGRAFT		No	No	No	No		No	No
65782	OCCULAR SURFACE RECONSTRUCTION LIMBAL AUTOGRAFT		No	No	No	No		No	No
65785	IMPLANTATION INTRASTROMAL CORNEAL RING SEGMENTS		Not Cov	Not Cov	Not Cov	Not Cov		No	No
65800	PARACENTESIS ANT CHAMB EYE ASPIR AQUEOUS SPX		No	No	No	No		No	No
65810	PARACENTESIS ANT CHAM RMVL VITREOUS W WO AIR INJX		No	No	No	No		No	No
65815	PARACEN ANT CHAM RMVL BLOOD W WO IRRIG AND AIR IN		No	No	No	No		No	No
65820	GONIOTOMY		No	No	No	No		No	No
65850	TRABECULOTOMY AB EXTERNO		No	No	No	No		No	No
65855	TRABECULOPLASTY BY LASER SURGERY		No	No	Not Cov	No		No	No
65860	SEVERING ADHESIONS ANTERIOR SEGMENT LASER SPX		No	No	Not Cov	No		No	No
65865	SEVERING ADS ANT SEG INCAL TQ SPX GONIOSYNECHIAE		No	No	No	No		No	No
65870	SEVERING ADS ANT SEG INCAL SPX ANT SYNECHIAE		No	No	No	No		No	No
65875	SEVERING ADS ANT SEG INCAL SPX POST SYNECHIAE		No	No	No	No		No	No
65880	SEVERING ADS ANT SEG INCAL SPX CORNEOVITREAL		No	No	No	No		No	No
65900	RMVL EPITHELIAL DOWNGROWTH ANT CHAMBER EYE		No	No	No	No		No	No
65920	RMVL IMPLANTED MATERIAL ANTERIO SEGMENT EYE		No	No	No	No		No	No
65930	RMVL BLOOD CLOT ANTERIOR SEGMENT EYE		No	No	No	No		No	No
66020	INJX ANTERIOR CHAMBER EYE AIR LIQUID SPX		No	No	No	No		No	No
66030	INJX ANTERIOR CHAMBER EYE MEDICATION SPX		No	No	No	No		No	No
66130	EXCISION LESION SCLERA		No	No	No	No		No	No
66150	FSTLJ SCLERA GLAUCOMA TREPIN W IRIDECTOMY		No	No	No	No		No	No
66155	FSTLJ SCLERA GLAUCOMA THERMOCAUT IRRIDEC		No	No	No	No		No	No
66160	FSTLJ SCLERA SCLERECTOMY PUNCH SCISSORS IRIDECT		No	No	No	No		No	No
66170	FSTLJ SCLERA GLAUCOMA TRABECULECT AB EXTERNO		No	No	No	No		No	No
66172	FSTLJ SCLERA GLC TRBEC AB EXTERNO SCARRING		No	No	No	No		No	No
66174	TRLUML DILAT AQUEOUS CANAL W O DEVICE STENT		No	No	No	No		No	No
66175	TRLUML DILAT AQUEOUS CANAL W DEVICE STENT		No	No	No	No		No	No

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			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
66179	AQUEOUS SHUNT EXTRAOCULAR RESERVOIR W O GRAFT		No	No	No	No		No	No
66180	AQUEOUS SHUNT EXTRAOC EQUAT PLATE RSVR W GRAFT		No	No	No	No		No	No
66183	INSERT ANTER DRAINAGE DEV W O EXTRAOC RESERVOIR		No	No	No	No		No	No
66184	REVJ SHUNT EXTRAOCULAR RESERVOIR W O GRAFT		No	No	No	No		No	No
66185	REVJ AQUEOUS SHUNT EXTRAOCULAR RESERVOIR W GRAFT		No	No	No	No		No	No
66225	REPAIR SCLERAL STAPHYLOMA W GRAFT		No	No	No	No		No	No
66250	REVJ RPR OPRATIVE WOUND ANTERIOR SEGMENT		No	No	No	No		No	No
66500	IRIDOTOMY STAB INC SPX XCP TRANSFIXION		No	No	No	No		No	No
66505	IRIDOTOMY STAB INC SPX TRANSFIXION		No	No	No	No		No	No
66600	IRDEC CRNLSCLRL CRNL SCTJ RMVL LES		No	No	No	No		No	No
66605	IRDEC CRNLSCLRL CRNL SCTJ CYCLECTOMY		No	No	No	No		No	No
66625	IRDEC CRNLSCLRL CRNL SCTJ PRPH GLC SPX		No	No	No	No		No	No
66630	IRDEC CRNLSCLRL CRNL SCTJ SECTOR GLC SPX		No	No	No	No		No	No
66635	IRDEC CRNLSCLRL CRNL SCTJ OPTICAL SPX		No	No	No	No		No	No
66680	REPAIR IRIS CILIARY BODY		No	No	No	No		No	No
66682	SUTURE IRIS CILIARY BODY SPX RETRIEVAL SUTURE		No	No	No	No		No	No
66700	CILIARY BODY DESTRUCTION DIATHERMY		No	No	No	No		No	No
66710	CILIARY BODY DSTRJ CYCLOPHOTOAG TRANSSCERAL		No	No	No	No		No	No
66711	CILIARY BODY DSTRJ CYCLOPHOTOAG ENDOSCOPIC		No	No	No	No		No	No
66720	CILIARY BODY DESTRUCTION CRYOTHERAPY		No	No	No	No		No	No
66740	CILIARY BODY DESTRUCTION CYCLODIALYSIS		No	No	No	No		No	No
66761	IRIDOTOMY IRRIDECTOMY LASER SURG PER SESSION		No	No	Not Cov	No		No	No
66762	IRIDOPLASTY PHOTOCOAGULATION 1 OR GRT SESSIONS		No	No	Not Cov	No		No	No
66770	DSTRJ CYST LESION IRIS CILIARY BODY		No	No	Not Cov	No		No	No
66820	DISCISSION SECONDARY MEMBRANOUS CATARACT		No	No	No	No		No	No
66821	POST-CATARACT LASER SURGERY		No	No	No	No		No	No
66825	REPOSITIONING IO LENS PROSTHESIS REQ INC SPX		No	No	No	No		No	No
66830	RMVL SEC MEMBRANOUS CTRC CORNEO-SCLL SCTJ		No	No	No	No		No	No
66840	RMVL LENS MATERIAL ASPIR TQ 1 OR GRT STAGES		No	No	No	No		No	No
66850	RMVL LENS MATERIAL PHACOFAGMENTATION ASPIR		No	No	No	No		No	No
66852	RMVL LENS MATERIAL PARS PLANA W WO VITRECTOMY		No	No	No	No		No	No
66920	RMVL LENS MATERIAL INTRACAPSULAR		No	No	No	No		No	No
66930	REMOVAL LENS MATRL INTRACAPSULAR DISLOCATED LENS		No	No	No	No		No	No
66940	REMOVAL LENS MATERIAL EXTRACAPSULAR		No	No	No	No		No	No
66982	XCAPSULAR CATARACT RMVL INSJ LENS PROSTH 1 STG		No	No	No	No		No	No
66983	ICAPSULAR CATARACT XTRJ INSJ IO LENS PRSTH 1 STG		No	No	No	No		No	No
66984	CATARACT REMOVAL INSERTION OF LENS		No	No	No	No		No	No
66985	INSJ IO LENS PROSTHESIS NOT W CONCURRENT RMVL		No	No	No	No		No	No
66986	EXCHANGE INTRAOCULAR LENS		No	No	No	No		No	No
66990	USE OPHTHALMIC ENDOSCOPE		No	No	Not Cov	No		No	No

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Code	Code Description	Comments	Apple Health & IMC Medical				IMC / BHSO (Mental Health covered svcs)	Medicare	Market Place
			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
66999	UNLISTED PROCEDURE ANTERIOR SEGMENT EYE		Yes	Yes	Not Cov	Yes	Yes	Yes	
67005	RMVL VITREOUS ANT APPR PARTIAL REMOVAL		No	No	No	No	No	No	
67010	RMVL VITREOUS ANT APPR SUBTOT RMVL MECH VITRECT		No	No	No	No	No	No	
67015	ASPIRATION RELEASE VITREOUS SUBRETINAL CHOROIDAL		No	No	No	No	No	No	
67025	INJ SUBSTITUTE PARS PLANA LIMBL W WO ASPIR SPX		No	No	No	No	No	No	
67027	IMPLTJ INTRAVITREAL DRUG DLVR SYS RMVL VTS		No	No	No	No	No	No	
67028	INTRAVITREAL NJX PHARMACOLOGIC AGT SPX		No	No	Not Cov	No	No	No	
67030	DISCISSION VITREOUS STRANS PARS PLANA APPROACH		No	No	No	No	No	No	
67031	SEVERING VITREOUS STRANS LASER 1 OR GRT STAGES		No	No	No	No	No	No	
67036	VITRECTOMY MECHANICAL PARS PLANA		No	No	No	No	No	No	
67039	VITRECTOMY MCHNL PARS PLNA FOCAL ENDOLASER PC		No	No	No	No	No	No	
67040	VITRECTOMY MCHNL PARS PLNA ENDOLASER PANRTA PC		No	No	No	No	No	No	
67041	VITRECTOMY PARS PLANA REMOVE PRERETINAL MEMBRANE		No	No	No	No	No	No	
67042	VITRECTOMY PARS PLANA REMOVE INT MEMB RETINA		No	No	No	No	No	No	
67043	VITRECTOMY PARS PLANA REMOVE SUBRETINAL MEMBRANE		No	No	No	No	No	No	
67101	RPR RETINAL DTCHMNT DRG SUBRETINAL FLUID CRTX		No	No	Not Cov	No	No	No	
67105	RPR RETINAL DTCHMNT DRG SUBRETINAL FLUID PC		No	No	Not Cov	No	No	No	
67107	REPAIR RETINAL DETACHMENT SCLERAL BUCKLING		No	No	No	No	No	No	
67108	RPR RETINAL DTCHMNT W VITRECTOMY ANY METH		No	No	No	No	No	No	
67110	RPR RETINAL DTCHMNT INJECTION AIR OTHER GAS		No	No	Not Cov	No	No	No	
67113	RPR COMPLEX RETINA DETACH VITRECT AND MEMBRANE PEEL		No	No	No	No	No	No	
67115	RELEASE ENCIRCLING MATERIAL POSTERIOR SEGMENT		No	No	No	No	No	No	
67120	RMVL IMPLNT MATL POSTERIOR SEGMENT EXTRAOCULAR		No	No	No	No	No	No	
67121	RMVL IMPLT MATRL POSTERIOR SEGMENT INTRAOCULAR		No	No	No	No	No	No	
67141	PROPH RTA DTCHMNT W O DRG 1 OR GRT SESS CRTX DTHRM		No	No	No	No	No	No	
67145	PROPH RTA DTCHMNT W O DRG 1 OR GRT SESS		No	No	Not Cov	No	No	No	
67208	DSTRJ LOCLZD LESION RETINA 1 OR GRT SESS CRTX DTHRM		No	No	Not Cov	No	No	No	
67210	DSTRJ LOCLZD LESION RETINA 1 OR GRT SESS PC		No	No	No	No	No	No	
67218	DSTRJ LESION RETINA 1 OR GRT SESS RADJ IMPLTJ		No	No	No	No	No	No	
67220	DSTRJ LESION CHOROID PC 1 OR GRT SESS		No	No	Not Cov	No	No	No	
67221	DSTRJ LESION CHOROID PHOTODYNAMIC THERAPY		No	No	Not Cov	No	No	No	
67225	DSTRJ LESION CHOROID PDT 2ND EYE 1 SESSION		No	No	Not Cov	No	No	No	
67227	DESTRUCTION RETINOPATHY CRYOTHERAPY DIATHERMY		No	No	No	No	No	No	
67228	TREATMENT EXTENSIVE RETINOPATHY PHOTOCOAGULATION		No	No	Not Cov	No	No	No	

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
67229	EXTENSIVE RETINOPATHY 1 OR GRT SESS PRETERM INFANT		No	No	Not Cov	No		No	No
67250	SCLERAL REINFORCEMENT SPX W O GRAFT		No	No	No	No		No	No
67255	SCLERAL REINFORCEMENT SPX W GRAFT		No	No	No	No		No	No
67299	UNLISTED PROCEDURE POSTERIOR SEGMENT		Yes	Yes	Not Cov	Yes		Yes	Not Cov
67311	STRABISMUS RECESSIO RESCJ 1 HRZN TL MUSC		No	No	No	No		No	No
67312	STRABISMUS RECESSIO RESCJ 2 HRZN TL MUSC		No	No	No	No		No	No
67314	STRABISMUS RECESSIO RESCJ 1 VER MUSC		No	No	No	No		No	No
67316	STRABISMUS RECESSIO RESCJ 2 MORE VER MUSC		No	No	No	No		No	No
67318	STRABISMUS ANY SUPERIOR OBLIQUE MUSCLE		No	No	No	No		No	No
67320	TRANSPOSITION PROCEDURE EXTRAOCULAR MUSC		No	No	No	No		No	No
67331	STRABISMUS PREVIOUS EYE X INVOLVE EO MUSC		No	No	No	No		No	No
67332	STRABISMUS SCARRING EO MUSC RSTCV MYOPATHY		No	No	No	No		No	No
67334	STRABISMUS POST FIXJ SUTR TQ W WO MUSC RECESSIO		No	No	No	No		No	No
67335	PLACEMENT ADJUSTABLE SUTURE STRABISMUS		No	No	No	No		No	No
67340	STRABISMUS EXPL AND RPR DETACHED EXTROCLAR MUSC		No	No	No	No		No	No
67343	RLS XTNSV SCAR TISS W O DETACHING EO MUSC SPX		No	No	No	No		No	No
67345	CHEMODENERVATION EXTRAOCULAR MUSCLE		No	No	No	No		No	No
67346	BIOPSY EXTRAOCULAR MUSCLE		No	No	No	No		No	No
67399	UNLISTED PROCEDURE EXTRAOCULAR MUSCLE		Yes	Yes	Not Cov	Yes		Yes	Yes
67400	ORBITOTOMY W O BONE FLAP EXPL W WO BIOPSY		No	No	No	No		No	No
67405	ORBITOTOMY W O BONE FLAP EXPL W DRAINAGE ONLY		No	No	No	No		No	No
67412	ORBITOTOMY W O BONE FLAP W REMOVAL LESION		No	No	No	No		No	No
67413	ORBITOTOMY W O BONE FLAP W RMVL FOREIGN BODY		No	No	No	No		No	No
67414	ORBITOTOMY W O BONE FLAP W RMVL BONE DCM PRN		No	No	No	No		No	No
67415	FINE NEEDLE ASPIRATION ORBITAL CONTENTS		No	No	No	No		No	No
67420	ORBITOTOMY BONE FLAP WINDOW LAT RMVL LESION		No	No	No	No		No	No
67430	ORBITOTOMY BONE FLAP WINDOW LATERAL RMVL FB		No	No	No	No		No	No
67440	ORBITOTOMY BONE FLAP WINDOW LATERAL W DRG		No	No	No	No		No	No
67445	ORBITOTOMY BONE FLAP WINDOW LAT RMVL BONE DCM PRN		No	No	No	No		No	No
67450	ORBITOTOMY BONE FLAP WINDOW LAT EXPL W WO BX		No	No	No	No		No	No
67500	RETROBULBAR INJECTION MEDICATION SPX		No	No	No	No		No	No
67505	RETROBULBAR INJECTION ALCOHOL		No	No	Not Cov	No		No	No
67515	INJECTION MEDICATION OTHER SUBST TENON CAPSULE		No	No	Not Cov	No		No	No
67550	ORBITAL IMPLANT INSERTION		No	No	No	No		No	No
67560	ORBITAL IMPLANT REMOVAL REVISION		No	No	No	No		No	No
67570	OPTIC NERVE DECOMPRESSION		No	No	No	No		No	No
67599	UNLISTED PROCEDURE ORBIT		Yes	Yes	Not Cov	Yes		Yes	Yes
67700	BLEPHAROTOMY DRAINAGE ABSCESS EYELID		No	No	Not Cov	No		No	No
67710	SEVERING TARSORRHAPHY		No	No	Not Cov	No		No	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
67715	CANTHOTOMY SEPARATE PROCEDURE		No	No	No	No	No	No	
67800	EXCISION CHALAZION SINGLE		No	No	Not Cov	No	No	No	
67801	EXCISION CHALAZION MULTIPLE SAME LID		No	No	Not Cov	No	No	No	
67805	EXCISION CHALAZION MULTIPLE DIFFERENT LIDS		No	No	Not Cov	No	No	No	
67808	EXC CHALAZION ANES REQ HOSPIZATION SINGLE MULT		No	No	No	No	No	No	
67810	INCISIONAL BIOPSY EYELID SKIN AND LID MARGIN		No	No	Not Cov	No	No	No	
67820	CORRECTION TRICHIASIS EPILATION FORCEPS ONLY		No	No	Not Cov	No	No	No	
67825	CORRECTION TRICHIASIS EPILATION OTH THAN FORCEPS		No	No	Not Cov	No	No	No	
67830	CORRECTION TRICHIASIS INCCISION LID MARGIN		No	No	No	No	No	No	
67835	CORRJ TRICHIASIS INC LID MRGN W FR MUC MEMB GRF		No	No	No	No	No	No	
67840	EXC LESION EYELID W O CLSR W SIMPLE DIR CLOSURE		No	No	Not Cov	No	No	No	
67850	DESTRUCTION LESION LID MARGIN UNDER 1 CM		No	No	Not Cov	No	No	No	
67875	TEMPORARY CLOSURE EYELIDS SUTURE		No	No	No	No	No	No	
67880	CONSTJ INTERMARGIN ADHES TARSORRH CANTHORRHAPY		No	No	No	No	No	No	
67882	CONSTJ INTERMARGIN ADHES TARSOR CANTHOR W TRPOS		No	No	No	No	No	No	
67900	REPAIR BROW PTOSIS		Yes	Yes	Yes	No	Yes	Yes	
67901	RPR BLEPHAROPTOSIS FRONTALIS MUSC SUTR OTH MATRL		Yes	Yes	Yes	No	Yes	Yes	
67902	RPR BLEPHAROPT FRONTALIS MUSC AUTOL FASCAL SLING		Yes	Yes	Yes	No	Yes	Yes	
67903	RPR BLEPHAROPTOSIS LEVATOR RESCJ ADVMNT INTERNAL		Yes	Yes	Yes	No	Yes	Yes	
67904	RPR BLEPHAROPTOSIS LEVATOR RESCJ ADVMNT XTRNL		Yes	Yes	Yes	Yes	Yes	Yes	
67906	RPR BLEPHAROPTOSIS SUPERIOR RECTUS FASCIAL SLING		Yes	Yes	Yes	Yes	Yes	Yes	
67908	RPR BLPOS CONJUNCTIVO-TARSO-MUSC-LEVATOR RESCJ		Yes	Yes	Yes	Yes	Yes	Yes	
67909	REDUCTION OVERCORRECTION PTOSIS		Yes	Yes	Yes	No	Yes	Yes	
67911	CORRECTION LID RETRACTION		No	No	No	No	No	No	
67912	CORRJ LAGOPHTHALMOS IMPLTJ UPR EYELID LID LOAD		No	No	No	No	No	No	
67914	REPAIR ECTROPION SUTURE		No	No	No	No	No	No	
67915	REPAIR ECTROPION THERMOCAUTERIZATION		No	No	Not Cov	No	No	No	
67916	REPAIR ECTROPION EXCISION TARSAL WEDGE		No	No	No	No	No	No	
67917	REPAIR ECTROPION EXTENSIVE		No	No	No	No	No	No	
67921	REPAIR ENTROPION SUTURE		No	No	No	No	No	No	
67922	REPAIR ENTROPION THERMOCAUTERIZATION		No	No	Not Cov	No	No	No	
67923	REPAIR ENTROPION EXCISION TARSAL WEDGE		No	No	No	No	No	No	
67924	REPAIR ENTROPION EXTENSIVE		No	No	No	No	No	No	
67930	SUTR WND EYELID MARGIN TARSUS CONJUNC PRTL THICK		No	No	Not Cov	No	No	No	
67935	SUTR WND EYELID MARGIN TARSUS CONJUNC FULL THICK		No	No	No	No	No	No	
67938	REMOVAL EMBEDDED FOREIGN BODY EYELID		No	No	Not Cov	No	No	No	

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			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
67950	CANTHOPLASTY		Yes	Yes	Yes	No		Yes	Yes
67961	EXCISION AND REPAIR EYELID UNDER ONE-FOURTH LID MARGIN		No	No	No	No		No	No
67966	EXCISION AND REPAIR EYELID ONE-FOURTH LID MARGIN		No	No	No	No		No	No
67971	RCNSTJ EYELID FULL THICKNESS UNDER TWO-THIRDS 1 STG		No	No	No	No		No	No
67973	RCNSTJ EYELID FULL THICKNESS LOWER EYELID 1 STG		No	No	No	No		No	No
67974	RCNSTJ EYELID FULL THICKNESS UPPER EYELID 1 STG		No	No	No	No		No	No
67975	RCNSTJ EYELID FULL THICKNESS SECOND STAGE		No	No	No	No		No	No
67999	UNLISTED PROCEDURE EYELIDS		Yes	Yes	Not Cov	Yes		Yes	Yes
68020	INCISION CONJUNCTIVA DRAINAGE OF CYST		No	No	Not Cov	No		No	No
68040	EXPRESSION CONJUNCTIVAL FOLLICLES		No	No	Not Cov	No		No	No
68100	BIOPSY CONJUNCTIVA		No	No	Not Cov	No		No	No
68110	EXCISION LESION CONJUNCTIVA UNDER 1 CM		No	No	Not Cov	No		No	No
68115	EXCISION LESION CONJUNCTIVA OVER 1 CM		No	No	No	No		No	No
68130	EXCISION LESION CONJUNCTIVA ADJACENT SCLERA		No	No	No	No		No	No
68135	DESTRUCTION LESION CONJUNCTIVA		No	No	Not Cov	No		No	No
68200	SUBCONJUNCTIVAL INJECTION		No	No	Not Cov	No		No	No
68320	CONJUNCTIVOPLASTY W GRF XTNSV REARRANGEMENT		No	No	No	No		No	No
68325	CONJUNCTIVOPLASTY W BUCCAL MUC MEMB GRAFT		No	No	No	No		No	No
68326	CJP RCNSTJ CUL-DE-SAC BUCCAL GRF XTNSV REARRGMT		No	No	No	No		No	No
68328	CONJUNCTPL CUL-DE-SAC W BUCCAL MUC MEMB GRAFT		No	No	No	No		No	No
68330	RPR SYMBLEPHARON CONJUNCTIVOPLASTY W O GRAFT		No	No	No	No		No	No
68335	RPR SYMBLEPHARON FR GRF CJNC BUCCAL MUC MEMB		No	No	No	No		No	No
68340	RPR AND DIV SYMBLEPHARON W WO CONFORM CONTACT LE		No	No	No	No		No	No
68360	CONJUNCTIVAL FLAP BRIDGE PARTIAL SPX		No	No	No	No		No	No
68362	CONJUNCTIVAL FLAP TOTAL		No	No	No	No		No	No
68371	HARVESTING CONJUNCTIVAL ALLOGRAPHY LIVING DONOR		No	No	No	No		No	No
68399	UNLISTED PROCEDURE CONJUNCTIVA		Yes	Yes	Not Cov	Yes		Yes	Yes
68400	INCISION DRAINAGE LACRIMAL GLAND		No	No	Not Cov	No		No	No
68420	INCISION DRAINAGE LACRIMAL SAC		No	No	Not Cov	No		No	No
68440	SNIP INCISION LACRIMAL PUNCTUM		No	No	Not Cov	No		No	No
68500	EXCISION LACRIMAL GLAND XCPT TUMOR TOTAL		No	No	No	No		No	No
68505	EXCISION LACRIMAL GLAND XCPT TUMOR PRTL		No	No	No	No		No	No
68510	BIOPSY LACRIMAL GLAND		No	No	No	No		No	No
68520	EXCISION LACRIMAL SAC		No	No	No	No		No	No
68525	BIOPSY LACRIMAL SAC		No	No	No	No		No	No
68530	RMVL FB DACRYOLITH LACRIMAL PASSAGES		No	No	Not Cov	No		No	No
68540	EXC LACRIMAL GLAND TUMOR FRONTAL APPROACH		No	No	No	No		No	No
68550	EXC LACRIMAL GLAND TUMOR W OSTEOTOMY		No	No	No	No		No	No
68700	PLASTIC REPAIR CANALICULI		No	No	No	No		No	No

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			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
68705	CORRECTION EVERTED PUNCTUM CAUTERY		No	No	Not Cov	No	No	No	
68720	DACRYOCSTORHINOSTOMY		No	No	No	No	No	No	
68745	CONJUNCTIVORHINOSTOMY W O TUBE		No	No	No	No	No	No	
68750	CONJUNCTIVORHINOSTOMY INSJ TUBE STENT		No	No	No	No	No	No	
68760	CLSR LACRIMAL PUNCTUM THERMOCAUT LIG LASER		No	No	Not Cov	No	No	No	
68761	CLSR LACRIMAL PUNCTUM PLUG EACH		No	No	Not Cov	No	No	No	
68770	CLOSURE LACRIMAL FISTULA SPX		No	No	No	No	No	No	
68801	DILATION LACRIMAL PUNCTUM W WO IRRIGATION		No	No	Not Cov	No	No	No	
68810	PROBE NASOLACRIMAL DUCT W WO IRRIGATION		No	No	No	No	No	No	
68811	PROBE NASOLACRIMAL DUCT W WO IRRIG REQ GEN ANES		No	No	No	No	No	No	
68815	PROBE NASOLACRIMAL DUCT W WO IRRIG INSJ TUBE STNT		No	No	No	No	No	No	
68816	PROBE NASOLACRIMAL DUCT WITH CATHETER DILATION		No	No	No	No	No	No	
68840	PROBE LACRIMAL CANALICULI W WO IRRIGATION		No	No	Not Cov	No	No	No	
68850	INJECTION CONTRAST MEDIUM DACRYOCYSTOGRAPHY		No	No	Not Cov	No	No	No	
68899	UNLISTED PROCEDURE LACRIMAL SYSTEM		Yes	Yes	Not Cov	Yes	Yes	Yes	
69000	DRAINAGE EXTERNAL EAR ABSCESS HEMATOMA SIMPLE		No	No	Not Cov	No	No	No	
69005	DRAINAGE EXTERNAL EAR ABSCESS HEMATOMA CMLPX		No	No	Not Cov	No	No	No	
69020	DRAINAGE EXTERNAL AUDITORY CANAL ABSCESS		No	No	Not Cov	No	No	No	
69090	EAR PIERCING		Not Cov	Not Cov	Not Cov	Not Cov	Not Cov	Not Cov	
69100	BIOPSY EXTERNAL EAR		No	No	Not Cov	No	No	No	
69105	BIOPSY EXTERNAL AUDITORY CANAL		No	No	Not Cov	No	No	No	
69110	EXCISION EXTERNAL EAR PARTIAL SIMPLE REPAIR		No	No	No	No	No	No	
69120	EXCISION EXTERNAL EAR COMPLETE AMPUTATION		No	No	No	No	No	No	
69140	EXCISION EXOSTOSIS EXTERNAL AUDITORY CANAL		No	No	No	No	No	No	
69145	EXCISION SOFT TIS LESION EXTERNAL AUDITORY CANAL		No	No	No	No	No	No	
69150	RAD EXC XTRNL AUDITORY CANAL LES W O NCK DSJ		No	No	No	No	No	No	
69155	RAD EXC XTRNL AUDITORY CANAL LES NCK DSJ		Not Cov	No	Not Cov	No	No	No	
69200	RMVL FB XTRNL AUDITORY CANAL W O ANES		No	No	Not Cov	No	No	No	
69205	RMVL FB XTRNL AUDITORY CANAL ANES		No	No	No	No	No	No	
69209	REMOVAL IMPACTED CERUMEN IRRIGATION LVG UNILAT		No	No	Not Cov	No	No	No	
69210	REMOVAL IMPACTED CERUMEN INSTRUMENTATION UNILAT		No	No	Not Cov	No	No	No	
69220	DEBRIDEMENT MASTOIDECTOMY CAVITY SIMPLE		No	No	Not Cov	No	No	No	
69222	DEBRIDEMENT MASTOIDECTOMY CAVITY CMLPX		No	No	Not Cov	No	No	No	
69300	OTOPLASTY PROTRUDING EAR W WO SIZE RDCTJ		Not Cov	Not Cov	Not Cov	Not Cov	Not Cov	Yes	
69310	RECONSTRUCTION EXTERNAL AUDITORY CANAL SPX		No	No	No	No	No	No	
69320	RCNSTJ XTRNL AUD CANAL CONGENITAL ATRESIA 1 STG		No	No	No	No	No	No	
69399	UNLISTED PROCEDURE EXTERNAL EAR		Yes	Yes	Not Cov	Yes	Yes	Yes	
69420	MYRINGOTOMY ASPIR AND EUSTACHIAN TUBE NFLTJ		No	No	Not Cov	No	No	No	

This prior authorization guide applies to Medicaid, Medicare, and Marketplace.

DOS Effective 10/1/19; Posted 10/30/19

All Inpatient services require prior authorization

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*** All Medicare services subject to the limitations in the CMS billing guide and fee schedules at <https://www.cms.gov/> ***

Code	Code Description	Comments	Apple Health & IMC Medical				IMC / BHSO (Mental Health covered svcs)	Medicare	Market Place
			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
69421	MYRINGOTOMY ASPIR AND EUSTACHIAN TUBE NFLTJ ANES		No	No	No	No		No	No
69424	VENTILATING TUBE RMVL REQUIRING GENERAL ANES		No	No	Not Cov	No		No	No
69433	TYMPANOSTOMY LOCAL TOPICAL ANESTHESIA		No	No	Not Cov	No		No	No
69436	TYMPANOSTOMY GENERAL ANESTHESIA		No	No	No	No		No	No
69440	MIDDLE EAR EXPL THRU POSTAUR EAR CANAL INC		No	No	No	No		No	No
69450	TYMPANOLYSIS TRANSCANAL		No	No	No	No		No	No
69501	TRANSMASTOID ANTROTOMY		No	No	No	No		No	No
69502	MASTOIDECTOMY COMPLETE		No	No	No	No		No	No
69505	MASTOIDECTOMY MODIFIED RADICAL		No	No	No	No		No	No
69511	MASTOIDECTOMY RADICAL		No	No	No	No		No	No
69530	PETROUS APICECTOMY RADICAL MASTOIDECTOMY		No	No	No	No		No	No
69535	RESCJ TEMPORAL BONE EXTERNAL APPROACH		Not Cov	No	Not Cov	No		No	No
69540	EXCISION AURAL POLYP		No	No	Not Cov	No		No	No
69550	EXCISION AURAL GLOMUS TUMOR TRANSCANAL		No	No	No	No		No	No
69552	EXCISION AURAL GLOMUS TUMOR TRANSMASTOID		No	No	No	No		No	No
69554	EXCISION AURAL GLOMUS TUMOR EXTENDED		Not Cov	No	Not Cov	No		No	No
69601	REVJ MASTOIDECTOMY RSLTG COMPL MASTOIDECTOMY		No	No	No	No		No	No
69602	REVJ MASTOIDECTOMY RSLTG MODF RAD MSTDC		No	No	No	No		No	No
69603	REVJ MASTOIDECTOMY RSLTG RAD MASTOIDECTOMY		No	No	No	No		No	No
69604	REVJ MASTOIDECTOMY RSLTG TYMPANOPLASTY		No	No	No	No		No	No
69605	REVJ MASTOIDECTOMY W APICECTOMY		No	No	No	No		No	No
69610	TYMPANIC MEMB RPR W WO PREPJ PERFOR PATCH		No	No	No	No		No	No
69620	MYRINGOPLASTY		No	No	No	No		No	No
69631	TYMPANOPLASTY W O MASTOIDECT W O OSSICLE RECNSTJ		No	No	No	No		No	No
69632	TYMPNOPLSTY W O MSTDC 1ST REVJ W OSICLE RECNSTJ		No	No	No	No		No	No
69633	TYMPANOPLASTY W O MASTOIDEDEC 1ST REVJ PROSTH TORP		No	No	No	No		No	No
69635	TYMPP ANTRT MASTOID W O OSSICULAR CHAIN RECNSTJ		No	No	No	No		No	No
69636	TYMPP ANTRT MASTOID W OSSICULAR CHAIN RECNSTJ		No	No	No	No		No	No
69637	TMPP ANTRT MASTOIDOTOMY PROSTHESIS TORP		No	No	No	No		No	No
69641	TMPP MASTOIDECTOMY W O OSSICULAR CHAIN RECNSTJ		No	No	No	No		No	No
69642	TMPP MASTOIDECTOMY W OSSICULAR CHAIN RECNSTJ		No	No	No	No		No	No
69643	TMPP MASTOIDECT NTC RCNSTED WALL W O OCR		No	No	No	No		No	No
69644	TMPP MASTOIDECT NTC RCNSTED CANAL WALL OCR		No	No	No	No		No	No
69645	TYMPANOPLASTY MASTOIDECTOMY RAD COMPL W O OCR		No	No	No	No		No	No
69646	TYMPANOPLASTY MASTOIDECTOMY RAD COMPL W OCR		No	No	No	No		No	No
69650	STAPES MOBILIZATION		No	No	No	No		No	No
69660	STAPEDECTOMY STAPEDOTOMY		No	No	No	No		No	No

This prior authorization guide applies to Medicaid, Medicare, and Marketplace.

DOS Effective 10/1/19; Posted 10/30/19

All Inpatient services require prior authorization

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Code	Code Description	Comments	Apple Health & IMC Medical				IMC / BHSO (Mental Health covered svcs)	Medicare	Market Place
			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
69661	STAPEDECTOMY STAPEDOTOMY W FOOTPLATE DRILL OUT		No	No	No	No		No	No
69662	REVISION STAPEDECTOMY STAPEDOTOMY		No	No	No	No		No	No
69666	REPAIR OVAL WINDOW FISTULA		No	No	No	No		No	No
69667	REPAIR ROUND WINDOW FISTULA		No	No	No	No		No	No
69670	MASTOID OBLITERATION SEPARATE PROCEDURE		No	No	No	No		No	No
69676	TYMPANIC NEURECTOMY		No	No	No	No		No	No
69700	CLOSURE POSTAURICULAR FISTULA MASTOID SPX		No	No	No	No		No	No
69710	IMPLTJ RPLCMT EMGNT BONE CNDJ DEV TEMPORAL BONE		Not Cov	No	Not Cov	No		Not Cov	No
69711	RMVL RPR EMGNT BONE CNDJ DEV TEMPORAL BONE		Not Cov	No	No	No		No	No
69714	IMPLTJ OSSEOINTEGRATED TEMPORAL BONE W MASTOID		Yes	Yes	Yes	No		Yes	Yes
69715	IMPLJ OSSEOINTEGRATED TEMPORAL BONE W O MASTOID		Yes	Yes	Yes	No		Yes	Yes
69717	RPLMCT OSSEOINTEGRATE IMPLNT W O MASTOIDECTOMY		Yes	Yes	Yes	No		Yes	Yes
69718	RPLMCT OSSEOINTEGRATE IMPLNT W MASTOIDECTOMY		Yes	Yes	Yes	No		Yes	Yes
69720	DCMPRN FACIAL NRV INTRATEMPORAL LAT GANGLION		No	No	No	No		No	No
69725	DCMPRN NRV INTRATEMPORAL MEDIAL GENICULATE		No	No	Not Cov	No		No	No
69740	SUTR NRV ITPRL W WO GRF DCMPRN LAT GENICULATE		No	No	No	No		No	No
69745	SUTR NRV ITPRL W WO GRF DCMPRN MEDIAL GENICULATE		No	No	No	No		No	No
69799	UNLISTED PROCEDURE MIDDLE EAR		Yes	Yes	Not Cov	Yes		Yes	Yes
69801	LABYRINTHOTOMY TRANSCANAL		No	No	No	No		No	No
69805	ENDOLYMPHATIC SAC W O SHUNT		No	No	No	No		No	No
69806	ENDOLYMPHATIC SAC SHUNT		No	No	No	No		No	No
69905	LABYRINTHECTOMY TRANSCANAL		No	No	No	No		No	No
69910	LABYRINTHECTOMY W MASTOIDECTOMY		No	No	No	No		No	No
69915	VESTIBULAR NRV SECTION TRANSLABYRINTHINE APPR		No	No	No	No		No	No
69930	COCHLEAR DEVICE IMPLANTATION W WO MASTOIDECTOMY		Yes	Yes	Yes	No		Yes	Yes
69949	UNLISTED PROCEDURE INNER EAR		Yes	Yes	Not Cov	Yes		Yes	Yes
69950	VESTIBULAR NRV SECTION TRANSCRANIAL APPROACH		Not Cov	No	Not Cov	No		No	No
69955	TOTAL FACIAL NERVE DECOMPRESSION AND REPAIR		No	No	Not Cov	No		No	No
69960	DECOMPRESSION INTERNAL AUDITORY CANAL		No	No	Not Cov	No		No	No
69970	REMOVAL TUMOR TEMPORAL BONE		No	No	Not Cov	No		No	No
69979	UNLISTED PROCEDURE TEMPORAL BONE MIDDLE FOSSA		Yes	Yes	Not Cov	Yes		Yes	Yes
69990	MICROSURG TQS REQ USE OPERATING MICROSCOPE		No	No	Not Cov	No		No	No
70010	MYELOGRAPHY POST FOSSA RS AND I		No	No	Not Cov	No		No	No
70015	CISTERNOGRAPHY POSITIVE CONTRAST RS AND I		No	No	Not Cov	No		No	No
70030	RADIOLOGIC EXAMINATION EYE DETECT FOREIGN BODY		No	No	Not Cov	No		No	No
70100	RADIOLOGIC EXAMINATION MANDIBLE PRTL UNDER 4 VIEWS		No	No	Not Cov	No		No	No

This prior authorization guide applies to Medicaid, Medicare, and Marketplace.

DOS Effective 10/1/19; Posted 10/30/19

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
70110	RADIOLOG EXAM MANDIBLE COMPL MINIMUM 4 VIEWS		No	No	Not Cov	No		No	No
70120	RADIOLOGIC EXAM MASTOIDS UNDER 3 VIEWS PER SIDE		No	No	Not Cov	No		No	No
70130	RADEX MASTOIDS COMPL MINIMUM 3 VIEWS PR SIDE		No	No	Not Cov	No		No	No
70134	RADEX INTERNAL AUDITORY MEATI COMPLETE		No	No	Not Cov	No		No	No
70140	RADEX FACIAL BONES UNDER 3 VIEWS		No	No	Not Cov	No		No	No
70150	RADEX FACIAL BONES COMPLETE MINIMUM 3 VIEWS		No	No	Not Cov	No		No	No
70160	RADEX NASAL BONES COMPLETE MINIMUM 3 VIEWS		No	No	Not Cov	No		No	No
70170	DACRYOCSTOGRAPY NASOLACRIMAL DUCT RS AND I		No	No	Not Cov	No		No	No
70190	RADEX OPTIC FORAMINA		No	No	Not Cov	No		No	No
70200	RADEX ORBITS COMPLETE MINIMUM 4 VIEWS		No	No	Not Cov	No		No	No
70210	RADEX SINUSES PARANASAL UNDER 3 VIEWS		No	No	Not Cov	No		No	No
70220	RADEX SINUSES PARANASAL COMPL MINIMUM 3 VIEWS		No	No	Not Cov	No		No	No
70240	RADIOLOGIC EXAMINATION SELLA TURCICA		No	No	Not Cov	No		No	No
70250	RADIOLOGIC EXAMINATION SKULL 4 OR GRT VIEWS		No	No	Not Cov	No		No	No
70260	RADIOLOGIC EXAM SKULL COMPLETE MINIMUM 4 VIEWS		No	No	Not Cov	No		No	No
70300	RADIOLOGIC EXAMINATION TEETH 1 VIEW		No	No	Not Cov	No		No	No
70310	RADIOLOGIC EXAM TEETH PRTL EXAM UNDER FULL MOUTH		No	No	Not Cov	No		No	No
70320	RADIOLOGIC EXAM TEETH COMPLETE FULL MOUTH		No	No	Not Cov	No		No	No
70328	RADEX TEMPOROMANDBLE JT OPN AND CLSD MOUTH UNILAT		No	No	Not Cov	No		No	No
70330	RADEX TEMPOROMANDBLE JT OPN AND CLSD MOUTH BILAT		No	No	Not Cov	No		No	No
70332	TEMPOROMANDBLE JT ARTHROGRAPHY RS AND I		No	No	Not Cov	No		No	No
70336	MRI TEMPOROMANDIBULAR JOINT		Yes	Yes	Not Cov	Yes		Yes	Yes
70350	CEPHALOGRAM ORTHODONTIC		No	No	Not Cov	No		No	No
70355	ORTHOPANTOGRAM		No	No	Not Cov	No		No	No
70360	RADIOLOGIC EXAMINATION NECK SOFT TISSUE		No	No	Not Cov	No		No	No
70370	RADEX PHARYNX LARX W FLUOR AND MAGNIFICATION TQ		No	No	Not Cov	No		No	No
70371	CPLX DYNAMIC PHARYNGEAL AND SP EVAL C V REC		No	No	Not Cov	No		No	No
70380	RADIOLOGIC EXAMINATION SALIVARY GLAND CALCULUS		No	No	Not Cov	No		No	No
70390	SIALOGRAPHY RS AND I		No	No	Not Cov	No		No	No
70450	CT HEAD BRAIN W O CONTRAST MATERIAL		Yes	Yes	Not Cov	Yes		Yes	Yes
70460	CT HEAD BRAIN W CONTRAST MATERIAL		Yes	Yes	Not Cov	Yes		Yes	Yes
70470	CT HEAD BRAIN W O AND W CONTRAST MATERIAL		Yes	Yes	Not Cov	Yes		Yes	Yes
70480	CT ORBIT SELLA POST FOSSA EAR W O CONTRAST MATRL		Yes	Yes	Not Cov	Yes		Yes	Yes
70481	CT ORBIT SELLA POST FOSSA EAR W CONTRAST MATRL		Yes	Yes	Not Cov	Yes		Yes	Yes
70482	CT ORBIT SELLA POST FOSSA EAR W O AND W CONTR MATR		Yes	Yes	Not Cov	Yes		Yes	Yes
70486	CT MAXILLOFACIAL W O CONTRAST MATERIAL		Yes	Yes	Not Cov	Yes		Yes	Yes

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
70487	CT MAXILLOFACIAL W CONTRAST MATERIAL		Yes	Yes	Not Cov	Yes		Yes	Yes
70488	CT MAXILLOFACIAL W O AND W CONTRAST MATERIAL		Yes	Yes	Not Cov	Yes		Yes	Yes
70490	CT SOFT TISSUE NECK W O CONTRAST MATERIAL		Yes	Yes	Not Cov	Yes		Yes	Yes
70491	CT SOFT TISSUE NECK W CONTRAST MATERIAL		Yes	Yes	Not Cov	Yes		Yes	Yes
70492	CT SOFT TISSUE NECK W O AND W CONTRAST MATERIAL		Yes	Yes	Not Cov	Yes		Yes	Yes
70496	CT ANGIOGRAPHY HEAD W CONTRAST NONCONTRAST		Yes	Yes	Not Cov	Yes		Yes	Yes
70498	CT ANGIOGRAPHY NECK W CONTRAST NONCONTRAST		Yes	Yes	Not Cov	Yes		Yes	Yes
70540	MRI ORBIT FACE AND NECK W O CONTRAST		Yes	Yes	Not Cov	Yes		Yes	Yes
70542	MRI ORBIT FACE AND NECK W CONTRAST MATERIAL		Yes	Yes	Not Cov	Yes		Yes	Yes
70543	MRI ORBIT FACE AND NECK W O AND W CONTRAST MATRL		Yes	Yes	Not Cov	Yes		Yes	Yes
70544	MRA HEAD W O CONTRST MATERIAL		Yes	Yes	Not Cov	Yes		Yes	Yes
70545	MRA HEAD W CONTRAST MATERIAL		Yes	Yes	Not Cov	Yes		Yes	Yes
70546	MRA HEAD W O AND W CONTRAST MATERIAL		Yes	Yes	Not Cov	Yes		Yes	Yes
70547	MRA NECK W O CONTRST MATERIAL		Yes	Yes	Not Cov	Yes		Yes	Yes
70548	MRA NECK W CONTRAST MATERIAL		Yes	Yes	Not Cov	Yes		Yes	Yes
70549	MRA NECK W O AND W CONTRAST MATERIAL		Yes	Yes	Not Cov	Yes		Yes	Yes
70551	MRI BRAIN BRAIN STEM W O CONTRAST MATERIAL		Yes	Yes	Not Cov	Yes		Yes	Yes
70552	MRI BRAIN BRAIN STEM W CONTRAST MATERIAL		Yes	Yes	Not Cov	Yes		Yes	Yes
70553	MRI BRAIN BRAIN STEM W O W CONTRAST MATERIAL		Yes	Yes	Not Cov	Yes		Yes	Yes
70554	MRI BRAIN FUNCTIONAL W O PHYSICIAN ADMNISTRATION		Yes	Yes	Not Cov	Yes		Yes	Yes
70555	MRI BRAIN FUNCTIONAL W PHYSICIAN ADMNISTRATION		Yes	Yes	Not Cov	Yes		Yes	Yes
70557	MRI BRAIN OPEN INTRACRANIAL PX W O CONTRAST MATL		No	No	Not Cov	No		No	No
70558	MRI BRAIN OPEN INTRACRANIAL PX W CONTRAST MATL		No	No	Not Cov	No		No	No
70559	MRI BRAIN OPEN INTRACRANIAL PX W O AND W CONTRAST		No	No	Not Cov	No		No	No
71045	RADIOLOGIC EXAM CHEST SINGLE VIEW		No	No	Not Cov	No		No	No
71046	RADIOLOGIC EXAM CHEST 2 VIEWS		No	No	Not Cov	No		No	No
71047	RADIOLOGIC EXAM CHEST 3 VIEWS		No	No	Not Cov	No		No	No
71048	RADIOLOGIC EXAM CHEST 4 PLUS VIEWS		No	No	Not Cov	No		No	No
71100	RADEX RIBS UNILATERAL 2 VIEWS		No	No	Not Cov	No		No	No
71101	RADEX RIBS UNI W POSTEROANT CH MINIMUM 3 VIEWS		No	No	Not Cov	No		No	No
71110	RADEX RIBS BILATERAL 3 VIEWS		No	No	Not Cov	No		No	No
71111	RADEX RIBS BI W POSTEROANT CH MINIMUM 4 VIEWS		No	No	Not Cov	No		No	No
71120	RADEX STERNUM MINIMUM 2 VIEWS		No	No	Not Cov	No		No	No
71130	RADEX STERNOCLAVICULAR JT JTS MINIMUM 3 VIEWS		No	No	Not Cov	No		No	No
71250	CT THORAX W O CONTRAST MATERIAL		Yes	Yes	Not Cov	Yes		Yes	Yes
71260	CT THORAX W CONTRAST MATERIAL		Yes	Yes	Not Cov	Yes		Yes	Yes
71270	CT THORAX W O AND W CONTRAST MATERIAL		Yes	Yes	Not Cov	Yes		Yes	Yes
71275	CT ANGIOGRAPHY CHEST W CONTRAST NONCONTRAST		Yes	Yes	Not Cov	Yes		Yes	Yes
71550	MRI CHEST W O CONTRAST MATERIAL		Yes	Yes	Not Cov	Yes		Yes	Yes

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
71551	MRI CHEST W CONTRAST MATERIAL		Yes	Yes	Not Cov	Yes		Yes	Yes
71552	MRI CHEST W O AND W CONTRAST MATERIAL		Yes	Yes	Not Cov	Yes		Yes	Yes
71555	MRA CHEST W O AND W CONTRAST MATERIAL		Not Cov	Yes	Not Cov	Yes		Yes	Yes
72020	RADEX SPINE 1 VIEW SPECIFY LEVEL		No	No	Not Cov	No		No	No
72040	RADEX SPINE CERVICAL 2 OR 3 VIEWS		No	No	Not Cov	No		No	No
72050	RADEX SPINE CERVICAL 4 OR 5 VIEWS		No	No	Not Cov	No		No	No
72052	RADEX SPINE CERVICAL 6 OR MORE VIEWS		No	No	Not Cov	No		No	No
72070	RADEX SPINE THORACIC 2 VIEWS		No	No	Not Cov	No		No	No
72072	RADEX SPINE THORACIC 3 VIEWS		No	No	Not Cov	No		No	No
72074	RADEX SPINE THORACIC MINIMUM 4 VIEWS		No	No	Not Cov	No		No	No
72080	RADEX SPINE THORACOLUMBAR JUNCTION MIN 2 VIEWS		No	No	Not Cov	No		No	No
72081	RADEX ENTIR THRC LMBR CRV SAC SPI W SKULL 1 VW		No	No	Not Cov	No		No	No
72082	RADEX ENTIR THRC LMBR CRV SAC SPI W SKULL 2 3 VW		No	No	Not Cov	No		No	No
72083	RADEX ENTIR THRC LMBR CRV SAC SPI W SKULL 4 5 VW		No	No	Not Cov	No		No	No
72084	RADEX ENTIR THRC LMBR CRV SAC SPI W SKULL 6 OR GRT VW		No	No	Not Cov	No		No	No
72100	RADEX SPINE LUMBOSACRAL 2 3 VIEWS		No	No	Not Cov	No		No	No
72110	RADEX SPINE LUMBOSACRAL MINIMUM 4 VIEWS		No	No	Not Cov	No		No	No
72114	RADEX SPINE LUMBSACL COMPL W BENDING VIEWS MIN 6		No	No	Not Cov	No		No	No
72120	RADEX SPINE LUMBOSACRAL ONLY BENDING 2 3 VIEWS		No	No	Not Cov	No		No	No
72125	CT CERVICAL SPINE W O CONTRAST MATERIAL		Yes	Yes	Not Cov	Yes		Yes	Yes
72126	CT CERVICAL SPINE W CONTRAST MATERIAL		Yes	Yes	Not Cov	Yes		Yes	Yes
72127	CT CERVICAL SPINE W O AND W CONTRAST MATERIAL		Yes	Yes	Not Cov	Yes		Yes	Yes
72128	CT THORACIC SPINE W O CONTRAST MATERIAL		Yes	Yes	Not Cov	Yes		Yes	Yes
72129	CT THORACIC SPINE W CONTRAST MATERIAL		Yes	Yes	Not Cov	Yes		Yes	Yes
72130	CT THORACIC SPINE W O AND W CONTRAST MATERIAL		Yes	Yes	Not Cov	Yes		Yes	Yes
72131	CT LUMBAR SPINE W O CONTRAST MATERIAL		Yes	Yes	Not Cov	Yes		Yes	Yes
72132	CT LUMBAR SPINE W CONTRAST MATERIAL		Yes	Yes	Not Cov	Yes		Yes	Yes
72133	CT LUMBAR SPINE W O AND W CONTRAST MATERIAL		Yes	Yes	Not Cov	Yes		Yes	Yes
72141	MRI SPINAL CANAL CERVICAL W O CONTRAST MATRL		Yes	Yes	Not Cov	Yes		Yes	Yes
72142	MRI SPINAL CANAL CERVICAL W CONTRAST MATRL		Yes	Yes	Not Cov	Yes		Yes	Yes
72146	MRI SPINAL CANAL THORACIC W O CONTRAST MATRL		Yes	Yes	Not Cov	Yes		Yes	Yes
72147	MRI SPINAL CANAL THORACIC W CONTRAST MATRL		Yes	Yes	Not Cov	Yes		Yes	Yes
72148	MRI SPINAL CANAL LUMBAR W O CONTRAST MATERIAL		Yes	Yes	Not Cov	Yes		Yes	Yes
72149	MRI SPINAL CANAL LUMBAR W CONTRAST MATERIAL		Yes	Yes	Not Cov	Yes		Yes	Yes
72156	MRI SPINAL CANAL CERVICAL W O AND W CONTR MATRL		Yes	Yes	Not Cov	Yes		Yes	Yes
72157	MRI SPINAL CANAL THORACIC W O AND W CONTR MATRL		Yes	Yes	Not Cov	Yes		Yes	Yes
72158	MRI SPINAL CANAL LUMBAR W O AND W CONTR MATRL		Yes	Yes	Not Cov	Yes		Yes	Yes
72159	MRA SPINAL CANAL W WO CONTRAST MATERIAL		Not Cov	Yes	Not Cov	Yes		Not Cov	Yes
72170	RADIOLOGIC EXAMINATION PELVIS 1 2 VIEWS		No	No	Not Cov	No		No	No

This prior authorization guide applies to Medicaid, Medicare, and Marketplace.

DOS Effective 10/1/19; Posted 10/30/19

All Inpatient services require prior authorization

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Code	Code Description	Comments	Apple Health & IMC Medical				IMC / BHSO (Mental Health covered svcs)	Medicare	Market Place
			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
72190	RADIOLOGIC EXAM PELVIS COMPL MINIMUM 3 VIEWS		No	No	Not Cov	No		No	No
72191	CT ANGIOGRAPHY PELVIS W CONTRAST NONCONTRAST		Yes	Yes	Not Cov	Yes		Yes	Yes
72192	CT PELVIS W O CONTRAST MATERIAL		Yes	Yes	Not Cov	Yes		Yes	Yes
72193	CT PELVIS W CONTRAST MATERIAL		Yes	Yes	Not Cov	Yes		Yes	Yes
72194	CT PELVIS W O AND W CONTRAST MATERIAL		Yes	Yes	Not Cov	Yes		Yes	Yes
72195	MRI PELVIS W O CONTRAST MATERIAL		Yes	Yes	Not Cov	Yes		Yes	Yes
72196	MRI PELVIS W CONTRAST MATERIAL		Yes	Yes	Not Cov	Yes		Yes	Yes
72197	MRI PELVIS W O AND W CONTRAST MATERIAL		Yes	Yes	Not Cov	Yes		Yes	Yes
72198	MRA PELVIS W WO CONTRAST MATERIAL		Not Cov	Yes	Not Cov	Yes		Yes	Yes
72200	RADIOLOGIC EXAMINATION SACROILIAC JNTS UNDER 3 VIEWS		No	No	Not Cov	No		No	No
72202	RADIOLOGIC EXAM SACROILIAC JOINTS 3 MORE VIEWS		No	No	Not Cov	No		No	No
72220	RADEX SACRUM AND COCCYX MINIMUM 2 VIEWS		No	No	Not Cov	No		No	No
72240	MYELOGRAPHY CERVICAL RS AND I		No	No	Not Cov	No		No	No
72255	MYELOGRAPHY THORACIC RS AND I		No	No	Not Cov	No		No	No
72265	MYELOGRAPHY LUMBOSACRAL RS AND I		No	No	Not Cov	No		No	No
72270	MYELOGRAPHY 2 MORE REGIONS RS AND I		No	No	Not Cov	No		No	No
72275	EPIDUROGRAPY RS AND I		No	No	Not Cov	No		No	No
72285	DISKOGRAPY CERVICAL THORACIC RS AND I		No	No	Not Cov	No		No	No
72295	DISKOGRAPY LUMBAR RS AND I		No	No	Not Cov	No		No	No
73000	RADEX CLAVICLE COMPLETE		No	No	Not Cov	No		No	No
73010	RADEX SCAPULA COMPLETE		No	No	Not Cov	No		No	No
73020	RADEX SHOULDER 1 VIEW		No	No	Not Cov	No		No	No
73030	RADEX SHOULDER COMPLETE MINIMUM 2 VIEWS		No	No	Not Cov	No		No	No
73040	RADEX SHOULDER ARTHROGRAPHY RS AND I		No	No	Not Cov	No		No	No
73050	RADEX A-C JOINTS BI W WO WEIGHTED DISTR CJ		No	No	Not Cov	No		No	No
73060	RADEX HUMERUS MINIMUM 2 VIEWS		No	No	Not Cov	No		No	No
73070	RADEX ELBOW 2 VIEWS		No	No	Not Cov	No		No	No
73080	RADEX ELBOW COMPLETE MINIMUM 3 VIEWS		No	No	Not Cov	No		No	No
73085	RADEX ELBOW ARTHROGRAPHY RS AND I		No	No	Not Cov	No		No	No
73090	RADEX FOREARM 2 VIEWS		No	No	Not Cov	No		No	No
73092	RADEX UPPER EXTREMITY INFANT MINIMUM 2 VIEWS		No	No	Not Cov	No		No	No
73100	RADEX WRIST 2 VIEWS		No	No	Not Cov	No		No	No
73110	RADEX WRIST COMPLETE MINIMUM 3 VIEWS		No	No	Not Cov	No		No	No
73115	RADEX WRIST ARTHROGRAPHY RS AND I		No	No	Not Cov	No		No	No
73120	RADEX HAND 2 VIEWS		No	No	Not Cov	No		No	No
73130	RADEX HAND MINIMUM 3 VIEWS		No	No	Not Cov	No		No	No
73140	RADEX FINGR MINIMUM 2 VIEWS		No	No	Not Cov	No		No	No
73200	CT UPPER EXTREMITY W O CONTRAST MATERIAL		Yes	Yes	Not Cov	Yes		Yes	Yes
73201	CT UPPER EXTREMITY W CONTRAST MATERIAL		Yes	Yes	Not Cov	Yes		Yes	Yes
73202	CT UPPER EXTREMITY W O AND W CONTRAST MATERIAL		Yes	Yes	Not Cov	Yes		Yes	Yes
73206	CT ANGIOGRAPHY UPPER EXTREMITY		Yes	Yes	Not Cov	Yes		Yes	Yes
73218	MRI UPPER EXTREMITY OTH THAN JT W O CONTR MATRL		Yes	Yes	Not Cov	Yes		Yes	Yes
73219	MRI UPPER EXTREMITY OTH THAN JT W CONTR MATRL		Yes	Yes	Not Cov	Yes		Yes	Yes

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
73220	MRI UPPER EXTREM OTHER THAN JT W O AND W CONTRAS		Yes	Yes	Not Cov	Yes		Yes	Yes
73221	MRI ANY JT UPPER EXTREMITY W O CONTRAST MATRL		Yes	Yes	Not Cov	Yes		Yes	Yes
73222	MRI ANY JT UPPER EXTREMITY W CONTRAST MATRL		Yes	Yes	Not Cov	Yes		Yes	Yes
73223	MRI ANY JT UPPER EXTREMITY W O AND W CONTR MATRL		Yes	Yes	Not Cov	Yes		Yes	Yes
73225	MRA UPPER EXTREMITY W WO CONTRAST MATERIAL		Not Cov	Yes	Not Cov	Yes		Not Cov	Yes
73501	RADEX HIP UNILATERAL WITH PELVIS 1 VIEW		No	No	Not Cov	No		No	No
73502	RADEX HIP UNILATERAL WITH PELVIS 2-3 VIEWS		No	No	Not Cov	No		No	No
73503	RADEX HIP UNILATERAL WITH PELVIS MINIMUM 4 VIEWS		No	No	Not Cov	No		No	No
73521	RADEX HIPS BILATERAL WITH PELVIS 2 VIEWS		No	No	Not Cov	No		No	No
73522	RADEX HIPS BILATERAL WITH PELVIS 3-4 VIEWS		No	No	Not Cov	No		No	No
73523	RADEX HIPS BILATERAL WITH PELVIS MINIMUM 5 VIEWS		No	No	Not Cov	No		No	No
73525	RADEX HIP ARTHROGRAPHY RS AND I		No	No	Not Cov	No		No	No
73551	RADIOLOGIC EXAMINATION FEMUR 1 VIEW		No	No	Not Cov	No		No	No
73552	RADIOLOGIC EXAMINATION FEMUR MINIMUM 2 VIEWS		No	No	Not Cov	No		No	No
73560	RADIOLOGIC EXAMINATION KNEE 1 2 VIEWS		No	No	Not Cov	No		No	No
73562	RADIOLOGIC EXAMINATION KNEE 3 VIEWS		No	No	Not Cov	No		No	No
73564	RADIOLOGIC EXAM KNEE COMPLETE 4 MORE VIEWS		No	No	Not Cov	No		No	No
73565	RADIOLOGIC EXAM BOTH KNEES STANDING ANTEROPOST		No	No	Not Cov	No		No	No
73580	RADIOLOGIC EXAM KNEE ARTHROGRAPHY RS AND I		No	No	Not Cov	No		No	No
73590	RADIOLOGIC EXAMINATION TIBIA AND FIBULA 2 VIEWS		No	No	Not Cov	No		No	No
73592	RADEX LOWER EXTREMITY INFANT MINIMUM 2 VIEWS		No	No	Not Cov	No		No	No
73600	RADIOLOGIC EXAMINATION ANKLE 2 VIEWS		No	No	Not Cov	No		No	No
73610	RADEX ANKLE COMPLETE MINIMUM 3 VIEWS		No	No	Not Cov	No		No	No
73615	RADEX ANKLE ARTHROGRAPHY RS AND I		No	No	Not Cov	No		No	No
73620	RADIOLOGIC EXAMINATION FOOT 2 VIEWS		No	No	Not Cov	No		No	No
73630	RADEX FOOT COMPLETE MINIMUM 3 VIEWS		No	No	Not Cov	No		No	No
73650	RADEX CALCANEUS MINIMUM 2 VIEWS		No	No	Not Cov	No		No	No
73660	RADEX TOE MINIMUM 2 VIEWS		No	No	Not Cov	No		No	No
73700	CT LOWER EXTREMITY W O CONTRAST MATERIAL		Yes	Yes	Not Cov	Yes		Yes	Yes
73701	CT LOWER EXTREMITY W CONTRAST MATERIAL		Yes	Yes	Not Cov	Yes		Yes	Yes
73702	CT LOWER EXTREMITY W O AND W CONTRAST MATRL		Yes	Yes	Not Cov	Yes		Yes	Yes
73706	CT ANGIOGRAPHY LOWER EXTREMITY		Yes	Yes	Not Cov	Yes		Yes	Yes
73718	MRI LOWER EXTREM OTH THN JT W O CONTR MATRL		Yes	Yes	Not Cov	Yes		Yes	Yes
73719	MRI LOWER EXTREM OTH THN JT W CONTRAST MATRL		Yes	Yes	Not Cov	Yes		Yes	Yes
73720	MRI LOWER EXTREM OTH THN JT W O AND W CONTR MATR		Yes	Yes	Not Cov	Yes		Yes	Yes
73721	MRI ANY JT LOWER EXTREM W O CONTRAST MATRL		Yes	Yes	Not Cov	Yes		Yes	Yes
73722	MRI ANY JT LOWER EXTREM W CONTRAST MATERIAL		Yes	Yes	Not Cov	Yes		Yes	Yes
73723	MRI ANY JT LOWER EXTREM W O AND W CONTRAST MATRL		Yes	Yes	Not Cov	Yes		Yes	Yes

This prior authorization guide applies to Medicaid, Medicare, and Marketplace.

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All Inpatient services require prior authorization

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Code	Code Description	Comments	Apple Health & IMC Medical				IMC / BHSO (Mental Health covered svcs)	Medicare	Market Place
			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
73725	MRA LOWER EXTREMITY W WO CONTRAST MATERIAL		Not Cov	Yes	Not Cov	Yes		Yes	Yes
74018	RADIOLOGIC EXAM ABDOMEN 1 VIEW		No	No	Not Cov	No		No	No
74019	RADIOLOGIC EXAM ABDOMEN 2 VIEWS		No	No	Not Cov	No		No	No
74021	RADIOLOGIC EXAM ABDOMEN 3 PLUS VIEWS		No	No	Not Cov	No		No	No
74022	RADEX ABD COMPL AQT ABD W S E D VIEWS 1 VIEW CH		No	No	Not Cov	No		No	No
74150	CT ABDOMEN W O CONTRAST MATERIAL		Yes	Yes	Not Cov	Yes		Yes	Yes
74160	CT ABDOMEN W CONTRAST MATERIAL		Yes	Yes	Not Cov	Yes		Yes	Yes
74170	CT ABDOMEN W O AND W CONTRAST MATERIAL		Yes	Yes	Not Cov	Yes		Yes	Yes
74174	CT ANGIO ABD AND PLVIS CNTRST MTRL W WO CNTRST IMG		Yes	Yes	Not Cov	Yes		Yes	Yes
74175	CT ANGIOGRAPHY ABDOMEN W CONTRAST NONCONTRAST		Yes	Yes	Not Cov	Yes		Yes	Yes
74176	CT ABDOMEN AND PELVIS W O CONTRAST MATERIAL		Yes	Yes	Not Cov	Yes		Yes	Yes
74177	CT ABDOMEN AND PELVIS W CONTRAST MATERIAL		Yes	Yes	Not Cov	Yes		Yes	Yes
74178	CT ABDOMEN AND PELVIS W O CONTRST 1 OR GRT BODY RE		Yes	Yes	Not Cov	Yes		Yes	Yes
74181	MRI ABDOMEN W O CONTRAST MATERIAL		Yes	Yes	Not Cov	Yes		Yes	Yes
74182	MRI ABDOMEN W CONTRAST MATERIAL		Yes	Yes	Not Cov	Yes		Yes	Yes
74183	MRI ABDOMEN W O AND W CONTRAST MATERIAL		Yes	Yes	Not Cov	Yes		Yes	Yes
74185	MRA ABDOMEN W WO CONTRAST MATERIAL		Not Cov	Yes	Not Cov	Yes		Yes	Yes
74190	PERITONEOGRAM RS AND I		No	No	Not Cov	No		No	No
74210	RADEX PHARYNX AND CERVICAL ESOPHAGUS		No	No	Not Cov	No		No	No
74220	RADEX ESOPHAGUS		No	No	Not Cov	No		No	No
74230	SWALLOWING FUNCJ W CINERADIOGRAPY VIDRADIOG		No	No	Not Cov	No		No	No
74235	RMVL FB ESOPHAGEAL W USE BALLOON CATH RS AND I		No	No	Not Cov	No		No	No
74240	RADEX GI TRACT UPPER W WO DELAYED IMAGES W O KUB		No	No	Not Cov	No		No	No
74241	RADEX GI TRACT UPPER W WO DELAYED IMAGES W KUB		No	No	Not Cov	No		No	No
74245	RADEX GI TRACT UPR W SM INT W MULT SERIAL IMAGES		No	No	Not Cov	No		No	No
74246	RADEX UPPER GI W WO GLUCAGON DELAY IMGES W O KUB		No	No	Not Cov	No		No	No
74247	RADEX UPPER GI W WO GLUCAGON DELAY IMAGES W KUB		No	No	Not Cov	No		No	No
74249	RADEX GI UPR W WO GLUCOSE W SM INTEST FOLLW-THRU		No	No	Not Cov	No		No	No
74250	RADEX SMALL INTESTINE W MULTIPLE SERIAL IMAGES		No	No	Not Cov	No		No	No
74251	RADEX SM INT W MLT SRL IMGES VIA ENTEROCLSS TUBE		No	No	Not Cov	No		No	No
74260	DUODENOGRAPY HYPOTONIC		No	No	Not Cov	No		No	No
74261	CT COLONOGRPHY DX IMAGE POSTPROCESS W O CONTRAST		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
74262	CT COLONOGRPHY DX IMAGE POSTPROCESS W CONTRAST		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
74263	CT COLONOGRAPHY SCREENING IMAGE POSTPROCESSING		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Yes
74270	RADEX COLON BARIUM ENEMA W WO KUB		No	No	Not Cov	No		No	No
74280	RADEX COLON W SPEC HI DNS BARIUM W WO GLUCAGON		No	No	Not Cov	No		No	No
74283	THERAPEUTIC ENEMA RDCTJ INTUSSUSCEPTION OBSTRCTJ		No	No	Not Cov	No		No	No
74290	CHOLECYSTOGRAPHY ORAL CONTRST		No	No	Not Cov	No		No	No
74300	CHOLANGIOGRAPHY AND PANCREATOGRAPHY NTRAOP RS AND I		No	No	Not Cov	No		No	No
74301	CHOLANGIO AND PANCREATOGRAPHY ADDL SET INTRAOP RS		No	No	Not Cov	No		No	No
74328	ENDOSCOPIC CATHJ BILIARY DUCTAL SYSTEM RS AND I		No	No	Not Cov	No		No	No
74329	ENDOSCOPIC CATHJ PANCREATIC DUCTAL SYS RS AND I		No	No	Not Cov	No		No	No
74330	CMBN NDSC CATHJ BILIARY AND PNCRTC DUCTAL SYS RS AND I		No	No	Not Cov	No		No	No
74340	INTRO LONG GI TUBE W MULT FLUORO AND IMAGES RS AND I		No	No	Not Cov	No		No	No
74355	PERCUTANEOUS PLACEMENT ENTEROCLYSIS TUBE RS AND I		No	No	Not Cov	No		No	No
74360	INTRALUMINAL DILATION STRICTURES AND OBSTRCTJS RS AND I		No	No	Not Cov	No		No	No
74363	PRQ TRANSHEPATC DILAT BILIARY DUCT STRICTRE RS AND I		No	No	Not Cov	No		No	No
74400	UROGRAPHY IV W WO KUB W WO TOMOGRAPHY		No	No	Not Cov	No		No	No
74410	UROGRAPHY INFUSION DRIP AND BOLUS TECHNIQUE		No	No	Not Cov	No		No	No
74415	UROGRAPY INFUSION DRIP AND BOLUS TECHQ W WO TOMO		No	No	Not Cov	No		No	No
74420	X-RAY URINARY TRACT EXAM WITH CONTRAST MATERIAL		No	No	Not Cov	No		No	No
74425	UROGRAPHY ANTEGRADE RS AND I		No	No	Not Cov	No		No	No
74430	CYSTOGRAPHY MINIMUM 3 VIEWS RS AND I		No	No	Not Cov	No		No	No
74440	VASOGRAPY VESICULOGRAPY EPIDIDYMOGRAPY RS AND I		No	No	Not Cov	No		No	No
74445	CORPORA CAVERNOSOGRAPY RS AND I		No	No	Not Cov	No		No	No
74450	URETHROCYSTOGRAPHY RETROGRADE RS AND I		No	No	Not Cov	No		No	No
74455	URETHROCYSTOGRAPHY VOIDING RS AND I		No	No	Not Cov	No		No	No
74470	RADEX RENAL CYST STUDY TRANSLUMBAR RS AND I		No	No	Not Cov	No		No	No
74485	DILATION NEPHROSTOMY URETER URETHRA RS AND I		No	No	Not Cov	No		No	No
74710	PELVIMETRY W WOPLACENTAL LOCALIZATION		No	No	Not Cov	No		No	No
74712	FETAL MRI W PLACNTL MATRNL PLVC IMG SING 1ST GES		Yes	Yes	Not Cov	Yes		Yes	Yes
74713	FETAL MRI W PLACNTL MATRNL PLVC IMG EA ADDL GES		Yes	Yes	Not Cov	Yes		Yes	Yes
74740	HYSTEROSALPINGOGRAPHY RS AND I		No	No	Not Cov	No		No	No

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			Outpatient		ASC	Office Setting			
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74742	TRANSCERVICAL CATHJ FALLOPIAN TUBE RS AND I		No	No	Not Cov	No	No	No	
74775	PERINEOGRAM		No	No	Not Cov	No	No	No	
75557	CARDIAC MRI MORPHOLOGY AND FUNCTION W O CONTRAST		Yes	Yes	Not Cov	Yes	Yes	Yes	
75559	CARDIAC MRI W O CONTRAST W STRESS IMAGING		Yes	Yes	Not Cov	Yes	Yes	Yes	
75561	CARDIAC MRI W WO CONTRAST AND FURTHER SEQ		Yes	Yes	Not Cov	Yes	Yes	Yes	
75563	CARDIAC MRI W W O CONTRAST W STRESS		Yes	Yes	Not Cov	Yes	Yes	Yes	
75565	CARDIAC MRI FOR VELOCITY FLOW MAPPING		Yes	Yes	Not Cov	Yes	Yes	Yes	
75571	CT HEART NO CONTRAST QUANT EVAL CORONRY CALCIUM		Yes	Yes	Not Cov	Yes	Yes	Yes	
75572	CT HEART CONTRAST EVAL CARDIAC STRUCTURE AND MORPH		Yes	Yes	Not Cov	Yes	Yes	Yes	
75573	CT HRT CONTRST CARDIAC STRUCT AND MORPH CONG HRT D		Yes	Yes	Not Cov	Yes	Yes	Yes	
75574	CTA HRT CORNRY ART BYPASS GRFTS CONTRST 3D POST		Yes	Yes	Not Cov	Yes	Yes	Yes	
75600	AORTOGRAPHY THORACIC W O SERIALOGRAPHY RS AND I		No	No	Not Cov	No	No	No	
75605	AORTOGRAPHY THORACIC SERIALOGRAPHY RS AND I		No	No	Not Cov	No	No	No	
75625	AORTOGRAPHY ABDOMINAL SERIALOGRAPHY RS AND I		No	No	Not Cov	No	No	No	
75630	AORTOGRAPHY ABDL BI ILIOFEM LOW EXTREM CATH RS AND I		No	No	Not Cov	No	No	No	
75635	CTA ABDL AORTA AND BI ILIOFEM W CONTRAST AND POSTP		Yes	Yes	Not Cov	Yes	Yes	Yes	
75705	ANGIOGRAPHY SPINAL SELECTIVE RS AND I		No	No	Not Cov	No	No	No	
75710	ANGIOGRAPHY EXTREMITY UNILATERAL RS AND I		No	No	Not Cov	No	No	No	
75716	ANGIOGRAPHY EXTREMITY BILATERAL RS AND I		No	No	Not Cov	No	No	No	
75726	ANGIOGRAPHY VISCERAL SLCTV SUPRASLCTV RS AND I		No	No	Not Cov	No	No	No	
75731	ANGIOGRAPHY ADRENAL UNILATERAL SLCTV RS AND I		No	No	Not Cov	No	No	No	
75733	ANGIOGRAPHY ADRENAL BILATERAL SLCTV RS AND I		No	No	Not Cov	No	No	No	
75736	ANGIOGRAPHY PELVIC SLCTV SUPRASLCTV RS AND I		No	No	Not Cov	No	No	No	
75741	ANGIOGRAPHY PULMONARY UNILATERAL SLCTV RS AND I		No	No	Not Cov	No	No	No	
75743	ANGIOGRAPHY PULMONARY BILATERAL SLCTV RS AND I		No	No	Not Cov	No	No	No	
75746	ANGRPH PULMONARY NONSLCTV CATH VEN NJX RS AND I		No	No	Not Cov	No	No	No	
75756	ANGIOGRAPHY INTERNAL MAMMARY RS AND I		No	No	Not Cov	No	No	No	
75774	ANGRPH SLCTV EA VSL STUDIED AFTER BASIC XM RS AND I		No	No	Not Cov	No	No	No	
75801	LYMPHANGIOGRAPHY EXTREMITY ONLY UNILATERAL RS AND I		No	No	Not Cov	No	No	No	
75803	LYMPHANGIOGRAPHY EXTREMITY ONLY BILATERAL RS AND I		No	No	Not Cov	No	No	No	
75805	LYMPHANGIOGRAPHY PELVIC ABDOMINAL UNILAT RS AND I		No	No	Not Cov	No	No	No	

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
75807	LYMPHANGIOGRAPHY PELVIC ABDOMINAL BILATERAL RS AND I		No	No	Not Cov	No		No	No
75809	SHUNTOGRAM INDWELLING NONVASCULAR SHUNT RS AND I		No	No	Not Cov	No		No	No
75810	SPLENOPORTOGRAPHY RS AND I		No	No	Not Cov	No		No	No
75820	VENOGRAPHY EXTREMITY UNILATERAL RS AND I		No	No	Not Cov	No		No	No
75822	VENOGRAPHY EXTREMITY BILATERAL RS AND I		No	No	Not Cov	No		No	No
75825	VENOGRAPHY CAVAL INFERIOR SERIALOGRAPHY RS AND I		No	No	Not Cov	No		No	No
75827	VENOGRAPHY CAVAL SUPERIOR SERIALOGRAPHY RS AND I		No	No	Not Cov	No		No	No
75831	VENOGRAPHY RENAL UNILATERAL SELECTIVE RS AND I		No	No	Not Cov	No		No	No
75833	VENOGRAPHY RENAL BILATERAL SELECTIVE RS AND I		No	No	Not Cov	No		No	No
75840	VENOGRAPHY ADRENAL UNILATERAL SELECTIVE RS AND I		No	No	Not Cov	No		No	No
75842	VENOGRAPHY ADRENAL BILATERAL SELECTIVE RS AND I		No	No	Not Cov	No		No	No
75860	VENOGRAPHY VENOUS SINUS JUGULAR CATH RS AND I		No	No	Not Cov	No		No	No
75870	VENOGRAPHY SUPERIOR SAGITTAL SINUS RS AND I		No	No	Not Cov	No		No	No
75872	VENOGRAPHY EPIDURAL RS AND I		No	No	Not Cov	No		No	No
75880	VENOGRAPHY ORBITAL RS AND I		No	No	Not Cov	No		No	No
75885	PRQ TRANSHEPATC PORTOGRAPHY HEMODYN EVAL RS AND I		No	No	Not Cov	No		No	No
75887	PRQ TRANSHEPATC PORTOGRAPHY W O HEMODYN EVL INTRP		No	No	Not Cov	No		No	No
75889	HEPATC VNGRPH WDG FR HEMODYN EVAL RS AND I		No	No	Not Cov	No		No	No
75891	HEPATC VNGRPH WDG FR W O HEMODYN EVAL RS AND I		No	No	Not Cov	No		No	No
75893	VENOUS SAMPLING THRU CATH W WO ANGIOGRAPHY RS AND		No	No	Not Cov	No		No	No
75894	TRANSCATHETER EMBOLIZATION ANY METH RS AND I		No	No	Not Cov	No		No	No
75898	ANGRPH CATH F-UP STD TCAT OTHER THAN THROMBYLSIS		No	No	Not Cov	No		No	No
75901	MECHANICAL RMVL PERICATHETER OBSTR MATRL RS AND I		No	No	Not Cov	No		No	No
75902	MECHANICAL RMVL INTRALUMINAL OBSTR MATRL RS AND I		No	No	Not Cov	No		No	No
75956	EVASC RPR DESCND THORCIC AORTA SUBCLAV ORIG RS AND I		No	No	Not Cov	No		No	No
75957	EVASC RPR DESCND THORCIC AORTA CELIAC ORIG RS AND I		No	No	Not Cov	No		No	No
75958	PLMT PROX XTN PRSTH EVASC DESC THORAC AORTA RS AND I		No	No	Not Cov	No		No	No
75959	PLMT DSTL XTN PRSTH EVASC DESC THORAC AORTA RS AND I		No	No	Not Cov	No		No	No
75970	TRANSCATHETER BIOPSY RS AND I		No	No	Not Cov	No		No	No

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75984	CHANGE PRQ TUBE DRAINAGE CATH W CONTRAST RS AND I		No	No	Not Cov	No		No	No
75989	RADIOLOGICAL GUIDANCE PRQ DRG W PLMT CATH RS AND I		No	No	Not Cov	No		No	No
76000	FLUOROSCOPY UP TO 1 HOUR PHYSICIAN QHP TIME		No	No	Not Cov	No		No	No
76010	RADEX FROM NOSE RECTUM FOREIGN BODY 1 VIEW CHLD		No	No	Not Cov	No		No	No
76080	RADEX ABSCESS FISTULA SINUS TRACT RS AND I		No	No	Not Cov	No		No	No
76098	RADIOLOGICAL EXAMINATION SURGICAL SPECIMEN		No	No	Not Cov	No		No	No
76100	RADEX 1 PLNE BODY SECTION OTH THN W UROGRAPY		No	No	Not Cov	No		No	No
76101	RADEX CPLX MOTION BDY SCTJ OTH THN UROGRAPY UNI		No	No	Not Cov	No		No	No
76102	RADEX CPLX MOTION BDY SCTJ OTH THN UROGRAPY BI		No	No	Not Cov	No		No	No
76120	CINERADIOGRAPY VIDRADIOGRAPY XCPT WHERE SPEC		No	No	Not Cov	No		No	No
76125	CINERADIOGRAPY VIDRADIOGRAPY ROUTINE EXAMINATION		No	No	Not Cov	No		No	No
76140	CONSLTJ X-RAY XM MADE ELSEWHERE WRITTN REPR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
76376	3D RENDERING W INTERP AND POSTPROCESS SUPERVISION		Yes	Yes	Not Cov	Yes		Yes	Yes
76377	3D RENDERING W INTERP AND POSTPROC DIFF WORK STATION		Yes	Yes	Not Cov	Yes		Yes	Yes
76380	CT LIMITED LOCALIZED FOLLOW UP STUDY		Yes	Yes	Not Cov	Yes		No	Yes
76390	MRI SPECTROSCOPY		Yes	Yes	Not Cov	Yes		Not Cov	Yes
76391	MAGNETIC RESONANCE ELASTOGRAPHY		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
76496	UNLISTED FLUOROSCOPIC PROCEDURE		Yes	Yes	Not Cov	Yes		No	Yes
76497	UNLISTED COMPUTED TOMOGRAPHY PROCEDURE		Yes	Yes	Not Cov	Yes		Yes	Yes
76498	UNLISTED MAGNETIC RESONANCE PROCEDURE		Yes	Yes	Not Cov	Yes		Yes	Yes
76499	UNLISTED DIAGNOSTIC RADIOGRAPHIC PROCEDURE		Yes	Yes	Not Cov	Yes		No	Yes
76506	ECHOENCEPHALOGRAPHY REAL TIME IMAGING		No	No	Not Cov	No		No	No
76510	OPH US DX B-SCAN AND QUAN A-SCAN SM PT ENCTR		No	No	Not Cov	No		No	No
76511	OPHTHALMIC ULTRASOUND DX QUAN A-SCAN ONLY		No	No	Not Cov	No		No	No
76512	OPHTHALMIC ULTRASOUND DX B-SCAN W WO A-SCAN		No	No	Not Cov	No		No	No
76513	OPH US DX ANT SGM US IMMERSION B-SCAN HR BIOM		No	No	Not Cov	No		No	No
76514	OPHTHALMIC US DX CORNEAL PACHYMETRY UNI BI		No	No	Not Cov	No		No	No
76516	OPHTHALMIC BIOMETRY US ECHOGRAPY A-SCAN		No	No	Not Cov	No		No	No
76519	OPH BMTRY US ECHOGRAPY A-SCAN IO LENS PWR CAL		No	No	Not Cov	No		No	No
76529	OPHTHALMIC ULTRASONIC FOREIGN BODY LOCALIZATION		No	No	Not Cov	No		No	No
76536	US SOFT TISSUE HEAD AND NECK REAL TIME IMGE DOCM		No	No	Not Cov	No		No	No
76604	US CHEST REAL TIME W IMAGE DOCUMENTATION		No	No	Not Cov	No		No	No
76641	US BREAST UNI REAL TIME WITH IMAGE COMPLETE		No	No	Not Cov	No		No	No
76642	US BREAST UNI REAL TIME WITH IMAGE LIMITED		No	No	Not Cov	No		No	No
76700	US ABDOMINAL REAL TIME W IMAGE DOCUMENTATION		No	No	Not Cov	No		No	No
76705	US ABDOMINAL REAL TIME W IMAGE LIMITED		No	No	Not Cov	No		No	No

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76706	US ABDOMINAL AORTA REAL TIME SCREEN STUDY AAA		No	No	Not Cov	No	No	No	
76770	US RETROPERITONEAL REAL TIME W IMAGE COMPLETE		No	No	Not Cov	No	No	No	
76775	US RETROPERITONEAL REAL TIME W IMAGE LIMITED		No	No	Not Cov	No	No	No	
76776	US TRNSPLNT KIDNEY REAL TIME W IMAGE DOCMTN		No	No	Not Cov	No	No	No	
76800	ULTRASOUND SPINAL CANAL AND CONTENTS		No	No	Not Cov	No	No	No	
76801	US PREGNANT UTERUS 14 WK TRANSABDL 1 1ST GESTAT		No	No	Not Cov	No	No	No	
76802	US PREG UTERUS 14 WK TRANSABDL EACH GESTATION		No	No	Not Cov	No	No	No	
76805	US PREG UTERUS AFTER 1ST TRIMEST 1 1ST GESTATION		No	No	Not Cov	No	No	No	
76810	US PREG UTERUS OVER 1ST TRIMESTER ABDL EA GESTATIO		No	No	Not Cov	No	No	No	
76811	US PREG UTERUS W DETAIL FETAL ANAT 1ST GESTATION		No	No	Not Cov	No	No	No	
76812	US PREG UTERUS DETAIL FETAL ANAT EXAM EA GESTAT		No	No	Not Cov	No	No	No	
76813	US FETAL NUCHAL TRANSLUCENCY 1ST GESTATION		No	No	Not Cov	No	No	No	
76814	US FETAL NUCHAL TRANSLUCENCY EA ADDL GESTATION		No	No	Not Cov	No	No	No	
76815	US PREGNANT UTERUS LIMITED 1 OR GRT FETUSES		No	No	Not Cov	No	No	No	
76816	US PREG UTERUS REAL TIME F U TRNSABDL PER FETUS		No	No	Not Cov	No	No	No	
76817	US PREG UTERUS REAL TIME W IMAGE DCMTN TRANSVAG		No	No	Not Cov	No	No	No	
76818	FETAL BIOPHYSICAL PROFILE NON-STRESS TESTING		No	No	Not Cov	No	No	No	
76819	FETAL BIOPHYSICAL PROFILE W O NON-STRESS TESTING		No	No	Not Cov	No	No	No	
76820	DOPPLER VELOCIMETRY FETAL UMBILICAL ARTERY		No	No	Not Cov	No	No	No	
76821	DOPPLER VELOCIMETRY FETAL MIDDLE CEREBRAL ART		No	No	Not Cov	No	No	No	
76825	ECHO FETAL CARDIOVASC W WO M-MODE RECORDING		No	No	Not Cov	No	No	No	
76826	ECHO FETAL CARDIOVASC W WO M-MODE REPEAT STD		No	No	Not Cov	No	No	No	
76827	DOPPLER ECHO FETAL SPECTRAL DISPLAY COMPLETE		No	No	Not Cov	No	No	No	
76828	DOPPLER ECHO FETAL PULS SPECTRAL F U REPEAT		No	No	Not Cov	No	No	No	
76830	US TRANSVAGINAL		No	No	Not Cov	No	No	No	
76831	SALINE INFUS SONOHYSTEROGRAPHY W COLOR DOPPLER		No	No	Not Cov	No	No	No	
76856	US PELVIC NONOBSTETRIC REAL-TIME IMAGE COMPLETE		No	No	Not Cov	No	No	No	
76857	US PELVIC NONOBSTETRIC IMAGE DCMTN LIMITED F U		No	No	Not Cov	No	No	No	
76870	US SCROTUM AND CONTENTS		No	No	Not Cov	No	No	No	
76872	US TRANSRECTAL		No	No	Not Cov	No	No	No	
76873	US TRANSRCT PRSTATE VOL BRACHYTX PLNNING SPX		No	No	Not Cov	No	No	No	
76881	US COMPL JOINT R-T W IMAGE DOCUMENTATION		No	No	Not Cov	No	No	No	
76882	US LMTD JOINT OTH NONVASC XTR STRUX R-T W IMG		No	No	Not Cov	No	No	No	
76885	US INFT HIPS R-T IMG DYNAMIC REQ PHYS QHP MANJ		No	No	Not Cov	No	No	No	
76886	US INFT HIPS R-T IMG LMTD STATIC PHYS QHP MANJ		No	No	Not Cov	No	No	No	
76930	US GUIDANCE PERICARDIOCENTESIS RS AND I		No	No	Not Cov	No	No	No	
76932	US ENDOMYOCARDIAL BIOPSY RS AND I		No	No	Not Cov	No	No	No	

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			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
76936	US CMPRN RPR ARTL PSEUDOARYSM ARVEN FSTL		No	No	Not Cov	No	No	No	
76937	US VASC ACCESS SITS VSL PATENCY NDL ENTRY		No	No	Not Cov	No	No	No	
76940	US AND MNTR PARENCHYMAL TISSUE ABLATION		No	No	Not Cov	No	No	No	
76941	US INTRAUTERINE FTL TFUJ CORDOCNTS IMG S AND I		No	No	Not Cov	No	No	No	
76942	US GUIDANCE NEEDLE PLACEMENT IMG S AND I		No	No	Not Cov	No	No	No	
76945	US GUIDANCE CHORIONIC VILLUS SAMPLING IMG S AND I		No	No	Not Cov	No	No	No	
76946	US GUIDANCE AMNIOCENTESIS IMG S AND I		No	No	Not Cov	No	No	No	
76948	US GUIDANCE ASPIRATION OVA IMG S AND I		No	No	Not Cov	No	No	No	
76965	US GUIDANCE INTERSTITIAL RADIOELMENT APPLICATION		No	No	Not Cov	No	No	No	
76970	US STUDY FOLLOW UP		No	No	Not Cov	No	No	No	
76975	GI ENDOSCOPIC US S AND I		No	No	Not Cov	No	No	No	
76977	US BONE DENSITY MEAS AND INTERP PERIPH ANY METHO		No	No	Not Cov	No	No	No	
76978	ULTRASOUND TRGT DYNAMIC MICROBUBBLE 1ST LESION		No	No	Not Cov	No	No	No	
76979	ULTRASOUND TRGT DYNAMIC MICROBUBBLE EA ADDL LES		No	No	Not Cov	No	No	No	
76981	ULTRASOUND ELASTOGRAPHY PARENCHYMA		No	No	Not Cov	No	No	No	
76982	ULTRASOUND ELASTOGRAPHY FIRST TARGET LESION		No	No	Not Cov	No	No	No	
76983	ULTRASOUND ELASTOGRAPHY EA ADDL TAGET LESION		No	No	Not Cov	No	No	No	
76998	ULTRASONIC GUIDANCE INTRAOPERATIVE		No	No	Not Cov	No	No	No	
76999	UNLISTED US PROCEDURE		Yes	Yes	Not Cov	Yes	Yes	Yes	
77001	FLURO CENTRAL VENOUS ACCESS DEV PLACEMENT		No	No	Not Cov	No	No	No	
77002	FLUOROSCOPIC GUIDANCE NEEDLE PLACEMENT ADD ON		No	No	Not Cov	No	No	No	
77003	FLUOR NEEDLE CATH SPINE PARASPINAL DX THER ADDON		Yes	Yes	Not Cov	Yes	Yes	Yes	
77011	CT GUIDANCE STEREOTACTIC LOCALIZATION		No	No	Not Cov	No	No	No	
77012	CT GUIDANCE NEEDLE PLACEMENT		No	No	Not Cov	No	No	No	
77013	CT GUIDANCE AND MONITORING VISC TISS ABLATION		No	No	Not Cov	No	No	No	
77014	CT GUIDANCE RADIATION THERAPY FLDS PLACEMENT		No	No	Not Cov	No	No	No	
77021	MR GUIDANCE NEEDLE PLACEMENT		No	No	Not Cov	No	No	No	
77022	MR GUIDANCE AND MONITORING TISSUE ABLATION		No	No	Not Cov	No	No	No	
77046	MRI BREAST WITHOUT CONTRAST MATERIAL UNILATERAL		Yes	Yes	Not Cov	Yes	Yes	Yes	
77047	MRI BREAST WITHOUT CONTRAST MATERIAL BILATERAL		Yes	Yes	Not Cov	Yes	Yes	Yes	
77048	MRI BREAST W OUT AND WITH CONTRAST W CAD UNILATERAL		Yes	Yes	Not Cov	Yes	Yes	Yes	
77049	MRI BREAST WITHOUT AND WITH CONTRAST W CAD BILATERAL		Yes	Yes	Not Cov	Yes	Yes	Yes	
77053	MAMMARY DUCTOGRAM OR GALACTOGRAM SINGLE		No	No	Not Cov	No	No	No	
77054	MAMMARY DUCTOGRAM OR GALACTOGRAM MULTIPLE		No	No	Not Cov	No	No	No	
77061	DIGITAL BREAST TOMOSYNTHESIS UNILATERAL		Not Cov	No	Not Cov	No	Not Cov	No	

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77062	DIGITAL BREAST TOMOSYNTHESIS BILATERAL		Not Cov	No	Not Cov	No	Not Cov	No	
77063	SCREENING DIGITAL BREAST TOMOSYNTHESIS BI		No	No	Not Cov	No	No	No	
77065	DIAGNOSTIC MAMMOGRAPHY COMPUTER-AIDED DETCJ UNI		No	No	Not Cov	No	No	No	
77066	DIAGNOSTIC MAMMOGRAPHY COMPUTER-AIDED DETCJ BI		No	No	Not Cov	No	No	No	
77067	SCREENING MAMMOGRAPHY BI 2-VIEW BREAST INC CAD		No	No	Not Cov	No	No	No	
77071	MANUAL APPL STRESS PFRMD PHYS QHP JOINT FILMS		No	No	Not Cov	No	No	No	
77072	BONE AGE STUDIES		No	No	Not Cov	No	No	No	
77073	BONE LENGTH STUDIES		No	No	Not Cov	No	No	No	
77074	RADIOLOGIC EXAMINATION OSSEOUS SURVEY LIMITED		No	No	Not Cov	No	No	No	
77075	RADIOLOGIC EXAMINATION OSSEOUS SURVEY COMPL		No	No	Not Cov	No	No	No	
77076	RADIOLOGIC EXAMINATION OSSEOUS SURVEY INFANT		No	No	Not Cov	No	No	No	
77077	JOINT SURVEY SINGLE VIEW 2 OR MORE JOINTS		No	No	Not Cov	No	No	No	
77078	CT BONE MINERL DENSITY STUDY 1 OR GRT SITS AXIAL SKE		No	No	Not Cov	No	No	No	
77080	DXA BONE DENSITY STUDY 1 OR GRT SITES AXIAL SKEL		No	No	Not Cov	No	No	No	
77081	DXA BONE DENSITY STUDY 1 OR GRT SITES APPENDICLR SKEL		No	No	Not Cov	No	No	No	
77084	BONE MARROW BLOOD SUPPLY		Yes	Yes	Not Cov	Yes	Yes	Yes	
77085	DXA BONE DENSITY STUDY AXIAL SKELETON		No	No	Not Cov	No	No	No	
77086	VERTEBRAL FRACTURE ASSESSMENT VIA DXA		No	No	Not Cov	No	No	No	
77261	THERAPEUTIC RADIOLOGY TX PLANNING SIMPLE		Not Cov	No	Not Cov	No	No	Yes	
77262	THERAPEUTIC RADIOLOGY TX PLANNING INTERMEDIATE		Not Cov	No	Not Cov	No	No	No	
77263	THERAPEUTIC RADIOLOGY TX PLANNING COMPLEX		Not Cov	No	Not Cov	No	No	No	
77280	THER RAD SIMULAJ-AIDED FIELD SETTING SIMPLE		No	No	Not Cov	No	No	No	
77285	THER RAD SIMULAJ-AIDED FIELD SETTING INTERMED		No	No	Not Cov	No	No	No	
77290	THER RAD SIMULAJ-AIDED FIELD SETTING COMPLEX		No	No	Not Cov	No	No	No	
77293	RESPIRATORY MOTION MANAGEMENT SIMULATION		No	No	Not Cov	No	No	No	
77295	3-D RADIOTHERAPY PLAN DOSE-VOLUME HISTOGRAMS		No	No	Not Cov	No	No	No	
77299	UNLIS PX THER RADIOL CLINICAL TX PLANNING		Yes	Yes	Not Cov	Yes	No	No	
77300	BASIC RADIATION DOSIMETRY CALCULATION		No	No	Not Cov	No	No	No	
77301	NTSTY MODUL RADTHX PLN DOSE-VOL HISTOS		No	No	Not Cov	No	No	No	
77306	TELETHX ISODOSE PLN SMPL W DOSIMETRY CALCULATION		No	No	Not Cov	No	No	No	
77307	TELETHX ISODOSE PLN CPLX W BASIC DOSIMETRY		No	No	Not Cov	No	No	No	
77316	BRACHYTX ISODOSE PLN SMPL W DOSIMETRY CAL		No	No	Not Cov	No	No	No	
77317	BRACHYTX ISODOSE PLN INTERMED W DOSIMETRY CAL		No	No	Not Cov	No	No	No	
77318	BRACHYTX ISODOSE PLN CPLX W DOSIMETRY CAL		No	No	Not Cov	No	No	No	
77321	SPEC TELETHX PORT PLN PARTS HEMIBDY TOT BDY		No	No	Not Cov	No	No	No	
77331	SPEC DOSIM ONLY PRESCRIBED TREATING PHYS		No	No	Not Cov	No	No	No	
77332	TX DEVICES DESIGN AND CONSTRUCTION SIMPLE		No	No	Not Cov	No	No	No	

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			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
77333	TX DEVICES DESIGN AND CONSTRUCTION INTERMEDIATE		No	No	Not Cov	No		No	No
77334	TX DEVICES DESIGN AND CONSTRUCTION COMPLEX		Yes	Yes	Not Cov	Yes		No	Yes
77336	CONTINUING MEDICAL PHYSICS CONSLTJ PR WK		No	No	Not Cov	No		No	No
77338	MLC IMRT DESIGN AND CONSTRUCTION PER IMRT PLAN		No	No	Not Cov	No		No	No
77370	SPEC MEDICAL RADJ PHYSICS CONSLTJ		No	No	Not Cov	No		No	No
77371	RADIATION DELIVERY STEREOTACTIC CRANIAL COBALT		No	No	Not Cov	No		No	No
77372	RADIATION DELIVERY STEREOTACTIC CRANIAL LINEAR		Yes	Yes	Not Cov	Yes		No	Yes
77373	STEREOTACTIC BODY RADIATION DELIVERY		Yes	Yes	Not Cov	Yes		No	Yes
77385	INTENSITY MODULATED RADIATION TX DLVR SIMPLE		Yes	Yes	Not Cov	Yes		Not Cov	No
77386	INTENSITY MODULATED RADIATION TX DLVR COMPLEX		No	No	Not Cov	No		Not Cov	No
77387	GUIDANCE FOR LOC OF TARGET VOL RADIAJ TX DLVR		No	No	Not Cov	No		Not Cov	No
77399	UNLIS MEDICAL RADJ DOSIM TX DEV SPEC SVCS		Yes	Yes	Not Cov	Yes		No	Yes
77401	RADIATION TX DELIVERY SUPERFICIAL AND ORTHO VOLTA		No	No	Not Cov	No		No	No
77402	RADIATION TREATMENT DELIVERY 1 MEV PLUS SIMPLE		No	No	Not Cov	No		Not Cov	No
77407	RADIATION TX DELIVERY 1 MEV EQ OVER INTERMEDIATE		No	No	Not Cov	No		Not Cov	No
77412	RADIATION TREATMENT DELIVERY 1 MEV EQ OVER COMPLEX		No	No	Not Cov	No		Not Cov	No
77417	THERAPEUTIC RADIOLOGY PORT IMAGES(S)		No	No	Not Cov	No		No	No
77423	HIGH ENERGY NEUTRON RADJ TX DLVR 1 OR GRT ISOCENTER		No	No	Not Cov	No		No	No
77424	INTRAOP RADIAJ TX DELIVER XRAY SINGLE TX SESSION		No	No	Not Cov	No		No	No
77425	INTRAOP RADIAJ TX DELIVER ELECTRONS SNGL TX SESS		Yes	Yes	Not Cov	Yes		No	No
77427	RADIATION TREATMENT MANAGEMENT 5 TREATMENTS		Not Cov	No	Not Cov	No		No	No
77431	RADIATION THERAPY MGMT 1 2 FRACTIONS ONLY		Not Cov	No	Not Cov	No		No	No
77432	STERETCTC RADIATION TX MANAGEMENT CRANIAL LESION		Not Cov	No	Not Cov	No		No	No
77435	STEREOTACTIC BODY RADIATION MANAGEMENT		No	No	Not Cov	No		No	No
77469	INTRAOPERATIVE RADIATION TREATMENT MANAGEMENT		No	No	Not Cov	No		No	No
77470	SPECIAL TREATMENT PROCEDURE		No	No	Not Cov	No		No	No
77499	UNLISTED PROCEDURE THERAPEUTIC RADIOLOGY TX MGMT		Not Cov	Yes	Not Cov	Yes		No	No
77520	PROTON TX DELIVERY SIMPLE W O COMPENSATION		Yes	Yes	Not Cov	Yes		Yes	Yes
77522	PROTON TX DELIVERY SIMPLE W COMPENSATION		Yes	Yes	Not Cov	Yes		Yes	Yes
77523	PROTON TX DELIVERY INTERMEDIATE		Yes	Yes	Not Cov	Yes		Yes	Yes
77525	PROTON TX DELIVERY COMPLEX		Yes	Yes	Not Cov	Yes		Yes	Yes
77600	HYPERTHERMIA EXTERNAL GENERATED SUPERFICIAL		No	No	Not Cov	No		No	No
77605	HYPERTHERMIA EXTERNAL GENERATED DEEP		No	No	Not Cov	No		No	No
77610	HYPERTHERMIA INTERSTITIAL PROBE 5 OR LESS APPLICATORS		No	No	Not Cov	No		No	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
77615	HYPERTHERMIA INTERSTIAL PROBE 5 OR GRT APPLICATORS		No	No	Not Cov	No		No	No
77620	HYPERTHERMIA INTRACAVITARY PROBES		No	No	Not Cov	No		No	No
77750	NFS INSTLJ RADIOELMNT SLN 3 MO FOLLOW-UP CARE		No	No	Not Cov	No		No	No
77761	INTRACAVITARY RADIATION SOURCE APPLIC SIMPLE		No	No	Not Cov	No		No	No
77762	INTRACAVITARY RADIATION SOURCE APPLIC INTERMED		No	No	Not Cov	No		No	No
77763	INTRACAVITARY RADIATION SOURCE APPLIC COMPLEX		No	No	Not Cov	No		No	No
77767	HDR RDNCL SKN SURF BRACHYTX LES UNDER 2CM 1 CHAN		Not Cov	Not Cov	Not Cov	Not Cov		No	No
77768	HDR RDNCL SK SRF BRCHYTX LES OVER 2CM AND 2CHAN MLT LES		Not Cov	Not Cov	Not Cov	Not Cov		No	No
77770	HDR RDNCL NTRSTL INTRCAV BRACHYTX 1 CHANNEL		No	No	Not Cov	No		No	No
77771	HDR RDNCL NTRSTL INTRCAV BRACHYTX 2-12 CHANNEL		No	No	Not Cov	No		No	No
77772	HDR RDNCL NTRSTL INTRCAV BRACHYTX OVER 12 CHANNELS		No	No	Not Cov	No		No	No
77778	INTERSTITIAL RADIATION SOURCE APPLIC COMPLEX		No	No	Not Cov	No		No	No
77789	SURFACE APPLIC LOW DOSE RATE RADIONUCLIDE SOURCE		No	No	Not Cov	No		No	No
77790	SUPERVISION HANDLING LOADING RADIATION SOURCE		No	No	Not Cov	No		No	No
77799	UNLISTED PROCEDURE CLINICAL BRACHYTHERAPY		Yes	Yes	Not Cov	Yes		No	Yes
78012	THYROID UPTAKE SINGLE MULTIPLE QUANT MEASUREMENT		No	No	Not Cov	No		No	No
78013	THYROID IMAGING WITH VASCULAR FLOW		No	No	Not Cov	No		No	No
78014	THYROID UPTAKE W BLOOD FLOW SNGLE MULT QUAN MEAS		No	No	Not Cov	No		No	No
78015	THYROID CARCINOMA METASTASES IMG LMTD AREA		No	No	Not Cov	No		No	No
78016	THYROID CARCINOMA METASTASES IMG ADDL STUDY		No	No	Not Cov	No		No	No
78018	THYROID CARCINOMA METASTASES IMG WHOLE BODY		No	No	Not Cov	No		No	No
78020	THYROID CARCINOMA METASTASES UPTAKE		No	No	Not Cov	No		No	No
78070	PARATHYROID PLANAR IMAGING		No	No	Not Cov	No		No	No
78071	PARATHYROID PLANAR IMAGING W WO SUBTRACTION		No	No	Not Cov	No		No	No
78072	PARATHYROID IMAGING W TOMOGRAPHIC SPECT AND CT		No	No	Not Cov	No		No	No
78075	ADRENAL IMAGING CORTEX AND MEDULLA		No	No	Not Cov	No		No	No
78099	UNLISTED ENDOCRINE PX DX NUCLEAR MEDICINE		Yes	Yes	Not Cov	Yes		No	Yes
78102	BONE MARROW IMAGING LIMITED AREA		No	No	Not Cov	No		No	No
78103	BONE MARROW IMAGING MULTIPLE AREAS		No	No	Not Cov	No		No	No
78104	BONE MARROW IMAGING WHOLE BODY		No	No	Not Cov	No		No	No
78110	PLASMA VOL RADIOPHARM VOL DILUTION SPX 1 SAMPLE		No	No	Not Cov	No		No	No
78111	PLASMA VOL RADIOPHARM VOL DILUTE SPX MULT SMPLES		No	No	Not Cov	No		No	No
78120	RED CELL VOLUME DETERMINATION SPX 1 SAMPLING		No	No	Not Cov	No		No	No

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			Outpatient		ASC	Office Setting			
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78121	RED CELL VOLUME DETERMINATION SPX MULT SAMPLINGS		No	No	Not Cov	No		No	No
78122	WHOLE BLOOD VOLUME DETERM PLASMA AND RED CELL VOLU		No	No	Not Cov	No		No	No
78130	RED CELL SURVIVAL STUDY		No	No	Not Cov	No		No	No
78135	RBC SURVIVAL STUDY DIFFERNTL ORGAN TISS KINETICS		No	No	Not Cov	No		No	No
78140	LABELED RBC SEQUESTRATION DIFFERNTL ORGAN TISSUE		No	No	Not Cov	No		No	No
78185	SPLEEN IMAGING ONLY W WO VASCULAR FLOW		No	No	Not Cov	No		No	No
78191	PLATELET SURVIVAL STUDY		No	No	Not Cov	No		No	No
78195	LYMPHATICS AND LYMPH NODES IMAGING		No	No	Not Cov	No		No	No
78199	UNLIS HEMATOP RET ENDO AND LYMPHATIC DX NUC MED		Yes	Yes	Not Cov	Yes		No	Yes
78201	LIVER IMAGING STATIC ONLY		No	No	Not Cov	No		No	No
78202	LIVER IMAGING W VASCULAR FLOW		No	No	Not Cov	No		No	No
78205	LIVER IMAGING SPECT		Yes	Yes	Not Cov	Yes		Yes	Yes
78206	LIVER IMAGING SPECT W VASCULAR FLOW		Yes	Yes	Not Cov	Yes		Yes	Yes
78215	LIVER AND SPLEEN IMAGING STATIC ONLY		No	No	Not Cov	No		No	No
78216	LIVER AND SPLEEN IMAGING W VASCULAR FLOW		No	No	Not Cov	No		No	No
78226	HEPATOBIILIARY SYST IMAGING INCLUDING GALLBLADDER		No	No	Not Cov	No		No	No
78227	HEPATOBI SYST IMAG INC GB W PHARMA INTERVENJ		No	No	Not Cov	No		No	No
78230	SALIVARY GLAND IMAGING		No	No	Not Cov	No		No	No
78231	SALIVARY GLAND IMAGING SERIAL IMAGES		No	No	Not Cov	No		No	No
78232	SALIVARY GLAND FUNCTION STUDY		No	No	Not Cov	No		No	No
78258	ESOPHAGEAL MOTILITY		No	No	Not Cov	No		No	No
78261	GASTRIC MUCOSA IMAGING		No	No	Not Cov	No		No	No
78262	GASTROESOPHAGEAL REFLUX STUDY		No	No	Not Cov	No		No	No
78264	GASTRIC EMPTYING IMAGING STUDY		No	No	Not Cov	No		No	No
78265	GASTRIC EMPTYNG IMAG STD W SM BWL TRANSIT		No	No	Not Cov	No		No	No
78266	GSTRC EMPTNG IMAG STD W SM BWL COL TRNST MLT DAY		No	No	Not Cov	No		No	No
78267	UREA BREATH TEST C-14 ISOTOPIC ACQUISJ ANALYSIS		No	No	Not Cov	No		No	No
78268	UREA BREATH TEST C-14 ISOTOPIC ANALYSIS		No	No	Not Cov	No		No	No
78278	ACUTE GASTROINTESTINAL BLOOD LOSS IMAGING		No	No	Not Cov	No		No	No
78282	GASTROINTESTINAL PROTEIN LOSS		No	No	Not Cov	No		No	No
78290	INTESTINE IMAGING		No	No	Not Cov	No		No	No
78291	PERITONEAL-VEINUS SHUNT PATENCY TEST		No	No	Not Cov	No		No	No
78299	UNLISTED GASTROINTESTINAL PX DX NUCLEAR MEDICINE		Yes	Yes	Not Cov	Yes		No	Yes
78300	BONE AND JOINT IMAGING LIMITED AREA		No	No	Not Cov	No		No	No
78305	BONE AND JOINT IMAGING MULTIPLE AREAS		No	No	Not Cov	No		No	No
78306	BONE AND JOINT IMAGING WHOLE BODY		No	No	Not Cov	No		No	No
78315	BONE AND JOINT IMAGING 3 PHASE STUDY		No	No	Not Cov	No		No	No
78320	BONE AND JOINT IMAGING TOMOGRAPHIC SPECT		Yes	Yes	Not Cov	Yes		Yes	Yes

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
78350	BONE DENSITY 1 OR GRT SITES 1 PHOTON ABSORPTIOMETRY		No	No	Not Cov	No		Not Cov	No
78351	BONE DENSTY 1 OR GRT SITES DUAL PHOTON ABSORPTIOMETR		No	No	Not Cov	No		Not Cov	No
78399	UNLISTED MUSCULOSKELETAL PX DX NUCLEAR MEDICINE		Yes	Yes	Not Cov	Yes		No	Yes
78414	CARD-VASC HEMODYNAM W WO PHARM EXER 1 MLT DETERM		No	No	Not Cov	No		No	No
78428	CARDIAC SHUNT DETECTION		No	No	Not Cov	No		No	No
78445	NONCARDIAC VASCULAR FLOW IMAGING		No	No	Not Cov	No		No	No
78451	MYOCARDIAL SPECT SINGLE STUDY AT REST OR STRESS		Yes	Yes	Not Cov	Yes		Yes	Yes
78452	MYOCARDIAL SPECT MULTIPLE STUDIES		Yes	Yes	Not Cov	Yes		Yes	Yes
78453	MYOCARDIAL PERFUSION PLANAR 1 STUDY REST STRESS		Yes	Yes	Not Cov	Yes		Yes	Yes
78454	MYOCARDIAL PERFUSION PLANAR MULTIPLE STUDIES		Yes	Yes	Not Cov	Yes		Yes	Yes
78456	ACUTE VENOUS THROMBOSIS IMAGING PEPTIDE		No	No	Not Cov	No		No	No
78457	VENOUS THROMBOSIS IMAGING VENOGRAM UNILATERAL		No	No	Not Cov	No		No	No
78458	VENOUS THROMBOSIS IMAGING VENOGRAM BILATERAL		No	No	Not Cov	No		No	No
78459	MYOCARDIAL IMAGING PET METABOLIC EVALUATION		Yes	Yes	Not Cov	Yes		Yes	Yes
78466	MYOCARDIAL IMAGING INFARCT AVID PLANAR QUAL QUAN		Yes	Yes	Not Cov	Yes		Yes	Yes
78468	MYOCRD IMG INFARCT AVID PLNR EJEC FXJ 1ST PS TQ		Yes	Yes	Not Cov	Yes		Yes	Yes
78469	MYOCRD INFARCT AVID PLNR TOMOG SPECT W WO QUANTJ		Yes	Yes	Not Cov	Yes		Yes	Yes
78472	CARD BLOOD POOL GATED PLANAR 1 STUDY REST STRESS		Yes	Yes	Not Cov	Yes		Yes	Yes
78473	CARD BL POOL GATED MLT STDY WAL MOTN EJECT FRACT		Yes	Yes	Not Cov	Yes		Yes	Yes
78481	CARD BL POOL PLANAR 1 STDY WAL MOTN EJECT FRACT		Yes	Yes	Not Cov	Yes		Yes	Yes
78483	CARD BL POOL PLNR MLT STDY WAL MOTN EJECT FRACT		Yes	Yes	Not Cov	Yes		Yes	Yes
78491	MYOCRD IMAGE PET PERFUS SINGLE STUDY REST STRESS		Yes	Yes	Not Cov	Yes		Yes	Yes
78492	MYOCRD IMAGE PET PERFUS MULTPL STUDY REST STRESS		Yes	Yes	Not Cov	Yes		Yes	Yes
78494	CARD BL POOL GATED SPECT REST WAL MOTN EJCT FRCT		Yes	Yes	Not Cov	Yes		Yes	Yes
78496	CARD BL POOL GATED 1 STDY REST RT VENT EJCT FRCT		Yes	Yes	Not Cov	Yes		Yes	Yes
78499	UNLISTED CARDIOVASCULAR PX DX NUCLEAR MEDICINE		Yes	Yes	Not Cov	Yes		Yes	Yes
78579	PULMONARY VENTILATION IMAGING		No	No	Not Cov	No		No	No
78580	PULMONARY PERFUSION IMAGING PARTICULATE		No	No	Not Cov	No		No	No
78582	PULMONARY VENTILATION AND PERFUSION IMAGING		No	No	Not Cov	No		No	No

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78597	QUANT DIFFERENTIAL PULM PERFUSION W WO IMAGING		No	No	Not Cov	No		No	No
78598	QUANT DIFF PULM PRFUSION AND VENTLAJ W WO IMAGIN		No	No	Not Cov	No		No	No
78599	UNLISTED RESPIRATORY PX DX NUCLEAR MEDICINE		Yes	Yes	Not Cov	Yes		No	Yes
78600	BRAIN IMAGING UNDER 4 STATIC VIEWS		No	No	Not Cov	No		No	No
78601	BRAIN IMAGING UNDER 4 STATIC VIEWS W VASCULAR FLOW		No	No	Not Cov	No		No	No
78605	BRAIN IMAGING MINIMUM 4 STATIC VIEWS		No	No	Not Cov	No		No	No
78606	BRAIN IMAGING MIN 4 STATIC VIEWS W VASCULAR FLOW		No	No	Not Cov	No		No	No
78607	BRAIN IMAGING TOMOGRAPHIC SPECT		Yes	Yes	Not Cov	Yes		Yes	Yes
78608	BRAIN IMAGING PET METABOLIC EVALUATION		Yes	Yes	Not Cov	Yes		Yes	Yes
78609	BRAIN IMAGING PET PERFUSION EVALUATION		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Yes
78610	BRAIN IMAGING VASCULAR FLOW ONLY		No	No	Not Cov	No		No	No
78630	CEREBROSPINAL FLUID FLOW W O MATL CISTERNOGRAPHY		No	No	Not Cov	No		No	No
78635	CEREBROSPINAL FLUID FLOW W O MATL VENTRICLEGRAPHY		No	No	Not Cov	No		No	No
78645	CEREBROSPINAL FLUID FLOW W O MATL SHUNT EVALTJ		No	No	Not Cov	No		No	No
78647	CEREBROSPINAL FLUID FLOW W O MATL TOMOG SPECT		Yes	Yes	Not Cov	Yes		Yes	Yes
78650	CEREBROSPINAL FLUID LEAK DETECTION AND LOCALIZATIO		No	No	Not Cov	No		No	No
78660	RADIOPHARMACEUTICAL DACRYOCYSTOGRAPHY		No	No	Not Cov	No		No	No
78699	UNLISTED NERVOUS SYSTEM PX DX NUCLEAR MEDICINE		Yes	Yes	Not Cov	Yes		Yes	Yes
78700	KIDNEY IMAGING MORPHOLOGY		No	No	Not Cov	No		No	No
78701	KIDNEY IMAGING MORPHOLOGY W VASCULAR FLOW		No	No	Not Cov	No		No	No
78707	KIDNEY IMG MORPHOLOGY VASCULAR FLOW 1 W O RX		No	No	Not Cov	No		No	No
78708	KIDNEY IMG MORPHOLOGY VASCULAR FLOW 1 W RX		No	No	Not Cov	No		No	No
78709	KIDNEY IMG MORPHOLOGY VASCULAR FLOW MULTIPLE		No	No	Not Cov	No		No	No
78710	KIDNEY IMAGING MORPHOLOGY TOMOGRAPHIC		Yes	Yes	Not Cov	Yes		Yes	Yes
78725	KIDNEY FUNCJ STUDY NON-IMG RADIOISOTOPIC STUDY		No	No	Not Cov	No		No	No
78730	URINARY BLADDER RESIDUAL STUDY		No	No	Not Cov	No		No	No
78740	URETERAL REFLUX STUDY RP VOIDING CYSTOGRAM		No	No	Not Cov	No		No	No
78761	TESTICULAR IMAGING WITH VASCULAR FLOW		No	No	Not Cov	No		No	No
78799	UNLISTED GENITOURINARY PX DX NUCLEAR MEDICINE		Yes	Yes	Not Cov	Yes		Yes	Yes
78800	RP LOCLZJ TUMOR DSTRBJ AGENT LIMITED AREA		No	No	Not Cov	No		No	No
78801	RP LOCLZJ TUMOR DSTRBJ AGENT MULTIPLE AREAS		No	No	Not Cov	No		No	No
78802	RP LOCLZJ TUMOR DSTRBJ AGENT WHOLE BDY 1 DAY		No	No	Not Cov	No		No	No
78803	RP LOCLZJ TUMOR DSTRBJ AGENT TOMOG SPECT		No	No	Not Cov	No		No	No
78804	RP LOCLZJ TUMOR DSTRBJ AGT WHOL BDY REQ 2 OR GRT DAY		No	No	Not Cov	No		No	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
78805	RP LOCLZJ INFLAMMATORY PROCESS LIMITED AREA		No	No	Not Cov	No		No	No
78806	RP LOCLZJ INFLAMMATORY PROCESS WHOLE BODY		No	No	Not Cov	No		No	No
78807	RP LOCLZJ INFLAMMATORY PROCESS TOMOG SPECT		No	No	Not Cov	No		No	No
78808	NJX RP LOCLZJ NON-IMG PROBE STUDY INTRAVENOUS		No	No	Not Cov	No		No	No
78811	PET IMAGING LIMITED AREA CHEST HEAD NECK		Yes	Yes	Not Cov	Yes		Yes	Yes
78812	PET IMAGING SKULL BASE TO MID-THIGH		Yes	Yes	Not Cov	Yes		Yes	Yes
78813	PET IMAGING WHOLE BODY		Yes	Yes	Not Cov	Yes		Yes	Yes
78814	PET IMAGING CT FOR ATTENUATION LIMITED AREA		Yes	Yes	Not Cov	Yes		Yes	Yes
78815	PET IMAGING CT ATTENUATION SKULL BASE MID-THIGH		Yes	Yes	Not Cov	Yes		Yes	Yes
78816	PET IMAGING FOR CT ATTENUATION WHOLE BODY		Yes	Yes	Not Cov	Yes		Yes	Yes
78999	UNLISTED MISCELLANEOUS PX DX NUCLEAR MEDICINE		Yes	Yes	Not Cov	Yes		Yes	Yes
79005	RP THERAPY ORAL ADMINISTRATION		No	No	Not Cov	No		No	No
79101	RP THERAPY INTRAVENOUS ADMINISTRATION		No	No	Not Cov	No		No	No
79200	RP THERAPY INTRACAVITARY ADMINISTRATION		No	No	Not Cov	No		No	No
79300	RP THERAPY INTERSTITIAL RADIOACTIVE COLLOID ADMN		No	No	Not Cov	No		No	No
79403	RP THER RADIOLBLD MONOCLONAL ANTIBODY IV INFUS		No	No	Not Cov	No		No	No
79440	RP THERAPY INTRA-ARTICULAR ADMINISTRATION		No	No	Not Cov	No		No	No
79445	RP THERAPY INTRA-ARTERIAL PARTICULATE ADMN		No	No	Not Cov	No		No	No
79999	RP THERAPY UNLISTED PROCEDURE		Yes	Yes	Not Cov	Yes		Yes	Yes
80047	BASIC METABOLIC PANEL CALCIUM IONIZED		No	No	Not Cov	No		No	No
80048	BASIC METABOLIC PANEL CALCIUM TOTAL		No	No	Not Cov	No		No	No
80050	GENERAL HEALTH PANEL		No	No	Not Cov	No		Not Cov	No
80051	ELECTROLYTE PANEL		No	No	Not Cov	No		No	No
80053	COMPREHENSIVE METABOLIC PANEL		No	No	Not Cov	No		No	No
80055	OBSTETRIC PANEL		No	No	Not Cov	No		Not Cov	No
80061	LIPID PANEL		No	No	Not Cov	No		No	No
80069	RENAL FUNCTION PANEL		No	No	Not Cov	No		No	No
80074	ACUTE HEPATITIS PANEL		No	No	Not Cov	No		No	No
80076	HEPATIC FUNCTION PANEL		No	No	Not Cov	No		No	No
80081	OBSTETRIC PANEL		No	No	Not Cov	No		No	No
80150	DRUG SCREEN QUANTITATIVE AMIKACIN		No	No	Not Cov	No		No	No
80155	DRUG ASSAY CAFFEINE		No	No	Not Cov	No		No	No
80156	DRUG ASSAY CARBAMAZEPINE TOTAL		No	No	Not Cov	No		No	No
80157	DRUG ASSAY CARBAMAZEPINE FREE		No	No	Not Cov	No		No	No
80158	DRUG ASSAY CYCLOSPORINE		No	No	Not Cov	No		No	No
80159	DRUG ASSAY CLOZAPINE		No	No	Not Cov	No		No	No
80162	DRUG SCREEN QUANTITATIVE DIGOXIN TOTAL		No	No	Not Cov	No		No	No
80163	DRUG SCREEN QUANTITATIVE DIGOXIN FREE		Not Cov	Not Cov	Not Cov	Not Cov		No	No
80164	DRUG ASSAY VALPROIC DIPROPYLACETIC ACID TOTAL		No	No	Not Cov	No		No	No
80165	DRUG SCREEN QUANT DIPROPYLACETIC ACID FREE		Not Cov	Not Cov	Not Cov	Not Cov		No	No
80168	DRUG SCREEN QUANTITATIVE ETHOSUXIMIDE		No	No	Not Cov	No		No	No
80169	DRUG ASSAY EVEROLIMUS		No	No	Not Cov	No		No	No
80170	DRUG SCREEN QUANTITATIVE GENTAMICIN		No	No	Not Cov	No		No	No
80171	DRUG SCREEN QUANTITATIVE GABAPENTIN		No	No	Not Cov	No		No	No

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Code	Code Description	Comments	Apple Health & IMC Medical				IMC / BHSO (Mental Health covered svcs)	Medicare	Market Place
			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
80173	DRUG SCREEN QUANTITATIVE HALOPRIDOL		No	No	Not Cov	No		No	No
80175	DRUG SCREEN QUANTITATIVE LAMOTRIGINE		No	No	Not Cov	No		No	No
80176	DRUG SCREEN QUANTITATIVE LIDOCAINE		No	No	Not Cov	No		No	No
80177	DRUG SCREEN QUANTITATIVE LEVETIRACETAM		No	No	Not Cov	No		No	No
80178	DRUG SCREEN QUANTITATIVE LITHIUM		No	No	Not Cov	No		No	No
80180	DRUG SCREEN QUANTITATIVE MYCOPHENOLATE		No	No	Not Cov	No		No	No
80183	DRUG SCREEN QUANTITATIVE OXCARBAZEPINE		No	No	Not Cov	No		No	No
80184	DRUG SCREEN QUANTITATIVE PHENOBARBITAL		No	No	Not Cov	No		No	No
80185	DRUG SCREEN QUANTITATIVE PHENYTOIN TOTAL		No	No	Not Cov	No		No	No
80186	DRUG SCREEN QUANTITATIVE PHENYTOIN FREE		No	No	Not Cov	No		No	No
80188	DRUG SCREEN QUANTITATIVE PRIMIDONE		No	No	Not Cov	No		No	No
80190	DRUG SCREEN QUANTITATIVE PROCAINAMIDE		No	No	Not Cov	No		No	No
80192	DRUG SCREEN QUANTITATIVE PROCAINAMIDE METABOLITE		No	No	Not Cov	No		No	No
80194	DRUG SCREEN QUANTITATIVE QUINIDINE		No	No	Not Cov	No		No	No
80195	DRUG SCREEN QUANTITATIVE SIROLIMUS		No	No	Not Cov	No		No	No
80197	DRUG SCREEN QUANTITATIVE TACROLIMUS		No	No	Not Cov	No		No	No
80198	DRUG SCREEN QUANTITATIVE THEOPHYLLINE		No	No	Not Cov	No		No	No
80199	DRUG SCREEN QUANTITATIVE TIAGABINE		No	No	Not Cov	No		No	No
80200	DRUG SCREEN QUANTITATIVE TOBRAMYCIN		No	No	Not Cov	No		No	No
80201	DRUG SCREEN QUANTITATIVE TOPIRAMATE		No	No	Not Cov	No		No	No
80202	DRUG SCREEN QUANTITATIVE VANCOMYCIN		No	No	Not Cov	No		No	No
80203	DRUG SCREEN QUANTITATIVE ZONISAMIDE		No	No	Not Cov	No		No	No
80299	QUANTITATION DRUG NOT ELSEWHERE SPECIFIED		Yes	Yes	Not Cov	Yes		Yes	Yes
80305	DRUG TEST PRSMV READ DIRECT OPTICAL OBS PR DATE	MD: No PA first 24 / CY	Yes	Yes	Not Cov	Yes		No	No
80306	DRUG TST PRSMV READ INSTRMNT ASSTD DIR OPT OBS	MD: No PA first 24 / CY	Yes	Yes	Not Cov	Yes		No	No
80307	DRUG TST PRSMV INSTRMNT CHEM ANALYZERS PR DATE	MD: No PA first 24 / CY	Yes	Yes	Not Cov	Yes		No	No
80320	DRUG SCREEN QUANTITATIVE ALCOHOLS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
80321	DRUG SCREEN QUANT ALCOHOLS BIOMARKERS 1 OR 2		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
80322	DRUG SCREEN QUANT ALCOHOLS BIOMARKERS 3 OR MORE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
80323	ALKALOIDS NOT OTHERWISE SPECIFIED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
80324	DRUG SCREEN QUANT AMPHETAMINES 1 OR 2		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
80325	DRUG SCREEN QUANT AMPHETAMINES 3 OR 4		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
80326	DRUG SCREEN QUANT AMPHETAMINES 5 OR MORE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
80327	DRUG SCREEN QUANT ANABOLIC STEROID 1 OR 2		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
80328	DRUG SCREEN QUANT ANABOLIC STEROID 3 OR MORE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
80329	DRUG SCREEN ANALGESICS NON-OPIOID 1 OR 2		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
80330	DRUG SCREEN ANALGESICS NON-OPIOID 3-5		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
80331	DRUG SCREEN ANALGESICS NON-OPIOID 6 OR MORE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
80332	ANTIDEPRESSANTS SEROTONERGIC CLASS 1 OR 2		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
80333	ANTIDEPRESSANTS SEROTONERGIC CLASS 3-5		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
80334	ANTIDEPRESSANTS SEROTONERGIC CLASS 6 OR MORE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
80335	ANTIDEPRESSANTS TRICYCLIC OTHER CYCLICALS 1 OR 2		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
80336	ANTIDEPRESSANTS TRICYCLIC OTHER CYCLICALS 3-5		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
80337	ANTIDEPRESSANTS TRICYCLIC OTHER CYCLICALS 6 MORE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
80338	ANTIDEPRESSANTS NOT OTHERWISE SPECIFIED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
80339	ANTIEPILEPTICS NOT OTHERWISE SPECIFIED 1-3		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
80340	ANTIEPILEPTICS NOT OTHERWISE SPECIFIED 4-6		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
80341	ANTIEPILEPTICS NOT OTHERWISE SPECIFIED 7 MORE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
80342	ANTIPSYCHOTICS NOT OTHERWISE SPECIFIED 1-3		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
80343	ANTIPSYCHOTICS NOT OTHERWISE SPECIFIED 4-6		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
80344	ANTIPSYCHOTICS NOT OTHERWISE SPECIFIED 7 MORE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
80345	DRUG SCREENING BARBITURATES		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
80346	DRUG SCREENING BENZODIAZEPINES 1-12		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
80347	DRUG SCREENING BENZODIAZEPINES 13 OR MORE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
80348	DRUG SCREENING BUPRENORPHINE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
80349	DRUG SCREENING CANNABINOIDS NATURAL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
80350	DRUG SCREENING CANNABINOIDS SYNTHETIC 1-3		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
80351	DRUG SCREENING CANNABINOIDS SYNTHETIC 4-6		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
80352	DRUG SCREENING CANNABINOIDS SYNTHETIC 7 MORE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
80353	DRUG SCREENING COCAINE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
80354	DRUG SCREENING FENTANYL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
80355	DRUG SCREENING GABAPENTIN NON-BLOOD		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
80356	DRUG SCREENING HEROIN METABOLITE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
80357	DRUG SCREENING KETAMINE AND NORKETAMINE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
80358	DRUG SCREENING METHADONE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
80359	DRUG SCREENING METHYLENEDIOXYAMPHETAMINES		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
80360	DRUG SCREENING METHYLPHENIDATE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
80361	DRUG SCREENING OPIATES 1 OR MORE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
80362	DRUG SCREENING OPIOIDS AND OPIATE ANALOGS 1 OR 2		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
80363	DRUG SCREENING OPIOIDS AND OPIATE ANALOGS 3 OR 4		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
80364	DRUG SCREENING OPIOIDS AND OPIATE ANALOGS 5 MORE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
80365	DRUG SCREENING OXYCODONE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
80366	DRUG SCREENING PREGABALIN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
80367	DRUG SCREENING PROPOXYPHENE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
80368	DRUG SCREENING SEDATIVE HYPNOTICS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
80369	DRUG SCREENING SKELETAL MUSCLE RELAXANTS 1 OR 2		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
80370	DRUG SCREENING SKEL MUSCLE RELAXANTS 3 OR MORE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
80371	DRUG SCREENING STIMULANTS SYNTHETIC		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
80372	DRUG SCREENING TAPENTADOL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
80373	DRUG SCREENING TRAMADOL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
80374	DRUG SCREEN STEREOISOMER ANALYSIS 1 DRUG CLASS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
80375	DRUG SUBSTANCE DEFINITIVE QUAL QUANT NOS 1-3		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No

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			Outpatient		ASC	Office Setting			
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80376	DRUG SUBSTANCE DEFINITIVE QUAL QUANT NOS 4-6		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
80377	DRUG SUBSTANCE DEFINITIVE QUAL QUANT NOS 7 MORE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
80400	ACTH STIMULATION PANEL ADRENAL INSUFFICIENCY		No	No	Not Cov	No		No	No
80402	ACTH STIMULATION PANEL 21 HYDROXYLASE DEFICIENCY		No	No	Not Cov	No		No	No
80406	ACTH STIMJ PANEL 3 BETA-HYDROXYDEHYD DEFNCY		No	No	Not Cov	No		No	No
80408	ALDOSTERONE SUPPRESSION EVALUATION PANEL		No	No	Not Cov	No		No	No
80410	CALCITONIN STIMULATION PANEL		No	No	Not Cov	No		No	No
80412	CORTICOTROPIC RELEASING HORM STIMJ PANEL		No	No	Not Cov	No		No	No
80414	CHORNC GONAD STIMJ PANEL TSTOSTERONE RESPONSE		No	No	Not Cov	No		No	No
80415	CHORNC GONAD STIMJ PANEL ESTRADIOL RESPONSE		No	No	Not Cov	No		No	No
80416	RENAL VEIN RENIN STIMULATION PANEL		No	No	Not Cov	No		No	No
80417	PERIPHERAL VEIN RENIN STIMULATION PANEL		No	No	Not Cov	No		No	No
80418	COMBINED RAPID ANT PITUITARY EVALUATION PANEL		No	No	Not Cov	No		No	No
80420	DEXMETHASONE SUPPRESSION PANEL 48 HR		No	No	Not Cov	No		No	No
80422	GLUCOSE TOLERANCE PANEL INSULINOMA		No	No	Not Cov	No		No	No
80424	GLUCOSE TOLERANCE PANEL PHEOCHROMOCYTOMA		No	No	Not Cov	No		No	No
80426	GONADOTROPIN RELEASING HORMONE STIMJ PANEL		No	No	Not Cov	No		No	No
80428	GROWTH HORMONE STIMULATION PANEL		No	No	Not Cov	No		No	No
80430	GROWTH HORMONE SUPRJ PANEL GLUCOSE ADMN		No	No	Not Cov	No		No	No
80432	INSULIN-INDUCED C-PEPTIDE SUPPRESSION PANEL		No	No	Not Cov	No		No	No
80434	INSULIN TOLERANCE PANEL ACTH INSUFFICIENCY		No	No	Not Cov	No		No	No
80435	INSULIN TOLERANCE PANEL GROWTH HORM DEFNCY		No	No	Not Cov	No		No	No
80436	METRAPONE PANEL		No	No	Not Cov	No		No	No
80438	THYROTROPIN RELEASING HORMONE STMLJ PANEL 1 HR		No	No	Not Cov	No		No	No
80439	THYROTROPIN RELEASING HORMONE STMLJ PANEL 2 HR		No	No	Not Cov	No		No	No
80500	CLINICAL PATHOLOGY CONSULTATION LIMITED		No	No	Not Cov	No		No	No
80502	CLINICAL PATHOLOGY CONSULTATION COMPREHENSIVE		No	No	Not Cov	No		No	No
81000	URINLS DIP STICK TABLET REAGNT NON-AUTO MICRSCP		No	No	Not Cov	No		No	No
81001	URNLS DIP STICK TABLET REAGENT AUTO MICROSCOPY		No	No	Not Cov	No		No	No
81002	URNLS DIP STICK TABLET RGNT NON-AUTO W O MICRSCP		No	No	Not Cov	No		No	No
81003	URNLS DIP STICK TABLET RGNT AUTO W O MICROSCOPY		No	No	Not Cov	No		No	No
81005	URINALYSIS QUAL SEMIQUANT EXCEPT IMMUNOASSAYS		No	No	Not Cov	No		No	No
81007	URINALYSIS BACTERIURIA SCR XCPT CULTURE DIPSTICK		No	No	Not Cov	No		No	No
81015	URINALYSIS MICROSCOPIC ONLY		No	No	Not Cov	No		No	No
81020	URINALYSIS 2 3 GLASS TEST		No	No	Not Cov	No		No	No
81025	URINE PREGNANCY TEST VISUAL COLOR CMPRSN METHS		No	No	Not Cov	No		No	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
81050	VOLUME MEASUREMENT TIMED COLLECTION EACH		No	No	Not Cov	No		No	No
81099	UNLISTED URINALYSIS PROCEDURE		Yes	Yes	Not Cov	Yes		Yes	Yes
81105	HPA-1 GENOTYPING GENE ANALYSIS COMMON VARIANT	No, pregnancy related if covered	Yes	Yes	Not Cov	Yes		Yes	Yes
81106	HPA-2 GENOTYPING GENE ANALYSIS COMMON VARIANT	No, pregnancy related if covered	Yes	Yes	Not Cov	Yes		Yes	Yes
81107	HPA-3 GENOTYPING GENE ANALYSIS COMMON VARIANT	No, pregnancy related if covered	Yes	Yes	Not Cov	Yes		Yes	Yes
81108	HPA-4 GENOTYPING GENE ANALYSIS COMMON VARIANT	No, pregnancy related if covered	Yes	Yes	Not Cov	Yes		Yes	Yes
81109	HPA-5 GENOTYPING GENE ANALYSIS COMMON VARIANT	No, pregnancy related if covered	Yes	Yes	Not Cov	Yes		Yes	Yes
81110	HPA-6 GENOTYPING GENE ANALYSIS COMMON VARIANT	No, pregnancy related if covered	Yes	Yes	Not Cov	Yes		Yes	Yes
81111	HPA-9 GENOTYPING GENE ANALYSIS COMMON VARIANT	No, pregnancy related if covered	Yes	Yes	Not Cov	Yes		Yes	Yes
81112	HPA-15 GENOTYPING GENE ANALYSIS COMMON VARIANT	No, pregnancy related if covered	Yes	Yes	Not Cov	Yes		Yes	Yes
81120	IDH1 COMMON VARIANTS	No, pregnancy related if covered	Yes	Yes	Not Cov	Yes		Yes	Yes
81121	IDH2 COMMON VARIANTS	No, pregnancy related if covered	Yes	Yes	Not Cov	Yes		Yes	Yes
81161	DMD DUPLICATION DELETION ANALYSIS	No, pregnancy related if covered	No	No	Not Cov	No		Yes	Yes
81162	BRCA1 AND BRCA2 FULL SEQ ANALYS FULL DUP DEL ANALYS	No, pregnancy related if covered	Yes	Yes	Not Cov	Yes		Yes	Yes
81163	BRCA1 BRCA2 GENE ANALYSIS FULL SEQUENCE ANALYSIS	No, pregnancy related if covered	Yes	Yes	Not Cov	Yes		Yes	Yes
81164	BRCA1 BRCA2 GENE ANALYSIS FULL DUP DEL ANALYSIS	No, pregnancy related if covered	Yes	Yes	Not Cov	Yes		Yes	Yes
81165	BRCA1 GENE ANALYSIS FULL SEQUENCE ANALYSIS	No, pregnancy related if covered	Yes	Yes	Not Cov	Yes		Yes	Yes
81166	BRCA1 GENE ANALYSIS FULL DUP DEL ANALYSIS	No, pregnancy related if covered	Yes	Yes	Not Cov	Yes		Yes	Yes
81167	BRCA2 GENE ANALYSIS FULL DUP DEL ANALYSIS	No, pregnancy related if covered	Yes	Yes	Not Cov	Yes		Yes	Yes
81170	ABL1 GENE ANALYSIS KINASE DOMAIN VARIANTS		No	No	Not Cov	No		No	No
81171	AFF2 GENE ANALYSIS EVAL DETECT ABNORMAL ALLELES	No, pregnancy related if covered	Yes	Yes	Not Cov	Yes		Yes	Yes
81172	AFF2 GENE ANALYSIS CHARACTERIZATION OF ALLELES	No, pregnancy related if covered	Yes	Yes	Not Cov	Yes		Yes	Yes
81173	AR GENE ANALYSIS FULL GENE SEQUENCE	No, pregnancy related if covered	Yes	Yes	Not Cov	Yes		Yes	Yes
81174	AR GENE ANALYSIS KNOWN FAMILIAL VARIANT	No, pregnancy related if covered	Yes	Yes	Not Cov	Yes		Yes	Yes
81175	ASXL1 GENE ANALYSIS FULL GENE SEQUENCE	No, pregnancy related if covered	Yes	Yes	Not Cov	Yes		Yes	Yes
81176	ASXL1 GENE ANALYSIS TARGETED SEQ ANALYSIS	No, pregnancy related if covered	Yes	Yes	Not Cov	Yes		Yes	Yes
81177	ATN1 GENE ANALYSIS EVAL DETECT ABNORMAL ALLELES	No, pregnancy related if covered	Yes	Yes	Not Cov	Yes		Yes	Yes
81178	ATXN1 GENE ANALYSIS EVAL DETECT ABNORMAL ALLELES	No, pregnancy related if covered	Yes	Yes	Not Cov	Yes		Yes	Yes
81179	ATXN2 GENE ANALYSIS EVAL DETECT ABNORMAL ALLELES	No, pregnancy related if covered	Yes	Yes	Not Cov	Yes		Yes	Yes
81180	ATXN3 GENE ANALYSIS EVAL DETECT ABNORMAL ALLELES	No, pregnancy related if covered	Yes	Yes	Not Cov	Yes		Yes	Yes
81181	ATXN7 GENE ANALYSIS EVAL DETECT ABNORMAL ALLELES	No, pregnancy related if covered	Yes	Yes	Not Cov	Yes		Yes	Yes

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			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
81182	ATXN8OS GENE ANALYSIS EVAL DETECT ABNOR ALLELES	No, pregnancy related if covered	Yes	Yes	Not Cov	Yes		Yes	Yes
81183	ATXN10 GENE ANALYSIS EVAL DETC ABNORMAL ALLELES	No, pregnancy related if covered	Yes	Yes	Not Cov	No		Yes	Yes
81184	CACNA1A GENE ANALYSIS EVAL DETECT ABNOR ALLELES	No, pregnancy related if covered	Yes	Yes	Not Cov	Yes		Yes	Yes
81185	CACNA1A GENE ANALYSIS FULL GENE SEQUENCE	No, pregnancy related if covered	Yes	Yes	Not Cov	Yes		Yes	Yes
81186	CACNA1A GENE ANALYSIS KNOWN FAMILIAL VARIANT	No, pregnancy related if covered	Yes	Yes	Not Cov	Yes		Yes	Yes
81187	CNBP GENE ANALYSIS EVAL DETECT ABNORMAL ALLELES	No, pregnancy related if covered	Yes	Yes	Not Cov	Yes		Yes	Yes
81188	CSTB GENE ANALYSIS EVAL DETECT ABNORMAL ALLELES	No, pregnancy related if covered	Yes	Yes	Not Cov	Yes		Yes	Yes
81189	CSTB GENE ANALYSIS FULL GENE SEQUENCE	No, pregnancy related if covered	Yes	Yes	Not Cov	Yes		Yes	Yes
81190	CSTB GENE ANALYSIS KNOWN FAMILIAL VARIANTS	No, pregnancy related if covered	Yes	Yes	Not Cov	Yes		Yes	Yes
81200	ASPA GENE ANALYSIS COMMON VARIANTS		No	No	Not Cov	No		No	No
81201	APC GENE ANALYSIS FULL GENE SEQUENCE	No, pregnancy related if covered	Yes	Yes	Not Cov	Yes		Yes	Yes
81202	APC GENE ANALYSIS KNOWN FAMILIAL VARIANTS		No	No	Not Cov	No		No	No
81203	APC GENE ANALYSIS DUPLICATION DELETION VARIANTS	No, pregnancy related if covered	Yes	Yes	Not Cov	Yes		Yes	Yes
81204	AR GENE ANALYSIS CHARACTERIZATION OF ALLELES	No, pregnancy related if covered	Yes	Yes	Not Cov	Yes		Yes	Yes
81205	BCKDHB GENE ANALYSIS COMMON VARIANTS	PA Req 11/1/19; No, pregnancy related if covered	Yes	Yes	Not Cov	Yes		Yes	Yes
81206	BCR ABL1 MAJOR BREAKPNT QUALITATIVE QUANTITATIVE	limit 1 per lifetime	No	No	Not Cov	No		No	No
81207	BCR ABL1 MINOR BREAKPNT QUALITATIVE QUANTITATIVE	limit 1 per lifetime	No	No	Not Cov	No		No	No
81208	BCR ABL1 OTHER BREAKPNT QUALITATIVE QUANTITATIVE	limit 1 per lifetime	No	No	Not Cov	No		No	No
81209	BLM GENE ANALYSIS 2281DEL6INS7 VARIANT	limit 1 per lifetime	No	No	Not Cov	No		No	No
81210	BRAF GENE ANALYSIS V600 VARIANT(S)	No, pregnancy related if covered	Yes	Yes	Not Cov	Yes		Yes	Yes
81212	BRCA1 AND BRCA2 ANAL 185DELAG5385INSC 6174DELT	No, pregnancy related if covered	Yes	Yes	Not Cov	Yes		Yes	Yes
81215	BRCA1 GENE ANALYSIS KNOWN FAMILIAL VARIANT	No, pregnancy related if covered	Yes	Yes	Not Cov	Yes		Yes	Yes
81216	BRCA2 GENE ANALYSIS FULL SEQUENCE ANALYSIS	No, pregnancy related if covered	Yes	Yes	Not Cov	Yes		Yes	Yes
81217	BRCA2 GENE ANALYSIS KNOWN FAMILIAL VARIANT	No, pregnancy related if covered	Yes	Yes	Not Cov	Yes		Yes	Yes
81218	CEBPA GENE ANALYSIS FULL GENE SEQUENCE	No, pregnancy related if covered	Yes	Yes	Not Cov	Yes		Yes	Yes
81219	CALR GENE ANALYSIS COMMON VARIANTS IN EXON 9	No, pregnancy related if covered	Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
81220	CFTR GENE ANALYSIS COMMON VARIANTS		No	No	Not Cov	No		No	No
81221	CFTR GENE ANALYSIS KNOWN FAMILIAL VARIANTS	PA Req 11/1/19; No, pregnancy related if covered	No	No	Not Cov	No		Yes	Yes
81222	CFTR GENE ANALYSIS DUPLICATION DELETION VARIANTS	No, pregnancy related if covered	Yes	Yes	Not Cov	Yes		Yes	Yes
81223	CFTR GENE ANALYSIS FULL GENE SEQUENCE	No, pregnancy related if covered	Yes	Yes	Not Cov	Yes		Yes	Yes
81224	CFTR GENE ANALYSIS INTRON 8 POLY-T ANALYSIS		No	No	Not Cov	No		No	No
81225	CYP2C19 GENE ANALYSIS COMMON VARIANTS	No, pregnancy related if covered	Yes	Yes	Not Cov	Yes		Yes	Yes
81226	CYP2D6 GENE ANALYSIS COMMON VARIANTS	No, pregnancy related if covered	Yes	Yes	Not Cov	Yes		Yes	Yes
81227	CYP2C9 GENE ANALYSIS COMMON VARIANTS	No, pregnancy related if covered	Yes	Yes	Not Cov	Yes		Yes	Yes

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
81228	CYTOGENOM CONST MICROARRAY COPY NUMBER VARIANTS	No, pregnancy related if covered	Yes	Yes	Not Cov	Yes		Yes	Yes
81229	CYTOGENOM CONST MICROARRAY COPY NUMBER AND SNP VAR	No, pregnancy related if covered	Yes	Yes	Not Cov	Yes		Yes	Yes
81230	CYP3A4 GENE ANALYSIS COMMON VARIANTS	No, pregnancy related if covered	Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
81231	CYP3A5 GENE ANALYSIS COMMON VARIANTS	No, pregnancy related if covered	Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
81232	DYPD GENE ANALYSIS COMMON VARIANTS	No, pregnancy related if covered	Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
81233	BTK GENE ANALYSIS COMMON VARIANTS	No, pregnancy related if covered	Yes	Yes	Not Cov	Yes		Yes	Yes
81234	DMPK GENE ANALYSIS EVAL DETECT ABNORMAL ALLELES	No, pregnancy related if covered	Yes	Yes	Not Cov	Yes		Yes	Yes
81235	EGFR GENE ANALYSIS COMMON VARIANTS	No, pregnancy related if covered	Yes	Yes	Not Cov	Yes		Yes	Yes
81236	EZH2 GENE ANALYSIS FULL GENE SEQUENCE	No, pregnancy related if covered	Yes	Yes	Not Cov	Yes		Yes	Yes
81237	EZH2 GENE ANALYSIS COMMON VARIANTS	No, pregnancy related if covered	Yes	Yes	Not Cov	Yes		Yes	Yes
81238	F9 FULL GENE SEQUENCE	No, pregnancy related if covered	Yes	Yes	Not Cov	Yes		Yes	Yes
81239	DMPK GENE ANALYSIS CHARACTERIZATION OF ALLELES	No, pregnancy related if covered	Yes	Yes	Not Cov	Yes		Yes	Yes
81240	F2 GENE ANALYSIS 20210G OVER A VARIANT		No	No	Not Cov	No		No	No
81241	F5 COAGULATION FACTOR V ANAL LEIDEN VARIANT		No	No	Not Cov	No		No	No
81242	FANCC GENE ANALYSIS COMMON VARIANT		No	No	Not Cov	No		No	No
81243	FMR1 ANALYSIS EVAL TO DETECT ABNORMAL ALLELES	No, pregnancy related if covered	No	No	Not Cov	No		Yes	Yes
81244	FMR1 GENE ANALYSIS CHARACTERIZATION OF ALLELES	No, pregnancy related if covered	No	No	Not Cov	No		Yes	Yes
81245	FLT3 GENE ANALYSIS INTERNAL TANDEM DUP VARIANTS		No	No	Not Cov	No		No	No
81246	FLT3 GENE ANALYS TYROSINE KINASE DOMAIN VARIANTS	No, pregnancy related if covered	Yes	Yes	Not Cov	Yes		Yes	Yes
81247	G6PD GENE ANALYSIS COMMON VARIANTS	No, pregnancy related if covered	Yes	Yes	Not Cov	Yes		Yes	Yes
81248	G6PD GENE ANALYSIS KNOWN FAMILIAL VARIANTS	No, pregnancy related if covered	Yes	Yes	Not Cov	Yes		Yes	Yes
81249	G6PD GENE ANALYSIS FULL GENE SEQUENCE	No, pregnancy related if covered	Yes	Yes	Not Cov	Yes		Yes	Yes
81250	G6PC GENE ANALYSIS COMMON VARIANTS		No	No	Not Cov	No		No	No
81251	GBA GLUCOSIDASE BETA ACID ANAL COMM VARIANTS		No	No	Not Cov	No		No	No
81252	GJB2 GENE ANALYSIS FULL GENE SEQUENCE		No	No	Not Cov	No		No	No
81253	GJB2 GENE ANALYSIS KNOWN FAMILIAL VARIANTS		No	No	Not Cov	No		No	No
81254	GJB6 GENE ANALYSIS COMMON VARIANTS		No	No	Not Cov	No		No	No
81255	HEXA GENE ANALYSIS COMMON VARIANTS		No	No	Not Cov	No		No	No
81256	HFE HEMOCHROMATOSIS GENE ANAL COMMON VARIANTS		No	No	Not Cov	No		No	No
81257	HBA1 HBA2 GENE ANALYSIS COMMON DELETIONS VARIANT		No	No	Not Cov	No		No	No
81258	HBA1 HBA2 GENE ANALYSIS KNOWN FAMILIAL VARIANT	No, pregnancy related if covered	Yes	Yes	Not Cov	Yes		Yes	Yes
81259	HBA1 HBA2 GENE ANALYSIS FULL GENE SEQUENCE	No, pregnancy related if covered	Yes	Yes	Not Cov	Yes		Yes	Yes
81260	IKBKAP GENE ANALYSIS COMMON VARIANTS		No	No	Not Cov	No		No	No
81261	IGH@ REARRANGE ABNORMAL CLONAL POP AMPLIFIED		No	No	Not Cov	No		No	No
81262	IGH@ REARRANGE ABNORMAL CLONAL POP DIRECT PROBE		No	No	Not Cov	No		No	No
81263	IGH@ VARIABLE REGION SOMATIC MUTATION ANALYSIS		No	No	Not Cov	No		No	No

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			Outpatient		ASC	Office Setting			
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81264	IGK@ GENE REARRANGE DETECT ABNORMAL CLONAL POP		No	No	Not Cov	No		No	No
81265	COMPARATIVE ANAL STR MARKERS PATIENT AND COMP SPEC	No, pregnancy related if covered	Not Cov	Yes	Not Cov	Yes		Yes	Yes
81266	COMPARATIVE ANAL STR MARKERS EA ADDL SPECIMEN	No, pregnancy related if covered	Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
81267	CHIMERISM W COMP TO BASELINE W O CELL SELECTION		Not Cov	Not Cov	Not Cov	Not Cov		No	No
81268	CHIMERISM W COMP TO BASELINE W CELL SELECTION EA		Not Cov	Not Cov	Not Cov	Not Cov		No	No
81269	HBA1 HBA2 GENE ANALYSIS DUP DEL VARIANTS	No, pregnancy related if covered	Yes	Yes	Not Cov	Yes		Yes	Yes
81270	JAK2 GENE ANALYSIS P.VAL617PHE VARIANT		No	No	Not Cov	No		No	No
81271	HTT GENE ANALYSIS DETECT ABNORMAL ALLELES	No, pregnancy related if covered	Yes	Yes	Not Cov	Yes		Yes	Yes
81272	KIT GENE ANALYSIS TARGETED SEQUENCE ANALYSIS	No, pregnancy related if covered	Yes	Yes	Not Cov	Yes		Yes	Yes
81273	KIT GENE ANALYSIS D816 VARIANT(S)	No, pregnancy related if covered	Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
81274	HTT GENE ANALYSIS CHARACTERIZATION ALLELES	No, pregnancy related if covered	Yes	Yes	Not Cov	Yes		Yes	Yes
81275	KRAS GENE ANALYSIS VARIANTS IN EXON 2		No	No	Not Cov	No		No	No
81276	KRAS GENE ANALYSIS ADDITIONAL VARIANT(S)		Not Cov	Not Cov	Not Cov	Not Cov		No	No
81283	IFNL3 GENE ANALYSIS RS12979860 VARIANT	No, pregnancy related if covered	Yes	Yes	Not Cov	Yes		Yes	Yes
81284	FXN GENE ANALYSIS EVAL DETECT ABNORMAL ALLELES	No, pregnancy related if covered	Yes	Yes	Not Cov	Yes		Yes	Yes
81285	FXN GENE ANALYSIS CHARACTERIZATION ALLELES	No, pregnancy related if covered	Yes	Yes	Not Cov	Yes		Yes	Yes
81286	FXN GENE ANALYSIS FULL GENE SEQUENCE	No, pregnancy related if covered	Yes	Yes	Not Cov	Yes		Yes	Yes
81287	MGMT METHYLATION ANALYSIS	No, pregnancy related if covered	Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
81288	MLH1 GENE ANALYSIS PROMOTER METHYLATION ANALYSIS		No	No	Not Cov	No		No	No
81289	FXN GENE ANALYSIS KNOWN FAMILIAL VARIANTS	No, pregnancy related if covered	Yes	Yes	Not Cov	Yes		Yes	Yes
81290	MCOLN1 MUCOLIPIN1 GENE ANALYSIS COMMON VARIANTS		No	No	Not Cov	No		No	No
81291	MTHFR GENE ANALYSIS COMMON VARIANTS	No, pregnancy related if covered	Yes	Yes	Not Cov	Yes		Yes	Yes
81292	MLH1 GENE ANALYSIS FULL SEQUENCE ANALYSIS	No, pregnancy related if covered	Yes	Yes	Not Cov	Yes		Yes	Yes
81293	MLH1 GENE ANALYSIS KNOWN FAMILIAL VARIANTS		No	No	Not Cov	No		No	No
81294	MLH1 GENE ANALYSIS DUPLICATION DELETION VARIANTS	No, pregnancy related if covered	Yes	Yes	Not Cov	Yes		Yes	Yes
81295	MSH2 GENE ANALYSIS FULL SEQUENCE ANALYSIS	No, pregnancy related if covered	Yes	Yes	Not Cov	Yes		Yes	Yes
81296	MSH2 GENE ANALYSIS KNOWN FAMILIAL VARIANTS		No	No	Not Cov	No		No	No
81297	MSH2 GENE ANALYSIS DUPLICATION DELETION VARIANTS	No, pregnancy related if covered	Yes	Yes	Not Cov	Yes		Yes	Yes
81298	MSH6 GENE ANALYSIS FULL SEQUENCE ANALYSIS	No, pregnancy related if covered	Yes	Yes	Not Cov	Yes		Yes	Yes
81299	MSH6 GENE ANALYSIS KNOWN FAMILIAL VARIANTS		No	No	Not Cov	No		No	No
81300	MSH6 GENE ANALYSIS DUPLICATION DELETION VARIA	No, pregnancy related if covered	Yes	Yes	Not Cov	Yes		Yes	Yes
81301	MICROSATELLITE INSTAB ANAL MISMATCH REPAIR DEF		Not Cov	Not Cov	Not Cov	Not Cov		No	No
81302	MECP2 GENE ANALYSIS FULL SEQUENCE		No	No	Not Cov	No		No	No
81303	MECP2 GENE ANALYSIS KNOWN FAMILIAL VARIANT		No	No	Not Cov	No		No	No
81304	MECP2 GENE ANALYSIS DUPLICATION DELETION VARIANT		No	No	Not Cov	No		No	No
81305	MYD88 GENE ANALYSIS P.LEU265 (L265P) VARIANT	No, pregnancy related if covered	Yes	Yes	Not Cov	Yes		Yes	Yes
81306	NUDT15 GENE ANALYSIS COMMON VARIANTS	No, pregnancy related if covered	Yes	Yes	Not Cov	Yes		Yes	Yes

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
81310	NPM1 NUCLEOPHOSMIN GENE ANAL EXON 12 VARIANTS		No	No	Not Cov	No		No	No
81311	NRAS GENE ANALYSIS VARIANTS IN EXON 2 AND 3	No, pregnancy related if covered	Yes	Yes	Not Cov	Yes		Yes	Yes
81312	PABPN1 GENE ANALYSIS EVAL DETC ABNORMAL ALLELES	No, pregnancy related if covered	Yes	Yes	Not Cov	Yes		Yes	Yes
81313	PCA3 KLK3 PROSTATE SPECIFIC ANTIGEN RATIO	No, pregnancy related if covered	Yes	Yes	Not Cov	Yes		Yes	Yes
81314	PDGFRA GENE ANALYS TARGETED SEQUENCE ANALYS	No, pregnancy related if covered	Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
81315	PML RARALPHA COMMON BREAKPOINTS QUAL QUANT		No	No	Not Cov	No		No	No
81316	PML RARALPHA SINGLE BREAKPOINT QUAL QUAN		No	No	Not Cov	No		No	No
81317	PMS2 GENE ANALYSIS FULL SEQUENCE	No, pregnancy related if covered	Yes	Yes	Not Cov	Yes		Yes	Yes
81318	PMS2 GENE ANALYSIS KNOWN FAMILIAL VARIANTS		No	No	Not Cov	No		No	No
81319	PMS2 GENE ANALYSIS DUPLICATION DELETION VARIANTS	No, pregnancy related if covered	Yes	Yes	Not Cov	Yes		Yes	Yes
81320	PLCG2 GENE ANALYSIS COMMON VARIANTS	No, pregnancy related if covered	Yes	Yes	Not Cov	Yes		Yes	Yes
81321	PTEN GENE ANALYSIS FULL SEQUENCE ANALYSIS	No, pregnancy related if covered	Yes	Yes	Not Cov	Yes		Yes	Yes
81322	PTEN GENE ANALYSIS KNOWN FAMILIAL VARIANT		No	No	Not Cov	No		No	No
81323	PTEN GENE ANALYSIS DUPLICATION DELETION VARIANT	No, pregnancy related if covered	Yes	Yes	Not Cov	Yes		Yes	Yes
81324	PMP22 GENE ANAL DUPLICATION DELETION ANALYSIS	No, pregnancy related if covered	Yes	Yes	Not Cov	Yes		Yes	Yes
81325	PMP22 GENE ANALYSIS FULL SEQUENCE ANALYSIS	No, pregnancy related if covered	Yes	Yes	Not Cov	Yes		Yes	Yes
81326	PMP22 GENE ANALYSIS KNOWN FAMILIAL VARIANT		No	No	Not Cov	No		No	No
81327	SEPT9 METHYLATION ANALYSIS		Not Cov	Not Cov	Not Cov	Not Cov		No	No
81328	SLCO1B1 GENE ANALYSIS COMMON VARIANTS	No, pregnancy related if covered	Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
81329	SMN1 GENE ANALYSIS DOSAGE DELET ALYS W SMN2 ALYS	No, pregnancy related if covered	Yes	Yes	Not Cov	Yes		Yes	Yes
81330	SMPD1 GENE ANALYSIS COMMON VARIANTS		Not Cov	Not Cov	Not Cov	Not Cov		No	No
81331	SNRPN UBE3A METHYLATION ANALYSIS		Not Cov	No	Not Cov	No		No	No
81332	SERPINA1 GENE ANALYSIS COMMON VARIANTS		Not Cov	Not Cov	Not Cov	Not Cov		No	No
81333	TGFBI GENE ANALYSIS COMMON VARIANTS	No, pregnancy related if covered	Yes	Yes	Not Cov	Yes		Yes	Yes
81334	RUNX1 GENE ANALYSIS TARGETED SEQUENCE ANALYSIS	No, pregnancy related if covered	Yes	Yes	Not Cov	Yes		Yes	Yes
81335	TPMT GENE ANALYSIS COMMON VARIANTS	No, pregnancy related if covered	Yes	Yes	Not Cov	Yes		Yes	Yes
81336	SMN1 GENE ANALYSIS FULL GENE SEQUENCE	No, pregnancy related if covered	Yes	Yes	Not Cov	Yes		Yes	Yes
81337	SMN1 GENE ANALYSIS KNOWN FAMILIAL SEQ VARIANTS	No, pregnancy related if covered	Yes	Yes	Not Cov	Yes		Yes	Yes
81340	TRB@ REARRANGEMENT ANAL AMPLIFICATION METHOD		Not Cov	Not Cov	Not Cov	Not Cov		No	No
81341	TRB@ REARRANGEMENT ANAL DIRECT PROBE METHODOLOGY		Not Cov	Not Cov	Not Cov	Not Cov		No	No
81342	TRG@ GENE REARRANGEMENT ANALYSIS		Not Cov	Not Cov	Not Cov	Not Cov		No	No
81343	PPP2R2B GENE ANALYSIS EVAL DETC ABNORMAL ALLELES	No, pregnancy related if covered	Yes	Yes	Not Cov	Yes		Yes	Yes
81344	TBP GENE ANALYSIS EVAL DETECT ABNORMAL ALLELES	No, pregnancy related if covered	Yes	Yes	Not Cov	Yes		Yes	Yes
81345	TERT GENE ANALYSIS TARGETED SEQUENCE ANALYSIS	No, pregnancy related if covered	Yes	Yes	Not Cov	Yes		Yes	Yes
81346	TYMS GENE ANALYSIS COMMON VARIANTS	No, pregnancy related if covered	Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
81350	UGT1A1 GENE ANALYSIS COMMON VARIANTS		No	No	Not Cov	No		No	No
81355	VKORC1 GENE ANALYSIS COMMON VARIANT(S)	No, pregnancy related if covered	Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
81361	HBB COMMON VARIANTS	No, pregnancy related if covered	Yes	Yes	Not Cov	Yes		Yes	Yes
81362	HBB KNOWN FAMILIAL VARIANTS	No, pregnancy related if covered	Yes	Yes	Not Cov	Yes		Yes	Yes
81363	HBB DUPLICATION DELETION VARIANTS	No, pregnancy related if covered	Yes	Yes	Not Cov	Yes		Yes	Yes
81364	HBB FULL GENE SEQUENCE	No, pregnancy related if covered	Yes	Yes	Not Cov	Yes		Yes	Yes
81370	HLA CLASS I AND II LOW HLA-A -B -C -DRB1 3 4 5 AND DQB		Not Cov	Not Cov	Not Cov	Not Cov		No	No
81371	HLA I AND LI LOW RESOLUTION HLA-A -B AND -DRB1		No	No	Not Cov	No		No	No
81372	HLA CLASS I TYPING LOW RESOLUTION COMPLETE		Not Cov	Not Cov	Not Cov	Not Cov		No	No
81373	HLA CLASS I TYPING LOW RESOLUTION ONE LOCUS EACH		No	No	Not Cov	No		No	No
81374	HLA I LOW RESOLUTION ONE ANTIGEN EQUIVALENT EACH		Not Cov	Not Cov	Not Cov	Not Cov		No	No
81375	HLA II LOW RESOLUTION HLA-DRB1 3 4 5 AND -DQB1		Not Cov	Not Cov	Not Cov	Not Cov		No	No
81376	HLA CLASS II TYPING LOW RESOLUTION ONE LOCUS EA		No	No	Not Cov	No		No	No
81377	HLA II LOW RESOLUTION ONE ANTIGEN EQUIVALENT EA		Not Cov	Not Cov	Not Cov	Not Cov		No	No
81378	HLA I AND II HIGH RESOLUTION HLA-A -B -C AND -DRB1		Not Cov	Not Cov	Not Cov	Not Cov		No	No
81379	HLA CLASS I TYPING HIGH RESOLUTION COMPLETE		No	No	Not Cov	No		No	No
81380	HLA CLASS I TYPING HIGH RESOLUTION ONE LOCUS EA		No	No	Not Cov	No		No	No
81381	HLA I TYPING HIGH RESOLUTION 1 ALLELE ALLELE GRP		Not Cov	No	Not Cov	No		No	No
81382	HLA CLASS II TYPING HIGH RESOLUTION ONE LOCUS EA		No	No	Not Cov	No		No	No
81383	HLA II HIGH RESOLUTION 1 ALLELE ALLELE GROUP		Not Cov	Not Cov	Not Cov	Not Cov		No	No
81400	MOLECULAR PATHOLOGY PROCEDURE LEVEL 1	No, pregnancy related if covered	Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
81401	MOLECULAR PATHOLOGY PROCEDURE LEVEL 2	No, pregnancy related if covered	Not Cov	Yes	Not Cov	Yes		Yes	Yes
81402	MOLECULAR PATHOLOGY PROCEDURE LEVEL 3	No, pregnancy related if covered	Not Cov	Yes	Not Cov	Yes		Yes	Yes
81403	MOLECULAR PATHOLOGY PROCEDURE LEVEL 4	No, pregnancy related if covered	Not Cov	Yes	Not Cov	Yes		Yes	Yes
81404	MOLECULAR PATHOLOGY PROCEDURE LEVEL 5	No, pregnancy related if covered	Yes	Yes	Not Cov	Yes		Yes	Yes
81405	MOLECULAR PATHOLOGY PROCEDURE LEVEL 6	No, pregnancy related if covered	Yes	Yes	Not Cov	Yes		Yes	Yes
81406	MOLECULAR PATHOLOGY PROCEDURE LEVEL 7	No, pregnancy related if covered	Yes	Yes	Not Cov	Yes		Yes	Yes
81407	MOLECULAR PATHOLOGY PROCEDURE LEVEL 8	No, pregnancy related if covered	Yes	Yes	Not Cov	Yes		Yes	Yes
81408	MOLECULAR PATHOLOGY PROCEDURE LEVEL 9	No, pregnancy related if covered	Yes	Yes	Not Cov	Yes		Yes	Yes
81410	AORTIC DYSFUNCTION DILATION GENOMIC SEQ ANALYSIS	No, pregnancy related if covered	Yes	Yes	Not Cov	Yes		Yes	Yes
81411	AORTIC DYSFUNCTION DILATION DUP DEL ANALYSIS	No, pregnancy related if covered	Yes	Yes	Not Cov	Yes		Yes	Yes
81412	ASHKENAZI JEWISH ASSOC DSRDRS GEN SEQ ANAL 9 GEN	No, pregnancy related if covered	Yes	Yes	Not Cov	Yes		Yes	Yes
81413	CAR ION CHNNLPATH GENOMIC SEQ ALYS INC 10 GNS	No, pregnancy related if covered	Not Cov	Yes	Not Cov	Yes		Yes	Yes
81414	CAR ION CHNNLPATH DUP DEL GN ALYS PANEL 2 GENES	No, pregnancy related if covered	Not Cov	Yes	Not Cov	Yes		Yes	Yes
81415	EXOME SEQUENCE ANALYSIS	No, pregnancy related if covered	Yes	Yes	Not Cov	Yes		Yes	Yes
81416	EXOME SEQUENCE ANALYSIS EACH COMPARATOR EXOME	No, pregnancy related if covered	Yes	Yes	Not Cov	Yes		Yes	Yes
81417	EXOME RE-EVAL OF PREVIOUSLY OBTAINED EXOME SEQ	No, pregnancy related if covered	Yes	Yes	Not Cov	Yes		Yes	Yes

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			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
81420	FETAL CHROMOSOMAL ANEUPLOIDY GENOMIC SEQ ANALYS	PA Req all Dx	Yes	Yes	Not Cov	Yes		Yes	Yes
81422	FETAL CHROMOSOMAL MICRODELTA GENOMIC SEQ ANALYS	PA Req all Dx	Not Cov	Yes	Not Cov	Yes		Yes	Yes
81425	GENOME SEQUENCE ANALYSIS	No, pregnancy related if covered	Yes	Yes	Not Cov	Yes		Yes	Yes
81426	GENOME SEQUENCE ANALYSIS EACH COMPARATOR GENOME	No, pregnancy related if covered	Yes	Yes	Not Cov	Yes		Yes	Yes
81427	GENOME RE-EVALUATION OF PREC OBTAINED GENOME SEQ	No, pregnancy related if covered	Yes	Yes	Not Cov	Yes		Yes	Yes
81430	HEARING LOSS GENOMIC SEQUENCE ANALYSIS 60 GENES	No, pregnancy related if covered	Yes	Yes	Not Cov	Yes		Yes	Yes
81431	HEARING LOSS DUP DEL ANALYSIS	No, pregnancy related if covered	Yes	Yes	Not Cov	Yes		Yes	Yes
81432	HEREDITARY BRST CA-RELATED GEN SEQ ANALYS 10 GEN	No, pregnancy related if covered	Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
81433	HEREDITARY BRST CA-RELATED DUP DEL ANALYSIS	No, pregnancy related if covered	Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
81434	HEREDITARY RETINAL DSRDRS GEN SEQ ANALYS 15 GEN	No, pregnancy related if covered	Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
81435	HEREDITARY COLON CA DSRDRS GEN SEQ ANALYS 10 GEN	No, pregnancy related if covered	Yes	Yes	Not Cov	Yes		Yes	Yes
81436	HEREDITARY COLON CA DSRDRS DUP DEL ANALYS 5 GEN	No, pregnancy related if covered	Yes	Yes	Not Cov	Yes		Yes	Yes
81437	HEREDTRY NURONDCRN TUM DSRDRS GEN SEQ ANAL 6 GEN	No, pregnancy related if covered	Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
81438	HEREDTRY NURONDCRN TUM DSRDRS DUP DEL ANALYSIS	No, pregnancy related if covered	Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
81439	HEREDITARY CARDIOMYOPATHY GEN SEQ ANALYS 5 GEN	No, pregnancy related if covered	Not Cov	Yes	Not Cov	Yes		Yes	Yes
81440	NUCLEAR MITOCHONDRIAL 100 GENE GENOMIC SEQ	No, pregnancy related if covered	Yes	Yes	Not Cov	Yes		Yes	Yes
81442	NOONAN SPECTRUM DISORDERS GEN SEQ ANALYS 12 GEN	No, pregnancy related if covered	Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
81443	GENETIC TESTING FOR SEVERE INHERITED CONDITIONS	No, pregnancy related if covered	Yes	Yes	Not Cov	Yes		Yes	Yes
81445	GEN SEQ ANALYS SOLID ORGAN NEOPLASM 5-50 GENE	No, pregnancy related if covered	Yes	Yes	Not Cov	Yes		Yes	Yes
81448	HEREDITARY PERIPHERAL NEUROPATHY GEN SEQ PNL	No, pregnancy related if covered	Yes	Yes	Not Cov	Yes		Yes	Yes
81450	GEN SEQ ANALYS HEMATOLYMPHOID NEO 5-50 GENE	No, pregnancy related if covered	Yes	Yes	Not Cov	Yes		Yes	Yes
81455	GEN SEQ ANALYS SOL ORG HEMTOLMPHOID NEO 51 OR GRT GEN	No, pregnancy related if covered	Yes	Yes	Not Cov	Yes		Yes	Yes
81460	WHOLE MITOCHONDRIAL GENOME	No, pregnancy related if covered	Yes	Yes	Not Cov	Yes		Yes	Yes
81465	WHOLE MITOCHONDRIAL GENOME ANALYSIS PANEL	No, pregnancy related if covered	Yes	Yes	Not Cov	Yes		Yes	Yes
81470	X-LINKED INTELLECTUAL DBLT GENOMIC SEQ ANALYS	No, pregnancy related if covered	Yes	Yes	Not Cov	Yes		Yes	Yes
81471	X-LINKED INTELLECTUAL DBLT DUP DEL GENE ANALYS	No, pregnancy related if covered	Yes	Yes	Not Cov	Yes		Yes	Yes
81479	UNLISTED MOLELCULAR PATHOLOGY PROCEDURE		Yes	Yes	Not Cov	Yes		Yes	Yes
81490	AUTOIMMUNE RHEUMATOID ARTHRITS ANALYS 12 BIOMRKRS		Not Cov	Not Cov	Not Cov	Not Cov		No	No
81493	COR ART DISEASE MRNA GENE EXPRESSION 23 GENES	No, pregnancy related if covered	Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
81500	ONCO (OVARIAN) BIOCHEMICAL ASSAY TWO PROTEINS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
81503	ONCO (OVARIAN) BIOCHEMICAL ASSAY FIVE PROTEINS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
81504	ONCOLOGY TISSUE OF ORIGIN SIMILAR SCOR ALGORITHM	No, pregnancy related if covered	Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
81506	ENDOCRINOLOGY BIOCHEMICAL ASSAY SEVEN ANAL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
81507	FETAL ANEUPLOIDY 21 18 13 SEQ ANALY TRISOM RISK	PA Req all Dx	Yes	Yes	Not Cov	Yes		Not Cov	Yes
81508	FETAL CONGENITAL ABNOR ASSAY TWO PROTEINS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
81509	FETAL CONGENITAL ABNOR ASSAY 3 PROTEINS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
81510	FETAL CONGENITAL ABNOR ASSAY THREE ANAL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
81511	FETAL CONGENITAL ABNOR ASSAY FOUR ANAL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
81512	FETAL CONGENITAL ABNOR ASSAY FIVE ANAL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
81518	ONCOLOGY BREAST MRNA GENE EXPRESSION 11 GENES	No, pregnancy related if covered	Yes	Yes	Not Cov	Yes		Yes	Yes
81519	ONCOLOGY BREAST MRNA GENE EXPRESSION 21 GENES	No, pregnancy related if covered	Yes	Yes	Not Cov	Yes		Yes	Yes
81520	ONC BREAST MRNA GENE XPRSN PRFL HYBRD 58 GENES	No, pregnancy related if covered	Yes	Yes	Not Cov	Yes		Yes	Yes
81521	ONC BREAST MRNA MICRORA GENE XPRSN PRFL 70 GENES	No, pregnancy related if covered	Yes	Yes	Not Cov	Yes		Yes	Yes
81525	ONCOLOGY COLON MRNA GENE EXPRESSION 12 GENES	No, pregnancy related if covered	Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
81528	ONCOLOGY COLORECTAL SCREENING QUAN 10 DNA MARKRS	No, pregnancy related if covered	Not Cov	Not Cov	Not Cov	Not Cov		No	Yes
81535	ONCOLOGY GYNE LIVE TUM CELL CLTR AND CHEMO RESP 1ST	No, pregnancy related if covered	Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
81536	ONCOLOGY GYNE LIVE TUM CELL CLTR AND CHEMO RESP ADD	No, pregnancy related if covered	Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
81538	ONCOLOGY LUNG MS 8-PROTEIN SIGNATURE	No, pregnancy related if covered	Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
81539	ONCOLOGY PROSTATE BIOCHEMICAL ASSAY 4 PROTEINS		Not Cov	No	Not Cov	No		No	No
81540	ONCOLOGY TUM UNKNOWN ORIGIN MRNA 92 GENES	No, pregnancy related if covered	Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
81541	ONC PRST8 MRNA GENE XPRSN PRFL RT-PCR 46 GENES	No, pregnancy related if covered	Yes	Yes	Not Cov	Yes		Yes	Yes
81545	ONCOLOGY THYROID GENE EXPRESSION 142 GENES	No, pregnancy related if covered	Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
81551	ONC PRST8 PRMTR METHYLATION PRFL R-T PCR 3 GENES	No, pregnancy related if covered	Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
81595	CARDIOLOGY HRT TRNSPL MRNA GENE EXPRESS 20 GENES	No, pregnancy related if covered	Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
81596	NFCT DS CHRNC HCV 6 BIOCHEM ASSAY SRM ALG LVR	No, pregnancy related if covered	Yes	Yes	Not Cov	Yes		Yes	Yes
81599	UNLISTED MULTIANALYTE ASSAY ALGORITHMIC ANALYSIS		Yes	Yes	Not Cov	Yes		Yes	Yes
82009	KETONE BODIES SERUM QUALITATIVE		No	No	Not Cov	No		No	No
82010	KETONE BODIES SERUM QUANTITATIVE		No	No	Not Cov	No		No	No
82013	ASSAY OF ACETYLCHOLINESTERASE		No	No	Not Cov	No		No	No
82016	ACYLCARNITINES QUALITATIVE EACH SPECIMEN		Yes	Yes	Not Cov	Yes		Yes	Not Cov
82017	ACYLCARNITINES QUANTITATIVE EACH SPECIMEN		Yes	Yes	Not Cov	Yes		Yes	Not Cov
82024	ADRENOCORTICOTROPIC HORMONE ACTH		No	No	Not Cov	No		No	No
82030	ADENOSINE 5-MONOPHOSPHATE CYCLIC		No	No	Not Cov	No		No	No
82040	ALBUMIN SERUM PLASMA WHOLE BLOOD		No	No	Not Cov	No		No	No
82042	OTHER SOURCE ALBUMIN QUANTITATIVE EACH SPECIMEN		No	No	Not Cov	No		No	No

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82043	URINE ALBUMIN QUANTITATIVE		No	No	Not Cov	No	No	No	
82044	URINE ALBUMIN SEMIQUANTITATIVE		No	No	Not Cov	No	No	No	
82045	ALBUMIN ISCHEMIA MODIFIED		No	No	Not Cov	No	No	No	
82075	ASSAY OF ALCOHOL BREATH		No	No	Not Cov	No	No	No	
82085	ASSAY OF ALDOLASE		No	No	Not Cov	No	No	No	
82088	ASSAY OF ALDOSTERONE		No	No	Not Cov	No	No	No	
82103	ALPHA-1-ANTITRYPSIN TOTAL		No	No	Not Cov	No	No	No	
82104	ALPHA-1-ANTITRYPSIN PHENOTYPE		No	No	Not Cov	No	No	No	
82105	ALPHA-FETOPROTEIN SERUM		No	No	Not Cov	No	No	No	
82106	ALPHA-FETOPROTEIN AMNIOTIC FLUID		No	No	Not Cov	No	No	No	
82107	AFP-L3 FRACTION ISOFORM AND TOTAL AFP W RATIO		No	No	Not Cov	No	No	No	
82108	ASSAY OF ALUMINUM		No	No	Not Cov	No	No	No	
82120	AMINES VAGINAL FLUID QUALITATIVE		No	No	Not Cov	No	No	No	
82127	AMINO ACIDS 1 QUALITATIVE EACH SPECIMEN		No	No	Not Cov	No	No	No	
82128	AMINO ACIDS MULTIPLE QUALITATIVE EACH SPECIMEN		No	No	Not Cov	No	No	No	
82131	AMINO ACIDS 1 QUANTITATIVE EACH SPECIMEN		No	No	Not Cov	No	No	No	
82135	AMINOLEVULINIC ACID DELTA		No	No	Not Cov	No	No	No	
82136	AMINO ACIDS 2-5 AMINO ACIDS QUANTITATIVE EA SPEC		No	No	Not Cov	No	No	No	
82139	AMINO ACIDS 6 OR GRT AMINO ACIDS QUANTITATIVE EA SPE		No	No	Not Cov	No	No	No	
82140	ASSAY OF AMMONIA		No	No	Not Cov	No	No	No	
82143	AMNIOTIC FLU SCAN		No	No	Not Cov	No	No	No	
82150	ASSAY OF AMYLASE		No	No	Not Cov	No	No	No	
82154	ANDROSTANEDIOL GLUCURONIDE		No	No	Not Cov	No	No	No	
82157	ANDROSTENEDIONE		No	No	Not Cov	No	No	No	
82160	ANDROSTERONE		No	No	Not Cov	No	No	No	
82163	ANGIOTENSIN II		No	No	Not Cov	No	No	No	
82164	ANGIOTENSIN I-CONVERTING ENZYME		No	No	Not Cov	No	No	No	
82172	APOLIPOPROTEIN EACH		No	No	Not Cov	No	No	No	
82175	ASSAY OF ARSENIC		No	No	Not Cov	No	No	No	
82180	ASSAY OF ASCORBIC ACID BLOOD		No	No	Not Cov	No	No	No	
82190	ATOMIC ABSRPJ SPECTROSCOPY EA ANALYTE		No	No	Not Cov	No	No	No	
82232	BETA-2 MICROGLOBULIN		No	No	Not Cov	No	No	No	
82239	BILE ACIDS TOTAL		No	No	Not Cov	No	No	No	
82240	BILE ACIDS CHOLYLGLYCINE		No	No	Not Cov	No	No	No	
82247	BILIRUBIN TOTAL		No	No	Not Cov	No	No	No	
82248	BILIRUBIN DIRECT		No	No	Not Cov	No	No	No	
82252	BILIRUBIN FECES QUALITATIVE		No	No	Not Cov	No	No	No	
82261	BIOTINIDASE EACH SPECIMEN		No	No	Not Cov	No	No	No	
82270	BLOOD OCCULT PEROXIDASE ACTV QUAL FECES 1 DETER		No	No	Not Cov	No	No	No	
82271	BLOOD OCCULT PEROXIDASE ACTV QUAL OTHER SOURCES		No	No	Not Cov	No	No	No	
82272	BLOOD OCCULT PEROXIDASE ACTV QUAL FECES 1-3 SPEC		No	No	Not Cov	No	No	No	
82274	BLOOD OCCULT FECAL HGB DETER IA QUAL FECES 1-3		No	No	Not Cov	No	No	No	

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82286	BRADYKININ		No	No	Not Cov	No	No	No	
82300	CADMIUM		No	No	Not Cov	No	No	No	
82306	25 HYDROXY INCLUDES FRACTIONS IF PERFORMED		No	No	Not Cov	No	No	No	
82308	CALCITONIN		No	No	Not Cov	No	No	No	
82310	CALCIUM TOTAL		No	No	Not Cov	No	No	No	
82330	CALCIUM IONIZED		No	No	Not Cov	No	No	No	
82331	CALCIUM AFTER CALCIUM INFUSION TEST		No	No	Not Cov	No	No	No	
82340	CALCIUM URINE QUANTITATIVE TIMED SPECIMEN		No	No	Not Cov	No	No	No	
82355	CALCULUS QUALITATIVE ANALYSIS		No	No	Not Cov	No	No	No	
82360	CALCULUS QUANTITATIVE CHEMICAL		No	No	Not Cov	No	No	No	
82365	CALCULUS INFRARED SPECTROSCOPY		No	No	Not Cov	No	No	No	
82370	CALCULUS XRAY DIFFRACTION		No	No	Not Cov	No	No	No	
82373	CARBOHYDRATE DEFICIENT TRANSFERRIN		No	No	Not Cov	No	No	No	
82374	CARBON DIOXIDE BICARBONATE		No	No	Not Cov	No	No	No	
82375	CARBOXYHEMOGLOBIN QUANTITATIVE		No	No	Not Cov	No	No	No	
82376	CARBOXYHEMOGLOBIN QUALITATIVE		No	No	Not Cov	No	No	No	
82378	CARCINOEMBRYONIC ANTIGEN CEA		No	No	Not Cov	No	No	No	
82379	CARNITINE QUANTITATIVE EACH SPECIMEN		No	No	Not Cov	No	No	No	
82380	CAROTENE		No	No	Not Cov	No	No	No	
82382	CATECHOLAMINES TOTAL URINE		No	No	Not Cov	No	No	No	
82383	CATECHOLAMINES BLOOD		No	No	Not Cov	No	No	No	
82384	CATECHOLAMINES FRACTIONATED		No	No	Not Cov	No	No	No	
82387	CATHEPSIN-D		No	No	Not Cov	No	No	No	
82390	CERULOPLASMIN		No	No	Not Cov	No	No	No	
82397	CHEMILUMINESCENT ASSAY		No	No	Not Cov	No	No	No	
82415	CHLORAMPHENICOL		No	No	Not Cov	No	No	No	
82435	CHLORIDE BLD		No	No	Not Cov	No	No	No	
82436	CHLORIDE URINE		No	No	Not Cov	No	No	No	
82438	CHLORIDE OTHER SOURCE		No	No	Not Cov	No	No	No	
82441	CHLORINATED HYDROCARBONS SCREEN		No	No	Not Cov	No	No	No	
82465	CHOLESTEROL SERUM WHOLE BLOOD TOTAL		No	No	Not Cov	No	No	No	
82480	CHOLINESTERASE SERUM		No	No	Not Cov	No	No	No	
82482	CHOLINESTERASE RBC		No	No	Not Cov	No	No	No	
82485	CHONDROITIN B SULFATE QUANTITATIVE		No	No	Not Cov	No	No	No	
82495	ASSAY OF CHROMIUM		No	No	Not Cov	No	No	No	
82507	ASSAY OF CITRATE		No	No	Not Cov	No	No	No	
82523	COLLAGEN CROSS LINKS ANY METHOD		No	No	Not Cov	No	No	No	
82525	ASSAY OF COPPER		No	No	Not Cov	No	No	No	
82528	CORTICOSTERONE		No	No	Not Cov	No	No	No	
82530	CORTISOL FREE		No	No	Not Cov	No	No	No	
82533	CORTISOL TOTAL		No	No	Not Cov	No	No	No	
82540	ASSAY OF CREATINE		No	No	Not Cov	No	No	No	
82542	COL-CHR MS NONDRUG ANALYTE NES QUAL QUAN EA SPEC		No	No	Not Cov	No	No	No	
82550	CREATINE KINASE TOTAL		No	No	Not Cov	No	No	No	
82552	CREATINE KINASE ISOENZYMES		No	No	Not Cov	No	No	No	
82553	CREATINE KINASE MB FRACTION ONLY		No	No	Not Cov	No	No	No	

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82554	CREATINE KINASE ISOFORMS		No	No	Not Cov	No	No	No	
82565	CREATININE BLOOD		No	No	Not Cov	No	No	No	
82570	CREATININE OTHER SOURCE		No	No	Not Cov	No	No	No	
82575	CREATININE CLEARANCE		No	No	Not Cov	No	No	No	
82585	ASSAY OF CRYOFIBRN		No	No	Not Cov	No	No	No	
82595	CRYOGLOBULIN QUALITATIVE SEMI-QUANTITATIVE		No	No	Not Cov	No	No	No	
82600	ASSAY OF CYANIDE		No	No	Not Cov	No	No	No	
82607	CYANOCOBALAMIN VITAMIN B-12		No	No	Not Cov	No	No	No	
82608	CYANOCOBALAMIN VIT B-12 UNSAT BINDING CAPACITY		No	No	Not Cov	No	No	No	
82610	CYSTATIN C		No	No	Not Cov	No	No	No	
82615	CSTINE AND HOMOCSTINE URINE QUALITATIVE		No	No	Not Cov	No	No	No	
82626	DEHYDROEPIANDROSTERONE		No	No	Not Cov	No	No	No	
82627	DEHYDROEPIANDROSTERONE-SULFATE		No	No	Not Cov	No	No	No	
82633	DESOXYCORTICOSTERONE 11-		No	No	Not Cov	No	No	No	
82634	DEOXYCORTISOL 11-		No	No	Not Cov	No	No	No	
82638	ASSAY OF DIBUCAINE NUMBER		No	No	Not Cov	No	No	No	
82642	DIHYDROTESTOSTERONE (DHT)		Not Cov	Not Cov	Not Cov	Not Cov	No	No	
82652	1 25 DIHYDROXY INCLUDES FRACTIONS IF PERFORMED		No	No	Not Cov	No	No	No	
82656	ELASTASE PANCREATIC FECAL QUAL SEMI-QUAN		No	No	Not Cov	No	No	No	
82657	NZYM ACTIV BLD CELLS TISS NONRADACT SUBSTRATE EA		No	No	Not Cov	No	No	No	
82658	NZYM ACTV BLOOD CELLS TISS RADACT SUBSTRATE EA		No	No	Not Cov	No	No	No	
82664	ELCTROPHORETIC TECHNIQUE NOT ELSEWHERE SPECIFIED		No	No	Not Cov	No	No	No	
82668	ASSAY OF ERYTHROPOIETIN		No	No	Not Cov	No	No	No	
82670	ASSAY OF ESTRADIOL		No	No	Not Cov	No	No	No	
82671	ASSAY OF ESTROGENS FRACTIONATED		No	No	Not Cov	No	No	No	
82672	ASSAY OF ESTROGENS TOTAL		No	No	Not Cov	No	No	No	
82677	ASSAY OF ESTRIOL		No	No	Not Cov	No	No	No	
82679	ASSAY OF ESTRONE		No	No	Not Cov	No	No	No	
82693	ASSAY OF ETHYLENE GLYCOL		No	No	Not Cov	No	No	No	
82696	ASSAY OF ETIOCHOLANOLONE		No	No	Not Cov	No	No	No	
82705	FAT LIPIDS FECES QUALITATIVE		No	No	Not Cov	No	No	No	
82710	FAT LIPIDS FECES QUANTITATIVE		No	No	Not Cov	No	No	No	
82715	FAT DIFFIAL FECES QUANTITATIVE		No	No	Not Cov	No	No	No	
82725	FATTY ACIDS NONESTERIFIED		No	No	Not Cov	No	No	No	
82726	VERY LONG CHAIN FATTY ACIDS		No	No	Not Cov	No	No	No	
82728	ASSAY OF FERRITIN		No	No	Not Cov	No	No	No	
82731	FTL FIBRONECTIN CERVICOVAG SECRETIONS SEMI-QUAN		No	No	Not Cov	No	No	No	
82735	ASSAY OF FLUORIDE		No	No	Not Cov	No	No	No	
82746	ASSAY OF FOLIC ACID SERUM		No	No	Not Cov	No	No	No	
82747	ASSAY OF FOLIC ACID RBC		No	No	Not Cov	No	No	No	
82757	ASSAY OF FRUCTOSE SEMEN		No	No	Not Cov	No	No	No	
82759	ASSAY OF GALACTOKINASE RBC		No	No	Not Cov	No	No	No	
82760	ASSAY OF GALACTOSE		No	No	Not Cov	No	No	No	

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			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
82775	GALACTOSE-1-PHOSPHATE URIDYL TRANSFERASE QUAN		No	No	Not Cov	No		No	No
82776	GALACTOSE-1-PHOSPHATE URIDYL TRANSFERASE SCREEN		No	No	Not Cov	No		No	No
82777	GALECTIN-3		Not Cov	Not Cov	Not Cov	Not Cov		No	No
82784	ASSAY OF GAMMAGLOBULIN IGA IGD IGG IGM EACH		No	No	Not Cov	No		No	No
82785	ASSAY OF GAMMAGLOBULIN IGE		No	No	Not Cov	No		No	No
82787	GAMMAGLOBULIN IMMUNOGLOBULIN SUBCLASSES		No	No	Not Cov	No		No	No
82800	GASES BLOOD PH ONLY		No	No	Not Cov	No		No	No
82803	BLOOD GASES ANY COMBINATION PH PCO2 PO2 CO2 HCO3		No	No	Not Cov	No		No	No
82805	GASES BLOOD PH DIRECT MEAS XCPT PULSE OXIMITRY		No	No	Not Cov	No		No	No
82810	GASES BLOOD O2 SATURATION ONLY DIRECT MEAS		No	No	Not Cov	No		No	No
82820	HGB-O2 AFFINITY PO2 50PCT SATURATION OXYGEN		No	No	Not Cov	No		No	No
82930	GASTRIC ACID ANALYSIS W PH EACH SPECIMEN		No	No	Not Cov	No		No	No
82938	GASTRIN AFTER SECRETIN STIMULATION		No	No	Not Cov	No		No	No
82941	ASSAY OF GASTRIN		No	No	Not Cov	No		No	No
82943	ASSAY OF GLUCAGON		No	No	Not Cov	No		No	No
82945	GLUCOSE BODY FLUID OTHER THAN BLOOD		No	No	Not Cov	No		No	No
82946	GLUCOSE TOLERANCE TEST		No	No	Not Cov	No		No	No
82947	GLUCOSE QUANTITATIVE BLOOD XCPT REAGENT STRIP		No	No	Not Cov	No		No	No
82948	GLUCOSE BLOOD REAGENT STRIP		No	No	Not Cov	No		No	No
82950	GLUCOSE POST GLUCOSE DOSE		No	No	Not Cov	No		No	No
82951	GLUCOSE TOLERANCE TEST GTT 3 SPECIMENS		No	No	Not Cov	No		No	No
82952	GLUCOSE TOLERANCE EA ADDL BEYOND 3 SPECIMENS		No	No	Not Cov	No		No	No
82955	GLUC-6-PHOSPHATE DEHYDROGENASE QUANTITATIVE		No	No	Not Cov	No		No	No
82960	GLUC-6-PHOSPHATE DEHYDROGENASE SCREEN		No	No	Not Cov	No		No	No
82962	GLUC BLD GLUC MNTR DEV CLEARED FDA SPEC HOME USE		No	No	Not Cov	No		No	No
82963	ASSAY OF GLUCOSIDASE BETA		No	No	Not Cov	No		No	No
82965	ASSAY OF GLUTAMATE DEHYDROGENASE		No	No	Not Cov	No		No	No
82977	ASSAY OF GLUTAMYLTRASE GAMMA		No	No	Not Cov	No		No	No
82978	ASSAY OF GLUTATHIONE		No	No	Not Cov	No		No	No
82979	ASSAY OF GLUTATHIONE REDUCTASE RBC		No	No	Not Cov	No		No	No
82985	ASSAY OF GLYCATED PROTEIN		No	No	Not Cov	No		No	No
83001	GONADOTROPIN FOLLICLE STIMULATING HORMONE		No	No	Not Cov	No		No	No
83002	GONADOTROPIN LUTEINIZING HORMONE		No	No	Not Cov	No		No	No
83003	ASSAY OF GROWTH HORMONE HUMAN		No	No	Not Cov	No		No	No
83006	GROWTH STIMULATION EXPRESSED GENE 2	No, pregnancy related if covered	Yes	Yes	Not Cov	Yes		Yes	Yes
83009	HPYLORI BLOOD ANAL UREASE ACT NON-RADACT ISOTOPE		No	No	Not Cov	No		No	No
83010	ASSAY OF HAPTOGLOBIN QUANTITATIVE		No	No	Not Cov	No		No	No
83012	ASSAY OF HAPTOGLOBIN PHENOTYPES		No	No	Not Cov	No		No	No
83013	HPYLORI BREATH ANAL UREASE ACT NON-RADACT ISOTOPE		No	No	Not Cov	No		No	No
83014	HPYLORI DRUG ADMINISTRATION		No	No	Not Cov	No		No	No
83015	HEAVY METAL QUALITATIVE ANY ANALYTES		No	No	Not Cov	No		No	No

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DOS Effective 10/1/19; Posted 10/30/19

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
83018	HEAVY METAL QUANTIATIVE EACH NES		No	No	Not Cov	No	No	No	
83020	HEMOGLOBIN FRACTJ QUANTJ ELECTROPHORESIS		No	No	Not Cov	No	No	No	
83021	HEMOGLOBIN FRACTJ QUANTJ CHROMOTOGRAPHY		No	No	Not Cov	No	No	No	
83026	HEMOGLOBIN COPPER SULFATE METHOD NON-AUTOMATED		No	No	Not Cov	No	No	No	
83030	HEMOGLOBIN F FETAL CHEMICAL		No	No	Not Cov	No	No	No	
83033	HEMOGLOBIN F FETAL QUALITATIVE		No	No	Not Cov	No	No	No	
83036	HEMOGLOBIN GLYCOSYLATED A1C		No	No	Not Cov	No	No	No	
83037	HGB GLYCOSYLATED DEVICE CLEARED FDA HOME USE		No	No	Not Cov	No	No	No	
83045	HEMOGLOBIN METHEMOGLOBIN QUALITATIVE		No	No	Not Cov	No	No	No	
83050	HEMOGLOBIN METHEMOGLOBIN QUANTITATIVE		No	No	Not Cov	No	No	No	
83051	ASSAY OF HEMOGLOBIN PLASMA		No	No	Not Cov	No	No	No	
83060	HEMOGLOBIN SULFHEMOGLOBIN QUANTITATIVE		No	No	Not Cov	No	No	No	
83065	HEMOGLOBIN THERMOLABILE		No	No	Not Cov	No	No	No	
83068	HEMOGLOBIN UNSTABLE SCREEN		No	No	Not Cov	No	No	No	
83069	ASSAY OF HEMOGLOBIN URINE		No	No	Not Cov	No	No	No	
83070	ASSAY OF HEMOSIDERIN QUALITATIVE		No	No	Not Cov	No	No	No	
83080	ASSAY OF B-HEXOSAMINIDASE EACH ASSAY		No	No	Not Cov	No	No	No	
83088	ASSAY OF HISTAMINE		No	No	Not Cov	No	No	No	
83090	ASSAY OF HOMOCYSTEINE		No	No	Not Cov	No	No	No	
83150	ASSAY OF HOMOVANILLIC ACID		No	No	Not Cov	No	No	No	
83491	HYDROXYCORTICOSTEROIDS 17		No	No	Not Cov	No	No	No	
83497	ASSAY OF HYDROXYINDOLACETIC ACID 5-HIAA		No	No	Not Cov	No	No	No	
83498	ASSAY OF HYDROXYPROGESTERONE 17-D		No	No	Not Cov	No	No	No	
83500	ASSAY OF HYDROXYPROLINE FREE		No	No	Not Cov	No	No	No	
83505	ASSAY OF HYDROXYPROLINE TOTAL		No	No	Not Cov	No	No	No	
83516	IMMUNOASSAY ANALYTE QUAL SEMIQUAL MULTIPLE STEP		No	No	Not Cov	No	No	No	
83518	IMMUNOASSAY ANALYTE QUAL SEMIQUAL SINGLE STEP		No	No	Not Cov	No	No	No	
83519	IMMUNOASSAY ANALYTE QUANT RADIOIMMUNOASSAY		No	No	Not Cov	No	No	No	
83520	IMMUNOASSAY ANALYTE QUANTITATIVE NOS		No	No	Not Cov	No	No	No	
83525	ASSAY OF INSULIN TOTAL		No	No	Not Cov	No	No	No	
83527	ASSAY OF INSULIN FREE		No	No	Not Cov	No	No	No	
83528	ASSAY OF INTRINSIC FACTOR		No	No	Not Cov	No	No	No	
83540	ASSAY OF IRON		No	No	Not Cov	No	No	No	
83550	IRON BINDING CAPACITY		No	No	Not Cov	No	No	No	
83570	ISOCITRIC DEHYDROGENASE		No	No	Not Cov	No	No	No	
83582	ASSAY OF KETOGENIC STEROIDS FRACTIONATION		No	No	Not Cov	No	No	No	
83586	ASSAY OF KETOSTEROIDS 17- TOTAL		No	No	Not Cov	No	No	No	
83593	KETOSTEROIDS 17- FRACTIONATION		No	No	Not Cov	No	No	No	
83605	ASSAY OF LACTATE		No	No	Not Cov	No	No	No	
83615	LACTATE DEHYDROGENASE LDH		No	No	Not Cov	No	No	No	
83625	LACTATE DEHYDROGENASE ISOENZYMES SEP AND QUAN		No	No	Not Cov	No	No	No	
83630	LACTOFERRIN FECAL QUALITATIVE		No	No	Not Cov	No	No	No	

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
83631	LACTOFERRIN FECAL QUANTITATIVE		No	No	Not Cov	No	No	No	
83632	LACTOGEN HPL HUMAN CHORIONIC SOMATOMAMMOTROPIN		No	No	Not Cov	No	No	No	
83633	LACTOSE URINE QUALITATIVE		No	No	Not Cov	No	No	No	
83655	ASSAY OF LEAD		No	No	Not Cov	No	No	No	
83661	FETAL LUNG MATURITY LECITHIN SPHINGOMYELIN RATIO		No	No	Not Cov	No	No	No	
83662	FETAL LUNG MATURITY FOAM STABILITY TEST		No	No	Not Cov	No	No	No	
83663	FETAL LUNG MATURITY FLUORESCENCE POLARIZATION		No	No	Not Cov	No	No	No	
83664	FETAL LUNG MATURITY LAMELLAR BODY DENSITY		No	No	Not Cov	No	No	No	
83670	LEUCINE AMINOPEPTIDASE LAP		No	No	Not Cov	No	No	No	
83690	ASSAY OF LIPASE		No	No	Not Cov	No	No	No	
83695	LIPOPROTEIN (A)		No	No	Not Cov	No	No	No	
83698	LIPOPROTEIN-ASSOCIATED PHOSPHOLIPASE A2		No	No	Not Cov	No	No	No	
83700	LIPOPROTEIN BLOOD ELECTROPHORECTIC SEP AND QUAN		No	No	Not Cov	No	No	No	
83701	LIPOPROTEIN BLOOD HIGH RESOLTJ AND QUANTJ SUBCLASS		No	No	Not Cov	No	No	No	
83704	LIPOPROTEIN BLOOD QUAN NUMBERS AND SUBCLASSES		No	No	Not Cov	No	No	No	
83718	LIPOPROTEIN DIR MEAS HIGH DENSITY CHOLESTEROL		No	No	Not Cov	No	No	No	
83719	LIPOPROTEIN DIRECT MEASUREMENT VLDL CHOLESTEROL		No	No	Not Cov	No	No	No	
83721	LIPOPROTEIN DIRECT MEASUREMENT LDL CHOLESTEROL		No	No	Not Cov	No	No	No	
83722	DIR MEAS LIPOPROTEIN SMALL DENSE LDL CHOLESTEROL		No	No	Not Cov	No	No	No	
83727	LUTEINIZING RELEASING FACTOR		No	No	Not Cov	No	No	No	
83735	ASSAY OF MAGNESIUM		No	No	Not Cov	No	No	No	
83775	ASSAY OF MALATE DEHYDROGENASE		No	No	Not Cov	No	No	No	
83785	ASSAY OF MANGANESE		No	No	Not Cov	No	No	No	
83789	MASS SPECT AND TANDEM MASS SPECT NONDRG ANAL NES EA		No	No	Not Cov	No	No	No	
83825	ASSAY OF MERCURY QUANTITATIVE		No	No	Not Cov	No	No	No	
83835	METANEPHRINES		No	No	Not Cov	No	No	No	
83857	METHEMALBUMIN		No	No	Not Cov	No	No	No	
83861	MICROFLUIDIC ANALYSIS TEAR OSMOLARITY		Not Cov	Not Cov	Not Cov	Not Cov	No	No	
83864	MUCOPOLYSACCHARIDES ACID QUANTITATIVE		No	No	Not Cov	No	No	No	
83872	MUCIN SYNOVIAL FLUID ROPES TEST		No	No	Not Cov	No	No	No	
83873	MYELIN BASIC PROTEIN CEREBROSPINAL FLUID		No	No	Not Cov	No	No	No	
83874	MYOGLOBIN		No	No	Not Cov	No	No	No	
83876	MYELOPEROXIDASE MPO		Not Cov	Not Cov	Not Cov	Not Cov	No	No	
83880	NATRIURETIC PEPTIDE		No	No	Not Cov	No	No	No	
83883	ASSAY OF NEPHELOMETRY EACH ANALYTE NES		No	No	Not Cov	No	No	No	
83885	ASSAY OF NICKEL		No	No	Not Cov	No	No	No	
83915	ASSAY OF NUCLEOTIDASE 5'-		No	No	Not Cov	No	No	No	
83916	OLIGOCLONAL IMMUNE		No	No	Not Cov	No	No	No	

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
83918	ORGANIC ACIDS TOTAL QUANTITATIVE EACH SPECIMEN		No	No	Not Cov	No		No	No
83919	ORGANIC ACIDS QUALITATIVE EACH SPECIMEN		No	No	Not Cov	No		No	No
83921	ORGANIC ACID 1 QUANTITATIVE		No	No	Not Cov	No		No	No
83930	ASSAY OF OSMOLALITY BLOOD		No	No	Not Cov	No		No	No
83935	ASSAY OF OSMOLALITY URINE		No	No	Not Cov	No		No	No
83937	ASSAY OF OSTEOCALCIN		No	No	Not Cov	No		No	No
83945	ASSAY OF OXALATE		No	No	Not Cov	No		No	No
83950	ONCOPROTEIN HER-2 NEU		No	No	Not Cov	No		No	No
83951	ONCOPROTEIN DES-GAMMA-CARBOXY-PROTHROMBIN DCP		Not Cov	Not Cov	Not Cov	Not Cov		No	No
83970	ASSAY OF PARATHORMONE		No	No	Not Cov	No		No	No
83986	PH BODY FLUID NOT ELSEWHERE SPECIFIED		No	No	Not Cov	No		No	No
83987	PH EXHALED BREATH CONDENSATE		Yes	Yes	Not Cov	Yes		Yes	Not Cov
83992	ASSAY OF PHENCYCLIDINE		No	No	Not Cov	No		Not Cov	No
83993	ASSAY OF CALPROTECTIN FECAL		No	No	Not Cov	No		No	No
84030	ASSAY OF PHENYLALANINE BLOOD		No	No	Not Cov	No		No	No
84035	ASSAY OF PHENYLKETONES QUALITATIVE		No	No	Not Cov	No		No	No
84060	ASSAY OF PHOSPHATASE ACID TOTAL		No	No	Not Cov	No		No	No
84066	ASSAY OF PHOSPHATASE ACID PROSTATIC		No	No	Not Cov	No		No	No
84075	ASSAY OF PHOSPHATASE ALKALINE		No	No	Not Cov	No		No	No
84078	ASSAY OF PHOSPHATASE ALKALINE HEAT STABLE		No	No	Not Cov	No		No	No
84080	ASSAY OF PHOSPHATASE ALKALINE ISOENZYMES		No	No	Not Cov	No		No	No
84081	PHOSPHATIDYLGLYCEROL		No	No	Not Cov	No		No	No
84085	PHOSPHOGLUCONATE 6-DEHYD RBC		No	No	Not Cov	No		No	No
84087	ASSAY OF PHOSPHOHEXOSE ISOMERASE		No	No	Not Cov	No		No	No
84100	ASSAY OF PHOSPHORUS INORGANIC		No	No	Not Cov	No		No	No
84105	ASSAY OF PHOSPHORUS INORGANIC URINE		No	No	Not Cov	No		No	No
84106	PORPHOBILINOGEN URINE QUALITATIVE		No	No	Not Cov	No		No	No
84110	ASSAY OF PORPHOBILINOGEN URINE QUANTITATIVE		No	No	Not Cov	No		No	No
84112	EVAL C V AMNIOTIC FLUID PROTEIN QUAL EA SPECIMEN		No	No	Not Cov	No		No	No
84119	PORPHYRINS URINE QUALITATAIVE		No	No	Not Cov	No		No	No
84120	PORPHYRINS URINE QUANTITATION AND FRACTIONATION		No	No	Not Cov	No		No	No
84126	PORPHYRINS FECES QUANTITATIVE		No	No	Not Cov	No		No	No
84132	POTASSIUM SERUM PLASMA WHOLE BLOOD		No	No	Not Cov	No		No	No
84133	POTASSIUM URINE		No	No	Not Cov	No		No	No
84134	PREALBUMIN		No	No	Not Cov	No		No	No
84135	PREGNANEDIOL		No	No	Not Cov	No		No	No
84138	PREGNANETRIOL		No	No	Not Cov	No		No	No
84140	PREGNENOLONE		No	No	Not Cov	No		No	No
84143	17-HYDROXYPREGNENOLONE		No	No	Not Cov	No		No	No
84144	ASSAY OF PROGESTERONE		No	No	Not Cov	No		No	No
84145	PROCALCITONIN (PCT)		Yes	Yes	Not Cov	Yes		Yes	Not Cov
84146	ASSAY OF PROLACTIN		No	No	Not Cov	No		No	No
84150	ASSAY OF PROTAGLNDIN EACH		No	No	Not Cov	No		No	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
84152	ASSAY OF PROSTATE SPECIFIC ANTIGEN COMPLEXED		No	No	Not Cov	No	No	No	
84153	ASSAY OF PROSTATE SPECIFIC ANTIGEN TOTAL		No	No	Not Cov	No	No	No	
84154	ASSAY OF PROSTATE SPECIFIC ANTIGEN FREE		No	No	Not Cov	No	No	No	
84155	PROTEIN XCPT REFRACTOMETRY SERUM PLASMA WHL BLD		No	No	Not Cov	No	No	No	
84156	PROTEIN TOTAL XCPT REFRACTOMETRY URINE		No	No	Not Cov	No	No	No	
84157	PROTEIN TOTAL XCPT REFRACTOMETRY OTH SRC		No	No	Not Cov	No	No	No	
84160	PROTEIN TOTAL REFRACTOMETRY ANY SRC		No	No	Not Cov	No	No	No	
84163	PREGNANCY-ASSOCIATED PLASMA PROTEIN-A		No	No	Not Cov	No	No	No	
84165	PROTEIN ELECTROPHORETIC FRACTJ AND QUANTJ SERUM		No	No	Not Cov	No	No	No	
84166	PROTEIN ELECTROP FXJ AND QUAN OTH FLUS CONCENTRATI		No	No	Not Cov	No	No	No	
84181	PROTEIN WESTRN BLOT I AND R BLOOD OTHER FLUID		No	No	Not Cov	No	No	No	
84182	PROTEIN WESTRN BLOT BLOOD OTH FLU IMMUNOLOGICAL		No	No	Not Cov	No	No	No	
84202	PROTOPORPHYRIN RBC QUANTITATIVE		No	No	Not Cov	No	No	No	
84203	PROTOPORPHYRIN RBC SCREEN		No	No	Not Cov	No	No	No	
84206	ASSAY OF PROINSULIN		No	No	Not Cov	No	No	No	
84207	ASSAY OF PYRIDOXAL PHOSPHATE		No	No	Not Cov	No	No	No	
84210	ASSAY OF PYRUVATE		No	No	Not Cov	No	No	No	
84220	ASSAY OF PYRUVATE KINASE		No	No	Not Cov	No	No	No	
84228	ASSAY OF QUININE		No	No	Not Cov	No	No	No	
84233	ASSAY OF RECEPTOR ASSAY ESTROGEN		No	No	Not Cov	No	No	No	
84234	ASSAY OF RECEPTOR ASSAY PROGESTERONE		No	No	Not Cov	No	No	No	
84235	RECEPTOR ASSAY ENDOCRINE OTH THN ESTRGN PROGST		No	No	Not Cov	No	No	No	
84238	RECEPTOR ASSAY NON-ENDOCRINE SPECIFY RECEPTOR		No	No	Not Cov	No	No	No	
84244	ASSAY OF RENIN		No	No	Not Cov	No	No	No	
84252	ASSAY OF RIBOFLAVIN-VITAMIN B-2		No	No	Not Cov	No	No	No	
84255	ASSAY OF SELENIUM		No	No	Not Cov	No	No	No	
84260	ASSAY OF SEROTONIN		No	No	Not Cov	No	No	No	
84270	ASSAY OF SEX HORMONE BINDING GLOBULIN		No	No	Not Cov	No	No	No	
84275	ASSAY OF SIALIC ACID		No	No	Not Cov	No	No	No	
84285	ASSAY OF SILICA		No	No	Not Cov	No	No	No	
84295	SODIUM SERUM PLASMA OR WHOLE BLOOD		No	No	Not Cov	No	No	No	
84300	ASSAY OF URINE SODIUM		No	No	Not Cov	No	No	No	
84302	ASSAY OF SODIUM OTHER SOURCE		No	No	Not Cov	No	No	No	
84305	ASSAY OF SOMATOMEDIN		No	No	Not Cov	No	No	No	
84307	ASSAY OF SOMATOSTATIN		No	No	Not Cov	No	No	No	
84311	SPECTROPHOTOMETRY ANALYT NOT ELSEWHERE SPECIFIED		No	No	Not Cov	No	No	No	
84315	SPECIFIC GRAVITY EXCEPT URINE		No	No	Not Cov	No	No	No	
84375	SUGARS CHROMATOGRAPHIC TLC PAPER CHROMATOGRAPHY		No	No	Not Cov	No	No	No	
84376	SUGARS MONO DI AND OLIGOS 1 QUALITATAIVE EACH SPEC		No	No	Not Cov	No	No	No	

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
84377	SUGARS MONO DI AND OLIGOS MLT QUALITATIVE EACH SPE		No	No	Not Cov	No		No	No
84378	SUGARS MONO DI AND OLIGOS 1 QUANTITATIVE EACH SPEC		No	No	Not Cov	No		No	No
84379	SUGARS MONO DI AND OLIGOS MLT QUANTITATIVE EA SPEC		No	No	Not Cov	No		No	No
84392	ASSAY OF SULFATE URINE		No	No	Not Cov	No		No	No
84402	ASSAY OF TESTOSTERONE FREE		No	No	Not Cov	No		No	No
84403	ASSAY OF TESTOSTERONE TOTAL		No	No	Not Cov	No		No	No
84410	ASSAY BIOVLBL TESTOSTERONE DIRECT MEASUREMENT		No	No	Not Cov	No		No	No
84425	ASSAY OF THIAMINE-VITAMIN B-1		No	No	Not Cov	No		No	No
84430	ASSAY OF THIOCYANATE		No	No	Not Cov	No		No	No
84431	THROMBOXANE METABOLITE W WO THROMBOXANE URINE		No	No	Not Cov	No		No	No
84432	ASSAY OF THYROGLOBULIN		No	No	Not Cov	No		No	No
84436	ASSAY OF THYROXINE TOTAL		No	No	Not Cov	No		No	No
84437	ASSAY OF THYROXINE REQUIRING ELUTION		No	No	Not Cov	No		No	No
84439	ASSAY OF FREE THYROXINE		No	No	Not Cov	No		No	No
84442	ASSAY OF THYROXINE BINDING GLOBULIN		No	No	Not Cov	No		No	No
84443	ASSAY OF THYROID STIMULATING HORMONE TSH		No	No	Not Cov	No		No	No
84445	THYROID STIMULATING IMMUNE GLOBULINS TSI		No	No	Not Cov	No		No	No
84446	ASSAY OF TOCOPHEROL ALPHA VITAMIN E		No	No	Not Cov	No		No	No
84449	ASSAY OF TRANSCORTIN CORTISOL BINDING GLOBULIN		No	No	Not Cov	No		No	No
84450	TRANSFERASE ASPARTATE AMINO AST SGOT		No	No	Not Cov	No		No	No
84460	TRANSFERASE ALANINE AMINO ALT SGPT		No	No	Not Cov	No		No	No
84466	ASSAY OF L7383TRANSFERRIN		No	No	Not Cov	No		No	No
84478	ASSAY OF TRIGLYCERIDES		No	No	Not Cov	No		No	No
84479	THYROID HORM UPTK THYROID HORMONE BINDING RATIO		No	No	Not Cov	No		No	No
84480	ASSAY OF TRIIODOTHYRONINE T3 TOTAL TT3		No	No	Not Cov	No		No	No
84481	ASSAY OF TRIIODOTHYRONINE T3 FREE		No	No	Not Cov	No		No	No
84482	TRIIODOTHYRONINE T3 REVERSE		No	No	Not Cov	No		No	No
84484	ASSAY OF TROPONIN QUANTITATIVE		No	No	Not Cov	No		No	No
84485	ASSAY OF TRYPSIN DUODENAL FLUID		No	No	Not Cov	No		No	No
84488	ASSAY OF TRYPSIN FECES QUALITATIVE		No	No	Not Cov	No		No	No
84490	TRYPSIN FECES QUANTITATIVE 24-HR COLLECTION		No	No	Not Cov	No		No	No
84510	ASSAY OF TYROSINE		No	No	Not Cov	No		No	No
84512	ASSAY OF TROPONIN QUALITATIVE		No	No	Not Cov	No		No	No
84520	ASSAY OF UREA NITROGEN QUANTITATIVE		No	No	Not Cov	No		No	No
84525	ASSAY OF UREA NITROGEN SEMIQUANTITATIVE		No	No	Not Cov	No		No	No
84540	ASSAY OF UREA NITROGEN URINE		No	No	Not Cov	No		No	No
84545	UREA NITROGEN CLEARANCE		No	No	Not Cov	No		No	No
84550	ASSAY OF BLOOD URIC ACID		No	No	Not Cov	No		No	No
84560	ASSAY OF URIC ACID OTHER SOURCE		No	No	Not Cov	No		No	No
84577	ASSAY OF UROBILINOGEN FECES QUANTITATIVE		No	No	Not Cov	No		No	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
84578	ASSAY OF UROBILINOGEN URINE QUALITATIVE		No	No	Not Cov	No		No	No
84580	UROBILINOGEN URINE QUANTITATIVE TIMED SPECIMEN		No	No	Not Cov	No		No	No
84583	ASSAY OF UROBILINOGEN URINE SEMIQUANTITATIVE		No	No	Not Cov	No		No	No
84585	ASSAY OF VANILLYLMADELIC ACID URINE		No	No	Not Cov	No		No	No
84586	ASSAY OF VASOACTIVE INTESTINAL PEPTIDE		No	No	Not Cov	No		No	No
84588	ASSAY OF VASOPRESSIN ANTI-DIURETIC HORMONE		No	No	Not Cov	No		No	No
84590	ASSAY OF VITAMIN A		No	No	Not Cov	No		No	No
84591	ASSAY OF VITAMIN NOT OTHERWISE SPECIFIED		No	No	Not Cov	No		No	No
84597	ASSAY OF VITAMIN K		No	No	Not Cov	No		No	No
84600	ASSAY OF VOLATILES		No	No	Not Cov	No		No	No
84620	XYLOSE ABSORPTION TEST BLOOD AND URINE		No	No	Not Cov	No		No	No
84630	ASSAY OF ZINC		No	No	Not Cov	No		No	No
84681	ASSAY OF C-PEPTIDE		No	No	Not Cov	No		No	No
84702	GONADOTROPIN CHORIONIC QUANTITATIVE		No	No	Not Cov	No		No	No
84703	GONADOTROPIN CHORIONIC QUALITATIVE		No	No	Not Cov	No		No	No
84704	GONADOTROPIN CHORIONIC HCG FREE BETA CHAIN		No	No	Not Cov	No		No	No
84830	OVULATION TEST VISUAL COLOR COMPARISON HLH		No	No	Not Cov	No		No	No
84999	UNLISTED CHEMISTRY PROCEDURE	PA Req all Dx	Yes	Yes	Not Cov	Yes		Yes	Yes
85002	BLEEDING TIME TEST		No	No	Not Cov	No		No	No
85004	BLOOD COUNT AUTOMATED DIFFERENTIAL WBC COUNT		No	No	Not Cov	No		No	No
85007	BLOOD COUNT SMEAR MCRSCP W MNL DIFRNTL WBC COUNT		No	No	Not Cov	No		No	No
85008	BLD COUNT SMEAR MCRSCP W O MNL DIFRNTL WBC COUNT		No	No	Not Cov	No		No	No
85009	BLOOD COUNT MANUAL DIFRNTL WBC COUNT BUFFY COAT		No	No	Not Cov	No		No	No
85013	BLOOD COUNT SPUN MICROHEMATOCRIT		No	No	Not Cov	No		No	No
85014	BLOOD COUNT HEMATOCRIT		No	No	Not Cov	No		No	No
85018	BLOOD COUNT HEMOGLOBIN		No	No	Not Cov	No		No	No
85025	BLOOD COUNT COMPLETE AUTO AND AUTO DIFRNTL WBC		No	No	Not Cov	No		No	No
85027	BLOOD COUNT COMPLETE AUTOMATED		No	No	Not Cov	No		No	No
85032	BLOOD COUNT MANUAL CELL COUNT EACH		No	No	Not Cov	No		No	No
85041	BLOOD COUNT RED BLOOD CELL AUTOMATED		No	No	Not Cov	No		No	No
85044	BLOOD COUNT RETICULOCYTE AUTOMATED		No	No	Not Cov	No		No	No
85045	BLOOD COUNT RETICULOCYTE AUTOMATED		No	No	Not Cov	No		No	No
85046	BLOOD COUNT RETICULOCYTES AUTO 1 OR GRT CELL MEAS		No	No	Not Cov	No		No	No
85048	BLOOD COUNT LEUKOCYTE WBC AUTOMATED		No	No	Not Cov	No		No	No
85049	BLOOD COUNT PLATELET AUTOMATED		No	No	Not Cov	No		No	No
85055	RETICULATED PLATELET ASSAY		No	No	Not Cov	No		No	No
85060	BLOOD SMEAR PERIPHERAL INTERP PHYS W WRIT REPORT		Not Cov	No	Not Cov	No		No	No
85097	BONE MARROW SMEAR INTERPRETATION		No	No	Not Cov	No		No	No
85130	CHROMOGENIC SUBSTRATE ASSAY		No	No	Not Cov	No		No	No

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			Outpatient		ASC	Office Setting			
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85170	BLOOD CLOT RETRACTION		No	No	Not Cov	No	No	No	
85175	CLOT LYSIS TIME WHOLE BLOOD DILUTION		No	No	Not Cov	No	No	No	
85210	CLOTTING FACTOR II PROTHROMBIN SPECIFIC		No	No	Not Cov	No	No	No	
85220	CLOTTING FACTOR V ACG PROACCELERIN LABILE FACTOR		No	No	Not Cov	No	No	No	
85230	CLOTTING FACTOR VII PROCONVERTIN STABLE FACTOR		No	No	Not Cov	No	No	No	
85240	CLOTTING FACTOR VIII AHG 1 STAGE		No	No	Not Cov	No	No	No	
85244	CLOTTING FACTOR VIII RELATED ANTIGEN		No	No	Not Cov	No	No	No	
85245	CLOTTING FACTOR VIII VW FACTOR RISTOCETIN COFACT		No	No	Not Cov	No	No	No	
85246	CLOTTING FACTOR VIII VW FACTOR ANTIGEN		No	No	Not Cov	No	No	No	
85247	CLOTTING FACTOR VIII MULTIMETRIC ANALYSIS		No	No	Not Cov	No	No	No	
85250	CLOTTING FACTOR IX PTC CHRISTMAS		No	No	Not Cov	No	No	No	
85260	CLOTTING FACTOR X STUART-PROWER		No	No	Not Cov	No	No	No	
85270	CLOTTING FACTOR XI PTA		No	No	Not Cov	No	No	No	
85280	CLOTTING FACTOR XII HAGEMAN		No	No	Not Cov	No	No	No	
85290	CLOTTING FACTOR XIII FIBRIN STABILIZING		No	No	Not Cov	No	No	No	
85291	CLOTTING FACTOR XIII FIBRN STABILIZ SCREEN SOLUB		No	No	Not Cov	No	No	No	
85292	CLOTTING PREKALLIKREIN ASSAY FLETCHER FACT ASSAY		No	No	Not Cov	No	No	No	
85293	CLOTTING HI MOLEC WEIGHT KININOGEN ASSAY		No	No	Not Cov	No	No	No	
85300	CLOTTING INHIBITORS ANTITHROMBIN III ACTIVITY		No	No	Not Cov	No	No	No	
85301	CLOTTING INHIBITRS ANTITHROMBN III ANTIGEN ASSAY		No	No	Not Cov	No	No	No	
85302	CLOTTING INHIBITORS PROTEIN C ANTIGEN		No	No	Not Cov	No	No	No	
85303	CLOTTING INHIBITORS PROTEIN C ACTIVITY		No	No	Not Cov	No	No	No	
85305	CLOTTING INHIBITORS PROTEIN S TOTAL		No	No	Not Cov	No	No	No	
85306	CLOTTING INHIBITORS PROTEIN S FREE		No	No	Not Cov	No	No	No	
85307	ACTIVATED PROTEIN C APC RESISTANCE ASSAY		No	No	Not Cov	No	No	No	
85335	FACTOR INHIBITOR TEST		No	No	Not Cov	No	No	No	
85337	THROMBOMODULIN		No	No	Not Cov	No	No	No	
85345	COAGULATION TIME LEE AND WHITE		No	No	Not Cov	No	No	No	
85347	COAGULATION TIME ACTIVATED		No	No	Not Cov	No	No	No	
85348	COAGULATION TIME OTHER METHODS		No	No	Not Cov	No	No	No	
85360	EUGLOBULIN LYSIS		No	No	Not Cov	No	No	No	
85362	FIBRIN DGRADJ SPLT PRODUXS AGGLUJ SLIDE SEMIQUAN		No	No	Not Cov	No	No	No	
85366	FIBRIN DGRADJ SPLT PRODUXS PARACOAGJ		No	No	Not Cov	No	No	No	
85370	FIBRIN DGRADJ SPLT PRODUCTS QUANTITATIVE		No	No	Not Cov	No	No	No	
85378	FIBRIN DGRADJ PRODUCTS D-DIMER QUAL SEMIQUAN		No	No	Not Cov	No	No	No	
85379	FIBRIN DGRADJ PRODUCTS D-DIMER QUANTITATIVE		No	No	Not Cov	No	No	No	
85380	FIBRIN DGRADJ PRODUCTS D-DIMER ULTRASENSITIVE		No	No	Not Cov	No	No	No	
85384	FIBRINOGEN ACTIVITY		No	No	Not Cov	No	No	No	
85385	FIBRINOGEN ANTIGEN		No	No	Not Cov	No	No	No	
85390	FIBRINOLYSINS COAGULOPATHY SCREEN INTERP AND REPOR		No	No	Not Cov	No	No	No	

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			Outpatient		ASC	Office Setting			
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85396	COAGJ FBRNLYS ASSAY WHOLE BLOOD ADDITIVE PER DAY		No	No	Not Cov	No		No	No
85397	COAGJ AND FIBRINOLYSIS FUNCTIONAL ACTV NOS EA ANAL		Not Cov	Not Cov	Not Cov	Not Cov		No	No
85400	FIBRINOLYTIC FACTORS AND INHIBITORS PLASMIN		No	No	Not Cov	No		No	No
85410	FBRNLYC FACTORS AND INHIBITORS ALPHA-2 ANTIPLASMIN		No	No	Not Cov	No		No	No
85415	FBRNLYC FACTORS AND INHIBITORS PLSMNG ACTIVATOR		No	No	Not Cov	No		No	No
85420	FBRNLYC FACTORS AND INHIBITRS PLSMNG XCPT AGIC ASS		No	No	Not Cov	No		No	No
85421	FBRNLYC FACTORS AND INHIBITORS PLSMNG AGIC ASSAY		No	No	Not Cov	No		No	No
85441	HEINZ BODIES DIRECT		No	No	Not Cov	No		No	No
85445	HEINZ BODIES INDUCED ACETYL PHENYLHYDRAZINE		No	No	Not Cov	No		No	No
85460	HGB RBCS FETAL FETOMATERNAL HEMRRG DIFRNTL LYSIS		No	No	Not Cov	No		No	No
85461	HGB RBCS FETAL FETOMATERNAL HEMRRG ROSETTE		No	No	Not Cov	No		No	No
85475	HEMOLYSIN ACID		No	No	Not Cov	No		No	No
85520	HEPARIN ASSAY		No	No	Not Cov	No		No	No
85525	HEPARIN NEUTRALIZATION		No	No	Not Cov	No		No	No
85530	HEPARIN-PROTAMINE TOLERANCE TST		No	No	Not Cov	No		No	No
85536	IRON STAIN PERIPHERAL BLOOD		No	No	Not Cov	No		No	No
85540	WBC ALKALINE PHOSPHATASE COUNT		No	No	Not Cov	No		No	No
85547	MECHANICAL FRAGILITY RBC		No	No	Not Cov	No		No	No
85549	MURAMIDASE		No	No	Not Cov	No		No	No
85555	OSMOTIC FRAGILITY RBC UNINCUBATED		No	No	Not Cov	No		No	No
85557	OSMOTIC FRAGILITY RBC INCUBATED		No	No	Not Cov	No		No	No
85576	PLATELET AGGREGATION IN VITRO EACH AGENT		No	No	Not Cov	No		No	No
85597	PHOSPHOLIPID NEUTRALIZATION PLATELET		No	No	Not Cov	No		No	No
85598	PHOSPHOLIPID NEUTRALIZATION HEXAGONAL		Not Cov	Not Cov	Not Cov	Not Cov		No	No
85610	PROTHROMBIN TIME		No	No	Not Cov	No		No	No
85611	PROTHROMBIN TIME SUBSTITUTION PLASMA FRCTJ EACH		No	No	Not Cov	No		No	No
85612	RUSSELL VIPER VENON TIME UNDILUTED		No	No	Not Cov	No		No	No
85613	RUSSELL VIPER VENOM TIME DILUTED		No	No	Not Cov	No		No	No
85635	REPTILASE TEST		No	No	Not Cov	No		No	No
85651	SEDIMENTATION RATE RBC NON-AUTOMATED		No	No	Not Cov	No		No	No
85652	SEDIMENTATION RATE RBC AUTOMATED		No	No	Not Cov	No		No	No
85660	SICKLING RBC REDUCTION		No	No	Not Cov	No		No	No
85670	THROMBIN TIME PLASMA		No	No	Not Cov	No		No	No
85675	THROMBIN TIME TITER		No	No	Not Cov	No		No	No
85705	THROMBOPLASTIN INHIBITION TISSUE		No	No	Not Cov	No		No	No
85730	THROMBOPLASTIN TIME PARTIAL PLASMA WHOLE BLOOD		No	No	Not Cov	No		No	No
85732	THROMBOPLASTIN TIME PRTL SUBSTIT PLASMA FRCTJ EA		No	No	Not Cov	No		No	No

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			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
85810	VISCOSITY		No	No	Not Cov	No		No	No
85999	UNLISTED HEMATOLOGY AND COAGULATION PROCEDURE		Yes	Yes	Not Cov	Yes		Yes	Yes
86000	AGGLUTININS FEBRILE EACH ANTIGEN		No	No	Not Cov	No		No	No
86001	ALLERGEN SPECIFIC IGG QUAN SEMIQUAN EA ALLERGEN		No	No	Not Cov	No		No	No
86003	ALLERGEN SPEC IGE CRUDE ALLERGEN EXTRACT EACH		No	No	Not Cov	No		No	No
86005	ALLERGEN SPEC IGE QUAL MULTIALLERGEN SCREEN		No	No	Not Cov	No		No	No
86008	ALLERGEN SPEC IGE RECOMBINANT PURIFIED COMPNT EA		No	No	Not Cov	No		No	No
86021	ANTIBODY IDENTIFICATION LEUKOCYTE ANTIBODIES		No	No	Not Cov	No		No	No
86022	ANTIBODY IDENTIFICATION PLATELET ANTIBODIES		No	No	Not Cov	No		No	No
86023	ANTIBODY IDENTIFICATION PLATELET IMMUNOGL ASSAY		No	No	Not Cov	No		No	No
86038	ANTINUCLEAR ANTIBODIES ANA		No	No	Not Cov	No		No	No
86039	ANTINUCLEAR ANTIBODIES ANA TITER		No	No	Not Cov	No		No	No
86060	ANTISTREPTOLYSIN O TITER		No	No	Not Cov	No		No	No
86063	ANTISTREPTOLYSIN O SCREEN		No	No	Not Cov	No		No	No
86077	BLD BANK PHYS SVCS DIFFC CROSS MATCH AND EVAL REP		No	No	Not Cov	No		No	No
86078	BLD BANK PHYS SVCS INVSTGJ TFUJ RXN REPR		No	No	Not Cov	No		No	No
86079	BLD BANK PHYS SVCS AUTHJ DEVIJ STANDARD REPR		No	No	Not Cov	No		No	No
86140	C-REACTIVE PROTEIN		No	No	Not Cov	No		No	No
86141	C-REACTIVE PROTEIN HIGH SENSITIVITY		No	No	Not Cov	No		No	No
86146	BETA 2 GLYCOPROTEIN I ANTIBODY EACH		No	No	Not Cov	No		No	No
86147	CARDIOLIPIN ANTIBODY EACH IG CLASS		No	No	Not Cov	No		No	No
86148	ANTI-PHOSPHATIDYLSERINE ANTIBODY		No	No	Not Cov	No		No	No
86152	CELL ENUMERATION IMMUNE SELECTJ AND ID FLUID SPEC	No, pregnancy related if covered	Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
86153	CELL ENUMERATION IMMUNE SELECTJ AND ID PHYS INTERP	No, pregnancy related if covered	Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
86155	CHEMOTAXIS ASSAY SPECIFY METHOD		No	No	Not Cov	No		No	No
86156	COLD AGGLUTININ SCREEN		No	No	Not Cov	No		No	No
86157	COLD AGGLUTININ TITER		No	No	Not Cov	No		No	No
86160	COMPLEMENT ANTIGEN EACH COMPONENT		No	No	Not Cov	No		No	No
86161	COMPLEMENT FUNCTIONAL ACTIVITY EACH COMPONENT		No	No	Not Cov	No		No	No
86162	COMPLEMENT TOTAL HEMOLYTIC		No	No	Not Cov	No		No	No
86171	COMPLEMENT FIXATION TESTS EACH ANTIGEN		No	No	Not Cov	No		No	No
86200	CYCLIC CITRULLINATED PEPTIDE ANTIBODY		No	No	Not Cov	No		No	No
86215	DEOXYRIBONUCLEASE ANTIBODY		No	No	Not Cov	No		No	No
86225	DNA ANTIBODY NATIVE DOUBLE STRANDED		No	No	Not Cov	No		No	No
86226	DNA ANTIBODY SINGLE STRANDED		No	No	Not Cov	No		No	No
86235	EXTRACTABLE NUCLEAR ANTIGEN ANTIBODY ANY METHOD		No	No	Not Cov	No		No	No
86255	FLUORESCENT NONNFCT AGT ANTB SCREEN EA ANTIBODY		No	No	Not Cov	No		No	No

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			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
86256	FLUORESCENT NONNFCT AGT ANTB TITER EA ANTIBODY		No	No	Not Cov	No		No	No
86277	GROWTH HORMONE HUMAN ANTIBODY		No	No	Not Cov	No		No	No
86280	HEMAGGLUTINATION INHIBITION TEST HAI		No	No	Not Cov	No		No	No
86294	IMMUNOASSAY TUMOR ANTIGEN QUAL SEMIQUANTITATIVE		No	No	Not Cov	No		No	No
86300	IMMUNOASSAY TUMOR ANTIGEN QUANTITATIVE CA 15-3		No	No	Not Cov	No		No	No
86301	IMMUNOASSAY TUMOR ANTIGEN QUANTITATIVE CA 19-9		No	No	Not Cov	No		No	No
86304	IMMUNOASSAY TUMOR ANTIGEN QUANTITATIVE CA 125		No	No	Not Cov	No		No	No
86305	HUMAN EPIDIDYMIS PROTEIN 4 (HE4)		No	No	Not Cov	No		No	No
86308	HETEROPHILE ANTIBODIES SCREEN		No	No	Not Cov	No		No	No
86309	HETEROPHILE ANTIBODIES TITER		No	No	Not Cov	No		No	No
86310	HETEROPHILE ANTIBODIES TITER AFTER ABSORPTION		No	No	Not Cov	No		No	No
86316	IMMUNOASSAY TUMOR ANTIGEN QUANTITATIVE		Yes	Yes	Not Cov	Yes		Yes	Not Cov
86317	IMMUNOASSAY INFECTIOUS AGENT ANTIBODY QUAN NOS		No	No	Not Cov	No		No	No
86318	IMMUNOASSAY NFCT AGT ANTB QUAL SEMIQUAN 1 STEP		No	No	Not Cov	No		No	No
86320	IMMUNOELECTROPHORESIS SERUM		No	No	Not Cov	No		No	No
86325	IMMUNOELECTROPHORESIS OTHER FLUIDS CONCENTRATION		No	No	Not Cov	No		No	No
86327	IMMUNOELECTROPHORESIS CROSSED		No	No	Not Cov	No		No	No
86329	IMMUNODIFFUSION NOT ELSEWHERE SPECIFIED		No	No	Not Cov	No		No	No
86331	IMMUNODIFFUSION GEL DIFFUSION QUAL EA AG ANTB DY		No	No	Not Cov	No		No	No
86332	IMMUNE COMPLEX ASSAY		No	No	Not Cov	No		No	No
86334	IMMUNOFIXJ ELECTROPHORESIS SERUM		No	No	Not Cov	No		No	No
86335	IMMUNOFIXJ ELECTROPHORESIS OTHER FLUIDS		No	No	Not Cov	No		No	No
86336	INHIBIN A		No	No	Not Cov	No		No	No
86337	INSULIN ANTIBODIES		No	No	Not Cov	No		No	No
86340	INTRINSIC FACTOR ANTIBODIES		No	No	Not Cov	No		No	No
86341	ISLET CELL ANTIBODY		No	No	Not Cov	No		No	No
86343	LEUKOCYTE HISTAMINE RELEASE TEST LHR		Yes	Yes	Not Cov	Yes		Yes	Not Cov
86344	LEUKOCYTE PHAGOCYTOSIS		No	No	Not Cov	No		No	No
86352	CELLULAR FUNCTION ASSAY STIMUL AND DETECT BIOMARKE		No	No	Not Cov	No		No	No
86353	LYMPHOCYTE TR MITOGEN AG INDUCED BLASTOGENESIS		No	No	Not Cov	No		No	No
86355	B CELLS TOTAL COUNT		No	No	Not Cov	No		No	No
86356	MONONUCLEAR CELL ANTIGEN QUANTITATIVE NOS EA		No	No	Not Cov	No		No	No
86357	NATURAL KILLER CELLS TOTAL COUNT		No	No	Not Cov	No		No	No
86359	T CELLS TOTAL COUNT		No	No	Not Cov	No		No	No
86360	T CELLS ABSOLUTE CD4 AND CD8 COUNT RATIO		No	No	Not Cov	No		No	No
86361	T CELLS ABSOLUTE CD4 COUNT		No	No	Not Cov	No		No	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
86367	STEM CELLS TOTAL COUNT		No	No	Not Cov	No	No	No	
86376	MICROSOMAL ANTIBODIES EACH		No	No	Not Cov	No	No	No	
86382	NEUTRALIZATION TEST VIRAL		No	No	Not Cov	No	No	No	
86384	NITROBLUE TETRAZOLIUM DYE TEST NTD		No	No	Not Cov	No	No	No	
86386	NUCLEAR MATRIX PROTEIN 22 NMP22 QUALITATIVE		Not Cov	Not Cov	Not Cov	Not Cov	No	No	
86403	PARTICLE AGGLUTINATION SCREEN EACH ANTIBODY		No	No	Not Cov	No	No	No	
86406	PARTICLE AGGLUTINATION TITER EACH ANTIBODY		No	No	Not Cov	No	No	No	
86430	RHEUMATOID FACTOR QUALITATIVE		No	No	Not Cov	No	No	No	
86431	RHEUMATOID FACTOR QUANTITATIVE		No	No	Not Cov	No	No	No	
86480	TB CELL MEDIATED ANTIGN RESPNSE GAMMA INTERFERON		No	No	Not Cov	No	No	No	
86481	TB ANTIGEN RESPONSE GAMMA INTERFERON T-CELL SUSP		No	No	Not Cov	No	No	No	
86485	SKIN TEST CANDIDA		No	No	Not Cov	No	No	No	
86486	SKIN TEST UNLISTED ANTIGEN EACH		Yes	Yes	Not Cov	Yes	Yes	Yes	
86490	SKIN TEST COCCIDIOIDOMYCOSIS		No	No	Not Cov	No	No	No	
86510	SKIN TEST HISTOPLASMOSIS		No	No	Not Cov	No	No	No	
86580	SKIN TEST TUBERCULOSIS INTRADERMAL		No	No	Not Cov	No	No	No	
86590	STREPTOKINASE ANTIBODY		No	No	Not Cov	No	No	No	
86592	SYPHILIS TEST NON-TREPONEMAL ANTIBODY QUAL		No	No	Not Cov	No	No	No	
86593	SYPHILIS TEST QUANTITATIVE		No	No	Not Cov	No	No	No	
86602	ANTIBODY ACTINOMYCES		No	No	Not Cov	No	No	No	
86603	ANTIBODY ADENOVIRUS		No	No	Not Cov	No	No	No	
86606	ANTIBODY ASPERGILLUS		No	No	Not Cov	No	No	No	
86609	ANTIBODY BACTERIUM NOT ELSEWHERE SPECIFIED		No	No	Not Cov	No	No	No	
86611	ANTIBODY BARTONELLA		No	No	Not Cov	No	No	No	
86612	ANTIBODY BLASTOMYCES		No	No	Not Cov	No	No	No	
86615	ANTIBODY BORDETELLA		No	No	Not Cov	No	No	No	
86617	ANTIBODY BORRELIA BURGDORFERI CONFIRMATORY TST		No	No	Not Cov	No	No	No	
86618	ANTIBODY BORRELIA BURGDORFERI LYME DISEASE		No	No	Not Cov	No	No	No	
86619	ANTIBODY BORRELIA RELAPSING FEVER		No	No	Not Cov	No	No	No	
86622	ANTIBODY BRUCELLA		No	No	Not Cov	No	No	No	
86625	ANTIBODY CAMPYLOBACTER		No	No	Not Cov	No	No	No	
86628	ANTIBODY CANDIDA		No	No	Not Cov	No	No	No	
86631	ANTIBODY CHLAMYDIA		No	No	Not Cov	No	No	No	
86632	ANTIBODY CHLAMYDIA IGM		No	No	Not Cov	No	No	No	
86635	ANTIBODY COCCIDIOIDES		No	No	Not Cov	No	No	No	
86638	ANTIBODY COXIELLA BURNETII Q FEVER		No	No	Not Cov	No	No	No	
86641	ANTIBODY CRYPTOCOCCUS		No	No	Not Cov	No	No	No	
86644	ANTIBODY CYTOMEGALOVIRUS CMV		No	No	Not Cov	No	No	No	
86645	ANTIBODY CYTOMEGALOVIRUS CMV IGM		No	No	Not Cov	No	No	No	
86648	ANTIBODY DIPHTHERIA		No	No	Not Cov	No	No	No	
86651	ANTIBODY ENCEPHALITIS CALIFORNIA LA CROSSE		No	No	Not Cov	No	No	No	
86652	ANTIBODY ENCEPHALITIS EASTERN EQUINE		No	No	Not Cov	No	No	No	
86653	ANTIBODY ENCEPHALITIS ST. LOUIS		No	No	Not Cov	No	No	No	
86654	ANTIBODY ENCEPHALITIS WESTRN EQUINE		No	No	Not Cov	No	No	No	

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
86658	ANTIBODY ENTEROVIRUS		No	No	Not Cov	No	No	No	
86663	ANTIBODY EPSTEIN-BARR EB VIRUS EARLY ANTIGEN EA		No	No	Not Cov	No	No	No	
86664	ANTIBODY EPSTEIN-BARR EB VIRUS NUCLEAR AG EBNA		No	No	Not Cov	No	No	No	
86665	ANTIBODY EPSTEIN-BARR EB VIRUS VIRAL CAPSID VCA		No	No	Not Cov	No	No	No	
86666	ANTIBODY EHRlichia		No	No	Not Cov	No	No	No	
86668	ANTIBODY FRANCISELLA TULARENSIS		No	No	Not Cov	No	No	No	
86671	ANTIBODY FUNGUS NOT ELSEWHERE SPECIFIED		No	No	Not Cov	No	No	No	
86674	ANTIBODY GIARDIA LAMBLIA		No	No	Not Cov	No	No	No	
86677	ANTIBODY HELICOBACTER PYLORI		No	No	Not Cov	No	No	No	
86682	ANTIBODY HELMINTH NOT ELSEWHERE SPECIFIED		No	No	Not Cov	No	No	No	
86684	ANTIBODY HAEMOPHILUS INFLUENZA		No	No	Not Cov	No	No	No	
86687	ANTIBODY HTLV-I		No	No	Not Cov	No	No	No	
86688	ANTIBODY HTLV-II		No	No	Not Cov	No	No	No	
86689	ANTIBODY HTLV HIV ANTIBODY CONFIRMATORY TEST		No	No	Not Cov	No	No	No	
86692	ANTIBODY HEP DELTA AGENT		No	No	Not Cov	No	No	No	
86694	ANTIBODY HERPES SMPLX NON-SPECIFIC TYPE TEST		No	No	Not Cov	No	No	No	
86695	ANTIBODY HERPES SMPLX TYPE 1		No	No	Not Cov	No	No	No	
86696	ANTIBODY HERPES SMPLX TYPE 2		No	No	Not Cov	No	No	No	
86698	ANTIBODY HISTOPLASMA		No	No	Not Cov	No	No	No	
86701	ANTIBODY HIV-1		No	No	Not Cov	No	No	No	
86702	ANTIBODY HIV-2		No	No	Not Cov	No	No	No	
86703	ANTIBODY HIV-1 AND HIV-2 SINGLE RESULT		No	No	Not Cov	No	No	No	
86704	HEPATITIS B CORE ANTIBODY HBCAB TOTAL		No	No	Not Cov	No	No	No	
86705	HEPATITIS B CORE ANTIBODY HBCAB IGM ANTIBODY		No	No	Not Cov	No	No	No	
86706	HEPATITIS B SURF ANTIBODY HBSAB		No	No	Not Cov	No	No	No	
86707	HEPATITIS BE ANTIBODY HBEAB		No	No	Not Cov	No	No	No	
86708	HEPATITIS A ANTIBODY HAAB		No	No	Not Cov	No	No	No	
86709	HEPATITIS ANTIBODY HAAB IGM ANTIBODY		No	No	Not Cov	No	No	No	
86710	ANTIBODY INFLUENZA VIRUS		No	No	Not Cov	No	No	No	
86711	ANTIBODY JOHN CUNNINGHAM VIRUS		No	No	Not Cov	No	No	No	
86713	ANTIBODY LEGIONELLA		No	No	Not Cov	No	No	No	
86717	ANTIBODY LEISHMANIA		No	No	Not Cov	No	No	No	
86720	ANTIBODY LEPTOSPIRA		No	No	Not Cov	No	No	No	
86723	ANTIBODY LISTERIA MONOCYTOGENES		No	No	Not Cov	No	No	No	
86727	ANTIBODY LYMPHOCYTIC CHORIOMENINGITIS		No	No	Not Cov	No	No	No	
86732	ANTIBODY MUCORMYCOSIS		No	No	Not Cov	No	No	No	
86735	ANTIBODY MUMPS		No	No	Not Cov	No	No	No	
86738	ANTIBODY MYCOPLSM		No	No	Not Cov	No	No	No	
86741	ANTIBODY NEISSERIA MENINGITIDIS		No	No	Not Cov	No	No	No	
86744	ANTIBODY NOCARDIA		No	No	Not Cov	No	No	No	
86747	ANTIBODY PARVOVIRUS		No	No	Not Cov	No	No	No	
86750	ANTIBODY PLASMODIUM MALARIA		No	No	Not Cov	No	No	No	
86753	ANTIBODY PROTOZOA NES		No	No	Not Cov	No	No	No	
86756	ANTIBODY RESPIRATORY SYNCTIAL VIRUS		No	No	Not Cov	No	No	No	
86757	ANTIBODY RICKETTSIA		No	No	Not Cov	No	No	No	

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
86759	ANTIBODY ROTAVIRUS		No	No	Not Cov	No	No	No	
86762	ANTIBODY RUBELLA		No	No	Not Cov	No	No	No	
86765	ANTIBODY RUBEOLA		No	No	Not Cov	No	No	No	
86768	ANTIBODY SALMONELLA		No	No	Not Cov	No	No	No	
86771	ANTIBODY SHIGELLA		No	No	Not Cov	No	No	No	
86774	ANTIBODY TETANUS		No	No	Not Cov	No	No	No	
86777	ANTIBODY TOXOPLASMA		No	No	Not Cov	No	No	No	
86778	ANTIBODY TOXOPLASMA IGM		No	No	Not Cov	No	No	No	
86780	ANTIBODY TREPONEMA PALLIDUM		No	No	Not Cov	No	No	No	
86784	ANTIBODY TRICHINELLA		No	No	Not Cov	No	No	No	
86787	ANTIBODY VARICELLA-ZOSTER		No	No	Not Cov	No	No	No	
86788	ANTIBODY WEST NILE VIRUS IGM		No	No	Not Cov	No	No	No	
86789	ANTIBODY WEST NILE VIRUS		No	No	Not Cov	No	No	No	
86790	ANTIBODY VIRUS NOT ELSEWHERE SPECIFIED		No	No	Not Cov	No	No	No	
86793	ANTIBODY YERSINIA		No	No	Not Cov	No	No	No	
86794	ZIKA VIRUS IGM ANTIBODY		No	No	Not Cov	No	No	No	
86800	THYROGLOBULIN ANTIBODY		No	No	Not Cov	No	No	No	
86803	HEPATITIS C ANTIBODY		No	No	Not Cov	No	No	No	
86804	HEPATITIS C ANTIBODY CONFIRMATORY TEST		No	No	Not Cov	No	No	No	
86805	LYMPHOCYTOXICITY ASSAY VIS CROSSMATCH TITRATJ		No	No	Not Cov	No	No	No	
86806	LMPHOCYTOXICITY ASSAY VIS CROSSMTCH W O TITRAT		No	No	Not Cov	No	No	No	
86807	SERUM SCREENING PCT REACTIVE ANTIBODY STANDRD METH		No	No	Not Cov	No	No	No	
86808	SERUM SCREENING PCT REACTIVE ANTIBODY QUICK METH		No	No	Not Cov	No	No	No	
86812	HLA TYPING A B C SINGLE ANTIGEN		No	No	Not Cov	No	No	No	
86813	HLA TYPING A B C MULTIPLE ANTIGENS		No	No	Not Cov	No	No	No	
86816	HLA TYPING DR DQ SINGLE ANTIGEN		No	No	Not Cov	No	No	No	
86817	HLA TYPING DR DQ MULTIPLE ANTIGENS		No	No	Not Cov	No	No	No	
86821	HLA TYPING LYMPHOCYTE CULTURE MIXED		No	No	Not Cov	No	No	No	
86825	HLA CROSSMATCH NONCYTOTOXIC 1ST SERUM DILUTION		Not Cov	Not Cov	Not Cov	Not Cov	No	No	
86826	HLA CROSSMATCH NONCYTOTOXIC ADDL SERUM DILUTION		Not Cov	Not Cov	Not Cov	Not Cov	No	No	
86828	ANTIBODY HLA CLASS I AND CLASS II ANTIGENS QUAL		No	No	Not Cov	No	No	No	
86829	ANTIBODY HLA CLASS I OR CLASS II ANTIGENS QUAL		No	No	Not Cov	No	No	No	
86830	ANTIBODY HLA CLASS I PHENOTYPE PANEL QUALITATIVE		No	No	Not Cov	No	No	No	
86831	ANTIBODY HLA CLASS II PHENOTYPE PANEL QUAL		No	No	Not Cov	No	No	No	
86832	ANTIBODY HLA CLASS I HIGH DEFINITION PANEL QUAL		No	No	Not Cov	No	No	No	
86833	ANTIBODY HLA CLASS II HIGH DEFINITION PANEL QUAL		No	No	Not Cov	No	No	No	
86834	ANTIBODY HLA CLASS I SEMIQUANTITATIVE PANEL		No	No	Not Cov	No	No	No	
86835	ANTIBODY HLA CLASS II SEMIQUANTITATIVE PANEL		No	No	Not Cov	No	No	No	
86849	UNLISTED IMMUNOLOGY		Yes	Yes	Not Cov	Yes	Yes	Yes	

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
86850	ANTIBODY SCREEN RBC EACH SERUM TECHNIQUE		No	No	Not Cov	No	No	No	
86860	ANTIBODY ELUTION RBC EACH ELUTION		No	No	Not Cov	No	No	No	
86870	ANTIBODY ID RBC ANTIBODIES EA PANEL EA SERUM TQ		No	No	Not Cov	No	No	No	
86880	ANTIHUMAN GLOBULIN DIRECT EACH ANTISERUM		No	No	Not Cov	No	No	No	
86885	ANTIHUMAN GLOBULIN INDIR QUAL EA REAGENT CELL		No	No	Not Cov	No	No	No	
86886	ANTIHUMAN GLOBULIN INDIRECT EACH ANTIBODY TITER		No	No	Not Cov	No	No	No	
86890	AUTOL BLD COMPONENT COLLJ STORAGE PREDEPOSITED		No	No	Not Cov	No	No	No	
86891	AUTOL BLD COMPONENT COLLJ STORAGE SALVAGE		No	No	Not Cov	No	No	No	
86900	BLOOD TYPING SEROLOGIC ABO		No	No	Not Cov	No	No	No	
86901	BLOOD TYPING SEROLOGIC RH (D)		No	No	Not Cov	No	No	No	
86902	BLOOD TYPE ANTIGEN DONOR REAGENT SERUM EACH		No	No	Not Cov	No	No	No	
86904	BLOOD TYPING ANTIGEN SCREEN PATIENT SERUM UNIT		No	No	Not Cov	No	No	No	
86905	BLOOD TYPING RBC ANTIGENS OTH THN ABO RH D EACH		No	No	Not Cov	No	No	No	
86906	BLOOD TYPING SEROLOGIC RH PHENOTYPING COMPLETE		No	No	Not Cov	No	No	No	
86910	BLOOD TYPING PATERNITY PR INDIV ABO RH AND MN		Not Cov	Not Cov	Not Cov	Not Cov	Not Cov	No	
86911	BLOOD TYPING PATERNITY INDIV ADDL ANTIGEN SYS		Not Cov	Not Cov	Not Cov	Not Cov	Not Cov	No	
86920	COMPATIBILITY EACH UNIT IMMEDIATE SPIN TECHNIQUE		No	No	Not Cov	No	No	No	
86921	COMPATIBILITY EACH UNIT INCUBATION		No	No	Not Cov	No	No	No	
86922	COMPATIBILITY EACH UNIT ANTIGLOBULIN		No	No	Not Cov	No	No	No	
86923	COMPATIBILITY EACH UNIT ELECTRONIC		No	No	Not Cov	No	No	No	
86927	FRESH FROZEN PLASMA THAWING EACH UNIT		No	No	Not Cov	No	No	No	
86930	FROZEN BLOOD EACH UNIT FREEZING		No	No	Not Cov	No	No	No	
86931	FROZEN BLOOD EACH UNIT THAWING		No	No	Not Cov	No	No	No	
86932	FROZEN BLOOD EACH UNIT FREEZING AND THAWING		No	No	Not Cov	No	No	No	
86940	HEMOLYSINS AND AGGLUTININS AUTO SCREEN EACH		No	No	Not Cov	No	No	No	
86941	HEMOLYSINS AND AGGLUTININS INCUBATED		No	No	Not Cov	No	No	No	
86945	IRRADIATION BLOOD PRODUCT EACH UNIT		No	No	Not Cov	No	No	No	
86950	LEUKOCYTE TRANSFUSION		No	No	Not Cov	No	No	No	
86960	VOLUME REDUCTION BLOOD BLOOD PRODUCT EACH UNIT		No	No	Not Cov	No	No	No	
86965	POOLING PLATELETS OTHER BLOOD PRODUCTS		No	No	Not Cov	No	No	No	
86970	PRETX RBC ANTIBODY INCUBAT W CHEM AGNTS DRUGS EA		No	No	Not Cov	No	No	No	
86971	PRETX RBC ANTIBODY INCUBAT W ENZYMES EACH		No	No	Not Cov	No	No	No	
86972	PRETX RBC ANTIBODY INCUBAT W DENSITY GRAD SEP		No	No	Not Cov	No	No	No	
86975	PRETX SERUM RBC ANTIBODY INCUBATION DRUGS EACH		No	No	Not Cov	No	No	No	
86976	PRETX SERUM RBC ANTIBODY IDENTIFICATION DILUTION		No	No	Not Cov	No	No	No	

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			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
86977	PRETX SERUM RBC ANTB ID INCUBATION INHIBITORS EA		No	No	Not Cov	No		No	No
86978	PRETX SERUM RBC ANTIBODY ID DIFFIAL EACH ABSRPJ		No	No	Not Cov	No		No	No
86985	SPLITTING BLOOD BLOOD PRODUCTS EACH UNIT		No	No	Not Cov	No		No	No
86999	UNLISTED TRANSFUSION MEDICINE PROCEDURE		Yes	Yes	Not Cov	Yes		Yes	Yes
87003	ANIMAL INOCULATION SMALL ANIMAL W OBS AND DSJ		No	No	Not Cov	No		No	No
87015	CONCENTRATION INFECTIOUS AGENTS		No	No	Not Cov	No		No	No
87040	CULTURE BACTERIAL BLOOD AEROBIC W ID ISOLATES		No	No	Not Cov	No		No	No
87045	CUL BACT STOOL AEROBIC ISOL SALMONELLA AND SHIGELL		No	No	Not Cov	No		No	No
87046	CUL BACT STOOL AEROBIC ADDL PATHOGENS AND ID EA		No	No	Not Cov	No		No	No
87070	CUL BACT XCPT URINE BLOOD STOOL AEROBIC ISOL		No	No	Not Cov	No		No	No
87071	CUL BACT QUAN AEROBIC ISOL XCPT UR BLOOD STOOL		No	No	Not Cov	No		No	No
87073	CUL BACT QUAN ANAERC ISOL XCPT UR BLOOD STOOL		No	No	Not Cov	No		No	No
87075	CULTURE BACTERIAL ANY SOURCE ANAEROBIC ISO AND ID		No	No	Not Cov	No		No	No
87076	CUL BACT ANAEROBIC ADDL METHS DEFINITIVE EA ISOL		No	No	Not Cov	No		No	No
87077	CUL BACT AEROBIC ADDL METHS DEFINITIVE EA ISOL		No	No	Not Cov	No		No	No
87081	CUL PRSMPTV PTHGNC ORGANISM SCR N W COLONY ESTIMJ		No	No	Not Cov	No		No	No
87084	CUL PRSMPTV PTHGNC ORGANISMS SCR DNS CHART		No	No	Not Cov	No		No	No
87086	CULTURE BACTERIAL QUANTTATIVE COLONY COUNT URINE		No	No	Not Cov	No		No	No
87088	CULTURE BCT ISOL AND PRSMPTV ID ISOLATE EA URINE		No	No	Not Cov	No		No	No
87101	CUL FNGL MOLD YEAST PRSMPTV ID SKN HAIR NAIL		No	No	Not Cov	No		No	No
87102	CULTURE FNGL MOLD YEAST PRSMPTV OTH XCPT BLOOD		No	No	Not Cov	No		No	No
87103	CULTURE FNGL MOLD YEAST ISOL PRSMPTV ISOL BLOOD		No	No	Not Cov	No		No	No
87106	CULTURE FUNGI DEFINITIVE ID EACH ORGANISM YEAST		No	No	Not Cov	No		No	No
87107	CULTURE FUNGI DEFINITIVE ID EACH ORGANISM MOLD		No	No	Not Cov	No		No	No
87109	CULTURE MYCOPLASMA ANY SOURCE		No	No	Not Cov	No		No	No
87110	CULTURE CHLAMYDIA ANY SOURCE		No	No	Not Cov	No		No	No
87116	CULTURE TUBERCLE OTH ACID-FAST BACILLI ANY ISOL		No	No	Not Cov	No		No	No
87118	CULTURE MYCOBACTERIAL DEFINITIVE ID EA ISOL		No	No	Not Cov	No		No	No
87140	CULTURE TYPING IMMUNOFLUORESCENT EACH ANTISERUM		No	No	Not Cov	No		No	No
87143	CULTURE TYPING GAS HIGH PRES LIQ CHROMATOGRAPHY		No	No	Not Cov	No		No	No
87147	CULTURE TYPING IMMUNOLOGIC OTH THN IMMUNOFLUORES		No	No	Not Cov	No		No	No

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DOS Effective 10/1/19; Posted 10/30/19

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
87149	CULTURE TYPING NUCLEIC ACID PROBE DIR EA ORGANSM		No	No	Not Cov	No		No	No
87150	CULTYP NUC ACID AMP PRB CULT ISOLATE EA ORGNISM		Not Cov	Not Cov	Not Cov	Not Cov		No	No
87152	CULTURE TYPING IDENTIFJ PULSE FIELD GEL TYPING		No	No	Not Cov	No		No	No
87153	CULTYP NUCLEIC ACID SEQUENCING METH EA ISOLATE		Not Cov	Not Cov	Not Cov	Not Cov		No	No
87158	CULTURE TYPING OTHER METHODS		No	No	Not Cov	No		No	No
87164	DARK FIELD EXAM ANY SOURCE W SPECIMEN COLLECTION		No	No	Not Cov	No		No	No
87166	DARK FIELD EXAM ANY SOURCE W O SPECIMEN COLLECT		No	No	Not Cov	No		No	No
87168	MACROSCOPIC EXAMINATION ARTHROPOD		No	No	Not Cov	No		No	No
87169	MACROSCOPIC EXAMINATION PARASITE		No	No	Not Cov	No		No	No
87172	PINWORM EXAMINATION		No	No	Not Cov	No		No	No
87176	HOMOGENIZATION TISSUE CULTURE		No	No	Not Cov	No		No	No
87177	OVA AND PARASITES DIRECT SMEARS CONCENTRATION AND ID		No	No	Not Cov	No		No	No
87181	SUSCEPTIBLTY STDY ANTIMICRBIAL AGNT AGAR DILUTJ		No	No	Not Cov	No		No	No
87184	SUSCEPTIBILITY STUDY ANTIMICROBIAL DISK METHOD		No	No	Not Cov	No		No	No
87185	SUSCEPTIBILITY STUDY ANTIMICROBIAL ENZYME DETCJ		No	No	Not Cov	No		No	No
87186	SUSCEPTIBLTY STDY ANTIMICRBIAL MICRO AGAR DILUTJ		No	No	Not Cov	No		No	No
87187	SUSCEPTIBLTY STDY ANTMCRB MICRO AGAR DILUTJ EA		No	No	Not Cov	No		No	No
87188	SC STD ANTMCRB AGT MACROBROTH DIL METH EA AGT		No	No	Not Cov	No		No	No
87190	SUSCEPTIBLTY STDY ANTMCRB MYCOBACT PROPORJ MTHD		No	No	Not Cov	No		No	No
87197	SERUM BACTERICIDAL TITER		No	No	Not Cov	No		No	No
87205	SMR PRIM SRC GRAM GIEMSA STAIN BCT FUNGI CELL		No	No	Not Cov	No		No	No
87206	SMR PRIM SRC FLUORESCENT AND AFS BCT FNGI PARASIT		No	No	Not Cov	No		No	No
87207	SMR PRIM SRC SPEC STAIN BODIES PARASITS		No	No	Not Cov	No		No	No
87209	SMR PRIM SRC CPLX SPEC STAIN OVA AND PARASITS		No	No	Not Cov	No		No	No
87210	SMR PRIM SRC WET MOUNT NFCT AGT		No	No	Not Cov	No		No	No
87220	TISS KOH SLIDE SAMPs SKN HR NLS FNGI ECTOPARASIT		No	No	Not Cov	No		No	No
87230	TOXIN ANTITOXIN ASSAY TISSUE CULTURE		No	No	Not Cov	No		No	No
87250	VIRUS INOCULATION EGGS SM ANIMAL OBS AND DSJ		No	No	Not Cov	No		No	No
87252	VIRUS TISS CUL INOCULATION CYTOPATHIC EFFECT		No	No	Not Cov	No		No	No
87253	VIRUS TISSUE CULTURE ADDL STDY ID EACH ISOLATE		No	No	Not Cov	No		No	No
87254	VIRUS CENTRIFUGE ENHNCD ID IMFLUOR STAIN EA		No	No	Not Cov	No		No	No
87255	VIRUS ID NON-IMMUNOLOGIC OTH THN CYTOPATHIC		No	No	Not Cov	No		No	No
87260	IAADI ADENOVIRUS		No	No	Not Cov	No		No	No
87265	IAADI BORDETELLA PRUSSIS PARAPRUSIS		No	No	Not Cov	No		No	No
87267	IAADI ENTEROVIRUS DIRECT FLUORESCENT ANTIBODY		No	No	Not Cov	No		No	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
87269	IAADI GIARDIA		No	No	Not Cov	No	No	No	
87270	IAADI CHLAMYDIA TRACHOMATIS		No	No	Not Cov	No	No	No	
87271	IAADI CYTOMEGALOVIRUS DIR FLUORESCENT ANTIBODY		No	No	Not Cov	No	No	No	
87272	IAADI CRYPTOSPORIDIUM		No	No	Not Cov	No	No	No	
87273	IAADI HERPES SMPLX VIRUS TYPE 2		No	No	Not Cov	No	No	No	
87274	IAADI HERPES SMPLX VIRUS TYPE 1		No	No	Not Cov	No	No	No	
87275	IAADI INFLUENZA B VIRUS		No	No	Not Cov	No	No	No	
87276	IAADI INFFLUENZA A VIRUS		No	No	Not Cov	No	No	No	
87278	IAADI LEGIONELLA PNEUMOPHILA		No	No	Not Cov	No	No	No	
87279	IAADI PARAINFLUENZA VIRUS EACH TYPE		No	No	Not Cov	No	No	No	
87280	IAADI RESPIRATORY SYNCTIAL VIRUS		No	No	Not Cov	No	No	No	
87281	IAADI PNEUMOCUSTIS CARINII		No	No	Not Cov	No	No	No	
87283	IAADI RUBEOLA		No	No	Not Cov	No	No	No	
87285	IAADI TREPONEMA PALLIDUM		No	No	Not Cov	No	No	No	
87290	IAADI VARICELLA ZOSTER VIRUS		No	No	Not Cov	No	No	No	
87299	IAADI NOT OTHERWISE SPECIFIED EACH ORGANISM		No	No	Not Cov	No	No	No	
87300	IAADI POLYV MLT ORGANISMS EA POLYV ANTISERUM		No	No	Not Cov	No	No	No	
87301	IAAD IA ADENOVIRUS ENTERIC TYP 40 41		No	No	Not Cov	No	No	No	
87305	IAAD IA QUAL SEMIQUAN MULTIPLE STEP ASPERGILLUS		No	No	Not Cov	No	No	No	
87320	IAAD IA CHLAMYDIA TRACHOMATIS		No	No	Not Cov	No	No	No	
87324	IAAD IA CLOSTRIDIUM DIFFICILE TOXIN		No	No	Not Cov	No	No	No	
87327	IAAD IA CRYPTOCOCCUS NEOFORMANS		No	No	Not Cov	No	No	No	
87328	IAAD IA CRYPTOSPORIDIUM		No	No	Not Cov	No	No	No	
87329	IAAD IA GIARDIA		No	No	Not Cov	No	No	No	
87332	IAAD IA CYTOMEGALOVIRUS		No	No	Not Cov	No	No	No	
87335	IAAD IA ESCHERICHIA COLI O157		No	No	Not Cov	No	No	No	
87336	IAAD IA ENTAMOEBA HISTOLYTICA DISPAR GRP		No	No	Not Cov	No	No	No	
87337	IAAD IA ENTAMOEBA HISTOLYTICA GRP		No	No	Not Cov	No	No	No	
87338	IAAD IA HPYLORI STOOL		No	No	Not Cov	No	No	No	
87339	IAAD IA HPYLORI		No	No	Not Cov	No	No	No	
87340	IAAD IA HEPATITIS B SURFACE ANTIGEN		No	No	Not Cov	No	No	No	
87341	IAAD IA HEPATITIS B SURFACE AG NEUTRALIZATION		No	No	Not Cov	No	No	No	
87350	IAAD IA HEPATITIS BE ANTIGEN		No	No	Not Cov	No	No	No	
87380	IAAD IA HEPATITIS DELTA ANTIGEN		No	No	Not Cov	No	No	No	
87385	IAAD IA HISTOPLASM CAPSULATUM		No	No	Not Cov	No	No	No	
87389	IAAD IA HIV-1 AG W HIV-1 AND HIV-2 ANTBDY SINGLE		No	No	Not Cov	No	No	No	
87390	IAAD IA HIV-1		No	No	Not Cov	No	No	No	
87391	IAAD IA HIV-2		No	No	Not Cov	No	No	No	
87400	IAAD IA INFLUENZA A B EACH		No	No	Not Cov	No	No	No	
87420	IAAD IA RESPIRATORY SYNCTIAL VIRUS		No	No	Not Cov	No	No	No	
87425	IAAD IA ROTAVIRUS		No	No	Not Cov	No	No	No	
87427	IAAD IA SHIGA-LIKE TOXIN		No	No	Not Cov	No	No	No	
87430	IAAD IA STREPTOCOCCUS GROUP A		No	No	Not Cov	No	No	No	
87449	IAAD IA MULT STEP METHOD NOS EACH ORGANISM		No	No	Not Cov	No	No	No	

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87450	IAAD IA SINGLE STEP METHOD NOS EA ORGANISM		No	No	Not Cov	No		No	No
87451	IAAD IA POLYV MLT ORGANISMS EA POLYV ANTISERUM		No	No	Not Cov	No		No	No
87471	IADNA BARTONELLA AMPLIFIED PROBE TECHNIQUE		No	No	Not Cov	No		No	No
87472	IADNA BARTONELLA HENSELAE AND QUINTANA QUANTJ		No	No	Not Cov	No		No	No
87475	IADNA BORRELIA BURGDORFERI DIRECT PROBE TQ		No	No	Not Cov	No		No	No
87476	IADNA BORRELIA BURGDORFERI AMPLIFIED PROBE TQ		No	No	Not Cov	No		No	No
87480	IADNA CANDIDA SPECIES DIRECT PROBE TQ		No	No	Not Cov	No		No	No
87481	IADNA CANDIDA SPECIES AMPLIFIED PROBE TQ		No	No	Not Cov	No		No	No
87482	IADNA CANDIDA SPECIES QUANTIFICATION		No	No	Not Cov	No		No	No
87483	CNS DNA RNA AMP PROBE MULTIPLE SUBTYPES 12-25		Not Cov	No	Not Cov	No		No	No
87485	IADNA CHLAMYDIA PNEUMONIAE DIRECT PROBE TQ		No	No	Not Cov	No		No	No
87486	IADNA CHLAMYDIA PNEUMONIAE AMPLIFIED PROBE TQ		No	No	Not Cov	No		No	No
87487	IADNA CHLAMYDIA PNEUMONIAE QUANTIFICATION		No	No	Not Cov	No		No	No
87490	IADNA CHLAMYDIA TRACHOMATIS DIRECT PROBE TQ		No	No	Not Cov	No		No	No
87491	IADNA CHLAMYDIA TRACHOMATIS AMPLIFIED PROBE TQ		No	No	Not Cov	No		No	No
87492	IADNA CHLAMYDIA TRACHOMATIS QUANTIFICATION		No	No	Not Cov	No		No	No
87493	INF AGENT DET NUCLEIC ACID CLOSTRIDIUM AMP PROBE		No	No	Not Cov	No		No	No
87495	IADNA CYTOMEGALOVIRUS DIRECT PROBE TQ		No	No	Not Cov	No		No	No
87496	IADNA CYTOMEGALOVIRUS AMPLIFIED PROBE TQ		No	No	Not Cov	No		No	No
87497	IADNA CYTOMEGALOVIRUS QUANTIFICATION		No	No	Not Cov	No		No	No
87498	IADNA ENTEROVIRUS AMPLIF PROBE AND REVRSE TRNSCRIP		No	No	Not Cov	No		No	No
87500	INFECTIOUS AGENT DNA RNA VANCOMYCIN RESISTANCE		No	No	Not Cov	No		No	No
87501	INFECTIOUS AGENT DNA RNA INFLUENZA EA TYPE		No	No	Not Cov	No		No	No
87502	INFECTIOUS AGENT DNA RNA INFLUENZA 1ST 2 TYPES		No	No	Not Cov	No		No	No
87503	NFCT AGENT DNA RNA INFLUENZA OVER 2 TYPES EA ADDL		No	No	Not Cov	No		No	No
87505	NFCT AGENT DNA RNA GASTROINTESTINAL PATHOGEN		No	No	Not Cov	No		No	No
87506	IADNA-DNA RNA GI PTHGN MULTIPLEX PROBE TQ 6-11		No	No	Not Cov	No		No	No
87507	IADNA-DNA RNA GI PTHGN MULTIPLEX PROBE TQ 12-25		No	No	Not Cov	No		No	No
87510	IADNA GARDNERELLA VAGINALIS DIRECT PROBE TQ		No	No	Not Cov	No		No	No
87511	IADNA GARDNERELLA VAGINALIS AMPLIFIED PROBE TQ		No	No	Not Cov	No		No	No
87512	IADNA GARDNERELLA VAGINALIS QUANTIFICATION		No	No	Not Cov	No		No	No
87516	IADNA HEPATITIS B VIRUS AMPLIFIED PROBE TQ		No	No	Not Cov	No		No	No
87517	IADNA HEPATITIS B VIRUS QUANTIFICATION		No	No	Not Cov	No		No	No
87520	IADNA HEPATITIS C DIRECT PROBE TECHNIQUE		No	No	Not Cov	No		No	No
87521	IADNA HEPATITIS C AMPLIFIED PROBE AND REVRSE TRANSCR		No	No	Not Cov	No		No	No

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			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
87522	IADNA HEPATITIS C QUANT AND REVERSE TRANSCRIPTION		No	No	Not Cov	No		No	No
87525	IADNA HEPATITIS G DIRECT PROBE TECHNIQUE		No	No	Not Cov	No		No	No
87526	IADNA HEPATITIS G AMPLIFIED PROBE TECHNIQUE		No	No	Not Cov	No		No	No
87527	IADNA HEPATITIS G QUANTIFICATION		No	No	Not Cov	No		No	No
87528	IADNA HERPES SIMPLX VIRUS DIRECT PROBE TQ		No	No	Not Cov	No		No	No
87529	IADNA HERPES SOMPLX VIRUS AMPLIFIED PROBE TQ		No	No	Not Cov	No		No	No
87530	IADNA HERPES SOMPLX VIRUS QUANTIFICATION		No	No	Not Cov	No		No	No
87531	IADNA HERPES VIRUS-6 DIRECT PROBE TQ		No	No	Not Cov	No		No	No
87532	IADNA HERPES VIRUS-6 AMPLIFIED PROBE TQ		No	No	Not Cov	No		No	No
87533	IADNA HERPES VIRUS-6 QUANTIFICATION		No	No	Not Cov	No		No	No
87534	IADNA HIV-1 DIRECT PROBE TECHNIQUE		No	No	Not Cov	No		No	No
87535	IADNA HIV-1 AMPLIFIED PROBE AND REVERSE TRANSCRIPJ		No	No	Not Cov	No		No	No
87536	IADNA HIV-1 QUANT AND REVERSE TRANSCRIPTION		No	No	Not Cov	No		No	No
87537	IADNA HIV-2 DIRECT PROBE TECHNIQUE		No	No	Not Cov	No		No	No
87538	IADNA HIV-2 AMPLIFIED PROBE AND REVERSE TRANSCRIPJ		No	No	Not Cov	No		No	No
87539	IADNA HIV-2 QUANT AND REVERSE TRANSCRIPTION		No	No	Not Cov	No		No	No
87540	IADNA LEGIONELLA PNEUMOPHILA DIRECT PROBE TQ		No	No	Not Cov	No		No	No
87541	IADNA LEGIONELLA PNEUMOPHILA AMPLIFIED PROBE TQ		No	No	Not Cov	No		No	No
87542	IADNA LEGIONELLA PNEUMOPHILA QUANTIFICATION		No	No	Not Cov	No		No	No
87550	IADNA MYCOBACTERIA SPECIES DIRECT PROBE TQ		No	No	Not Cov	No		No	No
87551	IADNA MYCOBACTERIA SPECIES AMPLIFIED PROBE TQ		No	No	Not Cov	No		No	No
87552	IADNA MYCOBACTERIA SPECIES QUANTIFICATION		No	No	Not Cov	No		No	No
87555	IADNA MYCOBACTERIA TUBERCULOSIS DIR PRB		No	No	Not Cov	No		No	No
87556	IADNA MYCOBACTERIA TUBERCULOSIS AMP PRB		No	No	Not Cov	No		No	No
87557	IADNA MYCOBACTERIA TUBERCULOSIS QUANTIFICATION		No	No	Not Cov	No		No	No
87560	IADNA MYCOBACTERIA AVIUM-INTRA CLRE DIR PRB		No	No	Not Cov	No		No	No
87561	IADNA MYCOBACTERIA AVIUM-INTRA CLRE AMP PRB		No	No	Not Cov	No		No	No
87562	IADNA MYCOBACTERIA AVIUM-INTRACELLULARE QUANT		No	No	Not Cov	No		No	No
87580	IADNA MYCOPLSM PNEUMONIAE DIRECT PROBE TQ		No	No	Not Cov	No		No	No
87581	IADNA MYCOPLSM PNEUMONIAE AMPLIFIED PROBE TQ		No	No	Not Cov	No		No	No
87582	IADNA MYCOPLSM PNEUMONIAE QUANTIFICATION		No	No	Not Cov	No		No	No
87590	IADNA NEISSERIA GONORRHOEAE DIRECT PROBE TQ		No	No	Not Cov	No		No	No
87591	IADNA NEISSERIA GONORRHOEAE AMPLIFIED PROBE TQ		No	No	Not Cov	No		No	No
87592	IADNA NEISSERIA GONORRHOEAE QUANTIFICATION		No	No	Not Cov	No		No	No
87623	IADNA HUMAN PAPILLOMAVIRUS LOW-RISK TYPES		Not Cov	Not Cov	Not Cov	Not Cov		No	No
87624	IADNA HUMAN PAPILLOMAVIRUS HIGH-RISK TYPES		No	No	Not Cov	No		No	No
87625	IADNA HUMAN PAPILLOMAVIRUS TYPES 16 AND 18 ONLY		No	No	Not Cov	No		No	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
87631	IADNA RESPIRATRY PROBE AND REV TRNSCR 3-5 TARGETS		No	No	Not Cov	No		No	No
87632	IADNA RESPIRATRY PROBE AND REV TRNSCR 6-11 TARGETS		No	No	Not Cov	No		No	No
87633	IADNA RESPIRATRY PROBE AND REV TRNSCR 12-25 TARGET		No	No	Not Cov	No		No	No
87634	IADNA DNA RNA RSV AMPLIFIED PROBE TECHNIQUE		No	No	Not Cov	No		No	No
87640	IADNA S AUREUS AMPLIFIED PROBE TQ		No	No	Not Cov	No		No	No
87641	IADNA S AUREUS METHICILLIN RESIST AMP PROBE TQ		No	No	Not Cov	No		No	No
87650	IADNA STREPTOCOCCUS GROUP A DIRECT PROBE TQ		No	No	Not Cov	No		No	No
87651	IADNA STREPTOCOCCUS GROUP A AMPLIFIED PROBE TQ		No	No	Not Cov	No		No	No
87652	IADNA STREPTOCOCCUS GROUP A QUANTIFICATION		No	No	Not Cov	No		No	No
87653	IADNA STREPTOCOCCUS GROUP B AMPLIFIED PROBE TQ		No	No	Not Cov	No		No	No
87660	IADNA TRICHOMONAS VAGINALIS DIRECT PROBE TQ		No	No	Not Cov	No		No	No
87661	IADNA TRICHOMONAS VAGINALIS AMPLIFIED PROBE TECH		No	No	Not Cov	No		No	No
87662	IADNA DNA RNA ZIKA VIRUS AMPLIFIED PROBE TQ		No	No	Not Cov	No		No	No
87797	IADNA NOS DIRECT PROBE TQ EACH ORGANISM		Yes	Yes	Not Cov	Yes		Yes	Yes
87798	IADNA NOS AMPLIFIED PROBE TQ EACH ORGANISM		Yes	Yes	Not Cov	Yes		Yes	Yes
87799	IADNA NOS QUANTIFICATION EACH ORGANISM		Yes	Yes	Not Cov	Yes		Yes	Yes
87800	IADNA MULTIPLE ORGANISMS DIRECT PROBE TQ		No	No	Not Cov	No		No	No
87801	IADNA MULTIPLE ORGANISMS AMPLIFIED PROBE TQ		No	No	Not Cov	No		No	No
87802	IAADIADOO STREPTOCOCCUS GROUP B		No	No	Not Cov	No		No	No
87803	IAADIADOO CLOSTRIDIUM DIFFICILE TOXIN		No	No	Not Cov	No		No	No
87804	IAADIADOO INFLUENZA		No	No	Not Cov	No		No	No
87806	IAADIADOO HIV1 ANTIGEN W HIV1 AND HIV2 ANTIBODIES		Not Cov	Not Cov	Not Cov	Not Cov		No	No
87807	IAADIADOO RESPIRATORY SYNCTIAL VIRUS		No	No	Not Cov	No		No	No
87808	IAADIADOO TRICHOMONAS VAGINALIS		No	No	Not Cov	No		No	No
87809	INFECTIOUS AGENT IMMUNOASSAY OPTICAL ADENOVIRUS		No	No	Not Cov	No		No	No
87810	CHLAMYDIA TRACHOMATIS		No	No	Not Cov	No		No	No
87850	IAADIADOO NEISSERIA GONORRHOEAE		No	No	Not Cov	No		No	No
87880	IAADIADOO STREPTOCOCCUS GROUP A		No	No	Not Cov	No		No	No
87899	IAADIADOO NOT OTHERWISE SPECIFIED		Yes	Yes	Not Cov	Yes		Yes	Yes
87900	NFCT AGT DRUG SUSCEPT PHENOTYPE PREDICTION		No	No	Not Cov	No		No	No
87901	NFCT GEXYP NUCLEIC ACID HIV REV TRNSCR AND PROTEAS		No	No	Not Cov	No		No	No
87902	NFCT AGNT GENOTYP NUCLEIC ACID HEPATITIS C VIRUS		No	No	Not Cov	No		No	No
87903	NFCT PHEXYP RESIST TISS CUL HIV FIRST 1-10 DRUGS		No	No	Not Cov	No		No	No
87904	NFCT PHEXYP RESIST TISS CUL HIV EA ADDL DRUG		No	No	Not Cov	No		No	No
87905	INFECTIOUS AGENT ENZYMATIC ACTV OTH THN VIRUS		Not Cov	Not Cov	Not Cov	Not Cov		No	No
87906	NFCT GEXYP DNA RNA HIV 1 OTHER REGION		No	No	Not Cov	No		No	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
87910	NFCT AGT GENOTYPE NUCLEIC ACID CYTOMEGALOVIRUS		No	No	Not Cov	No		No	No
87912	NFCT AGENT GENOTYPE HEPATITIS B VIRUS		No	No	Not Cov	No		No	No
87999	UNLISTED MICROBIOLOGY		Yes	Yes	Not Cov	Yes		Yes	Yes
88000	NECROPSY GROSS EXAMINATION ONLY W O CNS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
88005	NECROPSY GROSS EXAMINATION W BRAIN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
88007	NECROPSY GROSS EXAMINATION W BRAIN AND SPINAL CORD		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
88012	NECROPSY GROSS EXAMINATION INFANT W BRAIN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
88014	NECROPSY GROSS EXAM STILLBORN NEWBORN W BRAIN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
88016	NECROPSY GROSS EXAM MACERATED STILLBORN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
88020	NECROPSY GROSS AND MICROSCOPIC W O CNS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
88025	NECROPSY GROSS AND MICROSCOPIC W BRAIN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
88027	NECROPSY GROSS AND MCRSCP BRAIN AND SPINAL CORD		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
88028	NECROPSY GROSS AND MICROSCOPIC INFANT W BRAIN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
88029	NECROPSY GROSS AND MCRSCP STILLBORN NEWBORN BRAIN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
88036	NECROPSY LIMITED GROSS AND MCRSCP REGIONAL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
88037	NECROPSY LIMITD GROSS AND MCRSCP SINGLE ORGAN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
88040	NECROPSY FORENSIC EXAMINATION		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
88045	NECROPSY CORONER CALL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
88099	UNLISTED NECROPSY PROCEDURE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
88104	CYTP FLU WASHGS BRUSHINGS XCPT C V SMRS INTERPJ		No	No	Not Cov	No		No	No
88106	CYTP FLU BR WA XCPT C V FILTER METH ONLY INTERPJ		No	No	Not Cov	No		No	No
88108	CYTP CONCENTRATION SMEARS AND INTERPRETATION		No	No	Not Cov	No		No	No
88112	CYTP SLCTV CELL ENHANCEMENT INTERPJ XCPT C V		No	No	Not Cov	No		No	No
88120	CYTP INSITU HYBRID URINE SPEC 3-5 PROBES EA MNL		Not Cov	Not Cov	Not Cov	Not Cov		No	No
88121	CYTP INSITU HYBRID URNE SPEC 3-5 PROBES CPTR EA		Not Cov	Not Cov	Not Cov	Not Cov		No	No
88125	CYTOPATHOLOGY FORENSIC		No	No	Not Cov	No		No	No
88130	SEX CHROMATIN IDENTIFICATION BARR BODIES		No	No	Not Cov	No		No	No
88140	SEX CHROMATIN IDENTJ PERIPHERAL BLOOD SMEAR		No	No	Not Cov	No		No	No
88141	CYTP CERVICAL VAGINAL REQ INTERP PHYSICIAN		No	No	Not Cov	No		No	No
88142	CYTP CERV VAG AUTO THIN LAYER PREP MNL SCREEN		No	No	Not Cov	No		No	No
88143	CYTP C V FLU AUTO THIN MNL SCR AND RESCR PHYS		No	No	Not Cov	No		No	No
88147	CYTP SMRS C V SCR AUTOMATED SYSTEM PHYS SUPV		No	No	Not Cov	No		No	No
88148	CYTP SMRS C V SCR AUTO SYS MNL RESCR PHYS		No	No	Not Cov	No		No	No
88150	CYTP SLIDES C V MNL SCR UNDER PHYS		No	No	Not Cov	No		No	No
88152	CYTP SLIDES C V MNL SCR AND CPTR RESCR PHYS		No	No	Not Cov	No		No	No
88153	CYTP SLIDES C V MNL SCR AND RESCR PHYS		No	No	Not Cov	No		No	No
88155	CYTP SLIDES C V DEFINITIVE HORMONAL EVAL		No	No	Not Cov	No		No	No
88160	CYTP SMRS ANY OTH SRC SCR AND INTERPJ		No	No	Not Cov	No		No	No

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			Outpatient		ASC	Office Setting			
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88161	CYTP SMRS ANY OTH SRC PREPJ SCR AND INTERPJ		No	No	Not Cov	No	No	No	
88162	CYTP SMRS ANY OTH SRC EXTND STD OVER 5 SLIDES		No	No	Not Cov	No	No	No	
88164	CYTP SLIDES CERV VAG MNL SCR PHYSICIAN SUPV		No	No	Not Cov	No	No	No	
88165	CYTP SLIDES C V MNL SCR AND RESCR PHYS SUPV		No	No	Not Cov	No	No	No	
88166	CYTP SLIDES C V MNL SCR AND CPTR RESCR PHYS SUPV		No	No	Not Cov	No	No	No	
88167	CYTP SLIDES C V MNL SCR AND CPTR RESCR CELL S AND I		No	No	Not Cov	No	No	No	
88172	CYTP FINE NDL ASPIRATE IMMT CYTOHIST STD DX 1ST		No	No	Not Cov	No	No	No	
88173	CYTP EVAL FINE NEEDLE ASPIRATE INTERP AND REPORT		No	No	Not Cov	No	No	No	
88174	CYTP C V AUTO THIN LYR PREPJ SCR SYS PHYS		No	No	Not Cov	No	No	No	
88175	CYTP C V AUTO THIN LYR PREPJ SCR MNL RESCR PHYS		No	No	Not Cov	No	No	No	
88177	CYTP FINE NDL ASPIRATE IMMT CYTOHIST STD EA EVAL		Not Cov	Not Cov	Not Cov	Not Cov	No	No	
88182	FLOW CYTOMETRY CELL CYCLE DNA ANALYSIS		No	No	Not Cov	No	No	No	
88184	FLOW CYTOMETRY CELL SURF MARKER TECHL ONLY 1ST		No	No	Not Cov	No	No	No	
88185	FLOW CYTOMETRY CELL SURF MARKER TECHL ONLY EA		No	No	Not Cov	No	No	No	
88187	FLOW CYTOMETRY INTERPJ 2-8 MARKERS		No	No	Not Cov	No	No	No	
88188	FLOW CYTOMETRY INTERPJ 9-15 MARKERS		No	No	Not Cov	No	No	No	
88189	FLOW CYTOMETRY INTERPRETATION 16 OR GRT MARKERS		No	No	Not Cov	No	No	No	
88199	UNLISTED CYTOPATHOLOGY PROCEDURE		Yes	Yes	Not Cov	Yes	Yes	Yes	
88230	TISS CUL NON-NEO DISORDERS LYMPHOCYTE		No	No	Not Cov	No	No	No	
88233	TISS CUL NON-NEO DISORDERS SKN OTH SOLID TISS BX		No	No	Not Cov	No	No	No	
88235	TISS CUL NON-NEO DISORDERS AMNIOTIC CHORNC CELLS		No	No	Not Cov	No	No	No	
88237	TISS CUL NEO DISORDERS BONE MARROW BLOOD CELLS		No	No	Not Cov	No	No	No	
88239	TISS CUL NEO DISORDERS SOLID TUMOR		No	No	Not Cov	No	No	No	
88240	CRYOPRSRV FRZING AND STORAGE CELLS EA CELL LINE		Not Cov	Not Cov	Not Cov	Not Cov	No	No	
88241	THAWING AND EXPANSION FROZEN CELLS EACH ALIQUOT		Not Cov	Not Cov	Not Cov	Not Cov	No	No	
88245	CHRMSM BREAKAGE BASELINE SISTER 20-25 CLL		No	No	Not Cov	No	No	No	
88248	CHRMSM BREAKAGE BASELINE BREAKAGE 50-100 CLL		No	No	Not Cov	No	No	No	
88249	CHRMSM BREAKAGE SYNDS SCORE 100 CLL		No	No	Not Cov	No	No	No	
88261	CHRMSM COUNT 5 CELL 1KARYOTYPE BANDING	No, pregnancy related if covered	Yes	Yes	Not Cov	Yes	Yes	Yes	
88262	CHRMSM COUNT 15-20 CLL 2KARYOTYP BANDING		No	No	Not Cov	No	No	No	
88263	CHRMSM COUNT 45 CELL MOSAICISM 2KARYOTYPE		No	No	Not Cov	No	No	No	
88264	CHRMSM ANALYZE 20-25 CELLS		No	No	Not Cov	No	No	No	
88267	CHRMSM ALYS AMNIOTIC VILLUS 15 CELL 1KARYOTYPE		No	No	Not Cov	No	No	No	
88269	CHRMSM SITU AMNIOTIC CLL 6-12 COLONIES 1KARYOTYP		No	No	Not Cov	No	No	No	
88271	MOLECULAR CYTOGENETICS DNA PROBE EACH	No, pregnancy related if covered	Yes	Yes	Not Cov	Yes	Yes	Yes	
88272	MOLECULAR CYTOGENETICS CHRMOML ISH 3-5 CELLS		No	No	Not Cov	No	No	No	
88273	MOLECULAR CYTOGENETICS CHRMOML ISH 10-30 CLL		No	No	Not Cov	No	No	No	
88274	MOLECULAR CYTOGENETICS INTERPHASE ISH 25-99 CLL		No	No	Not Cov	No	No	No	
88275	MOLEC CYTG INTERPHASE ISH ANALYZE 100-300 CLL		No	No	Not Cov	No	No	No	

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88280	CHRMSM ANALYSIS ADDL KARYOTYP EACH STUDY		No	No	Not Cov	No		No	No
88283	CHRMSM ANALYSIS ADDL SPECIALIZED BANDING		No	No	Not Cov	No		No	No
88285	CHRMSM ANALYSIS ADDL CELLS COUNTED EACH STUDY		No	No	Not Cov	No		No	No
88289	CHRMSM ANALYSIS ADDL HIGH RESOLUTION STUDY		No	No	Not Cov	No		No	No
88291	CYTOGENETICS AND MOLEC CYTOGENETICS INTERP AND REP		Not Cov	No	Not Cov	No		No	No
88299	UNLISTED CYTOGENETIC STUDY		Yes	Yes	Not Cov	Yes		Yes	Yes
88300	LEVEL I SURG PATHOLOGY GROSS EXAMINATION ONLY		No	No	Not Cov	No		No	No
88302	LEVEL II SURG PATHOLOGY GROSS AND MICROSCOPIC EXAM		No	No	Not Cov	No		No	No
88304	LEVEL III SURG PATHOLOGY GROSS AND MICROSCOPIC EXAM		No	No	Not Cov	No		No	No
88305	LEVEL IV SURG PATHOLOGY GROSS AND MICROSCOPIC EXAM		No	No	Not Cov	No		No	No
88307	LEVEL V SURG PATHOLOGY GROSS AND MICROSCOPIC EXAM		No	No	Not Cov	No		No	No
88309	LEVEL VI SURG PATHOLOGY GROSS AND MICROSCOPIC EXAM		No	No	Not Cov	No		No	No
88311	DECALCIFICATION PROCEDURE		No	No	Not Cov	No		No	No
88312	SPECIAL STAIN GROUP 1 MICROORGANISMS I AND R		No	No	Not Cov	No		No	No
88313	SPCL STN 2 I AND R EXCPT MICROORG ENZYME IMCYT		No	No	Not Cov	No		No	No
88314	SPECIAL STAIN I AND R HISTOCHEMICAL W FROZEN TISSU		No	No	Not Cov	No		No	No
88319	SPECIAL STAIN I AND R GROUP III ENZYME CONSITUENTS		No	No	Not Cov	No		No	No
88321	CONSLTJ AND REPRT SLIDES PREPARED ELSEWHERE		No	No	Not Cov	No		No	No
88323	CONSLTJ AND REPRT MATERIAL REQUIRING PREPJ SLIDES		No	No	Not Cov	No		No	No
88325	CONSLTJ COMPRE REVIEW REPRT REFERRED MATRL		No	No	Not Cov	No		No	No
88329	PATHOLOGY CONSULTATION DURING SURGERY		No	No	Not Cov	No		No	No
88331	PATH CONSLTJ SURG 1ST BLK FROZEN SCTJ 1 SPEC		No	No	Not Cov	No		No	No
88332	PATH CONSLTJ SURG EA ADDL BLK FROZEN SECTION		No	No	Not Cov	No		No	No
88333	PATH CONSLTJ SURG CYTOLOGIC EXAM INITIAL SITE		No	No	Not Cov	No		No	No
88334	PATH CONSLTJ SURG CYTOLOGIC EXAM ADDL SITE		No	No	Not Cov	No		No	No
88341	IMHISTOCHEM CYTCHM EA ADDL ANTIBODY SLIDE		No	No	Not Cov	No		No	No
88342	IMHISTOCHEM CYTCHM 1ST ANTIBODY STAIN PROCEDURE		No	No	Not Cov	No		No	No
88344	IMHISTOCHEM CYTCHM EA MULTIPLEX ANTIBODY SLIDE		No	No	Not Cov	No		No	No
88346	IMMUNOFLUORESCENCE PER SPEC 1ST SINGL ANTB STAIN		No	No	Not Cov	No		No	No
88348	ELECTRON MICROSCOPY DIAGNOSTIC		No	No	Not Cov	No		No	No
88350	IMMUNOFLUORESCENCE PER SPEC ADD SINGL ANTB STAIN		No	No	Not Cov	No		No	No
88355	MORPHOMETRIC ANALYSIS SKELETAL MUSCLE		No	No	Not Cov	No		No	No
88356	MORPHOMETRIC ANALYSIS NERVE		No	No	Not Cov	No		No	No

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88358	MORPHOMETRIC ANALYSIS TUMOR		No	No	Not Cov	No		No	No
88360	M PHMTRC ALYS TUMOR IMHCHEM EA ANTIBODY MANUAL		No	No	Not Cov	No		No	No
88361	M PHMTRC ALYS TUMOR IMHCHEM EA ANTBODY CMPTR ASST		No	No	Not Cov	No		No	No
88362	NERVE TEASING PREPARATIONS		No	No	Not Cov	No		No	No
88363	EXAM AND SELECT ARCHIVE TISSUE MOLECULAR ANALYSI		Not Cov	Not Cov	Not Cov	Not Cov		No	No
88364	IN SITU HYBRIDIZATION EA ADDL PROBE STAIN		No	No	Not Cov	No		No	No
88365	IN SITU HYBRIDIZATION 1ST PROBE STAIN		No	No	Not Cov	No		No	No
88366	IN SITU HYBRIDIZATION EA MULTIPLEX PROBE STAIN		No	No	Not Cov	No		No	No
88367	M PHMTRC ALYS ISH CPTR-ASST TECH 1ST PROBE STAIN		No	No	Not Cov	No		No	No
88368	M PHMTRC ALYS IN SITU HYBRIDIZATION EA PROBE MNL		No	No	Not Cov	No		No	No
88369	M PHMTRC ALYS ISH QUANT SEMIQ MNL PER SPEC EACH	No, pregnancy related if covered	Yes	Yes	Not Cov	Yes		Yes	Yes
88371	PROTEIN ANAL TISSUE WESTERN BLOT W INTERP AND REPO		No	No	Not Cov	No		No	No
88372	PROTEIN ALYS WSTRN BLOT I AND R IMMUNOLOGICAL EA		No	No	Not Cov	No		No	No
88373	M PHMTRC ALYS ISH QUANT SEMIQ CPTR PER SPEC EACH	No, pregnancy related if covered	Yes	Yes	Not Cov	Yes		Yes	Yes
88374	M PHMTRC ALYS ISH QUANT SEMIQ CPTR EACH MULTIPRB	No, pregnancy related if covered	Yes	Yes	Not Cov	Yes		Yes	Yes
88375	OPTICAL ENDOMICROSCOPIC IMAGE INTERP AND REPORT		Not Cov	Not Cov	Not Cov	Not Cov		No	No
88377	M PHMTRC ALYS ISH QUANT SEMIQ MNL EACH MULTIPRB	No, pregnancy related if covered	Yes	Yes	Not Cov	Yes		Yes	Yes
88380	MICRODISSECTION PREP IDENTIFIED TARGET LASER		No	No	Not Cov	No		No	No
88381	MICRODISSECTION PREP IDENTIFIED TARGET MANUAL		No	No	Not Cov	No		No	No
88387	MACRO EXAM DISSECT AND PREP TISS NONMICRO STD EA		No	No	Not Cov	No		No	No
88388	MACR EXM DISS AND PRP NONMICR IMPRNT CONSLT FRZ SE		No	No	Not Cov	No		No	No
88399	UNLISTED SURGICAL PATHOLOGY PROCEDURE		Yes	Yes	Not Cov	Yes		Yes	Yes
88720	BILIRUBIN TOTAL TRANSCUTANEOUS		No	No	Not Cov	No		No	No
88738	HGB QUANTITATIVE TRANSCUTANEOUS		No	No	Not Cov	No		No	No
88740	HEMOGLOBIN QUAN TC PER DAY CARBOXYHEMOGLOBIN		No	No	Not Cov	No		No	No
88741	HEMOGLOBIN QUANTITATIVE TC PER DAY METHEMOGLOBIN		No	No	Not Cov	No		No	No
88749	UNLISTED IN VIVO LABORTORY SERVICE		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
89049	CAFFEINE HALOTHANE CONTRACTURE TEST		No	No	Not Cov	No		No	No
89050	CELL COUNT MISCELLANEOUS BODY FLUIDS		No	No	Not Cov	No		No	No
89051	CELL COUNT MISC BODY FLUIDS W DIFFERENTIAL COUNT		No	No	Not Cov	No		No	No

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89055	LEUKOCYTE ASSMT FECAL QUAL SEMIQUANTITATIVE		No	No	Not Cov	No		No	No
89060	CRYSTAL ID LIGHT MICROSCOPY ALYS TISS ANY FLUID		No	No	Not Cov	No		No	No
89125	FAT STAIN FECES URINE RESPIR SECRETIONS		No	No	Not Cov	No		No	No
89160	MEAT FIBERS FECES		No	No	Not Cov	No		No	No
89190	NASAL SMEAR EOSINOPHILS		No	No	Not Cov	No		No	No
89220	SPUTUM OBTAINING SPEC AEROSOL INDUCED TX SPX		No	No	Not Cov	No		No	No
89230	SWEAT COLLECTION IONTOPHORESIS		No	No	Not Cov	No		No	No
89240	UNLIS MISC PATH		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
89250	CUL OOCYTE EMBRYO UNDER 4 DAYS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
89251	CUL OOCYTE EMBRYO UNDER 4 D CO-CULT OCYTE EMBRY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
89253	ASSTD EMBRYO HATCHING MICROTQS ANY METH		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
89254	OOCYTE ID FROM FOLLICULAR FLU		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
89255	PREPJ EMBRYO TR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
89257	SPRM ID FROM ASPIR OTH THN SEMINAL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
89258	CRYOPRSRV EMBRYO		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
89259	CRYOPRSRV SPRM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
89260	SPRM ISOL SMPL PREP INSEMINATION DX SEMEN ALYS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
89261	SPRM ISOL CPLX PREP INSEMINATION DX SEMEN ALYS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
89264	SPRM ID FROM TSTIS TISS FRSH CRYOPRSRVD		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
89268	INSEMINATION OOCYTES		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
89272	EXTND CUL OOCYTE EMBRYO 4-7 DAYS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
89280	ASSTD FERTILIZATION MICROTQ UNDER EQUAL 10 OOCYTES		Not Cov	Not Cov	Not Cov	Not Cov		No	Not Cov
89281	ASSTD FERTILIZATION MICROTQ OVER 10 OOCYTES		Not Cov	Not Cov	Not Cov	Not Cov		No	Not Cov
89290	BX OOCYTE MICROTQ UNDER EQ 5 EMBRY		Not Cov	Not Cov	Not Cov	Not Cov		No	Not Cov
89291	BX OOCYTE MICROTQ OVER 5 EMBRY		Not Cov	Not Cov	Not Cov	Not Cov		No	Not Cov
89300	SEMEN ALYS PRESENCE AND MOTILITY SPRM HUHNER		Not Cov	Not Cov	Not Cov	Not Cov		No	Not Cov
89310	SEMEN ALYS MOTILITY AND CNT X W HUHNER TST		Not Cov	Not Cov	Not Cov	Not Cov		No	Not Cov
89320	SEMEN ANALYSIS VOLUME COUNT MOTILITY DIFFERENT		Not Cov	Not Cov	Not Cov	Not Cov		No	Not Cov
89321	SEMEN ANALYSIS SPERM PRESENCE AND MOTILITY SPRM		Not Cov	No	Not Cov	No		No	Not Cov
89322	SEMEN ANALYSIS STRICT MORPHOLOGIC CRITERIA		Not Cov	Not Cov	Not Cov	Not Cov		No	Not Cov
89325	SPERM ANTIBODIES		Not Cov	Not Cov	Not Cov	Not Cov		No	Not Cov
89329	SPERM EVALUATION HAMSTER PENETRATION TEST		Not Cov	Not Cov	Not Cov	Not Cov		No	Not Cov
89330	SPERM EVALUATION CERVICAL MUCOUS PENETRATION		Not Cov	Not Cov	Not Cov	Not Cov		No	Not Cov
89331	SPERM EVALUATION RETROGRADE EJACULATION URINE		Not Cov	Not Cov	Not Cov	Not Cov		No	Not Cov
89335	CRYOPRSRV REPRODUCTIVE TISSUE TESTICULAR		Not Cov	Not Cov	Not Cov	Not Cov		No	Not Cov
89337	CRYOPRESERVATION MATURE OOCYTE(S)		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
89342	STORAGE PER YEAR EMBRYO		Not Cov	Not Cov	Not Cov	Not Cov		No	Not Cov
89343	STORAGE PER YEAR SPERM SEMEN		Not Cov	Not Cov	Not Cov	Not Cov		No	Not Cov
89344	STORAGE PER YR REPRDTVE TISS TSTICULAR OVARIAN		Not Cov	Not Cov	Not Cov	Not Cov		No	Not Cov
89346	STORAGE PER YEAR OOCYTE		Not Cov	Not Cov	Not Cov	Not Cov		No	Not Cov
89352	THAWING CRYOPRESERVED EMBRYO		Not Cov	Not Cov	Not Cov	Not Cov		No	Not Cov

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
89353	THAWING CRYOPRESERVED SPERM SEMEN EACH ALIQUOT		Not Cov	Not Cov	Not Cov	Not Cov		No	Not Cov
89354	THAWING CRYOPRESERVED TESTICULAR OVARIAN		Not Cov	Not Cov	Not Cov	Not Cov		No	Not Cov
89356	THAWING CRYOPRESERVED OOCYTES EACH ALIQUOT		Not Cov	Not Cov	Not Cov	Not Cov		No	Not Cov
89398	UNLISTED REPRODUCTIVE MEDICINE LAB PROCEDURE		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Not Cov
90281	IMMUNE GLOBULIN IG HUMAN IM USE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Yes
90283	IMMUNE GLOBULIN IGIV HUMAN IV USE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Yes
90284	IMMUNE GLOBULIN HUMAN SUBQ INFUSION 100 MG EA		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
90287	BOTULINUM ANTITOXIN EQUINE ANY ROUTE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
90288	BOTULISM IMMUNE GLOBULIN HUMAN INTRAVENOUS USE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
90291	CYTOMEGALOVIRUS IMMUNE GLOBULIN HUMAN IV		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
90296	DIPHThERIA ANTITOXIN EQUINE ANY ROUTE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
90371	HEPATITIS B IMMUNE GLOBULIN HBIG HUMAN IM		No	No	Not Cov	No		No	No
90375	RABIES IMMUNE GLOBULIN RIG HUMAN IM SUBQ		No	No	Not Cov	No		No	No
90376	RABIES IG HEAT-TREATED HUMAN IM SUBQ		No	No	Not Cov	No		No	No
90378	RESPIRATORY SYNCYTIAL VIRUS IG IM 50 MG E		Yes	Yes	Not Cov	Yes		Yes	Yes
90384	RHO(D) IMMUNE GLOBULIN HUMAN FULL-DOSE IM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
90385	RHO(D) IMMUNE GLOBULIN HUMAN MINI-DOSE IM		Not Cov	Not Cov	Not Cov	Not Cov		No	No
90386	RHO(D) IMMUNE GLOBULIN HUMAN IV		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
90389	TETANUS IMMUNE GLOBULIN TIG HUMAN IM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
90393	VACCINIA IMMUNE GLOBULIN HUMAN IM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
90396	VARICELLA-ZOSTER IMMUNE GLOBULIN HUMAN IM		No	Not Cov	Not Cov	Not Cov		Not Cov	No
90399	UNLISTED IMMUNE GLOBULIN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Yes
90460	IM ADM THRU 18YR ANY RTE 1ST ONLY COMPT VAC TOX		No	No	Not Cov	No		No	No
90461	IM ADM THRU 18YR ANY RTE ADDL VAC TOX COMPT		No	No	Not Cov	No		No	No
90471	IM ADM PRQ ID SUBQ IM NJXS 1 VACCINE		No	No	Not Cov	No		No	No
90472	IM ADM PRQ ID SUBQ IM NJXS EA VACCINE		No	No	Not Cov	No		No	No
90473	IM ADM INTRANSL ORAL 1 VACCINE		Not Cov	No	Not Cov	No		Not Cov	No
90474	IM ADM INTRANSL ORAL EA VACCINE		Not Cov	No	Not Cov	No		Not Cov	No
90476	ADENOVIRUS VACCINE TYPE 4 LIVE ORAL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
90477	ADENOVIRUS VACCINE TYPE 7 LIVE FOR ORAL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
90581	ANTHRAX VACCINE SUBCUTANEOUS IM USE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
90585	BACILLUS CALMETTE-GUERIN VACC FOR TB LIVE PERQ		No	No	Not Cov	No		Not Cov	No
90586	BACILLUS CALMETTE-GUERIN VACCINE INTRAVESICAL		Not Cov	No	Not Cov	No		Not Cov	No
90587	DENGUE VACC QUAD LIVE 3 DOSE SCHEDULE SUBQ USE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
90619	MENACWY-TT CONJ VACC SEROGROUPS ACWY FOR IM USE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
90620	MENB-4C RECOMBNT PROT AND OUTER MEMB VESIC VACC IM	Free from DOH ages 0-18	No	No	Not Cov	No		Not Cov	No
90621	MENB-FHBP RECOMBNT LIPOPROTEIN VACC 2 3 DOSE IM	Free from DOH ages 0-18	No	No	Not Cov	No		Not Cov	No
90625	CHOLERA VACCINE ADULT 1 DOSE LIVE FOR ORAL USE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
90630	INFLUENZA VACC IIV4 SPLIT VIRUS PRSRV FREE ID		Not Cov	No	Not Cov	No		No	No

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			Outpatient		ASC	Office Setting			
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90632	HEPA VACCINE ADULT DOSE FOR INTRAMUSCULAR USE		No	No	Not Cov	No		Not Cov	No
90633	HEPA VACCINE 2 DOSE SCHEDULE PED ADOLESC IM USE	Free from DOH for ages 0-18	Not Cov	No	Not Cov	No		Not Cov	No
90634	HEPA VACCINE 3 DOSE SCHEDULE PED ADOLESC IM USE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
90636	HEPATITIS A AND B VACCINE HEPA-HEPB ADULT IM		No	No	Not Cov	No		Not Cov	No
90644	HIB-MENCY VACC 4 DOSE SCHED 6 WKS-18 MONTHS IM	Free from DOH ages 0-18	No	No	Not Cov	No		Not Cov	No
90647	HIB PRP-OMP VACCINE 3 DOSE SCHEDULE IM USE	Free from DOH ages 0-18	No	No	Not Cov	No		Not Cov	No
90648	HIB PRP-T VACCINE 4 DOSE SCHEDULE IM USE	Free from DOH ages 0-18	No	No	Not Cov	No		Not Cov	No
90649	4VHPV VACCINE 3 DOSE SCHEDULE FOR IM USE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
90650	2VHPV VACCINE 3 DOSE SCHEDULE FOR IM USE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
90651	9VHPV VACC 2 3 DOSE SCHED IM USE	Free from DOH ages 0-18	No	No	Not Cov	No		Not Cov	No
90653	IIV ADJUVANTED VACCINE FOR INTRAMUSCULAR USE		Not Cov	Not Cov	Not Cov	Not Cov		No	No
90654	INFLUENZA VACC IIV3 SPLIT VIRUS PRSRV FREE ID		Not Cov	Not Cov	Not Cov	Not Cov		No	No
90655	IIV3 VACC PRESRV FREE 0.25 ML DOSAGE IM USE	Free from DOH ages 0-18	Not Cov	No	Not Cov	No		No	No
90656	IIV3 VACC PRESERVATIVE FREE 0.5 ML DOSAGE IM USE	Free from DOH ages 0-18	Not Cov	No	Not Cov	No		No	No
90657	IIV3 VACCINE SPLIT VIRUS 0.25 ML DOSAGE IM USE		No	No	Not Cov	No		No	No
90658	IIV3 VACCINE SPLIT VIRUS 0.5 ML DOSAGE IM USE		No	No	Not Cov	No		Not Cov	No
90660	LAIV3 VACCINE LIVE FOR INTRANASAL USE		No	Not Cov	Not Cov	Not Cov		No	No
90661	CCIIV3 VACCINE PRESERVATIVE FREE 0.5 ML IM USE		Not Cov	No	Not Cov	No		No	No
90662	IIV VACCINE PRESERV FREE INCREASED AG CONTENT IM	Covered age 65+	No	No	Not Cov	No		No	No
90664	LAIV VACCINE PANDEMIC FORMULA FOR INTRANASAL USE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
90666	INFLUENZA VACCINE PANDEMIC SPLT PRSRV FREE IM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
90667	IIV VACCINE PANDEMIC ADJUVANT FOR IM USE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
90668	IIV VACCINE PANDEMIC FOR INTRAMUSCULAR USE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
90670	PCV13 VACCINE FOR INTRAMUSCULAR USE	Free from DOH ages 2-71 mos	No	No	Not Cov	No		No	No
90672	LAIV4 VACCINE FOR INTRANASAL USE		No	No	Not Cov	No		No	No
90673	RIV3 VACCINE PRESERVATIVE FREE FOR IM USE	Covered ages 18 - 49	No	No	Not Cov	No		No	No
90674	CCIIV4 VACCINE PRESERVATIVE FREE 0.5 ML IM USE		No	No	Not Cov	No		No	No
90675	RABIES VACCINE INTRAMUSCULAR		No	No	Not Cov	No		No	No
90676	RABIES VACCINE INTRADERMAL		No	No	Not Cov	No		Not Cov	No
90680	RV5 VACCINE 3 DOSE SCHEDULE LIVE FOR ORAL USE	Covered for infants if free from DOH	Not Cov	No	Not Cov	No		Not Cov	No
90681	RV1 VACCINE 2 DOSE SCHEDULE LIVE FOR ORAL USE	Free from DOH ages 0-18	Not Cov	No	Not Cov	No		Not Cov	No
90682	RIV4 VACC RECOMBINANT DNA PRSRV ANTIBIO FREE IM		No	No	Not Cov	No		No	No
90685	IIV4 VACC PRSRV FREE 0.25 ML DOS FOR IM USE	Free from DOH ages 0-35 mos	No	No	Not Cov	No		No	No
90686	IIV4 VACC PRESRV FREE 0.5 ML DOS FOR IM USE	Free from DOH ages 3-18	No	No	Not Cov	No		No	No
90687	IIV4 VACC SPLIT VIRUS 0.25 ML DOS FOR IM USE	Free from DOH ages 0-18	No	No	Not Cov	No		No	No
90688	IIV4 VACC SPLIT VIRUS 0.5 ML DOS FOR IM USE	Free from DOH ages 3-18	No	No	Not Cov	No		No	No
90689	IIV4 VACC INACTIVATED PRSRV FR 0.25ML DOS IM USE		Not Cov	Not Cov	Not Cov	Not Cov		No	No
90690	TYPHOID VACCINE LIVE ORAL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
90691	TYPHOID VACCINE VI CAPSULAR POLYSACCHARIDE IM		No	No	Not Cov	No		Not Cov	No
90696	DTAP-IPV VACCINE CHILD 4-6 YRS FOR IM USE	Free from DOH ages 0-18	Not Cov	No	Not Cov	No		Not Cov	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
90697	DTAP-IPV-HIB-HEPB VACCINE INTRAMUSCULAR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
90698	DTAP-IPV HIB VACCINE FOR INTRAMUSCULAR USE	Covered only if free from DOH for age 0-18	Not Cov	No	Not Cov	No		Not Cov	No
90700	DIPHTH TETANUS TOX ACELL PERTUSSIS VACC UNDER 7 YR IM		Not Cov	No	Not Cov	No		Not Cov	No
90702	DT VACCINE YOUNGER THAN 7 YRS FOR IM USE	Free from DOH ages 0-18	Not Cov	No	Not Cov	No		Not Cov	No
90707	MEASLES MUMPS RUBELLA VIRUS VACCINE LIVE SUBQ	Free from DOH ages 0-18	No	No	Not Cov	No		Not Cov	No
90710	MEASLES MUMPS RUBELLA VARICELLA VACC LIVE SUBQ	Free from DOH ages 0-18; non-cov'd adults	Not Cov	No	Not Cov	No		Not Cov	No
90713	POLIOVIRUS VACCINE INACTIVATED SUBQ IM	Free from DOH ages 0-18	No	No	Not Cov	No		Not Cov	No
90714	TD VACCINE PRSRV FREE 7 YRS OR OLDER FOR IM USE	Free from DOH ages 0-18	No	No	Not Cov	No		No	No
90715	TDAP VACCINE 7 YRS OR GRT IM	Free from DOH ages 0-18	No	No	Not Cov	No		No	No
90716	VAR VACCINE LIVE FOR SUBCUTANEOUS USE	Free from DOH ages 0-18	Not Cov	No	Not Cov	No		Not Cov	No
90717	YELLOW FEVER VACCINE LIVE SUBQ		No	No	Not Cov	No		Not Cov	No
90723	DTAP-HEPB-IPV VACCINE INTRAMUSCULAR	Free from DOH ages 0-18; non-cov'd adults	Not Cov	No	Not Cov	No		Not Cov	No
90732	PPSV23 VACCINE 2 YRS OR OLDER FOR SUBQ IM USE	Free from DOH ages 0-18	No	No	Not Cov	No		No	No
90733	MPSV4 VACCINE GROUPS ACYW-135 SUBQ USE		No	No	Not Cov	No		Not Cov	No
90734	MCV4 MENACWY CONJ VACC GRPS ACYW-135 IM USE	Free from DOH for ages 0-18	No	No	Not Cov	No		Not Cov	No
90736	ZOSTER VACCINE HZV LIVE FOR SUBCUTANEOUS USE	Covered for ages 60+	No	No	Not Cov	No		Not Cov	No
90738	JAPANESE ENCEPHALITIS VACCINE INACTIVATED IM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
90739	HEPB VACCINE ADULT 2 DOSE SCHEDULE FOR IM USE		No	No	Not Cov	No		Not Cov	No
90740	HEPB VACCINE DIALYSIS IMMUNSUP PAT 3 DOSE IM		No	No	Not Cov	No		No	No
90743	HEPB VACCINE ADOLESCENT 2 DOSE SCHEDULE IM	Free from DOH ages 0-18	Not Cov	No	Not Cov	No		No	No
90744	HEPB VACCINE PED ADOLESC 3 DOSE SCHEDULE IM	Free from DOH ages 0-18	Not Cov	No	Not Cov	No		No	No
90746	HEPB VACCINE ADULT 3 DOSE SCHEDULE FOR IM USE		No	No	Not Cov	No		No	No
90747	HEPB VACCINE DIALYSIS IMMUNSUP PAT 4 DOSE IM	Free from DOH ages 0-18	Not Cov	No	Not Cov	No		No	No
90748	HIB-HEPB VACCINE FOR INTRAMUSCULAR USE	Free from DOH ages 0-18	Not Cov	No	Not Cov	No		Not Cov	No
90749	UNLISTED VACCINE TOXOID		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Yes
90750	HZV ZOSTER VACC RECOMBINANT ADJUVANTED IM USE		No	Not Cov	Not Cov	No		Not Cov	No
90756	CCIIV4 VACCINE ANTIBIOTIC FREE 0.5 ML DOS IM USE		No	No	Not Cov	No		No	No
90785	PSYCHOTHERAPY COMPLEX INTERACTIVE		Not Cov	No	Not Cov	No	No	No	No
90791	PSYCHIATRIC DIAGNOSTIC EVALUATION		Not Cov	No	Not Cov	No	No	No	No
90792	PSYCHIATRIC DIAGNOSTIC EVAL W MEDICAL SERVICES		Not Cov	No	Not Cov	No	No	No	No
90832	PSYCHOTHERAPY W PATIENT 30 MINUTES		Not Cov	No	Not Cov	No	No	No	No
90833	PSYCHOTHERAPY W PATIENT W E AND M SRVCS 30 MIN		Not Cov	No	Not Cov	No	No	No	No
90834	PSYCHOTHERAPY W PATIENT 45 MINUTES		Not Cov	No	Not Cov	No	No	No	No
90836	PSYCHOTHERAPY W PATIENT W E AND M SRVCS 45 MIN		Not Cov	No	Not Cov	No	No	No	No
90837	PSYCHOTHERAPY W PATIENT 60 MINUTES		Not Cov	No	Not Cov	No	No	No	No
90838	PSYCHOTHERAPY W PATIENT W E AND M SRVCS 60 MIN		Not Cov	No	Not Cov	No	No	No	No
90839	PSYCHOTHERAPY FOR CRISIS INITIAL 60 MINUTES		Not Cov	Not Cov	Not Cov	Not Cov		No	No
90840	PSYCHOTHERAPY FOR CRISIS EACH ADDL 30 MINUTES		Not Cov	Not Cov	Not Cov	Not Cov		No	No
90845	PSYCHOANALYSIS		Not Cov	No	Not Cov	No	No	No	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
90846	FAMILY PSYCHOTHERAPY W O PATIENT PRESENT 50 MINS		No	No	Not Cov	No	No	No	No
90847	FAMILY PSYCHOTHERAPY W PATIENT PRESENT 50 MINS		Not Cov	No	Not Cov	No	No	No	No
90849	MULTIPLE FAMILY GROUP PSYCHOTHERAPY		No	No	Not Cov	No	No	No	No
90853	GROUP PSYCHOTHERAPY		Not Cov	No	Not Cov	No	No	No	No
90863	PHARMACOLOGIC MANAGEMENT W PSYCHOTHERAPY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
90865	NARCOSYNTHESIS PSYC DX AND THER PURPOSES		No	No	Not Cov	No	No	No	No
90867	REPET TMS TX INITIAL W MAP MOTR THRESHLD DEL AND M	1 per calendar year	Not Cov	Yes	Not Cov	Yes	Yes	Yes	Yes
90868	THERAP REPETITIVE TMS TX SUBSEQ DELIVERY AND MNG	36 per calendar year	Not Cov	Yes	Not Cov	Yes	Yes	Yes	Yes
90869	REPET TMS TX SUBSEQ MOTR THRESHLD W DELIV AND MN	1 per calendar year	Not Cov	Yes	Not Cov	Yes	Yes	Yes	Yes
90870	ELECTROCONVULSIVE THERAPY		Yes	Yes	Not Cov	Yes	Yes	Yes	Yes
90875	INDIV PSYCHOPHYS BIOFEED TRAIN W PSYTX 30 MIN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
90876	INDIV PSYCHOPHYS BIOFEED TRAIN W PSYTX 45 MIN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
90880	HYPNOTHERAPY		Not Cov	Not Cov	Not Cov	Not Cov		No	No
90882	ENVIRONMENTAL IVNTJ MGMT PURPOSES PSYC PT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
90885	PSYCHIATRIC EVAL HOSPITAL RECORDS DX PURPOSES		Not Cov	No	Not Cov	No		Not Cov	No
90887	INTERPJ EXPLNAJ RESULTS PSYCHIATRIC EXAM FAMILY		Not Cov	No	Not Cov	No		Not Cov	No
90889	PREP REPORT PT PSYCH STATUS AGENCY PAYER		Not Cov	No	Not Cov	No	No	Not Cov	No
90899	UNLISTED PSYCHIATRIC SERVICE PROCEDURE		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
90901	BIOFEEDBACK TRAINING ANY MODALITY		Not Cov	Not Cov	Not Cov	Not Cov		No	No
90911	BIOFDBK TRNG PERINL MUSC ANORECT URO SPHX W EMG		No	No	Not Cov	No		No	No
90935	HEMODIALYSIS PROCEDURE W PHYS QHP EVALUATION	One time notification only	No	No	Not Cov	No		No	No
90937	HEMODIALYSIS PX REPEAT EVAL W WO REVJ DIALYS RX	One time notification only	Not Cov	No	Not Cov	No		No	No
90940	HEMODIALYSIS ACCESS FLOW STUDY		No	No	Not Cov	No		No	No
90945	DIALYSIS OTHER THAN HEMODIALYSIS 1 PHYS QHP EVAL	One time notification only	No	No	Not Cov	No		No	No
90947	DIALYSIS OTH THN HEMODIALY REPEAT PHYS QHP EVALS	One time notification only	Not Cov	No	Not Cov	No		No	No
90951	ESRD RELATED SVC MONTHLY AND UNDER 2 YR OLD 4 OR GRT V	One time notification only	Not Cov	No	Not Cov	No		No	No
90952	ESRD RELATED SVC MONTHLY UNDER 2 YR OLD 2 3 VISITS	One time notification only	Not Cov	No	Not Cov	No		No	No
90953	ESRD RELATED SVC MONTHLY UNDER 2 YR OLD 1 VISIT	One time notification only	Not Cov	No	Not Cov	No		No	No
90954	ESRD RELATED SVC MONTHLY 2-11 YR OLD 4 OR GRT VISITS	One time notification only	Not Cov	No	Not Cov	No		No	No
90955	ESRD RELATED SVC MONTHLY 2-11 YR OLD 2 3 VISITS	One time notification only	Not Cov	No	Not Cov	No		No	No
90956	ESRD RELATED SVC MONTHLY 2-11 YR OLD 1 VISIT	One time notification only	Not Cov	No	Not Cov	No		No	No
90957	ESRD RELATED SVC MONTHLY 12-19 YR OLD 4 OR GRT VISITS	One time notification only	Not Cov	No	Not Cov	No		No	No
90958	ESRD RELATED SVC MONTHLY 12-19 YR OLD 2 3 VISITS	One time notification only	Not Cov	No	Not Cov	No		No	No

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			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
90959	ESRD RELATED SVC MONTHLY 12-19 YR OLD 1 VISIT	One time notification only	Not Cov	No	Not Cov	No		No	No
90960	ESRD RELATED SVC MONTHLY 20 AND OR GRT YR OLD 4 OR GRT	One time notification only	Not Cov	No	Not Cov	No		No	No
90961	ESRD RELATED SVC MONTHLY 20 OR GRT YR OLD 2 3 VISITS	One time notification only	Not Cov	No	Not Cov	No		No	No
90962	ESRD RELATED SVC MONTHLY 20 AND OR GRT YR OLD 1 VISIT	One time notification only	Not Cov	No	Not Cov	No		No	No
90963	ESRD SVC HOME DIALYSIS FULL MONTH UNDER 2YR OLD	One time notification only	Not Cov	No	Not Cov	No		No	No
90964	ESRD SVC HOME DIALYSIS FULL MONTH 2-11 YR OLD	One time notification only	Not Cov	No	Not Cov	No		No	No
90965	ESRD SVC HOME DIALYSIS FULL MONTH 12-19 YR OLD	One time notification only	Not Cov	No	Not Cov	No		No	No
90966	ESRD SVC HOME DIALYSIS FULL MONTH 20 YR OLD	One time notification only	Not Cov	No	Not Cov	No		No	No
90967	ESRD RELATED SVC UNDER FULL MONTH UNDER 2 YR OLD	One time notification only	Not Cov	No	Not Cov	No		No	No
90968	ESRD RELATED SVC UNDER FULL MONTH 2-11 YR OLD	One time notification only	Not Cov	No	Not Cov	No		No	No
90969	ESRD RELATED SVC UNDER FULL MONTH 12-19 YR OLD	One time notification only	Not Cov	No	Not Cov	No		No	No
90970	ESRD RELATED SVC UNDER FULL MONTH 20 OR GRT YR OLD	One time notification only	Not Cov	No	Not Cov	No		No	No
90989	DIALYSIS TRAINING PATIENT COMPLETED COURSE		Not Cov	No	Not Cov	No		No	No
90993	DIALYSIS TRAINING PATIENT PER TRAINING SESSION		Not Cov	No	Not Cov	No		No	No
90997	HEMOPERFUSION	One time notification only	Not Cov	No	Not Cov	No		No	No
90999	UNLISTED DIALYSIS PROCEDURE INPATIENT OUTPATIENT		Not Cov	No	Not Cov	No		No	Yes
91010	ESOPHAGEAL MOTILITY STUDY W INTERP AND RPT		No	No	Not Cov	No		No	No
91013	ESOPHAGEAL MOTILITY STD W I AND R STIM PERFUSION		No	No	Not Cov	No		No	No
91020	GASTRIC MOTILITY MANOMETRIC STUDIES		No	No	Not Cov	No		No	No
91022	DUODENAL MOTILITY MANOMETRIC STUDY		No	No	Not Cov	No		No	No
91030	ESOPHAGUS ACID PERFUSION TEST ESOPHAGITIS		No	No	Not Cov	No		No	No
91034	GASTROESOPHAG REFLX TEST W CATH PH ELTRD PLCMT		No	No	Not Cov	No		No	No
91035	GASTROESOPHAG REFLX TEST W TELEMTRY PH ELTRD		No	No	Not Cov	No		No	No
91037	GASTROESOPHAG REFLX TEST W INTRLUML IMPED ELTRD		No	No	Not Cov	No		No	No
91038	ESOPHGL FUNCJ G-ESOP RFLX IMPD ELTRD PROLNG		No	No	Not Cov	No		No	No
91040	ESOPHGL BALO DISTENSION DX STD W PROVOCATION		No	No	Not Cov	No		No	No
91065	BREATH HYDROGEN METHANE TEST		No	No	Not Cov	No		No	No
91110	GI IMAG INTRALUMINAL ESOPHAGUS-ILEUM W I AND R		No	No	Not Cov	No		No	No
91111	GASTROINTESTINAL TRACT IMAGING ESOPHAGUS W I AND R		No	No	Not Cov	No		No	No
91112	GI TRANSIT AND PRES MEAS WIRELESS CAPSULE W INTERP		Not Cov	Not Cov	Not Cov	Not Cov		No	No
91117	COLON MOTILITY STDY MIN 6 HR CONT RECORD W I AND R		No	No	Not Cov	No		No	No
91120	RECTAL SESATION TONE AND COMPLIANCE TEST		No	No	Not Cov	No		No	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
91122	ANORECTAL MANOMETRY		No	No	Not Cov	No		No	No
91132	ELECTROGASTROGRAPHY DX TRANSCUTANEOUS		No	No	Not Cov	No		No	No
91133	ELECTROGASTROGRAPHY DX TRANSCUT W PROVOCTVE TSTG		No	No	Not Cov	No		No	No
91200	LIVER ELASTOGRAPHY W O IMAG W I AND R		No	No	Not Cov	No		No	No
91299	UNLISTED DIAGNOSTIC GASTROENTEROLOGY PROCEDURE		Yes	Yes	Not Cov	Yes		Yes	Yes
92002	OPHTH MEDICAL XM AND EVAL INTERMEDIATE NEW PT	Routine submit to VSP	Not Cov	No	Not Cov	No		No	No
92004	OPHTH MEDICAL XM AND EVAL COMPRE NEW PT 1 OR GRT VST	Routine submit to VSP	Not Cov	No	Not Cov	No		No	No
92012	OPHTH MEDICAL XM AND EVAL INTERMEDIATE ESTAB PT	Routine submit to VSP	Not Cov	No	Not Cov	No		No	No
92014	OPHTH MEDICAL XM AND EVAL COMPRHNSV ESTAB PT 1 OR GRT	Routine submit to VSP	Not Cov	No	Not Cov	No		No	No
92015	DETERMINATION REFRACTIVE STATE	Routine submit to VSP	Not Cov	No	Not Cov	No		Not Cov	No
92018	OPHTH XM AND EVAL ANES W WO MANJ GLOBE COMPL		No	No	Not Cov	No		No	No
92019	OPHTH XM AND EVAL ANES W WO MANJ GLOBE LMTD		No	No	Not Cov	No		No	No
92020	GONIOSCOPY SEPARATE PROCEDURE		No	No	Not Cov	No		No	No
92025	COMPUTERIZED CORNEAL TOPOGRAPHY UNI BI		No	No	Not Cov	No		No	No
92060	SENSORMOTOR XM W MLT MEAS OCULAR DEVIJ W I AND R SPX		No	No	Not Cov	No		No	No
92065	ORTHOPTIC AND PLEOPTIC TRAINING W MEDICAL DIRECTJ		No	No	Not Cov	No		No	No
92071	FIT CONTACT LENS TX OCULAR SURFACE DISEASE		Not Cov	No	Not Cov	No		No	No
92072	FITTING CONTACT LENS FOR MNGT OF KERATOCONUS		Not Cov	No	Not Cov	No		No	No
92081	VISUAL FIELD XM UNI BI W INTERPRETJ LIMITED EXAM		No	No	Not Cov	No		No	No
92082	VISUAL FIELD XM UNI BI W INTERP INTERMED EXAM		No	No	Not Cov	No		No	No
92083	VISUAL FIELD XM UNI BI W INTERP EXTENDED EXAM		No	No	Not Cov	No		No	No
92100	SERIAL TONOMETRY SPX W MLT MEAS INTRAOCULAR PRES		No	No	Not Cov	No		No	No
92132	CMPTN OPTHALMIC DX IMG ANT SEGMENT W I AND R UNI BI		No	No	Not Cov	No		No	No
92133	COMPUTERIZED OPTHALMIC IMAGING OPTIC NERVE		No	No	Not Cov	No		No	No
92134	COMPUTERIZED OPTHALMIC IMAGING RETINA		No	No	Not Cov	No		No	No
92136	OPH BMTRY PRTL COHER INTRFRMTRY IO LENS PWR CAL		No	No	Not Cov	No		No	No
92145	CORNEA HYSTERESIS DETERMIN IMPULSE STIMJ UNI BI		Not Cov	Not Cov	Not Cov	Not Cov		No	No
92225	OPHTHALMOSCPY EXTENDED RETINAL DRAWING I AND R 1ST		No	No	Not Cov	No		No	No
92226	OPHTHALMOSCPY EXTENDED RETINAL DRAWING I AND R SBS		No	No	Not Cov	No		No	No
92227	REMOTE IMG DX RETINL DIS W ALYS AND REPORT UNI B		Not Cov	Not Cov	Not Cov	Not Cov		No	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
92228	REMOTE IMAGING MGT RETINAL DISEASE W I AND R UNI B		Not Cov	Not Cov	Not Cov	Not Cov		No	No
92230	FLUORESCIN ANGIOSCOPY INTERPRETATION AND REPORT		No	No	Not Cov	No		No	No
92235	FLUORESCIN ANGRPH W MULTIFRAME I AND R UNI BI		No	No	Not Cov	No		No	No
92240	INDOCYANINE-GREEN ANGRPH W MULTIFRAME I AND R UNI BI		No	No	Not Cov	No		No	No
92242	FLUORESCIN ICG ANGRPH W MULTIFRAME I AND R UNI BI		No	No	Not Cov	No		No	No
92250	FUNDUS PHOTOGRAPHY W INTERPRETATION AND REPORT		No	No	Not Cov	No		No	No
92260	OPHTHALMODYNAMOMETRY		No	No	Not Cov	No		No	No
92265	NEEDLE OCULOGRAPHY 1 XOC MUSC 1 BOTH EYE W I AND R		No	No	Not Cov	No		No	No
92270	ELECTRO-OCULOGRAPY W INTERPRETATION AND REPORT		No	No	Not Cov	No		No	No
92273	FULL FIELD ELECTRORETINOGRAPHY W I AND R		No	No	Not Cov	No		No	No
92274	MULTIFOVAL ELECTRORETINOGRAPHY W I AND R		No	No	Not Cov	No		No	No
92283	COLOR VISION XM EXTENDED ANOMALOSCOPE EQUIV		No	No	Not Cov	No		No	No
92284	DARK ADAPTATION XM W INTERPRETATION AND REPORT		No	No	Not Cov	No		No	No
92285	XTRNL OCULAR PHOTOG W I AND R DOCMT MEDICAL PROGRE		No	No	Not Cov	No		No	No
92286	ANT SGM IMAGING W MICROSCOPY ENDOTHELIAL ANALY		No	No	Not Cov	No		No	No
92287	ANT SGM IMAGING W FLUOROSCEIN ANGIO AND I AND R		No	No	Not Cov	No		No	No
92310	RX AND FITG C-LENS SUPVJ CRNL LENS OU XCPT APHK		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
92311	RX AND FITG CONTACT CORNEAL LENS APHAKIA 1 EYE		Not Cov	Not Cov	Not Cov	Not Cov		No	No
92312	RX AND FITG CONTACT CORNEAL LENS APHAKIA BOTH EYES		Not Cov	Not Cov	Not Cov	Not Cov		No	No
92313	RX AND FITG CORNEOSCLERAL LENS		Not Cov	Not Cov	Not Cov	Not Cov		No	No
92314	RX AND FTG CONTACT CORNEAL LENS EYES XCPT APHAKIA		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
92315	RX CONTACT CORNEAL LENS APHAKIA 1 EYE		Not Cov	Not Cov	Not Cov	Not Cov		No	No
92316	RX CONTACT CORNEAL LENS APHAKIA BOTH EYES		Not Cov	Not Cov	Not Cov	Not Cov		No	No
92317	RX CONTACT CORNEOSCLERAL LENS		Not Cov	Not Cov	Not Cov	Not Cov		No	No
92325	MODIFICAJ CONTACT LENX SPX SUPVJ ADAPTATION		Not Cov	Not Cov	Not Cov	Not Cov		No	No
92326	REPLACEMENT CONTACT LENS		Not Cov	Not Cov	Not Cov	Not Cov		No	No
92340	FITTING SPECTACLES XCPT APHAKIA MONOFOCAL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
92341	FITTING SPECTACLES XCPT APHAKIA BIFOCAL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
92342	FITTING SPECTACLES XCPT APHAKIA MULTIFOCAL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
92352	FITTING SPECTACLE PROSTH APHAKIA MONOFOCAL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
92353	FITTING SPECTACLE PROSTH APHAKIA MULTIFOCAL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
92354	FITTING SPECTACLE MOUNTED LW VIS AID 1 ELMNT		Not Cov	No	Not Cov	No		Not Cov	No
92355	FITTING SPECTACLE MOUNTED LW VIS AID TLSCP		Not Cov	No	Not Cov	No		Not Cov	No

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			Outpatient		ASC	Office Setting			
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92358	PROSTHESIS SERVICE APHAKIA TEMPORARY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
92370	RPR AND REFITG SPECTACLES EXCEPT APHAKIA		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
92371	RPR AND REFITG SPECTACLE PROSTHESIS APHAKIA		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
92499	UNLISTED OPHTHALMOLOGICAL SERVICE PROCEDURE		Yes	Yes	Not Cov	Yes		Yes	Yes
92502	OTOLARYNGOLOGIC EXAM UNDER GENERAL ANESTHESIA		No	No	No	No		No	No
92504	BINOCULAR MICROSCOPY SEPARATE DX PROCEDURE		No	No	Not Cov	No		No	No
92507	TX SPEECH LANG VOICE COMMJ AND AUDITORY PROC IND	MD: PA after first 12 visits child, first 6 visits adult; MP PA after 6 visits; MC: PA after 6 visits	Yes	Yes	Not Cov	Yes		Yes	Yes
92508	TX SPEECH LANGUAGE VOICE COMMJ AUDITRY 2 OR GRT INDIV	MD: PA after first 12 visits child, first 6 visits adult; MP PA after 6 visits; MC: PA after 6 visits	Yes	Yes	Not Cov	Yes		Yes	Yes
92511	NASOPHARYNGOSCOPY W ENDOSCOPE SPX		No	No	Not Cov	No		No	No
92512	NASAL FUNCTION STUDIES		No	No	Not Cov	No		No	No
92516	FACIAL NERVE FUNCTION STUDIES		No	No	Not Cov	No		No	No
92520	LARYNGEAL FUNCTION STUDIES		No	No	Not Cov	No		No	No
92521	EVALUATION OF SPEECH FLUENCY (STUTTER CLUTTER)	Limit 1 per year	No	No	Not Cov	No		No	No
92522	EVALUATION OF SPEECH SOUND PRODUCTION ARTICULATE	Limit 1 per year	No	No	Not Cov	No		No	No
92523	EVAL SPEECH SOUND PRODUCT LANGUAGE COMPREHENSION	Limit 1 per year	No	No	Not Cov	No		No	No
92524	BEHAVIORAL AND QUALIT ANALYSIS VOICE AND RESONANCE	Limit 1 per year	No	No	Not Cov	No		No	No
92526	TX SWALLOWING DYSFUNCTION AND ORAL FUNCJ FEEDING	MD: PA req after first 12 visits child, first 6 visits adult; MP: 25 combined therapy limit	No	No	Not Cov	No		No	No
92531	SPONTANEOUS NYSTAGMUS W GAZE		No	No	Not Cov	No		Not Cov	No
92532	POSITIONAL NYSTAGMUS TEST		No	No	Not Cov	No		Not Cov	No
92533	CALORIC VESTIBULAR TEST EACH IRRIGATION		No	No	Not Cov	No		Not Cov	No
92534	OPTOKINETIC NYSTAGMUS TEST		No	No	Not Cov	No		Not Cov	No
92537	CALORIC VESTIBULAR TEST W REC BI BITHERMAL		No	No	Not Cov	No		No	No
92538	CALORIC VESTIBULAR TEST W REC BI MONOTHERMAL		No	No	Not Cov	No		No	No
92540	VSTBLR FUNCJ NYSTAG FOVL AND PERPH STIMJ OSCIL TRK		No	No	Not Cov	No		No	No
92541	SPONTANEOUS NYSTAGMUS TEST		No	No	Not Cov	No		No	No
92542	POSITIONAL NYSTAGMUS TEST		No	No	Not Cov	No		No	No
92544	OPTKINETIC NYSTAG BIDIR FOVEAL PERIPH STIM W REC		No	No	Not Cov	No		No	No
92545	OSCILLATING TRACKING TEST W RECORDING		No	No	Not Cov	No		No	No
92546	SINUSOIDAL VERTICAL AXIS ROTATIONAL TESTING		No	No	Not Cov	No		No	No
92547	USE VERTICAL ELECTRODES		No	No	Not Cov	No		No	No
92548	COMPUTERIZED DYNAMIC POSTUROGRAPY		No	No	Not Cov	No		No	No
92550	TYMPANOMETRY AND REFLEX THRESHOLD MEASUREMENTS		No	No	Not Cov	No		No	No
92551	SCREENING TEST PURE TONE AIR ONLY		No	No	Not Cov	No		Not Cov	No
92552	PURE TONE AUDIOMETRY AIR ONLY		No	No	Not Cov	No		No	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
92553	PURE TONE AUDIOMETRY AIR AND BONE		No	No	Not Cov	No	No	No	
92555	SPEECH AUDIOMETRY THRESHOLD		No	No	Not Cov	No	No	No	
92556	SPEECH AUDIOMETRY THRESHOLD SPEECH RECOGNIJ		No	No	Not Cov	No	No	No	
92557	COMPRE AUDIOMETRY THRESHOLD EVAL SP RECOGNIJ		No	No	Not Cov	No	No	No	
92558	EVOKED OTOACOUSTIC EMISSIONS SCREEN AUTO ANALYS		No	No	Not Cov	No	No	No	
92559	AUDIOMETRIC TESTING GROUPS		Not Cov	Not Cov	Not Cov	Not Cov	Not Cov	No	
92560	BEKESY AUDIOMETRY SCREENING		Not Cov	Not Cov	Not Cov	Not Cov	Not Cov	No	
92561	BEKESY AUDIOMETRY DIAGNOSTIC		Not Cov	Not Cov	Not Cov	Not Cov	No	No	
92562	LOUDNESS BALANCE BINAURAL MONAURAL		Not Cov	Not Cov	Not Cov	Not Cov	No	No	
92563	TONE DECAY TEST		Not Cov	Not Cov	Not Cov	Not Cov	No	No	
92564	SHORT INCREMENT SENSITIVITY INDEX		Not Cov	Not Cov	Not Cov	Not Cov	No	No	
92565	STENGER TEST PURE TONE		Not Cov	Not Cov	Not Cov	Not Cov	No	No	
92567	TYMPANOMETRY		No	No	Not Cov	No	No	No	
92568	ACOUSTIC REFLEX THRESHOLD		No	No	Not Cov	No	No	No	
92570	ACOUSTIC IMMIT TEST TYMPANOM ACOUST REFLX DECAY		No	No	Not Cov	No	No	No	
92571	FILTERED SPEECH TEST		Not Cov	Not Cov	Not Cov	Not Cov	No	No	
92572	STAGGERED SPONDAIC WORD		Not Cov	Not Cov	Not Cov	Not Cov	No	No	
92575	SENSORINEURAL ACUITY LEVEL		Not Cov	Not Cov	Not Cov	Not Cov	No	No	
92576	SYNTHETIC SENTENCE IDENTIFICATION TEST		Not Cov	Not Cov	Not Cov	Not Cov	No	No	
92577	STENGER TEST SPEECH		Not Cov	Not Cov	Not Cov	Not Cov	No	No	
92579	VISUAL REINFORCEMENT AUDIOMETRY		No	No	Not Cov	No	No	No	
92582	CONDITIONING PLAY AUDIOMETRY		No	No	Not Cov	No	No	No	
92583	SELECT PICTURE AUDIOMETRY		Not Cov	Not Cov	Not Cov	Not Cov	No	No	
92584	ELECTROCOCHLEOGRAPHY		No	No	Not Cov	No	No	No	
92585	AUDITORY EVOKED POTENTIALS COMPREHENSIVE		No	No	Not Cov	No	No	No	
92586	AUDITORY EVOKED POTENTIALS LIMITED		No	No	Not Cov	No	No	No	
92587	DISTORT PRODUCT EVOKED OTOACOUSTIC EMISNS LIMITD		No	No	Not Cov	No	No	No	
92588	DISTR PROD EVOKD OTOACOUSTIC EMSNS COMP DX EVAL		No	No	Not Cov	No	No	No	
92590	HEARING AID EXAMINATION AND SELECTION MONAURAL		Not Cov	Not Cov	Not Cov	Not Cov	Not Cov	Not Cov	
92591	HEARING AID EXAMINATION AND SELECTION BINAURAL		Not Cov	Not Cov	Not Cov	Not Cov	Not Cov	Not Cov	
92592	HEARING AID CHECK MONAURAL		Not Cov	Not Cov	Not Cov	Not Cov	Not Cov	Not Cov	
92593	HEARING AID CHECK BINAURAL		Not Cov	Not Cov	Not Cov	Not Cov	Not Cov	Not Cov	
92594	ELECTROACOUS EVAL HEARING AID MONAURAL		Not Cov	Not Cov	Not Cov	Not Cov	Not Cov	Not Cov	
92595	ELECTROACOUS EVAL HEARING AID BINAURAL		Not Cov	Not Cov	Not Cov	Not Cov	Not Cov	Not Cov	
92596	EAR PROTECTOR ATTENUATION MEASUREMENTS		Not Cov	Not Cov	Not Cov	Not Cov	No	Not Cov	
92597	EVAL AND FITG VOICE PROSTC DEV SUPLMNT ORAL SPEEC		No	No	Not Cov	No	No	No	
92601	ANALYSIS COCHLEAR IMPLT PT UNDER 7 YR PRGRMG		No	No	Not Cov	No	No	No	
92602	ANALYSIS COCHLEAR IMPLT PT UNDER 7 YR SBSQ REPRGRMG		No	No	Not Cov	No	No	No	
92603	ANALYSIS COCHLEAR IMPLT 7 YR OR GRT PRGRMG		No	No	Not Cov	No	No	No	

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
92604	ANALYSIS COCHLEAR IMPLT 7 YR OR GRT SBSQ REPRGRMG		No	No	Not Cov	No		No	No
92605	EVAL RX N-SP-GEN AUGMT ALT COMMUN DEV F2F 1ST HR		No	No	Not Cov	No		Not Cov	No
92606	THER SVC N-SP-GENRATJ DEV PRGRMG AND MODIFICAJ		Not Cov	No	Not Cov	No		Not Cov	No
92607	RX SP-GENRATJ AUGMNT AND COMUNICAJ DEV 1ST HR		No	No	Not Cov	No		No	No
92608	RX SP-GENRATJ AUGMNT AND COMUNICAJ DEV EA 30 MIN		No	No	Not Cov	No		No	No
92609	THER SP-GENRATJ DEV PRGRMG AND MODIFICAJ	MD: PA req after first 12 visits child, first 6 visits adult; MP: 25 combined therapy limit	No	No	Not Cov	No		No	No
92610	EVAL ORAL AND PHARYNGEAL SWLNG FUNCJ		No	No	Not Cov	No		No	No
92611	MOTION FLUOR EVAL SWLNG FUNCJ C V REC		No	No	Not Cov	No		No	No
92612	FLEXIBLE ENDOSCOPIC EVAL SWALLOW C V REC		No	No	Not Cov	No		No	No
92613	FLEXIBLE ENDOSCOPIC EVAL SWALLOW C V REC I AND R		No	No	Not Cov	No		No	No
92614	FLEXIBLE ENDOSCOPIC EVAL LARYN SENSORY C V REC		No	No	Not Cov	No		No	No
92615	FLEXIBLE ENDOSCOPIC EVAL LARYN SENS C V REC I AND R		Not Cov	No	Not Cov	No		No	No
92616	FLEXIBLE NDSC EVAL SWLNG AND LARYN SENS C V REC		No	No	Not Cov	No		No	No
92617	FLEXIBLE NDSC EVAL SWLNG AND LARYN SENS C V I AND R		Not Cov	No	Not Cov	No		No	No
92618	EVAL RX N-SP-GEN AUGMT ALT COMMUN DEV ADD 30 MIN		No	No	Not Cov	No		Not Cov	No
92620	EVAL CENTRAL AUDITORY FUNCJ W REPT 1ST 60 MIN		No	No	Not Cov	No		No	No
92621	EVAL CENTRAL AUDITORY FUNCJ W REPT EA 15 MIN		No	No	Not Cov	No		No	No
92625	ASSESSMENT TINNITUS		No	No	Not Cov	No		No	No
92626	EVALUATION AUDITORY REHAB STATUS 1ST HR		No	No	Not Cov	No		No	No
92627	EVALUATION AUDITORY REHAB STATUS EA 15 MIN		No	No	Not Cov	No		No	No
92630	AUDITORY REHABILITATION PRELINGUAL HEARING LOSS		No	No	Not Cov	No		Not Cov	No
92633	AUDITORY REHABILITATION POSTLINGUAL HEARING LOSS		No	No	Not Cov	No		Not Cov	No
92640	ANALYSIS W PRGRMG AUD BRAINSTEM IMPLANT PR HR		No	No	Not Cov	No		No	No
92700	UNLISTED OTORHINOLARYNGOLOGICAL SERVICE		Yes	Yes	Not Cov	Yes		Yes	Yes
92920	PRQ TRLUML CORONARY ANGIOPLASTY ONE ART BRANCH		No	No	Not Cov	No		No	No
92921	PRQ TRLUML CORONARY ANGIOPLASTY ADDL BRANCH		No	No	Not Cov	No		Not Cov	No
92924	PRQ TRLUML CORONARY ANGIO ATHERECT ONE ART BRNCH		No	No	Not Cov	No		No	No
92925	PRQ TRLUML CORONARY ANGIO ATHEREC ADDL ART BRNCH		No	No	Not Cov	No		Not Cov	No
92928	PRQ TRLUML CORONARY STENT W ANGIO ONE ART BRNCH		No	No	Not Cov	No		No	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
92929	PRQ TRLUML CORONARY STENT W ANGIO ADDL ART BRNCH		No	No	Not Cov	No		Not Cov	No
92933	PRQ TRLUML CORONRY STENT ATH ANGIO ONE ART BRNCH		No	No	Not Cov	No		No	No
92934	PRQ TRLUML CORONARY STENT ATH ANGIO ADDL BRANCH		No	No	Not Cov	No		Not Cov	No
92937	PRQ TRLUML CORONARY BYP GRFT REVASC ONE VESSEL		No	No	Not Cov	No		No	No
92938	PRQ TRLUML CORONARY BYP GRFT REVASC ADDL VESSEL		No	No	Not Cov	No		Not Cov	No
92941	PRQ TRLUML CORONRY TOT OCCLUS REVASC MI ONE VSL		No	No	Not Cov	No		No	No
92943	PRQ TRLUML CORONRY CHRONIC OCCLUS REVASC ONE VSL		Not Cov	No	Not Cov	No		No	No
92944	PRQ TRLUML CORONRY CHRNIC OCCLUS REVASC ADDL VSL		No	No	Not Cov	No		Not Cov	No
92950	CARDIOPULMONARY RESUSCITATION		No	No	Not Cov	No		No	No
92953	TEMPORARY TRANSCUTANEOUS PACING		No	No	Not Cov	No		No	No
92960	CARDIOVERSION ELECTIVE ARRHYTHMIA EXTERNAL		No	No	Not Cov	No		No	No
92961	CARDIOVERSION ELECTIVE ARRHYTHMIA INTERNAL SPX		No	No	Not Cov	No		No	No
92970	CARDIOASSIST-METH CIRCULATORY ASSIST INTERNAL		Not Cov	No	Not Cov	No		No	No
92971	CARDIOASSIST-METH CIRCULATORY ASSIST EXTERNAL		Not Cov	No	Not Cov	No		No	No
92973	PRQ TRANSLUMINAL CORONARY MECHANICL THROMBECTOMY		No	No	Not Cov	No		No	No
92974	TCAT PLACEMENT RADJ DLVR DEV SBSQ C IV BRACHYTX		No	No	Not Cov	No		No	No
92975	THROMBOLYSIS INTRACORONARY NFS SLCTV ANGRPH		Not Cov	No	Not Cov	No		No	No
92977	THROMBOLYSIS CORONARY INTRAVENOUS INFUSION		No	No	Not Cov	No		No	No
92978	ENDOLUMINAL CORONARY IVUS OCT I AND R INITIAL VESSEL		No	No	Not Cov	No		No	No
92979	ENDOLUMINAL CORONARY IVUS OCT I AND R ADDL VESSEL		No	No	Not Cov	No		No	No
92986	PRQ BALLOON VALVULOPLASTY AORTIC VALVE		No	No	Not Cov	No		No	No
92987	PRQ BALLOON VALVULOPLASTY MITRAL VALVE		No	No	Not Cov	No		No	No
92990	PRQ BALLOON VALVULOPLASTY PULMONARY VALVE		No	No	Not Cov	No		No	No
92992	ATRIAL SEPTECT SEPTOST TRANSVENOUS BALLOON		Not Cov	No	Not Cov	No		No	No
92993	ATRIAL SEPTECT SEPTOSTOMY BLADE METHOD		Not Cov	No	Not Cov	No		No	No
92997	PRQ TRLUML PULMONARY ART BALLOON ANGIOP 1 VSL		No	No	Not Cov	No		No	No
92998	PRQ TRLUML PULMONARY ART BALLOON ANGIOP EA VSL		No	No	Not Cov	No		No	No
93000	ECG ROUTINE ECG W LEAST 12 LDS W I AND R		Not Cov	No	Not Cov	No		No	No
93005	ECG ROUTINE ECG W LEAST 12 LDS TRCG ONLY W O I AND R		No	No	Not Cov	No		No	No
93010	ECG ROUTINE ECG W LEAST 12 LDS I AND R ONLY		Not Cov	No	Not Cov	No		No	No
93015	CV STRS TST XERS AND OR RX CONT ECG W SI AND R		Not Cov	No	Not Cov	No		No	No
93016	CV STRS TST XERS AND OR RX CONT ECG W O I AND R		Not Cov	No	Not Cov	No		No	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
93017	CV STRS TST XERS AND OR RX CONT ECG TRCG ONLY		No	No	Not Cov	No		No	No
93018	CV STRS TST XERS AND OR RX CONT ECG I AND R ONLY		Not Cov	No	Not Cov	No		No	No
93024	ERGONOVINE PROVOCATION TST		No	No	Not Cov	No		No	No
93025	MICROVOLT T-WAVE ASSESS VENTRICULAR ARRHYTHMIAS		Not Cov	Not Cov	Not Cov	Not Cov		No	No
93040	RHYTHM ECG 1-3 LEADS W INTERPRETATION AND REPORT		Not Cov	No	Not Cov	No		No	No
93041	RHYTHM ECG 1-3 LEADS TRACING ONLY W O I AND R		No	No	Not Cov	No		No	No
93042	RHYTHM ECG 1-3 LEADS INTERPRETATION AND REPRT ON		Not Cov	No	Not Cov	No		No	No
93050	ART PRESS WAVEFORM ANALYS CENTRAL ART PRESSURE		Not Cov	Not Cov	Not Cov	Not Cov		No	No
93224	XTRNL ECG AND 48 HR RECORD SCAN STOR W R AND I		Not Cov	No	Not Cov	No		No	No
93225	XTRNL ECG AND 48 HR RECORDING		No	No	Not Cov	No		No	No
93226	EXTERNAL ECG SCANNING ANALYSIS REPORT		No	No	Not Cov	No		No	No
93227	XTRNL ECG CONTINUOUS RHYTHM W I AND R UP TO 48 HRS		Not Cov	No	Not Cov	No		No	No
93228	XTRNL MOBILE CV TELEMTRY W I AND REPORT 30 DAYS		Not Cov	No	Not Cov	No		No	No
93229	XTRNL MOBILE CV TELEMTRY W TECHNICAL SUPPORT		Not Cov	Yes	Not Cov	No		Yes	Yes
93260	PRGRMG DEV EVAL IMPLANTABLE SUBQ LEAD DFB SYSTEM		No	No	Not Cov	No		No	No
93261	INTERROGATION EVAL F2F IMPLANT SUBQ LEAD DEFIB		No	No	Not Cov	No		No	No
93264	REMOTE MNTR WIRELESS P-ART PRS SNR UP TO 30 D		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
93268	XTRNL PT ACTIV ECG TRANSMIS W R AND I UNDER 30 DAYS		Not Cov	No	Not Cov	No		No	No
93270	XTRNL PT ACTIVATED ECG RECORD MONITOR 30 DAYS		No	No	Not Cov	No		No	No
93271	XTRNL PT ACTIVATED ECG REC DWNLD 30 DAYS		No	No	Not Cov	No		No	No
93272	XTRNL PT ACTIVTD ECG DWNLD W R AND I UNDER 30 DAYS		Not Cov	No	Not Cov	No		No	No
93278	SIGNAL AVERAGED ELECTROCARDIOGRAPHY W WO ECG		No	No	Not Cov	No		No	No
93279	PROGRAM EVAL IMPLANTABLE IN PRSN 1 LD PACEMAKER		No	No	Not Cov	No		No	No
93280	PROGRAM EVAL IMPLANTABLE IN PERSN DUAL LD PACER		No	No	Not Cov	No		No	No
93281	PROGRAM EVAL IMPLANTABLE IN PRSN MULTI LD PACER		No	No	Not Cov	No		No	No
93282	PRGRMG DEV EVAL IMPLANTABLE IN PERSN 1 LD DFB		No	No	Not Cov	No		No	No
93283	PRGRMG EVAL IMPLANTABLE IN PRSN DUAL LEAD DFB		No	No	Not Cov	No		No	No
93284	PRGRMG EVAL IMPLANTABLE IN PERSON MULTI LEAD DFB		No	No	Not Cov	No		No	No
93285	PROGRAM EVAL IMPLANTABLE DEV IN PRSN ILR SYSTEM		No	No	Not Cov	No		No	No
93286	PERI-PX EVAL AND PROGRAM IN PRSN PACEMAKER SYSTEM		No	No	Not Cov	No		No	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
93287	PERI-PX DEV EVAL AND PROG SING DUAL MULTI LEAD DFB		No	No	Not Cov	No		No	No
93288	INTERROGATION EVAL IN PERSON 1 DUAL MLT LEAD PM		No	No	Not Cov	No		No	No
93289	INTERROG EVAL F2F 1 DUAL MLT LEADS IMPLTBL DFB		No	No	Not Cov	No		No	No
93290	INTERROGATION EVAL F2F IMPLANTABLE CV MNTR SYS		No	No	Not Cov	No		No	No
93291	INTERROGATION EVALUATION IN PERSON ILR SYSTEM		No	No	Not Cov	No		No	No
93292	INTERROGATION EVAL IN PERSON WR DEFIBRILLATOR		No	No	Not Cov	No		No	No
93293	TRANSTELEPHONIC RHYTHM STRIP PACEMAKER EVAL		No	No	Not Cov	No		No	No
93294	INTERROGATION EVAL REMOTE UNDER 90 D 1 2 MLT LEAD PM		Not Cov	No	Not Cov	No		No	No
93295	INTERROGATION EVAL REMOTE UNDER 90 D 1 2 MLT LD DFB		Not Cov	No	Not Cov	No		No	No
93296	INTERROGATION REMOTE UNDER 90 D TECHNICIAN REVIEW		No	No	Not Cov	No		No	No
93297	INTERROGATION EVAL REMOTE UNDER 30 D CV MNTR SYS		Not Cov	No	Not Cov	No		No	No
93298	INTERROGATION EVALUATION REMOTE UNDER 30 D ILR SYS		Not Cov	No	Not Cov	No		No	No
93299	INTERROGATION EVAL REMOTE UNDER 30 D TECH REVIEW		No	No	Not Cov	No		No	No
93303	COMPLETE TTHRC ECHO CONGENITAL CARDIAC ANOMALY		No	No	Not Cov	No		No	No
93304	F-UP LIMITED TTHRC ECHO CONGENITAL CAR ANOMALY		No	No	Not Cov	No		No	No
93306	ECHO TTHRC R-T 2D W WOM-MODE COMPL SPEC AND COLR D		No	No	Not Cov	No		No	No
93307	ECHO TRANSTHORAC R-T 2D W WO M-MODE REC COMP		No	No	Not Cov	No		No	No
93308	ECHO TRANSTHORC R-T 2D W WO M-MODE REC F-UP LMTD		No	No	Not Cov	No		No	No
93312	ECHO TRANSESOPHAG R-T 2D W PRB IMG ACQUISJ I AND R		No	No	Not Cov	No		No	No
93313	ECHO R-T 2D W PROBE PLACEMENT ONLY		No	No	Not Cov	No		No	No
93314	ECHO TRANSESOPHAG R-T 2D IMG ACQUISJ I AND R ONLY		No	No	Not Cov	No		No	No
93315	ECHO TRANSESOPHAG CONGEN PROBE PLCMT IMGNG I AND R		No	No	Not Cov	No		No	No
93316	ECHO TRANSESOPHAG CONGEN PROBE PLCMT ONLY		No	No	Not Cov	No		No	No
93317	ECHO TRANSESOPHAG IMAGE ACQUISJ INTERP AND REPORT		No	No	Not Cov	No		No	No
93318	ECHO TRANSESOPHAG MONTR CARDIAC PUMP FUNCTJ		No	No	Not Cov	No		No	No
93320	DOPPLER ECHOCARD PULSE WAVE W SPECTRAL DISPLAY		No	No	Not Cov	No		No	No
93321	DOP ECHOCARD PULSE WAVE W SPECTRAL F-UP LMTD STD		No	No	Not Cov	No		No	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
93325	DOP ECHOCARD COLOR FLOW VELOCITY MAPPING		No	No	Not Cov	No		No	No
93350	ECHO TTHRC R-T 2D W WO M-MODE COMPLETE REST AND ST		No	No	Not Cov	No		No	No
93351	ECHO TTHRC R-T 2D W WO M-MODE REST AND STRS CONT ECG		No	No	Not Cov	No		No	No
93352	USE OF ECHO CONTRAST AGENT DURING STRESS ECHO		Not Cov	No	Not Cov	No		No	No
93355	ECHO TEE GUID TCAT ICAR VESSEL STRUCTURAL INTVN		No	No	Not Cov	No		No	No
93451	RIGHT HEART CATH O2 SATURATION AND CARDIAC OUTPUT		No	No	Not Cov	No		No	No
93452	L HRT CATH W NJX L VENTRICULOGRAPHY IMG S AND I		No	No	Not Cov	No		No	No
93453	R AND L HRT CATH W NJX L VENTRICULOG IMG S AND I		No	No	Not Cov	No		No	No
93454	CATH PLACEMENT AND NJX CORONARY ART ANGIO IMG S AND I		No	No	Not Cov	No		No	No
93455	CATH PLMT AND NJX CORONARY ART GRFT ANGIO IMG S AND I		No	No	Not Cov	No		No	No
93456	CATH PLMT R HRT AND ARTS W NJX AND ANGIO IMG S AND I		No	No	Not Cov	No		No	No
93457	CATH PLMT R HRT ARTS GRFTS W NJX AND ANGIO IMG S AND I		No	No	Not Cov	No		No	No
93458	CATH PLMT L HRT AND ARTS W NJX AND ANGIO IMG S AND I		No	No	Not Cov	No		No	No
93459	CATH PLMT L HRT ARTS GRFTS W NJX AND ANGIO IMG S AND I		No	No	Not Cov	No		No	No
93460	R AND L HRT CATH WINJX HRT ART AND L VENTR IMG		No	No	Not Cov	No		No	No
93461	R AND L HRT CATH W INJEC HRT ART GRFT AND L VENT I		No	No	Not Cov	No		No	No
93462	LEFT HEART CATH BY TRANSEPTAL PUNCTURE		No	No	Not Cov	No		No	No
93463	MEDICATION ADMIN AND HEMODYNAMIC MEASUREMENT		Not Cov	No	Not Cov	No		No	No
93464	PHYSIOLOGIC EXERCISE STUDY AND HEMODYNAMIC MEASU		No	No	Not Cov	No		No	No
93503	INSERTION FLOW DIRECTED CATHETER FOR MONITORING		No	No	Not Cov	No		No	No
93505	ENDOMYOCARDIAL BIOPSY		No	No	Not Cov	No		No	No
93530	R HRT CATHETERIZATION CONGENITAL CARDIAC ANOMALY		No	No	Not Cov	No		No	No
93531	CMBN R HRT AND RETROGRADE L HRT CATHJ CGEN ANOMA		No	No	Not Cov	No		No	No
93532	CMBN R HRT T-SEPTAL L HRT CATHJ NTC SEPTUM CGEN		No	No	Not Cov	No		No	No
93533	CMBN R HRT T-SEPTAL L HRT CATHJ SEPTAL OPNG CGEN		No	No	Not Cov	No		No	No
93561	INDIC DIL STD ARTL AND OR VEN CATHJ W OUTP MEAS		No	No	Not Cov	No		No	No
93562	INDIC DIL STD ARTL AND OR VEN CATHJ SBSQ OUTP MEA		No	No	Not Cov	No		No	No

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			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
93563	NJX SEL HRT ART CONGENITAL HRT CATH W S AND I		No	No	Not Cov	No		No	No
93564	NJX SEL HRT ART GRFT CONGENITAL HRT CATH W S AND I		No	No	Not Cov	No		No	No
93565	NJX SEL L VENT ATRIAL ANGIO HRT CATH W S AND I		No	No	Not Cov	No		No	No
93566	NJX SEL R VENT ATRIAL ANGIO HRT CATH W S AND I		No	No	Not Cov	No		No	No
93567	NJX SUPRAVALV AORTOG HRT CATH W S AND I		No	No	Not Cov	No		No	No
93568	NJX PULMONARY ANGIO HRT CATH W S AND I		No	No	Not Cov	No		No	No
93571	IV DOP VEL AND OR PRESS C FLO RSRV MEAS 1ST VSL		No	No	Not Cov	No		No	No
93572	IV DOP VEL AND OR PRESS C FLO RSRV MEAS ADDL VSL		No	No	Not Cov	No		No	No
93580	PRQ TCAT CLSR CGEN INTRATRL COMUNICAJ W IMPLT		No	No	Not Cov	No		No	No
93581	PRQ TCAT CLSR CGEN VENTR SEPTAL DFCT W IMPLT		No	No	Not Cov	No		No	No
93582	PERCUTAN TRANSCATH CLOSURE PAT DUCT ARTERIOSUS		No	No	Not Cov	No		No	No
93583	PERCUTANEOUS TRANSCATHETER SEPTAL REDUCTION THER		No	No	Not Cov	No		No	No
93590	PERQ TRANSCATH CLS PARAVALVR LEAK 1 MITRAL VALVE		Not Cov	No	Not Cov	No		No	No
93591	PERQ TRANSCATH CLS PARAVALVR LEAK 1 AORTIC VALVE		Not Cov	No	Not Cov	No		No	No
93592	PERQ TRANSCATH CLS PARAVALVR LEAK EACH OCCLS DEV		Not Cov	No	Not Cov	No		No	No
93600	BUNDLE OF HIS RECORDING		No	No	Not Cov	No		No	No
93602	INTRA-ATRIAL RECORDING		No	No	Not Cov	No		No	No
93603	RIGHT VENTRICULAR RECORDING		No	No	Not Cov	No		No	No
93609	INTRA-VENTRIC AND ATRIAL MAPG TACHYCARD W CATH MA		No	No	Not Cov	No		No	No
93610	INTRA-ATRIAL PACING		No	No	Not Cov	No		No	No
93612	INTRAVENTRICULAR PACING		No	No	Not Cov	No		No	No
93613	INTRACARDIAC ELECTROPHYSIOLOGIC 3D MAPPING		No	No	Not Cov	No		No	No
93615	ESOPHGL REC ATRIAL W WO VENTRICULAR ELECTROGRAMS		No	No	Not Cov	No		No	No
93616	ESOPHGL REC ATRIAL W WO VENTR ELECTRGRAMS W PACG		No	No	Not Cov	No		No	No
93618	INDUCTION ARRHYTHMIA ELECTRICAL PACING		No	No	Not Cov	No		No	No
93619	COMPRES ELECTROPHYSIOLOGIC W O ARRHYT INDUCTION		No	No	Not Cov	No		No	No
93620	COMPRES ELECTROPHYSIOLOGIC ARRHYTHMIA INDUCTION		No	No	Not Cov	No		No	No
93621	COMPRES ELECTROPHYSIOL XM W LEFT ATRIAL PACNG REC		No	No	Not Cov	No		No	No
93622	COMPRES ELECTROPHYSIOL XM W LEFT VENTR PACNG REC		No	No	Not Cov	No		No	No
93623	PROGRAMMED STIMJ AND PACG AFTER IV DRUG NFS		No	No	Not Cov	No		No	No
93624	ELECTROPHYSIOLOGIC FOLLOW-UP W PAC REC W ARRHYT		No	No	Not Cov	No		No	No
93631	INTRAOP EPICAR AND ENDOCAR PACG AND MAPG		No	No	Not Cov	No		No	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
93640	EPHYS EVAL PACG CVDFB LDS INITIAL IMPLAN REPLACE		No	No	Not Cov	No		No	No
93641	EPHYS EVAL PACG CVDFB LDS W TSTG OF PULSE GEN		No	No	Not Cov	No		No	No
93642	EPHYS EVAL PACG CVDFB PRGRMG REPRGRMG PARAMETERS		No	No	Not Cov	No		No	No
93644	EPHYS EVAL SUBQ IMPLANTABLE DEFIBRILLATOR		Not Cov	Not Cov	Not Cov	Not Cov		No	No
93650	ICAR CATHETER ABLATION ATRIOVENTR NODE FUNCTION		No	No	Not Cov	No		No	No
93653	EPHYS EVAL W ABLATION SUPRAVENT ARRHYTHMIA		No	No	Not Cov	No		No	No
93654	EPHYS EVAL W ABLATION VENTRICULAR TACHYCARDIA		No	No	Not Cov	No		No	No
93655	ICAR CATHETER ABLATION ARRHYTHMIA ADD ON		No	No	Not Cov	No		No	No
93656	EPHYS EVL TRNSPTL TX ATRIAL FIB ISOLAT PULM VEIN		No	No	Not Cov	No		No	No
93657	ABLATE L R ATRIAL FIBRIL W ISOLATED PULM VEIN		No	No	Not Cov	No		No	No
93660	CARDIOVASCULAR FUNCTION EVAL W TILT TABLE W MNTR		No	No	Not Cov	No		No	No
93662	INTRACARD ECHOCARD W THER DX IVNTJ INCL IMG S AND I		No	No	Not Cov	No		No	No
93668	PERIPHERAL ARTERIAL DISEASE REHAB PER SESSION		No	Not Cov	Not Cov	Not Cov		No	No
93701	BIOMPEDANCE-DERIVED PHYSIOLOGIC CV ANALYSIS		Not Cov	Not Cov	Not Cov	Not Cov		No	No
93702	BIS EXTRACELLULAR FLUID ALYS LYMPHEDEMA ASSMNT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
93724	ELECTRONIC ANALYSIS ANTITACHY PACEMAKER SYSTEM		No	No	Not Cov	No		No	No
93740	TEMPRATURE GRADIENT STUDY		No	No	Not Cov	No		Not Cov	No
93745	1ST SET-UP AND PRGRMG PHYS QHP OF WEARABLE CVDFB		No	No	Not Cov	No		No	No
93750	INTERROGATION VAD IN PRSON W PHYS QHP ANALYSIS		No	No	Not Cov	No		No	No
93770	DERMINATION OF VENOUS PRESSUE		No	No	Not Cov	No		Not Cov	No
93784	AMBL BLD PRESS W TAPE AND DISK 24 OR GRT HR ALYS I AND R		Not Cov	No	Not Cov	No		No	No
93786	BL BLD PRESS W TAPE AND DISK 24 OR GRT HR REC ONL		No	No	Not Cov	No		No	No
93788	AMBL BLD PRESS W TAPE DISK 24 OR GRT HR ALYS W REPR		No	No	Not Cov	No		No	No
93790	AMBL BLD PRESS TAPE AND DISK 24 OR GRT HR REVIEW		Not Cov	No	Not Cov	No		No	No
93792	PT CAREGIVER TRAINJ FOR INITIATION HOME INR MNTR		Not Cov	Not Cov	Not Cov	Not Cov		No	Yes
93793	ANTICOAGULANT MGMT FOR PT TAKING WARFARIN		Not Cov	Not Cov	Not Cov	Not Cov		No	Yes
93797	OUTPATIENT CARDIAC REHAB W O CONT ECG MONITOR		No	No	Not Cov	No		No	No
93798	OUTPATIENT CARDIAC REHAB W CONT ECG MONITORING		No	No	Not Cov	No		No	No
93799	UNLISTED CARDIOVASCULAR SERVICE PROCEDURE		Yes	Yes	Not Cov	Yes		Yes	Yes
93880	DUPLEX SCAN EXTRACRANIAL ART COMPL BI STUDY		No	No	Not Cov	No		No	No
93882	DUPLEX SCAN EXTRACRANIAL ART UNI LMTD STUDY		No	No	Not Cov	No		No	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
93886	TRANSCRANIAL DOPPLER STDY INTRACRANIAL ART COMPL		No	No	Not Cov	No		No	No
93888	TRANSCRANIAL DOPPLER STDY INTRACRANIAL ART LMTD		No	No	Not Cov	No		No	No
93890	TRANSCRANIAL DOPPLER INTRACRAN ART VASOREAC STDY		No	No	Not Cov	No		No	No
93892	TRANSCRANIAL DOPPLER INTRACRAN ART EMBOLI DETECT		No	No	Not Cov	No		No	No
93893	TRANSCRAN DOPPLER INTRACRAN ART MICROBUBBLE INJ		No	No	Not Cov	No		No	No
93895	CAROTID INTIMA MEDIA AND CAROTID ATHEROMA EVAL BI		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Yes
93922	NON-INVAS PHYSIOLOGIC STD EXTREMITY ART 2 LEVEL		No	No	Not Cov	No		No	No
93923	NON-INVASIVE PHYSIOLOGIC STUDY EXTREMITY 3 LEVELS		No	No	Not Cov	No		No	No
93924	N-INVAS PHYSIOLOGIC STD LXTR ART COMPL BI		No	No	Not Cov	No		No	No
93925	DUP-SCAN LXTR ART ARTL BPGS COMPL BI STUDY		No	No	Not Cov	No		No	No
93926	DUP-SCAN LXTR ART ARTL BPGS UNI LMTD STUDY		No	No	Not Cov	No		No	No
93930	DUP-SCAN UXTR ART ARTL BPGS COMPL BI STUDY		No	No	Not Cov	No		No	No
93931	DUP-SCAN UXTR ART ARTL BPGS UNI LMTD STUDY		No	No	Not Cov	No		No	No
93970	DUP-SCAN XTR VEINS COMPLETE BILATERAL STUDY		No	No	Not Cov	No		No	No
93971	DUP-SCAN XTR VEINS UNILATERAL LIMITED STUDY		No	No	Not Cov	No		No	No
93975	DUP-SCAN ARTL FLO ABDL PEL SCROT AND RPR ORGN COM		No	No	Not Cov	No		No	No
93976	DUP-SCAN ARTL FLO ABDL PEL SCROT AND RPR ORGN LMT		No	No	Not Cov	No		No	No
93978	DUP-SCAN AORTA IVC ILIAC VASCL BPGS COMPLETE		No	No	Not Cov	No		No	No
93979	DUP-SCAN AORTA IVC ILIAC VASCL BPGS UNI LMTD		No	No	Not Cov	No		No	No
93980	DUP-SCAN ARTL INFL AND VEN O F PEN VSL COMPL		No	No	Not Cov	No		No	No
93981	DUP-SCAN ARTL INFL AND VEN O F PEN VSL F-UP LMTD STD		No	No	Not Cov	No		No	No
93990	DUPLEX SCAN HEMODIALYSIS ACCESS		No	No	Not Cov	No		No	No
93998	UNLISTED NONINVASIVE VASCULAR DIAGNOSTIC STUDY		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Not Cov
94002	VENTILATION ASSIST AND MGMT INPATIENT 1ST DAY		No	No	Not Cov	No		No	No
94003	VENTILATION ASSIST AND MGMT INPATIENT EA SBSQ DA		Not Cov	No	Not Cov	No		No	No
94004	VENTILATION ASSIST AND MGMT NURSING FAC PR DAY		Not Cov	No	Not Cov	No		No	No
94005	HOME VENTILATOR MGMT CARE OVERSIGHT 30 MIN OR GRT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
94010	SPMTRY W VC EXPIRATORY FLO W WO MXML VOL VNTJ		No	No	Not Cov	No		No	No
94011	MEAS SPIROMTRC FORCD EXPIRATORY FLO INFANT AND 2 Y		No	No	Not Cov	No		No	No
94012	MEAS SPIRO FRCD EXP FLO PRE AND POST BRONCH INF 2YRS		No	No	Not Cov	No		No	No
94013	MEASUREMENT LUNG VOLUMES INFANT CHILD 2 YRS		No	No	Not Cov	No		No	No

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			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
94014	PT-INITIATE SPIROMETRIC RECORDING PHYS QHP R AND I		No	No	Not Cov	No		No	No
94015	PATIENT-INITIATED SPIROMETRIC RECORDING		No	No	Not Cov	No		No	No
94016	PATIENT-INITIATED SPIROMETRIC PHYS QHP R AND I ONLY		Not Cov	No	Not Cov	No		No	No
94060	BRNCDILAT RSPSE SPMTRY PRE AND POST-BRNCDILAT ADMN		No	No	Not Cov	No		No	No
94070	BRNCSPSM PROVOCATION EVAL MLT SPMTRY W ADMN AGT		No	No	Not Cov	No		No	No
94150	VITAL CAPACITY TOTAL SEPARATE PROCEDURE		No	No	Not Cov	No		Not Cov	No
94200	MAX BREATHING CAPACITY MAXIMAL VOLUNTARY VENTJ		No	No	Not Cov	No		No	No
94250	EXPIRED GAS COLLECTION QUANT 1 PROCEDURE SPX		No	No	Not Cov	No		No	No
94375	RESPIRATORY FLOW VOLUME LOOP		No	No	Not Cov	No		No	No
94400	BREATHING RESPONSE TO CO2		No	No	Not Cov	No		No	No
94450	BREATHING RESPONSE TO HYPOXIA		No	No	Not Cov	No		No	No
94452	HIGH ALTITUDE SIMULATJ TEST W PHYS INTERP AND REPORT		Not Cov	Not Cov	Not Cov	Not Cov		No	No
94453	HIGH ALTITUDE SIMULATJ W PHYS I AND R W O2 TITRATION		Not Cov	Not Cov	Not Cov	Not Cov		No	No
94610	INTRAPULMONARY SURFACTANT ADMINISTJ PHYS QHP		Not Cov	Not Cov	Not Cov	Not Cov		No	No
94617	EXERCISE TEST FOR BRONCHOSPASM		No	No	Not Cov	No		No	No
94618	PULMONARY STRESS TESTING		No	No	Not Cov	No		No	No
94621	CARDIOPULMONARY EXERCISE TESTING		No	No	Not Cov	No		No	No
94640	PRESSURIZED NONPRESSURIZED INHALATION TREATMENT		No	No	Not Cov	No		No	No
94642	PENTAMIDINE AERSL INHALATION PNEUMOCYSTIS PROPH		No	No	Not Cov	No		No	No
94644	CONTINUOUS INHALATION TREATMENT 1ST HR		No	Not Cov	Not Cov	Not Cov		No	No
94645	CONTINUOUS INHALATION TREATMENT EA ADDL HR		No	Not Cov	Not Cov	Not Cov		No	No
94660	CPAP VENTILATION CPAP INITIATION AND MGMT		No	No	Not Cov	No		No	No
94662	CONTINUOUS NEGATIVE PRESSURE VENTJ INITIAT AND MGM		No	No	Not Cov	No		No	No
94664	DEMO AND EVAL OF PT UTILIZ AERSL GEN NEB INHLR IP		No	No	Not Cov	No		No	No
94667	MANJ CH WALL FACILITATE LNG FUNCJ 1 DEMO AND EVAL		No	No	Not Cov	No		No	No
94668	MANJ CHEST WALL FACILITATE LUNG FUNCTION SUBSQ		No	No	Not Cov	No		No	No
94669	MECHANICAL CHEST WALL OSCILLATION LUNG FUNCTION		Not Cov	Not Cov	Not Cov	Not Cov		No	No
94680	O2 UPTK EXP GAS ANALYSIS REST AND XERS DIRECT SIMP		No	No	Not Cov	No		No	No
94681	O2 UPTK EXP GAS ALYS W CO2 OUTPUT PCT O2 XTRC		No	No	Not Cov	No		No	No
94690	O2 UPTAKE EXP GAS ANALYSIS REST INDIRECT SPX		No	No	Not Cov	No		No	No

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			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
94726	PLETHYSMOGRAPHY LUNG VOLUMES W WO AIRWAY RESIST		No	No	Not Cov	No		No	No
94727	GAS DILUT WASHOUT LUNG VOL W WO DISTRIB VENT AND V		No	No	Not Cov	No		No	No
94728	AIRWAY RESISTANCE BY IMPULSE OSCILLOMETRY		No	No	Not Cov	No		No	No
94729	CO DIFFUSING CAPACITY		No	No	Not Cov	No		No	No
94750	PULMONARY COMPLIANCE STUDY		No	No	Not Cov	No		No	No
94760	NONINVASIVE EAR PULSE OXIMETRY SINGLE DETER		No	No	Not Cov	No		No	No
94761	NONINVASIVE EAR PULSE OXIMETRY MULTIPLE DETER		No	No	Not Cov	No		Not Cov	No
94762	NONINVASIVE EAR PULSE OXIMETRY OVERNIGHT MONITOR		No	No	Not Cov	No		No	No
94770	CARBON DIOXIDE EXP GAS DETER INFRARED ANALYZER		No	No	Not Cov	No		No	No
94772	CIRCADIAN RESPIRATRY PATTERN REC 12-24 HR INFANT		No	No	Not Cov	No		No	No
94774	PEDIATRIC APNEA MONITOR ATTACHMENT PHYS I AND R		Not Cov	No	Not Cov	No		No	No
94775	PEDIATRIC APNEA MONITOR ATTACHMENT		Not Cov	No	Not Cov	No		No	No
94776	PEDIATRIC APNEA MONITOR ANALYSES COMPUTER		Not Cov	No	Not Cov	No		No	No
94777	PEDIATRIC APNEA MONITOR PHYS QHP REVIEW		Not Cov	No	Not Cov	No		No	No
94780	CAR SEAT BED TESTING W INTERP AND REPORT 60 MIN		Not Cov	Not Cov	Not Cov	Not Cov		No	No
94781	CAR SEAT BED TESTNG W INTERP AND REPORT ADDL 30MIN		Not Cov	Not Cov	Not Cov	Not Cov		No	No
94799	UNLISTED PULMONARY SERVICE PROCEDURE		Yes	Yes	Not Cov	Yes		Yes	Yes
95004	PERCUTANEOUS TESTS W ALLERGENIC EXTRACTS		No	No	Not Cov	No		No	No
95012	NITRIC OXIDE EXPIRED GAS DETERMINATION		Not Cov	No	Not Cov	No		No	No
95017	ALLG TSTG PERQ AND IC VENOMS IMMED REACT W I AND R		No	No	Not Cov	No		No	No
95018	ALLG TEST PERQ AND IC DRUG BIOL IMMED REACT W I AND R		No	No	Not Cov	No		No	No
95024	INTRACUTANEOUS TESTS W ALLERGENIC EXTRACTS		No	No	Not Cov	No		No	No
95027	INTRACUTANEOUS TESTS W ALLERGENIC XTRCS AIRBORNE		No	No	Not Cov	No		No	No
95028	IC TSTS W ALLGIC XTRCS DLYD TYP RXN W READING		No	No	Not Cov	No		No	No
95044	PATCH APPLICATION TEST SPECIFY NUMBER TESTS		No	No	Not Cov	No		No	No
95052	PHOTO PATCH TEST SPECIFY NUMBER TSTS		No	No	Not Cov	No		No	No
95056	PHOTO TESTS		No	No	Not Cov	No		No	No
95060	OPHTHALMIC MUCOUS MEMBRANE TESTS		No	No	Not Cov	No		No	No
95065	DIRECT NASAL MUCOUS MEMBRANE TEST		No	No	Not Cov	No		No	No
95070	INHJ BRNCL CHALLENGE TSTG W HISTAM METHACHOL		No	No	Not Cov	No		No	No
95071	INHJ BRNCL CHALLENGE TSTG W AGS GASES		No	No	Not Cov	No		No	No
95076	INGESTION CHALLENGE TEST INITIAL 120 MINUTES		No	No	Not Cov	No		No	No
95079	INGESTION CHALLENGE TEST EACH ADDL 60 MINUTES		No	No	Not Cov	No		No	No
95115	PROF SVCS ALLG IMMNTX X W PRV ALLGIC XTRCS 1 NJX		No	No	Not Cov	No		No	No
95117	PROF SVCS ALLG IMMNTX X W PRV ALLGIC XTRCS NJXS		No	No	Not Cov	No		No	No

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95120	PROF SVCS ALLG IMMNTX W PRV ALLGIC XTRC 1 NJX		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
95125	PROF SVCS ALLG IMMNTX W PRV ALLGIC XTRC 2 OR GRT NJX		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
95130	PROF SVCS ALLG IMMNTX W PRV XTRC 1 STING INSECT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
95131	PROF SVCS ALLG IMMNTX W PRV XTRC 2 STING INSECT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
95132	PROF SVCS ALLG IMMNTX W PRV XTRC 3 STING INSECT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
95133	PROF SVCS ALLG IMMNTX W PRV XTRC 4 STING INSECT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
95134	PROF SVCS ALLG IMMNTX W PRV XTRC 5 STING INSECT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
95144	PREPJ AND ANTIGEN PRV ALLERGEN IMMUNOTHERAPY 1 DO		No	No	Not Cov	No		No	No
95145	PREPJ AND ANTIGEN ALLERGEN IMMUNOTHERAPY 1 INSECT		No	No	Not Cov	No		No	No
95146	PREPJ AND ANTIGEN ALLERGEN IMMUNOTHERAPY 2 INSECT		No	No	Not Cov	No		No	No
95147	PREPJ AND ANTIGEN ALLERGEN IMMUNOTHERAPY 3 INSECT		No	No	Not Cov	No		No	No
95148	PREPJ AND ANTIGEN ALLERGEN IMMUNOTHERAPY 4 INSECT		No	No	Not Cov	No		No	No
95149	PREPJ AND ANTIGEN ALLERGEN IMMUNOTHERAPY 5 INSECT		No	No	Not Cov	No		No	No
95165	PREPJ AND ALLERGEN IMMUNOTHERAPY 1 MLT ANTIGEN	PA Req over 80 units/client/year	No	No	Not Cov	No		No	No
95170	PREPJ AND ANTIGEN ALLERGEN IMMUNOTHERAPY WHL INSE		No	No	Not Cov	No		No	No
95180	RAPID DESENSITIZATION PROCEDURE EACH HOUR		No	No	Not Cov	No		No	No
95199	UNLISTED ALLERGY CLINICAL IMMUNOLOGIC SRVC PX		Yes	Yes	Not Cov	Yes		Yes	Yes
95249	CONT GLUC MONITORING PATIENT PROVIDED EQUIPMENT		Yes	Yes	Not Cov	No		Yes	Yes
95250	CONT GLUC MNTR PHYSICIAN QHP PROVIDED EQUIPMENT		Not Cov	No	Not Cov	No		No	No
95251	CONTINUOUS GLUCOSE MONITORING ANALYSIS I AND R	Covered 0-18 years	Not Cov	No	Not Cov	No		No	No
95782	POLYSOM UNDER 6 YRS SLEEP STAGE 4 OR GRT ADDL PARAM ATTN		No	No	Not Cov	No		No	No
95783	POLYSOM UNDER 6 YRS SLEEP W CPAP BILVL VENT 4 OR GRT PAR		No	No	Not Cov	No		No	No
95800	SLP STDY UNATND W HRT RATE O2 SAT RESP SLP TIME		No	No	Not Cov	No		Yes	No
95801	SLP STDY UNATND W MIN HRT RATE O2 SAT RESP ANAL		No	No	Not Cov	No		Yes	No
95803	ACTIGRAPHY TESTING RECORDING ANALYSIS I AND R	MD/ MP: No PA POS 12; No PA age <21	Yes	Yes	Not Cov	Yes		Yes	Yes
95805	MLT SLEEP LATENCY MAINT OF WAKEFULNESS TSTG	MD/ MP: No PA POS 12; No PA age <21	Yes	Yes	Not Cov	Yes		Yes	Yes
95806	SLEEP STD AIRFLOW HRT RATE AND O2 SAT EFFORT UNATT	MD/ MP: No PA POS 12; No PA age <21	No	No	Not Cov	No		Yes	Yes
95807	SLEEP STD REC VNTJ RESPIR ECG HRT RATE AND O2 ATTN	MD/ MP: No PA POS 12; No PA age <21	Yes	Yes	Not Cov	Yes		Yes	Yes
95808	POLYSOM ANY AGE SLEEP STAGE 1-3 ADDL PARAM ATTN	MD/ MP: No PA POS 12; No PA age <21	Yes	Yes	Not Cov	Yes		Yes	Yes

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
95810	POLYSOM 6 OR GRT YRS SLEEP 4 OR GRT ADDL PARAM ATTND	MD/ MP: No PA POS 12; No PA age <21	Yes	Yes	Not Cov	Yes		Yes	Yes
95811	POLYSOM 6 OR GRT YRS SLEEP W CPAP 4 OR GRT ADDL PARAM ATT	MD/ MP: No PA POS 12; No PA age <21	Yes	Yes	Not Cov	Yes		No	Yes
95812	ELECTROENCEPHALOGRAM EXTEND MONITORING 41-60 MIN		No	No	Not Cov	No		No	No
95813	ELECTROENCEPHALOGRAM EXTND MNTR OVER 1 HR		No	No	Not Cov	No		No	No
95816	ELECTROENCEPHALOGRAM W REC AWAKE AND DROWSY		No	No	Not Cov	No		No	No
95819	ELECTROENCEPHALOGRAM W REC AWAKE AND ASLEEP		No	No	Not Cov	No		No	No
95822	ELECTROENCEPHALOGRAM REC COMA SLEEP ONLY		No	No	Not Cov	No		No	No
95824	ELECTROENCEPHALOGRAM CERE DEATH EVAL ONLY		No	No	Not Cov	No		No	No
95827	ELECTROENCEPHALOGRAM ALL NIGHT RECORDING		No	No	Not Cov	No		No	No
95829	ELECTROCORTICOGRAM SURGERY SPX		No	No	Not Cov	No		No	No
95830	INSERTION SPHENOIDAL ELECTRODES EEG PHYS QHP		Not Cov	No	Not Cov	No		No	No
95831	MUSC TSTG MNL W REPRT XTR EX HAND TRNK		No	No	Not Cov	No		No	No
95832	MUSC TSTG MNL W REPRT HAND W WO CMPSRN NRML SIDE		No	No	Not Cov	No		No	No
95833	MUSC TSTG MNL W REPRT TOTAL EVAL BODY EX HANDS		No	No	Not Cov	No		No	No
95834	MUSC TSTG MNL W REPRT TOTAL EVAL BODY W HANDS		No	No	Not Cov	No		No	No
95836	ECOG IMPLANTED BRAIN NPGT W REC I AND R UNDER 30 DAYS		Yes	Yes	Not Cov	Yes		Yes	Yes
95851	ROM MEAS AND REPRT EA XTR EX HAND EA TRNK SCTJ SPI		No	No	Not Cov	No		No	No
95852	ROM MEAS AND REPRT HAND W WO COMPARISON NORMAL SID		No	No	Not Cov	No		No	No
95857	CHOLINESTERASE INHIBITOR CHALLENGE TEST		No	No	Not Cov	No		No	No
95860	NDL EMG 1 XTR W WO RELATED PARASPINAL AREAS		No	No	Not Cov	No		No	No
95861	NDL EMG 2 XTR W WO RELATED PARASPINAL AREAS		No	No	Not Cov	No		No	No
95863	NDL EMG 3 XTR W WO RELATED PARASPINAL AREAS		No	No	Not Cov	No		No	No
95864	NDL EMG 4 XTR W WO RELATED PARASPINAL AREAS		No	No	Not Cov	No		No	No
95865	NEEDLE ELECTROMYOGRAPHY LARYNX		No	No	Not Cov	No		No	No
95866	NEEDLE ELECTROMYOGRAPHY HEMIDIAPHRAGM		No	No	Not Cov	No		No	No
95867	NEEDLE ELECTROMYOGRAPHY CRANIAL NRV MUSCLE UNI		No	No	Not Cov	No		No	No
95868	NEEDLE ELECTROMYOGRAPHY CRANIAL NRV MUSCLE BI		No	No	Not Cov	No		No	No
95869	NEEDLE EMG THRC PARASPI MUSC EXCLUDING T1 T12		No	No	Not Cov	No		No	No
95870	NEEDLE EMG LMTD STD MUSC 1 XTR NON-LIMB UNI BI		No	No	Not Cov	No		No	No
95872	NEEDLE EMG W 1 FIBER ELECTRODE QUAN MEAS JITTER		No	No	Not Cov	No		No	No
95873	ELECTRICAL STIMULATION GUID W CHEMODENERVATION		No	No	Not Cov	No		No	No
95874	NEEDLE EMG GUID W CHEMODENERVATION		No	No	Not Cov	No		No	No
95875	ISCHEMIC LIMB XERS TST SPEC ACQUISJ METAB		No	No	Not Cov	No		No	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
95885	NEEDLE EMG EA EXTREMITY W PARASPINL AREA LIMITED		No	No	Not Cov	No		No	No
95886	NEEDLE EMG EA EXTREMTY W PARASPINL AREA COMPLETE		No	No	Not Cov	No		No	No
95887	NEEDLE EMG NONEXTREMTY MSCLES W NERVE CONDUCTION		No	No	Not Cov	No		No	No
95905	MOTOR AND SENS NRV CNDJ PRECONF ELTRD ARRAY LIMB		No	No	Not Cov	No		No	No
95907	NERVE CONDUCTION STUDIES 1-2 STUDIES		No	No	Not Cov	No		No	No
95908	NERVE CONDUCTION STUDIES 3-4 STUDIES		No	No	Not Cov	No		No	No
95909	NERVE CONDUCTION STUDIES 5-6 STUDIES		No	No	Not Cov	No		Yes	No
95910	NERVE CONDUCTION STUDIES 7-8 STUDIES		No	No	Not Cov	No		No	No
95911	NERVE CONDUCTION STUDIES 9-10 STUDIES		No	No	Not Cov	No		No	No
95912	NERVE CONDUCTION STUDIES 11-12 STUDIES		No	No	Not Cov	No		No	No
95913	NERVE CONDUCTION STUDIES 13 OR GRT STUDIES		No	No	Not Cov	No		No	No
95921	TSTG ANS FUNCJ CARDIOVAGAL INNERVAJ PARASYMP		No	No	Not Cov	No		No	No
95922	TSTG ANS FUNCJ VASOMOTOR ADRENERGIC INNERVAJ		No	No	Not Cov	No		No	No
95923	TESTING AUTONOMIC NERVOUS SYSTEM FUNCTION		No	No	Not Cov	No		No	No
95924	TSTG ANS FUNCJ PARASYMP AND SYMP W 5 MIN PASIVE TILT		No	No	Not Cov	No		No	No
95925	SHORT-LATENCY SOMATOSENS EP STD UPR LIMBS		No	No	Not Cov	No		No	No
95926	SHORT-LATENCY SOMATOSENS EP STD LWR LIMBS		No	No	Not Cov	No		No	No
95927	SHORT-LATENCY SOMATOSENS EP STD TRNK HEAD		No	No	Not Cov	No		No	No
95928	CTR MOTOR EP STD TRANSCRNL MOTOR STIMJ UPR LIMBS		No	No	Not Cov	No		No	No
95929	CTR MOTOR EP STD TRANSCRNL MOTOR STIMJ LWR LIMBS		No	No	Not Cov	No		No	No
95930	VISUAL EP TESTING CNS EXCEPT GLAUCOMA W I AND R		No	No	Not Cov	No		No	No
95933	ORBICULARIS OCULI REFLX ELECTRODIAGNOSTIC TEST		No	No	Not Cov	No		No	No
95937	NEUROMUSCULAR JUNCT TSTG EA NRV ANY 1 METH		No	No	Not Cov	No		No	No
95938	SHORT-LATENCY SOMATOSENS EP STD UPR AND LOW LIMB		No	No	Not Cov	No		No	No
95939	CTR MOTR EP STD TRANSCRNL MOTR STIM UPR AND LOW LI		No	No	Not Cov	No		No	No
95940	IONM 1 ON 1 IN OR W ATTENDANCE EACH 15 MINUTES		Not Cov	Not Cov	Not Cov	Not Cov		No	No
95941	IONM REMOTE NEARBY OR GRT 1 PATIENT IN OR PER HOUR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
95943	PARASYMP AND SYMP NRV FUNCJ HRT RATE VARIABILITY		No	No	Not Cov	No		No	No
95950	MONITOR ID AND LATERALIZATION SEIZURE FOCUS EEG		Yes	Yes	Not Cov	Yes		Yes	Yes
95951	LOCALIZE CEREBRAL SEIZURE CABLE RADIO EEG VIDEO		Yes	Yes	Not Cov	Yes		Yes	Yes
95953	LOCALIZE CEREBRAL SEIZURE CPTR PORTABLE EEG		Yes	Yes	Not Cov	Yes		Yes	Yes
95954	RX PHYSICAL EEG ACTIVAJ PHYS QHP ATTENDANCE		No	No	Not Cov	No		No	No
95955	EEG NONINTRACRANIAL SURGERY		No	No	Not Cov	No		No	No
95956	MNTR SEIZURE CMPTR 16CHAN EEG ATND EA 24 HR		Yes	Yes	Not Cov	Yes		Yes	Yes

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
95957	DIGITAL ANALYSIS ELECTROENCEPHALOGRAM		Yes	Yes	Not Cov	Yes		Yes	Yes
95958	WADA ACTIVATION TEST HEMISPHERIC FUNCTION W EEG		No	No	Not Cov	No		No	No
95961	FUNCJAL CORT AND SUBCORT MAPG PHYS QHP ATTND INIT HR		No	No	Not Cov	No		No	No
95962	FUNCJAL CORT AND SUBCORT MAPG PHYS QHP ATTND ADDL HR		No	No	Not Cov	No		No	No
95965	MAGNETOENCEPHALOGRAPHY SPON BRAIN ACTIVITY		No	No	Not Cov	No		No	No
95966	MAGNETOENCEPHALOGRAPHY EVOKED FIELDS 1 MODALITY		No	No	Not Cov	No		No	No
95967	MAGNETOENCEPHALOGRAPHY EVOKED FIELDS EACH ADDL		No	No	Not Cov	No		No	No
95970	ELEC ALYS NSTIM PLS GEN BRN SC PERPH W O REPRGRM		No	No	Not Cov	No		No	No
95971	ELEC ALYS NSTIM PLS GEN SMPL SC PERPH W PRGRMG		No	No	Not Cov	No		No	No
95972	ELEC ALYS NSTIM PLS GEN CPLX SC PERPH W PRGRMG		No	No	Not Cov	No		No	No
95976	ELEC ALYS IMPLT SMPL CN NPGT PRGRMG		Yes	Yes	Not Cov	Yes		Yes	Yes
95977	ELEC ALYS IMPLT CPLX CN NPGT PRGRMG		Yes	Yes	Not Cov	Yes		Yes	Yes
95980	ELEC ALYS NSTIM PLS GEN GASTRIC INTRAOP W PRGRMG		No	No	Not Cov	No		No	No
95981	ELEC ALYS NSTIM GEN GASTRIC SBSQ W O REPRGRMG		No	No	Not Cov	No		No	No
95982	ELEC ALYS NSTIM PLS GEN GASTRIC SBSQ W REPRGRMG		No	No	Not Cov	No		No	No
95983	ELEC ALYS IMPLT BRN NPGT PRGRMG 1ST 15 MIN		Yes	Yes	Not Cov	Yes		Yes	Yes
95984	ELEC ALYS IMPLT BRN NPGT PRGRMG EA ADDL 15 MIN		No	No	Not Cov	No		No	No
95990	REFILL AND MAINTENANCE PUMP DRUG DLVR SPINAL BRAIN		No	No	Not Cov	No		No	No
95991	RFL AND MAIN IMPLT PMP RSVR DLVR SPI BRN PHY QHP		No	No	Not Cov	No		No	No
95992	CANALITH REPOSITIONING PROCEDURE		No	No	Not Cov	No		No	No
95999	UNLIS NEUROLOGICAL NEUROMUSCULAR DX PX		Yes	Yes	Not Cov	Yes		Yes	Yes
96000	COMPTE CPTN MTN ALYS VIDEO TAPING 3D KINEMATICS		Not Cov	Not Cov	Not Cov	Not Cov		No	No
96001	COMPTE CPTN MTN ALYS W DYN PLNTR PRES MEAS WALKG		Not Cov	Not Cov	Not Cov	Not Cov		No	No
96002	DYN SURF EMG WALKG FUNCJAL ACTV 1-12 MUSC		Not Cov	Not Cov	Not Cov	Not Cov		No	No
96003	DYN FINE WIRE EMG WALKG FUNCJAL ACTV 1 MUSC		Not Cov	Not Cov	Not Cov	Not Cov		No	No
96004	PHYS QHP R AND I CPTN MTN ALYS WALK FUNCJAL ACTV REPR		Not Cov	Not Cov	Not Cov	Not Cov		No	No
96020	TEST SELECT AND ADMN FUNCTL BRAIN MAP PHYS QHP		Not Cov	Not Cov	Not Cov	Not Cov		No	No
96040	MEDICAL GENETICS COUNSELING EACH 30 MINUTES	No PA, if is Pregnancy Related Carve out to HCA	Not Cov	No	Not Cov	No		Not Cov	No
96105	ASSESSMENT APHASIA W INTERP AND REPORT PER HOUR		Not Cov	Not Cov	Not Cov	Not Cov		No	Yes
96110	DEVELOPMENTAL SCREEN W SCORING AND DOC STD INSTRM	1 per lifetime (9-30 mo routine dx); 4 per calendar year (0-36 mo autism dx)	No	No	Not Cov	No	No	Not Cov	No

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96112	DEVELOPMENTAL TST ADMIN PHYS QHP 1ST HOUR		Yes	Yes	Not Cov	Yes		Yes	Yes
96113	DEVELOPMENTAL TST ADMIN PHYS QHP EA ADDL 30 MIN		Yes	Yes	Not Cov	Yes		Yes	Yes
96116	NUBHVL STATUS XM PR HR W PT INTERPJ AND PREPJ		Yes	Yes	Not Cov	Yes	Yes	Yes	Yes
96121	NEUROBEHAVIORAL STATUS XM PHYS QHP EA ADDL HOUR		Yes	Yes	Not Cov	Yes		Yes	Yes
96125	STANDARDIZED COGNITIVE PERFORMANCE TESTING	MD: No PA age < 21	Yes	Yes	Not Cov	Yes		Yes	Yes
96127	BEHAV ASSMT W SCORE AND DOCD STAND INSTRUMENT		No	No	Not Cov	No		No	No
96130	PSYCHOLOGICAL TST EVAL SVC PHYS QHP FIRST HOUR		Yes	Yes	Not Cov	Yes		Yes	Yes
96131	PSYCHOLOGICAL TST EVAL SVC PHYS QHP EA ADDL HOUR		Yes	Yes	Not Cov	Yes		Yes	Yes
96132	NEUROPSYCHOLOGICAL TST EVAL PHYS QHP 1ST HOUR		Yes	Yes	Not Cov	Yes		Yes	Yes
96133	NEUROPSYCHOLOGICAL TST EVAL PHYS QHP EA ADDL HR		Yes	Yes	Not Cov	Yes		Yes	Yes
96136	PSYL NRPSYCL TST PHYS QHP 2 PLUS TST 1ST 30 MIN		Yes	Yes	Not Cov	Yes		Yes	Yes
96137	PSYCL NRPSYCL TST PHYS QHP 2 PLUS TST EA ADDL 30 MIN		Yes	Yes	Not Cov	Yes		Yes	Yes
96138	PSYCL NRPSYCL TST TECH 2 PLUS TST 1ST 30 MIN		Yes	Yes	Not Cov	Yes		Yes	Yes
96139	PSYCL NRPSYCL TST TECH 2 PLUS TST EA ADDL 30 MIN		Yes	Yes	Not Cov	Yes		Yes	Yes
96146	PSYCL NRPSYCL TST ELEC PLATFORM AUTO RESULT		Yes	Yes	Not Cov	Yes		Yes	Yes
96150	HLTH AND BEHAVIOR ASSMT EA 15 MIN W PT 1ST ASSMT		No	No	Not Cov	No	No	No	No
96151	HLTH AND BEHAVIOR ASSMT EA 15 MIN W PT RE-ASSMT		No	No	Not Cov	No	No	No	No
96152	HLTH AND BEHAVIOR IVNTJ EA 15 MIN INDIV		No	No	Not Cov	No	No	No	No
96153	HLTH AND BEHAVIOR IVNTJ EA 15 MIN GRP 2 OR GRT PTS		No	No	Not Cov	No	No	No	No
96154	HLTH AND BEHAVIOR IVNTJ EA 15 MIN FAM W PT		No	No	Not Cov	No	No	No	No
96155	HLTH AND BEHAVIOR IVNTJ EA 15 MIN FAM W O PT		Not Cov	Not Cov	Not Cov	Not Cov	No	Not Cov	No
96160	PT-FOCUSED HLTH RISK ASSMT SCORE DOC STND INSTRM		Not Cov	No	Not Cov	No		No	No
96161	CAREGIVER HLTH RISK ASSMT SCORE DOC STND INSTRM		Not Cov	No	Not Cov	No		No	No
96360	IV INFUSION HYDRATION INITIAL 31 MIN-1 HOUR		No	No	Not Cov	No		No	No
96361	IV INFUSION HYDRATION EACH ADDITIONAL HOUR		No	No	Not Cov	No		No	No
96365	IV INFUSION THERAPY PROPHYLAXIS DX 1ST TO 1 HR		No	No	Not Cov	No		No	No
96366	IV INFUSION THERAPY PROPHYLAXIS DX EA HOUR		No	No	Not Cov	No		No	No
96367	IV INFUSION THER PROPH ADDL SEQUENTIAL TO 1 HR		No	No	Not Cov	No		No	No
96368	IV NFS THERAPY PROPHYLAXIS DX CONCURRENT NFS		No	No	Not Cov	No		No	No
96369	SUBCUTANEOUS INFUSION INITIAL 1 HR W PUMP SET-UP		No	No	Not Cov	No		No	No
96370	SUBCUTANEOUS INFUSION EACH ADDITIONAL HOUR		No	No	Not Cov	No		No	No
96371	SUBQ INFUSION ADDITIONAL PUMP INFUSION SITE		No	No	Not Cov	No		No	No
96372	THERAPEUTIC PROPHYLACTIC DX INJECTION SUBQ IM		No	No	Not Cov	No	No	No	No
96373	THERAPEUTIC PROPHYLACTIC DX NJX INTRA-ARTERIAL		No	No	Not Cov	No		No	No
96374	THER PROPH DX NJX IV PUSH SINGLE 1ST SBST DRUG		No	No	Not Cov	No		No	No

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96375	THERAPEUTIC INJECTION IV PUSH EACH NEW DRUG		No	No	Not Cov	No	No	No	
96376	THER PROPH DX NJX EA SEQL IV PUSH SBST DRUG FAC		No	No	Not Cov	No	No	No	
96377	APPL ON-BODY INJECTOR FOR TIMED SUBQ INJECTION		No	No	Not Cov	No	No	No	
96379	UNLISTED THERAPEUTIC PROPH DX IV IA NJX NFS		Yes	Yes	Not Cov	Yes	Yes	Yes	
96401	CHEMOTX ADMN SUBQ IM NON-HORMONAL ANTI-NEO		No	No	Not Cov	No	No	No	
96402	CHEMOTX ADMN SUBQ IM HORMONAL ANTI-NEO		No	No	Not Cov	No	No	No	
96405	CHEMOTHERAPY ADMINISTRATION INTRALESIONAL UNDER 7		No	No	Not Cov	No	No	No	
96406	CHEMOTHERAPY ADMINISTRATION INTRALESIONAL OVER 7		No	No	Not Cov	No	No	No	
96409	CHEMOTX ADMN IV PUSH TQ 1 1ST SBST DRUG		No	No	Not Cov	No	No	No	
96411	CHEMOTX ADMN IV PUSH TQ EA SBST DRUG		No	No	Not Cov	No	No	No	
96413	CHEMOTX ADMN IV NFS TQ UP 1 HR 1 1ST SBST DRUG		No	No	Not Cov	No	No	No	
96415	CHEMOTHERAPY ADMN IV INFUSION TQ EA HR		No	No	Not Cov	No	No	No	
96416	CHEMOTX ADMN TQ INIT PROLNG CHEMOTX NFUS PMP		No	No	Not Cov	No	No	No	
96417	CHEMOTX ADMN IV NFS TQ EA SEQL NFS TO 1 HR		No	No	Not Cov	No	No	No	
96420	CHEMOTHERAPY ADMIN INTRA-ARTERIAL PUSH TQ		No	No	Not Cov	No	No	No	
96422	CHEMOTHERAPY ADMIN INTRA-ARTERIAL INFUS UNDER 1 HR		No	No	Not Cov	No	No	No	
96423	CHEMOTHERAPY ADMN INTRAARTERIAL INFUSION EA HR		No	No	Not Cov	No	No	No	
96425	CHEMOTX ADMN IA NFS OVER 8 HR PRTBLE IMPLTBL PMP		No	No	Not Cov	No	No	No	
96440	CHEMOTX ADMN PLEURAL CAVITY REQ AND W THORACNTS		No	No	Not Cov	No	No	No	
96446	CHEMOTX ADMN PRTL CAVITY PORT CATH		No	No	Not Cov	No	No	No	
96450	CHEMOTX ADMN CNS REQ SPINAL PUNCTURE		No	No	Not Cov	No	No	No	
96521	REFILLING AND MAINTENANCE PORTABLE PUMP		No	No	Not Cov	No	No	No	
96522	REFILL AND MAINTENANCE PUMP DRUG DLVR SYSTEMIC		No	No	Not Cov	No	No	No	
96523	IRRIGAJ IMPLNTD VENOUS ACCESS DRUG DELIVERY SYST		No	No	Not Cov	No	No	No	
96542	CHEMOTX NJX SUBARACHND INTRAVENTR RSVR 1 MULT		No	No	Not Cov	No	No	No	
96549	UNLISTED CHEMOTHERAPY PROCEDURE		Yes	Yes	Not Cov	Yes	Yes	Yes	
96567	PDT DSTR PRMLG LES SKN ILLUM ACTIVJ PER DAY		Not Cov	Not Cov	Not Cov	Not Cov	Yes	Yes	
96570	PDT NDSC ABL ABNOR TISS VIA ACTIVJ RX 30 MIN		Not Cov	Not Cov	Not Cov	Not Cov	Yes	Yes	
96571	PDT NDSC ABL ABNOR TISS VIA ACTIVJ RX A 15 MIN		Not Cov	Not Cov	Not Cov	Not Cov	Yes	Yes	
96573	PDT DSTR PRMLG LES SKN ILLUM ACTIVJ BY PHYS QHP		Yes	Yes	Not Cov	No	Yes	Yes	
96574	DEBRIDEMENT PRMLG HYPERKERATOTIC LES W PDT		Yes	Yes	Not Cov	No	Yes	Yes	
96900	ACTINOTHERAPY ULTRAVIOLET LIGHT		Yes	Yes	Not Cov	No	Yes	Yes	
96902	MCRSCP XM HAIR PLUCK CLIP FOR CNTS STRUCT ABNORM		Yes	Yes	Not Cov	No	Not Cov	Yes	
96904	WHOLE BODY INTEGUMENTARY PHOTOGRAPHY		Not Cov	Not Cov	Not Cov	Not Cov	Not Cov	Yes	

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			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
96910	PHOTOCHEMOTX TAR AND UVB PETROLATUM UVB	Not Cov w/ primary diagnosis 709.01 or L80	Yes	Yes	Not Cov	No		Yes	Yes
96912	PHOTOCHEMOTX PSORALENS AND ULTRAVIOLET PUVA		Yes	Yes	Not Cov	No		Yes	Yes
96913	PHOTOCHEMOTHERAPY DERMATOSES 4-8 HRS SUPERVISION		Yes	Yes	Not Cov	No		Yes	Yes
96920	LASER SKIN DISEASE PSORIASIS TOT AREA UNDER 250 SQ CM		Yes	Yes	Not Cov	No		Yes	Yes
96921	LASER SKIN DISEASE PSORIASIS 250-500 SQ CM		Yes	Yes	Not Cov	No		Yes	Yes
96922	LASER SKIN DISEASE PSORIASIS OVER 500 SQ CM		Yes	Yes	Not Cov	No		Yes	Yes
96931	RCM CELULR AND SUBCELULR SKN IMGNG IMG ACQ I AND R 1ST		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
96932	RCM CELULR AND SUBCELULR SKN IMGNG IMG ACQUISITION		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
96933	RCM CELULR AND SUBCELULR SKN IMGNG I AND R 1ST LES		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
96934	RCM CELULR AND SUBCELULR SKN IMGNG IMG ACQ I AND R ADD		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
96935	RCM CELULR AND SUBCELULR SKN IMGNG IMG ACQ EA ADDL		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
96936	RCM CELULR AND SUBCELULR SKN IMGNG I AND R EA ADDL		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
96999	UNLISTED SPECIAL DERMATOLOGICAL SERVICE PROCED		Yes	Yes	Not Cov	Yes		Yes	Yes
97010	APPLICATION MODALITY 1 OR GRT AREAS HOT COLD PACKS		No	No	Not Cov	No		Not Cov	No
97012	APPL MODALITY 1 OR GRT AREAS TRACTION MECHANICAL	MD: PA req age=>21 after first 24 visits, Not Cov for Naturopath; MP: 25 combined therapy limit	No	No	Not Cov	No		No	No
97014	APPL MODALITY 1 OR GRT AREAS ELEC STIMJ UNATTENDED	MD: PA req age=>21 after first 24 visits, Not Cov for Naturopath; MP: 25 combined therapy limit	No	No	Not Cov	No		Not Cov	No
97016	APPL MODALITY 1 OR GRT AREAS VASOPNEUMATIC DEVICES	MD: PA req age=>21 after first 24 visits, Not Cov for Naturopath; MP: 25 combined therapy limit	No	No	Not Cov	No		No	No
97018	APPL MODALITY 1 OR GRT AREAS PARAFFIN BATH	MD: PA req age=>21 after first 24 visits, Not Cov for Naturopath; MP: 25 combined therapy limit	No	No	Not Cov	No		No	No
97022	APPLICATION MODALITY 1 OR GRT AREAS WHIRLPOOL	MD: PA req age=>21 after first 24 visits, Not Cov for Naturopath; MP: 25 combined therapy limit	No	No	Not Cov	No		No	No
97024	APPLICATION MODALITY 1 OR GRT AREAS DIATHERMY	MD: PA req age=>21 after first 24 visits, Not Cov for Naturopath; MP: 25 combined therapy limit	No	No	Not Cov	No		No	No
97026	APPLICATION MODALITY 1 OR GRT AREAS INFRARED	MD: PA req age=>21 after first 24 visits, Not Cov for Naturopath; MP: 25 combined therapy limit	No	No	Not Cov	No		Not Cov	No

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97028	APPL MODALITY 1 OR GRT AREAS ULTRAVIOLET	MD: PA req age=>21 after first 24 visits, Not Cov for Naturopath; MP: 25 combined therapy limit	No	No	Not Cov	No		No	No
97032	APPL MODALITY 1 OR GRT AREAS ELEC STIMJ EA 15 MIN	MD: PA req age=>21 after first 24 visits, Not Cov for Naturopath; MP: 25 combined therapy limit	No	No	Not Cov	No		No	No
97033	APPL MODALITY 1 OR GRT AREAS IONTOPHORESIS EA 15 MIN	MD: PA req age=>21 after first 24 visits, Not Cov for Naturopath; MP: 25 combined therapy limit	No	No	Not Cov	No		No	No
97034	APPL MODALITY 1 OR GRT AREAS CONTRAST BATHS EA 15 MIN	MD: PA req age=>21 after first 24 visits, Not Cov for Naturopath; MP: 25 combined therapy limit	No	No	Not Cov	No		No	No
97035	APPL MODALITY 1 OR GRT AREAS ULTRASOUND EA 15 MIN	MD: PA req age=>21 after first 24 visits, Not Cov for Naturopath; MP: 25 combined therapy limit	No	No	Not Cov	No		No	No
97036	APPL MODALITY 1 OR GRT AREAS HUBBARD TANK EA 15 MIN	MD: PA req age=>21 after first 24 visits, Not Cov for Naturopath; MP: 25 combined therapy limit	No	No	Not Cov	No		No	No
97039	UNLIST MODALITY SPEC TYPE AND TIME CONSTANT ATTEND	MD: PA req age=>21 after first 24 visits, Not Cov for Naturopath; MP: 25 combined therapy limit	No	No	Not Cov	No		Yes	No
97110	THERAPEUTIC PX 1 OR GRT AREAS EACH 15 MIN EXERCISES	MD: PA req age=>21 after first 24 visits, Not Cov for Naturopath; MP: 25 combined therapy limit; MC PA req after therapy benefit reached	Yes	Yes	Not Cov	Yes		Yes	Yes
97112	THER PX 1 OR GRT AREAS EACH 15 MIN NEUROMUSC REEDUCA	MD: PA req age=>21 after first 24 visits, Not Cov for Naturopath; MP: 25 combined therapy limit; MC PA req after therapy benefit reached	Yes	Yes	Not Cov	Yes		Yes	Yes
97113	THER PX 1 OR GRT AREAS EACH 15 MIN AQUA THER W XERSS	MD: PA req age=>21 after first 24 visits, Not Cov for Naturopath	No	No	Not Cov	No		No	Not Cov
97116	THER PX 1 OR GRT AREAS EA 15 MIN GAIT TRAINJ W STAIR	MD: PA req age=>21 after first 24 visits, Not Cov for Naturopath; MP: 25 combined therapy limit	No	No	Not Cov	No		No	No
97124	THER PX 1 OR GRT AREAS EACH 15 MINUTES MASSAGE	MD: PA req age=>21 after first 24 visits, Not Cov for Naturopath	No	No	Not Cov	No		No	Not Cov
97127	THERAPEUTIC IVNTJ W FOCUS ON COGNITIVE FUNCTION		No	No	Not Cov	No		Not Cov	No
97139	UNLISTED THERAPEUTIC PROCEDURE SPECIFY	MD: PA req age=>21 after first 24 visits, Not Cov for Naturopath; MP: 25 combined therapy limit	No	No	Not Cov	No		Yes	No
97140	MANUAL THERAPY TQS 1 OR GRT REGIONS EACH 15 MINUTES	MD: PA req age=>21 after first 24 visits, Not Cov for Naturopath; MP: 25 combined therapy limit	No	No	Not Cov	No		No	No
97150	THERAPEUTIC PROCEDURES GROUP 2 OR GRT INDIVIDUALS	MD: PA req age=>21 after first 24 visits, Not Cov for Naturopath; MP: 25 combined therapy limit	No	No	Not Cov	No		No	No

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97151	BEHAVIOR ID ASSESSMENT BY PHYS QHP EA 15 MIN		No	No	Not Cov	No		Yes	No
97152	BEHAVIOR ID SUPPORT ASSMT BY 1 TECH EA 15 MIN		Not Cov	Not Cov	Not Cov	Not Cov		Yes	No
97153	ADAPTIVE BEHAVIOR TX BY PROTOCOL TECH EA 15 MIN		No	No	Not Cov	No		Yes	No
97154	GROUP ADAPTIVE BHV TX BY PROTOCOL TECH EA 15 MIN		No	No	Not Cov	No		Yes	No
97155	ADAPT BHV TX PRTCL MODIFICAJ PHYS QHP EA 15 MIN		No	No	Not Cov	No		Yes	No
97156	FAMILY ADAPT BHV TX GDN PHYS QHP EA 15 MIN		No	No	Not Cov	No		Yes	No
97157	MULTIPLE FAM GROUP BHV TX GDN PHYS QHP EA 15 MIN		No	No	Not Cov	No		Yes	No
97158	GRP ADAPT BHV PRTCL MODIFCAJ PHYS QHP EA 15 MIN		No	No	Not Cov	No		Yes	No
97161	PHYSICAL THERAPY EVALUATION LOW COMPLEX 20 MINS	Limit 1/yr 97161, 97162, 97163, 97164	No	No	Not Cov	No		No	No
97162	PHYSICAL THERAPY EVALUATION MOD COMPLEX 30 MINS	Limit 1/yr 97161, 97162, 97163, 97164	No	No	Not Cov	No		No	No
97163	PHYSICAL THERAPY EVALUATION HIGH COMPLEX 45 MINS	Limit 1/yr 97161, 97162, 97163, 97164	No	No	Not Cov	No		No	No
97164	PHYSICAL THERAPY RE-EVAL EST PLAN CARE 20 MINS	Limit 1/yr 97161, 97162, 97163, 97164	No	No	Not Cov	No		No	No
97165	OCCUPATIONAL THERAPY EVAL LOW COMPLEX 30 MINS	Limit 1/yr 97165, 97166, 97167, 97168	No	No	Not Cov	No		No	No
97166	OCCUPATIONAL THERAPY EVAL MOD COMPLEX 45 MINS	Limit 1/yr 97165, 97166, 97167, 97168	No	No	Not Cov	No		No	No
97167	OCCUPATIONAL THERAPY EVAL HIGH COMPLEX 60 MINS	Limit 1/yr 97165, 97166, 97167, 97168	No	No	Not Cov	No		No	No
97168	OCCUPATIONAL THER RE-EVAL EST PLAN CARE 30 MINS	Limit 1/yr 97165, 97166, 97167, 97168	No	No	Not Cov	No		No	No
97169	ATHLETIC TRAINING EVAL LOW COMPLEX 15 MINS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
97170	ATHLETIC TRAINING EVAL MOD COMPLEX 30 MINS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
97171	ATHLETIC TRAINING EVAL HIGH COMPLEX 45 MINS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
97172	ATHLETIC TRAINING RE-EVAL EST PLAN CARE 20 MINS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
97530	THERAPEUT ACTIVITY DIRECT PT CONTACT EACH 15 MIN	MD: PA req age=>21 after first 24 visits, Not Cov for Naturopath; MP: 25 combined therapy limit	No	No	Not Cov	No		No	No
97533	SENSORY INTEGRATIVE TECHNIQUES EACH 15 MINUTES	MD: PA req age=>21 after first 24 visits, Not Cov for Naturopath; MP: 25 combined therapy limit	No	No	Not Cov	No		No	No
97535	SELF-CARE HOME MGMT TRAINING EACH 15 MINUTES	MD: PA req age=>21 after first 24 visits, Not Cov for Naturopath; MP: 25 combined therapy limit	No	No	Not Cov	No		No	No
97537	COMMUNITY WORK REINTEGRATION TRAINJ EA 15 MIN	MD: PA req age=>21 after first 24 visits, Not Cov for Naturopath; MP: 25 combined therapy limit	No	No	Not Cov	No		No	No
97542	WHEELCHAIR MGMT EA 15 MIN	MD: PA req age=>21 after 4/yr	No	No	Not Cov	No		No	No
97545	WORK HARDENING CONDITIONING 1ST 2 HR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
97546	WORK HARDENING CONDITIONING EACH HOUR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
97597	DEBRIDEMENT OPEN WOUND 20 SQ CM OR LESS		No	No	Not Cov	No		No	No
97598	DEBRIDEMENT OPEN WOUND EACH ADDITIONAL 20 SQ CM		No	No	Not Cov	No		No	No

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			Outpatient		ASC	Office Setting			
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97602	RMVL DEVITAL TISS N-SLCTV DBRDMT W O ANES 1 SESS		No	No	Not Cov	No		Not Cov	No
97605	NEGATIVE PRESSURE WOUND THERAPY DME UNDER EQ 50 SQ CM		No	No	Not Cov	No		No	No
97606	NEGATIVE PRESSURE WOUND THERAPY DME OVER 50 SQ CM		No	No	Not Cov	No		No	No
97607	NEG PRESSURE WOUND THERAPY NON DME UNDER EQ 50 SQ CM		No	No	Not Cov	No		No	No
97608	NEG PRESSURE WOUND THERAPY NON DME OVER 50 SQ CM		No	No	Not Cov	No		No	No
97610	LOW FREQUENCY NON-THERMAL ULTRASOUND PER DAY		Not Cov	Not Cov	Not Cov	Not Cov		No	No
97750	PHYSICAL PERFORMANCE TEST MEAS W REPRT EA 15 MIN	MD: PA req age=>21 after first 24 visits, Not Cov for Naturopath; MP: 25 combined therapy limit	No	No	Not Cov	No		No	No
97755	ASSTV TECHNOL ASSMT DIR CNTCT W REPRT EA 15 MIN		No	No	Not Cov	No		No	No
97760	ORTHOTICS MGMT AND TRAINJ INITIAL ENCTR EA 15 MINS	MD: PA req age=>21 after first 24 visits, Not Cov for Naturopath; MP: 25 combined therapy limit	No	No	Not Cov	No		No	No
97761	PROSTHETICS TRAINING INITIAL ENCTR EA 15 MINS	MD: PA req age=>21 after first 24 visits, Not Cov for Naturopath; MP: 25 combined therapy limit	No	No	Not Cov	No		No	No
97763	ORTHOTICS PROSTH MGMT AND TRAINJ SBSQ ENCTR 15 MIN	MD: PA req age=>21 after first 24 visits, Not Cov for Naturopath; MP: 25 combined therapy limit	Yes	Yes	Not Cov	Yes		Yes	Yes
97799	UNLISTED PHYSICAL MEDICINE REHAB SERVICE PROC		Yes	Yes	Not Cov	Yes		Yes	Yes
97802	MEDICAL NUTRITION ASSMT AND IVNTJ INDIV EACH 15 MI	MD: Covered age < 21	No	No	Not Cov	No		No	Not Cov
97803	MEDICAL NUTRITION RE-ASSMT AND IVNTJ INDIV EA 15 M	MD: Covered age < 21	No	No	Not Cov	No		No	Not Cov
97804	MEDICAL NUTRITION THERAPY GRP2 INDIV EA 30 MI	MD: Covered age < 21	No	No	Not Cov	No		No	Not Cov
97810	ACUPUNCTURE 1 OR GRT NDLES W O ELEC STIMJ INIT 15 MIN	MP: limit 12 No PA	Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Yes
97811	ACUPUNCTURE 1 OR GRT NDLS W O ELEC STIMJ EA 15 MIN	MP: limit 12 No PA	Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Yes
97813	ACUPUNCTURE 1 OR GRT NDLS W ELEC STIMJ 1ST 15 MIN	MP: limit 12 No PA	Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Yes
97814	ACUP 1 OR GRT NDLS W ELEC STIMJ EA 15 MIN W RE-INSJ	MP: limit 12 No PA	Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Yes
98925	OSTEOPATHIC MANIPULATIVE TX 1-2 BODY REGIONS		No	No	Not Cov	No		No	No
98926	OSTEOPATHIC MANIPULATIVE TX 3-4 BODY REGIONS		No	No	Not Cov	No		No	No
98927	OSTEOPATHIC MANIPULATIVE TX 5-6 BODY REGIONS		No	No	Not Cov	No		No	No
98928	OSTEOPATHIC MANIPULATIVE TX 7-8 BODY REGIONS		No	No	Not Cov	No		No	No
98929	OSTEOPATHIC MANIPULATIVE TX 9-10 BODY REGIONS		No	No	Not Cov	No		No	No
98940	CHIROPRACTIC MANIPULATIVE TX SPINAL 1-2 REGIONS	Covered age < 21	No	No	Not Cov	No		No	No
98941	CHIROPRACTIC MANIPULATIVE TX SPINAL 3-4 REGIONS	Covered age < 21	No	No	Not Cov	No		No	No

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98942	CHIROPRACTIC MANIPULATIVE TX SPINAL 5 REGIONS	Covered age < 21	No	No	Not Cov	No		No	No
98943	CHIROPRACTIC MANIPLTV TX EXTRASPINAL 1 OR GRT REGION	Covered age < 21	Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
98960	EDUCATION AND TRAINING SELF-MGMT NONPHYS 1 PT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
98961	EDUCATION AND TRAINING SELF-MGMT NONPHYS 2-4 PTS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
98962	EDUCATION AND TRAINING SELF-MGMT NONPHYS 5-8 PTS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
98966	NONPHYSICIAN TELEPHONE ASSESSMENT 5-10 MIN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
98967	NONPHYSICIAN TELEPHONE ASSESSMENT 11-20 MIN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
98968	NONPHYSICIAN TELEPHONE ASSESSMENT 21-30 MIN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
98969	NONPHYSICIAN ONLINE ASSESSMENT AND MANAGEMENT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
99000	HANDLG AND OR CONVEY OF SPEC FOR TR OFFICE TO LAB		Not Cov	No	Not Cov	No		Not Cov	No
99001	HANDLG AND OR CONVEY OF SPEC FOR TR FROM PT TO LAB		Not Cov	No	Not Cov	No		Not Cov	No
99002	HANDLE CONVEY ANY OTH SVC DEVICE FIT PHYS QHP		Not Cov	No	Not Cov	No		Not Cov	No
99024	POSTOP FOLLOW UP VISIT RELATED TO ORIGINAL PX		Not Cov	No	Not Cov	No		Not Cov	No
99026	HOSPITAL MANDATED CALL SERVICE IN-HOSPITAL EA HR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
99027	HOSPITAL MANDATED CALL SVC OUT-OF-HOSPITAL EA HR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
99050	SERVICES PROVIDED OFFICE OTH THN REG SCHED HOURS		Not Cov	No	Not Cov	No		Not Cov	No
99051	SVC PRV OFFICE REG SCHEDD EVN WKEND HOLIDAY HRS		Not Cov	No	Not Cov	No		Not Cov	No
99053	SERVICES PROVIDED BTW 10 PM AND 8 AM AT 24-HR FACI		Not Cov	No	Not Cov	No		Not Cov	No
99056	SVC TYPICAL PRV OFFICE PRV OUT OFFICE REQUEST PT		Not Cov	No	Not Cov	No		Not Cov	No
99058	SVC PRV EMER BASIS IN OFFICE DISRUPTING SVCS		Not Cov	No	Not Cov	No		Not Cov	No
99060	SVC PRV EMER OUT OFFICE DISRUPTS OFFICE SVC		Not Cov	No	Not Cov	No		Not Cov	No
99070	SUPPLIES AND MATERIALS ABOVE BEYOND PROV BY PHYS QHP		Not Cov	No	Not Cov	No		Not Cov	No
99071	EDUCATIONAL SUPPLIES PRV BY THE PHYS AT COST		Not Cov	No	Not Cov	No		Not Cov	No
99075	MEDICAL TESTIMONY		Not Cov	No	Not Cov	No	No	Not Cov	No
99078	PHYS QHP EDUCATION SVCS RENDERED PTS GRP SETTING		Not Cov	No	Not Cov	No		Not Cov	No
99080	SPEC REPORTS OVER USUAL MED COMUNICAJ STAND RPRTG		Not Cov	No	Not Cov	No		Not Cov	No
99082	UNUSUAL TRAVEL		Not Cov	No	Not Cov	No		No	No
99091	COLLJ AND INTERPJ PHYS QHP PHYSIO COMPUTR DATA 30 MI		Not Cov	Not Cov	Not Cov	Not Cov		No	No
99100	ANESTHESIA EXTREME AGE PATIENT UNDER 1 YR OR LESS		Not Cov	No	Not Cov	No		Not Cov	No

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99116	ANES COMPLICJ UTILIZATION TOTAL BODY HYPOTHERMIA		Not Cov	No	Not Cov	No		Not Cov	No
99135	ANES COMPLICJ UTILIZATION CONTROLLED HYPOTENSION		Not Cov	No	Not Cov	No		Not Cov	No
99140	ANES COMPLICJ EMERGENCY CONDITIONS SPECIFY		Not Cov	No	Not Cov	No		Not Cov	No
99151	MOD SED SAME PHYS QHP INITIAL 15 MINS UNDER 5 YRS		No	No	Not Cov	No		No	No
99152	MOD SED SAME PHYS QHP INITIAL 15 MINS 5 OR GRT YRS		No	No	Not Cov	No		No	No
99153	MOD SED SAME PHYS QHP EACH ADDL 15 MINS		No	No	Not Cov	No		No	No
99155	MOD SED OTHER PHYS QHP INITIAL 15 MINS UNDER 5 YRS		No	No	Not Cov	No		No	No
99156	MOD SED OTHER PHYS QHP INITIAL 15 MINS 5 OR GRT YRS		No	No	Not Cov	No		No	No
99157	MOD SED OTHER PHYS QHP EACH ADDL 15 MINS		No	No	Not Cov	No		No	No
99170	ANOGENITAL XM MAGNIFY CHILD SUSPECT TRAUMA W IMG		No	No	Not Cov	No		No	No
99172	VISUAL FUNCT SCRNG AUTO SEMI-AUTO BI QUAN DETERM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
99173	SCREENING TEST VISUAL ACUITY QUANTITATIVE BILAT		Not Cov	No	Not Cov	No		Not Cov	No
99174	INSTRUMENT BASED OCULAR SCR BI W RMT ANAL AND RPT		Not Cov	No	Not Cov	No		Not Cov	No
99175	IPECAC SIMILAR ADMN EMESIS AND OBS STOMACH EMPTIED		No	No	Not Cov	No		No	No
99177	INSTRUMENT BASED OCULAR SCR BI W ONSITE ANALYSIS		No	No	Not Cov	No		Not Cov	No
99183	PHYS QHP ATTN AND SUPVJ HYPRBARIC OXYGEN TX SESSION		Not Cov	Yes	Not Cov	Yes		Yes	Yes
99184	INITIAT SELECTIVE HEAD BODY HYPOTHERMIA NEONATE		Not Cov	Not Cov	Not Cov	Not Cov		No	No
99188	APPLICATION TOPICAL FLUORIDE VARNISH BY PHS QHP		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
99190	ASSEMBLY AND OPERJ PUMP OXYGENATOR HEAT EXCH EA HR		Not Cov	No	Not Cov	No		No	No
99191	ASSEMBLY AND OPERJ PUMP OXYGENATOR HEAT EXCH 45 MI		Not Cov	No	Not Cov	No		No	No
99192	ASSEMBLY AND OPERJ PUMP OXYGENATOR HEAT EXCH 30 MI		Not Cov	No	Not Cov	No		No	No
99195	PHLEBOTOMY THERAPEUTIC SEPARATE PROCEDURE		No	No	Not Cov	No		No	No
99199	UNLISTED SPECIAL SERVICE PROCEDURE REPORT		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
99201	OFFICE OUTPATIENT NEW 10 MINUTES	BHSO Cov for Beh Hlth Spec w Beh Hlth Dx	No	No	Not Cov	No	No	No	No
99202	OFFICE OUTPATIENT NEW 20 MINUTES	BHSO Cov for Beh Hlth Spec w Beh Hlth Dx	No	No	Not Cov	No	No	No	No
99203	OFFICE OUTPATIENT NEW 30 MINUTES	BHSO Cov for Beh Hlth Spec w Beh Hlth Dx	No	No	Not Cov	No	No	No	No

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99204	OFFICE OUTPATIENT NEW 45 MINUTES	BHSO Cov for Beh Hlth Spec w Beh Hlth Dx	No	No	Not Cov	No	No	No	
99205	OFFICE OUTPATIENT NEW 60 MINUTES	BHSO Cov for Beh Hlth Spec w Beh Hlth Dx	No	No	Not Cov	No	No	No	
99211	OFFICE OUTPATIENT VISIT 5 MINUTES	BHSO Cov for Beh Hlth Spec w Beh Hlth Dx	No	No	Not Cov	No	No	No	
99212	OFFICE OUTPATIENT VISIT 10 MINUTES	BHSO Cov for Beh Hlth Spec w Beh Hlth Dx	No	No	Not Cov	No	No	No	
99213	OFFICE OUTPATIENT VISIT 15 MINUTES	BHSO Cov for Beh Hlth Spec w Beh Hlth Dx	No	No	Not Cov	No	No	No	
99214	OFFICE OUTPATIENT VISIT 25 MINUTES	BHSO Cov for Beh Hlth Spec w Beh Hlth Dx	No	No	Not Cov	No	No	No	
99215	OFFICE OUTPATIENT VISIT 40 MINUTES	BHSO Cov for Beh Hlth Spec w Beh Hlth Dx	No	No	Not Cov	No	No	No	
99217	OBSERVATION CARE DISCHARGE MANAGEMENT		Not Cov	No	Not Cov	No	No	No	
99218	INITIAL OBSERVATION CARE DAY 30 MINUTES		Not Cov	No	Not Cov	No	No	No	
99219	INITIAL OBSERVATION CARE DAY 50 MINUTES		Not Cov	No	Not Cov	No	No	No	
99220	INITIAL OBSERVATION CARE DAY 70 MINUTES		Not Cov	No	Not Cov	No	No	No	
99221	INITIAL HOSPITAL CARE DAY 30 MINUTES		Not Cov	No	Not Cov	No	No	No	
99222	INITIAL HOSPITAL CARE DAY 50 MINUTES		Not Cov	No	Not Cov	No	No	No	
99223	INITIAL HOSPITAL CARE DAY 70 MINUTES		Not Cov	No	Not Cov	No	No	No	
99224	SBSQ OBSERVATION CARE DAY 15 MINUTES		Not Cov	No	Not Cov	No	No	No	
99225	SBSQ OBSERVATION CARE DAY 25 MINUTES		Not Cov	No	Not Cov	No	No	No	
99226	SBSQ OBSERVATION CARE DAY 35 MINUTES		Not Cov	No	Not Cov	No	No	No	
99231	SBSQ HOSPITAL CARE DAY 15 MINUTES		Not Cov	No	Not Cov	No	No	No	
99232	SBSQ HOSPITAL CARE DAY 25 MINUTES		Not Cov	No	Not Cov	No	No	No	
99233	SBSQ HOSPITAL CARE DAY 35 MINUTES		Not Cov	No	Not Cov	No	No	No	
99234	OBSERVATION INPATIENT HOSPITAL CARE 40 MINUTES		Not Cov	No	Not Cov	No	No	No	
99235	OBSERVATION INPATIENT HOSPITAL CARE 50 MINUTES		Not Cov	No	Not Cov	No	No	No	
99236	OBSERVATION INPATIENT HOSPITAL CARE 55 MINUTES		Not Cov	No	Not Cov	No	No	No	
99238	HOSPITAL DISCHARGE DAY MANAGEMENT 30 MIN OR LESS		Not Cov	No	Not Cov	No	No	No	
99239	HOSPITAL DISCHARGE DAY MANAGEMENT OVER 30 MIN		Not Cov	No	Not Cov	No	No	No	
99241	OFFICE CONSULTATION NEW ESTAB PATIENT 15 MIN		Not Cov	No	Not Cov	No	Not Cov	No	
99242	OFFICE CONSULTATION NEW ESTAB PATIENT 30 MIN		Not Cov	No	Not Cov	No	Not Cov	No	
99243	OFFICE CONSULTATION NEW ESTAB PATIENT 40 MIN		Not Cov	No	Not Cov	No	Not Cov	No	
99244	OFFICE CONSULTATION NEW ESTAB PATIENT 60 MIN		Not Cov	No	Not Cov	No	Not Cov	No	
99245	OFFICE CONSULTATION NEW ESTAB PATIENT 80 MIN		Not Cov	No	Not Cov	No	Not Cov	No	
99251	INITIAL INPATIENT CONSULT NEW ESTAB PT 20 MIN		Not Cov	No	Not Cov	No	Not Cov	No	
99252	INITIAL INPATIENT CONSULT NEW ESTAB PT 40 MIN		Not Cov	No	Not Cov	No	Not Cov	No	
99253	INITIAL INPATIENT CONSULT NEW ESTAB PT 55 MIN		Not Cov	No	Not Cov	No	Not Cov	No	
99254	INITIAL INPATIENT CONSULT NEW ESTAB PT 80 MIN		Not Cov	No	Not Cov	No	Not Cov	No	
99255	INITIAL INPATIENT CONSULT NEW ESTAB PT 110 MIN		Not Cov	No	Not Cov	No	Not Cov	No	
99281	EMERGENCY DEPARTMENT VISIT LIMITED MINOR PROB		No	No	Not Cov	No	No	No	

This prior authorization guide applies to Medicaid, Medicare, and Marketplace.

DOS Effective 10/1/19; Posted 10/30/19

All Inpatient services require prior authorization

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*** All Medicare services subject to the limitations in the CMS billing guide and fee schedules at <https://www.cms.gov/> ***

Code	Code Description	Comments	Apple Health & IMC Medical				IMC / BHSO (Mental Health covered svcs)	Medicare	Market Place
			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
99282	EMERGENCY DEPARTMENT VISIT LOW MODER SEVERITY		No	No	Not Cov	No		No	No
99283	EMERGENCY DEPARTMENT VISIT MODERATE SEVERITY		No	No	Not Cov	No		No	No
99284	EMERGENCY DEPARTMENT VISIT HIGH URGENT SEVERITY		No	No	Not Cov	No		No	No
99285	EMERGENCY DEPT VISIT HIGH SEVERITY AND THREAT FUNCJ		No	No	Not Cov	No		No	No
99288	PHYS QHP DIRECTION EMERGENCY MEDICAL SYSTEMS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
99291	CRITICAL CARE ILL INJURED PATIENT INIT 30-74 MIN		No	No	Not Cov	No		No	No
99292	CRITICAL CARE ILL INJURED PATIENT ADDL 30 MIN		No	No	Not Cov	No		No	No
99304	INITIAL NURSING FACILITY CARE DAY 25 MINUTES		Not Cov	No	Not Cov	No	No	No	No
99305	INITIAL NURSING FACILITY CARE DAY 35 MINUTES		Not Cov	No	Not Cov	No	No	No	No
99306	INITIAL NURSING FACILITY CARE DAY 45 MINUTES		Not Cov	No	Not Cov	No	No	No	No
99307	SBSQ NURSING FACILITY CARE DAY E M STABLE 10 MIN		Not Cov	No	Not Cov	No	No	No	No
99308	SBSQ NURSING FACIL CARE DAY MINOR COMPLJ 15 MIN		Not Cov	No	Not Cov	No	No	No	No
99309	SBSQ NURSING FACIL CARE DAY NEW PROBLEM 25 MIN		Not Cov	No	Not Cov	No	No	No	No
99310	SBSQ NURS FACIL CARE DAY UNSTABL NEW PROB 35 MIN		Not Cov	No	Not Cov	No	No	No	No
99315	NURSING FACILITY DISCHARGE MANAGEMENT 30 MINUTES		Not Cov	No	Not Cov	No		No	No
99316	NURSING FACILITY DISCHARGE MANAGEMENT 30 MINUTES		Not Cov	No	Not Cov	No		No	No
99318	E M ANNUAL NURSING FACILITY ASSESS STABLE 30 MIN		Not Cov	Not Cov	Not Cov	Not Cov		No	No
99324	DOMICIL REST HOME NEW PT VISIT LOW SEVER 20 MIN		Not Cov	No	Not Cov	No	No	No	No
99325	DOMICIL REST HOME NEW PT VISIT MOD SEVER 30 MIN		Not Cov	No	Not Cov	No	No	No	No
99326	DOMICIL REST HOME NEW PT HI-MOD SEVER 45 MINUTES		Not Cov	No	Not Cov	No	No	No	No
99327	DOMICIL REST HOME NEW PT VISIT HI SEVER 60 MIN		Not Cov	No	Not Cov	No	No	No	No
99328	DOM R-HOME E M NEW PT SIGNIF NEW PROB 75 MINUTES		Not Cov	No	Not Cov	No	No	No	No
99334	DOM R-HOME E M EST PT SELF-LMTD MINOR 15 MINUTES		Not Cov	No	Not Cov	No	No	No	No
99335	DOM R-HOME E M EST PT LW MOD SEVERITY 25 MINUTES		Not Cov	No	Not Cov	No	No	No	No
99336	DOM R-HOME E M EST PT MOD HI SEVERITY 40 MINUTES		Not Cov	No	Not Cov	No	No	No	No
99337	DOM R-HOME E M EST PT SIGNIF NEW PROB 60 MINUTES		Not Cov	No	Not Cov	No	No	No	No
99339	INDIV PHYS SUPVJ HOME DOM R-HOME MO 15-29 MIN		Not Cov	No	Not Cov	No		Not Cov	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
99340	INDIV PHYS SUPVJ HOME DOM R-HOME MO 30 MIN OR GRT		Not Cov	No	Not Cov	No		Not Cov	No
99341	HOME VISIT NEW PATIENT LOW SEVERITY 20 MINUTES		Not Cov	No	Not Cov	No	No	No	No
99342	HOME VISIT NEW PATIENT MOD SEVERITY 30 MINUTES		Not Cov	No	Not Cov	No	No	No	No
99343	HOME VST NEW PATIENT MOD-HI SEVERITY 45 MINUTES		Not Cov	No	Not Cov	No	No	No	No
99344	HOME VISIT NEW PATIENT HI SEVERITY 60 MINUTES		Not Cov	No	Not Cov	No	No	No	No
99345	HOME VISIT NEW PT UNSTABL SIGNIF NEW PROB 75 MIN		Not Cov	No	Not Cov	No	No	No	No
99347	HOME VISIT EST PT SELF LIMITED MINOR 15 MINUTES		Not Cov	No	Not Cov	No	No	No	No
99348	HOME VISIT EST PT LOW-MOD SEVERITY 25 MINUTES		Not Cov	No	Not Cov	No	No	No	No
99349	HOME VISIT EST PT MOD-HI SEVERITY 40 MINUTES		Not Cov	No	Not Cov	No	No	No	No
99350	HOME VST EST PT UNSTABLE SIGNIF NEW PROB 60 MINS		Not Cov	No	Not Cov	No	No	No	No
99354	PROLNG E AND M PSYCTX SVC OFFICE O P DIR CON 1ST HR		No	No	Not Cov	No	No	No	No
99355	PROLNG E AND M PSYCTX SVC OFFICE O P DIR CON ADDL 30		No	No	Not Cov	No	No	No	No
99356	PROLONGED SERVICE I P REQ UNIT FLOOR TIME 1ST HR		Not Cov	No	Not Cov	No	No	No	No
99357	PROLONGED SVC I P REQ UNIT FLOOR TIME EA 30 MIN		Not Cov	No	Not Cov	No	No	No	No
99358	PROLNG E M SVC BEFORE AND AFTER DIR PT CARE 1ST HR		Not Cov	Not Cov	Not Cov	Not Cov		No	No
99359	PROLNG E M BEFORE AND AFTER DIR CARE EA 30 MINUTES		Not Cov	Not Cov	Not Cov	Not Cov		No	No
99360	PHYS STANDBY SVC PROLNG PHYS ATTN EA 30 MINUTES		Not Cov	No	Not Cov	No		Not Cov	No
99366	TEAM CONFERENCE FACE-TO-FACE NONPHYSICIAN	ABA Cov COE	No	No	Not Cov	No		Not Cov	No
99367	TEAM CONFERENCE NON-FACE-TO-FACE PHYSICIAN		No	No	Not Cov	No		Not Cov	No
99368	TEAM CONFERENCE NON-FACE-TO-FACE NONPHYSICIAN	ABA Cov COE	No	No	Not Cov	No		Not Cov	No
99374	SUPVJ PT HOME HEALTH AGENCY MO 15-29 MINUTES		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
99375	SUPERVISION PT HOME HEALTH AGENCY MONTH 30 MIN OR GRT		Not Cov	No	Not Cov	No		Not Cov	No
99377	SUPERVISION HOSPICE PATIENT MONTH 15-29 MIN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
99378	SUPERVISION HOSPICE PATIENT MONTH 30 MINUTES OR GRT		Not Cov	No	Not Cov	No		Not Cov	No
99379	SUPERVISION NURS FACILITY PATIENT MO 15-29 MIN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
99380	SUPERVISION NURS FACILITY PATIENT MONTH 30 MIN OR GRT		Not Cov	No	Not Cov	No		Not Cov	No
99381	INITIAL PREVENTIVE MEDICINE NEW PATIENT UNDER 1YEAR		Not Cov	No	Not Cov	No		Not Cov	No
99382	INITIAL PREVENTIVE MEDICINE NEW PT AGE 1-4 YRS		Not Cov	No	Not Cov	No		Not Cov	No
99383	INITIAL PREVENTIVE MEDICINE NEW PT AGE 5-11 YRS		Not Cov	No	Not Cov	No		Not Cov	No
99384	INITIAL PREVENTIVE MEDICINE NEW PT AGE 12-17 YR		Not Cov	No	Not Cov	No		Not Cov	No
99385	INITIAL PREVENTIVE MEDICINE NEW PT AGE 18-39YRS		Not Cov	No	Not Cov	No		Not Cov	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
99386	INITIAL PREVENTIVE MEDICINE NEW PATIENT 40-64YRS		Not Cov	No	Not Cov	No		Not Cov	No
99387	INITIAL PREVENTIVE MEDICINE NEW PATIENT 65YRS AND OVER		Not Cov	No	Not Cov	No		Not Cov	No
99391	PERIODIC PREVENTIVE MED ESTABLISHED PATIENT UNDER 1Y		Not Cov	No	Not Cov	No		Not Cov	No
99392	PERIODIC PREVENTIVE MED EST PATIENT 1-4YRS		Not Cov	No	Not Cov	No		Not Cov	No
99393	PERIODIC PREVENTIVE MED EST PATIENT 5-11YRS		Not Cov	No	Not Cov	No		Not Cov	No
99394	PERIODIC PREVENTIVE MED EST PATIENT 12-17YRS		Not Cov	No	Not Cov	No		Not Cov	No
99395	PERIODIC PREVENTIVE MED EST PATIENT 18-39 YRS		Not Cov	No	Not Cov	No		Not Cov	No
99396	PERIODIC PREVENTIVE MED EST PATIENT 40-64YRS		Not Cov	No	Not Cov	No		Not Cov	No
99397	PERIODIC PREVENTIVE MED EST PATIENT 65YRS AND OLDER		Not Cov	No	Not Cov	No		Not Cov	No
99401	PREVENT MED COUNSEL AND RISK FACTOR REDJ SPX 15 MIN		Not Cov	No	Not Cov	No		Not Cov	No
99402	PREVENT MED COUNSEL AND RISK FACTOR REDJ SPX 30 MIN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
99403	PREVENT MED COUNSEL AND RISK FACTOR REDJ SPX 45 MIN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
99404	PREVENT MED COUNSEL AND RISK FACTOR REDJ SPX 60 MIN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
99406	TOBACCO USE CESSATION INTERMEDIATE 3-10 MINUTES		Not Cov	Not Cov	Not Cov	Not Cov		No	No
99407	TOBACCO USE CESSATION INTENSIVE OVER 10 MINUTES		Not Cov	No	Not Cov	No		No	No
99408	ALCOHOL SUBSTANCE SCREEN AND INTERVEN 15-30 MIN		No	No	Not Cov	No	No	Not Cov	No
99409	ALCOHOL SUBSTANCE SCREEN AND INTERVENTION OVER 30 MIN		No	No	Not Cov	No	No	Not Cov	No
99411	PREV MED COUNSEL AND RISK FACTOR REDJ GRP SPX 30 M		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
99412	PREV MED COUNSEL AND RISK FACTOR REDJ GRP SPX 60 M		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
99415	PROLNG CLINCL STAFF SVC DURING O P E M 1ST HR		Not Cov	Not Cov	Not Cov	Not Cov		No	No
99416	PROLNG CLINCL STAFF SVC DURING O P E M EA 30 MIN		Not Cov	Not Cov	Not Cov	Not Cov		No	No
99429	UNLISTED PREVENTIVE MEDICINE SERVICE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Yes
99441	PHYS QHP TELEPHONE EVALUATION 5-10 MIN		Not Cov	No	Not Cov	No		Not Cov	No
99442	PHYS QHP TELEPHONE EVALUATION 11-20 MIN		Not Cov	No	Not Cov	No		Not Cov	No
99443	PHYS QHP TELEPHONE EVALUATION 21-30 MIN		Not Cov	No	Not Cov	No		Not Cov	No
99444	PHYS QHP ONLINE EVALUATION AND MANAGEMENT SERVICE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
99446	INTERPROF PHONE INTERNET ASSESS MANAGE 5-10		No	No	Not Cov	No		No	Not Cov
99447	INTERPROF PHONE INTERNET ASSESS MANAGE 11-20		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
99448	INTERPROF PHONE INTERNET ASSESS MANAGE 21-30		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
99449	INTERPROF PHONE INTERNET ASSESS MANAGE 31 OR GRT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
99450	BASIC LIFE AND OR DISABILITY EXAMINATION		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
99451	NTRPROF PHONE NTRNET EHR ASSMT AND MGMT 5 OR GRT MIN		Not Cov	Not Cov	Not Cov	Not Cov		No	No
99452	NTRPROF PHONE NTRNET EHR REFERRAL SVC 30 MIN		Not Cov	Not Cov	Not Cov	Not Cov		No	No
99453	REM MNTR PHYSIOL PARAM 1ST SET UP PT EDUCAJ EQP		Not Cov	Not Cov	Not Cov	Not Cov		No	No
99454	REM MNTR PHYSIOL PARAM 1ST DEV SUPPLY EA 30 D		Not Cov	Not Cov	Not Cov	Not Cov		No	No
99455	WORK RELATED MED DBLT XM TREATING PHYS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
99456	WORK RELATED MED DBLT XM OTH THN TREATING PHYS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
99457	REMOTE PHYSIOLOGIC MONITORING 20 MIN PLUS PER MONTH		Not Cov	Not Cov	Not Cov	Not Cov		No	No
99460	1ST HOSP BIRTHING CENTER CARE PER DAY NML NB		Not Cov	No	Not Cov	No		No	No
99461	1ST CARE PR DAY NML NB XCPT HOSP BIRTHING CENTER		Not Cov	No	Not Cov	No		No	No
99462	SUBQ HOSPITAL CARE PER DAY E M NORMAL NEWBORN		Not Cov	No	Not Cov	No		No	No
99463	1ST HOSP BIRTHING CENTER NB ADMIT AND DSCHG SM DAT		Not Cov	No	Not Cov	No		No	No
99464	ATTN AT DELIVERY 1ST STABILIZATION OF NEWBORN		No	No	Not Cov	No		No	No
99465	DELIVERY BIRTHING ROOM RESUSCITATION		Not Cov	No	Not Cov	No		No	No
99466	CRITICAL CARE INTERFACILITY TRANSPORT 30-74 MIN		No	No	Not Cov	No		No	No
99467	CRITICAL CARE INTERFACILITY TRANSPORT EA 30 MIN		No	No	Not Cov	No		No	No
99468	1ST INPATIENT CRITICAL CARE PR DAY AGE 28 DAYS OR LESS		Not Cov	No	Not Cov	No		No	No
99469	SUBQ I P CRITICAL CARE PR DAY AGE 28 DAYS OR LESS		Not Cov	No	Not Cov	No		No	No
99471	INITIAL PED CRITICAL CARE 29 DAYS THRU 24 MONTHS		Not Cov	No	Not Cov	No		No	No
99472	SUBSQ PED CRITICAL CARE 29 DAYS THRU 24 MO		Not Cov	No	Not Cov	No		No	No
99475	INITIAL PED CRITICAL CARE 2 THRU 5 YEARS		Not Cov	No	Not Cov	No		No	No
99476	SUBSEQUENT PED CRITICAL CARE 2 THRU 5 YEARS		Not Cov	No	Not Cov	No		No	No
99477	INITIAL HOSP NEONATE 28 D OR LESS NOT CRITICALLY ILL		Not Cov	No	Not Cov	No		No	No
99478	SUBSEQUENT INTENSIVE CARE INFANT UNDER 1500 GRAMS		Not Cov	No	Not Cov	No		No	No
99479	SUBSEQUENT INTENSIVE CARE INFANT 1500-2500 GRAMS		Not Cov	No	Not Cov	No		No	No
99480	SUBSEQUENT INTENSIVE CARE INFANT 2501-5000 GRAMS		Not Cov	No	Not Cov	No		No	No
99483	ASSMT AND CARE PLANNING PT W COGNITIVE IMPAIRMENT		Not Cov	Not Cov	Not Cov	Not Cov		No	No
99484	CARE MGMT SERVICES BEHAVIORAL HLTH COND 20 MINS		Not Cov	Not Cov	Not Cov	Not Cov		No	No
99485	SUPERVISION INTERFACILITY TRANSPORT INIT 30 MIN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
99486	SUPERVISION INTERFACILITY TRANSPORT ADDL 30 MIN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
99487	CMPLX CHRON CARE MGMT W O PT VST 1ST HR PER MO		Not Cov	Not Cov	Not Cov	Not Cov		No	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
99489	CMPLX CHRON CARE MGMT EA ADDL 30 MIN PER MONTH		Not Cov	Not Cov	Not Cov	Not Cov		No	No
99490	CHRON CARE MANAGEMENT SRVC 20 MIN PER MONTH		Not Cov	Not Cov	Not Cov	Not Cov		No	No
99491	CHRONIC CARE MGMT SVC AT LEAST 30 MIN PER MONTH		Not Cov	Not Cov	Not Cov	Not Cov		No	No
99492	1ST PSYCHIATRIC COLLAB CARE MGMT 1ST 70 MINS		No	No	Not Cov	No		No	No
99493	SBSQ PSYCHIATRIC COLLAB CARE MGMT 1ST 60 MINS		No	No	Not Cov	No		No	No
99494	1ST SBSQ PSYCH COLLAB CARE MGMT EA ADDL 30 MINS		No	No	Not Cov	No		No	No
99495	TRANSITIONAL CARE MANAGE SRVC 14 DAY DISCHARGE		Not Cov	Not Cov	Not Cov	Not Cov		No	No
99496	TRANSITIONAL CARE MANAGE SRVC 7 DAY DISCHARGE		Not Cov	Not Cov	Not Cov	Not Cov		No	No
99497	ADVANCE CARE PLANNING FIRST 30 MINS		No	No	Not Cov	No		No	No
99498	ADVANCE CARE PLANNING EA ADDL 30 MINS		No	No	Not Cov	No		No	No
99499	UNLISTED EVALUATION AND MANAGEMENT SERVICE	No PA for 99499-HE	Not Cov	Yes	Not Cov	Yes		Yes	Not Cov
99500	HOME VISIT PRENATAL MONITORING AND ASSESSMENT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
99501	HOME VISIT POSTNATAL ASSMT AND F-UP CARE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
99502	HOME VISIT NEWBORN CARE AND ASSESSMENT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
99503	HOME VISIT RESPIRATORY THERAPY CARE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
99504	HOME VISIT MECHANICAL VENTILATION CARE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
99505	HOME VISIT STOMA CARE AND MAINT CLST AND CSTOST		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
99506	HOME VISIT INTRAMUSCULAR INJECTIONS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
99507	HOME VISIT CARE AND MAINT CATH		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
99509	HOME VISIT ASSISTANCE DAILY LIV AND PRSONAL CARE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
99510	HOME VISIT INDIV FAM MARRIAGE COUNSELING		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
99511	HOME VISIT FECAL IMPACTION MGMT AND ENEMA ADMN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
99512	HOME VISIT HEMODIALYSIS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
99600	UNLISTED HOME VISIT SERVICE PROCEDURE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Yes
99601	HOME NFS SPECTY DRUG ADMN PR VST UNDER 2 HR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
99602	HOME NFS SPECTY DRUG ADMN PR VST UNDER 2 HR EA HR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
99605	MEDICATION THERAPY INITIAL 15 MIN NEW PATIENT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
99606	MEDICATION THERAPY INITIAL 15 MIN ESTABLISHED PT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
99607	MEDICATION THERAPY EACH ADDITIONAL 15 MIN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
A0021	AMB SERVICE OUTSIDE STATE PER MILE TRANSPORT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
A0080	NONEMERG TRNSPRT-MILE-VEH VOLUN W NO VESTED INT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
A0090	NONEMERG TRNSPRT-MILE-VEH PROV IND W VESTED INT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
A0100	NONEMERGENCY TRANSPORTATION; TAXI		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
A0110	NONEMERG TRNSPRT AND BUS INTRA- INTERSTATE CARRIER		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
A0120	NONEMERG TRNSPRT: MINI-BUS MTN AREA OTH SYS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
A0130	NONEMERGENCY TRANSPORTATION: WHEELCHAIR VAN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
A0140	NONEMERG TRNSPRT AND AIR TRAVEL INTRA- INTERSTATE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
A0160	NONEMERG TRNSPRT: PER MILE-CASE SOCIAL WORKER		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
A0170	TRANSPORTATION ANCILLARY: PARKING FEES TOLLS OTH		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
A0180	NONEMERG TRANSPORTATION: ANCILLARY: LODGNG-RECIP		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
A0190	NONEMERG TRANSPORTATION: ANCILLARY: MEALS-RECIP		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
A0200	NONEMERG TRANSPORTATION: ANCILLRY: LODGNG-ESCORT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
A0210	NONEMERG TRANSPORTATION: ANCILLARY: MEALS-ESCORT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
A0225	AMB SRVC NEONAT TRNSPRT BASE RATE EMERG 1 WAY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
A0380	BLS MILEAGE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
A0382	BLS ROUTINE DISPOSABLE SUPPLIES		Not Cov	No	Not Cov	No		Not Cov	No
A0384	BLS SPECIALIZED SERVICE DISPBL SUPPLIES; DEFIB		Not Cov	No	Not Cov	No		Not Cov	No
A0390	ALS MILEAGE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
A0392	ALS SPECIALIZED SERVICE DISPBL SUPPLIES; DEFIB		Not Cov	No	Not Cov	No		Not Cov	No
A0394	ALS SPECIALIZED SERVICE DISPBL SPL; IV DRUG TX		Not Cov	No	Not Cov	No		Not Cov	No
A0396	ALS SPCLIZED SERVICE DISPBL SPL; ESOPH INTUBAT		Not Cov	No	Not Cov	No		Not Cov	No
A0398	ALS ROUTINE DISPOSABLE SUPPLIES		Not Cov	No	Not Cov	No		Not Cov	No
A0420	AMBULANCE WAITING TIME ONE-HALF HOUR INCREMENTS		Not Cov	No	Not Cov	No		Not Cov	No
A0422	AMB OXYGEN AND O2 SUPPLIES LIFE SUSTAINING SITUATION		Not Cov	No	Not Cov	No		Not Cov	No
A0424	EXTRA AMBULANCE ATTENDANT GROUND OR AIR ;	Bill through DSHS	Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
A0425	GROUND MILEAGE PER STATUTE MILE	Bill through DSHS	Not Cov	Not Cov	Not Cov	Not Cov		No	No
A0426	AMB SERVICE ALS NONEMERGENCY TRANSPORT LEVEL 1		Not Cov	Not Cov	Not Cov	Not Cov		No	Not Cov
A0427	AMB SERVICE ALS EMERGENCY TRANSPORT LEVEL 1	Bill through DSHS	Not Cov	Not Cov	Not Cov	Not Cov		No	No
A0428	AMBULANCE SERVICE BLS NONEMERGENCY TRANSPORT		Not Cov	Not Cov	Not Cov	Not Cov		No	Not Cov
A0429	AMBULANCE SERVICE BLS EMERGENCY TRANSPORT	Bill through DSHS	Not Cov	Not Cov	Not Cov	Not Cov		No	No
A0430	AMB SERVICE CONVNTION AIR SRVC TRANSPORT 1 WAY	Bill through DSHS	Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
A0431	AMB SERVICE CONVNTION AIR SRVC TRANSPORT 1 WAY	Bill through DSHS	Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
A0432	PARAMED INTRCPT RURL AMB NO BILL 3 PARTY PAYER	Bill through DSHS	Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
A0433	ADVANCED LIFE SUPPORT LEVEL 2	Bill through DSHS	Not Cov	Not Cov	Not Cov	Not Cov		No	No
A0434	SPECIALTY CARE TRANSPORT	Bill through DSHS	Not Cov	Not Cov	Not Cov	Not Cov		No	No
A0435	FIXED WING AIR MILEAGE PER STATUTE MILE	Bill through DSHS	Not Cov	Not Cov	Not Cov	Not Cov		No	No
A0436	ROTARY WING AIR MILEAGE PER STATUTE MILE	Bill through DSHS	Not Cov	Not Cov	Not Cov	Not Cov		No	No

Guide is subject to change at any time. If a member belongs to a group delegated for UM, contact that group for authorization. Claim payment is subject to eligibility and benefits at the time of service. Claim processing edits will apply.

This prior authorization guide applies to Medicaid, Medicare, and Marketplace.

DOS Effective 10/1/19; Posted 10/30/19

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
A0888	NONCOVERED AMBULANCE MILEAGE PER MILE		Not Cov	No	Not Cov	No		Not Cov	Not Cov
A0998	AMBULANCE RESPONSE AND TREATMENT NO TRANSPORT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
A0999	UNLISTED AMBULANCE SERVICE	Bill through DSHS	Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
A4206	SYRINGE WITH NEEDLE STERILE 1 CC OR LESS EACH		Not Cov	No	Not Cov	No		Not Cov	No
A4207	SYRINGE WITH NEEDLE STERILE 2 CC EACH		Not Cov	No	Not Cov	No		Not Cov	No
A4208	SYRINGE WITH NEEDLE STERILE 3 CC EACH		Not Cov	No	Not Cov	No		Not Cov	No
A4209	SYRINGE WITH NEEDLE STERILE 5 CC OR GREATER EACH		Not Cov	No	Not Cov	No		Not Cov	No
A4210	NEEDLE-FREE INJECTION DEVICE EACH		Not Cov	No	Not Cov	No		Not Cov	No
A4211	SUPPLIES FOR SELF-ADMINISTERED INJECTIONS		Not Cov	No	Not Cov	No		Not Cov	No
A4212	NONCORING NEEDLE OR STYLET W WO CATHETER		Not Cov	No	Not Cov	No		No	No
A4213	SYRINGE STERILE 20 CC OR GREATER EACH		Not Cov	No	Not Cov	No		Not Cov	No
A4215	NEEDLE STERILE ANY SIZE EACH		Not Cov	No	Not Cov	No		No	No
A4216	STERIL WATER SALINE AND OR DXT DILUENT FLUSH 10 ML		Not Cov	No	Not Cov	No		No	No
A4217	STERILE WATER SALINE 500 ML		Not Cov	No	Not Cov	No		No	No
A4218	STERILE SALINE WATER METERED DOSE DISPNS 10 ML		No	Not Cov	Not Cov	Not Cov		No	No
A4220	REFILL KIT FOR IMPLANTABLE INFUSION PUMP		No	No	Not Cov	No		Not Cov	No
A4221	SUPPLIES FOR MAINT NON-INS RX INFUS CATH PER WK		Not Cov	No	Not Cov	No		No	No
A4222	INFUS SPL EXT RX INFUS PUMP CASSETTE BAG		Not Cov	No	Not Cov	No		No	No
A4223	INFUS SPL NOT USED W EXT INFUS PUMP CASSETTE BAG		Not Cov	No	Not Cov	No		Not Cov	No
A4224	SUPPLIES MAINTENANCE INSULIN INFUS CATH PER WEEK		No	No	Not Cov	No		No	No
A4225	SPL EXT INSULIN INFUS PUMP SYR TYPE CART ST EA		No	No	Not Cov	No		No	No
A4230	INFUS SET EXT INSULIN PUMP NONNDLE CANNULA TYPE		No	No	Not Cov	No		Not Cov	No
A4231	INFUSION SET EXTERNAL INSULIN PUMP NEEDLE TYPE		No	No	Not Cov	No		Not Cov	No
A4232	SYRINGE W NDLE EXTERNAL INSULIN PUMP STERILE 3CC		Not Cov	No	Not Cov	No		Not Cov	No
A4233	REPL BATT ALKALINE NOT J CELL HOM BG MON OWND PT		Not Cov	No	Not Cov	No		No	No
A4234	REPL BATT ALKALINE J CELL HOM BG MON OWN PT EA		Not Cov	No	Not Cov	No		No	No
A4235	REPL BATT LITHIUM MED NECES HOM BG MON OWN PT EA		Not Cov	No	Not Cov	No		No	No
A4236	REPL BATT SILVER OXIDE HOM BG MON OWND PT EA		Not Cov	No	Not Cov	No		No	No
A4244	ALCOHOL OR PEROXIDE PER PINT		Not Cov	No	Not Cov	No		Not Cov	No
A4245	ALCOHOL WIPES PER BOX		Not Cov	No	Not Cov	No		Not Cov	No
A4246	BETADINE OR PHISOHEX SOLUTION PER PINT		Not Cov	No	Not Cov	No		Not Cov	No
A4247	BETADINE OR IODINE SWABS WIPES PER BOX		Not Cov	No	Not Cov	No		Not Cov	No
A4248	CHLORHEXIDINE CONTAINING ANTISEPTIC 1 ML		No	No	Not Cov	No		No	No
A4250	URINE TEST OR REAGENT STRIPS OR TABLETS		Not Cov	No	Not Cov	No		Not Cov	No
A4252	BLOOD KETONE TEST OR REAGENT STRIP EACH		Not Cov	No	Not Cov	No		Not Cov	No
A4253	BLD GLU TEST REAGT STRIPS HOME BLD GLU MON-50		Not Cov	No	Not Cov	No		No	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
A4255	PLATFORMS HOME BLOOD GLUCOSE MONITOR 50 PER BOX		Not Cov	Not Cov	Not Cov	Not Cov		No	No
A4256	NORMAL LOW AND HIGH CALIBRATOR SOLUTION CHIPS		Not Cov	No	Not Cov	No		No	No
A4257	REPL LENS SHIELD CARTRIDGE LASR SKN PIERC DEVC		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
A4258	SPRING-POWERED DEVICE FOR LANCET EACH		Not Cov	No	Not Cov	No		No	No
A4259	LANCETS PER BOX OF 100		Not Cov	No	Not Cov	No		No	No
A4261	CERVICAL CAP FOR CONTRACEPTIVE USE		Not Cov	No	Not Cov	No		Not Cov	No
A4262	TEMPORARY ABSORBABLE LACRIMAL DUCT IMPLANT EACH		No	Not Cov	Not Cov	Not Cov		Not Cov	No
A4263	PERM LONG-TERM NONDISSOLVABLE LAC DUCT IMPL EA		No	Not Cov	Not Cov	Not Cov		Not Cov	No
A4264	PERM IMPL CONTRACEPTIVE TUBAL OCCL DEV AND DEL SYS		No	No	Not Cov	No		Not Cov	No
A4265	PARAFFIN PER POUND		Not Cov	Not Cov	Not Cov	Not Cov		No	Not Cov
A4266	DIAPHRAGM FOR CONTRACEPTIVE USE		Not Cov	No	Not Cov	No		Not Cov	No
A4267	CONTRACEPTIVE SUPPLY CONDOM MALE EACH		Not Cov	No	Not Cov	No		Not Cov	Not Cov
A4268	CONTRACEPTIVE SUPPLY CONDOM FEMALE EACH		Not Cov	No	Not Cov	No		Not Cov	No
A4269	CONTRACEPTIVE SUPPLY SPERMICIDE EACH		Not Cov	No	Not Cov	No		Not Cov	No
A4270	DISPOSABLE ENDOSCOPE SHEATH EACH		No	Not Cov	Not Cov	Not Cov		Not Cov	No
A4280	ADHES SKN SUPPORT ATTCH USE W EXT BRST PROSTH EA		Not Cov	Not Cov	Not Cov	Not Cov		No	No
A4281	TUBING FOR BREAST PUMP REPLACEMENT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
A4282	ADAPTER FOR BREAST PUMP REPLACEMENT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
A4283	CAP FOR BREAST PUMP BOTTLE REPLACEMENT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
A4284	BREAST SHIELD AND SPLASH PROTECTR W BREAST PUMP REPL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
A4285	POLYCARBONATE BOTTLE USE W BREAST PUMP REPL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
A4286	LOCKING RING FOR BREAST PUMP REPLACEMENT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
A4290	SACRAL NERVE STIMULATION TEST LEAD EACH		Not Cov	Not Cov	Not Cov	Not Cov		No	No
A4300	IMPLANTABLE ACCESS CATHETER EXTERNAL ACCESS		No	Not Cov	Not Cov	Not Cov		Not Cov	No
A4301	IMPLANTABLE ACCESS TOTAL CATHETER PORT RESERVOIR		No	Not Cov	Not Cov	Not Cov		No	No
A4305	DISPBL DRUG DELIV SYSTEM FLOW RATE 50 ML OR GRT - HOUR		No	Not Cov	Not Cov	Not Cov		Not Cov	No
A4306	DISPOSABL DRUG DEL SYS FLOW RATE UNDER 50 ML PER HOUR		No	Not Cov	Not Cov	Not Cov		Not Cov	No
A4310	INSERTION TRAY W O DRAIN BAG AND W O CATHETER		Not Cov	No	Not Cov	No		No	No
A4311	INSRTION TRAY W O DRN BAG W CATH 2-WAY LATEX		Not Cov	No	Not Cov	No		No	No
A4312	INSRTION TRAY W O DRN BAG W CATH 2-WAY SILCON		Not Cov	No	Not Cov	No		No	No
A4313	INSRT TRAY W O DRN BAG W CATH 3-WAY CONT IRRIG		Not Cov	No	Not Cov	No		No	No
A4314	INSRTION TRAY W DRN BAG W CATH 2-WAY LATX W COAT		Not Cov	No	Not Cov	No		No	No
A4315	INSRTION TRAY W DRN BAG W CATH2-WAY ALL SILCON		Not Cov	No	Not Cov	No		No	No

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			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
A4316	INSRTION TRAY W DRN BAG W CATH 3-WAY CONT IRRIG		Not Cov	No	Not Cov	No		No	No
A4320	IRRIGATION TRAY W BULB PISTON SYRINGE ANY PRPOS		Not Cov	No	Not Cov	No		No	No
A4321	THERAPEUTIC AGENT URINARY CATHETER IRRIGATION		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
A4322	IRRIGATION SYRINGE BULB OR PISTON EACH		Not Cov	No	Not Cov	No		No	No
A4326	MALE EXT CATH W INTEGRAL CLCT CHAMB ANY TYPE EA		Not Cov	No	Not Cov	No		No	No
A4327	FE EXTERNAL URIN COLLECTION DEVICE; METAL CUP EA		Not Cov	No	Not Cov	No		No	No
A4328	FE EXTERNAL URINARY COLLECTION DEVICE; POUCH EA		Not Cov	No	Not Cov	No		No	No
A4330	PERIANAL FECAL COLLECTION POUCH W ADHESIVE EACH		Not Cov	No	Not Cov	No		No	No
A4331	EXT DRN TUBING W CNCTOR ADAPTR FOR LEG BAG EA		Not Cov	No	Not Cov	No		No	No
A4332	LUBRICANT INDIVIDUAL STERILE PACKET EACH		Not Cov	No	Not Cov	No		No	No
A4333	URIN CATHETER ANCHR DEVICE ADHES SKIN ATTCH EA		Not Cov	No	Not Cov	No		No	No
A4334	URINARY CATHETER ANCHORING DEVICE LEG STRAP EACH		Not Cov	No	Not Cov	No		No	No
A4335	INCONTINENCE SUPPLY; MISCELLANEOUS		Not Cov	No	Not Cov	No		Not Cov	Not Cov
A4336	INCONTINENCE SUPPLY URETHRAL INSERT ANY TYPE EA		Not Cov	No	Not Cov	No		No	No
A4337	INCONTINENCE SUPPLY RECTAL INSERT ANY TYPE EACH		Not Cov	Not Cov	Not Cov	Not Cov		No	No
A4338	INDWELL CATH; FOLEY TYPE TWO-WAY LATEX W COAT EA		Not Cov	No	Not Cov	No		No	No
A4340	INDWELLING CATHETER; SPECIALTY TYPE EACH		Not Cov	No	Not Cov	No		No	No
A4344	INDWELL CATH FOLEY TYPE TWO-WAY ALL SILCON EA		Not Cov	No	Not Cov	No		No	No
A4346	INDWELL CATH; FOLY TYPE 3-WAY CONT IRRIGATION EA		Not Cov	No	Not Cov	No		No	No
A4349	MALE EXTERNAL CATHETER W WO ADHES DISPOSABLE EA		Not Cov	No	Not Cov	No		No	No
A4351	INTERMIT URIN CATH; STRAIGHT TIP W WO COAT EA		Not Cov	No	Not Cov	No		No	No
A4352	INTERMITTENT URINARY CATHETER; COUDE TIP EACH		Not Cov	No	Not Cov	No		No	No
A4353	INTERMIT URINARY CATHETER W INSERTION SUPPLIES		Not Cov	No	Not Cov	No		No	No
A4354	INSERTION TRAY W DRAIN BAG BUT WITHOUT CATHETER		Not Cov	No	Not Cov	No		No	No
A4355	IRRIG TUBING CONT BLADD IRRIG 3-WAY CATH EA		Not Cov	No	Not Cov	No		No	No
A4356	EXTERNAL URETHRAL CLAMP COMPRESSION DEVICE EACH		Not Cov	No	Not Cov	No		No	No
A4357	BEDSID DRN BAG DAY NGT W WO ANTI-REFLX DEVC EA		Not Cov	No	Not Cov	No		No	No
A4358	URINARY LEG BAG; VINYL W WO TUBE EACH		Not Cov	No	Not Cov	No		No	No
A4360	DISPSBL EXT URETHRAL CLAMP COMP DEV PAD POUCH EA		Not Cov	No	Not Cov	No		Not Cov	No
A4361	OSTOMY FACEPLATE EACH		Not Cov	No	Not Cov	No		No	No
A4362	SKIN BARRIER; SOLID 4 FOUR OR EQUIVALENT; EACH		Not Cov	No	Not Cov	No		No	No
A4363	OSTOMY CLAMP ANY TYPE REPLACEMENT ONLY EACH		Not Cov	No	Not Cov	No		No	No
A4364	ADHESIVE LIQUID OR EQUAL ANY TYPE PER OUNCE		Not Cov	No	Not Cov	No		No	No
A4366	OSTOMY VENT ANY TYPE EACH		Not Cov	No	Not Cov	No		No	No

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			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
A4367	OSTOMY BELT EACH		Not Cov	No	Not Cov	No	No	No	
A4368	OSTOMY FILTER ANY TYPE EACH		Not Cov	No	Not Cov	No	No	No	
A4369	OSTOMY SKIN BARRIER LIQUID PER OZ		Not Cov	No	Not Cov	No	No	No	
A4371	OSTOMY SKIN BARRIER POWDER PER OZ		Not Cov	No	Not Cov	No	No	No	
A4372	OST SKIN BARR SOL 4X4 EQUV STD WEAR CONVXITY EA		Not Cov	No	Not Cov	No	No	No	
A4373	OST SKN BARR W FLNGE W BUILT-IN CONVXITY SZ EA		Not Cov	No	Not Cov	No	No	No	
A4375	OSTOMY POUCH DRAINABLE W FCEPLATE ATTCH PLSTC EA		Not Cov	No	Not Cov	No	No	No	
A4376	OSTOMY POUCH DRAINABLE W FACEPLATE ATTCH RUBR EA		Not Cov	No	Not Cov	No	No	No	
A4377	OSTOMY POUCH DRAINABLE USE FACEPLATE PLASTIC EA		Not Cov	No	Not Cov	No	No	No	
A4378	OSTOMY POUCH DRAINABLE USE FACEPLATE RUBBER EACH		Not Cov	No	Not Cov	No	No	No	
A4379	OSTOMY POUCH URINARY W FACEPLATE ATTCH PLSTC EA		Not Cov	No	Not Cov	No	No	No	
A4380	OSTOMY POUCH URINARY W FACEPLATE ATTCH RUBBER EA		Not Cov	No	Not Cov	No	No	No	
A4381	OSTOMY POUCH URINARY USE FACEPLATE PLASTIC EACH		Not Cov	No	Not Cov	No	No	No	
A4382	OSTOMY POUCH URIN USE FACEPLATE HEAVY PLSTC EA		Not Cov	No	Not Cov	No	No	No	
A4383	OSTOMY POUCH URINARY USE FACEPLATE RUBBER EACH		Not Cov	No	Not Cov	No	No	No	
A4384	OSTOMY FACEPLATE EQUIVALENT SILICONE RING EACH		Not Cov	No	Not Cov	No	No	No	
A4385	OST SKN BARRIER SOLID 4X4 EXT W O CONVXITY EA		Not Cov	No	Not Cov	No	No	No	
A4387	OSTOMY POUCH CLOSED W BARR BUILT-IN CONVEXITY EA		Not Cov	No	Not Cov	No	No	No	
A4388	OST POUCH DRAINABLE W EXT WEAR BARRIER ATTCH EA		Not Cov	No	Not Cov	No	No	No	
A4389	OST POUCH DRNABLE W BARR W BUILT-IN CONVXITY EA		Not Cov	No	Not Cov	No	No	No	
A4390	OST POUCH DRNABLE W EXT BARRIER W CONVXITY EA		Not Cov	No	Not Cov	No	No	No	
A4391	OSTOMY POUCH URINARY W EXT WEAR BARRIER ATTCH EA		Not Cov	No	Not Cov	No	No	No	
A4392	OST POUCH URIN W STD WEAR BARRIER W CONVXITY EA		Not Cov	No	Not Cov	No	No	No	
A4393	OST POUCH URIN W EXT WEAR BARRIER W CONVXITY EA		Not Cov	No	Not Cov	No	No	No	
A4394	OSTOMY DEODORANT W WO LUBRICANT POUCH PER FL OZ		Not Cov	No	Not Cov	No	No	No	
A4395	OSTOMY DEODORANT USE OSTOMY POUCH SOLID PER TAB		Not Cov	No	Not Cov	No	No	No	
A4396	PERISTOMAL HERNIA SUPPORT BELT		Not Cov	No	Not Cov	No	No	No	
A4397	IRRIGATION SUPPLY; SLEEVE EACH		Not Cov	No	Not Cov	No	No	No	
A4398	OSTOMY IRRIGATION SUPPLY; BAG EACH		Not Cov	No	Not Cov	No	No	No	
A4399	OSTOMY IRRIGATION SUPPLY; CONE CATH W WO BRUSH		Not Cov	No	Not Cov	No	No	No	

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
A4400	OSTOMY IRRIGATION SET		Not Cov	No	Not Cov	No	No	No	
A4402	LUBRICANT PER OUNCE		Not Cov	No	Not Cov	No	No	No	
A4404	OSTOMY RING EACH		Not Cov	No	Not Cov	No	No	No	
A4405	OSTOMY SKIN BARRIER NONPECTIN-BASED PASTE-OZ		Not Cov	No	Not Cov	No	No	No	
A4406	OSTOMY SKIN BARRIER PECTIN-BASED PASTE PER OUNCE		Not Cov	No	Not Cov	No	No	No	
A4407	OST SKN BARRIER W BUILT-IN CONVXITY 4X4 IN OR LESS EA		Not Cov	No	Not Cov	No	No	No	
A4408	OST SKN BARRIER W BUILT-IN CONVXITY OVER 4X4 IN EA		Not Cov	No	Not Cov	No	No	No	
A4409	OST SKN BARR EXT W O BUILT-IN CONVXTY 4X4 IN OR LESS EA		Not Cov	No	Not Cov	No	No	No	
A4410	OST SKN BARR EXT W O BUILT-IN CONVXITY OVER 4X4 IN EA		Not Cov	No	Not Cov	No	No	No	
A4411	OST SKN BARRIER SOLID 4X4 EQ W BUILT-IN CONVXITY		Not Cov	No	Not Cov	No	No	No	
A4412	OST POUCH DRNABLE BARRIER W FLNGE W O FLTR EA		Not Cov	No	Not Cov	No	No	No	
A4413	OST POUCH DRNABLE HI OP BARRIER W FLNGE FLTR EA		Not Cov	No	Not Cov	No	No	No	
A4414	OST SKN BARRIER W O BUILT-IN CONVXITY 4X4 IN OR LESS EA		Not Cov	No	Not Cov	No	No	No	
A4415	OST SKN BARRIER W O BUILT-IN CONVXITY OVER 4X4 IN EA		Not Cov	No	Not Cov	No	No	No	
A4416	OSTOMY POUCH CLOSED W BARRIER ATTCH W FILTER EA		Not Cov	No	Not Cov	No	No	No	
A4417	OST POUCH CLO W BARRIER ATTCH W BUILT-IN CONVXIT		Not Cov	No	Not Cov	No	No	No	
A4418	OSTOMY POUCH CLOS; W O BARRIER ATTCH W FILTER EA		Not Cov	No	Not Cov	No	No	No	
A4419	OST POUCH CLOS; BARRIER W NON-LOCK FLNGE W FLTR		Not Cov	No	Not Cov	No	No	No	
A4420	OSTOMY POUCH CLOS; USE BARRIER W LOCK FLNGE EA		Not Cov	Not Cov	Not Cov	Not Cov	Not Cov	No	
A4421	OSTOMY SUPPLY; MISCELLANEOUS		Not Cov	Yes	Not Cov	Yes	Yes	Yes	
A4422	OST ABSORBNT MATL POUCH THICKEN LQD STOMAL OP EA		Not Cov	No	Not Cov	No	No	No	
A4423	OST POUCH CLOS; BARRIER W LOCK FLNGE W FLTR EA		Not Cov	No	Not Cov	No	No	No	
A4424	OSTOMY POUCH DRAINABLE W BARRIER ATTCH W FLTR EA		Not Cov	No	Not Cov	No	No	No	
A4425	OST POUCH DRNABL; BARR NON-LOCK FLNGE W FLTR EA		Not Cov	No	Not Cov	No	No	No	
A4426	OST POUCH DRAINABLE; USE BARRIER W LOCK FLNGE EA		Not Cov	No	Not Cov	No	No	No	
A4427	OST POUCH DRNABLE; BARRIER LOCK FLNGE W FLTR EA		Not Cov	No	Not Cov	No	No	No	
A4428	OST POUCH URIN EXT BARR W FAUCET TAP W VALVE		Not Cov	No	Not Cov	No	No	No	
A4429	OST POUCH URIN BLT-IN CONVXI W FAUCET TAP VALVE		Not Cov	No	Not Cov	No	No	No	

This prior authorization guide applies to Medicaid, Medicare, and Marketplace.

DOS Effective 10/1/19; Posted 10/30/19

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Code	Code Description	Comments	Apple Health & IMC Medical				IMC / BHSO (Mental Health covered svcs)	Medicare	Market Place
			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
A4430	OST POUCH URIN EXT BARR BLT-IN CNVX FAUCT VLV EA		Not Cov	No	Not Cov	No		No	No
A4431	OST POUCH URIN; W BARR W FAUCET TAP W VALVE EA		Not Cov	No	Not Cov	No		No	No
A4432	OST POUCH URIN;BARR NON-LOCK FLNG FAUCT TAP VALV		Not Cov	No	Not Cov	No		No	No
A4433	OST POUCH URIN; FOR BARR W LOCKING FLANGE EA		Not Cov	No	Not Cov	No		No	No
A4434	OST POUCH URIN; BARR LOCK FLNG FAUCET TAP VALVE		Not Cov	No	Not Cov	No		No	No
A4435	OST POUCH DRAIN HI OP EXT WEAR BARR W WO FLTR EA		Not Cov	No	Not Cov	No		No	No
A4450	TAPE NON-WATERPROOF PER 18 SQUARE INCHES		Not Cov	No	Not Cov	No		No	Not Cov
A4452	TAPE WATERPROOF PER 18 SQUARE INCHES		Not Cov	No	Not Cov	No		No	Not Cov
A4455	ADHESIVE REMOVER OR SOLVENT PER OUNCE		Not Cov	No	Not Cov	No		No	No
A4456	ADHESIVE REMOVER WIPES ANY TYPE EACH		Not Cov	No	Not Cov	No		No	No
A4458	ENEMA BAG WITH TUBING REUSABLE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
A4459	MANUAL PUMP-OPERATED ENEMA SYS REUSABLE ANY TYPE		Not Cov	No	Not Cov	No		Not Cov	No
A4461	SURGICAL DRESSING HOLDER NON-REUSABLE EACH		Not Cov	No	Not Cov	No		No	No
A4463	SURGICAL DRESSING HOLDER REUSABLE EACH		Not Cov	No	Not Cov	No		No	No
A4465	NONELASTIC BINDER FOR EXTREMITY		No	No	Not Cov	No		Not Cov	No
A4467	BELT STRAP SLEEVE GARMENT OR COVERING ANY TYPE		Not Cov	No	Not Cov	No		Not Cov	No
A4470	GRAVLEE JET WASHER		No	Not Cov	Not Cov	Not Cov		Not Cov	No
A4480	VABRA ASPIRATOR		No	Not Cov	Not Cov	Not Cov		No	No
A4481	TRACHEOSTOMA FILTER ANY TYPE ANY SIZE EACH		Not Cov	Not Cov	Not Cov	Not Cov		No	No
A4483	MOISTR EXCHGR DISPBL USE W INVASV MECH VENT		Not Cov	Not Cov	Not Cov	Not Cov		No	No
A4490	SURGICAL STOCKING ABOVE KNEE LENGTH EACH		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
A4495	SURGICAL STOCKING THIGH LENGTH EACH		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
A4500	SURGICAL STOCKING BELOW KNEE LENGTH EACH		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
A4510	SURGICAL STOCKING FULL-LENGTH EACH		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
A4520	INCONTINENCE GARMENT ANY TYPE EACH		Not Cov	No	Not Cov	No		Not Cov	Not Cov
A4550	SURGICAL TRAYS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
A4553	NON-DISPOSABLE UNDERPADS ALL SIZES		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
A4554	DISPOSABLE UNDERPADS ALL SIZES		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
A4555	ELECTRD TRANSDUCR E-STIM DVC USED CA TX RPL ONLY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
A4556	ELECTRODES PER PAIR		Not Cov	No	Not Cov	No		No	No
A4557	LEAD WIRES PER PAIR		Not Cov	Not Cov	Not Cov	Not Cov		No	No
A4558	CONDUCTIVE GEL PASTE FOR USE W ELECTRICAL DEVICE		Not Cov	Not Cov	Not Cov	Not Cov		No	No
A4559	COUPLING GEL PASTE USE W US DEVICE PER OZ		Not Cov	No	Not Cov	No		No	No
A4561	PESSAR RUBBER ANY TYPE		No	No	Not Cov	No		No	No
A4562	PESSARY NON RUBBER ANY TYPE		No	No	Not Cov	No		No	No
A4563	RECTAL CNTRL SYS VAG INSRT LT USE ANY TYPE EA		Not Cov	Not Cov	Not Cov	Not Cov		No	Yes
A4565	SLINGS		No	No	Not Cov	No		No	No
A4566	SHOULDER SLING VEST ABDUCTION RESTRAINER PREFAB		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
A4570	SPLINTS		Not Cov	No	Not Cov	No		Not Cov	No
A4575	TOPICAL HYPERBARIC OXYGEN CHAMBER DISPOSABLE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
A4580	CAST SUPPLIES		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
A4590	SPECIAL CASTING MATERIAL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
A4595	ELECTRICAL STIMULATOR SUPPLIES 2 LEAD PER MONTH		Not Cov	Not Cov	Not Cov	Not Cov		No	No
A4600	SLEEVE INTERMITTENT LIMB COMPRS DEVC REPL EA		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
A4601	LITHIUM ION BATT RECHARG NONPROS USE REPLACEMENT		Not Cov	No	Not Cov	No		No	No
A4602	REPL BA EXT INFUS PUMP OWND PATIENT LI 1.5 V EA		Not Cov	No	Not Cov	No		No	No
A4604	TUBING W INTGR HEAT ELEM W POS AIRWAY PRESS DEVC		Not Cov	No	Not Cov	No		No	No
A4605	TRACHEAL SUCTION CATHETER CLOSED SYSTEM EACH		Not Cov	No	Not Cov	No		No	No
A4606	OXYGEN PROBE USE W OXIMETER DEVICE REPLACEMENT		Not Cov	No	Not Cov	No		Not Cov	No
A4608	TRANSTRACHEAL OXYGEN CATHETER EACH		Not Cov	Not Cov	Not Cov	Not Cov		No	No
A4611	BATTERY HEAVY DUTY; REPL PT-OWNED VENTILATOR		Not Cov	No	Not Cov	No		No	No
A4612	BATTERY CABLES; REPLACEMENT PT-OWNED VENTILATOR		Not Cov	No	Not Cov	No		No	No
A4613	BATTERY CHARGER; REPLACEMENT PT-OWNED VENTILATOR		Not Cov	No	Not Cov	No		No	No
A4614	PEAK EXPIRATORY FLOW RATE METER HAND HELD		Not Cov	No	Not Cov	No		No	No
A4615	CANNULA NASAL		Not Cov	No	Not Cov	No		No	No
A4616	TUBING PER FOOT		Not Cov	No	Not Cov	No		No	No
A4617	MOUTHPIECE		Not Cov	Not Cov	Not Cov	Not Cov		No	No
A4618	BREATHING CIRCUITS		Not Cov	No	Not Cov	No		No	No
A4619	FACE TENT		Not Cov	No	Not Cov	No		No	No
A4620	VARIABLE CONCENTRATION MASK		Not Cov	No	Not Cov	No		No	No
A4623	TRACHEOSTOMY INNER CANNULA		Not Cov	No	Not Cov	No		No	No
A4624	TRACHEAL SUCTN CATH TYPE OTH THAN CLOS SYS EA		Not Cov	No	Not Cov	No		No	No
A4625	TRACHEOSTOMY CARE KIT FOR NEW TRACHEOSTOMY		Not Cov	No	Not Cov	No		No	No
A4626	TRACHEOSTOMY CLEANING BRUSH EACH		Not Cov	Not Cov	Not Cov	Not Cov		No	No
A4627	SPACR BAG RESRVOR W WO MASK W METRD DOSE INHAL		Not Cov	No	Not Cov	No		Not Cov	No
A4628	OROPHARYNGEAL SUCTION CATHETER EACH		Not Cov	No	Not Cov	No		No	No
A4629	TRACHEOSTOMY CARE KIT ESTABLISHED TRACHEOSTOMY		Not Cov	No	Not Cov	No		No	No
A4630	REPLCMT BATTERY MED NECES TRNSQ ELEC STIM OWND PT		Not Cov	Not Cov	Not Cov	Not Cov		No	No
A4633	REPLCMT BULB LAMP ULTRAVIOLET LIGHT TX SYSTEM EA		Not Cov	Not Cov	Not Cov	Not Cov		No	No
A4634	REPLCMT BULB THERAPEUTIC LIGHT BOX TABOP MODEL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
A4635	UNDERARM PAD CRUTCH REPLACEMENT EACH		Not Cov	No	Not Cov	No		No	No
A4636	REPLACEMENT HANDGRIP CANE CRUTCH OR WALKER EACH		Not Cov	No	Not Cov	No		No	No
A4637	REPLACEMENT TIP CANE CRUTCH WALKER EACH		Not Cov	No	Not Cov	No		No	No
A4638	REPLACEMENT BATTERY PT-OWNED EAR PULSE GEN EA		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No

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A4639	REPLACEMENT PAD INFRARED HEATING PAD SYSTEM EACH		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
A4640	REPLCMT PAD W MED NECES ALTRNAT PRSS PAD OWND PT		Not Cov	No	Not Cov	No		No	No
A4641	RADIOPHARMACEUTICAL DIAGNOSTIC NOC		Yes	Yes	Not Cov	Yes		Yes	Yes
A4642	INDIUM IN-111 SATUMOMAB PENDETIDE DX UP TO 6 MCI		No	No	Not Cov	No		No	No
A4648	TISSUE MARKER IMPLANTABLE ANY TYPE EACH		No	No	Not Cov	No		No	No
A4649	SURGICAL SUPPLY; MISCELLANEOUS		Yes	Yes	Not Cov	Yes		Yes	Yes
A4650	IMPLANTABLE RADIATION DOSIMETER EACH		No	No	Not Cov	No		No	No
A4651	CALIBRATED MICROCAPILLARY TUBE EACH		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
A4652	MICROCAPILLARY TUBE SEALANT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
A4653	PERITON DIALYSIS CATHETER ANCHR DEVICE BELT EA		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
A4657	SYRINGE WITH OR WITHOUT NEEDLE EACH		No	No	Not Cov	No		No	No
A4660	SPHYGMOMANOMETER BP APPARATUS W CUFF AND STETHOSCOPE		Not Cov	Not Cov	Not Cov	No		Not Cov	No
A4663	BLOOD PRESSURE CUFF ONLY		No	Not Cov	Not Cov	No		Not Cov	No
A4670	AUTOMATIC BLOOD PRESSURE MONITOR		Not Cov	Not Cov	Not Cov	No		Not Cov	No
A4671	DISPBL CYCLER SET USED W CYCLER DIALYSIS MACH EA		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
A4672	DRAINAGE EXTENSION LINE STERILE DIALYSIS EACH		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
A4673	EXT LINE W EASY LOCK CONNECTORS USED W DIALYSIS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
A4674	CHEMS ANTISEPTICS SOL CLEAN STERILIZE DIALY 8OZ		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
A4680	ACTIVATED CARBON FILTER FOR HEMODIALYSIS EACH		No	Not Cov	Not Cov	Not Cov		Not Cov	No
A4690	DIALYZER ALL TYPES ALL SIZES HEMODIALYSIS EACH		No	Not Cov	Not Cov	Not Cov		Not Cov	No
A4706	BICARBONATE CONCENTRATE SOL HEMODIAL PER GALLON		No	Not Cov	Not Cov	Not Cov		Not Cov	No
A4707	BICARBONATE CONCENTRATE POWDER HEMODIAL-PACKET		No	Not Cov	Not Cov	Not Cov		Not Cov	No
A4708	ACTAT CONCENTRATE SOLUTION HEMODIAL PER GALLON		No	Not Cov	Not Cov	Not Cov		Not Cov	No
A4709	ACID CONCENTRATE SOLUTION HEMODIAL PER GALLON		No	Not Cov	Not Cov	Not Cov		Not Cov	No
A4714	TREATED WATER FOR PERITONEAL DIALYSIS PER GALLON		No	Not Cov	Not Cov	Not Cov		Not Cov	No
A4719	Y SET TUBING FOR PERITONEAL DIALYSIS		No	Not Cov	Not Cov	Not Cov		Not Cov	No
A4720	DIALYSATE DXTROS FL OVER 249 UNDER EQ 999 CC PERITON DI		No	Not Cov	Not Cov	Not Cov		Not Cov	No
A4721	DIALYSATE DXTROS FL OVER 999 UNDER EQ 1999CC PERITON DI		No	Not Cov	Not Cov	Not Cov		Not Cov	No
A4722	DIALYSATE DXTROS FL OVER 1999 UNDER EQ 2999CC PERITON DI		No	Not Cov	Not Cov	Not Cov		Not Cov	No
A4723	DIALYSATE DXTROS FL OVER 2999 UNDER EQ 3999CC PERITON DI		No	Not Cov	Not Cov	Not Cov		Not Cov	No
A4724	DIALYSATE DXTROS FL OVER 3999 UNDER EQ 4999CC PERITON DI		No	Not Cov	Not Cov	Not Cov		Not Cov	No
A4725	DIALYSATE DXTROS FL OVER 4999 UNDER EQ 5999CC PERITON DI		No	Not Cov	Not Cov	Not Cov		Not Cov	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
A4726	DIALYSATE DEXTROSE FLUID OVER 5999 CC PD		No	Not Cov	Not Cov	Not Cov		Not Cov	No
A4728	DIALYSATE SOLUTION NON-DXTROS CONTAINING 500 ML		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
A4730	FISTULA CANNULATION SET FOR HEMODIALYSIS EACH		No	Not Cov	Not Cov	Not Cov		Not Cov	No
A4736	TOPICAL ANESTHETIC FOR DIALYSIS PER G		No	Not Cov	Not Cov	Not Cov		Not Cov	No
A4737	INJECTABLE ANESTHETIC FOR DIALYSIS PER 10 ML		No	Not Cov	Not Cov	Not Cov		Not Cov	No
A4740	SHUNT ACCESSORY HEMODIALYSIS ANY TYPE EACH		No	Not Cov	Not Cov	Not Cov		Not Cov	No
A4750	BLOOD TUBING ARTERIAL VENOUS HEMODIALYSIS EACH		No	Not Cov	Not Cov	Not Cov		Not Cov	No
A4755	BLOOD TUBING ART AND VENOUS COMBINED HEMODIALYSIS EA		No	Not Cov	Not Cov	Not Cov		Not Cov	No
A4760	DIALYSATE SOL TST KIT PERITON DIALYSIS TYPE EA		No	Not Cov	Not Cov	Not Cov		Not Cov	No
A4765	DIALYSATE CONC POWDER ADD PERITON DIALYSIS-PCKET		No	Not Cov	Not Cov	Not Cov		Not Cov	No
A4766	DIALYSATE CONC SOL ADD PERITON DIALYSIS-10 ML		No	Not Cov	Not Cov	Not Cov		Not Cov	No
A4770	BLOOD COLLECTION TUBE VACUUM FOR DIALYSIS PER 50		No	Not Cov	Not Cov	Not Cov		Not Cov	No
A4771	SERUM CLOTTING TIME TUBE FOR DIALYSIS PER 50		No	Not Cov	Not Cov	Not Cov		Not Cov	No
A4772	BLOOD GLUCOSE TEST STRIPS FOR DIALYSIS PER 50		No	Not Cov	Not Cov	Not Cov		No	No
A4773	OCCULT BLOOD TEST STRIPS FOR DIALYSIS PER 50		No	Not Cov	Not Cov	Not Cov		Not Cov	No
A4774	AMMONIA TEST STRIPS FOR DIALYSIS PER 50		No	Not Cov	Not Cov	Not Cov		Not Cov	No
A4802	PROTAMINE SULFATE FOR HEMODIALYSIS PER 50 MG		No	Not Cov	Not Cov	Not Cov		Not Cov	No
A4860	DISPBL CATHETER TIPS PERITONEAL DIALYSIS PER 10		No	Not Cov	Not Cov	Not Cov		Not Cov	No
A4870	PLUMBING AND OR ELEC WORK HOME HEMODIAL EQUIPMENT		No	Not Cov	Not Cov	Not Cov		Not Cov	No
A4890	CONTRACTS REPAIR AND MAINTENANCE HEMODIAL EQUIPMENT		No	Not Cov	Not Cov	Not Cov		Not Cov	No
A4911	DRAIN BAG BOTTLE FOR DIALYSIS EACH		No	Not Cov	Not Cov	Not Cov		Not Cov	No
A4913	MISCELLANEOUS DIALYSIS SUPPLIES NOS		Yes	Yes	Not Cov	Yes		Yes	Yes
A4918	VENOUS PRESSURE CLAMP FOR HEMODIALYSIS EACH		No	Not Cov	Not Cov	Not Cov		Not Cov	No
A4927	GLOVES NON-STERILE PER 100		No	No	Not Cov	No		Not Cov	No
A4928	SURGICAL MASK PER 20		No	Not Cov	Not Cov	Not Cov		Not Cov	No
A4929	TOURNIQUET FOR DIALYSIS EACH		No	Not Cov	Not Cov	Not Cov		Not Cov	No
A4930	GLOVES STERILE PER PAIR		No	No	Not Cov	No		No	No
A4931	ORAL THERMOMETER REUSABLE ANY TYPE EACH		No	No	Not Cov	No		No	No
A4932	RECTAL THERMOMETER REUSABLE ANY TYPE EACH		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
A5051	OSTOMY POUCH CLOSED; WITH BARRIER ATTACHED EACH		Not Cov	No	Not Cov	No		No	No
A5052	OSTOMY POUCH CLOSED; WITHOUT BARRIER ATTACHED EA		Not Cov	No	Not Cov	No		No	No
A5053	OSTOMY POUCH CLOSED; FOR USE ON FACEPLATE EACH		Not Cov	No	Not Cov	No		No	No
A5054	OSTOMY POUCH CLOSED; USE BARRIER W FLANGE EACH		Not Cov	No	Not Cov	No		No	No
A5055	STOMA CAP		Not Cov	No	Not Cov	No		No	No
A5056	OST POUCH DRAINABLE EXT WEAR BARRIER W FILTER EA		Not Cov	No	Not Cov	No		No	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
A5057	OST POUCH DRAINABL EXT WEAR BARR CONVXY FLTR EA		Not Cov	No	Not Cov	No		No	No
A5061	OSTOMY POUCH DRAINABLE; W BARRIER ATTACHED EACH		Not Cov	No	Not Cov	No		No	No
A5062	OSTOMY POUCH DRAINABLE; WITHOUT BARRIER ATTCH EA		Not Cov	No	Not Cov	No		No	No
A5063	OSTOMY POUCH DRAINABLE; USE BARRIER W FLANGE EA		Not Cov	No	Not Cov	No		No	No
A5071	OSTOMY POUCH URINARY; WITH BARRIER ATTACHED EACH		Not Cov	No	Not Cov	No		No	No
A5072	OSTOMY POUCH URINARY; WITHOUT BARRIER ATTCH EA		Not Cov	No	Not Cov	No		No	No
A5073	OSTOMY POUCH URINARY; USE BARRIER W FLANGE EACH		Not Cov	No	Not Cov	No		No	No
A5081	STOMA PLUG OR SEAL ANY TYPE		Not Cov	No	Not Cov	No		No	No
A5082	CONTINENT DEVICE; CATHETER FOR CONTINENT STOMA		Not Cov	No	Not Cov	No		No	No
A5083	CONTINENT DEVICE STOMA ABSORPTIVE COVER STOMA		Not Cov	No	Not Cov	No		No	No
A5093	OSTOMY ACCESSORY; CONVEX INSERT		Not Cov	No	Not Cov	No		No	No
A5102	BEDSID DRAIN BOTTLE W WO TUBING RIGD XPNDABLE EA		Not Cov	No	Not Cov	No		No	No
A5105	URINARY SUSPENSORY WITH LEG BAG W WO TUBE EACH		Not Cov	No	Not Cov	No		No	No
A5112	URINARY DRAINAGE BAG LEG OR ABDOMEN LATEX EACH		Not Cov	No	Not Cov	No		No	No
A5113	LEG STRAP; LATEX REPLACEMENT ONLY PER SET		Not Cov	No	Not Cov	No		No	No
A5114	LEG STRAP; FOAM FABRIC REPLACEMENT ONLY PER SET		Not Cov	No	Not Cov	No		No	No
A5120	SKIN BARRIER WIPES OR SWABS EACH		Not Cov	No	Not Cov	No		No	No
A5121	SKIN BARRIER; SOLID 6 X 6 OR EQUIVALENT EACH		Not Cov	No	Not Cov	No		No	No
A5122	SKIN BARRIER; SOLID 8 X 8 OR EQUIVALENT EACH		Not Cov	No	Not Cov	No		No	No
A5126	ADHESIVE OR NON-ADHESIVE; DISK OR FOAM PAD		Not Cov	No	Not Cov	No		No	No
A5131	APPLINC CLNR INCONT AND OSTOMY APPLINCS PER 16 OZ		Not Cov	No	Not Cov	No		No	No
A5200	PERCUT CATH TUBE ANCHR DEVICE ADHES SKIN ATTCH		Not Cov	Not Cov	Not Cov	Not Cov		No	No
A5500	DIAB ONLY FIT CSTM PREP AND SPL SHOE MX DNSITY INSRT		Not Cov	No	Not Cov	No		No	No
A5501	DIAB ONLY FIT CSTM PREP AND SPL SHOE MOLD PTS FT		Not Cov	No	Not Cov	No		No	No
A5503	DIAB ONLY MOD SHOE CSTM MOLD ROLLER ROCKR BOTTOM		Not Cov	No	Not Cov	No		No	No
A5504	DIAB ONLY MOD SHOE CSTM MOLD SHOE W WEDGE SHOE		Not Cov	No	Not Cov	No		No	No
A5505	DIAB ONLY MOD SHOE CSTM MOLD SHOE W MT BAR SHOE		Not Cov	No	Not Cov	No		No	No
A5506	DIAB ONLY MOD SHOE CSTM MOLD SHOE W OFF SET HEEL		Not Cov	No	Not Cov	No		No	No

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			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
A5507	DIAB ONLY NOS MOD SHOE CSTM MOLD SHOE PER SHOE		Not Cov	No	Not Cov	No		No	No
A5508	DIAB ONLY DELUXE FEATURE SHOE CSTM MOLD SHOE		Not Cov	No	Not Cov	No		Not Cov	No
A5510	DIAB ONLY DIR FORM COMPRS MOLD PTS FT W O HEAT		Not Cov	No	Not Cov	No		Not Cov	No
A5512	FOR DIAB ONLY MX DNSITY INSRT DIR FORMD PRFAB EA		Not Cov	No	Not Cov	No		No	No
A5513	FOR DIAB ONLY MX DNSITY INSRT CSTM MOLD CSTM EA		Not Cov	No	Not Cov	No		No	No
A5514	DIAB ONLY MX DEN INSRT DIRECT CARV CUSTOM FAB EA		Not Cov	Yes	Not Cov	Yes		No	Yes
A6000	NON-CNTC WND WARMING WND COVR W DEVC AND CARD		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
A6010	COLLAGEN BASED WOUND FILLER DRY FORM STERL PER G		Not Cov	No	Not Cov	No		No	No
A6011	COLLEGEN BASED WOUND FILLR GEL PASTE STERL PER G		Not Cov	No	Not Cov	No		No	No
A6021	COLLAGEN DRESSING STERILE SIZE 16 SQ IN LESS EA		Not Cov	No	Not Cov	No		No	No
A6022	COLL DRSG STERL PAD SIZE OVER 16 SQ IN BUT EQ 48 SQ EA		Not Cov	No	Not Cov	No		No	No
A6023	COLLAGEN DRESSING STERILE SIZE OVER 48 SQ IN EACH		Not Cov	No	Not Cov	No		No	No
A6024	COLLAGEN DRESSING WOUND FILLER STERILE PER 6 IN		Not Cov	No	Not Cov	No		No	No
A6025	GEL SHEET FOR DERMAL EPIDERMAL APPLICATION EACH		Not Cov	No	Not Cov	No		Not Cov	No
A6154	WOUND POUCH EACH		Not Cov	No	Not Cov	No		No	No
A6196	ALGINAT OTH FIBER GELL DRESS STERIL PAD 16 SQ OR LESS		Not Cov	No	Not Cov	No		No	No
A6197	ALGINATE OTH FIBER GELL DRESS PAD OVER 16 UNDER EQ 48 S		Not Cov	No	Not Cov	No		No	No
A6198	ALGINATE OTH FIBER GELL DRESS WND PAD OVER 48 SQ EA		Not Cov	No	Not Cov	No		Not Cov	No
A6199	ALGINATE OTH FIBER GEL DRESS WND FIL STERL 6 IN		Not Cov	No	Not Cov	No		No	No
A6203	COMPOS DRESS STERL PAD 16 SQ OR LESS W ADHES BORDR EA		Not Cov	No	Not Cov	No		No	No
A6204	COMPOS DRESS OVER 16SQ BUT UNDER EQ 48 SQ W ADHES BORD		Not Cov	No	Not Cov	No		No	No
A6205	COMPOS DRESS STERL PAD OVER 48 SQ W ADHES BORDR		Not Cov	No	Not Cov	No		Not Cov	No
A6206	CONTACT LAYER STERL 16 SQ IN LESS EA DRESSING		Not Cov	No	Not Cov	No		Not Cov	No
A6207	CNTC LAYER OVER 16 SQ BUT UNDER EQUAL 48 SQ EA DRESSIN		Not Cov	No	Not Cov	No		No	No
A6208	CONTACT LAYER STERL OVER 48 SQ IN EACH DRESSING		Not Cov	No	Not Cov	No		Not Cov	No
A6209	FOAM DRESS STERL PAD 16 SQ OR LESS NO ADHES BORDR EA		Not Cov	No	Not Cov	No		No	No

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Code	Code Description	Comments	Apple Health & IMC Medical				IMC / BHSO (Mental Health covered svcs)	Medicare	Market Place
			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
A6210	FOAM DRESS OVER 16 BUT UNDER EQ 48 SQ W O ADHES BORD		Not Cov	No	Not Cov	No		No	No
A6211	FOAM DRESS STERL PAD OVER 48 SQ NO ADHES BORDR EA		Not Cov	No	Not Cov	No		No	No
A6212	FOAM DRESS STERL PAD SZ 16 SQ OR GRT W ADHES BORDR EA		Not Cov	No	Not Cov	No		No	No
A6213	FOAM DRESS OVER 16 SQ BUT UNDER EQ 48 SQ W ADHES BORD		Not Cov	No	Not Cov	No		No	No
A6214	FOAM DRESS STERL PAD SZ OVER 48 SQ W ADHES BORDR EA		Not Cov	No	Not Cov	No		No	No
A6215	FOAM DRESSING WOUND FILLER STERILE PER G		Not Cov	No	Not Cov	No		Not Cov	No
A6216	GAUZE NON-IMPREG NONSTERL 16 SQ OR LESS W O ADHES EA		Not Cov	No	Not Cov	No		No	No
A6217	GAUZE NON-IMPREG NONSTERL OVER 16 UNDER EQ 48 SQ W O A		Not Cov	No	Not Cov	No		Not Cov	No
A6218	GAUZE NON-IMPREG NONSTERL OVER 48 SQ W O ADHES EA		Not Cov	No	Not Cov	No		Not Cov	No
A6219	GAUZE NON-IMPREG STERL 16 SQ LESS W ADHES BORDR		Not Cov	No	Not Cov	No		No	No
A6220	GAUZE NON-IMPREG OVER 16 UNDER EQ 48 SQ W ADHES BORDR		Not Cov	No	Not Cov	No		No	No
A6221	GAUZE NON-IMPREG STERL OVER 48 SQ W ADHES BORDR EA		Not Cov	No	Not Cov	No		Not Cov	No
A6222	GAUZE IMPREG NOT H2O NL SALINE HYDROGEL 16 SQ OR LESS		Not Cov	No	Not Cov	No		No	No
A6223	GAUZE IMPREG NOT H2O SALINE HYDRGEL OVER 16 UNDER EQ 4		Not Cov	No	Not Cov	No		No	No
A6224	GAUZE IMPREG NOT H2O NL SALINE HYDROGEL OVER 48 SQ		Not Cov	No	Not Cov	No		No	No
A6228	GAUZE IMPREG H2O NL SALINE STERL OVER 16 SQ NO ADHES		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
A6229	GAUZE IMPREG H2O NL SALINE STERL OVER 16 BUT UNDER EQ 48		Not Cov	No	Not Cov	No		Not Cov	No
A6230	GAUZE IMPREG H2O NL SALINE STERL OVER 48 SQ NO ADHES		Not Cov	No	Not Cov	No		Not Cov	No
A6231	GAUZE IMPREG HYDROGEL DIR WND CNTC STERL 16 SQ OR LESS		Not Cov	No	Not Cov	No		No	No
A6232	GAUZE IMPREG HYDROGEL DIR WND CNTC OVER 16 UNDER EQ 4		Not Cov	No	Not Cov	No		No	No
A6233	GAUZE IMPREG HYDROGEL DIR WND CNTC STERL OVER 48 SQ		Not Cov	No	Not Cov	No		No	No
A6234	HYDROCOLLOID DRESS STERL 16 SQ OR LESS NO ADHES BORDR		Not Cov	No	Not Cov	No		No	No
A6235	HYDROCOLLOID DRESS OVER 16 BUT UNDER EQ 48 SQ W O ADHE		Not Cov	No	Not Cov	No		No	No
A6236	HYDROCOLLOID DRESS STERL OVER 48 SQ NO ADHES BORDR		Not Cov	No	Not Cov	No		No	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
A6237	HYDROCOLLOID DRESS STERL 16 SQ OR LESS ADHES BORDR		Not Cov	No	Not Cov	No		No	No
A6238	HYDROCOLLOID DRESS OVER 16 BUT UNDER EQ 48 SQ W ADHE		Not Cov	No	Not Cov	No		No	No
A6239	HYDROCOLLOID DRESS STERL OVER 48 SQ W ADHES BORDR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
A6240	HYDROCOLLOID DRESSING WND FIL PASTE STERL PER OZ		Not Cov	No	Not Cov	No		No	No
A6241	HYDROCOLLOID DRESS WND FIL DRY FORM STERL PER G		Not Cov	No	Not Cov	No		No	No
A6242	HYDROGEL DRESS STERL PAD 16 SQ OR LESS NO ADHES BORDR		Not Cov	No	Not Cov	No		No	No
A6243	HYDROGEL DRESS OVER 16 SQ BUT UNDER EQ 48 SQ W O ADHE		Not Cov	No	Not Cov	No		No	No
A6244	HYDROGEL DRESS STERL PAD OVER 48 SQ NO ADHES BORDR		Not Cov	No	Not Cov	No		No	No
A6245	HYDROGEL DRESS STERL PAD 16 SQ OR LESS ADHES BORDR		Not Cov	No	Not Cov	No		No	No
A6246	HYDROGEL DRESS OVER 16 SQ BUT UNDER EQ 48 SQ W ADHES		Not Cov	No	Not Cov	No		No	No
A6247	HYDROGEL DRESS STERL PAD OVER 48 SQ ADHES BORDR		Not Cov	No	Not Cov	No		No	No
A6248	HYDROGEL DRESSING WOUND FILLER GEL PER FL OZ		Not Cov	No	Not Cov	No		No	No
A6250	SKIN SEALNT PROTECT MOISTURIZER OINTMNT TYPE SZ		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
A6251	SPCLTY ABSORB DRESS STERL 16 SQ OR LESS NO ADHES BORDR		Not Cov	No	Not Cov	No		No	No
A6252	SPCLTY ABSORB DRESS OVER 16 UNDER EQ 48 SQ W O ADHES B		Not Cov	No	Not Cov	No		No	No
A6253	SPCLTY ABSORB DRESS STERL OVER 48 SQ NO ADHES BORDR		Not Cov	No	Not Cov	No		No	No
A6254	SPCLTY ABSORB DRESS STERL 16 SQ OR LESS ADHES BORDR EA		Not Cov	No	Not Cov	No		No	No
A6255	SPCLTY ABSORB DRESS STERL OVER 16 UNDER EQ 48 SQ W AD		Not Cov	No	Not Cov	No		No	No
A6256	SPCLTY ABSORB DRESS STERL OVER 48 SQ ADHES BORDR		Not Cov	No	Not Cov	No		Not Cov	No
A6257	TRANSPARENT FILM STERL 16 SQ IN OR LESS EA DRESS		Not Cov	No	Not Cov	No		No	No
A6258	TRNSPRT FILM STERL OVER 16 SQ BUT UNDER EQ 48 SQ EA DR		Not Cov	No	Not Cov	No		No	No
A6259	TRANSPARENT FILM STERL OVER 48 SQ IN EA DRESSING		Not Cov	No	Not Cov	No		No	No
A6260	WOUND CLEANSERS ANY TYPE ANY SIZE		Not Cov	No	Not Cov	No		Not Cov	No
A6261	WOUND FILLER GEL PASTE PER FL OZ NOS		Not Cov	Yes	Not Cov	Yes		Yes	Yes
A6262	WOUND FILLER DRY FORM PER G NOT OTHERWISE SPEC		Not Cov	Yes	Not Cov	Yes		Yes	Yes
A6266	GAUZE IMPREG NOT H2O SALINE ZINC PASTE LINR YD		Not Cov	No	Not Cov	No		No	No

Guide is subject to change at any time. If a member belongs to a group delegated for UM, contact that group for authorization. Claim payment is subject to eligibility and benefits at the time of service. Claim processing edits will apply.

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
A6402	GAUZE NON-IMPREG STERL 16 SQ OR LESS W O ADHES BORDR		Not Cov	No	Not Cov	No		No	No
A6403	GAUZE NON-IMPREG STERL OVER 16 UNDER EQ 48 SQ W O AD		Not Cov	No	Not Cov	No		No	No
A6404	GAUZE NON-IMPREG STERL OVER 48 SQ W O ADHES BORDR		Not Cov	No	Not Cov	No		Not Cov	No
A6407	PACK STRIPS NON-IMPREGNTD UP 2 IN W DTH-LINR YARD		Not Cov	No	Not Cov	No		No	No
A6410	EYE PAD STERILE EACH		Not Cov	No	Not Cov	No		No	No
A6411	EYE PAD NON-STERILE EACH		Not Cov	No	Not Cov	No		Not Cov	No
A6412	EYE PATCH OCCLUSIVE EACH		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
A6413	ADHESIVE BANDAGE FIRST-AID TYPE ANY SIZE EACH		Not Cov	NO	Not Cov	NO		Not Cov	Not Cov
A6441	PADD BANDGE NON-ELAST NON-WOVEN NON-KNITTED W DTH		Not Cov	No	Not Cov	No		No	No
A6442	CONFORMING BANDGE NON-ELAST KNITTED WOVEN NON-ST		Not Cov	No	Not Cov	No		No	No
A6443	CONFORMING BANDGE NON-ELAST KNITTED WOVEN NON-ST		Not Cov	No	Not Cov	No		No	No
A6444	CONFORMING BANDGE NON-ELAST KNITTED WOVEN NON-ST		Not Cov	No	Not Cov	No		No	No
A6445	CONFORMING BANDGE NON-ELAST KNITTED WOVEN STERL		Not Cov	No	Not Cov	No		No	No
A6446	CONFORMING BANDGE NON-ELAST KNITTED WOVEN STERL		Not Cov	No	Not Cov	No		No	No
A6447	CONFORMING BANDGE NON-ELAST KNITTED WOVEN STERL		Not Cov	No	Not Cov	No		No	No
A6448	LT COMPRS BANDGE ELAST W DTH UNDER 3 IN PER YARD		Not Cov	No	Not Cov	No		No	Not Cov
A6449	LT COMPRS BANDGE ELAST W DTH GRT THN EQ 3 AND UNDER 5 IN		Not Cov	No	Not Cov	No		No	Not Cov
A6450	LT COMPRS BANDGE ELAST W DTH GRT THN EQ 5 IN PER YARD		Not Cov	No	Not Cov	No		Not Cov	Not Cov
A6451	MOD COMPRS BANDGE LOAD RESIST W DTH GRT THN EQ 3 AND UND		Not Cov	No	Not Cov	No		Not Cov	No
A6452	HI COMPRS BANDGE LOAD RESIST W DTH GRT THN EQ 3 AND UNDE		Not Cov	No	Not Cov	No		No	No
A6453	SELF-ADHERENT BANDGE W DTH UNDER EQ 3 IN PER YARD		Not Cov	No	Not Cov	No		No	No
A6454	SELF-ADHERENT BANDGE W DTH GRT THN EQ 3 AND UNDER 5 IN		Not Cov	No	Not Cov	No		No	No
A6455	SELF-ADHERENT BANDGE W DTH GRT THN EQ 5 IN PER YARD		Not Cov	No	Not Cov	No		No	No
A6456	ZINC PASTE IMPREGNTD BANDGE W DTH GRT THN EQ 3 AND UNDER		Not Cov	No	Not Cov	No		No	No
A6457	TUBULAR DRSG W WO ELASTIC ANY W DTH PER LINEAR YD		Not Cov	No	Not Cov	No		No	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
A6460	SYN RSRB WND DRSG STER PAD 16 SI OR LESS NO ADH BO EA		Not Cov	Not Cov	Not Cov	Not Cov		No	Yes
A6461	SYN RSRB STR PAD SZ OVER 16 SI BUT UNDER EQ 48 SI NO A		Not Cov	Not Cov	Not Cov	Not Cov		No	Yes
A6501	COMPRS BURN GARMENT BODYSUIT CUSTOM FABRICATED		Not Cov	No	Not Cov	No		Not Cov	No
A6502	COMPRS BURN GARMENT CHIN STRAP CUSTOM FABRICATED		Not Cov	No	Not Cov	No		Not Cov	No
A6503	COMPRS BURN GARMENT FACIAL HOOD CUSTOM FAB		Not Cov	No	Not Cov	No		Not Cov	No
A6504	COMPRS BURN GARMENT GLOVE WRIST CUSTOM FAB		Not Cov	No	Not Cov	No		Not Cov	No
A6505	COMPRS BURN GARMENT GLOVE ELB CUSTOM FABRICATED		Not Cov	No	Not Cov	No		Not Cov	No
A6506	COMPRS BURN GARMENT GLOVE AXILLA CUSTOM FAB		Not Cov	No	Not Cov	No		Not Cov	No
A6507	COMPRS BURN GARMENT FT KNEE LENGTH CUSTOM FAB		Not Cov	No	Not Cov	No		Not Cov	No
A6508	COMPRS BURN GARMENT FT THIGH LENGTH CUSTOM FAB		Not Cov	No	Not Cov	No		Not Cov	No
A6509	COMPRS BRN GARMNT UP TRNK WAIST ARM OPENING CSTM		Not Cov	No	Not Cov	No		Not Cov	No
A6510	COMPRS BRN GARMNT TRNK ARMS TO LEG OPENING CSTM		Not Cov	No	Not Cov	No		Not Cov	No
A6511	COMPRS BRN GARMNT LW TRNK W LEG OPENING CSTM FAB		Not Cov	No	Not Cov	No		Not Cov	No
A6512	COMPRESSION BURN GARMENT NOC		Not Cov	No	Not Cov	No		No	No
A6513	COMPRS BRN MASK FCE AND OR NCK PLSTC EQU L CSTM FAB		Not Cov	No	Not Cov	No		No	No
A6530	GRADIENT COMPRESSION STK BELW KNEE 18-30 MMHG EA		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
A6531	GRADIENT COMPRESSION STK BELW KNEE 30-40 MMHG EA		Not Cov	Not Cov	Not Cov	Not Cov		No	No
A6532	GRADIENT COMPRESSION STK BELW KNEE 40-50 MMHG EA		Not Cov	Not Cov	Not Cov	Not Cov		No	No
A6533	GRADIENT COMPRESSION STK THIGH LEN 18-30 MMHG EA		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
A6534	GRADIENT COMPRESSION STK THIGH LEN 30-40 MMHG EA		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
A6535	GRADIENT COMPRESSION STK THIGH LEN 40-50 MMHG EA		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
A6536	GRADIENT COMPRS STK FULL LEN CHAP 18-30 MMHG EA		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
A6537	GRADIENT COMPRS STK FULL LEN CHAP 30-40 MMHG EA		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
A6538	GRADIENT COMPRS STK FULL LEN CHAP 40-50 MMHG EA		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
A6539	GRADIENT COMPRESSION STK WAIST LEN 18-30 MMHG EA		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
A6540	GRADIENT COMPRESSION STK WAIST LEN 30-40 MMHG EA		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
A6541	GRADIENT COMPRESSION STK WAIST LEN 40-50 MMHG EA		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
A6544	GRADIENT COMPRESSION STOCKING GARTER BELT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
A6545	GRADIENT COMPRS WRAP NONELAST BK 30-50 MM HG EA		Not Cov	Not Cov	Not Cov	Not Cov		No	No
A6549	GRADIENT COMPRESSION STOCKING SLEEVE NOS		Not Cov	Not Cov	Not Cov	No		Not Cov	No
A6550	WND CARE SET NEG PRSS WND TX ELEC PUMP SPL		Not Cov	No	Not Cov	No		No	No
A7000	CANISTER DISPOSABLE USED WITH SUCTION PUMP EACH		Not Cov	No	Not Cov	No		No	No
A7001	CANISTER NON-DISPOSABLE USED W SUCTION PUMP EACH		Not Cov	No	Not Cov	No		No	No
A7002	TUBING USED WITH SUCTION PUMP EACH		Not Cov	No	Not Cov	No		No	No
A7003	ADMN SET SM VOL NONFILTR PNEUMAT NEBULIZR DISPBL		Not Cov	No	Not Cov	No		No	No
A7004	SMALL VOLUME NONFILTR PNEUMATIC NEBULIZER DISPBL		Not Cov	No	Not Cov	No		No	No
A7005	ADMN SET W SM VOL NONFILTR NEBULIZR NON-DISPBL		Not Cov	No	Not Cov	No		No	No
A7006	ADMIN SET W SMALL VOLUME FILTR PNEUMAT NEBULIZR		Not Cov	No	Not Cov	No		No	No
A7007	LG VOL NEBULIZR DISPBL UNFIL USED W AROSL COMPRS		Not Cov	No	Not Cov	No		No	No
A7008	LG VOL NEBULIZR DISPBL PREFIL W AROSL COMPRS		Not Cov	Not Cov	Not Cov	Not Cov		No	No
A7009	RESRVOR BOTTLE NON-DISPBL W LG VOL US NEBULIZR		Not Cov	Not Cov	Not Cov	Not Cov		No	No
A7010	CORUGATD TUBING DISPBL W LG VOL NEBULIZR 100 FT		Not Cov	No	Not Cov	No		No	No
A7012	WATER COLLEC DEV USE W LG VOL NEB		Not Cov	No	Not Cov	No		No	No
A7013	FILTER DISPOSABL W AREOSOL COMPRESS US GENERATOR		Not Cov	No	Not Cov	No		No	No
A7014	FILTER NON-DISPBL USED W AROSL COMPRS US GEN		Not Cov	No	Not Cov	No		No	No
A7015	AREO MASK USED W DME NEB		Not Cov	No	Not Cov	No		No	No
A7016	DOME AND MOUTHPIECE USED W SMALL VOLUME US NEBULIZR		Not Cov	Not Cov	Not Cov	Not Cov		No	No
A7017	NEB GLASS AUTOCLAV NOT USE W O2		Not Cov	Not Cov	Not Cov	Not Cov		No	No
A7018	H2O DIST USE W LG VOL NEB 1000 ML		Not Cov	No	Not Cov	No		No	No
A7020	INTERFACE COUGH STIMULAT DEVC REPLACEMENT ONLY		Not Cov	No	Not Cov	No		No	No
A7025	HI FREQ CHST WALL OSCILLAT SYS VEST REPL PT OWND		Not Cov	Yes	Not Cov	Yes		Yes	Yes
A7026	HI FREQ CHST WALL OSCILLAT SYS HOSE REPL PT OWND		Not Cov	Not Cov	Not Cov	Not Cov		No	No
A7027	COMB ORAL NASAL MASK USED W CPAP DEVICE EACH		Not Cov	No	Not Cov	No		No	No
A7028	ORAL CUSHION COMB ORAL NASAL MASK REPL ONLY EACH		Not Cov	No	Not Cov	No		No	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
A7029	NASAL PILLOWS COMB ORAL NASL MASK REPL ONLY PAIR		Not Cov	No	Not Cov	No		No	No
A7030	FULL FACE MASK USED W POS ARWAY PRESS DEVICE EA		Not Cov	No	Not Cov	No		No	No
A7031	FACE MASK INTERFACE REPLCMT FULL FACE MASK EA		Not Cov	No	Not Cov	No		No	No
A7032	CUSHN NASAL MASK INTERFACE REPLACEMENT ONLY EACH		Not Cov	No	Not Cov	No		No	No
A7033	PILLW NASL CANNULA TYPE INTERFCE REPL ONLY PAIR		Not Cov	No	Not Cov	No		No	No
A7034	NASL INTRFCE POS ARWAY PRSS DEVC W WO HEAD STRAP		Not Cov	No	Not Cov	No		No	No
A7035	HEADGEAR USED W POSITIVE AIRWAY PRESSURE DEVICE		Not Cov	No	Not Cov	No		No	No
A7036	CHINSTRAP USED W POSITIVE AIRWAY PRESSURE DEVICE		Not Cov	No	Not Cov	No		No	No
A7037	TUBING USED WITH POSITIVE AIRWAY PRESSURE DEVICE		Not Cov	No	Not Cov	No		No	No
A7038	FILTER DISPBL USED W POS ARWAY PRESSURE DEVICE		Not Cov	No	Not Cov	No		No	No
A7039	FILTER NON DISPBL USED W POS ARWAY PRESS DEVICE		Not Cov	No	Not Cov	No		No	No
A7040	ONE WAY CHEST DRAIN VALVE		Not Cov	Not Cov	Not Cov	Not Cov		No	No
A7041	WATER SEAL DRAINAGE CONTAINER AND TUBING		Not Cov	No	Not Cov	No		No	No
A7044	ORAL INTERFACE USED W POS ARWAY PRESS DEVICE EA		Not Cov	Not Cov	Not Cov	Not Cov		No	No
A7045	EXHALATION PORT W WO SWIVEL REPLACEMENT ONLY		Not Cov	Not Cov	Not Cov	Not Cov		No	No
A7046	WATR CHAMB HUMDIFIR USED W POS ARWAY PRSS DEVC R		Not Cov	No	Not Cov	No		No	No
A7047	ORAL INTERFACE USED RESPIRATORY SUCTION PUMP EA		Not Cov	Not Cov	Not Cov	Not Cov		No	No
A7048	VACUUM DRAINAGE COLLECTION UNIT AND TUBING KIT EA		Not Cov	Not Cov	Not Cov	No		No	No
A7501	TRACHEOSTOMA VALVE INCLUDING DIAPHRAGM EACH		Not Cov	Not Cov	Not Cov	Not Cov		No	No
A7502	REPL DIAPHRAGM FCEPLATE TRACHEOSTOMA VALVE EA		Not Cov	Not Cov	Not Cov	Not Cov		No	No
A7503	FLTR HOLDER CAP REUSBL TRACHEOSTOMA EXCHG SYS EA		Not Cov	Not Cov	Not Cov	Not Cov		No	No
A7504	FLTR USE TRACHEOSTOMA HEAT AND MOISTR EXCHG SYS EA		Not Cov	Not Cov	Not Cov	Not Cov		No	No
A7505	HOUSING REUSABL W O ADHES EXCHG SYS AND VALV EA		Not Cov	Not Cov	Not Cov	Not Cov		No	No
A7506	ADHES DISC EXCHG SYS AND W TRACHEOSTOMA VALV EA		Not Cov	Not Cov	Not Cov	Not Cov		No	No
A7507	FLTR HLDR AND INTGR FLTR W O ADHES TRACHEOSTMA EXCHG		Not Cov	Not Cov	Not Cov	Not Cov		No	No
A7508	HOUS AND INTGR ADHES TRACHEOSTOMA EXCHG SYS AND VALV		Not Cov	Not Cov	Not Cov	Not Cov		No	No
A7509	FLTR HLDR AND INTGR FLTR HOUS AND ADHES TRACHEOSTOMA		Not Cov	No	Not Cov	No		No	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
A7520	TRACHEOST LARYNGECT TUBE NON-CUFFED POLYVINYLCHL		Not Cov	No	Not Cov	No		No	No
A7521	TRACHEOST LARYNGECT TUBE CUFFD PVC SILICONE EQ EA		Not Cov	No	Not Cov	No		No	No
A7522	TRACHEOST LARYNGECT TUBE STNLESS STEEL EQUAL EA		Not Cov	No	Not Cov	No		No	No
A7523	TRACHEOSTOMY SHOWER PROTECTOR EACH		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
A7524	TRACHEOSTOMA STENT STUD BUTTON EACH		Not Cov	Not Cov	Not Cov	Not Cov		No	No
A7525	TRACHEOSTOMY MASK EACH		Not Cov	No	Not Cov	No		No	No
A7526	TRACHEOSTOMY TUBE COLLAR HOLDER EACH		Not Cov	No	Not Cov	No		No	No
A7527	TRACHEOSTOMY LARYNGECTOMY TUBE PLUG STOP EACH		Not Cov	Not Cov	Not Cov	Not Cov		No	No
A8000	HELMET PROTECTVE SOFT PREFAB COMPONENT ACCSSRIES		Not Cov	No	Not Cov	No		No	No
A8001	HELMET PROTECTVE HARD PREFAB COMPONENT ACCSSRIES		Not Cov	No	Not Cov	No		No	No
A8002	HELMET PROTECTIVE SOFT CUSTOM FAB COMP ACCSSRIES		Not Cov	No	Not Cov	No		No	No
A8003	HELMET PROTECTIVE HARD CUSTOM FAB COMP ACCSSRIES		Not Cov	No	Not Cov	No		No	No
A8004	SOFT INTERFACE FOR HELMET REPLACEMENT ONLY		Not Cov	No	Not Cov	No		No	No
A9150	NONPRESCRIPTION DRUG		Not Cov	Not Cov	Not Cov	Not Cov		No	Not Cov
A9152	SINGLE VIT MINERAL TRACE ELEMENT ORAL-DOSE NOS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
A9153	MX VIT W WO MINERLS AND TRACE ELEM ORL PER DOSE NOS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
A9155	ARTIFICIAL SALIVA 30 ML		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
A9180	PEDICULOSIS TX TOPICAL ADMIN PATIENT CARETAKER		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
A9270	NONCOVERED ITEM OR SERVICE		Not Cov	Not Cov	Not Cov	Not Cov	Not Cov	Not Cov	Not Cov
A9272	WND SUCT DISPBL DSG ALL ACC AND CMPNT ANY TYP EA		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
A9273	COLD HOT FL BTL ICE CAP C HEAT AND COLD WRAP ANY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
A9274	EXTERNAL AMB INSULIN DEL SYSTEM DISPOSABLE EA	PA Req 11/1/19	Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Yes
A9275	HOME GLUCOSE DISPBL MONITOR INCLUDES TEST STRIPS		Not Cov	No	Not Cov	No		Not Cov	No
A9276	SENSOR;INVSV DISP INTRSTL CONT GLU MON SYS 1U EQ 1D		Not Cov	Yes	Not Cov	Yes		Not Cov	No
A9277	TRANSMITTER; EXT INTERSTITIAL CONT GLU MON SYS		Not Cov	Yes	Not Cov	Yes		Not Cov	No
A9278	RECEIVER MON; EXT INTERSTITIAL CONT GLU MON SYS		Not Cov	Yes	Not Cov	Yes		Not Cov	No
A9279	MONITOR FEATURE DEVC STAND-ALONE INTEGRATED NOC		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
A9280	ALERT OR ALARM DEVICE NOT OTHERWISE CLASSIFIED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
A9281	REACHING GRABBING DEVICE ANY TYPE ANY LENGTH EA		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
A9282	WIG ANY TYPE EACH		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
A9283	FOOT PRESSURE OFF LOAD SUPP DEVICE ANY TYPE EACH		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No

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			Outpatient		ASC	Office Setting			
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A9284	SPIROMETER NONELECTRONIC INCL ALL ACCESSORIES		No	Not Cov	Not Cov	Not Cov		Not Cov	No
A9285	INVERSION EVERSION CORRECTION DEVICE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
A9286	HYGIENIC ITEM DEVC DISPBL NON-DISPBL ANY TYPE EA		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
A9300	EXERCISE EQUIPMENT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
A9500	TECHNETIUM TC-99M SESTAMIBI DX PER STUDY DOSE		No	No	Not Cov	No		No	No
A9501	TECHNETIUM TC-99M TEBOROXIME DX PER STUDY DOSE		No	No	Not Cov	No		No	No
A9502	TECHNETIUM TC-99M TETROFOSMIN DX PER STUDY DOSE		No	No	Not Cov	No		No	No
A9503	TECHNETIUM TC-99M MEDRONATE DX UP TO 30 MCI		No	No	Not Cov	No		No	No
A9504	TECHNETIUM TC-99M APCITIDE DX UP TO 20 MCI		No	No	Not Cov	No		No	No
A9505	THALLIUM TL-201 THALLOUS CHLORID DX PER MCI		No	No	Not Cov	No		No	No
A9507	INDIUM IN-111 CAPROMAB PENDETIDE DX UP TO 10 MCI		No	No	Not Cov	No		No	No
A9508	IODINE I-131 IOBENGUANE SULFATE DX PER 0.5 MCI		No	No	Not Cov	No		No	No
A9509	IODINE I-123 SODIUM IODIDE DX PER MILLICURIE		No	No	Not Cov	No		No	No
A9510	TECHNETIUM TC-99M DISOFENIN DX UP TO 15 MCI		No	No	Not Cov	No		No	No
A9512	TECHNETIUM TC-99M PERTCHNETATE DX PER MILLICURIE		No	No	Not Cov	No		No	No
A9513	LUTETIUM LU 177 DOTATATE THERAPEUTIC 1 MCI	Bill through DSHS	Not Cov	Not Cov	Not Cov	Not Cov		No	Yes
A9515	CHOLINE C-11 DX PER STUDY DOSE UP TO 20 MCI		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
A9516	IODINE I-123 SODIUM IODIDE DX PER 100 UCI TO 999		No	No	Not Cov	No		No	No
A9517	IODINE I-131 SODIUM IODIDE CAPS THERAPEUTIC MCI		No	No	Not Cov	No		No	No
A9520	TECHNETIUM TC-99M TILMANOCEPT DX TO 0.5 MCI		No	No	Not Cov	No		No	No
A9521	TECHNETIUM TC-99M EXETAZIME DX UP TO 25 MCI		No	No	Not Cov	No		No	No
A9524	IODINE I-131 IODINATD SERUM ALBUMIN DX PER 5 UCI		No	No	Not Cov	No		No	No
A9526	NITROGEN N-13 AMMONIA DX STDY DOSE UP TO 40 MCI		No	No	Not Cov	No		No	No
A9527	IODINE I-125 SODIUM IODIDE SOL TX PER MCI		No	No	Not Cov	No		No	No
A9528	IODINE I-131 SODIUM IODIDE CAPSULES DX PER MCI		No	No	Not Cov	No		No	No
A9529	IODINE I-131 SODIUM IODIDE SOLIODINE I-131 SODIU		No	No	Not Cov	No		No	No
A9530	IODINE I-131 SODIUM IODIDE SOLUTION TX PER MCI		No	No	Not Cov	No		No	No
A9531	IODINE I-131 SODIM IODIDE DX TO 100 MICROCURIE		No	No	Not Cov	No		No	No
A9532	IODINE I-125 SERUM ALBUMIN DX PER 5 MICROCURIES		No	No	Not Cov	No		No	No
A9536	TECHNETIUM TC-99M DEPREOTIDE DX UP TO 35 MCI		No	No	Not Cov	No		No	No
A9537	TECHNETIUM TC-99M MEBROFENIN DX UP TO 15 MCI		No	No	Not Cov	No		No	No
A9538	TECHNETIUM TC-99M PYROPHOSHATE DX UP TO 25 MCI		No	No	Not Cov	No		No	No
A9539	TECHNETIUM TC-99M PENTETATE DX UP TO 25 MCI		No	No	Not Cov	No		No	No
A9540	TECHNETIUM TC-99M MAA DX STDY DOSE UP TO 10 MCI		No	No	Not Cov	No		No	No
A9541	TECHNETIUM TC-99M SULFUR COLLOID DX UP TO 20 MCI		No	No	Not Cov	No		No	No

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			Outpatient		ASC	Office Setting			
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A9542	INDIUM IN-111 IBRITUMOMAB TIUXETAN DX TO 5 MCI		Yes	Yes	Not Cov	Yes	Yes	Yes	
A9543	YTTRIUM Y-90 IBRITUMOMAB TIUXETAN TX TO 40 MCI		Yes	Yes	Not Cov	Yes	Yes	Yes	
A9546	COBALT CO-57 58 CYANOCOBALAMN DX TO 1 MICROCURIE		No	No	Not Cov	No	No	No	
A9547	INDIUM IN-111 OXYQUINOLINE DX PER 0.5 MILLICURIE		No	No	Not Cov	No	No	No	
A9548	INDIUM IN-111 PENTETATE DX PER 0.5 MILLICURIE		No	No	Not Cov	No	No	No	
A9550	TECHNETIUM TC-99M SODIUM GLUCEPTATE DX TO 25 MCI		No	No	Not Cov	No	No	No	
A9551	TECHNETIUM TC-99M SUCCIMER DX UP TO 10 MCI		No	No	Not Cov	No	No	No	
A9552	FLUORODEOXYGLUCOSE F-18 FDG DX UP TO 45 MCI		No	No	Not Cov	No	No	No	
A9553	CHROMIUM CR-51 SODIUM CHROMATE DX UP TO 250 UCI		No	No	Not Cov	No	No	No	
A9554	IODINE I-125 SODIUM IOTHALAMATE DX UP TO 10 UCI		No	No	Not Cov	No	No	No	
A9555	RUBIDIUM RB-82 DX PER STUDY DOSE UP TO 60 MCI		No	No	Not Cov	No	No	No	
A9556	GALLIUM GA-67 CITRATE DIAGNOSTIC PER MILLICURIE		No	No	Not Cov	No	No	No	
A9557	TECHNETIUM TC-99M BICISATE DX UP TO 25 MCI		No	No	Not Cov	No	No	No	
A9558	XENON XE-133 GAS DIAGNOSTIC PER 10 MILLICURIES		No	No	Not Cov	No	No	No	
A9559	COBALT CO-57 CYANOCOBALAMIN ORAL DX UP TO 1 UCI		No	No	Not Cov	No	No	No	
A9560	TECHNETIUM TC-99M LABELED RBC DX UP TO 30 MCI		No	No	Not Cov	No	No	No	
A9561	TECHNETIUM TC-99M OXIDRONATE DX UP TO 30 MCI		No	No	Not Cov	No	No	No	
A9562	TECHNETIUM TC-99M MERTIATIDE DX UP TO 15 MCI		No	No	Not Cov	No	No	No	
A9563	SODIUM PHOSPHATE P-32 THERAPEUTIC PER MILLICURIE		No	No	Not Cov	No	No	No	
A9564	CHROMIC PHOSHATE P-32 SUSP THERAPEUTIC PER MCI		No	No	Not Cov	No	No	No	
A9566	TECHNETIUM TC-99M FANOLESOMAB DX UP TO 25 MCI		No	No	Not Cov	No	No	No	
A9567	TECHNETIUM TC-99M PENTETATE DX AEROSOL TO 75 MCI		No	No	Not Cov	No	No	No	
A9568	TECHTM TC-99M ARCITUMOMAB DX STDY DOSE TO 45 MCI		No	No	Not Cov	No	No	No	
A9569	TECHNETIUM TC-99M EXAMETAZIME AUTOLG WBC DX DOSE		No	No	Not Cov	No	No	No	
A9570	INDIUM IN-111 AUTOLOGOUS WBC DX PER STUDY DOSE		No	No	Not Cov	No	No	No	
A9571	INDIUM IN-111 AUTOLOGOUS PLATELETS DX STUDY DOSE		No	No	Not Cov	No	No	No	
A9572	INDIUM IN-111 PENTETREOTIDE DX DOSE TO 6 MCI		No	No	Not Cov	No	No	No	
A9575	INJECTION GADOTERATE MEGLUMINE 0.1 ML		No	No	Not Cov	No	No	No	
A9576	INJECTION GADOTERIDOL PROHANCE MULTIPACK PER ML		No	No	Not Cov	No	No	No	
A9577	INJ GADOBENATE DIMEGLUMINE MULTIHANCE PER ML		No	No	Not Cov	No	No	No	
A9578	INJ GADOBENATE DIMEGLUMINE MXHANCE MXPACK PER ML		No	No	Not Cov	No	No	No	
A9579	INJECTION GADOLINIUM BASED MR CONTRAST NOS ML		No	No	Not Cov	No	No	No	

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A9580	SODIUM FLUORIDE F-18 DX PER STUDY DOSE TO 30 MCI		Not Cov	Not Cov	Not Cov	Not Cov		No	No
A9581	INJECTION GADOXETATE DISODIUM 1 ML		No	No	Not Cov	No		No	No
A9582	IODINE I-123 IOBENGUANE DX STUDY DOSE TO 15 MCI		No	No	Not Cov	No		No	No
A9583	INJECTION GADOFOSVESET TRISODIUM 1 ML		No	No	Not Cov	No		No	No
A9584	IODINE I-123 IOFLUPANE DX-STUDY DOSE UP 5 MCI		No	No	Not Cov	No		No	No
A9585	INJECTION GADOBUTROL 0.1 ML		No	No	Not Cov	No		No	No
A9586	FLORBETAPIR F18 DX PER STUDY DOSE UP TO 10 MCI		No	No	Not Cov	No		No	No
A9587	GALLIUM GA-68 DOTATATE DIAGNOSTIC 0.1 MILLICURIE		Not Cov	Not Cov	Not Cov	Not Cov		No	No
A9588	FLUCICLOVINE F-18 DIAGNOSTIC 1 MILLICURIE		Not Cov	Not Cov	Not Cov	Not Cov		No	No
A9589	INSTILLATION HEXAMINOLEVULINATE HCI 100 MG		Not Cov	Not Cov	Not Cov	Not Cov		No	No
A9597	POSITRON EMISSION TOMOGRAPHY RP DX TUMOR ID NOC		Not Cov	Not Cov	Not Cov	Not Cov		No	No
A9598	POSITRON EMISSION TOMO RP DX NON-TUMOR ID NOC		Not Cov	Not Cov	Not Cov	Not Cov		No	No
A9600	STRONTIUM SR-89 CHLORID THERAPEUTIC PER MCI		No	No	Not Cov	No		No	No
A9604	SAMARIUM SM-153 LEXIDRONAM TX DOSE TO 150 MCI		Yes	Yes	Not Cov	Yes		No	Yes
A9606	RADIUM RA-223 DICHLORIDE THERAPEUTIC PER UCI		No	No	Not Cov	No		No	No
A9698	NON-RADIOACTV CONTRST IMAG MATERIAL NOC PER STDY		Yes	Yes	Not Cov	Yes		Yes	Yes
A9699	RADIOPHARMACEUTICAL THERAPEUTIC NOC		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
A9700	SUP OF INJ CONTRST MAT-ECHO P STUDY		Not Cov	No	Not Cov	No		No	No
A9900	DME SUP ACCESS SRV-COMPON OTH HCPCS		Not Cov	Yes	Not Cov	Yes		Yes	Yes
A9901	DME DEL SET UP AND DISPNS SRVC CMPNT ANOTH HCPCS		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
A9999	MISCELLANEOUS DME SUPPLY OR ACCESSORY NOS		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
B4034	ENTERAL FEEDING SUPPLY KIT; SYRINGE FED PER DAY		Not Cov	No	Not Cov	No		No	No
B4035	ENTERAL FEEDING SUPPLY KIT; PUMP FED PER DAY		Not Cov	No	Not Cov	No		No	No
B4036	ENTERAL FEEDING SUPPLY KIT; GRAVITY FED PER DAY		Not Cov	No	Not Cov	No		No	No
B4081	NASOGASTRIC TUBING WITH STYLET		Not Cov	No	Not Cov	No		No	No
B4082	NASOGASTRIC TUBING WITHOUT STYLET		Not Cov	No	Not Cov	No		No	No
B4083	STOMACH TUBE - LEVINE TYPE		Not Cov	No	Not Cov	No		No	No
B4087	GASTROSTOMY J-TUBE STANDARD ANY MATERIAL TYPE EA		No	No	Not Cov	No		No	No
B4088	GASTROSTOMY J-TUBE LOW-PROFILE ANY MAT TYPE EACH		No	No	Not Cov	No		No	No
B4100	FOOD THICKENER ADMINISTERED ORALLY PER OUNCE	PA required age < 1 yr	Not Cov	No	Not Cov	No		Not Cov	No
B4102	ENTRAL FORMULA ADLT REPL FLS AND LYTES 500 ML EQ 1 U		Not Cov	No	Not Cov	No		Not Cov	No
B4103	ENTRAL FORMULA PED REPL FLS AND LYTES 500 ML EQ 1 U		Not Cov	No	Not Cov	No		Not Cov	No
B4104	ADDITIVE FOR ENTERAL FORMULA		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
B4105	IN-LINE CART CTG DIG ENZYME ENTERAL FEEDING EA		Not Cov	Not Cov	Not Cov	Not Cov		No	Yes
B4149	ENTRAL F MANF BLNDRIZD NAT FOODS W NUTRIENTS		Not Cov	No	Not Cov	No		No	No
B4150	ENTRAL F NUTRITIONALLY CMPL W INTACT NUTRIENTS		Not Cov	No	Not Cov	No		No	No

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B4152	ENTRAL F NUTRITION CMPL CAL DENSE INTACT NUTRNTS		Not Cov	No	Not Cov	No		No	No
B4153	ENTRAL FORMULA NUTIONALLY CMPL HYDROLYZED PROTS		Not Cov	No	Not Cov	No		No	No
B4154	ENTRAL F NUTRITION CMPL NO INHERITED DZ METAB		Not Cov	No	Not Cov	No		No	No
B4155	ENTRAL F NUTRITIONALLY INCMPL MODULAR NUTRIENTS		Not Cov	No	Not Cov	No		No	No
B4157	ENTRAL F NUTRITION CMPL INHERITED DZ METAB		Not Cov	No	Not Cov	No		No	No
B4158	ENTRAL F PED NUTRITION CMPL W INTACT NUTRNTS		Not Cov	No	Not Cov	No		No	No
B4159	ENTRAL F PED NUTRITN CMPL SOY BASD INTCT NUTRNTS		Not Cov	No	Not Cov	No		No	No
B4160	ENTRAL F PED NUTRITION CMPL CAL DENSE NUTRNTS		Not Cov	No	Not Cov	No		No	No
B4161	ENTRAL F PED HYDROLYZED AA AND PEPTIDE CHAIN PROTS		Not Cov	No	Not Cov	No		No	No
B4162	ENTRAL F PED SPCL METAB NEEDS INHERITED DZ METAB		Not Cov	No	Not Cov	No		No	No
B4164	PARNTRAL NUTRITION SOL; CARBS 50PCT LESS - HOM MIX		Not Cov	No	Not Cov	No		No	No
B4168	PARNTRAL NUTRITION SOL; AMINO ACID 3.5PCT -HOM MIX		Not Cov	No	Not Cov	No		No	No
B4172	PARNTRAL NUT SOL; AMINO ACID 5.5 THRU 7PCT -HOM MIX		Not Cov	No	Not Cov	No		No	No
B4176	PARNTRAL NUT SOL; AMINO ACID 7 THRU 8.5PCT -HOM MIX		Not Cov	No	Not Cov	No		No	No
B4178	PARNTRAL NUTRIT SOL; AMINO ACID OVER 85PCT - HOM MIX		Not Cov	No	Not Cov	No		No	No
B4180	PARNTRAL NUTRITION SOL; CARBS OVER 50PCT - HOME MIX		Not Cov	No	Not Cov	No		No	No
B4185	PARENTERAL NUTRITION SOL PER 10 GRAMS LIPIDS		Not Cov	No	Not Cov	No		No	No
B4189	PARNTRAL NUT SOL; AMINO ACID AND CARB 10-51 GMS PROT		Not Cov	No	Not Cov	No		No	No
B4193	PARNTRAL NUT SOL; AMINO ACID AND CARB 52-73 GMS PROT		Not Cov	No	Not Cov	No		No	No
B4197	PARNTRAL NUT SOL; AMINO ACID AND CARB 74-100 GM PROT		Not Cov	No	Not Cov	No		No	No
B4199	PARNTRAL NUT SOL; AMINO ACID AND CARB OVER 100 GMS PPAR		Not Cov	No	Not Cov	No		No	No
B4216	PARNTRAL NUTRITION; ADDITIVES - HOME MIX PER DAY		Not Cov	No	Not Cov	No		No	No
B4220	PARENTERAL NUTRITION SUPPLY KIT; PREMIX PER DAY		Not Cov	No	Not Cov	No		No	No
B4222	PARNTRAL NUTRITION SUPPLY KIT; HOME MIX PER DAY		Not Cov	No	Not Cov	No		No	No
B4224	PARENTERAL NUTRITION ADMINISTRATION KIT PER DAY		Not Cov	No	Not Cov	No		No	No
B5000	PARNTRAL NUT SOL; AMINO ACID AND CARBS RENL-AMIROSYN		Not Cov	No	Not Cov	No		No	No

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DOS Effective 10/1/19; Posted 10/30/19

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Code	Code Description	Comments	Apple Health & IMC Medical				IMC / BHSO (Mental Health covered svcs)	Medicare	Market Place
			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
B5100	PARENTERAL NUT SOL AMINO ACID AND CARBOHYDRATES		Not Cov	No	Not Cov	No		No	No
B5200	PARNTRAL NUT SOL AMINO ACID AND CARB STRSS-BR CHAIN		Not Cov	No	Not Cov	No		Not Cov	No
B9002	ENTERAL NUTRITION INFUSION PUMP ANY TYPE		Not Cov	No	Not Cov	No		No	No
B9004	PARENTERAL NUTRITION INFUSION PUMP PORTABLE		Not Cov	No	Not Cov	No		No	No
B9006	PARENTERAL NUTRITION INFUSION PUMP STATIONARY		Not Cov	No	Not Cov	No		No	No
B9998	NOC FOR ENTERAL SUPPLIES		Not Cov	Yes	Not Cov	Yes		Yes	Yes
B9999	NOC FOR PARENTERAL SUPPLIES		Not Cov	Yes	Not Cov	Yes		Yes	Yes
C1713	ANCHOR SCREW OPPOSING BN-TO-BN SOFT TISSUE-TO-BN		No	Not Cov	No	Not Cov		No	No
C1714	CATHETER TRANSLUMINAL ATHERECTOMY DIRECTIONAL		No	Not Cov	Not Cov	Not Cov		No	No
C1715	BRACHYTHERAPY NEEDLE		No	Not Cov	Not Cov	Not Cov		No	No
C1716	BRACHYTHERAPY NONSTRANDED GOLD-198 PER SOURCE		No	Not Cov	Not Cov	Not Cov		No	No
C1717	BRACHYTX NONSTRANDED HI DOSE IRIIDIUM-192 PER SRC		No	Not Cov	Not Cov	Not Cov		No	No
C1719	BRACHYTX NONSTRANDED NON-HD IRIIDIUM-192 PER SRC		No	Not Cov	Not Cov	Not Cov		No	No
C1721	CARDIOVERTER-DEFIBRILLATOR DUAL CHAMBER		No	Not Cov	Not Cov	Not Cov		No	No
C1722	CARDIOVERTER-DEFIBRILLATOR SINGLE CHAMBER		No	Not Cov	Not Cov	Not Cov		No	No
C1724	CATHETER TRANSLUMINAL ATHERECTOMY ROTATIONAL		No	Not Cov	Not Cov	Not Cov		No	No
C1725	CATHETER TRANSLUMINAL ANGIOPLASTY NON-LASER		No	Not Cov	Not Cov	Not Cov		No	No
C1726	CATHETER BALLOON DILATATION NON-VASCULAR		No	Not Cov	Not Cov	Not Cov		No	No
C1727	CATHETER BALLOON TISSUE DISSECTOR NON-VASCULAR		No	Not Cov	Not Cov	Not Cov		No	No
C1728	CATHETER BRACHYTHERAPY SEED ADMINISTRATION		No	Not Cov	Not Cov	Not Cov		No	No
C1729	CATHETER DRAINAGE		No	Not Cov	Not Cov	Not Cov		No	No
C1730	CATH ELECTROPHYSIOLOGY DX OTH THAN 3D MAP 19 OR LESS		No	Not Cov	Not Cov	Not Cov		No	No
C1731	CATH ELECTROPHYSIOLOGY DX OTH THAN 3D MAP 20 OR GRT		No	Not Cov	Not Cov	Not Cov		No	No
C1732	CATH ELECTROPHYSIOLOGY DX ABLAT 3D VECTOR MAP		No	Not Cov	Not Cov	Not Cov		No	No
C1733	CATH EP DX ABLAT NOT 3D VECTOR MAP NOT COOL-TIP		No	Not Cov	Not Cov	Not Cov		No	No
C1749	ENDO RETRO IMAG ILLUMINATION COLONOSCOPE DEVICE		Not Cov	Not Cov	Not Cov	Not Cov		No	No
C1750	CATHETER HEMODIAL PERITONEAL LONG-TERM		No	Not Cov	Not Cov	Not Cov		No	No
C1751	CATHETER INFUS INSRT PERIPHERALLY CNTRLMLY MIDLN		No	Not Cov	Not Cov	Not Cov		No	No
C1752	CATHETER HEMODIALYSIS SHORT-TERM		No	Not Cov	Not Cov	Not Cov		No	No
C1753	CATHETER INTRAVASCULAR ULTRASOUND		No	Not Cov	Not Cov	Not Cov		No	No
C1754	CATHETER INTRADISCAL		No	Not Cov	Not Cov	Not Cov		No	No
C1755	CATHETER INTRASPINAL		No	Not Cov	Not Cov	Not Cov		No	No
C1756	CATHETER PACING TRANSESOPHAGEAL		No	Not Cov	Not Cov	Not Cov		No	No

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			Outpatient		ASC	Office Setting			
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C1757	CATHETER THROMBECTOMY EMBOLECTOMY		No	Not Cov	Not Cov	Not Cov		No	No
C1758	CATHETER URETERAL		No	Not Cov	Not Cov	Not Cov		No	No
C1759	CATHETER INTRACARDIAC ECHOCARDIOGRAPHY		No	Not Cov	Not Cov	Not Cov		No	No
C1760	CLOSURE DEVICE VASCULAR		No	Not Cov	Not Cov	Not Cov		No	No
C1762	CONNECTIVE TISSUE HUMAN		No	Not Cov	Not Cov	Not Cov		No	No
C1763	CONNECTIVE TISSUE NON-HUMAN		No	Not Cov	Not Cov	Not Cov		No	No
C1764	EVENT RECORDER CARDIAC		No	Not Cov	Not Cov	Not Cov		No	No
C1765	ADHESION BARRIER		No	Not Cov	Not Cov	Not Cov		No	No
C1766	INTRDUCR SHEATH GUID INTRACARD EP NOT PEEL-AWAY		No	Not Cov	Not Cov	Not Cov		No	No
C1767	GENERATOR NEUROSTIMULATOR NONRECHARGEABLE		No	Not Cov	Not Cov	Not Cov		No	No
C1768	GRAFT VASCULAR		No	Not Cov	Not Cov	Not Cov		No	No
C1769	GUIDE WIRE		No	Not Cov	Not Cov	Not Cov		No	No
C1770	IMAGING COIL MAGNETIC RESONANCE		No	Not Cov	Not Cov	Not Cov		No	No
C1771	REPAIR DEVICE URINARY INCONTINENCE W SLING GRAFT		No	Not Cov	Not Cov	Not Cov		No	No
C1772	INFUSION PUMP PROGRAMMABLE		No	Not Cov	Not Cov	Not Cov		No	No
C1773	RETRIEVAL DEVICE INSERTABLE		No	Not Cov	Not Cov	Not Cov		No	No
C1776	JOINT DEVICE		No	Not Cov	Not Cov	Not Cov		No	No
C1777	LEAD CARDIOVERT-DEFIB ENDOCARDIAL SINGLE COIL		No	Not Cov	Not Cov	Not Cov		No	No
C1778	LEAD NEUROSTIMULATOR		No	Not Cov	Not Cov	Not Cov		No	No
C1779	LEAD PACEMAKER TRANSVENOUS VDD SINGLE PASS		No	Not Cov	Not Cov	Not Cov		No	No
C1780	LENS INTRAOCULAR		No	Not Cov	Not Cov	Not Cov		No	No
C1781	MESH		No	Not Cov	No	Not Cov		No	No
C1782	MORCELLATOR		No	Not Cov	Not Cov	Not Cov		No	No
C1783	OCULAR IMPLANT AQUEOUS DRAINAGE ASSIST DEVICE		No	Not Cov	Not Cov	Not Cov		No	No
C1784	OCULAR DEVICE INTRAOPERATIVE DETACHED RETINA		No	Not Cov	Not Cov	Not Cov		No	No
C1785	PACEMAKER DUAL CHAMBER RATE-RESPONSIVE		No	Not Cov	Not Cov	Not Cov		No	No
C1786	PACEMAKER SINGLE CHAMBER RATE-RESPONSIVE		No	Not Cov	Not Cov	Not Cov		No	No
C1787	PATIENT PROG PATIENT PROGRAMMER NEUROSTIMULATOR		No	Not Cov	Not Cov	Not Cov		No	No
C1788	PORT INDWELLING		No	Not Cov	Not Cov	Not Cov		No	No
C1789	PROSTHESIS BREAST		No	Not Cov	Not Cov	Not Cov		No	No
C1813	PROSTHESIS PENILE INFLATABLE		Not Cov	Not Cov	Not Cov	Not Cov		No	No
C1814	RETINAL TAMPONADE DEVICE SILICONE OIL		No	Not Cov	Not Cov	Not Cov		No	No
C1815	PROSTHESIS URINARY SPHINCTER		No	Not Cov	Not Cov	Not Cov		No	No
C1816	RECEIVER AND OR TRANSMITTER NEUROSTIMULATOR		No	Not Cov	Not Cov	Not Cov		No	No
C1817	SEPTAL DEFECT IMPLANT SYSTEM INTRACARDIAC		No	Not Cov	Not Cov	Not Cov		No	No
C1818	INTEGRATED KERATOPROSTHESIS		No	Not Cov	Not Cov	Not Cov		No	No
C1819	SURGICAL TISSUE LOCALIZATION AND EXCISION DEVICE		No	Not Cov	Not Cov	Not Cov		No	No
C1820	GEN NEUROSTIM W RECHRG BATTERY AND CHARGING SYSTEM		No	Not Cov	Not Cov	Not Cov		No	No
C1821	INTERSPINOUS PROCESS DISTRACTION DEVICE IMPL		Not Cov	Not Cov	Not Cov	Not Cov		No	No
C1822	GEN NEUROSTIM HIGH FREQ RECHARG BATT AND CHARG SYS		Not Cov	Not Cov	Not Cov	Not Cov		No	No

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C1823	GENERATR NEUROSTIM NON-RECHRGABL TV S AND STIM LEADS		Not Cov	Not Cov	Not Cov	Not Cov		No	Yes
C1830	POWERED BONE MARROW BIOPSY NEEDLE		Not Cov	Not Cov	Not Cov	Not Cov		No	No
C1840	LENS INTRAOCULAR TELESCOPIC		Not Cov	Not Cov	Not Cov	Not Cov		No	No
C1841	RETINAL PROSTH INCL ALL INTRL AND EXTERNL CMPNT		Not Cov	Not Cov	Not Cov	Not Cov		No	No
C1842	RETINAL PROS ALL INT AND EXT CMPNT; ADD-ON TO C1841		Not Cov	Not Cov	Not Cov	Not Cov		No	No
C1874	STENT COATED COVERED WITH DELIVERY SYSTEM		No	Not Cov	Not Cov	Not Cov		No	No
C1875	STENT COATED COVERED WITHOUT DELIVERY SYSTEM		No	Not Cov	Not Cov	Not Cov		No	No
C1876	STENT NON-COATED NON-COVERED W DELIVERY SYSTEM		No	Not Cov	Not Cov	Not Cov		No	No
C1877	STENT NON-COATED NON-COVR WITHOUT DELIV SYSTEM		No	Not Cov	Not Cov	Not Cov		No	No
C1878	MATERIAL FOR VOCAL CORD MEDIALIZATION SYNTHETIC		No	Not Cov	Not Cov	Not Cov		No	No
C1880	VENA CAVA FILTER		No	Not Cov	Not Cov	Not Cov		No	No
C1881	DIALYSIS ACCESS SYSTEM		No	Not Cov	Not Cov	Not Cov		No	No
C1882	CARDIOVERT-DEFIB OTH THAN SINGLE DUAL CHAMB		No	Not Cov	Not Cov	Not Cov		No	No
C1883	ADAPTOR EXT PACING LEAD NEUROSTIMULATOR LEAD		No	Not Cov	Not Cov	Not Cov		No	No
C1884	EMBOLIZATION PROTECTIVE SYSTEM		No	Not Cov	Not Cov	Not Cov		No	No
C1885	CATHETER TRANSLUMINAL ANGIOPLASTY LASER		No	Not Cov	Not Cov	Not Cov		No	No
C1886	CATH EXTRAVASCULAR TISSUE ABLAT MODAL INSERTABLE		Not Cov	Not Cov	Not Cov	Not Cov		No	No
C1887	CATHETER GUIDING		No	Not Cov	Not Cov	Not Cov		No	No
C1888	CATHETER ABLATION NON-CARDIAC ENDOVASCULAR		No	Not Cov	Not Cov	Not Cov		No	No
C1889	IMPLANTABLE INSERTABL DEVC FOR DEVC INT PROC NOC		Not Cov	Not Cov	Not Cov	Not Cov		No	No
C1890	No device w/dev-intensive px		Not Cov	Not Cov	Not Cov	Not Cov		No	No
C1891	INFUSION PUMP NON-PROGRAMMABLE PERMANENT		No	Not Cov	Not Cov	Not Cov		No	No
C1892	INTRDUCR SHEATH INTRCARD EP FIX-CURVE PEEL-AWAY		No	Not Cov	Not Cov	Not Cov		No	No
C1893	INTRDUCR SHEATH INTRCARD EP CURVE NOT PEEL-AWAY		No	Not Cov	Not Cov	Not Cov		No	No
C1894	INTRDUCR SHEATH NOT GUID INTRACARD EP NON-LASR		No	Not Cov	Not Cov	Not Cov		No	No
C1895	LEAD CARDIOVERT-DEFIB ENDOCARDIAL DUAL COIL		No	Not Cov	Not Cov	Not Cov		No	No
C1896	LEAD CARDIOVRT-DFIB NOT ENDOCARDIAL 1 DUL COIL		No	Not Cov	Not Cov	Not Cov		No	No
C1897	LEAD NEUROSTIMULATOR TEST KIT		No	Not Cov	Not Cov	Not Cov		No	No
C1898	LEAD PACEMKR OTH THAN TRNS VDD SINGLE PASS		No	Not Cov	Not Cov	Not Cov		No	No
C1899	LEAD PACEMAKER CARDIOVERT-DEFIB COMBINATION		No	Not Cov	Not Cov	Not Cov		No	No
C1900	LEAD LEFT VENTRICULAR CORONARY VENOUS SYSTEM		No	Not Cov	Not Cov	Not Cov		No	No
C2613	LUNG BIOPSY PLUG WITH DELIVERY SYSTEM		Not Cov	Not Cov	Not Cov	Not Cov		No	No
C2614	PROBE PERCUTANEOUS LUMBAR DISCECTOMY		No	Not Cov	Not Cov	Not Cov		No	No
C2615	SEALANT PULMONARY LIQUID		No	Not Cov	Not Cov	Not Cov		No	No
C2616	BRACHYTHERAPY NONSTRANDED YTTRIUM-90 PER SOURCE		Yes	Not Cov	Not Cov	Not Cov		Yes	Yes

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
C2617	STENT NON-COR TEMPORARY WITHOUT DELIVERY SYSTEM		No	Not Cov	Not Cov	Not Cov		No	No
C2618	PROBE NEEDLE CRYOABLATION		No	Not Cov	Not Cov	Not Cov		No	No
C2619	PACEMAKER DUAL CHAMBER NON RATE-RESPONSIVE		No	Not Cov	Not Cov	Not Cov		No	No
C2620	PACEMAKER SINGLE CHAMBER NON RATE-RESPONSIVE		No	Not Cov	Not Cov	Not Cov		No	No
C2621	PACEMAKER OTHER THAN SINGLE OR DUAL CHAMBER		No	Not Cov	Not Cov	Not Cov		No	No
C2622	PROSTHESIS PENILE NON-INFLATABLE		Not Cov	Not Cov	Not Cov	Not Cov		No	No
C2623	CATHETER TRNSLUM ANGPLASTY DRUG-COATED NON-LASER		No	Not Cov	Not Cov	Not Cov		No	No
C2624	IMPL WIRELESS PULM ARTERY PRESS SENSOR DEL CATH		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
C2625	STENT NON-CORONARY TEMPORARY W DELIVERY SYSTEM		No	Not Cov	Not Cov	Not Cov		No	No
C2626	INFUSION PUMP NON-PROGRAMMABLE TEMPORARY		No	Not Cov	Not Cov	Not Cov		No	No
C2627	CATHETER SUPRAPUBIC CYSTOSCOPIC		No	Not Cov	Not Cov	Not Cov		No	No
C2628	CATHETER OCCLUSION		No	Not Cov	Not Cov	Not Cov		No	No
C2629	INTRDUCR SHTH OTH THAN GUID OTH THAN IC EEG LASR		No	Not Cov	Not Cov	Not Cov		No	No
C2630	CATH EP DX ABLAT NOT 3D VECTOR MAP COOL-TIP		No	Not Cov	Not Cov	Not Cov		No	No
C2631	REPAIR DEVICE URINARY INCONT WITHOUT SLING GRAFT		No	Not Cov	Not Cov	Not Cov		No	No
C2634	BRACHYTX NONSTRAND IODINE-125 OVER 1.01 MCI PER SRC		No	Not Cov	Not Cov	Not Cov		No	No
C2635	BRACHYTX NONSTRND PALLADIUM-103 OVER 2.2 MCI PER SRC		No	Not Cov	Not Cov	Not Cov		No	No
C2636	BRACHYTX LINEAR NONSTRAND PALLADIUM-103 PER 1 MM		No	Not Cov	Not Cov	Not Cov		No	No
C2637	BRACHYTX NONSTRANDED YTTERBIUM-169 PER SOURCE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
C2638	BRACHYTHERAPY STRANDED IODINE-125 PER SOURCE		No	Not Cov	Not Cov	Not Cov		No	No
C2639	BRACHYTHERAPY NONSTRANDED IODINE-125 PER SOURCE		No	Not Cov	Not Cov	Not Cov		No	No
C2640	BRACHYTHERAPY STRANDED PALLADIUM-103 PER SOURCE		No	Not Cov	Not Cov	Not Cov		No	No
C2641	BRACHYTHERAPY NONSTRANDED PALLADIUM-103 PER SRC		No	Not Cov	Not Cov	Not Cov		No	No
C2642	BRACHYTHERAPY STRANDED CESIUM-131 PER SOURCE		No	Not Cov	Not Cov	Not Cov		No	No
C2643	BRACHYTHERAPY NONSTRANDED CESIUM-131 PER SOURCE		No	Not Cov	Not Cov	Not Cov		No	No
C2644	BRACHYTHERAPY SRC CESIUM-131 CHLORID SOL PER MCI		Not Cov	Not Cov	Not Cov	Not Cov		No	No
C2645	BRACHYTHERAPY PLANAR SRC PALLADIUM-103 PER SQ ML		No	Not Cov	Not Cov	Not Cov		No	No
C2698	BRACHYTHERAPY SOURCE STRANDED NOS PER SOURCE		Yes	Not Cov	Not Cov	Not Cov		Yes	Yes
C2699	BRACHYTHERAPY SOURCE NONSTRANDED NOS PER SOURCE		Yes	Not Cov	Not Cov	Not Cov		Yes	Yes

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C5271	APPL SKN GRFT TRUNK ARM LEG 100 CM; 1ST 25 CM OR LESS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
C5272	APPL SG TRNK ARMS LEGS AREA 100 CM; EA ADD 25 CM		Not Cov	Not Cov	Not Cov	Not Cov		No	No
C5273	APPL SG TRUNK ARM LEG AREA GRT THN EQ100 CM;1ST 100 CM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
C5274	APPL SG TRNK ARM LEG AREAGRT THN EQ100 CM;EA ADD 100 CM		Not Cov	Not Cov	Not Cov	Not Cov		No	No
C5275	APPL SG F-S-N-H-F-G-M-D A TO 100 CM; 1ST 25 CM OR LESS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
C5276	APPL SG F-S-N-H-F-G-M-D A TO 100 CM;EA ADD 25 CM		Not Cov	Not Cov	Not Cov	Not Cov		No	No
C5277	APP SG F N HF G A GRT THN EQ100 CM;1ST 100 CM 1PCT A CHLD		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
C5278	APP SG F N HF G A GRT THN EQ100 CM;EA ADD 100 CM 1PCT CHL		Not Cov	Not Cov	Not Cov	Not Cov		No	No
C8900	MR ANGIOGRAPHY WITH CONTRAST ABDOMEN		Yes	Not Cov	Not Cov	Not Cov		Yes	Yes
C8901	MR ANGIOGRAPHY WITHOUT CONTRAST ABDOMEN		Yes	Not Cov	Not Cov	Not Cov		Yes	Yes
C8902	MR ANGIO WITHOUT CONTRST FOLLOWED W CONTRST ABD		Yes	Not Cov	Not Cov	Not Cov		Yes	Yes
C8903	MR IMAGING WITH CONTRAST BREAST; UNILATERAL		Yes	Not Cov	Not Cov	Not Cov		Yes	Yes
C8905	MR IMAG W O CONTRST FLWED W CONTRST BRST; UNI		Yes	Not Cov	Not Cov	Not Cov		Yes	Yes
C8906	MR IMAGING WITH CONTRAST BREAST; BILATERAL		Yes	Not Cov	Not Cov	Not Cov		Yes	Yes
C8908	MR IMAG W O CONTRST FLWED W CONTRST BRST; BIL		Yes	Not Cov	Not Cov	Not Cov		Yes	Yes
C8909	MR ANGIOGRAPHY WITH CONTRAST CHEST		Yes	Not Cov	Not Cov	Not Cov		Yes	Yes
C8910	MR ANGIOGRAPHY WITHOUT CONTRAST CHEST		Yes	Not Cov	Not Cov	Not Cov		Yes	Yes
C8911	MR ANGIO WITHOUT CONTRST FOLLOWED W CONTRST CHST		Yes	Not Cov	Not Cov	Not Cov		Yes	Yes
C8912	MR ANGIOGRAPHY WITH CONTRAST LOWER EXTREMITY		Yes	Not Cov	Not Cov	Not Cov		Yes	Yes
C8913	MR ANGIOGRAPHY WITHOUT CONTRAST LOWER EXTREMITY		Yes	Not Cov	Not Cov	Not Cov		Yes	Yes
C8914	MR ANGIO W O CONTRST FLWED W CONTRST LOW EXTRM		Yes	Not Cov	Not Cov	Not Cov		Yes	Yes
C8918	MR ANGIOGRAPHY WITH CONTRAST PELVIS		Yes	Not Cov	Not Cov	Not Cov		Yes	Yes
C8919	MR ANGIOGRAPHY WITHOUT CONTRAST PELVIS		Yes	Not Cov	Not Cov	Not Cov		Yes	Yes
C8920	MRA WITHOUT CONTRAST FOLLOWED W CONTRAST PELVIS		Yes	Not Cov	Not Cov	Not Cov		Yes	Yes
C8921	TTE W CONTRAST OR W O FLW W CONTRAST; COMPLETE		No	Not Cov	Not Cov	Not Cov		No	No
C8922	TTE W CONTRAST OR W O FLW W CONTRAST; F U OR LTD		No	Not Cov	Not Cov	Not Cov		No	No
C8923	TTE FLW W CNTRST R-T DOC 2D INCL M-MODE REC CMPL		No	Not Cov	Not Cov	Not Cov		No	No
C8924	TTE FLW W CNTRST R-T 2D INCL M-MODE REC FU LTD		No	Not Cov	Not Cov	Not Cov		No	No
C8925	TEE W OR W O FLW W CNTRST REAL TIME 2D; ACQ I AND R		No	Not Cov	Not Cov	Not Cov		No	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
C8926	TEE W OR W O FLW W CNTRST; PROBE PLCMT ACQ I AND R		No	Not Cov	Not Cov	Not Cov		No	No
C8927	TEE ASSESS CARD PUMP FUNCT AND TX MSR IMMED TM BASIS		No	Not Cov	Not Cov	Not Cov		No	No
C8928	TTE W CNTRST INCL M-MODE REC REST AND CV ST W I AND R		No	Not Cov	Not Cov	Not Cov		No	No
C8929	TTE CMPL SPEC DOPPLER AND COLOR FLOW DOPPLER ECHO		No	Not Cov	Not Cov	Not Cov		No	No
C8930	TTE CMPL DUR REST AND CVST W I AND R W PHYS SUP		No	Not Cov	Not Cov	Not Cov		No	No
C8931	MR ANGIOGRAPHY W CONTRAST SPINAL CANAL CONTENTS		Yes	Not Cov	Not Cov	Not Cov		Yes	Yes
C8932	MR ANGIOGRAPHY W O CONTRST SPINAL CANAL CONTENTS		Yes	Not Cov	Not Cov	Not Cov		Yes	Yes
C8933	MR ANGIO NO CONTRST FLW W CONTRST SP CANAL CNTN		Yes	Not Cov	Not Cov	Not Cov		Yes	Yes
C8934	MR ANGIOGRAPHY WITH CONTRAST UPPER EXTREMITY		Yes	Not Cov	Not Cov	Not Cov		Yes	Yes
C8935	MR ANGIOGRAPHY WITHOUT CONTRAST UPPER EXTREMITY		Yes	Not Cov	Not Cov	Not Cov		Yes	Yes
C8936	MR ANGIO W O CONTRST FOLLOWED W CONTRST UP EXT		Yes	Not Cov	Not Cov	Not Cov		Yes	Yes
C8937	CMP-AID DETN INCL CMP ALG ANALYS BR MRI IMG DATA		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
C8957	IV INFUS TX DX; INIT PROLNG RQR PORT IMPL PUMP		No	Not Cov	Not Cov	Not Cov		No	No
C9041	INJECTION COAGULATION FACTR XA INACTIVATED 10 MG		No	Not Cov	Not Cov	Not Cov		No	No
C9042	INJECTION BENDAMUSTINE HCL 1 MG		Not Cov	Not Cov	Not Cov	Not Cov		No	No
C9046	COCAINE HYDROCHLORIDE NASAL SOL TOP ADMN 1 MG		No	Not Cov	Not Cov	Not Cov		No	No
C9047	INJECTION CAPLACIZUMAB-YHDP 1 MG		Yes	Not Cov	Not Cov	Not Cov		No	Yes
C9113	INJECTION PANTOPRAZOLE SODIUM PER VIAL		No	Not Cov	Not Cov	Not Cov		No	No
C9132	PROTHROMBIN CMPLX CONC KCENTRA I.U. FCT IX ACTV	Bill through DSHS	Not Cov	Not Cov	Not Cov	Not Cov		Yes	No
C9141	INJECTION FACTOR VIII PEGYLATED-AUCL 1 IU		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
C9248	INJECTION CLEVIDIPINE BUTYRATE 1 MG		No	Not Cov	Not Cov	Not Cov		No	No
C9250	HUMAN PLASMA FIBRIN SEALANT VAPOR-HEATED SD 2ML		No	Not Cov	Not Cov	Not Cov		No	No
C9254	INJECTION LACOSAMIDE 1 MG		No	Not Cov	Not Cov	Not Cov		No	No
C9257	INJECTION BEVACIZUMAB 0.25 MG	No PA when billed with ocular dx	Yes	Not Cov	Not Cov	Not Cov		Yes	Yes
C9285	LIDOCAINE 70 MG TETRACAINE 70 MG PER PATCH		No	Not Cov	Not Cov	Not Cov		Not Cov	No
C9290	INJECTION BUPIVACAINE LIPOSOME 1 MG		No	Not Cov	Not Cov	Not Cov		No	No
C9293	INJECTION GLUCARPIDASE 10 UNITS		Yes	Not Cov	Not Cov	Not Cov		Yes	Yes
C9352	MICROPOROUS COLLAGEN IMPLANTABLE TUBE PER CM LEN		No	Not Cov	Not Cov	Not Cov		No	No
C9353	MICROPOROUS COLLAGEN IMPLANTABLE SLIT TUBE CM		No	Not Cov	Not Cov	Not Cov		No	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
C9354	ACELLULAR PERICARDIAL TISS MATRIX NONHUMAN SQ CM		Not Cov	Not Cov	Not Cov	Not Cov		No	No
C9355	COLLAGEN NERVE CUFF PER 0.5 CENTIMETER LENGTH		Not Cov	Not Cov	Not Cov	Not Cov		No	No
C9356	TENDON POROUS MATRIX COLLAGEN AND GAG PER SQ CM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
C9358	DERM SUBST NAT NONDNTR COL FET BOV PER 0.5 SQ CM		Not Cov	Not Cov	Not Cov	Not Cov		No	No
C9359	POROUS COLL MATRIX BONE FILLER PUTTY PER 0.5 CC		Not Cov	Not Cov	Not Cov	Not Cov		No	No
C9360	DERM SUBST NAT NONDNTRD COL NEO BOV ORIG 0.5 CM		Not Cov	Not Cov	Not Cov	Not Cov		No	No
C9361	COLLEGEN MATRIX NERVE WRAP PER 0.5 CM LENGTH		Not Cov	Not Cov	Not Cov	Not Cov		No	No
C9362	POROUS COLL MATRIX BONE FILLER STRIP PER 0.5 CC		Not Cov	Not Cov	Not Cov	Not Cov		No	No
C9363	SKIN SUBST INTEGRA MESH BILAYER MATRIX PER SQ CM		No	Not Cov	Not Cov	Not Cov		No	No
C9364	PORCINE IMPLANT PERMACOL PER SQUARE CM		Not Cov	Not Cov	Not Cov	Not Cov		No	No
C9399	UNCLASSIFIED DRUGS OR BIOLOGICALS		Yes	Not Cov	Not Cov	Not Cov		Yes	Yes
C9407	IODINE I-131 IOBENGUANE DIAGNOSTIC 1 MCI		Not Cov	Not Cov	Not Cov	Not Cov		No	Yes
C9408	IODINE I-131 IOBENGUANE THERAPEUTIC 1 MCI		Not Cov	Not Cov	Not Cov	Not Cov		No	Yes
C9460	INJECTION CANGRELOR 1 MG		No	Not Cov	Not Cov	Not Cov		No	No
C9462	INJECTION DELAFLOXACIN 1 MG		Not Cov	Not Cov	Not Cov	Not Cov		No	No
C9482	INJECTION SOTALOL HYDROCHLORIDE 1 MG		No	Not Cov	Not Cov	Not Cov		Not Cov	No
C9488	INJECTION CONIVAPTAN HYDROCHLORIDE 1 MG		Yes	Not Cov	Not Cov	Not Cov		No	Yes
C9600	PC TRNSCTH PLCMT RX ELUT IC STENTS; 1 MAJ CA BR		No	Not Cov	Not Cov	Not Cov		No	No
C9601	PC TRNSCTH PLCMT RX-ELUT IC STNT;EA ADD BR MCA		No	Not Cov	Not Cov	Not Cov		Not Cov	No
C9602	PC TL COR ATHERECT W RX ELUT IC STENT; 1 MCA BR		No	Not Cov	Not Cov	Not Cov		Not Cov	No
C9603	PERQ TL COR ATHERECT; EA ADD BR MAJ CORONARY ART		No	Not Cov	Not Cov	Not Cov		Not Cov	No
C9604	PC TL REV OF THRU CABG COMB DE IC STNT; 1 VES		No	Not Cov	Not Cov	Not Cov		Not Cov	No
C9605	PC TL REV OF THRU CABG; EA ADD BR SUBTEND BP GFT		No	Not Cov	Not Cov	Not Cov		Not Cov	No
C9606	PERQ TL REV AC TOTAL SUBTOTAL OCCLUSION 1 VES		No	Not Cov	Not Cov	Not Cov		Not Cov	No
C9607	PC TL REV CHRN TOT OCCL CA CA BR CABG; 1 VES		No	Not Cov	Not Cov	Not Cov		No	No
C9608	PC TL REV CHRN TOT OCCL; EA ADD CA CA BR BP GFT		No	Not Cov	Not Cov	Not Cov		Not Cov	No
C9725	PLCMT ENDORECT INTRACAV APPLIC HI INTNS BRACHYTX		No	Not Cov	No	Not Cov		No	No
C9726	PLCMT AND REMV AA INTO BRST IORT ADD-ON BRST PROC		No	Not Cov	No	Not Cov		No	No
C9727	INSERTION IMPL TO SOFT PALATE; MINIMUM 3 IMPL		No	Not Cov	No	Not Cov		No	No
C9728	PLCMT INTERSTITIAL DEV NOT ABD PELV PROS RP THOR		No	Not Cov	Not Cov	Not Cov		No	No
C9733	NONOPHTHALMIC FLUORESCENT VASCULAR ANGIOGRAPHY		No	Not Cov	Not Cov	Not Cov		No	No
C9734	FOCUSED U S ABL TX INT OTH THAN UT LEIOMYOMATA		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Yes
C9738	ADJUNCTIVE BLUE LIGHT CYSTOSCOPY FLUO IMAG AGT		No	Not Cov	Not Cov	Not Cov		Yes	No
C9739	CYSTURETHRSCPY INSRT TRANSPROSTAT IMPL; 1-3 IMPL		Yes	Not Cov	Not Cov	Not Cov		Yes	Yes

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			Outpatient		ASC	Office Setting			
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C9740	CYSTURETHRSCPY INSRT TRANSPROSTAT IMPL; 4 OR GRT IMPL		Yes	Not Cov	Not Cov	Not Cov		Yes	Yes
C9745	NASAL ENDO SURG; BALLOON DILAT EUSTACHIAN TUBE		Not Cov	Not Cov	Not Cov	Not Cov		No	No
C9747	ABLATION PROSTATE TRANSRECTAL HIFU INCL I GUID		Yes	Not Cov	Not Cov	Not Cov		Yes	Yes
C9749	REPAIR NASAL VEST LATERAL WALL STEN W IMPLANT		Not Cov	Not Cov	Not Cov	Not Cov		No	No
C9751	BRONCHOSCOPY RIGID FLEXIBLE TRANSBRON ABL LESION		Not Cov	Not Cov	Not Cov	Not Cov		No	Yes
C9752	DESTRUC IO BASIVERTEB NERV 1ST 2 VERT B LUMB SAC		Not Cov	Not Cov	Not Cov	Not Cov		No	Yes
C9753	DESTRUC IO BASIVERTEB NERV EA ADD VERT BODY L S		Not Cov	Not Cov	Not Cov	Not Cov		No	Yes
C9754	CREATION AV FISTULA PERCUTANEOUS; DIRCT ANY SITE		Not Cov	Not Cov	Not Cov	Not Cov		No	Yes
C9755	CREATION OF ARTERIOVENOUS FISTULA PERCUTANEOUS		Not Cov	Not Cov	Not Cov	Not Cov		No	Yes
C9756	INTRAOPERATIVE NIR FLUOR LM OF LYM W ADMIN ICG		Not Cov	Not Cov	Not Cov	Not Cov		No	No
C9898	RADIOLABELED PROD PROV DURING A HOSPITAL IP STAY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
C9899	IMPL PROS DEVC PAYBLE IP WHO DO NOT HAVE IP COV		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
D0120	PERIODIC ORAL EVALUATION ESTABLISHED PATIENT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D0140	LIMITED ORAL EVALUATION - PROBLEM FOCUSED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D0145	ORAL EVAL PT UND 3 YR AGE CNSL W PRIM CAREGIVER		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D0150	COMP ORAL EVALUATION - NEW ESTABLISHED PATIENT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D0160	DTL AND EXT ORAL EVALUATION - PROBLEM FOCUSED REPORT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D0170	RE-EVALUATION - LIMITED PROBLEM FOCUSED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D0171	RE-EVALUATION - POST-OPERATIVE OFFICE VISIT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D0180	COMP PERIODONTAL EVALUATION - NEW EST PATIENT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D0190	SCREENING OF A PATIENT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D0191	ASSESSMENT OF A PATIENT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D0210	INTRAORAL-COMPLETE SERIES OF RADIOGRAPHIC IMAGES		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D0220	INTRAORAL - PERIAPICAL FIRST RADIOGRAPHIC IMAGE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D0230	INTRAORAL - PERIAPICAL EACH ADD RADIOGRAPH IMAGE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D0240	INTRAORAL - OCCLUSAL RADIOGRAPHIC IMAGE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D0250	EXTRA-ORAL - 2D PROJECTION X-RAY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D0251	EXTRA-ORAL POSTERIOR DENTAL RADIOGRAPHIC IMAGE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D0270	BITEWING - SINGLE RADIOGRAPHIC IMAGE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D0272	BITEWINGS - TWO RADIOGRAPHIC IMAGES		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D0273	BITEWINGS - THREE RADIOGRAPHIC IMAGES		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D0274	BITEWINGS - FOUR RADIOGRAPHIC IMAGES		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D0277	VERTICAL BITEWINGS - 7 TO 8 RADIOGRAPHIC IMAGES		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D0310	SIALOGRAPHY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov

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			Outpatient		ASC	Office Setting			
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D0320	TEMPOROMANDIBULAR JOINT ARTHROGRAM INCL INJ		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D0321	OTHER TMJ RADIOGRAPHIC IMAGES BY REPORT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D0322	TOMOGRAPHIC SURVEY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D0330	PANORAMIC RADIOGRAPHIC IMAGE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D0340	2D CEPHALOMETRIC X-RAY - ACQUISITION MSR AND ANALY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D0350	ORAL FACIAL PHOTO IMAGE OBTAIN INTRA EXTRAORLLY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D0351	3D PHOTOGRAPHIC IMAGE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D0364	CONE BEAM CT CAP AND INTEPR LTD FD VIEW- UNDER 1 WHOLE JAW		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D0365	CONE BEAM CT CAP AND INT FD VW 1 FULL DENT ARCH-MAND		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D0366	CONE BM CT CAP AND INT FD VIEW 1 FULL DENT ARCH-MAX		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D0367	CONE BEAM CT CAPTURE AND INTERP FD VIEW BOTH JAWS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D0368	CONE BEAM CT CAP AND INTEPR TMJ SERIES 2 OR GRT EXPOSURES		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D0369	MAXILLOFACIAL MRI CAPTURE AND INTERPRETATION		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D0370	MAXILLOFACIAL ULTRASOUND CAPTURE AND INTERPRETATION		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D0371	SIALOENDOSCOPY CAPTURE AND INTERPRETATION		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D0380	CONE BEAM CT IMAG CAP W LTD FD VIEW- UNDER 1 WHOLE JAW		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D0381	CONE BM CT IMAG CAP FD VW 1 FULL DENT ARCH-MAND		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D0382	CONE BEAM CT IMAG CAP FD VW 1 FULL DENT ARCH-MAX		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D0383	CONE BEAM CT IMAGE CAPTURE FIELD VIEW BOTH JAWS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D0384	CONE BEAM CT IMAG CAP TMJ SERIES 2 OR GRT EXPOSURES		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D0385	MAXILLOFACIAL MRI IMAGE CAPTURE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D0386	MAXILLOFACIAL ULTRASOUND IMAGE CAPTURE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D0391	INTEPR DX IMAG PRACTITNER NOT ASSOC CAP IMAG RPT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D0393	TREATMENT SIMULATION USING 3D IMAGE VOLUME		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D0394	DIGTL SUBTRACTION 2 OR GRT IMAGES IMAG VOL SAME MODAL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D0395	FUSION 2 MORE 3D IMAGES VOLUME 1 MORE MODALITIES		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D0411	HBA1C IN-OFFICE POINT OF SERVICE TESTING		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D0412	BLOOD GLUCOSE LEVEL TEST IN-OFFICE GLUCOSE METER		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D0414	LAB PROC MICROB SPEC INC CULTURE AND SENS STUDIES		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov

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D0415	COLLECTION MICROORGANISMS CULTURE AND SENSITIVITY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D0416	VIRAL CULTURE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D0417	CLCT AND PREP SALIVA SAMPLE FOR LAB DX TESTING		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D0418	ANALYSIS OF SALIVA SAMPLE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D0422	COLLECTION AND PREPARATION OF GENETIC SAMPLE MATL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D0423	GENETIC TEST SUSCEPTIBILITY DISEASES-SPEC ANALY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D0425	CARIES SUSCEPTIBILITY TESTS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D0431	ADJUNCTIVE PREDX TST NOT INCL CYTOLOGY BX PROC		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D0460	PULP VITALITY TESTS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D0470	DIAGNOSTIC CASTS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D0472	ACCESSION OF TISSUE GROSS EXAMINATION PREP REPR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D0473	ACCESS TISSUE GR AND MIC EXAMINATION PREP REPR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D0474	ACCESS TISS GR AND MIC EX ASSESS SURG MARG PREP RPT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D0475	DECALCIFICATION PROCEDURE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D0476	SPECIAL STAINS FOR MICROORGANISMS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D0477	SPECIAL STAINS NOT FOR MICROORGANISMS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D0478	IMMUNOHISTOCHEMICAL STAINS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D0479	TISSUE INSITU HYBRIDIZATION INCL INTERPRETATION		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D0480	ACCESS EXFOLIATIVE CYTOL SMEAR MIC EXAM PREP REPT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D0481	ELECTRON MICROSCOPY DIAGNOSTIC		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D0482	DIRECT IMMUNOFUORESCENCE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D0483	INDIRECT IMMUNOFUORESCENCE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D0484	CONSULTATION ON SLIDES PREPARED ELSEWHERE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D0485	CONSULT INCL PREP SLIDES BX MATL SPL REF SRC		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D0486	LAB ACCSS TRNSEPI CYTL SMP MICRO EX PREP AND WRT RPR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D0502	OTHER ORAL PATHOLOGY PROCEDURES BY REPORT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D0600	NON-IONIZING DX PROC CPBL QUANTIFYING MON AND REC		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D0601	CARIES RISK ASSESSMENT AND DOC FINDING LOW RISK		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D0602	CARIES RISK ASSESSMENT AND DOC FINDING MOD RISK		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D0603	CARIES RISK ASSESSMENT AND DOC FINDING HIGH RISK		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D0999	UNSPECIFIED DIAGNOSTIC PROCEDURE BY REPORT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D1110	PROPHYLAXIS - ADULT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D1120	PROPHYLAXIS - CHILD		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D1206	TOPICAL APPLICATION OF FLUORIDE VARNISH		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D1208	TOPICAL APPLICATION OF FLUORIDE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
D1310	NUTRITIONAL COUNSELING CONTROL OF DENTAL DISEASE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D1320	TOBACCO CNSL CONTROL AND PREVENTION ORAL DISEASE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D1330	ORAL HYGIENE INSTRUCTIONS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D1351	SEALANT - PER TOOTH		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D1352	PREV RSN REST MOD HIGH CARIES RISK PT-PERM TOOTH		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D1353	SEALANT REPAIR - PER TOOTH		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D1354	INTERIM CARIES ARREST MEDICAMENT APP - PER TOOTH		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D1510	SPACE MAINTAINER - FIXED-UNILATERAL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D1516	SPACE MAINTAINER - FIXED - BILATERAL, MAXILLARY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D1517	SPACE MAINTAINER - FIXED - BILATERAL, MANDIBULAR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D1520	SPACE MAINTAINER - REMOVABLE-UNILATERAL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D1526	SPACE MAINTAIN- REMOVABLE- BILATERAL, MAXILLARY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D1527	SPACE MAINTAINER - REMOVABLE - BILATERAL, MANDIB		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D1550	RECEMENTATION OF SPACE MAINTAINER		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D1555	REMOVAL OF FIXED SPACE MAINTAINER		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D1575	DISTAL SHOE SPACE MAINTAINER-FIXED-UNILATERAL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D1999	UNSPECIFIED PREVENTIVE PROCEDURE BY REPORT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D2140	AMALGAM-ONE SURFACE PRIMARY OR PERMANENT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D2150	AMALGAM-TWO SURFACES PRIMARY OR PERMANENT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D2160	AMALGAM-THREE SURFACES PRIMARY OR PERMANENT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D2161	AMALGAM-FOUR MORE SURFACES PRIMARY PERMANENT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D2330	RESIN-BASED COMPOSITE ONE SURFACE ANTERIOR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D2331	RESIN-BASED COMPOSITE TWO SURFACES ANTERIOR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D2332	RESIN-BASED COMPOSITE THREE SURFACES ANTERIOR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D2335	RESIN-BASED COMPOSITE 4 OR GRT SURFACES INCISAL ANGLE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D2390	RESIN-BASED COMPOSITE CROWN ANTERIOR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D2391	RESIN-BASED COMPOSITE - ONE SURFACE POSTERIOR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D2392	RESIN-BASED COMPOSITE - TWO SURFACES POSTERIOR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D2393	RESIN-BASED COMPOSITE - THREE SURFACES POSTERIOR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D2394	RESIN COMPOS - FOUR OR MORE SURFACES POSTERIOR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D2410	GOLD FOIL - ONE SURFACE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D2420	GOLD FOIL - TWO SURFACES		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D2430	GOLD FOIL - THREE SURFACES		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D2510	INLAY - METALLIC - ONE SURFACE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov

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Code	Code Description	Comments	Apple Health & IMC Medical				IMC / BHSO (Mental Health covered svcs)	Medicare	Market Place
			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
D2520	INLAY - METALLIC - TWO SURFACES		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D2530	INLAY - METALLIC - THREE OR MORE SURFACES		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D2542	ONLAY - METALLIC - TWO SURFACES		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D2543	ONLAY METALLIC THREE SURFACES		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D2544	ONLAY METALLIC FOUR OR MORE SURFACES		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D2610	INLAY - PORCELAIN CERAMIC - ONE SURFACE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D2620	INLAY - PORCELAIN CERAMIC - TWO SURFACES		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D2630	INLAY - PORCELAIN CERAMIC - THREE MORE SURFACES		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D2642	ONLAY - PORCELAIN CERAMIC - TWO SURFACES		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D2643	ONLAY - PORCELAIN CERAMIC - THREE SURFACES		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D2644	ONLAY - PORCELAIN CERAMIC - 4 OR MORE SURFACES		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D2650	INLAY RESIN BASED COMPOSITE ONE SURFACE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D2651	INLAY RESIN BASED COMPOSITE TWO SURFACES		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D2652	INLAY RESIN BASED COMPOSITE 3 OR MORE SURFACES		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D2662	ONLAY RESIN BASED COMPOSITE TWO SURFACES		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D2663	ONLAY RESIN BASED COMPOSITE THREE SURFACES		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D2664	ONLAY RESIN BASED COMPOSIT FOUR OR MORE SURFACES		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D2710	CROWN - RESIN-BASED COMPOSITE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D2712	CROWN - 3 4 RESIN-BASED COMPOSITE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D2720	CROWN - RESIN WITH HIGH NOBLE METAL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D2721	CROWN - RESIN WITH PREDOMINANTLY BASE METAL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D2722	CROWN - RESIN WITH NOBLE METAL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D2740	CROWN - PORCELAIN CERAMIC		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D2750	CROWN - PORCELAIN FUSED TO HIGH NOBLE METAL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D2751	CROWN - PORCELAIN FUSED PREDOMINANTLY BASE METAL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D2752	CROWN - PORCELAIN FUSED TO NOBLE METAL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D2780	CROWN - 3 4 CAST HIGH NOBLE METAL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D2781	CROWN - 3 4 CAST PREDOMINATELY BASE METAL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D2782	CROWN - 3 4 CAST NOBLE METAL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D2783	CROWN - 3 4 PORCELAIN CERAMIC		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D2790	CROWN - FULL CAST HIGH NOBLE METAL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D2791	CROWN - FULL CAST PREDOMINANTLY BASE METAL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D2792	CROWN - FULL CAST NOBLE METAL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D2794	CROWN TITANIUM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D2799	PROV CROWN-FUR TX COMPL DX NEC B4 FINAL IMPRESS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D2910	RECEMENT INLAY ONLAY PART COVERAGE RESTORATION		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D2915	RECEMENT CAST OR PREFABRICATED POST AND CORE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D2920	RECEMENT CROWN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D2921	REATTACHMENT TOOTH FRAGMENT INCISAL EDGE CUSP		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D2929	PREFAB PORCELAIN CERAMIC CROWN - PRIMARY TOOTH		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D2930	PREFABR STAINLESS STEEL CROWN - PRIMARY TOOTH		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
D2931	PREFABR STAINLESS STEEL CROWN - PERMANENT TOOTH		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D2932	PREFABRICATED RESIN CROWN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D2933	PREFABR STAINLESS STEEL CROWN W RESIN WINDOW		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D2934	PREFAB ESTHETIC COAT STNLESS STEEL CROWN PRIM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D2940	PROTECTIVE RESTORATION		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D2941	INTERIM THERAPEUTIC RESTORATION-PRIMARY DENTITN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D2949	RESTORATIVE FOUNDATION AN INDIRECT RESTORATION		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D2950	CORE BUILDUP INCLUDING ANY PINS WHEN REQUIRED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D2951	PIN RETENTION - PER TOOTH ADDITION RESTORATION		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D2952	POST AND CORE ADDITION TO CROWN INDIRECTLY FAB		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D2953	EACH ADDITIONAL INDIRECTLY FAB POST SAME TOOTH		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D2954	PREFABRICATED POST AND CORE IN ADDITION TO CROWN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D2955	POST REMOVAL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D2957	EACH ADDITIONAL PREFABRICATED POST - SAME TOOTH		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D2960	LABIAL VENEER RESIN LAMINATE - CHAIRSIDE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D2961	LABIAL VENEER - LABORATORY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D2962	LABIAL VENEER - LABORATORY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D2971	ADD PROC NEW CRWN UND XSTING PART DENTUR FRMEWRK		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D2975	COPING		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D2980	CROWN REPAIR NECESSITATED RESTORATIVE MATL FAIL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D2981	INLAY REPAIR NECESSITATED RESTORATIVE MATL FAIL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D2982	ONLAY REPAIR NECESSITATED RESTORATIVE MATL FAIL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D2983	VENEER REPAIR NECESSITATED RESTORATIVE MATL FAIL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D2990	RESIN INFILTRATION INCIPIENT SMOOTH SURFACE LES		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D2999	UNSPECIFIED RESTORATIVE PROCEDURE BY REPORT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D3110	PULP CAP - DIRECT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D3120	PULP CAP - INDIRECT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D3220	TX PULP-REMV PULP CORONAL DENTINOCEMENTL JUNC		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D3221	PULPAL DEBRIDEMENT PRIMARY AND PERMANENT TEETH		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D3222	PART PULPOTOMY FOR APEXOGENEIS PERM TOOTH		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D3230	PULPAL THERAPY - ANTERIOR PRIMARY TOOTH		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D3240	PULPAL THERAPY - POSTERIOR PRIMARY TOOTH		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D3310	ENDODONTIC THERAPY ANTERIOR TOOTH		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
D3320	ENDODONTIC THERAPY PREMOLAR TOOTH		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D3330	ENDODONTIC THERAPY MOLAR TOOTH		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D3331	TREATMENT RC OBSTRUCTION; NON-SURGICAL ACCESS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D3332	INCOMPLETE ENDO TX; INOP UNRESTORABLE FX TOOTH		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D3333	INTERNAL ROOT REPAIR OF PERFORATION DEFECTS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D3346	RETREATMENT PREVIOUS RC THERAPY - ANTERIOR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D3347	RETREATMENT OF PREVIOUS ROOT CANAL TX - PREMOLAR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D3348	RETREATMENT PREVIOUS ROOT CANAL THERAPY - MOLAR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D3351	APEXIFICATION RECALCIFICATION INITIAL VISIT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D3352	APEXIFICATION RECALCIFICATN INTERIM MED REPLACE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D3353	APEXIFICATION RECALCIFICATION - FINAL VISIT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D3355	PULPAL REGENERATION - INITIAL VISIT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D3356	PULPAL REGENERATION - INTERIM MEDICATION REPLACE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D3357	PULPAL REGENERATION - COMPLETION OF TREATMENT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D3410	APICOECTOMY - ANTERIOR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D3421	APICOECTOMY - PREMOLAR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D3425	APICOECTOMY - MOLAR FIRST ROOT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D3426	APICOECTOMY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D3427	PERIRADICULAR SURGERY WITHOUT APICOECTOMY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D3428	BONE GRAFT W PERIRADICULAR SURG PER TOOTH 1 SITE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D3429	BONE GRAFT PERIRADICULR SURG EA ADD CONTIG TOOTH		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D3430	RETROGRADE FILLING - PER ROOT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D3431	BIOL MATL SOFT OSS TISS REGEN PERIRADICULAR SURG		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D3432	GUIDED TISS REGEN RESORB BARR PERIRADICULAR SURG		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D3450	ROOT AMPUTATION - PER ROOT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D3460	ENDODONTIC ENDOSSEOUS IMPLANT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D3470	INTENTIONAL REIMPLANTATION W NECESSARY SPLINTING		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D3910	SURGICAL PROCEDURE ISOLATION TOOTH W RUBBER DAM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D3920	HEMISECTION NOT INCLUDING ROOT CANAL THERAPY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D3950	CANAL PREPARATION AND FITTING PREFORMED DOWEL POST		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D3999	UNSPECIFIED ENDODONTIC PROCEDURE BY REPORT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D4210	GINGIVECT PLSTY 4 OR GRT CNTIG TOOTH BOUND SPACES-QUAD		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D4211	GINGIVECT PLSTY 1-3 CNTIG TOOTH BOUND SPACE-QUAD		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
D4212	GING GINGIVOPLASTY ALLW ACSS RESTORATV PRO-TOOTH		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D4230	ANAT CROWN EXP-4 OR GRT CONT TEETH BND TT SPACES QUAD		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D4231	ANAT CROWN EXP 1-3 TEETH BND TOOTH SP PER QUAD		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D4240	GINGL FLP PROC 4 OR GRT CONTIG TOOTH BOUND SPACE-QUAD		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D4241	GINGL FLP PROC 1-3 CONTIG TOOTH BOUND SPACE-QUAD		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D4245	APICALLY POSITIONED FLAP		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D4249	CLINICAL CROWN LENGTHENING - HARD TISSUE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D4260	OSSEOUS SURG 4 OR GRT CONTIG TOOTH BOUND SPACES-QUAD		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D4261	OSSEOUS SURG 1-3 CONTIG TOOTH BOUND SPACES-QUAD		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D4263	BONE REPL GRAFT - RET NAT TOOTH - 1ST SITE QUAD		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D4264	BONE REPL GR - RET NAT TOOTH - EA ADD SITE QUAD		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D4265	BIOLOGIC MATERIALS AID SOFT AND OSSEOUS TISSUE REGEN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D4266	GUID TISSUE REGEN - RESORBABLE BARRIER PER SITE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D4267	GUID TISSUE REGEN - NONRESORB BARRIER PER SITE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D4268	SURGICAL REVISION PROCEDURE PER TOOTH		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D4270	PEDICLE SOFT TISSUE GRAFT PROCEDURE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D4273	AUTOGENOUS CONNECTIVE TISSUE GRAFT PROCEDURE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D4274	MESIAL DISTAL WEDGE PROCEDURE SINGLE TOOTH		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D4275	NON-AUTOGENOUS CONNECTIVE TISSUE GRAFT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D4276	COMB CNCTIVE TISSUE AND DBL PEDICLE GRAFT PER TOOTH		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D4277	FREE SFT TSS GFT PROC 1ST T EDNTULS T PSTN GFT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D4278	FREE SFT TSS GFT EA ADD CNTIG T EDNT T SAME SITE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D4283	AUTOGENOUS CONNECTIVE TISSUE GRAFT PROCEDURE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D4285	NON-AUTOGENOUS CONNECTIVE TISSUE GRAFT PROCEDURE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D4320	PROVISIONAL SPLINTING - INTRACORONAL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D4321	PROVISIONAL SPLINTING - EXTRACORONAL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D4341	PRDONTAL SCALING AND ROOT PLANING 4 MORE TEETH-QUAD		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D4342	PRDONTAL SCALING AND ROOT PLANING 1-3 TEETH-QUAD		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D4346	SCALING PRESENCE GEN MOD SEV GINGIVAL INFLAMM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D4355	FULL M DEBRID ENBL COMP OR EVAL AND DX SUBQ VISIT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov

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			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
D4381	LOC DEL ANTIMICROBL AGT DZ CREVICULAR TISS-TOOTH		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D4910	PERIODONTAL MAINTENANCE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D4920	UNSCHEDULED DRESSING CHANGE NOT TX DENTIST STAFF		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D4921	GINGIVAL IRRIGATION - PER QUADRANT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D4999	UNSPECIFIED PERIODONTAL PROCEDURE BY REPORT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D5110	COMPLETE DENTURE - MAXILLARY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D5120	COMPLETE DENTURE - MANDIBULAR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D5130	IMMEDIATE DENTURE - MAXILLARY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D5140	IMMEDIATE DENTURE - MANDIBULAR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D5211	MAXILLARY PARTIAL DENTURE - RESIN BASE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D5212	MANDIBULAR PARTIAL DENTURE - RESIN BASE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D5213	MAX PART DENTUR-CAST METL FRMEWRK W RSN BASE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D5214	MAND PART DENTUR- CAST METL FRMEWRK W RSN BASE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D5221	IMMEDIATE MAXILLARY PARTIAL DENTURE - RESIN BASE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D5222	IMMEDIATE MANDIBULAR PARTIAL DENTURE-RESIN BASE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D5223	IMMEDIATE MAXILLARY PARTIAL DENTURE-CAST METL FW		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D5224	IMMEDIATE MANDIBULAR PART DENTURE-CAST METL FW		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D5225	MAXILLARY PARTIAL DENTURE FLEXIBLE BASE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D5226	MANDIBULAR PARTIAL DENTURE FLEXIBLE BASE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D5282	REMOV UNI PAR DENT 1-PIE CAST INCL CLPS TETH MAX		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D5283	REMOVE UNI PAR DEN CAST INCL CLPS TETH MANDIB		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D5410	ADJUST COMPLETE DENTURE - MAXILLARY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D5411	ADJUST COMPLETE DENTURE - MANDIBULAR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D5421	ADJUST PARTIAL DENTURE - MAXILLARY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D5422	ADJUST PARTIAL DENTURE - MANDIBULAR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D5511	REPAIR BROKEN COMPLETE DENTURE BASE MANDIBULAR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D5512	REPAIR BROKEN COMPLETE DENTURE BASE MAXILLARY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D5520	REPLACE MISSING BROKEN TEETH - COMPLETE DENTURE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D5611	REPAIR RESIN PARTIAL DENTURE BASE MANDIBULAR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D5612	REPAIR RESIN PARTIAL DENTURE BASE MAXILLARY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D5621	REPAIR CAST PARTIAL FRAMEWORK MANDIBULAR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D5622	REPAIR CAST PARTIAL FRAMEWORK MAXILLARY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D5630	REPAIR OR REPLACE BROKEN CLASP - PER TOOTH		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D5640	REPLACE BROKEN TEETH - PER TOOTH		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D5650	ADD TOOTH TO EXISTING PARTIAL DENTURE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D5660	ADD CLASP TO EXISTING PARTIAL DENTURE-PER TOOTH		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
D5670	REPLACE ALL TEETH AND ACRYLIC CAST METAL FRMEWRK MAX		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D5671	REPLACE ALL TEETH AND ACRYLIC CAST METL FRMEWRK MAND		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D5710	REBASE COMPLETE MAXILLARY DENTURE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D5711	REBASE COMPLETE MANDIBULAR DENTURE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D5720	REBASE MAXILLARY PARTIAL DENTURE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D5721	REBASE MANDIBULAR PARTIAL DENTURE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D5730	RELIN COMPLETE MAXILLARY DENTURE CHAIRSIDE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D5731	RELIN COMPLETE MANDIBULAR DENTURE CHAIRSIDE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D5740	RELIN MAXILLARY PARTIAL DENTURE CHAIRSIDE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D5741	RELIN MANDIBULAR PARTIAL DENTURE CHAIRSIDE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D5750	RELIN COMPLETE MAXILLARY DENTURE LABORATORY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D5751	RELIN COMPLETE MANDIBULAR DENTURE LABORATORY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D5760	RELIN MAXILLARY PARTIAL DENTURE LABORATORY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D5761	RELIN MANDIBULAR PARTIAL DENTURE LABORATORY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D5810	INTERIM COMPLETE DENTURE MAXILLARY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D5811	INTERIM COMPLETE DENTURE MANDIBULAR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D5820	INTERIM PARTIAL DENTURE MAXILLARY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D5821	INTERIM PARTIAL DENTURE MANDIBULAR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D5850	TISSUE CONDITIONING MAXILLARY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D5851	TISSUE CONDITIONING MANDIBULAR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D5862	PRECISION ATTACHMENT BY REPORT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D5863	OVERDENTURE - COMPLETE MAXILLARY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D5864	OVERDENTURE - PARTIAL MAXILLARY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D5865	OVERDENTURE - COMPLETE MANDIBULAR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D5866	OVERDENTURE - PARTIAL MANDIBULAR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D5867	REPLACEMENT REPL PART SEMI-PRCISN PRCISN ATTCH		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D5875	MODIFICATION REMV PROSTH FOLLOW IMPLANT SURGERY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D5876	ADD MET SUBSTRUC TO ACRYLIC FULL DENT (PER ARCH)		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D5899	UNS REMOVABLE PROSTHODONTIC PROCEDURE REPORT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D5911	FACIAL MOULAGE SECTIONAL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D5912	FACIAL MOULAGE COMPLETE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D5913	NASAL PROSTHESIS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D5914	AURICULAR PROSTHESIS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D5915	ORBITAL PROSTHESIS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D5916	OCULAR PROSTHESIS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D5919	FACIAL PROSTHESIS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D5922	NASAL SEPTAL PROSTHESIS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D5923	OCULAR PROSTHESIS INTERIM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D5924	CRANIAL PROSTHESIS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D5925	FACIAL AUGMENTATION IMPLANT PROSTHESIS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D5926	NASAL PROSTHESIS REPLACEMENT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
D5927	AURICULAR PROSTHESIS REPLACEMENT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D5928	ORBITAL PROSTHESIS REPLACEMENT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D5929	FACIAL PROSTHESIS REPLACEMENT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D5931	OBTURATOR PROSTHESIS SURGICAL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D5932	OBTURATOR PROSTHESIS DEFINITIVE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D5933	OBTURATOR PROSTHESIS MODIFICATION		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D5934	MANDIBULAR RESECTION PROSTHESIS W GUIDE FLANGE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D5935	MANDIBULAR RESECTION PROSTHESIS W O GUIDE FLANGE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D5936	OBTURATOR PROSTHESIS INTERIM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D5937	TRISMUS APPLIANCE NOT FOR TMD TREATMENT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D5951	FEEDING AID		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D5952	SPEECH AID PROSTHESIS PEDIATRIC		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D5953	SPEECH AID PROSTHESIS ADULT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D5954	PALATAL AUGMENTATION PROSTHESIS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D5955	PALATAL LIFT PROSTHESIS DEFINITIVE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D5958	PALATAL LIFT PROSTHESIS INTERIM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D5959	PALATAL LIFT PROSTHESIS MODIFICATION		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D5960	SPEECH AID PROSTHESIS MODIFICATION		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D5982	SURGICAL STENT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D5983	RADIATION CARRIER		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D5984	RADIATION SHIELD		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D5985	RADIATION CONE LOCATOR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D5986	FLUORIDE GEL CARRIER		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D5987	COMMISSURE SPLINT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D5988	SURGICAL SPLINT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D5991	VESICULOBULLOUS DISEASE MEDICAMENT CARRIER		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D5992	ADJUST MAXILLOFACIAL PROSTH APPLIANCE BY REPORT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D5993	MAINT CLEAN MAXILLOFACIAL PROSTH OTH THN REQ ADJ		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D5994	PERIODONTAL MED CARR PERIPH SEAL LAB PROCESSED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D5999	UNSPECIFIED MAXILLOFACIAL PROSTHESIS BY REPORT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D6010	SURG PLACEMENT IMPLANT BODY: ENDOSTEAL IMPLANT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D6011	SECOND STAGE IMPLANT SURGERY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D6012	SURG PLCMT INTERIM IMPL TRNSITIONL PROS: ENDOS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D6013	SURGICAL PLACEMENT OF MINI IMPLANT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D6040	SURGICAL PLACEMENT: EPOSTEAL IMPLANT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D6050	SURGICAL PLACEMENT: TRANSOSTEAL IMPLANT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D6051	INTERIM ABUTMENT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D6052	SEMI-PRECISION ATTACHMENT ABUTMENT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D6055	CONNECTING BAR IMPLANT OR ABUTMENT SUPPORTED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
D6056	PREFABRICATED ABUTMENT-INCL MOD AND PLACEMENT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D6057	CUSTOM FABRICATED ABUTMENT - INCLUDES PLACEMENT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D6058	ABUTMENT SUPPORTED PORCELAIN CERAMIC CROWN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D6059	ABUT SUPP PORCELAIN TO METL CROWN HI NOBLE METL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D6060	ABUT SUPP PORCELAIN TO MTL CROWN PREDOM BASE MTL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D6061	ABUT SUPP PORCELAIN TO METAL CROWN NOBLE METAL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D6062	ABUTMENT SUPP CAST METAL CROWN HIGH NOBLE METAL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D6063	ABUTMENT SUPP CAST METAL CROWN PREDOM BASE METAL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D6064	ABUTMENT SUPP CAST METAL CROWN NOBLE METAL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D6065	IMPLANT SUPPORTED PORCELAIN CERAMIC CROWN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D6066	IMPLANT SUPPORTED PORCELAIN FUSED TO METAL CROWN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D6067	IMPLANT SUPPORTED METAL CROWN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D6068	ABUT SUPPORTED RETAINER PORCELAIN CERAMIC FPD		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D6069	ABUT RETAINR PORCELN TO METL FPD HI NOBL METL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D6070	ABUT RETN PORCELN TO METL FPD PREDOM BASE METL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D6071	ABUT SUPPORTED RETAINER PORCELN FUSED METAL FPD		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D6072	ABUTMENT SUPPORTED RETAINER FOR CAST METAL FPD		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D6073	ABUT RETAINR CAST METL FPD PREDOM BASE METL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D6074	ABUTMENT RETAINR CAST METAL FPD NOBLE METAL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D6075	IMPLANT SUPPORTED RETAINER FOR CERAMIC FPD		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D6076	IMPLANT SUPPORTED RETAIN PORCELN FUSED METAL FPD		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D6077	IMPLANT SUPPORTED RETAINER FOR CAST METAL FPD		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D6080	IMPL MAINT PROC REMV REINSRT CLEAN PROSTH AND ABUT SCAL AND DEBR PRES INF MUCOSIT 1 IMPL NO F ENT AND CLOS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D6081	PROVISIONAL IMPLANT CROWN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D6085	REPAIR IMPLANTSUPPORTED PROSTHESIS BY REPORT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D6090	REPAIR IMPLANTSUPPORTED PROSTHESIS BY REPORT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D6091	REPL ATTACHMNT IMPL ABUT SUPP PROS PER ATTACHMNT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D6092	RECEMENT IMPLANT ABUTMENT SUPPORTED CROWN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D6093	RECEMENT IMPL ABUTMNT SUPPORTED FIX PART DENTURE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D6094	ABUTMENT SUPPORTED CROWN TITANIUM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D6095	REPAIR IMPLANT ABUTMENT BY REPORT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
D6096	REMOVE BROKEN IMPLANT RETAINING SCREW		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D6100	IMPLANT REMOVAL BY REPORT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D6101	DEBR PERIIMPL DFCT CLN EXPSD IMPL FLP ENTRY CLO		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D6102	DEBR AND OSS CNTR PERIIMPL DFCT;SURF AND FLAP ENTRY AND CL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D6103	BONE GRAFT FOR REPAIR OF PERI-IMPLANT DEFECT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D6104	BONE GRAFT AT TIME OF IMPLANT PLACEMENT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D6110	IMPL ABUT SUPP REMV DENTURE EDENTULOUS ARCH-MAX		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D6111	IMPL ABUT SUPP REMV DENTURE EDENTULOUS ARCH-MND		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D6112	IMPL ABUT SUPP REMV DENTURE PART EDENT ARCH-MAX		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D6113	IMPL ABUT SUPP REMV DENTURE PART EDENT ARCH-MAND		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D6114	IMPL ABUT SUPP FIXED DENTURE EDENTULOUS ARCH-MAX		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D6115	IMPL ABUT SUPP FIXD DENTURE EDENTULOUS ARCH-MAND		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D6116	IMPL ABUT SUPP FIXED DENTURE PART EDENT ARCH-MAX		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D6117	IMPL ABUT SUPP FIXD DENTURE PART EDENT ARCH-MAND		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D6118	IMPL ABUT SPTD INTRM FIX DENTUR EDENT ARCH-MAND		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D6119	IMPL ABUT SPTD INT FIX DENTUR EDENT ARCH-MAX		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D6190	RADIOGRAPHIC SURGICAL IMPLANT INDEX BY REPORT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D6194	ABUTMENT SUPPORTED RETAINER CROWN FOR FPD		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D6199	UNSPECIFIED IMPLANT PROCEDURE BY REPORT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D6205	PONTIC INDIRECT RESIN BASED COMPOSITE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D6210	PONTIC - CAST HIGH NOBLE METAL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D6211	PONTIC - CAST PREDOMINANTLY BASE METAL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D6212	PONTIC - CAST NOBLE METAL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D6214	PONTIC TITANIUM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D6240	PONTIC - PORCELAIN FUSED TO HIGH NOBLE METAL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D6241	PONTIC - PORCELN FUSED PREDOMINANTLY BASE METAL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D6242	PONTIC - PORCELAIN FUSED TO NOBLE METAL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D6245	PONTIC - PORCELAIN CERAMIC		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D6250	PONTIC - RESIN WITH HIGH NOBLE METAL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D6251	PONTIC - RESIN WITH PREDOMINANTLY BASE METAL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D6252	PONTIC - RESIN WITH NOBLE METAL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D6253	PRVS PONTIC-FUR TX CMPL DX NEC B4 FINAL IMPRESS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D6545	RETAINER - CAST METAL RESIN BONDED FIX PROSTH		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D6548	RETAINER - PORCELN CERAMIC RSN BONDED FIX PROSTH		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D6549	RETAINER - FOR RESIN BONDED FIXED PROSTHESIS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov

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Code	Code Description	Comments	Apple Health & IMC Medical				IMC / BHSO (Mental Health covered svcs)	Medicare	Market Place
			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
D6600	RETAINER INLAY - PORCELAIN CERAMIC TWO SURFACES		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D6601	RETAINER INLAY - PORCELAIN CERAMIC 3 MORE SURF		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D6602	RETAINER INLAY-CAST HIGH NOBLE METAL 2 SURFACES		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D6603	RETAINER INLAY-CAST HIGH NOBLE METAL 3 MORE SURF		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D6604	RETAINER INLAY - CAST PDMT BASE METAL 2 SURFACES		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D6605	RETAINER INLAY-CAST PDMT BASE METAL 3 MORE SURF		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D6606	RETAINER INLAY - CAST NOBLE METAL TWO SURFACES		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D6607	RETAINER INLAY - CAST NOBLE METAL 3 MORE SURF		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D6608	RETAINER ONLAY - PORCELAIN CERAMIC TWO SURFACES		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D6609	RETAINER ONLAY - PORCELAIN CERAMIC 3 MORE SURF		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D6610	RETAINER ONLAY-CAST HIGH NOBLE METAL 2 SURFACES		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D6611	RETAINER ONLAY-CAST HIGH NOBLE METAL 3 MORE SURF		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D6612	ONLAY - CAST PREDOMINANTLY BASE METAL 2 SURFACES		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D6613	RETAINER ONLAY-CAST PDMT BASE METAL 3 MORE SURF		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D6614	RETAINER ONLAY - CAST NOBLE METAL TWO SURFACES		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D6615	RETAINER ONLAY-CAST NOBLE METAL 3 MORE SURFACES		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D6624	RETAINER INLAY - TITANIUM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D6634	RETAINER ONLAY - TITANIUM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D6710	RETAINER CROWN - INDIRECT RESIN BASED COMPOSITE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D6720	RETAINER CROWN - RESIN WITH HIGH NOBLE METAL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D6721	RETAINER CROWN-RESIN W PREDOMINANTLY BASE METAL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D6722	RETAINER CROWN - RESIN WITH NOBLE METAL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D6740	RETAINER CROWN - PORCELAIN CERAMIC		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D6750	RETAINER CROWN - PORCELAIN FUSED HI NOBLE METAL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D6751	RETAINER CROWN-PORCELAIN FUSED PDMT BASE METAL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D6752	RETAINER CROWN - PORCELAIN FUSED TO NOBLE METAL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D6780	RETAINER CROWN - 3 4 CAST HIGH NOBLE METAL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D6781	RETAINER CROWN-3 4 CAST PREDOMINANTLY BASE METAL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D6782	RETAINER CROWN - 3 4 CAST NOBLE METAL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D6783	RETAINER CROWN - 3 4 PORCELAIN CERAMIC		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
D6790	RETAINER CROWN - FULL CAST HIGH NOBLE METAL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D6791	RETAINER CROWN-FULL CAST PREDOMINANTLY BASE METL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D6792	RETAINER CROWN - FULL CAST NOBLE METAL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D6793	PRVS RET CRWN-FUR TX CMPL DX NEC B4 FINAL IMPRSS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D6794	RETAINER CROWN - TITANIUM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D6920	CONNECTOR BAR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D6930	RECEMENT FIXED PARTIAL DENTURE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D6940	STRESS BREAKER		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D6950	PRECISION ATTACHMENT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D6980	FIXED PART DENTURE REPR NEC RESTORATVE MATL FAIL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D6985	PEDIATRIC PARTIAL DENTURE FIXED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D6999	UNSPECIFIED FIXED PROSTHODONTIC PROCEDURE REPORT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D7111	EXTRACTION CORONAL REMNANTS-PRIMARY TOOTH		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D7140	EXTRACTION ERUPTED TOOTH OR EXPOSED ROOT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D7210	EXTRACTION ERU TOOTH RQR REMV BONE AND SECTN TOOTH		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D7220	REMOVAL OF IMPACTED TOOTH - SOFT TISSUE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D7230	REMOVAL OF IMPACTED TOOTH - PARTIALLY BONY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D7240	REMOVAL OF IMPACTED TOOTH - COMPLETELY BONY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D7241	REMV IMP TOOTH - CMPL BONY W UNUSUAL SURG COMPS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D7250	REMOVAL OF RESIDUAL TOOTH ROOTS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D7251	CORONECTOMY - INTENTIONAL PARTIAL TOOTH REMOVAL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D7260	OROANTRAL FISTULA CLOSURE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D7261	PRIMARY CLOSURE OF A SINUS PERFORATION		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D7270	TOOTH REIMPL AND OR STBL ACC EVULSED DISPLCD TOOTH		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D7272	TOOTH TRANSPLANTATION		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D7280	EXPOSURE OF AN UNERUPTED TOOTH		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D7282	MOBILIZ ERUPTED MALPOSITIONED TOOTH AID ERUPTION		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D7283	PLCMT DEVICE FACILITATE ERUPTION IMPACTED TOOTH		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D7285	BIOPSY OF ORAL TISSUE HARD		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D7286	BIOPSY OF ORAL TISSUE SOFT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D7287	EXFOLIATIVE CYTOLOGICAL SAMPLE COLLECTION		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D7288	BRUSH BIOPSY TRANSEPIHELIAL SAMPLE COLLECTION		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D7290	SURGICAL REPOSITIONING OF TEETH		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D7291	TRANSSEPTAL FIBEROT SUPRA CRESTAL FIBEROT BR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D7292	PLCMT TEMP ANC DEVC SCREW RETN PLATE RQR FLAP;		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D7293	PLACEMENT TEMP ANC DEVC RQR FLAP; INC DEVC REMV		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
D7294	PLACEMENT TEMP ANC DEVC W O FLAP; INC DEVC REMV		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D7295	HARVEST BONE FOR USE AUTOGENOUS GRAFTING PROC		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D7296	CORTICOTOMY-ONE TO THREE TEETH TOOTH SP PER QUAD		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D7297	CORTICOTOMY-FOUR OR MORE TEETH TOOTH SP PER QUAD		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D7310	ALVEOLOPLASTY W EXTRACTION 4 OR GRT TEETH SPACE QUAD		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D7311	ALVEOLOPLSTY CONJNC XTRACT 1-3 TEETH SPACES QUAD		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D7320	ALVEOLOPLASTY NOT W EXTRACTIONS 4 OR GRT TEETH SPACE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D7321	ALVEOLOPLSTY NOT CNJNC XTRCT 1-3 TEETH SPCE QUAD		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D7340	VESTIBULOPLASTY RIDGE EXT SEC EPITHELIALIZATION		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D7350	VESTIBULOPLASTY RIDGE EXT W SOFT TISS GRAFTS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D7410	EXCISION OF BENIGN LESION UP TO 1.25 CM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D7411	EXCISION OF BENIGN LESION GREATER THAN 1.25 CM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D7412	EXCISION OF BENIGN LESION COMPLICATED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D7413	EXCISION OF MALIGNANT LESION UP TO 1.25 CM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D7414	EXCISION OF MALIGNANT LESION OVER 1.25 CM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D7415	EXCISION OF MALIGNANT LESION COMPLICATED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D7440	EXC MALIG TUMOR-LESION DIAMETER UP TO 1.25 CM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D7441	EXC MALIG TUMOR-LESION DIAM GREATER THAN 1.25 CM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D7450	REMOVAL BEN ODONTOGENIC CYST TUMR- UP TO 1.25 CM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D7451	REMOVAL BENIGN ODONTOGENIC CYST TUMOR- OVER 1.25 CM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D7460	REMOVAL BEN NONODONTOGENIC CYST TUMR- UP 1.25 CM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D7461	REMOVAL BEN NONODONTOGENIC CYST TUMOR OVER 1.25 CM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D7465	DESTRUCTION LESION PHYSICAL CHEM METHOD BY REPR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D7471	REMOVAL OF LATERAL EXOSTOSIS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D7472	REMOVAL OF TORUS PALATINUS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D7473	REMOVAL OF TORUS MANDIBULARIS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D7485	REDUCTION OF OSSEOUS TUBEROSITY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D7490	RADICAL RESECTION OF MAXILLA OR MANDIBLE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D7510	INCISION AND DRAINAGE ABSCESS-INTRAORAL SOFT TISS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D7511	I AND D ABSCESS INTRAORAL SOFT TISSUE COMPLICATED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
D7520	INCISION AND DRAINAGE ABSCESS-EXTRAORAL SOFT TISS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D7521	I AND D ABSCESS EXTRAORAL SOFT TISSUE COMPLICATED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D7530	REMOVAL FB FROM MUCOSA SKIN SUBCUT ALVEOL TISSUE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D7540	REMOV REACT-PRODUC FOREIGN BODIES-MUSCULOSKEL SYS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D7550	PART OSTEC SEQUESTRECTOMY REMOVAL NON-VITAL BONE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D7560	MAXILLARY SINUSOTOMY REMOVAL TOOTH FRAGMENT FB		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D7610	MAXILLA-OPEN REDUCTION		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D7620	MAXILLA-CLOSED REDUCTION		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D7630	MANDIBLE-OPEN REDUCTION		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D7640	MANDIBLE-CLOSED REDUCTION		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D7650	MALAR AND OR ZYGOMATIC ARCH-OPEN REDUCTION		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D7660	MALAR AND OR ZYGOMATIC ARCH-CLOSED REDUCTION		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D7670	ALVEOLUS - CLOSED REDUCTION MAY INC STABIL TEETH		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D7671	ALVEOLUS - OPEN RDUC MAY INCL STABILIZATN TEETH		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D7680	FCE BNS - COMP RDUC W FIX AND MX SURG APPRCHES CPT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D7710	MAXILLA-OPEN REDUCTION		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D7720	MAXILLA-CLOSED REDUCTION		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D7730	MANDIBLE-OPEN REDUCTION		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D7740	MANDIBLE-CLOSED REDUCTION		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D7750	MALAR AND OR ZYGOMATIC ARCH-OPEN REDUCTION		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D7760	MALAR AND OR ZYGOMATIC ARCH CLOSED REDUCTION		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D7770	ALVEOLUS - OPEN REDUCTION STABILIZATION OF TEETH		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D7771	ALVEOLUS CLOSED REDUCTION STABILIZATION OF TEETH		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D7780	FACIAL BONES-COMP RDUC FIX AND MX SURG APPROACHES		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D7810	OPEN REDUCTION OF DISLOCATION		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D7820	CLOSED REDUCTION OF DISLOCATION		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D7830	MANIPULATION UNDER ANESTHESIA		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D7840	CONDYLECTOMY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D7850	SURGICAL DISCECTOMY; WITH WITHOUT IMPLANT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D7852	DISC REPAIR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D7854	SYNOVECTOMY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D7856	MYOTOMY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D7858	JOINT RECONSTRUCTION		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D7860	ARTHROTOMY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov

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			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
D7865	ARTHROPLASTY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D7870	ARTHROCENTESIS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D7871	NON-ARTHROSCOPIC LYSIS AND LAVAGE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D7872	ARTHROSCOPY-DIAGNOSIS WITH OR WITHOUT BIOPSY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D7873	ARTHROSCOPY: LAVAGE AND LYSIS OF ADHESIONS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D7874	ARTHROSCOPY: DISC REPOSITIONING AND STABILIZATION		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D7875	ARTHROSCOPY: SYNOVECTOMY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D7876	ARTHROSCOPY: DISCECTOMY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D7877	ARTHROSCOPY: DEBRIDEMENT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D7880	OCCUSAL ORTHOTIC DEVICE BY REPORT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D7881	OCCUSAL ORTHOTIC DEVICE ADJUSTMENT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D7899	UNSPECIFIED TMD THERAPY BY REPORT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D7910	SUTURE OF RECENT SMALL WOUNDS UP TO 5 CM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D7911	COMPLICATED SUTURE-UP TO 5 CM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D7912	COMPLICATED SUTURE-GREATER THAN 5 CM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D7920	SKIN GRAFT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D7921	COLLECTION AND APPLIC AUTO BLOOD CONCENTRATE PROD		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D7940	OSTEOPLASTY - FOR ORTHOGNATHIC DEFORMITIES		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D7941	OSTEOTOMY - MANDIBULAR RAMI		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D7943	OSTEOT-MANDIB RAMI W BONE GRFT;INCL OBTAIN GRAFT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D7944	OSTEOTOMY SEGMENTED OR SUBAPICAL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D7945	OSTEOTOMY-BODY OF MANDIBLE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D7946	LEFORT I MAXILLA TOTAL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D7947	LEFORT I MAXILLA SEGMENTED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D7948	LEFORT II LEFORT III - W O BONE GRAFT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D7949	LEFORT II LEFORT III - W BONE GRAFT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D7950	OSSEOUS OSTEOPERIOSTEAL CARTILAGE GRAFT MAND MAX		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D7951	SINUS AUGMENTATION BONE BONE SUBST LAT OPEN APPR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D7952	SINUS AUGMENTATION VIA A VERTICAL APPROACH		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D7953	BONE REPLCMT GRAFT RIDGE PRESERVATION PER SITE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D7955	REPAIR MAXLOFACIAL SOFT AND HARD TISSUE DEFECT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D7960	FRENULECTOMY SEP PROC NOT INCIDENTL ANOTHER PROC		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D7963	FRENULOPLASTY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D7970	EXCISION OF HYPERPLASTIC TISSUE-PER ARCH		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D7971	EXCISION OF PERICORONAL GINGIVA		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D7972	SURGICAL REDUCTION OF FIBROUS TUBEROSITY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D7979	NON - SURGICAL SIALOLITHOTOMY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D7980	SURGICAL SIALOLITHOTOMY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov

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Code	Code Description	Comments	Apple Health & IMC Medical				IMC / BHSO (Mental Health covered svcs)	Medicare	Market Place
			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
D7981	EXCISION OF SALIVARY GLAND BY REPORT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D7982	SIALODOCHOPLASTY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D7983	CLOSURE OF SALIVARY FISTULA		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D7990	EMERGENCY TRACHEOTOMY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D7991	CORONOIDECTOMY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D7995	SYNTHETIC GRAFT-MANDIBLE FACIAL BONES BY REPORT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D7996	IMPLANT-MANDIBLE AUGMENTATION PURPOSES BY REPORT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D7997	APPLIANCE REMOVAL INCLUDES REMOVAL OF ARCHBAR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D7998	INTRAORAL PLCMT FIX DEVICE NOT CONJUNCTION W FX		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D7999	UNSPECIFIED ORAL SURGERY PROCEDURE BY REPORT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D8010	LIMITED ORTHODONTIC TREATMENT PRIMARY DENTITION		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D8020	LTD ORTHODONTIC TREATMENT TRANSITIONAL DENTITION		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D8030	LTD ORTHODONTIC TREATMENT ADOLESCENT DENTITION		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D8040	LIMITED ORTHODONTIC TREATMENT ADULT DENTITION		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D8050	INTERCEPTIVE ORTHODONTIC TX PRIMARY DENTITION		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D8060	INTRCPTV ORTHODONTIC TX TRANSITIONAL DENTITION		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D8070	COMP ORTHODONTIC TX TRANSITIONAL DENTITION		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D8080	COMPREHENSIVE ORTHODONTIC TX ADOLES DENTITION		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D8090	COMPREHENSIVE ORTHODONTIC TX ADULT DENTITION		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D8210	REMOVABLE APPLIANCE THERAPY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D8220	FIXED APPLIANCE THERAPY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D8660	PREORTHODONTIC TREATMENT VISIT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D8670	PERIODIC ORTHODONTIC TREATMENT VISIT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D8680	ORTHODONTIC RETENTION		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D8681	REMOVABLE ORTHODONTIC RETAINER ADJUSTMENT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D8690	ORTHODONTIC TREATMENT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D8691	REPAIR OF ORTHODONTIC APPLIANCE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D8692	REPLACEMENT OF LOST OR BROKEN RETAINER		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D8693	REBONDING OR RECEMENTING OF FIXED RETAINER		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D8694	REPAIR OF FIXED RETAINERS INCLUDES REATTACHMENT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D8695	REMOV FIX ORTHODONT APPLINC RSN OTH THAN CMPL TX		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D8999	UNSPECIFIED ORTHODONTIC PROCEDURE BY REPORT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D9110	PALLIATIVE EMERGENCY TX DENTAL PAIN MINOR PROC		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D9120	FIXED PARTIAL DENTURE SECTIONING		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
D9130	TMJ DYSFUNCTION - NON-INVASIVE PT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D9210	LOCAL ANES-NOT CONJUNCTION W OP SURGICAL PROC		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D9211	REGIONAL BLOCK ANESTHESIA		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D9212	TRIGEMINAL DIVISION BLOCK ANESTHESIA		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D9215	LOCAL ANESTHESIA CONJUNCTION OPERATIVE SURG PROC		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D9219	EVAL FOR MOD DEEP SEDATION GENERAL ANESTHESIA		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D9222	DEEP SEDATION GENERAL ANESTHESIA-1ST 15 MINUTES		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D9223	DEEP SEDAT GEN ANESTHESIA-EA SUBSQ 15 MIN INCR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D9230	INHALATION OF NITROUS OXIDE ANALGESIA ANXIOLYSIS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D9239	INTRAVENOUS MODERATE SEDAT ANALGESIA-1ST 15 MINS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D9243	INTRAVENOUS MOD SED ANAL-EA SUBSQ 15 MIN INCR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D9248	NON-INTRAVENOUS CONSCIOUS SEDATION		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D9310	CONSULT DX SERV DENT PHY NOT REQUESTING DENT PHY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D9311	CONSULTATION W MEDICAL HEALTH CARE PROFESSIONAL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D9410	HOUSE EXTENDED CARE FACILITY CALL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D9420	HOSPITAL OR AMBULATORY SURGICAL CENTER CALL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D9430	OFFICE VISIT OBSERVATION NO OTHER SRVC PERFORMED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D9440	OFFICE VISIT-AFTER REGULARLY SCHEDULED HOURS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D9450	CASE PRESENTATION DETAILED AND EXTENSIVE TX PLANNING		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D9610	THERAPEUTIC PARENTERAL DRUG SINGL ADMINISTRATION		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D9612	TX PARENTERAL DRUGS 2 OR GRT ADMINISTRATIONS DIFF MED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D9613	INFIL OF SUSTAIN REL THERA DRUG-SING MULT SITES		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D9630	DRUGS MEDICAMENTS DISPENSED OFFICE FOR HOME USE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D9910	APPLICATION OF DESENSITIZING MEDICAMENT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D9911	APPLIC DESENZT RSN CERV AND OR ROOT SURF-TOOTH		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D9920	BEHAVIOR MANAGEMENT BY REPORT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D9930	TX COMPLICATIONS - UNUSUAL CIRCUMSTANCES REPORT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D9932	CLEANING AND INSPECTION REMV CMPL DENTUR MAXILLARY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D9933	CLEANING AND INSPECTION REMV CMPL DENTUR MANDIBULR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov

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D9934	CLEANING AND INSPECTION REMV PART DENTUR MAXILLARY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D9935	CLEANING AND INSPECTION REMV PART DENTUR MANDIBULR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D9941	FABRICATION OF ATHLETIC MOUTHGUARD		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D9942	REPAIR AND OR RELINE OF OCCLUSAL GUARD		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D9943	OCCLUSAL GUARD ADJUSTMENT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D9944	OCCLUSAL GUARD - HARD APPLIANCE, FULL ARCH		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D9945	OCCLUSAL GUARD - SOFT APPLIANCE, FULL ARCH		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D9946	OCCLUSAL GUARD - HARD APPLIANCE, PARTIAL ARCH		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D9950	OCCLUSION ANALYSIS - MOUNTED CASE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D9951	OCCLUSAL ADJUSTMENT - LIMITED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D9952	OCCLUSAL ADJUSTMENT - COMPLETE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D9961	DUPLICATE COPY PATIENT'S RECORDS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D9970	ENAMEL MICROABRASION		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D9971	ODONTOPLASTY 1-2 TEETH; INCL REMOVAL ENAMEL PROJ		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D9972	EXTERNAL BLEACHING - PER ARCH - PERFORMED OFFICE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D9973	EXTERNAL BLEACHING - PER TOOTH		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D9974	INTERNAL BLEACHING - PER TOOTH		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D9975	EXT BLEACH HOM APPLIC-ARCH; MATL FAB CSTM TRAYS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D9985	SALES TAX		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D9986	MISSED APPOINTMENT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D9987	CANCELLED APPOINTMENT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D9990	CERTI TRANSL SIGN-LANG SERVICES PER VISIT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D9991	DENTAL CASE MGMT - ADDRESSING APPT CA BARRIERS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D9992	DENTAL CASE MANAGEMENT - CARE COORDINATION		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D9993	DENTAL CASE MANAGEMENT - MOTIVATIONAL INTV		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D9994	DENTAL CASE MGMT - PT ED IMP ORAL HEALTH LITRACY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D9995	TELEDENTISTRY - SYNCHRONOUS; REAL-TIME ENCOUNTER		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D9996	TELEDENTISTRY-ASYNC; INFO STD AND FWD DENT SUBSQ REV		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
D9999	UNSPECIFIED ADJUNCTIVE PROCEDURE BY REPORT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
E0100	CANE INCL CANES ALL MATERIAL ADJUSTBLE FIX W TIP		Not Cov	No	Not Cov	No		No	No
E0105	CANE QUAD 3-PRONG ALL MATL ADJUSTBL FIX W TIPS		Not Cov	No	Not Cov	No		No	No
E0110	CRTCHS FORARM VARIOUS MATL PAIR W TIPS AND HNDGRIPS		Not Cov	No	Not Cov	No		No	No
E0111	CRTCH FORARM VARIOUS MATL EA W TIP AND HNDGRIP		Not Cov	No	Not Cov	No		No	No
E0112	CRTCHES UNDARM WOOD PAIR W PADS TIPS AND HNDGRIPS		Not Cov	No	Not Cov	No		No	No

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E0113	CRTCH UNDARM WOOD EA ADJSTBL FIX PAD TIP AND HNDGRIP		Not Cov	No	Not Cov	No		No	No
E0114	CRTCHS UNDARM OTH THAN WOOD PAIR PAD TIP AND HNDGRIP		Not Cov	No	Not Cov	No		No	No
E0116	CRTCH UNDARM NOT WOOD ADJUST FIX PAD TIP HNDGRIP		Not Cov	No	Not Cov	No		No	No
E0117	CRUTCH UNDERARM ARTICULATING SPRING ASSISTED EA		Not Cov	No	Not Cov	No		No	No
E0118	CRUTCH SUBST LOWER LEG PLATFORM W WO WHEELS EA		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
E0130	WALKER RIGID ADJUSTABLE OR FIXED HEIGHT		Not Cov	No	Not Cov	No		No	No
E0135	WALKER FOLDING ADJUSTABLE OR FIXED HEIGHT		Not Cov	No	Not Cov	No		No	No
E0140	WALKER W TRUNK SUPPORT ADJUSTBLE FIX HT ANY TYPE		Not Cov	No	Not Cov	No		No	No
E0141	WALKER RIGID WHEELED ADJUSTABLE OR FIXED HEIGHT		Not Cov	No	Not Cov	No		No	No
E0143	WALKER FOLDING WHEELED ADJUSTABLE FIXED HEIGHT		Not Cov	No	Not Cov	No		No	No
E0144	WALKER ENCLOSED 4 SIDED FRAME WHEELD W POST SEAT		Not Cov	No	Not Cov	No		No	No
E0147	WALKER HEAVY DUTY MX BRAKE SYS VARIABLE WHL RSIST		Not Cov	No	Not Cov	No		No	No
E0148	WALK HEAVY DUTY W O WHLS RIGID FOLD ANY TYPE EA		Not Cov	No	Not Cov	No		No	No
E0149	WALKER HEAVY DUTY WHEELED RIGID FOLD ANY TYPE EA		Not Cov	No	Not Cov	No		No	No
E0153	PLATFORM ATTACHMENT FOREARM CRUTCH EACH		Not Cov	No	Not Cov	No		No	No
E0154	PLATFORM ATTACHMENT WALKER EACH		Not Cov	No	Not Cov	No		No	No
E0155	WHL ATTCH RIGD PICK-UP WALK-PAIR SEAT ATTCH WALK		Not Cov	No	Not Cov	No		No	No
E0156	SEAT ATTACHMENT WALKER		Not Cov	No	Not Cov	No		No	No
E0157	CRUTCH ATTACHMENT WALKER EACH		Not Cov	No	Not Cov	No		No	No
E0158	LEG EXTENSIONS FOR WALKER PER SET OF FOUR		Not Cov	No	Not Cov	No		No	No
E0159	BRAKE ATTACHMENT WHEELED WALKER REPLACEMENT EACH		Not Cov	No	Not Cov	No		No	No
E0160	SITZ TYPE BATH EQP PRTBLE USED W WO COMMODOE		Not Cov	Not Cov	Not Cov	Not Cov		No	No
E0161	SITZ TYPE BATH EQP PRTBLE USED W FAUCET ATTCHS		Not Cov	Not Cov	Not Cov	Not Cov		No	No
E0162	SITZ BATH CHAIR		Not Cov	Not Cov	Not Cov	Not Cov		No	No
E0163	COMMODOE CHAIR MOBILE OR STATIONARY W FIXED ARMS		Not Cov	Not Cov	Not Cov	No		No	No
E0165	COMMODOE CHAIR MOBILE STATIONARY W DETACHBLE ARMS		Not Cov	Not Cov	Not Cov	No		No	No
E0167	PAIL OR PAN USE W COMMODOE CHAIR REPLACEMENT ONLY		Not Cov	Not Cov	Not Cov	No		No	No
E0168	COMMODOE CHAIR XTRA WIDE AND HEVY DUTY STATION MOBIL		Not Cov	Not Cov	Not Cov	No		No	No

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E0170	COMMODE CHAIR INTGR SEAT LIFT MECH ELEC ANY TYPE		Not Cov	Not Cov	Not Cov	Not Cov		No	No
E0171	COMMODE CHAIR INTGR SEAT LIFT MECH NONELEC ANY		Not Cov	Not Cov	Not Cov	Not Cov		No	No
E0172	SEAT LIFT MECH PLACED OVER TOP TOILET ANY TYPE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
E0175	FOOT REST FOR USE WITH COMMODE CHAIR EACH		Not Cov	Not Cov	Not Cov	Not Cov		No	No
E0181	PWR PRESSURE REDUCING MATTRESS OVERLY PAD PUMP		Not Cov	No	Not Cov	No		No	No
E0182	PUMP ALTERNATING PRESSURE PAD REPLACEMENT ONLY		Not Cov	No	Not Cov	No		No	No
E0184	DRY PRESSURE MATTRESS		Not Cov	No	Not Cov	No		No	No
E0185	GEL GEL-LIKE PRSS PAD MATTRSS STD LEN AND WDTN		Not Cov	No	Not Cov	No		No	No
E0186	AIR PRESSURE MATTRESS		Not Cov	No	Not Cov	No		No	No
E0187	WATER PRESSURE MATTRESS		Not Cov	Not Cov	Not Cov	Not Cov		No	No
E0188	SYNTHETIC SHEEPSKIN PAD		Not Cov	No	Not Cov	No		No	No
E0189	LAMBSWOOL SHEEPSKIN PAD ANY SIZE		Not Cov	No	Not Cov	No		No	No
E0190	POSITIONING CUSH PILLOW WEDGE INCL ALL COMPONENT		Not Cov	No	Not Cov	No		Not Cov	No
E0191	HEEL OR ELBOW PROTECTOR EACH		Not Cov	No	Not Cov	No		No	No
E0193	POWERED AIR FLOTATION BED		Not Cov	Not Cov	Not Cov	Not Cov		No	No
E0194	AIR FLUIDIZED BED		Not Cov	Yes	Not Cov	Yes		Yes	Yes
E0196	GEL PRESSURE MATTRESS		Not Cov	No	Not Cov	No		No	No
E0197	AIR PRESS PAD MATTRSS STD MATTRSS LENGTH AND WIDTH		Not Cov	No	Not Cov	No		No	No
E0198	WATER PRESS PAD MATTRSS STD MATTRSS LENGTH AND WIDTH		Not Cov	No	Not Cov	No		No	No
E0199	DRY PRESS PAD MATTRSS STD MATTRSS LENGTH AND WIDTH		Not Cov	No	Not Cov	No		No	No
E0200	HEAT LAMP W O STAND INCL BULB INFRARED ELEMENT		Not Cov	Not Cov	Not Cov	Not Cov		No	No
E0202	PHOTOTHERAPY LIGHT WITH PHOTOMETER		Not Cov	No	Not Cov	No		No	No
E0203	THERAPEUTIC LGHTBOX MINI 10000 LUX TABL TOP MDL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
E0205	HEAT LAMP W STAND INCLUDES BULB INFRARED ELEMENT		Not Cov	Not Cov	Not Cov	Not Cov		No	Not Cov
E0210	ELECTRIC HEAT PAD STANDARD		Not Cov	Not Cov	Not Cov	Not Cov		No	No
E0215	ELECTRIC HEAT PAD MOIST		Not Cov	Not Cov	Not Cov	Not Cov		No	Not Cov
E0217	WATER CIRCULATING HEAT PAD WITH PUMP		Not Cov	Not Cov	Not Cov	Not Cov		No	Not Cov
E0218	FLUID CIRCULATING COLD PAD WITH PUMP ANY TYPE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
E0221	INFRARED HEATING PAD SYSTEM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
E0225	HYDROCOLLATOR UNIT INCLUDES PADS		Not Cov	Not Cov	Not Cov	Not Cov		No	No
E0231	NON-CNTC WND WARMING DEVC W WARMING CARD AND COVR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
E0232	WOUND WARMING WOUND COVER		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
E0235	PARAFFIN BATH UNIT PORTABLE		Not Cov	Not Cov	Not Cov	Not Cov		No	Not Cov
E0236	PUMP FOR WATER CIRCULATING PAD		Not Cov	Not Cov	Not Cov	Not Cov		No	No
E0239	HYDROCOLLATOR UNIT PORTABLE		Not Cov	Not Cov	Not Cov	Not Cov		No	No

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			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
E0240	BATH SHOWER CHAIR W WO WHEELS ANY SIZE		Not Cov	Not Cov	Not Cov	No		Not Cov	Not Cov
E0241	BATHTUB WALL RAIL EACH		Not Cov	Not Cov	Not Cov	No		Not Cov	Not Cov
E0242	BATHTUB RAIL FLOOR BASE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
E0243	TOILET RAIL EACH		Not Cov	Not Cov	Not Cov	No		Not Cov	Not Cov
E0244	RAISED TOILET SEAT		Not Cov	Not Cov	Not Cov	No		Not Cov	Not Cov
E0245	TUB STOOL OR BENCH		Not Cov	Not Cov	Not Cov	No		Not Cov	Not Cov
E0246	TRANSFER TUB RAIL ATTACHMENT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
E0247	TRANSFER BENCH TUB TOILET W WO COMMODOE OPENING		Not Cov	Not Cov	Not Cov	No		Not Cov	Not Cov
E0248	TRNSF BENCH HEVY DUTY TUB TOILET W WO COMMODOE OP		Not Cov	Not Cov	Not Cov	No		Not Cov	Not Cov
E0249	PAD WATER CIRCULATING HEAT UNIT REPLACEMENT ONLY		Not Cov	Not Cov	Not Cov	Not Cov		No	Not Cov
E0250	HOSP BED FIX HT W ANY TYPE SIDE RAILS W MATTRSS		Not Cov	No	Not Cov	No		No	No
E0251	HOSP BED FIX HT W ANY TYPE SIDE RAIL W O MATTRSS		Not Cov	Not Cov	Not Cov	Not Cov		No	No
E0255	HOS BED VARIBL HT W ANY TYPE SIDE RAIL W MATTRSS		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
E0256	HOS BED VARIBL HT ANY TYPE SIDE RAIL W O MATTRSS		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
E0260	HOS BED SEMI-ELEC W ANY TYPE SIDE RAIL W MATTRSS		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
E0261	HOS BED SEMI-ELEC ANY TYPE SIDE RAIL W O MATTRSS		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
E0265	HOSP BED TOT ELEC W ANY TYPE SIDE RAIL W MATTRSS		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
E0266	HOS BED TOT ELEC ANY TYPE SIDE RAIL W O MATTRSS		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
E0270	HOSP BED INSTITUTIONAL TYPE: W MATTRSS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
E0271	MATTRESS INNER SPRING		Not Cov	No	Not Cov	No		No	Not Cov
E0272	MATTRESS FOAM RUBBER		Not Cov	No	Not Cov	No		No	Not Cov
E0273	BED BOARD		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
E0274	OVER-BED TABLE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
E0275	BED PAN STANDARD METAL OR PLASTIC		Not Cov	Not Cov	Not Cov	Not Cov		No	No
E0276	BED PAN FRACTURE METAL OR PLASTIC		Not Cov	Not Cov	Not Cov	Not Cov		No	No
E0277	POWERED PRESSURE-REDUCING AIR MATTRESS		Not Cov	Yes	Not Cov	Yes		Yes	Yes
E0280	BED CRADLE ANY TYPE		Not Cov	Not Cov	Not Cov	Not Cov		No	No
E0290	HOSPITAL BED FIX HT WITHOUT SIDE RAILS W MATTRSS		Not Cov	No	Not Cov	No		No	No
E0291	HOSPITAL BED FIX HT W O SIDE RAILS W O MATTRSS		Not Cov	No	Not Cov	No		No	No
E0292	HOSP BED VARIBL HT HI-LO W O SIDE RAIL W MATTRSS		Not Cov	Yes	Not Cov	Yes		Yes	Yes
E0293	HOS BED VARIBL HT HI-LO W O SIDE RAIL NO MATTRSS		Not Cov	Yes	Not Cov	Yes		Yes	Yes
E0294	HOSPITAL BED SEMI-ELEC W O SIDE RAILS W MATTRSS		Not Cov	Yes	Not Cov	Yes		Yes	Yes
E0295	HOSP BED SEMI-ELEC W O SIDE RAILS W O MATTRSS		Not Cov	Yes	Not Cov	Yes		Yes	Yes
E0296	HOSPITAL BED TOTAL ELEC W O SIDE RAILS W MATTRSS		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
E0297	HOSP BED TOTAL ELEC W O SIDE RAILS W O MATTRSS		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
E0300	PED CRIB HOS GRADE FULLY ENC W WO TOP ENC		Not Cov	Yes	Not Cov	Yes		Yes	Yes
E0301	HOS BED HEVY DUTY XTRA WIDE W WT CAPACTY OVER 350 PDS		Not Cov	Yes	Not Cov	Yes		Yes	Yes
E0302	HOS BED XTRA HEVY DUTY WT CAP OVER 600 PDS W O MATTRSS		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
E0303	HOS BED HEVY DUTY W WT CAP OVER 350 PDS UNDER EQ TO 600		Not Cov	Yes	Not Cov	Yes		Yes	Yes
E0304	HOS BED EXTRA HEAVY DUTY WT CAP OVER 600 PDS MATTRSS		Not Cov	Yes	Not Cov	Yes		Yes	Yes
E0305	BEDSIDE RAILS HALF-LENGTH		Not Cov	No	Not Cov	No		No	No
E0310	BEDSIDE RAILS FULL-LENGTH		Not Cov	No	Not Cov	No		No	No
E0315	BED ACCESS: BOARD TABLE SUPPORT DEVICE ANY TYPE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
E0316	SFTY ENCLOS FRME CANOPY USE W HOSP BED ANY TYPE		Not Cov	No	Not Cov	No		No	No
E0325	URINAL; MALE JUG-TYPE ANY MATERIAL		Not Cov	Not Cov	Not Cov	Not Cov		No	No
E0326	URINAL; FEMALE JUG-TYPE ANY MATERIAL		Not Cov	Not Cov	Not Cov	Not Cov		No	No
E0328	HOSPITAL BED PEDIATRIC MANUAL INCLUDES MATTRESS		Not Cov	Yes	Not Cov	Yes		Yes	Yes
E0329	HOSPITAL BED PEDIATRIC ELECTRIC INCLUDE MATTRESS		Not Cov	Yes	Not Cov	Yes		Yes	Yes
E0350	CONTROL UNIT ELEC BOWEL IRRIGATION EVAC SYSTEM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
E0352	DISPBL PACK USE W THE ELEC BOWEL IRRIG EVAC SYS		Not Cov	Not Cov	Not Cov	Not Cov		No	No
E0370	AIR PRESSURE ELEVATOR FOR HEEL		Not Cov	Not Cov	Not Cov	Not Cov		No	Not Cov
E0371	NONPWR ADV PRSS RUC OVRLAY MATTRSS STD LEN AND WPTH		Not Cov	Yes	Not Cov	Yes		Yes	Yes
E0372	PWR AIR OVRLAY MATTRSS STD MATTRSS LENGTH AND WIDTH		Not Cov	Yes	Not Cov	Yes		Yes	Yes
E0373	NONPOWERED ADVANCED PRESSURE REDUCING MATTRESS		Not Cov	Yes	Not Cov	Yes		Yes	Yes
E0424	STATION COMPRS GASOUS O2 SYS RENT;FLWMTR HUMIDFR		Not Cov	No	Not Cov	No		No	No
E0425	STATION COMPRS GAS SYS PURCH; FLWMTR HUMIDFR NEB PRTBLE GASEOUS O2 SYS PURCH; FLWMTR HUMIDFR AND MASK		Not Cov	Not Cov	Not Cov	Not Cov		No	Not Cov
E0430	PRTBLE GASEOUS O2 SYS RENT; FLWMTR HUMIDFR AND MASK		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
E0431	PRTBLE GASEOUS O2 SYS RENT; FLWMTR HUMIDFR AND MASK		Not Cov	No	Not Cov	No		No	No
E0433	PORTABL LIQUID OXYGEN SYS RENTAL; HOME LIQUEFIER		Not Cov	Not Cov	Not Cov	Not Cov		No	No
E0434	PRTBLE LQD O2 SYS RENT; RESRVOR HUMIDFR FLWMTR		Not Cov	No	Not Cov	No		No	No
E0435	PRTBLE LQD O2 SYS PURCH; RESRVOR FLWMTR HUMIDFR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
E0439	STATION LQD O2 SYS RENT; FLWMTR HUMIDFR NEBULIZR		Not Cov	No	Not Cov	No		No	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
E0440	STATION LQD O2 SYS PURCH;RESRVOR HUMIDFR NEBULZR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
E0441	STATIONARY O2 CONTENTS GAS 1 MO SUPPLY EQ 1 UNIT		Not Cov	No	Not Cov	No		No	No
E0442	STATIONARY O2 CONTENTS LQD 1 MO SUPPLY EQ 1 UNIT		Not Cov	No	Not Cov	No		No	No
E0443	PORTABLE O2 CONTENTS GASEOUS 1 MO SUPPLY EQ 1 UNIT		Not Cov	No	Not Cov	No		No	No
E0444	PORTABLE O2 CONTENTS LIQUID 1 MO SUPPLY EQ 1 UNIT		Not Cov	No	Not Cov	No		No	No
E0445	OXIMETER DEVICE MSR BLD O2 LEVELS NON-INVASV		No	No	Not Cov	No		Not Cov	No
E0446	TOPICAL OXYGEN DELIVERY SYSTEM NOS INCL SUPPLIES		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
E0447	PRTB O C LQD 1 MO SPL EQ 1 U PRSC AMT R N EXCD 4LPM		Not Cov	Not Cov	Not Cov	Not Cov		No	Yes
E0455	OXYGEN TENT EXCLUDING CROUP OR PEDIATRIC TENTS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
E0457	CHEST SHELL		Not Cov	Not Cov	Not Cov	Not Cov		No	No
E0459	CHEST WRAP		Not Cov	Not Cov	Not Cov	Not Cov		No	No
E0462	ROCKING BED WITH OR WITHOUT SIDE RAILS		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
E0465	HOME VENTILATOR ANY TYPE USED W INVASIVE INTF		Not Cov	Yes	Not Cov	Yes		Yes	Yes
E0466	HOME VENTILATOR ANY TYPE USED W NON-INVASV INTF		Not Cov	Yes	Not Cov	Yes		Yes	Yes
E0467	HOME VENTILATOR MULTI-FUNCTION RESPIRATORY DEVC		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
E0470	RESP ASST DEVC BI-LEVEL PRSS CAPABILITY W O BACKU		Not Cov	No	Not Cov	No		No	No
E0471	RESP ASST DEVC BI-LEVEL PRSS CAPABILITY W BACK-UP		Not Cov	No	Not Cov	No		No	No
E0472	RESP ASST DEVC BI-LEVEL PRSS CAPABILITY W BACKUP		Not Cov	No	Not Cov	No		No	No
E0480	PERCUSSOR ELECTRIC OR PNEUMATIC HOME MODEL		Not Cov	No	Not Cov	No		No	No
E0481	INTRAPULM PERCUSSIVE VENT SYSTEM AND REL ACSSORIES		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Yes
E0482	COUGH STIM DEVICE ALTRNAT POS AND NEG ARWAY PRESS		Not Cov	No	Not Cov	No		No	No
E0483	HI FREQ CHST WALL OSCILLAT AIR-PULSE GEN SYS EA		Not Cov	Yes	Not Cov	Yes		Yes	Yes
E0484	OSCILLATORY POS EXPIRATORY PRSS DEVC NON-ELEC EA		Not Cov	No	Not Cov	No		No	No
E0485	ORL DEVC APPL RDUC UP ARWAY COLLAPSIBILITY PRFAB		Not Cov	Not Cov	Not Cov	Not Cov		No	No
E0486	ORL DEVC APPL RDUC UP AIRWAY COLLAPSIBILITY CSTM		Not Cov	Not Cov	Not Cov	Not Cov		No	No
E0487	SPIROMETER ELECTRONIC INCLUDES ALL ACCESSORIES		No	Not Cov	Not Cov	Not Cov		Not Cov	No
E0500	IPPB MACH W BUILT-IN NEBULIZATION; VALVS; PWR		Not Cov	Not Cov	Not Cov	Not Cov		No	No
E0550	HUMDIFIR DURBLE EXT SUPLMNTL DUR IPPB TX O2 DEL		Not Cov	Not Cov	Not Cov	Not Cov		No	No
E0555	HUMDIFIR DURABLE GLASS AUTOCLAVABLE PLSTC BOTTLE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
E0560	HUMDIFIR DURABLE SUPLMNTL DUR IPPB TX O2 DEL		Not Cov	Not Cov	Not Cov	Not Cov		No	No

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			Outpatient		ASC	Office Setting			
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E0561	HUMDIFIR NON-HEATED USED W POS AIRWAY PRESS DEVC		Not Cov	No	Not Cov	No		No	No
E0562	HUMDIFIR HEATED USED W POS ARWAY PRESSURE DEVICE		Not Cov	No	Not Cov	No		No	No
E0565	COMPRS AIR PWR EQP NOT SLF-CONTAIND CYL DRIVN		Not Cov	No	Not Cov	No		No	No
E0570	NEBULIZER WITH COMPRESSOR		Not Cov	No	Not Cov	No		No	No
E0572	AROSL COMPRS ADJUSTBL PRSS LGHT DUTY INTERMIT USE		Not Cov	Not Cov	Not Cov	Not Cov		No	No
E0574	ULTRASONIC ELEC AROSL GEN W SMALL VOLUME NEB		Not Cov	Not Cov	Not Cov	Not Cov		No	No
E0575	NEBULIZER ULTRASONIC LARGE VOLUME		Not Cov	Not Cov	Not Cov	Not Cov		No	No
E0580	NEBULIZR DURABLE GLASS AUTOCLAVABLE PLSTC BOTTLE		Not Cov	Not Cov	Not Cov	Not Cov		No	No
E0585	NEBULIZER WITH COMPRESSOR AND HEATER		Not Cov	Not Cov	Not Cov	Not Cov		No	No
E0600	RESP SUCTION PUMP HOME MODEL PRTBLE STATION ELEC		Not Cov	No	Not Cov	No		No	No
E0601	CONTINUOUS POSITIVE AIRWAY PRESSURE DEVICE		Not Cov	No	Not Cov	No		No	No
E0602	BREAST PUMP MANUAL ANY TYPE	Not req up to HCA limits	Not Cov	No	Not Cov	No		No	No
E0603	BREAST PUMP ELECTRIC ANY TYPE	Not req up to HCA limits	No	No	Not Cov	No		Not Cov	No
E0604	BREAST PUMP HEVY DUTY HOSP GRADE PISTON OP	Not req up to HCA limits	Not Cov	No	Not Cov	No		No	No
E0605	VAPORIZER ROOM TYPE		Not Cov	Not Cov	Not Cov	Not Cov		No	No
E0606	POSTURAL DRAINAGE BOARD		Not Cov	Not Cov	Not Cov	Not Cov		No	No
E0607	HOME BLOOD GLUCOSE MONITOR		Not Cov	No	Not Cov	No		No	No
E0610	PACEMKR MON CHECKS BATTERY DEPLET W AUDIBL AND VISIBL		Not Cov	Not Cov	Not Cov	Not Cov		No	No
E0615	PACEMKR MON CHECKS BATTERY DEPLET W DIGTL VISIBL		Not Cov	Not Cov	Not Cov	Not Cov		No	No
E0616	IMPL CARD EVENT RECORDR W MEM ACTIVATOR AND PROGMMER		No	No	Not Cov	No		No	No
E0617	EXTERNAL DEFIB W INTEGRATED ECG ANALY		Not Cov	Not Cov	Not Cov	Not Cov		No	No
E0618	APNEA MONITOR WITHOUT RECORDING FEATURE		Not Cov	Not Cov	Not Cov	Not Cov		No	No
E0619	APNEA MONITOR WITH RECORDING FEATURE		Not Cov	No	Not Cov	No		No	No
E0620	SKIN PIERCING DEVICE CLCT CAPILLARY BLD LASER EA		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
E0621	SLING OR SEAT PATIENT LIFT CANVAS OR NYLON		Not Cov	No	Not Cov	No		No	No
E0625	PATIENT LIFT BATHROOM OR TOILET NOC		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
E0627	SEAT LIFT MECHANISM ELECTRIC ANY TYPE		Not Cov	Not Cov	Not Cov	Not Cov		No	No
E0629	SEAT LIFT MECHANISM NON-ELECTRIC ANY TYPE		Not Cov	Not Cov	Not Cov	Not Cov		No	No
E0630	PATIENT LIFT HYDRAULIC MECH INCL SEAT SLING PAD		Not Cov	No	Not Cov	No		No	No
E0635	PATIENT LIFT ELECTRIC WITH SEAT OR SLING		Not Cov	No	Not Cov	No		No	No
E0636	MX PSTN PT SUPP SYS INTGR LIFT PT ACSSIBLE CNTRL		Not Cov	Not Cov	Not Cov	Not Cov		No	No
E0637	COMB SIT STAND FRAME TABLE SYS SEATLIFT FEATURE		Not Cov	No	Not Cov	No		Not Cov	No
E0638	STANDING FRAME TABLE SYS ONE POSITION ANY SZ		Not Cov	No	Not Cov	No		Not Cov	No
E0639	PT LIFT MOVEABLE ROOM-ROOM W DISASSMBL AND REASSMBL		Not Cov	No	Not Cov	No		No	No
E0640	PATIENT LIFT FIX SYS INCLUDES ALL CMPNTS ACCESS		Not Cov	Not Cov	Not Cov	Not Cov		No	No
E0641	STANDING FRAME TABLE SYS MULTI-POSITION ANY SZ		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
E0642	STANDING FRAME TABLE SYS MOBILE DYNAMIC ANY SZ		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No

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			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
E0650	PNEUMATIC COMPRESSOR NONSEGMENTAL HOME MODEL		Not Cov	No	Not Cov	No		No	No
E0651	PNEUMAT COMPRS SEG HOM MDL NO CALBRD GRDNT PRSS		Not Cov	Not Cov	Not Cov	Not Cov		No	No
E0652	PNEUMAT COMPRS SEG HOM MDL W CALBRD GRADNT PRSS	PA Req 11/1/19	Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
E0655	NONSEG PNEUMAT APPLINC W PNEUMAT COMPRS HALF ARM		Not Cov	No	Not Cov	No		No	No
E0656	SEG PNEUMAT APPLIANCE USE W PNEUMAT COMPRS TRUNK		Not Cov	Not Cov	Not Cov	Not Cov		No	No
E0657	SEG PNEUMAT APPLIANCE USE W PNEUMAT COMPRS CHEST		Not Cov	Not Cov	Not Cov	Not Cov		No	No
E0660	NONSEG PNEUMAT APPLINC W PNEUMAT COMPRS FULL LEG		Not Cov	No	Not Cov	No		No	No
E0665	NONSEG PNEUMAT APPLINC W PNEUMAT COMPRS FULL ARM		Not Cov	No	Not Cov	No		No	No
E0666	NONSEG PNEUMAT APPLINC W PNEUMAT COMPRS HALF LEG		Not Cov	No	Not Cov	No		No	No
E0667	SEG PNEUMAT APPLINC W PNEUMAT COMPRS FULL LEG		Not Cov	Not Cov	Not Cov	Not Cov		No	No
E0668	SEG PNEUMAT APPLINC W PNEUMAT COMPRS FULL ARM		Not Cov	Not Cov	Not Cov	Not Cov		No	No
E0669	SEG PNEUMAT APPLINC W PNEUMAT COMPRS HALF LEG		Not Cov	Not Cov	Not Cov	Not Cov		No	No
E0670	SEG PNEU APPLINC PNEU COMPRS IN 2 FULL LEGS TRNK		Not Cov	Not Cov	Not Cov	Not Cov		No	No
E0671	SEGMENTAL GRADENT PRESS PNEUMAT APPLINC FULL LEG		Not Cov	Not Cov	Not Cov	Not Cov		No	No
E0672	SEGMENTAL GRADENT PRESS PNEUMAT APPLINC FULL ARM		Not Cov	Not Cov	Not Cov	Not Cov		No	No
E0673	SEGMENTAL GRADENT PRESS PNEUMAT APPLINC HALF LEG		Not Cov	Not Cov	Not Cov	Not Cov		No	No
E0675	PNEUMAT COMPRS DEVC HI PRSS RAPID INFLATION DEFL		Not Cov	Not Cov	Not Cov	Not Cov		No	No
E0676	INTERMITTENT LIMB COMPRESSION DEVICE NOS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
E0691	UV LIGHT TX SYS BULB LAMP TIMER; TX 2 SQ FT LESS		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
E0692	UV LT TX SYS PANL W BULB LAMP TIMER 4 FT PANEL		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
E0693	UV LT TX SYS PANL W BULBS LAMPS TIMER 6 FT PANEL		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
E0694	UV MX DIR LT TX SYS 6 FT CABINET W BULB LAMP TMR		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
E0700	SAFETY EQUIPMENT DEVICE OR ACCESSORY ANY TYPE		Not Cov	No	Not Cov	No		Not Cov	No
E0705	TRANSPER DEVICE ANY TYPE EACH		Not Cov	No	Not Cov	No		No	No
E0710	RESTRAINT ANY TYPE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
E0720	TENS DEVICE TWO LEAD LOCALIZED STIMULATION		Not Cov	Not Cov	Not Cov	Not Cov		No	No
E0730	TENS DEVICE 4 MORE LEADS MULTI NERVE STIMULATION		Not Cov	Not Cov	Not Cov	Not Cov		No	No
E0731	FORM-FITTING CONDUCTIVE GARMENT DELIV TENS NMES		Not Cov	Not Cov	Not Cov	Not Cov		No	No

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			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
E0740	NON-IMPL PELV FLR ELECTRICAL STIMULATOR CMPL SYS		Not Cov	No	Not Cov	No		No	No
E0744	NEUROMUSCULAR STIMULATOR FOR SCOLIOSIS		Not Cov	Not Cov	Not Cov	Not Cov		No	No
E0745	NEUROMUSCULAR STIMULATOR ELECTRONIC SHOCK UNIT		Not Cov	Not Cov	Not Cov	Not Cov		No	No
E0746	ELECTROMYOGRAPHY BIOFEEDBACK DEVICE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
E0747	OSTOGNS STIM ELEC NONINVASV OTH THAN SP APPLIC		Not Cov	Yes	Not Cov	Yes		Yes	Yes
E0748	OSTOGNS STIMULATOR ELEC NONINVASV SPINAL APPLIC		Not Cov	Yes	Not Cov	Yes		Yes	Yes
E0749	OSTEOGENESIS STIMULATOR ELEC SURGICALLY IMPL		Yes	Not Cov	Not Cov	Not Cov		Yes	Yes
E0755	ELECTRONIC SALIVARY REFLEX STIMULATOR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
E0760	OSTOGNS STIM LOW INTENS ULTRASOUND NON-INVASV		Not Cov	Yes	Not Cov	Yes		Yes	Yes
E0761	NON-THRML PULS RADIOWAV ELECMAGNET ENRGY TX DEVC		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
E0762	TRANSCUT ELEC JOINT STIM DEVC SYS INCL ALL ACCSS		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
E0764	FUNC NEUROMUSC STIM MUSC AMBUL CMPT CNTRL SC INJ		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
E0765	FDA APPRVD NRV STIM W REPL BATTERY TX NAUSA AND VOMIT		Not Cov	Not Cov	Not Cov	Not Cov		No	No
E0766	ELEC STIM DVC U CANCER TX INCL ALL ACC ANY TYPE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Yes
E0769	ESTIM ELECTROMAGNETIC WOUND TREATMENT DEVC NOC		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
E0770	FES TRANSQ STIM NERV AND MUSC GRP CMPL SYS NOS		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
E0776	IV POLE		Not Cov	No	Not Cov	No		No	No
E0779	AMB INFUS PUMP MECH REUSABLE INFUS 8 HOURS GT		Not Cov	No	Not Cov	No		No	No
E0780	AMB INFUS PUMP MECH REUSABLE INFUS UNDER 8 HOURS		Not Cov	No	Not Cov	No		No	No
E0781	AMB INFUS PUMP 1 MX CHANNL W ADMN EQP WORN BY PT		Not Cov	No	Not Cov	No		No	No
E0782	INFUSION PUMP IMPLANTABLE NON-PROGRAMMABLE		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
E0783	INFUSION PUMP SYSTEM IMPLANTABLE PROGRAMMABLE		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
E0784	EXTERNAL AMBULATORY INFUSION PUMP INSULIN		Not Cov	Yes	Not Cov	Yes		Yes	Yes
E0785	IMPLANTABLE INTRASPINL CATHETER USED W PUMP-REPL		Not Cov	Yes	Not Cov	Yes		Yes	Yes
E0786	IMPLANTABLE PROGRAMMABLE INFUSION PUMP REPL		Not Cov	Yes	Not Cov	Yes		Yes	Yes
E0791	PARNTRAL INFUS PUMP STATIONRY SINGLE MULTICHANEL		Not Cov	No	Not Cov	No		No	No
E0830	AMBULATORY TRACTION DEVICE ALL TYPES EACH		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
E0840	TRACTION FRAME ATTCH TO HEADBOARD CERV TRACTION		Not Cov	No	Not Cov	No		No	No
E0849	TRACTION EQP CERV FREESTAND STAND FRME PNEUMATIC		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
E0850	TRACTION STAND FREESTANDING CERVICAL TRACTION		Not Cov	No	Not Cov	No		No	No

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DOS Effective 10/1/19; Posted 10/30/19

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Code	Code Description	Comments	Apple Health & IMC Medical				IMC / BHSO (Mental Health covered svcs)	Medicare	Market Place
			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
E0855	CERVICAL TRACTION EQUIP NOT RQR ADD STAND FRAME		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
E0856	CERVICAL TRACTION DEVICE INFLATABLE AIR BLADDER		Not Cov	Not Cov	Not Cov	Not Cov		No	No
E0860	TRACTION EQUIPMENT OVERDOOR CERVICAL		Not Cov	No	Not Cov	No		No	No
E0870	TRACTION FRAME ATTCH TO FOOTBOARD EXTREM TRACTN		Not Cov	No	Not Cov	No		No	No
E0880	TRACTION STAND FREESTANDING EXTREMITY TRACTION		Not Cov	No	Not Cov	No		No	No
E0890	TRACTION FRAME ATTCH FOOTBOARD PELVIC TRACTION		Not Cov	No	Not Cov	No		No	No
E0900	TRACTION STAND FREESTANDING PELVIC TRACTION		Not Cov	No	Not Cov	No		No	No
E0910	TRAPEZ BAR KNOWN AS PT HLPR ATTCH BED W GRAB BAR		Not Cov	No	Not Cov	No		No	No
E0911	TRAPEZ BAR HEVY DUTY PT WT OVER 250 LBS BED GRAB BAR		Not Cov	No	Not Cov	No		No	No
E0912	TRAPEZ BAR HEVY DUTY PT WT OVER 250 LBS FREE STAND		Not Cov	No	Not Cov	No		No	No
E0920	FRACTURE FRAME ATTACHED TO BED INCLUDES WEIGHTS		Not Cov	No	Not Cov	No		No	No
E0930	FRACTURE FRAME FREESTANDING INCLUDES WEIGHTS		Not Cov	No	Not Cov	No		No	No
E0935	CONTINUOUS PASSIVE MOT EXERCISE DEVC KNEE ONLY		Not Cov	No	Not Cov	No		No	No
E0936	CONT PASSIVE MOTION EXERCISE DEVC OTH THAN KNEE		Not Cov	No	Not Cov	No		Not Cov	No
E0940	TRAPEZE BAR FREESTANDING COMPLETE WITH GRAB BAR		Not Cov	No	Not Cov	No		No	No
E0941	GRAVITY ASSISTED TRACTION DEVICE ANY TYPE		Not Cov	No	Not Cov	No		No	No
E0942	CERVICAL HEAD HARNESS HALTER		Not Cov	No	Not Cov	No		No	No
E0944	PELVIC BELT HARNESS BOOT		Not Cov	No	Not Cov	No		No	No
E0945	EXTREMITY BELT HARNESS		Not Cov	No	Not Cov	No		No	No
E0946	FRACTURE FRAME DUAL W CROSS BARS ATTACHED TO BED		Not Cov	No	Not Cov	No		No	No
E0947	FRACTURE FRAME ATTCH COMPLEX PELVIC TRACTION		Not Cov	No	Not Cov	No		No	No
E0948	FRACTURE FRAME ATTCH COMPLEX CERVICAL TRACTION		Not Cov	No	Not Cov	No		No	No
E0950	WHEELCHAIR ACCESSORY TRAY EACH		Not Cov	No	Not Cov	No		No	No
E0951	HEEL LOOP HOLDER TYPE W WO ANKLE STRAP EACH		Not Cov	No	Not Cov	No		No	No
E0952	TOE LOOP HOLDER ANY TYPE EACH		Not Cov	No	Not Cov	No		No	No
E0953	WHEELCHAIR AC LAT THIGH KNEE SUPP ANY TYPE EA		Not Cov	No	Not Cov	No		No	No
E0954	WHEELCHAIR ACCESSORY FOOT BOX ANY TYPE EACH FOOT		Not Cov	No	Not Cov	No		No	No
E0955	WC ACSS HEADREST CUSHNED FIX MOUNT HARDWARE EA		Not Cov	No	Not Cov	No		No	No
E0956	WC ACSS LAT TRNK HIP SUPP FIX MOUNT HARDWARE EA		Not Cov	No	Not Cov	No		No	No
E0957	WC ACSS MED THI SUPP FIX MOUNT HARDWARE EA		Not Cov	No	Not Cov	No		No	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
E0958	MANUAL WHLCHAIR ACCESS 1-ARM DRIVE ATTACHMENT EA		Not Cov	No	Not Cov	No		No	No
E0959	MANUAL WHEELCHAIR ACCESS ADAPTER FOR AMPUTEE EA		Not Cov	No	Not Cov	No		No	No
E0960	WC ACSS SHLDR HRNSS STRAPS CHST STRAP W TYPE MOU		Not Cov	No	Not Cov	No		No	No
E0961	MANUAL WHEELCHAIR ACCESS WHEEL LOCK BRAKE EXT EA		Not Cov	No	Not Cov	No		No	No
E0966	MANUAL WHEELCHAIR ACCESS HEADREST EXTENSION EA		Not Cov	No	Not Cov	No		No	No
E0967	MNL WHLCHR AC HND RIM PROJ ANY TYP REPL ONLY EA		Not Cov	No	Not Cov	No		No	No
E0968	COMMODE SEAT WHEELCHAIR		Not Cov	Not Cov	Not Cov	Not Cov		No	No
E0969	NARROWING DEVICE WHEELCHAIR		Not Cov	Not Cov	Not Cov	Not Cov		No	No
E0970	NO 2 FOOTPLATES EXCEPT FOR ELEVATING LEGREST		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
E0971	MNL WHEELCHAIR ACCESSORY ANTI-TIPPING DEVC EACH		Not Cov	No	Not Cov	No		No	No
E0973	WC ACCSS ADJUSTBL HT DTACH ARMST CMPL ASSMBL EA		Not Cov	No	Not Cov	No		No	No
E0974	MANUAL WHEELCHAIR ACCESS ANTI-ROLLBACK DEVICE EA		Not Cov	No	Not Cov	No		No	No
E0978	WHLCHAIR ACSS PSTN BELT SFTY BELT PELV STRAP EA		Not Cov	No	Not Cov	No		No	No
E0980	SAFETY VEST WHEELCHAIR		Not Cov	No	Not Cov	No		No	No
E0981	WHEELCHAIR ACCESS SEAT UPHLSTR REPLCMT ONLY EA		Not Cov	No	Not Cov	No		No	No
E0982	WHEELCHAIR ACCESS BACK UPHLSTR REPLCMT ONLY EA		Not Cov	No	Not Cov	No		No	No
E0983	MNL WC ACSS PWR ADD-ON CONVRT MNL WC MOTRIZD WC		Not Cov	Yes	Not Cov	Yes		Yes	Yes
E0984	MNL WC ACSS PWR ADD-ON CONVRT MNL WC MOTRIZD WC		Not Cov	Yes	Not Cov	Yes		Yes	Yes
E0985	WHEELCHAIR ACCESSORY SEAT LIFT MECHANISM		Not Cov	No	Not Cov	No		No	No
E0986	MNL WHEELCHAIR ACSS PUSH-RIM ACT PWR ASSIST SYS		Not Cov	Yes	Not Cov	Yes		Yes	Yes
E0988	MANUAL WC ACCESSORY LEVR-ACTIVATD WHL DRIVE PAIR		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
E0990	WHEELCHAIR ACCESS ELEV LEG REST CMPL ASSMBL EA		Not Cov	No	Not Cov	No		No	No
E0992	MANUAL WHEELCHAIR ACCESSORY SOLID SEAT INSERT		Not Cov	No	Not Cov	No		No	No
E0994	ARMREST EACH		Not Cov	No	Not Cov	No		No	No
E0995	WHEELCHAIR ACCESSORY CALF REST PAD REPL ONLY EA		Not Cov	No	Not Cov	No		No	No
E1002	WHEELCHAIR ACCESS POWER SEATING SYSTEM TILT ONLY		Not Cov	Yes	Not Cov	Yes		Yes	Yes
E1003	WC ACSS PWR SEAT SYS RECLINE W O SHEAR RDUC		Not Cov	Yes	Not Cov	Yes		Yes	Yes
E1004	WC ACSS PWR SEAT SYS RECLINE W MECH SHEAR RDUC		Not Cov	Yes	Not Cov	Yes		Yes	Yes
E1005	WC ACSS PWR SEAT SYS RECLINE W PWR SHEAR RDUC		Not Cov	Yes	Not Cov	Yes		Yes	Yes

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			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
E1006	WC ACSS PWR SEAT SYS TILT AND RECLINE NO SHEAR RDUC		Not Cov	Yes	Not Cov	Yes		Yes	Yes
E1007	WC ACSS PWR SEAT TILT AND RECLINE MECH SHEAR RDUC		Not Cov	Yes	Not Cov	Yes		Yes	Yes
E1008	WC ACSS PWR SEAT TILT AND RECLINE W PWR SHEAR RDUC		Not Cov	Yes	Not Cov	Yes		Yes	Yes
E1009	WC ACCSS ADD PWR SEAT MECH LINKD LEG ELEV SYS EA		Not Cov	Not Cov	Not Cov	Not Cov		No	No
E1010	WC ACCSS ADD PWR SEAT SYS PWR LEG ELEV SYS PAIR		Not Cov	Yes	Not Cov	Yes		Yes	Yes
E1011	MOD PEDIATRIC SIZE WC WIDTH ADJUSTMENT PACKAGE		Not Cov	No	Not Cov	No		No	No
E1012	WC ACCSS PWR SEAT SYS CNTR MNT PWR ELEV LEG EA		Not Cov	Yes	Not Cov	Yes		Yes	Yes
E1014	RECLIN BACK ADDITION PEDIATRIC SIZE WHEELCHAIR		Not Cov	Yes	Not Cov	Yes		Yes	Yes
E1015	SHOCK ABSORBER FOR MANUAL WHEELCHAIR EACH		Not Cov	No	Not Cov	No		No	No
E1016	SHOCK ABSORBER FOR POWER WHEELCHAIR EACH		Not Cov	No	Not Cov	No		No	No
E1017	HEVY DUTY SHOCK ABSORBR HEVY XTRA HEVY MNL WC EA		Not Cov	No	Not Cov	No		No	No
E1018	HEVY DUTY SHOCK ABSORBR HEVY XTRA HEVY PWR WC EA	PA Req	Not Cov	Yes	Not Cov	Yes		No	No
E1020	RESIDUAL LIMB SUPPORT SYSTEM WHEELCHAIR ANY TYPE		Not Cov	Yes	Not Cov	Yes		Yes	Yes
E1028	WC ACCSS MANL SWINGAWAY OTH CNTRL INTRFCE PSTN		Not Cov	Yes	Not Cov	Yes		Yes	Yes
E1029	WHEELCHAIR ACCESSORY VENTILATOR TRAY FIXED		Not Cov	Yes	Not Cov	Yes		Yes	Yes
E1030	WHEELCHAIR ACCESSORY VENTILATOR TRAY GIMBALED		Not Cov	Yes	Not Cov	Yes		Yes	Yes
E1031	ROLLABOUT CHAIR ANY AND ALL TYPES W CASTERS 5 IN GT		Not Cov	No	Not Cov	No		No	No
E1035	MULTI-PSTN PT TRNSF SYS W SEAT PT WT UNDER EQ 300 LBS		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
E1036	MULTI-PSTN PT TRNSF SYS EXTRA WIDE PT OVER 300 LBS		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
E1037	TRANSPORT CHAIR PEDIATRIC SIZE		Not Cov	Not Cov	Not Cov	Not Cov		No	No
E1038	TRNSPRT CHAIR ADLT SZ PT WT CAP TO AND INCL 300 LBS		Not Cov	Not Cov	Not Cov	Not Cov		No	No
E1039	TRNSPRT CHAIR ADLT SZ HEVY DUTY PT WT CAP OVER 300 LB		Not Cov	Not Cov	Not Cov	Not Cov		No	No
E1050	FULL RECLIN WHLCHAIR; FIX FULL-LEN ARMS LEGRESTS		Not Cov	Not Cov	Not Cov	Not Cov		No	No
E1060	FULL RECLIN WHLCHAIR; DTACHBLE ARMS LEGRESTS		Not Cov	No	Not Cov	No		No	No
E1070	FULLY RECLIN WHLCHAIR; DTACHBLE ARMS FOOTRESTS		Not Cov	Not Cov	Not Cov	Not Cov		No	No
E1083	HEMI-W C; FIXED FULL-LEN ARMS DETACHBLE LEGREST		Not Cov	Not Cov	Not Cov	Not Cov		No	No
E1084	HEMI-WHLCHAIR; DTACHBLE ARMS DESK FULL LEGRESTS		Not Cov	Not Cov	Not Cov	Not Cov		No	No
E1085	HEMI-WHLCHAIR; FIX FULL ARMS DTACHBLE FOOTRESTS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No

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			Outpatient		ASC	Office Setting			
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E1086	HEMI-WHLCHAIR; DTACHBLE ARMS DESK FULL FOOTRESTS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
E1087	HI-STRGTH LGHTWT WHLCHAIR; FIX ARMS DTACH LEGRST		Not Cov	Not Cov	Not Cov	Not Cov		No	No
E1088	HI-STRGTH LGHTWT WHLCHAIR; DTACHBL ARMS LEGRESTS		Not Cov	Not Cov	Not Cov	Not Cov		No	No
E1089	HI-STRGTH LGHTWT WHLCHAIR; FIX ARM DTACH FOOTRST		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
E1090	HI-STRGTH LGHTWT WHLCHAIR; DTACHBL ARMS FOOTREST		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
E1092	WIDE HEVY-DUTY WHLCHAIR; DTACHBLE ARMS LEGRESTS		Not Cov	Not Cov	Not Cov	Not Cov		No	No
E1093	WIDE HEVY-DUTY WHLCHAIR; DTACHBLE ARMS FOOTRESTS		Not Cov	Not Cov	Not Cov	Not Cov		No	No
E1100	SEMI-RECLIN WHLCHAIR; FIX ARMS DTACHBLE LEGRESTS		Not Cov	Not Cov	Not Cov	Not Cov		No	No
E1110	SEMI-RECLIN WHLCHAIR; DTACHBLE ARMS ELEV LEGREST		Not Cov	Not Cov	Not Cov	Not Cov		No	No
E1130	STD WHLCHAIR; FIX FULL-LEN ARMS DTACHBL FOOTRSTS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
E1140	WHLCHAIR; DTACHBLE ARMS DTACHBLE FOOTRESTS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
E1150	WHLCHAIR; DTACHBLE ARMS DTACHBLE ELEV LEGRESTS		Not Cov	Not Cov	Not Cov	Not Cov		No	No
E1160	WHLCHAIR; FIX FULL-LEN ARMS DTACHBL ELEV LEGRSTS		Not Cov	Not Cov	Not Cov	Not Cov		No	No
E1161	MANUAL ADULT SIZE WHEELCHAIR INCLUDES TILT SPACE		Not Cov	Yes	Not Cov	Yes		Yes	Yes
E1170	AMPUTEE WHLCHAIR; FIX FULL ARMS DTACHBL LEGRESTS		Not Cov	Not Cov	Not Cov	Not Cov		No	No
E1171	AMPUTEE WHLCHAIR; FIX FULL ARMS W O FOOT LEGREST		Not Cov	Not Cov	Not Cov	Not Cov		No	No
E1172	AMPUTEE WHLCHAIR; DTACHBL ARMS W O FOOT LEGRESTS		Not Cov	Not Cov	Not Cov	Not Cov		No	No
E1180	AMPUTEE WHLCHAIR; DTACHBL ARMS DTACHBL FOOTRESTS		Not Cov	Not Cov	Not Cov	Not Cov		No	No
E1190	AMPUTEE WHLCHAIR; DTACHBL ARMS DTACHBL LEGRESTS		Not Cov	Not Cov	Not Cov	Not Cov		No	No
E1195	HEVY DUTY WHLCHAIR; FIX FULL ARMS DTACHBL LEGRST		Not Cov	Not Cov	Not Cov	Not Cov		No	No
E1200	AMPUTEE WHLCHAIR; FIX FULL ARMS DTACHBL FOOTRSTS		Not Cov	Not Cov	Not Cov	Not Cov		No	No
E1220	WHEELCHAIR; SPECIALLY SIZED OR CONSTRUCTED		Not Cov	Not Cov	Not Cov	Not Cov		No	No
E1221	WHEELCHAIR WITH FIXED ARM FOOTRESTS		Not Cov	Not Cov	Not Cov	Not Cov		No	No
E1222	WHEELCHAIR WITH FIXED ARM ELEVATING LEGRESTS		Not Cov	Not Cov	Not Cov	Not Cov		No	No
E1223	WHEELCHAIR WITH DETACHABLE ARMS FOOTRESTS		Not Cov	Not Cov	Not Cov	Not Cov		No	No
E1224	WHEELCHAIR W DETACHABLE ARMS ELEVATING LEGRESTS		Not Cov	Not Cov	Not Cov	Not Cov		No	No

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E1225	WHLCHAIR ACCESS MANUAL SEMIRECLINING BACK EACH		Not Cov	Yes	Not Cov	Yes		Yes	Yes
E1226	WHLCHAIR ACCESS MANUAL FULL RECLINING BACK EACH		Not Cov	Yes	Not Cov	Yes		Yes	Yes
E1227	SPECIAL HEIGHT ARMS FOR WHEELCHAIR		Not Cov	Yes	Not Cov	Yes		Yes	Yes
E1228	SPECIAL BACK HEIGHT FOR WHEELCHAIR		Not Cov	No	Not Cov	No		No	No
E1229	WHEELCHAIR PEDIATRIC SIZE NOS		Not Cov	No	Not Cov	No		No	No
E1230	PWR OPERATED VEH SPEC BRAND NAME AND MODEL NUMBER		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
E1231	WC PED SZ TILT-IN-SPACE RIGD ADJUSTBL W SEAT SYS		Not Cov	No	Not Cov	No		No	No
E1232	WC PED SZ TILT-IN-SPACE FOLD ADJUSTBL W SEAT SYS		Not Cov	Yes	Not Cov	Yes		Yes	Yes
E1233	WC PED SZ TILT-IN-SPACE RIGD ADJUSTBL W O SEAT		Not Cov	Yes	Not Cov	Yes		Yes	Yes
E1234	WC PED SZ TILT-IN-SPACE FOLD ADJUSTBL W O SEAT		Not Cov	Yes	Not Cov	Yes		Yes	Yes
E1235	WHLCHAIR PED SIZE RIGD ADJUSTBL W SEATING SYSTEM		Not Cov	Yes	Not Cov	Yes		Yes	Yes
E1236	WHLCHAIR PED SIZE FOLD ADJUSTBL W SEATING SYSTEM		Not Cov	Yes	Not Cov	Yes		Yes	Yes
E1237	WHLCHAIR PED SZ RIGD ADJUSTBL W O SEATING SYSTEM		Not Cov	Yes	Not Cov	Yes		Yes	Yes
E1238	WHLCHAIR PED SZ FOLD ADJUSTBL W O SEATING SYSTEM		Not Cov	Yes	Not Cov	Yes		Yes	Yes
E1239	POWER WHEELCHAIR PEDIATRIC SIZE NOS		Not Cov	No	Not Cov	No		No	No
E1240	LGHTWT WHLCHAIR; DTACHBLE ARMS DTACHBLE LEGREST		Not Cov	Not Cov	Not Cov	Not Cov		No	No
E1250	LGHTWT WHLCHAIR; FIX FULL ARMS DTACHBL FOOTRESTS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
E1260	LGHTWT WHLCHAIR; DTACHBL ARMS DTACHBL FOOTRESTS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
E1270	LGHTWT WHLCHAIR; FIX ARMS DTACHBLE ELEV LEGRESTS		Not Cov	Not Cov	Not Cov	Not Cov		No	No
E1280	HEVY-DUTY WHLCHAIR; DTACHBLE ARMS ELEV LEGRESTS		Not Cov	Not Cov	Not Cov	Not Cov		No	No
E1285	HEVY-DUTY WHLCHAIR; FIX ARMS DTACHBLE FOOTRESTS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
E1290	HEVY-DUTY WC DTCHBL ARMS SWNG AWAY DTCHBL FTRST		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
E1295	HEVY-DUTY WHLCHAIR; FIX FULL ARMS ELEV LEGRESTS		Not Cov	Not Cov	Not Cov	Not Cov		No	No
E1296	SPECIAL WHEELCHAIR SEAT HEIGHT FROM FLOOR		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
E1297	SPECIAL WHEELCHAIR SEAT DEPTH BY UPHOLSTERY		Not Cov	No	Not Cov	No		No	No
E1298	SPECIAL WHLCHAIR SEAT DEPTH AND OR WIDTH CONSTRUCT		Not Cov	Yes	Not Cov	Yes		Yes	Yes
E1300	WHIRLPOOL PORTABLE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
E1310	WHIRLPOOL NONPORTABLE		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
E1352	OXYGEN ACC FLOW REG CPBL POS INSPIRATORY PRESS		Not Cov	No	Not Cov	No		No	No
E1353	REGULATOR		Not Cov	Not Cov	Not Cov	Not Cov		No	No
E1354	O2 ACCESS WHEELED CART PRTBLE CYL CONC REPL EA		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
E1355	STAND RACK		Not Cov	Not Cov	Not Cov	Not Cov		No	No

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E1356	O2 ACCESS BTRY PACK CRTRDGE PRTBLE CONC REPL EA		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
E1357	O2 ACCESS BATTERY CHARGER PRTBLE CONC REPL EA		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
E1358	O2 ACCESS DC POWER ADAPTER PRTBLE CONC REPL EA		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
E1372	IMMERSION EXTERNAL HEATER FOR NEBULIZER		Not Cov	No	Not Cov	No		No	No
E1390	O2 CONC 1 DEL PORT 85PCT OR GRT O2 CONC AT PRSC FLW RATE		Not Cov	No	Not Cov	No		No	No
E1391	O2 CONC 2 DEL PORT 85PCT OR GRT O2 CONC PRSC FLW RATE EA		Not Cov	Not Cov	Not Cov	Not Cov		No	No
E1392	PORTABLE OXYGEN CONCENTRATOR RENTAL		Not Cov	No	Not Cov	No		No	No
E1399	DURABLE MEDICAL EQUIPMENT MISCELLANEOUS		Not Cov	Yes	Not Cov	Yes		Yes	Yes
E1405	OXYGEN AND WATER VAPOR ENRICHING SYS W HEATED DELIV		Not Cov	Not Cov	Not Cov	Not Cov		No	No
E1406	OXYGEN AND WATR VAPOR ENRICHING SYS W O HEATED DELIV		Not Cov	Not Cov	Not Cov	Not Cov		No	No
E1500	CENTRIFUGE FOR DIALYSIS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
E1510	KIDNEY DIALYSATE DEL SYS KIDNEY MACH PUMP RECIRC		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
E1520	HEPARIN INFUSION PUMP FOR HEMODIALYSIS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
E1530	AIR BUBBLE DETECTOR HEMODIALYSIS EA REPLACEMENT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
E1540	PRESSURE ALARM FOR HEMODIALYSIS EACH REPLACEMENT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
E1550	BATH CONDUCTIVITY METER FOR HEMODIALYSIS EACH		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
E1560	BLOOD LEAK DETECTOR HEMODIALYSIS EA REPLACEMENT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
E1570	ADJUSTABLE CHAIR FOR ESRD PATIENTS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
E1575	TRANSDUCER PROTECTORS FL BARRIERS HEMODIAL SZ-10		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
E1580	UNIPUNCTURE CONTROL SYSTEM FOR HEMODIALYSIS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
E1590	HEMODIALYSIS MACHINE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
E1592	AUTO INTERMITTENT PERITONEAL DIALYSIS SYSTEM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
E1594	CYCLER DIALYSIS MACHINE FOR PERITONEAL DIALYSIS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
E1600	DELIV AND OR INSTL CHARGES HEMODIAL EQUIPMENT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
E1610	RVRS OSMOSIS H2O PURIFICATION SYSTEM HEMODIAL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
E1615	DEIONIZER WATER PURIFICATION SYSTEM HEMODIALYSIS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
E1620	BLOOD PUMP FOR HEMODIALYSIS REPLACEMENT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
E1625	WATER SOFTENING SYSTEM FOR HEMODIALYSIS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
E1630	RECIPROCATING PERITONEAL DIALYSIS SYSTEM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
E1632	WEARABLE ARTIFICIAL KIDNEY EACH		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
E1634	PERITONEAL DIALYSIS CLAMPS EACH		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
E1635	COMPACT TRAVEL HEMODIALYZER SYSTEM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
E1636	SORBENT CARTRIDGES FOR HEMODIALYSIS PER 10		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No

This prior authorization guide applies to Medicaid, Medicare, and Marketplace.

DOS Effective 10/1/19; Posted 10/30/19

All Inpatient services require prior authorization

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Code	Code Description	Comments	Apple Health & IMC Medical				IMC / BHSO (Mental Health covered svcs)	Medicare	Market Place
			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
E1637	HEMOSTATS EACH		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
E1639	SCALE EACH		Not Cov	Not Cov	Not Cov	Not Cov		No	No
E1699	DIALYSIS EQUIPMENT NOT OTHERWISE SPECIFIED		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
E1700	JAW MOTION REHABILITATION SYSTEM		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
E1701	REPL CUSHNS JAW MOTION REHAB SYSTEM PKG SIX		Not Cov	Not Cov	Not Cov	Not Cov		No	No
E1702	REPL MSR SCLS JAW MOTION REHAB SYSTEM PKG 200		Not Cov	Not Cov	Not Cov	Not Cov		No	No
E1800	DYN ADJUSTBL ELB EXT FLX DEVC W SFT INTRFCE MATL		Not Cov	Not Cov	Not Cov	Not Cov		No	No
E1801	STATIC PROGRESSIVE STRETCH ELBOW DEVICE		Not Cov	Not Cov	Not Cov	Not Cov		No	No
E1802	DYN ADJUSTBL FORARM PRON SUPIN DEVC INTRFCE MATL		Not Cov	Not Cov	Not Cov	Not Cov		No	No
E1805	DYN ADJUSTBL WRIST EXT FLX DEVC W INTERFCE MATL		Not Cov	Not Cov	Not Cov	Not Cov		No	No
E1806	STATIC PROGRESSIVE STRETCH WRIST DEVICE		Not Cov	Not Cov	Not Cov	Not Cov		No	No
E1810	DYN ADJUSTBL KNEE EXT FLX DEVC W INTERFCE MATL		Not Cov	Not Cov	Not Cov	Not Cov		No	No
E1811	STATIC PROGRESSIVE STRETCH KNEE DEVICE		Not Cov	Not Cov	Not Cov	Not Cov		No	No
E1812	DYN KNEE EXT FLEX DEVC W ACTV RESISTANCE CONTROL		Not Cov	Not Cov	Not Cov	Not Cov		No	No
E1815	DYN ADJ ANKLE EXT FLEX DEVC INCL SOFT INTF MATL		Not Cov	Not Cov	Not Cov	Not Cov		No	No
E1816	STATIC PROGRESSIVE STRETCH ANKLE DEVICE		Not Cov	Not Cov	Not Cov	Not Cov		No	No
E1818	STATIC PROGRESSIVE STRETCH FOREARM DEVICE		Not Cov	Not Cov	Not Cov	Not Cov		No	No
E1820	REPL SFT INTERFCE MATL DYN ADJUSTBL EXT FLX DEVC		Not Cov	Not Cov	Not Cov	Not Cov		No	No
E1821	REPL SFT INTERFCE MATL CUFF BI-DIR STAT DEVC		Not Cov	Not Cov	Not Cov	Not Cov		No	No
E1825	DYN ADJUSTBL FNGR EXT FLX DEVC W SFT INTRFCE MAT		Not Cov	Not Cov	Not Cov	Not Cov		No	No
E1830	DYN ADJUSTBL TOE EXT FLX DEVC W SFT INTRFCE MATL		Not Cov	Not Cov	Not Cov	Not Cov		No	No
E1831	STATIC PROGRESSIVE STRETCH TOE DEVICE		Not Cov	Not Cov	Not Cov	Not Cov		No	No
E1840	DYN ADJUSTBL SHLDR FLX ABDCT ROT DEVC SFT MATL		Not Cov	Not Cov	Not Cov	Not Cov		No	No
E1841	STATIC PROGRESSIVE STRETCH SHOULDER DEVICE		Not Cov	Not Cov	Not Cov	Not Cov		No	No
E1902	CMNCT BD NON-ELEC AUG ALTERNATV CMNCT DEVICE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
E2000	GASTR SUCTION PUMP HOM MODEL PRTBLE STATION ELEC		Not Cov	No	Not Cov	No		No	No
E2100	BLD GLU MONITOR W INTEGRATED VOICE SYNTHESIZER		Not Cov	No	Not Cov	No		No	No
E2101	BLD GLU MONITOR W INTEGRATED LANCING BLD SAMPLE		Not Cov	Not Cov	Not Cov	No		No	No
E2120	PULSE GEN SYS TYMPANIC TX INNR EAR ENDOLYMPH FL		Not Cov	No	Not Cov	No		No	No
E2201	MNL WC ACSS NONSTD SEAT WTH GRT THN EQ 20 IN AND UNDER		Not Cov	Yes	Not Cov	Yes		Yes	Yes
E2202	MANUAL WC ACSS NONSTD SEAT FRME WIDTH 24-27 IN		Not Cov	Yes	Not Cov	Yes		Yes	Yes
E2203	MANUAL WC ACSS NONSTD SEAT FRME DEPTH 20 UNDER 22 IN		Not Cov	Yes	Not Cov	Yes		Yes	Yes
E2204	MANUAL WC ACSS NONSTD SEAT FRME DEPTH 22-25 IN		Not Cov	Yes	Not Cov	Yes		Yes	Yes

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DOS Effective 10/1/19; Posted 10/30/19

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
E2205	MANUAL WC ACCESS HANDRIM W O PROJ REPL ONLY EACH		Not Cov	No	Not Cov	No		No	No
E2206	MANUAL WHEELCHAIR AC WL ASM CMPL REPL ONLY EA		Not Cov	No	Not Cov	No		No	No
E2207	WHEELCHAIR ACCESSORY CRUTCH AND CANE HOLDER EACH		Not Cov	No	Not Cov	No		No	No
E2208	WHEELCHAIR ACCESSORY CYLINDER TANK CARRIER EACH		Not Cov	No	Not Cov	No		No	No
E2209	ARM TROUGH WITH OR WITHOUT HAND SUPPORT EACH		Not Cov	No	Not Cov	No		No	No
E2210	WHEELCHAIR ACCESS BEARINGS ANY TYPE REPL ONLY EA		Not Cov	No	Not Cov	No		No	No
E2211	MNL WHLCHAIR ACSS PNEUMAT PROPULSION TIRE ANY SZ		Not Cov	No	Not Cov	No		No	No
E2212	MNL WC ACESS TUBE PNEUMAT PROPULSION TIRE ANY SZ		Not Cov	No	Not Cov	No		No	No
E2213	MNL WC ACSS INSRT PNEUMAT PROPULSION TIRE ANY SZ		Not Cov	No	Not Cov	No		No	No
E2214	MNL WHLCHAIR ACCESS PNEUMAT CASTER TIRE ANY SIZE		Not Cov	No	Not Cov	No		No	No
E2215	MNL WHLCHAIR ACSS TUBE PNEUMAT CASTR TIRE ANY SZ		Not Cov	No	Not Cov	No		No	No
E2216	MNL WC ACESS FOAM FILL PROPULSION TIRE ANY SZ		Not Cov	Not Cov	Not Cov	No		No	No
E2217	MNL WHLCHAIR ACCSS FOAM FILL CASTR TIRE ANY SIZE		Not Cov	Not Cov	Not Cov	No		No	No
E2218	MNL WHLCHAIR ACCSS FOAM PROPULSION TIRE ANY SIZE		Not Cov	Not Cov	Not Cov	No		No	No
E2219	MNL WHLCHAIR ACCESS FOAM CASTER TIRE ANY SIZE EA		Not Cov	No	Not Cov	No		No	No
E2220	MNL WC ACSS SOLD PROPULSION TIRE SZ REPL ONLY EA		Not Cov	No	Not Cov	No		No	No
E2221	MNL WC AC SOLID CASTER TIRE ANY SZ REPL ONLY EA		Not Cov	No	Not Cov	No		No	No
E2222	MNL WC AC SLD C TIRE I WHL SZ RPL E		Not Cov	No	Not Cov	No		No	No
E2224	MNL WC ACSS PROP WHL EXCLD TIRE SZ REPL ONLY EA		Not Cov	No	Not Cov	No		No	No
E2225	MNL WC CASTER WHL EXCLD TIRE ANY SZ REPL ONLY EA		Not Cov	No	Not Cov	No		No	No
E2226	MNL WHLCHAIR ACSS CASTR FORK ANY SZ REPL ONLY EA		Not Cov	No	Not Cov	No		No	No
E2227	MANUAL WC ACCESS GEAR REDUCTION DRIVE WHEEL EACH		Not Cov	Yes	Not Cov	Yes		Yes	Yes
E2228	MNL WC ACCESS WHEEL BRAKING SYS AND LOCK COMPLETE EA		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
E2230	MANUAL WHEELCHAIR ACCESSORY MANUAL STANDING SYS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
E2231	MNL WC ACCESS SOLID SEAT SUPP BASE INCL HARDWARE		Not Cov	No	Not Cov	No		No	No
E2291	BACK PLANAR PED SZ WC INCL FIX ATTCHING HARDWARE		Not Cov	Yes	Not Cov	Yes		Yes	Yes

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DOS Effective 10/1/19; Posted 10/30/19

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
E2292	SEAT PLANAR PED SZ WC INCL FIX ATTCHING HARDWARE		Not Cov	Yes	Not Cov	Yes		Yes	Yes
E2293	BACK CONTOURED PED WC INCL FIX ATTCH HARDWARE		Not Cov	Yes	Not Cov	Yes		Yes	Yes
E2294	SEAT CONTOURED PED WC INCL FIX ATTCH HARDWARE		Not Cov	Yes	Not Cov	Yes		Yes	Yes
E2295	MNL WC ACCESS PED SIZE WC DYNAMIC SEATING FRAME		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
E2300	WHEELCHAIR ACC PWR SEAT ELEVATION SYS ANY TYPE	PA Req 11/1/19	Not Cov	Yes	Not Cov	Yes		Not Cov	Yes
E2301	WHEELCHAIR ACCESSORY POWER STANDING SYS ANY TYPE		Not Cov	Not Cov	Not Cov	Yes		Not Cov	Yes
E2310	PWR WC ACSS ELEC CNCT BETWN WC CNTRLLER AND ONE PWR		Not Cov	Yes	Not Cov	Yes		Yes	Yes
E2311	PWR WC ACSS ELEC CNCT BETWN WC CNTRLLER AND TWO MORE		Not Cov	Yes	Not Cov	Yes		Yes	Yes
E2312	POWER WC ACCESS HAND OR CHIN CONTROL INTERFACE		Not Cov	Yes	Not Cov	Yes		Yes	Yes
E2313	POWER WC ACCESS HARNESS UPGRADE EXP CONTROLLR EA		Not Cov	Yes	Not Cov	Yes		Yes	Yes
E2321	PWR WC ACSS HND CNTRL REMOT JOYSTCK NO PRPRTNL		Not Cov	Yes	Not Cov	Yes		Yes	Yes
E2322	PWR WC ACSS HND CNTRL MX MECH SWTCH NO PRPRTNL		Not Cov	Yes	Not Cov	Yes		Yes	Yes
E2323	PWR WC ACSS SPCLTY JOYSTCK HNDLE HND CNTRL PRFAB		Not Cov	No	Not Cov	No		No	No
E2324	POWER WHLCHAIR ACSS CHIN CUP CHIN CNTRL INTERFCE		Not Cov	No	Not Cov	No		No	No
E2325	PWR WC ACSS SIP AND PUFF INTERFCE NONPROPRTNAL		Not Cov	Yes	Not Cov	Yes		Yes	Yes
E2326	PWR WC ACSS BREATH TUBE KIT SIP AND PUFF INTERFCE		Not Cov	Yes	Not Cov	Yes		Yes	Yes
E2327	PWR WC ACSS HEAD CNTRL INTERFCE MECH PROPRTNAL		Not Cov	Yes	Not Cov	Yes		Yes	Yes
E2328	PWR WC ACSS HEAD CNTRL EXT CNTRL ELEC PRPRTNL		Not Cov	Yes	Not Cov	Yes		Yes	Yes
E2329	PWR WC ACSS HEAD CNTRL CNTC SWTCH MECH NOPRPTNL		Not Cov	Yes	Not Cov	Yes		Yes	Yes
E2330	PWR WC ACCSS HEAD PROX SWITCH MECH NONPRPRTNL		Not Cov	Yes	Not Cov	Yes		Yes	Yes
E2331	PWR WC ACSS ATTENDANT CONTROL PROPRORTIONAL		Not Cov	Not Cov	Not Cov	Not Cov		No	No
E2340	POWER WC ACCESS NONSTAND SEAT FRAME WD 20-23 IN		Not Cov	Yes	Not Cov	Yes		Yes	Yes
E2341	PWR WC ACSS NONSTD SEAT FRME WIDTH 24-27 IN		Not Cov	Yes	Not Cov	Yes		Yes	Yes
E2342	PWR WC ACSS NONSTD SEAT FRME DEPTH 20 21 IN		Not Cov	Yes	Not Cov	Yes		Yes	Yes
E2343	PWR WC ACSS NONSTD SEAT FRME DEPTH 22-25 IN		Not Cov	Yes	Not Cov	Yes		Yes	Yes
E2351	PWR WC ACSS ELEC INTERFCE OPERATE SPCH GEN DEVC		Not Cov	Yes	Not Cov	Yes		Yes	Yes

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Code	Code Description	Comments	Apple Health & IMC Medical				IMC / BHSO (Mental Health covered svcs)	Medicare	Market Place
			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
E2358	PWR WC ACCESS GRP 34 NONSEALED LEAD ACID BATT EA		Not Cov	No	Not Cov	No		No	No
E2359	PWR WC ACCESSORY GRP 34 SEALED LEAD ACID BATT EA		Not Cov	No	Not Cov	No		No	No
E2360	PWR WC ACSS 22 NF NON-SEALED LEAD ACID BATTERY EA		Not Cov	No	Not Cov	No		Not Cov	No
E2361	PWR WC ACSS 22NF SEALED LEAD ACID BATTERY EA		Not Cov	Yes	Not Cov	Yes		Yes	Yes
E2362	PWR WC ACSS GRP 24 NON-SEALED LEAD ACID BATT EA		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
E2363	PWR WC ACSS GRP 24 SEALED LEAD ACID BATTERY EA		Not Cov	No	Not Cov	No		No	No
E2364	PWR WC ACSS U-1 NON-SEALED LEAD ACID BATTERY EA		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
E2365	PWR WHLCHAIR ACSS U-1 SEALED LEAD ACID BATTERY EA		Not Cov	No	Not Cov	No		No	No
E2366	PWR WC ACSS BATTERY CHRGR 1 MODE W ONLY 1 BATTERY		Not Cov	Yes	Not Cov	Yes		Yes	Yes
E2367	PWR WC ACSS BATT CHRGR DUL MODE W EITHER BATT EA		Not Cov	Yes	Not Cov	Yes		Yes	Yes
E2368	POWER WHEELCHAIR CMPNT MOTOR REPLACEMENT ONLY		Not Cov	Yes	Not Cov	Yes		Yes	Yes
E2369	POWER WC CMPNNT DRIVE WHEEL GEAR BOX REPL ONLY		Not Cov	Yes	Not Cov	Yes		Yes	Yes
E2370	PWR WC COMP INT DR WHL MTR AND GR BOX COMB REPL ONLY		Not Cov	Yes	Not Cov	Yes		Yes	Yes
E2371	POWER WC ACSS GRP 27 SEALED LEAD ACID BATTERY EA		Not Cov	No	Not Cov	No		No	No
E2372	PWR WC ACSS GRP 27 NONSEALED LEAD ACID BATTERY EA		Not Cov	No	Not Cov	No		Not Cov	No
E2373	PWR WC MINI-PROPORTIONAL COMPACT REMOTE JOYSTICK		Not Cov	Yes	Not Cov	Yes		Yes	Yes
E2374	PWR WC STANDARD REMOTE JOYSTICK REPLACEMENT ONLY		Not Cov	Yes	Not Cov	Yes		Yes	Yes
E2375	PWR WC NONEXPNDABLE CONTROLLER REPLACEMENT ONLY		Not Cov	Yes	Not Cov	Yes		Yes	Yes
E2376	PWR WC EXPANDABLE CONTROLLER REPLACEMENT ONLY		Not Cov	Yes	Not Cov	Yes		Yes	Yes
E2377	PWR WC EXPANDABLE CONTROLLER UPGRADE INIT ISSUE		Not Cov	Yes	Not Cov	Yes		Yes	Yes
E2378	POWER WHEELCHAIR COMPONENT ACTUATOR REPLACE ONLY		Not Cov	Yes	Not Cov	Yes		Yes	Yes
E2381	PWR WC PNEUMATIC DRIVE WHEEL TIRE REPL ONLY EACH		Not Cov	No	Not Cov	No		No	No
E2382	PWR WC TUBE PNEUMATIC DRIVE WHEEL TIRE REPL EACH		Not Cov	No	Not Cov	No		No	No
E2383	PWR WC INSERT PNEUMATIC WHEEL TIRE REPL ONLY EA		Not Cov	No	Not Cov	No		No	No
E2384	PWR WC PNEUMATIC CASTER TIRE REPL ONLY EACH		Not Cov	No	Not Cov	No		No	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
E2385	PWR WC TUBE PNEUMATIC CASTER TIRE REPL ONLY EACH		Not Cov	No	Not Cov	No		No	No
E2386	PWR WC FOAM FILLED DRIVE WHEEL TIRE REPL ONLY EA		Not Cov	No	Not Cov	No		No	No
E2387	PWR WC FOAM FILLED CASTER TIRE REPL ONLY EACH		Not Cov	No	Not Cov	No		No	No
E2388	PWR WC FOAM DRIVE WHEEL TIRE REPL ONLY EACH		Not Cov	No	Not Cov	No		No	No
E2389	PWR WC FOAM CASTER TIRE REPLACEMENT ONLY EACH		Not Cov	No	Not Cov	No		No	No
E2390	PWR WC SOLID DRIVE WHEEL TIRE REPL ONLY EACH		Not Cov	No	Not Cov	No		No	No
E2391	PWR WC SOLID CASTER TIRE REPLACEMENT ONLY EACH		Not Cov	No	Not Cov	No		No	No
E2392	PWR WC SOLID CASTER TIRE INTEGRTED WHEEL REPL EA		Not Cov	No	Not Cov	No		No	No
E2394	PWR WC DRIVE WHEEL EXCLUDES TIRE REPL ONLY EACH		Not Cov	No	Not Cov	No		No	No
E2395	PWR WC CASTER WHEEL EXCLUDES TIRE REPL ONLY EACH		Not Cov	No	Not Cov	No		No	No
E2396	PWR WC CASTER FORK REPLACEMENT ONLY EACH		Not Cov	No	Not Cov	No		No	No
E2397	POWER WHLCHAIR ACCESSORY LITHIUM-BASED BATTERY EA		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
E2402	NEG PRESS WOUND THERAPY ELEC PUMP STATION PRTBLE		Not Cov	No	Not Cov	No		No	No
E2500	SPEECH GEN DEVC DIGITIZED UNDER EQ 8 MINS REC TIME		Not Cov	Yes	Not Cov	Yes		Yes	Yes
E2502	SPCH GEN DEVC DIGTIZD OVER 8 MINS LESS THN EQ 20 MINS REC		Not Cov	Yes	Not Cov	Yes		Yes	Yes
E2504	SPCH GEN DEVC DIGTIZD OVER 20 MINS UNDER EQ 40 MINS REC		Not Cov	Yes	Not Cov	Yes		Yes	Yes
E2506	SPEECH GEN DEVICE DIGITIZED OVER 40 MINS REC TIME		Not Cov	Yes	Not Cov	Yes		Yes	Yes
E2508	SPCH GEN DEVC SYNTHSIZD REQ MESS SPELL AND CNTCT		Not Cov	Yes	Not Cov	Yes		Yes	Yes
E2510	SPCH GEN DEVC SYNTHESIZD MX METH MESS AND DEVC ACCSS		Not Cov	Yes	Not Cov	Yes		Yes	Yes
E2511	SPEECH GEN SOFTWARE PROG PC PERS DIGITAL ASSIST		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
E2512	ACCESS SPEECH GENERATING DEVICE MOUNTING SYSTEM		Not Cov	No	Not Cov	No		No	No
E2599	ACCESSORY FOR SPEECH GENERATING DEVICE NOC		Not Cov	No	Not Cov	No		No	No
E2601	GENERAL WHLCHAIR SEAT CUSHN WIDTH UNDER 22 IN DEPTH		Not Cov	No	Not Cov	No		No	No
E2602	GENERAL WHLCHAIR SEAT CUSHN WIDTH 22 IN GT DEPTH		Not Cov	No	Not Cov	No		No	No
E2603	SKN PROTECTION WC SEAT CUSHN WIDTH UNDER 22 IN DEPTH		Not Cov	No	Not Cov	No		No	No
E2604	SKN PROTECTION WC SEAT CUSHN WDTN 22 IN GT DEPTH		Not Cov	No	Not Cov	No		No	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
E2605	PSTN WHEELCHAIR SEAT CUSHN WIDTH UNDER 22 IN DEPTH		Not Cov	Yes	Not Cov	Yes		Yes	Yes
E2606	PSTN WHEELCHAIR SEAT CUSHN WIDTH 22 IN GT DEPTH		Not Cov	Yes	Not Cov	Yes		Yes	Yes
E2607	SKN PROTECT AND PSTN WC SEAT CUSHN WDNH UNDER 22 IN DEPTH		Not Cov	Yes	Not Cov	Yes		Yes	Yes
E2608	SKN PROTCT AND PSTN WC SEAT CUSHN WDNH 22 IN GT DPTH		Not Cov	Yes	Not Cov	Yes		Yes	Yes
E2609	CUSTOM FABRICATED WHEELCHAIR SEAT CUSHION SIZE		Not Cov	Yes	Not Cov	Yes		Yes	Yes
E2610	WHEELCHAIR SEAT CUSHION POWERED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
E2611	GEN WC BACK CUSHN WDNH UNDER 22 IN HT MOUNT HARDWARE		Not Cov	Yes	Not Cov	Yes		Yes	Yes
E2612	GEN WC BACK CUSHN WDNH 22 IN GT HT MOUNT HARDWRE		Not Cov	Yes	Not Cov	Yes		Yes	Yes
E2613	PSTN WC BACK CUSHN POST WIDTH UNDER 22 IN ANY HEIGHT		Not Cov	Yes	Not Cov	Yes		Yes	Yes
E2614	PSTN WC BACK CUSHN POST WIDTH 22 IN OR GRT ANY HEIGHT		Not Cov	Yes	Not Cov	Yes		Yes	Yes
E2615	PSTN WC BACK CUSHN POSTLAT WIDTH UNDER 22 IN ANY HT		Not Cov	Yes	Not Cov	Yes		Yes	Yes
E2616	PSTN WC BACK CUSHN POSTLAT WIDTH 22 IN OR GRT ANY HT		Not Cov	Yes	Not Cov	Yes		Yes	Yes
E2617	CSTM FAB WC BACK CUSHN ANY SZ ANY MOUNT HARDWARE		Not Cov	Yes	Not Cov	Yes		Yes	Yes
E2619	REPL COVER WHEELCHAIR SEAT CUSHN BACK CUSHN EA		Not Cov	No	Not Cov	No		No	No
E2620	PSTN WC BACK CUSHN PLANAR LAT SUPP WDNH UNDER 22 IN		Not Cov	Yes	Not Cov	Yes		Yes	Yes
E2621	PSTN WC BACK CUSHN PLANAR LAT SUPP WDNH 22 IN OR GRT		Not Cov	Yes	Not Cov	Yes		Yes	Yes
E2622	SKIN PROTECT WC SEAT CUSH WIDTH UNDER 22 IN ANY DEPTH		Not Cov	Yes	Not Cov	Yes		Yes	Yes
E2623	SKIN PROTCT WC SEAT CUSH WIDTH 22 IN OR GRT ANY DEPTH		Not Cov	Yes	Not Cov	Yes		Yes	Yes
E2624	SKIN PROTECT AND POSITIONING WC CUSH WIDTH UNDER 22 IN		Not Cov	Yes	Not Cov	Yes		Yes	Yes
E2625	SKIN PROTECT AND POSITIONING WC CUSH WIDTH 22 IN OR GRT		Not Cov	Yes	Not Cov	Yes		Yes	Yes
E2626	WC ACCESS SHLDR ELB MOBIL ARM SUPP WC ADJUSTBLE		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
E2627	WC ACCESS SHLDR ELB M ARM SUPP ADJUSTBL RANCHO		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
E2628	WC ACCESS SHLDR ELB MOBIL ARM SUPP WC RECLINING		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
E2629	WC ACCESS SHLDR ELB M ARM SUPP FRICTION ARM SUPP		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
E2630	WC ACCESS SHLDR ELB MOBIL MONOSUSP ARM HAND SUPP		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
E2631	WC ACCESS ADD MOBILE ARM SUPPORT ELEV PROX ARM		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
E2632	WC ACCESS ADD MOBIL ARM SUPP OFFSET LAT RCKR ARM		Not Cov	Not Cov	Not Cov	Not Cov		No	No
E2633	WC ACCESS ADD MOBILE ARM SUPPORT SUPINATOR		Not Cov	Not Cov	Not Cov	Not Cov		No	No
E8000	GAIT TRAINER PED SZ POST SUPP W ALL ACSS AND CMPNTS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
E8001	GAIT TRAINER PED SZ UPRT SUPP W ALL ACSS AND CMPNTS		Not Cov	No	Not Cov	No		Not Cov	No
E8002	GAIT TRAINER PED SZ ANT SUPP W ALL ACSS AND CMPNTS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G0008	ADMINISTRATION OF INFLUENZA VIRUS VACCINE		No	No	Not Cov	No		No	No
G0009	ADMINISTRATION OF PNEUMOCOCCAL VACCINE		No	No	Not Cov	No		No	No
G0010	ADMINISTRATION OF HEPATITIS B VACCINE		Not Cov	No	Not Cov	No		No	No
G0027	SEMEN ANALY; PRES MOT EXCLD HUHNER		Not Cov	Not Cov	Not Cov	Not Cov		No	Not Cov
G0068	PROF SRVC ADM ANTI-INFEC PM ADM CD IND HM E 15 M		No	No	Not Cov	No		No	No
G0069	PROF SRVC ADM SUBQ IMT ADM CAL DA IND HM EA 15 M		No	No	Not Cov	No		No	No
G0070	PROF SRVC ADM CHEMO ADM CAL DA IND HOME EA 15 M		Not Cov	Not Cov	Not Cov	Not Cov		No	No
G0071	PMT CMNCT TECH-BASED SERVICES; RHC OR FQHC ONLY		Not Cov	Not Cov	Not Cov	Not Cov		No	No
G0076	BRIEF CARE MANAGEMENT HOME VISIT NEW PATIENT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G0077	LIMITED CARE MANAGEMENT HOME VISIT NEW PATIENT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G0078	MODERATE CARE MANAGEMENT HOME VISIT FOR NEW PT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G0079	COMPREHENSIVE CARE MGMT HOME VISIT NEW PATIENT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G0080	EXTENSIVE CARE MANAGEMENT HOME VISIT FOR NEW PT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G0081	BRIEF CARE MANAGEMENT HOME VISIT FOR EXISTING PT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G0082	LIMITED CARE MANAGEMENT HOME VISIT FOR EXIST PT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G0083	MODERATE CARE MANAGEMENT HOME VISIT FOR EXIST PT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G0084	COMPREHENSIVE CARE MGMT HOME VISIT FOR XST PT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G0085	EXTENSIVE CARE MANAGEMENT HOME VISIT FOR EXST PT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G0086	LIMITED CARE MANAGEMENT HOME CARE PLAN OVERSIGHT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G0087	COMPREHENSIVE CARE MGMT HOME CARE PLAN OVERSIGHT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
G0101	CERV VAGINAL CANCER SCR; PELV AND CLIN BREAST EXAM		No	No	Not Cov	No		No	No
G0102	PROS CANCER SCREENING; DIGTL RECTAL EXAMINATION		No	No	Not Cov	No		No	No
G0103	PROSTATE CANCER SCREENING; PSA TEST		No	No	Not Cov	No		No	No
G0104	COLORECTAL CANCER SCREENING; FLEXSIG		No	No	Not Cov	No		No	No
G0105	COLOREC CANCR SCR; COLONSCPY INDIVIDUL@HIGH RISK		No	No	No	No		No	No
G0106	COLOREC CANCR SCR;ALT G0104 SIGMOIDSCPY BA ENEMA		No	No	Not Cov	No		No	No
G0108	DIAB OP SELF-MGMT TRN SRVC INDIVIDUAL PER 30 MIN	OP Fac bill both G0108 and Rev Code 942	No	No	Not Cov	No		No	No
G0109	DIAB SELF-MGMT TRN SRVC GROUP SESSION PER 30 MIN	OP Fac bill both G0108 and Rev Code 942	No	No	Not Cov	No		No	No
G0117	GLAUC SCR HI RISK BY OPTOMETRST OPTHALMOLOGIST		No	No	Not Cov	No		No	No
G0118	GLAUC SCR HI RSK UND DIR SUP OPTMTRST OPTHLGIST		No	No	Not Cov	No		No	No
G0120	COLOREC CANCR SCR; ALT G0105 COLNSCPY BA ENEMA		No	No	Not Cov	No		No	No
G0121	COLOREC CANCR SCR; COLNSCPY NOT MEET HI RISK		No	No	No	No		No	No
G0122	COLORECTAL CANCER SCREENING; BARIUM ENEMA		No	No	Not Cov	No		Not Cov	No
G0123	SCR CYTOPATH CERV VAG SCR CYTOTECH UND PHYS SUPV		No	Not Cov	Not Cov	Not Cov		No	No
G0124	SCR CYTOPATH CERV VAG THIN LAY PREP INTEPR PHYS		Not Cov	Not Cov	Not Cov	Not Cov		No	No
G0127	TRIMMING OF DYSTROPHIC NAILS ANY NUMBER		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G0128	DIR SKLED SERV RN OP REHAB EA 10 MIN AFTR 1ST 5		Not Cov	Not Cov	Not Cov	Not Cov		No	No
G0129	OCCUP TX REQ SKILLS QUAL OCCUP TRPST PER SESSION		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G0130	SEXA BN DNSITY STDY 1 OR GRT SITE; APPNDICULR SKEL		No	No	Not Cov	No		No	No
G0141	SCR CYTOPATH SMER CERV VAG MNL RSCR INTEPR PHYS		Not Cov	Not Cov	Not Cov	Not Cov		No	No
G0143	SCR CYTOPATH CERV VAG MNL SCR AND RSCR UND PHYS		No	Not Cov	Not Cov	Not Cov		No	No
G0144	SCR CYTOPATH CERV VAG THIN LAY SCR AUTO UND PHYS		No	Not Cov	Not Cov	Not Cov		No	No
G0145	SCR CYTOPATH CERV VAG SCR AUTO AND MNL RSCR PHYS		No	Not Cov	Not Cov	Not Cov		No	No
G0147	SCR CYTOPATH SMERS CERV VAG AUTO UND PHYS SUPV		No	Not Cov	Not Cov	Not Cov		No	No
G0148	SCR CYTOPATH SMERS CERV VAG AUTO SYS W MNL RESCR		No	Not Cov	Not Cov	Not Cov		No	No
G0151	SERVICE PHYS THERAP HOME HLTH HOSPICE EA 15 MIN		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
G0152	SERVICE OCCUP THERAP HOME HLTH HOSPICE EA 15 MIN		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
G0153	SRVC SPCH AND LANG PATH HOME HLTH HOSPICE EA 15 MIN		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes

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			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
G0155	SRVC CLINICAL SOCIAL WORKER HH HOSPICE EA 15 MIN		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
G0156	SRVC HH HOSPICE AIDE IN HH HOSPICE SET EA 15 MIN		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
G0157	SERVICES PT ASSIST HOME HEALTH HOSPICE EA 15 MIN		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
G0158	SERVICE OT ASSIST HOME HEALTH HOSPICE EA 15 MIN		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
G0159	SERVICES PT HOME HEALTH EST DEL PT MP EA 15 MINS		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
G0160	SERVICES OT HOME HEALTH EST DEL OT MP EA 15 MINS		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
G0161	SERVICE SLP HH EST DEL SPCH-LANG PATH MP EA 15 M		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
G0162	SKILLED SERVICE RN M AND E PLAN OF CARE; EA 15 MINS		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
G0166	EXTERNAL COUNTERPULSATION PER TREATMENT SESSION		No	No	Not Cov	No		No	No
G0168	WOUND CLOSURE UTILIZING TISSUE ADHESIVE ONLY		Not Cov	No	Not Cov	No		No	No
G0175	SCHED INTERDISCIPLINARY TEAM CONF W PT PRESENT		No	Not Cov	Not Cov	Not Cov		No	No
G0176	ACTV TX REL CARE AND TX PTS DISABL MENTL HLTH-SESS		Not Cov	Not Cov	Not Cov	Not Cov		No	No
G0177	TRN AND ED REL CARE AND TX PTS DISABL MENTL HLTH-SESS		No	Not Cov	Not Cov	Not Cov		No	No
G0179	PHYS RE-CERT MCR-COVR HOM HLTH SRVC RE-CERT PRD		Not Cov	No	Not Cov	No		No	No
G0180	PHYS CERT MCR-COVR HOM HLTH SRVC PER CERT PRD		Not Cov	No	Not Cov	No		No	No
G0181	PHYS SUPV PT RECV MCR-COVR SRVC HOM HLTH AGCY		Not Cov	No	Not Cov	No		No	No
G0182	PHYS SUPV PT UNDER MEDICARE-APPROVED HOSPICE		Not Cov	No	Not Cov	No		No	No
G0186	DESTRUC LOC LES CHOROID; PHOTOCOAG FDER VES TECH		No	No	Not Cov	No		No	No
G0219	PET IMAG WHOLE BODY; MELANOMA NON-COVR INDICATS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Yes
G0235	PET IMAGING ANY SITE NOT OTHERWISE SPECIFIED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Yes
G0237	MUSCLES FACE TO FACE ONE ON ONE EACH 15 MINUTES		Not Cov	Not Cov	Not Cov	Not Cov		No	No
G0238	TX PROC IMPRV RESP FUNCT NOT G0237 FCE-FCE 15MIN		Not Cov	Not Cov	Not Cov	Not Cov		No	No
G0239	TX PROC IMPRV RESP FUNCT INCR RESP MUSC 2 OR GRT IND		Not Cov	Not Cov	Not Cov	Not Cov		No	No
G0245	INITIAL PHYS E AND M DIABETIC NEUROPATHY W LOPS		Not Cov	Not Cov	Not Cov	Not Cov		No	No
G0246	FOLLOWUP EVAL DIABETIC PT NEUROPATHY W LOPS		Not Cov	Not Cov	Not Cov	Not Cov		No	No
G0247	ROUTINE FOOT CARE BY PHYS OF DIABETIC PT W LOPS		Not Cov	Not Cov	Not Cov	Not Cov		No	No
G0248	DEMO HOME INR MON PT W MECH HT VALVE CAF VTE		Not Cov	Not Cov	Not Cov	Not Cov		No	No
G0249	PRVS TEST MATL AND EQUIP HOME INR MON; ONCE A WEEK		Not Cov	Not Cov	Not Cov	Not Cov		No	No
G0250	PHYS REV INTEPR AND PT MGMT HOME INR MON; 1 A WEEK		Not Cov	Not Cov	Not Cov	Not Cov		No	No
G0252	PET IMAG INIT DX BREST CA AND SURG PLAN NOT COV MCR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Yes

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			Outpatient		ASC	Office Setting			
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G0255	CURRNT PERCEPT THRESHOLD SNCT PER LIMB ANY NERVE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G0257	UNSCHD EMERG DIALYSIS TX ESRD PT HOS OP NOT CERT		No	Not Cov	Not Cov	Not Cov		Not Cov	No
G0259	INJECTION PROCEDURE FOR SI JNT; ARTHROGRAPY		No	Not Cov	Not Cov	Not Cov		No	No
G0260	INJ PROC SI JNT;ANES STEROID AND TX AGT AND ARTHROGRPH		Yes	Not Cov	Yes	Not Cov		Yes	No
G0268	REMV IMP CERUMEN PHYS SAME DATE AUDIO FUNCT TST		No	Not Cov	Not Cov	Not Cov		No	No
G0269	PLCMT OCCL DEVC VENUS ART POST SURG INTRVNL PROC		No	No	Not Cov	No		Not Cov	No
G0270	MED NUT TX; REASSESS FLW 2 REF YR W PT EA 15 MIN		Not Cov	Not Cov	Not Cov	Not Cov		No	No
G0271	MED NUT TX REASSESS FLW 2 REF YR GRP EA 30 MIN		Not Cov	Not Cov	Not Cov	Not Cov		No	No
G0276	PILD PLACEBO CONTROL CLIN TR		Not Cov	Not Cov	Not Cov	Not Cov		No	Not Cov
G0277	HPO UND PRESS FULL BODY CHMBR PER 30 MIN INT		Yes	Not Cov	Not Cov	Not Cov		Yes	Yes
G0278	ILIAC AND FEM ART ANGIO NONSEL AT TIME CARD CATH		No	Not Cov	Not Cov	Not Cov		No	No
G0279	DIAGNOSTIC DIGITAL BREAST TOMOSYNTHESIS UNI BIL	PA 7/1/18 MP	No	No	Not Cov	No		No	No
G0281	E-STIM 1 OR GRT AREAS CHRONIC STAGE III AND IV ULCERS		Not Cov	Not Cov	Not Cov	Not Cov		No	No
G0282	E-STIM 1 MORE AREAS WND CARE OTH THAN DESC G0281		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G0283	E-STIM 1 OR GRT AREAS OTH THAN WND CARE PART TX PLAN		Not Cov	Not Cov	Not Cov	Not Cov		No	No
G0288	RECON CT ANGIO AORTA SURG PLANNING VASC SURG		Yes	Not Cov	Not Cov	Not Cov		Yes	Yes
G0289	SCOPE KNEE REMV FB SHAV TM OTH SURG DIFF CMPRTMT		No	Not Cov	Not Cov	Not Cov		No	No
G0293	NONCOVR SURG CONSC SEDAT ANES-MCR QUAL TRIAL-DAY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
G0294	NONCOVR PROC NO ANES LOC ANES-MCR QUAL TRIAL-DAY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
G0295	ELECMAGNET TX 1 OR GRT AREA WND CARE NOT G0329 OTH USE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G0296	CNSL VISIT DISCUSS LDCT USING LOW DOSE CT SCAN		Not Cov	Not Cov	Not Cov	Not Cov		No	No
G0297	LOW DOSE CT SCAN FOR LUNG CANCER SCREENING		Yes	Yes	Not Cov	Yes		Yes	Yes
G0299	DIRECT SNS RN HOME HEALTH HOSPICE SET EA 15 MIN		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
G0300	DIRECT SNS LPN HOME HLTH HOSPICE SET EA 15 MIN		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
G0302	PRE-OP PULM SURG SRVC PREP LVRS CMPL COURSE SRVC		No	No	Not Cov	No		Not Cov	No
G0303	PRE-OP PULM SURG SRVC PREP LVRS 10-15 DA SRVC		No	No	Not Cov	No		Not Cov	No
G0304	PRE-OP PULM SURG PREP LVRS 1-9 DA SRVC		No	No	Not Cov	No		Not Cov	No
G0305	POST-D C PULM SURG AFTER LVRS MINI 6 DAYS SRVC		No	No	Not Cov	No		Not Cov	No
G0306	COMPLETE CBC AUTOMATED AND AUTOMATED WBC DIFF COUNT		No	No	Not Cov	No		No	No
G0307	COMPLETE CBC AUTOMATED		No	No	Not Cov	No		No	No

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G0328	COLOREC CA SCR; FOB TST IMMUNO 1-3 SIMULTANEOUS		No	No	Not Cov	No		No	No
G0329	ELECMAGNET TX ULCERS NOT HEALING 30 DAYS CARE		Not Cov	Not Cov	Not Cov	Not Cov		No	No
G0333	PHARM DISPEN FEE INHAL RX; INITIAL 30-DAY SUPPLY		Not Cov	Not Cov	Not Cov	Not Cov		No	No
G0337	HOSPICE EVALUATION AND CNSL SERVICES PREELECTION		Not Cov	Not Cov	Not Cov	Not Cov		No	No
G0339	IMAGE GUID ROBOTIC ACCEL BASE SRS CMPL TX 1 SESS		Not Cov	Not Cov	Not Cov	Not Cov		No	Yes
G0340	IMAGE GUID ROBOTIC ACCL SRS FRAC TX LES 2-5 SESS		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
G0341	PERQ ISLET CELL TPLNT INCL PORTL VEIN CATH AND INFUS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G0342	LAP ISLET CELL TPLNT INCL PORTAL VEIN CATH AND INFUS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G0343	LAPAROT ISLET CELL TPLNT W PORTL VEIN CATH AND INFUS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G0365	VESSEL MAPPING OF VESSELS FOR HEMODIALYSIS ACESS	One time notificiation only	Not Cov	Not Cov	Not Cov	Not Cov		No	No
G0372	PHYS SRVC RQR TO EST AND DOC NEED PWR MOBIL DEVC		Not Cov	No	Not Cov	No		No	No
G0378	HOSPITAL OBSERVATION SERVICE PER HOUR		No	Not Cov	Not Cov	Not Cov		Not Cov	No
G0379	DIRECT ADMISSION PATIENT HOSPITAL OBSERV CARE		No	Not Cov	Not Cov	Not Cov		Not Cov	No
G0380	LEVEL 1 HOSPITAL EMERGENCY DEPT VISIT TYPE B ED;		No	Not Cov	Not Cov	Not Cov		No	No
G0381	LEVEL 2 HOSPITAL EMERGENCY DEPT VISIT TYPE B ED;		No	Not Cov	Not Cov	Not Cov		No	No
G0382	LEVEL 3 HOSPITAL EMERGENCY DEPT VISIT TYPE B ED;		No	Not Cov	Not Cov	Not Cov		No	No
G0383	LEVEL 4 HOSPITAL EMERGENCY DEPT VISIT TYPE B ED;		No	Not Cov	Not Cov	Not Cov		No	No
G0384	LEVEL 5 HOSPITAL EMERGENCY DEPT VISIT TYPE B ED;		No	Not Cov	Not Cov	Not Cov		No	No
G0390	TRAUMA RESPONSE TEAM ASSOC W HOSP CC SERVICE		Not Cov	No	Not Cov	No		No	No
G0396	ALCOHOL AND SUBSTANCE ABUSE ASSESSMENT 15-30 MIN		Not Cov	Not Cov	Not Cov	Not Cov		No	No
G0397	ALCOHOL AND SUBSTANCE ABUSE ASSESSMENT OVER 30 MIN		Not Cov	Not Cov	Not Cov	Not Cov		No	No
G0398	HST W TYPE II PRTBLE MON UNATTENDED MIN 7 CH		Not Cov	Not Cov	Not Cov	Not Cov		No	No
G0399	HST W TYPE III PRTBLE MON UNATTENDED MIN 4 CH		Not Cov	Not Cov	Not Cov	Not Cov		No	No
G0400	HST W TYPE IV PRTBLE MON UNATTENDED MIN 3 CH		Not Cov	Not Cov	Not Cov	Not Cov		No	No
G0402	INIT PREV PE LTD NEW BENEF DUR 1ST 12 MOS MCR		Not Cov	Not Cov	Not Cov	Not Cov		No	No
G0403	ECG RTN ECG W 12 LEADS SCR INIT PREVNTV PE W I AND R		Not Cov	Not Cov	Not Cov	Not Cov		No	No
G0404	ECG RTN ECG W 12 LEADS TRACING ONLY W O I AND R		Not Cov	Not Cov	Not Cov	Not Cov		No	No
G0405	ECG RTN ECG W 12 LEADS INTERPR AND REPORT ONLY		Not Cov	Not Cov	Not Cov	Not Cov		No	No
G0406	F U IP CNSLT LTD PHYS 15 MIN W PT VIA TELEHEALTH		Not Cov	Not Cov	Not Cov	Not Cov		No	No
G0407	F U IP CNSLT INTRMED PHYS 25 MIN PT VIA TELEHLTH		Not Cov	Not Cov	Not Cov	Not Cov		No	No
G0408	F U IP CNSLT CMPLX PHYS 35 MIN OR GRT PT VIA TELEHLTH		Not Cov	Not Cov	Not Cov	Not Cov		No	No
G0409	SOCL WRK AND PSYCH SRVC EA 15 MIN FACE-TO-FACE IND		Not Cov	Not Cov	Not Cov	Not Cov		No	No
G0410	GRP PSYCHOTX NOT MX FAM GRP PART HOS 45-50 MIN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G0411	INTERACTV GRP PSYCHOTX PART HOS 45 TO 50 MIN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
G0412	OPN TX ILIAC SPINE TUBEROSITY AVUL ILIAC WING FX		Not Cov	Not Cov	Not Cov	Not Cov		No	No
G0413	PERQ SKEL FIX POST PELV BONE FX AND DISLOC UNI BIL		No	No	Not Cov	No		No	No
G0414	OPN TX ANT PELV BONE FX AND DISLOC UNI BIL		No	No	Not Cov	No		No	No
G0415	OPN TX POST PELV BONE FX AND DISLOC UNI BIL		No	No	Not Cov	No		No	No
G0416	SURGICAL PATH PROSTATE NEEDLE BIOPSY ANY METHOD		No	Not Cov	Not Cov	Not Cov		No	No
G0420	FACE TO FACE EDU SRVC OF CKD; IND PER SESS 1 HR		Not Cov	Not Cov	Not Cov	Not Cov		No	No
G0421	FACE TO FACE EDU SRVC OF CKD; GRP PER SESS 1 HR		Not Cov	No	Not Cov	No		No	No
G0422	INTENSIVE CARD REHAB; W WO CONT ECG MON W EXER		No	No	Not Cov	No		No	No
G0423	INTENSIVE CARD REHAB; W WO CONT ECG MON W O EXER		No	No	Not Cov	No		No	No
G0424	PULM REHAB INCL EXER 1 HR PER SESS TO 2 PER DAY		Not Cov	Not Cov	Not Cov	Not Cov		No	No
G0425	TELEHEALTH CONSULT ED IP 30 MIN W PT TELEHLTH		Not Cov	No	Not Cov	No		No	No
G0426	TELEHEALTH CONSULT ED IP 50 MIN W PT TELEHLTH		Not Cov	No	Not Cov	No		No	No
G0427	TELEHEALTH CONSULT ED IP 70 MIN OR GRT PT TELEHELTH		Not Cov	No	Not Cov	No		No	No
G0428	COLL MENISCUS IMPL PROC FILLING MENISCAL DEFECTS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G0429	DERM FILLER INJ TX FACIAL LIPODYSTROPHY SYNDROME		Not Cov	Not Cov	Not Cov	Not Cov		No	Not Cov
G0432	INF AGT AB DETECT EIA TECH HIV-1 AND HIV-2 SCR		Not Cov	Not Cov	Not Cov	Not Cov		No	No
G0433	INF ANTIBODY ELISA TECH HIV-1 AND OR HIV-2 SCREEN		Not Cov	Not Cov	Not Cov	Not Cov		No	No
G0435	INF AGT ANTIG DETECT RPD AB TST OMT HIV-1 -2 SCR		Not Cov	Not Cov	Not Cov	Not Cov		No	No
G0438	ANNUAL WELLNESS VISIT; PERSONALIZ PPS INIT VISIT		Not Cov	Not Cov	Not Cov	Not Cov		No	No
G0439	ANNUAL WELLNESS VST; PERSONALIZED PPS SUBSQVT VST		Not Cov	Not Cov	Not Cov	Not Cov		No	No
G0442	ANNUAL ALCOHOL MISUSE SCREENING 15 MINUTES		Not Cov	Not Cov	Not Cov	Not Cov		No	No
G0443	BRIEF FACE-FACE BEHAV CNSL ALCOHL MISUSE 15 MIN		Not Cov	Not Cov	Not Cov	Not Cov		No	No
G0444	ANNUAL DEPRESSION SCREENING 15 MINUTES		Not Cov	Not Cov	Not Cov	Not Cov		No	No
G0445	SA HI INTENS CNSL PREV STI IND F F EDU CHNG BHVR		Not Cov	Not Cov	Not Cov	Not Cov		No	No
G0446	ANNUAL FCE--FCE INTENSV BEHV TX CV DZ IND 15 MIN		Not Cov	Not Cov	Not Cov	Not Cov		No	No
G0447	FACE--FACE BEHAVIORAL COUNSELING OBESITY 15 MIN		Not Cov	Not Cov	Not Cov	Not Cov		No	No
G0448	INS RPL PRM CV-DFIB TV LEADS INSRT PACE ELCTRODE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G0451	DEVELPMNT TESTING I AND R STANDARDIZD INSTRUMNT FORM		Not Cov	Not Cov	Not Cov	Not Cov		No	No
G0452	MOLECLR PATH PROCEDURE; PHYSICIAN INTEPR REPORT		Not Cov	Not Cov	Not Cov	Not Cov		No	No
G0453	CONT IO NEUROPHYSIOL MON OUTSD OR-PT EA 15 MIN		Not Cov	Not Cov	Not Cov	Not Cov		No	No
G0454	PHYS DOC FACE--FACE VST DME DETRM PERF NP PA CNS		No	No	Not Cov	No		No	No
G0455	PREP IT FEC MICROBIOTA ANY METH ASMT DONOR SPEC		No	No	Not Cov	No		No	No

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G0458	LOW DOSE RATE PROSTATE BRACHYTX SRVC COMPOS RATE		No	No	No	No		No	No
G0459	INPATIENT TELEHEALTH PHARMACOLOGIC MANAGEMENT		Not Cov	Not Cov	Not Cov	Not Cov		No	No
G0460	AUTOLOGOUS PLATELET-RICH PLASMA		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G0463	HOSPITAL OUTPATIENT CLIN VISIT ASSESS AND MGMT PT		No	Not Cov	Not Cov	Not Cov		No	No
G0466	FEDERALLY QUALIFIED HEALTH CENTER VISIT NEW PT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G0467	FEDERALLY QUALIFIED HEALTH CENTER VISIT ESTAB PT		Not Cov	Not Cov	Not Cov	Not Cov		No	No
G0468	FEDERALLY QUALIFIED HEALTH CENTER VISIT IPPE AWW		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G0469	FED QUAL HEALTH CNTR VISIT MENTAL HEALTH NEW PT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G0470	FED QUAL HEALTH CNTR VST MENTAL HEALTH ESTAB PT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G0471	COLL V BLD VP URN SMP CATH IND SNF LAB BHALF HHA		Not Cov	Not Cov	Not Cov	Not Cov		No	No
G0472	HEPATITIS C ABO SC IND HIGH RISK AND OTH CVRD INDIC		Not Cov	Not Cov	Not Cov	Not Cov		No	No
G0473	FACE-TO-FACE BEHAV COUNSELING OBESITY GRP 30 MIN		Not Cov	Not Cov	Not Cov	Not Cov		No	No
G0475	HIV ANTIGEN ANTIBODY COMBINATION ASSAY SCREENING		Not Cov	Not Cov	Not Cov	Not Cov		No	No
G0476	INF AGT DETECT DNA RNA; HPV PERF ADD TO PAP TEST		Not Cov	Not Cov	Not Cov	Not Cov		No	No
G0480	DRUG TEST DEFINITV DR ID METH P DAY 1-7 DRUG CL	MD: No PA first 16 / CY	Yes	Yes	Not Cov	Yes		No	No
G0481	DRUG TEST DEFINITV DR ID METH P DAY 8-14 DRUG CL	MD: No PA first 16 / CY	Yes	Yes	Not Cov	Yes		No	No
G0482	DRUG TEST DEFINITV DR ID METH P DAY 15-21 DR CL	MD: No PA first 16 / CY	Yes	Yes	Not Cov	Yes		No	No
G0483	DRUG TST DEFINITV DR ID METH P DAY 22 MORE DR CL	MD: No PA first 16 / CY	Yes	Yes	Not Cov	Yes		No	No
G0490	FACE-TO-FACE HH NSG VST RHC FQHC AREA SHTG HHA		Yes	Not Cov	Not Cov	Not Cov		No	Yes
G0491	DIALYSIS MCARE CERT ESRD FAC AC KID INJ W O ESRD		No	Not Cov	Not Cov	Not Cov		No	No
G0492	DIALYSIS 1 EVAL PHYSICIAN AC KID INJ W O ESRD		No	Not Cov	Not Cov	Not Cov		No	No
G0493	SKILLED SERVICES RN OBV AND ASMT PT COND EA 15 MIN		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
G0494	SKILLED SRVC LPN OBS AND ASMT PT COND EA 15 MIN		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
G0495	SKD SRVC RN TRAIN AND EDU PT FAM HH HOSPC EA 15 MIN		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
G0496	SKD SRVC LPN TRAIN AND EDU PT FAM HH HOSPC E 15 MIN		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
G0498	CHEMOTX ADM IV INF TECH; INI INF OFFICE CLIN SET		Not Cov	Not Cov	Not Cov	Not Cov		No	No
G0499	HEPATITIS B SCREENING NON-PG HIGH RISK INDV		No	No	Not Cov	No		No	No
G0500	MODERATE SEDAT SRVC PROV SAME PHYS PERF GI ENDO		Not Cov	Not Cov	Not Cov	Not Cov		No	No
G0501	RESOURCE-INT SRVC PT SPZ M-ASST TECH MED NEC		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Yes

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G0506	COMP ASMT OF AND CARE PLNG PT RQR CC MGMT SRVC		Not Cov	Not Cov	Not Cov	Not Cov		No	No
G0508	TH CONSULT CC INIT PHYS 60 MIN CMNCT PT AND PROV		Not Cov	Not Cov	Not Cov	Not Cov		No	No
G0509	TH CNSLT CC SUBSQT PHYS 50 MIN CMNCT PT AND PROV		Not Cov	Not Cov	Not Cov	Not Cov		No	No
G0511	RHC FQHC ONLY GEN CARE MGMT 20 M OR GRT CLIN TM-CAL MO		Not Cov	Not Cov	Not Cov	Not Cov		No	No
G0512	RHC FQHC ONLY PSYCHIATRIC COCM 60 M OR GRT C TM-CAL MO		No	No	Not Cov	No		No	No
G0513	PRLNG PREV SRVC OFC OTH O P RQR DIR CTC;1ST 30 M		Not Cov	Not Cov	Not Cov	Not Cov		No	No
G0514	PRLNG PREV SRVC OFC OTH O P DIR CTC;EA ADD 30 M		Not Cov	Not Cov	Not Cov	Not Cov		No	No
G0515	DVLP CS IMPRV ATTN MEM PROB SOLV PT CTC EA 15 MN		No	No	Not Cov	No		No	No
G0516	INSERTION NON-BIODEGRADABLE RX DELIVERY IMPL 4 OR GRT		No	No	Not Cov	No		No	No
G0517	REMOVAL NON-BIODEGRADABLE DRUG DEL IMPLANTS 4 OR GRT		No	No	Not Cov	No		No	No
G0518	REMOV REINS NON-BIODEGRADABLE DRUG DEL IMPL 4 OR GRT		No	No	Not Cov	No		No	No
G0659	DRUG TEST DEFINITV DRUG ID METH ANY # DR CLASSES		Not Cov	Not Cov	Not Cov	Not Cov		No	No
G0913	IMPROV VISUAL FUNCT ACHV W I 90 DAY FLW CAT SURG		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G0914	PATIENT CARE SURVEY WAS NOT COMPLETED BY PATIENT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G0915	IMPROV VISUAL FUNCT NOT ACHV 90 DAY FLW CAT SURG		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G0916	SATISFACTION W CARE ACHV W I 90 DAY FLW CAT SURG		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G0917	PATIENT SATISFACTION SURVEY NOT COMPLETE PATIENT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G0918	SATISFACTION W CARE NOT ACHV 90 DAY FLW CAT SURG		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G2000	BLINDED ADMINISTRATION OF CONVULSIVE TX PROC		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G2001	BRIEF 20 MINUTES IN-HOME VISIT NEW PT POST-D C.		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G2002	LIMITED 30 MINUTES IN-HOME VISIT NEW PT POST-D C		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G2003	MODERATE 45 MINS IN-HOME VISIT NEW PT POST-D C		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G2004	COMP 60 MINUTES IN-HOME VISIT NEW PT POST-D C		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G2005	EXTENSIVE 75 MINS IN-HOME VISIT NEW PT POST-D C		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G2006	BRIEF 20 MINUTES IN-HOME VISIT EXIST PT POST-D C		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G2007	LIMITED 30 MINS IN-HOME VISIT EXIST PT POST-D C		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G2008	MODERATE 45 MINS IN-HOME VISIT EXIST PT POST-D C		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G2009	COMP 60 MINS IN-HOME VISIT EXIST PT POST-D C		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No

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			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
G2010	REMOTE EVAL RECORDED VIDEO AND IMAGES SB ESTAB PT		Not Cov	Not Cov	Not Cov	Not Cov		No	No
G2011	ALC AND SA STRCT ASSESS AND BRIEF INTERVENT 5-14 MIN		Not Cov	Not Cov	Not Cov	Not Cov		No	No
G2012	BRIEF COMMUNICATION TBS; 5-10 MIN MED DISCUSSION		Not Cov	Not Cov	Not Cov	Not Cov		No	No
G2013	EXTSV 75 MINS IN-HOME VISIT EXIST PT POST-D C		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G2014	LIMITED 30 MINUTES CARE PLAN OVERSIGHT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G2015	COMPREHENSIVE 60 MINS HOME CARE PLAN OVERSIGHT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G6001	ULTRASONIC GUID PLACEMENT RADIATION TX FIELDS		No	No	Not Cov	No		No	No
G6002	STEREOSCOPIC X-RAY GUID LOCALIZ TRG VOL DEL RT		No	No	Not Cov	No		No	No
G6003	RAD TX DEL 2 TX AREA PORT PL OPP PORTS:TO 5 MEV		No	No	Not Cov	No		No	No
G6004	RAD TX DEL 1 TX AREA PORT PL OPP PORTS: 6-10 MEV		No	No	Not Cov	No		No	No
G6005	RAD TX DEL 1 TX AREA PORT PL OPP PORTS: 11-19 ME		No	No	Not Cov	No		No	No
G6006	RAD TX DEL 1 TX AREA PORT PL OPP PORTS: 20 ME OR GRT		No	No	Not Cov	No		No	No
G6007	RT DEL 2 SEP AR 3 OR GRT PT 1 TX AR MX BLKS:TO 5 MEV		No	No	Not Cov	No		No	No
G6008	RT DEL 2 SEP AR 3 OR GRT PT 1 TX AR MX BLKS:6-10 MEV		No	No	Not Cov	No		No	No
G6009	RT DEL 2 SEP AR 3 OR GRT PT 1 TX AR MX BLKS:11-19 MEV		No	No	Not Cov	No		No	No
G6010	RT DEL 2 SEP AR 3 OR GRT PT 1 TX AR MX BLKS:20 MEV OR GRT		No	No	Not Cov	No		No	No
G6011	RAD TX DEL 3 OR GRT SEP TX AR CSTM BLOCKING; TO 5 MEV		No	No	Not Cov	No		No	No
G6012	RAD TX DEL 3 OR GRT SEP TX AR CSTM BLOCKING; 6-10 MEV		No	No	Not Cov	No		No	No
G6013	RAD TX DEL 3 OR GRT SEP TX AR CSTM BLOCKING;11-19 MEV		No	No	Not Cov	No		No	No
G6014	RAD TX DEL 3 OR GRT SEP TX AR CSTM BLOCKING;20 MEV OR GRT		No	No	Not Cov	No		No	No
G6015	INTENSITY MODULATED TX DEL 1 MX FLDS PER TX SESS		Yes	Yes	Not Cov	Yes		Yes	Yes
G6016	COMP-BASED BEAM MOD TX DEL I PLND TX 3 OVER HR SESS		Yes	Yes	Not Cov	Yes		Yes	Yes
G6017	INTRA-FRAC LOC AND TRACKING TARGET PT M EA FRAC TX LVEF GRT THN EQ40PCT OR DOC NORMAL MILD DEPRESSED		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
G8395	LVS FUN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8396	LEFT VENTRICULAR EJECT FRACTION NOT PERFORM DOC		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8397	DILATED MACULAR OR FUNDUS EXAM PERFORMED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8398	DILATED MACULAR OR FUNDUS EXAM NOT PERFORMED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8399	PATIENT W DOC RESULTS CENTRL DXA EVER BEING PERF		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No

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G8400	PATIENT W CENTRAL DXA RESULTS NOT DOCUMENTED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8404	LOWER EXTREMITY NEUROLOGICAL EXAM PERFORMED AND DOC		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8405	LOWER EXTREM NEUROLOGICAL EXAM NOT PERFORMED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8410	FOOTWEAR EVALUATION PERFORMED AND DOCUMENTED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8415	FOOTWEAR EVALUATION WAS NOT PERFORMED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8416	CLIN DOC PT NOT ELIG FOOTWEAR EVALUATION MEASURE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8417	BMI DOC ABOVE NORMAL PARAM AND F U PLAN DOCUMENTED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8418	BMI DOC BLW NML PARAM AND A F U PLAN IS DOCUMENTED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8419	BMI DOC OUT NML PARAM NO F U PLN DOC NO RSN GVN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8420	BMI DOC W I NORMAL PARAM AND NO F U PLAN REQUIRED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8421	BMI NOT DOCUMENTED AND NO REASON IS GIVEN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8422	BMI NOT DOC DOC PT NOT ELIGIBLE BMI CALCULATION		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8427	ELIG CLIN ATTSTS DOC M REC OBTD UPD REV PT MEDS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8428	CUR MEDS NO DOC OBDT UPD REV ELIG CLIN RSN N GVN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8430	ELIG CLIN DOC MR PT NOT ELIG CUR MEDS UPDATE REV		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8431	SCR CLIN DEPR DOC POS AND F U PLAN IS DOCUMENTED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8432	DEPRESSION SCR NOT DOCUMENTED REASON NOT GIVEN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8433	SCREENING FOR DEPR NOT COMPL DOCUMENTED REASON		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8442	PA NOT DOC PERF DOC PT NOT ELIG PA TIME OF ENC		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8450	BETA-BLOCKER THERAPY PRESCRIBED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8451	BETA-BLOCKER TX LVEF UNDER 40PCT NOT PRSCR RSN DOC CLIN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8452	BETA-BLOCKER THERAPY NOT PRESCRIBED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8465	HIGH VERY HIGH RISK RECURRENCE PROSTATE CANCER		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8473	ACE INHIBITOR ARB THERAPY PRESCRIBED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8474	ACE INHIBITOR ARB TX NOT PRSC RSNS DOC BY CLIN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8475	ACE INHIBITOR ARB TX NOT PRESCRIBED RSN NOT GVN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8476	MOST RECENT BP SYST UNDER 140 MM HG AND DIAS UNDER 90		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8477	MOST RECENT BP SYSTGRT THN EQ140 MM HG AND DIASGRT THN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No

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G8478	BLOOD PRESSURE MSR NOT PERF DOC REASON NOT GIVEN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8482	INFLUENZA IMMUNIZATION ADMIN PREVIOUSLY RECEIVED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8483	INFLUENZA IMMUNIZATION NOT ADMIN RSN DOC CLIN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8484	INFLUENZA IMMUN NOT ADMINISTERED RSN NOT GIVEN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8506	PATIENT RECEIVING ACE INHIBITOR ARB THERAPY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8509	PN ASMT DOC STD TOOL POS F U PLN NOT DOC NO RSN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8510	SCREENING DEPRESSION DOC NEG A F U PLAN NOT RQR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8511	SCREEN DEPR DOC POS F U PLN NOT DOC RSN NOT GVN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8535	EM SCR NOT DOC;DOC PT NOT ELIG EM SCR TIME ENC		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8536	NO DOC ELDER MALTREATMNT SCREEN REASON NOT GIVEN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8539	FNC OUTCOME ASSESSMENT DOC POS CARE PLAN IS DOC		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8540	FUNC O C ASMT NOT DOC PRF DOC PT NOT ELIG TM ENC		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8541	FCN OUTCOME ASMT STD TOOL NOT DOC RSN NOT GIVEN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8542	FCN OUTCOME ASMT DOC; NO DEFICT ID PLAN NOT RQR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8543	DOC POS FCN ASMT STD T;PLN NOT DOC RSN NOT GVN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8559	PATIENT REFERRED TO PHYSICIAN FOR OTOLOGIC EVAL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8560	PT HISTORY ACTIVE DRAINAGE FROM EAR PREV 90 DAYS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8561	PT NOT ELIG REF OTOLOGIC EVAL HX ACTV DRAIN MSR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8562	PT NO HISTORY ACTIVE DRAINAGE EAR PREV 90 DAYS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8563	PATIENT NOT REF PHYS OTOLOGIC EVAL RSN NOT GIVEN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8564	PT REFERRED PHYS OTOLOGIC EVAL REASON NOT SPEC		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8565	VERIFICATION AND DOC SUDDEN RAPIDLY PROG HEAR LOSS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8566	PT NOT ELIG REF OTO EVAL SUDDEN HEARING LOSS MSR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8567	PT NO VERIFICATION AND DOC SUDDEN HEARING LOSS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8568	PATIENT NOT REF PHYS OTOLOGIC EVAL RSN NOT GIVEN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8569	PROLONGED POSTOPERATIVE INTUBATION REQUIRED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8570	PROLONGED POSTOPERATIVE INTUBATION NOT REQUIRED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No

This prior authorization guide applies to Medicaid, Medicare, and Marketplace.

DOS Effective 10/1/19; Posted 10/30/19

All Inpatient services require prior authorization

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Code	Code Description	Comments	Apple Health & IMC Medical				IMC / BHSO (Mental Health covered svcs)	Medicare	Market Place
			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
G8571	DVLP DP STRNL WND INF MEDIASTINIT W I 30 DA P O		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8572	NO DEEP STERNAL WOUND INFECTION MEDIASTINITIS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8573	STROKE FOLLOWING ISOLATED CABG SURGERY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8574	NO STROKE FOLLOWING ISOLATED CABG SURGERY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8575	DEVELOPED POSTOP RENAL FAILURE REQ DIALYSIS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8576	NO POSTOP RENAL FAILURE DIALYSIS NOT REQUIRED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8577	REOP MEDIAST BLEED GFT OCCL VALV DYSFUNC OTH RSN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8578	REOP NOT REQ MEDIAST BLEED GFT OCCL OTH REASN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8598	ASPIRIN OR ANOTHER ANTIPLATELET THERAPY USED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8599	ASPIRIN OTH ANTITHROMBOTIC NOT USED RSN NOT GVN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8600	IV T-PA INITIATED W IN 3 HRS TIME LAST KNWN WELL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8601	IV T-PA NOT INIT IN 3 HRS LAST WELL RSN DOC CLIN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8602	IV TPA NOT INIT W I 3 HRS TIME KNOWN RSN NOT GVN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8627	SURG PROC W IN 30 DA FLW CATARACT SURG MAJ COMP		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8628	SURG PROC NOT W IN 30 DAY FLW CAT SURG MAJ COMP		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8633	PHARMACOLOGIC THERAP FOR OSTEOPOROSIS PRESCRIBED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8635	PHARM TX OSTEOPOROSIS NOT PRSC REASON NOT GIVEN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8647	RISK-ADJ FUNCT STATUS KNEE SCORE EQUAL 0 OR OVER 0		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8648	RISK-ADJ FUNCT STATUS KNEE SCORE LESS THAN 0		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8649	RISK-ADJ FUNCT STS CHG RESID SCS KNEE NOT APPROP		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8650	RISK-ADJ FUNCT STATUS KNEE NOT MEAS RSN NOT GVN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8651	RISK-ADJ FUNCT STATUS HIP SCORE EQUAL 0 OR OVER 0		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8652	RISK-ADJ FUNCT STATUS HIP SCORE LESS THAN 0		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8653	RISK-ADJ FNCT STS CHG RSD SCS HIP PT NOT APPROP		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8654	RISK-ADJ FUNCT STATUS HIP NOT MEAS RSN NOT GIVEN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8655	RISK-ADJ FUNCT STAT LOW LEG FT ANK SCORE EQ 0 OVER 0		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8656	RISK-ADJ FXN STAT CH RSD SCORE FT ANK SCORE UNDER 0		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8657	RSK-ADJ FXN STS CH RESD SC FOOT ANKLE PT NOT APP		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8658	RSK-A FXN STS CH RSD SC FT ANK NO MSR RSN N GVN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8659	RISK-ADJ FXN STS CH RSD SC LUMB IMPAIRMNT SC EQ 0 OR GRT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8660	RISK-ADJ FXN STS CH RSD SC LUMB IMPAIRMNT SC UNDER 0		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No

This prior authorization guide applies to Medicaid, Medicare, and Marketplace.

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Code	Code Description	Comments	Apple Health & IMC Medical				IMC / BHSO (Mental Health covered svcs)	Medicare	Market Place
			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
G8661	RISK-ADJ FXN STS CH RSD SC L IMPRMNT PT NOT APP		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8662	RISK-ADJ FXN STS CH RSD SC L IMPRMNT RSN NOT GVN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8663	RISK-ADJ FUNCT STATUS SHOULDER SCORE EQUAL 0 OVER 0		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8664	RISK-ADJ FUNCT STATUS SHOULDER SCORE LESS THAN 0		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8665	RISK-ADJ FXN STS CHG RSD SCR SHOULDER PT NOT APP		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8666	RISK-ADJ FCN STS SHOULDER NOT MSR RSN NOT GIVEN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8667	RISK-ADJ FUNCT STATUS ELB WRST HND SCORE EQ 0 OVER 0		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8668	RISK-ADJ FUNCT STATUS ELBOW WRIST HAND SCORE UNDER 0		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8669	RISK-ADJ FXN STS CHG RSD SC ELB WR H PT NOT APP		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8670	RISK-ADJ FCN STS ELB WRST HND NOT MSR RSN NOT GV		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8671	RISK-ADJ F STS CHG RSD SC N CR M TS RIBS SC EQ 0 OR GRT 0		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8672	RISK-ADJ FXN STS CHG RSD SC N CR M TS RIBS SC UNDER 0		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8673	RSK-ADJ F ST CH RSD SC N CR M TS RIBS PT NOT APP		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8674	RSK-A FXN ST CHG RSD SC N CR M TS RIB RSN NO GVN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8694	LEFT VENTRICULAR EJECTION FRACTION UNDER 40PCT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8708	PATIENT NOT PRESCRIBED OR DISPENSED ANTIBIOTIC		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8709	PATIENT PRESCRIBED DISPENSED ABX DOC MEDICAL RSN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8710	PATIENT PRESCRIBED OR DISPENSED ANTIBIOTIC		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8711	PRESCRIBED OR DISPENSED ANTIBIOTIC		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8712	ANTIBIOTIC NOT PRESCRIBED OR DISPENSED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8721	PT CATEGORY PN CATEGORY AND HISTOL GR DOC PATH RPT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8722	DOC MED RSN NOT INCL PT CAT PN CAT HG PATH REPRT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8723	SPEC SITE OTH THAN ANATOMIC LOCATION PRIM TUMOR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8724	PT CAT PN CAT AND HISTOL GR NOT DOC PATH RPT NOT GVN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8730	PAIN ASSESS DOC POS USING STANDARD TOOL F U PLAN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8731	PAIN ASMT STDIZ TOOL DOC NEG NO F U PLAN IS RQR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8732	NO DOCUMENTATION PAIN ASSESSMENT REASON NOT GIVN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8733	ELDER MALTX SCR DOC POSITIVE AND F U PLAN IS DOC		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
G8734	ELDER MALTREATMENT SCREENING DOC NEG NO F U REQ		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8735	ELDER MALTX SCR DOC POS F U NOT DOC RSN NOT GIVN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8749	ABSENCE SIGNS MELANOMA ABSENCE SYMPTOMS MELANOMA		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8752	MOST RECENT SYSTOLIC BLOOD PRESSURE UNDER 140MM HG		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8753	MOST RECENT SYSTOLIC BLOOD PRESSURE GRT THN EQ 140MM HG		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8754	MOST RECENT DIASTOLIC BLOOD PRESSURE UNDER 90MM HG		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8755	MOST RECENT DIASTOLIC BLOOD PRESSURE GRT THN EQ 90MM HG		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8756	NO DOC BLOOD PRESSURE MSR REASON NOT GIVEN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8783	NORMAL BLOOD PRESS READING DOC F U NOT REQUIRED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8785	BLOOD PRESSURE READING NOT DOC REASON NOT GIVEN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8797	SPECIMEN SITE OTH THAN ANATOM LOCATION ESOPHAGUS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8798	SPECIMEN SITE OTH THAN ANATOMC LOCATION PROSTATE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8806	PERFORMANCE TRANSABDOMINAL TRANSVAGINAL U S		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8807	TRANSABD TRANSVAG U S NOT PERF RSN DOC CLINICIAN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8808	TRANS-ABD TRANS-VAG U S NOT PRFRM RSN NOT GIVEN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8809	RH IMMUNE GLOBULIN RHOGAM ORDERED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8810	RH-IMMUNOGLOBULIN NOT ORDERED REASONS DOC CLIN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8811	DOCUMENT RH IMMUNE GLOBULIN NOT ORDERED RSN NS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8815	DOCUMENTED REASON MED REC WHY STATIN TX NOT PRSC		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8816	STATIN MEDICATION PRESCRIBED AT DISCHARGE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8817	STATIN THERAPY NOT PRESCRIBED D C RSN NOT GIVEN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8818	PATIENT D C TO HOME NO LATER THAN POSTOP DAY #7		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8825	PATIENT NOT DISCHARGED TO HOME BY POSTOP DAY #7		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8826	PT D C HOME NO LATER THAN POSTOP DAY #2 FLW EVAR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8833	PATIENT NOT D C HOME POSTOP DAY #2 FOLLOW EVAR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
G8834	PT D C HOME NO LATER POSTOP DAY #2 FOLLOW CEA		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8838	PATIENT NOT D C TO HOME BY POSTOP DAY #2 FLW CEA		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8839	SLEEP APNEA SYMP ASSESS PRES ABS SNOR DAY SSS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8840	DOC REASON NOT DOCUMENTING ASMT SLEEP SYMPTOMS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8841	SLEEP APNEA SX NOT ASSESSED REASON NOT GIVEN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8842	AHI RDI MEASURED AT TIME OF INITIAL DIAGNOSIS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8843	DOC REASON NOT MEASURING AHI RDI TIME INIT DX		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8844	APNEA HYPOPNA IND RDI NOT MSR TM DX RSN NOT GVN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8845	POSITIVE AIRWAY PRESSURE THERAPY PRESCRIBED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8846	MODERATE OR SEVERE OBSTRUCTIVE SLEEP APNEA		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8849	DOCUMENTATION RSN NOT PRSC POS AIRWAY PRESS TX		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8850	POSITIVE AIRWAY PRESS TX NOT PRSC RSN NOT GIVEN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8851	OBJECTIVE MEASURE ADHERENCE PAP TX DOCUMENTED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8852	POSITIVE AIRWAY PRESSURE THERAPY PRESCRIBED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8854	DOCUMENTATION REASON NOT OBJ MSR ADHERENCE CPAP		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8855	OBJ MSR ADHERENCE TO PAP TX NOT PRF RSN NOT GVN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8856	REFERRAL TO PHYSICIAN OTOLOGIC EVAL PERFORMED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8857	PATIENT NOT ELIG REFERRAL FOR OTOLOGIC EVAL MSR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8858	REF TO PHYS OTOLOGIC EVAL NOT PRFRM RSN NOT GVN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8861	PST 2 YRS DXA ORD AND DOC ROS AND MED HX PHARM TX OP		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8863	PATIENTS NOT ASSESSED RISK BONE LOSS RSN NOT GVN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8864	PNEUMOCOCCAL VACCINE ADMIN OR PREVIOUSLY RECEIVD		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8865	DOC MED RSN NOT ADM PREV RECV PNEUMOCOCCAL VAC		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8866	DOC PT RSN NOT ADM PREV RECV PNEUMOCOCCAL VAC		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8867	PNEUMOCOCCAL VAC NOT ADM PREV RECV RSN NOT GVN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8869	PATIENT HAS DOC IMMUN HEP B AND INIT ANTI-TNF TX		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8872	EXCISED TISS EVAL IMAG INTRAOP CNF INCL TGT LES		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8873	PT W NEEDLE LOC SPEC VERIFIED INTRAOP INSP PATH		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8874	EXCIS TISS NOT EVAL IMAG IO CONFRM INCL TARG LES		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8875	CLINICIAN DX BREAST CA PREOP MIN INVAS BX METHOD		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No

Guide is subject to change at any time. If a member belongs to a group delegated for UM, contact that group for authorization. Claim payment is subject to eligibility and benefits at the time of service. Claim processing edits will apply.

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
G8876	DOC RSN NO MIN INVASIVE BX DIAGNOSE BR CA PREOP		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8877	CLIN NOT DX BR CA PREOP MIN INVAS BX RSN NOT GVN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8878	SENTINEL LYMPH NODE BIOPSY PROCEDURE PERFORMED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8880	DOCUMENT RSN SENTINEL LYMPH NODE BX NOT PRFRM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8881	STAGE BREAST CANCER GREATER THAN T1N0M0 T2N0M0		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8882	SENTINEL LYMPH NODE BX NOT PERF REASON NOT GIVEN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8883	BIOPSY RESULTS REVIEW COMMUNICATED TRACKED AND		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8884	DOC CLIN DOC REASON PT BIOPSY RESULTS NOT REVIEWED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8885	BIOPSY RESULTS NOT REVIEW COMMUNICATE TRACK DOC		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8907	PT DOC NO:BURN;FALL FAC;WRG EVENT; HOS TRANSFER		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8908	PATIENT DOC HAVE RECEIVED BURN PRIOR DISCHARGE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8909	PT DOC NOT HAVE RECEIVED BURN PRIOR DISCHARGE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8910	PATIENT DOC HAVE EXPERIENCED FALL WITHIN ASC		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8911	PT DOC NOT HAVE EXPER FALL IN AMB SURG CENTER		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8912	PT DOC HAVE EXP WRG SITE SIDE PT PRO IMPL EVENT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8913	PT DOC NO WRONG SITE SIDE PT PROC IMPLANT EVENT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8914	PT DOC HAVE EXPERNCD HOSP TRNSF ADM UPON D C ASC		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8915	PT DOC NOT EXPERNCD HOSP TRNSF ADM UPON D C ASC		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8916	PT PREOP ORD IV ABX PROPH ABX INITIATED TIME		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8917	PT PREOP ORD IV ABX SSI PROPH NOT INITIATED TIME		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8918	PT WITHOUT PREOP ORDER IV ABX SSI PROPHYLAXIS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8923	LVEF UNDER 40PCT DOC MOD SEV DPRSD LT VENT SYSTOLIC FCN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8924	SP RSLT DEMST FEV1 FVC UNDER 70PCT FEV UNDER 60PCT P		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8925	SP RSLT FEV1 GRT THN EQ 60PCT FEV1 FVC GRT THN EQ 70PCT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8926	SPIROMETRY TEST NOT PRFRM DOC REASON NOT GIVEN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8934	LVEF UNDER 40PCT DOC MOD SEV DPRSD LT VENT SYSTOLIC FCN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8935	CLIN PRSC ACE INHIB ANGIOTENSIN REC BLOCK ARB TX		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8936	CLIN DOC PT NOT ELIG CANDIDATE ACE INHIB ARB TX		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8937	CLIN DID NOT PRSC ACE INHIB ARB TX RSN NOT GIVEN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
G8938	BMI OUTSIDE NORM LMT F U PLN NOT DOC PT NOT ELIG		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8939	PA DOC POS F U PL NOT DOC DOC PT NOT ELIG TM ENC		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8941	ELD MALTX SCR POS F U NOT DOC NOT ELG F U PLN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8942	FNC OUTCM ASMT TOOL DOC PREV 30 DA AND CARE PLN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8944	AJCC MELANOMA CANCER STAGE 0-IIC MELANOMA		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8946	MINIMALLY INVASV BX METH ATMPT BUT NOT DX BR CA		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8950	PREHTN HTN BP READING DOC AND INDICATED F U DOC		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8952	PREHTN HTN BP DOC INDCD F U NOT DOC RSN NOT GIVN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8955	MOST RECENT ASMT ADEQUACY VOLUME MGMT DOC		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8956	PT RECV MAINT HEMODIALYSIS IN O P DIALYSIS FAC		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8958	ASMT ADEQUACY VOLUME MGMT NOT DOC RSN NOT GIVEN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8959	CLIN TREATING MDD COM CLIN TREATING COMORBID CON		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8960	CLIN TX MDD DID NOT COM CLIN TC CC RSN NOT GIVEN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8961	CARD STRESS IMAG LW RSK PT PREOP EVAL 30 D SURG		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8962	CARDIAC STRESS IMAGING TEST PERFORMED ANY REASON		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8963	CARD STRSS IMAG PRIM MON ASX PT HAD PCI W I 2 YR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8964	CARD SS IMAG OTH RSN THN MON ASX PT PCI IN 2 YRS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8965	CARD SS IMAG PRIM PER L CHD RSK PT DET RSK ASMT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8966	CARD STRSS IMAG TST PER SX HI THAN L CHD RSK PT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8967	WARFARIN ANR FDA APRVD ORAL ANTICOAGULANT PRESC		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8968	DOC MED RSN NOT PRESC WARFARIN ANR FDA-APPRV AC		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8969	DOC PT RSN NOT PRSCR WAR ANOTHER ORAL AC PREV TE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8970	NO RISK FACTOR 1 MOD RISK FACTOR THROMBOEMBOLISM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8973	MOST RECENT HEMOGLOBIN LEVEL UNDER 10 G DL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8974	HGB LEVEL MEASUREMENT NOT DOC REASON NOT GIVEN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8975	DOCUMENTION MEDICAL RSN PT HGB LEVEL UNDER 10 G DL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8976	MOST RECENT HEMOGLOBIN HGB LEVEL GRT THN EQ 10 G DL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8978	MOB:WALK MOV ARND FCN LIM TX OUTSET REP INTRVL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
G8979	MOB: WALK MOV ARND FCN LIM GOAL REP INTRVL AND D C		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8980	MOB:WALK AND MOV ARND FUNC LIM D C AT D C TX END REP		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8981	CHNG MAINT BDY PSTN FCN LIM TX OUTSET REP INTRVL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8982	CHANG MAINT BDY PSTN FCN LIM PROJECTED GOAL STS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8983	CHANGING AND MAINT BODY POS FUNC LIM D C TX END REP		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8984	CARRY MOV HANDLNG OBJ FCN LIM CUR TX REP INTRVL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8985	CAR MOV HDLG OBJ PROJ GOAL TX OUTSET AND REP INTRVL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8986	CARRY MOVING HAND OBJ FCN LIM D C STS D C TX REP		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8987	SLF CARE FCN LIM CUR TX EPIS OUTSET REP INTERVLS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8988	SELF CARE FCN LIM GOAL TX OUTSET AND D C END REP		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8989	SLF CARE FUNC LIM D C STS D C FROM TX TO END REP		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8990	OTH PHYS OCCUP TX PRIM FCN LIM OUTSET REP INTRVL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8991	OTH PHYS OCC TX PRIM FCN LIM GOAL TX REP INT D C		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8992	OTH PHYS OCCUP TX PRIM FCN LIM D C TX END REP		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8993	OTH PHYS OCCUP TX SUB FCN LIM CUR TX REP INTRVL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8994	OTH PHYS OCCUP TX SUB FCN LIM GOAL TX EPIS OUTST		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8995	OTH PHYS OCCUP TX SUB FCN LMT D C STS D C TX REP		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8996	SWALLOW FCN LIM CUR STS TX AND EPIS OUTSET REP INTRVL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8997	SWALLOW FCN LIM PROJ GOAL TX EPIS AND OUTSET AND D C TX		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8998	SWALLOWING FCN LIMITATION D C STS D C TX END REP		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G8999	MO SPH FCN LIM CUR STS TX EPIS AND OUTST AND REP INTRVL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9001	COORDINATED CARE FEE INITIAL RATE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9002	COORDINATED CARE FEE MAINTENANCE RATE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9003	COORDINATED CARE FEE RISK ADJUSTED HIGH INITIAL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9004	COORDINATED CARE FEE RISK ADJUSTED LOW INITIAL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9005	COORDINATED CARE FEE RISK ADJUSTED MAINTENANCE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9006	COORDINATED CARE FEE HOME MONITORING	PA required for Respite Care	Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9007	COORDINATED CARE FEE SCHEDULE TEAM CONFERENCE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9008	COORD CARE FEE PHYS COORD CARE OVERSIGHT SRVC		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9009	COORDINATED CARE FEE RISK ADJ MAINTENANCE LEVEL 3		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
G9010	COORDINATED CARE FEE RISK ADJ MAINTENANCE LEVL4		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9011	COORD CARE FEE RISK ADJ MAINTENANCE LEVEL 5		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9012	OTHER SPECIFIED CASE MANAGEMENT SERVICE NEC	Bill through DSHS	Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Yes
G9013	ESRD DEMO BASIC BUNDLE LEVEL I		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9014	ESRD DEMO EXPND BUNDLE INCL VENOUS ACSS AND REL SRVC		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9016	SMOK CESSATN CNSL IND ABSNCE ADD OTH E AND M-SESS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9017	AMANTADINE HCI ORAL PER 100 MG		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9018	ZANAMIVIR INHAL POWDER THRU INHAL PER 10 MG		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9019	OSELTAMIVIR PHOSPHATE ORAL PER 75 MG		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9020	RIMANTADINE HCI ORAL PER 100 MG		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9033	AMANTADINE HCI ORAL BRAN PER 100 MG		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9034	ZANAMIVIR INHAL PWDR ADMIN INHAL BRAND PER 10 MG		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9035	OSELTAMIVIR PHOSPHATE ORAL BRAND PER 75 MG		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9036	RIMANTADINE HCI ORAL BRAND PER 100 MG		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9050	ONC; PRIM FOCUS VST; WRKUP EVAL STAG@TM DX RECUR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9051	ONC; PRIM FOCUS VST; TX DECISION MAKING OPTIONS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9052	ONC; PRIM FOCUS; SURVEILLANCE RECUR;TX FUTURE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9053	ONC; PRIM FOCUS; EXP MGMT EVIDENCE CA; TX FUTURE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9054	ONC; PRIM FOCUS; SUP PT TERM CA; PALLIATIVE TX		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9055	ONC; PRIM FOCUS; OTH UNS SRVC NOT OTHERWISE LIST		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9056	ONC; PRAC GUIDELINES; MGMT ADHERES TO GUIDELINES		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9057	ONC; PRAC GUIDE; MGMT DIFFR PT ENROLL CLIN TRIAL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9058	ONC; PRAC GUIDE; MGMT DIFFER PHYS DISAGREE GUIDE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9059	ONC; PRAC GUIDELINES; MGMT DIFFERS PT OPT ALT TX		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9060	ONC; PRAC GUIDELINE; MGMT DIFFER PT COMORBID ILL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9061	ONC; PRAC GUIDE; PTS COND NOT ADDRESSED GUIDE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9062	ONC; PRAC GUIDELINES; MGMT DIFFERS OTH REASON		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9063	ONC; STATUS; NSCLC; STAGE I NO DZ PROGRESSION		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9064	ONC; STATUS; NSCLC; STAGE II NO DZ PROGRESSION		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9065	ONC; STATUS; NSCLC; STAGE III A NO DZ PROGRESSN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9066	ONC; STATUS; NSCLC; STAGE III B-4 MET LOC RECUR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9067	ONC; STATUS; NSCLC; EXTENT DZ UNKN UNDER EVAL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9068	ONC; STATUS; SC AND COMB SM NONSM; LTD NO PROGRESSN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9069	ONC; STATUS; SCLC SM CELL AND COMB SM NONSM; EXT MET		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
G9070	ONC; STATUS; SCLC SC AND COMB SM NONSM; EXTENT UNKN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9071	ONC; F BRST;ACA; ST I II;ER AND PR POS;NO PROGRESSN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9072	ONC; F BRST;ACA; ST I II; ER AND PR NEG;NO PROGRESSN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9073	ONC; F BRST;ACA; ST III; ER AND PR POS;NO PROGRESSN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9074	ONC; F BRST;ACA; ST III; ER AND PR NEG; NO PROGRESSN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9075	ONC; STATUS; FE BRST CA; ACA; M1 MET LOC RECUR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9077	ONC;PROS CA;T1-T2C AND GLESN 27 AND PSA UNDER EQ 20 NO P		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9078	ONC; PROS CA; T2 T3A GLEASON 8-10 PSA OVER 20 NO METS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9079	ONC; STATUS; PROS CA; T3B-T4 N; T N1 NO PROGRSSN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9080	ONC; STATUS; PROS CA; TX RISING PSA FAIL DECLINE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9083	ONC; STATUS; PROS CA ACA; EXTENT UNKN UNDER EVAL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9084	ONC; STATUS; COLON CA; T1-3 N0 M0 NO PROGRESSION		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9085	ONC; STATUS; COLON CA; T4 N0 M0 NO PROGRESSION		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9086	ONC; STATUS; COLON CA; T-14 N-12 M0 NO PROGRESSN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9087	ONC; STATUS; COLON CA; M1 MET W CURR EVIDENCE DZ		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9088	ONC; STATUS; COLON CA;M1 MET NO CURR EVIDENCE DZ		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9089	ONC; STATUS; COLON CA; EXTENT DZ UNKN UNDER EVAL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9090	ONC; STATUS; RECTAL CA; T1-2 N0 M0 NO PROGRESSN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9091	ONC; STATUS; RECTAL CA; T3 N0 M0 NO PROGRESSION		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9092	ONC; STATUS; RECTAL CA;T1-3 N1-2 M0 NO PROGRESSN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9093	ONC; STATUS; RECTAL CA; T4 ANY N M0 NO PROGRESSN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9094	ONC; STATUS; RECTAL CA; M1 METASTATIC LOC RECUR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9095	ONC; STATUS; RECTAL CA; EXTENT DZ UNK UNDER EVAL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9096	ONC; STATUS; ESOPH CA;T1-T3 N0-N1 NX NO PROGRSSN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9097	ONC; STATUS; ESOPH CA; T4 ANY N M0 NO PROGRESSN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9098	ONC; STATUS; ESOPH CA ; M1 METASTATIC LOC RECUR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9099	ONC; STATUS; ESOPH CA; EXTENT DZ UNKN UNDER EVAL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9100	ONC; STATUS; GASTRIC CA; R0 RESECT NO PROGRESSN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9101	ONC; STATUS; GASTRC CA; R1 R2 RESECT NO PRGRESSN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
G9102	ONC; STATUS; GASTRIC CA; M0 UNRESECT NO PROGRSSN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9103	ONC; STATUS; GASTRIC CA; CLIN M1 MET LOC RECUR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9104	ONC; STATUS; GASTR CA ; EXTENT DZ UNK UNDER EVAL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9105	ONC; STATUS; PAN CA; R0 RESECT NO DZ PROGRESSION		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9106	ONC; STATUS; PAN CA; R1 R2 RESECT NO PROGRESSION		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9107	ONC; STATUS; PAN CA; UNRESECTBL M1 MET LOC RECUR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9108	ONC; STATUS; PAN CA; EXTENT DZ UNKN UNDER EVAL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9109	ONC; STATUS; HEAD AND NCK CA; T1-T2 AND N0 M0 NO PROGRSS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9110	ONC; STATUS; HEAD AND NCK CA;T3-4 AND N1-3 M0 NO PROGRS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9111	ONC; STATUS; HEAD AND NCK CA; M1 METASTATC LOC RECUR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9112	ONC; STATUS; HEAD AND NECK CA; EXTENT OF DZ UNKNOWN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9113	ONC DS STATUS OVARIAN CA ST IA-B NO PROGRESSN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9114	ONC;OV CA; ST IA-B GR 2-3;ST IC;ST II; NO PROGRS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9115	ONC; STATUS; OVARIAN CA; ST III-IV; NO PROGRESSN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9116	ONC; STATUS; OVARIAN CA; PROGRSSN AND PLATINM RSIST		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9117	ONC; STATUS; OVARIAN CA; EXTENT UNKN UNDER EVAL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9123	ONC; CML; CHRON PHASE NOT HEMATOL CYT MOL REMISS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9124	ONC; CML; ACCEL PHASE NOT HEMA CYT MOL REMISS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9125	ONC; CML BP NOT HEMAT CYTOGENIC MOLECULAR REMISS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9126	ONC; CML HEMATOLOGIC CYTOGENIC MOLECULAR REMISS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9128	ONC; LTD TO MX MYELOMA SYS DZ; SMOLDERING ST I		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9129	ONC; LTD TO MX MYELOMA SYS DZ ST II HIGHER		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9130	ONC; LTD MX MYELOMA SYS DZ EXTENT UNKN UND EVAL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9131	ONC;DZ STS;F BRST CA;ADENOCA;DZ STAG NOT LISTED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9132	ONC;DZ STS;PROS CA ADENOCARCINOMA;CLIN METS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9133	ONC;DZ STS;PROS CA ADENOCARCINOMA;CLIN METS M1		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9134	ONC;DZ STS;NHL;STAGE I II NOT RELPSD NOT RFRCTRY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9135	ONC;DIZ STS;NHL;STG III IV NOT RLPSD NOT RFRCTRY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9136	ONC;DZ STS;NHL TRNSFRM ORIG CELLR 2ND CELLR CLSS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9137	ONC; DZ STS; NHL; RELAPSED REFRACTORY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9138	ONC;DZ STS;NHL;DIAG EVAL STAGE NOT DETERMINED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No

Guide is subject to change at any time. If a member belongs to a group delegated for UM, contact that group for authorization. Claim payment is subject to eligibility and benefits at the time of service. Claim processing edits will apply.

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
G9139	ONC;DZ STS;CML; EXTENT DZ UNKN STAG NOT LISTED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9140	FRONTIER EXTENDED STAY CLIN DEMO; CMS DEMO PROJ		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9143	WARFARIN RSPN TEST GEN TECH ANY METH ANY # SPEC	No, pregnancy related if covered	Yes	Yes	Not Cov	Yes		Yes	Yes
G9147	OP IV INSULIN TX MEASURE: RQ; AND UUN; AND GLU; AND		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9148	NATIONAL COMMITTEE QA LEVEL 1 MEDICAL HOME	Health Home Providers Only	Not Cov	No	Not Cov	No		Not Cov	No
G9149	NATIONAL COMMITTEE QA LEVEL 2 MEDICAL HOME	Health Home Providers Only	Not Cov	No	Not Cov	No		Not Cov	No
G9150	NATIONAL COMMITTEE QA LEVEL 3 MEDICAL HOME	Health Home Providers Only	Not Cov	No	Not Cov	No		Not Cov	No
G9151	MAPCP DEMONSTRATION STATE PROVIDED SERVICES		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9152	MAPCP DEMONSTRATION-COMMUNITY HEALTH TEAMS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9153	MAPCP DEMONSTRATION-PHYSICIAN INCENTIVE POOL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9156	EVALUAT WHEELCHAIR REQ FACE-FACE VISIT PHYSICIAN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9157	TRANSESOPHAGEAL DOPPLER FOR CARDIAC MONITORING		No	Not Cov	Not Cov	Not Cov		No	No
G9158	MOTOR SPEECH FUNCT LIMIT D C STATUS D C FROM TX		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9159	SPOKEN LANG COMP LIMIT CURR STATUS TX OUTSET		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9160	SPKN LANG COMP FCN LMT GOAL TX EPIS D C END RPRT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9161	SPOKEN LANG COMP LIMIT D C STATUS AT D C TX		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9162	SPOKEN LANG EXPRESS LIMIT CURR STATUS TX OUTSET		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9163	SL EXP FCN LMT GOAL STS TX EPIS D C END REPORT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9164	SPOKEN LANG EXPRESS LIMIT D C STATUS AT D C TX		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9165	ATTN FUNCT LIMIT CURR STATUS TX EPISODE OUTSET		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9166	ATTN FUNCT LIMIT PROJ GOAL STATUS TX EPIS OUTSET		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9167	ATTN FUNCT LIMIT DISCHARGE STATUS AT D C FROM TX		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9168	MEMORY FUNCT LIMIT CURR STATUS TX EPISODE OUTSET		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9169	MEMORY FUNCT LIMIT PROJ GOAL STATUS TX EPISODE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9170	MEMORY FUNCT LIMIT DISCHARG STATUS D C FROM TX		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9171	VOICE FUNCT LIMIT CURR STATUS TX EPISODE OUTSET		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9172	VOICE FUNCT LIMIT PROJ GOAL STATUS TX EPISODE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9173	VOICE FUNCT LIMIT DISCHARGE STATUS D C FROM TX		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9174	OTH SPEECH LANG FUNCT LIMIT CURR STATUS TX		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9175	OTH SPEECH LANG FUNCT LIMIT PROJ GOAL STATUS TX		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9176	OTH SPEECH LANG FUNCT LIMIT D C STATUS D C TX		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9186	MOTOR SPEECH FUNCT LIMIT PROJ GOAL STATUS AT TX		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9187	BPCI HOME VISIT PT ASSESSMENT PRFRM QUAL HC PROF		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9188	BETA-BLOCKER THERAPY NOT PRSC REASON NOT GIVEN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
G9189	BETA-BLOCKER THERAPY PRSC CURRENTLY BEING TAKEN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9190	DOCUMENTATION MED RSN NOT PRSC BETA-BLOCKER TX		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9191	DOCUMENTATION PT REASON NOT PRSC BETA-BLOCKER TX		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9192	DOCUMENTATION SYSTEM RSN NOT PRSC BETA-BLOCKR TX		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9196	DOC MED REASON NOT ORD 1ST 2ND GEN CPH AMP		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9197	DOC ORD 1ST 2ND CEPHALOSPORIN ANTIMICROBL PROPH		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9198	ORDER 1ST 2ND GEN CEPH AMP NOT DOC RSN NOT GIVEN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9212	DSM-IVTM CRITERIA MDD DOC INITIAL EVALUATION		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9213	DSM-IV-TR CRITERIA MDD NOT DOC INIT EVAL RSN NOS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9223	PCP P PRSC 3 MO CD4 PLUS BLW 500 CE MM3 CD4 PCT BLW 15PCT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9225	FOOT EXAM WAS NOT PERFORMED REASON NOT GIVEN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9226	FOOT EXAMINATION PERFORMED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9227	FUNC O C ASMT CARE PLN NOT DOC PT NOT ELG AT ENC		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9228	CHLAMYDIA GONORRHEA SYPHILIS SCREEN RESULTS DOC		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9229	CHLAMYDIA GONORRHEA AND SYPHILIS SCR RSLT NOT DOC		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9230	CHLAMYDIA GONORRHEA SYPHILIS NOT SCREEN NO RSN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9231	DOC ESRD DIAL RNA TX BF DUR MSR PR PG DUR MSR PR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9232	CLIN TREAT MDD DID NOT COMM CLIN TREAT CC PT RSN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9239	DOC RSN PT INIT MAINT HD CATH MODE VASC ACCESS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9240	PT MODE VASC ACCESS CATH TIME MAINT HD INITIATED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9241	PT MODE VASC ACCESS NOT CATH TM MAINT HD INITIAT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9242	DOC VIRAL LOAD EQ OR GRT 200 COPIES ML VL NOT PRFRM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9243	DOCUMENTATION VIRAL LOAD LESS THAN 200 COPIES ML		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9246	PT NOT 1 VST IN 24 MO MSR PERIOD MIN 60 DA BTWN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9247	PT HAD 1 VST IN 24 MO MSR PERIOD MIN 60 DA BTWN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9250	DOC PT PAIN BROUGHT COMFORT LVL 48 HRS INIT ASMT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
G9251	DOC PT PAIN NOT BROUGHT COMFORT 48 HR INIT ASMT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9254	DOC PT D C HOME LATER THAN POST-OP DA 2 FLW CAS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9255	DOC PT D C HOME NO LTR THAN PST OP DAY 2 FLW CAS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9256	DOCUMENTATION OF PATIENT DEATH FOLLOWING CAS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9257	DOCUMENTATION OF PATIENT STROKE FOLLOWING CAS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9258	DOCUMENTATION OF PATIENT STROKE FOLLOWING CEA		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9259	DOC PT SURVIVAL AND ABSENCE OF STROKE FOLLOW CAS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9260	DOCUMENTATION OF PATIENT DEATH FOLLOWING CEA		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9261	DOC PT SURVIVAL AND ABSENCE STROKE FOLLOWING CEA		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9262	DOC PT DEATH HOSPITAL FLW ENDOVASCULAR AAA REPR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9263	DOC PT D C ALIVE FLW ENDOVASCULAR AAA REPAIR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9264	DOC PT RECEIVE MAINT HD GRT THN EQ 90 DAY CATH DOC RSN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9265	PT RECV MAINT HD GRT THN EQ 90 DAY CATH AS VASC ACCESS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9266	PT RECV MNT HD GRT THN EQ 90 DA NO CATH AS VASC ACCESS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9267	DOC PT 1 MORE COMPLICATION MORTALITY W I 30 DAYS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9268	DOC PT 1 MORE COMPLICATIONS WITHIN 90 DAYS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9269	DOC PT W O 1 MORE COMP NO MORTALITY W I 30 DAYS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9270	DOC PT W O ONE OR MORE COMPLICATIONS W I 90 DAYS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9273	BP HAS SYSTOLIC VALUE UNDER 140 DIASTOLIC VALUE UNDER		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9274	BP SYS EQ 140 DIA EQ 90 SYS UNDER 140 DIA EQ 90 SYS EQ 140		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9275	DOCUMENTATION PATIENT CURRENT NON-TOBACCO USER		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9276	DOCUMENTATION PATIENT IS A CURRENT TOBACCO USER		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9277	DOC PT D ASP ANTI-PLT DOC CONTRAIND ASP ANTI-PLT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9278	DOC PT NOT ON DAILY ASPIRIN ANTI-PLATELET REGIMN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9279	PNEUMOCOCCAL SCR PERFORM DOC VACC RECV PRIOR D C		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
G9280	PNEUMOCOCCAL VACC NOT ADM PRIOR D C RSN NOT SPEC		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9281	SCREEN PERFORM DOC VACC NOT INDICATED PT REFUSAL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9282	DOC MED RSN NOT RPT HIST TYP NSCLC-NOS CLASS W E		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9283	NSCLC BX CYT RPRT DOC CLASS H TYP NSCLC-NOS W E		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9284	NSCLC BX CYT RPRT NOT DOC H TYP NSCLC-NOS W E		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9285	SPEC SITE OTH THAN ANAT LOC LUNG NOT CLASS NSCLC		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9286	ABX REGIMEN PRSC W I 10 DA AFTER ONSET SX		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9287	ABX REGIMEN NOT PRSCR W I 10 DA AFTR ONSET SX		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9288	DOC MED REASON NOT REPORT H TYPE NSCLC-NOS EXPL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9289	NSCLC BX CYTOLOGY RPT DOC H TYPE NSCLC-NOS EXPL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9290	NSCLC BX CYT RPT NOT DOC H TYPE NSCLC-NOS EXPL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9291	SPEC SITE OTH THN LUNG NOT CLASS NSCLC NSCLC-NOS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9292	DOC MED RSN NOT RPT PT CAT THICK ULCER PT1 MR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9293	PATH RPT NOT INCL PT CAT THICKNESS ULCER PT1 MR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9294	PATH RPT W PT CAT THICKNESS ULCERATION PT1 MR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9295	SPECIMEN SITE OTH THAN ANATOMIC CUTANEOUS LOC		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9296	PT DOC SHARE DECISION CONSERVATIVE TX PRIOR PROC		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9297	SHARE DECISION CONSERVATIV TX PRIOR PROC NOT DOC		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9298	PT EVAL VTE CV RISK FACTOR W I 30 DAY PRIOR PROC		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9299	PT NOT EVAL VTE CV RISK W I 30 DAY PRIOR PROC		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9300	DOC RSN NOT CMPL INFUS P ABX PRIOR INFLA PROX TQ		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9301	PT HAD PROPH ABX INFUSED PRIOR INFLATION PROX TQ		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9302	P ABX NOT CMPL INFUS PRIOR INFLAT TQ RSN NOT GVN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9303	OP RPT DOES NOT ID PROS IMPL SPEC RSN NOT GIVEN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9304	OP REPORT IDENTIFIES PROSTHETIC IMPLANT SPEC		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9305	INTRVENTION LEAK ENDOLUMINAL CNT ANASTOM NOT REQ		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9306	INTRVENTION LEAK ENDOLUMINAL CNT ANASTOM REQUIRD		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9307	NO RETURN OP ROOM FOR PROC W I 30 DAY PRIN PROC		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9308	UNPLAN RTN OP ROOM FOR PROC W I 30 DAY PRIN PROC		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9309	NO UNPLANNED HOSP RDM W I 30 DAY PRINCIPAL PROC		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
G9310	UNPLANNED HOSP READMISSION W I 30 DAY PRIN PROC		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9311	NO SURGICAL SITE INFECTION		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9312	SURGICAL SITE INFECTION		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9313	AMC NOT PRESC 1ST LINE ANTIBIOTIC TM DX DOC RSN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9314	AMOXICILLIN NOT 1ST LINE ABX TM DX RSN NOT GIVEN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9315	DOC AMOXICILLIN PRESCRIBED 1ST LINE ABX TIME DX		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9316	DOC PT RISK ASSESSMENT RISK CALCULATOR W PT FAM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9317	DOC PT RISK ASSESS RISK CALC W PT FAM NOT COMPL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9318	IMAGING STUDY NAMED ACCORD STANDARD NOMENCLATURE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9319	IMAG STUDY NOT NAMED STANDARD NOMEN RSN NOT GVN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9321	COUNT PREV CT CARD NM STUDY DOC 12-MO PRIOR CURR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9322	COUNT PREV CT CARD NM NOT DOC 12-MO RSN NOT GVN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9326	CT PERF NOT RPT RAD DOSE INDX REG RSN NOT GVN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9327	CT PERF RPT RAD DOSE INDX REG ALL DATA ELEMENTS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9329	DICOM DATA AVAIL PT AU 12-MO NOT DOC RSN NOT GVN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9340	FINAL RPT DICOM IMAG DATA AVAIL PT AU 12-MO AFTR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9341	SEARCH PRIOR CT EXT HC FAC ENT 12-MO PRI TO IMAG		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9342	SRCH NOT CD PRI IMAG S PEF PT CT S CMPL NO RSN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9344	SEARCH PRIOR CMPL DICOM IMAGES NOT CMPL SYS RSN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9345	F U REC DOC INCIDENTALLY DETECTED PULM NODULES		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9347	F U REC NOT DOC ACC REC GLS PNS RSN NOT GVN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9348	CT SCAN PARANASAL SINUSES ORDERD TIME DX DOC RSN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9349	DOC CT PARANASAL SINUS ORD TM DX 28 DA AFTR DX		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9350	CT PARANASAL SINUS NOT ORD TM DX IN 28 DA AFTR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9351	MORE 1 CT PARANASAL SINUS ORD REC 90 DAY AFTR DX		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9352	MORE 1 CT PARANASAL SINUS 90 DAY AFTR DX NO RSN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9353	MORE 1 CT PARANASAL SINUS 90 DAY AFTR DX DOC RSN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9354	1 CT SCAN NO CT SCAN PARNSL SS ORD 90 D AFTR DOD		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9355	ELECTIVE DELIVERY EARLY INDUCTION NOT PERFORMED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9356	ELECTIVE DELIVERY OR EARLY INDUCTION PERFORMED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9357	POST-PARTUM SCREENINGS EVAL EDUCATION PERFORMED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
G9358	POST-PARTUM SCREEN EVAL EDUCATION NOT PERFORMED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9359	DOC NEG MAN P TB SCR E TB NOT AC W I 1 Y PT VST		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9360	NO DOC NEGATIVE MANAGED POSITIVE TB SCREEN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9361	MEDICAL INDICATION FOR INDUCTION		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9364	SINUSITIS CAUSED BY PRES CAUSED BY BACTERIAL INF		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9365	ONE HIGH-RISK MEDICATION ORDERED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9366	ONE HIGH-RISK MEDICATION NOT ORDERED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9367	AT LEAST 2 ORD FOR SAME HIGH-RISK MED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9368	AT LEAST 2 ORDERS SAME HIGH-RISK MEDS NOT ORD		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9380	PATIENT OFFERED ASSIST ROF ISSUES DUR MSR PRD		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9382	PT NOT OFFRD ASST END OF LIFE ISSUES DUR MSR PRD		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9383	PATIENT RECV SCREENING HCV INF W I 12 MO PERIOD		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9384	DOC MED RSN NOT RECV ANNUAL SCREENING HCV INF		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9385	DOC PT REASON NOT RECEIVING ANNUAL SCR HCV INF		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9386	SCR HCV INF NOT RECV W I 12 MO PR RSN NOT GIVEN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9389	UNPLANNED RUPT POST CAP RQR VITRECT DUR CAT SURG		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9390	NO UNPLAN RUP POST CAP RQR VITRECT DUR CC SURG		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9393	PT INIT PHQ-9 SC OVER 9 RM 12 MO D 12 MO PHQ-9 SC UNDER 5		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9394	PT BPD PD PERM NH HOSPICE PALL CARE DUR ASSESS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9395	PT INIT PHQ-9 SC OVER 9 DID NOT ACHV REMISSION 12 MO		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9396	PT INIT PHQ-9 SC OVER 9 NOT ASSESSED RM AT 12 MO		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9399	DOC PT RECORD DISCUSSION BETWEEN PHYS CLIN AND PT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9400	DOC MED PT RSN FOR NOT DISC TREATMENT OPTIONS;		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9401	NO DOC DISC PT RCRD DISC BTW PHYS Q HC PROF AND PT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9402	PATIENT RECV F U ON DATE D C WI 30 DAYS AFTR D C		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9403	CLIN DOC RSN PT NOT CMPL 30 DA F U AC INPT D C		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9404	PT DID NOT RCV F U DATE D C WI 30 DAYS AFTER D C		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9405	PATIENT RECEIVED FOLLOW-UP W I 7 DAYS FROM D C		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9406	CLIN DOC RSN PT NOT CMPL 7 DAY F U AC INPT D C		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9407	PATIENT DID NOT RECV F U ON WI 7 DAYS AFTER D C		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9408	PATIENTS W CT AND PERICARDIOCENTESIS OCR WI 30 DA		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9409	PATIENTS WO CT AND PERICARDIOCENTESIS OCR WI 30 DA		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9410	PT ADM WI 180 DAYS POST CIED W INF RQR DEVC REMV		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9411	PT NOT ADM WI 180 D PST CIED W INF RQR DVC RMV		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9412	PT ADM WI 180 D PST CIED W INF DVC RMV SURG REV		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No

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*** All Medicare services subject to the limitations in the CMS billing guide and fee schedules at <https://www.cms.gov/> ***

Code	Code Description	Comments	Apple Health & IMC Medical				IMC / BHSO (Mental Health covered svcs)	Medicare	Market Place
			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
G9413	PT NOT ADM WI 180 DAYS POST CIED W INF DEVC REMV		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9414	PT HAD 1 DOSE MC VAC ON BTW PT 11TH AND 13TH BDAY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9415	PT NO 1 DOSE MC VAC ON BTW PT 11TH AND 13TH BDAY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9416	PATIENT HAD 1 TET DT AND TDAP ON BTW PT 10 AND 13 BD		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9417	PATIENT NO 1 TET DT AND TDAP ON BTW PT 10 AND 13 BD		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9418	PRIM NSCLC BX AND CY SPEC DOC CLASS NSCLC-NOS EXPLAN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9419	DOC MED RSN NOT INCL HIS T NSCLC-NOS CLASS EXPLN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9420	SPEC SITE OTH THAN LOC LUNG NOT CLASS PRIM NSCLC		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9421	PRIM NSCLC BX AND CY S NO DOC CLASS NSCLC-NOS EXPLAN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9422	NON-SMALL CELL LUNG CANCER BX AND CYT SPEC RPRT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9423	DOC MED RSN NOT RPRT H TYP NSCLC-NOS CLASS EXPLN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9424	SPEC SITE OTH THAN ANAT LOC LUNG NOT NSCLC NOS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9425	NSCLC BX AND CY SPC NOT DOC CLASS NSCLC-NOS EXPLAN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9426	IMP MED TM ED AR-INIT ED PN MED ADMIN PRF ADM PT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9427	IMP MED TM ED AR-INIT PAIN MED ADMIN NOT PRF ADM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9428	PATH RPRT PT CAT AND STM THK AND ULCER AND PT1 MITOTIC RAT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9429	DOC MED RSN NOT INCL PT AND STM THK AND ULCER AND PT1 MR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9430	SPECIMEN SITE OTH THAN ANATOMIC CUTANEOUS LOC		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9431	PATH RPRT NO PT CAT AND STM THK AND ULCER AND PT1 MITOTIC		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9432	ASTHMA WELL-CNTRL ACT C-ACT ACQ ATAQ SC RSLT DOC		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9434	ASTHMA NOT WC SPEC CTR TOOL NOT USED RSN NOT GVN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9448	PATIENTS WHO WERE BORN IN THE YEARS 1945-1965		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9449	HISTORY OF RECEIVING BLOOD TRANSFUSIONS PRI 1992		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9450	HISTORY OF INJECTION DRUG USE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9451	PATIENT RECEIVED ONE-TIME SCR FOR HCV INFECTION		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9452	DOC MED RSN NOT RECV 1-TIME SCR HCV INFECTION		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
G9453	DOC PT RSN FOR NOT RECV 1-TIME SCR FOR HCV INF		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9454	1-TIME SCR HCV INF NOT RECV WI 12 MO RSN NOT GVN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9455	PT UNDRWNT ABD IMAG U S CE CT CONT MRI FOR HCC		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9456	DOC MED PT RSN FOR NOT ORDERING PRFRM SCR HCC		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9457	PT NO ABD IMAG AND NO DOC RSN NO ABD IMAG RPRT PR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9458	PT DOC TOBACCO USER AND RECV TOBACCO CESSATION INT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9459	CURRENTLY A TOBACCO NON-USER		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9460	TOBACCO ASMT CESS INTERVEN NOT PRFR RSN NOT GVN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9468	PT NOT REC CS GRT THN EQ TO 10 MG D PRD EQ 60 GT CONS D		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9469	PT RECV RCVNG CS GRT THN EQ 10 MG D PDN EQ 60 GT CONS D		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9470	PT NOT RECV CS GRT THN EQ 10 MG D PDN EQ 60 GT CONS D		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9471	WITHIN PAST 2 YEARS CENTRAL DXA NOT ORDERED DOC		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9472	WITHIN PAST 2 YEARS CENTRAL DXA NOT ORDERD AND DOC		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9473	SERVICES PERF BY CHAPLAIN HOSPICE SET EA 15 MIN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9474	SRVC PERF DIETARY COUNSELOR HOSPICE EA 15 MIN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9475	SERVICES PERF OTH COUNSELOR HOSPICE SET EA15 MIN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9476	SERVICES PERF VOLUNTEER HOSPICE SETTING EA15 MIN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9477	SRVC PERF CARE COORDINATOR HOSPICE SET EA 15 MIN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9478	SRVC PERF OTH QUAL THERAPIST HOSPICE EA 15 MIN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9479	SRVC PERF QUAL PHARMACIST HOSPICE SET EA 15 MIN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9480	ADMISSION TO MEDICARE CARE CHOICE MODEL PROGRAM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9481	REMOTE IN-HOME VISIT E M NEW PATIENT 10 MINUTES		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9482	REMOTE IN-HOME VISIT E M NEW PATIENT 20 MINUTES		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9483	REMOTE IN-HOME VISIT E M NEW PATIENT 30 MINUTES		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9484	REMOTE IN-HOME VISIT E M NEW PATIENT 45 MINUTES		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9485	REMOTE IN-HOME VISIT E M NEW PATIENT 60 MINUTES		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9486	REMOTE IN-HOME VISIT E M ESTABLISHED PT 10 MINS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9487	REMOTE IN-HOME VISIT E M ESTABLISHED PT 15 MINS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9488	REMOTE IN-HOME VISIT E M ESTABLISHED PT 25 MINS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
G9489	REMOTE IN-HOME VISIT E M ESTABLISHED PT 40 MINS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9490	CMS IC MDL HV PT ASMT CLIN;NOT BILL 30-DAY PER		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9497	RECEIVED INSTR ANES PROXY ABSTAIN SMOKING DAY SX		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9498	ANTIBIOTIC REGIMEN PRESCRIBED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9500	RAD EXP INDICES EXP TM AND NUMB FLUORO IMAGES DOC		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9501	RAD EXP INDCS EXP TM AND NO FLUORO IMG N DOC N RSN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9502	DOCUMENTATION MEDICAL RSN FOR NOT PERF FOOT EXAM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9503	PATIENT TAKING TAMSULOSIN HYDROCHLORIDE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9504	DOC RSN NOT ASSESS HBV STS PRI INIT ANTI-TNF TX		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9505	ABX REG PRSC W I 10 DA AFTR ONSET SX DOC MED RSN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9506	BIOLOGIC IMMUNE RESPONSE MODIFIER PRESCRIBED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9507	DOC PT ON STATIN MED DOC VALID CONTRAINDICATION		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9508	DOCUMENTATION PT IS NOT ON A STATIN MEDICATION		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9509	REMISS 12 MO DEM BY 12 MO PHQ-9 SCORE OF UNDER 5		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9510	REM 12 MO NOT DEMONSTRATED BY 12 MO PHQ-9 SCR UNDER 5;		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9511	INDX DATE PHQ-9 SCRE OVER 9 DOC 12 M DNMNTR ID PER		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9512	INDIVIDUAL HAD A PDC OF 0.8 OR GREATER		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9513	INDIVIDUAL DID NOT HAVE A PDC OF 0.8 OR GREATER		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9514	PT RQR A RETURN TO THE OR W I 90 DAYS OF SURG		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9515	PT DID NOT RQR RTN TO THE OR W I 90 DAYS OF SURG		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9516	PT ACHIEVED IMPRV IN VA FROM PREOP LVL 90 D SURG		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9517	PT NOT ACHV IMPRV VA PRE LVL 90 D SUR NO RSN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9518	DOCUMENTATION OF ACTIVE INJECTION DRUG USE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9519	PT FINAL REFR PLUS -0.5 D PLND REFR W I 90 DA SURG		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9520	PT NO F REFR PLUS - 0.5 D REFR 90 D SURG RSN NOT GVN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9521	TOTAL NUMBER ED VISITS AND IP HOSP UNDER 2 PAST 12 M		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9522	TOT #ED VISITS AND IP EQ OR GRT 2 PAST 12 MO NO SCR NO		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9523	PT DISCONTINUED HEMODIALYSIS PERITONEAL DIALYSIS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9524	PATIENT WAS REFERRED TO HOSPICE CARE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9525	DOC PATIENT RSN FOR NOT REFERRING HOSPICE CARE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
G9526	PT WAS NOT REFERRED HOSPICE CARE RSN NOT GIVEN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9529	PT MIN BLUNT HEAD TRAUMA APPROP INDICAT HEAD CT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9530	PATIENT W I 24 HR MIN BLNT HD TRMA CT ORD ECP		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9531	PATIENT HAS DOC VT SH BT MS TRAUMA PG CUR AP MED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9532	PATIENTS HEAD INJURY OCCURRED OVER 24 HRS B4 ED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9533	PT MIN BLUNT HEAD TRMA NO APPROP INDICAT HEAD CT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9537	DOCUMENTATION SYS RSN ORD ADVNCD BRAIN IMAG STDY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9539	INTENT FOR POTENTIAL REMOVAL TIME OF PLACEMENT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9540	PATIENT ALIVE 3 MONTHS POST PROCEDURE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9541	FILTER REMOVED WITHIN 3 MONTHS OF PLACEMENT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9542	DOC RE-ASSESS APPROP OF FILTER REMOVAL W I 3 M		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9543	DOCUMENTATION AT LEAST TWO ATTEMPTS TO REACH PT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9544	PATIENTS THAT DO NOT HAVE THE FILTER REMOVED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9547	INCD FND:L LESLESS THN EQ0.5CM C K LES UNDER 1.0CM AD LES		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9548	FINAL REPORTS FOR ABD IMAG STDY W F U IMAG RECOM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9549	DOCUMENTATION MED RSN THAT F U IMAG IS INDICATED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9550	FINAL REPR FOR ABD IMAG STDY F U IMAG NOT RECOM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9551	FINAL REPR ABD IMAG STS W O INCIDNT FND LES NTD:		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9552	INCIDENTAL THYROID NODULE UNDER 1.0 CM NOTED REPORT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9553	PRIOR THYROID DISEASE DIAGNOSIS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9554	FINAL RPT CT CTA MRI MRA CH N U S N F U IMAG REC		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9555	DOCUMENTATION MED RSN RECOMMENDING F U IMAGING		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9556	F RPT CT CT MRI MRA CH N U S N F U IMAG NOT RCM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9557	FINAL RPT CT MRI CHEST NCK U S NO THR NOD UNDER 1.0 CM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9558	PT TREATED W BETA-LACTAM ABX AS DEFINITIVE TX		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9559	DOC MED RSN FOR NOT PRESCRIBING BETA-LACTAM ABX		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9560	PT NOT TX BETA-LACTM ABX DEFINITV TX RSN NOT GVN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9561	PATIENTS PRSC OPIATES FOR LONGER THAN 6 WEEKS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9562	PT F U EVAL AT LEAST EVRY 3 MOS DUR OPIOID TX		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
G9563	PT NO F U EVAL AT LEAST EVRY 3 MOS DUR OPIOID TX		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9573	REMISSION AT 6 MO AS DEMST 6 MO PHQ-9 SCORE UNDER 5		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9574	REMISSION AT 6 MO NOT DEMNST 6 MO PHQ-9 SCORE UNDER 5		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9577	PATIENTS PRESCRIBED OPIATES FOR LNGR THAN 6 WKS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9578	DOC SIGNED OPIOID TX AGRMNT AT LEAST ONCE DUR TX		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9579	NO DOC SIGNED OPIOID TX AGRMNT LST ONCE DUR TX		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9580	DOOR TO PUNCTURE TIME OF LESS THAN 2 HOURS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9582	DOOR TO PUNCTURE TIME OF OVER 2 HRS NO REASON GIVEN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9583	PATIENTS PRESCRIBED OPIATES FOR LNGR THAN 6 WKS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9584	PT EVAL RSK MISUSE OPIATES USING BRV VAL INSTRUM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9585	PT NOT EVAL RISK MISUSE OPIATES BRV VAL INSTRUM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9593	PED PT MIN BLUNT HEAD TRMA LW RISK PECARN RULES		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9594	PATIENT W I 24 HR MIN BLNT HD TRMA CT ORD ECP		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9595	PATIENT HAS DOC VT SH BRT COAGULOPATHY INCL TTP		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9596	PEDIATRIC PATIENT HEAD INJ OCRD OVER 24 HOURS B4 ED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9597	PEDIATRIC PT MI BLNT HEAD TRMA NOT LW RSK PECARN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9598	AA 5.5 - 5.9 CM MAX DIA CL FRMT CT MIN DIA AX CT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9599	AA 6.0 CM OR GRT MAX DIA CL FRMT CT MIN DIA AX FRMT CT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9600	SYMPTOMATIC AAAS THAT RQR URGENT EMERGENT REPAIR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9601	PATIENT D C HOME NO LATER THAN POST-OP DAY #7		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9602	PATIENT NOT D C HOME BY POST-OPERATIVE DAY #7		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9603	PATIENT SURVEY SCORE IMPRV FROM BASELINE FLW TX		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9604	PATIENT SURVEY RESULTS NOT AVAILABLE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9605	PATIENT SURV SCRE DID NOT IMPRV FROM BASE FLW TX		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9606	IORT CYSTOSCOPY PERF TO EVAL FOR LWR TRACT INJ		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9607	DOC MED RSN NOT PERF IO CYSTO IN CASE PT DEATH		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9608	IORT CYSTOSCOPY NOT PERF EVAL LWR TRACT INJURY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9609	DOCUMENTATION OF ORDER FOR ANTIPLATELET AGENTS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9610	DOC MEDICAL RSN PT REC NOT ORD ANTIPLATELET AGT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
G9611	ORDR ANTIPLATELET AGT NOT DOC PT REC RSN NOT GVN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9612	PHOTODOC 1 MORE CECAL LANDMARKS TO ESTAB CMPL EX		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9613	DOCUMENTATION OF POST-SURGICAL ANATOMY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9614	NO PHOTODOCUMENTATION CECAL LK ESTAB CMPL EXAM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9615	PREOPERATIVE ASSESSMENT DOCUMENTED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9616	DOCUMENTATION RSN NOT DOCUMENTING A PREOP ASSESS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9617	PREOPERATIVE ASSESSMENT NOT DOC RSN NOT GVN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9618	DOCUMENTATION OF SCR UTEN MALIG US AND ENDOMET SAMP		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9620	PATIENT NOT SCR UTERINE MALIG NO U S RSN NOT GVN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9621	PATIENT ID UNHLTHY ALCOHOL USER SCR AND BRF COUNS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9622	PT NOT ID UNHLTHY ALC USER SCR UNHLTHY ALC USE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9623	DOCUMENTATION MED RSN NO SCR UNHLTHY ALCOHL USE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9624	PT NOT SCR UHLTY ALCOHOL USE USING SYS SCR METH		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9625	PT SUSTND BLAD INJ SX DISC SUBS TO 1 MO POST-SX		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9626	DOCUMENTED MED RSN NOT REPORTING BLADDER INJURY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9627	PT NOT SUSTN BLAD INJ SX DISC SUB TO 1 MO PST-SX		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9628	PT SUSTN BOWEL INJ SURG DISC SUBSEQ 1 MO PST-SRG		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9629	DOCUMENTED MED RSN NOT REPORTING BOWEL INJURY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9630	PT NOT SUSTN BOWL INJ SRG DISC TO 1 MO POST-SRG		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9631	PATIENT SUSTN URETER INJ SURG DISC 1 MO POST-SUR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9632	PATIENT IS NOT ELIG E.G. GYN OTH PELV MALIG DOC		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9633	PT NOT SUSTN URETER INJ SX DISC TO 1 MO POST-SX		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9634	HEALTH-REL QOL ASSESS 2 VST AND QOL SCORE SAME IMPR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9635	HEALTH-REL QUAL OF LIFE NOT ASSESS TOOL DOC RSN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9636	HEALTH-RELATED QOL NOT ASSESS 2 VST QOL DECLINED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9637	FINAL REPORTS DOC ONE MORE DOSE REDUCTION TECH		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9638	FINAL REPORTS W O DOC 1 MORE DOSE REDUCTION TECH		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9639	MAJOR AMPUTATION OPEN SURGICAL BYPASS NOT RQR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
G9640	DOCUMENTATION OF PLANNED HYBRID STAGED PROCEDURE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9641	MAJOR AMPUTATION OPEN SURGICAL BYPASS REQUIRED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9642	CURRENT CIGARETTE SMOKERS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9643	ELECTIVE SURGERY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9644	PT ABST FROM SMOK PRI TO ANES DAY OF SURG PROC		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9645	PT DID NOT ABST FROM SMOKING PRI ANES DAY SX PCR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9646	PATIENTS WITH 90 DAY MRS SCORE OF 0 TO 2		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9647	PATIENTS MRS SCORE NOT OBTAINED 90 DAY FOLLOW-UP		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9648	PATIENTS WITH 90 DAY MRS SCORE GREATER THAN 2		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9649	PSORIASIS ASSESS TOOL DOC MEET ANY 1 SPC BNCHMRK		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9651	PSO ASSESS TOOL DOC NOT MEET ANY 1 SPEC BNCHMRK		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9654	MONITORED ANESTHESIA CARE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9655	A TRANSFER OF CARE PROTOCOL H O TOOL CHECKLIST		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9656	PT TRANS DIRECT F ANES LOC TO PACE OTH N-ICU LOC		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9658	A TRANSFER OF CARE PROT HANDOFF TOOL CHECKLIST		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9659	PT OVER 85 YRS NO HX COLORECTAL CA MED RSN COLONOSCOPI		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9660	DOCUMENTATION MED RSN COLONOSCOPY PERF PT OVER 85 YRS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9661	PT OVER 85 YEARS OF AGE WHO RECV ROUTINE COLONOSCOPY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9662	PREVIOUSLY DIAGNOSED HAVE ACTIVE DX CLIN ASCVD		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9663	ANY FASTING DIRECT LDL-C LAB TEST RSLT EQ 190 MG DL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9664	PT CURRENT STATIN TX USER RCVD ORDER STATIN TX		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9665	PT NOT CURR STATIN TX USERS NO ORDER STATIN TX		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9666	THE HI FAST DIR LDL-C LAB TEST RSLT 70 189 MG DL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9674	PATIENTS WITH CLINICAL ASCVD DIAGNOSIS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9675	PT WHO HAVE HAD F DIR LAB RSLT LDL-C EQ 190 MG DL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9676	PT AGED 40-75 YRS BEG MSR PRD TYPE 1 TYPE 2 DIAB		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9678	ONCOL CARE MODEL MEOS PMT ENHNCD CARE MGMT SRVC		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9679	ONSITE AC C TX NSG FAC RES W PNE BILLD SID-BENEF		Not Cov	No	Not Cov	No		Not Cov	No
G9680	ONSITE AC C TX NSG FAC RES W CHF BILLD SID-BENEF		Not Cov	No	Not Cov	No		Not Cov	No
G9681	ONSITE AC C TX NSG FAC RES COPD AS BILL SID-BNEF		Not Cov	No	Not Cov	No		Not Cov	No
G9682	ONSITE AC TX NSG FAC RES W SKN INF BILL SID-BNEF		Not Cov	No	Not Cov	No		Not Cov	No
G9683	ONSITE AC TX NSG FAC RES FL ELCT DO DEH BILL SID		Not Cov	No	Not Cov	No		Not Cov	No
G9684	ONSITE AC C TX NSG FAC RES UTI BILL SID-BENEF		Not Cov	No	Not Cov	No		Not Cov	No
G9685	E AND M OF BENEFICIARY'S AC CHANGE COND NSG FAC		Not Cov	Not Cov	Not Cov	Not Cov		No	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
G9687	HOSPICE SRVC PROV TO PT ANY TIME DUR MSR PR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9688	PATIENTS USING HOSPICE SRVC ANY TIME DUR MSR PR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9689	PATIENT ADM PERFORMED ELECTIVE CAROTID INTERVENT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9690	PATIENT RECV HOSPICE SRVC ANY TIME DUR MSR PR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9691	PT HAD HOSPICE SERVICES ANY TIME DUR MSR PERIOD		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9692	HOSPICE SERVICES RECEIVED PT ANY TIME DUR MSR PR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9693	PATIENT USE OF HOSPICE SRVC ANY TIME DUR MSR PR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9694	HOSPICE SRVC UTILIZED BY PT ANY TIME DUR MSR PR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9695	LONG-ACTING INHALED BRONCHODILATOR PRESCRIBED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9696	DOC MED RSN NOT PRSC LA INHALED BRONCHODILATOR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9697	DOC OF PT RSN NOT PRSC LA INHALED BRONCHODILATOR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9698	DOC SYS RSN NOT PRSC LA INHALED BRONCHODILATOR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9699	LONG-ACTING INHAL BRONCHODILATR NOT PRSC RSN NOS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9700	PATIENTS WHO USE HOSPIC SRVC ANY TIME DUR MSR PR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9701	CHILDREN TAKNG ABX 30 DAYS PRI TO DATE OF ENCNR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9702	PATIENTS WHO USE HOSPIC SRVC ANY TIME DUR MSR PR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9703	CHILDREN TAKING ABX 30 DA PRI TO DX PHARYNGITIS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9704	AJCC BREAST CANCER STAGE I T1 MIC OR T1A DOC		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9705	AJCC BREAST CANCER STAGE I T1B DOCUMENTED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9706	LOW RISK OF RECURRENCE PROSTATE CANCER		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9707	PATIENT RCV HOSPICE SRVC ANY TIME DUR MSR PERIOD		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9708	WOMEN WHO HAD BIL MASTECTOMY HX BIL MASTECTOMY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9709	HOSPICE SRVC PATIENT ANY TIME DUR MEASUREMENT PR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9710	PATIENT WAS PROV HOSPICE SRVC ANY TM DUR MSR PR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9711	PATIENTS WITH DX PAST HX TOTAL COLECTOMY CRC		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9712	DOCUMENTATION MED RSN FOR PRESCRIB DISPENS ABX		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9713	PATIENTS WHO USE HOSPICE SRVC ANY TM DUR MSR PR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9714	PATIENT USING HOSPICE SRVC ANY TIME DUR MSR PR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
G9715	PATIENTS WHO USE HOSPICE SRVC ANY TM DUR MSR PR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9716	BMI DOC OUTSD NORM LMT F U PLAN NOT CMPL DOC RSN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9717	DOCUMENTATION PT HAS ACTIVE DX DEPRESSION BD		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9718	HOSPICE SERVICES PATIENT PROV ANY TM DUR MSR PR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9719	PT IS NOT AMBUL BED RIDDN IM CONF TO CHR WC BND		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9720	HOSPICE SRVC PATIENT OCCURRED ANY TM DUR MSR PR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9721	PATIENT NOT AMBUL BED RIDDN IM CONF CHR WC BND		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9722	DOC HX RENAL FAILURE BASELINE S-CR EQ 4.0 MG DL;		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9723	HOSPICE SRVC PATIENT RECEIVD ANY TIME DUR MSR PR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9724	PATIENTS DOC ANTICOAGULANT MED OVERLAP MSR YEAR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9725	PATIENTS WHO USE HOSPICE SRVC ANY TIME DUR MSR PR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9726	PATIENT REFUSED TO PARTICIPATE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9727	PATIENT UNABLE CMPL FOTO KNEE I PROM ADM AND D C		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9728	PATIENT REFUSED TO PARTICIPATE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9729	PATIENT UNABLE TO CMPL FOTO HIP I PROM ADM AND D C		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9730	PATIENT REFUSED TO PARTICIPATE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9731	PT UNABLE CMPL FOTO FOOT ANKLE I PROM ADM AND D C		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9732	PATIENT REFUSED TO PARTICIPATE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9733	PT UNABL CMPL FOTO LUMBAR INTAKE PROM ADM AND D C		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9734	PATIENT REFUSED TO PARTICIPATE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9735	PT UNABL CMPL FOTO SHLDR INTAKE PROM ADM AND D C		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9736	PATIENT REFUSED TO PARTICIPATE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9737	PT UNABL CMPL FOTO ELB WR HAND I PROM ADM AND D C		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9738	PATIENT REFUSED TO PARTICIPATE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9739	PT UNABL TO CMPL FOTO GEN ORTH I PROM ADM AND D C		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9740	HOSPICE SRVC GIVEN TO PT ANY TIME DUR MSR PR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9741	PATIENTS WHO USE HOSPICE SRVC ANY TM DUR MSR PR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9742	PSYCHIATRIC SYMPTOMS ASSESSED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9743	PSYCHIATRIC SYMPTOMS NOT ASSESSED REASON NOS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9744	PATIENT NOT ELIGIBLE D T ACTIVE DX HYPERTENSION		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No

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			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
G9745	DOCUMENTED REASON FOR NOT SCREENING REC F U HBP		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9746	PT HAS MS PROS HEART VLV PT TSNT R CAUSE OF AF		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9747	PATIENT IS UNDERGOING PALLIATIVE DIALYSIS W CATH		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9748	PT APPRVD QUAL TPLNT PROG AND SCHED LD KID TPLNT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9749	PATIENT IS UNDERGOING PALLIATIVE DIALYSIS W CATH		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9750	PT APPRVD QUAL TPLNT PROG AND SCHED LD KID TPLNT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9751	PATIENT DIED ANY TIME DUR 24-MONTH MSR PERIOD		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9752	EMERGENCY SURGERY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9753	DOC MED RSN NOT C SRCH DICOM F IMAG W I P 12 MO		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9754	A FINDING OF AN INCIDENTAL PULMONARY NODULE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9755	DOCUMENTATION MEDICAL RSN F U IMAGING INDICATED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9756	SURGICAL PROCEDURES INCL USE OF SILICONE OIL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9757	SURGICAL PROCEDURES THAT INCL USE SILICONE OIL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9758	PT IN HOSPICE ANY TIME DURING MEASUREMENT PERIOD		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9759	HISTORY PREOPERATIVE POSTERIOR CAPSULE RUPTURE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9760	PATIENTS WHO USE HOSPC SRVC ANY TIME DUR MSR PR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9761	PATIENTS WHO USE HOSPC SRVC ANY TIME DUR MSR PR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9762	PT HAD 2 HPV 3 HPV VACC ON BTWN PT 9TH AND 13TH BD		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9763	PT DID NOT HAVE 2 3 HPV VACC ON BTW 9 AND 13 BD		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9764	PT TRTD W ORAL SYS BIOL MED FOR PSO VULGARIS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9765	DOC PT DECLINED TX CHANGE ALTER TX WERE UNAVBL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9766	PT TRNS FRM 1 INST TO ANR KN DX CVA EVAR STR TX		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9767	HOSPITALIZED PT NEWLY DX CVA CNSDR EVAR STRK TX		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9768	PATIENTS WHO UTILZ HOSPICE SVC ANY TM DUR MSR PR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9769	PATIENT HAD BMDT P 2 YR RECV OPO MED TX P 12 MO		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9770	PERIPHERAL NERVE BLOCK		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9771	AT LEAST 1 BODY TEMPERATURE MSR EQ OR GRT 35.5 DEG CELS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9772	DOC 1 MED RSN NOT ACHV AL 1 BT MSR EQ OR GRT 35.5 DEG C		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9773	AT LEAST 1 BT MSR EQ OR GRT 35.5 DEGC NOT ACHV ANES ET		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9774	PATIENTS WHO HAVE HAD A HYSTERECTOMY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
G9775	PT RECV AL 2 PRO PHARMACOL ANTI-EMTC AGT DIF CLS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9776	DOC M RSN NO RCV AL 2 PRO PHRM ANTI-EMTC DIF CLS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9777	PT NOT RCV AL 2 PRO PHARM ANTI-EMETIC AGT DF CLS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9778	PATIENTS WHO HAVE A DIAGNOSIS OF PREGNANCY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9779	PATIENTS WHO ARE BREASTFEEDING		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9780	PATIENTS WHO HAVE A DIAGNOSIS OF RHABDOMYOLYSIS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9781	DOC MED RSN NOT CUR STATIN USER RCV ORD STATIN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9782	HISTORY OF ACTV DX FAM PURE HYPERCHOLESTEROLEMIA		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9783	DOC PT DIA F DCT LDL- C R UNDER 70 MG DL AND NO STATIN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9784	PATHOLOGISTS DERMATOPATH PRVDG 2ND OPINION ON BX		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9785	PATH RPRT CUT BCC SCC SENT FROM PATH W I 7 DAYS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9786	PATH RPRT DX CUT BCC SCC NOT SENT PATH IN 7 DAYS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9787	PATIENT ALIVE AS OF THE LAST DAY OF THE MSR YEAR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9788	MOST RECENT BP LESS THAN EQUAL TO 140 90 MM HG		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9789	BLD PRESS RCD DUR INPT S ER V UC V AND PT SR BP		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9790	MOST RECNT BP IS OVER 140 90 MM HG BR NOT DOCUMENTED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9791	MOST RECENT TOBACCO STATUS IS TOBACCO FREE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9792	MOST RECENT TOBACCO STATUS IS NOT TOBACCO FREE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9793	PATIENT IS CUR ON DAILY ASPIRIN OTH ANTIPLATELET		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9794	DOC MED RSN FOR NOT ON A DAILY ASPIRIN OTH AP		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9795	PATIENT IS NOT CUR ON A DAILY ASPIRIN OTH AP		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9796	PATIENT IS CURRENTLY ON A STATIN THERAPY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9797	PATIENT IS NOT ON A STATIN THERAPY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9798	D C AMI BTW 7 1 OF YR PRI MSR YR TO 6 30 MSR PR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9799	PATIENTS MED DISPENSING EVENT INDICATR HX ASTHMA		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9800	PATIENTS WHO ARE ID HAV INTOLERNCE ALLERGY BB TX		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9801	HOS PT TRANS DIR TO A NON-AC CARE FAC FOR ANY DX		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9802	PATIENTS USE HOSPICE SRVC ANY TIME DUR MSR PR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9803	PATIENT PRESCRIBED 180-DA CRS TX BB POST D C AMI		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9804	PATIENT NOT PRSC 180-DA CRS TX BB POST DX AMI		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9805	PATIENTS WHO USE HOSPIC SRVC ANY TIME DUR MSR PR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9806	PATIENTS WHO RECEIVED CERVICAL CYTOLOGY HPV TEST		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No

This prior authorization guide applies to Medicaid, Medicare, and Marketplace.

DOS Effective 10/1/19; Posted 10/30/19

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Code	Code Description	Comments	Apple Health & IMC Medical				IMC / BHSO (Mental Health covered svcs)	Medicare	Market Place
			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
G9807	PATIENTS WHO DID NOT RECV CERV CYTOLOGY HPV TEST		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9808	ANY PT HAD NO ASTHMA CONTR MED DISP DUR MSR YR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9809	PATIENTS USE HOSPICE SRVC ANY TIME DUR MSR PR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9810	PATIENT ACHIEVED PDC AL 75PCT FOR ASTHMA CONTR MED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9811	PATIENT NOT ACHV PDC AL 75PCT ASTHMA CONTROL MED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9812	PATIENT DIED INCL ALL DEATHS OCC DUR HOS OP PER		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9813	PT DID NOT DIE W I 30 DA OF PROC DUR INDEX HOSP		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9814	DEATH OCR DUR INDEX ACUTE CARE HOSP		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9815	DEATH DID NOT OCCUR DURING INDEX ACUTE CARE HOSP		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9816	DEATH OCR AFTR D C HOSP BUT W I 30 D POST PROC		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9817	DEATH NOT OCR AFT D C HOS W I 30 DAYS POST PROC		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9818	DOCUMENTATION OF SEXUAL ACTIVITY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9819	PATIENTS WHO USE HOSPICE SVC ANY TIME DUR MSR PR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9820	DOCUMENTATION CHLAMYDIA SCREENING TST PROPER F U		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9821	NO DOCUMENTATION CHLAMYDIA SCR TEST PROPER F U		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9822	WOMEN WHO HAD EA DUR YEAR PRI TO INDEX DATE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9823	ENDOMETRIAL SAMPLE HYSTEROSCOPY BX AND RSLT DOC		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9824	ENDOMETRIAL SMP HYSTEROSCOPY BX AND RSLT NOT DOC		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9825	HER2 NEU NEGATIVE OR UNDOCUMENTED UNKNOWN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9826	PATIENT TRANS TO PRACTICE AFTER INITIATION CHEMO		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9827	HER2-TARGETED THERAPIES NOT ADM DUR INIT CRS TX		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9828	HER2-TARGETED THERAPIES ADM DUR INITIAL CRS TX		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9829	BREAST ADJUVANT CHEMOTHERAPY ADMINISTERED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9830	HER2 NEU POSITIVE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9831	AJCC STAGE AT BREAST CANCER DIAGNOSIS EQ II III		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9832	AJCC STG BC DX EQ I AND T-STG DOES NOT EQ T1 T1A T1B		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9833	PATIENT TRANSFER TO PRACTICE AFTER INI CHEMO		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9834	PATIENT HAS METASTATIC DISEASE AT DIAGNOSIS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9835	TRASTUZUMAB ADMINISTERED W I 12 MO OF DIAGNOSIS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9836	REASON FOR NOT ADMINISTERING TRASTUZUMAB DOC		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9837	TRASTUZUMAB NOT ADMINISTERED W I 12 MONTHS OF DX		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
G9838	PATIENT HAS METASTATIC DISEASE AT DIAGNOSIS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9839	ANTI-EGFR MONOCLONAL ANTIBODY THERAPY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9840	RAS GENE MUT TEST PRFRM BEF INT ANTI-EGFR MOAB		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9841	RAS GENE MUT TST NOT PRF BEF INIT ANTI-EGFR MOAB		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9842	PATIENT HAS METASTATIC DISEASE AT DIAGNOSIS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9843	RAS GENE MUTATION		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9844	PATIENT DID NOT RECV ANTI-EGFR MONOCLONAL ABO TX		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9845	PATIENT RECEIVD ANTI-EGFR MONOCLONAL ANTIBODY TX		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9846	PATIENTS WHO DIED FROM CANCER		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9847	PATIENT RECVD CHEMOTHERAPY LAST 14 DAYS OF LIFE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9848	PATIENT DID NOT RECV CHEMO LAST 14 DAYS OF LIFE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9849	PATIENTS WHO DIED FROM CANCER		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9850	PATIENT HAD OVER 1 ED VST IN THE LST 30 DAYS OF LIFE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9851	PATIENT HAD 1 OR LESS ED VST IN THE LAST 30 DA OF LIFE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9852	PATIENTS WHO DIED FROM CANCER		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9853	PATIENT ADM TO ICU IN THE LAST 30 DAYS OF LIFE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9854	PATIENT WAS NOT ADM TO ICU IN LAST 30 DA OF LIFE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9855	PATIENTS WHO DIED FROM CANCER		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9856	PATIENT WAS NOT ADMITTED TO HOSPICE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9857	PATIENT ADMITTED TO HOSPICE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9858	PATIENT ENROLLED IN HOSPICE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9859	PATIENTS WHO DIED FROM CANCER		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9860	PATIENT SPENT LESS THAN 3 DAYS IN HOSPICE CARE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9861	PATIENT SPENT OR MORE EQUAL TO 3 DAYS IN HOSPICE CARE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9862	DOC MED RSN FOR NOT RECOMMEND AL 10 YR F U INTVL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9868	RECEIPT AND ANALYSIS REMT ASYNC IMAGES UNDER 10 MINS		Not Cov	Not Cov	Not Cov	Not Cov		No	No
G9869	RECEIPT AND ANALYSIS REMOTE ASYNC IMAGES 10-20 MIN		Not Cov	Not Cov	Not Cov	Not Cov		No	No
G9870	RECEIPT AND ANALYSIS REMOTE ASYNC IMAGES 20 OR GRT MINS		Not Cov	Not Cov	Not Cov	Not Cov		No	No
G9873	1ST MDPP C SESS ATD MDPP BENEFICIARY UND MDPP EM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9874	4 TOTAL MDPP CORE SES ATD MDPP BENEF UND MDPP EM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9875	9 TOTAL MDPP C SESS ATD MDPP BENEF UND MDPP EM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9876	2 MDPP C MS ATD MDPP BENEF IN MO 7-9 UND MDPP EM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
G9877	2 MDPP C MS ATD MDPP BENEF MO 10-12 UND MDPP EM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9878	2 MDPP C MS ATD MDPP BENEF IN MO 7-9 UND MDPP EM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9879	2 MDPP C MS ATD MDPP BENEF MO 10-12 UND MDPP EM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9880	MDPP BNF ACHV AL 5PCT WL BW MO 1-12 MDPP SP UND EM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9881	MDPP BNF ACHV AL 9PCT WL B WT MO 1-24 UND MDPP EM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9882	2 MDPP ONGOING MS ATD BNF MO 13-15 UND MDPP EM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9883	2 MDPP ONGO MS ATD MDPP BNF MO 16-18 UND MDPP EM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9884	2 MDPP ONGO MS ATD MDPP BNF MO 19-21 UND MDPP EM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9885	2 MDPP ONGO MS ATD MDPP BNF MO 22-24 UND MDPP EM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9890	BRDG PMT:1ST MDPP CS C OM S SPL BNF MO 1-24 EM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9891	MDPP SESS RPT AS LN-I ON CLM FOR PAYABL MDPP EM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9892	DOC PT REASON NOT PERFORMED DILATED MACULAR EXAM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9893	DILATED MACULAR EX WAS NOT PERFORMED REASON NOS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9894	ANDROGEN DEP TX RX ADMN COMB EXT BEAM RT TO PROS		No	No	Not Cov	No		Not Cov	No
G9895	DOC M RSN NOT RX ADM AD TX COMB EXT BEAM RT PROS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9896	DOCUMENT PT RSN NOT RX ADMN AD TX COM EBRT PROS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9897	PTS NOT RX ADM AD TX COM EBRT PROS RSN NOT GVN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9898	PT AGE 65 OR GRT INST SNP RESID LTC DUR MSR PER		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9899	SCR DX FILM DIGITAL DBT MAMMO RESULTS DOC AND REV SCR DX F DGTL DBT MAMMO RSLT NOT DOC AND REV RSN NOS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9900	PT AGE 65 OR GRT INST SNP RESID LTC DUR MSR PER		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9901	PATIENT SCR TOBACCO USE AND ID AS TOBACCO USER		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9902	PATIENT SCR TOBACCO USE AND ID AS TOB NON-USER		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9903	DOCUMENTATION MED RSN FOR NOT SCR TOBACCO USE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9904	PATIENT NOT SCREENED FOR TOBACCO USE RSN NOT GVN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9905	PT ID TOB USER RECV TOB CESSATION INTERVENTION		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9906			Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
G9907	DOC MED RSN NOT PROV TOBACCO CESS INTERVENTION		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9908	PT ID TOB USER NOT RECV TOB CESS INT RSN NOT GVN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9909	DOC MED RSN NOT PROV TOB CESS INT IDENT TOB USER		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9910	PT AGE 65 OR GRT INST SNP RES LTC ANY TM DUR MSR PER		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9911	CLINIC NODE NEG IBC BEF AFT NEOADJUVANT SYS TX		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9912	HBV STS ASSESS AND RSLT INTERP PRIOR ANTI-TNF TX		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9913	HBV STS ASSESS INTRP PRI ANTI-TNF TX RSN NOT GVN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9914	PATIENT RECEIVING AN ANTI-TNFAGENT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9915	NO RECORD OF HBV RESULTS DOCUMENTED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9916	FUNC STATUS PERFORMED ONCE IN THE LAST 12 MONTHS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9917	DOCUMENTATION MEDICAL REASON NOT PERF FUNC STS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9918	FUNCTIONAL STATUS NOT PERFORMED REASON NOS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9919	SCREENING PERF AND POS AND PROVISION RECOMMENDATIONS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9920	SCREENING PERFORMED AND NEGATIVE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9921	NO SCR PRFRM PR SCR PRFRM POS SCR NO REC AND RSN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9922	SAFETY CNCRNS SCR PROV AND IF POS THEN DOC MIT REC		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9923	SAFETY CONCERNS SCREEN PROVIDED AND NEGATIVE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9924	DOC MED RSN NOT PROV SAF CNCRN REC REF POS SCR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9925	SAFETY CONCERNS SCREENING NOT PROVIDED RSN NOS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9926	SAFETY CONCERNS SCR POS SCR W O PROV MIT REC		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9927	DOC SY RSN NOT RX WF ANR FDA-APV AC D T PT IN CT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9928	WARFARIN ANR FDA-APV AC NOT PRSC REASON NOT GVN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9929	PATIENT WITH TRANSIENT OR REVERSIBLE CAUSE OF AF		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9930	PATIENTS WHO ARE RECEIVING COMFORT CARE ONLY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9931	DOCUMENTATION OF CHA2DS2-VASC RISK SCORE OF 0 1		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9932	DOC PT RSN NOT HAVING REC NEG MANAGED POS TB SCR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9933	ADENOMA COLORECTAL CANCER DETECTED DUR SCR COLO		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9934	DO NEO D ONLY DX TRAD SERRATED AD SS POLYP SSA		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9935	ADENOMA CRC NOT DETECTED DURING SCR COLONOSCOPY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
G9936	SURV COLO-PH CLNC PLYPS CC OTH MAL NEO R RSJ AND A		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9937	DIAGNOSTIC COLONOSCOPY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9938	PT AGE 65 OR GRT INST SNP RES LTC ANY TM DUR MSR PER		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9939	PATHOLOGISTS DERMATOPATH SAME CLINICIAN PRFRM BX		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9940	DOCUMENTATION MEDICAL REASON FOR NOT ON A STATIN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9941	BACK PAIN MSR BY VAS W I 3 MO PRE AND AT 3 MO P O		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9942	PT ADD SP PCR PERF SAME DATE LUM DISCECT LAMINOT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9943	BP NOT MSR BY VAS W I 3 MOS PRE AND AT 3 MOS P O		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9944	BACK PAIN MSR BY VAS W I 3 MO PRE AND AT 1 YR P O		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9945	PT CANCER FX INF REL TO LUMB SP PT HAD IDIO CS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9946	BP NOT MSR BY VAS W I 3 MOS PREOP AND AT 1 YR P O		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9947	LEG PAIN MSR BY VAS W I 3 MOS PRE AND AT 3 MOS P O		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9948	PT HAD ADD SPINE PRC PRFRM SD L DSCECT LAMINOT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9949	LEG PN NOT MSR BY VAS W I 3 MO PRE AND AT 3 MO P O		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9954	PATIENT EXHIBITS 2 OR GRT RISK FAC POST-OP VOMITING		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9955	CASES WHICH AN INHALATION ANES USED ONLY FOR IND		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9956	PATIENT RECEIVED COMBINATION THERAPY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9957	DOCUMENTATION MEDICAL REASON NOT RECV COMB TX		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9958	PATIENT DID NOT RECEIVE COMBINATION THERAPY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9959	SYSTEMIC ANTIMICROBIALS NOT PRESCRIBED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9960	DOC MED RSN PRESCRIBING SYSTEMIC ANTIMICROBIALS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9961	SYSTEMIC ANTIMICROBIALS PRESCRIBED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9962	EMBO EPT DOC SEP EA EMBO VESSEL AND OA ANGIO EMBO		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9963	EMB EPT NOT DOC SEP EMB VESS OA AG EMB NOT PERF		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9964	PT RECV AT LEAST 1 WCV W PCP DUR PRFRM PERIOD		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9965	PT DID NOT RECV AT LEAST 1 WCV PCP DUR PRFRM PER		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9966	CHLDRN WHO WERE SCR RISK DVLP BEHAV AND SOC DLA		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9967	CHDRN NOT SCR FOR RISK DVLP BEHAV AND SOC DLA		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
G9968	PT REFERRED ANR PROV SPEC DUR PRFRM PER		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9969	PROV REF PT ANR PROV RECV REPORT FRM PROV PT REF		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9970	PROV REF PT ANR PROV NOT RECV RPRT PROV PT REF		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9974	DILATED MACULAR EXAM PERFORMED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9975	DOC MED RSN FOR NOT PRFRM A DILATED MACULAR EXAM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9976	DOC PT RSN FOR NOT PRFRM A DILATED MACULAR EXAM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9977	DILATED MACULAR EXAM WAS NOT PRFRM REASON NOS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9978	RMT IH VST E M NP MCR-APVD BPCI ADV EOC TYP 10 M		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9979	RMT IH VST E M NP MCR-APVD BPCI ADV EOC TYP 20 M		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9980	RMT IH VST E M NP MCR-APVD BPCI ADV EOC TYP 30 M		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9981	RMT IH VST E M NP MCR-APVD BPCI ADV EOC TYP 45 M		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9982	RMT IH VST E M NP MCR-APVD BPCI ADV EOC TYP 60 M		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9983	RMT IH VST E M EST PT MCR-APVD BPCI ADV TYP 10 M		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9984	RMT IH VST E M EST PT MCR-APVD BPCI ADV TYP 15 M		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9985	RMT IH VST E M EST PT MCR-APVD BPCI ADV TYP 25 M		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9986	RMT IH VST E M EST PT MCR-APVD BPCI ADV TYP 40 M		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
G9987	BPCI ADV MOD HOME VISIT PT ASMT PERF CLIN STAFF		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
H0001	ALCOHOL AND OR DRUG ASSESSMENT	PA Req BHSO / FIMC POS 52	Not Cov	Not Cov	Not Cov	Not Cov	No	Not Cov	No
H0002	BHVAL HEALTH SCR DETERM ELIGBLITY ADMIS TX PROGM	PA Req BHSO / FIMC POS 52	Not Cov	Not Cov	Not Cov	Not Cov	No	Not Cov	No
H0003	ALCOHL AND RX SCR; LAB ANALY PRESENC ALCOHL AND RX	PA Req BHSO / FIMC POS 52	Not Cov	Not Cov	Not Cov	Not Cov	No	Not Cov	No
H0004	BEHAVIORAL HEALTH CNSL AND THERAPY PER 15 MINUTES	PA Req BHSO / FIMC POS 52	Not Cov	Not Cov	Not Cov	Not Cov	No	Not Cov	No
H0005	ALCOHOL AND OR DRUG SERVICES; GROUP CNSL CLINICIAN	PA Req BHSO / FIMC POS 52	Not Cov	Not Cov	Not Cov	Not Cov	No	Not Cov	No
H0006	ALCOHOL AND OR DRUG SERVICES; CASE MANAGEMENT	PA Req BHSO / FIMC POS 52	Not Cov	Not Cov	Not Cov	Not Cov	No	Not Cov	No
H0007	ALCOHOL AND OR DRUG SERVICES; CRISIS INTERVENTION	PA Req BHSO / FIMC POS 52	Not Cov	Not Cov	Not Cov	Not Cov	No	Not Cov	No
H0008	ALCOHOL AND OR DRUG SRVC; SUB-ACUTE DTOX HOSP IP	PA Req BHSO / FIMC POS 52, 55	Not Cov	Not Cov	Not Cov	Not Cov	Yes	Not Cov	No
H0009	ALCOHOL AND OR DRUG SERVICES; ACUTE DTOX HOSP IP	PA Req BHSO / FIMC POS 52, 55	Not Cov	Not Cov	Not Cov	Not Cov	Yes	Not Cov	No
H0010	ALCOHOL AND DRUG SRVC; SUB-ACUTE DTOX RES PROG IP	PA Req BHSO / FIMC POS 52, 55	Not Cov	Not Cov	Not Cov	Not Cov	Yes	Not Cov	Yes
H0011	ALCOHOL AND DRUG SERVICES; ACUTE DTOX RES PROG IP	PA Req BHSO / FIMC POS 52, 55	Not Cov	Not Cov	Not Cov	Not Cov	Yes	Not Cov	Yes
H0012	ALCOHOL AND DRUG SRVC; SUB-ACUTE DTOX RES PROG OP	PA Req BHSO / FIMC POS 52, 55	Not Cov	Not Cov	Not Cov	Not Cov	Yes	Not Cov	Yes
H0013	ALCOHOL AND DRUG SERVICES; ACUTE DTOX RES PROG OP	PA Req BHSO / FIMC POS 52, 55	Not Cov	Not Cov	Not Cov	Not Cov	Yes	Not Cov	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
H0014	ALCOHOL AND OR DRUG SERVICES; AMB DETOXIFICATION		Not Cov	Not Cov	Not Cov	Not Cov	No	Not Cov	No
H0015	ALCOHL AND RX SRVC;INTENSV OP;CRISIS INTRVN AND ACTV TX		Not Cov	Not Cov	Not Cov	Not Cov	No	Not Cov	No
H0016	ALCOHOL AND OR DRUG SERVICES; MEDICAL SOMATIC		Not Cov	Not Cov	Not Cov	Not Cov	No	Not Cov	No
H0017	BEHAVIORAL HEALTH; RES W O ROOM AND BOARD PER DIEM		Not Cov	Not Cov	Not Cov	Not Cov	Yes	Not Cov	Yes
H0018	BHVAL HEALTH; SHORT-TERM RES W O ROOM AND BOARD-DIEM	PA Req BHSO / FIMC POS 52, 55	Not Cov	Not Cov	Not Cov	Not Cov	Yes	Not Cov	Yes
H0019	BHVAL HEALTH; LONG-TERM RES W O ROOM AND BOARD-DIEM	PA Req BHSO / FIMC POS 52, 55	Not Cov	Not Cov	Not Cov	Not Cov	Yes	Not Cov	Yes
H0020	ALCOHL AND OR RX SRVC; METHADONE ADMIN AND OR SERVICE		Not Cov	Not Cov	Not Cov	Not Cov	No	Not Cov	No
H0021	ALCOHOL AND OR DRUG TRAINING SERVICE		Not Cov	Not Cov	Not Cov	Not Cov	No	Not Cov	No
H0022	ALCOHOL AND OR DRUG INTERVENTION SERVICE		Not Cov	Not Cov	Not Cov	Not Cov	No	Not Cov	No
H0023	BEHAVIORAL HEALTH OUTREACH SERVICE		Not Cov	Not Cov	Not Cov	Not Cov	No	Not Cov	No
H0024	BEHAVIORAL HEALTH PREV INFORM DISSEMIN SERVICE		Not Cov	Not Cov	Not Cov	Not Cov	No	Not Cov	No
H0025	BEHAVIORAL HEALTH PREVENTION EDUCATION SERVICE		Not Cov	Not Cov	Not Cov	Not Cov	No	Not Cov	No
H0026	ALCOHL AND RX PREVENTION PROCESS SERVICE CMTY-BASED		Not Cov	Not Cov	Not Cov	Not Cov	No	Not Cov	No
H0027	ALCOHOL AND OR DRUG PREVENTION ENVIR SERVICE		Not Cov	Not Cov	Not Cov	Not Cov	No	Not Cov	No
H0028	ALCOHL AND RX PREV PROB ID AND REF SRVC NOT W ASSESS		Not Cov	Not Cov	Not Cov	Not Cov	No	Not Cov	No
H0029	ALCOHOL AND OR DRUG PREVENTION ALTERNATIVES SERVICE		Not Cov	Not Cov	Not Cov	Not Cov	No	Not Cov	No
H0030	BEHAVIORAL HEALTH HOTLINE SERVICE		Not Cov	Not Cov	Not Cov	Not Cov	No	Not Cov	No
H0031	MENTAL HEALTH ASSESSMENT BY NON-PHYSICIAN		Not Cov	Not Cov	Not Cov	Not Cov	No	Not Cov	Yes
H0032	MENTAL HEALTH SERVICE PLAN DVLP NON-PHYSICIAN		Not Cov	Not Cov	Not Cov	Not Cov	No	Not Cov	Yes
H0033	ORAL MEDICATION ADMIN DIRECT OBSERVATION		Not Cov	Not Cov	Not Cov	Not Cov	No	Not Cov	No
H0034	MEDICATION TRAINING AND SUPPORT PER 15 MINUTES		Not Cov	Not Cov	Not Cov	Not Cov	No	Not Cov	No
H0035	MENTAL HEALTH PARTIAL HOSP TX UNDER 24 HOURS		Not Cov	Not Cov	Not Cov	Not Cov	NCB	Not Cov	Yes
H0036	CMTY PSYC SUPPORTIVE TX FCE-TO-FCE PER 15 MIN		Not Cov	Not Cov	Not Cov	Not Cov	No	Not Cov	No
H0037	COMMUNITY PSYC SUPPORTIVE TX PROGM PER DIEM		Not Cov	Not Cov	Not Cov	Not Cov	No	Not Cov	No
H0038	SELF-HELP PEER SERVICES PER 15 MINUTES		Not Cov	Not Cov	Not Cov	Not Cov	No	Not Cov	No
H0039	ASSERTIVE COMMUNITY TX FACE-TO-FACE PER 15 MIN		Not Cov	Not Cov	Not Cov	Not Cov	No	Not Cov	No
H0040	ASSERTIVE COMMUNITY TREATMENT PROGRAM PER DIEM		Not Cov	Not Cov	Not Cov	Not Cov	No	Not Cov	No
H0041	FOSTER CARE CHILD NON-THERAPEUTIC PER DIEM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
H0042	FOSTER CARE CHILD NON-THERAPEUTIC PER MONTH		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
H0043	SUPPORTED HOUSING PER DIEM		Not Cov	Not Cov	Not Cov	Not Cov	No	Not Cov	Not Cov
H0044	SUPPORTED HOUSING PER MONTH		Not Cov	Not Cov	Not Cov	Not Cov	No	Not Cov	Not Cov
H0045	RESPIRE CARE SERVICES NOT IN THE HOME PER DIEM		Not Cov	Not Cov	Not Cov	Not Cov	No	Not Cov	No
H0046	MENTAL HEALTH SERVICES NOT OTHERWISE SPECIFIED		Not Cov	Not Cov	Not Cov	Not Cov	No	Not Cov	Yes

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
H0047	ALCOHOL AND OR OTHER DRUG ABUSE SERVICES NOS		Not Cov	Not Cov	Not Cov	Not Cov	No	Not Cov	No
H0048	ALC AND OTH RX TST: CLCT AND HNDLING ONLY OTH THAN BLD		Not Cov	Not Cov	Not Cov	Not Cov	No	Not Cov	No
H0049	ALCOHOL AND OR DRUG SCREENING		Not Cov	Not Cov	Not Cov	Not Cov	No	Not Cov	No
H0050	ALCOHOL AND OR DRUG SRVC BRF INTERVENTN PER 15 MIN		Not Cov	Not Cov	Not Cov	Not Cov	No	Not Cov	No
H1000	PRENATAL CARE AT-RISK ASSESSMENT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
H1001	PRENATAL CARE AT-RISK ENHNCD SRVC; ANTPRTM MGMT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
H1002	PRENATAL CARE AT-RISK ENHNCD SRVC;CARE COORD		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
H1003	PRENATAL CARE AT-RISK ENHNCD SERVICE; EDUCATION		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
H1004	PRENATAL CARE AT-RISK ENHNCD SRVC; F U HOM VISIT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
H1005	PRENATAL CARE AT-RISK ENHANCED SERVICE PACKAGE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
H1010	NON-MEDICAL FAM PLANNING EDUCATION PER SESSION		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
H1011	FAM ASSESS LIC BHVAL HLTH PROF STATE DEFINED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
H2000	COMPREHENSIVE MULTIDISCIPLINARY EVALUATION		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
H2001	REHABILITATION PROGRAM PER 1 2 DAY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
H2010	COMPREHENSIVE MEDICATION SERVICES PER 15 MINUTES		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
H2011	CRISIS INTERVENTION SERVICE PER 15 MINUTES		Not Cov	Not Cov	Not Cov	Not Cov	No	Not Cov	No
H2012	BEHAVIORAL HEALTH DAY TREATMENT PER HOUR		Not Cov	Not Cov	Not Cov	Not Cov	No	Not Cov	Yes
H2013	PSYCHIATRIC HEALTH FACILITY SERVICE PER DIEM		Not Cov	Not Cov	Not Cov	Not Cov	No	Not Cov	Yes
H2014	SKILLS TRAINING AND DEVELOPMENT PER 15 MINUTES		Not Cov	Not Cov	Not Cov	Not Cov	No	Not Cov	Yes
H2015	COMP COMMUNITY SUPPORT SERVICES PER 15 MINUTES		Not Cov	Not Cov	Not Cov	Not Cov	No	Not Cov	Yes
H2016	COMP COMMUNITY SUPPORT SERVICES PER DIEM		Not Cov	Not Cov	Not Cov	Not Cov	No	Not Cov	Yes
H2017	PSYCHOSOCIAL REHAB SERVICES PER 15 MINUTES		Not Cov	Not Cov	Not Cov	Not Cov	No	Not Cov	Yes
H2018	PSYCHOSOCIAL REHABILITATION SERVICES PER DIEM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Yes
H2019	THERAPEUTIC BEHAVIORAL SERVICES PER 15 MINUTES		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Yes
H2020	THERAPEUTIC BEHAVIORAL SERVICES PER DIEM	ABA Cov COE	No	No	Not Cov	No		Not Cov	No
H2021	COMMUNITY-BASED WRAP-AROUND SERVICES PER 15 MIN		Not Cov	Not Cov	Not Cov	Not Cov	No	Not Cov	No
H2022	COMMUNITY-BASED WRAP-AROUND SERVICES PER DIEM		Not Cov	Not Cov	Not Cov	Not Cov	No	Not Cov	No
H2023	SUPPORTED EMPLOYMENT PER 15 MINUTES		Not Cov	Not Cov	Not Cov	Not Cov	No	Not Cov	Not Cov
H2024	SUPPORTED EMPLOYMENT PER DIEM		Not Cov	Not Cov	Not Cov	Not Cov	No	Not Cov	Not Cov
H2025	ONGOING SUPPORT MAINTAIN EMPLOYMENT PER 15 MIN		Not Cov	Not Cov	Not Cov	Not Cov	No	Not Cov	Not Cov
H2026	ONGOING SUPPORT TO MAINTAIN EMPLOYMENT PER DIEM		Not Cov	Not Cov	Not Cov	Not Cov	No	Not Cov	Not Cov
H2027	PSYCHOEDUCATIONAL SERVICE PER 15 MINUTES		Not Cov	Not Cov	Not Cov	Not Cov	No	Not Cov	No
H2028	SEXUAL OFFENDER TREATMENT SERVICE PER 15 MINUTES		Not Cov	Not Cov	Not Cov	Not Cov	No	Not Cov	Not Cov
H2029	SEXUAL OFFENDER TREATMENT SERVICE PER DIEM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
H2030	MENTAL HEALTH CLUBHOUSE SERVICES PER 15 MINUTES		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
H2031	MENTAL HEALTH CLUBHOUSE SERVICES PER DIEM		Not Cov	Not Cov	Not Cov	Not Cov	No	Not Cov	Not Cov
H2032	ACTIVITY THERAPY PER 15 MINUTES		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
H2033	MULTISYSTEMIC THERAPY JUVENILES PER 15 MINUTES		Not Cov	Not Cov	Not Cov	Not Cov	No	Not Cov	No
H2034	ALCOHOL AND OR DRUG ABS HALFWAY HOUSE SRVC PER DIEM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
H2035	ALCOHOL AND OR OTH DRUG TREATMENT PROGRAM PER HOUR		Not Cov	Not Cov	Not Cov	Not Cov	No	Not Cov	No
H2036	ALCOHOL AND OR OTH DRUG TREATMENT PROGRAM PER DIEM		Not Cov	Not Cov	Not Cov	Not Cov	No	Not Cov	No
H2037	DVLPMENTL DLAY PREV ACTV DPND CHLD CLIENT 15 MIN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
J0120	INJECTION TETRACYCLINE UP TO 250 MG		No	No	Not Cov	No		No	No
J0121	INJECTION OMADACYCLINE 1 MG		Yes	Yes	Not Cov	Yes		TBD	TBD
J0122	INJECTION ERAVACYCLINE 1 MG		Yes	Yes	Not Cov	Yes		TBD	TBD
J0129	INJ ABATACEPT 10 MG USED MEDICARE ADM SUPV PHYS		Yes	Yes	Not Cov	Yes		Yes	Yes
J0130	INJECTION ABCIXIMAB 10 MG		No	No	Not Cov	No		No	No
J0131	INJECTION ACETAMINOPHEN 10 MG		No	No	Not Cov	No		No	No
J0132	INJECTION ACETYLCYSTEINE 100 MG		No	No	Not Cov	No		No	No
J0133	INJECTION ACYCLOVIR 5 MG		No	No	Not Cov	No		No	No
J0135	INJECTION ADALIMUMAB 20 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J0153	INJECTION ADENOSINE 1 MG		No	No	Not Cov	No		No	No
J0171	INJECTION ADRENALIN EPINEPHRINE 0.1 MG		No	No	Not Cov	No		No	No
J0178	INJECTION AFLIBERCEPT 1 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J0180	INJECTION AGALSIDASE BETA 1 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J0185	INJECTION APREPITANT 1 MG		Yes	Yes	Not Cov	Yes		No	Yes
J0190	INJECTION BIPERIDEN LACTATE PER 5 MG		No	No	Not Cov	No		No	No
J0200	INJECTION ALATROFLOXACIN MESYLATE 100 MG		No	No	Not Cov	No		No	No
J0202	INJECTION ALEMTUZUMAB 1 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J0205	INJECTION ALGLUCERASE PER 10 UNITS		Yes	Yes	Not Cov	Yes		Yes	Yes
J0207	INJECTION AMIFOSTINE 500 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J0210	INJECTION METHYLDOPATE HCL UP TO 250 MG		No	No	Not Cov	No		No	No
J0215	INJECTION ALEFACEPT 0.5 MG		No	No	Not Cov	No		No	No
J0220	INJECTION ALGLUCOSIDASE ALFA 10 MG NOS		Yes	Yes	Not Cov	Yes		Yes	Yes
J0221	INJECTION ALGLUCOSIDASE ALFA LUMIZYME 10 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J0222	INJECTION PATISIRAN 0.1 MG		Yes	Yes	Not Cov	Yes		TBD	TBD
J0256	INJECTION ALPHA 1-PROTASE INHIBITOR NOS 10 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J0257	INJECTION ALPHA 1 PROTEINASE INHIBITOR 10 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J0270	INJECTION ALPROSTADIL 1.25 MCG		Not Cov	No	Not Cov	No		No	Not Cov
J0275	ALPROSTADIL URETHRAL SUPPOSITORY		Not Cov	No	Not Cov	No		No	Not Cov
J0278	INJECTION AMIKACIN SULFATE 100 MG		No	No	Not Cov	No		No	No
J0280	INJECTION AMINOPHYLLIN UP TO 250 MG		No	No	Not Cov	No		No	No
J0282	INJECTION AMIODARONE HYDROCHLORIDE 30 MG		No	No	Not Cov	No		No	No
J0285	INJECTION AMPHOTERICIN B 50 MG		No	No	Not Cov	No		No	No
J0287	INJECTION AMPHOTERICIN B LIPID COMPLEX 10 MG		Yes	Yes	Not Cov	Yes		Yes	Yes

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			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
J0288	INJ AMPHOTERICIN B CHOLESTRYL SULFAT CMLPX 10 MG		No	No	Not Cov	No		No	No
J0289	INJECTION AMPHOTERICIN B LIPOSOME 10 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J0290	INJECTION AMPICILLIN SODIUM 500 MG		No	No	Not Cov	No		No	No
J0291	INJECTION PLAZOMICIN 5 MG		No	No	Not Cov	No		TBD	TBD
J0295	INJECTION AMPCLLN SODIUM SULBACTAM SODIUM-1.5 G		No	No	Not Cov	No		No	No
J0300	INJECTION AMOBARBITAL UP TO 125 MG		No	No	Not Cov	No		No	No
J0330	INJECTION SUCCINYLCHOLINE CHLORIDE UP TO 20 MG		No	No	Not Cov	No		No	No
J0348	INJECTION ANIDULAFUNGIN 1 MG		No	No	Not Cov	No		No	No
J0350	INJECTION ANISTREPLASE PER 30 UNITS		No	No	Not Cov	No		No	No
J0360	INJECTION HYDRALAZINE HCL UP TO 20 MG		No	No	Not Cov	No		No	No
J0364	INJECTION APOMORPHINE HYDROCHLORIDE 1 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J0365	INJECTION APROTININ 10000 KIU		No	No	Not Cov	No		No	No
J0380	INJECTION METARAMINOL BITARTRATE PER 10 MG		No	No	Not Cov	No		No	No
J0390	INJECTION CHLOROQUINE HCL UP TO 250 MG		No	No	Not Cov	No		No	No
J0395	INJECTION ARBUTAMINE HCL 1 MG		No	No	Not Cov	No		No	No
J0400	INJECTION ARIPIRAZOLE INTRAMUSCULAR 0.25 MG		No	No	Not Cov	No		No	No
J0401	INJECTION ARIPIRAZOLE EXTENDED RELEASE 1 MG		No	No	Not Cov	No		No	No
J0456	INJECTION AZITHROMYCIN 500 MG		No	No	Not Cov	No		No	No
J0461	INJECTION ATROPINE SULFATE 0.01 MG		No	No	Not Cov	No		No	No
J0470	INJECTION DIMERCAPROL PER 100 MG		No	No	Not Cov	No		No	No
J0475	INJECTION BACLOFEN 10 MG		No	No	Not Cov	No		No	No
J0476	INJECTION BACLOFEN 50 MCG FOR INTRATHECAL TRIAL		No	No	Not Cov	No		No	No
J0480	INJECTION BASILIXIMAB 20 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J0485	INJECTION BELATACEPT 1 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J0490	INJECTION BELIMUMAB 10 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J0500	INJECTION DICYCLOMINE HCL UP TO 20 MG		No	No	Not Cov	No		No	No
J0515	INJECTION BENZTROPINE MESYLATE PER 1 MG		No	No	Not Cov	No		No	No
J0517	INJECTION BENRALIZUMAB 1 MG		Yes	Yes	Not Cov	Yes		No	Yes
J0520	INJ BETHANECHOL CHLORIDE UP TO 5 MG		No	No	Not Cov	No		No	No
J0558	INJECTION PCN G BENZ PCN G PROCAINE 100000 UNITS		No	No	Not Cov	No		No	No
J0561	INJECTION PENICILLIN G BENZATHINE 100000 UNITS		No	No	Not Cov	No		No	No
J0565	INJECTION BEZLOTOXUMAB 10 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J0567	INJECTION CERLIPONASE ALFA 1 MG	Bill through DSHS	Not Cov	Not Cov	Not Cov	Not Cov		No	Yes
J0570	BUPRENORPHINE IMPLANT 74.2 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J0571	BUPRENORPHINE ORAL 1 MG		Not Cov	No	Not Cov	No		Not Cov	No
J0572	BUPRENORPHINE NALOXONE ORAL UNDER EQ TO 3 MG BPN		Not Cov	No	Not Cov	No		Not Cov	No
J0573	BUPRENORPHINE NALOXONE ORAL OVER 3 MG BUT UNDER EQ 6 MG		Not Cov	No	Not Cov	No		Not Cov	No
J0574	BUPRENORPHINE NLX ORAL OVER 6 MG BUT UNDER EQ TO 10 MG		Not Cov	No	Not Cov	No		Not Cov	No
J0575	BUPRENORPHINE NALOXONE ORAL OVER 10 MG		Not Cov	No	Not Cov	No		Not Cov	No

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Code	Code Description	Comments	Apple Health & IMC Medical				IMC / BHSO (Mental Health covered svcs)	Medicare	Market Place
			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
J0583	INJECTION BIVALIRUDIN 1 MG		No	No	Not Cov	No		No	No
J0584	INJECTION BUROSUMAB-TWZA 1 MG	Bill through DSHS	Not Cov	Not Cov	Not Cov	Not Cov		No	Yes
J0585	BOTULINUM TOXIN TYPE A PER UNIT		Yes	Yes	Not Cov	Yes		Yes	Yes
J0586	INJECTION ABOBOTULINUMTOXINA 5 UNITS		Yes	Yes	Not Cov	Yes		Yes	Yes
J0587	INJECTION RIMABOTULINUMTOXINB 100 UNITS		Yes	Yes	Not Cov	Yes		Yes	Yes
J0588	INJECTION INCOBOTULINUMTOXIN A 1 UNIT		Yes	Yes	Not Cov	Yes		Yes	Yes
J0592	INJECTION BUPRENORPHINE HYDROCHLORIDE 0.1 MG		No	No	Not Cov	No		No	No
J0593	INJECTION LANADELUMAB-FLYO 1 MG		Yes	Yes	Not Cov	Yes		TBD	TBD
J0594	INJECTION BUSULFAN 1 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J0595	INJECTION BUTORPHANOL TARTRATE 1 MG		No	No	Not Cov	No		No	No
J0596	INJECTION C1 ESTERASE INHIBITOR RUCONEST 10 U		Yes	Yes	Not Cov	Yes		Yes	Yes
J0597	INJ C-1 ESTERASE INHIB HUMN BERINERT 10 UNITS		Yes	Yes	Not Cov	Yes		Yes	Yes
J0598	INJECTION C1 ESTERASE INHIBITOR CINRYZE 10 UNITS		Yes	Yes	Not Cov	Yes		Yes	Yes
J0599	INJECTION C-1 ESTERASE INHIBITOR 10 UNITS		Yes	Yes	Not Cov	Yes		No	Yes
J0600	INJECTION EDETATE CALCIUM DISODIUM UP TO 1000 MG		No	No	Not Cov	No		No	No
J0604	CINACALCET ORAL 1 MG		Not Cov	Yes	Not Cov	Yes		Yes	Yes
J0606	INJECTION ETELCALCETIDE 0.1 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J0610	INJECTION CALCIUM GLUCONATE PER 10 ML		No	No	Not Cov	No		No	No
J0620	INJ CALCM GLYCEROPHOSPHATE AND CALCM LACTAT-10 ML		No	No	Not Cov	No		No	No
J0630	INJECTION CALCITONIN-SALMON UP TO 400 UNITS		No	No	Not Cov	No		No	No
J0636	INJECTION CALCITRIOL 0.1 MCG		No	No	Not Cov	No		No	No
J0637	INJECTION CASPOFUNGIN ACETATE 5 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J0638	INJECTION CANAKINUMAB 1 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J0640	INJECTION LEUCOVORIN CALCIUM PER 50 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J0641	INJECTION LEVOLEUCOVORIN CALCIUM 0.5 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J0670	INJECTION MEPIVACAINE HCL PER 10 ML		No	No	Not Cov	No		No	No
J0690	INJECTION CEFAZOLIN SODIUM 500 MG		No	No	Not Cov	No		No	No
J0692	INJECTION CEFEPIME HYDROCHLORIDE 500 MG		No	No	Not Cov	No		No	No
J0694	INJECTION CEFOXITIN SODIUM 1 G		No	No	Not Cov	No		No	No
J0695	INJECTION CEFTOLOZANE 50 MG AND TAZOBACTAM 25 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J0696	INJECTION CEFTRIAZONE SODIUM PER 250 MG		No	No	Not Cov	No		No	No
J0697	INJECTION STERILE CEFUROXIME SODIUM PER 750 MG		No	No	Not Cov	No		No	No
J0698	INJECTION CEFOTAXIME SODIUM PER G		No	No	Not Cov	No		No	No
J0702	INJ BETAMETHASONE ACETATE AND PHOSPHATE 3 MG		No	No	Not Cov	No		No	No
J0706	INJECTION CAFFEINE CITRATE 5 MG		No	No	Not Cov	No		No	No
J0710	INJECTION CEPHAPIRIN SODIUM UP TO 1 G		No	No	Not Cov	No		No	No
J0712	INJECTION CEFTAROLINE FOSAMIL 10 MG		No	No	Not Cov	No		No	No
J0713	INJECTION CEFTAZIDIME PER 500 MG		No	No	Not Cov	No		No	No
J0714	INJECTION CEFTAZIDIME AND AVIBACTAM 0.5 G 0.125 G		Yes	Yes	Not Cov	Yes		Yes	Yes
J0715	INJECTION CEFTIZOXIME SODIUM PER 500 MG		No	No	Not Cov	No		No	No
J0716	INJECTION CENTRUROIDES IMMUNE FAB2 UP TO 120 MCI		No	No	Not Cov	No		No	No

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			Outpatient		ASC	Office Setting			
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J0717	INJECTION CERTOLIZUMAB PEGOL 1 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J0720	INJECTION CHLORAMPHENICOL SODIUM SUCCNAT TO 1 G		No	No	Not Cov	No		No	No
J0725	INJECTION CHORIONIC GONADOTROPIN-1000 USP UNITS		Yes	Yes	Not Cov	Yes		Not Cov	Not Cov
J0735	INJECTION CLONIDINE HYDROCHLORIDE 1 MG		No	No	Not Cov	No		No	No
J0740	INJECTION CIDOFOVIR 375 MG		No	No	Not Cov	No		No	No
J0743	INJECTION CILASTATIN SODIUM IMIPENEM PER 250 MG		No	No	Not Cov	No		No	No
J0744	INJECTION CIPROFLOXACIN INTRAVENOUS INFUS 200 MG		No	No	Not Cov	No		No	No
J0745	INJECTION CODEINE PHOSPHATE PER 30 MG		No	No	Not Cov	No		No	No
J0770	INJECTION COLISTIMETHATE SODIUM UP TO 150 MG		No	No	Not Cov	No		No	No
J0775	INJ COLLAGENASE CLOSTRIDIUM HISTOLYTICUM 0.01 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J0780	INJ PROCHLORPERAZINE TO 10 MG		No	No	Not Cov	No		No	No
J0795	INJ CORTICORELIN OVINE TRIFLUTATE 1 MICROGM		No	No	Not Cov	No		No	No
J0800	INJECTION CORTICOTROPIN UP TO 40 UNITS		Yes	Yes	Not Cov	Yes		Yes	Yes
J0834	INJECTION COSYNTROPIN 0.25 MG		No	No	Not Cov	No		No	No
J0840	INJ CROTALIDAE POLYVALENT IMMUNE FAB UP TO 1 G		No	No	Not Cov	No		No	No
J0841	INJECTION CROTALIDAE IMMUNE F120 MG		Yes	Yes	Not Cov	Yes		No	Yes
J0850	INJECTION CYTOMEGALOVIRUS IMMUNE GLOB IV-VIAL		Yes	Yes	Not Cov	Yes		Yes	Yes
J0875	INJECTION DALBAVANCIN 5MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J0878	INJECTION DAPTOMYCIN 1 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J0881	INJECTION DARBEPOETIN ALFA 1 MCG NON-ESRD USE		Yes	Yes	Not Cov	Yes		Yes	Yes
J0882	INJ DARBEPOETIN ALFA 1 MCG FOR ESRD DIALYSIS		No	No	Not Cov	No		No	No
J0883	INJECTION ARGATROBAN 1 MG NON-ESRD USE		No	No	Not Cov	No		No	No
J0884	INJECTION ARGATROBAN 1 MG ESRD ON DIALYSIS		No	No	Not Cov	No		No	No
J0885	INJECTION EPOETIN ALFA FOR NON-ESRD 1000 UNITS		Yes	Yes	Not Cov	Yes		Yes	Yes
J0887	INJECTION EPOETIN BETA 1 MICROGRAM	One time notificiation only	No	No	Not Cov	No		No	No
J0888	INJECTION EPOETIN BETA 1 MICROGRAM		Yes	Yes	Not Cov	Yes		Yes	Yes
J0890	INJECTION PEGINESATIDE 0.1 MG		Not Cov	Not Cov	Not Cov	Not Cov		No	No
J0894	INJECTION DECITABINE 1 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J0895	INJECTION DEFEROXAMINE MESYLATE 500 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J0897	INJECTION DENOSUMAB 1 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J0945	INJECTION BROMPHENIRAMINE MALEATE PER 10 MG		No	No	Not Cov	No		No	No
J1000	INJECTION DEPO-ESTRADIOL CYPIONATE UP TO 5 MG		No	No	Not Cov	No		No	No
J1020	INJECTION METHYLPREDNISOLONE ACETATE 20 MG		No	No	Not Cov	No		No	No
J1030	INJECTION METHYLPREDNISOLONE ACETATE 40 MG		No	No	Not Cov	No		No	No
J1040	INJECTION METHYLPREDNISOLONE ACETATE 80 MG		No	No	Not Cov	No		No	No
J1050	INJECTION MEDROXYPROGESTERONE ACETATE 1 MG		No	No	Not Cov	No		No	No
J1071	INJECTION TESTOSTERONE CYPIONATE 1 MG		No	No	Not Cov	No		No	No
J1094	INJECTION DEXAMETHASONE ACETATE 1 MG		No	No	Not Cov	No		No	No
J1095	INJECTION DEXAMETHASONE 9PCT INTRAOCULAR 1 MCG		Yes	Not Cov	Not Cov	Not Cov		No	Yes
J1096	DEXAMETHASONE LACRIMAL OPHTHALMIC INSERT 0.1 MG		Yes	Yes	Not Cov	Yes		TBD	TBD

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			Outpatient		ASC	Office Setting			
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J1097	PHEN 10.16 AND KET 2.88 MG ML OPHT IRR SOL 1 ML		No	No	Not Cov	No		TBD	TBD
J1100	INJECTION DEXAMETHOSONE SODIUM PHOSPHATE 1 MG		No	No	Not Cov	No		No	No
J1110	INJECTION DIHYDROERGOTAMINE MESYLATE PER 1 MG		No	No	Not Cov	No		No	No
J1120	INJECTION ACETAZOLAMIDE SODIUM UP TO 500 MG		No	No	Not Cov	No		No	No
J1130	INJECTION DICLOFENAC SODIUM .5 MG		No	No	Not Cov	No		No	No
J1160	INJECTION DIGOXIN UP TO 0.5 MG		No	No	Not Cov	No		No	No
J1162	INJECTION DIGOXIN IMMUNE FAB OVINE PER VIAL		No	No	Not Cov	No		No	No
J1165	INJECTION PHENYTOIN SODIUM PER 50 MG		No	No	Not Cov	No		No	No
J1170	INJECTION HYDROMORPHONE UP TO 4 MG		No	No	Not Cov	No		No	No
J1180	INJECTION DYPHYLLINE UP TO 500 MG		No	No	Not Cov	No		No	No
J1190	INJECTION DEXRAZOXANE HYDROCHLORIDE PER 250 MG		No	No	Not Cov	No		No	No
J1200	INJECTION DIPHENHYDRAMINE HCL UP TO 50 MG		No	No	Not Cov	No		No	No
J1205	INJECTION CHLOROTHIAZIDE SODIUM PER 500 MG		No	No	Not Cov	No		No	No
J1212	INJECTION DMSO DIMETHYL SULFOXIDE 50PCT 50 ML		No	No	Not Cov	No		No	No
J1230	INJECTION METHADONE HCL UP TO 10 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J1240	INJECTION DIMENHYDRINATE UP TO 50 MG		No	No	Not Cov	No		No	No
J1245	INJECTION DIPYRIDAMOLE PER 10 MG		No	No	Not Cov	No		No	No
J1250	INJECTION DOBUTAMINE HCl PER 250 MG		No	No	Not Cov	No		No	No
J1260	INJECTION DOLASETRON MESYLATE 10 MG		No	No	Not Cov	No		No	No
J1265	INJECTION DOPAMINE HCL 40 MG		No	No	Not Cov	No		No	No
J1267	INJECTION DORIPENEM 10 MG		No	No	Not Cov	No		No	No
J1270	INJECTION DOXERCALCIFEROL 1 MCG		No	No	Not Cov	No		No	No
J1290	INJECTION ECALLANTIDE 1 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J1300	INJECTION ECULIZUMAB 10 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J1301	INJECTION EDARAVONE 1 MG	Bill through DSHS	Not Cov	Not Cov	Not Cov	Not Cov		No	Yes
J1303	INJECTION RAVULIZUMAB-CWVZ 10 MG		Yes	Yes	Not Cov	Yes		TBD	TBD
J1320	INJECTION AMITRIPTYLINE HCL UP TO 20 MG		No	No	Not Cov	No		No	No
J1322	INJECTION ELOSULFASE ALFA 1 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J1324	INJECTION ENFUVIRTIDE 1 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J1325	INJECTION EPOPROSTENOL 0.5 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J1327	INJECTION EPTIFIBATIDE 5 MG		No	No	Not Cov	No		No	No
J1330	INJECTION ERGONOVINE MALEATE UP TO 0.2 MG		No	No	Not Cov	No		No	No
J1335	INJECTION ERTAPENEM SODIUM 500 MG		No	No	Not Cov	No		No	No
J1364	INJECTION ERYTHROMYCIN LACTOBIONATE PER 500 MG		No	No	Not Cov	No		No	No
J1380	INJECTION ESTRADIOL VALERATE UP TO 10 MG		No	No	Not Cov	No		No	No
J1410	INJECTION ESTROGEN CONJUGATED PER 25 MG		No	No	Not Cov	No		No	No
J1428	INJECTION ETEPLIRSEN 10 MG	Bill through DSHS	Not Cov	Not Cov	Not Cov	Not Cov	Not Cov	Yes	Yes
J1430	INJECTION ETHANOLAMINE OLEATE 100 MG		No	No	Not Cov	No		No	No
J1435	INJECTION ESTRONE PER 1 MG		No	No	Not Cov	No		No	No
J1436	INJECTION ETIDRONATE DISODIUM PER 300 MG		No	No	Not Cov	No		No	No
J1438	INJECTION ETANERCEPT 25 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J1439	INJECTION FERRIC CARBOXYMALTOSE 1 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J1442	INJECTION FILGRASTIM EXCLUDES BIOSIMILARS 1 MIC		Yes	Yes	Not Cov	Yes		Yes	Yes

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			Outpatient		ASC	Office Setting			
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J1443	INJ FERRIC PRPP CITRATE SOL 0.1 MG OF IRON		No	No	Not Cov	No		No	No
J1444	INJ FERRIC PYROPHOSPHATE CITRATE PWD 0.1 MG IRON		Not Cov	Not Cov	Not Cov	Not Cov		No	No
J1447	INJECTION TBO-FILGRASTIM 1 MICROGRAM		Yes	Yes	Not Cov	Yes		Yes	Yes
J1450	INJECTION FLUCONAZOLE 200 MG		No	No	Not Cov	No		No	No
J1451	INJECTION FOMEPIZOLE 15 MG		No	No	Not Cov	No		No	No
J1452	INJECTION FOMIVIRSEN SODIUM INTRAOCULAR 1.65 MG		No	No	Not Cov	No		No	No
J1453	INJECTION FOSAPREPITANT 1 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J1454	INJ FOSNETUPITANT 235 MG AND PALONOSETRON 0.25 MG		Yes	Yes	Not Cov	Yes		No	Yes
J1455	INJECTION FOSCARNET SODIUM PER 1000 MG		No	No	Not Cov	No		No	No
J1457	INJECTION GALLIUM NITRATE 1 MG		No	No	Not Cov	No		No	No
J1458	INJECTION GALSULFASE 1 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J1459	INJ IMMUNE GLOBULIN IV NONLYOPHILIZED 500 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J1460	INJECTION GAMMA GLOBULIN INTRAMUSCULAR 1 CC		Yes	Yes	Not Cov	Yes		Yes	Yes
J1555	INJECTION IMMUNE GLOBULIN 100 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J1556	INJECTION IMMUNE GLOBULIN BIVIGAM 500 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J1557	INJ IMMUNE GLOBULIN IV NONLYOPHILIZED 500 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J1559	INJECTION IMMUNE GLOBULIN HIZENTRA 100 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J1560	INJECTION GAMMA GLOB INTRAMUSCULAR OVER 10 CC		Yes	Yes	Not Cov	Yes		Yes	Yes
J1561	INJECTION IMMUNE GLOBULIN NONLYOPHILIZED 500 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J1562	INJECTION IMMUNE GLOBULIN VIVAGLBIN 100 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J1566	INJ IG IV LYPHILIZED NOT OTHERWISE SPEC 500 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J1568	INJ IG OCTOGAM IV NONLYOPHILIZED 500 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J1569	INJ IG GAMMAGARD LIQ IV NONLYOPHILIZED 500 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J1570	INJECTION GANCICLOVIR SODIUM 500 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J1571	INJ HEPATITIS B IG HEPAGAM B IM 0.5 ML		Yes	Yes	Not Cov	Yes		Yes	Yes
J1572	INJ IMMUNE GLOBULIN IV NONLYOPHILIZED 500 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J1573	INJ HEP B IG HEPAGAM B INTRAVENOUS 0.5 ML		Yes	Yes	Not Cov	Yes		Yes	Yes
J1575	INJ IMMUNE GLOBULIN HYALURONIDASE 100 MG IG		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
J1580	INJECTION GARAMYCIN GENTAMICIN UP TO 80 MG		No	No	Not Cov	No		No	No
J1595	INJECTION GLATIRAMER ACETATE 20 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J1599	INJ IG IV NONLYOPHILIZED E.G. LIQUID NOS 500 MG		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
J1600	INJECTION GOLD SODIUM THIOMALATE UP TO 50 MG		No	No	Not Cov	No		No	No
J1602	INJECTION GOLIMUMAB 1 MG FOR INTRAVENOUS USE		Yes	Yes	Not Cov	Yes		Yes	Yes
J1610	INJECTION GLUCAGON HYDROCHLORIDE PER 1 MG		No	No	Not Cov	No		No	No
J1620	INJECTION GONADORELIN HYDROCHLORIDE PER 100 MCG		No	No	Not Cov	No		No	No
J1626	INJECTION GRANISETRON HYDROCHLORIDE 100 MCG		No	No	Not Cov	No		No	No
J1627	INJECTION GRANISETRON EXTENDED-RELEASE 0.1 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J1628	INJECTION GUSELKUMAB 1 MG		Yes	Yes	Not Cov	Yes		No	Yes
J1630	INJECTION HALOPERIDOL UP TO 5 MG		No	No	Not Cov	No		No	No
J1631	INJECTION HALOPERIDOL DECANOATE PER 50 MG		No	No	Not Cov	No		No	No
J1640	INJECTION HEMIN 1 MG		Yes	Yes	Not Cov	Yes		Yes	Yes

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J1642	INJECTION HEPARIN SODIUM PER 10 UNITS		No	No	Not Cov	No		No	No
J1644	INJECTION HEPARIN SODIUM PER 1000 UNITS		No	No	Not Cov	No		No	No
J1645	INJECTION DALTEPARIN SODIUM PER 2500 IU		Yes	Yes	Not Cov	Yes		Yes	Yes
J1650	INJECTION ENOXAPARIN SODIUM 10 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J1652	INJECTION FONDAPARINUX SODIUM 0.5 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J1655	INJECTION TINZAPARIN SODIUM 1000 IU		No	No	Not Cov	No		No	No
J1670	INJECTION TETANUS IMMUNE GLOB HUMAN TO 250 UNITS		No	No	Not Cov	No		No	No
J1675	INJECTION HISTRELIN ACETATE 10 MICROGRAMS		Not Cov	Yes	Not Cov	Yes		Yes	Yes
J1700	INJECTION HYDROCORTISONE ACETATE UP TO 25 MG		No	No	Not Cov	No		No	No
J1710	INJ HYDROCORTISONE SODIUM PHOSPHATE TO 50 MG		No	No	Not Cov	No		No	No
J1720	INJ HYDROCORTISONE SODIUM SUCCINATE TO 100 MG		No	No	Not Cov	No		No	No
J1726	INJECTION HYDROXYPROGESTERONE CAPROATE 10 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J1729	INJECTION HYDROXYPROGESTERONE CAPROATE NOS 10 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J1730	INJECTION DIAZOXIDE UP TO 300 MG		No	No	Not Cov	No		No	No
J1740	INJECTION IBANDRONATE SODIUM 1 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J1741	INJECTION IBUPROFEN 100 MG		No	Not Cov	Not Cov	Not Cov		No	No
J1742	INJ IBUTILIDE FUMARATE 1 MG		No	No	Not Cov	No		No	No
J1743	INJECTION IDURSULFASE 1 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J1744	INJECTION ICATIBANT 1 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J1745	INJECTION INFliximab EXCLUDES BIOSIMILAR 10 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J1746	INJECTION IBALIZUMAB-UIYK 10 MG		Yes	Yes	Not Cov	Yes		No	Yes
J1750	INJECTION IRON DEXTRAN 50 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J1756	INJECTION IRON SUCROSE 1 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J1786	INJECTION IMIGLUCERASE 10 UNITS		Yes	Yes	Not Cov	Yes		Yes	Yes
J1790	INJECTION DROPERIDOL UP TO 5 MG		No	No	Not Cov	No		No	No
J1800	INJECTION PROPRANOLOL HCL UP TO 1 MG		No	No	Not Cov	No		No	No
J1810	INJ DROPERIDOL AND FENTANYL CITRATE UP TO 2 ML AMP		No	Not Cov	Not Cov	Not Cov		No	No
J1815	INJECTION INSULIN PER 5 UNITS		No	No	Not Cov	No		Not Cov	No
J1817	INSULIN ADMINISTRATION THROUGH DME PER 50 UNITS		No	No	Not Cov	No		No	No
J1826	INJECTION INTERFERON BETA-1A 30 MCG		Yes	Yes	Not Cov	Yes		Not Cov	Yes
J1830	INJECTION INTERFERON BETA-1B 0.25 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J1833	INJECTION ISAVUCONAZONIUM 1 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J1835	INJECTION ITRACONAZOLE 50 MG		No	No	Not Cov	No		No	No
J1840	INJECTION KANAMYCIN SULFATE UP TO 500 MG		No	No	Not Cov	No		No	No
J1850	INJECTION KANAMYCIN SULFATE UP TO 75 MG		No	No	Not Cov	No		No	No
J1885	INJECTION KETOROLAC TROMETHAMINE PER 15 MG		No	No	Not Cov	No		No	No
J1890	INJECTION CEPHALOTHIN SODIUM UP TO 1 G		No	No	Not Cov	No		No	No
J1930	INJECTION LANREOTIDE 1 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J1931	INJECTION LARONIDASE 0.1 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J1940	INJECTION FUROSEMIDE UP TO 20 MG		No	No	Not Cov	No		No	No
J1943	INJECTION ARIPIPIRAZOLE LAUROXIL 1 MG		Not Cov	Not Cov	Not Cov	Not Cov		TBD	TBD
J1944	INJECTION ARIPIPIRAZOLE LAUROXIL 1 MG		Not Cov	Not Cov	Not Cov	Not Cov		TBD	TBD

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Code	Code Description	Comments	Apple Health & IMC Medical				IMC / BHSO (Mental Health covered svcs)	Medicare	Market Place
			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
J1945	INJECTION LEPIRUDIN 50 MG		No	No	Not Cov	No		No	No
J1950	INJECTION LEUPROLIDE ACETATE PER 3.75 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J1953	INJECTION LEVETIRACETAM 10 MG		No	No	Not Cov	No		No	No
J1955	INJECTION LEVOCARNITINE PER 1 G		Not Cov	Yes	Not Cov	Yes		Yes	Yes
J1956	INJECTION LEVOFLOXACIN 250 MG		No	No	Not Cov	No		No	No
J1960	INJECTION LEVORPHANOL TARTRATE UP TO 2 MG		No	No	Not Cov	No		No	No
J1980	INJECTION HYOSCYAMINE SULFATE UP TO 0.25 MG		No	No	Not Cov	No		No	No
J1990	INJECTION CHLORDIAZEPOXIDE HCL UP TO 100 MG		No	No	Not Cov	No		No	No
J2001	INJECTION LIDOCAINE HCL INTRAVENOUS INFUS 10 MG		No	No	Not Cov	No		No	No
J2010	INJECTION LINCOMYCIN HCL UP TO 300 MG		No	No	Not Cov	No		No	No
J2020	INJECTION LINEZOLID 200 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J2060	INJECTION LORAZEPAM 2 MG		No	No	Not Cov	No		No	No
J2062	LOXAPINE FOR INHALATION 1 MG		Yes	Yes	Not Cov	Yes		No	Yes
J2150	INJECTION MANNITOL 25PCT IN 50 ML		No	No	Not Cov	No		No	No
J2170	INJECTION MECASERMIN 1 MG		Yes	Yes	Not Cov	Yes		Not Cov	Yes
J2175	INJECTION MEPERIDINE HCL PER 100 MG		No	No	Not Cov	No		No	No
J2180	INJECTION MEPERIDINE AND PROMETHAZINE HCL TO 50 MG		No	No	Not Cov	No		No	No
J2182	INJECTION MEPOLIZUMAB 1 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J2185	INJECTION MEROPENEM 100 MG		No	No	Not Cov	No		No	No
J2186	INJECTION MEROPENEM VABORBACTAM 10 MG 10 MG		Yes	Not Cov	Not Cov	Yes		No	Yes
J2210	INJECTION METHYLERGONOVINE MALEATE UP TO 0.2 MG		No	No	Not Cov	No		No	No
J2212	INJECTION METHYLNALTREXONE 0.1 MG		No	No	Not Cov	No		Not Cov	No
J2248	INJECTION MICA FUNGIN SODIUM 1 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J2250	INJECTION MIDAZOLAM HCL PER 1 MG		No	No	Not Cov	No		No	No
J2260	INJECTION MILRINONE LACTATE 5 MG		No	No	Not Cov	No		No	No
J2265	INJECTION MINOCYCLINE HCL 1 MG		No	No	Not Cov	No		No	No
J2270	INJECTION MORPHINE SULFATE UP TO 10 MG		No	No	Not Cov	No		No	No
J2274	INJECTION MS PRES-FREE EPID INTRATHECL USE 10 MG		No	Not Cov	Not Cov	Not Cov		No	No
J2278	INJECTION ZICONOTIDE 1 MICROGRAM		No	No	Not Cov	No		No	No
J2280	INJECTION MOXIFLOXACIN 100 MG		No	No	Not Cov	No		No	No
J2300	INJECTION NALBUPHINE HCL PER 10 MG		No	No	Not Cov	No		No	No
J2310	INJECTION NALOXONE HCL PER 1 MG		No	No	Not Cov	No		No	No
J2315	INJECTION NALTREXONE DEPOT FORM 1 MG		No	No	Not Cov	No		Yes	Yes
J2320	INJECTION NANDROLONE DECANOATE UP TO 50 MG		No	No	Not Cov	No		No	No
J2323	INJECTION NATALIZUMAB 1 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J2325	INJECTION NESIRITIDE 0.1 MG		No	No	Not Cov	No		No	No
J2326	INJECTION NUSINERSEN 0.1 MG	Bill through DSHS	Not Cov	Not Cov	Not Cov	Not Cov	Not Cov	Yes	Yes
J2350	INJECTION OCRELIZUMAB 1 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J2353	INJ OCTREOTIDE DEPOT FORM IM INJ 1 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J2354	INJ OCTREOTIDE NON-DEPOT FORM SUBQ IV INJ 25 MCG		Yes	Yes	Not Cov	Yes		Yes	Yes
J2355	INJECTION OPRELVEKIN 5 MG		No	No	Not Cov	No		No	No
J2357	INJECTION OMALIZUMAB 5 MG		Yes	Yes	Not Cov	Yes		Yes	Yes

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
J2358	INJECTION OLANZAPINE LONG-ACTING 1 MG		No	No	Not Cov	No		No	No
J2360	INJECTION ORPHENADRINE CITRATE UP TO 60 MG		No	No	Not Cov	No		No	No
J2370	INJECTION PHENYLEPHRINE HCL UP TO 1 ML		No	No	Not Cov	No		No	No
J2400	INJECTION CHLOROPROCAINE HCL PER 30 ML		No	No	Not Cov	No		No	No
J2405	INJECTION ONDANSETRON HCL PER 1 MG		No	No	Not Cov	No		No	No
J2407	INJECTION ORITAVANCIN 10 MG		No	No	Not Cov	No		No	No
J2410	INJECTION OXYMORPHONE HCL UP TO 1 MG		No	No	Not Cov	No		No	No
J2425	INJECTION PALIFERMIN 50 MICROGRAMS		Yes	Yes	Not Cov	Yes		Yes	Yes
J2426	INJECTION PALIPERIDONE PALMITATE EXT RLSE 1 MG		No	No	Not Cov	No		No	No
J2430	INJECTION PAMIDRONATE DISODIUM PER 30 MG		No	No	Not Cov	No		Yes	No
J2440	INJECTION PAPAVERINE HCL UP TO 60 MG		No	No	Not Cov	No		No	Not Cov
J2460	INJECTION OXYTETRACYCLINE HCL UP TO 50 MG		No	No	Not Cov	No		No	No
J2469	INJECTION PALONOSETRON HCL 25 MCG		Yes	Yes	Not Cov	Yes		Yes	Yes
J2501	INJECTION PARICALCITOL 1 MCG		No	No	Not Cov	No		No	No
J2502	INJECTION PASIREOTIDE LONG ACTING 1 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J2503	INJECTION PEGAPTANIB SODIUM 0.3 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J2504	INJECTION PEGADEMASE BOVINE 25 IU		Yes	Yes	Not Cov	Yes		Yes	Yes
J2505	INJECTION PEGFILGRASTIM 6 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J2507	INJECTION PEGLOTICASE 1 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J2510	INJECTION PCN G PROCAINE AQUEOUS TO 600000 UNITS		No	No	Not Cov	No		No	No
J2513	INJECTION PENTASTARCH 10PCT SOLUTION 100 ML		No	No	Not Cov	No		No	No
J2515	INJECTION PENTOBARBITAL SODIUM PER 50 MG		No	No	Not Cov	No		No	No
J2540	INJECTION PENICILLIN G POTASSIUM TO 600000 UNITS		No	No	Not Cov	No		No	No
J2543	INJ PIPERACILLIN SOD TAZOBACTAM SOD 1 G 0.125 G		No	No	Not Cov	No		No	No
J2545	PENTAMIDINE ISETHIONATE I SOL NONCP UD P 300 MG		Not Cov	No	Not Cov	No		No	No
J2547	INJECTION PERAMIVIR 1 MG		No	No	Not Cov	No		No	No
J2550	INJECTION PROMETHAZINE HCL UP TO 50 MG		No	No	Not Cov	No		No	No
J2560	INJECTION PHENOBARBITAL SODIUM UP TO 120 MG		No	No	Not Cov	No		No	No
J2562	INJECTION PLERIXAFOR 1 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J2590	INJECTION OXYTOCIN UP TO 10 UNITS		No	No	Not Cov	No		No	No
J2597	INJECTION DESMOPRESSIN ACETATE PER 1 MCG		Yes	Yes	Not Cov	Yes		Yes	Yes
J2650	INJECTION PREDNISOLONE ACETATE UP TO 1 ML		No	No	Not Cov	No		No	No
J2670	INJECTION TOLAZOLINE HCL UP TO 25 MG		No	No	Not Cov	No		No	No
J2675	INJECTION PROGESTERONE PER 50 MG		No	No	Not Cov	No		No	No
J2680	INJECTION FLUPHENAZINE DECANOATE UP TO 25 MG		No	No	Not Cov	No		No	No
J2690	INJECTION PROCAINAMIDE HCL UP TO 1 GM		No	No	Not Cov	No		No	No
J2700	INJECTION OXACILLIN SODIUM UP TO 250 MG		No	No	Not Cov	No		No	No
J2704	INJECTION PROPOFOL 10 MG		No	Not Cov	Not Cov	Not Cov		No	No
J2710	INJECTION NEOSTIGMINE METHYLSULFATE UP TO 0.5 MG		No	No	Not Cov	No		No	No
J2720	INJECTION PROTAMINE SULFATE PER 10 MG		No	No	Not Cov	No		No	No
J2724	INJECTION PROTEN C CONCENTRATE IV HUMAN 10 IU		Yes	Yes	Not Cov	Yes		Yes	Yes
J2725	INJECTION PROTIRELIN PER 250 MCG		No	No	Not Cov	No		No	No
J2730	INJECTION PRALIDOXIME CHLORIDE UP TO 1 GM		No	No	Not Cov	No		No	No
J2760	INJECTION PHENTOLAMINE MESYLATE UP TO 5 MG		No	No	Not Cov	No		No	Not Cov

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			Outpatient		ASC	Office Setting			
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J2765	INJECTION METOCLOPRAMIDE HCL UP TO 10 MG		No	No	Not Cov	No		No	No
J2770	INJECTION QUINUPRISTIN DALFOPRISTIN 500 MG		No	No	Not Cov	No		No	No
J2778	INJECTION RANIBIZUMAB 0.1 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J2780	INJECTION RANITIDINE HYDROCHLORIDE 25 MG		No	No	Not Cov	No		No	No
J2783	INJECTION RASBURICASE 0.5 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J2785	INJECTION REGADENOSON 0.1 MG		No	No	Not Cov	No		No	No
J2786	INJECTION RESLIZUMAB 1 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J2787	RIBOFLAVIN 5'-PHOSPHATE OPHTHALMIC SOL TO 3 ML		Not Cov	Not Cov	Not Cov	Not Cov		No	Yes
J2788	INJ RHO D IMMUNE GLOBULIN HUMAN MINIDOSE 50 MCG		No	No	Not Cov	No		No	No
J2790	INJECTION RHO D IG HUMAN FULL DOSE 300 MCG		No	No	Not Cov	No		No	No
J2791	INJ RHO D IG HUMAN RHOPHYLAC IM IV 100 IU		No	No	Not Cov	No		No	No
J2792	INJ RHO D IMMUE GLOBULIN IV HUMN 100 IU		No	No	Not Cov	No		No	No
J2793	INJECTION RILONACEPT 1 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J2794	INJECTION RISPERIDONE LONG ACTING 0.5 MG		No	No	Not Cov	No		No	No
J2795	INJECTION ROPIVACAINE HYDROCHLORIDE 1 MG		No	No	Not Cov	No		No	No
J2796	INJECTION ROMIPLOSTIM 10 MCG		Yes	Yes	Not Cov	Yes		Yes	Yes
J2797	INJECTION ROLAPITANT 0.5 MG		Yes	Yes	Not Cov	Yes		No	Yes
J2798	INJECTION RISPERIDONE 0.5 MG		No	No	Not Cov	No		TBD	TBD
J2800	INJECTION METHOCARBAMOL UP TO 10 ML		No	No	Not Cov	No		No	No
J2805	INJECTION SINCALIDE 5 MICROGRAMS		No	No	Not Cov	No		No	No
J2810	INJECTION THEOPHYLLINE PER 40 MG		No	No	Not Cov	No		No	No
J2820	INJECTION SARGRAMOSTIM 50 MCG		Yes	Yes	Not Cov	Yes		Yes	Yes
J2840	INJECTION SEBELIPASE ALFA 1 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J2850	INJECTION SECRETIN SYNTHETIC HUMAN 1 MICROGRAM		No	No	Not Cov	No		No	No
J2860	INJECTION SILTUXIMAB 10 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J2910	INJECTION AUROTHIOGLUCOSE UP TO 50 MG		No	No	Not Cov	No		No	No
J2916	INJ SODIM FERRIC GLUCONATE CMLX SUCROSE 12.5 MG		No	No	Not Cov	No		Yes	No
J2920	INJ METHYLPRDNISOLONE SODIUM SUCCNAT TO 40 MG		No	No	Not Cov	No		No	No
J2930	INJ METHYLPRDNISOLONE SODIUM SUCCNAT TO 125 MG		No	No	Not Cov	No		No	No
J2940	INJECTION SOMATREM 1 MG		No	No	Not Cov	No		No	No
J2941	INJECTION SOMATROPIN 1 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J2950	INJECTION PROMAZINE HCL UP TO 25 MG		No	No	Not Cov	No		No	No
J2993	INJECTION RETEPLASE 18.1 MG		No	No	Not Cov	No		No	No
J2995	INJECTION STREPTOKINASE PER 250000 IU		No	No	Not Cov	No		No	No
J2997	INJECTION ALTEPLASE RECOMBINANT 1 MG		No	No	Not Cov	No		No	No
J3000	INJECTION STREPTOMYCIN UP TO 1 G		No	No	Not Cov	No		No	No
J3010	INJECTION FENTANYL CITRATE 0.1 MG		No	No	Not Cov	No		No	No
J3030	INJECTION SUMATRIPTAN SUCCINATE 6 MG		No	No	Not Cov	No		No	No
J3031	INJECTION FREMANEZUMAB-VFRM 1 MG		Not Cov	Not Cov	Not Cov	Not Cov		TBD	TBD
J3060	INJECTION TALIGLUCERASE ALFA 10 UNITS		Yes	Yes	Not Cov	Yes		Yes	Yes
J3070	INJECTION PENTAZOCINE 30 MG		No	No	Not Cov	No		No	No
J3090	INJECTION TEDIZOLID PHOSPHATE 1 MG		Yes	Yes	Not Cov	Yes		Yes	Yes

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
J3095	INJECTION TELAVANCIN 10 MG		Yes	Not Cov	Not Cov	Not Cov		Yes	Yes
J3101	INJECTION TENECTEPLASE 1 MG		No	No	Not Cov	No		No	No
J3105	INJECTION TERBUTALINE SULFATE UP TO 1 MG		No	No	Not Cov	No		No	No
J3110	INJECTION TERIPARATIDE 10 MCG		Not Cov	Yes	Not Cov	Yes		Not Cov	Yes
J3111	INJECTION ROMOSUZUMAB-AQQG 1 MG		Yes	Yes	Not Cov	Yes		TBD	TBD
J3121	INJECTION TESTOSTERONE ENANTHATE 1 MG		No	No	Not Cov	No		No	No
J3145	INJECTION TESTOSTERONE UNDECANOATE 1 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J3230	INJECTION CHLORPROMAZINE HCL UP TO 50 MG		No	No	Not Cov	No		No	No
J3240	INJ THYROTROPIN ALPHA 0.9 MG PROV 1.1 MG VIAL		Yes	Yes	Not Cov	Yes		Yes	Yes
J3243	INJECTION TIGECYCLINE 1 MG		No	No	Not Cov	No		No	No
J3245	INJECTION TILDRAKIZUMAB 1 MG		Not Cov	Not Cov	Not Cov	Not Cov		No	Yes
J3246	INJECTION TIROFIBAN HCI 0.25 MG		No	No	Not Cov	No		No	No
J3250	INJECTION TRIMETHOBENZAMIDE HCL UP TO 200 MG		No	No	Not Cov	No		No	No
J3260	INJECTION TOBRAMYCIN SULFATE UP TO 80 MG		No	No	Not Cov	No		No	No
J3262	INJECTION TOCILIZUMAB 1 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J3265	INJECTION TORSEMIDE 10 MG ML		No	No	Not Cov	No		No	No
J3280	INJECTION THIETHYLPERAZINE MALEATE UP TO 10 MG		No	No	Not Cov	No		No	No
J3285	INJECTION TREPROSTINIL 1 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J3300	INJ TRIAMCINOLONE ACETONIDE PRES FREE 1 MG		No	No	Not Cov	No		No	No
J3301	INJECTION TRIAMCINOLONE ACETONIDE NOS 10 MG		No	No	Not Cov	No		No	No
J3302	INJECTION TRIAMCINOLONE DIACETATE PER 5 MG		No	No	Not Cov	No		No	No
J3303	INJECTION TRIAMCINOLONE HEXACETONIDE PER 5 MG		No	No	Not Cov	No		No	No
J3304	INJECT TRIAMCINOLONE ACETONIDE PF ER MS F 1 MG		Yes	Yes	Not Cov	Yes		No	Yes
J3305	INJECTION TRIMETREXATE GLUCORONATE PER 25 MG		No	No	Not Cov	No		No	No
J3310	INJECTION PERPHENAZINE UP TO 5 MG		No	No	Not Cov	No		No	No
J3315	INJECTION TRIPTORELIN PAMOATE 3.75 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J3316	INJECTION TRIPTORELIN EXTENDED-RELEASE 3.75 MG		Yes	Yes	Not Cov	Yes		No	Yes
J3320	INJ SPECTINOMYCIN DIHYDROCHLORIDE UP TO 2 GM		No	No	Not Cov	No		No	No
J3350	INJECTION UREA UP TO 40 G		No	No	Not Cov	No		No	No
J3355	INJECTION UROFOLLITROPIN 75 IU		Yes	Yes	Not Cov	Yes		Not Cov	Yes
J3357	USTEKINUMAB FOR SUBCUTANEOUS INJECTION 1 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J3358	USTEKINUMAB FOR INTRAVENOUS INJECTION 1 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J3360	INJECTION DIAZEPAM UP TO 5 MG		No	No	Not Cov	No		No	No
J3364	INJECTION UROKINASE 5000 IU VIAL		No	Not Cov	Not Cov	Not Cov		No	No
J3365	INJECTION IV UROKINASE 250000 IU VIAL		No	No	Not Cov	No		No	No
J3370	INJECTION VANCOMYCIN HCL 500 MG		No	No	Not Cov	No		No	No
J3380	INJECTION VEDOLIZUMAB 1 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J3385	INJECTION VELAGLUCERASE ALFA 100 UNITS		Yes	Yes	Not Cov	Yes		Yes	Yes
J3396	INJECTION VERTEPORFIN 0.1 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J3397	INJECTION VESTRONIDASE ALFA-VJBK 1 MG		Yes	Yes	Not Cov	Yes		No	Yes
J3398	INJECTION VORETIGENE NEPARVOVEC-RZYL 1 B VEC G	Bill through DSHS	Not Cov	Not Cov	Not Cov	Not Cov		No	Yes
J3400	INJECTION TRIFLUPROMAZINE HCL UP TO 20 MG		No	No	Not Cov	No		No	No
J3410	INJECTION HYDROXYZINE HCL UP TO 25 MG		No	No	Not Cov	No		No	No
J3411	INJECTION THIAMINE HCL 100 MG		No	No	Not Cov	No		No	No
J3415	INJECTION PYRIDOXINE HCL 100 MG		No	No	Not Cov	No		No	No
J3420	INJECTION VIT B-12 CYANOCOBALAMIN TO 1000 MCG		No	No	Not Cov	No		No	No
J3430	INJECTION PHYTONADIONE PER 1 MG		No	No	Not Cov	No		No	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
J3465	INJECTION VORICONAZOLE 10 MG		No	No	Not Cov	No		No	No
J3470	INJECTION HYALURONIDASE UP TO 150 UNITS		No	No	Not Cov	No		No	No
J3471	INE HYALURONIDASE OVINE PRES FREE 1 USP UNIT		No	No	Not Cov	No		No	No
J3472	INJ HYALURONIDASE OVINE PRES FREE-1000 USP UNITS		No	No	Not Cov	No		No	No
J3473	INJECTION HYALURONIDASE RECOMBINANT 1 USP UNIT		No	Not Cov	Not Cov	Not Cov		No	No
J3475	INJECTION MAGNESIUM SULPHATE PER 500 MG		No	No	Not Cov	No		No	No
J3480	INJECTION POTASSIUM CHLORIDE PER 2 MEQ		No	No	Not Cov	No		No	No
J3485	INJECTION ZIDOVUDINE 10 MG		No	No	Not Cov	No		No	No
J3486	INJECTION ZIPRASIDONE MESYLATE 10 MG		No	No	Not Cov	No		No	No
J3489	INJECTION ZOLEDRONIC ACID 1 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J3490	UNCLASSIFIED DRUGS		Yes	Yes	Not Cov	Yes		Yes	Yes
J3520	EDETATE DISODIUM PER 150 MG		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
J3530	NASAL VACCINE INHALATION		No	No	Not Cov	No		No	No
J3535	DRUG ADMINISTERED THROUGH A METERED DOSE INHALER		Not Cov	No	Not Cov	No		Not Cov	No
J3570	LAETRILE AMYGDALIN VITAMIN B17		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
J3590	UNCLASSIFIED BIOLOGICS		Yes	Yes	Not Cov	Yes		Yes	Yes
J3591	UNCLASS RX BIOLOGICAL USED FOR ESRD ON DIALYSIS		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
J7030	INFUSION NORMAL SALINE SOLUTION 1000 CC		No	No	Not Cov	No		No	No
J7040	INFUSION NORMAL SALINE SOLUTION STERILE		No	No	Not Cov	No		No	No
J7042	5PCT DEXTROSE NORMAL SALINE		No	No	Not Cov	No		No	No
J7050	INFUSION NORMAL SALINE SOLUTION 250 CC		No	No	Not Cov	No		No	No
J7060	5PCT DEXTROSE WATER		No	No	Not Cov	No		No	No
J7070	INFUSION D-5-W 1000 CC		No	No	Not Cov	No		No	No
J7100	INFUSION DEXTRAN 40500 ML		No	No	Not Cov	No		No	No
J7110	INFUSION DEXTRAN 75500 ML		No	No	Not Cov	No		No	No
J7120	RINGERS LACTATE INFUSION UP TO 1000 CC		No	No	Not Cov	No		No	No
J7121	5PCT DEXTROSE LACTATED RINGERS INFUSION TO 1000 CC		No	No	Not Cov	No		No	No
J7131	HYPERTONIC SALINE SOLUTION 1 ML		No	No	Not Cov	No		No	No
J7170	INJECTION EMICIZUMAB-KXWH 0.5 MG	Bill through DSHS	Not Cov	Not Cov	Not Cov	Not Cov		No	Yes
J7175	INJECTION FACTOR X 1 I.U.	Bill through DSHS	Not Cov	Not Cov	Not Cov	Not Cov	Not Cov	Yes	Yes
J7177	INJECTION HUMAN FIBRINOGEN CONCENTRATE 1 MG	Bill through DSHS	Not Cov	Not Cov	Not Cov	Not Cov		No	Yes
J7178	INJECTION HUMAN FIBRINOGEN CONCENTRATE 1 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J7179	INJECTION VON WILLEBRAND FACTOR 1 I.U. VWF:RCO	Bill through DSHS	Not Cov	Not Cov	Not Cov	Not Cov	Not Cov	Yes	Yes
J7180	INJECTION FACTOR XIII 1 I.U.	Bill through DSHS	Not Cov	Not Cov	Not Cov	Not Cov	Not Cov	Yes	Yes
J7181	INJECTION FACTOR XIII A-SUBUNIT PER IU	Bill through DSHS	Not Cov	Not Cov	Not Cov	Not Cov	Not Cov	Yes	Yes
J7182	INJECTION FACTOR VIII PER IU	Bill through DSHS	Not Cov	Not Cov	Not Cov	Not Cov	Not Cov	Yes	Yes
J7183	INJ VON WILLEBRAND FACTR COMPLEX WILATE 1 IU:RCO	Bill through DSHS	Not Cov	Not Cov	Not Cov	Not Cov	Not Cov	Yes	Yes
J7185	INJECTION FACTOR VIII PER IU	Bill through DSHS	Not Cov	Not Cov	Not Cov	Not Cov	Not Cov	Yes	Yes
J7186	INJ AHF VWF CMLPX PER FACTOR VIII IU	Bill through DSHS	Not Cov	Not Cov	Not Cov	Not Cov	Not Cov	Yes	Yes
J7187	INJ VONWILLEBRND FACTOR CMLPX HUMN RISTOCETIN IU	Bill through DSHS	Not Cov	Not Cov	Not Cov	Not Cov	Not Cov	Yes	Yes
J7188	INJECTION FACTOR VIII PER I.U.	Bill through DSHS	Not Cov	Not Cov	Not Cov	Not Cov	Not Cov	Yes	Yes

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
J7189	FACTOR VIIA 1 MICROGRAM	Bill through DSHS	Not Cov	Not Cov	Not Cov	Not Cov	Not Cov	Yes	Yes
J7190	FACTOR VIII ANTIHEMOPHILIC FACTOR HUMAN PER IU	Bill through DSHS	Not Cov	Not Cov	Not Cov	Not Cov	Not Cov	Yes	Yes
J7191	FACTOR VIII ANTIHEMOPHILIC FACTOR PROCINE PER IU	Bill through DSHS	Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
J7192	FACTOR VIII PER IU NOT OTHERWISE SPECIFIED	Bill through DSHS	Not Cov	Not Cov	Not Cov	Not Cov	Not Cov	Yes	Yes
J7193	FACTOR IX AHF PURIFIED NON-RECOMBINANT PER IU	Bill through DSHS	Not Cov	Not Cov	Not Cov	Not Cov	Not Cov	Yes	Yes
J7194	FACTOR IX COMPLEX PER IU	Bill through DSHS	Not Cov	Not Cov	Not Cov	Not Cov	Not Cov	Yes	Yes
J7195	INJ FACTOR IX PER IU NOT OTHERWISE SPECIFIED	Bill through DSHS	Not Cov	Not Cov	Not Cov	Not Cov	Not Cov	Yes	Yes
J7196	INJECTION ANTITHROMBIN RECOMBINANT 50 I.U.		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
J7197	ANTITHROMBIN III PER IU		Yes	Not Cov	Not Cov	Not Cov		Yes	Yes
J7198	ANTI-INHIBITOR PER IU	Bill through DSHS	Not Cov	Not Cov	Not Cov	Not Cov	Not Cov	Yes	Yes
J7199	HEMOPHILIA CLOTTING FACTOR NOC	Bill through DSHS	Not Cov	Not Cov	Not Cov	Not Cov	Not Cov	Yes	Yes
J7200	INJECTION FACTOR IX RIXUBIS PER IU	Bill through DSHS	Not Cov	Not Cov	Not Cov	Not Cov	Not Cov	Yes	Yes
J7201	INJECTION FAC IX FC FUS PROTEIN ALPROLIX 1 I.U.	Bill through DSHS	Not Cov	Not Cov	Not Cov	Not Cov	Not Cov	Yes	Yes
J7202	INJECTION FAC IX ALBUMIN FUS PRT IDELVION 1 I.U.	Bill through DSHS	Not Cov	Not Cov	Not Cov	Not Cov	Not Cov	Yes	Yes
J7203	INJECTION FACTOR IX GLYCOPEGYLATED 1 IU	Bill through DSHS	Not Cov	Not Cov	Not Cov	Not Cov	Not Cov	No	Yes
J7205	INJECTION FACTOR VIII FC FUSION PROTEIN PER IU	Bill through DSHS	Not Cov	Not Cov	Not Cov	Not Cov	Not Cov	Yes	Yes
J7207	INJECTION FACTOR VIII PEGYLATED 1 I.U.	Bill through DSHS	Not Cov	Not Cov	Not Cov	Not Cov	Not Cov	Yes	Yes
J7208	INJECTION FACTOR VIII PEGYLATED-AUCL 1 IU	Bill through DSHS	Not Cov	Not Cov	Not Cov	Not Cov	Not Cov	Yes	Yes
J7209	INJECTION FACTOR VIII 1 I.U.	Bill through DSHS	Not Cov	Not Cov	Not Cov	Not Cov	Not Cov	Yes	Yes
J7210	INJECTION FACTOR VIII AFSTYLA 1 I.U.	Bill through DSHS	Not Cov	Not Cov	Not Cov	Not Cov	Not Cov	Yes	Yes
J7211	INJECTION FACTOR VIII KOVALTRY 1 I.U.	Bill through DSHS	Not Cov	Not Cov	Not Cov	Not Cov	Not Cov	Yes	Yes
J7296	LEVONORGESTREL-RELEASING IU COC SYS 19.5 MG		No	No	Not Cov	No		Not Cov	No
J7297	LEVONORGESTREL-RLS INTRAUTERINE COC SYS 52 MG		No	No	Not Cov	No		Not Cov	No
J7298	LEVONORGESTREL-RLS INTRAUTERINE COC SYS 52 MG		No	No	Not Cov	No		Not Cov	No
J7300	INTRAUTERINE COPPER CONTRACEPTIVE		No	No	Not Cov	No		Not Cov	No
J7301	LEVONORGESTREL-RLS INTRAUTERINE COC SYS 13.5 MG		No	No	Not Cov	No		Not Cov	No
J7303	CONTRACEPT SUPPLY HORMONE CONTAINING VAG RING EA		Not Cov	No	Not Cov	No		Not Cov	No
J7304	CONTRACEPTIVE SUPPLY HORMONE CONTAINING PATCH EA		Not Cov	No	Not Cov	No		Not Cov	No
J7306	LEVONORGESTREL CNTRACPTV IMPL SYS INCL IMPL AND SPL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
J7307	ETONOGESTREL CNTRACPT IMPL SYS INCL IMPL AND SPL		No	No	Not Cov	No		Not Cov	No
J7308	AMINOLEVULINIC ACID HCL TOP ADMN 20PCT 1 U DOSE		Yes	Yes	Not Cov	Yes		Yes	Yes
J7309	METHYL AMINOLEVULINATE MAL TOP ADMIN 16.8PCT 1 G		Yes	Yes	Not Cov	Yes		Yes	Yes
J7310	GANCICLOVIR 4.5 MG LONG-ACTING IMPLANT		Yes	Yes	Not Cov	Yes		Yes	Yes
J7311	FLUOCINOLONE ACETONIDE INTRAVITREAL IMPLANT		Yes	Yes	Not Cov	Yes		Yes	Yes
J7312	INJECTION DEXAMETHASONE INTRAVITREAL IMPL 0.1 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J7313	INJECTION FA INTRAVITREAL IMPLANT 0.01 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J7314	INJECTION FA INTRAVITREAL IMPL 0.01 MG		Yes	Yes	Not Cov	Yes		TBD	TBD
J7315	MITOMYCIN OPHTHALMIC 0. 2 MG		No	No	Not Cov	No		No	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
J7316	INJECTION OCRIPLASMIN 0.125 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J7318	HYALURONAN DERIVATIVE DUROLANE FOR IA INJ 1 MG		Not Cov	Not Cov	Not Cov	Not Cov		No	Yes
J7320	HYALURONAN DERIVATIVE GENVISC 850 IA INJ 1 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J7321	HYAL DERIV HYALGAN SUPARTZ VISCO-3 IA INJ-DOSE		Yes	Yes	Not Cov	Yes		Yes	Yes
J7322	HYALURONAN DERIVATIVE HYMOVIS IA INJ 1 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J7323	HYALURONAN DERIVATIVE EUFLEXXA IA INJ PER DOSE		Yes	Yes	Not Cov	Yes		Yes	Yes
J7324	HYALURONAN DERIV ORTHOVISC IA INJ PER DOSE		Yes	Yes	Not Cov	Yes		Yes	Yes
J7325	HYALURONAN DERIV SYNVISCO SYNVISCO-ONE IA INJ 1 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J7326	HYALURONAN DERIV GEL-ONE INTRA-ARTIC INJ PER DOS		Yes	Yes	Not Cov	Yes		Yes	Yes
J7327	HYALURONAN DERIVATIVE MONOVISC IA INJ PER DOSE		Yes	Yes	Not Cov	Yes		Yes	Yes
J7328	HYALURONAN DERIVATIVE GELSYN-3 FOR IA INJ 0.1 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J7329	HYALURONAN DERIVATIVE TRIVISC FOR IA INJ 1 MG		Not Cov	Not Cov	Not Cov	Not Cov		No	Yes
J7330	AUTOLOGOUS CULTURED CHONDROCYTES IMPLANT		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
J7331	HYALURONAN DERIVATIVE SYNOJOYNT IA INJ 1 MG		Not Cov	Not Cov	Not Cov	Not Cov		TBD	TBD
J7332	HYALURONAN DERIVATIVE TRILURON IA INJ 1 MG		Not Cov	Not Cov	Not Cov	Not Cov		TBD	TBD
J7336	CAPSAICIN 8PCT PATCH PER SQ CM		No	No	Not Cov	No		No	No
J7340	CARBIDPA 5 MG LEVODPA 20 MG EN SUSP 100 ML		Yes	Yes	Not Cov	Yes		Yes	Yes
J7342	INSTILLATION CIPROFLOXACIN OTIC SUSPENSION 6 MG		No	No	Not Cov	No		No	No
J7345	AMINOLEVULINIC ACID HCL TOP ADMIN 10PCT GEL 10 MG		Not Cov	Not Cov	Not Cov	Not Cov		No	No
J7401	MOMETASONE FUROATE SINUS IMPLANT 10 MCG		No	No	Not Cov	No		TBD	TBD
J7500	AZATHIOPRINE ORAL 50 MG		Not Cov	No	Not Cov	No		No	No
J7501	AZATHIOPRINE PARENTERAL 100 MG		No	No	Not Cov	No		No	No
J7502	CYCLOSPORINE ORAL 100 MG		Not Cov	No	Not Cov	No		No	No
J7503	TACROLIMUS EXTENDED RELEASE ORAL 0.25 MG		No	No	Not Cov	No		No	No
J7504	LYMPHCYT IMMUN GLOB EQUINE PARENTERAL 250 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J7505	MUROMONAB-CD3 PARENTERAL 5 MG		Not Cov	Not Cov	Not Cov	Not Cov		No	No
J7507	TACROLIMUS IMMEDIATE RELEASE ORAL 1 MG		No	No	Not Cov	No		No	No
J7508	TACROLIMUS EXTENDED RELEASE ORAL 0.1 MG		No	No	Not Cov	No		No	No
J7509	METHYLPREDNISOLONE ORAL PER 4 MG		No	No	Not Cov	No		No	No
J7510	PREDNISOLONE ORAL PER 5 MG		No	No	Not Cov	No		No	No
J7511	LYMPHCYT IMMUN GLOB RABBIT PARENTERAL 25 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J7512	PREDNISONE IMMEDIATE RLSE DELAYED RLSE ORAL 1 MG		No	No	Not Cov	No		No	No
J7513	DACLIZUMAB PARENTERAL 25 MG		No	No	Not Cov	No		No	No
J7515	CYCLOSPORINE ORAL 25 MG		No	No	Not Cov	No		No	No
J7516	CYCLOSPORINE PARENTERAL 250 MG		No	No	Not Cov	No		No	No
J7517	MYCOPHENOLATE MOFETIL ORAL 250 MG		No	No	Not Cov	No		No	No
J7518	MYCOPHENOLIC ACID ORAL 180 MG		No	No	Not Cov	No		No	No
J7520	SIROLIMUS ORAL 1 MG		No	No	Not Cov	No		No	No
J7525	TACROLIMUS PARENTERAL 5 MG		No	No	Not Cov	No		No	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
J7527	EVEROLIMUS ORAL 0. 25 MG		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
J7599	IMMUNOSUPPRESSIVE DRUG NOT OTHERWISE CLASSIFIED		Yes	Yes	Not Cov	Yes		Yes	Yes
J7604	ACETYLCYSTEINE INHAL SOL COMP PROD UNIT DOSE P G		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
J7605	ARFORMOTEROL INHAL SOL NONCOMP UNIT DOSE 15 MG		Not Cov	Not Cov	Not Cov	Not Cov		No	No
J7606	FORMOTEROL FUMARATE INHAL SOL U DOSE FORM 20 MCG		Not Cov	Not Cov	Not Cov	Not Cov		No	No
J7607	LEVALBUTEROL INHAL CP PROD THRU DME CONC 0.5 MG		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
J7608	ACETYLCYSTEINE INHAL SOL NONCOMP UNIT DOSE PER G		Not Cov	No	Not Cov	No		No	No
J7609	ALBUTEROL INHAL CP PROD THRU DME UNIT DOSE 1 MG		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
J7610	ALBUTEROL INHAL SOL ADMIN THRU DME CONC 1 MG		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
J7611	ALBUTEROL INHAL NON-CP THRU DME CONC FORM 1 MG		Not Cov	No	Not Cov	No		No	No
J7612	LEVALBUTEROL INHAL NON-CP THRU DME CONC 0.5 MG		Not Cov	No	Not Cov	No		No	No
J7613	ALBUTEROL INHAL NON-CP PROD THRU DME U DOSE 1 MG		Not Cov	No	Not Cov	No		No	No
J7614	LEVALBUTEROL INHAL NON-CP THRU DME U DOSE 0.5 MG		Not Cov	No	Not Cov	No		No	No
J7615	LEVALBUTEROL INHAL SOL THRU DME UNIT DOSE 0.5 MG		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
J7620	ALBUTEROL TO 2.5 MG AND IPRATROPIUM BROM TO 0.5 MG		Not Cov	No	Not Cov	No		No	No
J7622	BECLOMETHASONE INHAL CP PROD UNIT DOSE PER MG		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
J7624	BETAMETHASONE INHAL CP PROD DME UNIT DOSE PER MG		Not Cov	No	Not Cov	No		Not Cov	No
J7626	BUDESONIDE INHAL NON-CP UNIT DOSE UP TO 0.5 MG		Not Cov	No	Not Cov	No		No	No
J7627	BUDESONIDE INHAL CP PROD UNIT DOSE UP TO 0.5 MG		Not Cov	No	Not Cov	No		Not Cov	No
J7628	BITOLTEROL MESYLATE INHAL CP PROD CONC PER MG		Not Cov	No	Not Cov	No		Not Cov	No
J7629	BITOLTEROL MESYLATE INHAL CP UNIT DOSE PER MG		Not Cov	No	Not Cov	No		Not Cov	No
J7631	CROMOLYN SODIUM INHALATION SOL NONCP UD P 10 MG		Not Cov	No	Not Cov	No		No	No
J7632	CROMOLYN SODIUM INHAL SOL COMP PROD UD 10 MG		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
J7633	BUDESONIDE INHAL NON-CP CONC FORM PER 0.25 MG		Not Cov	No	Not Cov	No		Not Cov	No
J7634	BUDESONIDE INHAL CP PROD THRU DME CONC 0.25 MG		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
J7635	ATROPINE INHAL SOL COMP PROD CONC FORM PER MG		Not Cov	No	Not Cov	No		Not Cov	No

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J7636	ATROPINE INHAL COMP PROD UNIT DOSE FORM PER MG		Not Cov	No	Not Cov	No		Not Cov	No
J7637	DEXAMETHASONE INHAL COMP PROD CONC FORM PER MG		Not Cov	No	Not Cov	No		Not Cov	No
J7638	DEXAMETHASONE INHAL COMP PROD UNIT DOSE PER MG		Not Cov	No	Not Cov	No		Not Cov	No
J7639	DORNASE ALFA INHAL SOL NONCOMP UNIT DOSE PER MG		Not Cov	Yes	Not Cov	Yes		Yes	Yes
J7640	FORMOTEROL INHAL COMP PROD UNIT DOSE FORM 12 MCG		No	No	Not Cov	No		Not Cov	No
J7641	FLUNISOLIDE INHAL COMP PROD UNIT DOSE PER MG		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
J7642	GLYCOPYRROLATE INHAL COMP PROD CONC FORM PER MG		Not Cov	No	Not Cov	No		Not Cov	No
J7643	GLYCOPYRROLATE INHAL COMP UNIT DOSE FORM PER MG		Not Cov	No	Not Cov	No		Not Cov	No
J7644	IPRATROPIUM BROMIDE INHAL NON-CP U DOSE PER MG		Not Cov	No	Not Cov	No		No	No
J7645	IPRATROPIUM BROMIDE INHAL THRU DME U DOSE PER MG		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
J7647	ISOETHARINE HCL INHAL CP PROD THRU DME PER MG		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
J7648	ISOETHARINE HCl INHAL NON-CP CONC FORM PER MG		Not Cov	No	Not Cov	No		No	No
J7649	ISOETHARINE HCl NON-COMP UNIT DOSE FORM PER MG		Not Cov	No	Not Cov	No		No	No
J7650	ISOETHARINE HCl INHAL THRU DME UNIT DOSE PER MG		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
J7657	ISOPROTERENOL HCl INHAL CP PROD THRU DME PER MG		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
J7658	ISOPROTERENOL HCl INHAL NON-CP CONC FORM PER MG		Not Cov	No	Not Cov	No		No	No
J7659	ISOPROTERENOL HCl INHAL NON-CP UNIT DOSE PER MG		Not Cov	No	Not Cov	No		No	No
J7660	ISOPROTERENOL HCl INHAL THRU DME U DOSE PER MG		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
J7665	MANNITOL ADMINISTERED THROUGH AN INHALER 5 MG		Not Cov	No	Not Cov	No		No	No
J7667	METAPROTERENOL SULFATE INHAL CP PROD CONC 10 MG		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
J7668	METAPROTERENOL SULF INHAL NON-CP CONC PER 10 MG		Not Cov	No	Not Cov	No		No	No
J7669	METAPROTERENOL SULF INHAL NON-CP UNIT DOSE 10 MG		Not Cov	No	Not Cov	No		No	No
J7670	METAPROTERENOL SULFATE INHAL THRU DME PER 10 MG		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
J7674	METHACHOLINE CHLORID INHAL SOL THRU NEB PER 1 MG		No	Not Cov	Not Cov	Not Cov		No	No
J7676	PENTAMIDINE ISETHIONATE I SOL CP PROD U D 300 MG		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No

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			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
J7677	REVEFENACIN INHAL SOL NONCOMPND ADM DME 1 MCG		Not Cov	Not Cov	Not Cov	Not Cov		No	Yes
J7680	TERBUTALINE SULFATE INHAL COMP CONC FORM PER MG		Not Cov	No	Not Cov	No		Not Cov	No
J7681	TERBUTALINE SULFATE INHAL COMP UNIT DOSE PER MG		Not Cov	No	Not Cov	No		Not Cov	No
J7682	TOBRAMYCIN INHAL NON-COMP UNIT DOSE PER 300 MG		Not Cov	Yes	Not Cov	Yes		Yes	Yes
J7683	TRIAMCINOLONE INHAL COMP PROD CONC FORM PER MG		Not Cov	No	Not Cov	No		Not Cov	No
J7684	TRIAMCINOLONE INHAL COMP PROD UNIT DOSE PER MG		Not Cov	No	Not Cov	No		Not Cov	No
J7685	TOBRAMYCIN INHAL CP PROD THRU DME U DOSE 300 MG		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
J7686	TREPROSTINIL INHAL SOLUTION UNIT DOSE 1.74 MG		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
J7699	NOC DRUGS INHALATION SOLUTION ADMINED THRU DME		Not Cov	Yes	Not Cov	Yes		Yes	Yes
J7799	NOC RX OTH THAN INHALATION RX ADMINED THRU DME		Yes	Yes	Not Cov	Yes		Yes	Yes
J7999	COMPOUNDED DRUG NOT OTHERWISE CLASSIFIED		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
J8498	ANTIEMETIC DRUG RECTAL SUPPOSITORY NOS		Not Cov	Yes	Not Cov	Yes		Yes	Yes
J8499	PRESCRIPTION DRUG ORAL NONCHEMOTHERAPEUTIC NOS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Yes
J8501	APREPITANT ORAL 5 MG		Not Cov	Not Cov	Not Cov	Not Cov		No	No
J8510	BUSULFAN ORAL 2 MG		No	No	Not Cov	No		No	No
J8515	CABERGOLINE ORAL 0.25 MG		No	No	Not Cov	No		Not Cov	No
J8520	CAPECITABINE ORAL 150 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J8521	CAPECITABINE ORAL 500 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J8530	CYCLOPHOSPHAMIDE ORAL 25 MG		No	No	Not Cov	No		No	No
J8540	DEXAMETHASONE ORAL 0.25 MG		No	No	Not Cov	No		No	No
J8560	ETOPOSIDE ORAL 50 MG		No	No	Not Cov	No		No	No
J8562	FLUDARABINE PHOSPHATE ORAL 10 MG		No	No	Not Cov	No		No	No
J8565	GEFITINIB ORAL 250 MG		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
J8597	ANTIEMETIC DRUG ORAL NOT OTHERWISE SPECIFIED		Yes	Yes	Not Cov	Yes		Yes	Yes
J8600	MELPHALAN ORAL 2 MG		No	No	Not Cov	No		No	No
J8610	METHOTREXATE ORAL 2.5 MG		No	No	Not Cov	No		No	No
J8650	NABILONE ORAL 1 MG		Not Cov	Not Cov	Not Cov	Not Cov		No	No
J8655	NETUPITANT 300 MG AND PALONOSETRON 0.5 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J8670	ROLAPITANT ORAL 1 MG		Yes	Not Cov	Not Cov	Not Cov		Yes	Yes
J8700	TEMOZOLOMIDE ORAL 5 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J8705	TOPOTECAN ORAL 0.25 MG		No	No	Not Cov	No		No	No
J8999	PRESCRIPTION DRUG ORAL CHEMOTHERAPEUTIC NOS		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
J9000	INJECTION DOXORUBICIN HCL 10 MG		No	No	Not Cov	No		Yes	No
J9015	INJECTION ALDESLEUKIN PER SINGLE USE VIAL		Yes	Yes	Not Cov	Yes		Yes	Yes
J9017	INJECTION ARSENIC TRIOXIDE 1 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J9019	INJECTION ASPARAGINASE ERWINAZE 1000 IU		Yes	Yes	Not Cov	Yes		Yes	Yes
J9020	INJECTION ASPARAGINASE 10000 UNITS		No	No	Not Cov	No		No	No

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Code	Code Description	Comments	Apple Health & IMC Medical				IMC / BHSO (Mental Health covered svcs)	Medicare	Market Place
			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
J9022	INJECTION ATEZOLIZUMAB 10 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J9023	INJECTION AVELUMAB 10 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J9025	INJECTION AZACITIDINE 1 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J9027	INJECTION CLOFARABINE 1 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J9030	BCG LIVE INTRAVESICAL INSTILLATION 1 MG		Not Cov	Not Cov	Not Cov	Not Cov		No	Yes
J9032	INJECTION BELINOSTAT 10 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J9033	INJECTION BENDAMUSTINE HCL TREANDA 1 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J9034	INJECTION BENDAMUSTINE HCL BENDEKA 1 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J9035	INJECTION BEVACIZUMAB 10 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J9036	INJECTION BENDAMUSTINE HYDROCHLORIDE 1 MG		Yes	Not Cov	Not Cov	Not Cov		No	Yes
J9039	INJECTION BLINATUMOMAB 1 MICROGRAM		Yes	Yes	Not Cov	Yes		Yes	Yes
J9040	INJECTION BLEOMYCIN SULFATE 15 UNITS		Yes	Yes	Not Cov	Yes		Yes	Yes
J9041	INJECTION BORTEZOMIB 0.1 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J9042	INJECTION BRENTUXIMAB VEDOTIN 1 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J9043	INJECTION CABAZITAXEL 1 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J9044	INJECTION BORTEZOMIB NOS 0.1 MG		Yes	Yes	Not Cov	Yes		No	Yes
J9045	INJECTION CARBOPLATIN 50 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J9047	INJECTION CARFILZOMIB 1 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J9050	INJECTION CARMUSTINE 100 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J9055	INJECTION CETUXIMAB 10 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J9057	INJECTION COPANLISIB 1 MG		Yes	Yes	Not Cov	Yes		No	Yes
J9060	INJECTION CISPLATIN POWDER OR SOLUTION 10 MG		No	No	Not Cov	No		No	No
J9065	INJECTION CLADRIBINE PER 1 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J9070	CYCLOPHOSPHAMIDE 100 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J9098	INJECTION CYTARABINE LIPOSOME 10 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J9100	INJECTION CYTARABINE 100 MG		No	No	Not Cov	No		No	No
J9118	INJECTION CALASPARGASE PEGOL-MKNL 10 UNITS		Not Cov	Not Cov	Not Cov	Not Cov		TBD	TBD
J9119	INJECTION CEMIPILIMAB-RWLC 1 MG		No	No	Not Cov	No		TBD	TBD
J9120	INJECTION DACTINOMYCIN 0.5 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J9130	DACARBAZINE 100 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J9145	INJECTION DARATUMUMAB 10 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J9150	INJECTION DAUNORUBICIN 10 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J9151	INJ DAUNORUBICIN CITRATE LIPOSOMAL FORM 10 MG		No	No	Not Cov	No		No	No
J9153	INJECTION LIPOSOMAL 1 MG DNR AND 2.27 MG CA		Yes	Yes	Not Cov	Yes		No	Yes
J9155	INJECTION DEGARELIX 1 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J9160	INJECTION DENILEUKIN DIFTITOX 300 MCG		Yes	Yes	Not Cov	Yes		Yes	Yes
J9165	INJECTION DIETHYLSTILBESTROL DIPHOSPHATE 250 MG		No	No	Not Cov	No		No	No
J9171	INJECTION DOCETAXEL 1 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J9173	INJECTION DURVALUMAB 10 MG		Yes	Yes	Not Cov	Yes		No	Yes
J9175	INJECTION ELLIOTTS B SOLUTION 1 ML		No	No	Not Cov	No		No	No
J9176	INJECTION ELOTUZUMAB 1 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J9178	INJECTION EPIRUBICIN HCL 2 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J9179	INJECTION ERIBULIN MESYLATE 0.1 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J9181	INJECTION ETOPOSIDE 10 MG		No	No	Not Cov	No		No	No
J9185	INJECTION FLUDARABINE PHOSPHATE 50 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J9190	INJECTION FLUOROURACIL 500 MG		Yes	Yes	Not Cov	Yes		Yes	Yes

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
J9200	INJECTION FLOXURIDINE 500 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J9201	INJECTION GEMCITABINE HCL 200 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J9202	GOSERELIN ACETATE IMPLANT PER 3.6 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J9203	INJECTION GEMTUZUMAB OZOGAMICIN 0.1 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J9204	INJECTION MOGAMULIZUMAB-KPKC 1 MG		Yes	Yes	Not Cov	Yes		TBD	TBD
J9205	INJECTION IRINOTECAN LIPOSOME 1 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J9206	INJECTION IRINOTECAN 20 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J9207	INJECTION IXABEPILONE 1 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J9208	INJECTION IFOSFAMIDE 1 G		Yes	Yes	Not Cov	Yes		Yes	Yes
J9209	INJECTION MESNA 200 MG		No	No	Not Cov	No		No	No
J9210	INJECTION EMAPALUMAB-LZSG 1 MG		Yes	Yes	Not Cov	Yes		No	TBD
J9211	INJECTION IDARUBICIN HCL 5 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J9212	INJECTION INTERFERON ALFA-1 RECOMBINANT 1 MCG		No	No	Not Cov	No		No	No
J9213	INJECTION INTERFERON ALFA-2A RECOMBINANT 3 M U		No	No	Not Cov	No		Not Cov	No
J9214	INJECTION INTERFERON ALFA-2B RECOMBINANT 1 M U		Yes	Yes	Not Cov	Yes		Yes	Yes
J9215	INJECTION INTERFERON ALFA-N3 250,000 IU		Yes	Yes	Not Cov	Yes		Yes	Yes
J9216	INJECTION INTERFERON GAMMA-1B 3 MILLION UNITS		Yes	Yes	Not Cov	Yes		Yes	Yes
J9217	LEUPROLIDE ACETATE 7.5 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J9218	LEUPROLIDE ACETATE PER 1 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J9219	LEUPROLIDE ACETATE IMPLANT 65 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J9225	HISTRELIN IMPLANT VANTAS 50 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J9226	HISTRELIN IMPLANT SUPPRELIN LA 50 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J9228	INJECTION IPILIMUMAB 1 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J9229	INJECTION INOTUZUMAB OZOGAMICIN 0.1 MG		Yes	Yes	Not Cov	Yes		No	Yes
J9230	INJECTION MECHLORETHAMINE HCL 10 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J9245	INJECTION MELINJECTION MELPHALAN HCL 50 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J9250	METHOTREXATE SODIUM 5 MG		No	No	Not Cov	No		No	No
J9260	METHOTREXATE SODIUM 50 MG		No	No	Not Cov	No		No	No
J9261	INJECTION NELARABINE 50 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J9262	INJECTION OMACETAXINE MEPESUCCINATE 0.01 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J9263	INJECTION OXALIPLATIN 0.5 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J9264	INJECTION PACLITAXEL PROTEINBOUND PARTICLES 1 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J9266	INJECTION PEGASPARGASE PER SINGLE DOSE VIAL		Yes	Yes	Not Cov	Yes		Yes	Yes
J9267	INJECTION PACLITAXEL 1 MG		No	No	Not Cov	No		Yes	No
J9268	INJECTION PENTOSTATIN 10 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J9269	INJECTION TAGRAXOFUSP-ERZS 10 MCG		Yes	Yes	Not Cov	Yes		TBD	TBD
J9270	INJECTION PLICAMYCIN 2.5 MG		No	No	Not Cov	No		No	No
J9271	INJECTION PEMBROLIZUMAB 1 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J9280	INJECTION MITOMYCIN 5 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J9285	INJECTION OLARATUMAB 10 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J9293	INJECTION MITOXANTRONE HCL PER 5 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J9295	INJECTION NECITUMUMAB 1 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J9299	INJECTION NIVOLUMAB 1 MG		Yes	Yes	Not Cov	Yes		Yes	Yes

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
J9301	INJECTION OBINUTUZUMAB 10 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J9302	INJECTION OFATUMUMAB 10 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J9303	INJECTION PANITUMUMAB 10 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J9305	INJECTION PEMETREXED 10 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J9306	INJECTION PERTUZUMAB 1 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J9307	INJECTION PRALATREXATE 1 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J9308	INJECTION RAMUCIRUMAB 5 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J9311	INJECTION RITUXIMAB 10 MG AND HYALURONIDASE		Yes	Yes	Not Cov	Yes		No	Yes
J9312	INJECTION RITUXIMAB 10 MG		Yes	Yes	Not Cov	Yes		No	Yes
J9313	INJECTION MOXETUMOMAB PASUDOTOX-TDFK 0.01 MG		Yes	Yes	Not Cov	Yes		TBD	TBD
J9315	INJECTION ROMIDEPSIN 1 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J9320	INJECTION STREPTOZOCIN 1 G		No	No	Not Cov	No		No	No
J9325	INJ TALIMOGENE LAHERPAREPVEC PER 1 M PLAQUE F U		Yes	Not Cov	Not Cov	Yes		Yes	Yes
J9328	INJECTION TEMOZOLOMIDE 1 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J9330	INJECTION TEMSIROLIMUS 1 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J9340	INJECTION THIOTEPA 15 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J9351	INJECTION TOPOTECAN 0.1 MG	PA Marketplace only	No	No	Not Cov	No		Yes	Yes
J9352	INJECTION TRABECTEDIN 0.1 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J9354	INJ ADO-TRASTUZUMAB EMTANSINE 1 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J9355	INJECTION TRASTUZUMAB 10 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J9356	INJECTION TRASTUZUMAB 10 MG AND HYALURONIDASE-OYSK		Yes	Yes	Not Cov	Yes		No	Yes
J9357	INJECTION VALRUBICIN INTRAVESICAL 200 MG		Yes	Yes	Not Cov	Yes		No	Yes
J9360	INJECTION VINBLASTINE SULFATE 1 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J9370	VINCRISTINE SULFATE 1 MG		No	No	Not Cov	No		No	No
J9371	INJECTION VINCRISTINE SULFATE LIPOSOME 1 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J9390	INJECTION VINOURELBINE TARTRATE 10 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J9395	INJECTION FULVESTRANT 25 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J9400	INJECTION ZIV-AFLIBERCEPT 1 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J9600	INJECTION PORFIMER SODIUM 75 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
J9999	NOT OTHERWISE CLASSIFIED ANTINEOPLASTIC DRUG		Yes	Yes	Not Cov	Yes		Yes	Yes
K0001	STANDARD WHEELCHAIR		Not Cov	No	Not Cov	No		No	No
K0002	STANDARD HEMI WHEELCHAIR		Not Cov	No	Not Cov	No		No	No
K0003	LIGHTWEIGHT WHEELCHAIR		Not Cov	No	Not Cov	No		No	No
K0004	HIGH STRENGTH LIGHTWEIGHT WHEELCHAIR		Not Cov	No	Not Cov	No		No	No
K0005	ULTRALIGHTWEIGHT WHEELCHAIR		Not Cov	No	Not Cov	No		No	No
K0006	HEAVY-DUTY WHEELCHAIR		Not Cov	No	Not Cov	No		No	No
K0007	EXTRA HEAVY-DUTY WHEELCHAIR		Not Cov	No	Not Cov	No		No	No
K0008	CUSTOM MANUAL WHEELCHAIR BASE		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
K0009	OTHER MANUAL WHEELCHAIR BASE		Not Cov	Yes	Not Cov	Yes		Yes	Yes
K0010	STANDARD-WEIGHT FRAME MOTORIZED POWER WHEELCHAIR		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
K0011	STD-WT FRME MOTRIZD PWR WHLCHAIR W PROG CNTRL		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
K0012	LIGHTWEIGHT PORTABLE MOTORIZED POWER WHEELCHAIR		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
K0013	CUSTOM MOTORIZED POWER WHEELCHAIR BASE		Not Cov	Not Cov	Not Cov	Not Cov		Yes	No
K0014	OTHER MOTORIZED POWER WHEELCHAIR BASE		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
K0015	DETACHABLE NONADJUSTABLE HEIGHT ARMREST EACH		Not Cov	No	Not Cov	No		No	No
K0017	DETACHABLE ADJUST HT ARMREST BASE REPL ONLY EA		Not Cov	No	Not Cov	No		No	No
K0018	DTACHBLE ADJUST HT ARMREST UP PRTN REPL ONLY EA		Not Cov	No	Not Cov	No		No	No
K0019	ARM PAD REPLACEMENT ONLY EACH		Not Cov	No	Not Cov	No		No	No
K0020	FIXED ADJUSTABLE HEIGHT ARMREST PAIR		Not Cov	No	Not Cov	No		No	No
K0037	HIGH MOUNT FLIP-UP FOOTREST REPLACEMENT ONLY EA		Not Cov	No	Not Cov	No		No	No
K0038	LEG STRAP EACH		Not Cov	No	Not Cov	No		No	No
K0039	LEG STRAP H STYLE EACH		Not Cov	No	Not Cov	No		No	No
K0040	ADJUSTABLE ANGLE FOOTPLATE EACH		Not Cov	No	Not Cov	No		No	No
K0041	LARGE SIZE FOOTPLATE EACH		Not Cov	No	Not Cov	No		No	No
K0042	STANDARD SIZE FOOTPLATE REPLACEMENT ONLY EACH		Not Cov	No	Not Cov	No		No	No
K0043	FOOTREST LOWER EXTENSION TUBE REPLACEMENT ONLY EA		Not Cov	No	Not Cov	No		No	No
K0044	FOOTREST UPPER HANGER BRACKET REPL ONLY EACH		Not Cov	No	Not Cov	No		No	No
K0045	FOOTREST COMPLETE ASSEMBLY REPLACEMENT ONLY EACH		Not Cov	No	Not Cov	No		No	No
K0046	ELEVATING LEGREST LWR EXTENSN TUBE REPL ONLY EA		Not Cov	No	Not Cov	No		No	No
K0047	ELEVATING LEGREST UPR HANGER BRACKT REPL ONLY EA		Not Cov	No	Not Cov	No		No	No
K0050	RATCHET ASSEMBLY REPLACEMENT ONLY		Not Cov	No	Not Cov	No		No	No
K0051	CAM RLS ASSEM FOOTREST LEGREST REPL ONLY EACH		Not Cov	No	Not Cov	No		No	No
K0052	SWINGAWAY DETACHABLE FOOTRESTS REPL ONLY EACH		Not Cov	No	Not Cov	No		No	No
K0053	ELEVATING FOOTRESTS ARTICULATING EACH		Not Cov	No	Not Cov	No		No	No
K0056	SEAT HT UNDER 17 EQ TO OR GRT 21 IN LTWT ULTRALTWT WHLCHA		Not Cov	No	Not Cov	No		No	No
K0065	SPOKE PROTECTORS EACH		Not Cov	No	Not Cov	No		No	No
K0069	REAR WHL ASM CMPL SLD TIRE SPKE MLD REPL ONLY EA		Not Cov	No	Not Cov	No		No	No
K0070	REAR WHL ASM COMP PNEUM TIRE SPKS MLD RPL ONLY E		Not Cov	No	Not Cov	No		No	No
K0071	FRONT CASTER ASSEM COMPLETE PN TIRE REPL ONLY EA		Not Cov	No	Not Cov	No		No	No
K0072	FRONT C ASSEMBLY COMPL SEMIPNEU TIRE REPL ONLY E		Not Cov	No	Not Cov	No		No	No
K0073	CASTER PIN LOCK EACH		Not Cov	No	Not Cov	No		No	No
K0077	FRONT CASTER ASSEMBLY COMPL SLD TIRE REPL ONLY E		Not Cov	No	Not Cov	No		No	No

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			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
K0098	DRIVE BELT FOR POWER WHEELCHAIR REPLACEMNT ONLY		Not Cov	No	Not Cov	No		No	No
K0105	IV HANGER EACH		Not Cov	No	Not Cov	No		No	No
K0108	OTHER ACCESSORIES		Not Cov	Yes	Not Cov	Yes		Yes	Yes
K0195	ELEVATING LEGREST PAIR		Not Cov	No	Not Cov	No		No	No
K0455	INFUSION PUMP UNINTERRUPTED PARENTERAL ADMIN MED		Not Cov	Not Cov	Not Cov	Not Cov		No	No
K0462	TEMP REPL PT OWNED EQUIP BEING REPR ANY TYPE		Not Cov	Not Cov	Not Cov	Not Cov		No	No
K0552	SPL EXT NON-INS RX INFUS PMP SYR T CART STERL EA		Not Cov	Not Cov	Not Cov	Not Cov		No	No
K0553	SUPPLY ALLOW FOR TX CGM1 MO SPL EQ 1 U OF SERVICE		Yes	Yes	Not Cov	Yes		No	Yes
K0554	RECEIVER DEDICATED FOR USE W THERAPEUTIC GCM SYS		Yes	Yes	Not Cov	Yes		No	Yes
K0601	REPL BATTERY EXT INFUS PUMP SILVER OXIDE 1.5 V EA		Not Cov	No	Not Cov	No		No	No
K0602	REPL BATTERY EXT INFUS PUMP SILVER OXIDE 3 V EA		Not Cov	No	Not Cov	No		No	No
K0603	REPL BATTERY EXT INFUS PUMP ALKALINE 1.5 VOLT EA		Not Cov	No	Not Cov	No		No	No
K0604	REPL BATTERY EXT INFUS PUMP LITHIUM 3.6 VOLT EA		Not Cov	No	Not Cov	No		No	No
K0605	REPL BATTERY EXT INFUS PUMP LITHIUM 4.5 VOLT EA		Not Cov	No	Not Cov	No		No	No
K0606	AUTO EXT DEFIB W INTGR ECG ANALY GARMENT TYPE		Not Cov	Not Cov	Not Cov	Yes		Yes	Yes
K0607	REPL BATTERY AUTO EXT DEFIB GARMNT TYPE ONLY EA		Not Cov	Not Cov	Not Cov	No		No	No
K0608	REPLACEMENT GARMENT USE W AUTO EXTERNAL DEFIB EA		Not Cov	Not Cov	Not Cov	No		No	No
K0609	REPL ELEC W AUTO EXT DEFIB GARMNT TYPE ONLY EA		Not Cov	Not Cov	Not Cov	No		No	No
K0669	WC ACCESS WC SEAT BACK CUSHION NO DME PDAC		Not Cov	Not Cov	Not Cov	Not Cov		No	No
K0672	ADD LOW EXT ORTHOSIS REMV SOFT INTERFACE REPL EA		Not Cov	No	Not Cov	No		No	No
K0730	CONTROLLED DOSE INHALATION DRUG DELIVERY SYSTEM		Not Cov	Not Cov	Not Cov	Not Cov		No	No
K0733	PWR WC 12-24 AMP HR SEALED LEAD ACID BATTERY EA		Not Cov	No	Not Cov	No		No	No
K0738	PORTABLE GASEOUS O2 SYS RENTAL; HOME COMPRESSOR		Not Cov	No	Not Cov	No		No	No
K0739	REPR SRVC DME NOT O2 RQR TECH CMPNT PER 15 MINS		Not Cov	No	Not Cov	No		No	No
K0740	REPR SRVC FOR O2 EQP RQR TECH CMPNT PER 15 MINS		Not Cov	No	Not Cov	No		Not Cov	No
K0743	SUCTION PUMP HOME MODEL PORTABLE FOR USE WOUNDS		Not Cov	No	Not Cov	No		No	No
K0744	ABSORB WD DR HOM MDL PRTBLE PAD SZ 16 SQ IN LESS		Not Cov	Not Cov	Not Cov	Not Cov		No	No
K0745	ABSRB WD DR HOM MDL PRT PAD OVER 16 SQ IN UNDER EQ 48 S		Not Cov	Not Cov	Not Cov	Not Cov		No	No
K0746	ABSORB WND DRSG HOM MDL PRTBLE PAD SZ OVER 48 SQ IN		Not Cov	Not Cov	Not Cov	Not Cov		No	No
K0800	PWR OP VEH GRP 1 STD PT WT CAP TO AND INCL 300 LBS		Not Cov	Yes	Not Cov	Yes		Yes	Yes
K0801	PWR OP VEH GRP 1 HEAVY DUTY PT 301 TO 450 LBS		Not Cov	Yes	Not Cov	Yes		Yes	Yes
K0802	PWR OP VEH GRP 1 VERY HEAVY DUTY PT 451-600 LBS		Not Cov	Yes	Not Cov	Yes		Yes	Yes

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Code	Code Description	Comments	Apple Health & IMC Medical				IMC / BHSO (Mental Health covered svcs)	Medicare	Market Place
			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
K0806	PWR OP VEH GRP 2 STD PT WT CAP TO AND INCL 300 LBS		Not Cov	Yes	Not Cov	Yes		Yes	Yes
K0807	PWR OP VEH GRP 2 HEAVY DUTY PT 301 TO 450 LBS		Not Cov	Yes	Not Cov	Yes		Yes	Yes
K0808	PWR OP VEH GRP 2 VERY HEAVY DUTY PT 451-600 LBS		Not Cov	Yes	Not Cov	Yes		Yes	Yes
K0812	POWER OPERATED VEHICLE NOT OTHERWISE CLASSIFIED		Not Cov	Yes	Not Cov	Yes		Yes	Yes
K0813	PWR WC GRP 1 STD PORT SLING SEAT PT TO 300 LBS		Not Cov	Yes	Not Cov	Yes		Yes	Yes
K0814	PWR WC GRP 1 STD PORT CAPT CHAIR PT TO 300 LBS		Not Cov	Yes	Not Cov	Yes		Yes	Yes
K0815	PWR WC GRP 1 STD SLING SEAT PT UP TO AND EQ 300 LBS		Not Cov	Yes	Not Cov	Yes		Yes	Yes
K0816	PWR WC GRP 1 STD CAPTAINS CHAIR PT TO AND EQ 300 LBS		Not Cov	Yes	Not Cov	Yes		Yes	Yes
K0820	PWR WC GRP 2 STD PORT SLING SEAT PT TO AND EQ 300 LBS		Not Cov	Yes	Not Cov	Yes		Yes	Yes
K0821	PWR WC GRP 2 STD PORT CAPT CHAIR PT TO AND EQ 300 LBS		Not Cov	Yes	Not Cov	Yes		Yes	Yes
K0822	PWR WC GRP 2 STD SLING SEAT PT TO AND EQ 300 LBS		Not Cov	Yes	Not Cov	Yes		Yes	Yes
K0823	PWR WC GRP 2 STD CAPTAINS CHAIR PT TO AND EQ 300 LBS		Not Cov	Yes	Not Cov	Yes		Yes	Yes
K0824	PWR WC GRP 2 HEVY DUTY SLING SEAT PT 301-450 LBS		Not Cov	Yes	Not Cov	Yes		Yes	Yes
K0825	PWR WC GRP 2 HEVY DUTY CAPT CHAIR PT 301-450 LBS		Not Cov	Yes	Not Cov	Yes		Yes	Yes
K0826	PWR WC GRP 2 VRY HVY DTY SLNG SEAT PT 451-600 LB		Not Cov	Yes	Not Cov	Yes		Yes	Yes
K0827	PWR WC GRP 2 VRY HVY DTY CAPT CHR PT 451-600 LBS		Not Cov	Yes	Not Cov	Yes		Yes	Yes
K0828	PWR WC GRP 2 XTRA HVY DUTY SLING SEAT PT 601LB OR GRT		Not Cov	Yes	Not Cov	Yes		Yes	Yes
K0829	PWR WC GRP 2 XTRA HVY DUTY CHAIR PT 601 LBS OR GRT		Not Cov	Yes	Not Cov	Yes		Yes	Yes
K0830	PWR WC GRP 2 STD SEAT ELEV SLING PT TO AND EQ 300 LBS		Not Cov	Yes	Not Cov	Yes		Yes	Yes
K0831	PWR WC GRP 2 STD SEAT ELEV CAP CHR PT TO 300 LB		Not Cov	Yes	Not Cov	Yes		Yes	Yes
K0835	PWR WC GRP 2 STD 1 PWR SLING SEAT PT TO 300 LBS		Not Cov	Yes	Not Cov	Yes		Yes	Yes
K0836	PWR WC GRP 2 STD 1 PWR CAPT CHAIR PT TO 300 LBS		Not Cov	Yes	Not Cov	Yes		Yes	Yes
K0837	PWR WC GRP 2 HVY 1 PWR SLING SEAT PT 301-450 LBS		Not Cov	Yes	Not Cov	Yes		Yes	Yes
K0838	PWR WC GRP 2 HVY 1 PWR CAPT CHAIR PT 301-450 LBS		Not Cov	Yes	Not Cov	Yes		Yes	Yes
K0839	PWR WC GRP 2 VRY HVY 1 PWR SLING PT 451-600 LBS		Not Cov	Yes	Not Cov	Yes		Yes	Yes
K0840	PWR WC GRP 2 XTRA HVY 1 PWR SLING PT 601 LBS OR GRT		Not Cov	Yes	Not Cov	Yes		Yes	Yes
K0841	PWR WC GRP 2 MX PWR SLING SEAT PT TO AND EQ 300 LBS		Not Cov	Yes	Not Cov	Yes		Yes	Yes
K0842	PWR WC GRP 2 STD MX PWR CAPT CHR PT TO AND EQ 300 LBS		Not Cov	Yes	Not Cov	Yes		Yes	Yes
K0843	PWR WC GRP 2 HVY MX PWR SLNG SEAT PT 301-450 LBS		Not Cov	Yes	Not Cov	Yes		Yes	Yes
K0848	PWR WC GRP 3 STD SLING SEAT PT TO AND EQ 300 LBS		Not Cov	Yes	Not Cov	Yes		Yes	Yes

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
K0849	PWR WC GRP 3 STD CAPTAIN CHAIR PT TO AND EQ 300 LBS		Not Cov	Yes	Not Cov	Yes		Yes	Yes
K0850	PWR WC GRP 3 HVY DUTY SLING SEAT PT 301-450 LBS		Not Cov	Yes	Not Cov	Yes		Yes	Yes
K0851	PWR WC GRP 3 HVY DUTY CAPT CHAIR PT 301-450 LBS		Not Cov	Yes	Not Cov	Yes		Yes	Yes
K0852	PWR WC GRP 3 V HVY DUTY SLING SEAT PT 451-600 LB		Not Cov	Yes	Not Cov	Yes		Yes	Yes
K0853	PWR WC GRP 3 HVY DUTY CAPT CHAIR PT 451-600 LBS		Not Cov	Yes	Not Cov	Yes		Yes	Yes
K0854	PWR WC GRP 3 XTRA HVY DTY SLNG SEAT PT 601 LBS OR GRT		Not Cov	Yes	Not Cov	Yes		Yes	Yes
K0855	PWR WC GRP 3X HVY DTY CHR PT WT CAP 601 LB OR GRT		Not Cov	Yes	Not Cov	Yes		Yes	Yes
K0856	PWR WC GRP 3 STD 1 PWR SLING SEAT PT TO AND EQ 300 LB PWR WC GRP 3 STD 1 PWR CAPT CHAIR PT TO AND EQ 300 LB		Not Cov	Yes	Not Cov	Yes		Yes	Yes
K0857	PWR WC GRP 3 HD 1 PWR SLING SEAT PT 301-450 LBS		Not Cov	Yes	Not Cov	Yes		Yes	Yes
K0858	PWR WC GRP 3 HD 1 PWR CAPT CHAIR PT 301-450 LBS		Not Cov	Yes	Not Cov	Yes		Yes	Yes
K0859	PWR WC GRP 3 V HD 1 PWR SLING SEAT PT 451-600 LB		Not Cov	Yes	Not Cov	Yes		Yes	Yes
K0860	PWR WC GRP 3 STD MX PWR SLNG SEAT PT TO AND EQ 300 LB		Not Cov	Yes	Not Cov	Yes		Yes	Yes
K0861	PWR WC GRP 3 HD MX PWR SLING SEAT PT 301-450 LBS		Not Cov	Yes	Not Cov	Yes		Yes	Yes
K0862	PWR WC GRP 3 V HD MX PWR SLNG SEAT PT 451-600 LB		Not Cov	Yes	Not Cov	Yes		Yes	Yes
K0863	PWR WC GRP 3 XTR HD MX PWR SLNG SEAT PT 601 LB OR GRT		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
K0864	PWR WC GRP 4 STD SLING SEAT PT TO AND EQ 300 LBS		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
K0865	PWR WC GRP 4 STD CAPTAIN CHAIR PT TO AND EQ 300 LBS		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
K0866	PWR WC GRP 4 HVY DUTY SLING SEAT PT 301-450 LBS		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
K0867	PWR WC GRP 4 V HVY DUTY SLING SEAT PT 451-600 LB		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
K0868	PWR WC GRP 4 STD 1 PWR SLING SEAT PT TO AND EQ 300 LB PWR WC GRP 4 STD 1 PWR CAPT CHAIR PT TO AND EQ 300 LB		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
K0869	PWR WC GRP 4 HD 1 PWR SLING SEAT PT 301-450 LBS		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
K0870	PWR WC GRP 4 V HD 1 PWR SLING SEAT PT 451-600 LB		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
K0871	PWR WC GRP 4 STD MX PWR SLNG SEAT PT TO AND EQ 300 LB		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
K0872	PWR WC GRP 4 STD MX PWR CAPT CHR PT TO AND EQ 300 LBS		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
K0873	PWR WC GRP 4 HD MX PWR SLING SEAT PT 301-450 LBS		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
K0874	PWR WC GRP 4 V HD MX PWR SLNG SEAT PT 451-600 LB		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
K0875	PWR WC GRP 4 XTR HD MX PWR SLNG SEAT PT 601 LB OR GRT		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
K0876	PWR WC GRP 5 PED 1 PWR SLING SEAT PT TO AND EQ 125 LB		Not Cov	Yes	Not Cov	Yes		Yes	Yes
K0877	PWR WC GRP 5 PED MX PWR SLNG SEAT PT TO AND EQ 125 LB		Not Cov	Yes	Not Cov	Yes		Yes	Yes

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
K0898	POWER WHEELCHAIR NOT OTHERWISE CLASSIFIED		Not Cov	Yes	Not Cov	Yes		Yes	Yes
K0899	PWR MOBILTY DVC NOT CODED DME PDAC NOT MEET CRIT		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
K0900	CUSTOMIZED DME OTHER THAN WHEELCHAIR		Not Cov	Yes	Not Cov	Yes		Yes	Yes
L0112	CRANIL CERV ORTHOT CONGN TORTICOLLIS TYPE CUSTOM		Not Cov	No	Not Cov	No		No	No
L0113	CRANIAL CERVL ORTHOTIC TORTICOLLIS TYPE PREFAB		Not Cov	No	Not Cov	No		No	No
L0120	CERVICAL FLEXIBLE NONADJUSTABLE PREFAB OFF SHELF		Not Cov	No	Not Cov	No		No	No
L0130	CERV FLEXIBLE THERMOPLASTIC COLLAR MOLDED PT		Not Cov	No	Not Cov	No		No	No
L0140	CERVICAL SEMI-RIGID ADJUSTABLE		No	No	Not Cov	No		No	No
L0150	CERVICAL SEMI-RIGID ADJUSTABLE MOLDED CHIN CUP		No	No	Not Cov	No		No	No
L0160	CERVICAL SEMI-RIGID WIRE FRAME OCCIP MAND PREFAB		Not Cov	No	Not Cov	No		No	No
L0170	CERVICAL COLLAR MOLDED TO PATIENT MODEL		Not Cov	No	Not Cov	No		No	No
L0172	CERVICAL COLLAR SEMI-RIGID FOAM TWO PIECE PREFAB		No	No	Not Cov	No		No	No
L0174	CERVICAL COLLAR SEMI-RIGID FOAM THOR EXT PREFAB		Not Cov	No	Not Cov	No		No	No
L0180	CERV MX POST COLLAR OCCIP MAND SUPPORTS ADJUSTBL		Not Cov	No	Not Cov	No		No	No
L0190	CERV MX POST COLLR OCCIP MAND SUPP ADJ CERV BARS		Not Cov	No	Not Cov	No		No	No
L0200	CERV MX POST COLLR OCCIP MAND ADJ CERV AND THOR EXT		Not Cov	No	Not Cov	No		No	No
L0220	THORACIC RIB BELT CUSTOM FABRICATED		Not Cov	No	Not Cov	No		No	No
L0450	TLSO FLEXIBLE TRUNK SUPP UP THOR REGION PREFAB		Not Cov	No	Not Cov	No		No	No
L0452	TLSO FLEXIBLE TRUNK SUPP UP THOR REGION CUSTOM		Not Cov	Yes	Not Cov	Yes		Yes	Yes
L0454	TLSO FLEXIBLE SC JUNCT TO T-9 PREFAB CUSTOM FIT		Not Cov	No	Not Cov	No		No	No
L0455	TLSO FLEXIBLE SC JUNCT TO T-9 PREFAB OFF SHELF		Not Cov	No	Not Cov	No		No	No
L0456	TLSO FLEXIBLE SC JUNCT SCAP SPINE PREFAB CUSTOM		Not Cov	No	Not Cov	No		No	No
L0457	TLSO FLX SC JUNC TERM INF TO SCAP SPINE PREFAB		Not Cov	No	Not Cov	No		No	No
L0458	TLSO TRIPLANAR 2 RIGD SHELL ANT TO XIPHOID PRFAB		No	No	Not Cov	No		No	No
L0460	TLSO TRIPLANAR 2 SHELL ANT TO STERNL NOTCH PRFAB		Not Cov	No	Not Cov	No		No	No
L0462	TLSO TRIPLANAR 3 SHELL ANT TO STERNL NOTCH PRFAB		Not Cov	No	Not Cov	No		No	No
L0464	TLSO TRIPLANAR 4 SHELL ANT TO STERNL NOTCH PRFAB		Not Cov	No	Not Cov	No		No	No
L0466	TLSO SAGITTAL CONTRL RIGD FRME PREFAB CUSTOM FIT		Not Cov	No	Not Cov	No		No	No
L0467	TLSO SAGITTAL CONTRL RIGD FRAME PREFAB OFF SHELF		Not Cov	No	Not Cov	No		No	No
L0468	TLSO SAGITTAL-CORONAL CONTROL PREFAB CUSTOM FIT		Not Cov	No	Not Cov	No		No	No

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			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
L0469	TLSO SAGITTAL-CORONAL CONTROL RIGID FRAME PREFAB		Not Cov	No	Not Cov	No		No	No
L0470	TLSO TRIPLANAR POST FRME AND ANT APRON W STRAP PRFAB		Not Cov	No	Not Cov	No		No	No
L0472	TLSO TRIPLANAR HYPREXT RIGD ANT AND LAT FRME PRFAB		Not Cov	No	Not Cov	No		No	No
L0480	TLSO TRIPLANAR 1 PIECE W O INTERFCE LINER CSTM		Not Cov	Yes	Not Cov	Yes		Yes	Yes
L0482	TLSO TRIPLANAR 1 PIECE W INTERFCE LINER CSTM		Not Cov	Yes	Not Cov	Yes		Yes	Yes
L0484	TLSO TRIPLANAR 2 PIECE W O INTERFCE LINER CSTM		Not Cov	Yes	Not Cov	Yes		Yes	Yes
L0486	TLSO TRIPLANAR 2 PIECE W INTERFCE LINER CSTM		Not Cov	Yes	Not Cov	Yes		Yes	Yes
L0488	TLSO TRIPLANAR 1 PIECE W INTERFCE LINER PRFAB		Not Cov	Not Cov	Not Cov	Not Cov		No	No
L0490	TLSO SAGIT-CORONAL W OVRLAP REINFORCED ANT PRFAB		Not Cov	No	Not Cov	No		No	No
L0491	TLSO TWO RIGID PLASTIC SHELLS PREFABRICATED		Not Cov	No	Not Cov	No		No	No
L0492	TLSO THREE RIGID PLASTIC SHELLS PREFABRICATED		Not Cov	No	Not Cov	No		No	No
L0621	SACROILIAC ORTHOSIS FLEXIBLE PREFABRICATED		Not Cov	No	Not Cov	No		No	No
L0622	SACROILIAC ORTHOTIC FLEXIBLE CUSTOM FABRICATED		Not Cov	Yes	Not Cov	Yes		Yes	Yes
L0623	SACROILIAC ORTHOSIS RIGID SEMI-RIGID PANL PREFAB		Not Cov	No	Not Cov	No		No	No
L0624	SACROILIAC ORTHOTIC RIGD SEMI-RIGD PANELS CUSTOM		Not Cov	No	Not Cov	No		No	No
L0625	LUMBAR ORTHOSIS FLEXIBLE PREFABRICATED OFF SHELF		No	No	Not Cov	No		No	No
L0626	LUMB ORTHOSIS SAGIT CNTRL RIGID POST PANL PREFAB		Not Cov	No	Not Cov	No		No	No
L0627	LUMB ORTHOSIS SAGIT CNTRL RIGID A AND P PANEL PREFAB		Not Cov	No	Not Cov	No		No	No
L0628	LUMBAR-SCARAL ORTHOSIS FLEXIBLE PREFAB OFF SHELF		Not Cov	No	Not Cov	No		No	No
L0629	LUMBAR-SACRAL ORTHOTIC FLEXIBLE CUSTOM FAB		Not Cov	No	Not Cov	No		No	No
L0630	LUMB-SACRAL ORTHOS SAGIT CNTRL RIGID POST PREFAB		Not Cov	No	Not Cov	No		No	No
L0631	LUMB-SACRAL ORTHOS SAGIT CNTRL RIGID A AND P PREFAB		Not Cov	No	Not Cov	No		No	No
L0632	LUMB-SACRAL ORTHOT SAGIT CNTRL RIGID A AND P CUSTOM		Not Cov	No	Not Cov	No		No	No
L0633	LUMB-SAC ORTHOS SAGIT-COR CNTRL RIGD POST PREFAB		Not Cov	No	Not Cov	No		No	No
L0634	LUMB-SAC ORTHOT SAGIT-COR CNTRL RIGD POST CUSTOM		Not Cov	No	Not Cov	No		No	No
L0635	LSO SAGITTAL-CORONL CNTRL FLEX RIGID POST PREFAB		Not Cov	No	Not Cov	No		No	No
L0636	LSO SAGITTAL-CORONL CNTRL FLEX RIGID POST CUSTOM		Not Cov	No	Not Cov	No		No	No
L0637	LUMB-SACRAL ORTHOS SAG-COR CNTRL RIGD A AND P PREFAB		Not Cov	No	Not Cov	No		Yes	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
L0638	LUMB-SACRAL ORTHOS SAG-COR CNTRL RIGD A AND P CUSTOM		Not Cov	No	Not Cov	No		No	No
L0639	LUMB-SAC ORTHOS SAG-COR CNTRL RIGID SHELL PREFAB		Not Cov	No	Not Cov	No		No	No
L0640	LSO SAGITTAL-CORONAL RIGID SHELL PANEL CUSTM FAB		Not Cov	Yes	Not Cov	Yes		Yes	Yes
L0641	LUMB ORTHOS SAGITTAL CTRL RIGD POST PANLS PREFAB		Not Cov	No	Not Cov	No		No	No
L0642	LUMB ORTHOS SAGITTAL CTRL RIGD ANT POST PANELS		Not Cov	No	Not Cov	No		No	No
L0643	LSO SAGITTAL CONTROL RIGID POST PANELS PREFAB		Not Cov	No	Not Cov	No		No	No
L0648	LSO SAGITTAL CONTROL RIGD ANT POST PANELS PREFAB		Not Cov	No	Not Cov	No		No	No
L0649	LSO SAGITTAL-CORONAL CONTROL RIGD POST PANELS		Not Cov	No	Not Cov	No		No	No
L0650	LSO SAGITTAL-CORONAL CNTRL RIGD ANT POST PANELS		Not Cov	Yes	Not Cov	Yes		Yes	Yes
L0651	LSO SAGITTAL-CORONAL CONTROL RIGD SHELLS PANELS		Not Cov	No	Not Cov	No		No	No
L0700	CTLSO ANT-POSTERIOR-LAT CONTROL MOLDED PT MODEL		Not Cov	Yes	Not Cov	Yes		Yes	Yes
L0710	CTLSO ANT-POST-LAT CNTRL MOLD PT-INTRFCE MATL		Not Cov	Yes	Not Cov	Yes		Yes	Yes
L0810	HALO PROC CERV HALO INCORPORATED IN JACKET VEST		Not Cov	No	Not Cov	No		No	No
L0820	HALO PROC CERV HALO INC IN PLASTR BDY JACKET		Not Cov	No	Not Cov	No		No	No
L0830	HALO PROC CERV HALO INC IN MLWAKEE TYPE ORTHOSIS		Not Cov	No	Not Cov	No		No	No
L0859	ADD HALO PROC MRI COMPAT SYS RINGS AND PINS ANY MATL		Not Cov	No	Not Cov	No		No	No
L0861	ADD HALO PROC REPLCMT LINER INTERFCE MATERIAL		Not Cov	No	Not Cov	No		No	No
L0970	TLSO CORSET FRONT		Not Cov	No	Not Cov	No		No	No
L0972	LSO CORSET FRONT		Not Cov	No	Not Cov	No		No	No
L0974	TLSO FULL CORSET		Not Cov	No	Not Cov	No		No	No
L0976	LSO FULL CORSET		Not Cov	No	Not Cov	No		No	No
L0978	AXILLARY CRUTCH EXTENSION		Not Cov	No	Not Cov	No		No	No
L0980	PERONEAL STRAPS PREFABRICATED OFF THE SHELF PAIR		Not Cov	No	Not Cov	No		No	No
L0982	STOCKING SUPPORTER GRIPS PREFAB OFF SHELF SET 4		Not Cov	No	Not Cov	No		No	No
L0984	PROTECTIVE BODY SOCK PREFAB OFF SHELF EACH		Not Cov	No	Not Cov	No		No	No
L0999	ADD TO SPINAL ORTHOTIC NOT OTHERWISE SPECIFIED		Not Cov	Yes	Not Cov	Yes		Yes	Yes
L1000	CTLSO INCLUSIVE FURNISHING INIT ORTHOS INCL MDL		Not Cov	Yes	Not Cov	Yes		Yes	Yes
L1001	CERV THOR LUMB SACRAL IMMOBLIZR INFANT SZ PREFAB		Not Cov	No	Not Cov	No		No	No
L1005	TENSION BASED SCOLIOSIS ORTHOTIC AND ACCESSORY PADS		Not Cov	Yes	Not Cov	Yes		Yes	Yes
L1010	ADDITION CTLSO SCOLIOSIS ORTHOSIS AXILLA SLING		Not Cov	No	Not Cov	No		No	No
L1020	ADDITION CTLSO SCOLIOSIS ORTHOSIS KYPHOSIS PAD		Not Cov	No	Not Cov	No		No	No
L1025	ADD CTLSO SCOLIOS ORTHOS KYPHOS PAD FLOATING		Not Cov	No	Not Cov	No		No	No

This prior authorization guide applies to Medicaid, Medicare, and Marketplace.

DOS Effective 10/1/19; Posted 10/30/19

All Inpatient services require prior authorization

***All Medicaid services subject to the limitations in the provider billing guides and fee schedules at <https://www.hca.wa.gov/billers-providers/claims-and-billing/professional-rates-and-billing-guides> ***

*** All Medicare services subject to the limitations in the CMS billing guide and fee schedules at <https://www.cms.gov/> ***

Code	Code Description	Comments	Apple Health & IMC Medical				IMC / BHSO (Mental Health covered svcs)	Medicare	Market Place
			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
L1030	ADD CTLSO SCOLIOSIS ORTHOSIS LUMBAR BOLSTER PAD		Not Cov	No	Not Cov	No		No	No
L1040	ADD CTLSO SCOLIOSIS ORTHOSIS LUMB LUMB RIB PAD		Not Cov	No	Not Cov	No		No	No
L1050	ADDITION TO CTLSO SCOLIOSIS ORTHOSIS STERNAL PAD		Not Cov	No	Not Cov	No		No	No
L1060	ADDITION CTLSO SCOLIOSIS ORTHOSIS THORACIC PAD		Not Cov	No	Not Cov	No		No	No
L1070	ADD CTLSO SCOLIOSIS ORTHOSIS TRAPEZIUS SLING		Not Cov	No	Not Cov	No		No	No
L1080	ADDITION TO CTLSO SCOLIOSIS ORTHOSIS OUTRIGGER		Not Cov	No	Not Cov	No		No	No
L1085	ADD CTLSO SCOLIO ORTHO OUTRIG BIL-VERTICL EXT		Not Cov	No	Not Cov	No		No	No
L1090	ADDITION CTLSO SCOLIOSIS ORTHOSIS LUMBAR SLING		Not Cov	No	Not Cov	No		No	No
L1100	ADD CTLSO SCOLIOS ORTHOS RING FLNGE PLSTC LEATHR		Not Cov	No	Not Cov	No		No	No
L1110	ADD CTLSO SCOLIOS RING FLNGE MOLD PT MDL		Not Cov	Yes	Not Cov	Yes		Yes	Yes
L1120	ADDITION CTLSO SCOLIOSIS ORTHOSIS COVER UPRT EA		Not Cov	No	Not Cov	No		No	No
L1200	TLSO INCLUSIVE FURNISHING INITIAL ORTHOTIC ONLY		Not Cov	No	Not Cov	No		No	No
L1210	ADDITION TO TLSO LATERAL THORACIC EXTENSION		Not Cov	No	Not Cov	No		No	No
L1220	ADDITION TO TLSO ANTERIOR THORACIC EXTENSION		Not Cov	No	Not Cov	No		No	No
L1230	ADDITION TO TLSO MILWAUKEE TYPE SUPERSTRUCTURE		Not Cov	No	Not Cov	No		No	No
L1240	ADDITION TO TLSO LUMBAR DEROTATION PAD		Not Cov	No	Not Cov	No		No	No
L1250	ADDITION TO TLSO ANTERIOR ASIS PAD		Not Cov	No	Not Cov	No		No	No
L1260	ADDITION TLSO ANTERIOR THORACIC DEROTATION PAD		Not Cov	No	Not Cov	No		No	No
L1270	ADDITION TO TLSO ABDOMINAL PAD		Not Cov	No	Not Cov	No		No	No
L1280	ADDITION TO TLSO RIB GUSSET EACH		Not Cov	No	Not Cov	No		No	No
L1290	ADDITION TO TLSO LATERAL TROCHANTERIC PAD		Not Cov	No	Not Cov	No		No	No
L1300	OTH SCOLIOSIS PROC BODY JACKET MOLDED PT MODEL		Not Cov	No	Not Cov	No		No	No
L1310	OTH SCOLIOSIS PROC POSTOPERATIVE BODY JACKET		Not Cov	No	Not Cov	No		No	No
L1499	SPINAL ORTHOTIC NOT OTHERWISE SPECIFIED		Not Cov	Yes	Not Cov	Yes		Yes	Yes
L1600	HIP ORTHOSIS ABDUCTION CONTRL FLEX FREJKA PREFAB		Not Cov	No	Not Cov	No		No	No
L1610	HIP ORTHOSIS ABDUCTION CONTRL FLEXIBLE PREFAB		Not Cov	No	Not Cov	No		No	No
L1620	HIP ORTHOSIS ABDUCTION FLEX PAVLIK HARN PREFAB		Not Cov	No	Not Cov	No		No	No
L1630	HO ABDUCT CONTROL OF HIP JNT SEMI-FLEX CSTM FAB		Not Cov	No	Not Cov	No		No	No
L1640	HIP ORTHOTIC-PELV BAND SPRDR BAR THI CUFFS FAB		Not Cov	Yes	Not Cov	Yes		Yes	Yes
L1650	HIP ORTHOTIC ABDUCT CNTRL STAT ADJ PRFAB-FIT AND ADJ		Not Cov	No	Not Cov	No		No	No
L1652	HIP ORTHOTIC BIL THI CUFF ADLT SZ PRFAB ANY TYPE		Not Cov	No	Not Cov	No		No	No
L1660	HIP ORTHOT ABDUCT CNTRL STAT PLSTC PRFAB-FIT AND ADJ		Not Cov	No	Not Cov	No		No	No
L1680	HIP ORTHOT DYN PELV CONTROL THIGH CUFF CSTM FAB		Not Cov	Yes	Not Cov	Yes		Yes	Yes
L1685	HIP ORTHOS ABDCT CNTRL POSTOP HIP ABDCT CSTM		Not Cov	Yes	Not Cov	Yes		Yes	Yes

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This prior authorization guide applies to Medicaid, Medicare, and Marketplace.

DOS Effective 10/1/19; Posted 10/30/19

All Inpatient services require prior authorization

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*** All Medicare services subject to the limitations in the CMS billing guide and fee schedules at <https://www.cms.gov/> ***

Code	Code Description	Comments	Apple Health & IMC Medical				IMC / BHSO (Mental Health covered svcs)	Medicare	Market Place
			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
L1686	HIP ORTHOT ABDUCT CNTRL POSTOP HIP PRFAB-FIT AND ADJ		Not Cov	No	Not Cov	No		No	No
L1690	COMB BIL LUMBO-SAC HIP FEM ORTHOT PRFB W FIT AND ADJ		Not Cov	No	Not Cov	No		No	No
L1700	LEGG PERTHES ORTHOTIC TORONTO CUSTOM FABRICATED		Not Cov	Yes	Not Cov	Yes		Yes	Yes
L1710	LEGG PERTHES ORTHOTIC NEWINGTON CUSTOM FAB		Not Cov	Yes	Not Cov	Yes		Yes	Yes
L1720	LEGG PERTHES ORTHOTIC TRILAT TACHDIJAN CSTM FAB		Not Cov	Yes	Not Cov	Yes		Yes	Yes
L1730	LEGG PERTHES ORTHOTIC SCOTTISH RITE CUSTOM FAB		Not Cov	Yes	Not Cov	Yes		Yes	Yes
L1755	LEGG PERTHES ORTHOTIC PATTEN BOTTOM CSTM FAB		Not Cov	Yes	Not Cov	Yes		Yes	Yes
L1810	KNEE ORTHOSIS ELASTIC JOINTS PREFAB CUSTOM FIT		Not Cov	No	Not Cov	No		No	No
L1812	KNEE ORTHOSIS ELASTIC WITH JOINTS PREFAB		Not Cov	No	Not Cov	No		No	No
L1820	KO ELAST W CONDYLR PADS AND JNT PRFAB INCL FIT AND ADJ		Not Cov	No	Not Cov	No		No	No
L1830	KNEE ORTHOSIS IMMOBLIZER CANVAS LONGTUDNL PREFAB		Not Cov	No	Not Cov	No		No	No
L1831	KNEE ORTHOT LOCK KNEE JNT PSTN ORTHOT PRFAB		Not Cov	No	Not Cov	No		No	No
L1832	KNEE ORTHOSIS IMMOBLIZER ADJUSTABLE JOINT PREFAB		No	No	Not Cov	No		No	No
L1833	KNEE ORTHOSIS ADJUSTABLE JOINT RIGD SUPP PREFAB		Not Cov	No	Not Cov	No		No	No
L1834	KO WITHOUT KNEE JOINT RIGID CUSTOM FABRICATED		Yes	Yes	Not Cov	Yes		Yes	Yes
L1836	KNEE ORTHOSIS RIGID WITHOUT JOINT PREFABRICATED		No	No	Not Cov	No		No	No
L1840	KO DEROTATION MEDIAL-LATERAL ACL CUSTOM FAB		Not Cov	Yes	Not Cov	Yes		Yes	Yes
L1843	KNEE ORTHOSIS SINGLE UPRIGHT THIGH AND CALF PREFAB		Not Cov	No	Not Cov	No		No	No
L1844	KNEE ORTHOSIS SINGLE UPRIGHT THIGH AND CALF CUSTOM		Not Cov	Yes	Not Cov	Yes		Yes	Yes
L1845	KNEE ORTHOSIS DOUBLE UPRIGHT THIGH AND CALF PREFAB		Not Cov	No	Not Cov	No		No	No
L1846	KNEE ORTHOSIS DOUBLE UPRIGHT THIGH AND CALF CUSTOM		Not Cov	Yes	Not Cov	Yes		Yes	Yes
L1847	KNEE ORTHOSIS DOUBLE UPRIGHT AIR PREFAB CUSTOM		Not Cov	No	Not Cov	No		No	No
L1848	KNEE ORTHOSIS ADJUSTABLE JOINT AIR SUPP PREFAB		Not Cov	No	Not Cov	No		No	No
L1850	KNEE ORTHOSIS SWEDISH TYPE PREFAB OFF SHELF		Not Cov	No	Not Cov	No		No	No
L1851	KNEE ORTHOSIS SINGLE UPRIGHT THIGH AND CALF		Not Cov	No	Not Cov	No		No	No
L1852	KNEE ORTHOSIS DOUBLE UPRIGHT THIGH AND CALF		Not Cov	No	Not Cov	No		No	No
L1860	KNEE ORTHOS MOD SUPRACONDYLR PROS SOCKT CSTM FAB		Not Cov	Yes	Not Cov	Yes		Yes	Yes
L1900	AFO SPRNG WIRE DORSIFLX ASST CALF BAND CSTM FAB		Not Cov	Yes	Not Cov	Yes		Yes	Yes
L1902	ANKLE ORTH ANKLE GAUNT SIM PREFAB OFF-THE-SHELF		Not Cov	No	Not Cov	No		No	No
L1904	ANKLE ORTH ANKLE GAUNTLET SIMILAR CUSTOM FAB		Not Cov	Yes	Not Cov	Yes		Yes	Yes

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This prior authorization guide applies to Medicaid, Medicare, and Marketplace.

DOS Effective 10/1/19; Posted 10/30/19

All Inpatient services require prior authorization

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Code	Code Description	Comments	Apple Health & IMC Medical				IMC / BHSO (Mental Health covered svcs)	Medicare	Market Place
			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
L1906	ANK FT ORTHOS MX-LIG ANK SUPT PREFB OFF SHELF		Not Cov	No	Not Cov	No		No	No
L1907	ANKLE ORTHOSIS SUPRAMALLEOLAR WITH STRAPS CUSTOM	MD: Limit 2 per year	Not Cov	No	Not Cov	No		Yes	Yes
L1910	AFO POST 1 BAR CLASP ATTCH SHOE COUNTER PRFAB		Not Cov	No	Not Cov	No		No	No
L1920	AFO SINGLE UPRT W STATIC ADJUSTBL STOP CSTM FAB		Not Cov	Yes	Not Cov	Yes		Yes	Yes
L1930	ANKLE FOOT ORTHOTIC PLASTIC OTH MATL PREFAB		No	No	Not Cov	No		No	No
L1932	AFO RIGD ANT TIBL TOT CARB FIBER EQU MATL PRFAB		Not Cov	No	Not Cov	No		No	No
L1940	ANK FT ORTHOTIC PLASTIC OTH MATERIAL CUSTOM FAB	MD: Limit 2 per year	Not Cov	No	Not Cov	No		Yes	Yes
L1945	AFO MOLD PT MDL PLSTC RIGD ANT TIBL SECT CSTM		Not Cov	Yes	Not Cov	Yes		No	Yes
L1950	ANKLE FOOT ORTHOTIC SPIRAL PLASTIC CUSTOM-FAB		Not Cov	Yes	Not Cov	Yes		No	Yes
L1951	ANK FT ORTHOT SPIRAL PLSTC OTH MATL PRFAB W FIT		Not Cov	No	Not Cov	No		No	No
L1960	AFO POSTERIOR SOLID ANK PLASTIC CUSTOM FAB	MD: Limit 2 per year	Not Cov	No	Not Cov	No		No	Yes
L1970	AFO PLASTIC WITH ANKLE JOINT CUSTOM FABRICATED		Not Cov	Yes	Not Cov	Yes		No	Yes
L1971	ANK FT ORTHOTIC PLSTC OTH MATL W ANK JNT PREFAB		Not Cov	No	Not Cov	No		No	No
L1980	AFO 1 UPRT FREE PLANTR DORSIFLX SOLID STIRUP FAB		Not Cov	Yes	Not Cov	Yes		Yes	Yes
L1990	AFO DBL UPRT PLANTR DORSIFLX SOLID STIRUP CSTM		Not Cov	Yes	Not Cov	Yes		Yes	Yes
L2000	KAFO 1 UPRT FREE KNEE FREE ANK SOLID STIRUP CSTM		Not Cov	Yes	Not Cov	Yes		Yes	Yes
L2005	KAFO ANY MATL AUTO LOCK AND SWNG RLSE W ANK JNT CSTM		Not Cov	Yes	Not Cov	Yes		Yes	Yes
L2010	KAFO 1 UPRT SOLID STIRUP W O KNEE JNT CSTM FAB		Not Cov	Yes	Not Cov	Yes		Yes	Yes
L2020	KAFO DBL UPRT SOLID STIRUP THI AND CALF CSTM FAB		Not Cov	Yes	Not Cov	Yes		Yes	Yes
L2030	KAFO DBL UPRT SOLID STIRUP W O KNEE JNT CSTM		Not Cov	Yes	Not Cov	Yes		Yes	Yes
L2034	KAFO PLASTIC MED LAT ROTAT CNTRL CSTM FAB		Not Cov	Yes	Not Cov	Yes		Yes	Yes
L2035	KAFO FULL PLSTC STAT PED W O FREE MOT ANK PRFAB		Not Cov	No	Not Cov	No		No	No
L2036	KAFO FULL PLASTIC DOUBLE UPRIGHT CSTM FAB		Not Cov	Yes	Not Cov	Yes		Yes	Yes
L2037	KAFO FULL PLASTIC SINGLE UPRIGHT CUSTOM FAB		Not Cov	Yes	Not Cov	Yes		Yes	Yes
L2038	KAFO FULL PLASTIC MX-AXIS ANKLE CUSTOM FAB		Not Cov	Yes	Not Cov	Yes		Yes	Yes
L2040	HKAFO TORSION CNTRL BIL ROTAT STRAPS CSTM		Not Cov	No	Not Cov	No		No	No
L2050	HKAFO TORSION CNTRL BIL TORSION CABLES CSTM FAB		Not Cov	Yes	Not Cov	Yes		Yes	Yes
L2060	HKAFO TORSION CNTRL BIL TORSION BALL BEAR CSTM		Not Cov	Yes	Not Cov	Yes		Yes	Yes
L2070	HKAFO TORSION CNTRL UNI ROTAT STRAPS CSTM FAB		Not Cov	No	Not Cov	No		No	No
L2080	HKAFO TORSION CNTRL UNI TORSION CABLE CSTM FAB		Not Cov	Yes	Not Cov	Yes		Yes	Yes
L2090	HKAFO UNI TORSION CABLE BALL BEAR CSTM		Not Cov	Yes	Not Cov	Yes		Yes	Yes
L2106	AFO FX ORTHOTIC TIB FX CAST THERMOPLSTC CSTM FAB		Not Cov	Yes	Not Cov	Yes		Yes	Yes
L2108	AFO FX ORTHOTIC TIB FX CAST ORTHOSIS CSTM FAB		Not Cov	Yes	Not Cov	Yes		Yes	Yes
L2112	AFO FX ORTHO TIB FX ORTHO SFT PRFAB W FIT AND ADJ		No	No	Not Cov	No		No	No
L2114	AFO TIBL FX ORTHOS SEMI-RIGD PRFAB W FIT AND ADJ		Not Cov	No	Not Cov	No		No	No
L2116	AFO TIB FX ORTHOTIC RIGID PRFAB W FIT AND ADJ		No	No	Not Cov	No		No	No

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This prior authorization guide applies to Medicaid, Medicare, and Marketplace.

DOS Effective 10/1/19; Posted 10/30/19

All Inpatient services require prior authorization

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Code	Code Description	Comments	Apple Health & IMC Medical				IMC / BHSO (Mental Health covered svcs)	Medicare	Market Place
			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
L2126	KAFO FEM FX CAST ORTHOTIC THERMOPLSTC CSTM FAB		Not Cov	Yes	Not Cov	Yes		Yes	Yes
L2128	KAFO FX ORTHOTIC FEM FX CAST ORTHOSIS CSTM FAB		Not Cov	Yes	Not Cov	Yes		Yes	Yes
L2132	KAFO FEM FX CAST ORTHOTIC SFT PRFAB W FIT AND ADJ		Not Cov	No	Not Cov	No		No	No
L2134	KAFO FEM FX CAST ORTHOT SEMI-RIGD PRFAB FIT AND ADJ		Not Cov	No	Not Cov	No		No	No
L2136	KAFO FEM FX CAST ORTHOTIC RIGD PRFAB W FIT AND ADJ		Not Cov	No	Not Cov	No		No	No
L2180	ADD LW EXTRM FX ORTHOT PLSTC SHOE INSRT ANK JNT		Not Cov	No	Not Cov	No		No	No
L2182	ADD LOW EXTREM FX ORTHOTIC DROP LOCK KNEE JOINT		Not Cov	No	Not Cov	No		No	No
L2184	ADD LOW EXTREM FX ORTHOTIC LTD MOTION KNEE JOINT		Not Cov	No	Not Cov	No		No	No
L2186	ADD LW EXT FX ORTH ADJ MOT KNEE JNT LERMAN TYPE		Not Cov	No	Not Cov	No		No	No
L2188	ADD LOW EXTREM FRACTURE ORTHOTIC QUADRILAT BRIM		Not Cov	No	Not Cov	No		No	No
L2190	ADDITION LOW EXTREM FRACTURE ORTHOTIC WAIST BELT		Not Cov	No	Not Cov	No		No	No
L2192	ADD LW EXT ORTHOTIC HIP JNT THI FLNGE AND PELV BELT		Not Cov	No	Not Cov	No		No	No
L2200	ADDITION LOWER EXTREMITY LTD ANK MOTION EA JOINT		Not Cov	No	Not Cov	No		No	No
L2210	ADDITION LOWER EXTREM DORSIFLEX ASSIST EA JOINT		Not Cov	No	Not Cov	No		No	No
L2220	ADD LW EXTRM DORSIFLX AND PLANTR ASST RSIST EA JNT		Not Cov	No	Not Cov	No		No	No
L2230	ADD LW EXTRM SPLIT FLAT CALIPRR STIRRUPS AND PLATE		Not Cov	No	Not Cov	No		No	No
L2232	ADD LOW EXT ORTHOS ROCKR BOTTOM TOT CNTC CSTM		Not Cov	Yes	Not Cov	Yes		Yes	Yes
L2240	ADD LOW EXTREM ROUND CALIPER AND PLATE ATTACHMENT		Not Cov	No	Not Cov	No		No	No
L2250	ADD LOW EXTREM FT PLATE MOLD PT MDL STIRUP ATTCH		Not Cov	No	Not Cov	No		No	No
L2260	ADDITION LOWER EXTREM REINFORCED SOLID STIRRUP		Not Cov	No	Not Cov	No		No	No
L2265	ADDITION TO LOWER EXTREMITY LONG TONGUE STIRRUP		Not Cov	No	Not Cov	No		No	No
L2270	ADD LW EXT VARUS VALGUS CORR STRAP PAD LINE PAD		Not Cov	No	Not Cov	No		No	No
L2275	ADD LW EXTRM VARUS VULGUS CORR PLSTC MOD PADD LN		Not Cov	No	Not Cov	No		No	No
L2280	ADDITION TO LOWER EXTREMITY MOLDED INNER BOOT		Not Cov	No	Not Cov	No		No	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
L2300	ADDITION LOW EXTREM ABDUCT BAR JOINTED ADJUSTBLE		Not Cov	No	Not Cov	No		No	No
L2310	ADDITION LOWER EXTREMITY ABDUCTION BAR STRAIGHT		Not Cov	No	Not Cov	No		No	No
L2320	ADD LOW EXT NONMOLD LACER CSTM FAB ORTHOS ONLY		Not Cov	No	Not Cov	No		No	No
L2330	ADD LOW EXT LACER MOLD PT MDL CSTM ORTHOTIC ONLY		Not Cov	No	Not Cov	No		No	No
L2335	ADDITION TO LOWER EXTREMITY ANTERIOR SWING BAND		Not Cov	No	Not Cov	No		No	No
L2340	ADD LOW EXTREM PRETIBL SHELL MOLDED PT MODEL		Not Cov	No	Not Cov	No		No	No
L2350	ADD LOW EXTREM PROSTHETIC TYPE SOCKT MOLD PT MDL		Not Cov	No	Not Cov	No		No	No
L2360	ADDITION TO LOWER EXTREMITY EXTENDED STEEL SHANK		Not Cov	No	Not Cov	No		No	No
L2370	ADDITION TO LOWER EXTREMITY PATTEN BOTTOM		Not Cov	No	Not Cov	No		No	No
L2375	ADD LW EXT TORSION CNTRL ANK JNT AND HALF STIRUP		Not Cov	No	Not Cov	No		No	No
L2380	ADD LW EXT TORSION CNTRL STRAIT KNEE JNT EA JNT		Not Cov	No	Not Cov	No		No	No
L2385	ADD LOW EXTREM STRAIT KNEE JNT HEVY DUTY EA JNT		Not Cov	No	Not Cov	No		No	No
L2387	ADD LW EXT POLYCENTRIC KNEE JNT CSTM KAFO EA JNT		Not Cov	No	Not Cov	No		No	No
L2390	ADDITION LOWER EXTREM OFFSET KNEE JOINT EA JOINT		Not Cov	No	Not Cov	No		No	No
L2395	ADD LOW EXTREM OFFSET KNEE JNT HEVY DUTY EA JNT		Not Cov	No	Not Cov	No		No	No
L2397	ADDITION LOWER EXTREM ORTHOTIC SUSPENSION SLEEVE		Not Cov	No	Not Cov	No		No	No
L2405	ADDITION TO KNEE JOINT DROP LOCK EACH		Not Cov	No	Not Cov	No		No	No
L2415	ADD KNEE LOCK W INTEGRATED RLSE MECH MATL EA JNT		Not Cov	No	Not Cov	No		No	No
L2425	ADD KNEE JNT DISC DIAL LOCK ADJ KNEE FLX EA JNT		Not Cov	No	Not Cov	No		No	No
L2430	ADD KNEE JNT RATCHET LOCK KNEE EXT EA JNT		Not Cov	No	Not Cov	No		No	No
L2492	ADDITION TO KNEE JOINT LIFT LOOP DROP LOCK RING		Not Cov	No	Not Cov	No		No	No
L2500	ADD LW EXTRM THI WT BEAR GLUTL ISCH WT BEAR RING		Not Cov	No	Not Cov	No		No	No
L2510	ADD LW EXTRM THI WT BEAR QUADRI-LAT BRIM MOLD PT		Not Cov	No	Not Cov	No		No	No
L2520	ADD LW EXTRM THI WT BEAR QUADRI-LAT BRIM CSTM		Not Cov	No	Not Cov	No		No	No
L2525	ADD LW EXTRM ISCH M-L BRIM MOLD PT MDL		Not Cov	No	Not Cov	No		No	No
L2526	ADD LW EXTRM ISCH M-L BRIM CSTM FIT		Not Cov	No	Not Cov	No		No	No
L2530	ADD LOW EXTREM THIGH WEIGHT BEAR LACER NONMOLDED		Not Cov	No	Not Cov	No		No	No
L2540	ADD LOW EXTREM THI WEIGHT BEAR LACER MOLD PT MDL		Not Cov	No	Not Cov	No		No	No

This prior authorization guide applies to Medicaid, Medicare, and Marketplace.

DOS Effective 10/1/19; Posted 10/30/19

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
L2550	ADD LOW EXTREM THIGH WEIGHT BEAR HIGH ROLL CUFF		Not Cov	No	Not Cov	No		No	No
L2570	ADD LW EXT PELV HIP JNT CLEVIS TYPE 2 PSTN JNT		Not Cov	No	Not Cov	No		No	No
L2580	ADDITION LOWER EXTREM PELV CONTROL PELV SLING		Not Cov	No	Not Cov	No		No	No
L2600	ADD LW EXT PELV HIP JNT CLEVIS THRUST BEAR FREE		Not Cov	No	Not Cov	No		No	No
L2610	ADD LW EXT PELV HIP JNT CLEVIS THRUST BEAR LOCK		Not Cov	No	Not Cov	No		No	No
L2620	ADD LOW EXTREM PELV CNTRL HIP JOINT HEVY-DUTY EA		Not Cov	No	Not Cov	No		No	No
L2622	ADD LOW EXTRM PELV CNTRL HIP JNT ADJUSTBL FLX EA		Not Cov	No	Not Cov	No		No	No
L2624	ADD LW EXTRM PELV HIP JNT ADJ FLX EXT ABDUCT EA		Not Cov	No	Not Cov	No		No	No
L2627	ADD LW EXT PELV PLSTC MOLD PT MDL HIP JNT AND CABLES		Not Cov	No	Not Cov	No		No	No
L2628	ADD LW EXT PELV METL FRME RECIP HIP JNT AND CABLES		Not Cov	No	Not Cov	No		No	No
L2630	ADD LOW EXTREM PELVIC CONTROL BAND AND BELT UNI		Not Cov	No	Not Cov	No		No	No
L2640	ADDITION LOW EXTREM PELV CONTROL BAND AND BELT BIL		Not Cov	No	Not Cov	No		No	No
L2650	ADD LOW EXTREM PELV AND THOR CONTROL GLUTEAL PAD EA		Not Cov	No	Not Cov	No		No	No
L2660	ADDITION LOWER EXTREM THOR CONTROL THOR BAND		Not Cov	No	Not Cov	No		No	No
L2670	ADD LOW EXTREM THOR CONTROL PARASPINAL UPRIGHTS		Not Cov	No	Not Cov	No		No	No
L2680	ADD LOW EXTREM THOR CNTRL LAT SUPPORT UPRIGHTS		Not Cov	No	Not Cov	No		No	No
L2750	ADD LOW EXTREM ORTHOTIC PLATING CHROME NICKL-BAR		Not Cov	No	Not Cov	No		No	No
L2755	ADD LOW EXT ORTHOTIC HYBRID COMPOS PER SEG CSTM		Not Cov	No	Not Cov	No		No	No
L2760	ADDITION LOW EXTREM ORTHOTIC EXT PER EXT PER BAR		Not Cov	No	Not Cov	No		No	No
L2768	ORTHOTIC SIDE BAR DISCONNECT DEVICE PER BAR		Not Cov	No	Not Cov	No		No	No
L2780	ADD LOW EXTREM ORTHOTIC NONCORROSIVE FINISH BAR		Not Cov	No	Not Cov	No		No	No
L2785	ADDITION LOW EXTREM ORTHOTIC DROP LOCK RETAIN EA		Not Cov	No	Not Cov	No		No	No
L2795	ADD LOW EXTREM ORTHOTIC KNEE CNTRL FULL KNEECAP		Not Cov	No	Not Cov	No		No	No
L2800	ADD LOW EXT ORTHOT KNEE CNTRL KNEE CAP CSTM ONLY		Not Cov	Yes	Not Cov	Yes		Yes	Yes
L2810	ADD LOW EXTREM ORTHOTIC KNEE CONTROL CONDYL R PAD		Not Cov	No	Not Cov	No		No	No
L2820	ADD LW EXT ORTH SFT INTERFCE MOLD BELW KNEE		Not Cov	No	Not Cov	No		No	No
L2830	ADD LW EXT ORTHOTIC SOFT INTERFCE MOLD ABVE KNEE		Not Cov	No	Not Cov	No		No	No

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This prior authorization guide applies to Medicaid, Medicare, and Marketplace.

DOS Effective 10/1/19; Posted 10/30/19

All Inpatient services require prior authorization

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Code	Code Description	Comments	Apple Health & IMC Medical				IMC / BHSO (Mental Health covered svcs)	Medicare	Market Place
			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
L2840	ADD LOW EXTREM ORTHOTIC TIB LENGTH SOCK FX EQ EA		Not Cov	No	Not Cov	No		No	No
L2850	ADD LOW EXTREM ORTHOT FEM LENGTH SOCK FX EQU EA		Not Cov	No	Not Cov	No		No	No
L2861	ADD LOW EXT JOINT KNEE ANK CSTM FAB ONLY EA		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
L2999	LOWER EXTREMITY ORTHOSES NOT OTHERWISE SPECIFIED		Not Cov	Yes	Not Cov	Yes		Yes	Yes
L3000	FT INSRT MOLD PT MDL UCB TYPE BERKLY SHELL EA	Cov Age <17 See HCA Guide for limitations	Not Cov	No	Not Cov	No		No	No
L3001	FOOT INSERT REMOVABLE MOLDED PT MODEL SPENCO EA		Not Cov	Not Cov	Not Cov	Not Cov		No	No
L3002	FOOT INSRT REMV MOLDED PT MDL PLASTAZOTE EQU EA		Not Cov	Not Cov	Not Cov	Not Cov		No	No
L3003	FOOT INSERT REMV MOLDED PT MODEL SILICONE GEL EA		Not Cov	Not Cov	Not Cov	Not Cov		No	No
L3010	FT INSRT REMV MOLD PT MDL LNGTUDNL ARCH SUPP EA		Not Cov	Not Cov	Not Cov	Not Cov		No	No
L3020	FOOT INSRT REMV MOLD PT MDL LNGTUDNL MT SUPP EA		Not Cov	Not Cov	Not Cov	Not Cov		No	No
L3030	FOOT INSERT REMOVABLE FORMED PATIENT FOOT EACH		Not Cov	No	Not Cov	No		No	No
L3031	FOOT INSRT PLAT REMV ADD LW EXT ORTHOT HI STRGTH		Not Cov	No	Not Cov	No		No	No
L3040	FOOT ARCH SUPPORT REMV PREMOLDED LONGTUDNL EA		Not Cov	Not Cov	Not Cov	Not Cov		No	No
L3050	FOOT ARCH SUPPORT REMOVABLE PREMOLDED MT EA		Not Cov	Not Cov	Not Cov	Not Cov		No	No
L3060	FOOT ARCH SUPPORT REMV PREMOLDED LONGTUDNL MT EA		Not Cov	Not Cov	Not Cov	Not Cov		No	No
L3070	FOOT ARCH SUPPORT NONREMV ATTCH SHOE LNGTUDNL EA		Not Cov	Not Cov	Not Cov	Not Cov		No	No
L3080	FOOT ARCH SUPPORT NONREMOVABLE ATTCH SHOE MT EA		Not Cov	Not Cov	Not Cov	Not Cov		No	No
L3090	FOOT ARCH SUPP NONREMV ATTCH SHOE LNGTUDNL MT EA		Not Cov	Not Cov	Not Cov	Not Cov		No	No
L3100	HALLUS-VALGUS NIGHT DYNAMIC SPLINT PREFABRICATED		Not Cov	No	Not Cov	No		No	No
L3140	FOOT ABDUCTION ROTATION BAR INCLUDING SHOES		Not Cov	No	Not Cov	No		No	No
L3150	FOOT ABDUCTION ROTATION BAR WITHOUT SHOES		Not Cov	No	Not Cov	No		No	No
L3160	FOOT ADJUSTABLE SHOE-STYLED POSITIONING DEVICE		Not Cov	Not Cov	Not Cov	Not Cov		No	No
L3170	FOOT PLASTIC SILCONE HEEL STABILIZER PREFAB EACH		Not Cov	No	Not Cov	No		No	No
L3201	ORTHOPED SHOE OXFORD W SUPINATOR PRONATOR INFNT		Not Cov	Not Cov	Not Cov	Not Cov		No	No
L3202	ORTHOPED SHOE OXFORD W SUPINATOR PRONATOR CHILD		Not Cov	Not Cov	Not Cov	Not Cov		No	No
L3203	ORTHOPEDIC SHOE OXFORD W SUPINATOR PRONATOR JR		Not Cov	Not Cov	Not Cov	Not Cov		No	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
L3204	ORTHOPE SHOE HIGHTOP W SUPINATOR PRONATOR INFNT		Not Cov	Not Cov	Not Cov	Not Cov		No	No
L3206	ORTHOPE SHOE HIGHTOP W SUPINATOR PRONATOR CHILD		Not Cov	Not Cov	Not Cov	Not Cov		No	No
L3207	ORTHOPE SHOE HIGHTOP W SUPINATOR PRONATOR JR		Not Cov	Not Cov	Not Cov	Not Cov		No	No
L3208	SURGICAL BOOT EACH INFANT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
L3209	SURGICAL BOOT EACH CHILD		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
L3211	SURGICAL BOOT EACH JUNIOR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
L3212	BENESCH BOOT PAIR INFANT		Not Cov	Not Cov	Not Cov	Not Cov		No	No
L3213	BENESCH BOOT PAIR CHILD		Not Cov	Not Cov	Not Cov	Not Cov		No	No
L3214	BENESCH BOOT PAIR JUNIOR		Not Cov	Not Cov	Not Cov	Not Cov		No	No
L3215	ORTHOPE SHOE HIGHTOP W SUPINATOR PRONATOR CHILD		Not Cov	No	Not Cov	No		Not Cov	No
L3216	ORTHOPE SHOE HIGHTOP W SUPINATOR PRONATOR JR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
L3217	ORTHOPE FTWEAR LADIES SHOE HITOP DEPTH INLAY EA		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
L3219	ORTHOPE SHOE HIGHTOP W SUPINATOR PRONATOR CHILD		Not Cov	No	Not Cov	No		Not Cov	No
L3221	ORTHOPE SHOE HIGHTOP W SUPINATOR PRONATOR JR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
L3222	ORTHOPE SHOE HIGHTOP W SUPINATOR PRONATOR CHILD		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
L3224	ORTHOPE SHOE HIGHTOP W SUPINATOR PRONATOR JR		Not Cov	Not Cov	Not Cov	Not Cov		No	No
L3225	ORTHOPE SHOE HIGHTOP W SUPINATOR PRONATOR CHILD		Not Cov	Not Cov	Not Cov	Not Cov		No	No
L3230	ORTHOPE SHOE HIGHTOP W SUPINATOR PRONATOR JR		Not Cov	No	Not Cov	No		No	No
L3250	ORTHOPE FTWEAR CSTM MOLD REMV INNR MOLD PROSTH		Not Cov	Not Cov	Not Cov	Not Cov		No	No
L3251	FOOT SHOE MOLDED PATIENT MODEL SILICONE SHOE EA		Not Cov	Not Cov	Not Cov	Not Cov		No	No
L3252	FOOT SHOE MOLDED PT MDL PLASTAZOTE CSTM FABR EA		Not Cov	Not Cov	Not Cov	Not Cov		No	No
L3253	FOOT MOLDED SHOE PLASTAZOTE CUSTOM FITTED EACH		Not Cov	Not Cov	Not Cov	Not Cov		No	No
L3254	NONSTANDARD SIZE OR WIDTH		Not Cov	Not Cov	Not Cov	Not Cov		No	No
L3255	NONSTANDARD SIZE OR LENGTH		Not Cov	Not Cov	Not Cov	Not Cov		No	No
L3257	ORTHOPE SHOE HIGHTOP W SUPINATOR PRONATOR CHILD		Not Cov	Not Cov	Not Cov	Not Cov		No	No
L3260	SURGICAL BOOT SHOE EACH		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
L3265	PLASTAZOTE SANDAL EACH		Not Cov	Not Cov	Not Cov	Not Cov		No	No
L3300	LIFT ELEVATION HEEL TAPERED METATARSALS PER INCH		Not Cov	Not Cov	Not Cov	Not Cov		No	No
L3310	LIFT ELEVATION HEEL AND SOLE NEOPRENE PER INCH		Not Cov	No	Not Cov	No		No	No
L3320	LIFT ELEVATION HEEL AND SOLE CORK PER INCH		Not Cov	No	Not Cov	No		No	No
L3330	LIFT ELEVATION METAL EXTENSION		Not Cov	Not Cov	Not Cov	Not Cov		No	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
L3332	LIFT ELEV INSIDE SHOE TAPERED UP ONE-HALF INCH		Not Cov	Not Cov	Not Cov	Not Cov		No	No
L3334	LIFT ELEVATION HEEL PER INCH		Not Cov	No	Not Cov	No		No	No
L3340	HEEL WEDGE SACH		Not Cov	No	Not Cov	No		No	No
L3350	HEEL WEDGE		Not Cov	No	Not Cov	No		No	No
L3360	SOLE WEDGE OUTSIDE SOLE		Not Cov	No	Not Cov	No		No	No
L3370	SOLE WEDGE BETWEEN SOLE		Not Cov	Not Cov	Not Cov	Not Cov		No	No
L3380	CLUBFOOT WEDGE		Not Cov	Not Cov	Not Cov	Not Cov		No	No
L3390	OUTFLARE WEDGE		Not Cov	Not Cov	Not Cov	Not Cov		No	No
L3400	METATARSAL BAR WEDGE ROCKER		Not Cov	No	Not Cov	No		No	No
L3410	METATARSAL BAR WEDGE BETWEEN SOLE		Not Cov	No	Not Cov	No		No	No
L3420	FULL SOLE AND HEEL WEDGE BETWEEN SOLE		Not Cov	No	Not Cov	No		No	No
L3430	HEEL COUNTER PLASTIC REINFORCED		Not Cov	No	Not Cov	No		No	No
L3440	HEEL COUNTER LEATHER REINFORCED		Not Cov	Not Cov	Not Cov	Not Cov		No	No
L3450	HEEL SACH CUSHION TYPE		Not Cov	Not Cov	Not Cov	Not Cov		No	No
L3455	HEEL NEW LEATHER STANDARD		Not Cov	Not Cov	Not Cov	Not Cov		No	No
L3460	HEEL NEW RUBBER STANDARD		Not Cov	Not Cov	Not Cov	Not Cov		No	No
L3465	HEEL THOMAS WITH WEDGE		Not Cov	Not Cov	Not Cov	Not Cov		No	No
L3470	HEEL THOMAS EXTENDED TO BALL		Not Cov	Not Cov	Not Cov	Not Cov		No	No
L3480	HEEL PAD AND DEPRESSION FOR SPUR		Not Cov	Not Cov	Not Cov	Not Cov		No	No
L3485	HEEL PAD REMOVABLE FOR SPUR		Not Cov	Not Cov	Not Cov	Not Cov		No	No
L3500	ORTHOPEDIC SHOE ADDITION INSOLE LEATHER		Not Cov	Not Cov	Not Cov	Not Cov		No	No
L3510	ORTHOPEDIC SHOE ADDITION INSOLE RUBBER		Not Cov	Not Cov	Not Cov	Not Cov		No	No
L3520	ORTHOPED SHOE ADDITION INSOLE FELT COVR W LEATHR		Not Cov	Not Cov	Not Cov	Not Cov		No	No
L3530	ORTHOPEDIC SHOE ADDITION SOLE HALF		Not Cov	Not Cov	Not Cov	Not Cov		No	No
L3540	ORTHOPEDIC SHOE ADDITION SOLE FULL		Not Cov	Not Cov	Not Cov	Not Cov		No	No
L3550	ORTHOPEDIC SHOE ADDITION TOE TAP STANDARD		Not Cov	Not Cov	Not Cov	Not Cov		No	No
L3560	ORTHOPEDIC SHOE ADDITION TOE TAP HORSESHOE		Not Cov	Not Cov	Not Cov	Not Cov		No	No
L3570	ORTHOPEDIC SHOE ADDITION SPECIAL EXT INSTEP		Not Cov	Not Cov	Not Cov	Not Cov		No	No
L3580	ORTHOPED SHOE ADD CONVERT INSTEP VELCRO CLOS		Not Cov	Not Cov	Not Cov	Not Cov		No	No
L3590	ORTHO SHOE ADD CONVRT FIRM COUNTER SFT COUNTER		Not Cov	Not Cov	Not Cov	Not Cov		No	No
L3595	ORTHOPEDIC SHOE ADDITION MARCH BAR		Not Cov	Not Cov	Not Cov	Not Cov		No	No
L3600	TRANSF ORTHOS 1 SHOE TO ANOTH CALIP PLATE EXIST		Not Cov	Not Cov	Not Cov	Not Cov		No	No
L3610	TRNSF ORTHOS ONE SHOE TO ANOTHER CALIP PLATE NEW		Not Cov	Not Cov	Not Cov	Not Cov		No	No
L3620	TRANS ORTHOS 1 SHOE-ANOTHER SLD STIRRUP EXISTING		Not Cov	No	Not Cov	No		No	No
L3630	TRNSF ORTHOS 1 SHOE TO ANOTHER SOLID STIRRUP NEW		Not Cov	Not Cov	Not Cov	Not Cov		No	No
L3640	TRNS ORTHOS SHOE TO ANOTH DENNIS BRWNE BTH SHOES		Not Cov	Not Cov	Not Cov	Not Cov		No	No
L3649	ORTHOPED SHOE MODIFICATION ADDITION TRANSFER NOS		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
L3650	SHOULDER ORTHOSIS FIG 8 ABDUCT RESTRAINER PREFAB		Not Cov	No	Not Cov	No		No	No

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L3660	SHOULDER ORTHOSIS FIG 8 CANVAS WEBBING PREFAB		No	No	Not Cov	No		No	No
L3670	SHOULDER ORTHOSIS ACROMIO CLAVICULAR PREFAB		No	No	Not Cov	No		No	No
L3671	SHOULDER ORTHOTIC JOINT DESIGN W O JNTS CUSTOM		Not Cov	No	Not Cov	No		No	No
L3674	SHOULDER ORTHOTIC ABDUCT PSTN THOR COMP CUSTOM		Not Cov	No	Not Cov	No		No	No
L3675	SHOULDER ORTHOSIS VEST ABDUCT RESTRAINER PREFAB		Not Cov	Not Cov	Not Cov	Not Cov		No	No
L3677	SHOULDER ORTHOSIS JNT DSGN NO JNTS PREFAB CUSTOM		Not Cov	No	Not Cov	No		No	No
L3678	SHOULDER ORTHOSIS JOINT DESIGN NO JOINT PREFAB		Not Cov	No	Not Cov	No		No	No
L3702	ELBOW ORTHOTIC W O JOINTS CUSTOM FABRICATED		Not Cov	No	Not Cov	No		No	No
L3710	ELBOW ORTHOSIS ELASTIC W METAL JOINTS PREFAB		Not Cov	No	Not Cov	No		No	No
L3720	EO DBL UPRT W FORARM ARM CUFF FREE MOT CSTM FAB		Not Cov	No	Not Cov	No		No	No
L3730	EO DBL UPRT W CUFF EXT FLX ASST CSTM FAB		Not Cov	No	Not Cov	No		No	No
L3740	EO DBL UPRT W CUFF ADJ LOCK W ACTV CNTRL CSTM		Not Cov	No	Not Cov	No		No	No
L3760	ELBOW ORTHOSIS ADJ POS LOCKING JOINT PREFAB ITEM		Not Cov	No	Not Cov	No		No	No
L3761	ELBOW ORTHOSIS ADJ POS LOCKING JOINT PREFAB OTS		Not Cov	No	Not Cov	No		Yes	No
L3762	ELBOW ORTHOSIS RIGID W O JOINT PREFAB OFF SHELF		Not Cov	No	Not Cov	No		No	No
L3763	EWHO RIGID W O JOINTS CUSTOM FABRICATED		Not Cov	No	Not Cov	No		No	No
L3764	EWHO INCL 1 MORE NONTORSION JOINTS CSTM FAB		Not Cov	No	Not Cov	No		No	No
L3765	EWHFO RIGID W O JOINTS CUSTOM FABRICATED		Not Cov	No	Not Cov	No		No	No
L3766	EWHFO INCL 1 MORE NONTORSION JOINTS CSTM FAB		Not Cov	No	Not Cov	No		No	No
L3806	WHFO CUSTOM FABRICATED INCL FITTING AND ADJUSTMENT		Not Cov	No	Not Cov	No		No	No
L3807	WRIST HAND FINGR ORTHOS W O JNT PREFAB CSTM FIT		Not Cov	No	Not Cov	No		No	No
L3808	WRIST HAND FINGER ORTHOTIC RIGID W O JNT; CUSTOM		No	No	Not Cov	No		No	No
L3809	WRIST HAND FINGER W O JOINT PREFAB ANY TYPE		Not Cov	No	Not Cov	No		No	No
L3891	ADD UP EXT JNT WRIST ELB CSTM FAB ORTHOT ONLY EA		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
L3900	WHFO DYN FLEXOR HINGE WRST FNGR DRIVEN CSTM FAB		Not Cov	No	Not Cov	No		No	No
L3901	WHFO DYN FLEXOR HINGE CABLE DRIVEN CSTM FAB		Not Cov	No	Not Cov	No		No	No
L3904	WHFO EXTERNAL POWERED ELECTRIC CUSTOM FABRICATED		Not Cov	No	Not Cov	No		No	No
L3905	WHO INCL 1 MORE NONTORSION JOINTS CSTM FAB		Not Cov	No	Not Cov	No		No	No
L3906	WHO W O JNT MAY INCL SFT INTRFCE STRAPS CSTM FAB		Not Cov	No	Not Cov	No		No	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
L3908	WRIST HAND ORTHOSIS EXT CONTROL COCK-UP PREFAB		Not Cov	No	Not Cov	No		No	No
L3912	HAND FINGER ORTHOSIS FLEX GLOV FINGR CNTRL PRFAB		Not Cov	No	Not Cov	No		No	No
L3913	HAND FINGER ORTHOTIC W O JOINTS CUSTOM FAB		No	No	Not Cov	No		No	No
L3915	WRIST HAND ORTHOSIS 1 OR GRT NONTORSION JNT PRFAB CSTM		Not Cov	No	Not Cov	No		No	No
L3916	WRIST HAND ORTHOSIS 1 OR GRT NONTORSION JOINT PREFAB		Not Cov	No	Not Cov	No		No	No
L3917	HAND ORTHOSIS METACARPAL FX PREFAB CUSTOM FIT		Not Cov	No	Not Cov	No		No	No
L3918	HAND ORTHOSIS METACARPAL FX ORTHOSIS PREFAB		Not Cov	No	Not Cov	No		No	No
L3919	HAND ORTHOTIC W O JOINTS CUSTOM FABRICATED		Not Cov	No	Not Cov	No		No	No
L3921	HFO INCL 1 MORE NONTORSION JOINTS CUSTOM FAB		Not Cov	No	Not Cov	No		No	No
L3923	HAND FINGER ORTHOSIS W O JOINT PREFAB CUSTOM FIT		Not Cov	No	Not Cov	No		No	No
L3924	HAND FINGER ORTHOSIS WITHOUT JOINTS PREFAB		Not Cov	No	Not Cov	No		No	No
L3925	FINGER ORTHOSIS PIP DIP NONTORSION JOINT PREFAB		No	No	Not Cov	No		No	No
L3927	FINGER ORTHOSIS PIP DIP W O JOINT PREFABRICATED		No	No	Not Cov	No		No	No
L3929	HAND FINGER ORTHOSIS 1 OR GRT NONTORSN JNT PRFAB CSTM		No	No	Not Cov	No		No	No
L3930	HAND FINGER ORTHOSIS 1 OR GRT NONTORSION JOINT PREFAB		Not Cov	No	Not Cov	No		No	No
L3931	WHFO PREFABRICATED INCL FITTING AND ADJUSTMENT		Not Cov	No	Not Cov	No		No	No
L3933	FINGER ORTHOTIC W O JOINTS CUSTOM FABRICATED		No	No	Not Cov	No		No	No
L3935	FINGER ORTHOTIC NONTORSION JOINT CUSTOM FAB		Not Cov	No	Not Cov	No		No	No
L3956	ADD JNT UPPER EXTREM ORTHOTIC ANY MATERIAL; JNT SEWHO ABDUCT PSTN AIRPLANE DESN PREFAB W FIT AND ADJ		Not Cov	No	Not Cov	No		No	No
L3960	SEWHO ABDUCT PSTN AIRPLANE DESN PREFAB W FIT AND ADJ		Not Cov	No	Not Cov	No		No	No
L3961	SEWHO SHOULDER CAP DESIGN W O JOINTS CSTM FAB		Not Cov	No	Not Cov	No		No	No
L3962	SEWHO ABDUCT PSTN ERBS PALS DESN PRFAB W FIT AND ADJ		Not Cov	No	Not Cov	No		No	No
L3967	SEWHO ABDUCTION POSITIONING W O JOINTS CSTM FAB		Not Cov	No	Not Cov	No		No	No
L3971	SEWHO SHOULDER CAP DESIGN CSTM FAB		Not Cov	No	Not Cov	No		No	No
L3973	SEWHO ABDUCT PSTN THOR CMPNT AND SUPP BAR CSTM FAB		Not Cov	No	Not Cov	No		No	No
L3975	SEWHFO SHOULDER CAP DESIGN W O JOINTS CSTM FAB		Not Cov	No	Not Cov	No		No	No
L3976	SEWHFO ABDUCT PSTN THOR CMPNT W O JOINTS CUS FAB		Not Cov	No	Not Cov	No		No	No
L3977	SEWHFO SHOULD CAP DESIGN CUSTOM FAB		Not Cov	No	Not Cov	No		No	No
L3978	SEWHFO ABDUCT PSTN THOR CMPNT AND SUPP BAR CSTM FAB		Not Cov	No	Not Cov	No		No	No

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DOS Effective 10/1/19; Posted 10/30/19

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Code	Code Description	Comments	Apple Health & IMC Medical				IMC / BHSO (Mental Health covered svcs)	Medicare	Market Place
			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
L3980	UP EXTREM FX ORTHOTIC HUM PREFABR INCL FIT AND ADJ		Not Cov	No	Not Cov	No		No	No
L3981	UPPER EXTREMITY FX ORTHOSIS HUMERAL PREF STRAPS		Not Cov	No	Not Cov	No		No	No
L3982	UP EXTRM FX ORTHOT RADUS ULNAR PREFAB W FIT AND ADJ		No	No	Not Cov	No		No	No
L3984	UP EXTREM FX ORTHOTIC WRST PREFAB INCL FIT AND ADJ		Not Cov	No	Not Cov	No		No	No
L3995	ADD UPPER EXTREM ORTHOTIC SOCK FRACTURE EQUAL EA		Not Cov	No	Not Cov	No		No	No
L3999	UPPER LIMB ORTHOSIS NOT OTHERWISE SPECIFIED		Not Cov	Yes	Not Cov	Yes		Yes	Yes
L4000	REPLACE GIRDLE FOR SPINAL ORTHOSIS		Not Cov	No	Not Cov	No		No	No
L4002	REPL STRAP ANY ORTHOTIC ALL CMPNTS ANY LEN TYPE		Not Cov	No	Not Cov	No		No	No
L4010	REPLACE TRILATERAL SOCKET BRIM		Not Cov	No	Not Cov	No		No	No
L4020	REPLACE QUADRILAT SOCKET BRIM MOLDED PT MODEL		Not Cov	No	Not Cov	No		No	No
L4030	REPLACE QUADRILATERAL SOCKET BRIM CUSTOM FITTED		Not Cov	No	Not Cov	No		No	No
L4040	REPLACE MOLDED THI LACER CSTM FAB ORTHOTIC ONLY		Not Cov	No	Not Cov	No		No	No
L4045	REPLACE NONMOLD THI LACER CSTM FAB ORTHOSIS ONLY		Not Cov	No	Not Cov	No		No	No
L4050	REPLACE MOLDED CALF LACER CSTM FAB ORTHOTIC ONLY		Not Cov	No	Not Cov	No		No	No
L4055	REPLACE NONMOLD CALF LACER CSTM FAB ORTHOS ONLY		Not Cov	No	Not Cov	No		No	No
L4060	REPLACE HIGH ROLL CUFF		Not Cov	No	Not Cov	No		No	No
L4070	REPLACE PROXIMAL AND DISTAL UPRIGHT FOR KAFO		Not Cov	No	Not Cov	No		No	No
L4080	REPLACE METAL BANDS KAFO PROXIMAL THIGH		Not Cov	No	Not Cov	No		No	No
L4090	REPLACE METAL BANDS KAFO-AFO CALF DISTAL THIGH		Not Cov	No	Not Cov	No		No	No
L4100	REPLACE LEATHER CUFF KAFO PROXIMAL THIGH		Not Cov	No	Not Cov	No		No	No
L4110	REPLACE LEATHER CUFF KAFO-AFO CALF DISTAL THIGH		Not Cov	No	Not Cov	No		No	No
L4130	REPLACE PRETIBIAL SHELL		Not Cov	No	Not Cov	No		No	No
L4205	REPAIR ORTHOTIC DEVC LABOR COMPONENT PER 15 MIN		Not Cov	No	Not Cov	No		No	No
L4210	REPAIR ORTHOTIC DEVC REPAIR REPLACE MINOR PARTS		Not Cov	No	Not Cov	No		No	No
L4350	ANKLE CONTROL ORTHOSIS STIRRUP STYL RIGID PREFAB		No	No	Not Cov	No		No	No
L4360	WALKING BOOT PNEUMATC AND VACUUM PREFAB CUSTM FIT		Not Cov	No	Not Cov	No		No	No
L4361	WALKING BOOT PNEUMATIC AND OR VACUUM PREFAB		Not Cov	No	Not Cov	No		No	No
L4370	PNEUMATIC FULL LEG SPLINT PREFAB OFF THE SHELF		Not Cov	No	Not Cov	No		No	No
L4386	WALKING BOOT NON-PNEUMATIC PREFAB CUSTOM FIT		Not Cov	No	Not Cov	No		No	No
L4387	WALKING BOOT NON-PNEUMATIC PREFAB OFF THE SHELF		Not Cov	No	Not Cov	No		No	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
L4392	REPLACEMENT SOFT INTERFACE MATERIAL STATIC AFO		Not Cov	Not Cov	Not Cov	Not Cov		No	No
L4394	REPLACE SOFT INTERFACE MATERIAL FOOT DROP SPLINT		Not Cov	Not Cov	Not Cov	Not Cov		No	No
L4396	STATIC DYNAMIC ANK FOOT ORTHOSIS PREFAB CSTM FIT		Not Cov	No	Not Cov	No		No	No
L4397	STATIC DYNAMIC ANK FOOT ORTHOSIS MIN AMB PREFAB		Not Cov	No	Not Cov	No		No	No
L4398	FOOT DROP SPLINT RECUMBENT POSITIONING PREFAB		Not Cov	Not Cov	Not Cov	Not Cov		No	No
L4631	AFO WALK BOOT TYP ROCKR BOTTM ANT TIB SHELL CSTM		Not Cov	Yes	Not Cov	Yes		Yes	Yes
L5000	PART FT SHOE INSERT W LONGTUDNL ARCH TOE FILLER		Not Cov	No	Not Cov	No		No	No
L5010	PARTIAL FT MOLDED SOCKET ANK HEIGHT W TOE FILLER		Not Cov	No	Not Cov	No		No	No
L5020	PART FT MOLDED SOCKET TIB TUBERCLE HT W TOE FIL		Not Cov	No	Not Cov	No		No	No
L5050	ANKLE SYMES MOLDED SOCKET SACH FOOT		Not Cov	No	Not Cov	No		No	No
L5060	ANK SYMES METL FRME MOLD LEATHR SOCKT ARTIC ANK		Not Cov	No	Not Cov	No		No	No
L5100	BELOW KNEE MOLDED SOCKET SHIN SACH FOOT		Not Cov	No	Not Cov	No		No	No
L5105	BELOW KNEE PLSTC SOCKT JNT AND THIGH LACER SACH FOOT		Not Cov	No	Not Cov	No		No	No
L5150	KNEE DISRTC MOLD SOCKT EXT KNEE JNT SHIN SACH FT		Not Cov	No	Not Cov	No		No	No
L5160	KNEE DISARTIC MOLD SOCKT BENT KNEE EXT KNEE JNT		Not Cov	No	Not Cov	No		No	No
L5200	ABVE KNEE MOLD SOCKT 1 AXIS CONSTANT FRICTION		Not Cov	No	Not Cov	No		No	No
L5210	ABVE KNEE SHRT PROSTH NO KNEE JNT NO ANK JNT EA		Not Cov	No	Not Cov	No		No	No
L5220	ABVE KNEE SHRT PROSTH W ARTIC ANK FOOT DYN		Not Cov	No	Not Cov	No		No	No
L5230	ABVE KNEE PROX FEM FOCAL DEFIC SACH FOOT		Not Cov	No	Not Cov	No		No	No
L5250	HIP DISARTIC CANADIAN TYPE; MOLD SOCKT HIP JNT		Not Cov	No	Not Cov	No		No	No
L5270	HIP DISRTC TILT TABLE; MOLD SCKT LOCK HIP JNT		Not Cov	No	Not Cov	No		No	No
L5280	HEMIPELVECT CANADIAN TYPE; MOLD SOCKT HIP JNT		Not Cov	No	Not Cov	No		No	No
L5301	BELW KNEE MOLD SOCKT SHIN SACH FT ENDOSKEL SYS		Not Cov	No	Not Cov	No		No	No
L5312	KNEE DISARTIC MOLD SOCKET 1 AXIS KNEE SACH FOOT		Not Cov	No	Not Cov	No		No	No
L5321	ABOVE KNEE OPEN END SACH FT ENDO SYS 1 AXIS KNEE		Not Cov	No	Not Cov	No		No	No
L5331	JOINT SINGLE AXIS KNEE SACH FOOT		Not Cov	No	Not Cov	No		No	No
L5341	SINGLE AXIS KNEE SACH FOOT		Not Cov	No	Not Cov	No		No	No
L5400	IMMED POSTSURG ERLY FIT APPLY RIGD DRESS W 1 CHG		Not Cov	No	Not Cov	No		No	No
L5410	IMMED POSTSURG APPL RIGD DRESS W EA ADD CAST CHG		Not Cov	No	Not Cov	No		No	No
L5420	IMMED POSTSURG INIT RIGD DRESS 1 CHG AK KNEE		Not Cov	No	Not Cov	No		No	No
L5430	IMMED POSTSURG INIT RIGD DRSG AK EA ADD CAST CHG		Not Cov	No	Not Cov	No		No	No
L5450	IMMED POSTSURG APPLIC NONWT BEAR RIGD BELW KNEE		Not Cov	No	Not Cov	No		No	No
L5460	IMMED POSTSURG APPLIC NONWT BEAR RIGD ABVE KNEE		Not Cov	No	Not Cov	No		No	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
L5500	INIT BELW KNEE PTB SOCKT NON-ALIGN DIR FORMED		Not Cov	No	Not Cov	No	No	No	
L5505	INIT ABVE KNEE-DISARTC ISCH LEVL SOCKT NON-ALIGN		Not Cov	No	Not Cov	No	No	No	
L5510	PREP BELW KNEE PTB SOCKT NON-ALIGN MOLD MDL		Not Cov	No	Not Cov	No	No	No	
L5520	PREP BK PTB SCKT NON-ALIGN THERMOPLSTC EQ DIR FORM		Not Cov	No	Not Cov	No	No	No	
L5530	PREP BK PTB SCKT NON-ALIGN THERMOPLSTC EQ MOLD MDL		Not Cov	No	Not Cov	No	No	No	
L5535	PREP BELOW KNEE PTB NON-ALIGN PRFAB ADJ OPEN END		Not Cov	No	Not Cov	No	No	No	
L5540	PREP BK PTB SCKT NON-ALIGN LAMNATD SCKT MOLD MDL		Not Cov	No	Not Cov	No	No	No	
L5560	PREP AK-DISRTC ISCH LEVL PLASTER SOCKET MOLD MDL		Not Cov	No	Not Cov	No	No	No	
L5570	PREP AK-DISRTC ISCH LEVL THERMOPLSTC EQ DIR FORMED		Not Cov	No	Not Cov	No	No	No	
L5580	PREP AK DISARTIC NON-ALIGN THERMOPLSTC EQ MOLD MDL		Not Cov	No	Not Cov	No	No	No	
L5585	PREP AK-DISARTC NON-ALIGN PRFAB ADJ OPN END SCKT		Not Cov	No	Not Cov	No	No	No	
L5590	PREP AK-DISARTIC NON-ALIGN LAMINATED SCKT MOLD		Not Cov	No	Not Cov	No	No	No	
L5595	PREP HIP DISARTIC-HEMIPELVECT THERMOPLSTC EQ MOLD		Not Cov	No	Not Cov	No	No	No	
L5600	PREP HIP DISARTIC-HEMIPELVECT LAMINATD SCKT MOLD		Not Cov	No	Not Cov	No	No	No	
L5610	ADD LW EXTRM ENDO SYS ABVE KNEE HYDRACADENCE SYS		Not Cov	No	Not Cov	No	No	No	
L5611	ADD LW EXTRM ENDO AK-DISRTC 4-BAR LINK W FRICT		Not Cov	No	Not Cov	No	No	No	
L5613	ADD LW EXTRM ENDO AK-DISARTIC 4-BAR W HYDRAULIC		Not Cov	No	Not Cov	No	No	No	
L5614	ADD LW EXT EXOSKEL SYS AK-DISARTC 4-BAR PNEUMAT		Not Cov	No	Not Cov	No	No	No	
L5616	ADD LW EXTRM ENDO AK UNIVERSAL MXPLX SYS FRICT		Not Cov	No	Not Cov	No	No	No	
L5617	ADD LW EXTRM QUICK CHG SLF-ALIGN U AK BK EA		Not Cov	No	Not Cov	No	No	No	
L5618	ADDITION TO LOWER EXTREMITY TEST SOCKET SYMES		Not Cov	No	Not Cov	No	No	No	
L5620	ADDITION LOWER EXTREMITY TEST SOCKET BELOW KNEE		Not Cov	No	Not Cov	No	No	No	
L5622	ADDITION LOWER EXTREM TEST SOCKET KNEE DISARTIC		Not Cov	No	Not Cov	No	No	No	
L5624	ADDITION LOWER EXTREMITY TEST SOCKET ABOVE KNEE		Not Cov	No	Not Cov	No	No	No	
L5626	ADDITION LOWER EXTREM TEST SOCKET HIP DISARTIC		Not Cov	No	Not Cov	No	No	No	
L5628	ADDITION LOWER EXTREM TEST SOCKET HEMIPELVECTOMY		Not Cov	No	Not Cov	No	No	No	
L5629	ADDITION LOWER EXTREM BELOW KNEE ACRYLIC SOCKET		Not Cov	No	Not Cov	No	No	No	

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
L5630	ADD LOW EXTREM SYMES TYPE EXPANDABLE WALL SOCKT		Not Cov	No	Not Cov	No		No	No
L5631	ADD LW EXT ABVE KNEE KNEE DISARTIC ACRYLC SOCKT		Not Cov	No	Not Cov	No		No	No
L5632	ADD LOW EXTREM SYMES TYPE PTB BRIM DESIGN SOCKT		Not Cov	No	Not Cov	No		No	No
L5634	ADD LOW EXTREM SYMES TYPE POST OPENING SOCKT		Not Cov	No	Not Cov	No		No	No
L5636	ADDITION LOW EXTREM SYMES TYPE MED OPENING SOCKT		Not Cov	No	Not Cov	No		No	No
L5637	ADDITION LOWER EXTREMITY BELOW KNEE TOTAL CNTC		Not Cov	No	Not Cov	No		No	No
L5638	ADDITION LOWER EXTREM BELOW KNEE LEATHER SOCKET		Not Cov	No	Not Cov	No		No	No
L5639	ADDITION LOWER EXTREMITY BELOW KNEE WOOD SOCKET		Not Cov	No	Not Cov	No		No	No
L5640	ADDITION LOWER EXTREM KNEE DISARTIC LEATHR SOCKT		Not Cov	No	Not Cov	No		No	No
L5642	ADDITION LOWER EXTREM ABOVE KNEE LEATHER SOCKET		Not Cov	No	Not Cov	No		No	No
L5643	ADD LW EXT HIP DISARTIC FLX INNR SOCKT EXT FRAME		Not Cov	No	Not Cov	No		No	No
L5644	ADDITION LOWER EXTREMITY ABOVE KNEE WOOD SOCKET		Not Cov	No	Not Cov	No		No	No
L5645	ADD LW EXT BELW KNEE FLXIBLE INNR SOCKT EXT FRME		Not Cov	No	Not Cov	No		No	No
L5646	ADD LOW EXT BELOW KNEE AIR FL GEL EQ CUSHN SOCKT		Not Cov	No	Not Cov	No		No	No
L5647	ADDITION LOWER EXTREM BELOW KNEE SUCTION SOCKET		Not Cov	No	Not Cov	No		No	No
L5648	ADD LOW EXT ABOVE KNEE AIR FL GEL EQ CUSHN SOCKT		Not Cov	No	Not Cov	No		No	No
L5649	ADD LW EXT ISCHIAL CONTAINMENT NARROW M-L SOCKET		Not Cov	No	Not Cov	No		No	No
L5650	ADD LW EXT TOTAL CONTACT ABVE KNEE KNEE DISARTIC		Not Cov	No	Not Cov	No		No	No
L5651	ADD LW EXT ABVE KNEE FLXIBLE INNR SOCKT EXT FRME		Not Cov	No	Not Cov	No		No	No
L5652	ADD LW EXT SUCTN SUSP ABVE KNEE KNEE DISARTIC		Not Cov	No	Not Cov	No		No	No
L5653	ADD LOW EXTREM KNEE DISARTIC XPNDABLE WALL SOCKT		Not Cov	No	Not Cov	No		No	No
L5654	ADDITION TO LOWER EXTREMITY SOCKET INSERT SYMES		Not Cov	No	Not Cov	No		No	No
L5655	ADDITION LOWER EXTREM SOCKET INSERT BELOW KNEE		Not Cov	No	Not Cov	No		No	No
L5656	ADDITION LOWER EXTREM SOCKT INSERT KNEE DISARTIC		Not Cov	No	Not Cov	No		No	No
L5658	ADDITION LOWER EXTREM SOCKET INSERT ABOVE KNEE		Not Cov	No	Not Cov	No		No	No

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			Outpatient		ASC	Office Setting			
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L5661	ADD LOW EXTREM SOCKT INSERT MULTIDUROMETER SYMES		Not Cov	No	Not Cov	No		No	No
L5665	ADD LW EXTRM SOCKT INSRT MXIDUROMETER BELW KNEE		Not Cov	No	Not Cov	No		No	No
L5666	ADDITION LOWER EXTREM BELOW KNEE CUFF SUSPENSION		Not Cov	No	Not Cov	No		No	No
L5668	ADDITION LOW EXTREM BELOW KNEE MOLDED DIST CUSHN		Not Cov	No	Not Cov	No		No	No
L5670	ADD LOW EXTREM BELW KNEE MOLD SUPRACONDYL R SUSP		Not Cov	No	Not Cov	No		No	No
L5671	ADD LW EXTRM BELW ABVE KNEE SUSP LOCK MECH		Not Cov	No	Not Cov	No		No	No
L5672	ADD LOW EXTREM BELOW KNEE REMV MED BRIM SUSP		Not Cov	No	Not Cov	No		No	No
L5673	ADD LW EXT CSTM MOLD PRFAB FOR USE W LOCK MECH		Not Cov	No	Not Cov	No		No	No
L5676	ADD LOW EXTREM BELW KNEE KNEE JNT 1 AXIS PAIR		Not Cov	No	Not Cov	No		No	No
L5677	ADD LOW EXTREM BELW KNEE KNEE JNT POLYCNTRC PAIR		Not Cov	No	Not Cov	No		No	No
L5678	ADDITION LOW EXTREM BELOW KNEE JOINT COVERS PAIR		Not Cov	No	Not Cov	No		No	No
L5679	ADD LW EXT BK AK CSTM MOLD PRFAB NOT W LOCK MECH		Not Cov	No	Not Cov	No		No	No
L5680	ADD LOW EXTREM BELOW KNEE THIGH LACER NONMOLDED		Not Cov	No	Not Cov	No		No	No
L5681	ADD LW EXT CSTM INSRT CNGN ATYP TRAUMAT AMP INIT		Not Cov	No	Not Cov	No		No	No
L5682	ADD LW EXTRM BELW KNEE THI LACER GLUTL ISCH MOLD		Not Cov	No	Not Cov	No		No	No
L5683	ADD LW EXT CSTM INSRT NO CNGN TRAUMAT AMP INIT		Not Cov	No	Not Cov	No		No	No
L5684	ADDITION LOWER EXTREMITY BELOW KNEE FORK STRAP		Not Cov	No	Not Cov	No		No	No
L5685	ADD LOW EXT PROS BELW KNEE SUSP SEAL SLEEVE EA		Not Cov	No	Not Cov	No		No	No
L5686	ADDITION LOWER EXTREMITY BELOW KNEE BACK CHECK		Not Cov	No	Not Cov	No		No	No
L5688	ADD LOW EXTREM BELOW KNEE WAIST BELT WEBBING		Not Cov	No	Not Cov	No		No	No
L5690	ADD LOW EXTREM BELOW KNEE WAIST BELT PADD AND LINED		Not Cov	No	Not Cov	No		No	No
L5692	ADD LOW EXTREM ABVE KNEE PELV CONTROL BELT LIGHT		Not Cov	No	Not Cov	No		No	No
L5694	ADD LOW EXTREM ABVE KNEE PELV CNTRL BELT PADD AND LN		Not Cov	No	Not Cov	No		No	No
L5695	ADD LW EXTRM ABVE KNEE PELV CNTRL SLV NEOPRENE		Not Cov	No	Not Cov	No		No	No
L5696	ADD LOW EXTREM ABVE KNEE KNEE DISARTIC PELV JNT		Not Cov	No	Not Cov	No		No	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
L5697	ADD LOW EXTREM ABVE KNEE KNEE DISARTIC PELV BAND		Not Cov	No	Not Cov	No		No	No
L5698	ADD LW EXTRM AK KNEE DISRTC SILESIAIAN BANDGE		Not Cov	No	Not Cov	No		No	No
L5699	ALL LOWER EXTREMITY PROSTHESES SHOULDER HARNESS		Not Cov	No	Not Cov	No		No	No
L5700	REPLACEMENT SOCKET BELOW KNEE MOLDED PT MODEL		Not Cov	No	Not Cov	No		No	No
L5701	REPL SOCKT ABVE KNEE KNEE DISARTIC W ATTCH PLAT		Not Cov	No	Not Cov	No		No	No
L5702	REPLCMT SOCKT HIP DISARTIC W HIP JNT MOLD PT MDL		Not Cov	No	Not Cov	No		No	No
L5703	ANKLE SYMES MOLD PT MODEL SACH FOOT REPL ONLY		Not Cov	No	Not Cov	No		No	No
L5704	CUSTOM SHAPED PROTECTIVE COVER BELOW KNEE		Not Cov	No	Not Cov	No		No	No
L5705	CUSTOM SHAPED PROTECTIVE COVER ABOVE KNEE		Not Cov	No	Not Cov	No		No	No
L5706	CUSTOM SHAPED PROTECTIVE COVER KNEE DISARTIC		Not Cov	No	Not Cov	No		No	No
L5707	CUSTOM SHAPED PROTECTIVE COVER HIP DISARTIC		Not Cov	No	Not Cov	No		No	No
L5710	ADD EXOSKEL KNEE-SHIN SYSTEM 1 AXIS MANUAL LOCK		Not Cov	No	Not Cov	No		No	No
L5711	ADD EXOSKEL KNEE-SHIN 1 AXIS MNL LOCK ULTRA-LGHT		Not Cov	No	Not Cov	No		No	No
L5712	ADD EXOSKEL KNEE-SHIN 1 AXIS FRICT SWING CNTRL		Not Cov	No	Not Cov	No		No	No
L5714	ADD EXOSKEL KNEE-SHIN VARIBL FRICT SWING CNTRL		Not Cov	No	Not Cov	No		No	No
L5716	ADD EXOSKEL KNEE-SHIN POLYCNTRC MECH STANCE LOCK		Not Cov	No	Not Cov	No		No	No
L5718	ADD EXOSKL KNEE-SHIN POLYCNTRC FRICT SWING CNTRL		Not Cov	No	Not Cov	No		No	No
L5722	ADD EXOSKEL KNEE-SHIN PNEUMAT SWING FRICT CNTRL		Not Cov	No	Not Cov	No		No	No
L5724	ADD EXOSKEL KNEE-SHIN FLUID SWING PHASE CNTRL		Not Cov	No	Not Cov	No		No	No
L5726	ADD EXOSKEL KNEE-SHIN EXT JOINT FL SWING CNTRL		Not Cov	No	Not Cov	No		No	No
L5728	ADD EXOSKEL KNEE-SHIN FLUID SWING AND STANCE CNTRL		Not Cov	No	Not Cov	No		No	No
L5780	ADD EXOSKL KNEE-SHIN PNEUMAT HYDRA PNEUMAT CNTRL		Not Cov	No	Not Cov	No		No	No
L5781	ADD LW LIMB PROS RESIDUL LIMB VOL MGMT SYS		Not Cov	No	Not Cov	No		No	No
L5782	ADD LW LIMB PROS RESIDUL LIMB MGMT SYS HEVY DUTY		Not Cov	No	Not Cov	No		No	No
L5785	ADD EXOSKEL SYSTEM BELW KNEE ULTRA-LGHT MATERIAL		Not Cov	No	Not Cov	No		No	No
L5790	ADD EXOSKEL SYSTEM ABVE KNEE ULTRA-LGHT MATERIAL		Not Cov	No	Not Cov	No		No	No
L5795	ADD EXOSKEL SYSTEM HIP DISARTIC ULTRA-LGHT MATL		Not Cov	No	Not Cov	No		No	No
L5810	ADD ENDOSKEL KNEE-SHIN SYSTEM 1 AXIS MANUAL LOCK		Not Cov	No	Not Cov	No		No	No
L5811	ADD ENDOSKEL KNEE-SHIN MNL LOCK ULTRA-LGHT MATL		Not Cov	No	Not Cov	No		No	No

This prior authorization guide applies to Medicaid, Medicare, and Marketplace.

DOS Effective 10/1/19; Posted 10/30/19

All Inpatient services require prior authorization

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*** All Medicare services subject to the limitations in the CMS billing guide and fee schedules at <https://www.cms.gov/> ***

Code	Code Description	Comments	Apple Health & IMC Medical				IMC / BHSO (Mental Health covered svcs)	Medicare	Market Place
			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
L5812	ADD ENDOSKEL KNEE-SHIN FRICT SWING AND STANCE CNTRL		Not Cov	No	Not Cov	No		No	No
L5814	ADD ENDOSKEL KNEE-SHIN HYDRAULIC SWING MECH LOCK		Not Cov	No	Not Cov	No		No	No
L5816	ADD ENDOSKEL KNEE-SHIN MECH STANCE PHASE LOCK		Not Cov	No	Not Cov	No		No	No
L5818	ADD ENDOSKEL KNEE-SHIN FRICT SWING AND STANCE CNTRL		Not Cov	No	Not Cov	No		No	No
L5822	ADD ENDOSKEL KNEE-SHIN PNEUMAT SWING FRICT CNTRL		Not Cov	No	Not Cov	No		No	No
L5824	ADD ENDOSKEL KNEE-SHIN FLUID SWING PHASE CNTRL		Not Cov	No	Not Cov	No		No	No
L5826	ADD ENDO KNEE-SHIN HYDRAUL SWNG MIN HI ACTV FRME		Not Cov	No	Not Cov	No		No	No
L5828	ADD ENDO KNEE-SHIN FL SWING AND STANCE PHASE CNTRL		Not Cov	No	Not Cov	No		No	No
L5830	ADD ENDOSKEL KNEE-SHIN PNEUMAT SWING PHASE CNTRL		Not Cov	No	Not Cov	No		No	No
L5840	ADD ENDO KNEE-SHIN 4-BAR LINK MX-AXIAL PNEUMAT		Not Cov	No	Not Cov	No		No	No
L5845	ADD ENDOSKEL KNEE-SHIN STANCE FLX FEATUR ADJ		Not Cov	Not Cov	Not Cov	Not Cov		No	No
L5848	ADD ENDOSKEL KNEE-SHIN SYS FLUID STANCE EXTENSN		Not Cov	No	Not Cov	No		No	No
L5850	ADD ENDOSKEL SYS AK HIP DISARTIC KNEE EXT ASST		Not Cov	No	Not Cov	No		No	No
L5855	ADD ENDOSKEL SYS HIP DISARTIC MECH HIP EXT ASST		Not Cov	No	Not Cov	No		No	No
L5856	ADD LOW EXT PROS KNEE-SHIN SYS SWING AND STANCE PHSE		Not Cov	Not Cov	Not Cov	Not Cov		Yes	No
L5857	ADD LOW EXT PROS KNEE-SHIN SYS SWING PHASE ONLY		Not Cov	No	Not Cov	No		No	No
L5858	ADD LW EXT PROS KNEE SHIN SYS STANCE PHASE ONLY		Not Cov	Not Cov	Not Cov	Not Cov		No	No
L5859	ADD LOW EXT PROS KN-SHIN PROG FLX EXT ANY MOTOR		Not Cov	Not Cov	Not Cov	Not Cov		No	No
L5910	ADD ENDOSKEL SYSTEM BELOW KNEE ALIGNABLE SYSTEM		Not Cov	No	Not Cov	No		No	No
L5920	ADD ENDOSKEL SYS AK HIP DISARTIC ALIGNABLE SYS		Not Cov	No	Not Cov	No		No	No
L5925	ADD ENDOSKEL AK-DISARTIC HIP DISARTIC MNL LOCK		Not Cov	No	Not Cov	No		No	No
L5930	ADD ENDOSKEL SYSTEM HIGH ACTV KNEE CONTROL FRAME		Not Cov	No	Not Cov	No		No	No
L5940	ADD ENDOSKEL SYSTEM BELW KNEE ULTRA-LGHT MATL		Not Cov	No	Not Cov	No		No	No
L5950	ADD ENDOSKEL SYSTEM ABVE KNEE ULTRA-LGHT MATL		Not Cov	No	Not Cov	No		No	No
L5960	ADD ENDOSKEL SYSTEM HIP DISARTIC ULTRA-LGHT MATL		Not Cov	No	Not Cov	No		No	No
L5961	ADD ENDO SYS POLYCNTRC HIP JOINT ROTATION CNTRL		Not Cov	No	Not Cov	No		No	No
L5962	ADD ENDOSKEL BK FLXIBLE PROTVE OTR SURF COVERING		Not Cov	No	Not Cov	No		No	No
L5964	ADD ENDOSKEL AK FLXIBLE PROTVE OTR SURF COVR		Not Cov	No	Not Cov	No		No	No

This prior authorization guide applies to Medicaid, Medicare, and Marketplace.

DOS Effective 10/1/19; Posted 10/30/19

All Inpatient services require prior authorization

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
L5966	ADD ENDO HIP DISRTC FLXIBL PROTVE OUTR SURF COVR		Not Cov	No	Not Cov	No		No	No
L5968	ADD LW LIMB PROSTH MX-AXIAL ANK W SWING PHASE		Not Cov	No	Not Cov	No		No	No
L5969	ADDITION ENDOSKELETAL ANKLE-FOOT ANK PWR ASSIST		Not Cov	Not Cov	Not Cov	Not Cov		No	No
L5970	ALL LOW EXTREM PROSTH FT EXTERNAL KEEL SACH FOOT		Not Cov	No	Not Cov	No		No	No
L5971	ALL LOWER EXTREM PROS SACH FOOT REPLACEMENT ONLY		Not Cov	No	Not Cov	No		No	No
L5972	ALL LOWER EXTREMITY PROSTHESES FOOT FLEX KEEL		Not Cov	No	Not Cov	No		No	No
L5973	ENDOSKEL ANK FOOT SYS MICRPROCSS CONTROL PWR SRC		Not Cov	Not Cov	Not Cov	Not Cov		No	No
L5974	ALL LOWER EXTREM PROSTH FT SINGLE AXIS ANK FOOT		Not Cov	No	Not Cov	No		No	No
L5975	ALL LW EXTRM PRSTH COMB 1 AXIS ANK AND FLXBL KEEL FT		Not Cov	No	Not Cov	No		No	No
L5976	ALL LOWER EXTREM PROSTHESES ENERGY STORING FOOT		Not Cov	No	Not Cov	No		No	No
L5978	ALL LOWER EXTREM PROSTH FT MULTI-AXIAL ANK FOOT		Not Cov	No	Not Cov	No		No	No
L5979	ALL LW EXTRM PRSTH MX-AXL ANK DYN RSPN FT 1 PECE		Not Cov	No	Not Cov	No		No	No
L5980	ALL LOWER EXTREMITY PROSTHESES FLEX-FOOT SYSTEM		Not Cov	No	Not Cov	No		No	No
L5981	ALL LOWER EXTREM PROSTH FLEX-WALK SYSTEM EQUAL		Not Cov	No	Not Cov	No		No	No
L5982	ALL EXOSKEL LOW EXTREM PROSTH AXIAL ROTAT UNIT		Not Cov	No	Not Cov	No		No	No
L5984	ALL ENDOSKEL LOW EXT PROSTH AXIAL ROTAT UNIT ADJ		Not Cov	No	Not Cov	No		No	No
L5985	ALL ENDOSKEL LOW EXTREM PROSTH DYN PROSTH PYLN		Not Cov	No	Not Cov	No		No	No
L5986	ALL LOW EXTREM PROSTH MULTI-AXIAL ROTATION UNIT		Not Cov	No	Not Cov	No		No	No
L5987	ALL LW XTRM PRSTH SHNK FT SYS W VRTCL LOAD PYLN		Not Cov	Not Cov	Not Cov	Not Cov		No	No
L5988	ADD LW LIMB PROSTH VERTCL SHOCK RDOC PYLN FEATUR		Not Cov	No	Not Cov	No		No	No
L5990	ADD LOW EXTREM PROSTH USER ADJUSTBLE HEEL HT		Not Cov	No	Not Cov	No		No	No
L5999	LOWER EXTREMITY PROSTHESIS NOS		Not Cov	Yes	Not Cov	Yes		Yes	Yes
L6000	PARTIAL HAND THUMB REMAINING		Not Cov	No	Not Cov	No		No	No
L6010	PARTIAL HAND LITTLE AND OR RING FINGER REMAINING		Not Cov	No	Not Cov	No		No	No
L6020	PARTIAL HAND NO FINGER REMAINING		Not Cov	No	Not Cov	No		No	No
L6026	TRANSCARPAL MC PART HAND DISARTICULATION PROS		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
L6050	WRST DISARTIC MOLD SOCKET FLEX ELB HNG TRICP PAD		Not Cov	No	Not Cov	No		No	No

This prior authorization guide applies to Medicaid, Medicare, and Marketplace.

DOS Effective 10/1/19; Posted 10/30/19

All Inpatient services require prior authorization

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
L6055	WRST DISARTIC MOLD SOCKT W XPNDABLE INTERFCE		Not Cov	No	Not Cov	No		No	No
L6100	BELW ELB MOLD SOCKT FLXIBLE ELB HINGE TRICP PAD		Not Cov	No	Not Cov	No		No	No
L6110	BELOW ELBOW MOLDED SOCKET		Not Cov	No	Not Cov	No		No	No
L6120	BELW ELB MOLD DBL WALL SCKT STEP-UP HNG 1 2 CUFF		Not Cov	No	Not Cov	No		No	No
L6130	BELW ELB STUMP ACTVATD LOCK HINGE HALF CUFF		Not Cov	No	Not Cov	No		No	No
L6200	ELB DISARTIC MOLD SOCKT OUTSIDE LOCK HINGE FORARM		Not Cov	No	Not Cov	No		No	No
L6205	ELB DISARTIC MOLD SCKT W XPND INTRFCE LOCK FORARM		Not Cov	No	Not Cov	No		No	No
L6250	ABVE ELB MOLD DBL WALL SCKT INTRL LCK ELB FORARM		Not Cov	No	Not Cov	No		No	No
L6300	SHLDR DISARTIC MOLD SOCKET INTRL LOCK ELB FORARM		Not Cov	No	Not Cov	No		No	No
L6310	SHOULDER DISARTIC PASSIVE REST COMPLETE PROSTH		Not Cov	No	Not Cov	No		No	No
L6320	SHOULDER DISART PASSIVE REST SHOULDER CAP ONLY		Not Cov	No	Not Cov	No		No	No
L6350	INTERSCAP THOR HUM SECT INTRL LOCK ELB FORARM		Not Cov	No	Not Cov	No		No	No
L6360	INTERSCAPULAR THOR PASSIVE REST CMPL PROSTH		Not Cov	No	Not Cov	No		No	No
L6370	INTERSCAPULAR THOR PASSIVE REST SHLDR CAP ONLY		Not Cov	No	Not Cov	No		No	No
L6380	IMMED POSTSURG RIGD DRSG 1 CAST CHG WRST DISRTC		Not Cov	No	Not Cov	No		No	No
L6382	IMMED POSTSURG RIGD DRSG 1 CAST CHG ELB DISARTIC		Not Cov	No	Not Cov	No		No	No
L6384	IMMED POSTSURG RIGD DRSG 1 CAST CHG SHLDR DISRTC		Not Cov	No	Not Cov	No		No	No
L6386	IMMED POSTSURG EARLY FIT EA ADD CAST CHG AND REALIGN		Not Cov	No	Not Cov	No		No	No
L6388	IMMED POSTSURG EARLY FIT APPLIC RIGID DRESS ONLY		Not Cov	No	Not Cov	No		No	No
L6400	BE MOLD SCKT ENDOSKEL SYS W SFT PROSTH TISS SHAP		Not Cov	No	Not Cov	No		No	No
L6450	ELB DISRTC MOLD SCKT ENDOSKEL W SFT PROSTH TISS		Not Cov	No	Not Cov	No		No	No
L6500	ABVE ELB MOLD SCKT ENDOSKEL W SFT PROSTH TISS		Not Cov	No	Not Cov	No		No	No
L6550	SHLDR DISRTC MOLD SCKT ENDOSKEL W SFT PROS TISS		Not Cov	No	Not Cov	No		No	No
L6570	INTRSCAP THOR MOLD SCKT ENDOSKEL W SFT PROS TISS		Not Cov	No	Not Cov	No		No	No
L6580	PREP WRST DISRTC BELW ELB 1 WALL PLSTC SCKT MOLD		Not Cov	No	Not Cov	No		No	No
L6582	PREP WRST DISRTC BELW ELB 1 WALL SCKT DIR FORMED		Not Cov	No	Not Cov	No		No	No
L6584	PREP ELB DISRTC ABVE ELB 1 WALL PLSTC SOCKT MOLD		Not Cov	No	Not Cov	No		No	No
L6586	PREP ELB DISRTC ABVE ELB 1 WALL SOCKT DIR FORMED		Not Cov	No	Not Cov	No		No	No
L6588	PREP SHLDR DISRTC THOR 1 WALL PLSTC SCKT MOLD		Not Cov	No	Not Cov	No		No	No
L6590	PREP SHLDR DISRTC THOR 1 WALL SOCKET DIR FORM		Not Cov	No	Not Cov	No		No	No

This prior authorization guide applies to Medicaid, Medicare, and Marketplace.

DOS Effective 10/1/19; Posted 10/30/19

All Inpatient services require prior authorization

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*** All Medicare services subject to the limitations in the CMS billing guide and fee schedules at <https://www.cms.gov/> ***

Code	Code Description	Comments	Apple Health & IMC Medical				IMC / BHSO (Mental Health covered svcs)	Medicare	Market Place
			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
L6600	UPPER EXTREMITY ADDITIONS POLYCENTRIC HINGE PAIR		Not Cov	No	Not Cov	No		No	No
L6605	UPPER EXTREMITY ADD SINGLE PIVOT HINGE PAIR		Not Cov	No	Not Cov	No		No	No
L6610	UPPER EXTREMITY ADD FLEXIBLE METAL HINGE PAIR		Not Cov	No	Not Cov	No		No	No
L6611	ADD UPPER EXT PROS EXTERNAL PWR ADDITIONAL SWTCH		Not Cov	No	Not Cov	No		No	No
L6615	UPPER EXTREM ADD DISCONNECT LOCKING WRST UNIT		Not Cov	No	Not Cov	No		No	No
L6616	UP EXTREM ADD DISCNCT INSERT LOCK WRST U EA		Not Cov	No	Not Cov	No		No	No
L6620	UPPER EXT ADD FLEX EXT WRIST UNIT W WO FRICTION		Not Cov	No	Not Cov	No		No	No
L6621	UP EXTREM PROS ADD FLEXION EXTENSION WRIST		Not Cov	No	Not Cov	No		No	No
L6623	UP EXT ADD SPRNG ASST ROTATL WRST U W LATCH RLSE		Not Cov	No	Not Cov	No		No	No
L6624	UPPER EXTREMITY ADD FLX EXT ROTATION WRIST UNIT		Not Cov	No	Not Cov	No		No	No
L6625	UPPER EXTREM ADD ROTATION WRST UNIT W CABLE LOCK		Not Cov	No	Not Cov	No		No	No
L6628	UP EXTRM ADD QUICK DISCNCT HOOK OTTO BOCK EQ		Not Cov	No	Not Cov	No		No	No
L6629	UP EXTRM ADD QUICK DISCNCT LAMINATION COLLR		Not Cov	No	Not Cov	No		No	No
L6630	UPPER EXTREM ADDITION STAINLESS STEEL ANY WRIST		Not Cov	No	Not Cov	No		No	No
L6632	UPPER EXTREM ADDITION LATEX SUSPENSION SLEEVE EA		Not Cov	No	Not Cov	No		No	No
L6635	UPPER EXTREMITY ADDITION LIFT ASSIST FOR ELBOW		Not Cov	No	Not Cov	No		No	No
L6637	UPPER EXTREMITY ADDITION NUDGE CONTROL ELB LOCK		Not Cov	No	Not Cov	No		No	No
L6638	UP EXT ADD PROS ELEC LOCK ONLY W MNL PWR ELB		Not Cov	No	Not Cov	No		No	No
L6640	UPPER EXTREMITY ADD SHOULDER ABDUCT JOINT PAIR		Not Cov	No	Not Cov	No		No	No
L6641	UPPER EXTREM ADD EXCURSIONUPPER EXTREM ADD EXCUR		Not Cov	No	Not Cov	No		No	No
L6642	UPPER EXTREM ADD EXCURSION AMPLIFIER LEVER TYPE		Not Cov	No	Not Cov	No		No	No
L6645	UPPER EXTREM ADDITION SHLDR FLEX-ABDUCT JOINT EA		Not Cov	No	Not Cov	No		No	No
L6646	UP EXT ADD SHLDR JNT MX PSTN W BDY EXT PWR SYS		Not Cov	No	Not Cov	No		No	No
L6647	UP EXTREM ADD SHLDR LOCK MECH BDY PWR ACTUATOR		Not Cov	No	Not Cov	No		No	No
L6648	UP EXTREM ADD SHLDR LOCK MECH EXT PWR ACTUATOR		Not Cov	No	Not Cov	No		No	No
L6650	UPPER EXTREM ADDITION SHLDR UNIVERSAL JOINT EA		Not Cov	No	Not Cov	No		No	No
L6655	UPPER EXTREM ADD STANDARD CONTROL CABLE EXTRA		Not Cov	No	Not Cov	No		No	No
L6660	UPPER EXTREM ADDITION HEAVY DUTY CONTROL CABLE		Not Cov	No	Not Cov	No		No	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
L6665	UPPER EXTREM ADDITION TEFLON EQUAL CABLE LINING		Not Cov	No	Not Cov	No		No	No
L6670	UPPER EXTREMITY ADDITION HOOK HAND CABLE ADAPTER		Not Cov	No	Not Cov	No		No	No
L6672	UPPER EXTREM ADD HARNESS CHST SHLUPPER EXTREM AD		Not Cov	No	Not Cov	No		No	No
L6675	UPPER EXTREMITY ADD HARNESS SINGLE CABLE DESIGN		Not Cov	No	Not Cov	No		No	No
L6676	UPPER EXTREMITY ADD HARNESS DUAL CABLE DESIGN		Not Cov	No	Not Cov	No		No	No
L6677	UP EXT ADD HARNESS 3 CNTRL SIMULTAN OP DEVC AND ELB		Not Cov	No	Not Cov	No		No	No
L6680	UP EXTREM ADD TST SOCKT WRST DISARTIC BELW ELB		Not Cov	No	Not Cov	No		No	No
L6682	UPPER EXTREM ADD TST SOCKT ELB DISARTIC ABVE ELB		Not Cov	No	Not Cov	No		No	No
L6684	UP EXTRM ADD TST SCKT SHLDR DISRTC INTRSCAP THOR		Not Cov	No	Not Cov	No		No	No
L6686	UPPER EXTREMITY ADDITION SUCTION SOCKET		Not Cov	No	Not Cov	No		No	No
L6687	UP EXTRM ADD FRME TYPE SCKT BELW ELB WRST DISRTC		Not Cov	No	Not Cov	No		No	No
L6688	UP EXTRM ADD FRME TYPE SOCKT ABVE ELB ELB DISRTC		Not Cov	No	Not Cov	No		No	No
L6689	UPPER EXTREM ADD FRAME TYPE SOCKT SHLDR DISARTIC		Not Cov	No	Not Cov	No		No	No
L6690	UPPER EXTREM ADD FRAME TYPE SOCKT INTERSCAP-THOR		Not Cov	No	Not Cov	No		No	No
L6691	UPPER EXTREMITY ADDITION REMOVABLE INSERT EACH		Not Cov	No	Not Cov	No		No	No
L6692	UPPER EXTREM ADDITION SILCON GEL INSERT EQUAL EA		Not Cov	No	Not Cov	No		No	No
L6693	UPPER EXTREM ADD LOCK ELB FORARM COUNTERBALANCE		Not Cov	No	Not Cov	No		No	No
L6694	ADD UP EXT PROS BELW ABVE ELB CSTM W LOCK MECH		Not Cov	No	Not Cov	No		No	No
L6695	ADD UP EXT PROS BELW ABVE ELB CSTM W O LOCK MECH		Not Cov	No	Not Cov	No		No	No
L6696	ADD UP EXT PROS ELB CSTM CNGN TRAUMAT AMP INIT		Not Cov	No	Not Cov	No		No	No
L6697	ADD UP EXT PROS ELB CSTM NOT CNGN TRAUM AMP INIT		Not Cov	No	Not Cov	No		No	No
L6698	ADD UP EXT PROS ELB LOCK MECH EXCL SCKT INSRT		Not Cov	No	Not Cov	No		No	No
L6703	TERMINAL DEVICE PASSIVE HND MITT ANY MATERIAL SZ		Not Cov	No	Not Cov	No		No	No
L6704	TERMINAL DEVICE SPORT RECREATIONAL WORK ATTACH		Not Cov	No	Not Cov	No		No	No
L6706	TERMINAL DEVICE HOOK MECH VOLUNTARY OPENING		Not Cov	No	Not Cov	No		No	No
L6707	TERMINAL DEVICE HOOK MECH VOLUNTARY CLOSING		Not Cov	No	Not Cov	No		No	No
L6708	TERMINAL DEVICE HAND MECH VOLUNTARY OPENING		Not Cov	No	Not Cov	No		No	No
L6709	TERMINAL DEVICE HAND MECH VOLUNTARY CLOSING		Not Cov	No	Not Cov	No		No	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
L6711	TERM DVC HOOK MECH VOL OPN ANY MATL ANY SZ PED		Not Cov	No	Not Cov	No		No	No
L6712	TERM DVC HOOK MECH VOL CLOS ANY MATL ANY SZ PED		Not Cov	No	Not Cov	No		No	No
L6713	TERM DVC HAND MECH VOL OPN ANY MATL ANY SIZE PED		Not Cov	No	Not Cov	No		No	No
L6714	TERM DEVC HAND MECH VOL CLOS ANY MATL ANY SZ PED		Not Cov	No	Not Cov	No		No	No
L6715	TERM DEV MX ARTIC DIGIT W MOTORS INIT ISSUE REPL		Not Cov	Not Cov	Not Cov	Not Cov		No	No
L6721	TERM DEVC HOOK HND HVY-DUTY MECH VOL OPN ANY SZ		Not Cov	No	Not Cov	No		No	No
L6722	TERM DEVC HOOK HAND HVY-DUTY MECH VOL CLOS		Not Cov	No	Not Cov	No		No	No
L6805	ADDITION TERMINAL DEVICE MODIFIER WRIST UNIT		Not Cov	Not Cov	Not Cov	Not Cov		No	No
L6810	ADDITION TERMINAL DEVICE PRECISION PINCH DEVICE		Not Cov	No	Not Cov	No		No	No
L6880	ELEC HAND SWTCH MYOELEC CNTRL INDEP ARTC DIG MTR		Not Cov	Not Cov	Not Cov	Not Cov		No	No
L6881	AUTOMATIC GRASP ADD UPPER LIMB ELEC PROSTH DEVC		Not Cov	No	Not Cov	No		No	No
L6882	MICRPROCSS CNTRL FEATUR ADD UP LIMB PROSTH DEVC		Not Cov	No	Not Cov	No		No	No
L6883	REPL SOCKET BE WD MOLDED TO PATIENT MODEL		Not Cov	No	Not Cov	No		No	No
L6884	REPL SOCKET ABOVE ELBOW ELBOW DISART MOLD TO PT		Not Cov	No	Not Cov	No		No	No
L6885	REPL SOCKET SD INTERSCAPULAR THOR MOLD PT MODEL		Not Cov	No	Not Cov	No		No	No
L6890	ADD UP EXT PROSTH GLOV TERM DEVC PRFAB W FIT AND ADJ		Not Cov	No	Not Cov	No		No	No
L6895	ADD UP EXT PROSTH GLOV TERM DEVC MATL CSTM FAB		Not Cov	No	Not Cov	No		No	No
L6900	HAND REST PART HAND W GLOVE THUMB 1 FNGR REMAIN		Not Cov	No	Not Cov	No		No	No
L6905	HAND REST PART HAND W GLOVE MX FNGR REMAIN		Not Cov	No	Not Cov	No		No	No
L6910	HAND REST PART HAND W GLOVE NO FNGR REMAIN		Not Cov	No	Not Cov	No		No	No
L6915	HAND RESTORATION REPLACEMENT GLOVE FOR ABOVE		Not Cov	No	Not Cov	No		No	No
L6920	WRST DISARTIC OTTO BOCK EQ SWTCH CNTRL TERM DEVC		Not Cov	No	Not Cov	No		No	No
L6925	WRST DISARTIC OTTO BOCK EQ MYOELEC CNTRL TERM DEVC		Not Cov	No	Not Cov	No		No	No
L6930	BELW ELB OTTO BOCK EQ SWITCH CNTRL TERM DEVC		Not Cov	No	Not Cov	No		No	No
L6935	BELW ELB OTTO BOCK EQ MYOELEC CNTRL TERM DEVC		Not Cov	No	Not Cov	No		No	No
L6940	ELB DISARTIC OTTO BOCK EQ SWITCH CNTRL TERM DEVC		Not Cov	No	Not Cov	No		No	No
L6945	ELB DISARTIC OTTO BOCK EQ MYOELEC CNTRL TERM DEVC		Not Cov	No	Not Cov	No		No	No

This prior authorization guide applies to Medicaid, Medicare, and Marketplace.

DOS Effective 10/1/19; Posted 10/30/19

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
L6950	ABVE ELB OTTO BOCK EQ SWITCH CNTRL TERM DEVC		Not Cov	No	Not Cov	No	No	No	
L6955	ABVE ELB OTTO BOCK EQ MYOELEC CNTRL TERM DEVC		Not Cov	No	Not Cov	No	No	No	
L6960	SHLDR DISARTIC OTTO BOCK EQ SWTCH CNTRL TERM DEVC		Not Cov	No	Not Cov	No	No	No	
L6965	SHLDR DISARTIC OTTO BOCK EQ MYOELEC CNTRL TERM		Not Cov	No	Not Cov	No	No	No	
L6970	INTERSCAP-THOR OTTO BOCK EQ SWTCH CNTRL TERM DEVC		Not Cov	No	Not Cov	No	No	No	
L6975	INTERSCAP-THOR OTTO BOCK EQ MYOELEC CNTRL TERM DVC		Not Cov	No	Not Cov	No	No	No	
L7007	ELECTRIC HAND SWITCH MYOELECTRIC CONTROL ADULT		Not Cov	No	Not Cov	No	No	No	
L7008	ELECTRIC HAND SWITCH MYOELECTRIC CNTRL PEDIATRIC		Not Cov	No	Not Cov	No	No	No	
L7009	ELECTRIC HOOK SWITCH MYOELECTRIC CONTROL ADULT		Not Cov	No	Not Cov	No	No	No	
L7040	PREHENSILE ACTUATOR SWITCH CONTROLLED		Not Cov	No	Not Cov	No	No	No	
L7045	ELEC HOOK SWITCH MYOELECTRIC CONTOL PEDIATRIC		Not Cov	No	Not Cov	No	No	No	
L7170	ELECTRONIC ELBOW HOSMER EQUAL SWITCH CONTROLLED		Not Cov	No	Not Cov	No	No	No	
L7180	ELEC ELB MICROPRC SEQUENTIAL CNTRL ELB AND TERM DEVC		Not Cov	No	Not Cov	No	No	No	
L7181	ELEC ELB MICROPRC SIMULTAN CNTRL ELB AND TERM DEVC		Not Cov	No	Not Cov	No	No	No	
L7185	ELEC ELB ADOLES VRITY VILLAGE EQUAL SWITCH CNTRL		Not Cov	No	Not Cov	No	No	No	
L7186	ELEC ELB CHILD VRITY VILLAGE EQUAL SWITCH CNTRL		Not Cov	No	Not Cov	No	No	No	
L7190	ELEC ELB ADOLES VRITY VILLAGE EQ MYOELEC CNTRL		Not Cov	No	Not Cov	No	No	No	
L7191	ELEC ELB CHLD VRITY VILL EQ MYOELECTRNICALY CNTRL		Not Cov	No	Not Cov	No	No	No	
L7259	ELECTRONIC WRIST ROTATOR ANY TYPE		Not Cov	Not Cov	Not Cov	Not Cov	Yes	Yes	
L7360	SIX VOLT BATTERY EACH		Not Cov	No	Not Cov	No	No	No	
L7362	BATTERY CHARGER 6 VOLT EACH		Not Cov	No	Not Cov	No	No	No	
L7364	TWELVE VOLT BATTERY EACH		Not Cov	No	Not Cov	No	No	No	
L7366	BATTERY CHARGER TWELVE VOLT EACH		Not Cov	No	Not Cov	No	No	No	
L7367	LITHIUM ION BATTERY RECHARGEABLE REPLACEMENT		Not Cov	No	Not Cov	No	No	No	
L7368	LITHIUM ION BATTERY CHARGER REPLACEMENT ONLY		Not Cov	No	Not Cov	No	No	No	
L7400	ADD UP EXTREM PROS BELOW ELB WD ULTRALIGHT MATL		Not Cov	No	Not Cov	No	No	No	
L7401	ADD UP EXTREM PROS AE DISART ULTRALIGHT MATL		Not Cov	No	Not Cov	No	No	No	
L7402	ADD UP EXT PROS SD INTRSCAPULR THOR ULTRALT MATL		Not Cov	No	Not Cov	No	No	No	
L7403	ADD UP EXTREM PROS BE WRIST DISART ACRYLIC MATL		Not Cov	No	Not Cov	No	No	No	
L7404	ADD UP EXTREM PROS ABOVE ELB DISART ACRYLIC MATL		Not Cov	No	Not Cov	No	No	No	

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
L7405	ADD UP EXTREM PROS SD INTERSCAP THOR ACRYLC MATL		Not Cov	No	Not Cov	No		No	No
L7499	UPPER EXTREMITY PROSTHESIS NOS		Not Cov	Yes	Not Cov	Yes		Yes	Yes
L7510	REPR PROSTHETIC DEVICE REPR REPLACE MINOR PARTS		Not Cov	No	Not Cov	No		No	No
L7520	REPAIR PROSTHETIC DEVICE LABOR CMPNT PER 15 MIN		Not Cov	No	Not Cov	No		No	No
L7600	PROSTHETIC DORNING SLEEVE ANY MATERIAL EACH		Not Cov	No	Not Cov	No		Not Cov	No
L7700	GASKET SEAL USE PROS SOCKET INSERT ANY TYPE EA		Not Cov	No	Not Cov	No		Yes	No
L7900	MALE VACUUM ERECTION SYSTEM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
L7902	TENSION RING VAC ERECTION DEVC REPLACE ONLY EACH		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
L8000	BREAST PROS MASTECTOMY BRA W O INTEG PROS FORM		Not Cov	No	Not Cov	No		No	No
L8001	BREAST PROS MASTECT BRA W INTEG BREAST FORM UNI		Not Cov	No	Not Cov	No		No	No
L8002	BREAST PROS MASTECT BRA W INTEG BREAST FORM BIL		Not Cov	No	Not Cov	No		No	No
L8010	BREAST PROSTHESIS MASTECTOMY SLEEVE		Not Cov	No	Not Cov	No		Not Cov	No
L8015	EXT BRST PROS GARMNT W MASTECT FORM POST-MASTECT		Not Cov	No	Not Cov	No		No	No
L8020	BREAST PROSTHESIS MASTECTOMY FORM		Not Cov	No	Not Cov	No		No	No
L8030	BREAST PROSTH SILICONE EQUAL W O INTEGRAL ADHES		Not Cov	No	Not Cov	No		No	No
L8031	BREAST PROSTHESIS SILICONE EQUAL W NTEGRAL ADHES		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
L8032	NIPPLE PROSTHESIS REUSABLE ANY TYPE EACH		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
L8035	CSTM BREAST PROSTH POST MASTECT MOLDED PT MODEL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
L8039	BREAST PROSTHESIS NOT OTHERWISE SPECIFIED		Not Cov	Yes	Not Cov	Yes		Yes	Yes
L8040	NASAL PROSTHESIS PROVIDED BY A NON-PHYSICIAN		Not Cov	Not Cov	Not Cov	Not Cov		No	No
L8041	MIDFACIAL PROSTHESIS PROVIDED BY A NON-PHYSICIAN		Not Cov	Not Cov	Not Cov	Not Cov		No	No
L8042	ORBITAL PROSTHESIS PROVIDED BY A NON-PHYSICIAN		Not Cov	Not Cov	Not Cov	Not Cov		No	No
L8043	UPPER FACIAL PROSTHESIS PROVIDED A NON-PHYSICIAN		Not Cov	Not Cov	Not Cov	Not Cov		No	No
L8044	HEMI-FACIAL PROSTHESIS PROVIDED A NON-PHYSICIAN		Not Cov	Not Cov	Not Cov	Not Cov		No	No
L8045	AURICULAR PROSTHESIS PROVIDED BY A NON-PHYSICIAN		Not Cov	Not Cov	Not Cov	Not Cov		No	No
L8046	PARTIAL FACIAL PROSTHESIS PROVIDED NON-PHYSICIAN		Not Cov	Not Cov	Not Cov	Not Cov		No	No
L8047	NASAL SEPTAL PROSTHESIS PROVIDED A NON-PHYSICIAN		Not Cov	Not Cov	Not Cov	Not Cov		No	No
L8048	UNS MAXILLOFCE PROSTH BR PROVIDED NON-PHYSICIAN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No

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			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
L8049	REP MOD MAXLOFCE PROSTH LABR EA 15 MIN NON-MD		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
L8300	TRUSS SINGLE WITH STANDARD PAD		Not Cov	No	Not Cov	No		No	No
L8310	TRUSS DOUBLE WITH STANDARD PADS		Not Cov	No	Not Cov	No		No	No
L8320	TRUSS ADDITION TO STANDARD PAD WATER PAD		Not Cov	No	Not Cov	No		No	No
L8330	TRUSS ADDITION TO STANDARD PAD SCROTAL PAD		Not Cov	No	Not Cov	No		No	No
L8400	PROSTHETIC SHEATH BELOW KNEE EACH		Not Cov	No	Not Cov	No		No	No
L8410	PROSTHETIC SHEATH ABOVE KNEE EACH		Not Cov	No	Not Cov	No		No	No
L8415	PROSTHETIC SHEATH UPPER LIMB EACH		Not Cov	No	Not Cov	No		No	No
L8417	PROSTH SHEATH SOCK W GEL CUSHN LAY BK AK EA		Not Cov	No	Not Cov	No		No	No
L8420	PROSTHETIC SOCK MULTIPLE PLY BELOW KNEE EACH		Not Cov	No	Not Cov	No		No	No
L8430	PROSTHETIC SOCK MULTIPLE PLY ABOVE KNEE EACH		Not Cov	No	Not Cov	No		No	No
L8435	PROSTHETIC SOCK MULTIPLE PLY UPPER LIMB EACH		Not Cov	No	Not Cov	No		No	No
L8440	PROSTHETIC SHRINKER BELOW KNEE EACH		Not Cov	No	Not Cov	No		No	No
L8460	PROSTHETIC SHRINKER ABOVE KNEE EACH		Not Cov	No	Not Cov	No		No	No
L8465	PROSTHETIC SHRINKER UPPER LIMB EACH		Not Cov	No	Not Cov	No		No	No
L8470	PROSTHETIC SOCK SINGLE PLY FITTING BELOW KNEE EA		Not Cov	No	Not Cov	No		No	No
L8480	PROSTHETIC SOCK SINGLE PLY FITTING ABOVE KNEE EA		Not Cov	No	Not Cov	No		No	No
L8485	PROSTHETIC SOCK SINGLE PLY FITTING UPPER LIMB EA		Not Cov	No	Not Cov	No		No	No
L8499	UNLISTED PROC MISCELLANEOUS PROSTHETIC SERVICES		Not Cov	Yes	Not Cov	Yes		Yes	Yes
L8500	ARTIFICIAL LARYNX ANY TYPE		Not Cov	No	Not Cov	No		No	No
L8501	TRACHEOSTOMY SPEAKING VALVE		Not Cov	No	Not Cov	No		No	No
L8505	ARTIFICAL LARYNX REPLCMT BATTERY ACCESS ANY TYPE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
L8507	TRACHEO-ESOPH VOICE PROSTH PT INSRT ANY TYPE EA		Not Cov	Not Cov	Not Cov	Not Cov		No	No
L8509	TRACHEO-ESOPH VOICE PROSTH INSRT LIC HEALTH PROV		Not Cov	No	Not Cov	No		No	No
L8510	VOICE AMPLIFIER		Not Cov	Not Cov	Not Cov	Not Cov		No	No
L8511	INSRT INDWLL TRACHEOESOPH PROS W WO VALV REPLCMT		Not Cov	No	Not Cov	No		No	No
L8512	GELATIN CAPS EQUIVALNT W TRACHEOESOPH VOICE PROS		Not Cov	Not Cov	Not Cov	Not Cov		No	No
L8513	CLEANING DEVC USED W TRACHEOESOPH VOICE PROS PIP		Not Cov	Not Cov	Not Cov	Not Cov		No	No
L8514	TRACHEOESOPH PUNCTURE DILAT REPLACEMENT ONLY EA		Not Cov	Not Cov	Not Cov	Not Cov		No	No
L8515	GELATIN CAP APPLIC DEVC TRACHOESOPH VOICE PROSTH		Not Cov	Not Cov	Not Cov	Not Cov		No	No
L8600	IMPLANTABLE BREAST PROSTHESIS SILICONE OR EQUAL		No	No	Not Cov	No		No	No
L8603	INJ BULK AGT COLL IMPL URIN TRACT 2.5 ML SYRINGE		No	No	No	No		No	No
L8604	INJECTABLE BULKING AGENT URINARY TRACT 1 ML		No	No	No	No		No	No
L8605	INJ BULK AGT DX HA COPOLYMER IMPL ANAL CNL 1 ML		Not Cov	Not Cov	Not Cov	Not Cov		No	Yes
L8606	INJ BULK AGT SYNTH IMPL URIN TRACT 1 ML SYRINGE		No	No	No	No		No	No
L8607	INJ BULKING AGT VOCAL CORD MEDIALIZATION 0.1 ML		Not Cov	Not Cov	Not Cov	Not Cov		No	No
L8608	MISC EXT COMP SPL ACSS FOR ARGUS II RET PROS SYS		Yes	Not Cov	Not Cov	Not Cov		No	Yes

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			Outpatient		ASC	Office Setting			
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L8609	ARTIFICIAL CORNEA		No	Not Cov	Not Cov	Not Cov		No	No
L8610	OCULAR IMPLANT		No	Not Cov	Not Cov	Not Cov		No	No
L8612	AQUEOUS SHUNT		No	Not Cov	Not Cov	Not Cov		No	No
L8613	OSSICULA IMPLANT		No	Not Cov	Not Cov	Not Cov		No	No
L8614	COCHLEAR DEVICE INCLUDES ALL INT AND EXT COMPONENTS		No	Not Cov	Not Cov	Not Cov		Yes	No
L8615	HEADSET HEADPIECE COCHLEAR IMPLANT DEVICE REPL		Not Cov	No	Not Cov	No		No	No
L8616	MICROPHONE COCHLEAR IMPLANT DEVICE REPLACEMENT		Not Cov	No	Not Cov	No		No	No
L8617	TRANSMITTING COIL COCHLEAR IMPLANT DEVICE REPL		Not Cov	No	Not Cov	No		No	No
L8618	TRNSMT CBL USE CI DEVC AUD OSSEOINTG DEVC REPL		Not Cov	No	Not Cov	No		No	No
L8619	COCHLEAR IMPL EXT SPEECH PROCESSR CONTROLLR REPL		Not Cov	No	Not Cov	No		No	No
L8621	ZINC AIR BATT COCHLR IMPL AND AUD SD PROC REPL EA		Not Cov	No	Not Cov	No		No	No
L8622	ALKALIN BATTERY COCHLEAR IMPL DEVC ANY SZ REPL EA		Not Cov	No	Not Cov	No		No	No
L8623	LITHIUM ION BATTERY OTH THAN EAR LEVEL REPL EA		Not Cov	No	Not Cov	No		No	No
L8624	LIB CI AUD OSSEOINTEG DEVC SP EAR LEVEL REPL EA		Not Cov	No	Not Cov	No		No	No
L8625	EXT RECHARGING SYS BATT CI AO DEVC REPL ONLY EA		Not Cov	No	Not Cov	No		Yes	No
L8627	COCHLEAR IMPL EXT SPEECH PROCESSR COMPONENT REPL		Not Cov	No	Not Cov	No		No	No
L8628	COCHLEAR IMPLANT EXT CONTROLLER COMPONENT REPL		Not Cov	No	Not Cov	No		No	No
L8629	TRANSMITTING COIL CABLE COCHLEAR IMPL DEV REPL		Not Cov	No	Not Cov	No		No	No
L8630	METACARPOPHALANGEAL JOINT IMPLANT		No	Not Cov	Not Cov	Not Cov		No	No
L8631	MPJ REPLCMT TWO MORE PECES METL CERAM-LIKE MATL		Not Cov	Not Cov	Not Cov	Not Cov		No	No
L8641	METATARSAL JOINT IMPLANT		No	Not Cov	Not Cov	Not Cov		No	No
L8642	HALLUX IMPLANT		No	Not Cov	Not Cov	Not Cov		No	No
L8658	INTERPHALANGEAL JOINT SPACER SILICONE EQUAL EACH		No	Not Cov	Not Cov	Not Cov		No	No
L8659	IP FNGR JNT REPLCMT 2 MORE PECES METL CERAM-LIKE		Not Cov	Not Cov	Not Cov	Not Cov		No	No
L8670	VASCULAR GRAFT MATERIAL SYNTHETIC IMPLANT		No	Not Cov	Not Cov	Not Cov		No	No
L8679	IMPLANTABLE NEUROSTIMULATOR PULSE GENERATOR ANY		Not Cov	Not Cov	Not Cov	Not Cov		No	No
L8680	IMPLANTABLE NEUROSTIMULATOR ELECTRODE EACH		No	Not Cov	Not Cov	Not Cov		Not Cov	No
L8681	PT PROG W IMPL PROG NEUROSTM PULSE GEN REPL ONLY		No	Not Cov	Not Cov	Not Cov		No	No
L8682	IMPLANTABLE NEUROSTIMULATOR RADIOFREQ RECEIVER		No	Not Cov	Not Cov	Not Cov		No	No
L8683	RF TRNSMT USE W IMPLANTABLE NEUROSTIM RF RECV		No	Not Cov	Not Cov	Not Cov		No	No
L8684	RF TRNSMT IMPL SCRL NEURO BOWEL BLADDR MGMT REPL		No	Not Cov	Not Cov	Not Cov		No	No
L8685	IMPLANT NEUROSTIM 1 ARRAY RECHARGEABLE		No	Not Cov	Not Cov	Not Cov		No	No
L8686	IMPLANT NEUROSTIM 1 ARRAY NON-RECHARGEABLE		No	Not Cov	Not Cov	Not Cov		No	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
L8687	IMPLANT NEUROSTIM 2 ARRAY RECHARGEABLE		No	Not Cov	Not Cov	Not Cov		No	No
L8688	IMPLANT NEUROSTIM 2 ARRAY NON-RECHARGEABLE		No	Not Cov	Not Cov	Not Cov		No	No
L8689	EXT RECHARG SYS BATTERY IMPL NEUROSTIM REPL ONLY		No	Not Cov	Not Cov	Not Cov		No	No
L8690	AUDITORY OSSEOINTEGRATED DEVC INT EXT COMPONENTS		No	Not Cov	Not Cov	Not Cov		No	No
L8691	AUD OI DEVC EXT SP EXCL TRNSDUCR ACTUATR REPL EA		Not Cov	No	Not Cov	No		No	No
L8692	AUDITORY OSSEOINTEGRATED DEV EXT SOUND BODY WORN		Not Cov	Yes	Not Cov	Yes		Not Cov	Yes
L8693	AUD OSSEOINTEGRATED DEVC ABUT LENGTH REPL ONLY		Not Cov	No	Not Cov	No		No	No
L8694	AUD OSSEOINTEG DEVC TRANSDUCER ACTR REPL ONLY EA		Not Cov	No	Not Cov	No		Yes	No
L8695	EXT RECHARGING SYS BATTERY W IMPL NEUROSTIM REPL		No	Not Cov	Not Cov	Not Cov		No	No
L8696	ANTENNA FOR USE W IMPL DIA PN ST DEV REPL EA		Not Cov	No	Not Cov	No		No	No
L8698	MISC COMP SPL ACCESS FOR USE WITH TOT AH SYSTEM		Yes	Not Cov	Not Cov	Not Cov		Yes	Yes
L8699	PROSTHETIC IMPLANT NOT OTHERWISE SPECIFIED	Yes, Invoice Required	Yes	Not Cov	Yes	Yes		Yes	Yes
L8701	PWR UE ROM AST DVC ELB WR HAND 1 DBL UP CUS FAB		Yes	Not Cov	Not Cov	Not Cov		Yes	Yes
L8702	PWR UE ROM AST DVC ELBO WR H FINGER 1 DBL UP CUS		Yes	Not Cov	Not Cov	Not Cov		Yes	Yes
L9900	ORTHO AND PROS SPL ACSS AND SRVC CMPNT OTH HCPCS L CODE		Not Cov	No	Not Cov	No		No	No
M0075	CELLULAR THERAPY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
M0076	PROLOTHERAPY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
M0100	INTRAGASTRIC HYPOTHERMIA USING GASTRIC FREEZING		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
M0300	IV CHELATION THERAPY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
M0301	FABRIC WRAPPING OF ABDOMINAL ANEURYSM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
M1000	PAIN SCREENED AS MODERATE TO SEVERE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
M1001	POC AD MOD TO SEV PAIN DOC ON BE4 D 2ND VST CLIN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
M1002	POC MS PN NOT DOC ON B4 DATE 2ND VST CLIN NO RSN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
M1003	TB SCR AND RSLT INTRP WI 12 MO PRI TO INIT BIO DZ		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
M1004	DOC MEDICAL RSN NOT SCR FOR TB INTPRET RESULTS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
M1005	TB SCREEN NOT PERF RSLT NOT INTEPR RSN NOT GVN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
M1006	DISEASE ACTIVITY NOT ASSESSED REASON NOT GIVEN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
M1007	GRT THN EQ50PCT OF TOT NUMBER OF A PT O P RA ENC ASSESSED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
M1008	UNDER 50PCT OF TOT NUMBER OF A PT O P RA ENC ASSESSED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No

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			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
M1009	PATIENT TREATMENT AND FINAL EVALUATION COMPLETE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
M1010	PATIENT TREATMENT AND FINAL EVALUATION COMPLETE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
M1011	PATIENT TREATMENT AND FINAL EVALUATION COMPLETE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
M1012	PATIENT TREATMENT AND FINAL EVALUATION COMPLETE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
M1013	PATIENT TREATMENT AND FINAL EVALUATION COMPLETE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
M1014	PATIENT TREATMENT AND FINAL EVALUATION COMPLETE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
M1015	PATIENT TREATMENT AND FINAL EVALUATION COMPLETE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
M1016	FEMALE PATIENTS UNABLE TO BEAR CHILDREN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
M1017	PATIENT ADMITTED TO PALLIATIVE CARE SERVICES		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
M1018	PATIENTS ACTV DX HX CA PT HVY TOB SMKR LC SCR PT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
M1019	PT 12-17 YR MD DYSTH REM 12 MO SCORE LESS THAN 5		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
M1020	PT 12-17 Y MD DYSTH NO REM 12 M PHQ-9 9M NA GRT THN EQ5		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
M1021	PATIENT HAD ONLY UC VISITS DUR THE PERF PRD		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
M1022	PATIENTS IN HOSPICE AT ANY TIME DUR PERF PRD		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
M1023	PT 12-17 YR MD DYSTH REM 6 M PHQ-9 PHQ-9M UNDER 5		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
M1024	PT 12-17 Y MD DYSTH NO REM 6 MO PHQ-9 9M NA GRT THN EQ5		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
M1025	PATIENTS IN HOSPICE AT ANY TIME DUR PERF PRD		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
M1026	PATIENTS IN HOSPICE AT ANY TIME DUR PERF PRD		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
M1027	IMAGING OF THE HEAD WAS OBTAINED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
M1028	DOC PT PRIM HA DX AND IMAG OTH THAN CT MRI OBTAIND		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
M1029	IMAGING OF HEAD WAS NOT OBTAINED RSN NOT GIVEN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
M1030	PATIENTS W CLIN INDICATIONS FOR IMAGING OF HEAD		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
M1031	PATIENTS NO CLINICAL INDIC FOR IMAGING OF HEAD		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
M1032	ADULTS CURRENTLY TAKING PHARMACOTHERAPY FOR OUD		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
M1033	PHARMACOTHER FOR OUD INIT AFT JUNE 30TH PERF PER		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
M1034	ADULTS AL 180 D CONT PT MED PSCR OUD NO GAP OVER 7 D		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
M1035	ADULTS DELIB PH OUT MAT PRI TO 180 DA CONT TX		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
M1036	ADULTS NOT AL 180 D CONT PT PSCR OUD NO GAP OVER 7 D		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No

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Code	Code Description	Comments	Apple Health & IMC Medical				IMC / BHSO (Mental Health covered svcs)	Medicare	Market Place
			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
M1037	PATIENTS WITH DX LSP REG CANCER AT THE TIME PROC		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
M1038	PATIENTS WITH DX OF LSP REG FX AT TIME PROCEDURE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
M1039	PATIENTS WITH DX OF LSP REG INF AT TIME OF PROC		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
M1040	PATIENTS WITH DX OF LUMBAR IDIO CONG SCOLIOSIS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
M1041	PT CA FX INF REL TO LSP PT IDIO CONG SCOLIOSIS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
M1042	FNC ST MSR SC OBTD ODI WI 3 MO PREOP AND AT 1 Y PO		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
M1043	FNC ST MSR SC NOT OBT ODI WI 3M PREOP AND AT 1 Y P O		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
M1044	FUNC STS MSR ODI WI 3 MOS PREOP AND AT 1 YR P O		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
M1045	FNC ST MSR SC OBT OKS WI 3 MO PREOP AND AT 1 Y P O		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
M1046	FNC STS MSR SC NO OKS WI 3 MO PREOP AND AT 1 YR PO		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
M1047	FUNC STS MSR OKS WI 3 MO PREOP AND AT 1 YEAR P O		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
M1048	FUNC ST MSR SC OBTD ODI WI 3M PREOP AND AT 3M PO		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
M1049	FNC ST MSR SC NOT OBT ODI WI 3M PREOP AND AT 3M PO		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
M1050	FNC ST MSR ODI REP WI 3 MO PREOP AND AT 3 MO P O		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
M1051	PT CA FX INF REL LS PT HAD IDIO CONG SCOLIOSIS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
M1052	LEG PAIN NOT MSR VAS WI 3 MO PREOP AND AT 1 YR P O		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
M1053	LEG PAIN MSR BY VAS WI 3 MO PREOP AND AT 1 YR P O		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
M1054	PATIENT HAD ONLY URGENT CARE VISITS DUR PERF PER		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
M1055	ASPIRIN OR ANOTHER ANTIPLATELET THERAPY USED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
M1056	PSCR AC MED DUR PERF PER HX GI BL HX INTRACR BL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
M1057	ASPIRIN ANOTH AP TX NOT USED REASON NOT GIVEN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
M1058	PATIENT PERM NH RESIDENT ANY TIME DUR PERF PER		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
M1059	PATIENT HSPC REC PALLIAT C ANY TIME DUR PERF PER		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
M1060	PATIENT DIED PRIOR TO THE END OF THE PERF PERIOD		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
M1061	PATIENT PREGNANCY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
M1062	PATIENT IMMUNOCOMPROMISED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
M1063	PATIENTS RECEIVING HIGH DOSES OF IS THERAPY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
M1064	SHINGRIX VACCINE DOCUMENTED AS ADM PREV RECEIVED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
M1065	SHINGRIX VACCINE WAS NOT ADM FOR RSN DOC CLIN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
M1066	SHINGRIX VACCINE WAS NOT ADM FOR RSN DOC CLIN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No

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			Outpatient		ASC	Office Setting			
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M1067	HOSPICE SVC FOR PT PROV ANY TIME DUR MSR PERIOD		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
M1068	ADULTS WHO ARE NOT AMBULATORY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
M1069	PATIENT SCREENED FOR FUTURE FALL RISK		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
M1070	PATIENT NOT SCREENED FUT FALL RISK RSN NOT GVN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
M1071	PATIENT HAD ADD SP PROC PERF SD L DSKC LAMINOT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
P2028	CEPHALIN FLOCCULATION BLOOD		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
P2029	CONGO RED BLOOD		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
P2031	HAIR ANALYSIS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
P2033	THYMOL TURBIDITY BLOOD		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
P2038	MUCOPROTEIN BLOOD		Not Cov	Not Cov	Not Cov	Not Cov		No	No
P3000	SCR PAP SMEAR UP TO 3 SMEARS TECH UND PHYS SUPV		No	No	Not Cov	No		No	No
P3001	SCR PAP SMER CERV VAG TO 3 SMERS RQR INTEPR PHYS		Not Cov	No	Not Cov	No		No	No
P7001	CULT BACTERL URINE; QUAN SENSITIVITY STUDY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
P9010	BLOOD FOR TRANSFUSION PER UNIT		No	No	Not Cov	No		No	No
P9011	BLOOD SPLIT UNIT		No	No	Not Cov	No		No	No
P9012	CRYOPRECIPITATE EACH UNIT		No	No	Not Cov	No		No	No
P9016	RED BLOOD CELLS LEUKOCYTES REDUCED EACH UNIT		No	No	Not Cov	No		No	No
P9017	FRESH FRZN PLASMA FRZN WITHIN 8 HRS CLCT EA UNIT		No	No	Not Cov	No		No	No
P9019	PLATELETS EACH UNIT		No	No	Not Cov	No		No	No
P9020	PLATELET RICH PLASMA EACH UNIT		No	No	Not Cov	No		No	No
P9021	RED BLOOD CELLS EACH UNIT		No	No	Not Cov	No		No	No
P9022	RED BLOOD CELLS WASHED EACH UNIT		No	No	Not Cov	No		No	No
P9023	PLSMA MX DONR SOLVNT DETRGNT TREATD FRZN EA U		No	No	Not Cov	No		No	No
P9031	PLATELETS LEUKOCYTES REDUCED EACH UNIT		No	No	Not Cov	No		No	No
P9032	PLATELETS IRRADIATED EACH UNIT		No	No	Not Cov	No		No	No
P9033	PLATELETS LEUKOCYTES REDUCED IRRADIATED EA UNIT		No	No	Not Cov	No		No	No
P9034	PLATELETS PHERESIS EACH UNIT		No	No	Not Cov	No		No	No
P9035	PLATELETS PHERESIS LEUKOCYTES REDUCED EACH UNIT		No	No	Not Cov	No		No	No
P9036	PLATELETS PHERESIS IRRADIATED EACH UNIT		No	No	Not Cov	No		No	No
P9037	PLATLTS PHERES LEUKOCYTES RDUC IRRADATD EA UNIT		No	No	Not Cov	No		No	No
P9038	RED BLOOD CELLS IRRADIATED EACH UNIT		No	No	Not Cov	No		No	No
P9039	RED BLOOD CELLS DEGLYCEROLIZED EACH UNIT		No	No	Not Cov	No		No	No
P9040	RBCS LEUKOCYTES REDUCED IRRADIATED EACH UNIT		No	No	Not Cov	No		No	No
P9041	INFUSION ALBUMIN HUMAN 5PCT 50 ML		No	No	Not Cov	No		No	No
P9043	INFUSION PLASMA PROTEIN FRACTION HUMAN 5PCT 50 ML		No	No	Not Cov	No		No	No
P9044	PLASMA CRYOPRECIPITATE REDUCED EACH UNIT		No	No	Not Cov	No		No	No
P9045	INFUSION ALBUMIN HUMAN 5PCT 250 ML		No	No	Not Cov	No		No	No
P9046	INFUSION ALBUMIN HUMAN 25PCT 20 ML		No	No	Not Cov	No		No	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
P9047	INFUSION ALBUMIN HUMAN 25PCT 50 ML		No	No	Not Cov	No		No	No
P9048	INFUSION PLASMA PROTEIN FRACTION HUMAN 5PCT 250 ML		No	No	Not Cov	No		No	No
P9050	GRANULOCYTES PHERESIS EACH UNIT		No	No	Not Cov	No		No	No
P9051	WHOLE BLD RBCS LEUKOCYTES RDUC CMV-NEG EA UNIT		No	Not Cov	Not Cov	Not Cov		Not Cov	No
P9052	PLT HLA-MATCHD LEUKOCYTES RDUC APHERES PHERE EA		No	Not Cov	Not Cov	Not Cov		Not Cov	No
P9053	PLT PHERES LEUKOCYTES RDUC CMV-NEG IRRADATD EA		No	Not Cov	Not Cov	Not Cov		Not Cov	No
P9054	WB RBCS LEUKOCYTES RDUC FRZN DEGLYCEROL WASHD EA		No	No	Not Cov	No		No	No
P9055	PLT LEUKOCYTES RDUC CMV-NEG APHERES PHERES EA		No	No	Not Cov	No		No	No
P9056	WHOLE BLD LEUKOCYTES REDUCED IRRADIATED EA UNIT		No	No	Not Cov	No		No	No
P9057	RBCS FRZN DEGLYCEROLIZED WASHED LEUKOCYTES RDUC		No	No	Not Cov	No		No	No
P9058	RBCS LEUKOCYTES REDUCED CMV-NEG IRRADATD EA UNIT		No	No	Not Cov	No		No	No
P9059	FRESH FRZN PLASMA BETWN 8-24 HR CLCT EA UNIT		No	No	Not Cov	No		No	No
P9060	FRESH FROZEN PLASMA DONOR RETESTED EACH UNIT		No	No	Not Cov	No		No	No
P9070	PLASMA POOLED MX DONOR PATHOGEN RDUC FROZEN EA U		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
P9071	PLASMA PATHOGEN REDUCED FROZEN EACH UNIT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
P9073	PLATELETS PHERESIS PATHOGEN-REDUCED EACH UNIT		No	No	Not Cov	No		No	No
P9100	PATHOGEN TEST FOR PLATELETS		No	No	Not Cov	No		No	No
P9603	TRAVEL 1 WAY MED NEC LAB SPEC; PRORAT ACTL MILE		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
P9604	TRAVEL 1 WAY MED NEC LAB SPEC; PRORATD TRIP CHRG		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
P9612	CATH CLCT SPECIMEN SINGLE PT ALL PLACES SERVICE		No	No	Not Cov	No		No	No
P9615	CATHETERIZATION FOR COLLECTION OF SPECIMEN		Not Cov	Not Cov	Not Cov	Not Cov		No	No
Q0035	CARDIOKYOGRAPHY		Not Cov	Not Cov	Not Cov	Not Cov		No	No
Q0081	INFUS TX USING OTH THAN CHEMOTHERAPEUTC RX VISIT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
Q0083	CHEMO ADMIN OTH THAN INFUS TECH ONLY PER VISIT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
Q0084	CHEMOTHERAPY ADMIN INFUS TECHNIQUE ONLY VISIT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
Q0085	CHEMOTHAPY ADMN BOTH INFUS TECH AND OTH TECHIQUE-VST		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
Q0091	SCREEN PAP SMEAR; OBTAIN PREP AND C ONVEY TO LAB		Not Cov	Not Cov	Not Cov	Not Cov		No	No
Q0092	SET-UP PORTABLE X-RAY EQUIPMENT		No	No	Not Cov	No		No	No
Q0111	WET MOUNTS INCL PREP VAGINAL CERV SKIN SPECIMENS		No	No	Not Cov	No		No	No
Q0112	ALL POTASSIUM HYDROXIDE PREPARATIONS		No	No	Not Cov	No		No	No
Q0113	PINWORM EXAMINATION		No	No	Not Cov	No		No	No

Guide is subject to change at any time. If a member belongs to a group delegated for UM, contact that group for authorization. Claim payment is subject to eligibility and benefits at the time of service. Claim processing edits will apply.

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
Q0114	FERN TEST		No	No	Not Cov	No		No	No
Q0115	POST-COITAL DIRECT QUAL EXAM VAGINAL CERV MUCOS		No	No	Not Cov	No		No	No
Q0138	INJ FERUMOXYTOL TX IRON DEF ANEMIA 1 MG NON-ESRD		Yes	Yes	Not Cov	Yes		Yes	Yes
Q0139	INJ FERUMOXYTOL TX IRON DEF ANEMIA 1 MG FOR ESRD		Yes	Yes	Not Cov	Yes		Yes	Yes
Q0144	AZITHROMYCIN DIHYDRATE ORAL CAP POWDER 1 GRAM		No	No	Not Cov	No		Not Cov	No
Q0161	CHLORPROMAZINE HYDROCHLORIDE 5 MG ORAL		No	No	Not Cov	No		Not Cov	No
Q0162	ONDANSETRON 1 MG ORL NOT EXCEED 48 HR DOSE REG		No	No	Not Cov	No		No	No
Q0163	DIPHENHYDRAMINE HCL 50 MG ORAL NOT OVER 48 HR DOSE		No	No	Not Cov	No		No	No
Q0164	PROCHLORPERAZINE MALEATE 5 MG ORL NOT OVER 48 HR DOSE		No	No	Not Cov	No		No	No
Q0166	GRANISETRON HCL 1 MG ORL NOT OVER 48 HR DOSE REGIMEN		No	No	Not Cov	No		No	No
Q0167	DRONABINOL 2.5 MG ORAL NOT OVER 48 HR DOSE REGIMEN		No	No	Not Cov	No		No	No
Q0169	PROMETHAZINE HCL 12.5 MG ORAL NOT OVER 48 HR DOSE		No	No	Not Cov	No		No	No
Q0173	TRIMETHOBENZAMIDE HCL 250 MG ORL NOT OVER 48 HR DOSE		No	No	Not Cov	No		No	No
Q0174	THIETHYLPERAZINE MALEATE 10 MG ORL NOT OVER 48HR DOSE		No	No	Not Cov	No		No	No
Q0175	PERPHENZAININE 4 MG ORAL NOT OVER 48 HR DOSE REGIMEN		No	No	Not Cov	No		No	No
Q0177	HYDROXYZINE PAMOATE 25 MG ORAL NOT OVER 48 HR DOSE		No	No	Not Cov	No		No	No
Q0180	DOLASETRON MESYLATE 100 MG ORL NOT OVER 48 HR DOSE		No	No	Not Cov	No		No	No
Q0181	UNS ORAL DOSAGE ANTI-EMETIC NOT OVER 48 HR DOSE REG		Not Cov	No	Not Cov	No		No	No
Q0477	PWR MODULE PT CABLE ELEC PNEUMATIC VAD REPL ONLY		Not Cov	Not Cov	Not Cov	Not Cov		No	Yes
Q0478	POWER ADAPTER ELECTRIC PNEUMAT VAD VEHICLE TYPE		No	Not Cov	Not Cov	No		No	No
Q0479	POWER MODULE ELECTRIC PNEUMATIC VAD REPLACE ONLY		No	Not Cov	Not Cov	No		No	No
Q0480	DRIVER FOR USE WITH PNEUMATIC VAD REPL ONLY		No	Not Cov	Not Cov	No		No	No
Q0481	MICROPROCESSOR CNTRL UNIT FOR ELEC VAD REPL ONLY		No	Not Cov	Not Cov	No		No	No
Q0482	MICROPROCESSOR CU FOR ELEC PNEUMAT VAD REPL ONL		No	Not Cov	Not Cov	No		No	No
Q0483	MONITOR DISPLAY MODULE FOR ELEC VAD REPL ONLY		No	Not Cov	Not Cov	No		No	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
Q0484	MONITOR FOR ELEC OR ELEC PNEUMAT VAD REPL ONLY		No	Not Cov	Not Cov	No		No	No
Q0485	MONITOR CONTROL CABLE FOR ELEC VAD REPL ONLY		No	Not Cov	Not Cov	No		No	No
Q0486	MON CNTRL CABLE FOR ELEC PNEUMAT VAD REPL ONLY		No	Not Cov	Not Cov	No		No	No
Q0487	LEADS FOR ANY TYPE ELEC PNEUMAT VAD REPL ONLY		No	Not Cov	Not Cov	No		No	No
Q0488	POWER PACK BASE FOR USE W ELEC VAD REPL ONLY		No	No	Not Cov	No		Not Cov	No
Q0489	POWER PACK BASE FOR ELEC PNEUMAT VAD REPL ONLY		No	Not Cov	Not Cov	No		No	No
Q0490	EMERGENCY POWER SOURCE FOR ELEC VAD REPL ONLY		No	Not Cov	Not Cov	No		No	No
Q0491	EMERG POWER SRC FOR ELEC PNEUMAT VAD REPL ONLY		No	Not Cov	Not Cov	No		No	No
Q0492	EMERGENCY POWER SPL CABLE FOR ELEC VAD REPL ONLY		No	Not Cov	Not Cov	No		No	No
Q0493	EMERG PWR CABLE FOR ELEC PNEUMAT VAD REPL ONLY		No	Not Cov	Not Cov	No		No	No
Q0494	EMERGENCY HAND PUMP REPLACEMENT ONLY		No	Not Cov	Not Cov	No		No	No
Q0495	BATT CHRGR ELEC OR ELEC PNEUMAT VAD REPL ONLY		No	Not Cov	Not Cov	No		No	No
Q0496	BATTERY NOT LITHIUM-ION ELEC PNEUMAT VAD REPL		No	Not Cov	Not Cov	No		No	No
Q0497	BATT CLPS FOR ELEC OR ELEC PNEUMAT VAD REPL ONLY		No	Not Cov	Not Cov	No		No	No
Q0498	HOLSTER FOR ELEC OR ELEC PNEUMAT VAD REPL ONLY		No	Not Cov	Not Cov	No		No	No
Q0499	BELT VEST BAG CARRY ANY TYPE VAD REPLACE ONLY		No	No	Not Cov	No		No	No
Q0500	FILTERS FOR ELEC OR ELEC PNEUMAT VAD REPL ONLY		No	No	Not Cov	No		No	No
Q0501	SHOWER COVER ELEC OR ELEC PNEUMAT VAD REPL ONLY		No	No	Not Cov	No		No	No
Q0502	MOBILITY CART FOR PNEUMATIC VAD REPL ONLY		No	No	Not Cov	No		No	No
Q0503	BATTERY FOR PNEUMATIC VAD REPLACEMENT ONLY EACH		No	No	Not Cov	No		No	No
Q0504	POWER ADAPTER FOR PNEUMAT VAD REPL ONLY VEH TYPE		No	No	Not Cov	No		No	No
Q0506	BATTERY LITHIUM-ION ELEC PNEUMATIC VAD REPL		No	No	Not Cov	No		No	No
Q0507	MISC SUPPLY OR ACCESSORY USE WITH EXTERNAL VAD		Yes	Yes	Not Cov	Yes		Yes	Yes
Q0508	MISC SUPPLY OR ACCESSORY USE WITH IMPLANTED VAD		Yes	Yes	Not Cov	Yes		Yes	Yes
Q0509	MISC SPL ACSS IMPL VAD NO PAYMENT MEDICARE PRT A		Yes	Yes	Not Cov	Yes		Yes	Yes
Q0510	PHARM SPL FEE INIT IMS DRUG 1ST MO FLW TRANSPLNT		Not Cov	Not Cov	Not Cov	Not Cov		No	No
Q0511	PHRM FEE O ANTI-CA ANTI-EMET IS RX; 1 PRSC 30-DA		Not Cov	Not Cov	Not Cov	Not Cov		No	No
Q0512	PHRM FEE O ANTI-CA ANTI-EMET IS RX; SUBSQT 30-DA		Not Cov	Not Cov	Not Cov	Not Cov		No	No
Q0513	PHRM DISPENSING FEE INHALATION RX; PER 30 DAYS		Not Cov	Not Cov	Not Cov	Not Cov		No	No
Q0514	PHRM DISPENSING FEE INHALATION RX; PER 90 DAYS		Not Cov	Not Cov	Not Cov	Not Cov		No	No
Q0515	INJECTION SERMORELIN ACETATE 1 MICROGRAM		No	No	Not Cov	No		Not Cov	No
Q1004	NEW TECH IO LENS CATGY 4 DEFINED FEDERAL REG		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
Q1005	NEW TECH IO LENS CATGY 5 DEFINED FEDERAL REG		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
Q2004	IRRIGATION SOL TX BLADDER CALCULI PER 500 ML		No	No	Not Cov	No		No	No

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			Outpatient		ASC	Office Setting			
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Q2009	INJ FOSPHENYTOIN 50 MG PHENYTOIN EQUIVALENT		No	No	Not Cov	No		No	No
Q2017	INJECTION TENIPOSIDE 50 MG		No	No	Not Cov	No		No	No
Q2026	INJECTION RADIESSE 0.1ML		Not Cov	Not Cov	Not Cov	Not Cov		No	Not Cov
Q2028	INJECTION SCULPTRA 0.5 MG		Not Cov	Not Cov	Not Cov	Not Cov		No	Not Cov
Q2034	FLU VIRUS VAC SPLIT VIRUS INTRAMUSCULAR AGRIFLU	Age 19+	No	Not Cov	Not Cov	Not Cov		No	No
Q2035	INFLUENZA VACC SPLIT VIRUS 3 YRS AND OVER IM AFLURIA		No	Not Cov	Not Cov	Not Cov		No	No
Q2036	INFLUENZA VACC SPLIT VIRUS 3 YRS AND OVER IM FLULAVAL		No	Not Cov	Not Cov	Not Cov		No	No
Q2037	INFLUENZA VACC SPLIT VIRUS 3 YRS AND OVER IM FLUVIRIN		No	Not Cov	Not Cov	Not Cov		No	No
Q2038	INFLUENZA VACC SPLIT VIRUS 3 YRS AND OVER IM FLUZONE		No	Not Cov	Not Cov	Not Cov		No	No
Q2039	INFLUENZA VIRUS VACCINE NOT OTHERWISE SPECIFIED		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
Q2041	KTE-C19 TO 200 M A ANTI-CD19 CAR POS T CE P TD	Bill through DSHS	Not Cov	Not Cov	Not Cov	Not Cov		No	Yes
Q2042	TISAGNECLEUCEL TO 600 M CAR-POS VI T CE PER TD	Bill through DSHS	Not Cov	Not Cov	Not Cov	Not Cov		No	Yes
Q2043	SIPULEUCEL-T AUTO CD54 PLUS		Yes	Yes	Not Cov	Yes		Yes	Yes
Q2049	INJ DOXORUBICIN HCI LIP IMPORTED LIPODOX 10 MG		No	No	Not Cov	No		No	No
Q2050	INJECTION DOXORUBICIN HCL LIPOSOMAL NOS 10 MG		Yes	Yes	Not Cov	Yes		Yes	Yes
Q2052	SERVICES SUPPLIES IN HOME MEDICARE IVIG DEM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
Q3001	ADJUNCTIVE PROCEDURE		Not Cov	No	Not Cov	No		No	No
Q3014	TELEHEALTH ORIGINATING SITE FACILITY FEE		No	No	Not Cov	No		No	No
Q3027	INJECTION INTERFERON BETA-1A 1 MCG IM USE		Yes	Yes	Not Cov	Yes		Yes	Yes
Q3028	INJECTION INTERFERON BETA-1A 1 MCG SUBQ USE		Yes	Yes	Not Cov	Yes		Not Cov	Yes
Q3031	COLLAGEN SKIN TEST		No	No	Not Cov	No		Not Cov	No
Q4001	CASTING SPL BODY CAST ADULT W WO HEAD PLASTR		Not Cov	No	Not Cov	No		No	No
Q4002	CAST SUPPLIES BODY CAST ADULT W WO HEAD FIBRGLS		Not Cov	No	Not Cov	No		No	No
Q4003	CAST SUPPLIES SHOULDER CAST ADULT PLASTER		Not Cov	No	Not Cov	No		No	No
Q4004	CAST SUPPLIES SHOULDER CAST ADULT FIBERGLASS		Not Cov	No	Not Cov	No		No	No
Q4005	CAST SUPPLIES LONG ARM CAST ADULT PLASTER		Not Cov	No	Not Cov	No		No	No
Q4006	CAST SUPPLIES LONG ARM CAST ADULT FIBERGLASS		Not Cov	No	Not Cov	No		No	No
Q4007	CAST SUPPLIES LONG ARM CAST PEDIATRIC PLASTER		Not Cov	No	Not Cov	No		No	No
Q4008	CAST SUPPLIES LONG ARM CAST PEDIATRIC FIBERGLASS		Not Cov	No	Not Cov	No		No	No
Q4009	CAST SUPPLIES SHORT ARM CAST ADULT PLASTER		Not Cov	No	Not Cov	No		No	No
Q4010	CAST SUPPLIES SHORT ARM CAST ADULT FIBERGLASS		Not Cov	No	Not Cov	No		No	No
Q4011	CAST SUPPLIES SHORT ARM CAST PEDIATRIC PLASTER		Not Cov	No	Not Cov	No		No	No
Q4012	CAST SUPPLIES SHORT ARM CAST PEDIATRIC FIBRGLS		Not Cov	No	Not Cov	No		No	No
Q4013	CAST SUPPLIES GAUNTLET CAST ADULT PLASTER		Not Cov	No	Not Cov	No		No	No
Q4014	CAST SUPPLIES GAUNTLET CAST ADULT FIBERGLASS		Not Cov	No	Not Cov	No		No	No
Q4015	CAST SUPPLIES GAUNTLET CAST PEDIATRIC PLASTER		Not Cov	No	Not Cov	No		No	No
Q4016	CAST SUPPLIES GAUNTLET CAST PEDIATRIC FIBERGLASS		Not Cov	No	Not Cov	No		No	No
Q4017	CAST SUPPLIES LONG ARM SPLINT ADULT PLASTER		Not Cov	No	Not Cov	No		No	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
Q4018	CAST SUPPLIES LONG ARM SPLINT ADULT FIBERGLASS		Not Cov	No	Not Cov	No		No	No
Q4019	CAST SUPPLIES LONG ARM SPLINT PEDIATRIC PLASTER		Not Cov	No	Not Cov	No		No	No
Q4020	CAST SUPPLIES LONG ARM SPLINT PEDIATRIC FIBRGLS		Not Cov	No	Not Cov	No		No	No
Q4021	CAST SUPPLIES SHORT ARM SPLINT ADULT PLASTER		Not Cov	No	Not Cov	No		No	No
Q4022	CAST SUPPLIES SHORT ARM SPLINT ADULT FIBERGLASS		Not Cov	No	Not Cov	No		No	No
Q4023	CAST SUPPLIES SHORT ARM SPLINT PEDIATRIC PLASTER		Not Cov	No	Not Cov	No		No	No
Q4024	CAST SUPPLIES SHORT ARM SPLINT PEDIATRIC FIBRGLS		Not Cov	No	Not Cov	No		No	No
Q4025	CAST SUPPLIES HIP SPICA ADULT PLASTER		Not Cov	No	Not Cov	No		No	No
Q4026	CAST SUPPLIES HIP SPICA ADULT FIBERGLASS		Not Cov	No	Not Cov	No		No	No
Q4027	CAST SUPPLIES HIP SPICA PEDIATRIC PLASTER		Not Cov	No	Not Cov	No		No	No
Q4028	CAST SUPPLIES HIP SPICA PEDIATRIC FIBERGLASS		Not Cov	No	Not Cov	No		No	No
Q4029	CAST SUPPLIES LONG LEG CAST ADULT PLASTER		Not Cov	No	Not Cov	No		No	No
Q4030	CAST SUPPLIES LONG LEG CAST ADULT FIBERGLASS		Not Cov	No	Not Cov	No		No	No
Q4031	CAST SUPPLIES LONG LEG CAST PEDIATRIC PLASTER		Not Cov	No	Not Cov	No		No	No
Q4032	CAST SUPPLIES LONG LEG CAST PEDIATRIC FIBERGLASS		Not Cov	No	Not Cov	No		No	No
Q4033	CAST SUPPLIES LONG LEG CYCLE CAST ADULT PLASTER		Not Cov	No	Not Cov	No		No	No
Q4034	CAST SUPPLIES LNG LEG CYCLE CAST ADLT FIBERGLASS		Not Cov	No	Not Cov	No		No	No
Q4035	CAST SUPPLIES LONG LEG CYCLE CAST PED PLASTR		Not Cov	No	Not Cov	No		No	No
Q4036	CAST SPL LONG LEG CYCLE CAST PEDIATRIC FIBRGLS		Not Cov	No	Not Cov	No		No	No
Q4037	CAST SUPPLIES SHORT LEG CAST ADULT PLASTER		Not Cov	No	Not Cov	No		No	No
Q4038	CAST SUPPLIES SHORT LEG CAST ADULT FIBERGLASS		Not Cov	No	Not Cov	No		No	No
Q4039	CAST SUPPLIES SHORT LEG CAST PEDIATRIC PLASTER		Not Cov	No	Not Cov	No		No	No
Q4040	CAST SUPPLIES SHORT LEG CAST PEDIATRIC FIBRGLS		Not Cov	No	Not Cov	No		No	No
Q4041	CAST SUPPLIES LONG LEG SPLINT ADULT PLASTER		Not Cov	No	Not Cov	No		No	No
Q4042	CAST SUPPLIES LONG LEG SPLINT ADULT FIBERGLASS		Not Cov	No	Not Cov	No		No	No
Q4043	CAST SUPPLIES LONG LEG SPLINT PEDIATRIC PLASTER		Not Cov	No	Not Cov	No		No	No
Q4044	CAST SUPPLIES LONG LEG SPLINT PEDIATRIC FIBRGLS		Not Cov	No	Not Cov	No		No	No
Q4045	CAST SUPPLIES SHORT LEG SPLINT ADULT PLASTER		Not Cov	No	Not Cov	No		No	No
Q4046	CAST SUPPLIES SHORT LEG SPLINT ADULT FIBERGLASS		Not Cov	No	Not Cov	No		No	No
Q4047	CAST SUPPLIES SHORT LEG SPLINT PEDIATRIC PLASTER		Not Cov	No	Not Cov	No		No	No
Q4048	CAST SUPPLIES SHORT LEG SPLINT PEDIATRIC FIBRGLS		Not Cov	No	Not Cov	No		No	No
Q4049	FINGER SPLINT STATIC		Not Cov	No	Not Cov	No		No	No
Q4050	CAST SUPPLIES UNLISTED TYPES AND MATERIALS OF CASTS		Not Cov	Yes	Not Cov	Yes		Yes	Yes
Q4051	SPLINT SUPPLIES MISCELLANEOUS		Not Cov	Yes	Not Cov	Yes		Yes	Yes
Q4074	ILOPROST INHAL SOL THRU DME UNIT DOSE TO 20 MCG		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
Q4081	INJ EPOETIN ALFA 100 UNITS FOR ESRD ON DIALYSIS	One time notification only	No	No	Not Cov	No		No	No
Q4082	DRUG OR BIOLOGICAL NOC PART B DRUG CAP		Yes	Yes	Not Cov	Yes		Yes	Yes
Q4100	SKIN SUBSTITUTE NOT OTHERWISE SPECIFIED		Yes	Not Cov	Not Cov	Not Cov		Yes	Yes
Q4101	APLIGRAF PER SQ CM		No	Not Cov	Not Cov	No		No	No
Q4102	OASIS WOUND MATRIX PER SQ CM		No	Not Cov	Not Cov	No		No	No
Q4103	OASIS BURN MATRIX PER SQ CM		No	Not Cov	Not Cov	Not Cov		No	No
Q4104	INTEGRA BILAYER MATRIX WOUND DRESSING PER SQ CM		No	Not Cov	Not Cov	Not Cov		No	No

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			Outpatient		ASC	Office Setting			
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Q4105	INTEGRA DRT INTEGRA OMNIGR DRML RGN MTX P SQ CM		No	Not Cov	Not Cov	Not Cov		No	No
Q4106	DERMAGRAFT PER SQ CM		No	Not Cov	Not Cov	No		No	No
Q4107	GRAFTJACKET PER SQ CM		No	Not Cov	Not Cov	Not Cov		No	No
Q4108	INTEGRA MATRIX PER SQ CM		No	Not Cov	Not Cov	Not Cov		No	No
Q4110	PRIMATRIX PER SQ CM		No	Not Cov	Not Cov	Not Cov		No	No
Q4111	GAMMAGRAFT PER SQ CM		No	Not Cov	Not Cov	Not Cov		No	No
Q4112	CYMETRA INJECTABLE 1 CC		Not Cov	Not Cov	Not Cov	Not Cov		No	No
Q4113	GRAFTJACKET XPRESS INJECTABLE 1 CC		Not Cov	Not Cov	Not Cov	Not Cov		No	No
Q4114	INTEGRA FLOWABLE WOUND MATRIX INJECTABLE 1 CC		Not Cov	Not Cov	Not Cov	Not Cov		No	No
Q4115	ALLOSKIN PER SQ CM		No	Not Cov	Not Cov	Not Cov		No	No
Q4116	ALLODERM PER SQ CM		No	No	Not Cov	No		No	No
Q4117	HYALOMATRIX PER SQ CM		No	Not Cov	Not Cov	Not Cov		Not Cov	No
Q4118	MATRISTEM MICROMATRIX 1 MG		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
Q4121	THERASKIN PER SQ CM		No	No	Not Cov	No		No	No
Q4122	DERMACELL PER SQ CM		No	Not Cov	Not Cov	Not Cov		Not Cov	No
Q4123	ALLOSKIN RT PER SQ CM		No	Not Cov	Not Cov	Not Cov		No	No
Q4124	OASIS ULTRA TRI-LAYER WOUND MATRIX PER SQ CM		No	Not Cov	Not Cov	Not Cov		Not Cov	No
Q4125	ARTHROFLEX PER SQ CM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
Q4126	MEMODERM DERMASPERAN TRANZGRFT INTEGUPPLY PER SQ CM		No	Not Cov	Not Cov	Not Cov		Not Cov	No
Q4127	TALYMED PER SQ CM		No	Not Cov	Not Cov	Not Cov		No	No
Q4128	FLEXHD ALLOPATCHHD OR MATRIX HD PER SQ CM		No	Not Cov	Not Cov	Not Cov		No	No
Q4130	STRATTICE PER SQ CM		Not Cov	Not Cov	Not Cov	Not Cov		No	No
Q4132	GRAFIX CORE AND GRAFIXPL CORE PER SQUARE CM		No	Not Cov	Not Cov	Not Cov		No	No
Q4133	GRAFIX PRIME AND GRAFIXPL PRIME PER SQUARE CM		No	Not Cov	Not Cov	Not Cov		No	No
Q4134	HMATRIX PER SQUARE CENTIMETER		No	Not Cov	Not Cov	Not Cov		No	No
Q4135	MEDISKIN PER SQUARE CENTIMETER		No	Not Cov	Not Cov	Not Cov		No	No
Q4136	E-Z DERM PER SQUARE CENTIMETER		No	Not Cov	Not Cov	Not Cov		Not Cov	No
Q4137	AMNIOEXCEL OR BIODExcel PER SQ CM		No	Not Cov	Not Cov	Not Cov		Not Cov	No
Q4138	BIODFENCE DRYFLEX PER SQ CM		No	Not Cov	Not Cov	Not Cov		Not Cov	No
Q4139	AMNIOMATRIX OR BIODMATRIX INJECTABLE 1 CC		No	Not Cov	Not Cov	Not Cov		No	No
Q4140	BIODFENCE PER SQ CM		No	Not Cov	Not Cov	Not Cov		Not Cov	No
Q4141	ALLOSKIN AC PER SQ CM		No	Not Cov	Not Cov	Not Cov		Not Cov	No
Q4142	XCM BIOLOGIC TISSUE MATRIX PER SQ CM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
Q4143	REPRIZA PER SQ CM		No	Not Cov	Not Cov	Not Cov		Not Cov	No
Q4145	EPIFIX INJECTABLE 1 MG		Not Cov	Not Cov	Not Cov	Not Cov		No	No
Q4146	TENSIX PER SQ CM		No	Not Cov	Not Cov	Not Cov		Not Cov	No
Q4147	ARCHITECT EXTRACELLULAR MATRIX PER SQ CM		No	Not Cov	Not Cov	Not Cov		Not Cov	No
Q4148	NEOX CORD 1K NEOX CORD RT CLARIX CORD 1K-SQ CM		No	Not Cov	Not Cov	Not Cov		Not Cov	No
Q4149	EXCELLAGEN 0.1 CC		No	Not Cov	Not Cov	Not Cov		No	No
Q4150	ALLOWRAP DS OR DRY PER SQUARE CENTIMETER		No	Not Cov	Not Cov	Not Cov		Not Cov	No
Q4151	AMNIOBAND OR GUARDIAN PER SQUARE CENTIMETER		No	Not Cov	Not Cov	Not Cov		Not Cov	No
Q4152	DERMAPURE PER SQUARE CENTIMETER		No	Not Cov	Not Cov	Not Cov		Not Cov	No
Q4153	DERMAVEST AND PLURIVEST PER SQ CM		No	Not Cov	Not Cov	Not Cov		Not Cov	No
Q4154	BIOVANCE PER SQUARE CENTIMETER		No	Not Cov	Not Cov	Not Cov		Not Cov	No
Q4155	NEOXFLO OR CLARIXFLO 1 MG		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No

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			Outpatient		ASC	Office Setting			
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Q4156	NEOX 100 OR CLARIX 100 PER SQUARE CM		No	Not Cov	Not Cov	Not Cov		Not Cov	No
Q4157	REVITALON PER SQUARE CENTIMETER		No	Not Cov	Not Cov	Not Cov		Not Cov	No
Q4158	KERCIS OMEGA3 PER SQUARE CM		No	Not Cov	Not Cov	Not Cov		Not Cov	No
Q4159	AFFINITY PER SQUARE CENTIMETER		No	Not Cov	Not Cov	Not Cov		Not Cov	No
Q4160	NUSHIELD PER SQUARE CENTIMETER		No	Not Cov	Not Cov	Not Cov		Not Cov	No
Q4161	BIO-CONNKT WOUND MATRIX PER SQUARE CENTIMETER		Yes	Not Cov	Not Cov	Not Cov		Yes	Not Cov
Q4162	WOUNDEX FLOW BIOSKIN FLOW 0.5 CC		Yes	Not Cov	Not Cov	Not Cov		Yes	Not Cov
Q4163	WOUNDEX BIOSKIN PER SQUARE CM		Yes	Not Cov	Not Cov	Not Cov		Yes	Not Cov
Q4164	HELICOLL PER SQUARE CENTIMETER		Yes	Not Cov	Not Cov	Not Cov		Yes	Not Cov
Q4165	KERAMATRIX PER SQUARE CENTIMETER		Yes	Not Cov	Not Cov	Not Cov		Yes	Not Cov
Q4166	CYTAL PER SQ CM		No	Not Cov	Not Cov	Not Cov		No	No
Q4167	TRUSKIN PER SQ CM		No	Not Cov	Not Cov	Not Cov		No	No
Q4168	AMNIOBAND 1 MG		No	Not Cov	Not Cov	Not Cov		No	No
Q4169	ARTACENT WOUND PER SQ CM		No	Not Cov	Not Cov	Not Cov		No	No
Q4170	CYGNUS PER SQ CM		No	Not Cov	Not Cov	Not Cov		No	No
Q4171	INTERFYL 1 MG		No	Not Cov	Not Cov	Not Cov		No	No
Q4173	PALINGEN OR PALINGEN XPLUS PER SQ CM		No	Not Cov	Not Cov	Not Cov		No	No
Q4174	PALINGEN OR PROMATRX 0.36 MG PER 0.25 CC		No	Not Cov	Not Cov	Not Cov		No	No
Q4175	MIRODERM PER SQ CM		No	Not Cov	Not Cov	Not Cov		No	No
Q4176	NEOPATCH PER SQUARE CM		Yes	Not Cov	Not Cov	Not Cov		Yes	Yes
Q4177	FLOWERAMNIOFLO 0.1 CC		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
Q4178	FLOWERAMNIOPATCH PER SQUARE CM		Yes	Not Cov	Not Cov	Not Cov		Yes	Yes
Q4179	FLOWERDERM PER SQUARE CM		Yes	Not Cov	Not Cov	Not Cov		Yes	Yes
Q4180	REVITA PER SQUARE CM		Yes	Not Cov	Not Cov	Not Cov		Yes	Yes
Q4181	AMNIO WOUND PER SQUARE CM		Yes	Not Cov	Not Cov	Not Cov		Yes	Yes
Q4182	TRANSCYTE PER SQUARE CM		Yes	Not Cov	Not Cov	Not Cov		Yes	Yes
Q4183	SURGIGRAFT PER SQ CM		Yes	Not Cov	Not Cov	Not Cov		Yes	Yes
Q4184	CELLESTA PER SQ CM		Yes	Not Cov	Not Cov	Not Cov		Yes	Yes
Q4185	CELLESTA FLOWABLE AMNION; PER 0.5 CC		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
Q4186	EPIFIX PER SQ CM		Yes	Yes	Not Cov	Yes		Yes	Yes
Q4187	EPICORD PER SQ CM		Yes	Not Cov	Not Cov	Not Cov		Yes	Yes
Q4188	AMNIOARMOR PER SQ CM		Yes	Not Cov	Not Cov	Not Cov		Yes	Yes
Q4189	ARTACENT AC 1 MG		Not Cov	Not Cov	Not Cov	Not Cov		No	Yes
Q4190	ARTACENT AC PER SQ CM		Yes	Not Cov	Not Cov	Not Cov		Yes	Yes
Q4191	RESTORIGIN PER SQ CM		Yes	Not Cov	Not Cov	Not Cov		Yes	Yes
Q4192	RESTORIGIN 1 CC		Not Cov	Not Cov	Not Cov	Not Cov		No	Yes
Q4193	COLL-E-DERM PER SQ CM		Yes	Not Cov	Not Cov	Not Cov		Yes	Yes
Q4195	PURAPLY PER SQ CM		Yes	Not Cov	Not Cov	Not Cov		No	Yes
Q4196	PURAPLY AM PER SQ CM		Yes	Not Cov	Not Cov	Not Cov		No	Yes
Q4197	PURAPLY XT PER SQ CM		Yes	Not Cov	Not Cov	Not Cov		No	Yes
Q4198	GENESIS AMNIOTIC MEMBRANE PER SQ CM		Yes	Not Cov	Not Cov	Not Cov		Yes	Yes
Q4200	SKINTE PER SQ CM		Yes	Not Cov	Not Cov	Not Cov		Yes	Yes
Q4201	MATRION PER SQ CM		Yes	Not Cov	Not Cov	Not Cov		Yes	Yes
Q4202	KEROXX (2.5G CC) 1CC		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
Q4203	DERMA-GIDE PER SQ CM		Yes	Not Cov	Not Cov	Not Cov		Yes	Yes
Q4204	XWRAP PER SQ CM		Yes	Not Cov	Not Cov	Not Cov		Yes	Yes

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
Q4205	MEMBRANE GRAFT OR MEMBRANE WRAP PER SQ CM		Not Cov	Not Cov	Not Cov	Not Cov		TBD	TBD
Q4206	FLUID FLOW OR FLUID GF 1 CC		Not Cov	Not Cov	Not Cov	Not Cov		TBD	TBD
Q4208	NOVAFIX PER SQ CM		Not Cov	Not Cov	Not Cov	Not Cov		TBD	TBD
Q4209	SURGRAFT PER SQ CM		Not Cov	Not Cov	Not Cov	Not Cov		TBD	TBD
Q4210	AXOLOTL GRAFT OR AXOLOTL DUALGRAFT PER SQ CM		Not Cov	Not Cov	Not Cov	Not Cov		TBD	TBD
Q4211	AMNION BIO OR AXOBIOMEMBRANE PER SQ CM		Not Cov	Not Cov	Not Cov	Not Cov		TBD	TBD
Q4212	ALLOGEN PER CC		Not Cov	Not Cov	Not Cov	Not Cov		TBD	TBD
Q4213	ASCENT 0.5 MG		Not Cov	Not Cov	Not Cov	Not Cov		TBD	TBD
Q4214	CELLESTA CORD PER SQ CM		Not Cov	Not Cov	Not Cov	Not Cov		TBD	TBD
Q4215	AXOLOTL AMBIENT OR AXOLOTL CRYO 0.1 MG		Not Cov	Not Cov	Not Cov	Not Cov		TBD	TBD
Q4216	ARTACENT CORD PER SQ CM		Not Cov	Not Cov	Not Cov	Not Cov		TBD	TBD
Q4217	WNDFIX BLOWND WNDFIX PLUS BLOWND PLUS WNDFIX X PLU		Not Cov	Not Cov	Not Cov	Not Cov		TBD	TBD
Q4218	SURGICORD PER SQ CM		Not Cov	Not Cov	Not Cov	Not Cov		TBD	TBD
Q4219	SURGIGRAFT-DUAL PER SQ CM		Not Cov	Not Cov	Not Cov	Not Cov		TBD	TBD
Q4220	BELLACELL HD OR SUREDERM PER SQ CM		Not Cov	Not Cov	Not Cov	Not Cov		TBD	TBD
Q4221	AMNIO WRAP2 PER SQ CM		Not Cov	Not Cov	Not Cov	Not Cov		TBD	TBD
Q4222	PROGENAMATRIX PER SQ CM		Not Cov	Not Cov	Not Cov	Not Cov		TBD	TBD
Q4226	MYOWN SKIN INCL HARVEST AND PREP PROC PER SQ CM		Not Cov	Not Cov	Not Cov	Not Cov		TBD	TBD
Q5001	HOSPICE HOME HEALTH CARE PROV PT HOME RESIDENCE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
Q5002	HOSPICE HOME HEALTH CARE IN ASSISTED LIVING FACL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
Q5003	HOSPICE CARE PROV NURSING LTC FACL NON-SKILL NF		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
Q5004	HOSPICE CARE PROVIDED SKILLED NURSING FACILITY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
Q5005	HOSPICE CARE PROVIDED IN INPATIENT HOSPITAL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
Q5006	HOSPICE CARE PROV INPATIENT HOSPICE FACILITY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
Q5007	HOSPICE CARE PROV LONG TERM CARE FACILITY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
Q5008	HOSPICE CARE PROV INPATIENT PSYCHIATRIC FACILITY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
Q5009	HOSPICE HOME HEALTH CARE PROVIDED IN PLACE NOS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
Q5010	HOSPICE HOME CARE PROVIDED IN A HOSPICE FACILITY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
Q5101	INJECTION FILGRASTIM BIOSIMILAR 1 MCG		Yes	Yes	Not Cov	Yes		Yes	Yes
Q5103	INJECTION INFLIXIMAB-DYYB BIOSIMILAR 10 MG	PA Req 7/1/18	Yes	Yes	Not Cov	Yes		Yes	Yes
Q5104	INJECTION INFLIXIMAB-ABDA BIOSIMILAR 10 MG	PA Req 7/1/18	Yes	Yes	Not Cov	Yes		Yes	Yes
Q5105	INJECTION EPOETIN ALFA BIOSIMILAR 100 UNITS		Not Cov	Not Cov	Not Cov	Not Cov		No	No
Q5106	INJECTION EPOETIN ALFA BIOSIMILAR 1000 UNITS		Not Cov	Not Cov	Not Cov	Not Cov		No	No
Q5107	INJECTION BEVACIZUMAB-AWWB BIOSIMILAR 10 MG		Yes	Yes	Not Cov	Yes		No	Yes
Q5108	INJECTION PEGFILGRASTIM-JMDB BIOSIMILAR 0.5 MG		Not Cov	Yes	Not Cov	Yes		Yes	Yes
Q5109	INJECTION INFLIXIMAB-QBTX BIOSIMILAR 10 MG		Yes	Yes	Not Cov	Yes		No	Yes
Q5110	INJECTION FILGRASTIM-AAFI BIOSIMILAR 1 MCG		Not Cov	Yes	Not Cov	Yes		Yes	Yes
Q5111	INJECTION PEGFILGRASTIM-CBQV BIOSIMILAR 0.5 MG		Yes	Yes	Not Cov	Yes		No	Yes
Q5112	INJECTION TRASTUZUMAB-DTTB BIOSIMILAR 10 MG		Not Cov	Not Cov	Not Cov	Not Cov		No	Yes
Q5113	INJECTION TRASTUZUMAB-PKRB BIOSIMILAR 10 MG		Not Cov	Not Cov	Not Cov	Not Cov		No	Yes
Q5114	INJECTION TRASTUZUMAB-DKST BIOSIMILAR 10 MG		Not Cov	Not Cov	Not Cov	Not Cov		No	Yes

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
Q5115	INJECTION RITUXIMAB-ABBS BIOSIMILAR 10 MG		Not Cov	Not Cov	Not Cov	Not Cov		No	Yes
Q5116	INJECTION TRASTUZUMAB-QYYP BIOSIMILAR 10 MG		Not Cov	Not Cov	Not Cov	Not Cov		TBD	TBD
Q5117	INJECTION TRASTUZUMAB-ANNS BIOSIMILAR 10 MG		Yes	Yes	Not Cov	Yes		TBD	TBD
Q5118	INJECTION BEVACIZUMAB-BVCR BIOSIMILAR 10 MG		Not Cov	Not Cov	Not Cov	Not Cov		TBD	TBD
Q9950	INJECTION SULFUR HEXAFLUORIDE LIPID MSS PER ML		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
Q9951	LOW OSM CONTRST MATL 400 OR GRT MG ML IODINE CONC ML		No	No	Not Cov	No		No	No
Q9953	INJECTION IRONBASED MR CONTRAST AGENT PER ML		No	No	Not Cov	No		No	No
Q9954	ORAL MAGNETIC RESONANCE CONTRAST AGENT 100 ML		No	No	Not Cov	No		No	No
Q9955	INJECTION PERFLEXANE LIPID MICROSPHERES PER ML		No	No	Not Cov	No		No	No
Q9956	INJECTION OCTAFLUOROPROPANE MICROSPHERES PER ML		No	No	Not Cov	No		No	No
Q9957	INJECTION PERFLUTREN LIPID MICROSPHERES PER ML		No	No	Not Cov	No		No	No
Q9958	HIGH OSM CONTRAST MATL 149 MG ML IODINE CONC ML		No	No	Not Cov	No		No	No
Q9959	HI OSM CONTRST MATL 150-199 MG ML IODINE CONC ML		No	No	Not Cov	No		No	No
Q9960	HI OSM CONTRST MATL 200-249 MG ML IODINE CONC ML		No	No	Not Cov	No		No	No
Q9961	HI OSM CONTRST MATL 250-299 MG ML IODINE CONC ML		No	No	Not Cov	No		No	No
Q9962	HI OSM CONTRST MATL 300-349 MG ML IODINE CONC ML		No	No	Not Cov	No		No	No
Q9963	HI OSM CONTRST MATL 350-399 MG ML IODINE CONC ML		No	No	Not Cov	No		No	No
Q9964	HIGH OSM CONTRST MATL 400 OR GRT MG ML IODINE CONC ML		No	No	Not Cov	No		No	No
Q9965	LOCM 100-199 MG ML IODINE CONCENTRATION PER ML		No	No	Not Cov	No		No	No
Q9966	LOCM 200-299 MG ML IODINE CONCENTRATION PER ML		No	No	Not Cov	No		No	No
Q9967	LOCM 300-399 MG ML IODINE CONCENTRATION PER ML		No	No	Not Cov	No		No	No
Q9968	INJ NONRADIATIVE NONCONTRAST VIZ ADJUNCT 1 MG		No	No	Not Cov	No		No	No
Q9969	TC-99M NON-HEU FULL COST REC ADD-ON PER STDY DOS		No	Not Cov	Not Cov	Not Cov		No	No
Q9982	FLUTEMETAMOL F18 DX P STUDY DO TO 5 MILLICURIES		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
Q9983	FLORBETABEN F18 DX P STUDY DO TO 8.1 MILLICURIES		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
Q9991	INJECTION BUPRENORPHINE EXT-RLSE UNDER EQ TO 100 MG		Not Cov	Yes	Not Cov	Yes		Yes	Yes
Q9992	INJECTION BUPRENORPHINE EXTENDED-RELEASE OVER 100 MG		Not Cov	Yes	Not Cov	Yes		Yes	Yes
R0070	TRANS PRTBL X-RAY EQP AND PERS HOM NRS HOM-TRIP 1 PT		Not Cov	No	Not Cov	No		No	No
R0075	TRANS PRTBL XRAY EQP AND PERS HOM NRS HOM-TRIP OVER 1 PT		Not Cov	No	Not Cov	No		No	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
R0076	TRANSPORTATION PRTBLE EKG FACL LOCATION PER PT		Not Cov	No	Not Cov	No		Not Cov	No
S0012	BUTORPHANOL TARTRATE NASAL SPRAY 25 MG		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S0014	TACRINE HYDROCHLORIDE 10 MG		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S0017	INJECTION AMINOCAPROIC ACID 5 GRAMS		Not Cov	No	Not Cov	No		Not Cov	No
S0020	INJECTION BUPIVICAINE HYDROCHLORIDE 30 ML		Not Cov	No	Not Cov	No		Not Cov	No
S0021	INJECTION CEFOPERAZONE SODIUM 1 GM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S0023	INJECTION CIMETIDINE HYDROCHLORIDE 300 MG		Not Cov	No	Not Cov	No		Not Cov	No
S0028	INJECTION FAMOTIDINE 20 MG		Not Cov	No	Not Cov	No		Not Cov	No
S0030	INJECTION METRONIDAZOLE 500 MG		Not Cov	No	Not Cov	No		Not Cov	No
S0032	INJECTION NAFCILLIN SODIUM 2 GRAMS		Not Cov	No	Not Cov	No		Not Cov	No
S0034	INJECTION OFLOXACIN 400 MG		Not Cov	No	Not Cov	No		Not Cov	No
S0039	INJECTION SULFAMETHOXAZOLE AND TRIMETHOPRIM 10 ML		Not Cov	No	Not Cov	No		Not Cov	No
S0040	INJ TICARCILLIN DISODIUM AND CLAVULANATE K PLUS 3.1 GMS		Not Cov	No	Not Cov	No		Not Cov	No
S0073	INJECTION AZTREONAM 500 MG		Not Cov	Yes	Not Cov	Yes		Not Cov	Yes
S0074	INJECTION CEFOTETAN DISODIUM 500 MG		Not Cov	No	Not Cov	No		Not Cov	No
S0077	INJECTION CLINDAMYCIN PHOSPHATE 300 MG		Not Cov	No	Not Cov	No		Not Cov	No
S0078	INJECTION FOSPHENYTOIN SODIUM 750 MG		Not Cov	No	Not Cov	No		Not Cov	No
S0080	INJECTION PENTAMIDINE ISETHIONATE 300 MG		Not Cov	No	Not Cov	No		Not Cov	No
S0081	INJECTION PIPERACILLIN SODIUM 500 MG		Not Cov	No	Not Cov	No		Not Cov	No
S0088	IMATINIB 100 MG		Not Cov	No	Not Cov	No		Not Cov	No
S0090	SILDENAFIL CITRATE 25 MG		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
S0091	GRANISETRON HYDROCHLORIDE 1 MG		Not Cov	No	Not Cov	No		Not Cov	No
S0092	INJECTION HYDROMORPHONE HYDROCHLORIDE 250 MG		Not Cov	No	Not Cov	No		Not Cov	No
S0093	INJECTION MORPHINE SULFATE 500 MG		Not Cov	No	Not Cov	No		Not Cov	No
S0104	ZIDOVUDINE ORAL 100 MG		Not Cov	No	Not Cov	No		Not Cov	No
S0106	BUPROPION HCI SUSTAINED RLSE TAB 150 MG 60 TABS		Not Cov	No	Not Cov	No		Not Cov	No
S0108	MERCAPTOPYRINE ORAL 50 MG		Not Cov	No	Not Cov	No		Not Cov	No
S0109	METHADONE ORAL 5MG		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S0117	TRETINOIN TOPICAL 5 GRAMS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S0119	ONDANSETRON ORAL 4 MG		No	Not Cov	Not Cov	Not Cov		Not Cov	No
S0122	INJECTION MENOTROPINS 75 IU		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Yes
S0126	INJECTION FOLLITROPIN ALFA 75 IU		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Yes
S0128	INJECTION FOLLITROPIN BETA 75 IU		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Yes
S0132	INJECTION GANIRELIX ACETATE 250 MCG		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Yes
S0136	CLOZAPINE 25 MG		Not Cov	No	Not Cov	No		Not Cov	No
S0137	DIDANOSINE 25 MG		Not Cov	No	Not Cov	No		Not Cov	No
S0138	FINASTERIDE 5 MG		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S0139	MINOXIDIL 10 MG		Not Cov	No	Not Cov	No		Not Cov	No
S0140	SAQUINAVIR 200 MG		Not Cov	No	Not Cov	No		Not Cov	No
S0142	COLISTMTHATE SODIUM INHAL SOL CONC FORM-PER MG		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S0145	INJ PEGYLATED INTERFERON ALFA2A 180 MCG PER ML		Not Cov	Yes	Not Cov	Yes		Not Cov	No
S0148	INJECTION PEGYLATED INTERFERON ALFA-2B 10 MCG		Yes	Not Cov	Not Cov	Yes		Not Cov	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
S0155	STERILE DILUTANT FOR EPOPROSTENOL 50 ML		Not Cov	No	Not Cov	No		Not Cov	No
S0156	EXEMESTANE 25 MG		Not Cov	No	Not Cov	No		Not Cov	No
S0157	BECAPLERMIN GEL 0.01PCT 0.5 GM		Not Cov	Yes	Not Cov	Yes		Not Cov	Yes
S0160	DEXTROAMPHETAMINE SULFATE 5 MG		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S0164	INJECTION PANTOPRAZOLE SODIUM 40 MG		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S0166	INJECTION OLANZAPINE 2.5 MG		No	Not Cov	Not Cov	Not Cov		Not Cov	No
S0169	CALCITROL 0.25 MICROGRAM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S0170	ANASTROZOLE ORAL 1 MG		Not Cov	No	Not Cov	No		Not Cov	No
S0171	INJECTION BUMETANIDE 0.5 MG		Not Cov	No	Not Cov	No		Not Cov	No
S0172	CHLORAMBUCIL ORAL 2 MG		Not Cov	No	Not Cov	No		Not Cov	No
S0174	DOLASETRON MESYLATE ORAL 50 MG		Not Cov	No	Not Cov	No		Not Cov	No
S0175	FLUTAMIDE ORAL 125 MG		Not Cov	No	Not Cov	No		Not Cov	No
S0176	HYDROXYUREA ORAL 500 MG		Not Cov	No	Not Cov	No		Not Cov	No
S0177	LEVAMISOLE HYDROCHLORIDE ORAL 50 MG		Not Cov	No	Not Cov	No		Not Cov	No
S0178	LOMUSTINE ORAL 10 MG		Not Cov	No	Not Cov	No		Not Cov	No
S0179	MEGESTROL ACETATE ORAL 20 MG		Not Cov	No	Not Cov	No		Not Cov	No
S0182	PROCARBAZINE HYDROCHLORIDE ORAL 50 MG		Not Cov	No	Not Cov	No		Not Cov	No
S0183	PROCHLORPERAZINE MALEATE ORAL 5MG		Not Cov	No	Not Cov	No		Not Cov	No
S0187	TAMOXIFEN CITRATE ORAL 10 MG		Not Cov	No	Not Cov	No		Not Cov	No
S0189	TESTOSTERONE PELLETT 75 MG		Not Cov	No	Not Cov	No		Not Cov	No
S0190	MIFEPRISTONE ORAL 200 MG		No	No	Not Cov	No		Not Cov	No
S0191	MISOPROSTOL ORAL 200 MCG		No	No	Not Cov	No		Not Cov	No
S0194	DIALYSIS STRESS VITAMIN SUPL ORAL 100 CAPSULES		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S0197	PRENATAL VITAMINS 30-DAY SUPPLY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S0199	MED INDUCED AB ORAL INGESTION MED W SRVC AND SPL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S0201	PARTIAL HOSITALIZATION SERVICES UNDER 24 HR PER DIEM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Yes
S0207	PARAMEDIC INTERCEPT NON-HOS-BASED ALS SRVC NON-T		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S0208	PARAMEDIC INTERCPT HOS-BASE ALS SRVC NON-TRNSPRT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
S0209	WHEELCHAIR VAN MILEAGE PER MILE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S0215	NON-EMERGENCY TRANSPORTATION; PER MILE		Not Cov	Not Cov	Not Cov	Not Cov	Not Cov	Not Cov	Not Cov
S0220	MED CONF PHYS W TEAM HLTH PROF PT CARE; 30 MIN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
S0221	MED CONF PHYS W TEAM HLTH PROF PT CARE; 60 MIN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
S0250	COMP GERIATRIC ASSESS AND TX PLAN PRFRM ASSESS TEAM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S0255	BY NURSE SOCIAL WORKER OR OTHER DESIGNATED STAFF		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S0257	CNSL AND DISCUSS ADV DIRCTV EOL CARE PT AND SURROGATE		Not Cov	No	Not Cov	No		Not Cov	No
S0260	HISTORY AND PHYSICAL RELATED TO SURGICAL PROC		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S0265	GENETIC COUNSELING PHYS SUPERVISION EA 15 MINS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S0270	PHYSICIAN MGT PT HOME CARE STD MONTHLY CASE RATE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No

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S0271	PHYS MGT PT HOME CARE HOSPICE MONTHLY CASE RATE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S0272	PHYS MGT PT HOME CARE EPISODIC CARE MO CASE RATE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S0273	PHYS VST MEMBER HOME OUTSIDE CAPITATION ARRNGMNT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S0274	NP VST MEMBER HOME OUTSIDE CAPITATION ARRANGMENT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S0280	MEDICAL HOME PROG COMP CARE COORD INITIAL PLAN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S0281	MEDICAL HOME PROGRAM COMP CARE COORD MAINT PLAN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S0285	COLONOSCOPY CNSLT PRFRM PRI SCR COLONOSCOPY PROC		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S0302	CMPL EARLY PERIODIC SCREENING DX AND TX SERVICE		Not Cov	Not Cov	Not Cov	Not Cov	No	Not Cov	No
S0310	HOSPITALIST SERVICES		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S0311	COMP MGMT AND CARE COORD ADVANCED ILL PER CAL MO		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S0315	DISEASE MANAGEMENT PROGM; INIT ASSESS AND INIT PROGM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S0316	DZ MANAGEMENT PROGRAM FOLLOW-UP REASSESSMENT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S0317	DISEASE MANAGEMENT PROGRAM; PER DIEM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S0320	TEL CALLS RN TO DZ MGMT PROGM MEMB MONITOR; MO		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S0340	LIFESTYL MOD PROG MGMT COR ART DZ; LIFESTYL MOD		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S0341	LIFESTYL MOD PROG MGMT COR ART DZ; 2ND 3RD QTR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S0342	LIFESTYL MOD PROG MGMT COR ART DZ; 4TH QTR STAGE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S0353	TX PLANNING CARE COORDINATION MGMT CANCR INIT TX		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S0354	TX PLAN CARE COORD MGMT CA EST PT CHG REGIMEN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S0390	ROUTINE FOOT CARE; PER VISIT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S0395	IMPRESSION CASTING FOOT PERFORMED PRACTITIONER		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S0400	GLOBAL FEE XTRACORP SHOCK WAVE LITH KIDNEY STONE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S0500	DISPOSABLE CONTACT LENS PER LENS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S0504	SINGLE VISION PRESCRIPTION LENS PER LENS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S0506	BIFOCAL VISION PRESCRIPTION LENS PER LENS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S0508	TRIFOCAL VISION PRESCRIPTION LENS PER LENS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S0510	NON-PRESCRIPTION LENS PER LENS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
S0512	DAILY WEAR SPECIALTY CONTACT LENS PER LENS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S0514	COLOR CONTACT LENS PER LENS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
S0515	SCLERAL LENS LIQUID BANDAGE DEVICE PER LENS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No

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			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
S0516	SAFETY EYEGGLASS FRAMES		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
S0518	SUNGLASSES FRAMES		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
S0580	POLYCARBONATE LENS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S0581	NONSTANDARD LENS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S0590	INTEGRAL LENS SERVICE MISC SERVICES REPORTED SEP		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Yes
S0592	COMPREHENSIVE CONTACT LENS EVALUATION		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S0595	DISPNSING NEW SPECTACLE LENSES PT SUPPLIED FRAME		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S0596	PHAKIC INTRAOCULAR LENS CORRECT REFRACTIVE ERROR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
S0601	SCREENING PROCTOSCOPY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S0610	ANNUAL GYNECOLOGICAL EXAMINATION NEW PATIENT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S0612	ANNUAL GYNECOLOGICAL EXAMINATION EST PATIENT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S0613	ANNUAL GYN EXAM CLIN BREAST EXAM W O PELV EVAL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S0618	AUDIOMETRY FOR HEARING AID EVALUATION		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S0620	ROUTINE OPTH EXAM INCL REFRACTION; NEW PT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S0621	ROUTINE OPTH EXAM INCL REFRACTION; EST PT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S0622	PHYSICAL EXAM COLLEGE NEW OR ESTABLISHED PATIENT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
S0630	RMV SUTURES; PHYS NOT PHYS WHO ORIGLY CLOS WND		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S0800	LASER IN SITU KERATOMILEUSIS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
S0810	PHOTOREFRACTIVE KERATECTOMY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
S0812	PHOTOTHERAPEUTIC KERATECTOMY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
S1001	DELUXE ITEM PATIENT AWARE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
S1002	CUSTOMIZED ITEM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
S1015	IV TUBING EXTENSION SET		No	Not Cov	Not Cov	Not Cov		Not Cov	No
S1016	NON-PVC IV ADMN SET W RX THAT ARE NOT STABL PVC		No	Not Cov	Not Cov	Not Cov		Not Cov	No
S1030	CONT NONINVASIVE GLU MONITORING DEVICE PURCHASE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S1031	CONT NONINVAS GLU MON DEVC RENTAL SENSOR REPL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S1034	ARTIF PANCREAS DEVC SYS THAT CMNCT W ALL DEVC		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Yes
S1035	SENSOR; INVASV DSPBL USE ARTIF PANCREAS DEVC SYS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Yes
S1036	TRANSMITTER; EXT USE W ARTIF PANCREAS DEVC SYS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Yes
S1037	RECEIVER; EXTERNAL USE W ARTIF PANCREAS DEVC SYS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Yes
S1040	CRANIAL REMOLDING ORTHOTIC PED RIGID CUSTOM FAB		Not Cov	Yes	Not Cov	Yes		Not Cov	Yes
S2053	TRANSPLANTATION SMALL INTESTINE AND LIVER ALLOGRAFTS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Yes
S2054	TRANSPLANTATION OF MULTIVISCERAL ORGANS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Yes

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
S2055	HARVEST DONOR MX-VISCERAL ORGAN; CADVER DONOR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Yes
S2060	LOBAR LUNG TRANSPLANTATION		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Yes
S2061	DONOR LOBECTOMY FOR TRANSPLANTATION LIVING DONOR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Yes
S2065	SIMULTANEOUS PANCREAS KIDNEY TRANSPLANTATION		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Yes
S2066	BREAST RECON W GLUTEAL ART PERFORATOR FLAP UNI		Not Cov	No	Not Cov	No		Not Cov	No
S2067	BRST RECON 1 BRST DIEP FLAP(S) AND GAP FLAP(S) UNI		Not Cov	No	Not Cov	No		Not Cov	No
S2068	BREAST RECON DIEP SIEA FLAP AND CLOS DONR SITE UNI		Not Cov	No	Not Cov	No		Not Cov	No
S2070	CYSTO W URETERSCPY AND PYELSCPY;LASR TX URETRL CALC		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S2079	LAP ESOPHAGOMYOTOMY HELLER TYPE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S2080	LASER-ASSISTED UVULOPALATOPLASTY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S2083	ADJ GASTRIC BAND DIAM SUBQ PORT INJ ASPIR SALINE		Not Cov	No	Not Cov	No		Not Cov	Not Cov
S2095	TRNSCATH OCCL EMBOLIZ TUMR DESTRUC PERQ METH USI		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Yes
S2102	ISLET CELL TISS TRANSPLANT FROM PANC; ALLOGENEIC		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S2103	ADRENAL TISSUE TRANSPLANT TO BRAIN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S2107	ADOPTIVE IMMUNOTHERAPY PER COURSE OF TREATMENT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Yes
S2112	ARTHROSCOPY KNEE SURGICAL HARVESTING CARTILAGE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S2115	OSTEOTOMY PERIACETABULAR WITH INTERNAL FIXATION		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S2117	ARTHROEREISIS SUBTALAR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S2118	METL-ON-METL TOT HIP RESRFC ACETAB AND FEM CMPNT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S2120	LDL APHERES HEPARN-INDUCD XTRACORP LDL PRECIP		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S2140	CORD BLOOD HARVESTING TRANSPLANTATION ALLOGENEIC		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Yes
S2142	CORD BLD-DERIVED STEM-CELL TPLNT ALLOGENEIC		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Yes
S2150	BN MARROW BLD DERIVD STEM CELLS HARV TPLNT AND COMP;		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Yes
S2152	SOLID ORGAN; TRANSPLANTATION AND RELATED COMP		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Yes
S2202	ECHOSCLEROTHERAPY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S2205	MIN INVASV DIR CAB SURG; ART GFT 1 COR ART GFT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S2206	MIN INVASV DIR CAB SURG; ART GFT 2 COR ART GFT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S2207	MIN INVAS DIR CAB; VEN GFT ONLY 1 COR VEN GFT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S2208	MIN INVAS DIR CAB SURG; 1 ART AND VEN GFT 1 VEN GFT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No

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			Outpatient		ASC	Office Setting			
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S2209	MIN INVASV DIR CAB SURG; 2 ART GFT AND 1 VENUS GFT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S2225	MYRINGOTOMY LASER-ASSISTED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S2230	IMPL MAGNET CMPNT SEMI-IMPL HEARING DEVC MID EAR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S2235	IMPLANTATION OF AUDITORY BRAIN STEM IMPLANT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S2260	INDUCED ABORTION 17 TO 24 WEEKS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
S2265	INDUCED ABORTION 25 TO 28 WEEKS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
S2266	INDUCED ABORTION 29 TO 31 WEEKS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
S2267	INDUCED ABORTION 32 WEEKS OR GREATER		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
S2300	ARTHROSCOPE SHLDR SURG; W THERML-INDUCD CPSLORR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S2325	HIP CORE DECOMPRESSION		Not Cov	No	Not Cov	No		Not Cov	No
S2340	CHEMODENERVATION ABDUCTOR MUSCLE VOCAL CORD		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S2341	CHEMODENERVATION ADDUCTOR MUSCLE VOCAL CORD		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S2342	NASAL ENDOSCOPIC POSNASAL ENDOSCOPIC POSTOP DEBR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S2348	DECOMP PERQ INTERVERT DISC RF ENERGY 1 MX LUMB		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S2350	DISKECT ANT W OSTEOPHYTECT; LUMBAR 1 INTERSPACE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S2351	DISKECT ANT W OSTEOPHYTECT; LUMB EA ADD INTRSP		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S2400	REPAIR CONGN DIAPHRAGMAT HERNIA FETUS IN UTERO		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S2401	REPAIR URINARY TRACT OBSTRUCTION FETUS IN UTERO		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S2402	REPAIR CCAM IN THE FETUS PROCEDURE IN UTERO		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S2403	REPAIR EPS IN FETUS PROCEDURE PERFORMED IN UTERO		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S2404	REPAIR MYELOMENINGOCELE FETUS PROC PRFRM UTERO		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S2405	REPR SACROCOC TERATOMA FETUS IN UTERO		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S2409	REP CONGN MALFORM FETUS PROC PRFRM UTERO NOC		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S2411	FETOSCOPIC LASER THERAPY FOR TREATMENT-TTTS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S2900	SURG TECHNIQUES REQUIRING USE ROBOTIC SURG SYS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S3000	DIABETIC INDICATOR; RETINAL EYE EXAM DILATED BIL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S3005	PERFORMANCE MSR EVAL PT SELF ASSESS DEPRESSION		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S3600	STAT LABORATORY REQUEST		Not Cov	No	Not Cov	No		Not Cov	No
S3601	EMERG STAT LAB CHARGE PT HOMBOUND RESID NRS FACL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S3620	NEWBORN METABOLIC SCREENING PANEL SPEC-STATE		Not Cov	No	Not Cov	No		Not Cov	No
S3630	EOSINOPHIL COUNT BLOOD DIRECT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
S3645	HIV-1 ANTIBODY TESTING ORAL MUCOSAL TRANSUDATE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S3650	SALIVA TEST HORMONE LEVEL; DURING MENOPAUSE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S3652	SALIVA TST HORMONE LEVEL; ASSESS PRTERM LABR RISK		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S3655	ANTISPERM ANTIBODIES TEST		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S3708	GASTROINTESTINAL FAT ABSORPTION STUDY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S3722	DOSE OPTIMIZ AUC ANALY INFUSIONAL 5-FLUOROURACIL	No, pregnancy related if covered	Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Yes
S3800	GENETIC TESTING AMYOTROPHIC LATERAL SCLEROSIS	No, pregnancy related if covered	Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Yes
S3840	DNA ANALYSIS GERMLINE MUTATS RET PROTO-ONCOGENE	No, pregnancy related if covered	Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Yes
S3841	GENETIC TESTING FOR RETINOBLASTOMA	No, pregnancy related if covered	Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Yes
S3842	GENETIC TESTING FOR VON HIPPEL-LINDAU DISEASE	No, pregnancy related if covered	Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Yes
S3844	DNA ANALY CONNEXIN 26 GENE CONGN PFND DEAFNESS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S3845	GENETIC TESTING FOR ALPHA-THALASSEMIA		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S3846	GENETIC TESTING HEMOGLOBIN E BETA-THALASSEMIA		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S3849	GENETIC TESTING FOR NIEMANN-PICK DISEASES		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S3850	GENETIC TESTING FOR SICKLE CELL ANEMIA		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S3852	DNA ANALY APOE EPSILON 4 ALLELE SUSECPT ALZS DZ	No, pregnancy related if covered	Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Yes
S3853	GENETIC TESTING FOR MYOTONIC MUSCULAR DYSTROPHY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S3854	GENE EXPRESSION PROFILING PANL MGMT BREAST CA TX	No, pregnancy related if covered	Not Cov	Not Cov	Not Cov	Not Cov		No	Yes
S3861	GENETIC TESTING SCN5A AND VARIANTS FOR SUSPECTED BS	No, pregnancy related if covered	Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Yes
S3865	COMP GENE SEQ ANALY HYPERTROPHIC CARDIOMYOPATHY	No, pregnancy related if covered	Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Yes
S3866	GENETIC ANALY GENE MUTAT HCM INDIV KNOWN HCM FAM	No, pregnancy related if covered	Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Yes
S3870	CGH MICROARRAY TEST DD ASD AND OR INTELL DISABILTY	No, pregnancy related if covered	Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Yes
S3900	SURFACE ELECTROMYOGRAPHY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S3902	BALLISTOCARDIOGRAM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S3904	MASTERS TWO STEP		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S4005	INTERIM LABOR FACILITY GLOBAL		Not Cov	No	Not Cov	No		Not Cov	No
S4011	IN VITRO FERTILIZATION;		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
S4013	CMPL CYCLE GAMETE INTRAFALLOPIAN TRNSF CASE RATE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
S4014	CMPL CYCLE ZYGOTE INTRAFALLOPIAN TRNSF CASE RATE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
S4015	CMPL IN VITRO FERTILIZATION CYCLE CASE RATE NOS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
S4016	FROZEN IN VITRO FERTILIZATION CYCLE CASE RATE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
S4017	INCPL CYCLE TX CANCELED PRIOR TO STIM CASE RATE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
S4018	FRZN EMB TRANS PROC CANCEL BEFR TRANS CASE RATE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
S4020	IVF PROC CANCELLED BEFORE ASPIRATION CASE RATE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
S4021	IVF PROC CANCELLED AFTER ASPIRATION CASE RATE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
S4022	ASSISTED OOCYTE FERTILIZATION CASE RATE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
S4023	DONOR EGG CYCLE INCOMPLETE CASE RATE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
S4025	DONOR SERVICES IN VITRO FERTILIZATION CASE RATE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
S4026	PROCUREMENT OF DONOR SPERM FROM SPERM BANK		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
S4027	STORAGE OF PREVIOUSLY FROZEN EMBRYOS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
S4028	MICROSURGICAL EPIDIDYMAL SPERM ASPIRATION		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
S4030	SPERM PROCUREMENT AND CRYOPRES SERVICES; INIT VISIT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
S4031	SPERM PROCUREMENT AND CRYOPRES SRVC; SUBSQT VISIT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
S4035	STIM INTRAUTERINE INSEMINATION CASE RATE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
S4037	CRYOPRESERVED EMBRYO TRANSFER CASE RATE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
S4040	MON AND STORAGE CRYOPRESERVED EMBRYOS PER 30 DAYS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
S4042	MANAGEMENT OF OVULATION INDUCTION PER CYCLE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
S4981	INSRTION LEVONORGESTREL-RELEASING INTRAUTERN SYS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S4989	CONTRACEPTIVE IUD INCLUDING IMPLANTS AND SUPPLIES		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S4990	NICOTINE PATCHES LEGEND		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S4991	NICOTINE PATCHES NON-LEGEND		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S4993	CONTRACEPTIVE PILLS FOR BIRTH CONTROL		Not Cov	No	Not Cov	No		Not Cov	No
S4995	SMOKING CESSATION GUM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S5000	PRESCRIPTION DRUG GENERIC		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S5001	PRESCRIPTION DRUG BRAND NAME		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S5010	5PCT DEXTROSE AND 0.45PCT NORMAL SALINE 1000 ML		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S5012	5PCT DEXTROSE WITH POTASSIUM CHLORIDE 1000 ML		No	Not Cov	Not Cov	Not Cov		Not Cov	No
S5013	5PCT DXTROS 0.45PCT NL SALINE KCL AND MGSO4 1000 ML		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S5014	5PCT DEXTROSE 0.45PCT NL SALINE W KCL AND MGSO4 1500 ML		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S5035	HOME INFUS THERAPY ROUTINE SERVICE INFUS DEVICE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S5036	HOME INFUSION THERAPY REPAIR OF INFUSION DEVICE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S5100	DAY CARE SERVICES ADULT; PER 15 MINUTES		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
S5101	DAY CARE SERVICES ADULT; PER HALF DAY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
S5102	DAY CARE SERVICES ADULT; PER DIEM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
S5105	DAY CARE SRVC CENTER-BASED; SRVC NOT W PROGM FEE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S5108	HOME CARE TRAINING HOME CARE CLIENT PER 15 MIN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S5109	HOME CARE TRAINING HOME CARE CLIENT PER SESSION		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S5110	HOME CARE TRAINING FAMILY; PER 15 MINUTES		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
S5111	HOME CARE TRAINING FAMILY; PER SESSION		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Yes
S5115	HOME CARE TRAINING NON-FAMILY; PER 15 MINUTES		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S5116	HOME CARE TRAINING NON-FAMILY; PER SESSION		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S5120	CHORE SERVICES; PER 15 MINUTES		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
S5121	CHORE SERVICES; PER DIEM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
S5125	ATTENDANT CARE SERVICES; PER 15 MINUTES		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
S5126	ATTENDANT CARE SERVICES; PER DIEM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S5130	HOMEMAKER SERVICE NOS; PER 15 MINUTES		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Yes
S5131	HOMEMAKER SERVICE NOS; PER DIEM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
S5135	COMPANION CARE ADULT ; PER 15 MINUTES		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Yes
S5136	COMPANION CARE ADULT ; PER DIEM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
S5140	FOSTER CARE ADULT; PER DIEM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
S5141	FOSTER CARE ADULT; PER MONTH		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
S5145	FOSTER CARE THERAPEUTIC CHILD; PER DIEM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
S5146	FOSTER CARE THERAPEUTIC CHILD; PER MONTH		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
S5150	UNSKILLED RESPITE CARE NOT HOSPICE; PER 15 MIN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
S5151	UNSKILLED RESPITE CARE NOT HOSPICE; PER DIEM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Yes
S5160	EMERGENCY RESPONSE SYSTEM; INSTALLATION AND TESTING		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
S5161	EMERGENCY RESPONSE SYSTEM; SERVICE FEE PER MONTH		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
S5162	EMERGENCY RESPONSE SYSTEM; PURCHASE ONLY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
S5165	HOME MODIFICATIONS; PER SERVICE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
S5170	HOME DELIV MEALS INCLUDING PREPARATION; PER MEAL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
S5175	LAUNDRY SERVICE EXTERNAL PROFESSIONAL; PER ORDER		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
S5180	HOME HEALTH RESPIRATORY THERAPY INIT EVALUATION		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
S5181	HOME HEALTH RESPIRATORY THERAPY NOS PER DIEM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
S5185	MED REMINDER SERVICE NON-FACE-TO-FACE; MONTH		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
S5190	WELLNESS ASSESSMENT PERFORMED BY NONPHYSICIAN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S5199	PERSONAL CARE ITEM NOS EACH		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
S5497	HOME INFUS TX CATH CARE MAINT NOC; PER DIEM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S5498	HOME INFUS TX CATH CARE MAINT SIMPLE PER DIEM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S5501	HOME INFUS TX CATH CARE MAINT COMPLEX PER DIEM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S5502	HOME INFUS TX CATH CARE IMPL ACCESS DEVC DIEM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S5517	HIT ALL SPL NECES RESTOR CATH PATENCY DECILOT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S5518	HOME INFUSION THERAPY ALL SPL NECES CATH REPAIR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S5520	HOME INFUSION TX ALL SPL NECES PICC LINE INSERT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S5521	HOME INFUS TX ALL SPL NECES MIDLINE CATH INSERT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S5522	HOME INFUS TX INSERT PICC NRS SRVC ONLY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S5523	HOME INFUS TX INSERT MIDLINE CVC NRS SRVC ONLY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S5550	INSULIN RAPID ONSET; 5 UNITS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
S5551	INSULIN MOST RAPID ONSET; 5 UNITS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S5552	INSULIN INTERMEDIATE ACTING; 5 UNITS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S5553	INSULIN LONG ACTING; 5 UNITS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S5560	INSULIN DELIVERY DEVICE REUSABLE PEN; 1.5 ML SZ		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S5561	INSULIN DELIVERY DEVICE REUSABLE PEN; 3 ML SIZE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S5565	INSULIN CARTRIDGE INSULIN DEVC NOT PUMP; 150 U		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S5566	INSULIN CARTRIDGE INSULIN DEVC NOT PUMP; 300 U		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S5570	INSULIN DELIV DEVICE DISPOSABLE PEN; 1.5 ML SIZE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S5571	INSULIN DELIV DEVICE DISPOSABLE PEN; 3 ML SIZE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S8030	SCLERAL APPLICATION TANTALUM RING PROTON BEAM TX		No	No	Not Cov	No		Not Cov	No
S8035	MAGNETIC SOURCE IMAGING		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S8037	MAGNETIC RESONANCE CHOLANGIOPANCREATOGRAPHY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S8040	TOPOGRAPHIC BRAIN MAPPING		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S8042	MAGNETIC RESONANCE IMAGING LOW-FIELD		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Yes
S8055	ULTRASOUND GUID MULTIFETAL PG RDUC TECH CMPNT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S8080	SCINTIMAMMOGRAPHY UNI INCL SUPPLY RADIOPHARM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Yes
S8085	F-18 FDG IMAG USING 2-HEAD COINCIDENCE DETCT SYS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S8092	ELECTRON BEAM COMPUTED TOMOGRAPHY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S8096	PORTABLE PEAK FLOW METER		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S8097	ASTHMA KIT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S8100	HOLDING CHAMB SPACR W INHAL NEBULIZR; W O MASK		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S8101	HOLDING CHAMB SPACR W AN INHAL NEBULIZR; W MASK		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S8110	PEAK EXPIRATORY FLOW RATE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S8120	O2 CONTENTS GASEOUS 1 UNIT EQULS 1 CUBIC FOOT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S8121	OXYGEN CONTENTS LIQUID 1 UNIT EQUALS 1 POUND		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S8130	INTERFERENTIAL CURRENT STIMULATOR 2 CHANNEL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S8131	INTERFERENTIAL CURRENT STIMULATOR 4 CHANNEL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S8185	FLUTTER DEVICE		Not Cov	No	Not Cov	No		Not Cov	No
S8186	SWIVEL ADAPTOR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S8189	TRACHEOSTOMY SUPPLY NOT OTHERWISE CLASSIFIED		Not Cov	Yes	Not Cov	Yes		Not Cov	Yes
S8210	MUCUS TRAP		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S8265	HABERMAN FEEDER FOR CLEFT LIP PALATE		Not Cov	No	Not Cov	No		Not Cov	No
S8270	ENURESIS ALARM AUDITORY BUZZER AND VIBRATION DEVC		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S8301	INFECTION CONTROL SUPPLIES NOS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S8415	SUPPLIES FOR HOME DELIVERY OF INFANT		Not Cov	No	Not Cov	No		Not Cov	No
S8420	GRADIENT PRESSURE AID SLEEVE AND GLOVE CUSTOM MADE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S8421	GRADIENT PRESSURE AID SLEEVE AND GLOVE READY MADE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
S8422	GRADIENT PRESSURE AID SLEEVE CUSTOM MED WEIGHT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S8423	GRADIENT PRESSURE AID SLEEVE CUSTOM HEAVY WEIGHT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S8424	GRADIENT PRESSURE AID SLEEVE READY MADE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S8425	GRADIENT PRESSURE AID GLOVE CUSTOM MEDIUM WEIGHT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S8426	GRADIENT PRESSURE AID GLOVE CUSTOM HEAVY WEIGHT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S8427	GRADIENT PRESSURE AID GLOVE READY MADE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S8428	GRADIENT PRESSURE AID GAUNTLET READY MADE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S8429	GRADIENT PRESSURE EXTERIOR WRAP		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S8430	PADDING FOR COMPRESSION BANDAGE ROLL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S8431	COMPRESSION BANDAGE ROLL		Not Cov	No	Not Cov	No		Not Cov	No
S8450	SPLINT PREFABRICATED DIGIT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S8451	SPLINT PREFABRICATED WRIST OR ANKLE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S8452	SPLINT PREFABRICATED ELBOW		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S8460	CAMISOLE POST-MASTECTOMY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S8490	INSULIN SYRINGES		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S8930	E-STIM AUR ACUPUNCT PNTS; EA 15 MIN 1-1 CNTC PT	MP: limit 12 No PA	Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Yes
S8940	EQUESTRIAN HIPPO THERAPY PER SESSION		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S8948	APPLIC MODAL 1 MORE AREAS; LW-LEVL LASR; EA 15 M		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S8950	COMPLEX LYMPHEDEMA THERAPY EACH 15 MINUTES		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S8990	PHYSICAL MANIP TX MAINT RATHER THAN RESTORATION		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S8999	RESUSCITATION BAG		Not Cov	No	Not Cov	No		Not Cov	No
S9001	HOME UTERINE MONITOR W WO ASSOC NURSING SERVICES		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S9007	ULTRAFILTRATION MONITOR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S9024	PARANASAL SINUS ULTRASOUND		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S9025	OMNICARDIOGRAM CARDIOINTEGRAM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S9034	EXTRACORPOREAL SHOCKWAVE LITHOTRIPSY GALL STONES		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S9055	PROCUREN OTH GROWTH FCT PREP PROMOTE WND HEALING		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S9056	COMA STIMULATION PER DIEM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S9061	HOME ADMIN AEROSOLIZED DRUG THERAPY PER DIEM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S9083	GLOBAL FEE URGENT CARE CENTERS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S9088	SERVICES PROVIDED IN AN URGENT CARE CENTER		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S9090	VERTEBRAL AXIAL DECOMPRESSION PER SESSION		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S9097	HOME VISIT FOR WOUND CARE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S9098	HOME VISIT PHOTOTHERAPY SERVICES PER DIEM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S9110	TELEMONITORING PT HOME ALL NEC EQUIP; PER MONTH		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
S9117	BACK SCHOOL PER VISIT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
S9122	HOM HLTH AIDE CERT NURSE ASST PROV CARE HOM;-HR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Yes
S9123	NURSING CARE THE HOME; REGISTERED NURSE PER HOUR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Yes
S9124	NURSING CARE IN THE HOME; BY LPN PER HOUR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Yes
S9125	RESPIRE CARE IN THE HOME PER DIEM		Not Cov	Not Cov	Not Cov	Not Cov	No	Not Cov	No
S9126	HOSPICE CARE IN THE HOME PER DIEM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S9127	SOCIAL WORK VISIT IN THE HOME PER DIEM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S9128	SPEECH THERAPY IN THE HOME PER DIEM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Yes
S9129	OCCUPATIONAL THERAPY IN THE HOME PER DIEM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Yes
S9131	PHYSICAL THERAPY; IN THE HOME PER DIEM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Yes
S9140	DIABETIC MGMT PROGM F U VISIT NON-MD PROVIDER		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S9141	DIABETIC MANAGEMENT PROGM F U VISIT MD PROVIDER		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S9145	INSULIN PUMP INITIATION INSTRUCTION USE OF PUMP		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S9150	EVALUATION BY OCCULARIST		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S9152	SPEECH THERAPY RE-EVALUATION	Limit 1 per year	Not Cov	No	Not Cov	No		Not Cov	No
S9208	HOME MANAGEMENT OF PRETERM LABOR PER DIEM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S9209	HOME MGMT PRETERM PRMAT RUPTURE MEMBRANES DIEM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S9211	HOME MGMT GESTATIONAL HYPERTENSION; PER DIEM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S9212	HOME MANAGEMENT POSTPARTUM HYPERTENSION PER DIEM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S9213	HOME MANAGEMENT OF PREECLAMPSIA; PER DIEM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S9214	HOME MANAGEMENT OF GESTATIONAL DIABETES; DIEM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S9325	HIT PAIN MANAGEMENT INFUSION; PER DIEM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S9326	HIT CONT PAIN MGMT INFUS; CARE COORD PER DIEM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S9327	HIT INTERMIT PAIN MGMT INFUS; CARE COORD DIEM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S9328	HIT IMPLANTED PUMP PAIN MGMT INFUS; PER DIEM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S9329	HOME INFUSION TX CHEMOTHERAPY INFUSION; PER DIEM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S9330	HIT CONT CHEMOTHAPY INFUS; CARE COORD PER DIEM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S9331	HIT INTERMIT CHEMOTHAPY INFUS; CARE COORD-DIEM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S9335	HOM TX HD; ADMIN PROF PHRM SRVC SPL AND EQP PER DIEM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S9336	HOME INFUS TX CONT ANTICOAGULANT INFUS TX DIEM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S9338	HIT IMMUTHAPY; CARE COORDINATION PER DIEM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S9339	HOME THERAPY; PERITONEAL DIALYSIS PER DIEM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S9340	HOME THERAPY; ENTERAL NUTRITION; PER DIEM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
S9341	HOME TX; ENTERAL NUTRITION VIA GRAVITY; PER DIEM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S9342	HOME TX; ENTERAL NUTRITION VIA PUMP; PER DIEM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S9343	HOME TX; ENTERAL NUTRITION VIA BOLUS; PER DIEM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S9345	HOME INFUSION TX ANTI-HEMOPHILIC AGENT; PER DIEM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S9346	HOME INFUS TX ALPHA-1-PROTEINASE INHIBITOR; DIEM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S9347	HIT UNINTRPED LNG-TERM CNTRL RATE IV SUBQ;-DIEM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S9348	HIT SYMPATHOMIMETIC INOTROPIC AGENT PER DIEM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S9349	HOME INFUSION THERAPY TOCOLYTIC; PER DIEM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S9351	HOME INFUSION THERAPY CONT ANTI-EMETIC; PER DIEM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S9353	HOME INFUSION THERAPY CONT INSULIN; PER DIEM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S9355	HOME INFUSION THERAPY CHELATION; PER DIEM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S9357	HOME INFUSION TX ENZYME REPL IV TX; PER DIEM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S9359	HIT ANTI-TUMOR NECROS FACTOR IV TX; PER DIEM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S9361	HOME INFUSION THERAPY DIURETIC IV TX; PER DIEM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S9363	HIT ANTI-SPASMOTIC TX; CARE SPL AND EQP PER DIEM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S9364	HIT TOTAL PARENTERAL NUTRITION; CARE COORD DIEM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S9365	HOM INFUS TX TPN; 1 LITER-DAY DIEM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S9366	HIT TPN; OVER 1 LITER BUT NOT OVER 2 LITERS-DA-DIEM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S9367	HIT TPN; OVER 2 LITERS BUT NOT OVER 3 LITERS-DA -DIEM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S9368	HIT TOTAL PARENTERAL NUTRIT; OVER 3 LITERS-DA -DIEM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S9370	HOME THERAPY INTERMITTENT ANTI-EMETIC INJ TX;		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S9372	HOME THERAPY; INTERMITTENT ANTICOAGULANT INJ TX;		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S9373	HOME INFUSION THERAPY HYDRATION TX; PER DIEM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S9374	HOME INFUSION THERAPY HYDRATION TX; 1 LITER DAY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S9375	HIT HYDRATION TX; OVER 1 LITER NO OVER 2 LITERS DAY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S9376	HIT HYDRATION TX; OVER 2 LITERS NO OVER 3 LITERS DAY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S9377	HOME INFUS THERAPY HYDRATION TX; OVER 3 LITERS DAY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S9379	HOME INFUSION THERAPY INFUSION THERAPY NOC; DIEM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S9381	DEL SRVC HI RISK REQ ESCORT EXTRA PROTECT VISIT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S9401	ANTICOAGULAT CLIN INCL ALL SERV NO LAB PER SESS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S9430	PHARMACY COMPOUNDING AND DISPENSING SERVICES	Family Planning Only	Not Cov	No	Not Cov	No		Not Cov	No

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			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
S9433	MED FOOD NUTR CMPL ORAL 100PCT NUTRITNL INTAKE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S9434	MOD SOLID FOOD SUPPLEMENTS INBORN ERRORS METAB		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S9435	MEDICAL FOODS FOR INBORN ERRORS OF METABOLISM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S9436	CHILDBIRTH PREP LAMAZE CLASS NON-MD PER SESS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S9437	CHILDBRTH REFRESH CLASSES NON-PHYSICIAN PER SESS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S9438	CESAREAN BIRTH CLASSES NON-PHYSICIAN PER SESSION		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S9439	VBAC CLASSES NON-PHYSICIAN PER SESSION		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S9441	ASTHMA ED NON-PHYSICIAN PROVIDER PER SESSION		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S9442	BIRTHING CLASSES NON-PHYSICIAN PROVIDER-SESSION		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S9443	LACTATION CLASSES NON-PHYSICIAN PROVIDER-SESSION		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S9444	PARENTING CLASSES NON-PHYSICIAN PER SESS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S9445	PT ED NOC NON-PHYSICIAN PPT ED NOC NON-PHYSICIAN		Not Cov	Not Cov	Not Cov	Not Cov	No	Not Cov	No
S9446	PT ED NOC NON-PHYSICIAN PROVIDER GROUP SESSION		Not Cov	Not Cov	Not Cov	Not Cov	No	Not Cov	No
S9447	INFANT SAFETY CLASSES NON-PHYSICIAN PER SESSION		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S9449	WEIGHT MANAGEMENT CLASSES NON-PHYS PER SESSION		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S9451	EXERCISE CLASSES NON-PHYSICIAN PER SESSION		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S9452	NUTRITION CLASSES NON-PHYSICIAN PER SESSION		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S9453	SMOKING CESSATION CLASSES NON-PHYSICIAN PER SESS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S9454	STRESS MGMT CLASSES NON-PHYSICIAN PER SESSION		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S9455	DIABETIC MANAGEMENT PROGRAM GROUP SESSION		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S9460	DIABETIC MANAGEMENT PROGRAM NURSE VISIT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S9465	DIABETIC MANAGEMENT PROGRAM DIETITIAN VISIT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S9470	NUTRITIONAL COUNSELING DIETITIAN VISIT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Yes
S9472	CARD REHAB PROGM NON-PHYSICIAN PROVIDER PER DIEM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S9473	PULM REHAB PROGM NON-PHYSICIAN PROVIDER PER DIEM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S9474	ENTRSTML TX REGISTERED NRS CERT ENTRSTML TX-DIEM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S9475	AMB SET SUBSTANCE ABS TX DTOXFICATION SRVC-DIEM		Not Cov	Not Cov	Not Cov	Not Cov	No	Not Cov	No
S9476	VESTIBULAR REHAB PROGM NON-PHYSICIAN PROV-DIEM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S9480	INTENSIVE OP PSYCHIATRIC SERVICES PER DIEM		Not Cov	Not Cov	Not Cov	Not Cov	No	Not Cov	No
S9482	FAMILY STABILIZATION SERVICES PER 15 MINUTES		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
S9484	CRISIS INTERVEN MENTAL HEALTH SERVICES PER HOUR		Not Cov	Not Cov	Not Cov	Not Cov	No	Not Cov	No
S9485	CRISIS INTERVENT MENTAL HEALTH SERV		Not Cov	Not Cov	Not Cov	Not Cov	Yes	Not Cov	Yes
S9490	HIT CORTICOSTEROID INFUS; ADMN SRVC PROF PHRM SR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S9494	HIT ABX ANTIVIRAL ANTIFUNGAL THERAPY; PER DIEM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S9497	HIT ABX ANTIVIRAL ANTIFUNGAL TX; Q3 HRS DIEM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S9500	HIT ABX ANTIVIRAL ANTIFUNGAL TX; Q24 HRS DIEM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S9501	HIT ABX ANTIVIRAL ANTIFUNGAL TX; Q12 HRS DIEM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S9502	HIT ABX ANTIVIRAL ANTIFUNGAL; Q8 HRS PER DIEM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S9503	HIT ANTIBIOTC ANTIVIRAL ANTIFUNGAL; Q6 HRS; DIEM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S9504	HIT ABX ANTIVIRAL ANTIFUNGAL; Q4 HRS; PER DIEM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S9529	HOME OR SKILLED NURSING FACILITY PATIENT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S9537	HOME TX HEMATOPOIETIC HORMONE INJ TX;PER DIEM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S9538	HOME TRANSFUSION OF BLOOD PRODUCT; PER DIEM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S9542	HOME INJ TX NOC W CARE COORDINATION PER DIEM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S9558	HIT GROWTH HORMONE W CARE COORDINATION PER DIEM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S9559	HIT INTERFERON W CARE COORDINATION PER DIEM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S9560	HOME INJECTABLE THERAPY; HORMONAL THERAPY DIEM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S9562	HOM INJ TX PALIVIZUMAB W ADMN PHRM CARE-PER DIEM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S9590	HOM TX IRRIG TX; W ADMN PHRM SRVC CARE-PER DIEM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S9810	HOME THERAPY; NOT OTHERWISE CLASSIFIED PER HOUR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S9900	SRVC JOURNAL-LISTED CS PRACT HEALING PER DIEM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S9901	SERVICES BY A JOURNAL-LISTED CS NURSE PER HR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S9960	AMB SERVICE AIR NONEMERGENCY 1 WAY FIXED WING	Bill through DSHS	Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Yes
S9961	AMB SERVICE AIR NONEMERGENCY 1 WAY ROTARY WING	Bill through DSHS	Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Yes
S9970	HEALTH CLUB MEMBERSHIP ANNUAL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S9975	TRANSPLANT REL LODG MEALS AND TRNSPRT PER DIEM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S9976	LODGING PER DIEM NOT OTHERWISE SPECIFIED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S9977	MEALS PER DIEM NOT OTHERWISE SPECIFIED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Yes
S9981	MEDICAL RECORDS COPYING FEE ADMINISTRATIVE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S9982	MEDICAL RECORDS COPYING FEE PER PAGE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S9986	NOT MEDICALLY NECESSARY SERVICE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
S9988	SERV PROVIDED AS PART OF PHASE 1 CLINICAL TRIAL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Yes
S9989	SRVC PROVIDED OUTSIDE UNITED STATES OF AMERICA		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
S9990	SERVICES PROVIDED AS PART PHASE II CLIN TRIAL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
S9991	SERVICES PROVIDED AS PART PHASE III CLIN TRIAL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
S9992	TRNSPRT COSTS CLIN TRIAL PRTCP AND ONE CAREGIVER		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
S9994	LODNG COSTS CLINICAL TRIAL PRTCP AND ONE CAREGIVR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
S9996	MEALS CLIN TRIAL PRTCP AND ONE CAREGIVER COMPANION		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
S9999	SALES TAX		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
T1000	PRIV DUTY INDEPEND NRS SERVICE LIC UP 15 MIN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
T1001	NURSING ASSESSMENT EVALUATION		Not Cov	Not Cov	Not Cov	Not Cov	No	Not Cov	No
T1002	RN SERVICES UP TO 15 MINUTES		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
T1003	LPN LVN SERVICES UP TO 15 MINUTES		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Yes
T1004	SERVICES QUALIFIED NURSING AIDE UP TO 15 MINUTES		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
T1005	RESPIRE CARE SERVICES UP TO 15 MINUTES		Not Cov	Not Cov	Not Cov	Not Cov	No	Not Cov	No
T1006	ALCOHOL AND OR SUBSTANCE ABS SRVC FAM COUPLE CNSL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
T1007	ALCOHOL AND SUBSTNC ABS SRVC TX PLAN DVLP AND MOD		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
T1009	CHILD SIT-CHILD IND REC ALCOHL AND SUBSTNC ABS SRVC		Not Cov	Not Cov	Not Cov	Not Cov	No	Not Cov	No
T1010	MEALS FOR IND REC ALCOHOL AND SUBSTANCE ABUSE SRVC		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
T1012	ALCOHOL AND SUBSTANCE ABS SERVICES SKILLS DVLP		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
T1013	SIGN LANGUAGE ORAL INTEPR SERVICES PER 15 MIN		Not Cov	Not Cov	Not Cov	Not Cov	No	Not Cov	No
T1014	TELEHLTH TRNSMS-MIN PROFESSIONAL SRVC BILL SEP		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
T1015	CLINIC VISIT ENCOUNTER ALL-INCLUSIVE		Not Cov	Not Cov	Not Cov	Not Cov	No	Not Cov	No
T1016	CASE MANAGEMENT EACH 15 MINS		Not Cov	Not Cov	Not Cov	Not Cov	No	Not Cov	No
T1017	TARGETED CASE MANAGEMENT EACH 15 MINS		Not Cov	Not Cov	Not Cov	Not Cov	No	Not Cov	No
T1018	SCHOOL-BASED IND EDUCATION PROGRAM SERV BUNDLED		Not Cov	Not Cov	Not Cov	Not Cov	No	Not Cov	Not Cov
T1019	PERSONAL CARE SERVICES PER 15 MINUTES		Not Cov	Not Cov	Not Cov	Not Cov	No	Not Cov	Not Cov
T1020	PERSONAL CARE SERVICES PER DIEM		Not Cov	No	Not Cov	No	No	Not Cov	Not Cov
T1021	HOME HEALTH AIDE CERTIFIED NURSE ASST PER VISIT		Not Cov	Not Cov	Not Cov	Not Cov	No	Not Cov	No
T1022	CONTRACT HOME HEALTH SRVC UNDER CONTRACT DAY		Not Cov	Not Cov	Not Cov	Not Cov	No	Not Cov	No
T1023	SCR CONSIDER IND PARTICIP SPEC PROG PROJ TX PER		Not Cov	Not Cov	Not Cov	Not Cov	No	Not Cov	Yes
T1024	EVAL AND TX TEAM PROV CARE MX SEV HANDICAP CHLD PER		Not Cov	Not Cov	Not Cov	Not Cov	No	Not Cov	No
T1025	INTEN MXDISCIPLIN SRVC CHILD W CMLPX IMPAIR DIEM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Yes
T1026	INTEN MXDISCIPLIN SRVC CHILD W CMLPX IMPAIR HR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Yes
T1027	FAMILY TRAIN AND COUNSEL CHILD DEVELOPMENT 15 MINS		Not Cov	Not Cov	Not Cov	Not Cov	No	Not Cov	Yes
T1028	ASSESSMENT HOME PHYSICAL AND FAMILY ENVIRONMENT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Yes
T1029	COMP ENVIR LEAD INVESTIGAT NOT W LAB ANALY-DWELL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
T1030	NURSING CARE THE HOME REGISTERED NURSE PER DIEM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Yes
T1031	NURSING CARE IN THE HOME BY LPN PER DIEM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Yes
T1040	MEDICAID CERT COM BEHAVIORAL HLTH CLINIC SRVC PD		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
T1041	MEDICAID CERT COM BEHAVIORAL HLTH CLINIC SRVC PM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
T1502	ADMIN ORL IM AND SUBQ MED HLTH CARE AGCY PROF-VISIT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
T1503	ADMN MED NOT ORAL AND OR INJ HLTH AGENCY PROF VST		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
T1505	ELECTRONIC MEDICATION COMPLIANCE MANAGE DEVC NOS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
T1999	MISC TX ITEMS AND SPL RETAIL PURCHASE NOC		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
T2001	NON-EMERG TRANSPORTATION; PT ATTENDANT ESCORT		Not Cov	Not Cov	Not Cov	Not Cov	Not Cov	Not Cov	Not Cov
T2002	NON-EMERGENCY TRANSPORTATION; PER DIEM		Not Cov	Not Cov	Not Cov	Not Cov	No	Not Cov	Not Cov
T2003	NON-EMERGENCY TRANSPORTATION; ENCOUNTER TRIP		Not Cov	Not Cov	Not Cov	Not Cov	No	Not Cov	Not Cov
T2004	NON-EMERG TRNSPRT; COMMERCIAL CARRIER MULTI-PASS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
T2005	NONEMERGENCY TRANSPORTATION; STRETCHER VAN		Not Cov	Not Cov	Not Cov	Not Cov	No	Not Cov	No
T2007	TRNSPRT WAIT TIME AIR AMB AND NON-EMERG VEH 1 2 HR		Not Cov	Not Cov	Not Cov	Not Cov	No	Not Cov	Not Cov
T2010	PASRR LEVEL I IDENTIFICATION SCREEN PER SCREEN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
T2011	PASRR LEVEL II EVALUATION PER EVALUATION		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
T2012	HABILITATION EDUCATIONAL WAIVER; PER DIEM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
T2013	HABILITATION EDUCATIONAL WAIVER; PER HOUR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
T2014	HABILITATION PREVOCAIONAL WAIVER; PER DIEM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
T2015	HABILITATION PREVOCAIONAL WAIVER; PER HOUR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
T2016	HABILITATION RESIDENTIAL WAIVER; PER DIEM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
T2017	HABILITATION RESIDENTIAL WAIVER; PER 15 MINUTES		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
T2018	HABILITATION SUPP EMPLOYMENT WAIVER; PER DIEM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
T2019	HABILITATION SUPP EMPLOYMENT WAIVER; PER 15 MIN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
T2020	DAY HABILITATION WAIVER; PER DIEM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
T2021	DAY HABILITATION WAIVER; PER 15 MINUTES		Not Cov	Not Cov	Not Cov	Not Cov	No	Not Cov	Not Cov
T2022	CASE MANAGEMENT; PER MONTH		Not Cov	Not Cov	Not Cov	Not Cov	No	Not Cov	No
T2023	TARGETED CASE MANAGEMENT; PER MONTH		Not Cov	Not Cov	Not Cov	Not Cov	No	Not Cov	No
T2024	SERVICE ASSESSMENT PLAN CARE DEVELOPMENT WAIVER		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
T2025	WAIVER SERVICES; NOT OTHERWISE SPECIFIED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
T2026	SPECIALIZED CHILDCARE WAIVER; PER DIEM		Not Cov	Not Cov	Not Cov	Not Cov	No	Not Cov	Not Cov
T2027	SPECIALIZED CHILDCARE WAIVER; PER 15 MINUTES		Not Cov	Not Cov	Not Cov	Not Cov	No	Not Cov	Not Cov
T2028	SPECIALIZED SUPPLY NOT OTH SPECIFIED WAIVER		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
T2029	SPECIALIZED MEDICAL EQUIPMENT NOS WAIVER		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
T2030	ASSISTED LIVING WAIVER; PER MONTH		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
T2031	ASSISTED LIVING WAIVER; PER DIEM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
T2032	RESIDENTIAL CARE NOS WAIVER; PER MONTH		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
T2033	RESIDENTIAL CARE NOS WAIVER; PER DIEM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
T2034	CRISIS INTERVENTION WAIVER; PER DIEM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
T2035	UTIL SRVC SUPP MED EQP AND ASSTIV TECH DEVC WAIVER		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
T2036	THERAPEUTIC CAMPING OVERNIGHT WAIVER; EA SESSION		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
T2037	THERAPEUTIC CAMPING DAY WAIVER; EACH SESSION		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
T2038	COMMUNITY TRANSITION WAIVER; PER SERVICE		Not Cov	Not Cov	Not Cov	Not Cov	No	Not Cov	Not Cov
T2039	VEHICLE MODIFICATIONS WAIVER; PER SERVICE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
T2040	FINANCIAL MGMT SELF-DIRECTED WAIVER; PER 15 MIN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Yes
T2041	SUPPORTS BROKERAGE SELF-DIRECTED WAIVER; 15 MIN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
T2042	HOSPICE ROUTINE HOME CARE; PER DIEM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
T2043	HOSPICE CONTINUOUS HOME CARE; PER HOUR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
T2044	HOSPICE INPATIENT RESPITE CARE; PER DIEM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
T2045	HOSPICE GENERAL INPATIENT CARE; PER DIEM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
T2046	HOSPICE LONG TERM CARE RM AND BD ONLY PER DIEM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
T2048	BHVAL HEALTH; LONG-TERM CARE RES W ROOM AND BD-DIEM		Not Cov	Not Cov	Not Cov	Not Cov	No	Not Cov	No
T2049	NON-EMERG TRNSPRT; STRETCHER VAN MILEAGE; MILE		Not Cov	Not Cov	Not Cov	Not Cov	No	Not Cov	No
T2101	HUMAN BREAST MILK PROCESSING STORAGE AND DSTRB ONLY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
T4521	ADLT SIZED DISPBL INCONT PROD BRF DIAPER SM EA		Not Cov	No	Not Cov	No		Not Cov	Not Cov
T4522	ADLT SIZED DISPBL INCONT PROD BRF DIAPER MED EA		Not Cov	No	Not Cov	No		Not Cov	Not Cov
T4523	ADLT SIZED DISPBL INCONT PROD BRF DIAPER LG EA		Not Cov	No	Not Cov	No		Not Cov	Not Cov
T4524	ADLT SZD DISPBL INCONT PROD BRF DIAPER X-LG EA		Not Cov	No	Not Cov	No		Not Cov	Not Cov
T4525	ADLT SZD DISPBL INCONT PROD UNDWEAR PULLON SM EA		Not Cov	No	Not Cov	No		Not Cov	Not Cov
T4526	ADLT SZD DISPBL INCONT PROD UNDWEAR MED EA		Not Cov	No	Not Cov	No		Not Cov	Not Cov
T4527	ADLT SZD DISPBL INCONT PROD UNDWEAR PULLON LG EA		Not Cov	No	Not Cov	No		Not Cov	Not Cov
T4528	ADLT SZD DISPBL INCONT PROD UNDWEAR XTRA LG EA		Not Cov	No	Not Cov	No		Not Cov	Not Cov
T4529	PED SZD DISPBL INCONT PROD BRF DIAPER SM MED EA		Not Cov	No	Not Cov	No		Not Cov	Not Cov
T4530	PED SZD DISPBL INCONT PROD BRF DIAPER LG SZ EA		Not Cov	No	Not Cov	No		Not Cov	Not Cov
T4531	PED SZD DISPBL INCONT PROD UNDWEAR SM MED EA		Not Cov	No	Not Cov	No		Not Cov	Not Cov
T4532	PED SZD DISPBL INCONT PROD UNDWEAR PULLON LG EA		Not Cov	No	Not Cov	No		Not Cov	Not Cov
T4533	YOUTH SIZED DISPBL INCONT PRODUCT BRF DIAPER EA		Not Cov	No	Not Cov	No		Not Cov	Not Cov

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
T4534	YOUTH SZD DISPBL INCONT PROD UNDWEAR PULLON EA		Not Cov	No	Not Cov	No		Not Cov	Not Cov
T4535	DISPBL LINER SHIELD GUARD PAD UNDGRMNT INCONT EA		Not Cov	No	Not Cov	No		Not Cov	Not Cov
T4536	INCONT PROD PROTVE UNDWEAR PULLON REUSBL SIZE EA		Not Cov	No	Not Cov	No		Not Cov	Not Cov
T4537	INCONT PROD PROTVE UNDPAD REUSABLE BED SIZE EA		Not Cov	No	Not Cov	No		Not Cov	Not Cov
T4538	DIAPER SERVICE REUSABLE DIAPER EACH DIAPER		Not Cov	No	Not Cov	No		Not Cov	Not Cov
T4539	INCONTINENCE PRODUCT DIAPER BRF REUSABLE SIZE EA		Not Cov	No	Not Cov	No		Not Cov	Not Cov
T4540	INCONT PROD PROTVE UNDPAD REUSABLE CHAIR SIZE EA		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
T4541	INCONTINENCE PRODUCT DISPOSABLE UNDPAD LARGE EA		Not Cov	No	Not Cov	No		Not Cov	Not Cov
T4542	INCONTINENCE PRODUCT DISPBL UNDPAD SMALL SIZE EA		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
T4543	ADULT SIZE DISP INCONTINENCE PROD ABOVE XL EA		Not Cov	No	Not Cov	No		Not Cov	Not Cov
T4544	ADULT SIZE DISPBL INCONT PULLUP ABVE EXTRA LG EA		Not Cov	No	Not Cov	No		Not Cov	Not Cov
T4545	INCONTINENCE PRODUCT DISPOSABLE PENILE WRAP EACH		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
T5001	POSITIONING SEAT PERSON SPECIAL ORTHOPEDIC NEED		Not Cov	No	Not Cov	No		Not Cov	Not Cov
T5999	SUPPLY NOT OTHERWISE SPECIFIED		Not Cov	Yes	Not Cov	Yes		Not Cov	Yes
V2020	FRAMES PURCHASES		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
V2025	DELUXE FRAME		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
V2100	SPHERE SINGLE VISION PLANO PLUS - 4.00 PER LENS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
V2101	SPHERE SINGLE VISION PLUS - 4.12 PLUS - 7.00D PER LENS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
V2102	SPHERE SINGLE VISN PLUS - 7.12 PLUS - 20.00D PER LENS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
V2103	1 VISN PLANO TO PLUS -4.00D SPHER 0.12-2.00D CYL EA		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
V2104	1 VISN PLANO- PLUS - 4.00D SPHER 2.12-4.00D CYL EA		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
V2105	1 VISN PLANO- PLUS - 4.00D SPHER 4.25-6.00D CYL EA		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
V2106	1 VISN PLANO- PLUS - 4.00D SPHER OVER 6.00D CYL-LENS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
V2107	1 VISN PLUS - 4.25- PLUS 7.00 SPHER 0.12-2.00D CYL EA		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
V2108	1 VISN PLUS -4.25D- PLUS -7.00D SPHER 2.12-4.00D CYL EA		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
V2109	1 VISN PLUS - 4.25- PLUS - 7.00D SPHER 4.25-6.00D CYL EA		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
V2110	1 VISN PLUS - 4.25-7.00D SPHERE OVER 6.00D CYL EA		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
V2111	1 VISN PLUS -7.25- PLUS -12.00D SPHER 0.25-2.25D CYL EA		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
V2112	1 VISN PLUS - 7.25 PLUS - 12.00D SPH 2.25D-400D CYL EA		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
V2113	1 VISN PLUS - 7.25 PLUS - 12.00D SPH 4.25-6.00D CYL EA		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
V2114	SINGLE VISION SPHERE OVER PLUS - 12.00D PER LENS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
V2115	LENTICULAR PER LENS SINGLE VISION		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
V2118	ANISEIKONIC LENS SINGLE VISION		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
V2121	LENTICULAR LENS PER LENS SINGLE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
V2199	NOT OTHERWISE CLASSIFIED SINGLE VISION LENS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Yes
V2200	SPHERE BIFOCL PLANO TO PLUS MINUS 4.00D PER LENS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
V2201	SPHERE BIFOCLAL PLUS - 4.12 TO PLUS - 7.00D PER LENS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
V2202	SPHERE BIFOCL PLUS - 7.12 TO PLUS - 20.00D PER LENS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
V2203	BIFOCL PLANO PLUS - 4.00D SPHER 0.12-2.00D CYL-EA		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
V2204	BIFOCL PLANO PLUS - 4.00D SPHER 2.12-4.00D CYL-EA		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
V2205	BIFOCL PLANO PLUS - 4.00D SPHER 4.25-6.00D CYL-EA		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
V2206	BIFOCL PLANO PLUS - 4.00D SPHER OVR 6.00D CYL-EA		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
V2207	BIFOCL PLUS -4.25- PLUS -7.00D SPHER 0.12-2.00D CYL-EA		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
V2208	BIFOCL PLUS -4.25- PLUS -7.00D SPHER 2.12-4.00D CYL-EA		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
V2209	BIFOCL PLUS -4.25- PLUS -7.00D SPHER 4.25-6.00D CYL-EA		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
V2210	BIFOCL PLUS -4.25- PLUS -7.00D SPHER OVR 6.00D CYL-LENS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
V2211	BIFOCL PLUS -7.25- PLUS -12.00D SPHER 0.25-2.25D CYL-EA		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
V2212	BIFOCL PLUS -7.25- PLUS -12.00D SPHER 2.25-4.00D CYL-EA		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
V2213	BIFOCL PLUS -7.25- PLUS -12.00D SPHER 4.25-6.00D CYL-EA		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
V2214	BIFOCLAL SPHERE OVER PLUS -12.00D PER LENS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
V2215	LENTICULAR PER LENS BIFOCLAL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
V2218	ANISEIKONIC PER LENS BIFOCLAL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
V2219	BIFOCLAL SEG WIDTH OVER 28MM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
V2220	BIFOCLAL ADD OVER 3.25D		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
V2221	LENTICULAR LENS PER LENS BIFOCLAL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
V2299	SPECIALTY BIFOCLAL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
V2300	SPHERE TRIFOCLAL PLANO OR PLUS -4.00D PER LENS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
V2301	SPHERE TRIFOCLAL PLUS - 4.12 TO PLUS - 7.00D PER LENS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
V2302	SPHERE TRIFOCLAL PLUS - 7.12 TO PLUS - 20.00 PER LENS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
V2303	TRIFOCLAL PLANO PLUS -4.00D SPHER 0.12-2.00D CYL EA		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
V2304	TRIFOCLAL PLANO PLUS -4.00D SPHER 2.25-4.00D CYL EA		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No

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V2305	TRIFOCL PLANO PLUS -4.00D SPHER 4.25-6.00 CYL EA		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
V2306	TRIFOCL PLANO PLUS -4.00D SPHER OVR 6.00D CYL EA		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
V2307	TRIFOCL PLUS -4.25- PLUS -7.00D SPHER 0.12-2.00D CYL EA		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
V2308	TRIFOCL PLUS -4.25- PLUS -7.00D SPHER 2.12-4.00D CYL EA		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
V2309	TRIFOCL PLUS -4.25- PLUS -7.00D SPHER 4.25-6.00D CYL EA		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
V2310	TRIFOCL PLUS -4.25- PLUS -7.00D SPHER OVR 6.00D CYL EA		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
V2311	TRIFOCL PLUS -7.25- PLUS -12.00D SPHER 0.25-2.25D CYL E		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
V2312	TRIFOCL PLUS -7.25- PLUS -12.00D SPHER 2.25-4.00D CYL E		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
V2313	TRIFOCL PLUS -7.25- PLUS -12.00D SPHER 4.25-6.00D CYL EA		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
V2314	TRIFOCL SPHER OVER PLUS -12.00D PER LENS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
V2315	LENTICULAR PER LENS TRIFOCAL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
V2318	ANISEIKONIC LENS TRIFOCAL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
V2319	TRIFOCAL SEG WIDTH OVER 28 MM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
V2320	TRIFOCAL ADD OVER 3.25D		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
V2321	LENTICULAR LENS PER LENS TRIFOCAL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
V2399	SPECIALTY TRIFOCAL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
V2410	VARIABLE ASPHRCTY LENS 1 FULL FLD GLASS PLASTC LNS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
V2430	VARIABLE ASPHRCTY LENS BIFOCL FULL FIELD-LENS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
V2499	VARIABLE SPHERICITY LENS OTHER TYPE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
V2500	CONTACT LENS PMMA SPHERICAL PER LENS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
V2501	CONTACT LENS PMMA TORIC PRISM BALLAST PER LENS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
V2502	CONTACT LENS PMMA BIFOCL PER LENS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
V2503	CONTACT LENS PMMA COLOR VISION DEFIC PER LENS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
V2510	CONTACT LENS GAS PERMEABLE SPHERICAL PER LENS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
V2511	CNTC LENS GAS PERMEABLE TORIC PRISM BALLST-LENS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
V2512	CONTACT LENS GAS PERMEABLE BIFOCL PER LENS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
V2513	CNTC LENS GAS PERMEABLE EXTENDED WEAR PER LENS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
V2520	CONTACT LENS HYDROPHILIC SPHERICAL PER LENS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
V2521	CNTC LENS HYDROPHIL TORIC PRISM BALLST PER LENS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
V2522	CONTACT LENS HYDROPHILIC BIFOCL PER LENS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
V2523	CONTACT LENS HYDROPHILIC EXTENDED WEAR PER LENS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
V2530	CONTACT LENS SCLERAL GAS IMPERMEABLE PER LENS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Yes
V2531	CONTACT LENS SCLERAL GAS PERMEABLE PER LENS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Yes
V2599	CONTACT LENS OTHER TYPE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
V2600	HAND HELD LOW VISION AND OTH NON SPECTACL MOUNT AIDS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
V2610	SINGLE LENS SPECTACLE MOUNTED LOW VISION AIDS		Not Cov	Not Cov	Not Cov	Not Cov		No	Not Cov
V2615	TELESCOPIC AND OTH COMPOUND LENS SYSTEM		Not Cov	Not Cov	Not Cov	Not Cov		No	Not Cov

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
V2623	PROSTHETIC EYE PLASTIC CUSTOM		Not Cov	No	Not Cov	No		No	No
V2624	POLISHING RESURFACING OF OCULAR PROSTHESIS		Not Cov	No	Not Cov	No		No	No
V2625	ENLARGEMENT OF OCULAR PROSTHESIS		Not Cov	No	Not Cov	No		No	No
V2626	REDUCTION OF OCULAR PROSTHESIS		Not Cov	No	Not Cov	No		No	No
V2627	SCLERAL COVER SHELL		Not Cov	No	Not Cov	No		No	No
V2628	FABRICATION AND FITTING OF OCULAR CONFORMER		Not Cov	No	Not Cov	No		No	No
V2629	PROSTHETIC EYE OTHER TYPE		Not Cov	No	Not Cov	No		No	No
V2630	ANTERIOR CHAMBER INTRAOCULAR LENS		No	No	No	No		No	No
V2631	IRIS SUPPORTED INTRAOCULAR LENS		No	No	No	No		No	No
V2632	POSTERIOR CHAMBER INTRAOCULAR LENS		No	No	No	No		No	No
V2700	BALANCE LENS PER LENS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
V2702	DELUXE LENS FEATURE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
V2710	SLAB OFF PRISM GLASS OR PLASTIC PER LENS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
V2715	PRISM PER LENS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
V2718	PRESS-ON LENS FRESNELL PRISM PER LENS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
V2730	SPECIAL BASE CURVE GLASS OR PLASTIC PER LENS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
V2744	TINT PHOTOCHROMATIC PER LENS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
V2745	ADD LENS; TINT COLOR SOLID EXCLD PHOTOCHRMATC		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
V2750	ANTIREFLECTIVE COATING PER LENS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
V2755	U-V LENS PER LENS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
V2756	EYE GLASS CASE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
V2760	SCRATCH RESISTANT COATING PER LENS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
V2761	MIRROR COAT TYPE SOLID GRADENT EQ LENS MATL-LENS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
V2762	POLARIZATION ANY LENS MATERIAL PER LENS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
V2770	OCCLUDER LENS PER LENS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
V2780	OVERSIZE LENS PER LENS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
V2781	PROGRESSIVE LENS PER LENS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
V2782	LENS INDX 1.54-1.65 PLSTC 1.60-1.79 GLASS LENS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
V2783	LENS INDX GRT THN EQ 1.66 PLSTC GRT THN EQ 1.80 GLASS LENS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
V2784	LENS POLYCARBONATE OR EQUAL ANY INDEX PER LENS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
V2785	PROCESSING PRES AND TRANSPORTING CORNEAL TISSUE		No	Not Cov	No	Not Cov		No	No
V2786	SPECIALTY OCCUPATIONAL MULTIFOCAL LENS PER LENS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
V2787	ASTIGMATISM CORRECTING FUNCTION INTRAOCULAR LENS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
V2788	PRESBYOPIA CORRECTION FUNCTION INTRAOCULAR LENS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
V2790	AMNIOTIC MEMBRANE SURGICAL RECONSTRUCT PER PROC		No	Not Cov	Not Cov	Not Cov		Not Cov	No
V2797	VISN SPL ACSS AND SRVC CMPNT ANOTHER HCPCS CODE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Yes
V2799	VISION ITEM OR SERVICE MISCELLANEOUS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Yes
V5008	HEARING SCREENING	Covered age 20 and under	Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
V5010	ASSESSMENT FOR HEARING AID		Not Cov	No	Not Cov	No		Not Cov	Not Cov
V5011	FITTING ORIENTATION CHECKING OF HEARING AID		Not Cov	No	Not Cov	No		Not Cov	Not Cov

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			Outpatient		ASC	Office Setting			
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V5014	REPAIR MODIFICATION OF A HEARING AID		Not Cov	No	Not Cov	No		Not Cov	Not Cov
V5020	CONFORMITY EVALUATION		Not Cov	No	Not Cov	No		Not Cov	Not Cov
V5030	HEARING AID MONAURAL BODY WORN AIR CONDUCTION		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
V5040	HEARING AID MONAURAL BODY WORN BONE CONDUCTION		Not Cov	No	Not Cov	No		Not Cov	Not Cov
V5050	HEARING AID MONAURAL IN THE EAR		Not Cov	No	Not Cov	No		Not Cov	Not Cov
V5060	HEARING AID MONAURAL BEHIND THE EAR		Not Cov	No	Not Cov	No		Not Cov	Not Cov
V5070	GLASSES AIR CONDUCTION		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
V5080	GLASSES BONE CONDUCTION		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
V5090	DISPENSING FEE UNSPECIFIED HEARING AID		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
V5095	SEMI-IMPLANTABLE MIDDLE EAR HEARING PROSTHESIS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
V5100	HEARING AID BILATERAL BODY WORN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
V5110	DISPENSING FEE BILATERAL		Not Cov	No	Not Cov	No		Not Cov	Not Cov
V5120	BINAURAL BODY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
V5130	BINAURAL IN THE EAR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
V5140	BINAURAL BEHIND THE EAR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
V5150	BINAURAL GLASSES		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
V5160	DISPENSING FEE BINAURAL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
V5171	HEARING AID CONTRALAT ROUT DEVICE MONAURAL ITE		Yes	Yes	Not Cov	Yes		Not Cov	Yes
V5172	HEARING AID CONTRALAT ROUT DEVICE MONAURAL ICT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Yes
V5181	HEARING AID CONTRALATERAL ROUT DVC MONAURAL BTE		Yes	Yes	Not Cov	Yes		Not Cov	Yes
V5190	HEARING AID CONTRALATERAL RTE MONAURAL GLASSES		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
V5200	DISPENSING FEE CONTRALATERAL MONAURAL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
V5211	HEARING AID CONTRALAT ROUT SYS BINAURAL ITE ITE		Yes	Yes	Not Cov	Yes		Not Cov	Yes
V5212	HEARING AID CONTRALAT ROUT SYS BINAURAL ITE ITC		Yes	Not Cov	Not Cov	Not Cov		Not Cov	Yes
V5213	HEARING AID CONTRALAT ROUT SYS BINAURAL ITE BTE		Yes	Yes	Not Cov	Yes		Not Cov	Yes
V5214	HEARING AID CONTRALAT ROUT SYS BINAURAL ITC ITC		Yes	Not Cov	Not Cov	Not Cov		Not Cov	Yes
V5215	HEARING AID CONTRALAT ROUT SYS BINAURAL ITC BTE		Yes	Yes	Not Cov	Yes		Not Cov	Yes
V5221	HEARING AID CONTRALAT ROUT SYS BINAURAL BTE BTE		Yes	Yes	Not Cov	Yes		Not Cov	Yes
V5230	HEARING AID CONTRALAT RTE SYS BINAURAL GLASSES		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
V5240	DISPENSING FEE CONTRALATERAL RTE SYSTEM BINAURAL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
V5241	DISPENSING FEE MONAURAL HEARING AID ANY TYPE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
V5242	HEARING AID ANALOG MONAURAL CIC		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
V5243	HEARING AID ANALOG MONAURAL ITC		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
V5244	HEARING AID DIGTLLY PROG ANALOG MONAURAL CIC		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
V5245	HEARING AID DIGTLLY PROG ANALOG MONAURAL ITC		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
V5246	HEARING AID DIGTLLY PROG ANALOG MONAURAL ITE		Not Cov	No	Not Cov	No		Not Cov	Not Cov

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
V5247	HEARING AID DIGTLLY PROG ANALOG MONAURAL BTE		Not Cov	No	Not Cov	No		Not Cov	Not Cov
V5248	HEARING AID ANALOG BINAURAL CIC		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
V5249	HEARING AID ANALOG BINAURAL ITC		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
V5250	HEARING AID DIGTLLY PROG ANALOG BINAURAL CIC		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
V5251	HEARING AID DIGTLLY PROG ANALOG BINAURAL ITC		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
V5252	HEARING AID DIGITALLY PROGRAMMABLE BINAURAL ITE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
V5253	HEARING AID DIGITALLY PROGRAMMABLE BINAURAL BTE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
V5254	HEARING AID DIGITAL MONAURAL CIC		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
V5255	HEARING AID DIGITAL MONAURAL ITC		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
V5256	HEARING AID DIGITAL MONAURAL ITE		Not Cov	No	Not Cov	No		Not Cov	Not Cov
V5257	HEARING AID DIGITAL MONAURAL BTE		Not Cov	No	Not Cov	No		Not Cov	Not Cov
V5258	HEARING AID DIGITAL BINAURAL CIC		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
V5259	HEARING AID DIGITAL BINAURAL ITC		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
V5260	HEARING AID DIGITAL BINAURAL ITE		Not Cov	No	Not Cov	No		Not Cov	Not Cov
V5261	HEARING AID DIGITAL BINAURAL BTE		Not Cov	No	Not Cov	No		Not Cov	Not Cov
V5262	HEARING AID DISPOSABLE ANY TYPE MONAURAL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
V5263	HEARING AID DISPOSABLE ANY TYPE BINAURAL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
V5264	EAR MOLD INSERT NOT DISPOSABLE ANY TYPE		Not Cov	No	Not Cov	No		Not Cov	Not Cov
V5265	EAR MOLD INSERT DISPOSABLE ANY TYPE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
V5266	BATTERY FOR USE IN HEARING DEVICE		Not Cov	No	Not Cov	No		Not Cov	Not Cov
V5267	HEARING AID ALD SUPP ACCESS NOT OTHERWISE SPEC		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
V5268	ASSTIVE LISTENING DEVICE TEL AMPLIFIER ANY TYPE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
V5269	ASSISTIVE LISTENING DEVICE ALERTING ANY TYPE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
V5270	ASSTIVE LISTENING DEVICE TELEVISN AMPLIFIER TYPE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
V5271	ASSTIVE LISTENING DEVC TELEVISN CAPTION DECODER		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
V5272	ASSISTIVE LISTENING DEVICE TDD		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
V5273	ASSTIVE LISTENING DEVICE USE W COCHLEAR IMPLANT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
V5274	ASSISTIVE LEARNING DEVICE NOS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
V5275	EAR IMPRESSION EACH		Not Cov	No	Not Cov	No		Not Cov	Not Cov
V5281	ASSIST LIST DEVC PERS FM DM SYS MONAURL ANY TYPE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
V5282	ASSIST LIST DEVC PERS FM DM SYS BINAURL ANY TYPE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
V5283	ASSIST LIST DEVC PERS FM DM NCK LOOP INDUCT RECV		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
V5284	ASSIST LIST DEVICE PERS FM DM EAR LEVEL RECEIVER		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
V5285	ASSIST LIST DEVC PERS FM DM DIR AUDIO INPUT RECV		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
V5286	ASSIST LISTEN DEVC PERS BLUE TOOTH FM DM RECEIVR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
V5287	ASSISTIVE LISTENING DEVC PERS FM DM RECEIVER NOS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
V5288	ASSIST LISTEN DEVC PERS FM DM TRANSMITTER ALD		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
V5289	ASSIST LIST DEVC PERS FM DM ADPTR BOOT CPLG RECV		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
V5290	ASSIST LISTEN DEVC TRANSMITT MICROPHONE ANY TYPE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
V5298	HEARING AID NOT OTHERWISE CLASSIFIED		Not Cov	Yes	Not Cov	Yes		Not Cov	Not Cov
V5299	HEARING SERVICE MISCELLANEOUS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
V5336	REPAIR MOD AUGMENTATIV COMMUNICAT SYSTEM DEVICE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
V5362	SPEECH SCREENING		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
V5363	LANGUAGE SCREENING		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
V5364	DYSPHAGIA SCREENING		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
Q4194	NOVACHOR PER SQ CM		Yes	Not Cov	Not Cov	Not Cov		Yes	Yes
0042T	CEREBRAL PERFUSION ANALYS CT W BLOOD FLOW AND VOLUME		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
0054T	CPTR-ASST MUSCSKEL NAVIGJ ORTHO FLUOR IMAGES		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Not Cov
0055T	CPTR-ASST MUSCSKEL NAVIGJ ORTHO CT MRI		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Not Cov
0058T	CRYOPRESERVATION REPRODUCTIVE TISSUE OVARIAN		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Not Cov
0071T	US ABLATJ UTERINE LEIOMYOMATA UNDER 200 CC TISSUE		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Not Cov
0072T	US ABLATJ UTERINE LEIOMYOMAT OR MOREEQUAL 200 CC TISS		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Not Cov
0075T	TCAT PLMT XTTC VRT CRTD STENT RS AND I PRQ 1ST VSL		Not Cov	Yes	Not Cov	Yes		Yes	Not Cov
0076T	TCAT PLMT XTTC VRT CRTD STENT RS AND IPRQ EA VSL		Not Cov	Yes	Not Cov	Yes		Yes	Not Cov
0085T	BREATH TEST HEART TRANSPLANT REJECTION		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
0095T	RMVL TOT DISC ARTHRP ANT APPR CRV EA NTRSPC		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Not Cov
0098T	REVJ TOT DISC ARTHRP ANT APPR CRV EA NTRSPC		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Not Cov
0100T	PLMT SCJNCL RTA PROSTH AND PLS AND IMPLTJ INTRA-OC RTA		Not Cov	Not Cov	Not Cov	Not Cov		No	Not Cov
0101T	EXTRCORPL SHOCK WAVE MUSCSKELE NOS HIGH ENERGY		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Not Cov
0102T	EXTRCRPL SHOCK WAVE W ANES LAT HUMERL EPICONDYLE		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Not Cov
0106T	QUANT SENSORY TEST AND INTERPJ XTR W TOUCH STIMULI		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Not Cov
0107T	QUANT SENSORY TEST AND INTERPJ XTR W VIBRJ STIMULI		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Not Cov
0108T	QUANT SENSORY TEST AND INTERPJ XTR W COOL STIMULI		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Not Cov
0109T	QUANT SENAORY TEST AND INTERPJ XTR W HT-PN STIMULI		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Not Cov
0110T	QUANT SENSORY TEST AND INTERPJ XTR OTHER STIMULI		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Not Cov
0111T	LONG-CHAIN OMEGA-3 FATTY ACIDS RBC MEMBS		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Not Cov
0126T	COMMON CAROTID INTIMA MEDIA THICKNESS STUDY		Yes	Yes	Not Cov	Yes		Yes	Not Cov
0163T	TOT DISC ARTHRP ANT APPR DSKC PREP LMBR EA		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Not Cov
0164T	RMVL TOT DISC ARTHRP ANT APPR LMBR EA NTRSPC		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Not Cov

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
0165T	REVJ TOT DISC ARTHRP ANT APPR LMBR EA NTRSPC		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Not Cov
0174T	CAD CHEST RADIOGRAPH CONCURRENT W INTERPRETATION		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Not Cov
0175T	CAD CHEST RADIOGRAPH REMOTE FROM PRIMARY INTERPJ		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Not Cov
0184T	RECTAL TUMOR EXCISION TRANSANAL ENDOSCOPIC		Yes	Yes	Not Cov	Yes		Yes	Not Cov
0191T	ANT SEGMENT INSERTION DRAINAGE W O RESERVOIR INT		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Not Cov
0198T	MEAS OCULAR BLOOD FLOW REPEAT IO PRES SAMP W I AND R		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Not Cov
0200T	PERQ SAC AGMNTJ UNI W WO BALO MCHNL DEV 1 OR GRT NDL		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Not Cov
0201T	PERQ SAC AGMNTJ BI W WO BALO MCHNL DEV 2 OR GRT NDLS		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Not Cov
0202T	POST VERT ARTHRPLSTY W WO BONE CEMENT 1 LUMB LVL		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Not Cov
0205T	IV CATH CORONARY VESSEL GRAFT SPECTROSCOPY EA VSL		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Not Cov
0206T	CPTR DBS ALYS MLT CYCLS CAR ELEC DTA 2 OR GRT ECG LDS		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Not Cov
0207T	EVAC MEIBOMIAN GLNDS AUTO HT AND INTMT PRESS UNI		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Not Cov
0208T	PURE TONE AUDIOMETRY AUTOMATED AIR ONLY		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Not Cov
0209T	PURE TONE AUDIOMETRY AUTOMATED AIR AND BONE		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Not Cov
0210T	SPEECH AUDIOMETRY THRESHOLD AUTOMATED		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Not Cov
0211T	SPEECH AUDIOM THRESHLD AUTO W SPEECH RECOGNITION		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Not Cov
0212T	COMPRE AUDIOM THRESHOLD EVAL AND SPEECH RECOG		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Not Cov
0213T	NJX DX THER PARAVERT FCT JT W US CER THOR 1 LVL		Yes	Yes	Not Cov	Yes		Yes	Not Cov
0214T	NJX DX THER PARAVERT FCT JT W US CER THOR 2ND LVL		Yes	Yes	Not Cov	Yes		Yes	Not Cov
0215T	NJX PARAVERTBRL FACET JT W US CER THOR 3RD AND OVER LVL		Yes	Yes	Not Cov	Yes		Yes	Not Cov
0216T	NJX DX THER PARAVERT FCT JT W US LUMB SAC 1 LVL		Yes	Yes	Not Cov	Yes		Yes	Not Cov
0217T	NJX DX THER PARAVERT FCT JT W US LUMB SAC LVL 2		Yes	Yes	Not Cov	Yes		Yes	Not Cov
0218T	NJX PARAVERTBRL FCT JT W US LUMB SAC 3RD AND OVER LVL		Yes	Yes	Not Cov	Yes		Yes	Not Cov
0219T	PLMT POST FACET IMPLANT UNI BI W IMG AND GRFT CERV		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Not Cov
0220T	PLMT POST FACET IMPLT UNI BI W IMG AND GRFT THOR		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Not Cov
0221T	PLMT POST FACET IMPLT UNI BI W IMG AND GRFT LUMB		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Not Cov
0222T	PLACE POSTERIOR INTRAFACET IMPLANT ADDL SEGMENT		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Not Cov
0228T	NJX ANES STEROID TFRML EDRL W US CER THOR 1 LVL		Yes	Yes	Not Cov	Yes		Yes	Not Cov

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
0229T	NJX ANES STERD TFRML EDRL W US CER THOR EA ADDL		Yes	Yes	Not Cov	Yes		Yes	Not Cov
0230T	NJX ANES STEROID TFRML EDRL W US LUM SAC 1 LVL		Yes	Yes	Not Cov	Yes		Yes	Not Cov
0231T	NJX ANES STEROID TFRML EDRL W US LUM SAC EA ADDL		Yes	Yes	Not Cov	Yes		Yes	Not Cov
0232T	NJX PLTLT PLASMA W IMG HARVEST PREPARATION		Not Cov	Not Cov	Not Cov	Not Cov		No	No
0234T	TRLUML PERIPHERAL ATHERECTOMY RENAL ARTERY EA		Yes	Yes	Not Cov	Yes		Yes	Not Cov
0235T	TRLUML PERIPHERAL ATHERECTOMY VISCERAL ARTERY EA		Yes	Yes	Not Cov	Yes		Yes	Not Cov
0236T	TRLUML PERIPH ATHRC W RS AND I ABDOM AORTA		Yes	Yes	Not Cov	Yes		Yes	No
0237T	TRLUML PERIPH ATHRC W RS AND I BRCHIOCPHL EA VSL		Yes	Yes	Not Cov	Yes		Yes	No
0238T	TRLUML PERIPHERAL ATHERECTOMY ILIAC ARTERY EA		Yes	Yes	Yes	Yes		Yes	No
0249T	LIGATION HEMORRHOID BUNDLE W US		Not Cov	Not Cov	Not Cov	Not Cov		Yes	No
0253T	INSERT ANT SGM DRAINAGE DEV W O RESERVR INT APPR		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Not Cov
0254T	EVASC RPR ILAC ART BIFUR ENDGRFT CATHJ RS AND I UNI		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Not Cov
0263T	AUTO BONE MARRW CELL RX COMPLT BONE MARRW HARVST		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Not Cov
0264T	AUTO BONE MARRW CELL RX COMP W O BONE MAR HARVST		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Not Cov
0265T	BONE MAR HARVST ONLY FOR INTMUSC AUTOLO CELL RX		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Not Cov
0266T	IM REPL CARTD SINUS BAROREFLX ACTIV DEV TOT SYST		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Not Cov
0267T	IM REPL CARTD SINS BAROREFLX ACTIV DEV LEAD ONLY		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Not Cov
0268T	IM REPL CARTD SINS BARREFLX ACT DEV PLS GEN ONLY		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Not Cov
0269T	REV REMVL CARTD SINS BARREFLX ACT DEV TOT SYSTEM		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Not Cov
0270T	REV REMVL CARTD SINS BARREFLX ACT DEV LEAD ONLY		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Not Cov
0271T	REV REM CARTD SINS BARREFLX ACT DEV PLS GEN ONLY		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Not Cov
0272T	INTRGORTION DEV EVAL CARTD SINS BARREFLX W I AND R		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Not Cov
0273T	INTROGATION DEV EVAL CARTD SINS BARREFLX W PRGRM		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Not Cov
0274T	PERC LAMINO- LAMINECTOMY IMAGE GUIDE CERV THORAC		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Not Cov
0275T	PERC LAMINO- LAMINECTOMY INDIR IMAG GUIDE LUMBAR		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Not Cov
0278T	TRNSCUT ELECT MODLATION PAIN REPROCES EA TX SESS		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Not Cov
0290T	CORNEA INCISNS RECIPIENT CORNEA W LASR KERTPLSTY		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Not Cov

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
0295T	EXT ECG OVER 48HR TO 21 DAY RCRD SCAN ANLYS REP R AND I		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Not Cov
0296T	EXT ECG OVER 48HR TO 21 DAY RCRD W CONECT INTL RCRD		Yes	Yes	Not Cov	Yes		Yes	Not Cov
0297T	EXT ECG OVER 48HR TO 21 DAY SCAN ANALYSIS W REPORT		Yes	Yes	Not Cov	Yes		Yes	Not Cov
0298T	EXT ECG OVER 48HR TO 21 DAY REVIEW AND INTERPRETATN		Yes	Yes	Not Cov	Yes		Yes	Not Cov
0308T	INSJ OC TLSCP PROSTH RMVL CRYSTALLINE IO LENS		Not Cov	Not Cov	Not Cov	Not Cov		No	No
0312T	LAPS IMPLTJ NSTIM ELTRD ARRAY AND PLS GEN VAGUS NRV		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Not Cov
0313T	LAPS REVJ REPLCMT NSTIM ELTRD ARRAY VAGUS NRV		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Not Cov
0314T	LAPS RMVL NSTIM ELTRD ARRAY AND PLS GEN VAGUS NRV		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Not Cov
0315T	REMOVAL PULSE GENERATOR VAGUS NERVE		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Not Cov
0316T	REPLACEMENT PULSE GENERATOR VAGUS NERVE		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Not Cov
0317T	ELEC ALYS NSTIM PLS GEN VAGUS NRV W REPRGRMG		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Not Cov
0329T	MNTR INTRAOCULAR PRESS 24HRS OR GRT UNI BI W INTERP		Not Cov	Not Cov	Not Cov	Not Cov		No	Not Cov
0330T	TEAR FILM IMAGING UNILATERAL OR BILATERAL W I AND R		Not Cov	Not Cov	Not Cov	Not Cov		No	Not Cov
0331T	MYOCDR SYMPATHETIC INNERVAJ IMG PLNR QUAL AND QUANT		Not Cov	Not Cov	Not Cov	Not Cov		No	Not Cov
0332T	MYOCDR SYMP INNERVAJ IMG PLNR QUAL AND QUANT W SPECT		Not Cov	Not Cov	Not Cov	Not Cov		No	Not Cov
0333T	VISUAL EVOKED POTENTIAL ACUITY SCREENING AUTO		Yes	Yes	Not Cov	Yes		No	Not Cov
0335T	EXTRA-OSSEOUS JOINT IMPLANT TALOTARSAL STABILIZE		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Not Cov
0338T	TRANSCATHETER RENAL SYMPATH DENERVATION UNILAT		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Not Cov
0339T	TRANSCATHETER RENAL SYMPATH DENERVATION BILAT		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Not Cov
0341T	QUANT PUPILLOMETRY W INTERP AND REPORT UNILAT BILAT		Not Cov	Not Cov	Not Cov	Not Cov		No	No
0342T	THERAPEUTIC APHERESIS W SELECTIVE HDL DELIP		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Not Cov
0345T	TRANSCATH MITRAL VALVE REPAIR VIA CORONARY SINUS		Not Cov	Not Cov	Not Cov	Not Cov		No	No
0347T	PLACE INTERSTITIAL DEVICE(S) IN BONE FOR RSA		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Not Cov
0348T	RADIOSTEREOMETRIC ANALYSIS SPINE EXAM		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Not Cov
0349T	RADIOSTEREOMETRIC ANALYSIS UPPER EXTREMITY EXAM		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Not Cov
0350T	RADIOSTEREOMETRIC ANALYSIS LOWER EXTREMITY EXAM		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Not Cov
0351T	INTRAOP OCT BREAST OR AXILL NODE EACH SPECIMEN		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Not Cov
0352T	OCT BREAST OR AXILL NODE SPECIMEN I AND R		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Not Cov
0353T	OCT OF BREAST SURG CAVITY REAL TIME INTRAOP		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Not Cov

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			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
0354T	OCT BREAST SURG CAVITY REAL TIME REFERRED I AND R		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Not Cov
0355T	GI TRACT IMAGING INTRALUMINAL COLON WITH I AND R		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Not Cov
0356T	INSERT DRUG IMPLANT INTO LACRIMAL CANAL FOR IOP		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Not Cov
0357T	CRYOPRESERVATION IMMATURE OOCYTE(S)		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Not Cov
0358T	BIA WHOLE BODY COMPOSITION ASSESSMENT W I AND R		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
0362T	EXPOSURE BEHAV ASSESSMENT FIRST 30 MIN	ABA Cov COE 3 cy / provider group	Not Cov	No	Not Cov	No		Yes	Not Cov
0373T	EXPOSURE BEHAVIOR TREATMENT FIRST 60 MIN	ABA Cov COE	No	No	Not Cov	No		Yes	Not Cov
0375T	TOTAL DISC ARTHRP ANT APPR W DISCECTOMY CRV 3 PLUS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
0376T	ANT SEGMENT INSERT DRAIN W O RESERVOIR EA ADDL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
0377T	ANOSCOPY W BULKING AGENT INJ FOR FECAL INCONT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
0378T	VISUAL FIELD ASSESSMENT PHYS REVIEW AND REPORT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
0379T	VISUAL FIELD ASSESSMENT TECH SUPPORT W INSTRUCT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
0380T	COMP ANIMATION RETINA IMAGE TIME SERIES ANALYSIS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
0381T	XTRNL HRT RATE EPI SEIZ UP TO 14 DAYS COMPLETE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
0382T	XTRNL HRT RATE EPI SEIZ UP TO 14 DAYS R AND I ONLY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
0383T	XTRNL HRT RATE EPI SEIZ 15 TO 30 DAYS COMPLETE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
0384T	XTRNL HRT RATE EPI SEIZ 15 TO 30 DAYS R AND I ONLY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
0385T	XTRNL HRT RATE EPI SEIZ OVER 30 DAYS COMPLETE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
0386T	XTRNL HRT RATE EPI SEIZ OVER 30 DAYS R AND I ONLY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
0394T	HDR ELECTRONIC BRACHYTHERAPY SKIN SURFACE		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Not Cov
0395T	HDR ELECTRONIC BRACHYTHERAPY NTRSTL INTRCAV		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Not Cov
0396T	INTRAOP KINETIC BALANCE SENSR KNEE RPLCMT ARTHRP		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
0397T	ERCP WITH OPTICAL ENDOMICROSCOPY ADD ON		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
0398T	MIRGFUS STEREOTACTIC ABLATION LESION INTRACRANIAL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
0399T	MYOCARDIAL STRAIN IMAGING QUAN ASSMT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
0400T	MULTI-SPECTRAL DIGITAL SKIN LES ANALYSIS 1-5 LES		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
0401T	MULTI-SPECTRAL DIGITAL SKIN LES ANALYSIS 6 PLUS LES		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
0402T	COLLAGEN CROSS-LINKING OF CORNEA		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
0403T	DIABETES PREVENTION PROG STANDARDIZED CURRICULUM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
0404T	TRANSCERVICAL UTERINE FIBROID ABLTJ W US GDN RF		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
0405T	OVERSIGHT CARE OF XTRCORP LIVER ASSIST SYS PAT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
0408T	INSJ RPLC CAR MODULJ SYS PLS GEN TRANSVNS ELTRD		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov

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Code	Code Description	Comments	Apple Health & IMC Medical				IMC / BHSO (Mental Health covered svcs)	Medicare	Market Place
			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
0409T	INSJ RPLC CARDIAC MODULJ SYS PLS GENERATOR ONLY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
0410T	INSJ RPLC CARDIAC MODULJ SYS ATR ELECTRODE ONLY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
0411T	INSJ RPLC CAR MODULJ SYS VENTR ELECTRODE ONLY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
0412T	REMOVAL CARDIAC MODULJ SYS PLS GENERATOR ONLY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
0413T	REMOVAL CARDIAC MODULJ SYS TRANSVENOUS ELECTRODE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
0414T	RMVL AND RPL CARDIAC MODULJ SYS PLS GENERATOR ONLY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
0415T	REPOS CARDIAC MODULJ SYS TRANSVENOUS ELECTRODE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
0416T	RELOC SKIN POCKET CARDIAC MODULJ PULSE GENERATOR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
0417T	PRGRMG DEVICE EVALUATION CARDIAC MODULJ SYSTEM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
0418T	INTERRO DEVICE EVALUATION CARDIAC MODULJ SYSTEM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
0419T	DSTRJ NEUROFIBROMAS XTNSV FACE HEAD NECK OVER 50		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
0420T	DSTRJ NEUROFIBROMAS XTNSV TRNK EXTREMITIES OVER 100		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
0421T	TRANSURETHRAL WATERJET ABLATION PROSTATE COMPL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
0422T	TACTILE BREAST IMG COMPUTER-AIDED SENSORS UNI BI		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
0423T	SECRETORY TYPE II PHOSPHOLIPASE A2 (SPLA2-IIA)		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
0424T	INSJ RPLC NSTIM SYSTEM SLEEP APNEA COMPLETE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
0425T	INSJ RPLC NSTIM SYSTEM SLEEP APNEA SENSING LEAD		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
0426T	INSJ RPLC NSTIM SYSTEM SLEEP APNEA STIMJ LEAD		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
0427T	INSJ RPLC NSTIM SYSTEM SLEEP APNEA PLS GENERATOR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
0428T	REMOVAL NSTIM SYSTEM SLEEP APNEA PLS GENERATOR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
0429T	REMOVAL NSTIM SYSTEM SLEEP APNEA SENSING LEAD		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
0430T	REMOVAL NSTIM SYSTEM SLEEP APNEA STIMJ LEAD		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
0431T	RMVL RPLC NSTIM SYSTEM SLEEP APNEA PLS GENERATOR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
0432T	REPOS NSTIM SYSTEM SLEEP APNEA STIMJ LEAD		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
0433T	REPOS NSTIM SYSTEM SLEEP APNEA SENSING LEAD		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
0434T	INTERRO DEV EVAL NSTIM PLS GEN SYS SLEEP APNEA		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
0435T	PRGRMG EVAL NSTIM PLS GEN SYS SLEEP APNEA 1 SESS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
0436T	PRGRMG EVAL NSTIM PLS GEN SYS SLEEP APNEA STUDY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
0437T	IMPLTJ NONBIOL SYNTH IMPLT FASC RNFCMT ABDL WALL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
0439T	MYOCARDIAL PERFUSION ECHO ISCHM VIABILITY ASSMT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
0440T	ABLTJ PERC CRYOABLTJ IMG GDN UXTR PERPH NERVE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
0441T	ABLTJ PERC CRYOABLTJ IMG GDN LXTR PERPH NERVE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
0442T	ABLTJ PERC CRYOABLTJ IMG GDN NRV PLEX TRNCL NRV		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
0443T	R-T SPCTRL ALYS PRST8 TISS FLUORESCENC SPCTRSCP		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
0444T	INITIAL PLMT DRUG ELUTING OCULAR INSERT UNI BI		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
0445T	SBSQ PLMT DRUG ELUTING OCULAR INSERT UNI BI		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
0446T	CRTJ SUBQ INSJ IMPLTBL GLUCOSE SENSOR SYS TRAIN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Yes
0447T	RMVL IMPLTBL GLUCOSE SENSOR SUBQ POCKET VIA INC		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Yes
0448T	RMVL INSJ IMPLTBL GLUC SENSOR DIF ANATOMIC SITE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Yes
0449T	INSJ AQUEOUS DRAIN DEV W O EO RSVR INITIAL DEV		Not Cov	Not Cov	Not Cov	Not Cov		No	No
0450T	INSJ AQUEOUS DRAIN DEV W O EO RSVR EACH ADDL DEV		Not Cov	Not Cov	Not Cov	Not Cov		No	No
0451T	INSJ RPLCMT IMPLTBL AORTIC VENTR COMPLETE SYSTEM		Not Cov	Not Cov	Not Cov	Not Cov		No	No
0452T	INSJ RPLCMT IMPLTBL AORTIC VENTR VASC HEMO SEAL		Not Cov	Not Cov	Not Cov	Not Cov		No	No
0453T	INSJ RPLCMT IMPLTBL AORTIC VENTR MECHANO-ELEC		Not Cov	Not Cov	Not Cov	Not Cov		No	No
0454T	INSJ RPLCMT IMPLTBL AORTIC VENTR SUBQ ELECTRODE		Not Cov	Not Cov	Not Cov	Not Cov		No	No
0455T	REMLV PERM IMPLT AORTIC VENTR COMPLETE SYSTEM		Not Cov	Not Cov	Not Cov	Not Cov		No	No
0456T	REMLV PERM IMPLT AORTIC VENTR VASC HEMO SEAL		Not Cov	Not Cov	Not Cov	Not Cov		No	No
0457T	REMLV PERM IMPLT AORTIC VENTR MECHANO-ELEC		Not Cov	Not Cov	Not Cov	Not Cov		No	No
0458T	REMLV PERM IMPLT AORTIC VENTR SUBQ ELECTRODE		Not Cov	Not Cov	Not Cov	Not Cov		No	No
0459T	RELOCAJ RPLCMT AORTIC VENTR MECHANO-ELECTRODE		Not Cov	Not Cov	Not Cov	Not Cov		No	No
0460T	REPOS AORTIC VENTR DEV SUBCUTANEOUS ELECTRODE		Not Cov	Not Cov	Not Cov	Not Cov		No	No
0461T	REPOS AORTIC VENTR DEV SUBQ ELECT CONTRPULSJ DEV		Not Cov	Not Cov	Not Cov	Not Cov		No	No
0462T	PRGRMG EVAL MECH-ELEC AORTIC VENTR SYS PER DAY		Not Cov	Not Cov	Not Cov	Not Cov		No	No
0463T	INTERROG EVAL IMPLT AORTIC VENTR SYS PER DAY		Not Cov	Not Cov	Not Cov	Not Cov		No	No
0464T	VISUAL EP TESTING FOR GLAUCOMA W INTERPJ AND REPR		Not Cov	Not Cov	Not Cov	Not Cov		No	No
0465T	SUPCHRDNL NJX OF RX AGT W O SUPPLY OF MEDICATION		Not Cov	Not Cov	Not Cov	Not Cov		No	No
0466T	INSRT CH WALL RESPIR ELTRD AND CONJ PULSE GEN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
0467T	REVJ RPLMNT CH WAL RESPIR ELTRD AND CONJ PULSE GEN		Not Cov	Not Cov	Not Cov	Not Cov		No	No
0468T	REMOVAL CHEST WALL RESPIRATORY ELTRODE ARRAY		Not Cov	Not Cov	Not Cov	Not Cov		No	No
0469T	RTA POLARIZE SCAN OC SCR W ONSITE AUTO RSLT BI		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
0470T	OCT SKN IMG ACQUISJ I AND R 1ST LES		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
0471T	OCT SKN IMG ACQUISJ I AND R EA ADDL LES		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
0472T	DEV INTERR PRGRMG IO RTA ELTRD RA W ADJ AND REPR		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Not Cov
0473T	DEV INTERR REPRGRMG IO RTA ELTRD RA W REPR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
0474T	INSJ ANT SEG AQUEOUS DRG DEV W IO RSVR		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Not Cov
0475T	REC FTL CAR SGL 3 CH PT REC AND STRG DATA SCN I AND R		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
0476T	REC FTL CAR SGL PT REC SCAN W RAW ELEC TR DATA		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
0477T	REC FTL CAR SGL 3 CH SGL XTRJ TECHL ALYS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
0478T	REC FTL CAR SGL 3 CH REVIEW I AND R		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Not Cov
0479T	FRACTIONAL ABL LSR FENESTRATION FIRST 100 SQCM		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Not Cov
0480T	FRACTIONAL ABL LSR FENESTRATION EA ADDL 100 SQCM		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Not Cov
0481T	NJX AUTOL WBC CONCENTR INC IMG GDN HRV AND PREP		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Not Cov
0482T	ABSOLUTE QUAN MYOCARD BLD FLO PET STRESS AND REST		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Not Cov
0483T	TMVI W PROSTHETIC VALVE PERCUTANEOUS APPROACH		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Not Cov
0484T	TMVI W PROSTHETIC VALVE TRANSTHORACIC EXPOSURE		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Not Cov
0485T	OCT MIDDLE EAR WITH I AND R UNILATERAL		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Not Cov
0486T	OCT MIDDLE EAR WITH I AND R BILATERAL		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Not Cov
0487T	TRANSVAGINAL BIOMECHANICAL MAPPING W REPORT		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Not Cov
0488T	DIABETES PREV ONLINE ELECTRONIC PRGRM PR 30 DAYS		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Not Cov
0489T	AUTOL REGN CELL TX SCLERODERMA HANDS		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Not Cov
0490T	AUTOL REGN CELL TX SCLDR MLT INJ 1 OR GRT HANDS		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Not Cov
0491T	ABL LASER TX OPEN WND PR DAY 1ST 20 SQCM OR LESS		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Not Cov
0492T	ABL LASER TX OPEN WND PR DAY ADDL 20 SQCM		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Not Cov
0493T	NEAR INFRARED SPECTROSCOPY STUDIES LOW EXT WOUNDS		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Not Cov
0494T	PREP AND CANNULJ CDVR DON LNG ORGN PRFUJ SYS		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Not Cov
0495T	INIT AND MNTR CDVR DON LNG ORGN PRFUJ SYS 1ST 2 HR		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Not Cov
0496T	MNTR CDVR DON LNG ORGN PRFUJ SYS EA ADDL HR		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Not Cov
0497T	XTRNL PT ACT ECG W O ATTN MNTR IN-OFFICE CONN		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Not Cov
0498T	XTRNL PT ACT ECG W O ATTN MNTR R AND I PR 30 DAYS		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Not Cov
0499T	CYSTO W DIL AND URTL RX DEL F URTL STRIX STENOSIS		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Not Cov
0500T	IADNA HPV 5 PLUS SEP REPRT HIGH RISK HPV TYPES		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Not Cov
0501T	COR FFR DERIVED CTA DATA ASSESS COR ART DISEASE		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Not Cov
0502T	COR FFR DERIVED CTA DATA PREP AND TRANSMIS		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
0503T	COR FFR CTA DATA ALYS AND GNRJ ESTIMATED FFR MODEL		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
0504T	COR FFR CTA DATA REVIEW W INTERPJ AND FINAL REPORT		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
0505T	EV FEMPOP ARTL REVSC TCAT PLMT IV ST GRF AND CLSR		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
0506T	MAC PGMT OPTICAL DNS MEAS HFP UNI BI W I AND R		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
0507T	NEAR INFRARED DUAL IMG MEIBOMIAN GLND UNI BI I AND R		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
0508T	PLS ECHO US B1 DNS MEAS INDIC AXL B1 MIN DNS TIB		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
0509T	PATTERN ELECTRORETINOGRAPHY W I AND R		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
0510T	REMOVAL OF SINUS TARSI IMPLANT		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
0511T	REMOVAL AND REINSERTION OF SINUS TARSI IMPLANT		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
0512T	ESW INTEGUMENTARY WOUND HEALING INITIAL WOUND		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
0513T	ESW INTEGUMENTARY WOUND HEALING EA ADDL WOUND		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
0514T	INTRAOPERATIVE VISUAL AXIS ID USING PT FIXATION		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
0515T	INSERTION WRLS CAR STIMULATOR LV PACG COMPL SYS		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
0516T	INSERTION WRLS CAR STIMULATOR LV PACG ELTRD ONLY		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Not Cov
0517T	INSERTION WRLS CAR STIMULATOR LV PACG PG COMPNT		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Not Cov
0518T	REMOVAL PG COMPNT ONLY WRLS CAR STIMULATOR		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Not Cov
0519T	REMOVAL AND RPLCMT WRLS CAR STIMULATOR PG COMPNT		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Not Cov
0520T	REMOVAL AND RPLCMT WRLS CAR STIMULATOR W NEW ELTRD		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Not Cov
0521T	INTERROG DEV EVAL WRLS CAR STIMULATOR IN PERSON		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Not Cov
0522T	PRGRMG DEVICE EVAL WRLS CAR STIMULATOR IN PERSON		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Not Cov
0523T	INTRAPROCEDURAL CORONARY FFP W 3D FUNCJL MAPPING		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Not Cov
0524T	EV CATHETER DIR CHEM ABLTJ INCMPTNT XTR VEIN		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Not Cov
0525T	INSERTION REPLACEMENT COMPLETE IIMS		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Not Cov
0526T	INSERTION REPLACEMENT IIMS ELECTRODE ONLY		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Not Cov
0527T	INSERTION REPLACEMENT IIMS IMPLANTABLE MNTR ONLY		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Not Cov
0528T	PRGRMG DEVICE EVAL IIMS IN PERSON		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Not Cov
0529T	INTERROGATION DEVICE EVAL IIMS IN PERSON		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Not Cov
0530T	REMOVAL COMPLETE IIMS INCL IMG S AND I		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Not Cov
0531T	REMOVAL IIMS ELECTRODE ONLY INCL IMG S AND I		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Not Cov
0532T	REMOVAL IIMS IMPLANTABLE MNTR ONLY INCL IMG S AND I		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Not Cov
0533T	CONTINUOUS REC MVMT DO SX 6 D UNDER 10 D		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Not Cov
0534T	CONT REC MVMT DO SX 6 D UNDER 10 D SETUP AND PT TRAINJ		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Not Cov
0535T	CONT REC MVMT DO SX 6 D UNDER 10 D 1ST REPRT CNFIG		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Not Cov

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
0536T	CONT REC MVMT DO SX 6 D UNDER 10 D DL REVIEW I AND R		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Not Cov
0537T	CAR-T THERAPY HRVG BLD DRV T LMPHCYT PR DAY	Bill through DSHS	Not Cov	Not Cov	Not Cov	Not Cov		Yes	Not Cov
0538T	CAR-T THERAPY PREPJ BLD DRV T LMPHCYT F TRNS	Bill through DSHS	Not Cov	Not Cov	Not Cov	Not Cov		Yes	Not Cov
0539T	CAR-T THERAPY RECEIPT AND PREP CAR-T CELLS F ADMN	Bill through DSHS	Not Cov	Not Cov	Not Cov	Not Cov		Yes	Not Cov
0540T	CAR-T THERAPY AUTOLOGOUS CELL ADMINISTRATION		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Not Cov
0541T	MYOCARDIAL IMG BY MCG DETCJ CARDIAC ISCHEMIA		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Not Cov
0542T	MYOCARDIAL IMG BY MCG DETCJ CARDIAC ISCHEMIA I AND R		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Not Cov
0543T	TRANSAPICAL MV RPR W TTE PLMT ARTIF CHORDAE TEND		Not Cov	Not Cov	Not Cov	Not Cov		No	No
0544T	TCAT MV ANN RCNSTJ W IMPL ADJST ANN RCNSTJ DEV		Not Cov	Not Cov	Not Cov	Not Cov		No	No
0545T	TCAT TV ANN RCNSTJ W IMPL ADJST ANN RCNSTJ DEV		Not Cov	Not Cov	Not Cov	Not Cov		No	No
0546T	RF SPECTRSC R-T INTRAOP MRGN ASSMT AT PRTL MAST		Not Cov	Not Cov	Not Cov	Not Cov		No	No
0547T	BONE MATRL QUALITY TST BY MICROINDENTATION TIBIA		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
0548T	TPRNL BALO CNTNC DEV BI PLMT W CSTSC AND FLUOR		Not Cov	Not Cov	Not Cov	Not Cov		No	No
0549T	TPRNL BALO CNTNC DEV UNI PLMT W CSTSC AND FLUOR		Not Cov	Not Cov	Not Cov	Not Cov		No	No
0550T	TPRNL BALO CNTNC DEV REMOVAL EACH BALLOON		Not Cov	Not Cov	Not Cov	Not Cov		No	No
0551T	TPRNL BALO CNTNC DEV ADJUSTMENT BALO FLU VOLUME		Not Cov	Not Cov	Not Cov	Not Cov		No	No
0552T	LOW-LVL LASER THER DYN PHOTONIC AND THERMOKIN NRG		Not Cov	Not Cov	Not Cov	Not Cov		No	No
0553T	PERQ TCAT PLMT ILIAC ARVEN ANASTOMOSIS IMPLANT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
0554T	BONE STRENGTH AND FRACTURE RISK ANALYSIS		Not Cov	Not Cov	Not Cov	Not Cov		No	No
0555T	BONE STRENGTH AND FRACTURE RSK RETRV AND TRANSMIS DATA		Not Cov	Not Cov	Not Cov	Not Cov		No	No
0556T	BONE STRENGTH AND FRACTURE RISK ASSESSMENT		Not Cov	Not Cov	Not Cov	Not Cov		No	No
0557T	BONE STRENGTH AND FRACTURE RISK I AND R		Not Cov	Not Cov	Not Cov	Not Cov		No	No
0558T	CT SCAN FOR PURPOSE BIOMECHANICAL CT ANALYSIS		Not Cov	Not Cov	Not Cov	Not Cov		No	No
0559T	ANATOMIC MODEL 3D PRINTED 1ST COMPNT ANTMC STRUX		Not Cov	Not Cov	Not Cov	Not Cov		No	No
0560T	ANATOMIC MODEL 3D PRINTED EA ADDL COMPONENT		Not Cov	Not Cov	Not Cov	Not Cov		No	No
0561T	ANATOMIC GUIDE 3D PRINTED 1ST ANATOMIC GUIDE		Not Cov	Not Cov	Not Cov	Not Cov		No	No
0562T	ANATOMIC GUIDE 3D PRINTED EA ADDL ANATOMIC GUIDE		Not Cov	Not Cov	Not Cov	Not Cov		No	No
0001F	HRT FAILURE ASSESSED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
0005F	OSTEOARTHRITIS COMPOSITE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
0012F	COMMUNITY-ACQUIRED BACTERIAL PNEUMONIA ASSMT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
0014F	COMP PREOP ASSESS CATARACT SURG W IOL PLACEMNT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
0015F	MELANOMA FOLLOW UP COMPLETED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
0500F	INITIAL PRENATAL CARE VISIT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
0501F	PRENATAL FLOW SHEET		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
0502F	SUBSEQUENT PRENATAL CARE VISIT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
0503F	POSTPARTUM CARE VISIT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
0505F	HEMODIALYSIS PLAN OF CARE DOCUMENTED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
0507F	PERITONEAL DIALYSIS PLAN DOCUMENTED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
0509F	URINARY INCONTINENCE PLAN OF CARE DOCUMENTED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
0513F	ELEVATED BLOOD PRESSURE PLAN OF CARE DOCUMENTED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
0514F	PLAN CARE INCRSD HGB LVL DOCD PT ON ESA THXPY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
0516F	ANEMIA PLAN OF CARE DOCUMENTED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
0517F	GLAUCOMA PLAN OF CARE DOCUMENTED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
0518F	FALLS PLAN OF CARE DOCUMENTED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
0519F	PLANNED CHEMO REGIMEN DOCD PRIOR START NEW TX		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
0520F	RAD DOSE LIMITS EST PRIOR3D RAD FOR MIN 2 TIS ORG		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
0521F	PLAN OF CARE TO ADDRESS PAIN DOCUMENTED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
0525F	INITIAL VISIT FOR EPISODE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
0526F	SUBSEQUENT VISIT FOR EPISODE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
0528F	RCMND FLLW-UP 2ND CLNSCPY 10 OR GRT YRS DOCD RPRT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
0529F	INTRVL 3 OR GRT YRS PTS LAST COLONOSCOPY DOCD		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
0535F	DYSYPNEA MANAGEMENT PLAN DOCUMENTED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
0540F	GLUCORTICOID MANAGEMENT PLAN DOCUMENTED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
0545F	PLAN FOR FOLLOW-UP CARE FOR MDD DOCD		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
0550F	CYTOPATH REPORT ON NONGYN SPECIMEN 2 WKNG DAYS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
0551F	CYTOPATH REPORT NONGYN SPCM DOCD NON-ROUTINE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
0555F	SYMPTOM MANAGEMENT PLAN OF CARE DOCUMENTED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
0556F	PLAN OF CARE TO ACHIEVE LIPID CONTROL DOCUMENTED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
0557F	PLAN OF CARE TO MANAGE ANGINAL SYMPTOMS DOCD		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
0575F	HIV RNA CONTROL PLAN OF CARE DOCD		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
0580F	MULTIDISCIPLINARY CARE PLAN DEVELOPED UPDATED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
0581F	PT TRANSFERRED FROM ANESTHETIZING TO CC UNIT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
0582F	PT NOT TRANSFERRED FROM ANESTHETIZING TO CC UNIT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
0583F	TRANSFER OF CARE CHECKLIST USED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
0584F	TRANSFER OF CARE CHECKLIST NOT USED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
1000F	TOBACCO USE ASSESSED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
1002F	ANGINAL SYMPTOMS AND LEVEL ACTIVITY ASSESSED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
1003F	LEVEL ACTIVITY ASSESSED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
1004F	CLINICAL SYMPTOMS VOL OVERLOAD ASSESSED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
1005F	ASTHMA SYMPTOMS EVALUATED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
1006F	OSTEOARTHRITIS SYMPTOMS AND FUNCJAL STATUS ASSES		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
1007F	ANTI-INFLAMMATORY ANALGESIC SYMPTOM RELIEF ASSES		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
1008F	GI AND RENAL PRESCRIBED OTC NSAID RISK FACTORS ASSES		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
1010F	SEVERITY OF ANGINA ASSESSED BY LEVEL OF ACTIVITY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
1011F	ANGINA PRESENT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
1012F	ANGINA ABSENT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
1015F	COPD SYMPTOMS ASSESSED TOOL COMPLETED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
1018F	DYSYPNEA ASSESSED NOT PRESENT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
1019F	DYSYPNEA ASSESSED PRESENT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
1022F	PNEUMOCOCCUS IMMUNIZATION STATUS ASSESSED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
1026F	CO-MORBID CONDITIONS ASSESSED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
1030F	INFLUENZA IMMUNIZATION STATUS ASSESSED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
1031F	SMOKING AND 2ND HAND SMOKE IN THE HOME ASSESSED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
1032F	CURRENT SMOKER EXPOSED TO SECONDHAND SMOKE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
1033F	TOBACCO NON-SMOKER AND NO 2NDHAND SMOKE EXPOSURE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
1034F	CURRENT TOBACCO SMOKER		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
1035F	CURRENT SMOKELESS TOBACCO USER		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
1036F	CURRENT TOBACCO NON-USER CAD CAP COPD PV DM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
1038F	PERSISTENT ASTHMA MILD MODERATE OR SEVERE ASTHMA		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
1039F	INTERMITTENT ASTHMA		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
1040F	DSM-5 CRITERIA MDD DOCD AT THE INITIAL EVAL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
1050F	HISTORY NEW OR CHANGING MOLES		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
1052F	TYPE ANATOMIC LOCATION AND ACTIVITY ALL ASSESSED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
1055F	VISUAL FUNCTIONAL STATUS ASSESSED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
1060F	DOC PERM PERSISTENT PAROXYSMAL ATRIAL FIB		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
1061F	DOC ABSENCE PERM AND PERSISTENT AND PAROXYSM ATRIAL FIB		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
1065F	ISCHEMIC STROKE SYMP ONSET UNDER 3 HRS PRIOR ARRIVAL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
1066F	ISCHEMIC STROKE SYMP ONSET GRT THN EQ3 HRS PRIOR ARRIVA		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
1070F	ALARM SYMPTOMS ASSESSED NONE PRESENT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
1071F	ALARM SYMPTOMS ASSESSED 1 OR GRT PRESENT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
1090F	PRESENCE ABSENCE URINARY INCONTINENCE ASSESSED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
1091F	URINE INCONTINENCE CHARACTERIZED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
1100F	PT FALLS ASSESS DOCD 2 OR GRT FALLS FALL W INJURY YR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
1101F	PT FALLS ASSESS DOCD W O FALL INJURY PAST YEAR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
1110F	PT DISCHARGE INPT FACILITY WITHIN LAST 60 DAYS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
1111F	DISCHRG MEDS RECONCILED W CURRENT MED LIST		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
1116F	AURICULAR PERIAURICULAR PAIN ASSESSED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
1118F	GERD SYMPTOMS ASSESSED AFTER 12 MONTHS THERAPY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
1119F	INITIAL EVALUATION FOR CONDITION		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
1121F	SUBSEQUENT EVALUATION CONDITION		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
1123F	ADV CARE PLN TLKD AND ALT DCSN MAKER DOCD		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
1124F	ADV CARE PLN NO ALT DCSN MKR DOCD OR REFUSAL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
1125F	PAIN SEVERITY QUANTIFIED PAIN PRESENT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
1126F	PAIN SEVERITY QUANTIFIED NO PAIN PRESENT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
1127F	NEW EPISODE FOR CONDITION		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
1128F	SUBS EPISODE FOR CONDITION		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
1130F	BK PAIN AND FXN ASSESSED CERTAIN ASPECTS OF CARE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
1134F	EPISODE BACK PAIN LASTING SIX WEEKS OR LESS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
1135F	EPISODE BACK PAIN LASTING OVER SIX WEEKS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
1136F	EPISODE BACK PAIN LASTING 12 WEEKS OR LESS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
1137F	EPISODE BACK PAIN LASTING OVER 12 WKS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
1150F	DOC PT W SUBSTANTIAL RISK DEATH WITHIN 1 YEAR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
1151F	DOC PT W O SUBSTANTIAL RISK DEATH WITHIN 1 YEAR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
1152F	DOC ADVANCED DISEASE DX CARE GOALS COMFORT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
1153F	DOC ADVANCED DISEASE DX CARE GOALS W O COMFORT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
1157F	ADVNC CARE PLAN OR EQV LGL DOC IN MED RCRD		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
1158F	ADVNC CARE PLANNING TLK DOCD IN MED RCRD		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
1159F	MEDICATION LIST DOCUMENTED IN MEDICAL RECORD		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
1160F	RVW ALL MEDS BY RXNG PRCTIONR OR CLIN RPH DOCD		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
1170F	FUNCTIONAL STATUS ASSESSED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
1175F	FUNCTIONAL STATUS DEMENTIA ASSESS RESULTS RVWD		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
1180F	THROMBOEMBOLIC RISK ASSESSED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
1181F	NEUROPSYCHIATRIC SYMPTS ASSESSED RESULTS REVIEWD		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
1182F	NEUROPSYCHIATRIC SYMPTOMS ONE OR MORE PRESENT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
1183F	NEUROPSYCHIATRIC SYMPTOMS ABSENT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
1200F	SEIZURE TYPE FREQUENCY DOCUMENTED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
1205F	ETIOLOGY OF EPILEPSY SYNDROME RVWD AND DOCD		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
1220F	PATIENT SCREENED DEPRESSION		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
1400F	PARKINSON DISEASE DIAGNOSIS REVIEWED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
1450F	SYMPTOMS IMPROVED CONSIST W TXMNT GOAL ASSESSMNT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
1451F	SYMPTOMS SHOW CLIN IMPRTNT DROP SINCE ASSESSMENT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
1460F	QUALIFYING CARD EVENT DIAGNOSIS PRIOR 12 MONTHS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
1461F	NO QUAL CARD EVENT DIAG IN PREVIOUS 12 MONTHS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
1490F	DEMENTIA SEVERITY CLASSIFIED MILD		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
1491F	DEMENTIA SEVERITY CLASSIFIED MODERATE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
1493F	DEMENTIA SEVERITY CLASSIFIED SEVERE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
1494F	COGNITION ASSESSED AND REVIEWED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
1500F	SYMP AND SIGN DISTAL SYMM POLYNEUROPATHY REVWD AND DOCD		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
1501F	NOT INITIAL EVALUATION FOR CONDITION		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
1502F	PT QUERIED RE PAIN W FUNC USING RELIABLE INSTRM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
1503F	PT QUERIED RE SYMP RESPIRATORY INSUFFICIENCY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
1504F	PATIENT HAS RESPIRATORY INSUFFICIENCY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
1505F	PATIENT DOES NOT HAVE RESPIRATORY INSUFFICIENCY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
2000F	BLOOD PRESSURE MEASURED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
2001F	WEIGHT RECORDED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
2002F	CLINICAL SIGNS VOLUME OVERLOAD ASSESSED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
2004F	INITIAL EXAMINATION INVOLVED JOINTS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
2010F	VITAL SIGNS RECORDED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
2014F	MENTAL STATUS ASSESSED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
2015F	ASTHMA IMPAIRMENT ASSESSED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
2016F	ASTHMA RISK ASSESSED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
2018F	HYDRATION STATUS ASSESSED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
2019F	DILATED MACULAR EXAM PERFORMED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
2020F	DILATED FUNDUS EVALUATION PERFORMED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
2021F	DILATED MACULAR OR FUNDUS EXAM PERFORMED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
2022F	DILAT RETINAL EYE EXAM W INTERP OPHTHAL OPTOM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
2023F	DILATED RETINAL EXAM W O EVIDENCE OF RETINOPATHY		Not Cov	Not Cov	Not Cov	Not Cov		TBD	TBD
2024F	7 STANDARD FIELD STEREOSCOPIC PHOTOS W INTERPJ		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
2025F	7 STANDARD FLD RETINAL PHOTO W O EVC RTNOPHTY		Not Cov	Not Cov	Not Cov	Not Cov		TBD	TBD
2026F	EYE IMAGING VALIDATED MATCH PHOTOS DIAGNOSIS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
2027F	OPTIC NERVE HEAD EVALUATION PERFORMED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
2028F	FOOT EXAMINATION PERFORMED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
2029F	COMPLETE PHYSICAL SKIN EXAM PERFORMED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
2030F	HYDRATION STATUS DOCD NORMALLY HYDRATED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
2031F	HYDRATION STATUS DOCUMENTED DEHYDRATED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
2033F	EYE IMG VLD MTCH DX 7 STND FLD W O EVC RTNOPHTY		Not Cov	Not Cov	Not Cov	Not Cov		TBD	TBD
2035F	TYMPANIC MEMBRANE MOBILITY ASSESS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
2040F	PHYS EXAM ON DATE OF INIT VST FOR LBP DONE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
2044F	DOC MNLT HLTH ASSES PRIOR INTVN BACK PAIN 6WKS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
2050F	WOUND CHARACTERISTICS DOCD PRIOR DEBRIDEMENT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No

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			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
2060F	PT INTRVWD BY EVAL CLINICIAN UNDER DATE DIAG MDD		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3006F	CHEST X-RAY RESULTS DOCUMENTED AND REVIEWED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3008F	BODY MASS INDEX DOCUMENTED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3011F	LIPID PANEL RESULTS DOCUMENTED AND REVIEWED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3014F	SCREENING MAMMOGRAPHY RESULTS DOC AND REV		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3015F	CERVICAL CANCER SCREENING RESULTS DOCD AND RVWD		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3016F	PT SCRND UNHLTHY OH USE BY SYSTMTC SCRNG METHD		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3017F	COLORECTAL CANCER SCREENING RESULTS DOC AND REV		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3018F	PRE-PRX RISK ASSESS DEPTH AND QUAL BOWEL PREP		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3019F	LVEF ASSESSMENT PLANNED POST DISCHARGE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3020F	LEFT VENTRICULAR FUNCTION ASSESSMENT DOCUMENTED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3021F	LEFT VENTRICULAR EJECTION FRACTION UNDER 40PCT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3022F	LEFT VENTRICULAR EJECTION FRACTION OR MOREEQUAL 40PCT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3023F	SPIROMETRY RESULTS DOCUMENTED AND REVIEWED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3025F	SPIROMETRY TEST RESULTS FEV FVC UNDER 70PCT W COPD		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3027F	SPIROMETRY TEST RESULTS FEV FVC GRT THN EQ70PCT W O COPD		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3028F	OXYGEN SATURATION RESULTS DOCUMENTED AND REVIEWE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3035F	OXYGEN SATUR UNDER EQUAL 88PCT PAO2 UNDER EQUAL 55 MM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3037F	OXYGEN SATURATION OVER 88PCT PAO2 OVER 55 MM HG		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3038F	PULMONARY FUNC TEST WITHIN 12 MON PRIOR SURG		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3040F	FUNCTIONAL EXPIRATORY VOLUME UNDER 40PCT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3042F	FUNCTJL EXPIR VOLUME OR MOREEQUAL 40PCT PREDICTED VALUE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3044F	MOST RECENT HEMOGLOBIN A1C LEVEL UNDER 7.0PCT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3046F	MOST RECENT HEMOGLOBIN A1C LEVEL OVER 9.0PCT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3048F	MOST RECENT LDL-C UNDER 100 MG DL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3049F	MOST RECENT LDL-C 100-129 MG DL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3050F	MOST RECENT LDL-C OR MOREEQUAL 130 MG DL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3051F	MOST RECENT HG A1C OVER EQUAL TO 7.0PCT AND UNDE		Not Cov	Not Cov	Not Cov	Not Cov		TBD	TBD
3052F	MOST RECENT HG A1C OVER EQUAL TO 8.0PCT AND UNDE		Not Cov	Not Cov	Not Cov	Not Cov		TBD	TBD
3055F	LVEF LESS THAN OR EQUAL TO 35PCT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3056F	LVEF GREATER THAN 35PCT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No

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Code	Code Description	Comments	Apple Health & IMC Medical				IMC / BHSO (Mental Health covered svcs)	Medicare	Market Place
			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
3060F	POSITIVE MICROALBUMINURIA TEST RESULT DOC AND REV		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3061F	NEGATIVE MICROALBUMINURIA TEST RESULT DOC AND REV		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3062F	POSITIVE MACROALBUMINURIA TEST RESULT DOC AND REV		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3066F	DOCUMENTATION OF TREATMENT FOR NEPHROPATHY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3072F	LOW RISK FOR RETINOPATHY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3073F	DOCUMENTED LENGTH CORNEAL POWER AND LENS POWER		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3074F	MOST RECENT SYSTOLIC BLOOD PRESSURE UNDER 130 MM HG		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3075F	MOST RECENT SYSTOLIC BLOOD PRESS 130-139MM HG		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3077F	MOST RECENT SYSTOLIC BLOOD PRESOR MOREEQUAL 140 MM HG		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3078F	MOST RECENT DIASTOLIC BLOOD PRESSURE UNDER 80 MM HG		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3079F	MOST RECENT DIASTOLIC BLOOD PRESSURE 80-89 MM HG		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3080F	MOST RECENT DIASTOL BLOOD PRES OR MOREEQUAL 90 MM HG		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3082F	KT V UNDER 1.2 (CLEARANCE OF UREA (KT) VOLUME (V))		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3083F	KT V EQUAL OR GRT 1.2 AND UNDER 1.7		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3084F	KT V GRT THN EQ 1.7		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3085F	SUICIDE RISK ASSESSED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3088F	MAJOR DEPRESSIVE DISORDER MILD		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3089F	MAJOR DEPRESSIVE DISORDER MODERATE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3090F	MDD SEVERE WITHOUT PSYCHOTIC FEATURES		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3091F	MAJOR DESPRESV DISORDER SEVERE W PSYCHOT FEATURE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3092F	MAJOR DEPRESSIVE DISORDER REMISSION		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3093F	DOC NEW DIAG DX INIT RECURRENT EPISODE OF MDD		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3095F	CENTRAL DUAL ENERGY ABSORPTIOMETRY DOCD		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3096F	CENTRAL DUAL ENERGY ABSORPTIOMETRY ORDERED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3100F	CAROTID IMAGNG REPORT DIR INDIR MEAS VESSEL DIAM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3110F	CT MRI HMRHG MASS LESION ACUTE INFRC DOC		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3111F	CT OR MRI BRAIN DONE W IN 24 HRS HOSP ARRIVAL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3112F	CT MRI BRAIN DONE 24 HRS AFTER HOSP ARRIVAL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3115F	QUANT RESULTS EVAL CURR LEVEL ACTIVITY CLIN SYMP		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3117F	HF DISEASE SPECIFIC ASSESSMENT TOOL COMPLETED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3118F	NEW YORK HEART ASSOCIATION (NYHA) CLASS DOCD		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3119F	NO EVAL LEVEL OF ACTIVITY OR CLINICAL SYMPTOMS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3120F	12-LEAD ECG PERFORMED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
3126F	ESOPH BX RPRT W DYSPLAS INFO AND APPROP GRADING		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3130F	UPPER GI ENDOSCOPY PERFORMED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3132F	DOC REFERAL FOR UPPER GI ENDOSCOPY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3140F	UPPER GI ENDO REPORT SHOWS POSS BARRETT'S ESOPH		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3141F	UPPER GI ENDO REPORT SHOW NO SUSPECT BARRETT'S		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3142F	BARIUM SWALLOW TEST ORDERED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3150F	FORCEPS ESOPHAGEAL BIOPSY PERFORMED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3155F	CYTOGEN TEST DONE MARROW DIAG OR PRIOR TXMNT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3160F	DOC IRON STORES PRIOR START EPO THERAPY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3170F	FLOW CYTOMETRY W DIAG PRIOR INITIATING TREATMENT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3200F	BARIUM SWALLOW TEST NOT ORDERED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3210F	GROUP A STREP TEST PERFORMED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3215F	DOCUMENTED IMMUNITY HEPATITIS A		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3216F	DOCUMENTED IMMUNITY HEPATITIS B		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3218F	HEP C RNA TEST 6 MOS BEFORE ANTIVIRAL TX		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3220F	HEP C QUANT RNA TEST 12 WKS AFTER ANTIVIRAL TX		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3230F	HEARING TEST 6 MOS PRIOR TO EAR TUBE INSERTION		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3250F	NONPRIM ANATOMIC LOCATION OF SPECIMEN SITE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3260F	TUMOR NODES HISTO GRADE DOCUMENTED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3265F	RNA TESTING FOR HEP C VIREMIA ORDERED DOCD		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3266F	HEPATITIS C GENOTYPE PRIOR ANTIVIRAL TREATMENT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3267F	PATH RPRT INCLUDES PT AND PN CAT GLEASON		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3268F	PSA AND TUMOR STAGE AND GLEASON SCORE PRIOR INIT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3269F	BONE SCAN PRIOR INITIAT TX DX PROSTATE CANCER		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3270F	BONE SCAN NOT PRIOR INITIAT TX DX PROSTATE CA		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3271F	LOW RISK OF RECURRENCE PROSTATE CANCER		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3272F	INTERMED RISK OF RECURRENCE PROSTATE CANCER		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3273F	HIGH RISK OF RECURRENCE PROSTATE CANCER		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3274F	PROST CANCER RSK RECUR NOT DETER LOW INTERMED HI		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3278F	SERUM LEVELS CALCUM PHOSPH PARATHYR AND LIPID PR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3279F	HEMOGLOBIN LEVELOR MOREEQUAL 13 G DL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3280F	HEMOGLOBIN LEVEL 11 G DL-12.9 G DL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3281F	HEMOGLOBIN LEVEL UNDER 11 G DL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3284F	INTRAOCULAR PRESS REDUCED OR MOREEQUAL 15PCT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3285F	IOP REDUCED UNDER 15PCT PRE-INTERVENTION LEVEL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3288F	FALLS RISK ASSESSMENT DOCUMENTED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3290F	PATIENT IS D (RH) NEGATIVE AND UNSENSITIZED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3291F	PATIENT IS D (RH) POSITIVE OR SENSITIZED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
3292F	HIV TSTNG ASK DOCD RVWD AT 1ST 2ND PRENATAL VST		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3293F	ABO AND RH BLOOD TYPING DOCUMENTED AS PERFORMED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3294F	GBS SCRNING DOCD DONE DURING WK 35-37 GESTATION		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3300F	AJCC STAGE DOCUMENTED AND REVIEWED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3301F	CANCER STAGE DOCD METASTATIC AND REVIEWED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3315F	ESTROGEN PROGEST RECEPTOR POSITIVE BREAST CANCER		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3316F	ESTROGEN PROGEST RECEPTOR NEGATIVE BREAST CANCER		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3317F	PATH REPRT MALIGNANCY DOCD AND RVWD INITIATE CHE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3318F	PATH REPRT MALIGNANCY DOCD AND RVWD INITIA RAD		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3319F	1 DX IMG ORDER CHEST XRAY CT US MRI PET NUC MED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3320F	0 DX IMG ORDER CHEST XRAY CT US MRI PET NUC MED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3321F	AJCC CANCER STAGE 0 OR IA MELANOMA		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3322F	MELANOMA THAN AJCC STAGE 0		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3323F	CLIN TUMOR NODE METASTASES STAGE DOCD PRIOR SURG		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3324F	MRI CT SCAN ORDERED REVIEWED REQUESTED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3325F	PREOP ASSES 12 MOS PRIOR CATARACT SURG W IO LENS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3328F	PERFORMANCE STATUS DOCD RVWD 2 WKS PRIOR SURG		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3330F	IMAGING STUDY ORDERED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3331F	IMAGING STUDY NOT ORDERED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3340F	MAMMO ASSESSMENT CAT INCOMP ADDTNL IMAGE DOCD		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3341F	MAMMO ASSESSMENT CAT NEGATIVE DOCD		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3342F	MAMMO ASSESSMENT CAT BENIGN DOCD		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3343F	MAMMO ASSESSMENT CAT PROB BENIGN DOCD		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3344F	MAMMO ASSESSMENT CAT SUSPICIOUS DOCD		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3345F	MAMMO ASSESSMENT CAT HIGH CHANCE MALIG DOCD		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3350F	MAMMO ASSESSMENT CAT BIOPSY PROVEN MALIG DOCD		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3351F	NEG DEP SYMP CAT USING STAND DEP ASSESS TOOL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3352F	NO SIGNIF DEP SYMP CAT BY STAND DEP ASSESS TOOL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3353F	MILD TO MOD DEP SYMP BY STAND DEP ASSESS TOOL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3354F	CLIN SIGN DEP SYMP BY STAND DEP ASSESS TOOL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3370F	AJCC BREAST CANCER STAGE 0 DOCUMENTED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3372F	AJCC BREAST CANCER STAGE I T1MIC T1A T1B		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3374F	AJCC BREAST CANCER STAGE I T1C		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3376F	AJCC BREAST CANCER STAGE II		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
3378F	AJCC BREAST CANCER STAGE III		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3380F	AJCC BREAST CANCER STAGE IV		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3382F	AJCC COLON CANCER STAGE 0		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3384F	AJCC COLON CANCER STAGE I		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3386F	AJCC COLON CANCER STAGE II		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3388F	AJCC COLON CANCER STAGE III DOCD		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3390F	AJCC COLON CANCER STAGE IV DOCD		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3394F	QUANT HER2 IHC EVAL OF BRST CANCER ASCO CAP		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3395F	QUANT NON-HER2 IHC EVAL OF BRST CANCER PERFORMED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3450F	DYSPNEA SCRND NO-MILD DYSPNEA		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3451F	DYSPNEA SCRND MOD-SEVERE DYSPNEA		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3452F	DYSPNEA NOT SCREENED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3455F	TB SCRNG DONE INTRPD UNDER 6 MOS START RA THXPY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3470F	RHEUMATOID ARTHRITIS (RA) DISEASE ACTIVITY LOW		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3471F	RHEUMATOID ARTHRITIS (RA) DISEASE ACTIVITY MOD		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3472F	RHEUMATOID ARTHRITIS (RA) DISEASE ACTIVITY HIGH		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3475F	DISEASE PROGNOSIS RA ASSESSED POOR PROG DOCD		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3476F	DISEASE PROGNOSIS RA ASSESSED GOOD PROG DOCD		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3490F	HISTORY OF AIDS-DEFINING CONDITION		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3491F	HIV INDETERMINATE INFANTS BORN OF HIV MOTHERS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3492F	HISTORY OF NADIR CD4 PLUS CELL COUNT UNDER 350 CELLS MM3		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3493F	NO HIST NADIR CD4 PLUS CELL CNT UNDER 350 AND AIDS CONDI		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3494F	CD4 PLUS CELL COUNT UNDER 200 CELLS MM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3495F	CD4 PLUS CELL COUNT 200-499 CELLS MM (HIV)		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3496F	CD4 PLUS CELL COUNT EQ OVER 500 CELLS MM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3497F	CD4 PLUS CELL PERCENTAGE UNDER 15PCT HIV		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3498F	CD4 PLUS CELL PERCENTAGE GRT THN EQ 15PCT HIV		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3500F	CD4 PLUS CELL CNT CD4 PLUS CELL PCT DOCD AS DONE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3502F	HIV RNA VIRAL LOAD UNDER LIMITS OF QUANTIF		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3503F	HIV RNA VIRAL LOAD NOT UNDER LIMITS OF QUANTIF		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3510F	DOCD TB SCREEN PERFORMED AND RESULTS INTERPRET		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3511F	CHLAMYDIA GONORRHEA TSTS DOCD AS DONE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3512F	SYPHILIS SCREENING DOCUMENTED AS DONE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3513F	HEPATITIS B SCREENING DOCUMENTED AS PERFORMED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3514F	HEPATITIS C SCREENING DOCUMENTED AS PERFORMED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3515F	PATIENT HAS DOCUMENTED IMMUNITY TO HEPATITIS C		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No

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			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
3517F	HBV STATUS ASSESSED W RESULTS IN 1 YR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3520F	CLOSTRIDIUM DIFFICILE TESTING PERFORMED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3550F	LOW RISK FOR THROMBOEMBOLISM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3551F	INTERMEDIATE RISK FOR THROMBOEMBOLISM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3552F	HIGH RISK FOR THROMBOEMBOLISM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3555F	PT HAD INR MEASUREMENT PERFORMED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3570F	REPORT BONE SCINTIGRAPHY W X-RAY SAME REGION		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3572F	PT POTENTIAL RISK FRACTURE WEIGHT-BEARING SITE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3573F	PT NOT POTENT RISK FRACTURE WEIGHT-BEARING SITE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3650F	ELECTROENCEPHALOGRAM ORDERED RVWD OR REQ		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3700F	PSYCHIATRIC DISORDERS DISTURBANCES ASSESSED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3720F	COGNITIVE IMPAIRMENT DYSFUNCTION ASSESSED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3725F	SCREENING FOR DEPRESSION PERFORMED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3750F	PT NOT RCVNG CORTICOSTERIDSGR THN EQ10MG DAY 60 OR GRT D		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3751F	ELECTRODIAG STUDIES DSP DOCD RVWD W IN 6 MONTHS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3752F	ELECTRODIAG STUDIES DSP NOT DOCD RVWD W IN 6 MON		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3753F	PT HAS CLINICAL SYMP AND SIGNS NEUROPATHY W CAUSE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3754F	SCREENING TSTS DIABETES MELLITUS RVWD RQSTD ORD		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3755F	COGNITIVE AND BEHAVIORAL IMPAIRMENT SCRNG PERFORMED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3756F	PT HAS PSEUDOBULBAR AFFECT SIALORRHEA ALS SYMP		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3757F	NO PSEUDOBULBAR AFFECT SIALORRHEA ALS SYMP		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3758F	PULM FUNC TESTING PEAK COUGH EXPIRATORY FLOW		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3759F	PT SCRND DYSPHAGIA WT LOSS IMPAIRED NUTRITION		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3760F	PT W DYSPHAG WT LOSS IMPAIRED NUTRITION		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3761F	PT WO DYSPHAG WT LOSS IMPAIRED NUTRITION		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3762F	PATIENT IS DYSARTHIC		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3763F	PATIENT IS NOT DYSARTHIC		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3775F	ADENOMA(S) NEOPLASM DETECTED SCRNG CLNSCPY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
3776F	ADENOMA(S) NEOPLASM NOT DETECTED SCRNG CLNSCPY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4000F	TOBACCO USE CESSATION IVNTJ COUNSELING		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4001F	TOBACCO USE CESSATION IVNTJ PHARMACOLOGIC THER		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4003F	PT EDUCATION WRTTN ORAL HRT FAILURE PTS PFRMD		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4004F	PT SCRND TOBACCO USE RCVD TOBACCO CESSATION TALK		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4005F	PHARMACOLOGIC OSTEOPOROSIS THERAPY PRESCRIBED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
4008F	BETA BLOCKER THERAPY RXD CURRENTLY BEING TAKEN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4010F	ACE INHIBITOR ARB THERAPY RXD CURRENTLY TAKEN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4011F	ORAL ANTIPLATELET THERAPY PRESCRIBED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4012F	WARFARIN THERAPY PRESCRIBED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4013F	STATIN THERAPY RXD CURRENTLY TAKEN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4014F	DSCHRG INSTRUCTIONS HRT FAILURE XCP PTS 18 YR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4015F	PRERSISTENT ASTHMA LONG TERM CTRL MED PRESCRIBED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4016F	ANTI-INFLAMMATORY ANALGESIC AGT PRESCRIBED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4017F	GI PROPHYLAXIS NSAID USE PRESCRIBED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4018F	THERAPEUTIC EXERCISE INVOLVED JTS INST PRESCRIBE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4019F	DOCUMENT COUNSELING EXERCISE CALCIUM AND VITAMIN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4025F	INHALED BRONCHODILATOR PRESCRIBED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4030F	LONG-TERM OXYGEN THERAPY PRESCRIBED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4033F	PULMONARY REHABILITATION RECOMMENDED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4035F	INFLUENZA IMMUNIZATION RECOMMENDED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4037F	INFLUENZA IMMUNIZATION ORDERED OR ADMINISTERED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4040F	PNEUMOCOCCAL VACCINE ADMIN RCVD PRIOR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4041F	DOC ORDER CEFAZOLIN CEFUROXIME ANTIMICRB PROPHYL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4042F	DOC PROPHY ANTIBIO NOT GIVEN W IN 4 HR PRIOR SUR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4043F	DOC ORDER DISCONT ANTIBIO W IN 48 HOURS OF SURG		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4044F	DOC ORDER VTE PROPHYL W IN 24 HRS PRIOR SURG		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4045F	APPROPRIATE EMPIRIC ANTIBIOTIC PRESCRIBED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4046F	DOCD ANTIBIO W IN 4 HRS PRIOR INTRAOP SURG INCIS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4047F	DOC ORDER ANTIBIO GIVEN W IN 1 HR PRIOR SURG INC		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4048F	DOC ANTIBIO GIVEN W IN 1 HR PRIOR SURG INCIS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4049F	DOC ORDER GIVEN TO STOP ANTIBIO W IN 24 HRS SURG		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4050F	HYPERTENSION PLAN OF CARE DOCUMENTED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4051F	REFERRED FOR AN ARTERIO-VEINUS (AV) FISTULA		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4052F	HEMODIAL VIA FUNCTIONG AV FISTULA		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4053F	HEMODIALYSIS VIA FUNCTIONING AVGRAFT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4054F	HEMODIALYSIS VIA CATHETER		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4055F	PATIENT RECEIVING PERITONEAL DIALYSIS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4056F	APPROPRIATE ORAL REHYD SOLUTION RECOMMENDED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4058F	PAG PROVIDED TO CAREGIVER		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4060F	PSYCHOTHERAPY SERVICES PROVIDED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4062F	PATIENT REFERRAL FOR PSYCHOTHERAPY DOCUMENTED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
4063F	ANTIDEPRESSANT RXTHXY CONSIDER AND NOT PRESCRIBE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4064F	ANTIDEPRESSANT PHARMACOTHERAPY PRESCRIBED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4065F	ANTIPSYCHOTIC PHARMACOTHERAPY PRESCRIBED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4066F	ELECTROCONVULSIVE THERAPY (ECT) PROVIDED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4067F	PT REFERRAL ELECTROCONVULSIVE THXPY (ECT) DOCD		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4069F	VENOUS THROMBOEMBOLISM (VTE) PROPHYLAXIS RCVD		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4070F	DEEP VEIN THROMB PROPHYL RECVD BY HOSP DAY 2		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4073F	ORAL ANTIPLATELET THERAPY PRESCRIBED AT DISCHARGE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4075F	ANTICOAGULANT THERAPY PRESCRIBED AT DISCHARGE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4077F	DOC T-PA ADMINISTRATION WAS CONSIDERED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4079F	DOC REHAB SERVICES WERE CONSIDERED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4084F	ASPIRIN RECVD W IN 24 HRS PRIOR ED ARRIVAL STAY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4086F	ASPIRIN OR CLOPIDOGREL PRESCRIBED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4090F	PATIENT RECEIVING ERYTHROPOIETIN THERAPY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4095F	PATIENT NOT RECEIVING ERYTHROPOIETIN THERAPY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4100F	BISPHOS THXPY VENOUS ORDERED OR RECEIVED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4110F	LIMA GRAFT USED IN 1ST ISOLATED CABG PXD		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4115F	BETA BLOCKER GIVEN W IN 24 HRS PRIOR SURG INC		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4120F	ANTIBIOTIC PRESCRIBED OR DISPENSED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4124F	ANTIBIOTIC NEITHER PRESCRIBED NOR DISPENSED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4130F	ACUTE OTITIS EXTERNA TOPICAL PREPS PRESCRIBED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4131F	SYSTEMIC ANTIMICROBIAL TX PRESCRIBED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4132F	SYSTEMIC ANTIMICROBIAL TX NOT PRESCRIBED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4133F	ANTIHISTAMINE DECONGESTANT PRESCRIBED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4134F	ANTIHISTAMINE DECONGESTANT NOT PRESCRIBED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4135F	SYSTEMIC CORTICOSTEROIDS PRESCRIBED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4136F	SYSTEMIC CORTICOSTEROIDS NOT PRESCRIBED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4140F	INHALED CORTICOSTEROIDS PRESCRIBED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4142F	CORTICOSTEROID SPARING THERAPY PRESCRIBED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4144F	ALTERNATIVE LONG-TERM CONTROL MEDICATION RXD		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4145F	2 PLUS ANTI-HYPERTENSIVE AGENTS RXD OR TAKEN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4148F	HEPATITIS A VACCINE ADMIN OR PREVIOUSLY RECVD		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4149F	HEPATITIS B VACCINE ADMIN OR PREVIOUSLY RECVD		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4150F	CURRENT HEPATITIS C ANTIVIRAL TREATMENT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4151F	NO CURRENT HEPATITIS C ANTIVIRAL TREATMENT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4153F	COMB PEGINTERF RIBAVIRIN TX PRESCRIBED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4155F	HEPATITIS A VACCINE SERIES PREVIOUSLY RECEIVED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4157F	HEPATITIS B VACCINE SERIES PREVIOUSLY RECEIVED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4158F	PATIENT COUNSELED ABOUT RISKS ALCOHOL USE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4159F	CONTRACEPTION COUNSEL BEFORE ANTIVIRAL TX		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4163F	PT COUNSELING TREATMENT OPTIONS PROSTATE CANCER		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4164F	ADJUVANT HORMONAL THXPY RX ADMIN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
4165F	3D-CRT OR INTENSITY MODUL RAD THXPY RECVD		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4167F	HEAD-BED ELEV 30-45 DEG 1ST VENT DAY ORDERED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4168F	PT RCVG CARE ICU AND RCVNG MECH VENT 24 HRS OR LESS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4169F	PT NOT RCVG CARE IN ICU NOT RCVG MECHL VENT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4171F	PATIENT RECEIVING (ESA) THERAPY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4172F	PATIENT NOT RECEIVING (ESA) THERAPY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4174F	TLK VIS FXN AND QUAL LIFE TRXMNT FOR PT CRGVR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4175F	CORRECT VISUAL ACUIT 20 40 OR GRT W IN 90 DAYS SURG		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4176F	COUNSEL UV LITE PROTEC PREV PROG CATARACT DEVEL		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4177F	COUNSEL BENEF RISK AREDS PREV AGE RELATED AMD		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4178F	ANTI-D IMMUNE GLOBULIN RCVD 26-30 WKS GESTATION		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4179F	TAMOXIFEN OR AROMATASE INHIBITOR (AI) RXD		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4180F	ADJVNT CHEMO RFRRD RXD RCVD STAGE III COLON CA		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4181F	CONFORMAL RADIATION THERAPY RECEIVED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4182F	CONFORMAL RADIATION THERAPY NOT RECEIVED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4185F	NONSTOP 12MON THXPY W PPI OR H2 H2RA RCVD		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4186F	NO CONTIN 12MON THXPY W PPI OR H2 H2RA RCVD		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4187F	DIS MODFY ANTI-RHEU DRUG THXPY RX GVN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4188F	APPROP ACE ARB THXP MONIT TEST ORDRD DONE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4189F	APPROP DIGOXIN THXP MONIT TST ORDRD DONE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4190F	APPROP DIURETIC THXP MONIT TST ORDRD DONE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4191F	APPROP ANTICONVUL THXP MONIT TST ORDRD DONE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4192F	PATIENT NOT RECEIVING GLUCOCORTICOID		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4193F	PATIENT RCVNG UNDER 10 MG DAILY PREDNISONE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4194F	PATIENT RCVNG EQ OVER 10 MG DAILY PREDNISONE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4195F	PT RCVNG 1ST BIOL ANTI-RHEUM DRUG THXPY FOR RA		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4196F	PT NOT RCVNG 1ST BIOL ANTI-RHEUM DRUG THXPY RA		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4200F	EXTRNL BM RADIOTHXPY TO PROST W WO NODAL IRRAD		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4201F	EXTRNL BM RADIOTHXPY W WO NODAL IRRAD AS ADJV		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4210F	ACE ARB MEDICATION THERAPY 6 MONTHS OR GRT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4220F	DIGOXIN MEDICATION THERAPY 6 MONTHS OR GRT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4221F	DIURETIC MEDICATION THERAPY 6 MOS OR GRT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4230F	ANTICONVUL MED THERAPY 6 MOS OR GRT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4240F	INSTR THER XRCS-DR FLLWUP PT EPSD BACK PN OVER 12 WK		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4242F	TLK RE SPRVSD XRCS PROG TO PTS BACK PN OVER 12WKS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4245F	PT TLK 1ST VST TO KEEP RESUME NORMAL ACTIVITIES		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
4248F	COUNSEL INIT BACK PAIN AGNST BED REST 4 DAYS OR GRT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4250F	ACTV WRMNG INTRAOP FOR NORMOTHERMIA		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4255F	DURATION GEN NEUR ANESTH 60 MINS OR GRT DOC RECORD		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4256F	DURATION GEN NEUR ANESTH UNDER 60 MIN DOCD RECORD		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4260F	WOUND SURFACE CULTURE TECHNIQUE USED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4261F	TECH OTHER THAN SURFACE CULTURE WOUND EXUD USED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4265F	USE OF WET TO DRY DRESSINGS PRESCRIBED RECMD		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4266F	USE WET TO DRY DRESSINGS NEITHER RXD NOR RECMD		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4267F	COMPRESSION THERAPY PRESCRIBED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4268F	PT ED RE NEED LONG TERM COMPRESS THXPY RCVD		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4269F	APPROP METHOD OFFLOADING PRESCRIBED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4270F	PT RCVNG POTENT ANTI R-VIRAL THX 6 MON OR MORE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4271F	PT RCVNG POT ANTI R-VIRAL THX UNDER 6 MON NOT RCVN		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4274F	FLU IMMUNO ADMIND PREVIOUSLY RCVD		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4276F	POTENT ANTIRETROVIRAL THERAPY PRESCRIBED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4279F	PNEUMOCYSTIS JIROVECI PNEUMONIA PROPHYLAXIS RXD		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4280F	PNEUMOCYS JIROVECI PNEUMO PRPHYLXS PRSCRBD 3 MON		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4290F	PATIENT SCREENED FOR INJECTION DRUG USE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4293F	PT SCRND HGH-RSK SEXUAL BEHAVIOR		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4300F	PT RCVNG WARFARIN THXPY NONVALV AFIB OR AFLUT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4301F	PT NOT RCVNG WARFARIN THXPY NONVALV AFIB AFLUT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4305F	PT EDUC FOOT CARE AND DAILY INSPCTN FEET RCVD		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4306F	PT COUNSEL PSYCHOSOC AND PHARM TX OPIOID ADDICTION		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4320F	PT COUNSEL PSYCHSOC AND PHARM TX ALCOHOL DEPEND		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4322F	CRGVR PROVIDED W ED REFERRED ADDL RESOURCES		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4324F	PT QUERIED PARKINSONS MED-RELATED COMPLICATION		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4325F	MEDICAL AND SURGICAL TREATMENT OPTION REVIEW W P		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4326F	PT CAREGIVER QUERIED AUTONOMIC DYSFUNCJ SYMPTOMS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4328F	PT CAREGIVER QUERIED SLEEP DISTURBANCES		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4330F	EPILEPSY SPECIFIC SAFETY COUNSELING TO PATIENT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4340F	COUNSEL WOMEN CHILDBEARING POTENTIAL W EPILEPSY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4350F	COUNSELING PROVIDED SYMP MNGMNT PALLIATION		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
4400F	REHAB THERAPY OPTIONS DISCUSSED W PATIENT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4450F	SELF-CARE EDUCATION PROVIDED TO PATIENT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4470F	IMPLANT CARDIOVERT-DEFIB (ICD) COUNSELING PROV		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4480F	PT RCVNG ACE ARB BETA BLOCKER TX 3 MONS LONGER		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4481F	PT RCVNG ACE ARB AND BETA BLOCKER UNDER 3 MONTHS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4500F	REFERRED TO OUTPT CARD REHABILITATION PROGRAM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4510F	PREVIOUS CARDIAC REHAB FOR QUAL CARD EVENT DONE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4525F	NEUROPSYCHIATRIC INTERVENTION ORDERED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4526F	NEUROPSYCHIATRIC INTERVENTION RECEIVED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4540F	DISEASE MODIFYING PHARMACOTHERAPY DISCUSSED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4541F	TX PSEUDOBULBAR AFFECT SIALORRHEA ALS SYMP		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4550F	OPTIONS NONINVASIVE RESP SUPPORT DISCUSSED W PT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4551F	NUTRITIONAL SUPPORT OFFERED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4552F	PT OFFERED REFERRAL SPEECH LANGUAGE PATHOLOGIST		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4553F	PT OFFERED ASSISTANCE PLANNING END LIFE ISSUES		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4554F	PT RECEIVED INHALATIONAL ANESTHETIC AGENT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4555F	PT DID NOT RECEIVE INHALATIONAL ANESTHETIC AGENT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4556F	PT SHOWS 3 PLUS RISK FACTORS POST-OP NAUSEA AND VOMITING		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4557F	PT NO EXHIBIT 3 PLUS RISK FACTORS POST-OP NAUSEA VOM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4558F	PT RCEVD 2 PROPHYLACTIC RX AGENTS PRE AND INTRA-OP		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4559F	1BODY TEMP MEASGRT THN EQ35.5C IN 30-15 MINS POST ANESTH		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4560F	ANESTH DID NOT INVOLVE GENERAL NEURAXIAL ANESTH		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4561F	PATIENT HAS A CORONARY ARTERY STENT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4562F	PATIENT DOES NOT HAVE A CORONARY ARTERY STENT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
4563F	PT RECVD ASPIRIN W IN 24 HRS PRIOR ANESTH START		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
5005F	COUNSEL NEW CHANGING MOLES SELF-EXAMINATION		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
5010F	DILATED MACULAR FUNDUS XM COMMUNJ TX PHYS QHP		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
5015F	DOCD CONTACT THAT FX EXISTED AND PT TSTED TXD OP		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
5020F	TX SUMM RPRT COMMUN PHYS AND PT 1 MO COMPLETE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
5050F	TX COMMUN PROVIDERS CONTINUING CARE 1 MO DX		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
5060F	FINDNGS DIAG MAM TO MNGNG PRACT 3 DAYS INTERP		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No

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			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
5062F	DOC DIRECT COMM DIAG MAMMO FNDNGS-PHONE PERSON		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
5100F	FX RISK REF PHYS QHP COMMJ 24 HRS IMAGING STUDY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
5200F	CONSID NEURO EVAL APPROP SURG THXPY EPIL 3YRS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
5250F	ASTHMA DISCHARGE PLAN PRESENT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
6005F	RATIONALE FOR LEVEL OF CARE DOCUMENTED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
6010F	DYSPHAGIA SCREENING PRIOR ORAL INTAKE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
6015F	PATIENT OK FOR PER ORAL INTAKE (FOOD MEDICATION)		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
6020F	NOTHING BY MOUTH ORDERED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
6030F	ALL ELEM OF MAX STERILE BARRIER TECHNQ FLWD		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
6040F	USE APPROP RAD DOSE RDXN DEV MAN TECHS DOCD		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
6045F	RAD EXPOS TIME IN LAST RPRT FLUORO PRXD DOCD		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
6070F	PATIENT QUERIED COUNSELED RE AED SIDE EFFECTS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
6080F	PATIENT QUERIED ABOUT FALLS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
6090F	PATIENT SAFETY COUNSEL DISEASE STAGE APPROPRIATE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
6100F	VERIFY CORRECT PT SITE PXD DOCUMENTED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
6101F	SAFETY COUNSELING DEMENTIA PROVIDED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
6102F	SAFETY COUNSELING DEMENTIA ORDERED		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
6110F	COUNSELING PROV RE RISKS DRIVING ALT TO DRIVING		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
6150F	PT NOT RCVNG 1ST COURSE OF ANTI-TNF THERAPY		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
7010F	PT INFORMATION ENTERED INTO RECALL SYSTEM		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
7020F	MAMMO ASSESSMENT CAT IN DATABASE FOR RATE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
7025F	INFO SYSTEM ANALYSIS ABNORMAL INTERPRATE		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
9001F	AORTIC ANEURYSM UNDER 5CM MAX DIAM CENTERLINE AXIAL CT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
9002F	AORTIC ANEURYSM 5-5.4CM MAX DIAM CTRLN AXIAL CT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
9003F	AORTIC ARYSM 5.5-5.9CM MAX DIAM CTRLN AXIAL CT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
9004F	AORTIC ANEURYSM 6 OR GRT CM MAX DIAM CTRLN AXIAL CT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
9005F	ASYMPT CAROT STEN NO ISCHEM STRK CAROT VRTBROBAS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
9006F	SYMPT CAROT STENOS IPSIL CAROT TIA STRK UNDER 120DAYS		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
9007F	OTHER CAROTID STENT IPSIL TIA STRK 120 DAYS OR GRT		Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	No
0002M	LIVER DIS 10 ASSAYS SERUM ALGORITHM W ASH		Not Cov	Not Cov	Not Cov	Not Cov		No	No
0003M	LIVER DIS 10 ASSAYS SERUM ALGORITHM W NASH		Not Cov	Not Cov	Not Cov	Not Cov		No	No
0004M	SCOLIOSIS 53 SNPS SALIVA PROGNOSTIC RISK SCORE	No, pregnancy related if covered	Not Cov	Yes	Not Cov	Yes		Not Cov	Yes
0006M	ONCOLOGY HEP MRNA 161 GENES RISK CLASSIFIER	No, pregnancy related if covered	Not Cov	Yes	Not Cov	Yes		Yes	Yes
0007M	ONCOLOGY GASTRO 51 GENES NOMOGRAM DISEASE INDEX	No, pregnancy related if covered	Not Cov	Yes	Not Cov	Yes		Yes	Yes
0009M	FETAL ANEUPLOIDY 21 18 SEQ ANALY TRISOM RISK	PA Req all Dx	Not Cov	Not Cov	Not Cov	Not Cov		Not Cov	Yes

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			Outpatient		ASC	Office Setting			
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0011M	ONC PRST8 CA MRNA 12 GENES BLD PLSM AND UR ALG		Not Cov	Not Cov	Not Cov	Not Cov		No	No
0012M	ONC MRNA 5 GENES UR ALG RISK UROTHELIAL CANCER		Not Cov	Not Cov	Not Cov	Not Cov		No	No
0013M	ONC MRNA 5 GENES UR ALG RISK RECR UROTHELIAL CA		Not Cov	Not Cov	Not Cov	Not Cov		No	No
0001U	RBC DNA HEA 35 AG 11 BLD GRP WHL BLD CMN ALLEL		Not Cov	Not Cov	Not Cov	Not Cov		No	No
0002U	ONC CLRCT QUAN 3 UR METABOLITES ALG ADNMTS PLP		Not Cov	Not Cov	Not Cov	Not Cov		No	No
0003U	ONC OVARIAN ASSAY 5 PROTEINS SERUM ALG SCOR		Not Cov	Not Cov	Not Cov	Not Cov		No	No
0005U	ONCO PRST8 GENE XPRS PRFL 3 GENE UR ALG RSK SCOR	No, pregnancy related if covered	Yes	Yes	Not Cov	Yes		Yes	Yes
0006U	RX MONITORING 120 PLUS DRUGS AND SUBSTANCES		Not Cov	Not Cov	Not Cov	Not Cov		No	No
0007U	RX TEST PRESUMPTIVE URINE W DEF CONFIRMATION		Not Cov	Not Cov	Not Cov	Not Cov		No	No
0008U	HPYLORI DETECTION AND ANTIBIOTIC RESISTANCE DNA	No, pregnancy related if covered	Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
0009U	ONC BRST CA ERBB2 COPY NUMBER FISH AMP NONAMP	No, pregnancy related if covered	Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
0010U	NFCT DS STRN TYP WHL GENOME SEQUENCING PR ISOL	No, pregnancy related if covered	Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
0011U	RX MNTR DRUGS PRESENT LC-MS MS ORAL FLUID PR DOS	No, pregnancy related if covered	Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
0012U	GERMLN DO GENE REARGMT DETCJ DNA WHOLE BLOOD	No, pregnancy related if covered	Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
0013U	ONC SLD ORGN NEO GENE REARGMT DNA FRSH FRZN TISS	No, pregnancy related if covered	Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
0014U	HEM HMTLMF NEO GENE REARGMT DNA WHL BLD MARROW	No, pregnancy related if covered	Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
0016U	ONC HMTLMF NEO RNA BCR ABL1 BLD BNE MARROW	No, pregnancy related if covered	Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
0017U	ONC HMTLMF NEO JAK2 MUTATION DNA BLD BNE MARROW	No, pregnancy related if covered	Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
0018U	ONC THYR 10 MICRORNA SEQ PLUS - RSLT MOD HI RSK MAL		Not Cov	Not Cov	Not Cov	Not Cov		No	No
0019U	ONC RNA WHL TRANSCRIPTOME SEQ TISS PREDCT ALG		Not Cov	Not Cov	Not Cov	Not Cov		No	No
0021U	ONC PRST8 DETCJ 8 AUTOANTIBODIES ALG RSK SCOR		Not Cov	Not Cov	Not Cov	Not Cov		No	No
0022U	TRGT GEN SEQ ALYS NONSM LNG NEO DNA AND RNA 23 GENES		Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
0023U	ONC AML DNA GNTYP INT TANDEM DUP DETCJ NONDETCJ		Not Cov	Not Cov	Not Cov	Not Cov		No	No
0024U	GLYCA NUC MR SPECTROSCOPY QUANTITATIVE		Not Cov	Not Cov	Not Cov	Not Cov		No	No
0025U	TENOFOVIR LIQ CHROM TANDEM MASS SPECT UR QUAN		Not Cov	Not Cov	Not Cov	Not Cov		No	No
0026U	ONC THYR DNA AND MRNA 112 GENES FNA NDUL ALG ALYS	No, pregnancy related if covered	Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
0027U	JAK2 GENE ANALYSIS TRGT SEQ ALYS EXONS 12-15	No, pregnancy related if covered	Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
0029U	RX METAB ADVRS RX RXN AND RSPSE TRGT SEQ ALYS	No, pregnancy related if covered	Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
0030U	RX METAB WARFARIN RX RESPONSE TRGT SEQ ALYS	No, pregnancy related if covered	Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
0031U	CYP1A2 GENE ANALYSIS COMMON VARIANTS	No, pregnancy related if covered	Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
0032U	COMT GENE ANALYSIS C.472G OVER A VARIANT	No, pregnancy related if covered	Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
0033U	HTR2A HTR2C GENE ANALYSIS COMMON VARIANTS	No, pregnancy related if covered	Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
0034U	TPMT NUDT15 GENE ANALYSIS COMMON VARIANTS	No, pregnancy related if covered	Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
0035U	NEURO CSF DETCJ PRION PRTN QUAKG CONF CONV QUAL		Not Cov	Not Cov	Not Cov	Not Cov		No	No
0036U	EXOME TUMOR TISSUE AND NORMAL SPECIMEN SEQ ALYS		Not Cov	Not Cov	Not Cov	Not Cov		No	No
0037U	TRGT GEN SEQ ALYS SLD ORGN NEO DNA 324 GENES	No, pregnancy related if covered	Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
0038U	VITAMIN D SERUM MICROSAMPLE QUANTITATIVE		Not Cov	Not Cov	Not Cov	Not Cov		No	No
0039U	DNA ANTIBODY DOUBLE STRANDED HIGH AVIDITY		Not Cov	Not Cov	Not Cov	Not Cov		No	No
0040U	BCR ABL1 GENE TLCJ ALYS MAJOR BP QUANTITATIVE		Not Cov	Not Cov	Not Cov	Not Cov		No	No
0041U	B BURGENDORFERI ANTB 5 PRTN GRP IMMUNOBLOT IGM		Not Cov	Not Cov	Not Cov	Not Cov		No	No
0042U	B BURGENDORFERI ANTB 12 PRTN GRP IMMUNOBLOT IGG		Not Cov	Not Cov	Not Cov	Not Cov		No	No
0043U	TBRF B GRP ANTB DETCJ 4 RECOMB PRTN IMUNOBLT IGM		Not Cov	Not Cov	Not Cov	Not Cov		No	No
0044U	TBRF B GRP ANTB DETCJ 4 RECOMB PRTN IMUNOBLT IGG		Not Cov	Not Cov	Not Cov	Not Cov		No	No
0045U	ONC BRST DUX CARC IS MRNA 12 GENES ALG RSK SCOR	No, pregnancy related if covered	Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
0046U	FLT3 GENE INT TANDEM DUPL VARIANTS QUANTITATIVE	No, pregnancy related if covered	Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
0047U	ONC PRST8 MRNA GEN XPRS PRFL 17 GEN ALG RSK SCOR	No, pregnancy related if covered	Yes	Yes	Not Cov	Yes		Yes	Yes
0048U	ONC SLD ORG NEO DNA 468 CANCER ASSOCIATED GENES	No, pregnancy related if covered	Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
0049U	NPM1 GENE ANALYSIS QUANTITATIVE	No, pregnancy related if covered	Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
0050U	TRGT GEN SEQ ALYS AML 194 GENE INTERROG SEQ VRNT	No, pregnancy related if covered	Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
0051U	RX MNTR DRUGS PRESENT LC-MS MS UR 31 DRUG PANEL		Not Cov	Not Cov	Not Cov	Not Cov		No	No
0052U	LPOPRTN BLD W 5 MAJ CLASS AUTO PRFL UCENFRUGTN		Not Cov	Not Cov	Not Cov	Not Cov		No	No
0053U	ONC PRST8 CA FISH ALYS 4 GENES NDL BX SPEC ALG	No, pregnancy related if covered	Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
0054U	RX MNTR 14 PLUS CLASS DRUGS AND SBSTS CAPILLARY BLOOD		Not Cov	Not Cov	Not Cov	Not Cov		No	No
0055U	CARD HRT TRNSPL 96 TARGET DNA SEQUENCES PLASMA	No, pregnancy related if covered	Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
0056U	HEM AML DNA GENE REARRANGEMENT BLOOD BONE MARROW	No, pregnancy related if covered	Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
0057U	ONC SLD ORG NEO MRNA 51 GENES ALG NML PCT RANK	No, pregnancy related if covered	Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
0058U	ONC MERKEL CELL CARC DETCJ ANTB SERUM QUAN	No, pregnancy related if covered	Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
0059U	ONC MERKEL CELL CARC DETCJ ANTB SERUM REPRTD PLUS -	No, pregnancy related if covered	Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes
0060U	TWN ZYG GEN TRGT SEQ ALYS CHRMS2 FTL DNA MAT BLD	No, pregnancy related if covered	Not Cov	Not Cov	Not Cov	Not Cov		Yes	Yes

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			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
0061U	TC MEAS 5 BIOMARKERS W SFDI MULTI-SPECTRAL ALYS		Not Cov	Not Cov	Not Cov	Not Cov		No	No
0062U	AI SLE IGG AND IGM ALYS 80 BMRK SRM ALG RSK SCORE		Not Cov	Not Cov	Not Cov	Not Cov		No	No
0063U	NEURO AUTISM 32 AMINES PLSM ALG METAB SIGNATURE		Not Cov	Not Cov	Not Cov	Not Cov		No	No
0064U	ANTIBODY TREPONEMA PALLIDUM TOTAL AND RPR IA QUAL		Not Cov	Not Cov	Not Cov	Not Cov		No	No
0065U	SYPHILIS TST NON-TREPONEMAL ANTIBODY IA QUAL RPR		Not Cov	Not Cov	Not Cov	Not Cov		No	No
0066U	PAMG-1 IA W DIR OPT OBS CERVICO-VAG FLU EA SPEC		Not Cov	Not Cov	Not Cov	Not Cov		No	No
0067U	ONC BRST IMHCHEM PRTN XPRS PRFL 4 BMRK CA PRTN		Not Cov	Not Cov	Not Cov	Not Cov		No	No
0068U	CANDIDA SPECIES PANEL AMP PRB TQ W QUAL REPORT		Not Cov	Not Cov	Not Cov	Not Cov		No	No
0069U	ONC CLRCT MICRORNA XPRS PRFL MIR-31-3P ALG		Not Cov	Not Cov	Not Cov	Not Cov		No	No
0070U	CYP2D6 GENE ANALYSIS COMMON AND SELECT RARE VRNTS		Not Cov	Not Cov	Not Cov	Not Cov		No	No
0071U	CYP2D6 GENE ANALYSIS FULL GENE SEQUENCE		Not Cov	Not Cov	Not Cov	Not Cov		No	No
0072U	CYP2D6 GENE TRGT SEQ ALYS CYP2D6-2D7 HYBRID GENE		Not Cov	Not Cov	Not Cov	Not Cov		No	No
0073U	CYP2D6 GENE TRGT SEQ ALYS CYP2D7-2D6 HYBRID GENE		Not Cov	Not Cov	Not Cov	Not Cov		No	No
0074U	CYP2D6 TRGT SEQ ALYS NONDUP GENE DUPL MLT TRANS		Not Cov	Not Cov	Not Cov	Not Cov		No	No
0075U	CYP2D6 GENE TRGT SEQ ALYS 5' GENE DUPL MLT		Not Cov	Not Cov	Not Cov	Not Cov		No	No
0076U	CYP2D6 GENE TRGT SEQ ALYS 3' GENE DUPL MLT		Not Cov	Not Cov	Not Cov	Not Cov		No	No
0077U	IG PARAPROTEIN QUAL IMPRCIP AND MS BLD UR W ISOTYPE		Not Cov	Not Cov	Not Cov	Not Cov		No	No
0078U	PAIN MGT OPIOID USE DO GNOTYP PNL 16 CMN VRNTS		Not Cov	Not Cov	Not Cov	Not Cov		No	No
0079U	CMPRTV DNA ALYS MLT SNPS UR AND BUCCAL SPEC ID VERIF		Not Cov	Not Cov	Not Cov	Not Cov		No	No
0080U	ONC LUNG 5 CLINICAL RISK FACTORS ALG PRBLTY MAL		Not Cov	Not Cov	Not Cov	Not Cov		No	No
0081U	ONC UVEAL MLNMA MRNA GEN XPRS PRFL 15 GENE ALG		Not Cov	Not Cov	Not Cov	Not Cov		No	No
0082U	RX TST DEF 90 PLUS RX SBSTS UR REPRT PRES ABS EA RX		Not Cov	Not Cov	Not Cov	Not Cov		No	No
0083U	ONC RSPSE CHEMOTX RX MOTILITY CNTRST TOMOGRAPHY		Not Cov	Not Cov	Not Cov	Not Cov		No	No
0084U	RBC DNA GNOTYP 10 BLD GRP PHNT PREDICT 37 RBC AG		Not Cov	Not Cov	Not Cov	Not Cov		No	No
0085U	CDTB AND VINCULIN IGG ANTIBODIES BY IMMUNOASSAY		Not Cov	Not Cov	Not Cov	Not Cov		No	No
0086U	NFCT DS BACT AND FNG ORG ID BLD CUL RRNA FISH 6 PLUS TRGT		Not Cov	Not Cov	Not Cov	Not Cov		No	No
0087U	CARD HRT TRNSPL MRNA GEN XPRS PRFL 1283 GENE ALG		Not Cov	Not Cov	Not Cov	Not Cov		No	No
0088U	TRNSPLJ MED KDN ALGRFT REJ 1494 GENES ALG		Not Cov	Not Cov	Not Cov	Not Cov		No	No

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This prior authorization guide applies to Medicaid, Medicare, and Marketplace.

DOS Effective 10/1/19; Posted 10/30/19

All Inpatient services require prior authorization

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*** All Medicare services subject to the limitations in the CMS billing guide and fee schedules at <https://www.cms.gov/> ***

Code	Code Description	Comments	Apple Health & IMC Medical				IMC / BHSO (Mental Health covered svcs)	Medicare	Market Place
			Outpatient		ASC	Office Setting			
			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
0089U	ONC MLNMA GEN XPRS PRFL RTQPCR PRAME AND LINC00518		Not Cov	Not Cov	Not Cov	Not Cov		No	No
0090U	ONC CUTAN MLNMA MRNA GEN XPRS PRFL 23 GENES ALG		Not Cov	Not Cov	Not Cov	Not Cov		No	No
0091U	ONC CLRCT SCR CLL ENUM CRG TUM CLL WHL BLD ALG		Not Cov	Not Cov	Not Cov	Not Cov		No	No
0092U	ONC LUNG 3 PRTN BMRK IA PLSM ALG RSK SCOR MALIG		Not Cov	Not Cov	Not Cov	Not Cov		No	No
0093U	RX MNTR 65 COM DRUGS LC-MS MS UR DETC NOT DETC		Not Cov	Not Cov	Not Cov	Not Cov		No	No
0094U	GENOME RAPID SEQUENCE ANALYSIS		Not Cov	Not Cov	Not Cov	Not Cov		No	No
0095U	INFLAMMATION EE ELISA Alys ALG PREDICT PROB IDX		Not Cov	Not Cov	Not Cov	Not Cov		No	No
0096U	HPV HIGH RISK TYPES MALE URINE		Not Cov	Not Cov	Not Cov	Not Cov		No	No
0097U	GI PTHGN MULT REV TRANS AND AMP PRB TECH 22 TRGT		Not Cov	Not Cov	Not Cov	Not Cov		No	No
0098U	RESPIR PTHGN MULT REV TRANS AND AMP PRB TECH 14 TRGT		Not Cov	Not Cov	Not Cov	Not Cov		No	No
0099U	RESPIR PTHGN MULT REV TRANS AND AMP PRB TECH 20 TRGT		Not Cov	Not Cov	Not Cov	Not Cov		No	No
0100U	RESPIR PTHGN MULT REV TRANS AND AMP PRB TECH 21 TRGT		Not Cov	Not Cov	Not Cov	Not Cov		No	No
0101U	HERED COLON CA DO GEN SEQ Alys PANEL 15 GENES		Not Cov	Not Cov	Not Cov	Not Cov		No	No
0102U	HERED BRST CA RLTD DO GEN SEQ Alys PNL 17 GENES		Not Cov	Not Cov	Not Cov	Not Cov		No	No
0103U	HERED OVARIAN CANCER GEN SEQ Alys PANEL 24 GENES		Not Cov	Not Cov	Not Cov	Not Cov		No	No
0105U	NEPHROLOGY CKD ECLIA TUMOR NECROSIS ALG RKFD		Not Cov	Not Cov	Not Cov	Not Cov		TBD	TBD
0106U	GASTRIC EMPTYING SERIAL COLLJ 7 TIMED BRTH SPEC		Not Cov	Not Cov	Not Cov	Not Cov		TBD	TBD
0107U	C DIFF TOXIN ANTIGEN DETCJ IA TECH STOOL QUAL		Not Cov	Not Cov	Not Cov	Not Cov		TBD	TBD
0108U	GI BARRETTS ESOPH QUAN IMMUNOLABEL 9 PRTN BMRK		Not Cov	Not Cov	Not Cov	Not Cov		TBD	TBD
0109U	ID ASPERGILLUS DNA 4 SPECIES BLD LVG FLU TISS		Not Cov	Not Cov	Not Cov	Not Cov		TBD	TBD
0110U	RX MNTR 1 PLUS ORAL ONC RX AND SBSTS SRM PLSM CAP		Not Cov	Not Cov	Not Cov	Not Cov		TBD	TBD
0111U	ONCOLOGY COLON CANCER TRGT KRAS AND NRAS GENE Alys		Not Cov	Not Cov	Not Cov	Not Cov		TBD	TBD
0112U	IADI TRGT SEQ Alys 16S AND 18S RRNA GENES		Not Cov	Not Cov	Not Cov	Not Cov		TBD	TBD
0113U	ONCOLOGY PRST8 MEAS PCA3 AND Tmprss2-ERG UR AND PS		Not Cov	Not Cov	Not Cov	Not Cov		TBD	TBD
0114U	GI BARRETTS ESOPHAGUS VIM AND CCNA1 MTHYLTN Alys A		Not Cov	Not Cov	Not Cov	Not Cov		TBD	TBD
0115U	RESPIR IADNA 18 VIRAL TYPE AND SUBTYPE AND 2 BAC		Not Cov	Not Cov	Not Cov	Not Cov		TBD	TBD
0116U	RX MNTR NZM IA 35 PLUS DRUGS LC-MS MS ORAL FLUID A		Not Cov	Not Cov	Not Cov	Not Cov		TBD	TBD
0117U	PAIN MGMT Alys 11 ENDOGENOUS ANALYTES URINE ALG		Not Cov	Not Cov	Not Cov	Not Cov		TBD	TBD
0118U	TRANSPLANTATION MED QUAN DON-DRV CLL-FR DNA PLSM		Not Cov	Not Cov	Not Cov	Not Cov		TBD	TBD

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			Facility	Prof (POS 22)	(POS 24)	(POS 11/20/81)			
0119U	CARDIOLOGY CERAMIDES LIQ CHROM TANDEM MS PLASMA		Not Cov	Not Cov	Not Cov	Not Cov		TBD	TBD
0120U	ONC B CLL LYMPHM MRNA GENE XPRSN PRFL 58 GEN ALG		Not Cov	Not Cov	Not Cov	Not Cov		TBD	TBD
0121U	SICKLE CELL DISEASE VCAM-1 WHOLE BLOOD		Not Cov	Not Cov	Not Cov	Not Cov		TBD	TBD
0122U	SICKLE CELL DISEASE P-SELECTIN WHOLE BLOOD		Not Cov	Not Cov	Not Cov	Not Cov		TBD	TBD
0123U	MCHNL FRGLTY RBC SHEAR STRS AND SPECTRAL ALYS PRFL		Not Cov	Not Cov	Not Cov	Not Cov		TBD	TBD
0124U	FTL CGEN ABNOR BIOCHEM ASSAY 3 ANALYTES ALG		Not Cov	Not Cov	Not Cov	Not Cov		TBD	TBD
0125U	FTL CGEN ABNOR AND PRNT COMP 5 ANALYTES ALG		Not Cov	Not Cov	Not Cov	Not Cov		TBD	TBD
0126U	FTL CGEN ABNOR AND PRNT COMP 5 ANAL ASSMT Y CHRMSM		Not Cov	Not Cov	Not Cov	Not Cov		TBD	TBD
0127U	OB PREECLAMPSIA BIOCHEM ASSAY 3 ANALYTES ALG		Not Cov	Not Cov	Not Cov	Not Cov		TBD	TBD
0128U	OB PE BIOCHEM ASSAY 3 ANAL QUAL ASSMT Y CHRMSM		Not Cov	Not Cov	Not Cov	Not Cov		TBD	TBD
0129U	HEREDITARY BRST CA RLTD DO GEN SEQ AND DEL DUP PNL		Not Cov	Not Cov	Not Cov	Not Cov		TBD	TBD
0130U	HEREDITARY COLON CA DO TRGT MRNA SEQ ALYS PANEL		Not Cov	Not Cov	Not Cov	Not Cov		TBD	TBD
0131U	HERED BRST CA RLTD DO TRGT MRNA SEQ ALYS 13 GENE		Not Cov	Not Cov	Not Cov	Not Cov		TBD	TBD
0132U	HERED OVA CA RLTD DO TRGT MRNA SEQ ALYS 17 GENE		Not Cov	Not Cov	Not Cov	Not Cov		TBD	TBD
0133U	HERED PRST8 CA RLTD DO TRGT MRNA SEQ ALYS 11 GEN		Not Cov	Not Cov	Not Cov	Not Cov		TBD	TBD
0134U	HEREDITARY PAN CA TRGT MRNA SEQ ALYS 18 GENE		Not Cov	Not Cov	Not Cov	Not Cov		TBD	TBD
0135U	HEREDITARY GYN CA TRGT MRNA SEQ ALYS 12 GENE		Not Cov	Not Cov	Not Cov	Not Cov		TBD	TBD
0136U	ATM MRNA SEQUENCE ANALYSIS		Not Cov	Not Cov	Not Cov	Not Cov		TBD	TBD
0137U	PALB2 MRNA SEQUENCE ANALYSIS		Not Cov	Not Cov	Not Cov	Not Cov		TBD	TBD
0138U	BRCA1 BRCA2 MRNA SEQUENCE ANALYSIS		Not Cov	Not Cov	Not Cov	Not Cov		TBD	TBD