



Prior Authorization List, Eff. 08/2024

Category	Code	Code Description	MHC Notes
Cosmetic Potential	00103	Anesthesia for reconstructive procedures of eyelid (eg, blepharoplasty, ptosis surgery)	NO
Cosmetic Potential	00170	ANESTH,PROCEDURE ON MOUTH	NO
Cosmetic Potential	00402	ANESTH,SURG BREAST RECONSTRUCTIVE	NO
Transplant	00580	Anesthesia for heart transplant or heart/lung transplant	NO
Transplant	00796	Anesthesia for intraperitoneal procedures in upper abdomen including laparoscopy; liver transplant (recipient)	NO
Bariatric Surgery	00797	Anesthesia for intraperitoneal procedures in upper abdomen, including laparoscopy; gastric restrictive procedure for morbid obesity	NO
Surgical - Misc.	01999	UNLISTED ANESTH PROCEDURE	YES
Surgical - Misc.	11471	REMOVAL, SWEAT GLAND LESION	NO
Cosmetic Potential	11920	Tattooing, intradermal introduction of insoluble opaque pigments to correct color defects of skin, including micropigmentation	YES
Cosmetic Potential	11921	Tattooing, intradermal introduction of insoluble opaque pigments to correct color defects of skin, including micropigmentation	YES
Cosmetic Potential	11922	Tattooing, intradermal introduction of insoluble opaque pigments to correct color defects of skin, including micropigmentation	YES
Cosmetic Potential	11950	Subcutaneous injection of filling material (eg, collagen); 1 cc or less	YES
Cosmetic Potential	11951	Subcutaneous injection of filling material (eg, collagen); 1.1 to 5.0 cc	YES
Cosmetic Potential	11952	Subcutaneous injection of filling material (eg, collagen); 5.1 to 10.0 cc	YES
Cosmetic Potential	11954	Subcutaneous injection of filling material (eg, collagen); over 10.0 cc	YES
Pharmacy	11980	IMPLANT,HORMONE,SUBCUTANEOUS	YES
Surgical - Misc.	14040	Adjacent tissue transfer or rearrangement, forehead, cheeks chin, mouth, neck, axillae, genitalia, hands and/or feet	NO
Surgical - Misc.	14041	Adjacent tissue transfer or rearrangement, forehead, cheeks chin, mouth, neck, axillae, genitalia, hands and/or feet	NO
Surgical - Misc.	14060	Adjacent tissue transfer or rearrangement, eyelids, nose, ears and/or lips	NO
Surgical - Misc.	14061	Adjacent tissue transfer or rearrangement, eyelids, nose, ears and/or lips	NO
Bioengineered Wound Healing	15150	Tissue cultured skin autograft, trunk, arms, legs; first 25 sq cm or less	YES
Bioengineered Wound Healing	15151	Tissue cultured skin autograft, trunk, arms, legs; additional 1 sq cm to 75 sq cm	YES
Bioengineered Wound Healing	15152	Tissue cultured skin autograft, trunk, arms, legs; each additional 100 sq cm, or each additional 1% of body area of infants and children, or part thereof	YES
Bioengineered Wound Healing	15155	Tissue cultured skin autograft, face, scalp, eyelids, mouth, neck, ears, orbits, genitalia, hands, feet, and/or multiple digits; first 25 sq cm or less	YES
Bioengineered Wound Healing	15156	Tissue cultured skin autograft, face, scalp, eyelids, mouth, neck, ears, orbits, genitalia, hands, feet, and/or multiple digits; additional 1 sq cm to 75 sq cm	YES

Bioengineered Wound Healing	15157	Tissue cultured skin autograft, face, scalp, eyelids, mouth, neck, ears, orbits, genitalia, hands, feet, and/or multiple digits; each additional 100 sq cm, or each additional 1% of body area of infants and children, or part thereof	YES
Bioengineered Wound Healing	15220	FULL THICK GRFT FREE W/DIR CLSR SCALP,ARMS,LEGS 20 CM/<	YES
Bioengineered Wound Healing	15221	FULL THICK GRFT FREE W/DIR CLSR SCALP,ARMS,LEGS EA ADDL 20 CM/<	YES
Bioengineered Wound Healing	15271	Application of skin substitute graft to trunk, arms, legs, total wound surface area up to 100 sq cm; first 25 sq cm or less wound surface area	YES
Bioengineered Wound Healing	15272	Application of skin substitute graft to trunk, arms, legs, total wound surface area up to 100 sq cm; each additional 25 sq cm wound surface area, or part thereof	YES
Bioengineered Wound Healing	15273	Application of skin substitute graft to trunk, arms, legs, total wound surface area greater than or equal to 100 sq cm; first 100 sq cm wound surface area, or 1% of body area of infants and children	YES
Bioengineered Wound Healing	15274	Application of skin substitute graft to trunk, arms, legs, total wound surface area greater than or equal to 100 sq cm; each additional 100 sq cm wound surface area, or part thereof, or each additional 1% of body area of infants and children, or part thereof	YES
Bioengineered Wound Healing	15275	Application of skin substitute graft to face, scalp, eyelids, mouth, neck, ears, orbits, genitalia, hands, feet, and/or multiple digits, total wound surface area up to 100 sq cm; first 25 sq cm or less wound surface area	YES
Bioengineered Wound Healing	15276	Application of skin substitute graft to face, scalp, eyelids, mouth, neck, ears, orbits, genitalia, hands, feet, and/or multiple digits, total wound surface area up to 100 sq cm; each additional 25 sq cm wound surface area, or part thereof	YES
Bioengineered Wound Healing	15277	Application of skin substitute graft to face, scalp, eyelids, mouth, neck, ears, orbits, genitalia, hands, feet, and/or multiple digits, total wound surface area greater than or equal to 100 sq cm; first 100 sq cm wound surface area, or 1% of body area of infants and children	YES
Bioengineered Wound Healing	15278	Application of skin substitute graft to face, scalp, eyelids, mouth, neck, ears, orbits, genitalia, hands, feet, and/or multiple digits, total wound surface area greater than or equal to 100 sq cm; each additional 100 sq cm wound surface area, or part thereof, or each additional 1% of body area of infants and children, or part thereof	YES
Wound Healing	15734	MUSCLE-SKIN FLAP,TRUNK	YES
Investigational Potential	15756	Free muscle or myocutaneous flap with microvascular anastomosis [when specified as a lymph node tissue transfer procedure]	YES
Cosmetic Potential	15769	Grafting of autologous soft tissue, other, harvested by direct excision (eg, fat, dermis, fascia)	YES
Cosmetic Potential	15771	Grafting of autologous fat harvested by liposuction technique to trunk, breasts, scalp, arms, and/or legs; 50 cc or less injectate	YES
Cosmetic Potential	15772	Grafting of autologous fat harvested by liposuction technique to trunk, breasts, scalp, arms, and/or legs; each additional 50 cc injectate, or part thereof	YES
Cosmetic Potential	15773	Grafting of autologous fat harvested by liposuction technique to face, eyelids, mouth, neck, ears, orbits, genitalia, hands, and/or feet; 25 cc or less injectate	YES
Cosmetic Potential	15774	Grafting of autologous fat harvested by liposuction technique to face, eyelids, mouth, neck, ears, orbits, genitalia, hands, and/or feet; each additional 25 cc injectate, or part thereof	YES

Cosmetic Potential	15775	Punch graft for hair transplant; 1 to 15 punch grafts	NO
Cosmetic Potential	15776	Punch graft for hair transplant; more than 15 punch grafts	NO
Bioengineered Wound Healing	15777	Implantation of biologic implant (eg, acellular dermal matrix) for soft tissue reinforcement (ie, breast, trunk)	NO
Cosmetic Potential	15780	Dermabrasion; total face (eg, for acne scarring, fine wrinkling, rhytids, general keratosis)	NO
Cosmetic Potential	15781	Dermabrasion; segmental, face	NO
Cosmetic Potential	15782	Dermabrasion; regional, other than face	NO
Cosmetic Potential	15783	Dermabrasion; superficial, any site (eg, tattoo removal)	NO
Cosmetic Potential	15786	Abrasion; single lesion	NO
Cosmetic Potential	15787	Abrasion (lesions)	NO
Cosmetic Potential	15788	Chemical peel, facial; epidermal	NO
Cosmetic Potential	15789	Chemical peel, facial; epidermal	NO
Cosmetic Potential	15792	Chemical peel, nonfacial; epidermal	NO
Cosmetic Potential	15793	Chemical peel, nonfacial; dermal	NO
Cosmetic Potential	15819	Cervicoplasty	NO
Cosmetic Potential	15820	Blepharoplasty, lower eyelid	NO
Cosmetic Potential	15821	Blepharoplasty, lower eyelid; with extensive herniated fat pad	NO
Cosmetic Potential	15822	Blepharoplasty, upper eyelid	YES
Cosmetic Potential	15823	Blepharoplasty, upper eyelid; with excessive skin weighting down lid	YES
Cosmetic Potential	15824	Rhytidectomy; forehead	NO
Cosmetic Potential	15825	Rhytidectomy; neck with platysmal tightening (platysmal flap, P-flap)	NO
Cosmetic Potential	15826	Rhytidectomy; glabellar frown lines	NO
Cosmetic Potential	15828	Rhytidectomy; cheek, chin, and neck	NO
Cosmetic Potential	15829	Rhytidectomy; superficial musculoaponeurotic system (SMAS) flap	NO
Cosmetic Potential	15830	Excision, excessive skin and subcutaneous tissue (includes lipectomy); abdomen, infraumbilical panniculectomy	NO
Cosmetic Potential	15832	Excision, excessive skin and subcutaneous tissue (includes lipectomy); thigh	NO
Cosmetic Potential	15833	Excision, excessive skin and subcutaneous tissue (includes lipectomy); leg	NO
Cosmetic Potential	15834	Excision, excessive skin and subcutaneous tissue (includes lipectomy); hip	NO
Cosmetic Potential	15835	Excision, excessive skin and subcutaneous tissue (includes lipectomy); buttock	NO
Cosmetic Potential	15836	Excision, excessive skin and subcutaneous tissue (includes lipectomy); arm	NO
Cosmetic Potential	15837	Excision, excessive skin and subcutaneous tissue (includes lipectomy); forearm or hand	NO
Cosmetic Potential	15838	Excision, excessive skin and subcutaneous tissue (includes lipectomy); submental fat pad	NO
Cosmetic Potential	15839	Excision, excessive skin and subcutaneous tissue (includes lipectomy); other area	NO

Cosmetic Potential	15840	Graft for facial nerve paralysis; free fascia graft (including obtaining fascia)	NO
Cosmetic Potential	15841	Graft for facial nerve paralysis; free muscle graft (including obtaining graft)	NO
Cosmetic Potential	15842	Graft for facial nerve paralysis; free muscle flap by microsurgical technique	NO
Cosmetic Potential	15845	Graft for facial nerve paralysis; regional muscle transfer	NO
Cosmetic Potential	15847	Excision, excessive skin and subcutaneous tissue (includes lipectomy), abdomen (eg, abdominoplasty) (includes umbilical transposition and fascial plication) (List separately in addition to code for primary procedure)	NO
Cosmetic Potential	15876	Suction assisted lipectomy; head and neck	NO
Cosmetic Potential	15877	Suction assisted lipectomy; trunk	NO
Cosmetic Potential	15878	Suction assisted lipectomy; upper extremity	NO
Cosmetic Potential	15879	Suction assisted lipectomy; lower extremity	NO
Cosmetic Potential	17106	Destruction of cutaneous vascular proliferative lesions (eg, laser technique); less than 10 sq cm	YES
Cosmetic Potential	17107	Destruction of cutaneous vascular proliferative lesions (eg, laser technique); 10.0 to 50.0 sq cm	YES
Cosmetic Potential	17108	Destruction of cutaneous vascular proliferative lesions (eg, laser technique); over 50.0 sq cm	YES
Cosmetic Potential	17380	Electrolysis epilation, each 30 minutes	NO
Transplant	17999	Unlisted procedure, skin, mucous membrane and subcutaneous tissue	YES
Procedure - Oncology	19105	Ablation, cryosurgical, of fibroadenoma, including ultrasound guidance, each fibroadenoma	YES
Radiation	19294	Preparation of tumor cavity, with placement of a radiation therapy applicator for intraoperative radiation therapy (IORT) concurrent with partial mastectomy (List separately in addition to code for primary procedure)	YES
Radiation	19296	Placement of radiotherapy afterloading expandable catheter (single or multichannel) into the breast for interstitial radioelement application following partial mastectomy, includes image guidance	YES
Radiation	19297	Placement of radiotherapy afterloading expandable catheter (single or multichannel) into the breast for interstitial radioelement application following partial mastectomy, includes image guidance	YES
Radiation	19298	Placement of radiotherapy after loading brachytherapy catheters (multiple tube and button type) into the breast for interstitial radioelement application following (at the time of or subsequent to) partial mastectomy, includes imaging guidance	YES
Surgical - Breast	19300	Mastectomy for gynecomastia	NO
Cosmetic Potential	19303	Mastectomy, simple, complete	YES
Surgical - Breast	19304	Mastectomy	YES
Surgical - Breast	19316	Mastopexy	NO
Surgical - Breast	19318	Breast reduction	YES
Surgical - Breast	19325	Breast augmentation with implant	YES
Surgical - Breast	19328	Removal of intact breast implant	YES
Surgical - Breast	19330	Removal of ruptured breast implant, including implant contents (eg, saline, silicone gel)	YES
Surgical - Breast	19340	Insertion of breast implant on same day of mastectomy (ie, immediate)	YES

Surgical – Breast	19342	Insertion or replacement of breast implant on separate day from mastectomy	YES
Surgical – Breast	19350	Nipple/areola reconstruction	YES
Surgical – Breast	19355	Correction of inverted nipples	YES
Surgical – Breast	19357	Tissue expander placement in breast reconstruction, including subsequent expansion(s)	Yes- if realted to womens health law
Surgical – Breast	19361	Breast reconstruction with latissimus dorsi flap	Yes- if realted to womens health law
Surgical – Breast	19364	Breast reconstruction with free flap (eg, fTRAM, DIEP, SIEA, GAP flap)	Yes- if realted to womens health law
Surgical – Breast	19367	Breast reconstruction; with single-pedicled transverse rectus abdominis myocutaneous (TRAM) flap	Yes- if realted to womens health law
Surgical – Breast	19368	Breast reconstruction; with single-pedicled transverse rectus abdominis myocutaneous (TRAM) flap, requiring separate microvascular anastomosis (supercharging)	Yes- if realted to womens health law
Surgical – Breast	19369	Breast reconstruction; with bipedicled transverse rectus abdominis myocutaneous (TRAM) flap	Yes- if realted to womens health law
Surgical – Breast	19370	SURGERY OF BREAST CAPSULE	YES
Surgical – Breast	19371	REMOVAL OF BREAST CAPSULE	YES
Surgical – Breast	19380	Revision of reconstructed breast (eg, significant removal of tissue, re-advancement and/or re-inset of flaps in autologous reconstruction or significant capsular revision combined with soft tissue excision in implant-based reconstruction)	Yes- if realted to womens health law
Surgical – Breast	19396	Preparation of moulage for custom breast implant	Yes- if realted to womens health law
Procedure – Oncology	19499	Unlisted procedure, breast [when specified as destruction of breast tissue by high intensity focused ultrasound]	YES
Radiation	20555	Placement of needles or catheters into muscle and/or soft tissue for subsequent interstitial radioelement application	YES
Radiation	20700	MANUAL PREP AND INSERTION DEEP DRUG DELIVERY DEV	YES
Radiation	20701	REMOVAL DEEP DRUG DELIVERY DEVICE	YES
Surgical – Spine	20930	Allograft, morselized, or placement of osteopromotive material, for spine surgery only (List separately in addition to code for primary procedure)	YES
Surgical – Spine	20931	Allograft, structural, for spine surgery only (List separately in addition to code for primary procedure)	YES

Surgical - Spine	20932	Allograft, includes templating, cutting, placement and internal fixation, when performed; osteoarticular, including articular surface and contiguous bone (List separately in addition to code for primary procedure)	YES
Surgical - Spine	20933	Allograft, includes templating, cutting, placement and internal fixation, when performed; hemicortical intercalary, partial (ie, hemicylindrical) (List separately in addition to code for primary procedure)	YES
Surgical - Spine	20934	Allograft, includes templating, cutting, placement and internal fixation, when performed; intercalary, complete (ie, cylindrical) (List separately in addition to code for primary procedure)	YES
Surgical - Spine	20936	Autograft for spine surgery only (includes harvesting the graft); local (eg, ribs, spinous process, or laminar fragments) obtained from same incision (List separately in addition to code for primary procedure)	YES
Surgical - Spine	20937	Autograft for spine surgery only (includes harvesting the graft); morselized (through separate skin or fascial incision) (List separately in addition to code for primary procedure)	YES
Surgical - Spine	20938	Autograft for spine surgery only (includes harvesting the graft); structural, bicortical or tricortical (through separate skin or fascial incision) (List separately in addition to code for primary procedure)	YES
Surgical - Spine	20939	Bone marrow aspiration for bone grafting, spine surgery only, through separate skin or fascial incision (List separately in addition to code for primary procedure)	YES
Surgical - Spine	20974	Electrical stimulation to aid bone healing; noninvasive (nonoperative)	YES
Durable Medical Equipment	20979	Low intensity ultrasound stimulation to aid bone healing, noninvasive (nonoperative)	if greater rental, purchase than 1500
Procedure - Oncology	20982	Ablation, bone tumor(s) (eg, osteoid osteoma, metastasis) radiofrequency, percutaneous, including computed tomographic guidance	YES
Procedure - Oncology	20983	Ablation therapy for reduction or eradication of 1 or more bone tumors (eg, metastasis) including adjacent soft tissue when involved by tumor extension, percutaneous, including imaging guidance when performed; cryoablation	YES
Transplant	20999	Unlisted procedure, musculoskeletal system, general [when specified as high intensity focused ultrasound for pain palliation for bone metastases] or [No specific code for surgery using Coblation technology] or [when specified as harvesting and injection of bone marrow aspirate concentrate or harvesting or administration of stem cells for therapy to repair damaged cells or body tissues]	YES
Procedure - ENT	21010	INCISION OF JAW JOINT	YES
Procedure - ENT	21050	REMOV JAW JOINT	YES
Procedure - ENT	21081	PREP FACE/ORAL PROST MANDIBULAR	YES
Cosmetic Potential	21083	Impression and custom preparation; palatal lift prosthesis	YES
Cosmetic Potential	21085	PREP FACE/ORAL PROST ORAL SPLINT	YES
Durable Medical Equipment	21086	Impression and custom preparation; auricular prosthesis	YES
Cosmetic Potential	21087	Impression and custom preparation; nasal prosthesis	NO
Cosmetic Potential	21089	PREP FACE/ORAL PROST UNLISTED	NO
Cosmetic Potential	21110	INTERDENTAL FIXATION	NO

Cosmetic Potential	21120	Genioplasty	NO
Cosmetic Potential	21121	Genioplasty	NO
Cosmetic Potential	21122	Genioplasty	NO
Cosmetic Potential	21123	Genioplasty	NO
Cosmetic Potential	21125	Augmentation, mandibular body or angle; prosthetic material	NO
Cosmetic Potential	21127	Augmentation, mandibular body or angle; with bone graft, onlay or interpositional (includes obtaining autograft)	NO
Cosmetic Potential	21137	Reduction forehead; contouring only	NO
Cosmetic Potential	21138	Reduction forehead; contouring and application of prosthetic material or bone graft (includes obtaining autograft)	NO
Cosmetic Potential	21139	Reduction forehead; contouring and setback of anterior frontal sinus wall	NO
Cosmetic Potential	21141	Reconstruction midface, LeFort I	YES
Cosmetic Potential	21142	Reconstruction midface, LeFort I	YES
Cosmetic Potential	21143	Reconstruction midface, LeFort I	YES
Cosmetic Potential	21145	Reconstruction midface, LeFort I	YES
Cosmetic Potential	21146	Reconstruction midface, LeFort I	YES
Cosmetic Potential	21147	Reconstruction midface, LeFort I	YES
Cosmetic Potential	21150	Reconstruction midface, LeFort II	YES
Cosmetic Potential	21151	Reconstruction midface, LeFort II	YES
Cosmetic Potential	21154	Reconstruction midface, LeFort III	YES
Cosmetic Potential	21155	Reconstruction midface, LeFort III	YES
Cosmetic Potential	21159	Reconstruction midface, LeFort III (extra and intracranial) with forehead advancement (eg, mono bloc), requiring bone grafts (includes obtaining autografts)	YES
Cosmetic Potential	21160	Reconstruction midface, LeFort III (extra and intracranial) with forehead advancement (eg, mono bloc), requiring bone grafts (includes obtaining autografts)	YES
Cosmetic Potential	21172	Reconstruction superior-lateral orbital rim and lower forehead, advancement or alteration, with or without grafts (includes obtaining autografts)	YES
Cosmetic Potential	21175	Reconstruction, bifrontal, superior-lateral orbital rims and lower forehead, advancement or alteration (eg, plagiocephaly, trigonocephaly, brachycephaly), with or without grafts (includes obtaining autografts)	YES
Cosmetic Potential	21179	Reconstruction, entire or majority of forehead and/or supraorbital rims	YES
Cosmetic Potential	21180	Reconstruction, entire or majority of forehead and/or supraorbital rims	YES
Cosmetic Potential	21182	Reconstruction of orbital walls, rims, forehead, nasoethmoid complex following intra- and extracranial excision of benign tumor of cranial bone (eg, fibrous dysplasia), with multiple autografts (includes obtaining grafts)	YES
Cosmetic Potential	21183	Reconstruction of orbital walls, rims, forehead, nasoethmoid complex following intra- and extracranial excision of benign tumor of cranial bone (eg, fibrous dysplasia), with multiple autografts (includes obtaining grafts)	YES
Cosmetic Potential	21184	Reconstruction of orbital walls, rims, forehead, nasoethmoid complex following intra- and extracranial excision of benign tumor of cranial bone (eg, fibrous dysplasia), with multiple autografts (includes obtaining grafts)	YES
Cosmetic Potential	21188	Reconstruction midface, osteotomies (other than LeFort type) and bone grafts (includes obtaining autografts)	YES

Surgical - Maxillofacial	21193	Reconstruction of mandibular rami, horizontal, vertical, C, or L osteotomy; without bone graft	YES
Cosmetic Potential	21194	Mandibular/Maxillary (Orthognathic) Surgery - Reconstruction of mandibular rami, horizontal, vertical, C or L osteotomy; with bone graft	YES
Surgical - Maxillofacial	21195	Reconstruction of mandibular rami and/or body, sagittal split; without internal rigid fixation	YES
Surgical - Maxillofacial	21196	Reconstruction of mandibular rami and/or body, sagittal split; with internal rigid fixation	YES
Surgical - Maxillofacial	21198	Osteotomy, mandible, segmental	YES
Surgical - Maxillofacial	21199	Osteotomy, mandible, segmental; with genioglossus advancement	YES
Surgical - Maxillofacial	21206	Osteotomy, maxilla, segmental (eg, Wassmund or Schuchard)	YES
Cosmetic Potential	21208	Osteoplasty, facial bones; augmentation (autograft, allograft, or prosthetic implant)	YES
Cosmetic Potential	21209	Osteoplasty, facial bones; reduction	YES
Cosmetic Potential	21210	Graft, bone; nasal, maxillary or malar areas (includes obtaining graft)	YES
Cosmetic Potential	21215	Graft, bone; mandible (includes obtaining graft)	YES
Cosmetic Potential	21230	Graft; rib cartilage, autogenous, to face, chin, nose or ear (includes obtaining graft)	YES
Cosmetic Potential	21235	Graft; ear cartilage, autogenous, to nose or ear (includes obtaining graft)	YES
Cosmetic Potential	21240	RECONSTRUCTION OF JAW JOINT	YES
Cosmetic Potential	21242	ARTHROPLASTY TMJ+ALLOGRAFT	NO
Cosmetic Potential	21243	ARTHROPLASTY TMJ+PROSTHESIS	NO
Cosmetic Potential	21244	Reconstruction of mandible, extraoral, with transosteal bone plate (eg, mandibular staple bone plate)	YES
Cosmetic Potential	21245	Reconstruction of mandible or maxilla, subperiosteal implant; partial	YES
Cosmetic Potential	21246	Reconstruction of mandible or maxilla, subperiosteal implant; complete	YES
Cosmetic Potential	21247	Reconstruction of mandibular condyle with bone and cartilage autografts (includes obtaining grafts) (eg, for hemifacial microsomia)	YES
Cosmetic Potential	21248	RECONSTR JAW,PART-ENDO IMPLNT	YES
Cosmetic Potential	21249	RECONSTR JAW,FULL,ENDO IMPLNT	YES
Cosmetic Potential	21255	Reconstruction of zygomatic arch and glenoid fossa with bone and cartilage (includes obtaining autografts)	YES
Cosmetic Potential	21256	Reconstruction of orbit with osteotomies (extracranial) and with bone grafts (includes obtaining autografts) (eg, micro-ophthalmia)	YES
Cosmetic Potential	21270	Malar augmentation, prosthetic material	YES
Cosmetic Potential	21275	Secondary revision of orbitocraniofacial reconstruction	YES
Cosmetic Potential	21295	REVISN JAW MUSCLE/BONE,EXTRAORAL	YES
Cosmetic Potential	21296	REVISN JAW MUSCLE/BONE,INTRAORAL	YES
Cosmetic Potential	21299	CRANIO/MAXILLOFACIAL SURG UNLISTED	YES
Cosmetic Potential	21499	HEAD SURGERY PROC UNLISTED	YES
Surgical - ENT	21685	Hyoid myotomy and suspension	YES
Cosmetic Potential	21740	Reconstructive repair of pectus excavatum or carinatum; open	YES

Cosmetic Potential	21742	Reconstructive repair of pectus excavatum or carinatum; minimally invasive approach (Nuss procedure), without thoracoscopy	YES
Cosmetic Potential	21743	Reconstructive repair of pectus excavatum or carinatum; minimally invasive approach (Nuss procedure), with thoracoscopy	YES
Investigational Potential	21811	Open treatment of rib fracture(s) with internal fixation, includes thoracoscopic visualization when performed, unilateral; 1-3 ribs	NO
Investigational Potential	21812	Open treatment of rib fracture(s) with internal fixation, includes thoracoscopic visualization when performed, unilateral; 4-6 ribs	NO
Investigational Potential	21813	Open treatment of rib fracture(s) with internal fixation, includes thoracoscopic visualization when performed, unilateral; 7 or more ribs	NO
Investigational Potential	21899	NECK/CHEST PROCEDURE UNLISTED	YES
Surgical - Spine	22206	Osteotomy of spine, posterior or posterolateral approach, 3 columns, 1 vertebral segment (eg, pedicle/vertebral body subtraction); thoracic	YES
Surgical - Spine	22207	Osteotomy of spine, posterior or posterolateral approach, 3 columns, 1 vertebral segment (eg, pedicle/vertebral body subtraction); lumbar	YES
Surgical - Spine	22208	Osteotomy of spine, posterior or posterolateral approach, 3 columns, 1 vertebral segment (eg, pedicle/vertebral body subtraction); each additional vertebral segment (List separately in addition to code for primary procedure)	YES
Surgical - Spine	22210	Osteotomy of spine, posterior or posterolateral approach, 1 vertebral segment; cervical	YES
Surgical - Spine	22212	Osteotomy of spine, posterior or posterolateral approach, 1 vertebral segment; thoracic	YES
Surgical - Spine	22214	Osteotomy of spine, posterior or posterolateral approach, 1 vertebral segment; lumbar	YES
Surgical - Spine	22216	Osteotomy of spine, posterior or posterolateral approach, 1 vertebral segment; each additional vertebral segment (List separately in addition to primary procedure)	YES
Surgical - Spine	22220	Osteotomy of spine, including discectomy, anterior approach, single vertebral segment; cervical	YES
Surgical - Spine	22222	Osteotomy of spine, including discectomy, anterior approach, single vertebral segment; thoracic	YES
Surgical - Spine	22224	Osteotomy of spine, including discectomy, anterior approach, single vertebral segment; lumbar	YES
Surgical - Spine	22226	Osteotomy of spine, including discectomy, anterior approach, single vertebral segment; each additional vertebral segment (List separately in addition to code for primary procedure)	YES
Procedure - Misc.	22505	Manipulation of the spine requiring anesthesia, any region	NO
Surgical - Spine	22510	Percutaneous vertebroplasty (bone biopsy included when performed), 1 vertebral body, unilateral or bilateral injection, inclusive of all imaging guidance; cervicothoracic	YES
Surgical - Spine	22511	Percutaneous vertebroplasty (bone biopsy included when performed), 1 vertebral body, unilateral or bilateral injection, inclusive of all imaging guidance; lumbosacral	YES

Surgical - Spine	22512	Percutaneous vertebroplasty (bone biopsy included when performed), 1 vertebral body, unilateral or bilateral injection, inclusive of all imaging guidance; each additional cervicothoracic or lumbosacral vertebral body (List separately in addition to code for primary procedure)	YES
Surgical - Spine	22513	Percutaneous vertebral augmentation, including cavity creation (fracture reduction and bone biopsy included when performed) using mechanical device (eg, kyphoplasty), 1 vertebral body, unilateral or bilateral cannulation, inclusive of all imaging guidance	YES
Surgical - Spine	22514	Percutaneous vertebral augmentation, including cavity creation (fracture reduction and bone biopsy included when performed) using mechanical device (eg, kyphoplasty), 1 vertebral body, unilateral or bilateral cannulation, inclusive of all imaging guidance	YES
Surgical - Spine	22515	Percutaneous vertebral augmentation, including cavity creation (fracture reduction and bone biopsy included when performed) using mechanical device (eg, kyphoplasty), 1 vertebral body, unilateral or bilateral cannulation, inclusive of all imaging guidance	YES
Surgical - Spine	22526	Percutaneous intradiscal electrothermal annuloplasty, unilateral or bilateral including fluoroscopic guidance; single level	YES
Surgical - Spine	22527	Percutaneous intradiscal electrothermal annuloplasty, unilateral or bilateral including fluoroscopic guidance; 1 or more additional levels (List separately in addition to code for primary procedure)	YES
Surgical - Spine	22532	Arthrodesis, lateral extracavitary technique, including minimal discectomy to prepare interspace (other than for decompression); thoracic	YES
Surgical - Spine	22533	Arthrodesis, lateral extracavitary technique, including minimal discectomy to prepare interspace (other than for decompression); lumbar	YES
Surgical - Spine	22534	Arthrodesis, lateral extracavitary technique, including minimal discectomy to prepare interspace (other than for decompression); thoracic or lumbar, each additional vertebral segment (List separately in addition to code for primary procedure)	YES
Surgical - Spine	22548	Arthrodesis, anterior transoral or extraoral technique, clivus-C1-C2 (atlas-axis), with or without excision of odontoid process	YES
Surgical - Spine	22551	Arthrodesis, anterior interbody, including disc space preparation, discectomy, osteophylectomy and decompression of spinal cord and/or nerve roots; cervical below C2	YES
Surgical - Spine	22552	Arthrodesis, anterior interbody, including disc space preparation, discectomy, osteophylectomy and decompression of spinal cord and/or nerve roots; cervical below C2, each additional interspace (List separately in addition to code for separate procedure)	YES
Surgical - Spine	22554	Arthrodesis, anterior interbody technique, including minimal discectomy to prepare interspace (other than for decompression); cervical below C2	YES
Surgical - Spine	22556	Arthrodesis, anterior interbody technique, including minimal discectomy to prepare interspace (other than for decompression); thoracic	YES
Surgical - Spine	22558	Arthrodesis, anterior interbody technique, including minimal discectomy to prepare interspace (other than for decompression); lumbar	YES
Surgical - Spine	22585	Arthrodesis, anterior interbody technique, including minimal discectomy to prepare interspace (other than for decompression); each additional interspace (List separately in addition to code for primary procedure)	YES
Surgical - Spine	22586	Arthrodesis, pre-sacral interbody technique, including disc space preparation, discectomy, with posterior instrumentation, with image guidance, includes bone graft when performed, L5-S1 interspace	YES

Surgical - Spine	22590	Arthrodesis, posterior technique, craniocervical (occiput-C2)	YES
Surgical - Spine	22595	Arthrodesis, posterior technique, atlas-axis (C1-C2)	YES
Surgical - Spine	22600	Arthrodesis, posterior or posterolateral technique, single level; cervical below C2 segment	YES
Surgical - Spine	22610	Arthrodesis, posterior or posterolateral technique, single level; thoracic (with lateral transverse technique, when performed)	YES
Surgical - Spine	22612	Arthrodesis, posterior or posterolateral technique, single level; lumbar (with lateral transverse technique, when performed)	YES
Surgical - Spine	22614	Arthrodesis, posterior or posterolateral technique, single level; each additional vertebral segment (List separately in addition to code for primary procedure)	YES
Surgical - Spine	22630	Arthrodesis, posterior interbody technique, including laminectomy and/or discectomy to prepare interspace (other than for decompression), single interspace; lumbar	YES
Surgical - Spine	22632	Arthrodesis, posterior interbody technique, including laminectomy and/or discectomy to prepare interspace (other than for decompression), single interspace; each additional interspace (List separately in addition to code for primary procedure)	YES
Surgical - Spine	22633	Arthrodesis, combined posterior or posterolateral technique with posterior interbody technique including laminectomy and/or discectomy sufficient to prepare interspace (other than for decompression), single interspace and segment; lumbar	YES
Surgical - Spine	22634	Arthrodesis, combined posterior or posterolateral technique with posterior interbody technique including laminectomy and/or discectomy sufficient to prepare interspace (other than for decompression), single interspace and segment; each additional interspace and segment	YES
Surgical - Spine	22800	Arthrodesis, posterior, for spinal deformity, with or without cast; up to 6 vertebral segments	YES
Surgical - Spine	22802	Arthrodesis, posterior, for spinal deformity, with or without cast; 7 to 12 vertebral segments	YES
Surgical - Spine	22804	Arthrodesis, posterior, for spinal deformity, with or without cast; 13 or more vertebral segments	YES
Surgical - Spine	22808	Arthrodesis, anterior, for spinal deformity, with or without cast; 2 to 3 vertebral segments	YES
Surgical - Spine	22810	Arthrodesis, anterior, for spinal deformity, with or without cast; 4 to 7 vertebral segments	YES
Surgical - Spine	22812	Arthrodesis, anterior, for spinal deformity, with or without cast; 8 or more vertebral segments	YES
Surgical - Spine	22818	Kyphectomy, circumferential exposure of spine and resection of vertebral segment(s) (including body and posterior elements); single or 2 segments	YES
Surgical - Spine	22819	Kyphectomy, circumferential exposure of spine and resection of vertebral segment(s) (including body and posterior elements); 3 or more segments	YES
Surgical - Spine	22830	Exploration of spinal fusion	YES
Surgical - Spine	22836	Anterior thoracic vertebral body tethering, including thoracoscopy, when performed; up to 7 vertebral segments	NO
Surgical - Spine	22837	Anterior thoracic vertebral body tethering, including thoracoscopy, when performed; 8 or more vertebral segments	NO
Surgical - Spine	22838	Revision (eg, augmentation, division of tether), replacement, or removal of thoracic vertebral body tethering, including thoracoscopy, when performed	NO

Surgical - Spine	22840	Posterior non-segmental instrumentation (eg, Harrington rod technique, pedicle fixation across 1 interspace, atlantoaxial transarticular screw fixation, sublaminar wiring at C1, facet screw fixation) (List separately in addition to code for primary procedure)	YES
Surgical - Spine	22841	Internal spinal fixation by wiring of spinous processes (List separately in addition to code for primary procedure)	YES
Surgical - Spine	22842	Posterior segmental instrumentation (eg, pedicle fixation, dual rods with multiple hooks and sublaminar wires); 3 to 6 vertebral segments (List separately in addition to code for primary procedure)	YES
Surgical - Spine	22843	Posterior segmental instrumentation (eg, pedicle fixation, dual rods with multiple hooks and sublaminar wires); 7 to 12 vertebral segments (List separately in addition to code for primary procedure)	YES
Surgical - Spine	22844	Posterior segmental instrumentation (eg, pedicle fixation, dual rods with multiple hooks and sublaminar wires); 13 or more vertebral segments (List separately in addition to code for primary procedure)	YES
Surgical - Spine	22845	Anterior instrumentation; 2 to 3 vertebral segments (List separately in addition to code for primary procedure)	YES
Surgical - Spine	22846	Anterior instrumentation; 4 to 7 vertebral segments (List separately in addition to code for primary procedure)	YES
Surgical - Spine	22847	Anterior instrumentation; 8 or more vertebral segments (List separately in addition to code for primary procedure)	YES
Surgical - Spine	22848	Pelvic fixation (attachment of caudal end of instrumentation to pelvic bony structures) other than sacrum (List separately in addition to code for primary procedure)	YES
Surgical - Spine	22849	Reinsertion of spinal fixation device	YES
Surgical - Spine	22850	REMOVE SPINE FIX DEV,HARRINGTON	YES
Surgical - Spine	22852	REMOVE SPINE FIX DEV,POST SGMTAL	YES
Surgical - Spine	22853	Insertion of interbody biomechanical device(s) (eg, synthetic cage, mesh) with integral anterior instrumentation for device anchoring (eg, screws, flanges), when performed, to intervertebral disc space in conjunction with interbody arthrodesis, each interspace (List separately in addition to primary procedure)	YES
Surgical - Spine	22854	Insertion of intervertebral biomechanical device(s) (eg, synthetic cage, mesh) with integral anterior instrumentation for device anchoring (eg, screws, flanges), when performed, to vertebral corpectomy(ies) (vertebral body resection, partial or complete)	YES
Surgical - Spine	22855	REMOVE SPINE FIX DEV,ANTERIOR	YES
Surgical - Spine	22856	Total disc arthroplasty (artificial disc), anterior approach, including discectomy with end plate preparation (includes osteophytectomy for nerve root or spinal cord decompression and microdissection); single interspace, cervical	YES
Surgical - Spine	22857	Total disc arthroplasty (artificial disc), anterior approach, including discectomy to prepare interspace (other than for decompression), single interspace, lumbar	YES
Surgical - Spine	22858	Total disc arthroplasty (artificial disc), anterior approach, including discectomy with end plate preparation (includes osteophytectomy for nerve root or spinal cord decompression and microdissection); second level, cervical (List separately in addition to primary procedure)	YES

Surgical - Spine	22859	Insertion of intervertebral biomechanical device(s) (eg, synthetic cage, mesh, methylmethacrylate) to intervertebral disc space or vertebral body defect without interbody arthrodesis, each contiguous defect (List separately in addition to code for primary procedure)	YES
Surgical - Spine	22860	Total disc arthroplasty (artificial disc), anterior approach, including discectomy to prepare interspace (other than for decompression); second interspace, lumbar (List separately in addition to code for primary procedure)	NO
Surgical - Spine	22861	Revision including replacement of total disc arthroplasty (artificial disc), anterior approach, single interspace; cervical	YES
Surgical - Spine	22862	Revision including replacement of total disc arthroplasty (artificial disc), anterior approach, single interspace; lumbar	YES
Surgical - Spine	22864	Removal of total disc arthroplasty (artificial disc), anterior approach, single interspace; cervical	YES
Surgical - Spine	22865	Removal of total disc arthroplasty (artificial disc), anterior approach, single interspace; lumbar	YES
Investigational Potential	22867	Insertion of interlaminar/interspinous process stabilization/distraction device, without fusion, including image guidance when performed, with open decompression, lumbar; single level	NO
Investigational Potential	22868	Insertion of interlaminar/interspinous process stabilization/distraction device, without fusion, including image guidance when performed, with open decompression, lumbar; second level (List separately in addition to code for primary procedure)	NO
Surgical - Spine	22869	Insertion of interlaminar/interspinous process stabilization/distraction device, without open decompression or fusion, including image guidance when performed, lumbar; single level	NO
Surgical - Spine	22870	Insertion of interlaminar/interspinous process stabilization/distraction device, without open decompression or fusion, including image guidance when performed, lumbar; second level (List separately in addition to code for primary procedure)	NO
Investigational Potential	22899	Unlisted procedure, spine [when specified as percutaneous intradiscal radiofrequency thermocoagulation (PIRFT) or intradiscal biacuplasty (IDB)] or [when specified as insertion of a dynamic intervertebral pedicle-based stabilization device] or [when specified as vertebral body stapling, or implantation of a posterior (dynamic) distraction device or magnetic expansion adjustable growing rods] or [when specified as insertion of a non-pedicle interspinous process fixation device]	NO
Cosmetic Potential	22999	Unlisted procedure, abdomen, musculoskeletal system [when specified as repair of diastasis recti]	YES
Surgical - Musculoskeletal	23105	Arthrotomy; glenohumeral joint, with synovectomy, with or without biopsy	YES
Surgical - Musculoskeletal	23107	Arthrotomy, glenohumeral joint, with joint exploration, with or without removal of loose or foreign body	YES
Surgical - Musculoskeletal	23120	Claviclectomy; partial	YES
Surgical - Musculoskeletal	23130	Acromioplasty or acromionectomy, partial, with or without coracoacromial ligament release	YES
Surgical - Musculoskeletal	23410	Repair of ruptured musculotendinous cuff (eg, rotator cuff) open; acute	YES
Surgical - Musculoskeletal	23412	Repair of ruptured musculotendinous cuff (eg, rotator cuff) open; chronic	YES

Surgical - Musculoskeletal	23415	Coracoacromial ligament release, with or without acromioplasty	YES
Surgical - Musculoskeletal	23420	Reconstruction of complete shoulder (rotator) cuff avulsion, chronic (includes acromioplasty)	YES
Surgical - Musculoskeletal	23430	Tenodesis of long tendon of biceps	YES
Surgical - Musculoskeletal	23440	Resection or transplantation of long tendon of biceps	YES
Surgical - Musculoskeletal	23450	Capsulorrhaphy, anterior; Putti-Platt procedure or Magnuson type operation	YES
Surgical - Musculoskeletal	23455	Capsulorrhaphy, anterior; with labral repair (eg, Bankart procedure)	YES
Surgical - Musculoskeletal	23460	Capsulorrhaphy, anterior, any type; with bone block	YES
Surgical - Musculoskeletal	23462	Capsulorrhaphy, anterior, any type; with coracoid process transfer	YES
Surgical - Musculoskeletal	23465	Capsulorrhaphy, glenohumeral joint, posterior, with or without bone block	YES
Surgical - Musculoskeletal	23466	Capsulorrhaphy, glenohumeral joint, any type multi- directional instability	YES
Surgical - Musculoskeletal	23470	Arthroplasty, glenohumeral joint; hemiarthroplasty	YES
Surgical - Musculoskeletal	23472	Arthroplasty, glenohumeral joint; total shoulder (glenoid and proximal humeral replacement [eg, total shoulder])	YES
Surgical - Musculoskeletal	23473	Revision of total shoulder arthroplasty, including allograft when performed; humeral or glenoid component	YES
Surgical - Musculoskeletal	23474	Revision of total shoulder arthroplasty, including allograft when performed; humeral and glenoid component	YES
Surgical - Musculoskeletal	23700	Manipulation under anesthesia, shoulder joint, including application of fixation apparatus (dislocation excluded)	YES
Procedure - Misc.	23929	SHOULDER SURG PROC UNLISTED	YES
Procedure - Misc.	24300	Manipulation, elbow, under anesthesia	NO
Procedure - Misc.	24360	ARTHROPLASTY,ELBOW,W MEMBRANE	YES
Procedure - Misc.	24361	ARTHROPLASTY,ELBOW,DIST HUMER PROSTH	YES
Procedure - Misc.	24362	ARTHROPLASTY,ELBOW,IMPLNT/RECONSTRUC	YES
Procedure - Misc.	24363	ARTHROPLASTY,ELBOW,TOTAL PROSTH REPL	YES
Procedure - Misc.	24370	REVIS ELBOW ARTHRPLSTY HUMERAL/ULNA COMPNT	YES
Procedure - Misc.	24371	REVIS ELBOW ARTHRPLSTY HUMERAL&ULNA COMPNT	YES
Procedure - Misc.	24999	UPPER ARM/ELBOW SURGERY UNLISTED	YES
Procedure - Misc.	25259	Manipulation, wrist, under anesthesia	NO
Procedure - Misc.	25332	ARTHROPLASTY WRIST JT	NO
Procedure - Misc.	25441	RECONSTRUCT DIST RADIUS W PROSTH	YES
Procedure - Misc.	25442	RECONSTRUCT DIST ULNA W PROSTHESIS	YES
Procedure - Misc.	25443	RECONSTRUCT SCAPHOID CARPAL W PROSTHESIS	YES
Procedure - Misc.	25444	RECONSTRUCT LUNATE W PROSTHESIS	NO
Procedure - Misc.	25445	RECONSTRUCT TRAPEZIUM W PROSTHESIS	NO
Procedure - Misc.	25446	TOTAL WRIST REPLACEMENT	NO
Procedure - Misc.	25447	REPAIR INTERCARP/CARP-METACARP JT	NO
Procedure - Misc.	25449	REMOVE WRIST JOINT IMPLANT	NO
Procedure - Misc.	25999	FOREARM/WRIST SURGERY UNLISTED	YES

Procedure - Misc.	26340	Manipulation, finger joint, under anesthesia, each joint	NO
Procedure - Misc.	26530	ARTHROPLASTY MC-P JT,SINGLE	NO
Procedure - Misc.	26536	ARTHROPLASTY I-P JT,IMPLANT	NO
Procedure - Misc.	26989	HAND/FINGER SURGERY UNLISTED	YES
Surgical - Musculoskeletal	27096	Injection procedure for sacroiliac joint, anesthetic/steroid, with image guidance (fluoroscopy or CT) including arthrography when performed	NO
Surgical - Musculoskeletal	27120	Acetabuloplasty; (eg, Whitman, Colonna, Haygroves, or cup type)	YES
Surgical - Musculoskeletal	27122	Acetabuloplasty; resection, femoral head (eg, Girdlestone procedure)	YES
Surgical - Musculoskeletal	27125	Hemiarthroplasty, hip, partial (eg, femoral stem prosthesis, bipolar arthroplasty)	YES
Surgical - Musculoskeletal	27130	Arthroplasty, acetabular and proximal femoral prosthetic replacement (total hip arthroplasty), with or without autograft or allograft	YES
Surgical - Musculoskeletal	27132	Conversion of previous hip surgery to total hip arthroplasty, with or without autograft or allograft	YES
Surgical - Musculoskeletal	27134	Revision of total hip arthroplasty; both components, with or without autograft or allograft	YES
Surgical - Musculoskeletal	27137	Revision of total hip arthroplasty; acetabular component only, with or without autograft or allograft	YES
Surgical - Musculoskeletal	27138	Revision of total hip arthroplasty; femoral component only, with or without allograft	YES
Procedure - Misc.	27275	Manipulation, hip joint, requiring general anesthesia	NO
Surgical - Musculoskeletal	27279	Arthrodesis, sacroiliac joint, percutaneous or minimally invasive (indirect visualization), with image guidance, includes obtaining bone graft when performed, and placement of transfixing device	YES
Surgical - Spine	27280	Arthrodesis,open, sacroiliac joint including obtaining bone graft, including instrumentation, when performed	YES
Surgical - Musculoskeletal	27299	PELVIS/HIP JOINT SURGERY UNLISTED	YES
Surgical - Musculoskeletal	27331	Arthrotomy, knee; including joint exploration, biopsy, or removal of loose or foreign bodies	YES
Surgical - Musculoskeletal	27332	Arthrotomy, with excision of semilunar cartilage (meniscectomy) knee; medial OR lateral	YES
Surgical - Musculoskeletal	27333	Arthrotomy, with excision of semilunar cartilage (meniscectomy) knee; medial AND lateral	YES
Surgical - Musculoskeletal	27334	Arthrotomy, with synovectomy, knee; anterior OR posterior	YES
Surgical - Musculoskeletal	27335	Arthrotomy, with synovectomy, knee; anterior AND posterior including popliteal area	YES
Surgical - Musculoskeletal	27345	Excision synovial cyst popliteal space	NO
Surgical - Musculoskeletal	27403	Arthrotomy with meniscus repair, knee	YES
Surgical - Musculoskeletal	27405	Repair, primary, torn ligament and/or capsule, knee; collateral	YES
Surgical - Musculoskeletal	27407	Repair, primary, torn ligament and/or capsule, knee; cruciate	YES

Surgical - Musculoskeletal	27409	Repair, primary, torn ligament and/or capsule, knee; collateral and cruciate ligaments	YES
Surgical - Musculoskeletal	27412	Autologous chondrocyte implantation, knee	YES
Surgical - Musculoskeletal	27415	Osteochondral allograft, knee, open	YES
Surgical - Musculoskeletal	27416	Osteochondral autograft(s), knee, open (eg, mosaicplasty) (includes harvesting of autograft[s])	YES
Surgical - Musculoskeletal	27425	Release of ligaments of knee joint, open procedure	YES
Surgical - Musculoskeletal	27427	Ligamentous reconstruction (augmentation), knee; extra-articular	YES
Surgical - Musculoskeletal	27428	Ligamentous reconstruction (augmentation), knee; intra-articular (open)	YES
Surgical - Musculoskeletal	27429	Ligamentous reconstruction (augmentation), knee; intra-articular (open) and extra-articular	YES
Surgical - Musculoskeletal	27437	Arthroplasty, patella; without prosthesis	YES
Surgical - Musculoskeletal	27438	Arthroplasty, patella; with prosthesis	YES
Surgical - Musculoskeletal	27440	Arthroplasty, knee; tibial plateau	YES
Surgical - Musculoskeletal	27441	Arthroplasty, knee, tibial plateau; with debridement and partial synovectomy	YES
Surgical - Musculoskeletal	27442	Arthroplasty, femoral condyles or tibial plateau(s), knee	YES
Surgical - Musculoskeletal	27443	Arthroplasty, femoral condyles or tibial plateau(s), knee; with debridement and partial synovectomy	YES
Surgical - Musculoskeletal	27445	Arthroplasty, knee, hinge prosthesis (eg, Walldius type)	YES
Surgical - Musculoskeletal	27446	Arthroplasty, knee, condyle and plateau; medial OR lateral compartment	YES
Surgical - Musculoskeletal	27447	Arthroplasty, knee, condyle and plateau; medial AND lateral compartments with or without patella resurfacing (total knee arthroplasty)	YES
Surgical - Musculoskeletal	27486	Revision of total knee arthroplasty, with or without allograft; 1 component	YES
Surgical - Musculoskeletal	27487	Revision of total knee arthroplasty, with or without allograft; femoral and entire tibial component	YES
Surgical - Musculoskeletal	27488	Removal of prosthesis, including total knee prosthesis, methylmethacrylate with or without insertion of spacer, knee	YES
Surgical - Musculoskeletal	27570	Manipulation of knee joint under general anesthesia (includes application of traction or other fixation devices)	YES
Surgical - Musculoskeletal	27580	FUSION OF KNEE	YES
Investigational Potential	27599	Unlisted procedure, femur or knee [when specified as bicompartamental knee arthroplasty] or [when specified as implantation of RETHYMIC into quadriceps muscle]	YES
Surgical - Musculoskeletal	27702	Arthroplasty, Ankle; W/implant (Total Ankle)	YES

Surgical - Musculoskeletal	27703	Arthroplasty, Ankle; Revision, Total Ankle	YES
Surgical - Musculoskeletal	27704	Removal, Ankle Implant	YES
Procedure - Misc.	27860	Manipulation of ankle under general anesthesia (includes application of traction or other fixation apparatus)	NO
Surgical - Musculoskeletal	27870	Arthrodesis, Ankle, Open	YES
Surgical - Musculoskeletal	27899	LEG/ANKLE SURGERY PROC UNLISTED	YES
Surgical - Musculoskeletal	28110	Ostectomy, Partial Excision, 5th Metatarsal Head (Bunionette) (Sep Proc)	NO
Surgical - Musculoskeletal	28285	Correction, Hammertoe	NO
Surgical - Musculoskeletal	28286	Correction, Cock-Up Fifth Toe, W/Plastic Skin Closure	NO
Surgical - Musculoskeletal	28289	Hallux rigidus correction with cheilectomy, debridement and capsular release of the first metatarsophalangeal joint; without implant	NO
Surgical - Musculoskeletal	28291	Hallux rigidus correction with cheilectomy, debridement and capsular release of the first metatarsophalangeal joint with implant	NO
Surgical - Musculoskeletal	28292	Correction, hallux valgus (bunionectomy), with sesamoidectomy, when performed; with resection of proximal phalanx base, when performed, any method	NO
Surgical - Musculoskeletal	28295	Correction, hallux valgus (bunion), with or without sesamoidectomy;with proximal metatarsal osteotomy, any method	NO
Surgical - Musculoskeletal	28296	Correction, hallux valgus (bunionectomy), with sesamoidectomy, when performed; with distal metatarsal osteotomy, any method	NO
Surgical - Musculoskeletal	28297	Correction, hallux valgus (bunion), with or without sesamoidectomy; Lapidus-type procedure	NO
Surgical - Musculoskeletal	28298	Correction, hallux valgus (bunionectomy), with sesamoidectomy, when performed; with proximal phalanx osteotomy, any method	NO
Surgical - Musculoskeletal	28299	Correction, hallux valgus (bunionectomy), with sesamoidectomy, when performed; with double osteotomy, any method	NO
Surgical - Musculoskeletal	28306	Osteotomy, with or without lengthening, shortening or angular correction, metatarsal; first metatarsal	NO
Surgical - Musculoskeletal	28307	Osteotomy, with or without lengthening, shortening or angular correction, metatarsal; first metatarsal with autograft (other than first toe)	NO
Surgical - Musculoskeletal	28308	Osteotomy, with or without lengthening, shortening or angular correction, metatarsal; other than first metatarsal, each	NO
Surgical - Musculoskeletal	28310	Osteotomy, shortening, angular or rotational correction; proximal phalanx, first toe (separate procedure)	NO
Surgical - Musculoskeletal	28312	Osteotomy, shortening, angular or rotational correction; other phalanges, any toe	NO
Surgical - Musculoskeletal	28315	Sesamoidectomy, first toe (separate procedure)	NO
Surgical - Musculoskeletal	28446	Open osteochondral autograft, talus (includes obtaining graft[s])	NO
Surgical - Musculoskeletal	28725	FUSION FOOT BONES,SUBTALAR	NO

Surgical - Musculoskeletal	28750	Arthrodesis, Great Toe; Metatarsophalangeal Joint	NO
Investigational Potential	28890	Extracorporeal shock wave, high energy, performed by a physician or other qualified health care professional, requiring anesthesia other than local, including ultrasound guidance, involving the plantar fascia	NO
Investigational Potential	28899	Unlisted procedure, foot or toes [when specified as cryoablation of plantar fasciitis or plantar fibroma] or [when specified as subtalar arthroereisis]	YES
Surgical - Musculoskeletal	29126	APPLY FOREARM SPLINT,DYNAMIC	NO
Surgical - Musculoskeletal	29131	APPLY FINGER SPLINT,DYNAMIC	NO
Surgical - Musculoskeletal	29799	CAST/STRAP PROCEDURE UNLISTED	YES
Surgical - Musculoskeletal	29800	TMJ ARTHROSCOPY/DIAGNOSTIC	YES
Surgical - Musculoskeletal	29804	TMJ ARTHROSCOPY/SURGERY	YES
Surgical - Musculoskeletal	29805	Arthroscopy, shoulder, diagnostic, with or without synovial biopsy (separate procedure)	YES
Surgical - Musculoskeletal	29806	Arthroscopy, shoulder, surgical; capsulorrhaphy	YES
Surgical - Musculoskeletal	29807	Arthroscopy, shoulder, surgical; repair of SLAP lesion	YES
Surgical - Musculoskeletal	29819	Arthroscopy, shoulder, surgical; with removal of loose body or foreign body	YES
Surgical - Musculoskeletal	29820	Arthroscopy, shoulder, surgical; synovectomy, partial	YES
Surgical - Musculoskeletal	29821	Arthroscopy, shoulder, surgical; synovectomy, complete	YES
Surgical - Musculoskeletal	29822	Arthroscopy, shoulder, surgical; debridement, limited	YES
Surgical - Musculoskeletal	29823	Arthroscopy, shoulder, surgical; debridement, extensive	YES
Surgical - Musculoskeletal	29824	Arthroscopy, shoulder, surgical; distal claviclectomy including distal articular surface (Mumford procedure)	YES
Surgical - Musculoskeletal	29825	Arthroscopy, shoulder, surgical; with lysis and resection of adhesions, with or without manipulation	YES
Surgical - Musculoskeletal	29826	Arthroscopy, shoulder, surgical; decompression of subacromial space with partial acromioplasty, with coracoacromial ligament (ie, arch) release, when performed (List separately in addition to code for primary procedure)	YES
Surgical - Musculoskeletal	29827	Arthroscopy, shoulder, surgical; with rotator cuff repair	YES
Surgical - Musculoskeletal	29828	Arthroscopy, shoulder, surgical; biceps tenodesis	YES
Surgical - Musculoskeletal	29843	WRIST ARTHROSCOP,CLEAN/DRAIN	YES
Surgical - Musculoskeletal	29845	WRIST ARTHROSCOP,FULL SYNOVECT	YES
Surgical - Musculoskeletal	29860	Arthroscopy, hip, diagnostic with or without synovial biopsy (separate procedure)	YES

Surgical - Musculoskeletal	29861	Arthroscopy, hip, surgical; with removal of loose body or foreign body	YES
Surgical - Musculoskeletal	29862	Arthroscopy, hip, surgical; with debridement/shaving of articular cartilage (chondroplasty), abrasion arthroplasty, and/or resection of labrum	YES
Surgical - Musculoskeletal	29863	Arthroscopy, hip, surgical; with synovectomy	YES
Surgical - Musculoskeletal	29866	Arthroscopy, knee, surgical; osteochondral autograft(s) (eg, mosaicplasty) (includes harvesting of the autograft[s])	YES
Surgical - Musculoskeletal	29867	Arthroscopy, knee, surgical; osteochondral allograft (eg, mosaicplasty)	YES
Surgical - Musculoskeletal	29868	Arthroscopy, knee, surgical; meniscal transplantation (includes arthrotomy for meniscal insertion), medial or lateral	YES
Surgical - Musculoskeletal	29870	Arthroscopy, knee, diagnostic, with or without synovial biopsy (separate procedure)	YES
Surgical - Musculoskeletal	29871	Arthroscopy, knee, surgical; for infection, lavage and drainage	YES
Surgical - Musculoskeletal	29873	Arthroscopy, knee, surgical; with lateral release	YES
Surgical - Musculoskeletal	29874	Arthroscopy, knee, surgical; for removal of loose body or foreign body (eg, osteochondritis dissecans fragmentation, chondral fragmentation)	YES
Surgical - Musculoskeletal	29875	Arthroscopy, knee, surgical; synovectomy, limited (eg, plica or shelf resection) (separate procedure)	YES
Surgical - Musculoskeletal	29876	Arthroscopy, knee, surgical; synovectomy, major, 2 or more compartments (eg, medial or lateral)	YES
Surgical - Musculoskeletal	29877	Arthroscopy, knee, surgical; debridement/shaving of articular cartilage (chondroplasty)	YES
Surgical - Musculoskeletal	29879	Arthroscopy, knee, surgical; abrasion arthroplasty (includes chondroplasty where necessary) or multiple drilling or microfracture	YES
Surgical - Musculoskeletal	29880	Arthroscopy, knee, surgical; with meniscectomy (medial AND lateral, including any meniscal shaving) including debridement/shaving of articular cartilage (chondroplasty), same or separate compartment(s), when performed	YES
Surgical - Musculoskeletal	29881	KNEE SCOPE,MED/LAT MENISECTOMY	YES
Surgical - Musculoskeletal	29882	Arthroscopy, knee, surgical; with meniscus repair (medial OR lateral)	YES
Surgical - Musculoskeletal	29883	Arthroscopy, knee, surgical; with meniscus repair (medial AND lateral)	YES
Surgical - Musculoskeletal	29884	Arthroscopy, knee, surgical; with lysis of adhesions, with or without manipulation (separate procedure)	YES
Surgical - Musculoskeletal	29885	Arthroscopy, knee, surgical; drilling for osteochondritis dissecans with bone grafting, with or without internal fixation (including debridement of base of lesion)	YES
Surgical - Musculoskeletal	29886	Arthroscopy, knee, surgical; drilling for intact osteochondritis dissecans lesion	YES
Surgical - Musculoskeletal	29887	Arthroscopy, knee, surgical; drilling for intact osteochondritis dissecans lesion with internal fixation	YES
Surgical - Musculoskeletal	29888	KNEE SCOPE,AID ANT CRUCIATE REPAIR	YES
Surgical - Musculoskeletal	29889	Arthroscopically aided posterior cruciate ligament repair/augmentation or reconstruction	YES

Surgical - Musculoskeletal	29892	Arthroscopically aided repair of large osteochondritis dissecans lesion, talar dome fracture, or tibial plafond fracture, with or without internal fixation (includes arthroscopy)	YES
Surgical - Musculoskeletal	29893	ANKLE SCOPE,PLANTAR FASCIOTOMY	YES
Surgical - Musculoskeletal	29894	ANKLE SCOPE,REMOVL LOOSE BODY	YES
Surgical - Musculoskeletal	29897	ANKLE SCOPE,PART DEBRIDEMENT	YES
Surgical - Musculoskeletal	29898	ANKLE SCOPE,EXTENS DEBRIDEMNT	YES
Surgical - Musculoskeletal	29899	ANKLE SCOPE,W/ANKLE ARTHRODESIS	YES
Surgical - Musculoskeletal	29904	ARTHROSCOPY SUBTALAR JOINT REMOVE LOOSE/FOREIGN BODY	YES
Surgical - Musculoskeletal	29905	ARTHROSCOPY SUBTALAR JOINT WITH SYNOVECTOMY	YES
Surgical - Musculoskeletal	29914	Arthroscopy, hip, surgical; with femoroplasty (ie, treatment of cam lesion)	YES
Surgical - Musculoskeletal	29915	Arthroscopy, hip, surgical; with acetabuloplasty (ie, treatment of pincer lesion)	YES
Surgical - Musculoskeletal	29916	Arthroscopy, hip, surgical; with labral repair	YES
Investigational Potential	29999	Unlisted procedure, arthroscopy [when specified as thermal capsulorrhaphy of shoulder; elbow, wrist, hip, knee or ankle] or [when specified as surgery using Coblation technology]	YES
Investigational Potential	30117	Excision or destruction (eg, laser), intranasal lesion, internal approach]	YES
Cosmetic Potential	30120	Excision or surgical planing of skin of nose for rhinophyma	NO
Cosmetic Potential	30400	Rhinoplasty, primary; lateral and alar cartilages and/or elevation of nasal tip	NO
Cosmetic Potential	30410	Rhinoplasty, primary; complete, external parts including bony pyramid, lateral and alar cartilages, and/or elevation of nasal tip	NO
Cosmetic Potential	30420	Rhinoplasty, primary; including major septal repair	NO
Cosmetic Potential	30430	Rhinoplasty, secondary; minor revision (small amount of nasal tip work)	NO
Cosmetic Potential	30435	Rhinoplasty, secondary; intermediate revision (bony work with osteotomies)	NO
Cosmetic Potential	30450	Rhinoplasty, secondary; major revision (nasal tip work and osteotomies)	NO
Cosmetic Potential	30460	REVIS NOSE/CLEFT LIP/TIP	YES
Cosmetic Potential	30462	REVIS NOSE/CLEFT LIP/TIP,SEPTUM	YES
Cosmetic Potential	30465	REPAIR NASAL CAVITY STENOSIS	YES
Investigational Potential	30468	Repair of nasal valve collapse with subcutaneous/submucosal lateral wall implant(s)	YES
Investigational Potential	30469	Repair of nasal valve collapse with low energy, temperature-controlled (ie, radiofrequency) subcutaneous/submucosal remodeling	YES

Cosmetic Potential	30520	Septoplasty or submucous resection, with or without cartilage scoring, contouring or replacement with graft	YES
Cosmetic Potential	30620	Septal or other intranasal dermatoplasty (does not include obtaining graft)	YES
Surgical – ENT	30801	CAUTER TURBINATE MUCOSA,SUPERFICIAL	YES
Surgical – ENT	30802	CAUTER TURBINATE MUCOSA,INTRAMURAL	YES
Investigational Potential	30999	Unlisted procedure, nose [when specified as rhinophototherapy, intranasal application of ultraviolet and visible light] or [when specified as nasal valve suspension by any method] or [when specified as minimally invasive treatment of the posterior nasal nerve, for example using cryotherapy, radiofrequency therapy or laser]	YES
Investigational Potential	31242	Nasal/sinus endoscopy, surgical; with destruction by radiofrequency ablation, posterior nasal nerve	NO
Investigational Potential	31243	Nasal/sinus endoscopy, surgical; with destruction by cryoablation, posterior nasal nerve	NO
Surgical – ENT	31267	NASAL SCOPY,RMV TISS MAXILL SINUS	YES
Surgical – ENT	31276	NASAL SCOPY,EXPLOR FRONTAL SINUS	YES
Surgical – ENT	31287	NASAL SCOPY,SPHENOIDOTOMY	YES
Surgical – ENT	31288	NASAL SCOPY,REMV TISS SPHENOID	YES
Surgical – ENT	31295	NASAL/SINUS ENDOSCOPY,W/DILAT MAXILLARY SINUS OSTIUM	YES
Surgical – ENT	31296	NASAL/SINUS ENDOSCOPY,W/DILAT FRONTAL SINUS OSTIUM	YES
Surgical – ENT	31297	NASAL/SINUS ENDOSCOPY,W/DILAT SPHENOID SINUS OSTIUM	YES
Surgical – ENT	31298	NASAL/SINUS ENDOSCOPY W/FRONTAL & SPHENOID SINUS DILATION	YES
Surgical – ENT	31299	Unlisted procedure, accessory sinuses [when specified as insertion of a drug-eluting sinus stent]	YES
Bioengineered Wound Healing	31574	Laryngoscopy, flexible; with injection(s) for augmentation (eg, percutaneous, transoral), unilateral	NO
Cosmetic Potential	31599	Unlisted procedure, Larynx	YES
Endoscopy	31627	Bronchoscopy, rigid or flexible, including fluoroscopic guidance, when performed; with computer-assisted, image-guided navigation [add-on code]	NO
Radiation	31643	Bronchoscopy, rigid or flexible, including fluoroscopic guidance, when performed; with placement of catheter(s) for intracavitary radioelement application	YES
Endoscopy	31647	Bronchoscopy, rigid or flexible, including fluoroscopic guidance, when performed; with balloon occlusion, when performed, assessment of air leak, airway sizing, and insertion of bronchial valve(s), initial lobe	NO
Endoscopy	31648	Bronchoscopy, rigid or flexible, including fluoroscopic guidance, when performed; with removal of bronchial valve(s), initial lobe	NO
Endoscopy	31649	Bronchoscopy, rigid or flexible, including fluoroscopic guidance, when performed; with removal of bronchial valve(s), each additional lobe	NO
Endoscopy	31651	Bronchoscopy, rigid or flexible, including fluoroscopic guidance, when performed; with balloon occlusion, when performed, assessment of air leak, airway sizing, and insertion of bronchial valve(s), each additional lobe	NO
Investigational Potential	31660	Bronchoscopy, rigid or flexible, including fluoroscopic guidance, when performed; with bronchial thermoplasty, 1 lobe	YES
Investigational Potential	31661	Bronchoscopy, rigid or flexible, including fluoroscopic guidance, when performed; with bronchial thermoplasty, 2 or more lobes	YES
Surgical – ENT	31899	AIRWAYS SURGICAL PROCEDURE UNLISTED	YES

Radiation	32553	Placement of interstitial device(s) for radiation therapy guidance (eg, fiducial markers, dosimeter), percutaneous, intra-thoracic, single or multiple	YES
Surgical - Misc.	32664	Thoracoscopy, surgical; with thoracic sympathectomy	NO
Radiation	32701	Thoracic target(s) delineation for stereotactic body radiation therapy (SRS/SBRT), (photon or particle beam), entire course of treatment	YES
Transplant	32850	Donor pneumonectomy(s) (including cold preservation), from cadaver donor	NO
Transplant	32851	Lung transplant, single; without cardiopulmonary bypass	YES
Transplant	32852	Lung transplant, single; with cardiopulmonary bypass	YES
Transplant	32853	Lung transplant, double (bilateral sequential or en bloc); without cardiopulmonary bypass	YES
Transplant	32854	Lung transplant, double (bilateral sequential or en bloc); with cardiopulmonary bypass	YES
Transplant	32855	Backbench standard preparation of cadaver donor lung allograft prior to transplantation, including dissection of allograft from surrounding soft tissues to prepare pulmonary venous/atrial cuff, pulmonary artery, and bronchus; unilateral	NO
Transplant	32856	Backbench standard preparation of cadaver donor lung allograft prior to transplantation, including dissection of allograft from surrounding soft tissues to prepare pulmonary venous/atrial cuff, pulmonary artery, and bronchus; bilateral	NO
Procedure - Oncology	32994	Ablation therapy for reduction or eradication of 1 or more pulmonary tumor(s) including pleura or chest wall when involved by tumor extension, percutaneous, including imaging	YES
Procedure - Oncology	32998	Ablation therapy for reduction or eradication of 1 or more pulmonary tumor(s) including pleura or chest wall when involved by tumor extension, percutaneous, radiofrequency, unilateral	YES
Surgical - Cardiac	32999	CHEST SURGERY PROCEDURE UNLISTED	YES
Surgical - Cardiac	33020	INCISION OF HEART SAC	NO
Surgical - Cardiac	33030	PARTIAL REMOVAL OF HEART SAC	NO
Surgical - Cardiac	33120	REMOVAL OF HEART LESION	NO
Surgical - Cardiac	33140	Transmyocardial laser revascularization, by thoracotomy; (separate procedure)	NO
Surgical - Cardiac	33141	Transmyocardial laser revascularization, by thoracotomy; performed at the time of other open cardiac procedure(s) [add-on]	NO
Procedure - Cardiac	33202	Insertion of epicardial electrode(s); open incision (eg, thoracotomy, median sternotomy, subxiphoid approach)	NO
Procedure - Cardiac	33203	Insertion of epicardial electrode(s); endoscopic approach (eg, thoracoscopy, pericardioscopy)	NO
Procedure - Cardiac	33208	Insertion or replacement of permanent pacemaker with transvenous electrode(s); atrial and ventricular	NO
Procedure - Cardiac	33214	Upgrade of implanted pacemaker system, conversion of single chamber system to dual chamber system (includes removal of previously placed pulse generator, testing of existing lead, insertion of new lead, insertion of new pulse generator)	NO

Procedure - Cardiac	33216	Insertion of a transvenous electrode; single chamber (1 electrode) permanent pacemaker or single chamber pacing cardioverter-defibrillator	NO
Procedure - Cardiac	33217	Insertion of a transvenous electrode; dual chamber (2 electrodes) permanent pacemaker or dual chamber pacing cardioverter-defibrillator	NO
Procedure - Cardiac	33224	Insertion of pacing electrode, cardiac venous system, for left ventricular pacing, with attachment to previously placed pacemaker or pacing cardioverter-defibrillator pulse generator (including revision of pocket, removal, insertion, and/or replacement of existing generator)	NO
Procedure - Cardiac	33225	Insertion of pacing electrode, cardiac venous system, for left ventricular pacing, at time of insertion of pacing cardioverter-defibrillator or pacemaker pulse generator (including upgrade to dual chamber system)	NO
Procedure - Cardiac	33226	Repositioning of previously implanted cardiac venous system (left ventricular) electrode (including removal, insertion and/or replacement of generator)	NO
Procedure - Cardiac	33228	Removal of permanent pacemaker pulse generator with replacement of pacemaker pulse generator; dual lead system	NO
Procedure - Cardiac	33229	Removal of permanent pacemaker pulse generator with replacement of pacemaker pulse generator; multiple lead system	NO
Procedure - Cardiac	33230	Insertion of implantable defibrillator pulse generator only; with existing dual leads	NO
Procedure - Cardiac	33231	Insertion of implantable defibrillator pulse generator only; with existing multiple leads	NO
Procedure - Cardiac	33240	Insertion of single or dual chamber pacing cardioverter- defibrillator pulse generator	NO
Procedure - Cardiac	33249	Insertion or repositioning of electrode lead(s) for single or dual chamber pacing cardioverter- defibrillator and insertion of pulse generator	NO
Procedure - Cardiac	33254	Operative tissue ablation and reconstruction of atria, limited (e.g., modified maze procedure)	NO
Procedure - Cardiac	33255	Operative tissue ablation and reconstruction of atria, extensive (eg, maze procedure); without cardiopulmonary bypass	NO
Procedure - Cardiac	33256	Operative tissue ablation and reconstruction of atria, extensive (eg, maze procedure); with cardiopulmonary bypass	NO
Procedure - Cardiac	33258	Operative tissue ablation and reconstruction of atria, performed at the time of other cardiac procedure(s), extensive (eg, maze procedure), without cardiopulmonary bypass	NO
Procedure - Cardiac	33259	Operative tissue ablation and reconstruction of atria, performed at the time of other cardiac procedure(s), extensive (eg, maze procedure), with cardiopulmonary bypass	NO
Procedure - Cardiac	33263	Removal of implantable defibrillator pulse generator with replacement of implantable defibrillator pulse generator; dual lead system	NO
Procedure - Cardiac	33264	Removal of implantable defibrillator pulse generator with replacement of implantable defibrillator pulse generator; multiple lead system	NO
Procedure - Cardiac	33265	Endoscopy, surgical; operative tissue ablation and reconstruction of atria, limited (eg, modified maze procedure), without cardiopulmonary bypass	NO
Procedure - Cardiac	33266	Endoscopy, surgical; operative tissue ablation and reconstruction of atria, extensive (eg, maze procedure), without cardiopulmonary bypass	NO

Investigational Potential	33267	Exclusion of left atrial appendage, open, any method (eg, excision, isolation via stapling, oversewing, ligation, plication, clip)	YES
Investigational Potential	33268	Exclusion of left atrial appendage, open, performed at the time of other sternotomy or thoracotomy procedure(s), any method (eg, excision, isolation via stapling, oversewing, ligation, plication, clip) (List separately in addition to code for primary procedure)	YES
Investigational Potential	33269	Exclusion of left atrial appendage, thoracoscopic, any method (eg, excision, isolation via stapling, oversewing, ligation, plication, clip)	YES
Procedure - Cardiac	33270	Insertion or replacement of permanent subcutaneous implantable defibrillator system, with subcutaneous electrode, including defibrillation threshold evaluation, induction of arrhythmia, evaluation of sensing for arrhythmia termination, and programming or reprogramming of sensing or therapeutic parameters, when performed	NO
Procedure - Cardiac	33271	Insertion of subcutaneous implantable defibrillator electrode	NO
Investigational Potential	33274	Transcatheter insertion or replacement of permanent leadless pacemaker, right ventricular, including imaging guidance (eg, fluoroscopy, venous ultrasound, ventriculography, femoral venography) and device evaluation (eg, interrogation or programming), when performed	YES
Investigational Potential	33275	Transcatheter removal of permanent leadless pacemaker, right ventricular, including imaging guidance (eg, fluoroscopy, venous ultrasound, ventriculography, femoral venography), when performed	YES
Procedure - Cardiac	33276	Phrenic nerve stimulator system placement, initial analysis with diagnostic mode activation, when performed	NO
Procedure - Cardiac	33277	Phrenic nerve stimulator transvenous lead placement (List separately in addition to code for primary procedure)	NO
Procedure - Cardiac	33278	Phrenic nerve stimulator removal	NO
Procedure - Cardiac	33279	Phrenic nerve stimulator removal; transvenous stimulation or sensing lead(s) only	NO
Procedure - Cardiac	33280	Phrenic nerve stimulator removal; pulse generator only	NO
Procedure - Cardiac	33281	Phrenic nerve stimulator transvenous lead repositioning	NO
Surgical - Cardiac	33282	IMPLANT PAT-ACTIVE HT RECORD	NO
Procedure - Cardiac	33285	Insertion, subcutaneous cardiac rhythm monitor, including programming	NO
Procedure - Cardiac	33287	Phrenic nerve stimulator, removal and replacement; pulse generator	NO
Procedure - Cardiac	33288	Phrenic nerve stimulator removal and replacement; transvenous stimulation or sensing lead	NO
Investigational Potential	33289	Transcatheter implantation of wireless pulmonary artery pressure sensor for long-term hemodynamic monitoring, including deployment and calibration of the sensor, right heart catheterization, selective pulmonary catheterization, radiological supervision and interpretation, and pulmonary artery angiography, when performed	YES
Investigational Potential	33340	Percutaneous transcatheter closure of the left atrial appendage with endocardial implant, including fluoroscopy, transeptal puncture, catheter placement(s), left atrial angiography, left atrial appendage angiography, when performed, and radiological supervision and interpretation	YES

Procedure - Cardiac	33361	Transcatheter aortic valve replacement (TAVR/TAVI) with prosthetic valve; percutaneous femoral artery approach	YES
Surgical - Cardiac	33362	Transcatheter aortic valve replacement (TAVR/TAVI) with prosthetic valve; open femoral artery approach	YES
Procedure - Cardiac	33363	Transcatheter aortic valve replacement (TAVR/TAVI) with prosthetic valve; open axillary artery approach	YES
Procedure - Cardiac	33364	Transcatheter aortic valve replacement (TAVR/TAVI) with prosthetic valve; open iliac artery approach	YES
Procedure - Cardiac	33365	Transcatheter aortic valve replacement (TAVR/TAVI) with prosthetic valve; transaortic approach (eg, median sternotomy, mediastinotomy)	YES
Procedure - Cardiac	33366	Transcatheter aortic valve replacement (TAVR/TAVI) with prosthetic valve; transapical exposure (eg, left thoracotomy)	YES
Surgical - Cardiac	33367	Transcatheter aortic valve replacement (TAVR/TAVI) with prosthetic valve; cardiopulmonary bypass support with percutaneous peripheral arterial and venous cannulation (eg, femoral vessels)	YES
Procedure - Cardiac	33368	Transcatheter aortic valve replacement (TAVR/TAVI) with prosthetic valve; cardiopulmonary bypass support with open peripheral arterial and venous cannulation (eg, femoral, iliac, axillary vessels)	YES
Procedure - Cardiac	33369	Transcatheter aortic valve replacement (TAVR/TAVI) with prosthetic valve; cardiopulmonary bypass support with central arterial and venous cannulation (eg, aorta, right atrium, pulmonary artery)	YES
Procedure - Cardiac	33370	Transcatheter placement and subsequent removal of cerebral embolic protection device(s), including arterial access, catheterization, imaging, and radiological supervision and interpretation, percutaneous (List separately in addition to code for primary procedure)	NO
Surgical - Cardiac	33390	VALVULOPLASTY AORTIC VALVE	NO
Surgical - Cardiac	33405	REPLACE AORT VALV,PROSTH VALV	YES
Surgical - Cardiac	33406	REPLACE AORT VALVE W/ALLOGRAFT VALVE	YES
Surgical - Cardiac	33411	REPLACEMENT OF AORTIC VALVE	NO
Surgical - Cardiac	33412	REPLACEMENT OF AORTIC VALVE	NO
Surgical - Cardiac	33413	REPLACEMENT OF AORTIC VALVE	NO
Surgical - Cardiac	33415	REVISION, SUBVALVULAR TISSUE	NO
Procedure - Cardiac	33418	Transcatheter mitral valve repair, percutaneous approach, including transseptal puncture when performed; initial prosthesis	NO
Surgical - Cardiac	33419	Transcatheter mitral valve repair, percutaneous approach, including transseptal puncture when performed; additional prosthesis(es) during same session	YES
Surgical - Cardiac	33425	REPAIR OF MITRAL VALVE	NO
Surgical - Cardiac	33427	REPAIR OF MITRAL VALVE	NO
Surgical - Cardiac	33430	REPLACEMENT OF MITRAL VALVE	NO
Surgical - Cardiac	33463	VALVULOPLASTY, TRICUSPID	NO
Surgical - Cardiac	33464	VALVULOPLASTY, TRICUSPID	NO
Surgical - Cardiac	33465	REPLACE TRICUSPID VALVE	NO
Surgical - Cardiac	33474	REVISION OF PULMONARY VALVE	NO
Surgical - Cardiac	33475	REPLACEMENT, PULMONARY VALVE	NO
Procedure - Cardiac	33477	Transcatheter pulmonary valve implantation, percutaneous approach, including pre-stenting of the valve delivery site, when performed	NO
Surgical - Cardiac	33513	CABG, VEIN, FOUR	NO

Surgical - Cardiac	33535	CABG, ARTERIAL, THREE	NO
Surgical - Cardiac	33542	REMOVAL OF HEART LESION	NO
Investigational Potential	33548	Surgical ventricular restoration procedure, includes prosthetic patch, when performed (eg, ventricular remodeling, SVR, SAVER, Dor procedures)	YES
Surgical - Cardiac	33602	CLOSURE OF VALVE	NO
Surgical - Cardiac	33612	REPAIR DOUBLE VENTRICLE	NO
Surgical - Cardiac	33617	REPAIR SINGLE VENTRICLE	NO
Surgical - Cardiac	33660	REPAIR OF HEART DEFECTS	NO
Surgical - Cardiac	33677	CL MULT VSD W/REM PUL BAND	NO
Surgical - Cardiac	33840	REMOVE AORTA CONSTRICTION	NO
Surgical - Cardiac	33859	AS-AORT GRF F/DS OTH/THN DSJ	NO
Surgical - Cardiac	33860	ASCENDING AORTIC GRAFT	NO
Surgical - Cardiac	33864	ASCENDING AORTIC GRAFT	NO
Surgical - Cardiac	33870	TRANSVERSE AORTIC ARCH GRAFT	NO
Surgical - Cardiac	33877	THORACOABDOMINAL GRAFT	NO
Surgical - Cardiac	33894	EVASC ST RPR COARC THRC/AA ACRS MAJ SIDE BRNCH	NO
Surgical - Cardiac	33895	EVASC ST RPR COARC THRC/AA XCRSG MAJ SIDE BRNCH	NO
Surgical - Cardiac	33897	PERQ TRANSLUMINAL ANGIOPLASTY NATIVE/RECR COA	NO
Surgical - Cardiac	33900	PERQ P-ART REVSC ST IST NML NATIVE CONNECTN UNI	NO
Surgical - Cardiac	33901	PERQ P-ART REVSC ST IST NML NATIVE CONNECTN BI	NO
Surgical - Cardiac	33902	PERQ P-ART REVSC ST IST ABNOR CONNECTN UNILATERAL	NO
Surgical - Cardiac	33903	PERQ P-ART REVSC ST IST ABNORMAL CONNECTN BILATERAL	NO
Surgical - Cardiac	33904	PERQ P-ART REVSC ST EA ADDL VSL/SEP LES NM/ABNL	NO
Procedure - Cardiac	33927	Implantation of a total replacement heart system (artificial heart) with recipient cardiectomy	YES
Procedure - Cardiac	33928	Removal and replacement of total replacement heart system (artificial heart)	YES
Procedure - Cardiac	33929	Removal of a total replacement heart system (artificial heart) for heart transplantation	YES
Transplant	33930	Donor cardiectomy-pneumonectomy (including cold preservation)	NO
Transplant	33933	Backbench standard preparation of cadaver donor heart/lung allograft prior to transplantation, including dissection of allograft from surrounding soft tissues to prepare aorta, superior vena cava, inferior vena cava, and trachea for implantation	NO
Transplant	33935	Heart-lung transplant with recipient cardiectomy-pneumonectomy	YES
Transplant	33940	Donor cardiectomy (including cold preservation)	NO
Transplant	33944	Backbench standard preparation of cadaver donor heart allograft prior to transplantation, including dissection of allograft from surrounding soft tissues to prepare aorta, superior vena cava, inferior vena cava, pulmonary artery, and left atrium for implantation	NO
Transplant	33945	Heart transplant, with or without recipient cardiectomy	YES
Procedure - Cardiac	33975	Insertion of ventricular assist device; extracorporeal, single ventricle	YES
Procedure - Cardiac	33976	Insertion of ventricular assist device; extracorporeal, biventricular	YES
Procedure - Cardiac	33979	Insertion of ventricular assist device; implantable intracorporeal, single ventricle	YES
Procedure - Cardiac	33981	Replacement of extracorporeal ventricular assist device, single or biventricular, pump(s), single or each pump	YES

Procedure - Cardiac	33982	Replacement of ventricular assist device pump(s); implantable intracorporeal, single ventricle, without cardiopulmonary bypass	YES
Procedure - Cardiac	33983	Replacement of ventricular assist device pump(s); implantable intracorporeal, single ventricle, with cardiopulmonary bypass	YES
Procedure - Cardiac	33990	Insertion of ventricular assist device, percutaneous, including radiological supervision and interpretation; left heart, arterial access only	NO
Procedure - Cardiac	33991	Insertion of ventricular assist device, percutaneous, including radiological supervision and interpretation; left heart, both arterial and venous access, with transeptal puncture	NO
Procedure - Cardiac	33992	Removal of percutaneous ventricular assist device when removal occurs at a different episode of care than insertion	NO
Procedure - Cardiac	33993	Repositioning of percutaneous right or left heart ventricular assist device with imaging guidance at separate and distinct session from insertion	NO
Procedure - Cardiac	33995	Insertion of ventricular assist device, percutaneous, including radiological supervision and interpretation; right heart, venous access only	NO
Procedure - Cardiac	33997	Removal of percutaneous right heart ventricular assist device, venous cannula, at separate and distinct session from insertion	NO
Procedure - Cardiac	33999	Unlisted procedure, cardiac surgery [when specified as Batista procedure (partial left ventriculectomy) or dynamic cardiomyoplasty] or [when specified as transmyocardial transcatheter closure of ventricular septal defect, with implant, including cardiopulmonary bypass if performed] or [when specified as transcatheter replacement of tricuspid heart valve] or [when specified as autologous cell therapy for damaged myocardium, including harvesting and preparation of cells]	YES
Surgical - Cardiac	34502	RECONSTRUCT VENA CAVA	NO
Surgical - Cardiac	34520	CROSS-OVER VEIN GRAFT	NO
Surgical - Cardiac	34701	ENDOVASC REPAIR DEPLOYMENT AORTO-AORTIC ENDOGRAFT	NO
Surgical - Cardiac	34702	ENDOVASC REPAIR DEPLOYMENT AORTO-AORTIC ENDOGRAFT RUPTURE	NO
Surgical - Cardiac	34703	ENDOVASC REPAIR DEPLOYMENT AORTO-UN-ILIAC ENDOGRAFT	NO
Surgical - Cardiac	34704	ENDOVASC REPAIR DEPLOYMENT AORTO-UN-ILIAC ENDOGRAFT RUPTURE	NO
Surgical - Cardiac	34705	ENDOVASC REPAIR DEPLOYMENT AORTO-BI-ILIAC ENDOGRAFT	NO
Surgical - Cardiac	34706	EVASC RPR DPLMNT AORTO-BI-ILIAC NDGFT RPT	NO
Surgical - Cardiac	34707	EVASC RPR DPLMNT ILIO-ILIAC NDGFT	NO
Surgical - Cardiac	34708	ENDOVASC REPAIR DEPLOYMENT ILIO-ILIAC ENDOGRAFT RUPTURE, UNILAT	NO
Surgical - Cardiac	34709	PLACEMENT EXTENSION PROSTH FOR ENDOVASCULAR REPAIR	NO
Surgical - Cardiac	34710	DELAYED PLACEMENT EXTENSION PROSTH FOR ENDOVASC REPAIR, FIRST VESSEL	NO
Surgical - Cardiac	34711	DELAYED PLACEMENT EXTENSION PROSTH FOR ENDOVASC REPAIR, EA ADDL	NO
Surgical - Cardiac	34712	TRANSCATHETER DELIVERY ENHANCED FIXATION DEVICES RS&I	NO
Surgical - Cardiac	34713	PERQ ACCESS & CLOSURE FEMORAL ARTERY FOR DELIVERY ENDOGRAFT	NO
Surgical - Cardiac	34714	OPEN FEMORAL ARTERY EXPOSURE W/CONDUIT CREATION DELIVERY ENDOVASC PROSTH, UNILAT	NO
Surgical - Cardiac	34715	OPEN AXILLARY/SUBCLAVIAN ARTERY EXPOSURE DELIVERY ENDOVASC PROSTH, UNILAT	NO
Surgical - Cardiac	34716	OPEN AXILLARY/SUBCLAVIAN ARTERY EXPOSURE W/CONDUIT CREATION	NO
Surgical - Cardiac	35372	RECHANNELING OF ARTERY	NO
Surgical - Cardiac	35558	ARTERY BYPASS GRAFT	NO
Surgical - Cardiac	35566	ARTERY BYPASS GRAFT	NO
Surgical - Cardiac	35601	BYPASS GRAFT OTHR,CAROTID	NO
Surgical - Cardiac	35606	ARTERY BYPASS GRAFT	NO
Surgical - Cardiac	35612	BYPASS GRAFT OTHR,SUBCL-SUBCL	NO

Surgical - Cardiac	35616	BYPASS GRAFT OTHR,SUBCL-AXILL	NO
Surgical - Cardiac	35621	BYPASS GRAFT OTHR,AXILL-FEM	NO
Surgical - Cardiac	35623	BYPASS GRAFT OTHR,AXILL-POP	NO
Surgical - Cardiac	35626	BYPASS GRAFT OTHR,AORTO-SUBCL	NO
Surgical - Cardiac	35631	BYPASS GRAFT OTHR,AORTO-MESENER	NO
Surgical - Cardiac	35632	BYPASS GRAFT OTHR, ILIO-CELIAC	NO
Surgical - Cardiac	35633	BYPASS GRAFT OTHR,ILIO-MESENERIC	NO
Surgical - Cardiac	35634	BYPASS GRAFT OTHR, ILIORENAL	NO
Surgical - Cardiac	35636	BYPASS GRAFT OTHR,SPLENO-RENAL	NO
Surgical - Cardiac	35637	BYPASS GRAFT OTHR,AORTOILIAC	NO
Surgical - Cardiac	35638	BYPASS GRAFT OTHR,AORTOBI-ILIAC	NO
Surgical - Cardiac	35642	BYPASS GRAFT OTHR,CAROT-VERT	NO
Surgical - Cardiac	35645	BYPASS GRAFT OTHR,SUBCL-VERT	NO
Surgical - Cardiac	35646	BYPASS GRAFT OTHR,AORTOBIFEMORAL	NO
Surgical - Cardiac	35647	BYPASS GRAFT OTHR,AORTOFEMORAL	NO
Surgical - Cardiac	35650	BYPASS GRAFT OTHR,AXILL-AXILL	NO
Surgical - Cardiac	35654	BYPASS GRAFT OTHR,AXILL-FEM-FEM	NO
Surgical - Cardiac	35663	BYPASS GRAFT OTHR,ILIOILIAC	NO
Implantable Infusion Pumps	36260	Insertion of implantable intra-arterial infusion pump (eg, for chemotherapy of liver)	YES
Implantable Infusion Pumps	36261	Revision of implanted intra-arterial infusion pump [when specified as replacement]	YES
Procedure - Vascular	36299	VESSEL INJECTION PROCEDURE UNLISTED	YES
Procedure - Vascular	36465	Injection of non-compounded foam sclerosant with ultrasound compression maneuvers to guide dispersion of the injectate, inclusive of all imaging guidance and monitoring; single incompetent extremity truncal vein (eg, great saphenous vein, accessory saphenous vein)	Yes
Procedure - Vascular	36466	Injection of non-compounded foam sclerosant with ultrasound compression maneuvers to guide dispersion of the injectate, inclusive of all imaging guidance and monitoring; multiple incompetent truncal veins (eg, great saphenous vein, accessory saphenous vein), same leg	Yes
Cosmetic Potential	36468	Injection(s) of sclerosant for spider veins (telangiectasia); limb or trunk	YES
Procedure - Vascular	36470	Injection of sclerosing solution; single incompetent vein (other than telangiectasia)	Yes
Procedure - Vascular	36471	Injection of sclerosing solution; multiple incompetent veins, same leg (other than telangiectasia)	Yes
Procedure - Vascular	36473	Endovenous ablation therapy of incompetent vein, extremity, inclusive of all imaging guidance and monitoring, percutaneous, mechanochemical; first vein treated	NO
Procedure - Vascular	36474	Endovenous ablation therapy of incompetent vein, extremity, inclusive of all imaging guidance and monitoring, percutaneous, mechanochemical; subsequent vein(s) treated in a single extremity, each through separate access sites	NO
Procedure - Vascular	36475	Endovenous ablation therapy of incompetent vein, extremity, inclusive of all imaging guidance and monitoring, percutaneous, radiofrequency; first vein treated	Yes
Procedure - Vascular	36476	Endovenous ablation therapy of incompetent vein, extremity, inclusive of all imaging guidance and monitoring, percutaneous, radiofrequency; second and subsequent veins treated in a single extremity, each through separate access sites	Yes

Procedure - Vascular	36478	Endovenous ablation therapy of incompetent vein, extremity, inclusive of all imaging guidance and monitoring, percutaneous, laser; first vein treated	Yes
Procedure - Vascular	36479	Endovenous ablation therapy of incompetent vein, extremity, inclusive of all imaging guidance and monitoring, percutaneous, laser; second and subsequent veins treated in a single extremity, each through separate access sites	Yes
Procedure - Vascular	36482	Endovenous ablation therapy of incompetent vein, extremity, by transcatheter delivery of a chemical adhesive (eg, cyanoacrylate) remote from the access site, inclusive of all	Yes
Procedure - Vascular	36483	Endovenous ablation therapy of incompetent vein, extremity, by transcatheter delivery of a chemical adhesive (eg, cyanoacrylate) remote from the access site, inclusive of all imaging guidance and monitoring, percutaneous; first vein treated	Yes
Transplant	36522	PHOTOPHERESIS	YES
Implantable Infusion Pumps	36563	Insertion of tunneled centrally inserted central venous access device with subcutaneous pump	YES
Implantable Infusion Pumps	36583	Replacement, complete, of a tunneled centrally inserted central venous access device, with subcutaneous pump, through same venous access	YES
Procedure - Misc.	36836	PERQ AV FISTULA CREATION UXTR SINGLE ACCESS	NO
Procedure - Misc.	36837	PERQ AV FISTULA CREATION UXTR SEP ACCESS SITES	NO
Radiation	37201	Thoracic target(s) delineation for stereotactic body radiation therapy (SRS/SBRT), (photon or particle beam), entire course of treatment	YES
Procedure - Cardiac	37215	Transcatheter placement of intravascular stent(s), cervical carotid artery, percutaneous; with distal embolic protection	NO
Procedure - Cardiac	37216	Transcatheter placement of intravascular stent(s), cervical carotid artery, percutaneous; without distal embolic protection	NO
Procedure - Misc.	37217	TCATH STENT PLACEMT RETROGRAD CAROTID/INNOMINATE	NO
Procedure - Cardiac	37220	Revascularization, endovascular, open or percutaneous, iliac artery, unilateral, initial vessel; with transluminal angioplasty	NO
Procedure - Cardiac	37221	Revascularization, endovascular, open or percutaneous, iliac artery, unilateral, initial vessel; with transluminal stent placement(s), includes angioplasty within the same vessel, when performed	NO
Procedure - Cardiac	37222	Revascularization, endovascular, open or percutaneous, iliac artery, each additional ipsilateral iliac vessel; with transluminal angioplasty	NO
Procedure - Cardiac	37223	Revascularization, endovascular, open or percutaneous, iliac artery, each additional ipsilateral iliac vessel; with transluminal stent placement(s), includes angioplasty within the same vessel, when performed	NO
Procedure - Cardiac	37224	Revascularization, endovascular, open or percutaneous, femoral, popliteal artery(s), unilateral; with transluminal angioplasty	YES
Procedure - Cardiac	37225	Revascularization, endovascular, open or percutaneous, femoral, popliteal artery(s), unilateral; with atherectomy, includes angioplasty within the same vessel, when performed	YES
Procedure - Cardiac	37226	Revascularization, endovascular, open or percutaneous, femoral, popliteal artery(s), unilateral; with transluminal stent placement(s), includes angioplasty within the same vessel, when performed	YES

Procedure - Cardiac	37227	Revascularization, endovascular, open or percutaneous, femoral, popliteal artery(s), unilateral; with transluminal stent placement(s) and atherectomy, includes angioplasty within the same vessel, when performed	YES
Procedure - Cardiac	37228	Revascularization, endovascular, open or percutaneous, tibial, peroneal artery, unilateral, initial vessel; with transluminal angioplasty	YES
Procedure - Cardiac	37229	Revascularization, endovascular, open or percutaneous, tibial, peroneal artery, unilateral, initial vessel; with atherectomy, includes angioplasty within the same vessel, when performed	YES
Procedure - Cardiac	37230	Revascularization, endovascular, open or percutaneous, tibial, peroneal artery, unilateral, initial vessel; with transluminal stent placement(s), includes angioplasty within the same vessel, when performed	YES
Procedure - Cardiac	37231	Revascularization, endovascular, open or percutaneous, tibial, peroneal artery, unilateral, initial vessel; with transluminal stent placement(s) and atherectomy, includes angioplasty within the same vessel, when performed	YES
Procedure - Cardiac	37232	Revascularization, endovascular, open or percutaneous, tibial/peroneal artery, unilateral, each additional vessel; with transluminal angioplasty	YES
Procedure - Cardiac	37233	Revascularization, endovascular, open or percutaneous, tibial/peroneal artery, unilateral, each additional vessel; with atherectomy, includes angioplasty within the same vessel, when performed (List separately in addition to code for primary procedure)	YES
Procedure - Cardiac	37234	Revascularization, endovascular, open or percutaneous, tibial/peroneal artery, unilateral, each additional vessel; with transluminal stent placement(s), includes angioplasty within the same vessel, when performed (List separately in addition to code for primary procedure)	YES
Procedure - Cardiac	37235	Revascularization, endovascular, open or percutaneous, tibial/peroneal artery, unilateral, each additional vessel; with transluminal stent placement(s) and atherectomy, includes angioplasty within the same vessel, when performed	YES
Procedure - Cardiac	37238	Transcatheter placement of an intravascular stent(s), open or percutaneous, including radiological supervision and interpretation and including angioplasty within the same vessel, when performed; initial vein	YES
Procedure - Cardiac	37239	Transcatheter placement of an intravascular stent(s), open or percutaneous, including radiological supervision and interpretation and including angioplasty within the same vessel, when performed; each additional vein	YES
Procedure - Cardiac	37241	Vascular embolization or occlusion, inclusive of all radiological supervision and interpretation, intraprocedural roadmapping, and imaging guidance necessary to complete the intervention; venous, other than hemorrhage (eg, congenital or acquired venous malformations, venous and capillary hemangiomas, varices, varicoceles) [when specified as coil embolization for varicose vein diagnoses] or [as a treatment for pelvic congestion syndrome (PCS), and percutaneous testicular vein embolization for varicocele]	YES
Bariatric Surgery	37242	Vascular embolization or occlusion, inclusive of all radiological supervision and interpretation, intraprocedural roadmapping, and imaging guidance necessary to complete the intervention; arterial, other than hemorrhage or tumor (eg, congenital or acquired arterial malformations, arteriovenous malformations, arteriovenous fistulas, aneurysms, pseudoaneurysms) [when specified as bariatric arterial embolization]	YES

Investigational Potential	37243	Vascular embolization or occlusion, inclusive of all radiological supervision and interpretation, intraprocedural roadmapping, and imaging guidance necessary to complete the intervention; for tumors, organ ischemia, or infarction	YES
Surgical - Pelvic	37244	Vascular embolization or occlusion, inclusive of all radiological supervision and interpretation, intraprocedural roadmapping, and imaging guidance necessary to complete the intervention; for arterial or venous hemorrhage or lymphatic extravasation [when specified as embolization of uterine artery]	NO
Procedure - Cardiac	37246	Transluminal balloon angioplasty (except lower extremity artery(ies) for occlusive disease, intracranial, coronary, pulmonary, or dialysis circuit), open or percutaneous, including all imaging and radiological supervision and interpretation necessary to perform the angioplasty within the same artery; initial artery [when specified as angioplasty of cervical carotid artery]	YES
Procedure - Cardiac	37247	TRLML BALO ANGIOP OPEN/PERQ IMG S&I EA ADDL ART	NO
Procedure - Cardiac	37248	Transluminal balloon angioplasty (except dialysis circuit), open or percutaneous, including all imaging and radiological supervision and interpretation necessary to perform the angioplasty within the same vein; initial vein	YES
Procedure - Cardiac	37249	Transluminal balloon angioplasty (except dialysis circuit), open or percutaneous, including all imaging and radiological supervision and interpretation necessary to perform the angioplasty within the same vein; each additional vein	YES
Procedure - Cardiac	37501	UNLISTED VASCULAR ENDOSCOPY PROC	YES
Procedure - Vascular	37700	LIGATN LONG SAPHENOUS VEIN AT SEPH-FEM JUNC	YES
Procedure - Vascular	37718	LIGATE/STRIP SHORT SAPEHNOUS VEIN	YES
Procedure - Vascular	37722	LIGATE/STRIP LONG SAPH VEIN BELW SEP-FEM JUNC	YES
Procedure - Vascular	37735	REMOVAL OF LEG VEINS/ULCER	YES
Procedure - Vascular	37760	LIGATN PERFORATORS,SUBFASC,RADICAL,OPEN	YES
Procedure - Vascular	37761	LIGATN PERFORATORS,SUBFASC,OPEN, INCL U/S, 1 LEG	YES
Procedure - Vascular	37765	PHLEB VEINS - EXTREM - TO 20	YES
Procedure - Vascular	37766	PHLEB VEINS - EXTREM 20+	YES
Procedure - Vascular	37780	LIGATN SHORT SAPHEN	YES
Procedure - Vascular	37785	REVISE SECONDARY VARICOSITY	YES
Procedure - Cardiac	37799	Unlisted procedure, vascular surgery [when specified as echosclerotherapy or ultrasound-guided sclerotherapy of other than truncal veins] or [when specified as COMPASS protocol, endoluminal cryoablation, or coil embolization of varicose veins]	YES
Transplant	38129	LAP PROC,SPLEEN,UNLISTED	YES
Transplant	38204	Management of recipient hematopoietic progenitor cell donor search and cell acquisition	NO
Transplant	38205	Blood-derived hematopoietic progenitor cell harvesting for transplantation, per collection; allogeneic	YES
Transplant	38206	Blood-derived hematopoietic progenitor cell harvesting for transplantation, per collection; autologous	YES
Transplant	38207	Transplant preparation of hematopoietic progenitor cells; cryopreservation and storage	YES
Transplant	38208	Transplant preparation of hematopoietic progenitor cells; thawing of previously frozen harvest, without washing, per donor	YES
Transplant	38209	Transplant preparation of hematopoietic progenitor cells; thawing of previously frozen harvest, with washing, per donor	YES

Transplant	38210	Transplant preparation of hematopoietic progenitor cells	YES
Transplant	38211	Transplant preparation of hematopoietic progenitor cells	YES
Transplant	38212	Transplant preparation of hematopoietic progenitor cells	YES
Transplant	38213	Transplant preparation of hematopoietic progenitor cells	YES
Transplant	38214	Transplant preparation of hematopoietic progenitor cells	YES
Transplant	38215	Transplant preparation of hematopoietic progenitor cells	YES
Transplant	38230	Bone marrow harvesting for transplantation; allogeneic	YES
Transplant	38232	Bone marrow harvesting for transplantation; autologous	YES
Transplant	38240	Bone marrow or blood-derived peripheral stem cell transplantation; allogeneic transplantation per donor	YES
Transplant	38241	Hematopoietic progenitor cell (HPC); autologous transplantation	YES
Transplant	38242	Allogeneic lymphocyte infusions	YES
Transplant	38243	Hematopoietic progenitor cell (HPC); HPC boost	YES
Transplant	38589	LAP,LYMPHATIC SYSTEM,OTHER PROC	YES
Transplant	38999	Unlisted procedure, hemic or lymphatic system [when specified as bone marrow cell therapy or stem cell therapy such as IM, IV or IA for peripheral vascular disease]	YES
Surgical - Misc.	39499	Unlisted procedure, mediastinum	NO
Surgical - Misc.	39599	DIAPHRAGM SURG PROC UNLISTED	YES
Surgical - Misc.	40799	LIP SURGERY PROC UNLISTED	YES
Surgical - Misc.	40899	MOUTH SURGERY PROC UNLISTED	YES
Radiation	41019	Placement of needles, catheters, or other device(s) into the head and/or neck region (percutaneous, transoral, or transnasal) for subsequent interstitial radioelement application	YES
Surgical - ENT	41512	Tongue base suspension, permanent suture technique	YES
Surgical - ENT	41530	Submucosal ablation of the tongue base, radiofrequency, 1 or more sites, per session	YES
Surgical - ENT	41599	TONGUE AND MOUTH SURG UNLISTED	YES
Surgical - ENT	41899	DENTAL SURGERY PROCEDURE	YES
Surgical - ENT	42140	EXCISION OF UVULA	YES
Surgical - ENT	42145	Palatopharyngoplasty (eg, uvulopalatopharyngoplasty, uvulopharyngoplasty)	YES
Surgical - ENT	42160	DESTRUC LESN PALATE/UVULA	YES
Surgical - ENT	42225	RECONSTRUCT CLEFT PALATE	YES
Surgical - ENT	42299	Unlisted procedure, palate, uvula [when specified as any of the following: Cautery-assisted palatal stiffening (CAPSO); Coblation; Palatal implants; Injection snoreplasty; The Pillar™ system] or [when specified as transpalatal advancement pharyngoplasty (TAP)]	YES
Surgical - ENT	42699	SALIVARY SURG UNLISTED PROC	YES
Surgical - GI	42892	REVISION OF PHARYNGEAL WALLS	YES
Surgical - GI	42894	REVISION OF PHARYNGEAL WALLS	YES
Surgical - GI	42999	THROAT SURGERY PROCEDURE UNLISTED	YES
Surgical - GI	43107	REMOVAL OF ESOPHAGUS	YES
Surgical - GI	43112	REMOVAL OF ESOPHAGUS	YES
Surgical - GI	43117	PARTIAL REMOVAL OF ESOPHAGUS	YES
Endoscopy	43192	Esophagoscopy, rigid, transoral; with directed submucosal injection(s), any substance [when specified as injection of bulking agent]	YES
Endoscopy	43201	Esophagoscopy, rigid or flexible; with directed submucosal injection(s), any substance [when specified as injection of bulking agent]	YES

Endoscopy	43210	Esophagogastroduodenoscopy, flexible, transoral; with esophagogastric fundoplasty, partial or complete, includes duodenoscopy when performed	YES
Endoscopy	43212	Esophagoscopy, flexible, transoral; with placement of endoscopic stent	NO
Surgical - GI	43214	ESOPHAGOSC DILATE BALLOON 30	YES
Endoscopy	43229	Esophagoscopy, flexible, transoral; with ablation of tumor(s), polyp(s), or other lesion(s) (includes pre- and post-dilation and guide wire passage, when performed)	YES
Endoscopy	43233	Esophagogastroduodenoscopy, flexible transoral; diagnostic, with dilation of esophagus with balloon (30 mm diameter or larger) (includes fluoroscopic guidance, when performed)	YES
Endoscopy	43235	Esophagogastroduodenoscopy, flexible transoral; diagnostic, including collection of specimen(s) by brushing or washing, when performed (separate procedure)	NO
Endoscopy	43236	Esophagogastroduodenoscopy, flexible transoral; with directed submucosal injection(s), any substance [other than injections related to gastroesophageal reflux or dysphagia]	NO
Endoscopy	43239	Esophagogastroduodenoscopy, flexible transoral; with biopsy, single or multiple	NO
Endoscopy	43241	Esophagogastroduodenoscopy, flexible transoral; with insertion of intraluminal tube or catheter	NO
Endoscopy	43243	Esophagogastroduodenoscopy, flexible transoral; with injection sclerosis of esophageal/gastric varices	NO
Endoscopy	43244	Esophagogastroduodenoscopy, flexible transoral; with band ligation of esophageal/gastric varices	NO
Endoscopy	43245	Esophagogastroduodenoscopy, flexible transoral; with dilation of gastric/duodenal stricture(s) (eg, balloon, bougie)	NO
Endoscopy	43246	Esophagogastroduodenoscopy, flexible transoral; with directed placement of percutaneous gastrostomy tube	NO
Endoscopy	43247	Esophagogastroduodenoscopy, flexible transoral; with removal of foreign body(s)	NO
Endoscopy	43248	Esophagogastroduodenoscopy, flexible transoral; with insertion of guide wire followed by passage of dilator(s) through esophagus over guide wire	NO
Endoscopy	43249	Esophagogastroduodenoscopy, flexible transoral; with transendoscopic balloon dilation of esophagus (less than 30 mm diameter)	NO
Endoscopy	43250	Esophagogastroduodenoscopy, flexible transoral; with removal of tumor(s), polyp(s), or other lesion(s) by hot biopsy forceps	NO
Endoscopy	43251	Esophagogastroduodenoscopy, flexible transoral; with removal of tumor(s), polyp(s), or other lesion(s) by snare technique	NO
Endoscopy	43252	Esophagogastroduodenoscopy, flexible, transoral; with optical endomicroscopy.	NO
Endoscopy	43253	EGD US GUIDED TRANSMURAL INJXN/FIDUCIAL MARKER	YES
Endoscopy	43254	Esophagogastroduodenoscopy, flexible transoral; with endoscopic mucosal resection	NO
Endoscopy	43255	Esophagogastroduodenoscopy, flexible transoral; with control of bleeding, any method	NO
Endoscopy	43257	Upper gastrointestinal endoscopy including esophagus, stomach, and either the duodenum and/or jejunum as appropriate; with delivery of thermal energy to the muscle of lower esophageal sphincter and/or gastric cardia, for treatment of gastroesophageal reflux disease	NO

Endoscopy	43266	Esophagogastroduodenoscopy, flexible transoral; with placement of endoscopic stent (includes pre- and post-dilation and guide wire passage, when performed)	NO
Endoscopy	43270	Esophagogastroduodenoscopy, flexible transoral; with ablation of tumor(s), polyp(s), or other lesion(s) (includes pre-and post-dilation and guide wire passage, when performed) [other than ablation related to Barrett's esophagus]	NO
Surgical - GI	43276	ERCP STENT EXCHANGE W/DILATE	NO
Surgical - GI	43279	LAP, ESOPHAGOMYOTOMY W FUNDOPLASTY	YES
Surgical - GI	43282	LAP PARAESOPH HER RPR W/MESH	NO
Surgical - GI	43284	Laparoscopy, surgical, esophageal sphincter augmentation procedure, placement of sphincter augmentation device (ie, magnetic band), including cruroplasty when performed	NO
Surgical - GI	43285	Removal of esophageal sphincter augmentation device	NO
Surgical - GI	43286	ESPHG TOT W/LAPS MOBLJ	NO
Surgical - GI	43287	ESPHG DSTL 2/3 W/LAPS MOBLJ	NO
Surgical - GI	43289	LAP,ESOPHAGUS,OTHER PROC	YES
Bariatric Surgery	43290	Esophagogastroduodenoscopy, flexible, transoral; with deployment of intragastric bariatric balloon	NO
Bariatric Surgery	43291	Esophagogastroduodenoscopy, flexible, transoral; with removal of intragastric bariatric balloon(s)	YES
Surgical - GI	43314	TRACHEO-ESOPHAGOPLASTY CONG	NO
Surgical - GI	43497	Lower esophageal myotomy, transoral (ie, peroral endoscopic myotomy [POEM])	NO
Endoscopy	43499	Unlisted procedure, esophagus [when specified as endoscopic gastroplasty, endoluminal plication or transesophageal injection therapy for treatment of GERD]	YES
Bariatric Surgery	43620	Gastrectomy, total; with esophagoenterostomy	YES
Surgical - GI	43621	REMOVAL OF STOMACH	YES
Bariatric Surgery	43622	Gastrectomy, total; with formation of intestinal pouch, any type	YES
Bariatric Surgery	43631	Gastrectomy, partial, distal; with gastroduodenostomy	YES
Bariatric Surgery	43632	Gastrectomy, partial, distal; with gastrojejunostomy (Billroth II) [when specified as bariatric surgery]	YES
Bariatric Surgery	43633	Gastrectomy, partial, distal; with Roux-en-Y reconstruction [when specified as bariatric surgery]	YES
Surgical - GI	43634	REMOVAL OF STOMACH, PARTIAL	YES
Bariatric Surgery	43644	Laparoscopy, surgical, gastric restrictive procedure; with gastric bypass and Roux-en-Y gastroenterostomy (roux limb 150 cm or less)	YES
Bariatric Surgery	43645	Laparoscopy, surgical, gastric restrictive procedure; with gastric bypass and small intestine reconstruction to limit absorption	YES
Bariatric Surgery	43647	LAP IMPLANT/ REPLACE GASTRIC NEUROSTIM ANTRUM	NO
Bariatric Surgery	43648	LAP REVISE/REMOVE GASTRIC NEUROSTIM ANTRUM	NO
Bariatric Surgery	43659	Unlisted laparoscopy procedure, stomach [when specified as gastric plication (laparoscopic greater curvature plication [LGCP]) with or without gastric banding, sleeve gastroplasty, or mini-gastric bypass procedure]	YES

Bariatric Surgery	43770	Laparoscopy, surgical, gastric restrictive procedure; placement of adjustable gastric restrictive device (eg, gastric band and subcutaneous port components)	YES
Bariatric Surgery	43771	Laparoscopy, surgical, gastric restrictive procedure; revision of adjustable gastric restrictive device component only	YES
Bariatric Surgery	43772	Laparoscopy, surgical, gastric restrictive procedure; removal of adjustable gastric restrictive device component only	YES
Bariatric Surgery	43773	Laparoscopy, surgical, gastric restrictive procedure; removal and replacement of adjustable gastric restrictive device component only	YES
Bariatric Surgery	43774	Laparoscopy, surgical, gastric restrictive procedure; removal of adjustable gastric restrictive device and subcutaneous port components	YES
Bariatric Surgery	43775	Laparoscopy, surgical, gastric restrictive procedure; longitudinal gastrectomy (ie, sleeve gastrectomy)	YES
Bariatric Surgery	43842	Gastric restrictive procedure, without gastric bypass, for morbid obesity; vertical-banded gastroplasty	YES
Bariatric Surgery	43843	Gastric restrictive procedure, without gastric bypass, for morbid obesity; other than vertical-banded gastroplasty	YES
Bariatric Surgery	43845	Gastric restrictive procedure with partial gastrectomy, pylorus-preserving duodenoileostomy and ileoileostomy (50 to 100 cm common channel) to limit absorption (biliopancreatic diversion with duodenal switch)	YES
Bariatric Surgery	43846	Gastric restrictive procedure, with gastric bypass for morbid obesity; with short limb (150 cm or less) Roux-en-Y gastroenterostomy	YES
Bariatric Surgery	43847	Gastric restrictive procedure, with gastric bypass for morbid obesity; with small intestine reconstruction to limit absorption	YES
Bariatric Surgery	43848	Revision, open, of gastric restrictive procedure for morbid obesity, other than adjustable gastric restrictive device (separate procedure)	YES
Bariatric Surgery	43860	REVISE,GASTROJEJUN ANAST,W/O VAGOTOMY	YES
Bariatric Surgery	43865	REVISE GASTROJEJUN ANAST,W VAGOTOMY	YES
Bariatric Surgery	43881	Implantation or replacement of gastric neurostimulator electrodes	NO
Bariatric Surgery	43882	Revision or removal of gastric neurostimulator electrodes	NO
Bariatric Surgery	43886	Gastric restrictive procedure, open; revision of subcutaneous port component only	YES
Bariatric Surgery	43887	Gastric restrictive procedure, open; removal of subcutaneous port component only	YES
Bariatric Surgery	43888	Gastric restrictive procedure, open; removal and replacement of subcutaneous port component only	YES
Bariatric Surgery	43999	Unlisted procedure, stomach [when specified as transendoscopic (peroral) gastric myotomy G- POEM] or [when specified as bariatric arterial embolization, endoluminal gastric restrictive surgery, placement of intragastric balloon device, or aspiration therapy]	YES
Surgical - GI	44127	ENTERECTOMY W/TAPER, CONG	YES
Transplant	44132	Donor enterectomy (including cold preservation), open; from cadaver donor	NO
Transplant	44133	Donor enterectomy (including cold preservation), open; partial, from living donor	NO
Transplant	44135	Intestinal allotransplantation; from cadaver donor	YES
Transplant	44136	Intestinal allotransplantation; from living donor	YES
Surgical - GI	44147	PARTIAL REMOVAL OF COLON	YES
Surgical - GI	44155	REMOVAL OF COLON/ILEOSTOMY	YES

Surgical - GI	44208	L COLECTOMY/COLOPROCTOSTOMY	YES
Surgical - GI	44211	LAP COLECTOMY W/PROCTECTOMY	YES
Bariatric Surgery	44238	Unlisted laparoscopy procedure, intestine (except rectum)	YES
Surgical - GI	44369	SMALL BOWEL ENDOSCOPY	NO
Surgical - GI	44705	PREPARE FECAL MICROBIOTA FOR INSTILLATION	NO
Transplant	44715	Backbench standard preparation of cadaver or living donor intestine allograft prior to transplantation, including mobilization and fashioning of the superior mesenteric artery and vein	NO
Transplant	44720	Backbench reconstruction of cadaver or living donor intestine allograft prior to transplantation; venous anastomosis, each	NO
Transplant	44721	Backbench reconstruction of cadaver or living donor intestine allograft prior to transplantation; arterial anastomosis, each	NO
Surgical - GI	44799	INTESTINE SURG PROCEDURE UNLISTED	YES
Surgical - GI	44899	UNLISTED PROC,MECKEL/MESENTERY	YES
Surgical - GI	44979	LAP,APPENDIX UNLISTED PROCED	YES
Surgical - GI	45110	REMOVAL OF RECTUM	NO
Surgical - GI	45113	PARTIAL PROCTECTOMY	NO
Surgical - GI	45114	PARTIAL REMOVAL OF RECTUM	NO
Surgical - GI	45120	REMOVAL OF RECTUM	NO
Surgical - GI	45121	REMOVAL OF RECTUM AND COLON	NO
Surgical - GI	45347	SIGMOIDOSCOPY W/PLCMT STENT	NO
Surgical - GI	45395	LAP, REMOVAL OF RECTUM	NO
Surgical - GI	45397	LAP, REMOVE RECTUM W/POUCH	NO
Surgical - GI	45399	UNLISTED PROCEDURE COLON	YES
Surgical - GI	45499	UNLISTED LAP PROCEDURE, RECTUM	YES
Surgical - Pelvic	45560	Repair of rectocele	NO
Surgical - GI	45999	RECTUM SURGERY PROCEDURE UNLISTED	YES
Investigational Potential	46601	Anoscopy; diagnostic, with high-resolution magnification (HRA) (eg, colposcope, operating microscope) and chemical agent enhancement, including collection of specimen(s) by brushing or washing, when performed	YES
Investigational Potential	46607	Anoscopy; with high-resolution magnification (HRA) (eg, colposcope, operating microscope) and chemical agent enhancement, with biopsy, single or multiple	YES
Bioengineered Wound Healing	46707	Repair of anorectal fistula with plug (eg, porcine small intestine submucosa [SIS])	NO
Surgical - GI	46730	CONSTRUCTION OF ABSENT ANUS	YES
Surgical - GI	46740	CONSTRUCTION OF ABSENT ANUS	YES
Surgical - GI	46930	DESTRUCT INTERNAL HEMORRHOID, THERMAL	NO
Surgical - GI	46940	TREATMENT OF ANAL FISSURE	NO
Investigational Potential	46948	Hemorrhoidectomy, internal, by transanal hemorrhoidal dearterialization, 2 or more hemorrhoid columns/groups, including ultrasound guidance, with mucopexy, when performed	YES
Cosmetic Potential	46999	Unlisted procedure, anus [when specified as perianal injection of autologous adipose-derived regenerative cells, e.g., for fistulizing Crohn's disease]	YES
Procedure - Oncology	47120	Hepatectomy, resection of liver; partial lobectomy	NO
Procedure - Oncology	47122	Hepatectomy, resection of liver; trisegmentectomy	NO
Procedure - Oncology	47125	Hepatectomy, resection of liver; total left lobectomy	NO
Procedure - Oncology	47130	Hepatectomy, resection of liver; total right lobectomy	NO

Transplant	47133	Donor hepatectomy, (including cold preservation), from cadaver donor	YES
Transplant	47135	Liver allotransplantation; orthotopic, partial or whole, from cadaver or living donor, any age	YES
Transplant	47140	Donor hepatectomy (including cold preservation), from living donor; left lateral segment only (segments II and III)	NO
Transplant	47141	Donor hepatectomy (including cold preservation), from living donor; total left lobectomy (segments II, III, IV)	NO
Transplant	47142	Donor hepatectomy (including cold preservation), from living donor; total right lobectomy (segments V, VI, VII and VIII)	NO
Transplant	47143	Backbench standard preparation of cadaver donor whole liver graft prior to allotransplantation, including cholecystectomy, if necessary, and dissection and removal of surrounding soft tissues to prepare the vena cava, portal vein, hepatic artery, and common bile duct for implantation; without trisegment or lobe split	NO
Transplant	47144	Backbench standard preparation of cadaver donor whole liver graft prior to allotransplantation, including cholecystectomy, if necessary, and dissection and removal of surrounding soft tissues to prepare the vena cava, portal vein, hepatic artery, and common bile duct for implantation; with trisegment split of whole liver graft into 2 partial liver grafts (ie, left lateral segment [segments II and III] and right trisegment [segments I and IV through VIII])	NO
Transplant	47145	Backbench standard preparation of cadaver donor whole liver graft prior to allotransplantation, including cholecystectomy, if necessary, and dissection and removal of surrounding soft tissues to prepare the vena cava, portal vein, hepatic artery, and common bile duct for implantation; with lobe split of whole liver graft into 2 partial liver grafts (ie, left lobe [segments II, III, and IV] and right lobe [segments I and V through VIII])	NO
Transplant	47146	Backbench reconstruction of cadaver or living donor liver graft prior to allotransplantation; venous anastomosis, each	NO
Transplant	47147	Backbench reconstruction of cadaver or living donor liver graft prior to allotransplantation; arterial anastomosis, each	NO
Procedure - Oncology	47370	Laparoscopy, surgical, ablation of 1 or more liver tumor(s); radiofrequency	NO
Procedure - Oncology	47371	Laparoscopy, surgical, ablation of 1 or more liver tumor(s); cryosurgical	NO
Surgical - GI	47379	UNLISTED LAPAROSCOPIC PROC, LIVER	YES
Procedure - Oncology	47380	Ablation, open, of 1 or more liver tumor(s); radiofrequency	NO
Investigational Potential	47381	Ablation, open, of 1 or more liver tumor(s); cryosurgical	NO
Procedure - Oncology	47382	Ablation, 1 or more liver tumor(s), percutaneous, radiofrequency	NO
Investigational Potential	47383	Ablation, 1 or more liver tumor(s), percutaneous, cryoablation	NO
Procedure - Oncology	47399	Unlisted procedure, liver	YES
Surgical - GI	47538	PERQ PLMT BILE DUCT STENT	NO
Surgical - GI	47540	PERQ PLMT BILE DUCT STENT	NO
Surgical - GI	47579	LAPAROSCOPE PROC, BILIARY	NO

Surgical - GI	47785	FUSE BILE DUCTS AND BOWEL	NO
Surgical - GI	47999	BILE TRACT SURG PROC, UNLISTED	YES
Surgical - GI	48105	RESECT/DEBRIDE PANCREAS	NO
Surgical - GI	48150	PARTIAL REMOVAL OF PANCREAS	YES
Surgical - GI	48153	PANCREATECTOMY	YES
Transplant	48160	Pancreatectomy, total or subtotal, with autologous transplantation of pancreas or pancreatic islet cells	YES
Surgical - GI	48548	FUSE PANCREAS AND BOWEL	YES
Transplant	48550	Donor pancreatectomy (including cold preservation), with or without duodenal segment for transplantation	NO
Transplant	48551	Backbench standard preparation of cadaver donor pancreas allograft	NO
Transplant	48552	Backbench reconstruction of cadaver donor pancreas allograft prior to transplantation, venous anastomosis, each	NO
Transplant	48554	Transplantation of pancreatic allograft	YES
Transplant	48556	Removal of transplanted pancreatic allograft	YES
Transplant	48999	Unlisted procedure, pancreas [when specified as cryosurgical or radiofrequency ablation of pancreas tumor(s)]	YES
Surgical - Neuro	49215	EXCISE SACRAL SPINE TUMOR	NO
Surgical - GI	49329	LAP,ABD/PERIT/OMENTUM,UNLIST	YES
Radiation	49411	Placement of interstitial device(s) for radiation therapy guidance (eg, fiducial markers, dosimeter), percutaneous, intra-abdominal, intra-pelvic (except prostate), and/or retroperitoneum, single or multiple	YES
Radiation	49412	Placement of interstitial device(s) for radiation therapy guidance (eg, fiducial markers, dosimeter), open, intra-abdominal, intrapelvic, and/or retroperitoneum, including image guidance, if performed, single or multiple (List separately in addition to code for primary procedure)	YES
Surgical - GI	49659	LAP,HERNIA REPAIR PROC,UNLIST	YES
Investigational Potential	49906	Free omental flap with microvascular anastomosis [when specified as a lymph node tissue transfer procedure]	YES
Surgical - GI	49999	ABDOMEN SURGERY PROC UNLISTED	YES
Procedure - Oncology	50250	Ablation, open, 1 or more renal mass lesion(s), cryosurgical, including intraoperative ultrasound, if performed	NO
Transplant	50300	Donor nephrectomy (including cold preservation); from cadaver donor, unilateral or bilateral	NO
Transplant	50320	Donor nephrectomy (including cold preservation); open, from living donor	NO
Transplant	50323	Backbench standard preparation of cadaver donor renal allograft prior to transplantation, including dissection and removal of perinephric fat, diaphragmatic and retroperitoneal attachments, excision of adrenal gland, and preparation of ureter(s), renal vein(s), and renal artery(s), ligating branches, as necessary	YES
Transplant	50325	Backbench standard preparation of living donor renal allograft (open or laparoscopic) prior to transplantation, including dissection and removal of perinephric fat and preparation of ureter(s), renal vein(s), and renal artery(s), ligating branches, as necessary	YES
Transplant	50327	Backbench reconstruction of cadaver or living donor renal allograft prior to transplantation; venous anastomosis, each	YES

Transplant	50328	Backbench reconstruction of cadaver or living donor renal allograft prior to transplantation; arterial anastomosis, each	YES
Transplant	50329	Backbench reconstruction of cadaver or living donor renal allograft prior to transplantation; ureteral anastomosis, each	YES
Transplant	50340	Recipient nephrectomy (separate procedure)	YES
Transplant	50360	Renal allotransplantation, implantation of graft; without recipient nephrectomy	YES
Transplant	50365	Renal allotransplantation, implantation of graft; with recipient nephrectomy	YES
Surgical - Genitourinary	50380	REIMPLANTATION OF KIDNEY	YES
Procedure - Oncology	50542	Laparoscopy, surgical; ablation of renal mass lesion(s)	NO
Transplant	50547	Laparoscopy, surgical; donor nephrectomy (including cold preservation), from living donor	YES
Surgical - Misc.	50549	LAP,RENAL PROCEDURE,UNLISTED	NO
Surgical - Genitourinary	50590	FRAGMENTING OF KIDNEY STONE	NO
Procedure - Oncology	50592	Ablation, 1 or more renal tumor(s), percutaneous, unilateral, radiofrequency	NO
Procedure - Oncology	50593	Ablation, renal tumor(s), unilateral, percutaneous, cryotherapy	NO
Surgical - Genitourinary	50770	SPLICING OF URETERS	YES
Surgical - Genitourinary	50860	TRANSPLANT URETER TO SKIN	YES
Surgical - Genitourinary	50949	UNLISTED LAPAROSCOPY PROC, URETER	YES
Surgical - Genitourinary	51595	REMOVE BLADDER/REVISE TRACT	YES
Surgical - Genitourinary	51596	REMOVE BLADDER/CREATE POUCH	NO
Surgical - Genitourinary	51715	Endoscopic injection of implant material into the submucosal tissues of the urethra and/or bladder neck	NO
Surgical - Genitourinary	51999	LAP PROCEDURE, UNLISTED, BLADDER	YES
Surgical - Genitourinary	52441	CYSTO INSERTION TRANSPROSTATIC IMPLANT SINGLE	YES
Surgical - Genitourinary	52442	CYSTOURETHRO W/ADDL IMPLANT	NO
Cosmetic Potential	53410	Urethroplasty, 1-stage reconstruction of male anterior urethra	YES
Cosmetic Potential	53420	Urethroplasty, 2-stage reconstruction or repair of prostatic or membranous urethra; first stage	NO
Cosmetic Potential	53425	Urethroplasty, 2-stage reconstruction or repair of prostatic or membranous urethra; second stage	NO
Cosmetic Potential	53430	Urethroplasty, reconstruction of female urethra	YES
Surgical - Genitourinary	53445	Insertion of inflatable urethral/bladder neck sphincter, including placement of pump, reservoir, and cuff	NO
Surgical - Genitourinary	53446	Removal of inflatable urethral/bladder neck sphincter, including pump, reservoir, and cuff	NO
Surgical - Genitourinary	53447	Removal and replacement of inflatable urethral/bladder neck sphincter including pump, reservoir, and cuff at the same operative session	NO
Surgical - Genitourinary	53448	Removal and replacement of inflatable urethral/bladder neck sphincter including pump, reservoir, and cuff through an infected field at the same operative session including irrigation and debridement of infected tissue	NO
Surgical - Genitourinary	53449	Repair of inflatable urethral/bladder neck sphincter including pump, reservoir, and cuff	NO
Surgical - Genitourinary	53451	Periurethral transperineal adjustable balloon continence device; bilateral insertion, including cystourethroscopy and imaging guidance [ProACT System]	NO

Surgical - Genitourinary	53452	Periurethral transperineal adjustable balloon continence device; unilateral insertion, including cystourethroscopy and imaging guidance [ProACT System]	NO
Surgical - Genitourinary	53453	Periurethral transperineal adjustable balloon continence device; removal, each balloon [ProACT System]	NO
Surgical - Genitourinary	53454	Periurethral transperineal adjustable balloon continence device; percutaneous adjustment of balloon(s) fluid volume [ProACT System]	NO
Procedure - Oncology	53850	Transurethral destruction of prostate tissue; by microwave thermotherapy	NO
Surgical - Genitourinary	53852	PROSTATIC RF THERMOTX	YES
Surgical - Genitourinary	53860	Transurethral radiofrequency micro-remodeling of the female bladder neck and proximal urethra for stress urinary incontinence	NO
Procedure - Oncology	53899	Unlisted procedure, urinary system [when specified as transurethral MRI directional ultrasound ablation of prostate tissue (TULSA)]	YES
Cosmetic Potential	54125	Amputation of penis; complete	YES
Surgical - Genitourinary	54352	RECONSTRUCT URETHRA/PENIS	YES
Cosmetic Potential	54360	Plastic operation on penis to correct angulation	NO
Cosmetic Potential	54400	Insertion of penile prosthesis; non-inflatable (semi- rigid)	YES
Cosmetic Potential	54401	Insertion of penile prosthesis; inflatable (self- contained)	YES
Cosmetic Potential	54405	Insertion of multi-component, inflatable penile prosthesis, including placement of pump, cylinders, and reservoir	YES
Cosmetic Potential	54440	Plastic operation of penis for injury	YES
Cosmetic Potential	54520	Orchiectomy, simple (including subcapsular), with or without testicular prosthesis, scrotal or inguinal approach	YES
Cosmetic Potential	54660	Insertion of testicular prosthesis (separate procedure)	YES
Cosmetic Potential	54690	Laparoscopy, surgical; orchiectomy	YES
Cosmetic Potential	54699	LAP,TESTIS PROCEDURE,UNLISTED	YES
Infertility	54900	FUSION OF SPERMATIC DUCTS	YES
Cosmetic Potential	55150	REMOVAL OF SCROTUM	YES
Cosmetic Potential	55175	REVISION OF SCROTUM,SIMPLE	YES
Cosmetic Potential	55180	Scrotoplasty; complicated	YES
Cosmetic Potential	55530	EXCISE VARICOCELE	YES
Cosmetic Potential	55535	EXCISE VARICOCELE,ABD APPROACH	YES
Cosmetic Potential	55550	LAP,LIGATION SPERMATIC VEINS	YES
Cosmetic Potential	55559	LAP,SPERMATIC CORD PROC,UNLIST	YES
Investigational Potential	55706	Biopsies, prostate, needle, transperineal, stereotactic template guided saturation sampling, including imaging guidance	YES
Surgical - Genitourinary	55845	EXTENSIVE PROSTATE SURGERY	YES
Radiation	55860	Exposure of prostate, any approach, for insertion of radioactive substance	YES
Radiation	55862	Exposure of prostate, any approach, for insertion of radioactive substance; with lymph node biopsy(s) (limited pelvic lymphadenectomy)	YES
Radiation	55865	Exposure of prostate, any approach, for insertion of radioactive substance; with bilateral pelvic lymphadenectomy, including external iliac, hypogastric and obturator nodes	YES
Procedure - Oncology	55873	Cryosurgical ablation of the prostate (includes ultrasonic guidance for interstitial cryosurgical probe placement)	NO
Procedure - Oncology	55874	Transperineal placement of biodegradable material, peri-prostatic, single or multiple injection(s), including image guidance, when performed	NO

Radiation	55875	Transperineal placement of needles or catheters into prostate for interstitial radioelement application, with or without cystoscopy	YES
Procedure - Oncology	55880	Ablation of malignant prostate tissue, transrectal, with high intensity-focused ultrasound (HIFU), including ultrasound guidance	NO
Cosmetic Potential	55899	Unlisted procedure, male genital system [when specified as metoidioplasty or phalloplasty with penile prosthesis] or [when specified as image-guided focused ultrasound ablation of prostate tissue for non-oncologic indications, such as benign prostatic hyperplasia] or [when specified as intracavernous injection of autologous adipose-derived regenerative cells, e.g., for erectile dysfunction] or [when specified as ESWT (for example for ED or Peyronie's disease)] or [when specified as transrectal ultrasound-guided saturation biopsy of the prostate]	YES
Radiation	55920	Placement of needles or catheters into pelvic organs and/or genitalia (except prostate) for subsequent interstitial radioelement application	YES
Cosmetic Potential	55970	SEX TRANSFORMATION, M TO F	YES
Cosmetic Potential	55980	SEX TRANSFORMATION, F TO M	YES
Cosmetic Potential	56625	Vulvectomy simple; complete	YES
Cosmetic Potential	56800	Plastic repair of introitus	YES
Cosmetic Potential	56805	Clitoroplasty for intersex state	YES
Cosmetic Potential	56810	Perineoplasty, repair of perineum, nonobstetrical (separate procedure)	YES
Cosmetic Potential	57110	Vaginectomy, complete removal of vaginal wall	YES
Radiation	57155	Insertion of uterine tandem and/or vaginal ovoids for clinical brachytherapy	YES
Radiation	57156	Insertion of a vaginal radiation afterloading apparatus for clinical brachytherapy	YES
Surgical - Pelvic	57240	Anterior colporrhaphy, repair of cystocele with or without repair of urethrocele, including cystourethroscopy	NO
Surgical - Genitourinary	57250	Posterior colporrhaphy, repair of rectocele with or without perineorrhaphy	NO
Surgical - Pelvic	57260	Combined anteroposterior colporrhaphy, including cystourethroscopy	NO
Surgical - Pelvic	57265	Combined anteroposterior colporrhaphy, including cystourethroscopy, when performed; with enterocele repair	NO
Surgical - Pelvic	57268	Repair of enterocele, vaginal approach (separate procedure)	NO
Surgical - Pelvic	57270	Repair of enterocele, abdominal approach	NO
Surgical - Pelvic	57280	Colpopexy, abdominal approach	NO
Surgical - Genitourinary	57282	Colpopexy, vaginal; extra-peritoneal approach (sacrospinous, iliooccygeus)	NO
Surgical - Pelvic	57283	Colpopexy, vaginal; intra-peritoneal approach (uterosacral, levator myorrhaphy)	NO
Surgical - Pelvic	57284	Paravaginal defect repair (including repair of cystocele, if performed); open abdominal approach	NO
Surgical - Pelvic	57285	Paravaginal defect repair (including repair of cystocele, if performed); vaginal approach	NO
Cosmetic Potential	57291	Construction of artificial vagina; without graft	YES
Cosmetic Potential	57292	Construction of artificial vagina; with graft	YES
Cosmetic Potential	57295	Revision (including removal) of prosthetic vaginal graft; vaginal approach	YES
Cosmetic Potential	57296	Revision (including removal) of prosthetic vaginal graft; open abdominal approach	YES
Cosmetic Potential	57335	Vaginoplasty for intersex state	YES

Surgical – Pelvic	57423	Paravaginal defect repair (including repair of cystocele, if performed), laparoscopic approach	NO
Surgical – Pelvic	57425	Laparoscopy, surgical, colpopexy (suspension of vaginal apex)	NO
Cosmetic Potential	57426	Revision (including removal) of prosthetic vaginal graft, laparoscopic approach	YES
Surgical – Pelvic	57531	REMOVAL OF CERVIX, RADICAL	NO
Surgical – Pelvic	58140	Myomectomy, excision of fibroid tumor(s) of uterus, 1 to 4 intramural myoma(s) with total weight of 250 g or less and/or removal of surface myomas; abdominal approach	NO
Surgical – Pelvic	58145	Myomectomy, excision of fibroid tumor(s) of uterus, 1 to 4 intramural myoma(s) with total weight of 250 g or less and/or removal of surface myomas; vaginal approach	NO
Surgical – Pelvic	58146	Myomectomy, excision of fibroid tumor(s) of uterus, 5 or more intramural myomas and/or intramural myomas with total weight greater than 250 g, abdominal approach	NO
Cosmetic Potential	58150	Total abdominal hysterectomy (corpus and cervix), with or without removal of tube(s), with or without removal of ovary(s)	YES
Surgical – Pelvic	58152	Total abdominal hysterectomy (corpus and cervix), with or without removal of tube(s), with or without removal of ovary(s); with colpo-urethrocystopexy (eg, Marshall-Marchetti-Krantz, Burch)	NO
Surgical – Pelvic	58180	Supracervical abdominal hysterectomy (subtotal hysterectomy), with or without removal of tube(s), with or without removal of ovary(s)	NO
Surgical – Pelvic	58200	Total abdominal hysterectomy, including partial vaginectomy, with para-aortic and pelvic lymph node sampling, with or without removal of tube(s), with or without removal of ovary(s)	NO
Surgical – Pelvic	58210	Radical abdominal hysterectomy, with bilateral total pelvic lymphadenectomy and para-aortic lymph node sampling (biopsy), with or without removal of tube(s), with or without removal of ovary(s)	NO
Surgical – Pelvic	58240	Pelvic exenteration for gynecologic malignancy, with total abdominal hysterectomy or cervicectomy, with or without removal of tube(s), with or without removal of ovary(s), with removal of bladder and ureteral transplantations, and/or abdominoperineal resection of rectum and colon and colostomy	NO
Surgical – Pelvic	58260	Vaginal hysterectomy, for uterus 250 g or less	NO
Surgical – Pelvic	58262	Vaginal hysterectomy, for uterus 250 g or less; with removal of tube(s), and/or ovary(s)	NO
Surgical – Pelvic	58263	Vaginal hysterectomy, for uterus 250 g or less; with removal of tube(s), and/or ovary(s), with repair of enterocele	NO
Surgical – Pelvic	58267	Vaginal hysterectomy, for uterus 250 g or less; with colpo-urethrocystopexy (Marshall-Marchetti-Krantz type, Pereyra type) with or without endoscopic control	NO
Surgical – Pelvic	58270	Vaginal hysterectomy, for uterus 250 g or less; with repair of enterocele	NO
Surgical – Pelvic	58275	Vaginal hysterectomy, with total or partial vaginectomy	NO
Surgical – Pelvic	58280	Vaginal hysterectomy, with total or partial vaginectomy; with repair of enterocele	NO
Surgical – Pelvic	58285	Vaginal hysterectomy, radical (Schauta type operation)	NO

Surgical – Pelvic	58290	Vaginal hysterectomy, for uterus greater than 250 g;	NO
Surgical – Pelvic	58291	Vaginal hysterectomy, for uterus greater than 250 g; with removal of tube(s) and/or ovary(s)	NO
Surgical – Pelvic	58292	Vaginal hysterectomy, for uterus greater than 250 g; with removal of tube(s) and/or ovary(s), with repair of enterocele	NO
Surgical – Pelvic	58293	Vaginal hysterectomy, for uterus greater than 250 g; with colpo-urethrocystopexy (Marshall-Marchetti- Krantz type, Pereyra type) with or without endoscopic control	NO
Surgical – Pelvic	58294	Vaginal hysterectomy, for uterus greater than 250 g; with repair of enterocele	NO
Infertility	58321	Artificial insemination; intra-cervical	YES
Infertility	58322	Artificial insemination; intra-uterine	YES
Infertility	58323	Sperm washing for artificial insemination	YES
Radiation	58346	Insertion of Heyman capsules for clinical brachytherapy	YES
Surgical – Pelvic	58350	REOPEN FALLOPIAN TUBE,CHROMOTUBATION	NO
Surgical – Pelvic	58540	REVISION OF UTERINE ANOMALY	NO
Surgical – Pelvic	58541	Laparoscopy, surgical, supracervical hysterectomy, for uterus 250 g or less	NO
Surgical – Pelvic	58542	Laparoscopy, surgical, supracervical hysterectomy, for uterus 250 g or less; with removal of tube(s) and/or ovary(s)	NO
Surgical – Pelvic	58543	Laparoscopy, surgical, supracervical hysterectomy, for uterus greater than 250 g	NO
Surgical – Pelvic	58544	Laparoscopy, surgical, supracervical hysterectomy, for uterus greater than 250 g; with removal of tube(s) and/or ovary(s)	NO
Surgical – Pelvic	58545	Laparoscopy, surgical, myomectomy, excision; 1 to 4 intramural myomas with total weight of 250 g or less and/or removal of surface myomas	NO
Surgical – Pelvic	58546	Laparoscopy, surgical, myomectomy, excision; 5 or more intramural myomas and/or intramural myomas with total weight greater than 250 g	NO
Surgical – Pelvic	58548	Laparoscopy, surgical, with radical hysterectomy, with bilateral total pelvic lymphadenectomy and para-aortic lymph node sampling (biopsy), with removal of tube(s) and ovary(s), if performed	NO
Surgical – Pelvic	58550	Laparoscopy, surgical, with vaginal hysterectomy, for uterus 250 g or less;	NO
Cosmetic Potential	58552	Laparoscopy, surgical, with vaginal hysterectomy, for uterus 250 g or less; with removal of tube(s) and/or ovary(s)	NO
Surgical – Pelvic	58553	Laparoscopy, surgical, with vaginal hysterectomy, for uterus greater than 250 g;	NO
Cosmetic Potential	58554	Laparoscopy, surgical, with vaginal hysterectomy, for uterus greater than 250 g; with removal of tube(s) and/or ovary(s)	NO
Surgical – Pelvic	58563	HYSTEROSCOPY,W/ENDOMETRIAL ABLATION	NO
Cosmetic Potential	58570	Laparoscopy, surgical, with total hysterectomy, for uterus 250 g or less;	YES
Cosmetic Potential	58571	Laparoscopy, surgical, with total hysterectomy, for uterus 250 g or less; with removal of tube(s) and/or ovary(s)	YES
Cosmetic Potential	58572	Laparoscopy, surgical, with total hysterectomy, for uterus greater than 250 g;	YES
Cosmetic Potential	58573	Laparoscopy, surgical, with total hysterectomy, for uterus greater than 250 g; with removal of tube(s) and/or ovary(s)	YES
Surgical – Pelvic	58575	Laparoscopy, surgical, total hysterectomy for resection of malignancy (tumor debulking), with omentectomy including salpingo-oophorectomy, unilateral or bilateral, when performed	NO
Surgical – Pelvic	58578	Unlisted laparoscopy procedure, uterus [when specified as HALT procedure]	YES

Surgical – Pelvic	58579	HYSTEROSCOPY,UTERUS,UNL PROC	YES
Surgical – Pelvic	58580	Transcervical ablation of uterine fibroid(s), including intraoperative ultrasound guidance and monitoring, radiofrequency	NO
Surgical – Pelvic	58660	LAP,LYSIS OF ADHESIONS	NO
Surgical – Pelvic	58673	LAP,SALPINGOSTOMY	NO
Surgical – Pelvic	58674	Laparoscopy, surgical, ablation of uterine fibroid(s) including intraoperative ultrasound guidance and monitoring, radiofrequency	NO
Surgical – Pelvic	58679	LAP,OVIDUCT/OVARY,UNLIST PROC	YES
Surgical – Pelvic	58720	REMOVAL OF OVARY/TUBE(S)	NO
Surgical – Pelvic	58760	FIMBRIOPLASTY	YES
Surgical – Pelvic	58770	CREATE NEW TUBAL OPENING	YES
Surgical – Pelvic	58920	PARTIAL REMOVAL OF OVARY(S)	NO
Surgical – Pelvic	58940	Oophorectomy, partial or total, unilateral or bilateral;	NO
Surgical – Pelvic	58943	Oophorectomy, partial or total, unilateral or bilateral; for ovarian, tubal or primary peritoneal malignancy, with para-aortic and pelvic lymph node biopsies, peritoneal washings, peritoneal biopsies, diaphragmatic assessments, with or without salpingectomy(s), with or without omentectomy	NO
Cosmetic Potential	58951	Resection (initial) of ovarian, tubal or primary peritoneal malignancy with bilateral salpingo- oophorectomy and omentect	NO
Surgical – Pelvic	58952	RESECT OVARIAN MALIGNANCY	NO
Surgical – Pelvic	58953	Bilateral salpingo-oophorectomy with omentectomy, total abdominal hysterectomy and radical dissection for debulking	NO
Surgical – Pelvic	58954	Bilateral salpingo-oophorectomy with omentectomy, total abdominal hysterectomy and radical dissection for debulking; with pelvic lymphadenectomy and limited para-aortic lymphadenectomy	NO
Surgical – Pelvic	58956	Bilateral salpingo-oophorectomy with total omentectomy, total abdominal hysterectomy for malignancy	NO
Transplant	58999	Unlisted procedure, female genital system (nonobstetrical) [when specified as any vaginal rejuvenation or tightening procedure for atrophy, including laser procedures such as MonaLisa Touch] or [when specified as image-guided percutaneous ablation by laser, bipolar electrodes, interstitial thermotherapy, cryotherapy, radiofrequency] or [when specified as transplantation of uterus from a deceased or live donor, donor hysterectomy or other associated procedures]	YES
Surgical – Fetal	59076	Fetal shunt placement, including ultrasound guidance	NO
Surgical – Pelvic	59525	Subtotal or total hysterectomy after cesarean delivery (List separately in addition to code for primary procedure)	NO
Surgical – Pelvic	59840	INDUCED ABORTN BY D&C	YES
Surgical – Fetal	59897	Unlisted fetal invasive procedure, including ultrasound guidance, when performed [when describing a procedure meeting medically necessary criteria]	YES
Surgical – Fetal	59898	LAP,OB CARE/DELIV,UNLIST PROC	YES
Surgical – Fetal	59899	MATERNITY CARE PROCEDURE UNLISTED	YES
Surgical- Oncology	60659	LAP,ENDOCRINE SYSTEM,UNLISTED	YES
Surgical- Oncology	60699	Unlisted procedure, endocrine system [when specified as cryosurgical or radiofrequency ablation of thyroid or adrenal tumor(s)] or [when specified as image-guided focused ultrasound ablation for non- oncologic indications]	YES

Implantable Infusion Pumps	61215	Insertion of subcutaneous reservoir, pump or continuous infusion system for connection to ventricular catheter	YES
Surgical - Neuro	61305	OPEN SKULL FOR EXPLORATION	NO
Surgical - Neuro	61510	REMOVAL OF BRAIN LESION	NO
Surgical - Neuro	61512	REMOVE BRAIN LINING LESION	NO
Surgical - Neuro	61518	REMOVAL OF BRAIN LESION	NO
Surgical - Neuro	61519	REMOVE BRAIN LINING LESION	NO
Surgical - Neuro	61520	REMOVAL OF BRAIN LESION	NO
Surgical - Neuro	61521	REMOVAL OF BRAIN LESION	NO
Surgical - Neuro	61524	REMOVAL OF BRAIN LESION	NO
Surgical - Neuro	61526	REMOVAL OF BRAIN LESION	NO
Surgical - Neuro	61534	REMOVAL OF BRAIN LESION	NO
Surgical - Neuro	61536	REMOVAL OF BRAIN LESION	NO
Surgical - Neuro	61537	REMOVAL OF BRAIN TISSUE	NO
Surgical - Neuro	61538	REMOVAL OF BRAIN TISSUE	NO
Surgical - Neuro	61544	REMOVE & TREAT BRAIN LESION	NO
Surgical - Neuro	61559	EXCISION OF SKULL/SUTURES	NO
Surgical - Neuro	61563	EXCISION OF SKULL TUMOR	NO
Surgical - Neuro	61580	CRANIOFACIAL APPROACH, SKULL	NO
Surgical - Neuro	61581	CRANIOFACIAL APPROACH, SKULL	NO
Surgical - Neuro	61582	CRANIOFACIAL APPROACH, SKULL	NO
Surgical - Neuro	61583	CRANIOFACIAL APPROACH, SKULL	NO
Surgical - Neuro	61591	INFRA TEMPORAL APPROACH/SKULL	NO
Surgical - Neuro	61596	TRANSCOCHLEAR APPROACH/SKULL	NO
Surgical - Neuro	61601	RESECT/EXCISE CRANIAL LESION	NO
Surgical - Neuro	61606	RESECT/EXCISE CRANIAL LESION	NO
Surgical - Neuro	61607	RESECT/EXCISE CRANIAL LESION	NO
Surgical - Neuro	61608	RESECT/EXCISE CRANIAL LESION	NO
Surgical - Neuro	61615	RESECT/EXCISE LESION, SKULL	NO
Procedure - Cardiac	61630	Balloon angioplasty, intracranial (eg, atherosclerotic stenosis), percutaneous	YES
Procedure - Cardiac	61635	Transcatheter placement of intravascular stent(s), intracranial (eg, atherosclerotic stenosis), including balloon angioplasty, if performed	NO
Procedure - Cardiac	61640	Balloon dilatation of intracranial vasospasm, percutaneous; initial vessel	NO
Procedure - Cardiac	61641	Balloon dilatation of intracranial vasospasm, percutaneous; each additional vessel in same vascular family (List separately in addition to code for primary procedure)	NO
Procedure - Cardiac	61642	Balloon dilatation of intracranial vasospasm, percutaneous; each additional vessel in different vascular family (List separately in addition to code for primary procedure)	NO
Surgical - Neuro	61680	INTRACRANIAL VESSEL SURGERY	NO
Surgical - Neuro	61682	INTRACRANIAL VESSEL SURGERY	NO
Surgical - Neuro	61686	INTRACRANIAL VESSEL SURGERY	NO
Surgical - Neuro	61690	INTRACRANIAL VESSEL SURGERY	NO
Surgical - Neuro	61697	BRAIN ANEURYSM REPR, COMPLX	NO
Surgical - Neuro	61711	FUSION OF SKULL ARTERIES	NO

Surgical - Misc.	61720	Creation of lesion by stereotactic method, including burr hole(s) and localizing and recording techniques, single or multiple stages; globus pallidus or thalamus [stereotactic pallidotomy]	NO
Surgical- Oncology	61736	Laser interstitial thermal therapy (LITT) of lesion, intracranial, including burr hole(s), with magnetic resonance imaging guidance, when performed; single trajectory for 1 simple lesion	NO
Surgical- Oncology	61737	Laser interstitial thermal therapy (LITT) of lesion, intracranial, including burr hole(s), with magnetic resonance imaging guidance, when performed; multiple trajectories for multiple or complex lesions	NO
Surgical - Neuro	61750	INCISE SKULL/BRAIN BIOPSY	NO
Surgical - Neuro	61783	Stereotactic computer-assisted (navigational) procedure; spinal (List separately in addition to code for primary procedure)	NO
Radiation	61796	Stereotactic radiosurgery (particle beam, gamma ray, or linear accelerator); 1 simple cranial lesion	YES
Radiation	61797	Stereotactic radiosurgery (particle beam, gamma ray, or linear accelerator); each additional cranial lesion, simple	YES
Radiation	61798	Stereotactic radiosurgery (particle beam, gamma ray, or linear accelerator); 1 complex cranial lesion	YES
Radiation	61799	Stereotactic radiosurgery (particle beam, gamma ray, or linear accelerator); each additional cranial lesion, complex	YES
Radiation	61800	Application of stereotactic headframe for stereotactic radiosurgery	YES
Neurostimulator	61850	Twist drill or burr hole(s) for implantation of neurostimulator electrodes, cortical	NO
Neurostimulator	61860	Craniectomy or craniotomy for implantation of neurostimulator electrodes, cerebral, cortical	NO
Neurostimulator	61863	Twist drill, burr hole, craniotomy, or craniectomy with stereotactic implantation of neurostimulator electrode array in subcortical site (eg, thalamus, globus pallidus, subthalamic nucleus, periventricular, periaqueductal gray), without use of intraoperative microelectrode recording	NO
Neurostimulator	61864	Twist drill, burr hole, craniotomy, or craniectomy with stereotactic implantation of neurostimulator electrode array in subcortical site (eg, thalamus, globus pallidus, subthalamic nucleus, periventricular, periaqueductal gray), without use of intraoperative microelectrode recording; each additional array	NO
Neurostimulator	61867	Twist drill, burr hole, craniotomy, or craniectomy with stereotactic implantation of neurostimulator electrode array in subcortical site (eg, thalamus, globus pallidus, subthalamic nucleus, periventricular, periaqueductal gray), with use of intraoperative microelectrode recording; first array	NO
Neurostimulator	61868	Twist drill, burr hole, craniotomy, or craniectomy with stereotactic implantation of neurostimulator electrode array in subcortical site (eg, thalamus, globus pallidus, subthalamic nucleus, periventricular, periaqueductal gray), with use of intraoperative microelectrode recording; each additional array	NO
Neurostimulator	61880	REVISE/REMOVE INTRACRAN NEUROELEC	NO
Neurostimulator	61885	Insertion or replacement of cranial neurostimulator pulse generator or receiver, direct or inductive coupling; with connection to a single electrode array	YES

Neurostimulator	61886	Insertion or replacement of cranial neurostimulator pulse generator or receiver, direct or inductive coupling; with connection to 2 or more electrode arrays	YES
Neurostimulator	61888	REVIS/REMOV CRANIAL NEURORCVR	NO
Surgical - Neuro	62120	REPAIR SKULL CAVITY LESION	NO
Surgical - Spine	62263	Percutaneous lysis of epidural adhesions using solution injection (eg, hypertonic saline, enzyme) or mechanical means (eg, catheter) including radiologic localization (includes contrast when administered), multiple adhesiolysis sessions; 2 or more days	YES
Investigational Potential	62264	Percutaneous lysis of epidural adhesions using solution injection (eg, hypertonic saline, enzyme) or mechanical means (eg, catheter) including radiologic localization (includes contrast when administered), multiple adhesiolysis sessions; 1 day	YES
Surgical - Spine	62281	Injection/infusion of neurolytic substance (eg, alcohol, phenol, iced saline solutions), with or without other therapeutic substance; epidural, cervical or thoracic	YES
Surgical - Spine	62282	Injection/infusion of neurolytic substance (eg, alcohol, phenol, iced saline solutions), with or without other therapeutic substance; epidural, lumbar, sacral (caudal)	YES
Surgical - Spine	62287	Decompression procedure, percutaneous, of nucleus pulposus of intervertebral disc, any method utilizing needle based technique to remove disc material under fluoroscopic imaging or other form of indirect visualization, with discography and/or epidural injection(s) at the treated level(s), when performed, single or multiple levels, lumbar	NO
Investigational Potential	62291	Injection procedure for discography, each level; cervical or thoracic	NO
Pain Management	62320	Injection(s), of diagnostic or therapeutic substance(s) (eg, anesthetic, antispasmodic, opioid, steroid, other solution), not including neurolytic substances, including needle or catheter placement, interlaminar epidural or subarachnoid, cervical or thoracic	YES
Pain Management	62321	Injection(s), of diagnostic or therapeutic substance(s) (eg, anesthetic, antispasmodic, opioid, steroid, other solution), not including neurolytic substances, including needle or catheter placement, interlaminar epidural or subarachnoid, cervical or thoracic	NO
Pain Management	62322	Injection(s), of diagnostic or therapeutic substance(s) (eg, anesthetic, antispasmodic, opioid, steroid, other solution), not including neurolytic substances, including needle or catheter placement, interlaminar epidural or subarachnoid, lumbar or sacral	NO
Implantable Infusion Pumps	62350	Implantation, revision or repositioning of tunneled intrathecal or epidural catheter, for long-term medication administration via an external pump or implantable reservoir/infusion pump; without laminectomy	YES
Implantable Infusion Pumps	62351	Implantation, revision or repositioning of tunneled intrathecal or epidural catheter, for long-term medication administration via an external pump or implantable reservoir/infusion pump; with laminectomy	YES
Implantable Infusion Pumps	62355	REMOVE SPINAL CANAL CATHETER	NO
Implantable Infusion Pumps	62360	Implantation or replacement of device for intrathecal or epidural drug infusion; subcutaneous reservoir	YES
Implantable Infusion Pumps	62361	Implantation or replacement of device for intrathecal or epidural drug infusion; nonprogrammable pump	YES

Implantable Infusion Pumps	62362	Implantation or replacement of device for intrathecal or epidural drug infusion; programmable pump, including preparation of pump, with or without programming	YES
Implantable Infusion Pumps	62365	REMOVE INFUSN DEVICE/PUMP	YES
Surgical - Spine	62380	Endoscopic decompression of spinal cord, nerve root(s), including laminotomy, partial facetectomy, foraminotomy, discectomy and/or excision of herniated intervertebral disc, 1 interspace, lumbar	NO
Surgical - Spine	63001	Laminectomy with exploration and/or decompression of spinal cord and/or cauda equina, without facetectomy, foraminotomy or discectomy (eg, spinal stenosis), 1 or 2 vertebral segments; cervical	YES
Surgical - Spine	63003	Laminectomy with exploration and/or decompression of spinal cord and/or cauda equina, without facetectomy, foraminotomy or discectomy (eg, spinal stenosis), 1 or 2 vertebral segments; thoracic	YES
Surgical - Spine	63005	Laminectomy with exploration and/or decompression of spinal cord and/or cauda equina, without facetectomy, foraminotomy or discectomy (eg, spinal stenosis), 1 or 2 vertebral segments; lumbar, except for spondylolisthesis	YES
Surgical - Spine	63011	LAM W/O FACETEC FORAMOT/DSKC 1/2 VRT SEG, SACRAL	NO
Surgical - Spine	63012	Laminectomy with removal of abnormal facets and/or pars inter-articularis with decompression of cauda equina and nerve roots for spondylolisthesis, lumbar (Gill type procedure)	YES
Surgical - Spine	63015	Laminectomy with exploration and/or decompression of spinal cord and/or cauda equina, without facetectomy, foraminotomy or discectomy (eg, spinal stenosis), more than 2 vertebral segments; cervical	YES
Surgical - Spine	63016	Laminectomy with exploration and/or decompression of spinal cord and/or cauda equina, without facetectomy, foraminotomy or discectomy (eg, spinal stenosis), more than 2 vertebral segments; thoracic	YES
Surgical - Spine	63017	Laminectomy with exploration and/or decompression of spinal cord and/or cauda equina, without facetectomy, foraminotomy or discectomy (eg, spinal stenosis), more than 2 vertebral segments; lumbar	YES
Surgical - Spine	63020	Laminotomy (hemilaminectomy), with decompression of nerve root(s), including partial facetectomy, foraminotomy and/or excision of herniated intervertebral disc; 1 interspace, cervical	YES
Surgical - Spine	63030	Laminotomy (hemilaminectomy), with decompression of nerve root(s), including partial facetectomy, foraminotomy and/or excision of herniated intervertebral disc; 1 interspace, lumbar	YES
Surgical - Spine	63035	Laminotomy (hemilaminectomy), with decompression of nerve root(s), including partial facetectomy, foraminotomy and/or excision of herniated intervertebral disc; each additional interspace, cervical or lumbar (List separately in addition to code for primary procedure)	YES
Surgical - Spine	63040	Laminotomy (hemilaminectomy), with decompression of nerve root(s), including partial facetectomy, foraminotomy and/or excision of herniated intervertebral disc, reexploration, single interspace; cervical	YES
Surgical - Spine	63042	Laminotomy (hemilaminectomy), with decompression of nerve root(s), including partial facetectomy, foraminotomy and/or excision of herniated intervertebral disc, reexploration, single interspace; lumbar	YES
Surgical - Spine	63043	Laminotomy (hemilaminectomy), with decompression of nerve root(s), including partial facetectomy, foraminotomy and/or excision of herniated intervertebral disc, reexploration, single interspace; each additional cervical interspace (List separately in addition to code for primary procedure)	YES

Surgical - Spine	63044	Laminotomy (hemilaminectomy), with decompression of nerve root(s), including partial facetectomy, foraminotomy and/or excision of herniated intervertebral disc, reexploration, single interspace; each additional lumbar interspace (List separately in addition to code for primary procedure)	YES
Surgical - Spine	63045	Laminectomy, facetectomy and foraminotomy (unilateral or bilateral with decompression of spinal cord, cauda equina and/or nerve root[s], [eg, spinal or lateral recess stenosis]), single vertebral segment; cervical	YES
Surgical - Spine	63046	Laminectomy, facetectomy and foraminotomy (unilateral or bilateral with decompression of spinal cord, cauda equina and/or nerve root[s], [eg, spinal or lateral recess stenosis]), single vertebral segment; thoracic	YES
Surgical - Spine	63047	Laminectomy, facetectomy and foraminotomy (unilateral or bilateral with decompression of spinal cord, cauda equina and/or nerve root[s], [eg, spinal or lateral recess stenosis]), single vertebral segment; lumbar	YES
Surgical - Spine	63048	Laminectomy, facetectomy and foraminotomy (unilateral or bilateral with decompression of spinal cord, cauda equina and/or nerve root[s], [eg, spinal or lateral recess stenosis]), single vertebral segment; each additional segment, cervical, thoracic, or lumbar (List separately in addition to code for primary procedure)	YES
Surgical - Spine	63050	Laminoplasty, cervical, with decompression of the spinal cord, 2 or more vertebral segments	YES
Surgical - Spine	63051	Laminoplasty, cervical, with decompression of the spinal cord, 2 or more vertebral segments; with reconstruction of the posterior bony elements (including the application of bridging bone graft and non-segmental fixation devices [eg, wire, suture, mini-plates], when performed)	YES
Surgical - Spine	63052	Laminectomy, facetectomy, or foraminotomy (unilateral or bilateral with decompression of spinal cord, cauda equina and/or nerve root[s] [eg, spinal or lateral recess stenosis]), during posterior interbody arthrodesis, lumbar; single vertebral segment (List separately in addition to code for primary procedure)	YES
Surgical - Spine	63053	Laminectomy, facetectomy, or foraminotomy (unilateral or bilateral with decompression of spinal cord, cauda equina and/or nerve root[s] [eg, spinal or lateral recess stenosis]), during posterior interbody arthrodesis, lumbar; each additional segment (List separately in addition to code for primary procedure)	YES
Surgical - Spine	63055	Transpedicular approach with decompression of spinal cord, equina and/or nerve root(s) (eg, herniated intervertebral disc), single segment; thoracic	YES
Surgical - Spine	63056	Transpedicular approach with decompression of spinal cord, equina and/or nerve root(s) (eg, herniated intervertebral disc), single segment; lumbar (including transfacet, or lateral extraforaminal approach) (eg, far lateral herniated intervertebral disc)	YES
Surgical - Spine	63057	Transpedicular approach with decompression of spinal cord, equina and/or nerve root(s) (eg, herniated intervertebral disc), single segment; each additional segment, thoracic or lumbar (List separately in addition to code for primary procedure)	YES
Surgical - Spine	63064	COSTOVERT DECOMPRESS THORACIC CORD	YES
Surgical - Spine	63066	COSTOVERT DECOMP THOR CORD,EACH ADDN	YES
Surgical - Spine	63075	Discectomy, anterior, with decompression of spinal cord and/or nerve root(s), including osteophytectomy; cervical, single interspace	YES

Surgical - Spine	63076	Discectomy, anterior, with decompression of spinal cord and/or nerve root(s), including osteophyctomy; cervical, each additional interspace (List separately in addition to code for primary procedure)	YES
Surgical - Spine	63077	DISK SURG,THORAX,SINGLE LEVEL	YES
Surgical - Spine	63078	DISK SURG,THORAX,EA ADDNL LEVEL	YES
Surgical - Spine	63081	Vertebral corpectomy (vertebral body resection), partial or complete, anterior approach with decompression of spinal cord and/or nerve root(s); cervical, single segment	YES
Surgical - Spine	63082	Vertebral corpectomy (vertebral body resection), partial or complete, anterior approach with decompression of spinal cord and/or nerve root(s); cervical, each additional segment (List separately in addition to code for primary procedure)	YES
Surgical - Spine	63085	Vertebral corpectomy (vertebral body resection), partial or complete, transthoracic approach with decompression of spinal cord and/or nerve root(s); thoracic, single segment	YES
Surgical - Spine	63086	Vertebral corpectomy (vertebral body resection), partial or complete, transthoracic approach with decompression of spinal cord and/or nerve root(s); thoracic, each additional segment (List separately in addition to code for primary procedure)	YES
Surgical - Spine	63087	Vertebral corpectomy (vertebral body resection), partial or complete, combined thoracolumbar approach with decompression of spinal cord, cauda equina or nerve root(s), lower thoracic or lumbar; single segment	YES
Surgical - Spine	63088	Vertebral corpectomy (vertebral body resection), partial or complete, combined thoracolumbar approach with decompression of spinal cord, cauda equina or nerve root(s), lower thoracic or lumbar; each additional segment (List separately in addition to code for primary procedure)	YES
Surgical - Spine	63090	Vertebral corpectomy (vertebral body resection), partial or complete, transperitoneal or retroperitoneal approach with decompression of spinal cord, cauda equina or nerve root(s), lower thoracic, lumbar, or sacral; single segment	YES
Surgical - Spine	63091	Vertebral corpectomy (vertebral body resection), partial or complete, transperitoneal or retroperitoneal approach with decompression of spinal cord, cauda equina or nerve root(s), lower thoracic, lumbar, or sacral; each additional segment (List separately in addition to code for primary procedure)	YES
Surgical - Spine	63101	Vertebral corpectomy (vertebral body resection), partial or complete, lateral extracavitary approach with decompression of spinal cord and/or nerve root(s) (eg, for tumor or retropulsed bone fragments); thoracic, single segment	YES
Surgical - Spine	63102	Vertebral corpectomy (vertebral body resection), partial or complete, lateral extracavitary approach with decompression of spinal cord and/or nerve root(s) (eg, for tumor or retropulsed bone fragments); lumbar, single segment	YES
Surgical - Spine	63103	Vertebral corpectomy (vertebral body resection), partial or complete, lateral extracavitary approach with decompression of spinal cord and/or nerve root(s) (eg, for tumor or retropulsed bone fragments); thoracic or lumbar, each additional segment (List separately in addition to code for primary procedure)	YES
Surgical - Spine	63170	INCISE SPINAL CORD TRACT(S)	YES
Surgical - Spine	63172	DRAIN INTRAMEDULLARY->SUBARACH	NO
Surgical - Spine	63173	DRAIN INTRAMEDULLARY->PERITONEAL	NO

Surgical - Spine	63180	Laminectomy and section of dentate ligaments, with or without dural graft, cervical; 1 or 2 segments	YES
Surgical - Spine	63182	Laminectomy and section of dentate ligaments, with or without dural graft, cervical; more than 2 segments	YES
Surgical - Spine	63185	Laminectomy with rhizotomy; more than 2 segments	YES
Surgical - Spine	63190	Laminectomy, with release of tethered spinal cord, lumbar	YES
Surgical - Spine	63191	Laminectomy with section of spinal accessory nerve	YES
Surgical - Spine	63194	Laminectomy with cordotomy, with section of 1 spinothalamic tract, 1 stage; cervical	YES
Surgical - Spine	63196	Laminectomy with cordotomy, with section of both spinothalamic tracts, 1 stage; cervical	YES
Surgical - Spine	63197	INCIS BOTH SPINOTHAL,THOR,1 STAGE	YES
Surgical - Spine	63198	Laminectomy with cordotomy with section of both spinothalamic tracts, 2 stages within 14 days; cervical	YES
Surgical - Spine	63200	Laminectomy for excision or occlusion of arteriovenous malformation of spinal cord; thoracolumbar	YES
Surgical - Spine	63250	Laminectomy for excision or occlusion of arteriovenous malformation of spinal cord; cervical	YES
Surgical - Spine	63251	EXCIS/OCCLUD CORD AVM,THORACIC	YES
Surgical - Spine	63252	Laminectomy for excision or evacuation of intraspinal lesion other than neoplasm, extradural; lumbar	YES
Surgical - Spine	63265	Laminectomy for excision or evacuation of intraspinal lesion other than neoplasm, extradural; cervical	YES
Surgical - Spine	63266	EXCIS INTRASP LESN,XDURAL,THORACIC	NO
Surgical - Spine	63267	Laminectomy for excision of intraspinal lesion other than neoplasm, intradural; lumbar	YES
Surgical - Neuro	63268	EXCISE INTRASPINAL LESION	NO
Surgical - Spine	63270	Laminectomy for excision of intraspinal lesion other than neoplasm, intradural; cervical	YES
Surgical - Neuro	63271	EXCISE INTRASPINAL LESION	NO
Surgical - Spine	63272	Laminectomy for biopsy/excision of intraspinal neoplasm; extradural, lumbar	YES
Surgical - Spine	63273	EXCIS INTRASP LESN,INTRADUR,SACRAL	NO
Surgical - Spine	63275	Laminectomy for biopsy/excision of intraspinal neoplasm; extradural, cervical	YES
Surgical - Spine	63277	Laminectomy for biopsy/excision of intraspinal neoplasm; intradural, extramedullary, lumbar	YES
Surgical - Spine	63280	Laminectomy for biopsy/excision of intraspinal neoplasm; intradural, extramedullary, cervical	YES
Surgical - Spine	63282	Laminectomy for biopsy/excision of intraspinal neoplasm; intradural, intramedullary, thoracolumbar	YES
Surgical - Spine	63285	Laminectomy for biopsy/excision of intraspinal neoplasm; intradural, intramedullary, cervical	YES
Surgical - Spine	63287	Laminectomy for biopsy/excision of intraspinal neoplasm; combined extradural-intradural lesion, any level	YES
Surgical - Spine	63290	Laminectomy for biopsy/excision of intraspinal neoplasm; combined extradural-intradural lesion, any level	YES
Surgical - Spine	63300	Vertebral corpectomy (vertebral body resection), partial or complete, for excision of intraspinal lesion, single segment; extradural, cervical	YES
Surgical - Spine	63301	Vertebral corpectomy (vertebral body resection), partial or complete, for excision of intraspinal lesion, single segment; extradural, thoracic by transthoracic approach	YES

Surgical - Spine	63302	Vertebral corpectomy (vertebral body resection), partial or complete, for excision of intraspinal lesion, single segment; extradural, thoracic by thoracolumbar approach	YES
Surgical - Spine	63303	Vertebral corpectomy (vertebral body resection), partial or complete, for excision of intraspinal lesion, single segment; extradural, lumbar or sacral by transperitoneal or retroperitoneal approach	YES
Surgical - Spine	63304	Vertebral corpectomy (vertebral body resection), partial or complete, for excision of intraspinal lesion, single segment; intradural, cervical	YES
Surgical - Spine	63305	Vertebral corpectomy (vertebral body resection), partial or complete, for excision of intraspinal lesion, single segment; intradural, thoracic by transthoracic approach	YES
Surgical - Spine	63306	Vertebral corpectomy (vertebral body resection), partial or complete, for excision of intraspinal lesion, single segment; intradural, thoracic by thoracolumbar approach	YES
Surgical - Spine	63307	Vertebral corpectomy (vertebral body resection), partial or complete, for excision of intraspinal lesion, single segment; intradural, lumbar or sacral by transperitoneal or retroperitoneal approach	YES
Surgical - Spine	63308	Vertebral corpectomy (vertebral body resection), partial or complete, for excision of intraspinal lesion, single segment; each additional segment (List separately in addition to codes for single segment)	YES
Radiation	63620	Stereotactic radiosurgery (particle beam, gamma ray, or linear accelerator); 1 spinal lesion	YES
Radiation	63621	Stereotactic radiosurgery (particle beam, gamma ray, or linear accelerator); each additional spinal lesion (List separat	YES
Pain Management	63650	Percutaneous implantation of neurostimulator electrode array, epidural	YES
Pain Management	63655	Laminectomy for implantation of neurostimulator electrodes, plate/paddle, epidural	YES
Pain Management	63663	Revision including replacement, when performed, of spinal neurostimulator electrode percutaneous array(s), including fluoroscopy, when performed	YES
Pain Management	63664	Revision including replacement, when performed, of spinal neurostimulator electrode plate/paddle(s) placed via laminotomy or laminectomy, including fluoroscopy, when performed	YES
Pain Management	63685	Insertion or replacement of spinal neurostimulator pulse generator or receiver, direct or inductive coupling	YES
Pain Management	63688	Revision or removal of implanted spinal neurostimulator pulse generator or receiver	YES
Investigational Potential	64405	Injection(s), anesthetic agent(s) and/or steroid; greater occipital nerve	NO
Investigational Potential	64415	Injection(s), anesthetic agent(s) and/or steroid; brachial plexus, including imaging guidance, when performed	NO
Investigational Potential	64417	Injection(s), anesthetic agent(s) and/or steroid; axillary nerve, including imaging guidance, when performed	NO
Investigational Potential	64447	Injection(s), anesthetic agent(s) and/or steroid; femoral nerve, including imaging guidance, when performed	NO
Investigational Potential	64450	Injection(s), anesthetic agent(s) and/or steroid; other peripheral nerve or branch	NO
Pain Management	64451	INJECTION ANES AGNT/STEROID NERVES NRVGT SI JOINT W/IMG GUID	NO
Investigational Potential	64454	Injection(s), anesthetic agent(s) and/or steroid; genicular nerve branches, including imaging guidance, when performed	NO

Pain Management	64479	Injection(s), anesthetic agent and/or steroid, transforaminal epidural, with imaging guidance (fluoroscopy or CT); cervical or thoracic, single level	NO
Pain Management	64480	Injection(s), anesthetic agent and/or steroid, transforaminal epidural, with imaging guidance (fluoroscopy or CT); cervical or thoracic, each additional level (List separately in addition to code for primary procedure)	NO
Pain Management	64483	Injection(s), anesthetic agent and/or steroid, transforaminal epidural, with imaging guidance (fluoroscopy or CT); lumbar or sacral, single level	NO
Pain Management	64484	Injection(s), anesthetic agent and/or steroid, transforaminal epidural, with imaging guidance (fluoroscopy or CT); lumbar or sacral, each additional level (List separately in addition to code for primary procedure)	NO
Pain Management	64491	Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joint) with image guidance (fluoroscopy or CT), cervical or thoracic; second level (List separately in addition to code for primary procedure)	NO
Pain Management	64492	Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joint) with image guidance (fluoroscopy or CT), cervical or thoracic; third and any additional level(s) (List separately in addition to code for primary procedure)	NO
Pain Management	64493	Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joint) with image guidance (fluoroscopy or CT), lumbar or sacral; single level	NO
Pain Management	64494	Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joint) with image guidance (fluoroscopy or CT), lumbar or sacral; second level (List separately in addition to code for primary procedure)	NO
Pain Management	64495	Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joint) with image guidance (fluoroscopy or CT), lumbar or sacral; third and any additional level(s) (List separately in addition to code for primary procedure)	NO
Investigational Potential	64505	Injection, anesthetic agent; sphenopalatine ganglion [when specified as a therapeutic nerve block]	NO
Pain Management	64510	Injection, anesthetic agent; stellate ganglion (cervical sympathetic)	NO
Pain Management	64520	Injection, Anesthetic Agent; Lumbar/Thoracic (Paravertebral Sympathetic)	NO
Neurostimulator	64553	Percutaneous implantation of neurostimulator electrodes; cranial nerve	YES
Neurostimulator	64555	Percutaneous implantation of neurostimulator electrodes; peripheral nerve (excludes sacral nerve)	YES
Neurostimulator	64561	Percutaneous implantation of neurostimulator electrodes; sacral nerve (transforaminal placement)	YES
Neurostimulator	64566	Posterior tibial neurostimulation, percutaneous needle electrode, single treatment, includes programming	YES
Neurostimulator	64568	Open implantation of cranial nerve (eg, vagus nerve) neurostimulator electrode array and pulse generator	YES
Neurostimulator	64569	Revision or replacement of cranial nerve (eg, vagus nerve) neurostimulator electrode array, including connection to existing pulse generator	YES
Neurostimulator	64575	Open implantation of neurostimulator electrodes; peripheral nerve (excludes sacral nerve)	YES

Neurostimulator	64581	Open implantation of neurostimulator electrode array; sacral nerve (transforaminal placement)	YES
Surgical – ENT	64582	Open implantation of hypoglossal nerve neurostimulator array, pulse generator, and distal respiratory sensor electrode or electrode array	YES
Surgical – ENT	64583	REVSU/RPLCMT HPGLSL NERVE NSTIM RA PG AND RESPIR SNR	YES
Surgical – ENT	64584	REMOVAL HYPOGLOSSAL NERVE NSTIM RA PG AND RESPIR SNR	YES
Procedure – Misc.	64585	Revision or removal of peripheral neurostimulator electrode array [when specified as a sacral nerve stimulator]	YES
Neurostimulator	64590	Insertion or replacement of peripheral or gastric neurostimulator pulse generator or receiver, direct or inductive coupling	YES
Neurostimulator	64595	REVISE/REMOVE PERIPH/GASTRIC NEUROSTIM/RECEIVER	YES
Investigational Potential	64596	Insertion or replacement of percutaneous electrode array, peripheral nerve, with integrated neurostimulator, including imaging guidance, when performed; initial electrode array	NO
Investigational Potential	64597	Insertion or replacement of percutaneous electrode array, peripheral nerve, with integrated neurostimulator, including imaging guidance, when performed; each additional electrode array (List separately in addition to code for primary procedure)	NO
Investigational Potential	64624	Destruction by neurolytic agent, genicular nerve branches including imaging guidance, when performed	YES
Pain Management	64625	Radiofrequency ablation, nerves innervating the sacroiliac joint, with image guidance (ie, fluoroscopy or computed tomography)	NO
Investigational Potential	64628	Thermal destruction of intraosseous basivertebral nerve, including all imaging guidance; first 2 vertebral bodies, lumbar or sacral	NO
Investigational Potential	64629	Thermal destruction of intraosseous basivertebral nerve, including all imaging guidance; each additional vertebral body, lumbar or sacral (List separately in addition to code for primary procedure)	NO
Pain Management	64632	Destruction by neurolytic agent; plantar common digital nerve	NO
Pain Management	64633	Destruction by neurolytic agent, paravertebral facet joint nerve(s), with imaging guidance (fluoroscopy or CT); cervical or thoracic, single facet joint	NO
Pain Management	64634	Destruction by neurolytic agent, paravertebral facet joint nerve(s), with imaging guidance (fluoroscopy or CT); cervical or thoracic, each additional facet joint (List separately in addition to code for primary procedure)	NO
Pain Management	64635	Destruction by neurolytic agent, paravertebral facet joint nerve(s), with imaging guidance (fluoroscopy or CT); lumbar or sacral, single facet joint	NO
Pain Management	64636	Destruction by neurolytic agent, paravertebral facet joint nerve(s), with imaging guidance (fluoroscopy or CT); lumbar or sacral, each additional facet joint (List separately in addition to code for primary procedure)	NO
Investigational Potential	64640	Destruction by neurolytic agent; other peripheral nerve or branch	NO
Investigational Potential	64650	CHEMODENERV ECCRINE GLANDS BOTH AXILLAE	YES
Investigational Potential	64653	CHEMODENERV ECCRINE GLANDS, NON-AXILLARY	YES
Cosmetic Potential	64716	Neuroplasty and/or transposition; cranial nerve (specify)	YES
Surgical – Misc.	64719	REVISE ULNAR NERVE AT WRIST	NO
Surgical – Misc.	64721	CARPAL TUNNEL SURGERY	NO

Surgical - Misc.	64722	Decompression; unspecified nerve(s) [for example, occipital nerve]	YES
Cosmetic Potential	64732	Transection or avulsion of; supraorbital nerve	YES
Cosmetic Potential	64734	Transection or avulsion of; infraorbital nerve	YES
Cosmetic Potential	64736	Transection or avulsion of; mental nerve	YES
Cosmetic Potential	64738	Transection or avulsion of; inferior alveolar nerve by osteotomy	YES
Cosmetic Potential	64740	Transection or avulsion of; lingual nerve	YES
Cosmetic Potential	64742	Transection or avulsion of; facial nerve, differential or complete	YES
Surgical - Misc.	64744	Transection or avulsion of; greater occipital nerve	NO
Surgical - Misc.	64771	Transection or avulsion of other cranial nerve, extradural	NO
Surgical - Misc.	64772	Transection or avulsion of other spinal nerve, extradural	NO
Surgical - Misc.	64787	Implantation of nerve end into bone or muscle	NO
Surgical - Misc.	64818	Sympathectomy, lumbar	NO
Cosmetic Potential	64864	Suture of facial nerve; extracranial	YES
Cosmetic Potential	64865	Suture of facial nerve; infratemporal, with or without grafting	YES
Cosmetic Potential	64866	Anastomosis; facial-spinal accessory	YES
Cosmetic Potential	64868	Anastomosis; facial-hypoglossal	YES
Surgical - Misc.	64999	Unlisted procedure, nervous system	YES
Transplant	65755	CORNEAL TRANSPLANT	YES
Bioengineered Wound Healing	65778	Placement of amniotic membrane on the ocular surface; without sutures	YES
Bioengineered Wound Healing	65779	Placement of amniotic membrane on the ocular surface; single layer, sutured	YES
Bioengineered Wound Healing	65780	Ocular surface reconstruction; amniotic membrane transplantation, multiple layers	YES
Surgical - Glucoma	65785	IMPLANTATION INTRASTROMAL CORNEAL RING SEGMENTS	NO
Surgical - Glucoma	66174	Transluminal dilation of aqueous outflow canal; without retention of device or stent	NO
Surgical - Glucoma	66175	Transluminal dilation of aqueous outflow canal; with retention of device or stent	NO
Surgical - Glucoma	66179	AQUEOUS SHUNT EXTRAOCULAR RESERVOIR W/O GRAFT	NO
Surgical - Glucoma	66180	WATER SHUNT-EXTRAOCUL RESERV	NO
Surgical - Glucoma	66183	Insertion of anterior segment aqueous drainage device, without extraocular reservoir, external approach [when specified as Ex-PRESS Glaucoma Filtration Device]	NO
Surgical - Glucoma	66184	REVJ SHUNT EXTRAOCULAR RESERVOIR W/O GRAFT	NO
Surgical - Glucoma	66185	REVISE EYE SHUNT	NO
Surgical - ENT	66852	REMOVAL OF LENS MATERIAL	NO
Surgical - ENT	66920	EXTRACTION OF LENS	NO

Surgical - Gluacoma	66989	Extracapsular cataract removal with insertion of intraocular lens prosthesis (1-stage procedure), manual or mechanical technique (eg, irrigation and aspiration or phacoemulsification), complex, requiring devices or techniques not generally used in routine cataract surgery (eg, iris expansion device, suture support for intraocular lens, or primary posterior capsulorrhexis) or performed on patients in the amblyogenic developmental stage; with insertion of intraocular (eg, trabecular meshwork, supraciliary, suprachoroidal) anterior segment aqueous drainage device, without extraocular reservoir, internal approach, one or more	NO
Surgical - Gluacoma	66991	Extracapsular cataract removal with insertion of intraocular lens prosthesis (1 stage procedure), manual or mechanical technique (eg, irrigation and aspiration or phacoemulsification); with insertion of intraocular (eg, trabecular meshwork, supraciliary, suprachoroidal) anterior segment aqueous drainage device, without extraocular reservoir, internal approach, one or more	NO
Investigational Potential	66999	Unlisted procedure, anterior segment of eye [when specified as viscocanalostomy]	YES
Investigational Potential	67027	Implantation of intravitreal drug delivery system (eg, ganciclovir implant), includes concomitant removal of vitreous [when specified as implantation of Susvimo]	YES
Investigational Potential	67028	Intravitreal injection of a pharmacologic agent (separate procedure) [when specified as refill injection of Susvimo]	YES
Radiation	67218	Destruction of localized lesion of retina (eg, macular edema, tumors), 1 or more sessions; radiation by implantation of source (includes removal of source)	YES
Investigational Potential	67220	Destruction of localized lesion of choroid (eg, choroidal neovascularization); photocoagulation (eg, laser), 1 or more sessions [when specified as destruction of macular drusen]	YES
Investigational Potential	67299	Unlisted procedure, posterior segment [when specified as destruction of macular drusen, photocoagulation]	YES
Surgical - ENT	67399	EYE MUSCLE SURGERY PROCEDURE	YES
Surgical - ENT	67516	SUPRACHOROIDAL SPACE INJ PHARMACOLOGIC AGENT	YES
Surgical - ENT	67599	ORBIT SURGERY PROC UNLISTED	YES
Cosmetic Potential	67900	Repair of brow ptosis (supraciliary, mid-forehead or coronal approach)	YES
Cosmetic Potential	67901	Repair of blepharoptosis; frontalis muscle technique with suture or other material (eg, banked fascia)	YES
Cosmetic Potential	67902	Repair of blepharoptosis; frontalis muscle technique with autologous fascial sling (includes obtaining fascia)	YES
Cosmetic Potential	67903	Repair of blepharoptosis; (tarso) levator resection or advancement, internal approach	YES
Cosmetic Potential	67904	Repair of blepharoptosis; (tarso) levator resection or advancement, external approach	YES
Cosmetic Potential	67906	Repair of blepharoptosis; superior rectus technique with fascial sling (includes obtaining fascia)	YES
Cosmetic Potential	67908	Repair of blepharoptosis; conjunctivo-tarso-Muller's muscle-levator resection (eg, Fasanella-Servat type)	YES
Cosmetic Potential	67909	REDN OVERCORRECTN OF LID PTOSIS	YES
Cosmetic Potential	67950	CANTHOPLASTY	YES

Cosmetic Potential	67999	REVISION EYELID UNLISTED	YES
Cosmetic Potential	68399	CONJUNCTIVAL SURGERY UNLISTED	YES
Cosmetic Potential	68841	INSRTN RX ELUTING IMPLT PUNCTAL DILAT LAC CANAL EA	YES
Cosmetic Potential	68899	TEAR DUCT SYSTEM SURG UNLISTED	YES
Cosmetic Potential	69090	Ear piercing	NO
Cosmetic Potential	69300	Otoplasty, protruding ear, with or without size reduction	NO
Cosmetic Potential	69399	Unlisted procedure, external ear [when specified as other otoplasty]	NO
Surgical - ENT	69505	REMOVE MASTOID STRUCTURES	YES
Surgical - ENT	69601	MASTOID SURGERY REVISION	YES
Surgical - ENT	69602	MASTOID SURGERY REVISION	YES
Surgical - ENT	69641	REVISE MIDDLE EAR & MASTOID	YES
Surgical - ENT	69646	REVISE MIDDLE EAR & MASTOID	YES
Surgical - ENT	69661	REVISE MIDDLE EAR BONE	YES
Surgical - ENT	69667	REPAIR MIDDLE EAR STRUCTURES	YES
Surgical - ENT	69705	Nasopharyngoscopy, surgical, with dilation of eustachian tube (ie, balloon dilation); unilateral	NO
Surgical - ENT	69706	Nasopharyngoscopy, surgical, with dilation of eustachian tube (ie, balloon dilation); bilateral	NO
Surgical - ENT	69711	REMOVE/REPAIR HEAR AID,TEMP BONE	YES
Surgical - ENT	69716	IMPLTN OI IMPLT SKULL MAG TC ATTACHMENT ESP	YES
Surgical - ENT	69719	RPLCMT OI IMPLT SKULL MAG TC ATTACHMENT ESP<100	YES
Surgical - ENT	69726	REMOVAL OI IMPLT SKULL PERQ ATTACHMENT ESP	YES
Surgical - ENT	69727	REMOVAL OI IMPLT SKULL MAG TC ATTACHMENT ESP	YES
Surgical - ENT	69728	RMVL ENTIRE OI IMPLT SKL MAG TC ATTCH ESP>=100	YES
Surgical - ENT	69729	IMPL OI IMPLT SKULL MAG TC ATTACHMENT ESP>=100	YES
Surgical - ENT	69730	RPLCMT OI IMPLT SKULL MAG TC ATTACHMENT ESP>=100	YES
Investigational Potential	69799	Unlisted procedure, middle ear [when specified as implantation of semi-implantable or fully implantable hearing aid] or [when specified as balloon dilation of eustachian tube, any approach]	YES
Durable Medical Equipment	69930	Cochlear device implantation, with or without mastoidectomy	YES
Durable Medical Equipment	69949	Unlisted procedure, inner ear [when specified as implantation of hybrid cochlear device]	YES
Cosmetic Potential	69955	Total facial nerve decompression and/or repair (may include graft)	YES
Surgical - ENT	69970	REMOVE INNER EAR LESION	YES
Surgical - ENT	69979	TEMPORAL BONE,MIDDLE,SURG UNLISTED	YES
Advanced Imaging	70336	MRI temporomandibular joint(s)	NO
Advanced Imaging	70496	CT angiography head, with contrast, including non-contrast images, if performed	YES
Advanced Imaging	70498	CT angiography neck, with contrast, including non-contrast images, if performed	YES
Advanced Imaging	70540	MRI, FACE, NECK	YES
Advanced Imaging	70542	MRI, FACE, NECK W/CONTRAST	YES
Advanced Imaging	70543	MRI, FACE, NECK, COMBO	YES
Advanced Imaging	70544	MR angiography head; w/o contrast	YES
Advanced Imaging	70545	MR angiography head; with contrast	YES

Advanced Imaging	70546	MR angiography head; w/o contrast followed by contrast	YES
Advanced Imaging	70547	MR angiography neck; w/o contrast	YES
Advanced Imaging	70548	MR angiography neck; with contrast	YES
Advanced Imaging	70549	MR angiography neck; w/o contrast followed by contrast	YES
Advanced Imaging	70551	MRI BRAIN	YES
Advanced Imaging	70552	MRI BRAIN CONTRAST	YES
Advanced Imaging	70553	MRI BRAIN COMBO	YES
Advanced Imaging	70554	Functional MRI brain not requiring physician administration	YES
Advanced Imaging	70555	Functional MRI brain requiring physician administration	YES
Advanced Imaging	71275	CT angiography chest, with contrast, including non-contrast images, if performed	YES
Advanced Imaging	71550	MRI, CHEST	YES
Advanced Imaging	71551	MRI, CHEST, W/CONTRAST	YES
Advanced Imaging	71552	MRI, CHEST, COMBO	YES
Advanced Imaging	71555	MR angiography chest; with or w/o contrast	YES
Advanced Imaging	72141	MRI, CERV SPINE	YES
Advanced Imaging	72142	MRI, CERV SPINE CONTRAST	YES
Advanced Imaging	72146	MRI, DORSAL SPINE	YES
Advanced Imaging	72147	MRI, DORSAL SPINE CONTRAST	YES
Advanced Imaging	72148	MRI, LUMBAR SPINE	YES
Advanced Imaging	72149	MRI, LUMBAR SPINE CONTRAST	YES
Advanced Imaging	72156	MRI, CERV SPINE COMBO	YES
Advanced Imaging	72157	MRI, DORSAL SPINE COMBO	YES
Advanced Imaging	72158	MRI, LUMBAR SPINE COMBO	YES
Advanced Imaging	72159	MR angiography spinal canal	YES
Advanced Imaging	72191	CT angiography pelvis, with contrast, including non-contrast images, if performed	YES
Advanced Imaging	72195	MRI, PELVIS, W/O CONTRAST	YES
Advanced Imaging	72196	MRI, PELVIS W/CONTRAST	YES
Advanced Imaging	72197	MRI, PELVIS, COMBO	YES
Advanced Imaging	72198	MR angiography pelvis; w/o contrast followed by contrast	YES
Investigational Potential	72285	Discography, cervical or thoracic, radiological supervision and interpretation	YES
Advanced Imaging	73206	CT angiography upper extremity, with contrast, including non-contrast images, if performed	YES
Advanced Imaging	73218	MRI, UPPER EXTREM	YES
Advanced Imaging	73219	MRI, UPPER EXTREM W/CONTRAST	YES
Advanced Imaging	73220	MRI UPPER EXTREM OTHER THAN JT W/O & W/CONTRAST	YES
Advanced Imaging	73221	MRI, JOINT UPPER EXTREM	YES
Advanced Imaging	73222	MRI, JOINT UPPER EXTREM W/CONTRAST	YES
Advanced Imaging	73223	MRI, JOINT UPPER EXTREM COMBO	YES
Advanced Imaging	73225	MR angiography upper extremity; with and w/o contrast	YES
Advanced Imaging	73706	CT angiography lower extremity, with contrast, including non-contrast images, if performed	YES
Advanced Imaging	73718	MRI, LOWER EXTREM	YES
Advanced Imaging	73719	MRI, LOWER EXTREM W/CONTRAST	YES
Advanced Imaging	73720	MRI, LOWER EXTR, W/O CONTRAST F/U BY CONTRAST	YES

Advanced Imaging	73721	MRI LOWER EXTREM JT, W/O CONTRAST	YES
Advanced Imaging	73722	MRI, JOINT OF LEG W/CONTRAST	YES
Advanced Imaging	73723	MRI, JOINT OF LEG. COMBO	YES
Advanced Imaging	73725	MR angiography lower extremity; with or w/o contrast	YES
Advanced Imaging	74181	MRI abdomen; w/o contrast	YES
Advanced Imaging	74182	MRI abdomen; with contrast	YES
Advanced Imaging	74183	MRI, ABDOMEN, COMBO	YES
Advanced Imaging	74185	MR angiography abdomen; with or w/o contrast	YES
Advanced Imaging	74261	Computed tomographic (CT) colonography, diagnostic, including image post processing; without contrast material	YES
Advanced Imaging	74262	Computed tomographic (CT) colonography, diagnostic, including image post processing; with contrast material(s) including non-contrast images, if performed	YES
Advanced Imaging	74263	Computed tomographic (CT) colonography, screening, including image post processing	YES
Advanced Imaging	74712	MRI Fetal, including placental and maternal pelvic imaging when performed, single or first gestation	YES
Advanced Imaging	74713	MRI fetal, including placental and maternal pelvic imaging when performed, each additional gestation	YES
Advanced Imaging	75557	MRI Cardiac for morphology and function without contrast material	YES
Advanced Imaging	75559	MRI Cardiac for morphology and function without contrast material; with stress imaging	YES
Advanced Imaging	75561	MRI Cardiac for morphology and function without contrast material(s), followed by contrast material(s) and further sequences	YES
Advanced Imaging	75563	MRI Cardiac for morphology and function without contrast material(s), followed by contrast material(s) and further sequences; with stress imaging	YES
Advanced Imaging	75565	Cardiac magnetic resonance imaging for velocity flow mapping (List separately in addition to code for primary procedure)	YES
Advanced Imaging	75571	Computed tomography, heart, without contrast material, with quantitative evaluation of coronary calcium	NO
Advanced Imaging	75572	Computed tomography, heart, with contrast material, for evaluation of cardiac structure and morphology (including 3D image post processing, assessment of cardiac function, and evaluation of venous structures, if performed)	YES
Advanced Imaging	75573	Computed tomography, heart, with contrast material, for evaluation of cardiac structure and morphology in the setting of congenital heart disease (including 3D image post processing, assessment of left ventricular cardiac function, right ventricular structure and function and evaluation of venous structures, if	YES
Advanced Imaging	75574	Computed tomographic angiography, heart, coronary arteries and bypass grafts (when present), with contrast material, including 3D image post processing (including evaluation of cardiac structure and morphology, assessment of cardiac function, and evaluation of venous structures, if performed)	YES
Advanced Imaging	75635	CT angiography abdominal aorta and bilateral iliofemoral lower extremity runoff, with contrast material(s), including non-contrast images, if performed, and image post-processing	YES
Advanced Imaging	75894	TRANSCATHETER RX EMBOLIZATN	YES
Investigational Potential	76120	Cineradiography/vidoradiography, except where specifically included	YES
Investigational Potential	76125	Cineradiography/vidoradiography to complement routine examination	YES

Radiation	76145	Medical physics dose evaluation for radiation exposure that exceeds institutional review threshold, including report	YES
Investigational Potential	76376	3D rendering with interpretation and reporting of computed tomography, magnetic resonance imaging, ultrasound, or other tomographic modality; not requiring image postprocessing on an independent workstation	YES
Investigational Potential	76377	3D rendering with interpretation and reporting of computed tomography, magnetic resonance imaging, ultrasound, or other tomographic modality with image postprocessing under concurrent supervision; requiring image postprocessing on an independent workstation	YES
Advanced Imaging	76390	MR Spectroscopy	YES
Advanced Imaging	76391	Magnetic resonance (eg, vibration) elastography	YES
Investigational Potential	76496	Unlisted fluoroscopic procedure (eg, diagnostic, interventional) [when specified as videofluoroscopy]	YES
Investigational Potential	76497	UNLISTED CT PROCEDURE	YES
Investigational Potential	76498	Unlisted magnetic resonance procedure (eg, diagnostic, interventional) [when specified as magnetic resonance neurography] or [when specified as MPRAGE MRI]	YES
Investigational Potential	76499	Unlisted diagnostic radiographic procedure [when specified as 4-D or 5-D rendering of fetal ultrasound]	YES
Radiation	76873	Echography, Transrectal; Prostate Volume Study, Brachytherapy Planning	YES
Radiation	76965	Ultrasonic guidance for interstitial radioelement application	YES
Investigational Potential	76999	UNLISTED ULTRASOUND PROCEDURE	YES
Advanced Imaging	77013	CT GUIDANCE TISSUE ABLATION	YES
Radiation	77014	Computed tomography guidance for placement of radiation therapy fields	YES
Advanced Imaging	77046	Magnetic resonance imaging, breast, without contrast material; unilateral	YES
Advanced Imaging	77047	Magnetic resonance imaging, breast, without contrast material; bilateral	YES
Advanced Imaging	77048	Magnetic resonance imaging, breast, without and with contrast material(s), including computer-aided detection (CAD real-time lesion detection, characterization and pharmacokinetic analysis), when performed; unilateral	YES
Advanced Imaging	77049	Magnetic resonance imaging, breast, without and with contrast material(s), including computer-aided detection (CAD real-time lesion detection, characterization and pharmacokinetic analysis), when performed; bilateral	YES
Advanced Imaging	77078	CT bone mineral density study; axial skeleton	YES
Advanced Imaging	77084	MRI bone marrow blood supply	YES
Advanced Imaging	77085	Dual-energy X-ray absorptiometry (DXA), bone density study, 1 or more sites: axial skeleton (e.g., hips, pelvis, spine (including vertebral fracture assessment	NO
Advanced Imaging	77086	Vertebral fracture assessment via dual-energy X-ray Absorptiometry (DXA)	NO
Advanced Imaging	77089	TBS DXA/OTHER IMG CALCULATION W/INTERP AND RPT FX RISK	YES
Radiation	77295	3-dimensional radiotherapy plan, including dose- volume histograms	YES
Durable Medical Equipment	77299	Unlisted procedure, therapeutic radiology clinical treatment planning [when specified as plan for using an electrical stimulation device for TTF; Note: when specified as enhanced computer software considered not medically necessary]	yes
Radiation	77300	Basic radiation dosimetry calculation, central axis depth dose calculation, TDF, NSD, gap calculation, off axis factor, tissue inhomogeneity factors, calculation of non-ionizing radiation surface and depth dose, as required during course of treatment, only when prescribed by the treating physician	YES
Radiation	77301	Intensity Modulated Radiotherapy Plan W/Dose Volume Histograms	YES

Radiation	77316	Brachytherapy isodose plan; simple (calculation[s] made from 1 to 4 sources, or remote afterloading brachytherapy, 1 channel), includes basic dosimetry calculation(s)	YES
Radiation	77317	Brachytherapy isodose plan; intermediate (calculation[s] made from 5 to 10 sources, or remote afterloading brachytherapy, 2-12 channels), includes basic dosimetry calculation(s)	YES
Radiation	77318	Brachytherapy isodose plan; complex (calculation[s] made from over 10 sources, or remote afterloading brachytherapy, over 12 channels), includes basic dosimetry calculation(s)	YES
Radiation	77336	Continuing medical physics consultation, including assessment of treatment parameters, quality assurance of dose delivery, and review of patient treatment documentation in support of the radiation oncologist, reported per week of therapy	YES
Radiation	77338	Multi-leaf collimator (MLC) device(s) for intensity modulated radiation therapy (IMRT), design and construction per IMRT	YES
Radiation	77370	Special medical radiation physics consultation	YES
Radiation	77371	Radiation treatment delivery, stereotactic radiosurgery (SRS), complete course of treatment of cranial lesion(s) consisting of 1 session; multi-source Cobalt 60 based	YES
Radiation	77372	Radiation treatment delivery, stereotactic radiosurgery (SRS), complete course of treatment of cranial lesion(s) consisting of 1 session; linear accelerator based	YES
Radiation	77373	Stereotactic body radiation therapy, treatment delivery, per fraction to 1 or more lesions, including image guidance, entire course not to exceed 5 fractions	YES
Radiation	77385	Intensity modulated radiation treatment delivery (IMRT), includes guidance and tracking, when performed; simple	YES
Radiation	77386	Intensity modulated radiation treatment delivery (IMRT), includes guidance and tracking, when performed; complex	YES
Radiation	77387	Guidance for localization of target volume for delivery of radiation treatment, includes intrafraction tracking, when performed	YES
Radiation	77399	RADIATION DOSIMETRY UNLISTED	YES
Radiation	77401	Radiation treatment delivery, superficial and/or ortho voltage, per day	YES
Radiation	77402	Radiation treatment delivery, > 1 MeV; simple	YES
Radiation	77407	Radiation treatment delivery, > 1 MeV; intermediate	YES
Radiation	77412	Radiation treatment delivery, > 1 MeV; complex	YES
Procedure - Oncology	77413	RADIATION TREATMENT DELIVERY	YES
Procedure - Oncology	77414	RADIATION TREATMENT DELIVERY	YES
Investigational Potential	77423	High energy neutron radiation treatment delivery; 1 or more isocenter(s) with coplanar or non-coplanar geometry with blocking and/or wedge, and/or compensator(s)	YES
Radiation	77424	Intraoperative Radiation Treatment Delivery, X-Ray, Single Treatment Session	YES
Radiation	77425	Intraoperative Radiation Treatment Delivery, Electrons, Single Treatment Session	YES
Radiation	77427	Radiation treatment management, 5 treatments	YES
Radiation	77431	Radiation therapy management with complete course of therapy consisting of 1 or 2 fractions only	YES
Radiation	77432	Stereotactic radiation treatment management of cranial lesion(s) (complete course of treatment consisting of 1 session)	YES

Radiation	77435	Stereotactic body radiation therapy, treatment management, per treatment course, to 1 or more lesions, including image guidance, entire course not to exceed 5 fractions	YES
Radiation	77469	Intraoperative radiation treatment management	YES
Radiation	77470	Special treatment procedure (eg, total body irradiation, hemibody radiation, per oral or endocavitary irradiation)	YES
Radiation	77499	RADIATION,MANGEMENT,THERAP-OTH	YES
Radiation	77520	Proton treatment delivery; simple without compensation	YES
Radiation	77522	Proton treatment delivery; simple with cpmensation	YES
Radiation	77523	Proton treatment delivery; Intermediate	YES
Radiation	77525	Proton treatment delivery; complex	YES
Radiation	77610	HYPERTHERMIA INTERN =<5 APPL	YES
Radiation	77615	HYPERTHERMIA INTERN >5 APPL	YES
Radiation	77620	HYPERTHERMIA RX INTRACAV PROBE	YES
Radiation	77761	Intracavitary radiation source application; Simple	YES
Radiation	77762	Intracavitary radiation source application; intermediate	YES
Radiation	77763	Intracavitary radiation source application; complex	YES
Radiation	77770	Remote afterloading high dose rate radionuclide interstitial or intracavitary brachytherapy, includes basic dosimetry, when performed; 1 channel [when specified as coronary intravascular brachytherapy]	YES
Radiation	77771	Remote afterloading high dose rate radionuclide interstitial or intracavitary brachytherapy, includes basic dosimetry, when performed; 2-12 channels [when specified as coronary intravascular brachytherapy]	YES
Radiation	77772	Remote afterloading high dose rate radionuclide interstitial or intracavitary brachytherapy, includes basic dosimetry, when performed; over 12 channels [when specified as coronary intravascular brachytherapy]	YES
Radiation	77778	Interstitial radioelement application; complex	YES
Radiation	77790	Supervision, handling, loading, radiation source	YES
Radiation	77799	RADIUM/RADIOISOTOPE THERAPY UNLIST	YES
Radiation	78099	ENDOCRINE NUCLEAR PROCEDURE	YES
Radiation	78199	BLOOD/LYMPH NUCLEAR EXAM UNLISTED	YES
Radiation	78299	GI NUCLEAR PROCEDURE UNLISTED	YES
Radiation	78399	MUSCULOSKELETAL NUCLEAR EXAM	YES
Advanced Imaging	78429	Myocardial imaging, positron emission tomography (PET), metabolic evaluation study (including ventricular wall motion[s] and/or ejection fraction[s], when performed), single study; with concurrently acquired computed tomography transmission scan	YES
Advanced Imaging	78430	Myocardial imaging, positron emission tomography (PET), perfusion study (including ventricular wall motion[s] and/or ejection fraction[s], when performed); single study, at rest or stress (exercise or pharmacologic), with concurrently acquired computed tomography transmission scan	YES
Advanced Imaging	78431	Myocardial imaging, positron emission tomography (PET), perfusion study (including ventricular wall motion[s] and/or ejection fraction[s], when performed); multiple studies at rest and stress (exercise or pharmacologic), with concurrently acquired computed tomography transmission scan	YES
Advanced Imaging	78432	Myocardial imaging, positron emission tomography (PET), combined perfusion with metabolic evaluation study (including ventricular wall motion[s] and/or ejection fraction[s], when performed), dual radiotracer (eg, myocardial viability)	YES

Advanced Imaging	78433	Myocardial imaging, positron emission tomography (PET), combined perfusion with metabolic evaluation study (including ventricular wall motion[s] and/or ejection fraction[s], when performed), dual radiotracer (eg, myocardial viability); with concurrently acquired computed tomography transmission scan	YES
Advanced Imaging	78451	Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); single study, at rest or stress (exercise or pharmacologic)	YES
Advanced Imaging	78452	Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or stress (exercise or pharmacologic) and/or redistribution and/or rest reinjection	YES
Advanced Imaging	78453	Myocardial perfusion imaging, planar (including qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); single study, at rest or stress (exercise or pharmacologic)	YES
Advanced Imaging	78454	Myocardial perfusion imaging, planar (including qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or stress (exercise or pharmacologic) and/or redistribution and/or rest reinjection	YES
Advanced Imaging	78459	PET myocardial, metabolic evaluation	YES
Advanced Imaging	78466	Planar, infarct avid; qualitative or quantitative	YES
Advanced Imaging	78468	Planar, infarct avid; with ejection fraction by first pass technique	YES
Advanced Imaging	78469	SPECT, infarct avid; with or without quantification	YES
Advanced Imaging	78472	Gated equilibrium; planar, single study, wall motion plus ejection fraction	YES
Advanced Imaging	78473	Gated equilibrium; planar, multiple studies, wall motion study plus ejection fraction	YES
Advanced Imaging	78481	First pass tech; single study, wall motion study plus ejection fraction	YES
Advanced Imaging	78483	First pass tech; multiple studies, wall motion study plus ejection fraction	YES
Advanced Imaging	78491	PET myocardial, perfusion, single study	YES
Advanced Imaging	78492	PET myocardial, perfusion, multiple studies	YES
Advanced Imaging	78494	Gated equilibrium, SPECT, at rest, wall motion study plus ejection fraction	YES
Advanced Imaging	78496	Add-on code used in conjunction with 78472 does not require separate review	Does not require PA - Add on code
Advanced Imaging	78499	CARDIOVASC NUCL EXAM UNLISTED	YES
Advanced Imaging	78599	RESP NUCLEAR EXAM UNLISTED	YES
Advanced Imaging	78608	PET brain, metabolic evaluation	YES
Advanced Imaging	78609	PET brain, perfusion evaluation	YES
Advanced Imaging	78699	NERV SYS NUCL EXAM UNLISTED	YES
Advanced Imaging	78799	GU NUCLEAR EXAM UNLISTED	YES
Advanced Imaging	78800	Radiopharmaceutical localization of tumor or distribution of radiopharmaceutical agent(s); limited area	NO
Advanced Imaging	78801	Radiopharmaceutical localization of tumor or distribution of radiopharmaceutical agent(s); multiple areas	NO

Advanced Imaging	78803	Radiopharmaceutical localization of tumor, inflammatory process or distribution of radiopharmaceutical agent(s) (includes vascular flow and blood pool imaging, when performed); tomographic (SPECT), single area (eg, head, neck, chest, pelvis), single day imaging	YES
Advanced Imaging	78811	PET imaging, limited	YES
Advanced Imaging	78812	PET imaging, skull to mid-thigh	YES
Advanced Imaging	78813	PET imaging, whole body	YES
Advanced Imaging	78814	PET imaging with concurrent CT, limited	YES
Advanced Imaging	78815	PET imaging with concurrent CT, skull to mid-thigh	YES
Advanced Imaging	78816	PET imaging with concurrent CT, whole body	YES
Investigational Potential	78999	Unlisted miscellaneous procedure, diagnostic nuclear medicine [when specified as mMR combination PET/MRI imaging]	YES
Pharmacy	79101	Radiopharmaceutical Therapy, By Intravenous Administration (Azedra, Xofigo)	YES
Pharmacy	79403	Radiopharmaceutical Therapy, Radiolabeled Monoclonal Antibody By Intravenous Infusion (Azedra)	YES
Procedure - Oncology	79445	Radiopharmaceutical therapy, by intra-arterial particulate administration [when specified as transcatheter tumor destruction procedure using yttrium-90 microspheres]	YES
Procedure - Oncology	79999	NUCLEAR THERAPY, UNLISTED	YES
Genetic Testing	80145	Adalimumab	NO
Genetic Testing	80220	DRUG ASSAY HYDROXYCHLOROQUINE	NO
Genetic Testing	80230	Infliximab	NO
Genetic Testing	80280	Vedolizumab	NO
Genetic Testing	80299	QUANTITATIVE ASSAY, DRUG	YES
Pain Management	80305	Drug test(s), presumptive, any number of drug classes, any number of devices or procedures; capable of being read by direct optical observation only (eg, utilizing immunoassay [eg, dipsticks, cups, cards, or cartridges]), includes sample validation when performed, per date of service	NO
Pain Management	80306	Drug test(s), presumptive, any number of drug classes, any number of devices or procedures; read by instrument assisted direct optical observation (eg, utilizing immunoassay [eg, dipsticks, cups, cards, or cartridges]), includes sample validation when performed, per date of service	NO
Pain Management	80307	Drug test(s), presumptive, any number of drug classes, any number of devices or procedures; by instrument chemistry analyzers (eg, utilizing immunoassay [eg, EIA, ELISA, EMIT, FPIA, IA, KIMS, RIA]), chromatography (eg, GC, HPLC), and mass spectrometry either with or without chromatography, (eg, DART, DESI, GC-MS, GC-MS/MS, LC-MS, LC-MS/MS, LDTD, MALDI, TOF) includes sample validation when performed, per date of service	NO
Surgical - Misc.	80503	PATHOLOGY CLINICAL CONSULTATION SF MDM 5-20 MIN	NO
Surgical - Misc.	80504	PATHOLOGY CLINICAL CONSULTATION MOD MDM 21-40MIN	NO
Surgical - Misc.	80505	PATHOLOGY CLINICAL CONSULTATION HI MDM 41-60 MIN	NO
Surgical - Misc.	80506	PATHOLOGY CLINICAL CONSLTN PROLNG SVC EA ADDL 30	NO
Genetic Testing	81099	URINALYSIS TEST PROCEDURE	YES
Genetic Testing	81105	HPA-1 GENOTYPING GENE ANALYSIS COMMON VARIANT	YES
Genetic Testing	81106	HPA-2 GENOTYPING GENE ANALYSIS COMMON VARIANT	YES
Genetic Testing	81107	HPA-3 GENOTYPING GENE ANALYSIS COMMON VARIANT	YES
Genetic Testing	81108	HPA-4 GENOTYPING GENE ANALYSIS COMMON VARIANT	YES
Genetic Testing	81109	HPA-5 GENOTYPING GENE ANALYSIS COMMON VARIANT	YES
Genetic Testing	81110	HPA-6 GENOTYPING GENE ANALYSIS COMMON VARIANT	YES

Genetic Testing	81111	HPA-9 GENOTYPING GENE ANALYSIS COMMON VARIANT	YES
Genetic Testing	81112	HPA-15 GENOTYPING GENE ANALYSIS COMMON VARIANT	YES
Genetic Testing	81120	IDH1 (isocitrate dehydrogenase 1 [NADP+], soluble) (eg, glioma), common variants (eg, R132H, R132C)	YES
Genetic Testing	81121	IDH2 (isocitrate dehydrogenase 2 [NADP+], mitochondrial) (eg, glioma), common variants (eg, R140W, R172M)	YES
Genetic Testing	81161	DMD (dystrophin) (eg, Duchenne/Becker muscular dystrophy) deletion analysis, and duplication analysis, if performed	YES
Genetic Testing	81162	(BRCA1, BRCA2 (breast cancer 1 and 2) (eg, hereditary breast and ovarian cancer) gene analysis; full sequence analysis and full duplication/deletion analysis)	YES
Genetic Testing	81163	BRCA1 (BRCA1, DNA repair associated), BRCA2 (BRCA2, DNA repair associated) (eg, hereditary breast and ovarian cancer) gene analysis; full sequence analysis	YES
Genetic Testing	81164	BRCA1 (BRCA1, DNA repair associated), BRCA2 (BRCA2, DNA repair associated) (eg, hereditary breast and ovarian cancer) gene analysis; full duplication/deletion analysis (ie, detection of large gene rearrangements)	YES
Genetic Testing	81165	BRCA1 (BRCA1, DNA repair associated) (eg, hereditary breast and ovarian cancer) gene analysis; full sequence analysis	YES
Genetic Testing	81166	BRCA1 (BRCA1, DNA repair associated) (eg, hereditary breast and ovarian cancer) gene analysis; full duplication/deletion analysis (ie, detection of large gene rearrangements)	YES
Genetic Testing	81167	BRCA2 (BRCA2, DNA repair associated) (eg, hereditary breast and ovarian cancer) gene analysis; full duplication/deletion analysis (ie, detection of large gene rearrangements)	YES
Genetic Testing	81168	CCND1/IGH TRANSLOCATION ALYS MAJOR BP QUAL AND QUAN	YES
Genetic Testing	81170	(ABL1 (ABL proto-oncogene 1, non-receptor tyrosine kinase) (eg, acquired imatinib tyrosine kinase inhibitor resistance), gene analysis, variants in the kinase domain)	YES
Genetic Testing	81171	AFF2 (AF4/FMR2 family, member 2 [FMR2]) (eg, fragile X mental retardation 2 [FRAXE]) gene analysis; evaluation to detect abnormal (eg, expanded) alleles	YES
Genetic Testing	81172	AFF2 (AF4/FMR2 family, member 2 [FMR2]) (eg, fragile X mental retardation 2 [FRAXE]) gene analysis; characterization of alleles (eg, expanded size and methylation status)	YES
Genetic Testing	81173	AR (androgen receptor) (eg, spinal and bulbar muscular atrophy, Kennedy disease, X chromosome inactivation) gene analysis; full gene sequence	YES
Genetic Testing	81174	AR (androgen receptor) (eg, spinal and bulbar muscular atrophy, Kennedy disease, X chromosome inactivation) gene analysis; known familial variant	YES
Genetic Testing	81175	ASXL1 (additional sex combs like 1, transcriptional regulator) (eg, myelodysplastic syndrome, myeloproliferative neoplasms, chronic myelomonocytic leukemia), gene analysis; full gene sequence	YES
Genetic Testing	81176	ASXL1 (additional sex combs like 1, transcriptional regulator) (eg, myelodysplastic syndrome, myeloproliferative neoplasms, chronic myelomonocytic leukemia), gene analysis; targeted sequence analysis (eg exon 12)	YES
Genetic Testing	81177	ATNI (atrophin1) (eg, dentatorubral-pallidoluysian atrophy) gene analysis, evaluation to detect abnormal (eg, expanded) alleles	YES
Genetic Testing	81178	ATXNI (ataxin 1) (eg, spinocerebellar ataxia) gene analysis, evaluation to detect abnormal (eg, expanded) alleles	YES

Genetic Testing	81179	ATXN2 (ataxin 2) (eg, spinocerebellar ataxia) gene analysis, evaluation to detect abnormal (eg, expanded) alleles	YES
Genetic Testing	81180	ATXN3 (ataxin 3) (eg, spinocerebellar ataxia, Machado-Joseph disease) gene analysis, evaluation to detect abnormal (eg, expanded) alleles	YES
Genetic Testing	81181	ATXN7 (ataxin 7) (eg, spinocerebellar ataxia) gene analysis, evaluation to detect abnormal (eg, expanded) alleles	YES
Genetic Testing	81182	ATXN8OS (ataxin 8 opposite strand [non-protein coding]) (eg, spinocerebellar ataxia) gene analysis, evaluation to detect abnormal (eg, expanded) alleles	YES
Genetic Testing	81183	ATXN10 (ataxin 10) (eg, spinocerebellar ataxia) gene analysis, evaluation to detect abnormal (eg, expanded) alleles	YES
Genetic Testing	81184	CACNA1A (calcium voltage-gated channel subunit alpha 1A) (eg, spinocerebellar ataxia) gene analysis; evaluation to detect abnormal (eg, expanded) alleles	YES
Genetic Testing	81185	CACNA1A (calcium voltage-gated channel subunit alpha 1A) (eg, spinocerebellar ataxia) gene analysis; full gene sequence	YES
Genetic Testing	81186	CACNA1A (calcium voltage-gated channel subunit alpha 1A) (eg, spinocerebellar ataxia) gene analysis; known familial variant	YES
Genetic Testing	81187	CNBP (CCHC-type zinc finger nucleic acid binding protein) (eg, myotonic dystrophy type 2) gene analysis, evaluation to detect abnormal (eg, expanded alleles)	YES
Genetic Testing	81188	CSTB (cystatin B) (eg, Unverricht-Lundborg disease) gene analysis; evaluation to detect abnormal (eg, expanded) alleles	YES
Genetic Testing	81189	CSTB (cystatin B) (eg, Unverricht-Lundborg disease) gene analysis; full gene sequence	YES
Genetic Testing	81190	CSTB (cystatin B) (eg, Unverricht-Lundborg disease) gene analysis; known familial variant(s)	YES
Genetic Testing	81191	NTRK1 (neurotrophic receptor tyrosine kinase 1) (eg, solid tumors) translocation analysis	YES
Genetic Testing	81192	NTRK2 (neurotrophic receptor tyrosine kinase 2) (eg, solid tumors) translocation analysis	YES
Genetic Testing	81193	NTRK3 (neurotrophic receptor tyrosine kinase 3) (eg, solid tumors) translocation analysis	YES
Genetic Testing	81194	NTRK (neurotrophic-tropomyosin receptor tyrosine kinase 1, 2, and 3) (eg, solid tumors) translocation analysis	YES
Genetic Testing	81200	ASPA (aspartoacylase) (eg, Canavan disease) gene analysis, common variants (eg, E285A, Y231X)	YES
Genetic Testing	81201	APC (adenomatous polyposis coli) (eg, familial adenomatous polyposis [FAP], attenuated FAP) gene analysis; full gene sequence	YES
Genetic Testing	81202	APC (adenomatous polyposis coli) (eg, familial adenomatous polyposis [FAP], attenuated FAP) gene analysis; known familial variants	YES
Genetic Testing	81203	APC (adenomatous polyposis coli) (eg, familial adenomatous polyposis [FAP], attenuated FAP) gene analysis; duplication/deletion variants	YES
Genetic Testing	81204	AR (androgen receptor) (eg, spinal and bulbar muscular atrophy, Kennedy disease, X chromosome inactivation) gene analysis; characterization of alleles (eg, expanded size or methylation status)	YES
Genetic Testing	81205	BCKDHB (branched-chain keto acid dehydrogenase E1, beta polypeptide) (eg, maple syrup urine disease) gene analysis, common variants (eg, R183P, G278S, E422X)	YES

Genetic Testing	81206	BCR/ABL1 (t(9;22)) (eg, chronic myelogenous leukemia) translocation analysis; major breakpoint, qualitative or quantitative	YES
Genetic Testing	81207	BCR/ABL1 (t(9;22)) (eg, chronic myelogenous leukemia) translocation analysis; minor breakpoint, qualitative or quantitative	YES
Genetic Testing	81208	BCR/ABL1 (t(9;22)) (eg, chronic myelogenous leukemia) translocation analysis; other breakpoint, qualitative or quantitative	YES
Genetic Testing	81209	BLM (Bloom syndrome, RecQ helicase-like) (eg, Bloom syndrome) gene analysis, 2281del6ins7 variant	YES
Genetic Testing	81210	BRAF (v-raf murine sarcoma viral oncogene homolog B1) (eg, colon cancer), gene analysis, V600E variant	YES
Genetic Testing	81212	BRCA1 (BRCA1, DNA repair associated), BRCA2 (BRCA2, DNA repair associated) (eg, hereditary breast and ovarian cancer) gene analysis; 185delAG, 5385insC, 6174delT variants	YES
Genetic Testing	81215	BRCA1 (BRCA1, DNA repair associated) (eg, hereditary breast and ovarian cancer) gene analysis; known familial variant	YES
Genetic Testing	81216	BRCA2 (BRCA2, DNA repair associated) (eg, hereditary breast and ovarian cancer) gene analysis; full sequence analysis	YES
Genetic Testing	81217	BRCA2 (BRCA2, DNA repair associated) (eg, hereditary breast and ovarian cancer) gene analysis; known familial variant	YES
Genetic Testing	81218	CEBPA (CCAAT/enhancer binding protein [C/EBP], alpha) (eg, acute myeloid leukemia), full gene sequence	YES
Genetic Testing	81219	CALR (calreticulin) (eg, myeloproliferative disorders), gene analysis, common variants in exon 9	YES
Genetic Testing	81220	CFTR GENE ANALYSIS COMMON VARIANTS	YES
Genetic Testing	81221	CFTR (cystic fibrosis transmembrane conductance regulator) (eg, cystic fibrosis) gene analysis; known familial variants	YES
Genetic Testing	81222	CFTR (cystic fibrosis transmembrane conductance regulator) (eg, cystic fibrosis) gene analysis; duplication/deletion variants	YES
Genetic Testing	81223	CFTR (cystic fibrosis transmembrane conductance regulator) (eg, cystic fibrosis) gene analysis; full gene sequence	YES
Genetic Testing	81224	CFTR (cystic fibrosis transmembrane conductance regulator) (eg, cystic fibrosis) gene analysis; intron 8 poly-T analysis (eg, male infertility)	YES
Genetic Testing	81225	CYP2C19 (cytochrome P450, family 2, subfamily C, polypeptide 19) (eg, drug metabolism), gene analysis, common variants (eg, *2, *3, *4, *8, *17)	YES
Genetic Testing	81226	CYP2D6 (cytochrome P450, family 2, subfamily D, polypeptide 6) (eg, drug metabolism), gene analysis, common variants (eg, *2, *3, *4, *5, *6, *9, *10, *17, *19, *29, *35, *41, *1XN, *2XN, *4XN)	YES
Genetic Testing	81227	CYP2C9 (cytochrome P450, family 2, subfamily C, polypeptide 9) (eg, drug metabolism), gene analysis, common variants (eg, *2, *3, *5, *6)	YES
Genetic Testing	81228	Cytogenomic (genome-wide) analysis for constitutional chromosomal abnormalities; interrogation of genomic regions for copy number variants, comparative genomic hybridization (CGH) microarray analysis	YES
Genetic Testing	81229	Cytogenomic (genome-wide) analysis for constitutional chromosomal abnormalities; interrogation of genomic regions for copy number and single nucleotide polymorphism (SNP) variants, comparative genomic hybridization (CGH) microarray analysis	YES
Genetic Testing	81230	CYP3A4 (cytochrome P450 family 3 subfamily A member 4) (eg, drug metabolism), gene analysis, common variant(s) (eg, *2, *22)	NO
Genetic Testing	81231	CYP3A5 (cytochrome P450 family 3 subfamily A member 5) (eg, drug metabolism), gene analysis, common variants (eg, *2, *3, *4, *5, *6, *7)	NO

Genetic Testing	81232	DPYD (dihydropyrimidine dehydrogenase) (eg, 5- fluorouracil/5-FU and capecitabine drug metabolism), gene analysis, common variant(s) (eg, *2A, *4, *5, *6)	YES
Genetic Testing	81233	BTK (Bruton's tyrosine kinase) (eg, chronic lymphocytic leukemia) gene analysis, common variants (eg, C481S, C481R, C481F)	YES
Genetic Testing	81234	DMPK (DM1 protein kinase) (eg, myotonic dystrophy type 1) gene analysis; evaluation to detect abnormal (expanded) alleles	YES
Genetic Testing	81235	EGFR (epidermal growth factor receptor) (eg, non- small cell lung cancer) gene analysis, common variants (eg, exon 19 LREA deletion, L858R, T790M, G719A, G719S, L861Q)	YES
Genetic Testing	81236	EZH2 (enhancer of zeste 2 polycomb repressive complex 2 subunit) (eg, myelodysplastic syndrome, myeloproliferative neoplasms) gene analysis, full gene sequence	YES
Genetic Testing	81237	EZH2 (enhancer of zeste 2 polycomb repressive complex 2 subunit) (eg, diffuse large B-cell lymphoma) gene analysis, common variant(s) (eg, codon 646)	YES
Genetic Testing	81238	F9 FULL GENE SEQUENCE	NO
Genetic Testing	81239	DMPK (DM1 protein kinase) (eg, myotonic dystrophy type 1) gene analysis; characterization of alleles (eg, expanded size)	YES
Genetic Testing	81240	F2 (prothrombin, coagulation factor II) (eg, hereditary hypercoagulability) gene analysis, 20210G>A variant	YES
Genetic Testing	81241	F5 (coagulation factor V) (eg, hereditary hypercoagulability) gene analysis, Leiden variant	YES
Genetic Testing	81242	FANCC (Fanconi anemia, complementation group C) (eg, Fanconi anemia, type C) gene analysis, common variant (eg, IVS4+4A>T)	YES
Genetic Testing	81243	Fmr1 (Fragile X Mental Retardation 1) (Eg, Fragile X Mental Retardation) Gene Analysis; Evaluation To Detect Abnormal (Eg, Expanded) Alleles	YES
Genetic Testing	81244	FMRI (fragile X mental retardation 1) (eg, fragile X mental retardation) gene analysis; characterization of alleles (eg, expanded size and promoter methylation status)	YES
Genetic Testing	81245	Flt3 (Fms-Related Tyrosine Kinase 3) (Eg, Acute Myeloid Leukemia), Gene Analysis, Internal Tandem Duplication (Ita) Variants (Ie, Exons 14, 15)	YES
Genetic Testing	81246	FLT3 (fms-related tyrosine kinase 3) (eg, acute myeloid leukemia), gene analysis; tyrosine kinase domain (TKD) variants (eg, D835, I836)	YES
Genetic Testing	81250	G6PC (glucose-6-phosphatase, catalytic subunit) (eg, Glycogen storage disease, type 1a, von Gierke disease) gene analysis, common variants (eg, R83C, Q347X)	YES
Genetic Testing	81251	GBA (glucosidase, beta, acid) (eg, Gaucher disease) gene analysis, common variants (eg, N370S, 84GG, L444P, IVS2+1G>A)	YES
Genetic Testing	81252	GJB2 (gap junction protein, beta 2, 26kDa, connexin 26) (eg, nonsyndromic hearing loss) gene analysis; full gene sequence	YES
Genetic Testing	81253	GJB2 (gap junction protein, beta 2, 26kDa, connexin 26) (eg, nonsyndromic hearing loss) gene analysis; known familial variants	YES
Genetic Testing	81254	GJB6 (gap junction protein, beta 6, 30kDa, connexin 30) (eg, nonsyndromic hearing loss) gene analysis, common variants (eg, 309kb [del(GJB6-D13S1830)] and 232kb [del(GJB6-D13S1854)])	YES
Genetic Testing	81255	HEXA (hexosaminidase A [alpha polypeptide]) (eg, Tay-Sachs disease) gene analysis, common variants (eg, 1278insTATC, 1421+1G>C, G269S)	YES
Genetic Testing	81256	HFE (hemochromatosis) (eg, hereditary hemochromatosis) gene analysis, common variants (eg, C282Y, H63D)	YES

Genetic Testing	81257	HBA1/HBA2 (alpha globin 1 and alpha globin 2) (eg, alpha thalassemia, Hb Bart hydrops fetalis syndrome, HbH disease), gene analysis, for common deletions or variant (eg, Southeast Asian, Thai, Filipino, Mediterranean, alpha3.7, alpha4.2, alpha20.5, and Constant Spring)	YES
Genetic Testing	81258	HBA1/HBA2 (alpha globin 1 and alpha globin 2) (eg, alpha thalassemia, Hb Bart hydrops fetalis syndrome, HbH disease), gene analysis; known familial variant	YES
Genetic Testing	81259	HBA1/HBA2 (alpha globin 1 and alpha globin 2) (eg, alpha thalassemia, Hb Bart hydrops fetalis syndrome, HbH disease), gene analysis; full gene sequence	YES
Genetic Testing	81260	IKBKAP (inhibitor of kappa light polypeptide gene enhancer in B-cells, kinase complex-associated protein) (eg, familial dysautonomia) gene analysis, common variants (eg, 2507+6T>C, R696P)	YES
Genetic Testing	81261	IGH@ REARRANGE ABNORMAL CLONAL POP AMPLIFIED	YES
Genetic Testing	81262	IGH@ REARRANGE ABNORMAL CLONAL POP DIRECT PROBE	YES
Genetic Testing	81263	IGH@ VARIABLE REGION SOMATIC MUTATION ANALYSIS	YES
Genetic Testing	81264	IGK@ GENE REARRANGE DETECT ABNORMAL CLONAL POP	YES
Genetic Testing	81265	Comparative analysis using Short Tandem Repeat (STR) markers; patient and comparative specimen (eg, pre-transplant recipient and donor germline testing, post-transplant non-hematopoietic recipient germline [eg, buccal swab or other germline tissue sample] and donor testing, twin zygosity testing, or maternal cell contamination of fetal cells) [when specified as a specimen provenance assay such as know error DSPA]	YES
Genetic Testing	81266	Comparative analysis using Short Tandem Repeat (STR) markers; each additional specimen (eg, additional cord blood donor, additional fetal samples from different cultures, or additional zygosity in multiple birth pregnancies) [when specified as a specimen provenance assay such as know error DSPA]	YES
Genetic Testing	81267	CHIMERISM W/COMP TO BASELINE W/O CELL SELECTION	YES
Genetic Testing	81268	CHIMERISM W/COMP TO BASELINE W/CELL SELECTION EA	YES
Genetic Testing	81269	HBA1/HBA2 (alpha globin 1 and alpha globin 2) (eg, alpha thalassemia, Hb Bart hydrops fetalis syndrome, HbH disease), gene analysis; duplication/deletion variants	YES
Genetic Testing	81270	JAK2 (Janus kinase 2) (eg, myeloproliferative disorder) gene analysis, p.Val617Phe (V617F) variant	YES
Genetic Testing	81271	HTT (huntingtin) (eg, Huntington disease) gene analysis; evaluation to detect abnormal (eg, expanded) alleles	YES
Genetic Testing	81272	KIT (v-kit Hardy-Zuckerman 4 feline sarcoma viral oncogene homolog) (eg, gastrointestinal stromal tumor [GIST], acute myeloid leukemia, melanoma), gene analysis, targeted sequence analysis (eg, exons 8, 11, 13, 17, 18)	YES
Genetic Testing	81273	KIT (v-kit Hardy-Zuckerman 4 feline sarcoma viral oncogene homolog) (eg, mastocytosis), gene analysis, D816 variant(s)	YES
Genetic Testing	81274	HTT (huntingtin) (eg, Huntington disease) gene analysis; characterization of alleles (eg, expanded size)	YES
Genetic Testing	81275	KRAS (v-Ki-ras2 Kirsten rat sarcoma viral oncogene) (eg, carcinoma) gene analysis, variants in codons 12 and 13	YES
Genetic Testing	81276	(KRAS (Kirsten rat sarcoma viral oncogene homolog) (eg, carcinoma) gene analysis; additional variant(s) (eg, codon 61, codon 146))	YES
Genetic Testing	81278	IGH@/BCL2 TRANSLOCATION ALYS MBR AND MCR BP QUAL/QUAN	YES

Genetic Testing	81279	JAK2 (Janus kinase 2) (eg, myeloproliferative disorder) targeted sequence analysis (eg, exons 12 and 13)	YES
Genetic Testing	81283	IFNL3 GENE ANALYSIS RS12979860 VARIANT	YES
Genetic Testing	81284	FXN (frataxin) (eg, Friedreich ataxia) gene analysis; evaluation to detect abnormal (expanded) alleles	YES
Genetic Testing	81285	FXN (frataxin) (eg, Friedreich ataxia) gene analysis; characterization of alleles (eg, expanded size)	YES
Genetic Testing	81286	FXN (frataxin) (eg, Friedreich ataxia) gene analysis; full gene sequence	YES
Genetic Testing	81287	MGMT METHYLATION ANALYSIS	YES
Genetic Testing	81288	MLH1 (mutL homolog 1, colon cancer, nonpolyposis type 2) (eg, hereditary nonpolyposis colorectal cancer, Lynch syndrome) gene analysis; promoter methylation analysis	YES
Genetic Testing	81289	FXN (frataxin) (eg, Friedreich ataxia) gene analysis; known familial variant(s)	YES
Genetic Testing	81290	MCOLN1 (mucopolin 1) (eg, Mucopolipidosis, type IV) gene analysis, common variants (eg, IVS3-2A>G, del6.4kb)	YES
Genetic Testing	81291	MTHFR (5,10-methylenetetrahydrofolate reductase) (eg, hereditary hypercoagulability) gene analysis, common variants (eg, 677T, 1298C)	YES
Genetic Testing	81292	MLH1 (mutL homolog 1, colon cancer, nonpolyposis type 2) (eg, hereditary non-polyposis colorectal cancer, Lynch syndrome) gene analysis; full sequence analysis	YES
Genetic Testing	81293	MLH1 (mutL homolog 1, colon cancer, nonpolyposis type 2) (eg, hereditary non-polyposis colorectal cancer, Lynch syndrome) gene analysis; known familial variants	YES
Genetic Testing	81294	MLH1 (mutL homolog 1, colon cancer, nonpolyposis type 2) (eg, hereditary non-polyposis colorectal cancer, Lynch syndrome) gene analysis; duplication/deletion variants	YES
Genetic Testing	81295	MSH2 (mutS homolog 2, colon cancer, nonpolyposis type 1) (eg, hereditary non-polyposis colorectal cancer, Lynch syndrome) gene analysis; full sequence analysis	YES
Genetic Testing	81296	MSH2 (mutS homolog 2, colon cancer, nonpolyposis type 1) (eg, hereditary non-polyposis colorectal cancer, Lynch syndrome) gene analysis; known familial variants	YES
Genetic Testing	81297	MSH2 (mutS homolog 2, colon cancer, nonpolyposis type 1) (eg, hereditary non-polyposis colorectal cancer, Lynch syndrome) gene analysis; duplication/deletion variants	YES
Genetic Testing	81298	MSH6 (mutS homolog 6 [E. coli]) (eg, hereditary non-polyposis colorectal cancer, Lynch syndrome) gene analysis; full sequence analysis	YES
Genetic Testing	81299	MSH6 (mutS homolog 6 [E. coli]) (eg, hereditary non-polyposis colorectal cancer, Lynch syndrome) gene analysis; known familial variants	YES
Genetic Testing	81300	MSH6 (mutS homolog 6 [E. coli]) (eg, hereditary non-polyposis colorectal cancer, Lynch syndrome) gene analysis; duplication/deletion variants	YES
Genetic Testing	81301	MICROSATELLITE INSTAB ANAL MISMATCH REPAIR DEF	YES
Genetic Testing	81302	MECP2 (methyl CpG binding protein 2) (eg, Rett syndrome) gene analysis; full sequence analysis	YES
Genetic Testing	81303	MECP2 (methyl CpG binding protein 2) (eg, Rett syndrome) gene analysis; known familial variant	YES
Genetic Testing	81304	MECP2 (methyl CpG binding protein 2) (eg, Rett syndrome) gene analysis; duplication/deletion variants	YES
Genetic Testing	81305	MYD88 GENE ANALYSIS P.LEU265 (L265P) VARIANT	YES

Genetic Testing	81307	PALB2 (partner and localizer of BRCA2) (eg, breast and pancreatic cancer) gene analysis; full gene sequence	YES
Genetic Testing	81308	PALB2 (partner and localizer of BRCA2) (eg, breast and pancreatic cancer) gene analysis; known familial variant	YES
Genetic Testing	81309	PIK3CA (phosphatidylinositol-4, 5-biphosphate 3- kinase, catalytic subunit alpha) (eg, colorectal and breast cancer) gene analysis, targeted sequence analysis (eg, exons 7, 9, 20)	YES
Genetic Testing	81310	NPM1 (nucleophosmin) (eg, acute myeloid leukemia) gene analysis, exon 12 variants	YES
Genetic Testing	81311	NRAS (neuroblastoma RAS viral [v-ras] oncogene homolog) (eg, colorectal carcinoma), gene analysis, variants in exon 2 (eg, codons 12 and 13) and exon 3 (eg, codon 61)	YES
Genetic Testing	81312	PABPN1 (poly[A] binding protein nuclear 1) (eg, oculopharyngeal muscular dystrophy) gene analysis, evaluation to detect abnormal (eg, expanded) alleles	YES
Genetic Testing	81313	PCA3/KLK3 (prostate cancer antigen 3 [non-protein coding]/kallikrein-related peptidase 3 [prostate specific antigen]) ratio (eg, prostate cancer)	NO
Genetic Testing	81314	PDGFRA (platelet-derived growth factor receptor, alpha polypeptide) (eg, gastrointestinal stromal tumor [GIST]), gene analysis, targeted sequence analysis (eg, exons 12, 18)	YES
Genetic Testing	81315	PML/RARalpha, (t(15;17)), (promyelocytic leukemia/retinoic acid receptor alpha) (eg, promyelocytic leukemia) translocation analysis; common breakpoints (eg, intron 3 and intron 6), qualitative or quantitative	YES
Genetic Testing	81316	PML/RARalpha, (t(15;17)), (promyelocytic leukemia/retinoic acid receptor alpha) (eg, promyelocytic leukemia) translocation analysis; single breakpoint (eg, intron 3, intron 6 or exon 6), qualitative or quantitative	YES
Genetic Testing	81317	PMS2 (postmeiotic segregation increased 2 [S. cerevisiae]) (eg, hereditary non-polyposis colorectal cancer, Lynch syndrome) gene analysis; full sequence analysis	YES
Genetic Testing	81318	PMS2 (postmeiotic segregation increased 2 [S. cerevisiae]) (eg, hereditary non-polyposis colorectal cancer, Lynch syndrome) gene analysis; known familial variants	YES
Genetic Testing	81319	PMS2 (postmeiotic segregation increased 2 [S. cerevisiae]) (eg, hereditary non-polyposis colorectal cancer, Lynch syndrome) gene analysis; duplication/deletion variants	YES
Genetic Testing	81320	PLCG2 (phospholipase C gamma 2) (eg, chronic lymphocytic leukemia) gene analysis, common variants (eg, R665W, S707F, L845F)	YES
Genetic Testing	81321	PTEN (phosphatase and tensin homolog) (eg, Cowden syndrome, PTEN hamartoma tumor syndrome) gene analysis; full sequence analysis	YES
Genetic Testing	81322	PTEN (phosphatase and tensin homolog) (eg, Cowden syndrome, PTEN hamartoma tumor syndrome) gene analysis; known familial variant	YES
Genetic Testing	81323	PTEN (phosphatase and tensin homolog) (eg, Cowden syndrome, PTEN hamartoma tumor syndrome) gene analysis; duplication/deletion variant	YES
Genetic Testing	81324	PMP22 (peripheral myelin protein 22) (eg, Charcot- Marie-Tooth, hereditary neuropathy with liability to pressure palsies) gene analysis; duplication/deletion analysis	YES

Genetic Testing	81325	PMP22 (peripheral myelin protein 22) (eg, Charcot- Marie-Tooth, hereditary neuropathy with liability to pressure palsies) gene analysis; full sequence analysis	YES
Genetic Testing	81326	PMP22 (peripheral myelin protein 22) (eg, Charcot- Marie-Tooth, hereditary neuropathy with liability to pressure palsies) gene analysis; familial variant	YES
Genetic Testing	81328	SLCO1B1 (solute carrier organic anion transporter family, member 1B1) (eg, adverse drug reaction), gene analysis, common variant(s) (eg, *5)	NO
Genetic Testing	81330	SMPDI(sphingomyelin phosphodiesterase 1, acid lysosomal) (eg, Niemann-Pick disease, Type A) gene analysis, common variants (eg, R496L, L302P, fsP330)	YES
Genetic Testing	81331	SNRPN/UBE3A (small nuclear ribonucleoprotein polypeptide N and ubiquitin protein ligase E3A) (eg, Prader-Willi syndrome and/or Angelman syndrome), methylation analysis	YES
Genetic Testing	81332	SERPINA1 (serpin peptidase inhibitor, clade A, alpha- 1 antiproteinase, antitrypsin, member 1) (eg, alpha- 1-antitrypsin deficiency), gene analysis, common variants (eg, *S and *Z)	YES
Genetic Testing	81333	TGFBI (transforming growth factor beta-induced) (eg, corneal dystrophy) gene analysis, common variants (eg, R124H, R124C, R124L, R555W, R555Q)	YES
Genetic Testing	81334	RUNX1 (runt related transcription factor 1) (eg, acute myeloid leukemia, familial platelet disorder with associated myeloid malignancy), gene analysis, targeted sequence analysis (eg, exons 3-8)	YES
Genetic Testing	81336	SMN1 (survival of motor neuron 1, telomeric) (eg, spinal muscular atrophy) gene analysis; full gene sequence	YES
Genetic Testing	81337	SMN1 (survival of motor neuron 1, telomeric) (eg, spinal muscular atrophy) gene analysis; known familial sequence variant(s)	YES
Genetic Testing	81338	MPL (MPL proto-oncogene, thrombopoietin receptor) (eg, myeloproliferative disorder) gene analysis; common variants (eg, W515A, W515K, W515L, W515R)	YES
Genetic Testing	81339	MPL (MPL proto-oncogene, thrombopoietin receptor) (eg, myeloproliferative disorder) gene analysis; sequence analysis, exon 10	YES
Genetic Testing	81340	TRB@ REARRANGEMENT ANAL AMPLIFICATION METHOD	YES
Genetic Testing	81341	TRB@ REARRANGEMENT ANAL DIRECT PROBE METHODOLOGY	YES
Genetic Testing	81342	TRG@ GENE REARRANGEMENT ANALYSIS	YES
Genetic Testing	81343	Hereditary breast cancer-related disorders (eg, hereditary breast cancer, hereditary ovarian cancer, hereditary endometrial cancer); duplication/deletion analysis panel, must include analyses for BRCA1, BRCA2, MLH1, MSH2, and STK11	YES
Genetic Testing	81344	TBP (TATA box binding protein) (eg, spinocerebellar ataxia) gene analysis, evaluation to detect abnormal (eg, expanded) alleles	YES
Genetic Testing	81345	TERT GENE ANALYSIS TARGETED SEQUENCE ANALYSIS	YES
Genetic Testing	81346	TYMS (thymidylate synthetase) (eg, 5-fluorouracil/ 5- FU drug metabolism), gene analysis, common variant(s) (eg, tandem repeat variant)	YES
Genetic Testing	81347	SF3B1 (splicing factor [3b] subunit B1) (eg, myelodysplastic syndrome/acute myeloid leukemia) gene analysis, common variants (eg, A672T, E622D, L833F R625C R625L)	YES
Genetic Testing	81348	SRSF2 (serine and arginine-rich splicing factor 2) (eg, myelodysplastic syndrome, acute myeloid leukemia) gene analysis, common variants (eg, P95H P95L)	YES
Genetic Testing	81349	Cytogenomic (genome-wide) analysis for constitutional chromosomal abnormalities; interrogation of genomic regions for copy number and loss-of-heterozygosity variants, low-pass sequencing analysis	YES

Genetic Testing	81350	UGT1A1 (UDP glucuronosyltransferase 1 family, polypeptide A1) (eg, irinotecan metabolism), gene analysis, common variants (eg, *28, *36, *37)	YES
Genetic Testing	81351	TP53 (tumor protein 53) (eg, Li-Fraumeni syndrome) gene analysis; full gene sequence	YES
Genetic Testing	81352	TP53 (tumor protein 53) (eg, Li-Fraumeni syndrome) gene analysis; targeted sequence analysis (eg, 4 oncology)	YES
Genetic Testing	81353	TP53 (tumor protein 53) (eg, Li-Fraumeni syndrome) gene analysis; known familial variant	YES
Genetic Testing	81355	VKORC1 (vitamin K epoxide reductase complex, subunit 1) (eg, warfarin metabolism), gene analysis, common variants (eg, -1639/3673)	NO
Genetic Testing	81357	U2AF1 (U2 small nuclear RNA auxiliary factor 1) (eg, myelodysplastic syndrome, acute myeloid leukemia) gene analysis, common variants (eg, S34F, S34Y, Q157R, Q157P)	YES
Genetic Testing	81360	ZRSR2 (zinc finger CCCH-type, RNA binding motif and serine/arginine-rich 2) (eg, myelodysplastic syndrome, acute myeloid leukemia) gene analysis, common variant(s) (eg, E65fs, E122fs, R448fs)	YES
Genetic Testing	81361	HBB (hemoglobin, subunit beta) (eg, sickle cell anemia, beta thalassemia, hemoglobinopathy); common variant(s) (eg, HbS, HbC, HbE)	YES
Genetic Testing	81362	HBB (hemoglobin, subunit beta) (eg, sickle cell anemia, beta thalassemia, hemoglobinopathy); known familial variant(s)	YES
Genetic Testing	81363	HBB (hemoglobin, subunit beta) (eg, sickle cell anemia, beta thalassemia, hemoglobinopathy); duplication/deletion variant(s)	YES
Genetic Testing	81364	HBB (hemoglobin, subunit beta) (eg, sickle cell anemia, beta thalassemia, hemoglobinopathy); full gene sequence	YES
Genetic Testing	81370	HLA CLASS I&II LOW HLA-A -B -C -DRB1/3/4/5&-DQB1	YES
Genetic Testing	81371	HLA I&II LOW RESOLUTION HLA-A -B&-DRB1/3/4/5	YES
Genetic Testing	81373	HLA CLASS I TYPING LOW RESOLUTION ONE LOCUS EACH	YES
Genetic Testing	81375	HLA II LOW RESOLUTION HLA-DRB1/3/4/5 AND -DQB1	YES
Genetic Testing	81376	HLA CLASS II TYPING LOW RESOLUTION ONE LOCUS EA	YES
Genetic Testing	81377	HLA II LOW RESOLUTION ONE ANTIGEN EQUIVALENT EA	YES
Genetic Testing	81378	HLA I&II HIGH RESOLUTION HLA-A -B -C AND -DRB1	YES
Genetic Testing	81379	HLA CLASS I TYPING HIGH RESOLUTION COMPLETE	YES
Genetic Testing	81380	HLA CLASS I TYPING HIGH RESOLUTION ONE LOCUS EA	YES
Genetic Testing	81381	HLA Class I typing, high resolution (ie, alleles or allele groups); one allele or allele group (eg, B*57:01P), each	YES
Genetic Testing	81382	HLA CLASS II TYPING HIGH RESOLUTION ONE LOCUS EA	YES
Genetic Testing	81383	HLA II HIGH RESOLUTION 1 ALLELE/ALLELE GROUP	YES
Genetic Testing	81400	Molecular pathology procedure, Level 1(eg, identification of single germline variant [eg, SNP] by techniques such as restriction enzyme digestion or melt curve analysis)	YES
Genetic Testing	81401	Molecular pathology procedure, Level 2 (eg, 2-10 SNPs, 1 methylated variant, or 1 somatic variant [typically using nonsequencing target variant analysis], or detection of a dynamic mutation disorder/triplet repeat)	YES
Genetic Testing	81402	Molecular pathology procedure, Level 3 (eg, >10 SNPs, 2-10 methylated variants, or 2-10 somatic variants [typically using non-sequencing target variant analysis], immunoglobulin and T-cell receptor gene rearrangements, duplication/deletion variants of 1 exon, loss of heterozygosity [LOH], uniparental disomy [UPD])	YES

Genetic Testing	81403	Molecular pathology procedure, Level 4 (eg, analysis of single exon by DNA sequence analysis, analysis of >10 amplicons using multiplex PCR in 2 or more independent reactions, mutation scanning or duplication/deletion variants of 2-5 exons)	YES
Genetic Testing	81404	Molecular pathology procedure, Level 5 (eg, analysis of 2-5 exons by DNA sequence analysis, mutation scanning or duplication/deletion variants of 6-10 exons, or characterization of a dynamic mutation disorder/triplet repeat by Southern blot analysis)	YES
Genetic Testing	81405	Molecular pathology procedure, Level 6 (eg, analysis of 6-10 exons by DNA sequence analysis, mutation scanning or duplication/deletion variants of 11-25 exons, regionally targeted cytogenomic array analysis)	YES
Genetic Testing	81406	Molecular pathology procedure, Level 7 (eg, analysis of 11-25 exons by DNA sequence analysis, mutation scanning or duplication/deletion variants of 26-50 exons, cytogenomic array analysis for neoplasia)	YES
Genetic Testing	81407	Molecular pathology procedure, Level 8 (eg, analysis of 26-50 exons by DNA sequence analysis, mutation scanning or duplication/deletion variants of >50 exons, sequence analysis of multiple genes on one platform)	YES
Genetic Testing	81408	Molecular pathology procedure, Level 9 (eg, analysis of >50 exons in a single gene by DNA sequence analysis)	YES
Genetic Testing	81410	Aortic dysfunction or dilation (eg, Marfan syndrome, Loeys Dietz syndrome, Ehler Danlos syndrome type IV, arterial tortuosity syndrome); genomic sequence analysis panel, must include sequencing of at least 9 genes, including FBNI, TGFBRI, TGFBR2, COL3A1, MYH11, ACTA2, SLC2A10, SMAD3, and MYLK	YES
Genetic Testing	81411	Aortic dysfunction or dilation (eg, Marfan syndrome, Loeys Dietz syndrome, Ehler Danlos syndrome type IV, arterial tortuosity syndrome); duplication/ deletion analysis panel, must include analyses for TGFBRI, TGFBR2, MYH11, and COL3A1	YES
Genetic Testing	81412	Ashkenazi Jewish associated disorders (eg, Bloom syndrome, Canavan disease, cystic fibrosis, familial dysautonomia, Fanconi anemia group C, Gaucher disease, Tay-Sachs disease), genomic sequence analysis panel, must include sequencing of at least 9 genes, including ASPA, BLM, CFTR, FANCC, GBA, HEXA, IKBKAP, MCOLNI, and SMPD1	YES
Genetic Testing	81413	Cardiac ion channelopathies (eg, Brugada syndrome, long QT syndrome, short QT syndrome, catecholaminergic polymorphic ventricular tachycardia); genomic sequence analysis panel, must include sequencing of at least 10 genes, including ANK2, CASQ2, CAV3, KCN	YES
Genetic Testing	81414	Cardiac ion channelopathies (eg, Brugada syndrome, long QT syndrome, short QT syndrome, catecholaminergic polymorphic ventricular tachycardia); duplication/ deletion gene analysis panel, must include analysis of at least 2 genes, including KCNH2 and KCNQ1	YES
Genetic Testing	81415	Exome (eg, unexplained constitutional or heritable disorder or syndrome); sequence analysis	YES
Genetic Testing	81416	Exome (eg, unexplained constitutional or heritable disorder or syndrome); sequence analysis, each comparator exome (eg, parents, siblings) (List separately in addition to code for primary procedure)	YES
Genetic Testing	81417	Exome (eg, unexplained constitutional or heritable disorder or syndrome); re-evaluation of previously obtained exome sequence (eg, updated knowledge or unrelated condition/syndrome)	YES

Genetic Testing	81418	Drug metabolism (eg, pharmacogenomics) genomic sequence analysis panel, must include testing of at least 6 genes, including CYP2C19, CYP2D6, and CYP2D6 duplication/deletion analysis	YES
Genetic Testing	81419	Epilepsy genomic sequence analysis panel, must include analyses for ALDH7A1, CACNA1A, CDKL5, CHD2, GABRG2, GRIN2A, KCNQ2, MECP2, PCDH19, POLG, PRRT2, SCN1A, SCN1B, SCN2A, SCN8A, SLC2A1, SLC9A6, STXBPI, SYNGAP1, TCF4, TPPI, TSC1, TSC2, and ZEB2	YES
Genetic Testing	81420	FETAL CHROMOSOMAL ANEUPLOIDY GENOMIC SEQ ANALYS	YES
Genetic Testing	81425	Genome (eg, unexplained constitutional or heritable disorder or syndrome); sequence analysis	YES
Genetic Testing	81426	Genome (eg, unexplained constitutional or heritable disorder or syndrome); sequence analysis, each comparator genome (eg, parents, siblings) (List separately in addition to code for primary procedure)	YES
Genetic Testing	81427	Genome (eg, unexplained constitutional or heritable disorder or syndrome); re-evaluation of previously obtained genome sequence (eg, updated knowledge or unrelated condition/syndrome)	YES
Genetic Testing	81430	Hearing loss (eg, nonsyndromic hearing loss, Usher syndrome, Pendred syndrome); genomic sequence analysis panel, must include sequencing of at least 60 genes, including CDH23, CLRN1, GJB2, GPR98, MTRNR1, MYO7A, MYO15A, PCDH15, OTOF, SLC26A4, TMC1, TMPRSS3	YES
Genetic Testing	81431	Hearing loss (eg, nonsyndromic hearing loss, Usher syndrome, Pendred syndrome); duplication/deletion analysis panel, must include copy number analysis for STRC and DFNB1 deletions in GJB2 and GJB6 genes	YES
Genetic Testing	81432	Hereditary breast cancer-related disorders (eg, hereditary breast cancer, hereditary ovarian cancer, hereditary endometrial cancer); genomic sequence analysis panel, must include sequencing of at least 14 genes, including BRCA1, BRCA2, BRIP1, CDH1, MLH1, MSH2, MSH6, PALB2, PTEN, STK11, and TP53	YES
Genetic Testing	81433	Hereditary breast cancer-related disorders (eg, hereditary breast cancer, hereditary ovarian cancer, hereditary endometrial cancer); duplication/deletion analysis panel, must include analyses for BRCA1, BRCA2, MLH1, MSH2, and STK11	YES
Genetic Testing	81434	Hereditary retinal disorders (eg, retinitis pigmentosa, Leber congenital amaurosis, cone-rod dystrophy), genomic sequence analysis panel, must include sequencing of at least 15 genes, including ABCA4, CNGA1, CRB1, EYS, PDE6A, PDE6B, PRPF31, PRPH2, RDH12, RHO, RPI1, RP2, RPE65, RPGR, and USH2A	YES
Genetic Testing	81435	Hereditary colon cancer syndromes (eg, Lynch syndrome, familial adenomatous polyposis); genomic sequence analysis panel, must include analysis of at least 7 genes, including APC, CHEK2, MLH1, MSH2, MSH6, MUTYH, and PMS2	YES
Genetic Testing	81436	Hereditary colon cancer syndromes (eg, Lynch syndrome, familial adenomatous polyposis); duplication/deletion gene analysis panel, must include analysis of at least 8 genes, including APC, MLH1, MSH2, MSH6, PMS2, EPCAM, CHEK2, and MUTYH	YES
Genetic Testing	81437	Hereditary neuroendocrine tumor disorders (eg, medullary thyroid carcinoma, parathyroid carcinoma, malignant pheochromocytoma or paraganglioma); genomic sequence analysis panel, must include sequencing of at least 6 genes, including MAX, SDHB, SDHC, SDHD, TMEM127, and VHL	YES

Genetic Testing	81438	Hereditary neuroendocrine tumor disorders (eg, medullary thyroid carcinoma, parathyroid carcinoma, malignant pheochromocytoma or paraganglioma); duplication/deletion analysis panel, must include analyses for SDHB, SDHC, SDHD, and VHL	YES
Genetic Testing	81439	Inherited cardiomyopathy (eg, hypertrophic cardiomyopathy, dilated cardiomyopathy, arrhythmogenic right ventricular cardiomyopathy) genomic sequence analysis panel, must include sequencing of at least 5 genes, including DSG2, MYBPC3, MYH7, PKP2 and TTN	YES
Genetic Testing	81440	Nuclear encoded mitochondrial genes (eg, neurologic or myopathic phenotypes), genomic sequence panel, must include analysis of at least 100 genes, including BCSIL, C10orf2, COQ2, COX10, DGUOK, MPV17, OPA1, PDSS2, POLG, POLG2, RRM2B, SCO1, SCO2, SLC25A4, SUCLA2, SUCLG1, TAZ, TK2, and TYMP	YES
Genetic Testing	81441	Inherited bone marrow failure syndromes (IBMFS) (eg, Fanconi anemia, dyskeratosis congenita, Diamond-Blackfan anemia, Shwachman-Diamond syndrome, GATA2 deficiency syndrome, congenital amegakaryocytic thrombocytopenia) sequence analysis panel, must include sequencing of at least 30 genes, including BRCA2, BRIP1, DKC1, FANCA, FANCB, FANCC, FANCD2, FANCE, FANCF, FANCG, FANCI, FANCL, GATA1, GATA2, MPL, NHP2, NOP10, PALB2, RAD51C, RPL11, RPL35A, RPL5, RPS10, RPS19, RPS24, RPS26, RPS7, SBDS, TERT, and TINF2	YES
Genetic Testing	81442	Nuclear encoded mitochondrial genes (eg, neurologic or myopathic phenotypes), genomic sequence panel, must include analysis of at least 100 genes, including BCSIL, C10orf2, COQ2, COX10, DGUOK, MPV17, OPA1, PDSS2, POLG, POLG2, RRM2B, SCO1, SCO2, SLC25A4, SUCLA2, SUCLG1, TAZ, TK2, and TYMP	YES
Genetic Testing	81443	Genetic testing for severe inherited conditions (eg, cystic fibrosis, Ashkenazi Jewish-associated disorders [eg, Bloom syndrome, Canavan disease, Fanconi anemia type C, mucopolidosis type VI, Gaucher disease, Tay-Sachs disease], beta hemoglobinopathies, phenylketonuria, galactosemia), genomic sequence analysis panel, must include sequencing of at least 15 genes (eg, ACADM, ARSA, ASPA, ATP7B, BCKDHA, BCKDHB, BLM, CFTR, DHCR7, FANCC, G6PC, GAA, GALT, GBA, GBE1, HBB, HEXA, IKBKAP, MCOLN1, PAH)	YES
Genetic Testing	81445	Targeted genomic sequence analysis panel, solid organ neoplasm, DNA analysis, and RNA analysis when performed, 5-50 genes (eg, ALK, BRAF, CDKN2A, EGFR, ERBB2, KIT, KRAS, NRAS, MET, PDGFRA, PDGFRB, PGR, PIK3CA, PTEN, RET), interrogation for sequence variants and copy number variants or rearrangements, if performed [when specified as any panel other than the Lynch Syndrome 5-gene panel test or the prostate cancer panel test for HRR genes listed above]	YES
Genetic Testing	81448	Hereditary peripheral neuropathies (eg, Charcot- Marie-Tooth, spastic paraplegia), genomic sequence analysis panel, must include sequencing of at least 5 peripheral neuropathy-related genes (eg, BSCL2, GJB1, MFN2, MPZ, REEP1, SPAST, SPG11, SPTLC1)	YES

Genetic Testing	81449	Targeted genomic sequence analysis panel, solid organ neoplasm, 5–50 genes (eg, ALK, BRAF, CDKN2A, EGFR, ERBB2, KIT, KRAS, MET, NRAS, PDGFRA, PDGFRB, PGR, PIK3CA, PTEN, RET), interrogation for sequence variants and copy number variants or rearrangements, if performed; RNA analysis	YES
Genetic Testing	81450	Targeted genomic sequence analysis panel, hematolymphoid neoplasm or disorder, DNA analysis, and RNA analysis when performed, 5–50 genes (eg, BRAF, CEBPA, DNMT3A, EZH2, FLT3, IDH1, IDH2, JAK2, KRAS, KIT, MLL, NRAS, NPM1, NOTCH1), interrogation for sequence variants and copy number variants or rearrangements, or isoform expression or mRNA expression levels, if performed	YES
Genetic Testing	81451	Targeted genomic sequence analysis panel, hematolymphoid neoplasm or disorder, 5–50 genes (eg, BRAF, CEBPA, DNMT3A, EZH2, FLT3, IDH1, IDH2, JAK2, KIT, KRAS, MLL, NOTCH1, NPM1, NRAS), interrogation for sequence variants, and copy number variants or rearrangements, or isoform expression or mRNA expression levels, if performed; RNA analysis	YES
Genetic Testing	81455	Targeted genomic sequence analysis panel, solid organ or hematolymphoid neoplasm, DNA analysis, and RNA analysis when performed, 51 or greater genes (eg, ALK, BRAF, CDKN2A, CEBPA, DNMT3A, EGFR, ERBB2, EZH2, FLT3, IDH1, IDH2, JAK2, KIT, KRAS, MLL, NPM1, NRAS, MET, NOTCH1, PDGFRA, PDGFRB, PGR, PIK3CA, PTEN, RET), interrogation for sequence variants and copy number variants or rearrangements, if performed	YES
Genetic Testing	81456	Targeted genomic sequence analysis panel, solid organ or hematolymphoid neoplasm or disorder, 51 or greater genes (eg, ALK, BRAF, CDKN2A, CEBPA, DNMT3A, EGFR, ERBB2, EZH2, FLT3, IDH1, IDH2, JAK2, KIT, KRAS, MET, MLL, NOTCH1, NPM1, NRAS, PDGFRA, PDGFRB, PGR, PIK3CA, PTEN, RET), interrogation for sequence variants and copy number variants or rearrangements, or isoform expression or mRNA expression levels, if performed; RNA analysis	YES
Genetic Testing	81457	Solid organ neoplasm, genomic sequence analysis panel, interrogation for sequence variants; DNA analysis, microsatellite instability	YES
Genetic Testing	81458	Solid organ neoplasm, genomic sequence analysis panel, interrogation for sequence variants; DNA analysis, copy number variants and microsatellite instability	YES
Genetic Testing	81459	Solid organ neoplasm, genomic sequence analysis panel, interrogation for sequence variants; DNA analysis or combined DNA and RNA analysis, copy number variants, microsatellite instability, tumor mutation burden, and rearrangements	YES
Genetic Testing	81460	Whole mitochondrial genome (eg, Leigh syndrome, mitochondrial encephalomyopathy, lactic acidosis, and stroke-like episodes [MELAS], myoclonic epilepsy with ragged-red fibers [MERFF], neuropathy, ataxia, and retinitis pigmentosa [NARP], Leber hereditary optic neuropathy [LHON]), genomic sequence, must include sequence analysis of entire mitochondrial genome with heteroplasmy detection	YES

Genetic Testing	81462	Solid organ neoplasm, genomic sequence analysis panel, cell-free nucleic acid (eg, plasma), interrogation for sequence variants; DNA analysis or combined DNA and RNA analysis, copy number variants and rearrangements	YES
Genetic Testing	81463	Solid organ neoplasm, genomic sequence analysis panel, cell-free nucleic acid (eg, plasma), interrogation for sequence variants; DNA analysis, copy number variants, and microsatellite instability	YES
Genetic Testing	81464	Solid organ neoplasm, genomic sequence analysis panel, cell-free nucleic acid (eg, plasma), interrogation for sequence variants; DNA analysis or combined DNA and RNA analysis, copy number variants, microsatellite instability, tumor mutation burden, and rearrangements	YES
Genetic Testing	81465	Whole mitochondrial genome large deletion analysis panel (eg, Kearns-Sayre syndrome, chronic progressive external ophthalmoplegia), including heteroplasmy detection, if performed.	YES
Genetic Testing	81470	X-linked intellectual disability (XLID) (eg, syndromic and non-syndromic XLID); genomic sequence analysis panel, must include sequencing of at least 60 genes, including ARX, ATRX, CDKL5, FGD1, FMRI, HUWE1, ILIRAPL, KDM5C, LICAM, MECP2, MED12, MID1, OCRL, RPS6KA3, and SLC16A2	YES
Genetic Testing	81471	X-linked intellectual disability (XLID) (eg, syndromic and non-syndromic XLID); deuplication/deletion gene analysis, must include analysis of at least 60 genes, including ARX, ATRX, CDKL5, FGD1, FMRI, HUWE1, ILIRAPL, KDM5C, LICAM, MECP2, MED12, MID1, OCRL, RPS6KA3, and SLC16A2	YES
Genetic Testing	81479	Unlisted molecular pathology procedure	YES
Investigational Potential	81490	Autoimmune (rheumatoid arthritis), analysis of 12 biomarkers using immunoassays, utilizing serum, prognostic algorithm reported as a disease activity score	NO
Genetic Testing	81493	Coronary artery disease, mRNA, gene expression profiling by real-time RT-PCR of 23 genes, utilizing whole peripheral blood, algorithm reported as a risk score	YES
Genetic Testing	81500	Oncology (ovarian), biochemical assays of two proteins (CA125 and HE4), utilizing serum, with menopausal status, algorithm reported as a risk score	NO
Genetic Testing	81503	Oncology (ovarian), biochemical assays of five proteins	NO
Genetic Testing	81504	Oncology (tissue of origin), microarray gene expression profiling of > 2000 genes, utilizing formalin-fixed paraffin-embedded tissue, algorithm reported as tissue similarity scores	YES
Genetic Testing	81507	FETAL ANEUPLOIDY 21 18 13 SEQ ANALY TRISOM RISK	NO
Genetic Testing	81513	Infectious disease, bacterial vaginosis, quantitative realtime amplification of RNA markers for Atopobium vaginae, Gardnerella vaginalis, and Lactobacillus species, utilizing vaginal-fluid specimens, algorithm reported as a positive or negative result for bacterial vaginosis	NO
Genetic Testing	81514	Infectious disease, bacterial vaginosis and vaginitis, quantitative real-time amplification of DNA markers for Gardnerella vaginalis, Atopobium vaginae, Megasphaera type 1, Bacterial Vaginosis Associated Bacteria-2 (BVAB-2), and Lactobacillus species (L. crispatus and L. jensenii), utilizing vaginal-fluid specimens, algorithm reported as a positive or negative for high likelihood of bacterial vaginosis, includes separate detection of Trichomonas vaginalis and/or Candida species (C. albicans, C. tropicalis, C. parapsilosis, C. dubliniensis), Candida glabrata, Candida krusei, when reported	NO

	81517	Liver disease, analysis of 3 biomarkers (hyaluronic acid [HA], procollagen III amino terminal peptide [PIIINP], tissue inhibitor of metalloproteinase 1 [TIMP-1]), using immunoassays, utilizing serum, prognostic algorithm reported as a risk score and risk of liver fibrosis and liver- related clinical events within 5 years	NO
Investigational Potential			
Genetic Testing	81518	Oncology (breast), mRNA, gene expression profiling by real-time RT-PCR of 11 genes (7 content and 4 housekeeping), utilizing formalin-fixed paraffin- embedded tissue, algorithms reported as percentage risk for metastatic recurrence and likelihood of benefit from extended endocrine therapy	YES
Genetic Testing	81519	Oncology (breast), mRNA, gene expression profiling by real-time RT-PCR of 21 genes utilizing formalin- fixed paraffin embedded tissue, algorithm reported as recurrence score	YES
Genetic Testing	81520	Oncology (breast), mRNA gene expression profiling by hybrid capture of 58 genes (50 content and 8 housekeeping), utilizing formalin-fixed paraffin- embedded tissue, algorithm reported as a recurrence risk score	YES
Genetic Testing	81521	Oncology (breast), mRNA, microarray gene expression profiling of 70 content genes and 465 housekeeping genes, utilizing fresh frozen or formalin-fixed paraffin- embedded tissue, algorithm reported as index related to risk of distant metastasis	YES
Genetic Testing	81522	Oncology (breast), mRNA, gene expression profiling by RT-PCR of 12 genes (8 content and 4 housekeeping), utilizing formalin-fixed paraffin- embedded tissue, algorithm reported as recurrence risk score	YES
Genetic Testing	81523	Oncology (breast), mRNA, next-generation sequencing gene expression profiling of 70 content genes and 31 housekeeping genes, utilizing formalin- fixed paraffin- embedded tissue, algorithm reported as index related to risk to distant metastasis	YES
Genetic Testing	81525	Oncology (colon), mRNA, gene expression profiling by real-time RT-PCR of 12 genes (7 content and 5 housekeeping), utilizing formalin-fixed paraffin- embedded tissue, algorithm reported as a recurrence score	YES
Genetic Testing	81529	Oncology (cutaneous melanoma), mRNA, gene expression profiling by real-time RT-PCR of 31 genes (28 content and 3 housekeeping), utilizing formalin- fixed paraffin- embedded tissue, algorithm reported as recurrence risk, including likelihood of sentinel lymph node metastasis	NO
Investigational Potential	81535	Oncology (gynecologic), live tumor cell culture and chemotherapeutic response by DAPI stain and morphology, predictive algorithm reported as a drug response score; first single drug or drug combination	NO
Investigational Potential	81536	Oncology (gynecologic), live tumor cell culture and chemotherapeutic response by DAPI stain and morphology, predictive algorithm reported as a drug response score; each additional single drug or drug combination	NO
Investigational Potential	81538	Oncology (lung), mass spectrometric 8-protein signature, including amyloid A, utilizing serum, prognostic and predictive algorithm reported as good versus poor overall survival	NO
Investigational Potential	81539	Oncology (high-grade prostate cancer), biochemical assay of four proteins (Total PSA, Free PSA, Intact PSA and human kallikrein-2 [hK2]), utilizing plasma or serum, prognostic algorithm reported as a probability score	NO
Genetic Testing	81540	Oncology (tumor of unknown origin), mRNA, gene expression profiling by real-time RT-PCR of 92 genes (87 content and 5 housekeeping) to classify tumor into main cancer type and subtype, utilizing formalin fixed paraffin-embedded tissue, algorithm reported	NO

Genetic Testing	81541	Oncology (prostate), mRNA gene expression profiling by real-time RT-PCR of 46 genes (31 content and 15 housekeeping), utilizing formalin- fixed paraffin- embedded tissue, algorithm reported as a disease- specific mortality risk score	YES
Genetic Testing	81542	Oncology (prostate), mRNA, microarray gene expression profiling of 22 content genes, utilizing formalin-fixed paraffin-embedded tissue, algorithm reported as metastasis risk score	YES
Genetic Testing	81546	Oncology (thyroid), mRNA, gene expression analysis of 10,196 genes, utilizing fine needle aspirate, algorithm reported as a categorical result (eg, benign or suspicious)	YES
Genetic Testing	81551	Oncology (prostate), promoter methylation profiling by real-time PCR of 3 genes (GSTP1, APC, RASSF1), utilizing formalin-fixed paraffin-embedded tissue, algorithm reported as a likelihood of prostate cancer detection on repeat biopsy	NO
Genetic Testing	81552	Oncology (uveal melanoma), mRNA, gene expression profiling by real-time RT-PCR of 15 genes (12 content and 3 housekeeping), utilizing fine needle aspirate or formalin-fixed paraffin- embedded tissue, algorithm reported as risk of metastasis	YES
Genetic Testing	81554	Pulmonary disease (idiopathic pulmonary fibrosis [IPF]), mRNA, gene expression analysis of 190 genes, utilizing transbronchial biopsies, diagnostic algorithm reported as categorical result (eg, positive or negative for high probability of usual interstitial pneumonia [UIP])	YES
Investigational Potential	81560	Transplantation medicine (allograft rejection, pediatric liver and small bowel), measurement of donor and third-party-induced CD154+T-cytotoxic memory cells, utilizing whole peripheral blood, algorithm reported as a rejection risk score	NO
Transplant	81595	Cardiology (heart transplant), mRNA, gene expression profiling by real-time quantitative PCR of 20 genes (11 content and 9 housekeeping), utilizing subfraction of peripheral blood, algorithm reported as a rejection risk score	NO
Investigational Potential	81596	Infectious disease, chronic hepatitis C virus (HCV) infection, six biochemical assays (ALT, A2- macroglobulin, apolipoprotein A-1, total bilirubin, GGT, and haptoglobin) utilizing serum, prognostic algorithm reported as scores for fibrosis and necroinflammatory activity in liver	NO
Genetic Testing	81599	Unlisted multianalyte assay with algorithmic analysis	NO
Investigational Potential	82172	Apolipoprotein, each	NO
Investigational Potential	82523	Collagen Cross Links, any method	NO
Genetic Testing	82653	ELASTASE PANCREATIC FECAL QUANTITATIVE	YES
Investigational Potential	82787	Gammaglobulin (immunoglobulin); immunoglobulin subclasses (eg, IgG1, 2, 3, or 4), each	YES
Investigational Potential	83006	Growth stimulation expressed gene 2 (ST2, Interleukin 1 receptor like-1)	NO
Investigational Potential	83090	Homocysteine	NO
Investigational Potential	83516	Immunoassay for analyte other than infectious agent antibody or infectious agent antigen; qualitative or semiquantitative, multiple step method [when specified as ALCAT or Mediator Release Test (MRT)]	NO
Investigational Potential	83519	Immunoassay for analyte other than infectious agent antibody or infectious agent antigen; quantitative, by radioimmunoassay (eg, RIA) [when specified as a component of paraneoplastic autoantibody evaluation (PAVAL)]	YES

Genetic Testing	83520	Immunoassay for analyte other than infectious agent antibody or infectious agent antigen; quantitative, not otherwise specified [when specified as tau protein, amyloid beta peptide testing] or [when specified as EarlyCDT lung cancer assessment or as a component of paraneoplastic autoantibody evaluation (PAVAL)]	YES
Genetic Testing	83529	ASSAY OF INTERLEUKIN-6 (IL-6)	YES
Investigational Potential	83695	Lipoprotein (a)	NO
Investigational Potential	83698	Lipoprotein-associated phospholipase A2 (Lp-PLA2)	NO
Investigational Potential	83700	Lipoprotein, blood; electrophoretic separation and quantitation	NO
Investigational Potential	83701	Lipoprotein, blood; high resolution fractionation and quantitation of lipoproteins including lipoprotein subclasses when performed (eg, electrophoresis, ultracentrifugation)	NO
Investigational Potential	83704	Lipoprotein, blood; quantitation of lipoprotein particle number(s) (eg, by nuclear magnetic resonance spectroscopy), includes lipoprotein particle subclass(es), when performed	NO
Genetic Testing	84999	Unlisted chemistry procedure	NO
Genetic Testing	85999	HEMATOLOGY PROCEDURE	YES
Investigational Potential	86001	Allergen specific IgG quantitative or semiquantitative, each allergen	YES
Investigational Potential	86152	Cell enumeration using immunologic selection and identification in fluid specimen (eg, circulating tumor cells in blood)	YES
Investigational Potential	86153	Cell enumeration using immunologic selection and identification in fluid specimen (eg, circulating tumor cells in blood); physician interpretation and report, when required	YES
Investigational Potential	86255	Fluorescent noninfectious agent antibody; screen, each antibody [when specified as a component of paraneoplastic autoantibody evaluation (PAVAL)]	YES
Investigational Potential	86256	Fluorescent noninfectious agent antibody; titer, each antibody [when specified as a component of paraneoplastic autoantibody evaluation (PAVAL)]	YES
Investigational Potential	86294	Immunoassay for tumor antigen, qualitative or semiquantitative (e.g., bladder tumor antigen)	NO
Investigational Potential	86305	Human epididymis protein 4 (HE4) testing	NO
Investigational Potential	86343	Leukocyte histamine release test (LHR) [includes basophil histamine release test]	NO
Investigational Potential	86352	Cellular function assay involving stimulation (eg, mitogen or antigen) and detection of biomarker (eg, ATP)	NO
Investigational Potential	86356	MONONUCLEAR CELL ANTIGEN, QUANT	NO
Investigational Potential	86357	Natural killer (NK) cells, total count	NO
Investigational Potential	86367	STEM CELLS, TOTAL COUNT	NO
Investigational Potential	86386	Nuclear Matrix Protein 22 (NMP22), qualitative	NO
Investigational Potential	86486	SKIN TEST UNLISTED ANTIGEN EACH	NO
Investigational Potential	86807	Serum screening for cytotoxic percent reactive antibody (PRA); standard method	NO
Investigational Potential	86808	Serum screening for cytotoxic percent reactive antibody (PRA); quick method	NO
Investigational Potential	86849	Unlisted immunology procedure [when specified as in vitro chemosensitivity or in vitro chemoresistance assay, ex vivo analysis of programmed cell death] or [when specified as Complement Antigen Test for delayed food allergy, Mediator Release Test (MRT), or Basophil Activation Test (BAT) by flow cytometry]	NO

Transplant	86999	Unlisted transfusion medicine procedure [when specified as genetic modification of donor lymphocytes; Note this procedure is considered not medically necessary]	NO
Genetic Testing	87999	Unlisted microbiology procedure [when specified as in vitro chemosensitivity or in vitro chemoresistance assay] or [when specified as other NGS analysis of microbes] or [when specified as a pooled antibiotic sensitivity test with multiplex PCR, such as the Guidance® UTI test]	NO
Investigational Potential	88099	NECROPSY (AUTOPSY) UNLISTED	NO
Investigational Potential	88120	Cytopathology, in situ hybridization (e.g., FISH), urinary tract specimen with morphometric analysis, 3-5 molecular probes, each specimen; manual	NO
Investigational Potential	88121	Cytopathology, in situ hybridization (e.g., FISH), urinary tract specimen with morphometric analysis, 3-5 molecular probes, each specimen; using computer-assisted technology	NO
Genetic Testing	88182	CELL MARKER STUDY,DNA	YES
Genetic Testing	88199	CYTOPATH PROCEDURE UNLISTED	YES
Genetic Testing	88245	CHROMOSOME ANAL:BREAKGE,20-25 CELLS	YES
Genetic Testing	88248	CHROMOSOME ANAL:BREAKGE,50-100 CELLS	YES
Genetic Testing	88249	CHROMOSOME ANAL:BREAKGE,100 CELLS	YES
Genetic Testing	88261	CHROMOSOME ANAL:5 CELLS,1 KARYOTYPE	YES
Genetic Testing	88262	CHROMOSOME ANAL:15-20,2 KARYOTYPES	YES
Genetic Testing	88263	CHROMOSOME ANAL:45 CELLS,MOSAICISM	YES
Genetic Testing	88264	CHROMOSOME ANALYSIS:20-25	YES
Genetic Testing	88267	CHROMOSOME ANALY:PLACENTA	YES
Genetic Testing	88269	CHROMOSOME ANALY:AMNIOTIC	YES
Genetic Testing	88271	CYTOGENETICS, DNA PROBE	YES
Genetic Testing	88272	CYTOGENETICS, 3-5	YES
Genetic Testing	88273	CYTOGENETICS, 10-30	YES
Genetic Testing	88274	CYTOGENETICS, 25-99	YES
Genetic Testing	88275	CYTOGENETICS, 100-300	YES
Genetic Testing	88280	CHROMOSOME KARYOTYPE STUDY	YES
Genetic Testing	88283	CHROMOSOME BANDING STUDY	YES
Genetic Testing	88285	CHROMOSOME COUNT:ADDN CELLS	YES
Genetic Testing	88289	CHROMOSOME STUDY:ADDN HI RES	YES
Genetic Testing	88291	CYTO/MOLECULAR REPORT	YES
Genetic Testing	88299	CYTOGENETIC STUDY	YES
Investigational Potential	88399	Unlisted surgical pathology procedure [when specified as use of an AI-based software product for cytopathologic prostate cancer detection]	NO
Investigational Potential	88749	Unlisted in vivo (eg, transcutaneous) laboratory service [when specified as skin advanced glycation endproducts (AGE) measurement by multi- wavelength fluorescent spectroscopy]	YES
Investigational Potential	89240	Unlisted miscellaneous pathology test [when specified as in vitro chemosensitivity or in vitro chemoresistance assay] or [when specified as fecal analysis for intestinal dysbiosis or other intestinal symptoms and disorders]	YES
Infertility	89251	Culture of oocyte(s)/embryo(s), less than 4 days; with coculture of oocyte(s)/embryos	NO
Infertility	89253	Assisted embryo hatching, microtechniques (any method)	NO
Infertility	89260	Sperm isolation; simple prep (eg, sperm wash and swim-up) for insemination or diagnosis with semen analysis	YES

Infertility	89261	Sperm isolation; complex prep (eg, Percoll gradient, albumin gradient) for insemination or diagnosis with semen analysis	YES
Infertility	89268	Insemination of oocytes	YES
Genetic Testing	89290	Biopsy, oocyte polar body or embryo blastomere, microtechnique (for preimplantation genetic diagnosis); less than or equal to 5 embryos	NO
Genetic Testing	89291	Biopsy, oocyte polar body or embryo blastomere, microtechnique (for preimplantation genetic diagnosis); greater than 5 embryos	NO
Investigational Potential	89329	Sperm evaluation; hamster penetration test	YES
Investigational Potential	89330	Sperm evaluation; cervical mucus penetration test, with or without spinnbarkeit test	YES
Investigational Potential	89337	Cryopreservation, mature oocyte(s)	NO
Investigational Potential	89344	Storage (per year); reproductive tissue, testicular/ovarian	NO
Investigational Potential	89346	Storage (per year); oocyte(s)	NO
Investigational Potential	89356	Thawing of cryopreserved; oocytes, each aliquot	NO
Investigational Potential	89398	Unlisted reproductive medicine laboratory procedure [when specified as a sperm DNA fragmentation test]	NO
Pharmacy	90281	Immune globulin, Immune globulin (Ig), Intramuscular	YES
Pharmacy	90283	Immune globulin, IVIG Generic	YES
Pharmacy	90284	Immune globulin subcutaneous [Human], SCIG	YES
Pharmacy	90378	RESPIRATORY SYNCYTIAL VIRUS IG IM 50 MG EA	YES
Pharmacy	90380	RSV MONOCLONAL ANTB SEASONAL DOSE 0.5ML IM USE	YES
Pharmacy	90381	RSV MONOCLONAL ANTB SEASONAL DOSE 1 ML IM USE	YES
Pharmacy	90626	TICK-BORNE ENCEPHALITIS VIRUS VACCINE, INACTIVATED; 0.25 ML DOSAGE, FOR INTRAMUSCULAR USE	YES
Pharmacy	90627	TICK-BORNE ENCEPHALITIS VIRUS VACCINE, INACTIVATED; 0.5 ML DOSAGE, FOR INTRAMUSCULAR USE	YES
Pharmacy	90758	ZAIRE EBOLAVIRUS VACCINE, LIVE, FOR INTRAMUSCULAR USE	YES
Behavioral Health	90867	TRANSCRANIAL MAGNETIC STIMULATION TREATMENT,PLANNING	YES
Behavioral Health	90868	TRANSCRANIAL MAGNETIC STIMULATION TREATMENT,DELIVERY/MANAGEMENT	YES
Behavioral Health	90869	REPET TMS TX SUBSEQ MOTR THRESHLD W/DELIV & MNGT	YES
Biofeedback	90875	Individual psychophysiological therapy incorporating biofeedback training by any modality (face-to-face with the patient), with psychotherapy (eg, insight oriented, behavior modifying or supportive psychotherapy); 30 minutes	NO
Biofeedback	90876	Individual psychophysiological therapy incorporating biofeedback training by any modality (face-to-face with the patient), with psychotherapy (eg, insight oriented, behavior modifying or supportive psychotherapy); 45 minutes	NO
Behavioral Health	90899	PSYCHIATRIC SERVICE/THERAPY	YES
Biofeedback	90901	Biofeedback training by any modality	NO
Biofeedback	90912	Biofeedback training, perineal muscles, anorectal or urethral sphincter, including EMG and/or manometry, when performed; initial 15 minutes of one-on-one physician or other qualified health care professional contact with the patient	NO
Biofeedback	90913	Biofeedback training, perineal muscles, anorectal or urethral sphincter, including EMG and/or manometry, when performed; each additional 15 minutes of one-on-one physician or other qualified health care professional contact with the patient	NO
Home Health	90935	HEMODIALYSIS, ONE EVALUATION	YES
Home Health	90937	HEMODIALYSIS, REPEATED EVAL	YES
Home Health	90945	DIALYSIS, NOT HEMO, 1 EVAL	YES

Home Health	90947	DIALYSIS, REPEATED EVAL.	YES
Home Health	90951	ESRD SERVICES, PER MONTH, <2 YR OLD, 4+ VISITS	YES
Home Health	90952	ESRD SERVICES, PER MONTH, <2 YR OLD, 2-3 VISITS	YES
Home Health	90953	ESRD SERVICES, PER MONTH, <2 YR OLD, 1 VISIT	YES
Home Health	90954	ESRD SERVICES, PER MONTH, 2-11 YR OLD, 4+ VISITS	YES
Home Health	90955	ESRD SERVICES, PER MONTH, 2-11 YR OLD, 2-3 VISITS	YES
Home Health	90956	ESRD SERVICES, PER MONTH, 2-11 YR OLD, 1 VISIT	YES
Home Health	90957	ESRD SERVICES, PER MONTH, 12-19 YR OLD, 4+ VISITS	YES
Home Health	90959	ESRD SERVICES, PER MONTH, 12-19 YR OLD, 1 VISIT	YES
Home Health	90960	ESRD SERVICES, PER MONTH, 20+ YR OLD, 4+ VISITS	YES
Home Health	90961	ESRD SERVICES, PER MONTH, 20+ YR OLD, 2-3 VISITS	YES
Home Health	90962	ESRD SERVICES, PER MONTH, 20+ YR OLD, 1 VISIT	YES
Home Health	90963	ESRD SERVICES, HOME DIALYSIS, PER MONTH, < 2 YR OLD	YES
Home Health	90964	ESRD SERVICES, HOME DIALYSIS, PER MONTH, 2-11 YR OLD	YES
Home Health	90965	ESRD SERVICES, HOME DIALYSIS, PER MONTH, 12-19 YR OLD	YES
Home Health	90966	ESRD SERVICES, HOME DIALYSIS, PER MONTH, 20+ YR OLD	YES
Home Health	90967	ESRD SERVICES, PER DAY, < 2 YR OLD	YES
Home Health	90968	ESRD SERVICES, PER DAY, 2-11 YR OLD	YES
Home Health	90969	ESRD SERVICES, PER DAY, 12-19 YR OLD	YES
Home Health	90970	ESRD SERVICES, PER DAY, 20+ YR OLD	YES
Home Health	90989	DIALYSIS TRAINING/COMPLETE	YES
Home Health	90993	DIALYSIS TRAINING/INCOMPLETE	YES
Home Health	90999	DIALYSIS PROCEDURE	YES
Investigational Potential	91112	Gastrointestinal transit and pressure measurement, stomach through colon, wireless capsule, with interpretation and report	YES
Procedure - Misc.	91299	GASTROENTEROLOGY PROCEDURE	YES
Procedure - Misc.	92132	Scanning computerized ophthalmic diagnostic imaging, anterior segment, with interpretation and report, unilateral or bilateral.	NO
Procedure - Misc.	92311	CONTACT LENS FIT,APHAKIA UNILAT	NO
Procedure - Misc.	92312	CONTACT LENS FIT,APHAKIA BILAT	NO
Procedure - Misc.	92313	CONTACT LENS FIT,CORNEOSCLERAL LENS	NO
Procedure - Misc.	92499	EYE SERVICE OR PROCEDURE	YES
Procedure - Misc.	92507	SPEECH/HEARING THERAPY, INDIVIDUAL	YES
Procedure - Misc.	92508	SPEECH/HEARING THERAPY, GROUP	YES
Investigational Potential	92517	Vestibular evoked myogenic potential (VEMP) testing, with interpretation and report; cervical (cVEMP)	NO
Investigational Potential	92518	Vestibular evoked myogenic potential (VEMP) testing, with interpretation and report; ocular (oVEMP)	NO
Investigational Potential	92519	Vestibular evoked myogenic potential (VEMP) testing, with interpretation and report; cervical (cVEMP) and ocular (oVEMP)	NO
Procedure - Misc.	92520	LARYNGEAL FUNCTION STUDIES	NO
Procedure - Misc.	92524	BEHAVIORAL & QUALIT ANALYSIS VOICE AND RESONANCE	NO
Procedure - Misc.	92606	THER SRVC(S),NON-SPEECH GEN DEV, W/PROG	NO
Procedure - Misc.	92607	EVAL,SPEECH-GEN AUG/ALT COMM DEV,IST HR	NO
Procedure - Misc.	92608	EVAL,SPEECH-GEN AUG/ALT COMM DEV,ADDL 30	NO
Procedure - Misc.	92609	THER SRVC,NON-SPEECH GEN DEV USE, W/PROG	NO
Procedure - Misc.	92618	EVAL RX N-SP-GEN AUGMT ALT COMMUN DEV ADD 30 MIN	NO
Procedure - Misc.	92625	TINNITUS ASSESSMENT	NO

Investigational Potential	92700	Unlisted otorhinolaryngological service or procedure [when specified as acoustic pharyngometry]	YES
Procedure - Cardiac	92920	Percutaneous transluminal coronary angioplasty; single major coronary artery or branch	NO
Procedure - Cardiac	92921	Percutaneous transluminal coronary angioplasty; each additional branch of a major coronary artery (List separately in addition to code for primary procedure)	NO
Procedure - Cardiac	92924	Percutaneous transluminal coronary atherectomy, with coronary angioplasty when performed; single major coronary artery or branch	NO
Procedure - Cardiac	92925	Percutaneous transluminal coronary atherectomy, with coronary angioplasty when performed; each additional branch of a major coronary artery (List separately in addition to code for primary procedure)	NO
Procedure - Cardiac	92928	Percutaneous transcatheter placement of intracoronary stent(s), with coronary angioplasty when performed; single major coronary artery or branch	NO
Procedure - Cardiac	92929	Percutaneous transcatheter placement of intracoronary stent(s), with coronary angioplasty when performed; each additional branch of a major coronary artery	NO
Procedure - Cardiac	92933	Percutaneous transluminal coronary atherectomy, with intracoronary stent, with coronary angioplasty when performed; single major coronary artery or branch	NO
Procedure - Cardiac	92934	Percutaneous transluminal coronary atherectomy, with intracoronary stent, with coronary angioplasty when performed; each additional branch of a major coronary artery	NO
Procedure - Cardiac	92937	Percutaneous transluminal revascularization of or through coronary artery bypass graft (internal mammary, free arterial, venous), any combination of intracoronary stent, atherectomy and angioplasty, including distal protection when performed; single vessel	NO
Procedure - Cardiac	92938	Percutaneous transluminal revascularization of or through coronary artery bypass graft (internal mammary, free arterial, venous), any combination of intracoronary stent, atherectomy and angioplasty, including distal protection when performed; each additional branch subtended by the bypass graft	NO
Procedure - Cardiac	92943	Percutaneous transluminal revascularization of chronic total occlusion, coronary artery, coronary artery branch, or coronary artery bypass graft, any combination of intracoronary stent, atherectomy and angioplasty; single vessel	NO
Procedure - Cardiac	92944	Percutaneous transluminal revascularization of chronic total occlusion, coronary artery, coronary artery branch, or coronary artery bypass graft, any combination of intracoronary stent, atherectomy and angioplasty; each additional coronary artery, coronary artery branch, or bypass graft	NO
Procedure - Cardiac	92971	Cardio assist method of circulatory assist; external	NO
Procedure - Cardiac	92973	Percutaneous transluminal coronary thrombectomy mechanical (List separately in addition to code for primary procedure)	NO
Procedure - Cardiac	92974	Transcatheter Placement, Radiation Delivery Device, Coronary Intravascular Brachytherapy (List separately in addition to code for primary procedure)	NO
Procedure - Cardiac	92975	Thrombolysis, Coronary; Intracoronary Infusion, W/ Selective Coronary Angiography	NO

Advanced Imaging	92978	Endoluminal imaging of coronary vessel or graft using intravascular ultrasound (IVUS) or optical coherence tomography (OCT) during diagnostic evaluation and/or therapeutic intervention including imaging supervision, interpretation, and report; initial vessel (List separately in addition to code for primary procedure)	YES
Procedure - Cardiac	92979	Endoluminal imaging of coronary vessel or graft using intravascular ultrasound (IVUS) or optical coherence tomography (OCT) during diagnostic evaluation and/or therapeutic intervention including imaging supervision, interpretation, and report; each additional vessel (List separately in addition to code for primary procedure)	NO
Investigational Potential	93150	Therapy activation of phrenic nerve stimulator system	NO
Investigational Potential	93151	Interrogation and programming of phrenic nerve stimulator system	NO
Investigational Potential	93152	Interrogation and programming of phrenic nerve stimulator system done at the same time as a polysomnography	NO
Investigational Potential	93153	Interrogation without programming of phrenic nerve stimulator system	NO
Procedure - Cardiac	93229	Wearable mobile cardiovascular telemetry with electrocardiographic recording, concurrent computerized real time data analysis and greater than 24 hours of accessible ECG data storage (retrievable with query) with ECG triggered and patient selected events	NO
Cardiac - Monitor	93247	External electrocardiographic recording for more than 7 days up to 15 days by continuous rhythm recording and storage; scanning analysis with report	YES
Investigational Potential	93264	Remote monitoring of a wireless pulmonary artery pressure sensor for up to 30 days, including at least weekly downloads of pulmonary artery pressure recordings, interpretation(s), trend analysis, and report(s) by a physician or other qualified health care professional	NO
Advanced Imaging	93303	Transthoracic echocardiography or congenital cardiac anomalies; complete	YES
Advanced Imaging	93304	Transthoracic echocardiography or congenital cardiac anomalies; follow-up or limited study	YES
Advanced Imaging	93307	Transthoracic echocardiography; complete, without spectral Doppler echocardiography, or color flow Doppler echocardiography	NO
Advanced Imaging	93308	Transthoracic echocardiography; complete, without spectral Doppler echocardiography, or color flow Doppler echocardiography follow-up or limited study	NO
Advanced Imaging	93312	Echocardiography, transesophageal, real-time with image documentation (2-D) (with or without M-mode recording)	NO
Advanced Imaging	93313	Echocardiography, transesophageal, probe placement only	NO
Advanced Imaging	93314	Echocardiography, transesophageal, image acquisition, interpretation and report only	NO
Advanced Imaging	93315	Echocardiography, transesophageal for congenital cardiac anomalies	NO
Advanced Imaging	93316	Echocardiography, transesophageal, probe placement only (congenital cardiac anomalies)	NO
Advanced Imaging	93317	Echocardiography, transesophageal, image acquisition, interpretation and report only (congenital cardiac anomalies)	NO
Advanced Imaging	93350	Echocardiography, transthoracic during rest and cardiovascular stress test using treadmill, bicycle exercise and/or pharmacologically induced stress, with interpretation and report	NO

Advanced Imaging	93351	Echocardiography, transthoracic during rest and cardiovascular stress test using treadmill, bicycle exercise and/or pharmacologically induced stress, with interpretation and report; including performance of continuous electrocardiographic monitoring with physician supervision	NO
Investigational Potential	93356	Myocardial strain imaging using speckle tracking-derived assessment of myocardial mechanics (List separately in addition to codes for echocardiography imaging)	YES
Procedure - Cardiac	93454	Catheter placement in coronary artery(s) for coronary angiography, including intraprocedural injection(s) for coronary angiography, imaging supervision and interpretation	NO
Procedure - Cardiac	93455	Catheter placement in coronary artery(s) for coronary angiography, including intraprocedural injection(s) for coronary angiography, imaging supervision and interpretation; with catheter placement(s) in bypass graft(s) (internal mammary, free arterial, venous grafts) including intraprocedural injection(s) for bypass graft angiography	NO
Advanced Imaging	93456	Catheter placement in coronary artery(s) for coronary angiography, including intraprocedural injection(s) for coronary angiography, imaging supervision and interpretation; with right heart catheterization	NO
Procedure - Cardiac	93457	Catheter placement in coronary artery(s) for coronary angiography, including intraprocedural injection(s) for coronary angiography, imaging supervision and interpretation; with catheter placement(s) in bypass graft(s) (internal mammary, free arterial, venous grafts) including intraprocedural injection(s) for bypass graft angiography and right heart catheterization	NO
Procedure - Cardiac	93458	Catheter placement in coronary artery(s) for coronary angiography, including intraprocedural injection(s) for coronary angiography, imaging supervision and interpretation; with left heart catheterization including intraprocedural injection(s) for left ventriculography, when performed	NO
Procedure - Cardiac	93459	Catheter placement in coronary artery(s) for coronary angiography, including intraprocedural injection(s) for coronary angiography, imaging supervision and interpretation; with left heart catheterization including intraprocedural injection(s) for left ventriculography, when performed, catheter placement(s) in bypass graft(s) (internal mammary, free arterial, venous grafts) with bypass graft angiography	NO
Procedure - Cardiac	93460	Catheter placement in coronary artery(s) for coronary angiography, including intraprocedural injection(s) for coronary angiography, imaging supervision and interpretation; with right and left heart catheterization including intraprocedural injection(s) for left ventriculography, when performed	NO
Procedure - Cardiac	93461	Catheter placement in coronary artery(s) for coronary angiography, including intraprocedural injection(s) for coronary angiography, imaging supervision and interpretation; with right and left heart catheterization including intraprocedural injection(s) for left ventriculography, when performed, catheter placement(s) in bypass graft(s) (internal mammary, free arterial, venous grafts) with bypass graft angiography	NO
Investigational Potential	93580	Percutaneous transcatheter closure of congenital interatrial communication (ie, Fontan fenestration, atrial septal defect) with implant	YES
Procedure - Cardiac	93600	Bundle of His recording	NO
Procedure - Cardiac	93602	Intra-atrial recording	NO
Procedure - Cardiac	93603	Right ventricular recording	NO

Procedure - Cardiac	93609	Intraventricular and/or intra-atrial mapping of tachycardia site(s) with catheter manipulation to record from multiple sites to identify origin of tachycardia	NO
Procedure - Cardiac	93613	Intracardiac electrophysiologic 3-dimensional mapping	NO
Procedure - Cardiac	93619	Comprehensive electrophysiologic evaluation with right atrial pacing and recording, right ventricular pacing and recording, His bundle recording, including insertion and repositioning of multiple electrode catheters, without induction or attempted induction of arrhythmia	NO
Procedure - Cardiac	93620	Comprehensive electrophysiologic evaluation including insertion and repositioning of multiple electrode catheters with induction or attempted induction of arrhythmia; with right atrial pacing and recording, right ventricular pacing and recording, His bundle recording	NO
Procedure - Cardiac	93621	Comprehensive electrophysiologic evaluation including insertion and repositioning of multiple electrode catheters with induction or attempted induction of arrhythmia; with left atrial pacing and recording from coronary sinus or left atrium	NO
Procedure - Cardiac	93622	Comprehensive electrophysiologic evaluation including insertion and repositioning of multiple electrode catheters with induction or attempted induction of arrhythmia; with left ventricular pacing and recording	NO
Procedure - Cardiac	93624	Electrophysiologic follow-up study with pacing and recording to test effectiveness of therapy, including induction or attempted induction of arrhythmia	NO
Procedure - Cardiac	93640	Electrophysiologic evaluation of single or dual chamber pacing cardioverter-defibrillator leads including defibrillation threshold evaluation (induction of arrhythmia evaluation of sensing and pacing for arrhythmia termination) at time of initial implantation or replacement	NO
Procedure - Cardiac	93641	Electrophysiologic evaluation of single or dual chamber pacing cardioverter-defibrillator leads including defibrillation threshold evaluation (induction of arrhythmia evaluation of sensing and pacing for arrhythmia termination) at time of initial implantation or replacement; with testing of single or dual chamber pacing cardioverter-defibrillator pulse generator	NO
Procedure - Cardiac	93650	Intracardiac catheter ablation of atrioventricular node function, atrioventricular conduction for creation of complete heart block, with or without temporary pacemaker placement	NO
Procedure - Cardiac	93653	Comprehensive electrophysiologic evaluation with insertion and repositioning of multiple electrode catheters, induction or attempted induction of an arrhythmia with right atrial pacing and recording and catheter ablation of arrhythmogenic focus, including intracardiac electrophysiologic 3-dimensional mapping, right ventricular pacing and recording, left atrial pacing and recording from coronary sinus or left atrium, and His bundle recording, when performed, with treatment of supraventricular tachycardia by ablation of fast or slow atrioventricular pathway, accessory atrioventricular connection, cavo-tricuspid isthmus or other single atrial focus or source of atrial re-entry	NO

Procedure - Cardiac	93654	Comprehensive electrophysiologic evaluation with insertion and repositioning of multiple electrode catheters, induction or attempted induction of an arrhythmia with right atrial pacing and recording, and catheter ablation of arrhythmogenic focus, including intracardiac electrophysiologic 3- dimensional mapping, right ventricular pacing and recording, left atrial pacing and recording from coronary sinus or left atrium, and HIS bundle recording, when performed; with treatment of ventricular tachycardia or focus of ventricular ectopy including left ventricular pacing and recording, when performed	NO
Procedure - Cardiac	93655	Intracardiac catheter ablation of a discrete mechanism of arrhythmia which is distinct from the primary ablated mechanism, including repeat diagnostic maneuvers, to treat a spontaneous or induced arrhythmia (List separately in addition to code for primary procedure)	NO
Procedure - Cardiac	93656	Comprehensive electrophysiologic evaluation including transeptal catheterizations, insertion and repositioning of multiple electrode catheters with intracardiac catheter ablation of atrial fibrillation by pulmonary vein isolation, including intracardiac electrophysiologic 3-dimensional mapping, intracardiac echocardiography including imaging supervision and interpretation, induction or attempted induction of an arrhythmia including left or right atrial pacing/recording, right ventricular pacing/recording, and His bundle recording, when performed	NO
Procedure - Cardiac	93657	Additional linear or focal intracardiac catheter ablation of the left or right atrium for treatment of atrial fibrillation remaining after completion of pulmonary vein isolation	NO
Investigational Potential	93702	Bioimpedance spectroscopy (BIS), extracellular fluid analysis for lymphedema assessment(s)	NO
Procedure - Cardiac	93745	Initial set-up and programming by a physician or other qualified health care professional of wearable cardioverter-defibrillator, includes initial programming of system, establishing baseline electronic ECG, transmission of data to data repository, patient instruction in wearing system and patient reporting of problems or events	NO
Procedure - Cardiac	93799	Unlisted cardiovascular service or procedure [when specified as pulsed field ablation (PFA) or IRE for pulmonary vein isolation]	YES
Advanced Imaging	93880	Duplex scan of extracranial arteries; complete bilateral study	NO
Advanced Imaging	93882	Duplex scan of extracranial arteries; unilateral or limited study	NO
Investigational Potential	93895	Quantitative carotid intima media thickness and carotid atheroma evaluation, bilateral	NO
Advanced Imaging	93922	Limited bilateral noninvasive physiologic studies of upper or lower extremity arteries, (e.g., for lower extremity: ankle/brachial indices at distal posterior tibial and anterior tibial/dorsalis pedis arteries plus bidirectional, Doppler waveform recording and analysis at 1-2 levels, or ankle/brachial indices at distal posterior tibial and anterior tibial/dorsalis pedis arteries plus volume plethysmography at 1-2 levels, or ankle/ brachial indices at distal posterior tibial and anterior tibial/dorsalis pedis arteries with, transcutaneous oxygen tension measurement at 1-2 levels)	NO

Advanced Imaging	93923	Complete bilateral noninvasive physiologic studies of upper or lower extremity arteries, 3 or more levels (e.g., for lower extremity: ankle/brachial indices at distal posterior tibial and anterior tibial/dorsalis pedis arteries plus segmental blood pressure measurements with bidirectional Doppler waveform recording and analysis, at 3 or more levels, or ankle/brachial indices at distal posterior tibial and anterior tibial/dorsalis pedis arteries plus segmental volume plethysmography at 3 or more levels, or ankle/brachial indices at distal posterior tibial and anterior tibial/dorsalis pedis arteries plus segmental transcutaneous oxygen tension measurements at 3 or more levels), or single level study with provocative functional maneuvers (e.g., measurements with postural provocative tests, or measurements with reactive hyperemia)	NO
Advanced Imaging	93924	Noninvasive physiologic studies of lower extremity arteries, at rest and following treadmill stress testing, (i.e., bidirectional Doppler waveform or volume plethysmography recording and analysis at rest with ankle/brachial indices immediately after and at timed intervals following performance of a standardized protocol on a motorized treadmill plus recording of time of onset of claudication or other symptoms, maximal walking time, and time to recovery) complete bilateral study	NO
Advanced Imaging	93925	Duplex scan of lower extremity arteries or arterial bypass grafts; complete bilateral study	NO
Advanced Imaging	93926	Duplex scan of lower extremity arteries or arterial bypass grafts; unilateral or limited study	NO
Advanced Imaging	93930	Duplex scan of upper extremity arteries or arterial bypass grafts; complete bilateral study	NO
Advanced Imaging	93931	Duplex scan of upper extremity arteries or arterial bypass grafts; unilateral or limited study	NO
Advanced Imaging	93978	Duplex scan of aorta, inferior vena cava, iliac vasculature, or bypass grafts; complete study	NO
Advanced Imaging	93979	Duplex scan of aorta, inferior vena cava, iliac vasculature, or bypass grafts; unilateral or limited study	NO
Investigational Potential	93998	Unlisted noninvasive vascular diagnostic study [when specified as NIR imaging of the brain for hematoma screening]	YES
Procedure - Misc.	94625	PHYS/QHP SVCS OP PULM REHAB WO CONT OXIMTRY MNTR	YES
Procedure - Misc.	94626	PHYS/QHP SVCS OP PULM REHAB W/CONT OXIMTRY MNTR	YES
Respiratory	94799	PULMONARY SERVICE/PROCEDURE	YES
Investigational Potential	95060	Ophthalmic mucous membrane tests	NO
Investigational Potential	95065	Direct nasal mucous membrane test	NO
Investigational Potential	95199	Unlisted allergy/clinical immunologic service or procedure [when specified as cytotoxic testing for allergies]	YES
Cardiac - Monitor	95700	EEG CONT REC W/VIDEO BY TECH MIN 8 CHANNELS	NO
Cardiac - Monitor	95705	EEG W/O VIDEO BY TECH 2-12 HR UNMONITORED	NO
Cardiac - Monitor	95706	EEG W/O VIDEO BY TECH 2-12 HR INTERMITTENT MNTR	NO
Cardiac - Monitor	95707	EEG W/O VIDEO BY TECH 2-12HR CONTINUOUS R-T MNTR	NO
Cardiac - Monitor	95708	EEG W/O VID BY TECH EA INCR 12-26HR UNMONITORED	NO
Cardiac - Monitor	95709	EEG W/O VID BY TECH EA INCR 12-26 HR INTMT MNTR	NO
Cardiac - Monitor	95710	EEG W/O VID TECH EA INCR 12-26 HR CONT R-T MNTR	NO
Cardiac - Monitor	95711	VEEG BY TECH 2-12 HOURS UNMONITORED	NO
Cardiac - Monitor	95712	VEEG BY TECH 2-12 HR INTERMITTENT MONITORING	NO

Cardiac - Monitor	95713	VEEG BY TECH 2-12 HR CONTINUOUS R-T MONITORING	NO
Cardiac - Monitor	95714	VEEG BY TECH EA INCR 12-26 HR UNMONITORED	NO
Cardiac - Monitor	95715	VEEG BY TECH EA INCR 12-26 HR INTERMITTENT MNTR	NO
Cardiac - Monitor	95716	VEEG BY TECH EA INCR 12-26 HR CONT R-T MNTR	NO
Cardiac - Monitor	95717	EEG PHYS/QHP 2-12 HR WITHOUT VIDEO	NO
Cardiac - Monitor	95718	EEG PHYS/QHP 2-12 HR WITH VIDEO	NO
Cardiac - Monitor	95719	EEG PHYS/QHP EA INCR>12HR<26HR AFTER 24HR WO VID	NO
Cardiac - Monitor	95720	EEG PHYS/QHP EA INCR>12HR<26HR AFTER 24HR W/VEEG	NO
Cardiac - Monitor	95721	EEG COMPLETE STD PHYS/QHP>36 HR<60 HR W/O VIDEO	NO
Cardiac - Monitor	95722	EEG COMPLETE STD PHYS/QHP>36 HR<60 HR W/VEEG	NO
Cardiac - Monitor	95723	EEG COMPLETE STD PHYS/QHP>60 HR<84 HR W/O VIDEO	NO
Cardiac - Monitor	95724	EEG COMPLETE STD PHYS/QHP>60 HR<84 HR W/VEEG	NO
Cardiac - Monitor	95725	EEG COMPLETE STD PHYS/QHP>84 HR W/O VID	NO
Cardiac - Monitor	95726	EEG COMPLETE STD PHYS/QHP>84 HR W/VEEG	NO
Sleep Disorder Management	95782	Polysomnography; Younger than 6 years, sleep staging with 4 or more additional parameters of sleep, attended by a technologist	NO
Sleep Disorder Management	95783	Polysomnography; Younger than 6 years, sleep staging with 4 or more additional parameters of sleep, with initiation of continuous positive airway pressure therapy or bi-level ventilation, attended by a technologist	NO
Sleep Disorder Management	95800	Sleep study, unattended, simultaneous recording; heart rate, oxygen saturation, respiratory analysis (e.g., by air flow or peripheral arterial tone) and sleep time	NO
Sleep Disorder Management	95801	Sleep study, unattended, simultaneous recording; minimum of heart rate, oxygen saturation, and respiratory analysis (e.g., by air flow or peripheral arterial tone)	NO
Investigational Potential	95803	Sleep study/Actigraphy testing, recording, analysis, interpretation, and report (minimum of 72 hours to 14 consecutive days of recording)	NO
Sleep Disorder Management	95805	Multiple sleep latency or maintenance of wakefulness testing, recording, analysis and interpretation of physiological measurements of sleep during multiple trials to assess sleepiness	NO
Sleep Disorder Management	95807	Sleep study, simultaneous recording of ventilation, respiratory effort, ECG or heart rate, and oxygen saturation, attended by a technologist	NO
Sleep Disorder Management	95808	Polysomnography; Any age, sleep staging with 1-3 additional parameters of sleep, attended by a technologist	NO
Sleep Disorder Management	95810	Polysomnography; Age 6 years or older, sleep staging with 4 or more additional parameters of sleep, attended by a technologist	NO
Sleep Disorder Management	95811	Polysomnography; Age 6 years or older, sleep staging with 4 or more additional parameters of sleep, with initiation of continuous positive airway pressure therapy or bi-level ventilation, attended by a technologist	NO
Investigational Potential	95905	Motor and/or sensory nerve conduction, using preconfigured electrode array(s), amplitude and latency/velocity study, each limb, includes F-wave study when performed, with interpretation and report	YES
Procedure - Misc.	95940	IONM 1 ON 1 IN OR W/ATTENDANCE EACH 15 MINUTES	NO
Procedure - Misc.	95941	IONM REMOTE/NEARBY/>1 PATIENT IN OR PER HOUR	NO
Advanced Imaging	95965	Magnetoencephalography (MEG), recording and analysis; for spontaneous brain magnetic activity (eg, epileptic cerebral cortex localization)	NO

Advanced Imaging	95966	Magnetoencephalography (MEG), recording and analysis; for evoked magnetic fields, single modality (eg, sensory, motor, language, or visual cortex localization)	NO
Advanced Imaging	95967	Magnetoencephalography (MEG), recording and analysis; for evoked magnetic fields, each additional modality (eg, sensory, motor, language, or visual cortex localization) (List separately in addition to code for primary procedure)	NO
Neurostimulator	95976	Electronic analysis of implanted neurostimulator pulse generator/transmitter (eg, contact group[s], interleaving, amplitude, pulse width, frequency [Hz], on/off cycling, burst, magnet mode, dose lockout, patient selectable parameters, responsive neurostimulation, detection algorithms, closed loop parameters, and passive parameters) by physician or other qualified health care professional; with simple cranial nerve neurostimulator pulse generator/transmitter programming by physician or other qualified health care professional	YES
Neurostimulator	95977	Electronic analysis of implanted neurostimulator pulse generator/transmitter (eg, contact group[s], interleaving, amplitude, pulse width, frequency [Hz], on/off cycling, burst, magnet mode, dose lockout, patient selectable parameters, responsive neurostimulation, detection algorithms, closed loop parameters, and passive parameters) by physician or other qualified health care professional; with complex cranial nerve neurostimulator pulse generator/transmitter programming by physician or other qualified health care professional	YES
Investigational Potential	95980	Electronic analysis of implanted neurostimulator pulse generator system (e.g., rate, pulse amplitude and duration, configuration of wave form, battery status, electrode selectability, output modulation, cycling, impedance and patient measurements), gastric neurostimulator pulse generator/transmitter; intraoperative, with programming	NO
Investigational Potential	95981	Electronic analysis of implanted neurostimulator pulse generator system; gastric neurostimulator pulse generator/transmitter	NO
Investigational Potential	95982	Electronic analysis of implanted neurostimulator pulse generator system; gastric neurostimulator pulse generator/transmitter	NO
Investigational Potential	95999	Unlisted neurological or neuromuscular diagnostic procedure [when specified as nap study]	YES
Pharmacy	96365	Intravenous infusion, for therapy, prophylaxis, or diagnosis (specify substance or drug); initial, up to 1 hour	YES
Pharmacy	96366	Intravenous infusion, for therapy, prophylaxis, or diagnosis (specify substance or drug); each additional hour	YES
Pharmacy	96367	Intravenous infusion, for therapy, prophylaxis, or diagnosis (specify substance or drug); additional sequential infusion of a new drug/substance, up to 1 hour	YES
Pharmacy	96368	Intravenous infusion, for therapy, prophylaxis, or diagnosis (specify substance or drug); concurrent infusion	YES
Chemotherapy	96371	Subcutaneous infusion for therapy or prophylaxis (specify substance or drug); additional pump set-up with establishment of new subcutaneous infusion site(s) (List separately in addition to code for primary procedure)	YES
Pharmacy	96372	Therapeutic, prophylactic or diagnostic injection (specify substance or drug); subcutaneous or intramuscular [when specified as intramuscular antibiotic injection]	YES

Chemotherapy	96401	Chemotherapy administration, subcutaneous or intramuscular; non-hormonal anti-neoplastic	YES
Chemotherapy	96402	Chemotherapy administration, subcutaneous or intramuscular; hormonal anti-neoplastic	YES
Chemotherapy	96416	Chemotherapy administration, intravenous infusion technique; initiation of prolonged chemotherapy infusion (more than 8 hours), requiring use of a portable or implantable pump	YES
Chemotherapy	96425	Chemotherapy administration, intra-arterial; infusion technique, initiation of prolonged infusion (more than 8 hours), requiring the use of a portable or implantable pump	YES
Investigational Potential	96549	Unlisted chemotherapy procedure [when specified as insulin potentiation therapy]	YES
Investigational Potential	96902	Microscopic examination of hairs plucked or clipped by the examiner (excluding collection by patient) to determine telogen and anagen counts, or structural hair shaft abnormality	NO
Investigational Potential	96904	Whole body integumentary photography, for monitoring of high risk patients with dysplastic nevus syndrome or a history of dysplastic nevi, or patients with a personal or familial history of melanoma	YES
Investigational Potential	96931	Reflectance confocal microscopy (RCM) for cellular and sub-cellular imaging of skin; image acquisition and interpretation and report, first lesion	YES
Investigational Potential	96932	Reflectance confocal microscopy (RCM) for cellular and sub-cellular imaging of skin; image acquisition only, first lesion	YES
Investigational Potential	96933	Reflectance confocal microscopy (RCM) for cellular and sub-cellular imaging of skin; interpretation and report only, first lesion	YES
Investigational Potential	96934	Reflectance confocal microscopy (RCM) for cellular and sub-cellular imaging of skin; image acquisition and interpretation and report, each additional lesion	YES
Investigational Potential	96935	Reflectance confocal microscopy (RCM) for cellular and sub-cellular imaging of skin; image acquisition only, each additional lesion	YES
Investigational Potential	96936	Reflectance confocal microscopy (RCM) for cellular and sub-cellular imaging of skin; interpretation and report only, each additional lesion	YES
Cosmetic Potential	96999	Unlisted special dermatological service or procedure [when specified as tunable dye or pulsed dye laser treatment] or [when specified as laser treatment, pulsed dye laser or light treatment]	YES
Cosmetic Potential	97010	HOT OR COLD PACKS THERAPY	NO
Outpatient Therapies	97012	MECHANICAL TRACTION THERAPY	NO
Cosmetic Potential	97014	ELECTRIC STIMULATION THERAPY	NO
Cosmetic Potential	97016	VASOPNEUMATIC DEVICE THERAPY	NO
Cosmetic Potential	97018	PARAFFIN BATH THERAPY	NO
Cosmetic Potential	97022	WHIRLPOOL THERAPY	NO
Cosmetic Potential	97024	DIATHERMY TREATMENT	NO
Cosmetic Potential	97026	INFRARED THERAPY	NO
Cosmetic Potential	97028	ULTRAVIOLET THERAPY	NO
Investigational Potential	97039	Unlisted modality [when specified as vertebral axial decompression]	YES
Outpatient Therapies	97110	THERAPEUTIC EXERCISES	YES
Outpatient Therapies	97129	THER INTERVNTN COG FUNCTN DIR CONTACT IST 15 MINUTES	YES
Investigational Potential	97139	Unlisted therapeutic procedure [when specified as sensory stimulation or coma stimulation therapy]	YES

Behavioral Health	97151	Behavior identification assessment, administered by a physician or other qualified health care professional, each 15 minutes of the physician's or other qualified health care professional's time face-to-face with patient and/or guardian(s)/caregiver(s) administering assessments and discussing findings and recommendations, and non-face-to-face analyzing past data, scoring/interpreting the assessment, and preparing the report/treatment plan	NO
Behavioral Health	97152	Behavior identification-supporting assessment, administered by one technician under the direction of a physician or other qualified health care professional, face-to-face with the patient, each 15 minutes	NO
Behavioral Health	97153	Adaptive behavior treatment by protocol, administered by technician under the direction of a physician or other qualified health care professional, face-to-face with one patient, each 15 minutes	YES
Behavioral Health	97154	Group adaptive behavior treatment by protocol, administered by technician under the direction of a physician or other qualified health care professional, face-to-face with two or more patients, each 15	YES
Behavioral Health	97155	Adaptive behavior treatment with protocol modification, administered by physician or other qualified health care professional, which may include simultaneous direction of technician, face-to-face with one patient, each 15 minutes	YES
Behavioral Health	97156	Family adaptive behavior treatment guidance, administered by physician or other qualified health care professional (with or without the patient present), face-to-face with guardian(s)/caregiver(s), each 15 minutes	YES
Behavioral Health	97157	Multiple-family group adaptive behavior treatment guidance, administered by physician or other qualified health care professional (without the patient present), face-to-face with multiple sets of guardians/caregivers, each 15 minutes	YES
Behavioral Health	97158	Group adaptive behavior treatment with protocol modification, administered by physician or other qualified health care professional, face-to-face with multiple patients, each 15 minutes	YES
Outpatient Therapies	97161	PHYSICAL THERAPY EVALUATION LOW COMPLEX 20 MINS	YES
Outpatient Therapies	97162	PHYSICAL THERAPY EVALUATION MOD COMPLEX 30 MINS	YES
Outpatient Therapies	97163	PHYSICAL THERAPY EVALUATION HIGH COMPLEX 45 MINS	YES
Outpatient Therapies	97164	PHYSICAL THERAPY RE-EVAL EST PLAN CARE 20 MINS	YES
Outpatient Therapies	97165	OCCUPATIONAL THERAPY EVAL LOW COMPLEX 30 MINS	YES
Outpatient Therapies	97166	OCCUPATIONAL THERAPY EVAL MOD COMPLEX 45 MINS	YES
Outpatient Therapies	97167	OCCUPATIONAL THERAPY EVAL HIGH COMPLEX 60 MINS	YES
Outpatient Therapies	97168	OCCUPATIONAL THER RE-EVAL EST PLAN CARE 30 MINS	YES
Outpatient Therapies	97533	Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	NO
Outpatient Therapies	97546	WORK HARDENING/CONDN,EA ADDNL HR	NO
Durable Medical Equipment	97605	Negative pressure wound therapy (eg, vacuum assisted drainage collection), utilizing durable medical equipment (DME), including topical application(s), wound assessment, and instruction(s) for ongoing care, per session; total wound(s) surface area less than or equal to 50 square centimeters	YES

Durable Medical Equipment	97606	Negative pressure wound therapy (eg, vacuum assisted drainage collection), utilizing durable medical equipment (DME), including topical application(s), wound assessment, and instruction(s) for ongoing care, per session; total wound(s) surface area greater than 50 square centimeters	YES
Investigational Potential	97607	NEG PRESSURE WOUND THERAPY NON DME </= 50 SQ CM	NO
Investigational Potential	97608	NEG PRESSURE WOUND THERAPY NON DME >50 SQ CM	NO
Investigational Potential	97610	Low frequency, non-contact, non-thermal ultrasound, including topical application(s), when performed, wound assessment, and instruction(s) for ongoing care, per day	YES
Investigational Potential	97750	PHYSICAL PERFORMANCE TEST	NO
Investigational Potential	97799	Unlisted physical medicine/rehabilitation service or procedure [when specified as biomagnetic therapy] or [when specified as sensory stimulation or coma stimulation therapy] or [when specified as isometric or isokinetic testing]	YES
Investigational Potential	98978	Remote therapeutic monitoring (e.g., therapy adherence, therapy response); device(s) supply with scheduled (e.g., daily) recording(s) and/or programmed alert(s) transmission to monitor cognitive behavioral therapy, each 30 days	NO
Hyperbaric treatment	99183	Physician attendance and supervision of hyperbaric oxygen therapy, per session	YES
Investigational Potential	99199	Unlisted special service, procedure or report [when specified as stress management using wearable devices]	YES
Hospice	99377	HOSPICE CARE SUPERVISION,15-29 MIN	YES
Hospice	99378	HOSPICE CARE SUPERVISION,30+ MIN	YES
Eval and Management	99379	NURSING FAC CARE SUPERVN,15-29 MIN	NO
Eval and Management	99380	NURSING FAC CARE SUPERVN,30+ MIN	NO
Eval and Management	99415	PROLNG CLINCL STAFF SVC DURING O/P E/M 1ST HR	NO
Eval and Management	99416	PROLNG CLINCL STAFF SVC DURING O/P E/M EA 30 MIN	NO
Eval and Management	99429	UNLISTED PREVENTIVE SERVICE	YES
Eval and Management	99495	Transitional care management services with the following required elements: Communication (direct contact, telephone, electronic) with the patient and/or caregiver within 2 business days of discharge, At least moderate level of medical decision making during the service period, Face-to-face visit, within 14 calendar days of discharge	NO
Eval and Management	99496	Transitional care management services with the following required elements: Communication (direct contact, telephone, electronic) with the patient and/or caregiver within 2 business days of discharge, High level of medical decision making during the service period, Face-to-face visit, within 7 calendar days of discharg	NO
Eval and Management	99499	UNLISTED E/M SERVICE	YES
Home Health	99500	Home visit for prenatal monitoring and assessment to include fetal heart rate, non-stress test, uterine monitoring, and gestational diabetes monitoring	See note
Home Health	99501	HOME VISIT,POSTNATAL ASSESSMENT	NO
Home Health	99502	HOME VISIT,NEWBORN CARE,ASSESSMENT	NO
Home Health	99503	Home visit for respiratory therapy care (eg, bronchodilator, oxygen therapy, respiratory assessment, apnea evaluation)	See note
Home Health	99504	Home visit for mechanical ventilation care	See note
Home Health	99505	Home visit for stoma care and maintenance including colostomy and cystostomy	See note

Home Health	99506	Home visit for intramuscular injections	See note
Home Health	99507	Home visit for care and maintenance of catheter(s) (eg, urinary, drainage, and enteral)	See note
Home Health	99509	Home visit for assistance with activities of daily living and personal care	See note
Home Health	99510	HOME VISIT,COUNSELING	YES
Home Health	99511	Home visit for fecal impaction management and enema administration	See note
Home Health	99512	Home visit for hemodialysis	YES
Home Health	99600	Unlisted home visit service or procedure [when specified as home visit for wound care]	YES
Home Health	99601	HOME INFUSION/VISIT, 2 HRS	YES
Home Health	99602	HOME INFUSION, EACH ADDTL HR	YES
Investigational Potential	0002M	Liver disease, ten biochemical assays (ALT, A2- macroglobulin, apolipoprotein A-1, total bilirubin, GGT, haptoglobin, AST, glucose, total cholesterol and triglycerides) utilizing serum, prognostic algorithm reported as quantitative scores for fibrosis, steatosis and alcoholic steatohepatitis (ASH)	NO
Investigational Potential	0002U	Oncology (colorectal), quantitative assessment of three urine metabolites (ascorbic acid, succinic acid, and carnitine) by liquid chromatography with tandem mass spectrometry (LC-MS/MS) using multiple reaction monitoring acquisition, algorithm reported as likelihood of adenomatous polyps. PolypDX™	NO
Investigational Potential	0003M	Liver disease, ten biochemical assays (ALT, A2- macroglobulin, apolipoprotein A-1, total bilirubin, GGT, haptoglobin, AST, glucose, total cholesterol and triglycerides) utilizing serum, prognostic algorithm reported as quantitative scores for fibrosis, steatosis and nonalcoholic steatohepatitis (NASH)	NO
Investigational Potential	0003U	Oncology (ovarian) biochemical assays of five proteins (apolipoprotein A-1, CA 125 II, follicle stimulating hormone, human epididymis protein 4, transferrin), utilizing serum, algorithm reported as a likelihood score. Overa (OVA1 Next Generation)	NO
Genetic Testing	0005U	Oncology (prostate) gene expression profile by real- time RT-PCR of 3 genes (ERG, PCA3, and SPDEF), urine, algorithm reported as risk score	NO
Investigational Potential	0006M	Oncology (hepatic), mRNA expression levels of 161 genes, utilizing fresh hepatocellular carcinoma tumor tissue, with alpha-fetoprotein level, algorithm reported as a risk classifier. This MAAA code is for the HeproDX™, GoPath Laboratories, LLC	NO
Genetic Testing	0007U	Drug test(s), presumptive, with definitive confirmation of positive results, any number of drug classes, urine, includes specimen verification including DNA authentication in comparison to buccal DNA, per date of service	NO
Genetic Testing	0011M	Oncology, prostate cancer, mRNA expression assay of 12 genes (10 content and 2 housekeeping), RT- PCR test utilizing blood plasma and/or urine, algorithms to predict high-grade prostate cancer risk	NO
Investigational Potential	0012M	Oncology (urothelial), mRNA, gene expression profiling by real-time quantitative PCR of five genes (MDK, HOXA13, CDC2 [CDK1], IGFBP5, and CXCR2), utilizing urine, algorithm reported as a risk score for having urothelial carcinoma	NO
Genetic Testing	0012U	Germline disorders, gene rearrangement detection by whole genome next-generation sequencing, DNA, whole blood, report of specific gene rearrangement(s)	NO

Investigational Potential	0013M	Oncology (urothelial), mRNA, gene expression profiling by real-time quantitative PCR of five genes (MDK, HOXA13, CDC2 [CDK1], IGFBP5, and CXCR2), utilizing urine, algorithm reported as a risk score for having recurrent urothelial carcinoma	NO
Genetic Testing	0013U	Oncology (solid organ neoplasia), gene rearrangement detection by whole genome next- generation sequencing, DNA, fresh or frozen tissue or cells, report of specific gene rearrangement(s)	YES
Investigational Potential	0014M	Liver disease, analysis of 3 biomarkers (hyaluronic acid [HA], procollagen III amino terminal peptide [PIIINP], tissue inhibitor of metalloproteinase 1 [TIMP- 1]), using immunoassays, utilizing serum, prognostic algorithm reported as a risk score and risk of liver fibrosis and liver-related clinical events within 5 years	NO
Genetic Testing	0014U	Hematology (hematolymphoid neoplasia), gene rearrangement detection by whole genome next- generation sequencing, DNA, whole blood or bone marrow, report of specific gene rearrangement(s)	YES
Investigational Potential	0016M	Oncology (bladder), mRNA, microarray gene expression profiling of 209 genes, utilizing formalin fixed paraffinembedded tissue, algorithm reported as molecular subtype (luminal, luminal infiltrated, basal, basal claudin-low, neuroendocrine-like. This MAAA code is for the Decipher Bladder TURBT®	NO
Genetic Testing	0016U	Oncology (hematolymphoid neoplasia), RNA, BCR/ABL1 major and minor breakpoint fusion transcripts, quantitative PCR amplification, blood or bone marrow, report of fusion not detected or detected with quantitation	YES
Genetic Testing	0017U	Oncology (hematolymphoid neoplasia), JAK2 mutation, DNA, PCR amplification of exons 12-14 and sequence analysis, blood or bone marrow, report of JAK2 mutation not detected or detected	YES
Investigational Potential	0018M	Transplantation medicine (allograft rejection, renal), measurement of donor and third-party-induced CD154+Tcytotoxic memory cells, utilizing whole peripheral blood, algorithm reported as a rejection risk score	NO
Genetic Testing	0018U	Oncology (thyroid), microRNA profiling by RT-PCR of 10 microRNA sequences, utilizing fine needle aspirate, algorithm reported as a positive or negative result for moderate to high risk of malignancy	YES
Investigational Potential	0019M	Cardiovascular disease, plasma, analysis of protein biomarkers by aptamer-based microarray and algorithm reported as 4-year likelihood of coronary event in high-risk populations	NO
Genetic Testing	0019U	Oncology, RNA, gene expression by whole transcriptome sequencing, formalin-fixed paraffin embedded tissue or fresh frozen tissue, predictive algorithm reported as potential targets for therapeutic agents	NO
Investigational Potential	0021U	Oncology (prostate), detection of 8 autoantibodies (ARF 6, NKX3-1, 5'-UTR-BMI1, CEP 164, 3'-UTR-Ropporin, Desmocollin, AURKAIP-1, CSNK2A2), multiplexed immunoassay and flow cytometry serum, algorithm reported as risk score. Apify®	NO
Genetic Testing	0022U	Targeted genomic sequence analysis panel, non-small cell lung neoplasia, DNA and RNA analysis, 23 genes, interrogation for sequence variants and rearrangements, reported as presence or absence of variants and associated therapy(ies) to consider	NO
Genetic Testing	0023U	Oncology (acute myelogenous leukemia), DNA, genotyping of internal tandem duplication, p.D835, p.I836, using mononuclear cells, reported as detection or non-detection of FLT3 mutation and indication for or against the use of midostaurin	YES

Genetic Testing	0026U	Oncology (thyroid), DNA and mRNA of 112 genes, next-generation sequencing, fine needle aspirate of thyroid nodule, algorithmic analysis reported as a categorical result ("Positive, high probability of malignancy" or "Negative, low probability of malignancy")	YES
Genetic Testing	0027U	JAK2 (Janus kinase 2) (eg, myeloproliferative disorder) gene analysis, targeted sequence analysis exons 12-15	YES
Genetic Testing	0029U	Drug metabolism (adverse drug reactions and drug response), targeted sequence analysis (ie, CYP1A2, CYP2C19, CYP2C9, CYP2D6, CYP3A4, CYP3A5, CYP4F2, SLCO1B1, VKORC1 and rs12777823)	YES
Genetic Testing	0030U	Drug metabolism (warfarin drug response), targeted sequence analysis (ie, CYP2C9, CYP4F2, VKORC1, rs12777823)	YES
Genetic Testing	0031U	CYP1A2 (cytochrome P450 family 1, subfamily A, member 2)(eg, drug metabolism) gene analysis, common variants (ie, *1F, *1K, *6, *7)	NO
Genetic Testing	0032U	COMT (catechol-O-methyltransferase)(drug metabolism) gene analysis, c.472G>A (rs4680) variant	YES
Genetic Testing	0033U	HTR2A (5-hydroxytryptamine receptor 2A), HTR2C (5-hydroxytryptamine receptor 2C) (eg, citalopram metabolism) gene analysis, common variants (ie, HTR2A rs7997012 [c.614-221T>C], HTR2C rs3813929 [c.- 759C>T] and rs1414334 [c.551-3008C>G])	YES
Genetic Testing	0036U	Exome (ie, somatic mutations), paired formalin-fixed paraffin-embedded tumor tissue and normal specimen, sequence analyses	YES
Genetic Testing	0037U	Targeted genomic sequence analysis, solid organ neoplasm, DNA analysis of 324 genes, interrogation for sequence variants, gene copy number amplifications, gene rearrangements, microsatellite instability and tumor mutational burden	YES
Genetic Testing	0040U	BCR/ABL1 (t(9;22)) (eg, chronic myelogenous leukemia) translocation analysis, major breakpoint, quantitative	YES
Investigational Potential	0042T	Cerebral perfusion analysis using computed tomography with contrast administration, including post-processing of parametric maps with determination of cerebral blood flow, cerebral blood volume, and mean transit time	NO
Genetic Testing	0045U	Oncology (breast ductal carcinoma in situ), mRNA, gene expression profiling by realtime RT-PCR of 12 genes (7 content and 5 housekeeping), utilizing formalin-fixed paraffin-embedded tissue, algorithm reported as recurrence score	YES
Genetic Testing	0046U	FLT3 (fms-related tyrosine kinase 3) (eg, acute myeloid leukemia) internal tandem duplication (ITD) variants, quantitative	YES
Genetic Testing	0047U	Oncology (prostate), mRNA, gene expression profiling by real-time RT-PCR of 17 genes (12 content and 5 housekeeping), utilizing formalin- fixed paraffin-embedded tissue, algorithm reported as a risk score	YES
Genetic Testing	0048U	Oncology (solid organ neoplasia), DNA, targeted sequencing of protein-coding exons of 468 cancer- associated genes, including interrogation for somatic mutations and microsatellite instability, matched with normal specimens, utilizing formalin- fixed paraffin-embedded tumor tissue, report of clinically significant mutation(s)	YES
Genetic Testing	0049U	NPM1 (nucleophosmin) (eg, acute myeloid leukemia) gene analysis, quantitative	YES

Genetic Testing	0050U	Targeted genomic sequence analysis panel, acute myelogenous leukemia, DNA analysis, 194 genes, interrogation for sequence variants, copy number variants or rearrangements	YES
Investigational Potential	0052U	Lipoprotein, blood, high resolution fractionation and quantitation of lipoproteins, including all five major lipoprotein classes and subclasses of HDL, LDL, and VLDL by vertical auto profile ultracentrifugation	NO
Genetic Testing	0053U	Oncology (prostate cancer), FISH analysis of 4 genes (ASAP1, HDAC9, CHD1 and PTEN), needle biopsy specimen, algorithm reported as probability of higher tumor grade	YES
Investigational Potential	0054T	Computer-assisted musculoskeletal surgical navigational orthopedic procedure, with image-guidance based on fluoroscopic images	NO
Investigational Potential	0055T	Computer-assisted musculoskeletal surgical navigational orthopedic procedure, with image-guidance based on CT/MRI images	NO
Transplant	0055U	Cardiology (heart transplant), cell-free DNA, PCR assay of 96 DNA target sequences (94 single nucleotide polymorphism targets and two control targets), plasma	NO
Genetic Testing	0056U	Hematology (acute myelogenous leukemia), DNA, whole genome next generation sequencing to detect gene rearrangement(s), blood or bone marrow, report of specific gene rearrangement(s)	YES
Investigational Potential	0062U	Autoimmune (systemic lupus erythematosus), IgG and IgM analysis of 80 biomarkers, utilizing serum, algorithm reported with a risk score	NO
Genetic Testing	0069U	Oncology (colorectal), microRNA, RT-PCR expression profiling of miR-31-3p, formalin-fixed paraffin- embedded tissue, algorithm reported as an expression score	YES
Genetic Testing	0070U	CYP2D6 (cytochrome P450, family 2, subfamily D, polypeptide 6) (eg, drug metabolism) gene analysis, common and select rare variants (ie, *2, *3, *4, *4N, *5, *6, *7, *8, *9, *10, *11, *12, *13, *14A, *14B, *15, *17, *29, *35, *36, *41, *57, *61, *63, *68, *83, *xN)	YES
Investigational Potential	0071T	Focused ultrasound ablation of uterine leiomyomata, including MR guidance; total leiomyomata volume less than 200 cc of tissue	NO
Genetic Testing	0071U	CYP2D6 (cytochrome P450, family 2, subfamily D, polypeptide 6) (eg, drug metabolism) gene analysis, full gene sequence (List separately in addition to code for primary procedure)	YES
Investigational Potential	0072T	Focused ultrasound ablation of uterine leiomyomata, including MR guidance; total leiomyomata volume greater or equal to 200 cc of tissue	NO
Genetic Testing	0072U	CYP2D6 (cytochrome P450, family 2, subfamily D, polypeptide 6) (eg, drug metabolism) gene analysis, targeted sequence analysis (ie, CYP2D6-2D7 hybrid gene) (List separately in addition to code for primary procedure)	YES
Genetic Testing	0073U	CYP2D6 (cytochrome P450, family 2, subfamily D, polypeptide 6) (eg, drug metabolism) gene analysis, targeted sequence analysis (ie, CYP2D7-2D6 hybrid gene) (List separately in addition to code for primary procedure)	YES
Genetic Testing	0074U	CYP2D6 (cytochrome P450, family 2, subfamily D, polypeptide 6) (eg, drug metabolism) gene analysis, targeted sequence analysis (ie, non-duplicated gene when duplication/multiplication is trans) (List separately in addition to code for primary procedure)	YES
Investigational Potential	0075T	Transcatheter placement of extracranial vertebral artery stent(s), including radiologic supervision and interpretation, open or percutaneous; initial vessel	NO

Genetic Testing	0075U	CYP2D6 (cytochrome P450, family 2, subfamily D, polypeptide 6) (eg, drug metabolism) gene analysis, targeted sequence analysis (ie, 5' gene duplication/multiplication) (List separately in addition to code for primary procedure)	YES
Investigational Potential	0076T	Each additional vessel	NO
Genetic Testing	0076U	CYP2D6 (cytochrome P450, family 2, subfamily D, polypeptide 6) (eg, drug metabolism) gene analysis, targeted sequence analysis (ie, 3' gene duplication/multiplication) (List separately in addition to code for primary procedure)	YES
Genetic Testing	0078U	Pain management (opioid-use disorder) genotyping panel, 16 common variants (ie, ABCB1, COMT, DAT1, DBH, DOR, DRD1, DRD2, DRD4, GABA, GAL, HTR2A, HTTLPR, MTHFR, MUOR, OPRK1, OPRM1), buccal swab or other germline tissue sample, algorithm reported as positive or negative risk of opioid-use disorder	YES
Genetic Testing	0079U	Comparative DNA analysis using multiple selected single-nucleotide polymorphisms (SNPs), urine and buccal DNA, for specimen identity verification	YES
Investigational Potential	0080U	Oncology (lung), mass spectrometric analysis of galectin-3-binding protein and scavenger receptor cysteine-rich type 1 protein MI30, with five clinical risk factors (age, smoking status, nodule diameter, nodule-spiculation status and nodule location), utilizing plasma, algorithm reported as a categorical probability of malignancy	NO
Transplant	0087U	Cardiology (heart transplant), mRNA gene expression profiling by microarray of 1283 genes, transplant biopsy tissue, allograft rejection and injury algorithm reported as a probability score	YES
Investigational Potential	0088U	Transplantation medicine (kidney allograft rejection), microarray gene expression profiling of 1494 genes, utilizing transplant biopsy tissue, algorithm reported as a probability score for rejection	NO
Genetic Testing	0089U	Oncology (melanoma), gene expression profiling by RTqPCR, PRAME and LINC00518, superficial collection using adhesive patch(es)	NO
Genetic Testing	0090U	Oncology (cutaneous melanoma), mRNA gene expression profiling by RT-PCR of 23 genes (14 content and 9 housekeeping), utilizing formalin- fixed paraffin-embedded (FFPE) tissue, algorithm reported as a categorical result (ie, benign, intermediate, malignant)	NO
Investigational Potential	0091U	Oncology (colorectal) screening, cell enumeration of circulating tumor cells, utilizing whole blood, algorithm, for the presence of adenoma or cancer, reported as a positive or negative result	NO
Investigational Potential	0092U	Oncology (lung), three protein biomarkers, immunoassay using magnetic nanosensor technology, plasma, algorithm reported as risk score for likelihood of malignancy	NO
Genetic Testing	0094U	Genome (eg, unexplained constitutional or heritable disorder or syndrome), rapid sequence analysis	YES
Investigational Potential	0095T	Removal of total disc arthroplasty (artificial disc), anterior approach, each additional interspace, cervical (List separately in addition to code for primary procedure)	NO
Investigational Potential	0096U	Oncology (lung), three protein biomarkers, immunoassay using magnetic nano sensor technology, plasma, algorithm reported as risk score for likelihood of malignancy. REVEAL Lung Nodule Characterization	NO

Investigational Potential	0098T	Revision including replacement of total disc arthroplasty (artificial disc), anterior approach, each additional interspace, cervical (List separately in addition to code for primary procedure)	NO
Investigational Potential	0100T	Placement of a subconjunctival retinal prosthesis receiver and pulse generator, and implantation of intra-ocular retinal electrode array, with vitrectomy	NO
Investigational Potential	0101T	Extracorporeal shock wave involving musculoskeletal system, not otherwise specified, high energy	NO
Genetic Testing	0101U	Hereditary colon cancer disorders (eg, Lynch syndrome, PTEN hamartoma syndrome, Cowden syndrome, familial adenomatosis polyposis), genomic sequence analysis panel utilizing a combination of NGS, Sanger, MLPA, and array CGH, with mRNA analytics to resolve variants of unknown significance when indicated (15 genes [sequencing and deletion/duplication], EPCAM and GREM1 [deletion/duplication only])	YES
Investigational Potential	0102T	Extracorporeal shock wave, performed by a physician, requiring anesthesia other than local, and involving the lateral humeral epicondyle	NO
Genetic Testing	0102U	Hereditary breast cancer-related disorders (eg, hereditary breast cancer, hereditary ovarian cancer, hereditary endometrial cancer), genomic sequence analysis panel utilizing a combination of NGS, Sanger, MLPA, and array CGH, with mRNA analytics to resolve variants of unknown significance when indicated (17 genes [sequencing and deletion/duplication])	YES
Genetic Testing	0103U	Hereditary ovarian cancer (eg, hereditary ovarian cancer, hereditary endometrial cancer), genomic sequence analysis panel utilizing a combination of NGS, Sanger, MLPA, and array CGH, with mRNA analytics to resolve variants of unknown significance when indicated (24 genes [sequencing and deletion/duplication], EPCAM [deletion/duplication only])	YES
Investigational Potential	0105U	Nephrology (chronic kidney disease), multiplex electrochemiluminescent immunoassay (ECLIA) of tumor necrosis factor receptor 1A, receptor superfamily 2 (TNFR1, TNFR2), and kidney injury molecule-1 (KIM-1) combined with longitudinal clinical data, including APOL1 genotype if available, and plasma (isolated fresh or frozen), algorithm reported as probability score for rapid kidney function decline (RKFD)	NO
Investigational Potential	0106T	Quantitative sensory testing (QST), testing and interpretation per extremity; using touch pressure stimuli to assess large diameter sensation	NO
Investigational Potential	0107T	Quantitative sensory testing (QST), testing and interpretation per extremity; using vibration stimuli to assess large diameter fiber sensation	NO
Investigational Potential	0108T	Quantitative sensory testing (QST), testing and interpretation per extremity; using cooling stimuli to assess small nerve fiber sensation and hyperalgesia	NO
Investigational Potential	0109T	Quantitative sensory testing (QST), testing and interpretation per extremity; using heat-pain stimuli to assess small nerve fiber sensation and hyperalgesia	NO
Investigational Potential	0110T	Quantitative sensory testing (QST), testing and interpretation per extremity; using other stimuli to assess sensation	NO
Genetic Testing	0111U	Oncology (colon cancer), targeted KRAS (codons 12, 13, and 61) and NRAS (codons 12, 13, and 61) gene analysis utilizing formalin-fixed paraffin-embedded tissue	YES
Genetic Testing	0112U	Infectious agent detection and identification, targeted sequence analysis (16S and 18S rRNA genes) with drug-resistance gene	NO

Genetic Testing	0113U	Oncology (prostate), measurement of PCA3 and TMPRSS2-ERG in urine and PSA in serum following prostatic massage, by RNA amplification and fluorescence-based detection, algorithm reported as risk score	YES
Investigational Potential	0117U	Pain management, analysis of 11 endogenous analytes (methylmalonic acid, xanthurenic acid, homocysteine, pyroglutamic acid, vanilmandelate, 5-hydroxyindoleacetic acid, hydroxymethylglutarate, ethylmalonate, 3-hydroxypropyl mercapturic acid (3-HPMA), quinolinic acid, kynurenic acid), LC-MS/MS, urine, algorithm reported as a pain-index score with likelihood of atypical biochemical function associated with pain	NO
Transplant	0118U	Transplantation medicine, quantification of donor-derived cell-free DNA using whole genome next-generation sequencing, plasma, reported as percentage of donor-derived cell-free DNA in the total cell-free DNA [when specified for heart transplant rejection]	NO
Investigational Potential	0119U	Cardiology, ceramides by liquid chromatography-tandem mass spectrometry, plasma, quantitative report with risk score for major cardiovascular events. MI-HEART Ceramides	NO
Genetic Testing	0129U	Hereditary breast cancer-related disorders (eg, hereditary breast cancer, hereditary ovarian cancer, hereditary endometrial cancer), genomic sequence analysis and deletion/duplication analysis panel (ATM, BRCA1, BRCA2, CDH1, CHEK2, PALB2, PTEN, and TP53)	YES
Genetic Testing	0130U	Hereditary colon cancer disorders (eg, Lynch syndrome, PTEN hamartoma syndrome, Cowden syndrome, familial adenomatosis polyposis), targeted mRNA sequence analysis panel (APC, CDH1, CHEK2, MLH1, MSH2, MSH6, MUTYH, PMS2, PTEN, and TP53)	YES
Genetic Testing	0131U	Hereditary breast cancer-related disorders (eg, hereditary breast cancer, hereditary ovarian cancer, hereditary endometrial cancer), targeted mRNA sequence analysis panel (13 genes) (List separately in addition to code for primary procedure)	YES
Genetic Testing	0132U	Hereditary ovarian cancer-related disorders (eg, hereditary breast cancer, hereditary ovarian cancer, hereditary endometrial cancer), targeted mRNA sequence analysis panel (17 genes) (List separately in addition to code for primary procedure)	YES
Genetic Testing	0133U	Hereditary prostate cancer-related disorders, targeted mRNA sequence analysis panel (11 genes)	YES
Genetic Testing	0134U	Hereditary pan cancer (eg, hereditary breast and ovarian cancer, hereditary endometrial cancer, hereditary colorectal cancer), targeted mRNA sequence analysis panel (18 genes) (List separately in addition to code for primary procedure)	YES
Genetic Testing	0135U	Hereditary gynecological cancer (eg, hereditary breast and ovarian cancer, hereditary endometrial cancer, hereditary colorectal cancer), targeted mRNA sequence analysis panel (12 genes) (List separately in addition to code for primary procedure)	YES
Genetic Testing	0136U	ATM (ataxia telangiectasia mutated) (eg, ataxia telangiectasia) mRNA sequence analysis	YES
Genetic Testing	0137U	PALB2 (partner and localizer of BRCA2) (eg, breast and pancreatic cancer) mRNA sequence analysis	YES
Genetic Testing	0138U	BRCA1 (BRCA1, DNA repair associated), BRCA2 (BRCA2, DNA repair associated) (eg, hereditary breast and ovarian cancer) mRNA sequence analysis	YES

Genetic Testing	0152U	Infectious disease (bacteria, fungi, parasites, and DNA viruses), DNA, plasma, untargeted next- generation sequencing, report for significant positive pathogens	YES
Genetic Testing	0153U	Oncology (breast), mRNA, gene expression profiling by next-generation sequencing of 101 genes, utilizing formalin-fixed paraffin-embedded tissue, algorithm reported as a triple negative breast cancer clinical subtype(s) with information on immune cell involvement	NO
Genetic Testing	0154U	Oncology (urothelial cancer), RNA, analysis by real- time RT-PCR of the FGFR3 (fibroblast growth factor receptor 3) gene analysis (ie, p.R248C [c.742C>T], p.S249C [c.746C>G], p.G370C [c.1108G>T], p.Y373C [c.1118A>G], FGFR3-TACC3v1, and FGFR3-TACC3 v3), utilizing formalin-fixed paraffin-embedded urothelial cancer tumor tissue, reported as FGFR gene alteration status	YES
Genetic Testing	0155U	Oncology (breast cancer), DNA, PIK3CA (phosphatidylinositol-4,5- bisphosphate 3- kinase, catalytic subunit alpha) (eg, breast cancer) gene analysis (ie, p.C420R, p.E542K, p.E545A, p.E545D [g.1635G>T only], p.E545G, p.E545K, p.Q546E, p.Q546R, p.H1047L, p.H1047R, p.H1047Y), utilizing formalin-fixed paraffin-embedded breast tumor tissue, reported as PIK3CA gene mutation status	YES
Investigational Potential	0156U	Copy number (e.g., intellectual disability, dysmorphology), sequence analysis. SMASH™	NO
Genetic Testing	0157U	APC (APC regulator of WNT signaling pathway) (eg, familial adenomatosis polyposis [FAP]) mRNA sequence analysis	YES
Genetic Testing	0158U	MLH1 (mutL homolog 1) (eg, hereditary non- polyposis colorectal cancer, Lynch syndrome) mRNA sequence analysis	YES
Genetic Testing	0159U	MSH2 (mutS homolog 2) (eg, hereditary colon cancer, Lynch syndrome) mRNA sequence analysis	YES
Genetic Testing	0160U	MSH6 (mutS homolog 6) (eg, hereditary colon cancer, Lynch syndrome) mRNA sequence analysis	YES
Genetic Testing	0161U	PMS2 (PMS1 homolog 2, mismatch repair system component) (eg, hereditary non- polyposis colorectal cancer, Lynch syndrome) mRNA sequence analysis	YES
Genetic Testing	0162U	Hereditary colon cancer (Lynch syndrome), targeted mRNA sequence analysis panel (MLH1, MSH2, MSH6, PMS2)	YES
Surgical - Spine	0163T	Revision including replacement of total disc arthroplasty (artificial disc), anterior approach, each additional interspace, lumbar (List separately in addition to code for primary procedure)	YES
Investigational Potential	0163U	Oncology (colorectal) screening, biochemical enzymelinked immunosorbent assay (ELISA) of 3 plasma or serum proteins (teratocarcinoma derived growth factor-1 [TDGFI, Cripto-1], carcinoembryonic antigen [CEA], extracellular matrix protein [ECM]), with demographic data (age, gender, CRC-screening compliance) using a proprietary algorithm and reported as likelihood of CRC or advanced adenomas. BeScreened™-CRC	NO
Investigational Potential	0164T	Removal of total disc arthroplasty, (artificial disc), anterior approach, each additional interspace, lumbar (List separately in addition to code for primary procedure)	NO
Investigational Potential	0164U	Gastroenterology (irritable bowel syndrome [IBS]), immunoassay for antiCdtB and anti-vinculin antibodies, utilizing plasma, algorithm for elevated or not elevated qualitative results	YES

Investigational Potential	0165T	Revision including replacement of total disc arthroplasty (artificial disc), anterior approach, each additional interspace, lumbar (List separately in addition to code for primary procedure)	NO
Investigational Potential	0166U	Liver disease, 10 biochemical assays (α 2- macroglobulin, haptoglobin, apolipoprotein A1, bilirubin, GGT, ALT, AST, triglycerides, cholesterol, fasting glucose) and biometric and demographic data, utilizing serum, algorithm reported as scores for fibrosis, necroinflammatory activity, and steatosis with a summary interpretation	NO
Investigational Potential	0170U	Neurology (autism spectrum disorder [ASD]), RNA, nextgeneration sequencing, saliva, algorithmic analysis, and results reported as predictive probability of ASD diagnosis. Clarifi™	NO
Genetic Testing	0171U	Targeted genomic sequence analysis panel, acute myeloid leukemia, myelodysplastic syndrome, and myeloproliferative neoplasms, DNA analysis, 23 genes, interrogation for sequence variants, rearrangements and minimal residual disease, reported as presence/absence	YES
Genetic Testing	0172U	Oncology (solid tumor as indicated by the label), somatic mutation analysis of BRCA1 (BRCA1, DNA repair associated), BRCA2 (BRCA2, DNA repair associated) and analysis of homologous recombination deficiency pathways, DNA, formalin- fixed paraffin-embedded tissue, algorithm quantifying tumor genomic instability score	NO
Genetic Testing	0173U	Psychiatry (ie, depression, anxiety), genomic analysis panel, includes variant analysis of 14 genes	NO
Investigational Potential	0174T	Computer-aided detection (CAD) (computer algorithm analysis of digital image data for lesion detection) with further physician review for interpretation and report, with or without digitization of film radiographic images, chest radiograph(s), performed concurrent with primary interpretation (List separately in addition to code for primary procedure)	NO
Investigational Potential	0174U	Oncology (solid tumor), mass spectrometric 30 protein targets, formalin-fixed paraffin-embedded tissue, prognostic and predictive algorithm reported as likely, unlikely, or uncertain benefit of 39 chemotherapy and targeted therapeutic oncology agents	NO
Investigational Potential	0175T	Computer-aided detection (CAD) (computer algorithm analysis of digital image data for lesion detection) with further physician review for interpretation and report, with or without digitization of film radiographic images, chest radiograph(s), performed remote from primary interpretation	NO
Genetic Testing	0175U	Psychiatry (eg, depression, anxiety), genomic analysis panel, variant analysis of 15 genes	NO
Investigational Potential	0176U	Cytotoxic distending toxin B (CdtB) and vinculin IgG antibodies by immunoassay (ie, ELISA)	YES
Genetic Testing	0177U	Oncology (breast cancer), DNA, PIK3CA (phosphatidylinositol-4,5-bisphosphate 3-kinase catalytic subunit alpha) gene analysis of 11 gene variants utilizing plasma, reported as PIK3CA gene mutation status	YES
Genetic Testing	0179U	Oncology (non-small cell lung cancer), cell-free DNA, targeted sequence analysis of 23 genes (single nucleotide variations, insertions and deletions, fusions without prior knowledge of partner/breakpoint, copy number variations), with report of significant mutation(s)	NO
Investigational Potential	0184T	Excision of rectal tumor, transanal endoscopic microsurgical approach (ie, TEMS), including muscularis propria (ie, full thickness)	NO
Investigational Potential	0198T	Measurement of ocular blood flow by repetitive intraocular pressure sampling, with interpretation and report	NO

Investigational Potential	0198U	Red cell antigen (RH blood group) genotyping (RHD and RHCE), gene analysis Sanger/chain termination/conventional sequencing, RHD (Rh blood group D antigen) exons 1-10 and RHCE (Rh blood group CcEe antigens) exon 5. Navigator RHD/CE Sequencing	NO
Investigational Potential	0200T	Percutaneous sacral augmentation (sacroplasty), unilateral injection(s), including the use of a balloon or mechanical device, when used, 1 or more needles, includes imaging guidance and bone biopsy, when performed	NO
Investigational Potential	0201T	Percutaneous sacral augmentation (sacroplasty), bilateral injections, including the use of a balloon or mechanical device, when used, 2 or more needles, includes imaging guidance and bone biopsy, when performed	NO
Investigational Potential	0202T	Posterior vertebral joint(s) arthroplasty (eg, facet joint[s] replacement), including facetectomy, laminectomy, foraminotomy, and vertebral column fixation, injection of bone cement, when performed, including fluoroscopy, single level, lumbar spine	NO
Genetic Testing	0203U	Autoimmune (inflammatory bowel disease), mRNA, gene expression profiling by quantitative RT-PCR, 17 genes (15 target and 2 reference genes), whole blood, reported as a continuous risk score and classification of inflammatory bowel disease aggressiveness	YES
Genetic Testing	0204U	Oncology (thyroid), mRNA, gene expression analysis of 593 genes (including BRAF, RAS, RET, PAX8, and NTRK) for sequence variants and rearrangements, utilizing fine needle aspirate, reported as detected or not detected	YES
Investigational Potential	0205U	Ophthalmology (age-related macular degeneration), analysis of 3 gene variants (2 CFH gene, 1 ARMS2 gene), using PCR and MALDI-TOF, buccal swab, reported as positive or negative for neovascular age-related macular-degeneration risk associated with zinc supplements	NO
Investigational Potential	0206U	Neurology (Alzheimer disease); cell aggregation using morphometric imaging and protein kinase C- epsilon (PKCe) concentration in response to amylopheroïd treatment by ELISA, cultured skin fibroblasts, each reported as positive or negative for Alzheimer disease	NO
Investigational Potential	0207T	Evacuation of meibomian glands, automated, using heat and intermittent pressure, unilateral	NO
Investigational Potential	0207U	Neurology (Alzheimer disease); quantitative imaging of phosphorylated ERK1 and ERK2 in response to bradykinin treatment by in situ immunofluorescence, using cultured skin fibroblasts, reported as a probability index for Alzheimer disease	NO
Investigational Potential	0208T	Pure tone audiometry (threshold), automated; air only	NO
Genetic Testing	0209U	Cytogenomic constitutional (genome-wide) analysis, interrogation of genomic regions for copy number, structural changes and areas of homozygosity for chromosomal abnormalities	YES
Investigational Potential	0210T	Speech audiometry threshold, automated;	NO
Investigational Potential	0211T	Speech audiometry threshold, automated; with speech recognition	NO
Genetic Testing	0211U	Oncology (pan-tumor), DNA and RNA by next-generation sequencing, utilizing formalin-fixed paraffin-embedded tissue, interpretative report for single nucleotide variants, copy number alterations, tumor mutational burden, and microsatellite instability, with therapy association	NO
Investigational Potential	0212T	Comprehensive audiometry threshold evaluation and speech recognition (0209T, 0211T combined), automated	NO

Genetic Testing	0212U	Rare diseases (constitutional/heritable disorders), whole genome and mitochondrial DNA sequence analysis, including small sequence changes, deletions, duplications, short tandem repeat gene expansions, and variants in non-uniquely mappable regions, blood or saliva, identification and categorization of genetic variants, proband	YES
Investigational Potential	0213T	Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joint) with ultrasound guidance, cervical or thoracic; single level	NO
Genetic Testing	0213U	Rare diseases (constitutional/heritable disorders), whole genome and mitochondrial DNA sequence analysis, including small sequence changes, deletions, duplications, short tandem repeat gene expansions, and variants in non-uniquely mappable regions, blood or saliva, identification and categorization of genetic variants, each comparator genome (eg, parent, sibling)	YES
Investigational Potential	0214T	Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joint) with ultrasound guidance, cervical or thoracic; second level (List separately in addition to code for primary procedure)	NO
Genetic Testing	0214U	Rare diseases (constitutional/heritable disorders), whole exome and mitochondrial DNA sequence analysis, including small sequence changes, deletions, duplications, short tandem repeat gene expansions, and variants in non-uniquely mappable regions, blood or saliva, identification and categorization of genetic variants, proband	YES
Investigational Potential	0215T	Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joint) with ultrasound guidance, cervical or thoracic; third and any additional level(s) (List separately in addition to code for primary procedure)	NO
Genetic Testing	0215U	Rare diseases (constitutional/heritable disorders), whole exome and mitochondrial DNA sequence analysis, including small sequence changes, deletions, duplications, short tandem repeat gene expansions, and variants in non-uniquely mappable regions, blood or saliva, identification and categorization of genetic variants, each comparator exome (eg, parent, sibling)	YES
Investigational Potential	0216T	Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joint) with ultrasound guidance, lumbar or sacral; single level	NO
Genetic Testing	0216U	Neurology (inherited ataxias), genomic DNA sequence analysis of 12 common genes including small sequence changes, deletions, duplications, short tandem repeat gene expansions, and variants in non-uniquely mappable regions, blood or saliva, identification and categorization of genetic variants	YES
Investigational Potential	0217T	Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joint) with ultrasound guidance, lumbar or sacral; second level (List separately in addition to code for primary procedure)	NO
Genetic Testing	0217U	Neurology (inherited ataxias), genomic DNA sequence analysis of 51 genes including small sequence changes, deletions, duplications, short tandem repeat gene expansions, and variants in non-uniquely mappable regions, blood or saliva, identification and categorization of genetic variants	YES

Investigational Potential	0218T	Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joint) with ultrasound guidance, lumbar or sacral; third and any additional level(s) (List separately in addition to code for primary procedure)	NO
Genetic Testing	0218U	Neurology (muscular dystrophy), DMD gene sequence analysis, including small sequence changes, deletions, duplications, and variants in non- uniquely mappable regions, blood or saliva, identification and characterization of genetic variants	YES
Investigational Potential	0219T	Placement of a posterior intrafacet implant(s), unilateral or bilateral, including imaging and placement of bone graft(s) or synthetic device(s), single level; cervical	NO
Investigational Potential	0220T	Placement of a posterior intrafacet implant(s), unilateral or bilateral, including imaging and placement of bone graft(s) or synthetic device(s), single level; thoracic	NO
Investigational Potential	0221T	Placement of a posterior intrafacet implant(s), unilateral or bilateral, including imaging and placement of bone graft(s) or synthetic device(s), single level; lumbar	NO
Investigational Potential	0221U	Red cell antigen (ABO blood group) genotyping (ABO), gene analysis, next generation sequencing, ABO (ABO, alpha 1-3- N-acetylgalactosaminyltransferase and alpha 1-3galactosyltransferase) gene. Navigator ABO Blood Group NGS	NO
Investigational Potential	0222T	Placement of a posterior intrafacet implant(s), unilateral or bilateral, including imaging and placement of bone graft(s) or synthetic device(s), single level; each additional vertebral segment (List separately in addition to code for primary procedure)	NO
Investigational Potential	0222U	Red cell antigen (RH blood group) genotyping (RHD and RHCE), gene analysis, next-generation sequencing, RH proximal promoter, exons 1-10, portions of introns 2-3. Navigator Rh Blood Group NGS	NO
Pain Management	0228T	Injection(s), anesthetic agent and/or steroid, transforaminal epidural, with ultrasound guidance, cervical or thoracic; single level	NO
Investigational Potential	0228U	Oncology (prostate), multianalyte molecular profile by photometric detection of macromolecules adsorbed on nanosponge array slides with machine learning, utilizing first morning voided urine, algorithm reported as likelihood of prostate cancer	NO
Pain Management	0229T	Injection(s), anesthetic agent and/or steroid, transforaminal epidural, with ultrasound guidance, cervical or thoracic; each additional level (List separately in addition to code for primary procedure)	NO
Genetic Testing	0229U	BCAT1 (Branched chain amino acid transaminase 1) or IKZF1 (IKAROS family zinc finger 1) (eg, colorectal cancer) promoter methylation analysis	YES
Pain Management	0230T	Injection(s), anesthetic agent and/or steroid, transforaminal epidural, with ultrasound guidance, lumbar or sacral; single level	YES
Genetic Testing	0230U	AR (androgen receptor) (eg, spinal and bulbar muscular atrophy, Kennedy disease, X chromosome inactivation), full sequence analysis, including small sequence changes in exonic and intronic regions, deletions, duplications, short tandem repeat (STR) expansions, mobile element insertions, and variants in non- uniquely mappable regions	YES
Pain Management	0231T	Injection(s), anesthetic agent and/or steroid, transforaminal epidural, with ultrasound guidance, lumbar or sacral; each additional level (List separately in addition to code for primary procedure)	YES

Investigational Potential	0231U	CACNA1A (calcium voltage-gated channel subunit alpha 1A) (eg, spinocerebellar ataxia), full gene analysis, including small sequence changes in exonic and intronic regions, deletions, duplications, short tandem repeat (STR) gene expansions, mobile element insertions, and variants in non-uniquely mappable regions	NO
Investigational Potential	0232T	Injection(s), platelet rich plasma, any site, including image guidance, harvesting and preparation when performed	NO
Genetic Testing	0232U	CSTB (cystatin B) (eg, progressive myoclonic epilepsy type 1A, Unverricht-Lundborg disease), full gene analysis, including small sequence changes in exonic and intronic regions, deletions, duplications, short tandem repeat (STR) expansions, mobile element insertions, and variants in non-uniquely mappable regions	YES
Genetic Testing	0233U	FXN (frataxin) (eg, Friedreich ataxia), gene analysis, including small sequence changes in exonic and intronic regions, deletions, duplications, short tandem repeat (STR) expansions, mobile element insertions, and variants in non-uniquely mappable regions	YES
Investigational Potential	0234T	Transluminal peripheral atherectomy, open or percutaneous, including radiological supervision and interpretation; renal artery	NO
Genetic Testing	0234U	MECP2 (methyl CpG binding protein 2) (eg, Rett syndrome), full gene analysis, including small sequence changes in exonic and intronic regions, deletions, duplications, mobile element insertions, and variants in non-uniquely mappable regions	YES
Investigational Potential	0235T	Transluminal peripheral atherectomy, open or percutaneous, including radiological supervision and interpretation; visceral artery (except renal), each vessel	NO
Genetic Testing	0235U	PTEN (phosphatase and tensin homolog) (eg, Cowden syndrome, PTEN hamartoma tumor syndrome), full gene analysis, including small sequence changes in exonic and intronic regions, deletions, duplications, mobile element insertions, and variants in non-uniquely mappable regions	YES
Investigational Potential	0236T	Transluminal peripheral atherectomy, open or percutaneous, including radiological supervision and interpretation; abdominal aorta	NO
Genetic Testing	0236U	SMN1 (survival of motor neuron 1, telomeric) and SMN2 (survival of motor neuron 2, centromeric) (eg, spinal muscular atrophy) full gene analysis, including small sequence changes in exonic and intronic regions, duplications and deletions, and mobile element insertions	YES
Investigational Potential	0237T	Transluminal peripheral atherectomy, open or percutaneous, including radiological supervision and interpretation; brachiocephalic trunk and branches, each vessel	NO
Genetic Testing	0237U	Cardiac ion channelopathies (eg, Brugada syndrome, long QT syndrome, short QT syndrome, catecholaminergic polymorphic ventricular tachycardia), genomic sequence analysis panel including ANK2, CASQ2, CAV3, KCNE1, KCNE2, KCNH2, KCNJ2, KCNQ1, RYR2, and SCN5A, including small sequence changes in exonic and intronic regions, deletions, duplications, mobile element insertions, and variants in non-uniquely mappable regions	YES
Investigational Potential	0238T	Transluminal peripheral atherectomy, open or percutaneous, including radiological supervision and interpretation; iliac artery, each vessel	NO

Genetic Testing	0238U	Oncology (Lynch syndrome), genomic DNA sequence analysis of MLH1, MSH2, MSH6, PMS2, and EPCAM, including small sequence changes in exonic and intronic regions, deletions, duplications, mobile element insertions, and variants in non-uniquely mappable regions	YES
Genetic Testing	0239U	Targeted genomic sequence analysis panel, solid organ neoplasm, cell-free DNA, analysis of 311 or more genes, interrogation for sequence variants, including substitutions, insertions, deletions, select rearrangements, and copy number variations	YES
Genetic Testing	0242U	Targeted genomic sequence analysis panel, solid organ neoplasm, cell-free circulating DNA analysis of 55-74 genes, interrogation for sequence variants, gene copy number amplifications, and gene rearrangements	YES
Investigational Potential	0243U	Obstetrics (preeclampsia), biochemical assay of placental-growth factor, time-resolved fluorescence immunoassay, maternal serum, predictive algorithm reported as a risk score for preeclampsia	NO
Genetic Testing	0244U	Oncology (solid organ), DNA, comprehensive genomic profiling, 257 genes, interrogation for single-nucleotide variants, insertions/deletions, copy number alterations, gene rearrangements, tumor-mutational burden and microsatellite instability, utilizing formalin-fixed paraffin- embedded tumor tissue	NO
Genetic Testing	0245U	Oncology (thyroid), mutation analysis of 10 genes and 37 RNA fusions and expression of 4 mRNA markers using next-generation sequencing, fine needle aspirate, report includes associated risk of malignancy expressed as a percentage	NO
Investigational Potential	0247U	Obstetrics (preterm birth), insulin-like growth factor-binding protein 4 (IBP4), sex hormone-binding globulin (SHBG), quantitative measurement by LC-MS/MS, utilizing maternal serum, combined with clinical data, reported as predictive-risk stratification for spontaneous preterm birth	NO
Investigational Potential	0248U	Oncology (brain), spheroid cell culture in a 3D microenvironment, 12 drug panel, tumor-response prediction for each drug	NO
Investigational Potential	0249U	Oncology (breast), semiquantitative analysis of 32 phosphoproteins and protein analytes, includes laser capture microdissection, with algorithmic analysis and interpretative report	NO
Genetic Testing	0250U	Oncology (solid organ neoplasm), targeted genomic sequence DNA analysis of 505 genes, interrogation for somatic alterations (SNVs [single nucleotide variant], small insertions and deletions, one amplification, and four translocations), microsatellite instability and tumor-mutation burden	NO
Investigational Potential	0253T	Insertion of anterior segment aqueous drainage device, without extraocular reservoir, internal approach, into the suprachoroidal space	NO
Investigational Potential	0253U	Reproductive medicine (endometrial receptivity analysis), RNA gene expression profile, 238 genes by next-generation sequencing, endometrial tissue, predictive algorithm reported as endometrial window of implantation (eg, pre-receptive, receptive, post-receptive)	YES
Genetic Testing	0254U	Reproductive medicine (preimplantation genetic assessment), analysis of 24 chromosomes using embryonic DNA genomic sequence analysis for aneuploidy, and a mitochondrial DNA score in euploid embryos, results reported as normal (euploidy), monosomy, trisomy, or partial deletion/duplications, mosaicism, and segmental aneuploidy, per embryo tested	YES

Infertility	0255U	Andrology (infertility), sperm-capacitation assessment of ganglioside GM1 distribution patterns, fluorescence microscopy, fresh or frozen specimen, reported as percentage of capacitated sperm and probability of generating a pregnancy score	NO
Investigational Potential	0259U	Nephrology (chronic kidney disease), nuclear magnetic resonance spectroscopy measurement of myo-inositol, valine, and creatinine, algorithmically combined with cystatin C (by immunoassay) and demographic data to determine estimated glomerular filtration rate (GFR), serum, quantitative. GFR by NMR	NO
Genetic Testing	0260U	Rare diseases (constitutional/heritable disorders), identification of copy number variations, inversions, insertions, translocations, and other structural variants by optical genome mapping	YES
Investigational Potential	0261U	Oncology (colorectal cancer), image analysis with artificial intelligence assessment of 4 histologic and immunohistochemical features (CD3 and CD8 within tumor-stroma border and tumor core), tissue, reported as immune response and recurrence-risk score	YES
Genetic Testing	0262U	Oncology (solid tumor), gene expression profiling by real-time RT-PCR of 7 gene pathways (ER, AR, PI3K, MAPK, HH, TGFB, Notch), formalin-fixed paraffin-embedded (FFPE), algorithm reported as gene pathway activity score	NO
Investigational Potential	0263T	Intramuscular autologous bone marrow cell therapy, with preparation of harvested cells, multiple injections, one leg, including ultrasound guidance, if performed; complete procedure including unilateral or bilateral bone marrow harvest	NO
Investigational Potential	0264T	Intramuscular autologous bone marrow cell therapy, with preparation of harvested cells, multiple injections, one leg, including ultrasound guidance, if performed; complete procedure excluding bone marrow harvest	NO
Genetic Testing	0264U	Rare diseases (constitutional/heritable disorders), identification of copy number variations, inversions, insertions, translocations, and other structural variants by optical genome mapping	YES
Investigational Potential	0265T	Intramuscular autologous bone marrow cell therapy, with preparation of harvested cells, multiple injections, one leg, including ultrasound guidance, if performed; unilateral or bilateral bone marrow harvest only for intramuscular autologous bone marrow cell therapy	NO
Genetic Testing	0265U	Rare constitutional and other heritable disorders, whole genome and mitochondrial DNA sequence analysis, blood, frozen and formalin-fixed paraffin embedded (FFPE) tissue, saliva, buccal swabs or cell lines, identification of single nucleotide and copy number variants	NO
Investigational Potential	0266T	Implantation or replacement of carotid sinus baroreflex activation device; total system (includes generator placement, unilateral or bilateral lead placement, intra-operative interrogation, programming, and repositioning, when performed)	NO
Genetic Testing	0266U	Unexplained constitutional or other heritable disorders or syndromes, tissue specific gene expression by whole transcriptome and next-generation sequencing, blood, formalin-fixed paraffin embedded (FFPE) tissue or fresh frozen tissue, reported as presence or absence of splicing or expression changes	YES
Investigational Potential	0267T	Implantation or replacement of carotid sinus baroreflex activation device; lead only, unilateral (includes intra-operative interrogation, programming, and repositioning, when performed)	NO

Investigational Potential	0268T	Implantation or replacement of carotid sinus baroreflex activation device; pulse generator only (includes intra-operative interrogation, programming, and repositioning, when performed)	NO
Genetic Testing	0268U	Hematology (atypical hemolytic uremic syndrome [aHUS]), genomic sequence analysis of 15 genes, blood, buccal swab, or amniotic fluid	YES
Investigational Potential	0269T	Revision or removal of carotid sinus baroreflex activation device; total system (includes generator placement, unilateral or bilateral lead placement, intra-operative interrogation, programming, and repositioning, when performed)	YES
Genetic Testing	0269U	Hematology (autosomal dominant congenital thrombocytopenia), genomic sequence analysis of 14 genes, blood, buccal swab, or amniotic fluid	YES
Investigational Potential	0270T	Revision or removal of carotid sinus baroreflex activation device; lead only, unilateral (includes intra-operative interrogation, programming, and repositioning, when performed)	YES
Genetic Testing	0270U	Hematology (congenital coagulation disorders), genomic sequence analysis of 20 genes, blood, buccal swab, or amniotic fluid	YES
Investigational Potential	0271T	Revision or removal of carotid sinus baroreflex activation device; pulse generator only (includes intra-operative interrogation, programming, and repositioning, when performed)	NO
Genetic Testing	0271U	Hematology (congenital neutropenia), genomic sequence analysis of 23 genes, blood, buccal swab, or amniotic fluid	YES
Investigational Potential	0272T	Interrogation device evaluation (in person), carotid sinus baroreflex activation system, including telemetric iterative communication with the implantable device to monitor device diagnostics and programmed therapy values, with interpretation and report (eg, battery status, lead impedance, pulse amplitude, pulse width, therapy frequency, pathway mode, burst mode, therapy start/stop times each day)	NO
Genetic Testing	0272U	Hematology (genetic bleeding disorders), genomic sequence analysis of 51 genes, blood, buccal swab, or amniotic fluid, comprehensive	YES
Investigational Potential	0273T	Interrogation device evaluation (in person), carotid sinus baroreflex activation system, including telemetric iterative communication with the implantable device to monitor device diagnostics and programmed therapy values, with interpretation and report (e.g., battery status, lead impedance, pulse amplitude, pulse width, therapy frequency, pathway mode, burst mode, therapy start/stop times each day); with programming	NO
Genetic Testing	0273U	Hematology (genetic hyperfibrinolysis, delayed bleeding), genomic sequence analysis of 8 genes (F13A1, F13B, FGA, FGB, FGG, SERPINA1, SERPINE1, SERPINF2, PLAU), blood, buccal swab, or amniotic fluid	YES
Investigational Potential	0274T	Percutaneous laminotomy/laminectomy (interlaminar approach) for decompression of neural elements, (with or without ligamentous resection, discectomy, facetectomy and/or foraminotomy), any method, under indirect image guidance (e.g., fluoroscopic, CT), single or multiple levels, unilateral or bilateral; cervical or thoracic	NO
Genetic Testing	0274U	Hematology (genetic platelet disorders), genomic sequence analysis of 43 genes, blood, buccal swab, or amniotic fluid	YES

Investigational Potential	0275T	Percutaneous laminotomy/laminectomy (interlaminar approach) for decompression of neural elements, (with or without ligamentous resection, discectomy, facetectomy and/or foraminotomy), any method, under indirect image guidance (e.g., fluoroscopic, CT), single or multiple levels, unilateral or bilateral; lumbar	YES
Genetic Testing	0276U	Hematology (inherited thrombocytopenia), genomic sequence analysis of 23 genes, blood, buccal swab, or amniotic fluid	YES
Genetic Testing	0277U	Hematology (genetic platelet function disorder), genomic sequence analysis of 31 genes, blood, buccal swab, or amniotic fluid	YES
Investigational Potential	0278T	Transcutaneous electrical modulation pain reprocessing (e.g., scrambler therapy), each treatment session (includes placement of electrodes)	YES
Genetic Testing	0278U	Hematology (genetic thrombosis), genomic sequence analysis of 12 genes, blood, buccal swab, or amniotic fluid	YES
Genetic Testing	0287U	Oncology (thyroid), DNA and mRNA, next- generation sequencing analysis of 112 genes, fine needle aspirate or formalin-fixed paraffin- embedded (FFPE) tissue, algorithmic prediction of cancer recurrence, reported as a categorical risk result (low, intermediate, high)	YES
Investigational Potential	0288U	Oncology (lung), mRNA, quantitative PCR analysis of 11 genes (BAG1, BRCA1, CDC6, CDK2API, ERBB3, FUT3, IL1I, LCK, RND3, SH3BGR, WNT3A) and 3 reference genes (ESD, TBP, YAP1), formalin-fixed paraffin-embedded (FFPE) tumor tissue, algorithmic interpretation reported as a recurrence risk score. DetermaRx™	NO
Investigational Potential	0295U	Oncology (breast ductal carcinoma in situ), protein expression profiling by immunohistochemistry of 7 proteins (COX2, FOXA1, HER2, Ki-67, p16, PR, SIAH2), with 4 clinicopathologic factors (size, age, margin status, palpability), utilizing formalin-fixed paraffin-embedded (FFPE) tissue, algorithm reported as a recurrence risk scoreDCISionRT®, PreludeDx™, Prelude Corporation	NO
Genetic Testing	0297U	Oncology (pan tumor), whole genome sequencing of paired malignant and normal DNA specimens, fresh or formalin-fixed paraffin-embedded (FFPE) tissue, blood or bone marrow, comparative sequence analyses and variant identification	NO
Genetic Testing	0298U	Oncology (pan tumor), whole transcriptome sequencing of paired malignant and normal RNA specimens, fresh or formalin-fixed paraffin- embedded (FFPE) tissue, blood or bone marrow, comparative sequence analyses and expression level and chimeric transcript identification	YES
Genetic Testing	0299U	Oncology (pan tumor), whole genome optical genome mapping of paired malignant and normal DNA specimens, fresh frozen tissue, blood, or bone marrow, comparative structural variant identification	YES
Genetic Testing	0300U	Oncology (pan tumor), whole genome sequencing and optical genome mapping of paired malignant and normal DNA specimens, fresh tissue, blood, or bone marrow, comparative sequence analyses and variant identification	YES
Genetic Testing	0306U	Oncology (minimal residual disease [MRD]), next- generation targeted sequencing analysis, cell-free DNA, initial (baseline) assessment to determine a patient-specific panel for future comparisons to evaluate for MRD	YES
Genetic Testing	0307U	Oncology (minimal residual disease [MRD]), next- generation targeted sequencing analysis of a patient- specific panel, cell-free DNA, subsequent assessment with comparison to previously analyzed patient specimens to evaluate for MRD	YES

Investigational Potential	0308T	Insertion of ocular telescope prosthesis including removal of crystalline lens or intraocular lens prosthesis	NO
Neurostimulator	0312T	Vagus nerve blocking therapy (morbid obesity); laparoscopic implantation of neurostimulator electrode array, anterior and posterior vagal trunks adjacent to esophagogastric junction (EGJ), with implantation of pulse generator, includes programming	NO
Investigational Potential	0312U	Autoimmune diseases (eg, systemic lupus erythematosus [SLE]), analysis of 8 IgG autoantibodies and 2 cell-bound complement activation products using enzyme-linked immunosorbent immunoassay (ELISA), flow cytometry and indirect immunofluorescence, serum, or plasma and whole blood, individual components reported along with an algorithmic SLE-likelihood assessment	NO
Neurostimulator	0313T	Vagus nerve blocking therapy (morbid obesity); laparoscopic revision or replacement of vagal trunk neurostimulator electrode array, including connection to existing pulse generator	NO
Neurostimulator	0314T	Vagus nerve blocking therapy (morbid obesity); laparoscopic removal of vagal trunk neurostimulator electrode array and pulse generator	NO
Genetic Testing	0314U	Oncology (cutaneous melanoma), mRNA gene expression profiling by RT-PCR of 35 genes (32 content and 3 housekeeping), utilizing formalin-fixed paraffin-embedded (FFPE) tissue, algorithm reported as a categorical result (ie, benign, intermediate, malignant)	YES
Bariatric Surgery	0315T	Vagus nerve blocking therapy (morbid obesity); removal of pulse generator	NO
Genetic Testing	0315U	Oncology (cutaneous squamous cell carcinoma), mRNA gene expression profiling by RT-PCR of 40 genes (34 content and 6 housekeeping), utilizing formalin-fixed paraffin-embedded (FFPE) tissue, algorithm reported as a categorical risk result (ie, Class 1, Class 2A, Class 2B)	YES
Bariatric Surgery	0316T	Vagus nerve blocking therapy (morbid obesity); replacement of pulse generator	NO
Investigational Potential	0316U	Borrelia burgdorferi (Lyme disease), OspA protein evaluation, urine. Lyme Borrelia Nanotrap® Urine Antigen Test	NO
Neurostimulator	0317T	Vagus nerve blocking therapy (morbid obesity); neurostimulator pulse generator electronic analysis, includes reprogramming when performed	NO
Investigational Potential	0317U	Oncology (lung cancer), four-probe FISH (3q29, 3p22.1, 10q22.3, 10cen) assay, whole blood, predictive algorithm-generated evaluation reported as decreased or increased risk for lung cancer	YES
Genetic Testing	0318U	Pediatrics (congenital epigenetic disorders), whole genome methylation analysis by microarray for 50 or more genes, blood	YES
Genetic Testing	0323U	Infectious agent detection by nucleic acid (DNA and RNA), central nervous system pathogen, metagenomic next-generation sequencing, cerebrospinal fluid (CSF), identification of pathogenic bacteria, viruses, parasites, or fungi	YES
Genetic Testing	0326U	Targeted genomic sequence analysis panel, solid organ neoplasm, cell-free circulating DNA analysis of 83 or more genes, interrogation for sequence variants, gene copy number amplifications, gene rearrangements, microsatellite instability and tumor mutational burden	NO
Investigational Potential	0329T	Monitoring of intraocular pressure for 24 hours or longer, unilateral or bilateral, with interpretation and report	NO

Genetic Testing	0329U	Oncology (neoplasia), exome and transcriptome sequence analysis for sequence variants, gene copy number amplifications and deletions, gene rearrangements, microsatellite instability and tumor mutational burden utilizing DNA and RNA from tumor with and DNA from normal blood or saliva for subtraction, report of clinically significant mutation(s) with therapy associations	NO
Investigational Potential	0330T	Tear film imaging, unilateral or bilateral, with interpretation and report	NO
Investigational Potential	0330U	Infectious agent detection by nucleic acid (DNA or RNA), vaginal pathogen panel, identification of 27 organisms, amplified probe technique, vaginal swab. Bridge Women's Health Infectious Disease Detection Test	NO
Investigational Potential	0331T	Myocardial sympathetic innervation imaging, planar qualitative and quantitative assessment;	NO
Genetic Testing	0331U	Oncology (hematolymphoid neoplasia), optical for copy number alterations and gene rearrangements utilizing DNA from blood or bone marrow, report of clinically significant alternations	YES
Investigational Potential	0332T	Myocardial sympathetic innervation imaging, planar qualitative and quantitative assessment; with tomographic SPECT	NO
Genetic Testing	0332U	Oncology (pan-tumor), genetic profiling of 8 DNA- regulatory (epigenetic) markers by quantitative polymerase chain reaction (qPCR), whole blood, reported as a high or low probability of responding to immune checkpointinhibitor therapy	YES
Investigational Potential	0333T	Visual evoked potential, screening of visual acuity, automated, with report	NO
Genetic Testing	0333U	Oncology (liver), surveillance for hepatocellular carcinoma (HCC) in high-risk patients, analysis of methylation patterns on circulating cell-free DNA (cfDNA) plus measurement of serum of AFP/AFP-L3 and oncoprotein des-gamma-carboxy-prothrombin (DCP), algorithm reported as normal or abnormal result	YES
Genetic Testing	0334U	Oncology (solid organ), targeted genomic sequence analysis, formalin-fixed paraffin-embedded (FFPE) tumor tissue, DNA analysis, 84 or more genes, interrogation for sequence variants, gene copy number amplifications, gene rearrangements, microsatellite instability and tumor mutational burden	NO
Investigational Potential	0335T	Insertion of sinus tarsi implant	NO
Genetic Testing	0335U	Rare diseases (constitutional/heritable disorders), whole genome sequence analysis, including small sequence changes, copy number variants, deletions, duplications, mobile element insertions, uniparental disomy (UPD), inversions, aneuploidy, mitochondrial genome sequence analysis with heteroplasmy and large deletions, short tandem repeat (STR) gene expansions, fetal sample, identification and categorization of genetic variants	YES
Genetic Testing	0336U	Rare diseases (constitutional/heritable disorders), whole genome sequence analysis, including small sequence changes, copy number variants, deletions, duplications, mobile element insertions, uniparental disomy (UPD), inversions, aneuploidy, mitochondrial genome sequence analysis with heteroplasmy and large deletions, short tandem repeat (STR) gene expansions, blood or saliva, identification and categorization of genetic variants, each comparator genome (eg, parent)	NO
Investigational Potential	0337U	Oncology (plasma cell disorders and myeloma), circulating plasma cell immunologic selection, identification, morphological characterization, and enumeration of plasma cells based on differential CD138, CD38, D19, and CD45 protein biomarker expression, peripheral blood	NO

Investigational Potential	0338T	Transcatheter renal sympathetic denervation, percutaneous approach including arterial puncture, selective catheter placement(s) renal artery(ies), fluoroscopy, contrast injection(s), intraprocedural roadmapping and radiological supervision and interpretation, including pressure gradient measurements, flush aortogram and diagnostic renal angiography when performed; unilateral	NO
Investigational Potential	0338U	Oncology (solid tumor), circulating tumor cell selection, identification, morphological characterization, detection and enumeration based on differential EpCAM, cytokeratins 8, 18, and 19, and CD45 protein biomarkers, and quantification of HER2 protein biomarker-expressing cells, peripheral	NO
Investigational Potential	0339T	Transcatheter renal sympathetic denervation, percutaneous approach including arterial puncture, selective catheter placement(s) renal artery(ies), fluoroscopy, contrast injection(s), intraprocedural roadmapping and radiological supervision and interpretation, including pressure gradient measurements, flush aortogram and diagnostic renal angiography when performed; bilateral	NO
Genetic Testing	0339U	Oncology (prostate), mRNA expression profiling of HOXC6 and DLX1, reverse transcription polymerase chain reaction (RT-PCR), first-void urine following digital rectal examination, algorithm reported as probability of high-grade cancer	NO
Genetic Testing	0340U	Oncology (pan-cancer), analysis of minimal residual disease (MRD) from plasma, with assays personalized to each patient based on prior next- generation sequencing of the patient's tumor and germline DNA, reported as absence or presence of MRD, with disease-burden correlation, if appropriate	NO
Investigational Potential	0342T	Therapeutic apheresis with selective HDL delipidation and plasma reinfusion	NO
Investigational Potential	0342U	Oncology (pancreatic cancer), multiplex immunoassay of C5, C4, cystatin C, factor B, osteoprotegerin (OPG), gelsolin, IGFBP3, CA125 and multiplex electrochemiluminescent immunoassay (ECLIA) for CA19-9, serum, diagnostic algorithm reported qualitatively as positive, negative, or borderline	NO
Genetic Testing	0343U	Oncology (prostate), exosome-based analysis of 442 small noncoding RNAs (sncRNAs) by quantitative reverse transcription polymerase chain reaction (RT-qPCR), urine, reported as molecular evidence of no-, low-, intermediate- or high-risk of prostate cancer	YES
Investigational Potential	0344U	Hepatology (nonalcoholic fatty liver disease [NAFLD]), semiquantitative evaluation of 28 lipid markers by liquid chromatography with tandem mass spectrometry (LC-MS/MS), serum, reported as at-risk for nonalcoholic steatohepatitis (NASH) or not NASH	YES
Investigational Potential	0345T	Transcatheter mitral valve repair percutaneous approach via the coronary sinus	NO
Genetic Testing	0345U	Psychiatry (eg, depression, anxiety, attention deficit hyperactivity disorder [ADHD]), genomic analysis panel, variant analysis of 15 genes, including deletion/duplication analysis of CYP2D6	NO
Investigational Potential	0346U	Beta amyloid, A β 40 and A β 42 by liquid chromatography with tandem mass spectrometry (LC-MS/MS), ratio, plasma	YES
Investigational Potential	0347T	Placement of interstitial device(s) in bone for radiostereometric analysis (RSA)	NO
Genetic Testing	0347U	Drug metabolism or processing (multiple conditions), whole blood or buccal specimen, DNA analysis, 16 gene report, with variant analysis and reported	YES

Investigational Potential	0348T	Radiologic examination, radiostereometric analysis (RSA); spine, (includes cervical, thoracic and lumbosacral, when performed)	NO
Genetic Testing	0348U	Drug metabolism or processing (multiple conditions), whole blood or buccal specimen, DNA analysis, 25 gene report, with variant analysis and reported	YES
Investigational Potential	0349T	Radiologic examination, radiostereometric analysis (RSA); upper extremity(ies), (includes shoulder, elbow, and wrist, when performed)	NO
Genetic Testing	0349U	Drug metabolism or processing (multiple conditions), whole blood or buccal specimen, DNA analysis, 27 gene report, with variant analysis, including reported phenotypes and impacted gene-drug interactions	YES
Investigational Potential	0350T	Radiologic examination, radiostereometric analysis (RSA); lower extremity(ies), (includes hip, proximal femur, knee, and ankle, when performed)	NO
Genetic Testing	0350U	Drug metabolism or processing (multiple conditions), whole blood or buccal specimen, DNA analysis, 27 gene report, with variant analysis and reported	YES
Investigational Potential	0351T	Optical coherence tomography of breast or axillary lymph node, excised tissue, each specimen; real-time intraoperative	NO
Investigational Potential	0352T	Optical coherence tomography of breast or axillary lymph node, excised tissue, each specimen; interpretation and report, real-time or referred	NO
Investigational Potential	0352U	Infectious disease (bacterial vaginosis and vaginitis), multiplex amplified probe technique, for detection of bacterial vaginosis-associated bacteria (BVAB-2, Atopobium vaginae, and Megasphaera type 1), algorithm reported as detected or not detected and separate detection of Candida species (C. albicans, C. tropicalis, C. parapsilosis, C. dubliniensis), Candida glabrata/Candida krusei, and trichomonas vaginalis, vaginal-fluid specimen, each result reported as detected or not detected. Xpert® Xpress MVP, Cepheid®	NO
Investigational Potential	0353T	Optical coherence tomography of breast, surgical cavity; real-time intraoperative	NO
Investigational Potential	0353U	Infectious agent detection by nucleic acid (DNA), Chlamydia trachomatis and Neisseria gonorrhoeae, multiplex amplified probe technique, urine, vaginal, pharyngeal, or rectal, each pathogen reported as detected or not detected. Xpert® CT/NG, Cepheid®	NO
Investigational Potential	0354T	Optical coherence tomography of breast, surgical cavity; interpretation and report, real-time or referred	NO
Investigational Potential	0355U	APOLI (apolipoprotein L1) (e.g., chronic kidney disease), risk variants (G1, G2). Apolipoprotein L1 (APOLI) Renal Risk Variant Genotyping	NO
Genetic Testing	0356U	Oncology (oropharyngeal), evaluation of 17 DNA biomarkers using droplet digital PCR (ddPCR), cell- free DNA, algorithm reported as a prognostic risk score for cancer recurrence	YES
Investigational Potential	0358T	Bioelectrical impedance analysis whole body composition assessment, with interpretation and report	NO
Investigational Potential	0358U	Neurology (mild cognitive impairment), analysis of β - amyloid 1-42 and 1-40, chemiluminescence enzyme immunoassay, cerebral spinal fluid, reported as positive, likely positive, or negative	YES
Investigational Potential	0359U	Oncology (prostate cancer), analysis of all prostate- specific antigen (PSA) structural isoforms by phase separation and immunoassay, plasma, algorithm reports risk of cancer	YES
Investigational Potential	0360U	Oncology (lung), enzyme-linked immunosorbent assay (ELISA) of 7 autoantibodies (p53, NY-ESO-1, CAGE, GBU4-5, SOX2, MAGE A4, and HuD), plasma, algorithm reported as a categorical result for	YES

Investigational Potential	0361U	Neurofilament light chain, digital immunoassay, plasma, quantitative	YES
Investigational Potential	0362T	Behavior identification supporting assessment, each 15 minutes of technicians' time face-to-face with a patient, requiring the following components: administration by the physician or other qualified health care professional who is on site; with the assistance of two or more technicians; for a patient who exhibits destructive behavior; completion in an environment that is customized to the patient's behavior.	NO
Genetic Testing	0363U	Oncology (urothelial), mRNA, gene-expression profiling by real-time quantitative PCR of 5 genes (MDK, HOXA13, CDC2 [CDK1], IGFBP5, and CXCR2), utilizing urine, algorithm incorporates age, sex, smoking history, and macrohematuria frequency, reported as a risk score for having	YES
Investigational Potential	0364U	Oncology (hematolymphoid neoplasm), genomic sequence analysis using multiplex (PCR) and next-generation sequencing with algorithm, quantification of dominant clonal sequence(s), reported as presence or absence of minimal residual disease (MRD) with quantitation of disease burden, when appropriate. clonoSEQ®	NO
Investigational Potential	0365U	Oncology (bladder), analysis of 10 protein biomarkers (AIAT, ANG, APOE, CA9, IL8, MMP9, MMP10, PAI1, SDC1 and VEGFA) by immunoassays, urine, algorithm reported as a probability of bladder cancer. Oncuria® Detect.	NO
Investigational Potential	0366U	Oncology (bladder), analysis of 10 protein biomarkers (AIAT, ANG, APOE, CA9, IL8, MMP9, MMP10, PAI1, SDC1 and VEGFA) by immunoassays, urine, algorithm reported as a probability of recurrent bladder cancer. Oncuria® Monitor.	NO
Investigational Potential	0367U	Oncology (bladder), analysis of 10 protein biomarkers (AIAT, ANG, APOE, CA9, IL8, MMP9, MMP10, PAI1, SDC1 and VEGFA) by immunoassays, urine, diagnostic algorithm reported as a risk score for probability of rapid recurrence of recurrent or persistent cancer following transurethral resection. Oncuria® Predict.	NO
Investigational Potential	0368U	Oncology (colorectal cancer), evaluation for mutations of APC, BRAF, CTNNB1, KRAS, NRAS, PIK3CA, SMAD4, and TP53, and methylation markers (MYO1G, KCNQ5, C9ORF50, FLII, CLIP4, ZNF132 and TWIST1), multiplex quantitative polymerase chain reaction (qPCR), circulating cell-free DNA (cfDNA), plasma, report of risk score for advanced adenoma or colorectal cancer. ColoScape™	NO
Investigational Potential	0371U	Infectious agent detection by nucleic acid (DNA or RNA), genitourinary pathogen, semiquantitative identification, DNA from 16 bacterial organisms and 1 fungal organism, multiplex amplified probe technique via quantitative polymerase chain reaction (qPCR), urine. Qlear UTI..	NO
Investigational Potential	0372U	Infectious disease (genitourinary pathogens), antibiotic-resistance gene detection, multiplex amplified probe technique, urine, reported as an antimicrobial stewardship risk score	YES
Investigational Potential	0373T	Adaptive behavior treatment with protocol modification, each 15 minutes of technicians' time face-to-face with a patient, requiring the following components: administration by the physician or other qualified health care professional who is on site; with the assistance of two or more technicians; for a patient who exhibits destructive behavior; completion in an environment that is customized to the patient's behavior	NO
Investigational Potential	0373U	Infectious agent detection by nucleic acid (DNA and RNA), respiratory tract infection, 17 bacteria, 8 fungus, 13 virus, and 16 antibiotic-resistance genes, multiplex amplified probe technique, upper or lower respiratory specimen. Respiratory Pathogen with ABR (RPX).	NO

Investigational Potential	0374U	Infectious agent detection by nucleic acid (DNA or RNA), genitourinary pathogens, identification of 21 bacterial and fungal organisms and identification of 21 associated antibiotic-resistance genes, multiplex amplified probe technique, urine	NO
Investigational Potential	0376U	Oncology (prostate cancer), image analysis of at least 128 histologic features and clinical factors, prognostic algorithm determining the risk of distant metastases, and prostate cancer-specific mortality, includes predictive algorithm to androgen deprivation- therapy response, if appropriate	NO
Investigational Potential	0377U	Cardiovascular disease, quantification of advanced serum or plasma lipoprotein profile, by nuclear magnetic resonance (NMR) spectrometry with report of a lipoprotein profile (including 23 variables)	NO
Investigational Potential	0378T	Visual field assessment, with concurrent real time data analysis and accessible data storage with patient initiated data transmitted to a remote surveillance center for up to 30 days; review and interpretation with report by a physician or other qualified health care professional	NO
Investigational Potential	0379T	Visual field assessment, with concurrent real time data analysis and accessible data storage with patient initiated data transmitted to a remote surveillance center for up to 30 days; technical support and patient instructions, surveillance, analysis and transmission of daily and emergent data reports as prescribed by a physician or other qualified health care professional	NO
Genetic Testing	0379U	Targeted genomic sequence analysis panel, solid organ neoplasm, DNA (523 genes) and RNA (55 genes) by nextgeneration sequencing, interrogation for sequence variants, gene copy number	YES
Genetic Testing	0380U	Drug metabolism (adverse drug reactions and drug response), targeted sequence analysis, 20 gene variants and CYP2D6 deletion or duplication analysis with reported genotype and phenotype	NO
Investigational Potential	0384U	Nephrology (chronic kidney disease), carboxymethyllysine, methylglyoxal hydroimidazolone, and carboxyethyl lysine by liquid chromatography with tandem mass spectrometry (LCMS/MS) and HbA1c and estimated glomerular filtration rate (GFR), with risk score reported for predictive progression to high-stage kidney disease. NaviDKD Predictive Diagnostic Screening for Kidney Health.	NO
Genetic Testing	0388U	Oncology (non-small cell lung cancer), next-generation sequencing with identification of single nucleotide variants, copy number variants, insertions and deletions, and structural variants in 37 cancer-related genes, plasma, with report for alteration detection	YES
Investigational Potential	0390U	Obstetrics (preeclampsia), kinase insert domain receptor (KDR), Endoglin (ENG), and retinol-binding protein 4 (RBP4), by immunoassay, serum, algorithm reported as a risk score	NO
Genetic Testing	0391U	Oncology (solid tumor), DNA and RNA by next-generation sequencing, utilizing formalin-fixed paraffin-embedded (FFPE) tissue, 437 genes, interpretive report for single nucleotide variants, splice-site variants, insertions/deletions, copy number alterations, gene fusions, tumor mutational burden, and microsatellite instability, with algorithm quantifying immunotherapy	NO
Genetic Testing	0392U	Drug metabolism (depression, anxiety, attention deficit hyperactivity disorder [ADHD]), gene-drug interactions, variant analysis of 16 genes, including deletion/duplication analysis of CYP2D6, reported as impact of gene-drug interaction for each drug	NO

Investigational Potential	0394T	High-dose rate electronic brachytherapy, skin surface application, per fraction, includes basic dosimetry, when performed.	NO
Investigational Potential	0395T	High dose rate electronic brachytherapy, interstitial or intracavitary treatment, per fraction, includes basic dosimetry, when performed	NO
Investigational Potential	0395U	Oncology (lung), multi-omics (microbial DNA by shotgun next generation sequencing and carcinoembryonic antigen and osteopontin by immunoassay), plasma, algorithm reported as malignancy risk for lung nodules in early-stage disease. OncobiotaLUNG	NO
Genetic Testing	0396U	Obstetrics (pre-implantation genetic testing), evaluation of 300000 DNA single-nucleotide polymorphisms (SNPs) by microarray, embryonic tissue, algorithm reported as a probability for single-gene germline conditions	YES
Investigational Potential	0397T	Endoscopic retrograde cholangiopancreatography (ERCP), with optical endomicroscopy	NO
Investigational Potential	0398T	Magnetic resonance image guided high intensity focused ultrasound (MRgFUS), stereotactic ablation lesion, intracranial for movement disorder including stereotactic navigation and frame placement when performed	NO
Genetic Testing	0400U	Obstetrics (expanded carrier screening), 145 genes by next-generation sequencing, fragment analysis and multiplex ligation-dependent probe amplification, DNA, reported as carrier positive or negative	NO
Genetic Testing	0401U	Cardiology (coronary heart disease [CAD]), 9 genes (12 variants), targeted variant genotyping, blood, saliva, or buccal swab, algorithm reported as a genetic risk score for a coronary event	NO
Investigational Potential	0402T	Collagen cross-linking of cornea, including removal of the corneal epithelium and intraoperative pachymetry, when performed (Report medication separately)	NO
Investigational Potential	0403T	Preventive behavior change, intensive program of prevention of diabetes using a standardized diabetes prevention program curriculum, provided to individuals in a group setting, minimum 60 minutes, per day	NO
Investigational Potential	0403U	Oncology (prostate), mRNA, gene expression profiling of 18 genes, first-catch post-digital rectal examination urine (or processed first-catch urine), algorithm reported as percentage of likelihood of detecting clinically significant prostate cancer	NO
Surgical - Pelvic	0404T	Transcervical uterine fibroid(s) ablation with ultrasound guidance, radiofrequency	NO
Genetic Testing	0405U	Oncology (pancreatic), 59 methylation haplotype block markers, next-generation sequencing, plasma, reported as cancer signal detected or not detected	NO
Investigational Potential	0406U	Oncology (pancreatic), 59 methylation haplotype block markers, next-generation sequencing, plasma, reported as cancer signal detected or not detected. (BTG Early Detection of Pancreatic Cancer).	NO
Investigational Potential	0407U	Nephrology (diabetic chronic kidney disease [CKD]), multiplex electrochemiluminescent immunoassay (ECLIA) of soluble tumor necrosis factor receptor 1 (sTNFR1), soluble tumor necrosis receptor 2 (sTNFR2), and kidney injury molecule 1 (KIM-1) combined with clinical data, plasma, algorithm reported as risk for progressive decline in kidney function	NO

Investigational Potential	0408T	Insertion or replacement of permanent cardiac contractility modulation system, including contractility evaluation when performed, and programming of sensing and therapeutic parameters; pulse generator with transvenous electrodes	NO
Investigational Potential	0409T	Insertion or replacement of permanent cardiac contractility modulation system, including contractility evaluation when performed, and programming of sensing and therapeutic parameters; pulse generator only	NO
Genetic Testing	0409U	Oncology (solid tumor), DNA (80 genes) and RNA (36 genes), by next-generation sequencing from plasma, including single nucleotide variants, insertions/deletions, copy number alterations, microsatellite instability, and fusions, report showing identified mutations with clinical actionability	NO
Investigational Potential	0410T	Insertion or replacement of permanent cardiac contractility modulation system, including contractility evaluation when performed, and programming of sensing and therapeutic parameters; atrial electrode only	NO
Genetic Testing	0410U	Oncology (pancreatic), DNA, whole genome sequencing with 5-hydroxymethylcytosine enrichment, whole blood or plasma, algorithm reported as cancer detected or not detected	NO
Investigational Potential	0411T	Insertion or replacement of permanent cardiac contractility modulation system, including contractility evaluation when performed, and programming of sensing and therapeutic parameters; ventricular electrode only	NO
Genetic Testing	0411U	Psychiatry (eg, depression, anxiety, attention deficit hyperactivity disorder [ADHD]), genomic analysis panel, variant analysis of 15 genes, including deletion/duplication analysis of CYP2D6	NO
Investigational Potential	0412T	Removal of permanent cardiac contractility modulation system; pulse generator only	NO
Genetic Testing	0412U	Beta amyloid, A β 42/40 ratio, immunoprecipitation with quantitation by liquid chromatography with tandem mass spectrometry (LC-MS/MS) and qualitative ApoE isoformspecific proteotyping, plasma combined with age, algorithm reported as presence or absence of brain amyloid pathology	NO
Investigational Potential	0413T	Removal of permanent cardiac contractility modulation system; transvenous electrode (atrial or ventricular)	NO
Genetic Testing	0413U	Oncology (hematolymphoid neoplasm), optical genome mapping for copy number alterations, aneuploidy, and balanced/complex structural rearrangements, DNA from blood or bone marrow, report of clinically significant alterations	NO
Investigational Potential	0414T	Removal and replacement of permanent cardiac contractility modulation system pulse generator only	NO
Genetic Testing	0414U	Oncology (lung), augmentative algorithmic analysis of digitized whole slide imaging for 8 genes (ALK, BRAF, EGFR, ERBB2, MET, NTRK1-3, RET, ROS1), and KRAS G12C and PD-L1, if performed, formalin-fixed paraffin-embedded (FFPE) tissue, reported as positive or negative for each biomarker	NO
Investigational Potential	0415T	Repositioning of previously implanted cardiac contractility modulation transvenous electrode, (atrial or ventricular lead)	NO

Genetic Testing	0415U	Cardiovascular disease (acute coronary syndrome [ACS]), IL-16, FAS, FASLigand, HGF, CTACK, EOTAXIN, and MCP-3 by immunoassay combined with age, sex, family history, and personal history of diabetes, blood, algorithm reported as a 5-year (deleted risk) score for ACS	NO
Investigational Potential	0416T	Relocation of skin pocket for implanted cardiac contractility modulation pulse generator	NO
Investigational Potential	0417T	Programming device evaluation (in person) with iterative adjustment of the implantable device to test the function of the device and select optimal permanent programmed values with analysis, including review and report, implantable cardiac contractility modulation system	NO
Genetic Testing	0417U	Rare diseases (constitutional/heritable disorders), whole mitochondrial genome sequence with heteroplasmy detection and deletion analysis, nuclear-encoded mitochondrial gene analysis of 335 nuclear genes, including sequence changes, deletions, insertions, and copy number variants analysis, blood or saliva, identification and categorization of mitochondrial disorder-associated genetic variants	NO
Investigational Potential	0418T	Interrogation device evaluation (in person) with analysis, review and report, includes connection, recording and disconnection per patient encounter, implantable cardiac contractility modulation system	NO
Investigational Potential	0419T	Destruction of neurofibroma, extensive (cutaneous, dermal extending into subcutaneous); face, head and neck, greater than 50 neurofibromas	NO
Genetic Testing	0419U	Neuropsychiatry (eg, depression, anxiety), genomic sequence analysis panel, variant analysis of 13 genes, saliva or buccal swab, report of each gene phenotype	NO
Investigational Potential	0420T	Destruction of neurofibroma, extensive (cutaneous, dermal extending into subcutaneous); trunk and extremities, extensive, greater than 100 neurofibromas	NO
Investigational Potential	0420U	Oncology (bladder), mRNA expression profiling by real time quantitative PCR of 5 genes (MDK, HOXA13, CDC2, IGFBP5, and CXCR2) in combination with ddPCR analysis of 6 single nucleotide polymorphisms in two genes (TERT and FGFR3) utilizing a midstream voided urine sample, algorithm reported as a risk score of having urothelial carcinoma. Cxbladder Detect+.	NO
Investigational Potential	0421T	Transurethral waterjet ablation of prostate, including control of post-operative bleeding, including ultrasound guidance, complete (vasectomy, meatotomy, cystourethroscopy, urethral calibration and/or dilation, and internal urethrotomy are included when performed)	NO
Investigational Potential	0422T	Tactile breast imaging by computer-aided tactile sensors, unilateral or bilateral	NO
Genetic Testing	0422U	Oncology (pan-solid tumor), analysis of DNA biomarker response to anti-cancer therapy using cell-free circulating DNA, biomarker comparison to a previous baseline pre- treatment cell-free circulating DNA analysis using next- generation sequencing, algorithm reported as a quantitative change from baseline, including specific alterations, if appropriate	NO
Genetic Testing	0423U	Psychiatry (eg, depression, anxiety), genomic analysis panel, including variant analysis of 26 genes, buccal swab, report including metabolizer status and risk of drug toxicity by condition	NO
Investigational Potential	0424T	Insertion or replacement of neurostimulator system for treatment of central sleep apnea; complete system (transvenous placement of right or left stimulation lead, sensing lead, implantable pulse generator)	NO

Genetic Testing	0424U	Oncology (prostate), exosome-based analysis of 53 small noncoding RNAs (sncRNAs) by quantitative reverse transcription polymerase chain reaction (RTqPCR), urine, reported as no molecular evidence, low-, moderate- or elevated-risk of prostate cancer	YES
Investigational Potential	0425T	Insertion or replacement of neurostimulator system for treatment of central sleep apnea; sensing lead only	NO
Genetic Testing	0425U	Genome (eg, unexplained constitutional or heritable disorder or syndrome), rapid sequence analysis, each comparator genome (eg, parents, siblings)	YES
Investigational Potential	0426T	Insertion or replacement of neurostimulator system for treatment of central sleep apnea; stimulation lead only	NO
Genetic Testing	0426U	Genome (eg, unexplained constitutional or heritable disorder or syndrome), ultra-rapid sequence analysis	YES
Investigational Potential	0427T	Insertion or replacement of neurostimulator system for treatment of central sleep apnea; pulse generator only	NO
Investigational Potential	0428T	Removal of neurostimulator system for treatment of central sleep apnea; pulse generator only	NO
Genetic Testing	0428U	Oncology (breast), targeted hybrid-capture genomic sequence analysis panel, circulating tumor DNA (ctDNA) analysis of 56 or more genes, interrogation for sequence variants, gene copy number amplifications, gene rearrangements, microsatellite instability, and tumor mutation burden	YES
Investigational Potential	0429T	Removal of neurostimulator system for treatment of central sleep apnea; sensing lead only	NO
Investigational Potential	0430T	Removal of neurostimulator system for treatment of central sleep apnea; stimulation lead only	NO
Investigational Potential	0431T	Removal and replacement of neurostimulator system for treatment of central sleep apnea, pulse generator only	NO
Investigational Potential	0432T	Repositioning of neurostimulator system for treatment of central sleep apnea; stimulation lead only	NO
Investigational Potential	0433T	Repositioning of neurostimulator system for treatment of central sleep apnea; sensing lead only	NO
Investigational Potential	0434T	Interrogation device evaluation implanted neurostimulator pulse generator system for central sleep apnea	NO
Genetic Testing	0434U	Drug metabolism (adverse drug reactions and drug response), genomic analysis panel, variant analysis of 25 genes with reported phenotypes	YES
Investigational Potential	0435T	Programming device evaluation of implanted neurostimulator pulse generator system for central sleep apnea; single session	NO
Investigational Potential	0436T	Programming device evaluation of implanted neurostimulator pulse generator system for central sleep apnea; during sleep study	NO
Genetic Testing	0436U	Oncology (lung), plasma analysis of 388 proteins, using aptamer-based proteomics technology, predictive algorithm reported as clinical benefit from immune checkpoint inhibitor therapy	YES
Investigational Potential	0437T	Implantation of non-biologic or synthetic implant (e.g., polypropylene) for fascial reinforcement of the abdominal wall (List separately in addition to code for primary procedure)	NO
Genetic Testing	0438U	Drug metabolism (adverse drug reactions and drug response), buccal specimen, gene-drug interactions, variant analysis of 33 genes, including deletion/duplication analysis of CYP2D6, including reported phenotypes and impacted gene-drug interactions	YES

Investigational Potential	0439T	Myocardial contrast perfusion echocardiography, at rest or with stress, for assessment of myocardial ischemia or viability (List separately in addition to code for primary procedure)	NO
Investigational Potential	0440T	Ablation, percutaneous, cryoablation, includes imaging guidance; upper extremity distal/peripheral nerve	NO
Investigational Potential	0441T	Ablation, percutaneous, cryoablation, includes imaging guidance; lower extremity distal/peripheral nerve	NO
Investigational Potential	0442T	Ablation, percutaneous, cryoablation, includes imaging guidance; nerve plexus or other truncal nerve (e.g., brachial plexus, pudendal nerve)	NO
Investigational Potential	0443T	Real-time spectral analysis of prostate tissue by fluorescence spectroscopy, including imaging guidance (List separately in addition to code for primary procedure)	NO
Investigational Potential	0443U	Neurofilament light chain (NfL), ultra-sensitive immunoassay, serum or cerebrospinal fluid. Neurofilament Light Chain (NfL)	NO
Investigational Potential	0444T	Initial placement of a drug-eluting ocular insert under one or more eyelids, including fitting, training, and insertion, unilateral or bilateral	NO
Investigational Potential	0445T	Subsequent placement of a drug-eluting ocular insert under one or more eyelids, including re-training, and removal of existing insert, unilateral or bilateral	NO
Investigational Potential	0445U	β amyloid (Abeta42) and Phospho Tau (181P) (pTau181), electrochemiluminescence immunoassay (ECLIA), cerebral spinal fluid, ratio reported as positive or negative for amyloid pathology. Elecsys® Phospho-Tau (181P) CSF (pTau181) and β -Amyloid (1-42) CSF II (Abeta 42)	NO
Investigational Potential	0446T	Creation of subcutaneous pocket with insertion of implantable interstitial glucose sensor, including system activation and patient training	NO
Investigational Potential	0447T	Removal of implantable interstitial glucose sensor from subcutaneous pocket via incision	NO
Investigational Potential	0448T	Removal of implantable interstitial glucose sensor with creation of subcutaneous pocket at different anatomic site and insertion of new implantable sensor, including system activation	NO
Investigational Potential	0449T	Insertion of aqueous drainage device, without extraocular reservoir, internal approach, into the subconjunctival space; initial device	NO
Investigational Potential	0449U	Carrier screening for severe inherited conditions (eg, cystic fibrosis, spinal muscular atrophy, beta hemoglobinopathies [including sickle cell disease], alpha thalassemias) regardless of race or self-identified ancestry, genomic sequence analysis of 5 genes (CFTR, SMN1, HBB, HBA1, HBA2). Unity Screen by BillionToOne, Inc.	NO
Investigational Potential	0450T	Insertion of aqueous drainage device, without extraocular reservoir, internal approach, into the subconjunctival space; each additional device (List separately in addition to code for primary procedure)	NO
Investigational Potential	0464T	Visual evoked potential, testing for glaucoma, with interpretation and report	NO
Investigational Potential	0465T	Suprachoroidal injection of a pharmacologic agent (does not include supply of medication)	NO
Investigational Potential	0469T	Retinal polarization scan, ocular screening with on-site automated results, bilateral	NO
Investigational Potential	0472T	Device evaluation, interrogation, and initial programming of intraocular retinal electrode array (e.g., retinal prosthesis), in person, with iterative adjustment of the implantable device to test functionality, select optimal permanent programmed values with analysis, including visual training, with review and report by a qualified health care professional	NO

Investigational Potential	0473T	Device evaluation and interrogation of intraocular retinal electrode array (e.g., retinal prosthesis), in person, including reprogramming and visual training, when performed, with review and report by a qualified health care professional	NO
Investigational Potential	0474T	Insertion of anterior segment aqueous drainage device, with creation of intraocular reservoir, internal approach, into the supraciliary space	NO
Investigational Potential	0479T	FRACTIONAL ABLATIVE LASER FENESTRATION, FIRST 100 SQ CM	NO
Investigational Potential	0480T	FRACTIONAL ABLATIVE LASER FENESTRATION, EA ADDL 100 SQ CM	NO
Investigational Potential	0481T	Injection(s), autologous white blood cell concentrate (autologous protein solution), any site, including image guidance, harvesting and preparation, when performed	NO
Investigational Potential	0483T	Transcatheter mitral valve implantation/replacement (TMVI) with prosthetic valve; percutaneous approach, including transseptal puncture, when performed	NO
Investigational Potential	0484T	Transcatheter mitral valve implantation/replacement (TMVI) with prosthetic valve; transthoracic exposure (e.g., thoracotomy, transapical)	NO
Investigational Potential	0485T	Optical coherence tomography (OCT) of middle ear, with interpretation and report; unilateral	NO
Investigational Potential	0486T	Optical coherence tomography (OCT) of middle ear, with interpretation and report; bilateral	NO
Investigational Potential	0488T	Preventive behavior change, online/electronic structured intensive program for prevention of diabetes using a standardized diabetes prevention program curriculum, provided to an individual, per 30 days	NO
Investigational Potential	0489T	Autologous adipose-derived regenerative cell therapy for scleroderma in the hands; adipose tissue harvesting, isolation and preparation of harvested cells including incubation with cell dissociation enzymes, removal of non-viable cells and debris, determination of concentration and dilution of regenerative cells	NO
Investigational Potential	0490T	Autologous adipose-derived regenerative cell therapy for scleroderma in the hands; multiple injections in one or both hands	NO
Investigational Potential	0494T	Surgical preparation and cannulation of marginal (extended) cadaver donor lung(s) to ex vivo organ perfusion system, including decannulation, separation from the perfusion system, and cold preservation of the allograft prior to implantation, when performed	NO
Investigational Potential	0495T	Initiation and monitoring marginal (extended) cadaver donor lung(s) organ perfusion system by physician or qualified health care professional, including physiological and laboratory assessment (eg, pulmonary artery flow, pulmonary artery pressure, left atrial pressure, pulmonary vascular resistance, mean/peak and plateau airway pressure, dynamic compliance and perfusate gas analysis), including bronchoscopy and X ray when performed; first two hours in sterile field	NO
Investigational Potential	0496T	Initiation and monitoring marginal (extended) cadaver donor lung(s) organ perfusion system by physician or qualified health care professional, including physiological and laboratory assessment (e.g., pulmonary artery flow, pulmonary artery pressure, left atrial pressure, pulmonary vascular resistance, mean/peak and plateau airway pressure, dynamic compliance and perfusate gas analysis), including bronchoscopy and X ray when performed; each additional hour (List separately in addition to code for primary procedure)	NO

Investigational Potential	0499T	Cystourethroscopy, with mechanical dilation and urethral therapeutic drug delivery for urethral stricture or stenosis, including fluoroscopy, when performed	NO
Investigational Potential	0500T	Infectious agent detection by nucleic acid (DNA or RNA), human papillomavirus (HPV) for five or more separately reported high-risk HPV types (e.g., 16, 18, 31, 33, 35, 39, 45, 51, 52, 56, 58, 59, 68) (i.e., genotyping)	NO
Investigational Potential	0501T	Noninvasive estimated coronary fractional flow reserve (FFR) derived from coronary computed tomography angiography data using computation fluid dynamics physiologic simulation software analysis of functional data to assess the severity of coronary artery disease; data preparation and transmission, analysis of fluid dynamics and simulated maximal coronary hyperemia, generation of estimated FFR model, with anatomical data review in comparison with estimated FFR model to reconcile discordant data, interpretation and report	NO
Investigational Potential	0502T	Noninvasive estimated coronary fractional flow reserve (FFR) derived from coronary computed tomography angiography data using computation fluid dynamics physiologic simulation software analysis of functional data to assess the severity of coronary artery disease; data preparation and transmission	NO
Investigational Potential	0503T	Noninvasive estimated coronary fractional flow reserve (FFR) derived from coronary computed tomography angiography data using computation fluid dynamics physiologic simulation software analysis of functional data to assess the severity of coronary artery disease; analysis of fluid dynamics and simulated maximal coronary hyperemia, and generation of estimated FFR model	NO
Investigational Potential	0504T	Noninvasive estimated coronary fractional flow reserve (FFR) derived from coronary computed tomography angiography data using computation fluid dynamics physiologic simulation software analysis of functional data to assess the severity of coronary artery disease; anatomical data review in comparison with estimated FFR model to reconcile discordant data, interpretation and report (Deleted as of 01/01/2024)	NO
Investigational Potential	0505T	Endovenous femoral-popliteal arterial revascularization, with transcatheter placement of intravascular stent graft(s) and closure by any method, including percutaneous or open vascular access, ultrasound guidance for vascular access when performed, all catheterization(s) and intraprocedural roadmapping and imaging guidance necessary to complete the intervention, all associated	NO
Investigational Potential	0506T	Macular pigment optical density measurement by heterochromatic flicker photometry, unilateral or bilateral, with interpretation and report	NO
Investigational Potential	0507T	Near-infrared dual imaging (i.e., simultaneous reflective and trans-illuminated light) of meibomian glands, unilateral or bilateral, with interpretation and report	NO
Investigational Potential	0508T	Pulse-echo ultrasound bone density measurement resulting in indicator of axial bone mineral density, tibia	NO
Investigational Potential	0509T	Electroretinography (ERG) with interpretation and report, pattern (PERG)	NO
Investigational Potential	0510T	Removal of sinus tarsi implant	NO
Investigational Potential	0511T	Removal and reinsertion of sinus tarsi implant	NO
Investigational Potential	0512T	Extracorporeal shock wave for integumentary wound healing, high energy, including topical application and dressing care; initial wound	NO

Investigational Potential	0513T	Extracorporeal shock wave for integumentary wound healing, including topical application and dressing care; each additional wound	NO
Investigational Potential	0515T	Insertion of wireless cardiac stimulator for left ventricular pacing, including device interrogation and programming, and imaging supervision and interpretation, when performed; complete system (includes electrode and generator [transmitter and battery])	NO
Investigational Potential	0516T	Insertion of wireless cardiac stimulator for left ventricular pacing, including device interrogation and programming, and imaging supervision and interpretation, when performed; electrode only	NO
Investigational Potential	0517T	Insertion of wireless cardiac stimulator for left ventricular pacing, including device interrogation and programming, and imaging supervision and interpretation, when performed; pulse generator component(s) (battery and/or transmitter) only	NO
Investigational Potential	0518T	Removal of only pulse generator component(s) (battery and/or transmitter) of wireless cardiac stimulator for left ventricular pacing	NO
Investigational Potential	0519T	Removal and replacement of wireless cardiac stimulator for left ventricular pacing; pulse generator component(s) (battery and/or transmitter)	NO
Investigational Potential	0520T	Removal and replacement of wireless cardiac stimulator for left ventricular pacing; pulse generator component(s) (battery and/or transmitter), including placement of a new electrode	NO
Procedure - Cardiac	0521T	Interrogation device evaluation (in person) with analysis, review and report, includes connection, recording, and disconnection per patient encounter, wireless cardiac stimulator for left ventricular pacing	NO
Investigational Potential	0522T	Programming device evaluation (in person) with iterative adjustment of the implantable device to test the function of the device and select optimal permanent programmed values with analysis, including review and report, wireless cardiac stimulator for left ventricular pacing	NO
Investigational Potential	0523T	Intraprocedural coronary fractional flow reserve (FFR) with 3D functional mapping of color-coded FFR values for the coronary tree, derived from coronary angiogram data, for real-time review and interpretation of possible atherosclerotic stenosis(es) intervention (List separately in addition to code for primary procedure)	NO
Investigational Potential	0524T	Endovenous catheter directed chemical ablation with balloon isolation of incompetent extremity vein, open or percutaneous, including all vascular access, catheter manipulation, diagnostic imaging, imaging guidance and monitoring	NO
Investigational Potential	0525T	Insertion or replacement of intracardiac ischemia monitoring system, including testing of the lead and monitor, initial system programming, and imaging supervision and interpretation; complete system (electrode and implantable monitor)	NO
Investigational Potential	0526T	Insertion or replacement of intracardiac ischemia monitoring system, including testing of the lead and monitor, initial system programming, and imaging supervision and interpretation; electrode only	NO
Investigational Potential	0527T	Insertion or replacement of intracardiac ischemia monitoring system, including testing of the lead and monitor, initial system programming, and imaging supervision and interpretation; implantable monitor only	NO

Investigational Potential	0528T	Programming device evaluation (in person) of intracardiac ischemia monitoring system with iterative adjustment of programmed values, with analysis, review, and report	NO
Investigational Potential	0529T	Interrogation device evaluation (in person) of intracardiac ischemia monitoring system with analysis, review, and report	NO
Investigational Potential	0530T	Removal of intracardiac ischemia monitoring system, including all imaging supervision and interpretation; complete system (electrode and implantable monitor)	NO
Investigational Potential	0531T	Removal of intracardiac ischemia monitoring system, including all imaging supervision and interpretation; electrode only	NO
Investigational Potential	0532T	Removal of intracardiac ischemia monitoring system, including all imaging supervision and interpretation; implantable monitor only	NO
Investigational Potential	0533T	Continuous recording of movement disorder symptoms, including bradykinesia, dyskinesia, and tremor for 6 days up to 10 days; includes set-up, patient training, configuration of monitor, data upload, analysis and initial report configuration, download review, interpretation and report	NO
Investigational Potential	0534T	Continuous recording of movement disorder symptoms, including bradykinesia, dyskinesia, and tremor for 6 days up to 10 days; set-up, patient training, configuration of monitor	NO
Investigational Potential	0535T	Continuous recording of movement disorder symptoms, including bradykinesia, dyskinesia, and tremor for 6 days up to 10 days; data upload, analysis and initial report configuration	NO
Investigational Potential	0536T	Continuous recording of movement disorder symptoms, including bradykinesia, dyskinesia, and tremor for 6 days up to 10 days; download review, interpretation and report	NO
Pharmacy	0537T	CAR-T THERAPY HRVG BLD DRV T LMPHCYT PR DAY	YES
Pharmacy	0538T	CAR-T THERAPY PREP BLOOD DERIVED T LMPHCYT FOR TRANSPORTATION	YES
Pharmacy	0539T	CAR-T THERAPY RECEIPT & PREP CAR-T CELLS FOR ADMIN	YES
Pharmacy	0540T	CAR-T THERAPY AUTOLOGOUS CELL ADMINISTRATION	YES
Investigational Potential	0541T	Myocardial imaging by magnetocardiography (MCG) for detection of cardiac ischemia, by signal acquisition using minimum 36 channel grid, generation of magnetic-field time-series images, quantitative analysis of magnetic dipoles, machine learning-derived clinical scoring, and automated report generation, single study;	NO
Investigational Potential	0542T	Myocardial imaging by magnetocardiography (MCG) for detection of cardiac ischemia, by signal acquisition using minimum 36 channel grid, generation of magnetic-field time-series images, quantitative analysis of magnetic dipoles, machine learning-derived clinical scoring, and automated report generation, single study; interpretation and report	NO
Investigational Potential	0543T	Transapical mitral valve repair, including transthoracic echocardiography, when performed, with placement of artificial chordae tendineae	NO
Investigational Potential	0544T	Transcatheter mitral valve annulus reconstruction, with implantation of adjustable annulus reconstruction device, percutaneous approach including transseptal puncture	NO
Investigational Potential	0545T	Transcatheter tricuspid valve annulus reconstruction with implantation of adjustable annulus reconstruction device, percutaneous approach	NO
Investigational Potential	0546T	Radiofrequency spectroscopy, real time, intraoperative margin assessment, at the time of partial mastectomy, with report	NO

Investigational Potential	0547T	Bone-material quality testing by microindentation(s) of the tibia(s), with results reported as a score	NO
Investigational Potential	0552T	Low-level laser therapy, dynamic photonic and dynamic thermokinetic energies, provided by a physician or other qualified health care professional	NO
Investigational Potential	0553T	Percutaneous transcatheter placement of iliac arteriovenous anastomosis implant, inclusive of all radiological supervision and interpretation, intraprocedural roadmapping, and imaging guidance necessary to complete the intervention	NO
Investigational Potential	0554T	Bone strength and fracture risk using finite element analysis of functional data, and bone-mineral density, utilizing data from a computed tomography scan; retrieval and transmission of the scan data, assessment of bone strength and fracture risk and bone mineral density, interpretation and report	NO
Investigational Potential	0555T	Bone strength and fracture risk using finite element analysis of functional data, and bone-mineral density, utilizing data from a computed tomography scan; retrieval and transmission of the scan data	NO
Investigational Potential	0556T	Bone strength and fracture risk using finite element analysis of functional data, and bone-mineral density, utilizing data from a computed tomography scan; assessment of bone strength and fracture risk and bone mineral density	NO
Investigational Potential	0557T	Bone strength and fracture risk using finite element analysis of functional data, and bone-mineral density, utilizing data from a computed tomography scan; interpretation and report	NO
Investigational Potential	0558T	Computed tomography scan taken for the purpose of biomechanical computed tomography analysis	NO
Investigational Potential	0559T	Anatomic model 3D-printed from image data set(s); first individually prepared and processed component of an anatomic structure	NO
Investigational Potential	0560T	Anatomic model 3D-printed from image data set(s); each additional individually prepared and processed component of an anatomic structure (List separately in addition to code for primary procedure)	NO
Investigational Potential	0561T	Anatomic guide 3D-printed and designed from image data set(s); first anatomic guide	NO
Investigational Potential	0562T	Anatomic guide 3D-printed and designed from image data set(s); each additional anatomic guide (List separately in addition to code for primary procedure)	NO
Investigational Potential	0563T	Evacuation of meibomian glands, using heat delivered through wearable, open-eye eyelid treatment devices and manual gland expression, bilateral	NO
Investigational Potential	0564T	Oncology, chemotherapeutic drug cytotoxicity assay of cancer stem cells (CSCs), from cultured CSCs and primary tumor cells, categorical drug response reported based on percent of cytotoxicity observed, a minimum of 14 drugs or drug combinations	NO
Cosmetic Potential	0565T	Autologous cellular implant derived from adipose tissue for the treatment of osteoarthritis of the knees; tissue harvesting and cellular implant creation	NO
Investigational Potential	0566T	Autologous cellular implant derived from adipose tissue for the treatment of osteoarthritis of the knees; injection of cellular implant into knee joint including ultrasound guidance, unilateral	NO
Investigational Potential	0567T	Permanent fallopian tube occlusion with degradable biopolymer implant, transcervical approach, including transvaginal ultrasound	NO
Investigational Potential	0568T	Introduction of mixture of saline and air for sonosalpingography to confirm occlusion of fallopian tubes, transcervical approach, including transvaginal ultrasound and pelvic ultrasound	NO

Investigational Potential	0569T	Transcatheter tricuspid valve repair, percutaneous approach; initial prosthesis	NO
Investigational Potential	0570T	Transcatheter tricuspid valve repair, percutaneous approach; each additional prosthesis during same session (List separately in addition to code for primary procedure)	NO
Investigational Potential	0571T	Insertion or replacement of implantable cardioverter-defibrillator system with substernal electrode(s), including all imaging guidance and electrophysiological evaluation (includes defibrillation threshold evaluation, induction of arrhythmia, evaluation of sensing for arrhythmia termination, and programming or reprogramming of sensing or therapeutic parameters), when performed	NO
Investigational Potential	0572T	Insertion of substernal implantable defibrillator electrode	NO
Investigational Potential	0573T	Removal of substernal implantable defibrillator electrode	NO
Investigational Potential	0574T	Repositioning of previously implanted substernal implantable defibrillator-pacing electrode	NO
Investigational Potential	0575T	Programming device evaluation (in person) of implantable cardioverter-defibrillator system with substernal electrode, with iterative adjustment of the implantable device to test the function of the device and select optimal permanent programmed values with analysis, review and report by a physician or other qualified health care professional	NO
Investigational Potential	0576T	Interrogation device evaluation (in person) of implantable cardioverter-defibrillator system with substernal electrode, with analysis, review and report by a physician or other qualified health care professional, includes connection, recording and disconnection per patient encounter	NO
Investigational Potential	0577T	Electrophysiological evaluation of implantable cardioverter-defibrillator system with substernal electrode (includes defibrillation threshold evaluation, induction of arrhythmia, evaluation of sensing for arrhythmia termination, and programming or reprogramming of sensing or therapeutic parameters)	NO
Investigational Potential	0578T	Interrogation device evaluation(s) (remote), up to 90 days, substernal lead implantable cardioverter-defibrillator system with interim analysis, review(s) and report(s) by a physician or other qualified health care professional	NO
Investigational Potential	0579T	Interrogation device evaluation(s) (remote), up to 90 days, substernal lead implantable cardioverter-defibrillator system, remote data acquisition(s), receipt of transmissions and technician review, technical support and distribution of results	NO
Investigational Potential	0580T	Removal of substernal implantable defibrillator pulse generator only	NO
Investigational Potential	0581T	Ablation, malignant breast tumor(s), percutaneous, cryotherapy, including imaging guidance when performed, unilateral	NO
Investigational Potential	0582T	Transurethral ablation of malignant prostate tissue by high-energy water vapor thermotherapy, including intraoperative imaging and needle guidance	NO
Investigational Potential	0583T	Tympanostomy (requiring insertion of ventilating tube), using an automated tube delivery system, iontophoresis local anesthesia	NO
Investigational Potential	0584T	Islet cell transplant, includes portal vein catheterization and infusion, including all imaging, including guidance, and radiological supervision and interpretation, when performed; percutaneous	NO
Investigational Potential	0585T	Islet cell transplant, includes portal vein catheterization and infusion, including all imaging, including guidance, and radiological supervision and interpretation, when performed; laparoscopic	NO

Investigational Potential	0586T	Islet cell transplant, includes portal vein catheterization and infusion, including all imaging, including guidance, and radiological supervision and interpretation, when performed; open	NO
Investigational Potential	0587T	Percutaneous implantation or replacement of integrated single device neurostimulation system including electrode array and receiver or pulse generator, including analysis, programming, and imaging guidance when performed, posterior tibial nerve	NO
Investigational Potential	0588T	Revision or removal of integrated single device neurostimulation system including electrode array and receiver or pulse generator, including analysis, programming, and imaging guidance when performed, posterior tibial nerve	NO
Neurostimulator	0589T	Electronic analysis with simple programming of implanted integrated neurostimulation system (eg, electrode array and receiver), including contact group(s), amplitude, pulse width, frequency (Hz), on/off cycling, burst, dose lockout, patient-selectable parameters, responsive neurostimulation, detection algorithms, closed-loop parameters, and passive parameters, when performed by physician or other qualified health care professional, posterior tibial nerve, 1-3 parameters	NO
Neurostimulator	0590T	Electronic analysis with complex programming of implanted integrated neurostimulation system (eg, electrode array and receiver), including contact group(s), amplitude, pulse width, frequency (Hz), on/off cycling, burst, dose lockout, patient-selectable parameters, responsive neurostimulation, detection algorithms, closed-loop parameters, and passive parameters, when performed by physician or other qualified health care professional, posterior tibial nerve, 4 or more parameters	NO
Investigational Potential	0591T	Health and well-being coaching face-to-face; individual, initial assessment	NO
Investigational Potential	0592T	Health and well-being coaching face-to-face; individual, follow-up session, at least 30 minutes	NO
Investigational Potential	0593T	Health and well-being coaching face-to-face; group (2 or more individuals), at least 30 minutes	NO
Investigational Potential	0594T	Osteotomy, humerus, with insertion of an externally controlled intramedullary lengthening device, including intraoperative imaging, initial and subsequent alignment assessments, computations of adjustment schedules, and management of the intramedullary lengthening device	NO
Investigational Potential	0596T	Temporary female intraurethral valve-pump (i.e., voiding prosthesis); initial insertion, including urethral measurement	NO
Investigational Potential	0597T	Temporary female intraurethral valve-pump (i.e., voiding prosthesis); replacement	NO
Investigational Potential	0598T	Noncontact real-time fluorescence wound imaging, for bacterial presence, location, and load, per session; first anatomic site (e.g., lower extremity)	NO
Investigational Potential	0599T	Noncontact real-time fluorescence wound imaging, for bacterial presence, location, and load, per session; each additional anatomic site (e.g., upper extremity) (List separately in addition to code for primary procedure)	NO
Investigational Potential	0600T	Ablation, irreversible electroporation; 1 or more tumors per organ, including imaging guidance, when performed, percutaneous	NO
Investigational Potential	0601T	Ablation, irreversible electroporation; 1 or more tumors, including fluoroscopic and ultrasound guidance, when performed, open	NO
Investigational Potential	0602T	Glomerular filtration rate (GFR) measurement(s), transdermal, including sensor placement and administration of a single dose of fluorescent pyrazine agent	NO

Investigational Potential	0603T	Glomerular filtration rate (GFR) monitoring, transdermal, including sensor placement and administration of more than one dose of fluorescent pyrazine agent, each 24 hours	NO
Investigational Potential	0604T	Optical coherence tomography (OCT) of retina, remote, patient-initiated image capture and transmission to a remote surveillance center unilateral or bilateral; initial device provision, set-up and patient education on use of equipment	NO
Investigational Potential	0605T	Optical coherence tomography (OCT) of retina, remote, patient-initiated image capture and transmission to a remote surveillance center unilateral or bilateral; remote surveillance center technical support, data analyses and reports, with a minimum of 8 daily recordings, each 30 days	NO
Investigational Potential	0606T	Optical coherence tomography (OCT) of retina, remote, patient-initiated image capture and transmission to a remote surveillance center unilateral or bilateral; review, interpretation and report by the prescribing physician or other qualified health care professional of remote surveillance center data analyses, each 30 days	NO
Investigational Potential	0607T	Remote monitoring of an external continuous pulmonary fluid monitoring system, including measurement of radiofrequency-derived pulmonary fluid levels, heart rate, respiration rate, activity, posture, and cardiovascular rhythm (e.g., ECG data), transmitted to a remote 24-hour attended surveillance center; set-up and patient education on use of equipment	NO
Cosmetic Potential	0608T	Remote monitoring of an external continuous pulmonary fluid monitoring system, including measurement of radiofrequency-derived pulmonary fluid levels, heart rate, respiration rate, activity, posture, and cardiovascular rhythm (eg, ECG data), transmitted to a remote 24-hour attended surveillance center; analysis of data received and transmission of reports to the physician or other qualified health care professional	NO
Investigational Potential	0609T	Magnetic resonance spectroscopy, determination and localization of discogenic pain (cervical, thoracic, or lumbar); acquisition of single voxel data, per disc, on biomarkers (i.e., lactic acid, carbohydrate, alanine, laal, propionic acid, proteoglycan, and collagen) in at least 3 discs	NO
Investigational Potential	0610T	Magnetic resonance spectroscopy, determination and localization of discogenic pain (cervical, thoracic, or lumbar); transmission of biomarker data for software analysis	NO
Investigational Potential	0611T	Magnetic resonance spectroscopy, determination and localization of discogenic pain (cervical, thoracic, or lumbar); postprocessing for algorithmic analysis of biomarker data for determination of relative chemical differences between discs	NO
Investigational Potential	0612T	Magnetic resonance spectroscopy, determination and localization of discogenic pain (cervical, thoracic, or lumbar); interpretation and report	NO
Investigational Potential	0613T	Percutaneous transcatheter implantation of interatrial septal shunt device, including right and left heart catheterization, intracardiac echocardiography, and imaging guidance by the proceduralist, when performed	NO
Investigational Potential	0614T	Removal and replacement of substernal implantable defibrillator pulse generator	YES
Investigational Potential	0615T	Eye-movement analysis without spatial calibration, with interpretation and report	NO

Investigational Potential	0616T	Insertion of iris prosthesis, including suture fixation and repair or removal of iris, when performed; without removal of crystalline lens or intraocular lens, without insertion of intraocular lens	NO
Investigational Potential	0617T	Insertion of iris prosthesis, including suture fixation and repair or removal of iris, when performed; with removal of crystalline lens and insertion of intraocular lens	NO
Investigational Potential	0618T	Insertion of iris prosthesis, including suture fixation and repair or removal of iris, when performed; with secondary intraocular lens placement or intraocular lens exchange	NO
Investigational Potential	0619T	Cystourethroscopy with transurethral anterior prostate commissurotomy and drug delivery, including transrectal ultrasound and fluoroscopy, when performed	NO
Investigational Potential	0620T	Endovascular venous arterialization, tibial or peroneal vein, with transcatheter placement of intravascular stent graft(s) and closure by any method, including percutaneous or open vascular access, ultrasound guidance for vascular access when performed, all catheterization(s) and intraprocedural roadmapping and imaging guidance necessary to complete the intervention, all associated radiological supervision and interpretation, when performed	NO
Investigational Potential	0621T	Trabeculostomy ab interno by laser	NO
Investigational Potential	0622T	Trabeculostomy ab interno by laser; with use of ophthalmic endoscope	NO
Investigational Potential	0623T	Automated quantification and characterization of coronary atherosclerotic plaque to assess severity of coronary disease, using data from coronary computed tomographic angiography; data preparation and transmission, computerized analysis of data, with review of computerized analysis output to reconcile discordant data, interpretation and report	NO
Investigational Potential	0624T	Automated quantification and characterization of coronary atherosclerotic plaque to assess severity of coronary disease, using data from coronary computed tomographic angiography; data preparation and transmission	NO
Investigational Potential	0625T	Automated quantification and characterization of coronary atherosclerotic plaque to assess severity of coronary disease, using data from coronary computed tomographic angiography; computerized analysis of data from coronary computed tomographic angiography	NO
Investigational Potential	0626T	Automated quantification and characterization of coronary atherosclerotic plaque to assess severity of coronary disease, using data from coronary computed tomographic angiography; review of computerized analysis output to reconcile discordant data, interpretation and report	NO
Bioengineered Wound Healing	0627T	Percutaneous injection of allogeneic cellular and/or tissue-based product, intervertebral disc, unilateral or bilateral injection, with fluoroscopic guidance, lumbar; first level [VAST, Via Disc)	NO
Bioengineered Wound Healing	0628T	Percutaneous injection of allogeneic cellular and/or tissue-based product, intervertebral disc, unilateral or bilateral injection, with fluoroscopic guidance, lumbar; each additional level [VAST, Via Disc)	NO
Bioengineered Wound Healing	0629T	Percutaneous injection of allogeneic cellular and/or tissue-based product, intervertebral disc, unilateral or bilateral injection, with CT guidance, lumbar; first level [VAST, Via Disc)	NO
Bioengineered Wound Healing	0630T	Percutaneous injection of allogeneic cellular and/or tissue-based product, intervertebral disc, unilateral or bilateral injection, with CT guidance, lumbar; each additional level [VAST, Via Disc)	NO

Investigational Potential	0631T	Transcutaneous visible light hyperspectral imaging measurement of oxyhemoglobin, deoxyhemoglobin, and tissue oxygenation, with interpretation and report, per extremity	NO
Investigational Potential	0632T	Percutaneous transcatheter ultrasound ablation of nerves innervating the pulmonary arteries, including right heart catheterization, pulmonary artery angiography, and all imaging guidance	NO
Advanced Imaging	0633T	CT Breast w/3d rendering uni without contrast	NO
Advanced Imaging	0634T	CT Breast w/3d rendering uni with contrast	NO
Advanced Imaging	0635T	CT Brst w/3d rendering uni wo cntrst flwd cntrst	NO
Advanced Imaging	0636T	CT Breast w/3d rendering bi without contrast	NO
Advanced Imaging	0637T	CT Breast w/3d rendering bi with contrast	NO
Advanced Imaging	0638T	CT Brst w/3d rendering bi wo cntrst flwd cntrst	NO
Investigational Potential	0639T	Wireless skin sensor thermal anisotropy measurement(s) and assessment of flow in cerebrospinal fluid shunt, including ultrasound guidance, when performed	NO
Investigational Potential	0640T	Noncontact near-infrared spectroscopy studies of flap or wound (eg, for measurement of deoxyhemoglobin, oxyhemoglobin, and ratio of tissue oxygenation [StO ₂]); image acquisition, interpretation and report, each flap or wound	NO
Investigational Potential	0641T	Noncontact near-infrared spectroscopy studies of flap or wound (eg, for measurement of deoxyhemoglobin, oxyhemoglobin, and ratio of tissue oxygenation [StO ₂]); image acquisition only, each flap or wound	NO
Investigational Potential	0642T	Noncontact near-infrared spectroscopy studies of flap or wound (eg, for measurement of deoxyhemoglobin, oxyhemoglobin, and ratio of tissue oxygenation [StO ₂]); interpretation and report only, each flap or wound	NO
Investigational Potential	0643T	Transcatheter left ventricular restoration device implantation including right and left heart catheterization and left ventriculography when performed, arterial approach	NO
Investigational Potential	0644T	Transcatheter removal or debulking of intracardiac mass (eg, vegetations, thrombus) via suction (eg, vacuum, aspiration) device, percutaneous approach, with intraoperative reinfusion of aspirated blood, including imaging guidance, when performed	NO
Investigational Potential	0645T	Transcatheter implantation of coronary sinus reduction device including vascular access and closure, right heart catheterization, venous angiography, coronary sinus angiography, imaging guidance, and supervision and interpretation, when performed	NO
Procedure - Cardiac	0646T	Transcatheter tricuspid valve implantation (TTVi)/replacement with prosthetic valve, percutaneous approach, including right heart catheterization, temporary pacemaker insertion, and selective right ventricular or right atrial angiography, when performed	NO
Investigational Potential	0647T	Insertion of gastrostomy tube, percutaneous, with magnetic gastropexy, under ultrasound guidance, image documentation and report	NO
Advanced Imaging	0648T	Quantitative magnetic resonance for analysis of tissue composition (eg, fat, iron, water content), including multiparametric data acquisition, data preparation and transmission, interpretation and report, obtained without diagnostic MRI examination of the same anatomy (eg, organ, gland, tissue, target structure) during the same session	NO

Investigational Potential	0649T	Quantitative magnetic resonance for analysis of tissue composition (eg, fat, iron, water content), including multiparametric data acquisition, data preparation and transmission, interpretation and report, obtained with diagnostic MRI examination of the same anatomy (eg, organ, gland, tissue, target structure) (List separately in addition to code for primary procedure)	NO
Investigational Potential	0650T	Programming device evaluation (remote) of subcutaneous cardiac rhythm monitor system, with iterative adjustment of the implantable device to test the function of the device and select optimal permanently programmed values with analysis, review and report by a physician or other qualified health care professional	NO
Investigational Potential	0651T	Magnetically controlled capsule endoscopy, esophagus through stomach, including intraprocedural positioning of capsule, with interpretation and report	NO
Investigational Potential	0652T	Esophagogastroduodenoscopy, flexible, transnasal; diagnostic, including collection of specimen(s) by brushing or washing, when performed (separate procedure)	NO
Investigational Potential	0653T	Esophagogastroduodenoscopy, flexible, transnasal; with biopsy, single or multiple	NO
Investigational Potential	0654T	Esophagogastroduodenoscopy, flexible, transnasal; with insertion of intraluminal tube or catheter	NO
Investigational Potential	0655T	Transperineal focal laser ablation of malignant prostate tissue, including transrectal imaging guidance, with MR-fused images or other enhanced ultrasound imaging	NO
Surgical - Spine	0656T	Vertebral body tethering, anterior; up to 7 vertebral segments	NO
Surgical - Spine	0657T	Vertebral body tethering, anterior; 8 or more vertebral segments	NO
Investigational Potential	0658T	Electrical impedance spectroscopy of 1 or more skin lesions for automated melanoma risk score	NO
Investigational Potential	0659T	Transcatheter intracoronary infusion of supersaturated oxygen in conjunction with percutaneous coronary revascularization during acute myocardial infarction, including catheter placement, imaging guidance (eg, fluoroscopy), angiography, and radiologic supervision and interpretation	NO
Investigational Potential	0660T	Implantation of anterior segment intraocular nonbiodegradable drug-eluting system, internal approach	NO
Investigational Potential	0661T	Removal and reimplantation of anterior segment intraocular nonbiodegradable drug-eluting implant	NO
Investigational Potential	0662T	Scalp cooling, mechanical; initial measurement and calibration of cap	NO
Investigational Potential	0663T	Scalp cooling, mechanical; placement of device, monitoring, and removal of device (List separately in addition to code for primary procedure)	NO
Transplant	0664T	Donor hysterectomy (including cold preservation); open, from cadaver donor	NO
Transplant	0665T	Donor hysterectomy (including cold preservation); open, from living donor	NO
Transplant	0666T	Donor hysterectomy (including cold preservation); laparoscopic or robotic, from living donor	NO
Transplant	0667T	Recipient uterus allograft transplantation from cadaver or living donor	NO
Transplant	0668T	Backbench standard preparation of cadaver or living donor uterine allograft prior to transplantation, including dissection and removal of surrounding soft tissues and preparation of uterine vein(s) and uterine artery(ies), as necessary	NO

Transplant	0669T	Backbench reconstruction of cadaver or living donor uterus allograft prior to transplantation; venous anastomosis, each	NO
Transplant	0670T	Backbench reconstruction of cadaver or living donor uterus allograft prior to transplantation; arterial anastomosis, each	NO
Surgical – Glaucoma	0671T	Insertion of anterior segment aqueous drainage device into the trabecular meshwork, without external reservoir, and without concomitant cataract removal, one or more	NO
Investigational Potential	0672T	Endovaginal cryogen-cooled, monopolar radiofrequency remodeling of the tissues surrounding the female bladder neck and proximal urethra for urinary incontinence	NO
Investigational Potential	0673T	Ablation, benign thyroid nodule(s), percutaneous, laser, including imaging guidance	NO
Investigational Potential	0674T	Laparoscopic insertion of new or replacement of permanent implantable synchronized diaphragmatic stimulation system for augmentation of cardiac function, including an implantable pulse generator and diaphragmatic lead(s)	NO
Investigational Potential	0675T	Laparoscopic insertion of new or replacement of diaphragmatic lead(s), permanent implantable synchronized diaphragmatic stimulation system for augmentation of cardiac function, including connection to an existing pulse generator; first lead	NO
Investigational Potential	0676T	Laparoscopic insertion of new or replacement of diaphragmatic lead(s), permanent implantable synchronized diaphragmatic stimulation system for augmentation of cardiac function, including connection to an existing pulse generator; each additional lead (List separately in addition to code for primary procedure)	NO
Investigational Potential	0677T	Laparoscopic repositioning of diaphragmatic lead(s), permanent implantable synchronized diaphragmatic stimulation system for augmentation of cardiac function, including connection to an existing pulse generator; first repositioned lead	NO
Investigational Potential	0678T	Laparoscopic repositioning of diaphragmatic lead(s), permanent implantable synchronized diaphragmatic stimulation system for augmentation of cardiac function, including connection to an existing pulse generator; each additional repositioned lead (List separately in addition to code for primary procedure)	NO
Investigational Potential	0679T	Laparoscopic removal of diaphragmatic lead(s), permanent implantable synchronized diaphragmatic stimulation system for augmentation of cardiac function	NO
Investigational Potential	0680T	Insertion or replacement of pulse generator only, permanent implantable synchronized diaphragmatic stimulation system for augmentation of cardiac function, with connection to existing lead(s)	NO
Investigational Potential	0681T	Relocation of pulse generator only, permanent implantable synchronized diaphragmatic stimulation system for augmentation of cardiac function, with connection to existing dual leads	NO
Investigational Potential	0682T	Removal of pulse generator only, permanent implantable synchronized diaphragmatic stimulation system for augmentation of cardiac function	NO

Investigational Potential	0683T	Programming device evaluation (in-person) with iterative adjustment of the implantable device to test the function of the device and select optimal permanent programmed values with analysis, review and report by a physician or other qualified health care professional, permanent implantable synchronized diaphragmatic stimulation system for augmentation of cardiac function	NO
Investigational Potential	0684T	Peri-procedural device evaluation (in-person) and programming of device system parameters before or after a surgery, procedure, or test with analysis, review, and report by a physician or other qualified health care professional, permanent implantable synchronized diaphragmatic stimulation system for augmentation of cardiac function	NO
Investigational Potential	0685T	Interrogation device evaluation (in-person) with analysis, review and report by a physician or other qualified health care professional, including connection, recording and disconnection per patient encounter, permanent implantable synchronized diaphragmatic stimulation system for augmentation of cardiac function	NO
Investigational Potential	0686T	Histotripsy (ie, non-thermal ablation via acoustic energy delivery) of malignant hepatocellular tissue, including image guidance	NO
Investigational Potential	0687T	Treatment of amblyopia using an online digital program; device supply, educational set-up, and initial session	NO
Investigational Potential	0688T	Treatment of amblyopia using an online digital program; assessment of patient performance and program data by physician or other qualified health care professional, with report, per calendar month	NO
Investigational Potential	0689T	Quantitative ultrasound tissue characterization (non-elastographic), including interpretation and report, obtained without diagnostic ultrasound examination of the same anatomy (eg, organ, gland, tissue, target structure)	NO
Investigational Potential	0690T	Quantitative ultrasound tissue characterization (non-elastographic), including interpretation and report, obtained with diagnostic ultrasound examination of the same anatomy (eg, organ, gland, tissue, target structure) (List separately in addition to code for primary procedure)	NO
Investigational Potential	0691T	Automated analysis of an existing computed tomography study for vertebral fracture(s), including assessment of bone density when performed, data preparation, interpretation, and report	NO
Investigational Potential	0692T	Therapeutic ultrafiltration	NO
Investigational Potential	0693T	Comprehensive full body computer-based markerless 3D kinematic and kinetic motion analysis and report	NO
Investigational Potential	0694T	3-dimensional volumetric imaging and reconstruction of breast or axillary lymph node tissue, each excised specimen, 3-dimensional automatic specimen reorientation, interpretation and report, real-time intraoperative	NO
Investigational Potential	0695T	Body surface-activation mapping of pacemaker or pacing cardioverter-defibrillator lead(s) to optimize electrical synchrony, cardiac resynchronization therapy device, including connection, recording, disconnection, review, and report; at time of implant or replacement	NO
Investigational Potential	0696T	Body surface-activation mapping of pacemaker or pacing cardioverter-defibrillator lead(s) to optimize electrical synchrony, cardiac resynchronization therapy device, including connection, recording, disconnection, review, and report; at time of follow-up interrogation or programming device evaluation	NO

Investigational Potential	0697T	Quantitative magnetic resonance for analysis of tissue composition (eg, fat, iron, water content), including multiparametric data acquisition, data preparation and transmission, interpretation and report, obtained without diagnostic MRI examination of the same anatomy (eg, organ, gland, tissue, target structure) during the same session; multiple organs	NO
Investigational Potential	0698T	Quantitative magnetic resonance for analysis of tissue composition (eg, fat, iron, water content), including multiparametric data acquisition, data preparation and transmission, interpretation and report, obtained with diagnostic MRI examination of the same anatomy (eg, organ, gland, tissue, target structure); multiple organs (List separately in addition to code for primary procedure)	NO
Investigational Potential	0699T	Injection, posterior chamber of eye, medication	NO
Investigational Potential	0700T	Molecular fluorescent imaging of suspicious nevus; first lesion	NO
Investigational Potential	0701T	Molecular fluorescent imaging of suspicious nevus; each additional lesion (List separately in addition to code for primary procedure)	NO
Investigational Potential	0704T	Remote treatment of amblyopia using an eye tracking device; device supply with initial set-up and patient education on use of equipment	NO
Investigational Potential	0705T	Remote treatment of amblyopia using an eye tracking device; surveillance center technical support including data transmission with analysis, with a minimum of 18 training hours, each 30 days	NO
Investigational Potential	0706T	Remote treatment of amblyopia using an eye tracking device; interpretation and report by physician or other qualified health care professional, per calendar month	NO
Investigational Potential	0707T	INJ BONE SUB MATRL INTO SUBCHONDRAL BONE DEFECT	NO
Investigational Potential	0708T	Intradermal cancer immunotherapy; preparation and initial injection	NO
Investigational Potential	0709T	Intradermal cancer immunotherapy; each additional injection (List separately in addition to code for primary procedure)	NO
Investigational Potential	0710T	Noninvasive arterial plaque analysis using software processing of data from non-coronary computerized tomography angiography; including data preparation and transmission, quantification of the structure and composition of the vessel wall and assessment for lipid-rich necrotic core plaque to assess atherosclerotic plaque stability, data review, interpretation and report	NO
Investigational Potential	0711T	Noninvasive arterial plaque analysis using software processing of data from non-coronary computerized tomography angiography; data preparation and transmission	NO
Investigational Potential	0712T	Noninvasive arterial plaque analysis using software processing of data from non-coronary computerized tomography angiography; quantification of the structure and composition of the vessel wall and assessment for lipid-rich necrotic core plaque to assess atherosclerotic plaque stability	NO
Investigational Potential	0713T	Noninvasive arterial plaque analysis using software processing of data from non-coronary computerized tomography angiography; data review, interpretation and report	NO
Investigational Potential	0714T	Transperineal laser ablation of benign prostatic hyperplasia, including imaging guidance	NO
Investigational Potential	0715T	Percutaneous transluminal coronary lithotripsy (List separately in addition to code for primary procedure)	NO
Investigational Potential	0716T	Cardiac acoustic waveform recording with automated analysis and generation of coronary artery disease risk score	NO

Cosmetic Potential	0717T	Autologous adipose-derived regenerative cell (ADRC) therapy for partial thickness rotator cuff tear; adipose tissue harvesting, isolation and preparation of harvested cells, including incubation with cell dissociation enzymes, filtration, washing and concentration of ADRCs	NO
Cosmetic Potential	0718T	Autologous adipose-derived regenerative cell (ADRC) therapy for partial thickness rotator cuff tear; injection into supraspinatus tendon including ultrasound guidance, unilateral	NO
Investigational Potential	0719T	Posterior vertebral joint replacement, including bilateral facetectomy, laminectomy, and radical discectomy, including imaging guidance, lumbar spine, single segment	NO
Durable Medical Equipment	0720T	Percutaneous electrical nerve field stimulation, cranial nerves, without implantation	NO
Investigational Potential	0721T	Quantitative computed tomography (CT) tissue characterization, including interpretation and report, obtained without concurrent CT examination of any structure contained in previously acquired diagnostic imaging	NO
Investigational Potential	0722T	Quantitative computed tomography (CT) tissue characterization, including interpretation and report, obtained with concurrent CT examination of any structure contained in the concurrently acquired diagnostic imaging dataset (List separately in addition to code for primary procedure)	NO
Investigational Potential	0723T	Quantitative magnetic resonance cholangiopancreatography (QMRCP) including data preparation and transmission, interpretation and report, obtained without diagnostic magnetic resonance imaging (MRI) examination of the same anatomy (eg, organ, gland, tissue, target structure) during the same session	NO
Investigational Potential	0724T	Quantitative magnetic resonance cholangiopancreatography (QMRCP) including data preparation and transmission, interpretation and report, obtained with diagnostic magnetic resonance imaging (MRI) examination of the same anatomy (eg, organ, gland, tissue, target structure) (List separately in addition to code for primary procedure)	NO
Investigational Potential	0725T	Vestibular device implantation, unilateral	NO
Investigational Potential	0726T	Removal of implanted vestibular device, unilateral	NO
Investigational Potential	0727T	Removal and replacement of implanted vestibular device, unilateral	NO
Investigational Potential	0728T	Diagnostic analysis of vestibular implant, unilateral; with initial programming	NO
Investigational Potential	0729T	Diagnostic analysis of vestibular implant, unilateral; with subsequent programming	NO
Investigational Potential	0730T	Trabeculotomy by laser, including optical coherence tomography (OCT) guidance	NO
Investigational Potential	0731T	Augmentative AI-based facial phenotype analysis with report	NO
Investigational Potential	0732T	Immunotherapy administration with electroporation, intramuscular	NO
Investigational Potential	0733T	Remote body and limb kinematic measurement-based therapy ordered by a physician or other qualified health care professional; supply and technical	NO
Investigational Potential	0734T	Remote body and limb kinematic measurement-based therapy ordered by a physician or other qualified health care professional; treatment management services by a physician or other qualified health care professional, per calendar month	NO
Investigational Potential	0735T	Preparation of tumor cavity, with placement of a radiation therapy applicator for intraoperative radiation therapy (IORT) concurrent with primary craniotomy (List separately in addition to code for primary procedure)	NO
Investigational Potential	0736T	Colonic lavage, 35 or more liters of water, gravity-fed, with induced defecation, including insertion of rectal catheter	NO

Investigational Potential	0737T	Xenograft implantation into the articular surface	NO
Investigational Potential	0738T	Treatment planning for magnetic field induction ablation of malignant prostate tissue, using data from previously performed magnetic resonance imaging (MRI) examination	NO
Investigational Potential	0739T	Ablation of malignant prostate tissue by magnetic field induction	NO
Investigational Potential	0740T	Remote autonomous algorithm-based recommendation system for insulin dose calculation and titration; initial set-up and patient education	NO
Investigational Potential	0741T	Remote autonomous algorithm-based recommendation system for insulin dose calculation and titration; provision of software, data collection, transmission, and storage, each 30 days	NO
Investigational Potential	0742T	Absolute quantitation of myocardial blood flow (AQMBF), single-photon emission computed tomography (SPECT), with exercise or pharmacologic stress, and at rest, when performed	NO
Investigational Potential	0743T	Bone strength and fracture risk using finite element analysis of functional data and bone-mineral density, with concurrent vertebral fracture assessment, with overall fracture risk assessment, interpretation and report	NO
Investigational Potential	0744T	Insertion of bioprosthetic valve, open, femoral vein, including duplex ultrasound imaging guidance, when performed, including autogenous or nonautogenous patch graft, when performed	NO
Investigational Potential	0745T	Cardiac focal ablation utilizing radiation therapy for arrhythmia; noninvasive arrhythmia localization and mapping of arrhythmia site (nidus), derived from anatomical image data (eg, CT, MRI, or myocardial perfusion scan) and electrical data (eg, 12-lead ECG data), and identification of areas of avoidance	NO
Investigational Potential	0746T	Cardiac focal ablation utilizing radiation therapy for arrhythmia; conversion of arrhythmia localization and mapping of arrhythmia site (nidus) into a multidimensional radiation treatment plan	NO
Investigational Potential	0747T	Cardiac focal ablation utilizing radiation therapy for arrhythmia; delivery of radiation therapy, arrhythmia	NO
Investigational Potential	0748T	Injections of stem cell product into perianal perifistular soft tissue, including fistula preparation (eg, removal of setons, fistula curettage, closure of internal openings)	NO
Investigational Potential	0749T	Bone strength and fracture-risk assessment using digital X-ray radiogrammetry-bone mineral density (DXR-BMD) analysis of bone mineral density (BMD) utilizing data from a digital X ray, retrieval and transmission of digital X ray data, assessment of bone strength and fracture-risk and BMD, interpretation and report;	NO
Investigational Potential	0750T	Bone strength and fracture-risk assessment using digital X-ray radiogrammetry-bone mineral density (DXR-BMD) analysis of bone mineral density (BMD) utilizing data from a digital X ray, retrieval and transmission of digital X ray data, assessment of bone strength and fracture-risk and BMD, interpretation and report; with single-view digital X-ray examination of the hand taken for the purpose of DXR-BMD	NO
Investigational Potential	0751T	Digitization of glass microscope slides for level II, surgical pathology, gross and microscopic examination (List separately in addition to code for primary procedure)	NO
Investigational Potential	0752T	Digitization of glass microscope slides for level III, surgical pathology, gross and microscopic examination (List separately in addition to code for primary procedure)	NO

Investigational Potential	0753T	Digitization of glass microscope slides for level IV, surgical pathology, gross and microscopic examination (List separately in addition to code for primary procedure)	NO
Investigational Potential	0754T	Digitization of glass microscope slides for level V, surgical pathology, gross and microscopic examination (List separately in addition to code for primary procedure)	NO
Investigational Potential	0755T	Digitization of glass microscope slide for level VI, surgical pathology, gross and microscopic examination (List separately in addition to code for primary procedure)	NO
Investigational Potential	0756T	Digitization of glass microscope slides for special stain, including interpretation and report, group I, for microorganisms (eg, acid fast, methenamine silver) (List separately in addition to code for primary procedure)	NO
Investigational Potential	0757T	Digitization of glass microscope slides for special stain, including interpretation and report, group II, all other (eg, iron, trichrome), except stain for microorganisms, stains for enzyme constituents, or immunocytochemistry and immunohistochemistry (List separately in addition to code for primary procedure)	NO
Investigational Potential	0758T	Digitization of glass microscope slides for special stain, including interpretation and report, histochemical stain on frozen tissue block (List separately in addition to code for primary procedure)	NO
Investigational Potential	0759T	Digitization of glass microscope slides for special stain, including interpretation and report, group III, for enzyme constituents (List separately in addition to code for primary procedure)	NO
Investigational Potential	0760T	Digitization of glass microscope slides for immunohistochemistry or immunocytochemistry, per specimen, initial single antibody stain procedure (List separately in addition to code for primary procedure)	NO
Investigational Potential	0761T	Digitization of glass microscope slides for immunohistochemistry or immunocytochemistry, per specimen, each additional single antibody stain procedure (List separately in addition to code for primary procedure)	NO
Investigational Potential	0762T	Digitization of glass microscope slides for immunohistochemistry or immunocytochemistry, per specimen, each multiplex antibody stain procedure (List separately in addition to code for primary procedure)	NO
Investigational Potential	0763T	Digitization of glass microscope slides for morphometric analysis, tumor immunohistochemistry (eg, Her-2/neu, estrogen receptor/progesterone receptor), quantitative or semiquantitative, per specimen, each single antibody stain procedure, manual (List separately in addition to code for primary procedure)	NO
Investigational Potential	0764T	Assistive algorithmic electrocardiogram risk-based assessment for cardiac dysfunction (eg, low-ejection fraction, pulmonary hypertension, hypertrophic cardiomyopathy); related to concurrently performed electrocardiogram (List separately in addition to code for primary procedure)	NO
Investigational Potential	0765T	Assistive algorithmic electrocardiogram risk-based assessment for cardiac dysfunction (eg, low-ejection fraction, pulmonary hypertension, hypertrophic cardiomyopathy); related to previously performed electrocardiogram	NO
Durable Medical Equipment	0766T	Transcutaneous magnetic stimulation by focused low- frequency electromagnetic pulse, peripheral nerve, initial treatment, with identification and marking of the treatment location, including noninvasive electroneurographic localization (nerve conduction localization), when performed; first nerve	NO

Durable Medical Equipment 0767T	Transcutaneous magnetic stimulation by focused low- frequency electromagnetic pulse, peripheral nerve, initial treatment, with identification and marking of the treatment location, including noninvasive electroneurographic localization (nerve conduction localization), when performed; each additional nerve	NO
Durable Medical Equipment 0768T	Transcutaneous magnetic stimulation by focused low- frequency electromagnetic pulse, peripheral nerve, subsequent treatment, including noninvasive electroneurographic localization (nerve conduction localization), when performed; first nerve	NO
Durable Medical Equipment 0769T	Transcutaneous magnetic stimulation by focused low- frequency electromagnetic pulse, peripheral nerve, subsequent treatment, including noninvasive electroneurographic localization (nerve conduction localization), when performed; each additional nerve	NO
Durable Medical Equipment 0770T	Virtual reality technology to assist therapy	NO
Durable Medical Equipment 0771T	Virtual reality (VR) procedural dissociation services provided by the same physician or other qualified health care professional performing the diagnostic or therapeutic service that the VR procedural dissociation supports, requiring the presence of an independent, trained observer to assist in the monitoring of the patient's level of dissociation or consciousness and physiological status; initial 15 minutes of intraservice time, patient age 5 years or older	NO
Durable Medical Equipment 0772T	Virtual reality (VR) procedural dissociation services provided by the same physician or other qualified health care professional performing the diagnostic or therapeutic service that the VR procedural dissociation supports, requiring the presence of an independent, trained observer to assist in the monitoring of the patient's level of dissociation or consciousness and physiological status; each additional 15 minutes of intraservice time	NO
Durable Medical Equipment 0773T	Virtual reality (VR) procedural dissociation services provided by a physician or other qualified health care professional other than the physician or other qualified health care professional performing the diagnostic or therapeutic service that the VR procedural dissociation supports; initial 15 minutes of intraservice time, patient age 5 years or older	NO
Durable Medical Equipment 0774T	Virtual reality (VR) procedural dissociation services provided by a physician or other qualified health care professional other than the physician or other qualified health care professional performing the diagnostic or therapeutic service that the VR procedural dissociation supports; each additional 15 minutes of intraservice time	NO
Investigational Potential 0775T	Arthrodesis, sacroiliac joint, percutaneous, with image guidance, includes placement of intra-articular implant(s) (eg, bone allograft[s], synthetic device[s])	NO
Investigational Potential 0776T	Therapeutic induction of intra-brain hypothermia, including placement of a mechanical temperature-controlled cooling device to the neck over carotids and	NO
Investigational Potential 0777T	Real-time pressure-sensing epidural guidance system (List separately in addition to code for primary procedure)	NO
Investigational Potential 0778T	Surface mechanomyography (sMMG) with concurrent application of inertial measurement unit (IMU) sensors for measurement of multi-joint range of motion, posture, gait, and muscle function	NO

Investigational Potential	0779T	Gastrointestinal myoelectrical activity study, stomach through colon, with interpretation and report	NO
Investigational Potential	0780T	INSTLTN FECAL MICROBIOTA SSP RCT NMA LWR GI TRCT	NO
Investigational Potential	0781T	Bronchoscopy, rigid or flexible, with insertion of esophageal protection device and circumferential radiofrequency destruction of the pulmonary nerves, including fluoroscopic guidance when performed; bilateral mainstem bronchi	NO
Investigational Potential	0782T	Bronchoscopy, rigid or flexible, with insertion of esophageal protection device and circumferential radiofrequency destruction of the pulmonary nerves, including fluoroscopic guidance when performed; unilateral mainstem bronchus	NO
Durable Medical Equipment	0783T	Transcutaneous auricular neurostimulation, set-up, calibration, and patient education on use of equipment	NO
Investigational Potential	0784T	Insertion or replacement of percutaneous electrode array, spinal, with integrated neurostimulator, including imaging guidance, when performed	NO
Investigational Potential	0785T	Revision or removal of neurostimulator electrode array, spinal, with integrated neurostimulator	NO
Investigational Potential	0786T	Insertion or replacement of percutaneous electrode array, sacral, with integrated neurostimulator, including imaging guidance, when performed	NO
Investigational Potential	0787T	Revision or removal of neurostimulator electrode array, sacral, with integrated neurostimulator	NO
Investigational Potential	0788T	Electronic analysis with simple programming of implanted integrated neurostimulation system (e.g., electrode array and receiver), including contact group(s), amplitude, pulse width, frequency (Hz), on/off cycling, burst, dose lockout, patient-selectable parameters, responsive neurostimulation, detection algorithms, closed-loop parameters, and passive parameters, when performed by physician or other qualified health care professional, spinal cord or sacral nerve, 1-3 parameters	NO
Investigational Potential	0789T	Electronic analysis with complex programming of implanted integrated neurostimulation system (e.g., electrode array and receiver), including contact group(s), amplitude, pulse width, frequency (Hz), on/off cycling, burst, dose lockout, patient-selectable parameters, responsive neurostimulation, detection algorithms, closedloop parameters, and passive parameters, when performed by physician or other qualified health care professional, spinal cord or sacral nerve, 4 or more parameters	NO
Surgical – Spine	0790T	Revision (eg, augmentation, division of tether), replacement, or removal of thoracolumbar or lumbar vertebral body tethering, including thoracoscopy, when performed	NO
Investigational Potential	0791T	Motor-cognitive, semi-immersive virtual reality-facilitated gait training, each 15 minutes (List separately in addition to code for primary procedure)	NO
Investigational Potential	0792T	Application of silver diamine fluoride 38%, by a physician or other qualified health care professional	NO
Investigational Potential	0793T	Percutaneous transcatheter thermal ablation of nerves innervating the pulmonary arteries, including right heart catheterization, pulmonary artery angiography, and all imaging guidance	NO
Investigational Potential	0794T	Patient-specific, assistive, rules-based algorithm for ranking pharmaco-oncologic treatment options based on the patient's tumor-specific cancer marker information obtained from prior molecular pathology, immunohistochemical, or other pathology results which have been previously interpreted and reported separately	NO

Investigational Potential	0795T	Transcatheter insertion of permanent dual-chamber leadless pacemaker, including imaging guidance (eg, fluoroscopy, venous ultrasound, right atrial angiography, right ventriculography, femoral venography) and device evaluation	NO
Investigational Potential	0796T	Transcatheter insertion of permanent dual-chamber leadless pacemaker, including imaging guidance (eg, fluoroscopy, venous ultrasound, right atrial angiography, right ventriculography, femoral venography) and device evaluation (eg, interrogation or programming), when performed; right atrial pacemaker component (when an existing right ventricular single leadless pacemaker exists to create a dual-chamber leadless pacemaker system)	NO
Investigational Potential	0797T	Transcatheter insertion of permanent dual-chamber leadless pacemaker, including imaging guidance (eg, fluoroscopy, venous ultrasound, right atrial angiography, right ventriculography, femoral venography) and device evaluation (eg, interrogation or programming), when performed; right ventricular pacemaker component (when part of a dual-chamber leadless pacemaker system)	NO
Investigational Potential	0798T	Transcatheter removal of permanent dual-chamber leadless pacemaker, including imaging guidance (eg, fluoroscopy, venous ultrasound, right atrial angiography, right ventriculography, femoral venography), when performed; complete system (ie, right atrial and right ventricular pacemaker components)	NO
Investigational Potential	0799T	Transcatheter removal of permanent dual-chamber leadless pacemaker, including imaging guidance (eg, fluoroscopy, venous ultrasound, right atrial angiography, right ventriculography, femoral venography), when performed; right atrial pacemaker component	NO
Investigational Potential	0800T	Transcatheter removal of permanent dual-chamber leadless pacemaker, including imaging guidance (eg, fluoroscopy, venous ultrasound, right atrial angiography, right ventriculography, femoral venography), when performed; right ventricular pacemaker component (when part of a dual-chamber leadless pacemaker system)	NO
Investigational Potential	0801T	Transcatheter removal and replacement of permanent dual-chamber leadless pacemaker, including imaging guidance (eg, fluoroscopy, venous ultrasound, right atrial angiography, right ventriculography, femoral venography) and device evaluation (eg, interrogation or programming), when performed; dual-chamber system (ie, right atrial and right ventricular pacemaker components)	NO
Investigational Potential	0802T	Transcatheter removal and replacement of permanent dual-chamber leadless pacemaker, including imaging guidance (eg, fluoroscopy, venous ultrasound, right atrial angiography, right ventriculography, femoral venography) and device evaluation (eg, interrogation or programming), when performed; right atrial pacemaker component	NO
Investigational Potential	0803T	Transcatheter removal and replacement of permanent dual-chamber leadless pacemaker, including imaging guidance (eg, fluoroscopy, venous ultrasound, right atrial angiography, right ventriculography, femoral venography) and device	NO

Investigational Potential	0804T	Programming device evaluation (in person) with iterative adjustment of implantable device to test the function of device and to select optimal permanent programmed values, with analysis, review, and report, by a physician or other qualified health care professional, leadless pacemaker system in dual cardiac chambers	NO
Investigational Potential	0805T	Transcatheter superior and inferior vena cava prosthetic valve implantation (ie, caval valve implantation [CAVI]); percutaneous femoral vein approach	NO
Investigational Potential	0806T	Transcatheter superior and inferior vena cava prosthetic valve implantation (ie, caval valve implantation [CAVI]); open femoral vein approach	NO
Investigational Potential	0807T	Pulmonary tissue ventilation analysis using software-based processing of data from separately captured cinefluorograph images; in combination with previously acquired computed tomography (CT) images, including data preparation and transmission, quantification of pulmonary tissue ventilation, data review, interpretation and report	NO
Investigational Potential	0808T	Pulmonary tissue ventilation analysis using software-based processing of data from separately captured cinefluorograph images; in combination with computed tomography (CT) images taken for the purpose of pulmonary tissue ventilation analysis, including data preparation and transmission, quantification of pulmonary tissue ventilation, data review, interpretation and report	NO
Investigational Potential	0809T	Arthrodesis, sacroiliac joint, percutaneous or minimally invasive (indirect visualization), with image guidance, placement of transfixing device(s) and intra-articular implant(s), including allograft or synthetic device(s)	NO
Gene Therapy	0810T	Subretinal injection of a pharmacologic agent, including vitrectomy and 1 or more retinotomies	NO
Investigational Potential	0811T	Remote multi-day complex uroflowmetry (eg, calibrated electronic equipment); set-up and patient education on use of equipment	NO
Investigational Potential	0812T	Remote multi-day complex uroflowmetry (eg, calibrated electronic equipment); device supply with automated report generation, up to 10 days	NO
Bariatric Surgery	0813T	Esophagogastroduodenoscopy, flexible, transoral, with volume adjustment of intragastric bariatric balloon	NO
Investigational Potential	0814T	Percutaneous injection of calcium-based biodegradable osteoconductive material, proximal femur, including imaging guidance, unilateral	NO
Investigational Potential	0815T	Ultrasound-based radiofrequency echographic multi-spectrometry (REMS), bone-density study and fracture-risk assessment, 1 or more sites, hips, pelvis, or spine	NO
Neurostimulator	0816T	Open insertion or replacement of integrated neurostimulation system for bladder dysfunction including electrode(s) (eg, array or leadless), and pulse generator or receiver, including analysis, programming, and imaging guidance, when performed, posterior tibial nerve; subcutaneous	NO
Neurostimulator	0817T	Open insertion or replacement of integrated neurostimulation system for bladder dysfunction including electrode(s) (eg, array or leadless), and pulse generator or receiver, including analysis, programming, and imaging guidance, when performed, posterior tibial nerve; subfascial	NO
Investigational Potential	0818T	Revision or removal of integrated neurostimulation system for bladder dysfunction, including analysis, programming, and imaging, when performed, posterior tibial nerve; subcutaneous	NO

Investigational Potential	0819T	Revision or removal of integrated neurostimulation system for bladder dysfunction, including analysis, programming, and imaging, when performed, posterior tibial nerve; subfascial	NO
Investigational Potential	0820T	Continuous in-person monitoring and intervention (eg, psychotherapy, crisis intervention), as needed, during psychedelic medication therapy; first physician or other qualified health care professional, each hour	NO
Investigational Potential	0821T	Continuous in-person monitoring and intervention (eg, psychotherapy, crisis intervention), as needed, during psychedelic medication therapy; second physician or other qualified health care professional, concurrent with first physician or other qualified health care professional, each hour (List separately in addition to code for primary procedure)	NO
Investigational Potential	0822T	Continuous in-person monitoring and intervention (eg, psychotherapy, crisis intervention), as needed, during psychedelic medication therapy; clinical staff under the direction of a physician or other qualified health care professional, concurrent with first physician or other qualified health care professional, each hour (List separately in addition to code for primary procedure)	NO
Investigational Potential	0823T	Transcatheter insertion of permanent single-chamber leadless pacemaker, right atrial, including imaging guidance (eg, fluoroscopy, venous ultrasound, right atrial angiography and/or right ventriculography, femoral venography, cavography) and device evaluation (eg, interrogation or programming), when performed	NO
Investigational Potential	0824T	Transcatheter removal of permanent single-chamber leadless pacemaker, right atrial, including imaging guidance (eg, fluoroscopy, venous ultrasound, right atrial angiography and/or right ventriculography, femoral venography, cavography), when performed	NO
Investigational Potential	0825T	Transcatheter removal and replacement of permanent single-chamber leadless pacemaker, right atrial, including imaging guidance (eg, fluoroscopy, venous ultrasound, right atrial angiography and/or right ventriculography, femoral venography, cavography) and device evaluation (eg, interrogation or programming), when performed	NO
Investigational Potential	0826T	Programming device evaluation (in person) with iterative adjustment of the implantable device to test the function of the device and select optimal permanent programmed values with analysis, review and report by a physician or other qualified health care professional, leadless pacemaker system in single-cardiac chamber	NO
Investigational Potential	0827T	Digitization of glass microscope slides for cytopathology, fluids, washings, or brushings, except cervical or vaginal; smears with interpretation (List separately in addition to code for primary procedure)	NO
Investigational Potential	0828T	Digitization of glass microscope slides for cytopathology, fluids, washings, or brushings, except cervical or vaginal; simple filter method with interpretation (List separately in addition to code for primary procedure)	NO
Investigational Potential	0829T	Digitization of glass microscope slides for cytopathology, concentration technique, smears, and interpretation (eg, Saccomanno technique) (List separately in addition to code for primary procedure)	NO
Investigational Potential	0830T	Digitization of glass microscope slides for cytopathology, selective-cellular enhancement technique with interpretation (eg, liquid-based slide preparation method), except cervical or vaginal (List separately in addition to code for primary procedure)	NO

Investigational Potential	0831T	Digitization of glass microscope slides for cytopathology, cervical or vaginal (any reporting system), requiring interpretation by physician (List separately in addition to code for primary procedure)	NO
Investigational Potential	0832T	Digitization of glass microscope slides for cytopathology, smears, any other source; screening and interpretation (List separately in addition to code for primary procedure)	NO
Investigational Potential	0833T	Digitization of glass microscope slides for cytopathology, smears, any other source; preparation, screening and interpretation (List separately in addition to code for primary procedure)	NO
Investigational Potential	0834T	Digitization of glass microscope slides for cytopathology, smears, any other source; extended study involving over 5 slides and/or multiple stains (List	NO
Investigational Potential	0835T	Digitization of glass microscope slides for cytopathology, evaluation of fine needle aspirate; immediate cytohistologic study to determine adequacy for diagnosis, first evaluation episode, each site (List separately in addition to code for primary procedure)	NO
Investigational Potential	0836T	Digitization of glass microscope slides for cytopathology, evaluation of fine needle aspirate; immediate cytohistologic study to determine adequacy for diagnosis, each separate additional evaluation episode, same site (List separately in addition to code for primary procedure)	NO
Investigational Potential	0837T	Digitization of glass microscope slides for cytopathology, evaluation of fine needle aspirate; interpretation and report (List separately in addition to code for primary procedure)	NO
Investigational Potential	0838T	Digitization of glass microscope slides for consultation and report on referred slides prepared elsewhere (List separately in addition to code for primary procedure)	NO
Investigational Potential	0839T	Digitization of glass microscope slides for consultation and report on referred material requiring preparation of slides (List separately in addition to code for primary procedure)	NO
Investigational Potential	0840T	Digitization of glass microscope slides for consultation, comprehensive, with review of records and specimens, with report on referred material (List separately in addition to code for primary procedure)	NO
Investigational Potential	0841T	Digitization of glass microscope slides for pathology consultation during surgery; first tissue block, with frozen section(s), single specimen (List separately in addition to code for primary procedure)	NO
Investigational Potential	0842T	Digitization of glass microscope slides for pathology consultation during surgery; each additional tissue block with frozen section(s) (List separately in addition to code for primary procedure)	NO
Investigational Potential	0843T	Digitization of glass microscope slides for pathology consultation during surgery; cytologic examination (eg, touch preparation, squash preparation), initial site (List separately in addition to code for primary procedure)	NO
Investigational Potential	0844T	Digitization of glass microscope slides for pathology consultation during surgery; cytologic examination (eg, touch preparation, squash preparation), each additional site (List separately in addition to code for primary procedure)	NO
Investigational Potential	0845T	Digitization of glass microscope slides for immunofluorescence, per specimen; initial single antibody stain procedure (List separately in addition to code for primary procedure)	NO
Investigational Potential	0846T	Digitization of glass microscope slides for immunofluorescence, per specimen; each additional single antibody stain procedure (List separately in addition to code for primary procedure)	NO

Investigational Potential	0847T	Digitization of glass microscope slides for examination and selection of retrieved archival (ie, previously diagnosed) tissue(s) for molecular analysis (eg, KRAS mutational analysis) (List separately in addition to code for primary procedure)	NO
Investigational Potential	0848T	Digitization of glass microscope slides for in situ hybridization (eg, FISH), per specimen; initial single probe stain procedure (List separately in addition to code for primary procedure)	NO
Investigational Potential	0849T	Digitization of glass microscope slides for in situ hybridization (eg, FISH), per specimen; each additional single probe stain procedure (List separately in addition to code for primary procedure)	NO
Investigational Potential	0850T	Digitization of glass microscope slides for in situ hybridization (eg, FISH), per specimen; each multiplex probe stain procedure (List separately in addition to code for primary procedure)	NO
Investigational Potential	0851T	Digitization of glass microscope slides for morphometric analysis, in situ hybridization (quantitative or semiquantitative), manual, per specimen; initial single probe stain procedure (List separately in addition to code for primary procedure)	NO
Investigational Potential	0852T	Digitization of glass microscope slides for morphometric analysis, in situ hybridization (quantitative or semiquantitative), manual, per specimen; each additional single probe stain procedure (List separately in addition to code for primary procedure)	NO
Investigational Potential	0853T	Digitization of glass microscope slides for morphometric analysis, in situ hybridization (quantitative or semiquantitative), manual, per specimen; each multiplex probe stain procedure (List separately in addition to code for primary procedure)	NO
Investigational Potential	0854T	Digitization of glass microscope slides for blood smear, peripheral, interpretation by physician with written report (List separately in addition to code for primary procedure)	NO
Investigational Potential	0855T	Digitization of glass microscope slides for bone marrow, smear interpretation (List separately in addition to code for primary procedure)	NO
Investigational Potential	0856T	Digitization of glass microscope slides for electron microscopy, diagnostic (List separately in addition to code for primary procedure)	NO
Investigational Potential	0857T	Opto-acoustic imaging, breast, unilateral, including axilla when performed, real-time with image documentation, augmentative analysis and report (List separately in addition to code for primary procedure)	NO
Investigational Potential	0858T	Externally applied transcranial magnetic stimulation with concomitant measurement of evoked cortical potentials with automated report	NO
Investigational Potential	0859T	Noncontact near-infrared spectroscopy (eg, for measurement of deoxyhemoglobin, oxyhemoglobin, and ratio of tissue oxygenation), other than for screening for peripheral arterial disease, image acquisition, interpretation, and report; each additional anatomic site (List separately in addition to code for primary procedure)	NO
Investigational Potential	0860T	Noncontact near-infrared spectroscopy (eg, for measurement of deoxyhemoglobin, oxyhemoglobin, and ratio of tissue oxygenation), for screening for peripheral arterial disease, including provocative maneuvers, image acquisition, interpretation, and report, one or both lower extremities	NO
Investigational Potential	0861T	Removal of pulse generator for wireless cardiac stimulator for left ventricular pacing; both components (battery and transmitter)	NO

Investigational Potential	0862T	Relocation of pulse generator for wireless cardiac stimulator for left ventricular pacing, including device interrogation and programming; battery component only	NO
Investigational Potential	0863T	Relocation of pulse generator for wireless cardiac stimulator for left ventricular pacing, including device interrogation and programming; transmitter component only	NO
Investigational Potential	0864T	Low-intensity extracorporeal shock wave therapy involving corpus cavernosum, low energy	NO
Investigational Potential	0865T	Quantitative magnetic resonance image (MRI) analysis of the brain with comparison to prior magnetic resonance (MR) study(ies), including lesion identification, characterization, and quantification, with brain volume(s) quantification and/or severity score, when performed, data preparation and transmission, interpretation and report, obtained without diagnostic MRI examination of the brain during the same session	NO
Investigational Potential	0866T	Quantitative magnetic resonance image (MRI) analysis of the brain with comparison to prior magnetic resonance (MR) study(ies), including lesion detection, characterization, and quantification, with brain volume(s) quantification and/or severity score, when performed, data preparation and transmission, interpretation and report, obtained with diagnostic MRI examination of the brain (List separately in addition to code for primary procedure)	NO
Radiation	4165F	3-dimensional conformal radiotherapy (3D-CRT) or intensity modulated radiation therapy (IMRT) received (PRCA)	YES
Transportation	A0346	AMBULANCE SERVICE, ALS, NON-EMERGENCY TR	YES
Transportation	A0380	BLS mileage (per mile)	NONEMERGEN T-YES
Transportation	A0390	ALS mileage (per mile)	YES
Transportation	A0420	Ambulance waiting time (ALS or BLS), one-half (1/2) hour increments	NO
Transportation	A0425	Ground mileage, per statute mile	NONEMERGEN T-YES
Transportation	A0426	Ambulance service, advanced life support, nonemergency transport, level 1 (ALS 1)	NONEMERGEN T-YES
Transportation	A0427	Ambulance service, advanced life support, emergency transport, level 1 (ALS 1 - emergency)	NO
Transportation	A0428	Ambulance service, basic life support, nonemergency transport, (BLS)	YES
Transportation	A0429	Ambulance service, basic life support, emergency transport (BLS, emergency)	NO
Transportation	A0430	Ambulance service, conventional air services, transport, one way (fixed wing)	YES
Transportation	A0431	Ambulance service, conventional air services, transport, one way (rotary wing)	YES
Transportation	A0432	Paramedic intercept (PI), rural area, transport furnished by a volunteer ambulance company which is prohibited by state law from billing third party payers	YES
Transportation	A0434	Specialty care transport (SCT)	YES
Transportation	A0435	Fixed wing air mileage, per statute mile	YES
Transportation	A0436	Rotary wing air mileage, per statute mile	YES

Transportation	A0888	Noncovered ambulance mileage, per mile (e.g., for miles traveled beyond closest appropriate facility)	YES
Transportation	A0988	Ambulance response and treatment, no transport	NO
Transportation	A0999	Unlisted ambulance service	YES
BioEngineered Wound Healing	A2001	Innovamatrix AC, per square centimeter	NO
BioEngineered Wound Healing	A2002	Mirragen advanced wound matrix, per square centimeter	NO
BioEngineered Wound Healing	A2003	bio-Connekt Wound Matrix, per sq cm	NO
BioEngineered Wound Healing	A2004	Xcellistem, per square centimeter	NO
BioEngineered Wound Healing	A2005	Microlyte matrix, per square centimeter	NO
BioEngineered Wound Healing	A2006	Novosorb synpath dermal matrix, per square centimeter	NO
BioEngineered Wound Healing	A2007	Restrata, per square centimeter	NO
BioEngineered Wound Healing	A2008	TheraGenesis, per square centimeter	NO
BioEngineered Wound Healing	A2009	Symphony, per square centimeter	NO
BioEngineered Wound Healing	A2010	Apis, per square centimeter	NO
BioEngineered Wound Healing	A2011	Supra SDRM, per square centimeter	NO
BioEngineered Wound Healing	A2012	Suprathel, per square centimeter	NO
BioEngineered Wound Healing	A2013	InnovaMatrix FS, per square centimeter	NO
Bioengineered Wound Healing	A2014	Omeza Collagen Matrix, per 100 mg	NO
Bioengineered Wound Healing	A2015	Phoenix Wound Matrix, per sq cm	NO
Bioengineered Wound Healing	A2016	PermeaDerm B, per sq cm	NO
Bioengineered Wound Healing	A2017	PermeaDerm Glove, each	NO
Bioengineered Wound Healing	A2018	PermeaDerm C, per sq cm	NO
Bioengineered Wound Healing	A2019	Kerecis omega3 MariGen Shield, per square centimeter	NO
Bioengineered Wound Healing	A2020	Ac5 advanced wound system (Ac5)	NO
Bioengineered Wound Healing	A2021	NeoMatrix, per square centimeter	NO
Bioengineered Wound Healing	A2022	InnovaBurn or InnovaMatrix XL, per square centimeter	NO
Bioengineered Wound Healing	A2023	InnovaMatrix PD 1 mg	NO

Bioengineered Wound Healing	A2024	Resolve Matrix, per square centimeter	NO
Bioengineered Wound Healing	A2025	Miro3D, per cubic centimeter	NO
BioEngineered Wound Healing	A4100	Skin substitute, FDA cleared as a device, not otherwise specified	YES
Durable Medical Equipment	A4220	INFUSION PUMP REFILL KIT	NO
Durable Medical Equipment	A4221	MAINT DRUG INFUS CATH PER WK	NO
Durable Medical Equipment	A4222	INFUSION SUPPLIES WITH PUMP	NO
Durable Medical Equipment	A4223	INFUSION SUPPLIES W/O PUMP	NO
Durable Medical Equipment	A4226	SUPPLIES FOR INSULIN INFUSION PUMP, PER WEEK	NO
Pharmacy	A4238	SUPPLY ALLOW FOR ADJUNCTIVE CONT GLUCOSE MONITOR (CGM) 1 MONTH SUPPLY	YES
Durable Medical Equipment	A4290	SACRAL NERVE STIM TEST LEAD	YES
Durable Medical Equipment	A4300	CATH IMPL VASC ACCESS PORTAL	NO
Durable Medical Equipment	A4301	IMPLANTABLE ACCESS SYST PERC	NO
Durable Medical Equipment	A4335	INCONTINENCE SUPPLY	NO
Durable Medical Equipment	A4338	INDWELLING CATHETER LATEX	NO
Durable Medical Equipment	A4340	INDWELLING CATHETER SPECIAL	NO
Surgical - Genitourinary	A4341	Indwelling intraurethral drainage device with valve, patient inserted, replacement only, each [inFlow system]	NO
Surgical - Genitourinary	A4342	Accessories for patient inserted indwelling intraurethral drainage device with valve, replacement only, each [inFlow system]	NO
Durable Medical Equipment	A4344	CATH INDW FOLEY 2 WAY SILICN	NO
Durable Medical Equipment	A4349	DISPOSABLE MALE EXTERNAL CAT	NO
Durable Medical Equipment	A4351	STRAIGHT TIP URINE CATHETER	NO
Durable Medical Equipment	A4352	COUDE TIP URINARY CATHETER	NO
Durable Medical Equipment	A4353	INTERMITTENT URINARY CATH	NO
Durable Medical Equipment	A4354	CATH INSERTION TRAY W/BAG	NO
Durable Medical Equipment	A4421	OSTOMY SUPPLY MISC	NO

Investigational Potential	A4468	Exsufflation belt, includes all supplies and accessories	YES
Neurostimulator	A4540	Distal transcutaneous electrical nerve stimulator, stimulates peripheral nerves of the upper arm	NO
Investigational Potential	A4542	Supplies and accessories for external upper limb tremor stimulator of the peripheral nerves of the wrist	NO
Durable Medical Equipment	A4555	Electrode/transducer for use with electrical stimulation device used for cancer treatment, replacement only	YES
Hyperbaric Treatment	A4575	Topical hyperbaric oxygen chamber, disposable	NO
Durable Medical Equipment	A4596	Cranial electrotherapy stimulation (CES) system supplies and accessories, per month	NO
Durable Medical Equipment	A4600	Sleeve for intermittent limb compression device, replacement only, each	Yes
Sleep Disorder Management	A4604	Tubing with heating element	YES
Durable Medical Equipment	A4638	Replacement battery for patient-owned ear pulse generator, each	
Durable Medical Equipment	A4641	RADIOPHARM DX AGENT NOC	NO
Durable Medical Equipment	A4642	IN111 SATUMOMAB	NO
Investigational Potential	A4659	Surgical supply, miscellaneous [no specific code for antimicrobial silver wound dressings (e.g., Acticoat, Actisorb, AQUACEL Ag, Promogran Prisma, Silversorb, Urgotul Silver)]	YES
Durable Medical Equipment	A4913	MISC DIALYSIS SUPPLIES NOC	NO
Durable Medical Equipment	A5500	DIAB SHOE FOR DENSITY INSERT	NO
Durable Medical Equipment	A5501	DIABETIC CUSTOM MOLDED SHOE	NO
Durable Medical Equipment	A5503	DIABETIC SHOE W/ROLLER/ROCKR	NO
Durable Medical Equipment	A5504	DIABETIC SHOE WITH WEDGE	NO
Durable Medical Equipment	A5505	DIAB SHOE W/METATARSAL BAR	NO
Durable Medical Equipment	A5506	DIABETIC SHOE W/OFF SET HEEL	NO
Durable Medical Equipment	A5507	MODIFICATION DIABETIC SHOE	NO
Durable Medical Equipment	A5508	DIABETIC DELUXE SHOE	NO
Durable Medical Equipment	A5510	COMPRESSION FORM SHOE INSERT	NO
Durable Medical Equipment	A5512	MULTI DEN INSERT DIRECT FORM	NO
Durable Medical Equipment	A5513	MULTI DEN INSERT CUSTOM MOLD	NO
Durable Medical Equipment	A5514	DIABETIC PT MULTIPLE DENSITY INSERT TOTAL CONTACT W/FOOT	NO

Durable Medical Equipment	A6460	SYNTHETIC RESORBABLE WOUND DRESSING <= 16 SQ IN, EA	NO
Durable Medical Equipment	A6461	SYNTHETIC RESORBABLE WOUND DRESSING 16-48 SQ IN, EA	NO
Durable Medical Equipment	A6549	G COMPRESSION STOCKING	NO
Cardiac - Monitor	A6550	Wound care set, for negative pressure wound therapy electrical pump, includes all supplies and accessories	YES
Durable Medical Equipment	A7001	NONDISPOSABLE PUMP CANISTER	NO
Durable Medical Equipment	A7002	TUBING USED W SUCTION PUMP	NO
Durable Medical Equipment	A7004	DISPOSABLE NEBULIZER SML VOL	NO
Durable Medical Equipment	A7007	LG VOL NEBULIZER DISPOSABLE	NO
Durable Medical Equipment	A7020	INTERFACE, COUGH STIM DEVICE	NO
Durable Medical Equipment	A7025	High frequency chest wall oscillation system vest, replacement for use with patient-owned equipment, each	YES
Durable Medical Equipment	A7026	REPLACE CHST CMPRSS SYS HOSE	NO
Sleep Disorder Management	A7027	Combination Oral/Nasal Mask used with positive airway pressure device, each	YES
Sleep Disorder Management	A7028	Oral Cushion, Replacement for Combination Oral/Nasal Mask, each	YES
Sleep Disorder Management	A7029	Nasal Pillows, Replacement for Combination Oral/Nasal Mask, pair	YES
Sleep Disorder Management	A7030	Full Face Mask used with positive airway pressure device, each	YES
Sleep Disorder Management	A7031	Face Mask Cushion, Replacement for Full Face Mask	YES
Sleep Disorder Management	A7032	Replacement Cushion for Nasal Application Device	YES
Sleep Disorder Management	A7033	Replacement Pillows for Nasal Application Device, pair	YES
Sleep Disorder Management	A7034	Nasal Interface (mask or cannula type), used with positive airway pressure device, with/without head strap	YES
Sleep Disorder Management	A7035	Headgear	YES
Sleep Disorder Management	A7036	Chinstrap	YES
Sleep Disorder Management	A7037	Tubing	YES
Sleep Disorder Management	A7038	Filter, disposable	YES
Durable Medical Equipment	A7039	Filter, non-disposable	NO

Sleep Disorder Management	A7044	Oral Interface for Positive Airway Pressure Therapy	YES
Sleep Disorder Management	A7045	Replacement Exhalation Port for PAP Therapy	YES
Sleep Disorder Management	A7046	Water chamber for humidifier, replacement, each	YES
Durable Medical Equipment	A8004	REPL SOFT INTERFACE, HELMET	NO
Investigational Potential	A9268	Programmer for transient, orally ingested capsule	NO
Investigational Potential	A9269	Programable, transient, orally ingested capsule, for use with external programmer, per month	NO
Durable Medical Equipment	A9274	EXT AMB INSULIN DELIVERY SYS	YES
Pharmacy		DISPOSABLE SENSOR, CGM SYS	Auth Required. Quantity Limit applies: Medtronic quantity of 15 allowed in 105 day rolling period. Dexcom covered under retail pharmacy benefit. Please contact Pharmacy Customer Service for assistance.
	A9276		

Pharmacy		EXTERNAL TRANSMITTER, CGM	Auth Required. Quantity Limit applies: Medtronic quantity of 4 allowed in a 365 day rolling period. Dexcom covered under retail pharmacy benefit. Please contact Pharmacy Customer Service for assistance.
	A9277		
Pharmacy		EXTERNAL RECEIVER, CGM SYS	Auth Required. Quantity limit applies: Medtronic quantity of 1 allowed in a 365 day rolling period. Dexcom covered under retail pharmacy benefit. Please contact Pharmacy Customer Service for assistance.
	A9278		
Cosmetic Potential	A9279	Monitoring feature/device, stand-alone or integrated, any type, includes all accessories, components and electronics, not otherwise classified [when specified as an ingestion event monitor, for example, ID-CAP System or Discover]	NO
Investigational Potential	A9291	Prescription digital cognitive and/or behavioral therapy FDA cleared, per course of treatment	NO
Investigational Potential	A9292	Prescription digital visual therapy, software-only, FDA cleared, per course of treatment	NO

Pharmacy	A9513	LUTETIUM LU 177, DOTATATE, THERAPEUTIC, 1 MILLICURIE	YES
Radiation	A9543	Yttrium Y-90 ibritumomab tiuxetan, per treatment dose (Zevalin therapeutic)	YES
Advanced Imaging	A9573	INJECTION, GADOPICLENOL, 1 ML	YES
Procedure - Cardiac	A9582	Iodine I-123 Iobenguane, Diagnostic, Per study dose, up to 15 millicuries [AdreView; when specified for use in myocardial imaging]	NO
Radiation	A9590	Iodine I-131, Iobenguane, 1 mCi (Azedra)	YES
Advanced Imaging	A9595	Piflufolastat F-18, diagnostic, 1 mCi	YES
Advanced Imaging	A9596	Gallium Ga-68 gozetotide, diagnostic, (Illuccix), 1 mCi	YES
Advanced Imaging	A9597	Positron emission tomography radiopharma	YES
Radiation	A9606	Radium ra-223 dichloride, therapeutic (Xofigo)	YES
Radiation	A9607	Lutetium lu 177 vipivotide tetraxetan (Pluvicto)	YES
Durable Medical Equipment	A9900	SUPPLY/ACCESSORY/SERVICE	YES
Investigational Potential	A9999	Miscellaneous DME supply or accessory, not otherwise specified [when specified as Vibrant Gastro system]	YES
Durable Medical Equipment	B4035	ENTERAL FEED SUPP PUMP PER D	YES
Durable Medical Equipment	B4102	EF ADULT FLUIDS AND ELECTRO	YES
Durable Medical Equipment	B4103	EF PED FLUID AND ELECTROLYTE	YES
Durable Medical Equipment	B4148	Enteral feeding supply kit; elastomeric control fed, per day, includes but not limited to feeding/flushing syringe, administration set tubing, dressings, tape	YES
Durable Medical Equipment	B4149	EF BLENDERIZED FOODS	YES
Durable Medical Equipment	B4150	EF COMPLET W//INTACT NUTRIENT	YES
Durable Medical Equipment	B4152	EF CALORIE DENSE >/=1.5KCAL	YES
Durable Medical Equipment	B4153	EF HYDROLYZED/AMINO ACIDS	YES
Durable Medical Equipment	B4154	EF SPEC METABOLIC NONINHERIT	YES
Durable Medical Equipment	B4155	EF INCOMPLETE/MODULAR	YES
Durable Medical Equipment	B4157	EF SPECIAL METABOLIC INHERIT	YES
Durable Medical Equipment	B4158	EF PED COMPLETE INTACT NUT	YES
Durable Medical Equipment	B4159	EF PED COMPLETE SOY BASED	YES
Durable Medical Equipment	B4160	EF PED CALORIC DENSE >/=0.7KC	YES
Durable Medical Equipment	B4161	EF PED HYDROLYZED/AMINO ACID	YES
Durable Medical Equipment	B4162	EF PED SPECMETABOLIC INHERIT	YES
Home Infusion	B4164	Parenteral nutrition solution; carbohydrates (dextrose), 50% or less (500 ml = 1 unit) - home mix	YES

Home Infusion	B4168	Parenteral nutrition solution; amino acid, 3.5%, (500 ml = 1 unit) - home mix	YES
Home Infusion	B4172	Parenteral nutrition solution; amino acid, 5.5% through 7%, (500 ml = 1 unit) - home mix	YES
Home Infusion	B4176	Parenteral nutrition solution; amino acid, 7% through 8.5%, (500 ml = 1 unit) - home mix	YES
Home Infusion	B4178	Parenteral nutrition solution; amino acid, greater than 8.5%, (500 ml = 1 unit) - home mix	YES
Home Infusion	B4180	Parenteral nutrition solution; carbohydrates (dextrose), greater than 50% (500 ml = 1 unit) - home mix	YES
Home Infusion	B4185	Parenteral nutrition solution, not otherwise specified, 10 grams lipids	YES
Home Infusion	B4187	Omegaven, 10 grams lipids	YES
Pharmacy	B4189	PARENTERAL SOL AMINO ACID &	YES
Home Infusion	B4193	Parenteral nutrition solution; compounded amino acid and carbohydrates with electrolytes, trace elements, and vitamins, including preparation, any strength, 52 to 73 grams of protein - premix	YES
Home Infusion	B4197	Parenteral nutrition solution; compounded amino acid and carbohydrates with electrolytes, trace elements, and vitamins, including preparation, any strength, 74 to 100 grams of protein - premix	YES
Home Infusion	B4199	Parenteral nutrition solution; compounded amino acid and carbohydrates with electrolytes, trace elements, and vitamins, including preparation, any strength, over 100 grams of protein - premix	YES
Home Infusion	B4216	Parenteral nutrition; additives (vitamins, trace elements, heparin, electrolytes) home mix per day	YES
Home Infusion	B4220	Parenteral nutrition supply kit; premix, per day	YES
Home Infusion	B4222	Parenteral nutrition supply kit; home mix, per day	YES
Home Infusion	B4224	Parenteral nutrition administration kit, per day	YES
Home Infusion	B5000	Parenteral nutrition solution compounded amino acid and carbohydrates with electrolytes, trace elements, and vitamins, including preparation, any strength, renal - Aminosyn-RF, NephroAmine, RenAmine - premix	YES
Home Infusion	B5100	Parenteral nutrition solution compounded amino acid and carbohydrates with electrolytes, trace elements, and vitamins, including preparation, any strength, hepatic, HepatoAmine - premix	YES
Home Infusion	B5200	Parenteral nutrition solution compounded amino acid and carbohydrates with electrolytes, trace elements, and vitamins, including preparation, any strength, stress-branch chain amino acids - FreeAmine-HBC - premix	YES
Durable Medical Equipment	B9002	ENTERAL INFUSION PUMP W/ ALA	YES
Home Infusion	B9004	Parenteral nutrition infusion pump, portable	YES
Home Infusion	B9006	Parenteral nutrition infusion pump, stationary	YES
Durable Medical Equipment	B9998	ENTERAL SUPP NOT OTHERWISE C	YES
Home Infusion	B9999	NOC for parenteral supplies	YES
Implants_Supplies	C1713	ANCHOR/SCREW BN/BN,TIS/BN	NO
Procedure - Cardiac	C1714	Catheter, transluminal atherectomy, directional	NO
Procedure - Cardiac	C1721	Cardioverter-defibrillator, dual chamber (implantable)	NO
Procedure - Cardiac	C1722	Cardioverter-defibrillator, single chamber (implantable)	NO

Procedure - Cardiac	C1724	Catheter, transluminal atherectomy, rotational	NO
Procedure - Cardiac	C1725	Catheter, transluminal angioplasty, nonlaser (may include guidance, infusion/perfusion capability)	NO
Procedure - Cardiac	C1753	Catheter, intravascular ultrasound	NO
Procedure - Cardiac	C1760	Closure device, vascular (implantable/insertable)	NO
Procedure - Cardiac	C1761	Catheter, transluminal intravascular lithotripsy, coronary	YES
Cardiac - Monitor	C1764	Event recorder, cardiac (implantable)	NO
Neurostimulator	C1767	Generator, neurostimulator (implantable), nonrechargeable	YES
Procedure - Cardiac	C1769	Guide wire	NO
Surgical - Genitourinary	C1771	REPAIR DEVICE, URINARY, INCONTINENCE, WI	NO
Implantable Infusion Pumps	C1772	Infusion pump, programmable (implantable)	YES
Implants_Supplies	C1776	JOINT DEVICE (IMPLANTABLE)	NO
Procedure - Cardiac	C1777	Lead, cardioverter-defibrillator, endocardial single coil (implantable)	NO
Neurostimulator	C1778	Lead, neurostimulator (implantable)	YES
Neurostimulator	C1787	Patient programmer, neurostimulator	YES
Surgical - Breast	C1789	Prosthesis, breast (implantable)	Yes- if realted to womens health law
Durable Medical Equipment	C1813	Prosthesis, penile, inflatable	
Surgical - Genitourinary	C1815	Prosthesis, urinary sphincter (implantable)	NO
Neurostimulator	C1820	Generator, neurostimulator (implantable), with rechargeable battery and charging system	YES
Surgical - Misc.	C1821	Interspinous process distraction device (implantable)	NO
Neurostimulator	C1822	Generator, neurostimulator (implantable), high frequency, with rechargeable battery and charging system	YES
Investigational Potential	C1823	Generator, neurostimulator (implantable), nonrechargeable, with transvenous sensing and stimulation leads	NO
Investigational Potential	C1824	Generator, cardiac contractility modulation (implantable)	YES
Investigational Potential	C1825	Generator, neurostimulator (implantable), non- rechargeable with carotid sinus baroreceptor stimulation lead(s)	NO
Investigational Potential	C1826	Generator, neurostimulator (implantable), includes closed feedback loop leads and all implantable components, with rechargeable battery and charging system	NO
Bioengineered Wound Healing	C1832	Autograft suspension, including cell processing and application, and all system components	NO
Investigational Potential	C1833	Monitor, cardiac, including intracardiac lead and all system components (implantable)	YES
Investigational Potential	C1839	Iris prosthesis	YES
Surgical - ENT	C1840	Lens, intraocular (telescopic)	NO
Procedure - Cardiac	C1874	Stent, coated/covered, with delivery system	NO
Procedure - Cardiac	C1875	Stent, coated/covered, without delivery system	NO
Procedure - Cardiac	C1876	Stent, noncoated/noncovered, with delivery system	NO
Procedure - Cardiac	C1877	Stent, noncoated/noncovered, without delivery system	NO

Cosmetic Potential	C1878	Material for vocal cord medialization, synthetic (implantable) [e.g., RenuVoice, RenuGel]	
Procedure - Cardiac	C1882	Cardioverter-defibrillator, other than single or dual chamber (implantable)	NO
Neurostimulator	C1883	Adapter/extension, pacing lead or neurostimulator lead (implantable)	YES
Procedure - Cardiac	C1885	Catheter, transluminal angioplasty, laser	YES
Advanced Imaging	C1887	Catheter, guiding (may include infusion/perfusion capability)	YES
Implantable Infusion Pumps	C1891	Infusion pump, nonprogrammable, permanent (implantable)	YES
Procedure - Cardiac	C1895	Lead, cardioverter-defibrillator, endocardial dual coil (implantable)	NO
Procedure - Cardiac	C1896	Lead, cardioverter-defibrillator, other than endocardial single or dual coil (implantable)	NO
Surgical - Spine	C2614	Probe, percutaneous lumbar discectomy	NO
Surgical - Misc.	C2616	Brachytherapy source, nonstranded, yttrium-90, per source [when specified as yttrium-90 microspheres]	YES
Durable Medical Equipment	C2622	Prosthesis, penile, non-inflatable	
Cardiac - Monitor	C2624	Implantable wireless pulmonary artery pressure sensor with delivery catheter, including all system components	NO
Implantable Infusion Pumps	C2626	Infusion pump, nonprogrammable, temporary (implantable)	YES
Advanced Imaging	C2630	CATHETER, ELECTROPHYSIOLOGY, DIAGNOSTIC/	YES
Bioengineered Wound Healing	C5271	Application of low cost skin substitute graft to trunk, arms, legs, total wound surface area up to 100 sq cm; first 25 sq cm or less wound surface area	YES
Bioengineered Wound Healing	C5272	Application of low cost skin substitute graft to trunk, arms, legs, total wound surface area up to 100 sq cm; each additional 25 sq cm wound surface area, or part thereof	YES
Bioengineered Wound Healing	C5273	Application of low cost skin substitute graft to trunk, arms, legs, total wound surface area greater than or equal to 100 sq cm; first 100 sq cm wound surface area, or 1% of body area of infants and children	YES
Bioengineered Wound Healing	C5274	Application of low cost skin substitute graft to trunk, arms, legs, total wound surface area greater than or equal to 100 sq cm; each additional 100 sq cm wound surface area, or part thereof, or each additional 1% of body area of infants and children, or part thereof	YES
Bioengineered Wound Healing	C5275	Application of low cost skin substitute graft to face, scalp, eyelids, mouth, neck, ears, orbits, genitalia, hands, feet, and/or multiple digits, total wound surface area up to 100 sq cm; first 25 sq cm or less wound surface area	YES
Bioengineered Wound Healing	C5276	Application of low cost skin substitute graft to face, scalp, eyelids, mouth, neck, ears, orbits, genitalia, hands, feet, and/or multiple digits, total wound surface area up to 100 sq cm; each additional 25 sq cm wound surface area, or part thereof	YES
Bioengineered Wound Healing	C5277	Application of low cost skin substitute graft to face, scalp, eyelids, mouth, neck, ears, orbits, genitalia, hands, feet, and/or multiple digits, total wound surface area greater than or equal to 100 sq cm; first 100 sq cm wound surface area, or 1% of body area of infants and children	YES

Bioengineered Wound Healing	C5278	Application of low cost skin substitute graft to face, scalp, eyelids, mouth, neck, ears, orbits, genitalia, hands, feet, and/or multiple digits, total wound surface area greater than or equal to 100 sq cm; each additional 100 sq cm wound surface area, or part thereof, or each additional 1% of body area of infants and children, or part thereof	YES
Procedure - Cardiac	C7531	Revascularization, endovascular, open or percutaneous, femoral, popliteal artery(ies), unilateral, with transluminal angioplasty with intravascular ultrasound (initial noncoronary vessel) during diagnostic evaluation and/or therapeutic intervention, including radiological supervision and interpretation	YES
Procedure - Cardiac	C7534	Revascularization, endovascular, open or percutaneous, femoral, popliteal artery(ies), unilateral, with atherectomy, includes angioplasty within the same vessel, when performed with intravascular ultrasound (initial noncoronary vessel) during diagnostic evaluation and/or therapeutic intervention, including radiological supervision and interpretation	YES
Procedure - Cardiac	C7535	Revascularization, endovascular, open or percutaneous, femoral, popliteal artery(ies), unilateral, with transluminal stent placement(s), includes angioplasty within the same vessel, when performed, with intravascular ultrasound (initial noncoronary vessel) during diagnostic evaluation and/or therapeutic intervention, including radiological supervision and interpretation	YES
Procedure - Cardiac	C7538	Insertion of new or replacement of permanent pacemaker with ventricular transvenous electrode(s), with insertion of pacing electrode, cardiac venous system, for left ventricular pacing, at time of insertion of implantable defibrillator or pacemaker pulse generator (eg, for upgrade to dual chamber system)	NO
Procedure - Cardiac	C7539	Insertion of new or replacement of permanent pacemaker with atrial and ventricular transvenous electrode(s), with insertion of pacing electrode, cardiac venous system, for left ventricular pacing, at time of insertion of implantable defibrillator or pacemaker pulse generator (eg, for upgrade to dual chamber system)	NO
Procedure - Cardiac	C7540	Removal of permanent pacemaker pulse generator with replacement of pacemaker pulse generator, dual lead system, with insertion of pacing electrode, cardiac venous system, for left ventricular pacing, at time of insertion of implantable defibrillator or pacemaker pulse generator (eg, for upgrade to dual chamber system)	NO
Advanced Imaging	C8903	Magnetic resonance imaging with contrast, breast; unilateral	YES
Advanced Imaging	C8905	Magnetic resonance imaging without contrast followed by with contrast, breast; unilateral	YES
Advanced Imaging	C8906	Magnetic resonance imaging with contrast, breast; bilateral	YES
Advanced Imaging	C8907	MAGNETIC RESONANCE IMAGING WITHOUT CONTR	YES
Advanced Imaging	C8908	Magnetic resonance imaging without contrast followed by with contrast, breast; bilateral	YES
Advanced Imaging	C8910	MAGNETIC RESONANCE ANGIOGRAPHY WITHOUT C	YES
Advanced Imaging	C8914	MAGNETIC RESONANCE ANGIOGRAPHY WITHOUT C	YES
Advanced Imaging	C8925	TRANSESOPHAGEAL ECHOCARDIOGRAPHY (TEE) W	NO
Pharmacy	C8957	PROLONGED IV INF, REQ PUMP	YES
Pharmacy	C9016	Injection, triptorelin extended release,	YES
Pharmacy	C9024	Injection, liposomal, 1 mg daunorubicin	YES
Pharmacy	C9027	Injection, pembrolizumab, 1 mg	YES
Pharmacy	C9031	LUTETIUM LU DOTATATE, THERAPEUTIC 1 mCi	YES

Pharmacy	C9047	Caplacizumab-ydhp (Cablivi)	YES
Pharmacy	C9062	Injection, daratumumab 10 mg and hyaluro	YES
Pharmacy	C9084	Loncastuximab tesirine-lpyl (Zynlonta)	YES
Pharmacy	C9085	Avalglucosidase alfa-ngpt (Nexviazyme)	YES
Pharmacy	C9086	Anifrolumab-fnia (Saphnelo)	YES
Pharmacy	C9101	INJECTION, OLICERIDINE, 0.1 MG	YES
Pharmacy	C9146	Mirvetuximab (Elahere)	YES
Pharmacy	C9147	Tremelimumab-actl (Imjudo)	YES
Pharmacy	C9148	Teclistamab-cqyv (Tecvayli)	YES
Pharmacy	C9149	Teplizumab-mzwv (Tziel)	YES
Pharmacy	C9248	INJ, CLEVIDIPINE BUTYRATE	YES
Pharmacy	C9257	Bevacizumab, 0.25 mg intravitreal (Avastin)	YES
Pharmacy	C9285	LIDOCAINE 70 MG/TETRACAINE 70 MG, PER PATCH	YES
Pharmacy	C9293	INJ, GLUCARPIDASE, 10 UNITS	YES
BioEngineered Wound Healing	C9352	Microporous collagen implantable tube (NeuraGen Nerve Guide), per centimeter length	YES
BioEngineered Wound Healing	C9353	Microporous collagen implantable slit tube (NeuraWrap Nerve Protector), per centimeter length	YES
BioEngineered Wound Healing	C9354	Acellular pericardial tissue matrix of non-human origin (Veritas), per square centimeter	YES
BioEngineered Wound Healing	C9355	Collagen nerve cuff (NeuroMatrix), per 0.5 centimeter length	YES
BioEngineered Wound Healing	C9356	Tendon, porous matrix of cross-linked collagen and glycosaminoglycan matrix (TenoGlide Tendon Protector Sheet), per square centimeter	YES
BioEngineered Wound Healing	C9358	Dermal substitute, native, non-denatured collagen, fetal bovine origin (SurgiMend Collagen Matrix), per 0.5 square centimeters	YES
Surgical - Spine	C9359	Porous purified collagen matrix bone void filler (Integra Mozaik Osteoconductive Scaffold Putty, Integra OS Osteoconductive Scaffold Putty), per 0.5 cc	NO
BioEngineered Wound Healing	C9360	Dermal substitute, native, non-denatured collagen, neonatal bovine origin (SurgiMend Collagen Matrix), per 0.5 square centimeters	YES
BioEngineered Wound Healing	C9361	Collagen matrix nerve wrap (NeuroMend Collagen Nerve Wrap), per 0.5 centimeter length	YES
Surgical - Spine	C9362	Porous purified collagen matrix bone void filler (Integra Mozaik Osteoconductive Scaffold Strip), per 0.5 cc	NO
BioEngineered Wound Healing	C9363	Skin substitute, Integra Meshed Bilayer Wound Matrix, per square centimeter	YES
BioEngineered Wound Healing	C9364	Porcine implant, Permacol, per square centimeter	YES
Pharmacy	C9399	Avalglucosidase alfa-ngpt (Nexviazyme)	YES
Pharmacy	C9399	Fosdenopterin (Nulibry)	YES
Pharmacy	C9399	Immune globulin (Cosentyx, Cutaquig, Kevzara, Palynziq, Siliq, Taltz)	YES
Pharmacy	C9399	Ofatumumab (Kesimpta)	YES
Pharmacy	C9399	Pegcetacoplan (Empaveli)	YES
Pharmacy	C9399	Peginterferon beta 1a (Plegridy)	YES
Pharmacy	C9399	Satralizumab-mwge (Enspryng)	YES

Pharmacy	C9399	Unclassified drugs or biologicals [when specified as OrCel for epidermolysis bullosa only] or [when specified as DermaMatrix for breast reconstruction only] or [when specified as Biobrane] or [when describing a product with no specific code indicated as investigational and not medically necessary]	YES
Pharmacy	C9399	Avalglucosidase alfa-ngpt (Nexviazyme)	YES
Pharmacy	C9399	Fosdenopterin (Nulibry)	YES
Pharmacy	C9399	Immune globulin (Cosentyx, Cutaquig, Kevzara, Palynziq, Siliq, Taltz)	YES
Pharmacy	C9399	Ofatumumab (Kesimpta)	YES
Pharmacy	C9399	Pegcetacoplan (Empaveli)	YES
Pharmacy	C9399	Peginterferon beta 1a (Plegridy)	YES
Pharmacy	C9399	Satralizumab-mwge (Enspryng)	YES
Pharmacy	C9399	Unclassified drugs or biologicals [when specified as OrCel for epidermolysis bullosa only] or [when specified as DermaMatrix for breast reconstruction only] or [when specified as Biobrane] or [when describing a product with no specific code indicated as investigational and not medically necessary]	YES
Pharmacy	C9399	UNCLASSIFIED DRUGS OR BIOLOG	YES
Pharmacy	C9453	Injection, nivolumab, 1 mg	YES
Pharmacy	C9483	Injection, atezolizumab, 10 mg	YES
Pharmacy	C9487	USTEKINUMAB IV INJ, 1 MG	YES
Pharmacy	C9488	INJ, CONIVAPTAN HYDROCHLORIDE, 1 MG	YES
Pharmacy	C9489	Injection, nusinersen, 0.1 mg	YES
Procedure - Cardiac	C9600	Percutaneous transcatheter placement of drug eluting intracoronary stent(s), with coronary angioplasty when performed; single major coronary artery or branch	NO
Procedure - Cardiac	C9601	Percutaneous transcatheter placement of drug- eluting intracoronary stent(s), with coronary angioplasty when performed; each additional branch of a major coronary artery	NO
Procedure - Cardiac	C9602	Percutaneous transluminal coronary atherectomy, with drug eluting intracoronary stent, with coronary angioplasty when performed; single major coronary artery or branch	NO
Procedure - Cardiac	C9603	Percutaneous transluminal coronary atherectomy, with drug-eluting intracoronary stent, with coronary angioplasty when performed; each additional branch of a major coronary artery	NO
Procedure - Cardiac	C9604	Percutaneous transluminal revascularization of or through coronary artery bypass graft (internal mammary, free arterial, venous), any combination of drug-eluting intracoronary stent, atherectomy and angioplasty, including distal protection when performed; single vessel	NO
Procedure - Cardiac	C9605	Percutaneous transluminal revascularization of or through coronary artery bypass graft (internal mammary, free arterial, venous), any combination of drug-eluting intracoronary stent, atherectomy and angioplasty, including distal protection when performed; each additional branch subtended by the bypass graft (list separately in addition to code for primary procedure)	NO
Procedure - Cardiac	C9607	Percutaneous transluminal revascularization of chronic total occlusion, coronary artery, coronary artery branch, or coronary artery bypass graft, any combination of drug-eluting intracoronary stent, atherectomy and angioplasty	NO

Procedure - Cardiac	C9608	Percutaneous transluminal revascularization of chronic total occlusion, coronary artery, coronary artery branch, or coronary artery bypass graft, any combination of drug-eluting intracoronary stent, atherectomy and angioplasty; each additional coronary artery, coronary artery branch, or bypass graft	NO
Surgical - Maxillofacial	C9727	Insertion of implants into the soft palate; minimum of 3 implants	
Radiation	C9728	Placement of interstitial device(s) for radiation therapy/surgery guidance (e.g., fiducial markers, dosimeter), for other than the following sites (any approach): abdomen, pelvis, prostate, retroperitoneum, thorax, single or multiple	NO
Advanced Imaging	C9734	Focused ultrasound ablation/therapeutic intervention, other than uterine leiomyomata, with or without magnetic resonance (MR) guidance	YES
Endoscopy	C9740	Cystourethroscopy, with insertion of tra	NO
Endoscopy	C9745	Nasal endoscopy, surgical; balloon dilat	NO
	C9751	Bronchoscopy, rigid or flexible, transbronchial ablation of lesion(s) by microwave energy, including fluoroscopic guidance, when performed, with computed tomography acquisition(s) and 3D rendering, computer-assisted, image-guided navigation, and endobronchial ultrasound (EBUS)-guided transtracheal and/or transbronchial sampling (e.g., aspiration[s]/biopsy[ies]) and all mediastinal and/or hilar lymph node stations or structures and therapeutic interventions	NO
Procedure - Oncology			
Surgical - Spine	C9757	Laminotomy (hemilaminectomy), with decompression of nerve root(s), including partial facetectomy, foraminotomy and excision of herniated intervertebral disc, and repair of annular defect with implantation of bone anchored annular closure device, including annular defect measurement, alignment and sizing assessment, and image guidance; 1 interspace, lumbar	NO
Surgical - Genitourinary	C9769	Cystourethroscopy, with insertion of temporary prostatic implant/stent with fixation/anchor and incisional struts (Nitinol, iTind device)	NO
Transplant	C9770	Vitrectomy, mechanical, pars plana approach, with subretinal injection of pharmacologic/biologic agent (the injection procedure for Luxturna [J3398])	YES
Surgical - ENT	C9771	Nasal/sinus endoscopy, cryoablation nasal tissue(s) and/or nerve(s), unilateral or bilateral	YES
	C9784	Gastric restrictive procedure, endoscopic sleeve gastropasty, with esophagogastroduodenoscopy and intraluminal tube insertion, if performed, including all system and tissue anchoring components	NO
Bariatric Surgery			
	C9785	Gastric restrictive procedure, endoscopic sleeve gastropasty, with esophagogastroduodenoscopy and intraluminal tube insertion, if performed, including all system and tissue anchoring components	NO
Bariatric Surgery			
	C9790	Histotripsy (ie, non-thermal ablation via acoustic energy delivery) of malignant renal tissue, including image guidance	NO
Procedure - Oncology			
Durable Medical Equipment	D5932	OBTURATOR PROSTHESIS DEFINITIVE	
Surgical - Maxillofacial	D7940	Osteoplasty, for orthognathic deformities	
Surgical - Maxillofacial	D7941	Osteotomy - mandibular rami	
Surgical - Maxillofacial	D7943	Osteotomy - mandibular rami with bone graft; includes obtaining the graft	
Investigational Potential	D7944	Osteotomy-segmented or subapical	YES
Surgical - Maxillofacial	D7945	Osteotomy, body of mandible	
Surgical - Maxillofacial	D7946	LeFort I (maxilla, total)	
Surgical - Maxillofacial	D7947	LeFort I (maxilla, segmented)	

Surgical - Maxillofacial	D7948	LeFort II or LeFort III (osteoplasty of facial bones for midface hypoplasia or retrusion), without bone graft	
Surgical - Maxillofacial	D7949	LeFort II or LeFort III, with bone graft	
Surgical - Maxillofacial	D7950	Osseous, osteoperiosteal, or cartilage graft of the mandible or maxilla, autogenous or nonautogenous, by report	YES
Surgical - Maxillofacial	D7995	Synthetic graft, mandible or facial bones, by report	YES
Surgical - Maxillofacial	D7996	Implant, mandible for augmentation purposes (excluding alveolar ridge), by report	
Durable Medical Equipment	E0181	PRESS PAD ALTERNATING W/ PUM	YES
Durable Medical Equipment	E0182	REPLACE PUMP, ALT PRESS PAD	YES
Durable Medical Equipment	E0183	POWERED PRESSURE REDUCING UNDERLAY/PAD, ALTERNATING, WITH PUMP, INC HEAVY DUTY	YES
Durable Medical Equipment	E0184	DRY PRESSURE MATTRESS	YES
Durable Medical Equipment	E0186	AIR PRESSURE MATTRESS	YES
Durable Medical Equipment	E0187	WATER PRESSURE MATTRESS	YES
Durable Medical Equipment	E0188	SYNTHETIC SHEEPSKIN PAD	YES
Durable Medical Equipment	E0189	LAMBSWOOL SHEEPSKIN PAD	YES
Durable Medical Equipment	E0190	POSITIONING CUSHION	YES
Durable Medical Equipment	E0193	POWERED AIR FLOTATION BED	YES
Durable Medical Equipment	E0194	AIR FLUIDIZED BED	YES
Durable Medical Equipment	E0196	GEL PRESSURE MATTRESS	YES
Durable Medical Equipment	E0197	AIR PRESSURE PAD, MATTRESS	YES
Durable Medical Equipment	E0198	WATER PRESSURE PAD FOR MATTR	YES
Durable Medical Equipment	E0202	PHOTOTHERAPY LIGHT W/ PHOTOM	YES
Durable Medical Equipment	E0217	Water circulating heat pad with pump [when specified as a cooling/heating combination device]	
Durable Medical Equipment	E0218	Fluid circulating cold pad with pump, any type	
Durable Medical Equipment	E0236	Pump for water circulating pad	
Durable Medical Equipment	E0250	HOSP BED FIXED HT W/ MATTRES	YES
Durable Medical Equipment	E0251	HOSP BED FIXD HT W/O MATTRES	YES
Durable Medical Equipment	E0255	HOSPITAL BED VAR HT W/ MATTR	YES

Durable Medical Equipment E0256	HOSPITAL BED VAR HT W/O MATT	YES
Durable Medical Equipment E0260	HOSP BED SEMI-ELECTR W/ MATT	YES
Durable Medical Equipment E0261	HOSP BED SEMI-ELECTR W/O MAT	YES
Durable Medical Equipment E0265	HOSP BED TOTAL ELECTR W/ MAT	YES
Durable Medical Equipment E0266	HOSP BED TOTAL ELEC W/O MATT	YES
Durable Medical Equipment E0270	HOSPITAL BED INSTITUTIONAL T	YES
Durable Medical Equipment E0277	POWERED PRES-REDU AIR MATTRS	YES
Durable Medical Equipment E0296	HOSP BED TOTAL ELECT W/ MATT	YES
Durable Medical Equipment E0297	HOSP BED TOTAL ELECT W/O MAT	YES
Durable Medical Equipment E0300	ENCLOSED PED CRIB HOSP GRADE	YES
Durable Medical Equipment E0301	HD HOSP BED, 350-600 LBS	YES
Durable Medical Equipment E0302	EX HD HOSP BED > 600 LBS	YES
Durable Medical Equipment E0303	HOSP BED HVY DTY XTRA WIDE	YES
Durable Medical Equipment E0304	HOSP BED XTRA HVY DTY X WIDE	YES
Durable Medical Equipment E0316	BED SAFETY ENCLOSURE	YES
Durable Medical Equipment E0371	NONPOWER MATTRESS OVERLAY	YES
Durable Medical Equipment E0372	POWERED AIR OVERLAY FOR MATTRESS, STAND	YES
Durable Medical Equipment E0373	NONPOWERED PRESSURE MATTRESS	YES
Durable Medical Equipment E0424	STATIONARY COMPRESSED GAS O2	NO
Durable Medical Equipment E0425	GAS SYSTEM STATIONARY COMPRE	NO
Durable Medical Equipment E0430	OXYGEN SYSTEM GAS PORTABLE	NO
Durable Medical Equipment E0431	PORTABLE GASEOUS O2	NO
Durable Medical Equipment E0433	PORTABLE LIQUID OXYGEN SYS	NO
Durable Medical Equipment E0434	PORTABLE LIQUID O2	NO
Durable Medical Equipment E0435	OXYGEN SYSTEM LIQUID PORTABLE	NO

Durable Medical Equipment	E0439	STATIONARY LIQUID O2	NO
Durable Medical Equipment	E0440	OXYGEN SYSTEM LIQUID STATION	NO
Durable Medical Equipment	E0441	STATIONARY O2 CONTENTS, GAS	NO
Durable Medical Equipment	E0442	STATIONARY O2 CONTENTS, LIQ	NO
Durable Medical Equipment	E0443	PORTABLE O2 CONTENTS, GAS	NO
Durable Medical Equipment	E0444	PORTABLE O2 CONTENTS, LIQUID	NO
Hyperbaric Treatment	E0446	Topical oxygen delivery system, not otherwise specified, includes all supplies and accessories	NO
Durable Medical Equipment	E0447	PORTABLE OXYGEN, LIQUID, OVER 4 LPM, MONTH	NO
Durable Medical Equipment	E0455	OXYGEN TENT EXCL CROUP/PED T	YES
Durable Medical Equipment	E0457	CHEST SHELL	YES
Durable Medical Equipment	E0459	CHEST WRAP	YES
Durable Medical Equipment	E0462	ROCKING BED W/ OR W/O SIDE R	YES
Durable Medical Equipment	E0465	HOME VENTILATOR, ANY TYPE, USED WITH INVASIVE INTERFACE	YES
Durable Medical Equipment	E0466	HOME VENTILATOR, ANY TYPE, USED WITH NON-INVASIVE INTERFACE	YES
Durable Medical Equipment	E0467	HOME VENTILATOR MULTI-FUNCTION RESPIRATORY DEVICE	YES
Durable Medical Equipment	E0470	Respiratory assist device, bi-level pressure capability, without back-up rate feature, used with noninvasive interface, e.g., nasal or facial mask (intermittent assist device with continuous positive airway pressure device)	yes
Durable Medical Equipment	E0471	Respiratory assist device, bi-level pressure capability, with back-up rate feature, used with noninvasive interface, e.g., nasal or facial mask (intermittent assist device with continuous positive airway pressure device)	YES
Durable Medical Equipment	E0472	RAD W BACKUP INVASIVE INTRFC	YES
Durable Medical Equipment	E0480	PERCUSSOR ELECT/PNEUM HOME M	YES
Durable Medical Equipment	E0481	Intrapulmonary percussive ventilation system and related accessories	YES
Durable Medical Equipment	E0482	COUGH STIMULATING DEVICE	YES
Durable Medical Equipment	E0483	High frequency chest wall oscillation air-pulse generator system, (includes hoses and vest), each	YES
Durable Medical Equipment	E0484	NON-ELEC OSCILLATORY PEP DVC	YES
Sleep Disorder Management	E0485	Oral device/appliance used to reduce upper airway collapsibility, adjustable or non-adjustable, prefabricated, includes fitting and adjustment	YES

Sleep Disorder Management	E0486	Oral device/appliance used to reduce upper airway collapsibility, adjustable or non-adjustable, custom fabricated, includes fitting and adjustment	YES
Investigational Potential	E0490	Power source and control electronics unit for oral device/appliance for neuromuscular electrical stimulation of the tongue muscle, controlled by hardware remote	NO
Investigational Potential	E0491	Oral device/appliance for neuromuscular electrical stimulation of the tongue muscle, used in conjunction with the power source and control electronics unit, controlled by hardware remote, 90-day supply	NO
Investigational Potential	E0492	Power source and control electronics unit for oral device/appliance for neuromuscular electrical stimulation of the tongue muscle, controlled by phone application	NO
Investigational Potential	E0493	Oral device/appliance for neuromuscular electrical stimulation of the tongue muscle, used in conjunction with the power source and control electronics unit, controlled by phone application, 90-day supply	NO
Durable Medical Equipment	E0500	IPPB ALL TYPES	YES
Investigational Potential	E0530	Electronic positional obstructive sleep apnea treatment, with sensor, includes all components and accessories, any type	YES
Sleep Disorder Management	E0561	Humidifier, non-heated, used with positive airway pressure device	YES
Sleep Disorder Management	E0562	Humidifier, heated, used with positive airway pressure device	YES
Durable Medical Equipment	E0565	COMPRESSOR AIR POWER SOURCE	YES
Durable Medical Equipment	E0572	AEROSOL COMPRESSOR ADJUST PR	YES
Durable Medical Equipment	E0574	ULTRASONIC GENERATOR W SVNEB	YES
Durable Medical Equipment	E0575	NEBULIZER ULTRASONIC	YES
Durable Medical Equipment	E0580	NEBULIZER FOR USE W/ REGULAT	YES
Durable Medical Equipment	E0585	NEBULIZER W/ COMPRESSOR & HE	YES
Durable Medical Equipment	E0600	SUCTION PUMP PORTAB HOM MODL	YES
Durable Medical Equipment	E0601	Continuous airway pressure (CPAP) device [may be used for either CPAP or APAP]	YES
Durable Medical Equipment	E0604	HOSP GRADE ELEC BREAST PUMP	YES
Durable Medical Equipment	E0610	PACEMAKER MONITR AUDIBLE/VIS	YES
Durable Medical Equipment	E0615	PACEMAKER MONITR DIGITAL/VIS	YES
Cardiac - Monitor	E0616	Implantable cardiac event recorder with memory, activator and programmer	NO
Durable Medical Equipment	E0617	External defibrillator with integrated electrocardiogram analysis	YES

Durable Medical Equipment E0618	APNEA MONITOR	YES
Durable Medical Equipment E0619	APNEA MONITOR W RECORDER	YES
Durable Medical Equipment E0621	PATIENT LIFT SLING OR SEAT	YES
Durable Medical Equipment E0629	SEAT LIFT FOR PT FURN-NON-EL	YES
Durable Medical Equipment E0630	PATIENT LIFT HYDRAULIC	YES
Durable Medical Equipment E0635	PATIENT LIFT ELECTRIC	YES
Durable Medical Equipment E0636	PT SUPPORT & POSITIONING SYS	YES
Durable Medical Equipment E0637	Combination sit to stand frame/table system, any size including pediatric, with seat lift feature, with or without wheels [when specified as standing system]	YES
Durable Medical Equipment E0638	Standing frame/table system, one position (e.g., upright, supine, or prone stander), any size including pediatric, with or without wheels	YES
Durable Medical Equipment E0639	MOVEABLE PATIENT LIFT SYSTEM	YES
Durable Medical Equipment E0640	FIXED PATIENT LIFT SYSTEM	YES
Durable Medical Equipment E0641	Standing frame/table system, multi-position (e.g., 3- way stander), any size including pediatric, with or without wheels	YES
Durable Medical Equipment E0642	Standing frame/table system, multi-position (e.g. three-way stander), any size including pediatric, with or without wheels	YES
Durable Medical Equipment E0650	Pneumatic compressor, non-segmental home model	YES
Durable Medical Equipment E0651	Pneumatic compressor, segmental home model without calibrated gradient pressure	YES
Durable Medical Equipment E0652	Pneumatic compressor, segmental home model with calibrated gradient pressure	YES
Durable Medical Equipment E0655	Non-segmental pneumatic appliance for use with pneumatic compressor, half arm	YES
Durable Medical Equipment E0656	SEGMENTAL PNEUMATIC TRUNK	YES
Durable Medical Equipment E0657	SEGMENTAL PNEUMATIC CHEST	YES
Durable Medical Equipment E0660	Non-segmental pneumatic appliance for use with pneumatic compressor, full leg	YES
Durable Medical Equipment E0665	Non-segmental pneumatic appliance for use with pneumatic compressor, full arm	YES
Durable Medical Equipment E0666	Non-segmental pneumatic appliance for use with pneumatic compressor, half leg	YES
Durable Medical Equipment E0667	Segmental pneumatic appliance for use with pneumatic compressor, full leg	YES
Durable Medical Equipment E0668	Segmental pneumatic appliance for use with pneumatic compressor, full arm	YES

Durable Medical Equipment	E0669	Segmental pneumatic appliance for use with pneumatic compressor, half leg	YES
Durable Medical Equipment	E0670	Segmental pneumatic appliance for use with pneumatic compressor, integrated, 2 full legs and trunk	YES
Durable Medical Equipment	E0671	Segmental gradient pressure pneumatic appliance, full leg	YES
Durable Medical Equipment	E0672	Segmental gradient pressure pneumatic appliance, full arm	YES
Durable Medical Equipment	E0673	Segmental gradient pressure pneumatic appliance, half leg	YES
Durable Medical Equipment	E0675	PNEUMATIC COMPRESSION DEVICE	YES
Durable Medical Equipment	E0676	Intermittent limb compression device (includes all accessories), not otherwise specified	YES
Durable Medical Equipment	E0691	UVL PNL 2 SQ FT OR LESS	YES
Durable Medical Equipment	E0692	UVL SYS PANEL 4 FT	YES
Durable Medical Equipment	E0693	UVL SYS PANEL 6 FT	YES
Durable Medical Equipment	E0694	ULTRAVIOLET MULTIDIRECTIONAL LIGHT THERA	YES
Neurostimulator	E0732	Cranial electrotherapy stimulation (CES) system, any type	YES
Investigational Potential	E0734	External upper limb tremor stimulator of the peripheral nerves of the wrist	YES
Procedure - Misc.	E0735	Non-invasive vagus nerve stimulator	NO
Procedure - Misc.	E0739	Rehab system with interactive interface providing active assistance in rehabilitation therapy, includes all components and accessories, motors, microprocessors, sensors. Motus Hand and the Motus Foot by Motus Nova.	NO
Procedure - Misc.	E0740	Incontinence treatment system, pelvic floor stimulator	NO
Durable Medical Equipment	E0745	Neuromuscular stimulator, electronic shock unit	YES
Biofeedback	E0746	Electromyography (EMG), biofeedback device	NO
Durable Medical Equipment	E0747	ELEC OSTEOGEN STIM NOT SPINE	YES
Surgical - Spine	E0748	Osteogenesis stimulator, electrical, non-invasive, spinal applications	YES
Bone Growth Stimulator; Osteogenesis Stimulator; Electric or US	E0749	Osteogenesis stimulator, electrical, surgically implanted	YES
Durable Medical Equipment	E0760	Osteogenesis stimulator, low intensity ultrasound, noninvasive	YES
Neurostimulator	E0761	Non-thermal pulsed high frequency radiowaves, high peak power electromagnetic energy treatment device	NO
Durable Medical Equipment	E0762	Transcutaneous electrical joint stimulation device system, includes all accessories (PES)	NO
Durable Medical Equipment	E0764	Functional neuromuscular stimulation, transcutaneous stimulation of sequential muscle groups of ambulation with computer control, used for walking by spinal cord injured, entire system, after completion of training program	YES

Durable Medical Equipment	E0765	NERVE STIMULATOR FOR TX N&V	YES
Durable Medical Equipment	E0766	Electrical stimulation device used for cancer treatment, includes all accessories, any type	YES
Neurostimulator	E0769	Electrical stimulation or electromagnetic wound treatment device, not otherwise classified	NO
Durable Medical Equipment	E0770	Functional electrical stimulator, transcutaneous stimulation of nerve and/or muscle groups, any type, complete system, not otherwise specified	yes
Durable Medical Equipment	E0776	IV POLE	YES
Durable Medical Equipment	E0779	AMB INFUSION PUMP MECHANICAL	YES
Durable Medical Equipment	E0780	MECH AMB INFUSION PUMP <8HRS	YES
Durable Medical Equipment	E0781	EXTERNAL AMBULATORY INFUS PU	YES
Implantable Infusion Pumps	E0782	Infusion pump, implantable, nonprogrammable (includes all components, e.g., pump, catheter, connectors, etc.)	YES
Implantable Infusion Pumps	E0783	Infusion pump system, implantable, programmable (includes all components, e.g., pump, catheter, connectors, etc.)	YES
Durable Medical Equipment	E0784	EXTERNAL AMBULATORY INFUSION PUMP, INSUL	YES
Durable Medical Equipment	E0785	IMPLANTABLE INTRASPINAL (EPIDURAL/INTRAT	YES
Implantable infusion pumps	E0786	Implantable programmable infusion pump, replacement (excludes implantable intraspinal catheter)	NO
Durable Medical Equipment	E0787	EXT AMB INF PUMP, INSULIN, W/CONT GLUCOSE SENSING	YES
Durable Medical Equipment	E0791	PARENTERAL INFUSION PUMP STA	YES
Durable Medical Equipment	E0830	AMBULATORY TRACTION DEVICE	YES
Durable Medical Equipment	E0911	HD TRAPEZE BAR ATTACH TO BED	YES
Durable Medical Equipment	E0930	FRACTURE FRAME FREE STANDING	YES
Durable Medical Equipment	E0946	FRACTURE FRAME DUAL W CROSS	YES
Durable Medical Equipment	E0947	FRACTURE FRAME ATTACHMNTS PE	YES
Durable Medical Equipment	E0948	FRACTURE FRAME ATTACHMNTS CE	YES
Durable Medical Equipment	E0951	LOOP HEEL	YES
Durable Medical Equipment	E0952	TOE LOOP/HOLDER, EACH	YES
Durable Medical Equipment	E0953	WHEELCHAIR ACCESSORY; LATERAL THIGH/KNEE SUPPORT, INCL FIXED MOUNTING HARDWARE, EA	YES

Durable Medical Equipment E0954	WHEELCHAIR ACCESSORY; FOOT BOX, ATTACHMENT AND MOUNTING HARDWARE, EACH FOOT	YES
Durable Medical Equipment E0955	CUSHIONED HEADREST	YES
Durable Medical Equipment E0956	W/C LATERAL TRUNK/HIP SUPPOR	YES
Durable Medical Equipment E0957	W/C MEDIAL THIGH SUPPORT	YES
Durable Medical Equipment E0958	WHLCHR ATT- CONV 1 ARM DRIVE	YES
Durable Medical Equipment E0959	AMPUTEE ADAPTER	YES
Durable Medical Equipment E0960	W/C SHOULDER HARNESS/STRAPS	YES
Durable Medical Equipment E0961	WHEELCHAIR BRAKE EXTENSION	YES
Durable Medical Equipment E0966	WHEELCHAIR HEAD REST EXTENSI	YES
Durable Medical Equipment E0967	MANUAL WC HAND RIM W PROJECT	YES
Durable Medical Equipment E0968	WHEELCHAIR COMMODE SEAT	YES
Durable Medical Equipment E0969	WHEELCHAIR NARROWING DEVICE	YES
Durable Medical Equipment E0970	WHEELCHAIR NO. 2 FOOTPLATES	YES
Durable Medical Equipment E0971	WHEELCHAIR ANTI-TIPPING DEVI	YES
Durable Medical Equipment E0973	W/CH ACCESS DET ADJ ARMREST	YES
Durable Medical Equipment E0974	W/CH ACCESS ANTI-ROLLBACK	YES
Durable Medical Equipment E0978	W/C ACC,SAF BELT PELV STRAP	YES
Durable Medical Equipment E0980	WHEELCHAIR SAFETY VEST	YES
Durable Medical Equipment E0981	SEAT UPHOLSTERY, REPLACEMENT	
Durable Medical Equipment E0982	BACK UPHOLSTERY, REPLACEMENT	
Durable Medical Equipment E0983	MANUAL WHEELCHAIR ACCESSORY, POWER ADD-O	YES
Durable Medical Equipment E0984	ADD PWR TILLER	YES
Durable Medical Equipment E0985	W/C SEAT LIFT MECHANISM	YES
Durable Medical Equipment E0986	Manual wheelchair accessory, push-rim activated	YES
Durable Medical Equipment E0988	MANUAL WHEELCHAIR ACCESSORY, LEVER-ACTIVATED, WHEEL DRIVE, PAIR	YES

Durable Medical Equipment E0990	WHEELCHAIR ELEVATING LEG RES	YES
Durable Medical Equipment E0992	WHEELCHAIR SOLID SEAT INSERT	YES
Durable Medical Equipment E0994	WHEELCHAIR ARM REST	YES
Durable Medical Equipment E0995	WHEELCHAIR CALF REST	YES
Durable Medical Equipment E1002	Wheelchair accessory, power seating system, tilt only	yes
Durable Medical Equipment E1003	Wheelchair accessory, power seating system, recline only, without shear reduction	yes
Durable Medical Equipment E1004	Wheelchair accessory, power seating system, recline only, with mechanical shear reduction	yes
Durable Medical Equipment E1005	Wheelchair accessory, power seating system, recline only, with power shear reduction	yes
Durable Medical Equipment E1006	Wheelchair accessory, power seating system, combination tilt and recline, without shear reduction	yes
Durable Medical Equipment E1007	Wheelchair accessory, power seating system, combination tilt and recline, with mechanical shear reduction	yes
Durable Medical Equipment E1008	Wheelchair accessory, power seating system, combination tilt and recline, with power shear reduction	yes
Durable Medical Equipment E1009	Wheelchair accessory, addition to power seating system, mechanically linked leg elevation system, including pushrod and legrest, each	yes
Durable Medical Equipment E1010	Wheelchair accessory, addition to power seating system, power leg elevation system, including legrest, pair	YES
Durable Medical Equipment E1011	PED WC MODIFY WIDTH ADJUSTM	YES
Durable Medical Equipment E1012	Wheelchair accessory, addition to power seating system, center mount power elevating leg rest/platform, complete system, any type, each	yes
Durable Medical Equipment E1014	RECLINING BACK ADD PED W/C	YES
Durable Medical Equipment E1015	SHOCK ABSORBER FOR MAN W/C	YES
Durable Medical Equipment E1016	SHOCK ABSORBER FOR POWER W/C	YES
Durable Medical Equipment E1017	HD SHCK ABSRBR FOR HD MAN WC	YES
Durable Medical Equipment E1018	HD SHCK ABSRBER FOR HD POWWC	YES
Durable Medical Equipment E1020	RESIDUAL LIMB SUPPORT SYSTEM	YES
Durable Medical Equipment E1028	W/C MANUAL SWINGAWAY	YES
Durable Medical Equipment E1029	W/C VENT TRAY FIXED	YES

Durable Medical Equipment E1030	W/C VENT TRAY GIMBALED	YES
Durable Medical Equipment E1035	PATIENT TRANSFER SYSTEM <300	YES
Durable Medical Equipment E1036	PATIENT TRANSFER SYSTEM >300	YES
Durable Medical Equipment E1037	TRANSPORT CHAIR, PED SIZE	YES
Durable Medical Equipment E1038	TRANSPORT CHAIR PT WT<=300LB	YES
Durable Medical Equipment E1039	TRANSPORT CHAIR PT WT >300LB	YES
Durable Medical Equipment E1050	WHELCHR FXD FULL LENGTH ARMS	YES
Durable Medical Equipment E1060	WHEELCHAIR DETACHABLE ARMS	YES
Durable Medical Equipment E1070	WHEELCHAIR DETACHABLE FOOT R	YES
Durable Medical Equipment E1083	HEMI-WHEELCHAIR FIXED ARMS	YES
Durable Medical Equipment E1084	HEMI-WHEELCHAIR DETACHABLE A	YES
Durable Medical Equipment E1085	HEMI-WHEELCHAIR FIXED ARMS	YES
Durable Medical Equipment E1086	HEMI-WHEELCHAIR DETACHABLE A	YES
Durable Medical Equipment E1087	WHEELCHAIR LIGHTWT FIXED ARM	YES
Durable Medical Equipment E1088	WHEELCHAIR LIGHTWEIGHT DET A	YES
Durable Medical Equipment E1089	WHEELCHAIR LIGHTWT FIXED ARM	YES
Durable Medical Equipment E1090	WHEELCHAIR LIGHTWEIGHT DET A	YES
Durable Medical Equipment E1092	WHEELCHAIR WIDE W/ LEG RESTS	YES
Durable Medical Equipment E1093	WHEELCHAIR WIDE W/ FOOT REST	YES
Durable Medical Equipment E1100	WHCHR S-RECL FXD ARM LEG RES	YES
Durable Medical Equipment E1110	WHEELCHAIR SEMI-RECL DETACH	YES
Durable Medical Equipment E1130	WHLCHR STAND FXD ARM FT REST	YES
Durable Medical Equipment E1140	WHEELCHAIR STANDARD DETACH A	YES
Durable Medical Equipment E1150	WHEELCHAIR STANDARD W/ LEG R	YES
Durable Medical Equipment E1160	WHEELCHAIR FIXED ARMS	YES

Durable Medical Equipment E1161	MANUAL ADULT WC W TILTINSPAC	YES
Durable Medical Equipment E1170	WHLCHR AMPU FXD ARM LEG REST	YES
Durable Medical Equipment E1171	WHEELCHAIR AMPUTEE W/O LEG R	YES
Durable Medical Equipment E1172	WHEELCHAIR AMPUTEE DETACH AR	YES
Durable Medical Equipment E1180	WHEELCHAIR AMPUTEE W/ FOOT R	YES
Durable Medical Equipment E1190	WHEELCHAIR AMPUTEE W/ LEG RE	YES
Durable Medical Equipment E1195	WHEELCHAIR AMPUTEE HEAVY DUT	YES
Durable Medical Equipment E1200	WHEELCHAIR AMPUTEE FIXED ARM	YES
Durable Medical Equipment E1220	WHLCHR SPECIAL SIZE/CONSTRC	YES
Durable Medical Equipment E1221	WHEELCHAIR SPEC SIZE W FOOT	YES
Durable Medical Equipment E1222	WHEELCHAIR SPEC SIZE W/ LEG	YES
Durable Medical Equipment E1223	WHEELCHAIR SPEC SIZE W FOOT	YES
Durable Medical Equipment E1224	WHEELCHAIR SPEC SIZE W/ LEG	YES
Durable Medical Equipment E1225	MANUAL SEMI-RECLINING BACK	YES
Durable Medical Equipment E1226	MANUAL FULLY RECLINING BACK	YES
Durable Medical Equipment E1227	WHEELCHAIR SPEC SZ SPEC HT A	YES
Durable Medical Equipment E1228	WHEELCHAIR SPEC SZ SPEC HT B	YES
Durable Medical Equipment E1229	PEDIATRIC WHEELCHAIR NOS	YES
Durable Medical Equipment E1230	Power operated vehicle (3- or 4-wheel nonhighway, specify brand name and model number)	yes
Durable Medical Equipment E1231	RIGID PED W/C TILT-IN-SPACE	YES
Durable Medical Equipment E1232	FOLDING PED WC TILT-IN-SPACE	YES
Durable Medical Equipment E1233	RIG PED WC TLTNSPC W/O SEAT	YES
Durable Medical Equipment E1234	FLD PED WC TLTNSPC W/O SEAT	YES
Durable Medical Equipment E1235	RIGID PED WC ADJUSTABLE	YES
Durable Medical Equipment E1236	FOLDING PED WC ADJUSTABLE	YES

Durable Medical Equipment E1237	RGD PED WC ADJSTABL W/O SEAT	YES
Durable Medical Equipment E1238	FLD PED WC ADJSTABL W/O SEAT	YES
Durable Medical Equipment E1239	Power wheelchair, pediatric size, not otherwise specified	yes
Durable Medical Equipment E1240	WHCHR LITWT DET ARM LEG REST	YES
Durable Medical Equipment E1250	WHEELCHAIR LIGHTWT FIXED ARM	YES
Durable Medical Equipment E1260	WHEELCHAIR LIGHTWT FOOT REST	YES
Durable Medical Equipment E1270	WHEELCHAIR LIGHTWEIGHT LEG R	YES
Durable Medical Equipment E1280	WHCHR H-DUTY DET ARM LEG RES	YES
Durable Medical Equipment E1285	WHEELCHAIR HEAVY DUTY FIXED	YES
Durable Medical Equipment E1290	WHEELCHAIR HVY DUTY DETACH A	YES
Durable Medical Equipment E1295	WHEELCHAIR HEAVY DUTY FIXED	YES
Durable Medical Equipment E1296	WHEELCHAIR SPECIAL SEAT HEIG	YES
Durable Medical Equipment E1297	WHEELCHAIR SPECIAL SEAT DEPT	YES
Durable Medical Equipment E1298	WHEELCHAIR SPEC SEAT DEPTH/W	YES
Durable Medical Equipment E1352	OXYGEN ACC FLOW REG CPBL POS INSPIRATORY PRESS	YES
Durable Medical Equipment E1390	OXYGEN CONCENTRATOR	YES
Durable Medical Equipment E1391	OXYGEN CONCENTRATOR, DUAL	YES
Durable Medical Equipment E1392	PORTABLE OXYGEN CONCENTRATOR	YES
Durable Medical Equipment E1399	Durable medical equipment, miscellaneous	yes
Durable Medical Equipment E1405	O2/WATER VAPOR ENRICH W/HEAT	YES
Durable Medical Equipment E1406	O2/WATER VAPOR ENRICH W/O HE	YES
Durable Medical Equipment E1510	KIDNEY DIALYSATE DELIVRY SYS	YES
Durable Medical Equipment E1520	HEPARIN INFUSION PUMP	YES
Durable Medical Equipment E1530	REPLACEMENT AIR BUBBLE DETEC	YES
Durable Medical Equipment E1540	REPLACEMENT PRESSURE ALARM	YES

Durable Medical Equipment E1550	BATH CONDUCTIVITY METER	YES
Durable Medical Equipment E1560	REPLACE BLOOD LEAK DETECTOR	YES
Durable Medical Equipment E1570	ADJUSTABLE CHAIR FOR ESRD PT	YES
Durable Medical Equipment E1575	TRANSDUCER PROTECT/FLD BAR	YES
Durable Medical Equipment E1580	UNIPUNCTURE CONTROL SYSTEM	YES
Durable Medical Equipment E1590	HEMODIALYSIS MACHINE	YES
Durable Medical Equipment E1592	AUTO INTERM PERITONEAL DIALY	YES
Durable Medical Equipment E1594	CYCLER DIALYSIS MACHINE	YES
Durable Medical Equipment E1600	DELI/INSTALL CHRG HEMO EQUIP	YES
Durable Medical Equipment E1610	REVERSE OSMOSIS H2O PURI SYS	YES
Durable Medical Equipment E1620	REPLACEMENT BLOOD PUMP	YES
Durable Medical Equipment E1630	RECIPROCATING PERITONEAL DIA	YES
Durable Medical Equipment E1634	PERITONEAL DIALYSIS CLAMP	YES
Durable Medical Equipment E1635	COMPACT TRAVEL HEMODIALYZER	YES
Durable Medical Equipment E1636	SORBENT CARTRIDGES PER 10	YES
Durable Medical Equipment E1637	HEMOSTATS FOR DIALYSIS, EACH	YES
Durable Medical Equipment E1699	DIALYSIS EQUIPMENT NOC	YES
Durable Medical Equipment E1800	ADJUST ELBOW EXT/FLEX DEVICE	YES
Durable Medical Equipment E1801	Static progressive stretch elbow device, extension and/or flexion, with or without range of motion adjustment, includes all components and accessories	NO
Durable Medical Equipment E1802	ADJST FOREARM PRO/SUP DEVICE	YES
Durable Medical Equipment E1805	ADJUST WRIST EXT/FLEX DEVICE	YES
Durable Medical Equipment E1806	Static progressive stretch wrist device, flexion and/or extension, with or without range of motion adjustment, includes all components and accessories	NO
Durable Medical Equipment E1810	ADJUST KNEE EXT/FLEX DEVICE	YES

Durable Medical Equipment	E1811	Static progressive stretch knee device, extension and/or flexion, with or without range of motion adjustment, includes all components and accessories	NO
Durable Medical Equipment	E1812	KNEE EXT/FLEX W ACT RES CTRL	YES
Durable Medical Equipment	E1815	ADJUST ANKLE EXT/FLEX DEVICE	YES
Durable Medical Equipment	E1816	Static progressive stretch ankle device, flexion and/or extension, with or without range of motion adjustment, includes all components and accessories	NO
Durable Medical Equipment	E1818	Static progressive stretch forearm pronation/ supination device, with or without range of motion adjustment; includes all components and accessories	NO
Durable Medical Equipment	E1820	SOFT INTERFACE MATERIAL	YES
Durable Medical Equipment	E1821	Replacement soft interface material/cuffs for bi- directional static progressive stretch device	yes
Durable Medical Equipment	E1825	ADJUST FINGER EXT/FLEX DEVC	YES
Durable Medical Equipment	E1830	ADJUST TOE EXT/FLEX DEVICE	YES
Durable Medical Equipment	E1831	Static progressive stretch toe device, extension and/or flexion, with or without range of motion adjustment, includes all components and accessories	NO
Durable Medical Equipment	E1840	ADJ SHOULDER EXT/FLEX DEVICE	YES
Durable Medical Equipment	E1841	Static progressive stretch shoulder device, with or without range of motion adjustment, includes all components and accessories	NO
Durable Medical Equipment	E1905	Virtual reality cognitive behavioral therapy device (CBT), including pre-programmed therapy software [for example, RelieVRx]	
Durable Medical Equipment	E2000	GASTRIC SUCTION PUMP HME MDL	YES
Pharmacy	E2102	ADJUNCTIVE CONT GLUCOSE MONITOR OR RECEIVER	YES
Pharmacy	E2103	NON-ADJUNCTIVE, NON-IMPLANTED CONT GLUCOSE MONITOR OR RECEIVER	YES
Durable Medical Equipment	E2120	Pulse generator system for tympanic treatment of inner ear endolymphatic fluid	NO
Durable Medical Equipment	E2201	MAN W/CH ACC SEAT W>=20<24	YES
Durable Medical Equipment	E2202	SEAT WIDTH 24-27 IN	YES
Durable Medical Equipment	E2203	FRAME DEPTH LESS THAN 22 IN	YES
Durable Medical Equipment	E2204	FRAME DEPTH 22 TO 25 IN	YES
Durable Medical Equipment	E2205	MANUAL WC ACCESSORY, HANDRIM	YES
Durable Medical Equipment	E2206	COMPLETE WHEEL LOCK ASSEMBLY	YES
Durable Medical Equipment	E2207	CRUTCH AND CANE HOLDER	YES

Durable Medical Equipment E2208	CYLINDER TANK CARRIER	YES
Durable Medical Equipment E2209	ARM TROUGH EACH	YES
Durable Medical Equipment E2210	WHEELCHAIR BEARINGS	YES
Durable Medical Equipment E2211	PNEUMATIC PROPULSION TIRE	YES
Durable Medical Equipment E2212	PNEUMATIC PROP TIRE TUBE	YES
Durable Medical Equipment E2213	PNEUMATIC PROP TIRE INSERT	YES
Durable Medical Equipment E2214	PNEUMATIC CASTER TIRE EACH	YES
Durable Medical Equipment E2215	PNEUMATIC CASTER TIRE TUBE	YES
Durable Medical Equipment E2216	FOAM FILLED PROPULSION TIRE	YES
Durable Medical Equipment E2217	FOAM FILLED CASTER TIRE EACH	YES
Durable Medical Equipment E2218	FOAM PROPULSION TIRE EACH	YES
Durable Medical Equipment E2219	FOAM CASTER TIRE ANY SIZE EA	YES
Durable Medical Equipment E2222	SOLID CASTER INTEGRATED WHL	YES
Durable Medical Equipment E2227	MANUAL WHEELCHAIR ACCESSORY, GEAR REDUCT	YES
Durable Medical Equipment E2228	MWC ACC, WHEELCHAIR BRAKE	YES
Durable Medical Equipment E2230	Manual wheelchair accessory, manual standing system	YES
Durable Medical Equipment E2231	SOLID SEAT SUPPORT BASE	YES
Durable Medical Equipment E2291	PLANAR BACK FOR PED SIZE WC	YES
Durable Medical Equipment E2292	PLANAR SEAT FOR PED SIZE WC	YES
Durable Medical Equipment E2294	CONTOUR SEAT FOR PED SIZE WC	YES
Durable Medical Equipment E2295	PED DYNAMIC SEATING FRAME	YES
Durable Medical Equipment E2300	Power wheelchair accessory, power seat elevation system	YES
Durable Medical Equipment E2301	Power wheelchair accessory, power standing system	YES
Durable Medical Equipment E2310	Power wheelchair accessory, electronic connection between wheelchair controller and one power seating system motor, including all related electronics, indicator feature, mechanical function selection switch, and fixed mounting hardware	YES

Durable Medical Equipment E2311	Power wheelchair accessory, electronic connection between wheelchair controller and 2 or more power seating system motors, including all related electronics, indicator feature, mechanical function selection switch, and fixed mounting hardware	YES
Durable Medical Equipment E2312	Power wheelchair accessory, hand or chin control interface, mini-proportional remote joystick, proportional, including fixed mounting hardware	YES
Durable Medical Equipment E2313	PWC HARNESS, EXPAND CONTROL	YES
Durable Medical Equipment E2321	Power wheelchair accessory, hand control interface, remote joystick, nonproportional, including all related electronics, mechanical stop switch, and fixed mounting hardware	YES
Durable Medical Equipment E2322	Power wheelchair accessory, hand control interface, multiple mechanical switches, nonproportional, including all related electronics, mechanical stop switch, and fixed mounting hardware	YES
Durable Medical Equipment E2323	Power wheelchair accessory, specialty joystick handle for hand control interface, prefabricated	YES
Durable Medical Equipment E2324	Power wheelchair accessory, chin cup for chin control interface	YES
Durable Medical Equipment E2325	Power wheelchair accessory, sip and puff interface, nonproportional, including all related electronics, mechanical stop switch, and manual swingaway mounting hardware	YES
Durable Medical Equipment E2326	Power wheelchair accessory, breath tube kit for sip and puff interface	YES
Durable Medical Equipment E2327	Power wheelchair accessory, head control interface, mechanical, proportional, including all related electronics, mechanical direction change switch, and fixed mounting hardware	YES
Durable Medical Equipment E2328	POWER WHEELCHAIR ACCESSORY, HEAD CONTROL	YES
Durable Medical Equipment E2329	Power wheelchair accessory, head control interface, contact switch mechanism, nonproportional, including all related electronics, mechanical stop switch, mechanical direction change switch, head array, and fixed mounting hardware	YES
Durable Medical Equipment E2330	Power wheelchair accessory, head control interface, proximity switch mechanism, nonproportional, including all related electronics, mechanical stop switch, mechanical direction change switch, head array, and fixed mounting hardware	YES
Durable Medical Equipment E2331	Power wheelchair accessory, attendant control, proportional, including all related electronics and fixed mounting hardware	YES
Durable Medical Equipment E2340	Power wheelchair accessory, nonstandard seat frame width, 20-23 in	YES
Durable Medical Equipment E2341	Power wheelchair accessory, nonstandard seat frame width, 24-27 in	YES
Durable Medical Equipment E2342	Power wheelchair accessory, nonstandard seat frame depth, 20 or 21 in	YES
Durable Medical Equipment E2343	Power wheelchair accessory, nonstandard seat frame depth, 22-25 in	YES
Durable Medical Equipment E2351	Power wheelchair accessory, electronic interface to operate speech generating device using power wheelchair control interface	
Durable Medical Equipment E2366	BATTERY CHARGER, SINGLE MODE	YES

Durable Medical Equipment	E2370	PWR WC MOTOR/GEAR BOX COMBO	YES
Durable Medical Equipment	E2373	HAND/CHIN CTRL SPEC JOYSTICK	YES
Durable Medical Equipment	E2374	HAND/CHIN CTRL STD JOYSTICK	YES
Durable Medical Equipment	E2375	NON-EXPANDABLE CONTROLLER	YES
Durable Medical Equipment	E2376	EXPANDABLE CONTROLLER, REPL	YES
Durable Medical Equipment	E2377	EXPANDABLE CONTROLLER, INITL	YES
Durable Medical Equipment	E2381	PNEUM DRIVE WHEEL TIRE	YES
Durable Medical Equipment	E2382	TUBE, PNEUM WHEEL DRIVE TIRE	YES
Durable Medical Equipment	E2383	INSERT, PNEUM WHEEL DRIVE	YES
Durable Medical Equipment	E2384	PNEUMATIC CASTER TIRE	YES
Durable Medical Equipment	E2385	TUBE, PNEUMATIC CASTER TIRE	YES
Durable Medical Equipment	E2386	FOAM FILLED DRIVE WHEEL TIRE	YES
Durable Medical Equipment	E2387	FOAM FILLED CASTER TIRE	YES
Durable Medical Equipment	E2389	FOAM CASTER TIRE	YES
Durable Medical Equipment	E2390	SOLID DRIVE WHEEL TIRE	YES
Durable Medical Equipment	E2391	SOLID CASTER TIRE	YES
Durable Medical Equipment	E2394	DRIVE WHEEL EXCLUDES TIRE	YES
Cardiac - Monitor	E2402	Negative pressure wound therapy electrical pump, stationary or portable	YES
Durable Medical Equipment	E2500	Speech generating device, digitized speech, using pre- recorded messages, less than or equal to eight minutes recording time	
Durable Medical Equipment	E2502	Speech generating device, digitized speech, using prerecorded messages, greater than 8 minutes but less than or equal to 20 minutes recording time	
Durable Medical Equipment	E2504	Speech generating device, digitized speech, using prerecorded messages, greater than 20 minutes but less than or equal to 40 minutes recording time	
Durable Medical Equipment	E2506	Speech generating device, digitized speech, using prerecorded messages, greater than 40 minutes recording time	
Durable Medical Equipment	E2508	Speech generating device, synthesized speech, requiring message formulation by spelling and access by physical contact with the device	
Durable Medical Equipment	E2510	Speech generating device, synthesized speech, permitting multiple methods of message formulation and multiple methods of device access	

Durable Medical Equipment E2511	Speech generating software program, for personal computer or personal digital assistant	
Durable Medical Equipment E2512	Accessory for speech generating device, mounting system	
Durable Medical Equipment E2599	Accessory for speech generating device, not otherwise specified	
Durable Medical Equipment E2601	GEN W/C CUSHION WIDTH < 22 IN	YES
Durable Medical Equipment E2602	GEN W/C CUSHION WIDTH >=22 IN	YES
Durable Medical Equipment E2603	SKIN PROTECT WC CUS WD <22IN	YES
Durable Medical Equipment E2604	SKIN PROTECT WC CUS WD>=22IN	YES
Durable Medical Equipment E2605	POSITION WC CUSH WIDTH <22 IN	YES
Durable Medical Equipment E2606	POSITION WC CUSH WIDTH>=22 IN	YES
Durable Medical Equipment E2607	SKIN PRO/POS WC CUS WD <22IN	YES
Durable Medical Equipment E2608	SKIN PRO/POS WC CUS WD>=22IN	YES
Durable Medical Equipment E2609	CUSTOM FABRICATE W/C CUSHION	YES
Durable Medical Equipment E2610	POWERED W/C CUSHION	YES
Durable Medical Equipment E2611	GEN USE BACK CUSH WIDTH <22IN	YES
Durable Medical Equipment E2612	GEN USE BACK CUSH WIDTH>=22IN	YES
Durable Medical Equipment E2613	POSITION BACK CUSH WD <22IN	YES
Durable Medical Equipment E2614	POSITION BACK CUSH WD>=22IN	YES
Durable Medical Equipment E2615	POS BACK POST/LAT WIDTH <22IN	YES
Durable Medical Equipment E2616	POS BACK POST/LAT WIDTH>=22IN	YES
Durable Medical Equipment E2617	CUSTOM FAB W/C BACK CUSHION	YES
Durable Medical Equipment E2619	REPLACE COVER W/C SEAT CUSH	YES
Durable Medical Equipment E2620	WC PLANAR BACK CUSH WD <22IN	YES
Durable Medical Equipment E2621	WC PLANAR BACK CUSH WD>=22IN	YES
Durable Medical Equipment E2622	ADJ SKIN PRO W/C CUS WD<22IN	YES
Durable Medical Equipment E2623	ADJ SKIN PRO WC CUS WD>=22IN	YES

Durable Medical Equipment	E2624	ADJ SKIN PRO/POS CUS<22IN	YES
Durable Medical Equipment	E2625	ADJ SKIN PRO/POS WC CUS>=22	YES
Durable Medical Equipment	E2626	WHEELCHAIR ACCESSORY, SHOULDER ELBOW, MOBILE ARM SUPPORT ATTACHED TO	YES
Durable Medical Equipment	E2627	WHEELCHAIR ACCESSORY, SHOULDER ELBOW, MOBILE ARM SUPPORT ATTACHED TO	YES
Durable Medical Equipment	E2628	WHEELCHAIR ACCESSORY, SHOULDER ELBOW, MOBILE ARM SUPPORT ATTACHED TO	YES
Durable Medical Equipment	E2629	WHEELCHAIR ACCESSORY, SHOULDER ELBOW, MOBILE ARM SUPPORT ATTACHED TO	YES
Durable Medical Equipment	E2630	WHEELCHAIR ACCESSORY, SHOULDER ELBOW, MOBILE ARM SUPPORT, MONOSUSPENSION ARM	YES
Durable Medical Equipment	E2631	WHEELCHAIR ACCESSORY, ADDITION TO MOBILE ARM SUPPORT, ELEVATING PROXIMAL ARM	YES
Durable Medical Equipment	E2632	WHEELCHAIR ACCESSORY, ADDITION TO MOBILE ARM SUPPORT, OFFSET OR LATERAL ROCKER	YES
Durable Medical Equipment	E2633	WHEELCHAIR ACCESSORY, ADDITION TO MOBILE ARM SUPPORT, SUPINATOR	YES
Durable Medical Equipment	E8000	POSTERIOR GAIT TRAINER	YES
Durable Medical Equipment	E8001	UPRIGHT GAIT TRAINER	YES
Durable Medical Equipment	E8002	ANTERIOR GAIT TRAINER	YES
Advanced Imaging	G0035	PET MYOCARDIAL PERFUSION IMAGING, (FOLLO	YES
Home Health	G0068	Professional services for the administration of anti- infective, pain management, chelation, pulmonary hypertension, inotropic, or other intravenous infusion drug or biological (excluding chemotherapy or other highly complex drug or biological) for each infusion drug administration calendar day in the individual's home, each 15 minutes	Medicare HCPCS. Must PA with CPT per plan fee schedule.
Home Health	G0069	Professional services for the administration of subcutaneous immunotherapy or other subcutaneous infusion drug or biological for each infusion drug administration calendar day in the individual's home, each 15 minutes	Medicare HCPCS. Must PA with CPT per plan fee schedule.
Home Health	G0070	Professional services for the administration of intravenous chemotherapy or other intravenous highly complex drug or biological infusion for each infusion drug administration calendar day in the individual's home, each 15 minutes	Medicare HCPCS. Must PA with CPT per plan fee schedule.
Home Health	G0088	Professional services, initial visit, for the administration of anti-infective, pain management, chelation, pulmonary hypertension, inotropic, or other intravenous infusion drug or biological (excluding chemotherapy or other highly complex drug or biological) for each infusion drug administration calendar day in the individual's home, each 15 minutes	Medicare HCPCS. Must PA with CPT per plan fee schedule.

Home Health	G0089	Professional services, initial visit, for the administration of subcutaneous immunotherapy or other subcutaneous infusion drug or biological for each infusion drug administration calendar day in the individual's home, each 15 minutes	Medicare HCPCS. Must PA with CPT per plan fee schedule.
Home Health	G0090	Professional services, initial visit, for the administration of intravenous chemotherapy or other highly complex infusion drug or biological for each infusion drug administration calendar day in the individual's home, each 15 minutes	Medicare HCPCS. Must PA with CPT per plan fee schedule.
Home Health	G0151	Services performed by a qualified physical therapist in the home health or hospice setting, each 15 minutes	Medicare HCPCS. Must PA with CPT per plan fee schedule.
Home Health	G0152	Services performed by a qualified occupational therapist in the home health or hospice setting, each 15 minutes	Medicare HCPCS. Must PA with CPT per plan fee schedule.
Home Health	G0153	Services performed by a qualified speech-language pathologist in the home health or hospice setting, each 15 minutes	Medicare HCPCS. Must PA with CPT per plan fee schedule.
Home Health	G0155	Services of clinical social worker in home health or hospice settings, each 15 minutes	Medicare HCPCS. Must PA with CPT per plan fee schedule.
Home Health	G0156	Services of home health/hospice aide in home health or hospice settings, each 15 minutes	Medicare HCPCS. Must PA with CPT per plan fee schedule.
Home Health	G0157	Services performed by a qualified physical therapist assistant in the home health or hospice setting, each 15 minutes	Medicare HCPCS. Must PA with CPT per plan fee schedule.
Home Health	G0158	Services performed by a qualified occupational therapist assistant in the home health or hospice setting, each 15 minutes	Medicare HCPCS. Must PA with CPT per plan fee schedule.
Home Health	G0159	Services performed by a qualified physical therapist, in the home health setting, in the establishment or delivery of a safe and effective physical therapy maintenance program, each 15 minutes	Medicare HCPCS. Must PA with CPT per plan fee schedule.

Home Health	G0160	Services performed by a qualified occupational therapist, in the home health setting, in the establishment or delivery of a safe and effective occupational therapy maintenance program, each 15 minutes	Medicare HCPCS. Must PA with CPT per plan fee schedule.
Home Health	G0161	Services performed by a qualified speech-language pathologist, in the home health setting, in the establishment or delivery of a safe and effective speech-language pathology maintenance program, each 15 minutes	Medicare HCPCS. Must PA with CPT per plan fee schedule.
Home Health	G0162	Skilled services by a registered nurse (RN) for management and evaluation of the plan of care; each 15 minutes (the patient's underlying condition or complication requires an RN to ensure that essential non-skilled care achieves its purpose in the home health or hospice setting)	Medicare HCPCS. Must PA with CPT per plan fee schedule.
Procedure - Misc.	G0166	External Counterpulsation, per treatment	NO
Behavioral Health	G0176	Activity therapy, such as music, dance, art or play therapies not for recreation, related to the care and treatment of patient's disabling mental health problems, per session (45 minutes or more)	
Hospice	G0182	HOSPICE CARE SUPERVISION	YES
Advanced Imaging	G0235	PET NOT OTHERWISE SPECIFIED	YES
Investigational Potential	G0255	Current perception threshold/sensory nerve conduction test (SNCT), per limb, any nerve	NO
Pain Management	G0260	Injection procedure for sacroiliac joint; provision of anesthetic, steroid and/or other therapeutic agent, with or without arthrography	NO
Surgical - Spine	G0276	Blinded procedure for lumbar stenosis, percutaneous image-guided lumbar decompression (PILD) or placebocontrol, performed in an approved coverage with evidence development (CED) clinical trial.	NO
Hyperbaric Treatment	G0277	Hyperbaric oxygen under pressure, full body chamber, per 30 minute interval	YES
Procedure - Misc.	G0281	Electrical stimulation (unattended) to one or more areas for chronic stage III and stage IV ulcers	NO
Procedure - Misc.	G0282	Electrical stimulation (unattended) to one or more areas, wound care (other than G0281)	NO
Surgical - Musculoskeletal	G0289	Arthroscopy, knee, surgical, for removal of loose body, foreign body, debridement/shaving of articular cartilage (chondroplasty) at the time of other surgical knee arthroscopy in a different compartment of the same knee	NO
Procedure - Misc.	G0295	Electromagnetic simulation	NO
Home Health	G0299	Direct skilled nursing services of a registered nurse (RN) in the home health or hospice setting, each 15 minutes	Medicare HCPCS. Must PA with CPT per plan fee schedule.
Home Health	G0300	Direct skilled nursing services of a licensed practical nurse (LPN) in the home health or hospice setting, each 15 minutes	Medicare HCPCS. Must PA with CPT per plan fee schedule.

Home Health	G0321	Home health services furnished using synchronous telemedicine rendered via telephone or other real- time interactive audio-only telecommunications system	Medicare HCPCS. Must PA with CPT per plan fee schedule.
Home Health	G0322	The collection of physiologic data digitally stored and/or transmitted by the patient to the home health agency (i.e., remote patient monitoring)	Medicare HCPCS. Must PA with CPT per plan fee schedule.
Procedure - Misc.	G0329	Electromagnetic therapy to one or more areas for chronic ulcers	YES
Home Health	G0337	HOSPICE EVALUATION PREELECTI	NO
Radiation	G0339	Robot lin-radsurg com, first	YES
Radiation	G0340	Robt lin-radsurg fractx 2-5	YES
Transplant	G0341	Percutaneous islet cell transplant, includes portal vein catheterization and infusion	YES
Transplant	G0342	Laparoscopy for islet cell transplant, includes portal vein catheterization and infusion	YES
Transplant	G0343	Laparotomy for islet cell transplant, includes portal vein catheterization and infusion	YES
Sleep Disorder Management	G0398	Home sleep study test (HST) with type II portable monitor, unattended; minimum of 7 channels: EEG, EOG, EMG, ECG/heart rate, airflow, respiratory effort and oxygen saturation	NO
Sleep Disorder Management	G0400	Home sleep study with type IV portable monitor, unattended; minimum of three channels	NO
Behavioral Health	G0410	GRP PSYCH PARTIAL HOSP 45-50	YES
Behavioral Health	G0411	INTER ACTIVE GRP PSYCH PARTI	YES
Bioengineered wound healing	G0428	Collagen meniscus implant procedure for filling meniscal defects (e.g., CMI, collagen scaffold, Menaflex)	NO
Cosmetic Potential	G0429	Dermal filler injection(s) for the treatment of facial lipodystrophy syndrome (LDS) (e.g., as a result of highly active antiretroviral therapy)	
Procedure - Cardiac	G0448	Insertion or replacement of a permanent pacing cardioverter-defibrillator system with transvenous lead(s), single or dual chamber with insertion of pacing electrode, cardiac venous system, for left ventricular pacing	NO
Genetic Testing	G0452	MOLECULAR PATHOLOGY PROCEDURE; PHYSICIAN INTERP AND REPORT	YES
Procedure - Misc.	G0453	CONTINUOUS INTRAOPERATIVE NEUROPHYSIOLOGY MONITORING, FROM OUTSIDE THE	YES
Procedure - Misc.	G0455	PREPARATION WITH INSTILLATION OF FECAL MICROBIOTA BY ANY METHOD, INCLUDING	YES
Radiation	G0458	Low dose rate (ldr) prostate brachytherapy services, composite rate	YES
Transplant	G0460	Autologous platelet rich plasma for non-diabetic chronic wounds/ulcers, including phlebotomy, centrifugation, and all other preparatory procedures, administration and dressings, per treatment	NO
Transplant	G0465	Autologous platelet rich plasma (PRP) for diabetic chronic wounds/ulcers, using an FDA-cleared device (includes administration, dressings, phlebotomy, centrifugation, and all other preparatory procedures, per treatment)	NO
Home Health	G0490	FACE-TO-FACE HOME HEALTH NURSING VISIT BY RHC OR FQHC IN HOME HEALTH AGENCY SHORTAGE AREA	YES

Home Health	G0493	Skilled services of a registered nurse (RN) for the observation and assessment of the patient's condition, each 15 minutes (the change in the patient's condition requires skilled nursing personnel to identify and evaluate the patient's need for possible modification of treatment in the home health or hospice setting)	Medicare HCPCS. Must PA with CPT per plan fee schedule.
Home Health	G0494	Skilled services of a licensed practical nurse (LPN) for the observation and assessment of the patient's condition, each 15 minutes (the change in the patient's condition requires skilled nursing personnel to identify and evaluate the patient's need for possible modification of treatment in the home health or hospice setting)	Medicare HCPCS. Must PA with CPT per plan fee schedule.
Home Health	G0495	Skilled services of a registered nurse (RN), in the training and/or education of a patient or family member, in the home health or hospice setting, each 15 minutes	Medicare HCPCS. Must PA with CPT per plan fee schedule.
Home Health	G0496	Skilled services of a licensed practical nurse (LPN), in the training and/or education of a patient or family member, in the home health or hospice setting, each 15 minutes	Medicare HCPCS. Must PA with CPT per plan fee schedule.
Home Health	G0506	Comprehensive assessment of and care planning for patients requiring chronic care management services (list separately in addition to primary monthly care management service)	NO
Home Health	G2168	Services performed by a physical therapist assistant in the home health setting in the delivery of a safe and effective physical therapy maintenance program, each 15 minutes	Medicare HCPCS. Must PA with CPT per plan fee schedule.
Home Health	G2169	Services performed by an occupational therapist assistant in the home health setting in the delivery of a safe and effective occupational therapy maintenance program, each 15 minutes	Medicare HCPCS. Must PA with CPT per plan fee schedule.
Radiation	G6001	Ultrasonic guidance for placement of radiation therapy fields	YES
Radiation	G6002	Stereoscopic x-ray guidance for localization of target volume for the delivery of radiation therapy	YES
Radiation	G6003	Radiation treatment delivery, single treatment area, single port or parallel opposed ports, simple blocks or no blocks: up to 5mev	YES
Radiation	G6004	Radiation treatment delivery, single treatment area, single port or parallel opposed ports, simple blocks or no blocks: 6-10mev	YES
Radiation	G6005	Radiation treatment delivery, single treatment area, single port or parallel opposed ports, simple blocks or no blocks: 11-19mev	YES
Radiation	G6006	Radiation treatment delivery, single treatment area, single port or parallel opposed ports, simple blocks or no blocks: 20mev or greater	YES
Radiation	G6007	Radiation treatment delivery, 2 separate treatment areas, 3 or more ports on a single treatment area, use of multiple blocks: up to 5mev	YES
Radiation	G6008	Radiation treatment delivery, 2 separate treatment areas, 3 or more ports on a single treatment area, use of multiple blocks: 6-10mev	YES
Radiation	G6009	Radiation treatment delivery, 2 separate treatment areas, 3 or more ports on a single treatment area, use of multiple blocks: 11-19mev	YES

Radiation	G6010	Radiation treatment delivery, 2 separate treatment areas, 3 or more ports on a single treatment area, use of multiple blocks: 20 mev or greater	YES
Radiation	G6011	Radiation treatment delivery, 3 or more separate treatment areas, custom blocking, tangential ports, wedges, rotational beam, compensators, electron beam; up to 5mev	YES
Radiation	G6012	Radiation treatment delivery, 3 or more separate treatment areas, custom blocking, tangential ports, wedges, rotational beam, compensators, electron beam; 6-10mev	YES
Radiation	G6013	Radiation treatment delivery, 3 or more separate treatment areas, custom blocking, tangential ports, wedges, rotational beam, compensators, electron beam; 11-19mev	YES
Radiation	G6014	Radiation treatment delivery, 3 or more separate treatment areas, custom blocking, tangential ports, wedges, rotational beam, compensators, electron beam; 20mev or greater	YES
Radiation	G6015	Intensity modulated Treatment delivery, single or multiple fields/arcs, via narrow spatially and temporally modulated beams, binary, dynamic MLC, per treatment session	YES
Radiation	G6016	Compensator-based beam modulation treatment delivery of inverse planned treatment using 3 or more high resolution (milled or cast) compensator, convergent beam modulated fields, per treatment session	YES
Radiation	G6017	Intra-fraction localization and tracking of target or patient motion during delivery of radiation therapy (e.g., 3D positional tracking, gating, 3D surface tracking), each fraction of treatment	YES
Behavioral Health	G9012	Other specified case management services not elsewhere classified	NO
Genetic Testing	G9143	Warfarin responsiveness testing by genetic technique using any method, any number of specimen(s)	YES
Home Health	G9147	Outpatient intravenous Insulin Treatment (OIVIT) either pulsatile or continuous, by any means, guided by the results of measurements for: respiratory quotient, and/or urine urea nitrogen (UUN), and/or arterial, venous or capillary glucose; and/or potassium concentration.	NO
Behavioral Health	H0004	Behavioral health counseling and therapy, per 15	NO
Behavioral Health	H0005	ALCOHOL AND/OR DRUG SERVICES	YES
Behavioral Health	H0006	Alcohol and/or drug services; case management	NO
Behavioral Health	H0008	ALCOHOL AND/OR DRUG SERVICES	YES
Behavioral Health	H0009	ALCOHOL AND/OR DRUG SERVICES	YES
Behavioral Health	H0010	ALCOHOL AND/OR DRUG SERVICES	YES
Behavioral Health	H0011	ALCOHOL AND/OR DRUG SERVICES	YES
Behavioral Health	H0012	ALCOHOL AND/OR DRUG SERVICES	YES
Behavioral Health	H0013	ALCOHOL AND/OR DRUG SERVICES	YES
Behavioral Health	H0014	ALCOHOL AND/OR DRUG SERVICES	YES
Behavioral Health	H0015	ALCOHOL AND/OR DRUG SERVICES	YES
Behavioral Health	H0016	ALCOHOL AND/OR DRUG SERVICES	YES
Behavioral Health	H0017	ALCOHOL AND/OR DRUG SERVICES	YES
Behavioral Health	H0018	ALCOHOL AND/OR DRUG SERVICES	YES
Behavioral Health	H0023	Behavioral health outreach service (planned approach to reach a targeted population)	NO

Behavioral Health	H0031	Mental health assessment by non-physician [when specified as functional assessment and treatment plan developed for Adaptive Behavioral Treatment (ABT) services by a Qualified Autism Service Provider (licensed clinician or Board Certified Behavioral Analyst (BCBA))]	YES
Behavioral Health	H0032	Mental health service plan development by non-physician [when specified as supervision of a Qualified Autism Service Professional or Paraprofessional by a Qualified Autism Service Provider]	YES
Behavioral Health	H0036	Community psychiatric supportive treatment, face-to-face, per 15 minutes	NO
Behavioral Health	H0046	Mental health services, not otherwise specified [when specified as direct ABT services by a Qualified Autism Service Professional]	NO
Home Health	H1004	FOLLOW UP HOME VISIT/PRENTAL	YES
Behavioral Health	H2012	Behavioral health day treatment, per hour [when specified as direct ABT services by a Qualified Autism Service Provider]	YES
Behavioral Health	H2014	Skills training and development, per 15 minutes [when specified as skill development, social skills group activity]	NO
Behavioral Health	H2015	Comprehensive community support services, per 15 minutes	NO
Behavioral Health	H2019	Therapeutic behavioral services, per 15 minutes [when specified as direct ABT services by a Qualified Autism Service Paraprofessional]	YES
Behavioral Health	H2020	Therapeutic behavioral services, per diem	YES
Procedure - Misc.	H2040	COORDINATED SPEC CARE, TEAM-BASED, INITIAL EPISODE PSYCHOSIS, PER MONTH	NO
Procedure - Misc.	H2041	COORDINATED SPEC CARE, TEAM-BASED, INITIAL EPISODE PSYCHOSIS, PER ENCOUNTER	NO
Pharmacy	J0122	INJ, ERAVACYCLINE, 1 MG	YES
Pharmacy		ABATACEPT INJ,10MG	Auth Required. Subcutaneous therapy goes through retail pharmacy benefit. Please contact RealRx pharmacy customer service at 855-885-7695 for retail pharmacy benefit.
	J0129		
Pharmacy	J0135	Adalimumab (Humira)	YES
Pharmacy	J0172	Aducanumab-avwa (Aduhelm)	YES
Pharmacy	J0174	Leqembi J0174 (Injection, lecanemab-irmb, 1mg)	YES
Pharmacy	J0178	Aflibercept (Eylea)	YES
Pharmacy	J0179	INJ, BROLUCIZUMAB-DBLL, 1 MG	YES
Pharmacy	J0180	AGALSIDASE BETA INJECTION	YES
Pharmacy	J0184	INJECTION, AMISULPRIDE, 1 MG	YES

Pharmacy	J0202	Alemtuzumab (Lemtrada)	YES
Pharmacy	J0205	ALGLUCERASE PER 10 UNITS INJ	YES
Pharmacy	J0207	Amifostine (Ethylol)	YES
Pharmacy	J0208	Sodium thiosulfate injection (Pedmark)	YES
Pharmacy	J0218	Olipudase alfa (Xenpozyme)	YES
Pharmacy	J0219	Avalglucosidase alfa-ngpt (Nexviazyme)	YES
Pharmacy	J0220	ALGUCOSIDASE ALFA 10MG INJ	YES
Pharmacy	J0221	Alglucosidase alfa (Lumizyme)	YES
Pharmacy	J0222	Patisiran (Onpattro)	YES
Pharmacy	J0223	Givosiran (Givlaari)	YES
Pharmacy	J0224	Lumasiran (Oxlumo)	YES
Pharmacy	J0225	Vutrisiran (Amvuttra)	YES
Pharmacy	J0248	INJ, REMDESIVIR, IMG	YES
Pharmacy	J0256	Alpha 1 proteinase inhibitor (Aralast)	YES
Pharmacy	J0257	Alpha 1 proteinase inhibitor (Glassia)	YES
Pharmacy	J0289	INJECTION, AMPHOTERICIN B LIPOSOME, 10 M	YES
Pharmacy	J0330	INJECTION, SUCCINYLCHOLINE CHLORIDE, UP	YES
Pharmacy	J0391	INJECTION, ARTESUNATE, 1 MG	YES
Pharmacy	J0401	INJECTION ARIPIRAZOLE EXTENDED RELEASE 1 MG	YES
Pharmacy	J0456	Injection, azithromycin, 500 mg	YES
Pharmacy	J0470	Injection, dimercaprol, per 100 mg [BAL in oil]	YES
Pharmacy	J0480	BASILIXIMAB	YES
Pharmacy	J0485	Belatacept (Nulojix)	YES
Pharmacy	J0490	Belimumab (Benlysta)	YES
Pharmacy	J0491	Saphnelo (anifrolumab-fnia)	YES
Pharmacy	J0515	INJECTION, BENZTROPINE MESYLATE, PER 1 M	YES
Pharmacy	J0517	Benralizumab (Fasenra)	YES
Pharmacy	J0558	Injection, penicillin G benzathine and penicillin G procaine, 100,000 units [IM]	YES
Pharmacy	J0561	Injection, penicillin G benzathine, 100,000 units [IM]	YES
Pharmacy	J0565	INJ, BEZLOTOXUMAB, 10 MG	YES
Pharmacy	J0567	INJECTION, CERLIPONASE ALFA 1 MG	YES
Pharmacy	J0570	BUPRENORPHINE IMPLANT, 74.2 MG	YES
Pharmacy	J0583	INJECTION, BIVALIRUDIN, 1 MG	YES
Pharmacy	J0584	INJECTION, BUROSUMAB-TWZA 1M	YES
Pharmacy	J0585	OnabotulinumtoxinA (Botox)	YES
Pharmacy	J0586	AbobotulinumtoxinA (Dysport)	YES
Pharmacy	J0587	RimabotulinumtoxinB (Myobloc)	YES
Pharmacy	J0588	IncobotulinumtoxinA (Xeomin)	YES
Pharmacy	J0593	INJ, LANADELUMAB-FLYO, 1 MG	YES
Pharmacy	J0596	INJ, C1 ESTERASE INHIBITOR (RECOMBINANT), RUCONEST, 10 UNITS	YES
Pharmacy	J0597	C-1 ESTERASE, BERINERT 10 UNITS INJ	YES
Pharmacy	J0598	C1 ESTERASE INHIBITOR INJ 10 UNITS	YES
Pharmacy	J0599	C1 esterase inhibitor (human) (Haegarda)	YES
Pharmacy	J0600	Injection, edetate calcium disodium up to 1,000 mg	YES
Pharmacy	J0606	INJ, ETELCALCETIDE, 0.1 MG	YES
Pharmacy	J0638	CANAKINUMAB 1 MG INJECTION	YES
Pharmacy	J0641	Levoleucovorin (Fusilev)	YES
Pharmacy	J0642	INJ, LEVOLEUCOVORIN (KHAPZORY), 0.5 MG	YES
Pharmacy	J0690	Injection, cefazolin sodium, 500 mg	YES
Pharmacy	J0691	INJECTION, LEFAMULIN, 1 MG	YES

Pharmacy	J0693	Injection, cefiderocol, 5 mg	YES
Pharmacy	J0695	INJ, CEFTOLOZANE 50 MG AND TAZOBACTAM 25 MG	YES
Pharmacy	J0696	Injection, ceftriaxone sodium, per 250 mg	YES
Pharmacy	J0698	Injection, cefotaxime sodium, per gm	YES
Pharmacy	J0699	INJ, CEFIDEROCOL, 10 MG	YES
Pharmacy	J0712	INJ, CEFTAROLINE FOSAMIL, 10 MG	YES
Pharmacy	J0714	INJ, CEFTAZIDIME AND AVIBACTAM, 0.5 G/0.125 G	YES
Pharmacy	J0716	Injection, centruiroides immune f(ab) ₂ , u	YES
Pharmacy	J0717	Certolizumab pegol (Cimzia)	YES
Pharmacy	J0741	Cabotegravir extended-release; rilpivirine extended-release injection (Cabenuva)	YES
Pharmacy	J0742	INJECTION, IMIPENEM 4 MG, CILASTATIN 4 MG AND RELEBACTAM 2 MG	YES
Pharmacy	J0743	Injection, cilastatin sodium; imipenem, per 250 mg	YES
Pharmacy	J0760	INJECTION, COLCHICINE, PER 1MG	YES
Pharmacy	J0775	Clostridial collagenase histolyticum (Xiaflex)	YES
Pharmacy	J0791	Crizanlizumab (Adakveo)	YES
Pharmacy	J0800	Repository corticotropin injection (Acthar Gel, Purified Cortrophin Gel)	YES
Pharmacy	J0850	CYTOMEGALOVIRUS IMM IV VIAL	YES
Pharmacy	J0875	Injection, dalbavancin, 5mg	YES
Pharmacy	J0881	Darbepoetin Alfa (Aranesp)	YES
Pharmacy	J0882	Darbepoetin Alfa (Aranesp)	YES
Pharmacy	J0884	Injection, argatroban, 1 mg (for esrd on	YES
Pharmacy	J0885	Injection, epoetin alfa (for non-ESRD use), 1000 units (Epoen, Procrit)	YES
Pharmacy	J0887	Epoetin beta (Mircera)	YES
Pharmacy	J0888	Epoetin beta (Mircera)	YES
Pharmacy	J0893	INJECTION, DECITABINE (SUN PHARMA), 1 MG	YES
Pharmacy	J0894	DECITABINE INJ, 1MG	YES
Pharmacy	J0895	Injection, deferoxamine mesylate, 500 mg [Desferal]	YES
Pharmacy	J0896	Luspatercept (Reblozyl)	YES
Pharmacy	J0897	Denosumab (Prolia, Xgeva)	YES
Pharmacy	J1120	INJECTION, ACETAZOLAMIDE SODIUM, UP TO 5	YES
Pharmacy	J1267	Injection, doripenem, 10 mg	YES
Pharmacy	J1290	Ecallantide (Kalbitor)	YES
Pharmacy	J1301	Edaravone (Radicava)	YES
Pharmacy	J1302	Sutimlimab-jome (Enjaymo)	YES
Pharmacy	J1303	Ravulizumab-cwvz (Ultomiris)	YES
Pharmacy	J1305	Evinacumab (Evkeeza)	YES
Pharmacy	J1306	Inclisiran (Leqvio)	YES
Pharmacy	J1322	Elosulfase Alfa (Vimizim)	YES
Pharmacy	J1324	ENFUVRTIDE INJ, 1MG	YES
Pharmacy	J1325	Epoprostenol (Flolan)	YES
Pharmacy	J1335	Injection, ertapenem sodium, 500 mg	YES
Pharmacy	J1410	INJECTION, ESTROGEN CONJUGATED, PER 25	YES
Pharmacy	J1411	Etranacogene dezaparvec-drlb (Hemgenix)	YES
Pharmacy	J1412	Injection, valoctocogene roxaparvec-rvox, per mL, containing nominal 2 × 10 ¹³ vector genomes (Roctavian)	YES
Pharmacy	J1413	Injection, delandistrogene moxeparvec-rokl, per therapeutic dose (ELEVIDYS)	YES
Pharmacy	J1426	Casimersen (Amondys 45)	YES
Pharmacy	J1427	Viltolarsen (Viltepso)	YES

Pharmacy	J1428	Eteplirsen (Exondys 51)	YES
Pharmacy	J1429	Golodirsen (Vyondys 53)	YES
Pharmacy	J1437	Injection, ferric derisomaltose, 10 mg (Monoferric)	YES
Pharmacy	J1438	Etanercept (Enbrel)	YES
Pharmacy	J1439	Injection, ferric carboxymaltose, 1 mg (Injectafer)	YES
Pharmacy	J1442	Filgrastim (Neupogen)	YES
Pharmacy	J1443	INJ, FERRIC PYROPHOSPHATE CITRATE SOLUTION, 0.1 MG OF IRON	YES
Pharmacy	J1447	Tbo-Filgrastim (Granix)	YES
Pharmacy	J1448	Trilaciclib (Cosela)	YES
Pharmacy	J1449	Eflapegrastim-xnst (Rolvedon)	YES
Pharmacy	J1450	Injection, fluconazole, 200 mg	YES
Pharmacy	J1454	INJ, FOSNETUPITANT 235 MG AND PALONOSETRON 0.25 MG	YES
Pharmacy	J1458	GALSULFASE INJ, IMG	YES
Pharmacy	J1459	Immune globulin, IV, non-lyophilized (Privigen)	YES
Pharmacy	J1460	Gamma globulin, IM (Gamastan S/D)	YES
Pharmacy	J1490	INJECTION, GAMMA GLOBULIN, INTRAMUSCULAR	YES
Pharmacy	J1551	Immuno globulin (Cutaquig)	YES
Pharmacy	J1554	Immune Globulin (Human) IV (Asceniv)	YES
Pharmacy	J1555	Immune Globulin (Cuvitru)	YES
Pharmacy	J1556	Immune Globulin (Bivigam)	YES
Pharmacy	J1557	Immune Globulin (Gammaplex)	YES
Pharmacy	J1558	Immune Globulin (Human)-klhw (Xembify)	YES
Pharmacy	J1559	Immune Globulin (Human) Subcutaneous (Hizentra)	YES
Pharmacy	J1560	Immune Globulin (Human) (Gamastan)	YES
Pharmacy	J1561	Immune Globulin (Human) IV or Subcutaneous (Gamunex, Gammaked)	YES
Pharmacy	J1562	IMMUNE GLOBULIN INJ 1000MG	YES
Pharmacy	J1566	Immune Globulin (Human) IV (Carimune, Gammagard SD)	YES
Pharmacy	J1568	Immune Globulin (Human) IV (Octagam)	YES
Pharmacy	J1569	Immune Globulin (Human) IV or Subcutaneous (Gammagard Liquid)	YES
Pharmacy	J1572	Immune Globulin (Human) IV (Flebogamma)	YES
Pharmacy	J1575	Immune Globulin (Human) IV (HyQvia)	YES
Pharmacy	J1576	INJECTION, IMMUNE GLOBULIN (PANZYGA), INTRAVENOUS, NON-LYOPHILIZED (E.G., LIQUID), 500 MG	YES
Pharmacy	J1595	Glatiramer acetate (Copaxone)	YES
Pharmacy	J1599	Immune Globulin (Human) IV (Panzyga)	YES
Pharmacy	J1599	IVIG NON-LYOPHILIZED 500 MG IV	YES
Pharmacy	J1602	Golimumab (Simponi Aria)	YES
Pharmacy	J1627	INJ, GRANISETRON, EXTENDED-RELEASE, 0.1 MG	YES
Pharmacy	J1628	Guselkumab (Tremfya)	YES
Pharmacy	J1632	Brexanolone (Zulresso)	YES
Pharmacy	J1640	INJ, HEMIN, 1 MG	YES
Pharmacy	J1675	Histrelin acetate (Supprelin LA, Vantas)	YES
Pharmacy	J1729	INJECTION, HYDROXYPROGESTERONE CAPROATE, NOS, 10 MG	YES
Pharmacy	J1743	Idursulfase (Elaprase)	YES
Pharmacy	J1744	Icatibant (Firazyr, Sajazir)	YES
Pharmacy	J1745	Infliximab (Remicade)	YES
Pharmacy	J1746	Ibalizumab-uiyk (Trogarzo)	YES
Pharmacy	J1747	Spesolimab-sbzo (Spevigo)	YES
Pharmacy	J1750	Injection, iron dextran, 50 mg (Infed)	YES
Pharmacy	J1751	INJECTION, IRON DEXTRAN 165, 50 MG	YES

Pharmacy	J1756	Injection, iron sucrose, 1 mg (Venofer)	YES
Pharmacy	J1786	Imiglucerase (Cerezyme)	YES
Pharmacy	J1815	Injection, insulin, per 5 units [only when provided as part of insulin potentiation therapy]	YES
Pharmacy	J1817	Insulin for administration through DME (i.e., insulin pump) per 50 units [only when provided as part of insulin potentiation therapy]	YES
Pharmacy	J1823	Inebilizumab-cdon (Uplizna)	YES
Pharmacy	J1826	Interferon beta-1a (Avonex)	YES
Pharmacy	J1830	Interferon beta-1b (Betaseron)	YES
Pharmacy	J1833	INJ, ISAVUCONAZONIUM, 1 MG	YES
Pharmacy	J1930	Lanreotide (Somatuline Depot)	YES
Pharmacy	J1931	Laronidase (Aldurazyme)	YES
Pharmacy	J1932	Lanreotide (ciplā)	YES
Pharmacy	J1943	INJ, ARIPIRAZOLE LAUROXIL, (ARISTADA INITIO), 1 MG	YES
Pharmacy	J1944	INJ, ARIPIRAZOLE LAUROXIL, (ARISTADA), 1 MG	YES
Pharmacy	J1950	Leuprolide acetate (Lupron Depot, Lupron Depot- Ped, Lupaneta Pack)	YES
Pharmacy	J1951	Leuprolide acetate (Fensolvi)	YES
Pharmacy	J1953	INJECTION, LEVETIRACETAM, 10 MG	YES
Pharmacy	J1954	Leuprolide acetate (Lutrate)	YES
Pharmacy	J1956	Injection, levofloxacin, 250 mg	YES
Pharmacy	J2062	LOXAPINE, INHALATION, 1 MG	YES
Pharmacy	J2170	Mecasermin (Increlex)	YES
Pharmacy	J2182	Mepolizumab (Nucala)	YES
Pharmacy	J2185	Injection, meropenem, 100 mg	YES
Pharmacy	J2278	Ziconotide Intrathecal Infusion (Prialt)	YES
Pharmacy	J2280	Injection, moxifloxacin, 100 mg	YES
Pharmacy	J2323	Natalizumab (Tysabri)	YES
Pharmacy	J2326	Nusinersen (Spinraza)	YES
Pharmacy	J2327	Risankizumab-rzaa (Skyrizi)	YES
Pharmacy	J2329	INJECTION, UBLITUXIMAB-XIIV, 1 MG	YES
Pharmacy	J2350	Ocrelizumab (Ocrevus)	YES
Pharmacy	J2353	Octreotide, depot form (Sandostatin)	YES
Pharmacy	J2354	Octreotide (Bynfezia, Sandostatin LAR)	YES
Pharmacy	J2356	Tezepelumab-ekko (Tezspire)	YES
Pharmacy	J2357	Omalizumab (Xolair)	YES
Pharmacy	J2358	INJECTION, OLANZAPINE, LONG-ACTING, 1 MG	YES
Pharmacy	J2425	PALIFERMIN INJECTION	YES
Pharmacy	J2502	INJ, PASIREOTIDE LONG ACTING, 1 MG	YES
Pharmacy	J2503	Pegaptanib (Macugen)	YES
Pharmacy	J2504	INJECTION, PEGADEMASE BOVINE, 25 IU	YES
Pharmacy	J2505	INJECTION, PEGFILGRASTIM, 6 MG	YES
Pharmacy	J2506	Pegfilgrastim (Neulasta) - excludes biosimilar	YES
Pharmacy	J2507	Pegloticase (Krystexxa)	YES
Pharmacy	J2510	Injection, penicillin G procaine, aqueous, up to 600,000 units [IM]	YES
Pharmacy	J2540	Injection, penicillin G potassium, up to 600,000 units	YES
Pharmacy	J2562	Plerixafor Injection (Mozobil)	YES
Pharmacy	J2724	PROTEIN C CONCENTRATE	YES
Pharmacy	J2777	Faricimab-svoa (Vabysmo)	YES
Pharmacy	J2778	Ranibizumab (Lucentis)	YES

Pharmacy	J2779	Injection, ranibizumab, via intravitreal implant (Susvimo), 0.1 mg	YES
Pharmacy	J2783	INJECTION, RASBURICASE, 0.5 MG	YES
Pharmacy	J2786	Reslizumab (Cinqair)	YES
Pharmacy	J2787	RIBOFLAVIN 5-PHOSPHATE, OPHTHALMIC SOLUTION, UP TO 3 ML	YES
Pharmacy	J2793	Rilonacept (Arcalyst)	YES
Pharmacy	J2796	Romiplostim (Nplate)	YES
Pharmacy	J2797	INJ, ROLAPITANT, 0.5 MG	YES
Pharmacy	J2798	INJ, RISPERIDONE, (PERSERIS), 0.5 MG	YES
Pharmacy	J2800	INJECTION, METHOCARBAMOL, UP TO 10 ML	YES
Pharmacy	J2820	Sargramostim (Leukine, Prokine)	YES
Pharmacy	J2840	Sebelipase alfa (Kanuma)	YES
Pharmacy	J2860	Siltuximab (Sylvant)	YES
Pharmacy	J2916	Injection, sodium ferric gluconate complex in sucrose injection, 12.5 mg (Ferlecit)	YES
Pharmacy	J2940	Somatrem (somatrem)	YES
Pharmacy	J2941	Somatropin (Genotropin, Humatrope, Norditropin, Nutropin, Omnitrope, Serostim, Zomacton, Zorbtive)	YES
Pharmacy	J2998	Plasminogen, human-tvmh (Ryplazim)	YES
Pharmacy	J3031	INJ, FREMANEZUMAB-VFRM, 1 MG	YES
Pharmacy	J3032	Eptinezumab (Vyepiti)	YES
Pharmacy	J3060	Taliglucerase alfa (Elelyso)	YES
Pharmacy	J3095	INJECTION, TELEVANCIN, 10 MG	YES
Pharmacy	J3110	Teriparatide (Bonsity, Forteo)	YES
Pharmacy	J3111	Romozozumab-aqqg (Evenity)	YES
Pharmacy	J3240	INJECTION, THYROTROPIN ALPHA, 0.9 MG, PR	YES
Pharmacy	J3241	Teprotumumab-trbw (Tepezza)	YES
Pharmacy	J3245	Tildrakizumab-asmn (Ilumya)	YES
Pharmacy	J3262	Tocilizumab (Actemra)	YES
Pharmacy	J3263	Inj, toripalimab-tpzi, 1 mg	YES
Pharmacy	J3285	Treprostinil (Remodulin)	YES
Pharmacy	J3299	Triamcinolone acetonide inj susp (Xipere)	YES
Pharmacy	J3304	Traiamcinolone Acetonide (Zilretta)	YES
Pharmacy	J3315	Triptorelin pamoate (Trelstar, Trelstar Depot, Trelstar LA)	YES
Pharmacy	J3316	Triptorelin extended release (Triptodur)	YES
Pharmacy	J3357	Ustekinumab (Stelara)	YES
Pharmacy	J3358	Ustekinumab (Stelara)	YES
Pharmacy	J3372	INJECTION, VANCOMYCIN HCL (XELLIA), 500 MG	YES
Pharmacy	J3380	Vedolizumab (Entyvio)	YES
Pharmacy	J3385	Velaglucerase alfa (VPRIV)	YES
Pharmacy	J3396	VERTEPORFIN INJECTION	YES
Pharmacy	J3397	Vestronidase alfa (Mepsevii)	YES
Pharmacy	J3398	Injection, voretigene neparvovec-rzyl, 1 billion vector genomes [Luxturna]	YES
Pharmacy	J3399	Injection, onasemnogene abeparvovec-xioi, per treatment, up to 5x10 ¹⁵ vector genomes [Zolgensma]	YES
Pharmacy	J3486	INJECTION, ZIPRASIDONE MESYLATE, 10 MG	YES
Pharmacy	J3489	Injection, zoledronic acid, 1 mg (Reclast)	YES
Pharmacy	J3490	Abaloparatide (Tymlos)	YES

Pharmacy	J3490	Alirocumab (Praluent)	YES
Pharmacy	J3490	Anifrolumab-fnia (Saphnelo)	YES
Pharmacy	J3490	Asfotase alpha (Strensiq)	YES
Pharmacy	J3490	Avalglucosidase alfa-ngpt (Nexviazyme)	YES
Pharmacy	J3490	Brodalumab (Siliq)	YES
Pharmacy	J3490	Dupilumab (Dupixent)	YES
Pharmacy	J3490	Evolocumab (Repatha)	YES
Pharmacy	J3490	Fosdenopterin (Nulibry)	YES
Pharmacy	J3490	Immuno globulin (Cutaquig)	YES
Pharmacy	J3490	Implantable naltrexone pellets (Naltrexone)	YES
Pharmacy	J3490	Ixekizumab (Taltz)	YES
Pharmacy	J3490	Lonapegsomatropin-tcgd (Skytrofa)	YES
Pharmacy	J3490	Ofatumumab (Kesimpta)	YES
Pharmacy	J3490	Pegcetacoplan (Empaveli)	YES
Pharmacy	J3490	Plasminogen, human-tvmh (Ryplazim)	YES
Pharmacy	J3490	Risankizumab-rzaa (Skyrizi)	YES
Pharmacy	J3490	Sarilumab (Kevzara)	YES
Pharmacy	J3490	Satralizumab-mwge (Enspryng)	YES
Pharmacy	J3490	Secukinumab (Cosentyx)	YES
Pharmacy	J3490	Setmelanotide (Imcivree)	YES
Pharmacy	J3490	Tesamorelin (Egrifta)	YES
Pharmacy	J3490	Unclassified drugs	YES
Pharmacy	J3490	Abaloparatide (Tymlos)	YES
Pharmacy	J3490	Alirocumab (Praluent)	YES
Pharmacy	J3490	Anifrolumab-fnia (Saphnelo)	YES
Pharmacy	J3490	Asfotase alpha (Strensiq)	YES
Pharmacy	J3490	Avalglucosidase alfa-ngpt (Nexviazyme)	YES
Pharmacy	J3490	Brodalumab (Siliq)	YES
Pharmacy	J3490	Dupilumab (Dupixent)	YES
Pharmacy	J3490	Evolocumab (Repatha)	YES
Pharmacy	J3490	Fosdenopterin (Nulibry)	YES
Pharmacy	J3490	Immuno globulin (Cutaquig)	YES
Pharmacy	J3490	Implantable naltrexone pellets (Naltrexone)	YES
Pharmacy	J3490	Ixekizumab (Taltz)	YES
Pharmacy	J3490	Lonapegsomatropin-tcgd (Skytrofa)	YES
Pharmacy	J3490	Ofatumumab (Kesimpta)	YES
Pharmacy	J3490	Pegcetacoplan (Empaveli)	YES
Pharmacy	J3490	Plasminogen, human-tvmh (Ryplazim)	YES
Pharmacy	J3490	Risankizumab-rzaa (Skyrizi)	YES
Pharmacy	J3490	Sarilumab (Kevzara)	YES
Pharmacy	J3490	Satralizumab-mwge (Enspryng)	YES
Pharmacy	J3490	Secukinumab (Cosentyx)	YES
Pharmacy	J3490	Setmelanotide (Imcivree)	YES
Pharmacy	J3490	Tesamorelin (Egrifta)	YES
Pharmacy	J3490	Unclassified drugs	YES
Pharmacy	J3490	UNCLASSIFIED DRUGS	YES
Pharmacy	J3520	Edetate disodium, per 150 mg	YES
Pharmacy	J3520	Edetate disodium, per 150 mg	YES
Pharmacy	J3590	Adalimumab-adaz (Hyrimoz)	YES
Pharmacy	J3590	Adalimumab-adbm (Cyltezo)	YES

Pharmacy	J3590	Adalimumab-atto (Amjevita)	YES
Pharmacy	J3590	Adalimumab-bwwd (Hadlima)	YES
Pharmacy	J3590	Adalimumab-fkjp (Hulio)	YES
Pharmacy	J3590	Alirocumab (Praluent)	YES
Pharmacy	J3590	Anakinra (Kineret)	YES
Pharmacy	J3590	Anifrolumab-fnia (Saphnelo)	YES
Pharmacy	J3590	Avalglucosidase alfa-ngpt (Nexviazyme)	YES
Pharmacy	J3590	Brodalumab (Siliq)	YES
Pharmacy	J3590	Caplacizumab-ydhp (Cablivi)	YES
Pharmacy	J3590	Dupilumab (Dupixent)	YES
Pharmacy	J3590	Eevolocumab (Repatha)	YES
Pharmacy	J3590	Etanercept-szsz (Erelzi)	YES
Pharmacy	J3590	Etanercept-ykro (Eticovo)	YES
Pharmacy	J3590	Fosdenopterin (Nulibry)	YES
Pharmacy	J3590	Golimumab (Simponi)	YES
Pharmacy	J3590	Immune globulin (Cutaquig)	YES
Pharmacy	J3590	Ixekizumab (Taltz)	YES
Pharmacy	J3590	Loncastuximab tesirine-lpyl (Zynlonta)	YES
Pharmacy	J3590	Ofatumumab (Kesimpta)	YES
Pharmacy	J3590	Pegcetacoplan (Empaveli)	YES
Pharmacy	J3590	Peginterferon beta 1a (Plegridy)	YES
Pharmacy	J3590	Pegvaliase-pqpz (Palynziq)	YES
Pharmacy	J3590	Plasminogen, human-tvmh (Ryplazim)	YES
Pharmacy	J3590	Risankizumab-rzaa (Skyrizi)	YES
Pharmacy	J3590	Sarilumab (Kevzara)	YES
Pharmacy	J3590	Satralizumab-mwge (Enspryng)	YES
Pharmacy	J3590	Secukinumab (Cosentyx)	YES
Pharmacy	J3590	Setmelanotide (Imcivree)	YES
Pharmacy	J3590	Somapacitan-beco (Sogroya)	YES
Pharmacy	J3590	Tesamorelin (Egrifta)	YES
Pharmacy	J3590	Adalimumab-adaz (Hyrimoz)	YES
Pharmacy	J3590	Adalimumab-adbm (Cyltezo)	YES
Pharmacy	J3590	Adalimumab-atto (Amjevita)	YES
Pharmacy	J3590	Adalimumab-bwwd (Hadlima)	YES
Pharmacy	J3590	Adalimumab-fkjp (Hulio)	YES
Pharmacy	J3590	Alirocumab (Praluent)	YES
Pharmacy	J3590	Anakinra (Kineret)	YES
Pharmacy	J3590	Anifrolumab-fnia (Saphnelo)	YES
Pharmacy	J3590	Avalglucosidase alfa-ngpt (Nexviazyme)	YES
Pharmacy	J3590	Brodalumab (Siliq)	YES
Pharmacy	J3590	Caplacizumab-ydhp (Cablivi)	YES
Pharmacy	J3590	Dupilumab (Dupixent)	YES
Pharmacy	J3590	Eevolocumab (Repatha)	YES
Pharmacy	J3590	Etanercept-szsz (Erelzi)	YES
Pharmacy	J3590	Etanercept-ykro (Eticovo)	YES
Pharmacy	J3590	Fosdenopterin (Nulibry)	YES
Pharmacy	J3590	Golimumab (Simponi)	YES
Pharmacy	J3590	Immune globulin (Cutaquig)	YES
Pharmacy	J3590	Ixekizumab (Taltz)	YES
Pharmacy	J3590	Loncastuximab tesirine-lpyl (Zynlonta)	YES

Pharmacy	J3590	Ofatumumab (Kesimpta)	YES
Pharmacy	J3590	Pegcetacoplan (Empaveli)	YES
Pharmacy	J3590	Peginterferon beta 1a (Plegridy)	YES
Pharmacy	J3590	Pegvaliase-pqpz (Palyzinq)	YES
Pharmacy	J3590	Plasminogen, human-tvmh (Ryplazim)	YES
Pharmacy	J3590	Risankizumab-rzaa (Skyrizi)	YES
Pharmacy	J3590	Sarilumab (Kevzara)	YES
Pharmacy	J3590	Satralizumab-mwge (Enspryng)	YES
Pharmacy	J3590	Secukinumab (Cosentyx)	YES
Pharmacy	J3590	Setmelanotide (Imcivree)	YES
Pharmacy	J3590	Somapacitan-beco (Sogroya)	YES
Pharmacy	J3590	Tesamorelin (Egrifta)	YES
Pharmacy	J3590	UNCLASSIFIED BIOLOGICS	YES
Pharmacy	J3591	DRUG OR BIOLOGICAL, ESRD ON DIALYSIS, NOC	YES
Pharmacy	J3950	(unclassified Biologics) Lyfgenia™ (lovotibeglogene autotemcel) & Casgevy™ (exagamglogene autotemcel)	YES
Pharmacy	J7170	Emicizumab-kxwh (Hemlibra)	YES
Pharmacy	J7175	Factor X (Coagadex)	YES
Pharmacy	J7177	Human fibrinogen (Fibryga)	YES
Pharmacy	J7178	Fibrinogen concentrate (RiaSTAP)	YES
Pharmacy	J7179	Von Willebrand Factor (Vonvendi)	YES
Pharmacy	J7180	Factor XIII concentrate (human) (Corifact)	YES
Pharmacy	J7181	Coagulation factor XIII A-subunit (recombinant) (Tretten)	YES
Pharmacy	J7182	Factor VIII (antihemophilic factor, recombinant) (Novoeight)	YES
Pharmacy	J7183	Antihemophilic factor VIII (Wilate)	YES
Pharmacy	J7185	Factor VIII (antihemophilic factor, recombinant) (Xyntha, Xyntha Solofuse)	YES
Pharmacy	J7186	Antihemophilic factor VIII (Alphanate)	YES
Pharmacy	J7187	Antihemophilic factor VIII (Humate-P)	YES
Pharmacy	J7188	Antihemophilic Factor VIII (Obizur)	YES
Pharmacy	J7189	Factor VIIa Recombinant (Novoseven RT)	YES
Pharmacy	J7190	(Factor VIII) human plasma-derived (Hemofil M)	YES
Pharmacy	J7190	(Factor VIII) human plasma-derived (Koate-DVI)	YES
Pharmacy	J7190	(Factor VIII) human plasma-derived (Monoclate-P)	YES
Pharmacy	J7190	(Factor VIII) human plasma-derived (Hemofil M)	YES
Pharmacy	J7190	(Factor VIII) human plasma-derived (Koate-DVI)	YES
Pharmacy	J7190	(Factor VIII) human plasma-derived (Monoclate-P)	YES
Pharmacy	J7191	Antihemophilic Factor VIII (Obizur)	YES
Pharmacy	J7192	Factor VIII (antihemophilic factor, recombinant) (Advate, Kogenate-FS, Recombinate)	YES
Pharmacy	J7193	Coagulation factor IX (human) (Mononine)	YES
Pharmacy	J7194	Factor IX Complex Human (Profilnine SD)	YES
Pharmacy	J7195	Factor IX (Ixinity)	YES
Pharmacy	J7197	ANTITHROMBIN III HUMAN PER IU	YES
Pharmacy	J7198	Anti-inhibitor coagulant complex (FEIBA)	YES
Pharmacy	J7199	HEMOPHILIA CLOTTING FACTOR NOS	YES
Pharmacy	J7200	Factor IX Recombinant (Rixubis)	YES
Pharmacy	J7201	Factor IX, Fc fusion protein (recombinant) (Alprolix)	YES
Pharmacy	J7202	Factor IX, albumin fusion protein, (recombinant) (Idelvion)	YES
Pharmacy	J7203	Factor IX, (antihemophilic factor, recombinant), glycopegylated (Rebinyng)	YES
Pharmacy	J7203	INJECTION, FACTOR IX, RECOMB GLY REBINYN, IUU	YES

Pharmacy	J7204	Factor VIII (antihemophilic factor (recombinant), glycopegylated-exei (Esperoct)	YES
Pharmacy	J7205	Factor VIII Fc fusion protein, (recombinant) (Eloctate)	YES
Pharmacy	J7207	Factor VIII, (anti-hemophilic factor, recombinant), pegylated (Adynovate)	YES
Pharmacy	J7208	Factor VIII, (antihemophilic factor, recombinant), pegylated-aucl ([Jivi)	YES
Pharmacy	J7209	Factor VIII, (antihemophilic factor, recombinant) (Nuwiq)	YES
Pharmacy	J7210	Factor VIII, (Antihemophilic Factor, recombinant) (Afstyla)	YES
Pharmacy	J7211	Factor VIII, (antihemophilic factor, recombinant) (Kovaltry)	YES
Pharmacy	J7212	Factor VIIa Recombinant (SevenFact)	YES
Pharmacy	J7213	INJECTION, COAGULATION FACTOR IX (RECOMBINANT), IXINITY, 1 IU	YES
Pharmacy	J7309	METHYL AMINOLEVULINATE, TOP 1G 16.8%	YES
Pharmacy	J7310	GANCICLOVIR 4.5MG LONG ACT IMPT	YES
Pharmacy	J7311	Fluocinolone acetonide, intravitreal implant (Retisert)	YES
Pharmacy	J7312	Dexamethasone intravitreal implant (Ozurdex)	YES
Pharmacy	J7313	Fluocinolone acetonide, intravitreal implant (Iluvien)	YES
Pharmacy	J7314	Fluocinolone acetonide (Yutiq)	YES
Pharmacy	J7315	SODIUM HYALURONATE, 20 MG, FOR INTRA ART	YES
Pharmacy	J7316	Ocriplasmin (Jetrea)	YES
Pharmacy	J7318	INJECTION, DUROLANE 1 MG	YES
Pharmacy	J7320	HYALURONAN OR DERIVATIVE, GENVISC 850, INTRA- ARTICULAR INJECTION, 1 MG	YES
Pharmacy	J7321	HYALURONAN/HYALGAN INTRA-ARTIC INJ	YES
Pharmacy	J7322	HYALURONAN OR DERIVATIVE, HYMOVIS, INTRA- ARTICULAR INJECTION, 1 MG	YES
Pharmacy	J7323	HYALURONAN/EUFLEXXA INTRA-ARTIC INJ	YES
Pharmacy	J7324	ORTHOVISC INJ PER DOSE	YES
Pharmacy	J7325	SYNVISC OR SYNVISC-ONE	YES
Pharmacy	J7326	HYALURONAN/DERIVATIVE, GEL-ONE,INTRA- ARTICULAR INJ PER DOSE	YES
Pharmacy	J7327	HYALURONAN OR DERIVATIVE, MONOVISC, FOR INTRA- ARTICULAR INJ, PER DOSE	YES
Pharmacy	J7328	HYALURONAN OR DERIVATIVE, GEL-SYN, INTRA- ARTICULAR INJECTION, 0.1 MG	YES
Pharmacy	J7329	INJECTION, TRIVISC 1 MG	YES
Pharmacy	J7330	Autologous cultured chondrocytes, implant	YES
Pharmacy	J7340	Carbidopa/levodopa enteral suspension (Duopa)	YES
Pharmacy	J7351	Bimatoprost implant (Durysta)	YES
Pharmacy	J7352	Afamelanotide (Scenesse)	YES
Pharmacy	J7401	Mometasone furoate sinus implant, 10 mic	YES
Pharmacy	J7402	Mometasone furoate sinus implant, (SINUVA), 10 micrograms	YES
Pharmacy	J7504	LYMPHOCYTE IMMUNE GLOBULIN, ANTITHYMOCYT	YES
Pharmacy	J7599	IMMUNOSUPPRESSIVE DRUG, NEC	Auth Required when billing over \$500
Pharmacy	J7639	DORNASE ALPHA, INHALATION SOLUTION, FDA-	YES
Pharmacy	J7640	FORMOTEROL, INHALATION SOLUTION, COMPOUN	YES
Pharmacy	J7677	REVEFENACIN INHALATION SOLUTION, FDA-APPROVED FINAL PRODUCT, NON-COMPOUNDED, ADMINISTERED THROUGH DME, 1 MICROGRAM	YES
Pharmacy	J7682	TOBRAMYCIN UNIT INH 300MG	YES
Pharmacy	J7685	TOBRAMYCIN INH SOL UNT DO 300M	YES
Pharmacy	J7686	Treprostinil (Tyvaso)	YES
Pharmacy	J7699	INHALATION SOLUT FOR DME NOC	YES
Pharmacy	J7799	NON INHALATION DRUGS NOC	YES

Pharmacy	J7999	Naltrexone pellet (Naltrexone)	YES
Pharmacy	J7999	COMPOUNDED DRUG, NOC	YES
Pharmacy	J8498	ANTIEMETIC RECTAL/SUPP NOS	YES
Pharmacy	J8499	ORAL PRESCRIP DRUG NON CHEMO	YES
Pharmacy	J8610	METHOTREXATE; ORAL, 2.5 MG	YES
Pharmacy	J8655	NETUPITANT 300 MG AND PALONOSETRON 0.5 MG	YES
Pharmacy	J8999	ORAL PRESCRIPTION DRUG CHEMO	YES
Pharmacy	J9000	Injection, doxorubicin HCl, 10 mg	YES
Pharmacy	J9015	Aldesleukin (Proleukin)	YES
Pharmacy	J9017	ARSENIC TRIOXIDE, IMG	YES
Pharmacy	J9019	Asparaginase (Erwinaze)	YES
Pharmacy	J9020	Injection, asparaginase, not otherwise specified, 10,000 units	YES
Pharmacy	J9021	Asparaginase erwinia chrysanthemi (recombinant)- rywn (Rylaze)	YES
Pharmacy	J9022	Atezolizumab (Tecentriq)	YES
Pharmacy	J9023	Avelumab (Bavencio)	YES
Pharmacy	J9025	Injection, azacitidine, 1 mg	YES
Pharmacy	J9027	CLOFARABINE INJECTION	YES
Pharmacy	J9029	INJECTION, NADOFARAGENE FIRADENOVEC-VNCG, PER THERAPEUTIC DOSE	YES
Pharmacy	J9032	Belinostat (Beleodaq)	YES
Pharmacy	J9033	Bendamustine (Treanda)	YES
Pharmacy	J9034	Bendamustine (Bendeka)	YES
Pharmacy	J9035	Bevacizumab (Avastin)	YES
Pharmacy	J9036	Bendamustine (Belrapzo)	YES
Pharmacy	J9037	Injection, belantamab mafodotin-blmf, 0.5 mg (Blenrep)	YES
Pharmacy	J9039	Blinatumomab (Blinicyto)	YES
Pharmacy	J9040	Injection, bleomycin sulfate, 15 units	YES
Pharmacy	J9041	Injection, bortezomib, 0.1 mg	YES
Pharmacy	J9042	Brentuximab vedotin (Adcetris)	YES
Pharmacy	J9043	Cabazitaxel (Jevtana)	YES
Pharmacy	J9045	Injection, carboplatin, 50 mg	YES
Pharmacy	J9047	Carfilzomib (Kyprolis)	YES
Pharmacy	J9050	Injection, carmustine, 100 mg	YES
Pharmacy	J9052	INJECTION, CARMUSTINE (ACCORD), 100 MG	YES
Pharmacy	J9055	Cetuximab (Erbix)	YES
Pharmacy	J9056	INJECTION, BENDAMUSTINE HCL (VIVIMUSTA), 1 MG	YES
Pharmacy	J9057	Copanlisib HCl (Aliqopa)	YES
Pharmacy	J9058	INJECTION, BENDAMUSTINE HCL (APOTEX), 1 MG	YES
Pharmacy	J9059	INJECTION, BENDAMUSTINE HCL (BAXTER), 1 MG	YES
Pharmacy	J9060	Injection, cisplatin, powder or solution, 10 mg	YES
Pharmacy	J9061	Amivantamab-y-moiw (Rybrevant)	YES
Pharmacy	J9063	INJECTION, MIRVETUXIMAB SORAVTANSINE-GYNX, 1 MG	YES
Pharmacy	J9064	INJECTION, CABAZITAXEL (SANDOZ), 1 MG	YES
Pharmacy	J9065	INJECTION, CLADRIBINE, PER 1 MG	YES
Pharmacy	J9070	Cyclophosphamide, 100 mg	YES
Pharmacy	J9098	CYTARABINE LIPOSOME, 10 MG	YES
Pharmacy	J9100	Injection, cytarabine, 100 mg	YES
Pharmacy	J9118	Calaspargase pegol-mknl (Asparlas)	YES
Pharmacy	J9119	Cemiplimab-rwlc (Libtayo)	YES
Pharmacy	J9120	DACTINOMYCIN, 0.5 MG	YES
Pharmacy	J9130	Dacarbazine, 100 mg	YES

Pharmacy	J9144	Daratumumab, 10 mg and hyaluronidase-fih (Darzalex Faspro)	YES
Pharmacy	J9145	Daratumumab (Darzalex)	YES
Pharmacy	J9150	Injection, daunorubicin, 10 mg	YES
Pharmacy	J9151	DAUNORUBICIN CITRATE LIPO 10MG	YES
Pharmacy	J9153	Injection, liposomal, 1 mg daunorubicin	YES
Pharmacy	J9171	INJECTION, DOCETAXEL, 1 MG	YES
Pharmacy	J9173	Durvalumab (Imfinzi)	YES
Pharmacy	J9176	Elotuzumab (Empliciti)	YES
Pharmacy	J9177	Enfortumab vedotin-efv (Padcev)	YES
Pharmacy	J9178	Injection, epirubicin HCl, 2 mg	YES
Pharmacy	J9179	Eribulin mesylate (Halaven)	YES
Pharmacy	J9181	Injection, etoposide, 10 mg	YES
Pharmacy	J9200	FLOXURIDINE 500MG	YES
Pharmacy	J9201	Injection, gemcitabine HCl, not otherwise specified, 200 mg	YES
Pharmacy	J9202	Goserelin acetate (Zoladex)	YES
Pharmacy	J9203	Gemtuzumab ozogamicin (Mylotarg)	YES
Pharmacy	J9204	Injection, mogamulizumab-kpkc, 1 mg	YES
Pharmacy	J9205	Injection, irinotecan liposome, 1 mg	YES
Pharmacy	J9207	Ixabepilone (Ixempra)	YES
Pharmacy	J9209	Injection, mesna, 200 mg	YES
Pharmacy	J9210	Emapalumab-lzsg (Gamifant)	YES
Pharmacy	J9211	IDARUBICIN HCL 5MG	YES
Pharmacy	J9212	Injection, interferon alfacon-1, recombinant, 1 mcg	YES
Pharmacy	J9213	Injection, interferon, alfa-2a, recombinant, 3 million units	YES
Pharmacy	J9214	Injection, interferon, alfa-2b, recombinant, 1 million units	YES
Pharmacy	J9215	Injection, interferon, alfa-N3, (human leukocyte derived), 250,000 IU	YES
Pharmacy	J9216	Interferon Gamma-1b (Actimmune)	YES
Pharmacy	J9217	Leuprolide acetate (Eligard, Lupron Depot, Lupron Depo-Ped)	YES
Pharmacy	J9218	Leuprolide acetate (Lupron)	YES
Pharmacy	J9219	Leuprolide acetate implant, 65 mg	YES
Pharmacy	J9223	Sacituzumab govitecan-hziy, 10 mg (Zepzelca)	YES
Pharmacy	J9225	VANTAS IMPLANT	YES
Pharmacy	J9226	SUPPRELIN LA IMPLANT	YES
Pharmacy	J9227	INJECTION, ISATUXIMAB-IRFC, 10 MG	YES
Pharmacy	J9228	INJ, IPILIMUMAB, 1 MG	YES
Pharmacy	J9229	Inotuzumab Ozogamicin (Besponsa)	YES
Pharmacy	J9230	MECHLORETHAMINE HCL 10MG	YES
Pharmacy	J9245	MELPHALAN HCL 50MG INJ	YES
Pharmacy	J9246	INJECTION, MELPHALAN (EVOMELA), 1 MG	YES
Pharmacy	J9247	Melphalan flufenamide; melflufen (Pepaxto)	YES
Pharmacy	J9248	INJECTION, MELPHALAN (HEPZATO), 1 MG	YES
Pharmacy		INJECTION, PACLITAXEL PROTEIN-BOUND PARTICLES (TEVA) NOT THERAPEUTICALLY	YES
	J9258	EQUIVALENT TO J9264, 1 MG	
Pharmacy		INJECTION, PACLITAXEL PROTEIN-BOUND PARTICLES (AMERICAN REGENT) NOT	YES
	J9259	THERAPEUTICALLY EQUIVALENT TO J9264, 1 MG	
Pharmacy	J9261	NELARABINE INJ 50MG	YES
Pharmacy	J9262	Omacetaxine mepesuccinate (Synribo)	YES
Pharmacy	J9263	Injection, oxaliplatin, 0.5 mg	YES
Pharmacy	J9264	Paclitaxel protein-bound (Abraxane)	YES
Pharmacy	J9266	Asparaginase (Oncaspar)	YES

Pharmacy	J9268	PENTOSTATIN PER 10MG	YES
Pharmacy	J9269	Tagraxofusp-erzs (Elzonris)	YES
Pharmacy	J9270	Injection, plicamycin, 2.5 mg	YES
Pharmacy	J9271	Pembrolizumab (Keytruda)	YES
Pharmacy	J9272	Dostarlimab (Jemperli)	YES
Pharmacy	J9273	Tisotumab vedotin-tftv (Tivdak)	YES
Pharmacy	J9274	Tebentafusp-tebn (Kimmtrak)	YES
Pharmacy	J9280	Injection, mitomycin, 5 mg	YES
Pharmacy	J9281	Mitomycin pyelocalyceal instillation, 1 mg (Jelmyto)	YES
Pharmacy	J9285	Olaratumab (Lartruvo)	YES
Pharmacy	J9286	INJECTION, GLOFITAMAB-GXBM, 2.5 MG	YES
Pharmacy	J9293	Injection, mitoxantrone HCl, per 5 mg	YES
Pharmacy	J9294	Pemetrexed disodium (Alimta)	YES
Pharmacy	J9295	INJ, NECITUMUMAB, 1 MG	YES
Pharmacy	J9296	Pemetrexed disodium (Alimta)	YES
Pharmacy	J9297	Pemetrexed disodium (Alimta)	YES
Pharmacy	J9299	Nivolumab (Opdivo)	YES
Pharmacy	J9301	Obinutuzumab (Gazyva)	YES
Pharmacy	J9302	Ofatumumab (Arzerra)	YES
Pharmacy	J9303	Panitumumab (Vectibix)	YES
Pharmacy	J9304	Pemetrexed (Pemfexy)	YES
Pharmacy	J9305	Pemetrexed disodium (Alimta)	YES
Pharmacy	J9306	Pertuzumab (Perjeta)	YES
Pharmacy	J9307	PRALATREXATE 1 MG INJECTION	YES
Pharmacy	J9308	Ramucirumab (Cyramza)	YES
Pharmacy	J9309	Polatuzumab vedotin-piiq (Polivy)	YES
Pharmacy	J9310	RITUXIMAB, 100 MG	YES
Pharmacy	J9311	Injection, rituximab 10 mg and hyaluroni	YES
Pharmacy	J9312	Rituximab (Rituxan)	YES
Pharmacy	J9313	Moxetumomab-tdfk (Lumoxiti)	YES
Pharmacy	J9314	Pemetrexed Teva)	YES
Pharmacy	J9316	Sacituzumab govitecan-hziy, 10 mg (Phesgo)	YES
Pharmacy	J9317	Sacituzumab govitecan-hziy, 10 mg (Trodelvy)	YES
Pharmacy	J9318	Romidepsin (Istodax)	YES
Pharmacy	J9319	Romidepsin (Istodax)	YES
Pharmacy	J9320	STREPTOZOCIN 1G	YES
Pharmacy	J9321	INJECTION, EPCORITAMAB-BYSP, 0.16 MG	YES
Pharmacy	J9322	INJECTION, PEMETREXED (BLUEPOINT) NOT THERAPEUTICALLY EQUIVALENT TO J9305, 10 MG	YES
Pharmacy	J9323	INJECTION, PEMETREXED (HOSPIRA) NOT THERAPEUTICALLY EQUIVALENT TO J9305, 10 MG	YES
Pharmacy	J9324	INJECTION, PEMETREXED (PEMRYDI RTU), 10 MG	YES
Pharmacy	J9325	Talimogene laherparepvec (Imlygic)	YES
Pharmacy	J9330	TEMSIROLIMUS INJECTION	YES
Pharmacy	J9331	Sirolimus albumin bound (Fyarro)	YES
Pharmacy	J9332	Efgartigimod alfa-fcab (Vyvgart)	YES
Pharmacy	J9340	THIOTEPA 15MG	YES
Pharmacy	J9345	INJECTION, RETIFANLIMAB-DLWR, 1 MG	YES
Pharmacy	J9347	INJECTION, TREMELIMUMAB-ACTL, 1 MG	YES
Pharmacy	J9348	Naxitamab-gqgk (Danyelza)	YES

Pharmacy	J9349	Injection, tafasitamab-cxix, 2 mg (Monjuvi)	YES
Pharmacy	J9350	INJECTION, MOSUNETUZUMAB-AXGB, 1 MG	YES
Pharmacy	J9352	Injection, trabectedin, 0.1 mg	YES
Pharmacy	J9353	Margetuximab-cmkb (Margenza)	YES
Pharmacy	J9354	Ado-trastuzumab emtansine (Kadcyla)	YES
Pharmacy	J9355	TRASTUZUMAB, EXCLUDES BIOSIMILAR, 10 MG	YES
Pharmacy	J9356	Injection, trastuzumab, 10 mg and Hyalur	YES
Pharmacy	J9357	VALRUBICIN INTRAVESICAL 200MG	YES
Pharmacy	J9358	Fam-trastuzumab deruxtecan-nxki (Enhertu)	YES
Pharmacy	J9359	Loncastuximab tesirine-lpyl (Zynlonta)	YES
Pharmacy	J9360	Injection, vinblastine sulfate, 1 mg	YES
Pharmacy	J9370	VINCRIStINE SULFATE, 1 MG	YES
Pharmacy	J9371	Injection, vincristine sulfate liposome, 1 mg	YES
Pharmacy	J9380	INJECTION, TECLISTAMAB-CQYV, 0.5 MG	YES
Pharmacy	J9390	Injection, vinorelbine tartrate, 10 mg	YES
Pharmacy	J9393	Fulvestrant (Teva - not therapeutically equivalent to J9395, 25 mg)	YES
Pharmacy	J9394	Fulvestrant (Fresenius kabi - not therapeutically equivalent to J9395, 25 mg)	YES
Pharmacy	J9395	Fulvestrant (Faslodex)	YES
Pharmacy	J9400	Ziv-aflibercept (Zaltrap)	YES
Pharmacy	J9600	PORFIMER SODIUM 75 MG	YES
Pharmacy	J9999	Loncastuximab tesirine-lpyl (Zynlonta)	YES
Pharmacy	J9999	ANTINEOPLASTIC NOC DRUG	YES
Durable Medical Equipment	K0002	STND HEMI (LOW SEAT) WHLCHR	NO
Durable Medical Equipment	K0005	ULTRALIGHTWEIGHT WHEELCHAIR	NO
Durable Medical Equipment	K0008	CUSTOM MANUAL WHEELCHAIR/BASE	YES
Durable Medical Equipment	K0009	OTHER MANUAL WHEELCHAIR/BASE	YES
Durable Medical Equipment	K0010	Standard-weight frame motorized/power wheelchair	YES
Durable Medical Equipment	K0011	Standard-weight frame motorized/power wheelchair with programmable control parameters for speed adjustment, tremor dampening, acceleration control and braking	YES
Durable Medical Equipment	K0012	Lightweight portable motorized/power wheelchair	YES
Durable Medical Equipment	K0013	Custom motorized/power wheelchair base	YES
Durable Medical Equipment	K0014	Other motorized/power wheelchair base	YES
Durable Medical Equipment	K0015	DETACH NON-ADJUS HGHT ARMST	YES
Durable Medical Equipment	K0017	DETACH ADJUST ARMREST BASE	YES
Durable Medical Equipment	K0018	DETACH ADJUST ARMST UPPER	YES
Durable Medical Equipment	K0019	ARM PAD EACH	YES

Durable Medical Equipment K0020	FIXED ADJUST ARMREST PAIR	YES
Durable Medical Equipment K0037	HIGH MOUNT FLIP-UP FOOTREST	YES
Durable Medical Equipment K0038	LEG STRAP EACH	YES
Durable Medical Equipment K0039	LEG STRAP H STYLE EACH	YES
Durable Medical Equipment K0040	ADJUSTABLE ANGLE FOOTPLATE	YES
Durable Medical Equipment K0041	LARGE SIZE FOOTPLATE EACH	YES
Durable Medical Equipment K0042	STANDARD SIZE FOOTPLATE EACH	YES
Durable Medical Equipment K0043	FTRST LOWER EXTENSION TUBE	YES
Durable Medical Equipment K0044	FTRST UPPER HANGER BRACKET	YES
Durable Medical Equipment K0045	FOOTREST,COMPLETE ASSEMBLY	YES
Durable Medical Equipment K0046	ELEVAT LEGRST LOW EXTENSION	YES
Durable Medical Equipment K0047	ELEVAT LEGRST UP HANGR BRACK	YES
Durable Medical Equipment K0050	RATCHET ASSEMBLY	YES
Durable Medical Equipment K0051	CAM RELEASE ASSEM FTRST/LGRST	YES
Durable Medical Equipment K0052	SWINGAWAY DETACH FOOTREST	YES
Durable Medical Equipment K0053	ELEVATE FOOTREST ARTICULATE	YES
Durable Medical Equipment K0056	SEAT HT <17 OR >=21 LTWT WC	YES
Durable Medical Equipment K0065	SPOKE PROTECTORS	YES
Durable Medical Equipment K0069	REAR WHL COMPLETE SOLID TIRE	YES
Durable Medical Equipment K0070	REAR WHL COMPL PNEUM TIRE	YES
Durable Medical Equipment K0071	FRONT CASTR COMPL PNEUM TIRE	YES
Durable Medical Equipment K0072	FRNT CSTR CMPL SEM-PNEUM TIR	YES
Durable Medical Equipment K0073	CASTER PIN LOCK EACH	YES
Durable Medical Equipment K0077	FRONT CASTER ASSEM COMPLETE	YES
Durable Medical Equipment K0098	Drive belt for power wheelchair, replacement only	YES

Durable Medical Equipment	K0105	IV HANGER	YES
Durable Medical Equipment	K0108	W/C COMPONENT-ACCESSORY NOS	YES
Durable Medical Equipment	K0195	ELEVATING WHLCHAIR LEG RESTS	YES
Durable Medical Equipment	K0455	PUMP UNINTERRUPTED INFUSION	YES
Durable Medical Equipment	K0462	TEMPORARY REPLACEMENT EQPMNT	YES
Durable Medical Equipment	K0552	SUPPLY/EXT INF PUMP SYR TYPE	YES
Durable Medical Equipment	K0601	REPL BATT SILVER OXIDE 1.5 V	YES
Durable Medical Equipment	K0602	REPL BATT SILVER OXIDE 3 V	YES
Durable Medical Equipment	K0603	REPL BATT ALKALINE 1.5 V	YES
Durable Medical Equipment	K0604	REPL BATT LITHIUM 3.6 V	YES
Durable Medical Equipment	K0605	REPL BATT LITHIUM 4.5 V	YES
Procedure - Cardiac	K0606	Automatic external defibrillator, with integrated electrocardiogram analysis, garment type	NO
Durable Medical Equipment	K0607	REPL BATT FOR AED	YES
Durable Medical Equipment	K0669	SEAT/BACK CUS NO SADMERC VER	YES
Durable Medical Equipment	K0730	CTRL DOSE INH DRUG DELIV SYS	YES
Durable Medical Equipment	K0733	Power wheelchair accessory, 12 to 24 amp hour sealed lead acid battery, each (e.g., gel cell, absorbed glassmat)	YES
Durable Medical Equipment	K0738	PORTABLE GAS OXYGEN SYSTEM	NO
Durable Medical Equipment	K0739	REPAIR/SVC DME NON-OXYGEN EQ	YES
Durable Medical Equipment	K0740	REPAIR/SVC OXYGEN EQUIPMENT	YES
Durable Medical Equipment	K0743	SUCTION PUMP, HOME MODEL, PORTABLE, FOR USE ON WOUNDS	YES
Durable Medical Equipment	K0744	ABSORP WND DRSG FOR USE WITH SUCTION PUMP, PORT, PAD SIZE <= 16 SQ IN	YES
Durable Medical Equipment	K0745	ABSORP WND DRSG FOR USE WITH SUCTION PUMP, PORT, PAD SIZE 16-48 SQ IN	YES
Durable Medical Equipment	K0746	ABSORP WND DRSG FOR USE WITH SUCTION PUMP, PORT, PAD SIZE >48 SQ IN	YES
Durable Medical Equipment	K0800	Power operated vehicle, group 1 standard, patient weight capacity up to and including 300 pounds	YES
Durable Medical Equipment	K0801	Power operated vehicle, group 1 heavy-duty, patient weight capacity 301 to 450 pounds	YES

Durable Medical Equipment K0802	Power operated vehicle, group 1 very heavy-duty, patient weight capacity 451 to 600 pounds	YES
Durable Medical Equipment K0806	Power operated vehicle, group 2 standard, patient weight capacity up to and including 300 pounds	YES
Durable Medical Equipment K0807	Power operated vehicle, group 2 heavy-duty, patient weight capacity 301 to 450 pounds	YES
Durable Medical Equipment K0808	Power operated vehicle, group 2 very heavy-duty, patient weight capacity 451 to 600 pounds	YES
Durable Medical Equipment K0812	Power operated vehicle, not otherwise classified	YES
Durable Medical Equipment K0813	Power wheelchair, group 1 standard, portable, sling/solid seat and back, patient weight capacity up to and including 300 pounds	YES
Durable Medical Equipment K0814	Power wheelchair, group 1 standard, portable, captain's chair, patient weight capacity up to and including 300 pounds	YES
Durable Medical Equipment K0815	Power wheelchair, group 1 standard, sling/solid seat and back, patient weight capacity up to and including 300 pounds	YES
Durable Medical Equipment K0816	Power wheelchair, group 1 standard, captain's chair, patient weight capacity up to and including 300 pounds	YES
Durable Medical Equipment K0820	Power wheelchair, group 2 standard, portable, sling/solid seat/back, patient weight capacity up to and including 300 pounds	YES
Durable Medical Equipment K0821	Power wheelchair, group 2 standard, portable, captain's chair, patient weight capacity up to and including 300 pounds	YES
Durable Medical Equipment K0822	Power wheelchair, group 2 standard, sling/solid seat/back, patient weight capacity up to and including 300 pounds	YES
Durable Medical Equipment K0823	Power wheelchair, group 2 standard, captain's chair, patient weight capacity up to and including 300	YES
Durable Medical Equipment K0824	Power wheelchair, group 2 heavy-duty, sling/solid seat/back, patient weight capacity 301 to 450 pounds	YES
Durable Medical Equipment K0825	Power wheelchair, group 2 heavy-duty, captain's chair, patient weight capacity 301 to 450 pounds	YES
Durable Medical Equipment K0826	Power wheelchair, group 2 very heavy-duty, sling/solid seat/back, patient weight capacity 451 to 600 pounds	YES
Durable Medical Equipment K0827	Power wheelchair, group 2 very heavy-duty, captain's chair, patient weight capacity 451 to 600 pounds	YES
Durable Medical Equipment K0828	Power wheelchair, group 2 extra heavy-duty, sling/solid seat/back, patient weight capacity 601 pounds or more	YES
Durable Medical Equipment K0829	Power wheelchair, group 2 extra heavy-duty, captain's chair, patient weight 601 pounds or more	YES
Durable Medical Equipment K0830	Power wheelchair, group 2 standard, seat elevator, sling/solid seat/back, patient weight capacity up to and including 300 pounds	YES
Durable Medical Equipment K0831	Power wheelchair, group 2 standard, seat elevator, captain's chair, patient weight capacity up to and including 300 pounds	YES

Durable Medical Equipment K0835	Power wheelchair, group 2 standard, single power option, sling/solid seat/back, patient weight capacity up to and including 300 pounds	YES
Durable Medical Equipment K0836	Power wheelchair, group 2 standard, single power option, captain's chair, patient weight capacity up to and including 300 pounds	YES
Durable Medical Equipment K0837	Power wheelchair, group 2 heavy-duty, single power option, sling/solid seat/back, patient weight capacity 301 to 450 pounds	YES
Durable Medical Equipment K0838	Power wheelchair, group 2 heavy-duty, single power option, captain's chair, patient weight capacity 301 to 450 pounds	YES
Durable Medical Equipment K0839	Power wheelchair, group 2 very heavy-duty, single power option sling/solid seat/back, patient weight capacity 451 to 600 pounds	YES
Durable Medical Equipment K0840	Power wheelchair, group 2 extra heavy-duty, single power option, sling/solid seat/back, patient weight capacity 601 pounds or more	YES
Durable Medical Equipment K0841	Power wheelchair, group 2 standard, multiple power option, sling/solid seat/back, patient weight capacity up to and including 300 pounds	YES
Durable Medical Equipment K0842	Power wheelchair, group 2 standard, multiple power option, captain's chair, patient weight capacity up to and including 300 pounds	YES
Durable Medical Equipment K0843	Power wheelchair, group 2 heavy-duty, multiple power option, sling/solid seat/back, patient weight capacity 301 to 450 pounds	YES
Durable Medical Equipment K0848	Power wheelchair, group 3 standard, sling/solid seat/back, patient weight capacity up to and including 300 pounds	YES
Durable Medical Equipment K0849	Power wheelchair, group 3 standard, captain's chair, patient weight capacity up to and including 300 pounds	YES
Durable Medical Equipment K0850	Power wheelchair, group 3 heavy-duty, sling/solid seat/back, patient weight capacity 301 to 450 pounds	YES
Durable Medical Equipment K0851	Power wheelchair, group 3 heavy-duty, captain's chair, patient weight capacity 301 to 450 pounds	YES
Durable Medical Equipment K0852	Power wheelchair, group 3 very heavy-duty, sling/solid seat/back, patient weight capacity 451 to 600 pounds	YES
Durable Medical Equipment K0853	Power wheelchair, group 3 very heavy-duty, captain's chair, patient weight capacity 451 to 600 pounds	YES
Durable Medical Equipment K0854	Power wheelchair, group 3 extra heavy-duty, sling/solid seat/back, patient weight capacity 601 pounds or more	YES
Durable Medical Equipment K0855	Power wheelchair, group 3 extra heavy duty, captain's chair, patient weight capacity 601 pounds or more	YES
Durable Medical Equipment K0856	Power wheelchair, group 3 standard, single power option, sling/solid seat/back, patient weight capacity up to and including 300 pounds	YES
Durable Medical Equipment K0857	Power wheelchair, group 3 standard, single power option, captain's chair, patient weight capacity up to and including 300 pounds	YES

Durable Medical Equipment K0858	Power wheelchair, group 3 heavy-duty, single power option, sling/solid seat/back, patient weight 301 to 450 pounds	YES
Durable Medical Equipment K0859	Power wheelchair, group 3 heavy-duty, single power option, captain's chair, patient weight capacity 301 to 450 pounds	YES
Durable Medical Equipment K0860	Power wheelchair, group 3 very heavy-duty, single power option, sling/solid seat/back, patient weight capacity 451 to 600 pounds	YES
Durable Medical Equipment K0861	Power wheelchair, group 3 standard, multiple power option, sling/solid seat/back, patient weight capacity up to and including 300 pounds	YES
Durable Medical Equipment K0862	Power wheelchair, group 3 heavy-duty, multiple power option, sling/solid seat/back, patient weight capacity 301 to 450 pounds	YES
Durable Medical Equipment K0863	Power wheelchair, group 3 very heavy-duty, multiple power option, sling/solid seat/back, patient weight capacity 451 to 600 pounds	YES
Durable Medical Equipment K0864	Power wheelchair, group 3 extra heavy-duty, multiple power option, sling/solid seat/back, patient weight capacity 601 pounds or more	YES
Durable Medical Equipment K0868	Power wheelchair, group 4 standard, sling/solid seat/back, patient weight capacity up to and including 300 pounds	YES
Durable Medical Equipment K0869	Power wheelchair, group 4 standard, captain's chair, patient weight capacity up to and including 300 pounds	YES
Durable Medical Equipment K0870	Power wheelchair, group 4 heavy-duty, sling/solid seat/back, patient weight capacity 301 to 450 pounds	YES
Durable Medical Equipment K0871	Power wheelchair, group 4 very heavy-duty, sling/solid seat/back, patient weight capacity 451 to 600 pounds	YES
Durable Medical Equipment K0877	Power wheelchair, group 4 standard, single power option, sling/solid seat/back, patient weight capacity up to and including 300 pounds	YES
Durable Medical Equipment K0878	Power wheelchair, group 4 standard, single power option, captain's chair, patient weight capacity up to and including 300 pounds	YES
Durable Medical Equipment K0879	Power wheelchair, group 4 heavy-duty, single power option, sling/solid seat/back, patient weight capacity 301 to 450 pounds	YES
Durable Medical Equipment K0880	Power wheelchair, group 4 very heavy-duty, single power option, sling/solid seat/back, patient weight 451 to 600 pounds	YES
Durable Medical Equipment K0884	Power wheelchair, group 4 standard, multiple power option, sling/solid seat/back, patient weight capacity up to and including 300 pounds	YES
Durable Medical Equipment K0885	Power wheelchair, group 4 standard, multiple power option, captain's chair, patient weight capacity up to and including 300 pounds	YES
Durable Medical Equipment K0886	Power wheelchair, group 4 heavy-duty, multiple power option, sling/solid seat/back, patient weight capacity 301 to 450 pounds	YES
Durable Medical Equipment K0890	Power wheelchair, group 5 pediatric, single power option, sling/solid seat/back, patient weight capacity up to and including 125 pounds	YES

Durable Medical Equipment	K0891	Power wheelchair, group 5 pediatric, multiple power option, sling/solid seat/back, patient weight capacity up to and including 125 pounds	YES
Durable Medical Equipment	K0898	Power wheelchair, not otherwise classified	YES
Durable Medical Equipment	K0899	Power mobility device, not coded by DME PDAC or does not meet criteria	YES
Durable Medical Equipment	K0900	Customized durable medical equipment, other than wheelchair (Note: applies to any code for durable medical equipment when there is not a more specific document available)	YES
Durable Medical Equipment	K1001	Electronic positional obstructive sleep apnea treatment, with sensor, includes all components and accessories, any type	YES
Durable Medical Equipment	K1002	Cranial electrotherapy stimulation (CES) system, any type	YES
Durable Medical Equipment	K1004	Low frequency ultrasonic diathermy treatment device for home use, includes all components and accessories	NO
Durable Medical Equipment	K1007	Bilateral hip, knee, ankle, foot device, powered, includes pelvic component, single or double upright(s), knee joints any type, with or without ankle joints any type, includes	NO
Durable Medical Equipment	K1014	Addition, endoskeletal knee-shin system, 4 bar linkage or multiaxial, fluid swing and stance phase control	YES
Durable Medical Equipment	K1018	External upper limb tremor stimulator of the peripheral nerves of the wrist	YES
Durable Medical Equipment	K1019	Supplies and accessories for external upper limb tremor stimulator of the peripheral nerves of the wrist	YES
Surgical - Misc.	K1020	Non-invasive vagus nerve stimulator	YES
Durable Medical Equipment	K1021	Exsufflation belt, includes all supplies and accessories	YES
Durable Medical Equipment	K1022	Addition to lower extremity prosthesis, endoskeletal, knee disarticulation, above knee, hip disarticulation, positional rotation unit, any type	YES
Durable Medical Equipment	K1023	Distal transcutaneous electrical nerve stimulator, stimulates peripheral nerves of the upper arm	YES
Durable Medical Equipment	K1027	ORAL DEVICE/APPLIANCE TO REDUCE UPPER AIRWAY COLLAPSIBILITY, CUSTOM FABRICATED	YES
Durable Medical Equipment	K1028	Power source and control electronics unit for oral device/appliance for neuromuscular electrical stimulation of the tongue muscle for the reduction of snoring and obstructive sleep apnea, controlled by phone application	
Durable Medical Equipment	K1029	Oral device/appliance for neuromuscular electrical stimulation of the tongue muscle, used in conjunction with the power source and control electronics unit, controlled by phone application, 90- day supply	
Investigational Potential	K1030	External recharging system for battery (internal) for use with implanted cardiac contractility modulation generator, replacement only	YES
Investigational Potential	K1036	Supplies and accessories (e.g., transducer) for low frequency ultrasonic diathermy treatment device, per month	NO
Durable Medical Equipment	L0112	Cranial orthotics - cranial cervical orthosis, congenital torticollis type, with or without soft interface material, adjustable range of motion joint, custom fabricated	YES

Durable Medical Equipment L0113	CRANIAL CERVICAL TORTICOLLIS	YES
Durable Medical Equipment L0984	PROTECTIVE BODY SOCK EACH	YES
Durable Medical Equipment L0999	ADDITION TO SPINAL ORTHOSIS, NOT OTHERWI	YES
Durable Medical Equipment L1300	BODY JACKET MOLD TO PATIENT	YES
Durable Medical Equipment L1310	POST-OPERATIVE BODY JACKET	YES
Durable Medical Equipment L1499	Spinal orthosis, not otherwise specified [when specified as a spinal unloading device]	YES
Durable Medical Equipment L1681	HIP ORTHOSIS, BILATERAL HIP JOINTS AND THIGH CUFFS, PREFABRICATED ITEM CUSTOMIZED FOR PATIENT BY QUAL INDIVIDUAL	YES
Durable Medical Equipment L1832	KO ADJ JNT POS RIGID SUPPORT	YES
Durable Medical Equipment L1840	KO DEROT ANT CRUCIATE CUSTOM	YES
Durable Medical Equipment L1843	KO SINGLE UPRIGHT CUSTOM FIT	YES
Durable Medical Equipment L1844	KO W/ADJ JT ROT CNTRL MOLDED	YES
Durable Medical Equipment L1847	KO ADJUSTABLE W AIR CHAMBERS	YES
Durable Medical Equipment L1848	KNEE ORTHOSIS ADJUSTABLE JOINT AIR SUPP PREFAB	YES
Durable Medical Equipment L1850	KO SWEDISH TYPE	YES
Durable Medical Equipment L1852	KNEE ORTHOSIS, DOUBLE UPRIGHT, MEDIAL-LATERAL AND ROTATION CONTROL, PREFABRICATED, OFF-THE-SHELF	YES
Durable Medical Equipment L1860	KO SUPRACONDYLAR SOCKET MOLD	YES
Durable Medical Equipment L1990	ANKLE FOOT ORTHOSIS, DOUBLE UPRIGHT FREE	YES
Durable Medical Equipment L2005	KNEE ANKLE FOOT ORTHOSIS, ANY MATERIAL,	YES
Durable Medical Equipment L2006	Knee ankle foot device, any material, single or double upright, swing and/or stance phase microprocessor control with adjustability, includes all components (e.g., sensors, batteries, charger), any type activation, with or without ankle joint(s), custom fabricated	YES
Durable Medical Equipment L2360	EXTENDED STEEL SHANK	YES
Durable Medical Equipment L2570	HIP CLEVIS TYPE 2 POSIT JNT	YES
Durable Medical Equipment L2600	HIP CLEVIS/THRUST BEARING FR	YES
Durable Medical Equipment L2610	HIP CLEVIS/THRUST BEARING LO	YES
Durable Medical Equipment L2620	PELVIC CONTROL HIP HEAVY DUT	YES

Durable Medical Equipment L2622	HIP JOINT ADJUSTABLE FLEXION	YES
Durable Medical Equipment L2624	HIP ADJ FLEX EXT ABDUCT CONT	YES
Durable Medical Equipment L2627	PLASTIC MOLD RECIPRO HIP & C	YES
Durable Medical Equipment L2628	METAL FRAME RECIPRO HIP & CA	YES
Durable Medical Equipment L2630	PELVIC CONTROL BAND & BELT U	YES
Durable Medical Equipment L2640	PELVIC CONTROL BAND & BELT B	YES
Durable Medical Equipment L2650	PELV & THOR CONTROL GLUTEAL	YES
Durable Medical Equipment L2660	THORACIC CONTROL THORACIC BA	YES
Durable Medical Equipment L2670	THORAC CONT PARASPINAL UPRIG	YES
Durable Medical Equipment L2680	THORAC CONT LAT SUPPORT UPRI	YES
Durable Medical Equipment L2795	KNEE CONTROL FULL KNEECAP	YES
Durable Medical Equipment L2999	Lower extremity orthosis, not otherwise specified	YES
Durable Medical Equipment L3000	FT INSERT UCB BERKELEY SHELL	
Durable Medical Equipment L3010	FOOT LONGITUDINAL ARCH SUPPO	
Durable Medical Equipment L3020	FOOT LONGITUD/METATARSAL SUP	
Durable Medical Equipment L3031	FOOT LAMIN/PREPREG COMPOSITE	
Durable Medical Equipment L3040	FT ARCH SUPRT PREMOLD LONGIT	
Durable Medical Equipment L3060	FOOT ARCH SUPP LONGITUD/META	
Durable Medical Equipment L3201	OXFORD W SUPINAT/PRONAT INF	
Durable Medical Equipment L3202	OXFORD W/ SUPINAT/PRONATOR C	
Durable Medical Equipment L3203	OXFORD W/ SUPINATOR/PRONATOR	
Durable Medical Equipment L3204	HIGHTOP W/ SUPP/PRONATOR INF	
Durable Medical Equipment L3206	HIGHTOP W/ SUPP/PRONATOR CHI	
Durable Medical Equipment L3207	HIGHTOP W/ SUPP/PRONATOR JUN	
Durable Medical Equipment L3224	WOMAN SHOE OXFORD BRACE	

Durable Medical Equipment L3225	MAN SHOE OXFORD BRACE	
Durable Medical Equipment L3253	SHOE MOLDED PLASTAZOTE CUST	
Durable Medical Equipment L3265	PLASTAZOTE SANDAL EACH	
Durable Medical Equipment L3332	SHOE LIFTS TAPERED TO ONE-HA	
Durable Medical Equipment L3334	SHOE LIFTS ELEVATION HEEL /I	
Durable Medical Equipment L3480	SHOE HEEL PAD & DEPRESS FOR	
Durable Medical Equipment L3904	Wrist-hand-finger orthosis (WHFO), external powered, electric, custom fabricated	YES
Durable Medical Equipment L3967	SEWHO AIRPLANE W/O JNTS CF	
Durable Medical Equipment L3971	SEWHO CAP DESIGN W/JNT(S) CF	
Durable Medical Equipment L3999	Upper limb orthosis, not otherwise specified [when specified as an upper extremity myoelectric orthosis]	YES
Durable Medical Equipment L4000	REPL GIRDLE MILWAUKEE ORTH	YES
Durable Medical Equipment L4002	REPLACE STRAP, ANY ORTHOSIS	YES
Durable Medical Equipment L4010	REPLACE TRILATERAL SOCKET BR	YES
Durable Medical Equipment L4020	REPLACE QUADLAT SOCKET BRIM	YES
Durable Medical Equipment L4030	REPLACE SOCKET BRIM CUST FIT	YES
Durable Medical Equipment L4040	REPLACE MOLDED THIGH LACER	YES
Durable Medical Equipment L4045	REPLACE NON-MOLDED THIGH LAC	YES
Durable Medical Equipment L4050	REPLACE MOLDED CALF LACER	YES
Durable Medical Equipment L4055	REPLACE NON-MOLDED CALF LACE	YES
Durable Medical Equipment L4060	REPLACE HIGH ROLL CUFF	YES
Durable Medical Equipment L4070	REPLACE PROX & DIST UPRIGHT	YES
Durable Medical Equipment L4080	REPL MET BAND KAFO-AFO PROX	YES
Durable Medical Equipment L4090	REPL MET BAND KAFO-AFO CALF/	YES
Durable Medical Equipment L4100	REPL LEATH CUFF KAFO PROX TH	YES

Durable Medical Equipment L4110	REPL LEATH CUFF KAFO-AFO CAL	YES
Durable Medical Equipment L4130	REPLACE PRETIBIAL SHELL	YES
Durable Medical Equipment L4205	ORTHO DVC REPAIR PER 15 MIN	YES
Durable Medical Equipment L4210	ORTH DEV REPAIR/REPL MINOR P	YES
Durable Medical Equipment L4394	REPLACE FOOT DROP SPINT	YES
Durable Medical Equipment L4631	AFO, WALK BOOT TYPE, CUS FAB	YES
Durable Medical Equipment L5000	Prosthesis - partial foot prosthesis	YES
Durable Medical Equipment L5010	Prosthesis - partial foot prosthesis	YES
Durable Medical Equipment L5020	Prosthesis - partial foot prosthesis	YES
Durable Medical Equipment L5050	Prosthesis	YES
Durable Medical Equipment L5060	Prosthesis	YES
Durable Medical Equipment L5100	Prosthesis - below knee prosthesis	YES
Durable Medical Equipment L5105	Prosthesis - below knee prosthesis	YES
Durable Medical Equipment L5150	Prosthesis - knee disarticulation (or through knee) prostheses	YES
Durable Medical Equipment L5160	Prosthesis - knee disarticulation (or through knee) prostheses	YES
Durable Medical Equipment L5200	Prosthesis - above knee prosthesis	YES
Durable Medical Equipment L5210	Prosthesis - above knee prosthesis	YES
Durable Medical Equipment L5220	Prosthesis - above knee prosthesis	YES
Durable Medical Equipment L5230	Prosthesis - above knee prosthesis	YES
Durable Medical Equipment L5250	Prosthesis - hip disarticulation prosthesis	YES
Durable Medical Equipment L5270	Prosthesis - hip disarticulation prosthesis	YES
Durable Medical Equipment L5280	Prosthesis - hemipelvectomy, Canadian type: molded socket, hip joint, single axis constant friction knee, shin, SACH foot	YES
Durable Medical Equipment L5301	Prosthesis - below knee, molded socket, shin, each foot, endoskeletal system	YES
Durable Medical Equipment L5312	Prosthesis - knee disarticulation (or through knee), molded socket, single axis knee, pylon, SACH foot, endoskeletal system	YES
Durable Medical Equipment L5321	Prosthesis - above knee, molded socket, open end, SACH foot, endoskeletal system, single axis knee	YES

Durable Medical Equipment L5331	Prosthesis - hip disarticulation, Canadian type, molded socket, endoskeletal system, hip joint, single axis knee, SACH foot	YES
Durable Medical Equipment L5341	Prosthesis - hemipelvectomy, Canadian type, molded socket, endoskeletal system, hip joint, single axis knee, SACH foot	YES
Durable Medical Equipment L5400	Prosthesis - immediate post surgical or early fitting prostheses	YES
Durable Medical Equipment L5410	Prosthesis - immediate post surgical or early fitting prostheses	YES
Durable Medical Equipment L5420	Prosthesis - immediate post surgical or early fitting prostheses	YES
Durable Medical Equipment L5430	Prosthesis - immediate post surgical or early fitting prostheses	YES
Durable Medical Equipment L5450	Prosthesis - immediate post surgical or early fitting prostheses	YES
Durable Medical Equipment L5460	Prosthesis - immediate post surgical or early fitting prostheses	YES
Durable Medical Equipment L5500	Prosthesis - initial prostheses	YES
Durable Medical Equipment L5505	Prosthesis - initial prostheses	YES
Durable Medical Equipment L5510	Prosthesis - preparatory prostheses	YES
Durable Medical Equipment L5520	Prosthesis - preparatory prostheses	YES
Durable Medical Equipment L5530	Prosthesis - preparatory prostheses	YES
Durable Medical Equipment L5535	Prosthesis - preparatory prostheses	YES
Durable Medical Equipment L5540	Prosthesis - preparatory prostheses	YES
Durable Medical Equipment L5560	Prosthesis - preparatory prostheses	YES
Durable Medical Equipment L5570	Prosthesis - preparatory prostheses	YES
Durable Medical Equipment L5580	Prosthesis - preparatory prostheses	YES
Durable Medical Equipment L5585	PREP AK ISCHIAL OPEN END	YES
Durable Medical Equipment L5590	Prosthesis - preparatory prostheses	YES
Durable Medical Equipment L5595	Prosthesis - preparatory prostheses	YES
Durable Medical Equipment L5600	Prosthesis - preparatory prostheses	YES
Durable Medical Equipment L5610	Prosthesis - additions to lower extremity prostheses	YES
Durable Medical Equipment L5611	Prosthesis - additions to lower extremity prostheses	YES
Durable Medical Equipment L5613	Prosthesis - additions to lower extremity prostheses	YES

Durable Medical Equipment L5614	Prosthesis - additions to lower extremity prostheses	YES
Durable Medical Equipment L5615	Addition, endoskeletal knee-shin system, 4 bar linkage or multiaxial, fluid swing and stance phase control	YES
Durable Medical Equipment L5616	Prosthesis - additions to lower extremity prostheses	YES
Durable Medical Equipment L5617	Prosthesis - additions to lower extremity prostheses	YES
Durable Medical Equipment L5618	Prosthesis - additions to lower extremity prostheses, test sockets	YES
Durable Medical Equipment L5620	Prosthesis - additions to lower extremity prostheses, test sockets	YES
Durable Medical Equipment L5622	Prosthesis - additions to lower extremity prostheses, test sockets	YES
Durable Medical Equipment L5624	Prosthesis - additions to lower extremity prostheses, test sockets	YES
Durable Medical Equipment L5626	Prosthesis - additions to lower extremity prostheses, test sockets	YES
Durable Medical Equipment L5628	Prosthesis - additions to lower extremity prostheses, test sockets	YES
Durable Medical Equipment L5629	Prosthesis - additions to lower extremity prostheses, test sockets	YES
Durable Medical Equipment L5630	Prosthesis - additions to lower extremity prostheses, socket variations	YES
Durable Medical Equipment L5631	Prosthesis - additions to lower extremity prostheses, socket variations	YES
Durable Medical Equipment L5632	Prosthesis - additions to lower extremity prostheses, socket variations	YES
Durable Medical Equipment L5634	Prosthesis - additions to lower extremity prostheses, socket variations	YES
Durable Medical Equipment L5636	Prosthesis - additions to lower extremity prostheses, socket variations	YES
Durable Medical Equipment L5637	Prosthesis - additions to lower extremity prostheses, socket variations	YES
Durable Medical Equipment L5638	Prosthesis - additions to lower extremity prostheses, socket variations	YES
Durable Medical Equipment L5639	Prosthesis - additions to lower extremity prostheses, socket variations	YES
Durable Medical Equipment L5640	Prosthesis - additions to lower extremity prostheses, socket variations	YES
Durable Medical Equipment L5642	Prosthesis - additions to lower extremity prostheses, socket variations	YES
Durable Medical Equipment L5643	Prosthesis - additions to lower extremity prostheses, socket variations	YES
Durable Medical Equipment L5644	Prosthesis - additions to lower extremity prostheses, socket variations	YES
Durable Medical Equipment L5645	Prosthesis - additions to lower extremity prostheses, socket variations	YES
Durable Medical Equipment L5646	Prosthesis - additions to lower extremity prostheses, socket variations	YES

Durable Medical Equipment L5682	Prosthesis - additions to lower extremity prostheses, socket inserts and suspension	YES
Durable Medical Equipment L5683	Prosthesis - additions to lower extremity prostheses, socket inserts and suspension	YES
Durable Medical Equipment L5684	Prosthesis - additions to lower extremity prostheses, socket inserts and suspension	YES
Durable Medical Equipment L5685	Prosthesis - additions to lower extremity prostheses, socket inserts and suspension	YES
Durable Medical Equipment L5686	Prosthesis - additions to lower extremity prostheses, socket inserts and suspension	YES
Durable Medical Equipment L5688	Prosthesis - additions to lower extremity prostheses, socket inserts and suspension	YES
Durable Medical Equipment L5690	Prosthesis - additions to lower extremity prostheses, socket inserts and suspension	YES
Durable Medical Equipment L5692	Prosthesis - additions to lower extremity prostheses, socket inserts and suspension	YES
Durable Medical Equipment L5694	Prosthesis - additions to lower extremity prostheses, socket inserts and suspension	YES
Durable Medical Equipment L5695	Prosthesis - additions to lower extremity prostheses, socket inserts and suspension	YES
Durable Medical Equipment L5696	Prosthesis - additions to lower extremity prostheses, socket inserts and suspension	YES
Durable Medical Equipment L5697	Prosthesis - additions to lower extremity prostheses, socket inserts and suspension	YES
Durable Medical Equipment L5698	Prosthesis - additions to lower extremity prostheses, socket inserts and suspension	YES
Durable Medical Equipment L5699	Prosthesis - additions to lower extremity prostheses, socket inserts and suspension	YES
Durable Medical Equipment L5700	Prosthesis - replacements for lower extremity prostheses	YES
Durable Medical Equipment L5701	Prosthesis - replacements for lower extremity prostheses	YES
Durable Medical Equipment L5702	Prosthesis - replacements for lower extremity prostheses	YES
Durable Medical Equipment L5703	Prosthesis - replacements for lower extremity prostheses	YES
Durable Medical Equipment L5704	Prosthesis - replacements for lower extremity prostheses	YES
Durable Medical Equipment L5705	Prosthesis - replacements for lower extremity prostheses	YES
Durable Medical Equipment L5706	Prosthesis - replacements for lower extremity prostheses	YES
Durable Medical Equipment L5707	Prosthesis - replacements for lower extremity prostheses	YES
Durable Medical Equipment L5710	Prosthesis - additions to lower extremity prostheses, exoskeletal knee-shin system	YES
Durable Medical Equipment L5711	Prosthesis - additions to lower extremity prostheses, exoskeletal knee-shin system	YES
Durable Medical Equipment L5712	Prosthesis - additions to lower extremity prostheses, exoskeletal knee-shin system	YES

Durable Medical Equipment L5845	Prosthesis - additions to lower extremity prostheses, exoskeletal knee-shin system	YES
Durable Medical Equipment L5848	Prosthesis - additions to lower extremity prostheses, exoskeletal knee-shin system	YES
Durable Medical Equipment L5850	Prosthesis - addition, endoskeletal system, above knee or hip disarticulation	YES
Durable Medical Equipment L5855	Prosthesis - addition, endoskeletal system, hip disarticulation	YES
Durable Medical Equipment L5856	Addition to lower extremity prosthesis, endoskeletal knee-shin system, microprocessor control feature, swing and stance phase, includes electronic sensor(s), any type	YES
Durable Medical Equipment L5857	Addition to lower extremity prosthesis, endoskeletal knee-shin system, microprocessor control feature, swing phase only, includes electronic sensor(s), any type	YES
Durable Medical Equipment L5858	Addition to lower extremity prosthesis, endoskeletal knee shin system, microprocessor control feature, stance phase only, includes electronic sensor(s), any type	YES
Durable Medical Equipment L5859	Addition to lower extremity prosthesis, endoskeletal knee-shin system, powered and programmable flexion/extension assist control, includes any type motor(s)	YES
Durable Medical Equipment L5859:	Addition to lower extremity prosthesis, endoskeletal knee-shin system, powered and programmable flexion/extension assist control, includes any type motor(s)	YES
Durable Medical Equipment L5910	Prosthesis - additions to lower extremity prostheses, endoskeletal system	YES
Durable Medical Equipment L5920	Prosthesis - additions to lower extremity prostheses, endoskeletal system	YES
Durable Medical Equipment L5925	Prosthesis - additions to lower extremity prostheses, endoskeletal system	YES
L5926	Addition to lower extremity prosthesis, endoskeletal, knee disarticulation, above knee, hip disarticulation, positional rotation unit, any type	YES
Durable Medical Equipment		
Durable Medical Equipment L5930	Prosthesis - additions to lower extremity prostheses, endoskeletal system	YES
Durable Medical Equipment L5940	Prosthesis - additions to lower extremity prostheses, endoskeletal system	YES
Durable Medical Equipment L5950	Prosthesis - additions to lower extremity prostheses, endoskeletal system	YES
Durable Medical Equipment L5960	Prosthesis - additions to lower extremity prostheses, endoskeletal system	YES
Durable Medical Equipment L5961	Prosthesis - additions to lower extremity prostheses, endoskeletal system	YES
Durable Medical Equipment L5962	Prosthesis - additions to lower extremity prostheses, endoskeletal system	YES
Durable Medical Equipment L5964	Prosthesis - additions to lower extremity prostheses, endoskeletal system	YES
Durable Medical Equipment L5966	Prosthesis - additions to lower extremity prostheses, endoskeletal system	YES
Durable Medical Equipment L5968	Prosthesis - additions to lower extremity prostheses	YES

Durable Medical Equipment L5969	Addition, endoskeletal ankle-foot or ankle system, power assist, includes any type motor(s)	YES
Durable Medical Equipment L5970	Prosthesis - additions to lower extremity prostheses	YES
Durable Medical Equipment L5971	Prosthesis - additions to lower extremity prostheses	YES
Durable Medical Equipment L5972	Prosthesis - additions to lower extremity prostheses	YES
Durable Medical Equipment L5973	Endoskeletal ankle-foot system, microprocessor controlled feature, dorsiflexion and/or plantar flexion control, includes power source	YES
Durable Medical Equipment L5974	Prosthesis - additions to lower extremity prostheses	YES
Durable Medical Equipment L5975	Prosthesis - additions to lower extremity prostheses	YES
Durable Medical Equipment L5976	Prosthesis - additions to lower extremity prostheses	YES
Durable Medical Equipment L5978	Prosthesis - additions to lower extremity prostheses	YES
Durable Medical Equipment L5979	Prosthesis - additions to lower extremity prostheses	YES
Durable Medical Equipment L5980	Prosthesis - additions to lower extremity prostheses	YES
Durable Medical Equipment L5981	Prosthesis - additions to lower extremity prostheses	YES
Durable Medical Equipment L5982	Prosthesis - additions to lower extremity prostheses	YES
Durable Medical Equipment L5984	Prosthesis - additions to lower extremity prostheses	YES
Durable Medical Equipment L5985	Prosthesis - additions to lower extremity prostheses	YES
Durable Medical Equipment L5986	Prosthesis - additions to lower extremity prostheses	YES
Durable Medical Equipment L5987	Prosthesis - additions to lower extremity prostheses	YES
Durable Medical Equipment L5988	Prosthesis - additions to lower extremity prostheses	YES
Durable Medical Equipment L5990	Prosthesis - additions to lower extremity prostheses	YES
Durable Medical Equipment L5991	ADDITION TO LOWER EXTREMITY PROSTHESES, OSSEOINTEGRATED EXTERNAL PROSTHETIC CONNECTOR	YES
Durable Medical Equipment L5999	Prosthesis - addition to lower extremity prosthesis, not otherwise specified	YES
Durable Medical Equipment L6000	PAR HAND ROBIN-AIDS THUM REM	YES
Durable Medical Equipment L6010	HAND ROBIN-AIDS LITTLE/RING	YES
Durable Medical Equipment L6020	PART HAND ROBIN-AIDS NO FING	YES

Durable Medical Equipment L6026	Transcarpal/metacarpal or partial hand disarticulation prosthesis, external power, self- suspended, inner socket with removable forearm section, electrodes and cables, two batteries, charger, myoelectric control of terminal device, excludes terminal device(s)	NO
Durable Medical Equipment L6050	WRST MLD SCK FLX HNG TRI PAD	YES
Durable Medical Equipment L6055	WRST MOLD SOCK W/EXP INTERFA	YES
Durable Medical Equipment L6100	ELB MOLD SOCK FLEX HINGE PAD	YES
Durable Medical Equipment L6110	ELBOW MOLD SOCK SUSPENSION T	YES
Durable Medical Equipment L6120	ELBOW MOLD DOUB SPLT SOC STE	YES
Durable Medical Equipment L6130	ELBOW STUMP ACTIVATED LOCK H	YES
Durable Medical Equipment L6200	ELBOW MOLD OUTSID LOCK HINGE	YES
Durable Medical Equipment L6205	ELBOW MOLDED W/ EXPAND INTER	YES
Durable Medical Equipment L6250	ELBOW INTER LOC ELBOW FORARM	YES
Durable Medical Equipment L6300	SHLDER DISART INT LOCK ELBOW	YES
Durable Medical Equipment L6310	SHOULDER PASSIVE RESTOR COMP	YES
Durable Medical Equipment L6320	SHOULDER PASSIVE RESTOR CAP	YES
Durable Medical Equipment L6350	THORACIC INTERN LOCK ELBOW	YES
Durable Medical Equipment L6360	THORACIC PASSIVE RESTOR COMP	YES
Durable Medical Equipment L6370	THORACIC PASSIVE RESTOR CAP	YES
Durable Medical Equipment L6380	POSTOP DSG CAST CHG WRST/ELB	YES
Durable Medical Equipment L6382	POSTOP DSG CAST CHG ELB DIS/	YES
Durable Medical Equipment L6384	POSTOP DSG CAST CHG SHLDER/T	YES
Durable Medical Equipment L6386	POSTOP EA CAST CHG & REALIGN	YES
Durable Medical Equipment L6388	POSTOP APPLICAT RIGID DSG ON	YES
Durable Medical Equipment L6400	BELOW ELBOW PROSTH TISS SHAP	YES
Durable Medical Equipment L6450	ELB DISART PROSTH TISS SHAP	YES
Durable Medical Equipment L6500	ABOVE ELBOW PROSTH TISS SHAP	YES

Durable Medical Equipment L6550	SHLDR DISAR PROSTH TISS SHAP	YES
Durable Medical Equipment L6570	SCAP THORAC PROSTH TISS SHAP	YES
Durable Medical Equipment L6580	WRIST/ELBOW BOWDEN CABLE MOL	YES
Durable Medical Equipment L6582	WRIST/ELBOW BOWDEN CBL DIR F	YES
Durable Medical Equipment L6584	ELBOW FAIR LEAD CABLE MOLDED	YES
Durable Medical Equipment L6586	ELBOW FAIR LEAD CABLE DIR FO	YES
Durable Medical Equipment L6588	SHDR FAIR LEAD CABLE MOLDED	YES
Durable Medical Equipment L6590	SHDR FAIR LEAD CABLE DIRECT	YES
Durable Medical Equipment L6600	POLYCENTRIC HINGE PAIR	YES
Durable Medical Equipment L6605	SINGLE PIVOT HINGE PAIR	YES
Durable Medical Equipment L6610	FLEXIBLE METAL HINGE PAIR	YES
Durable Medical Equipment L6611	Addition to upper extremity prosthesis, external powered, additional switch, any type	YES
Durable Medical Equipment L6615	DISCONNECT LOCKING WRIST UNI	YES
Durable Medical Equipment L6616	DISCONNECT INSERT LOCKING WR	YES
Durable Medical Equipment L6620	FLEXION/EXTENSION WRIST UNIT	YES
Durable Medical Equipment L6621	Upper extremity prosthesis addition, flexion/extension wrist with or without friction, for use with external powered terminal device	YES
Durable Medical Equipment L6623	SPRING-ASS ROT WRST W/ LATCH	YES
Durable Medical Equipment L6624	FLEX/EXT/ROTATION WRIST UNIT	YES
Durable Medical Equipment L6625	ROTATION WRST W/ CABLE LOCK	YES
Durable Medical Equipment L6628	QUICK DISCONN HOOK ADAPTER O	YES
Durable Medical Equipment L6629	LAMINATION COLLAR W/ COUPLIN	YES
Durable Medical Equipment L6630	STAINLESS STEEL ANY WRIST	YES
Durable Medical Equipment L6632	LATEX SUSPENSION SLEEVE EACH	YES
Durable Medical Equipment L6635	LIFT ASSIST FOR ELBOW	YES
Durable Medical Equipment L6637	NUDGE CONTROL ELBOW LOCK	YES

Durable Medical Equipment L6638	Upper extremity addition to prosthesis, electric locking feature, only for use with manually powered elbow	YES
Durable Medical Equipment L6640	SHOULDER ABDUCTION JOINT PAI	YES
Durable Medical Equipment L6641	EXCURSION AMPLIFIER PULLEY T	YES
Durable Medical Equipment L6642	EXCURSION AMPLIFIER LEVER TY	YES
Durable Medical Equipment L6645	SHOULDER FLEXION-ABDUCTION J	YES
Durable Medical Equipment L6646	Upper extremity addition, shoulder joint, multipositional locking, flexion, adjustable abduction friction control, for use with body powered or external powered system	YES
Durable Medical Equipment L6647	Upper extremity addition, shoulder lock mechanism, body powered actuator	YES
Durable Medical Equipment L6648	Upper extremity addition, shoulder lock mechanism, external powered actuator	YES
Durable Medical Equipment L6650	SHOULDER UNIVERSAL JOINT	YES
Durable Medical Equipment L6655	STANDARD CONTROL CABLE EXTRA	YES
Durable Medical Equipment L6660	HEAVY DUTY CONTROL CABLE	YES
Durable Medical Equipment L6665	TEFLON OR EQUAL CABLE LINING	YES
Durable Medical Equipment L6670	HOOK TO HAND CABLE ADAPTER	YES
Durable Medical Equipment L6672	HARNESS CHEST/SHLDER SADDLE	YES
Durable Medical Equipment L6675	HARNESS FIGURE OF 8 SING CON	YES
Durable Medical Equipment L6676	HARNESS FIGURE OF 8 DUAL CON	YES
Durable Medical Equipment L6677	Upper extremity addition, harness, triple control, simultaneous operation of terminal device and elbow	YES
Durable Medical Equipment L6680	TEST SOCK WRIST DISART/BEL E	YES
Durable Medical Equipment L6682	TEST SOCK ELBW DISART/ABOVE	YES
Durable Medical Equipment L6684	TEST SOCKET SHLDR DISART/THO	YES
Durable Medical Equipment L6686	SUCTION SOCKET	YES
Durable Medical Equipment L6687	FRAME TYP SOCKET BEL ELBOW/W	YES
Durable Medical Equipment L6688	FRAME TYP SOCK ABOVE ELB/DIS	YES
Durable Medical Equipment L6689	FRAME TYP SOCKET SHOULDER DI	YES

Durable Medical Equipment L6690	FRAME TYP SOCK INTERSCAP-THO	YES
Durable Medical Equipment L6691	REMOVABLE INSERT EACH	YES
Durable Medical Equipment L6692	SILICONE GEL INSERT OR EQUAL	YES
Durable Medical Equipment L6693	LOCKINGELBOW FOREARM CNTRBAL	YES
Durable Medical Equipment L6694	ELBOW SOCKET INS USE W/LOCK	YES
Durable Medical Equipment L6695	ELBOW SOCKET INS USE W/O LCK	YES
Durable Medical Equipment L6696	CUS ELBO SKT IN FOR CON/ATYP	YES
Durable Medical Equipment L6697	CUS ELBO SKT IN NOT CON/ATYP	YES
Durable Medical Equipment L6698	BELOW/ABOVE ELBOW LOCK MECH	YES
Durable Medical Equipment L6703	TERM DEV, PASSIVE HAND MITT	YES
Durable Medical Equipment L6704	TERM DEV, SPORT/REC/WORK ATT	YES
Durable Medical Equipment L6706	TERM DEV MECH HOOK VOL OPEN	YES
Durable Medical Equipment L6707	TERM DEV MECH HOOK VOL CLOSE	YES
Durable Medical Equipment L6708	TERM DEV MECH HAND VOL OPEN	YES
Durable Medical Equipment L6709	TERM DEV MECH HAND VOL CLOSE	YES
Durable Medical Equipment L6711	PED TERM DEV, HOOK, VOL OPEN	YES
Durable Medical Equipment L6712	PED TERM DEV, HOOK, VOL CLOS	YES
Durable Medical Equipment L6713	PED TERM DEV, HAND, VOL OPEN	YES
Durable Medical Equipment L6714	PED TERM DEV, HAND, VOL CLOS	YES
Durable Medical Equipment L6715	Terminal device, multiple articulating digit, includes motor(s), initial issue or replacement	YES
Durable Medical Equipment L6721	HOOK/HAND, HVY DTY, VOL OPEN	YES
Durable Medical Equipment L6722	HOOK/HAND, HVY DTY, VOL CLOS	YES
Durable Medical Equipment L6805	TERM DEV MODIFIER WRIST UNIT	YES
Durable Medical Equipment L6810	TERM DEV PRECISION PINCH DEV	YES
Durable Medical Equipment L6880	Electric hand, switch or myoelectric controlled, independently articulating digits, any grasp pattern or combination of grasp patterns, includes motor(s)	NO

Durable Medical Equipment L6881	Automatic grasp feature, addition to upper limb electric prosthetic terminal device	YES
Durable Medical Equipment L6882	Microprocessor control feature, addition to upper limb prosthetic terminal device	YES
Durable Medical Equipment L6883	Replacement socket, below elbow/wrist disarticulation, molded to patient model, for use with or without external power	YES
Durable Medical Equipment L6884	Replacement socket, above elbow/elbow disarticulation, molded to patient model, for use with or without external power	YES
Durable Medical Equipment L6885	Replacement socket, shoulder disarticulation/interscapular thoracic, molded to patient model, for use with or without external power	YES
Durable Medical Equipment L6890	PREFAB GLOVE FOR TERM DEVICE	YES
Durable Medical Equipment L6895	CUSTOM GLOVE FOR TERM DEVICE	YES
Durable Medical Equipment L6900	HAND RESTORAT THUMB/1 FINGER	YES
Durable Medical Equipment L6905	HAND RESTORATION MULTIPLE FI	YES
Durable Medical Equipment L6910	HAND RESTORATION NO FINGERS	YES
Durable Medical Equipment L6915	HAND RESTORATION REPLACMNT G	YES
Durable Medical Equipment L6920:	Wrist disarticulation, external power, self-suspended inner socket, removable forearm shell, Otto Bock or equal switch, cables, two batteries and one charger, switch control of terminal device	YES
Durable Medical Equipment L6925	Wrist disarticulation, external power, self-suspended inner socket, removable forearm shell, Otto Bock or equal electrodes, cables, 2 batteries and one charger, myoelectronic control of terminal device	YES
Durable Medical Equipment L6930	Below elbow, external power, self-suspended inner socket, removable forearm shell, Otto Bock or equal switch, cables, two batteries and one charger, switch control of terminal device	YES
Durable Medical Equipment L6935	Below elbow, external power, self-suspended inner socket, removable forearm shell, Otto Bock or equal electrodes, cables, 2 batteries and one charger, myoelectronic control of terminal device	YES
Durable Medical Equipment L6935:	Below elbow, external power, self-suspended inner socket, removable forearm shell, Otto Bock or equal electrodes, cables, two batteries and one charger, myoelectronic control of terminal device	YES
Durable Medical Equipment L6940	Elbow disarticulation, external power, molded inner socket, removable humeral shell, outside locking hinges, forearm, Otto Bock or equal switch, cables, two batteries and one charger, switch control of terminal device	YES
Durable Medical Equipment L6945	Elbow disarticulation, external power, molded inner socket, removable humeral shell, outside locking hinges, forearm, Otto Bock or equal electrodes, cables, 2 batteries and one charger, myoelectronic control of terminal device	YES
Durable Medical Equipment L6950	Above elbow, external power, molded inner socket, removable humeral shell, internal locking elbow, forearm, Otto Bock or equal switch, cables, two batteries and one charger, switch control of terminal device	YES
Durable Medical Equipment L6955	Above elbow, external power, molded inner socket, removable humeral shell, internal locking elbow, forearm, Otto Bock or equal electrodes, cables, 2 batteries and one charger, myoelectronic control of terminal device	YES

Durable Medical Equipment L6955:	Above elbow, external power, molded inner socket, removable humeral shell, internal locking elbow, forearm, Otto Bock or equal electrodes, cables, two batteries and one charger, myoelectronic control of terminal device	YES
Durable Medical Equipment L6960:	Shoulder disarticulation, external power, molded inner socket, removable shoulder shell, shoulder bulkhead, humeral section, mechanical elbow, forearm, Otto Bock or equal switch, cables, two batteries and one charger, switch control of terminal device	YES
Durable Medical Equipment L6965	Shoulder disarticulation, external power, molded inner socket, removable shoulder shell, shoulder bulkhead, humeral section, mechanical elbow, forearm, Otto Bock or equal electrodes, cables, 2 batteries and one charger, myoelectronic control of terminal device	YES
Durable Medical Equipment L6965:	Shoulder disarticulation, external power, molded inner socket, removable shoulder shell, shoulder bulkhead, humeral section, mechanical elbow, forearm, Otto Bock or equal electrodes, cables, two batteries and one charger, myoelectronic control of terminal device	YES
Durable Medical Equipment L6970	Interscapular-thoracic, external power, molded inner socket, removable shoulder shell, shoulder bulkhead, humeral section, mechanical elbow, forearm, Otto Bock or equal switch, cables, two batteries and one charger, switch control of terminal device	YES
Durable Medical Equipment L6975	Interscapular-thoracic, external power, molded inner socket, removable shoulder shell, shoulder bulkhead, humeral section, mechanical elbow, forearm, Otto Bock or equal electrodes, cables, 2 batteries and one charger, myoelectronic control of terminal device	YES
Durable Medical Equipment L6975:	Interscapular-thoracic, external power, molded inner socket, removable shoulder shell, shoulder bulkhead, humeral section, mechanical elbow, forearm, Otto Bock or equal electrodes, cables, two batteries and one charger, myoelectronic control of terminal device	YES
Durable Medical Equipment L7007	Electric hand, switch or myoelectric controlled, adult	YES
Durable Medical Equipment L7008	Electric hand, switch or myoelectric, controlled, pediatric	YES
Durable Medical Equipment L7009	Electric hook, switch or myoelectric controlled, adult	YES
Durable Medical Equipment L7040	PREHENSILE ACTUATOR	YES
Durable Medical Equipment L7045	Electric hook, switch or myoelectric controlled, pediatric	YES
Durable Medical Equipment L7045:	Electric hook, switch or myoelectric controlled, pediatric	YES
Durable Medical Equipment L7170	ELECTRONIC ELBOW HOSMER SWIT	YES
Durable Medical Equipment L7180	Electronic elbow, microprocessor sequential control of elbow and terminal device	YES
Durable Medical Equipment L7181	Electronic elbow, microprocessor simultaneous control of elbow and terminal device	YES
Durable Medical Equipment L7185	ELECTRON ELBOW ADOLESCENT SW	YES
Durable Medical Equipment L7186	ELECTRONIC ELBOW CHILD SWITCH	YES

Durable Medical Equipment L7190	Electronic elbow, adolescent, Variety Village or equal, myoelectronically controlled	YES
Durable Medical Equipment L7191	Electronic elbow, child, Variety Village or equal, myoelectronically controlled	YES
Durable Medical Equipment L7259	Electronic wrist rotator, any type	YES
Durable Medical Equipment L7360	SIX VOLT BAT OTTO BOCK/EQ EA	YES
Durable Medical Equipment L7364	TWELVE VOLT BATTERY UTAH/EQU	YES
Durable Medical Equipment L7400	ADD UE PROST BE/WD, ULTLITE	YES
Durable Medical Equipment L7401	ADD UE PROST A/E ULTLITE MAT	YES
Durable Medical Equipment L7402	ADD UE PROST S/D ULTLITE MAT	YES
Durable Medical Equipment L7403	ADD UE PROST B/E ACRYLIC	YES
Durable Medical Equipment L7404	ADD UE PROST A/E ACRYLIC	YES
Durable Medical Equipment L7405	ADD UE PROST S/D ACRYLIC	YES
Durable Medical Equipment L7499	UPPER EXTREMITY PROSTHESIS, NOT OTHERWISE	YES
Durable Medical Equipment L7510	Prosthesis - repair of prosthetic device	YES
Durable Medical Equipment L7520	Prosthesis - repair of prosthetic device	YES
Durable Medical Equipment L7600	PROSTHETIC DONNING SLEEVE	YES
Durable Medical Equipment L7700	GASKET OR SEAL, FOR USE WITH PROSTHETIC SOCKET INSERT, ANY TYPE, EACH	YES
Durable Medical Equipment L8035	CUSTOM BREAST PROSTHESIS, POST MASTECTOMY	YES
Durable Medical Equipment L8039	BREAST PROSTHESIS, NOS	YES
Durable Medical Equipment L8040	NASAL PROSTHESIS	YES
Durable Medical Equipment L8041	MIDFACIAL PROSTHESIS	YES
Durable Medical Equipment L8042	ORBITAL PROSTHESIS	YES
Durable Medical Equipment L8043	UPPER FACIAL PROSTHESIS	YES
Durable Medical Equipment L8044	HEMI-FACIAL PROSTHESIS	YES
Durable Medical Equipment L8045	AURICULAR PROSTHESIS	YES
Durable Medical Equipment L8046	PARTIAL FACIAL PROSTHESIS	YES

Durable Medical Equipment L8047	NASAL SEPTAL PROSTHESIS	YES
Durable Medical Equipment L8048	UNSPECIFIED MAXILLOFACIAL PROSTHESIS, BY	YES
Durable Medical Equipment L8049	REPAIR MAXILLOFACIAL PROSTH	YES
Durable Medical Equipment L8400	Prosthesis - prosthetic sheath	YES
Durable Medical Equipment L8410	Prosthesis - prosthetic sheath	YES
Durable Medical Equipment L8415	SHEATH UPPER LIMB	YES
Durable Medical Equipment L8417	Prosthesis - prosthetic sheath/sock, including a gel cushion layer, below knee or above knee	YES
Durable Medical Equipment L8420	Prosthesis - prosthetic sock, multiple ply	YES
Durable Medical Equipment L8430	Prosthesis - prosthetic sock, multiple ply	YES
Durable Medical Equipment L8435	PROS SOCK MULTI PLY UPPER LM	YES
Durable Medical Equipment L8440	Prosthesis - prosthetic shrinker	YES
Durable Medical Equipment L8460	Prosthesis - prosthetic shrinker	YES
Durable Medical Equipment L8465	SHRINKER UPPER LIMB	YES
Durable Medical Equipment L8470	Prosthesis - prosthetic sock, single ply	YES
Durable Medical Equipment L8480	PROS SOCK SINGLE PLY AK	YES
Durable Medical Equipment L8485	PROS SOCK SINGLE PLY UPPER L	YES
Durable Medical Equipment L8499	UNLISTED MISC PROSTHETIC SER	YES
Durable Medical Equipment L8500	ARTIFICIAL LARYNX	YES
Durable Medical Equipment L8501	TRACHEOSTOMY SPEAKING VALVE	YES
Durable Medical Equipment L8505	ARTIFICIAL LARYNX, ACCESSORY	
Durable Medical Equipment L8507	TRACH-ESOPH VOICE PROS PT IN	
Durable Medical Equipment L8509	TRACH-ESOPH VOICE PROS MD IN	
Durable Medical Equipment L8510	VOICE AMPLIFIER	
Durable Medical Equipment L8511	INDWELLING TRACH INSERT	
Durable Medical Equipment L8512	GEL CAP FOR TRACH VOICE PROS	

Durable Medical Equipment	L8513	TRACH PROS CLEANING DEVICE	
Durable Medical Equipment	L8514	REPL TRACH PUNCTURE DILATOR	
Durable Medical Equipment	L8515	GEL CAP APP DEVICE FOR TRACH	
Durable Medical Equipment	L8600	Implantable breast prosthesis, silicone or equal	YES
Cosmetic Potential	L8607	Injectable bulking agent for vocal cord medialization, 0.1 ml, includes shipping and necessary supplies	
Durable Medical Equipment	L8608	Miscellaneous external component, supply, or accessory for use with the Argus II Retinal Prosthesis System	NO
Exclusion	L8609	ARTIFICIAL CORNEA	NO
Exclusion	L8612	AQUEOUS SHUNT PROSTHESIS	NO
Durable Medical Equipment	L8613	OSSICULA IMPLANT	YES
Durable Medical Equipment	L8614	Cochlear device, includes all internal and external components	YES
Durable Medical Equipment	L8615	COCH IMPLANT HEADSET REPLACE	YES
Durable Medical Equipment	L8616	COCH IMPLANT MICROPHONE REPL	YES
Durable Medical Equipment	L8617	COCH IMPLANT TRANS COIL REPL	YES
Durable Medical Equipment	L8618	COCH IMPLANT TRAN CABLE REPL	YES
Durable Medical Equipment	L8619	Cochlear implant external speech processor, replacement	YES
Durable Medical Equipment	L8623	LITH ION BATT CID, NON-EARLVL	YES
Durable Medical Equipment	L8624	LITH ION BATT CID, EAR LEVEL	YES
Durable Medical Equipment	L8625	EXTERNAL RECHARG SYS FOR COCHLEAR IMPLANT OR AUDITORY OSSEOINTEGRATED DEVICE BATTERY, REPL ONLY, EA	YES
Durable Medical Equipment	L8627	Cochlear implant, external speech processor, component, replacement	YES
Durable Medical Equipment	L8628	Cochlear implant, external controller component, replacement	YES
Durable Medical Equipment	L8629	CID TRANSMIT COIL AND CABLE	YES
Durable Medical Equipment	L8630	METACARPOPHALANGEAL JOINT IMPLANT	YES
Durable Medical Equipment	L8631	MCP JOINT REPL 2 PC OR MORE	YES
Durable Medical Equipment	L8641	METATARSAL JOINT IMPLANT	YES
Durable Medical Equipment	L8642	HALLUX IMPLANT	YES

Durable Medical Equipment	L8658	INTERPHALANGEAL JOINT SPACER	YES
Durable Medical Equipment	L8659	INTERPHALANGEAL JOINT REPL	YES
Durable Medical Equipment	L8670	VASCULAR GRAFT, SYNTHETIC	YES
Investigational Potential	L8678	Electrical stimulator supplies (external) for use with implantable neurostimulator, per month	YES
Neurostimulator	L8679	Neurostimulator Implantation - Implantable neurostimulator, pulse generator, any type	YES
Neurostimulator	L8680	Neurostimulator Implantation - Implantable neurostimulator electrode, each	YES
Neurostimulator	L8681	Patient programmer (external) for use with implantable programmable neurostimulator pulse generator, replacement only	YES
Neurostimulator	L8682	Neurostimulator Implantation - Implantable Neurostimulator Radiofrequency Receiver	YES
Neurostimulator	L8683	Neurostimulator Implantation - Radiofrequency Transmitter (external) For Use With Implantable Neurostimulator Radiofrequency Receiver	YES
Neurostimulator	L8684	Radiofrequency transmitter (external) for use with implantable sacral root neurostimulator receiver for bowel and bladder management, replacement	YES
Neurostimulator	L8685	Neurostimulator Implantation - Implantable Neurostimulator Pulse Generator, single array, rechargeable, includes extension	YES
Neurostimulator	L8686	Neurostimulator Implantation - Implantable Neurostimulator Pulse Generator, single array, non- rechargeable, includes extension	YES
Neurostimulator	L8687	Neurostimulator Implantation - Implantable Neurostimulator Pulse Generator, dual array, rechargeable, includes extension	YES
Neurostimulator	L8688	Implantable neurostimulator pulse generator, dual array; non-rechargeable, includes extension	YES
Durable Medical Equipment	L8689	EXTERNAL RECHARG SYS INTERN	YES
Durable Medical Equipment	L8690	AUD OSSEO DEV, INT/EXT COMP	YES
Durable Medical Equipment	L8691	OSSEOINTEGRATED SND PROC RPL	YES
Durable Medical Equipment	L8692	AUDITORY OSSEOINTEGRATED DEVICE, EXTERNA	YES
Durable Medical Equipment	L8693	AUD OSSEO DEV, ABUTMENT	YES
Durable Medical Equipment	L8694	AUDITORY OSSEOINTEGRATED DEVICE, TRANSDUCER/ACTUATOR, REPLACEMENT ONLY, EA	YES
Durable Medical Equipment	L8695	EXTERNAL RECHARG SYS EXTERN	YES
Durable Medical Equipment	L8696	ANTENNA (EXTERNAL) FOR IMPL DIAPHRAGMATIC/PHRENIC NERVE STIM DEVICE, REPLACEMENT, EACH	YES
Durable Medical Equipment	L8698	MISC COMP/SUPPLY/ACCESS USED WITH TOTAL ARTIFICIAL HEART SYSTEM	YES

Durable Medical Equipment	L8699	Prosthetic implant, not otherwise specified	YES
Durable Medical Equipment	L8701	Powered upper extremity range of motion assist device, elbow, wrist, hand with single or double upright(s), includes microprocessor, sensors, all components and accessories, custom fabricated	NO
Durable Medical Equipment	L8702	Powered upper extremity range of motion assist device, elbow, wrist, hand, finger, single or double upright(s), includes microprocessor, sensors, all components and accessories, custom fabricated	NO
Durable Medical Equipment	L9900	ORTHOTIC AND PROSTHETIC SUPPLY, ACCESSOR	YES
Investigational Potential	M0075	Cellular therapy	NO
Investigational Potential	M0076	Prolotherapy	NO
Chelation Therapy	M0300	IV chelation therapy	NO
Investigational Potential	P2031	Hair analysis (excluding arsenic)	NO
Pharmacy	Q0138	Injection, ferumoxytol, for treatment of iron deficiency anemia, 1 mg (for ESRD on dialysis) (Feraheme)	YES
Pharmacy	Q0139	FERUMOXYTOL, ESRD USE	YES
Durable Medical Equipment	Q0506	BATTERY, LITHIUM-ION, FOR USE WITH ELECT	YES
Pharmacy	Q0515	Semorelin acetate	YES
Pharmacy	Q2017	TENIPOSIDE, 50 MG	YES
Cosmetic Potential	Q2026	Injection, Radiesse, 0.1 ml	
Cosmetic Potential	Q2028	Injection, Sculptra, 0.5 mg	
Pharmacy	Q2041	Axicabtagene Ciloleucel [Yescarta]	YES
Pharmacy	Q2042	Tisagenlecleucel [Kymriah]	YES
Pharmacy	Q2043	Sipuleucel-T (Provenge)	YES
Pharmacy	Q2049	Liposomal doxorubicin (Lipodox)	YES
Pharmacy	Q2050	Liposomal doxorubicin (Doxil)	YES
Pharmacy	Q2052	SERVICES SUPPLIES IN HOME MEDICARE IVIG DEM	YES
Pharmacy	Q2053	Sacituzumab govitecan-hziy, 10 mg (Tecartus)	YES
Pharmacy	Q2054	Lisocabtagene maraleucel (Breyanzi)	YES
Pharmacy	Q2055	Idcabtagene vicleucel (Abecma)	YES
Pharmacy	Q2056	Ciltacabtagene autoleucel (Carvykti)	YES
Radiation	Q3001	Brachytherapy Radioelements	YES
Pharmacy	Q3027	Interferon beta-1a (Avonex)	YES
Pharmacy	Q3028	Interferon beta-1a (Rebif)	YES
Durable Medical Equipment	Q4050	CAST SUPPLIES UNLISTED	YES
Durable Medical Equipment	Q4051	SPLINT SUPPLIES, MISC	YES
Pharmacy	Q4074	Iloprost (Ventavis)	YES
Pharmacy	Q4081	Epoetin alfa (for ESRD on dialysis) (Epogen, Procrit)	YES
Pharmacy	Q4082	DRUG/BIO NOC PART B DRUG CAP	YES
BioEngineered Wound Healing	Q4100	Skin substitute, not otherwise classified [when specified as OrCel for epidermolysis bullosa only] or [when specified as DermaMatrix for breast reconstruction only] or [when specified as Biobrane] or [when describing a product with no specific code indicated as investigational and not medically necessary]	YES
BioEngineered Wound Healing	Q4101	Apligraf, per square centimeter	YES

BioEngineered Wound Healing	Q4102	Oasis Wound Matrix, per square centimeter	YES
BioEngineered Wound Healing	Q4103	Oasis Burn Matrix, per square centimeter	NO
BioEngineered Wound Healing	Q4104	Integra Bilayer Matrix Wound Dressing (BMWD), per square centimeter	NO
BioEngineered Wound Healing	Q4105	Integra Dermal Regeneration Template (DRT) or Integra Omnigraft dermal regeneration matrix, per square centimeter	YES
BioEngineered Wound Healing	Q4106	Dermagraft, per square centimeter [for diabetic foot ulcers and epidermolysis bullosa only]	YES
BioEngineered Wound Healing	Q4107	GraftJacket, per square centimeter	YES
BioEngineered Wound Healing	Q4108	Integra Matrix, per square centimeter	YES
BioEngineered Wound Healing	Q4110	PriMatrix, per square centimeter	NO
BioEngineered Wound Healing	Q4111	Gammagraft, per square centimeter	NO
BioEngineered Wound Healing	Q4112	Cymetra, injectable, 1 cc	NO
BioEngineered Wound Healing	Q4113	Graftjacket Xpress, injectable, 1 cc	NO
BioEngineered Wound Healing	Q4114	Integra Flowable Wound Matrix, injectable, 1 cc	YES
BioEngineered Wound Healing	Q4115	AlloSkin, per square centimeter	NO
BioEngineered Wound Healing	Q4116	AlloDerm, per square centimeter [AlloDerm RTM, AlloDerm RTU for breast reconstruction and abdominal wall wounds]	YES
BioEngineered Wound Healing	Q4117	Hyalomatrix, per square centimeter	NO
BioEngineered Wound Healing	Q4118	Matristem micromatrix, 1 mg	NO
BioEngineered Wound Healing	Q4121	TheraSkin, per square centimeter	NO
BioEngineered Wound Healing	Q4122	Dermacell, Dermacell AWM or Dermacell AWM porous, per square centimeter [for breast reconstruction or diabetic foot ulcers only]	YES
BioEngineered Wound Healing	Q4123	AlloSkin RT, per square centimeter	NO
BioEngineered Wound Healing	Q4124	Oasis Ultra Tri-Layer Wound Matrix, per square centimeter	NO
BioEngineered Wound Healing	Q4125	ArthroFlex, per square centimeter	NO
BioEngineered Wound Healing	Q4126	Memoderm, dermaspan, tranzgraft or integuply, per square centimeter	NO
BioEngineered Wound Healing	Q4127	Talymed, per square centimeter	NO

BioEngineered Wound Healing	Q4128	FlexHD, Allopatch HD, or Matrix HD, per square centimeter [when specified as FlexHD for breast reconstruction] or [when specified as AlloPatch HD or Matrix HD]	YES
BioEngineered Wound Healing	Q4130	Strattice, per square centimeter [for breast reconstruction and abdominal wall wounds]	NO
BioEngineered Wound Healing	Q4132	Grafix CORE and GrafixPL CORE, per square centimeter	YES
BioEngineered Wound Healing	Q4133	Grafix PRIME, GrafixPL PRIME, Stravix and StravixPL, per square centimeter [when specified as Grafix PRIME, for diabetic foot ulcers only] or [when specified as GrafixPL PRIME, Stravix, StravixPL]	YES
BioEngineered Wound Healing	Q4134	hMatrix, per square centimeter	NO
BioEngineered Wound Healing	Q4135	Mediskin, per square centimeter	NO
BioEngineered Wound Healing	Q4136	EZ-derm, per square centimeter	NO
BioEngineered Wound Healing	Q4137	AmnioExCel, AmnioExCel plus or BioDEXcel, per square centimeter	NO
BioEngineered Wound Healing	Q4138	BioDfence Dryflex, per square centimeter	NO
BioEngineered Wound Healing	Q4139	AmnioMatrix or BioDMatrix, injectable, 1 cc	NO
BioEngineered Wound Healing	Q4140	BioDfence, per square centimeter	NO
BioEngineered Wound Healing	Q4141	Alloskin AC, per square centimeter	NO
BioEngineered Wound Healing	Q4142	XCM Biologic Tissue Matrix, per square centimeter	NO
BioEngineered Wound Healing	Q4143	Repriza, per square centimeter	NO
BioEngineered Wound Healing	Q4145	Epifix, injectable, 1 mg	NO
BioEngineered Wound Healing	Q4146	TenSIX, per square centimeter	NO
BioEngineered Wound Healing	Q4147	Architect, Architect PX, or Architect FX, extracellular matrix, per square centimeter	NO
BioEngineered Wound Healing	Q4148	NEOX Cord 1k, NEOX Cord RT, or Clarix Cord 1k, per square centimeter	NO
BioEngineered Wound Healing	Q4149	Excellagen, 0.1 cc	NO
BioEngineered Wound Healing	Q4150	Allowrap DS or Dry, per square centimeter	NO
BioEngineered Wound Healing	Q4151	AmnioBand or Guardian, per sq cm [for diabetic foot ulcers only]]	YES
BioEngineered Wound Healing	Q4152	DermaPure, per square centimeter	NO
BioEngineered Wound Healing	Q4153	Dermavest and Plurivest, per square centimeter	NO
BioEngineered Wound Healing	Q4154	Biovance, per square centimeter	YES

BioEngineered Wound Healing	Q4155	NeoxFlo or ClarixFlo, 1 mg	NO
BioEngineered Wound Healing	Q4156	NEOX 100 or Clarix 100, per square centimeter	NO
BioEngineered Wound Healing	Q4157	Revitalon, per square centimeter	NO
BioEngineered Wound Healing	Q4158	Kerecis Omega3, per square centimeter	NO
BioEngineered Wound Healing	Q4159	Affinity, per square centimeter	YES
BioEngineered Wound Healing	Q4160	NuShield, per square centimeter	NO
BioEngineered Wound Healing	Q4161	Bio-connekt wound matrix, per square centimeter	NO
BioEngineered Wound Healing	Q4162	WoundEx Flow, BioSkin Flow, 0.5 cc	NO
BioEngineered Wound Healing	Q4163	WoundEx, BioSkin, per square centimeter	NO
BioEngineered Wound Healing	Q4164	Helicoll, per square centimeter	NO
BioEngineered Wound Healing	Q4165	Keramatrix or Kerasorb, per square centimeter	NO
BioEngineered Wound Healing	Q4166	Cytal, per square centimeter [formerly Matristem wound/burn matrix]	NO
BioEngineered Wound Healing	Q4167	TruSkin, per square centimeter	NO
BioEngineered Wound Healing	Q4168	AmnioBand, 1 mg	NO
BioEngineered Wound Healing	Q4169	Artacent Wound, per square centimeter	NO
BioEngineered Wound Healing	Q4170	CYGNUS, per square centimeter	NO
BioEngineered Wound Healing	Q4171	Interfyl, 1 mg	NO
BioEngineered Wound Healing	Q4173	PalinGen or PalinGen Xplus, per square centimeter	NO
BioEngineered Wound Healing	Q4174	PalinGen or ProMatrX, 0.36 mg per 0.25 cc	NO
BioEngineered Wound Healing	Q4175	Miroderm, per square centimeter	NO
BioEngineered Wound Healing	Q4176	NeoPatch or Therion, per square centimeter	NO
BioEngineered Wound Healing	Q4177	FlowerAmnioflo, 0.1 cc	NO
BioEngineered Wound Healing	Q4178	FlowerAmniopatch, per square centimeter	NO
BioEngineered Wound Healing	Q4179	FlowerDerm, per square centimeter	NO
BioEngineered Wound Healing	Q4180	Revita, per square centimeter	NO

BioEngineered Wound Healing	Q4181	Amnio Wound, per square centimeter	NO
BioEngineered Wound Healing	Q4182	Transcyte, per sq. cm	NO
BioEngineered Wound Healing	Q4183	Surgigraft, per square centimeter	NO
BioEngineered Wound Healing	Q4184	Cellesta or Cellesta Duo, per square centimeter	NO
BioEngineered Wound Healing	Q4185	Cellesta flowable amnion (25 mg per cc); per 0.5 cc	NO
BioEngineered Wound Healing	Q4186	EpiFix, per square centimeter	YES
BioEngineered Wound Healing	Q4187	EpiCord, per square centimeter [for diabetic foot ulcers only]	YES
BioEngineered Wound Healing	Q4188	Amnioarmor, per square centimeter	NO
BioEngineered Wound Healing	Q4189	Artacent AC, 1 mg	NO
BioEngineered Wound Healing	Q4190	Artacent AC, per square centimeter	NO
BioEngineered Wound Healing	Q4191	Restorin, per square centimeter	NO
BioEngineered Wound Healing	Q4192	Restorin, 1 cc	NO
BioEngineered Wound Healing	Q4193	Coll-e-derm, per square centimeter	YES
BioEngineered Wound Healing	Q4194	Novachor, per square centimeter	NO
BioEngineered Wound Healing	Q4195	Puraply, per square centimeter	NO
BioEngineered Wound Healing	Q4196	PuraPly AM, per square centimeter	NO
BioEngineered Wound Healing	Q4197	PuraPly XT, per square centimeter	YES
BioEngineered Wound Healing	Q4198	Genesis amniotic membrane, per square centimeter	NO
BioEngineered Wound Healing	Q4199	Cygnus matrix, per square centimeter	NO
BioEngineered Wound Healing	Q4200	Skin TE, per square centimeter	YES
BioEngineered Wound Healing	Q4201	Matrion, per square centimeter	NO
BioEngineered Wound Healing	Q4202	Keroxx (2.5g/cc), 1cc	YES
BioEngineered Wound Healing	Q4203	Derma-gide, per square centimeter	YES
BioEngineered Wound Healing	Q4204	Xwrap, per square centimeter	NO
BioEngineered Wound Healing	Q4205	Membrane graft or Membrane wrap, per square centimeter	NO

BioEngineered Wound Healing	Q4206	Fluid flow or Fluid GF, 1 cc	NO
BioEngineered Wound Healing	Q4208	Novafix, per square centimeter	NO
BioEngineered Wound Healing	Q4209	Surgraft, per square centimeter	NO
BioEngineered Wound Healing	Q4210	Axolotl graft or Axolotl dualgraft, per square centimeter	NO
BioEngineered Wound Healing	Q4211	Amnion bio or AxoBioMembrane, per square centimeter	NO
BioEngineered Wound Healing	Q4212	AlloGen, per cc	NO
BioEngineered Wound Healing	Q4213	Ascent, 0.5 mg	NO
BioEngineered Wound Healing	Q4214	Cellesta cord, per square centimeter	NO
BioEngineered Wound Healing	Q4215	Axolotl Ambient or Axolotl Cryo, 0.1 mg	NO
BioEngineered Wound Healing	Q4216	Artacent cord, per square centimeter	NO
BioEngineered Wound Healing	Q4217	Woundfix, BioWound, Woundfix Plus, BioWound Plus, Woundfix Xplus or BioWound Xplus, per square centimeter	NO
BioEngineered Wound Healing	Q4218	Surgicord, per square centimeter	NO
BioEngineered Wound Healing	Q4219	SurgiGRAFT-Dual, per square centimeter	NO
BioEngineered Wound Healing	Q4220	BellaCell HD or Surederm, per square centimeter	NO
BioEngineered Wound Healing	Q4221	Amniowrap2, per square centimeter	NO
BioEngineered Wound Healing	Q4222	Progenamatrix, per square centimeter	NO
BioEngineered Wound Healing	Q4224	Human health factor 10 amniotic patch (hhf10-p), per square centimeter	NO
BioEngineered Wound Healing	Q4225	Amniobind, per square centimeter	NO
BioEngineered Wound Healing	Q4226	MyOwn Skin, includes harvesting and preparation procedures, per square centimeter	YES
BioEngineered Wound Healing	Q4227	AmnioCore, per square centimeter	NO
BioEngineered Wound Healing	Q4229	Cogenex amniotic membrane, per square centimeter	NO
BioEngineered Wound Healing	Q4230	Cogenex flowable amnion, per 0.5 cc	NO
BioEngineered Wound Healing	Q4231	Corplex P, per cc	NO
BioEngineered Wound Healing	Q4232	Corplex, per square centimeter	NO

BioEngineered Wound Healing	Q4233	SurFactor or NuDyn, per 0.5 cc	NO
BioEngineered Wound Healing	Q4234	XCellerate, per square centimeter	NO
BioEngineered Wound Healing	Q4235	Amniorepair or AltiPly, per square centimeter	NO
Bioengineered Wound Healing	Q4236	CarePATCH, per square centimeter	NO
BioEngineered Wound Healing	Q4237	Cryo-cord, per square centimeter	NO
BioEngineered Wound Healing	Q4238	Derm-Maxx, per square centimeter	NO
BioEngineered Wound Healing	Q4239	Amnio-Maxx or Amnio-Maxx Lite, per square centimeter	NO
BioEngineered Wound Healing	Q4240	CoreCyte, for topical use only, per 0.5 cc	NO
BioEngineered Wound Healing	Q4241	PolyCyte, for topical use only, per 0.5 cc	NO
BioEngineered Wound Healing	Q4242	AmnioCyte Plus, per 0.5 cc	NO
BioEngineered Wound Healing	Q4244	Procenta, per 200 mg	YES
BioEngineered Wound Healing	Q4245	Amniotext, per cc	NO
BioEngineered Wound Healing	Q4246	Coretext or Protex, per cc	NO
BioEngineered Wound Healing	Q4247	Amniotext patch, per square centimeter	NO
BioEngineered Wound Healing	Q4248	Dermacyte Amniotic Membrane Allograft, per square centimeter	NO
BioEngineered Wound Healing	Q4249	Amniply, for topical use only, per square centimeter	NO
BioEngineered Wound Healing	Q4250	AmnioAMP-MP, per square centimeter	NO
BioEngineered Wound Healing	Q4251	Vim, per sq cm	YES
BioEngineered Wound Healing	Q4252	Vendaje, per sq cm	YES
BioEngineered Wound Healing	Q4253	Zenith Amniotic Membrane, per sq cm	YES
BioEngineered Wound Healing	Q4254	Novafix DL, per square centimeter	YES
BioEngineered Wound Healing	Q4255	REGUaRD, for topical use only, per square centimeter	NO
BioEngineered Wound Healing	Q4256	MLG-complete, per square centimeter	NO
BioEngineered Wound Healing	Q4257	Relese, per square centimeter	NO
BioEngineered Wound Healing	Q4258	Enverse, per square centimeter	NO

Bioengineered Wound Healing	Q4259	Celera dual layer or celera dual membrane, per square centimeter	NO
Bioengineered Wound Healing	Q4260	Signature Apatch, per square centimeter	NO
Bioengineered Wound Healing	Q4261	TAG, per square centimeter	NO
Bioengineered Wound Healing	Q4262	Dual Layer Impax Membrane, per square centimeter	NO
Bioengineered Wound Healing	Q4263	SurGraft TL, per square centimeter	NO
Bioengineered Wound Healing	Q4264	Cocoon membrane, per square centimeter	NO
Bioengineered Wound Healing	Q4265	NeoStim TL, per square centimeter	NO
Bioengineered Wound Healing	Q4266	NeoStim membrane, per square centimeter	NO
Bioengineered Wound Healing	Q4267	NeoStim DL, per square centimeter	YES
Bioengineered Wound Healing	Q4268	SurGraft FT, per square centimeter	YES
Bioengineered Wound Healing	Q4269	SurGraft XT, per square centimeter	NO
Bioengineered Wound Healing	Q4270	Complete SL, per square centimeter	NO
Bioengineered Wound Healing	Q4271	Complete FT, per square centimeter	NO
Bioengineered Wound Healing	Q4272	Esano A, per square centimeter	NO
Bioengineered Wound Healing	Q4273	Esano AAA, per square centimeter	NO
Bioengineered Wound Healing	Q4274	Esano AC, per square centimeter	NO
Bioengineered Wound Healing	Q4275	Esano ACA, per square centimeter	NO
Bioengineered Wound Healing	Q4276	Orion, per square centimeter	NO
Bioengineered Wound Healing	Q4277	WoundPlus membrane or E-graft, per square centimeter	NO
Bioengineered Wound Healing	Q4278	EPIEFFECT, per square centimeter	NO
Bioengineered Wound Healing	Q4279	Vendaje AC, per square centimeter	NO
Bioengineered Wound Healing	Q4280	Xcell amnio matrix, per square centimeter	NO
Bioengineered Wound Healing	Q4281	Barrera SL or Barrera DL, per square centimeter	NO
Bioengineered Wound Healing	Q4282	Cygnus Dual, per square centimeter	NO
Bioengineered Wound Healing	Q4283	Biovance Tri-layer or Biovance 3L, per square centimeter	NO

Bioengineered Wound Healing	Q4284	DermaBind SL, per square centimeter	NO
Bioengineered Wound Healing	Q4285	NuDYN DL or NuDYN DL mesh, per square centimeter	NO
Bioengineered Wound Healing	Q4286	NuDYN SL or NuDYN SLW, per square centimeter	NO
Bioengineered Wound Healing	Q4287	DermaBind DL, per square centimeter	NO
Bioengineered Wound Healing	Q4288	DermaBind CH, per square centimeter	NO
Bioengineered Wound Healing	Q4289	RevoShield + Amniotic Barrier, per square centimeter	NO
Bioengineered Wound Healing	Q4290	Membrane Wrap-Hydro, per square centimeter	NO
Bioengineered Wound Healing	Q4291	Lamellas XT, per square centimeter	NO
Bioengineered Wound Healing	Q4292	Lamellas, per square centimeter	NO
Bioengineered Wound Healing	Q4293	Acesso DL, per square centimeter	NO
Bioengineered Wound Healing	Q4294	Amnio Quad-Core, per square centimeter	NO
Bioengineered Wound Healing	Q4295	Amnio Tri-Core amniotic, per square centimeter	NO
Bioengineered Wound Healing	Q4296	Rebound Matrix, per square centimeter	NO
Bioengineered Wound Healing	Q4297	Emerge Matrix, per square centimeter	NO
Bioengineered Wound Healing	Q4298	AmnioCore Pro, per square centimeter	NO
Bioengineered Wound Healing	Q4299	AmniCore Pro+, per square centimeter	NO
Bioengineered Wound Healing	Q4300	Acesso TL, per square centimeter	NO
Bioengineered Wound Healing	Q4301	Activate Matrix, per square centimeter	NO
Bioengineered Wound Healing	Q4302	Complete ACA, per square centimeter	NO
Bioengineered Wound Healing	Q4303	Complete AA, per square centimeter	NO
Bioengineered Wound Healing	Q4304	Grafix Plus, per square centimeter	NO
Bioengineered Wound Healing	Q4305	American amnion ac tri-layer, per square centimeter	NO
Bioengineered Wound Healing	Q4306	American amnion ac, per square centimeter	NO
Bioengineered Wound Healing	Q4307	American amnion, per square centimeter	NO
Bioengineered Wound Healing	Q4308	Sanopellis, per square centimeter	NO

Bioengineered Wound Healing	Q4309	Via matrix, per square centimeter	NO
Durable Medical Equipment	Q4310	Procenta, per 100 mg	NO
Home Health	Q5001	Hospice or home health care provided in patient's home/residence	YES
Home Health	Q5002	Hospice or home health care provided in assisted living facility	YES
Hospice	Q5006	HOSPICE IN HOSPICE FACILITY	YES
Hospice	Q5009	Hospice or home health care provided in place not otherwise specified (NOS)	YES
Pharmacy	Q5101	Filgrastim-sndz (Zarxio)	YES
Pharmacy	Q5101	Filgrastim-sndz (Zarxio)	YES
Pharmacy	Q5102	Injection, infliximab, biosimilar, 10 mg	YES
Pharmacy	Q5102	Injection, infliximab, biosimilar, 10 mg	YES
Pharmacy	Q5103	Infliximab-dyyb (Inflectra)	YES
Pharmacy	Q5103	Infliximab-dyyb (Inflectra)	YES
Pharmacy	Q5104	Infliximab-abda (Renflexis)	YES
Pharmacy	Q5104	Infliximab-abda (Renflexis)	YES
Pharmacy	Q5105	Epoetin alfa-epbx (Retacrit)	YES
Pharmacy	Q5105	Epoetin alfa-epbx (Retacrit)	YES
Pharmacy	Q5106	Epoetin alfa-epbx (Retacrit)	YES
Pharmacy	Q5106	Epoetin alfa-epbx (Retacrit)	YES
Pharmacy	Q5107	Mvasi (bevacizumab-awwb)	YES
Pharmacy	Q5107	Mvasi (bevacizumab-awwb)	YES
Pharmacy	Q5108	Pegfilgrastim-jmdb (Fulphila)	YES
Pharmacy	Q5108	Pegfilgrastim-jmdb (Fulphila)	YES
Pharmacy	Q5109	Infliximab-qbtx (Ixifi)	YES
Pharmacy	Q5109	Infliximab-qbtx (Ixifi)	YES
Pharmacy	Q5110	Filgrastim-aafi (Nivestym)	YES
Pharmacy	Q5110	Filgrastim-aafi (Nivestym)	YES
Pharmacy	Q5111	Pegfilgrastim-cbqv (Udenyca)	YES
Pharmacy	Q5111	Pegfilgrastim-cbqv (Udenyca)	YES
Pharmacy	Q5112	Ontruzant (trastuzumab-dttb)	YES
Pharmacy	Q5112	Ontruzant (trastuzumab-dttb)	YES
Pharmacy	Q5113	Herzuma (trastuzumab-pkrb)	YES
Pharmacy	Q5113	Herzuma (trastuzumab-pkrb)	YES
Pharmacy	Q5114	Ogivri (trastuzumab-dkst)	YES
Pharmacy	Q5114	Ogivri (trastuzumab-dkst)	YES
Pharmacy	Q5115	Tituximab-abbs (Truxima)	YES
Pharmacy	Q5115	Tituximab-abbs (Truxima)	YES
Pharmacy	Q5116	Trazimera (trastuzumab-qyyp)	YES
Pharmacy	Q5116	Trazimera (trastuzumab-qyyp)	YES
Pharmacy	Q5117	Injection, trastuzumab-anns, biosimilar,	YES
Pharmacy	Q5117	Injection, trastuzumab-anns, biosimilar,	YES
Pharmacy	Q5118	Zirabev (bevacizumab-bvzr)	YES
Pharmacy	Q5118	Zirabev (bevacizumab-bvzr)	YES
Pharmacy	Q5119	Rituximab-pvvr (Ruxience)	YES
Pharmacy	Q5119	Rituximab-pvvr (Ruxience)	YES
Pharmacy	Q5120	Pegfilgrastim-bmez, biosimilar (Ziextenzo)	YES
Pharmacy	Q5120	Pegfilgrastim-bmez, biosimilar (Ziextenzo)	YES

Pharmacy	Q5121	Infliximab-axxq (Avsola)	YES
Pharmacy	Q5121	Infliximab-axxq (Avsola)	YES
Pharmacy	Q5122	Immune globulin (Nyvepria)	YES
Pharmacy	Q5122	Immune globulin (Nyvepria)	YES
Pharmacy	Q5123	Rituximab-arrx (RIABNI)	YES
Pharmacy	Q5123	Rituximab-arrx (RIABNI)	YES
Pharmacy	Q5124	Ranibizumab-nuna (Byooviz)	YES
Pharmacy	Q5124	Ranibizumab-nuna (Byooviz)	YES
Pharmacy	Q5125	Filgrastim-ayow (Releuko)	YES
Pharmacy	Q5125	Filgrastim-ayow (Releuko)	YES
Pharmacy	Q5126	Bevacizumab-maly (Alymsys)	YES
Pharmacy	Q5126	Bevacizumab-maly (Alymsys)	YES
Pharmacy	Q5127	Pegfilgrastim-fpgk (Stimufend)	YES
Pharmacy	Q5127	Pegfilgrastim-fpgk (Stimufend)	YES
Pharmacy	Q5128	Ranibuzumab-cqrn (Cimerli)	YES
Pharmacy	Q5128	Ranibuzumab-cqrn (Cimerli)	YES
Pharmacy	Q5129	Bevacizumab-adcd (Vegzelma)	YES
Pharmacy	Q5129	Bevacizumab-adcd (Vegzelma)	YES
Pharmacy	Q5130	Pegfilgrastim-pbbk (Fynetra)	YES
Pharmacy	Q5130	Pegfilgrastim-pbbk (Fynetra)	YES
Pharmacy	Q5133	INJECTION, TOCILIZUMAB-BAVI (TOFIDENCE), BIOSIMILAR, 1 MG	YES
Pharmacy	Q5134	INJECTION, NATALIZUMAB-SZTN (TYRUKO), BIOSIMILAR, 1 MG	YES
Pharmacy	Q9977	COMPOUNDED DRUG NOT OTHERWISE CLASSIFIED	YES
Pharmacy	Q9977	COMPOUNDED DRUG NOT OTHERWISE CLASSIFIED	YES
Pharmacy	S0013	Spravato (esketamine)	YES
Pharmacy	S0013	Spravato (esketamine)	YES
Pharmacy	S0023	INJECTION, CIMETIDINE HYDROC 300MG	YES
Pharmacy	S0040	INJECTION, TICARCILLIN DISOD 3.1GM	YES
Pharmacy	S0126	INJECTION, FOLLITROPIN ALFA, 75 IU	YES
Pharmacy	S0126	INJECTION, FOLLITROPIN ALFA, 75 IU	YES
Pharmacy	S0142	COLISTIMETHATE INH SOL MG	YES
Pharmacy	S0166	INJECTION, OLANZAPINE, 2.5 MG	YES
Pharmacy	S0166	INJECTION, OLANZAPINE, 2.5 MG	YES
Pharmacy	S0169	CALCITROL, 0.25 MICROGRAM	YES
Pharmacy	S0169	CALCITROL, 0.25 MICROGRAM	YES
Pharmacy	S0189	TESTOSTERONE PELLETT 75 MG	YES
Durable Medical Equipment	S1030	Continuous non-invasive glucose monitoring device, purchase	NO
Durable Medical Equipment	S1031	Continuous non-invasive glucose monitoring device, rental, including sensor, sensor replacement, and download to monitor	NO
Durable Medical Equipment	S1034	ARTIF PANCREAS DEVC SYS THAT CMNCT W/ALL DEVC	YES
Durable Medical Equipment	S1035	SENSOR; INVASV DSPBL USE ARTIF PANCREAS DEVC SYS	YES
Durable Medical Equipment	S1040	Cranial orthotics - cranial remolding orthosis, pediatric, rigid, with soft interface material, custom fabricated, includes fitting and adjustment(s)	YES
Surgical - Misc.	S1091	Stent, non-coronary, temporary, with delivery system (Propel)	NO
Transplant	S2053	Transplantation of small intestine and liver allografts	YES
Transplant	S2054	Transplantation of multivisceral organs	YES

Transplant	S2055	Harvesting of donor multivisceral organs, with preparation and maintenance of allografts; from cadaver donor	YES
Transplant	S2060	Lobar lung transplantation	YES
Transplant	S2061	Donor lobectomy (lung) for transplantation, living donor	YES
Transplant	S2065	Simultaneous pancreas kidney transplantation	YES
Surgical – Breast	S2066	Breast reconstruction with gluteal artery perforator (GAP) flap, including harvesting of the flap, microvascular transfer, closure of donor site and shaping the flap into a breast, unilateral	Yes- if realted to womens health law
Surgical – Breast	S2067	Breast reconstruction of a single breast with "stacked" deep inferior epigastric perforator (DIEP) flap(s) and/or gluteal artery perforator (GAP) flap(s), including harvesting of the flap(s), microvascular transfer, closure of donor site(s) and shaping the flap into a breast, unilateral	Yes- if realted to womens health law
Surgical – Breast	S2068	Breast reconstruction with deep inferior epigastric perforator (DIEP) flap or superficial inferior epigastric artery (SIEA) flap, including harvesting of the flap, microvascular transfer, closure of donor site and shaping the flap into a breast, unilateral	Yes- if realted to womens health law
Surgical – Maxillofacial	S2080	Laser-assisted uvulopalatoplasty (LAUP)	NO
Surgical – Misc.	S2095	Transcatheter occlusion or embolization for tumor destruction, percutaneous, any method, using yttrium- 90 microspheres	NO
Transplant	S2102	Islet cell tissue transplant from pancreas, allogeneic	YES
Transplant	S2103	Adrenal tissue transplant to brain	YES
Investigational Potential	S2107	Adoptive immunotherapy, i.e., development of specific anti-tumor reactivity (e.g. tumor-infiltrating lymphocyte therapy) per course of treatment	NO
Surgical – Musculoskeletal	S2112	Arthroscopy, knee, surgical for harvesting of cartilage (chondrocyte cells)	NO
Surgical – Misc.	S2117	Arthroereisis, subtalar	NO
Surgical – Musculoskeletal	S2118	TOTAL HIP RESURFACING	YES
Transplant	S2140	Cord blood harvesting for transplantation; allogeneic	YES
Transplant	S2142	Cord blood-derived stem cell transplantation, allogeneic	YES
Transplant	S2150	Bone marrow or blood-derived peripheral stem cells harvesting, transplantation, allogeneic or autologous, including pheresis...	YES
Transplant	S2152	SOLID ORGAN TRANSPL PKG	YES
Surgical – Misc.	S2202	Echosclerotherapy	YES
Surgical – Misc.	S2230	Implantation of magnetic component of semi- implantable hearing device on ossicles in middle ear	NO
Surgical – Misc.	S2235	Implantation of auditory brain stem implant	YES
Surgical – Misc.	S2300	Arthroscopy, shoulder, surgical; with thermally-induced capsulorrhaphy	YES
Surgical – Misc.	S2348	Decompression procedure, percutaneous, of nucleus pulposus of intervertebral disc, using radiofrequency energy, single or multiple levels, lumbar [DISC nucleoplasty]	NO
Surgical – Fetal	S2400	Repair, congenital diaphragmatic hernia in the fetus using temporary tracheal occlusion, procedure performed in utero	YES

Surgical - Fetal	S2401	Repair, urinary tract obstruction in the fetus, procedure performed in utero	YES
Surgical - Fetal	S2402	Repair, congenital cystic adenomatoid malformation in the fetus, procedure performed in utero	YES
Surgical - Fetal	S2403	Repair, extralobar pulmonary sequestration in the fetus, procedure performed in utero	YES
Surgical - Fetal	S2404	Repair, myelomeningocele in the fetus, procedure performed in utero	YES
Surgical - Fetal	S2405	Repair of sacrococcygeal teratoma in the fetus, procedure performed in utero	YES
Surgical - Fetal	S2409	Repair, congenital malformation of fetus, procedure performed in utero, not otherwise classified [when describing a procedure meeting medically necessary criteria]	YES
Genetic Testing	S3650	Saliva test, hormone level; during menopause	NO
Advanced Imaging	S3722	Dose optimization by area under the curve (auc) analysis, for infusional 5-fluorouracil	NO
Genetic Testing	S3800	Genetic testing for amyotrophic lateral sclerosis (ALS)	YES
Genetic Testing	S3840	DNA analysis for germline mutations of the RET proto-oncogene for susceptibility to multiple endocrine neoplasia type 2	YES
Genetic Testing	S3841	Genetic testing for retinoblastoma	YES
Genetic Testing	S3842	Genetic testing for von Hippel-Lindau disease	YES
Genetic Testing	S3844	DNA analysis of the connexin 26 gene (gjb2) for susceptibility to congenital, profound deafness	YES
Genetic Testing	S3845	Genetic testing for alpha-thalassemia	YES
Genetic Testing	S3846	Genetic testing for hemoglobin E beta-thalassemia	YES
Genetic Testing	S3849	Genetic testing for Niemann-Pick diseases	YES
Genetic Testing	S3850	Genetic testing for sickle cell anemia	YES
Genetic Testing	S3852	DNA analysis for APOE epsilon 4 allele for susceptibility to Alzheimer's disease	NO
Genetic Testing	S3853	Genetic testing for myotonic muscular dystrophy	YES
Genetic Testing	S3854	Gene expression profiling panel for use in the management of breast cancer treatment	YES
Genetic Testing	S3861	Genetic testing, sodium channel, voltage-gated, type V, alpha subunit (SCN5A) and variants for suspected Brugada syndrome	YES
Genetic Testing	S3865	Comprehensive gene sequence analysis for hypertrophic cardiomyopathy	YES
Genetic Testing	S3866	Genetic analysis for a specific gene mutation for hypertrophic cardiomyopathy (HCM) in an individual with a known HCM mutation in the family	YES
Genetic Testing	S3870	Comparative genomic hybridization (CGH) microarray testing for developmental delay, autism spectrum disorder and/or intellectual disability	YES
Investigational Potential	S3900	Surface electromyography (EMG)	NO
Infertility	S4015	COMPLETE IN VITRO FERTILIZATION CYCLE, N	YES
Infertility	S4021	IN VITRO FERTILIZATION PROCEDURE CANCEL	YES
Home Health	S5035	Home infusion, therapy, routine service of infusion device (e.g., pump maintenance)	YES
Pharmacy	S5035	HIT ROUTINE DEVICE MAINT	YES
Home Health	S5036	Home infusion therapy, repair of infusion device (e.g., pump repair)	YES
Pharmacy	S5036	HIT DEVICE REPAIR	YES
Behavioral Health	S5108	Home care training to home care client, per 15 minutes	
Home Health	S5109	Home care training to home care client; per session	

Behavioral Health	S5110	Home care training, family; per 15 minutes	
Home Health	S5111	Home care training, family	
Home Health	S5115	Home care training, non-family	
Home Health	S5116	Home care training, non-family	
Home Health	S5180	Home health respiratory therapy	YES
Home Health	S5181	Home health respiratory therapy	YES
Durable Medical Equipment	S5199	PERSONAL CARE ITEM, NOS, EACH	
Home Health	S5497	Home infusion therapy, catheter care maintenance and supplies	YES
Home Health	S5498	Home infusion therapy, catheter care maintenance and supplies	YES
Home Health	S5501	Home infusion therapy, catheter care maintenance and supplies	YES
Home Health	S5502	Home infusion therapy, catheter care maintenance and supplies	YES
Home Health	S5517	Home infusion therapy, catheter care maintenance and supplies	YES
Home Health	S5518	Home infusion therapy, catheter care maintenance and supplies	YES
Pharmacy	S5518	HIT CATH REPAIR KIT	YES
Home Health	S5520	Home infusion therapy, catheter care maintenance and supplies	YES
Pharmacy	S5520	HIT PICC INSERT KIT	YES
Home Health	S5521	Home infusion therapy, catheter care maintenance and supplies	YES
Pharmacy	S5521	HIT MIDLINE CATH INSERT KIT	YES
Home Health	S5522	Home infusion therapy, catheter care maintenance and supplies	YES
Pharmacy	S5522	HIT PICC INSERT NO SUPP	YES
Home Health	S5523	Home infusion therapy, catheter care maintenance and supplies	YES
Pharmacy	S5523	HIP MIDLINE CATH INSERT KIT	YES
Radiation	S8030	Scleral application of tantalum ring(s) for localization of lesions for proton beam therapy	YES
Advanced Imaging	S8035	Magnetic source imaging	YES
Sleep Disorder Management	S8040	Topographic brain mapping [for evaluation of a sleep disorder]	NO
Advanced Imaging	S8080	Scintimammography (radioimmunoscinigraphy of the breast), unilateral, including supply of radiopharmaceutical	NO
Advanced Imaging	S8092	Electron beam computed tomography (also known as ultrafast CT, cine CT)	YES
Durable Medical Equipment	S8130	Interferential current stimulator, 2 channel	NO
Durable Medical Equipment	S8131	Interferential current stimulator, 4 channel	NO
Durable Medical Equipment	S8189	TRACH SUPPLY NOC	NO
Durable Medical Equipment	S8930	Electrical stimulation of auricular acupuncture points; each 15 minutes of personal one-on-one contact with the patient	NO
Investigational Potential	S9056	Coma stimulation, per diem	YES

Home Health	S9061	Home administration of aerosolized drug therapy (e.g., pentamidine); per diem	YES
Investigational Potential	S9090	Vertebral axial decompression, per session	NO
Home Health	S9097	Home visit for wound care	YES
Home Health	S9098	HOME PHOTOTHERAPY VISIT	YES
Home Health	S9122	Home health aide or certified nurse assistant, providing care in the home; per hour	YES
Home Health	S9123	Nursing care in the home ; by registered nurse, per hour (use for general nursing care only, not to be used when CPT codes 99500-99602 can be used)	YES
Home Health	S9124	Nursing care in the home; by licensed practical nurse, per hour	YES
Home Health	S9126	HOSPICE CARE, IN THE HOME, P	YES
Home Health	S9127	Social work visit, in the home, per diem	YES
Home Health	S9128	Speech therapy, in the home, per diem	YES
Home Health	S9129	Occupational therapy, in the home, per diem	YES
Home Health	S9131	Physical therapy, in the home, per diem	YES
Home Health	S9208	HOME MGMT PRETERM LABOR	YES
Home Health	S9209	Home management of complications of pregnancy	YES
Home Health	S9211	Home management of complications of pregnancy	YES
Home Health	S9212	Home management of complications of pregnancy	YES
Home Health	S9213	Home management of complications of pregnancy	YES
Home Health	S9214	Home management of complications of pregnancy	YES
Home Health	S9325	Home infusion therapy, pain management infusion, per diem	YES
Home Health	S9326	Home infusion therapy, pain management infusion, per diem	YES
Home Health	S9327	Home infusion therapy, pain management infusion, per diem	YES
Home Health	S9328	Home infusion therapy, pain management infusion, per diem	YES
Home Health	S9329	Home infusion therapy, chemotherapy infusion, per diem (do not use this code with S9330 or S9331)	YES
Home Infusion	S9330	Home infusion therapy, chemotherapy infusion, per diem	YES
Home Health	S9331	Home infusion therapy, chemotherapy infusion, per diem	YES
Home Health	S9335	HT HEMODIALYSIS DIEM	YES
Home Health	S9336	Home infusion therapy, continuous anticoagulant infusion therapy (e.g., Heparin); per diem	YES
Home Health	S9338	Home infusion therapy, immunotherapy; per diem	YES
Home Health	S9339	HIT PERITON DIALYSIS DIEM	YES
Home Health	S9340	HIT ENTERAL PER DIEM	YES
Home Health	S9341	HIT ENTERAL GRAV DIEM	YES
Home Health	S9342	HIT ENTERAL PUMP DIEM	YES
Home Health	S9343	HIT ENTERAL BOLUS NURS	YES
Home Health	S9345	Home infusion therapy, anti-hemophilic agent infusion therapy (e.g., factor VIII); per diem	YES
Home Health	S9346	Home infusion therapy, alpha-1-proteinase inhibitor (e.g., Prolastin); per diem	YES
Home Health	S9347	HIT LONGTERM INFUSION DIEM	YES

Home Health	S9348	Home infusion therapy, sympathomimetic/inotropic agent infusion therapy (e.g., Dobutamine); per diem	YES
Home Health	S9349	HIT TOCOLYSIS DIEM	YES
Home Health	S9351	Home infusion therapy, continuous antiemetic infusion therapy; per diem	YES
Home Health	S9353	HIT CONT INSULIN DIEM	YES
Home Infusion	S9355	Home infusion therapy, chelation therapy; administrative services, care coordination, and all necessary supplies and equipment, per diem	YES
Home Health	S9357	Home infusion therapy, enzyme replacement intravenous therapy (e.g., Imiglucerase); per diem	YES
Home Health	S9359	HIT ANTI-TNF PER DIEM	
Home Health	S9361	Home infusion therapy, diuretic intravenous therapy; per diem	YES
Home Health	S9363	Home infusion therapy, antispasmodic therapy; per diem	YES
Home Infusion	S9364	Home infusion therapy, total parenteral nutrition (TPN); administrative services, professional pharmacy services, care coordination, and all necessary supplies and equipment including standard TPN formula (lipids, specialty amino acid formulas, drugs other than in standard formula, and nursing visits coded separately) per diem	YES
Home Infusion	S9365	Home infusion therapy, total parenteral nutrition (TPN); one liter per day, administrative services, professional pharmacy services, care coordination, and all necessary supplies and equipment including standard TPN formula (lipids, specialty amino acid formulas, drugs other than in standard formula, and nursing visits coded separately) per diem	YES
Home Infusion	S9366	Home infusion therapy, total parenteral nutrition (TPN); more than one liter but no more than two liters per day, administrative services, professional pharmacy services, care coordination, and all necessary supplies and equipment including standard TPN formula (lipids, specialty amino acid formulas, drugs other than in standard formula, and nursing visits coded separately) per diem	YES
Home Infusion	S9367	Home infusion therapy, total parenteral nutrition (TPN); more than two liters but no more than three liters per day, administrative services, professional pharmacy services, care coordination, and all necessary supplies and equipment including standard TPN formula (lipids, specialty amino acid formulas, drugs other than in standard formula, and nursing visits coded separately) per diem	YES
Home Infusion	S9368	Home infusion therapy, total parenteral nutrition (TPN); more than three liters per day, administrative services, professional pharmacy services, care coordination, and all necessary supplies and equipment including standard TPN formula (lipids, specialty amino acid formulas, drugs other than in standard formula, and nursing visits coded separately) per diem	YES
Home Health	S9370	Home therapy, intermittent antiemetic injection therapy; per diem	YES
Home Health	S9372	Home therapy, intermittent anticoagulant injection therapy (e.g., Heparin), per diem	YES
Home Health	S9373	Home infusion therapy, hydration therapy; per diem	YES
Home Health	S9374	Home infusion therapy, hydration therapy; per diem	YES
Home Health	S9375	Home infusion therapy, hydration therapy; per diem	YES
Home Health	S9376	Home infusion therapy, hydration therapy; per diem	YES

Home Health	S9377	Home infusion therapy, hydration therapy; per diem	YES
Home Health	S9379	Home infusion therapy, infusion therapy not otherwise classified; per diem	YES
Home Health	S9381	HIT HIGH RISK/ESCORT	
Home Health	S9460	DIABETIC MANAGEMENT PROGRAM,	YES
Home Health	S9474	ENTEROSTOMAL THERAPY BY A RE	YES
Behavioral Health	S9480	INTENSIVE OUTPATIENT PSYCHIA	YES
Home Health	S9484	CRISIS INTERVENTION PER HOUR	
Home Health	S9490	Home infusion therapy, corticosteroid infusion; per diem	YES
Home Health	S9494	Home infusion therapy, antibiotic, antiviral, or antifungal therapy; administrative services, professional pharmacy services, care coordination, and all necessary supplies and equipment, per diem	YES
Home Health	S9497	Home infusion therapy, antibiotic, antiviral, or antifungal therapy; once every 3 hours	YES
Home Health	S9500	Home infusion therapy, antibiotic, antiviral, or antifungal therapy; once every 24 hours	YES
Home Health	S9501	Home infusion therapy, antibiotic, antiviral, or antifungal therapy, once every 12 hours	YES
Home Health	S9502	Home infusion therapy, antibiotic, antiviral, or antifungal therapy, once every 8 hours	YES
Home Health	S9503	Home infusion therapy, antibiotic, antiviral, or antifungal therapy, once every 6 hours	YES
Home Health	S9504	Home infusion therapy, antibiotic, antiviral, or antifungal therapy, once every 4 hours	YES
Home Health	S9529	VENIPUNCTURE HOME/SNF	YES
Home Health	S9537	HT HEM HORM INJ DIEM	YES
Home Health	S9538	Home transfusion of blood product(s); per diem	YES
Home Health	S9542	Home injectable therapy, not otherwise classified; per diem	YES
Home Health	S9558	HT INJ GROWTH HORM DIEM	YES
Home Health	S9559	HIT INJ INTERFERON DIEM	YES
Pharmacy	S9560	Home injectable therapy; hormonal therapy (e.g., leuprolide, goserelin), including administrative services, professional pharmacy services, care coordination, and all necessary supplies and equipment (drugs and nursing visits coded separately), per diem	YES
Pharmacy	S9560	Home injectable therapy; hormonal therapy (e.g., leuprolide, goserelin), including administrative services, professional pharmacy services, care coordination, and all necessary supplies and equipment (drugs and nursing visits coded separately), per diem	YES
Home Health	S9562	HT INJ PALIVIZUMAB DIEM	YES
Home Health	S9563	HOME INJ THERAPY, IMMUNOTHERAPY, INCLUDING ADMIN SVCS, PROFESS PHARMACY SVCS, CARE COORD, ALL NECESSARY SUPPLIES AND EQUIP, PER DIEM	YES
Pharmacy	S9563	HOME INJ THERAPY, IMMUNOTHERAPY, INCLUDING ADMIN SVCS, PROFESS PHARMACY SVCS	YES
Home Health	S9590	Home therapy, irrigation therapy (e.g., sterile irrigation of an organ or anatomical cavity); per diem	YES
Home Health	S9810	Home therapy, professional pharmacy services, per hour	YES
Transportation	S9960	Ambulance service, conventional air services, nonemergency transport, one way (fixed wing)	YES

Surgical - Spine	62351	IMPLANT SPINAL CATH W LAMINECT	YES
Surgical - Spine	62355	REMOVE SPINAL CANAL CATHETER	YES
Surgical - Spine	62360	INSERT SPINE INFUSN DEVICE,SUBCUT	YES
Surgical - Spine	62361	INSERT/ PREPLACE INFUSN PUMP,NONPROGRAM	YES
Surgical - Spine	62362	INSERT/ REPLACE INFUSN PUMP,PROGRAMMABLE	YES
Surgical - Spine	62365	REMOVE INFUSN DEVICE/PUMP	YES
Surgical - Spine	63001	LAM W/O FACETEC FORAMOT/DSKC 1/2 VRT SEG, CERVICAL	YES
Surgical - Spine	63003	LAM W/O FACETEC FORAMOT/DSKC 1/2 VRT SEG, THORACIC	YES
Surgical - Spine	63005	LAM W/O FACETEC FORAMOT/DSKC 1/2 VRT SEG, LUMBAR	YES
Surgical - Spine	63011	LAM W/O FACETEC FORAMOT/DSKC 1/2 VRT SEG, SACRAL	YES
Surgical - Spine	63012	LAMINECTOMY,FACETECTOMY,LUMBAR	YES
Surgical - Spine	63015	LAMINECTOMY,>2 SGMT,CERVICAL	YES
Surgical - Spine	63016	LAMINECTOMY,>2 SGMT,THORACIC	YES
Surgical - Spine	63017	LAMINECTOMY,>2 SGMT,LUMBAR	YES
Surgical - Spine	63020	EXCIS CERV DISK,ONE LEVEL	YES
Surgical - Spine	63030	LAMINOTOMY,LUMBAR DISK,1 INTRSP	YES
Surgical - Spine	63035	EXCIS EACH ADDNL SPINAL DISK	YES
Surgical - Spine	63040	LAMINOTOMY	YES
Surgical - Spine	63042	REDO EXCIS LUMBAR DISK	YES
Surgical - Spine	63043	REDO EXCIS CERV DISK, ADDN CERV INTERSPC	YES
Surgical - Spine	63044	REDO EXCIS CERV DISK, ADDN LUMB INTERSPC	YES
Surgical - Spine	63045	LAMINEC/FACETECT/FORAMIN,CERVICAL 1 SEG	YES
Surgical - Spine	63046	LAMINEC/FACETECT/FORAMIN,THORACIC 1 SEG	YES
Surgical - Spine	63047	LAMINEC/FACETECT/FORAMIN,LUMBAR 1 SEG	YES
Surgical - Spine	63048	LAMINEC/FACETECT/FORAMIN,EACH ADDNL	YES
Surgical - Spine	63050	C- LAMINOPLASTY, 2 OR MORE	YES
Surgical - Spine	63051	C-LAMINOPLASTY W/GRAFT/PLATE, 2 OR MORE	YES
Surgical - Spine	63052	LAM FACETEC/FORAMOT DRG ARTHRD LUMBAR 1 VRT SGM	YES
Surgical - Spine	63053	LAM FACETEC/FORAMOT DRG ARTHRD LMBR EA ADDL SGM	YES
Surgical - Spine	63055	XPEDICUL DECOMPRESS THROACIC CORD	YES
Surgical - Spine	63056	DECOMPRESS SPINAL CORD,1 SEG	YES
Surgical - Spine	63057	XPEDICUL DECOMPRESS CORD,ADDNL SGMT	YES
Surgical - Spine	63064	COSTOVERT DECOMPRESS THORACIC CORD	YES
Surgical - Spine	63066	COSTOVERT DECOMP THOR CORD,EACH ADDN	YES
Surgical - Spine	63075	DISK SURG,ANTER,CERVICAL,SINGLE LVL	YES
Surgical - Spine	63076	DISK SURG,ANTER,CERV,EA ADDNL LVL	YES
Surgical - Spine	63077	DISK SURG,THORAX,SINGLE LEVEL	YES
Surgical - Spine	63078	DISK SURG,THORAX,EA ADDNL LEVEL	YES
Surgical - Spine	63081	REMV VERT BODY,CERV,ONE SGMT	YES
Surgical - Spine	63082	REMV VERT BODY,CERV,EACH ADDNL SGMT	YES
Surgical - Spine	63085	REMV VERT BODY,THOR,ONE SGMT	YES
Surgical - Spine	63086	REMV VERT BODY,THOR,EACH ADDNL SGMT	YES
Surgical - Spine	63087	REMV VERT BODY,LO THOR/LUMB,ONE	YES
Surgical - Spine	63088	REMV VERT BODY,LO THOR/LUMB,EA ADDNL	YES
Surgical - Spine	63090	REMV VERT BODY,LOWER,RETROPER,ONE	YES
Surgical - Spine	63091	REMV VERT BODY,LOWR,RETROPER,EA ADDN	YES
Surgical - Spine	63101	REMV VERT BODY, LATERAL, THORACIC	YES
Surgical - Spine	63102	REMV VERT BODY, LATERAL, LUMBAR	YES
Surgical - Spine	63103	REMOVE VERTEBRAL BODY ADD-ON	YES
Surgical - Spine	63170	INCISE SPINAL CORD TRACT(S)	YES

Surgical - Spine	63172	DRAIN INTRAMEDULLARY->SUBARACH	YES
Surgical - Spine	63173	DRAIN INTRAMEDULLARY->PERITONEAL	YES
Surgical - Spine	63185	INCISE SP COLUMN/NERVES,ONE/TWO LVL	YES
Surgical - Spine	63190	INCISE SP COLUMN/NERVES,>2 LVL	YES
Surgical - Spine	63191	INCISE SPINAL ACCESS NERVE	YES
Surgical - Spine	63197	INCIS BOTH SPINOTHAL,THOR,1 STAGE	YES
Surgical - Spine	63200	RELEASE TETHERED SPINAL CORD,LUMBR	YES
Surgical - Spine	63250	EXCIS/OCCLUD CORD AVM,CERVICAL	YES
Surgical - Spine	63251	EXCIS/OCCLUD CORD AVM,THORACIC	YES
Surgical - Spine	63252	EXCIS/OCCLUD CORD AVM,THORCOLUMBAR	YES
Surgical - Spine	63265	EXCIS INTRASP LESN,XDURAL,CERVICAL	YES
Surgical - Spine	63266	EXCIS INTRASP LESN,XDURAL,THORACIC	YES
Surgical - Spine	63267	EXCIS INTRASP LESN,XDURAL,LUMBAR	YES
Surgical - Spine	63268	EXCIS INTRASP LESN,XDURAL,SACRAL	YES
Surgical - Spine	63270	EXCIS INTRASP LESN,INTRADUR,CERV	YES
Surgical - Spine	63271	EXCIS INTRASP LESN,INTRADUR,THOR	YES
Surgical - Spine	63272	EXCIS INTRASP LESN,INTRADUR,LUMB	YES
Surgical - Spine	63273	EXCIS INTRASP LESN,INTRADUR,SACRAL	YES
Surgical - Spine	63300	REMV VERT,EXDUR,CERV TUMOR	YES
Surgical - Spine	63301	REMV VERT,EXDUR,XTHOR,THOR TUMOR	YES
Surgical - Spine	63302	REMV VERT,EXDUR,THORLUM,THOR TUMOR	YES
Surgical - Spine	63303	REMV VERT,EXDUR,LUMB/SACR TUMOR	YES
Surgical - Spine	63304	REMV VERT,INDURAL,CERV TUMOR	YES
Surgical - Spine	63305	REMV VERT,INDURAL,XTHOR,THOR TUMOR	YES
Surgical - Spine	63306	REMV VERT,INDURAL,THORLUM,THOR TUMOR	YES
Surgical - Spine	63307	REMV VERT,INDURAL,LUMB/SACR TUMOR	YES
Surgical - Spine	63308	REMV VERT,EACH ADDNL SEGMENT	YES
Surgical - Spine	63620	STEREOTACTIC RADIOSURGERY, SPINAL, SINGLE LESION	YES
Surgical - Spine	63621	STEREOTACTIC RADIOSURGERY, SPINAL, EA ADD LESION	YES
Surgical - Spine	63650	PERCUT IMPLNT NEUROELECT,EPIDURAL	YES
Surgical - Spine	63655	SURG IMPLNT NEUROELECT,EPIDURAL	YES
Surgical - Spine	63685	IMPLANT SPINAL NEUROSTIM/RECEIVER	YES
Surgical - Spine	63688	REVISE/REMOVE SPINAL NEUROSTIM/RECEIVER	YES
Surgical - Spine	64451	INJECTION ANES AGNT/STEROID NERVES NRVTG SI JOINT W/IMG GUID	YES
Surgical - Spine	64553	PERCUT IMPLNT NEUROELEC,CRANIAL	YES
Surgical - Spine	64555	PERCUT IMPLANT,NEUROELEC,PERIPH NERVE	YES
Surgical - Spine	64561	PERCUT IMPLANT,NEUROELEC,SACRAL NERVE	YES
Surgical - Spine	64566	POST TIBIAL NEUROSTIMULATION,PERC NEEDLE ELECTRODE	YES
Surgical - Spine	64568	INCISION IMPLANT CRANIAL NERVE STIM ELECTRODE/PULSE GEN	YES
Surgical - Spine	64575	INCISION,IMPLANT,NEUROELEC,PERIPH NERVE	YES
Surgical - Spine	64581	INCISION,IMPLANT,NEUROELEC,SACRAL NERVE	YES
Surgical - Spine	64582	OPEN IMPLTN HPGLSL NRV NSTIM RA PG AND RESPIR SENSOR	YES
Surgical - Spine	64583	REVSN/RPLCMT HPGLSL NERVE NSTIM RA PG AND RESPIR SNR	YES
Surgical - Spine	64584	REMOVAL HYPOGLOSSAL NERVE NSTIM RA PG AND RESPIR SNR	YES
Surgical - Spine	64585	REVISE/REMOVE PERIPHERAL NEUROELECTRODE	YES
Surgical - Spine	64590	IMPLANT PERIPH/GASTRIC NEUROSTIM/RECEIVER	YES
Surgical - Spine	64595	REVISE/REMOVE PERIPH/GASTRIC NEUROSTIM/RECEIVER	YES
Surgical - Spine	64650	CHEMODENERV ECCRINE GLANDS BOTH AXILLAE	YES
Surgical - Spine	64653	CHEMODENERV ECCRINE GLANDS, NON-AXILLARY	YES
Surgical - Spine	64999	NERVOUS SYSTEM SURGERY UNLISTED	YES

Surgical - Spine	65785	IMPLANTATION INTRASTROMAL CORNEAL RING SEGMENTS	YES
Surgical - Spine	66179	AQUEOUS SHUNT EXTRAOCULAR RESERVOIR W/O GRAFT	YES
Surgical - Spine	66180	WATER SHUNT-EXTRAOCUL RESERV	YES
Surgical - Spine	66183	INSERT ANTER DRAINAGE DEV W/O EXTRAOC RESERVOIR	YES
Surgical - Spine	66184	REVJ SHUNT EXTRAOCULAR RESERVOIR W/O GRAFT	YES
Surgical - Spine	66185	REVISE EYE SHUNT	YES
Surgical - Spine	66989	XCAPSL CTRC RMVL INSRTN IO LENS PRSTH CPLX INSRTN 1+	YES
Surgical - Spine	66991	XCAPSL CTRC RMVL INSJ IO LENS PROSTH INSRTN 1+	YES
Surgical - Spine	66999	EYE SURG ANT SGMT PROC UNLISTED	YES
Surgical - Spine	67299	EYE SURG POST SGMT PROC UNLISTED	YES
Surgical - Spine	67399	EYE MUSCLE SURG PROC UNLISTED	YES
Surgical - Spine	67516	SUPRACHOROIDAL SPACE INJ PHARMACOLOGIC AGENT	YES
Surgical - Spine	67599	ORBIT SURGERY PROC UNLISTED	YES
Surgical - Spine	67900	REPAIR BROW PTOSIS	YES
Surgical - Spine	67901	FIX LID PTOSIS,FRONTALIS MUSC,SUT	YES
Surgical - Spine	67902	FIX LID PTOSIS,FRONT MUSC,FAS SLNG	YES
Surgical - Spine	67903	FIX LID PTOSIS,LEVATR RESEC,INTERN	YES
Surgical - Spine	67904	FIX LID PTOSIS,LEVATR RESEC,EXTERN	YES
Surgical - Spine	67906	FIX LID PTOSIS,SUPER RECTUS TECH	YES
Surgical - Spine	67908	FIX LID PTOSIS,FASANELLA-SERVAT	YES
Surgical - Spine	67909	REDN OVERCORRECTN OF LID PTOSIS	YES
Surgical - Spine	67950	CANTHOPLASTY	YES
Surgical - Spine	67999	REVISION EYELID UNLISTED	YES
Surgical - Spine	68399	CONJUNCTIVAL SURGERY UNLISTED	YES
Surgical - Spine	68841	INSRTN RX ELUTING IMPLT PUNCTAL DILAT LAC CANAL EA	YES
Surgical - Spine	68899	TEAR DUCT SYSTEM SURG UNLISTED	YES
Surgical - Spine	69300	REVISE EXTERNAL EAR	YES
Surgical - Spine	69399	OUTER EAR SURGERY PROC UNLISTED	YES
Surgical - Spine	69705	SURG NASOPHARYNGOSCOPY DILAT EUSTACHIAN TUBE UNI	YES
Surgical - Spine	69706	SURG NASOPHARYNGOSCOPY DILAT EUSTACHIAN TUBE BI	YES
Surgical - Spine	69711	REMOVE/REPAIR HEAR AID,TEMP BONE	YES
Surgical - Spine	69714	IMPLNT,TEMPORAL BONE,W/EXTRN STIM	YES
Surgical - Spine	69716	IMPLTN OI IMPLT SKULL MAG TC ATTACHMENT ESP	YES
Surgical - Spine	69717	RPLCMT OI IMPLT SKULL PERQ ATTACHMENT ESP	YES
Surgical - Spine	69719	RPLCMT OI IMPLT SKULL MAG TC ATTACHMENT ESP<100	YES
Surgical - Spine	69726	REMOVAL OI IMPLT SKULL PERQ ATTACHMENT ESP	YES
Surgical - Spine	69727	REMOVAL OI IMPLT SKULL MAG TC ATTACHMENT ESP	YES
Surgical - Spine	69728	RMVL ENTIRE OI IMPLT SKL MAG TC ATTCH ESP>=100	YES
Surgical - Spine	69729	IMPL OI IMPLT SKULL MAG TC ATTACHMENT ESP>=100	YES
Surgical - Spine	69730	RPLCMT OI IMPLT SKULL MAG TC ATTACHMENT ESP>=100	YES
Surgical - Spine	69799	MIDDLE EAR SURGERY PROC UNLISTED	YES
Surgical - Spine	69930	IMPLANT COCHLEAR DEVICE	YES
Surgical - Spine	69949	INNER EAR SURGERY PROC UNLISTED	YES
Surgical - Spine	69979	TEMPORAL BONE,MIDDLE,SURG UNLISTED	YES
Surgical - Spine	64818	SYMPATHECTOMY,LUMBAR	YES
Surgical - Spine	22510	PERQ VERTEBROPLASTY UNI/BI INJX CERVICOTHORACIC	YES
Surgical - Spine	22512	VERTEBROPLASTY EACH ADDL CERVICOTHOR/LUMBOSACRAL	YES
Surgical - Spine	22551	ARTHRODESIS ANT INTERBODY INC DISCECTOMY, CERVICAL BELOW C2	YES
Surgical - Spine	22856	TOTAL DISC ARTHROPLASTY, CERVICAL, SINGLE	YES
Surgical - Spine	22858	TOT DISC ARTHRP ANT APPR DISC 2ND LEVEL CERVICAL	YES

Surgical - Spine	22861	REVISION TOTAL DISC ARTHROPLASTY, CERVICAL, SINGLE	YES
Surgical - Spine	22864	REMOVE TOTAL DISC ARTHROPLASTY, CERVICAL, SINGLE	YES
Surgical - Spine	22552	ARTHRODESIS ANT INTERBODY INC DISCECTOMY, CERVICAL BELOW C2 EACH ADDL	YES
Surgical - Spine	22206	OSTEOTOMY SPINE POSTERIOR 3 COLUMN THORACIC	YES
Surgical - Spine	22207	OSTEOTOMY SPINE POSTERIOR 3 COLUMN LUMBAR	YES
Surgical - Spine	22214	OSTEOTOMY LUMB SP,POST,1 LVL	YES
Surgical - Spine	22533	LAT LUMBAR SPINE FUSION	YES
Surgical - Spine	22534	LAT THOR/LUMB, ADDÆL SEG	YES