# 2021 No Prior Authorization Codes for Together with CCHP

Please use "Ctrl (or ⌘)+ F" to locate your code.

| Revision Log | | |
|---|---|---|
| **Date** | **Codes Added** | **Codes Removed** |
| 6-1-2021 | A9592 | |
| 3-31-2021 | 32408; 33741; 33745; 33746; 33995; 33997; 71271; 76145; 80143; 80151; 80161; 80167; 80179; 80181; 80189; 80193; 80204; 80210; 81513; 81514; 82077; 82681; 90377; 92229; 92650; 92651; 92652; 92653; 93241; 93242; 93243; 93244; 93245; 93246; 93247; 93248; 94619; 99417; 99439; A9591; C9068; C9772; C9773; C9774; C9775; G2173; G2174; G2175; G2176; G2177; G2178; G2179; G2180; G2181; G2182; G2183; G2184; G2185; G2186; G2187; G2188; G2189; G2190; G2191; G2192; G2193; G2194; G2195; G2196; G2197; G2198; G2199; G2200; G2201; G2202; G2203; G2204; G2205; G2206; G2207; G2208; G2209; G2210; G2211; G2212; G2213; G2214; G2215; G2216; G2250; G2251; G2252; M1146; M1147; M1148; M1149; U0005 | |
| 1-1-2021 | 64486; 64487; 64488; 64489; 64490, 64491, 64492, 64493, 64494 and 64495; A4604 (Effective 1/1/2021) | |
| 12-31-2020 | C9060, C9067, C9768, C9769, V2524 (Effective 1/1/2021) | |
| 10-31-2020 | 36470; 36471; E2402 (Effective 11/1/2020) | |
| 10-01-2020 | | C9753; C9755 (Effective 9/30/2020) |
| 8-20-2020 | 96161 | |
| 7-29-2020 | 87426 (Effective 6/25/2020) | |
| 5-19-2020 | 99421; 99422; 99423 (Effective 5/19/2020) | |

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| | | |
|---|---|---|
| 4-01-2020 | 21601, 21602, 21603, 33016, 33017, 33018, 33019, 33858, 33859, 33871, 34717, 34718, 35702, 35703, 46948, 49013, 49014, 62328, 62329, 64451, 64454, 64624, 64625, 66987, 66988, 74221, 74248, 78835, 80145, 80187, 80230, 80235, 80280, 80285, 87563, 90912, 90694, 90913, 92201, 92202, 92549, 93356, 93985, 93986, 95717, 95719, 95700, 95705, 95706, 95707, 95708, 95709, 95710, 95721, 95723, 95725, 95726, 96156, 96158, 96159, 96164, 96165, 96167, 96168, 96170, 96171, 97129, 97130, J0179, J9199, J9309, L8033, A9590, G2081, G2082, G2083, G2089, G2090, G2091, G2092, G2093, G2094, G2095, G2096, G2097, G2098, G2099, G2100, G2101, G2102, G2103, G2104, G2105, G2106, G2107, G2108, G2109, G2110, G2112, G2113, G2114, G2115, G2116, G2117, G2118, G2119, G2120, G2121, G2122, G2123, G2124, G2125, G2126, G2127, G2128, G2129, G2130, G2131, G2132, G2133, G2134, G2135, G2136, G2137, G2138, G2139, G2140, G2141, G2142, G2143, G2144, G2145, G2146, G2147, G2148, G2149, G2150, G2151, G2152, G2153, G2154, G2155, G2156, G2157, G2158, G2159, G2160, G2161, G2162, G2163, G2164, G2165, G2166, G2167, M1106, M1107, M1108, M1109, M1110, M1111, M1112, M1113, M1114, M1115, M1116, M1117, M1118, M1119, M1120, M1121, M1122, M1123, M1124, M1125, M1126, M1127, M1128, M1129, M1130, M1131, M1132, M1133, M1134, M1135, M1136, M1137, M1138, M1139, M1140, M1141, M1142, M1143, M1144, | |
| 12-31-2019 | | 19260, 19271, 19272, 20926, 33010, 33011, 33015, 33860, 33870, 35721, 35741, 35761, 43401, 64402, 64410, 64413, 74241, 74245, 74247, 74249, 74260, 76930, 78205, 78206, 78320, 78607, 78647, 78710, 78805, 78806, 78807, 92225, 92226, 93299, 95827, 95831, 95832, 95833, 95834, 96150, 96151, 96152, 96153, 96154, 99444, C9407, G0365, G0515 (All codes expired) |
| 10-22-2019 | 77301; 77338; 77385; 77386; G6015; G6017 (Effective December 1, 2019) | |
| 10-14-2019 | | 19105; 28446; 31627; 31660; 31661; 33368; 33369; 33548; 37252; 37253; 41512; 41530; 43257; 46607; 53860; 55706; 72159; 73225; 75571; 76936; 78350; 78351; 78647; 78807; 83037; 83698; 83876; 91111; 92132; 95060; 95803; 95905; 95980; 97610; 99174; A4305; C1821; C9360; C9361; C9362; C9363; C9364; S9034; S9090 (Effective December 1, 2019) Added to the Non-covered List |

## 2021 No Prior Authorization Codes for Together with CCHP

Please use "Ctrl (or ⌘)+ F" to locate your code.

| | | |
|---|---|---|
| 2-19-2019 | A9589; B4105; C9407; C9754; C9755; G2011; J0841 (Effective March 1, 2019) | |
| 1-21-2019 | 98960; 98961; 98962; 97016 | |
| 1-01-2019 | 10004; 10005; 10006; 10007; 10008; 10009; 10010; 10011; 10012; 11102; 11103; 11104; 11105; 11106; 11107; 27369; 33274; 33275; 33285; 33286; 33440; 33866; 36572; 36573; 38531; 43762; 43763; 50436; 50437; 77046; 77047; 77048; 77049; 81596; 82642; 83722; 92273; 93264; 95836; 95976; 95977; 95983; 95984; 96112; 96113; 96121; 96130; 96131; 96132; 96133; 96136; 96137; 96138; 96139; 96146; 99453; 99454; 99491 | 10022; 11100; 11101; 20005; 27370; 31595; 33282; 33284; 41500; 43760; 61332; 61480; 61610; 61612; 63615; 64550; 66220; 76001; 77058; 77059; 78270; 78271; 78272; 92275; 95974; 95975;95978; 95979; 96101; 96102; 96103; 96111; 96118; 96119; 96120 |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 0002M | LIVER DIS 10 ASSAYS W/ASH |
| 0003M | LIVER DIS 10 ASSAYS W/NASH |
| 00100 | ANESTH SALIVARY GLAND |
| 00102 | ANESTH REPAIR OF CLEFT LIP |
| 00103 | ANESTH BLEPHAROPLASTY |
| 00104 | ANESTH ELECTROSHOCK |
| 00120 | ANESTH EAR SURGERY |
| 00124 | ANESTH EAR EXAM |
| 00126 | ANESTH TYMPANOTOMY |
| 00140 | ANESTH PROCEDURES ON EYE |
| 00142 | ANESTH LENS SURGERY |
| 00144 | ANESTH CORNEAL TRANSPLANT |
| 00145 | ANESTH VITREORETINAL SURG |
| 00147 | ANESTH IRIDECTOMY |
| 00148 | ANESTH EYE EXAM |
| 00160 | ANESTH NOSE/SINUS SURGERY |
| 00162 | ANESTH NOSE/SINUS SURGERY |
| 00164 | ANESTH BIOPSY OF NOSE |
| 00172 | ANESTH CLEFT PALATE REPAIR |
| 00174 | ANESTH PHARYNGEAL SURGERY |
| 00176 | ANESTH PHARYNGEAL SURGERY |
| 00190 | ANESTH FACE/SKULL BONE SURG |
| 00192 | ANESTH FACIAL BONE SURGERY |
| 00210 | ANESTH CRANIAL SURG NOS |
| 00211 | ANESTH CRAN SURG HEMOTOMA |
| 00212 | ANESTH SKULL DRAINAGE |
| 00214 | ANESTH SKULL DRAINAGE |
| 00215 | ANESTH SKULL REPAIR/FRACT |
| 00216 | ANESTH HEAD VESSEL SURGERY |
| 00218 | ANESTH SPECIAL HEAD SURGERY |
| 00220 | ANESTH INTRCRN NERVE |
| 00222 | ANESTH HEAD NERVE SURGERY |
| 00300 | ANESTH HEAD/NECK/PTRUNK |
| 00320 | ANESTH NECK ORGAN 1YR/> |
| 00322 | ANESTH BIOPSY OF THYROID |
| 00326 | ANESTH LARYNX/TRACH < 1 YR |
| 00350 | ANESTH NECK VESSEL SURGERY |
| 00352 | ANESTH NECK VESSEL SURGERY |
| 00400 | ANESTH SKIN EXT/PER/ATRUNK |
| 00402 | ANESTH SURGERY OF BREAST |
| 00404 | ANESTH SURGERY OF BREAST |
| 00406 | ANESTH SURGERY OF BREAST |
| 00410 | ANESTH CORRECT HEART RHYTHM |
| 00450 | ANESTH SURGERY OF SHOULDER |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 00454 | ANESTH COLLAR BONE BIOPSY |
| 00470 | ANESTH REMOVAL OF RIB |
| 00472 | ANESTH CHEST WALL REPAIR |
| 00474 | ANESTH SURGERY OF RIB |
| 00500 | ANESTH ESOPHAGEAL SURGERY |
| 00520 | ANESTH CHEST PROCEDURE |
| 00522 | ANESTH CHEST LINING BIOPSY |
| 00524 | ANESTH CHEST DRAINAGE |
| 00528 | ANES MEDIASCPY & DX THORSCPY |
| 00529 | ANES MEDSCPY&THORSCPY 1 LUNG |
| 00530 | ANESTH PACEMAKER INSERTION |
| 00532 | ANESTH VASCULAR ACCESS |
| 00534 | ANESTH CARDIOVERTER/DEFIB |
| 00537 | ANESTH CARDIAC ELECTROPHYS |
| 00539 | ANESTH TRACH-BRONCH RECONST |
| 00540 | ANESTH CHEST SURGERY |
| 00541 | ANESTH ONE LUNG VENTILATION |
| 00542 | ANESTHESIA REMOVAL PLEURA |
| 00546 | ANESTH LUNG CHEST WALL SURG |
| 00548 | ANESTH TRACHEA BRONCHI SURG |
| 00550 | ANESTH STERNAL DEBRIDEMENT |
| 00560 | ANESTH HEART SURG W/O PUMP |
| 00561 | ANESTH HEART SURG <1 YR |
| 00562 | ANESTH HRT SURG W/PMP AGE 1+ |
| 00563 | ANESTH HEART SURG W/ARREST |
| 00566 | ANESTH CABG W/O PUMP |
| 00567 | ANESTH CABG W/PUMP |
| 00580 | ANESTH HEART/LUNG TRANSPLNT |
| 00600 | ANESTH SPINE CORD SURGERY |
| 00604 | ANESTH SITTING PROCEDURE |
| 00620 | ANESTH SPINE CORD SURGERY |
| 00625 | ANES SPINE TRANTHOR W/O VENT |
| 00626 | ANES SPINE TRANSTHOR W/VENT |
| 00630 | ANESTH SPINE CORD SURGERY |
| 00632 | ANESTH REMOVAL OF NERVES |
| 00635 | ANESTH LUMBAR PUNCTURE |
| 00640 | ANESTH SPINE MANIPULATION |
| 00670 | ANESTH SPINE CORD SURGERY |
| 00700 | ANESTH ABDOMINAL WALL SURG |
| 00702 | ANESTH FOR LIVER BIOPSY |
| 00730 | ANESTH ABDOMINAL WALL SURG |
| 00731 | ANES UPR GI NDSC PX NOS |
| 00732 | ANES UPR GI NDSC PX ERCP |
| 00750 | ANESTH REPAIR OF HERNIA |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 00752 | ANESTH REPAIR OF HERNIA |
| 00754 | ANESTH REPAIR OF HERNIA |
| 00756 | ANESTH REPAIR OF HERNIA |
| 00770 | ANESTH BLOOD VESSEL REPAIR |
| 00790 | ANESTH SURG UPPER ABDOMEN |
| 00792 | ANESTH HEMORR/EXCISE LIVER |
| 00794 | ANESTH PANCREAS REMOVAL |
| 00796 | ANESTH FOR LIVER TRANSPLANT |
| 00797 | ANESTH SURGERY FOR OBESITY |
| 00800 | ANESTH ABDOMINAL WALL SURG |
| 00802 | ANESTH FAT LAYER REMOVAL |
| 00811 | ANES LWR INTST NDSC NOS |
| 00812 | ANES LWR INTST SCR COLSC |
| 00813 | ANES UPR LWR GI NDSC PX |
| 00820 | ANESTH ABDOMINAL WALL SURG |
| 00830 | ANESTH REPAIR OF HERNIA |
| 00832 | ANESTH REPAIR OF HERNIA |
| 00834 | ANESTH HERNIA REPAIR < 1 YR |
| 00836 | ANESTH HERNIA REPAIR PREEMIE |
| 00840 | ANESTH SURG LOWER ABDOMEN |
| 00842 | ANESTH AMNIOCENTESIS |
| 00844 | ANESTH PELVIS SURGERY |
| 00846 | ANESTH HYSTERECTOMY |
| 00848 | ANESTH PELVIC ORGAN SURG |
| 00851 | ANESTH TUBAL LIGATION |
| 00860 | ANESTH SURGERY OF ABDOMEN |
| 00862 | ANESTH KIDNEY/URETER SURG |
| 00864 | ANESTH REMOVAL OF BLADDER |
| 00865 | ANESTH REMOVAL OF PROSTATE |
| 00866 | ANESTH REMOVAL OF ADRENAL |
| 00868 | ANESTH KIDNEY TRANSPLANT |
| 00870 | ANESTH BLADDER STONE SURG |
| 00872 | ANESTH KIDNEY STONE DESTRUCT |
| 00873 | ANESTH KIDNEY STONE DESTRUCT |
| 00880 | ANESTH ABDOMEN VESSEL SURG |
| 00882 | ANESTH MAJOR VEIN LIGATION |
| 00902 | ANESTH ANORECTAL SURGERY |
| 00904 | ANESTH PERINEAL SURGERY |
| 00906 | ANESTH REMOVAL OF VULVA |
| 00908 | ANESTH REMOVAL OF PROSTATE |
| 00910 | ANESTH BLADDER SURGERY |
| 00912 | ANESTH BLADDER TUMOR SURG |
| 00914 | ANESTH REMOVAL OF PROSTATE |
| 00916 | ANESTH BLEEDING CONTROL |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 00918 | ANESTH STONE REMOVAL |
| 00920 | ANESTH GENITALIA SURGERY |
| 00921 | ANESTH VASECTOMY |
| 00922 | ANESTH SPERM DUCT SURGERY |
| 00926 | ANESTH REMOVAL OF TESTIS |
| 00928 | ANESTH REMOVAL OF TESTIS |
| 00930 | ANESTH TESTIS SUSPENSION |
| 00932 | ANESTH AMPUTATION OF PENIS |
| 00934 | ANESTH PENIS NODES REMOVAL |
| 00936 | ANESTH PENIS NODES REMOVAL |
| 00938 | ANESTH INSERT PENIS DEVICE |
| 00940 | ANESTH VAGINAL PROCEDURES |
| 00942 | ANESTH SURG ON VAG/URETHRAL |
| 00944 | ANESTH VAGINAL HYSTERECTOMY |
| 00948 | ANESTH REPAIR OF CERVIX |
| 00950 | ANESTH VAGINAL ENDOSCOPY |
| 00952 | ANESTH HYSTEROSCOPE/GRAPH |
| 01112 | ANESTH BONE ASPIRATE/BX |
| 01120 | ANESTH PELVIS SURGERY |
| 01130 | ANESTH BODY CAST PROCEDURE |
| 01140 | ANESTH AMPUTATION AT PELVIS |
| 01150 | ANESTH PELVIC TUMOR SURGERY |
| 01160 | ANESTH PELVIS PROCEDURE |
| 01170 | ANESTH PELVIS SURGERY |
| 01173 | ANESTH FX REPAIR PELVIS |
| 01200 | ANESTH HIP JOINT PROCEDURE |
| 01202 | ANESTH ARTHROSCOPY OF HIP |
| 01210 | ANESTH HIP JOINT SURGERY |
| 01212 | ANESTH HIP DISARTICULATION |
| 01214 | ANESTH HIP ARTHROPLASTY |
| 01215 | ANESTH REVISE HIP REPAIR |
| 01220 | ANESTH PROCEDURE ON FEMUR |
| 01230 | ANESTH SURGERY OF FEMUR |
| 01232 | ANESTH AMPUTATION OF FEMUR |
| 01234 | ANESTH RADICAL FEMUR SURG |
| 01250 | ANESTH UPPER LEG SURGERY |
| 01260 | ANESTH UPPER LEG VEINS SURG |
| 01270 | ANESTH THIGH ARTERIES SURG |
| 01272 | ANESTH FEMORAL ARTERY SURG |
| 01274 | ANESTH FEMORAL EMBOLECTOMY |
| 01320 | ANESTH KNEE AREA SURGERY |
| 01340 | ANESTH KNEE AREA PROCEDURE |
| 01360 | ANESTH KNEE AREA SURGERY |
| 01380 | ANESTH KNEE JOINT PROCEDURE |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 01382 | ANESTH DX KNEE ARTHROSCOPY |
| 01390 | ANESTH KNEE AREA PROCEDURE |
| 01392 | ANESTH KNEE AREA SURGERY |
| 01400 | ANESTH KNEE JOINT SURGERY |
| 01402 | ANESTH KNEE ARTHROPLASTY |
| 01404 | ANESTH AMPUTATION AT KNEE |
| 01420 | ANESTH KNEE JOINT CASTING |
| 01430 | ANESTH KNEE VEINS SURGERY |
| 01432 | ANESTH KNEE VESSEL SURG |
| 01440 | ANESTH KNEE ARTERIES SURG |
| 01442 | ANESTH KNEE ARTERY SURG |
| 01444 | ANESTH KNEE ARTERY REPAIR |
| 01462 | ANESTH LOWER LEG PROCEDURE |
| 01464 | ANESTH ANKLE/FT ARTHROSCOPY |
| 01470 | ANESTH LOWER LEG SURGERY |
| 01472 | ANESTH ACHILLES TENDON SURG |
| 01474 | ANESTH LOWER LEG SURGERY |
| 01480 | ANESTH LOWER LEG BONE SURG |
| 01482 | ANESTH RADICAL LEG SURGERY |
| 01484 | ANESTH LOWER LEG REVISION |
| 01486 | ANESTH ANKLE REPLACEMENT |
| 01490 | ANESTH LOWER LEG CASTING |
| 01500 | ANESTH LEG ARTERIES SURG |
| 01502 | ANESTH LWR LEG EMBOLECTOMY |
| 01520 | ANESTH LOWER LEG VEIN SURG |
| 01522 | ANESTH LOWER LEG VEIN SURG |
| 01610 | ANESTH SURGERY OF SHOULDER |
| 01620 | ANESTH SHOULDER PROCEDURE |
| 01622 | ANES DX SHOULDER ARTHROSCOPY |
| 01630 | ANESTH SURGERY OF SHOULDER |
| 01634 | ANESTH SHOULDER JOINT AMPUT |
| 01636 | ANESTH FOREQUARTER AMPUT |
| 01638 | ANESTH SHOULDER REPLACEMENT |
| 01650 | ANESTH SHOULDER ARTERY SURG |
| 01652 | ANESTH SHOULDER VESSEL SURG |
| 01654 | ANESTH SHOULDER VESSEL SURG |
| 01656 | ANESTH ARM-LEG VESSEL SURG |
| 01670 | ANESTH SHOULDER VEIN SURG |
| 01680 | ANESTH SHOULDER CASTING |
| 01710 | ANESTH ELBOW AREA SURGERY |
| 01712 | ANESTH UPPR ARM TENDON SURG |
| 01714 | ANESTH UPPR ARM TENDON SURG |
| 01716 | ANESTH BICEPS TENDON REPAIR |
| 01730 | ANESTH UPPR ARM PROCEDURE |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 01732 | ANESTH DX ELBOW ARTHROSCOPY |
| 01740 | ANESTH UPPER ARM SURGERY |
| 01742 | ANESTH HUMERUS SURGERY |
| 01744 | ANESTH HUMERUS REPAIR |
| 01756 | ANESTH RADICAL HUMERUS SURG |
| 01758 | ANESTH HUMERAL LESION SURG |
| 01760 | ANESTH ELBOW REPLACEMENT |
| 01770 | ANESTH UPPR ARM ARTERY SURG |
| 01772 | ANESTH UPPR ARM EMBOLECTOMY |
| 01780 | ANESTH UPPER ARM VEIN SURG |
| 01782 | ANESTH UPPR ARM VEIN REPAIR |
| 01810 | ANESTH LOWER ARM SURGERY |
| 01820 | ANESTH LOWER ARM PROCEDURE |
| 01829 | ANESTH DX WRIST ARTHROSCOPY |
| 01830 | ANESTH LOWER ARM SURGERY |
| 01832 | ANESTH WRIST REPLACEMENT |
| 01840 | ANESTH LWR ARM ARTERY SURG |
| 01842 | ANESTH LWR ARM EMBOLECTOMY |
| 01844 | ANESTH VASCULAR SHUNT SURG |
| 01850 | ANESTH LOWER ARM VEIN SURG |
| 01852 | ANESTH LWR ARM VEIN REPAIR |
| 01860 | ANESTH LOWER ARM CASTING |
| 01916 | ANESTH DX ARTERIOGRAPHY |
| 01920 | ANESTH CATHETERIZE HEART |
| 01922 | ANESTH CAT OR MRI SCAN |
| 01924 | ANES THER INTERVEN RAD ARTRL |
| 01925 | ANES THER INTERVEN RAD CARD |
| 01926 | ANES TX INTERV RAD HRT/CRAN |
| 01930 | ANES THER INTERVEN RAD VEIN |
| 01931 | ANES THER INTERVEN RAD TIPS |
| 01932 | ANES TX INTERV RAD TH VEIN |
| 01933 | ANES TX INTERV RAD CRAN VEIN |
| 01935 | ANESTH PERC IMG DX SP PROC |
| 01936 | ANESTH PERC IMG TX SP PROC |
| 01951 | ANESTH BURN LESS 4 PERCENT |
| 01952 | ANESTH BURN 4-9 PERCENT |
| 01953 | ANESTH BURN EACH 9 PERCENT |
| 01958 | ANESTH ANTEPARTUM MANIPUL |
| 01960 | ANESTH VAGINAL DELIVERY |
| 01961 | ANESTH CS DELIVERY |
| 01962 | ANESTH EMER HYSTERECTOMY |
| 01963 | ANESTH CS HYSTERECTOMY |
| 01965 | ANESTH INC/MISSED AB PROC |
| 01966 | ANESTH INDUCED AB PROCEDURE |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 01967 | ANESTH/ANALG VAG DELIVERY |
| 01968 | ANES/ANALG CS DELIVER ADD-ON |
| 01969 | ANESTH/ANALG CS HYST ADD-ON |
| 01990 | SUPPORT FOR ORGAN DONOR |
| 01991 | ANESTH NERVE BLOCK/INJ |
| 01992 | ANESTH N BLOCK/INJ PRONE |
| 01996 | HOSP MANAGE CONT DRUG ADMIN |
| 0295T | EXT ECG COMPLETE |
| 0296T | EXT ECG RECORDING |
| 0297T | EXT ECG SCAN W/REPORT |
| 0298T | EXT ECG REVIEW AND INTERP |
| 0500F | INITIAL PRENATAL CARE VISIT |
| 0502F | SUBSEQUENT PRENATAL CARE |
| 0503F | POSTPARTUM CARE VISIT |
| 10004 | FNA BX W/O IMG GDN EA ADDL |
| 10005 | FNA BX W/US GDN 1ST LES |
| 10006 | FNA BX W/US GDN EA ADDL |
| 10007 | FNA BX W/FLUOR GDN 1ST LES |
| 10008 | FNA BX W/FLUOR GDN EA ADDL |
| 10009 | FNA BX W/CT GDN 1ST LES |
| 10010 | FNA BX W/CT GDN EA ADDL |
| 10011 | FNA BX W/MR GDN 1ST LES |
| 10012 | FNA BX W/MR GDN EA ADDL |
| 10021 | FNA BX W/O IMG GDN 1ST LES |
| 10030 | GUIDE CATHET FLUID DRAINAGE |
| 10035 | PERQ DEV SOFT TISS 1ST IMAG |
| 10036 | PERQ DEV SOFT TISS ADD IMAG |
| 10040 | ACNE SURGERY |
| 10060 | DRAINAGE OF SKIN ABSCESS |
| 10061 | DRAINAGE OF SKIN ABSCESS |
| 10080 | DRAINAGE OF PILONIDAL CYST |
| 10081 | DRAINAGE OF PILONIDAL CYST |
| 10120 | REMOVE FOREIGN BODY |
| 10121 | REMOVE FOREIGN BODY |
| 10140 | DRAINAGE OF HEMATOMA/FLUID |
| 10160 | PUNCTURE DRAINAGE OF LESION |
| 10180 | COMPLEX DRAINAGE WOUND |
| 11000 | DEBRIDE INFECTED SKIN |
| 11001 | DEBRIDE INFECTED SKIN ADD-ON |
| 11004 | DEBRIDE GENITALIA & PERINEUM |
| 11005 | DEBRIDE ABDOM WALL |
| 11006 | DEBRIDE GENIT/PER/ABDOM WALL |
| 11008 | REMOVE MESH FROM ABD WALL |
| 11010 | DEBRIDE SKIN AT FX SITE |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 11011 | DEBRIDE SKIN MUSC AT FX SITE |
| 11012 | DEB SKIN BONE AT FX SITE |
| 11042 | DEB SUBQ TISSUE 20 SQ CM/< |
| 11043 | DEB MUSC/FASCIA 20 SQ CM/< |
| 11044 | DEB BONE 20 SQ CM/< |
| 11045 | DEB SUBQ TISSUE ADD-ON |
| 11046 | DEB MUSC/FASCIA ADD-ON |
| 11047 | DEB BONE ADD-ON |
| 11055 | TRIM SKIN LESION |
| 11056 | TRIM SKIN LESIONS 2 TO 4 |
| 11057 | TRIM SKIN LESIONS OVER 4 |
| 11102 | TANGNTL BX SKIN SINGLE LES |
| 11103 | TANGNTL BX SKIN EA SEP/ADDL |
| 11104 | PUNCH BX SKIN SINGLE LESION |
| 11105 | PUNCH BX SKIN EA SEP/ADDL |
| 11106 | INCAL BX SKN SINGLE LES |
| 11107 | INCAL BX SKN EA SEP/ADDL |
| 11200 | REMOVAL OF SKIN TAGS <W/15 |
| 11201 | REMOVE SKIN TAGS ADD-ON |
| 11300 | SHAVE SKIN LESION 0.5 CM/< |
| 11301 | SHAVE SKIN LESION 0.6-1.0 CM |
| 11302 | SHAVE SKIN LESION 1.1-2.0 CM |
| 11303 | SHAVE SKIN LESION >2.0 CM |
| 11305 | SHAVE SKIN LESION 0.5 CM/< |
| 11306 | SHAVE SKIN LESION 0.6-1.0 CM |
| 11307 | SHAVE SKIN LESION 1.1-2.0 CM |
| 11308 | SHAVE SKIN LESION >2.0 CM |
| 11310 | SHAVE SKIN LESION 0.5 CM/< |
| 11311 | SHAVE SKIN LESION 0.6-1.0 CM |
| 11312 | SHAVE SKIN LESION 1.1-2.0 CM |
| 11313 | SHAVE SKIN LESION >2.0 CM |
| 11400 | EXC TR-EXT B9+MARG 0.5 CM< |
| 11401 | EXC TR-EXT B9+MARG 0.6-1 CM |
| 11402 | EXC TR-EXT B9+MARG 1.1-2 CM |
| 11403 | EXC TR-EXT B9+MARG 2.1-3CM |
| 11404 | EXC TR-EXT B9+MARG 3.1-4 CM |
| 11406 | EXC TR-EXT B9+MARG >4.0 CM |
| 11420 | EXC H-F-NK-SP B9+MARG 0.5/< |
| 11421 | EXC H-F-NK-SP B9+MARG 0.6-1 |
| 11422 | EXC H-F-NK-SP B9+MARG 1.1-2 |
| 11423 | EXC H-F-NK-SP B9+MARG 2.1-3 |
| 11424 | EXC H-F-NK-SP B9+MARG 3.1-4 |
| 11426 | EXC H-F-NK-SP B9+MARG >4 CM |
| 11440 | EXC FACE-MM B9+MARG 0.5 CM/< |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 11441 | EXC FACE-MM B9+MARG 0.6-1 CM |
| 11442 | EXC FACE-MM B9+MARG 1.1-2 CM |
| 11443 | EXC FACE-MM B9+MARG 2.1-3 CM |
| 11444 | EXC FACE-MM B9+MARG 3.1-4 CM |
| 11446 | EXC FACE-MM B9+MARG >4 CM |
| 11600 | EXC TR-EXT MAL+MARG 0.5 CM/< |
| 11601 | EXC TR-EXT MAL+MARG 0.6-1 CM |
| 11602 | EXC TR-EXT MAL+MARG 1.1-2 CM |
| 11603 | EXC TR-EXT MAL+MARG 2.1-3 CM |
| 11604 | EXC TR-EXT MAL+MARG 3.1-4 CM |
| 11606 | EXC TR-EXT MAL+MARG >4 CM |
| 11620 | EXC H-F-NK-SP MAL+MARG 0.5/< |
| 11621 | EXC S/N/H/F/G MAL+MRG 0.6-1 |
| 11622 | EXC S/N/H/F/G MAL+MRG 1.1-2 |
| 11623 | EXC S/N/H/F/G MAL+MRG 2.1-3 |
| 11624 | EXC S/N/H/F/G MAL+MRG 3.1-4 |
| 11626 | EXC S/N/H/F/G MAL+MRG >4 CM |
| 11640 | EXC F/E/E/N/L MAL+MRG 0.5CM< |
| 11641 | EXC F/E/E/N/L MAL+MRG 0.6-1 |
| 11642 | EXC F/E/E/N/L MAL+MRG 1.1-2 |
| 11643 | EXC F/E/E/N/L MAL+MRG 2.1-3 |
| 11644 | EXC F/E/E/N/L MAL+MRG 3.1-4 |
| 11646 | EXC F/E/E/N/L MAL+MRG >4 CM |
| 11719 | TRIM NAIL(S) ANY NUMBER |
| 11720 | DEBRIDE NAIL 1-5 |
| 11721 | DEBRIDE NAIL 6 OR MORE |
| 11730 | REMOVAL OF NAIL PLATE |
| 11732 | REMOVE NAIL PLATE ADD-ON |
| 11740 | DRAIN BLOOD FROM UNDER NAIL |
| 11750 | REMOVAL OF NAIL BED |
| 11755 | BIOPSY NAIL UNIT |
| 11760 | REPAIR OF NAIL BED |
| 11762 | RECONSTRUCTION OF NAIL BED |
| 11765 | EXCISION OF NAIL FOLD TOE |
| 11770 | REMOVE PILONIDAL CYST SIMPLE |
| 11771 | REMOVE PILONIDAL CYST EXTEN |
| 11772 | REMOVE PILONIDAL CYST COMPL |
| 11900 | INJECT SKIN LESIONS </W 7 |
| 11901 | INJECT SKIN LESIONS >7 |
| 11971 | REMOVE TISSUE EXPANDER(S) |
| 11976 | REMOVE CONTRACEPTIVE CAPSULE |
| 11980 | IMPLANT HORMONE PELLET(S) |
| 11981 | INSERT DRUG IMPLANT DEVICE |
| 11982 | REMOVE DRUG IMPLANT DEVICE |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 11983 | REMOVE/INSERT DRUG IMPLANT |
| 12001 | RPR S/N/AX/GEN/TRNK 2.5CM/< |
| 12002 | RPR S/N/AX/GEN/TRNK2.6-7.5CM |
| 12004 | RPR S/N/AX/GEN/TRK7.6-12.5CM |
| 12005 | RPR S/N/A/GEN/TRK12.6-20.0CM |
| 12006 | RPR S/N/A/GEN/TRK20.1-30.0CM |
| 12007 | RPR S/N/AX/GEN/TRNK >30.0 CM |
| 12011 | RPR F/E/E/N/L/M 2.5 CM/< |
| 12013 | RPR F/E/E/N/L/M 2.6-5.0 CM |
| 12014 | RPR F/E/E/N/L/M 5.1-7.5 CM |
| 12015 | RPR F/E/E/N/L/M 7.6-12.5 CM |
| 12016 | RPR FE/E/EN/L/M 12.6-20.0 CM |
| 12017 | RPR FE/E/EN/L/M 20.1-30.0 CM |
| 12018 | RPR F/E/E/N/L/M >30.0 CM |
| 12020 | CLOSURE OF SPLIT WOUND |
| 12021 | CLOSURE OF SPLIT WOUND |
| 12031 | INTMD RPR S/A/T/EXT 2.5 CM/< |
| 12032 | INTMD RPR S/A/T/EXT 2.6-7.5 |
| 12034 | INTMD RPR S/TR/EXT 7.6-12.5 |
| 12035 | INTMD RPR S/A/T/EXT 12.6-20 |
| 12036 | INTMD RPR S/A/T/EXT 20.1-30 |
| 12037 | INTMD RPR S/TR/EXT >30.0 CM |
| 12041 | INTMD RPR N-HF/GENIT 2.5CM/< |
| 12042 | INTMD RPR N-HF/GENIT2.6-7.5 |
| 12044 | INTMD RPR N-HF/GENIT7.6-12.5 |
| 12045 | INTMD RPR N-HF/GENIT12.6-20 |
| 12046 | INTMD RPR N-HF/GENIT20.1-30 |
| 12047 | INTMD RPR N-HF/GENIT >30.0CM |
| 12051 | INTMD RPR FACE/MM 2.5 CM/< |
| 12052 | INTMD RPR FACE/MM 2.6-5.0 CM |
| 12053 | INTMD RPR FACE/MM 5.1-7.5 CM |
| 12054 | INTMD RPR FACE/MM 7.6-12.5CM |
| 12055 | INTMD RPR FACE/MM 12.6-20 CM |
| 12056 | INTMD RPR FACE/MM 20.1-30.0 |
| 12057 | INTMD RPR FACE/MM >30.0 CM |
| 13100 | CMPLX RPR TRUNK 1.1-2.5 CM |
| 13101 | CMPLX RPR TRUNK 2.6-7.5 CM |
| 13102 | CMPLX RPR TRUNK ADDL 5CM/< |
| 13120 | CMPLX RPR S/A/L 1.1-2.5 CM |
| 13121 | CMPLX RPR S/A/L 2.6-7.5 CM |
| 13122 | CMPLX RPR S/A/L ADDL 5 CM/> |
| 13131 | CMPLX RPR F/C/C/M/N/AX/G/H/F |
| 13132 | CMPLX RPR F/C/C/M/N/AX/G/H/F |
| 13133 | CMPLX RPR F/C/C/M/N/AX/G/H/F |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 13151 | CMPLX RPR E/N/E/L 1.1-2.5 CM |
| 13152 | CMPLX RPR E/N/E/L 2.6-7.5 CM |
| 13153 | CMPLX RPR E/N/E/L ADDL 5CM/< |
| 13160 | LATE CLOSURE OF WOUND |
| 14350 | FILLETED FINGER/TOE FLAP |
| 15002 | WOUND PREP TRK/ARM/LEG |
| 15003 | WOUND PREP ADDL 100 CM |
| 15004 | WOUND PREP F/N/HF/G |
| 15005 | WND PREP F/N/HF/G ADDL CM |
| 15040 | HARVEST CULTURED SKIN GRAFT |
| 15050 | SKIN PINCH GRAFT |
| 15100 | SKIN SPLT GRFT TRNK/ARM/LEG |
| 15101 | SKIN SPLT GRFT T/A/L ADD-ON |
| 15110 | EPIDRM AUTOGRFT TRNK/ARM/LEG |
| 15111 | EPIDRM AUTOGRFT T/A/L ADD-ON |
| 15115 | EPIDRM A-GRFT FACE/NCK/HF/G |
| 15116 | EPIDRM A-GRFT F/N/HF/G ADDL |
| 15120 | SKN SPLT A-GRFT FAC/NCK/HF/G |
| 15121 | SKN SPLT A-GRFT F/N/HF/G ADD |
| 15130 | DERM AUTOGRAFT TRNK/ARM/LEG |
| 15131 | DERM AUTOGRAFT T/A/L ADD-ON |
| 15135 | DERM AUTOGRAFT FACE/NCK/HF/G |
| 15136 | DERM AUTOGRAFT F/N/HF/G ADD |
| 15150 | CULT SKIN GRFT T/ARM/LEG |
| 15151 | CULT SKIN GRFT T/A/L ADDL |
| 15152 | CULT SKIN GRAFT T/A/L +% |
| 15155 | CULT SKIN GRAFT F/N/HF/G |
| 15156 | CULT SKIN GRFT F/N/HFG ADD |
| 15157 | CULT EPIDERM GRFT F/N/HFG +% |
| 15200 | SKIN FULL GRAFT TRUNK |
| 15201 | SKIN FULL GRAFT TRUNK ADD-ON |
| 15220 | SKIN FULL GRAFT SCLP/ARM/LEG |
| 15221 | SKIN FULL GRAFT ADD-ON |
| 15240 | SKIN FULL GRFT FACE/GENIT/HF |
| 15241 | SKIN FULL GRAFT ADD-ON |
| 15260 | SKIN FULL GRAFT EEN & LIPS |
| 15261 | SKIN FULL GRAFT ADD-ON |
| 15271 | SKIN SUB GRAFT TRNK/ARM/LEG |
| 15272 | SKIN SUB GRAFT T/A/L ADD-ON |
| 15273 | SKIN SUB GRFT T/ARM/LG CHILD |
| 15274 | SKN SUB GRFT T/A/L CHILD ADD |
| 15275 | SKIN SUB GRAFT FACE/NK/HF/G |
| 15276 | SKIN SUB GRAFT F/N/HF/G ADDL |
| 15277 | SKN SUB GRFT F/N/HF/G CHILD |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 15278 | SKN SUB GRFT F/N/HF/G CH ADD |
| 15570 | SKIN PEDICLE FLAP TRUNK |
| 15572 | SKIN PEDICLE FLAP ARMS/LEGS |
| 15574 | PEDCLE FH/CH/CH/M/N/AX/G/H/F |
| 15576 | PEDICLE E/N/E/L/NTRORAL |
| 15600 | DELAY FLAP TRUNK |
| 15610 | DELAY FLAP ARMS/LEGS |
| 15620 | DELAY FLAP F/C/C/N/AX/G/H/F |
| 15630 | DELAY FLAP EYE/NOS/EAR/LIP |
| 15650 | TRANSFER SKIN PEDICLE FLAP |
| 15730 | MDFC FLAP W/PRSRV VASC PEDCL |
| 15731 | FOREHEAD FLAP W/VASC PEDICLE |
| 15733 | MUSC MYOQ/FSCQ FLP H&N PEDCL |
| 15734 | MUSCLE-SKIN GRAFT TRUNK |
| 15736 | MUSCLE-SKIN GRAFT ARM |
| 15738 | MUSCLE-SKIN GRAFT LEG |
| 15740 | ISLAND PEDICLE FLAP GRAFT |
| 15750 | NEUROVASCULAR PEDICLE FLAP |
| 15756 | FREE MYO/SKIN FLAP MICROVASC |
| 15757 | FREE SKIN FLAP MICROVASC |
| 15758 | FREE FASCIAL FLAP MICROVASC |
| 15760 | COMPOSITE SKIN GRAFT |
| 15770 | DERMA-FAT-FASCIA GRAFT |
| 15850 | REMOVE SUTURES SAME SURGEON |
| 15851 | REMOVE SUTURES DIFF SURGEON |
| 15852 | DRESSING CHANGE NOT FOR BURN |
| 15860 | TEST FOR BLOOD FLOW IN GRAFT |
| 15920 | REMOVAL OF TAIL BONE ULCER |
| 15922 | REMOVAL OF TAIL BONE ULCER |
| 15931 | REMOVE SACRUM PRESSURE SORE |
| 15933 | REMOVE SACRUM PRESSURE SORE |
| 15934 | REMOVE SACRUM PRESSURE SORE |
| 15935 | REMOVE SACRUM PRESSURE SORE |
| 15936 | REMOVE SACRUM PRESSURE SORE |
| 15937 | REMOVE SACRUM PRESSURE SORE |
| 15940 | REMOVE HIP PRESSURE SORE |
| 15941 | REMOVE HIP PRESSURE SORE |
| 15944 | REMOVE HIP PRESSURE SORE |
| 15945 | REMOVE HIP PRESSURE SORE |
| 15946 | REMOVE HIP PRESSURE SORE |
| 15950 | REMOVE THIGH PRESSURE SORE |
| 15951 | REMOVE THIGH PRESSURE SORE |
| 15952 | REMOVE THIGH PRESSURE SORE |
| 15953 | REMOVE THIGH PRESSURE SORE |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 15956 | REMOVE THIGH PRESSURE SORE |
| 15958 | REMOVE THIGH PRESSURE SORE |
| 16000 | INITIAL TREATMENT OF BURN(S) |
| 16020 | DRESS/DEBRID P-THICK BURN S |
| 16025 | DRESS/DEBRID P-THICK BURN M |
| 16030 | DRESS/DEBRID P-THICK BURN L |
| 16035 | INCISION OF BURN SCAB INITI |
| 16036 | ESCHAROTOMY ADDL INCISION |
| 17000 | DESTRUCT PREMALG LESION |
| 17003 | DESTRUCT PREMALG LES 2-14 |
| 17004 | DESTROY PREMAL LESIONS 15/> |
| 17110 | DESTRUCT B9 LESION 1-14 |
| 17111 | DESTRUCT LESION 15 OR MORE |
| 17250 | CHEM CAUT OF GRANLTJ TISSUE |
| 17260 | DESTRUCTION OF SKIN LESIONS |
| 17261 | DESTRUCTION OF SKIN LESIONS |
| 17262 | DESTRUCTION OF SKIN LESIONS |
| 17263 | DESTRUCTION OF SKIN LESIONS |
| 17264 | DESTRUCTION OF SKIN LESIONS |
| 17266 | DESTRUCTION OF SKIN LESIONS |
| 17270 | DESTRUCTION OF SKIN LESIONS |
| 17271 | DESTRUCTION OF SKIN LESIONS |
| 17272 | DESTRUCTION OF SKIN LESIONS |
| 17273 | DESTRUCTION OF SKIN LESIONS |
| 17274 | DESTRUCTION OF SKIN LESIONS |
| 17276 | DESTRUCTION OF SKIN LESIONS |
| 17280 | DESTRUCTION OF SKIN LESIONS |
| 17281 | DESTRUCTION OF SKIN LESIONS |
| 17282 | DESTRUCTION OF SKIN LESIONS |
| 17283 | DESTRUCTION OF SKIN LESIONS |
| 17284 | DESTRUCTION OF SKIN LESIONS |
| 17286 | DESTRUCTION OF SKIN LESIONS |
| 17311 | MOHS 1 STAGE H/N/HF/G |
| 17312 | MOHS ADDL STAGE |
| 17313 | MOHS 1 STAGE T/A/L |
| 17314 | MOHS ADDL STAGE T/A/L |
| 17315 | MOHS SURG ADDL BLOCK |
| 19000 | DRAINAGE OF BREAST LESION |
| 19001 | DRAIN BREAST LESION ADD-ON |
| 19020 | INCISION OF BREAST LESION |
| 19030 | INJECTION FOR BREAST X-RAY |
| 19081 | Bx breast 1st Lesion strtctc |
| 19082 | Bx breast add Lesion strtctc |
| 19083 | Bx breast 1st Lesion US imag |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 19084 | Bx breast add Lesion US imag |
| 19085 | BX BREAST 1ST LESION MR IMAG |
| 19086 | BX BREAST ADD LESION MR IMAG |
| 19100 | BX BREAST PERCUT W/O IMAGE |
| 19101 | BIOPSY OF BREAST OPEN |
| 19110 | NIPPLE EXPLORATION |
| 19112 | EXCISE BREAST DUCT FISTULA |
| 19120 | REMOVAL OF BREAST LESION |
| 19125 | EXCISION BREAST LESION |
| 19126 | EXCISION ADDL BREAST LESION |
| 19281 | PERQ DEVICE BREAST 1ST IMAG |
| 19282 | PERQ DEVICE BREAST EA IMAG |
| 19283 | PERQ DEV BREAST 1ST STRTCTC |
| 19284 | PERQ DEV BREAST ADD STRTCTC |
| 19285 | PERQ DEV BREAST 1ST US IMAG |
| 19286 | PERQ DEV BREAST ADD US IMAG |
| 19287 | PERQ DEV BREAST 1ST MR GUIDE |
| 19288 | PERQ DEV BREAST ADD MR GUIDE |
| 19294 | PREP TUM CAV IORT PRTL MAST |
| 19296 | PLACE PO BREAST CATH FOR RAD |
| 19297 | PLACE BREAST CATH FOR RAD |
| 19298 | PLACE BREAST RAD TUBE/CATHS |
| 19301 | PARTIAL MASTECTOMY |
| 19302 | P-MASTECTOMY W/LN REMOVAL |
| 19303 | MAST SIMPLE COMPLETE |
| 19305 | MAST RADICAL |
| 19306 | MAST RAD URBAN TYPE |
| 19307 | MAST MOD RAD |
| 19328 | REMOVAL OF BREAST IMPLANT |
| 19330 | REMOVAL OF IMPLANT MATERIAL |
| 19340 | IMMEDIATE BREAST PROSTHESIS |
| 19342 | DELAYED BREAST PROSTHESIS |
| 19350 | BREAST RECONSTRUCTION |
| 19355 | CORRECT INVERTED NIPPLE(S) |
| 19357 | BREAST RECONSTRUCTION |
| 19361 | BREAST RECONSTR W/LAT FLAP |
| 19364 | BREAST RECONSTRUCTION |
| 19366 | BREAST RECONSTRUCTION |
| 19367 | BREAST RECONSTRUCTION |
| 19368 | BREAST RECONSTRUCTION |
| 19369 | BREAST RECONSTRUCTION |
| 20100 | EXPLORE WOUND NECK |
| 20101 | EXPLORE WOUND CHEST |
| 20102 | EXPLORE WOUND ABDOMEN |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 20103 | EXPLORE WOUND EXTREMITY |
| 20150 | EXCISE EPIPHYSEAL BAR |
| 20200 | MUSCLE BIOPSY |
| 20205 | DEEP MUSCLE BIOPSY |
| 20206 | NEEDLE BIOPSY MUSCLE |
| 20220 | BONE BIOPSY TROCAR/NEEDLE |
| 20225 | BONE BIOPSY TROCAR/NEEDLE |
| 20240 | BONE BIOPSY OPEN SUPERFICIAL |
| 20245 | BONE BIOPSY OPEN DEEP |
| 20250 | OPEN BONE BIOPSY |
| 20251 | OPEN BONE BIOPSY |
| 20500 | INJECTION OF SINUS TRACT |
| 20501 | INJECT SINUS TRACT FOR X-RAY |
| 20520 | REMOVAL OF FOREIGN BODY |
| 20525 | REMOVAL OF FOREIGN BODY |
| 20526 | THER INJECTION CARP TUNNEL |
| 20527 | INJ DUPUYTREN CORD W/ENZYME |
| 20550 | INJ TENDON SHEATH/LIGAMENT |
| 20551 | INJ TENDON ORIGIN/INSERTION |
| 20552 | INJ TRIGGER POINT 1/2 MUSCL |
| 20553 | INJECT TRIGGER POINTS 3/> |
| 20555 | PLACE NDL MUSC/TIS FOR RT |
| 20600 | DRAIN/INJ JOINT/BURSA W/O US |
| 20604 | DRAIN/INJ JOINT/BURSA W/US |
| 20605 | DRAIN/INJ JOINT/BURSA W/O US |
| 20606 | DRAIN/INJ JOINT/BURSA W/US |
| 20610 | DRAIN/INJ JOINT/BURSA W/O US |
| 20611 | DRAIN/INJ JOINT/BURSA W/US |
| 20612 | ASPIRATE/INJ GANGLION CYST |
| 20615 | TREATMENT OF BONE CYST |
| 20650 | INSERT AND REMOVE BONE PIN |
| 20660 | APPLY REM FIXATION DEVICE |
| 20661 | APPLICATION OF HEAD BRACE |
| 20662 | APPLICATION OF PELVIS BRACE |
| 20663 | APPLICATION OF THIGH BRACE |
| 20664 | APPLICATION OF HALO |
| 20665 | REMOVAL OF FIXATION DEVICE |
| 20670 | REMOVAL OF SUPPORT IMPLANT |
| 20680 | REMOVAL OF SUPPORT IMPLANT |
| 20690 | APPLY BONE FIXATION DEVICE |
| 20692 | APPLY BONE FIXATION DEVICE |
| 20693 | ADJUST BONE FIXATION DEVICE |
| 20694 | REMOVE BONE FIXATION DEVICE |
| 20696 | COMP MULTIPLANE EXT FIXATION |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 20697 | COMP EXT FIXATE STRUT CHANGE |
| 20802 | REPLANTATION ARM COMPLETE |
| 20805 | REPLANT FOREARM COMPLETE |
| 20808 | REPLANTATION HAND COMPLETE |
| 20816 | REPLANTATION DIGIT COMPLETE |
| 20822 | REPLANTATION DIGIT COMPLETE |
| 20824 | REPLANTATION THUMB COMPLETE |
| 20827 | REPLANTATION THUMB COMPLETE |
| 20838 | REPLANTATION FOOT COMPLETE |
| 20900 | REMOVAL OF BONE FOR GRAFT |
| 20902 | REMOVAL OF BONE FOR GRAFT |
| 20910 | REMOVE CARTILAGE FOR GRAFT |
| 20912 | REMOVE CARTILAGE FOR GRAFT |
| 20920 | REMOVAL OF FASCIA FOR GRAFT |
| 20922 | REMOVAL OF FASCIA FOR GRAFT |
| 20924 | REMOVAL OF TENDON FOR GRAFT |
| 20930 | SP BONE ALGRFT MORSEL ADD-ON |
| 20931 | SP BONE ALGRFT STRUCT ADD-ON |
| 20936 | SP BONE AGRFT LOCAL ADD-ON |
| 20937 | SP BONE AGRFT MORSEL ADD-ON |
| 20938 | SP BONE AGRFT STRUCT ADD-ON |
| 20939 | BONE MARROW ASPIR BONE GRFG |
| 20950 | FLUID PRESSURE MUSCLE |
| 20955 | FIBULA BONE GRAFT MICROVASC |
| 20956 | ILIAC BONE GRAFT MICROVASC |
| 20957 | MT BONE GRAFT MICROVASC |
| 20962 | OTHER BONE GRAFT MICROVASC |
| 20969 | BONE/SKIN GRAFT MICROVASC |
| 20970 | BONE/SKIN GRAFT ILIAC CREST |
| 20972 | BONE/SKIN GRAFT METATARSAL |
| 20973 | BONE/SKIN GRAFT GREAT TOE |
| 20974 | ELECTRICAL BONE STIMULATION |
| 20975 | ELECTRICAL BONE STIMULATION |
| 20979 | US BONE STIMULATION |
| 20982 | ABLATE BONE TUMOR(S) PERQ |
| 20983 | ABLATE BONE TUMOR(S) PERQ |
| 20985 | CPTR-ASST DIR MS PX |
| 21013 | EXC FACE TUM DEEP < 2 CM |
| 21014 | EXC FACE TUM DEEP 2 CM/> |
| 21015 | RESECT FACE/SCALP TUM < 2 CM |
| 21016 | RESECT FACE/SCALP TUM 2 CM/> |
| 21025 | EXCISION OF BONE LOWER JAW |
| 21026 | EXCISION OF FACIAL BONE(S) |
| 21029 | CONTOUR OF FACE BONE LESION |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 21030 | EXCISE MAX/ZYGOMA B9 TUMOR |
| 21031 | REMOVE EXOSTOSIS MANDIBLE |
| 21032 | REMOVE EXOSTOSIS MAXILLA |
| 21034 | EXCISE MAX/ZYGOMA MAL TUMOR |
| 21040 | EXCISE MANDIBLE LESION |
| 21044 | REMOVAL OF JAW BONE LESION |
| 21045 | EXTENSIVE JAW SURGERY |
| 21046 | REMOVE MANDIBLE CYST COMPLEX |
| 21047 | EXCISE LWR JAW CYST W/REPAIR |
| 21048 | REMOVE MAXILLA CYST COMPLEX |
| 21049 | EXCIS UPPR JAW CYST W/REPAIR |
| 21100 | MAXILLOFACIAL FIXATION |
| 21116 | INJECTION JAW JOINT X-RAY |
| 21310 | CLOSED TX NOSE FX W/O MANJ |
| 21315 | CLOSED TX NOSE FX W/O STABLJ |
| 21320 | CLOSED TX NOSE FX W/ STABLJ |
| 21325 | OPEN TX NOSE FX UNCOMPLICATD |
| 21330 | OPEN TX NOSE FX W/SKELE FIXJ |
| 21335 | OPEN TX NOSE & SEPTAL FX |
| 21336 | OPEN TX SEPTAL FX W/WO STABJ |
| 21337 | CLOSED TX SEPTAL&NOSE FX |
| 21338 | OPEN NASOETHMOID FX W/O FIXJ |
| 21339 | OPEN NASOETHMOID FX W/ FIXJ |
| 21340 | PERQ TX NASOETHMOID FX |
| 21343 | OPEN TX DPRSD FRONT SINUS FX |
| 21344 | OPEN TX COMPL FRONT SINUS FX |
| 21345 | CLOSED TX NOSE/JAW FX |
| 21346 | OPN TX NASOMAX FX W/FIXJ |
| 21347 | OPN TX NASOMAX FX MULTPLE |
| 21348 | OPN TX NASOMAX FX W/GRAFT |
| 21355 | PERQ TX MALAR FRACTURE |
| 21356 | OPN TX DPRSD ZYGOMATIC ARCH |
| 21360 | OPN TX DPRSD MALAR FRACTURE |
| 21365 | OPN TX COMPLX MALAR FX |
| 21366 | OPN TX COMPLX MALAR W/GRFT |
| 21385 | OPN TX ORBIT FX TRANSANTRAL |
| 21386 | OPN TX ORBIT FX PERIORBITAL |
| 21387 | OPN TX ORBIT FX COMBINED |
| 21390 | OPN TX ORBIT PERIORBTL IMPLT |
| 21395 | OPN TX ORBIT PERIORBT W/GRFT |
| 21400 | CLOSED TX ORBIT W/O MANIPULJ |
| 21401 | CLOSED TX ORBIT W/MANIPULJ |
| 21406 | OPN TX ORBIT FX W/O IMPLANT |
| 21407 | OPN TX ORBIT FX W/IMPLANT |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 21408 | OPN TX ORBIT FX W/BONE GRFT |
| 21421 | TREAT MOUTH ROOF FRACTURE |
| 21422 | TREAT MOUTH ROOF FRACTURE |
| 21423 | TREAT MOUTH ROOF FRACTURE |
| 21431 | TREAT CRANIOFACIAL FRACTURE |
| 21432 | TREAT CRANIOFACIAL FRACTURE |
| 21433 | TREAT CRANIOFACIAL FRACTURE |
| 21435 | TREAT CRANIOFACIAL FRACTURE |
| 21436 | TREAT CRANIOFACIAL FRACTURE |
| 21440 | TREAT DENTAL RIDGE FRACTURE |
| 21445 | TREAT DENTAL RIDGE FRACTURE |
| 21450 | TREAT LOWER JAW FRACTURE |
| 21451 | TREAT LOWER JAW FRACTURE |
| 21452 | TREAT LOWER JAW FRACTURE |
| 21453 | TREAT LOWER JAW FRACTURE |
| 21454 | TREAT LOWER JAW FRACTURE |
| 21461 | TREAT LOWER JAW FRACTURE |
| 21462 | TREAT LOWER JAW FRACTURE |
| 21465 | TREAT LOWER JAW FRACTURE |
| 21470 | TREAT LOWER JAW FRACTURE |
| 21480 | RESET DISLOCATED JAW |
| 21485 | RESET DISLOCATED JAW |
| 21490 | REPAIR DISLOCATED JAW |
| 21497 | INTERDENTAL WIRING |
| 21501 | DRAIN NECK/CHEST LESION |
| 21502 | DRAIN CHEST LESION |
| 21510 | DRAINAGE OF BONE LESION |
| 21550 | BIOPSY OF NECK/CHEST |
| 21554 | EXC NECK TUM DEEP 5 CM/> |
| 21556 | EXC NECK TUM DEEP < 5 CM |
| 21557 | RESECT NECK THORAX TUMOR<5CM |
| 21558 | RESECT NECK TUMOR 5 CM/> |
| 21600 | PARTIAL REMOVAL OF RIB |
| 21601 | EXC CHEST WALL TUMOR W/RIBS |
| 21602 | EXC CH WAL TUM W/O LYMPHADEC |
| 21603 | EXC CH WAL TUM W/LYMPHADEC |
| 21610 | PARTIAL REMOVAL OF RIB |
| 21615 | REMOVAL OF RIB |
| 21616 | REMOVAL OF RIB AND NERVES |
| 21620 | PARTIAL REMOVAL OF STERNUM |
| 21627 | STERNAL DEBRIDEMENT |
| 21630 | EXTENSIVE STERNUM SURGERY |
| 21632 | EXTENSIVE STERNUM SURGERY |
| 21685 | HYOID MYOTOMY & SUSPENSION |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 21700 | REVISION OF NECK MUSCLE |
| 21705 | REVISION OF NECK MUSCLE/RIB |
| 21720 | REVISION OF NECK MUSCLE |
| 21725 | REVISION OF NECK MUSCLE |
| 21750 | REPAIR OF STERNUM SEPARATION |
| 21811 | OPTX OF RIB FX W/FIXJ SCOPE |
| 21812 | TREATMENT OF RIB FRACTURE |
| 21813 | TREATMENT OF RIB FRACTURE |
| 21820 | TREAT STERNUM FRACTURE |
| 21825 | TREAT STERNUM FRACTURE |
| 21920 | BIOPSY SOFT TISSUE OF BACK |
| 21925 | BIOPSY SOFT TISSUE OF BACK |
| 21930 | EXC BACK LES SC < 3 CM |
| 21932 | EXC BACK TUM DEEP < 5 CM |
| 21933 | EXC BACK TUM DEEP 5 CM/> |
| 21935 | RESECT BACK TUM < 5 CM |
| 21936 | RESECT BACK TUM 5 CM/> |
| 22010 | I&D P-SPINE C/T/CERV-THOR |
| 22015 | I&D ABSCESS P-SPINE L/S/LS |
| 22100 | REMOVE PART OF NECK VERTEBRA |
| 22101 | REMOVE PART THORAX VERTEBRA |
| 22102 | REMOVE PART LUMBAR VERTEBRA |
| 22103 | REMOVE EXTRA SPINE SEGMENT |
| 22110 | REMOVE PART OF NECK VERTEBRA |
| 22112 | REMOVE PART THORAX VERTEBRA |
| 22114 | REMOVE PART LUMBAR VERTEBRA |
| 22116 | REMOVE EXTRA SPINE SEGMENT |
| 22310 | CLOSED TX VERT FX W/O MANJ |
| 22315 | CLOSED TX VERT FX W/MANJ |
| 22318 | TREAT ODONTOID FX W/O GRAFT |
| 22319 | TREAT ODONTOID FX W/GRAFT |
| 22325 | TREAT SPINE FRACTURE |
| 22326 | TREAT NECK SPINE FRACTURE |
| 22327 | TREAT THORAX SPINE FRACTURE |
| 22328 | TREAT EACH ADD SPINE FX |
| 22505 | MANIPULATION OF SPINE |
| 22818 | KYPHECTOMY 1-2 SEGMENTS |
| 22819 | KYPHECTOMY 3 OR MORE |
| 22830 | EXPLORATION OF SPINAL FUSION |
| 22840 | INSERT SPINE FIXATION DEVICE |
| 22841 | INSERT SPINE FIXATION DEVICE |
| 22842 | INSERT SPINE FIXATION DEVICE |
| 22843 | INSERT SPINE FIXATION DEVICE |
| 22844 | INSERT SPINE FIXATION DEVICE |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 22845 | INSERT SPINE FIXATION DEVICE |
| 22846 | INSERT SPINE FIXATION DEVICE |
| 22847 | INSERT SPINE FIXATION DEVICE |
| 22848 | INSERT PELV FIXATION DEVICE |
| 22849 | REINSERT SPINAL FIXATION |
| 22850 | REMOVE SPINE FIXATION DEVICE |
| 22852 | REMOVE SPINE FIXATION DEVICE |
| 22853 | INSJ BIOMECHANICAL DEVICE |
| 22854 | INSJ BIOMECHANICAL DEVICE |
| 22855 | REMOVE SPINE FIXATION DEVICE |
| 22859 | INSJ BIOMECHANICAL DEVICE |
| 22904 | RADICAL RESECT ABD TUMOR<5CM |
| 22905 | RAD RESECT ABD TUMOR 5 CM/> |
| 23000 | REMOVAL OF CALCIUM DEPOSITS |
| 23020 | RELEASE SHOULDER JOINT |
| 23030 | DRAIN SHOULDER LESION |
| 23031 | DRAIN SHOULDER BURSA |
| 23035 | DRAIN SHOULDER BONE LESION |
| 23040 | EXPLORATORY SHOULDER SURGERY |
| 23044 | EXPLORATORY SHOULDER SURGERY |
| 23065 | BIOPSY SHOULDER TISSUES |
| 23066 | BIOPSY SHOULDER TISSUES |
| 23077 | RESECT SHOULDER TUMOR < 5 CM |
| 23078 | RESECT SHOULDER TUMOR 5 CM/> |
| 23100 | BIOPSY OF SHOULDER JOINT |
| 23101 | SHOULDER JOINT SURGERY |
| 23105 | REMOVE SHOULDER JOINT LINING |
| 23106 | INCISION OF COLLARBONE JOINT |
| 23107 | EXPLORE TREAT SHOULDER JOINT |
| 23120 | PARTIAL REMOVAL COLLAR BONE |
| 23125 | REMOVAL OF COLLAR BONE |
| 23130 | REMOVE SHOULDER BONE PART |
| 23140 | REMOVAL OF BONE LESION |
| 23145 | REMOVAL OF BONE LESION |
| 23146 | REMOVAL OF BONE LESION |
| 23150 | REMOVAL OF HUMERUS LESION |
| 23155 | REMOVAL OF HUMERUS LESION |
| 23156 | REMOVAL OF HUMERUS LESION |
| 23170 | REMOVE COLLAR BONE LESION |
| 23172 | REMOVE SHOULDER BLADE LESION |
| 23174 | REMOVE HUMERUS LESION |
| 23180 | REMOVE COLLAR BONE LESION |
| 23182 | REMOVE SHOULDER BLADE LESION |
| 23184 | REMOVE HUMERUS LESION |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 23190 | PARTIAL REMOVAL OF SCAPULA |
| 23195 | REMOVAL OF HEAD OF HUMERUS |
| 23200 | RESECT CLAVICLE TUMOR |
| 23210 | RESECT SCAPULA TUMOR |
| 23220 | RESECT PROX HUMERUS TUMOR |
| 23330 | REMOVE SHOULDER FOREIGN BODY |
| 23333 | REMOVE SHOULDER FB DEEP |
| 23334 | SHOULDER PROSTHESIS REMOVAL |
| 23335 | SHOULDER PROSTHESIS REMOVAL |
| 23350 | INJECTION FOR SHOULDER X-RAY |
| 23395 | MUSCLE TRANSFER SHOULDER/ARM |
| 23397 | MUSCLE TRANSFERS |
| 23400 | FIXATION OF SHOULDER BLADE |
| 23405 | INCISION OF TENDON & MUSCLE |
| 23406 | INCISE TENDON(S) & MUSCLE(S) |
| 23410 | REPAIR ROTATOR CUFF ACUTE |
| 23412 | REPAIR ROTATOR CUFF CHRONIC |
| 23415 | RELEASE OF SHOULDER LIGAMENT |
| 23420 | REPAIR OF SHOULDER |
| 23430 | REPAIR BICEPS TENDON |
| 23440 | REMOVE/TRANSPLANT TENDON |
| 23450 | REPAIR SHOULDER CAPSULE |
| 23455 | REPAIR SHOULDER CAPSULE |
| 23460 | REPAIR SHOULDER CAPSULE |
| 23462 | REPAIR SHOULDER CAPSULE |
| 23465 | REPAIR SHOULDER CAPSULE |
| 23466 | REPAIR SHOULDER CAPSULE |
| 23480 | REVISION OF COLLAR BONE |
| 23485 | REVISION OF COLLAR BONE |
| 23490 | REINFORCE CLAVICLE |
| 23491 | REINFORCE SHOULDER BONES |
| 23500 | TREAT CLAVICLE FRACTURE |
| 23505 | TREAT CLAVICLE FRACTURE |
| 23515 | TREAT CLAVICLE FRACTURE |
| 23520 | TREAT CLAVICLE DISLOCATION |
| 23525 | TREAT CLAVICLE DISLOCATION |
| 23530 | TREAT CLAVICLE DISLOCATION |
| 23532 | TREAT CLAVICLE DISLOCATION |
| 23540 | TREAT CLAVICLE DISLOCATION |
| 23545 | TREAT CLAVICLE DISLOCATION |
| 23550 | TREAT CLAVICLE DISLOCATION |
| 23552 | TREAT CLAVICLE DISLOCATION |
| 23570 | TREAT SHOULDER BLADE FX |
| 23575 | TREAT SHOULDER BLADE FX |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 23585 | TREAT SCAPULA FRACTURE |
| 23600 | TREAT HUMERUS FRACTURE |
| 23605 | TREAT HUMERUS FRACTURE |
| 23615 | TREAT HUMERUS FRACTURE |
| 23616 | TREAT HUMERUS FRACTURE |
| 23620 | TREAT HUMERUS FRACTURE |
| 23625 | TREAT HUMERUS FRACTURE |
| 23630 | TREAT HUMERUS FRACTURE |
| 23650 | TREAT SHOULDER DISLOCATION |
| 23655 | TREAT SHOULDER DISLOCATION |
| 23660 | TREAT SHOULDER DISLOCATION |
| 23665 | TREAT DISLOCATION/FRACTURE |
| 23670 | TREAT DISLOCATION/FRACTURE |
| 23675 | TREAT DISLOCATION/FRACTURE |
| 23680 | TREAT DISLOCATION/FRACTURE |
| 23700 | FIXATION OF SHOULDER |
| 23900 | AMPUTATION OF ARM & GIRDLE |
| 23920 | AMPUTATION AT SHOULDER JOINT |
| 23921 | AMPUTATION FOLLOW-UP SURGERY |
| 23930 | DRAINAGE OF ARM LESION |
| 23931 | DRAINAGE OF ARM BURSA |
| 23935 | DRAIN ARM/ELBOW BONE LESION |
| 24000 | EXPLORATORY ELBOW SURGERY |
| 24006 | RELEASE ELBOW JOINT |
| 24065 | BIOPSY ARM/ELBOW SOFT TISSUE |
| 24066 | BIOPSY ARM/ELBOW SOFT TISSUE |
| 24077 | RESECT ARM/ELBOW TUM < 5 CM |
| 24079 | RESECT ARM/ELBOW TUM 5 CM/> |
| 24100 | BIOPSY ELBOW JOINT LINING |
| 24101 | EXPLORE/TREAT ELBOW JOINT |
| 24105 | REMOVAL OF ELBOW BURSA |
| 24110 | REMOVE HUMERUS LESION |
| 24115 | REMOVE/GRAFT BONE LESION |
| 24116 | REMOVE/GRAFT BONE LESION |
| 24120 | REMOVE ELBOW LESION |
| 24125 | REMOVE/GRAFT BONE LESION |
| 24126 | REMOVE/GRAFT BONE LESION |
| 24130 | REMOVAL OF HEAD OF RADIUS |
| 24134 | REMOVAL OF ARM BONE LESION |
| 24136 | REMOVE RADIUS BONE LESION |
| 24138 | REMOVE ELBOW BONE LESION |
| 24140 | PARTIAL REMOVAL OF ARM BONE |
| 24145 | PARTIAL REMOVAL OF RADIUS |
| 24147 | PARTIAL REMOVAL OF ELBOW |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 24149 | RADICAL RESECTION OF ELBOW |
| 24150 | RESECT DISTAL HUMERUS TUMOR |
| 24152 | RESECT RADIUS TUMOR |
| 24155 | REMOVAL OF ELBOW JOINT |
| 24200 | REMOVAL OF ARM FOREIGN BODY |
| 24201 | REMOVAL OF ARM FOREIGN BODY |
| 24220 | INJECTION FOR ELBOW X-RAY |
| 24300 | MANIPULATE ELBOW W/ANESTH |
| 24301 | MUSCLE/TENDON TRANSFER |
| 24305 | ARM TENDON LENGTHENING |
| 24310 | REVISION OF ARM TENDON |
| 24332 | TENOLYSIS TRICEPS |
| 24340 | REPAIR OF BICEPS TENDON |
| 24341 | REPAIR ARM TENDON/MUSCLE |
| 24342 | REPAIR OF RUPTURED TENDON |
| 24343 | REPR ELBOW LAT LIGMNT W/TISS |
| 24344 | RECONSTRUCT ELBOW LAT LIGMNT |
| 24345 | REPR ELBW MED LIGMNT W/TISSU |
| 24346 | RECONSTRUCT ELBOW MED LIGMNT |
| 24357 | REPAIR ELBOW PERC |
| 24358 | REPAIR ELBOW W/DEB OPEN |
| 24359 | REPAIR ELBOW DEB/ATTCH OPEN |
| 24400 | REVISION OF HUMERUS |
| 24410 | REVISION OF HUMERUS |
| 24430 | REPAIR OF HUMERUS |
| 24435 | REPAIR HUMERUS WITH GRAFT |
| 24470 | REVISION OF ELBOW JOINT |
| 24495 | DECOMPRESSION OF FOREARM |
| 24500 | TREAT HUMERUS FRACTURE |
| 24505 | TREAT HUMERUS FRACTURE |
| 24515 | TREAT HUMERUS FRACTURE |
| 24516 | TREAT HUMERUS FRACTURE |
| 24530 | TREAT HUMERUS FRACTURE |
| 24535 | TREAT HUMERUS FRACTURE |
| 24538 | TREAT HUMERUS FRACTURE |
| 24545 | TREAT HUMERUS FRACTURE |
| 24546 | TREAT HUMERUS FRACTURE |
| 24560 | TREAT HUMERUS FRACTURE |
| 24565 | TREAT HUMERUS FRACTURE |
| 24566 | TREAT HUMERUS FRACTURE |
| 24575 | TREAT HUMERUS FRACTURE |
| 24576 | TREAT HUMERUS FRACTURE |
| 24577 | TREAT HUMERUS FRACTURE |
| 24579 | TREAT HUMERUS FRACTURE |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 24582 | TREAT HUMERUS FRACTURE |
| 24586 | TREAT ELBOW FRACTURE |
| 24587 | TREAT ELBOW FRACTURE |
| 24600 | TREAT ELBOW DISLOCATION |
| 24605 | TREAT ELBOW DISLOCATION |
| 24615 | TREAT ELBOW DISLOCATION |
| 24620 | TREAT ELBOW FRACTURE |
| 24635 | TREAT ELBOW FRACTURE |
| 24640 | TREAT ELBOW DISLOCATION |
| 24650 | TREAT RADIUS FRACTURE |
| 24655 | TREAT RADIUS FRACTURE |
| 24665 | TREAT RADIUS FRACTURE |
| 24666 | TREAT RADIUS FRACTURE |
| 24670 | TREAT ULNAR FRACTURE |
| 24675 | TREAT ULNAR FRACTURE |
| 24685 | TREAT ULNAR FRACTURE |
| 24800 | FUSION OF ELBOW JOINT |
| 24802 | FUSION/GRAFT OF ELBOW JOINT |
| 24900 | AMPUTATION OF UPPER ARM |
| 24920 | AMPUTATION OF UPPER ARM |
| 24925 | AMPUTATION FOLLOW-UP SURGERY |
| 24930 | AMPUTATION FOLLOW-UP SURGERY |
| 24931 | AMPUTATE UPPER ARM & IMPLANT |
| 24935 | REVISION OF AMPUTATION |
| 25000 | INCISION OF TENDON SHEATH |
| 25001 | INCISE FLEXOR CARPI RADIALIS |
| 25020 | DECOMPRESS FOREARM 1 SPACE |
| 25023 | DECOMPRESS FOREARM 1 SPACE |
| 25024 | DECOMPRESS FOREARM 2 SPACES |
| 25025 | DECOMPRESS FOREARM 2 SPACES |
| 25028 | DRAINAGE OF FOREARM LESION |
| 25031 | DRAINAGE OF FOREARM BURSA |
| 25035 | TREAT FOREARM BONE LESION |
| 25040 | EXPLORE/TREAT WRIST JOINT |
| 25065 | BIOPSY FOREARM SOFT TISSUES |
| 25066 | BIOPSY FOREARM SOFT TISSUES |
| 25071 | EXC FOREARM LES SC 3 CM/> |
| 25073 | EXC FOREARM TUM DEEP 3 CM/> |
| 25075 | EXC FOREARM LES SC < 3 CM |
| 25076 | EXC FOREARM TUM DEEP < 3 CM |
| 25077 | RESECT FOREARM/WRIST TUM<3CM |
| 25078 | RESECT FORARM/WRIST TUM 3CM> |
| 25085 | INCISION OF WRIST CAPSULE |
| 25100 | BIOPSY OF WRIST JOINT |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 25101 | EXPLORE/TREAT WRIST JOINT |
| 25105 | REMOVE WRIST JOINT LINING |
| 25107 | REMOVE WRIST JOINT CARTILAGE |
| 25109 | EXCISE TENDON FOREARM/WRIST |
| 25110 | REMOVE WRIST TENDON LESION |
| 25111 | REMOVE WRIST TENDON LESION |
| 25112 | REREMOVE WRIST TENDON LESION |
| 25115 | REMOVE WRIST/FOREARM LESION |
| 25116 | REMOVE WRIST/FOREARM LESION |
| 25118 | EXCISE WRIST TENDON SHEATH |
| 25119 | PARTIAL REMOVAL OF ULNA |
| 25120 | REMOVAL OF FOREARM LESION |
| 25125 | REMOVE/GRAFT FOREARM LESION |
| 25126 | REMOVE/GRAFT FOREARM LESION |
| 25130 | REMOVAL OF WRIST LESION |
| 25135 | REMOVE & GRAFT WRIST LESION |
| 25136 | REMOVE & GRAFT WRIST LESION |
| 25145 | REMOVE FOREARM BONE LESION |
| 25150 | PARTIAL REMOVAL OF ULNA |
| 25151 | PARTIAL REMOVAL OF RADIUS |
| 25170 | RESECT RADIUS/ULNAR TUMOR |
| 25210 | REMOVAL OF WRIST BONE |
| 25215 | REMOVAL OF WRIST BONES |
| 25230 | PARTIAL REMOVAL OF RADIUS |
| 25240 | PARTIAL REMOVAL OF ULNA |
| 25246 | INJECTION FOR WRIST X-RAY |
| 25248 | REMOVE FOREARM FOREIGN BODY |
| 25250 | REMOVAL OF WRIST PROSTHESIS |
| 25251 | REMOVAL OF WRIST PROSTHESIS |
| 25259 | MANIPULATE WRIST W/ANESTHES |
| 25260 | REPAIR FOREARM TENDON/MUSCLE |
| 25263 | REPAIR FOREARM TENDON/MUSCLE |
| 25265 | REPAIR FOREARM TENDON/MUSCLE |
| 25270 | REPAIR FOREARM TENDON/MUSCLE |
| 25272 | REPAIR FOREARM TENDON/MUSCLE |
| 25274 | REPAIR FOREARM TENDON/MUSCLE |
| 25275 | REPAIR FOREARM TENDON SHEATH |
| 25280 | REVISE WRIST/FOREARM TENDON |
| 25290 | INCISE WRIST/FOREARM TENDON |
| 25295 | RELEASE WRIST/FOREARM TENDON |
| 25300 | FUSION OF TENDONS AT WRIST |
| 25301 | FUSION OF TENDONS AT WRIST |
| 25310 | TRANSPLANT FOREARM TENDON |
| 25312 | TRANSPLANT FOREARM TENDON |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 25315 | REVISE PALSY HAND TENDON(S) |
| 25316 | REVISE PALSY HAND TENDON(S) |
| 25320 | REPAIR/REVISE WRIST JOINT |
| 25337 | RECONSTRUCT ULNA/RADIOULNAR |
| 25350 | REVISION OF RADIUS |
| 25355 | REVISION OF RADIUS |
| 25360 | REVISION OF ULNA |
| 25365 | REVISE RADIUS & ULNA |
| 25370 | REVISE RADIUS OR ULNA |
| 25375 | REVISE RADIUS & ULNA |
| 25390 | SHORTEN RADIUS OR ULNA |
| 25391 | LENGTHEN RADIUS OR ULNA |
| 25392 | SHORTEN RADIUS & ULNA |
| 25393 | LENGTHEN RADIUS & ULNA |
| 25394 | REPAIR CARPAL BONE SHORTEN |
| 25400 | REPAIR RADIUS OR ULNA |
| 25405 | REPAIR/GRAFT RADIUS OR ULNA |
| 25415 | REPAIR RADIUS & ULNA |
| 25420 | REPAIR/GRAFT RADIUS & ULNA |
| 25425 | REPAIR/GRAFT RADIUS OR ULNA |
| 25426 | REPAIR/GRAFT RADIUS & ULNA |
| 25430 | VASC GRAFT INTO CARPAL BONE |
| 25431 | REPAIR NONUNION CARPAL BONE |
| 25440 | REPAIR/GRAFT WRIST BONE |
| 25450 | REVISION OF WRIST JOINT |
| 25455 | REVISION OF WRIST JOINT |
| 25490 | REINFORCE RADIUS |
| 25491 | REINFORCE ULNA |
| 25492 | REINFORCE RADIUS AND ULNA |
| 25500 | TREAT FRACTURE OF RADIUS |
| 25505 | TREAT FRACTURE OF RADIUS |
| 25515 | TREAT FRACTURE OF RADIUS |
| 25520 | TREAT FRACTURE OF RADIUS |
| 25525 | TREAT FRACTURE OF RADIUS |
| 25526 | TREAT FRACTURE OF RADIUS |
| 25530 | TREAT FRACTURE OF ULNA |
| 25535 | TREAT FRACTURE OF ULNA |
| 25545 | TREAT FRACTURE OF ULNA |
| 25560 | TREAT FRACTURE RADIUS & ULNA |
| 25565 | TREAT FRACTURE RADIUS & ULNA |
| 25574 | TREAT FRACTURE RADIUS & ULNA |
| 25575 | TREAT FRACTURE RADIUS/ULNA |
| 25600 | TREAT FRACTURE RADIUS/ULNA |
| 25605 | TREAT FRACTURE RADIUS/ULNA |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 25606 | TREAT FX DISTAL RADIAL |
| 25607 | TREAT FX RAD EXTRA-ARTICUL |
| 25608 | TREAT FX RAD INTRA-ARTICUL |
| 25609 | TREAT FX RADIAL 3+ FRAG |
| 25622 | TREAT WRIST BONE FRACTURE |
| 25624 | TREAT WRIST BONE FRACTURE |
| 25628 | TREAT WRIST BONE FRACTURE |
| 25630 | TREAT WRIST BONE FRACTURE |
| 25635 | TREAT WRIST BONE FRACTURE |
| 25645 | TREAT WRIST BONE FRACTURE |
| 25650 | TREAT WRIST BONE FRACTURE |
| 25651 | PIN ULNAR STYLOID FRACTURE |
| 25652 | TREAT FRACTURE ULNAR STYLOID |
| 25660 | TREAT WRIST DISLOCATION |
| 25670 | TREAT WRIST DISLOCATION |
| 25671 | PIN RADIOULNAR DISLOCATION |
| 25675 | TREAT WRIST DISLOCATION |
| 25676 | TREAT WRIST DISLOCATION |
| 25680 | TREAT WRIST FRACTURE |
| 25685 | TREAT WRIST FRACTURE |
| 25690 | TREAT WRIST DISLOCATION |
| 25695 | TREAT WRIST DISLOCATION |
| 25900 | AMPUTATION OF FOREARM |
| 25905 | AMPUTATION OF FOREARM |
| 25907 | AMPUTATION FOLLOW-UP SURGERY |
| 25909 | AMPUTATION FOLLOW-UP SURGERY |
| 25920 | AMPUTATE HAND AT WRIST |
| 25922 | AMPUTATE HAND AT WRIST |
| 25924 | AMPUTATION FOLLOW-UP SURGERY |
| 25927 | AMPUTATION OF HAND |
| 25929 | AMPUTATION FOLLOW-UP SURGERY |
| 25931 | AMPUTATION FOLLOW-UP SURGERY |
| 26010 | DRAINAGE OF FINGER ABSCESS |
| 26011 | DRAINAGE OF FINGER ABSCESS |
| 26020 | DRAIN HAND TENDON SHEATH |
| 26025 | DRAINAGE OF PALM BURSA |
| 26030 | DRAINAGE OF PALM BURSAS |
| 26034 | TREAT HAND BONE LESION |
| 26035 | DECOMPRESS FINGERS/HAND |
| 26037 | DECOMPRESS FINGERS/HAND |
| 26040 | RELEASE PALM CONTRACTURE |
| 26045 | RELEASE PALM CONTRACTURE |
| 26055 | INCISE FINGER TENDON SHEATH |
| 26060 | INCISION OF FINGER TENDON |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 26070 | EXPLORE/TREAT HAND JOINT |
| 26075 | EXPLORE/TREAT FINGER JOINT |
| 26080 | EXPLORE/TREAT FINGER JOINT |
| 26100 | BIOPSY HAND JOINT LINING |
| 26105 | BIOPSY FINGER JOINT LINING |
| 26110 | BIOPSY FINGER JOINT LINING |
| 26111 | EXC HAND LES SC 1.5 CM/> |
| 26113 | EXC HAND TUM DEEP 1.5 CM/> |
| 26115 | EXC HAND LES SC < 1.5 CM |
| 26116 | EXC HAND TUM DEEP < 1.5 CM |
| 26117 | RAD RESECT HAND TUMOR < 3 CM |
| 26118 | RAD RESECT HAND TUMOR 3 CM/> |
| 26121 | RELEASE PALM CONTRACTURE |
| 26123 | RELEASE PALM CONTRACTURE |
| 26125 | RELEASE PALM CONTRACTURE |
| 26130 | REMOVE WRIST JOINT LINING |
| 26135 | REVISE FINGER JOINT EACH |
| 26140 | REVISE FINGER JOINT EACH |
| 26145 | TENDON EXCISION PALM/FINGER |
| 26160 | REMOVE TENDON SHEATH LESION |
| 26170 | REMOVAL OF PALM TENDON EACH |
| 26180 | REMOVAL OF FINGER TENDON |
| 26185 | REMOVE FINGER BONE |
| 26200 | REMOVE HAND BONE LESION |
| 26205 | REMOVE/GRAFT BONE LESION |
| 26210 | REMOVAL OF FINGER LESION |
| 26215 | REMOVE/GRAFT FINGER LESION |
| 26230 | PARTIAL REMOVAL OF HAND BONE |
| 26235 | PARTIAL REMOVAL FINGER BONE |
| 26236 | PARTIAL REMOVAL FINGER BONE |
| 26250 | EXTENSIVE HAND SURGERY |
| 26260 | RESECT PROX FINGER TUMOR |
| 26262 | RESECT DISTAL FINGER TUMOR |
| 26320 | REMOVAL OF IMPLANT FROM HAND |
| 26340 | MANIPULATE FINGER W/ANESTH |
| 26341 | MANIPULAT PALM CORD POST INJ |
| 26350 | REPAIR FINGER/HAND TENDON |
| 26352 | REPAIR/GRAFT HAND TENDON |
| 26356 | REPAIR FINGER/HAND TENDON |
| 26357 | REPAIR FINGER/HAND TENDON |
| 26358 | REPAIR/GRAFT HAND TENDON |
| 26370 | REPAIR FINGER/HAND TENDON |
| 26372 | REPAIR/GRAFT HAND TENDON |
| 26373 | REPAIR FINGER/HAND TENDON |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 26390 | REVISE HAND/FINGER TENDON |
| 26392 | REPAIR/GRAFT HAND TENDON |
| 26410 | REPAIR HAND TENDON |
| 26412 | REPAIR/GRAFT HAND TENDON |
| 26415 | EXCISION HAND/FINGER TENDON |
| 26416 | GRAFT HAND OR FINGER TENDON |
| 26418 | REPAIR FINGER TENDON |
| 26420 | REPAIR/GRAFT FINGER TENDON |
| 26426 | REPAIR FINGER/HAND TENDON |
| 26428 | REPAIR/GRAFT FINGER TENDON |
| 26432 | REPAIR FINGER TENDON |
| 26433 | REPAIR FINGER TENDON |
| 26434 | REPAIR/GRAFT FINGER TENDON |
| 26437 | REALIGNMENT OF TENDONS |
| 26440 | RELEASE PALM/FINGER TENDON |
| 26442 | RELEASE PALM & FINGER TENDON |
| 26445 | RELEASE HAND/FINGER TENDON |
| 26449 | RELEASE FOREARM/HAND TENDON |
| 26450 | INCISION OF PALM TENDON |
| 26455 | INCISION OF FINGER TENDON |
| 26460 | INCISE HAND/FINGER TENDON |
| 26471 | FUSION OF FINGER TENDONS |
| 26474 | FUSION OF FINGER TENDONS |
| 26476 | TENDON LENGTHENING |
| 26477 | TENDON SHORTENING |
| 26478 | LENGTHENING OF HAND TENDON |
| 26479 | SHORTENING OF HAND TENDON |
| 26480 | TRANSPLANT HAND TENDON |
| 26483 | TRANSPLANT/GRAFT HAND TENDON |
| 26485 | TRANSPLANT PALM TENDON |
| 26489 | TRANSPLANT/GRAFT PALM TENDON |
| 26490 | REVISE THUMB TENDON |
| 26492 | TENDON TRANSFER WITH GRAFT |
| 26494 | HAND TENDON/MUSCLE TRANSFER |
| 26496 | REVISE THUMB TENDON |
| 26497 | FINGER TENDON TRANSFER |
| 26498 | FINGER TENDON TRANSFER |
| 26499 | REVISION OF FINGER |
| 26500 | HAND TENDON RECONSTRUCTION |
| 26502 | HAND TENDON RECONSTRUCTION |
| 26508 | RELEASE THUMB CONTRACTURE |
| 26510 | THUMB TENDON TRANSFER |
| 26516 | FUSION OF KNUCKLE JOINT |
| 26517 | FUSION OF KNUCKLE JOINTS |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 26518 | FUSION OF KNUCKLE JOINTS |
| 26520 | RELEASE KNUCKLE CONTRACTURE |
| 26525 | RELEASE FINGER CONTRACTURE |
| 26540 | REPAIR HAND JOINT |
| 26541 | REPAIR HAND JOINT WITH GRAFT |
| 26542 | REPAIR HAND JOINT WITH GRAFT |
| 26545 | RECONSTRUCT FINGER JOINT |
| 26546 | REPAIR NONUNION HAND |
| 26548 | RECONSTRUCT FINGER JOINT |
| 26550 | CONSTRUCT THUMB REPLACEMENT |
| 26560 | REPAIR OF WEB FINGER |
| 26561 | REPAIR OF WEB FINGER |
| 26562 | REPAIR OF WEB FINGER |
| 26565 | CORRECT METACARPAL FLAW |
| 26567 | CORRECT FINGER DEFORMITY |
| 26591 | REPAIR MUSCLES OF HAND |
| 26593 | RELEASE MUSCLES OF HAND |
| 26596 | EXCISION CONSTRICTING TISSUE |
| 26600 | TREAT METACARPAL FRACTURE |
| 26605 | TREAT METACARPAL FRACTURE |
| 26607 | TREAT METACARPAL FRACTURE |
| 26608 | TREAT METACARPAL FRACTURE |
| 26615 | TREAT METACARPAL FRACTURE |
| 26641 | TREAT THUMB DISLOCATION |
| 26645 | TREAT THUMB FRACTURE |
| 26650 | TREAT THUMB FRACTURE |
| 26665 | TREAT THUMB FRACTURE |
| 26670 | TREAT HAND DISLOCATION |
| 26675 | TREAT HAND DISLOCATION |
| 26676 | PIN HAND DISLOCATION |
| 26685 | TREAT HAND DISLOCATION |
| 26686 | TREAT HAND DISLOCATION |
| 26700 | TREAT KNUCKLE DISLOCATION |
| 26705 | TREAT KNUCKLE DISLOCATION |
| 26706 | PIN KNUCKLE DISLOCATION |
| 26715 | TREAT KNUCKLE DISLOCATION |
| 26720 | TREAT FINGER FRACTURE EACH |
| 26725 | TREAT FINGER FRACTURE EACH |
| 26727 | TREAT FINGER FRACTURE EACH |
| 26735 | TREAT FINGER FRACTURE EACH |
| 26740 | TREAT FINGER FRACTURE EACH |
| 26742 | TREAT FINGER FRACTURE EACH |
| 26746 | TREAT FINGER FRACTURE EACH |
| 26750 | TREAT FINGER FRACTURE EACH |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 26755 | TREAT FINGER FRACTURE EACH |
| 26756 | PIN FINGER FRACTURE EACH |
| 26765 | TREAT FINGER FRACTURE EACH |
| 26770 | TREAT FINGER DISLOCATION |
| 26775 | TREAT FINGER DISLOCATION |
| 26776 | PIN FINGER DISLOCATION |
| 26785 | TREAT FINGER DISLOCATION |
| 26820 | THUMB FUSION WITH GRAFT |
| 26841 | FUSION OF THUMB |
| 26842 | THUMB FUSION WITH GRAFT |
| 26843 | FUSION OF HAND JOINT |
| 26844 | FUSION/GRAFT OF HAND JOINT |
| 26850 | FUSION OF KNUCKLE |
| 26852 | FUSION OF KNUCKLE WITH GRAFT |
| 26860 | FUSION OF FINGER JOINT |
| 26861 | FUSION OF FINGER JNT ADD-ON |
| 26862 | FUSION/GRAFT OF FINGER JOINT |
| 26863 | FUSE/GRAFT ADDED JOINT |
| 26910 | AMPUTATE METACARPAL BONE |
| 26951 | AMPUTATION OF FINGER/THUMB |
| 26952 | AMPUTATION OF FINGER/THUMB |
| 26990 | DRAINAGE OF PELVIS LESION |
| 26991 | DRAINAGE OF PELVIS BURSA |
| 26992 | DRAINAGE OF BONE LESION |
| 27000 | INCISION OF HIP TENDON |
| 27001 | INCISION OF HIP TENDON |
| 27003 | INCISION OF HIP TENDON |
| 27005 | INCISION OF HIP TENDON |
| 27006 | INCISION OF HIP TENDONS |
| 27025 | INCISION OF HIP/THIGH FASCIA |
| 27027 | BUTTOCK FASCIOTOMY |
| 27030 | DRAINAGE OF HIP JOINT |
| 27033 | EXPLORATION OF HIP JOINT |
| 27035 | DENERVATION OF HIP JOINT |
| 27036 | EXCISION OF HIP JOINT/MUSCLE |
| 27040 | BIOPSY OF SOFT TISSUES |
| 27041 | BIOPSY OF SOFT TISSUES |
| 27043 | EXC HIP PELVIS LES SC 3 CM/> |
| 27049 | RESECT HIP/PELV TUM < 5 CM |
| 27050 | BIOPSY OF SACROILIAC JOINT |
| 27052 | BIOPSY OF HIP JOINT |
| 27054 | REMOVAL OF HIP JOINT LINING |
| 27057 | BUTTOCK FASCIOTOMY W/DBRDMT |
| 27059 | RESECT HIP/PELV TUM 5 CM/> |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 27060 | REMOVAL OF ISCHIAL BURSA |
| 27062 | REMOVE FEMUR LESION/BURSA |
| 27065 | REMOVE HIP BONE LES SUPER |
| 27066 | REMOVE HIP BONE LES DEEP |
| 27067 | REMOVE/GRAFT HIP BONE LESION |
| 27070 | PART REMOVE HIP BONE SUPER |
| 27071 | PART REMOVAL HIP BONE DEEP |
| 27075 | RESECT HIP TUMOR |
| 27076 | RESECT HIP TUM INCL ACETABUL |
| 27077 | RESECT HIP TUM W/INNOM BONE |
| 27078 | RSECT HIP TUM INCL FEMUR |
| 27080 | REMOVAL OF TAIL BONE |
| 27086 | REMOVE HIP FOREIGN BODY |
| 27087 | REMOVE HIP FOREIGN BODY |
| 27090 | REMOVAL OF HIP PROSTHESIS |
| 27091 | REMOVAL OF HIP PROSTHESIS |
| 27093 | INJECTION FOR HIP X-RAY |
| 27095 | INJECTION FOR HIP X-RAY |
| 27096 | INJECT SACROILIAC JOINT |
| 27097 | REVISION OF HIP TENDON |
| 27098 | TRANSFER TENDON TO PELVIS |
| 27100 | TRANSFER OF ABDOMINAL MUSCLE |
| 27105 | TRANSFER OF SPINAL MUSCLE |
| 27110 | TRANSFER OF ILIOPSOAS MUSCLE |
| 27111 | TRANSFER OF ILIOPSOAS MUSCLE |
| 27140 | TRANSPLANT FEMUR RIDGE |
| 27146 | INCISION OF HIP BONE |
| 27147 | REVISION OF HIP BONE |
| 27151 | INCISION OF HIP BONES |
| 27156 | REVISION OF HIP BONES |
| 27158 | REVISION OF PELVIS |
| 27161 | INCISION OF NECK OF FEMUR |
| 27165 | INCISION/FIXATION OF FEMUR |
| 27170 | REPAIR/GRAFT FEMUR HEAD/NECK |
| 27175 | TREAT SLIPPED EPIPHYSIS |
| 27176 | TREAT SLIPPED EPIPHYSIS |
| 27177 | TREAT SLIPPED EPIPHYSIS |
| 27178 | TREAT SLIPPED EPIPHYSIS |
| 27179 | REVISE HEAD/NECK OF FEMUR |
| 27181 | TREAT SLIPPED EPIPHYSIS |
| 27185 | REVISION OF FEMUR EPIPHYSIS |
| 27187 | REINFORCE HIP BONES |
| 27197 | CLSD TX PELVIC RING FX |
| 27198 | CLSD TX PELVIC RING FX |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 27200 | TREAT TAIL BONE FRACTURE |
| 27202 | TREAT TAIL BONE FRACTURE |
| 27215 | TREAT PELVIC FRACTURE(S) |
| 27216 | TREAT PELVIC RING FRACTURE |
| 27217 | TREAT PELVIC RING FRACTURE |
| 27218 | TREAT PELVIC RING FRACTURE |
| 27220 | TREAT HIP SOCKET FRACTURE |
| 27222 | TREAT HIP SOCKET FRACTURE |
| 27226 | TREAT HIP WALL FRACTURE |
| 27227 | TREAT HIP FRACTURE(S) |
| 27228 | TREAT HIP FRACTURE(S) |
| 27230 | TREAT THIGH FRACTURE |
| 27232 | TREAT THIGH FRACTURE |
| 27235 | TREAT THIGH FRACTURE |
| 27236 | TREAT THIGH FRACTURE |
| 27238 | TREAT THIGH FRACTURE |
| 27240 | TREAT THIGH FRACTURE |
| 27244 | TREAT THIGH FRACTURE |
| 27245 | TREAT THIGH FRACTURE |
| 27246 | TREAT THIGH FRACTURE |
| 27248 | TREAT THIGH FRACTURE |
| 27250 | TREAT HIP DISLOCATION |
| 27252 | TREAT HIP DISLOCATION |
| 27253 | TREAT HIP DISLOCATION |
| 27254 | TREAT HIP DISLOCATION |
| 27256 | TREAT HIP DISLOCATION |
| 27257 | TREAT HIP DISLOCATION |
| 27258 | TREAT HIP DISLOCATION |
| 27259 | TREAT HIP DISLOCATION |
| 27265 | TREAT HIP DISLOCATION |
| 27266 | TREAT HIP DISLOCATION |
| 27267 | CLTX THIGH FX |
| 27268 | CLTX THIGH FX W/MNPJ |
| 27269 | OPTX THIGH FX |
| 27275 | MANIPULATION OF HIP JOINT |
| 27280 | FUSION OF SACROILIAC JOINT |
| 27282 | FUSION OF PUBIC BONES |
| 27284 | FUSION OF HIP JOINT |
| 27286 | FUSION OF HIP JOINT |
| 27290 | AMPUTATION OF LEG AT HIP |
| 27295 | AMPUTATION OF LEG AT HIP |
| 27301 | DRAIN THIGH/KNEE LESION |
| 27303 | DRAINAGE OF BONE LESION |
| 27305 | INCISE THIGH TENDON & FASCIA |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 27306 | INCISION OF THIGH TENDON |
| 27307 | INCISION OF THIGH TENDONS |
| 27310 | EXPLORATION OF KNEE JOINT |
| 27323 | BIOPSY THIGH SOFT TISSUES |
| 27324 | BIOPSY THIGH SOFT TISSUES |
| 27325 | NEURECTOMY HAMSTRING |
| 27326 | NEURECTOMY POPLITEAL |
| 27329 | RESECT THIGH/KNEE TUM < 5 CM |
| 27330 | BIOPSY KNEE JOINT LINING |
| 27331 | EXPLORE/TREAT KNEE JOINT |
| 27332 | REMOVAL OF KNEE CARTILAGE |
| 27333 | REMOVAL OF KNEE CARTILAGE |
| 27334 | REMOVE KNEE JOINT LINING |
| 27335 | REMOVE KNEE JOINT LINING |
| 27340 | REMOVAL OF KNEECAP BURSA |
| 27345 | REMOVAL OF KNEE CYST |
| 27347 | REMOVE KNEE CYST |
| 27350 | REMOVAL OF KNEECAP |
| 27355 | REMOVE FEMUR LESION |
| 27356 | REMOVE FEMUR LESION/GRAFT |
| 27357 | REMOVE FEMUR LESION/GRAFT |
| 27358 | REMOVE FEMUR LESION/FIXATION |
| 27360 | PARTIAL REMOVAL LEG BONE(S) |
| 27364 | RESECT THIGH/KNEE TUM 5 CM/> |
| 27365 | RESECT FEMUR/KNEE TUMOR |
| 27369 | NJX CNTRST KNE ARTHG/CT/MRI |
| 27372 | REMOVAL OF FOREIGN BODY |
| 27380 | REPAIR OF KNEECAP TENDON |
| 27381 | REPAIR/GRAFT KNEECAP TENDON |
| 27385 | REPAIR OF THIGH MUSCLE |
| 27386 | REPAIR/GRAFT OF THIGH MUSCLE |
| 27390 | INCISION OF THIGH TENDON |
| 27391 | INCISION OF THIGH TENDONS |
| 27392 | INCISION OF THIGH TENDONS |
| 27393 | LENGTHENING OF THIGH TENDON |
| 27394 | LENGTHENING OF THIGH TENDONS |
| 27395 | LENGTHENING OF THIGH TENDONS |
| 27396 | TRANSPLANT OF THIGH TENDON |
| 27397 | TRANSPLANTS OF THIGH TENDONS |
| 27400 | REVISE THIGH MUSCLES/TENDONS |
| 27403 | REPAIR OF KNEE CARTILAGE |
| 27405 | REPAIR OF KNEE LIGAMENT |
| 27407 | REPAIR OF KNEE LIGAMENT |
| 27409 | REPAIR OF KNEE LIGAMENTS |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 27412 | AUTOCHONDROCYTE IMPLANT KNEE |
| 27415 | OSTEOCHONDRAL KNEE ALLOGRAFT |
| 27416 | OSTEOCHONDRAL KNEE AUTOGRAFT |
| 27418 | REPAIR DEGENERATED KNEECAP |
| 27420 | REVISION OF UNSTABLE KNEECAP |
| 27422 | REVISION OF UNSTABLE KNEECAP |
| 27424 | REVISION/REMOVAL OF KNEECAP |
| 27425 | LAT RETINACULAR RELEASE OPEN |
| 27427 | RECONSTRUCTION KNEE |
| 27428 | RECONSTRUCTION KNEE |
| 27429 | RECONSTRUCTION KNEE |
| 27430 | REVISION OF THIGH MUSCLES |
| 27435 | INCISION OF KNEE JOINT |
| 27448 | INCISION OF THIGH |
| 27450 | INCISION OF THIGH |
| 27454 | REALIGNMENT OF THIGH BONE |
| 27465 | SHORTENING OF THIGH BONE |
| 27466 | LENGTHENING OF THIGH BONE |
| 27468 | SHORTEN/LENGTHEN THIGHS |
| 27470 | REPAIR OF THIGH |
| 27472 | REPAIR/GRAFT OF THIGH |
| 27475 | SURGERY TO STOP LEG GROWTH |
| 27477 | SURGERY TO STOP LEG GROWTH |
| 27479 | SURGERY TO STOP LEG GROWTH |
| 27485 | SURGERY TO STOP LEG GROWTH |
| 27496 | DECOMPRESSION OF THIGH/KNEE |
| 27497 | DECOMPRESSION OF THIGH/KNEE |
| 27498 | DECOMPRESSION OF THIGH/KNEE |
| 27499 | DECOMPRESSION OF THIGH/KNEE |
| 27500 | TREATMENT OF THIGH FRACTURE |
| 27501 | TREATMENT OF THIGH FRACTURE |
| 27502 | TREATMENT OF THIGH FRACTURE |
| 27503 | TREATMENT OF THIGH FRACTURE |
| 27506 | TREATMENT OF THIGH FRACTURE |
| 27507 | TREATMENT OF THIGH FRACTURE |
| 27508 | TREATMENT OF THIGH FRACTURE |
| 27509 | TREATMENT OF THIGH FRACTURE |
| 27510 | TREATMENT OF THIGH FRACTURE |
| 27511 | TREATMENT OF THIGH FRACTURE |
| 27513 | TREATMENT OF THIGH FRACTURE |
| 27514 | TREATMENT OF THIGH FRACTURE |
| 27516 | TREAT THIGH FX GROWTH PLATE |
| 27517 | TREAT THIGH FX GROWTH PLATE |
| 27519 | TREAT THIGH FX GROWTH PLATE |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 27520 | TREAT KNEECAP FRACTURE |
| 27524 | TREAT KNEECAP FRACTURE |
| 27530 | TREAT KNEE FRACTURE |
| 27532 | TREAT KNEE FRACTURE |
| 27535 | TREAT KNEE FRACTURE |
| 27536 | TREAT KNEE FRACTURE |
| 27538 | TREAT KNEE FRACTURE(S) |
| 27540 | TREAT KNEE FRACTURE |
| 27550 | TREAT KNEE DISLOCATION |
| 27552 | TREAT KNEE DISLOCATION |
| 27556 | TREAT KNEE DISLOCATION |
| 27557 | TREAT KNEE DISLOCATION |
| 27558 | TREAT KNEE DISLOCATION |
| 27560 | TREAT KNEECAP DISLOCATION |
| 27562 | TREAT KNEECAP DISLOCATION |
| 27566 | TREAT KNEECAP DISLOCATION |
| 27570 | FIXATION OF KNEE JOINT |
| 27580 | FUSION OF KNEE |
| 27590 | AMPUTATE LEG AT THIGH |
| 27591 | AMPUTATE LEG AT THIGH |
| 27592 | AMPUTATE LEG AT THIGH |
| 27594 | AMPUTATION FOLLOW-UP SURGERY |
| 27596 | AMPUTATION FOLLOW-UP SURGERY |
| 27598 | AMPUTATE LOWER LEG AT KNEE |
| 27600 | DECOMPRESSION OF LOWER LEG |
| 27601 | DECOMPRESSION OF LOWER LEG |
| 27602 | DECOMPRESSION OF LOWER LEG |
| 27603 | DRAIN LOWER LEG LESION |
| 27604 | DRAIN LOWER LEG BURSA |
| 27605 | INCISION OF ACHILLES TENDON |
| 27606 | INCISION OF ACHILLES TENDON |
| 27607 | TREAT LOWER LEG BONE LESION |
| 27610 | EXPLORE/TREAT ANKLE JOINT |
| 27612 | EXPLORATION OF ANKLE JOINT |
| 27613 | BIOPSY LOWER LEG SOFT TISSUE |
| 27614 | BIOPSY LOWER LEG SOFT TISSUE |
| 27615 | RESECT LEG/ANKLE TUM < 5 CM |
| 27616 | RESECT LEG/ANKLE TUM 5 CM/> |
| 27620 | EXPLORE/TREAT ANKLE JOINT |
| 27625 | REMOVE ANKLE JOINT LINING |
| 27626 | REMOVE ANKLE JOINT LINING |
| 27630 | REMOVAL OF TENDON LESION |
| 27635 | REMOVE LOWER LEG BONE LESION |
| 27637 | REMOVE/GRAFT LEG BONE LESION |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 27638 | REMOVE/GRAFT LEG BONE LESION |
| 27640 | PARTIAL REMOVAL OF TIBIA |
| 27641 | PARTIAL REMOVAL OF FIBULA |
| 27645 | RESECT TIBIA TUMOR |
| 27646 | RESECT FIBULA TUMOR |
| 27647 | RESECT TALUS/CALCANEUS TUM |
| 27648 | INJECTION FOR ANKLE X-RAY |
| 27650 | REPAIR ACHILLES TENDON |
| 27652 | REPAIR/GRAFT ACHILLES TENDON |
| 27654 | REPAIR OF ACHILLES TENDON |
| 27656 | REPAIR LEG FASCIA DEFECT |
| 27658 | REPAIR OF LEG TENDON EACH |
| 27659 | REPAIR OF LEG TENDON EACH |
| 27664 | REPAIR OF LEG TENDON EACH |
| 27665 | REPAIR OF LEG TENDON EACH |
| 27675 | REPAIR LOWER LEG TENDONS |
| 27676 | REPAIR LOWER LEG TENDONS |
| 27680 | RELEASE OF LOWER LEG TENDON |
| 27681 | RELEASE OF LOWER LEG TENDONS |
| 27685 | REVISION OF LOWER LEG TENDON |
| 27686 | REVISE LOWER LEG TENDONS |
| 27687 | REVISION OF CALF TENDON |
| 27690 | REVISE LOWER LEG TENDON |
| 27691 | REVISE LOWER LEG TENDON |
| 27692 | REVISE ADDITIONAL LEG TENDON |
| 27695 | REPAIR OF ANKLE LIGAMENT |
| 27696 | REPAIR OF ANKLE LIGAMENTS |
| 27698 | REPAIR OF ANKLE LIGAMENT |
| 27704 | REMOVAL OF ANKLE IMPLANT |
| 27705 | INCISION OF TIBIA |
| 27707 | INCISION OF FIBULA |
| 27709 | INCISION OF TIBIA & FIBULA |
| 27712 | REALIGNMENT OF LOWER LEG |
| 27720 | REPAIR OF TIBIA |
| 27722 | REPAIR/GRAFT OF TIBIA |
| 27724 | REPAIR/GRAFT OF TIBIA |
| 27725 | REPAIR OF LOWER LEG |
| 27726 | REPAIR FIBULA NONUNION |
| 27730 | REPAIR OF TIBIA EPIPHYSIS |
| 27732 | REPAIR OF FIBULA EPIPHYSIS |
| 27734 | REPAIR LOWER LEG EPIPHYSES |
| 27740 | REPAIR OF LEG EPIPHYSES |
| 27742 | REPAIR OF LEG EPIPHYSES |
| 27745 | REINFORCE TIBIA |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 27750 | TREATMENT OF TIBIA FRACTURE |
| 27752 | TREATMENT OF TIBIA FRACTURE |
| 27756 | TREATMENT OF TIBIA FRACTURE |
| 27758 | TREATMENT OF TIBIA FRACTURE |
| 27759 | TREATMENT OF TIBIA FRACTURE |
| 27760 | CLTX MEDIAL ANKLE FX |
| 27762 | CLTX MED ANKLE FX W/MNPJ |
| 27766 | OPTX MEDIAL ANKLE FX |
| 27767 | CLTX POST ANKLE FX |
| 27768 | CLTX POST ANKLE FX W/MNPJ |
| 27769 | OPTX POST ANKLE FX |
| 27780 | TREATMENT OF FIBULA FRACTURE |
| 27781 | TREATMENT OF FIBULA FRACTURE |
| 27784 | TREATMENT OF FIBULA FRACTURE |
| 27786 | TREATMENT OF ANKLE FRACTURE |
| 27788 | TREATMENT OF ANKLE FRACTURE |
| 27792 | TREATMENT OF ANKLE FRACTURE |
| 27808 | TREATMENT OF ANKLE FRACTURE |
| 27810 | TREATMENT OF ANKLE FRACTURE |
| 27814 | TREATMENT OF ANKLE FRACTURE |
| 27816 | TREATMENT OF ANKLE FRACTURE |
| 27818 | TREATMENT OF ANKLE FRACTURE |
| 27822 | TREATMENT OF ANKLE FRACTURE |
| 27823 | TREATMENT OF ANKLE FRACTURE |
| 27824 | TREAT LOWER LEG FRACTURE |
| 27825 | TREAT LOWER LEG FRACTURE |
| 27826 | TREAT LOWER LEG FRACTURE |
| 27827 | TREAT LOWER LEG FRACTURE |
| 27828 | TREAT LOWER LEG FRACTURE |
| 27829 | TREAT LOWER LEG JOINT |
| 27830 | TREAT LOWER LEG DISLOCATION |
| 27831 | TREAT LOWER LEG DISLOCATION |
| 27832 | TREAT LOWER LEG DISLOCATION |
| 27840 | TREAT ANKLE DISLOCATION |
| 27842 | TREAT ANKLE DISLOCATION |
| 27846 | TREAT ANKLE DISLOCATION |
| 27848 | TREAT ANKLE DISLOCATION |
| 27860 | FIXATION OF ANKLE JOINT |
| 27870 | FUSION OF ANKLE JOINT OPEN |
| 27871 | FUSION OF TIBIOFIBULAR JOINT |
| 27880 | AMPUTATION OF LOWER LEG |
| 27881 | AMPUTATION OF LOWER LEG |
| 27882 | AMPUTATION OF LOWER LEG |
| 27884 | AMPUTATION FOLLOW-UP SURGERY |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 27886 | AMPUTATION FOLLOW-UP SURGERY |
| 27888 | AMPUTATION OF FOOT AT ANKLE |
| 27889 | AMPUTATION OF FOOT AT ANKLE |
| 27892 | DECOMPRESSION OF LEG |
| 27893 | DECOMPRESSION OF LEG |
| 27894 | DECOMPRESSION OF LEG |
| 28001 | DRAINAGE OF BURSA OF FOOT |
| 28002 | TREATMENT OF FOOT INFECTION |
| 28003 | TREATMENT OF FOOT INFECTION |
| 28005 | TREAT FOOT BONE LESION |
| 28008 | INCISION OF FOOT FASCIA |
| 28010 | INCISION OF TOE TENDON |
| 28011 | INCISION OF TOE TENDONS |
| 28020 | EXPLORATION OF FOOT JOINT |
| 28022 | EXPLORATION OF FOOT JOINT |
| 28024 | EXPLORATION OF TOE JOINT |
| 28035 | DECOMPRESSION OF TIBIA NERVE |
| 28046 | RESECT FOOT/TOE TUMOR < 3 CM |
| 28047 | RESECT FOOT/TOE TUMOR 3 CM/> |
| 28050 | BIOPSY OF FOOT JOINT LINING |
| 28052 | BIOPSY OF FOOT JOINT LINING |
| 28054 | BIOPSY OF TOE JOINT LINING |
| 28055 | NEURECTOMY FOOT |
| 28062 | REMOVAL OF FOOT FASCIA |
| 28070 | REMOVAL OF FOOT JOINT LINING |
| 28072 | REMOVAL OF FOOT JOINT LINING |
| 28086 | EXCISE FOOT TENDON SHEATH |
| 28088 | EXCISE FOOT TENDON SHEATH |
| 28090 | REMOVAL OF FOOT LESION |
| 28092 | REMOVAL OF TOE LESIONS |
| 28100 | REMOVAL OF ANKLE/HEEL LESION |
| 28102 | REMOVE/GRAFT FOOT LESION |
| 28103 | REMOVE/GRAFT FOOT LESION |
| 28104 | REMOVAL OF FOOT LESION |
| 28106 | REMOVE/GRAFT FOOT LESION |
| 28107 | REMOVE/GRAFT FOOT LESION |
| 28108 | REMOVAL OF TOE LESIONS |
| 28110 | PART REMOVAL OF METATARSAL |
| 28111 | PART REMOVAL OF METATARSAL |
| 28112 | PART REMOVAL OF METATARSAL |
| 28113 | PART REMOVAL OF METATARSAL |
| 28114 | REMOVAL OF METATARSAL HEADS |
| 28116 | REVISION OF FOOT |
| 28118 | REMOVAL OF HEEL BONE |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 28119 | REMOVAL OF HEEL SPUR |
| 28120 | PART REMOVAL OF ANKLE/HEEL |
| 28122 | PARTIAL REMOVAL OF FOOT BONE |
| 28124 | PARTIAL REMOVAL OF TOE |
| 28126 | PARTIAL REMOVAL OF TOE |
| 28130 | REMOVAL OF ANKLE BONE |
| 28140 | REMOVAL OF METATARSAL |
| 28150 | REMOVAL OF TOE |
| 28153 | PARTIAL REMOVAL OF TOE |
| 28160 | PARTIAL REMOVAL OF TOE |
| 28171 | RESECT TARSAL TUMOR |
| 28173 | RESECT METATARSAL TUMOR |
| 28175 | RESECT PHALANX OF TOE TUMOR |
| 28190 | REMOVAL OF FOOT FOREIGN BODY |
| 28192 | REMOVAL OF FOOT FOREIGN BODY |
| 28193 | REMOVAL OF FOOT FOREIGN BODY |
| 28200 | REPAIR OF FOOT TENDON |
| 28202 | REPAIR/GRAFT OF FOOT TENDON |
| 28208 | REPAIR OF FOOT TENDON |
| 28210 | REPAIR/GRAFT OF FOOT TENDON |
| 28220 | RELEASE OF FOOT TENDON |
| 28222 | RELEASE OF FOOT TENDONS |
| 28225 | RELEASE OF FOOT TENDON |
| 28226 | RELEASE OF FOOT TENDONS |
| 28230 | INCISION OF FOOT TENDON(S) |
| 28232 | INCISION OF TOE TENDON |
| 28234 | INCISION OF FOOT TENDON |
| 28238 | REVISION OF FOOT TENDON |
| 28240 | RELEASE OF BIG TOE |
| 28250 | REVISION OF FOOT FASCIA |
| 28260 | RELEASE OF MIDFOOT JOINT |
| 28261 | REVISION OF FOOT TENDON |
| 28262 | REVISION OF FOOT AND ANKLE |
| 28264 | RELEASE OF MIDFOOT JOINT |
| 28270 | RELEASE OF FOOT CONTRACTURE |
| 28272 | RELEASE OF TOE JOINT EACH |
| 28280 | FUSION OF TOES |
| 28288 | PARTIAL REMOVAL OF FOOT BONE |
| 28289 | CORRJ HALUX RIGDUS W/O IMPLT |
| 28291 | CORRJ HALUX RIGDUS W/IMPLT |
| 28295 | CORRECTION HALLUX VALGUS |
| 28300 | INCISION OF HEEL BONE |
| 28302 | INCISION OF ANKLE BONE |
| 28304 | INCISION OF MIDFOOT BONES |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 28305 | INCISE/GRAFT MIDFOOT BONES |
| 28306 | INCISION OF METATARSAL |
| 28307 | INCISION OF METATARSAL |
| 28308 | INCISION OF METATARSAL |
| 28309 | INCISION OF METATARSALS |
| 28310 | REVISION OF BIG TOE |
| 28312 | REVISION OF TOE |
| 28320 | REPAIR OF FOOT BONES |
| 28322 | REPAIR OF METATARSALS |
| 28341 | RESECT ENLARGED TOE |
| 28344 | REPAIR EXTRA TOE(S) |
| 28360 | RECONSTRUCT CLEFT FOOT |
| 28400 | TREATMENT OF HEEL FRACTURE |
| 28405 | TREATMENT OF HEEL FRACTURE |
| 28406 | TREATMENT OF HEEL FRACTURE |
| 28415 | TREAT HEEL FRACTURE |
| 28420 | TREAT/GRAFT HEEL FRACTURE |
| 28430 | TREATMENT OF ANKLE FRACTURE |
| 28435 | TREATMENT OF ANKLE FRACTURE |
| 28436 | TREATMENT OF ANKLE FRACTURE |
| 28445 | TREAT ANKLE FRACTURE |
| 28450 | TREAT MIDFOOT FRACTURE EACH |
| 28455 | TREAT MIDFOOT FRACTURE EACH |
| 28456 | TREAT MIDFOOT FRACTURE |
| 28465 | TREAT MIDFOOT FRACTURE EACH |
| 28470 | TREAT METATARSAL FRACTURE |
| 28475 | TREAT METATARSAL FRACTURE |
| 28476 | TREAT METATARSAL FRACTURE |
| 28485 | TREAT METATARSAL FRACTURE |
| 28490 | TREAT BIG TOE FRACTURE |
| 28495 | TREAT BIG TOE FRACTURE |
| 28496 | TREAT BIG TOE FRACTURE |
| 28505 | TREAT BIG TOE FRACTURE |
| 28510 | TREATMENT OF TOE FRACTURE |
| 28515 | TREATMENT OF TOE FRACTURE |
| 28525 | TREAT TOE FRACTURE |
| 28530 | TREAT SESAMOID BONE FRACTURE |
| 28531 | TREAT SESAMOID BONE FRACTURE |
| 28540 | TREAT FOOT DISLOCATION |
| 28545 | TREAT FOOT DISLOCATION |
| 28546 | TREAT FOOT DISLOCATION |
| 28555 | REPAIR FOOT DISLOCATION |
| 28570 | TREAT FOOT DISLOCATION |
| 28575 | TREAT FOOT DISLOCATION |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 28576 | TREAT FOOT DISLOCATION |
| 28585 | REPAIR FOOT DISLOCATION |
| 28600 | TREAT FOOT DISLOCATION |
| 28605 | TREAT FOOT DISLOCATION |
| 28606 | TREAT FOOT DISLOCATION |
| 28615 | REPAIR FOOT DISLOCATION |
| 28630 | TREAT TOE DISLOCATION |
| 28635 | TREAT TOE DISLOCATION |
| 28636 | TREAT TOE DISLOCATION |
| 28645 | REPAIR TOE DISLOCATION |
| 28660 | TREAT TOE DISLOCATION |
| 28665 | TREAT TOE DISLOCATION |
| 28666 | TREAT TOE DISLOCATION |
| 28675 | REPAIR OF TOE DISLOCATION |
| 28800 | AMPUTATION OF MIDFOOT |
| 28805 | AMPUTATION THRU METATARSAL |
| 28810 | AMPUTATION TOE & METATARSAL |
| 28820 | AMPUTATION OF TOE |
| 28825 | PARTIAL AMPUTATION OF TOE |
| 29000 | APPLICATION OF BODY CAST |
| 29010 | APPLICATION OF BODY CAST |
| 29015 | APPLICATION OF BODY CAST |
| 29035 | APPLICATION OF BODY CAST |
| 29040 | APPLICATION OF BODY CAST |
| 29044 | APPLICATION OF BODY CAST |
| 29046 | APPLICATION OF BODY CAST |
| 29049 | APPLICATION OF FIGURE EIGHT |
| 29055 | APPLICATION OF SHOULDER CAST |
| 29058 | APPLICATION OF SHOULDER CAST |
| 29065 | APPLICATION OF LONG ARM CAST |
| 29075 | APPLICATION OF FOREARM CAST |
| 29085 | APPLY HAND/WRIST CAST |
| 29086 | APPLY FINGER CAST |
| 29105 | APPLY LONG ARM SPLINT |
| 29125 | APPLY FOREARM SPLINT |
| 29126 | APPLY FOREARM SPLINT |
| 29130 | APPLICATION OF FINGER SPLINT |
| 29131 | APPLICATION OF FINGER SPLINT |
| 29200 | STRAPPING OF CHEST |
| 29240 | STRAPPING OF SHOULDER |
| 29260 | STRAPPING OF ELBOW OR WRIST |
| 29280 | STRAPPING OF HAND OR FINGER |
| 29305 | APPLICATION OF HIP CAST |
| 29325 | APPLICATION OF HIP CASTS |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 29345 | APPLICATION OF LONG LEG CAST |
| 29355 | APPLICATION OF LONG LEG CAST |
| 29358 | APPLY LONG LEG CAST BRACE |
| 29365 | APPLICATION OF LONG LEG CAST |
| 29405 | APPLY SHORT LEG CAST |
| 29425 | APPLY SHORT LEG CAST |
| 29435 | APPLY SHORT LEG CAST |
| 29440 | ADDITION OF WALKER TO CAST |
| 29445 | APPLY RIGID LEG CAST |
| 29450 | APPLICATION OF LEG CAST |
| 29505 | APPLICATION LONG LEG SPLINT |
| 29515 | APPLICATION LOWER LEG SPLINT |
| 29520 | STRAPPING OF HIP |
| 29530 | STRAPPING OF KNEE |
| 29540 | STRAPPING OF ANKLE AND/OR FT |
| 29550 | STRAPPING OF TOES |
| 29580 | APPLICATION OF PASTE BOOT |
| 29581 | APPLY MULTLAY COMPRS LWR LEG |
| 29584 | APPL MULTLAY COMPRS ARM/HAND |
| 29700 | REMOVAL/REVISION OF CAST |
| 29705 | REMOVAL/REVISION OF CAST |
| 29710 | REMOVAL/REVISION OF CAST |
| 29720 | REPAIR OF BODY CAST |
| 29730 | WINDOWING OF CAST |
| 29740 | WEDGING OF CAST |
| 29750 | WEDGING OF CLUBFOOT CAST |
| 29805 | SHOULDER ARTHROSCOPY DX |
| 29806 | SHOULDER ARTHROSCOPY/SURGERY |
| 29807 | SHOULDER ARTHROSCOPY/SURGERY |
| 29819 | SHOULDER ARTHROSCOPY/SURGERY |
| 29820 | SHOULDER ARTHROSCOPY/SURGERY |
| 29821 | SHOULDER ARTHROSCOPY/SURGERY |
| 29822 | SHOULDER ARTHROSCOPY/SURGERY |
| 29823 | SHOULDER ARTHROSCOPY/SURGERY |
| 29824 | SHOULDER ARTHROSCOPY/SURGERY |
| 29825 | SHOULDER ARTHROSCOPY/SURGERY |
| 29826 | SHOULDER ARTHROSCOPY/SURGERY |
| 29827 | ARTHROSCOP ROTATOR CUFF REPR |
| 29828 | ARTHROSCOPY BICEPS TENODESIS |
| 29830 | ELBOW ARTHROSCOPY |
| 29834 | ELBOW ARTHROSCOPY/SURGERY |
| 29835 | ELBOW ARTHROSCOPY/SURGERY |
| 29836 | ELBOW ARTHROSCOPY/SURGERY |
| 29837 | ELBOW ARTHROSCOPY/SURGERY |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 29838 | ELBOW ARTHROSCOPY/SURGERY |
| 29840 | WRIST ARTHROSCOPY |
| 29843 | WRIST ARTHROSCOPY/SURGERY |
| 29844 | WRIST ARTHROSCOPY/SURGERY |
| 29845 | WRIST ARTHROSCOPY/SURGERY |
| 29846 | WRIST ARTHROSCOPY/SURGERY |
| 29847 | WRIST ARTHROSCOPY/SURGERY |
| 29850 | KNEE ARTHROSCOPY/SURGERY |
| 29851 | KNEE ARTHROSCOPY/SURGERY |
| 29855 | TIBIAL ARTHROSCOPY/SURGERY |
| 29856 | TIBIAL ARTHROSCOPY/SURGERY |
| 29860 | HIP ARTHROSCOPY DX |
| 29861 | HIP ARTHRO W/FB REMOVAL |
| 29862 | HIP ARTHR0 W/DEBRIDEMENT |
| 29863 | HIP ARTHR0 W/SYNOVECTOMY |
| 29866 | AUTGRFT IMPLNT KNEE W/SCOPE |
| 29867 | ALLGRFT IMPLNT KNEE W/SCOPE |
| 29868 | MENISCAL TRNSPL KNEE W/SCPE |
| 29870 | KNEE ARTHROSCOPY DX |
| 29871 | KNEE ARTHROSCOPY/DRAINAGE |
| 29873 | KNEE ARTHROSCOPY/SURGERY |
| 29874 | KNEE ARTHROSCOPY/SURGERY |
| 29875 | KNEE ARTHROSCOPY/SURGERY |
| 29876 | KNEE ARTHROSCOPY/SURGERY |
| 29877 | KNEE ARTHROSCOPY/SURGERY |
| 29879 | KNEE ARTHROSCOPY/SURGERY |
| 29880 | KNEE ARTHROSCOPY/SURGERY |
| 29881 | KNEE ARTHROSCOPY/SURGERY |
| 29882 | KNEE ARTHROSCOPY/SURGERY |
| 29883 | KNEE ARTHROSCOPY/SURGERY |
| 29884 | KNEE ARTHROSCOPY/SURGERY |
| 29885 | KNEE ARTHROSCOPY/SURGERY |
| 29886 | KNEE ARTHROSCOPY/SURGERY |
| 29887 | KNEE ARTHROSCOPY/SURGERY |
| 29888 | KNEE ARTHROSCOPY/SURGERY |
| 29889 | KNEE ARTHROSCOPY/SURGERY |
| 29891 | ANKLE ARTHROSCOPY/SURGERY |
| 29892 | ANKLE ARTHROSCOPY/SURGERY |
| 29894 | ANKLE ARTHROSCOPY/SURGERY |
| 29895 | ANKLE ARTHROSCOPY/SURGERY |
| 29897 | ANKLE ARTHROSCOPY/SURGERY |
| 29898 | ANKLE ARTHROSCOPY/SURGERY |
| 29899 | ANKLE ARTHROSCOPY/SURGERY |
| 29900 | MCP JOINT ARTHROSCOPY DX |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 29901 | MCP JOINT ARTHROSCOPY SURG |
| 29902 | MCP JOINT ARTHROSCOPY SURG |
| 29904 | SUBTALAR ARTHRO W/FB RMVL |
| 29905 | SUBTALAR ARTHRO W/EXC |
| 29906 | SUBTALAR ARTHRO W/DEB |
| 29907 | SUBTALAR ARTHRO W/FUSION |
| 30000 | DRAINAGE OF NOSE LESION |
| 30020 | DRAINAGE OF NOSE LESION |
| 30100 | INTRANASAL BIOPSY |
| 30110 | REMOVAL OF NOSE POLYP(S) |
| 30115 | REMOVAL OF NOSE POLYP(S) |
| 30117 | REMOVAL OF INTRANASAL LESION |
| 30118 | REMOVAL OF INTRANASAL LESION |
| 30120 | REVISION OF NOSE |
| 30124 | REMOVAL OF NOSE LESION |
| 30125 | REMOVAL OF NOSE LESION |
| 30150 | PARTIAL REMOVAL OF NOSE |
| 30160 | REMOVAL OF NOSE |
| 30200 | INJECTION TREATMENT OF NOSE |
| 30210 | NASAL SINUS THERAPY |
| 30220 | INSERT NASAL SEPTAL BUTTON |
| 30300 | REMOVE NASAL FOREIGN BODY |
| 30310 | REMOVE NASAL FOREIGN BODY |
| 30320 | REMOVE NASAL FOREIGN BODY |
| 30540 | REPAIR NASAL DEFECT |
| 30545 | REPAIR NASAL DEFECT |
| 30560 | RELEASE OF NASAL ADHESIONS |
| 30580 | REPAIR UPPER JAW FISTULA |
| 30600 | REPAIR MOUTH/NOSE FISTULA |
| 30630 | REPAIR NASAL SEPTUM DEFECT |
| 30901 | CONTROL OF NOSEBLEED |
| 30903 | CONTROL OF NOSEBLEED |
| 30905 | CONTROL OF NOSEBLEED |
| 30906 | REPEAT CONTROL OF NOSEBLEED |
| 30915 | LIGATION NASAL SINUS ARTERY |
| 30920 | LIGATION UPPER JAW ARTERY |
| 31000 | IRRIGATION MAXILLARY SINUS |
| 31040 | EXPLORATION BEHIND UPPER JAW |
| 31225 | REMOVAL OF UPPER JAW |
| 31231 | NASAL ENDOSCOPY DX |
| 31238 | NASAL/SINUS ENDOSCOPY SURG |
| 31239 | NASAL/SINUS ENDOSCOPY SURG |
| 31240 | NASAL/SINUS ENDOSCOPY SURG |
| 31241 | NSL/SINS NDSC W/ARTERY LIG |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 31253 | NSL/SINS NDSC TOTAL |
| 31257 | NSL/SINS NDSC TOT W/SPHENDT |
| 31259 | NSL/SINS NDSC SPHN TISS RMVL |
| 31290 | NASAL/SINUS ENDOSCOPY SURG |
| 31291 | NASAL/SINUS ENDOSCOPY SURG |
| 31292 | NSL/SINS NDSC MED/INF DCMPRN |
| 31293 | NSL/SINS NDSC MED&INF DCMPRN |
| 31294 | NSL/SINS NDSC SURG ON DCMPRN |
| 31298 | NSL/SINS NDSC SURG FRNT&SPHN |
| 31300 | REMOVAL OF LARYNX LESION |
| 31360 | REMOVAL OF LARYNX |
| 31365 | REMOVAL OF LARYNX |
| 31367 | PARTIAL REMOVAL OF LARYNX |
| 31368 | PARTIAL REMOVAL OF LARYNX |
| 31370 | PARTIAL REMOVAL OF LARYNX |
| 31375 | PARTIAL REMOVAL OF LARYNX |
| 31380 | PARTIAL REMOVAL OF LARYNX |
| 31382 | PARTIAL REMOVAL OF LARYNX |
| 31390 | REMOVAL OF LARYNX & PHARYNX |
| 31395 | RECONSTRUCT LARYNX & PHARYNX |
| 31400 | REVISION OF LARYNX |
| 31420 | REMOVAL OF EPIGLOTTIS |
| 31500 | INSERT EMERGENCY AIRWAY |
| 31502 | CHANGE OF WINDPIPE AIRWAY |
| 31505 | DIAGNOSTIC LARYNGOSCOPY |
| 31510 | LARYNGOSCOPY WITH BIOPSY |
| 31511 | REMOVE FOREIGN BODY LARYNX |
| 31512 | REMOVAL OF LARYNX LESION |
| 31513 | INJECTION INTO VOCAL CORD |
| 31515 | LARYNGOSCOPY FOR ASPIRATION |
| 31520 | DX LARYNGOSCOPY NEWBORN |
| 31525 | DX LARYNGOSCOPY EXCL NB |
| 31526 | DX LARYNGOSCOPY W/OPER SCOPE |
| 31527 | LARYNGOSCOPY FOR TREATMENT |
| 31528 | LARYNGOSCOPY AND DILATION |
| 31529 | LARYNGOSCOPY AND DILATION |
| 31530 | LARYNGOSCOPY W/FB REMOVAL |
| 31531 | LARYNGOSCOPY W/FB & OP SCOPE |
| 31535 | LARYNGOSCOPY W/BIOPSY |
| 31536 | LARYNGOSCOPY W/BX & OP SCOPE |
| 31540 | LARYNGOSCOPY W/EXC OF TUMOR |
| 31541 | LARYNSCOP W/TUMR EXC + SCOPE |
| 31545 | REMOVE VC LESION W/SCOPE |
| 31546 | REMOVE VC LESION SCOPE/GRAFT |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 31551 | LARYNGOPLASTY LARYNGEAL STEN |
| 31552 | LARYNGOPLASTY LARYNGEAL STEN |
| 31553 | LARYNGOPLASTY LARYNGEAL STEN |
| 31554 | LARYNGOPLASTY LARYNGEAL STEN |
| 31560 | LARYNGOSCOP W/ARYTENOIDECTOM |
| 31561 | LARYNSCOP REMVE CART + SCOP |
| 31570 | LARYNGOSCOPE W/VC INJ |
| 31571 | LARYNGOSCOP W/VC INJ + SCOPE |
| 31572 | LARGSC W/LASER DSTRJ LES |
| 31573 | LARGSC W/THER INJECTION |
| 31574 | LARGSC W/NJX AUGMENTATION |
| 31575 | DIAGNOSTIC LARYNGOSCOPY |
| 31576 | LARYNGOSCOPY WITH BIOPSY |
| 31577 | LARGSC W/RMVL FOREIGN BDY(S) |
| 31578 | LARGSC W/REMOVAL LESION |
| 31579 | LARYNGOSCOPY TELESCOPIC |
| 31580 | LARYNGOPLASTY LARYNGEAL WEB |
| 31584 | LARYNGOPLASTY FX RDCTJ FIXJ |
| 31587 | LARYNGOPLASTY CRICOID SPLIT |
| 31590 | REINNERVATE LARYNX |
| 31591 | LARYNGOPLASTY MEDIALIZATION |
| 31592 | CRICOTRACHEAL RESECTION |
| 31600 | INCISION OF WINDPIPE |
| 31601 | INCISION OF WINDPIPE |
| 31603 | INCISION OF WINDPIPE |
| 31605 | INCISION OF WINDPIPE |
| 31610 | INCISION OF WINDPIPE |
| 31611 | SURGERY/SPEECH PROSTHESIS |
| 31612 | PUNCTURE/CLEAR WINDPIPE |
| 31613 | REPAIR WINDPIPE OPENING |
| 31614 | REPAIR WINDPIPE OPENING |
| 31615 | VISUALIZATION OF WINDPIPE |
| 31622 | DX BRONCHOSCOPE/WASH |
| 31623 | DX BRONCHOSCOPE/BRUSH |
| 31624 | DX BRONCHOSCOPE/LAVAGE |
| 31625 | BRONCHOSCOPY W/BIOPSY(S) |
| 31626 | BRONCHOSCOPY W/MARKERS |
| 31628 | BRONCHOSCOPY/LUNG BX EACH |
| 31629 | BRONCHOSCOPY/NEEDLE BX EACH |
| 31630 | BRONCHOSCOPY DILATE/FX REPR |
| 31631 | BRONCHOSCOPY DILATE W/STENT |
| 31632 | BRONCHOSCOPY/LUNG BX ADDL |
| 31633 | BRONCHOSCOPY/NEEDLE BX ADDL |
| 31634 | BRONCH W/BALLOON OCCLUSION |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 31635 | BRONCHOSCOPY W/FB REMOVAL |
| 31636 | BRONCHOSCOPY BRONCH STENTS |
| 31637 | BRONCHOSCOPY STENT ADD-ON |
| 31638 | BRONCHOSCOPY REVISE STENT |
| 31640 | BRONCHOSCOPY W/TUMOR EXCISE |
| 31641 | BRONCHOSCOPY TREAT BLOCKAGE |
| 31643 | DIAG BRONCHOSCOPE/CATHETER |
| 31645 | BRNCHSC W/THER ASPIR 1ST |
| 31646 | BRNCHSC W/THER ASPIR SBSQ |
| 31647 | BRONCHIAL VALVE INIT INSERT |
| 31648 | BRONCHIAL VALVE REMOV INIT |
| 31649 | BRONCHIAL VALVE REMOV ADDL |
| 31651 | BRONCHIAL VALVE ADDL INSERT |
| 31652 | BRONCH EBUS SAMPLNG 1/2 NODE |
| 31653 | BRONCH EBUS SAMPLNG 3/> NODE |
| 31654 | BRONCH EBUS IVNTJ PERPH LES |
| 31717 | BRONCHIAL BRUSH BIOPSY |
| 31720 | CLEARANCE OF AIRWAYS |
| 31725 | CLEARANCE OF AIRWAYS |
| 31730 | INTRO WINDPIPE WIRE/TUBE |
| 31750 | REPAIR OF WINDPIPE |
| 31755 | REPAIR OF WINDPIPE |
| 31760 | REPAIR OF WINDPIPE |
| 31766 | RECONSTRUCTION OF WINDPIPE |
| 31770 | REPAIR/GRAFT OF BRONCHUS |
| 31775 | RECONSTRUCT BRONCHUS |
| 31780 | RECONSTRUCT WINDPIPE |
| 31781 | RECONSTRUCT WINDPIPE |
| 31785 | REMOVE WINDPIPE LESION |
| 31786 | REMOVE WINDPIPE LESION |
| 31800 | REPAIR OF WINDPIPE INJURY |
| 31805 | REPAIR OF WINDPIPE INJURY |
| 31820 | CLOSURE OF WINDPIPE LESION |
| 31825 | REPAIR OF WINDPIPE DEFECT |
| 31830 | REVISE WINDPIPE SCAR |
| 32035 | THORACOSTOMY W/RIB RESECTION |
| 32036 | THORACOSTOMY W/FLAP DRAINAGE |
| 32096 | OPEN WEDGE/BX LUNG INFILTR |
| 32097 | OPEN WEDGE/BX LUNG NODULE |
| 32098 | OPEN BIOPSY OF LUNG PLEURA |
| 32100 | EXPLORATION OF CHEST |
| 32110 | EXPLORE/REPAIR CHEST |
| 32120 | RE-EXPLORATION OF CHEST |
| 32124 | EXPLORE CHEST FREE ADHESIONS |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 32140 | REMOVAL OF LUNG LESION(S) |
| 32141 | REMOVE/TREAT LUNG LESIONS |
| 32150 | REMOVAL OF LUNG LESION(S) |
| 32151 | REMOVE LUNG FOREIGN BODY |
| 32160 | OPEN CHEST HEART MASSAGE |
| 32200 | DRAIN OPEN LUNG LESION |
| 32215 | TREAT CHEST LINING |
| 32220 | RELEASE OF LUNG |
| 32225 | PARTIAL RELEASE OF LUNG |
| 32310 | REMOVAL OF CHEST LINING |
| 32320 | FREE/REMOVE CHEST LINING |
| 32400 | NEEDLE BIOPSY CHEST LINING |
| 32405 | PERCUT BX LUNG/MEDIASTINUM |
| 32408 | CORE NDL BX LNG/MED PERQ |
| 32440 | REMOVE LUNG PNEUMONECTOMY |
| 32442 | SLEEVE PNEUMONECTOMY |
| 32445 | REMOVAL OF LUNG EXTRAPLEURAL |
| 32480 | PARTIAL REMOVAL OF LUNG |
| 32482 | BILOBECTOMY |
| 32484 | SEGMENTECTOMY |
| 32486 | SLEEVE LOBECTOMY |
| 32488 | COMPLETION PNEUMONECTOMY |
| 32491 | LUNG VOLUME REDUCTION |
| 32501 | REPAIR BRONCHUS ADD-ON |
| 32503 | RESECT APICAL LUNG TUMOR |
| 32504 | RESECT APICAL LUNG TUM/CHEST |
| 32505 | WEDGE RESECT OF LUNG INITIAL |
| 32506 | WEDGE RESECT OF LUNG ADD-ON |
| 32507 | WEDGE RESECT OF LUNG DIAG |
| 32540 | REMOVAL OF LUNG LESION |
| 32550 | INSERT PLEURAL CATH |
| 32551 | INSERTION OF CHEST TUBE |
| 32552 | REMOVE LUNG CATHETER |
| 32553 | INS MARK THOR FOR RT PERQ |
| 32554 | ASPIRATE PLEURA W/O IMAGING |
| 32555 | ASPIRATE PLEURA W/ IMAGING |
| 32556 | INSERT CATH PLEURA W/O IMAGE |
| 32557 | INSERT CATH PLEURA W/ IMAGE |
| 32560 | TREAT PLEURODESIS W/AGENT |
| 32561 | LYSE CHEST FIBRIN INIT DAY |
| 32562 | LYSE CHEST FIBRIN SUBQ DAY |
| 32601 | THORACOSCOPY DIAGNOSTIC |
| 32604 | THORACOSCOPY WBX SAC |
| 32606 | THORACOSCOPY W/BX MED SPACE |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 32607 | THORACOSCOPY W/BX INFILTRATE |
| 32608 | THORACOSCOPY W/BX NODULE |
| 32609 | THORACOSCOPY W/BX PLEURA |
| 32650 | THORACOSCOPY W/PLEURODESIS |
| 32651 | THORACOSCOPY REMOVE CORTEX |
| 32652 | THORACOSCOPY REM TOTL CORTEX |
| 32653 | THORACOSCOPY REMOV FB/FIBRIN |
| 32654 | THORACOSCOPY CONTRL BLEEDING |
| 32655 | THORACOSCOPY RESECT BULLAE |
| 32656 | THORACOSCOPY W/PLEURECTOMY |
| 32658 | THORACOSCOPY W/SAC FB REMOVE |
| 32659 | THORACOSCOPY W/SAC DRAINAGE |
| 32661 | THORACOSCOPY W/PERICARD EXC |
| 32662 | THORACOSCOPY W/MEDIAST EXC |
| 32663 | THORACOSCOPY W/LOBECTOMY |
| 32665 | THORACOSCOP W/ESOPH MUSC EXC |
| 32666 | THORACOSCOPY W/WEDGE RESECT |
| 32667 | THORACOSCOPY W/W RESECT ADDL |
| 32668 | THORACOSCOPY W/W RESECT DIAG |
| 32669 | THORACOSCOPY REMOVE SEGMENT |
| 32670 | THORACOSCOPY BILOBECTOMY |
| 32671 | THORACOSCOPY PNEUMONECTOMY |
| 32672 | THORACOSCOPY FOR LVRS |
| 32673 | THORACOSCOPY W/THYMUS RESECT |
| 32674 | THORACOSCOPY LYMPH NODE EXC |
| 32800 | REPAIR LUNG HERNIA |
| 32810 | CLOSE CHEST AFTER DRAINAGE |
| 32815 | CLOSE BRONCHIAL FISTULA |
| 32820 | RECONSTRUCT INJURED CHEST |
| 32850 | DONOR PNEUMONECTOMY |
| 32900 | REMOVAL OF RIB(S) |
| 32905 | REVISE & REPAIR CHEST WALL |
| 32906 | REVISE & REPAIR CHEST WALL |
| 32940 | REVISION OF LUNG |
| 32960 | THERAPEUTIC PNEUMOTHORAX |
| 32994 | ABLATE PULM TUMOR PERQ CRYBL |
| 32997 | TOTAL LUNG LAVAGE |
| 32998 | ABLATE PULM TUMOR PERQ RF |
| 33016 | PERICARDIOCENTESIS W/IMAGING |
| 33017 | PRCRD DRG 6YR+ W/O CGEN CAR |
| 33018 | PRCRD DRG 0-5YR OR W/ANOMLY |
| 33019 | PERQ PRCRD DRG INSJ CATH CT |
| 33020 | INCISION OF HEART SAC |
| 33025 | INCISION OF HEART SAC |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 33030 | PARTIAL REMOVAL OF HEART SAC |
| 33031 | PARTIAL REMOVAL OF HEART SAC |
| 33050 | RESECT HEART SAC LESION |
| 33120 | REMOVAL OF HEART LESION |
| 33130 | REMOVAL OF HEART LESION |
| 33140 | HEART REVASCULARIZE (TMR) |
| 33141 | HEART TMR W/OTHER PROCEDURE |
| 33202 | INSERT EPICARD ELTRD OPEN |
| 33203 | INSERT EPICARD ELTRD ENDO |
| 33206 | INSERT HEART PM ATRIAL |
| 33207 | INSERT HEART PM VENTRICULAR |
| 33208 | INSRT HEART PM ATRIAL & VENT |
| 33210 | INSERT ELECTRD/PM CATH SNGL |
| 33211 | INSERT CARD ELECTRODES DUAL |
| 33212 | INSERT PULSE GEN SNGL LEAD |
| 33213 | INSERT PULSE GEN DUAL LEADS |
| 33214 | UPGRADE OF PACEMAKER SYSTEM |
| 33215 | REPOSITION PACING-DEFIB LEAD |
| 33216 | INSERT 1 ELECTRODE PM-DEFIB |
| 33217 | INSERT 2 ELECTRODE PM-DEFIB |
| 33218 | REPAIR LEAD PACE-DEFIB ONE |
| 33220 | REPAIR LEAD PACE-DEFIB DUAL |
| 33221 | INSERT PULSE GEN MULT LEADS |
| 33222 | RELOCATION POCKET PACEMAKER |
| 33223 | RELOCATE POCKET FOR DEFIB |
| 33224 | INSERT PACING LEAD & CONNECT |
| 33225 | L VENTRIC PACING LEAD ADD-ON |
| 33226 | REPOSITION L VENTRIC LEAD |
| 33227 | REMOVE&REPLACE PM GEN SINGL |
| 33228 | REMV&REPLC PM GEN DUAL LEAD |
| 33229 | REMV&REPLC PM GEN MULT LEADS |
| 33230 | INSRT PULSE GEN W/DUAL LEADS |
| 33231 | INSRT PULSE GEN W/MULT LEADS |
| 33233 | REMOVAL OF PM GENERATOR |
| 33234 | REMOVAL OF PACEMAKER SYSTEM |
| 33235 | REMOVAL PACEMAKER ELECTRODE |
| 33236 | REMOVE ELECTRODE/THORACOTOMY |
| 33237 | REMOVE ELECTRODE/THORACOTOMY |
| 33238 | REMOVE ELECTRODE/THORACOTOMY |
| 33241 | REMOVE PULSE GENERATOR |
| 33243 | REMOVE ELTRD/THORACOTOMY |
| 33244 | REMOVE ELCTRD TRANSVENOUSLY |
| 33250 | ABLATE HEART DYSRHYTHM FOCUS |
| 33251 | ABLATE HEART DYSRHYTHM FOCUS |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 33254 | ABLATE ATRIA LMTD |
| 33255 | ABLATE ATRIA W/O BYPASS EXT |
| 33256 | ABLATE ATRIA W/BYPASS EXTEN |
| 33257 | ABLATE ATRIA LMTD ADD-ON |
| 33258 | ABLATE ATRIA X10SV ADD-ON |
| 33259 | ABLATE ATRIA W/BYPASS ADD-ON |
| 33261 | ABLATE HEART DYSRHYTHM FOCUS |
| 33262 | RMVL& REPLC PULSE GEN 1 LEAD |
| 33263 | RMVL & RPLCMT DFB GEN 2 LEAD |
| 33264 | RMVL & RPLCMT DFB GEN MLT LD |
| 33265 | ABLATE ATRIA LMTD ENDO |
| 33266 | ABLATE ATRIA X10SV ENDO |
| 33271 | INSJ SUBQ IMPLTBL DFB ELCTRD |
| 33272 | RMVL OF SUBQ DEFIBRILLATOR |
| 33273 | REPOS PREV IMPLTBL SUBQ DFB |
| 33274 | TCAT INSJ/RPL PERM LDLS PM |
| 33275 | TCAT RMVL PERM LDLS PM W/IMG |
| 33285 | INSJ SUBQ CAR RHYTHM MNTR |
| 33286 | RMVL SUBQ CAR RHYTHM MNTR |
| 33300 | REPAIR OF HEART WOUND |
| 33305 | REPAIR OF HEART WOUND |
| 33310 | EXPLORATORY HEART SURGERY |
| 33315 | EXPLORATORY HEART SURGERY |
| 33320 | REPAIR MAJOR BLOOD VESSEL(S) |
| 33321 | REPAIR MAJOR VESSEL |
| 33322 | REPAIR MAJOR BLOOD VESSEL(S) |
| 33330 | INSERT MAJOR VESSEL GRAFT |
| 33335 | INSERT MAJOR VESSEL GRAFT |
| 33340 | PERQ CLSR TCAT L ATR APNDGE |
| 33361 | REPLACE AORTIC VALVE PERQ |
| 33362 | REPLACE AORTIC VALVE OPEN |
| 33363 | REPLACE AORTIC VALVE OPEN |
| 33364 | REPLACE AORTIC VALVE OPEN |
| 33365 | REPLACE AORTIC VALVE OPEN |
| 33366 | TRCATH REPLACE AORTIC VALVE |
| 33367 | REPLACE AORTIC VALVE W/BYP |
| 33390 | VALVULOPLASTY AORTIC VALVE |
| 33391 | VALVULOPLASTY AORTIC VALVE |
| 33404 | PREPARE HEART-AORTA CONDUIT |
| 33405 | REPLACEMENT AORTIC VALVE OPN |
| 33406 | REPLACEMENT AORTIC VALVE OPN |
| 33410 | REPLACEMENT AORTIC VALVE OPN |
| 33411 | REPLACEMENT OF AORTIC VALVE |
| 33412 | REPLACEMENT OF AORTIC VALVE |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 33413 | REPLACEMENT OF AORTIC VALVE |
| 33414 | REPAIR OF AORTIC VALVE |
| 33415 | REVISION SUBVALVULAR TISSUE |
| 33416 | REVISE VENTRICLE MUSCLE |
| 33417 | REPAIR OF AORTIC VALVE |
| 33418 | REPAIR TCAT MITRAL VALVE |
| 33419 | REPAIR TCAT MITRAL VALVE |
| 33420 | REVISION OF MITRAL VALVE |
| 33422 | REVISION OF MITRAL VALVE |
| 33425 | REPAIR OF MITRAL VALVE |
| 33426 | REPAIR OF MITRAL VALVE |
| 33427 | REPAIR OF MITRAL VALVE |
| 33430 | REPLACEMENT OF MITRAL VALVE |
| 33440 | RPLCMT A-VALVE TLCJ AUTOL PV |
| 33460 | REVISION OF TRICUSPID VALVE |
| 33463 | VALVULOPLASTY TRICUSPID |
| 33464 | VALVULOPLASTY TRICUSPID |
| 33465 | REPLACE TRICUSPID VALVE |
| 33468 | REVISION OF TRICUSPID VALVE |
| 33470 | REVISION OF PULMONARY VALVE |
| 33471 | VALVOTOMY PULMONARY VALVE |
| 33474 | REVISION OF PULMONARY VALVE |
| 33475 | REPLACEMENT PULMONARY VALVE |
| 33476 | REVISION OF HEART CHAMBER |
| 33477 | IMPLANT TCAT PULM VLV PERQ |
| 33478 | REVISION OF HEART CHAMBER |
| 33496 | REPAIR PROSTH VALVE CLOT |
| 33500 | REPAIR HEART VESSEL FISTULA |
| 33501 | REPAIR HEART VESSEL FISTULA |
| 33502 | CORONARY ARTERY CORRECTION |
| 33503 | CORONARY ARTERY GRAFT |
| 33504 | CORONARY ARTERY GRAFT |
| 33505 | REPAIR ARTERY W/TUNNEL |
| 33506 | REPAIR ARTERY TRANSLOCATION |
| 33507 | REPAIR ART INTRAMURAL |
| 33508 | ENDOSCOPIC VEIN HARVEST |
| 33510 | CABG VEIN SINGLE |
| 33511 | CABG VEIN TWO |
| 33512 | CABG VEIN THREE |
| 33513 | CABG VEIN FOUR |
| 33514 | CABG VEIN FIVE |
| 33516 | CABG VEIN SIX OR MORE |
| 33517 | CABG ARTERY-VEIN SINGLE |
| 33518 | CABG ARTERY-VEIN TWO |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 33519 | CABG ARTERY-VEIN THREE |
| 33521 | CABG ARTERY-VEIN FOUR |
| 33522 | CABG ARTERY-VEIN FIVE |
| 33523 | CABG ART-VEIN SIX OR MORE |
| 33530 | CORONARY ARTERY BYPASS/REOP |
| 33533 | CABG ARTERIAL SINGLE |
| 33534 | CABG ARTERIAL TWO |
| 33535 | CABG ARTERIAL THREE |
| 33536 | CABG ARTERIAL FOUR OR MORE |
| 33542 | REMOVAL OF HEART LESION |
| 33545 | REPAIR OF HEART DAMAGE |
| 33572 | OPEN CORONARY ENDARTERECTOMY |
| 33600 | CLOSURE OF VALVE |
| 33602 | CLOSURE OF VALVE |
| 33606 | ANASTOMOSIS/ARTERY-AORTA |
| 33608 | REPAIR ANOMALY W/CONDUIT |
| 33610 | REPAIR BY ENLARGEMENT |
| 33611 | REPAIR DOUBLE VENTRICLE |
| 33612 | REPAIR DOUBLE VENTRICLE |
| 33615 | REPAIR MODIFIED FONTAN |
| 33617 | REPAIR SINGLE VENTRICLE |
| 33619 | REPAIR SINGLE VENTRICLE |
| 33620 | APPLY R&L PULM ART BANDS |
| 33621 | TRANSTHOR CATH FOR STENT |
| 33622 | REDO COMPL CARDIAC ANOMALY |
| 33641 | REPAIR HEART SEPTUM DEFECT |
| 33645 | REVISION OF HEART VEINS |
| 33647 | REPAIR HEART SEPTUM DEFECTS |
| 33660 | REPAIR OF HEART DEFECTS |
| 33665 | REPAIR OF HEART DEFECTS |
| 33670 | REPAIR OF HEART CHAMBERS |
| 33675 | CLOSE MULT VSD |
| 33676 | CLOSE MULT VSD W/RESECTION |
| 33677 | CL MULT VSD W/REM PUL BAND |
| 33681 | REPAIR HEART SEPTUM DEFECT |
| 33684 | REPAIR HEART SEPTUM DEFECT |
| 33688 | REPAIR HEART SEPTUM DEFECT |
| 33690 | REINFORCE PULMONARY ARTERY |
| 33692 | REPAIR OF HEART DEFECTS |
| 33694 | REPAIR OF HEART DEFECTS |
| 33697 | REPAIR OF HEART DEFECTS |
| 33702 | REPAIR OF HEART DEFECTS |
| 33710 | REPAIR OF HEART DEFECTS |
| 33720 | REPAIR OF HEART DEFECT |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 33722 | REPAIR OF HEART DEFECT |
| 33724 | REPAIR VENOUS ANOMALY |
| 33726 | REPAIR PUL VENOUS STENOSIS |
| 33730 | REPAIR HEART-VEIN DEFECT(S) |
| 33732 | REPAIR HEART-VEIN DEFECT |
| 33735 | REVISION OF HEART CHAMBER |
| 33736 | REVISION OF HEART CHAMBER |
| 33737 | REVISION OF HEART CHAMBER |
| 33741 | TAS CONGENITAL CAR ANOMAL |
| 33745 | TIS CGEN CAR ANOMAL 1ST SHNT |
| 33746 | TIS CGEN CAR ANOMAL EA ADDL |
| 33750 | MAJOR VESSEL SHUNT |
| 33755 | MAJOR VESSEL SHUNT |
| 33762 | MAJOR VESSEL SHUNT |
| 33764 | MAJOR VESSEL SHUNT & GRAFT |
| 33766 | MAJOR VESSEL SHUNT |
| 33767 | MAJOR VESSEL SHUNT |
| 33768 | CAVOPULMONARY SHUNTING |
| 33770 | REPAIR GREAT VESSELS DEFECT |
| 33771 | REPAIR GREAT VESSELS DEFECT |
| 33774 | REPAIR GREAT VESSELS DEFECT |
| 33775 | REPAIR GREAT VESSELS DEFECT |
| 33776 | REPAIR GREAT VESSELS DEFECT |
| 33777 | REPAIR GREAT VESSELS DEFECT |
| 33778 | REPAIR GREAT VESSELS DEFECT |
| 33779 | REPAIR GREAT VESSELS DEFECT |
| 33780 | REPAIR GREAT VESSELS DEFECT |
| 33781 | REPAIR GREAT VESSELS DEFECT |
| 33782 | NIKAIDOH PROC |
| 33783 | NIKAIDOH PROC W/OSTIA IMPLT |
| 33786 | REPAIR ARTERIAL TRUNK |
| 33788 | REVISION OF PULMONARY ARTERY |
| 33800 | AORTIC SUSPENSION |
| 33802 | REPAIR VESSEL DEFECT |
| 33803 | REPAIR VESSEL DEFECT |
| 33813 | REPAIR SEPTAL DEFECT |
| 33814 | REPAIR SEPTAL DEFECT |
| 33820 | REVISE MAJOR VESSEL |
| 33822 | REVISE MAJOR VESSEL |
| 33824 | REVISE MAJOR VESSEL |
| 33840 | REMOVE AORTA CONSTRICTION |
| 33845 | REMOVE AORTA CONSTRICTION |
| 33851 | REMOVE AORTA CONSTRICTION |
| 33852 | REPAIR SEPTAL DEFECT |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 33853 | REPAIR SEPTAL DEFECT |
| 33858 | AS-AORT GRF F/AORTIC DSJ |
| 33859 | AS-AORT GRF F/DS OTH/THN DSJ |
| 33863 | ASCENDING AORTIC GRAFT |
| 33864 | ASCENDING AORTIC GRAFT |
| 33866 | AORTIC HEMIARCH GRAFT |
| 33871 | TRANSVRS A-ARCH GRF HYPTHRM |
| 33875 | THORACIC AORTIC GRAFT |
| 33877 | THORACOABDOMINAL GRAFT |
| 33880 | ENDOVASC TAA REPR INCL SUBCL |
| 33881 | ENDOVASC TAA REPR W/O SUBCL |
| 33883 | INSERT ENDOVASC PROSTH TAA |
| 33884 | ENDOVASC PROSTH TAA ADD-ON |
| 33886 | ENDOVASC PROSTH DELAYED |
| 33889 | ARTERY TRANSPOSE/ENDOVAS TAA |
| 33891 | CAR-CAR BP GRFT/ENDOVAS TAA |
| 33910 | REMOVE LUNG ARTERY EMBOLI |
| 33915 | REMOVE LUNG ARTERY EMBOLI |
| 33916 | SURGERY OF GREAT VESSEL |
| 33917 | REPAIR PULMONARY ARTERY |
| 33920 | REPAIR PULMONARY ATRESIA |
| 33922 | TRANSECT PULMONARY ARTERY |
| 33924 | REMOVE PULMONARY SHUNT |
| 33925 | RPR PUL ART UNIFOCAL W/O CPB |
| 33926 | REPR PUL ART UNIFOCAL W/CPB |
| 33946 | ECMO/ECLS INITIATION VENOUS |
| 33947 | ECMO/ECLS INITIATION ARTERY |
| 33948 | ECMO/ECLS DAILY MGMT-VENOUS |
| 33949 | ECMO/ECLS DAILY MGMT ARTERY |
| 33951 | ECMO/ECLS INSJ PRPH CANNULA |
| 33952 | ECMO/ECLS INSJ PRPH CANNULA |
| 33953 | ECMO/ECLS INSJ PRPH CANNULA |
| 33954 | ECMO/ECLS INSJ PRPH CANNULA |
| 33955 | ECMO/ECLS INSJ CTR CANNULA |
| 33956 | ECMO/ECLS INSJ CTR CANNULA |
| 33957 | ECMO/ECLS REPOS PERPH CNULA |
| 33958 | ECMO/ECLS REPOS PERPH CNULA |
| 33959 | ECMO/ECLS REPOS PERPH CNULA |
| 33962 | ECMO/ECLS REPOS PERPH CNULA |
| 33963 | ECMO/ECLS REPOS PERPH CNULA |
| 33964 | ECMO/ECLS REPOS PERPH CNULA |
| 33965 | ECMO/ECLS RMVL PERPH CANNULA |
| 33966 | ECMO/ECLS RMVL PRPH CANNULA |
| 33967 | INSERT I-AORT PERCUT DEVICE |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 33968 | REMOVE AORTIC ASSIST DEVICE |
| 33969 | ECMO/ECLS RMVL PERPH CANNULA |
| 33970 | AORTIC CIRCULATION ASSIST |
| 33971 | AORTIC CIRCULATION ASSIST |
| 33973 | INSERT BALLOON DEVICE |
| 33974 | REMOVE INTRA-AORTIC BALLOON |
| 33975 | IMPLANT VENTRICULAR DEVICE |
| 33976 | IMPLANT VENTRICULAR DEVICE |
| 33977 | REMOVE VENTRICULAR DEVICE |
| 33978 | REMOVE VENTRICULAR DEVICE |
| 33979 | INSERT INTRACORPOREAL DEVICE |
| 33980 | REMOVE INTRACORPOREAL DEVICE |
| 33981 | REPLACE VAD PUMP EXT |
| 33982 | REPLACE VAD INTRA W/O BP |
| 33983 | REPLACE VAD INTRA W/BP |
| 33984 | ECMO/ECLS RMVL PRPH CANNULA |
| 33985 | ECMO/ECLS RMVL CTR CANNULA |
| 33986 | ECMO/ECLS RMVL CTR CANNULA |
| 33987 | ARTERY EXPOS/GRAFT ARTERY |
| 33988 | INSERTION OF LEFT HEART VENT |
| 33989 | REMOVAL OF LEFT HEART VENT |
| 33990 | INSERT VAD ARTERY ACCESS |
| 33991 | INSERT VAD ART&VEIN ACCESS |
| 33992 | REMOVE VAD DIFFERENT SESSION |
| 33993 | REPOSITION VAD DIFF SESSION |
| 33995 | INSJ PERQ VAD R HRT VENOUS |
| 33997 | RMVL PERQ RIGHT HEART VAD |
| 34001 | REMOVAL OF ARTERY CLOT |
| 34051 | REMOVAL OF ARTERY CLOT |
| 34101 | REMOVAL OF ARTERY CLOT |
| 34111 | REMOVAL OF ARM ARTERY CLOT |
| 34151 | REMOVAL OF ARTERY CLOT |
| 34201 | REMOVAL OF ARTERY CLOT |
| 34203 | REMOVAL OF LEG ARTERY CLOT |
| 34401 | REMOVAL OF VEIN CLOT |
| 34421 | REMOVAL OF VEIN CLOT |
| 34451 | REMOVAL OF VEIN CLOT |
| 34471 | REMOVAL OF VEIN CLOT |
| 34490 | REMOVAL OF VEIN CLOT |
| 34501 | REPAIR VALVE FEMORAL VEIN |
| 34502 | RECONSTRUCT VENA CAVA |
| 34510 | TRANSPOSITION OF VEIN VALVE |
| 34520 | CROSS-OVER VEIN GRAFT |
| 34530 | LEG VEIN FUSION |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 34701 | EVASC RPR A-AO NDGFT |
| 34702 | EVASC RPR A-AO NDGFT RPT |
| 34703 | EVASC RPR A-UNILAC NDGFT |
| 34704 | EVASC RPR A-UNILAC NDGFT RPT |
| 34705 | EVAC RPR A-BIILIAC NDGFT |
| 34706 | EVASC RPR A-BIILIAC RPT |
| 34707 | EVASC RPR ILIO-ILIAC NDGFT |
| 34708 | EVASC RPR ILIO-ILIAC RPT |
| 34709 | PLMT XTN PROSTH EVASC RPR |
| 34710 | DLYD PLMT XTN PROSTH 1ST VSL |
| 34711 | DLYD PLMT XTN PROSTH EA ADDL |
| 34712 | TCAT DLVR ENHNCD FIXJ DEV |
| 34713 | PERQ ACCESS & CLSR FEM ART |
| 34714 | OPN FEM ART EXPOS CNDT CRTJ |
| 34715 | OPN AX/SUBCLA ART EXPOS |
| 34716 | OPN AX/SUBCLA ART EXPOS CNDT |
| 34717 | EVASC RPR A-ILIAC NDGFT |
| 34718 | EVASC RPR N/A A-ILIAC NDGFT |
| 34808 | ENDOVAS ILIAC A DEVICE ADDON |
| 34812 | OPN FEM ART EXPOS |
| 34813 | FEMORAL ENDOVAS GRAFT ADD-ON |
| 34820 | OPN ILIAC ART EXPOS |
| 34830 | OPEN AORTIC TUBE PROSTH REPR |
| 34831 | OPEN AORTOILIAC PROSTH REPR |
| 34832 | OPEN AORTOFEMOR PROSTH REPR |
| 34833 | OPN ILAC ART EXPOS CNDT CRTJ |
| 34834 | OPN BRACH ART EXPOS |
| 34839 | PLNNING PT SPEC FENEST GRAFT |
| 34841 | ENDOVASC VISC AORTA 1 GRAFT |
| 34842 | ENDOVASC VISC AORTA 2 GRAFT |
| 34843 | ENDOVASC VISC AORTA 3 GRAFT |
| 34844 | ENDOVASC VISC AORTA 4 GRAFT |
| 34845 | VISC & INFRAREN ABD 1 PROSTH |
| 34846 | VISC & INFRAREN ABD 2 PROSTH |
| 34847 | VISC & INFRAREN ABD 3 PROSTH |
| 34848 | VISC & INFRAREN ABD 4+ PROST |
| 35001 | REPAIR DEFECT OF ARTERY |
| 35002 | REPAIR ARTERY RUPTURE NECK |
| 35005 | REPAIR DEFECT OF ARTERY |
| 35011 | REPAIR DEFECT OF ARTERY |
| 35013 | REPAIR ARTERY RUPTURE ARM |
| 35021 | REPAIR DEFECT OF ARTERY |
| 35022 | REPAIR ARTERY RUPTURE CHEST |
| 35045 | REPAIR DEFECT OF ARM ARTERY |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 35081 | REPAIR DEFECT OF ARTERY |
| 35082 | REPAIR ARTERY RUPTURE AORTA |
| 35091 | REPAIR DEFECT OF ARTERY |
| 35092 | REPAIR ARTERY RUPTURE AORTA |
| 35102 | REPAIR DEFECT OF ARTERY |
| 35103 | REPAIR ARTERY RUPTURE AORTA |
| 35111 | REPAIR DEFECT OF ARTERY |
| 35112 | REPAIR ARTERY RUPTURE SPLEEN |
| 35121 | REPAIR DEFECT OF ARTERY |
| 35122 | REPAIR ARTERY RUPTURE BELLY |
| 35131 | REPAIR DEFECT OF ARTERY |
| 35132 | REPAIR ARTERY RUPTURE GROIN |
| 35141 | REPAIR DEFECT OF ARTERY |
| 35142 | REPAIR ARTERY RUPTURE THIGH |
| 35151 | REPAIR DEFECT OF ARTERY |
| 35152 | REPAIR RUPTD POPLITEAL ART |
| 35180 | REPAIR BLOOD VESSEL LESION |
| 35182 | REPAIR BLOOD VESSEL LESION |
| 35184 | REPAIR BLOOD VESSEL LESION |
| 35188 | REPAIR BLOOD VESSEL LESION |
| 35189 | REPAIR BLOOD VESSEL LESION |
| 35190 | REPAIR BLOOD VESSEL LESION |
| 35201 | REPAIR BLOOD VESSEL LESION |
| 35206 | REPAIR BLOOD VESSEL LESION |
| 35207 | REPAIR BLOOD VESSEL LESION |
| 35211 | REPAIR BLOOD VESSEL LESION |
| 35216 | REPAIR BLOOD VESSEL LESION |
| 35221 | REPAIR BLOOD VESSEL LESION |
| 35226 | REPAIR BLOOD VESSEL LESION |
| 35231 | REPAIR BLOOD VESSEL LESION |
| 35236 | REPAIR BLOOD VESSEL LESION |
| 35241 | REPAIR BLOOD VESSEL LESION |
| 35246 | REPAIR BLOOD VESSEL LESION |
| 35251 | REPAIR BLOOD VESSEL LESION |
| 35256 | REPAIR BLOOD VESSEL LESION |
| 35261 | REPAIR BLOOD VESSEL LESION |
| 35266 | REPAIR BLOOD VESSEL LESION |
| 35271 | REPAIR BLOOD VESSEL LESION |
| 35276 | REPAIR BLOOD VESSEL LESION |
| 35281 | REPAIR BLOOD VESSEL LESION |
| 35286 | REPAIR BLOOD VESSEL LESION |
| 35301 | RECHANNELING OF ARTERY |
| 35302 | RECHANNELING OF ARTERY |
| 35303 | RECHANNELING OF ARTERY |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 35304 | RECHANNELING OF ARTERY |
| 35305 | RECHANNELING OF ARTERY |
| 35306 | RECHANNELING OF ARTERY |
| 35311 | RECHANNELING OF ARTERY |
| 35321 | RECHANNELING OF ARTERY |
| 35331 | RECHANNELING OF ARTERY |
| 35341 | RECHANNELING OF ARTERY |
| 35351 | RECHANNELING OF ARTERY |
| 35355 | RECHANNELING OF ARTERY |
| 35361 | RECHANNELING OF ARTERY |
| 35363 | RECHANNELING OF ARTERY |
| 35371 | RECHANNELING OF ARTERY |
| 35372 | RECHANNELING OF ARTERY |
| 35390 | REOPERATION CAROTID ADD-ON |
| 35400 | ANGIOSCOPY |
| 35500 | HARVEST VEIN FOR BYPASS |
| 35501 | ART BYP GRFT IPSILAT CAROTID |
| 35506 | ART BYP GRFT SUBCLAV-CAROTID |
| 35508 | ART BYP GRFT CAROTID-VERTBRL |
| 35509 | ART BYP GRFT CONTRAL CAROTID |
| 35510 | ART BYP GRFT CAROTID-BRCHIAL |
| 35511 | ART BYP GRFT SUBCLAV-SUBCLAV |
| 35512 | ART BYP GRFT SUBCLAV-BRCHIAL |
| 35515 | ART BYP GRFT SUBCLAV-VERTBRL |
| 35516 | ART BYP GRFT SUBCLAV-AXILARY |
| 35518 | ART BYP GRFT AXILLARY-AXILRY |
| 35521 | ART BYP GRFT AXILL-FEMORAL |
| 35522 | ART BYP GRFT AXILL-BRACHIAL |
| 35523 | ART BYP GRFT BRCHL-ULNR-RDL |
| 35525 | ART BYP GRFT BRACHIAL-BRCHL |
| 35526 | ART BYP GRFT AOR/CAROT/INNOM |
| 35531 | ART BYP GRFT AORCEL/AORMESEN |
| 35533 | ART BYP GRFT AXILL/FEM/FEM |
| 35535 | ART BYP GRFT HEPATORENAL |
| 35536 | ART BYP GRFT SPLENORENAL |
| 35537 | ART BYP GRFT AORTOILIAC |
| 35538 | ART BYP GRFT AORTOBI-ILIAC |
| 35539 | ART BYP GRFT AORTOFEMORAL |
| 35540 | ART BYP GRFT AORTBIFEMORAL |
| 35556 | ART BYP GRFT FEM-POPLITEAL |
| 35558 | ART BYP GRFT FEM-FEMORAL |
| 35560 | ART BYP GRFT AORTORENAL |
| 35563 | ART BYP GRFT ILIOILIAC |
| 35565 | ART BYP GRFT ILIOFEMORAL |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 35566 | ART BYP FEM-ANT-POST TIB/PRL |
| 35570 | ART BYP TIBIAL-TIB/PERONEAL |
| 35571 | ART BYP POP-TIBL-PRL-OTHER |
| 35572 | HARVEST FEMOROPOPLITEAL VEIN |
| 35583 | VEIN BYP GRFT FEM-POPLITEAL |
| 35585 | VEIN BYP FEM-TIBIAL PERONEAL |
| 35587 | VEIN BYP POP-TIBL PERONEAL |
| 35600 | HARVEST ART FOR CABG ADD-ON |
| 35601 | ART BYP COMMON IPSI CAROTID |
| 35606 | ART BYP CAROTID-SUBCLAVIAN |
| 35612 | ART BYP SUBCLAV-SUBCLAVIAN |
| 35616 | ART BYP SUBCLAV-AXILLARY |
| 35621 | ART BYP AXILLARY-FEMORAL |
| 35623 | ART BYP AXILLARY-POP-TIBIAL |
| 35626 | ART BYP AORSUBCL/CAROT/INNOM |
| 35631 | ART BYP AOR-CELIAC-MSN-RENAL |
| 35632 | ART BYP ILIO-CELIAC |
| 35633 | ART BYP ILIO-MESENTERIC |
| 35634 | ART BYP ILIORENAL |
| 35636 | ART BYP SPENORENAL |
| 35637 | ART BYP AORTOILIAC |
| 35638 | ART BYP AORTOBI-ILIAC |
| 35642 | ART BYP CAROTID-VERTEBRAL |
| 35645 | ART BYP SUBCLAV-VERTEBRL |
| 35646 | ART BYP AORTOBIFEMORAL |
| 35647 | ART BYP AORTOFEMORAL |
| 35650 | ART BYP AXILLARY-AXILLARY |
| 35654 | ART BYP AXILL-FEM-FEMORAL |
| 35656 | ART BYP FEMORAL-POPLITEAL |
| 35661 | ART BYP FEMORAL-FEMORAL |
| 35663 | ART BYP ILIOILIAC |
| 35665 | ART BYP ILIOFEMORAL |
| 35666 | ART BYP FEM-ANT-POST TIB/PRL |
| 35671 | ART BYP POP-TIBL-PRL-OTHER |
| 35681 | COMPOSITE BYP GRFT PROS&VEIN |
| 35682 | COMPOSITE BYP GRFT 2 VEINS |
| 35683 | COMPOSITE BYP GRFT 3/> SEGMT |
| 35685 | BYPASS GRAFT PATENCY/PATCH |
| 35686 | BYPASS GRAFT/AV FIST PATENCY |
| 35691 | ART TRNSPOSJ VERTBRL CAROTID |
| 35693 | ART TRNSPOSJ SUBCLAVIAN |
| 35694 | ART TRNSPOSJ SUBCLAV CAROTID |
| 35695 | ART TRNSPOSJ CAROTID SUBCLAV |
| 35697 | REIMPLANT ARTERY EACH |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 35700 | REOPERATION BYPASS GRAFT |
| 35701 | EXPL N/FLWD SURG NECK ART |
| 35702 | EXPL N/FLWD SURG UXTR ART |
| 35703 | EXPL N/FLWD SURG LXTR ART |
| 35800 | EXPLORE NECK VESSELS |
| 35820 | EXPLORE CHEST VESSELS |
| 35840 | EXPLORE ABDOMINAL VESSELS |
| 35860 | EXPLORE LIMB VESSELS |
| 35870 | REPAIR VESSEL GRAFT DEFECT |
| 35875 | REMOVAL OF CLOT IN GRAFT |
| 35876 | REMOVAL OF CLOT IN GRAFT |
| 35879 | REVISE GRAFT W/VEIN |
| 35881 | REVISE GRAFT W/VEIN |
| 35883 | REVISE GRAFT W/NONAUTO GRAFT |
| 35884 | REVISE GRAFT W/VEIN |
| 35901 | EXCISION GRAFT NECK |
| 35903 | EXCISION GRAFT EXTREMITY |
| 35905 | EXCISION GRAFT THORAX |
| 35907 | EXCISION GRAFT ABDOMEN |
| 36000 | PLACE NEEDLE IN VEIN |
| 36002 | PSEUDOANEURYSM INJECTION TRT |
| 36005 | INJECTION EXT VENOGRAPHY |
| 36010 | PLACE CATHETER IN VEIN |
| 36011 | PLACE CATHETER IN VEIN |
| 36012 | PLACE CATHETER IN VEIN |
| 36013 | PLACE CATHETER IN ARTERY |
| 36014 | PLACE CATHETER IN ARTERY |
| 36015 | PLACE CATHETER IN ARTERY |
| 36100 | ESTABLISH ACCESS TO ARTERY |
| 36140 | INTRO NDL ICATH UPR/LXTR ART |
| 36160 | ESTABLISH ACCESS TO AORTA |
| 36200 | PLACE CATHETER IN AORTA |
| 36215 | PLACE CATHETER IN ARTERY |
| 36216 | PLACE CATHETER IN ARTERY |
| 36217 | PLACE CATHETER IN ARTERY |
| 36218 | PLACE CATHETER IN ARTERY |
| 36221 | PLACE CATH THORACIC AORTA |
| 36222 | PLACE CATH CAROTID/INOM ART |
| 36223 | PLACE CATH CAROTID/INOM ART |
| 36224 | PLACE CATH CAROTD ART |
| 36225 | PLACE CATH SUBCLAVIAN ART |
| 36226 | PLACE CATH VERTEBRAL ART |
| 36227 | PLACE CATH XTRNL CAROTID |
| 36228 | PLACE CATH INTRACRANIAL ART |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 36245 | INS CATH ABD/L-EXT ART 1ST |
| 36246 | INS CATH ABD/L-EXT ART 2ND |
| 36247 | INS CATH ABD/L-EXT ART 3RD |
| 36248 | INS CATH ABD/L-EXT ART ADDL |
| 36251 | INS CATH REN ART 1ST UNILAT |
| 36252 | INS CATH REN ART 1ST BILAT |
| 36253 | INS CATH REN ART 2ND+ UNILAT |
| 36254 | INS CATH REN ART 2ND+ BILAT |
| 36260 | INSERTION OF INFUSION PUMP |
| 36261 | REVISION OF INFUSION PUMP |
| 36262 | REMOVAL OF INFUSION PUMP |
| 36400 | BL DRAW < 3 YRS FEM/JUGULAR |
| 36405 | BL DRAW <3 YRS SCALP VEIN |
| 36406 | BL DRAW <3 YRS OTHER VEIN |
| 36410 | NON-ROUTINE BL DRAW 3/> YRS |
| 36415 | ROUTINE VENIPUNCTURE |
| 36416 | CAPILLARY BLOOD DRAW |
| 36420 | VEIN ACCESS CUTDOWN < 1 YR |
| 36425 | VEIN ACCESS CUTDOWN > 1 YR |
| 36430 | BLOOD TRANSFUSION SERVICE |
| 36440 | BL PUSH TRANSFUSE 2 YR/< |
| 36450 | BL EXCHANGE/TRANSFUSE NB |
| 36455 | BL EXCHANGE/TRANSFUSE NON-NB |
| 36456 | PRTL EXCHANGE TRANSFUSE NB |
| 36460 | TRANSFUSION SERVICE FETAL |
| 36470 | NJX SCLRSNT 1 INCMPTNT VEIN |
| 36471 | NJX SCLRSNT MLT INCMPTNT VN |
| 36481 | INSERTION OF CATHETER VEIN |
| 36500 | INSERTION OF CATHETER VEIN |
| 36510 | INSERTION OF CATHETER VEIN |
| 36511 | APHERESIS WBC |
| 36512 | APHERESIS RBC |
| 36513 | APHERESIS PLATELETS |
| 36514 | APHERESIS PLASMA |
| 36516 | APHERESIS IMMUNOADS SLCTV |
| 36522 | PHOTOPHERESIS |
| 36555 | INSERT NON-TUNNEL CV CATH |
| 36556 | INSERT NON-TUNNEL CV CATH |
| 36557 | INSERT TUNNELED CV CATH |
| 36558 | INSERT TUNNELED CV CATH |
| 36560 | INSERT TUNNELED CV CATH |
| 36561 | INSERT TUNNELED CV CATH |
| 36563 | INSERT TUNNELED CV CATH |
| 36565 | INSERT TUNNELED CV CATH |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 36566 | INSERT TUNNELED CV CATH |
| 36568 | INSJ PICC <5 YR W/O IMAGING |
| 36569 | INSJ PICC 5 YR+ W/O IMAGING |
| 36570 | INSERT PICVAD CATH |
| 36571 | INSERT PICVAD CATH |
| 36572 | INSJ PICC RS&I <5 YR |
| 36573 | INSJ PICC RS&I 5 YR+ |
| 36575 | REPAIR TUNNELED CV CATH |
| 36576 | REPAIR TUNNELED CV CATH |
| 36578 | REPLACE TUNNELED CV CATH |
| 36580 | REPLACE CVAD CATH |
| 36581 | REPLACE TUNNELED CV CATH |
| 36582 | REPLACE TUNNELED CV CATH |
| 36583 | REPLACE TUNNELED CV CATH |
| 36584 | COMPL RPLCMT PICC RS&I |
| 36585 | REPLACE PICVAD CATH |
| 36589 | REMOVAL TUNNELED CV CATH |
| 36590 | REMOVAL TUNNELED CV CATH |
| 36591 | DRAW BLOOD OFF VENOUS DEVICE |
| 36592 | COLLECT BLOOD FROM PICC |
| 36593 | DECLOT VASCULAR DEVICE |
| 36595 | MECH REMOV TUNNELED CV CATH |
| 36596 | MECH REMOV TUNNELED CV CATH |
| 36597 | REPOSITION VENOUS CATHETER |
| 36598 | INJ W/FLUOR EVAL CV DEVICE |
| 36600 | WITHDRAWAL OF ARTERIAL BLOOD |
| 36620 | INSERTION CATHETER ARTERY |
| 36625 | INSERTION CATHETER ARTERY |
| 36640 | INSERTION CATHETER ARTERY |
| 36660 | INSERTION CATHETER ARTERY |
| 36680 | INSERT NEEDLE BONE CAVITY |
| 36800 | INSERTION OF CANNULA |
| 36810 | INSERTION OF CANNULA |
| 36815 | INSERTION OF CANNULA |
| 36818 | AV FUSE UPPR ARM CEPHALIC |
| 36819 | AV FUSE UPPR ARM BASILIC |
| 36820 | AV FUSION/FOREARM VEIN |
| 36821 | AV FUSION DIRECT ANY SITE |
| 36823 | INSERTION OF CANNULA(S) |
| 36825 | ARTERY-VEIN AUTOGRAFT |
| 36830 | ARTERY-VEIN NONAUTOGRAFT |
| 36831 | OPEN THROMBECT AV FISTULA |
| 36832 | AV FISTULA REVISION OPEN |
| 36833 | AV FISTULA REVISION |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 36835 | ARTERY TO VEIN SHUNT |
| 36838 | DIST REVAS LIGATION HEMO |
| 36860 | EXTERNAL CANNULA DECLOTTING |
| 36861 | CANNULA DECLOTTING |
| 36901 | INTRO CATH DIALYSIS CIRCUIT |
| 36902 | INTRO CATH DIALYSIS CIRCUIT |
| 36903 | INTRO CATH DIALYSIS CIRCUIT |
| 36904 | THRMBC/NFS DIALYSIS CIRCUIT |
| 36905 | THRMBC/NFS DIALYSIS CIRCUIT |
| 36906 | THRMBC/NFS DIALYSIS CIRCUIT |
| 36907 | BALO ANGIOP CTR DIALYSIS SEG |
| 36908 | STENT PLMT CTR DIALYSIS SEG |
| 36909 | DIALYSIS CIRCUIT EMBOLJ |
| 37140 | REVISION OF CIRCULATION |
| 37145 | REVISION OF CIRCULATION |
| 37160 | REVISION OF CIRCULATION |
| 37180 | REVISION OF CIRCULATION |
| 37181 | SPLICE SPLEEN/KIDNEY VEINS |
| 37182 | INSERT HEPATIC SHUNT (TIPS) |
| 37183 | REMOVE HEPATIC SHUNT (TIPS) |
| 37184 | PRIM ART M-THRMBC 1ST VSL |
| 37185 | PRIM ART M-THRMBC SBSQ VSL |
| 37186 | SEC ART THROMBECTOMY ADD-ON |
| 37187 | VENOUS MECH THROMBECTOMY |
| 37188 | VEN MECHNL THRMBC REPEAT TX |
| 37191 | INS ENDOVAS VENA CAVA FILTR |
| 37192 | REDO ENDOVAS VENA CAVA FILTR |
| 37193 | REM ENDOVAS VENA CAVA FILTER |
| 37195 | THROMBOLYTIC THERAPY STROKE |
| 37197 | REMOVE INTRVAS FOREIGN BODY |
| 37200 | TRANSCATHETER BIOPSY |
| 37211 | THROMBOLYTIC ART THERAPY |
| 37212 | THROMBOLYTIC VENOUS THERAPY |
| 37213 | THROMBLYTIC ART/VEN THERAPY |
| 37214 | CESSJ THERAPY CATH REMOVAL |
| 37215 | TRANSCATH STENT CCA W/EPS |
| 37216 | TRANSCATH STENT CCA W/O EPS |
| 37217 | STENT PLACEMT RETRO CAROTID |
| 37218 | STENT PLACEMT ANTE CAROTID |
| 37220 | ILIAC REVASC |
| 37221 | ILIAC REVASC W/STENT |
| 37222 | ILIAC REVASC ADD-ON |
| 37223 | ILIAC REVASC W/STENT ADD-ON |
| 37224 | FEM/POPL REVAS W/TLA |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 37225 | FEM/POPL REVAS W/ATHER |
| 37226 | FEM/POPL REVASC W/STENT |
| 37227 | FEM/POPL REVASC STNT & ATHER |
| 37228 | TIB/PER REVASC W/TLA |
| 37229 | TIB/PER REVASC W/ATHER |
| 37230 | TIB/PER REVASC W/STENT |
| 37231 | TIB/PER REVASC STENT & ATHER |
| 37232 | TIB/PER REVASC ADD-ON |
| 37233 | TIBPER REVASC W/ATHER ADD-ON |
| 37234 | REVSC OPN/PRQ TIB/PERO STENT |
| 37235 | TIB/PER REVASC STNT & ATHER |
| 37236 | OPEN/PERQ PLACE STENT 1ST |
| 37237 | OPEN/PERQ PLACE STENT EA ADD |
| 37238 | OPEN/PERQ PLACE STENT SAME |
| 37239 | OPEN/PERQ PLACE STENT EA ADD |
| 37241 | VASC EMBOLIZE/OCCLUDE VENOUS |
| 37242 | VASC EMBOLIZE/OCCLUDE ARTERY |
| 37243 | VASC EMBOLIZE/OCCLUDE ORGAN |
| 37244 | VASC EMBOLIZE/OCCLUDE BLEED |
| 37246 | TRLUML BALO ANGIOP 1ST ART |
| 37247 | TRLUML BALO ANGIOP ADDL ART |
| 37248 | TRLUML BALO ANGIOP 1ST VEIN |
| 37249 | TRLUML BALO ANGIOP ADDL VEIN |
| 37500 | ENDOSCOPY LIGATE PERF VEINS |
| 37565 | LIGATION OF NECK VEIN |
| 37600 | LIGATION OF NECK ARTERY |
| 37605 | LIGATION OF NECK ARTERY |
| 37606 | LIGATION OF NECK ARTERY |
| 37607 | LIGATION OF A-V FISTULA |
| 37609 | TEMPORAL ARTERY PROCEDURE |
| 37615 | LIGATION OF NECK ARTERY |
| 37616 | LIGATION OF CHEST ARTERY |
| 37617 | LIGATION OF ABDOMEN ARTERY |
| 37618 | LIGATION OF EXTREMITY ARTERY |
| 37619 | LIGATION OF INF VENA CAVA |
| 37650 | REVISION OF MAJOR VEIN |
| 37660 | REVISION OF MAJOR VEIN |
| 38100 | REMOVAL OF SPLEEN TOTAL |
| 38101 | REMOVAL OF SPLEEN PARTIAL |
| 38102 | REMOVAL OF SPLEEN TOTAL |
| 38115 | REPAIR OF RUPTURED SPLEEN |
| 38120 | LAPAROSCOPY SPLENECTOMY |
| 38200 | INJECTION FOR SPLEEN X-RAY |
| 38220 | DX BONE MARROW ASPIRATIONS |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 38221 | DX BONE MARROW BIOPSIES |
| 38222 | DX BONE MARROW BX & ASPIR |
| 38242 | TRANSPLT ALLO LYMPHOCYTES |
| 38300 | DRAINAGE LYMPH NODE LESION |
| 38305 | DRAINAGE LYMPH NODE LESION |
| 38308 | INCISION OF LYMPH CHANNELS |
| 38380 | THORACIC DUCT PROCEDURE |
| 38381 | THORACIC DUCT PROCEDURE |
| 38382 | THORACIC DUCT PROCEDURE |
| 38500 | BIOPSY/REMOVAL LYMPH NODES |
| 38505 | NEEDLE BIOPSY LYMPH NODES |
| 38510 | BIOPSY/REMOVAL LYMPH NODES |
| 38520 | BIOPSY/REMOVAL LYMPH NODES |
| 38525 | BIOPSY/REMOVAL LYMPH NODES |
| 38530 | BIOPSY/REMOVAL LYMPH NODES |
| 38531 | OPEN BX/EXC INGUINOFEM NODES |
| 38542 | EXPLORE DEEP NODE(S) NECK |
| 38550 | REMOVAL NECK/ARMPIT LESION |
| 38555 | REMOVAL NECK/ARMPIT LESION |
| 38562 | REMOVAL PELVIC LYMPH NODES |
| 38564 | REMOVAL ABDOMEN LYMPH NODES |
| 38570 | LAPAROSCOPY LYMPH NODE BIOP |
| 38571 | LAPAROSCOPY LYMPHADENECTOMY |
| 38572 | LAPAROSCOPY LYMPHADENECTOMY |
| 38573 | LAPS PELVIC LYMPHADEC |
| 38700 | REMOVAL OF LYMPH NODES NECK |
| 38720 | REMOVAL OF LYMPH NODES NECK |
| 38724 | REMOVAL OF LYMPH NODES NECK |
| 38740 | REMOVE ARMPIT LYMPH NODES |
| 38745 | REMOVE ARMPIT LYMPH NODES |
| 38746 | REMOVE THORACIC LYMPH NODES |
| 38747 | REMOVE ABDOMINAL LYMPH NODES |
| 38760 | REMOVE GROIN LYMPH NODES |
| 38765 | REMOVE GROIN LYMPH NODES |
| 38770 | REMOVE PELVIS LYMPH NODES |
| 38780 | REMOVE ABDOMEN LYMPH NODES |
| 38790 | INJECT FOR LYMPHATIC X-RAY |
| 38792 | RA TRACER ID OF SENTINL NODE |
| 38794 | ACCESS THORACIC LYMPH DUCT |
| 38900 | IO MAP OF SENT LYMPH NODE |
| 39000 | EXPLORATION OF CHEST |
| 39010 | EXPLORATION OF CHEST |
| 39200 | RESECT MEDIASTINAL CYST |
| 39220 | RESECT MEDIASTINAL TUMOR |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 39401 | MEDIASTINOSCPY W/MEDSTNL BX |
| 39402 | MEDIASTINOSCPY W/LMPH NOD BX |
| 39501 | REPAIR DIAPHRAGM LACERATION |
| 39503 | REPAIR OF DIAPHRAGM HERNIA |
| 39540 | REPAIR OF DIAPHRAGM HERNIA |
| 39541 | REPAIR OF DIAPHRAGM HERNIA |
| 39545 | REVISION OF DIAPHRAGM |
| 39560 | RESECT DIAPHRAGM SIMPLE |
| 39561 | RESECT DIAPHRAGM COMPLEX |
| 40490 | BIOPSY OF LIP |
| 40700 | REPAIR CLEFT LIP/NASAL |
| 40701 | REPAIR CLEFT LIP/NASAL |
| 40702 | REPAIR CLEFT LIP/NASAL |
| 40720 | REPAIR CLEFT LIP/NASAL |
| 40761 | REPAIR CLEFT LIP/NASAL |
| 40800 | DRAINAGE OF MOUTH LESION |
| 40801 | DRAINAGE OF MOUTH LESION |
| 40804 | REMOVAL FOREIGN BODY MOUTH |
| 40805 | REMOVAL FOREIGN BODY MOUTH |
| 40806 | INCISION OF LIP FOLD |
| 40808 | BIOPSY OF MOUTH LESION |
| 40810 | EXCISION OF MOUTH LESION |
| 40812 | EXCISE/REPAIR MOUTH LESION |
| 40814 | EXCISE/REPAIR MOUTH LESION |
| 40816 | EXCISION OF MOUTH LESION |
| 40818 | EXCISE ORAL MUCOSA FOR GRAFT |
| 40819 | EXCISE LIP OR CHEEK FOLD |
| 40830 | REPAIR MOUTH LACERATION |
| 40831 | REPAIR MOUTH LACERATION |
| 40840 | RECONSTRUCTION OF MOUTH |
| 40842 | RECONSTRUCTION OF MOUTH |
| 40843 | RECONSTRUCTION OF MOUTH |
| 40844 | RECONSTRUCTION OF MOUTH |
| 40845 | RECONSTRUCTION OF MOUTH |
| 41000 | DRAINAGE OF MOUTH LESION |
| 41005 | DRAINAGE OF MOUTH LESION |
| 41006 | DRAINAGE OF MOUTH LESION |
| 41007 | DRAINAGE OF MOUTH LESION |
| 41008 | DRAINAGE OF MOUTH LESION |
| 41009 | DRAINAGE OF MOUTH LESION |
| 41010 | INCISION OF TONGUE FOLD |
| 41015 | DRAINAGE OF MOUTH LESION |
| 41016 | DRAINAGE OF MOUTH LESION |
| 41017 | DRAINAGE OF MOUTH LESION |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 41018 | DRAINAGE OF MOUTH LESION |
| 41100 | BIOPSY OF TONGUE |
| 41105 | BIOPSY OF TONGUE |
| 41108 | BIOPSY OF FLOOR OF MOUTH |
| 41110 | EXCISION OF TONGUE LESION |
| 41112 | EXCISION OF TONGUE LESION |
| 41113 | EXCISION OF TONGUE LESION |
| 41114 | EXCISION OF TONGUE LESION |
| 41115 | EXCISION OF TONGUE FOLD |
| 41116 | EXCISION OF MOUTH LESION |
| 41120 | PARTIAL REMOVAL OF TONGUE |
| 41130 | PARTIAL REMOVAL OF TONGUE |
| 41135 | TONGUE AND NECK SURGERY |
| 41140 | REMOVAL OF TONGUE |
| 41145 | TONGUE REMOVAL NECK SURGERY |
| 41150 | TONGUE MOUTH JAW SURGERY |
| 41153 | TONGUE MOUTH NECK SURGERY |
| 41155 | TONGUE JAW & NECK SURGERY |
| 41250 | REPAIR TONGUE LACERATION |
| 41251 | REPAIR TONGUE LACERATION |
| 41252 | REPAIR TONGUE LACERATION |
| 41510 | TONGUE TO LIP SURGERY |
| 41520 | RECONSTRUCTION TONGUE FOLD |
| 41800 | DRAINAGE OF GUM LESION |
| 41805 | REMOVAL FOREIGN BODY GUM |
| 41806 | REMOVAL FOREIGN BODY JAWBONE |
| 42000 | DRAINAGE MOUTH ROOF LESION |
| 42100 | BIOPSY ROOF OF MOUTH |
| 42104 | EXCISION LESION MOUTH ROOF |
| 42106 | EXCISION LESION MOUTH ROOF |
| 42107 | EXCISION LESION MOUTH ROOF |
| 42120 | REMOVE PALATE/LESION |
| 42160 | TREATMENT MOUTH ROOF LESION |
| 42180 | REPAIR PALATE |
| 42182 | REPAIR PALATE |
| 42200 | RECONSTRUCT CLEFT PALATE |
| 42205 | RECONSTRUCT CLEFT PALATE |
| 42210 | RECONSTRUCT CLEFT PALATE |
| 42215 | RECONSTRUCT CLEFT PALATE |
| 42220 | RECONSTRUCT CLEFT PALATE |
| 42225 | RECONSTRUCT CLEFT PALATE |
| 42226 | LENGTHENING OF PALATE |
| 42227 | LENGTHENING OF PALATE |
| 42235 | REPAIR PALATE |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 42260 | REPAIR NOSE TO LIP FISTULA |
| 42300 | DRAINAGE OF SALIVARY GLAND |
| 42305 | DRAINAGE OF SALIVARY GLAND |
| 42310 | DRAINAGE OF SALIVARY GLAND |
| 42320 | DRAINAGE OF SALIVARY GLAND |
| 42330 | REMOVAL OF SALIVARY STONE |
| 42335 | REMOVAL OF SALIVARY STONE |
| 42340 | REMOVAL OF SALIVARY STONE |
| 42400 | BIOPSY OF SALIVARY GLAND |
| 42405 | BIOPSY OF SALIVARY GLAND |
| 42408 | EXCISION OF SALIVARY CYST |
| 42409 | DRAINAGE OF SALIVARY CYST |
| 42410 | EXCISE PAROTID GLAND/LESION |
| 42415 | EXCISE PAROTID GLAND/LESION |
| 42420 | EXCISE PAROTID GLAND/LESION |
| 42425 | EXCISE PAROTID GLAND/LESION |
| 42426 | EXCISE PAROTID GLAND/LESION |
| 42440 | EXCISE SUBMAXILLARY GLAND |
| 42450 | EXCISE SUBLINGUAL GLAND |
| 42500 | REPAIR SALIVARY DUCT |
| 42505 | REPAIR SALIVARY DUCT |
| 42507 | PAROTID DUCT DIVERSION |
| 42509 | PAROTID DUCT DIVERSION |
| 42510 | PAROTID DUCT DIVERSION |
| 42550 | INJECTION FOR SALIVARY X-RAY |
| 42600 | CLOSURE OF SALIVARY FISTULA |
| 42650 | DILATION OF SALIVARY DUCT |
| 42660 | DILATION OF SALIVARY DUCT |
| 42665 | LIGATION OF SALIVARY DUCT |
| 42700 | DRAINAGE OF TONSIL ABSCESS |
| 42720 | DRAINAGE OF THROAT ABSCESS |
| 42725 | DRAINAGE OF THROAT ABSCESS |
| 42800 | BIOPSY OF THROAT |
| 42804 | BIOPSY OF UPPER NOSE/THROAT |
| 42806 | BIOPSY OF UPPER NOSE/THROAT |
| 42808 | EXCISE PHARYNX LESION |
| 42809 | REMOVE PHARYNX FOREIGN BODY |
| 42810 | EXCISION OF NECK CYST |
| 42815 | EXCISION OF NECK CYST |
| 42842 | EXTENSIVE SURGERY OF THROAT |
| 42844 | EXTENSIVE SURGERY OF THROAT |
| 42845 | EXTENSIVE SURGERY OF THROAT |
| 42860 | EXCISION OF TONSIL TAGS |
| 42870 | EXCISION OF LINGUAL TONSIL |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 42900 | REPAIR THROAT WOUND |
| 42953 | REPAIR THROAT ESOPHAGUS |
| 42955 | SURGICAL OPENING OF THROAT |
| 42960 | CONTROL THROAT BLEEDING |
| 42961 | CONTROL THROAT BLEEDING |
| 42962 | CONTROL THROAT BLEEDING |
| 42970 | CONTROL NOSE/THROAT BLEEDING |
| 42971 | CONTROL NOSE/THROAT BLEEDING |
| 42972 | CONTROL NOSE/THROAT BLEEDING |
| 43020 | INCISION OF ESOPHAGUS |
| 43030 | THROAT MUSCLE SURGERY |
| 43045 | INCISION OF ESOPHAGUS |
| 43100 | EXCISION OF ESOPHAGUS LESION |
| 43101 | EXCISION OF ESOPHAGUS LESION |
| 43107 | REMOVAL OF ESOPHAGUS |
| 43108 | REMOVAL OF ESOPHAGUS |
| 43112 | ESPHG TOT W/THRCM |
| 43113 | REMOVAL OF ESOPHAGUS |
| 43116 | PARTIAL REMOVAL OF ESOPHAGUS |
| 43117 | PARTIAL REMOVAL OF ESOPHAGUS |
| 43118 | PARTIAL REMOVAL OF ESOPHAGUS |
| 43121 | PARTIAL REMOVAL OF ESOPHAGUS |
| 43122 | PARTIAL REMOVAL OF ESOPHAGUS |
| 43123 | PARTIAL REMOVAL OF ESOPHAGUS |
| 43124 | REMOVAL OF ESOPHAGUS |
| 43130 | REMOVAL OF ESOPHAGUS POUCH |
| 43135 | REMOVAL OF ESOPHAGUS POUCH |
| 43180 | ESOPHAGOSCOPY RIGID TRNSO |
| 43192 | ESOPHAGOSCP RIG TRNSO INJECT |
| 43193 | ESOPHAGOSCP RIG TRNSO BIOPSY |
| 43194 | ESOPHAGOSCP RIG TRNSO REM FB |
| 43198 | ESOPHAGOSC FLEX TRNSN BIOPSY |
| 43200 | ESOPHAGOSCOPY FLEXIBLE BRUSH |
| 43201 | ESOPH SCOPE W/SUBMUCOUS INJ |
| 43202 | ESOPHAGOSCOPY FLEX BIOPSY |
| 43204 | ESOPH SCOPE W/SCLEROSIS INJ |
| 43205 | ESOPHAGUS ENDOSCOPY/LIGATION |
| 43206 | ESOPH OPTICAL ENDOMICROSCOPY |
| 43210 | EGD ESOPHAGOGASTRC FNDOPLSTY |
| 43211 | ESOPHAGOSCOP MUCOSAL RESECT |
| 43212 | ESOPHAGOSCOP STENT PLACEMENT |
| 43213 | ESOPHAGOSCOPY RETRO BALLOON |
| 43214 | ESOPHAGOSC DILATE BALLOON 30 |
| 43215 | ESOPHAGOSCOPY FLEX REMOVE FB |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 43216 | ESOPHAGOSCOPY LESION REMOVAL |
| 43217 | ESOPHAGOSCOPY SNARE LES REMV |
| 43220 | ESOPHAGOSCOPY BALLOON <30MM |
| 43226 | ESOPH ENDOSCOPY DILATION |
| 43227 | ESOPHAGOSCOPY CONTROL BLEED |
| 43229 | ESOPHAGOSCOPY LESION ABLATE |
| 43231 | ESOPHAGOSCOP ULTRASOUND EXAM |
| 43232 | ESOPHAGOSCOPY W/US NEEDLE BX |
| 43233 | EGD BALLOON DIL ESOPH30 MM/> |
| 43235 | EGD DIAGNOSTIC BRUSH WASH |
| 43236 | UPPR GI SCOPE W/SUBMUC INJ |
| 43237 | ENDOSCOPIC US EXAM ESOPH |
| 43238 | EGD US FINE NEEDLE BX/ASPIR |
| 43239 | EGD BIOPSY SINGLE/MULTIPLE |
| 43240 | EGD W/TRANSMURAL DRAIN CYST |
| 43241 | EGD TUBE/CATH INSERTION |
| 43242 | EGD US FINE NEEDLE BX/ASPIR |
| 43243 | EGD INJECTION VARICES |
| 43244 | EGD VARICES LIGATION |
| 43245 | EGD DILATE STRICTURE |
| 43246 | EGD PLACE GASTROSTOMY TUBE |
| 43247 | EGD REMOVE FOREIGN BODY |
| 43248 | EGD GUIDE WIRE INSERTION |
| 43249 | ESOPH EGD DILATION <30 MM |
| 43250 | EGD CAUTERY TUMOR POLYP |
| 43251 | EGD REMOVE LESION SNARE |
| 43252 | EGD OPTICAL ENDOMICROSCOPY |
| 43253 | EGD US TRANSMURAL INJXN/MARK |
| 43254 | EGD ENDO MUCOSAL RESECTION |
| 43255 | EGD CONTROL BLEEDING ANY |
| 43259 | EGD US EXAM DUODENUM/JEJUNUM |
| 43260 | ERCP W/SPECIMEN COLLECTION |
| 43261 | ENDO CHOLANGIOPANCREATOGRAPH |
| 43270 | EGD LESION ABLATION |
| 43273 | ENDOSCOPIC PANCREATOSCOPY |
| 43274 | ERCP DUCT STENT PLACEMENT |
| 43275 | ERCP REMOVE FORGN BODY DUCT |
| 43276 | ERCP STENT EXCHANGE W/DILATE |
| 43277 | ERCP EA DUCT/AMPULLA DILATE |
| 43278 | ERCP LESION ABLATE W/DILATE |
| 43283 | LAP ESOPH LENGTHENING |
| 43286 | ESPHG TOT W/LAPS MOBLJ |
| 43287 | ESPHG DSTL 2/3 W/LAPS MOBLJ |
| 43288 | ESPHG THRSC MOBLJ |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 43300 | REPAIR OF ESOPHAGUS |
| 43305 | REPAIR ESOPHAGUS AND FISTULA |
| 43310 | REPAIR OF ESOPHAGUS |
| 43312 | REPAIR ESOPHAGUS AND FISTULA |
| 43313 | ESOPHAGOPLASTY CONGENITAL |
| 43314 | TRACHEO-ESOPHAGOPLASTY CONG |
| 43320 | FUSE ESOPHAGUS & STOMACH |
| 43325 | REVISE ESOPHAGUS & STOMACH |
| 43327 | ESOPH FUNDOPLASTY LAP |
| 43328 | ESOPH FUNDOPLASTY THOR |
| 43330 | ESOPHAGOMYOTOMY ABDOMINAL |
| 43331 | ESOPHAGOMYOTOMY THORACIC |
| 43338 | ESOPH LENGTHENING |
| 43340 | FUSE ESOPHAGUS & INTESTINE |
| 43341 | FUSE ESOPHAGUS & INTESTINE |
| 43351 | SURGICAL OPENING ESOPHAGUS |
| 43352 | SURGICAL OPENING ESOPHAGUS |
| 43360 | GASTROINTESTINAL REPAIR |
| 43361 | GASTROINTESTINAL REPAIR |
| 43400 | LIGATE ESOPHAGUS VEINS |
| 43405 | LIGATE/STAPLE ESOPHAGUS |
| 43410 | REPAIR ESOPHAGUS WOUND |
| 43415 | REPAIR ESOPHAGUS WOUND |
| 43420 | REPAIR ESOPHAGUS OPENING |
| 43425 | REPAIR ESOPHAGUS OPENING |
| 43450 | DILATE ESOPHAGUS 1/MULT PASS |
| 43453 | DILATE ESOPHAGUS |
| 43460 | PRESSURE TREATMENT ESOPHAGUS |
| 43496 | FREE JEJUNUM FLAP MICROVASC |
| 43500 | SURGICAL OPENING OF STOMACH |
| 43501 | SURGICAL REPAIR OF STOMACH |
| 43502 | SURGICAL REPAIR OF STOMACH |
| 43510 | SURGICAL OPENING OF STOMACH |
| 43520 | INCISION OF PYLORIC MUSCLE |
| 43605 | BIOPSY OF STOMACH |
| 43610 | EXCISION OF STOMACH LESION |
| 43611 | EXCISION OF STOMACH LESION |
| 43620 | REMOVAL OF STOMACH |
| 43622 | REMOVAL OF STOMACH |
| 43631 | REMOVAL OF STOMACH PARTIAL |
| 43632 | REMOVAL OF STOMACH PARTIAL |
| 43633 | REMOVAL OF STOMACH PARTIAL |
| 43634 | REMOVAL OF STOMACH PARTIAL |
| 43635 | REMOVAL OF STOMACH PARTIAL |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 43640 | VAGOTOMY & PYLORUS REPAIR |
| 43641 | VAGOTOMY & PYLORUS REPAIR |
| 43651 | LAPAROSCOPY VAGUS NERVE |
| 43652 | LAPAROSCOPY VAGUS NERVE |
| 43653 | LAPAROSCOPY GASTROSTOMY |
| 43752 | NASAL/OROGASTRIC W/TUBE PLMT |
| 43753 | TX GASTRO INTUB W/ASP |
| 43754 | DX GASTR INTUB W/ASP SPEC |
| 43755 | DX GASTR INTUB W/ASP SPECS |
| 43756 | DX DUOD INTUB W/ASP SPEC |
| 43757 | DX DUOD INTUB W/ASP SPECS |
| 43761 | REPOSITION GASTROSTOMY TUBE |
| 43762 | RPLC GTUBE NO REVJ TRC |
| 43763 | RPLC GTUBE REVJ GSTRST TRC |
| 43800 | RECONSTRUCTION OF PYLORUS |
| 43810 | FUSION OF STOMACH AND BOWEL |
| 43820 | FUSION OF STOMACH AND BOWEL |
| 43825 | FUSION OF STOMACH AND BOWEL |
| 43830 | PLACE GASTROSTOMY TUBE |
| 43831 | PLACE GASTROSTOMY TUBE |
| 43832 | PLACE GASTROSTOMY TUBE |
| 43840 | REPAIR OF STOMACH LESION |
| 43850 | REVISE STOMACH-BOWEL FUSION |
| 43855 | REVISE STOMACH-BOWEL FUSION |
| 43860 | REVISE STOMACH-BOWEL FUSION |
| 43865 | REVISE STOMACH-BOWEL FUSION |
| 43870 | REPAIR STOMACH OPENING |
| 43880 | REPAIR STOMACH-BOWEL FISTULA |
| 44005 | FREEING OF BOWEL ADHESION |
| 44010 | INCISION OF SMALL BOWEL |
| 44015 | INSERT NEEDLE CATH BOWEL |
| 44020 | EXPLORE SMALL INTESTINE |
| 44021 | DECOMPRESS SMALL BOWEL |
| 44025 | INCISION OF LARGE BOWEL |
| 44050 | REDUCE BOWEL OBSTRUCTION |
| 44055 | CORRECT MALROTATION OF BOWEL |
| 44100 | BIOPSY OF BOWEL |
| 44110 | EXCISE INTESTINE LESION(S) |
| 44111 | EXCISION OF BOWEL LESION(S) |
| 44120 | REMOVAL OF SMALL INTESTINE |
| 44121 | REMOVAL OF SMALL INTESTINE |
| 44125 | REMOVAL OF SMALL INTESTINE |
| 44126 | ENTERECTOMY W/O TAPER CONG |
| 44127 | ENTERECTOMY W/TAPER CONG |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 44128 | ENTERECTOMY CONG ADD-ON |
| 44130 | BOWEL TO BOWEL FUSION |
| 44139 | MOBILIZATION OF COLON |
| 44140 | PARTIAL REMOVAL OF COLON |
| 44141 | PARTIAL REMOVAL OF COLON |
| 44143 | PARTIAL REMOVAL OF COLON |
| 44144 | PARTIAL REMOVAL OF COLON |
| 44145 | PARTIAL REMOVAL OF COLON |
| 44146 | PARTIAL REMOVAL OF COLON |
| 44147 | PARTIAL REMOVAL OF COLON |
| 44150 | REMOVAL OF COLON |
| 44151 | REMOVAL OF COLON/ILEOSTOMY |
| 44155 | REMOVAL OF COLON/ILEOSTOMY |
| 44156 | REMOVAL OF COLON/ILEOSTOMY |
| 44157 | COLECTOMY W/ILEOANAL ANAST |
| 44158 | COLECTOMY W/NEO-RECTUM POUCH |
| 44160 | REMOVAL OF COLON |
| 44180 | LAP ENTEROLYSIS |
| 44186 | LAP JEJUNOSTOMY |
| 44187 | LAP ILEO/JEJUNO-STOMY |
| 44188 | LAP COLOSTOMY |
| 44202 | LAP ENTERECTOMY |
| 44203 | LAP RESECT S/INTESTINE ADDL |
| 44204 | LAPARO PARTIAL COLECTOMY |
| 44205 | LAP COLECTOMY PART W/ILEUM |
| 44206 | LAP PART COLECTOMY W/STOMA |
| 44207 | L COLECTOMY/COLOPROCTOSTOMY |
| 44208 | L COLECTOMY/COLOPROCTOSTOMY |
| 44210 | LAPARO TOTAL PROCTOCOLECTOMY |
| 44211 | LAP COLECTOMY W/PROCTECTOMY |
| 44212 | LAPARO TOTAL PROCTOCOLECTOMY |
| 44213 | LAP MOBIL SPLENIC FL ADD-ON |
| 44227 | LAP CLOSE ENTEROSTOMY |
| 44300 | OPEN BOWEL TO SKIN |
| 44310 | ILEOSTOMY/JEJUNOSTOMY |
| 44312 | REVISION OF ILEOSTOMY |
| 44314 | REVISION OF ILEOSTOMY |
| 44316 | DEVISE BOWEL POUCH |
| 44320 | COLOSTOMY |
| 44322 | COLOSTOMY WITH BIOPSIES |
| 44340 | REVISION OF COLOSTOMY |
| 44345 | REVISION OF COLOSTOMY |
| 44346 | REVISION OF COLOSTOMY |
| 44360 | SMALL BOWEL ENDOSCOPY |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 44361 | SMALL BOWEL ENDOSCOPY/BIOPSY |
| 44363 | SMALL BOWEL ENDOSCOPY |
| 44364 | SMALL BOWEL ENDOSCOPY |
| 44365 | SMALL BOWEL ENDOSCOPY |
| 44366 | SMALL BOWEL ENDOSCOPY |
| 44369 | SMALL BOWEL ENDOSCOPY |
| 44370 | SMALL BOWEL ENDOSCOPY/STENT |
| 44372 | SMALL BOWEL ENDOSCOPY |
| 44373 | SMALL BOWEL ENDOSCOPY |
| 44376 | SMALL BOWEL ENDOSCOPY |
| 44377 | SMALL BOWEL ENDOSCOPY/BIOPSY |
| 44378 | SMALL BOWEL ENDOSCOPY |
| 44379 | S BOWEL ENDOSCOPE W/STENT |
| 44380 | SMALL BOWEL ENDOSCOPY BR/WA |
| 44381 | SMALL BOWEL ENDOSCOPY BR/WA |
| 44382 | SMALL BOWEL ENDOSCOPY |
| 44384 | SMALL BOWEL ENDOSCOPY |
| 44385 | ENDOSCOPY OF BOWEL POUCH |
| 44386 | ENDOSCOPY BOWEL POUCH/BIOP |
| 44388 | COLONOSCOPY THRU STOMA SPX |
| 44389 | COLONOSCOPY WITH BIOPSY |
| 44390 | COLONOSCOPY FOR FOREIGN BODY |
| 44391 | COLONOSCOPY FOR BLEEDING |
| 44392 | COLONOSCOPY & POLYPECTOMY |
| 44394 | COLONOSCOPY W/SNARE |
| 44401 | COLONOSCOPY WITH ABLATION |
| 44402 | COLONOSCOPY W/STENT PLCMT |
| 44403 | COLONOSCOPY W/RESECTION |
| 44404 | COLONOSCOPY W/INJECTION |
| 44405 | COLONOSCOPY W/DILATION |
| 44406 | COLONOSCOPY W/ULTRASOUND |
| 44407 | COLONOSCOPY W/NDL ASPIR/BX |
| 44408 | COLONOSCOPY W/DECOMPRESSION |
| 44500 | INTRO GASTROINTESTINAL TUBE |
| 44602 | SUTURE SMALL INTESTINE |
| 44603 | SUTURE SMALL INTESTINE |
| 44604 | SUTURE LARGE INTESTINE |
| 44605 | REPAIR OF BOWEL LESION |
| 44615 | INTESTINAL STRICTUROPLASTY |
| 44620 | REPAIR BOWEL OPENING |
| 44625 | REPAIR BOWEL OPENING |
| 44626 | REPAIR BOWEL OPENING |
| 44640 | REPAIR BOWEL-SKIN FISTULA |
| 44650 | REPAIR BOWEL FISTULA |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 44660 | REPAIR BOWEL-BLADDER FISTULA |
| 44661 | REPAIR BOWEL-BLADDER FISTULA |
| 44680 | SURGICAL REVISION INTESTINE |
| 44700 | SUSPEND BOWEL W/PROSTHESIS |
| 44701 | INTRAOP COLON LAVAGE ADD-ON |
| 44705 | PREPARE FECAL MICROBIOTA |
| 44715 | PREPARE DONOR INTESTINE |
| 44720 | PREP DONOR INTESTINE/VENOUS |
| 44721 | PREP DONOR INTESTINE/ARTERY |
| 44800 | EXCISION OF BOWEL POUCH |
| 44820 | EXCISION OF MESENTERY LESION |
| 44850 | REPAIR OF MESENTERY |
| 44900 | DRAIN APPENDIX ABSCESS OPEN |
| 44950 | APPENDECTOMY |
| 44955 | APPENDECTOMY ADD-ON |
| 44960 | APPENDECTOMY |
| 44970 | LAPAROSCOPY APPENDECTOMY |
| 45000 | DRAINAGE OF PELVIC ABSCESS |
| 45005 | DRAINAGE OF RECTAL ABSCESS |
| 45020 | DRAINAGE OF RECTAL ABSCESS |
| 45100 | BIOPSY OF RECTUM |
| 45108 | REMOVAL OF ANORECTAL LESION |
| 45110 | REMOVAL OF RECTUM |
| 45111 | PARTIAL REMOVAL OF RECTUM |
| 45112 | REMOVAL OF RECTUM |
| 45113 | PARTIAL PROCTECTOMY |
| 45114 | PARTIAL REMOVAL OF RECTUM |
| 45116 | PARTIAL REMOVAL OF RECTUM |
| 45119 | REMOVE RECTUM W/RESERVOIR |
| 45120 | REMOVAL OF RECTUM |
| 45121 | REMOVAL OF RECTUM AND COLON |
| 45123 | PARTIAL PROCTECTOMY |
| 45126 | PELVIC EXENTERATION |
| 45130 | EXCISION OF RECTAL PROLAPSE |
| 45135 | EXCISION OF RECTAL PROLAPSE |
| 45136 | EXCISE ILEOANAL RESERVIOR |
| 45150 | EXCISION OF RECTAL STRICTURE |
| 45160 | EXCISION OF RECTAL LESION |
| 45171 | EXC RECT TUM TRANSANAL PART |
| 45172 | EXC RECT TUM TRANSANAL FULL |
| 45190 | DESTRUCTION RECTAL TUMOR |
| 45300 | PROCTOSIGMOIDOSCOPY DX |
| 45303 | PROCTOSIGMOIDOSCOPY DILATE |
| 45305 | PROCTOSIGMOIDOSCOPY W/BX |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 45307 | PROCTOSIGMOIDOSCOPY FB |
| 45308 | PROCTOSIGMOIDOSCOPY REMOVAL |
| 45309 | PROCTOSIGMOIDOSCOPY REMOVAL |
| 45315 | PROCTOSIGMOIDOSCOPY REMOVAL |
| 45317 | PROCTOSIGMOIDOSCOPY BLEED |
| 45320 | PROCTOSIGMOIDOSCOPY ABLATE |
| 45321 | PROCTOSIGMOIDOSCOPY VOLVUL |
| 45327 | PROCTOSIGMOIDOSCOPY W/STENT |
| 45330 | DIAGNOSTIC SIGMOIDOSCOPY |
| 45331 | SIGMOIDOSCOPY AND BIOPSY |
| 45332 | SIGMOIDOSCOPY W/FB REMOVAL |
| 45333 | SIGMOIDOSCOPY & POLYPECTOMY |
| 45334 | SIGMOIDOSCOPY FOR BLEEDING |
| 45335 | SIGMOIDOSCOPY W/SUBMUC INJ |
| 45337 | SIGMOIDOSCOPY & DECOMPRESS |
| 45338 | SIGMOIDOSCOPY W/TUMR REMOVE |
| 45340 | SIG W/TNDSC BALLOON DILATION |
| 45341 | SIGMOIDOSCOPY W/ULTRASOUND |
| 45342 | SIGMOIDOSCOPY W/US GUIDE BX |
| 45346 | SIGMOIDOSCOPY W/ABLATION |
| 45347 | SIGMOIDOSCOPY W/PLCMT STENT |
| 45349 | SIGMOIDOSCOPY W/RESECTION |
| 45350 | SGMDSC W/BAND LIGATION |
| 45378 | DIAGNOSTIC COLONOSCOPY |
| 45379 | COLONOSCOPY W/FB REMOVAL |
| 45380 | COLONOSCOPY AND BIOPSY |
| 45381 | COLONOSCOPY SUBMUCOUS NJX |
| 45382 | COLONOSCOPY W/CONTROL BLEED |
| 45384 | COLONOSCOPY W/LESION REMOVAL |
| 45385 | COLONOSCOPY W/LESION REMOVAL |
| 45386 | COLONOSCOPY W/BALLOON DILAT |
| 45388 | COLONOSCOPY W/ABLATION |
| 45389 | COLONOSCOPY W/STENT PLCMT |
| 45390 | COLONOSCOPY W/RESECTION |
| 45391 | COLONOSCOPY W/ENDOSCOPE US |
| 45392 | COLONOSCOPY W/ENDOSCOPIC FNB |
| 45393 | COLONOSCOPY W/DECOMPRESSION |
| 45395 | LAP REMOVAL OF RECTUM |
| 45397 | LAP REMOVE RECTUM W/POUCH |
| 45398 | COLONOSCOPY W/BAND LIGATION |
| 45400 | LAPAROSCOPIC PROC |
| 45402 | LAP PROCTOPEXY W/SIG RESECT |
| 45500 | REPAIR OF RECTUM |
| 45505 | REPAIR OF RECTUM |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 45520 | TREATMENT OF RECTAL PROLAPSE |
| 45540 | CORRECT RECTAL PROLAPSE |
| 45541 | CORRECT RECTAL PROLAPSE |
| 45550 | REPAIR RECTUM/REMOVE SIGMOID |
| 45562 | EXPLORATION/REPAIR OF RECTUM |
| 45563 | EXPLORATION/REPAIR OF RECTUM |
| 45800 | REPAIR RECT/BLADDER FISTULA |
| 45805 | REPAIR FISTULA W/COLOSTOMY |
| 45820 | REPAIR RECTOURETHRAL FISTULA |
| 45825 | REPAIR FISTULA W/COLOSTOMY |
| 45900 | REDUCTION OF RECTAL PROLAPSE |
| 45905 | DILATION OF ANAL SPHINCTER |
| 45910 | DILATION OF RECTAL NARROWING |
| 45915 | REMOVE RECTAL OBSTRUCTION |
| 45990 | SURG DX EXAM ANORECTAL |
| 46020 | PLACEMENT OF SETON |
| 46030 | REMOVAL OF RECTAL MARKER |
| 46040 | INCISION OF RECTAL ABSCESS |
| 46045 | INCISION OF RECTAL ABSCESS |
| 46050 | INCISION OF ANAL ABSCESS |
| 46060 | INCISION OF RECTAL ABSCESS |
| 46070 | INCISION OF ANAL SEPTUM |
| 46080 | INCISION OF ANAL SPHINCTER |
| 46083 | INCISE EXTERNAL HEMORRHOID |
| 46200 | REMOVAL OF ANAL FISSURE |
| 46220 | EXCISE ANAL EXT TAG/PAPILLA |
| 46221 | LIGATION OF HEMORRHOID(S) |
| 46230 | REMOVAL OF ANAL TAGS |
| 46250 | REMOVE EXT HEM GROUPS 2+ |
| 46255 | REMOVE INT/EXT HEM 1 GROUP |
| 46257 | REMOVE IN/EX HEM GRP & FISS |
| 46258 | REMOVE IN/EX HEM GRP W/FISTU |
| 46260 | REMOVE IN/EX HEM GROUPS 2+ |
| 46261 | REMOVE IN/EX HEM GRPS & FISS |
| 46262 | REMOVE IN/EX HEM GRPS W/FIST |
| 46270 | REMOVE ANAL FIST SUBQ |
| 46275 | REMOVE ANAL FIST INTER |
| 46280 | REMOVE ANAL FIST COMPLEX |
| 46285 | REMOVE ANAL FIST 2 STAGE |
| 46288 | REPAIR ANAL FISTULA |
| 46320 | REMOVAL OF HEMORRHOID CLOT |
| 46600 | DIAGNOSTIC ANOSCOPY SPX |
| 46601 | DIAGNOSTIC ANOSCOPY |
| 46604 | ANOSCOPY AND DILATION |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 46606 | ANOSCOPY AND BIOPSY |
| 46608 | ANOSCOPY REMOVE FOR BODY |
| 46610 | ANOSCOPY REMOVE LESION |
| 46611 | ANOSCOPY |
| 46612 | ANOSCOPY REMOVE LESIONS |
| 46614 | ANOSCOPY CONTROL BLEEDING |
| 46615 | ANOSCOPY |
| 46700 | REPAIR OF ANAL STRICTURE |
| 46705 | REPAIR OF ANAL STRICTURE |
| 46706 | REPR OF ANAL FISTULA W/GLUE |
| 46707 | REPAIR ANORECTAL FIST W/PLUG |
| 46710 | REPR PER/VAG POUCH SNGL PROC |
| 46712 | REPR PER/VAG POUCH DBL PROC |
| 46715 | REP PERF ANOPER FISTU |
| 46716 | REP PERF ANOPER/VESTIB FISTU |
| 46730 | CONSTRUCTION OF ABSENT ANUS |
| 46735 | CONSTRUCTION OF ABSENT ANUS |
| 46740 | CONSTRUCTION OF ABSENT ANUS |
| 46742 | REPAIR OF IMPERFORATED ANUS |
| 46744 | REPAIR OF CLOACAL ANOMALY |
| 46746 | REPAIR OF CLOACAL ANOMALY |
| 46748 | REPAIR OF CLOACAL ANOMALY |
| 46750 | REPAIR OF ANAL SPHINCTER |
| 46751 | REPAIR OF ANAL SPHINCTER |
| 46754 | REMOVAL OF SUTURE FROM ANUS |
| 46900 | DESTRUCTION ANAL LESION(S) |
| 46910 | DESTRUCTION ANAL LESION(S) |
| 46916 | CRYOSURGERY ANAL LESION(S) |
| 46917 | LASER SURGERY ANAL LESIONS |
| 46922 | EXCISION OF ANAL LESION(S) |
| 46924 | DESTRUCTION ANAL LESION(S) |
| 46930 | DESTROY INTERNAL HEMORRHOIDS |
| 46940 | TREATMENT OF ANAL FISSURE |
| 46942 | TREATMENT OF ANAL FISSURE |
| 46948 | INT HRHC TRANAL DARTLZJ 2+ |
| 47000 | NEEDLE BIOPSY OF LIVER |
| 47001 | NEEDLE BIOPSY LIVER ADD-ON |
| 47010 | OPEN DRAINAGE LIVER LESION |
| 47015 | INJECT/ASPIRATE LIVER CYST |
| 47100 | WEDGE BIOPSY OF LIVER |
| 47120 | PARTIAL REMOVAL OF LIVER |
| 47122 | EXTENSIVE REMOVAL OF LIVER |
| 47125 | PARTIAL REMOVAL OF LIVER |
| 47130 | PARTIAL REMOVAL OF LIVER |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 47133 | REMOVAL OF DONOR LIVER |
| 47140 | PARTIAL REMOVAL DONOR LIVER |
| 47141 | PARTIAL REMOVAL DONOR LIVER |
| 47142 | PARTIAL REMOVAL DONOR LIVER |
| 47143 | PREP DONOR LIVER WHOLE |
| 47144 | PREP DONOR LIVER 3-SEGMENT |
| 47145 | PREP DONOR LIVER LOBE SPLIT |
| 47146 | PREP DONOR LIVER/VENOUS |
| 47147 | PREP DONOR LIVER/ARTERIAL |
| 47300 | SURGERY FOR LIVER LESION |
| 47350 | REPAIR LIVER WOUND |
| 47360 | REPAIR LIVER WOUND |
| 47361 | REPAIR LIVER WOUND |
| 47362 | REPAIR LIVER WOUND |
| 47370 | LAPARO ABLATE LIVER TUMOR RF |
| 47371 | LAPARO ABLATE LIVER CRYOSURG |
| 47380 | OPEN ABLATE LIVER TUMOR RF |
| 47381 | OPEN ABLATE LIVER TUMOR CRYO |
| 47382 | PERCUT ABLATE LIVER RF |
| 47383 | PERQ ABLTJ LVR CRYOABLATION |
| 47400 | INCISION OF LIVER DUCT |
| 47420 | INCISION OF BILE DUCT |
| 47425 | INCISION OF BILE DUCT |
| 47460 | INCISE BILE DUCT SPHINCTER |
| 47480 | INCISION OF GALLBLADDER |
| 47490 | INCISION OF GALLBLADDER |
| 47531 | INJECTION FOR CHOLANGIOGRAM |
| 47532 | INJECTION FOR CHOLANGIOGRAM |
| 47533 | PLMT BILIARY DRAINAGE CATH |
| 47534 | PLMT BILIARY DRAINAGE CATH |
| 47535 | CONVERSION EXT BIL DRG CATH |
| 47536 | EXCHANGE BILIARY DRG CATH |
| 47537 | REMOVAL BILIARY DRG CATH |
| 47538 | PERQ PLMT BILE DUCT STENT |
| 47539 | PERQ PLMT BILE DUCT STENT |
| 47540 | PERQ PLMT BILE DUCT STENT |
| 47541 | PLMT ACCESS BIL TREE SM BWL |
| 47542 | DILATE BILIARY DUCT/AMPULLA |
| 47543 | ENDOLUMINAL BX BILIARY TREE |
| 47544 | REMOVAL DUCT GLBLDR CALCULI |
| 47550 | BILE DUCT ENDOSCOPY ADD-ON |
| 47552 | BILIARY ENDO PERQ DX W/SPECI |
| 47553 | BILIARY ENDOSCOPY THRU SKIN |
| 47554 | BILIARY ENDOSCOPY THRU SKIN |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 47555 | BILIARY ENDOSCOPY THRU SKIN |
| 47556 | BILIARY ENDOSCOPY THRU SKIN |
| 47562 | LAPAROSCOPIC CHOLECYSTECTOMY |
| 47563 | LAPARO CHOLECYSTECTOMY/GRAPH |
| 47564 | LAPARO CHOLECYSTECTOMY/EXPLR |
| 47570 | LAPARO CHOLECYSTOENTEROSTOMY |
| 47600 | REMOVAL OF GALLBLADDER |
| 47605 | REMOVAL OF GALLBLADDER |
| 47610 | REMOVAL OF GALLBLADDER |
| 47612 | REMOVAL OF GALLBLADDER |
| 47620 | REMOVAL OF GALLBLADDER |
| 47700 | EXPLORATION OF BILE DUCTS |
| 47701 | BILE DUCT REVISION |
| 47711 | EXCISION OF BILE DUCT TUMOR |
| 47712 | EXCISION OF BILE DUCT TUMOR |
| 47715 | EXCISION OF BILE DUCT CYST |
| 47720 | FUSE GALLBLADDER & BOWEL |
| 47721 | FUSE UPPER GI STRUCTURES |
| 47740 | FUSE GALLBLADDER & BOWEL |
| 47741 | FUSE GALLBLADDER & BOWEL |
| 47760 | FUSE BILE DUCTS AND BOWEL |
| 47765 | FUSE LIVER DUCTS & BOWEL |
| 47780 | FUSE BILE DUCTS AND BOWEL |
| 47785 | FUSE BILE DUCTS AND BOWEL |
| 47800 | RECONSTRUCTION OF BILE DUCTS |
| 47801 | PLACEMENT BILE DUCT SUPPORT |
| 47802 | FUSE LIVER DUCT & INTESTINE |
| 47900 | SUTURE BILE DUCT INJURY |
| 48000 | DRAINAGE OF ABDOMEN |
| 48001 | PLACEMENT OF DRAIN PANCREAS |
| 48020 | REMOVAL OF PANCREATIC STONE |
| 48100 | BIOPSY OF PANCREAS OPEN |
| 48102 | NEEDLE BIOPSY PANCREAS |
| 48105 | RESECT/DEBRIDE PANCREAS |
| 48120 | REMOVAL OF PANCREAS LESION |
| 48140 | PARTIAL REMOVAL OF PANCREAS |
| 48145 | PARTIAL REMOVAL OF PANCREAS |
| 48146 | PANCREATECTOMY |
| 48148 | REMOVAL OF PANCREATIC DUCT |
| 48150 | PARTIAL REMOVAL OF PANCREAS |
| 48152 | PANCREATECTOMY |
| 48153 | PANCREATECTOMY |
| 48154 | PANCREATECTOMY |
| 48155 | REMOVAL OF PANCREAS |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 48400 | INJECTION INTRAOP ADD-ON |
| 48500 | SURGERY OF PANCREATIC CYST |
| 48510 | DRAIN PANCREATIC PSEUDOCYST |
| 48520 | FUSE PANCREAS CYST AND BOWEL |
| 48540 | FUSE PANCREAS CYST AND BOWEL |
| 48545 | PANCREATORRHAPHY |
| 48547 | DUODENAL EXCLUSION |
| 48548 | FUSE PANCREAS AND BOWEL |
| 48550 | DONOR PANCREATECTOMY |
| 48551 | PREP DONOR PANCREAS |
| 48552 | PREP DONOR PANCREAS/VENOUS |
| 49000 | EXPLORATION OF ABDOMEN |
| 49002 | REOPENING OF ABDOMEN |
| 49010 | EXPLORATION BEHIND ABDOMEN |
| 49013 | PRPERTL PEL PACK HEMRRG TRMA |
| 49014 | REEXPLORATION PELVIC WOUND |
| 49020 | DRAINAGE ABDOM ABSCESS OPEN |
| 49040 | DRAIN OPEN ABDOM ABSCESS |
| 49060 | DRAIN OPEN RETROPERI ABSCESS |
| 49062 | DRAIN TO PERITONEAL CAVITY |
| 49082 | ABD PARACENTESIS |
| 49083 | ABD PARACENTESIS W/IMAGING |
| 49084 | PERITONEAL LAVAGE |
| 49180 | BIOPSY ABDOMINAL MASS |
| 49185 | SCLEROTX FLUID COLLECTION |
| 49203 | EXC ABD TUM 5 CM OR LESS |
| 49204 | EXC ABD TUM OVER 5 CM |
| 49205 | EXC ABD TUM OVER 10 CM |
| 49215 | EXCISE SACRAL SPINE TUMOR |
| 49220 | MULTIPLE SURGERY ABDOMEN |
| 49255 | REMOVAL OF OMENTUM |
| 49320 | DIAG LAPARO SEPARATE PROC |
| 49321 | LAPAROSCOPY BIOPSY |
| 49322 | LAPAROSCOPY ASPIRATION |
| 49323 | LAPARO DRAIN LYMPHOCELE |
| 49324 | LAP INSERT TUNNEL IP CATH |
| 49325 | LAP REVISION PERM IP CATH |
| 49326 | LAP W/OMENTOPEXY ADD-ON |
| 49327 | LAP INS DEVICE FOR RT |
| 49400 | AIR INJECTION INTO ABDOMEN |
| 49402 | REMOVE FOREIGN BODY ADBOMEN |
| 49405 | IMAGE CATH FLUID COLXN VISC |
| 49406 | IMAGE CATH FLUID PERI/RETRO |
| 49407 | IMAGE CATH FLUID TRNS/VGNL |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 49411 | INS MARK ABD/PEL FOR RT PERQ |
| 49412 | INS DEVICE FOR RT GUIDE OPEN |
| 49418 | INSERT TUN IP CATH PERC |
| 49419 | INSERT TUN IP CATH W/PORT |
| 49421 | INS TUN IP CATH FOR DIAL OPN |
| 49422 | REMOVE TUNNELED IP CATH |
| 49423 | EXCHANGE DRAINAGE CATHETER |
| 49424 | ASSESS CYST CONTRAST INJECT |
| 49425 | INSERT ABDOMEN-VENOUS DRAIN |
| 49426 | REVISE ABDOMEN-VENOUS SHUNT |
| 49427 | INJECTION ABDOMINAL SHUNT |
| 49428 | LIGATION OF SHUNT |
| 49429 | REMOVAL OF SHUNT |
| 49435 | INSERT SUBQ EXTEN TO IP CATH |
| 49436 | EMBEDDED IP CATH EXIT-SITE |
| 49440 | PLACE GASTROSTOMY TUBE PERC |
| 49441 | PLACE DUOD/JEJ TUBE PERC |
| 49442 | PLACE CECOSTOMY TUBE PERC |
| 49446 | CHANGE G-TUBE TO G-J PERC |
| 49450 | REPLACE G/C TUBE PERC |
| 49451 | REPLACE DUOD/JEJ TUBE PERC |
| 49452 | REPLACE G-J TUBE PERC |
| 49460 | FIX G/COLON TUBE W/DEVICE |
| 49465 | FLUORO EXAM OF G/COLON TUBE |
| 49491 | RPR HERN PREEMIE REDUC |
| 49492 | RPR ING HERN PREMIE BLOCKED |
| 49495 | RPR ING HERNIA BABY REDUC |
| 49496 | RPR ING HERNIA BABY BLOCKED |
| 49500 | RPR ING HERNIA INIT REDUCE |
| 49501 | RPR ING HERNIA INIT BLOCKED |
| 49505 | PRP I/HERN INIT REDUC >5 YR |
| 49507 | PRP I/HERN INIT BLOCK >5 YR |
| 49520 | REREPAIR ING HERNIA REDUCE |
| 49521 | REREPAIR ING HERNIA BLOCKED |
| 49525 | REPAIR ING HERNIA SLIDING |
| 49553 | RPR FEM HERNIA INIT BLOCKED |
| 49557 | REREPAIR FEM HERNIA BLOCKED |
| 49560 | RPR VENTRAL HERN INIT REDUC |
| 49561 | RPR VENTRAL HERN INIT BLOCK |
| 49565 | REREPAIR VENTRL HERN REDUCE |
| 49566 | REREPAIR VENTRL HERN BLOCK |
| 49568 | HERNIA REPAIR W/MESH |
| 49572 | RPR EPIGASTRIC HERN BLOCKED |
| 49580 | RPR UMBIL HERN REDUC < 5 YR |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 49582 | RPR UMBIL HERN BLOCK < 5 YR |
| 49587 | RPR UMBIL HERN BLOCK > 5 YR |
| 49605 | REPAIR UMBILICAL LESION |
| 49606 | REPAIR UMBILICAL LESION |
| 49610 | REPAIR UMBILICAL LESION |
| 49653 | LAP VENT/ABD HERN PROC COMP |
| 49655 | LAP INC HERN REPAIR COMP |
| 49657 | LAP INC HERN RECUR COMP |
| 49900 | REPAIR OF ABDOMINAL WALL |
| 49904 | OMENTAL FLAP EXTRA-ABDOM |
| 49905 | OMENTAL FLAP INTRA-ABDOM |
| 49906 | FREE OMENTAL FLAP MICROVASC |
| 50010 | EXPLORATION OF KIDNEY |
| 50020 | RENAL ABSCESS OPEN DRAIN |
| 50040 | DRAINAGE OF KIDNEY |
| 50045 | EXPLORATION OF KIDNEY |
| 50060 | REMOVAL OF KIDNEY STONE |
| 50065 | INCISION OF KIDNEY |
| 50070 | INCISION OF KIDNEY |
| 50075 | REMOVAL OF KIDNEY STONE |
| 50080 | REMOVAL OF KIDNEY STONE |
| 50081 | REMOVAL OF KIDNEY STONE |
| 50100 | REVISE KIDNEY BLOOD VESSELS |
| 50120 | EXPLORATION OF KIDNEY |
| 50125 | EXPLORE AND DRAIN KIDNEY |
| 50130 | REMOVAL OF KIDNEY STONE |
| 50135 | EXPLORATION OF KIDNEY |
| 50200 | RENAL BIOPSY PERQ |
| 50205 | RENAL BIOPSY OPEN |
| 50220 | REMOVE KIDNEY OPEN |
| 50225 | REMOVAL KIDNEY OPEN COMPLEX |
| 50230 | REMOVAL KIDNEY OPEN RADICAL |
| 50234 | REMOVAL OF KIDNEY & URETER |
| 50236 | REMOVAL OF KIDNEY & URETER |
| 50240 | PARTIAL REMOVAL OF KIDNEY |
| 50250 | CRYOABLATE RENAL MASS OPEN |
| 50280 | REMOVAL OF KIDNEY LESION |
| 50290 | REMOVAL OF KIDNEY LESION |
| 50323 | PREP CADAVER RENAL ALLOGRAFT |
| 50325 | PREP DONOR RENAL GRAFT |
| 50327 | PREP RENAL GRAFT/VENOUS |
| 50340 | REMOVAL OF KIDNEY |
| 50382 | CHANGE URETER STENT PERCUT |
| 50384 | REMOVE URETER STENT PERCUT |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 50385 | CHANGE STENT VIA TRANSURETH |
| 50386 | REMOVE STENT VIA TRANSURETH |
| 50387 | CHANGE NEPHROURETERAL CATH |
| 50389 | REMOVE RENAL TUBE W/FLUORO |
| 50400 | REVISION OF KIDNEY/URETER |
| 50405 | REVISION OF KIDNEY/URETER |
| 50430 | NJX PX NFROSGRM &/URTRGRM |
| 50431 | NJX PX NFROSGRM &/URTRGRM |
| 50432 | PLMT NEPHROSTOMY CATHETER |
| 50433 | PLMT NEPHROURETERAL CATHETER |
| 50434 | CONVERT NEPHROSTOMY CATHETER |
| 50435 | EXCHANGE NEPHROSTOMY CATH |
| 50436 | DILAT XST TRC NDURLGC PX |
| 50437 | DILAT XST TRC NEW ACCESS RCS |
| 50500 | REPAIR OF KIDNEY WOUND |
| 50520 | CLOSE KIDNEY-SKIN FISTULA |
| 50525 | CLOSE NEPHROVISCERAL FISTULA |
| 50526 | CLOSE NEPHROVISCERAL FISTULA |
| 50540 | REVISION OF HORSESHOE KIDNEY |
| 50541 | LAPARO ABLATE RENAL CYST |
| 50542 | LAPARO ABLATE RENAL MASS |
| 50543 | LAPARO PARTIAL NEPHRECTOMY |
| 50544 | LAPAROSCOPY PYELOPLASTY |
| 50545 | LAPARO RADICAL NEPHRECTOMY |
| 50546 | LAPAROSCOPIC NEPHRECTOMY |
| 50547 | LAPARO REMOVAL DONOR KIDNEY |
| 50548 | LAPARO REMOVE W/URETER |
| 50551 | KIDNEY ENDOSCOPY |
| 50553 | KIDNEY ENDOSCOPY |
| 50555 | KIDNEY ENDOSCOPY & BIOPSY |
| 50557 | KIDNEY ENDOSCOPY & TREATMENT |
| 50561 | KIDNEY ENDOSCOPY & TREATMENT |
| 50562 | RENAL SCOPE W/TUMOR RESECT |
| 50570 | KIDNEY ENDOSCOPY |
| 50572 | KIDNEY ENDOSCOPY |
| 50574 | KIDNEY ENDOSCOPY & BIOPSY |
| 50575 | KIDNEY ENDOSCOPY |
| 50576 | KIDNEY ENDOSCOPY & TREATMENT |
| 50580 | KIDNEY ENDOSCOPY & TREATMENT |
| 50590 | FRAGMENTING OF KIDNEY STONE |
| 50592 | PERC RF ABLATE RENAL TUMOR |
| 50593 | PERC CRYO ABLATE RENAL TUM |
| 50600 | EXPLORATION OF URETER |
| 50605 | INSERT URETERAL SUPPORT |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 50606 | ENDOLUMINAL BX URTR RNL PLVS |
| 50610 | REMOVAL OF URETER STONE |
| 50620 | REMOVAL OF URETER STONE |
| 50630 | REMOVAL OF URETER STONE |
| 50650 | REMOVAL OF URETER |
| 50660 | REMOVAL OF URETER |
| 50705 | URETERAL EMBOLIZATION/OCCL |
| 50706 | BALLOON DILATE URTRL STRIX |
| 50715 | RELEASE OF URETER |
| 50722 | RELEASE OF URETER |
| 50725 | RELEASE/REVISE URETER |
| 50727 | REVISE URETER |
| 50728 | REVISE URETER |
| 50740 | FUSION OF URETER & KIDNEY |
| 50750 | FUSION OF URETER & KIDNEY |
| 50760 | FUSION OF URETERS |
| 50770 | SPLICING OF URETERS |
| 50780 | REIMPLANT URETER IN BLADDER |
| 50782 | REIMPLANT URETER IN BLADDER |
| 50783 | REIMPLANT URETER IN BLADDER |
| 50785 | REIMPLANT URETER IN BLADDER |
| 50800 | IMPLANT URETER IN BOWEL |
| 50810 | FUSION OF URETER & BOWEL |
| 50815 | URINE SHUNT TO INTESTINE |
| 50820 | CONSTRUCT BOWEL BLADDER |
| 50825 | CONSTRUCT BOWEL BLADDER |
| 50830 | REVISE URINE FLOW |
| 50840 | REPLACE URETER BY BOWEL |
| 50845 | APPENDICO-VESICOSTOMY |
| 50860 | TRANSPLANT URETER TO SKIN |
| 50900 | REPAIR OF URETER |
| 50920 | CLOSURE URETER/SKIN FISTULA |
| 50930 | CLOSURE URETER/BOWEL FISTULA |
| 50940 | RELEASE OF URETER |
| 50945 | LAPAROSCOPY URETEROLITHOTOMY |
| 50947 | LAPARO NEW URETER/BLADDER |
| 50948 | LAPARO NEW URETER/BLADDER |
| 50951 | ENDOSCOPY OF URETER |
| 50953 | ENDOSCOPY OF URETER |
| 50955 | URETER ENDOSCOPY & BIOPSY |
| 50957 | URETER ENDOSCOPY & TREATMENT |
| 50961 | URETER ENDOSCOPY & TREATMENT |
| 50970 | URETER ENDOSCOPY |
| 50972 | URETER ENDOSCOPY & CATHETER |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 50974 | URETER ENDOSCOPY & BIOPSY |
| 50976 | URETER ENDOSCOPY & TREATMENT |
| 50980 | URETER ENDOSCOPY & TREATMENT |
| 51020 | INCISE & TREAT BLADDER |
| 51030 | INCISE & TREAT BLADDER |
| 51040 | INCISE & DRAIN BLADDER |
| 51045 | INCISE BLADDER/DRAIN URETER |
| 51050 | REMOVAL OF BLADDER STONE |
| 51060 | REMOVAL OF URETER STONE |
| 51065 | REMOVE URETER CALCULUS |
| 51080 | DRAINAGE OF BLADDER ABSCESS |
| 51102 | DRAIN BL W/CATH INSERTION |
| 51500 | REMOVAL OF BLADDER CYST |
| 51520 | REMOVAL OF BLADDER LESION |
| 51525 | REMOVAL OF BLADDER LESION |
| 51530 | REMOVAL OF BLADDER LESION |
| 51535 | REPAIR OF URETER LESION |
| 51550 | PARTIAL REMOVAL OF BLADDER |
| 51555 | PARTIAL REMOVAL OF BLADDER |
| 51565 | REVISE BLADDER & URETER(S) |
| 51570 | REMOVAL OF BLADDER |
| 51575 | REMOVAL OF BLADDER & NODES |
| 51580 | REMOVE BLADDER/REVISE TRACT |
| 51585 | REMOVAL OF BLADDER & NODES |
| 51590 | REMOVE BLADDER/REVISE TRACT |
| 51595 | REMOVE BLADDER/REVISE TRACT |
| 51596 | REMOVE BLADDER/CREATE POUCH |
| 51597 | REMOVAL OF PELVIC STRUCTURES |
| 51700 | IRRIGATION OF BLADDER |
| 51715 | ENDOSCOPIC INJECTION/IMPLANT |
| 51800 | REVISION OF BLADDER/URETHRA |
| 51820 | REVISION OF URINARY TRACT |
| 51840 | ATTACH BLADDER/URETHRA |
| 51841 | ATTACH BLADDER/URETHRA |
| 51845 | REPAIR BLADDER NECK |
| 51860 | REPAIR OF BLADDER WOUND |
| 51865 | REPAIR OF BLADDER WOUND |
| 51880 | REPAIR OF BLADDER OPENING |
| 51900 | REPAIR BLADDER/VAGINA LESION |
| 51920 | CLOSE BLADDER-UTERUS FISTULA |
| 51925 | HYSTERECTOMY/BLADDER REPAIR |
| 51940 | CORRECTION OF BLADDER DEFECT |
| 51960 | REVISION OF BLADDER & BOWEL |
| 51980 | CONSTRUCT BLADDER OPENING |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 52000 | CYSTOSCOPY |
| 52001 | CYSTOSCOPY REMOVAL OF CLOTS |
| 52005 | CYSTOSCOPY & URETER CATHETER |
| 52007 | CYSTOSCOPY AND BIOPSY |
| 52010 | CYSTOSCOPY & DUCT CATHETER |
| 52204 | CYSTOSCOPY W/BIOPSY(S) |
| 52214 | CYSTOSCOPY AND TREATMENT |
| 52224 | CYSTOSCOPY AND TREATMENT |
| 52234 | CYSTOSCOPY AND TREATMENT |
| 52235 | CYSTOSCOPY AND TREATMENT |
| 52240 | CYSTOSCOPY AND TREATMENT |
| 52250 | CYSTOSCOPY AND RADIOTRACER |
| 52260 | CYSTOSCOPY AND TREATMENT |
| 52265 | CYSTOSCOPY AND TREATMENT |
| 52270 | CYSTOSCOPY & REVISE URETHRA |
| 52275 | CYSTOSCOPY & REVISE URETHRA |
| 52276 | CYSTOSCOPY AND TREATMENT |
| 52277 | CYSTOSCOPY AND TREATMENT |
| 52281 | CYSTOSCOPY AND TREATMENT |
| 52282 | CYSTOSCOPY IMPLANT STENT |
| 52283 | CYSTOSCOPY AND TREATMENT |
| 52285 | CYSTOSCOPY AND TREATMENT |
| 52287 | CYSTOSCOPY CHEMODENERVATION |
| 52290 | CYSTOSCOPY AND TREATMENT |
| 52300 | CYSTOSCOPY AND TREATMENT |
| 52301 | CYSTOSCOPY AND TREATMENT |
| 52305 | CYSTOSCOPY AND TREATMENT |
| 52310 | CYSTOSCOPY AND TREATMENT |
| 52315 | CYSTOSCOPY AND TREATMENT |
| 52317 | REMOVE BLADDER STONE |
| 52318 | REMOVE BLADDER STONE |
| 52320 | CYSTOSCOPY AND TREATMENT |
| 52325 | CYSTOSCOPY STONE REMOVAL |
| 52327 | CYSTOSCOPY INJECT MATERIAL |
| 52330 | CYSTOSCOPY AND TREATMENT |
| 52332 | CYSTOSCOPY AND TREATMENT |
| 52334 | CREATE PASSAGE TO KIDNEY |
| 52341 | CYSTO W/URETER STRICTURE TX |
| 52342 | CYSTO W/UP STRICTURE TX |
| 52343 | CYSTO W/RENAL STRICTURE TX |
| 52344 | CYSTO/URETERO STRICTURE TX |
| 52345 | CYSTO/URETERO W/UP STRICTURE |
| 52346 | CYSTOURETERO W/RENAL STRICT |
| 52351 | CYSTOURETERO & OR PYELOSCOPE |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 52352 | CYSTOURETERO W/STONE REMOVE |
| 52353 | CYSTOURETERO W/LITHOTRIPSY |
| 52354 | CYSTOURETERO W/BIOPSY |
| 52355 | CYSTOURETERO W/EXCISE TUMOR |
| 52356 | CYSTO/URETERO W/LITHOTRIPSY |
| 52400 | CYSTOURETERO W/CONGEN REPR |
| 52402 | CYSTOURETHRO CUT EJACUL DUCT |
| 52441 | CYSTOURETHRO W/IMPLANT |
| 52442 | CYSTOURETHRO W/ADDL IMPLANT |
| 52450 | INCISION OF PROSTATE |
| 52500 | REVISION OF BLADDER NECK |
| 52601 | PROSTATECTOMY (TURP) |
| 52630 | REMOVE PROSTATE REGROWTH |
| 52640 | RELIEVE BLADDER CONTRACTURE |
| 52647 | LASER SURGERY OF PROSTATE |
| 52648 | LASER SURGERY OF PROSTATE |
| 52649 | PROSTATE LASER ENUCLEATION |
| 52700 | DRAINAGE OF PROSTATE ABSCESS |
| 53010 | INCISION OF URETHRA |
| 53040 | DRAINAGE OF URETHRA ABSCESS |
| 53080 | DRAINAGE OF URINARY LEAKAGE |
| 53085 | DRAINAGE OF URINARY LEAKAGE |
| 53210 | REMOVAL OF URETHRA |
| 53215 | REMOVAL OF URETHRA |
| 53220 | TREATMENT OF URETHRA LESION |
| 53230 | REMOVAL OF URETHRA LESION |
| 53235 | REMOVAL OF URETHRA LESION |
| 53240 | SURGERY FOR URETHRA POUCH |
| 53250 | REMOVAL OF URETHRA GLAND |
| 53260 | TREATMENT OF URETHRA LESION |
| 53265 | TREATMENT OF URETHRA LESION |
| 53270 | REMOVAL OF URETHRA GLAND |
| 53275 | REPAIR OF URETHRA DEFECT |
| 53400 | REVISE URETHRA STAGE 1 |
| 53405 | REVISE URETHRA STAGE 2 |
| 53410 | RECONSTRUCTION OF URETHRA |
| 53415 | RECONSTRUCTION OF URETHRA |
| 53420 | RECONSTRUCT URETHRA STAGE 1 |
| 53425 | RECONSTRUCT URETHRA STAGE 2 |
| 53430 | RECONSTRUCTION OF URETHRA |
| 53431 | RECONSTRUCT URETHRA/BLADDER |
| 53440 | MALE SLING PROCEDURE |
| 53442 | REMOVE/REVISE MALE SLING |
| 53444 | INSERT TANDEM CUFF |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 53445 | INSERT URO/VES NCK SPHINCTER |
| 53446 | REMOVE URO SPHINCTER |
| 53447 | REMOVE/REPLACE UR SPHINCTER |
| 53448 | REMOV/REPLC UR SPHINCTR COMP |
| 53449 | REPAIR URO SPHINCTER |
| 53450 | REVISION OF URETHRA |
| 53460 | REVISION OF URETHRA |
| 53500 | URETHRLYS TRANSVAG W/ SCOPE |
| 53502 | REPAIR OF URETHRA INJURY |
| 53505 | REPAIR OF URETHRA INJURY |
| 53510 | REPAIR OF URETHRA INJURY |
| 53515 | REPAIR OF URETHRA INJURY |
| 53520 | REPAIR OF URETHRA DEFECT |
| 53850 | PROSTATIC MICROWAVE THERMOTX |
| 53852 | PROSTATIC RF THERMOTX |
| 53855 | INSERT PROST URETHRAL STENT |
| 54000 | SLITTING OF PREPUCE |
| 54001 | SLITTING OF PREPUCE |
| 54015 | DRAIN PENIS LESION |
| 54050 | DESTRUCTION PENIS LESION(S) |
| 54055 | DESTRUCTION PENIS LESION(S) |
| 54056 | CRYOSURGERY PENIS LESION(S) |
| 54057 | LASER SURG PENIS LESION(S) |
| 54060 | EXCISION OF PENIS LESION(S) |
| 54065 | DESTRUCTION PENIS LESION(S) |
| 54100 | BIOPSY OF PENIS |
| 54105 | BIOPSY OF PENIS |
| 54110 | TREATMENT OF PENIS LESION |
| 54111 | TREAT PENIS LESION GRAFT |
| 54112 | TREAT PENIS LESION GRAFT |
| 54115 | TREATMENT OF PENIS LESION |
| 54120 | PARTIAL REMOVAL OF PENIS |
| 54130 | REMOVE PENIS & NODES |
| 54135 | REMOVE PENIS & NODES |
| 54161 | CIRCUM 28 DAYS OR OLDER |
| 54162 | LYSIS PENIL CIRCUMIC LESION |
| 54163 | REPAIR OF CIRCUMCISION |
| 54164 | FRENULOTOMY OF PENIS |
| 54200 | TREATMENT OF PENIS LESION |
| 54205 | TREATMENT OF PENIS LESION |
| 54220 | TREATMENT OF PENIS LESION |
| 54230 | PREPARE PENIS STUDY |
| 54231 | DYNAMIC CAVERNOSOMETRY |
| 54235 | PENILE INJECTION |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 54240 | PENIS STUDY |
| 54250 | PENIS STUDY |
| 54300 | REVISION OF PENIS |
| 54304 | REVISION OF PENIS |
| 54308 | RECONSTRUCTION OF URETHRA |
| 54312 | RECONSTRUCTION OF URETHRA |
| 54316 | RECONSTRUCTION OF URETHRA |
| 54318 | RECONSTRUCTION OF URETHRA |
| 54322 | RECONSTRUCTION OF URETHRA |
| 54324 | RECONSTRUCTION OF URETHRA |
| 54326 | RECONSTRUCTION OF URETHRA |
| 54328 | REVISE PENIS/URETHRA |
| 54332 | REVISE PENIS/URETHRA |
| 54336 | REVISE PENIS/URETHRA |
| 54340 | SECONDARY URETHRAL SURGERY |
| 54344 | SECONDARY URETHRAL SURGERY |
| 54348 | SECONDARY URETHRAL SURGERY |
| 54352 | RECONSTRUCT URETHRA/PENIS |
| 54380 | REPAIR PENIS |
| 54385 | REPAIR PENIS |
| 54390 | REPAIR PENIS AND BLADDER |
| 54400 | INSERT SEMI-RIGID PROSTHESIS |
| 54401 | INSERT SELF-CONTD PROSTHESIS |
| 54405 | INSERT MULTI-COMP PENIS PROS |
| 54406 | REMOVE MUTI-COMP PENIS PROS |
| 54408 | REPAIR MULTI-COMP PENIS PROS |
| 54410 | REMOVE/REPLACE PENIS PROSTH |
| 54411 | REMOV/REPLC PENIS PROS COMP |
| 54415 | REMOVE SELF-CONTD PENIS PROS |
| 54416 | REMV/REPL PENIS CONTAIN PROS |
| 54417 | REMV/REPLC PENIS PROS COMPL |
| 54420 | REVISION OF PENIS |
| 54430 | REVISION OF PENIS |
| 54435 | REVISION OF PENIS |
| 54437 | REPAIR CORPOREAL TEAR |
| 54438 | REPLANTATION OF PENIS |
| 54440 | REPAIR OF PENIS |
| 54450 | PREPUTIAL STRETCHING |
| 54500 | BIOPSY OF TESTIS |
| 54505 | BIOPSY OF TESTIS |
| 54512 | EXCISE LESION TESTIS |
| 54520 | REMOVAL OF TESTIS |
| 54522 | ORCHIECTOMY PARTIAL |
| 54530 | REMOVAL OF TESTIS |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 54535 | EXTENSIVE TESTIS SURGERY |
| 54550 | EXPLORATION FOR TESTIS |
| 54560 | EXPLORATION FOR TESTIS |
| 54600 | REDUCE TESTIS TORSION |
| 54620 | SUSPENSION OF TESTIS |
| 54640 | ORCHIOPEXY INGUN/SCROT APPR |
| 54650 | ORCHIOPEXY (FOWLER-STEPHENS) |
| 54660 | REVISION OF TESTIS |
| 54670 | REPAIR TESTIS INJURY |
| 54680 | RELOCATION OF TESTIS(ES) |
| 54690 | LAPAROSCOPY ORCHIECTOMY |
| 54692 | LAPAROSCOPY ORCHIOPEXY |
| 54700 | DRAINAGE OF SCROTUM |
| 54800 | BIOPSY OF EPIDIDYMIS |
| 54830 | REMOVE EPIDIDYMIS LESION |
| 54840 | REMOVE EPIDIDYMIS LESION |
| 54860 | REMOVAL OF EPIDIDYMIS |
| 54861 | REMOVAL OF EPIDIDYMIS |
| 54865 | EXPLORE EPIDIDYMIS |
| 54900 | FUSION OF SPERMATIC DUCTS |
| 54901 | FUSION OF SPERMATIC DUCTS |
| 55000 | DRAINAGE OF HYDROCELE |
| 55040 | REMOVAL OF HYDROCELE |
| 55041 | REMOVAL OF HYDROCELES |
| 55060 | REPAIR OF HYDROCELE |
| 55100 | DRAINAGE OF SCROTUM ABSCESS |
| 55110 | EXPLORE SCROTUM |
| 55120 | REMOVAL OF SCROTUM LESION |
| 55150 | REMOVAL OF SCROTUM |
| 55200 | INCISION OF SPERM DUCT |
| 55250 | REMOVAL OF SPERM DUCT(S) |
| 55300 | PREPARE SPERM DUCT X-RAY |
| 55400 | REPAIR OF SPERM DUCT |
| 55500 | REMOVAL OF HYDROCELE |
| 55520 | REMOVAL OF SPERM CORD LESION |
| 55530 | REVISE SPERMATIC CORD VEINS |
| 55535 | REVISE SPERMATIC CORD VEINS |
| 55540 | REVISE HERNIA & SPERM VEINS |
| 55550 | LAPARO LIGATE SPERMATIC VEIN |
| 55600 | INCISE SPERM DUCT POUCH |
| 55605 | INCISE SPERM DUCT POUCH |
| 55650 | REMOVE SPERM DUCT POUCH |
| 55680 | REMOVE SPERM POUCH LESION |
| 55700 | BIOPSY OF PROSTATE |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 55705 | BIOPSY OF PROSTATE |
| 55720 | DRAINAGE OF PROSTATE ABSCESS |
| 55725 | DRAINAGE OF PROSTATE ABSCESS |
| 55801 | REMOVAL OF PROSTATE |
| 55810 | EXTENSIVE PROSTATE SURGERY |
| 55812 | EXTENSIVE PROSTATE SURGERY |
| 55815 | EXTENSIVE PROSTATE SURGERY |
| 55821 | REMOVAL OF PROSTATE |
| 55831 | REMOVAL OF PROSTATE |
| 55840 | EXTENSIVE PROSTATE SURGERY |
| 55842 | EXTENSIVE PROSTATE SURGERY |
| 55845 | EXTENSIVE PROSTATE SURGERY |
| 55860 | SURGICAL EXPOSURE PROSTATE |
| 55862 | EXTENSIVE PROSTATE SURGERY |
| 55865 | EXTENSIVE PROSTATE SURGERY |
| 55866 | LAPARO RADICAL PROSTATECTOMY |
| 55873 | CRYOABLATE PROSTATE |
| 55874 | TPRNL PLMT BIODEGRDABL MATRL |
| 55875 | TRANSPERI NEEDLE PLACE PROS |
| 55876 | PLACE RT DEVICE/MARKER PROS |
| 56515 | DESTROY VULVA LESION/S COMPL |
| 56630 | EXTENSIVE VULVA SURGERY |
| 56631 | EXTENSIVE VULVA SURGERY |
| 56632 | EXTENSIVE VULVA SURGERY |
| 56633 | EXTENSIVE VULVA SURGERY |
| 56634 | EXTENSIVE VULVA SURGERY |
| 56637 | EXTENSIVE VULVA SURGERY |
| 56640 | EXTENSIVE VULVA SURGERY |
| 57010 | DRAINAGE OF PELVIC ABSCESS |
| 57023 | I & D VAG HEMATOMA NON-OB |
| 57107 | REMOVE VAGINA TISSUE PART |
| 57109 | VAGINECTOMY PARTIAL W/NODES |
| 57111 | REMOVE VAGINA TISSUE COMPL |
| 57112 | VAGINECTOMY W/NODES COMPL |
| 57120 | CLOSURE OF VAGINA |
| 57155 | INSERT UTERI TANDEM/OVOIDS |
| 57156 | INS VAG BRACHYTX DEVICE |
| 57200 | REPAIR OF VAGINA |
| 57210 | REPAIR VAGINA/PERINEUM |
| 57220 | REVISION OF URETHRA |
| 57230 | REPAIR OF URETHRAL LESION |
| 57240 | ANTERIOR COLPORRHAPHY |
| 57250 | REPAIR RECTUM & VAGINA |
| 57260 | CMBN ANT PST COLPRHY |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 57265 | CMBN AP COLPRHY W/NTRCL RPR |
| 57267 | INSERT MESH/PELVIC FLR ADDON |
| 57268 | REPAIR OF BOWEL BULGE |
| 57270 | REPAIR OF BOWEL POUCH |
| 57280 | SUSPENSION OF VAGINA |
| 57282 | COLPOPEXY EXTRAPERITONEAL |
| 57283 | COLPOPEXY INTRAPERITONEAL |
| 57284 | REPAIR PARAVAG DEFECT OPEN |
| 57285 | REPAIR PARAVAG DEFECT VAG |
| 57289 | REPAIR BLADDER & VAGINA |
| 57300 | REPAIR RECTUM-VAGINA FISTULA |
| 57305 | REPAIR RECTUM-VAGINA FISTULA |
| 57307 | FISTULA REPAIR & COLOSTOMY |
| 57308 | FISTULA REPAIR TRANSPERINE |
| 57310 | REPAIR URETHROVAGINAL LESION |
| 57311 | REPAIR URETHROVAGINAL LESION |
| 57320 | REPAIR BLADDER-VAGINA LESION |
| 57330 | REPAIR BLADDER-VAGINA LESION |
| 57423 | REPAIR PARAVAG DEFECT LAP |
| 57425 | LAPAROSCOPY SURG COLPOPEXY |
| 57460 | BX OF CERVIX W/SCOPE LEEP |
| 57461 | CONZ OF CERVIX W/SCOPE LEEP |
| 57520 | CONIZATION OF CERVIX |
| 57530 | REMOVAL OF CERVIX |
| 57531 | REMOVAL OF CERVIX RADICAL |
| 57540 | REMOVAL OF RESIDUAL CERVIX |
| 57545 | REMOVE CERVIX/REPAIR PELVIS |
| 57550 | REMOVAL OF RESIDUAL CERVIX |
| 57555 | REMOVE CERVIX/REPAIR VAGINA |
| 57556 | REMOVE CERVIX REPAIR BOWEL |
| 57720 | REVISION OF CERVIX |
| 58120 | DILATION AND CURETTAGE |
| 58140 | MYOMECTOMY ABDOM METHOD |
| 58145 | MYOMECTOMY VAG METHOD |
| 58146 | MYOMECTOMY ABDOM COMPLEX |
| 58340 | CATHETER FOR HYSTEROGRAPHY |
| 58345 | REOPEN FALLOPIAN TUBE |
| 58346 | INSERT HEYMAN UTERI CAPSULE |
| 58350 | REOPEN FALLOPIAN TUBE |
| 58353 | ENDOMETR ABLATE THERMAL |
| 58356 | ENDOMETRIAL CRYOABLATION |
| 58400 | SUSPENSION OF UTERUS |
| 58410 | SUSPENSION OF UTERUS |
| 58520 | REPAIR OF RUPTURED UTERUS |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 58540 | REVISION OF UTERUS |
| 58555 | HYSTEROSCOPY DX SEP PROC |
| 58558 | HYSTEROSCOPY BIOPSY |
| 58559 | HYSTEROSCOPY LYSIS |
| 58560 | HYSTEROSCOPY RESECT SEPTUM |
| 58561 | HYSTEROSCOPY REMOVE MYOMA |
| 58562 | HYSTEROSCOPY REMOVE FB |
| 58563 | HYSTEROSCOPY ABLATION |
| 58565 | HYSTEROSCOPY STERILIZATION |
| 58600 | DIVISION OF FALLOPIAN TUBE |
| 58605 | DIVISION OF FALLOPIAN TUBE |
| 58611 | LIGATE OVIDUCT(S) ADD-ON |
| 58615 | OCCLUDE FALLOPIAN TUBE(S) |
| 58660 | LAPAROSCOPY LYSIS |
| 58661 | LAPAROSCOPY REMOVE ADNEXA |
| 58662 | LAPAROSCOPY EXCISE LESIONS |
| 58670 | LAPAROSCOPY TUBAL CAUTERY |
| 58671 | LAPAROSCOPY TUBAL BLOCK |
| 58672 | LAPAROSCOPY FIMBRIOPLASTY |
| 58673 | LAPAROSCOPY SALPINGOSTOMY |
| 58674 | LAPS ABLTJ UTERINE FIBROIDS |
| 58700 | REMOVAL OF FALLOPIAN TUBE |
| 58720 | REMOVAL OF OVARY/TUBE(S) |
| 58740 | ADHESIOLYSIS TUBE OVARY |
| 58760 | FIMBRIOPLASTY |
| 58770 | CREATE NEW TUBAL OPENING |
| 58800 | DRAINAGE OF OVARIAN CYST(S) |
| 58805 | DRAINAGE OF OVARIAN CYST(S) |
| 58820 | DRAIN OVARY ABSCESS OPEN |
| 58822 | DRAIN OVARY ABSCESS PERCUT |
| 58825 | TRANSPOSITION OVARY(S) |
| 58900 | BIOPSY OF OVARY(S) |
| 58920 | PARTIAL REMOVAL OF OVARY(S) |
| 58925 | REMOVAL OF OVARIAN CYST(S) |
| 58940 | REMOVAL OF OVARY(S) |
| 58943 | REMOVAL OF OVARY(S) |
| 58950 | RESECT OVARIAN MALIGNANCY |
| 58952 | RESECT OVARIAN MALIGNANCY |
| 58957 | RESECT RECURRENT GYN MAL |
| 58958 | RESECT RECUR GYN MAL W/LYM |
| 58960 | EXPLORATION OF ABDOMEN |
| 59000 | AMNIOCENTESIS DIAGNOSTIC |
| 59001 | AMNIOCENTESIS THERAPEUTIC |
| 59012 | FETAL CORD PUNCTURE PRENATAL |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 59015 | CHORION BIOPSY |
| 59020 | FETAL CONTRACT STRESS TEST |
| 59025 | FETAL NON-STRESS TEST |
| 59030 | FETAL SCALP BLOOD SAMPLE |
| 59050 | FETAL MONITOR W/REPORT |
| 59051 | FETAL MONITOR/INTERPRET ONLY |
| 59070 | TRANSABDOM AMNIOINFUS W/US |
| 59072 | UMBILICAL CORD OCCLUD W/US |
| 59074 | FETAL FLUID DRAINAGE W/US |
| 59076 | FETAL SHUNT PLACEMENT W/US |
| 59100 | REMOVE UTERUS LESION |
| 59120 | TREAT ECTOPIC PREGNANCY |
| 59121 | TREAT ECTOPIC PREGNANCY |
| 59130 | TREAT ECTOPIC PREGNANCY |
| 59135 | TREAT ECTOPIC PREGNANCY |
| 59136 | TREAT ECTOPIC PREGNANCY |
| 59140 | TREAT ECTOPIC PREGNANCY |
| 59150 | TREAT ECTOPIC PREGNANCY |
| 59151 | TREAT ECTOPIC PREGNANCY |
| 59160 | D & C AFTER DELIVERY |
| 59200 | INSERT CERVICAL DILATOR |
| 59300 | EPISIOTOMY OR VAGINAL REPAIR |
| 59320 | REVISION OF CERVIX |
| 59325 | REVISION OF CERVIX |
| 59350 | REPAIR OF UTERUS |
| 59400 | OBSTETRICAL CARE |
| 59409 | OBSTETRICAL CARE |
| 59410 | OBSTETRICAL CARE |
| 59412 | ANTEPARTUM MANIPULATION |
| 59414 | DELIVER PLACENTA |
| 59425 | ANTEPARTUM CARE ONLY |
| 59426 | ANTEPARTUM CARE ONLY |
| 59430 | CARE AFTER DELIVERY |
| 59510 | CESAREAN DELIVERY |
| 59514 | CESAREAN DELIVERY ONLY |
| 59515 | CESAREAN DELIVERY |
| 59525 | REMOVE UTERUS AFTER CESAREAN |
| 59610 | VBAC DELIVERY |
| 59612 | VBAC DELIVERY ONLY |
| 59614 | VBAC CARE AFTER DELIVERY |
| 59618 | ATTEMPTED VBAC DELIVERY |
| 59620 | ATTEMPTED VBAC DELIVERY ONLY |
| 59622 | ATTEMPTED VBAC AFTER CARE |
| 59812 | TREATMENT OF MISCARRIAGE |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 59820 | CARE OF MISCARRIAGE |
| 59821 | TREATMENT OF MISCARRIAGE |
| 59830 | TREAT UTERUS INFECTION |
| 59840 | ABORTION |
| 59841 | ABORTION |
| 59850 | ABORTION |
| 59851 | ABORTION |
| 59852 | ABORTION |
| 59855 | ABORTION |
| 59856 | ABORTION |
| 59857 | ABORTION |
| 59870 | EVACUATE MOLE OF UTERUS |
| 59871 | REMOVE CERCLAGE SUTURE |
| 60000 | DRAIN THYROID/TONGUE CYST |
| 60100 | BIOPSY OF THYROID |
| 60200 | REMOVE THYROID LESION |
| 60210 | PARTIAL THYROID EXCISION |
| 60212 | PARTIAL THYROID EXCISION |
| 60220 | PARTIAL REMOVAL OF THYROID |
| 60225 | PARTIAL REMOVAL OF THYROID |
| 60240 | REMOVAL OF THYROID |
| 60252 | REMOVAL OF THYROID |
| 60254 | EXTENSIVE THYROID SURGERY |
| 60260 | REPEAT THYROID SURGERY |
| 60270 | REMOVAL OF THYROID |
| 60271 | REMOVAL OF THYROID |
| 60280 | REMOVE THYROID DUCT LESION |
| 60281 | REMOVE THYROID DUCT LESION |
| 60300 | ASPIR/INJ THYROID CYST |
| 60500 | EXPLORE PARATHYROID GLANDS |
| 60502 | RE-EXPLORE PARATHYROIDS |
| 60505 | EXPLORE PARATHYROID GLANDS |
| 60512 | AUTOTRANSPLANT PARATHYROID |
| 60520 | REMOVAL OF THYMUS GLAND |
| 60521 | REMOVAL OF THYMUS GLAND |
| 60522 | REMOVAL OF THYMUS GLAND |
| 60540 | EXPLORE ADRENAL GLAND |
| 60545 | EXPLORE ADRENAL GLAND |
| 60600 | REMOVE CAROTID BODY LESION |
| 60605 | REMOVE CAROTID BODY LESION |
| 60650 | LAPAROSCOPY ADRENALECTOMY |
| 61000 | REMOVE CRANIAL CAVITY FLUID |
| 61001 | REMOVE CRANIAL CAVITY FLUID |
| 61020 | REMOVE BRAIN CAVITY FLUID |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 61026 | INJECTION INTO BRAIN CANAL |
| 61050 | REMOVE BRAIN CANAL FLUID |
| 61055 | INJECTION INTO BRAIN CANAL |
| 61070 | BRAIN CANAL SHUNT PROCEDURE |
| 61105 | TWIST DRILL HOLE |
| 61107 | DRILL SKULL FOR IMPLANTATION |
| 61108 | DRILL SKULL FOR DRAINAGE |
| 61120 | BURR HOLE FOR PUNCTURE |
| 61140 | PIERCE SKULL FOR BIOPSY |
| 61150 | PIERCE SKULL FOR DRAINAGE |
| 61151 | PIERCE SKULL FOR DRAINAGE |
| 61154 | PIERCE SKULL & REMOVE CLOT |
| 61156 | PIERCE SKULL FOR DRAINAGE |
| 61210 | PIERCE SKULL IMPLANT DEVICE |
| 61215 | INSERT BRAIN-FLUID DEVICE |
| 61250 | PIERCE SKULL & EXPLORE |
| 61253 | PIERCE SKULL & EXPLORE |
| 61304 | OPEN SKULL FOR EXPLORATION |
| 61305 | OPEN SKULL FOR EXPLORATION |
| 61312 | OPEN SKULL FOR DRAINAGE |
| 61313 | OPEN SKULL FOR DRAINAGE |
| 61314 | OPEN SKULL FOR DRAINAGE |
| 61315 | OPEN SKULL FOR DRAINAGE |
| 61316 | IMPLT CRAN BONE FLAP TO ABDO |
| 61320 | OPEN SKULL FOR DRAINAGE |
| 61321 | OPEN SKULL FOR DRAINAGE |
| 61322 | DECOMPRESSIVE CRANIOTOMY |
| 61323 | DECOMPRESSIVE LOBECTOMY |
| 61330 | DECOMPRESS EYE SOCKET |
| 61333 | EXPLORE ORBIT/REMOVE LESION |
| 61340 | SUBTEMPORAL DECOMPRESSION |
| 61343 | INCISE SKULL (PRESS RELIEF) |
| 61345 | RELIEVE CRANIAL PRESSURE |
| 61450 | INCISE SKULL FOR SURGERY |
| 61458 | INCISE SKULL FOR BRAIN WOUND |
| 61460 | INCISE SKULL FOR SURGERY |
| 61500 | REMOVAL OF SKULL LESION |
| 61501 | REMOVE INFECTED SKULL BONE |
| 61510 | REMOVAL OF BRAIN LESION |
| 61512 | REMOVE BRAIN LINING LESION |
| 61514 | REMOVAL OF BRAIN ABSCESS |
| 61516 | REMOVAL OF BRAIN LESION |
| 61518 | REMOVAL OF BRAIN LESION |
| 61519 | REMOVE BRAIN LINING LESION |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 61520 | REMOVAL OF BRAIN LESION |
| 61521 | REMOVAL OF BRAIN LESION |
| 61522 | REMOVAL OF BRAIN ABSCESS |
| 61524 | REMOVAL OF BRAIN LESION |
| 61526 | REMOVAL OF BRAIN LESION |
| 61530 | REMOVAL OF BRAIN LESION |
| 61541 | INCISION OF BRAIN TISSUE |
| 61543 | REMOVAL OF BRAIN TISSUE |
| 61544 | REMOVE & TREAT BRAIN LESION |
| 61545 | EXCISION OF BRAIN TUMOR |
| 61546 | REMOVAL OF PITUITARY GLAND |
| 61548 | REMOVAL OF PITUITARY GLAND |
| 61563 | EXCISION OF SKULL TUMOR |
| 61564 | EXCISION OF SKULL TUMOR |
| 61566 | REMOVAL OF BRAIN TISSUE |
| 61567 | INCISION OF BRAIN TISSUE |
| 61570 | REMOVE FOREIGN BODY BRAIN |
| 61571 | INCISE SKULL FOR BRAIN WOUND |
| 61575 | SKULL BASE/BRAINSTEM SURGERY |
| 61576 | SKULL BASE/BRAINSTEM SURGERY |
| 61580 | CRANIOFACIAL APPROACH SKULL |
| 61581 | CRANIOFACIAL APPROACH SKULL |
| 61582 | CRANIOFACIAL APPROACH SKULL |
| 61583 | CRANIOFACIAL APPROACH SKULL |
| 61584 | ORBITOCRANIAL APPROACH/SKULL |
| 61585 | ORBITOCRANIAL APPROACH/SKULL |
| 61586 | RESECT NASOPHARYNX SKULL |
| 61590 | INFRATEMPORAL APPROACH/SKULL |
| 61591 | INFRATEMPORAL APPROACH/SKULL |
| 61592 | ORBITOCRANIAL APPROACH/SKULL |
| 61595 | TRANSTEMPORAL APPROACH/SKULL |
| 61596 | TRANSCOCHLEAR APPROACH/SKULL |
| 61597 | TRANSCONDYLAR APPROACH/SKULL |
| 61598 | TRANSPETROSAL APPROACH/SKULL |
| 61600 | RESECT/EXCISE CRANIAL LESION |
| 61601 | RESECT/EXCISE CRANIAL LESION |
| 61605 | RESECT/EXCISE CRANIAL LESION |
| 61606 | RESECT/EXCISE CRANIAL LESION |
| 61607 | RESECT/EXCISE CRANIAL LESION |
| 61608 | RESECT/EXCISE CRANIAL LESION |
| 61611 | TRANSECT ARTERY SINUS |
| 61613 | REMOVE ANEURYSM SINUS |
| 61615 | RESECT/EXCISE LESION SKULL |
| 61616 | RESECT/EXCISE LESION SKULL |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 61618 | REPAIR DURA |
| 61619 | REPAIR DURA |
| 61623 | ENDOVASC TEMPORY VESSEL OCCL |
| 61624 | TRANSCATH OCCLUSION CNS |
| 61626 | TRANSCATH OCCLUSION NON-CNS |
| 61630 | INTRACRANIAL ANGIOPLASTY |
| 61635 | INTRACRAN ANGIOPLSTY W/STENT |
| 61640 | DILATE IC VASOSPASM INIT |
| 61641 | DILAT IC VSPSM EA VSL SM TER |
| 61642 | DILAT IC VSPSM EA DIFF TER |
| 61645 | PERQ ART M-THROMBECT &/NFS |
| 61650 | EVASC PRLNG ADMN RX AGNT 1ST |
| 61651 | EVASC PRLNG ADMN RX AGNT ADD |
| 61680 | INTRACRANIAL VESSEL SURGERY |
| 61682 | INTRACRANIAL VESSEL SURGERY |
| 61684 | INTRACRANIAL VESSEL SURGERY |
| 61686 | INTRACRANIAL VESSEL SURGERY |
| 61690 | INTRACRANIAL VESSEL SURGERY |
| 61692 | INTRACRANIAL VESSEL SURGERY |
| 61697 | BRAIN ANEURYSM REPR COMPLX |
| 61698 | BRAIN ANEURYSM REPR COMPLX |
| 61700 | BRAIN ANEURYSM REPR SIMPLE |
| 61702 | INNER SKULL VESSEL SURGERY |
| 61703 | CLAMP NECK ARTERY |
| 61705 | REVISE CIRCULATION TO HEAD |
| 61708 | REVISE CIRCULATION TO HEAD |
| 61710 | REVISE CIRCULATION TO HEAD |
| 61711 | FUSION OF SKULL ARTERIES |
| 61720 | INCISE SKULL/BRAIN SURGERY |
| 61735 | INCISE SKULL/BRAIN SURGERY |
| 61750 | INCISE SKULL/BRAIN BIOPSY |
| 61751 | BRAIN BIOPSY W/CT/MR GUIDE |
| 61770 | INCISE SKULL FOR TREATMENT |
| 61781 | SCAN PROC CRANIAL INTRA |
| 61782 | SCAN PROC CRANIAL EXTRA |
| 61783 | SCAN PROC SPINAL |
| 61790 | TREAT TRIGEMINAL NERVE |
| 61791 | TREAT TRIGEMINAL TRACT |
| 61880 | REVISE/REMOVE NEUROELECTRODE |
| 61888 | REVISE/REMOVE NEURORECEIVER |
| 62000 | TREAT SKULL FRACTURE |
| 62005 | TREAT SKULL FRACTURE |
| 62010 | TREATMENT OF HEAD INJURY |
| 62100 | REPAIR BRAIN FLUID LEAKAGE |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 62117 | REDUCTION OF SKULL DEFECT |
| 62120 | REPAIR SKULL CAVITY LESION |
| 62121 | INCISE SKULL REPAIR |
| 62140 | REPAIR OF SKULL DEFECT |
| 62141 | REPAIR OF SKULL DEFECT |
| 62142 | REMOVE SKULL PLATE/FLAP |
| 62143 | REPLACE SKULL PLATE/FLAP |
| 62145 | REPAIR OF SKULL & BRAIN |
| 62146 | REPAIR OF SKULL WITH GRAFT |
| 62147 | REPAIR OF SKULL WITH GRAFT |
| 62148 | RETR BONE FLAP TO FIX SKULL |
| 62160 | NEUROENDOSCOPY ADD-ON |
| 62161 | DISSECT BRAIN W/SCOPE |
| 62162 | REMOVE COLLOID CYST W/SCOPE |
| 62163 | ZNEUROENDOSCOPY W/FB REMOVAL |
| 62164 | REMOVE BRAIN TUMOR W/SCOPE |
| 62165 | REMOVE PITUIT TUMOR W/SCOPE |
| 62180 | ESTABLISH BRAIN CAVITY SHUNT |
| 62190 | ESTABLISH BRAIN CAVITY SHUNT |
| 62192 | ESTABLISH BRAIN CAVITY SHUNT |
| 62194 | REPLACE/IRRIGATE CATHETER |
| 62200 | ESTABLISH BRAIN CAVITY SHUNT |
| 62201 | BRAIN CAVITY SHUNT W/SCOPE |
| 62220 | ESTABLISH BRAIN CAVITY SHUNT |
| 62223 | ESTABLISH BRAIN CAVITY SHUNT |
| 62225 | REPLACE/IRRIGATE CATHETER |
| 62230 | REPLACE/REVISE BRAIN SHUNT |
| 62252 | CSF SHUNT REPROGRAM |
| 62256 | REMOVE BRAIN CAVITY SHUNT |
| 62258 | REPLACE BRAIN CAVITY SHUNT |
| 62268 | DRAIN SPINAL CORD CYST |
| 62269 | NEEDLE BIOPSY SPINAL CORD |
| 62270 | DX LMBR SPI PNXR |
| 62272 | THER SPI PNXR DRG CSF |
| 62273 | INJECT EPIDURAL PATCH |
| 62280 | TREAT SPINAL CORD LESION |
| 62281 | TREAT SPINAL CORD LESION |
| 62282 | TREAT SPINAL CANAL LESION |
| 62290 | NJX PX DISCOGRAPHY LUMBAR |
| 62291 | NJX PX DISCOGRAPHY CRV/THRC |
| 62324 | NJX INTERLAMINAR CRV/THRC |
| 62325 | NJX INTERLAMINAR CRV/THRC |
| 62326 | NJX INTERLAMINAR LMBR/SAC |
| 62327 | NJX INTERLAMINAR LMBR/SAC |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 62328 | DX LMBR SPI PNXR W/FLUOR/CT |
| 62329 | THER SPI PNXR CSF FLUOR/CT |
| 62355 | REMOVE SPINAL CANAL CATHETER |
| 62365 | REMOVE SPINE INFUSION DEVICE |
| 62367 | ANALYZE SPINE INFUS PUMP |
| 62368 | ANALYZE SP INF PUMP W/REPROG |
| 62369 | ANAL SP INF PMP W/REPRG&FILL |
| 62370 | ANL SP INF PMP W/MDREPRG&FIL |
| 62380 | NDSC DCMPRN 1 NTRSPC LUMBAR |
| 63003 | REMOVE SPINE LAMINA 1/2 THRC |
| 63011 | REMOVE SPINE LAMINA 1/2 SCRL |
| 63276 | BX/EXC XDRL SPINE LESN THRC |
| 63278 | BX/EXC XDRL SPINE LESN SCRL |
| 63281 | BX/EXC IDRL SPINE LESN THRC |
| 63283 | BX/EXC IDRL SPINE LESN SCRL |
| 63286 | BX/EXC IDRL IMED LESN THRC |
| 63295 | REPAIR LAMINECTOMY DEFECT |
| 63300 | REMOVE VERT XDRL BODY CRVCL |
| 63301 | REMOVE VERT XDRL BODY THRC |
| 63302 | REMOVE VERT XDRL BODY THRLMB |
| 63303 | REMOV VERT XDRL BDY LMBR/SAC |
| 63304 | REMOVE VERT IDRL BODY CRVCL |
| 63305 | REMOVE VERT IDRL BODY THRC |
| 63306 | REMOV VERT IDRL BDY THRCLMBR |
| 63307 | REMOV VERT IDRL BDY LMBR/SAC |
| 63308 | REMOVE VERTEBRAL BODY ADD-ON |
| 63600 | REMOVE SPINAL CORD LESION |
| 63610 | STIMULATION OF SPINAL CORD |
| 63700 | REPAIR OF SPINAL HERNIATION |
| 63702 | REPAIR OF SPINAL HERNIATION |
| 63704 | REPAIR OF SPINAL HERNIATION |
| 63706 | REPAIR OF SPINAL HERNIATION |
| 63707 | REPAIR SPINAL FLUID LEAKAGE |
| 63709 | REPAIR SPINAL FLUID LEAKAGE |
| 63710 | GRAFT REPAIR OF SPINE DEFECT |
| 63740 | INSTALL SPINAL SHUNT |
| 63741 | INSTALL SPINAL SHUNT |
| 63744 | REVISION OF SPINAL SHUNT |
| 63746 | REMOVAL OF SPINAL SHUNT |
| 64408 | NJX AA&/STRD VAGUS NRV |
| 64415 | NJX AA&/STRD BRACH PLEXUS |
| 64416 | NJX AA&/STRD BRACH PLEX NFS |
| 64417 | NJX AA&/STRD AXILLARY NRV |
| 64430 | NJX AA&/STRD PUDENDAL NERVE |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 64435 | NJX AA&/STRD PARACRV NRV |
| 64445 | NJX AA&/STRD SCIATIC NERVE |
| 64446 | NJX AA&/STRD SCIATIC NRV NFS |
| 64447 | NJX AA&/STRD FEMORAL NERVE |
| 64448 | NJX AA&/STRD FEM NERVE NFS |
| 64449 | NJX AA&/STRD LMBR PLEX NFS |
| 64451 | NJX AA&/STRD NRV NRVTG SI JT |
| 64454 | NJX AA&/STRD GNCLR NRV BRNCH |
| 64455 | N BLOCK INJ PLANTAR DIGIT |
| 64486 | TAP BLOCK UNIL BY INJECTION |
| 64487 | TAP BLOCK UNI BY INFUSION |
| 64488 | TAP BLOCK BI INJECTION |
| 64489 | TAP BLOCK BI BY INFUSION |
| 64490 | INJ PARAVERT F JNT C/T 1 LEV |
| 64491 | INJ PARAVERT F JNT C/T 2 LEV |
| 64492 | INJ PARAVERT F JNT C/T 3 LEV |
| 64493 | INJ PARAVERT F JNT L/S 1 LEV |
| 64494 | INJ PARAVERT F JNT L/S 2 LEV |
| 64495 | INJ PARAVERT F JNT L/S 3 LEV |
| 64566 | NEUROELTRD STIM POST TIBIAL |
| 64570 | REMOVE VAGUS N ELTRD |
| 64575 | IMPLANT NEUROELECTRODES |
| 64580 | IMPLANT NEUROELECTRODES |
| 64611 | CHEMODENERV SALIV GLANDS |
| 64612 | DESTROY NERVE FACE MUSCLE |
| 64624 | DSTRJ NULYT AGT GNCLR NRV |
| 64625 | RF ABLTJ NRV NRVTG SI JT |
| 64632 | N BLOCK INJ COMMON DIGIT |
| 64650 | CHEMODENERV ECCRINE GLANDS |
| 64653 | CHEMODENERV ECCRINE GLANDS |
| 64702 | REVISE FINGER/TOE NERVE |
| 64704 | REVISE HAND/FOOT NERVE |
| 64708 | REVISE ARM/LEG NERVE |
| 64712 | REVISION OF SCIATIC NERVE |
| 64713 | REVISION OF ARM NERVE(S) |
| 64714 | REVISE LOW BACK NERVE(S) |
| 64716 | REVISION OF CRANIAL NERVE |
| 64718 | REVISE ULNAR NERVE AT ELBOW |
| 64719 | REVISE ULNAR NERVE AT WRIST |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 64721 | CARPAL TUNNEL SURGERY |
| 64722 | RELIEVE PRESSURE ON NERVE(S) |
| 64726 | RELEASE FOOT/TOE NERVE |
| 64727 | INTERNAL NERVE REVISION |
| 64732 | INCISION OF BROW NERVE |
| 64734 | INCISION OF CHEEK NERVE |
| 64736 | INCISION OF CHIN NERVE |
| 64738 | INCISION OF JAW NERVE |
| 64740 | INCISION OF TONGUE NERVE |
| 64742 | INCISION OF FACIAL NERVE |
| 64744 | INCISE NERVE BACK OF HEAD |
| 64746 | INCISE DIAPHRAGM NERVE |
| 64755 | INCISION OF STOMACH NERVES |
| 64760 | INCISION OF VAGUS NERVE |
| 64763 | INCISE HIP/THIGH NERVE |
| 64766 | INCISE HIP/THIGH NERVE |
| 64771 | SEVER CRANIAL NERVE |
| 64772 | INCISION OF SPINAL NERVE |
| 64774 | REMOVE SKIN NERVE LESION |
| 64776 | REMOVE DIGIT NERVE LESION |
| 64778 | DIGIT NERVE SURGERY ADD-ON |
| 64782 | REMOVE LIMB NERVE LESION |
| 64783 | LIMB NERVE SURGERY ADD-ON |
| 64784 | REMOVE NERVE LESION |
| 64786 | REMOVE SCIATIC NERVE LESION |
| 64787 | IMPLANT NERVE END |
| 64788 | REMOVE SKIN NERVE LESION |
| 64790 | REMOVAL OF NERVE LESION |
| 64792 | REMOVAL OF NERVE LESION |
| 64795 | BIOPSY OF NERVE |
| 64831 | REPAIR OF DIGIT NERVE |
| 64832 | REPAIR NERVE ADD-ON |
| 64834 | REPAIR OF HAND OR FOOT NERVE |
| 64835 | REPAIR OF HAND OR FOOT NERVE |
| 64836 | REPAIR OF HAND OR FOOT NERVE |
| 64837 | REPAIR NERVE ADD-ON |
| 64840 | REPAIR OF LEG NERVE |
| 64856 | REPAIR/TRANSPOSE NERVE |
| 64857 | REPAIR ARM/LEG NERVE |
| 64858 | REPAIR SCIATIC NERVE |
| 64859 | NERVE SURGERY |
| 64861 | REPAIR OF ARM NERVES |
| 64862 | REPAIR OF LOW BACK NERVES |
| 64864 | REPAIR OF FACIAL NERVE |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 64865 | REPAIR OF FACIAL NERVE |
| 64866 | FUSION OF FACIAL/OTHER NERVE |
| 64868 | FUSION OF FACIAL/OTHER NERVE |
| 64872 | SUBSEQUENT REPAIR OF NERVE |
| 64874 | REPAIR & REVISE NERVE ADD-ON |
| 64876 | REPAIR NERVE/SHORTEN BONE |
| 64885 | NERVE GRAFT HEAD/NECK </4 CM |
| 64886 | NERVE GRAFT HEAD/NECK >4 CM |
| 64890 | NERVE GRAFT HAND/FOOT </4 CM |
| 64891 | NERVE GRAFT HAND/FOOT >4 CM |
| 64892 | NERVE GRAFT ARM/LEG <4 CM |
| 64893 | NERVE GRAFT ARM/LEG >4 CM |
| 64895 | NERVE GRAFT HAND/FOOT </4 CM |
| 64896 | NERVE GRAFT HAND/FOOT >4 CM |
| 64897 | NERVE GRAFT ARM/LEG </4 CM |
| 64898 | NERVE GRAFT ARM/LEG >4 CM |
| 64901 | NERVE GRAFT ADD-ON |
| 64902 | NERVE GRAFT ADD-ON |
| 64905 | NERVE PEDICLE TRANSFER |
| 64907 | NERVE PEDICLE TRANSFER |
| 64910 | NERVE REPAIR W/ALLOGRAFT |
| 64911 | NEURORRAPHY W/VEIN AUTOGRAFT |
| 65091 | REVISE EYE |
| 65093 | REVISE EYE WITH IMPLANT |
| 65101 | REMOVAL OF EYE |
| 65103 | REMOVE EYE/INSERT IMPLANT |
| 65105 | REMOVE EYE/ATTACH IMPLANT |
| 65110 | REMOVAL OF EYE |
| 65112 | REMOVE EYE/REVISE SOCKET |
| 65114 | REMOVE EYE/REVISE SOCKET |
| 65125 | REVISE OCULAR IMPLANT |
| 65130 | INSERT OCULAR IMPLANT |
| 65135 | INSERT OCULAR IMPLANT |
| 65140 | ATTACH OCULAR IMPLANT |
| 65150 | REVISE OCULAR IMPLANT |
| 65155 | REINSERT OCULAR IMPLANT |
| 65175 | REMOVAL OF OCULAR IMPLANT |
| 65205 | REMOVE FOREIGN BODY FROM EYE |
| 65210 | REMOVE FOREIGN BODY FROM EYE |
| 65220 | REMOVE FOREIGN BODY FROM EYE |
| 65222 | REMOVE FOREIGN BODY FROM EYE |
| 65235 | REMOVE FOREIGN BODY FROM EYE |
| 65260 | REMOVE FOREIGN BODY FROM EYE |
| 65265 | REMOVE FOREIGN BODY FROM EYE |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 65270 | REPAIR OF EYE WOUND |
| 65272 | REPAIR OF EYE WOUND |
| 65273 | REPAIR OF EYE WOUND |
| 65275 | REPAIR OF EYE WOUND |
| 65280 | REPAIR OF EYE WOUND |
| 65285 | REPAIR OF EYE WOUND |
| 65286 | REPAIR OF EYE WOUND |
| 65290 | REPAIR OF EYE SOCKET WOUND |
| 65400 | REMOVAL OF EYE LESION |
| 65410 | BIOPSY OF CORNEA |
| 65420 | REMOVAL OF EYE LESION |
| 65426 | REMOVAL OF EYE LESION |
| 65430 | CORNEAL SMEAR |
| 65435 | CURETTE/TREAT CORNEA |
| 65436 | CURETTE/TREAT CORNEA |
| 65450 | TREATMENT OF CORNEAL LESION |
| 65600 | REVISION OF CORNEA |
| 65710 | CORNEAL TRANSPLANT |
| 65730 | CORNEAL TRANSPLANT |
| 65750 | CORNEAL TRANSPLANT |
| 65755 | CORNEAL TRANSPLANT |
| 65756 | CORNEAL TRNSPL ENDOTHELIAL |
| 65757 | PREP CORNEAL ENDO ALLOGRAFT |
| 65772 | CORRECTION OF ASTIGMATISM |
| 65775 | CORRECTION OF ASTIGMATISM |
| 65778 | COVER EYE W/MEMBRANE |
| 65779 | COVER EYE W/MEMBRANE SUTURE |
| 65780 | OCULAR RECONST TRANSPLANT |
| 65781 | OCULAR RECONST TRANSPLANT |
| 65782 | OCULAR RECONST TRANSPLANT |
| 65800 | DRAINAGE OF EYE |
| 65810 | DRAINAGE OF EYE |
| 65815 | DRAINAGE OF EYE |
| 65820 | RELIEVE INNER EYE PRESSURE |
| 65850 | INCISION OF EYE |
| 65855 | TRABECULOPLASTY LASER SURG |
| 65860 | INCISE INNER EYE ADHESIONS |
| 65865 | INCISE INNER EYE ADHESIONS |
| 65870 | INCISE INNER EYE ADHESIONS |
| 65875 | INCISE INNER EYE ADHESIONS |
| 65880 | INCISE INNER EYE ADHESIONS |
| 65900 | REMOVE EYE LESION |
| 65920 | REMOVE IMPLANT OF EYE |
| 65930 | REMOVE BLOOD CLOT FROM EYE |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 66020 | INJECTION TREATMENT OF EYE |
| 66030 | INJECTION TREATMENT OF EYE |
| 66130 | REMOVE EYE LESION |
| 66150 | GLAUCOMA SURGERY |
| 66155 | GLAUCOMA SURGERY |
| 66160 | GLAUCOMA SURGERY |
| 66170 | GLAUCOMA SURGERY |
| 66172 | INCISION OF EYE |
| 66174 | TRANSLUM DIL EYE CANAL |
| 66175 | TRNSLUM DIL EYE CANAL W/STNT |
| 66179 | AQUEOUS SHUNT EYE W/O GRAFT |
| 66180 | AQUEOUS SHUNT EYE W/GRAFT |
| 66183 | INSERT ANT DRAINAGE DEVICE |
| 66184 | REVISION OF AQUEOUS SHUNT |
| 66185 | REVISE AQUEOUS SHUNT EYE |
| 66225 | REPAIR/GRAFT EYE LESION |
| 66250 | FOLLOW-UP SURGERY OF EYE |
| 66500 | INCISION OF IRIS |
| 66505 | INCISION OF IRIS |
| 66600 | REMOVE IRIS AND LESION |
| 66605 | REMOVAL OF IRIS |
| 66625 | REMOVAL OF IRIS |
| 66630 | REMOVAL OF IRIS |
| 66635 | REMOVAL OF IRIS |
| 66680 | REPAIR IRIS & CILIARY BODY |
| 66682 | REPAIR IRIS & CILIARY BODY |
| 66700 | DESTRUCTION CILIARY BODY |
| 66710 | CILIARY TRANSSLERAL THERAPY |
| 66711 | ECP CILIARY BODY DESTRUCTION |
| 66720 | DESTRUCTION CILIARY BODY |
| 66740 | DESTRUCTION CILIARY BODY |
| 66761 | REVISION OF IRIS |
| 66762 | REVISION OF IRIS |
| 66770 | REMOVAL OF INNER EYE LESION |
| 66820 | INCISION SECONDARY CATARACT |
| 66821 | AFTER CATARACT LASER SURGERY |
| 66825 | REPOSITION INTRAOCULAR LENS |
| 66830 | REMOVAL OF LENS LESION |
| 66840 | REMOVAL OF LENS MATERIAL |
| 66850 | REMOVAL OF LENS MATERIAL |
| 66852 | REMOVAL OF LENS MATERIAL |
| 66920 | EXTRACTION OF LENS |
| 66930 | EXTRACTION OF LENS |
| 66940 | EXTRACTION OF LENS |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 66982 | XCAPSL CTRC RMVL CPLX WO ECP |
| 66983 | CATARACT SURG W/IOL 1 STAGE |
| 66984 | XCAPSL CTRC RMVL W/O ECP |
| 66985 | INSERT LENS PROSTHESIS |
| 66986 | EXCHANGE LENS PROSTHESIS |
| 66987 | XCAPSL CTRC RMVL CPLX W/ECP |
| 66988 | XCAPSL CTRC RMVL W/ECP |
| 66990 | OPHTHALMIC ENDOSCOPE ADD-ON |
| 67005 | PARTIAL REMOVAL OF EYE FLUID |
| 67010 | PARTIAL REMOVAL OF EYE FLUID |
| 67015 | RELEASE OF EYE FLUID |
| 67025 | REPLACE EYE FLUID |
| 67027 | IMPLANT EYE DRUG SYSTEM |
| 67028 | INJECTION EYE DRUG |
| 67030 | INCISE INNER EYE STRANDS |
| 67031 | LASER SURGERY EYE STRANDS |
| 67036 | REMOVAL OF INNER EYE FLUID |
| 67039 | LASER TREATMENT OF RETINA |
| 67040 | LASER TREATMENT OF RETINA |
| 67041 | VIT FOR MACULAR PUCKER |
| 67042 | VIT FOR MACULAR HOLE |
| 67043 | VIT FOR MEMBRANE DISSECT |
| 67101 | REPAIR DETACHED RETINA CRTX |
| 67105 | REPAIR DETACHED RETINA PC |
| 67107 | REPAIR DETACHED RETINA |
| 67108 | REPAIR DETACHED RETINA |
| 67110 | REPAIR DETACHED RETINA |
| 67113 | REPAIR RETINAL DETACH CPLX |
| 67115 | RELEASE ENCIRCLING MATERIAL |
| 67120 | REMOVE EYE IMPLANT MATERIAL |
| 67121 | REMOVE EYE IMPLANT MATERIAL |
| 67141 | TREATMENT OF RETINA |
| 67145 | TREATMENT OF RETINA |
| 67208 | TREATMENT OF RETINAL LESION |
| 67210 | TREATMENT OF RETINAL LESION |
| 67218 | TREATMENT OF RETINAL LESION |
| 67220 | TREATMENT OF CHOROID LESION |
| 67221 | OCULAR PHOTODYNAMIC THER |
| 67225 | EYE PHOTODYNAMIC THER ADD-ON |
| 67227 | DSTRJ EXTENSIVE RETINOPATHY |
| 67228 | TREATMENT X10SV RETINOPATHY |
| 67229 | TR RETINAL LES PRETERM INF |
| 67250 | REINFORCE EYE WALL |
| 67255 | REINFORCE/GRAFT EYE WALL |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 67311 | REVISE EYE MUSCLE |
| 67312 | REVISE TWO EYE MUSCLES |
| 67314 | REVISE EYE MUSCLE |
| 67316 | REVISE TWO EYE MUSCLES |
| 67318 | REVISE EYE MUSCLE(S) |
| 67320 | REVISE EYE MUSCLE(S) ADD-ON |
| 67331 | EYE SURGERY FOLLOW-UP ADD-ON |
| 67332 | REREVISE EYE MUSCLES ADD-ON |
| 67334 | REVISE EYE MUSCLE W/SUTURE |
| 67335 | EYE SUTURE DURING SURGERY |
| 67340 | REVISE EYE MUSCLE ADD-ON |
| 67343 | RELEASE EYE TISSUE |
| 67345 | DESTROY NERVE OF EYE MUSCLE |
| 67346 | BIOPSY EYE MUSCLE |
| 67400 | EXPLORE/BIOPSY EYE SOCKET |
| 67405 | EXPLORE/DRAIN EYE SOCKET |
| 67412 | EXPLORE/TREAT EYE SOCKET |
| 67413 | EXPLORE/TREAT EYE SOCKET |
| 67414 | EXPLR/DECOMPRESS EYE SOCKET |
| 67415 | ASPIRATION ORBITAL CONTENTS |
| 67420 | EXPLORE/TREAT EYE SOCKET |
| 67430 | EXPLORE/TREAT EYE SOCKET |
| 67440 | EXPLORE/DRAIN EYE SOCKET |
| 67445 | EXPLR/DECOMPRESS EYE SOCKET |
| 67450 | EXPLORE/BIOPSY EYE SOCKET |
| 67500 | INJECT/TREAT EYE SOCKET |
| 67505 | INJECT/TREAT EYE SOCKET |
| 67515 | INJECT/TREAT EYE SOCKET |
| 67550 | INSERT EYE SOCKET IMPLANT |
| 67560 | REVISE EYE SOCKET IMPLANT |
| 67570 | DECOMPRESS OPTIC NERVE |
| 67700 | DRAINAGE OF EYELID ABSCESS |
| 67710 | INCISION OF EYELID |
| 67715 | INCISION OF EYELID FOLD |
| 67800 | REMOVE EYELID LESION |
| 67801 | REMOVE EYELID LESIONS |
| 67805 | REMOVE EYELID LESIONS |
| 67808 | REMOVE EYELID LESION(S) |
| 67810 | BIOPSY EYELID & LID MARGIN |
| 67820 | REVISE EYELASHES |
| 67825 | REVISE EYELASHES |
| 67830 | REVISE EYELASHES |
| 67835 | REVISE EYELASHES |
| 67840 | REMOVE EYELID LESION |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 67850 | TREAT EYELID LESION |
| 67875 | CLOSURE OF EYELID BY SUTURE |
| 67880 | REVISION OF EYELID |
| 67882 | REVISION OF EYELID |
| 67930 | REPAIR EYELID WOUND |
| 67935 | REPAIR EYELID WOUND |
| 67938 | REMOVE EYELID FOREIGN BODY |
| 68020 | INCISE/DRAIN EYELID LINING |
| 68040 | TREATMENT OF EYELID LESIONS |
| 68100 | BIOPSY OF EYELID LINING |
| 68110 | REMOVE EYELID LINING LESION |
| 68115 | REMOVE EYELID LINING LESION |
| 68130 | REMOVE EYELID LINING LESION |
| 68135 | REMOVE EYELID LINING LESION |
| 68200 | TREAT EYELID BY INJECTION |
| 68320 | REVISE/GRAFT EYELID LINING |
| 68325 | REVISE/GRAFT EYELID LINING |
| 68326 | REVISE/GRAFT EYELID LINING |
| 68328 | REVISE/GRAFT EYELID LINING |
| 68330 | REVISE EYELID LINING |
| 68335 | REVISE/GRAFT EYELID LINING |
| 68340 | SEPARATE EYELID ADHESIONS |
| 68360 | REVISE EYELID LINING |
| 68362 | REVISE EYELID LINING |
| 68371 | HARVEST EYE TISSUE ALOGRAFT |
| 68400 | INCISE/DRAIN TEAR GLAND |
| 68420 | INCISE/DRAIN TEAR SAC |
| 68440 | INCISE TEAR DUCT OPENING |
| 68500 | REMOVAL OF TEAR GLAND |
| 68505 | PARTIAL REMOVAL TEAR GLAND |
| 68510 | BIOPSY OF TEAR GLAND |
| 68520 | REMOVAL OF TEAR SAC |
| 68525 | BIOPSY OF TEAR SAC |
| 68530 | CLEARANCE OF TEAR DUCT |
| 68540 | REMOVE TEAR GLAND LESION |
| 68550 | REMOVE TEAR GLAND LESION |
| 68700 | REPAIR TEAR DUCTS |
| 68705 | REVISE TEAR DUCT OPENING |
| 68720 | CREATE TEAR SAC DRAIN |
| 68745 | CREATE TEAR DUCT DRAIN |
| 68750 | CREATE TEAR DUCT DRAIN |
| 68760 | CLOSE TEAR DUCT OPENING |
| 68761 | CLOSE TEAR DUCT OPENING |
| 68770 | CLOSE TEAR SYSTEM FISTULA |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 68801 | DILATE TEAR DUCT OPENING |
| 68810 | PROBE NASOLACRIMAL DUCT |
| 68811 | PROBE NASOLACRIMAL DUCT |
| 68815 | PROBE NASOLACRIMAL DUCT |
| 68816 | PROBE NL DUCT W/BALLOON |
| 68840 | EXPLORE/IRRIGATE TEAR DUCTS |
| 68850 | INJECTION FOR TEAR SAC X-RAY |
| 69000 | DRAIN EXTERNAL EAR LESION |
| 69005 | DRAIN EXTERNAL EAR LESION |
| 69020 | DRAIN OUTER EAR CANAL LESION |
| 69100 | BIOPSY OF EXTERNAL EAR |
| 69105 | BIOPSY OF EXTERNAL EAR CANAL |
| 69110 | REMOVE EXTERNAL EAR PARTIAL |
| 69120 | REMOVAL OF EXTERNAL EAR |
| 69140 | REMOVE EAR CANAL LESION(S) |
| 69145 | REMOVE EAR CANAL LESION(S) |
| 69150 | EXTENSIVE EAR CANAL SURGERY |
| 69155 | EXTENSIVE EAR/NECK SURGERY |
| 69200 | CLEAR OUTER EAR CANAL |
| 69205 | CLEAR OUTER EAR CANAL |
| 69209 | REMOVE IMPACTED EAR WAX UNI |
| 69210 | REMOVE IMPACTED EAR WAX UNI |
| 69220 | CLEAN OUT MASTOID CAVITY |
| 69222 | CLEAN OUT MASTOID CAVITY |
| 69310 | REBUILD OUTER EAR CANAL |
| 69320 | REBUILD OUTER EAR CANAL |
| 69420 | INCISION OF EARDRUM |
| 69421 | INCISION OF EARDRUM |
| 69424 | REMOVE VENTILATING TUBE |
| 69433 | CREATE EARDRUM OPENING |
| 69436 | CREATE EARDRUM OPENING |
| 69440 | EXPLORATION OF MIDDLE EAR |
| 69450 | EARDRUM REVISION |
| 69501 | MASTOIDECTOMY |
| 69502 | MASTOIDECTOMY |
| 69505 | REMOVE MASTOID STRUCTURES |
| 69511 | EXTENSIVE MASTOID SURGERY |
| 69530 | EXTENSIVE MASTOID SURGERY |
| 69535 | REMOVE PART OF TEMPORAL BONE |
| 69540 | REMOVE EAR LESION |
| 69550 | REMOVE EAR LESION |
| 69552 | REMOVE EAR LESION |
| 69554 | REMOVE EAR LESION |
| 69601 | MASTOID SURGERY REVISION |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 69602 | MASTOID SURGERY REVISION |
| 69603 | MASTOID SURGERY REVISION |
| 69604 | MASTOID SURGERY REVISION |
| 69605 | MASTOID SURGERY REVISION |
| 69610 | REPAIR OF EARDRUM |
| 69620 | REPAIR OF EARDRUM |
| 69631 | REPAIR EARDRUM STRUCTURES |
| 69632 | REBUILD EARDRUM STRUCTURES |
| 69633 | REBUILD EARDRUM STRUCTURES |
| 69635 | REPAIR EARDRUM STRUCTURES |
| 69636 | REBUILD EARDRUM STRUCTURES |
| 69637 | REBUILD EARDRUM STRUCTURES |
| 69641 | REVISE MIDDLE EAR & MASTOID |
| 69642 | REVISE MIDDLE EAR & MASTOID |
| 69643 | REVISE MIDDLE EAR & MASTOID |
| 69644 | REVISE MIDDLE EAR & MASTOID |
| 69645 | REVISE MIDDLE EAR & MASTOID |
| 69646 | REVISE MIDDLE EAR & MASTOID |
| 69650 | RELEASE MIDDLE EAR BONE |
| 69660 | REVISE MIDDLE EAR BONE |
| 69661 | REVISE MIDDLE EAR BONE |
| 69662 | REVISE MIDDLE EAR BONE |
| 69666 | REPAIR MIDDLE EAR STRUCTURES |
| 69667 | REPAIR MIDDLE EAR STRUCTURES |
| 69670 | REMOVE MASTOID AIR CELLS |
| 69676 | REMOVE MIDDLE EAR NERVE |
| 69700 | CLOSE MASTOID FISTULA |
| 69720 | RELEASE FACIAL NERVE |
| 69725 | RELEASE FACIAL NERVE |
| 69740 | REPAIR FACIAL NERVE |
| 69745 | REPAIR FACIAL NERVE |
| 69801 | INCISE INNER EAR |
| 69805 | EXPLORE INNER EAR |
| 69806 | EXPLORE INNER EAR |
| 69905 | REMOVE INNER EAR |
| 69910 | REMOVE INNER EAR & MASTOID |
| 69915 | INCISE INNER EAR NERVE |
| 69955 | RELEASE FACIAL NERVE |
| 69960 | RELEASE INNER EAR CANAL |
| 69970 | REMOVE INNER EAR LESION |
| 69990 | MICROSURGERY ADD-ON |
| 70010 | CONTRAST X-RAY OF BRAIN |
| 70015 | CONTRAST X-RAY OF BRAIN |
| 70030 | X-RAY EYE FOR FOREIGN BODY |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 70100 | X-RAY EXAM OF JAW <4VIEWS |
| 70110 | X-RAY EXAM OF JAW 4/> VIEWS |
| 70120 | X-RAY EXAM OF MASTOIDS |
| 70130 | X-RAY EXAM OF MASTOIDS |
| 70134 | X-RAY EXAM OF MIDDLE EAR |
| 70140 | X-RAY EXAM OF FACIAL BONES |
| 70150 | X-RAY EXAM OF FACIAL BONES |
| 70160 | X-RAY EXAM OF NASAL BONES |
| 70170 | X-RAY EXAM OF TEAR DUCT |
| 70190 | X-RAY EXAM OF EYE SOCKETS |
| 70200 | X-RAY EXAM OF EYE SOCKETS |
| 70210 | X-RAY EXAM OF SINUSES |
| 70220 | X-RAY EXAM OF SINUSES |
| 70240 | X-RAY EXAM PITUITARY SADDLE |
| 70250 | X-RAY EXAM OF SKULL |
| 70260 | X-RAY EXAM OF SKULL |
| 70300 | X-RAY EXAM OF TEETH |
| 70310 | X-RAY EXAM OF TEETH |
| 70320 | FULL MOUTH X-RAY OF TEETH |
| 70328 | X-RAY EXAM OF JAW JOINT |
| 70330 | X-RAY EXAM OF JAW JOINTS |
| 70332 | X-RAY EXAM OF JAW JOINT |
| 70336 | MAGNETIC IMAGE JAW JOINT |
| 70350 | X-RAY HEAD FOR ORTHODONTIA |
| 70355 | PANORAMIC X-RAY OF JAWS |
| 70360 | X-RAY EXAM OF NECK |
| 70370 | THROAT X-RAY & FLUOROSCOPY |
| 70371 | SPEECH EVALUATION COMPLEX |
| 70380 | X-RAY EXAM OF SALIVARY GLAND |
| 70390 | X-RAY EXAM OF SALIVARY DUCT |
| 70450 | CT HEAD/BRAIN W/O DYE |
| 70460 | CT HEAD/BRAIN W/DYE |
| 70470 | CT HEAD/BRAIN W/O & W/DYE |
| 70480 | CT ORBIT/EAR/FOSSA W/O DYE |
| 70481 | CT ORBIT/EAR/FOSSA W/DYE |
| 70482 | CT ORBIT/EAR/FOSSA W/O&W/DYE |
| 70486 | CT MAXILLOFACIAL W/O DYE |
| 70487 | CT MAXILLOFACIAL W/DYE |
| 70488 | CT MAXILLOFACIAL W/O & W/DYE |
| 70490 | CT SOFT TISSUE NECK W/O DYE |
| 70491 | CT SOFT TISSUE NECK W/DYE |
| 70492 | CT SFT TSUE NCK W/O & W/DYE |
| 70496 | CT ANGIOGRAPHY HEAD |
| 70498 | CT ANGIOGRAPHY NECK |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 70540 | MRI ORBIT/FACE/NECK W/O DYE |
| 70542 | MRI ORBIT/FACE/NECK W/DYE |
| 70543 | MRI ORBT/FAC/NCK W/O &W/DYE |
| 70544 | MR ANGIOGRAPHY HEAD W/O DYE |
| 70545 | MR ANGIOGRAPHY HEAD W/DYE |
| 70546 | MR ANGIOGRAPH HEAD W/O&W/DYE |
| 70547 | MR ANGIOGRAPHY NECK W/O DYE |
| 70548 | MR ANGIOGRAPHY NECK W/DYE |
| 70549 | MR ANGIOGRAPH NECK W/O&W/DYE |
| 70551 | MRI BRAIN STEM W/O DYE |
| 70552 | MRI BRAIN STEM W/DYE |
| 70553 | MRI BRAIN STEM W/O & W/DYE |
| 70554 | FMRI BRAIN BY TECH |
| 70555 | FMRI BRAIN BY PHYS/PSYCH |
| 70557 | MRI BRAIN W/O DYE |
| 70558 | MRI BRAIN W/DYE |
| 70559 | MRI BRAIN W/O & W/DYE |
| 71045 | X-RAY EXAM CHEST 1 VIEW |
| 71046 | X-RAY EXAM CHEST 2 VIEWS |
| 71047 | X-RAY EXAM CHEST 3 VIEWS |
| 71048 | X-RAY EXAM CHEST 4+ VIEWS |
| 71100 | X-RAY EXAM RIBS UNI 2 VIEWS |
| 71101 | X-RAY EXAM UNILAT RIBS/CHEST |
| 71110 | X-RAY EXAM RIBS BIL 3 VIEWS |
| 71111 | X-RAY EXAM RIBS/CHEST4/> VWS |
| 71120 | X-RAY EXAM BREASTBONE 2/>VWS |
| 71130 | X-RAY STRENOCLAVIC JT 3/>VWS |
| 71250 | CT THORAX W/O DYE |
| 71260 | CT THORAX W/DYE |
| 71270 | CT THORAX W/O & W/DYE |
| 71271 | CT THORAX LUNG CANCER SCR CNPAR |
| 71275 | CT ANGIOGRAPHY CHEST |
| 71550 | MRI CHEST W/O DYE |
| 71551 | MRI CHEST W/DYE |
| 71552 | MRI CHEST W/O & W/DYE |
| 71555 | MRI ANGIO CHEST W OR W/O DYE |
| 72020 | X-RAY EXAM OF SPINE 1 VIEW |
| 72040 | X-RAY EXAM NECK SPINE 2-3 VW |
| 72050 | X-RAY EXAM NECK SPINE 4/5VWS |
| 72052 | X-RAY EXAM NECK SPINE 6/>VWS |
| 72070 | X-RAY EXAM THORAC SPINE 2VWS |
| 72072 | X-RAY EXAM THORAC SPINE 3VWS |
| 72074 | X-RAY EXAM THORAC SPINE4/>VW |
| 72080 | X-RAY EXAM THORACOLMB 2/> VW |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 72081 | X-RAY EXAM ENTIRE SPI 1 VW |
| 72082 | X-RAY EXAM ENTIRE SPI 2/3 VW |
| 72083 | X-RAY EXAM ENTIRE SPI 4/5 VW |
| 72084 | X-RAY EXAM ENTIRE SPI 6/> VW |
| 72100 | X-RAY EXAM L-S SPINE 2/3 VWS |
| 72110 | X-RAY EXAM L-2 SPINE 4/>VWS |
| 72114 | X-RAY EXAM L-S SPINE BENDING |
| 72120 | X-RAY BEND ONLY L-S SPINE |
| 72125 | CT NECK SPINE W/O DYE |
| 72126 | CT NECK SPINE W/DYE |
| 72127 | CT NECK SPINE W/O & W/DYE |
| 72128 | CT CHEST SPINE W/O DYE |
| 72129 | CT CHEST SPINE W/DYE |
| 72130 | CT CHEST SPINE W/O & W/DYE |
| 72131 | CT LUMBAR SPINE W/O DYE |
| 72132 | CT LUMBAR SPINE W/DYE |
| 72133 | CT LUMBAR SPINE W/O & W/DYE |
| 72141 | MRI NECK SPINE W/O DYE |
| 72142 | MRI NECK SPINE W/DYE |
| 72146 | MRI CHEST SPINE W/O DYE |
| 72147 | MRI CHEST SPINE W/DYE |
| 72148 | MRI LUMBAR SPINE W/O DYE |
| 72149 | MRI LUMBAR SPINE W/DYE |
| 72156 | MRI NECK SPINE W/O & W/DYE |
| 72157 | MRI CHEST SPINE W/O & W/DYE |
| 72158 | MRI LUMBAR SPINE W/O & W/DYE |
| 72170 | X-RAY EXAM OF PELVIS |
| 72190 | X-RAY EXAM OF PELVIS |
| 72191 | CT ANGIOGRAPH PELV W/O&W/DYE |
| 72192 | CT PELVIS W/O DYE |
| 72193 | CT PELVIS W/DYE |
| 72194 | CT PELVIS W/O & W/DYE |
| 72195 | MRI PELVIS W/O DYE |
| 72196 | MRI PELVIS W/DYE |
| 72197 | MRI PELVIS W/O & W/DYE |
| 72198 | MR ANGIO PELVIS W/O & W/DYE |
| 72200 | X-RAY EXAM SI JOINTS |
| 72202 | X-RAY EXAM SI JOINTS 3/> VWS |
| 72220 | X-RAY EXAM SACRUM TAILBONE |
| 72240 | MYELOGRAPHY NECK SPINE |
| 72255 | MYELOGRAPHY THORACIC SPINE |
| 72265 | MYELOGRAPHY L-S SPINE |
| 72270 | MYELOGPHY 2/> SPINE REGIONS |
| 72275 | EPIDUROGRAPHY |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 72285 | DISCOGRAPHY CERV/THOR SPINE |
| 72295 | X-RAY OF LOWER SPINE DISK |
| 73000 | X-RAY EXAM OF COLLAR BONE |
| 73010 | X-RAY EXAM OF SHOULDER BLADE |
| 73020 | X-RAY EXAM OF SHOULDER |
| 73030 | X-RAY EXAM OF SHOULDER |
| 73040 | CONTRAST X-RAY OF SHOULDER |
| 73050 | X-RAY EXAM OF SHOULDERS |
| 73060 | X-RAY EXAM OF HUMERUS |
| 73070 | X-RAY EXAM OF ELBOW |
| 73080 | X-RAY EXAM OF ELBOW |
| 73085 | CONTRAST X-RAY OF ELBOW |
| 73090 | X-RAY EXAM OF FOREARM |
| 73092 | X-RAY EXAM OF ARM INFANT |
| 73100 | X-RAY EXAM OF WRIST |
| 73110 | X-RAY EXAM OF WRIST |
| 73115 | CONTRAST X-RAY OF WRIST |
| 73120 | X-RAY EXAM OF HAND |
| 73130 | X-RAY EXAM OF HAND |
| 73140 | X-RAY EXAM OF FINGER(S) |
| 73200 | CT UPPER EXTREMITY W/O DYE |
| 73201 | CT UPPER EXTREMITY W/DYE |
| 73202 | CT UPPR EXTREMITY W/O&W/DYE |
| 73206 | CT ANGIO UPR EXTRM W/O&W/DYE |
| 73218 | MRI UPPER EXTREMITY W/O DYE |
| 73219 | MRI UPPER EXTREMITY W/DYE |
| 73220 | MRI UPPR EXTREMITY W/O&W/DYE |
| 73221 | MRI JOINT UPR EXTREM W/O DYE |
| 73222 | MRI JOINT UPR EXTREM W/DYE |
| 73223 | MRI JOINT UPR EXTR W/O&W/DYE |
| 73501 | X-RAY EXAM HIP UNI 1 VIEW |
| 73502 | X-RAY EXAM HIP UNI 2-3 VIEWS |
| 73503 | X-RAY EXAM HIP UNI 4/> VIEWS |
| 73521 | X-RAY EXAM HIPS BI 2 VIEWS |
| 73522 | X-RAY EXAM HIPS BI 3-4 VIEWS |
| 73523 | X-RAY EXAM HIPS BI 5/> VIEWS |
| 73525 | CONTRAST X-RAY OF HIP |
| 73551 | X-RAY EXAM OF FEMUR 1 |
| 73552 | X-RAY EXAM OF FEMUR 2/> |
| 73560 | X-RAY EXAM OF KNEE 1 OR 2 |
| 73562 | X-RAY EXAM OF KNEE 3 |
| 73564 | X-RAY EXAM KNEE 4 OR MORE |
| 73565 | X-RAY EXAM OF KNEES |
| 73580 | CONTRAST X-RAY OF KNEE JOINT |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 73590 | X-RAY EXAM OF LOWER LEG |
| 73592 | X-RAY EXAM OF LEG INFANT |
| 73600 | X-RAY EXAM OF ANKLE |
| 73610 | X-RAY EXAM OF ANKLE |
| 73615 | CONTRAST X-RAY OF ANKLE |
| 73620 | X-RAY EXAM OF FOOT |
| 73630 | X-RAY EXAM OF FOOT |
| 73650 | X-RAY EXAM OF HEEL |
| 73660 | X-RAY EXAM OF TOE(S) |
| 73700 | CT LOWER EXTREMITY W/O DYE |
| 73701 | CT LOWER EXTREMITY W/DYE |
| 73702 | CT LWR EXTREMITY W/O&W/DYE |
| 73706 | CT ANGIO LWR EXTR W/O&W/DYE |
| 73718 | MRI LOWER EXTREMITY W/O DYE |
| 73719 | MRI LOWER EXTREMITY W/DYE |
| 73720 | MRI LWR EXTREMITY W/O&W/DYE |
| 73721 | MRI JNT OF LWR EXTRE W/O DYE |
| 73722 | MRI JOINT OF LWR EXTR W/DYE |
| 73723 | MRI JOINT LWR EXTR W/O&W/DYE |
| 73725 | MR ANG LWR EXT W OR W/O DYE |
| 74018 | X-RAY EXAM ABDOMEN 1 VIEW |
| 74019 | X-RAY EXAM ABDOMEN 2 VIEWS |
| 74021 | X-RAY EXAM ABDOMEN 3+ VIEWS |
| 74022 | X-RAY EXAM COMPLETE ABDOMEN |
| 74150 | CT ABDOMEN W/O DYE |
| 74160 | CT ABDOMEN W/DYE |
| 74170 | CT ABDOMEN W/O & W/DYE |
| 74174 | CT ANGIO ABD&PELV W/O&W/DYE |
| 74175 | CT ANGIO ABDOM W/O & W/DYE |
| 74176 | CT ABD & PELVIS W/O CONTRAST |
| 74177 | CT ABD & PELV W/CONTRAST |
| 74178 | CT ABD & PELV 1/> REGNS |
| 74181 | MRI ABDOMEN W/O DYE |
| 74182 | MRI ABDOMEN W/DYE |
| 74183 | MRI ABDOMEN W/O & W/DYE |
| 74185 | MRI ANGIO ABDOM W ORW/O DYE |
| 74190 | X-RAY EXAM OF PERITONEUM |
| 74210 | X-RAY XM PHRNX&/CRV ESOPH C+ |
| 74220 | X-RAY XM ESOPHAGUS 1CNTRST |
| 74221 | X-RAY XM ESOPHAGUS 2CNTRST |
| 74230 | X-RAY XM SWLNG FUNCJ C+ |
| 74235 | REMOVE ESOPHAGUS OBSTRUCTION |
| 74240 | X-RAY XM UPR GI TRC 1CNTRST |
| 74246 | X-RAY XM UPR GI TRC 2CNTRST |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 74248 | X-RAY SM INT F-THRU STD |
| 74250 | X-RAY XM SM INT 1CNTRST STD |
| 74251 | X-RAY XM SM INT 2CNTRST STD |
| 74261 | CT COLONOGRAPHY DX |
| 74262 | CT COLONOGRAPHY DX W/DYE |
| 74263 | CT COLONOGRAPHY SCREENING |
| 74270 | X-RAY XM COLON 1CNTRST STD |
| 74280 | X-RAY XM COLON 2CNTRST STD |
| 74283 | THER NMA RDCTJ INTUS/OBSTRCJ |
| 74290 | CONTRAST X-RAY GALLBLADDER |
| 74300 | X-RAY BILE DUCTS/PANCREAS |
| 74301 | X-RAYS AT SURGERY ADD-ON |
| 74328 | X-RAY BILE DUCT ENDOSCOPY |
| 74329 | X-RAY FOR PANCREAS ENDOSCOPY |
| 74330 | X-RAY BILE/PANC ENDOSCOPY |
| 74340 | X-RAY GUIDE FOR GI TUBE |
| 74355 | X-RAY GUIDE INTESTINAL TUBE |
| 74360 | X-RAY GUIDE GI DILATION |
| 74363 | X-RAY BILE DUCT DILATION |
| 74400 | CONTRST X-RAY URINARY TRACT |
| 74410 | CONTRST X-RAY URINARY TRACT |
| 74415 | CONTRST X-RAY URINARY TRACT |
| 74420 | CONTRST X-RAY URINARY TRACT |
| 74425 | CONTRST X-RAY URINARY TRACT |
| 74430 | CONTRAST X-RAY BLADDER |
| 74440 | X-RAY MALE GENITAL TRACT |
| 74445 | X-RAY EXAM OF PENIS |
| 74450 | X-RAY URETHRA/BLADDER |
| 74455 | X-RAY URETHRA/BLADDER |
| 74470 | X-RAY EXAM OF KIDNEY LESION |
| 74485 | DILATION URTR/URT RS&I |
| 74710 | X-RAY MEASUREMENT OF PELVIS |
| 74712 | MRI FETAL SNGL/1ST GESTATION |
| 74713 | MRI FETAL EA ADDL GESTATION |
| 74740 | X-RAY FEMALE GENITAL TRACT |
| 74742 | X-RAY FALLOPIAN TUBE |
| 74775 | X-RAY EXAM OF PERINEUM |
| 75557 | CARDIAC MRI FOR MORPH |
| 75559 | CARDIAC MRI W/STRESS IMG |
| 75561 | CARDIAC MRI FOR MORPH W/DYE |
| 75563 | CARD MRI W/STRESS IMG & DYE |
| 75565 | CARD MRI VELOC FLOW MAPPING |
| 75572 | CT HRT W/3D IMAGE |
| 75573 | CT HRT W/3D IMAGE CONGEN |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 75574 | CT ANGIO HRT W/3D IMAGE |
| 75600 | CONTRAST EXAM THORACIC AORTA |
| 75605 | CONTRAST EXAM THORACIC AORTA |
| 75625 | CONTRAST EXAM ABDOMINL AORTA |
| 75630 | X-RAY AORTA LEG ARTERIES |
| 75635 | CT ANGIO ABDOMINAL ARTERIES |
| 75705 | ARTERY X-RAYS SPINE |
| 75710 | ARTERY X-RAYS ARM/LEG |
| 75716 | ARTERY X-RAYS ARMS/LEGS |
| 75726 | ARTERY X-RAYS ABDOMEN |
| 75731 | ARTERY X-RAYS ADRENAL GLAND |
| 75733 | ARTERY X-RAYS ADRENALS |
| 75736 | ARTERY X-RAYS PELVIS |
| 75741 | ARTERY X-RAYS LUNG |
| 75743 | ARTERY X-RAYS LUNGS |
| 75746 | ARTERY X-RAYS LUNG |
| 75756 | ARTERY X-RAYS CHEST |
| 75774 | ARTERY X-RAY EACH VESSEL |
| 75801 | LYMPH VESSEL X-RAY ARM/LEG |
| 75803 | LYMPH VESSEL X-RAY ARMS/LEGS |
| 75805 | LYMPH VESSEL X-RAY TRUNK |
| 75807 | LYMPH VESSEL X-RAY TRUNK |
| 75809 | NONVASCULAR SHUNT X-RAY |
| 75810 | VEIN X-RAY SPLEEN/LIVER |
| 75820 | VEIN X-RAY ARM/LEG |
| 75822 | VEIN X-RAY ARMS/LEGS |
| 75825 | VEIN X-RAY TRUNK |
| 75827 | VEIN X-RAY CHEST |
| 75831 | VEIN X-RAY KIDNEY |
| 75833 | VEIN X-RAY KIDNEYS |
| 75840 | VEIN X-RAY ADRENAL GLAND |
| 75842 | VEIN X-RAY ADRENAL GLANDS |
| 75860 | VEIN X-RAY NECK |
| 75870 | VEIN X-RAY SKULL |
| 75872 | VEIN X-RAY SKULL EPIDURAL |
| 75880 | VEIN X-RAY EYE SOCKET |
| 75885 | VEIN X-RAY LIVER W/HEMODYNAM |
| 75887 | VEIN X-RAY LIVER W/O HEMODYN |
| 75889 | VEIN X-RAY LIVER W/HEMODYNAM |
| 75891 | VEIN X-RAY LIVER |
| 75893 | VENOUS SAMPLING BY CATHETER |
| 75894 | X-RAYS TRANSCATH THERAPY |
| 75898 | FOLLOW-UP ANGIOGRAPHY |
| 75901 | REMOVE CVA DEVICE OBSTRUCT |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 75902 | REMOVE CVA LUMEN OBSTRUCT |
| 75956 | XRAY ENDOVASC THOR AO REPR |
| 75957 | XRAY ENDOVASC THOR AO REPR |
| 75958 | XRAY PLACE PROX EXT THOR AO |
| 75959 | XRAY PLACE DIST EXT THOR AO |
| 75970 | VASCULAR BIOPSY |
| 75984 | XRAY CONTROL CATHETER CHANGE |
| 75989 | ABSCESS DRAINAGE UNDER X-RAY |
| 76000 | FLUOROSCOPY <1 HR PHYS/QHP |
| 76010 | X-RAY NOSE TO RECTUM |
| 76080 | X-RAY EXAM OF FISTULA |
| 76098 | X-RAY EXAM SURGICAL SPECIMEN |
| 76100 | X-RAY EXAM OF BODY SECTION |
| 76101 | COMPLEX BODY SECTION X-RAY |
| 76102 | COMPLEX BODY SECTION X-RAYS |
| 76120 | CINE/VIDEO X-RAYS |
| 76125 | CINE/VIDEO X-RAYS ADD-ON |
| 76140 | X-RAY CONSULTATION |
| 76145 | MED PHYSIC DOS EVAL RAD EXPS |
| 76376 | 3D RENDER W/INTRP POSTPROCES |
| 76377 | 3D RENDER W/INTRP POSTPROCES |
| 76380 | CAT SCAN FOLLOW-UP STUDY |
| 76390 | MR SPECTROSCOPY |
| 76506 | ECHO EXAM OF HEAD |
| 76510 | OPHTH US B & QUANT A |
| 76511 | OPHTH US QUANT A ONLY |
| 76512 | OPHTH US B W/NON-QUANT A |
| 76513 | ECHO EXAM OF EYE WATER BATH |
| 76514 | ECHO EXAM OF EYE THICKNESS |
| 76516 | ECHO EXAM OF EYE |
| 76519 | ECHO EXAM OF EYE |
| 76529 | ECHO EXAM OF EYE |
| 76536 | US EXAM OF HEAD AND NECK |
| 76604 | US EXAM CHEST |
| 76641 | ULTRASOUND BREAST COMPLETE |
| 76642 | ULTRASOUND BREAST LIMITED |
| 76700 | US EXAM ABDOM COMPLETE |
| 76705 | ECHO EXAM OF ABDOMEN |
| 76706 | US ABDL AORTA SCREEN AAA |
| 76770 | US EXAM ABDO BACK WALL COMP |
| 76775 | US EXAM ABDO BACK WALL LIM |
| 76776 | US EXAM K TRANSPL W/DOPPLER |
| 76800 | US EXAM SPINAL CANAL |
| 76801 | OB US < 14 WKS SINGLE FETUS |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 76802 | OB US < 14 WKS ADDL FETUS |
| 76805 | OB US >/= 14 WKS SNGL FETUS |
| 76810 | OB US >/= 14 WKS ADDL FETUS |
| 76811 | OB US DETAILED SNGL FETUS |
| 76812 | OB US DETAILED ADDL FETUS |
| 76813 | OB US NUCHAL MEAS 1 GEST |
| 76814 | OB US NUCHAL MEAS ADD-ON |
| 76815 | OB US LIMITED FETUS(S) |
| 76816 | OB US FOLLOW-UP PER FETUS |
| 76817 | TRANSVAGINAL US OBSTETRIC |
| 76818 | FETAL BIOPHYS PROFILE W/NST |
| 76819 | FETAL BIOPHYS PROFIL W/O NST |
| 76820 | UMBILICAL ARTERY ECHO |
| 76821 | MIDDLE CEREBRAL ARTERY ECHO |
| 76825 | ECHO EXAM OF FETAL HEART |
| 76826 | ECHO EXAM OF FETAL HEART |
| 76827 | ECHO EXAM OF FETAL HEART |
| 76828 | ECHO EXAM OF FETAL HEART |
| 76830 | TRANSVAGINAL US NON-OB |
| 76831 | ECHO EXAM UTERUS |
| 76856 | US EXAM PELVIC COMPLETE |
| 76857 | US EXAM PELVIC LIMITED |
| 76870 | US EXAM SCROTUM |
| 76872 | US TRANSRECTAL |
| 76873 | ECHOGRAP TRANS R PROS STUDY |
| 76881 | US COMPL JOINT R-T W/IMG |
| 76882 | US LMTD JT/NONVASC XTR STRUX |
| 76885 | US EXAM INFANT HIPS DYNAMIC |
| 76886 | US EXAM INFANT HIPS STATIC |
| 76932 | ECHO GUIDE FOR HEART BIOPSY |
| 76937 | US GUIDE VASCULAR ACCESS |
| 76940 | US GUIDE TISSUE ABLATION |
| 76941 | ECHO GUIDE FOR TRANSFUSION |
| 76942 | ECHO GUIDE FOR BIOPSY |
| 76945 | ECHO GUIDE VILLUS SAMPLING |
| 76946 | ECHO GUIDE FOR AMNIOCENTESIS |
| 76948 | ECHO GUIDE OVA ASPIRATION |
| 76965 | ECHO GUIDANCE RADIOTHERAPY |
| 76970 | ULTRASOUND EXAM FOLLOW-UP |
| 76975 | GI ENDOSCOPIC ULTRASOUND |
| 76977 | US BONE DENSITY MEASURE |
| 76998 | US GUIDE INTRAOP |
| 77001 | FLUOROGUIDE FOR VEIN DEVICE |
| 77002 | NEEDLE LOCALIZATION BY XRAY |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 77003 | FLUOROGUIDE FOR SPINE INJECT |
| 77011 | CT SCAN FOR LOCALIZATION |
| 77012 | CT SCAN FOR NEEDLE BIOPSY |
| 77013 | CT GUIDE FOR TISSUE ABLATION |
| 77014 | CT SCAN FOR THERAPY GUIDE |
| 77021 | MRI GUIDANCE NDL PLMT RS&I |
| 77022 | MRI GDN PARNCHYMA TISS ABLTJ |
| 77046 | MRI BREAST C- UNILATERAL |
| 77047 | MRI BREAST C- BILATERAL |
| 77048 | MRI BREAST C-+ W/CAD UNI |
| 77049 | MRI BREAST C-+ W/CAD BI |
| 77053 | X-RAY OF MAMMARY DUCT |
| 77054 | X-RAY OF MAMMARY DUCTS |
| 77061 | BREAST TOMOSYNTHESIS UNI |
| 77062 | BREAST TOMOSYNTHESIS BI |
| 77063 | BREAST TOMOSYNTHESIS BI |
| 77065 | DX MAMMO INCL CAD UNI |
| 77066 | DX MAMMO INCL CAD BI |
| 77067 | SCR MAMMO BI INCL CAD |
| 77071 | X-RAY STRESS VIEW |
| 77072 | X-RAYS FOR BONE AGE |
| 77073 | X-RAYS BONE LENGTH STUDIES |
| 77074 | X-RAYS BONE SURVEY LIMITED |
| 77075 | X-RAYS BONE SURVEY COMPLETE |
| 77076 | X-RAYS BONE SURVEY INFANT |
| 77077 | JOINT SURVEY SINGLE VIEW |
| 77078 | CT BONE DENSITY AXIAL |
| 77080 | DXA BONE DENSITY AXIAL |
| 77081 | DXA BONE DENSITY/PERIPHERAL |
| 77084 | MAGNETIC IMAGE BONE MARROW |
| 77085 | DXA BONE DENSITY STUDY |
| 77086 | FRACTURE ASSESSMENT VIA DXA |
| 77261 | RADIATION THERAPY PLANNING |
| 77262 | RADIATION THERAPY PLANNING |
| 77263 | RADIATION THERAPY PLANNING |
| 77280 | SET RADIATION THERAPY FIELD |
| 77285 | SET RADIATION THERAPY FIELD |
| 77290 | SET RADIATION THERAPY FIELD |
| 77293 | RESPIRATOR MOTION MGMT SIMUL |
| 77295 | 3-D RADIOTHERAPY PLAN |
| 77300 | RADIATION THERAPY DOSE PLAN |
| 77301 | RADIOTHERAPY DOSE PLAN IMRT |
| 77306 | TELETHX ISODOSE PLAN SIMPLE |
| 77307 | TELETHX ISODOSE PLAN CPLX |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 77321 | SPECIAL TELETX PORT PLAN |
| 77331 | SPECIAL RADIATION DOSIMETRY |
| 77332 | RADIATION TREATMENT AID(S) |
| 77333 | RADIATION TREATMENT AID(S) |
| 77334 | RADIATION TREATMENT AID(S) |
| 77336 | RADIATION PHYSICS CONSULT |
| 77338 | DESIGN MLC DEVICE FOR IMRT |
| 77370 | RADIATION PHYSICS CONSULT |
| 77385 | NTSTY MODUL RAD TX DLVR SMPL |
| 77386 | NTSTY MODUL RAD TX DLVR CPLX |
| 77387 | GUIDANCE FOR RADJ TX DLVR |
| 77401 | RADIATION TREATMENT DELIVERY |
| 77402 | RADIATION TREATMENT DELIVERY |
| 77407 | RADIATION TREATMENT DELIVERY |
| 77412 | RADIATION TREATMENT DELIVERY |
| 77417 | RADIOLOGY PORT IMAGES(S) |
| 77423 | NEUTRON BEAM TX COMPLEX |
| 77424 | IO RAD TX DELIVERY BY X-RAY |
| 77425 | IO RAD TX DELIVER BY ELCTRNS |
| 77427 | RADIATION TX MANAGEMENT X5 |
| 77431 | RADIATION THERAPY MANAGEMENT |
| 77432 | STEREOTACTIC RADIATION TRMT |
| 77435 | SBRT MANAGEMENT |
| 77469 | IO RADIATION TX MANAGEMENT |
| 77470 | SPECIAL RADIATION TREATMENT |
| 77600 | HYPERTHERMIA TREATMENT |
| 77605 | HYPERTHERMIA TREATMENT |
| 77610 | HYPERTHERMIA TREATMENT |
| 77615 | HYPERTHERMIA TREATMENT |
| 77620 | HYPERTHERMIA TREATMENT |
| 77750 | INFUSE RADIOACTIVE MATERIALS |
| 77789 | APPLY SURF LDR RADIONUCLIDE |
| 78012 | THYROID UPTAKE MEASUREMENT |
| 78013 | THYROID IMAGING W/BLOOD FLOW |
| 78014 | THYROID IMAGING W/BLOOD FLOW |
| 78015 | THYROID MET IMAGING |
| 78016 | THYROID MET IMAGING/STUDIES |
| 78018 | THYROID MET IMAGING BODY |
| 78020 | THYROID MET UPTAKE |
| 78070 | PARATHYROID PLANAR IMAGING |
| 78071 | PARATHYRD PLANAR W/WO SUBTRJ |
| 78072 | PARATHYRD PLANAR W/SPECT&CT |
| 78075 | ADRENAL CORTEX & MEDULLA IMG |
| 78102 | BONE MARROW IMAGING LTD |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 78103 | BONE MARROW IMAGING MULT |
| 78104 | BONE MARROW IMAGING BODY |
| 78110 | PLASMA VOLUME SINGLE |
| 78111 | PLASMA VOLUME MULTIPLE |
| 78120 | RED CELL MASS SINGLE |
| 78121 | RED CELL MASS MULTIPLE |
| 78122 | BLOOD VOLUME |
| 78130 | RED CELL SURVIVAL STUDY |
| 78135 | RED CELL SURVIVAL KINETICS |
| 78140 | RED CELL SEQUESTRATION |
| 78185 | SPLEEN IMAGING |
| 78191 | PLATELET SURVIVAL |
| 78195 | LYMPH SYSTEM IMAGING |
| 78201 | LIVER IMAGING |
| 78202 | LIVER IMAGING WITH FLOW |
| 78215 | LIVER AND SPLEEN IMAGING |
| 78216 | LIVER & SPLEEN IMAGE/FLOW |
| 78226 | HEPATOBILIARY SYSTEM IMAGING |
| 78227 | HEPATOBIL SYST IMAGE W/DRUG |
| 78230 | SALIVARY GLAND IMAGING |
| 78231 | SERIAL SALIVARY IMAGING |
| 78232 | SALIVARY GLAND FUNCTION EXAM |
| 78258 | ESOPHAGEAL MOTILITY STUDY |
| 78261 | GASTRIC MUCOSA IMAGING |
| 78262 | GASTROESOPHAGEAL REFLUX EXAM |
| 78264 | GASTRIC EMPTYING IMAG STUDY |
| 78265 | GASTRIC EMPTYING IMAG STUDY |
| 78266 | GASTRIC EMPTYING IMAG STUDY |
| 78267 | BREATH TST ATTAIN/ANAL C-14 |
| 78268 | BREATH TEST ANALYSIS C-14 |
| 78278 | ACUTE GI BLOOD LOSS IMAGING |
| 78282 | GI PROTEIN LOSS EXAM |
| 78290 | MECKELS DIVERT EXAM |
| 78291 | LEVEEN/SHUNT PATENCY EXAM |
| 78300 | BONE IMAGING LIMITED AREA |
| 78305 | BONE IMAGING MULTIPLE AREAS |
| 78306 | BONE IMAGING WHOLE BODY |
| 78315 | BONE IMAGING 3 PHASE |
| 78414 | NON-IMAGING HEART FUNCTION |
| 78428 | CARDIAC SHUNT IMAGING |
| 78445 | VASCULAR FLOW IMAGING |
| 78451 | HT MUSCLE IMAGE SPECT SING |
| 78452 | HT MUSCLE IMAGE SPECT MULT |
| 78453 | HT MUSCLE IMAGE PLANAR SING |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 78454 | HT MUSC IMAGE PLANAR MULT |
| 78456 | ACUTE VENOUS THROMBUS IMAGE |
| 78457 | VENOUS THROMBOSIS IMAGING |
| 78458 | VEN THROMBOSIS IMAGES BILAT |
| 78466 | HEART INFARCT IMAGE |
| 78468 | HEART INFARCT IMAGE (EF) |
| 78469 | HEART INFARCT IMAGE (3D) |
| 78472 | GATED HEART PLANAR SINGLE |
| 78473 | GATED HEART MULTIPLE |
| 78481 | HEART FIRST PASS SINGLE |
| 78483 | HEART FIRST PASS MULTIPLE |
| 78494 | HEART IMAGE SPECT |
| 78496 | HEART FIRST PASS ADD-ON |
| 78579 | LUNG VENTILATION IMAGING |
| 78580 | LUNG PERFUSION IMAGING |
| 78582 | LUNG VENTILAT&PERFUS IMAGING |
| 78597 | LUNG PERFUSION DIFFERENTIAL |
| 78598 | LUNG PERF&VENTILAT DIFERENTL |
| 78600 | BRAIN IMAGE < 4 VIEWS |
| 78601 | BRAIN IMAGE W/FLOW < 4 VIEWS |
| 78605 | BRAIN IMAGE 4+ VIEWS |
| 78606 | BRAIN IMAGE W/FLOW 4 + VIEWS |
| 78610 | BRAIN FLOW IMAGING ONLY |
| 78630 | CEREBROSPINAL FLUID SCAN |
| 78635 | CSF VENTRICULOGRAPHY |
| 78645 | CSF SHUNT EVALUATION |
| 78650 | CSF LEAKAGE IMAGING |
| 78660 | NUCLEAR EXAM OF TEAR FLOW |
| 78700 | KIDNEY IMAGING MORPHOL |
| 78701 | KIDNEY IMAGING WITH FLOW |
| 78707 | K FLOW/FUNCT IMAGE W/O DRUG |
| 78708 | K FLOW/FUNCT IMAGE W/DRUG |
| 78709 | K FLOW/FUNCT IMAGE MULTIPLE |
| 78725 | KIDNEY FUNCTION STUDY |
| 78730 | URINARY BLADDER RETENTION |
| 78740 | URETERAL REFLUX STUDY |
| 78761 | TESTICULAR IMAGING W/FLOW |
| 78800 | RP LOCLZJ TUM 1 AREA 1 D IMG |
| 78801 | RP LOCLZJ TUM 2+AREA 1+D IMG |
| 78802 | RP LOCLZJ TUM WHBDY 1 D IMG |
| 78803 | RP LOCLZJ TUM SPECT 1 AREA |
| 78804 | RP LOCLZJ TUM WHBDY 2+D IMG |
| 78808 | IV INJ RA DRUG DX STUDY |
| 78835 | RP QUAN MEAS SINGLE AREA |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 79005 | NUCLEAR RX ORAL ADMIN |
| 79101 | NUCLEAR RX IV ADMIN |
| 79200 | NUCLEAR RX INTRACAV ADMIN |
| 79300 | NUCLR RX INTERSTIT COLLOID |
| 79403 | HEMATOPOIETIC NUCLEAR TX |
| 79440 | NUCLEAR RX INTRA-ARTICULAR |
| 79445 | NUCLEAR RX INTRA-ARTERIAL |
| 80047 | METABOLIC PANEL IONIZED CA |
| 80048 | METABOLIC PANEL TOTAL CA |
| 80050 | GENERAL HEALTH PANEL |
| 80051 | ELECTROLYTE PANEL |
| 80053 | COMPREHEN METABOLIC PANEL |
| 80055 | OBSTETRIC PANEL |
| 80061 | LIPID PANEL |
| 80069 | RENAL FUNCTION PANEL |
| 80074 | ACUTE HEPATITIS PANEL |
| 80076 | HEPATIC FUNCTION PANEL |
| 80081 | OBSTETRIC PANEL |
| 80143 | DRUG ASSAY ACETAMINOPHEN |
| 80145 | DRUG ASSAY ADALIMUMAB |
| 80150 | ASSAY OF AMIKACIN |
| 80151 | DRUG ASSAY AMIODARONE |
| 80155 | DRUG ASSAY CAFFEINE |
| 80156 | ASSAY CARBAMAZEPINE TOTAL |
| 80157 | ASSAY CARBAMAZEPINE FREE |
| 80158 | DRUG ASSAY CYCLOSPORINE |
| 80159 | DRUG ASSAY CLOZAPINE |
| 80161 | ASY CARBAMAZEPIN 10,11-EPXID |
| 80162 | ASSAY OF DIGOXIN TOTAL |
| 80163 | ASSAY OF DIGOXIN FREE |
| 80164 | ASSAY DIPROPYLACETIC ACD TOT |
| 80165 | DIPROPYLACETIC ACID FREE |
| 80167 | DRUG ASSAY FELBAMATE |
| 80168 | ASSAY OF ETHOSUXIMIDE |
| 80169 | DRUG ASSAY EVEROLIMUS |
| 80170 | ASSAY OF GENTAMICIN |
| 80171 | DRUG SCREEN QUANT GABAPENTIN |
| 80173 | ASSAY OF HALOPERIDOL |
| 80175 | DRUG SCREEN QUAN LAMOTRIGINE |
| 80176 | ASSAY OF LIDOCAINE |
| 80177 | DRUG SCRN QUAN LEVETIRACETAM |
| 80178 | ASSAY OF LITHIUM |
| 80179 | DRUG ASSAY SALICYLATE |
| 80180 | DRUG SCRN QUAN MYCOPHENOLATE |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 80181 | DRUG ASSAY FLECAINIDE |
| 80183 | DRUG SCRN QUANT OXCARBAZEPIN |
| 80184 | ASSAY OF PHENOBARBITAL |
| 80185 | ASSAY OF PHENYTOIN TOTAL |
| 80186 | ASSAY OF PHENYTOIN FREE |
| 80187 | DRUG ASSAY POSACONAZOLE |
| 80188 | ASSAY OF PRIMIDONE |
| 80189 | DRUG ASSAY ITRACONAZOLE |
| 80190 | ASSAY OF PROCAINAMIDE |
| 80192 | ASSAY OF PROCAINAMIDE |
| 80193 | DRUG ASSAY LEFLUNOMIDE |
| 80194 | ASSAY OF QUINIDINE |
| 80195 | ASSAY OF SIROLIMUS |
| 80197 | ASSAY OF TACROLIMUS |
| 80198 | ASSAY OF THEOPHYLLINE |
| 80199 | DRUG SCREEN QUANT TIAGABINE |
| 80200 | ASSAY OF TOBRAMYCIN |
| 80201 | ASSAY OF TOPIRAMATE |
| 80202 | ASSAY OF VANCOMYCIN |
| 80203 | DRUG SCREEN QUANT ZONISAMIDE |
| 80204 | DRUG ASSAY METHOTREXATE |
| 80210 | DRUG ASSAY RUFINAMIDE |
| 80230 | DRUG ASSAY INFLIXIMAB |
| 80235 | DRUG ASSAY LACOSAMIDE |
| 80280 | DRUG ASSAY VEDOLIZUMAB |
| 80285 | DRUG ASSAY VORICONAZOLE |
| 80299 | QUANTITATIVE ASSAY DRUG |
| 80305 | DRUG TEST PRSMV DIR OPT OBS |
| 80306 | DRUG TEST PRSMV INSTRMNT |
| 80307 | DRUG TEST PRSMV CHEM ANLYZR |
| 80320 | DRUG SCREEN QUANTALCOHOLS |
| 80321 | ALCOHOLS BIOMARKERS 1OR 2 |
| 80322 | ALCOHOLS BIOMARKERS 3/MORE |
| 80323 | ALKALOIDS NOS |
| 80324 | DRUG SCREEN AMPHETAMINES 1/2 |
| 80325 | AMPHETAMINES 3OR 4 |
| 80326 | AMPHETAMINES 5 OR MORE |
| 80327 | ANABOLIC STEROID 1 OR 2 |
| 80328 | ANABOLIC STEROID 3 OR MORE |
| 80329 | ANALGESICS NON-OPIOID 1 OR 2 |
| 80330 | ANALGESICS NON-OPIOID 3-5 |
| 80331 | ANALGESICS NON-OPIOID 6/MORE |
| 80332 | ANTIDEPRESSANTS CLASS 1 OR 2 |
| 80333 | ANTIDEPRESSANTS CLASS 3-5 |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 80334 | ANTIDEPRESSANTS CLASS 6/MORE |
| 80335 | ANTIDEPRESSANT TRICYCLIC 1/2 |
| 80336 | ANTIDEPRESSANT TRICYCLIC 3-5 |
| 80337 | TRICYCLIC & CYCLICALS 6/MORE |
| 80338 | ANTIDEPRESSANT NOT SPECIFIED |
| 80339 | ANTIEPILEPTICS NOS 1-3 |
| 80340 | ANTIEPILEPTICS NOS 4-6 |
| 80341 | ANTIEPILEPTICS NOS 7/MORE |
| 80342 | ANTIPSYCHOTICS NOS 1-3 |
| 80343 | ANTIPSYCHOTICS NOS 4-6 |
| 80344 | ANTIPSYCHOTICS NOS 7/MORE |
| 80345 | DRUG SCREENING BARBITURATES |
| 80346 | BENZODIAZEPINES1-12 |
| 80347 | BENZODIAZEPINES 13 OR MORE |
| 80348 | DRUG SCREENING BUPRENORPHINE |
| 80349 | CANNABINOIDS NATURAL |
| 80350 | CANNABINOIDS SYNTHETIC 1-3 |
| 80351 | CANNABINOIDS SYNTHETIC 4-6 |
| 80352 | CANNABINOID SYNTHETIC 7/MORE |
| 80353 | DRUG SCREENING COCAINE |
| 80354 | DRUG SCREENING FENTANYL |
| 80355 | GABAPENTIN NON-BLOOD |
| 80356 | HEROIN METABOLITE |
| 80357 | KETAMINE AND NORKETAMINE |
| 80358 | DRUG SCREENING METHADONE |
| 80359 | METHYLENEDIOXYAMPHETAMINES |
| 80360 | METHYLPHENIDATE |
| 80361 | OPIATES 1 OR MORE |
| 80362 | OPIOIDS & OPIATE ANALOGS 1/2 |
| 80363 | OPIOIDS & OPIATE ANALOGS 3/4 |
| 80364 | OPIOID &OPIATE ANALOG 5/MORE |
| 80365 | DRUG SCREENING OXYCODONE |
| 80366 | DRUG SCREENING PREGABALIN |
| 80367 | DRUG SCREENING PROPOXYPHENE |
| 80368 | SEDATIVE HYPNOTICS |
| 80369 | SKELETAL MUSCLE RELAXANT 1/2 |
| 80370 | SKEL MUSC RELAXANT 3 OR MORE |
| 80371 | STIMULANTS SYNTHETIC |
| 80372 | DRUG SCREENING TAPENTADOL |
| 80373 | DRUG SCREENING TRAMADOL |
| 80374 | STEREOISOMER ANALYSIS |
| 80375 | DRUG/SUBSTANCE NOS 1-3 |
| 80376 | DRUG/SUBSTANCE NOS 4-6 |
| 80377 | DRUG/SUBSTANCE NOS 7/MORE |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 80400 | ACTH STIMULATION PANEL |
| 80402 | ACTH STIMULATION PANEL |
| 80406 | ACTH STIMULATION PANEL |
| 80408 | ALDOSTERONE SUPPRESSION EVAL |
| 80410 | CALCITONIN STIMUL PANEL |
| 80412 | CRH STIMULATION PANEL |
| 80414 | TESTOSTERONE RESPONSE |
| 80415 | ESTRADIOL RESPONSE PANEL |
| 80416 | RENIN STIMULATION PANEL |
| 80417 | RENIN STIMULATION PANEL |
| 80418 | PITUITARY EVALUATION PANEL |
| 80420 | DEXAMETHASONE PANEL |
| 80422 | GLUCAGON TOLERANCE PANEL |
| 80424 | GLUCAGON TOLERANCE PANEL |
| 80426 | GONADOTROPIN HORMONE PANEL |
| 80428 | GROWTH HORMONE PANEL |
| 80430 | GROWTH HORMONE PANEL |
| 80432 | INSULIN SUPPRESSION PANEL |
| 80434 | INSULIN TOLERANCE PANEL |
| 80435 | INSULIN TOLERANCE PANEL |
| 80436 | METYRAPONE PANEL |
| 80438 | TRH STIMULATION PANEL |
| 80439 | TRH STIMULATION PANEL |
| 80500 | LAB PATHOLOGY CONSULTATION |
| 80502 | LAB PATHOLOGY CONSULTATION |
| 81000 | URINALYSIS NONAUTO W/SCOPE |
| 81001 | URINALYSIS AUTO W/SCOPE |
| 81002 | URINALYSIS NONAUTO W/O SCOPE |
| 81003 | URINALYSIS AUTO W/O SCOPE |
| 81005 | URINALYSIS |
| 81007 | URINE SCREEN FOR BACTERIA |
| 81015 | MICROSCOPIC EXAM OF URINE |
| 81020 | URINALYSIS GLASS TEST |
| 81025 | URINE PREGNANCY TEST |
| 81050 | URINALYSIS VOLUME MEASURE |
| 81381 | HLA I TYPING 1 ALLELE HR |
| 81511 | FTL CGEN ABNOR FOUR ANAL |
| 81513 | NFCT DS BV RNA VAG FLU ALG |
| 81514 | NFCT DS BV&VAGINITIS DNA ALG |
| 81528 | ONCOLOGY COLORECTAL SCREENING QUAN 10 DNA MARKRS |
| 81596 | NFCT DS CHRNC HCV 6 ASSAYS |
| 82009 | TEST FOR ACETONE/KETONES |
| 82010 | ACETONE ASSAY |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 82013 | ACETYLCHOLINESTERASE ASSAY |
| 82016 | ACYLCARNITINES QUAL |
| 82017 | ACYLCARNITINES QUANT |
| 82024 | ASSAY OF ACTH |
| 82030 | ASSAY OF ADP & AMP |
| 82040 | ASSAY OF SERUM ALBUMIN |
| 82042 | OTHER SOURCE ALBUMIN QUAN EA |
| 82043 | UR ALBUMIN QUANTITATIVE |
| 82044 | UR ALBUMIN SEMIQUANTITATIVE |
| 82045 | ALBUMIN ISCHEMIA MODIFIED |
| 82075 | ASSAY OF BREATH ETHANOL |
| 82077 | ASSAY SPEC XCP UR&BREATH IA |
| 82085 | ASSAY OF ALDOLASE |
| 82088 | ASSAY OF ALDOSTERONE |
| 82103 | ALPHA-1-ANTITRYPSIN TOTAL |
| 82104 | ALPHA-1-ANTITRYPSIN PHENO |
| 82105 | ALPHA-FETOPROTEIN SERUM |
| 82106 | ALPHA-FETOPROTEIN AMNIOTIC |
| 82107 | ALPHA-FETOPROTEIN L3 |
| 82108 | ASSAY OF ALUMINUM |
| 82120 | AMINES VAGINAL FLUID QUAL |
| 82127 | AMINO ACID SINGLE QUAL |
| 82128 | AMINO ACIDS MULT QUAL |
| 82131 | AMINO ACIDS SINGLE QUANT |
| 82135 | ASSAY AMINOLEVULINIC ACID |
| 82136 | AMINO ACIDS QUANT 2-5 |
| 82139 | AMINO ACIDS QUAN 6 OR MORE |
| 82140 | ASSAY OF AMMONIA |
| 82143 | AMNIOTIC FLUID SCAN |
| 82150 | ASSAY OF AMYLASE |
| 82154 | ANDROSTANEDIOL GLUCURONIDE |
| 82157 | ASSAY OF ANDROSTENEDIONE |
| 82160 | ASSAY OF ANDROSTERONE |
| 82163 | ASSAY OF ANGIOTENSIN II |
| 82164 | ANGIOTENSIN I ENZYME TEST |
| 82172 | ASSAY OF APOLIPOPROTEIN |
| 82175 | ASSAY OF ARSENIC |
| 82180 | ASSAY OF ASCORBIC ACID |
| 82190 | ATOMIC ABSORPTION |
| 82232 | ASSAY OF BETA-2 PROTEIN |
| 82239 | BILE ACIDS TOTAL |
| 82240 | BILE ACIDS CHOLYLGLYCINE |
| 82247 | BILIRUBIN TOTAL |
| 82248 | BILIRUBIN DIRECT |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 82252 | FECAL BILIRUBIN TEST |
| 82261 | ASSAY OF BIOTINIDASE |
| 82270 | OCCULT BLOOD FECES |
| 82271 | OCCULT BLOOD OTHER SOURCES |
| 82272 | OCCULT BLD FECES 1-3 TESTS |
| 82274 | ASSAY TEST FOR BLOOD FECAL |
| 82286 | ASSAY OF BRADYKININ |
| 82300 | ASSAY OF CADMIUM |
| 82306 | VITAMIN D 25 HYDROXY |
| 82308 | ASSAY OF CALCITONIN |
| 82310 | ASSAY OF CALCIUM |
| 82330 | ASSAY OF CALCIUM |
| 82331 | CALCIUM INFUSION TEST |
| 82340 | ASSAY OF CALCIUM IN URINE |
| 82355 | CALCULUS ANALYSIS QUAL |
| 82360 | CALCULUS ASSAY QUANT |
| 82365 | CALCULUS SPECTROSCOPY |
| 82370 | X-RAY ASSAY CALCULUS |
| 82373 | ASSAY C-D TRANSFER MEASURE |
| 82374 | ASSAY BLOOD CARBON DIOXIDE |
| 82375 | ASSAY CARBOXYHB QUANT |
| 82376 | ASSAY CARBOXYHB QUAL |
| 82378 | CARCINOEMBRYONIC ANTIGEN |
| 82379 | ASSAY OF CARNITINE |
| 82380 | ASSAY OF CAROTENE |
| 82382 | ASSAY URINE CATECHOLAMINES |
| 82383 | ASSAY BLOOD CATECHOLAMINES |
| 82384 | ASSAY THREE CATECHOLAMINES |
| 82387 | ASSAY OF CATHEPSIN-D |
| 82390 | ASSAY OF CERULOPLASMIN |
| 82397 | CHEMILUMINESCENT ASSAY |
| 82415 | ASSAY OF CHLORAMPHENICOL |
| 82435 | ASSAY OF BLOOD CHLORIDE |
| 82436 | ASSAY OF URINE CHLORIDE |
| 82438 | ASSAY OTHER FLUID CHLORIDES |
| 82441 | TEST FOR CHLOROHYDROCARBONS |
| 82465 | ASSAY BLD/SERUM CHOLESTEROL |
| 82480 | ASSAY SERUM CHOLINESTERASE |
| 82482 | ASSAY RBC CHOLINESTERASE |
| 82485 | ASSAY CHONDROITIN SULFATE |
| 82495 | ASSAY OF CHROMIUM |
| 82507 | ASSAY OF CITRATE |
| 82523 | COLLAGEN CROSSLINKS |
| 82525 | ASSAY OF COPPER |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 82528 | ASSAY OF CORTICOSTERONE |
| 82530 | CORTISOL FREE |
| 82533 | TOTAL CORTISOL |
| 82540 | ASSAY OF CREATINE |
| 82542 | COL CHROMOTOGRAPHY QUAL/QUAN |
| 82550 | ASSAY OF CK (CPK) |
| 82552 | ASSAY OF CPK IN BLOOD |
| 82553 | CREATINE MB FRACTION |
| 82554 | CREATINE ISOFORMS |
| 82565 | ASSAY OF CREATININE |
| 82570 | ASSAY OF URINE CREATININE |
| 82575 | CREATININE CLEARANCE TEST |
| 82585 | ASSAY OF CRYOFIBRINOGEN |
| 82595 | ASSAY OF CRYOGLOBULIN |
| 82600 | ASSAY OF CYANIDE |
| 82607 | VITAMIN B-12 |
| 82608 | B-12 BINDING CAPACITY |
| 82610 | CYSTATIN C |
| 82615 | TEST FOR URINE CYSTINES |
| 82626 | DEHYDROEPIANDROSTERONE |
| 82627 | DEHYDROEPIANDROSTERONE |
| 82633 | DESOXYCORTICOSTERONE |
| 82634 | DEOXYCORTISOL |
| 82638 | ASSAY OF DIBUCAINE NUMBER |
| 82642 | DIHYDROTESTOSTERONE |
| 82652 | VIT D 1 25-DIHYDROXY |
| 82656 | PANCREATIC ELASTASE FECAL |
| 82657 | ENZYME CELL ACTIVITY |
| 82658 | ENZYME CELL ACTIVITY RA |
| 82664 | ELECTROPHORETIC TEST |
| 82668 | ASSAY OF ERYTHROPOIETIN |
| 82670 | ASSAY OF ESTRADIOL |
| 82671 | ASSAY OF ESTROGENS |
| 82672 | ASSAY OF ESTROGEN |
| 82677 | ASSAY OF ESTRIOL |
| 82679 | ASSAY OF ESTRONE |
| 82681 | ASSAY DIR MEAS FR ESTRADIOL |
| 82693 | ASSAY OF ETHYLENE GLYCOL |
| 82696 | ASSAY OF ETIOCHOLANOLONE |
| 82705 | FATS/LIPIDS FECES QUAL |
| 82710 | FATS/LIPIDS FECES QUANT |
| 82715 | ASSAY OF FECAL FAT |
| 82725 | ASSAY OF BLOOD FATTY ACIDS |
| 82726 | LONG CHAIN FATTY ACIDS |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 82728 | ASSAY OF FERRITIN |
| 82731 | ASSAY OF FETAL FIBRONECTIN |
| 82735 | ASSAY OF FLUORIDE |
| 82746 | ASSAY OF FOLIC ACID SERUM |
| 82747 | ASSAY OF FOLIC ACID RBC |
| 82757 | ASSAY OF SEMEN FRUCTOSE |
| 82759 | ASSAY OF RBC GALACTOKINASE |
| 82760 | ASSAY OF GALACTOSE |
| 82775 | ASSAY GALACTOSE TRANSFERASE |
| 82776 | GALACTOSE TRANSFERASE TEST |
| 82777 | GALECTIN-3 |
| 82784 | ASSAY IGA/IGD/IGG/IGM EACH |
| 82785 | ASSAY OF IGE |
| 82787 | IGG 1 2 3 OR 4 EACH |
| 82800 | BLOOD PH |
| 82803 | BLOOD GASES ANY COMBINATION |
| 82805 | BLOOD GASES W/O2 SATURATION |
| 82810 | BLOOD GASES O2 SAT ONLY |
| 82820 | HEMOGLOBIN-OXYGEN AFFINITY |
| 82930 | GASTRIC ANALY W/PH EA SPEC |
| 82938 | GASTRIN TEST |
| 82941 | ASSAY OF GASTRIN |
| 82943 | ASSAY OF GLUCAGON |
| 82945 | GLUCOSE OTHER FLUID |
| 82946 | GLUCAGON TOLERANCE TEST |
| 82947 | ASSAY GLUCOSE BLOOD QUANT |
| 82948 | REAGENT STRIP/BLOOD GLUCOSE |
| 82950 | GLUCOSE TEST |
| 82951 | GLUCOSE TOLERANCE TEST (GTT) |
| 82952 | GTT-ADDED SAMPLES |
| 82955 | ASSAY OF G6PD ENZYME |
| 82960 | TEST FOR G6PD ENZYME |
| 82962 | GLUCOSE BLOOD TEST |
| 82963 | ASSAY OF GLUCOSIDASE |
| 82965 | ASSAY OF GDH ENZYME |
| 82977 | ASSAY OF GGT |
| 82978 | ASSAY OF GLUTATHIONE |
| 82979 | ASSAY RBC GLUTATHIONE |
| 82985 | ASSAY OF GLYCATED PROTEIN |
| 83001 | ASSAY OF GONADOTROPIN (FSH) - "Not covered for purposes of fertility/infertility testing or treatment" |
| 83002 | ASSAY OF GONADOTROPIN (LH) "Not covered for purposes of fertility/infertility testing or treatment" |
| 83003 | ASSAY GROWTH HORMONE (HGH) |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 83009 | H PYLORI (C-13) BLOOD |
| 83010 | ASSAY OF HAPTOGLOBIN QUANT |
| 83012 | ASSAY OF HAPTOGLOBINS |
| 83013 | H PYLORI (C-13) BREATH |
| 83014 | H PYLORI DRUG ADMIN |
| 83015 | HEAVY METAL QUAL ANY ANAL |
| 83018 | HEAVY METAL QUANT EACH NES |
| 83020 | HEMOGLOBIN ELECTROPHORESIS |
| 83021 | HEMOGLOBIN CHROMOTOGRAPHY |
| 83026 | HEMOGLOBIN COPPER SULFATE |
| 83030 | FETAL HEMOGLOBIN CHEMICAL |
| 83033 | FETAL HEMOGLOBIN ASSAY QUAL |
| 83036 | GLYCOSYLATED HEMOGLOBIN TEST |
| 83045 | BLOOD METHEMOGLOBIN TEST |
| 83050 | BLOOD METHEMOGLOBIN ASSAY |
| 83051 | ASSAY OF PLASMA HEMOGLOBIN |
| 83060 | BLOOD SULFHEMOGLOBIN ASSAY |
| 83065 | ASSAY OF HEMOGLOBIN HEAT |
| 83068 | HEMOGLOBIN STABILITY SCREEN |
| 83069 | ASSAY OF URINE HEMOGLOBIN |
| 83070 | ASSAY OF HEMOSIDERIN QUAL |
| 83080 | ASSAY OF B HEXOSAMINIDASE |
| 83088 | ASSAY OF HISTAMINE |
| 83090 | ASSAY OF HOMOCYSTINE |
| 83150 | ASSAY OF HOMOVANILLIC ACID |
| 83491 | ASSAY OF CORTICOSTEROIDS 17 |
| 83497 | ASSAY OF 5-HIAA |
| 83498 | ASSAY OF PROGESTERONE 17-D |
| 83500 | ASSAY FREE HYDROXYPROLINE |
| 83505 | ASSAY TOTAL HYDROXYPROLINE |
| 83516 | IMMUNOASSAY NONANTIBODY |
| 83518 | IMMUNOASSAY DIPSTICK |
| 83519 | RIA NONANTIBODY |
| 83520 | IMMUNOASSAY QUANT NOS NONAB |
| 83525 | ASSAY OF INSULIN |
| 83527 | ASSAY OF INSULIN |
| 83528 | ASSAY OF INTRINSIC FACTOR |
| 83540 | ASSAY OF IRON |
| 83550 | IRON BINDING TEST |
| 83570 | ASSAY OF IDH ENZYME |
| 83582 | ASSAY OF KETOGENIC STEROIDS |
| 83586 | ASSAY 17- KETOSTEROIDS |
| 83593 | FRACTIONATION KETOSTEROIDS |
| 83605 | ASSAY OF LACTIC ACID |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 83615 | LACTATE (LD) (LDH) ENZYME |
| 83625 | ASSAY OF LDH ENZYMES |
| 83630 | LACTOFERRIN FECAL (QUAL) |
| 83631 | LACTOFERRIN FECAL (QUANT) |
| 83632 | PLACENTAL LACTOGEN |
| 83633 | TEST URINE FOR LACTOSE |
| 83655 | ASSAY OF LEAD |
| 83661 | L/S RATIO FETAL LUNG |
| 83662 | FOAM STABILITY FETAL LUNG |
| 83663 | FLUORO POLARIZE FETAL LUNG |
| 83664 | LAMELLAR BDY FETAL LUNG |
| 83670 | ASSAY OF LAP ENZYME |
| 83690 | ASSAY OF LIPASE |
| 83695 | ASSAY OF LIPOPROTEIN(A) |
| 83700 | LIPOPRO BLD ELECTROPHORETIC |
| 83701 | LIPOPROTEIN BLD HR FRACTION |
| 83704 | LIPOPROTEIN BLD QUAN PART |
| 83718 | ASSAY OF LIPOPROTEIN |
| 83719 | ASSAY OF BLOOD LIPOPROTEIN |
| 83721 | ASSAY OF BLOOD LIPOPROTEIN |
| 83722 | LIPOPRTN DIR MEAS SD LDL CHL |
| 83727 | ASSAY OF LRH HORMONE |
| 83735 | ASSAY OF MAGNESIUM |
| 83775 | ASSAY MALATE DEHYDROGENASE |
| 83785 | ASSAY OF MANGANESE |
| 83789 | MASS SPECTROMETRY QUAL/QUAN |
| 83825 | ASSAY OF MERCURY |
| 83835 | ASSAY OF METANEPHRINES |
| 83857 | ASSAY OF METHEMALBUMIN |
| 83861 | MICROFLUID ANALY TEARS |
| 83864 | MUCOPOLYSACCHARIDES |
| 83872 | ASSAY SYNOVIAL FLUID MUCIN |
| 83873 | ASSAY OF CSF PROTEIN |
| 83874 | ASSAY OF MYOGLOBIN |
| 83880 | ASSAY OF NATRIURETIC PEPTIDE |
| 83883 | ASSAY NEPHELOMETRY NOT SPEC |
| 83885 | ASSAY OF NICKEL |
| 83915 | ASSAY OF NUCLEOTIDASE |
| 83916 | OLIGOCLONAL BANDS |
| 83918 | ORGANIC ACIDS TOTAL QUANT |
| 83919 | ORGANIC ACIDS QUAL EACH |
| 83921 | ORGANIC ACID SINGLE QUANT |
| 83930 | ASSAY OF BLOOD OSMOLALITY |
| 83935 | ASSAY OF URINE OSMOLALITY |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 83937 | ASSAY OF OSTEOCALCIN |
| 83945 | ASSAY OF OXALATE |
| 83950 | ONCOPROTEIN HER-2/NEU |
| 83951 | ONCOPROTEIN DCP |
| 83970 | ASSAY OF PARATHORMONE |
| 83986 | ASSAY PH BODY FLUID NOS |
| 83987 | EXHALED BREATH CONDENSATE |
| 83992 | ASSAY FOR PHENCYCLIDINE |
| 83993 | ASSAY FOR CALPROTECTIN FECAL |
| 84030 | ASSAY OF BLOOD PKU |
| 84035 | ASSAY OF PHENYLKETONES |
| 84060 | ASSAY ACID PHOSPHATASE |
| 84066 | ASSAY PROSTATE PHOSPHATASE |
| 84075 | ASSAY ALKALINE PHOSPHATASE |
| 84078 | ASSAY ALKALINE PHOSPHATASE |
| 84080 | ASSAY ALKALINE PHOSPHATASES |
| 84081 | ASSAY PHOSPHATIDYLGLYCEROL |
| 84085 | ASSAY OF RBC PG6D ENZYME |
| 84087 | ASSAY PHOSPHOHEXOSE ENZYMES |
| 84100 | ASSAY OF PHOSPHORUS |
| 84105 | ASSAY OF URINE PHOSPHORUS |
| 84106 | TEST FOR PORPHOBILINOGEN |
| 84110 | ASSAY OF PORPHOBILINOGEN |
| 84112 | EVAL AMNIOTIC FLUID PROTEIN |
| 84119 | TEST URINE FOR PORPHYRINS |
| 84120 | ASSAY OF URINE PORPHYRINS |
| 84126 | ASSAY OF FECES PORPHYRINS |
| 84132 | ASSAY OF SERUM POTASSIUM |
| 84133 | ASSAY OF URINE POTASSIUM |
| 84134 | ASSAY OF PREALBUMIN |
| 84135 | ASSAY OF PREGNANEDIOL |
| 84138 | ASSAY OF PREGNANETRIOL |
| 84140 | ASSAY OF PREGNENOLONE |
| 84143 | ASSAY OF 17-HYDROXYPREGNENO |
| 84144 | ASSAY OF PROGESTERONE |
| 84145 | PROCALCITONIN (PCT) |
| 84146 | ASSAY OF PROLACTIN |
| 84150 | ASSAY OF PROSTAGLANDIN |
| 84152 | ASSAY OF PSA COMPLEXED |
| 84153 | ASSAY OF PSA TOTAL |
| 84154 | ASSAY OF PSA FREE |
| 84155 | ASSAY OF PROTEIN SERUM |
| 84156 | ASSAY OF PROTEIN URINE |
| 84157 | ASSAY OF PROTEIN OTHER |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 84160 | ASSAY OF PROTEIN ANY SOURCE |
| 84163 | PAPPA SERUM |
| 84165 | PROTEIN E-PHORESIS SERUM |
| 84166 | PROTEIN E-PHORESIS/URINE/CSF |
| 84181 | WESTERN BLOT TEST |
| 84182 | PROTEIN WESTERN BLOT TEST |
| 84202 | ASSAY RBC PROTOPORPHYRIN |
| 84203 | TEST RBC PROTOPORPHYRIN |
| 84206 | ASSAY OF PROINSULIN |
| 84207 | ASSAY OF VITAMIN B-6 |
| 84210 | ASSAY OF PYRUVATE |
| 84220 | ASSAY OF PYRUVATE KINASE |
| 84228 | ASSAY OF QUININE |
| 84233 | ASSAY OF ESTROGEN |
| 84234 | ASSAY OF PROGESTERONE |
| 84235 | ASSAY OF ENDOCRINE HORMONE |
| 84238 | ASSAY NONENDOCRINE RECEPTOR |
| 84244 | ASSAY OF RENIN |
| 84252 | ASSAY OF VITAMIN B-2 |
| 84255 | ASSAY OF SELENIUM |
| 84260 | ASSAY OF SEROTONIN |
| 84270 | ASSAY OF SEX HORMONE GLOBUL |
| 84275 | ASSAY OF SIALIC ACID |
| 84285 | ASSAY OF SILICA |
| 84295 | ASSAY OF SERUM SODIUM |
| 84300 | ASSAY OF URINE SODIUM |
| 84302 | ASSAY OF SWEAT SODIUM |
| 84305 | ASSAY OF SOMATOMEDIN |
| 84307 | ASSAY OF SOMATOSTATIN |
| 84311 | SPECTROPHOTOMETRY |
| 84315 | BODY FLUID SPECIFIC GRAVITY |
| 84375 | CHROMATOGRAM ASSAY SUGARS |
| 84376 | SUGARS SINGLE QUAL |
| 84377 | SUGARS MULTIPLE QUAL |
| 84378 | SUGARS SINGLE QUANT |
| 84379 | SUGARS MULTIPLE QUANT |
| 84392 | ASSAY OF URINE SULFATE |
| 84402 | ASSAY OF FREE TESTOSTERONE |
| 84403 | ASSAY OF TOTAL TESTOSTERONE |
| 84410 | TESTOSTERONE BIOAVAILABLE |
| 84425 | ASSAY OF VITAMIN B-1 |
| 84430 | ASSAY OF THIOCYANATE |
| 84431 | THROMBOXANE URINE |
| 84432 | ASSAY OF THYROGLOBULIN |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 84436 | ASSAY OF TOTAL THYROXINE |
| 84437 | ASSAY OF NEONATAL THYROXINE |
| 84439 | ASSAY OF FREE THYROXINE |
| 84442 | ASSAY OF THYROID ACTIVITY |
| 84443 | ASSAY THYROID STIM HORMONE |
| 84445 | ASSAY OF TSI GLOBULIN |
| 84446 | ASSAY OF VITAMIN E |
| 84449 | ASSAY OF TRANSCORTIN |
| 84450 | TRANSFERASE (AST) (SGOT) |
| 84460 | ALANINE AMINO (ALT) (SGPT) |
| 84466 | ASSAY OF TRANSFERRIN |
| 84478 | ASSAY OF TRIGLYCERIDES |
| 84479 | ASSAY OF THYROID (T3 OR T4) |
| 84480 | ASSAY TRIIODOTHYRONINE (T3) |
| 84481 | FREE ASSAY (FT-3) |
| 84482 | T3 REVERSE |
| 84484 | ASSAY OF TROPONIN QUANT |
| 84485 | ASSAY DUODENAL FLUID TRYPSIN |
| 84488 | TEST FECES FOR TRYPSIN |
| 84490 | ASSAY OF FECES FOR TRYPSIN |
| 84510 | ASSAY OF TYROSINE |
| 84512 | ASSAY OF TROPONIN QUAL |
| 84520 | ASSAY OF UREA NITROGEN |
| 84525 | UREA NITROGEN SEMI-QUANT |
| 84540 | ASSAY OF URINE/UREA-N |
| 84545 | UREA-N CLEARANCE TEST |
| 84550 | ASSAY OF BLOOD/URIC ACID |
| 84560 | ASSAY OF URINE/URIC ACID |
| 84577 | ASSAY OF FECES/UROBILINOGEN |
| 84578 | TEST URINE UROBILINOGEN |
| 84580 | ASSAY OF URINE UROBILINOGEN |
| 84583 | ASSAY OF URINE UROBILINOGEN |
| 84585 | ASSAY OF URINE VMA |
| 84586 | ASSAY OF VIP |
| 84588 | ASSAY OF VASOPRESSIN |
| 84590 | ASSAY OF VITAMIN A |
| 84591 | ASSAY OF NOS VITAMIN |
| 84597 | ASSAY OF VITAMIN K |
| 84600 | ASSAY OF VOLATILES |
| 84620 | XYLOSE TOLERANCE TEST |
| 84630 | ASSAY OF ZINC |
| 84681 | ASSAY OF C-PEPTIDE |
| 84702 | CHORIONIC GONADOTROPIN TEST |
| 84703 | CHORIONIC GONADOTROPIN ASSAY |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 84704 | HCG FREE BETACHAIN TEST |
| 84830 | OVULATION TESTS |
| 85002 | BLEEDING TIME TEST |
| 85004 | AUTOMATED DIFF WBC COUNT |
| 85007 | BL SMEAR W/DIFF WBC COUNT |
| 85008 | BL SMEAR W/O DIFF WBC COUNT |
| 85009 | MANUAL DIFF WBC COUNT B-COAT |
| 85013 | SPUN MICROHEMATOCRIT |
| 85014 | HEMATOCRIT |
| 85018 | HEMOGLOBIN |
| 85025 | COMPLETE CBC W/AUTO DIFF WBC |
| 85027 | COMPLETE CBC AUTOMATED |
| 85032 | MANUAL CELL COUNT EACH |
| 85041 | AUTOMATED RBC COUNT |
| 85044 | MANUAL RETICULOCYTE COUNT |
| 85045 | AUTOMATED RETICULOCYTE COUNT |
| 85046 | RETICYTE/HGB CONCENTRATE |
| 85048 | AUTOMATED LEUKOCYTE COUNT |
| 85049 | AUTOMATED PLATELET COUNT |
| 85055 | RETICULATED PLATELET ASSAY |
| 85060 | BLOOD SMEAR INTERPRETATION |
| 85097 | BONE MARROW INTERPRETATION |
| 85130 | CHROMOGENIC SUBSTRATE ASSAY |
| 85170 | BLOOD CLOT RETRACTION |
| 85175 | BLOOD CLOT LYSIS TIME |
| 85210 | CLOT FACTOR II PROTHROM SPEC |
| 85220 | BLOOC CLOT FACTOR V TEST |
| 85230 | CLOT FACTOR VII PROCONVERTIN |
| 85240 | CLOT FACTOR VIII AHG 1 STAGE |
| 85244 | CLOT FACTOR VIII RELTD ANTGN |
| 85245 | CLOT FACTOR VIII VW RISTOCTN |
| 85246 | CLOT FACTOR VIII VW ANTIGEN |
| 85247 | CLOT FACTOR VIII MULTIMETRIC |
| 85250 | CLOT FACTOR IX PTC/CHRSTMAS |
| 85260 | CLOT FACTOR X STUART-POWER |
| 85270 | CLOT FACTOR XI PTA |
| 85280 | CLOT FACTOR XII HAGEMAN |
| 85290 | CLOT FACTOR XIII FIBRIN STAB |
| 85291 | CLOT FACTOR XIII FIBRIN SCRN |
| 85292 | CLOT FACTOR FLETCHER FACT |
| 85293 | CLOT FACTOR WGHT KININOGEN |
| 85300 | ANTITHROMBIN III ACTIVITY |
| 85301 | ANTITHROMBIN III ANTIGEN |
| 85302 | CLOT INHIBIT PROT C ANTIGEN |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 85303 | CLOT INHIBIT PROT C ACTIVITY |
| 85305 | CLOT INHIBIT PROT S TOTAL |
| 85306 | CLOT INHIBIT PROT S FREE |
| 85307 | ASSAY ACTIVATED PROTEIN C |
| 85335 | FACTOR INHIBITOR TEST |
| 85337 | THROMBOMODULIN |
| 85345 | COAGULATION TIME LEE & WHITE |
| 85347 | COAGULATION TIME ACTIVATED |
| 85348 | COAGULATION TIME OTR METHOD |
| 85360 | EUGLOBULIN LYSIS |
| 85362 | FIBRIN DEGRADATION PRODUCTS |
| 85366 | FIBRINOGEN TEST |
| 85370 | FIBRINOGEN TEST |
| 85378 | FIBRIN DEGRADE SEMIQUANT |
| 85379 | FIBRIN DEGRADATION QUANT |
| 85380 | FIBRIN DEGRADJ D-DIMER |
| 85384 | FIBRINOGEN ACTIVITY |
| 85385 | FIBRINOGEN ANTIGEN |
| 85390 | FIBRINOLYSINS SCREEN I&R |
| 85396 | CLOTTING ASSAY WHOLE BLOOD |
| 85397 | CLOTTING FUNCT ACTIVITY |
| 85400 | FIBRINOLYTIC PLASMIN |
| 85410 | FIBRINOLYTIC ANTIPLASMIN |
| 85415 | FIBRINOLYTIC PLASMINOGEN |
| 85420 | FIBRINOLYTIC PLASMINOGEN |
| 85421 | FIBRINOLYTIC PLASMINOGEN |
| 85441 | HEINZ BODIES DIRECT |
| 85445 | HEINZ BODIES INDUCED |
| 85460 | HEMOGLOBIN FETAL |
| 85461 | HEMOGLOBIN FETAL |
| 85475 | HEMOLYSIN ACID |
| 85520 | HEPARIN ASSAY |
| 85525 | HEPARIN NEUTRALIZATION |
| 85530 | HEPARIN-PROTAMINE TOLERANCE |
| 85536 | IRON STAIN PERIPHERAL BLOOD |
| 85540 | WBC ALKALINE PHOSPHATASE |
| 85547 | RBC MECHANICAL FRAGILITY |
| 85549 | MURAMIDASE |
| 85555 | RBC OSMOTIC FRAGILITY |
| 85557 | RBC OSMOTIC FRAGILITY |
| 85576 | BLOOD PLATELET AGGREGATION |
| 85597 | PHOSPHOLIPID PLTLT NEUTRALIZ |
| 85598 | HEXAGNAL PHOSPH PLTLT NEUTRL |
| 85610 | PROTHROMBIN TIME |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 85611 | PROTHROMBIN TEST |
| 85612 | VIPER VENOM PROTHROMBIN TIME |
| 85613 | RUSSELL VIPER VENOM DILUTED |
| 85635 | REPTILASE TEST |
| 85651 | RBC SED RATE NONAUTOMATED |
| 85652 | RBC SED RATE AUTOMATED |
| 85660 | RBC SICKLE CELL TEST |
| 85670 | THROMBIN TIME PLASMA |
| 85675 | THROMBIN TIME TITER |
| 85705 | THROMBOPLASTIN INHIBITION |
| 85730 | THROMBOPLASTIN TIME PARTIAL |
| 85732 | THROMBOPLASTIN TIME PARTIAL |
| 85810 | BLOOD VISCOSITY EXAMINATION |
| 86000 | AGGLUTININS FEBRILE ANTIGEN |
| 86001 | ALLERGEN SPECIFIC IGG |
| 86003 | ALLG SPEC IGE CRUDE XTRC EA |
| 86005 | ALLG SPEC IGE MULTIALLG SCR |
| 86008 | ALLG SPEC IGE RECOMB EA |
| 86021 | WBC ANTIBODY IDENTIFICATION |
| 86022 | PLATELET ANTIBODIES |
| 86023 | IMMUNOGLOBULIN ASSAY |
| 86038 | ANTINUCLEAR ANTIBODIES |
| 86039 | ANTINUCLEAR ANTIBODIES (ANA) |
| 86060 | ANTISTREPTOLYSIN O TITER |
| 86063 | ANTISTREPTOLYSIN O SCREEN |
| 86077 | PHYS BLOOD BANK SERV XMATCH |
| 86078 | PHYS BLOOD BANK SERV REACTJ |
| 86079 | PHYS BLOOD BANK SERV AUTHRJ |
| 86140 | C-REACTIVE PROTEIN |
| 86141 | C-REACTIVE PROTEIN HS |
| 86146 | BETA-2 GLYCOPROTEIN ANTIBODY |
| 86147 | CARDIOLIPIN ANTIBODY EA IG |
| 86148 | ANTI-PHOSPHOLIPID ANTIBODY |
| 86152 | CELL ENUMERATION & ID |
| 86153 | CELL ENUMERATION PHYS INTERP |
| 86155 | CHEMOTAXIS ASSAY |
| 86156 | COLD AGGLUTININ SCREEN |
| 86157 | COLD AGGLUTININ TITER |
| 86160 | COMPLEMENT ANTIGEN |
| 86161 | COMPLEMENT/FUNCTION ACTIVITY |
| 86162 | COMPLEMENT TOTAL (CH50) |
| 86171 | COMPLEMENT FIXATION EACH |
| 86200 | CCP ANTIBODY |
| 86215 | DEOXYRIBONUCLEASE ANTIBODY |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 86225 | DNA ANTIBODY NATIVE |
| 86226 | DNA ANTIBODY SINGLE STRAND |
| 86235 | NUCLEAR ANTIGEN ANTIBODY |
| 86255 | FLUORESCENT ANTIBODY SCREEN |
| 86256 | FLUORESCENT ANTIBODY TITER |
| 86277 | GROWTH HORMONE ANTIBODY |
| 86280 | HEMAGGLUTINATION INHIBITION |
| 86294 | IMMUNOASSAY TUMOR QUAL |
| 86300 | IMMUNOASSAY TUMOR CA 15-3 |
| 86301 | IMMUNOASSAY TUMOR CA 19-9 |
| 86304 | IMMUNOASSAY TUMOR CA 125 |
| 86305 | HUMAN EPIDIDYMIS PROTEIN 4 |
| 86308 | HETEROPHILE ANTIBODY SCREEN |
| 86309 | HETEROPHILE ANTIBODY TITER |
| 86310 | HETEROPHILE ANTIBODY ABSRBJ |
| 86316 | IMMUNOASSAY TUMOR OTHER |
| 86317 | IMMUNOASSAY INFECTIOUS AGENT |
| 86318 | IMMUNOASSAY INFECTIOUS AGENT |
| 86320 | SERUM IMMUNOELECTROPHORESIS |
| 86325 | OTHER IMMUNOELECTROPHORESIS |
| 86327 | IMMUNOELECTROPHORESIS ASSAY |
| 86329 | IMMUNODIFFUSION NES |
| 86331 | IMMUNODIFFUSION OUCHTERLONY |
| 86332 | IMMUNE COMPLEX ASSAY |
| 86334 | IMMUNOFIX E-PHORESIS SERUM |
| 86335 | IMMUNFIX E-PHORSIS/URINE/CSF |
| 86336 | INHIBIN A |
| 86337 | INSULIN ANTIBODIES |
| 86340 | INTRINSIC FACTOR ANTIBODY |
| 86341 | ISLET CELL ANTIBODY |
| 86343 | LEUKOCYTE HISTAMINE RELEASE |
| 86344 | LEUKOCYTE PHAGOCYTOSIS |
| 86352 | CELL FUNCTION ASSAY W/STIM |
| 86353 | LYMPHOCYTE TRANSFORMATION |
| 86355 | B CELLS TOTAL COUNT |
| 86356 | MONONUCLEAR CELL ANTIGEN |
| 86357 | NK CELLS TOTAL COUNT |
| 86359 | T CELLS TOTAL COUNT |
| 86360 | T CELL ABSOLUTE COUNT/RATIO |
| 86361 | T CELL ABSOLUTE COUNT |
| 86367 | STEM CELLS TOTAL COUNT |
| 86376 | MICROSOMAL ANTIBODY EACH |
| 86382 | NEUTRALIZATION TEST VIRAL |
| 86384 | NITROBLUE TETRAZOLIUM DYE |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 86386 | NUCLEAR MATRIX PROTEIN 22 |
| 86403 | PARTICLE AGGLUT ANTBDY SCRN |
| 86406 | PARTICLE AGGLUT ANTBDY TITR |
| 86430 | RHEUMATOID FACTOR TEST QUAL |
| 86431 | RHEUMATOID FACTOR QUANT |
| 86480 | TB TEST CELL IMMUN MEASURE |
| 86481 | TB AG RESPONSE T-CELL SUSP |
| 86485 | SKIN TEST CANDIDA |
| 86486 | SKIN TEST NOS ANTIGEN |
| 86490 | COCCIDIOIDOMYCOSIS SKIN TEST |
| 86510 | HISTOPLASMOSIS SKIN TEST |
| 86580 | TB INTRADERMAL TEST |
| 86590 | STREPTOKINASE ANTIBODY |
| 86592 | SYPHILIS TEST NON-TREP QUAL |
| 86593 | SYPHILIS TEST NON-TREP QUANT |
| 86602 | ANTINOMYCES ANTIBODY |
| 86603 | ADENOVIRUS ANTIBODY |
| 86606 | ASPERGILLUS ANTIBODY |
| 86609 | BACTERIUM ANTIBODY |
| 86611 | BARTONELLA ANTIBODY |
| 86612 | BLASTOMYCES ANTIBODY |
| 86615 | BORDETELLA ANTIBODY |
| 86617 | LYME DISEASE ANTIBODY |
| 86618 | LYME DISEASE ANTIBODY |
| 86619 | BORRELIA ANTIBODY |
| 86622 | BRUCELLA ANTIBODY |
| 86625 | CAMPYLOBACTER ANTIBODY |
| 86628 | CANDIDA ANTIBODY |
| 86631 | CHLAMYDIA ANTIBODY |
| 86632 | CHLAMYDIA IGM ANTIBODY |
| 86635 | COCCIDIOIDES ANTIBODY |
| 86638 | Q FEVER ANTIBODY |
| 86641 | CRYPTOCOCCUS ANTIBODY |
| 86644 | CMV ANTIBODY |
| 86645 | CMV ANTIBODY IGM |
| 86648 | DIPHTHERIA ANTIBODY |
| 86651 | ENCEPHALITIS CALIFORN ANTBDY |
| 86652 | ENCEPHALTIS EAST EQNE ANBDY |
| 86653 | ENCEPHALTIS ST LOUIS ANTBODY |
| 86654 | ENCEPHALTIS WEST EQNE ANTBDY |
| 86658 | ENTEROVIRUS ANTIBODY |
| 86663 | EPSTEIN-BARR ANTIBODY |
| 86664 | EPSTEIN-BARR NUCLEAR ANTIGEN |
| 86665 | EPSTEIN-BARR CAPSID VCA |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 86666 | EHRLICHIA ANTIBODY |
| 86668 | FRANCISELLA TULARENSIS |
| 86671 | FUNGUS NES ANTIBODY |
| 86674 | GIARDIA LAMBLIA ANTIBODY |
| 86677 | HELICOBACTER PYLORI ANTIBODY |
| 86682 | HELMINTH ANTIBODY |
| 86684 | HEMOPHILUS INFLUENZA ANTIBDY |
| 86687 | HTLV-I ANTIBODY |
| 86688 | HTLV-II ANTIBODY |
| 86689 | HTLV/HIV CONFIRMJ ANTIBODY |
| 86692 | HEPATITIS DELTA AGENT ANTBDY |
| 86694 | HERPES SIMPLEX NES ANTBDY |
| 86695 | HERPES SIMPLEX TYPE 1 TEST |
| 86696 | HERPES SIMPLEX TYPE 2 TEST |
| 86698 | HISTOPLASMA ANTIBODY |
| 86701 | HIV-1ANTIBODY |
| 86702 | HIV-2 ANTIBODY |
| 86703 | HIV-1/HIV-2 1 RESULT ANTBDY |
| 86704 | HEP B CORE ANTIBODY TOTAL |
| 86705 | HEP B CORE ANTIBODY IGM |
| 86706 | HEP B SURFACE ANTIBODY |
| 86707 | HEPATITIS BE ANTIBODY |
| 86708 | HEPATITIS A ANTIBODY |
| 86709 | HEPATITIS A IGM ANTIBODY |
| 86710 | INFLUENZA VIRUS ANTIBODY |
| 86711 | JOHN CUNNINGHAM ANTIBODY |
| 86713 | LEGIONELLA ANTIBODY |
| 86717 | LEISHMANIA ANTIBODY |
| 86720 | LEPTOSPIRA ANTIBODY |
| 86723 | LISTERIA MONOCYTOGENES |
| 86727 | LYMPH CHORIOMENINGITIS AB |
| 86732 | MUCORMYCOSIS ANTIBODY |
| 86735 | MUMPS ANTIBODY |
| 86738 | MYCOPLASMA ANTIBODY |
| 86741 | NEISSERIA MENINGITIDIS |
| 86744 | NOCARDIA ANTIBODY |
| 86747 | PARVOVIRUS ANTIBODY |
| 86750 | MALARIA ANTIBODY |
| 86753 | PROTOZOA ANTIBODY NOS |
| 86756 | RESPIRATORY VIRUS ANTIBODY |
| 86757 | RICKETTSIA ANTIBODY |
| 86759 | ROTAVIRUS ANTIBODY |
| 86762 | RUBELLA ANTIBODY |
| 86765 | RUBEOLA ANTIBODY |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 86768 | SALMONELLA ANTIBODY |
| 86771 | SHIGELLA ANTIBODY |
| 86774 | TETANUS ANTIBODY |
| 86777 | TOXOPLASMA ANTIBODY |
| 86778 | TOXOPLASMA ANTIBODY IGM |
| 86780 | TREPONEMA PALLIDUM |
| 86784 | TRICHINELLA ANTIBODY |
| 86787 | VARICELLA-ZOSTER ANTIBODY |
| 86788 | WEST NILE VIRUS AB IGM |
| 86789 | WEST NILE VIRUS ANTIBODY |
| 86790 | VIRUS ANTIBODY NOS |
| 86793 | YERSINIA ANTIBODY |
| 86794 | ZIKA VIRUS IGM ANTIBODY |
| 86800 | THYROGLOBULIN ANTIBODY |
| 86803 | HEPATITIS C AB TEST |
| 86804 | HEP C AB TEST CONFIRM |
| 86805 | LYMPHOCYTOTOXICITY ASSAY |
| 86806 | LYMPHOCYTOTOXICITY ASSAY |
| 86807 | CYTOTOXIC ANTIBODY SCREENING |
| 86808 | CYTOTOXIC ANTIBODY SCREENING |
| 86812 | HLA TYPING A B OR C |
| 86813 | HLA TYPING A B OR C |
| 86816 | HLA TYPING DR/DQ |
| 86817 | HLA TYPING DR/DQ |
| 86821 | LYMPHOCYTE CULTURE MIXED |
| 86825 | HLA X-MATH NON-CYTOTOXIC |
| 86826 | HLA X-MATCH NONCYTOTOXC ADDL |
| 86828 | HLA CLASS I&II ANTIBODY QUAL |
| 86829 | HLA CLASS I/II ANTIBODY QUAL |
| 86830 | HLA CLASS I PHENOTYPE QUAL |
| 86831 | HLA CLASS II PHENOTYPE QUAL |
| 86832 | HLA CLASS I HIGH DEFIN QUAL |
| 86833 | HLA CLASS II HIGH DEFIN QUAL |
| 86834 | HLA CLASS I SEMIQUANT PANEL |
| 86835 | HLA CLASS II SEMIQUANT PANEL |
| 86850 | RBC ANTIBODY SCREEN |
| 86860 | RBC ANTIBODY ELUTION |
| 86870 | RBC ANTIBODY IDENTIFICATION |
| 86880 | COOMBS TEST DIRECT |
| 86885 | COOMBS TEST INDIRECT QUAL |
| 86886 | COOMBS TEST INDIRECT TITER |
| 86890 | AUTOLOGOUS BLOOD PROCESS |
| 86891 | AUTOLOGOUS BLOOD OP SALVAGE |
| 86900 | BLOOD TYPING SEROLOGIC ABO |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 86901 | BLOOD TYPING SEROLOGIC RH(D) |
| 86902 | BLOOD TYPE ANTIGEN DONOR EA |
| 86904 | BLOOD TYPING PATIENT SERUM |
| 86905 | BLOOD TYPING RBC ANTIGENS |
| 86906 | BLD TYPING SEROLOGIC RH PHNT |
| 86910 | BLOOD TYPING PATERNITY TEST |
| 86911 | BLOOD TYPING ANTIGEN SYSTEM |
| 86920 | COMPATIBILITY TEST SPIN |
| 86921 | COMPATIBILITY TEST INCUBATE |
| 86922 | COMPATIBILITY TEST ANTIGLOB |
| 86923 | COMPATIBILITY TEST ELECTRIC |
| 86927 | PLASMA FRESH FROZEN |
| 86930 | FROZEN BLOOD PREP |
| 86931 | FROZEN BLOOD THAW |
| 86932 | FROZEN BLOOD FREEZE/THAW |
| 86940 | HEMOLYSINS/AGGLUTININS AUTO |
| 86941 | HEMOLYSINS/AGGLUTININS |
| 86945 | BLOOD PRODUCT/IRRADIATION |
| 86950 | LEUKACYTE TRANSFUSION |
| 86960 | VOL REDUCTION OF BLOOD/PROD |
| 86965 | POOLING BLOOD PLATELETS |
| 86970 | RBC PRETX INCUBATJ W/CHEMICL |
| 86971 | RBC PRETX INCUBATJ W/ENZYMES |
| 86972 | RBC PRETX INCUBATJ W/DENSITY |
| 86975 | RBC SERUM PRETX INCUBJ DRUGS |
| 86976 | RBC SERUM PRETX ID DILUTION |
| 86977 | RBC SERUM PRETX INCUBJ/INHIB |
| 86978 | RBC PRETREATMENT SERUM |
| 86985 | SPLIT BLOOD OR PRODUCTS |
| 87003 | SMALL ANIMAL INOCULATION |
| 87015 | SPECIMEN INFECT AGNT CONCNTJ |
| 87040 | BLOOD CULTURE FOR BACTERIA |
| 87045 | FECES CULTURE AEROBIC BACT |
| 87046 | STOOL CULTR AEROBIC BACT EA |
| 87070 | CULTURE OTHR SPECIMN AEROBIC |
| 87071 | CULTURE AEROBIC QUANT OTHER |
| 87073 | CULTURE BACTERIA ANAEROBIC |
| 87075 | CULTR BACTERIA EXCEPT BLOOD |
| 87076 | CULTURE ANAEROBE IDENT EACH |
| 87077 | CULTURE AEROBIC IDENTIFY |
| 87081 | CULTURE SCREEN ONLY |
| 87084 | CULTURE OF SPECIMEN BY KIT |
| 87086 | URINE CULTURE/COLONY COUNT |
| 87088 | URINE BACTERIA CULTURE |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 87101 | SKIN FUNGI CULTURE |
| 87102 | FUNGUS ISOLATION CULTURE |
| 87103 | BLOOD FUNGUS CULTURE |
| 87106 | FUNGI IDENTIFICATION YEAST |
| 87107 | FUNGI IDENTIFICATION MOLD |
| 87109 | MYCOPLASMA |
| 87110 | CHLAMYDIA CULTURE |
| 87116 | MYCOBACTERIA CULTURE |
| 87118 | MYCOBACTERIC IDENTIFICATION |
| 87140 | CULTURE TYPE IMMUNOFLUORESC |
| 87143 | CULTURE TYPING GLC/HPLC |
| 87147 | CULTURE TYPE IMMUNOLOGIC |
| 87149 | DNA/RNA DIRECT PROBE |
| 87150 | DNA/RNA AMPLIFIED PROBE |
| 87152 | CULTURE TYPE PULSE FIELD GEL |
| 87153 | DNA/RNA SEQUENCING |
| 87158 | CULTURE TYPING ADDED METHOD |
| 87164 | DARK FIELD EXAMINATION |
| 87166 | DARK FIELD EXAMINATION |
| 87168 | MACROSCOPIC EXAM ARTHROPOD |
| 87169 | MACROSCOPIC EXAM PARASITE |
| 87172 | PINWORM EXAM |
| 87176 | TISSUE HOMOGENIZATION CULTR |
| 87177 | OVA AND PARASITES SMEARS |
| 87181 | MICROBE SUSCEPTIBLE DIFFUSE |
| 87184 | MICROBE SUSCEPTIBLE DISK |
| 87185 | MICROBE SUSCEPTIBLE ENZYME |
| 87186 | MICROBE SUSCEPTIBLE MIC |
| 87187 | MICROBE SUSCEPTIBLE MLC |
| 87188 | MICROBE SUSCEPT MACROBROTH |
| 87190 | MICROBE SUSCEPT MYCOBACTERI |
| 87197 | BACTERICIDAL LEVEL SERUM |
| 87205 | SMEAR GRAM STAIN |
| 87206 | SMEAR FLUORESCENT/ACID STAI |
| 87207 | SMEAR SPECIAL STAIN |
| 87209 | SMEAR COMPLEX STAIN |
| 87210 | SMEAR WET MOUNT SALINE/INK |
| 87220 | TISSUE EXAM FOR FUNGI |
| 87230 | ASSAY TOXIN OR ANTITOXIN |
| 87250 | VIRUS INOCULATE EGGS/ANIMAL |
| 87252 | VIRUS INOCULATION TISSUE |
| 87253 | VIRUS INOCULATE TISSUE ADDL |
| 87254 | VIRUS INOCULATION SHELL VIA |
| 87255 | GENET VIRUS ISOLATE HSV |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 87260 | ADENOVIRUS AG IF |
| 87265 | PERTUSSIS AG IF |
| 87267 | ENTEROVIRUS ANTIBODY DFA |
| 87269 | GIARDIA AG IF |
| 87270 | CHLAMYDIA TRACHOMATIS AG IF |
| 87271 | CYTOMEGALOVIRUS DFA |
| 87272 | CRYPTOSPORIDIUM AG IF |
| 87273 | HERPES SIMPLEX 2 AG IF |
| 87274 | HERPES SIMPLEX 1 AG IF |
| 87275 | INFLUENZA B AG IF |
| 87276 | INFLUENZA A AG IF |
| 87278 | LEGION PNEUMOPHILIA AG IF |
| 87279 | PARAINFLUENZA AG IF |
| 87280 | RESPIRATORY SYNCYTIAL AG IF |
| 87281 | PNEUMOCYSTIS CARINII AG IF |
| 87283 | RUBEOLA AG IF |
| 87285 | TREPONEMA PALLIDUM AG IF |
| 87290 | VARICELLA ZOSTER AG IF |
| 87299 | ANTIBODY DETECTION NOS IF |
| 87300 | AG DETECTION POLYVAL IF |
| 87301 | ADENOVIRUS AG IA |
| 87305 | ASPERGILLUS AG IA |
| 87320 | CHYLMD TRACH AG IA |
| 87324 | CLOSTRIDIUM AG IA |
| 87327 | CRYPTOCOCCUS NEOFORM AG IA |
| 87328 | CRYPTOSPORIDIUM AG IA |
| 87329 | GIARDIA AG IA |
| 87332 | CYTOMEGALOVIRUS AG IA |
| 87335 | E COLI 0157 AG IA |
| 87336 | ENTAMOEB HIST DISPR AG IA |
| 87337 | ENTAMOEB HIST GROUP AG IA |
| 87338 | HPYLORI STOOL IA |
| 87339 | H PYLORI AG IA |
| 87340 | HEPATITIS B SURFACE AG IA |
| 87341 | HEPATITIS B SURFACE AG IA |
| 87350 | HEPATITIS BE AG IA |
| 87380 | HEPATITIS DELTA AG IA |
| 87385 | HISTOPLASMA CAPSUL AG IA |
| 87389 | HIV-1 AG W/HIV-1 & HIV-2 AB |
| 87390 | HIV-1 AG IA |
| 87391 | HIV-2 AG IA |
| 87400 | INFLUENZA A/B AG IA |
| 87420 | RESP SYNCYTIAL AG IA |
| 87425 | ROTAVIRUS AG IA |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 87426 | SARSCOV CORONAVIRUS AG IA |
| 87427 | SHIGA-LIKE TOXIN AG IA |
| 87430 | STREP A AG IA |
| 87449 | AG DETECT NOS IA MULT |
| 87450 | AG DETECT NOS IA SINGLE |
| 87451 | AG DETECT POLYVAL IA MULT |
| 87471 | BARTONELLA DNA AMP PROBE |
| 87472 | BARTONELLA DNA QUANT |
| 87475 | LYME DIS DNA DIR PROBE |
| 87476 | LYME DIS DNA AMP PROBE |
| 87480 | CANDIDA DNA DIR PROBE |
| 87481 | CANDIDA DNA AMP PROBE |
| 87482 | CANDIDA DNA QUANT |
| 87483 | CNS DNA AMP PROBE TYPE 12-25 |
| 87485 | CHYLMD PNEUM DNA DIR PROBE |
| 87486 | CHYLMD PNEUM DNA AMP PROBE |
| 87487 | CHYLMD PNEUM DNA QUANT |
| 87490 | CHYLMD TRACH DNA DIR PROBE |
| 87491 | CHYLMD TRACH DNA AMP PROBE |
| 87492 | CHYLMD TRACH DNA QUANT |
| 87493 | C DIFF AMPLIFIED PROBE |
| 87495 | CYTOMEG DNA DIR PROBE |
| 87496 | CYTOMEG DNA AMP PROBE |
| 87497 | CYTOMEG DNA QUANT |
| 87498 | ENTEROVIRUS PROBE&REVRS TRNS |
| 87500 | VANOMYCIN DNA AMP PROBE |
| 87501 | INFLUENZA DNA AMP PROB 1+ |
| 87502 | INFLUENZA DNA AMP PROBE |
| 87503 | INFLUENZA DNA AMP PROB ADDL |
| 87505 | NFCT AGENT DETECTION GI |
| 87506 | IADNA-DNA/RNA PROBE TQ 6-11 |
| 87507 | IADNA-DNA/RNA PROBE TQ 12-25 |
| 87510 | GARDNER VAG DNA DIR PROBE |
| 87511 | GARDNER VAG DNA AMP PROBE |
| 87512 | GARDNER VAG DNA QUANT |
| 87516 | HEPATITIS B DNA AMP PROBE |
| 87517 | HEPATITIS B DNA QUANT |
| 87520 | HEPATITIS C RNA DIR PROBE |
| 87521 | HEPATITIS C PROBE&RVRS TRNSC |
| 87522 | HEPATITIS C REVRS TRNSCRPJ |
| 87525 | HEPATITIS G DNA DIR PROBE |
| 87526 | HEPATITIS G DNA AMP PROBE |
| 87527 | HEPATITIS G DNA QUANT |
| 87528 | HSV DNA DIR PROBE |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 87529 | HSV DNA AMP PROBE |
| 87530 | HSV DNA QUANT |
| 87531 | HHV-6 DNA DIR PROBE |
| 87532 | HHV-6 DNA AMP PROBE |
| 87533 | HHV-6 DNA QUANT |
| 87534 | HIV-1 DNA DIR PROBE |
| 87535 | HIV-1 PROBE&REVERSE TRNSCRPJ |
| 87536 | HIV-1 QUANT&REVRSE TRNSCRPJ |
| 87537 | HIV-2 DNA DIR PROBE |
| 87538 | HIV-2 PROBE&REVRSE TRNSCRIPJ |
| 87539 | HIV-2 QUANT&REVRSE TRNSCRIPJ |
| 87540 | LEGION PNEUMO DNA DIR PROB |
| 87541 | LEGION PNEUMO DNA AMP PROB |
| 87542 | LEGION PNEUMO DNA QUANT |
| 87550 | MYCOBACTERIA DNA DIR PROBE |
| 87551 | MYCOBACTERIA DNA AMP PROBE |
| 87552 | MYCOBACTERIA DNA QUANT |
| 87555 | M.TUBERCULO DNA DIR PROBE |
| 87556 | M.TUBERCULO DNA AMP PROBE |
| 87557 | M.TUBERCULO DNA QUANT |
| 87560 | M.AVIUM-INTRA DNA DIR PROB |
| 87561 | M.AVIUM-INTRA DNA AMP PROB |
| 87562 | M.AVIUM-INTRA DNA QUANT |
| 87563 | M. GENITALIUM AMP PROBE |
| 87580 | M.PNEUMON DNA DIR PROBE |
| 87581 | M.PNEUMON DNA AMP PROBE |
| 87582 | M.PNEUMON DNA QUANT |
| 87590 | N.GONORRHOEAE DNA DIR PROB |
| 87591 | N.GONORRHOEAE DNA AMP PROB |
| 87592 | N.GONORRHOEAE DNA QUANT |
| 87623 | HPV LOW-RISK TYPES |
| 87624 | HPV HIGH-RISK TYPES |
| 87625 | HPV TYPES 16 & 18 ONLY |
| 87631 | RESP VIRUS 3-5 TARGETS |
| 87632 | RESP VIRUS 6-11 TARGETS |
| 87633 | RESP VIRUS 12-25 TARGETS |
| 87634 | RSV DNA/RNA AMP PROBE |
| 87640 | STAPH A DNA AMP PROBE |
| 87641 | MR-STAPH DNA AMP PROBE |
| 87650 | STREP A DNA DIR PROBE |
| 87651 | STREP A DNA AMP PROBE |
| 87652 | STREP A DNA QUANT |
| 87653 | STREP B DNA AMP PROBE |
| 87660 | TRICHOMONAS VAGIN DIR PROBE |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 87661 | TRICHOMONAS VAGINALIS AMPLIF |
| 87662 | ZIKA VIRUS DNA/RNA AMP PROBE |
| 87797 | DETECT AGENT NOS DNA DIR |
| 87798 | DETECT AGENT NOS DNA AMP |
| 87799 | DETECT AGENT NOS DNA QUANT |
| 87800 | DETECT AGNT MULT DNA DIREC |
| 87801 | DETECT AGNT MULT DNA AMPLI |
| 87802 | STREP B ASSAY W/OPTIC |
| 87803 | CLOSTRIDIUM TOXIN A W/OPTIC |
| 87804 | INFLUENZA ASSAY W/OPTIC |
| 87806 | HIV ANTIGEN W/HIV ANTIBODIES |
| 87807 | RSV ASSAY W/OPTIC |
| 87808 | TRICHOMONAS ASSAY W/OPTIC |
| 87809 | ADENOVIRUS ASSAY W/OPTIC |
| 87810 | CHYLMD TRACH ASSAY W/OPTIC |
| 87850 | N. GONORRHOEAE ASSAY W/OPTIC |
| 87880 | STREP A ASSAY W/OPTIC |
| 87899 | AGENT NOS ASSAY W/OPTIC |
| 87900 | PHENOTYPE INFECT AGENT DRUG |
| 87901 | GENOTYPE DNA HIV REVERSE T |
| 87902 | GENOTYPE DNA/RNA HEP C |
| 87903 | PHENOTYPE DNA HIV W/CULTURE |
| 87904 | PHENOTYPE DNA HIV W/CLT ADD |
| 87905 | SIALIDASE ENZYME ASSAY |
| 87906 | GENOTYPE DNA/RNA HIV |
| 87910 | GENOTYPE CYTOMEGALOVIRUS |
| 87912 | GENOTYPE DNA HEPATITIS B |
| 88000 | AUTOPSY (NECROPSY) GROSS |
| 88005 | AUTOPSY (NECROPSY) GROSS |
| 88007 | AUTOPSY (NECROPSY) GROSS |
| 88012 | AUTOPSY (NECROPSY) GROSS |
| 88014 | AUTOPSY (NECROPSY) GROSS |
| 88016 | AUTOPSY (NECROPSY) GROSS |
| 88020 | AUTOPSY (NECROPSY) COMPLETE |
| 88025 | AUTOPSY (NECROPSY) COMPLETE |
| 88027 | AUTOPSY (NECROPSY) COMPLETE |
| 88028 | AUTOPSY (NECROPSY) COMPLETE |
| 88029 | AUTOPSY (NECROPSY) COMPLETE |
| 88036 | LIMITED AUTOPSY |
| 88037 | LIMITED AUTOPSY |
| 88040 | FORENSIC AUTOPSY (NECROPSY) |
| 88045 | CORONERS AUTOPSY (NECROPSY) |
| 88104 | CYTOPATH FL NONGYN SMEARS |
| 88106 | CYTOPATH FL NONGYN FILTER |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 88108 | CYTOPATH CONCENTRATE TECH |
| 88112 | CYTOPATH CELL ENHANCE TECH |
| 88120 | CYTP URNE 3-5 PROBES EA SPEC |
| 88121 | CYTP URINE 3-5 PROBES CMPTR |
| 88125 | FORENSIC CYTOPATHOLOGY |
| 88130 | SEX CHROMATIN IDENTIFICATION |
| 88140 | SEX CHROMATIN IDENTIFICATION |
| 88141 | CYTOPATH C/V INTERPRET |
| 88142 | CYTOPATH C/V THIN LAYER |
| 88143 | CYTOPATH C/V THIN LAYER REDO |
| 88147 | CYTOPATH C/V AUTOMATED |
| 88148 | CYTOPATH C/V AUTO RESCREEN |
| 88150 | CYTOPATH C/V MANUAL |
| 88152 | CYTOPATH C/V AUTO REDO |
| 88153 | CYTOPATH C/V REDO |
| 88155 | CYTOPATH C/V INDEX ADD-ON |
| 88160 | CYTOPATH SMEAR OTHER SOURCE |
| 88161 | CYTOPATH SMEAR OTHER SOURCE |
| 88162 | CYTOPATH SMEAR OTHER SOURCE |
| 88164 | CYTOPATH TBS C/V MANUAL |
| 88165 | CYTOPATH TBS C/V REDO |
| 88166 | CYTOPATH TBS C/V AUTO REDO |
| 88167 | CYTOPATH TBS C/V SELECT |
| 88172 | CYTP DX EVAL FNA 1ST EA SITE |
| 88173 | CYTOPATH EVAL FNA REPORT |
| 88174 | CYTOPATH C/V AUTO IN FLUID |
| 88175 | CYTOPATH C/V AUTO FLUID REDO |
| 88177 | CYTP FNA EVAL EA ADDL |
| 88182 | CELL MARKER STUDY |
| 88300 | SURGICAL PATH GROSS |
| 88302 | TISSUE EXAM BY PATHOLOGIST |
| 88304 | TISSUE EXAM BY PATHOLOGIST |
| 88305 | TISSUE EXAM BY PATHOLOGIST |
| 88307 | TISSUE EXAM BY PATHOLOGIST |
| 88309 | TISSUE EXAM BY PATHOLOGIST |
| 88311 | DECALCIFY TISSUE |
| 88312 | SPECIAL STAINS GROUP 1 |
| 88313 | SPECIAL STAINS GROUP 2 |
| 88314 | HISTOCHEMICAL STAINS ADD-ON |
| 88319 | ENZYME HISTOCHEMISTRY |
| 88321 | MICROSLIDE CONSULTATION |
| 88323 | MICROSLIDE CONSULTATION |
| 88325 | COMPREHENSIVE REVIEW OF DATA |
| 88329 | PATH CONSULT INTROP |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 88331 | PATH CONSULT INTRAOP 1 BLOC |
| 88332 | PATH CONSULT INTRAOP ADDL |
| 88333 | INTRAOP CYTO PATH CONSULT 1 |
| 88334 | INTRAOP CYTO PATH CONSULT 2 |
| 88341 | IMMUNOHISTO ANTB ADDL SLIDE |
| 88342 | IMMUNOHISTO ANTB 1ST STAIN |
| 88344 | IMMUNOHISTO ANTIBODY SLIDE |
| 88346 | IMMUNOFLUOR ANTB 1ST STAIN |
| 88348 | ELECTRON MICROSCOPY |
| 88350 | IMMUNOFLUOR ANTB ADDL STAIN |
| 88355 | ANALYSIS SKELETAL MUSCLE |
| 88356 | ANALYSIS NERVE |
| 88358 | ANALYSIS TUMOR |
| 88360 | TUMOR IMMUNOHISTOCHEM/MANUAL |
| 88361 | TUMOR IMMUNOHISTOCHEM/COMPUT |
| 88362 | NERVE TEASING PREPARATIONS |
| 88363 | XM ARCHIVE TISSUE MOLEC ANAL |
| 88364 | INSITU HYBRIDIZATION (FISH) |
| 88365 | INSITU HYBRIDIZATION (FISH) |
| 88366 | INSITU HYBRIDIZATION (FISH) |
| 88367 | INSITU HYBRIDIZATION AUTO |
| 88368 | INSITU HYBRIDIZATION MANUAL |
| 88369 | M/PHMTRC ALYSISHQUANT/SEMIQ |
| 88371 | PROTEIN WESTERN BLOT TISSUE |
| 88372 | PROTEIN ANALYSIS W/PROBE |
| 88373 | M/PHMTRC ALYS ISHQUANT/SEMIQ |
| 88374 | M/PHMTRC ALYS ISHQUANT/SEMIQ |
| 88375 | OPTICAL ENDOMICROSCPY INTERP |
| 88377 | M/PHMTRC ALYS ISHQUANT/SEMIQ |
| 88380 | MICRODISSECTION LASER |
| 88381 | MICRODISSECTION MANUAL |
| 88387 | TISS EXAM MOLECULAR STUDY |
| 88388 | TISS EX MOLECUL STUDY ADD-ON |
| 88720 | BILIRUBIN TOTAL TRANSCUT |
| 88738 | HGB QUANT TRANSCUTANEOUS |
| 88740 | TRANSCUTANEOUS CARBOXYHB |
| 88741 | TRANSCUTANEOUS METHB |
| 89049 | CHCT FOR MAL HYPERTHERMIA |
| 89050 | BODY FLUID CELL COUNT |
| 89051 | BODY FLUID CELL COUNT |
| 89055 | LEUKOCYTE ASSESSMENT FECAL |
| 89060 | EXAM SYNOVIAL FLUID CRYSTALS |
| 89125 | SPECIMEN FAT STAIN |
| 89160 | EXAM FECES FOR MEAT FIBERS |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 89190 | NASAL SMEAR FOR EOSINOPHILS |
| 89220 | SPUTUM SPECIMEN COLLECTION |
| 89230 | COLLECT SWEAT FOR TEST |
| 9001F | AORTIC ANEURYSM<5CM DIAM CT |
| 9002F | AORTIC ANEURYSM 5-5.4CM DIAM |
| 9003F | AORTIC ANRYSM5.5-5.9CM DIAM |
| 9004F | AORTIC ANRYSM 6/> CM DIAM |
| 9005F | ASYMPT CAROT/VRTBRBAS STEN |
| 9006F | SYMPT STEN-TIA/STRK<120DAYS |
| 9007F | OTHER CAROT STEN 120 DAYS/> |
| 90281 | HUMAN IG IM |
| 90283 | HUMAN IG IV |
| 90284 | HUMAN IG SC |
| 90287 | BOTULINUM ANTITOXIN |
| 90288 | BOTULISM IG IV |
| 90291 | CMV IG IV |
| 90296 | DIPHTHERIA ANTITOXIN |
| 90371 | HEP B IG IM |
| 90375 | RABIES IG IM/SC |
| 90376 | RABIES IG HEAT TREATED |
| 90377 | RABIES IG HT&SOL HUMAN IM/SC |
| 90384 | RH IG FULL-DOSE IM |
| 90385 | RH IG MINIDOSE IM |
| 90386 | RH IG IV |
| 90389 | TETANUS IG IM |
| 90393 | VACCINA IG IM |
| 90396 | VARICELLA-ZOSTER IG IM |
| 90460 | IM ADMIN 1ST/ONLY COMPONENT |
| 90461 | IM ADMIN EACH ADDL COMPONENT |
| 90471 | IMMUNIZATION ADMIN |
| 90472 | IMMUNIZATION ADMIN EACH ADD |
| 90473 | IMMUNE ADMIN ORAL/NASAL |
| 90474 | IMMUNE ADMIN ORAL/NASAL ADDL |
| 90476 | ADENOVIRUS VACCINE TYPE 4 |
| 90477 | ADENOVIRUS VACCINE TYPE 7 |
| 90581 | ANTHRAX VACCINE SC OR IM |
| 90585 | BCG VACCINE PERCUT |
| 90586 | BCG VACCINE INTRAVESICAL |
| 90620 | MENB-4C VACC 2 DOSE IM |
| 90621 | MENB-FHbp VACC 2/3 DOSE IM |
| 90625 | CHOLERA VACCINE LIVE ORAL |
| 90630 | FLU VACC IIV4 NO PRESERV ID |
| 90632 | HEPA VACCINE ADULT IM |
| 90633 | HEPA VACC PED/ADOL 2 DOSE IM |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 90634 | HEPA VACC PED/ADOL 3 DOSE |
| 90636 | HEP A/HEP B VACC ADULT IM |
| 90644 | HIB-MENCY VACC 6WK-18M0 IM |
| 90647 | HIB PRP-OMP VACC 3 DOSE IM |
| 90648 | HIB PRP-T VACCINE 4 DOSE IM |
| 90649 | 4VHPV VACCINE 3 DOSE IM |
| 90650 | 2VHPV VACCINE 3 DOSE IM |
| 90651 | 9VHPV VACCINE 2/3 DOSE IM |
| 90653 | IIV ADJUVANT VACCINE IM |
| 90654 | FLU VACC IIV3 NO PRESERV ID |
| 90655 | IIV3 VACC NO PRSV 0.25 ML IM |
| 90656 | IIV3 VACC NO PRSV 0.5 ML IM |
| 90657 | IIV3 VACCINE SPLT 0.25 ML IM |
| 90658 | IIV3 VACCINE SPLT 0.5 ML IM |
| 90660 | LAIV3 VACCINE INTRANASAL |
| 90661 | CCIIV3 VAC NO PRSV 0.5 ML IM |
| 90662 | IIV NO PRSV INCREASED AG IM |
| 90664 | LAIV VACC PANDEMIC INTRANASL |
| 90666 | FLU VAC PANDEM PRSRV FREE IM |
| 90667 | IIV VACC PANDEMIC ADJUVT IM |
| 90668 | IIV VACCINE PANDEMIC IM |
| 90670 | PCV13 VACCINE IM |
| 90672 | LAIV4 VACCINE INTRANASAL |
| 90673 | RIV3 VACCINE NO PRESERV IM |
| 90674 | CCIIV4 VAC NO PRSV 0.5 ML IM |
| 90675 | RABIES VACCINE IM |
| 90676 | RABIES VACCINE ID |
| 90680 | RV5 VACC 3 DOSE LIVE ORAL |
| 90681 | RV1 VACC 2 DOSE LIVE ORAL |
| 90682 | RIV4 VACC RECOMBINANT DNA IM |
| 90685 | IIV4 VACC NO PRSV 0.25 ML IM |
| 90686 | IIV4 VACC NO PRSV 0.5 ML IM |
| 90687 | IIV4 VACCINE SPLT 0.25 ML IM |
| 90688 | IIV4 VACCINE SPLT 0.5 ML IM |
| 90689 | VACC IIV4 NO PRSRV 0.25ML IM |
| 90690 | TYPHOID VACCINE ORAL |
| 90691 | TYPHOID VACCINE IM |
| 90694 | VACC AIIV4 NO PRSRV 0.5ML IM |
| 90696 | DTAP-IPV VACCINE 4-6 YRS IM |
| 90697 | DTAP-IPV-HIB-HEPB VACCINE IM |
| 90698 | DTAP-IPV/HIB VACCINE IM |
| 90700 | DTAP VACCINE < 7 YRS IM |
| 90702 | DT VACCINE UNDER 7 YRS IM |
| 90707 | MMR VACCINE SC |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 90710 | MMRV VACCINE SC |
| 90713 | POLIOVIRUS IPV SC/IM |
| 90714 | TD VACC NO PRESV 7 YRS+ IM |
| 90715 | TDAP VACCINE 7 YRS/> IM |
| 90716 | VAR VACCINE LIVE SUBQ |
| 90717 | YELLOW FEVER VACCINE SUBQ |
| 90723 | DTAP-HEP B-IPV VACCINE IM |
| 90732 | PPSV23 VACC 2 YRS+ SUBQ/IM |
| 90733 | MPSV4 VACCINE SUBQ |
| 90734 | MENACWYD/MENACWYCRM VACC IM |
| 90736 | HZV VACCINE LIVE SUBQ |
| 90738 | INACTIVATED JE VACC IM |
| 90739 | HEPB VACC 2 DOSE ADULT IM |
| 90740 | HEPB VACC 3 DOSE IMMUNSUP IM |
| 90743 | HEPB VACC 2 DOSE ADOLESC IM |
| 90744 | HEPB VACC 3 DOSE PED/ADOL IM |
| 90746 | HEPB VACCINE 3 DOSE ADULT IM |
| 90747 | HEPB VACC 4 DOSE IMMUNSUP IM |
| 90748 | HIB-HEPB VACCINE IM |
| 90750 | HZV VACC RECOMBINANT IM |
| 90756 | CCIIV4 VACC ABX FREE IM |
| 90785 | PSYTX COMPLEX INTERACTIVE |
| 90791 | PSYCH DIAGNOSTIC EVALUATION |
| 90792 | PSYCH DIAG EVAL W/MED SRVCS |
| 90832 | PSYTX W PT 30 MINUTES |
| 90833 | PSYTX W PT W E/M 30 MIN |
| 90834 | PSYTX W PT 45 MINUTES |
| 90836 | PSYTX W PT W E/M 45 MIN |
| 90837 | PSYTX W PT 60 MINUTES |
| 90838 | PSYTX W PT W E/M 60 MIN |
| 90839 | PSYTX CRISIS INITIAL 60 MIN |
| 90840 | PSYTX CRISIS EA ADDL 30 MIN |
| 90845 | PSYCHOANALYSIS |
| 90846 | FAMILY PSYTX W/O PT 50 MIN |
| 90847 | FAMILY PSYTX W/PT 50 MIN |
| 90849 | MULTIPLE FAMILY GROUP PSYTX |
| 90853 | GROUP PSYCHOTHERAPY |
| 90863 | PHARMACOLOGIC MGMT W/PSYTX |
| 90865 | NARCOSYNTHESIS |
| 90870 | ELECTROCONVULSIVE THERAPY |
| 90875 | PSYCHOPHYSIOLOGICAL THERAPY |
| 90876 | PSYCHOPHYSIOLOGICAL THERAPY |
| 90880 | HYPNOTHERAPY |
| 90912 | BFB TRAINING 1ST 15 MIN |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 90913 | BFB TRAINING EA ADDL 15 MIN |
| 90937 | HEMODIALYSIS REPEATED EVAL |
| 90940 | HEMODIALYSIS ACCESS STUDY |
| 90947 | DIALYSIS REPEATED EVAL |
| 90989 | DIALYSIS TRAINING COMPLETE |
| 91010 | ESOPHAGUS MOTILITY STUDY |
| 91013 | ESOPHGL MOTIL W/STIM/PERFUS |
| 91020 | GASTRIC MOTILITY STUDIES |
| 91022 | DUODENAL MOTILITY STUDY |
| 91030 | ACID PERFUSION OF ESOPHAGUS |
| 91034 | GASTROESOPHAGEAL REFLUX TEST |
| 91035 | G-ESOPH REFLX TST W/ELECTROD |
| 91037 | ESOPH IMPED FUNCTION TEST |
| 91038 | ESOPH IMPED FUNCT TEST > 1HR |
| 91040 | ESOPH BALLOON DISTENSION TST |
| 91065 | BREATH HYDROGEN/METHANE TEST |
| 91110 | GI TRACT CAPSULE ENDOSCOPY |
| 91117 | COLON MOTILITY 6 HR STUDY |
| 91120 | RECTAL SENSATION TEST |
| 91122 | ANAL PRESSURE RECORD |
| 91132 | ELECTROGASTROGRAPHY |
| 91133 | ELECTROGASTROGRAPHY W/TEST |
| 91200 | LIVER ELASTOGRAPHY |
| 92002 | EYE EXAM NEW PATIENT |
| 92004 | EYE EXAM NEW PATIENT |
| 92012 | EYE EXAM ESTABLISH PATIENT |
| 92014 | EYE EXAM&TX ESTAB PT 1/>VST |
| 92018 | NEW EYE EXAM & TREATMENT |
| 92019 | EYE EXAM & TREATMENT |
| 92020 | SPECIAL EYE EVALUATION |
| 92025 | CORNEAL TOPOGRAPHY |
| 92060 | SPECIAL EYE EVALUATION |
| 92065 | ORTHOPTIC/PLEOPTIC TRAINING |
| 92071 | CONTACT LENS FITTING FOR TX |
| 92072 | FIT CONTAC LENS FOR MANAGMNT |
| 92081 | VISUAL FIELD EXAMINATION(S) |
| 92082 | VISUAL FIELD EXAMINATION(S) |
| 92083 | VISUAL FIELD EXAMINATION(S) |
| 92100 | SERIAL TONOMETRY EXAM(S) |
| 92133 | CMPTR OPHTH IMG OPTIC NERVE |
| 92134 | CPTR OPHTH DX IMG POST SEGMT |
| 92136 | OPHTHALMIC BIOMETRY |
| 92145 | CORNEAL HYSTERESIS DETER |
| 92201 | OPSCPY EXTND RTA DRAW UNI/BI |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 92202 | OPSCPY EXTND ON/MAC DRAW |
| 92227 | REMOTE DX RETINAL IMAGING |
| 92228 | REMOTE RETINAL IMAGING MGMT |
| 92229 | IMG RTA DETC/MNTR DS POC ALY |
| 92230 | EYE EXAM WITH PHOTOS |
| 92235 | FLUORESCEIN ANGRPH UNI/BI |
| 92240 | ICG ANGIOGRAPHY UNI/BI |
| 92242 | FLUORESCEIN ICG ANGIOGRAPHY |
| 92250 | EYE EXAM WITH PHOTOS |
| 92260 | OPHTHALMOSCOPY/DYNAMOMETRY |
| 92265 | EYE MUSCLE EVALUATION |
| 92270 | ELECTRO-OCULOGRAPHY |
| 92273 | FULL FIELD ERG W/I&R |
| 92274 | MULTIFOCAL ERG W/I&R |
| 92283 | COLOR VISION EXAMINATION |
| 92284 | DARK ADAPTATION EYE EXAM |
| 92285 | EYE PHOTOGRAPHY |
| 92286 | INTERNAL EYE PHOTOGRAPHY |
| 92287 | INTERNAL EYE PHOTOGRAPHY |
| 92311 | CONTACT LENS FITTING |
| 92312 | CONTACT LENS FITTING |
| 92313 | CONTACT LENS FITTING |
| 92315 | RX CNTACT LENS APHAKIA 1 EYE |
| 92316 | RX CNTACT LENS APHAKIA 2 EYE |
| 92317 | RX CORNEOSCLERAL CNTACT LENS |
| 92325 | MODIFICATION OF CONTACT LENS |
| 92326 | REPLACEMENT OF CONTACT LENS |
| 92358 | APHAKIA PROSTH SERVICE TEMP |
| 92502 | EAR AND THROAT EXAMINATION |
| 92504 | EAR MICROSCOPY EXAMINATION |
| 92507 | SPEECH/HEARING THERAPY |
| 92508 | SPEECH/HEARING THERAPY |
| 92511 | NASOPHARYNGOSCOPY |
| 92512 | NASAL FUNCTION STUDIES |
| 92516 | FACIAL NERVE FUNCTION TEST |
| 92520 | LARYNGEAL FUNCTION STUDIES |
| 92521 | EVALUATION OF SPEECH FLUENCY |
| 92522 | EVALUATE SPEECH PRODUCTION |
| 92523 | SPEECH SOUND LANG COMPREHEN |
| 92524 | BEHAVRAL QUALIT ANALYS VOICE |
| 92526 | ORAL FUNCTION THERAPY |
| 92531 | SPONTANEOUS NYSTAGMUS STUDY |
| 92532 | POSITIONAL NYSTAGMUS TEST |
| 92533 | CALORIC VESTIBULAR TEST |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 92534 | OPTOKINETIC NYSTAGMUS TEST |
| 92537 | CALORIC VSTBLR TEST W/REC |
| 92538 | CALORIC VSTBLR TEST W/REC |
| 92540 | BASIC VESTIBULAR EVALUATION |
| 92541 | SPONTANEOUS NYSTAGMUS TEST |
| 92542 | POSITIONAL NYSTAGMUS TEST |
| 92544 | OPTOKINETIC NYSTAGMUS TEST |
| 92545 | OSCILLATING TRACKING TEST |
| 92546 | SINUSOIDAL ROTATIONAL TEST |
| 92547 | SUPPLEMENTAL ELECTRICAL TEST |
| 92548 | CDP-SOT 6 COND W/I&R |
| 92549 | CDP-SOT 6 COND W/I&R MCT&ADT |
| 92550 | TYMPANOMETRY & REFLEX THRESH |
| 92551 | PURE TONE HEARING TEST AIR |
| 92552 | PURE TONE AUDIOMETRY AIR |
| 92553 | AUDIOMETRY AIR & BONE |
| 92555 | SPEECH THRESHOLD AUDIOMETRY |
| 92556 | SPEECH AUDIOMETRY COMPLETE |
| 92557 | COMPREHENSIVE HEARING TEST |
| 92558 | EVOKED AUDITORY TEST QUAL |
| 92559 | GROUP AUDIOMETRIC TESTING |
| 92560 | BEKESY AUDIOMETRY SCREEN |
| 92561 | BEKESY AUDIOMETRY DIAGNOSIS |
| 92562 | LOUDNESS BALANCE TEST |
| 92563 | TONE DECAY HEARING TEST |
| 92564 | SISI HEARING TEST |
| 92565 | STENGER TEST PURE TONE |
| 92567 | TYMPANOMETRY |
| 92568 | ACOUSTIC REFL THRESHOLD TST |
| 92570 | ACOUSTIC IMMITANCE TESTING |
| 92571 | FILTERED SPEECH HEARING TEST |
| 92572 | STAGGERED SPONDAIC WORD TEST |
| 92575 | SENSORINEURAL ACUITY TEST |
| 92576 | SYNTHETIC SENTENCE TEST |
| 92577 | STENGER TEST SPEECH |
| 92579 | VISUAL AUDIOMETRY (VRA) |
| 92582 | CONDITIONING PLAY AUDIOMETRY |
| 92583 | SELECT PICTURE AUDIOMETRY |
| 92584 | ELECTROCOCHLEOGRAPHY |
| 92585 | AUDITOR EVOKE POTENT COMPRE |
| 92586 | AUDITOR EVOKE POTENT LIMIT |
| 92587 | EVOKED AUDITORY TEST LIMITED |
| 92588 | EVOKED AUDITORY TST COMPLETE |
| 92590 | HEARING AID EXAM ONE EAR |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 92591 | HEARING AID EXAM BOTH EARS |
| 92592 | HEARING AID CHECK ONE EAR |
| 92593 | HEARING AID CHECK BOTH EARS |
| 92594 | ELECTRO HEARNG AID TEST ONE |
| 92595 | ELECTRO HEARNG AID TST BOTH |
| 92596 | EAR PROTECTOR EVALUATION |
| 92597 | ORAL SPEECH DEVICE EVAL |
| 92601 | COCHLEAR IMPLT F/UP EXAM <7 |
| 92602 | REPROGRAM COCHLEAR IMPLT <7 |
| 92603 | COCHLEAR IMPLT F/UP EXAM 7/> |
| 92604 | REPROGRAM COCHLEAR IMPLT 7/> |
| 92605 | EX FOR NONSPEECH DEVICE RX |
| 92607 | EX FOR SPEECH DEVICE RX 1HR |
| 92608 | EX FOR SPEECH DEVICE RX ADDL |
| 92610 | EVALUATE SWALLOWING FUNCTION |
| 92611 | MOTION FLUOROSCOPY/SWALLOW |
| 92612 | ENDOSCOPY SWALLOW (FEES) VID |
| 92613 | ENDOSCOPY SWALLOW (FEES) I&R |
| 92614 | LARYNGOSCOPIC SENSORY VID |
| 92615 | LARYNGOSCOPIC SENSORY I&R |
| 92616 | FEES W/LARYNGEAL SENSE TEST |
| 92617 | FEES W/LARYNGEAL SENSE I&R |
| 92618 | EX FOR NONSPEECH DEV RX ADD |
| 92620 | AUDITORY FUNCTION 60 MIN |
| 92621 | AUDITORY FUNCTION + 15 MIN |
| 92625 | TINNITUS ASSESSMENT |
| 92626 | EVAL AUD FUNCJ 1ST HOUR |
| 92627 | EVAL AUD FUNCJ EA ADDL 15 |
| 92630 | AUD REHAB PRE-LING HEAR LOSS |
| 92633 | AUD REHAB POSTLING HEAR LOSS |
| 92640 | AUD BRAINSTEM IMPLT PROGRAMG |
| 92650 | AEP SCR AUDITORY POTENTIAL |
| 92651 | AEP HEARING STATUS DETER I&R |
| 92652 | AEP THRSHLD EST MLT FREQ I&R |
| 92653 | AEP NEURODIAGNOSTIC I&R |
| 92920 | PRQ CARDIAC ANGIOPLAST 1 ART |
| 92921 | PRQ CARDIAC ANGIO ADDL ART |
| 92924 | PRQ CARD ANGIO/ATHRECT 1 ART |
| 92925 | PRQ CARD ANGIO/ATHRECT ADDL |
| 92928 | PRQ CARD STENT W/ANGIO 1 VSL |
| 92929 | PRQ CARD STENT W/ANGIO ADDL |
| 92933 | PRQ CARD STENT/ATH/ANGIO |
| 92934 | PRQ CARD STENT/ATH/ANGIO |
| 92937 | PRQ REVASC BYP GRAFT 1 VSL |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 92938 | PRQ REVASC BYP GRAFT ADDL |
| 92941 | PRQ CARD REVASC MI 1 VSL |
| 92943 | PRQ CARD REVASC CHRONIC 1VSL |
| 92944 | PRQ CARD REVASC CHRONIC ADDL |
| 92950 | HEART/LUNG RESUSCITATION CPR |
| 92953 | TEMPORARY EXTERNAL PACING |
| 92960 | CARDIOVERSION ELECTRIC EXT |
| 92961 | CARDIOVERSION ELECTRIC INT |
| 92970 | CARDIOASSIST INTERNAL |
| 92971 | CARDIOASSIST EXTERNAL |
| 92973 | PRQ CORONARY MECH THROMBECT |
| 92974 | CATH PLACE CARDIO BRACHYTX |
| 92975 | DISSOLVE CLOT HEART VESSEL |
| 92977 | DISSOLVE CLOT HEART VESSEL |
| 92978 | ENDOLUMINL IVUS OCT C 1ST |
| 92979 | ENDOLUMINL IVUS OCT C EA |
| 92986 | REVISION OF AORTIC VALVE |
| 92987 | REVISION OF MITRAL VALVE |
| 92990 | REVISION OF PULMONARY VALVE |
| 92992 | REVISION OF HEART CHAMBER |
| 92993 | REVISION OF HEART CHAMBER |
| 92997 | PUL ART BALLOON REPR PERCUT |
| 92998 | PUL ART BALLOON REPR PERCUT |
| 93000 | ELECTROCARDIOGRAM COMPLETE |
| 93005 | ELECTROCARDIOGRAM TRACING |
| 93010 | ELECTROCARDIOGRAM REPORT |
| 93015 | CARDIOVASCULAR STRESS TEST |
| 93016 | CARDIOVASCULAR STRESS TEST |
| 93017 | CARDIOVASCULAR STRESS TEST |
| 93018 | CARDIOVASCULAR STRESS TEST |
| 93024 | CARDIAC DRUG STRESS TEST |
| 93025 | MICROVOLT T-WAVE ASSESS |
| 93040 | RHYTHM ECG WITH REPORT |
| 93041 | RHYTHM ECG TRACING |
| 93042 | RHYTHM ECG REPORT |
| 93050 | ART PRESSURE WAVEFORM ANALYS |
| 93224 | ECG MONIT/REPRT UP TO 48 HRS |
| 93225 | ECG MONIT/REPRT UP TO 48 HRS |
| 93226 | ECG MONIT/REPRT UP TO 48 HRS |
| 93227 | ECG MONIT/REPRT UP TO 48 HRS |
| 93228 | REMOTE 30 DAY ECG REV/REPORT |
| 93229 | REMOTE 30 DAY ECG TECH SUPP |
| 93241 | EXT ECG>48HR<7D REC SCAN A/R |
| 93242 | EXT ECG>48HR<7D RECORDING |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 93243 | EXT ECG>48HR<7D SCAN A/R |
| 93244 | EXT ECG>48HR<7D REV&INTERPJ |
| 93245 | EXT ECG>7D<15D REC SCAN A/R |
| 93246 | EXT ECG>7D<15D RECORDING |
| 93247 | EXT ECG>7D<15D SCAN A/R |
| 93248 | EXT ECG>7D<15D REV&INTERPJ |
| 93260 | PRGRMG DEV EVAL IMPLTBL SYS |
| 93261 | INTERROGATE SUBQ DEFIB |
| 93264 | REM MNTR WRLS P-ART PRS SNR |
| 93268 | ECG RECORD/REVIEW |
| 93270 | REMOTE 30 DAY ECG REV/REPORT |
| 93271 | ECG/MONITORING AND ANALYSIS |
| 93272 | ECG/REVIEW INTERPRET ONLY |
| 93278 | ECG/SIGNAL-AVERAGED |
| 93279 | PRGRMG DEV EVAL PM/LDLS PM |
| 93280 | PM DEVICE PROGR EVAL DUAL |
| 93281 | PM DEVICE PROGR EVAL MULTI |
| 93282 | PRGRMG EVAL IMPLANTABLE DFB |
| 93283 | PRGRMG EVAL IMPLANTABLE DFB |
| 93284 | PRGRMG EVAL IMPLANTABLE DFB |
| 93285 | PRGRMG DEV EVAL SCRMS IP |
| 93286 | PERI-PX EVAL PM/LDLS PM IP |
| 93287 | PERI-PX DEVICE EVAL & PRGR |
| 93288 | INTERROG EVL PM/LDLS PM IP |
| 93289 | INTERROG DEVICE EVAL HEART |
| 93290 | INTERROG DEV EVAL ICPMS IP |
| 93291 | INTERROG DEV EVAL SCRMS IP |
| 93292 | WCD DEVICE INTERROGATE |
| 93293 | PM PHONE R-STRIP DEVICE EVAL |
| 93294 | REM INTERROG EVL PM/LDLS PM |
| 93295 | DEV INTERROG REMOTE 1/2/MLT |
| 93296 | REM INTERROG EVL PM/IDS |
| 93297 | REM INTERROG DEV EVAL ICPMS |
| 93298 | REM INTERROG DEV EVAL SCRMS |
| 93303 | ECHO TRANSTHORACIC |
| 93304 | ECHO TRANSTHORACIC |
| 93306 | TTE W/DOPPLER COMPLETE |
| 93307 | TTE W/O DOPPLER COMPLETE |
| 93308 | TTE F-UP OR LMTD |
| 93312 | ECHO TRANSESOPHAGEAL |
| 93313 | ECHO TRANSESOPHAGEAL |
| 93314 | ECHO TRANSESOPHAGEAL |
| 93315 | ECHO TRANSESOPHAGEAL |
| 93316 | ECHO TRANSESOPHAGEAL |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 93317 | ECHO TRANSESOPHAGEAL |
| 93318 | ECHO TRANSESOPHAGEAL INTRAOP |
| 93320 | DOPPLER ECHO EXAM HEART |
| 93321 | DOPPLER ECHO EXAM HEART |
| 93325 | DOPPLER COLOR FLOW ADD-ON |
| 93350 | STRESS TTE ONLY |
| 93351 | STRESS TTE COMPLETE |
| 93352 | ADMIN ECG CONTRAST AGENT |
| 93355 | ECHO TRANSESOPHAGEAL (TEE) |
| 93356 | MYOCRD STRAIN IMG SPCKL TRCK |
| 93451 | RIGHT HEART CATH |
| 93452 | LEFT HRT CATH W/VENTRCLGRPHY |
| 93453 | R&L HRT CATH W/VENTRICLGRPHY |
| 93454 | CORONARY ARTERY ANGIO S&I |
| 93455 | CORONARY ART/GRFT ANGIO S&I |
| 93456 | R HRT CORONARY ARTERY ANGIO |
| 93457 | R HRT ART/GRFT ANGIO |
| 93458 | L HRT ARTERY/VENTRICLE ANGIO |
| 93459 | L HRT ART/GRFT ANGIO |
| 93460 | R&L HRT ART/VENTRICLE ANGIO |
| 93461 | R&L HRT ART/VENTRICLE ANGIO |
| 93462 | L HRT CATH TRNSPTL PUNCTURE |
| 93463 | DRUG ADMIN & HEMODYNMIC MEAS |
| 93464 | EXERCISE W/HEMODYNAMIC MEAS |
| 93503 | INSERT/PLACE HEART CATHETER |
| 93505 | BIOPSY OF HEART LINING |
| 93530 | RT HEART CATH CONGENITAL |
| 93531 | R & L HEART CATH CONGENITAL |
| 93532 | R & L HEART CATH CONGENITAL |
| 93533 | R & L HEART CATH CONGENITAL |
| 93561 | CARDIAC OUTPUT MEASUREMENT |
| 93562 | CARD OUTPUT MEASURE SUBSQ |
| 93563 | INJECT CONGENITAL CARD CATH |
| 93564 | INJECT HRT CONGNTL ART/GRFT |
| 93565 | INJECT L VENTR/ATRIAL ANGIO |
| 93566 | INJECT R VENTR/ATRIAL ANGIO |
| 93567 | INJECT SUPRVLV AORTOGRAPHY |
| 93568 | INJECT PULM ART HRT CATH |
| 93571 | HEART FLOW RESERVE MEASURE |
| 93572 | HEART FLOW RESERVE MEASURE |
| 93580 | TRANSCATH CLOSURE OF ASD |
| 93581 | TRANSCATH CLOSURE OF VSD |
| 93582 | PERQ TRANSCATH CLOSURE PDA |
| 93583 | PERQ TRANSCATH SEPTAL REDUXN |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 93590 | PERQ TRANSCATH CLS MITRAL |
| 93591 | PERQ TRANSCATH CLS AORTIC |
| 93592 | PERQ TRANSCATH CLOSURE EACH |
| 93600 | BUNDLE OF HIS RECORDING |
| 93602 | INTRA-ATRIAL RECORDING |
| 93603 | RIGHT VENTRICULAR RECORDING |
| 93609 | MAP TACHYCARDIA ADD-ON |
| 93610 | INTRA-ATRIAL PACING |
| 93612 | INTRAVENTRICULAR PACING |
| 93613 | ELECTROPHYS MAP 3D ADD-ON |
| 93615 | ESOPHAGEAL RECORDING |
| 93616 | ESOPHAGEAL RECORDING |
| 93618 | HEART RHYTHM PACING |
| 93619 | ELECTROPHYSIOLOGY EVALUATION |
| 93620 | ELECTROPHYSIOLOGY EVALUATION |
| 93621 | ELECTROPHYSIOLOGY EVALUATION |
| 93622 | ELECTROPHYSIOLOGY EVALUATION |
| 93623 | STIMULATION PACING HEART |
| 93624 | ELECTROPHYSIOLOGIC STUDY |
| 93631 | HEART PACING MAPPING |
| 93640 | EVALUATION HEART DEVICE |
| 93641 | ELECTROPHYSIOLOGY EVALUATION |
| 93642 | ELECTROPHYSIOLOGY EVALUATION |
| 93644 | ELECTROPHYSIOLOGY EVALUATION |
| 93650 | ABLATE HEART DYSRHYTHM FOCUS |
| 93653 | EP & ABLATE SUPRAVENT ARRHYT |
| 93654 | EP & ABLATE VENTRIC TACHY |
| 93655 | ABLATE ARRHYTHMIA ADD ON |
| 93656 | TX ATRIAL FIB PULM VEIN ISOL |
| 93657 | TX L/R ATRIAL FIB ADDL |
| 93660 | TILT TABLE EVALUATION |
| 93662 | INTRACARDIAC ECG (ICE) |
| 93668 | PERIPHERAL VASCULAR REHAB |
| 93701 | BIOIMPEDANCE CV ANALYSIS |
| 93702 | BIS XTRACELL FLUID ANALYSIS |
| 93724 | ANALYZE PACEMAKER SYSTEM |
| 93745 | SET-UP CARDIOVERT-DEFIBRILL |
| 93750 | INTERROGATION VAD IN PERSON |
| 93770 | MEASURE VENOUS PRESSURE |
| 93784 | AMBL BP MNTR W/SOFTWARE |
| 93786 | AMBL BP MNTR W/SW REC ONLY |
| 93788 | AMBL BP MNTR W/SW A/R |
| 93790 | AMBL BP MNTR W/SW I&R |
| 93797 | CARDIAC REHAB |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 93798 | CARDIAC REHAB/MONITOR |
| 93880 | EXTRACRANIAL BILAT STUDY |
| 93882 | EXTRACRANIAL UNI/LTD STUDY |
| 93886 | INTRACRANIAL COMPLETE STUDY |
| 93888 | INTRACRANIAL LIMITED STUDY |
| 93890 | TCD VASOREACTIVITY STUDY |
| 93892 | TCD EMBOLI DETECT W/O INJ |
| 93893 | TCD EMBOLI DETECT W/INJ |
| 93895 | CAROTID INTIMA ATHEROMA EVAL |
| 93922 | UPR/L XTREMITY ART 2 LEVELS |
| 93923 | UPR/LXTR ART STDY 3+ LVLS |
| 93924 | LWR XTR VASC STDY BILAT |
| 93925 | LOWER EXTREMITY STUDY |
| 93926 | LOWER EXTREMITY STUDY |
| 93930 | UPPER EXTREMITY STUDY |
| 93931 | UPPER EXTREMITY STUDY |
| 93970 | EXTREMITY STUDY |
| 93971 | EXTREMITY STUDY |
| 93975 | VASCULAR STUDY |
| 93976 | VASCULAR STUDY |
| 93978 | VASCULAR STUDY |
| 93979 | VASCULAR STUDY |
| 93980 | PENILE VASCULAR STUDY |
| 93981 | PENILE VASCULAR STUDY |
| 93985 | DUP-SCAN HEMO COMPL BI STD |
| 93986 | DUP-SCAN HEMO COMPL UNI STD |
| 93990 | DOPPLER FLOW TESTING |
| 94002 | VENT MGMT INPAT INIT DAY |
| 94003 | VENT MGMT INPAT SUBQ DAY |
| 94004 | VENT MGMT NF PER DAY |
| 94005 | HOME VENT MGMT SUPERVISION |
| 94010 | BREATHING CAPACITY TEST |
| 94011 | SPIROMETRY UP TO 2 YRS OLD |
| 94012 | SPIRMTRY W/BRNCHDIL INF-2 YR |
| 94013 | MEAS LUNG VOL THRU 2 YRS |
| 94014 | PATIENT RECORDED SPIROMETRY |
| 94015 | PATIENT RECORDED SPIROMETRY |
| 94016 | REVIEW PATIENT SPIROMETRY |
| 94060 | EVALUATION OF WHEEZING |
| 94070 | EVALUATION OF WHEEZING |
| 94150 | VITAL CAPACITY TEST |
| 94200 | LUNG FUNCTION TEST (MBC/MVV) |
| 94250 | EXPIRED GAS COLLECTION |
| 94375 | RESPIRATORY FLOW VOLUME LOOP |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 94400 | CO2 BREATHING RESPONSE CURVE |
| 94450 | HYPOXIA RESPONSE CURVE |
| 94452 | HAST W/REPORT |
| 94453 | HAST W/OXYGEN TITRATE |
| 94610 | SURFACTANT ADMIN THRU TUBE |
| 94617 | EXERCISE TST BRNCSPSM |
| 94618 | PULMONARY STRESS TESTING |
| 94619 | EXERCISE TST BRNCSPSM WO ECG |
| 94621 | CARDIOPULM EXERCISE TESTING |
| 94640 | AIRWAY INHALATION TREATMENT |
| 94642 | AEROSOL INHALATION TREATMENT |
| 94644 | CBT 1ST HOUR |
| 94645 | CBT EACH ADDL HOUR |
| 94660 | POS AIRWAY PRESSURE CPAP |
| 94662 | NEG PRESS VENTILATION CNP |
| 94664 | EVALUATE PT USE OF INHALER |
| 94667 | CHEST WALL MANIPULATION |
| 94668 | CHEST WALL MANIPULATION |
| 94669 | MECHANICAL CHEST WALL OSCILL |
| 94680 | EXHALED AIR ANALYSIS O2 |
| 94681 | EXHALED AIR ANALYSIS O2/CO2 |
| 94690 | EXHALED AIR ANALYSIS |
| 94726 | PULM FUNCT TST PLETHYSMOGRAP |
| 94727 | PULM FUNCTION TEST BY GAS |
| 94728 | AIRWY RESIST BY OSCILLOMETRY |
| 94729 | CO/MEMBANE DIFFUSE CAPACITY |
| 94750 | PULMONARY COMPLIANCE STUDY |
| 94760 | MEASURE BLOOD OXYGEN LEVEL |
| 94761 | MEASURE BLOOD OXYGEN LEVEL |
| 94762 | MEASURE BLOOD OXYGEN LEVEL |
| 94770 | EXHALED CARBON DIOXIDE TEST |
| 94772 | BREATH RECORDING INFANT |
| 94774 | PED HOME APNEA REC COMPL |
| 94775 | PED HOME APNEA REC HK-UP |
| 94776 | PED HOME APNEA REC DOWNLD |
| 94777 | PED HOME APNEA REC REPORT |
| 94780 | CARS/BD TST INFT-12MO 60 MIN |
| 94781 | CARS/BD TST INFT-12MO +30MIN |
| 95004 | PERCUT ALLERGY SKIN TESTS |
| 95012 | EXHALED NITRIC OXIDE MEAS |
| 95017 | PERQ & ICUT ALLG TEST VENOMS |
| 95018 | PERQ&IC ALLG TEST DRUGS/BIOL |
| 95024 | ICUT ALLERGY TEST DRUG/BUG |
| 95027 | ICUT ALLERGY TITRATE-AIRBORN |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 95028 | ICUT ALLERGY TEST-DELAYED |
| 95044 | ALLERGY PATCH TESTS |
| 95052 | PHOTO PATCH TEST |
| 95056 | PHOTOSENSITIVITY TESTS |
| 95065 | NOSE ALLERGY TEST |
| 95070 | BRONCHIAL ALLERGY TESTS |
| 95071 | BRONCHIAL ALLERGY TESTS |
| 95076 | INGEST CHALLENGE INI 120 MIN |
| 95079 | INGEST CHALLENGE ADDL 60 MIN |
| 95115 | IMMUNOTHERAPY ONE INJECTION |
| 95117 | IMMUNOTHERAPY INJECTIONS |
| 95120 | IMMUNOTHERAPY ONE INJECTION |
| 95125 | IMMUNOTHERAPY 2/> INJECTIONS |
| 95130 | IMMNTX 1 STING INSECT |
| 95131 | IMMNTX 2 STING INSECTS |
| 95132 | IMMNTX 3 STING INSECTS |
| 95133 | IMMNTX 4 STING INSECTS |
| 95134 | IMMNTX 5 STING INSECTS |
| 95144 | ANTIGEN THERAPY SERVICES |
| 95145 | ANTIGEN THERAPY SERVICES |
| 95146 | ANTIGEN THERAPY SERVICES |
| 95147 | ANTIGEN THERAPY SERVICES |
| 95148 | ANTIGEN THERAPY SERVICES |
| 95149 | ANTIGEN THERAPY SERVICES |
| 95165 | ANTIGEN THERAPY SERVICES |
| 95170 | ANTIGEN THERAPY SERVICES |
| 95180 | RAPID DESENSITIZATION |
| 95249 | CONT GLUC MNTR PT PROV EQP |
| 95250 | CONT GLUC MNTR PHYS/QHP EQP |
| 95251 | CONT GLUC MNTR ANALYSIS I&R |
| 95700 | EEG CONT REC W/VID EEG TECH |
| 95705 | EEG W/O VID 2-12 HR UNMNTR |
| 95706 | EEG WO VID 2-12HR INTMT MNTR |
| 95707 | EEG W/O VID 2-12HR CONT MNTR |
| 95708 | EEG WO VID EA 12-26HR UNMNTR |
| 95709 | EEG W/O VID EA 12-26HR INTMT |
| 95710 | EEG W/O VID EA 12-26HR CONT |
| 95717 | EEG PHYS/QHP 2-12 HR W/O VID |
| 95719 | EEG PHYS/QHP EA INCR W/O VID |
| 95721 | EEG PHY/QHP>36<60 HR W/O VID |
| 95723 | EEG PHY/QHP>60<84 HR W/O VID |
| 95725 | EEG PHY/QHP>84 HR W/O VID |
| 95726 | EEG PHY/QHP>84 HR W/VEEG |
| 95782 | POLYSOM <6 YRS 4/> PARAMTRS |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 95783 | POLYSOM <6 YRS CPAP/BILVL |
| 95800 | SLP STDY UNATTENDED |
| 95801 | SLP STDY UNATND W/ANAL |
| 95805 | MULTIPLE SLEEP LATENCY TEST |
| 95806 | SLEEP STUDY UNATT&RESP EFFT |
| 95807 | SLEEP STUDY ATTENDED |
| 95808 | POLYSOM ANY AGE 1-3> PARAM |
| 95810 | POLYSOM 6/> YRS 4/> PARAM |
| 95811 | POLYSOM 6/>YRS CPAP 4/> PARM |
| 95812 | EEG 41-60 MINUTES |
| 95813 | EEG EXTND MNTR 61-119 MIN |
| 95816 | EEG AWAKE AND DROWSY |
| 95819 | EEG AWAKE AND ASLEEP |
| 95822 | EEG COMA OR SLEEP ONLY |
| 95824 | EEG CEREBRAL DEATH ONLY |
| 95829 | SURGERY ELECTROCORTICOGRAM |
| 95830 | INSERT ELECTRODES FOR EEG |
| 95836 | ECOG IMPLTD BRN NPGT <30 D |
| 95857 | CHOLINESTERASE CHALLENGE |
| 95860 | MUSCLE TEST ONE LIMB |
| 95861 | MUSCLE TEST 2 LIMBS |
| 95863 | MUSCLE TEST 3 LIMBS |
| 95864 | MUSCLE TEST 4 LIMBS |
| 95865 | MUSCLE TEST LARYNX |
| 95866 | MUSCLE TEST HEMIDIAPHRAGM |
| 95867 | MUSCLE TEST CRAN NERV UNILAT |
| 95868 | MUSCLE TEST CRAN NERVE BILAT |
| 95869 | MUSCLE TEST THOR PARASPINAL |
| 95870 | MUSCLE TEST NONPARASPINAL |
| 95872 | MUSCLE TEST ONE FIBER |
| 95873 | GUIDE NERV DESTR ELEC STIM |
| 95874 | GUIDE NERV DESTR NEEDLE EMG |
| 95875 | LIMB EXERCISE TEST |
| 95885 | MUSC TST DONE W/NERV TST LIM |
| 95886 | MUSC TEST DONE W/N TEST COMP |
| 95887 | MUSC TST DONE W/N TST NONEXT |
| 95907 | NVR CNDJ TST 1-2 STUDIES |
| 95908 | NRV CNDJ TST 3-4 STUDIES |
| 95909 | NRV CNDJ TST 5-6 STUDIES |
| 95910 | NRV CNDJ TEST 7-8 STUDIES |
| 95911 | NRV CNDJ TEST 9-10 STUDIES |
| 95912 | NRV CNDJ TEST 11-12 STUDIES |
| 95913 | NRV CNDJ TEST 13/> STUDIES |
| 95921 | AUTONOMIC NRV PARASYM INERVJ |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 95922 | AUTONOMIC NRV ADRENRG INERVJ |
| 95923 | AUTONOMIC NRV SYST FUNJ TEST |
| 95924 | ANS PARASYMP & SYMP W/TILT |
| 95925 | SOMATOSENSORY TESTING |
| 95926 | SOMATOSENSORY TESTING |
| 95927 | SOMATOSENSORY TESTING |
| 95928 | C MOTOR EVOKED UPPR LIMBS |
| 95929 | C MOTOR EVOKED LWR LIMBS |
| 95930 | VISUAL EP TEST CNS W/I&R |
| 95933 | BLINK REFLEX TEST |
| 95937 | NEUROMUSCULAR JUNCTION TEST |
| 95938 | SOMATOSENSORY TESTING |
| 95939 | C MOTOR EVOKED UPR&LWR LIMBS |
| 95940 | IONM IN OPERATNG ROOM 15 MIN |
| 95941 | IONM REMOTE/>1 PT OR PER HR |
| 95943 | PARASYMP&SYMP HRT RATE TEST |
| 95954 | EEG MONITORING/GIVING DRUGS |
| 95955 | EEG DURING SURGERY |
| 95957 | EEG DIGITAL ANALYSIS |
| 95958 | EEG MONITORING/FUNCTION TEST |
| 95965 | MEG SPONTANEOUS |
| 95966 | MEG EVOKED SINGLE |
| 95967 | MEG EVOKED EACH ADDL |
| 95976 | ALYS SMPL CN NPGT PRGRMG |
| 95977 | ALYS CPLX CN NPGT PRGRMG |
| 95981 | IO ANAL GAST N-STIM SUBSQ |
| 95982 | IO GA N-STIM SUBSQ W/REPROG |
| 95983 | ALYS BRN NPGT PRGRMG 15 MIN |
| 95984 | ALYS BRN NPGT PRGRMG ADDL 15 |
| 95990 | SPIN/BRAIN PUMP REFIL & MAIN |
| 95991 | SPIN/BRAIN PUMP REFIL & MAIN |
| 95992 | CANALITH REPOSITIONING PROC |
| 96000 | MOTION ANALYSIS VIDEO/3D |
| 96001 | MOTION TEST W/FT PRESS MEAS |
| 96002 | DYNAMIC SURFACE EMG |
| 96003 | DYNAMIC FINE WIRE EMG |
| 96004 | PHYS REVIEW OF MOTION TESTS |
| 96020 | FUNCTIONAL BRAIN MAPPING |
| 96040 | GENETIC COUNSELING 30 MIN |
| 96105 | ASSESSMENT OF APHASIA |
| 96110 | DEVELOPMENTAL SCREEN W/SCORE |
| 96112 | DEVEL TST PHYS/QHP 1ST HR |
| 96113 | DEVEL TST PHYS/QHP EA ADDL |
| 96116 | NUBHVL XM PHYS/QHP 1ST HR |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 96121 | NUBHVL XM PHY/QHP EA ADDL HR |
| 96125 | COGNITIVE TEST BY HC PRO |
| 96127 | BRIEF EMOTIONAL/BEHAV ASSMT |
| 96130 | PSYCL TST EVAL PHYS/QHP 1ST |
| 96131 | PSYCL TST EVAL PHYS/QHP EA |
| 96132 | NRPSYC TST EVAL PHYS/QHP 1ST |
| 96133 | NRPSYC TST EVAL PHYS/QHP EA |
| 96136 | PSYCL/NRPSYC TST PHY/QHP 1ST |
| 96137 | PSYCL/NRPSYC TST PHY/QHP EA |
| 96138 | PSYCL/NRPSYC TECH 1ST |
| 96139 | PSYCL/NRPSYC TST TECH EA |
| 96146 | PSYCL/NRPSYC TST AUTO RESULT |
| 96156 | HLTH BHV ASSMT/REASSESSMENT |
| 96158 | HLTH BHV IVNTJ INDIV 1ST 30 |
| 96159 | HLTH BHV IVNTJ INDIV EA ADDL |
| 96161 | CAREGIVER HEALTH RISK ASSMT |
| 96164 | HLTH BHV IVNTJ GRP 1ST 30 |
| 96165 | HLTH BHV IVNTJ GRP EA ADDL |
| 96167 | HLTH BHV IVNTJ FAM 1ST 30 |
| 96168 | HLTH BHV IVNTJ FAM EA ADDL |
| 96170 | HLTH BHV IVNTJ FAM WO PT 1ST |
| 96171 | HLTH BHV IVNTJ FAM W/O PT EA |
| 96360 | HYDRATION IV INFUSION INIT |
| 96361 | HYDRATE IV INFUSION ADD-ON |
| 96365 | THER/PROPH/DIAG IV INF INIT |
| 96366 | THER/PROPH/DIAG IV INF ADDON |
| 96367 | TX/PROPH/DG ADDL SEQ IV INF |
| 96368 | THER/DIAG CONCURRENT INF |
| 96369 | SC THER INFUSION UP TO 1 HR |
| 96370 | SC THER INFUSION ADDL HR |
| 96371 | SC THER INFUSION RESET PUMP |
| 96372 | THER/PROPH/DIAG INJ SC/IM |
| 96373 | THER/PROPH/DIAG INJ IA |
| 96374 | THER/PROPH/DIAG INJ IV PUSH |
| 96375 | TX/PRO/DX INJ NEW DRUG ADDON |
| 96376 | TX/PRO/DX INJ SAME DRUG ADON |
| 96401 | CHEMO ANTI-NEOPL SQ/IM |
| 96402 | CHEMO HORMON ANTINEOPL SQ/IM |
| 96405 | CHEMO INTRALESIONAL UP TO 7 |
| 96406 | CHEMO INTRALESIONAL OVER 7 |
| 96409 | CHEMO IV PUSH SNGL DRUG |
| 96411 | CHEMO IV PUSH ADDL DRUG |
| 96413 | CHEMO IV INFUSION 1 HR |
| 96415 | CHEMO IV INFUSION ADDL HR |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 96416 | CHEMO PROLONG INFUSE W/PUMP |
| 96417 | CHEMO IV INFUS EACH ADDL SEQ |
| 96420 | CHEMO IA PUSH TECNIQUE |
| 96422 | CHEMO IA INFUSION UP TO 1 HR |
| 96423 | CHEMO IA INFUSE EACH ADDL HR |
| 96425 | CHEMOTHERAPY INFUSION METHOD |
| 96440 | CHEMOTHERAPY INTRACAVITARY |
| 96446 | CHEMOTX ADMN PRTL CAVITY |
| 96450 | CHEMOTHERAPY INTO CNS |
| 96521 | REFILL/MAINT PORTABLE PUMP |
| 96522 | REFILL/MAINT PUMP/RESVR SYST |
| 96523 | IRRIG DRUG DELIVERY DEVICE |
| 96542 | CHEMOTHERAPY INJECTION |
| 96549 | CHEMOTHERAPY UNSPECIFIED |
| 96567 | PDT DSTR PRMLG LES SKN |
| 96570 | PHOTODYNMC TX 30 MIN ADD-ON |
| 96571 | PHOTODYNAMIC TX ADDL 15 MIN |
| 96900 | ULTRAVIOLET LIGHT THERAPY |
| 96904 | WHOLE BODY PHOTOGRAPHY |
| 96910 | PHOTOCHEMOTHERAPY WITH UV-B |
| 96912 | PHOTOCHEMOTHERAPY WITH UV-A |
| 96913 | PHOTOCHEMOTHERAPY UV-A OR B |
| 96920 | LASER TX SKIN < 250 SQ CM |
| 96921 | LASER TX SKIN 250-500 SQ CM |
| 96922 | LASER TX SKIN >500 SQ CM |
| 96931 | RCM CELULR SUBCELULR IMG SKN |
| 96932 | RCM CELULR SUBCELULR IMG SKN |
| 96933 | RCM CELULR SUBCELULR IMG SKN |
| 96934 | RCM CELULR SUBCELULR IMG SKN |
| 96935 | RCM CELULR SUBCELULR IMG SKN |
| 96936 | RCM CELULR SUBCELULR IMG SKN |
| 97012 | MECHANICAL TRACTION THERAPY |
| 97014 | ELECTRIC STIMULATION THERAPY |
| 97016 | VASOPNEUMATIC DEVICE THERAPY |
| 97018 | PARAFFIN BATH THERAPY |
| 97024 | DIATHERMY EG MICROWAVE |
| 97026 | INFRARED THERAPY |
| 97028 | ULTRAVIOLET THERAPY |
| 97032 | ELECTRICAL STIMULATION |
| 97033 | ELECTRIC CURRENT THERAPY |
| 97034 | CONTRAST BATH THERAPY |
| 97110 | THERAPEUTIC EXERCISES |
| 97112 | NEUROMUSCULAR REEDUCATION |
| 97116 | GAIT TRAINING THERAPY |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 97124 | MASSAGE THERAPY |
| 97129 | THER IVNTJ 1ST 15 MIN |
| 97130 | THER IVNTJ EA ADDL 15 MIN |
| 97140 | MANUAL THERAPY 1/> REGIONS |
| 97150 | GROUP THERAPEUTIC PROCEDURES |
| 97161 | PT EVAL LOW COMPLEX 20 MIN |
| 97162 | PT EVAL MOD COMPLEX 30 MIN |
| 97163 | PT EVAL HIGH COMPLEX 45 MIN |
| 97164 | PT RE-EVAL EST PLAN CARE |
| 97165 | OT EVAL LOW COMPLEX 30 MIN |
| 97166 | OT EVAL MOD COMPLEX 45 MIN |
| 97167 | OT EVAL HIGH COMPLEX 60 MIN |
| 97168 | OT RE-EVAL EST PLAN CARE |
| 97530 | THERAPEUTIC ACTIVITIES |
| 97597 | RMVL DEVITAL TIS 20 CM/< |
| 97598 | RMVL DEVITAL TIS ADDL 20CM/< |
| 97602 | WOUND(S) CARE NON-SELECTIVE |
| 97605 | NEG PRESS WOUND TX </=50 CM |
| 97606 | NEG PRESS WOUND TX >50 CM |
| 97607 | NEG PRESS WND TX </=50 SQ CM |
| 97608 | NEG PRESS WOUND TX >50 CM |
| 97750 | PHYSICAL PERFORMANCE TEST |
| 97755 | ASSISTIVE TECHNOLOGY ASSESS |
| 97760 | ORTHOTIC MGMT&TRAING 1ST ENC |
| 97761 | PROSTHETIC TRAING 1ST ENC |
| 97763 | ORTHC/PROSTC MGMT SBSQ ENC |
| 97802 | MEDICAL NUTRITION INDIV IN |
| 97803 | MED NUTRITION INDIV SUBSEQ |
| 97804 | MEDICAL NUTRITION GROUP |
| 98925 | OSTEOPATH MANJ 1-2 REGIONS |
| 98926 | OSTEOPATH MANJ 3-4 REGIONS |
| 98927 | OSTEOPATH MANJ 5-6 REGIONS |
| 98928 | OSTEOPATH MANJ 7-8 REGIONS |
| 98929 | OSTEOPATH MANJ 9-10 REGIONS |
| 98940 | CHIROPRACT MANJ 1-2 REGIONS |
| 98941 | CHIROPRACT MANJ 3-4 REGIONS |
| 98942 | CHIROPRACTIC MANJ 5 REGIONS |
| 98943 | CHIROPRACT MANJ XTRSPINL 1/> |
| 98960 | SELF-MGMT EDUC & TRAIN 1 PT |
| 98961 | SELF-MGMT EDUC/TRAIN 2-4 PT |
| 98962 | SELF-MGMT EDUC/TRAIN 5-8 PT |
| 99091 | COLLJ & INTERPJ DATA EA 30 D |
| 99100 | SPECIAL ANESTHESIA SERVICE |
| 99116 | ANESTHESIA WITH HYPOTHERMIA |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 99135 | SPECIAL ANESTHESIA PROCEDURE |
| 99140 | EMERGENCY ANESTHESIA |
| 99151 | MOD SED SAME PHYS/QHP <5 YRS |
| 99152 | MOD SED SAME PHYS/QHP 5/>YRS |
| 99153 | MOD SED SAME PHYS/QHP EA |
| 99155 | MOD SED OTH PHYS/QHP <5 YRS |
| 99156 | MOD SED OTH PHYS/QHP 5/>YRS |
| 99157 | MOD SED OTHER PHYS/QHP EA |
| 99170 | ANOGENITAL EXAM CHILD W IMAG |
| 99173 | VISUAL ACUITY SCREEN |
| 99175 | INDUCTION OF VOMITING |
| 99177 | OCULAR INSTRUMNT SCREEN BIL |
| 99184 | HYPOTHERMIA ILL NEONATE |
| 99190 | SPECIAL PUMP SERVICES |
| 99191 | SPECIAL PUMP SERVICES |
| 99192 | SPECIAL PUMP SERVICES |
| 99195 | PHLEBOTOMY |
| 99201 | OFFICE/OUTPATIENT VISIT NEW |
| 99202 | OFFICE/OUTPATIENT VISIT NEW |
| 99203 | OFFICE/OUTPATIENT VISIT NEW |
| 99204 | OFFICE/OUTPATIENT VISIT NEW |
| 99205 | OFFICE/OUTPATIENT VISIT NEW |
| 99211 | OFFICE/OUTPATIENT VISIT EST |
| 99212 | OFFICE/OUTPATIENT VISIT EST |
| 99213 | OFFICE/OUTPATIENT VISIT EST |
| 99214 | OFFICE/OUTPATIENT VISIT EST |
| 99215 | OFFICE/OUTPATIENT VISIT EST |
| 99217 | OBSERVATION CARE DISCHARGE |
| 99218 | INITIAL OBSERVATION CARE |
| 99219 | INITIAL OBSERVATION CARE |
| 99220 | INITIAL OBSERVATION CARE |
| 99221 | INITIAL HOSPITAL CARE |
| 99222 | INITIAL HOSPITAL CARE |
| 99223 | INITIAL HOSPITAL CARE |
| 99224 | SUBSEQUENT OBSERVATION CARE |
| 99225 | SUBSEQUENT OBSERVATION CARE |
| 99226 | SUBSEQUENT OBSERVATION CARE |
| 99231 | SUBSEQUENT HOSPITAL CARE |
| 99232 | SUBSEQUENT HOSPITAL CARE |
| 99233 | SUBSEQUENT HOSPITAL CARE |
| 99234 | OBSERV/HOSP SAME DATE |
| 99235 | OBSERV/HOSP SAME DATE |
| 99236 | OBSERV/HOSP SAME DATE |
| 99238 | HOSPITAL DISCHARGE DAY |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 99239 | HOSPITAL DISCHARGE DAY |
| 99241 | OFFICE CONSULTATION |
| 99242 | OFFICE CONSULTATION |
| 99243 | OFFICE CONSULTATION |
| 99244 | OFFICE CONSULTATION |
| 99245 | OFFICE CONSULTATION |
| 99251 | INPATIENT CONSULTATION |
| 99252 | INPATIENT CONSULTATION |
| 99253 | INPATIENT CONSULTATION |
| 99254 | INPATIENT CONSULTATION |
| 99255 | INPATIENT CONSULTATION |
| 99281 | EMERGENCY DEPT VISIT |
| 99282 | EMERGENCY DEPT VISIT |
| 99283 | EMERGENCY DEPT VISIT |
| 99284 | EMERGENCY DEPT VISIT |
| 99285 | EMERGENCY DEPT VISIT |
| 99288 | DIRECT ADVANCED LIFE SUPPORT |
| 99291 | CRITICAL CARE FIRST HOUR |
| 99292 | CRITICAL CARE ADDL 30 MIN |
| 99304 | NURSING FACILITY CARE INIT |
| 99305 | NURSING FACILITY CARE INIT |
| 99306 | NURSING FACILITY CARE INIT |
| 99307 | NURSING FAC CARE SUBSEQ |
| 99308 | NURSING FAC CARE SUBSEQ |
| 99309 | NURSING FAC CARE SUBSEQ |
| 99310 | NURSING FAC CARE SUBSEQ |
| 99315 | NURSING FAC DISCHARGE DAY |
| 99316 | NURSING FAC DISCHARGE DAY |
| 99318 | ANNUAL NURSING FAC ASSESSMNT |
| 99324 | DOMICIL/R-HOME VISIT NEW PAT |
| 99325 | DOMICIL/R-HOME VISIT NEW PAT |
| 99326 | DOMICIL/R-HOME VISIT NEW PAT |
| 99327 | DOMICIL/R-HOME VISIT NEW PAT |
| 99328 | DOMICIL/R-HOME VISIT NEW PAT |
| 99334 | DOMICIL/R-HOME VISIT EST PAT |
| 99335 | DOMICIL/R-HOME VISIT EST PAT |
| 99336 | DOMICIL/R-HOME VISIT EST PAT |
| 99337 | DOMICIL/R-HOME VISIT EST PAT |
| 99339 | DOMICIL/R-HOME CARE SUPERVIS |
| 99340 | DOMICIL/R-HOME CARE SUPERVIS |
| 99341 | HOME VISIT NEW PATIENT |
| 99342 | HOME VISIT NEW PATIENT |
| 99343 | HOME VISIT NEW PATIENT |
| 99344 | HOME VISIT NEW PATIENT |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 99345 | HOME VISIT NEW PATIENT |
| 99347 | HOME VISIT EST PATIENT |
| 99348 | HOME VISIT EST PATIENT |
| 99349 | HOME VISIT EST PATIENT |
| 99350 | HOME VISIT EST PATIENT |
| 99354 | PROLONG E&M/PSYCTX SERV O/P |
| 99355 | PROLONG E&M/PSYCTX SERV O/P |
| 99356 | PROLONGED SERVICE INPATIENT |
| 99357 | PROLONGED SERVICE INPATIENT |
| 99358 | PROLONG SERVICE W/O CONTACT |
| 99359 | PROLONG SERV W/O CONTACT ADD |
| 99360 | PHYSICIAN STANDBY SERVICES |
| 99366 | TEAM CONF W/PAT BY HC PROF |
| 99367 | TEAM CONF W/O PAT BY PHYS |
| 99368 | TEAM CONF W/O PAT BY HC PRO |
| 99377 | HOSPICE CARE SUPERVISION |
| 99378 | HOSPICE CARE SUPERVISION |
| 99379 | NURSING FAC CARE SUPERVISION |
| 99380 | NURSING FAC CARE SUPERVISION |
| 99381 | INIT PM E/M NEW PAT INFANT |
| 99382 | INIT PM E/M NEW PAT 1-4 YRS |
| 99383 | PREV VISIT NEW AGE 5-11 |
| 99384 | PREV VISIT NEW AGE 12-17 |
| 99385 | PREV VISIT NEW AGE 18-39 |
| 99386 | PREV VISIT NEW AGE 40-64 |
| 99387 | INIT PM E/M NEW PAT 65+ YRS |
| 99391 | PER PM REEVAL EST PAT INFANT |
| 99392 | PREV VISIT EST AGE 1-4 |
| 99393 | PREV VISIT EST AGE 5-11 |
| 99394 | PREV VISIT EST AGE 12-17 |
| 99395 | PREV VISIT EST AGE 18-39 |
| 99396 | PREV VISIT EST AGE 40-64 |
| 99397 | PER PM REEVAL EST PAT 65+ YR |
| 99401 | PREVENTIVE COUNSELING INDIV |
| 99402 | PREVENTIVE COUNSELING INDIV |
| 99403 | PREVENTIVE COUNSELING INDIV |
| 99404 | PREVENTIVE COUNSELING INDIV |
| 99406 | BEHAV CHNG SMOKING 3-10 MIN |
| 99407 | BEHAV CHNG SMOKING > 10 MIN |
| 99408 | AUDIT/DAST 15-30 MIN |
| 99409 | AUDIT/DAST OVER 30 MIN |
| 99411 | PREVENTIVE COUNSELING GROUP |
| 99412 | PREVENTIVE COUNSELING GROUP |
| 99415 | PROLONG CLINCL STAFF SVC |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| 99416 | PROLONG CLINCL STAFF SVC ADD |
| 99417 | PROLNG OFF/OP E/M EA 15 MIN |
| 99421 | OL DIG E/M SVC 5-10 MIN |
| 99422 | OL DIG E/M SVC 11-20 MIN |
| 99423 | OL DIG E/M SVC 21+ MIN |
| 99439 | CHRNC CARE MGMT SVC EA ADDL |
| 99441 | PHONE E/M PHYS/QHP 5-10 MIN |
| 99442 | PHONE E/M PHYS/QHP 11-20 MIN |
| 99443 | PHONE E/M PHYS/QHP 21-30 MIN |
| 99446 | NTRPROF PH1/NTRNET/EHR 5-10 |
| 99447 | NTRPROF PH1/NTRNET/EHR 11-20 |
| 99448 | NTRPROF PH1/NTRNET/EHR 21-30 |
| 99449 | NTRPROF PH1/NTRNET/EHR 31/> |
| 99453 | REM MNTR PHYSIOL PARAM SETUP |
| 99454 | REM MNTR PHYSIOL PARAM DEV |
| 99460 | INIT NB EM PER DAY HOSP |
| 99461 | INIT NB EM PER DAY NON-FAC |
| 99462 | SBSQ NB EM PER DAY HOSP |
| 99463 | SAME DAY NB DISCHARGE |
| 99464 | ATTENDANCE AT DELIVERY |
| 99465 | NB RESUSCITATION |
| 99466 | PED CRIT CARE TRANSPORT |
| 99467 | PED CRIT CARE TRANSPORT ADDL |
| 99468 | NEONATE CRIT CARE INITIAL |
| 99469 | NEONATE CRIT CARE SUBSQ |
| 99471 | PED CRITICAL CARE INITIAL |
| 99472 | PED CRITICAL CARE SUBSQ |
| 99475 | PED CRIT CARE AGE 2-5 INIT |
| 99476 | PED CRIT CARE AGE 2-5 SUBSQ |
| 99477 | INIT DAY HOSP NEONATE CARE |
| 99478 | IC LBW INF < 1500 GM SUBSQ |
| 99479 | IC LBW INF 1500-2500 G SUBSQ |
| 99480 | IC INF PBW 2501-5000 G SUBSQ |
| 99485 | SUPRV INTERFACILTY TRANSPORT |
| 99486 | SUPRV INTERFAC TRNSPORT ADDL |
| 99487 | CMPLX CHRON CARE W/O PT VSIT |
| 99489 | CMPLX CHRON CARE ADDL 30 MIN |
| 99491 | CHRNC CARE MGMT SVC 30 MIN |
| 99492 | 1ST PSYC COLLAB CARE MGMT |
| 99493 | SBSQ PSYC COLLAB CARE MGMT |
| 99494 | 1ST/SBSQ PSYC COLLAB CARE |
| 99495 | TRANS CARE MGMT 14 DAY DISCH |
| 99496 | TRANS CARE MGMT 7 DAY DISCH |
| A0382 | BASIC SUPPORT ROUTINE SUPPLS |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| A0384 | BLS DEFIBRILLATION SUPPLIES |
| A0392 | ALS DEFIBRILLATION SUPPLIES |
| A0394 | ALS IV DRUG THERAPY SUPPLIES |
| A0396 | ALS ESOPHAGEAL INTUB SUPPLS |
| A0398 | ALS ROUTINE DISPOSBLE SUPPLS |
| A0420 | AMBULANCE WAITING 1/2 HR |
| A0422 | AMBULANCE 02 LIFE SUSTAINING |
| A0424 | EXTRA AMBULANCE ATTENDANT |
| A0425 | GROUND MILEAGE |
| A0427 | ALS1-EMERGENCY |
| A0429 | BLS-EMERGENCY |
| A0432 | PI VOLUNTEER AMBULANCE CO |
| A0433 | ALS 2 |
| A0435 | FIXED WING AIR MILEAGE |
| A0436 | ROTARY WING AIR MILEAGE |
| A0998 | AMBULANCE RESPONSE/TREATMENT |
| A4206 | 1 CC STERILE SYRINGE&NEEDLE |
| A4207 | 2 CC STERILE SYRINGE&NEEDLE |
| A4208 | 3 CC STERILE SYRINGE&NEEDLE |
| A4209 | 5+ CC STERILE SYRINGE&NEEDLE |
| A4210 | NONNEEDLE INJECTION DEVICE |
| A4211 | SUPP FOR SELF-ADM INJECTIONS |
| A4212 | NON CORING NEEDLE OR STYLET |
| A4213 | 20+ CC SYRINGE ONLY |
| A4215 | STERILE NEEDLE |
| A4216 | STERILE WATER/SALINE, 10 ML |
| A4217 | STERILE WATER/SALINE, 500 ML |
| A4218 | STERILE SALINE OR WATER |
| A4221 | SUPP NON-INSULIN INF CATH/WK |
| A4230 | INFUS INSULIN PUMP NON NEEDL |
| A4231 | INFUSION INSULIN PUMP NEEDLE |
| A4232 | SYRINGE W/NEEDLE INSULIN 3CC |
| A4233 | ALKALIN BATT FOR GLUCOSE MON |
| A4234 | J-CELL BATT FOR GLUCOSE MON |
| A4235 | LITHIUM BATT FOR GLUCOSE MON |
| A4236 | SILVR OXIDE BATT GLUCOSE MON |
| A4244 | ALCOHOL OR PEROXIDE PER PINT |
| A4253 | BLOOD GLUCOSE/REAGENT STRIPS |
| A4255 | GLUCOSE MONITOR PLATFORMS |
| A4256 | CALIBRATOR SOLUTION/CHIPS |
| A4258 | LANCET DEVICE EACH |
| A4259 | LANCETS PER BOX |
| A4261 | CERVICAL CAP CONTRACEPTIVE |
| A4262 | TEMPORARY TEAR DUCT PLUG |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| A4263 | PERMANENT TEAR DUCT PLUG |
| A4264 | INTRATUBAL OCCLUSION DEVICE |
| A4266 | DIAPHRAGM |
| A4270 | DISPOSABLE ENDOSCOPE SHEATH |
| A4280 | BRST PRSTHS ADHSV ATTCHMNT |
| A4290 | SACRAL NERVE STIM TEST LEAD |
| A4300 | CATH IMPL VASC ACCESS PORTAL |
| A4301 | IMPLANTABLE ACCESS SYST PERC |
| A4306 | DRUG DELIVERY SYSTEM <=50 ML |
| A4310 | INSERT TRAY W/O BAG/CATH |
| A4311 | CATHETER W/O BAG 2-WAY LATEX |
| A4312 | CATH W/O BAG 2-WAY SILICONE |
| A4313 | CATHETER W/BAG 3-WAY |
| A4314 | CATH W/DRAINAGE 2-WAY LATEX |
| A4315 | CATH W/DRAINAGE 2-WAY SILCNE |
| A4316 | CATH W/DRAINAGE 3-WAY |
| A4320 | IRRIGATION TRAY |
| A4321 | CATH THERAPEUTIC IRRIG AGENT |
| A4322 | IRRIGATION SYRINGE |
| A4326 | MALE EXTERNAL CATHETER |
| A4327 | FEM URINARY COLLECT DEV CUP |
| A4328 | FEM URINARY COLLECT POUCH |
| A4330 | STOOL COLLECTION POUCH |
| A4331 | EXTENSION DRAINAGE TUBING |
| A4332 | LUBE STERILE PACKET |
| A4333 | URINARY CATH ANCHOR DEVICE |
| A4334 | URINARY CATH LEG STRAP |
| A4335 | INCONTINENCE SUPPLY |
| A4336 | URETHRAL INSERT |
| A4337 | INCONTINENT RECTAL INSERT |
| A4338 | INDWELLING CATHETER LATEX |
| A4340 | INDWELLING CATHETER SPECIAL |
| A4344 | CATH INDW FOLEY 2 WAY SILICN |
| A4346 | CATH INDW FOLEY 3 WAY |
| A4349 | DISPOSABLE MALE EXTERNAL CAT |
| A4351 | STRAIGHT TIP URINE CATHETER |
| A4352 | COUDE TIP URINARY CATHETER |
| A4353 | INTERMITTENT URINARY CATH |
| A4354 | CATH INSERTION TRAY W/BAG |
| A4355 | BLADDER IRRIGATION TUBING |
| A4356 | EXT URETH CLMP OR COMPR DVC |
| A4357 | BEDSIDE DRAINAGE BAG |
| A4358 | URINARY LEG OR ABDOMEN BAG |
| A4360 | DISPOSABLE EXT URETHRAL DEV |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| A4361 | OSTOMY FACE PLATE |
| A4362 | SOLID SKIN BARRIER |
| A4363 | OSTOMY CLAMP, REPLACEMENT |
| A4364 | ADHESIVE, LIQUID OR EQUAL |
| A4366 | OSTOMY VENT |
| A4367 | OSTOMY BELT |
| A4368 | OSTOMY FILTER |
| A4369 | SKIN BARRIER LIQUID PER OZ |
| A4371 | SKIN BARRIER POWDER PER OZ |
| A4372 | SKIN BARRIER SOLID 4X4 EQUIV |
| A4373 | SKIN BARRIER WITH FLANGE |
| A4375 | DRAINABLE PLASTIC PCH W FCPL |
| A4376 | DRAINABLE RUBBER PCH W FCPLT |
| A4377 | DRAINABLE PLSTIC PCH W/O FP |
| A4378 | DRAINABLE RUBBER PCH W/O FP |
| A4379 | URINARY PLASTIC POUCH W FCPL |
| A4380 | URINARY RUBBER POUCH W FCPLT |
| A4381 | URINARY PLASTIC POUCH W/O FP |
| A4382 | URINARY HVY PLSTC PCH W/O FP |
| A4383 | URINARY RUBBER POUCH W/O FP |
| A4384 | OSTOMY FACEPLT/SILICONE RING |
| A4385 | OST SKN BARRIER SLD EXT WEAR |
| A4387 | OST CLSD POUCH W ATT ST BARR |
| A4388 | DRAINABLE PCH W EX WEAR BARR |
| A4389 | DRAINABLE PCH W ST WEAR BARR |
| A4390 | DRAINABLE PCH EX WEAR CONVEX |
| A4391 | URINARY POUCH W EX WEAR BARR |
| A4392 | URINARY POUCH W ST WEAR BARR |
| A4393 | URINE PCH W EX WEAR BAR CONV |
| A4394 | OSTOMY POUCH LIQ DEODORANT |
| A4395 | OSTOMY POUCH SOLID DEODORANT |
| A4396 | PERISTOMAL HERNIA SUPPRT BLT |
| A4397 | IRRIGATION SUPPLY SLEEVE |
| A4398 | OSTOMY IRRIGATION BAG |
| A4399 | OSTOMY IRRIG CONE/CATH W BRS |
| A4400 | OSTOMY IRRIGATION SET |
| A4402 | LUBRICANT PER OUNCE |
| A4404 | OSTOMY RING EACH |
| A4405 | NONPECTIN BASED OSTOMY PASTE |
| A4406 | PECTIN BASED OSTOMY PASTE |
| A4407 | EXT WEAR OST SKN BARR <=4SQ" |
| A4408 | EXT WEAR OST SKN BARR >4SQ" |
| A4409 | OST SKN BARR CONVEX <=4 SQ I |
| A4410 | OST SKN BARR EXTND >4 SQ |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| A4411 | OST SKN BARR EXTND =4SQ |
| A4412 | OST POUCH DRAIN HIGH OUTPUT |
| A4413 | 2 PC DRAINABLE OST POUCH |
| A4414 | OST SKNBAR W/O CONV<=4 SQ IN |
| A4415 | OST SKN BARR W/O CONV >4 SQI |
| A4416 | OST PCH CLSD W BARRIER/FILTR |
| A4417 | OST PCH W BAR/BLTINCONV/FLTR |
| A4418 | OST PCH CLSD W/O BAR W FILTR |
| A4419 | OST PCH FOR BAR W FLANGE/FLT |
| A4420 | OST PCH CLSD FOR BAR W LK FL |
| A4421 | OSTOMY SUPPLY MISC |
| A4422 | OST POUCH ABSORBENT MATERIAL |
| A4423 | OST PCH FOR BAR W LK FL/FLTR |
| A4424 | OST PCH DRAIN W BAR & FILTER |
| A4425 | OST PCH DRAIN FOR BARRIER FL |
| A4426 | OST PCH DRAIN 2 PIECE SYSTEM |
| A4427 | OST PCH DRAIN/BARR LK FLNG/F |
| A4428 | URINE OST POUCH W FAUCET/TAP |
| A4429 | URINE OST POUCH W BLTINCONV |
| A4430 | OST URINE PCH W B/BLTIN CONV |
| A4431 | OST PCH URINE W BARRIER/TAPV |
| A4432 | OS PCH URINE W BAR/FANGE/TAP |
| A4433 | URINE OST PCH BAR W LOCK FLN |
| A4434 | OST PCH URINE W LOCK FLNG/FT |
| A4435 | 1PC OST PCH DRAIN HGH OUTPUT |
| A4459 | MANUAL PUMP ENEMA, REUSABLE |
| A4481 | TRACHEOSTOMA FILTER |
| A4565 | SLINGS |
| A4566 | SHOULD SLING/VEST/ABRESTRAIN |
| A4570 | SPLINT |
| A4580 | CAST SUPPLIES (PLASTER) |
| A4590 | SPECIAL CASTING MATERIAL |
| A4604 | TUBING WITH HEATING ELEMENT |
| A4605 | TRACH SUCTION CATH CLOSE SYS |
| A4606 | OXYGEN PROBE USED W OXIMETER |
| A4608 | TRANSTRACHEAL OXYGEN CATH |
| A4614 | HAND-HELD PEFR METER |
| A4615 | CANNULA NASAL |
| A4616 | TUBING (OXYGEN) PER FOOT |
| A4617 | MOUTH PIECE |
| A4618 | BREATHING CIRCUITS |
| A4619 | FACE TENT |
| A4620 | VARIABLE CONCENTRATION MASK |
| A4623 | TRACHEOSTOMY INNER CANNULA |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| A4624 | TRACHEAL SUCTION TUBE |
| A4625 | TRACH CARE KIT FOR NEW TRACH |
| A4626 | TRACHEOSTOMY CLEANING BRUSH |
| A4627 | SPACER BAG/RESERVOIR |
| A4628 | OROPHARYNGEAL SUCTION CATH |
| A4629 | TRACHEOSTOMY CARE KIT |
| A4657 | SYRINGE W/WO NEEDLE |
| A4671 | DISPOSABLE CYCLER SET |
| A4672 | DRAINAGE EXT LINE, DIALYSIS |
| A4673 | EXT LINE W EASY LOCK CONNECT |
| A4674 | CHEM/ANTISEPT SOLUTION, 8OZ |
| A4680 | ACTIVATED CARBON FILTER, EA |
| A4690 | DIALYZER, EACH |
| A4706 | BICARBONATE CONC SOL PER GAL |
| A4707 | BICARBONATE CONC POW PER PAC |
| A4708 | ACETATE CONC SOL PER GALLON |
| A4709 | ACID CONC SOL PER GALLON |
| A4714 | TREATED WATER PER GALLON |
| A4719 | "Y SET" TUBING |
| A4720 | DIALYSAT SOL FLD VOL > 249CC |
| A4721 | DIALYSAT SOL FLD VOL > 999CC |
| A4722 | DIALYS SOL FLD VOL > 1999CC |
| A4723 | DIALYS SOL FLD VOL > 2999CC |
| A4724 | DIALYS SOL FLD VOL > 3999CC |
| A4725 | DIALYS SOL FLD VOL > 4999CC |
| A4726 | DIALYS SOL FLD VOL > 5999CC |
| A4728 | DIALYSATE SOLUTION, NON-DEX |
| A4730 | FISTULA CANNULATION SET, EA |
| A4736 | TOPICAL ANESTHETIC, PER GRAM |
| A4737 | INJ ANESTHETIC PER 10 ML |
| A4740 | SHUNT ACCESSORY |
| A4750 | ART OR VENOUS BLOOD TUBING |
| A4755 | COMB ART/VENOUS BLOOD TUBING |
| A4760 | DIALYSATE SOL TEST KIT, EACH |
| A4765 | DIALYSATE CONC POW PER PACK |
| A4766 | DIALYSATE CONC SOL ADD 10 ML |
| A4770 | BLOOD COLLECTION TUBE/VACUUM |
| A4771 | SERUM CLOTTING TIME TUBE |
| A4772 | BLOOD GLUCOSE TEST STRIPS |
| A4773 | OCCULT BLOOD TEST STRIPS |
| A4774 | AMMONIA TEST STRIPS |
| A4802 | PROTAMINE SULFATE PER 50 MG |
| A4860 | DISPOSABLE CATHETER TIPS |
| A4911 | DRAIN BAG/BOTTLE |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| A4913 | MISC DIALYSIS SUPPLIES NOC |
| A4918 | VENOUS PRESSURE CLAMP |
| A5051 | POUCH CLSD W BARR ATTACHED |
| A5052 | CLSD OSTOMY POUCH W/O BARR |
| A5053 | CLSD OSTOMY POUCH FACEPLATE |
| A5054 | CLSD OSTOMY POUCH W/FLANGE |
| A5055 | STOMA CAP |
| A5056 | 1 PC OST POUCH W FILTER |
| A5057 | 1 PC OST POU W BUILT-IN CONV |
| A5061 | POUCH DRAINABLE W BARRIER AT |
| A5062 | DRNBLE OSTOMY POUCH W/O BARR |
| A5063 | DRAIN OSTOMY POUCH W/FLANGE |
| A5071 | URINARY POUCH W/BARRIER |
| A5072 | URINARY POUCH W/O BARRIER |
| A5073 | URINARY POUCH ON BARR W/FLNG |
| A5081 | STOMA PLUG OR SEAL, ANY TYPE |
| A5082 | CONTINENT STOMA CATHETER |
| A5083 | STOMA ABSORPTIVE COVER |
| A5093 | OSTOMY ACCESSORY CONVEX INSE |
| A5102 | BEDSIDE DRAIN BTL W/WO TUBE |
| A5105 | URINARY SUSPENSORY |
| A5112 | URINARY LEG BAG |
| A5113 | LATEX LEG STRAP |
| A5114 | FOAM/FABRIC LEG STRAP |
| A5120 | SKIN BARRIER, WIPE OR SWAB |
| A5121 | SOLID SKIN BARRIER 6X6 |
| A5122 | SOLID SKIN BARRIER 8X8 |
| A5126 | DISK/FOAM PAD +OR- ADHESIVE |
| A5131 | APPLIANCE CLEANER |
| A5200 | PERCUTANEOUS CATHETER ANCHOR |
| A6010 | COLLAGEN BASED WOUND FILLER |
| A6011 | COLLAGEN GEL/PASTE WOUND FIL |
| A6021 | COLLAGEN DRESSING <=16 SQ IN |
| A6022 | COLLAGEN DRSG>16<=48 SQ IN |
| A6023 | COLLAGEN DRESSING >48 SQ IN |
| A6024 | COLLAGEN DSG WOUND FILLER |
| A6025 | SILICONE GEL SHEET, EACH |
| A6154 | WOUND POUCH EACH |
| A6196 | ALGINATE DRESSING <=16 SQ IN |
| A6197 | ALGINATE DRSG >16 <=48 SQ IN |
| A6198 | ALGINATE DRESSING > 48 SQ IN |
| A6199 | ALGINATE DRSG WOUND FILLER |
| A6203 | COMPOSITE DRSG <= 16 SQ IN |
| A6204 | COMPOSITE DRSG >16<=48 SQ IN |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| A6205 | COMPOSITE DRSG > 48 SQ IN |
| A6206 | CONTACT LAYER <= 16 SQ IN |
| A6207 | CONTACT LAYER >16<= 48 SQ IN |
| A6208 | CONTACT LAYER > 48 SQ IN |
| A6209 | FOAM DRSG <=16 SQ IN W/O BDR |
| A6210 | FOAM DRG >16<=48 SQ IN W/O B |
| A6211 | FOAM DRG > 48 SQ IN W/O BRDR |
| A6212 | FOAM DRG <=16 SQ IN W/BORDER |
| A6213 | FOAM DRG >16<=48 SQ IN W/BDR |
| A6214 | FOAM DRG > 48 SQ IN W/BORDER |
| A6215 | FOAM DRESSING WOUND FILLER |
| A7000 | DISPOSABLE CANISTER FOR PUMP |
| A7002 | TUBING USED W SUCTION PUMP |
| A7003 | NEBULIZER ADMINISTRATION SET |
| A7004 | DISPOSABLE NEBULIZER SML VOL |
| A7005 | NONDISPOSABLE NEBULIZER SET |
| A7006 | FILTERED NEBULIZER ADMIN SET |
| A7007 | LG VOL NEBULIZER DISPOSABLE |
| A7008 | DISPOSABLE NEBULIZER PREFILL |
| A7009 | NEBULIZER RESERVOIR BOTTLE |
| A7010 | DISPOSABLE CORRUGATED TUBING |
| A7012 | NEBULIZER WATER COLLEC DEVIC |
| A7013 | DISPOSABLE COMPRESSOR FILTER |
| A7014 | COMPRESSOR NONDISPOS FILTER |
| A7015 | AEROSOL MASK USED W NEBULIZE |
| A7016 | NEBULIZER DOME & MOUTHPIECE |
| A7017 | NEBULIZER NOT USED W OXYGEN |
| A7018 | WATER DISTILLED W/NEBULIZER |
| A7020 | INTERFACE, COUGH STIM DEVICE |
| A7027 | COMBINATION ORAL/NASAL MASK |
| A7028 | REPL ORAL CUSHION COMBO MASK |
| A7029 | REPL NASAL PILLOW COMB MASK |
| A7030 | CPAP FULL FACE MASK |
| A7031 | REPLACEMENT FACEMASK INTERFA |
| A7032 | REPLACEMENT NASAL CUSHION |
| A7033 | REPLACEMENT NASAL PILLOWS |
| A7034 | NASAL APPLICATION DEVICE |
| A7035 | POS AIRWAY PRESS HEADGEAR |
| A7036 | POS AIRWAY PRESS CHINSTRAP |
| A7037 | POS AIRWAY PRESSURE TUBING |
| A7038 | POS AIRWAY PRESSURE FILTER |
| A7039 | FILTER, NON DISPOSABLE W PAP |
| A7040 | ONE WAY CHEST DRAIN VALVE |
| A7041 | WATER SEAL DRAIN CONTAINER |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| A7044 | PAP ORAL INTERFACE |
| A7045 | REPL EXHALATION PORT FOR PAP |
| A7046 | REPL WATER CHAMBER, PAP DEV |
| A7047 | RESP SUCTION ORAL INTERFACE |
| A7048 | VACUUM DRAIN BOTTLE/TUBE KIT |
| A7501 | TRACHEOSTOMA VALVE W DIAPHRA |
| A7502 | REPLACEMENT DIAPHRAGM/FPLATE |
| A7503 | HMES FILTER HOLDER OR CAP |
| A7504 | TRACHEOSTOMA HMES FILTER |
| A7505 | HMES OR TRACH VALVE HOUSING |
| A7506 | HMES/TRACHVALVE ADHESIVEDISK |
| A7507 | INTEGRATED FILTER & HOLDER |
| A7508 | HOUSING & INTEGRATED ADHESIV |
| A7509 | HEAT & MOISTURE EXCHANGE SYS |
| A7520 | TRACH/LARYN TUBE NON-CUFFED |
| A7521 | TRACH/LARYN TUBE CUFFED |
| A7522 | TRACH/LARYN TUBE STAINLESS |
| A7523 | TRACHEOSTOMY SHOWER PROTECT |
| A7524 | TRACHEOSTOMA STENT/STUD/BTTN |
| A7525 | TRACHEOSTOMY MASK |
| A7526 | TRACHEOSTOMY TUBE COLLAR |
| A7527 | TRACH/LARYN TUBE PLUG/STOP |
| A8000 | SOFT PROTECT HELMET PREFAB |
| A8001 | HARD PROTECT HELMET PREFAB |
| A9500 | TC99M SESTAMIBI |
| A9501 | TECHNETIUM TC-99M TEBOROXIME |
| A9502 | TC99M TETROFOSMIN |
| A9503 | TC99M MEDRONATE |
| A9504 | TC99M APCITIDE |
| A9505 | TL201 THALLIUM |
| A9507 | IN111 CAPROMAB |
| A9508 | I131 IODOBENGUATE, DX |
| A9509 | IODINE I-123 SOD IODIDE MIL |
| A9510 | TC99M DISOFENIN |
| A9512 | TC99M PERTECHNETATE |
| A9515 | CHOLINE C-11 |
| A9516 | IODINE I-123 SOD IODIDE MIC |
| A9517 | I131 IODIDE CAP, RX |
| A9520 | TC99 TILMANOCEPT DIAG 0.5MCI |
| A9521 | TC99M EXAMETAZIME |
| A9524 | I131 SERUM ALBUMIN, DX |
| A9526 | NITROGEN N-13 AMMONIA |
| A9527 | IODINE I-125 SODIUM IODIDE |
| A9528 | IODINE I-131 IODIDE CAP, DX |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| A9529 | I131 IODIDE SOL, DX |
| A9530 | I131 IODIDE SOL, RX |
| A9531 | I131 MAX 100UCI |
| A9532 | I125 SERUM ALBUMIN, DX |
| A9536 | TC99M DEPREOTIDE |
| A9537 | TC99M MEBROFENIN |
| A9538 | TC99M PYROPHOSPHATE |
| A9539 | TC99M PENTETATE |
| A9540 | TC99M MAA |
| A9541 | TC99M SULFUR COLLOID |
| A9542 | IN111 IBRITUMOMAB, DX |
| A9543 | Y90 IBRITUMOMAB, RX |
| A9546 | CO57/58 |
| A9547 | IN111 OXYQUINOLINE |
| A9548 | IN111 PENTETATE |
| A9550 | TC99M GLUCEPTATE |
| A9551 | TC99M SUCCIMER |
| A9553 | CR51 CHROMATE |
| A9554 | I125 IOTHALAMATE, DX |
| A9555 | RB82 RUBIDIUM |
| A9556 | GA67 GALLIUM |
| A9557 | TC99M BICISATE |
| A9558 | XE133 XENON 10MCI |
| A9559 | CO57 CYANO |
| A9560 | TC99M LABELED RBC |
| A9561 | TC99M OXIDRONATE |
| A9562 | TC99M MERTIATIDE |
| A9563 | P32 NA PHOSPHATE |
| A9564 | P32 CHROMIC PHOSPHATE |
| A9566 | TC99M FANOLESOMAB |
| A9567 | TECHNETIUM TC-99M AEROSOL |
| A9568 | TECHNETIUM TC99M ARCITUMOMAB |
| A9569 | TECHNETIUM TC-99M AUTO WBC |
| A9570 | INDIUM IN-111 AUTO WBC |
| A9571 | INDIUM IN-111 AUTO PLATELET |
| A9572 | INDIUM IN-111 PENTETREOTIDE |
| A9575 | INJ GADOTERATE MEGLUMI 0.1ML |
| A9576 | INJ PROHANCE MULTIPACK |
| A9577 | INJ MULTIHANCE |
| A9578 | INJ MULTIHANCE MULTIPACK |
| A9579 | GAD-BASE MR CONTRAST NOS,1ML |
| A9580 | SODIUM FLUORIDE F-18 |
| A9581 | GADOXETATE DISODIUM INJ |
| A9582 | IODINE I-123 IOBENGUANE |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| A9583 | GADOFOSVESET TRISODIUM INJ |
| A9584 | IODINE I-123 IOFLUPANE |
| A9585 | GADOBUTROL INJECTION |
| A9586 | FLORBETAPIR F18 |
| A9587 | GALLIUM GA-68 |
| A9588 | FLUCICLOVINE F-18 |
| A9589 | INSTI HEXAMINOLEVULINATE HCL |
| A9590 | IODINE I-131 IOBENGUANE 1MCI |
| A9591 | FLUOROESTRADIOL F 18 |
| A9592 | COPPER CU-64 DOTATATE DIAGNOSTIC 1 MCI |
| A9600 | SR89 STRONTIUM |
| A9604 | SM 153 LEXIDRONAM |
| A9606 | RADIUM RA223 DICHLORIDE THER |
| A9700 | ECHOCARDIOGRAPHY CONTRAST |
| B4034 | ENTER FEED SUPKIT SYR BY DAY |
| B4035 | ENTERAL FEED SUPP PUMP PER D |
| B4036 | ENTERAL FEED SUP KIT GRAV BY |
| B4081 | ENTERAL NG TUBING W/ STYLET |
| B4082 | ENTERAL NG TUBING W/O STYLET |
| B4083 | ENTERAL STOMACH TUBE LEVINE |
| B4087 | GASTRO/JEJUNO TUBE, STD |
| B4088 | GASTRO/JEJUNO TUBE, LOW-PRO |
| B4105 | ENZYME CARTRIDGE ENTERAL NUT |
| B4164 | PARENTERAL 50% DEXTROSE SOLU |
| B4168 | PARENTERAL SOL AMINO ACID 3. |
| B4172 | PARENTERAL SOL AMINO ACID 5. |
| B4176 | PARENTERAL SOL AMINO ACID 7- |
| B4178 | PARENTERAL SOL AMINO ACID > |
| B4180 | PARENTERAL SOL CARB > 50% |
| B4185 | PN SOLN NOS 10 GRAMS LIPIDS |
| B4189 | PARENTERAL SOL AMINO ACID & |
| B4193 | PARENTERAL SOL 52-73 GM PROT |
| B4197 | PARENTERAL SOL 74-100 GM PRO |
| B4199 | PARENTERAL SOL > 100GM PROTE |
| B4216 | PARENTERAL NUTRITION ADDITIV |
| B4220 | PARENTERAL SUPPLY KIT PREMIX |
| B4222 | PARENTERAL SUPPLY KIT HOMEMI |
| B4224 | PARENTERAL ADMINISTRATION KI |
| B5000 | PARENTERAL SOL RENAL-AMIROSY |
| B5100 | PARENTERAL SOLUTION HEPATIC |
| B5200 | PARENTERAL SOL HEPATIC FREAM |
| B9002 | ENTER NUTR INF PUMP ANY TYPE |
| B9004 | PARENTERAL INFUS PUMP PORTAB |
| B9006 | PARENTERAL INFUS PUMP STATIO |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| B9998 | ENTERAL SUPP NOT OTHERWISE C |
| B9999 | PARENTERAL SUPP NOT OTHRWS C |
| C1713 | ANCHOR/SCREW BN/BN,TIS/BN |
| C1714 | CATH, TRANS ATHERECTOMY, DIR |
| C1715 | BRACHYTHERAPY NEEDLE |
| C1721 | AICD, DUAL CHAMBER |
| C1722 | AICD, SINGLE CHAMBER |
| C1724 | CATH, TRANS ATHEREC,ROTATION |
| C1725 | CATH, TRANSLUMIN NON-LASER |
| C1726 | CATH, BAL DIL, NON-VASCULAR |
| C1727 | CATH, BAL TIS DIS, NON-VAS |
| C1728 | CATH, BRACHYTX SEED ADM |
| C1729 | CATH, DRAINAGE |
| C1730 | CATH, EP, 19 OR FEW ELECT |
| C1731 | CATH, EP, 20 OR MORE ELEC |
| C1732 | CATH, EP, DIAG/ABL, 3D/VECT |
| C1733 | CATH, EP, OTHR THAN COOL-TIP |
| C1748 | ENDOSCOPE, SINGLE, UGI |
| C1749 | ENDO, COLON, RETRO IMAGING |
| C1750 | CATH, HEMODIALYSIS,LONG-TERM |
| C1751 | CATH, INF, PER/CENT/MIDLINE |
| C1752 | CATH,HEMODIALYSIS,SHORT-TERM |
| C1753 | CATH, INTRAVAS ULTRASOUND |
| C1755 | CATHETER, INTRASPINAL |
| C1756 | CATH, PACING, TRANSESOPH |
| C1757 | CATH, THROMBECTOMY/EMBOLECT |
| C1758 | CATHETER, URETERAL |
| C1759 | CATH, INTRA ECHOCARDIOGRAPHY |
| C1760 | CLOSURE DEV, VASC |
| C1762 | CONN TISS, HUMAN(INC FASCIA) |
| C1763 | CONN TISS, NON-HUMAN |
| C1764 | EVENT RECORDER, CARDIAC |
| C1765 | ADHESION BARRIER |
| C1766 | INTRO/SHEATH,STRBLE,NON-PEEL |
| C1768 | GRAFT, VASCULAR |
| C1769 | GUIDE WIRE |
| C1770 | IMAGING COIL, MR, INSERTABLE |
| C1771 | REP DEV, URINARY, W/SLING |
| C1772 | INFUSION PUMP, PROGRAMMABLE |
| C1773 | RET DEV, INSERTABLE |
| C1776 | JOINT DEVICE (IMPLANTABLE) |
| C1777 | LEAD, AICD, ENDO SINGLE COIL |
| C1779 | LEAD, PMKR, TRANSVENOUS VDD |
| C1780 | LENS, INTRAOCULAR (NEW TECH) |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| C1781 | MESH (IMPLANTABLE) |
| C1782 | MORCELLATOR |
| C1783 | OCULAR IMP, AQUEOUS DRAIN DE |
| C1784 | OCULAR DEV, INTRAOP, DET RET |
| C1785 | PMKR, DUAL, RATE-RESP |
| C1786 | PMKR, SINGLE, RATE-RESP |
| C1787 | PATIENT PROGR, NEUROSTIM |
| C1788 | PORT, INDWELLING, IMP |
| C1789 | PROSTHESIS, BREAST, IMP |
| C1814 | RETINAL TAMP, SILICONE OIL |
| C1815 | PROS, URINARY SPH, IMP |
| C1817 | SEPTAL DEFECT IMP SYS |
| C1818 | INTEGRATED KERATOPROSTHESIS |
| C1819 | TISSUE LOCALIZATION-EXCISION |
| C1830 | POWER BONE MARROW BX NEEDLE |
| C1840 | TELESCOPIC INTRAOCULAR LENS |
| C1874 | STENT, COATED/COV W/DEL SYS |
| C1875 | STENT, COATED/COV W/O DEL SY |
| C1876 | STENT, NON-COA/NON-COV W/DEL |
| C1877 | STENT, NON-COAT/COV W/O DEL |
| C1878 | MATRL FOR VOCAL CORD |
| C1880 | VENA CAVA FILTER |
| C1881 | DIALYSIS ACCESS SYSTEM |
| C1882 | AICD, OTHER THAN SING/DUAL |
| C1884 | EMBOLIZATION PROTECT SYST |
| C1885 | CATH, TRANSLUMIN ANGIO LASER |
| C1886 | CATHETER, ABLATION |
| C1887 | CATHETER, GUIDING |
| C1888 | ENDOVAS NON-CARDIAC ABL CATH |
| C1891 | INFUSION PUMP,NON-PROG, PERM |
| C1892 | INTRO/SHEATH,FIXED,PEEL-AWAY |
| C1893 | INTRO/SHEATH, FIXED,NON-PEEL |
| C1894 | INTRO/SHEATH, NON-LASER |
| C1895 | LEAD, AICD, ENDO DUAL COIL |
| C1896 | LEAD, AICD, NON SING/DUAL |
| C1898 | LEAD, PMKR, OTHER THAN TRANS |
| C1899 | LEAD, PMKR/AICD COMBINATION |
| C1900 | LEAD, CORONARY VENOUS |
| C2613 | LUNG BX PLUG W/DEL SYS |
| C2614 | PROBE, PERC LUMB DISC |
| C2615 | SEALANT, PULMONARY, LIQUID |
| C2617 | STENT, NON-COR, TEM W/O DEL |
| C2618 | PROBE/NEEDLE, CRYO |
| C2619 | PMKR, DUAL, NON RATE-RESP |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| C2620 | PMKR, SINGLE, NON RATE-RESP |
| C2621 | PMKR, OTHER THAN SING/DUAL |
| C2622 | PROSTHESIS, PENILE, NON-INF |
| C2623 | CATH, TRANSLUMIN, DRUG-COAT |
| C2625 | STENT, NON-COR, TEM W/DEL SY |
| C2626 | INFUSION PUMP, NON-PROG,TEMP |
| C2627 | CATH, SUPRAPUBIC/CYSTOSCOPIC |
| C2629 | INTRO/SHEATH, LASER |
| C2630 | CATH, EP, COOL-TIP |
| C2631 | REP DEV, URINARY, W/O SLING |
| C5271 | LOW COST SKIN SUBSTITUTE APP |
| C5272 | LOW COST SKIN SUBSTITUTE APP |
| C5273 | LOW COST SKIN SUBSTITUTE APP |
| C5274 | LOW COST SKIN SUBSTITUTE APP |
| C5275 | LOW COST SKIN SUBSTITUTE APP |
| C5276 | LOW COST SKIN SUBSTITUTE APP |
| C5277 | LOW COST SKIN SUBSTITUTE APP |
| C5278 | LOW COST SKIN SUBSTITUTE APP |
| C8900 | MRA W/CONT, ABD |
| C8901 | MRA W/O CONT, ABD |
| C8902 | MRA W/O FOL W/CONT, ABD |
| C8903 | MRI W/CONT, BREAST, UNI |
| C8905 | MRI W/O FOL W/CONT, BRST, UN |
| C8906 | MRI W/CONT, BREAST, BI |
| C8908 | MRI W/O FOL W/CONT, BREAST, |
| C8909 | MRA W/CONT, CHEST |
| C8910 | MRA W/O CONT, CHEST |
| C8911 | MRA W/O FOL W/CONT, CHEST |
| C8912 | MRA W/CONT, LWR EXT |
| C8913 | MRA W/O CONT, LWR EXT |
| C8914 | MRA W/O FOL W/CONT, LWR EXT |
| C8918 | MRA W/CONT, PELVIS |
| C8919 | MRA W/O CONT, PELVIS |
| C8920 | MRA W/O FOL W/CONT, PELVIS |
| C8921 | TTE W OR W/O FOL W/CONT, COM |
| C8922 | TTE W OR W/O FOL W/CONT, F/U |
| C8923 | 2D TTE W OR W/O FOL W/CON,CO |
| C8924 | 2D TTE W OR W/O FOL W/CON,FU |
| C8925 | 2D TEE W OR W/O FOL W/CON,IN |
| C8926 | TEE W OR W/O FOL W/CONT,CONG |
| C8927 | TEE W OR W/O FOL W/CONT, MON |
| C8928 | TTE W OR W/O FOL W/CON,STRES |
| C8929 | TTE W OR WO FOL WCON,DOPPLER |
| C8930 | TTE W OR W/O CONTR, CONT ECG |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| C8931 | MRA, W/DYE, SPINAL CANAL |
| C8932 | MRA, W/O DYE, SPINAL CANAL |
| C8933 | MRA, W/O&W/DYE, SPINAL CANAL |
| C8934 | MRA, W/DYE, UPPER EXTREMITY |
| C8935 | MRA, W/O DYE, UPPER EXTR |
| C8936 | MRA, W/O&W/DYE, UPPER EXTR |
| C8957 | PROLONGED IV INF, REQ PUMP |
| C9060 | FLUOROESTRADIOL F18 |
| C9067 | GALLIUM GA-68 DOTATOC |
| C9068 | COPPER CU-64, DOTATATE, DX |
| C9122 | MOMETASONE FUROATE (SINUVA) |
| C9352 | NEURAGEN NERVE GUIDE, PER CM |
| C9353 | NEURAWRAP NERVE PROTECTOR,CM |
| C9354 | VERITAS COLLAGEN MATRIX, CM2 |
| C9355 | NEUROMATRIX NERVE CUFF, CM |
| C9356 | TENOGLIDE TENDON PROT, CM2 |
| C9358 | SURGIMEND, FETAL |
| C9359 | IMPLNT,BON VOID FILLER-PUTTY |
| C9600 | PERC DRUG-EL COR STENT SING |
| C9601 | PERC DRUG-EL COR STENT BRAN |
| C9602 | PERC D-E COR STENT ATHER S |
| C9603 | PERC D-E COR STENT ATHER BR |
| C9604 | PERC D-E COR REVASC T CABG S |
| C9605 | PERC D-E COR REVASC T CABG B |
| C9606 | PERC D-E COR REVASC W AMI S |
| C9607 | PERC D-E COR REVASC CHRO SIN |
| C9608 | PERC D-E COR REVASC CHRO ADD |
| C9728 | PLACE DEVICE/MARKER, NON PRO |
| C9733 | NON-OPHTHALMIC FVA |
| C9738 | BLUE LIGHT CYSTO IMAG AGENT |
| C9754 | PERC AV FISTULA, DIRECT |
| C9759 | TRANSCATH INTRAOP MICROINF |
| C9762 | CARDIAC MRI SEG DYS STRAIN |
| C9763 | CARDIAC MRI SEG DYS STRESS |
| C9764 | REVASC INTRAVASC LITHOTRIPSY |
| C9765 | REVASC INTRA LITHOTRIP-STENT |
| C9766 | REVASC INTRA LITHOTRIP-ATHER |
| C9767 | REVASC LITHOTRIP-STENT-ATHER |
| C9768 | ENDO US-GUIDE HEP PORTO GRAD |
| C9769 | CYSTO W/TEMP PROS IMPLANT |
| C9772 | REVASC LITHOTRIP TIBI/PERONE |
| C9773 | REVASC LITHOTR-STENT TIB/PER |
| C9774 | REVASC LITHOTR-ATHER TIB/PER |
| C9775 | REVASC LITH-STEN-ATH TIB/PER |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| E1634 | PERITONEAL DIALYSIS CLAMP |
| E2402 | NEG PRESS WOUND THERAPY PUMP |
| G0008 | ADMIN INFLUENZA VIRUS VAC |
| G0009 | ADMIN PNEUMOCOCCAL VACCINE |
| G0010 | ADMIN HEPATITIS B VACCINE |
| G0101 | CA SCREEN;PELVIC/BREAST EXAM |
| G0102 | PROSTATE CA SCREENING; DRE |
| G0103 | PSA SCREENING |
| G0104 | CA SCREEN;FLEXI SIGMOIDSCOPE |
| G0105 | COLORECTAL SCRN; HI RISK IND |
| G0106 | COLON CA SCREEN;BARIUM ENEMA |
| G0108 | DIAB MANAGE TRN PER INDIV |
| G0109 | DIAB MANAGE TRN IND/GROUP |
| G0117 | GLAUCOMA SCRN HGH RISK DIREC |
| G0118 | GLAUCOMA SCRN HGH RISK DIREC |
| G0120 | COLON CA SCRN; BARIUM ENEMA |
| G0121 | COLON CA SCRN NOT HI RSK IND |
| G0122 | COLON CA SCRN; BARIUM ENEMA |
| G0123 | SCREEN CERV/VAG THIN LAYER |
| G0124 | SCREEN C/V THIN LAYER BY MD |
| G0127 | TRIM NAIL(S) |
| G0128 | CORF SKILLED NURSING SERVICE |
| G0129 | PARTIAL HOSP PROG SERVICE |
| G0130 | SINGLE ENERGY X-RAY STUDY |
| G0141 | SCR C/V CYTO,AUTOSYS AND MD |
| G0143 | SCR C/V CYTO,THINLAYER,RESCR |
| G0144 | SCR C/V CYTO,THINLAYER,RESCR |
| G0145 | SCR C/V CYTO,THINLAYER,RESCR |
| G0147 | SCR C/V CYTO, AUTOMATED SYS |
| G0148 | SCR C/V CYTO, AUTOSYS, RESCR |
| G0168 | WOUND CLOSURE BY ADHESIVE |
| G0175 | OPPS SERVICE,SCHED TEAM CONF |
| G0182 | HOSPICE CARE SUPERVISION |
| G0186 | DSTRY EYE LESN,FDR VSSL TECH |
| G0237 | THERAPEUTIC PROCD STRG ENDUR |
| G0238 | OTH RESP PROC, INDIV |
| G0239 | OTH RESP PROC, GROUP |
| G0245 | INITIAL FOOT EXAM PT LOPS |
| G0246 | FOLLOWUP EVAL OF FOOT PT LOP |
| G0247 | ROUTINE FOOTCARE PT W LOPS |
| G0248 | DEMONSTRATE USE HOME INR MON |
| G0249 | PROVIDE INR TEST MATER/EQUIP |
| G0250 | MD INR TEST REVIE INTER MGMT |
| G0255 | CURRENT PERCEP THRESHOLD TST |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| G0257 | UNSCHED DIALYSIS ESRD PT HOS |
| G0259 | INJECT FOR SACROILIAC JOINT |
| G0260 | INJ FOR SACROILIAC JT ANESTH |
| G0268 | REMOVAL OF IMPACTED WAX MD |
| G0269 | OCCLUSIVE DEVICE IN VEIN ART |
| G0270 | MNT SUBS TX FOR CHANGE DX |
| G0271 | GROUP MNT 2 OR MORE 30 MINS |
| G0278 | ILIAC ART ANGIO,CARDIAC CATH |
| G0288 | RECON, CTA FOR SURG PLAN |
| G0289 | ARTHRO, LOOSE BODY + CHONDRO |
| G0293 | NON-COV SURG PROC,CLIN TRIAL |
| G0294 | NON-COV PROC, CLINICAL TRIAL |
| G0296 | VISIT TO DETERM LDCT ELIG |
| G0297 | LDCT FOR LUNG CA SCREEN |
| G0306 | CBC/DIFFWBC W/O PLATELET |
| G0307 | CBC WITHOUT PLATELET |
| G0328 | FECAL BLOOD SCRN IMMUNOASSAY |
| G0333 | DISPENSE FEE INITIAL 30 DAY |
| G0337 | HOSPICE EVALUATION PREELECTI |
| G0380 | LEV 1 HOSP TYPE B ED VISIT |
| G0381 | LEV 2 HOSP TYPE B ED VISIT |
| G0382 | LEV 3 HOSP TYPE B ED VISIT |
| G0383 | LEV 4 HOSP TYPE B ED VISIT |
| G0384 | LEV 5 HOSP TYPE B ED VISIT |
| G0390 | TRAUMA RESPONS W/HOSP CRITI |
| G0396 | ALCOHOL/SUBS INTERV 15-30MN |
| G0397 | ALCOHOL/SUBS INTERV >30 MIN |
| G0398 | HOME SLEEP TEST/TYPE 2 PORTA |
| G0399 | HOME SLEEP TEST/TYPE 3 PORTA |
| G0400 | HOME SLEEP TEST/TYPE 4 PORTA |
| G0403 | EKG FOR INITIAL PREVENT EXAM |
| G0404 | EKG TRACING FOR INITIAL PREV |
| G0405 | EKG INTERPRET & REPORT PREVE |
| G0409 | CORF RELATED SERV 15 MINS EA |
| G0410 | GRP PSYCH PARTIAL HOSP 45-50 |
| G0411 | INTER ACTIVE GRP PSYCH PARTI |
| G0412 | OPEN TX ILIAC SPINE UNI/BIL |
| G0413 | PELVIC RING FRACTURE UNI/BIL |
| G0414 | PELVIC RING FX TREAT INT FIX |
| G0415 | OPEN TX POST PELVIC FXCTURE |
| G0416 | PROSTATE BIOPSY, ANY MTHD |
| G0422 | INTENS CARDIAC REHAB W/EXERC |
| G0423 | INTENS CARDIAC REHAB NO EXER |
| G0424 | PULMONARY REHAB W EXER |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| G0432 | EIA HIV-1/HIV-2 SCREEN |
| G0433 | ELISA HIV-1/HIV-2 SCREEN |
| G0435 | ORAL HIV-1/HIV-2 SCREEN |
| G0438 | PPPS, INITIAL VISIT |
| G0439 | PPPS, SUBSEQ VISIT |
| G0442 | ANNUAL ALCOHOL SCREEN 15 MIN |
| G0443 | BRIEF ALCOHOL MISUSE COUNSEL |
| G0444 | DEPRESSION SCREEN ANNUAL |
| G0445 | HIGH INTEN BEH COUNS STD 30M |
| G0446 | INTENS BEHAVE THER CARDIO DX |
| G0447 | BEHAVIOR COUNSEL OBESITY 15M |
| G0448 | PLACE PERM PACING CARDIOVERT |
| G0451 | DEVLOPMENT TEST INTERPT&REP |
| G0452 | MOLECULAR PATHOLOGY INTERPR |
| G0453 | CONT INTRAOP NEURO MONITOR |
| G0463 | HOSPITAL OUTPT CLINIC VISIT |
| G0466 | FQHC VISIT NEW PATIENT |
| G0467 | FQHC VISIT, ESTAB PT |
| G0468 | FQHC VISIT, IPPE OR AWV |
| G0469 | FQHC VISIT, MH NEW PT |
| G0470 | FQHC VISIT, MH ESTAB PT |
| G0472 | HEP C SCREEN HIGH RISK/OTHER |
| G0475 | HIV COMBINATION ASSAY |
| G0476 | HPV COMBO ASSAY CA SCREEN |
| G0499 | HEPB SCREEN HIGH RISK INDIV |
| G0500 | MOD SEDAT ENDO SERVICE >5YRS |
| G0516 | INSERT DRUG IMPLANT,>=4 |
| G0517 | REMOVE DRUG IMPLANT |
| G0518 | REMOVE W INSERT DRUG IMPLANT |
| G2011 | ALCOHOL/SUB ABUSE ASSESS |
| G2081 | PT 66+ SNP OR LTC POS > 90D |
| G2089 | A1C LEVEL 7 TO 9% |
| G2090 | PT 66+ FRAILTY AND MED DEM |
| G2091 | PT 66+ FRAILTY AND ADV ILL |
| G2092 | ACE ARB ARNI |
| G2093 | MED DOC RSN NO ACE ARN ARNI |
| G2094 | PT RSN NO ACE ARN ARNI |
| G2095 | SYS RSN NO ACE ARN ARNI |
| G2096 | NO RSN ACE ARB ARNI |
| G2097 | CHILD DX URI 3D OF OTHER DX |
| G2098 | PT 66+ FRAILTY AND MED DEM |
| G2099 | PT 66+ FRAILTY AND ADV ILL |
| G2100 | PT 66+ FRAILTY AND MED DEM |
| G2101 | PT 66+ FRAILTY AND ADV ILL |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| G2102 | DIL RETINAL EYE EXAM |
| G2103 | 7 STEREO PHOTOS INTERPRET |
| G2104 | EYE IMG VALID W/7 STEREO |
| G2105 | PT 66+ LT INTS > 90 |
| G2106 | PT 66+ LT INTS > 90 |
| G2107 | PT 66+ FRAILTY AND ADV ILL |
| G2108 | PT 66+ LT INTS > 90 |
| G2109 | PT 66+ FRAILTY AND MED DEM |
| G2110 | PT 66+ FRAILTY AND ADV ILL |
| G2112 | PRED<=5 MG RA GLU <6M |
| G2113 | PRED>5 MG >6M, NO CHG DA |
| G2114 | PT 66-80 FRAILTY AND MED DEM |
| G2115 | PT 66+ FRAILTY AND MED DEM |
| G2116 | PT 66+ FRAILTY AND ADV ILL |
| G2117 | PT 66-80 FRAILTY AND ADV ILL |
| G2118 | PT 81+ FRAILTY |
| G2119 | CALC VITD OPT |
| G2120 | NO CALC VITD OPT |
| G2121 | PSY DEP ANX AP AND ICD ASSE |
| G2122 | PSY/DEP/ANX/APANDICD NOASSE |
| G2123 | PT 66-80 FRAILTY MED DEM |
| G2124 | PT 66-80 FRAILTY ADV ILL |
| G2125 | PT 81+ FRAILTY |
| G2126 | PT 66+ FRAILTY ADV ILL |
| G2127 | PT 66+ FRAILTY MED DEM |
| G2128 | NO ASPIRIN MED RSN |
| G2129 | NO BP OUTPT |
| G2130 | PT 66+ LT INST > 90 |
| G2131 | PT 81+ FRAILTY |
| G2132 | PT 66-80 FRAILTY AND MED DEM |
| G2133 | PT 66-80 FRAILTY AND ADV ILL |
| G2134 | PT 66+ FRAILTY AND MED DEM |
| G2135 | PT 66+ FRAILTY AND ADV ILL |
| G2136 | BK PAIN VAS 6-20WK = 3 |
| G2137 | BK PAIN VAS 6-20WK > 3 |
| G2138 | BK PAIN VAS 9-15MO = 3 |
| G2139 | BK PAIN VAS 9-20MO > 3 |
| G2140 | LEG PAIN VAS 6-20WK = 3 |
| G2141 | LEG PAIN VAS 6-20WK > 3 |
| G2142 | FS ODI 9-15MO POSTOP<= 22 |
| G2143 | FS ODI 9-15MO > 22 |
| G2144 | FS ODI 6-20WK POSTOP > 22 |
| G2145 | FSODI 6-20WK >22 OR CHG 30PT |
| G2146 | LEG PAIN VAS 9-15MO <= 3 |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| G2147 | LEG PAIN VAS 9-15MO > 3 |
| G2148 | MPM USED |
| G2149 | NO MPM MED RSN |
| G2150 | NO MPM |
| G2151 | DX DEGEN NEURO |
| G2152 | RES CHANGE SC =0 |
| G2153 | HOSP DUR MEAS PD |
| G2154 | TD 9 YRS START END MEAS |
| G2155 | HIST CONTRAINDICATIONS |
| G2156 | NO PRIOR TD OR HX CONTRA |
| G2157 | PNEUM VACC 12 MO 60+ |
| G2158 | PNEUM VACC ADV RX |
| G2159 | NO PNEUM VACC 12 MO 60+ |
| G2160 | HERPZOS 50+ |
| G2161 | ADV RX ZOS |
| G2162 | NO HERPZOS 50+ |
| G2163 | INFL VACC 07/01 TO 06/30 |
| G2164 | ADV RX INFL VACC |
| G2165 | NO INFL VACC 07/01 TO 06/30 |
| G2166 | NO PT ADM DX NO NECK FS PROM |
| G2167 | RES CHANGE SC < 0 |
| G2170 | AVF BY TISSUE W THERMAL E |
| G2171 | AVF USE MAGNETIC/ART/VEN |
| G2173 | URI W COMORB 12M OTH DX |
| G2174 | URI NEW RX ANTIBIOTIC 30D |
| G2175 | PT COMORB DX 12M OF EPI |
| G2176 | OUTPT ED OBS W INPT ADMIT |
| G2177 | BRONCH W RX ANTIBX 30D |
| G2178 | PT NOT ELIG LOW NEURO EX |
| G2179 | MED DOC RSN NO LOW EX |
| G2180 | INELIG FOOTWR EVAL |
| G2181 | BMI NOT DOC MEDRSN PTREF |
| G2182 | PT 1ST BIOLOG ANTIRHEUM |
| G2183 | DOC PT UNABLE COMM |
| G2184 | NO CAREGIVER |
| G2185 | CAREGIVER DEM TRAINED |
| G2186 | PT REF APP RSRCS |
| G2187 | CLIN IND IMG HD TRAUMA |
| G2188 | PT 50 YRS W/CLIN IND HD |
| G2189 | IMG HD ABNML NEURO EXAM |
| G2190 | IND IMG HD RAD NECK |
| G2191 | IND IMG HD POS HD ACHE |
| G2192 | >55 YRS TEMP HD ACHE |
| G2193 | <6YR NEW ONSET HD ACHE |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| G2194 | NEW HDACHE PED PT DIS |
| G2195 | OCCIP HDACHE CHILD |
| G2196 | SCREEN UNHLTHY ETOH USE |
| G2197 | SCREEN HLTHY ETOH USE |
| G2198 | MED RSN NO UNHLTHY ETOH |
| G2199 | NOT SCRN ETOH NO RSN |
| G2200 | UNHLTHY ETOH RCVD COUNS |
| G2201 | MED RSN NO BRIEF COUNS |
| G2202 | NO RSN NO BRIEF COUNS |
| G2203 | MED RSN NO ETOH COUNS |
| G2204 | PT 50-85 W/ SCOPE |
| G2205 | PREG DRNG ADJV TRTMT |
| G2206 | ADJV TRTMT CHEMO HER2 |
| G2207 | RSN NO TRTMT CHEM HER2 |
| G2208 | NO TRTMT CHEMO AND HER2 |
| G2209 | REFUSED TO PARTICIPATE |
| G2210 | NO NECK FS PROM NO RSN |
| G2211 | COMPLEX E/M VISIT ADD ON |
| G2212 | PROLONG OUTPT/OFFICE VIS |
| G2213 | INITIAT MED ASSIST TX IN ER |
| G2214 | INIT/SUB PSYCH CARE M 1ST 30 |
| G2215 | HOME SUPPLY NASAL NALOXONE |
| G2216 | HOME SUPPLY INJECT NALOXON |
| G2250 | REMOT IMG SUB BY PT, NON E/M |
| G2251 | BRIEF CHKIN, 5-10, NON-E/M |
| G2252 | BRIEF CHKIN BY MD/QHP, 11-20 |
| G6001 | ECHO GUIDANCE RADIOTHERAPY |
| G6002 | STEREOSCOPIC X-RAY GUIDANCE |
| G6015 | RADIATION TX DELIVERY IMRT |
| G6017 | INTRAFRACTION TRACK MOTION |
| G8961 | CSIT LOWRISK SURG PTS PREOP |
| G8962 | CSIT ON PT ANY REAS 30 DAYS |
| G8963 | CSI PER ASX PT W/PCI 2 YRS |
| G8964 | CSI ANY OTHER THAN PCI 2 YR |
| G8965 | CSIT PERF ON LOW CHD RSK |
| G8966 | CSIT PERF SX OR HIGH CHD RSK |
| H0001 | ALCOHOL AND/OR DRUG ASSESS |
| H0002 | ALCOHOL AND/OR DRUG SCREENIN |
| H0003 | ALCOHOL AND/OR DRUG SCREENIN |
| H0005 | ALCOHOL AND/OR DRUG SERVICES |
| H0007 | ALCOHOL AND/OR DRUG SERVICES |
| H0049 | ALCOHOL/DRUG SCREENING |
| H0050 | ALCOHOL/DRUG SERVICE 15 MIN |
| H2011 | CRISIS INTERVEN SVC, 15 MIN |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| J0179 | INJ, BROLUCIZUMAB-DBLL, 1 MG |
| J0841 | INJ CROTALIDAE IM F(AB')2 EQ |
| J1050 | MEDROXYPROGESTERONE ACETATE |
| J7296 | KYLEENA, 19.5 MG |
| J7300 | INTRAUT COPPER CONTRACEPTIVE |
| J7301 | SKYLA, 13.5 MG |
| J7303 | CONTRACEPTIVE VAGINAL RING |
| J7304 | CONTRACEPTIVE HORMONE PATCH |
| J7306 | LEVONORGESTREL IMPLANT SYS |
| J7307 | ETONOGESTREL IMPLANT SYSTEM |
| J7308 | AMINOLEVULINIC ACID HCL TOP |
| J9199 | INJECTION, INFUGEM, 200 MG |
| J9309 | INJ, POLATUZUMAB VEDOTIN 1MG |
| L2106 | AFO TIB FX CAST PLASTER MOLD |
| L2108 | AFO TIB FX CAST MOLDED TO PT |
| L2112 | AFO TIBIAL FRACTURE SOFT |
| L2114 | AFO TIB FX SEMI-RIGID |
| L2116 | AFO TIBIAL FRACTURE RIGID |
| L2126 | KAFO FEM FX CAST THERMOPLAS |
| L2128 | KAFO FEM FX CAST MOLDED TO P |
| L2132 | KAFO FEMORAL FX CAST SOFT |
| L2134 | KAFO FEM FX CAST SEMI-RIGID |
| L2136 | KAFO FEMORAL FX CAST RIGID |
| L2180 | PLAS SHOE INSERT W ANK JOINT |
| L2182 | DROP LOCK KNEE |
| L2184 | LIMITED MOTION KNEE JOINT |
| L2186 | ADJ MOTION KNEE JNT LERMAN T |
| L2188 | QUADRILATERAL BRIM |
| L2190 | WAIST BELT |
| L2840 | TIBIAL LENGTH SOCK FX OR EQU |
| L2850 | FEMORAL LGTH SOCK FX OR EQUA |
| L3917 | METACARP FX ORTHOSIS PRE CST |
| L3980 | UP EXT FX ORTHOS HUMERAL NOS |
| L3982 | UPPER EXT FX ORTHOSIS RAD/UL |
| L3984 | UPPER EXT FX ORTHOSIS WRIST |
| L3995 | SOCK FRACTURE OR EQUAL EACH |
| L7600 | PROSTHETIC DONNING SLEEVE |
| L8000 | MASTECTOMY BRA |
| L8001 | BREAST PROSTHESIS BRA & FORM |
| L8002 | BRST PRSTH BRA & BILAT FORM |
| L8010 | MASTECTOMY SLEEVE |
| L8015 | EXT BREASTPROSTHESIS GARMENT |
| L8020 | MASTECTOMY FORM |
| L8030 | BREAST PROSTHES W/O ADHESIVE |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| L8031 | BREAST PROSTHESIS W ADHESIVE |
| L8032 | REUSABLE NIPPLE PROSTHESIS |
| L8033 | NIPPLE PROSTHESIS CUSTOM, EA |
| L8035 | CUSTOM BREAST PROSTHESIS |
| L8039 | BREAST PROSTHESIS NOS |
| L8400 | SHEATH BELOW KNEE |
| L8410 | SHEATH ABOVE KNEE |
| L8415 | SHEATH UPPER LIMB |
| L8417 | PROS SHEATH/SOCK W GEL CUSHN |
| L8420 | PROSTHETIC SOCK MULTI PLY BK |
| L8430 | PROSTHETIC SOCK MULTI PLY AK |
| L8435 | PROS SOCK MULTI PLY UPPER LM |
| L8440 | SHRINKER BELOW KNEE |
| L8460 | SHRINKER ABOVE KNEE |
| L8465 | SHRINKER UPPER LIMB |
| L8470 | PROS SOCK SINGLE PLY BK |
| L8480 | PROS SOCK SINGLE PLY AK |
| L8485 | PROS SOCK SINGLE PLY UPPER L |
| L8512 | GEL CAP FOR TRACH VOICE PROS |
| L8513 | TRACH PROS CLEANING DEVICE |
| L8514 | REPL TRACH PUNCTURE DILATOR |
| L8515 | GEL CAP APP DEVICE FOR TRACH |
| L8630 | METACARPOPHALANGEAL IMPLANT |
| L8641 | METATARSAL JOINT IMPLANT |
| L8642 | HALLUX IMPLANT |
| L8658 | INTERPHALANGEAL JOINT SPACER |
| L8659 | INTERPHALANGEAL JOINT REPL |
| M1106 | START EOC DOC MED REC |
| M1107 | DOCU DX DEGEN NEURO |
| M1108 | OC NI PT 1-2 VIS |
| M1109 | OC NI PT DC 1-2 VIS |
| M1110 | OC NI PT SELFDC 1-2 VIS |
| M1111 | START EOC DOC MED REC |
| M1112 | DOCU DX DEGEN NEURO |
| M1113 | OC NI PT 1-2 VIS |
| M1114 | OC NI PT DC 1-2 VIS |
| M1115 | OC NI PT SELFDC 1-2 VIS |
| M1116 | START EOC DOC MED REC |
| M1117 | DOCU DX DEGEN NEURO |
| M1118 | OC NI PT 1-2 VIS |
| M1119 | OC NI PT DC 1-2 VIS |
| M1120 | OC NI PT SELFDC 1-2 VIS |
| M1121 | START EOC DOC MED REC |
| M1122 | DOCU DX DEGEN NEURO |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| M1123 | OC NI PT 1-2 VIS |
| M1124 | OC NI PT DC 1-2 VIS |
| M1125 | OC NI PT SELFDC 1-2 VIS |
| M1126 | START EOC DOC MED REC |
| M1127 | DOCU DX DEGEN NEURO |
| M1128 | OC NI PT 1-2 VIS |
| M1129 | OC NI PT DC 1-2 VIS |
| M1130 | OC NI PT SELF DC 1-2 VIS |
| M1131 | DOCU DX DEGEN NEURO |
| M1132 | OC NI PT 1-2 VIS |
| M1133 | OC NI PT DC 1-2 VIS |
| M1134 | OC NI PT SELF DC 1-2 VIS |
| M1135 | START EOC DOC MED REC |
| M1136 | START EOC DOC MED REC |
| M1137 | DOCU DX DEGEN NEURO |
| M1138 | OC NI PT 1-2 VIS |
| M1139 | OC NI PT SELF DC 1-2 VIS |
| M1140 | OC NI PT DC 1-2 VIS |
| M1141 | FS NO OKS |
| M1142 | EMERGE CASES |
| M1143 | NI REHAB MED CHIRO |
| M1144 | OC NO IND PT 1-2 VIS |
| M1146 | ONGOING CARE NOT IND |
| M1147 | CARE NOT POSS MED RSN |
| M1148 | PT SELF DSCHG |
| M1149 | NO NECK FS PROM INCAP |
| P3000 | SCREEN PAP BY TECH W MD SUPV |
| P3001 | SCREENING PAP SMEAR BY PHYS |
| P7001 | CULTURE BACTERIAL URINE |
| P9010 | WHOLE BLOOD FOR TRANSFUSION |
| P9045 | ALBUMIN (HUMAN), 5%, 250 ML |
| P9046 | ALBUMIN (HUMAN), 25%, 20 ML |
| P9047 | ALBUMIN (HUMAN), 25%, 50ML |
| P9048 | PLASMAPROTEIN FRACT,5%,250ML |
| P9053 | PLT, PHER, L/R CMV-NEG, IRR |
| P9054 | BLOOD, L/R, FROZ/DEGLY/WASH |
| P9055 | PLT, APH/PHER, L/R, CMV-NEG |
| P9056 | BLOOD, L/R, IRRADIATED |
| P9057 | RBC, FRZ/DEG/WSH, L/R, IRRAD |
| P9058 | RBC, L/R, CMV-NEG, IRRAD |
| P9059 | PLASMA, FRZ BETWEEN 8-24HOUR |
| P9060 | FR FRZ PLASMA DONOR RETESTED |
| P9070 | PATHOGEN REDUCED PLASMA POOL |
| P9071 | PATHOGEN REDUCED PLASMA SING |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| P9100 | PATHOGEN TEST FOR PLATELETS |
| P9615 | URINE SPECIMEN COLLECT MULT |
| Q0081 | INFUSION THER OTHER THAN CHE |
| Q0083 | CHEMO BY OTHER THAN INFUSION |
| Q0084 | CHEMOTHERAPY BY INFUSION |
| Q0085 | CHEMO BY BOTH INFUSION AND O |
| Q0091 | OBTAINING SCREEN PAP SMEAR |
| Q0138 | FERUMOXYTOL, NON-ESRD |
| Q0139 | FERUMOXYTOL, ESRD USE |
| Q0164 | PROCHLORPERAZINE MALEATE 5MG |
| Q0166 | GRANISETRON HCL 1 MG ORAL |
| Q0167 | DRONABINOL 2.5MG ORAL |
| Q0169 | PROMETHAZINE HCI 12.5MG ORAL |
| Q0173 | TRIMETHOBENZAMIDE HCI 250MG |
| Q0174 | THIETHYLPERAZINE MALEATE 10MG |
| Q0175 | PERPHENAZINE 4MG ORAL |
| Q0177 | HYDROXYZINE PAMOATE 25MG |
| Q0180 | DOLASETRON MESYLATE ORAL |
| Q0181 | UNSPECIFIED ORAL ANTI-EMETIC |
| Q2034 | AGRIFLU VACCINE |
| Q2035 | AFLURIA VACC, 3 YRS & >, IM |
| Q2036 | FLULAVAL VACC, 3 YRS & >, IM |
| Q2037 | FLUVIRIN VACC, 3 YRS & >, IM |
| Q2038 | FLUZONE VACC, 3 YRS & >, IM |
| Q2039 | INFLUENZA VIRUS VACCINE, NOS |
| Q3001 | BRACHYTHERAPY RADIOELEMENTS |
| Q4001 | CAST SUP BODY CAST PLASTER |
| Q4002 | CAST SUP BODY CAST FIBERGLAS |
| Q4003 | CAST SUP SHOULDER CAST PLSTR |
| Q4004 | CAST SUP SHOULDER CAST FBRGL |
| Q4005 | CAST SUP LONG ARM ADULT PLST |
| Q4006 | CAST SUP LONG ARM ADULT FBRG |
| Q4007 | CAST SUP LONG ARM PED PLSTER |
| Q4008 | CAST SUP LONG ARM PED FBRGLS |
| Q4009 | CAST SUP SHT ARM ADULT PLSTR |
| Q4010 | CAST SUP SHT ARM ADULT FBRGL |
| Q4011 | CAST SUP SHT ARM PED PLASTER |
| Q4012 | CAST SUP SHT ARM PED FBRGLAS |
| Q4013 | CAST SUP GAUNTLET PLASTER |
| Q4014 | CAST SUP GAUNTLET FIBERGLASS |
| Q4015 | CAST SUP GAUNTLET PED PLSTER |
| Q4016 | CAST SUP GAUNTLET PED FBRGLS |
| Q4017 | CAST SUP LNG ARM SPLINT PLST |
| Q4018 | CAST SUP LNG ARM SPLINT FBRG |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| Q4019 | CAST SUP LNG ARM SPLNT PED P |
| Q4020 | CAST SUP LNG ARM SPLNT PED F |
| Q4021 | CAST SUP SHT ARM SPLINT PLST |
| Q4022 | CAST SUP SHT ARM SPLINT FBRG |
| Q4023 | CAST SUP SHT ARM SPLNT PED P |
| Q4024 | CAST SUP SHT ARM SPLNT PED F |
| Q4025 | CAST SUP HIP SPICA PLASTER |
| Q4026 | CAST SUP HIP SPICA FIBERGLAS |
| Q4027 | CAST SUP HIP SPICA PED PLSTR |
| Q4028 | CAST SUP HIP SPICA PED FBRGL |
| Q4029 | CAST SUP LONG LEG PLASTER |
| Q4030 | CAST SUP LONG LEG FIBERGLASS |
| Q4031 | CAST SUP LNG LEG PED PLASTER |
| Q4032 | CAST SUP LNG LEG PED FBRGLS |
| Q4033 | CAST SUP LNG LEG CYLINDER PL |
| Q4034 | CAST SUP LNG LEG CYLINDER FB |
| Q4035 | CAST SUP LNGLEG CYLNDR PED P |
| Q4036 | CAST SUP LNGLEG CYLNDR PED F |
| Q4037 | CAST SUP SHRT LEG PLASTER |
| Q4038 | CAST SUP SHRT LEG FIBERGLASS |
| Q4039 | CAST SUP SHRT LEG PED PLSTER |
| Q4040 | CAST SUP SHRT LEG PED FBRGLS |
| Q4041 | CAST SUP LNG LEG SPLNT PLSTR |
| Q4042 | CAST SUP LNG LEG SPLNT FBRGL |
| Q4043 | CAST SUP LNG LEG SPLNT PED P |
| Q4044 | CAST SUP LNG LEG SPLNT PED F |
| Q4045 | CAST SUP SHT LEG SPLNT PLSTR |
| Q4046 | CAST SUP SHT LEG SPLNT FBRGL |
| Q4047 | CAST SUP SHT LEG SPLNT PED P |
| Q4048 | CAST SUP SHT LEG SPLNT PED F |
| Q4081 | EPOETIN ALFA, 100 UNITS ESRD |
| Q9951 | LOCM >= 400 MG/ML IODINE,1ML |
| Q9953 | INJ FE-BASED MR CONTRAST,1ML |
| Q9954 | ORAL MR CONTRAST, 100 ML |
| Q9955 | INJ PERFLEXANE LIP MICROS,ML |
| Q9956 | INJ OCTAFLUOROPROPANE MIC,ML |
| Q9957 | INJ PERFLUTREN LIP MICROS,ML |
| Q9958 | HOCM <=149 MG/ML IODINE, 1ML |
| Q9959 | HOCM 150-199MG/ML IODINE,1ML |
| Q9960 | HOCM 200-249MG/ML IODINE,1ML |
| Q9961 | HOCM 250-299MG/ML IODINE,1ML |
| Q9962 | HOCM 300-349MG/ML IODINE,1ML |
| Q9963 | HOCM 350-399MG/ML IODINE,1ML |
| Q9964 | HOCM>= 400MG/ML IODINE, 1ML |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| Q9965 | LOCM 100-199MG/ML IODINE,1ML |
| Q9966 | LOCM 200-299MG/ML IODINE,1ML |
| Q9967 | LOCM 300-399MG/ML IODINE,1ML |
| Q9968 | VISUALIZATION ADJUNCT |
| Q9969 | NON-HEU TC-99M ADD-ON/DOSE |
| S0255 | HOSPICE REFER VISIT NONMD |
| S0302 | COMPLETED EPSDT |
| S0310 | HOSPITALIST VISIT |
| S0395 | IMPRESSION CASTING FT |
| S0400 | GLOBAL ESWL KIDNEY |
| S0601 | SCREENING PROCTOSCOPY |
| S0610 | ANNUAL GYNECOLOGICAL EXAMINA |
| S0612 | ANNUAL GYNECOLOGICAL EXAMINA |
| S0613 | ANN BREAST EXAM |
| S0618 | AUDIOMETRY FOR HEARING AID |
| S0630 | REMOVAL OF SUTURES |
| S2066 | BREAST GAP FLAP RECONST |
| S2067 | BREAST "STACKED" DIEP/GAP |
| S2068 | BREAST DIEP OR SIEA FLAP |
| S2115 | PERIACETABULAR OSTEOTOMY |
| S2225 | MYRINGOTOMY LASER-ASSIST |
| S2342 | NASAL ENDOSCOP PO DEBRID |
| S3620 | NEWBORN METABOLIC SCREENING |
| S4005 | INTERIM LABOR FACILITY GLOBA |
| S4989 | CONTRACEPT IUD |
| S4993 | CONTRACEPTIVE PILLS FOR BC |
| S5035 | HIT ROUTINE DEVICE MAINT |
| S8030 | TANTALUM RING APPLICATION |
| S8037 | MRCP |
| S8042 | MRI LOW FIELD |
| S8100 | SPACER WITHOUT MASK |
| S8101 | SPACER WITH MASK |
| S8210 | MUCUS TRAP |
| S8265 | HABERMAN FEEDER |
| S8490 | 100 INSULIN SYRINGES |
| S9088 | SERVICES PROVIDED IN URGENT |
| S9152 | SPEECH THERAPY, RE-EVAL |
| S9470 | NUTRITIONAL COUNSELING, DIET |
| S9472 | CARDIAC REHABILITATION PROGR |
| S9473 | PULMONARY REHABILITATION PRO |
| S9484 | CRISIS INTERVENTION PER HOUR |
| U0005 | INFEC AGEN DETEC AMPLI PROBE |
| S9485 | CRISIS INTERVENTION MENTAL H |
| V2524 | CNTCT LENS HYDROPHIL PHOTOCH |

| NO PRIOR AUTH REQUIRED | DESCRIPTION |
|---|---|
| V2630 | ANTER CHAMBER INTRAOCUL LENS |
| V2631 | IRIS SUPPORT INTRAOCLR LENS |
| V2632 | POST CHMBR INTRAOCULAR LENS |
| V5362 | SPEECH SCREENING |
| V5363 | LANGUAGE SCREENING |
| V5364 | DYSPHAGIA SCREENING |