REIMBURSEMENT POLICY		
Policy Name:	Maximum Units of Service – Medicaid Outpatient	
Policy Number:	PI-001-MD-OP	
Original Effective Date:	06/01/2017	
Approval Date:	01/01/2022	
Products:	Pennsylvania HealthChoices Medical Assistance	

Disclaimer

Highmark Wholecare medical claims payment and prior-authorization policy is a reference resource regarding payment and coverage for the services described. This policy does not constitute medical advice and is not intended to govern and/or otherwise influence medical necessity decisions.

Policy Scope:

This Policy applies to claims submitted to Highmark Wholecare for coverage under its HealthChoices Medical Assistance product.

Max Units:

We apply Maximum Units of Service to claims submitted to us for services provided to Highmark Wholecare HealthChoices enrollees.

We use publically available government program guidelines and industry practice such as Commonwealth of Pennsylvania Medicaid Fee Schedule or those published by the Center for Medicaid and Medicare Services (CMS) to apply Maximum Units of Service.

<u>Appendix A</u> attached to this Policy is a full list of codes and the corresponding allowable max unit.

Provider Appeal of Denial of Coverage

Providers may appeal denials of coverage based on Maximum Units of Service using the provider appeal process. The provider's written request for appeal must include supporting documentation showing the need to exceed the maximum allowable limits. Providers may submit appeals via the provider portal, by fax at 1-855-501-3904 (for payment disputes please fax to 1-844-207-0334), or by mail:

Highmark Wholecare Attention: Provider Appeals P.O. Box 22278 Pittsburgh, PA 15222-1222

Disclaimer

This Policy is intended to serve as a resource regarding allowed Maximum Units of Service for claims for Highmark Wholecare HealthChoices enrollees. This Policy does not address all specific circumstances related to coverage and following this Policy alone is not a guarantee of coverage or payment.

We reserve the right to revise or adjust this Policy at any time and will notify providers according to contract requirement. All claims are subject to retrospective review and audit in accordance with applicable law, rule and regulation and Highmark Wholecare policies and procedures and, in the case of participating providers, their contract and the Provider Manual.

Our policies and procedures and the Provider Manual can be found at www.HighmarkWholecare.com. Please contact your Provider Relations representative for further information should you have any questions about this Policy.

Policy History

Date	Activity
06/01/2017	Initial effective date
09/01/2020	Updated Max Units Table
01/02/2022	Updated Max Units Table

Appendix A: Medicaid Outpatient Claims

CPT Code	CPT Description	Max Units Value
0001A	Immunization administration by intramuscular injection of severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (coronavirus disease [COVID-19]) vaccine, mRNA-LNP, spike protein, preservative free, 30 mcg/0.3 mL dosage, diluent reconstituted; first dose	1
0001U	Red blood cell antigen typing, DNA, human erythrocyte antigen gene analysis of 35 antigens from 11 blood groups, utilizing whole blood, common RBC alleles reported	1
0002A	Immunization administration by intramuscular injection of severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (coronavirus disease [COVID-19]) vaccine, mRNA-LNP, spike protein, preservative free, 30 mcg/0.3 mL dosage, diluent reconstituted; second dose	1
0002M	Liver disease, ten biochemical assays (ALT, A2-macroglobulin, apolipoprotein A-1, total bilirubin, GGT, haptoglobin, AST, glucose, total cholesterol and triglycerides) utilizing serum, prognostic algorithm reported as quantitative scores for fibrosis, steatosis and alcoholic steatohepatitis (ASH)	1
0002U	Oncology (colorectal), quantitative assessment of three urine metabolites (ascorbic acid, succinic acid and carnitine) by liquid chromatography with tandem mass spectrometry (LC-MS/MS) using multiple reaction monitoring acquisition, algorithm reported as likelihood of adenomatous polyps	1
0003A	Immunization administration by intramuscular injection of severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (coronavirus disease [COVID-19]) vaccine, mRNA-LNP, spike protein, preservative free, 30 mcg/0.3 mL dosage, diluent reconstituted; third dose	1
0003M	Liver disease, ten biochemical assays (ALT, A2-macroglobulin, apolipoprotein A-1, total bilirubin, GGT, haptoglobin, AST, glucose, total cholesterol and triglycerides) utilizing serum, prognostic algorithm reported as quantitative scores for fibrosis, steatosis and nonalcoholic steatohepatitis (NASH)	1
0003U	Oncology (ovarian) biochemical assays of five proteins (apolipoprotein A-1, CA 125 II, follicle stimulating hormone, human epididymis protein 4, transferrin), utilizing serum, algorithm reported as a likelihood score	1
0004A	Immunization administration by intramuscular injection of severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (coronavirus disease [COVID-19]) vaccine, mRNA-LNP, spike protein, preservative free, 30 mcg/0.3 mL dosage, diluent reconstituted; booster dose	1
0004M	Scoliosis, DNA analysis of 53 single nucleotide polymorphisms (SNPs), using saliva, prognostic algorithm reported as a risk score	1
0005U	Oncology (prostate) gene expression profile by real-time RT-PCR of 3 genes (ERG, PCA3, and SPDEF), urine, algorithm reported as risk score	1
0006M	Oncology (hepatic), mRNA expression levels of 161 genes, utilizing fresh hepatocellular carcinoma tumor tissue, with alpha-fetoprotein level, algorithm reported as a risk classifier	1

0007M	Oncology (gastrointestinal neuroendocrine tumors), real-time PCR expression analysis of 51 genes, utilizing whole peripheral blood, algorithm reported as a nomogram of tumor disease index	1
0007U	Drug test(s), presumptive, with definitive confirmation of positive results, any number of drug classes, urine, includes specimen verification including DNA authentication in comparison to buccal DNA, per date of service	1
0008U	Helicobacter pylori detection and antibiotic resistance, DNA, 16S and 23S rRNA, gyrA, pbp1, rdxA and rpoB, next generation sequencing, formalin-fixed paraffinembedded or fresh tissue or fecal sample, predictive, reported as positive or negative for resistance to clarithromycin, fluoroquinolones, metronidazole, amoxicillin, tetracycline, and rifabutin	1
0009U	Oncology (breast cancer), ERBB2 (HER2) copy number by FISH, tumor cells from formalin-fixed paraffin-embedded tissue isolated using image-based dielectrophoresis (DEP) sorting, reported as ERBB2 gene amplified or non-amplified	2
0010U	Infectious disease (bacterial), strain typing by whole genome sequencing, phylogenetic-based report of strain relatedness, per submitted isolate	2
0011A	Immunization administration by intramuscular injection of severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (coronavirus disease [COVID-19]) vaccine, mRNA-LNP, spike protein, preservative free, 100 mcg/0.5 mL dosage; first dose	1
0011M	Oncology, prostate cancer, mRNA expression assay of 12 genes (10 content and 2 housekeeping), RT-PCR test utilizing blood plasma and urine, algorithms to predict high-grade prostate cancer risk	1
0011U	Prescription drug monitoring, evaluation of drugs present by LC-MS/MS, using oral fluid, reported as a comparison to an estimated steady-state range, per date of service including all drug compounds and metabolites	1
0012A	Immunization administration by intramuscular injection of severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (coronavirus disease [COVID-19]) vaccine, mRNA-LNP, spike protein, preservative free, 100 mcg/0.5 mL dosage; second dose	1
0012M	Oncology (urothelial), mRNA, gene expression profiling by real-time quantitative PCR of five genes (MDK, HOXA13, CDC2 [CDK1], IGFBP5, and CXCR2), utilizing urine, algorithm reported as a risk score for having urothelial carcinoma	1
0012U	Germline disorders, gene rearrangement detection by whole genome next- generation sequencing, DNA, whole blood, report of specific gene rearrangement(s)	1
0013A	Immunization administration by intramuscular injection of severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (coronavirus disease [COVID-19]) vaccine, mRNA-LNP, spike protein, preservative free, 100 mcg/0.5 mL dosage; third dose	1
0013M	Oncology (urothelial), mRNA, gene expression profiling by real-time quantitative PCR of five genes (MDK, HOXA13, CDC2 [CDK1], IGFBP5, and CXCR2), utilizing urine, algorithm reported as a risk score for having recurrent urothelial carcinoma	1
0013U	Oncology (solid organ neoplasia), gene rearrangement detection by whole genome next-generation sequencing, DNA, fresh or frozen tissue or cells, report of specific gene rearrangement(s)	1

0014M	Liver disease, analysis of 3 biomarkers (hyaluronic acid [HA], procollagen III amino terminal peptide [PIINP], tissue inhibitor of metalloproteinase 1 [TIMP-1]), using immunoassays, utilizing serum, prognostic algorithm reported as a risk score and risk of liver fibrosis and liver-related clinical events within 5 years	1
0014U	Hematology (hematolymphoid neoplasia), gene rearrangement detection by whole genome next-generation sequencing, DNA, whole blood or bone marrow, report of specific gene rearrangement(s)	1
0015M	Adrenal cortical tumor, biochemical assay of 25 steroid markers, utilizing 24-hour urine specimen and clinical parameters, prognostic algorithm reported as a clinical risk and integrated clinical steroid risk for adrenal cortical carcinoma, adenoma, or other adrenal malignancy	1
0016M	Oncology (bladder), mRNA, microarray gene expression profiling of 209 genes, utilizing formalin-fixed paraffin-embedded tissue, algorithm reported as molecular subtype (luminal, luminal infiltrated, basal, basal claudin-low, neuroendocrine-like)	2
0016U	Oncology (hematolymphoid neoplasia), RNA, BCR/ABL1 major and minor breakpoint fusion transcripts, quantitative PCR amplification, blood or bone marrow, report of fusion not detected or detected with quantitation	1
0017U	Oncology (hematolymphoid neoplasia), JAK2 mutation, DNA, PCR amplification of exons 12-14 and sequence analysis, blood or bone marrow, report of JAK2 mutation not detected or detected	1
0018M	Transplantation medicine (allograft rejection, renal), measurement of donor and third-party-induced CD154+T-cytotoxic memory cells, utilizing whole peripheral blood, algorithm reported as a rejection risk score	1
0018U	Oncology (thyroid), microRNA profiling by RT-PCR of 10 microRNA sequences, utilizing fine needle aspirate, algorithm reported as a positive or negative result for moderate to high risk of malignancy	2
0019U	Oncology, RNA, gene expression by whole transcriptome sequencing, formalin-fixed paraffin-embedded tissue or fresh frozen tissue, predictive algorithm reported as potential targets for therapeutic agents	1
0021A	Immunization administration by intramuscular injection of severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (coronavirus disease [COVID-19]) vaccine, DNA, spike protein, chimpanzee adenovirus Oxford 1 (ChAdOx1) vector, preservative free, 5x10^10 viral particles/0.5 mL dosage; first dose	1
0021U	Oncology (prostate), detection of 8 autoantibodies (ARF 6, NKX3-1, 5'-UTR-BMI1, CEP 164, 3'-UTR-Ropporin, Desmocollin, AURKAIP-1, CSNK2A2), multiplexed immunoassay and flow cytometry serum, algorithm reported as risk score	1
0022A	Immunization administration by intramuscular injection of severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (coronavirus disease [COVID-19]) vaccine, DNA, spike protein, chimpanzee adenovirus Oxford 1 (ChAdOx1) vector, preservative free, 5x10^10 viral particles/0.5 mL dosage; second dose	1
0022U	Targeted genomic sequence analysis panel, non-small cell lung neoplasia, DNA and RNA analysis, 23 genes, interrogation for sequence variants and rearrangements, reported as presence/absence of variants and associated therapy(ies) to consider	2

0023U	Oncology (acute myelogenous leukemia), DNA, genotyping of internal tandem duplication, p.D835, p.I836, using mononuclear cells, reported as detection or non-detection of FLT3 mutation and indication for or against the use of midostaurin	1
0024U	Glycosylated acute phase proteins (GlycA), nuclear magnetic resonance spectroscopy, quantitative	1
0025U	Tenofovir, by liquid chromatography with tandem mass spectrometry (LC-MS/MS), urine, quantitative	1
0026U	Oncology (thyroid), DNA and mRNA of 112 genes, next-generation sequencing, fine needle aspirate of thyroid nodule, algorithmic analysis reported as a categorical result ("Positive, high probability of malignancy" or "Negative, low probability of malignancy")	2
0027U	JAK2 (Janus kinase 2) (eg, myeloproliferative disorder) gene analysis, targeted sequence analysis exons 12-15	1
0029U	Drug metabolism (adverse drug reactions and drug response), targeted sequence analysis (ie, CYP1A2, CYP2C19, CYP2C9, CYP2D6, CYP3A4, CYP3A5, CYP4F2, SLCO1B1, VKORC1 and rs12777823)	1
0030U	Drug metabolism (warfarin drug response), targeted sequence analysis (ie, CYP2C9, CYP4F2, VKORC1, rs12777823)	1
0031A	Immunization administration by intramuscular injection of severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (coronavirus disease [COVID-19]) vaccine, DNA, spike protein, adenovirus type 26 (Ad26) vector, preservative free, 5x10^10 viral particles/0.5mL dosage; single dose	1
0031U	CYP1A2 (cytochrome P450 family 1, subfamily A, member 2)(eg, drug metabolism) gene analysis, common variants (ie, *1F, *1K, *6, *7)	1
0032U	COMT (catechol-O-methyltransferase)(eg, drug metabolism) gene analysis, c.472G>A (rs4680) variant	1
0033U	HTR2A (5-hydroxytryptamine receptor 2A), HTR2C (5-hydroxytryptamine receptor 2C) (eg, citalopram metabolism) gene analysis, common variants (ie, HTR2A rs7997012 [c.614-2211T>C], HTR2C rs3813929 [c759C>T] and rs1414334 [c.551-3008C>G])	1
0034A	Immunization administration by intramuscular injection of severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (coronavirus disease [COVID-19]) vaccine, DNA, spike protein, adenovirus type 26 (Ad26) vector, preservative free, 5x10^10 viral particles/0.5 mL dosage; booster dose	1
0034U	TPMT (thiopurine S-methyltransferase), NUDT15 (nudix hydroxylase 15)(eg, thiopurine metabolism) gene analysis, common variants (ie, TPMT *2, *3A, *3B, *3C, *4, *5, *6, *8, *12; NUDT15 *3, *4, *5)	1
0035U	Neurology (prion disease), cerebrospinal fluid, detection of prion protein by quaking-induced conformational conversion, qualitative	1
0036U	Exome (ie, somatic mutations), paired formalin-fixed paraffin-embedded tumor tissue and normal specimen, sequence analyses	1
0037U	Targeted genomic sequence analysis, solid organ neoplasm, DNA analysis of 324 genes, interrogation for sequence variants, gene copy number amplifications, gene rearrangements, microsatellite instability and tumor mutational burden	1

0038U	Vitamin D, 25 hydroxy D2 and D3, by LC-MS/MS, serum microsample, quantitative	1
0039U	Deoxyribonucleic acid (DNA) antibody, double stranded, high avidity	1
0040U	BCR/ABL1 (t(9;22)) (eg, chronic myelogenous leukemia) translocation analysis, major breakpoint, quantitative	1
0041A	Immunization administration by intramuscular injection of severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (coronavirus disease [COVID-19]) vaccine, recombinant spike protein nanoparticle, saponin-based adjuvant, preservative free, 5 mcg/0.5 mL dosage; first dose	1
0041U	Borrelia burgdorferi, antibody detection of 5 recombinant protein groups, by immunoblot, IgM	1
0042A	Immunization administration by intramuscular injection of severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (coronavirus disease [COVID-19]) vaccine, recombinant spike protein nanoparticle, saponin-based adjuvant, preservative free, 5 mcg/0.5 mL dosage; second dose	1
0042Т	Cerebral perfusion analysis using computed tomography with contrast administration, including post-processing of parametric maps with determination of cerebral blood flow, cerebral blood volume, and mean transit time	1
0042U	Borrelia burgdorferi, antibody detection of 12 recombinant protein groups, by immunoblot, IgG	1
0043U	Tick-borne relapsing fever Borrelia group, antibody detection to 4 recombinant protein groups, by immunoblot, IgM	1
0044U	Tick-borne relapsing fever Borrelia group, antibody detection to 4 recombinant protein groups, by immunoblot, IgG	1
0045U	Oncology (breast ductal carcinoma in situ), mRNA, gene expression profiling by real- time RT-PCR of 12 genes (7 content and 5 housekeeping), utilizing formalin-fixed paraffin-embedded tissue, algorithm reported as recurrence score	1
0046U	FLT3 (fms-related tyrosine kinase 3) (eg, acute myeloid leukemia) internal tandem duplication (ITD) variants, quantitative	1
0047U	Oncology (prostate), mRNA, gene expression profiling by real-time RT-PCR of 17 genes (12 content and 5 housekeeping), utilizing formalin-fixed paraffin-embedded tissue, algorithm reported as a risk score	1
0048U	Oncology (solid organ neoplasia), DNA, targeted sequencing of protein-coding exons of 468 cancer-associated genes, including interrogation for somatic mutations and microsatellite instability, matched with normal specimens, utilizing formalin-fixed paraffin-embedded tumor tissue, report of clinically significant mutation(s)	1
0049U	NPM1 (nucleophosmin) (eg, acute myeloid leukemia) gene analysis, quantitative	1
0050U	Targeted genomic sequence analysis panel, acute myelogenous leukemia, DNA analysis, 194 genes, interrogation for sequence variants, copy number variants or rearrangements	1
0051U	Prescription drug monitoring, evaluation of drugs present by liquid chromatography tandem mass spectrometry (LC-MS/MS), urine or blood, 31 drug panel, reported as quantitative results, detected or not detected, per date of service	1

0052U	Lipoprotein, blood, high resolution fractionation and quantitation of lipoproteins, including all five major lipoprotein classes and subclasses of HDL, LDL, and VLDL by vertical auto profile ultracentrifugation	1
0053U	Oncology (prostate cancer), FISH analysis of 4 genes (ASAP1, HDAC9, CHD1 and PTEN), needle biopsy specimen, algorithm reported as probability of higher tumor grade	1
0054T	Computer-assisted musculoskeletal surgical navigational orthopedic procedure, with image-guidance based on fluoroscopic images (List separately in addition to code for primary procedure)	1
0054U	Prescription drug monitoring, 14 or more classes of drugs and substances, definitive tandem mass spectrometry with chromatography, capillary blood, quantitative report with therapeutic and toxic ranges, including steady-state range for the prescribed dose when detected, per date of service	1
0055T	Computer-assisted musculoskeletal surgical navigational orthopedic procedure, with image-guidance based on CT/MRI images (List separately in addition to code for primary procedure)	1
0055U	Cardiology (heart transplant), cell-free DNA, PCR assay of 96 DNA target sequences (94 single nucleotide polymorphism targets and two control targets), plasma	1
0056U	Hematology (acute myelogenous leukemia), DNA, whole genome next-generation sequencing to detect gene rearrangement(s), blood or bone marrow, report of specific gene rearrangement(s)	1
0058U	Oncology (Merkel cell carcinoma), detection of antibodies to the Merkel cell polyoma virus oncoprotein (small T antigen), serum, quantitative	1
0059U	Oncology (Merkel cell carcinoma), detection of antibodies to the Merkel cell polyoma virus capsid protein (VP1), serum, reported as positive or negative	1
0060U	Twin zygosity, genomic targeted sequence analysis of chromosome 2, using circulating cell-free fetal DNA in maternal blood	1
0061U	Transcutaneous measurement of five biomarkers (tissue oxygenation [StO2], oxyhemoglobin [ctHbO2], deoxyhemoglobin [ctHbR], papillary and reticular dermal hemoglobin concentrations [ctHb1 and ctHb2]), using spatial frequency domain imaging (SFDI) and multi-spectral analysis	2
0062U	Autoimmune (systemic lupus erythematosus), IgG and IgM analysis of 80 biomarkers, utilizing serum, algorithm reported with a risk score	1
0063U	Neurology (autism), 32 amines by LCMS/MS, using plasma, algorithm reported as metabolic signature associated with autism spectrum disorder	1
0064A	Immunization administration by intramuscular injection of severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (coronavirus disease [COVID-19]) vaccine, mRNA-LNP, spike protein, preservative free, 50 mcg/0.25 mL dosage, booster dose	1
0064U	Antibody, Treponema pallidum, total and rapid plasma reagin (RPR), immunoassay, qualitative	2
0065U	Syphilis test, non-treponemal antibody, immunoassay, qualitative (RPR)	2
0066U	Placental alpha-micro globulin-1 (PAMG1), immunoassay with direct optical observation, cervico-vaginal fluid, each specimen	1

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0067U	Oncology (breast), immunohistochemistry, protein expression profiling of 4 biomarkers (matrix metalloproteinase-1 [MMP-1], carcinoembryonic antigenrelated cell adhesion molecule 6 [CEACAM6], hyaluronoglucosaminidase [HYAL1], highly expressed in cancer protein [HEC1]), formalin-fixed paraffin-embedded precancerous breast tissue, algorithm reported as carcinoma risk score	2
0068U	Candida species panel (C. albicans, C. glabrata, C. parapsilosis, C. kruseii, C tropicalis, and C. auris), amplified probe technique with qualitative report of the presence or absence of each species	1
0069U	Oncology (colorectal), microRNA, RT-PCR expression profiling of miR-31-3p, formalinfixed paraffin-embedded tissue, algorithm reported as an expression score	1
0070U	CYP2D6 (cytochrome P450, family 2, subfamily D, polypeptide 6) (eg, drug metabolism) gene analysis, common and select rare variants (ie, *2, *3, *4, *4N, *5, *6, *7, *8, *9, *10, *11, *12, *13, *14A, *14B, *15, *17, *29, *35, *36, *41, *57, *61, *63, *68, *83, *xN)	1
0071A	Immunization administration by intramuscular injection of severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (coronavirus disease [COVID-19]) vaccine, mRNA-LNP, spike protein, preservative free, 10 mcg/0.2 mL dosage, diluent reconstituted, tris-sucrose formulation; first dose	1
0071T	Focused ultrasound ablation of uterine leiomyomata, including MR guidance; total leiomyomata volume less than 200 cc of tissue	1
0071U	CYP2D6 (cytochrome P450, family 2, subfamily D, polypeptide 6) (eg, drug metabolism) gene analysis, full gene sequence (List separately in addition to code for primary procedure)	1
0072A	Immunization administration by intramuscular injection of severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (coronavirus disease [COVID-19]) vaccine, mRNA-LNP, spike protein, preservative free, 10 mcg/0.2 mL dosage, diluent reconstituted, tris-sucrose formulation; second dose	1
0072T	Focused ultrasound ablation of uterine leiomyomata, including MR guidance; total leiomyomata volume greater or equal to 200 cc of tissue	1
0072U	CYP2D6 (cytochrome P450, family 2, subfamily D, polypeptide 6) (eg, drug metabolism) gene analysis, targeted sequence analysis (ie, CYP2D6-2D7 hybrid gene) (List separately in addition to code for primary procedure)	1
0073U	CYP2D6 (cytochrome P450, family 2, subfamily D, polypeptide 6) (eg, drug metabolism) gene analysis, targeted sequence analysis (ie, CYP2D7-2D6 hybrid gene) (List separately in addition to code for primary procedure)	1
0074U	CYP2D6 (cytochrome P450, family 2, subfamily D, polypeptide 6) (eg, drug metabolism) gene analysis, targeted sequence analysis (ie, non-duplicated gene when duplication/multiplication is trans) (List separately in addition to code for primary procedure)	1
0075T	Transcatheter placement of extracranial vertebral artery stent(s), including radiologic supervision and interpretation, open or percutaneous; initial vessel	1
0075U	CYP2D6 (cytochrome P450, family 2, subfamily D, polypeptide 6) (eg, drug metabolism) gene analysis, targeted sequence analysis (ie, 5? gene duplication/multiplication) (List separately in addition to code for primary procedure)	1

0076Т	Transcatheter placement of extracranial vertebral artery stent(s), including radiologic supervision and interpretation, open or percutaneous; each additional vessel (List separately in addition to code for primary procedure)	1
0076U	CYP2D6 (cytochrome P450, family 2, subfamily D, polypeptide 6) (eg, drug metabolism) gene analysis, targeted sequence analysis (ie, 3? gene duplication/multiplication) (List separately in addition to code for primary procedure)	1
0077U	Immunoglobulin paraprotein (M-protein), qualitative, immunoprecipitation and mass spectrometry, blood or urine, including isotype	2
0078U	Pain management (opioid-use disorder) genotyping panel, 16 common variants (ie, ABCB1, COMT, DAT1, DBH, DOR, DRD1, DRD2, DRD4, GABA, GAL, HTR2A, HTTLPR, MTHFR, MUOR, OPRK1, OPRM1), buccal swab or other germline tissue sample, algorithm reported as positive or negative risk of opioid-use disorder	1
0079U	Comparative DNA analysis using multiple selected single-nucleotide polymorphisms (SNPs), urine and buccal DNA, for specimen identity verification	1
0080U	Oncology (lung), mass spectrometric analysis of galectin-3-binding protein and scavenger receptor cysteine-rich type 1 protein M130, with five clinical risk factors (age, smoking status, nodule diameter, nodule-spiculation status and nodule location), utilizing plasma, algorithm reported as a categorical probability of malignancy	1
0082U	Drug test(s), definitive, 90 or more drugs or substances, definitive chromatography with mass spectrometry, and presumptive, any number of drug classes, by instrument chemistry analyzer (utilizing immunoassay), urine, report of presence or absence of each drug, drug metabolite or substance with description and severity of significant interactions per date of service	1
0083U	Oncology, response to chemotherapy drugs using motility contrast tomography, fresh or frozen tissue, reported as likelihood of sensitivity or resistance to drugs or drug combinations	1
0084U	Red blood cell antigen typing, DNA, genotyping of 10 blood groups with phenotype prediction of 37 red blood cell antigens	1
0086U	Infectious disease (bacterial and fungal), organism identification, blood culture, using rRNA FISH, 6 or more organism targets, reported as positive or negative with phenotypic minimum inhibitory concentration (MIC)-based antimicrobial susceptibility	1
0087U	Cardiology (heart transplant), mRNA gene expression profiling by microarray of 1283 genes, transplant biopsy tissue, allograft rejection and injury algorithm reported as a probability score	1
0088U	Transplantation medicine (kidney allograft rejection), microarray gene expression profiling of 1494 genes, utilizing transplant biopsy tissue, algorithm reported as a probability score for rejection	1
0089U	Oncology (melanoma), gene expression profiling by RTqPCR, PRAME and LINC00518, superficial collection using adhesive patch(es)	1
0090U	Oncology (cutaneous melanoma), mRNA gene expression profiling by RT-PCR of 23 genes (14 content and 9 housekeeping), utilizing formalin-fixed paraffin-embedded (FFPE) tissue, algorithm reported as a categorical result (ie, benign, intermediate, malignant)	1

0091U	Oncology (colorectal) screening, cell enumeration of circulating tumor cells, utilizing whole blood, algorithm, for the presence of adenoma or cancer, reported as a positive or negative result	1
0092U	Oncology (lung), three protein biomarkers, immunoassay using magnetic nanosensor technology, plasma, algorithm reported as risk score for likelihood of malignancy	1
0093U	Prescription drug monitoring, evaluation of 65 common drugs by LC-MS/MS, urine, each drug reported detected or not detected	1
0094U	Genome (eg, unexplained constitutional or heritable disorder or syndrome), rapid sequence analysis	1
0095T	Removal of total disc arthroplasty (artificial disc), anterior approach, each additional interspace, cervical (List separately in addition to code for primary procedure)	1
0095U	Inflammation (eosinophilic esophagitis), ELISA analysis of eotaxin-3 (CCL26 [C-C motif chemokine ligand 26]) and major basic protein (PRG2 [proteoglycan 2, pro eosinophil major basic protein]), specimen obtained by swallowed nylon string, algorithm reported as predictive probability index for active eosinophilic esophagitis	1
0096U	Human papillomavirus (HPV), high-risk types (ie, 16, 18, 31, 33, 35, 39, 45, 51, 52, 56, 58, 59, 66, 68), male urine	1
0097U	Gastrointestinal pathogen, multiplex reverse transcription and multiplex amplified probe technique, multiple types or subtypes, 22 targets (Campylobacter [C. jejuni/C. coli/C. upsaliensis], Clostridium difficile [C. difficile] toxin A/B, Plesiomonas shigelloides, Salmonella, Vibrio [V. parahaemolyticus/V. vulnificus/V. cholerae], including specific identification of Vibrio cholerae, Yersinia enterocolitica, Enteroaggregative Escherichia coli [EAEC], Enteropathogenic Escherichia coli [EPEC], Enterotoxigenic Escherichia coli [ETEC] lt/st, Shiga-like toxin-producing Escherichia coli [STEC] stx1/stx2 [including specific identification of the E. coli O157 serogroup within STEC], Shigella/Enteroinvasive Escherichia coli [EIEC], Cryptosporidium, Cyclospora cayetanensis, Entamoeba histolytica, Giardia lamblia [also known as G. intestinalis and G. duodenalis], adenovirus F 40/41, astrovirus, norovirus GI/GII, rotavirus A, sapovirus [Genogroups I, II, IV, and V])	1
0098Т	Revision including replacement of total disc arthroplasty (artificial disc), anterior approach, each additional interspace, cervical (List separately in addition to code for primary procedure)	2
0100T	Placement of a subconjunctival retinal prosthesis receiver and pulse generator, and implantation of intraocular retinal electrode array, with vitrectomy	1
0101T	Extracorporeal shock wave involving musculoskeletal system, not otherwise specified	1
0101U	Hereditary colon cancer disorders (eg, Lynch syndrome, PTEN hamartoma syndrome, Cowden syndrome, familial adenomatosis polyposis), genomic sequence analysis panel utilizing a combination of NGS, Sanger, MLPA, and array CGH, with MRNA analytics to resolve variants of unknown significance when indicated (15 genes [sequencing and deletion/duplication], EPCAM and GREM1 [deletion/duplication only])	1
0102T	Extracorporeal shock wave, performed by a physician, requiring anesthesia other than local, and involving the lateral humeral epicondyle	2

		1
0102U	Hereditary breast cancer-related disorders (eg, hereditary breast cancer, hereditary ovarian cancer, hereditary endometrial cancer), genomic sequence analysis panel utilizing a combination of NGS, Sanger, MLPA, and array CGH, with MRNA analytics to resolve variants of unknown significance when indicated (17 genes [sequencing and deletion/duplication]	1
0103U	Hereditary ovarian cancer (eg, hereditary ovarian cancer, hereditary endometrial cancer), genomic sequence analysis panel utilizing a combination of NGS, Sanger, MLPA, and array CGH, with MRNA analytics to resolve variants of unknown significance when indicated (24 genes [sequencing and deletion/duplication], EPCAM [deletion/duplication only]	1
0105U	Nephrology (chronic kidney disease), multiplex electrochemiluminescent immunoassay (ECLIA) of tumor necrosis factor receptor 1A, receptor superfamily 2 (TNFR1, TNFR2), and kidney injury molecule-1 (KIM-1) combined with longitudinal clinical data, including APOL1 genotype if available, and plasma (isolated fresh or frozen), algorithm reported as probability score for rapid kidney function decline (RKFD)	1
0106T	Quantitative sensory testing (QST), testing and interpretation per extremity; using touch pressure stimuli to assess large diameter sensation	4
0106U	Gastric emptying, serial collection of 7 timed breath specimens, non-radioisotope carbon-13 (13C) spirulina substrate, analysis of each specimen by gas isotope ratio mass spectrometry, reported as rate of 13CO2 excretion	1
0107T	Quantitative sensory testing (QST), testing and interpretation per extremity; using vibration stimuli to assess large diameter fiber sensation	4
0107U	Clostridium difficile toxin(s) antigen detection by immunoassay technique, stool, qualitative, multiple-step method	1
0108T	Quantitative sensory testing (QST), testing and interpretation per extremity; using cooling stimuli to assess small nerve fiber sensation and hyperalgesia	4
0108U	Gastroenterology (Barrett's esophagus), whole slide-digital imaging, including morphometric analysis, computer-assisted quantitative immunolabeling of 9 protein biomarkers (p16, AMACR, p53, CD68, COX-2, CD45RO, HIF1a, HER-2, K20) and morphology, formalin-fixed paraffin- embedded tissue, algorithm reported as risk of progression to high-grade dysplasia or cancer	1
0109T	Quantitative sensory testing (QST), testing and interpretation per extremity; using heat-pain stimuli to assess small nerve fiber sensation and hyperalgesia	4
0109U	Infectious disease (Aspergillus species), real-time PCR for detection of DNA from 4 species (A. fumigatus, A. terreus, A. niger, and A. flavus), blood, lavage fluid, or tissue, qualitative reporting of presence or absence of each species	1
0110T	Quantitative sensory testing (QST), testing and interpretation per extremity; using other stimuli to assess sensation	4
0110U	Prescription drug monitoring, one or more oral oncology drug(s) and substances, definitive tandem mass spectrometry with chromatography, serum or plasma from capillary blood or venous blood, quantitative report with steady-state range for the prescribed drug(s) when detected	1
0111U	Oncology (colon cancer), targeted KRAS (codons 12, 13, and 61) and NRAS (codons 12, 13, and 61) gene analysis utilizing formalin-fixed paraffin-embedded tissue	1

0112U	Infectious agent detection and identification, targeted sequence analysis (16S and 18S rRNA genes) with drug- resistance gene	1
0113U	Oncology (prostate), measurement of PCA3 and TMPRSS2-ERG in urine and PSA in serum following prostatic massage, by RNA amplification and fluorescence- based detection, algorithm reported as risk score	1
0114U	Gastroenterology (Barrett's esophagus), VIM and CCNA1 methylation analysis, esophageal cells, algorithm reported as likelihood for Barrett's esophagus	1
0115U	Respiratory infectious agent detection by nucleic acid (DNA and RNA), 18 viral types and subtypes and 2 bacterial targets, amplified probe technique, including multiplex reverse transcription for RNA targets, each analyte reported as detected or not detected	1
0116U	Prescription drug monitoring, enzyme immunoassay of 35 or more drugs confirmed with LC-MS/MS, oral fluid, algorithm results reported as a patient-compliance measurement with risk of drug to drug interactions for prescribed medications	1
0117U	Pain management, analysis of 11 endogenous analytes (methylmalonic acid, xanthurenic acid, homocysteine, pyroglutamic acid, vanilmandelate, 5-hydroxyindoleacetic acid, hydroxymethylglutarate, ethylmalonate, 3-hydroxypropyl mercapturic acid (3-HPMA), quinolinic acid, kynurenic acid), LC-MS/MS, urine, algorithm reported as a pain-index score with likelihood of atypical biochemical function associated with pain	1
0118U	Transplantation medicine, quantification of donor-derived cell-free DNA using whole genome next-generation sequencing, plasma, reported as percentage of donor- derived cell-free DNA in the total cell-free DNA	1
0119U	Cardiology, ceramides by liquid chromatography-tandem mass spectrometry, plasma, quantitative report with risk score for major cardiovascular events	1
0120U	Oncology (B-cell lymphoma classification), mRNA, gene expression profiling by fluorescent probe hybridization of 58 genes (45 content and 13 housekeeping genes), formalin-fixed paraffin-embedded tissue, algorithm reported as likelihood for primary mediastinal B-cell lymphoma (PMBCL) and diffuse large B-cell lymphoma (DLBCL) with cell of origin subtyping in the latter	1
0121U	Sickle cell disease, microfluidic flow adhesion (VCAM-1), whole blood	1
0122U	Sickle cell disease, microfluidic flow adhesion (P-Selectin), whole blood	1
0123U	Mechanical fragility, RBC, shear stress and spectral analysis profiling	1
0129U	Hereditary breast cancer-related disorders (eg, hereditary breast cancer, hereditary ovarian cancer, hereditary endometrial cancer), genomic sequence analysis and deletion/duplication analysis panel (ATM, BRCA1, BRCA2, CDH1, CHEK2, PALB2, PTEN, and TP53)	1
0130U	Hereditary colon cancer disorders (eg, Lynch syndrome, PTEN hamartoma syndrome, Cowden syndrome, familial adenomatosis polyposis), targeted mRNA sequence analysis panel (APC, CDH1, CHEK2, MLH1, MSH2, MSH6, MUTYH, PMS2, PTEN, and TP53) (List separately in addition to code for primary procedure)	1
0131U	Hereditary breast cancer-related disorders (eg, hereditary breast cancer, hereditary ovarian cancer, hereditary endometrial cancer), targeted mRNA sequence analysis panel (13 genes) (List separately in addition to code for primary procedure)	1

0132U	Hereditary ovarian cancer-related disorders (eg, hereditary breast cancer, hereditary ovarian cancer, hereditary endometrial cancer), targeted mRNA sequence analysis panel (17 genes) (List separately in addition to code for primary procedure)	1
0133U	Hereditary prostate cancer-related disorders, targeted mRNA sequence analysis panel (11 genes) (List separately in addition to code for primary procedure)	1
0134U	Hereditary pan cancer (eg, hereditary breast and ovarian cancer, hereditary endometrial cancer, hereditary colorectal cancer), targeted mRNA sequence analysis panel (18 genes) (List separately in addition to code for primary procedure)	1
0135U	Hereditary gynecological cancer (eg, hereditary breast and ovarian cancer, hereditary endometrial cancer, hereditary colorectal cancer), targeted Mrna sequence analysis panel (12 genes) (List separately in addition to code for primary procedure)	1
0136U	ATM (ataxia telangiectasia mutated) (eg, ataxia telangiectasia) mRNA sequence analysis (List separately in addition to code for primary procedure)	1
0137U	PALB2 (partner and localizer of BRCA2) (eg, breast and pancreatic cancer) mRNA sequence analysis (List separately in addition to code for primary procedure)	1
0138U	BRCA1 (BRCA1, DNA repair associated), BRCA2 (BRCA2, DNA repair associated) (eg, hereditary breast and ovarian cancer) mRNA sequence analysis (List separately in addition to code for primary procedure)	1
0139U	Neurology (autism spectrum disorder [ASD]), quantitative measurements of 6 central carbon metabolites (ie, ?-ketoglutarate, alanine, lactate, phenylalanine, pyruvate, and succinate), LC-MS/MS, plasma, algorithmic analysis with result reported as negative or positive (with metabolic subtypes of ASD)	1
0140U	Infectious disease (fungi), fungal pathogen identification, DNA (15 fungal targets), blood culture, amplified probe technique, each target reported as detected or not detected	1
0141U	Infectious disease (bacteria and fungi), gram-positive organism identification and drug resistance element detection, DNA (20 gram-positive bacterial targets, 4 resistance genes, 1 pan gram-negative bacterial target, 1 pan Candida target), blood culture, amplified probe technique, each target reported as detected or not detected	1
0142U	Infectious disease (bacteria and fungi), gram-negative bacterial identification and drug resistance element detection, DNA (21 gram-negative bacterial targets, 6 resistance genes, 1 pan gram-positive bacterial target, 1 pan Candida target), amplified probe technique, each target reported as detected or not detected	1
0143U	Drug assay, definitive, 120 or more drugs or metabolites, urine, quantitative liquid chromatography with tandem mass spectrometry (LC-MS/MS) using multiple reaction monitoring (MRM), with drug or metabolite description, comments including sample validation, per date of service	1
0144U	Drug assay, definitive, 160 or more drugs or metabolites, urine, quantitative liquid chromatography with tandem mass spectrometry (LC-MS/MS) using multiple reaction monitoring (MRM), with drug or metabolite description, comments including sample validation, per date of service	1

chromatography with tandem mass spectrometry (LC-MS/MS) using multiple reaction monitoring (MRM), with drug or metabolite description, comments including sample validation, per date of service Drug assay, definitive, 80 or more drugs or metabolites, urine, by quantitative liquid chromatography with tandem mass spectrometry (LC-MS/MS) using multiple reaction monitoring (MRM), with drug or metabolite description, comments including sample validation, per date of service Drug assay, definitive, 80 or more drugs or metabolites, urine, quantitative liquid chromatography with tandem mass spectrometry (LC-MS/MS) using multiple reaction monitoring (MRM), with drug or metabolite description, comments including sample validation, per date of service Drug assay, definitive, 100 or more drugs or metabolites, urine, quantitative liquid chromatography with tandem mass spectrometry (LC-MS/MS) using multiple reaction monitoring (MRM), with drug or metabolite description, comments including sample validation, per date of service Drug assay, definitive, 60 or more drugs or metabolites, urine, quantitative liquid chromatography with tandem mass spectrometry (LC-MS/MS) using multiple reaction monitoring (MRM), with drug or metabolite description, comments including sample validation, per date of service Drug assay, definitive, 60 or more drugs or metabolites, urine, quantitative liquid chromatography with tandem mass spectrometry (LC-MS/MS) using multiple reaction monitoring (MRM), with drug or metabolite description, comments including sample validation, per date of service Drug assay, definitive, 120 or more drugs or metabolites, urine, quantitative liquid chromatography with tandem mass spectrometry (LC-MS/MS) using multiple reaction monitoring (MRM), with drug or metabolite description, comments including sample validation, per date of service Drug assay, definitive, 60 or more drugs or metabolites, urine, quantitative liquid chromatography with tandem mass spectrometry (LC-MS/MS) using multiple reaction monitoring (MRM			
chromatography with tandem mass spectrometry (ILC-MS/MS) using multiple reaction monitoring (MRM), with drug or metabolite description, comments including sample validation, per date of service D147U Drug assay, definitive, 85 or more drugs or metabolites, urine, quantitative liquid chromatography with tandem mass spectrometry (ILC-MS/MS) using multiple reaction monitoring (MRM), with drug or metabolite description, comments including sample validation, per date of service D148U Drug assay, definitive, 100 or more drugs or metabolites, urine, quantitative liquid chromatography with tandem mass spectrometry (ILC-MS/MS) using multiple reaction monitoring (MRM), with drug or metabolite description, comments including sample validation, per date of service D149U Drug assay, definitive, 60 or more drugs or metabolites, urine, quantitative liquid chromatography with tandem mass spectrometry (ILC-MS/MS) using multiple reaction monitoring (MRM), with drug or metabolite description, comments including sample validation, per date of service D150U Drug assay, definitive, 120 or more drugs or metabolites, urine, quantitative liquid chromatography with tandem mass spectrometry (ILC-MS/MS) using multiple reaction monitoring (MRM), with drug or metabolite description, comments including sample validation, per date of service D150U Drug assay, definitive, 120 or more drugs or metabolite, urine, quantitative liquid chromatography with tandem mass spectrometry (ILC-MS/MS) using multiple reaction monitoring (MRM), and are of service D151U Infectious disease (bacterial or viral respiratory tract infection), pathogen specific nucleic acid (DNA or RNA), 33 targets, real-time semi-quantitative PCR, bronchoalveolar lavage, sputum, or endotracheal aspirate, detection of 33 organismal and antibiotic resistance genes with limited semi-quantitative results D152U Infectious disease (bacteria, fungi, parasites, and DNA viruses), microbial cell-free DNA, plasma, untargeted next-generation sequencing, report for significant positive pa	0145U	chromatography with tandem mass spectrometry (LC-MS/MS) using multiple reaction monitoring (MRM), with drug or metabolite description, comments	1
chromatography with tandem mass spectrometry (IC-MS/MS) using multiple reaction monitoring (MRM), with drug or metabolite description, comments including sample validation, per date of service D148U Drug assay, definitive, 100 or more drugs or metabolites, urine, quantitative liquid chromatography with tandem mass spectrometry (IC-MS/MS) using multiple reaction monitoring (MRM), with drug or metabolite description, comments including sample validation, per date of service D149U Drug assay, definitive, 60 or more drugs or metabolites, urine, quantitative liquid chromatography with tandem mass spectrometry (IC-MS/MS) using multiple reaction monitoring (MRM), with drug or metabolite description, comments including sample validation, per date of service D150U Drug assay, definitive, 120 or more drugs or metabolites, urine, quantitative liquid chromatography with tandem mass spectrometry (IC-MS/MS) using multiple reaction monitoring (MRM), with drug or metabolite description, comments including sample validation, per date of service D150U Infectious disease (bacterial or viral respiratory tract infection), pathogen specific nucleic acid (DNA or RNA), 33 targets, real-time semi-quantitative PCR, bronchoalveolar lavage, sputum, or endotracheal aspirate, detection of 33 organismal and antibiotic resistance genes with limited semi-quantitative results D152U Infectious disease (bacteria, fungi, parasites, and DNA viruses), microbial cell-free DNA, plasma, untargeted next-generation sequencing, report for significant positive pathogens Oncology (breast), mRNA, gene expression profiling by next-generation sequencing of 101 genes, utilizing formalin-fixed paraffin-embedded tissue, algorithm reported as a triple negative breast cancer clinical subtype(s) with information on immune cell involvement Oncology (breast cancer), RNA, analysis by real-time RT-PCR of the FGFR3 (fibroblast growth factor receptor 3) gene analysis (ie, p.R248C [c.742C>T], p.S249C [c.746C>G], p.G370C [c.1108G>T], p.Y373C [c.1118A>G], FGFR3-	0146U	chromatography with tandem mass spectrometry (LC-MS/MS) using multiple reaction monitoring (MRM), with drug or metabolite description, comments	1
chromatography with tandem mass spectrometry (LC-MS/MS) using multiple reaction monitoring (MRM), with drug or metabolite description, comments including sample validation, per date of service Drug assay, definitive, 60 or more drugs or metabolites, urine, quantitative liquid chromatography with tandem mass spectrometry (LC-MS/MS) using multiple reaction monitoring (MRM), with drug or metabolite description, comments including sample validation, per date of service Drug assay, definitive, 120 or more drugs or metabolites, urine, quantitative liquid chromatography with tandem mass spectrometry (LC-MS/MS) using multiple reaction monitoring (MRM), with drug or metabolite description, comments including sample validation, per date of service Disputable of the service linfection monitoring (MRM), with drug or metabolite description, comments including sample validation, per date of service Infectious disease (bacterial or viral respiratory tract infection), pathogen specific nucleic acid (DNA or RNA), 33 targets, real-time semi-quantitative PCR, bronchoalveolar lavage, sputum, or endotracheal aspirate, detection of 33 organismal and antibiotic resistance genes with limited semi-quantitative results Infectious disease (bacteria, fungi, parasites, and DNA viruses), microbial cell-free DNA, plasma, untargeted next-generation sequencing, report for significant positive pathogens Oncology (breast), mRNA, gene expression profiling by next-generation sequencing of 101 genes, utilizing formallin-fixed paraffin-embedded tissue, algorithm reported as a triple negative breast cancer clinical subtype(s) with information on immune cell involvement Oncology (urothelial cancer), RNA, analysis by real-time RT-PCR of the FGFR3 (fibroblast growth factor receptor 3) gene analysis (ie, p.R248C [c.742C>T], p.S249C [c.746C>G), p.G370C [c.1108G>T), p.Y373C [c.1118A>G], FGFR3-TACC3v1, and FGFR3-TACC3v3), utilizing formalin-fixed paraffin-embedded urothelial cancer tumor tissue, reported as FGFR gene alteration status Oncology (brea	0147U	chromatography with tandem mass spectrometry (LC-MS/MS) using multiple reaction monitoring (MRM), with drug or metabolite description, comments	1
chromatography with tandem mass spectrometry (LC-MS/MS) using multiple reaction monitoring (MRM), with drug or metabolite description, comments including sample validation, per date of service Drug assay, definitive, 120 or more drugs or metabolites, urine, quantitative liquid chromatography with tandem mass spectrometry (LC-MS/MS) using multiple reaction monitoring (MRM), with drug or metabolite description, comments including sample validation, per date of service Infectious disease (bacterial or viral respiratory tract infection), pathogen specific nucleic acid (DNA or RNA), 33 targets, real-time semi-quantitative PCR, bronchoalveolar lavage, sputum, or endotracheal aspirate, detection of 33 organismal and antibiotic resistance genes with limited semi-quantitative results Infectious disease (bacteria, fungi, parasites, and DNA viruses), microbial cell-free DNA, plasma, untargeted next-generation sequencing, report for significant positive pathogens Oncology (breast), mRNA, gene expression profiling by next-generation sequencing of 101 genes, utilizing formalin-fixed paraffin-embedded tissue, algorithm reported as a triple negative breast cancer clinical subtype(s) with information on immune cell involvement Oncology (urothelial cancer), RNA, analysis by real-time RT-PCR of the FGFR3 (fibroblast growth factor receptor 3) gene analysis (ie, p.R248C [c.742C>T], p.S249C [c.746C>G], p.G370C [c.1108G>T], p.Y373C [c.1118A>G], FGFR3-TACC3v1, and FGFR3-TACC3v3), utilizing formalin-fixed paraffin-embedded urothelial cancer tumor tissue, reported as FGFR gene alteration status Oncology (breast cancer), DNA, PIK3CA (phosphatidylinositol-4,5-bisphosphate 3-kinase, catalytic subunit alpha) (eg, breast cancer) gene analysis (ie, p.C420R, p.E545K, p.E545D [g.1635G>T only], p.E545G, p.E545K, p.Q546E, p.Q546R, p.H1047L, p.H1047R, p.H1047Y), utilizing formalin-fixed paraffin-embedded breast tumor tissue, reported as PIK3CA gene mutation status	0148U	chromatography with tandem mass spectrometry (LC-MS/MS) using multiple reaction monitoring (MRM), with drug or metabolite description, comments	1
chromatography with tandem mass spectrometry (LC-MS/MS) using multiple reaction monitoring (MRM), with drug or metabolite description, comments including sample validation, per date of service Infectious disease (bacterial or viral respiratory tract infection), pathogen specific nucleic acid (DNA or RNA), 33 targets, real-time semi-quantitative PCR, bronchoalveolar lavage, sputum, or endotracheal aspirate, detection of 33 organismal and antibiotic resistance genes with limited semi-quantitative results Infectious disease (bacteria, fungi, parasites, and DNA viruses), microbial cell-free DNA, plasma, untargeted next-generation sequencing, report for significant positive pathogens Oncology (breast), mRNA, gene expression profiling by next-generation sequencing of 101 genes, utilizing formalin-fixed paraffin-embedded tissue, algorithm reported as a triple negative breast cancer clinical subtype(s) with information on immune cell involvement Oncology (urothelial cancer), RNA, analysis by real-time RT-PCR of the FGFR3 (fibroblast growth factor receptor 3) gene analysis (ie, p.R248C [c.742C>T], p.S249C [c.746C>G], p.G370C [c.1108G>T], p.Y373C [c.1118A>G], FGFR3-TACC3v1, and FGFR3-TACC3v3), utilizing formalin-fixed paraffin-embedded urothelial cancer tumor tissue, reported as FGFR gene alteration status Oncology (breast cancer), DNA, PIK3CA (phosphatidylinositol-4,5-bisphosphate 3-kinase, catalytic subunit alpha) (eg, breast cancer) gene analysis (ie, p.C420R, p.E542K, p.E545A, p.E545D [g.1635G>T only], p.E545G, p.E545K, p.Q546E, p.Q546R, p.H1047L, p.H1047R, p.H1047Y), utilizing formalin-fixed paraffin-embedded breast tumor tissue, reported as PIK3CA gene mutation status	0149U	chromatography with tandem mass spectrometry (LC-MS/MS) using multiple reaction monitoring (MRM), with drug or metabolite description, comments	1
nucleic acid (DNA or RNA), 33 targets, real-time semi-quantitative PCR, bronchoalveolar lavage, sputum, or endotracheal aspirate, detection of 33 organismal and antibiotic resistance genes with limited semi-quantitative results 10152U Infectious disease (bacteria, fungi, parasites, and DNA viruses), microbial cell-free DNA, plasma, untargeted next-generation sequencing, report for significant positive pathogens 10153U Oncology (breast), mRNA, gene expression profiling by next-generation sequencing of 101 genes, utilizing formalin-fixed paraffin-embedded tissue, algorithm reported as a triple negative breast cancer clinical subtype(s) with information on immune cell involvement 10154U Oncology (urothelial cancer), RNA, analysis by real-time RT-PCR of the FGFR3 (fibroblast growth factor receptor 3) gene analysis (ie, p.R248C [c.742C>T], p.S249C [c.746C>G], p.G370C [c.1108G>T], p.Y373C [c.1118A>G], FGFR3-TACC3v1, and FGFR3-TACC3v3), utilizing formalin-fixed paraffin-embedded urothelial cancer tumor tissue, reported as FGFR gene alteration status 10155U Oncology (breast cancer), DNA, PIK3CA (phosphatidylinositol-4,5-bisphosphate 3-kinase, catalytic subunit alpha) (eg, breast cancer) gene analysis (ie, p.C420R, p.E542K, p.E545A, p.E545A, p.E545D [g.1635G>T only], p.E545G, p.E545K, p.Q546E, p.Q546R, p.H1047L, p.H1047R, p.H1047Y), utilizing formalin-fixed paraffin-embedded breast tumor tissue, reported as PIK3CA gene mutation status	0150U	chromatography with tandem mass spectrometry (LC-MS/MS) using multiple reaction monitoring (MRM), with drug or metabolite description, comments	1
DNA, plasma, untargeted next-generation sequencing, report for significant positive pathogens Oncology (breast), mRNA, gene expression profiling by next-generation sequencing of 101 genes, utilizing formalin-fixed paraffin-embedded tissue, algorithm reported as a triple negative breast cancer clinical subtype(s) with information on immune cell involvement Oncology (urothelial cancer), RNA, analysis by real-time RT-PCR of the FGFR3 (fibroblast growth factor receptor 3) gene analysis (ie, p.R248C [c.742C>T], p.S249C [c.746C>G], p.G370C [c.1108G>T], p.Y373C [c.1118A>G], FGFR3-TACC3v1, and FGFR3-TACC3v3), utilizing formalin-fixed paraffin-embedded urothelial cancer tumor tissue, reported as FGFR gene alteration status Oncology (breast cancer), DNA, PIK3CA (phosphatidylinositol-4,5-bisphosphate 3-kinase, catalytic subunit alpha) (eg, breast cancer) gene analysis (ie, p.C420R, p.E542K, p.E545A, p.E545D [g.1635G>T only], p.E545G, p.E545K, p.Q546E, p.Q546R, p.H1047L, p.H1047R, p.H1047Y), utilizing formalin-fixed paraffin-embedded breast tumor tissue, reported as PIK3CA gene mutation status	0151U	nucleic acid (DNA or RNA), 33 targets, real-time semi-quantitative PCR, bronchoalveolar lavage, sputum, or endotracheal aspirate, detection of 33	1
of 101 genes, utilizing formalin-fixed paraffin-embedded tissue, algorithm reported as a triple negative breast cancer clinical subtype(s) with information on immune cell involvement Oncology (urothelial cancer), RNA, analysis by real-time RT-PCR of the FGFR3 (fibroblast growth factor receptor 3) gene analysis (ie, p.R248C [c.742C>T], p.S249C [c.746C>G], p.G370C [c.1108G>T], p.Y373C [c.1118A>G], FGFR3-TACC3v1, and FGFR3-TACC3v3), utilizing formalin-fixed paraffin-embedded urothelial cancer tumor tissue, reported as FGFR gene alteration status Oncology (breast cancer), DNA, PIK3CA (phosphatidylinositol-4,5-bisphosphate 3-kinase, catalytic subunit alpha) (eg, breast cancer) gene analysis (ie, p.C420R, p.E542K, p.E545A, p.E545D [g.1635G>T only], p.E545G, p.E545K, p.Q546E, p.Q546R, p.H1047L, p.H1047R, p.H1047Y), utilizing formalin-fixed paraffin-embedded breast tumor tissue, reported as PIK3CA gene mutation status	0152U	DNA, plasma, untargeted next-generation sequencing, report for significant positive	1
(fibroblast growth factor receptor 3) gene analysis (ie, p.R248C [c.742C>T], p.S249C [c.746C>G], p.G370C [c.1108G>T], p.Y373C [c.1118A>G], FGFR3-TACC3v1, and FGFR3-TACC3v3), utilizing formalin-fixed paraffin-embedded urothelial cancer tumor tissue, reported as FGFR gene alteration status Oncology (breast cancer), DNA, PIK3CA (phosphatidylinositol-4,5-bisphosphate 3-kinase, catalytic subunit alpha) (eg, breast cancer) gene analysis (ie, p.C420R, p.E542K, p.E545A, p.E545D [g.1635G>T only], p.E545G, p.E545K, p.Q546E, p.Q546R, p.H1047L, p.H1047R, p.H1047Y), utilizing formalin-fixed paraffin-embedded breast tumor tissue, reported as PIK3CA gene mutation status	0153U	of 101 genes, utilizing formalin-fixed paraffin-embedded tissue, algorithm reported as a triple negative breast cancer clinical subtype(s) with information on immune	1
kinase, catalytic subunit alpha) (eg, breast cancer) gene analysis (ie, p.C420R, p.E542K, p.E545A, p.E545D [g.1635G>T only], p.E545G, p.E545K, p.Q546E, p.Q546R, p.H1047L, p.H1047R, p.H1047Y), utilizing formalin-fixed paraffin-embedded breast tumor tissue, reported as PIK3CA gene mutation status	0154U	(fibroblast growth factor receptor 3) gene analysis (ie, p.R248C [c.742C>T], p.S249C [c.746C>G], p.G370C [c.1108G>T], p.Y373C [c.1118A>G], FGFR3-TACC3v1, and FGFR3-TACC3v3), utilizing formalin-fixed paraffin-embedded urothelial cancer	1
	0155U	kinase, catalytic subunit alpha) (eg, breast cancer) gene analysis (ie, p.C420R, p.E542K, p.E545A, p.E545D [g.1635G>T only], p.E545G, p.E545K, p.Q546E, p.Q546R, p.H1047L, p.H1047R, p.H1047Y), utilizing formalin-fixed paraffin-embedded breast	1
	0156U	Copy number (eg, intellectual disability, dysmorphology), sequence analysis	1

0157U	APC (APC regulator of WNT signaling pathway) (eg, familial adenomatosis polyposis [FAP]) mRNA sequence analysis (List separately in addition to code for primary procedure)	1
0158U	MLH1 (mutL homolog 1) (eg, hereditary non-polyposis colorectal cancer, Lynch syndrome) mRNA sequence analysis (List separately in addition to code for primary procedure)	1
0159U	MSH2 (mutS homolog 2) (eg, hereditary colon cancer, Lynch syndrome) mRNA sequence analysis (List separately in addition to code for primary procedure)	1
0160U	MSH6 (mutS homolog 6) (eg, hereditary colon cancer, Lynch syndrome) mRNA sequence analysis (List separately in addition to code for primary procedure)	1
0161U	PMS2 (PMS1 homolog 2, mismatch repair system component) (eg, hereditary non- polyposis colorectal cancer, Lynch syndrome) mRNA sequence analysis (List separately in addition to code for primary procedure)	1
0162U	Hereditary colon cancer (Lynch syndrome), targeted mRNA sequence analysis panel (MLH1, MSH2, MSH6, PMS2) (List separately in addition to code for primary procedure)	1
0163T	Total disc arthroplasty (artificial disc), anterior approach, including discectomy to prepare interspace (other than for decompression), each additional interspace, lumbar (List separately in addition to code for primary procedure)	1
0164T	Removal of total disc arthroplasty, (artificial disc), anterior approach, each additional interspace, lumbar (List separately in addition to code for primary procedure)	4
0164U	Gastroenterology (irritable bowel syndrome [IBS]), immunoassay for anti- CdtB and anti-vinculin antibodies, utilizing plasma, algorithm for elevated or not elevated qualitative results	1
0165T	Revision including replacement of total disc arthroplasty (artificial disc), anterior approach, each additional interspace, lumbar (List separately in addition to code for primary procedure)	4
0165U	Peanut allergen-specific quantitative assessment of multiple epitopes using enzyme-linked immunosorbent assay (ELISA), blood, individual epitope results and probability of peanut allergy	1
0166U	Liver disease, 10 biochemical assays (?2- macroglobulin, haptoglobin, apolipoprotein A1, bilirubin, GGT, ALT, AST, triglycerides, cholesterol, fasting glucose) and biometric and demographic data, utilizing serum, algorithm reported as scores for fibrosis, necroinflammatory activity, and steatosis with a summary interpretation	1
0167U	Gonadotropin, chorionic (hCG), immunoassay with direct optical observation, blood	1
0168U	Fetal aneuploidy (trisomy 21, 18, and 13) DNA sequence analysis of selected regions using maternal plasma without fetal fraction cutoff, algorithm reported as a risk score for each trisomy	1
0169U	NUDT15 (nudix hydrolase 15) and TPMT (thiopurine S-methyltransferase) (eg, drug metabolism) gene analysis, common variants	1

0170U	Neurology (autism spectrum disorder [ASD]), RNA, next-generation sequencing, saliva, algorithmic analysis, and results reported as predictive probability of ASD diagnosis	1
0171U	Targeted genomic sequence analysis panel, acute myeloid leukemia, myelodysplastic syndrome, and myeloproliferative neoplasms, DNA analysis, 23 genes, interrogation for sequence variants, rearrangements and minimal residual disease, reported as presence/absence	1
0172U	Oncology (solid tumor as indicated by the label), somatic mutation analysis of BRCA1 (BRCA1, DNA repair associated), BRCA2 (BRCA2, DNA repair associated) and analysis of homologous recombination deficiency pathways, DNA, formalin-fixed paraffin-embedded tissue, algorithm quantifying tumor genomic instability score	1
0173U	Psychiatry (ie, depression, anxiety), genomic analysis panel, includes variant analysis of 14 genes	1
0174T	Computer-aided detection (CAD) (computer algorithm analysis of digital image data for lesion detection) with further physician review for interpretation and report, with or without digitization of film radiographic images, chest radiograph(s), performed concurrent with primary interpretation (List separately in addition to code for primary procedure)	1
0174U	Oncology (solid tumor), mass spectrometric 30 protein targets, formalinfixed paraffin-embedded tissue, prognostic and predictive algorithm reported as likely, unlikely, or uncertain benefit of 39 chemotherapy and targeted therapeutic oncology agents	1
0175T	Computer-aided detection (CAD) (computer algorithm analysis of digital image data for lesion detection) with further physician review for interpretation and report, with or without digitization of film radiographic images, chest radiograph(s), performed remote from primary interpretation	1
0175U	Psychiatry (eg, depression, anxiety), genomic analysis panel, variant analysis of 15 genes	1
0176U	Cytolethal distending toxin B (CdtB) and vinculin IgG antibodies by immunoassay (ie, ELISA)	1
0177U	Oncology (breast cancer), DNA, PIK3CA (phosphatidylinositol-4,5-bisphosphate 3-kinase catalytic subunit alpha) gene analysis of 11 gene variants utilizing plasma, reported as PIK3CA gene mutation status	1
0178U	Peanut allergen-specific quantitative assessment of multiple epitopes using enzyme-linked immunosorbent assay (ELISA), blood, report of minimum eliciting exposure for a clinical reaction	1
0179U	Oncology (non-small cell lung cancer), cell-free DNA, targeted sequence analysis of 23 genes (single nucleotide variations, insertions and deletions, fusions without prior knowledge of partner/breakpoint, copy number variations), with report of significant mutation(s)	1
0184T	Excision of rectal tumor, transanal endoscopic microsurgical approach (ie, TEMS), including muscularis propria (ie, full thickness)	1
0198T	Measurement of ocular blood flow by repetitive intraocular pressure sampling, with interpretation and report	2

0200T	Percutaneous sacral augmentation (sacroplasty), unilateral injection(s), including the use of a balloon or mechanical device, when used, 1 or more needles, includes imaging guidance and bone biopsy, when performed	1
0201T	Percutaneous sacral augmentation (sacroplasty), bilateral injections, including the use of a balloon or mechanical device, when used, 2 or more needles, includes imaging guidance and bone biopsy, when performed	1
0202T	Posterior vertebral joint(s) arthroplasty (eg, facet joint[s] replacement), including facetectomy, laminectomy, foraminotomy, and vertebral column fixation, injection of bone cement, when performed, including fluoroscopy, single level, lumbar spine	1
0202U	Infectious disease (bacterial or viral respiratory tract infection), pathogen-specific nucleic acid (DNA or RNA), 22 targets including severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2), qualitative RT-PCR, nasopharyngeal swab, each pathogen reported as detected or not detected	1
0203U	Autoimmune (inflammatory bowel disease), mRNA, gene expression profiling by quantitative RT-PCR, 17 genes (15 target and 2 reference genes), whole blood, reported as a continuous risk score and classification of inflammatory bowel disease aggressiveness	1
0204U	Oncology (thyroid), mRNA, gene expression analysis of 593 genes (including BRAF, RAS, RET, PAX8, and NTRK) for sequence variants and rearrangements, utilizing fine needle aspirate, reported as detected or not detected	1
0205U	Ophthalmology (age-related macular degeneration), analysis of 3 gene variants (2 CFH gene, 1 ARMS2 gene), using PCR and MALDI-TOF, buccal swab, reported as positive or negative for neovascular age-related macular-degeneration risk associated with zinc supplements	1
0206U	Neurology (Alzheimer disease); cell aggregation using morphometric imaging and protein kinase C-epsilon (PKCe) concentration in response to amylospheroid treatment by ELISA, cultured skin fibroblasts, each reported as positive or negative for Alzheimer disease	1
0207T	Evacuation of meibomian glands, automated, using heat and intermittent pressure, unilateral	2
0207U	quantitative imaging of phosphorylated ERK1 and ERK2 in response to bradykinin treatment by in situ immunofluorescence, using cultured skin fibroblasts, reported as a probability index for Alzheimer disease (List separately in addition to code for primary procedure)	1
0208T	Pure tone audiometry (threshold), automated; air only	1
0208U	Oncology (medullary thyroid carcinoma), mRNA, gene expression analysis of 108 genes, utilizing fine needle aspirate, algorithm reported as positive or negative for medullary thyroid carcinoma	1
0209T	Pure tone audiometry (threshold), automated; air and bone	1
0209U	Cytogenomic constitutional (genome-wide) analysis, interrogation of genomic regions for copy number, structural changes and areas of homozygosity for chromosomal abnormalities	1
0210T	Speech audiometry threshold, automated	1
0210U	Syphilis test, non-treponemal antibody, immunoassay, quantitative (RPR)	2

0211T	Speech audiometry threshold, automated; with speech recognition	1
0211U	Oncology (pan-tumor), DNA and RNA by next-generation sequencing, utilizing formalin-fixed paraffin-embedded tissue, interpretative report for single nucleotide variants, copy number alterations, tumor mutational burden, and microsatellite instability, with therapy association	2
0212T	Comprehensive audiometry threshold evaluation and speech recognition (0209T, 0211T combined), automated	1
0212U	Rare diseases (constitutional/heritable disorders), whole genome and mitochondrial DNA sequence analysis, including small sequence changes, deletions, duplications, short tandem repeat gene expansions, and variants in non-uniquely mappable regions, blood or saliva, identification and categorization of genetic variants, proband	1
0213T	Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joint) with ultrasound guidance, cervical or thoracic; single level	1
0213U	Rare diseases (constitutional/heritable disorders), whole genome and mitochondrial DNA sequence analysis, including small sequence changes, deletions, duplications, short tandem repeat gene expansions, and variants in non-uniquely mappable regions, blood or saliva, identification and categorization of genetic variants, each comparator genome (eg, parent, sibling)	1
0214T	Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joint) with ultrasound guidance, cervical or thoracic; second level (List separately in addition to code for primary procedure)	1
0214U	Rare diseases (constitutional/heritable disorders), whole exome and mitochondrial DNA sequence analysis, including small sequence changes, deletions, duplications, short tandem repeat gene expansions, and variants in non-uniquely mappable regions, blood or saliva, identification and categorization of genetic variants, proband	1
0215T	Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joint) with ultrasound guidance, cervical or thoracic; third and any additional level(s) (List separately in addition to code for primary procedure)	1
0215U	Rare diseases (constitutional/heritable disorders), whole exome and mitochondrial DNA sequence analysis, including small sequence changes, deletions, duplications, short tandem repeat gene expansions, and variants in non-uniquely mappable regions, blood or saliva, identification and categorization of genetic variants, each comparator exome (eg, parent, sibling)	1
0216T	Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joint) with ultrasound guidance, lumbar or sacral; single level	1
0216U	Neurology (inherited ataxias), genomic DNA sequence analysis of 12 common genes including small sequence changes, deletions, duplications, short tandem repeat gene expansions, and variants in non-uniquely mappable regions, blood or saliva, identification and categorization of genetic variants	1

		1
0217T	Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joint) with ultrasound guidance, lumbar or sacral; second level (List separately in addition to code for primary procedure)	1
0217U	Neurology (inherited ataxias), genomic DNA sequence analysis of 51 genes including small sequence changes, deletions, duplications, short tandem repeat gene expansions, and variants in non-uniquely mappable regions, blood or saliva, identification and categorization of genetic variants	1
0218T	Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joint) with ultrasound guidance, lumbar or sacral; third and any additional level(s) (List separately in addition to code for primary procedure)	1
0218U	Neurology (muscular dystrophy), DMD gene sequence analysis, including small sequence changes, deletions, duplications, and variants in non-uniquely mappable regions, blood or saliva, identification and characterization of genetic variants	1
0219T	Placement of a posterior intrafacet implant(s), unilateral or bilateral, including imaging and placement of bone graft(s) or synthetic device(s), single level; cervical	1
0219U	Infectious agent (human immunodeficiency virus), targeted viral next-generation sequence analysis (ie, protease [PR], reverse transcriptase [RT], integrase [INT]), algorithm reported as prediction of antiviral drug susceptibility	1
0220T	Placement of a posterior intrafacet implant(s), unilateral or bilateral, including imaging and placement of bone graft(s) or synthetic device(s), single level; thoracic	1
0220U	Oncology (breast cancer), image analysis with artificial intelligence assessment of 12 histologic and immunohistochemical features, reported as a recurrence score	1
0221T	Placement of a posterior intrafacet implant(s), unilateral or bilateral, including imaging and placement of bone graft(s) or synthetic device(s), single level; lumbar	1
0222T	Placement of a posterior intrafacet implant(s), unilateral or bilateral, including imaging and placement of bone graft(s) or synthetic device(s), single level; each additional vertebral segment (List separately in addition to code for primary procedure)	1
0223U	Infectious disease (bacterial or viral respiratory tract infection), pathogen-specific nucleic acid (DNA or RNA), 22 targets including severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2), qualitative RT-PCR, nasopharyngeal swab, each pathogen reported as detected or not detected	1
0224U	Antibody, severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (Coronavirus disease [COVID-19]), includes titer(s), when performed	3
0225U	Infectious disease (bacterial or viral respiratory tract infection) pathogen-specific DNA and RNA, 21 targets, including severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2), amplified probe technique, including multiplex reverse transcription for RNA targets, each analyte reported as detected or not detected	1
0226U	Surrogate viral neutralization test (sVNT), severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (Coronavirus disease [COVID-19]), ELISA, plasma, serum	1
0227U	Drug assay, presumptive, 30 or more drugs or metabolites, urine, liquid chromatography with tandem mass spectrometry (LC-MS/MS) using multiple reaction monitoring (MRM), with drug or metabolite description, includes sample validation	1

0228U	Oncology (prostate), multianalyte molecular profile by photometric detection of macromolecules adsorbed on nanosponge array slides with machine learning, utilizing first morning voided urine, algorithm reported as likelihood of prostate cancer	1
0229U	BCAT1 (Branched chain amino acid transaminase 1) or IKZF1 (IKAROS family zinc finger 1) (eg, colorectal cancer) promoter methylation analysis	1
0230U	AR (androgen receptor) (eg, spinal and bulbar muscular atrophy, Kennedy disease, X chromosome inactivation), full sequence analysis, including small sequence changes in exonic and intronic regions, deletions, duplications, short tandem repeat (STR) expansions, mobile element insertions, and variants in non-uniquely mappable regions	1
0231U	CACNA1A (calcium voltage-gated channel subunit alpha 1A) (eg, spinocerebellar ataxia), full gene analysis, including small sequence changes in exonic and intronic regions, deletions, duplications, short tandem repeat (STR) gene expansions, mobile element insertions, and variants in non-uniquely mappable regions	1
0232T	Injection(s), platelet rich plasma, any site, including image guidance, harvesting and preparation when performed	1
0232U	CSTB (cystatin B) (eg, progressive myoclonic epilepsy type 1A, Unverricht-Lundborg disease), full gene analysis, including small sequence changes in exonic and intronic regions, deletions, duplications, short tandem repeat (STR) expansions, mobile element insertions, and variants in non-uniquely mappable regions	1
0233U	FXN (frataxin) (eg, Friedreich ataxia), gene analysis, including small sequence changes in exonic and intronic regions, deletions, duplications, short tandem repeat (STR) expansions, mobile element insertions, and variants in non-uniquely mappable regions	1
0234T	Transluminal peripheral atherectomy, open or percutaneous, including radiological supervision and interpretation; renal artery	2
0234U	MECP2 (methyl CpG binding protein 2) (eg, Rett syndrome), full gene analysis, including small sequence changes in exonic and intronic regions, deletions, duplications, mobile element insertions, and variants in non-uniquely mappable regions	1
0235T	Transluminal peripheral atherectomy, open or percutaneous, including radiological supervision and interpretation; visceral artery (except renal), each vessel	2
0235U	PTEN (phosphatase and tensin homolog) (eg, Cowden syndrome, PTEN hamartoma tumor syndrome), full gene analysis, including small sequence changes in exonic and intronic regions, deletions, duplications, mobile element insertions, and variants in non-uniquely mappable regions	1
0236T	Transluminal peripheral atherectomy, open or percutaneous, including radiological supervision and interpretation; abdominal aorta	1
0236U	SMN1 (survival of motor neuron 1, telomeric) and SMN2 (survival of motor neuron 2, centromeric) (eg, spinal muscular atrophy) full gene analysis, including small sequence changes in exonic and intronic regions, duplications, deletions, and mobile element insertions	1
0237T	Transluminal peripheral atherectomy, open or percutaneous, including radiological supervision and interpretation; brachiocephalic trunk and branches, each vessel	2

0237U	Cardiac ion channelopathies (eg, Brugada syndrome, long QT syndrome, short QT syndrome, catecholaminergic polymorphic ventricular tachycardia), genomic sequence analysis panel including ANK2, CASQ2, CAV3, KCNE1, KCNE2, KCNH2, KCNJ2, KCNQ1, RYR2, and SCN5A, including small sequence changes in exonic and intronic regions, deletions, duplications, mobile element insertions, and variants in non-uniquely mappable regions	1
0238T	Transluminal peripheral atherectomy, open or percutaneous, including radiological supervision and interpretation; iliac artery, each vessel	2
0238U	Oncology (Lynch syndrome), genomic DNA sequence analysis of MLH1, MSH2, MSH6, PMS2, and EPCAM, including small sequence changes in exonic and intronic regions, deletions, duplications, mobile element insertions, and variants in non-uniquely mappable regions	1
0239U	Targeted genomic sequence analysis panel, solid organ neoplasm, cell-free DNA, analysis of 311 or more genes, interrogation for sequence variants, including substitutions, insertions, deletions, select rearrangements, and copy number variations	1
0240U	Infectious disease (viral respiratory tract infection), pathogen-specific RNA, 3 targets (severe acute respiratory syndrome coronavirus 2 [SARS-CoV-2], influenza A, influenza B), upper respiratory specimen, each pathogen reported as detected or not detected	1
0241U	Infectious disease (viral respiratory tract infection), pathogen-specific RNA, 4 targets (severe acute respiratory syndrome coronavirus 2 [SARS-CoV-2], influenza A, influenza B, respiratory syncytial virus [RSV]), upper respiratory specimen, each pathogen reported as detected or not detected	1
0242U	Targeted genomic sequence analysis panel, solid organ neoplasm, cell-free circulating DNA analysis of 55-74 genes, interrogation for sequence variants, gene copy number amplifications, and gene rearrangements	1
0243U	Obstetrics (preeclampsia), biochemical assay of placental-growth factor, time- resolved fluorescence immunoassay, maternal serum, predictive algorithm reported as a risk score for preeclampsia	1
0244U	Oncology (solid organ), DNA, comprehensive genomic profiling, 257 genes, interrogation for single-nucleotide variants, insertions/deletions, copy number alterations, gene rearrangements, tumor-mutational burden and microsatellite instability, utilizing formalin-fixed paraffin-embedded tumor tissue	1
0245U	Oncology (thyroid), mutation analysis of 10 genes and 37 RNA fusions and expression of 4 mRNA markers using next-generation sequencing, fine needle aspirate, report includes associated risk of malignancy expressed as a percentage	2
0247U	Obstetrics (preterm birth), insulin-like growth factor-binding protein 4 (IBP4), sex hormone-binding globulin (SHBG), quantitative measurement by LC-MS/MS, utilizing maternal serum, combined with clinical data, reported as predictive-risk stratification for spontaneous preterm birth	1
0248U	Oncology (brain), spheroid cell culture in a 3D microenvironment, 12 drug panel, tumor-response prediction for each drug	1
0249U	Oncology (breast), semiquantitative analysis of 32 phosphoproteins and protein analytes, includes laser capture microdissection, with algorithmic analysis and interpretative report	1

0250U	Oncology (solid organ neoplasm), targeted genomic sequence DNA analysis of 505 genes, interrogation for somatic alterations (SNVs [single nucleotide variant], small insertions and deletions, one amplification, and four translocations), microsatellite instability and tumor-mutation burden	1
0251U	Hepcidin-25, enzyme-linked immunosorbent assay (ELISA), serum or plasma	1
0252U	Fetal aneuploidy short tandem-repeat comparative analysis, fetal DNA from products of conception, reported as normal (euploidy), monosomy, trisomy, or partial deletion/duplication, mosaicism, and segmental aneuploidy	1
0253T	Insertion of anterior segment aqueous drainage device, without extraocular reservoir, internal approach, into the suprachoroidal space	1
0253U	Reproductive medicine (endometrial receptivity analysis), RNA gene expression profile, 238 genes by next-generation sequencing, endometrial tissue, predictive algorithm reported as endometrial window of implantation (eg, pre-receptive, receptive, post-receptive)	1
0256U	Trimethylamine/trimethylamine N-oxide (TMA/TMAO) profile, tandem mass spectrometry (MS/MS), urine, with algorithmic analysis and interpretive report	1
0257U	Very long chain acyl-coenzyme A (CoA) dehydrogenase (VLCAD), leukocyte enzyme activity, whole blood	1
0258U	Autoimmune (psoriasis), mRNA, next-generation sequencing, gene expression profiling of 50-100 genes, skin-surface collection using adhesive patch, algorithm reported as likelihood of response to psoriasis biologics	1
0259U	Nephrology (chronic kidney disease), nuclear magnetic resonance spectroscopy measurement of myo-inositol, valine, and creatinine, algorithmically combined with cystatin C (by immunoassay) and demographic data to determine estimated glomerular filtration rate (GFR), serum, quantitative	1
0260U	Rare diseases (constitutional/heritable disorders), identification of copy number variations, inversions, insertions, translocations, and other structural variants by optical genome mapping	1
0261U	Oncology (colorectal cancer), image analysis with artificial intelligence assessment of 4 histologic and immunohistochemical features (CD3 and CD8 within tumorstroma border and tumor core), tissue, reported as immune response and recurrence-risk score	1
0262U	Oncology (solid tumor), gene expression profiling by real-time RT-PCR of 7 gene pathways (ER, AR, PI3K, MAPK, HH, TGFB, Notch), formalin-fixed paraffin-embedded (FFPE), algorithm reported as gene pathway activity score	1
0263T	Intramuscular autologous bone marrow cell therapy, with preparation of harvested cells, multiple injections, one leg, including ultrasound guidance, if performed; complete procedure including unilateral or bilateral bone marrow harvest	1
0263U	Neurology (autism spectrum disorder [ASD]), quantitative measurements of 16 central carbon metabolites (ie, ?-ketoglutarate, alanine, lactate, phenylalanine, pyruvate, succinate, carnitine, citrate, fumarate, hypoxanthine, inosine, malate, S-sulfocysteine, taurine, urate, and xanthine), liquid chromatography tandem mass spectrometry (LC-MS/MS), plasma, algorithmic analysis with result reported as negative or positive (with metabolic subtypes of ASD)	1

0264T	Intramuscular autologous bone marrow cell therapy, with preparation of harvested cells, multiple injections, one leg, including ultrasound guidance, if performed; complete procedure excluding bone marrow harvest	1
0264U	Rare diseases (constitutional/heritable disorders), identification of copy number variations, inversions, insertions, translocations, and other structural variants by optical genome mapping	1
0265T	Intramuscular autologous bone marrow cell therapy, with preparation of harvested cells, multiple injections, one leg, including ultrasound guidance, if performed; unilateral or bilateral bone marrow harvest only for intramuscular autologous bone marrow cell therapy	1
0265U	Rare constitutional and other heritable disorders, whole genome and mitochondrial DNA sequence analysis, blood, frozen and formalin-fixed paraffin-embedded (FFPE) tissue, saliva, buccal swabs or cell lines, identification of single nucleotide and copy number variants	1
0266T	Implantation or replacement of carotid sinus baroreflex activation device; total system (includes generator placement, unilateral or bilateral lead placement, intra-operative interrogation, programming, and repositioning, when performed)	1
0266U	Unexplained constitutional or other heritable disorders or syndromes, tissue- specific gene expression by whole-transcriptome and next-generation sequencing, blood, formalin-fixed paraffin-embedded (FFPE) tissue or fresh frozen tissue, reported as presence or absence of splicing or expression changes	1
0267T	Implantation or replacement of carotid sinus baroreflex activation device; lead only, unilateral (includes intra-operative interrogation, programming, and repositioning, when performed)	1
0267U	Rare constitutional and other heritable disorders, identification of copy number variations, inversions, insertions, translocations, and other structural variants by optical genome mapping and whole genome sequencing	1
0268T	Implantation or replacement of carotid sinus baroreflex activation device; pulse generator only (includes intra-operative interrogation, programming, and repositioning, when performed)	1
0268U	Hematology (atypical hemolytic uremic syndrome [aHUS]), genomic sequence analysis of 15 genes, blood, buccal swab, or amniotic fluid	1
0269T	Revision or removal of carotid sinus baroreflex activation device; total system (includes generator placement, unilateral or bilateral lead placement, intraoperative interrogation, programming, and repositioning, when performed)	1
0269U	Hematology (autosomal dominant congenital thrombocytopenia), genomic sequence analysis of 14 genes, blood, buccal swab, or amniotic fluid	1
0270Т	Revision or removal of carotid sinus baroreflex activation device; lead only, unilateral (includes intra-operative interrogation, programming, and repositioning, when performed)	1
0270U	Hematology (congenital coagulation disorders), genomic sequence analysis of 20 genes, blood, buccal swab, or amniotic fluid	1
0271T	Revision or removal of carotid sinus baroreflex activation device; pulse generator only (includes intra-operative interrogation, programming, and repositioning, when performed)	1

0271U	Hematology (congenital neutropenia), genomic sequence analysis of 23 genes, blood, buccal swab, or amniotic fluid	1
0272Т	Interrogation device evaluation (in person), carotid sinus baroreflex activation system, including telemetric iterative communication with the implantable device to monitor device diagnostics and programmed therapy values, with interpretation and report (eg, battery status, lead impedance, pulse amplitude, pulse width, therapy frequency, pathway mode, burst mode, therapy start/stop times each day)	1
0272U	Hematology (genetic bleeding disorders), genomic sequence analysis of 51 genes, blood, buccal swab, or amniotic fluid, comprehensive	1
0273Т	Interrogation device evaluation (in person), carotid sinus baroreflex activation system, including telemetric iterative communication with the implantable device to monitor device diagnostics and programmed therapy values, with interpretation and report (eg, battery status, lead impedance, pulse amplitude, pulse width, therapy frequency, pathway mode, burst mode, therapy start/stop times each day); with programming	1
0273U	Hematology (genetic hyperfibrinolysis, delayed bleeding), genomic sequence analysis of 8 genes (F13A1, F13B, FGA, FGB, FGG, SERPINA1, SERPINE1, SERPINF2, PLAU), blood, buccal swab, or amniotic fluid	1
0274T	Percutaneous laminotomy/laminectomy (interlaminar approach) for decompression of neural elements, (with or without ligamentous resection, discectomy, facetectomy and/or foraminotomy), any method, under indirect image guidance (eg, fluoroscopic, CT), single or multiple levels, unilateral or bilateral; cervical or thoracic	1
0274U	Hematology (genetic platelet disorders), genomic sequence analysis of 43 genes, blood, buccal swab, or amniotic fluid	1
0275T	Percutaneous laminotomy/laminectomy (interlaminar approach) for decompression of neural elements, (with or without ligamentous resection, discectomy, facetectomy and/or foraminotomy), any method, under indirect image guidance (eg, fluoroscopic, CT), single or multiple levels, unilateral or bilateral; lumbar	1
0275U	Hematology (heparin-induced thrombocytopenia), platelet antibody reactivity by flow cytometry, serum	1
0276U	Hematology (inherited thrombocytopenia), genomic sequence analysis of 23 genes, blood, buccal swab, or amniotic fluid	1
0277U	Hematology (genetic platelet function disorder), genomic sequence analysis of 31 genes, blood, buccal swab, or amniotic fluid	1
0278T	Transcutaneous electrical modulation pain reprocessing (eg, scrambler therapy), each treatment session (includes placement of electrodes)	1
0278U	Hematology (genetic thrombosis), genomic sequence analysis of 12 genes, blood, buccal swab, or amniotic fluid	1
0279U	Hematology (von Willebrand disease [VWD]), von Willebrand factor (VWF) and collagen III binding by enzyme-linked immunosorbent assays (ELISA), plasma, report of collagen III binding	1
0308T	Insertion of ocular telescope prosthesis including removal of crystalline lens or intraocular lens prosthesis	1

0312T	Vagus nerve blocking therapy (morbid obesity); laparoscopic implantation of neurostimulator electrode array, anterior and posterior vagal trunks adjacent to esophagogastric junction (EGJ), with implantation of pulse generator, includes programming	1
0313T	Vagus nerve blocking therapy (morbid obesity); laparoscopic revision or replacement of vagal trunk neurostimulator electrode array, including connection to existing pulse generator	1
0314T	Vagus nerve blocking therapy (morbid obesity); laparoscopic removal of vagal trunk neurostimulator electrode array and pulse generator	1
0315T	Vagus nerve blocking therapy (morbid obesity); removal of pulse generator	1
0316T	Vagus nerve blocking therapy (morbid obesity); replacement of pulse generator	1
0317T	Vagus nerve blocking therapy (morbid obesity); neurostimulator pulse generator electronic analysis, includes reprogramming when performed	1
0329T	Monitoring of intraocular pressure for 24 hours or longer, unilateral or bilateral, with interpretation and report	1
0330T	Tear film imaging, unilateral or bilateral, with interpretation and report	1
0331T	Myocardial sympathetic innervation imaging, planar qualitative and quantitative assessment;	1
0332T	Myocardial sympathetic innervation imaging, planar qualitative and quantitative assessment; with tomographic SPECT	1
0333T	Visual evoked potential, screening of visual acuity, automated, with report	1
0335T	Insertion of sinus tarsi implant	2
0338T	Transcatheter renal sympathetic denervation, percutaneous approach including arterial puncture, selective catheter placement(s) renal artery(ies), fluoroscopy, contrast injection(s), intraprocedural roadmapping and radiological supervision and interpretation, including pressure gradient measurements, flush aortogram and diagnostic renal angiography when performed; unilateral	1
0339T	Transcatheter renal sympathetic denervation, percutaneous approach including arterial puncture, selective catheter placement(s) renal artery(ies), fluoroscopy, contrast injection(s), intraprocedural roadmapping and radiological supervision and interpretation, including pressure gradient measurements, flush aortogram and diagnostic renal angiography when performed; bilateral	1
0342T	Therapeutic apheresis with selective HDL delipidation and plasma reinfusion	1
0345T	Transcatheter mitral valve repair percutaneous approach via the coronary sinus	1
0347T	Placement of interstitial device(s) in bone for radiostereometric analysis (RSA)	1
0348T	Radiologic examination, radiostereometric analysis (RSA); spine, (includes cervical, thoracic and lumbosacral, when performed)	1
0349T	Radiologic examination, radiostereometric analysis (RSA); upper extremity(ies), (includes shoulder, elbow, and wrist, when performed)	1
0350T	Radiologic examination, radiostereometric analysis (RSA); lower extremity(ies), (includes hip, proximal femur, knee, and ankle, when performed)	1

0351T	Optical coherence tomography of breast or axillary lymph node, excised tissue, each specimen; real-time intraoperative	5
0352T	Optical coherence tomography of breast or axillary lymph node, excised tissue, each specimen; interpretation and report, real-time or referred	5
0353T	Optical coherence tomography of breast, surgical cavity; real-time intraoperative	2
0354T	Optical coherence tomography of breast, surgical cavity; interpretation and report, real-time or referred	2
0358T	Bioelectrical impedance analysis whole body composition assessment, with interpretation and report	1
0362T	Behavior identification supporting assessment, each 15 minutes of technicians' time face-to-face with a patient, requiring the following components: administration by the physician or other qualified health care professional who is on site; with the assistance of two or more technicians; for a patient who exhibits destructive behavior; completion in an environment that is customized to the patient's behavior.	16
0373Т	Adaptive behavior treatment with protocol modification, each 15 minutes of technicians' time face-to-face with a patient, requiring the following components: administration by the physician or other qualified health care professional who is on site; with the assistance of two or more technicians; for a patient who exhibits destructive behavior; completion in an environment that is customized to the patient's behavior.	32
0378Т	Visual field assessment, with concurrent real time data analysis and accessible data storage with patient initiated data transmitted to a remote surveillance center for up to 30 days; review and interpretation with report by a physician or other qualified health care professional	1
0379Т	Visual field assessment, with concurrent real time data analysis and accessible data storage with patient initiated data transmitted to a remote surveillance center for up to 30 days; technical support and patient instructions, surveillance, analysis, and transmission of daily and emergent data reports as prescribed by a physician or other qualified health care professional	1
0394T	High dose rate electronic brachytherapy, skin surface application, per fraction, includes basic dosimetry, when performed	2
0395T	High dose rate electronic brachytherapy, interstitial or intracavitary treatment, per fraction, includes basic dosimetry, when performed	2
0397Т	Endoscopic retrograde cholangiopancreatography (ERCP), with optical endomicroscopy (List separately in addition to code for primary procedure)	1
0398T	Magnetic resonance image guided high intensity focused ultrasound (MRgFUS), stereotactic ablation lesion, intracranial for movement disorder including stereotactic navigation and frame placement when performed	1
0402T	Collagen cross-linking of cornea, including removal of the corneal epithelium and intraoperative pachymetry, when performed (Report medication separately)	2
0403T	Preventive behavior change, intensive program of prevention of diabetes using a standardized diabetes prevention program curriculum, provided to individuals in a group setting, minimum 60 minutes, per day	1

0404T	Transcervical uterine fibroid(s) ablation with ultrasound guidance, radiofrequency	1
0408T	Insertion or replacement of permanent cardiac contractility modulation system, including contractility evaluation when performed, and programming of sensing and therapeutic parameters; pulse generator with transvenous electrodes	1
0409Т	Insertion or replacement of permanent cardiac contractility modulation system, including contractility evaluation when performed, and programming of sensing and therapeutic parameters; pulse generator only	1
0410T	Insertion or replacement of permanent cardiac contractility modulation system, including contractility evaluation when performed, and programming of sensing and therapeutic parameters; atrial electrode only	1
0411T	Insertion or replacement of permanent cardiac contractility modulation system, including contractility evaluation when performed, and programming of sensing and therapeutic parameters; ventricular electrode only	1
0412T	Removal of permanent cardiac contractility modulation system; pulse generator only	1
0413T	Removal of permanent cardiac contractility modulation system; transvenous electrode (atrial or ventricular)	1
0414T	Removal and replacement of permanent cardiac contractility modulation system pulse generator only	1
0415T	Repositioning of previously implanted cardiac contractility modulation transvenous electrode (atrial or ventricular lead)	1
0416T	Relocation of skin pocket for implanted cardiac contractility modulation pulse generator	1
0417T	Programming device evaluation (in person) with iterative adjustment of the implantable device to test the function of the device and select optimal permanent programmed values with analysis, including review and report, implantable cardiac contractility modulation system	1
0418T	Interrogation device evaluation (in person) with analysis, review and report, includes connection, recording and disconnection per patient encounter, implantable cardiac contractility modulation system	1
0419T	Destruction of neurofibroma, extensive (cutaneous, dermal extending into subcutaneous); face, head and neck, greater than 50 neurofibromas	1
0420T	Destruction of neurofibroma, extensive (cutaneous, dermal extending into subcutaneous); trunk and extremities, extensive, greater than 100 neurofibromas	1
0421T	Transurethral waterjet ablation of prostate, including control of post-operative bleeding, including ultrasound guidance, complete (vasectomy, meatotomy, cystourethroscopy, urethral calibration and/or dilation, and internal urethrotomy are included when performed)	1
0422T	Tactile breast imaging by computer-aided tactile sensors, unilateral or bilateral	1
0424T	Insertion or replacement of neurostimulator system for treatment of central sleep apnea; complete system (transvenous placement of right or left stimulation lead, sensing lead, implantable pulse generator)	1

0425T	Insertion or replacement of neurostimulator system for treatment of central sleep apnea; sensing lead only	1
0426T	Insertion or replacement of neurostimulator system for treatment of central sleep apnea; stimulation lead only	1
0427T	Insertion or replacement of neurostimulator system for treatment of central sleep apnea; pulse generator only	1
0428T	Removal of neurostimulator system for treatment of central sleep apnea; pulse generator only	1
0429T	Removal of neurostimulator system for treatment of central sleep apnea; sensing lead only	1
0430T	Removal of neurostimulator system for treatment of central sleep apnea; stimulation lead only	1
0431T	Removal and replacement of neurostimulator system for treatment of central sleep apnea, pulse generator only	1
0432T	Repositioning of neurostimulator system for treatment of central sleep apnea; stimulation lead only	1
0433T	Repositioning of neurostimulator system for treatment of central sleep apnea; sensing lead only	1
0434T	Interrogation device evaluation implanted neurostimulator pulse generator system for central sleep apnea	1
0435T	Programming device evaluation of implanted neurostimulator pulse generator system for central sleep apnea; single session	1
0436T	Programming device evaluation of implanted neurostimulator pulse generator system for central sleep apnea; during sleep study	1
0437T	Implantation of non-biologic or synthetic implant (eg, polypropylene) for fascial reinforcement of the abdominal wall (List separately in addition to code for primary procedure)	1
0439T	Myocardial contrast perfusion echocardiography, at rest or with stress, for assessment of myocardial ischemia or viability (List separately in addition to code for primary procedure)	1
0440T	Ablation, percutaneous, cryoablation, includes imaging guidance; upper extremity distal/peripheral nerve	3
0441T	Ablation, percutaneous, cryoablation, includes imaging guidance; lower extremity distal/peripheral nerve	3
0442T	Ablation, percutaneous, cryoablation, includes imaging guidance; nerve plexus or other truncal nerve (eg, brachial plexus, pudendal nerve)	3
0443T	Real-time spectral analysis of prostate tissue by fluorescence spectroscopy, including imaging guidance (List separately in addition to code for primary procedure)	1
0444T	Initial placement of a drug-eluting ocular insert under one or more eyelids, including fitting, training, and insertion, unilateral or bilateral	1

0445T	Subsequent placement of a drug-eluting ocular insert under one or more eyelids, including re-training, and removal of existing insert, unilateral or bilateral	1
0446T	Creation of subcutaneous pocket with insertion of implantable interstitial glucose sensor, including system activation and patient training	1
0447T	Removal of implantable interstitial glucose sensor from subcutaneous pocket via incision	1
0448T	Removal of implantable interstitial glucose sensor with creation of subcutaneous pocket at different anatomic site and insertion of new implantable sensor, including system activation	1
0449Т	Insertion of aqueous drainage device, without extraocular reservoir, internal approach, into the subconjunctival space; initial device	1
0450T	Insertion of aqueous drainage device, without extraocular reservoir, internal approach, into the subconjunctival space; each additional device (List separately in addition to code for primary procedure)	1
0464T	Visual evoked potential, testing for glaucoma, with interpretation and report	1
0465T	Suprachoroidal injection of a pharmacologic agent (does not include supply of medication)	1
0469T	Retinal polarization scan, ocular screening with on-site automated results, bilateral	1
0470T	Optical coherence tomography (OCT) for microstructural and morphological imaging of skin, image acquisition, interpretation, and report; first lesion	1
0471T	Optical coherence tomography (OCT) for microstructural and morphological imaging of skin, image acquisition, interpretation, and report; each additional lesion (List separately in addition to code for primary procedure)	2
0472Т	Device evaluation, interrogation, and initial programming of intraocular retinal electrode array (eg, retinal prosthesis), in person, with iterative adjustment of the implantable device to test functionality, select optimal permanent programmed values with analysis, including visual training, with review and report by a qualified health care professional	1
0473T	Device evaluation and interrogation of intraocular retinal electrode array (eg, retinal prosthesis), in person, including reprogramming and visual training, when performed, with review and report by a qualified health care professional	1
0474T	Insertion of anterior segment aqueous drainage device, with creation of intraocular reservoir, internal approach, into the supraciliary space	2
0475T	Recording of fetal magnetic cardiac signal using at least 3 channels; patient recording and storage, data scanning with signal extraction, technical analysis and result, as well as supervision, review, and interpretation of report by a physician or other qualified health care professional	1
0476T	Recording of fetal magnetic cardiac signal using at least 3 channels; patient recording, data scanning, with raw electronic signal transfer of data and storage	1
0477T	Recording of fetal magnetic cardiac signal using at least 3 channels; signal extraction, technical analysis, and result	1
0478T	Recording of fetal magnetic cardiac signal using at least 3 channels; review, interpretation, report by physician or other qualified health care professional	1

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0479T	Fractional ablative laser fenestration of burn and traumatic scars for functional improvement; first 100 cm2 or part thereof, or 1% of body surface area of infants and children	1
0480T	Fractional ablative laser fenestration of burn and traumatic scars for functional improvement; each additional 100 cm2, or each additional 1% of body surface area of infants and children, or part thereof (List separately in addition to code for primary procedure)	4
0481T	Injection(s), autologous white blood cell concentrate (autologous protein solution), any site, including image guidance, harvesting and preparation, when performed	1
0483T	Transcatheter mitral valve implantation/replacement (TMVI) with prosthetic valve; percutaneous approach, including transseptal puncture, when performed	1
0484T	Transcatheter mitral valve implantation/replacement (TMVI) with prosthetic valve; transthoracic exposure (eg, thoracotomy, transapical)	1
0485T	Optical coherence tomography (OCT) of middle ear, with interpretation and report; unilateral	1
0486T	Optical coherence tomography (OCT) of middle ear, with interpretation and report; bilateral	1
0487T	Biomechanical mapping, transvaginal, with report	1
0488T	Preventive behavior change, online/electronic structured intensive program for prevention of diabetes using a standardized diabetes prevention program curriculum, provided to an individual, per 30 days	1
0489T	Autologous adipose-derived regenerative cell therapy for scleroderma in the hands; adipose tissue harvesting, isolation and preparation of harvested cells including incubation with cell dissociation enzymes, removal of non-viable cells and debris, determination of concentration and dilution of regenerative cells	1
0490Т	Autologous adipose-derived regenerative cell therapy for scleroderma in the hands; multiple injections in one or both hands	1
0491T	Ablative laser treatment, non-contact, full field and fractional ablation, open wound, per day, total treatment surface area; first 20 sq cm or less	1
0492T	Ablative laser treatment, non-contact, full field and fractional ablation, open wound, per day, total treatment surface area; each additional 20 sq cm, or part thereof (List separately in addition to code for primary procedure)	4
0493T	Contact near-infrared spectroscopy studies of lower extremity wounds (eg, for oxyhemoglobin measurement)	1
0494T	Surgical preparation and cannulation of marginal (extended) cadaver donor lung(s) to ex vivo organ perfusion system, including decannulation, separation from the perfusion system, and cold preservation of the allograft prior to implantation, when performed	1
0495T	Initiation and monitoring marginal (extended) cadaver donor lung(s) organ perfusion system by physician or qualified health care professional, including physiological and laboratory assessment (eg, pulmonary artery flow, pulmonary artery pressure, left atrial pressure, pulmonary vascular resistance, mean/peak and plateau airway pressure, dynamic compliance and perfusate gas analysis), including bronchoscopy and X ray when performed; first two hours in sterile field	1

0496Т	Initiation and monitoring marginal (extended) cadaver donor lung(s) organ perfusion system by physician or qualified health care professional, including physiological and laboratory assessment (eg, pulmonary artery flow, pulmonary artery pressure, left atrial pressure, pulmonary vascular resistance, mean/peak and plateau airway pressure, dynamic compliance and perfusate gas analysis), including bronchoscopy and X ray when performed; each additional hour (List separately in addition to code for primary procedure)	4
0497T	External patient-activated, physician- or other qualified health care professional- prescribed, electrocardiographic rhythm derived event recorder without 24-hour attended monitoring; in-office connection	1
0498T	External patient-activated, physician- or other qualified health care professional-prescribed, electrocardiographic rhythm derived event recorder without 24-hour attended monitoring; review and interpretation by a physician or other qualified health care professional per 30 days with at least one patient-generated triggered event	1
0499T	Cystourethroscopy, with mechanical dilation and urethral therapeutic drug delivery for urethral stricture or stenosis, including fluoroscopy, when performed	1
0500T	Infectious agent detection by nucleic acid (DNA or RNA), Human Papillomavirus (HPV) for five or more separately reported high-risk HPV types (eg, 16, 18, 31, 33, 35, 39, 45, 51, 52, 56, 58, 59, 68) (ie, genotyping)	1
0501T	Noninvasive estimated coronary fractional flow reserve (FFR) derived from coronary computed tomography angiography data using computation fluid dynamics physiologic simulation software analysis of functional data to assess the severity of coronary artery disease; data preparation and transmission, analysis of fluid dynamics and simulated maximal coronary hyperemia, generation of estimated FFR model, with anatomical data review in comparison with estimated FFR model to reconcile discordant data, interpretation and report	1
0502T	Noninvasive estimated coronary fractional flow reserve (FFR) derived from coronary computed tomography angiography data using computation fluid dynamics physiologic simulation software analysis of functional data to assess the severity of coronary artery disease; data preparation and transmission	1
0503T	Noninvasive estimated coronary fractional flow reserve (FFR) derived from coronary computed tomography angiography data using computation fluid dynamics physiologic simulation software analysis of functional data to assess the severity of coronary artery disease; analysis of fluid dynamics and simulated maximal coronary hyperemia, and generation of estimated FFR model	1
0504T	Noninvasive estimated coronary fractional flow reserve (FFR) derived from coronary computed tomography angiography data using computation fluid dynamics physiologic simulation software analysis of functional data to assess the severity of coronary artery disease; anatomical data review in comparison with estimated FFR model to reconcile discordant data, interpretation and report	1
0505T	Endovenous femoral-popliteal arterial revascularization, with transcatheter placement of intravascular stent graft(s) and closure by any method, including percutaneous or open vascular access, ultrasound guidance for vascular access when performed, all catheterization(s) and intraprocedural roadmapping and imaging guidance necessary to complete the intervention, all associated radiological	1

	supervision and interpretation, when performed, with crossing of the occlusive lesion in an extraluminal fashion	
0506T	Macular pigment optical density measurement by heterochromatic flicker photometry, unilateral or bilateral, with interpretation and report	1
0507T	Near infrared dual imaging (ie, simultaneous reflective and transilluminated light) of meibomian glands, unilateral or bilateral, with interpretation and report	1
0508T	Pulse-echo ultrasound bone density measurement resulting in indicator of axial bone mineral density, tibia	1
0509T	Electroretinography (ERG) with interpretation and report, pattern (PERG)	1
0510T	Removal of sinus tarsi implant	1
0511T	Removal and reinsertion of sinus tarsi implant	1
0512T	Extracorporeal shock wave for integumentary wound healing, including topical application and dressing care; initial wound	1
0513T	Extracorporeal shock wave for integumentary wound healing, including topical application and dressing care; each additional wound (List separately in addition to code for primary procedure)	2
0514T	Intraoperative visual axis identification using patient fixation (List separately in addition to code for primary procedure)	2
0515T	Insertion of wireless cardiac stimulator for left ventricular pacing, including device interrogation and programming, and imaging supervision and interpretation, when performed; complete system (includes electrode and generator [transmitter and battery])	1
0516T	Insertion of wireless cardiac stimulator for left ventricular pacing, including device interrogation and programming, and imaging supervision and interpretation, when performed; electrode only	1
0517T	Insertion of wireless cardiac stimulator for left ventricular pacing, including device interrogation and programming, and imaging supervision and interpretation, when performed; pulse generator component(s) (battery and/or transmitter) only	1
0518T	Removal of only pulse generator component(s) (battery and/or transmitter) of wireless cardiac stimulator for left ventricular pacing	1
0519T	Removal and replacement of wireless cardiac stimulator for left ventricular pacing; pulse generator component(s) (battery and/or transmitter)	1
0520T	Removal and replacement of wireless cardiac stimulator for left ventricular pacing; pulse generator component(s) (battery and/or transmitter), including placement of a new electrode	1
0521T	Interrogation device evaluation (in person) with analysis, review and report, includes connection, recording, and disconnection per patient encounter, wireless cardiac stimulator for left ventricular pacing	1
0522T	Programming device evaluation (in person) with iterative adjustment of the implantable device to test the function of the device and select optimal permanent	1

	programmed values with analysis, including review and report, wireless cardiac	
	stimulator for left ventricular pacing	
0523T	Intraprocedural coronary fractional flow reserve (FFR) with 3D functional mapping of color-coded FFR values for the coronary tree, derived from coronary angiogram data, for real-time review and interpretation of possible atherosclerotic stenosis(es) intervention (List separately in addition to code for primary procedure)	1
0524T	Endovenous catheter directed chemical ablation with balloon isolation of incompetent extremity vein, open or percutaneous, including all vascular access, catheter manipulation, diagnostic imaging, imaging guidance and monitoring	3
0525T	Insertion or replacement of intracardiac ischemia monitoring system, including testing of the lead and monitor, initial system programming, and imaging supervision and interpretation; complete system (electrode and implantable monitor)	1
0526T	Insertion or replacement of intracardiac ischemia monitoring system, including testing of the lead and monitor, initial system programming, and imaging supervision and interpretation; electrode only	1
0527T	Insertion or replacement of intracardiac ischemia monitoring system, including testing of the lead and monitor, initial system programming, and imaging supervision and interpretation; implantable monitor only	1
0528T	Programming device evaluation (in person) of intracardiac ischemia monitoring system with iterative adjustment of programmed values, with analysis, review, and report	1
0529T	Interrogation device evaluation (in person) of intracardiac ischemia monitoring system with analysis, review, and report	1
0530T	Removal of intracardiac ischemia monitoring system, including all imaging supervision and interpretation; complete system (electrode and implantable monitor)	1
0531T	Removal of intracardiac ischemia monitoring system, including all imaging supervision and interpretation; electrode only	1
0532T	Removal of intracardiac ischemia monitoring system, including all imaging supervision and interpretation; implantable monitor only	1
0533T	Continuous recording of movement disorder symptoms, including bradykinesia, dyskinesia, and tremor for 6 days up to 10 days; includes set-up, patient training, configuration of monitor, data upload, analysis and initial report configuration, download review, interpretation and report	1
0534T	Continuous recording of movement disorder symptoms, including bradykinesia, dyskinesia, and tremor for 6 days up to 10 days; set-up, patient training, configuration of monitor	1
0535T	Continuous recording of movement disorder symptoms, including bradykinesia, dyskinesia, and tremor for 6 days up to 10 days; data upload, analysis and initial report configuration	1
0536T	Continuous recording of movement disorder symptoms, including bradykinesia, dyskinesia, and tremor for 6 days up to 10 days; download review, interpretation and report	1

0537T	Chimeric antigen receptor T-cell (CAR-T) therapy; harvesting of blood-derived T lymphocytes for development of genetically modified autologous CAR-T cells, per day	1
0538T	Chimeric antigen receptor T-cell (CAR-T) therapy; preparation of blood-derived T lymphocytes for transportation (eg, cryopreservation, storage)	1
0539T	Chimeric antigen receptor T-cell (CAR-T) therapy; receipt and preparation of CAR-T cells for administration	1
0540T	Chimeric antigen receptor T-cell (CAR-T) therapy; CAR-T cell administration, autologous	1
0541T	Myocardial imaging by magnetocardiography (MCG) for detection of cardiac ischemia, by signal acquisition using minimum 36 channel grid, generation of magnetic-field time-series images, quantitative analysis of magnetic dipoles, machine learning-derived clinical scoring, and automated report generation, single study	1
0542T	Myocardial imaging by magnetocardiography (MCG) for detection of cardiac ischemia, by signal acquisition using minimum 36 channel grid, generation of magnetic-field time-series images, quantitative analysis of magnetic dipoles, machine learning-derived clinical scoring, and automated report generation, single study; interpretation and report	1
0543T	Transapical mitral valve repair, including transthoracic echocardiography, when performed, with placement of artificial chordae tendineae	1
0544T	Transcatheter mitral valve annulus reconstruction, with implantation of adjustable annulus reconstruction device, percutaneous approach including transseptal puncture	1
0545T	Transcatheter tricuspid valve annulus reconstruction with implantation of adjustable annulus reconstruction device, percutaneous approach	1
0546T	Radiofrequency spectroscopy, real time, intraoperative margin assessment, at the time of partial mastectomy, with report	2
0547T	Bone-material quality testing by microindentation(s) of the tibia(s), with results reported as a score	1
0549T	Transperineal periurethral balloon continence device; unilateral placement, including cystoscopy and fluoroscopy	1
0555T	Bone strength and fracture risk using finite element analysis of functional data, and bone-mineral density, utilizing data from a computed tomography scan; retrieval and transmission of the scan data	1
0556T	Bone strength and fracture risk using finite element analysis of functional data, and bone-mineral density, utilizing data from a computed tomography scan; assessment of bone strength and fracture risk and bone mineral density	1
0558T	Computed tomography scan taken for the purpose of biomechanical computed tomography analysis	1
0559T	Anatomic model 3D-printed from image data set(s); first individually prepared and processed component of an anatomic structure	1

0560T	Anatomic model 3D-printed from image data set(s); each additional individually prepared and processed component of an anatomic structure (List separately in addition to code for primary procedure)	1
0561T	Anatomic guide 3D-printed and designed from image data set(s); first anatomic guide	1
0562T	Anatomic guide 3D-printed and designed from image data set(s); each additional anatomic guide (List separately in addition to code for primary procedure)	1
0563T	Evacuation of meibomian glands, using heat delivered through wearable, open-eye eyelid treatment devices and manual gland expression, bilateral	1
0564T	Oncology, chemotherapeutic drug cytotoxicity assay of cancer stem cells (CSCs), from cultured CSCs and primary tumor cells, categorical drug response reported based on percent of cytotoxicity observed, a minimum of 14 drugs or drug combinations	1
0565T	Autologous cellular implant derived from adipose tissue for the treatment of osteoarthritis of the knees; tissue harvesting and cellular implant creation	1
0566T	Autologous cellular implant derived from adipose tissue for the treatment of osteoarthritis of the knees; injection of cellular implant into knee joint including ultrasound guidance, unilateral	1
0567T	Permanent fallopian tube occlusion with degradable biopolymer implant, transcervical approach, including transvaginal ultrasound	1
0568T	Introduction of mixture of saline and air for sonosalpingography to confirm occlusion of fallopian tubes, transcervical approach, including transvaginal ultrasound and pelvic ultrasound	1
0569T	Transcatheter tricuspid valve repair, percutaneous approach; initial prosthesis	1
0570T	Transcatheter tricuspid valve repair, percutaneous approach; each additional prosthesis during same session (List separately in addition to code for primary procedure)	1
0571T	Insertion or replacement of implantable cardioverter-defibrillator system with substernal electrode(s), including all imaging guidance and electrophysiological evaluation (includes defibrillation threshold evaluation, induction of arrhythmia, evaluation of sensing for arrhythmia termination, and programming or reprogramming of sensing or therapeutic parameters), when performed	1
0572T	Insertion of substernal implantable defibrillator electrode	1
0573T	Removal of substernal implantable defibrillator electrode	1
0574T	Repositioning of previously implanted substernal implantable defibrillator-pacing electrode	1
0575T	Programming device evaluation (in person) of implantable cardioverter-defibrillator system with substernal electrode, with iterative adjustment of the implantable device to test the function of the device and select optimal permanent programmed values with analysis, review and report by a physician or other qualified health care professional	1
0576T	Interrogation device evaluation (in person) of implantable cardioverter-defibrillator system with substernal electrode, with analysis, review and report by a physician or	1

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	other qualified health care professional, includes connection, recording and disconnection per patient encounter	
0577T	Electrophysiologic evaluation of implantable cardioverter defibrillator system with substernal electrode (includes defibrillation threshold evaluation, induction of arrhythmia, evaluation of sensing for arrhythmia termination, and programming or reprogramming of sensing or therapeutic parameters)	1
0578T	Interrogation device evaluation(s) (remote), up to 90 days, substernal lead implantable cardioverter-defibrillator system with interim analysis, review(s) and report(s) by a physician or other qualified health care professional	1
0579T	Interrogation device evaluation(s) (remote), up to 90 days, substernal lead implantable cardioverter-defibrillator system, remote data acquisition(s), receipt of transmissions and technician review, technical support and distribution of results	1
0580T	Removal of substernal implantable defibrillator pulse generator only	1
0583T	Tympanostomy (requiring insertion of ventilating tube), using an automated tube delivery system, iontophoresis local anesthesia	2
0584T	Islet cell transplant, includes portal vein catheterization and infusion, including all imaging, including guidance, and radiological supervision and interpretation, when performed; percutaneous	1
0585T	Islet cell transplant, includes portal vein catheterization and infusion, including all imaging, including guidance, and radiological supervision and interpretation, when performed; laparoscopic	1
0586T	Islet cell transplant, includes portal vein catheterization and infusion, including all imaging, including guidance, and radiological supervision and interpretation, when performed; open	1
0587T	Percutaneous implantation or replacement of integrated single device neurostimulation system including electrode array and receiver or pulse generator, including analysis, programming, and imaging guidance when performed, posterior tibial nerve	1
0588T	Revision or removal of integrated single device neurostimulation system including electrode array and receiver or pulse generator, including analysis, programming, and imaging guidance when performed, posterior tibial nerve	1
0589Т	Electronic analysis with simple programming of implanted integrated neurostimulation system (eg, electrode array and receiver), including contact group(s), amplitude, pulse width, frequency (Hz), on/off cycling, burst, dose lockout, patient-selectable parameters, responsive neurostimulation, detection algorithms, closed-loop parameters, and passive parameters, when performed by physician or other qualified health care professional, posterior tibial nerve, 1-3 parameters	1
0590Т	Electronic analysis with complex programming of implanted integrated neurostimulation system (eg, electrode array and receiver), including contact group(s), amplitude, pulse width, frequency (Hz), on/off cycling, burst, dose lockout, patient-selectable parameters, responsive neurostimulation, detection algorithms, closed-loop parameters, and passive parameters, when performed by physician or other qualified health care professional, posterior tibial nerve, 4 or more parameters	1
0591T	Health and well-being coaching face-to-face; individual, initial assessment	1

0592T	Health and well-being coaching face-to-face; individual, follow-up session, at least 30 minutes	1
0593T	Health and well-being coaching face-to-face; group (2 or more individuals), at least 30 minutes	1
0594T	Osteotomy, humerus, with insertion of an externally controlled intramedullary lengthening device, including intraoperative imaging, initial and subsequent alignment assessments, computations of adjustment schedules, and management of the intramedullary lengthening device	2
0596Т	Temporary female intraurethral valve-pump (ie, voiding prosthesis); initial insertion, including urethral measurement	1
0597T	Temporary female intraurethral valve-pump (ie, voiding prosthesis); replacement	1
0598T	Noncontact real-time fluorescence wound imaging, for bacterial presence, location, and load, per session; first anatomic site (eg, lower extremity)	1
0599Т	Noncontact real-time fluorescence wound imaging, for bacterial presence, location, and load, per session; each additional anatomic site (eg, upper extremity) (List separately in addition to code for primary procedure)	1
0600T	Ablation, irreversible electroporation; 1 or more tumors per organ, including imaging guidance, when performed, percutaneous	3
0601T	Ablation, irreversible electroporation; 1 or more tumors per organ, including fluoroscopic and ultrasound guidance, when performed, open	3
0602T	Glomerular filtration rate (GFR) measurement(s), transdermal, including sensor placement and administration of a single dose of fluorescent pyrazine agent	1
0603T	Glomerular filtration rate (GFR) monitoring, transdermal, including sensor placement and administration of more than one dose of fluorescent pyrazine agent, each 24 hours	1
0604T	Optical coherence tomography (OCT) of retina, remote, patientinitiated image capture and transmission to a remote surveillance center unilateral or bilateral; initial device provision, set-up and patient education on use of equipment	1
0605T	Optical coherence tomography (OCT) of retina, remote, patientinitiated image capture and transmission to a remote surveillance center unilateral or bilateral; remote surveillance center technical support, data analyses and reports, with a minimum of 8 daily recordings, each 30 days	1
0607T	Remote monitoring of an external continuous pulmonary fluid monitoring system, including measurement of radiofrequencyderived pulmonary fluid levels, heart rate, respiration rate, activity, posture, and cardiovascular rhythm (eg, ECG data), transmitted to a remote 24-hour attended surveillance center; set-up and patient education on use of equipment	1
0608Т	Remote monitoring of an external continuous pulmonary fluid monitoring system, including measurement of radiofrequencyderived pulmonary fluid levels, heart rate, respiration rate, activity, posture, and cardiovascular rhythm (eg, ECG data), transmitted to a remote 24-hour attended surveillance center; analysis of data received and transmission of reports to the physician or other qualified health care professional	1

0609Т	Magnetic resonance spectroscopy, determination and localization of discogenic pain (cervical, thoracic, or lumbar); acquisition of single voxel data, per disc, on biomarkers (ie, lactic acid, carbohydrate, alanine, laal, propionic acid, proteoglycan, and collagen) in at least 3 discs	1
0610T	Magnetic resonance spectroscopy, determination and localization of discogenic pain (cervical, thoracic, or lumbar); transmission of biomarker data for software analysis	1
0611T	Magnetic resonance spectroscopy, determination and localization of discogenic pain (cervical, thoracic, or lumbar); postprocessing for algorithmic analysis of biomarker data for determination of relative chemical differences between discs	1
0614T	Removal and replacement of substernal implantable defibrillator pulse generator	1
0615T	Eye-movement analysis without spatial calibration, with interpretation and report	1
0616T	Insertion of iris prosthesis, including suture fixation and repair or removal of iris, when performed; without removal of crystalline lens or intraocular lens, without insertion of intraocular lens	2
0617T	Insertion of iris prosthesis, including suture fixation and repair or removal of iris, when performed; with removal of crystalline lens and insertion of intraocular lens	2
0618T	Insertion of iris prosthesis, including suture fixation and repair or removal of iris, when performed; with secondary intraocular lens placement or intraocular lens exchange	2
0619T	Cystourethroscopy with transurethral anterior prostate commissurotomy and drug delivery, including transrectal ultrasound and fluoroscopy, when performed	1
0620T	Endovascular venous arterialization, tibial or peroneal vein, with transcatheter placement of intravascular stent graft(s) and closure by any method, including percutaneous or open vascular access, ultrasound guidance for vascular access when performed, all catheterization(s) and intraprocedural roadmapping and imaging guidance necessary to complete the intervention, all associated radiological supervision and interpretation, when performed	1
0621T	Trabeculostomy ab interno by laser;	2
0622T	Trabeculostomy ab interno by laser; with use of ophthalmic endoscope	2
0623T	Automated quantification and characterization of coronary atherosclerotic plaque to assess severity of coronary disease, using data from coronary computed tomographic angiography; data preparation and transmission, computerized analysis of data, with review of computerized analysis output to reconcile discordant data, interpretation and report	1
0624T	Automated quantification and characterization of coronary atherosclerotic plaque to assess severity of coronary disease, using data from coronary computed tomographic angiography; data preparation and transmission	1
0625T	Automated quantification and characterization of coronary atherosclerotic plaque to assess severity of coronary disease, using data from coronary computed tomographic angiography; computerized analysis of data from coronary computed tomographic angiography	1
0626T	Automated quantification and characterization of coronary atherosclerotic plaque to assess severity of coronary disease, using data from coronary computed	1

	tomographic angiography; review of computerized analysis output to reconcile discordant data, interpretation and report	
0627T	Percutaneous injection of allogeneic cellular and/or tissue-based product, intervertebral disc, unilateral or bilateral injection, with fluoroscopic guidance, lumbar; first level	1
0628T	Percutaneous injection of allogeneic cellular and/or tissue-based product, intervertebral disc, unilateral or bilateral injection, with fluoroscopic guidance, lumbar; each additional level (List separately in addition to code for primary procedure)	4
0629T	Percutaneous injection of allogeneic cellular and/or tissue-based product, intervertebral disc, unilateral or bilateral injection, with CT guidance, lumbar; first level	1
0630T	Percutaneous injection of allogeneic cellular and/or tissue-based product, intervertebral disc, unilateral or bilateral injection, with CT guidance, lumbar; each additional level (List separately in addition to code for primary procedure)	4
0631T	Transcutaneous visible light hyperspectral imaging measurement of oxyhemoglobin, deoxyhemoglobin, and tissue oxygenation, with interpretation and report, per extremity	4
0632T	Percutaneous transcatheter ultrasound ablation of nerves innervating the pulmonary arteries, including right heart catheterization, pulmonary artery angiography, and all imaging guidance	1
0633T	Computed tomography, breast, including 3D rendering, when performed, unilateral; without contrast material	1
0634T	Computed tomography, breast, including 3D rendering, when performed, unilateral; with contrast material(s)	1
0635T	Computed tomography, breast, including 3D rendering, when performed, unilateral; without contrast, followed by contrast material(s)	1
0636T	Computed tomography, breast, including 3D rendering, when performed, bilateral; without contrast material(s)	1
0637T	Computed tomography, breast, including 3D rendering, when performed, bilateral; with contrast material(s)	1
0638T	Computed tomography, breast, including 3D rendering, when performed, bilateral; without contrast, followed by contrast material(s)	1
0639Т	Wireless skin sensor thermal anisotropy measurement(s) and assessment of flow in cerebrospinal fluid shunt, including ultrasound guidance, when performed	1
0640T	Noncontact near-infrared spectroscopy studies of flap or wound (eg, for measurement of deoxyhemoglobin, oxyhemoglobin, and ratio of tissue oxygenation [StO2]); image acquisition, interpretation and report, each flap or wound	2
0641T	Noncontact near-infrared spectroscopy studies of flap or wound (eg, for measurement of deoxyhemoglobin, oxyhemoglobin, and ratio of tissue oxygenation [StO2]); image acquisition only, each flap or wound	2

0642T	Noncontact near-infrared spectroscopy studies of flap or wound (eg, for measurement of deoxyhemoglobin, oxyhemoglobin, and ratio of tissue oxygenation [StO2]); interpretation and report only, each flap or wound	2
0643T	Transcatheter left ventricular restoration device implantation including right and left heart catheterization and left ventriculography when performed, arterial approach	1
0644T	Transcatheter removal or debulking of intracardiac mass (eg, vegetations, thrombus) via suction (eg, vacuum, aspiration) device, percutaneous approach, with intraoperative reinfusion of aspirated blood, including imaging guidance, when performed	1
0645T	Transcatheter implantation of coronary sinus reduction device including vascular access and closure, right heart catheterization, venous angiography, coronary sinus angiography, imaging guidance, and supervision and interpretation, when performed	1
0646T	Transcatheter tricuspid valve implantation (TTVI)/replacement with prosthetic valve, percutaneous approach, including right heart catheterization, temporary pacemaker insertion, and selective right ventricular or right atrial angiography, when performed	1
0647T	Insertion of gastrostomy tube, percutaneous, with magnetic gastropexy, under ultrasound guidance, image documentation and report	1
0648T	Quantitative magnetic resonance for analysis of tissue composition (eg, fat, iron, water content), including multiparametric data acquisition, data preparation and transmission, interpretation and report, obtained without diagnostic MRI examination of the same anatomy (eg, organ, gland, tissue, target structure) during the same session; single organ	1
0649Т	Quantitative magnetic resonance for analysis of tissue composition (eg, fat, iron, water content), including multiparametric data acquisition, data preparation and transmission, interpretation and report, obtained with diagnostic MRI examination of the same anatomy (eg, organ, gland, tissue, target structure); single organ (List separately in addition to code for primary procedure)	1
0650T	Programming device evaluation (remote) of subcutaneous cardiac rhythm monitor system, with iterative adjustment of the implantable device to test the function of the device and select optimal permanently programmed values with analysis, review and report by a physician or other qualified health care professional	1
0651T	Magnetically controlled capsule endoscopy, esophagus through stomach, including intraprocedural positioning of capsule, with interpretation and report	1
0652T	Esophagogastroduodenoscopy, flexible, transnasal; diagnostic, including collection of specimen(s) by brushing or washing, when performed (separate procedure)	1
0653T	Esophagogastroduodenoscopy, flexible, transnasal; with biopsy, single or multiple	1
0654T	Esophagogastroduodenoscopy, flexible, transnasal; with insertion of intraluminal tube or catheter	1
0656T	Vertebral body tethering, anterior; up to 7 vertebral segments	1
0657T	Vertebral body tethering, anterior; 8 or more vertebral segments	1

0658T	Electrical impedance spectroscopy of 1 or more skin lesions for automated melanoma risk score	1
0659Т	Transcatheter intracoronary infusion of supersaturated oxygen in conjunction with percutaneous coronary revascularization during acute myocardial infarction, including catheter placement, imaging guidance (eg, fluoroscopy), angiography, and radiologic supervision and interpretation	1
0660T	Implantation of anterior segment intraocular nonbiodegradable drug-eluting system, internal approach	1
0661T	Removal and reimplantation of anterior segment intraocular nonbiodegradable drug-eluting implant	1
0662T	Scalp cooling, mechanical; initial measurement and calibration of cap	1
0663T	Scalp cooling, mechanical; placement of device, monitoring, and removal of device (List separately in addition to code for primary procedure)	1
0664T	Donor hysterectomy (including cold preservation); open, from cadaver donor	1
0665T	Donor hysterectomy (including cold preservation); open, from living donor	1
0666T	Donor hysterectomy (including cold preservation); laparoscopic or robotic, from living donor	1
0667T	Donor hysterectomy (including cold preservation); recipient uterus allograft transplantation from cadaver or living donor	1
0668T	Backbench standard preparation of cadaver or living donor uterine allograft prior to transplantation, including dissection and removal of surrounding soft tissues and preparation of uterine vein(s) and uterine artery(ies), as necessary	1
0669Т	Backbench reconstruction of cadaver or living donor uterus allograft prior to transplantation; venous anastomosis, each	2
0670Т	Backbench reconstruction of cadaver or living donor uterus allograft prior to transplantation; arterial anastomosis, each	2
0671T	Insertion of anterior segment aqueous drainage device into the trabecular meshwork, without external reservoir, and without concomitant cataract removal, one or more	2
0672T	Endovaginal cryogen-cooled, monopolar radiofrequency remodeling of the tissues surrounding the female bladder neck and proximal urethra for urinary incontinence	1
0674T	Laparoscopic insertion of new or replacement of permanent implantable synchronized diaphragmatic stimulation system for augmentation of cardiac function, including an implantable pulse generator and diaphragmatic lead(s)	1
0675T	Laparoscopic insertion of new or replacement of diaphragmatic lead(s), permanent implantable synchronized diaphragmatic stimulation system for augmentation of cardiac function, including connection to an existing pulse generator; first lead	1
0676Т	Laparoscopic insertion of new or replacement of diaphragmatic lead(s), permanent implantable synchronized diaphragmatic stimulation system for augmentation of cardiac function, including connection to an existing pulse generator; each additional lead (List separately in addition to code for primary procedure)	1

0677T	Laparoscopic repositioning of diaphragmatic lead(s), permanent implantable synchronized diaphragmatic stimulation system for augmentation of cardiac function, including connection to an existing pulse generator; first repositioned lead	1
0678T	Laparoscopic repositioning of diaphragmatic lead(s), permanent implantable synchronized diaphragmatic stimulation system for augmentation of cardiac function, including connection to an existing pulse generator; each additional repositioned lead (List separately in addition to code for primary procedure)	1
0679Т	Laparoscopic removal of diaphragmatic lead(s), permanent implantable synchronized diaphragmatic stimulation system for augmentation of cardiac function	1
0680T	Insertion or replacement of pulse generator only, permanent implantable synchronized diaphragmatic stimulation system for augmentation of cardiac function, with connection to existing lead(s)	1
0681T	Relocation of pulse generator only, permanent implantable synchronized diaphragmatic stimulation system for augmentation of cardiac function, with connection to existing dual leads	1
0682T	Removal of pulse generator only, permanent implantable synchronized diaphragmatic stimulation system for augmentation of cardiac function	1
0683Т	Programming device evaluation (in-person) with iterative adjustment of the implantable device to test the function of the device and select optimal permanent programmed values with analysis, review and report by a physician or other qualified health care professional, permanent implantable synchronized diaphragmatic stimulation system for augmentation of cardiac function	1
0684T	Peri-procedural device evaluation (in-person) and programming of device system parameters before or after a surgery, procedure, or test with analysis, review, and report by a physician or other qualified health care professional, permanent implantable synchronized diaphragmatic stimulation system for augmentation of cardiac function	1
0685T	Interrogation device evaluation (in-person) with analysis, review and report by a physician or other qualified health care professional, including connection, recording and disconnection per patient encounter, permanent implantable synchronized diaphragmatic stimulation system for augmentation of cardiac function	1
0686T	Histotripsy (ie, non-thermal ablation via acoustic energy delivery) of malignant hepatocellular tissue, including image guidance	1
0687T	Treatment of amblyopia using an online digital program; device supply, educational set-up, and initial session	1
0688T	Treatment of amblyopia using an online digital program; assessment of patient performance and program data by physician or other qualified health care professional, with report, per calendar month	1
0689Т	Quantitative ultrasound tissue characterization (non-elastographic), including interpretation and report, obtained without diagnostic ultrasound examination of the same anatomy (eg, organ, gland, tissue, target structure)	2
0690Т	Quantitative ultrasound tissue characterization (non-elastographic), including interpretation and report, obtained with diagnostic ultrasound examination of the	2

	same anatomy (eg, organ, gland, tissue, target structure) (List separately in addition to code for primary procedure)	
0692T	Therapeutic ultrafiltration	1
0693Т	Comprehensive full body computer-based markerless 3D kinematic and kinetic motion analysis and report	1
0694T	3-dimensional volumetric imaging and reconstruction of breast or axillary lymph node tissue, each excised specimen, 3-dimensional automatic specimen reorientation, interpretation and report, real-time intraoperative	2
0695T	Body surface-activation mapping of pacemaker or pacing cardioverter-defibrillator lead(s) to optimize electrical synchrony, cardiac resynchronization therapy device, including connection, recording, disconnection, review, and report; at time of implant or replacement	1
0696T	Body surface-activation mapping of pacemaker or pacing cardioverter-defibrillator lead(s) to optimize electrical synchrony, cardiac resynchronization therapy device, including connection, recording, disconnection, review, and report; at time of follow-up interrogation or programming device evaluation	2
0697Т	Quantitative magnetic resonance for analysis of tissue composition (eg, fat, iron, water content), including multiparametric data acquisition, data preparation and transmission, interpretation and report, obtained without diagnostic MRI examination of the same anatomy (eg, organ, gland, tissue, target structure) during the same session; multiple organs	1
0698T	Quantitative magnetic resonance for analysis of tissue composition (eg, fat, iron, water content), including multiparametric data acquisition, data preparation and transmission, interpretation and report, obtained with diagnostic MRI examination of the same anatomy (eg, organ, gland, tissue, target structure); multiple organs (List separately in addition to code for primary procedure)	1
0699T	Injection, posterior chamber of eye, medication	2
0700T	Molecular fluorescent imaging of suspicious nevus; first lesion	1
0701T	Molecular fluorescent imaging of suspicious nevus; each additional lesion (List separately in addition to code for primary procedure)	2
0702T	Remote therapeutic monitoring of a standardized online digital cognitive behavioral therapy program ordered by a physician or other qualified health care professional; supply and technical support, per 30 days	1
0703T	Remote therapeutic monitoring of a standardized online digital cognitive behavioral therapy program ordered by a physician or other qualified health care professional; management services by physician or other qualified health care professional, per calendar month	1
0704T	Remote treatment of amblyopia using an eye tracking device; device supply with initial set-up and patient education on use of equipment	1
0705T	Remote treatment of amblyopia using an eye tracking device; surveillance center technical support including data transmission with analysis, with a minimum of 18 training hours, each 30 days	1
0706T	Remote treatment of amblyopia using an eye tracking device; interpretation and report by physician or other qualified health care professional, per calendar month	1

0707T	Injection(s), bone substitute material (eg, calcium phosphate) into subchondral bone defect (ie, bone marrow lesion, bone bruise, stress injury, microtrabecular fracture), including imaging guidance and arthroscopic assistance for joint visualization	1
0708T	Intradermal cancer immunotherapy; preparation and initial injection	1
0709Т	Intradermal cancer immunotherapy; each additional injection (List separately in addition to code for primary procedure)	2
0710T	Noninvasive arterial plaque analysis using software processing of data from non-coronary computerized tomography angiography; including data preparation and transmission, quantification of the structure and composition of the vessel wall and assessment for lipid-rich necrotic core plaque to assess atherosclerotic plaque stability, data review, interpretation and report	1
0711T	Noninvasive arterial plaque analysis using software processing of data from non- coronary computerized tomography angiography; data preparation and transmission	1
0712T	Noninvasive arterial plaque analysis using software processing of data from non- coronary computerized tomography angiography; quantification of the structure and composition of the vessel wall and assessment for lipid-rich necrotic core plaque to assess atherosclerotic plaque stability	1
0713T	Noninvasive arterial plaque analysis using software processing of data from non- coronary computerized tomography angiography; data review, interpretation and report	1
10004	Fine needle aspiration biopsy, without imaging guidance; each additional lesion (List separately in addition to code for primary procedure)	1
10005	Fine needle aspiration biopsy, including ultrasound guidance; first lesion	1
10006	Fine needle aspiration biopsy, including ultrasound guidance; each additional lesion (List separately in addition to code for primary procedure)	1
10007	Fine needle aspiration biopsy, including fluoroscopic guidance; first lesion	1
10008	Fine needle aspiration biopsy, including fluoroscopic guidance; each additional lesion (List separately in addition to code for primary procedure)	1
10009	Fine needle aspiration biopsy, including CT guidance; first lesion	1
10010	Fine needle aspiration biopsy, including CT guidance; each additional lesion (List separately in addition to code for primary procedure)	1
10011	Fine needle aspiration biopsy, including MR guidance; first lesion	1
10012	Fine needle aspiration biopsy, including MR guidance; each additional lesion (List separately in addition to code for primary procedure)	1
10021	Fine needle aspiration biopsy, without imaging guidance; first lesion	1
10030	Image-guided fluid collection drainage by catheter (eg, abscess, hematoma, seroma, lymphocele, cyst), soft tissue (eg, extremity, abdominal wall, neck), percutaneous	1
10035	Placement of soft tissue localization device(s) (eg, clip, metallic pellet, wire/needle, radioactive seeds), percutaneous, including imaging guidance; first lesion	1

10036	Placement of soft tissue localization device(s) (eg, clip, metallic pellet, wire/needle, radioactive seeds), percutaneous, including imaging guidance; each additional lesion (List separately in addition to code for primary procedure)	1
10040	Acne surgery (eg, marsupialization, opening or removal of multiple milia, comedones, cysts, pustules)	1
10060	Incision and drainage of abscess (eg, carbuncle, suppurative hidradenitis, cutaneous or subcutaneous abscess, cyst, furuncle, or paronychia); simple or single	1
10061	Incision and drainage of abscess (eg, carbuncle, suppurative hidradenitis, cutaneous or subcutaneous abscess, cyst, furuncle, or paronychia); complicated or multiple	1
10080	Incision and drainage of pilonidal cyst; simple	1
10081	Incision and drainage of pilonidal cyst; complicated	1
10120	Incision and removal of foreign body, subcutaneous tissues; simple	2
10121	Incision and removal of foreign body, subcutaneous tissues; complicated	1
10140	Incision and drainage of hematoma, seroma or fluid collection	2
10160	Puncture aspiration of abscess, hematoma, bulla, or cyst	2
10180	Incision and drainage, complex, postoperative wound infection	1
11000	Debridement of extensive eczematous or infected skin; up to 10% of body surface	1
11001	Debridement of extensive eczematous or infected skin; each additional 10% of the body surface, or part thereof (List separately in addition to code for primary procedure)	1
11004	Debridement of skin, subcutaneous tissue, muscle and fascia for necrotizing soft tissue infection; external genitalia and perineum	1
11005	Debridement of skin, subcutaneous tissue, muscle and fascia for necrotizing soft tissue infection; abdominal wall, with or without fascial closure	1
11006	Debridement of skin, subcutaneous tissue, muscle and fascia for necrotizing soft tissue infection; external genitalia, perineum and abdominal wall, with or without fascial closure	1
11008	Removal of prosthetic material or mesh, abdominal wall for infection (eg, for chronic or recurrent mesh infection or necrotizing soft tissue infection) (List separately in addition to code for primary procedure)	1
11010	Debridement including removal of foreign material at the site of an open fracture and/or an open dislocation (eg, excisional debridement); skin and subcutaneous tissues	1
11011	Debridement including removal of foreign material at the site of an open fracture and/or an open dislocation (eg, excisional debridement); skin, subcutaneous tissue, muscle fascia, and muscle	1
11012	Debridement including removal of foreign material at the site of an open fracture and/or an open dislocation (eg, excisional debridement); skin, subcutaneous tissue, muscle fascia, muscle, and bone	1
11042	Debridement, subcutaneous tissue (includes epidermis and dermis, if performed); first 20 sq cm or less	1

11043	Debridement, muscle and/or fascia (includes epidermis, dermis, and subcutaneous tissue, if performed); first 20 sq cm or less	1
11044	Debridement, bone (includes epidermis, dermis, subcutaneous tissue, muscle and/or fascia, if performed); first 20 sq cm or less	1
11045	Debridement, subcutaneous tissue (includes epidermis and dermis, if performed); each additional 20 sq cm, or part thereof (List separately in addition to code for primary procedure)	1
11046	Debridement, muscle and/or fascia (includes epidermis, dermis, and subcutaneous tissue, if performed); each additional 20 sq cm, or part thereof (List separately in addition to code for primary procedure)	1
11047	Debridement, bone (includes epidermis, dermis, subcutaneous tissue, muscle and/or fascia, if performed); each additional 20 sq cm, or part thereof (List separately in addition to code for primary procedure)	1
11055	Paring or cutting of benign hyperkeratotic lesion (eg, corn or callus); single lesion	1
11056	Paring or cutting of benign hyperkeratotic lesion (eg, corn or callus); 2 to 4 lesions	1
11057	Paring or cutting of benign hyperkeratotic lesion (eg, corn or callus); more than 4 lesions	1
11102	Tangential biopsy of skin (eg, shave, scoop, saucerize, curette); single lesion	1
11103	Tangential biopsy of skin (eg, shave, scoop, saucerize, curette); each separate/additional lesion (List separately in addition to code for primary procedure)	1
11104	Punch biopsy of skin (including simple closure, when performed); single lesion	1
11105	Punch biopsy of skin (including simple closure, when performed); each separate/additional lesion (List separately in addition to code for primary procedure)	1
11106	Incisional biopsy of skin (eg, wedge) (including simple closure, when performed); single lesion	1
11107	Incisional biopsy of skin (eg, wedge) (including simple closure, when performed); each separate/additional lesion (List separately in addition to code for primary procedure)	1
11200	Removal of skin tags, multiple fibrocutaneous tags, any area; up to and including 15 lesions	1
11201	Removal of skin tags, multiple fibrocutaneous tags, any area; each additional 10 lesions, or part thereof (List separately in addition to code for primary procedure)	1
11300	Shaving of epidermal or dermal lesion, single lesion, trunk, arms or legs; lesion diameter 0.5 cm or less	1
11301	Shaving of epidermal or dermal lesion, single lesion, trunk, arms or legs; lesion diameter 0.6 to 1.0 cm	1
11302	Shaving of epidermal or dermal lesion, single lesion, trunk, arms or legs; lesion diameter 1.1 to 2.0 cm	1
11303	Shaving of epidermal or dermal lesion, single lesion, trunk, arms or legs; lesion diameter over 2.0 cm	1

11305	Shaving of epidermal or dermal lesion, single lesion, scalp, neck, hands, feet, genitalia; lesion diameter 0.5 cm or less	1
11306	Shaving of epidermal or dermal lesion, single lesion, scalp, neck, hands, feet, genitalia; lesion diameter 0.6 to 1.0 cm	1
11307	Shaving of epidermal or dermal lesion, single lesion, scalp, neck, hands, feet, genitalia; lesion diameter 1.1 to 2.0 cm	1
11308	Shaving of epidermal or dermal lesion, single lesion, scalp, neck, hands, feet, genitalia; lesion diameter over 2.0 cm	1
11310	Shaving of epidermal or dermal lesion, single lesion, face, ears, eyelids, nose, lips, mucous membrane; lesion diameter 0.5 cm or less	1
11311	Shaving of epidermal or dermal lesion, single lesion, face, ears, eyelids, nose, lips, mucous membrane; lesion diameter 0.6 to 1.0 cm	1
11312	Shaving of epidermal or dermal lesion, single lesion, face, ears, eyelids, nose, lips, mucous membrane; lesion diameter 1.1 to 2.0 cm	1
11313	Shaving of epidermal or dermal lesion, single lesion, face, ears, eyelids, nose, lips, mucous membrane; lesion diameter over 2.0 cm	1
11400	Excision, benign lesion including margins, except skin tag (unless listed elsewhere), trunk, arms or legs; excised diameter 0.5 cm or less	2
11401	Excision, benign lesion including margins, except skin tag (unless listed elsewhere), trunk, arms or legs; excised diameter 0.6 to 1.0 cm	2
11402	Excision, benign lesion including margins, except skin tag (unless listed elsewhere), trunk, arms or legs; excised diameter 1.1 to 2.0 cm	2
11403	Excision, benign lesion including margins, except skin tag (unless listed elsewhere), trunk, arms or legs; excised diameter 2.1 to 3.0 cm	2
11404	Excision, benign lesion including margins, except skin tag (unless listed elsewhere), trunk, arms or legs; excised diameter 3.1 to 4.0 cm	2
11406	Excision, benign lesion including margins, except skin tag (unless listed elsewhere), trunk, arms or legs; excised diameter over 4.0 cm	2
11420	Excision, benign lesion including margins, except skin tag (unless listed elsewhere), scalp, neck, hands, feet, genitalia; excised diameter 0.5 cm or less	2
11421	Excision, benign lesion including margins, except skin tag (unless listed elsewhere), scalp, neck, hands, feet, genitalia; excised diameter 0.6 to 1.0 cm	2
11422	Excision, benign lesion including margins, except skin tag (unless listed elsewhere), scalp, neck, hands, feet, genitalia; excised diameter 1.1 to 2.0 cm	2
11423	Excision, benign lesion including margins, except skin tag (unless listed elsewhere), scalp, neck, hands, feet, genitalia; excised diameter 2.1 to 3.0 cm	2
11424	Excision, benign lesion including margins, except skin tag (unless listed elsewhere), scalp, neck, hands, feet, genitalia; excised diameter 3.1 to 4.0 cm	2
11426	Excision, benign lesion including margins, except skin tag (unless listed elsewhere), scalp, neck, hands, feet, genitalia; excised diameter over 4.0 cm	2

11440	Excision, other benign lesion including margins, except skin tag (unless listed elsewhere), face, ears, eyelids, nose, lips, mucous membrane; excised diameter 0.5 cm or less	2
11441	Excision, other benign lesion including margins, except skin tag (unless listed elsewhere), face, ears, eyelids, nose, lips, mucous membrane; excised diameter 0.6 to 1.0 cm	2
11442	Excision, other benign lesion including margins, except skin tag (unless listed elsewhere), face, ears, eyelids, nose, lips, mucous membrane; excised diameter 1.1 to 2.0 cm	2
11443	Excision, other benign lesion including margins, except skin tag (unless listed elsewhere), face, ears, eyelids, nose, lips, mucous membrane; excised diameter 2.1 to 3.0 cm	2
11444	Excision, other benign lesion including margins, except skin tag (unless listed elsewhere), face, ears, eyelids, nose, lips, mucous membrane; excised diameter 3.1 to 4.0 cm	2
11446	Excision, other benign lesion including margins, except skin tag (unless listed elsewhere), face, ears, eyelids, nose, lips, mucous membrane; excised diameter over 4.0 cm	2
11450	Excision of skin and subcutaneous tissue for hidradenitis, axillary; with simple or intermediate repair	1
11451	Excision of skin and subcutaneous tissue for hidradenitis, axillary; with complex repair	1
11462	Excision of skin and subcutaneous tissue for hidradenitis, inguinal; with simple or intermediate repair	1
11463	Excision of skin and subcutaneous tissue for hidradenitis, inguinal; with complex repair	1
11470	Excision of skin and subcutaneous tissue for hidradenitis, perianal, perineal, or umbilical; with simple or intermediate repair	1
11471	Excision of skin and subcutaneous tissue for hidradenitis, perianal, perineal, or umbilical; with complex repair	1
11600	Excision, malignant lesion including margins, trunk, arms, or legs; excised diameter 0.5 cm or less	2
11601	Excision, malignant lesion including margins, trunk, arms, or legs; excised diameter 0.6 to 1.0 cm	2
11602	Excision, malignant lesion including margins, trunk, arms, or legs; excised diameter 1.1 to 2.0 cm	2
11603	Excision, malignant lesion including margins, trunk, arms, or legs; excised diameter 2.1 to 3.0 cm	2
11604	Excision, malignant lesion including margins, trunk, arms, or legs; excised diameter 3.1 to 4.0 cm	2
11606	Excision, malignant lesion including margins, trunk, arms, or legs; excised diameter over 4.0 cm	1

11620	Excision, malignant lesion including margins, scalp, neck, hands, feet, genitalia; excised diameter 0.5 cm or less	2
11621	Excision, malignant lesion including margins, scalp, neck, hands, feet, genitalia; excised diameter 0.6 to 1.0 cm	2
11622	Excision, malignant lesion including margins, scalp, neck, hands, feet, genitalia; excised diameter 1.1 to 2.0 cm	2
11623	Excision, malignant lesion including margins, scalp, neck, hands, feet, genitalia; excised diameter 2.1 to 3.0 cm	2
11624	Excision, malignant lesion including margins, scalp, neck, hands, feet, genitalia; excised diameter 3.1 to 4.0 cm	2
11626	Excision, malignant lesion including margins, scalp, neck, hands, feet, genitalia; excised diameter over 4.0 cm	2
11640	Excision, malignant lesion including margins, face, ears, eyelids, nose, lips; excised diameter 0.5 cm or less	2
11641	Excision, malignant lesion including margins, face, ears, eyelids, nose, lips; excised diameter 0.6 to 1.0 cm	2
11642	Excision, malignant lesion including margins, face, ears, eyelids, nose, lips; excised diameter 1.1 to 2.0 cm	1
11643	Excision, malignant lesion including margins, face, ears, eyelids, nose, lips; excised diameter 2.1 to 3.0 cm	2
11644	Excision, malignant lesion including margins, face, ears, eyelids, nose, lips; excised diameter 3.1 to 4.0 cm	2
11646	Excision, malignant lesion including margins, face, ears, eyelids, nose, lips; excised diameter over 4.0 cm	2
11719	Trimming of nondystrophic nails, any number	1
11720	Debridement of nail(s) by any method(s); 1 to 5	1
11721	Debridement of nail(s) by any method(s); 6 or more	1
11730	Avulsion of nail plate, partial or complete, simple; single	1
11732	Avulsion of nail plate, partial or complete, simple; each additional nail plate (List separately in addition to code for primary procedure)	19
11740	Evacuation of subungual hematoma	20
11750	Excision of nail and nail matrix, partial or complete (eg, ingrown or deformed nail), for permanent removal	20
11755	Biopsy of nail unit (eg, plate, bed, matrix, hyponychium, proximal and lateral nail folds) (separate procedure)	20
11760	Repair of nail bed	20
11762	Reconstruction of nail bed with graft	20
11765	Wedge excision of skin of nail fold (eg, for ingrown toenail)	20
11770	Excision of pilonidal cyst or sinus; simple	1
		1

11771	Excision of pilonidal cyst or sinus; extensive	1
11772	Excision of pilonidal cyst or sinus; complicated	1
11900	Injection, intralesional; up to and including 7 lesions	1
11901	Injection, intralesional; more than 7 lesions	1
11920	Tattooing, intradermal introduction of insoluble opaque pigments to correct color defects of skin, including micropigmentation; 6.0 sq cm or less	1
11921	Tattooing, intradermal introduction of insoluble opaque pigments to correct color defects of skin, including micropigmentation; 6.1 to 20.0 sq cm	1
11922	Tattooing, intradermal introduction of insoluble opaque pigments to correct color defects of skin, including micropigmentation; each additional 20.0 sq cm, or part thereof (List separately in addition to code for primary procedure)	1
11950	Subcutaneous injection of filling material (eg, collagen); 1 cc or less	1
11951	Subcutaneous injection of filling material (eg, collagen); 1.1 to 5.0 cc	1
11952	Subcutaneous injection of filling material (eg, collagen); 5.1 to 10.0 cc	1
11954	Subcutaneous injection of filling material (eg, collagen); over 10.0 cc	1
11960	Insertion of tissue expander(s) for other than breast, including subsequent expansion	1
11970	Replacement of tissue expander with permanent implant	2
11971	Removal of tissue expander without insertion of implant	1
11976	Removal, implantable contraceptive capsules	1
11980	Subcutaneous hormone pellet implantation (implantation of estradiol and/or testosterone pellets beneath the skin)	1
11981	Insertion, drug-delivery implant (ie, bioresorbable, biodegradable, non-biodegradable)	1
11982	Removal, non-biodegradable drug delivery implant	1
11983	Removal with reinsertion, non-biodegradable drug delivery implant	1
12001	Simple repair of superficial wounds of scalp, neck, axillae, external genitalia, trunk and/or extremities (including hands and feet); 2.5 cm or less	1
12002	Simple repair of superficial wounds of scalp, neck, axillae, external genitalia, trunk and/or extremities (including hands and feet); 2.6 cm to 7.5 cm	1
12004	Simple repair of superficial wounds of scalp, neck, axillae, external genitalia, trunk and/or extremities (including hands and feet); 7.6 cm to 12.5 cm	1
12005	Simple repair of superficial wounds of scalp, neck, axillae, external genitalia, trunk and/or extremities (including hands and feet); 12.6 cm to 20.0 cm	1
12006	Simple repair of superficial wounds of scalp, neck, axillae, external genitalia, trunk and/or extremities (including hands and feet); 20.1 cm to 30.0 cm	1
12007	Simple repair of superficial wounds of scalp, neck, axillae, external genitalia, trunk and/or extremities (including hands and feet); over 30.0 cm	1

12011	Simple repair of superficial wounds of face, ears, eyelids, nose, lips and/or mucous membranes; 2.5 cm or less	1
12013	Simple repair of superficial wounds of face, ears, eyelids, nose, lips and/or mucous membranes; 2.6 cm to 5.0 cm	1
12014	Simple repair of superficial wounds of face, ears, eyelids, nose, lips and/or mucous membranes; 5.1 cm to 7.5 cm	1
12015	Simple repair of superficial wounds of face, ears, eyelids, nose, lips and/or mucous membranes; 7.6 cm to 12.5 cm	1
12016	Simple repair of superficial wounds of face, ears, eyelids, nose, lips and/or mucous membranes; 12.6 cm to 20.0 cm	1
12017	Simple repair of superficial wounds of face, ears, eyelids, nose, lips and/or mucous membranes; 20.1 cm to 30.0 cm	1
12018	Simple repair of superficial wounds of face, ears, eyelids, nose, lips and/or mucous membranes; over 30.0 cm	1
12020	Treatment of superficial wound dehiscence; simple closure	1
12021	Treatment of superficial wound dehiscence; with packing	1
12031	Repair, intermediate, wounds of scalp, axillae, trunk and/or extremities (excluding hands and feet); 2.5 cm or less	1
12032	Repair, intermediate, wounds of scalp, axillae, trunk and/or extremities (excluding hands and feet); 2.6 cm to 7.5 cm	1
12034	Repair, intermediate, wounds of scalp, axillae, trunk and/or extremities (excluding hands and feet); 7.6 cm to 12.5 cm	1
12035	Repair, intermediate, wounds of scalp, axillae, trunk and/or extremities (excluding hands and feet); 12.6 cm to 20.0 cm	1
12036	Repair, intermediate, wounds of scalp, axillae, trunk and/or extremities (excluding hands and feet); 20.1 cm to 30.0 cm	1
12037	Repair, intermediate, wounds of scalp, axillae, trunk and/or extremities (excluding hands and feet); over 30.0 cm	1
12041	Repair, intermediate, wounds of neck, hands, feet and/or external genitalia; 2.5 cm or less	1
12042	Repair, intermediate, wounds of neck, hands, feet and/or external genitalia; 2.6 cm to 7.5 cm	1
12044	Repair, intermediate, wounds of neck, hands, feet and/or external genitalia; 7.6 cm to 12.5 cm	1
12045	Repair, intermediate, wounds of neck, hands, feet and/or external genitalia; 12.6 cm to 20.0 cm	1
12046	Repair, intermediate, wounds of neck, hands, feet and/or external genitalia; 20.1 cm to 30.0 cm	1
12047	Repair, intermediate, wounds of neck, hands, feet and/or external genitalia; over 30.0 cm	1

12051	Repair, intermediate, wounds of face, ears, eyelids, nose, lips and/or mucous membranes; 2.5 cm or less	1
12052	Repair, intermediate, wounds of face, ears, eyelids, nose, lips and/or mucous membranes; 2.6 cm to 5.0 cm	1
12053	Repair, intermediate, wounds of face, ears, eyelids, nose, lips and/or mucous membranes; 5.1 cm to 7.5 cm	1
12054	Repair, intermediate, wounds of face, ears, eyelids, nose, lips and/or mucous membranes; 7.6 cm to 12.5 cm	1
12055	Repair, intermediate, wounds of face, ears, eyelids, nose, lips and/or mucous membranes; 12.6 cm to 20.0 cm	1
12056	Repair, intermediate, wounds of face, ears, eyelids, nose, lips and/or mucous membranes; 20.1 cm to 30.0 cm	1
12057	Repair, intermediate, wounds of face, ears, eyelids, nose, lips and/or mucous membranes; over 30.0 cm	1
13100	Repair, complex, trunk; 1.1 cm to 2.5 cm	1
13101	Repair, complex, trunk; 2.6 cm to 7.5 cm	1
13102	Repair, complex, trunk; each additional 5 cm or less (List separately in addition to code for primary procedure)	1
13120	Repair, complex, scalp, arms, and/or legs; 1.1 cm to 2.5 cm	1
13121	Repair, complex, scalp, arms, and/or legs; 2.6 cm to 7.5 cm	1
13122	Repair, complex, scalp, arms, and/or legs; each additional 5 cm or less (List separately in addition to code for primary procedure)	1
13131	Repair, complex, forehead, cheeks, chin, mouth, neck, axillae, genitalia, hands and/or feet; 1.1 cm to 2.5 cm	1
13132	Repair, complex, forehead, cheeks, chin, mouth, neck, axillae, genitalia, hands and/or feet; 2.6 cm to 7.5 cm	1
13133	Repair, complex, forehead, cheeks, chin, mouth, neck, axillae, genitalia, hands and/or feet; each additional 5 cm or less (List separately in addition to code for primary procedure)	1
13151	Repair, complex, eyelids, nose, ears and/or lips; 1.1 cm to 2.5 cm	1
13152	Repair, complex, eyelids, nose, ears and/or lips; 2.6 cm to 7.5 cm	1
13153	Repair, complex, eyelids, nose, ears and/or lips; each additional 5 cm or less (List separately in addition to code for primary procedure)	1
13160	Secondary closure of surgical wound or dehiscence, extensive or complicated	1
14000	Adjacent tissue transfer or rearrangement, trunk; defect 10 sq cm or less	1
14001	Adjacent tissue transfer or rearrangement, trunk; defect 10.1 sq cm to 30.0 sq cm	1
14020	Adjacent tissue transfer or rearrangement, scalp, arms and/or legs; defect 10 sq cm or less	1
14021	Adjacent tissue transfer or rearrangement, scalp, arms and/or legs; defect 10.1 sq cm to 30.0 sq cm	1

14040	Adjacent tissue transfer or rearrangement, forehead, cheeks, chin, mouth, neck, axillae, genitalia, hands and/or feet; defect 10 sq cm or less	1
14041	Adjacent tissue transfer or rearrangement, forehead, cheeks, chin, mouth, neck, axillae, genitalia, hands and/or feet; defect 10.1 sq cm to 30.0 sq cm	1
14060	Adjacent tissue transfer or rearrangement, eyelids, nose, ears and/or lips; defect 10 sq cm or less	1
14061	Adjacent tissue transfer or rearrangement, eyelids, nose, ears and/or lips; defect 10.1 sq cm to 30.0 sq cm	1
14301	Adjacent tissue transfer or rearrangement, any area; defect 30.1 sq cm to 60.0 sq cm	1
14302	Adjacent tissue transfer or rearrangement, any area; each additional 30.0 sq cm, or part thereof (List separately in addition to code for primary procedure)	1
14350	Filleted finger or toe flap, including preparation of recipient site	2
15040	Harvest of skin for tissue cultured skin autograft, 100 sq cm or less	1
15050	Pinch graft, single or multiple, to cover small ulcer, tip of digit, or other minimal open area (except on face), up to defect size 2 cm diameter	1
15100	Split-thickness autograft, trunk, arms, legs; first 100 sq cm or less, or 1% of body area of infants and children (except 15050)	1
15101	Split-thickness autograft, trunk, arms, legs; each additional 100 sq cm, or each additional 1% of body area of infants and children, or part thereof (List separately in addition to code for primary procedure)	1
15110	Epidermal autograft, trunk, arms, legs; first 100 sq cm or less, or 1% of body area of infants and children	1
15111	Epidermal autograft, trunk, arms, legs; each additional 100 sq cm, or each additional 1% of body area of infants and children, or part thereof (List separately in addition to code for primary procedure)	1
15115	Epidermal autograft, face, scalp, eyelids, mouth, neck, ears, orbits, genitalia, hands, feet, and/or multiple digits; first 100 sq cm or less, or 1% of body area of infants and children	1
15116	Epidermal autograft, face, scalp, eyelids, mouth, neck, ears, orbits, genitalia, hands, feet, and/or multiple digits; each additional 100 sq cm, or each additional 1% of body area of infants and children, or part thereof (List separately in addition to code for primary procedure)	1
15120	Split-thickness autograft, face, scalp, eyelids, mouth, neck, ears, orbits, genitalia, hands, feet, and/or multiple digits; first 100 sq cm or less, or 1% of body area of infants and children (except 15050)	1
15121	Split-thickness autograft, face, scalp, eyelids, mouth, neck, ears, orbits, genitalia, hands, feet, and/or multiple digits; each additional 100 sq cm, or each additional 1% of body area of infants and children, or part thereof (List separately in addition to code for primary procedure)	1
15130	Dermal autograft, trunk, arms, legs; first 100 sq cm or less, or 1% of body area of infants and children	1

15131	Dermal autograft, trunk, arms, legs; each additional 100 sq cm, or each additional 1% of body area of infants and children, or part thereof (List separately in addition to code for primary procedure)	1
15135	Dermal autograft, face, scalp, eyelids, mouth, neck, ears, orbits, genitalia, hands, feet, and/or multiple digits; first 100 sq cm or less, or 1% of body area of infants and children	1
15136	Dermal autograft, face, scalp, eyelids, mouth, neck, ears, orbits, genitalia, hands, feet, and/or multiple digits; each additional 100 sq cm, or each additional 1% of body area of infants and children, or part thereof (List separately in addition to code for primary procedure)	1
15150	Tissue cultured skin autograft, trunk, arms, legs; first 25 sq cm or less	1
15151	Tissue cultured skin autograft, trunk, arms, legs; additional 1 sq cm to 75 sq cm (List separately in addition to code for primary procedure)	1
15152	Tissue cultured skin autograft, trunk, arms, legs; each additional 100 sq cm, or each additional 1% of body area of infants and children, or part thereof (List separately in addition to code for primary procedure)	1
15155	Tissue cultured skin autograft, face, scalp, eyelids, mouth, neck, ears, orbits, genitalia, hands, feet, and/or multiple digits; first 25 sq cm or less	1
15156	Tissue cultured skin autograft, face, scalp, eyelids, mouth, neck, ears, orbits, genitalia, hands, feet, and/or multiple digits; additional 1 sq cm to 75 sq cm (List separately in addition to code for primary procedure)	1
15157	Tissue cultured skin autograft, face, scalp, eyelids, mouth, neck, ears, orbits, genitalia, hands, feet, and/or multiple digits; each additional 100 sq cm, or each additional 1% of body area of infants and children, or part thereof (List separately in addition to code for primary procedure)	1
15200	Full thickness graft, free, including direct closure of donor site, trunk; 20 sq cm or less	1
15201	Full thickness graft, free, including direct closure of donor site, trunk; each additional 20 sq cm, or part thereof (List separately in addition to code for primary procedure)	1
15220	Full thickness graft, free, including direct closure of donor site, scalp, arms, and/or legs; 20 sq cm or less	1
15221	Full thickness graft, free, including direct closure of donor site, scalp, arms, and/or legs; each additional 20 sq cm, or part thereof (List separately in addition to code for primary procedure)	1
15240	Full thickness graft, free, including direct closure of donor site, forehead, cheeks, chin, mouth, neck, axillae, genitalia, hands, and/or feet; 20 sq cm or less	1
15241	Full thickness graft, free, including direct closure of donor site, forehead, cheeks, chin, mouth, neck, axillae, genitalia, hands, and/or feet; each additional 20 sq cm, or part thereof (List separately in addition to code for primary procedure)	1
15260	Full thickness graft, free, including direct closure of donor site, nose, ears, eyelids, and/or lips; 20 sq cm or less	1

15261	Full thickness graft, free, including direct closure of donor site, nose, ears, eyelids, and/or lips; each additional 20 sq cm, or part thereof (List separately in addition to code for primary procedure)	1
15271	Application of skin substitute graft to trunk, arms, legs, total wound surface area up to 100 sq cm; first 25 sq cm or less wound surface area	1
15272	Application of skin substitute graft to trunk, arms, legs, total wound surface area up to 100 sq cm; each additional 25 sq cm wound surface area, or part thereof (List separately in addition to code for primary procedure)	1
15273	Application of skin substitute graft to trunk, arms, legs, total wound surface area greater than or equal to 100 sq cm; first 100 sq cm wound surface area, or 1% of body area of infants and children	1
15274	Application of skin substitute graft to trunk, arms, legs, total wound surface area greater than or equal to 100 sq cm; each additional 100 sq cm wound surface area, or part thereof, or each additional 1% of body area of infants and children, or part thereof (List separately in addition to code for primary procedure)	1
15275	Application of skin substitute graft to face, scalp, eyelids, mouth, neck, ears, orbits, genitalia, hands, feet, and/or multiple digits, total wound surface area up to 100 sq cm; first 25 sq cm or less wound surface area	1
15276	Application of skin substitute graft to face, scalp, eyelids, mouth, neck, ears, orbits, genitalia, hands, feet, and/or multiple digits, total wound surface area up to 100 sq cm; each additional 25 sq cm wound surface area, or part thereof (List separately in addition to code for primary procedure)	1
15277	Application of skin substitute graft to face, scalp, eyelids, mouth, neck, ears, orbits, genitalia, hands, feet, and/or multiple digits, total wound surface area greater than or equal to 100 sq cm; first 100 sq cm wound surface area, or 1% of body area of infants and children	1
15278	Application of skin substitute graft to face, scalp, eyelids, mouth, neck, ears, orbits, genitalia, hands, feet, and/or multiple digits, total wound surface area greater than or equal to 100 sq cm; each additional 100 sq cm wound surface area, or part thereof, or each additional 1% of body area of infants and children, or part thereof (List separately in addition to code for primary procedure)	1
15570	Formation of direct or tubed pedicle, with or without transfer; trunk	1
15572	Formation of direct or tubed pedicle, with or without transfer; scalp, arms, or legs	1
15574	Formation of direct or tubed pedicle, with or without transfer; forehead, cheeks, chin, mouth, neck, axillae, genitalia, hands or feet	1
15576	Formation of direct or tubed pedicle, with or without transfer; eyelids, nose, ears, lips, or intraoral	1
15600	Delay of flap or sectioning of flap (division and inset); at trunk	1
15610	Delay of flap or sectioning of flap (division and inset); at scalp, arms, or legs	1
15620	Delay of flap or sectioning of flap (division and inset); at forehead, cheeks, chin, neck, axillae, genitalia, hands, or feet	1
15630	Delay of flap or sectioning of flap (division and inset); at eyelids, nose, ears, or lips	1

15650	Transfer, intermediate, of any pedicle flap (eg, abdomen to wrist, Walking tube), any location	1
15730	Midface flap (ie, zygomaticofacial flap) with preservation of vascular pedicle(s)	1
15733	Muscle, myocutaneous, or fasciocutaneous flap; head and neck with named vascular pedicle (ie, buccinators, genioglossus, temporalis, masseter, sternocleidomastoid, levator scapulae)	1
15734	Muscle, myocutaneous, or fasciocutaneous flap; trunk	1
15736	Muscle, myocutaneous, or fasciocutaneous flap; upper extremity	2
15738	Muscle, myocutaneous, or fasciocutaneous flap; lower extremity	2
15740	Flap; island pedicle requiring identification and dissection of an anatomically named axial vessel	1
15750	Flap; neurovascular pedicle	1
15756	Free muscle or myocutaneous flap with microvascular anastomosis	1
15757	Free skin flap with microvascular anastomosis	1
15758	Free fascial flap with microvascular anastomosis	1
15760	Graft; composite (eg, full thickness of external ear or nasal ala), including primary closure, donor area	1
15769	Grafting of autologous soft tissue, other, harvested by direct excision (eg, fat, dermis, fascia)	1
15770	Graft; derma-fat-fascia	1
15771	Grafting of autologous fat harvested by liposuction technique to trunk, breasts, scalp, arms, and/or legs; 50 cc or less injectate	1
15772	Grafting of autologous fat harvested by liposuction technique to trunk, breasts, scalp, arms, and/or legs; each additional 50 cc injectate, or part thereof (List separately in addition to code for primary procedure)	1
15773	Grafting of autologous fat harvested by liposuction technique to face, eyelids, mouth, neck, ears, orbits, genitalia, hands, and/or feet; 25 cc or less injectate	1
15774	Grafting of autologous fat harvested by liposuction technique to face, eyelids, mouth, neck, ears, orbits, genitalia, hands, and/or feet; each additional 25 cc injectate, or part thereof (List separately in addition to code for primary procedure)	1
15775	Punch graft for hair transplant; 1 to 15 punch grafts	1
15776	Punch graft for hair transplant; more than 15 punch grafts	1
15777	Implantation of biologic implant (eg, acellular dermal matrix) for soft tissue reinforcement (ie, breast, trunk) (List separately in addition to code for primary procedure)	1
15780	Dermabrasion; total face (eg, for acne scarring, fine wrinkling, rhytids, general keratosis)	1
15781	Dermabrasion; segmental, face	1
15782	Dermabrasion; regional, other than face	1

15783	Dermabrasion; superficial, any site (eg, tattoo removal)	1
15786	Abrasion; single lesion (eg, keratosis, scar)	1
15787	Abrasion; each additional 4 lesions or less (List separately in addition to code for primary procedure)	2
15788	Chemical peel, facial; epidermal	1
15789	Chemical peel, facial; dermal	1
15792	Chemical peel, nonfacial; epidermal	1
15793	Chemical peel, nonfacial; dermal	1
15819	Cervicoplasty	1
15820	Blepharoplasty, lower eyelid	2
15821	Blepharoplasty, lower eyelid; with extensive herniated fat pad	2
15822	Blepharoplasty, upper eyelid	2
15823	Blepharoplasty, upper eyelid; with excessive skin weighting down lid	2
15824	Rhytidectomy; forehead	1
15825	Rhytidectomy; neck with platysmal tightening (platysmal flap, P-flap)	1
15826	Rhytidectomy; glabellar frown lines	1
15828	Rhytidectomy; cheek, chin, and neck	1
15829	Rhytidectomy; superficial musculoaponeurotic system (SMAS) flap	1
15832	Excision, excessive skin and subcutaneous tissue (includes lipectomy); thigh	1
15833	Excision, excessive skin and subcutaneous tissue (includes lipectomy); leg	1
15834	Excision, excessive skin and subcutaneous tissue (includes lipectomy); hip	1
15835	Excision, excessive skin and subcutaneous tissue (includes lipectomy); buttock	1
15836	Excision, excessive skin and subcutaneous tissue (includes lipectomy); arm	1
15837	Excision, excessive skin and subcutaneous tissue (includes lipectomy); forearm or hand	2
15838	Excision, excessive skin and subcutaneous tissue (includes lipectomy); submental fat pad	1
15839	Excision, excessive skin and subcutaneous tissue (includes lipectomy); other area	2
15840	Graft for facial nerve paralysis; free fascia graft (including obtaining fascia)	1
15841	Graft for facial nerve paralysis; free muscle graft (including obtaining graft)	1
15842	Graft for facial nerve paralysis; free muscle flap by microsurgical technique	1
15845	Graft for facial nerve paralysis; regional muscle transfer	1
15850	Removal of sutures under anesthesia (other than local), same surgeon	1
15851	Removal of sutures under anesthesia (other than local), other surgeon	1
15852	Dressing change (for other than burns) under anesthesia (other than local)	1

15060	Introveneus injection of agent less fluoressein) to test uses destination in flour sure.	1
15860	Intravenous injection of agent (eg, fluorescein) to test vascular flow in flap or graft	1
15876	Suction assisted lipectomy; head and neck	1
15877	Suction assisted lipectomy; trunk	1
15878	Suction assisted lipectomy; upper extremity	1
15879	Suction assisted lipectomy; lower extremity	1
15920	Excision, coccygeal pressure ulcer, with coccygectomy; with primary suture	1
15922	Excision, coccygeal pressure ulcer, with coccygectomy; with flap closure	1
15931	Excision, sacral pressure ulcer, with primary suture	1
15933	Excision, sacral pressure ulcer, with primary suture; with ostectomy	1
15934	Excision, sacral pressure ulcer, with skin flap closure	2
15935	Excision, sacral pressure ulcer, with skin flap closure; with ostectomy	1
15936	Excision, sacral pressure ulcer, in preparation for muscle or myocutaneous flap or skin graft closure	1
15937	Excision, sacral pressure ulcer, in preparation for muscle or myocutaneous flap or skin graft closure; with ostectomy	1
15940	Excision, ischial pressure ulcer, with primary suture	2
15941	Excision, ischial pressure ulcer, with primary suture; with ostectomy (ischiectomy)	1
15944	Excision, ischial pressure ulcer, with skin flap closure	1
15945	Excision, ischial pressure ulcer, with skin flap closure; with ostectomy	2
15946	Excision, ischial pressure ulcer, with ostectomy, in preparation for muscle or myocutaneous flap or skin graft closure	2
15950	Excision, trochanteric pressure ulcer, with primary suture	2
15951	Excision, trochanteric pressure ulcer, with primary suture; with ostectomy	1
15952	Excision, trochanteric pressure ulcer, with skin flap closure	2
15953	Excision, trochanteric pressure ulcer, with skin flap closure; with ostectomy	2
15956	Excision, trochanteric pressure ulcer, in preparation for muscle or myocutaneous flap or skin graft closure	1
15958	Excision, trochanteric pressure ulcer, in preparation for muscle or myocutaneous flap or skin graft closure; with ostectomy	1
15999	Unlisted procedure, excision pressure ulcer	1
16000	Initial treatment, first degree burn, when no more than local treatment is required	1
16020	Dressings and/or debridement of partial-thickness burns, initial or subsequent; small (less than 5% total body surface area)	1
16025	Dressings and/or debridement of partial-thickness burns, initial or subsequent; medium (eg, whole face or whole extremity, or 5% to 10% total body surface area)	1
16030	Dressings and/or debridement of partial-thickness burns, initial or subsequent; large (eg, more than 1 extremity, or greater than 10% total body surface area)	1

16035	Escharotomy; initial incision	1
16036	Escharotomy; each additional incision (List separately in addition to code for primary procedure)	1
17000	Destruction (eg, laser surgery, electrosurgery, cryosurgery, chemosurgery, surgical curettement), premalignant lesions (eg, actinic keratoses); first lesion	1
17003	Destruction (eg, laser surgery, electrosurgery, cryosurgery, chemosurgery, surgical curettement), premalignant lesions (eg, actinic keratoses); second through 14 lesions, each (List separately in addition to code for first lesion)	1
17004	Destruction (eg, laser surgery, electrosurgery, cryosurgery, chemosurgery, surgical curettement), premalignant lesions (eg, actinic keratoses), 15 or more lesions	1
17106	Destruction of cutaneous vascular proliferative lesions (eg, laser technique); less than 10 sq cm	1
17107	Destruction of cutaneous vascular proliferative lesions (eg, laser technique); 10.0 to 50.0 sq cm	1
17108	Destruction of cutaneous vascular proliferative lesions (eg, laser technique); over 50.0 sq cm	1
17110	Destruction (eg, laser surgery, electrosurgery, cryosurgery, chemosurgery, surgical curettement), of benign lesions other than skin tags or cutaneous vascular proliferative lesions; up to 14 lesions	1
17250	Chemical cauterization of granulation tissue (ie, proud flesh)	1
17260	Destruction, malignant lesion (eg, laser surgery, electrosurgery, cryosurgery, chemosurgery, surgical curettement), trunk, arms or legs; lesion diameter 0.5 cm or less	2
17261	Destruction, malignant lesion (eg, laser surgery, electrosurgery, cryosurgery, chemosurgery, surgical curettement), trunk, arms or legs; lesion diameter 0.6 to 1.0 cm	2
17262	Destruction, malignant lesion (eg, laser surgery, electrosurgery, cryosurgery, chemosurgery, surgical curettement), trunk, arms or legs; lesion diameter 1.1 to 2.0 cm	2
17263	Destruction, malignant lesion (eg, laser surgery, electrosurgery, cryosurgery, chemosurgery, surgical curettement), trunk, arms or legs; lesion diameter 2.1 to 3.0 cm	2
17264	Destruction, malignant lesion (eg, laser surgery, electrosurgery, cryosurgery, chemosurgery, surgical curettement), trunk, arms or legs; lesion diameter 3.1 to 4.0 cm	2
17266	Destruction, malignant lesion (eg, laser surgery, electrosurgery, cryosurgery, chemosurgery, surgical curettement), trunk, arms or legs; lesion diameter over 4.0 cm	2
17270	Destruction, malignant lesion (eg, laser surgery, electrosurgery, cryosurgery, chemosurgery, surgical curettement), scalp, neck, hands, feet, genitalia; lesion diameter 0.5 cm or less	1

17271	Destruction, malignant lesion (eg, laser surgery, electrosurgery, cryosurgery, chemosurgery, surgical curettement), scalp, neck, hands, feet, genitalia; lesion diameter 0.6 to 1.0 cm	1
17272	Destruction, malignant lesion (eg, laser surgery, electrosurgery, cryosurgery, chemosurgery, surgical curettement), scalp, neck, hands, feet, genitalia; lesion diameter 1.1 to 2.0 cm	1
17273	Destruction, malignant lesion (eg, laser surgery, electrosurgery, cryosurgery, chemosurgery, surgical curettement), scalp, neck, hands, feet, genitalia; lesion diameter 2.1 to 3.0 cm	1
17274	Destruction, malignant lesion (eg, laser surgery, electrosurgery, cryosurgery, chemosurgery, surgical curettement), scalp, neck, hands, feet, genitalia; lesion diameter 3.1 to 4.0 cm	1
17276	Destruction, malignant lesion (eg, laser surgery, electrosurgery, cryosurgery, chemosurgery, surgical curettement), scalp, neck, hands, feet, genitalia; lesion diameter over 4.0 cm	1
17280	Destruction, malignant lesion (eg, laser surgery, electrosurgery, cryosurgery, chemosurgery, surgical curettement), face, ears, eyelids, nose, lips, mucous membrane; lesion diameter 0.5 cm or less	2
17281	Destruction, malignant lesion (eg, laser surgery, electrosurgery, cryosurgery, chemosurgery, surgical curettement), face, ears, eyelids, nose, lips, mucous membrane; lesion diameter 0.6 to 1.0 cm	2
17282	Destruction, malignant lesion (eg, laser surgery, electrosurgery, cryosurgery, chemosurgery, surgical curettement), face, ears, eyelids, nose, lips, mucous membrane; lesion diameter 1.1 to 2.0 cm	2
17283	Destruction, malignant lesion (eg, laser surgery, electrosurgery, cryosurgery, chemosurgery, surgical curettement), face, ears, eyelids, nose, lips, mucous membrane; lesion diameter 2.1 to 3.0 cm	2
17284	Destruction, malignant lesion (eg, laser surgery, electrosurgery, cryosurgery, chemosurgery, surgical curettement), face, ears, eyelids, nose, lips, mucous membrane; lesion diameter 3.1 to 4.0 cm	2
17286	Destruction, malignant lesion (eg, laser surgery, electrosurgery, cryosurgery, chemosurgery, surgical curettement), face, ears, eyelids, nose, lips, mucous membrane; lesion diameter over 4.0 cm	2
17340	Cryotherapy (CO2 slush, liquid N2) for acne	1
17360	Chemical exfoliation for acne (eg, acne paste, acid)	1
17380	Electrolysis epilation, each 30 minutes	4
17999	Unlisted procedure, skin, mucous membrane and subcutaneous tissue	1
19000	Puncture aspiration of cyst of breast	1
19001	Puncture aspiration of cyst of breast; each additional cyst (List separately in addition to code for primary procedure)	1
19020	Mastotomy with exploration or drainage of abscess, deep	2
19030	Injection procedure only for mammary ductogram or galactogram	2

19081	Biopsy, breast, with placement of breast localization device(s) (eg, clip, metallic pellet), when performed, and imaging of the biopsy specimen, when performed, percutaneous; first lesion, including stereotactic guidance	1
19082	Biopsy, breast, with placement of breast localization device(s) (eg, clip, metallic pellet), when performed, and imaging of the biopsy specimen, when performed, percutaneous; each additional lesion, including stereotactic guidance (List separately in addition to code for primary procedure)	1
19083	Biopsy, breast, with placement of breast localization device(s) (eg, clip, metallic pellet), when performed, and imaging of the biopsy specimen, when performed, percutaneous; first lesion, including ultrasound guidance	1
19084	Biopsy, breast, with placement of breast localization device(s) (eg, clip, metallic pellet), when performed, and imaging of the biopsy specimen, when performed, percutaneous; each additional lesion, including ultrasound guidance (List separately in addition to code for primary procedure)	1
19085	Biopsy, breast, with placement of breast localization device(s) (eg, clip, metallic pellet), when performed, and imaging of the biopsy specimen, when performed, percutaneous; first lesion, including magnetic resonance guidance	1
19086	Biopsy, breast, with placement of breast localization device(s) (eg, clip, metallic pellet), when performed, and imaging of the biopsy specimen, when performed, percutaneous; each additional lesion, including magnetic resonance guidance (List separately in addition to code for primary procedure)	1
19100	Biopsy of breast; percutaneous, needle core, not using imaging guidance (separate procedure)	2
19101	Biopsy of breast; open, incisional	2
19110	Nipple exploration, with or without excision of a solitary lactiferous duct or a papilloma lactiferous duct	1
19112	Excision of lactiferous duct fistula	1
19120	Excision of cyst, fibroadenoma, or other benign or malignant tumor, aberrant breast tissue, duct lesion, nipple or areolar lesion (except 19300), open, male or female, 1 or more lesions	2
19125	Excision of breast lesion identified by preoperative placement of radiological marker, open; single lesion	1
19126	Excision of breast lesion identified by preoperative placement of radiological marker, open; each additional lesion separately identified by a preoperative radiological marker (List separately in addition to code for primary procedure)	1
19281	Placement of breast localization device(s) (eg, clip, metallic pellet, wire/needle, radioactive seeds), percutaneous; first lesion, including mammographic guidance	1
19282	Placement of breast localization device(s) (eg, clip, metallic pellet, wire/needle, radioactive seeds), percutaneous; each additional lesion, including mammographic guidance (List separately in addition to code for primary procedure)	1
19283	Placement of breast localization device(s) (eg, clip, metallic pellet, wire/needle, radioactive seeds), percutaneous; first lesion, including stereotactic guidance	1

19284	Placement of breast localization device(s) (eg, clip, metallic pellet, wire/needle, radioactive seeds), percutaneous; each additional lesion, including stereotactic guidance (List separately in addition to code for primary procedure)	1
19285	Placement of breast localization device(s) (eg, clip, metallic pellet, wire/needle, radioactive seeds), percutaneous; first lesion, including ultrasound guidance	1
19286	Placement of breast localization device(s) (eg, clip, metallic pellet, wire/needle, radioactive seeds), percutaneous; each additional lesion, including ultrasound guidance (List separately in addition to code for primary procedure)	1
19287	Placement of breast localization device(s) (eg clip, metallic pellet, wire/needle, radioactive seeds), percutaneous; first lesion, including magnetic resonance guidance	1
19288	Placement of breast localization device(s) (eg clip, metallic pellet, wire/needle, radioactive seeds), percutaneous; each additional lesion, including magnetic resonance guidance (List separately in addition to code for primary procedure)	1
19294	Preparation of tumor cavity, with placement of a radiation therapy applicator for intraoperative radiation therapy (IORT) concurrent with partial mastectomy (List separately in addition to code for primary procedure)	2
19296	Placement of radiotherapy afterloading expandable catheter (single or multichannel) into the breast for interstitial radioelement application following partial mastectomy, includes imaging guidance; on date separate from partial mastectomy	2
19297	Placement of radiotherapy afterloading expandable catheter (single or multichannel) into the breast for interstitial radioelement application following partial mastectomy, includes imaging guidance; concurrent with partial mastectomy (List separately in addition to code for primary procedure)	1
19298	Placement of radiotherapy after loading brachytherapy catheters (multiple tube and button type) into the breast for interstitial radioelement application following (at the time of or subsequent to) partial mastectomy, includes imaging guidance	2
19307	Mastectomy, modified radical, including axillary lymph nodes, with or without pectoralis minor muscle, but excluding pectoralis major muscle	2
19316	Mastopexy	1
19318	Breast reduction	2
19325	Breast augmentation with implant	2
19328	Removal of intact breast implant	2
19330	Removal of ruptured breast implant, including implant contents (eg, saline, silicone gel)	1
19340	Insertion of breast implant on same day of mastectomy (ie, immediate)	2
19342	Insertion or replacement of breast implant on separate day from mastectomy	2
19350	Nipple/areola reconstruction	2
19355	Correction of inverted nipples	1
19357	Tissue expander placement in breast reconstruction, including subsequent expansion(s)	2

10261	Duncat was a standard with latinian and and flow	2
19361	Breast reconstruction; with latissimus dorsi flap	2
19364	Breast reconstruction; with free flap (eg, fTRAM, DIEP, SIEA, GAP flap)	2
19367	Breast reconstruction; with single-pedicled transverse rectus abdominis myocutaneous (TRAM) flap	2
19368	Breast reconstruction; with single-pedicled transverse rectus abdominis myocutaneous (TRAM) flap, requiring separate microvascular anastomosis (supercharging)	2
19369	Breast reconstruction; with bipedicled transverse rectus abdominis myocutaneous (TRAM) flap	2
19370	Revision of peri-implant capsule, breast, including capsulotomy, capsulorrhaphy, and/or partial capsulectomy	2
19371	Peri-implant capsulectomy, breast, complete, including removal of all intracapsular contents	2
19380	Revision of reconstructed breast (eg, significant removal of tissue, re-advancement and/or re-inset of flaps in autologous reconstruction or significant capsular revision combined with soft tissue excision in implant-based reconstruction)	2
19396	Preparation of moulage for custom breast implant	1
19499	Unlisted procedure, breast	1
20100	Exploration of penetrating wound (separate procedure); neck	1
20101	Exploration of penetrating wound (separate procedure); chest	1
20102	Exploration of penetrating wound (separate procedure); abdomen/flank/back	1
20103	Exploration of penetrating wound (separate procedure); extremity	2
20150	Excision of epiphyseal bar, with or without autogenous soft tissue graft obtained through same fascial incision	1
20200	Biopsy, muscle; superficial	20
20205	Biopsy, muscle; deep	20
20206	Biopsy, muscle, percutaneous needle	20
20220	Biopsy, bone, trocar, or needle; superficial (eg, ilium, sternum, spinous process, ribs)	1
20225	Biopsy, bone, trocar, or needle; deep (eg, vertebral body, femur)	2
20240	Biopsy, bone, open; superficial (eg, sternum, spinous process, rib, patella, olecranon process, calcaneus, tarsal, metatarsal, carpal, metacarpal, phalanx)	1
20245	Biopsy, bone, open; deep (eg, humeral shaft, ischium, femoral shaft)	1
20250	Biopsy, vertebral body, open; thoracic	1
20251	Biopsy, vertebral body, open; lumbar or cervical	1
20500	Injection of sinus tract; therapeutic (separate procedure)	1
20501	Injection of sinus tract; diagnostic (sinogram)	1
	Removal of foreign body in muscle or tendon sheath; simple	2
20520		

Injection, therapeutic (eg, local anesthetic, corticosteroid), carpal tunnel	1
Injection, enzyme (eg, collagenase), palmar fascial cord (ie, Dupuytren's contracture)	2
Injection(s); single tendon sheath, or ligament, aponeurosis (eg, plantar "fascia")	1
Injection(s); single tendon origin/insertion	1
Injection(s); single or multiple trigger point(s), 1 or 2 muscle(s)	1
Injection(s); single or multiple trigger point(s), 3 or more muscles	1
Placement of needles or catheters into muscle and/or soft tissue for subsequent interstitial radioelement application (at the time of or subsequent to the procedure)	1
Needle insertion(s) without injection(s); 1 or 2 muscle(s)	1
Needle insertion(s) without injection(s); 3 or more muscles	1
Arthrocentesis, aspiration and/or injection, small joint or bursa (eg, fingers, toes); without ultrasound guidance	2
Arthrocentesis, aspiration and/or injection, small joint or bursa (eg, fingers, toes); with ultrasound guidance, with permanent recording and reporting	2
Arthrocentesis, aspiration and/or injection, intermediate joint or bursa (eg, temporomandibular, acromioclavicular, wrist, elbow or ankle, olecranon bursa); without ultrasound guidance	2
Arthrocentesis, aspiration and/or injection, intermediate joint or bursa (eg, temporomandibular, acromioclavicular, wrist, elbow or ankle, olecranon bursa); with ultrasound guidance, with permanent recording and reporting	2
Arthrocentesis, aspiration and/or injection, major joint or bursa (eg, shoulder, hip, knee, subacromial bursa); without ultrasound guidance	2
Arthrocentesis, aspiration and/or injection, major joint or bursa (eg, shoulder, hip, knee, subacromial bursa); with ultrasound guidance, with permanent recording and reporting	2
Aspiration and/or injection of ganglion cyst(s) any location	1
Aspiration and injection for treatment of bone cyst	1
Insertion of wire or pin with application of skeletal traction, including removal (separate procedure)	1
Application of cranial tongs, caliper, or stereotactic frame, including removal (separate procedure)	1
Application of halo, including removal; cranial	1
Application of halo, including removal; pelvic	1
Application of halo, including removal; femoral	1
Application of halo, including removal, cranial, 6 or more pins placed, for thin skull osteology (eg, pediatric patients, hydrocephalus, osteogenesis imperfecta)	1
Removal of tongs or halo applied by another individual	1
Removal of implant; superficial (eg, buried wire, pin or rod) (separate procedure)	4
	Injection, enzyme (eg, collagenase), palmar fascial cord (ie, Dupuytren's contracture) Injection(s); single tendon sheath, or ligament, aponeurosis (eg, plantar "fascia") Injection(s); single tendon origin/insertion Injection(s); single or multiple trigger point(s), 1 or 2 muscle(s) Injection(s); single or multiple trigger point(s), 3 or more muscles Placement of needles or catheters into muscle and/or soft tissue for subsequent interstitial radioelement application (at the time of or subsequent to the procedure) Needle insertion(s) without injection(s); 1 or 2 muscle(s) Needle insertion(s) without injection(s); 3 or more muscles Arthrocentesis, aspiration and/or injection, small joint or bursa (eg, fingers, toes); without ultrasound guidance Arthrocentesis, aspiration and/or injection, small joint or bursa (eg, fingers, toes); with ultrasound guidance, with permanent recording and reporting Arthrocentesis, aspiration and/or injection, intermediate joint or bursa (eg, temporomandibular, acromioclavicular, wrist, elbow or ankle, olecranon bursa); without ultrasound guidance Arthrocentesis, aspiration and/or injection, intermediate joint or bursa (eg, temporomandibular, acromioclavicular, wrist, elbow or ankle, olecranon bursa); without ultrasound guidance Arthrocentesis, aspiration and/or injection, intermediate joint or bursa (eg, temporomandibular, acromioclavicular, wrist, elbow or ankle, olecranon bursa); with ultrasound guidance, with permanent recording and reporting Arthrocentesis, aspiration and/or injection, major joint or bursa (eg, shoulder, hip, knee, subacromial bursa); with ultrasound guidance Arthrocentesis, aspiration and/or injection, major joint or bursa (eg, shoulder, hip, knee, subacromial bursa); with ultrasound guidance Arthrocentesis, aspiration and/or injection, major joint or bursa (eg, shoulder, hip, knee, subacromial bursa); with ultrasound guidance Arthrocentesis, aspiration and/or injection, major joint or bursa (eg, shoulder, hip, knee, subacromial bursa); with ultra

20680	Removal of implant; deep (eg, buried wire, pin, screw, metal band, nail, rod or plate)	2
20690	Application of a uniplane (pins or wires in 1 plane), unilateral, external fixation system	1
20692	Application of a multiplane (pins or wires in more than 1 plane), unilateral, external fixation system (eg, Ilizarov, Monticelli type)	1
20693	Adjustment or revision of external fixation system requiring anesthesia (eg, new pin[s] or wire[s] and/or new ring[s] or bar[s])	1
20694	Removal, under anesthesia, of external fixation system	1
20696	Application of multiplane (pins or wires in more than 1 plane), unilateral, external fixation with stereotactic computer-assisted adjustment (eg, spatial frame), including imaging; initial and subsequent alignment(s), assessment(s), and computation(s) of adjustment schedule(s)	2
20697	Application of multiplane (pins or wires in more than 1 plane), unilateral, external fixation with stereotactic computer-assisted adjustment (eg, spatial frame), including imaging; exchange (ie, removal and replacement) of strut, each	2
20700	Manual preparation and insertion of drug-delivery device(s), deep (eg, subfascial) (List separately in addition to code for primary procedure)	1
20701	Removal of drug-delivery device(s), deep (eg, subfascial) (List separately in addition to code for primary procedure)	1
20702	Manual preparation and insertion of drug-delivery device(s), intramedullary (List separately in addition to code for primary procedure)	1
20703	Removal of drug-delivery device(s), intramedullary (List separately in addition to code for primary procedure)	1
20704	Manual preparation and insertion of drug-delivery device(s), intra-articular (List separately in addition to code for primary procedure)	1
20705	Removal of drug-delivery device(s), intra-articular (List separately in addition to code for primary procedure)	1
20802	Replantation, arm (includes surgical neck of humerus through elbow joint), complete amputation	2
20805	Replantation, forearm (includes radius and ulna to radial carpal joint), complete amputation	2
20808	Replantation, hand (includes hand through metacarpophalangeal joints), complete amputation	2
20816	Replantation, digit, excluding thumb (includes metacarpophalangeal joint to insertion of flexor sublimis tendon), complete amputation	2
20822	Replantation, digit, excluding thumb (includes distal tip to sublimis tendon insertion), complete amputation	2
20824	Replantation, thumb (includes carpometacarpal joint to MP joint), complete amputation	2
20827	Replantation, thumb (includes distal tip to MP joint), complete amputation	2

20838	Replantation, foot, complete amputation	2
20900	Bone graft, any donor area; minor or small (eg, dowel or button)	1
20902	Bone graft, any donor area; major or large	1
20910	Cartilage graft; costochondral	1
20912	Cartilage graft; nasal septum	1
20920	Fascia lata graft; by stripper	1
20922	Fascia lata graft; by incision and area exposure, complex or sheet	1
20924	Tendon graft, from a distance (eg, palmaris, toe extensor, plantaris)	1
20930	Allograft, morselized, or placement of osteopromotive material, for spine surgery only (List separately in addition to code for primary procedure)	1
20931	Allograft, structural, for spine surgery only (List separately in addition to code for primary procedure)	1
20932	Allograft, includes templating, cutting, placement and internal fixation, when performed; osteoarticular, including articular surface and contiguous bone (List separately in addition to code for primary procedure)	1
20933	Allograft, includes templating, cutting, placement and internal fixation, when performed; hemicortical intercalary, partial (ie, hemicylindrical) (List separately in addition to code for primary procedure)	1
20934	Allograft, includes templating, cutting, placement and internal fixation, when performed; intercalary, complete (ie, cylindrical) (List separately in addition to code for primary procedure)	1
20936	Autograft for spine surgery only (includes harvesting the graft); local (eg, ribs, spinous process, or laminar fragments) obtained from same incision (List separately in addition to code for primary procedure)	1
20937	Autograft for spine surgery only (includes harvesting the graft); morselized (through separate skin or fascial incision) (List separately in addition to code for primary procedure)	1
20938	Autograft for spine surgery only (includes harvesting the graft); structural, bicortical or tricortical (through separate skin or fascial incision) (List separately in addition to code for primary procedure)	1
20939	Bone marrow aspiration for bone grafting, spine surgery only, through separate skin or fascial incision (List separately in addition to code for primary procedure)	1
20950	Monitoring of interstitial fluid pressure (includes insertion of device, eg, wick catheter technique, needle manometer technique) in detection of muscle compartment syndrome	1
20955	Bone graft with microvascular anastomosis; fibula	1
20956	Bone graft with microvascular anastomosis; iliac crest	1
20957	Bone graft with microvascular anastomosis; metatarsal	1
20962	Bone graft with microvascular anastomosis; other than fibula, iliac crest, or metatarsal	1

20969	Free osteocutaneous flap with microvascular anastomosis; other than iliac crest, metatarsal, or great toe	1
20970	Free osteocutaneous flap with microvascular anastomosis; iliac crest	1
20972	Free osteocutaneous flap with microvascular anastomosis; metatarsal	1
20973	Free osteocutaneous flap with microvascular anastomosis; great toe with web space	1
20974	Electrical stimulation to aid bone healing; noninvasive (nonoperative)	1
20975	Electrical stimulation to aid bone healing; invasive (operative)	1
20979	Low intensity ultrasound stimulation to aid bone healing, noninvasive (nonoperative)	1
20982	Ablation therapy for reduction or eradication of 1 or more bone tumors (eg, metastasis) including adjacent soft tissue when involved by tumor extension, percutaneous, including imaging guidance when performed; radiofrequency	1
20983	Ablation therapy for reduction or eradication of 1 or more bone tumors (eg, metastasis) including adjacent soft tissue when involved by tumor extension, percutaneous, including imaging guidance when performed; cryoablation	1
20985	Computer-assisted surgical navigational procedure for musculoskeletal procedures, image-less (List separately in addition to code for primary procedure)	2
20999	Unlisted procedure, musculoskeletal system, general	1
21010	Arthrotomy, temporomandibular joint	2
21011	Excision, tumor, soft tissue of face or scalp, subcutaneous; less than 2 cm	1
21012	Excision, tumor, soft tissue of face or scalp, subcutaneous; 2 cm or greater	1
21013	Excision, tumor, soft tissue of face and scalp, subfascial (eg, subgaleal, intramuscular); less than 2 cm	1
21014	Excision, tumor, soft tissue of face and scalp, subfascial (eg, subgaleal, intramuscular); 2 cm or greater	1
21015	Radical resection of tumor (eg, sarcoma), soft tissue of face or scalp; less than 2 cm	1
21016	Radical resection of tumor (eg, sarcoma), soft tissue of face or scalp; 2 cm or greater	1
21025	Excision of bone (eg, for osteomyelitis or bone abscess); mandible	1
21026	Excision of bone (eg, for osteomyelitis or bone abscess); facial bone(s)	1
21029	Removal by contouring of benign tumor of facial bone (eg, fibrous dysplasia)	1
21030	Excision of benign tumor or cyst of maxilla or zygoma by enucleation and curettage	1
21031	Excision of torus mandibularis	2
21032	Excision of maxillary torus palatinus	1
21034	Excision of malignant tumor of maxilla or zygoma	1
21040	Excision of benign tumor or cyst of mandible, by enucleation and/or curettage	1
21044	Excision of malignant tumor of mandible	1
21045	Excision of malignant tumor of mandible; radical resection	1

21046	Excision of benign tumor or cyst of mandible; requiring intra-oral osteotomy (eg, locally aggressive or destructive lesion[s])	1
21047	Excision of benign tumor or cyst of mandible; requiring extra-oral osteotomy and partial mandibulectomy (eg, locally aggressive or destructive lesion[s])	1
21048	Excision of benign tumor or cyst of maxilla; requiring intra-oral osteotomy (eg, locally aggressive or destructive lesion[s])	1
21049	Excision of benign tumor or cyst of maxilla; requiring extra-oral osteotomy and partial maxillectomy (eg, locally aggressive or destructive lesion[s])	1
21050	Condylectomy, temporomandibular joint (separate procedure)	2
21060	Meniscectomy, partial or complete, temporomandibular joint (separate procedure)	1
21070	Coronoidectomy (separate procedure)	1
21073	Manipulation of temporomandibular joint(s) (TMJ), therapeutic, requiring an anesthesia service (ie, general or monitored anesthesia care)	2
21076	Impression and custom preparation; surgical obturator prosthesis	1
21077	Impression and custom preparation; orbital prosthesis	1
21079	Impression and custom preparation; interim obturator prosthesis	1
21080	Impression and custom preparation; definitive obturator prosthesis	1
21081	Impression and custom preparation; mandibular resection prosthesis	1
21082	Impression and custom preparation; palatal augmentation prosthesis	1
21083	Impression and custom preparation; palatal lift prosthesis	1
21084	Impression and custom preparation; speech aid prosthesis	1
21085	Impression and custom preparation; oral surgical splint	1
21086	Impression and custom preparation; auricular prosthesis	1
21087	Impression and custom preparation; nasal prosthesis	1
21088	Impression and custom preparation; facial prosthesis	1
21089	Unlisted maxillofacial prosthetic procedure	1
21100	Application of halo type appliance for maxillofacial fixation, includes removal (separate procedure)	1
21110	Application of interdental fixation device for conditions other than fracture or dislocation, includes removal	2
21116	Injection procedure for temporomandibular joint arthrography	1
21120	Genioplasty; augmentation (autograft, allograft, prosthetic material)	1
21121	Genioplasty; sliding osteotomy, single piece	1
21122	Genioplasty; sliding osteotomies, 2 or more osteotomies (eg, wedge excision or bone wedge reversal for asymmetrical chin)	1
21123	Genioplasty; sliding, augmentation with interpositional bone grafts (includes obtaining autografts)	1

21125	Augmentation, mandibular body or angle; prosthetic material	1
21127	Augmentation, mandibular body or angle; with bone graft, onlay or interpositional (includes obtaining autograft)	1
21137	Reduction forehead; contouring only	1
21138	Reduction forehead; contouring and application of prosthetic material or bone graft (includes obtaining autograft)	1
21139	Reduction forehead; contouring and setback of anterior frontal sinus wall	1
21141	Reconstruction midface, LeFort I; single piece, segment movement in any direction (eg, for Long Face Syndrome), without bone graft	1
21142	Reconstruction midface, LeFort I; 2 pieces, segment movement in any direction, without bone graft	1
21143	Reconstruction midface, LeFort I; 3 or more pieces, segment movement in any direction, without bone graft	1
21145	Reconstruction midface, LeFort I; single piece, segment movement in any direction, requiring bone grafts (includes obtaining autografts)	1
21146	Reconstruction midface, LeFort I; 2 pieces, segment movement in any direction, requiring bone grafts (includes obtaining autografts) (eg, ungrafted unilateral alveolar cleft)	1
21147	Reconstruction midface, LeFort I; 3 or more pieces, segment movement in any direction, requiring bone grafts (includes obtaining autografts) (eg, ungrafted bilateral alveolar cleft or multiple osteotomies)	1
21150	Reconstruction midface, LeFort II; anterior intrusion (eg, Treacher-Collins Syndrome)	1
21151	Reconstruction midface, LeFort II; any direction, requiring bone grafts (includes obtaining autografts)	1
21154	Reconstruction midface, LeFort III (extracranial), any type, requiring bone grafts (includes obtaining autografts); without LeFort I	1
21155	Reconstruction midface, LeFort III (extracranial), any type, requiring bone grafts (includes obtaining autografts); with LeFort I	1
21159	Reconstruction midface, LeFort III (extra and intracranial) with forehead advancement (eg, mono bloc), requiring bone grafts (includes obtaining autografts); without LeFort I	1
21160	Reconstruction midface, LeFort III (extra and intracranial) with forehead advancement (eg, mono bloc), requiring bone grafts (includes obtaining autografts); with LeFort I	1
21172	Reconstruction superior-lateral orbital rim and lower forehead, advancement or alteration, with or without grafts (includes obtaining autografts)	1
21175	Reconstruction, bifrontal, superior-lateral orbital rims and lower forehead, advancement or alteration (eg, plagiocephaly, trigonocephaly, brachycephaly), with or without grafts (includes obtaining autografts)	1
21179	Reconstruction, entire or majority of forehead and/or supraorbital rims; with grafts (allograft or prosthetic material)	1

21180	Reconstruction, entire or majority of forehead and/or supraorbital rims; with autograft (includes obtaining grafts)	1
21181	Reconstruction by contouring of benign tumor of cranial bones (eg, fibrous dysplasia), extracranial	1
21182	Reconstruction of orbital walls, rims, forehead, nasoethmoid complex following intra- and extracranial excision of benign tumor of cranial bone (eg, fibrous dysplasia), with multiple autografts (includes obtaining grafts); total area of bone grafting less than 40 sq cm	1
21183	Reconstruction of orbital walls, rims, forehead, nasoethmoid complex following intra- and extracranial excision of benign tumor of cranial bone (eg, fibrous dysplasia), with multiple autografts (includes obtaining grafts); total area of bone grafting greater than 40 sq cm but less than 80 sq cm	1
21184	Reconstruction of orbital walls, rims, forehead, nasoethmoid complex following intra- and extracranial excision of benign tumor of cranial bone (eg, fibrous dysplasia), with multiple autografts (includes obtaining grafts); total area of bone grafting greater than 80 sq cm	1
21188	Reconstruction midface, osteotomies (other than LeFort type) and bone grafts (includes obtaining autografts)	1
21193	Reconstruction of mandibular rami, horizontal, vertical, C, or L osteotomy; without bone graft	1
21194	Reconstruction of mandibular rami, horizontal, vertical, C, or L osteotomy; with bone graft (includes obtaining graft)	1
21195	Reconstruction of mandibular rami and/or body, sagittal split; without internal rigid fixation	1
21196	Reconstruction of mandibular rami and/or body, sagittal split; with internal rigid fixation	1
21198	Osteotomy, mandible, segmental	1
21199	Osteotomy, mandible, segmental; with genioglossus advancement	1
21206	Osteotomy, maxilla, segmental (eg, Wassmund or Schuchard)	1
21208	Osteoplasty, facial bones; augmentation (autograft, allograft, or prosthetic implant)	1
21209	Osteoplasty, facial bones; reduction	1
21210	Graft, bone; nasal, maxillary or malar areas (includes obtaining graft)	1
21215	Graft, bone; mandible (includes obtaining graft)	1
21230	Graft; rib cartilage, autogenous, to face, chin, nose or ear (includes obtaining graft)	1
21235	Graft; ear cartilage, autogenous, to nose or ear (includes obtaining graft)	1
21240	Arthroplasty, temporomandibular joint, with or without autograft (includes obtaining graft)	1
21242	Arthroplasty, temporomandibular joint, with allograft	1
21243	Arthroplasty, temporomandibular joint, with prosthetic joint replacement	2

21244	Reconstruction of mandible, extraoral, with transosteal bone plate (eg, mandibular	1
21244	staple bone plate)	_
21245	Reconstruction of mandible or maxilla, subperiosteal implant; partial	2
21246	Reconstruction of mandible or maxilla, subperiosteal implant; complete	1
21247	Reconstruction of mandibular condyle with bone and cartilage autografts (includes obtaining grafts) (eg, for hemifacial microsomia)	2
21248	Reconstruction of mandible or maxilla, endosteal implant (eg, blade, cylinder); partial	2
21249	Reconstruction of mandible or maxilla, endosteal implant (eg, blade, cylinder); complete	2
21255	Reconstruction of zygomatic arch and glenoid fossa with bone and cartilage (includes obtaining autografts)	2
21256	Reconstruction of orbit with osteotomies (extracranial) and with bone grafts (includes obtaining autografts) (eg, micro-ophthalmia)	1
21260	Periorbital osteotomies for orbital hypertelorism, with bone grafts; extracranial approach	1
21261	Periorbital osteotomies for orbital hypertelorism, with bone grafts; combined intra- and extracranial approach	1
21263	Periorbital osteotomies for orbital hypertelorism, with bone grafts; with forehead advancement	1
21267	Orbital repositioning, periorbital osteotomies, unilateral, with bone grafts; extracranial approach	1
21268	Orbital repositioning, periorbital osteotomies, unilateral, with bone grafts; combined intra- and extracranial approach	1
21270	Malar augmentation, prosthetic material	1
21275	Secondary revision of orbitocraniofacial reconstruction	1
21280	Medial canthopexy (separate procedure)	2
21282	Lateral canthopexy	2
21295	Reduction of masseter muscle and bone (eg, for treatment of benign masseteric hypertrophy); extraoral approach	2
21296	Reduction of masseter muscle and bone (eg, for treatment of benign masseteric hypertrophy); intraoral approach	2
21299	Unlisted craniofacial and maxillofacial procedure	1
21310	Closed treatment of nasal bone fracture without manipulation	1
21315	Closed treatment of nasal bone fracture with manipulation; without stabilization	1
21320	Closed treatment of nasal bone fracture with manipulation; with stabilization	1
21325	Open treatment of nasal fracture; uncomplicated	1
21330	Open treatment of nasal fracture; complicated, with internal and/or external skeletal fixation	1

21335	Open treatment of nasal fracture; with concomitant open treatment of fractured septum	1
21336	Open treatment of nasal septal fracture, with or without stabilization	1
21337	Closed treatment of nasal septal fracture, with or without stabilization	1
21338	Open treatment of nasoethmoid fracture; without external fixation	1
21339	Open treatment of nasoethmoid fracture; with external fixation	1
21340	Percutaneous treatment of nasoethmoid complex fracture, with splint, wire or headcap fixation, including repair of canthal ligaments and/or the nasolacrimal apparatus	1
21343	Open treatment of depressed frontal sinus fracture	1
21344	Open treatment of complicated (eg, comminuted or involving posterior wall) frontal sinus fracture, via coronal or multiple approaches	1
21345	Closed treatment of nasomaxillary complex fracture (LeFort II type), with interdental wire fixation or fixation of denture or splint	1
21346	Open treatment of nasomaxillary complex fracture (LeFort II type); with wiring and/or local fixation	1
21347	Open treatment of nasomaxillary complex fracture (LeFort II type); requiring multiple open approaches	1
21348	Open treatment of nasomaxillary complex fracture (LeFort II type); with bone grafting (includes obtaining graft)	1
21355	Percutaneous treatment of fracture of malar area, including zygomatic arch and malar tripod, with manipulation	1
21356	Open treatment of depressed zygomatic arch fracture (eg, Gillies approach)	2
21360	Open treatment of depressed malar fracture, including zygomatic arch and malar tripod	1
21365	Open treatment of complicated (eg, comminuted or involving cranial nerve foramina) fracture(s) of malar area, including zygomatic arch and malar tripod; with internal fixation and multiple surgical approaches	1
21366	Open treatment of complicated (eg, comminuted or involving cranial nerve foramina) fracture(s) of malar area, including zygomatic arch and malar tripod; with bone grafting (includes obtaining graft)	2
21385	Open treatment of orbital floor blowout fracture; transantral approach (Caldwell-Luc type operation)	1
21386	Open treatment of orbital floor blowout fracture; periorbital approach	1
21387	Open treatment of orbital floor blowout fracture; combined approach	2
21390	Open treatment of orbital floor blowout fracture; periorbital approach, with alloplastic or other implant	1
21395	Open treatment of orbital floor blowout fracture; periorbital approach with bone graft (includes obtaining graft)	1
21400	Closed treatment of fracture of orbit, except blowout; without manipulation	1

21401	Closed treatment of fracture of orbit, except blowout; with manipulation	1
21406	Open treatment of fracture of orbit, except blowout; without implant	2
21407	Open treatment of fracture of orbit, except blowout; with implant	1
21408	Open treatment of fracture of orbit, except blowout; with bone grafting (includes obtaining graft)	1
21421	Closed treatment of palatal or maxillary fracture (LeFort I type), with interdental wire fixation or fixation of denture or splint	1
21422	Open treatment of palatal or maxillary fracture (LeFort I type)	1
21423	Open treatment of palatal or maxillary fracture (LeFort I type); complicated (comminuted or involving cranial nerve foramina), multiple approaches	1
21431	Closed treatment of craniofacial separation (LeFort III type) using interdental wire fixation of denture or splint	1
21432	Open treatment of craniofacial separation (LeFort III type); with wiring and/or internal fixation	1
21433	Open treatment of craniofacial separation (LeFort III type); complicated (eg, comminuted or involving cranial nerve foramina), multiple surgical approaches	1
21435	Open treatment of craniofacial separation (LeFort III type); complicated, utilizing internal and/or external fixation techniques (eg, head cap, halo device, and/or intermaxillary fixation)	1
21436	Open treatment of craniofacial separation (LeFort III type); complicated, multiple surgical approaches, internal fixation, with bone grafting (includes obtaining graft)	1
21440	Closed treatment of mandibular or maxillary alveolar ridge fracture (separate procedure)	2
21445	Open treatment of mandibular or maxillary alveolar ridge fracture (separate procedure)	2
21450	Closed treatment of mandibular fracture; without manipulation	1
21451	Closed treatment of mandibular fracture; with manipulation	1
21452	Percutaneous treatment of mandibular fracture, with external fixation	1
21453	Closed treatment of mandibular fracture with interdental fixation	1
21454	Open treatment of mandibular fracture with external fixation	1
21461	Open treatment of mandibular fracture; without interdental fixation	1
21462	Open treatment of mandibular fracture; with interdental fixation	1
21465	Open treatment of mandibular condylar fracture	1
21470	Open treatment of complicated mandibular fracture by multiple surgical approaches including internal fixation, interdental fixation, and/or wiring of dentures or splints	1
21480	Closed treatment of temporomandibular dislocation; initial or subsequent	1
21485	Closed treatment of temporomandibular dislocation; complicated (eg, recurrent requiring intermaxillary fixation or splinting), initial or subsequent	1

21490	Open treatment of temporomandibular dislocation	1
21497	Interdental wiring, for condition other than fracture	1
21499	Unlisted musculoskeletal procedure, head	1
21501	Incision and drainage, deep abscess or hematoma, soft tissues of neck or thorax	1
21502	Incision and drainage, deep abscess or hematoma, soft tissues of neck or thorax; with partial rib ostectomy	1
21510	Incision, deep, with opening of bone cortex (eg, for osteomyelitis or bone abscess), thorax	1
21550	Biopsy, soft tissue of neck or thorax	1
21552	Excision, tumor, soft tissue of neck or anterior thorax, subcutaneous; 3 cm or greater	1
21554	Excision, tumor, soft tissue of neck or anterior thorax, subfascial (eg, intramuscular); 5 cm or greater	1
21555	Excision, tumor, soft tissue of neck or anterior thorax, subcutaneous; less than 3 cm	1
21556	Excision, tumor, soft tissue of neck or anterior thorax, subfascial (eg, intramuscular); less than 5 cm	1
21557	Radical resection of tumor (eg, sarcoma), soft tissue of neck or anterior thorax; less than 5 cm	1
21558	Radical resection of tumor (eg, sarcoma), soft tissue of neck or anterior thorax; 5 cm or greater	1
21600	Excision of rib, partial	1
21601	Excision of chest wall tumor including rib(s)	1
21602	Excision of chest wall tumor involving rib(s), with plastic reconstruction; without mediastinal lymphadenectomy	1
21603	Excision of chest wall tumor involving rib(s), with plastic reconstruction; with mediastinal lymphadenectomy	1
21610	Costotransversectomy (separate procedure)	1
21615	Excision first and/or cervical rib	2
21616	Excision first and/or cervical rib; with sympathectomy	2
21620	Ostectomy of sternum, partial	1
21627	Sternal debridement	1
21630	Radical resection of sternum	1
21632	Radical resection of sternum; with mediastinal lymphadenectomy	1
21685	Hyoid myotomy and suspension	1
21700	Division of scalenus anticus; without resection of cervical rib	1
21705	Division of scalenus anticus; with resection of cervical rib	1
21720	Division of sternocleidomastoid for torticollis, open operation; without cast application	1

21725	Division of sternocleidomastoid for torticollis, open operation; with cast application	1
21740	Reconstructive repair of pectus excavatum or carinatum; open	1
21742	Reconstructive repair of pectus excavatum or carinatum; minimally invasive approach (Nuss procedure), without thoracoscopy	1
21743	Reconstructive repair of pectus excavatum or carinatum; minimally invasive approach (Nuss procedure), with thoracoscopy	1
21750	Closure of median sternotomy separation with or without debridement (separate procedure)	1
21811	Open treatment of rib fracture(s) with internal fixation, includes thoracoscopic visualization when performed, unilateral; 1-3 ribs	1
21812	Open treatment of rib fracture(s) with internal fixation, includes thoracoscopic visualization when performed, unilateral; 4-6 ribs	1
21813	Open treatment of rib fracture(s) with internal fixation, includes thoracoscopic visualization when performed, unilateral; 7 or more ribs	1
21820	Closed treatment of sternum fracture	1
21825	Open treatment of sternum fracture with or without skeletal fixation	1
21899	Unlisted procedure, neck or thorax	1
21920	Biopsy, soft tissue of back or flank; superficial	1
21925	Biopsy, soft tissue of back or flank; deep	1
21930	Excision, tumor, soft tissue of back or flank, subcutaneous; less than 3 cm	1
21931	Excision, tumor, soft tissue of back or flank, subcutaneous; 3 cm or greater	1
21932	Excision, tumor, soft tissue of back or flank, subfascial (eg, intramuscular); less than 5 cm	1
21933	Excision, tumor, soft tissue of back or flank, subfascial (eg, intramuscular); 5 cm or greater	1
21935	Radical resection of tumor (eg, sarcoma), soft tissue of back or flank; less than 5 cm	1
21936	Radical resection of tumor (eg, sarcoma), soft tissue of back or flank; 5 cm or greater	1
22010	Incision and drainage, open, of deep abscess (subfascial), posterior spine; cervical, thoracic, or cervicothoracic	1
22015	Incision and drainage, open, of deep abscess (subfascial), posterior spine; lumbar, sacral, or lumbosacral	1
22100	Partial excision of posterior vertebral component (eg, spinous process, lamina or facet) for intrinsic bony lesion, single vertebral segment; cervical	1
22101	Partial excision of posterior vertebral component (eg, spinous process, lamina or facet) for intrinsic bony lesion, single vertebral segment; thoracic	1
22102	Partial excision of posterior vertebral component (eg, spinous process, lamina or facet) for intrinsic bony lesion, single vertebral segment; lumbar	1

22103	Partial excision of posterior vertebral component (eg, spinous process, lamina or facet) for intrinsic bony lesion, single vertebral segment; each additional segment (List separately in addition to code for primary procedure)	1
22110	Partial excision of vertebral body, for intrinsic bony lesion, without decompression of spinal cord or nerve root(s), single vertebral segment; cervical	1
22112	Partial excision of vertebral body, for intrinsic bony lesion, without decompression of spinal cord or nerve root(s), single vertebral segment; thoracic	1
22114	Partial excision of vertebral body, for intrinsic bony lesion, without decompression of spinal cord or nerve root(s), single vertebral segment; lumbar	1
22116	Partial excision of vertebral body, for intrinsic bony lesion, without decompression of spinal cord or nerve root(s), single vertebral segment; each additional vertebral segment (List separately in addition to code for primary procedure)	1
22206	Osteotomy of spine, posterior or posterolateral approach, 3 columns, 1 vertebral segment (eg, pedicle/vertebral body subtraction); thoracic	1
22207	Osteotomy of spine, posterior or posterolateral approach, 3 columns, 1 vertebral segment (eg, pedicle/vertebral body subtraction); lumbar	1
22208	Osteotomy of spine, posterior or posterolateral approach, 3 columns, 1 vertebral segment (eg, pedicle/vertebral body subtraction); each additional vertebral segment (List separately in addition to code for primary procedure)	1
22210	Osteotomy of spine, posterior or posterolateral approach, 1 vertebral segment; cervical	1
22212	Osteotomy of spine, posterior or posterolateral approach, 1 vertebral segment; thoracic	1
22214	Osteotomy of spine, posterior or posterolateral approach, 1 vertebral segment; lumbar	1
22216	Osteotomy of spine, posterior or posterolateral approach, 1 vertebral segment; each additional vertebral segment (List separately in addition to primary procedure)	1
22220	Osteotomy of spine, including discectomy, anterior approach, single vertebral segment; cervical	1
22222	Osteotomy of spine, including discectomy, anterior approach, single vertebral segment; thoracic	1
22224	Osteotomy of spine, including discectomy, anterior approach, single vertebral segment; lumbar	1
22226	Osteotomy of spine, including discectomy, anterior approach, single vertebral segment; each additional vertebral segment (List separately in addition to code for primary procedure)	1
22310	Closed treatment of vertebral body fracture(s), without manipulation, requiring and including casting or bracing	1
22315	Closed treatment of vertebral fracture(s) and/or dislocation(s) requiring casting or bracing, with and including casting and/or bracing by manipulation or traction	1

22318	Open treatment and/or reduction of odontoid fracture(s) and or dislocation(s) (including os odontoideum), anterior approach, including placement of internal fixation; without grafting	1
22319	Open treatment and/or reduction of odontoid fracture(s) and or dislocation(s) (including os odontoideum), anterior approach, including placement of internal fixation; with grafting	1
22325	Open treatment and/or reduction of vertebral fracture(s) and/or dislocation(s), posterior approach, 1 fractured vertebra or dislocated segment; lumbar	1
22326	Open treatment and/or reduction of vertebral fracture(s) and/or dislocation(s), posterior approach, 1 fractured vertebra or dislocated segment; cervical	1
22327	Open treatment and/or reduction of vertebral fracture(s) and/or dislocation(s), posterior approach, 1 fractured vertebra or dislocated segment; thoracic	1
22328	Open treatment and/or reduction of vertebral fracture(s) and/or dislocation(s), posterior approach, 1 fractured vertebra or dislocated segment; each additional fractured vertebra or dislocated segment (List separately in addition to code for primary procedure)	1
22505	Manipulation of spine requiring anesthesia, any region	1
22510	Percutaneous vertebroplasty (bone biopsy included when performed), 1 vertebral body, unilateral or bilateral injection, inclusive of all imaging guidance; cervicothoracic	1
22511	Percutaneous vertebroplasty (bone biopsy included when performed), 1 vertebral body, unilateral or bilateral injection, inclusive of all imaging guidance; lumbosacral	1
22512	Percutaneous vertebroplasty (bone biopsy included when performed), 1 vertebral body, unilateral or bilateral injection, inclusive of all imaging guidance; each additional cervicothoracic or lumbosacral vertebral body (List separately in addition to code for primary procedure)	1
22513	Percutaneous vertebral augmentation, including cavity creation (fracture reduction and bone biopsy included when performed) using mechanical device (eg, kyphoplasty), 1 vertebral body, unilateral or bilateral cannulation, inclusive of all imaging guidance; thoracic	1
22514	Percutaneous vertebral augmentation, including cavity creation (fracture reduction and bone biopsy included when performed) using mechanical device (eg, kyphoplasty), 1 vertebral body, unilateral or bilateral cannulation, inclusive of all imaging guidance; lumbar	1
22515	Percutaneous vertebral augmentation, including cavity creation (fracture reduction and bone biopsy included when performed) using mechanical device (eg, kyphoplasty), 1 vertebral body, unilateral or bilateral cannulation, inclusive of all imaging guidance; each additional thoracic or lumbar vertebral body (List separately in addition to code for primary procedure)	1
22526	Percutaneous intradiscal electrothermal annuloplasty, unilateral or bilateral including fluoroscopic guidance; single level	1
22527	Percutaneous intradiscal electrothermal annuloplasty, unilateral or bilateral including fluoroscopic guidance; 1 or more additional levels (List separately in addition to code for primary procedure)	1

22532	Arthrodesis, lateral extracavitary technique, including minimal discectomy to	1
	prepare interspace (other than for decompression); thoracic	_
22533	Arthrodesis, lateral extracavitary technique, including minimal discectomy to prepare interspace (other than for decompression); lumbar	1
22534	Arthrodesis, lateral extracavitary technique, including minimal discectomy to prepare interspace (other than for decompression); thoracic or lumbar, each additional vertebral segment (List separately in addition to code for primary procedure)	1
22548	Arthrodesis, anterior transoral or extraoral technique, clivus-C1-C2 (atlas-axis), with or without excision of odontoid process	1
22551	Arthrodesis, anterior interbody, including disc space preparation, discectomy, osteophytectomy and decompression of spinal cord and/or nerve roots; cervical below C2	1
22552	Arthrodesis, anterior interbody, including disc space preparation, discectomy, osteophytectomy and decompression of spinal cord and/or nerve roots; cervical below C2, each additional interspace (List separately in addition to code for primary procedure)	1
22554	Arthrodesis, anterior interbody technique, including minimal discectomy to prepare interspace (other than for decompression); cervical below C2	1
22556	Arthrodesis, anterior interbody technique, including minimal discectomy to prepare interspace (other than for decompression); thoracic	1
22558	Arthrodesis, anterior interbody technique, including minimal discectomy to prepare interspace (other than for decompression); lumbar	1
22585	Arthrodesis, anterior interbody technique, including minimal discectomy to prepare interspace (other than for decompression); each additional interspace (List separately in addition to code for primary procedure)	1
22586	Arthrodesis, pre-sacral interbody technique, including disc space preparation, discectomy, with posterior instrumentation, with image guidance, includes bone graft when performed, L5-S1 interspace	1
22590	Arthrodesis, posterior technique, craniocervical (occiput-C2)	1
22595	Arthrodesis, posterior technique, atlas-axis (C1-C2)	1
22600	Arthrodesis, posterior or posterolateral technique, single interspace; cervical below C2 segment	1
22610	Arthrodesis, posterior or posterolateral technique, single interspace; thoracic (with lateral transverse technique, when performed)	1
22612	Arthrodesis, posterior or posterolateral technique, single interspace; lumbar (with lateral transverse technique, when performed)	1
22614	Arthrodesis, posterior or posterolateral technique, single interspace; each additional interspace (List separately in addition to code for primary procedure)	1
22630	Arthrodesis, posterior interbody technique, including laminectomy and/or discectomy to prepare interspace (other than for decompression), single interspace; lumbar	1

22632	Arthrodesis, posterior interbody technique, including laminectomy and/or discectomy to prepare interspace (other than for decompression), single interspace; each additional interspace (List separately in addition to code for primary procedure)	1
22633	Arthrodesis, combined posterior or posterolateral technique with posterior interbody technique including laminectomy and/or discectomy sufficient to prepare interspace (other than for decompression), single interspace; lumbar	1
22634	Arthrodesis, combined posterior or posterolateral technique with posterior interbody technique including laminectomy and/or discectomy sufficient to prepare interspace (other than for decompression), single interspace; each additional interspace and segment (List separately in addition to code for primary procedure)	1
22800	Arthrodesis, posterior, for spinal deformity, with or without cast; up to 6 vertebral segments	1
22802	Arthrodesis, posterior, for spinal deformity, with or without cast; 7 to 12 vertebral segments	1
22804	Arthrodesis, posterior, for spinal deformity, with or without cast; 13 or more vertebral segments	1
22808	Arthrodesis, anterior, for spinal deformity, with or without cast; 2 to 3 vertebral segments	1
22810	Arthrodesis, anterior, for spinal deformity, with or without cast; 4 to 7 vertebral segments	1
22812	Arthrodesis, anterior, for spinal deformity, with or without cast; 8 or more vertebral segments	1
22818	Kyphectomy, circumferential exposure of spine and resection of vertebral segment(s) (including body and posterior elements); single or 2 segments	1
22819	Kyphectomy, circumferential exposure of spine and resection of vertebral segment(s) (including body and posterior elements); 3 or more segments	1
22830	Exploration of spinal fusion	1
22840	Posterior non-segmental instrumentation (eg, Harrington rod technique, pedicle fixation across 1 interspace, atlantoaxial transarticular screw fixation, sublaminar wiring at C1, facet screw fixation) (List separately in addition to code for primary procedure)	1
22842	Posterior segmental instrumentation (eg, pedicle fixation, dual rods with multiple hooks and sublaminar wires); 3 to 6 vertebral segments (List separately in addition to code for primary procedure)	1
22843	Posterior segmental instrumentation (eg, pedicle fixation, dual rods with multiple hooks and sublaminar wires); 7 to 12 vertebral segments (List separately in addition to code for primary procedure)	1
22844	Posterior segmental instrumentation (eg, pedicle fixation, dual rods with multiple hooks and sublaminar wires); 13 or more vertebral segments (List separately in addition to code for primary procedure)	1
22845	Anterior instrumentation; 2 to 3 vertebral segments (List separately in addition to code for primary procedure)	1

22846	Anterior instrumentation; 4 to 7 vertebral segments (List separately in addition to code for primary procedure)	1
22847	Anterior instrumentation; 8 or more vertebral segments (List separately in addition to code for primary procedure)	1
22848	Pelvic fixation (attachment of caudal end of instrumentation to pelvic bony structures) other than sacrum (List separately in addition to code for primary procedure)	1
22849	Reinsertion of spinal fixation device	1
22850	Removal of posterior nonsegmental instrumentation (eg, Harrington rod)	1
22852	Removal of posterior segmental instrumentation	1
22853	Insertion of interbody biomechanical device(s) (eg, synthetic cage, mesh) with integral anterior instrumentation for device anchoring (eg, screws, flanges), when performed, to intervertebral disc space in conjunction with interbody arthrodesis, each interspace (List separately in addition to code for primary procedure)	1
22854	Insertion of intervertebral biomechanical device(s) (eg, synthetic cage, mesh) with integral anterior instrumentation for device anchoring (eg, screws, flanges), when performed, to vertebral corpectomy(ies) (vertebral body resection, partial or complete) defect, in conjunction with interbody arthrodesis, each contiguous defect (List separately in addition to code for primary procedure)	4
22855	Removal of anterior instrumentation	1
22856	Total disc arthroplasty (artificial disc), anterior approach, including discectomy with end plate preparation (includes osteophytectomy for nerve root or spinal cord decompression and microdissection); single interspace, cervical	1
22857	Total disc arthroplasty (artificial disc), anterior approach, including discectomy to prepare interspace (other than for decompression), single interspace, lumbar	1
22858	Total disc arthroplasty (artificial disc), anterior approach, including discectomy with end plate preparation (includes osteophytectomy for nerve root or spinal cord decompression and microdissection); second level, cervical (List separately in addition to code for primary procedure)	1
22859	Insertion of intervertebral biomechanical device(s) (eg, synthetic cage, mesh, methylmethacrylate) to intervertebral disc space or vertebral body defect without interbody arthrodesis, each contiguous defect (List separately in addition to code for primary procedure)	4
22861	Revision including replacement of total disc arthroplasty (artificial disc), anterior approach, single interspace; cervical	1
22862	Revision including replacement of total disc arthroplasty (artificial disc), anterior approach, single interspace; lumbar	1
22864	Removal of total disc arthroplasty (artificial disc), anterior approach, single interspace; cervical	1
22865	Removal of total disc arthroplasty (artificial disc), anterior approach, single interspace; lumbar	1

22867	Insertion of interlaminar/interspinous process stabilization/distraction device, without fusion, including image guidance when performed, with open decompression, lumbar; single level	1
22868	Insertion of interlaminar/interspinous process stabilization/distraction device, without fusion, including image guidance when performed, with open decompression, lumbar; second level (List separately in addition to code for primary procedure)	1
22869	Insertion of interlaminar/interspinous process stabilization/distraction device, without open decompression or fusion, including image guidance when performed, lumbar; single level	1
22870	Insertion of interlaminar/interspinous process stabilization/distraction device, without open decompression or fusion, including image guidance when performed, lumbar; second level (List separately in addition to code for primary procedure)	1
22899	Unlisted procedure, spine	1
22900	Excision, tumor, soft tissue of abdominal wall, subfascial (eg, intramuscular); less than 5 cm	1
22901	Excision, tumor, soft tissue of abdominal wall, subfascial (eg, intramuscular); 5 cm or greater	1
22902	Excision, tumor, soft tissue of abdominal wall, subcutaneous; less than 3 cm	1
22903	Excision, tumor, soft tissue of abdominal wall, subcutaneous; 3 cm or greater	1
22904	Radical resection of tumor (eg, sarcoma), soft tissue of abdominal wall; less than 5 cm	1
22905	Radical resection of tumor (eg, sarcoma), soft tissue of abdominal wall; 5 cm or greater	1
22999	Unlisted procedure, abdomen, musculoskeletal system	1
23000	Removal of subdeltoid calcareous deposits, open	1
23020	Capsular contracture release (eg, Sever type procedure)	1
23030	Incision and drainage, shoulder area; deep abscess or hematoma	2
23031	Incision and drainage, shoulder area; infected bursa	2
23035	Incision, bone cortex (eg, osteomyelitis or bone abscess), shoulder area	1
23040	Arthrotomy, glenohumeral joint, including exploration, drainage, or removal of foreign body	1
23044	Arthrotomy, acromioclavicular, sternoclavicular joint, including exploration, drainage, or removal of foreign body	1
23065	Biopsy, soft tissue of shoulder area; superficial	2
23066	Biopsy, soft tissue of shoulder area; deep	2
23071	Excision, tumor, soft tissue of shoulder area, subcutaneous; 3 cm or greater	2
23073	Excision, tumor, soft tissue of shoulder area, subfascial (eg, intramuscular); 5 cm or greater	2
23075	Excision, tumor, soft tissue of shoulder area, subcutaneous; less than 3 cm	2

23076	Excision, tumor, soft tissue of shoulder area, subfascial (eg, intramuscular); less than 5 cm	2
23077	Radical resection of tumor (eg, sarcoma), soft tissue of shoulder area; less than 5 cm	1
23078	Radical resection of tumor (eg, sarcoma), soft tissue of shoulder area; 5 cm or greater	2
23100	Arthrotomy, glenohumeral joint, including biopsy	1
23101	Arthrotomy, acromioclavicular joint or sternoclavicular joint, including biopsy and/or excision of torn cartilage	1
23105	Arthrotomy; glenohumeral joint, with synovectomy, with or without biopsy	1
23106	Arthrotomy; sternoclavicular joint, with synovectomy, with or without biopsy	1
23107	Arthrotomy, glenohumeral joint, with joint exploration, with or without removal of loose or foreign body	1
23120	Claviculectomy; partial	1
23125	Claviculectomy; total	1
23130	Acromioplasty or acromionectomy, partial, with or without coracoacromial ligament release	2
23140	Excision or curettage of bone cyst or benign tumor of clavicle or scapula	1
23145	Excision or curettage of bone cyst or benign tumor of clavicle or scapula; with autograft (includes obtaining graft)	1
23146	Excision or curettage of bone cyst or benign tumor of clavicle or scapula; with allograft	1
23150	Excision or curettage of bone cyst or benign tumor of proximal humerus	1
23155	Excision or curettage of bone cyst or benign tumor of proximal humerus; with autograft (includes obtaining graft)	1
23156	Excision or curettage of bone cyst or benign tumor of proximal humerus; with allograft	2
23170	Sequestrectomy (eg, for osteomyelitis or bone abscess), clavicle	1
23172	Sequestrectomy (eg, for osteomyelitis or bone abscess), scapula	1
23174	Sequestrectomy (eg, for osteomyelitis or bone abscess), humeral head to surgical neck	1
23180	Partial excision (craterization, saucerization, or diaphysectomy) bone (eg, osteomyelitis), clavicle	2
23182	Partial excision (craterization, saucerization, or diaphysectomy) bone (eg, osteomyelitis), scapula	1
23184	Partial excision (craterization, saucerization, or diaphysectomy) bone (eg, osteomyelitis), proximal humerus	1
23190	Ostectomy of scapula, partial (eg, superior medial angle)	1
23195	Resection, humeral head	1
23200	Radical resection of tumor; clavicle	2

23210	Radical resection of tumor; scapula	2
23220	Radical resection of tumor, proximal humerus	2
23330	Removal of foreign body, shoulder; subcutaneous	1
23333	Removal of foreign body, shoulder; deep (subfascial or intramuscular)	2
23334	Removal of prosthesis, includes debridement and synovectomy when performed; humeral or glenoid component	2
23335	Removal of prosthesis, includes debridement and synovectomy when performed; humeral and glenoid components (eg, total shoulder)	2
23350	Injection procedure for shoulder arthrography or enhanced CT/MRI shoulder arthrography	2
23395	Muscle transfer, any type, shoulder or upper arm; single	1
23397	Muscle transfer, any type, shoulder or upper arm; multiple	1
23400	Scapulopexy (eg, Sprengels deformity or for paralysis)	1
23405	Tenotomy, shoulder area; single tendon	2
23406	Tenotomy, shoulder area; multiple tendons through same incision	2
23410	Repair of ruptured musculotendinous cuff (eg, rotator cuff) open; acute	2
23412	Repair of ruptured musculotendinous cuff (eg, rotator cuff) open; chronic	1
23415	Coracoacromial ligament release, with or without acromioplasty	2
23420	Reconstruction of complete shoulder (rotator) cuff avulsion, chronic (includes acromioplasty)	1
23430	Tenodesis of long tendon of biceps	1
23440	Resection or transplantation of long tendon of biceps	1
23450	Capsulorrhaphy, anterior; Putti-Platt procedure or Magnuson type operation	1
23455	Capsulorrhaphy, anterior; with labral repair (eg, Bankart procedure)	1
23460	Capsulorrhaphy, anterior, any type; with bone block	1
23462	Capsulorrhaphy, anterior, any type; with coracoid process transfer	1
23465	Capsulorrhaphy, glenohumeral joint, posterior, with or without bone block	1
23466	Capsulorrhaphy, glenohumeral joint, any type multidirectional instability	1
23470	Arthroplasty, glenohumeral joint; hemiarthroplasty	2
23472	Arthroplasty, glenohumeral joint; total shoulder (glenoid and proximal humeral replacement (eg, total shoulder))	2
23473	Revision of total shoulder arthroplasty, including allograft when performed; humeral or glenoid component	2
23474	Revision of total shoulder arthroplasty, including allograft when performed; humeral and glenoid component	2
23480	Osteotomy, clavicle, with or without internal fixation	1

23485	Osteotomy, clavicle, with or without internal fixation; with bone graft for nonunion or malunion (includes obtaining graft and/or necessary fixation)	1
23490	Prophylactic treatment (nailing, pinning, plating or wiring) with or without methylmethacrylate; clavicle	1
23491	Prophylactic treatment (nailing, pinning, plating or wiring) with or without methylmethacrylate; proximal humerus	1
23500	Closed treatment of clavicular fracture; without manipulation	2
23505	Closed treatment of clavicular fracture; with manipulation	2
23515	Open treatment of clavicular fracture, includes internal fixation, when performed	2
23520	Closed treatment of sternoclavicular dislocation; without manipulation	2
23525	Closed treatment of sternoclavicular dislocation; with manipulation	2
23530	Open treatment of sternoclavicular dislocation, acute or chronic	2
23532	Open treatment of sternoclavicular dislocation, acute or chronic; with fascial graft (includes obtaining graft)	2
23540	Closed treatment of acromioclavicular dislocation; without manipulation	2
23545	Closed treatment of acromioclavicular dislocation; with manipulation	2
23550	Open treatment of acromioclavicular dislocation, acute or chronic	2
23552	Open treatment of acromioclavicular dislocation, acute or chronic; with fascial graft (includes obtaining graft)	2
23570	Closed treatment of scapular fracture; without manipulation	2
23575	Closed treatment of scapular fracture; with manipulation, with or without skeletal traction (with or without shoulder joint involvement)	2
23585	Open treatment of scapular fracture (body, glenoid or acromion) includes internal fixation, when performed	2
23600	Closed treatment of proximal humeral (surgical or anatomical neck) fracture; without manipulation	2
23605	Closed treatment of proximal humeral (surgical or anatomical neck) fracture; with manipulation, with or without skeletal traction	2
23615	Open treatment of proximal humeral (surgical or anatomical neck) fracture, includes internal fixation, when performed, includes repair of tuberosity(s), when performed	2
23616	Open treatment of proximal humeral (surgical or anatomical neck) fracture, includes internal fixation, when performed, includes repair of tuberosity(s), when performed; with proximal humeral prosthetic replacement	1
23620	Closed treatment of greater humeral tuberosity fracture; without manipulation	2
23625	Closed treatment of greater humeral tuberosity fracture; with manipulation	2
23630	Open treatment of greater humeral tuberosity fracture, includes internal fixation, when performed	2
23650	Closed treatment of shoulder dislocation, with manipulation; without anesthesia	2

23655	Closed treatment of shoulder dislocation, with manipulation; requiring anesthesia	2
23660	Open treatment of acute shoulder dislocation	2
23665	Closed treatment of shoulder dislocation, with fracture of greater humeral tuberosity, with manipulation	2
23670	Open treatment of shoulder dislocation, with fracture of greater humeral tuberosity, includes internal fixation, when performed	2
23675	Closed treatment of shoulder dislocation, with surgical or anatomical neck fracture, with manipulation	2
23680	Open treatment of shoulder dislocation, with surgical or anatomical neck fracture, includes internal fixation, when performed	2
23700	Manipulation under anesthesia, shoulder joint, including application of fixation apparatus (dislocation excluded)	2
23800	Arthrodesis, glenohumeral joint	1
23802	Arthrodesis, glenohumeral joint; with autogenous graft (includes obtaining graft)	1
23900	Interthoracoscapular amputation (forequarter)	1
23920	Disarticulation of shoulder	2
23921	Disarticulation of shoulder; secondary closure or scar revision	2
23929	Unlisted procedure, shoulder	1
23930	Incision and drainage, upper arm or elbow area; deep abscess or hematoma	2
23931	Incision and drainage, upper arm or elbow area; bursa	2
23935	Incision, deep, with opening of bone cortex (eg, for osteomyelitis or bone abscess), humerus or elbow	1
24000	Arthrotomy, elbow, including exploration, drainage, or removal of foreign body	1
24006	Arthrotomy of the elbow, with capsular excision for capsular release (separate procedure)	1
24065	Biopsy, soft tissue of upper arm or elbow area; superficial	2
24066	Biopsy, soft tissue of upper arm or elbow area; deep (subfascial or intramuscular)	2
24071	Excision, tumor, soft tissue of upper arm or elbow area, subcutaneous; 3 cm or greater	2
24073	Excision, tumor, soft tissue of upper arm or elbow area, subfascial (eg, intramuscular); 5 cm or greater	2
24075	Excision, tumor, soft tissue of upper arm or elbow area, subcutaneous; less than 3 cm	2
24076	Excision, tumor, soft tissue of upper arm or elbow area, subfascial (eg, intramuscular); less than 5 cm	2
24077	Radical resection of tumor (eg, sarcoma), soft tissue of upper arm or elbow area; less than 5 cm	2
24079	Radical resection of tumor (eg, sarcoma), soft tissue of upper arm or elbow area; 5 cm or greater	2

24100	Arthrotomy, elbow; with synovial biopsy only	1
24101	Arthrotomy, elbow; with joint exploration, with or without biopsy, with or without removal of loose or foreign body	2
24102	Arthrotomy, elbow; with synovectomy	1
24105	Excision, olecranon bursa	1
24110	Excision or curettage of bone cyst or benign tumor, humerus	2
24115	Excision or curettage of bone cyst or benign tumor, humerus; with autograft (includes obtaining graft)	1
24116	Excision or curettage of bone cyst or benign tumor, humerus; with allograft	1
24120	Excision or curettage of bone cyst or benign tumor of head or neck of radius or olecranon process	1
24125	Excision or curettage of bone cyst or benign tumor of head or neck of radius or olecranon process; with autograft (includes obtaining graft)	1
24126	Excision or curettage of bone cyst or benign tumor of head or neck of radius or olecranon process; with allograft	2
24130	Excision, radial head	2
24134	Sequestrectomy (eg, for osteomyelitis or bone abscess), shaft or distal humerus	1
24136	Sequestrectomy (eg, for osteomyelitis or bone abscess), radial head or neck	2
24138	Sequestrectomy (eg, for osteomyelitis or bone abscess), olecranon process	1
24140	Partial excision (craterization, saucerization, or diaphysectomy) bone (eg, osteomyelitis), humerus	1
24145	Partial excision (craterization, saucerization, or diaphysectomy) bone (eg, osteomyelitis), radial head or neck	2
24147	Partial excision (craterization, saucerization, or diaphysectomy) bone (eg, osteomyelitis), olecranon process	2
24149	Radical resection of capsule, soft tissue, and heterotopic bone, elbow, with contracture release (separate procedure)	1
24150	Radical resection of tumor, shaft or distal humerus	1
24152	Radical resection of tumor, radial head or neck	1
24155	Resection of elbow joint (arthrectomy)	1
24160	Removal of prosthesis, includes debridement and synovectomy when performed; humeral and ulnar components	1
24164	Removal of prosthesis, includes debridement and synovectomy when performed; radial head	1
24200	Removal of foreign body, upper arm or elbow area; subcutaneous	2
24201	Removal of foreign body, upper arm or elbow area; deep (subfascial or intramuscular)	1
24220	Injection procedure for elbow arthrography	2

24300	Manipulation, elbow, under anesthesia	1
24301	Muscle or tendon transfer, any type, upper arm or elbow, single (excluding 24320-24331)	1
24305	Tendon lengthening, upper arm or elbow, each tendon	1
24310	Tenotomy, open, elbow to shoulder, each tendon	1
24320	Tenoplasty, with muscle transfer, with or without free graft, elbow to shoulder, single (Seddon-Brookes type procedure)	1
24330	Flexor-plasty, elbow (eg, Steindler type advancement)	2
24331	Flexor-plasty, elbow (eg, Steindler type advancement); with extensor advancement	1
24332	Tenolysis, triceps	1
24340	Tenodesis of biceps tendon at elbow (separate procedure)	1
24341	Repair, tendon or muscle, upper arm or elbow, each tendon or muscle, primary or secondary (excludes rotator cuff)	1
24342	Reinsertion of ruptured biceps or triceps tendon, distal, with or without tendon graft	1
24343	Repair lateral collateral ligament, elbow, with local tissue	1
24344	Reconstruction lateral collateral ligament, elbow, with tendon graft (includes harvesting of graft)	1
24345	Repair medial collateral ligament, elbow, with local tissue	1
24346	Reconstruction medial collateral ligament, elbow, with tendon graft (includes harvesting of graft)	2
24357	Tenotomy, elbow, lateral or medial (eg, epicondylitis, tennis elbow, golfer's elbow); percutaneous	2
24358	Tenotomy, elbow, lateral or medial (eg, epicondylitis, tennis elbow, golfer's elbow); debridement, soft tissue and/or bone, open	2
24359	Tenotomy, elbow, lateral or medial (eg, epicondylitis, tennis elbow, golfer's elbow); debridement, soft tissue and/or bone, open with tendon repair or reattachment	2
24360	Arthroplasty, elbow; with membrane (eg, fascial)	1
24361	Arthroplasty, elbow; with distal humeral prosthetic replacement	1
24362	Arthroplasty, elbow; with implant and fascia lata ligament reconstruction	2
24363	Arthroplasty, elbow; with distal humerus and proximal ulnar prosthetic replacement (eg, total elbow)	1
24365	Arthroplasty, radial head	1
24366	Arthroplasty, radial head; with implant	1
24370	Revision of total elbow arthroplasty, including allograft when performed; humeral or ulnar component	2
24371	Revision of total elbow arthroplasty, including allograft when performed; humeral and ulnar component	2

24400	Osteotomy, humerus, with or without internal fixation	1
24410	Multiple osteotomies with realignment on intramedullary rod, humeral shaft (Sofield type procedure)	1
24420	Osteoplasty, humerus (eg, shortening or lengthening) (excluding 64876)	1
24430	Repair of nonunion or malunion, humerus; without graft (eg, compression technique)	1
24435	Repair of nonunion or malunion, humerus; with iliac or other autograft (includes obtaining graft)	1
24470	Hemiepiphyseal arrest (eg, cubitus varus or valgus, distal humerus)	1
24495	Decompression fasciotomy, forearm, with brachial artery exploration	1
24498	Prophylactic treatment (nailing, pinning, plating or wiring), with or without methylmethacrylate, humeral shaft	1
24500	Closed treatment of humeral shaft fracture; without manipulation	2
24505	Closed treatment of humeral shaft fracture; with manipulation, with or without skeletal traction	2
24515	Open treatment of humeral shaft fracture with plate/screws, with or without cerclage	2
24516	Treatment of humeral shaft fracture, with insertion of intramedullary implant, with or without cerclage and/or locking screws	1
24530	Closed treatment of supracondylar or transcondylar humeral fracture, with or without intercondylar extension; without manipulation	2
24535	Closed treatment of supracondylar or transcondylar humeral fracture, with or without intercondylar extension; with manipulation, with or without skin or skeletal traction	2
24538	Percutaneous skeletal fixation of supracondylar or transcondylar humeral fracture, with or without intercondylar extension	2
24545	Open treatment of humeral supracondylar or transcondylar fracture, includes internal fixation, when performed; without intercondylar extension	1
24546	Open treatment of humeral supracondylar or transcondylar fracture, includes internal fixation, when performed; with intercondylar extension	1
24560	Closed treatment of humeral epicondylar fracture, medial or lateral; without manipulation	2
24565	Closed treatment of humeral epicondylar fracture, medial or lateral; with manipulation	2
24566	Percutaneous skeletal fixation of humeral epicondylar fracture, medial or lateral, with manipulation	2
24575	Open treatment of humeral epicondylar fracture, medial or lateral, includes internal fixation, when performed	2
24576	Closed treatment of humeral condylar fracture, medial or lateral; without manipulation	2

24577	Closed treatment of humeral condylar fracture, medial or lateral; with manipulation	2
24579	Open treatment of humeral condylar fracture, medial or lateral, includes internal fixation, when performed	2
24582	Percutaneous skeletal fixation of humeral condylar fracture, medial or lateral, with manipulation	2
24586	Open treatment of periarticular fracture and/or dislocation of the elbow (fracture distal humerus and proximal ulna and/or proximal radius)	1
24587	Open treatment of periarticular fracture and/or dislocation of the elbow (fracture distal humerus and proximal ulna and/or proximal radius); with implant arthroplasty	1
24600	Treatment of closed elbow dislocation; without anesthesia	2
24605	Treatment of closed elbow dislocation; requiring anesthesia	2
24615	Open treatment of acute or chronic elbow dislocation	2
24620	Closed treatment of Monteggia type of fracture dislocation at elbow (fracture proximal end of ulna with dislocation of radial head), with manipulation	2
24635	Open treatment of Monteggia type of fracture dislocation at elbow (fracture proximal end of ulna with dislocation of radial head), includes internal fixation, when performed	2
24640	Closed treatment of radial head subluxation in child, nursemaid elbow, with manipulation	2
24650	Closed treatment of radial head or neck fracture; without manipulation	2
24655	Closed treatment of radial head or neck fracture; with manipulation	2
24665	Open treatment of radial head or neck fracture, includes internal fixation or radial head excision, when performed	2
24666	Open treatment of radial head or neck fracture, includes internal fixation or radial head excision, when performed; with radial head prosthetic replacement	1
24670	Closed treatment of ulnar fracture, proximal end (eg, olecranon or coronoid process[es]); without manipulation	2
24675	Closed treatment of ulnar fracture, proximal end (eg, olecranon or coronoid process[es]); with manipulation	2
24685	Open treatment of ulnar fracture, proximal end (eg, olecranon or coronoid process[es]), includes internal fixation, when performed	2
24800	Arthrodesis, elbow joint; local	1
24802	Arthrodesis, elbow joint; with autogenous graft (includes obtaining graft)	2
24900	Amputation, arm through humerus; with primary closure	2
24920	Amputation, arm through humerus; open, circular (guillotine)	2
24925	Amputation, arm through humerus; secondary closure or scar revision	2
24930	Amputation, arm through humerus; re-amputation	2
24931	Amputation, arm through humerus; with implant	2

24935	Stump elongation, upper extremity	2
24940	Cineplasty, upper extremity, complete procedure	2
24999	Unlisted procedure, humerus or elbow	1
25000	Incision, extensor tendon sheath, wrist (eg, de Quervains disease)	1
25001	Incision, flexor tendon sheath, wrist (eg, flexor carpi radialis)	1
25020	Decompression fasciotomy, forearm and/or wrist, flexor OR extensor compartment; without debridement of nonviable muscle and/or nerve	1
25023	Decompression fasciotomy, forearm and/or wrist, flexor OR extensor compartment; with debridement of nonviable muscle and/or nerve	1
25024	Decompression fasciotomy, forearm and/or wrist, flexor AND extensor compartment; without debridement of nonviable muscle and/or nerve	2
25025	Decompression fasciotomy, forearm and/or wrist, flexor AND extensor compartment; with debridement of nonviable muscle and/or nerve	2
25028	Incision and drainage, forearm and/or wrist; deep abscess or hematoma	2
25031	Incision and drainage, forearm and/or wrist; bursa	2
25035	Incision, deep, bone cortex, forearm and/or wrist (eg, osteomyelitis or bone abscess)	1
25040	Arthrotomy, radiocarpal or midcarpal joint, with exploration, drainage, or removal of foreign body	1
25065	Biopsy, soft tissue of forearm and/or wrist; superficial	2
25066	Biopsy, soft tissue of forearm and/or wrist; deep (subfascial or intramuscular)	2
25071	Excision, tumor, soft tissue of forearm and/or wrist area, subcutaneous; 3 cm or greater	2
25073	Excision, tumor, soft tissue of forearm and/or wrist area, subfascial (eg, intramuscular); 3 cm or greater	2
25075	Excision, tumor, soft tissue of forearm and/or wrist area, subcutaneous; less than 3 cm	2
25076	Excision, tumor, soft tissue of forearm and/or wrist area, subfascial (eg, intramuscular); less than 3 cm	2
25077	Radical resection of tumor (eg, sarcoma), soft tissue of forearm and/or wrist area; less than 3 cm	1
25078	Radical resection of tumor (eg, sarcoma), soft tissue of forearm and/or wrist area; 3 cm or greater	2
25085	Capsulotomy, wrist (eg, contracture)	1
25100	Arthrotomy, wrist joint; with biopsy	1
25101	Arthrotomy, wrist joint; with joint exploration, with or without biopsy, with or without removal of loose or foreign body	1
25105	Arthrotomy, wrist joint; with synovectomy	1
25107	Arthrotomy, distal radioulnar joint including repair of triangular cartilage, complex	1

25440	Factorian Indian of American Indian I	
25110	Excision, lesion of tendon sheath, forearm and/or wrist	1
25111	Excision of ganglion, wrist (dorsal or volar); primary	2
25112	Excision of ganglion, wrist (dorsal or volar); recurrent	2
25115	Radical excision of bursa, synovia of wrist, or forearm tendon sheaths (eg, tenosynovitis, fungus, Tbc, or other granulomas, rheumatoid arthritis); flexors	1
25116	Radical excision of bursa, synovia of wrist, or forearm tendon sheaths (eg, tenosynovitis, fungus, Tbc, or other granulomas, rheumatoid arthritis); extensors, with or without transposition of dorsal retinaculum	1
25118	Synovectomy, extensor tendon sheath, wrist, single compartment	2
25119	Synovectomy, extensor tendon sheath, wrist, single compartment; with resection of distal ulna	2
25120	Excision or curettage of bone cyst or benign tumor of radius or ulna (excluding head or neck of radius and olecranon process)	2
25125	Excision or curettage of bone cyst or benign tumor of radius or ulna (excluding head or neck of radius and olecranon process); with autograft (includes obtaining graft)	1
25126	Excision or curettage of bone cyst or benign tumor of radius or ulna (excluding head or neck of radius and olecranon process); with allograft	1
25130	Excision or curettage of bone cyst or benign tumor of carpal bones	1
25135	Excision or curettage of bone cyst or benign tumor of carpal bones; with autograft (includes obtaining graft)	2
25136	Excision or curettage of bone cyst or benign tumor of carpal bones; with allograft	1
25145	Sequestrectomy (eg, for osteomyelitis or bone abscess), forearm and/or wrist	2
25150	Partial excision (craterization, saucerization, or diaphysectomy) of bone (eg, for osteomyelitis); ulna	2
25151	Partial excision (craterization, saucerization, or diaphysectomy) of bone (eg, for osteomyelitis); radius	1
25170	Radical resection of tumor, radius or ulna	1
25210	Carpectomy; 1 bone	1
25215	Carpectomy; all bones of proximal row	1
25230	Radial styloidectomy (separate procedure)	2
25240	Excision distal ulna partial or complete (eg, Darrach type or matched resection)	2
25246	Injection procedure for wrist arthrography	2
25248	Exploration with removal of deep foreign body, forearm or wrist	1
25250	Removal of wrist prosthesis; (separate procedure)	1
25251	Removal of wrist prosthesis; complicated, including total wrist	1
25259	Manipulation, wrist, under anesthesia	1
25260	Repair, tendon or muscle, flexor, forearm and/or wrist; primary, single, each tendon or muscle	2

25263	Repair, tendon or muscle, flexor, forearm and/or wrist; secondary, single, each tendon or muscle	1
25265	Repair, tendon or muscle, flexor, forearm and/or wrist; secondary, with free graft (includes obtaining graft), each tendon or muscle	2
25270	Repair, tendon or muscle, extensor, forearm and/or wrist; primary, single, each tendon or muscle	1
25272	Repair, tendon or muscle, extensor, forearm and/or wrist; secondary, single, each tendon or muscle	1
25274	Repair, tendon or muscle, extensor, forearm and/or wrist; secondary, with free graft (includes obtaining graft), each tendon or muscle	1
25275	Repair, tendon sheath, extensor, forearm and/or wrist, with free graft (includes obtaining graft) (eg, for extensor carpi ulnaris subluxation)	2
25280	Lengthening or shortening of flexor or extensor tendon, forearm and/or wrist, single, each tendon	1
25290	Tenotomy, open, flexor or extensor tendon, forearm and/or wrist, single, each tendon	1
25295	Tenolysis, flexor or extensor tendon, forearm and/or wrist, single, each tendon	1
25300	Tenodesis at wrist; flexors of fingers	2
25301	Tenodesis at wrist; extensors of fingers	2
25310	Tendon transplantation or transfer, flexor or extensor, forearm and/or wrist, single; each tendon	1
25312	Tendon transplantation or transfer, flexor or extensor, forearm and/or wrist, single; with tendon graft(s) (includes obtaining graft), each tendon	1
25315	Flexor origin slide (eg, for cerebral palsy, Volkmann contracture), forearm and/or wrist	1
25316	Flexor origin slide (eg, for cerebral palsy, Volkmann contracture), forearm and/or wrist; with tendon(s) transfer	2
25320	Capsulorrhaphy or reconstruction, wrist, open (eg, capsulodesis, ligament repair, tendon transfer or graft) (includes synovectomy, capsulotomy and open reduction) for carpal instability	1
25332	Arthroplasty, wrist, with or without interposition, with or without external or internal fixation	1
25335	Centralization of wrist on ulna (eg, radial club hand)	2
25337	Reconstruction for stabilization of unstable distal ulna or distal radioulnar joint, secondary by soft tissue stabilization (eg, tendon transfer, tendon graft or weave, or tenodesis) with or without open reduction of distal radioulnar joint	2
25350	Osteotomy, radius; distal third	2
25355	Osteotomy, radius; middle or proximal third	2
25360	Osteotomy; ulna	1
25365	Osteotomy; radius AND ulna	1

25370	Multiple osteotomies, with realignment on intramedullary rod (Sofield type procedure); radius OR ulna	2
25375	Multiple osteotomies, with realignment on intramedullary rod (Sofield type procedure); radius AND ulna	1
25390	Osteoplasty, radius OR ulna; shortening	1
25391	Osteoplasty, radius OR ulna; lengthening with autograft	1
25392	Osteoplasty, radius AND ulna; shortening (excluding 64876)	2
25393	Osteoplasty, radius AND ulna; lengthening with autograft	2
25394	Osteoplasty, carpal bone, shortening	1
25400	Repair of nonunion or malunion, radius OR ulna; without graft (eg, compression technique)	1
25405	Repair of nonunion or malunion, radius OR ulna; with autograft (includes obtaining graft)	1
25415	Repair of nonunion or malunion, radius AND ulna; without graft (eg, compression technique)	1
25420	Repair of nonunion or malunion, radius AND ulna; with autograft (includes obtaining graft)	1
25425	Repair of defect with autograft; radius OR ulna	1
25426	Repair of defect with autograft; radius AND ulna	1
25430	Insertion of vascular pedicle into carpal bone (eg, Hori procedure)	1
25431	Repair of nonunion of carpal bone (excluding carpal scaphoid (navicular)) (includes obtaining graft and necessary fixation), each bone	1
25440	Repair of nonunion, scaphoid carpal (navicular) bone, with or without radial styloidectomy (includes obtaining graft and necessary fixation)	1
25441	Arthroplasty with prosthetic replacement; distal radius	1
25442	Arthroplasty with prosthetic replacement; distal ulna	1
25443	Arthroplasty with prosthetic replacement; scaphoid carpal (navicular)	1
25444	Arthroplasty with prosthetic replacement; lunate	2
25445	Arthroplasty with prosthetic replacement; trapezium	1
25446	Arthroplasty with prosthetic replacement; distal radius and partial or entire carpus (total wrist)	1
25447	Arthroplasty, interposition, intercarpal or carpometacarpal joints	1
25449	Revision of arthroplasty, including removal of implant, wrist joint	2
25450	Epiphyseal arrest by epiphysiodesis or stapling; distal radius OR ulna	1
25455	Epiphyseal arrest by epiphysiodesis or stapling; distal radius AND ulna	1
25490	Prophylactic treatment (nailing, pinning, plating or wiring) with or without methylmethacrylate; radius	2

25491	Prophylactic treatment (nailing, pinning, plating or wiring) with or without methylmethacrylate; ulna	2
25492	Prophylactic treatment (nailing, pinning, plating or wiring) with or without methylmethacrylate; radius AND ulna	2
25500	Closed treatment of radial shaft fracture; without manipulation	2
25505	Closed treatment of radial shaft fracture; with manipulation	2
25515	Open treatment of radial shaft fracture, includes internal fixation, when performed	2
25520	Closed treatment of radial shaft fracture and closed treatment of dislocation of distal radioulnar joint (Galeazzi fracture/dislocation)	2
25525	Open treatment of radial shaft fracture, includes internal fixation, when performed, and closed treatment of distal radioulnar joint dislocation (Galeazzi fracture/dislocation), includes percutaneous skeletal fixation, when performed	2
25526	Open treatment of radial shaft fracture, includes internal fixation, when performed, and open treatment of distal radioulnar joint dislocation (Galeazzi fracture/dislocation), includes internal fixation, when performed, includes repair of triangular fibrocartilage complex	2
25530	Closed treatment of ulnar shaft fracture; without manipulation	2
25535	Closed treatment of ulnar shaft fracture; with manipulation	2
25545	Open treatment of ulnar shaft fracture, includes internal fixation, when performed	2
25560	Closed treatment of radial and ulnar shaft fractures; without manipulation	2
25565	Closed treatment of radial and ulnar shaft fractures; with manipulation	2
25574	Open treatment of radial AND ulnar shaft fractures, with internal fixation, when performed; of radius OR ulna	2
25575	Open treatment of radial AND ulnar shaft fractures, with internal fixation, when performed; of radius AND ulna	2
25600	Closed treatment of distal radial fracture (eg, Colles or Smith type) or epiphyseal separation, includes closed treatment of fracture of ulnar styloid, when performed; without manipulation	2
25605	Closed treatment of distal radial fracture (eg, Colles or Smith type) or epiphyseal separation, includes closed treatment of fracture of ulnar styloid, when performed; with manipulation	2
25622	Closed treatment of carpal scaphoid (navicular) fracture; without manipulation	1
25624	Closed treatment of carpal scaphoid (navicular) fracture; with manipulation	1
25628	Open treatment of carpal scaphoid (navicular) fracture, includes internal fixation, when performed	2
25630	Closed treatment of carpal bone fracture (excluding carpal scaphoid [navicular]); without manipulation, each bone	2
25635	Closed treatment of carpal bone fracture (excluding carpal scaphoid [navicular]); with manipulation, each bone	2

25645	Open treatment of carpal bone fracture (other than carpal scaphoid [navicular]), each bone	2
25650	Closed treatment of ulnar styloid fracture	1
25651	Percutaneous skeletal fixation of ulnar styloid fracture	1
25652	Open treatment of ulnar styloid fracture	2
25660	Closed treatment of radiocarpal or intercarpal dislocation, 1 or more bones, with manipulation	1
25670	Open treatment of radiocarpal or intercarpal dislocation, 1 or more bones	2
25671	Percutaneous skeletal fixation of distal radioulnar dislocation	2
25675	Closed treatment of distal radioulnar dislocation with manipulation	1
25676	Open treatment of distal radioulnar dislocation, acute or chronic	2
25680	Closed treatment of trans-scaphoperilunar type of fracture dislocation, with manipulation	2
25685	Open treatment of trans-scaphoperilunar type of fracture dislocation	2
25690	Closed treatment of lunate dislocation, with manipulation	1
25695	Open treatment of lunate dislocation	1
25800	Arthrodesis, wrist; complete, without bone graft (includes radiocarpal and/or intercarpal and/or carpometacarpal joints)	2
25805	Arthrodesis, wrist; with sliding graft	2
25810	Arthrodesis, wrist; with iliac or other autograft (includes obtaining graft)	2
25820	Arthrodesis, wrist; limited, without bone graft (eg, intercarpal or radiocarpal)	1
25825	Arthrodesis, wrist; with autograft (includes obtaining graft)	1
25830	Arthrodesis, distal radioulnar joint with segmental resection of ulna, with or without bone graft (eg, Sauve-Kapandji procedure)	1
25900	Amputation, forearm, through radius and ulna	2
25905	Amputation, forearm, through radius and ulna; open, circular (guillotine)	2
25907	Amputation, forearm, through radius and ulna; secondary closure or scar revision	2
25909	Amputation, forearm, through radius and ulna; re-amputation	2
25915	Krukenberg procedure	2
25920	Disarticulation through wrist	2
25922	Disarticulation through wrist; secondary closure or scar revision	2
25924	Disarticulation through wrist; re-amputation	2
25927	Transmetacarpal amputation	2
25929	Transmetacarpal amputation; secondary closure or scar revision	2
25931	Transmetacarpal amputation; re-amputation	2
25999	Unlisted procedure, forearm or wrist	1

26010	Drainage of finger abscess; simple	2
26011	Drainage of finger abscess; complicated (eg, felon)	2
26020	Drainage of tendon sheath, digit and/or palm, each	2
26025	Drainage of palmar bursa; single, bursa	2
26030	Drainage of palmar bursa; multiple bursa	2
26034	Incision, bone cortex, hand or finger (eg, osteomyelitis or bone abscess)	1
26035	Decompression fingers and/or hand, injection injury (eg, grease gun)	1
26037	Decompressive fasciotomy, hand (excludes 26035)	2
26040	Fasciotomy, palmar (eg, Dupuytren's contracture); percutaneous	2
26045	Fasciotomy, palmar (eg, Dupuytren's contracture); open, partial	2
26055	Tendon sheath incision (eg, for trigger finger)	2
26060	Tenotomy, percutaneous, single, each digit	2
26070	Arthrotomy, with exploration, drainage, or removal of loose or foreign body; carpometacarpal joint	2
26075	Arthrotomy, with exploration, drainage, or removal of loose or foreign body; metacarpophalangeal joint, each	2
26080	Arthrotomy, with exploration, drainage, or removal of loose or foreign body; interphalangeal joint, each	2
26100	Arthrotomy with biopsy; carpometacarpal joint, each	1
26105	Arthrotomy with biopsy; metacarpophalangeal joint, each	2
26110	Arthrotomy with biopsy; interphalangeal joint, each	1
26111	Excision, tumor or vascular malformation, soft tissue of hand or finger, subcutaneous; 1.5 cm or greater	2
26113	Excision, tumor, soft tissue, or vascular malformation, of hand or finger, subfascial (eg, intramuscular); 1.5 cm or greater	2
26115	Excision, tumor or vascular malformation, soft tissue of hand or finger, subcutaneous; less than 1.5 cm	2
26116	Excision, tumor, soft tissue, or vascular malformation, of hand or finger, subfascial (eg, intramuscular); less than 1.5 cm	1
26117	Radical resection of tumor (eg, sarcoma), soft tissue of hand or finger; less than 3 cm	1
26118	Radical resection of tumor (eg, sarcoma), soft tissue of hand or finger; 3 cm or greater	2
26121	Fasciectomy, palm only, with or without Z-plasty, other local tissue rearrangement, or skin grafting (includes obtaining graft)	2
26123	Fasciectomy, partial palmar with release of single digit including proximal interphalangeal joint, with or without Z-plasty, other local tissue rearrangement, or skin grafting (includes obtaining graft)	1

26125	Fasciectomy, partial palmar with release of single digit including proximal interphalangeal joint, with or without Z-plasty, other local tissue rearrangement, or skin grafting (includes obtaining graft); each additional digit (List separately in addition to code for primary procedure)	1
26130	Synovectomy, carpometacarpal joint	2
26135	Synovectomy, metacarpophalangeal joint including intrinsic release and extensor hood reconstruction, each digit	2
26140	Synovectomy, proximal interphalangeal joint, including extensor reconstruction, each interphalangeal joint	2
26145	Synovectomy, tendon sheath, radical (tenosynovectomy), flexor tendon, palm and/or finger, each tendon	2
26160	Excision of lesion of tendon sheath or joint capsule (eg, cyst, mucous cyst, or ganglion), hand or finger	2
26170	Excision of tendon, palm, flexor or extensor, single, each tendon	2
26180	Excision of tendon, finger, flexor or extensor, each tendon	2
26185	Sesamoidectomy, thumb or finger (separate procedure)	5
26200	Excision or curettage of bone cyst or benign tumor of metacarpal	2
26205	Excision or curettage of bone cyst or benign tumor of metacarpal; with autograft (includes obtaining graft)	2
26210	Excision or curettage of bone cyst or benign tumor of proximal, middle, or distal phalanx of finger	2
26215	Excision or curettage of bone cyst or benign tumor of proximal, middle, or distal phalanx of finger; with autograft (includes obtaining graft)	2
26230	Partial excision (craterization, saucerization, or diaphysectomy) bone (eg, osteomyelitis); metacarpal	2
26235	Partial excision (craterization, saucerization, or diaphysectomy) bone (eg, osteomyelitis); proximal or middle phalanx of finger	2
26236	Partial excision (craterization, saucerization, or diaphysectomy) bone (eg, osteomyelitis); distal phalanx of finger	2
26250	Radical resection of tumor, metacarpal	2
26260	Radical resection of tumor, proximal or middle phalanx of finger	2
26262	Radical resection of tumor, distal phalanx of finger	2
26320	Removal of implant from finger or hand	1
26340	Manipulation, finger joint, under anesthesia, each joint	1
26341	Manipulation, palmar fascial cord (ie, Dupuytren's cord), post enzyme injection (eg, collagenase), single cord	2
26350	Repair or advancement, flexor tendon, not in zone 2 digital flexor tendon sheath (eg, no man's land); primary or secondary without free graft, each tendon	2

26352	Repair or advancement, flexor tendon, not in zone 2 digital flexor tendon sheath (eg, no man's land); secondary with free graft (includes obtaining graft), each tendon	2
26356	Repair or advancement, flexor tendon, in zone 2 digital flexor tendon sheath (eg, no man's land); primary, without free graft, each tendon	2
26357	Repair or advancement, flexor tendon, in zone 2 digital flexor tendon sheath (eg, no man's land); secondary, without free graft, each tendon	1
26358	Repair or advancement, flexor tendon, in zone 2 digital flexor tendon sheath (eg, no man's land); secondary, with free graft (includes obtaining graft), each tendon	2
26370	Repair or advancement of profundus tendon, with intact superficialis tendon; primary, each tendon	2
26372	Repair or advancement of profundus tendon, with intact superficialis tendon; secondary with free graft (includes obtaining graft), each tendon	2
26373	Repair or advancement of profundus tendon, with intact superficialis tendon; secondary without free graft, each tendon	2
26390	Excision flexor tendon, with implantation of synthetic rod for delayed tendon graft, hand or finger, each rod	2
26392	Removal of synthetic rod and insertion of flexor tendon graft, hand or finger (includes obtaining graft), each rod	1
26410	Repair, extensor tendon, hand, primary or secondary; without free graft, each tendon	2
26412	Repair, extensor tendon, hand, primary or secondary; with free graft (includes obtaining graft), each tendon	2
26415	Excision of extensor tendon, with implantation of synthetic rod for delayed tendon graft, hand or finger, each rod	1
26416	Removal of synthetic rod and insertion of extensor tendon graft (includes obtaining graft), hand or finger, each rod	1
26418	Repair, extensor tendon, finger, primary or secondary; without free graft, each tendon	2
26420	Repair, extensor tendon, finger, primary or secondary; with free graft (includes obtaining graft) each tendon	2
26426	Repair of extensor tendon, central slip, secondary (eg, boutonniere deformity); using local tissue(s), including lateral band(s), each finger	2
26428	Repair of extensor tendon, central slip, secondary (eg, boutonniere deformity); with free graft (includes obtaining graft), each finger	2
26432	Closed treatment of distal extensor tendon insertion, with or without percutaneous pinning (eg, mallet finger)	2
26433	Repair of extensor tendon, distal insertion, primary or secondary; without graft (eg, mallet finger)	2
26434	Repair of extensor tendon, distal insertion, primary or secondary; with free graft (includes obtaining graft)	2

26437	Realignment of extensor tendon, hand, each tendon	2
26440	Tenolysis, flexor tendon; palm OR finger, each tendon	2
26442	Tenolysis, flexor tendon; palm AND finger, each tendon	1
26445	Tenolysis, extensor tendon, hand OR finger, each tendon	2
26449	Tenolysis, complex, extensor tendon, finger, including forearm, each tendon	1
26450	Tenotomy, flexor, palm, open, each tendon	2
26455	Tenotomy, flexor, finger, open, each tendon	2
26460	Tenotomy, extensor, hand or finger, open, each tendon	2
26471	Tenodesis; of proximal interphalangeal joint, each joint	2
26474	Tenodesis; of distal joint, each joint	2
26476	Lengthening of tendon, extensor, hand or finger, each tendon	2
26477	Shortening of tendon, extensor, hand or finger, each tendon	1
26478	Lengthening of tendon, flexor, hand or finger, each tendon	2
26479	Shortening of tendon, flexor, hand or finger, each tendon	1
26480	Transfer or transplant of tendon, carpometacarpal area or dorsum of hand; without free graft, each tendon	2
26483	Transfer or transplant of tendon, carpometacarpal area or dorsum of hand; with free tendon graft (includes obtaining graft), each tendon	2
26485	Transfer or transplant of tendon, palmar; without free tendon graft, each tendon	2
26489	Transfer or transplant of tendon, palmar; with free tendon graft (includes obtaining graft), each tendon	2
26490	Opponensplasty; superficialis tendon transfer type, each tendon	2
26492	Opponensplasty; tendon transfer with graft (includes obtaining graft), each tendon	2
26494	Opponensplasty; hypothenar muscle transfer	2
26496	Opponensplasty; other methods	2
26497	Transfer of tendon to restore intrinsic function; ring and small finger	2
26498	Transfer of tendon to restore intrinsic function; all 4 fingers	2
26499	Correction claw finger, other methods	1
26500	Reconstruction of tendon pulley, each tendon; with local tissues (separate procedure)	2
26502	Reconstruction of tendon pulley, each tendon; with tendon or fascial graft (includes obtaining graft) (separate procedure)	2
26508	Release of thenar muscle(s) (eg, thumb contracture)	2
26510	Cross intrinsic transfer, each tendon	1
26516	Capsulodesis, metacarpophalangeal joint; single digit	1

26518	Capsulodesis, metacarpophalangeal joint; 3 or 4 digits	2
26520	Capsulectomy or capsulotomy; metacarpophalangeal joint, each joint	2
26525	Capsulectomy or capsulotomy; interphalangeal joint, each joint	2
26530	Arthroplasty, metacarpophalangeal joint; each joint	2
26531	Arthroplasty, metacarpophalangeal joint; with prosthetic implant, each joint	2
26535	Arthroplasty, interphalangeal joint; each joint	2
26536	Arthroplasty, interphalangeal joint; with prosthetic implant, each joint	2
26540	Repair of collateral ligament, metacarpophalangeal or interphalangeal joint	2
26541	Reconstruction, collateral ligament, metacarpophalangeal joint, single; with tendon or fascial graft (includes obtaining graft)	2
26542	Reconstruction, collateral ligament, metacarpophalangeal joint, single; with local tissue (eg, adductor advancement)	1
26545	Reconstruction, collateral ligament, interphalangeal joint, single, including graft, each joint	2
26546	Repair non-union, metacarpal or phalanx (includes obtaining bone graft with or without external or internal fixation)	1
26548	Repair and reconstruction, finger, volar plate, interphalangeal joint	1
26550	Pollicization of a digit	2
26551	Transfer, toe-to-hand with microvascular anastomosis; great toe wrap-around with bone graft	1
26553	Transfer, toe-to-hand with microvascular anastomosis; other than great toe, single	1
26554	Transfer, toe-to-hand with microvascular anastomosis; other than great toe, double	1
26555	Transfer, finger to another position without microvascular anastomosis	2
26556	Transfer, free toe joint, with microvascular anastomosis	1
26560	Repair of syndactyly (web finger) each web space; with skin flaps	2
26561	Repair of syndactyly (web finger) each web space; with skin flaps and grafts	2
26562	Repair of syndactyly (web finger) each web space; complex (eg, involving bone, nails)	2
26565	Osteotomy; metacarpal, each	2
26567	Osteotomy; phalanx of finger, each	2
26568	Osteoplasty, lengthening, metacarpal or phalanx	2
26580	Repair cleft hand	2
26587	Reconstruction of polydactylous digit, soft tissue and bone	1
26590	Repair macrodactylia, each digit	1
26591	Repair, intrinsic muscles of hand, each muscle	1
26593	Release, intrinsic muscles of hand, each muscle	2

26596	Excision of constricting ring of finger, with multiple Z-plasties	2
26600	Closed treatment of metacarpal fracture, single; without manipulation, each bone	2
26605	Closed treatment of metacarpal fracture, single; with manipulation, each bone	2
26607	Closed treatment of metacarpal fracture, with manipulation, with external fixation, each bone	1
26608	Percutaneous skeletal fixation of metacarpal fracture, each bone	1
26615	Open treatment of metacarpal fracture, single, includes internal fixation, when performed, each bone	2
26641	Closed treatment of carpometacarpal dislocation, thumb, with manipulation	2
26645	Closed treatment of carpometacarpal fracture dislocation, thumb (Bennett fracture), with manipulation	2
26650	Percutaneous skeletal fixation of carpometacarpal fracture dislocation, thumb (Bennett fracture), with manipulation	2
26665	Open treatment of carpometacarpal fracture dislocation, thumb (Bennett fracture), includes internal fixation, when performed	2
26670	Closed treatment of carpometacarpal dislocation, other than thumb, with manipulation, each joint; without anesthesia	2
26675	Closed treatment of carpometacarpal dislocation, other than thumb, with manipulation, each joint; requiring anesthesia	2
26676	Percutaneous skeletal fixation of carpometacarpal dislocation, other than thumb, with manipulation, each joint	1
26685	Open treatment of carpometacarpal dislocation, other than thumb; includes internal fixation, when performed, each joint	2
26686	Open treatment of carpometacarpal dislocation, other than thumb; complex, multiple, or delayed reduction	1
26700	Closed treatment of metacarpophalangeal dislocation, single, with manipulation; without anesthesia	2
26705	Closed treatment of metacarpophalangeal dislocation, single, with manipulation; requiring anesthesia	2
26706	Percutaneous skeletal fixation of metacarpophalangeal dislocation, single, with manipulation	1
26715	Open treatment of metacarpophalangeal dislocation, single, includes internal fixation, when performed	2
26720	Closed treatment of phalangeal shaft fracture, proximal or middle phalanx, finger or thumb; without manipulation, each	2
26725	Closed treatment of phalangeal shaft fracture, proximal or middle phalanx, finger or thumb; with manipulation, with or without skin or skeletal traction, each	2
26727	Percutaneous skeletal fixation of unstable phalangeal shaft fracture, proximal or middle phalanx, finger or thumb, with manipulation, each	2

26735	Open treatment of phalangeal shaft fracture, proximal or middle phalanx, finger or thumb, includes internal fixation, when performed, each	2
26740	Closed treatment of articular fracture, involving metacarpophalangeal or interphalangeal joint; without manipulation, each	2
26742	Closed treatment of articular fracture, involving metacarpophalangeal or interphalangeal joint; with manipulation, each	2
26746	Open treatment of articular fracture, involving metacarpophalangeal or interphalangeal joint, includes internal fixation, when performed, each	2
26750	Closed treatment of distal phalangeal fracture, finger or thumb; without manipulation, each	2
26755	Closed treatment of distal phalangeal fracture, finger or thumb; with manipulation, each	2
26756	Percutaneous skeletal fixation of distal phalangeal fracture, finger or thumb, each	1
26765	Open treatment of distal phalangeal fracture, finger or thumb, includes internal fixation, when performed, each	2
26770	Closed treatment of interphalangeal joint dislocation, single, with manipulation; without anesthesia	2
26775	Closed treatment of interphalangeal joint dislocation, single, with manipulation; requiring anesthesia	2
26776	Percutaneous skeletal fixation of interphalangeal joint dislocation, single, with manipulation	1
26785	Open treatment of interphalangeal joint dislocation, includes internal fixation, when performed, single	2
26820	Fusion in opposition, thumb, with autogenous graft (includes obtaining graft)	2
26841	Arthrodesis, carpometacarpal joint, thumb, with or without internal fixation	2
26842	Arthrodesis, carpometacarpal joint, thumb, with or without internal fixation; with autograft (includes obtaining graft)	2
26843	Arthrodesis, carpometacarpal joint, digit, other than thumb, each	2
26844	Arthrodesis, carpometacarpal joint, digit, other than thumb, each; with autograft (includes obtaining graft)	2
26850	Arthrodesis, metacarpophalangeal joint, with or without internal fixation	2
26852	Arthrodesis, metacarpophalangeal joint, with or without internal fixation; with autograft (includes obtaining graft)	2
26860	Arthrodesis, interphalangeal joint, with or without internal fixation	1
26861	Arthrodesis, interphalangeal joint, with or without internal fixation; each additional interphalangeal joint (List separately in addition to code for primary procedure)	1
26862	Arthrodesis, interphalangeal joint, with or without internal fixation; with autograft (includes obtaining graft)	1

26863	Arthrodesis, interphalangeal joint, with or without internal fixation; with autograft (includes obtaining graft), each additional joint (List separately in addition to code for primary procedure)	1
26910	Amputation, metacarpal, with finger or thumb (ray amputation), single, with or without interosseous transfer	2
26951	Amputation, finger or thumb, primary or secondary, any joint or phalanx, single, including neurectomies; with direct closure	2
26952	Amputation, finger or thumb, primary or secondary, any joint or phalanx, single, including neurectomies; with local advancement flaps (V-Y, hood)	1
26989	Unlisted procedure, hands or fingers	1
26990	Incision and drainage, pelvis or hip joint area; deep abscess or hematoma	2
26991	Incision and drainage, pelvis or hip joint area; infected bursa	2
26992	Incision, bone cortex, pelvis and/or hip joint (eg, osteomyelitis or bone abscess)	1
27000	Tenotomy, adductor of hip, percutaneous (separate procedure)	2
27001	Tenotomy, adductor of hip, open	2
27003	Tenotomy, adductor, subcutaneous, open, with obturator neurectomy	2
27005	Tenotomy, hip flexor(s), open (separate procedure)	2
27006	Tenotomy, abductors and/or extensor(s) of hip, open (separate procedure)	2
27025	Fasciotomy, hip or thigh, any type	2
27027	Decompression fasciotomy(ies), pelvic (buttock) compartment(s) (eg, gluteus medius-minimus, gluteus maximus, iliopsoas, and/or tensor fascia lata muscle), unilateral	2
27030	Arthrotomy, hip, with drainage (eg, infection)	2
27033	Arthrotomy, hip, including exploration or removal of loose or foreign body	2
27035	Denervation, hip joint, intrapelvic or extrapelvic intra-articular branches of sciatic, femoral, or obturator nerves	2
27036	Capsulectomy or capsulotomy, hip, with or without excision of heterotopic bone, with release of hip flexor muscles (ie, gluteus medius, gluteus minimus, tensor fascia latae, rectus femoris, sartorius, iliopsoas)	2
27040	Biopsy, soft tissue of pelvis and hip area; superficial	2
27041	Biopsy, soft tissue of pelvis and hip area; deep, subfascial or intramuscular	2
27043	Excision, tumor, soft tissue of pelvis and hip area, subcutaneous; 3 cm or greater	2
27045	Excision, tumor, soft tissue of pelvis and hip area, subfascial (eg, intramuscular); 5 cm or greater	2
27047	Excision, tumor, soft tissue of pelvis and hip area, subcutaneous; less than 3 cm	2
27048	Excision, tumor, soft tissue of pelvis and hip area, subfascial (eg, intramuscular); less than 5 cm	2
27049	Radical resection of tumor (eg, sarcoma), soft tissue of pelvis and hip area; less than 5 cm	1

27050	Arthrotomy, with biopsy; sacroiliac joint	2
27052	Arthrotomy, with biopsy; hip joint	2
27054	Arthrotomy with synovectomy, hip joint	2
27057	Decompression fasciotomy(ies), pelvic (buttock) compartment(s) (eg, gluteus medius-minimus, gluteus maximus, iliopsoas, and/or tensor fascia lata muscle) with debridement of nonviable muscle, unilateral	2
27059	Radical resection of tumor (eg, sarcoma), soft tissue of pelvis and hip area; 5 cm or greater	2
27060	Excision; ischial bursa	2
27062	Excision; trochanteric bursa or calcification	2
27065	Excision of bone cyst or benign tumor, wing of ilium, symphysis pubis, or greater trochanter of femur; superficial, includes autograft, when performed	2
27066	Excision of bone cyst or benign tumor, wing of ilium, symphysis pubis, or greater trochanter of femur; deep (subfascial), includes autograft, when performed	2
27067	Excision of bone cyst or benign tumor, wing of ilium, symphysis pubis, or greater trochanter of femur; with autograft requiring separate incision	2
27070	Partial excision, wing of ilium, symphysis pubis, or greater trochanter of femur, (craterization, saucerization) (eg, osteomyelitis or bone abscess); superficial	2
27071	Partial excision, wing of ilium, symphysis pubis, or greater trochanter of femur, (craterization, saucerization) (eg, osteomyelitis or bone abscess); deep (subfascial or intramuscular)	2
27075	Radical resection of tumor; wing of ilium, 1 pubic or ischial ramus or symphysis pubis	2
27076	Radical resection of tumor; ilium, including acetabulum, both pubic rami, or ischium and acetabulum	2
27077	Radical resection of tumor; innominate bone, total	2
27078	Radical resection of tumor; ischial tuberosity and greater trochanter of femur	2
27080	Coccygectomy, primary	1
27086	Removal of foreign body, pelvis or hip; subcutaneous tissue	2
27087	Removal of foreign body, pelvis or hip; deep (subfascial or intramuscular)	1
27090	Removal of hip prosthesis; (separate procedure)	2
27091	Removal of hip prosthesis; complicated, including total hip prosthesis, methylmethacrylate with or without insertion of spacer	2
27093	Injection procedure for hip arthrography; without anesthesia	2
27095	Injection procedure for hip arthrography; with anesthesia	2
27096	Injection procedure for sacroiliac joint, anesthetic/steroid, with image guidance (fluoroscopy or CT) including arthrography when performed	2
27097	Release or recession, hamstring, proximal	1
27098	Transfer, adductor to ischium	1

27100	Transfer external oblique muscle to greater trochanter including fascial or tendon extension (graft)	2
27105	Transfer paraspinal muscle to hip (includes fascial or tendon extension graft)	1
27110	Transfer iliopsoas; to greater trochanter of femur	2
27111	Transfer iliopsoas; to femoral neck	2
27120	Acetabuloplasty; (eg, Whitman, Colonna, Haygroves, or cup type)	2
27122	Acetabuloplasty; resection, femoral head (eg, Girdlestone procedure)	2
27125	Hemiarthroplasty, hip, partial (eg, femoral stem prosthesis, bipolar arthroplasty)	2
27130	Arthroplasty, acetabular and proximal femoral prosthetic replacement (total hip arthroplasty), with or without autograft or allograft	2
27132	Conversion of previous hip surgery to total hip arthroplasty, with or without autograft or allograft	2
27134	Revision of total hip arthroplasty; both components, with or without autograft or allograft	2
27137	Revision of total hip arthroplasty; acetabular component only, with or without autograft or allograft	2
27138	Revision of total hip arthroplasty; femoral component only, with or without allograft	2
27140	Osteotomy and transfer of greater trochanter of femur (separate procedure)	2
27146	Osteotomy, iliac, acetabular or innominate bone	2
27147	Osteotomy, iliac, acetabular or innominate bone; with open reduction of hip	2
27151	Osteotomy, iliac, acetabular or innominate bone; with femoral osteotomy	2
27156	Osteotomy, iliac, acetabular or innominate bone; with femoral osteotomy and with open reduction of hip	1
27158	Osteotomy, pelvis, bilateral (eg, congenital malformation)	1
27161	Osteotomy, femoral neck (separate procedure)	2
27165	Osteotomy, intertrochanteric or subtrochanteric including internal or external fixation and/or cast	2
27170	Bone graft, femoral head, neck, intertrochanteric or subtrochanteric area (includes obtaining bone graft)	2
27175	Treatment of slipped femoral epiphysis; by traction, without reduction	2
27176	Treatment of slipped femoral epiphysis; by single or multiple pinning, in situ	2
27177	Open treatment of slipped femoral epiphysis; single or multiple pinning or bone graft (includes obtaining graft)	2
27178	Open treatment of slipped femoral epiphysis; closed manipulation with single or multiple pinning	1
27179	Open treatment of slipped femoral epiphysis; osteoplasty of femoral neck (Heyman type procedure)	2

27181	Open treatment of slipped femoral epiphysis; osteotomy and internal fixation	1
27185	Epiphyseal arrest by epiphysiodesis or stapling, greater trochanter of femur	2
27187	Prophylactic treatment (nailing, pinning, plating or wiring) with or without methylmethacrylate, femoral neck and proximal femur	2
27197	Closed treatment of posterior pelvic ring fracture(s), dislocation(s), diastasis or subluxation of the ilium, sacroiliac joint, and/or sacrum, with or without anterior pelvic ring fracture(s) and/or dislocation(s) of the pubic symphysis and/or superior/inferior rami, unilateral or bilateral; without manipulation	1
27198	Closed treatment of posterior pelvic ring fracture(s), dislocation(s), diastasis or subluxation of the ilium, sacroiliac joint, and/or sacrum, with or without anterior pelvic ring fracture(s) and/or dislocation(s) of the pubic symphysis and/or superior/inferior rami, unilateral or bilateral; with manipulation, requiring more than local anesthesia (ie, general anesthesia, moderate sedation, spinal/epidural)	1
27200	Closed treatment of coccygeal fracture	1
27202	Open treatment of coccygeal fracture	1
27215	Open treatment of iliac spine(s), tuberosity avulsion, or iliac wing fracture(s), unilateral, for pelvic bone fracture patterns that do not disrupt the pelvic ring, includes internal fixation, when performed	1
27216	Percutaneous skeletal fixation of posterior pelvic bone fracture and/or dislocation, for fracture patterns that disrupt the pelvic ring, unilateral (includes ipsilateral ilium, sacroiliac joint and/or sacrum)	1
27217	Open treatment of anterior pelvic bone fracture and/or dislocation for fracture patterns that disrupt the pelvic ring, unilateral, includes internal fixation, when performed (includes pubic symphysis and/or ipsilateral superior/inferior rami)	1
27218	Open treatment of posterior pelvic bone fracture and/or dislocation, for fracture patterns that disrupt the pelvic ring, unilateral, includes internal fixation, when performed (includes ipsilateral ilium, sacroiliac joint and/or sacrum)	1
27220	Closed treatment of acetabulum (hip socket) fracture(s); without manipulation	2
27222	Closed treatment of acetabulum (hip socket) fracture(s); with manipulation, with or without skeletal traction	2
27226	Open treatment of posterior or anterior acetabular wall fracture, with internal fixation	2
27227	Open treatment of acetabular fracture(s) involving anterior or posterior (one) column, or a fracture running transversely across the acetabulum, with internal fixation	2
27228	Open treatment of acetabular fracture(s) involving anterior and posterior (two) columns, includes T-fracture and both column fracture with complete articular detachment, or single column or transverse fracture with associated acetabular wall fracture, with internal fixation	2
27230	Closed treatment of femoral fracture, proximal end, neck; without manipulation	2
27232	Closed treatment of femoral fracture, proximal end, neck; with manipulation, with or without skeletal traction	2

27235	Percutaneous skeletal fixation of femoral fracture, proximal end, neck	2
27236	Open treatment of femoral fracture, proximal end, neck, internal fixation or prosthetic replacement	2
27238	Closed treatment of intertrochanteric, peritrochanteric, or subtrochanteric femoral fracture; without manipulation	2
27240	Closed treatment of intertrochanteric, peritrochanteric, or subtrochanteric femoral fracture; with manipulation, with or without skin or skeletal traction	2
27244	Treatment of intertrochanteric, peritrochanteric, or subtrochanteric femoral fracture; with plate/screw type implant, with or without cerclage	2
27245	Treatment of intertrochanteric, peritrochanteric, or subtrochanteric femoral fracture; with intramedullary implant, with or without interlocking screws and/or cerclage	2
27246	Closed treatment of greater trochanteric fracture, without manipulation	2
27248	Open treatment of greater trochanteric fracture, includes internal fixation, when performed	2
27250	Closed treatment of hip dislocation, traumatic; without anesthesia	2
27252	Closed treatment of hip dislocation, traumatic; requiring anesthesia	2
27253	Open treatment of hip dislocation, traumatic, without internal fixation	2
27254	Open treatment of hip dislocation, traumatic, with acetabular wall and femoral head fracture, with or without internal or external fixation	2
27256	Treatment of spontaneous hip dislocation (developmental, including congenital or pathological), by abduction, splint or traction; without anesthesia, without manipulation	2
27257	Treatment of spontaneous hip dislocation (developmental, including congenital or pathological), by abduction, splint or traction; with manipulation, requiring anesthesia	2
27258	Open treatment of spontaneous hip dislocation (developmental, including congenital or pathological), replacement of femoral head in acetabulum (including tenotomy, etc)	2
27259	Open treatment of spontaneous hip dislocation (developmental, including congenital or pathological), replacement of femoral head in acetabulum (including tenotomy, etc); with femoral shaft shortening	2
27265	Closed treatment of post hip arthroplasty dislocation; without anesthesia	1
27266	Closed treatment of post hip arthroplasty dislocation; requiring regional or general anesthesia	1
27267	Closed treatment of femoral fracture, proximal end, head; without manipulation	2
27268	Closed treatment of femoral fracture, proximal end, head; with manipulation	2
27269	Open treatment of femoral fracture, proximal end, head, includes internal fixation, when performed	2
27275	Manipulation, hip joint, requiring general anesthesia	1

27279	Arthrodesis, sacroiliac joint, percutaneous or minimally invasive (indirect visualization), with image guidance, includes obtaining bone graft when performed, and placement of transfixing device	1
27280	Arthrodesis, open, sacroiliac joint, including obtaining bone graft, including instrumentation, when performed	2
27282	Arthrodesis, symphysis pubis (including obtaining graft)	1
27284	Arthrodesis, hip joint (including obtaining graft)	2
27286	Arthrodesis, hip joint (including obtaining graft); with subtrochanteric osteotomy	1
27290	Interpelviabdominal amputation (hindquarter amputation)	2
27295	Disarticulation of hip	2
27299	Unlisted procedure, pelvis or hip joint	1
27301	Incision and drainage, deep abscess, bursa, or hematoma, thigh or knee region	2
27303	Incision, deep, with opening of bone cortex, femur or knee (eg, osteomyelitis or bone abscess)	2
27305	Fasciotomy, iliotibial (tenotomy), open	2
27306	Tenotomy, percutaneous, adductor or hamstring; single tendon (separate procedure)	2
27307	Tenotomy, percutaneous, adductor or hamstring; multiple tendons	2
27310	Arthrotomy, knee, with exploration, drainage, or removal of foreign body (eg, infection)	2
27323	Biopsy, soft tissue of thigh or knee area; superficial	2
27324	Biopsy, soft tissue of thigh or knee area; deep (subfascial or intramuscular)	2
27327	Excision, tumor, soft tissue of thigh or knee area, subcutaneous; less than 3 cm	2
27328	Excision, tumor, soft tissue of thigh or knee area, subfascial (eg, intramuscular); less than 5 cm	1
27329	Radical resection of tumor (eg, sarcoma), soft tissue of thigh or knee area; less than 5 cm	1
27330	Arthrotomy, knee; with synovial biopsy only	2
27331	Arthrotomy, knee; including joint exploration, biopsy, or removal of loose or foreign bodies	2
27332	Arthrotomy, with excision of semilunar cartilage (meniscectomy) knee; medial OR lateral	2
27333	Arthrotomy, with excision of semilunar cartilage (meniscectomy) knee; medial AND lateral	2
27334	Arthrotomy, with synovectomy, knee; anterior OR posterior	2
27335	Arthrotomy, with synovectomy, knee; anterior AND posterior including popliteal area	2
27337	Excision, tumor, soft tissue of thigh or knee area, subcutaneous; 3 cm or greater	2

27339	Excision, tumor, soft tissue of thigh or knee area, subfascial (eg, intramuscular); 5 cm or greater	2
27340	Excision, prepatellar bursa	2
27345	Excision of synovial cyst of popliteal space (eg, Baker's cyst)	2
27347	Excision of lesion of meniscus or capsule (eg, cyst, ganglion), knee	2
27350	Patellectomy or hemipatellectomy	2
27355	Excision or curettage of bone cyst or benign tumor of femur	2
27356	Excision or curettage of bone cyst or benign tumor of femur; with allograft	2
27357	Excision or curettage of bone cyst or benign tumor of femur; with autograft (includes obtaining graft)	2
27358	Excision or curettage of bone cyst or benign tumor of femur; with internal fixation (List in addition to code for primary procedure)	1
27360	Partial excision (craterization, saucerization, or diaphysectomy) bone, femur, proximal tibia and/or fibula (eg, osteomyelitis or bone abscess)	2
27364	Radical resection of tumor (eg, sarcoma), soft tissue of thigh or knee area; 5 cm or greater	2
27365	Radical resection of tumor, femur or knee	2
27369	Injection procedure for contrast knee arthrography or contrast enhanced CT/MRI knee arthrography	2
27372	Removal of foreign body, deep, thigh region or knee area	1
27380	Suture of infrapatellar tendon; primary	2
27381	Suture of infrapatellar tendon; secondary reconstruction, including fascial or tendon graft	2
27385	Suture of quadriceps or hamstring muscle rupture; primary	2
27386	Suture of quadriceps or hamstring muscle rupture; secondary reconstruction, including fascial or tendon graft	1
27390	Tenotomy, open, hamstring, knee to hip; single tendon	2
27391	Tenotomy, open, hamstring, knee to hip; multiple tendons, 1 leg	1
27392	Tenotomy, open, hamstring, knee to hip; multiple tendons, bilateral	1
27393	Lengthening of hamstring tendon; single tendon	2
27394	Lengthening of hamstring tendon; multiple tendons, 1 leg	1
27395	Lengthening of hamstring tendon; multiple tendons, bilateral	1
27396	Transplant or transfer (with muscle redirection or rerouting), thigh (eg, extensor to flexor); single tendon	2
27397	Transplant or transfer (with muscle redirection or rerouting), thigh (eg, extensor to flexor); multiple tendons	2
27400	Transfer, tendon or muscle, hamstrings to femur (eg, Egger's type procedure)	2
27403	Arthrotomy with meniscus repair, knee	1

27405	Repair, primary, torn ligament and/or capsule, knee; collateral	2
27407	Repair, primary, torn ligament and/or capsule, knee; cruciate	2
27409	Repair, primary, torn ligament and/or capsule, knee; collateral and cruciate ligaments	2
27412	Autologous chondrocyte implantation, knee	1
27415	Osteochondral allograft, knee, open	1
27416	Osteochondral autograft(s), knee, open (eg, mosaicplasty) (includes harvesting of autograft[s])	2
27418	Anterior tibial tubercleplasty (eg, Maquet type procedure)	2
27420	Reconstruction of dislocating patella; (eg, Hauser type procedure)	2
27422	Reconstruction of dislocating patella; with extensor realignment and/or muscle advancement or release (eg, Campbell, Goldwaite type procedure)	2
27424	Reconstruction of dislocating patella; with patellectomy	2
27425	Lateral retinacular release, open	2
27427	Ligamentous reconstruction (augmentation), knee; extra-articular	1
27428	Ligamentous reconstruction (augmentation), knee; intra-articular (open)	1
27429	Ligamentous reconstruction (augmentation), knee; intra-articular (open) and extra-articular	1
27430	Quadricepsplasty (eg, Bennett or Thompson type)	2
27435	Capsulotomy, posterior capsular release, knee	2
27437	Arthroplasty, patella; without prosthesis	2
27438	Arthroplasty, patella; with prosthesis	2
27440	Arthroplasty, knee, tibial plateau	2
27441	Arthroplasty, knee, tibial plateau; with debridement and partial synovectomy	2
27442	Arthroplasty, femoral condyles or tibial plateau(s), knee	2
27443	Arthroplasty, femoral condyles or tibial plateau(s), knee; with debridement and partial synovectomy	2
27445	Arthroplasty, knee, hinge prosthesis (eg, Walldius type)	2
27446	Arthroplasty, knee, condyle and plateau; medial OR lateral compartment	2
27447	Arthroplasty, knee, condyle and plateau; medial AND lateral compartments with or without patella resurfacing (total knee arthroplasty)	2
27448	Osteotomy, femur, shaft or supracondylar; without fixation	2
27450	Osteotomy, femur, shaft or supracondylar; with fixation	2
27454	Osteotomy, multiple, with realignment on intramedullary rod, femoral shaft (eg, Sofield type procedure)	2

27455	Osteotomy, proximal tibia, including fibular excision or osteotomy (includes correction of genu varus [bowleg] or genu valgus [knock-knee]); before epiphyseal closure	2
27457	Osteotomy, proximal tibia, including fibular excision or osteotomy (includes correction of genu varus [bowleg] or genu valgus [knock-knee]); after epiphyseal closure	2
27465	Osteoplasty, femur; shortening (excluding 64876)	2
27466	Osteoplasty, femur; lengthening	2
27468	Osteoplasty, femur; combined, lengthening and shortening with femoral segment transfer	2
27470	Repair, nonunion or malunion, femur, distal to head and neck; without graft (eg, compression technique)	2
27472	Repair, nonunion or malunion, femur, distal to head and neck; with iliac or other autogenous bone graft (includes obtaining graft)	2
27475	Arrest, epiphyseal, any method (eg, epiphysiodesis); distal femur	2
27477	Arrest, epiphyseal, any method (eg, epiphysiodesis); tibia and fibula, proximal	2
27479	Arrest, epiphyseal, any method (eg, epiphysiodesis); combined distal femur, proximal tibia and fibula	2
27485	Arrest, hemiepiphyseal, distal femur or proximal tibia or fibula (eg, genu varus or valgus)	2
27486	Revision of total knee arthroplasty, with or without allograft; 1 component	2
27487	Revision of total knee arthroplasty, with or without allograft; femoral and entire tibial component	2
27488	Removal of prosthesis, including total knee prosthesis, methylmethacrylate with or without insertion of spacer, knee	2
27495	Prophylactic treatment (nailing, pinning, plating, or wiring) with or without methylmethacrylate, femur	2
27496	Decompression fasciotomy, thigh and/or knee, 1 compartment (flexor or extensor or adductor)	2
27497	Decompression fasciotomy, thigh and/or knee, 1 compartment (flexor or extensor or adductor); with debridement of nonviable muscle and/or nerve	2
27498	Decompression fasciotomy, thigh and/or knee, multiple compartments	2
27499	Decompression fasciotomy, thigh and/or knee, multiple compartments; with debridement of nonviable muscle and/or nerve	2
27500	Closed treatment of femoral shaft fracture, without manipulation	2
27501	Closed treatment of supracondylar or transcondylar femoral fracture with or without intercondylar extension, without manipulation	2
27502	Closed treatment of femoral shaft fracture, with manipulation, with or without skin or skeletal traction	2

27503	Closed treatment of supracondylar or transcondylar femoral fracture with or without intercondylar extension, with manipulation, with or without skin or skeletal	2
	traction	
27506	Open treatment of femoral shaft fracture, with or without external fixation, with insertion of intramedullary implant, with or without cerclage and/or locking screws	2
27507	Open treatment of femoral shaft fracture with plate/screws, with or without cerclage	2
27508	Closed treatment of femoral fracture, distal end, medial or lateral condyle, without manipulation	2
27509	Percutaneous skeletal fixation of femoral fracture, distal end, medial or lateral condyle, or supracondylar or transcondylar, with or without intercondylar extension, or distal femoral epiphyseal separation	2
27510	Closed treatment of femoral fracture, distal end, medial or lateral condyle, with manipulation	2
27511	Open treatment of femoral supracondylar or transcondylar fracture without intercondylar extension, includes internal fixation, when performed	2
27513	Open treatment of femoral supracondylar or transcondylar fracture with intercondylar extension, includes internal fixation, when performed	1
27514	Open treatment of femoral fracture, distal end, medial or lateral condyle, includes internal fixation, when performed	2
27516	Closed treatment of distal femoral epiphyseal separation; without manipulation	2
27517	Closed treatment of distal femoral epiphyseal separation; with manipulation, with or without skin or skeletal traction	2
27519	Open treatment of distal femoral epiphyseal separation, includes internal fixation, when performed	2
27520	Closed treatment of patellar fracture, without manipulation	2
27524	Open treatment of patellar fracture, with internal fixation and/or partial or complete patellectomy and soft tissue repair	2
27530	Closed treatment of tibial fracture, proximal (plateau); without manipulation	2
27532	Closed treatment of tibial fracture, proximal (plateau); with or without manipulation, with skeletal traction	2
27535	Open treatment of tibial fracture, proximal (plateau); unicondylar, includes internal fixation, when performed	2
27536	Open treatment of tibial fracture, proximal (plateau); bicondylar, with or without internal fixation	2
27538	Closed treatment of intercondylar spine(s) and/or tuberosity fracture(s) of knee, with or without manipulation	2
27540	Open treatment of intercondylar spine(s) and/or tuberosity fracture(s) of the knee, includes internal fixation, when performed	2
27550	Closed treatment of knee dislocation; without anesthesia	2
27552	Closed treatment of knee dislocation; requiring anesthesia	2

27556	Open treatment of knee dislocation, includes internal fixation, when performed; without primary ligamentous repair or augmentation/reconstruction	2
27557	Open treatment of knee dislocation, includes internal fixation, when performed; with primary ligamentous repair	2
27558	Open treatment of knee dislocation, includes internal fixation, when performed; with primary ligamentous repair, with augmentation/reconstruction	2
27560	Closed treatment of patellar dislocation; without anesthesia	2
27562	Closed treatment of patellar dislocation; requiring anesthesia	2
27566	Open treatment of patellar dislocation, with or without partial or total patellectomy	2
27570	Manipulation of knee joint under general anesthesia (includes application of traction or other fixation devices)	2
27580	Arthrodesis, knee, any technique	2
27590	Amputation, thigh, through femur, any level	2
27591	Amputation, thigh, through femur, any level; immediate fitting technique including first cast	2
27592	Amputation, thigh, through femur, any level; open, circular (guillotine)	2
27594	Amputation, thigh, through femur, any level; secondary closure or scar revision	2
27596	Amputation, thigh, through femur, any level; re-amputation	2
27598	Disarticulation at knee	2
27599	Unlisted procedure, femur or knee	1
27600	Decompression fasciotomy, leg; anterior and/or lateral compartments only	2
27601	Decompression fasciotomy, leg; posterior compartment(s) only	2
27602	Decompression fasciotomy, leg; anterior and/or lateral, and posterior compartment(s)	2
27603	Incision and drainage, leg or ankle; deep abscess or hematoma	2
27604	Incision and drainage, leg or ankle; infected bursa	2
27605	Tenotomy, percutaneous, Achilles tendon (separate procedure); local anesthesia	2
27606	Tenotomy, percutaneous, Achilles tendon (separate procedure); general anesthesia	2
27607	Incision (eg, osteomyelitis or bone abscess), leg or ankle	1
27610	Arthrotomy, ankle, including exploration, drainage, or removal of foreign body	2
27612	Arthrotomy, posterior capsular release, ankle, with or without Achilles tendon lengthening	2
27613	Biopsy, soft tissue of leg or ankle area; superficial	2
27614	Biopsy, soft tissue of leg or ankle area; deep (subfascial or intramuscular)	2
27615	Radical resection of tumor (eg, sarcoma), soft tissue of leg or ankle area; less than 5 cm	1

27616	Radical resection of tumor (eg, sarcoma), soft tissue of leg or ankle area; 5 cm or greater	2
27618	Excision, tumor, soft tissue of leg or ankle area, subcutaneous; less than 3 cm	2
27619	Excision, tumor, soft tissue of leg or ankle area, subfascial (eg, intramuscular); less than 5 cm	1
27620	Arthrotomy, ankle, with joint exploration, with or without biopsy, with or without removal of loose or foreign body	2
27625	Arthrotomy, with synovectomy, ankle	2
27626	Arthrotomy, with synovectomy, ankle; including tenosynovectomy	2
27630	Excision of lesion of tendon sheath or capsule (eg, cyst or ganglion), leg and/or ankle	2
27632	Excision, tumor, soft tissue of leg or ankle area, subcutaneous; 3 cm or greater	2
27634	Excision, tumor, soft tissue of leg or ankle area, subfascial (eg, intramuscular); 5 cm or greater	2
27635	Excision or curettage of bone cyst or benign tumor, tibia or fibula	2
27637	Excision or curettage of bone cyst or benign tumor, tibia or fibula; with autograft (includes obtaining graft)	2
27638	Excision or curettage of bone cyst or benign tumor, tibia or fibula; with allograft	2
27640	Partial excision (craterization, saucerization, or diaphysectomy), bone (eg, osteomyelitis); tibia	2
27641	Partial excision (craterization, saucerization, or diaphysectomy), bone (eg, osteomyelitis); fibula	2
27645	Radical resection of tumor; tibia	2
27646	Radical resection of tumor; fibula	2
27647	Radical resection of tumor; talus or calcaneus	2
27648	Injection procedure for ankle arthrography	1
27650	Repair, primary, open or percutaneous, ruptured Achilles tendon	2
27652	Repair, primary, open or percutaneous, ruptured Achilles tendon; with graft (includes obtaining graft)	2
27654	Repair, secondary, Achilles tendon, with or without graft	2
27656	Repair, fascial defect of leg	2
27658	Repair, flexor tendon, leg; primary, without graft, each tendon	2
27659	Repair, flexor tendon, leg; secondary, with or without graft, each tendon	2
27664	Repair, extensor tendon, leg; primary, without graft, each tendon	2
27665	Repair, extensor tendon, leg; secondary, with or without graft, each tendon	2
27675	Repair, dislocating peroneal tendons; without fibular osteotomy	2
27676	Repair, dislocating peroneal tendons; with fibular osteotomy	1

27680	Tenolysis, flexor or extensor tendon, leg and/or ankle; single, each tendon	2
27681	Tenolysis, flexor or extensor tendon, leg and/or ankle; multiple tendons (through separate incision[s])	2
27685	Lengthening or shortening of tendon, leg or ankle; single tendon (separate procedure)	2
27686	Lengthening or shortening of tendon, leg or ankle; multiple tendons (through same incision), each	2
27687	Gastrocnemius recession (eg, Strayer procedure)	2
27690	Transfer or transplant of single tendon (with muscle redirection or rerouting); superficial (eg, anterior tibial extensors into midfoot)	1
27691	Transfer or transplant of single tendon (with muscle redirection or rerouting); deep (eg, anterior tibial or posterior tibial through interosseous space, flexor digitorum longus, flexor hallucis longus, or peroneal tendon to midfoot or hindfoot)	1
27692	Transfer or transplant of single tendon (with muscle redirection or rerouting); each additional tendon (List separately in addition to code for primary procedure)	1
27695	Repair, primary, disrupted ligament, ankle; collateral	2
27696	Repair, primary, disrupted ligament, ankle; both collateral ligaments	2
27698	Repair, secondary, disrupted ligament, ankle, collateral (eg, Watson-Jones procedure)	2
27700	Arthroplasty, ankle	2
27702	Arthroplasty, ankle; with implant (total ankle)	2
27703	Arthroplasty, ankle; revision, total ankle	2
27704	Removal of ankle implant	2
27705	Osteotomy; tibia	2
27707	Osteotomy; fibula	2
27709	Osteotomy; tibia and fibula	2
27712	Osteotomy; multiple, with realignment on intramedullary rod (eg, Sofield type procedure)	2
27715	Osteoplasty, tibia and fibula, lengthening or shortening	2
27720	Repair of nonunion or malunion, tibia; without graft, (eg, compression technique)	2
27722	Repair of nonunion or malunion, tibia; with sliding graft	2
27724	Repair of nonunion or malunion, tibia; with iliac or other autograft (includes obtaining graft)	2
27725	Repair of nonunion or malunion, tibia; by synostosis, with fibula, any method	2
27726	Repair of fibula nonunion and/or malunion with internal fixation	2
27727	Repair of congenital pseudarthrosis, tibia	2
27730	Arrest, epiphyseal (epiphysiodesis), open; distal tibia	2
27732	Arrest, epiphyseal (epiphysiodesis), open; distal fibula	2

27734	Arrest, epiphyseal (epiphysiodesis), open; distal tibia and fibula	2
27740	Arrest, epiphyseal (epiphysiodesis), any method, combined, proximal and distal tibia and fibula	2
27742	Arrest, epiphyseal (epiphysiodesis), any method, combined, proximal and distal tibia and fibula; and distal femur	1
27745	Prophylactic treatment (nailing, pinning, plating or wiring) with or without methylmethacrylate, tibia	1
27750	Closed treatment of tibial shaft fracture (with or without fibular fracture); without manipulation	2
27752	Closed treatment of tibial shaft fracture (with or without fibular fracture); with manipulation, with or without skeletal traction	2
27756	Percutaneous skeletal fixation of tibial shaft fracture (with or without fibular fracture) (eg, pins or screws)	2
27758	Open treatment of tibial shaft fracture (with or without fibular fracture), with plate/screws, with or without cerclage	2
27759	Treatment of tibial shaft fracture (with or without fibular fracture) by intramedullary implant, with or without interlocking screws and/or cerclage	2
27760	Closed treatment of medial malleolus fracture; without manipulation	2
27762	Closed treatment of medial malleolus fracture; with manipulation, with or without skin or skeletal traction	2
27766	Open treatment of medial malleolus fracture, includes internal fixation, when performed	2
27767	Closed treatment of posterior malleolus fracture; without manipulation	2
27768	Closed treatment of posterior malleolus fracture; with manipulation	2
27769	Open treatment of posterior malleolus fracture, includes internal fixation, when performed	2
27780	Closed treatment of proximal fibula or shaft fracture; without manipulation	2
27781	Closed treatment of proximal fibula or shaft fracture; with manipulation	1
27784	Open treatment of proximal fibula or shaft fracture, includes internal fixation, when performed	2
27786	Closed treatment of distal fibular fracture (lateral malleolus); without manipulation	2
27788	Closed treatment of distal fibular fracture (lateral malleolus); with manipulation	2
27792	Open treatment of distal fibular fracture (lateral malleolus), includes internal fixation, when performed	2
27808	Closed treatment of bimalleolar ankle fracture (eg, lateral and medial malleoli, or lateral and posterior malleoli or medial and posterior malleoli); without manipulation	2
27810	Closed treatment of bimalleolar ankle fracture (eg, lateral and medial malleoli, or lateral and posterior malleoli or medial and posterior malleoli); with manipulation	2

27814	Open treatment of bimalleolar ankle fracture (eg, lateral and medial malleoli, or lateral and posterior malleoli, or medial and posterior malleoli), includes internal fixation, when performed	2
27816	Closed treatment of trimalleolar ankle fracture; without manipulation	2
27818	Closed treatment of trimalleolar ankle fracture; with manipulation	2
27822	Open treatment of trimalleolar ankle fracture, includes internal fixation, when performed, medial and/or lateral malleolus; without fixation of posterior lip	2
27823	Open treatment of trimalleolar ankle fracture, includes internal fixation, when performed, medial and/or lateral malleolus; with fixation of posterior lip	2
27824	Closed treatment of fracture of weight bearing articular portion of distal tibia (eg, pilon or tibial plafond), with or without anesthesia; without manipulation	2
27825	Closed treatment of fracture of weight bearing articular portion of distal tibia (eg, pilon or tibial plafond), with or without anesthesia; with skeletal traction and/or requiring manipulation	2
27826	Open treatment of fracture of weight bearing articular surface/portion of distal tibia (eg, pilon or tibial plafond), with internal fixation, when performed; of fibula only	2
27827	Open treatment of fracture of weight bearing articular surface/portion of distal tibia (eg, pilon or tibial plafond), with internal fixation, when performed; of tibia only	2
27828	Open treatment of fracture of weight bearing articular surface/portion of distal tibia (eg, pilon or tibial plafond), with internal fixation, when performed; of both tibia and fibula	2
27829	Open treatment of distal tibiofibular joint (syndesmosis) disruption, includes internal fixation, when performed	2
27830	Closed treatment of proximal tibiofibular joint dislocation; without anesthesia	2
27831	Closed treatment of proximal tibiofibular joint dislocation; requiring anesthesia	1
27832	Open treatment of proximal tibiofibular joint dislocation, includes internal fixation, when performed, or with excision of proximal fibula	2
27840	Closed treatment of ankle dislocation; without anesthesia	2
27842	Closed treatment of ankle dislocation; requiring anesthesia, with or without percutaneous skeletal fixation	2
27846	Open treatment of ankle dislocation, with or without percutaneous skeletal fixation; without repair or internal fixation	2
27848	Open treatment of ankle dislocation, with or without percutaneous skeletal fixation; with repair or internal or external fixation	2
27860	Manipulation of ankle under general anesthesia (includes application of traction or other fixation apparatus)	2
27870	Arthrodesis, ankle, open	1
27871	Arthrodesis, tibiofibular joint, proximal or distal	2
27880	Amputation, leg, through tibia and fibula	2

27881	Amputation, leg, through tibia and fibula; with immediate fitting technique including application of first cast	2
27882	Amputation, leg, through tibia and fibula; open, circular (guillotine)	2
27884	Amputation, leg, through tibia and fibula; secondary closure or scar revision	2
27886	Amputation, leg, through tibia and fibula; re-amputation	2
27888	Amputation, ankle, through malleoli of tibia and fibula (eg, Syme, Pirogoff type procedures), with plastic closure and resection of nerves	2
27889	Ankle disarticulation	2
27892	Decompression fasciotomy, leg; anterior and/or lateral compartments only, with debridement of nonviable muscle and/or nerve	2
27893	Decompression fasciotomy, leg; posterior compartment(s) only, with debridement of nonviable muscle and/or nerve	2
27894	Decompression fasciotomy, leg; anterior and/or lateral, and posterior compartment(s), with debridement of nonviable muscle and/or nerve	2
27899	Unlisted procedure, leg or ankle	1
28001	Incision and drainage, bursa, foot	2
28002	Incision and drainage below fascia, with or without tendon sheath involvement, foot; single bursal space	2
28003	Incision and drainage below fascia, with or without tendon sheath involvement, foot; multiple areas	2
28005	Incision, bone cortex (eg, osteomyelitis or bone abscess), foot	1
28008	Fasciotomy, foot and/or toe	2
28010	Tenotomy, percutaneous, toe; single tendon	2
28011	Tenotomy, percutaneous, toe; multiple tendons	2
28020	Arthrotomy, including exploration, drainage, or removal of loose or foreign body; intertarsal or tarsometatarsal joint	2
28022	Arthrotomy, including exploration, drainage, or removal of loose or foreign body; metatarsophalangeal joint	2
28024	Arthrotomy, including exploration, drainage, or removal of loose or foreign body; interphalangeal joint	2
28035	Release, tarsal tunnel (posterior tibial nerve decompression)	1
28039	Excision, tumor, soft tissue of foot or toe, subcutaneous; 1.5 cm or greater	2
28041	Excision, tumor, soft tissue of foot or toe, subfascial (eg, intramuscular); 1.5 cm or greater	2
28043	Excision, tumor, soft tissue of foot or toe, subcutaneous; less than 1.5 cm	2
28045	Excision, tumor, soft tissue of foot or toe, subfascial (eg, intramuscular); less than 1.5 cm	1
28046	Radical resection of tumor (eg, sarcoma), soft tissue of foot or toe; less than 3 cm	2

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28047	Radical resection of tumor (eg, sarcoma), soft tissue of foot or toe; 3 cm or greater	2
28050	Arthrotomy with biopsy; intertarsal or tarsometatarsal joint	2
28052	Arthrotomy with biopsy; metatarsophalangeal joint	2
28054	Arthrotomy with biopsy; interphalangeal joint	2
28060	Fasciectomy, plantar fascia; partial (separate procedure)	2
28062	Fasciectomy, plantar fascia; radical (separate procedure)	2
28070	Synovectomy; intertarsal or tarsometatarsal joint, each	2
28072	Synovectomy; metatarsophalangeal joint, each	2
28080	Excision, interdigital (Morton) neuroma, single, each	2
28086	Synovectomy, tendon sheath, foot; flexor	2
28088	Synovectomy, tendon sheath, foot; extensor	2
28090	Excision of lesion, tendon, tendon sheath, or capsule (including synovectomy) (eg, cyst or ganglion); foot	2
28092	Excision of lesion, tendon, tendon sheath, or capsule (including synovectomy) (eg, cyst or ganglion); toe(s), each	2
28100	Excision or curettage of bone cyst or benign tumor, talus or calcaneus	2
28102	Excision or curettage of bone cyst or benign tumor, talus or calcaneus; with iliac or other autograft (includes obtaining graft)	2
28103	Excision or curettage of bone cyst or benign tumor, talus or calcaneus; with allograft	2
28104	Excision or curettage of bone cyst or benign tumor, tarsal or metatarsal, except talus or calcaneus	2
28106	Excision or curettage of bone cyst or benign tumor, tarsal or metatarsal, except talus or calcaneus; with iliac or other autograft (includes obtaining graft)	2
28107	Excision or curettage of bone cyst or benign tumor, tarsal or metatarsal, except talus or calcaneus; with allograft	2
28108	Excision or curettage of bone cyst or benign tumor, phalanges of foot	2
28110	Ostectomy, partial excision, fifth metatarsal head (bunionette) (separate procedure)	2
28111	Ostectomy, complete excision; first metatarsal head	2
28112	Ostectomy, complete excision; other metatarsal head (second, third or fourth)	2
28113	Ostectomy, complete excision; fifth metatarsal head	2
28114	Ostectomy, complete excision; all metatarsal heads, with partial proximal phalangectomy, excluding first metatarsal (eg, Clayton type procedure)	2
28116	Ostectomy, excision of tarsal coalition	2
28118	Ostectomy, calcaneus	2
28119	Ostectomy, calcaneus; for spur, with or without plantar fascial release	2
28120	Partial excision (craterization, saucerization, sequestrectomy, or diaphysectomy) bone (eg, osteomyelitis or bossing); talus or calcaneus	2

28122	Partial excision (craterization, saucerization, sequestrectomy, or diaphysectomy) bone (eg, osteomyelitis or bossing); tarsal or metatarsal bone, except talus or calcaneus	2
28124	Partial excision (craterization, saucerization, sequestrectomy, or diaphysectomy) bone (eg, osteomyelitis or bossing); phalanx of toe	2
28126	Resection, partial or complete, phalangeal base, each toe	2
28130	Talectomy (astragalectomy)	2
28140	Metatarsectomy	2
28150	Phalangectomy, toe, each toe	2
28153	Resection, condyle(s), distal end of phalanx, each toe	2
28160	Hemiphalangectomy or interphalangeal joint excision, toe, proximal end of phalanx, each	2
28171	Radical resection of tumor; tarsal (except talus or calcaneus)	2
28173	Radical resection of tumor; metatarsal	2
28175	Radical resection of tumor; phalanx of toe	2
28190	Removal of foreign body, foot; subcutaneous	2
28192	Removal of foreign body, foot; deep	1
28193	Removal of foreign body, foot; complicated	1
28200	Repair, tendon, flexor, foot; primary or secondary, without free graft, each tendon	2
28202	Repair, tendon, flexor, foot; secondary with free graft, each tendon (includes obtaining graft)	2
28208	Repair, tendon, extensor, foot; primary or secondary, each tendon	2
28210	Repair, tendon, extensor, foot; secondary with free graft, each tendon (includes obtaining graft)	2
28220	Tenolysis, flexor, foot; single tendon	2
28222	Tenolysis, flexor, foot; multiple tendons	2
28225	Tenolysis, extensor, foot; single tendon	2
28226	Tenolysis, extensor, foot; multiple tendons	2
28230	Tenotomy, open, tendon flexor; foot, single or multiple tendon(s) (separate procedure)	2
28232	Tenotomy, open, tendon flexor; toe, single tendon (separate procedure)	2
28234	Tenotomy, open, extensor, foot or toe, each tendon	2
28238	Reconstruction (advancement), posterior tibial tendon with excision of accessory tarsal navicular bone (eg, Kidner type procedure)	2
28240	Tenotomy, lengthening, or release, abductor hallucis muscle	2
28250	Division of plantar fascia and muscle (eg, Steindler stripping) (separate procedure)	2
28260	Capsulotomy, midfoot; medial release only (separate procedure)	2

28261	Capsulotomy, midfoot; with tendon lengthening	2
28262	Capsulotomy, midfoot; extensive, including posterior talotibial capsulotomy and tendon(s) lengthening (eg, resistant clubfoot deformity)	2
28264	Capsulotomy, midtarsal (eg, Heyman type procedure)	2
28270	Capsulotomy; metatarsophalangeal joint, with or without tenorrhaphy, each joint (separate procedure)	2
28272	Capsulotomy; interphalangeal joint, each joint (separate procedure)	2
28280	Syndactylization, toes (eg, webbing or Kelikian type procedure)	2
28285	Correction, hammertoe (eg, interphalangeal fusion, partial or total phalangectomy)	2
28286	Correction, cock-up fifth toe, with plastic skin closure (eg, Ruiz-Mora type procedure)	2
28288	Ostectomy, partial, exostectomy or condylectomy, metatarsal head, each metatarsal head	2
28289	Hallux rigidus correction with cheilectomy, debridement and capsular release of the first metatarsophalangeal joint; without implant	2
28291	Hallux rigidus correction with cheilectomy, debridement and capsular release of the first metatarsophalangeal joint; with implant	2
28292	Correction, hallux valgus (bunionectomy), with sesamoidectomy, when performed; with resection of proximal phalanx base, when performed, any method	2
28295	Correction, hallux valgus (bunionectomy), with sesamoidectomy, when performed; with proximal metatarsal osteotomy, any method	2
28296	Correction, hallux valgus (bunionectomy), with sesamoidectomy, when performed; with distal metatarsal osteotomy, any method	2
28297	Correction, hallux valgus (bunionectomy), with sesamoidectomy, when performed; with first metatarsal and medial cuneiform joint arthrodesis, any method	2
28298	Correction, hallux valgus (bunionectomy), with sesamoidectomy, when performed; with proximal phalanx osteotomy, any method	2
28299	Correction, hallux valgus (bunionectomy), with sesamoidectomy, when performed; with double osteotomy, any method	2
28300	Osteotomy; calcaneus (eg, Dwyer or Chambers type procedure), with or without internal fixation	2
28302	Osteotomy; talus	2
28304	Osteotomy, tarsal bones, other than calcaneus or talus	2
28305	Osteotomy, tarsal bones, other than calcaneus or talus; with autograft (includes obtaining graft) (eg, Fowler type)	1
28306	Osteotomy, with or without lengthening, shortening or angular correction, metatarsal; first metatarsal	2
28307	Osteotomy, with or without lengthening, shortening or angular correction, metatarsal; first metatarsal with autograft (other than first toe)	2

28308	Osteotomy, with or without lengthening, shortening or angular correction, metatarsal; other than first metatarsal, each	2
28309	Osteotomy, with or without lengthening, shortening or angular correction, metatarsal; multiple (eg, Swanson type cavus foot procedure)	2
28310	Osteotomy, shortening, angular or rotational correction; proximal phalanx, first toe (separate procedure)	2
28312	Osteotomy, shortening, angular or rotational correction; other phalanges, any toe	2
28313	Reconstruction, angular deformity of toe, soft tissue procedures only (eg, overlapping second toe, fifth toe, curly toes)	2
28315	Sesamoidectomy, first toe (separate procedure)	2
28320	Repair, nonunion or malunion; tarsal bones	2
28322	Repair, nonunion or malunion; metatarsal, with or without bone graft (includes obtaining graft)	2
28340	Reconstruction, toe, macrodactyly; soft tissue resection	2
28341	Reconstruction, toe, macrodactyly; requiring bone resection	1
28344	Reconstruction, toe(s); polydactyly	2
28345	Reconstruction, toe(s); syndactyly, with or without skin graft(s), each web	2
28360	Reconstruction, cleft foot	2
28400	Closed treatment of calcaneal fracture; without manipulation	2
28405	Closed treatment of calcaneal fracture; with manipulation	2
28406	Percutaneous skeletal fixation of calcaneal fracture, with manipulation	2
28415	Open treatment of calcaneal fracture, includes internal fixation, when performed	1
28420	Open treatment of calcaneal fracture, includes internal fixation, when performed; with primary iliac or other autogenous bone graft (includes obtaining graft)	2
28430	Closed treatment of talus fracture; without manipulation	2
28435	Closed treatment of talus fracture; with manipulation	2
28436	Percutaneous skeletal fixation of talus fracture, with manipulation	2
28445	Open treatment of talus fracture, includes internal fixation, when performed	2
28446	Open osteochondral autograft, talus (includes obtaining graft[s])	1
28450	Treatment of tarsal bone fracture (except talus and calcaneus); without manipulation, each	2
28455	Treatment of tarsal bone fracture (except talus and calcaneus); with manipulation, each	2
28456	Percutaneous skeletal fixation of tarsal bone fracture (except talus and calcaneus), with manipulation, each	1
28465	Open treatment of tarsal bone fracture (except talus and calcaneus), includes internal fixation, when performed, each	2
28470	Closed treatment of metatarsal fracture; without manipulation, each	2

28475	Closed treatment of metatarsal fracture; with manipulation, each	2
28476	Percutaneous skeletal fixation of metatarsal fracture, with manipulation, each	1
28485	Open treatment of metatarsal fracture, includes internal fixation, when performed, each	2
28490	Closed treatment of fracture great toe, phalanx or phalanges; without manipulation	2
28495	Closed treatment of fracture great toe, phalanx or phalanges; with manipulation	2
28496	Percutaneous skeletal fixation of fracture great toe, phalanx or phalanges, with manipulation	2
28505	Open treatment of fracture, great toe, phalanx or phalanges, includes internal fixation, when performed	2
28510	Closed treatment of fracture, phalanx or phalanges, other than great toe; without manipulation, each	2
28515	Closed treatment of fracture, phalanx or phalanges, other than great toe; with manipulation, each	2
28525	Open treatment of fracture, phalanx or phalanges, other than great toe, includes internal fixation, when performed, each	2
28530	Closed treatment of sesamoid fracture	2
28531	Open treatment of sesamoid fracture, with or without internal fixation	2
28540	Closed treatment of tarsal bone dislocation, other than talotarsal; without anesthesia	2
28545	Closed treatment of tarsal bone dislocation, other than talotarsal; requiring anesthesia	2
28546	Percutaneous skeletal fixation of tarsal bone dislocation, other than talotarsal, with manipulation	2
28555	Open treatment of tarsal bone dislocation, includes internal fixation, when performed	2
28570	Closed treatment of talotarsal joint dislocation; without anesthesia	2
28575	Closed treatment of talotarsal joint dislocation; requiring anesthesia	2
28576	Percutaneous skeletal fixation of talotarsal joint dislocation, with manipulation	2
28585	Open treatment of talotarsal joint dislocation, includes internal fixation, when performed	2
28600	Closed treatment of tarsometatarsal joint dislocation; without anesthesia	2
28605	Closed treatment of tarsometatarsal joint dislocation; requiring anesthesia	2
28606	Percutaneous skeletal fixation of tarsometatarsal joint dislocation, with manipulation	1
28615	Open treatment of tarsometatarsal joint dislocation, includes internal fixation, when performed	2
28630	Closed treatment of metatarsophalangeal joint dislocation; without anesthesia	2
28635	Closed treatment of metatarsophalangeal joint dislocation; requiring anesthesia	2

28636	Percutaneous skeletal fixation of metatarsophalangeal joint dislocation, with manipulation	2
28645	Open treatment of metatarsophalangeal joint dislocation, includes internal fixation, when performed	2
28660	Closed treatment of interphalangeal joint dislocation; without anesthesia	2
28665	Closed treatment of interphalangeal joint dislocation; requiring anesthesia	2
28666	Percutaneous skeletal fixation of interphalangeal joint dislocation, with manipulation	2
28675	Open treatment of interphalangeal joint dislocation, includes internal fixation, when performed	2
28705	Arthrodesis; pantalar	2
28715	Arthrodesis; triple	2
28725	Arthrodesis; subtalar	2
28730	Arthrodesis, midtarsal or tarsometatarsal, multiple or transverse	2
28735	Arthrodesis, midtarsal or tarsometatarsal, multiple or transverse; with osteotomy (eg, flatfoot correction)	2
28737	Arthrodesis, with tendon lengthening and advancement, midtarsal, tarsal navicular-cuneiform (eg, Miller type procedure)	1
28740	Arthrodesis, midtarsal or tarsometatarsal, single joint	2
28750	Arthrodesis, great toe; metatarsophalangeal joint	2
28755	Arthrodesis, great toe; interphalangeal joint	2
28760	Arthrodesis, with extensor hallucis longus transfer to first metatarsal neck, great toe, interphalangeal joint (eg, Jones type procedure)	2
28800	Amputation, foot; midtarsal (eg, Chopart type procedure)	2
28805	Amputation, foot; transmetatarsal	2
28810	Amputation, metatarsal, with toe, single	2
28820	Amputation, toe; metatarsophalangeal joint	2
28825	Amputation, toe; interphalangeal joint	2
28890	Extracorporeal shock wave, high energy, performed by a physician or other qualified health care professional, requiring anesthesia other than local, including ultrasound guidance, involving the plantar fascia	1
28899	Unlisted procedure, foot or toes	1
29000	Application of halo type body cast (see 20661-20663 for insertion)	1
29010	Application of Risser jacket, localizer, body; only	1
29015	Application of Risser jacket, localizer, body; including head	1
29035	Application of body cast, shoulder to hips	1
29040	Application of body cast, shoulder to hips; including head, Minerva type	1

29044	Application of body cast, shoulder to hips; including 1 thigh	1
29046	Application of body cast, shoulder to hips; including both thighs	1
29049	Application, cast; figure-of-eight	1
29055	Application, cast; shoulder spica	2
29058	Application, cast; plaster Velpeau	1
29065	Application, cast; shoulder to hand (long arm)	2
29075	Application, cast; elbow to finger (short arm)	2
29085	Application, cast; hand and lower forearm (gauntlet)	2
29086	Application, cast; finger (eg, contracture)	1
29105	Application of long arm splint (shoulder to hand)	2
29125	Application of short arm splint (forearm to hand); static	2
29126	Application of short arm splint (forearm to hand); dynamic	2
29130	Application of finger splint; static	3
29131	Application of finger splint; dynamic	1
29200	Strapping; thorax	1
29240	Strapping; shoulder (eg, Velpeau)	2
29260	Strapping; elbow or wrist	2
29280	Strapping; hand or finger	2
29305	Application of hip spica cast; 1 leg	1
29325	Application of hip spica cast; 1 and one-half spica or both legs	1
29345	Application of long leg cast (thigh to toes)	2
29355	Application of long leg cast (thigh to toes); walker or ambulatory type	2
29358	Application of long leg cast brace	2
29365	Application of cylinder cast (thigh to ankle)	2
29405	Application of short leg cast (below knee to toes)	2
29425	Application of short leg cast (below knee to toes); walking or ambulatory type	2
29435	Application of patellar tendon bearing (PTB) cast	1
29440	Adding walker to previously applied cast	2
29445	Application of rigid total contact leg cast	2
29450	Application of clubfoot cast with molding or manipulation, long or short leg	2
29505	Application of long leg splint (thigh to ankle or toes)	2
29515	Application of short leg splint (calf to foot)	2
29520	Strapping; hip	2
29530	Strapping; knee	2

29540	Strapping; ankle and/or foot	2
29550	Strapping; toes	2
29580	Strapping; Unna boot	1
29581	Application of multi-layer compression system; leg (below knee), including ankle and foot	2
29584	Application of multi-layer compression system; upper arm, forearm, hand, and fingers	2
29700	Removal or bivalving; gauntlet, boot or body cast	2
29705	Removal or bivalving; full arm or full leg cast	1
29710	Removal or bivalving; shoulder or hip spica, Minerva, or Risser jacket, etc.	1
29720	Repair of spica, body cast or jacket	1
29730	Windowing of cast	2
29740	Wedging of cast (except clubfoot casts)	2
29750	Wedging of clubfoot cast	2
29799	Unlisted procedure, casting or strapping	1
29800	Arthroscopy, temporomandibular joint, diagnostic, with or without synovial biopsy (separate procedure)	2
29804	Arthroscopy, temporomandibular joint, surgical	2
29805	Arthroscopy, shoulder, diagnostic, with or without synovial biopsy (separate procedure)	1
29806	Arthroscopy, shoulder, surgical; capsulorrhaphy	1
29807	Arthroscopy, shoulder, surgical; repair of SLAP lesion	1
29819	Arthroscopy, shoulder, surgical; with removal of loose body or foreign body	2
29820	Arthroscopy, shoulder, surgical; synovectomy, partial	2
29821	Arthroscopy, shoulder, surgical; synovectomy, complete	2
29822	Arthroscopy, shoulder, surgical; debridement, limited, 1 or 2 discrete structures (eg, humeral bone, humeral articular cartilage, glenoid bone, glenoid articular cartilage, biceps tendon, biceps anchor complex, labrum, articular capsule, articular side of the rotator cuff, bursal side of the rotator cuff, subacromial bursa, foreign body[ies])	2
29823	Arthroscopy, shoulder, surgical; debridement, extensive, 3 or more discrete structures (eg, humeral bone, humeral articular cartilage, glenoid bone, glenoid articular cartilage, biceps tendon, biceps anchor complex, labrum, articular capsule, articular side of the rotator cuff, bursal side of the rotator cuff, subacromial bursa, foreign body[ies])	2
29824	Arthroscopy, shoulder, surgical; distal claviculectomy including distal articular surface (Mumford procedure)	1
29825	Arthroscopy, shoulder, surgical; with lysis and resection of adhesions, with or without manipulation	2

29826	Arthroscopy, shoulder, surgical; decompression of subacromial space with partial acromioplasty, with coracoacromial ligament (ie, arch) release, when performed (List separately in addition to code for primary procedure)	2
29827	Arthroscopy, shoulder, surgical; with rotator cuff repair	2
29828	Arthroscopy, shoulder, surgical; biceps tenodesis	2
29830	Arthroscopy, elbow, diagnostic, with or without synovial biopsy (separate procedure)	2
29834	Arthroscopy, elbow, surgical; with removal of loose body or foreign body	2
29835	Arthroscopy, elbow, surgical; synovectomy, partial	2
29836	Arthroscopy, elbow, surgical; synovectomy, complete	2
29837	Arthroscopy, elbow, surgical; debridement, limited	2
29838	Arthroscopy, elbow, surgical; debridement, extensive	2
29840	Arthroscopy, wrist, diagnostic, with or without synovial biopsy (separate procedure)	1
29843	Arthroscopy, wrist, surgical; for infection, lavage and drainage	2
29844	Arthroscopy, wrist, surgical; synovectomy, partial	2
29845	Arthroscopy, wrist, surgical; synovectomy, complete	1
29846	Arthroscopy, wrist, surgical; excision and/or repair of triangular fibrocartilage and/or joint debridement	2
29847	Arthroscopy, wrist, surgical; internal fixation for fracture or instability	2
29848	Endoscopy, wrist, surgical, with release of transverse carpal ligament	2
29850	Arthroscopically aided treatment of intercondylar spine(s) and/or tuberosity fracture(s) of the knee, with or without manipulation; without internal or external fixation (includes arthroscopy)	2
29851	Arthroscopically aided treatment of intercondylar spine(s) and/or tuberosity fracture(s) of the knee, with or without manipulation; with internal or external fixation (includes arthroscopy)	2
29855	Arthroscopically aided treatment of tibial fracture, proximal (plateau); unicondylar, includes internal fixation, when performed (includes arthroscopy)	2
29856	Arthroscopically aided treatment of tibial fracture, proximal (plateau); bicondylar, includes internal fixation, when performed (includes arthroscopy)	2
29860	Arthroscopy, hip, diagnostic with or without synovial biopsy (separate procedure)	2
29861	Arthroscopy, hip, surgical; with removal of loose body or foreign body	2
29862	Arthroscopy, hip, surgical; with debridement/shaving of articular cartilage (chondroplasty), abrasion arthroplasty, and/or resection of labrum	1
29863	Arthroscopy, hip, surgical; with synovectomy	1
29866	Arthroscopy, knee, surgical; osteochondral autograft(s) (eg, mosaicplasty) (includes harvesting of the autograft[s])	1
29867	Arthroscopy, knee, surgical; osteochondral allograft (eg, mosaicplasty)	2

29868	Arthroscopy, knee, surgical; meniscal transplantation (includes arthrotomy for meniscal insertion), medial or lateral	1
29870	Arthroscopy, knee, diagnostic, with or without synovial biopsy (separate procedure)	2
29871	Arthroscopy, knee, surgical; for infection, lavage and drainage	2
29873	Arthroscopy, knee, surgical; with lateral release	2
29874	Arthroscopy, knee, surgical; for removal of loose body or foreign body (eg, osteochondritis dissecans fragmentation, chondral fragmentation)	2
29875	Arthroscopy, knee, surgical; synovectomy, limited (eg, plica or shelf resection) (separate procedure)	2
29876	Arthroscopy, knee, surgical; synovectomy, major, 2 or more compartments (eg, medial or lateral)	2
29877	Arthroscopy, knee, surgical; debridement/shaving of articular cartilage (chondroplasty)	2
29879	Arthroscopy, knee, surgical; abrasion arthroplasty (includes chondroplasty where necessary) or multiple drilling or microfracture	2
29880	Arthroscopy, knee, surgical; with meniscectomy (medial AND lateral, including any meniscal shaving) including debridement/shaving of articular cartilage (chondroplasty), same or separate compartment(s), when performed	2
29881	Arthroscopy, knee, surgical; with meniscectomy (medial OR lateral, including any meniscal shaving) including debridement/shaving of articular cartilage (chondroplasty), same or separate compartment(s), when performed	2
29882	Arthroscopy, knee, surgical; with meniscus repair (medial OR lateral)	2
29883	Arthroscopy, knee, surgical; with meniscus repair (medial AND lateral)	2
29884	Arthroscopy, knee, surgical; with lysis of adhesions, with or without manipulation (separate procedure)	2
29885	Arthroscopy, knee, surgical; drilling for osteochondritis dissecans with bone grafting, with or without internal fixation (including debridement of base of lesion)	2
29886	Arthroscopy, knee, surgical; drilling for intact osteochondritis dissecans lesion	2
29887	Arthroscopy, knee, surgical; drilling for intact osteochondritis dissecans lesion with internal fixation	2
29888	Arthroscopically aided anterior cruciate ligament repair/augmentation or reconstruction	2
29889	Arthroscopically aided posterior cruciate ligament repair/augmentation or reconstruction	1
29891	Arthroscopy, ankle, surgical, excision of osteochondral defect of talus and/or tibia, including drilling of the defect	1
29892	Arthroscopically aided repair of large osteochondritis dissecans lesion, talar dome fracture, or tibial plafond fracture, with or without internal fixation (includes arthroscopy)	1
29893	Endoscopic plantar fasciotomy	2

29894	Arthroscopy, ankle (tibiotalar and fibulotalar joints), surgical; with removal of loose body or foreign body	2
29895	Arthroscopy, ankle (tibiotalar and fibulotalar joints), surgical; synovectomy, partial	2
29897	Arthroscopy, ankle (tibiotalar and fibulotalar joints), surgical; debridement, limited	2
29898	Arthroscopy, ankle (tibiotalar and fibulotalar joints), surgical; debridement, extensive	2
29899	Arthroscopy, ankle (tibiotalar and fibulotalar joints), surgical; with ankle arthrodesis	2
29900	Arthroscopy, metacarpophalangeal joint, diagnostic, includes synovial biopsy	1
29901	Arthroscopy, metacarpophalangeal joint, surgical; with debridement	1
29902	Arthroscopy, metacarpophalangeal joint, surgical; with reduction of displaced ulnar collateral ligament (eg, Stener lesion)	2
29904	Arthroscopy, subtalar joint, surgical; with removal of loose body or foreign body	2
29905	Arthroscopy, subtalar joint, surgical; with synovectomy	2
29906	Arthroscopy, subtalar joint, surgical; with debridement	2
29907	Arthroscopy, subtalar joint, surgical; with subtalar arthrodesis	2
29914	Arthroscopy, hip, surgical; with femoroplasty (ie, treatment of cam lesion)	2
29915	Arthroscopy, hip, surgical; with acetabuloplasty (ie, treatment of pincer lesion)	2
29916	Arthroscopy, hip, surgical; with labral repair	2
29999	Unlisted procedure, arthroscopy	1
30000	Drainage abscess or hematoma, nasal, internal approach	1
30020	Drainage abscess or hematoma, nasal septum	1
30100	Biopsy, intranasal	1
30110	Excision, nasal polyp(s), simple	2
30115	Excision, nasal polyp(s), extensive	2
30117	Excision or destruction (eg, laser), intranasal lesion; internal approach	1
30118	Excision or destruction (eg, laser), intranasal lesion; external approach (lateral rhinotomy)	1
30120	Excision or surgical planing of skin of nose for rhinophyma	1
30124	Excision dermoid cyst, nose; simple, skin, subcutaneous	1
30125	Excision dermoid cyst, nose; complex, under bone or cartilage	1
30130	Excision inferior turbinate, partial or complete, any method	1
30140	Submucous resection inferior turbinate, partial or complete, any method	1
30150	Rhinectomy; partial	1
30160	Rhinectomy; total	1
30200	Injection into turbinate(s), therapeutic	1
30210	Displacement therapy (Proetz type)	1

30220	Insertion, nasal septal prosthesis (button)	1
30300	Removal foreign body, intranasal; office type procedure	1
30310	Removal foreign body, intranasal; requiring general anesthesia	1
30320	Removal foreign body, intranasal; by lateral rhinotomy	1
30400	Rhinoplasty, primary; lateral and alar cartilages and/or elevation of nasal tip	1
30410	Rhinoplasty, primary; complete, external parts including bony pyramid, lateral and alar cartilages, and/or elevation of nasal tip	1
30420	Rhinoplasty, primary; including major septal repair	1
30430	Rhinoplasty, secondary; minor revision (small amount of nasal tip work)	1
30435	Rhinoplasty, secondary; intermediate revision (bony work with osteotomies)	1
30450	Rhinoplasty, secondary; major revision (nasal tip work and osteotomies)	1
30460	Rhinoplasty for nasal deformity secondary to congenital cleft lip and/or palate, including columellar lengthening; tip only	1
30462	Rhinoplasty for nasal deformity secondary to congenital cleft lip and/or palate, including columellar lengthening; tip, septum, osteotomies	1
30465	Repair of nasal vestibular stenosis (eg, spreader grafting, lateral nasal wall reconstruction)	1
30468	Repair of nasal valve collapse with subcutaneous/submucosal lateral wall implant(s)	1
30520	Septoplasty or submucous resection, with or without cartilage scoring, contouring or replacement with graft	1
30540	Repair choanal atresia; intranasal	1
30545	Repair choanal atresia; transpalatine	1
30560	Lysis intranasal synechia	1
30580	Repair fistula; oromaxillary (combine with 31030 if antrotomy is included)	1
30600	Repair fistula; oronasal	1
30620	Septal or other intranasal dermatoplasty (does not include obtaining graft)	1
30630	Repair nasal septal perforations	1
30801	Ablation, soft tissue of inferior turbinates, unilateral or bilateral, any method (eg, electrocautery, radiofrequency ablation, or tissue volume reduction); superficial	1
30802	Ablation, soft tissue of inferior turbinates, unilateral or bilateral, any method (eg, electrocautery, radiofrequency ablation, or tissue volume reduction); intramural (ie, submucosal)	1
30901	Control nasal hemorrhage, anterior, simple (limited cautery and/or packing) any method	2
30903	Control nasal hemorrhage, anterior, complex (extensive cautery and/or packing) any method	2
30905	Control nasal hemorrhage, posterior, with posterior nasal packs and/or cautery, any method; initial	1

30906	Control nasal hemorrhage, posterior, with posterior nasal packs and/or cautery, any method; subsequent	1
30915	Ligation arteries; ethmoidal	1
30920	Ligation arteries; internal maxillary artery, transantral	1
30930	Fracture nasal inferior turbinate(s), therapeutic	1
30999	Unlisted procedure, nose	1
31000	Lavage by cannulation; maxillary sinus (antrum puncture or natural ostium)	2
31002	Lavage by cannulation; sphenoid sinus	1
31020	Sinusotomy, maxillary (antrotomy); intranasal	2
31030	Sinusotomy, maxillary (antrotomy); radical (Caldwell-Luc) without removal of antrochoanal polyps	2
31032	Sinusotomy, maxillary (antrotomy); radical (Caldwell-Luc) with removal of antrochoanal polyps	2
31040	Pterygomaxillary fossa surgery, any approach	2
31050	Sinusotomy, sphenoid, with or without biopsy	2
31051	Sinusotomy, sphenoid, with or without biopsy; with mucosal stripping or removal of polyp(s)	1
31070	Sinusotomy frontal; external, simple (trephine operation)	2
31075	Sinusotomy frontal; transorbital, unilateral (for mucocele or osteoma, Lynch type)	2
31080	Sinusotomy frontal; obliterative without osteoplastic flap, brow incision (includes ablation)	2
31081	Sinusotomy frontal; obliterative, without osteoplastic flap, coronal incision (includes ablation)	2
31084	Sinusotomy frontal; obliterative, with osteoplastic flap, brow incision	2
31085	Sinusotomy frontal; obliterative, with osteoplastic flap, coronal incision	2
31086	Sinusotomy frontal; nonobliterative, with osteoplastic flap, brow incision	2
31087	Sinusotomy frontal; nonobliterative, with osteoplastic flap, coronal incision	2
31090	Sinusotomy, unilateral, 3 or more paranasal sinuses (frontal, maxillary, ethmoid, sphenoid)	1
31200	Ethmoidectomy; intranasal, anterior	1
31201	Ethmoidectomy; intranasal, total	1
31205	Ethmoidectomy; extranasal, total	1
31225	Maxillectomy; without orbital exenteration	2
31230	Maxillectomy; with orbital exenteration (en bloc)	2
31231	Nasal endoscopy, diagnostic, unilateral or bilateral (separate procedure)	1
31233	Nasal/sinus endoscopy, diagnostic; with maxillary sinusoscopy (via inferior meatus or canine fossa puncture)	1

31235	Nasal/sinus endoscopy, diagnostic; with sphenoid sinusoscopy (via puncture of sphenoidal face or cannulation of ostium)	2
31237	Nasal/sinus endoscopy, surgical; with biopsy, polypectomy or debridement (separate procedure)	2
31238	Nasal/sinus endoscopy, surgical; with control of nasal hemorrhage	2
31239	Nasal/sinus endoscopy, surgical; with dacryocystorhinostomy	2
31240	Nasal/sinus endoscopy, surgical; with concha bullosa resection	2
31241	Nasal/sinus endoscopy, surgical; with ligation of sphenopalatine artery	2
31253	Nasal/sinus endoscopy, surgical with ethmoidectomy; total (anterior and posterior), including frontal sinus exploration, with removal of tissue from frontal sinus, when performed	2
31254	Nasal/sinus endoscopy, surgical with ethmoidectomy; partial (anterior)	1
31255	Nasal/sinus endoscopy, surgical with ethmoidectomy; total (anterior and posterior)	2
31256	Nasal/sinus endoscopy, surgical, with maxillary antrostomy	2
31257	Nasal/sinus endoscopy, surgical with ethmoidectomy; total (anterior and posterior), including sphenoidotomy	2
31259	Nasal/sinus endoscopy, surgical with ethmoidectomy; total (anterior and posterior), including sphenoidotomy, with removal of tissue from the sphenoid sinus	2
31267	Nasal/sinus endoscopy, surgical, with maxillary antrostomy; with removal of tissue from maxillary sinus	2
31276	Nasal/sinus endoscopy, surgical, with frontal sinus exploration, including removal of tissue from frontal sinus, when performed	2
31287	Nasal/sinus endoscopy, surgical, with sphenoidotomy	2
31288	Nasal/sinus endoscopy, surgical, with sphenoidotomy; with removal of tissue from the sphenoid sinus	2
31290	Nasal/sinus endoscopy, surgical, with repair of cerebrospinal fluid leak; ethmoid region	2
31291	Nasal/sinus endoscopy, surgical, with repair of cerebrospinal fluid leak; sphenoid region	2
31292	Nasal/sinus endoscopy, surgical, with orbital decompression; medial or inferior wall	2
31293	Nasal/sinus endoscopy, surgical, with orbital decompression; medial and inferior wall	2
31294	Nasal/sinus endoscopy, surgical, with optic nerve decompression	2
31295	Nasal/sinus endoscopy, surgical, with dilation (eg, balloon dilation); maxillary sinus ostium, transnasal or via canine fossa	2
31296	Nasal/sinus endoscopy, surgical, with dilation (eg, balloon dilation); frontal sinus ostium	2
31297	Nasal/sinus endoscopy, surgical, with dilation (eg, balloon dilation); sphenoid sinus ostium	2

31298	Nasal/sinus endoscopy, surgical, with dilation (eg, balloon dilation); frontal and sphenoid sinus ostia	2
31299	Unlisted procedure, accessory sinuses	1
31300	Laryngotomy (thyrotomy, laryngofissure), with removal of tumor or laryngocele, cordectomy	1
31360	Laryngectomy; total, without radical neck dissection	1
31365	Laryngectomy; total, with radical neck dissection	1
31367	Laryngectomy; subtotal supraglottic, without radical neck dissection	1
31368	Laryngectomy; subtotal supraglottic, with radical neck dissection	1
31370	Partial laryngectomy (hemilaryngectomy); horizontal	1
31375	Partial laryngectomy (hemilaryngectomy); laterovertical	1
31380	Partial laryngectomy (hemilaryngectomy); anterovertical	1
31382	Partial laryngectomy (hemilaryngectomy); antero-latero-vertical	1
31390	Pharyngolaryngectomy, with radical neck dissection; without reconstruction	1
31395	Pharyngolaryngectomy, with radical neck dissection; with reconstruction	1
31400	Arytenoidectomy or arytenoidopexy, external approach	1
31420	Epiglottidectomy	1
31500	Intubation, endotracheal, emergency procedure	1
31502	Tracheotomy tube change prior to establishment of fistula tract	1
31505	Laryngoscopy, indirect; diagnostic (separate procedure)	1
31510	Laryngoscopy, indirect; with biopsy	1
31511	Laryngoscopy, indirect; with removal of foreign body	1
31512	Laryngoscopy, indirect; with removal of lesion	1
31513	Laryngoscopy, indirect; with vocal cord injection	1
31515	Laryngoscopy direct, with or without tracheoscopy; for aspiration	1
31520	Laryngoscopy direct, with or without tracheoscopy; diagnostic, newborn	1
31525	Laryngoscopy direct, with or without tracheoscopy; diagnostic, except newborn	1
31526	Laryngoscopy direct, with or without tracheoscopy; diagnostic, with operating microscope or telescope	1
31527	Laryngoscopy direct, with or without tracheoscopy; with insertion of obturator	1
31528	Laryngoscopy direct, with or without tracheoscopy; with dilation, initial	1
31529	Laryngoscopy direct, with or without tracheoscopy; with dilation, subsequent	1
31530	Laryngoscopy, direct, operative, with foreign body removal	1
31531	Laryngoscopy, direct, operative, with foreign body removal; with operating microscope or telescope	1
31535	Laryngoscopy, direct, operative, with biopsy	1

31536	Laryngoscopy, direct, operative, with biopsy; with operating microscope or telescope	1
31540	Laryngoscopy, direct, operative, with excision of tumor and/or stripping of vocal cords or epiglottis	1
31541	Laryngoscopy, direct, operative, with excision of tumor and/or stripping of vocal cords or epiglottis; with operating microscope or telescope	1
31545	Laryngoscopy, direct, operative, with operating microscope or telescope, with submucosal removal of non-neoplastic lesion(s) of vocal cord; reconstruction with local tissue flap(s)	1
31546	Laryngoscopy, direct, operative, with operating microscope or telescope, with submucosal removal of non-neoplastic lesion(s) of vocal cord; reconstruction with graft(s) (includes obtaining autograft)	1
31551	Laryngoplasty; for laryngeal stenosis, with graft, without indwelling stent placement, younger than 12 years of age	1
31552	Laryngoplasty; for laryngeal stenosis, with graft, without indwelling stent placement, age 12 years or older	1
31553	Laryngoplasty; for laryngeal stenosis, with graft, with indwelling stent placement, younger than 12 years of age	1
31554	Laryngoplasty; for laryngeal stenosis, with graft, with indwelling stent placement, age 12 years or older	1
31560	Laryngoscopy, direct, operative, with arytenoidectomy	1
31561	Laryngoscopy, direct, operative, with arytenoidectomy; with operating microscope or telescope	1
31570	Laryngoscopy, direct, with injection into vocal cord(s), therapeutic	1
31571	Laryngoscopy, direct, with injection into vocal cord(s), therapeutic; with operating microscope or telescope	1
31572	Laryngoscopy, flexible; with ablation or destruction of lesion(s) with laser, unilateral	2
31573	Laryngoscopy, flexible; with therapeutic injection(s) (eg, chemodenervation agent or corticosteroid, injected percutaneous, transoral, or via endoscope channel), unilateral	2
31574	Laryngoscopy, flexible; with injection(s) for augmentation (eg, percutaneous, transoral), unilateral	2
31575	Laryngoscopy, flexible; diagnostic	1
31576	Laryngoscopy, flexible; with biopsy(ies)	1
31577	Laryngoscopy, flexible; with removal of foreign body(s)	1
31578	Laryngoscopy, flexible; with removal of lesion(s), non-laser	1
31579	Laryngoscopy, flexible or rigid telescopic, with stroboscopy	1
31580	Laryngoplasty; for laryngeal web, with indwelling keel or stent insertion	1
31584	Laryngoplasty; with open reduction and fixation of (eg, plating) fracture, includes tracheostomy, if performed	1

31587	Laryngoplasty, cricoid split, without graft placement	1
31590	Laryngeal reinnervation by neuromuscular pedicle	1
31591	Laryngoplasty, medialization, unilateral	1
31592	Cricotracheal resection	1
31599	Unlisted procedure, larynx	1
31600	Tracheostomy, planned (separate procedure)	1
31601	Tracheostomy, planned (separate procedure); younger than 2 years	1
31603	Tracheostomy, emergency procedure; transtracheal	1
31605	Tracheostomy, emergency procedure; cricothyroid membrane	1
31610	Tracheostomy, fenestration procedure with skin flaps	1
31611	Construction of tracheoesophageal fistula and subsequent insertion of an alaryngeal speech prosthesis (eg, voice button, Blom-Singer prosthesis)	1
31612	Tracheal puncture, percutaneous with transtracheal aspiration and/or injection	1
31613	Tracheostoma revision; simple, without flap rotation	1
31614	Tracheostoma revision; complex, with flap rotation	1
31615	Tracheobronchoscopy through established tracheostomy incision	1
31622	Bronchoscopy, rigid or flexible, including fluoroscopic guidance, when performed; diagnostic, with cell washing, when performed (separate procedure)	1
31623	Bronchoscopy, rigid or flexible, including fluoroscopic guidance, when performed; with brushing or protected brushings	1
31624	Bronchoscopy, rigid or flexible, including fluoroscopic guidance, when performed; with bronchial alveolar lavage	1
31625	Bronchoscopy, rigid or flexible, including fluoroscopic guidance, when performed; with bronchial or endobronchial biopsy(s), single or multiple sites	1
31626	Bronchoscopy, rigid or flexible, including fluoroscopic guidance, when performed; with placement of fiducial markers, single or multiple	1
31627	Bronchoscopy, rigid or flexible, including fluoroscopic guidance, when performed; with computer-assisted, image-guided navigation (List separately in addition to code for primary procedure[s])	1
31628	Bronchoscopy, rigid or flexible, including fluoroscopic guidance, when performed; with transbronchial lung biopsy(s), single lobe	1
31629	Bronchoscopy, rigid or flexible, including fluoroscopic guidance, when performed; with transbronchial needle aspiration biopsy(s), trachea, main stem and/or lobar bronchus(i)	1
31630	Bronchoscopy, rigid or flexible, including fluoroscopic guidance, when performed; with tracheal/bronchial dilation or closed reduction of fracture	1
31631	Bronchoscopy, rigid or flexible, including fluoroscopic guidance, when performed; with placement of tracheal stent(s) (includes tracheal/bronchial dilation as required)	1

31632	Bronchoscopy, rigid or flexible, including fluoroscopic guidance, when performed; with transbronchial lung biopsy(s), each additional lobe (List separately in addition to code for primary procedure)	1
31633	Bronchoscopy, rigid or flexible, including fluoroscopic guidance, when performed; with transbronchial needle aspiration biopsy(s), each additional lobe (List separately in addition to code for primary procedure)	1
31634	Bronchoscopy, rigid or flexible, including fluoroscopic guidance, when performed; with balloon occlusion, with assessment of air leak, with administration of occlusive substance (eg, fibrin glue), if performed	1
31635	Bronchoscopy, rigid or flexible, including fluoroscopic guidance, when performed; with removal of foreign body	1
31636	Bronchoscopy, rigid or flexible, including fluoroscopic guidance, when performed; with placement of bronchial stent(s) (includes tracheal/bronchial dilation as required), initial bronchus	1
31637	Bronchoscopy, rigid or flexible, including fluoroscopic guidance, when performed; each additional major bronchus stented (List separately in addition to code for primary procedure)	1
31638	Bronchoscopy, rigid or flexible, including fluoroscopic guidance, when performed; with revision of tracheal or bronchial stent inserted at previous session (includes tracheal/bronchial dilation as required)	1
31640	Bronchoscopy, rigid or flexible, including fluoroscopic guidance, when performed; with excision of tumor	1
31641	Bronchoscopy, rigid or flexible, including fluoroscopic guidance, when performed; with destruction of tumor or relief of stenosis by any method other than excision (eg, laser therapy, cryotherapy)	1
31643	Bronchoscopy, rigid or flexible, including fluoroscopic guidance, when performed; with placement of catheter(s) for intracavitary radioelement application	1
31645	Bronchoscopy, rigid or flexible, including fluoroscopic guidance, when performed; with therapeutic aspiration of tracheobronchial tree, initial	1
31646	Bronchoscopy, rigid or flexible, including fluoroscopic guidance, when performed; with therapeutic aspiration of tracheobronchial tree, subsequent, same hospital stay	1
31647	Bronchoscopy, rigid or flexible, including fluoroscopic guidance, when performed; with balloon occlusion, when performed, assessment of air leak, airway sizing, and insertion of bronchial valve(s), initial lobe	1
31648	Bronchoscopy, rigid or flexible, including fluoroscopic guidance, when performed; with removal of bronchial valve(s), initial lobe	1
31649	Bronchoscopy, rigid or flexible, including fluoroscopic guidance, when performed; with removal of bronchial valve(s), each additional lobe (List separately in addition to code for primary procedure)	2
31651	Bronchoscopy, rigid or flexible, including fluoroscopic guidance, when performed; with balloon occlusion, when performed, assessment of air leak, airway sizing, and insertion of bronchial valve(s), each additional lobe (List separately in addition to code for primary procedure[s])	3

31652	Bronchoscopy, rigid or flexible, including fluoroscopic guidance, when performed; with endobronchial ultrasound (EBUS) guided transtracheal and/or transbronchial sampling (eg, aspiration[s]/biopsy[ies]), one or two mediastinal and/or hilar lymph node stations or structures	1
31653	Bronchoscopy, rigid or flexible, including fluoroscopic guidance, when performed; with endobronchial ultrasound (EBUS) guided transtracheal and/or transbronchial sampling (eg, aspiration[s]/biopsy[ies]), 3 or more mediastinal and/or hilar lymph node stations or structures	1
31654	Bronchoscopy, rigid or flexible, including fluoroscopic guidance, when performed; with transendoscopic endobronchial ultrasound (EBUS) during bronchoscopic diagnostic or therapeutic intervention(s) for peripheral lesion(s) (List separately in addition to code for primary procedure[s])	1
31660	Bronchoscopy, rigid or flexible, including fluoroscopic guidance, when performed; with bronchial thermoplasty, 1 lobe	1
31661	Bronchoscopy, rigid or flexible, including fluoroscopic guidance, when performed; with bronchial thermoplasty, 2 or more lobes	1
31717	Catheterization with bronchial brush biopsy	1
31720	Catheter aspiration (separate procedure); nasotracheal	1
31725	Catheter aspiration (separate procedure); tracheobronchial with fiberscope, bedside	1
31730	Transtracheal (percutaneous) introduction of needle wire dilator/stent or indwelling tube for oxygen therapy	1
31750	Tracheoplasty; cervical	1
31755	Tracheoplasty; tracheopharyngeal fistulization, each stage	1
31760	Tracheoplasty; intrathoracic	1
31766	Carinal reconstruction	1
31770	Bronchoplasty; graft repair	1
31775	Bronchoplasty; excision stenosis and anastomosis	1
31780	Excision tracheal stenosis and anastomosis; cervical	1
31781	Excision tracheal stenosis and anastomosis; cervicothoracic	1
31785	Excision of tracheal tumor or carcinoma; cervical	1
31786	Excision of tracheal tumor or carcinoma; thoracic	1
31800	Suture of tracheal wound or injury; cervical	1
31805	Suture of tracheal wound or injury; intrathoracic	1
31820	Surgical closure tracheostomy or fistula; without plastic repair	1
31825	Surgical closure tracheostomy or fistula; with plastic repair	1
31830	Revision of tracheostomy scar	1
31899	Unlisted procedure, trachea, bronchi	1
32035	Thoracostomy; with rib resection for empyema	2

32036	Thoracostomy; with open flap drainage for empyema	2
32096	Thoracotomy, with diagnostic biopsy(ies) of lung infiltrate(s) (eg, wedge, incisional), unilateral	2
32097	Thoracotomy, with diagnostic biopsy(ies) of lung nodule(s) or mass(es) (eg, wedge, incisional), unilateral	2
32098	Thoracotomy, with biopsy(ies) of pleura	2
32100	Thoracotomy; with exploration	1
32110	Thoracotomy; with control of traumatic hemorrhage and/or repair of lung tear	1
32120	Thoracotomy; for postoperative complications	1
32124	Thoracotomy; with open intrapleural pneumonolysis	1
32140	Thoracotomy; with cyst(s) removal, includes pleural procedure when performed	1
32141	Thoracotomy; with resection-plication of bullae, includes any pleural procedure when performed	1
32150	Thoracotomy; with removal of intrapleural foreign body or fibrin deposit	1
32151	Thoracotomy; with removal of intrapulmonary foreign body	1
32160	Thoracotomy; with cardiac massage	1
32200	Pneumonostomy, with open drainage of abscess or cyst	1
32215	Pleural scarification for repeat pneumothorax	2
32220	Decortication, pulmonary (separate procedure); total	2
32225	Decortication, pulmonary (separate procedure); partial	2
32310	Pleurectomy, parietal (separate procedure)	1
32320	Decortication and parietal pleurectomy	1
32400	Biopsy, pleura, percutaneous needle	1
32408	Core needle biopsy, lung or mediastinum, percutaneous, including imaging guidance, when performed	1
32440	Removal of lung, pneumonectomy	1
32442	Removal of lung, pneumonectomy; with resection of segment of trachea followed by broncho-tracheal anastomosis (sleeve pneumonectomy)	1
32445	Removal of lung, pneumonectomy; extrapleural	1
32480	Removal of lung, other than pneumonectomy; single lobe (lobectomy)	1
32482	Removal of lung, other than pneumonectomy; 2 lobes (bilobectomy)	1
32484	Removal of lung, other than pneumonectomy; single segment (segmentectomy)	1
32486	Removal of lung, other than pneumonectomy; with circumferential resection of segment of bronchus followed by broncho-bronchial anastomosis (sleeve lobectomy)	1
32488	Removal of lung, other than pneumonectomy; with all remaining lung following previous removal of a portion of lung (completion pneumonectomy)	1

32491	Removal of lung, other than pneumonectomy; with resection-plication of emphysematous lung(s) (bullous or non-bullous) for lung volume reduction, sternal split or transthoracic approach, includes any pleural procedure, when performed	1
32501	Resection and repair of portion of bronchus (bronchoplasty) when performed at time of lobectomy or segmentectomy (List separately in addition to code for primary procedure)	1
32503	Resection of apical lung tumor (eg, Pancoast tumor), including chest wall resection, rib(s) resection(s), neurovascular dissection, when performed; without chest wall reconstruction(s)	2
32504	Resection of apical lung tumor (eg, Pancoast tumor), including chest wall resection, rib(s) resection(s), neurovascular dissection, when performed; with chest wall reconstruction	2
32505	Thoracotomy; with therapeutic wedge resection (eg, mass, nodule), initial	2
32506	Thoracotomy; with therapeutic wedge resection (eg, mass or nodule), each additional resection, ipsilateral (List separately in addition to code for primary procedure)	2
32507	Thoracotomy; with diagnostic wedge resection followed by anatomic lung resection (List separately in addition to code for primary procedure)	2
32540	Extrapleural enucleation of empyema (empyemectomy)	1
32550	Insertion of indwelling tunneled pleural catheter with cuff	2
32551	Tube thoracostomy, includes connection to drainage system (eg, water seal), when performed, open (separate procedure)	2
32552	Removal of indwelling tunneled pleural catheter with cuff	2
32553	Placement of interstitial device(s) for radiation therapy guidance (eg, fiducial markers, dosimeter), percutaneous, intra-thoracic, single or multiple	1
32554	Thoracentesis, needle or catheter, aspiration of the pleural space; without imaging guidance	2
32555	Thoracentesis, needle or catheter, aspiration of the pleural space; with imaging guidance	2
32556	Pleural drainage, percutaneous, with insertion of indwelling catheter; without imaging guidance	2
32557	Pleural drainage, percutaneous, with insertion of indwelling catheter; with imaging guidance	2
32560	Instillation, via chest tube/catheter, agent for pleurodesis (eg, talc for recurrent or persistent pneumothorax)	2
32561	Instillation(s), via chest tube/catheter, agent for fibrinolysis (eg, fibrinolytic agent for break up of multiloculated effusion); initial day	2
32562	Instillation(s), via chest tube/catheter, agent for fibrinolysis (eg, fibrinolytic agent for break up of multiloculated effusion); subsequent day	2
32601	Thoracoscopy, diagnostic (separate procedure); lungs, pericardial sac, mediastinal or pleural space, without biopsy	1

32604	Thoracoscopy, diagnostic (separate procedure); pericardial sac, with biopsy	1
32606	Thoracoscopy, diagnostic (separate procedure); mediastinal space, with biopsy	1
32607	Thoracoscopy; with diagnostic biopsy(ies) of lung infiltrate(s) (eg, wedge, incisional), unilateral	2
32608	Thoracoscopy; with diagnostic biopsy(ies) of lung nodule(s) or mass(es) (eg, wedge, incisional), unilateral	2
32609	Thoracoscopy; with biopsy(ies) of pleura	2
32650	Thoracoscopy, surgical; with pleurodesis (eg, mechanical or chemical)	1
32651	Thoracoscopy, surgical; with partial pulmonary decortication	1
32652	Thoracoscopy, surgical; with total pulmonary decortication, including intrapleural pneumonolysis	1
32653	Thoracoscopy, surgical; with removal of intrapleural foreign body or fibrin deposit	1
32654	Thoracoscopy, surgical; with control of traumatic hemorrhage	1
32655	Thoracoscopy, surgical; with resection-plication of bullae, includes any pleural procedure when performed	2
32656	Thoracoscopy, surgical; with parietal pleurectomy	2
32658	Thoracoscopy, surgical; with removal of clot or foreign body from pericardial sac	1
32659	Thoracoscopy, surgical; with creation of pericardial window or partial resection of pericardial sac for drainage	1
32661	Thoracoscopy, surgical; with excision of pericardial cyst, tumor, or mass	1
32662	Thoracoscopy, surgical; with excision of mediastinal cyst, tumor, or mass	1
32663	Thoracoscopy, surgical; with lobectomy (single lobe)	1
32664	Thoracoscopy, surgical; with thoracic sympathectomy	2
32665	Thoracoscopy, surgical; with esophagomyotomy (Heller type)	1
32666	Thoracoscopy, surgical; with therapeutic wedge resection (eg, mass, nodule), initial unilateral	2
32667	Thoracoscopy, surgical; with therapeutic wedge resection (eg, mass or nodule), each additional resection, ipsilateral (List separately in addition to code for primary procedure)	2
32668	Thoracoscopy, surgical; with diagnostic wedge resection followed by anatomic lung resection (List separately in addition to code for primary procedure)	2
32669	Thoracoscopy, surgical; with removal of a single lung segment (segmentectomy)	2
32670	Thoracoscopy, surgical; with removal of two lobes (bilobectomy)	1
32671	Thoracoscopy, surgical; with removal of lung (pneumonectomy)	2
32672	Thoracoscopy, surgical; with resection-plication for emphysematous lung (bullous or non-bullous) for lung volume reduction (LVRS), unilateral includes any pleural procedure, when performed	1
32673	Thoracoscopy, surgical; with resection of thymus, unilateral or bilateral	2

		1
32674	Thoracoscopy, surgical; with mediastinal and regional lymphadenectomy (List separately in addition to code for primary procedure)	1
32701	Thoracic target(s) delineation for stereotactic body radiation therapy (SRS/SBRT), (photon or particle beam), entire course of treatment	1
32800	Repair lung hernia through chest wall	1
32810	Closure of chest wall following open flap drainage for empyema (Clagett type procedure)	1
32815	Open closure of major bronchial fistula	1
32820	Major reconstruction, chest wall (posttraumatic)	1
32850	Donor pneumonectomy(s) (including cold preservation), from cadaver donor	1
32851	Lung transplant, single; without cardiopulmonary bypass	1
32852	Lung transplant, single; with cardiopulmonary bypass	1
32853	Lung transplant, double (bilateral sequential or en bloc); without cardiopulmonary bypass	1
32854	Lung transplant, double (bilateral sequential or en bloc); with cardiopulmonary bypass	1
32855	Backbench standard preparation of cadaver donor lung allograft prior to transplantation, including dissection of allograft from surrounding soft tissues to prepare pulmonary venous/atrial cuff, pulmonary artery, and bronchus; unilateral	1
32856	Backbench standard preparation of cadaver donor lung allograft prior to transplantation, including dissection of allograft from surrounding soft tissues to prepare pulmonary venous/atrial cuff, pulmonary artery, and bronchus; bilateral	1
32900	Resection of ribs, extrapleural, all stages	1
32905	Thoracoplasty, Schede type or extrapleural (all stages)	1
32906	Thoracoplasty, Schede type or extrapleural (all stages); with closure of bronchopleural fistula	1
32940	Pneumonolysis, extraperiosteal, including filling or packing procedures	1
32960	Pneumothorax, therapeutic, intrapleural injection of air	1
32994	Ablation therapy for reduction or eradication of 1 or more pulmonary tumor(s) including pleura or chest wall when involved by tumor extension, percutaneous, including imaging guidance when performed, unilateral; cryoablation	1
32997	Total lung lavage (unilateral)	2
32999	Unlisted procedure, lungs and pleura	1
33016	Pericardiocentesis, including imaging guidance, when performed	1
33017	Pericardial drainage with insertion of indwelling catheter, percutaneous, including fluoroscopy and/or ultrasound guidance, when performed; 6 years and older without congenital cardiac anomaly	1
33018	Pericardial drainage with insertion of indwelling catheter, percutaneous, including fluoroscopy and/or ultrasound guidance, when performed; birth through 5 years of age or any age with congenital cardiac anomaly	1

33019	Pericardial drainage with insertion of indwelling catheter, percutaneous, including CT guidance	1
33020	Pericardiotomy for removal of clot or foreign body (primary procedure)	1
33025	Creation of pericardial window or partial resection for drainage	1
33030	Pericardiectomy, subtotal or complete; without cardiopulmonary bypass	1
33031	Pericardiectomy, subtotal or complete; with cardiopulmonary bypass	1
33050	Resection of pericardial cyst or tumor	1
33120	Excision of intracardiac tumor, resection with cardiopulmonary bypass	1
33130	Resection of external cardiac tumor	1
33140	Transmyocardial laser revascularization, by thoracotomy; (separate procedure)	1
33141	Transmyocardial laser revascularization, by thoracotomy; performed at the time of other open cardiac procedure(s) (List separately in addition to code for primary procedure)	1
33206	Insertion of new or replacement of permanent pacemaker with transvenous electrode(s); atrial	1
33207	Insertion of new or replacement of permanent pacemaker with transvenous electrode(s); ventricular	1
33208	Insertion of new or replacement of permanent pacemaker with transvenous electrode(s); atrial and ventricular	1
33210	Insertion or replacement of temporary transvenous single chamber cardiac electrode or pacemaker catheter (separate procedure)	1
33211	Insertion or replacement of temporary transvenous dual chamber pacing electrodes (separate procedure)	1
33212	Insertion of pacemaker pulse generator only; with existing single lead	1
33213	Insertion of pacemaker pulse generator only; with existing dual leads	1
33214	Upgrade of implanted pacemaker system, conversion of single chamber system to dual chamber system (includes removal of previously placed pulse generator, testing of existing lead, insertion of new lead, insertion of new pulse generator)	1
33215	Repositioning of previously implanted transvenous pacemaker or implantable defibrillator (right atrial or right ventricular) electrode	1
33216	Insertion of a single transvenous electrode, permanent pacemaker or implantable defibrillator	1
33217	Insertion of 2 transvenous electrodes, permanent pacemaker or implantable defibrillator	1
33218	Repair of single transvenous electrode, permanent pacemaker or implantable defibrillator	1
33220	Repair of 2 transvenous electrodes for permanent pacemaker or implantable defibrillator	1
33221	Insertion of pacemaker pulse generator only; with existing multiple leads	1

33222	Relocation of skin pocket for pacemaker	1
33223	Relocation of skin pocket for implantable defibrillator	1
33224	Insertion of pacing electrode, cardiac venous system, for left ventricular pacing, with attachment to previously placed pacemaker or implantable defibrillator pulse generator (including revision of pocket, removal, insertion, and/or replacement of existing generator)	1
33225	Insertion of pacing electrode, cardiac venous system, for left ventricular pacing, at time of insertion of implantable defibrillator or pacemaker pulse generator (eg, for upgrade to dual chamber system) (List separately in addition to code for primary procedure)	1
33226	Repositioning of previously implanted cardiac venous system (left ventricular) electrode (including removal, insertion and/or replacement of existing generator)	1
33227	Removal of permanent pacemaker pulse generator with replacement of pacemaker pulse generator; single lead system	1
33228	Removal of permanent pacemaker pulse generator with replacement of pacemaker pulse generator; dual lead system	1
33229	Removal of permanent pacemaker pulse generator with replacement of pacemaker pulse generator; multiple lead system	1
33230	Insertion of implantable defibrillator pulse generator only; with existing dual leads	1
33231	Insertion of implantable defibrillator pulse generator only; with existing multiple leads	1
33233	Removal of permanent pacemaker pulse generator only	1
33234	Removal of transvenous pacemaker electrode(s); single lead system, atrial or ventricular	1
33235	Removal of transvenous pacemaker electrode(s); dual lead system	1
33236	Removal of permanent epicardial pacemaker and electrodes by thoracotomy; single lead system, atrial or ventricular	1
33237	Removal of permanent epicardial pacemaker and electrodes by thoracotomy; dual lead system	1
33238	Removal of permanent transvenous electrode(s) by thoracotomy	1
33240	Insertion of implantable defibrillator pulse generator only; with existing single lead	1
33241	Removal of implantable defibrillator pulse generator only	1
33243	Removal of single or dual chamber implantable defibrillator electrode(s); by thoracotomy	1
33244	Removal of single or dual chamber implantable defibrillator electrode(s); by transvenous extraction	1
33249	Insertion or replacement of permanent implantable defibrillator system, with transvenous lead(s), single or dual chamber	1
33250	Operative ablation of supraventricular arrhythmogenic focus or pathway (eg, Wolff-Parkinson-White, atrioventricular node re-entry), tract(s) and/or focus (foci); without cardiopulmonary bypass	1

33251	Operative ablation of supraventricular arrhythmogenic focus or pathway (eg, Wolff-Parkinson-White, atrioventricular node re-entry), tract(s) and/or focus (foci); with cardiopulmonary bypass	1
33257	Operative tissue ablation and reconstruction of atria, performed at the time of other cardiac procedure(s), limited (eg, modified maze procedure) (List separately in addition to code for primary procedure)	1
33258	Operative tissue ablation and reconstruction of atria, performed at the time of other cardiac procedure(s), extensive (eg, maze procedure), without cardiopulmonary bypass (List separately in addition to code for primary procedure)	1
33259	Operative tissue ablation and reconstruction of atria, performed at the time of other cardiac procedure(s), extensive (eg, maze procedure), with cardiopulmonary bypass (List separately in addition to code for primary procedure)	1
33261	Operative ablation of ventricular arrhythmogenic focus with cardiopulmonary bypass	1
33262	Removal of implantable defibrillator pulse generator with replacement of implantable defibrillator pulse generator; single lead system	1
33263	Removal of implantable defibrillator pulse generator with replacement of implantable defibrillator pulse generator; dual lead system	1
33264	Removal of implantable defibrillator pulse generator with replacement of implantable defibrillator pulse generator; multiple lead system	1
33267	Exclusion of left atrial appendage, open, any method (eg, excision, isolation via stapling, oversewing, ligation, plication, clip)	1
33268	Exclusion of left atrial appendage, open, performed at the time of other sternotomy or thoracotomy procedure(s), any method (eg, excision, isolation via stapling, oversewing, ligation, plication, clip) (List separately in addition to code for primary procedure)	1
33269	Exclusion of left atrial appendage, thoracoscopic, any method (eg, excision, isolation via stapling, oversewing, ligation, plication, clip)	1
33270	Insertion or replacement of permanent subcutaneous implantable defibrillator system, with subcutaneous electrode, including defibrillation threshold evaluation, induction of arrhythmia, evaluation of sensing for arrhythmia termination, and programming or reprogramming of sensing or therapeutic parameters, when performed	1
33271	Insertion of subcutaneous implantable defibrillator electrode	1
33272	Removal of subcutaneous implantable defibrillator electrode	1
33273	Repositioning of previously implanted subcutaneous implantable defibrillator electrode	1
33274	Transcatheter insertion or replacement of permanent leadless pacemaker, right ventricular, including imaging guidance (eg, fluoroscopy, venous ultrasound, ventriculography, femoral venography) and device evaluation (eg, interrogation or programming), when performed	1

33275	Transcatheter removal of permanent leadless pacemaker, right ventricular, including imaging guidance (eg, fluoroscopy, venous ultrasound, ventriculography, femoral venography), when performed	1
33285	Insertion, subcutaneous cardiac rhythm monitor, including programming	1
33286	Removal, subcutaneous cardiac rhythm monitor	1
33289	Transcatheter implantation of wireless pulmonary artery pressure sensor for long- term hemodynamic monitoring, including deployment and calibration of the sensor, right heart catheterization, selective pulmonary catheterization, radiological supervision and interpretation, and pulmonary artery angiography, when performed	1
33300	Repair of cardiac wound; without bypass	1
33305	Repair of cardiac wound; with cardiopulmonary bypass	1
33310	Cardiotomy, exploratory (includes removal of foreign body, atrial or ventricular thrombus); without bypass	1
33315	Cardiotomy, exploratory (includes removal of foreign body, atrial or ventricular thrombus); with cardiopulmonary bypass	1
33320	Suture repair of aorta or great vessels; without shunt or cardiopulmonary bypass	1
33321	Suture repair of aorta or great vessels; with shunt bypass	1
33322	Suture repair of aorta or great vessels; with cardiopulmonary bypass	1
33330	Insertion of graft, aorta or great vessels; without shunt, or cardiopulmonary bypass	1
33335	Insertion of graft, aorta or great vessels; with cardiopulmonary bypass	1
33340	Percutaneous transcatheter closure of the left atrial appendage with endocardial implant, including fluoroscopy, transseptal puncture, catheter placement(s), left atrial angiography, left atrial appendage angiography, when performed, and radiological supervision and interpretation	1
33361	Transcatheter aortic valve replacement (TAVR/TAVI) with prosthetic valve; percutaneous femoral artery approach	1
33362	Transcatheter aortic valve replacement (TAVR/TAVI) with prosthetic valve; open femoral artery approach	1
33363	Transcatheter aortic valve replacement (TAVR/TAVI) with prosthetic valve; open axillary artery approach	1
33364	Transcatheter aortic valve replacement (TAVR/TAVI) with prosthetic valve; open iliac artery approach	1
33365	Transcatheter aortic valve replacement (TAVR/TAVI) with prosthetic valve; transaortic approach (eg, median sternotomy, mediastinotomy)	1
33366	Transcatheter aortic valve replacement (TAVR/TAVI) with prosthetic valve; transapical exposure (eg, left thoracotomy)	1
33367	Transcatheter aortic valve replacement (TAVR/TAVI) with prosthetic valve; cardiopulmonary bypass support with percutaneous peripheral arterial and venous cannulation (eg, femoral vessels) (List separately in addition to code for primary procedure)	1

Transcatheter aortic valve replacement (TAVR/TAVI) with prosthetic valve; cardiopulmonary bypass support with open peripheral arterial and venous cannulation (eg, femoral, iliac, axillary vessels) (List separately in addition to code for primary procedure)	1
Transcatheter aortic valve replacement (TAVR/TAVI) with prosthetic valve; cardiopulmonary bypass support with central arterial and venous cannulation (eg, aorta, right atrium, pulmonary artery) (List separately in addition to code for primary procedure)	1
Transcatheter placement and subsequent removal of cerebral embolic protection device(s), including arterial access, catheterization, imaging, and radiological supervision and interpretation, percutaneous (List separately in addition to code for primary procedure)	1
Valvuloplasty, aortic valve, open, with cardiopulmonary bypass; simple (ie, valvotomy, debridement, debulking, and/or simple commissural resuspension)	1
Valvuloplasty, aortic valve, open, with cardiopulmonary bypass; complex (eg, leaflet extension, leaflet resection, leaflet reconstruction, or annuloplasty)	1
Construction of apical-aortic conduit	1
Replacement, aortic valve, open, with cardiopulmonary bypass; with prosthetic valve other than homograft or stentless valve	1
Replacement, aortic valve, open, with cardiopulmonary bypass; with allograft valve (freehand)	1
Replacement, aortic valve, open, with cardiopulmonary bypass; with stentless tissue valve	1
Replacement, aortic valve; with aortic annulus enlargement, noncoronary sinus	1
Replacement, aortic valve; with transventricular aortic annulus enlargement (Konno procedure)	1
Replacement, aortic valve; by translocation of autologous pulmonary valve with allograft replacement of pulmonary valve (Ross procedure)	1
Repair of left ventricular outflow tract obstruction by patch enlargement of the outflow tract	1
Resection or incision of subvalvular tissue for discrete subvalvular aortic stenosis	1
Ventriculomyotomy (-myectomy) for idiopathic hypertrophic subaortic stenosis (eg, asymmetric septal hypertrophy)	1
Aortoplasty (gusset) for supravalvular stenosis	1
Transcatheter mitral valve repair, percutaneous approach, including transseptal puncture when performed; initial prosthesis	1
Transcatheter mitral valve repair, percutaneous approach, including transseptal puncture when performed; additional prosthesis(es) during same session (List separately in addition to code for primary procedure)	1
Valvotomy, mitral valve; closed heart	1
Valvotomy, mitral valve; open heart, with cardiopulmonary bypass	1
	cardiopulmonary bypass support with open peripheral arterial and venous cannulation (eg, femoral, iliac, axillary vessels) (List separately in addition to code for primary procedure) Transcatheter aortic valve replacement (TAVR/TAVI) with prosthetic valve; cardiopulmonary bypass support with central arterial and venous cannulation (eg, aorta, right atrium, pulmonary artery) (List separately in addition to code for primary procedure) Transcatheter placement and subsequent removal of cerebral embolic protection device(s), including arterial access, catheterization, imaging, and radiological supervision and interpretation, percutaneous (List separately in addition to code for primary procedure) Valvuloplasty, aortic valve, open, with cardiopulmonary bypass; simple (ie, valvotomy, debridement, debulking, and/or simple commissural resuspension) Valvuloplasty, aortic valve, open, with cardiopulmonary bypass; complex (eg, leaflet extension, leaflet resection, leaflet reconstruction, or annuloplasty) Construction of apical-aortic conduit Replacement, aortic valve, open, with cardiopulmonary bypass; with prosthetic valve other than homograft or stentless valve Replacement, aortic valve, open, with cardiopulmonary bypass; with allograft valve (freehand) Replacement, aortic valve, open, with cardiopulmonary bypass; with stentless tissue valve Replacement, aortic valve; with aortic annulus enlargement, noncoronary sinus Replacement, aortic valve; with armsventricular aortic annulus enlargement (Konno procedure) Replacement, aortic valve; by translocation of autologous pulmonary valve with allograft replacement of pulmonary valve (Ross procedure) Repair of left ventricular outflow tract obstruction by patch enlargement of the outflow tract Resection or incision of subvalvular tissue for discrete subvalvular aortic stenosis (eg, asymmetric septal hypertrophy) Aortoplasty (gusset) for supravalvular stenosis Transcatheter mitral valve repair, percutaneous approach, including transseptal puncture when performed;

33425	Valvuloplasty, mitral valve, with cardiopulmonary bypass	1
33426	Valvuloplasty, mitral valve, with cardiopulmonary bypass; with prosthetic ring	1
33427	Valvuloplasty, mitral valve, with cardiopulmonary bypass; radical reconstruction, with or without ring	1
33430	Replacement, mitral valve, with cardiopulmonary bypass	1
33440	Replacement, aortic valve; by translocation of autologous pulmonary valve and transventricular aortic annulus enlargement of the left ventricular outflow tract with valved conduit replacement of pulmonary valve (Ross-Konno procedure)	1
33460	Valvectomy, tricuspid valve, with cardiopulmonary bypass	1
33463	Valvuloplasty, tricuspid valve; without ring insertion	1
33464	Valvuloplasty, tricuspid valve; with ring insertion	1
33465	Replacement, tricuspid valve, with cardiopulmonary bypass	1
33468	Tricuspid valve repositioning and plication for Ebstein anomaly	1
33470	Valvotomy, pulmonary valve, closed heart; transventricular	1
33471	Valvotomy, pulmonary valve, closed heart, via pulmonary artery	1
33474	Valvotomy, pulmonary valve, open heart, with cardiopulmonary bypass	1
33475	Replacement, pulmonary valve	1
33476	Right ventricular resection for infundibular stenosis, with or without commissurotomy	1
33477	Transcatheter pulmonary valve implantation, percutaneous approach, including pre-stenting of the valve delivery site, when performed	1
33478	Outflow tract augmentation (gusset), with or without commissurotomy or infundibular resection	1
33496	Repair of non-structural prosthetic valve dysfunction with cardiopulmonary bypass (separate procedure)	1
33500	Repair of coronary arteriovenous or arteriocardiac chamber fistula; with cardiopulmonary bypass	1
33501	Repair of coronary arteriovenous or arteriocardiac chamber fistula; without cardiopulmonary bypass	1
33502	Repair of anomalous coronary artery from pulmonary artery origin; by ligation	1
33503	Repair of anomalous coronary artery from pulmonary artery origin; by graft, without cardiopulmonary bypass	1
33504	Repair of anomalous coronary artery from pulmonary artery origin; by graft, with cardiopulmonary bypass	1
33505	Repair of anomalous coronary artery from pulmonary artery origin; with construction of intrapulmonary artery tunnel (Takeuchi procedure)	1
33506	Repair of anomalous coronary artery from pulmonary artery origin; by translocation from pulmonary artery to aorta	1

33507	Repair of anomalous (eg, intramural) aortic origin of coronary artery by unroofing or	1
	translocation	
33508	Endoscopy, surgical, including video-assisted harvest of vein(s) for coronary artery bypass procedure (List separately in addition to code for primary procedure)	1
33509	Harvest of upper extremity artery, 1 segment, for coronary artery bypass procedure, endoscopic	1
33510	Coronary artery bypass, vein only; single coronary venous graft	1
33511	Coronary artery bypass, vein only; 2 coronary venous grafts	1
33512	Coronary artery bypass, vein only; 3 coronary venous grafts	1
33513	Coronary artery bypass, vein only; 4 coronary venous grafts	1
33514	Coronary artery bypass, vein only; 5 coronary venous grafts	1
33516	Coronary artery bypass, vein only; 6 or more coronary venous grafts	1
33517	Coronary artery bypass, using venous graft(s) and arterial graft(s); single vein graft (List separately in addition to code for primary procedure)	1
33518	Coronary artery bypass, using venous graft(s) and arterial graft(s); 2 venous grafts (List separately in addition to code for primary procedure)	1
33519	Coronary artery bypass, using venous graft(s) and arterial graft(s); 3 venous grafts (List separately in addition to code for primary procedure)	1
33521	Coronary artery bypass, using venous graft(s) and arterial graft(s); 4 venous grafts (List separately in addition to code for primary procedure)	1
33522	Coronary artery bypass, using venous graft(s) and arterial graft(s); 5 venous grafts (List separately in addition to code for primary procedure)	1
33523	Coronary artery bypass, using venous graft(s) and arterial graft(s); 6 or more venous grafts (List separately in addition to code for primary procedure)	1
33530	Reoperation, coronary artery bypass procedure or valve procedure, more than 1 month after original operation (List separately in addition to code for primary procedure)	1
33533	Coronary artery bypass, using arterial graft(s); single arterial graft	1
33534	Coronary artery bypass, using arterial graft(s); 2 coronary arterial grafts	1
33535	Coronary artery bypass, using arterial graft(s); 3 coronary arterial grafts	1
33536	Coronary artery bypass, using arterial graft(s); 4 or more coronary arterial grafts	1
33542	Myocardial resection (eg, ventricular aneurysmectomy)	1
33545	Repair of postinfarction ventricular septal defect, with or without myocardial resection	1
33548	Surgical ventricular restoration procedure, includes prosthetic patch, when performed (eg, ventricular remodeling, SVR, SAVER, Dor procedures)	1
33572	Coronary endarterectomy, open, any method, of left anterior descending, circumflex, or right coronary artery performed in conjunction with coronary artery bypass graft procedure, each vessel (List separately in addition to primary procedure)	1

33600	Closure of atrioventricular valve (mitral or tricuspid) by suture or patch	1
33602	Closure of semilunar valve (aortic or pulmonary) by suture or patch	1
33606	Anastomosis of pulmonary artery to aorta (Damus-Kaye-Stansel procedure)	1
33608	Repair of complex cardiac anomaly other than pulmonary atresia with ventricular septal defect by construction or replacement of conduit from right or left ventricle to pulmonary artery	1
33610	Repair of complex cardiac anomalies (eg, single ventricle with subaortic obstruction) by surgical enlargement of ventricular septal defect	1
33611	Repair of double outlet right ventricle with intraventricular tunnel repair	1
33612	Repair of double outlet right ventricle with intraventricular tunnel repair; with repair of right ventricular outflow tract obstruction	1
33615	Repair of complex cardiac anomalies (eg, tricuspid atresia) by closure of atrial septal defect and anastomosis of atria or vena cava to pulmonary artery (simple Fontan procedure)	1
33617	Repair of complex cardiac anomalies (eg, single ventricle) by modified Fontan procedure	1
33619	Repair of single ventricle with aortic outflow obstruction and aortic arch hypoplasia (hypoplastic left heart syndrome) (eg, Norwood procedure)	1
33620	Application of right and left pulmonary artery bands (eg, hybrid approach stage 1)	1
33621	Transthoracic insertion of catheter for stent placement with catheter removal and closure (eg, hybrid approach stage 1)	1
33622	Reconstruction of complex cardiac anomaly (eg, single ventricle or hypoplastic left heart) with palliation of single ventricle with aortic outflow obstruction and aortic arch hypoplasia, creation of cavopulmonary anastomosis, and removal of right and left pulmonary bands (eg, hybrid approach stage 2, Norwood, bidirectional Glenn, pulmonary artery debanding)	1
33641	Repair atrial septal defect, secundum, with cardiopulmonary bypass, with or without patch	1
33645	Direct or patch closure, sinus venosus, with or without anomalous pulmonary venous drainage	1
33647	Repair of atrial septal defect and ventricular septal defect, with direct or patch closure	1
33660	Repair of incomplete or partial atrioventricular canal (ostium primum atrial septal defect), with or without atrioventricular valve repair	1
33665	Repair of intermediate or transitional atrioventricular canal, with or without atrioventricular valve repair	1
33670	Repair of complete atrioventricular canal, with or without prosthetic valve	1
33681	Closure of single ventricular septal defect, with or without patch	1
33684	Closure of single ventricular septal defect, with or without patch; with pulmonary valvotomy or infundibular resection (acyanotic)	1

33688	Closure of single ventricular septal defect, with or without patch; with removal of pulmonary artery band, with or without gusset	1
33690	Banding of pulmonary artery	1
33692	Complete repair tetralogy of Fallot without pulmonary atresia	1
33694	Complete repair tetralogy of Fallot without pulmonary atresia; with transannular patch	1
33697	Complete repair tetralogy of Fallot with pulmonary atresia including construction of conduit from right ventricle to pulmonary artery and closure of ventricular septal defect	1
33702	Repair sinus of Valsalva fistula, with cardiopulmonary bypass	1
33710	Repair sinus of Valsalva fistula, with cardiopulmonary bypass; with repair of ventricular septal defect	1
33720	Repair sinus of Valsalva aneurysm, with cardiopulmonary bypass	1
33722	Closure of aortico-left ventricular tunnel	1
33730	Complete repair of anomalous pulmonary venous return (supracardiac, intracardiac, or infracardiac types)	1
33732	Repair of cor triatriatum or supravalvular mitral ring by resection of left atrial membrane	1
33735	Atrial septectomy or septostomy; closed heart (Blalock-Hanlon type operation)	1
33736	Atrial septectomy or septostomy; open heart with cardiopulmonary bypass	1
33737	Atrial septectomy or septostomy; open heart, with inflow occlusion	1
33741	Transcatheter atrial septostomy (TAS) for congenital cardiac anomalies to create effective atrial flow, including all imaging guidance by the proceduralist, when performed, any method (eg, Rashkind, Sang-Park, balloon, cutting balloon, blade)	1
33745	Transcatheter intracardiac shunt (TIS) creation by stent placement for congenital cardiac anomalies to establish effective intracardiac flow, including all imaging guidance by the proceduralist, when performed, left and right heart diagnostic cardiac catheterization for congenital cardiac anomalies, and target zone angioplasty, when performed (eg, atrial septum, Fontan fenestration, right ventricular outflow tract, Mustard/Senning/Warden baffles); initial intracardiac shunt	1
33746	Transcatheter intracardiac shunt (TIS) creation by stent placement for congenital cardiac anomalies to establish effective intracardiac flow, including all imaging guidance by the proceduralist, when performed, left and right heart diagnostic cardiac catheterization for congenital cardiac anomalies, and target zone angioplasty, when performed (eg, atrial septum, Fontan fenestration, right ventricular outflow tract, Mustard/Senning/Warden baffles); each additional intracardiac shunt location (List separately in addition to code for primary procedure)	1
33750	Shunt; subclavian to pulmonary artery (Blalock-Taussig type operation)	1
33755	Shunt; ascending aorta to pulmonary artery (Waterston type operation)	1
33762	Shunt; descending aorta to pulmonary artery (Potts-Smith type operation)	1

33764	Shunt; central, with prosthetic graft	1
33766	Shunt; superior vena cava to pulmonary artery for flow to 1 lung (classical Glenn procedure)	1
33767	Shunt; superior vena cava to pulmonary artery for flow to both lungs (bidirectional Glenn procedure)	1
33768	Anastomosis, cavopulmonary, second superior vena cava (List separately in addition to primary procedure)	1
33770	Repair of transposition of the great arteries with ventricular septal defect and subpulmonary stenosis; without surgical enlargement of ventricular septal defect	1
33771	Repair of transposition of the great arteries with ventricular septal defect and subpulmonary stenosis; with surgical enlargement of ventricular septal defect	1
33774	Repair of transposition of the great arteries, atrial baffle procedure (eg, Mustard or Senning type) with cardiopulmonary bypass	1
33775	Repair of transposition of the great arteries, atrial baffle procedure (eg, Mustard or Senning type) with cardiopulmonary bypass; with removal of pulmonary band	1
33776	Repair of transposition of the great arteries, atrial baffle procedure (eg, Mustard or Senning type) with cardiopulmonary bypass; with closure of ventricular septal defect	1
33777	Repair of transposition of the great arteries, atrial baffle procedure (eg, Mustard or Senning type) with cardiopulmonary bypass; with repair of subpulmonic obstruction	1
33778	Repair of transposition of the great arteries, aortic pulmonary artery reconstruction (eg, Jatene type)	1
33779	Repair of transposition of the great arteries, aortic pulmonary artery reconstruction (eg, Jatene type); with removal of pulmonary band	1
33780	Repair of transposition of the great arteries, aortic pulmonary artery reconstruction (eg, Jatene type); with closure of ventricular septal defect	1
33781	Repair of transposition of the great arteries, aortic pulmonary artery reconstruction (eg, Jatene type); with repair of subpulmonic obstruction	1
33782	Aortic root translocation with ventricular septal defect and pulmonary stenosis repair (ie, Nikaidoh procedure); without coronary ostium reimplantation	1
33783	Aortic root translocation with ventricular septal defect and pulmonary stenosis repair (ie, Nikaidoh procedure); with reimplantation of 1 or both coronary ostia	1
33786	Total repair, truncus arteriosus (Rastelli type operation)	1
33788	Reimplantation of an anomalous pulmonary artery	1
33800	Aortic suspension (aortopexy) for tracheal decompression (eg, for tracheomalacia) (separate procedure)	1
33802	Division of aberrant vessel (vascular ring)	1
33803	Division of aberrant vessel (vascular ring); with reanastomosis	1
33813	Obliteration of aortopulmonary septal defect; without cardiopulmonary bypass	1
33814	Obliteration of aortopulmonary septal defect; with cardiopulmonary bypass	1

22020	Danain of material direction and advantage by limiting	4
33820	Repair of patent ductus arteriosus; by ligation	1
33822	Repair of patent ductus arteriosus; by division, younger than 18 years	1
33824	Repair of patent ductus arteriosus; by division, 18 years and older	1
33840	Excision of coarctation of aorta, with or without associated patent ductus arteriosus; with direct anastomosis	1
33845	Excision of coarctation of aorta, with or without associated patent ductus arteriosus; with graft	1
33851	Excision of coarctation of aorta, with or without associated patent ductus arteriosus; repair using either left subclavian artery or prosthetic material as gusset for enlargement	1
33852	Repair of hypoplastic or interrupted aortic arch using autogenous or prosthetic material; without cardiopulmonary bypass	1
33853	Repair of hypoplastic or interrupted aortic arch using autogenous or prosthetic material; with cardiopulmonary bypass	1
33858	Ascending aorta graft, with cardiopulmonary bypass, includes valve suspension, when performed; for aortic dissection	1
33859	Ascending aorta graft, with cardiopulmonary bypass, includes valve suspension, when performed; for aortic disease other than dissection (eg, aneurysm)	1
33863	Ascending aorta graft, with cardiopulmonary bypass, with aortic root replacement using valved conduit and coronary reconstruction (eg, Bentall)	1
33864	Ascending aorta graft, with cardiopulmonary bypass with valve suspension, with coronary reconstruction and valve-sparing aortic root remodeling (eg, David Procedure, Yacoub Procedure)	1
33866	Aortic hemiarch graft including isolation and control of the arch vessels, beveled open distal aortic anastomosis extending under one or more of the arch vessels, and total circulatory arrest or isolated cerebral perfusion (List separately in addition to code for primary procedure)	1
33871	Transverse aortic arch graft, with cardiopulmonary bypass, with profound hypothermia, total circulatory arrest and isolated cerebral perfusion with reimplantation of arch vessel(s) (eg, island pedicle or individual arch vessel reimplantation)	1
33875	Descending thoracic aorta graft, with or without bypass	1
33877	Repair of thoracoabdominal aortic aneurysm with graft, with or without cardiopulmonary bypass	1
33880	Endovascular repair of descending thoracic aorta (eg, aneurysm, pseudoaneurysm, dissection, penetrating ulcer, intramural hematoma, or traumatic disruption); involving coverage of left subclavian artery origin, initial endoprosthesis plus descending thoracic aortic extension(s), if required, to level of celiac artery origin	1
33881	Endovascular repair of descending thoracic aorta (eg, aneurysm, pseudoaneurysm, dissection, penetrating ulcer, intramural hematoma, or traumatic disruption); not involving coverage of left subclavian artery origin, initial endoprosthesis plus descending thoracic aortic extension(s), if required, to level of celiac artery origin	1

		1
33883	Placement of proximal extension prosthesis for endovascular repair of descending thoracic aorta (eg, aneurysm, pseudoaneurysm, dissection, penetrating ulcer, intramural hematoma, or traumatic disruption); initial extension	1
33884	Placement of proximal extension prosthesis for endovascular repair of descending thoracic aorta (eg, aneurysm, pseudoaneurysm, dissection, penetrating ulcer, intramural hematoma, or traumatic disruption); each additional proximal extension (List separately in addition to code for primary procedure)	1
33886	Placement of distal extension prosthesis(s) delayed after endovascular repair of descending thoracic aorta	1
33889	Open subclavian to carotid artery transposition performed in conjunction with endovascular repair of descending thoracic aorta, by neck incision, unilateral	2
33891	Bypass graft, with other than vein, transcervical retropharyngeal carotid-carotid, performed in conjunction with endovascular repair of descending thoracic aorta, by neck incision	2
33894	Endovascular stent repair of coarctation of the ascending, transverse, or descending thoracic or abdominal aorta, involving stent placement; across major side branches	1
33895	Endovascular stent repair of coarctation of the ascending, transverse, or descending thoracic or abdominal aorta, involving stent placement; not crossing major side branches	1
33897	Percutaneous transluminal angioplasty of native or recurrent coarctation of the aorta	1
33910	Pulmonary artery embolectomy; with cardiopulmonary bypass	1
33915	Pulmonary artery embolectomy; without cardiopulmonary bypass	1
33916	Pulmonary endarterectomy, with or without embolectomy, with cardiopulmonary bypass	1
33917	Repair of pulmonary artery stenosis by reconstruction with patch or graft	1
33920	Repair of pulmonary atresia with ventricular septal defect, by construction or replacement of conduit from right or left ventricle to pulmonary artery	1
33922	Transection of pulmonary artery with cardiopulmonary bypass	1
33924	Ligation and takedown of a systemic-to-pulmonary artery shunt, performed in conjunction with a congenital heart procedure (List separately in addition to code for primary procedure)	1
33925	Repair of pulmonary artery arborization anomalies by unifocalization; without cardiopulmonary bypass	1
33926	Repair of pulmonary artery arborization anomalies by unifocalization; with cardiopulmonary bypass	1
33927	Implantation of a total replacement heart system (artificial heart) with recipient cardiectomy	1
33928	Removal and replacement of total replacement heart system (artificial heart)	1
33929	Removal of a total replacement heart system (artificial heart) for heart transplantation (List separately in addition to code for primary procedure)	1

33930	Donor cardiectomy-pneumonectomy (including cold preservation)	1
33933	Backbench standard preparation of cadaver donor heart/lung allograft prior to transplantation, including dissection of allograft from surrounding soft tissues to prepare aorta, superior vena cava, inferior vena cava, and trachea for implantation	1
33935	Heart-lung transplant with recipient cardiectomy-pneumonectomy	1
33940	Donor cardiectomy (including cold preservation)	1
33944	Backbench standard preparation of cadaver donor heart allograft prior to transplantation, including dissection of allograft from surrounding soft tissues to prepare aorta, superior vena cava, inferior vena cava, pulmonary artery, and left atrium for implantation	1
33945	Heart transplant, with or without recipient cardiectomy	1
33946	Extracorporeal membrane oxygenation (ECMO)/extracorporeal life support (ECLS) provided by physician; initiation, veno-venous	1
33947	Extracorporeal membrane oxygenation (ECMO)/extracorporeal life support (ECLS) provided by physician; initiation, veno-arterial	1
33948	Extracorporeal membrane oxygenation (ECMO)/extracorporeal life support (ECLS) provided by physician; daily management, each day, veno-venous	1
33949	Extracorporeal membrane oxygenation (ECMO)/extracorporeal life support (ECLS) provided by physician; daily management, each day, veno-arterial	1
33951	Extracorporeal membrane oxygenation (ECMO)/extracorporeal life support (ECLS) provided by physician; insertion of peripheral (arterial and/or venous) cannula(e), percutaneous, birth through 5 years of age (includes fluoroscopic guidance, when performed)	1
33952	Extracorporeal membrane oxygenation (ECMO)/extracorporeal life support (ECLS) provided by physician; insertion of peripheral (arterial and/or venous) cannula(e), percutaneous, 6 years and older (includes fluoroscopic guidance, when performed)	1
33953	Extracorporeal membrane oxygenation (ECMO)/extracorporeal life support (ECLS) provided by physician; insertion of peripheral (arterial and/or venous) cannula(e), open, birth through 5 years of age	1
33954	Extracorporeal membrane oxygenation (ECMO)/extracorporeal life support (ECLS) provided by physician; insertion of peripheral (arterial and/or venous) cannula(e), open, 6 years and older	1
33955	Extracorporeal membrane oxygenation (ECMO)/extracorporeal life support (ECLS) provided by physician; insertion of central cannula(e) by sternotomy or thoracotomy, birth through 5 years of age	1
33956	Extracorporeal membrane oxygenation (ECMO)/extracorporeal life support (ECLS) provided by physician; insertion of central cannula(e) by sternotomy or thoracotomy, 6 years and older	1
33957	Extracorporeal membrane oxygenation (ECMO)/extracorporeal life support (ECLS) provided by physician; reposition peripheral (arterial and/or venous) cannula(e), percutaneous, birth through 5 years of age (includes fluoroscopic guidance, when performed)	1

33958	Extracorporeal membrane oxygenation (ECMO)/extracorporeal life support (ECLS) provided by physician; reposition peripheral (arterial and/or venous) cannula(e), percutaneous, 6 years and older (includes fluoroscopic guidance, when performed)	1
33959	Extracorporeal membrane oxygenation (ECMO)/extracorporeal life support (ECLS) provided by physician; reposition peripheral (arterial and/or venous) cannula(e), open, birth through 5 years of age (includes fluoroscopic guidance, when performed)	1
33962	Extracorporeal membrane oxygenation (ECMO)/extracorporeal life support (ECLS) provided by physician; reposition peripheral (arterial and/or venous) cannula(e), open, 6 years and older (includes fluoroscopic guidance, when performed)	1
33963	Extracorporeal membrane oxygenation (ECMO)/extracorporeal life support (ECLS) provided by physician; reposition of central cannula(e) by sternotomy or thoracotomy, birth through 5 years of age (includes fluoroscopic guidance, when performed)	1
33964	Extracorporeal membrane oxygenation (ECMO)/extracorporeal life support (ECLS) provided by physician; reposition central cannula(e) by sternotomy or thoracotomy, 6 years and older (includes fluoroscopic guidance, when performed)	1
33965	Extracorporeal membrane oxygenation (ECMO)/extracorporeal life support (ECLS) provided by physician; removal of peripheral (arterial and/or venous) cannula(e), percutaneous, birth through 5 years of age	1
33966	Extracorporeal membrane oxygenation (ECMO)/extracorporeal life support (ECLS) provided by physician; removal of peripheral (arterial and/or venous) cannula(e), percutaneous, 6 years and older	1
33967	Insertion of intra-aortic balloon assist device, percutaneous	1
33968	Removal of intra-aortic balloon assist device, percutaneous	1
33969	Extracorporeal membrane oxygenation (ECMO)/extracorporeal life support (ECLS) provided by physician; removal of peripheral (arterial and/or venous) cannula(e), open, birth through 5 years of age	1
33970	Insertion of intra-aortic balloon assist device through the femoral artery, open approach	1
33971	Removal of intra-aortic balloon assist device including repair of femoral artery, with or without graft	1
33973	Insertion of intra-aortic balloon assist device through the ascending aorta	1
33974	Removal of intra-aortic balloon assist device from the ascending aorta, including repair of the ascending aorta, with or without graft	1
33975	Insertion of ventricular assist device; extracorporeal, single ventricle	1
33976	Insertion of ventricular assist device; extracorporeal, biventricular	1
33977	Removal of ventricular assist device; extracorporeal, single ventricle	1
33978	Removal of ventricular assist device; extracorporeal, biventricular	1
33979	Insertion of ventricular assist device, implantable intracorporeal, single ventricle	1
33980	Removal of ventricular assist device, implantable intracorporeal, single ventricle	1

33981	Replacement of extracorporeal ventricular assist device, single or biventricular, pump(s), single or each pump	1
33982	Replacement of ventricular assist device pump(s); implantable intracorporeal, single ventricle, without cardiopulmonary bypass	1
33983	Replacement of ventricular assist device pump(s); implantable intracorporeal, single ventricle, with cardiopulmonary bypass	1
33984	Extracorporeal membrane oxygenation (ECMO)/extracorporeal life support (ECLS) provided by physician; removal of peripheral (arterial and/or venous) cannula(e), open, 6 years and older	1
33985	Extracorporeal membrane oxygenation (ECMO)/extracorporeal life support (ECLS) provided by physician; removal of central cannula(e) by sternotomy or thoracotomy, birth through 5 years of age	1
33986	Extracorporeal membrane oxygenation (ECMO)/extracorporeal life support (ECLS) provided by physician; removal of central cannula(e) by sternotomy or thoracotomy, 6 years and older	1
33987	Arterial exposure with creation of graft conduit (eg, chimney graft) to facilitate arterial perfusion for ECMO/ECLS (List separately in addition to code for primary procedure)	1
33988	Insertion of left heart vent by thoracic incision (eg, sternotomy, thoracotomy) for ECMO/ECLS	1
33989	Removal of left heart vent by thoracic incision (eg, sternotomy, thoracotomy) for ECMO/ECLS	1
33990	Insertion of ventricular assist device, percutaneous, including radiological supervision and interpretation; left heart, arterial access only	1
33991	Insertion of ventricular assist device, percutaneous, including radiological supervision and interpretation; left heart, both arterial and venous access, with transseptal puncture	1
33992	Removal of percutaneous left heart ventricular assist device, arterial or arterial and venous cannula(s), at separate and distinct session from insertion	1
33993	Repositioning of percutaneous right or left heart ventricular assist device with imaging guidance at separate and distinct session from insertion	1
33995	Insertion of ventricular assist device, percutaneous, including radiological supervision and interpretation; right heart, venous access only	1
33997	Removal of percutaneous right heart ventricular assist device, venous cannula, at separate and distinct session from insertion	1
33999	Unlisted procedure, cardiac surgery	1
34001	Embolectomy or thrombectomy, with or without catheter; carotid, subclavian or innominate artery, by neck incision	2
34051	Embolectomy or thrombectomy, with or without catheter; innominate, subclavian artery, by thoracic incision	1
34101	Embolectomy or thrombectomy, with or without catheter; axillary, brachial, innominate, subclavian artery, by arm incision	2

34111	Embolectomy or thrombectomy, with or without catheter; radial or ulnar artery, by arm incision	1
34151	Embolectomy or thrombectomy, with or without catheter; renal, celiac, mesentery, aortoiliac artery, by abdominal incision	2
34201	Embolectomy or thrombectomy, with or without catheter; femoropopliteal, aortoiliac artery, by leg incision	1
34203	Embolectomy or thrombectomy, with or without catheter; popliteal-tibio-peroneal artery, by leg incision	1
34401	Thrombectomy, direct or with catheter; vena cava, iliac vein, by abdominal incision	2
34421	Thrombectomy, direct or with catheter; vena cava, iliac, femoropopliteal vein, by leg incision	1
34451	Thrombectomy, direct or with catheter; vena cava, iliac, femoropopliteal vein, by abdominal and leg incision	1
34471	Thrombectomy, direct or with catheter; subclavian vein, by neck incision	2
34490	Thrombectomy, direct or with catheter; axillary and subclavian vein, by arm incision	2
34501	Valvuloplasty, femoral vein	1
34502	Reconstruction of vena cava, any method	1
34510	Venous valve transposition, any vein donor	1
34520	Cross-over vein graft to venous system	1
34530	Saphenopopliteal vein anastomosis	1
34701	Endovascular repair of infrarenal aorta by deployment of an aorto-aortic tube endograft including pre-procedure sizing and device selection, all nonselective catheterization(s), all associated radiological supervision and interpretation, all endograft extension(s) placed in the aorta from the level of the renal arteries to the aortic bifurcation, and all angioplasty/stenting performed from the level of the renal arteries to the aortic bifurcation; for other than rupture (eg, for aneurysm, pseudoaneurysm, dissection, penetrating ulcer)	1
34702	Endovascular repair of infrarenal aorta by deployment of an aorto-aortic tube endograft including pre-procedure sizing and device selection, all nonselective catheterization(s), all associated radiological supervision and interpretation, all endograft extension(s) placed in the aorta from the level of the renal arteries to the aortic bifurcation, and all angioplasty/stenting performed from the level of the renal arteries to the aortic bifurcation; for rupture including temporary aortic and/or iliac balloon occlusion, when performed (eg, for aneurysm, pseudoaneurysm, dissection, penetrating ulcer, traumatic disruption)	1
34703	Endovascular repair of infrarenal aorta and/or iliac artery(ies) by deployment of an aorto-uni-iliac endograft including pre-procedure sizing and device selection, all nonselective catheterization(s), all associated radiological supervision and interpretation, all endograft extension(s) placed in the aorta from the level of the renal arteries to the iliac bifurcation, and all angioplasty/stenting performed from the level of the renal arteries to the iliac bifurcation; for other than rupture (eg, for aneurysm, pseudoaneurysm, dissection, penetrating ulcer)	1

34704	Endovascular repair of infrarenal aorta and/or iliac artery(ies) by deployment of an aorto-uni-iliac endograft including pre-procedure sizing and device selection, all nonselective catheterization(s), all associated radiological supervision and interpretation, all endograft extension(s) placed in the aorta from the level of the renal arteries to the iliac bifurcation, and all angioplasty/stenting performed from the level of the renal arteries to the iliac bifurcation; for rupture including temporary aortic and/or iliac balloon occlusion, when performed (eg, for aneurysm, pseudoaneurysm, dissection, penetrating ulcer, traumatic disruption)	1
34705	Endovascular repair of infrarenal aorta and/or iliac artery(ies) by deployment of an aorto-bi-iliac endograft including pre-procedure sizing and device selection, all nonselective catheterization(s), all associated radiological supervision and interpretation, all endograft extension(s) placed in the aorta from the level of the renal arteries to the iliac bifurcation, and all angioplasty/stenting performed from the level of the renal arteries to the iliac bifurcation; for other than rupture (eg, for aneurysm, pseudoaneurysm, dissection, penetrating ulcer)	1
34706	Endovascular repair of infrarenal aorta and/or iliac artery(ies) by deployment of an aorto-bi-iliac endograft including pre-procedure sizing and device selection, all nonselective catheterization(s), all associated radiological supervision and interpretation, all endograft extension(s) placed in the aorta from the level of the renal arteries to the iliac bifurcation, and all angioplasty/stenting performed from the level of the renal arteries to the iliac bifurcation; for rupture including temporary aortic and/or iliac balloon occlusion, when performed (eg, for aneurysm, pseudoaneurysm, dissection, penetrating ulcer, traumatic disruption)	1
34707	Endovascular repair of iliac artery by deployment of an ilio-iliac tube endograft including pre-procedure sizing and device selection, all nonselective catheterization(s), all associated radiological supervision and interpretation, and all endograft extension(s) proximally to the aortic bifurcation and distally to the iliac bifurcation, and treatment zone angioplasty/stenting, when performed, unilateral; for other than rupture (eg, for aneurysm, pseudoaneurysm, dissection, arteriovenous malformation)	2
34708	Endovascular repair of iliac artery by deployment of an ilio-iliac tube endograft including pre-procedure sizing and device selection, all nonselective catheterization(s), all associated radiological supervision and interpretation, and all endograft extension(s) proximally to the aortic bifurcation and distally to the iliac bifurcation, and treatment zone angioplasty/stenting, when performed, unilateral; for rupture including temporary aortic and/or iliac balloon occlusion, when performed (eg, for aneurysm, pseudoaneurysm, dissection, arteriovenous malformation, traumatic disruption)	2
34709	Placement of extension prosthesis(es) distal to the common iliac artery(ies) or proximal to the renal artery(ies) for endovascular repair of infrarenal abdominal aortic or iliac aneurysm, false aneurysm, dissection, penetrating ulcer, including preprocedure sizing and device selection, all nonselective catheterization(s), all associated radiological supervision and interpretation, and treatment zone angioplasty/stenting, when performed, per vessel treated (List separately in addition to code for primary procedure)	1
34710	Delayed placement of distal or proximal extension prosthesis for endovascular repair of infrarenal abdominal aortic or iliac aneurysm, false aneurysm, dissection, endoleak, or endograft migration, including pre-procedure sizing and device selection, all nonselective catheterization(s), all associated radiological supervision	1

	and interpretation, and treatment zone angioplasty/stenting, when performed; initial vessel treated	
34711	Delayed placement of distal or proximal extension prosthesis for endovascular repair of infrarenal abdominal aortic or iliac aneurysm, false aneurysm, dissection, endoleak, or endograft migration, including pre-procedure sizing and device selection, all nonselective catheterization(s), all associated radiological supervision and interpretation, and treatment zone angioplasty/stenting, when performed; each additional vessel treated (List separately in addition to code for primary procedure)	1
34712	Transcatheter delivery of enhanced fixation device(s) to the endograft (eg, anchor, screw, tack) and all associated radiological supervision and interpretation	1
34713	Percutaneous access and closure of femoral artery for delivery of endograft through a large sheath (12 French or larger), including ultrasound guidance, when performed, unilateral (List separately in addition to code for primary procedure)	1
34714	Open femoral artery exposure with creation of conduit for delivery of endovascular prosthesis or for establishment of cardiopulmonary bypass, by groin incision, unilateral (List separately in addition to code for primary procedure)	1
34715	Open axillary/subclavian artery exposure for delivery of endovascular prosthesis by infraclavicular or supraclavicular incision, unilateral (List separately in addition to code for primary procedure)	1
34716	Open axillary/subclavian artery exposure with creation of conduit for delivery of endovascular prosthesis or for establishment of cardiopulmonary bypass, by infraclavicular or supraclavicular incision, unilateral (List separately in addition to code for primary procedure)	1
34717	Endovascular repair of iliac artery at the time of aorto-iliac artery endograft placement by deployment of an iliac branched endograft including pre-procedure sizing and device selection, all ipsilateral selective iliac artery catheterization(s), all associated radiological supervision and interpretation, and all endograft extension(s) proximally to the aortic bifurcation and distally in the internal iliac, external iliac, and common femoral artery(ies), and treatment zone angioplasty/stenting, when performed, for rupture or other than rupture (eg, for aneurysm, pseudoaneurysm, dissection, arteriovenous malformation, penetrating ulcer, traumatic disruption), unilateral (List separately in addition to code for primary procedure)	1
34718	Endovascular repair of iliac artery, not associated with placement of an aorto-iliac artery endograft at the same session, by deployment of an iliac branched endograft, including pre-procedure sizing and device selection, all ipsilateral selective iliac artery catheterization(s), all associated radiological supervision and interpretation, and all endograft extension(s) proximally to the aortic bifurcation and distally in the internal iliac, external iliac, and common femoral artery(ies), and treatment zone angioplasty/stenting, when performed, for other than rupture (eg, for aneurysm, pseudoaneurysm, dissection, arteriovenous malformation, penetrating ulcer), unilateral	1
34808	Endovascular placement of iliac artery occlusion device (List separately in addition to code for primary procedure)	1

34812	Open femoral artery exposure for delivery of endovascular prosthesis, by groin incision, unilateral (List separately in addition to code for primary procedure)	1
34813	Placement of femoral-femoral prosthetic graft during endovascular aortic aneurysm repair (List separately in addition to code for primary procedure)	1
34820	Open iliac artery exposure for delivery of endovascular prosthesis or iliac occlusion during endovascular therapy, by abdominal or retroperitoneal incision, unilateral (List separately in addition to code for primary procedure)	1
34830	Open repair of infrarenal aortic aneurysm or dissection, plus repair of associated arterial trauma, following unsuccessful endovascular repair; tube prosthesis	1
34831	Open repair of infrarenal aortic aneurysm or dissection, plus repair of associated arterial trauma, following unsuccessful endovascular repair; aorto-bi-iliac prosthesis	1
34832	Open repair of infrarenal aortic aneurysm or dissection, plus repair of associated arterial trauma, following unsuccessful endovascular repair; aorto-bifemoral prosthesis	1
34833	Open iliac artery exposure with creation of conduit for delivery of endovascular prosthesis or for establishment of cardiopulmonary bypass, by abdominal or retroperitoneal incision, unilateral (List separately in addition to code for primary procedure)	1
34834	Open brachial artery exposure for delivery of endovascular prosthesis, unilateral (List separately in addition to code for primary procedure)	1
34839	Physician planning of a patient-specific fenestrated visceral aortic endograft requiring a minimum of 90 minutes of physician time	1
34841	Endovascular repair of visceral aorta (eg, aneurysm, pseudoaneurysm, dissection, penetrating ulcer, intramural hematoma, or traumatic disruption) by deployment of a fenestrated visceral aortic endograft and all associated radiological supervision and interpretation, including target zone angioplasty, when performed; including one visceral artery endoprosthesis (superior mesenteric, celiac or renal artery)	1
34842	Endovascular repair of visceral aorta (eg, aneurysm, pseudoaneurysm, dissection, penetrating ulcer, intramural hematoma, or traumatic disruption) by deployment of a fenestrated visceral aortic endograft and all associated radiological supervision and interpretation, including target zone angioplasty, when performed; including two visceral artery endoprostheses (superior mesenteric, celiac and/or renal artery[s])	1
34843	Endovascular repair of visceral aorta (eg, aneurysm, pseudoaneurysm, dissection, penetrating ulcer, intramural hematoma, or traumatic disruption) by deployment of a fenestrated visceral aortic endograft and all associated radiological supervision and interpretation, including target zone angioplasty, when performed; including three visceral artery endoprostheses (superior mesenteric, celiac and/or renal artery[s])	1
34844	Endovascular repair of visceral aorta (eg, aneurysm, pseudoaneurysm, dissection, penetrating ulcer, intramural hematoma, or traumatic disruption) by deployment of a fenestrated visceral aortic endograft and all associated radiological supervision and interpretation, including target zone angioplasty, when performed; including four or more visceral artery endoprostheses (superior mesenteric, celiac and/or renal artery[s])	1

34845	Endovascular repair of visceral aorta and infrarenal abdominal aorta (eg, aneurysm, pseudoaneurysm, dissection, penetrating ulcer, intramural hematoma, or traumatic disruption) with a fenestrated visceral aortic endograft and concomitant unibody or modular infrarenal aortic endograft and all associated radiological supervision and interpretation, including target zone angioplasty, when performed; including one visceral artery endoprosthesis (superior mesenteric, celiac or renal artery)	1
34846	Endovascular repair of visceral aorta and infrarenal abdominal aorta (eg, aneurysm, pseudoaneurysm, dissection, penetrating ulcer, intramural hematoma, or traumatic disruption) with a fenestrated visceral aortic endograft and concomitant unibody or modular infrarenal aortic endograft and all associated radiological supervision and interpretation, including target zone angioplasty, when performed; including two visceral artery endoprostheses (superior mesenteric, celiac and/or renal artery[s])	1
34847	Endovascular repair of visceral aorta and infrarenal abdominal aorta (eg, aneurysm, pseudoaneurysm, dissection, penetrating ulcer, intramural hematoma, or traumatic disruption) with a fenestrated visceral aortic endograft and concomitant unibody or modular infrarenal aortic endograft and all associated radiological supervision and interpretation, including target zone angioplasty, when performed; including three visceral artery endoprostheses (superior mesenteric, celiac and/or renal artery[s])	1
34848	Endovascular repair of visceral aorta and infrarenal abdominal aorta (eg, aneurysm, pseudoaneurysm, dissection, penetrating ulcer, intramural hematoma, or traumatic disruption) with a fenestrated visceral aortic endograft and concomitant unibody or modular infrarenal aortic endograft and all associated radiological supervision and interpretation, including target zone angioplasty, when performed; including four or more visceral artery endoprostheses (superior mesenteric, celiac and/or renal artery[s])	1
34900	Endovascular repair of iliac artery (eg, aneurysm, pseudoaneurysm, arteriovenous malformation, trauma) using ilio-iliac tube endoprosthesis	1
35001	Direct repair of aneurysm, pseudoaneurysm, or excision (partial or total) and graft insertion, with or without patch graft; for aneurysm and associated occlusive disease, carotid, subclavian artery, by neck incision	1
35002	Direct repair of aneurysm, pseudoaneurysm, or excision (partial or total) and graft insertion, with or without patch graft; for ruptured aneurysm, carotid, subclavian artery, by neck incision	1
35005	Direct repair of aneurysm, pseudoaneurysm, or excision (partial or total) and graft insertion, with or without patch graft; for aneurysm, pseudoaneurysm, and associated occlusive disease, vertebral artery	1
35011	Direct repair of aneurysm, pseudoaneurysm, or excision (partial or total) and graft insertion, with or without patch graft; for aneurysm and associated occlusive disease, axillary-brachial artery, by arm incision	1
35013	Direct repair of aneurysm, pseudoaneurysm, or excision (partial or total) and graft insertion, with or without patch graft; for ruptured aneurysm, axillary-brachial artery, by arm incision	1
35021	Direct repair of aneurysm, pseudoaneurysm, or excision (partial or total) and graft insertion, with or without patch graft; for aneurysm, pseudoaneurysm, and associated occlusive disease, innominate, subclavian artery, by thoracic incision	1

35022	Direct repair of aneurysm, pseudoaneurysm, or excision (partial or total) and graft insertion, with or without patch graft; for ruptured aneurysm, innominate, subclavian artery, by thoracic incision	1
35045	Direct repair of aneurysm, pseudoaneurysm, or excision (partial or total) and graft insertion, with or without patch graft; for aneurysm, pseudoaneurysm, and associated occlusive disease, radial or ulnar artery	1
35081	Direct repair of aneurysm, pseudoaneurysm, or excision (partial or total) and graft insertion, with or without patch graft; for aneurysm, pseudoaneurysm, and associated occlusive disease, abdominal aorta	1
35082	Direct repair of aneurysm, pseudoaneurysm, or excision (partial or total) and graft insertion, with or without patch graft; for ruptured aneurysm, abdominal aorta	1
35091	Direct repair of aneurysm, pseudoaneurysm, or excision (partial or total) and graft insertion, with or without patch graft; for aneurysm, pseudoaneurysm, and associated occlusive disease, abdominal aorta involving visceral vessels (mesenteric, celiac, renal)	1
35092	Direct repair of aneurysm, pseudoaneurysm, or excision (partial or total) and graft insertion, with or without patch graft; for ruptured aneurysm, abdominal aorta involving visceral vessels (mesenteric, celiac, renal)	1
35102	Direct repair of aneurysm, pseudoaneurysm, or excision (partial or total) and graft insertion, with or without patch graft; for aneurysm, pseudoaneurysm, and associated occlusive disease, abdominal aorta involving iliac vessels (common, hypogastric, external)	1
35103	Direct repair of aneurysm, pseudoaneurysm, or excision (partial or total) and graft insertion, with or without patch graft; for ruptured aneurysm, abdominal aorta involving iliac vessels (common, hypogastric, external)	1
35111	Direct repair of aneurysm, pseudoaneurysm, or excision (partial or total) and graft insertion, with or without patch graft; for aneurysm, pseudoaneurysm, and associated occlusive disease, splenic artery	1
35112	Direct repair of aneurysm, pseudoaneurysm, or excision (partial or total) and graft insertion, with or without patch graft; for ruptured aneurysm, splenic artery	1
35121	Direct repair of aneurysm, pseudoaneurysm, or excision (partial or total) and graft insertion, with or without patch graft; for aneurysm, pseudoaneurysm, and associated occlusive disease, hepatic, celiac, renal, or mesenteric artery	1
35122	Direct repair of aneurysm, pseudoaneurysm, or excision (partial or total) and graft insertion, with or without patch graft; for ruptured aneurysm, hepatic, celiac, renal, or mesenteric artery	1
35131	Direct repair of aneurysm, pseudoaneurysm, or excision (partial or total) and graft insertion, with or without patch graft; for aneurysm, pseudoaneurysm, and associated occlusive disease, iliac artery (common, hypogastric, external)	1
35132	Direct repair of aneurysm, pseudoaneurysm, or excision (partial or total) and graft insertion, with or without patch graft; for ruptured aneurysm, iliac artery (common, hypogastric, external)	1
35141	Direct repair of aneurysm, pseudoaneurysm, or excision (partial or total) and graft insertion, with or without patch graft; for aneurysm, pseudoaneurysm, and	2

	associated occlusive disease, common femoral artery (profunda femoris, superficial femoral)	
35142	Direct repair of aneurysm, pseudoaneurysm, or excision (partial or total) and graft insertion, with or without patch graft; for ruptured aneurysm, common femoral artery (profunda femoris, superficial femoral)	1
35151	Direct repair of aneurysm, pseudoaneurysm, or excision (partial or total) and graft insertion, with or without patch graft; for aneurysm, pseudoaneurysm, and associated occlusive disease, popliteal artery	1
35152	Direct repair of aneurysm, pseudoaneurysm, or excision (partial or total) and graft insertion, with or without patch graft; for ruptured aneurysm, popliteal artery	1
35180	Repair, congenital arteriovenous fistula; head and neck	1
35182	Repair, congenital arteriovenous fistula; thorax and abdomen	1
35184	Repair, congenital arteriovenous fistula; extremities	1
35188	Repair, acquired or traumatic arteriovenous fistula; head and neck	1
35189	Repair, acquired or traumatic arteriovenous fistula; thorax and abdomen	1
35190	Repair, acquired or traumatic arteriovenous fistula; extremities	1
35201	Repair blood vessel, direct; neck	1
35206	Repair blood vessel, direct; upper extremity	1
35207	Repair blood vessel, direct; hand, finger	1
35211	Repair blood vessel, direct; intrathoracic, with bypass	1
35216	Repair blood vessel, direct; intrathoracic, without bypass	1
35221	Repair blood vessel, direct; intra-abdominal	1
35226	Repair blood vessel, direct; lower extremity	1
35231	Repair blood vessel with vein graft; neck	1
35236	Repair blood vessel with vein graft; upper extremity	1
35241	Repair blood vessel with vein graft; intrathoracic, with bypass	1
35246	Repair blood vessel with vein graft; intrathoracic, without bypass	1
35251	Repair blood vessel with vein graft; intra-abdominal	1
35256	Repair blood vessel with vein graft; lower extremity	1
35261	Repair blood vessel with graft other than vein; neck	1
35266	Repair blood vessel with graft other than vein; upper extremity	1
35271	Repair blood vessel with graft other than vein; intrathoracic, with bypass	1
35276	Repair blood vessel with graft other than vein; intrathoracic, without bypass	1
35281	Repair blood vessel with graft other than vein; intra-abdominal	1
35286	Repair blood vessel with graft other than vein; lower extremity	1

35301	Thromboendarterectomy, including patch graft, if performed; carotid, vertebral, subclavian, by neck incision	2
35311	Thromboendarterectomy, including patch graft, if performed; subclavian, innominate, by thoracic incision	1
35321	Thromboendarterectomy, including patch graft, if performed; axillary-brachial	1
35331	Thromboendarterectomy, including patch graft, if performed; abdominal aorta	1
35341	Thromboendarterectomy, including patch graft, if performed; mesenteric, celiac, or renal	1
35351	Thromboendarterectomy, including patch graft, if performed; iliac	1
35355	Thromboendarterectomy, including patch graft, if performed; iliofemoral	1
35361	Thromboendarterectomy, including patch graft, if performed; combined aortoiliac	1
35363	Thromboendarterectomy, including patch graft, if performed; combined aortoiliofemoral	1
35371	Thromboendarterectomy, including patch graft, if performed; common femoral	1
35372	Thromboendarterectomy, including patch graft, if performed; deep (profunda) femoral	2
35390	Reoperation, carotid, thromboendarterectomy, more than 1 month after original operation (List separately in addition to code for primary procedure)	1
35400	Angioscopy (noncoronary vessels or grafts) during therapeutic intervention (List separately in addition to code for primary procedure)	1
35456	Transluminal balloon angioplasty, open; femoral-popliteal	1
35500	Harvest of upper extremity vein, 1 segment, for lower extremity or coronary artery bypass procedure (List separately in addition to code for primary procedure)	1
35501	Bypass graft, with vein; common carotid-ipsilateral internal carotid	1
35506	Bypass graft, with vein; carotid-subclavian or subclavian-carotid	1
35508	Bypass graft, with vein; carotid-vertebral	1
35509	Bypass graft, with vein; carotid-contralateral carotid	1
35510	Bypass graft, with vein; carotid-brachial	1
35511	Bypass graft, with vein; subclavian-subclavian	1
35512	Bypass graft, with vein; subclavian-brachial	1
35515	Bypass graft, with vein; subclavian-vertebral	1
35516	Bypass graft, with vein; subclavian-axillary	1
35518	Bypass graft, with vein; axillary-axillary	1
35521	Bypass graft, with vein; axillary-femoral	2
35522	Bypass graft, with vein; axillary-brachial	1
35523	Bypass graft, with vein; brachial-ulnar or -radial	2
35525	Bypass graft, with vein; brachial-brachial	1

35526	Bypass graft, with vein; aortosubclavian, aortoinnominate, or aortocarotid	1
35531	Bypass graft, with vein; aortoceliac or aortomesenteric	1
35533	Bypass graft, with vein; axillary-femoral-femoral	1
35535	Bypass graft, with vein; hepatorenal	2
35536	Bypass graft, with vein; splenorenal	1
35556	Bypass graft, with vein; femoral-popliteal	1
35558	Bypass graft, with vein; femoral-femoral	1
35560	Bypass graft, with vein; aortorenal	1
35563	Bypass graft, with vein; ilioiliac	1
35565	Bypass graft, with vein; iliofemoral	1
35566	Bypass graft, with vein; femoral-anterior tibial, posterior tibial, peroneal artery or other distal vessels	1
35570	Bypass graft, with vein; tibial-tibial, peroneal-tibial, or tibial/peroneal trunk-tibial	2
35571	Bypass graft, with vein; popliteal-tibial, -peroneal artery or other distal vessels	1
35572	Harvest of femoropopliteal vein, 1 segment, for vascular reconstruction procedure (eg, aortic, vena caval, coronary, peripheral artery) (List separately in addition to code for primary procedure)	1
35583	In-situ vein bypass; femoral-popliteal	1
35585	In-situ vein bypass; femoral-anterior tibial, posterior tibial, or peroneal artery	1
35587	In-situ vein bypass; popliteal-tibial, peroneal	1
35600	Harvest of upper extremity artery, 1 segment, for coronary artery bypass procedure, open	2
35601	Bypass graft, with other than vein; common carotid-ipsilateral internal carotid	1
35606	Bypass graft, with other than vein; carotid-subclavian	1
35612	Bypass graft, with other than vein; subclavian-subclavian	1
35616	Bypass graft, with other than vein; subclavian-axillary	1
35621	Bypass graft, with other than vein; axillary-femoral	1
35623	Bypass graft, with other than vein; axillary-popliteal or -tibial	1
35626	Bypass graft, with other than vein; aortosubclavian, aortoinnominate, or aortocarotid	1
35631	Bypass graft, with other than vein; aortoceliac, aortomesenteric, aortorenal	1
35632	Bypass graft, with other than vein; ilio-celiac	2
35633	Bypass graft, with other than vein; ilio-mesenteric	2
35634	Bypass graft, with other than vein; iliorenal	2
35636	Bypass graft, with other than vein; splenorenal (splenic to renal arterial anastomosis)	1

35642	Bypass graft, with other than vein; carotid-vertebral	1
35645	Bypass graft, with other than vein; subclavian-vertebral	1
35646	Bypass graft, with other than vein; aortobifemoral	1
35647	Bypass graft, with other than vein; aortofemoral	1
35650	Bypass graft, with other than vein; axillary-axillary	1
35654	Bypass graft, with other than vein; axillary-femoral-femoral	1
35656	Bypass graft, with other than vein; femoral-popliteal	1
35661	Bypass graft, with other than vein; femoral-femoral	1
35663	Bypass graft, with other than vein; ilioiliac	1
35665	Bypass graft, with other than vein; iliofemoral	1
35666	Bypass graft, with other than vein; femoral-anterior tibial, posterior tibial, or peroneal artery	1
35671	Bypass graft, with other than vein; popliteal-tibial or -peroneal artery	1
35681	Bypass graft; composite, prosthetic and vein (List separately in addition to code for primary procedure)	1
35682	Bypass graft; autogenous composite, 2 segments of veins from 2 locations (List separately in addition to code for primary procedure)	1
35683	Bypass graft; autogenous composite, 3 or more segments of vein from 2 or more locations (List separately in addition to code for primary procedure)	1
35685	Placement of vein patch or cuff at distal anastomosis of bypass graft, synthetic conduit (List separately in addition to code for primary procedure)	1
35686	Creation of distal arteriovenous fistula during lower extremity bypass surgery (non-hemodialysis) (List separately in addition to code for primary procedure)	1
35691	Transposition and/or reimplantation; vertebral to carotid artery	1
35693	Transposition and/or reimplantation; vertebral to subclavian artery	1
35694	Transposition and/or reimplantation; subclavian to carotid artery	1
35695	Transposition and/or reimplantation; carotid to subclavian artery	1
35697	Reimplantation, visceral artery to infrarenal aortic prosthesis, each artery (List separately in addition to code for primary procedure)	1
35700	Reoperation, femoral-popliteal or femoral (popliteal)-anterior tibial, posterior tibial, peroneal artery, or other distal vessels, more than 1 month after original operation (List separately in addition to code for primary procedure)	1
35701	Exploration not followed by surgical repair, artery; neck (eg, carotid, subclavian)	2
35702	Exploration not followed by surgical repair, artery; upper extremity (eg, axillary, brachial, radial, ulnar)	2
35703	Exploration not followed by surgical repair, artery; lower extremity (eg, common femoral, deep femoral, superficial femoral, popliteal, tibial, peroneal)	2
35800	Exploration for postoperative hemorrhage, thrombosis or infection; neck	1

35820	Exploration for postoperative hemorrhage, thrombosis or infection; chest	1
35840	Exploration for postoperative hemorrhage, thrombosis or infection; abdomen	1
35860	Exploration for postoperative hemorrhage, thrombosis or infection; extremity	1
35870	Repair of graft-enteric fistula	1
35875	Thrombectomy of arterial or venous graft (other than hemodialysis graft or fistula)	1
35876	Thrombectomy of arterial or venous graft (other than hemodialysis graft or fistula); with revision of arterial or venous graft	1
35879	Revision, lower extremity arterial bypass, without thrombectomy, open; with vein patch angioplasty	2
35881	Revision, lower extremity arterial bypass, without thrombectomy, open; with segmental vein interposition	1
35901	Excision of infected graft; neck	1
35903	Excision of infected graft; extremity	1
35905	Excision of infected graft; thorax	1
35907	Excision of infected graft; abdomen	1
36000	Introduction of needle or intracatheter, vein	2
36002	Injection procedures (eg, thrombin) for percutaneous treatment of extremity pseudoaneurysm	1
36005	Injection procedure for extremity venography (including introduction of needle or intracatheter)	1
36010	Introduction of catheter, superior or inferior vena cava	1
36011	Selective catheter placement, venous system; first order branch (eg, renal vein, jugular vein)	1
36012	Selective catheter placement, venous system; second order, or more selective, branch (eg, left adrenal vein, petrosal sinus)	1
36013	Introduction of catheter, right heart or main pulmonary artery	1
36014	Selective catheter placement, left or right pulmonary artery	1
36015	Selective catheter placement, segmental or subsegmental pulmonary artery	1
36100	Introduction of needle or intracatheter, carotid or vertebral artery	2
36140	Introduction of needle or intracatheter, upper or lower extremity artery	1
36160	Introduction of needle or intracatheter, aortic, translumbar	1
36200	Introduction of catheter, aorta	1
36215	Selective catheter placement, arterial system; each first order thoracic or brachiocephalic branch, within a vascular family	1
36216	Selective catheter placement, arterial system; initial second order thoracic or brachiocephalic branch, within a vascular family	1
36217	Selective catheter placement, arterial system; initial third order or more selective thoracic or brachiocephalic branch, within a vascular family	1

36218	Selective catheter placement, arterial system; additional second order, third order, and beyond, thoracic or brachiocephalic branch, within a vascular family (List in addition to code for initial second or third order vessel as appropriate)	1
36221	Non-selective catheter placement, thoracic aorta, with angiography of the extracranial carotid, vertebral, and/or intracranial vessels, unilateral or bilateral, and all associated radiological supervision and interpretation, includes angiography of the cervicocerebral arch, when performed	1
36222	Selective catheter placement, common carotid or innominate artery, unilateral, any approach, with angiography of the ipsilateral extracranial carotid circulation and all associated radiological supervision and interpretation, includes angiography of the cervicocerebral arch, when performed	2
36223	Selective catheter placement, common carotid or innominate artery, unilateral, any approach, with angiography of the ipsilateral intracranial carotid circulation and all associated radiological supervision and interpretation, includes angiography of the extracranial carotid and cervicocerebral arch, when performed	2
36224	Selective catheter placement, internal carotid artery, unilateral, with angiography of the ipsilateral intracranial carotid circulation and all associated radiological supervision and interpretation, includes angiography of the extracranial carotid and cervicocerebral arch, when performed	2
36225	Selective catheter placement, subclavian or innominate artery, unilateral, with angiography of the ipsilateral vertebral circulation and all associated radiological supervision and interpretation, includes angiography of the cervicocerebral arch, when performed	2
36226	Selective catheter placement, vertebral artery, unilateral, with angiography of the ipsilateral vertebral circulation and all associated radiological supervision and interpretation, includes angiography of the cervicocerebral arch, when performed	2
36227	Selective catheter placement, external carotid artery, unilateral, with angiography of the ipsilateral external carotid circulation and all associated radiological supervision and interpretation (List separately in addition to code for primary procedure)	1
36228	Selective catheter placement, each intracranial branch of the internal carotid or vertebral arteries, unilateral, with angiography of the selected vessel circulation and all associated radiological supervision and interpretation (eg, middle cerebral artery, posterior inferior cerebellar artery) (List separately in addition to code for primary procedure)	1
36245	Selective catheter placement, arterial system; each first order abdominal, pelvic, or lower extremity artery branch, within a vascular family	2
36246	Selective catheter placement, arterial system; initial second order abdominal, pelvic, or lower extremity artery branch, within a vascular family	2
36247	Selective catheter placement, arterial system; initial third order or more selective abdominal, pelvic, or lower extremity artery branch, within a vascular family	2
36248	Selective catheter placement, arterial system; additional second order, third order, and beyond, abdominal, pelvic, or lower extremity artery branch, within a vascular family (List in addition to code for initial second or third order vessel as appropriate)	1

36251	Selective catheter placement (first-order), main renal artery and any accessory renal artery(s) for renal angiography, including arterial puncture and catheter placement(s), fluoroscopy, contrast injection(s), image postprocessing, permanent recording of images, and radiological supervision and interpretation, including pressure gradient measurements when performed, and flush aortogram when performed; unilateral	1
36252	Selective catheter placement (first-order), main renal artery and any accessory renal artery(s) for renal angiography, including arterial puncture and catheter placement(s), fluoroscopy, contrast injection(s), image postprocessing, permanent recording of images, and radiological supervision and interpretation, including pressure gradient measurements when performed, and flush aortogram when performed; bilateral	1
36253	Superselective catheter placement (one or more second order or higher renal artery branches) renal artery and any accessory renal artery(s) for renal angiography, including arterial puncture, catheterization, fluoroscopy, contrast injection(s), image postprocessing, permanent recording of images, and radiological supervision and interpretation, including pressure gradient measurements when performed, and flush aortogram when performed; unilateral	1
36254	Superselective catheter placement (one or more second order or higher renal artery branches) renal artery and any accessory renal artery(s) for renal angiography, including arterial puncture, catheterization, fluoroscopy, contrast injection(s), image postprocessing, permanent recording of images, and radiological supervision and interpretation, including pressure gradient measurements when performed, and flush aortogram when performed; bilateral	1
36260	Insertion of implantable intra-arterial infusion pump (eg, for chemotherapy of liver)	1
36261	Revision of implanted intra-arterial infusion pump	1
36262	Removal of implanted intra-arterial infusion pump	1
36299	Unlisted procedure, vascular injection	1
36400	Venipuncture, younger than age 3 years, necessitating the skill of a physician or other qualified health care professional, not to be used for routine venipuncture; femoral or jugular vein	1
36405	Venipuncture, younger than age 3 years, necessitating the skill of a physician or other qualified health care professional, not to be used for routine venipuncture; scalp vein	1
36406	Venipuncture, younger than age 3 years, necessitating the skill of a physician or other qualified health care professional, not to be used for routine venipuncture; other vein	1
36410	Venipuncture, age 3 years or older, necessitating the skill of a physician or other qualified health care professional (separate procedure), for diagnostic or therapeutic purposes (not to be used for routine venipuncture)	3
36415	Collection of venous blood by venipuncture	2
36416	Collection of capillary blood specimen (eg, finger, heel, ear stick)	6
36420	Venipuncture, cutdown; younger than age 1 year	1
36425	Venipuncture, cutdown; age 1 or over	1

36430	Transfusion, blood or blood components	1
36440	Push transfusion, blood, 2 years or younger	1
36450	Exchange transfusion, blood; newborn	1
36455	Exchange transfusion, blood; other than newborn	1
36456	Partial exchange transfusion, blood, plasma or crystalloid necessitating the skill of a	1
	physician or other qualified health care professional, newborn	
36460	Transfusion, intrauterine, fetal	1
36465	Injection of non-compounded foam sclerosant with ultrasound compression maneuvers to guide dispersion of the injectate, inclusive of all imaging guidance and monitoring; single incompetent extremity truncal vein (eg, great saphenous vein, accessory saphenous vein)	2
36466	Injection of non-compounded foam sclerosant with ultrasound compression maneuvers to guide dispersion of the injectate, inclusive of all imaging guidance and monitoring; multiple incompetent truncal veins (eg, great saphenous vein, accessory saphenous vein), same leg	2
36468	Injection(s) of sclerosant for spider veins (telangiectasia), limb or trunk	2
36470	Injection of sclerosant; single incompetent vein (other than telangiectasia)	1
36471	Injection of sclerosant; multiple incompetent veins (other than telangiectasia), same leg	1
36473	Endovenous ablation therapy of incompetent vein, extremity, inclusive of all imaging guidance and monitoring, percutaneous, mechanochemical; first vein treated	1
36474	Endovenous ablation therapy of incompetent vein, extremity, inclusive of all imaging guidance and monitoring, percutaneous, mechanochemical; subsequent vein(s) treated in a single extremity, each through separate access sites (List separately in addition to code for primary procedure)	1
36475	Endovenous ablation therapy of incompetent vein, extremity, inclusive of all imaging guidance and monitoring, percutaneous, radiofrequency; first vein treated	2
36476	Endovenous ablation therapy of incompetent vein, extremity, inclusive of all imaging guidance and monitoring, percutaneous, radiofrequency; subsequent vein(s) treated in a single extremity, each through separate access sites (List separately in addition to code for primary procedure)	2
36478	Endovenous ablation therapy of incompetent vein, extremity, inclusive of all imaging guidance and monitoring, percutaneous, laser; first vein treated	2
36479	Endovenous ablation therapy of incompetent vein, extremity, inclusive of all imaging guidance and monitoring, percutaneous, laser; subsequent vein(s) treated in a single extremity, each through separate access sites (List separately in addition to code for primary procedure)	2
36481	Percutaneous portal vein catheterization by any method	1
36482	Endovenous ablation therapy of incompetent vein, extremity, by transcatheter delivery of a chemical adhesive (eg, cyanoacrylate) remote from the access site, inclusive of all imaging guidance and monitoring, percutaneous; first vein treated	1

36483	Endovenous ablation therapy of incompetent vein, extremity, by transcatheter delivery of a chemical adhesive (eg, cyanoacrylate) remote from the access site, inclusive of all imaging guidance and monitoring, percutaneous; subsequent vein(s)	2
	treated in a single extremity, each through separate access sites (List separately in addition to code for primary procedure)	
36500	Venous catheterization for selective organ blood sampling	1
36510	Catheterization of umbilical vein for diagnosis or therapy, newborn	1
36511	Therapeutic apheresis; for white blood cells	1
36512	Therapeutic apheresis; for red blood cells	1
36513	Therapeutic apheresis; for platelets	1
36514	Therapeutic apheresis; for plasma pheresis	1
36516	Therapeutic apheresis; with extracorporeal immunoadsorption, selective adsorption or selective filtration and plasma reinfusion	1
36522	Photopheresis, extracorporeal	1
36555	Insertion of non-tunneled centrally inserted central venous catheter; younger than 5 years of age	1
36556	Insertion of non-tunneled centrally inserted central venous catheter; age 5 years or older	1
36557	Insertion of tunneled centrally inserted central venous catheter, without subcutaneous port or pump; younger than 5 years of age	2
36558	Insertion of tunneled centrally inserted central venous catheter, without subcutaneous port or pump; age 5 years or older	2
36560	Insertion of tunneled centrally inserted central venous access device, with subcutaneous port; younger than 5 years of age	2
36561	Insertion of tunneled centrally inserted central venous access device, with subcutaneous port; age 5 years or older	2
36563	Insertion of tunneled centrally inserted central venous access device with subcutaneous pump	1
36565	Insertion of tunneled centrally inserted central venous access device, requiring 2 catheters via 2 separate venous access sites; without subcutaneous port or pump (eg, Tesio type catheter)	2
36566	Insertion of tunneled centrally inserted central venous access device, requiring 2 catheters via 2 separate venous access sites; with subcutaneous port(s)	2
36568	Insertion of peripherally inserted central venous catheter (PICC), without subcutaneous port or pump, without imaging guidance; younger than 5 years of age	1
36569	Insertion of peripherally inserted central venous catheter (PICC), without subcutaneous port or pump, without imaging guidance; age 5 years or older	1
36570	Insertion of peripherally inserted central venous access device, with subcutaneous port; younger than 5 years of age	2
36571	Insertion of peripherally inserted central venous access device, with subcutaneous port; age 5 years or older	2

36572	Insertion of peripherally inserted central venous catheter (PICC), without subcutaneous port or pump, including all imaging guidance, image documentation, and all associated radiological supervision and interpretation required to perform the insertion; younger than 5 years of age	1
36573	Insertion of peripherally inserted central venous catheter (PICC), without subcutaneous port or pump, including all imaging guidance, image documentation, and all associated radiological supervision and interpretation required to perform the insertion; age 5 years or older	1
36575	Repair of tunneled or non-tunneled central venous access catheter, without subcutaneous port or pump, central or peripheral insertion site	1
36576	Repair of central venous access device, with subcutaneous port or pump, central or peripheral insertion site	1
36578	Replacement, catheter only, of central venous access device, with subcutaneous port or pump, central or peripheral insertion site	1
36580	Replacement, complete, of a non-tunneled centrally inserted central venous catheter, without subcutaneous port or pump, through same venous access	1
36581	Replacement, complete, of a tunneled centrally inserted central venous catheter, without subcutaneous port or pump, through same venous access	1
36582	Replacement, complete, of a tunneled centrally inserted central venous access device, with subcutaneous port, through same venous access	1
36583	Replacement, complete, of a tunneled centrally inserted central venous access device, with subcutaneous pump, through same venous access	1
36584	Replacement, complete, of a peripherally inserted central venous catheter (PICC), without subcutaneous port or pump, through same venous access, including all imaging guidance, image documentation, and all associated radiological supervision and interpretation required to perform the replacement	1
36585	Replacement, complete, of a peripherally inserted central venous access device, with subcutaneous port, through same venous access	1
36589	Removal of tunneled central venous catheter, without subcutaneous port or pump	2
36590	Removal of tunneled central venous access device, with subcutaneous port or pump, central or peripheral insertion	1
36591	Collection of blood specimen from a completely implantable venous access device	2
36592	Collection of blood specimen using established central or peripheral catheter, venous, not otherwise specified	1
36593	Declotting by thrombolytic agent of implanted vascular access device or catheter	1
36595	Mechanical removal of pericatheter obstructive material (eg, fibrin sheath) from central venous device via separate venous access	1
36596	Mechanical removal of intraluminal (intracatheter) obstructive material from central venous device through device lumen	1
36597	Repositioning of previously placed central venous catheter under fluoroscopic guidance	1

36598	Contrast injection(s) for radiologic evaluation of existing central venous access device, including fluoroscopy, image documentation and report	2
36600	Arterial puncture, withdrawal of blood for diagnosis	1
36620	Arterial catheterization or cannulation for sampling, monitoring or transfusion (separate procedure); percutaneous	1
36625	Arterial catheterization or cannulation for sampling, monitoring or transfusion (separate procedure); cutdown	1
36640	Arterial catheterization for prolonged infusion therapy (chemotherapy), cutdown	1
36660	Catheterization, umbilical artery, newborn, for diagnosis or therapy	1
36680	Placement of needle for intraosseous infusion	1
36800	Insertion of cannula for hemodialysis, other purpose (separate procedure); vein to vein	1
36810	Insertion of cannula for hemodialysis, other purpose (separate procedure); arteriovenous, external (Scribner type)	1
36815	Insertion of cannula for hemodialysis, other purpose (separate procedure); arteriovenous, external revision, or closure	1
36818	Arteriovenous anastomosis, open; by upper arm cephalic vein transposition	2
36819	Arteriovenous anastomosis, open; by upper arm basilic vein transposition	1
36820	Arteriovenous anastomosis, open; by forearm vein transposition	1
36821	Arteriovenous anastomosis, open; direct, any site (eg, Cimino type) (separate procedure)	1
36823	Insertion of arterial and venous cannula(s) for isolated extracorporeal circulation including regional chemotherapy perfusion to an extremity, with or without hyperthermia, with removal of cannula(s) and repair of arteriotomy and venotomy sites	1
36825	Creation of arteriovenous fistula by other than direct arteriovenous anastomosis (separate procedure); autogenous graft	1
36830	Creation of arteriovenous fistula by other than direct arteriovenous anastomosis (separate procedure); nonautogenous graft (eg, biological collagen, thermoplastic graft)	1
36831	Thrombectomy, open, arteriovenous fistula without revision, autogenous or nonautogenous dialysis graft (separate procedure)	1
36832	Revision, open, arteriovenous fistula; without thrombectomy, autogenous or nonautogenous dialysis graft (separate procedure)	1
36833	Revision, open, arteriovenous fistula; with thrombectomy, autogenous or nonautogenous dialysis graft (separate procedure)	1
36835	Insertion of Thomas shunt (separate procedure)	1
36838	Distal revascularization and interval ligation (DRIL), upper extremity hemodialysis access (steal syndrome)	2
36860	External cannula declotting (separate procedure); without balloon catheter	1

36861	External cannula declotting (separate procedure); with balloon catheter	1
36901	Introduction of needle(s) and/or catheter(s), dialysis circuit, with diagnostic angiography of the dialysis circuit, including all direct puncture(s) and catheter placement(s), injection(s) of contrast, all necessary imaging from the arterial anastomosis and adjacent artery through entire venous outflow including the inferior or superior vena cava, fluoroscopic guidance, radiological supervision and interpretation and image documentation and report	1
36902	Introduction of needle(s) and/or catheter(s), dialysis circuit, with diagnostic angiography of the dialysis circuit, including all direct puncture(s) and catheter placement(s), injection(s) of contrast, all necessary imaging from the arterial anastomosis and adjacent artery through entire venous outflow including the inferior or superior vena cava, fluoroscopic guidance, radiological supervision and interpretation and image documentation and report; with transluminal balloon angioplasty, peripheral dialysis segment, including all imaging and radiological supervision and interpretation necessary to perform the angioplasty	1
36903	Introduction of needle(s) and/or catheter(s), dialysis circuit, with diagnostic angiography of the dialysis circuit, including all direct puncture(s) and catheter placement(s), injection(s) of contrast, all necessary imaging from the arterial anastomosis and adjacent artery through entire venous outflow including the inferior or superior vena cava, fluoroscopic guidance, radiological supervision and interpretation and image documentation and report; with transcatheter placement of intravascular stent(s), peripheral dialysis segment, including all imaging and radiological supervision and interpretation necessary to perform the stenting, and all angioplasty within the peripheral dialysis segment	1
36904	Percutaneous transluminal mechanical thrombectomy and/or infusion for thrombolysis, dialysis circuit, any method, including all imaging and radiological supervision and interpretation, diagnostic angiography, fluoroscopic guidance, catheter placement(s), and intraprocedural pharmacological thrombolytic injection(s)	1
36905	Percutaneous transluminal mechanical thrombectomy and/or infusion for thrombolysis, dialysis circuit, any method, including all imaging and radiological supervision and interpretation, diagnostic angiography, fluoroscopic guidance, catheter placement(s), and intraprocedural pharmacological thrombolytic injection(s); with transluminal balloon angioplasty, peripheral dialysis segment, including all imaging and radiological supervision and interpretation necessary to perform the angioplasty	1
36906	Percutaneous transluminal mechanical thrombectomy and/or infusion for thrombolysis, dialysis circuit, any method, including all imaging and radiological supervision and interpretation, diagnostic angiography, fluoroscopic guidance, catheter placement(s), and intraprocedural pharmacological thrombolytic injection(s); with transcatheter placement of intravascular stent(s), peripheral dialysis segment, including all imaging and radiological supervision and interpretation necessary to perform the stenting, and all angioplasty within the peripheral dialysis circuit	1
36907	Transluminal balloon angioplasty, central dialysis segment, performed through dialysis circuit, including all imaging and radiological supervision and interpretation required to perform the angioplasty (List separately in addition to code for primary procedure)	1

36908	Transcatheter placement of intravascular stent(s), central dialysis segment, performed through dialysis circuit, including all imaging and radiological supervision and interpretation required to perform the stenting, and all angioplasty in the central dialysis segment (List separately in addition to code for primary procedure)	1
36909	Dialysis circuit permanent vascular embolization or occlusion (including main circuit or any accessory veins), endovascular, including all imaging and radiological supervision and interpretation necessary to complete the intervention (List separately in addition to code for primary procedure)	1
37140	Venous anastomosis, open; portocaval	1
37145	Venous anastomosis, open; renoportal	1
37160	Venous anastomosis, open; caval-mesenteric	1
37180	Venous anastomosis, open; splenorenal, proximal	1
37181	Venous anastomosis, open; splenorenal, distal (selective decompression of esophagogastric varices, any technique)	1
37182	Insertion of transvenous intrahepatic portosystemic shunt(s) (TIPS) (includes venous access, hepatic and portal vein catheterization, portography with hemodynamic evaluation, intrahepatic tract formation/dilatation, stent placement and all associated imaging guidance and documentation)	1
37183	Revision of transvenous intrahepatic portosystemic shunt(s) (TIPS) (includes venous access, hepatic and portal vein catheterization, portography with hemodynamic evaluation, intrahepatic tract recannulization/dilatation, stent placement and all associated imaging guidance and documentation)	1
37184	Primary percutaneous transluminal mechanical thrombectomy, noncoronary, non-intracranial, arterial or arterial bypass graft, including fluoroscopic guidance and intraprocedural pharmacological thrombolytic injection(s); initial vessel	2
37185	Primary percutaneous transluminal mechanical thrombectomy, noncoronary, non- intracranial, arterial or arterial bypass graft, including fluoroscopic guidance and intraprocedural pharmacological thrombolytic injection(s); second and all subsequent vessel(s) within the same vascular family (List separately in addition to code for primary mechanical thrombectomy procedure)	1
37186	Secondary percutaneous transluminal thrombectomy (eg, nonprimary mechanical, snare basket, suction technique), noncoronary, non-intracranial, arterial or arterial bypass graft, including fluoroscopic guidance and intraprocedural pharmacological thrombolytic injections, provided in conjunction with another percutaneous intervention other than primary mechanical thrombectomy (List separately in addition to code for primary procedure)	1
37187	Percutaneous transluminal mechanical thrombectomy, vein(s), including intraprocedural pharmacological thrombolytic injections and fluoroscopic guidance	2
37188	Percutaneous transluminal mechanical thrombectomy, vein(s), including intraprocedural pharmacological thrombolytic injections and fluoroscopic guidance, repeat treatment on subsequent day during course of thrombolytic therapy	2
37191	Insertion of intravascular vena cava filter, endovascular approach including vascular access, vessel selection, and radiological supervision and interpretation, intraprocedural roadmapping, and imaging guidance (ultrasound and fluoroscopy), when performed	1

37192	Repositioning of intravascular vena cava filter, endovascular approach including vascular access, vessel selection, and radiological supervision and interpretation, intraprocedural roadmapping, and imaging guidance (ultrasound and fluoroscopy), when performed	1
37193	Retrieval (removal) of intravascular vena cava filter, endovascular approach including vascular access, vessel selection, and radiological supervision and interpretation, intraprocedural roadmapping, and imaging guidance (ultrasound and fluoroscopy), when performed	1
37195	Thrombolysis, cerebral, by intravenous infusion	1
37197	Transcatheter retrieval, percutaneous, of intravascular foreign body (eg, fractured venous or arterial catheter), includes radiological supervision and interpretation, and imaging guidance (ultrasound or fluoroscopy), when performed	1
37200	Transcatheter biopsy	1
37211	Transcatheter therapy, arterial infusion for thrombolysis other than coronary or intracranial, any method, including radiological supervision and interpretation, initial treatment day	1
37212	Transcatheter therapy, venous infusion for thrombolysis, any method, including radiological supervision and interpretation, initial treatment day	1
37213	Transcatheter therapy, arterial or venous infusion for thrombolysis other than coronary, any method, including radiological supervision and interpretation, continued treatment on subsequent day during course of thrombolytic therapy, including follow-up catheter contrast injection, position change, or exchange, when performed	1
37214	Transcatheter therapy, arterial or venous infusion for thrombolysis other than coronary, any method, including radiological supervision and interpretation, continued treatment on subsequent day during course of thrombolytic therapy, including follow-up catheter contrast injection, position change, or exchange, when performed; cessation of thrombolysis including removal of catheter and vessel closure by any method	1
37215	Transcatheter placement of intravascular stent(s), cervical carotid artery, open or percutaneous, including angioplasty, when performed, and radiological supervision and interpretation; with distal embolic protection	2
37216	Transcatheter placement of intravascular stent(s), cervical carotid artery, open or percutaneous, including angioplasty, when performed, and radiological supervision and interpretation; without distal embolic protection	2
37217	Transcatheter placement of intravascular stent(s), intrathoracic common carotid artery or innominate artery by retrograde treatment, open ipsilateral cervical carotid artery exposure, including angioplasty, when performed, and radiological supervision and interpretation	2
37218	Transcatheter placement of intravascular stent(s), intrathoracic common carotid artery or innominate artery, open or percutaneous antegrade approach, including angioplasty, when performed, and radiological supervision and interpretation	2
37220	Revascularization, endovascular, open or percutaneous, iliac artery, unilateral, initial vessel; with transluminal angioplasty	2

37221	Revascularization, endovascular, open or percutaneous, iliac artery, unilateral, initial vessel; with transluminal stent placement(s), includes angioplasty within the same vessel, when performed	2
37222	Revascularization, endovascular, open or percutaneous, iliac artery, each additional ipsilateral iliac vessel; with transluminal angioplasty (List separately in addition to code for primary procedure)	2
37223	Revascularization, endovascular, open or percutaneous, iliac artery, each additional ipsilateral iliac vessel; with transluminal stent placement(s), includes angioplasty within the same vessel, when performed (List separately in addition to code for primary procedure)	2
37224	Revascularization, endovascular, open or percutaneous, femoral, popliteal artery(s), unilateral; with transluminal angioplasty	2
37225	Revascularization, endovascular, open or percutaneous, femoral, popliteal artery(s), unilateral; with atherectomy, includes angioplasty within the same vessel, when performed	2
37226	Revascularization, endovascular, open or percutaneous, femoral, popliteal artery(s), unilateral; with transluminal stent placement(s), includes angioplasty within the same vessel, when performed	2
37227	Revascularization, endovascular, open or percutaneous, femoral, popliteal artery(s), unilateral; with transluminal stent placement(s) and atherectomy, includes angioplasty within the same vessel, when performed	2
37228	Revascularization, endovascular, open or percutaneous, tibial, peroneal artery, unilateral, initial vessel; with transluminal angioplasty	2
37229	Revascularization, endovascular, open or percutaneous, tibial, peroneal artery, unilateral, initial vessel; with atherectomy, includes angioplasty within the same vessel, when performed	2
37230	Revascularization, endovascular, open or percutaneous, tibial, peroneal artery, unilateral, initial vessel; with transluminal stent placement(s), includes angioplasty within the same vessel, when performed	2
37231	Revascularization, endovascular, open or percutaneous, tibial, peroneal artery, unilateral, initial vessel; with transluminal stent placement(s) and atherectomy, includes angioplasty within the same vessel, when performed	2
37232	Revascularization, endovascular, open or percutaneous, tibial/peroneal artery, unilateral, each additional vessel; with transluminal angioplasty (List separately in addition to code for primary procedure)	2
37233	Revascularization, endovascular, open or percutaneous, tibial/peroneal artery, unilateral, each additional vessel; with atherectomy, includes angioplasty within the same vessel, when performed (List separately in addition to code for primary procedure)	2
37234	Revascularization, endovascular, open or percutaneous, tibial/peroneal artery, unilateral, each additional vessel; with transluminal stent placement(s), includes angioplasty within the same vessel, when performed (List separately in addition to code for primary procedure)	2

37235	Revascularization, endovascular, open or percutaneous, tibial/peroneal artery, unilateral, each additional vessel; with transluminal stent placement(s) and atherectomy, includes angioplasty within the same vessel, when performed (List separately in addition to code for primary procedure)	2
37236	Transcatheter placement of an intravascular stent(s) (except lower extremity artery(s) for occlusive disease, cervical carotid, extracranial vertebral or intrathoracic carotid, intracranial, or coronary), open or percutaneous, including radiological supervision and interpretation and including all angioplasty within the same vessel, when performed; initial artery	1
37237	Transcatheter placement of an intravascular stent(s) (except lower extremity artery(s) for occlusive disease, cervical carotid, extracranial vertebral or intrathoracic carotid, intracranial, or coronary), open or percutaneous, including radiological supervision and interpretation and including all angioplasty within the same vessel, when performed; each additional artery (List separately in addition to code for primary procedure)	1
37238	Transcatheter placement of an intravascular stent(s), open or percutaneous, including radiological supervision and interpretation and including angioplasty within the same vessel, when performed; initial vein	1
37239	Transcatheter placement of an intravascular stent(s), open or percutaneous, including radiological supervision and interpretation and including angioplasty within the same vessel, when performed; each additional vein (List separately in addition to code for primary procedure)	1
37241	Vascular embolization or occlusion, inclusive of all radiological supervision and interpretation, intraprocedural roadmapping, and imaging guidance necessary to complete the intervention; venous, other than hemorrhage (eg, congenital or acquired venous malformations, venous and capillary hemangiomas, varices, varicoceles)	1
37242	Vascular embolization or occlusion, inclusive of all radiological supervision and interpretation, intraprocedural roadmapping, and imaging guidance necessary to complete the intervention; arterial, other than hemorrhage or tumor (eg, congenital or acquired arterial malformations, arteriovenous malformations, arteriovenous fistulas, aneurysms, pseudoaneurysms)	1
37243	Vascular embolization or occlusion, inclusive of all radiological supervision and interpretation, intraprocedural roadmapping, and imaging guidance necessary to complete the intervention; for tumors, organ ischemia, or infarction	1
37244	Vascular embolization or occlusion, inclusive of all radiological supervision and interpretation, intraprocedural roadmapping, and imaging guidance necessary to complete the intervention; for arterial or venous hemorrhage or lymphatic extravasation	1
37246	Transluminal balloon angioplasty (except lower extremity artery(ies) for occlusive disease, intracranial, coronary, pulmonary, or dialysis circuit), open or percutaneous, including all imaging and radiological supervision and interpretation necessary to perform the angioplasty within the same artery; initial artery	1
37247	Transluminal balloon angioplasty (except lower extremity artery(ies) for occlusive disease, intracranial, coronary, pulmonary, or dialysis circuit), open or percutaneous, including all imaging and radiological supervision and interpretation	1

	necessary to perform the angioplasty within the same artery; each additional artery (List separately in addition to code for primary procedure)	
37248	Transluminal balloon angioplasty (except dialysis circuit), open or percutaneous, including all imaging and radiological supervision and interpretation necessary to perform the angioplasty within the same vein; initial vein	1
37249	Transluminal balloon angioplasty (except dialysis circuit), open or percutaneous, including all imaging and radiological supervision and interpretation necessary to perform the angioplasty within the same vein; each additional vein (List separately in addition to code for primary procedure)	1
37252	Intravascular ultrasound (noncoronary vessel) during diagnostic evaluation and/or therapeutic intervention, including radiological supervision and interpretation; initial noncoronary vessel (List separately in addition to code for primary procedure)	1
37253	Intravascular ultrasound (noncoronary vessel) during diagnostic evaluation and/or therapeutic intervention, including radiological supervision and interpretation; each additional noncoronary vessel (List separately in addition to code for primary procedure)	5
37500	Vascular endoscopy, surgical, with ligation of perforator veins, subfascial (SEPS)	2
37501	Unlisted vascular endoscopy procedure	1
37565	Ligation, internal jugular vein	2
37600	Ligation; external carotid artery	1
37605	Ligation; internal or common carotid artery	1
37606	Ligation; internal or common carotid artery, with gradual occlusion, as with Selverstone or Crutchfield clamp	1
37607	Ligation or banding of angioaccess arteriovenous fistula	1
37609	Ligation or biopsy, temporal artery	1
37615	Ligation, major artery (eg, post-traumatic, rupture); neck	1
37616	Ligation, major artery (eg, post-traumatic, rupture); chest	1
37617	Ligation, major artery (eg, post-traumatic, rupture); abdomen	1
37618	Ligation, major artery (eg, post-traumatic, rupture); extremity	1
37619	Ligation of inferior vena cava	1
37650	Ligation of femoral vein	2
37660	Ligation of common iliac vein	1
37700	Ligation and division of long saphenous vein at saphenofemoral junction, or distal interruptions	2
37718	Ligation, division, and stripping, short saphenous vein	1
37722	Ligation, division, and stripping, long (greater) saphenous veins from saphenofemoral junction to knee or below	2

37735	Ligation and division and complete stripping of long or short saphenous veins with radical excision of ulcer and skin graft and/or interruption of communicating veins of lower leg, with excision of deep fascia	2
37760	Ligation of perforator veins, subfascial, radical (Linton type), including skin graft, when performed, open,1 leg	2
37761	Ligation of perforator vein(s), subfascial, open, including ultrasound guidance, when performed, 1 leg	2
37765	Stab phlebectomy of varicose veins, 1 extremity; 10-20 stab incisions	2
37766	Stab phlebectomy of varicose veins, 1 extremity; more than 20 incisions	2
37780	Ligation and division of short saphenous vein at saphenopopliteal junction (separate procedure)	2
37785	Ligation, division, and/or excision of varicose vein cluster(s), 1 leg	2
37788	Penile revascularization, artery, with or without vein graft	1
37790	Penile venous occlusive procedure	1
37799	Unlisted procedure, vascular surgery	1
38100	Splenectomy; total (separate procedure)	1
38101	Splenectomy; partial (separate procedure)	1
38102	Splenectomy; total, en bloc for extensive disease, in conjunction with other procedure (List in addition to code for primary procedure)	1
38115	Repair of ruptured spleen (splenorrhaphy) with or without partial splenectomy	1
38120	Laparoscopy, surgical, splenectomy	1
38129	Unlisted laparoscopy procedure, spleen	1
38200	Injection procedure for splenoportography	1
38204	Management of recipient hematopoietic progenitor cell donor search and cell acquisition	1
38205	Blood-derived hematopoietic progenitor cell harvesting for transplantation, per collection; allogeneic	1
38206	Blood-derived hematopoietic progenitor cell harvesting for transplantation, per collection; autologous	1
38207	Transplant preparation of hematopoietic progenitor cells; cryopreservation and storage	1
38208	Transplant preparation of hematopoietic progenitor cells; thawing of previously frozen harvest, without washing, per donor	1
38209	Transplant preparation of hematopoietic progenitor cells; thawing of previously frozen harvest, with washing, per donor	1
38210	Transplant preparation of hematopoietic progenitor cells; specific cell depletion within harvest, T-cell depletion	1
38211	Transplant preparation of hematopoietic progenitor cells; tumor cell depletion	1
38212	Transplant preparation of hematopoietic progenitor cells; red blood cell removal	1

38213	Transplant preparation of hematopoietic progenitor cells; platelet depletion	1
38214	Transplant preparation of hematopoietic progenitor cells; plasma (volume) depletion	1
38215	Transplant preparation of hematopoietic progenitor cells; cell concentration in plasma, mononuclear, or buffy coat layer	1
38220	Diagnostic bone marrow; aspiration(s)	1
38221	Diagnostic bone marrow; biopsy(ies)	1
38222	Diagnostic bone marrow; biopsy(ies) and aspiration(s)	1
38230	Bone marrow harvesting for transplantation; allogeneic	1
38232	Bone marrow harvesting for transplantation; autologous	1
38240	Hematopoietic progenitor cell (HPC); allogeneic transplantation per donor	1
38241	Hematopoietic progenitor cell (HPC); autologous transplantation	1
38242	Allogeneic lymphocyte infusions	1
38243	Hematopoietic progenitor cell (HPC); HPC boost	1
38300	Drainage of lymph node abscess or lymphadenitis; simple	2
38305	Drainage of lymph node abscess or lymphadenitis; extensive	2
38308	Lymphangiotomy or other operations on lymphatic channels	1
38380	Suture and/or ligation of thoracic duct; cervical approach	1
38381	Suture and/or ligation of thoracic duct; thoracic approach	1
38382	Suture and/or ligation of thoracic duct; abdominal approach	1
38500	Biopsy or excision of lymph node(s); open, superficial	2
38505	Biopsy or excision of lymph node(s); by needle, superficial (eg, cervical, inguinal, axillary)	1
38510	Biopsy or excision of lymph node(s); open, deep cervical node(s)	2
38520	Biopsy or excision of lymph node(s); open, deep cervical node(s) with excision scalene fat pad	2
38525	Biopsy or excision of lymph node(s); open, deep axillary node(s)	1
38530	Biopsy or excision of lymph node(s); open, internal mammary node(s)	1
38531	Biopsy or excision of lymph node(s); open, inguinofemoral node(s)	2
38542	Dissection, deep jugular node(s)	2
38550	Excision of cystic hygroma, axillary or cervical; without deep neurovascular dissection	1
38555	Excision of cystic hygroma, axillary or cervical; with deep neurovascular dissection	2
38562	Limited lymphadenectomy for staging (separate procedure); pelvic and para-aortic	1
38564	Limited lymphadenectomy for staging (separate procedure); retroperitoneal (aortic and/or splenic)	1

38570	Laparoscopy, surgical; with retroperitoneal lymph node sampling (biopsy), single or multiple	1
38571	Laparoscopy, surgical; with bilateral total pelvic lymphadenectomy	1
38572	Laparoscopy, surgical; with bilateral total pelvic lymphadenectomy and peri-aortic lymph node sampling (biopsy), single or multiple	1
38573	Laparoscopy, surgical; with bilateral total pelvic lymphadenectomy and peri-aortic lymph node sampling, peritoneal washings, peritoneal biopsy(ies), omentectomy, and diaphragmatic washings, including diaphragmatic and other serosal biopsy(ies), when performed	1
38589	Unlisted laparoscopy procedure, lymphatic system	1
38700	Suprahyoid lymphadenectomy	1
38720	Cervical lymphadenectomy (complete)	2
38724	Cervical lymphadenectomy (modified radical neck dissection)	2
38740	Axillary lymphadenectomy; superficial	1
38745	Axillary lymphadenectomy; complete	1
38746	Thoracic lymphadenectomy by thoracotomy, mediastinal and regional lymphadenectomy (List separately in addition to code for primary procedure)	1
38747	Abdominal lymphadenectomy, regional, including celiac, gastric, portal, peripancreatic, with or without para-aortic and vena caval nodes (List separately in addition to code for primary procedure)	1
38760	Inguinofemoral lymphadenectomy, superficial, including Cloquet's node (separate procedure)	2
38765	Inguinofemoral lymphadenectomy, superficial, in continuity with pelvic lymphadenectomy, including external iliac, hypogastric, and obturator nodes (separate procedure)	2
38770	Pelvic lymphadenectomy, including external iliac, hypogastric, and obturator nodes (separate procedure)	2
38780	Retroperitoneal transabdominal lymphadenectomy, extensive, including pelvic, aortic, and renal nodes (separate procedure)	1
38790	Injection procedure; lymphangiography	2
38792	Injection procedure; radioactive tracer for identification of sentinel node	1
38794	Cannulation, thoracic duct	1
38900	Intraoperative identification (eg, mapping) of sentinel lymph node(s) includes injection of non-radioactive dye, when performed (List separately in addition to code for primary procedure)	2
38999	Unlisted procedure, hemic or lymphatic system	1
39000	Mediastinotomy with exploration, drainage, removal of foreign body, or biopsy; cervical approach	1
39010	Mediastinotomy with exploration, drainage, removal of foreign body, or biopsy; transthoracic approach, including either transthoracic or median sternotomy	1

39200	Resection of mediastinal cyst	1
39220	Resection of mediastinal tumor	1
39401	Mediastinoscopy; includes biopsy(ies) of mediastinal mass (eg, lymphoma), when performed	1
39402	Mediastinoscopy; with lymph node biopsy(ies) (eg, lung cancer staging)	1
39499	Unlisted procedure, mediastinum	1
39501	Repair, laceration of diaphragm, any approach	1
39503	Repair, neonatal diaphragmatic hernia, with or without chest tube insertion and with or without creation of ventral hernia	1
39540	Repair, diaphragmatic hernia (other than neonatal), traumatic; acute	1
39541	Repair, diaphragmatic hernia (other than neonatal), traumatic; chronic	1
39545	Imbrication of diaphragm for eventration, transthoracic or transabdominal, paralytic or nonparalytic	1
39560	Resection, diaphragm; with simple repair (eg, primary suture)	1
39561	Resection, diaphragm; with complex repair (eg, prosthetic material, local muscle flap)	1
39599	Unlisted procedure, diaphragm	1

40490	Biopsy of lip	1
40500	Vermilionectomy (lip shave), with mucosal advancement	1
40510	Excision of lip; transverse wedge excision with primary closure	1
40520	Excision of lip; V-excision with primary direct linear closure	1
40525	Excision of lip; full thickness, reconstruction with local flap (eg, Estlander or fan)	1
40527	Excision of lip; full thickness, reconstruction with cross lip flap (Abbe-Estlander)	1
40530	Resection of lip, more than one-fourth, without reconstruction	1
40650	Repair lip, full thickness; vermilion only	1
40652	Repair lip, full thickness; up to half vertical height	1
40654	Repair lip, full thickness; over one-half vertical height, or complex	1
40700	Plastic repair of cleft lip/nasal deformity; primary, partial or complete, unilateral	1
40701	Plastic repair of cleft lip/nasal deformity; primary bilateral, 1-stage procedure	1
40702	Plastic repair of cleft lip/nasal deformity; primary bilateral, 1 of 2 stages	1
40720	Plastic repair of cleft lip/nasal deformity; secondary, by recreation of defect and reclosure	2
40761	Plastic repair of cleft lip/nasal deformity; with cross lip pedicle flap (Abbe-Estlander type), including sectioning and inserting of pedicle	1
40799	Unlisted procedure, lips	1

		1
40800	Drainage of abscess, cyst, hematoma, vestibule of mouth; simple	1
40801	Drainage of abscess, cyst, hematoma, vestibule of mouth; complicated	1
40804	Removal of embedded foreign body, vestibule of mouth; simple	1
40805	Removal of embedded foreign body, vestibule of mouth; complicated	1
40806	Incision of labial frenum (frenotomy)	2
40808	Biopsy, vestibule of mouth	1
40810	Excision of lesion of mucosa and submucosa, vestibule of mouth; without repair	1
40812	Excision of lesion of mucosa and submucosa, vestibule of mouth; with simple repair	1
40814	Excision of lesion of mucosa and submucosa, vestibule of mouth; with complex repair	1
40816	Excision of lesion of mucosa and submucosa, vestibule of mouth; complex, with excision of underlying muscle	1
40818	Excision of mucosa of vestibule of mouth as donor graft	1
40819	Excision of frenum, labial or buccal (frenumectomy, frenulectomy, frenectomy)	2
40820	Destruction of lesion or scar of vestibule of mouth by physical methods (eg, laser, thermal, cryo, chemical)	1
40830	Closure of laceration, vestibule of mouth; 2.5 cm or less	1
40831	Closure of laceration, vestibule of mouth; over 2.5 cm or complex	1
40840	Vestibuloplasty; anterior	1
40842	Vestibuloplasty; posterior, unilateral	1
40843	Vestibuloplasty; posterior, bilateral	1
40844	Vestibuloplasty; entire arch	1
40845	Vestibuloplasty; complex (including ridge extension, muscle repositioning)	1
40899	Unlisted procedure, vestibule of mouth	1
41000	Intraoral incision and drainage of abscess, cyst, or hematoma of tongue or floor of mouth; lingual	1
41005	Intraoral incision and drainage of abscess, cyst, or hematoma of tongue or floor of mouth; sublingual, superficial	1
41006	Intraoral incision and drainage of abscess, cyst, or hematoma of tongue or floor of mouth; sublingual, deep, supramylohyoid	1
41007	Intraoral incision and drainage of abscess, cyst, or hematoma of tongue or floor of mouth; submental space	1
41008	Intraoral incision and drainage of abscess, cyst, or hematoma of tongue or floor of mouth; submandibular space	1
41009	Intraoral incision and drainage of abscess, cyst, or hematoma of tongue or floor of mouth; masticator space	1
41010	Incision of lingual frenum (frenotomy)	1
41010		1

41015	Extraoral incision and drainage of abscess, cyst, or hematoma of floor of mouth;	1
41015	sublingual	1
41016	Extraoral incision and drainage of abscess, cyst, or hematoma of floor of mouth; submental	1
41017	Extraoral incision and drainage of abscess, cyst, or hematoma of floor of mouth; submandibular	1
41018	Extraoral incision and drainage of abscess, cyst, or hematoma of floor of mouth; masticator space	1
41019	Placement of needles, catheters, or other device(s) into the head and/or neck region (percutaneous, transoral, or transnasal) for subsequent interstitial radioelement application	1
41100	Biopsy of tongue; anterior two-thirds	1
41105	Biopsy of tongue; posterior one-third	1
41108	Biopsy of floor of mouth	1
41110	Excision of lesion of tongue without closure	1
41112	Excision of lesion of tongue with closure; anterior two-thirds	1
41113	Excision of lesion of tongue with closure; posterior one-third	1
41114	Excision of lesion of tongue with closure; with local tongue flap	1
41115	Excision of lingual frenum (frenectomy)	1
41116	Excision, lesion of floor of mouth	1
41120	Glossectomy; less than one-half tongue	1
41130	Glossectomy; hemiglossectomy	1
41135	Glossectomy; partial, with unilateral radical neck dissection	1
41140	Glossectomy; complete or total, with or without tracheostomy, without radical neck dissection	1
41145	Glossectomy; complete or total, with or without tracheostomy, with unilateral radical neck dissection	1
41150	Glossectomy; composite procedure with resection floor of mouth and mandibular resection, without radical neck dissection	1
41153	Glossectomy; composite procedure with resection floor of mouth, with suprahyoid neck dissection	1
41155	Glossectomy; composite procedure with resection floor of mouth, mandibular resection, and radical neck dissection (Commando type)	1
41250	Repair of laceration 2.5 cm or less; floor of mouth and/or anterior two-thirds of tongue	1
41251	Repair of laceration 2.5 cm or less; posterior one-third of tongue	1
41252	Repair of laceration of tongue, floor of mouth, over 2.6 cm or complex	1
41510	Suture of tongue to lip for micrognathia (Douglas type procedure)	1

41512	Tongue base suspension, permanent suture technique	1
41520	Frenoplasty (surgical revision of frenum, eg, with Z-plasty)	1
41530	Submucosal ablation of the tongue base, radiofrequency, 1 or more sites, per session	1
41599	Unlisted procedure, tongue, floor of mouth	1
41800	Drainage of abscess, cyst, hematoma from dentoalveolar structures	1
41805	Removal of embedded foreign body from dentoalveolar structures; soft tissues	1
41806	Removal of embedded foreign body from dentoalveolar structures; bone	1
41820	Gingivectomy, excision gingiva, each quadrant	4
41821	Operculectomy, excision pericoronal tissues	2
41822	Excision of fibrous tuberosities, dentoalveolar structures	1
41823	Excision of osseous tuberosities, dentoalveolar structures	1
41825	Excision of lesion or tumor (except listed above), dentoalveolar structures; without repair	1
41826	Excision of lesion or tumor (except listed above), dentoalveolar structures; with simple repair	1
41827	Excision of lesion or tumor (except listed above), dentoalveolar structures; with complex repair	1
41828	Excision of hyperplastic alveolar mucosa, each quadrant (specify)	2
41830	Alveolectomy, including curettage of osteitis or sequestrectomy	2
41850	Destruction of lesion (except excision), dentoalveolar structures	1
41870	Periodontal mucosal grafting	2
41872	Gingivoplasty, each quadrant (specify)	4
41874	Alveoloplasty, each quadrant (specify)	4
41899	Unlisted procedure, dentoalveolar structures	1
42000	Drainage of abscess of palate, uvula	1
42100	Biopsy of palate, uvula	1
42104	Excision, lesion of palate, uvula; without closure	1
42106	Excision, lesion of palate, uvula; with simple primary closure	1
42107	Excision, lesion of palate, uvula; with local flap closure	1
42120	Resection of palate or extensive resection of lesion	1
42140	Uvulectomy, excision of uvula	1
42145	Palatopharyngoplasty (eg, uvulopalatopharyngoplasty, uvulopharyngoplasty)	1
42160	Destruction of lesion, palate or uvula (thermal, cryo or chemical)	1
42180	Repair, laceration of palate; up to 2 cm	1
42182	Repair, laceration of palate; over 2 cm or complex	1

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42200	Palatoplasty for cleft palate, soft and/or hard palate only	1
42205	Palatoplasty for cleft palate, with closure of alveolar ridge; soft tissue only	1
42210	Palatoplasty for cleft palate, with closure of alveolar ridge; with bone graft to alveolar ridge (includes obtaining graft)	1
42215	Palatoplasty for cleft palate; major revision	1
42220	Palatoplasty for cleft palate; secondary lengthening procedure	1
42225	Palatoplasty for cleft palate; attachment pharyngeal flap	1
42226	Lengthening of palate, and pharyngeal flap	1
42227	Lengthening of palate, with island flap	1
42235	Repair of anterior palate, including vomer flap	1
42260	Repair of nasolabial fistula	1
42280	Maxillary impression for palatal prosthesis	1
42281	Insertion of pin-retained palatal prosthesis	1
42299	Unlisted procedure, palate, uvula	1
42300	Drainage of abscess; parotid, simple	2
42305	Drainage of abscess; parotid, complicated	2
42310	Drainage of abscess; submaxillary or sublingual, intraoral	2
42320	Drainage of abscess; submaxillary, external	2
42330	Sialolithotomy; submandibular (submaxillary), sublingual or parotid, uncomplicated, intraoral	2
42335	Sialolithotomy; submandibular (submaxillary), complicated, intraoral	2
42340	Sialolithotomy; parotid, extraoral or complicated intraoral	2
42400	Biopsy of salivary gland; needle	2
42405	Biopsy of salivary gland; incisional	2
42408	Excision of sublingual salivary cyst (ranula)	2
42409	Marsupialization of sublingual salivary cyst (ranula)	1
42410	Excision of parotid tumor or parotid gland; lateral lobe, without nerve dissection	2
42415	Excision of parotid tumor or parotid gland; lateral lobe, with dissection and preservation of facial nerve	1
42420	Excision of parotid tumor or parotid gland; total, with dissection and preservation of facial nerve	1
42425	Excision of parotid tumor or parotid gland; total, en bloc removal with sacrifice of facial nerve	1
42426	Excision of parotid tumor or parotid gland; total, with unilateral radical neck dissection	2
42440	Excision of submandibular (submaxillary) gland	2

42450	Excision of sublingual gland	2
42500	Plastic repair of salivary duct, sialodochoplasty; primary or simple	2
42505	Plastic repair of salivary duct, sialodochoplasty; secondary or complicated	1
42507	Parotid duct diversion, bilateral (Wilke type procedure)	1
42509	Parotid duct diversion, bilateral (Wilke type procedure); with excision of both submandibular glands	1
42510	Parotid duct diversion, bilateral (Wilke type procedure); with ligation of both submandibular (Wharton's) ducts	1
42550	Injection procedure for sialography	1
42600	Closure salivary fistula	1
42650	Dilation salivary duct	2
42660	Dilation and catheterization of salivary duct, with or without injection	2
42665	Ligation salivary duct, intraoral	1
42699	Unlisted procedure, salivary glands or ducts	1
42700	Incision and drainage abscess; peritonsillar	1
42720	Incision and drainage abscess; retropharyngeal or parapharyngeal, intraoral approach	1
42725	Incision and drainage abscess; retropharyngeal or parapharyngeal, external approach	1
42800	Biopsy; oropharynx	1
42804	Biopsy; nasopharynx, visible lesion, simple	1
42806	Biopsy; nasopharynx, survey for unknown primary lesion	1
42808	Excision or destruction of lesion of pharynx, any method	1
42809	Removal of foreign body from pharynx	1
42810	Excision branchial cleft cyst or vestige, confined to skin and subcutaneous tissues	2
42815	Excision branchial cleft cyst, vestige, or fistula, extending beneath subcutaneous tissues and/or into pharynx	1
42820	Tonsillectomy and adenoidectomy; younger than age 12	1
42821	Tonsillectomy and adenoidectomy; age 12 or over	1
42825	Tonsillectomy, primary or secondary; younger than age 12	1
42826	Tonsillectomy, primary or secondary; age 12 or over	1
42830	Adenoidectomy, primary; younger than age 12	1
42831	Adenoidectomy, primary; age 12 or over	1
42835	Adenoidectomy, secondary; younger than age 12	1
42836	Adenoidectomy, secondary; age 12 or over	1

42842	Radical resection of tonsil, tonsillar pillars, and/or retromolar trigone; without closure	1
42844	Radical resection of tonsil, tonsillar pillars, and/or retromolar trigone; closure with local flap (eg, tongue, buccal)	1
42845	Radical resection of tonsil, tonsillar pillars, and/or retromolar trigone; closure with other flap	1
42860	Excision of tonsil tags	1
42870	Excision or destruction lingual tonsil, any method (separate procedure)	1
42890	Limited pharyngectomy	1
42892	Resection of lateral pharyngeal wall or pyriform sinus, direct closure by advancement of lateral and posterior pharyngeal walls	1
42894	Resection of pharyngeal wall requiring closure with myocutaneous or fasciocutaneous flap or free muscle, skin, or fascial flap with microvascular anastomosis	1
42900	Suture pharynx for wound or injury	1
42950	Pharyngoplasty (plastic or reconstructive operation on pharynx)	1
42953	Pharyngoesophageal repair	1
42955	Pharyngostomy (fistulization of pharynx, external for feeding)	1
42960	Control oropharyngeal hemorrhage, primary or secondary (eg, post-tonsillectomy); simple	1
42961	Control oropharyngeal hemorrhage, primary or secondary (eg, post-tonsillectomy); complicated, requiring hospitalization	1
42962	Control oropharyngeal hemorrhage, primary or secondary (eg, post-tonsillectomy); with secondary surgical intervention	1
42970	Control of nasopharyngeal hemorrhage, primary or secondary (eg, postadenoidectomy); simple, with posterior nasal packs, with or without anterior packs and/or cautery	1
42971	Control of nasopharyngeal hemorrhage, primary or secondary (eg, postadenoidectomy); complicated, requiring hospitalization	1
42972	Control of nasopharyngeal hemorrhage, primary or secondary (eg, postadenoidectomy); with secondary surgical intervention	1
42975	Drug-induced sleep endoscopy, with dynamic evaluation of velum, pharynx, tongue base, and larynx for evaluation of sleep-disordered breathing, flexible, diagnostic	1
42999	Unlisted procedure, pharynx, adenoids, or tonsils	1
43020	Esophagotomy, cervical approach, with removal of foreign body	1
43030	Cricopharyngeal myotomy	1
43045	Esophagotomy, thoracic approach, with removal of foreign body	1
43100	Excision of lesion, esophagus, with primary repair; cervical approach	1
43101	Excision of lesion, esophagus, with primary repair; thoracic or abdominal approach	1

43107	Total or near total esophagectomy, without thoracotomy; with pharyngogastrostomy or cervical esophagogastrostomy, with or without pyloroplasty (transhiatal)	1
43108	Total or near total esophagectomy, without thoracotomy; with colon interposition or small intestine reconstruction, including intestine mobilization, preparation and anastomosis(es)	1
43112	Total or near total esophagectomy, with thoracotomy; with pharyngogastrostomy or cervical esophagogastrostomy, with or without pyloroplasty (ie, McKeown esophagectomy or tri-incisional esophagectomy)	1
43113	Total or near total esophagectomy, with thoracotomy; with colon interposition or small intestine reconstruction, including intestine mobilization, preparation, and anastomosis(es)	1
43116	Partial esophagectomy, cervical, with free intestinal graft, including microvascular anastomosis, obtaining the graft and intestinal reconstruction	1
43117	Partial esophagectomy, distal two-thirds, with thoracotomy and separate abdominal incision, with or without proximal gastrectomy; with thoracic esophagogastrostomy, with or without pyloroplasty (Ivor Lewis)	1
43118	Partial esophagectomy, distal two-thirds, with thoracotomy and separate abdominal incision, with or without proximal gastrectomy; with colon interposition or small intestine reconstruction, including intestine mobilization, preparation, and anastomosis(es)	1
43121	Partial esophagectomy, distal two-thirds, with thoracotomy only, with or without proximal gastrectomy, with thoracic esophagogastrostomy, with or without pyloroplasty	1
43122	Partial esophagectomy, thoracoabdominal or abdominal approach, with or without proximal gastrectomy; with esophagogastrostomy, with or without pyloroplasty	1
43123	Partial esophagectomy, thoracoabdominal or abdominal approach, with or without proximal gastrectomy; with colon interposition or small intestine reconstruction, including intestine mobilization, preparation, and anastomosis(es)	1
43124	Total or partial esophagectomy, without reconstruction (any approach), with cervical esophagostomy	1
43130	Diverticulectomy of hypopharynx or esophagus, with or without myotomy; cervical approach	1
43135	Diverticulectomy of hypopharynx or esophagus, with or without myotomy; thoracic approach	1
43180	Esophagoscopy, rigid, transoral with diverticulectomy of hypopharynx or cervical esophagus (eg, Zenker's diverticulum), with cricopharyngeal myotomy, includes use of telescope or operating microscope and repair, when performed	1
43191	Esophagoscopy, rigid, transoral; diagnostic, including collection of specimen(s) by brushing or washing when performed (separate procedure)	1
43192	Esophagoscopy, rigid, transoral; with directed submucosal injection(s), any substance	1
43193	Esophagoscopy, rigid, transoral; with biopsy, single or multiple	1

43194	Esophagoscopy, rigid, transoral; with removal of foreign body(s)	1
43195	Esophagoscopy, rigid, transoral; with balloon dilation (less than 30 mm diameter)	1
43196	Esophagoscopy, rigid, transoral; with insertion of guide wire followed by dilation over guide wire	1
43197	Esophagoscopy, flexible, transnasal; diagnostic, including collection of specimen(s) by brushing or washing, when performed (separate procedure)	1
43198	Esophagoscopy, flexible, transnasal; with biopsy, single or multiple	1
43200	Esophagoscopy, flexible, transoral; diagnostic, including collection of specimen(s) by brushing or washing, when performed (separate procedure)	1
43201	Esophagoscopy, flexible, transoral; with directed submucosal injection(s), any substance	1
43202	Esophagoscopy, flexible, transoral; with biopsy, single or multiple	1
43204	Esophagoscopy, flexible, transoral; with injection sclerosis of esophageal varices	1
43205	Esophagoscopy, flexible, transoral; with band ligation of esophageal varices	1
43206	Esophagoscopy, flexible, transoral; with optical endomicroscopy	1
43210	Esophagogastroduodenoscopy, flexible, transoral; with esophagogastric fundoplasty, partial or complete, includes duodenoscopy when performed	1
43211	Esophagoscopy, flexible, transoral; with endoscopic mucosal resection	1
43212	Esophagoscopy, flexible, transoral; with placement of endoscopic stent (includes pre- and post-dilation and guide wire passage, when performed)	1
43213	Esophagoscopy, flexible, transoral; with dilation of esophagus, by balloon or dilator, retrograde (includes fluoroscopic guidance, when performed)	1
43214	Esophagoscopy, flexible, transoral; with dilation of esophagus with balloon (30 mm diameter or larger) (includes fluoroscopic guidance, when performed)	1
43215	Esophagoscopy, flexible, transoral; with removal of foreign body(s)	1
43216	Esophagoscopy, flexible, transoral; with removal of tumor(s), polyp(s), or other lesion(s) by hot biopsy forceps	1
43217	Esophagoscopy, flexible, transoral; with removal of tumor(s), polyp(s), or other lesion(s) by snare technique	1
43220	Esophagoscopy, flexible, transoral; with transendoscopic balloon dilation (less than 30 mm diameter)	1
43226	Esophagoscopy, flexible, transoral; with insertion of guide wire followed by passage of dilator(s) over guide wire	1
43227	Esophagoscopy, flexible, transoral; with control of bleeding, any method	1
43229	Esophagoscopy, flexible, transoral; with ablation of tumor(s), polyp(s), or other lesion(s) (includes pre- and post-dilation and guide wire passage, when performed)	1
43231	Esophagoscopy, flexible, transoral; with endoscopic ultrasound examination	1
43232	Esophagoscopy, flexible, transoral; with transendoscopic ultrasound-guided intramural or transmural fine needle aspiration/biopsy(s)	1

43233	Esophagogastroduodenoscopy, flexible, transoral; with dilation of esophagus with balloon (30 mm diameter or larger) (includes fluoroscopic guidance, when performed)	1
43235	Esophagogastroduodenoscopy, flexible, transoral; diagnostic, including collection of specimen(s) by brushing or washing, when performed (separate procedure)	1
43236	Esophagogastroduodenoscopy, flexible, transoral; with directed submucosal injection(s), any substance	1
43237	Esophagogastroduodenoscopy, flexible, transoral; with endoscopic ultrasound examination limited to the esophagus, stomach or duodenum, and adjacent structures	1
43238	Esophagogastroduodenoscopy, flexible, transoral; with transendoscopic ultrasound-guided intramural or transmural fine needle aspiration/biopsy(s), (includes endoscopic ultrasound examination limited to the esophagus, stomach or duodenum, and adjacent structures)	1
43239	Esophagogastroduodenoscopy, flexible, transoral; with biopsy, single or multiple	1
43240	Esophagogastroduodenoscopy, flexible, transoral; with transmural drainage of pseudocyst (includes placement of transmural drainage catheter[s]/stent[s], when performed, and endoscopic ultrasound, when performed)	1
43241	Esophagogastroduodenoscopy, flexible, transoral; with insertion of intraluminal tube or catheter	1
43242	Esophagogastroduodenoscopy, flexible, transoral; with transendoscopic ultrasound-guided intramural or transmural fine needle aspiration/biopsy(s) (includes endoscopic ultrasound examination of the esophagus, stomach, and either the duodenum or a surgically altered stomach where the jejunum is examined distal to the anastomosis)	1
43243	Esophagogastroduodenoscopy, flexible, transoral; with injection sclerosis of esophageal/gastric varices	1
43244	Esophagogastroduodenoscopy, flexible, transoral; with band ligation of esophageal/gastric varices	1
43245	Esophagogastroduodenoscopy, flexible, transoral; with dilation of gastric/duodenal stricture(s) (eg, balloon, bougie)	1
43246	Esophagogastroduodenoscopy, flexible, transoral; with directed placement of percutaneous gastrostomy tube	1
43247	Esophagogastroduodenoscopy, flexible, transoral; with removal of foreign body(s)	1
43248	Esophagogastroduodenoscopy, flexible, transoral; with insertion of guide wire followed by passage of dilator(s) through esophagus over guide wire	1
43249	Esophagogastroduodenoscopy, flexible, transoral; with transendoscopic balloon dilation of esophagus (less than 30 mm diameter)	1
43250	Esophagogastroduodenoscopy, flexible, transoral; with removal of tumor(s), polyp(s), or other lesion(s) by hot biopsy forceps	1
43251	Esophagogastroduodenoscopy, flexible, transoral; with removal of tumor(s), polyp(s), or other lesion(s) by snare technique	1

43252	Esophagogastroduodenoscopy, flexible, transoral; with optical endomicroscopy	1
43253	Esophagogastroduodenoscopy, flexible, transoral; with transendoscopic ultrasound-guided transmural injection of diagnostic or therapeutic substance(s) (eg, anesthetic, neurolytic agent) or fiducial marker(s) (includes endoscopic ultrasound examination of the esophagus, stomach, and either the duodenum or a surgically altered stomach where the jejunum is examined distal to the anastomosis)	1
43254	Esophagogastroduodenoscopy, flexible, transoral; with endoscopic mucosal resection	1
43255	Esophagogastroduodenoscopy, flexible, transoral; with control of bleeding, any method	1
43257	Esophagogastroduodenoscopy, flexible, transoral; with delivery of thermal energy to the muscle of lower esophageal sphincter and/or gastric cardia, for treatment of gastroesophageal reflux disease	1
43259	Esophagogastroduodenoscopy, flexible, transoral; with endoscopic ultrasound examination, including the esophagus, stomach, and either the duodenum or a surgically altered stomach where the jejunum is examined distal to the anastomosis	1
43260	Endoscopic retrograde cholangiopancreatography (ERCP); diagnostic, including collection of specimen(s) by brushing or washing, when performed (separate procedure)	1
43261	Endoscopic retrograde cholangiopancreatography (ERCP); with biopsy, single or multiple	1
43262	Endoscopic retrograde cholangiopancreatography (ERCP); with sphincterotomy/papillotomy	1
43263	Endoscopic retrograde cholangiopancreatography (ERCP); with pressure measurement of sphincter of Oddi	1
43264	Endoscopic retrograde cholangiopancreatography (ERCP); with removal of calculi/debris from biliary/pancreatic duct(s)	1
43265	Endoscopic retrograde cholangiopancreatography (ERCP); with destruction of calculi, any method (eg, mechanical, electrohydraulic, lithotripsy)	1
43266	Esophagogastroduodenoscopy, flexible, transoral; with placement of endoscopic stent (includes pre- and post-dilation and guide wire passage, when performed)	1
43270	Esophagogastroduodenoscopy, flexible, transoral; with ablation of tumor(s), polyp(s), or other lesion(s) (includes pre- and post-dilation and guide wire passage, when performed)	1
43273	Endoscopic cannulation of papilla with direct visualization of pancreatic/common bile duct(s) (List separately in addition to code(s) for primary procedure)	1
43274	Endoscopic retrograde cholangiopancreatography (ERCP); with placement of endoscopic stent into biliary or pancreatic duct, including pre- and post-dilation and guide wire passage, when performed, including sphincterotomy, when performed, each stent	1
43275	Endoscopic retrograde cholangiopancreatography (ERCP); with removal of foreign body(s) or stent(s) from biliary/pancreatic duct(s)	1

43276	Endoscopic retrograde cholangiopancreatography (ERCP); with removal and exchange of stent(s), biliary or pancreatic duct, including pre- and post-dilation and guide wire passage, when performed, including sphincterotomy, when performed, each stent exchanged	1
43277	Endoscopic retrograde cholangiopancreatography (ERCP); with trans-endoscopic balloon dilation of biliary/pancreatic duct(s) or of ampulla (sphincteroplasty), including sphincterotomy, when performed, each duct	2
43278	Endoscopic retrograde cholangiopancreatography (ERCP); with ablation of tumor(s), polyp(s), or other lesion(s), including pre- and post-dilation and guide wire passage, when performed	1
43279	Laparoscopy, surgical, esophagomyotomy (Heller type), with fundoplasty, when performed	1
43280	Laparoscopy, surgical, esophagogastric fundoplasty (eg, Nissen, Toupet procedures)	1
43281	Laparoscopy, surgical, repair of paraesophageal hernia, includes fundoplasty, when performed; without implantation of mesh	1
43282	Laparoscopy, surgical, repair of paraesophageal hernia, includes fundoplasty, when performed; with implantation of mesh	1
43283	Laparoscopy, surgical, esophageal lengthening procedure (eg, Collis gastroplasty or wedge gastroplasty) (List separately in addition to code for primary procedure)	1
43284	Laparoscopy, surgical, esophageal sphincter augmentation procedure, placement of sphincter augmentation device (ie, magnetic band), including cruroplasty when performed	1
43285	Removal of esophageal sphincter augmentation device	1
43286	Esophagectomy, total or near total, with laparoscopic mobilization of the abdominal and mediastinal esophagus and proximal gastrectomy, with laparoscopic pyloric drainage procedure if performed, with open cervical pharyngogastrostomy or esophagogastrostomy (ie, laparoscopic transhiatal esophagectomy)	1
43287	Esophagectomy, distal two-thirds, with laparoscopic mobilization of the abdominal and lower mediastinal esophagus and proximal gastrectomy, with laparoscopic pyloric drainage procedure if performed, with separate thoracoscopic mobilization of the middle and upper mediastinal esophagus and thoracic esophagogastrostomy (ie, laparoscopic thoracoscopic esophagectomy, Ivor Lewis esophagectomy)	1
43288	Esophagectomy, total or near total, with thoracoscopic mobilization of the upper, middle, and lower mediastinal esophagus, with separate laparoscopic proximal gastrectomy, with laparoscopic pyloric drainage procedure if performed, with open cervical pharyngogastrostomy or esophagogastrostomy (ie, thoracoscopic, laparoscopic and cervical incision esophagectomy, McKeown esophagectomy, triincisional esophagectomy)	1
43289	Unlisted laparoscopy procedure, esophagus	1
43300	Esophagoplasty (plastic repair or reconstruction), cervical approach; without repair of tracheoesophageal fistula	1
43305	Esophagoplasty (plastic repair or reconstruction), cervical approach; with repair of tracheoesophageal fistula	1

43310	Esophagoplasty (plastic repair or reconstruction), thoracic approach; without repair of tracheoesophageal fistula	1
43312	Esophagoplasty (plastic repair or reconstruction), thoracic approach; with repair of tracheoesophageal fistula	1
43313	Esophagoplasty for congenital defect (plastic repair or reconstruction), thoracic approach; without repair of congenital tracheoesophageal fistula	1
43314	Esophagoplasty for congenital defect (plastic repair or reconstruction), thoracic approach; with repair of congenital tracheoesophageal fistula	1
43320	Esophagogastrostomy (cardioplasty), with or without vagotomy and pyloroplasty, transabdominal or transthoracic approach	1
43325	Esophagogastric fundoplasty, with fundic patch (Thal-Nissen procedure)	1
43327	Esophagogastric fundoplasty partial or complete; laparotomy	1
43328	Esophagogastric fundoplasty partial or complete; thoracotomy	1
43330	Esophagomyotomy (Heller type); abdominal approach	1
43331	Esophagomyotomy (Heller type); thoracic approach	1
43332	Repair, paraesophageal hiatal hernia (including fundoplication), via laparotomy, except neonatal; without implantation of mesh or other prosthesis	1
43333	Repair, paraesophageal hiatal hernia (including fundoplication), via laparotomy, except neonatal; with implantation of mesh or other prosthesis	1
43334	Repair, paraesophageal hiatal hernia (including fundoplication), via thoracotomy, except neonatal; without implantation of mesh or other prosthesis	1
43335	Repair, paraesophageal hiatal hernia (including fundoplication), via thoracotomy, except neonatal; with implantation of mesh or other prosthesis	1
43336	Repair, paraesophageal hiatal hernia, (including fundoplication), via thoracoabdominal incision, except neonatal; without implantation of mesh or other prosthesis	1
43337	Repair, paraesophageal hiatal hernia, (including fundoplication), via thoracoabdominal incision, except neonatal; with implantation of mesh or other prosthesis	1
43338	Esophageal lengthening procedure (eg, Collis gastroplasty or wedge gastroplasty) (List separately in addition to code for primary procedure)	1
43340	Esophagojejunostomy (without total gastrectomy); abdominal approach	1
43341	Esophagojejunostomy (without total gastrectomy); thoracic approach	1
43351	Esophagostomy, fistulization of esophagus, external; thoracic approach	1
43352	Esophagostomy, fistulization of esophagus, external; cervical approach	1
43360	Gastrointestinal reconstruction for previous esophagectomy, for obstructing esophageal lesion or fistula, or for previous esophageal exclusion; with stomach, with or without pyloroplasty	1
43361	Gastrointestinal reconstruction for previous esophagectomy, for obstructing esophageal lesion or fistula, or for previous esophageal exclusion; with colon	1

	interposition or small intestine reconstruction, including intestine mobilization, preparation, and anastomosis(es)	
43400	Ligation, direct, esophageal varices	1
43405	Ligation or stapling at gastroesophageal junction for pre-existing esophageal perforation	1
43410	Suture of esophageal wound or injury; cervical approach	1
43415	Suture of esophageal wound or injury; transthoracic or transabdominal approach	1
43420	Closure of esophagostomy or fistula; cervical approach	1
43425	Closure of esophagostomy or fistula; transthoracic or transabdominal approach	1
43450	Dilation of esophagus, by unguided sound or bougie, single or multiple passes	1
43453	Dilation of esophagus, over guide wire	1
43460	Esophagogastric tamponade, with balloon (Sengstaken type)	1
43496	Free jejunum transfer with microvascular anastomosis	1
43497	Lower esophageal myotomy, transoral (ie, peroral endoscopic myotomy [POEM])	1
43499	Unlisted procedure, esophagus	1
43500	Gastrotomy; with exploration or foreign body removal	1
43501	Gastrotomy; with suture repair of bleeding ulcer	1
43502	Gastrotomy; with suture repair of pre-existing esophagogastric laceration (eg, Mallory-Weiss)	1
43510	Gastrotomy; with esophageal dilation and insertion of permanent intraluminal tube (eg, Celestin or Mousseaux-Barbin)	1
43520	Pyloromyotomy, cutting of pyloric muscle (Fredet-Ramstedt type operation)	1
43605	Biopsy of stomach, by laparotomy	1
43610	Excision, local; ulcer or benign tumor of stomach	1
43611	Excision, local; malignant tumor of stomach	1
43620	Gastrectomy, total; with esophagoenterostomy	1
43621	Gastrectomy, total; with Roux-en-Y reconstruction	1
43622	Gastrectomy, total; with formation of intestinal pouch, any type	1
43631	Gastrectomy, partial, distal; with gastroduodenostomy	1
43632	Gastrectomy, partial, distal; with gastrojejunostomy	1
43633	Gastrectomy, partial, distal; with Roux-en-Y reconstruction	1
43634	Gastrectomy, partial, distal; with formation of intestinal pouch	1
43635	Vagotomy when performed with partial distal gastrectomy (List separately in addition to code[s] for primary procedure)	1
43640	Vagotomy including pyloroplasty, with or without gastrostomy; truncal or selective	1

43641	Vagotomy including pyloroplasty, with or without gastrostomy; parietal cell (highly selective)	1
43645	Laparoscopy, surgical, gastric restrictive procedure; with gastric bypass and small intestine reconstruction to limit absorption	1
43647	Laparoscopy, surgical; implantation or replacement of gastric neurostimulator electrodes, antrum	1
43648	Laparoscopy, surgical; revision or removal of gastric neurostimulator electrodes, antrum	1
43651	Laparoscopy, surgical; transection of vagus nerves, truncal	1
43652	Laparoscopy, surgical; transection of vagus nerves, selective or highly selective	1
43653	Laparoscopy, surgical; gastrostomy, without construction of gastric tube (eg, Stamm procedure) (separate procedure)	1
43659	Unlisted laparoscopy procedure, stomach	1
43752	Naso- or oro-gastric tube placement, requiring physician's skill and fluoroscopic guidance (includes fluoroscopy, image documentation and report)	2
43753	Gastric intubation and aspiration(s) therapeutic, necessitating physician's skill (eg, for gastrointestinal hemorrhage), including lavage if performed	1
43754	Gastric intubation and aspiration, diagnostic; single specimen (eg, acid analysis)	1
43755	Gastric intubation and aspiration, diagnostic; collection of multiple fractional specimens with gastric stimulation, single or double lumen tube (gastric secretory study) (eg, histamine, insulin, pentagastrin, calcium, secretin), includes drug administration	1
43756	Duodenal intubation and aspiration, diagnostic, includes image guidance; single specimen (eg, bile study for crystals or afferent loop culture)	1
43757	Duodenal intubation and aspiration, diagnostic, includes image guidance; collection of multiple fractional specimens with pancreatic or gallbladder stimulation, single or double lumen tube, includes drug administration	1
43761	Repositioning of a naso- or oro-gastric feeding tube, through the duodenum for enteric nutrition	1
43762	Replacement of gastrostomy tube, percutaneous, includes removal, when performed, without imaging or endoscopic guidance; not requiring revision of gastrostomy tract	1
43763	Replacement of gastrostomy tube, percutaneous, includes removal, when performed, without imaging or endoscopic guidance; requiring revision of gastrostomy tract	1
43775	Laparoscopy, surgical, gastric restrictive procedure; longitudinal gastrectomy (ie, sleeve gastrectomy)	1
43800	Pyloroplasty	1
43810	Gastroduodenostomy	1
43820	Gastrojejunostomy; without vagotomy	1
43825	Gastrojejunostomy; with vagotomy, any type	1

43830	Gastrostomy, open; without construction of gastric tube (eg, Stamm procedure) (separate procedure)	1
43831	Gastrostomy, open; neonatal, for feeding	1
43832	Gastrostomy, open; with construction of gastric tube (eg, Janeway procedure)	1
43840	Gastrorrhaphy, suture of perforated duodenal or gastric ulcer, wound, or injury	1
43842	Gastric restrictive procedure, without gastric bypass, for morbid obesity; vertical-banded gastroplasty	1
43843	Gastric restrictive procedure, without gastric bypass, for morbid obesity; other than vertical-banded gastroplasty	1
43845	Gastric restrictive procedure with partial gastrectomy, pylorus-preserving duodenoileostomy and ileoileostomy (50 to 100 cm common channel) to limit absorption (biliopancreatic diversion with duodenal switch)	1
43846	Gastric restrictive procedure, with gastric bypass for morbid obesity; with short limb (150 cm or less) Roux-en-Y gastroenterostomy	1
43847	Gastric restrictive procedure, with gastric bypass for morbid obesity; with small intestine reconstruction to limit absorption	1
43848	Revision, open, of gastric restrictive procedure for morbid obesity, other than adjustable gastric restrictive device (separate procedure)	1
43850	Revision of gastroduodenal anastomosis (gastroduodenostomy) with reconstruction; without vagotomy	1
43855	Revision of gastroduodenal anastomosis (gastroduodenostomy) with reconstruction; with vagotomy	1
43860	Revision of gastrojejunal anastomosis (gastrojejunostomy) with reconstruction, with or without partial gastrectomy or intestine resection; without vagotomy	1
43865	Revision of gastrojejunal anastomosis (gastrojejunostomy) with reconstruction, with or without partial gastrectomy or intestine resection; with vagotomy	1
43870	Closure of gastrostomy, surgical	1
43880	Closure of gastrocolic fistula	1
43881	Implantation or replacement of gastric neurostimulator electrodes, antrum, open	1
43882	Revision or removal of gastric neurostimulator electrodes, antrum, open	1
43886	Gastric restrictive procedure, open; revision of subcutaneous port component only	1
43887	Gastric restrictive procedure, open; removal of subcutaneous port component only	1
43888	Gastric restrictive procedure, open; removal and replacement of subcutaneous port component only	1
43999	Unlisted procedure, stomach	1
44005	Enterolysis (freeing of intestinal adhesion) (separate procedure)	1
44010	Duodenotomy, for exploration, biopsy(s), or foreign body removal	1
44015	Tube or needle catheter jejunostomy for enteral alimentation, intraoperative, any method (List separately in addition to primary procedure)	1

44020	Enterotomy, small intestine, other than duodenum; for exploration, biopsy(s), or foreign body removal	1
44021	Enterotomy, small intestine, other than duodenum; for decompression (eg, Baker tube)	1
44025	Colotomy, for exploration, biopsy(s), or foreign body removal	1
44050	Reduction of volvulus, intussusception, internal hernia, by laparotomy	1
44055	Correction of malrotation by lysis of duodenal bands and/or reduction of midgut volvulus (eg, Ladd procedure)	1
44100	Biopsy of intestine by capsule, tube, peroral (1 or more specimens)	1
44110	Excision of 1 or more lesions of small or large intestine not requiring anastomosis, exteriorization, or fistulization; single enterotomy	1
44111	Excision of 1 or more lesions of small or large intestine not requiring anastomosis, exteriorization, or fistulization; multiple enterotomies	1
44120	Enterectomy, resection of small intestine; single resection and anastomosis	1
44121	Enterectomy, resection of small intestine; each additional resection and anastomosis (List separately in addition to code for primary procedure)	1
44125	Enterectomy, resection of small intestine; with enterostomy	1
44126	Enterectomy, resection of small intestine for congenital atresia, single resection and anastomosis of proximal segment of intestine; without tapering	1
44127	Enterectomy, resection of small intestine for congenital atresia, single resection and anastomosis of proximal segment of intestine; with tapering	1
44128	Enterectomy, resection of small intestine for congenital atresia, single resection and anastomosis of proximal segment of intestine; each additional resection and anastomosis (List separately in addition to code for primary procedure)	1
44130	Enteroenterostomy, anastomosis of intestine, with or without cutaneous enterostomy (separate procedure)	1
44132	Donor enterectomy (including cold preservation), open; from cadaver donor	1
44133	Donor enterectomy (including cold preservation), open; partial, from living donor	1
44135	Intestinal allotransplantation; from cadaver donor	1
44136	Intestinal allotransplantation; from living donor	1
44137	Removal of transplanted intestinal allograft, complete	1
44139	Mobilization (take-down) of splenic flexure performed in conjunction with partial colectomy (List separately in addition to primary procedure)	1
44140	Colectomy, partial; with anastomosis	1
44141	Colectomy, partial; with skin level cecostomy or colostomy	1
44143	Colectomy, partial; with end colostomy and closure of distal segment (Hartmann type procedure)	1
44144	Colectomy, partial; with resection, with colostomy or ileostomy and creation of mucofistula	1

44145	Colectomy, partial; with coloproctostomy (low pelvic anastomosis)	1
44146	Colectomy, partial; with coloproctostomy (low pelvic anastomosis), with colostomy	1
44147	Colectomy, partial; abdominal and transanal approach	1
44150	Colectomy, total, abdominal, without proctectomy; with ileostomy or ileoproctostomy	1
44151	Colectomy, total, abdominal, without proctectomy; with continent ileostomy	1
44155	Colectomy, total, abdominal, with proctectomy; with ileostomy	1
44156	Colectomy, total, abdominal, with proctectomy; with continent ileostomy	1
44160	Colectomy, partial, with removal of terminal ileum with ileocolostomy	1
44180	Laparoscopy, surgical, enterolysis (freeing of intestinal adhesion) (separate procedure)	1
44186	Laparoscopy, surgical; jejunostomy (eg, for decompression or feeding)	1
44187	Laparoscopy, surgical; ileostomy or jejunostomy, non-tube	1
44188	Laparoscopy, surgical, colostomy or skin level cecostomy	1
44202	Laparoscopy, surgical; enterectomy, resection of small intestine, single resection and anastomosis	1
44203	Laparoscopy, surgical; each additional small intestine resection and anastomosis (List separately in addition to code for primary procedure)	1
44204	Laparoscopy, surgical; colectomy, partial, with anastomosis	1
44205	Laparoscopy, surgical; colectomy, partial, with removal of terminal ileum with ileocolostomy	1
44206	Laparoscopy, surgical; colectomy, partial, with end colostomy and closure of distal segment (Hartmann type procedure)	1
44207	Laparoscopy, surgical; colectomy, partial, with anastomosis, with coloproctostomy (low pelvic anastomosis)	1
44208	Laparoscopy, surgical; colectomy, partial, with anastomosis, with coloproctostomy (low pelvic anastomosis) with colostomy	1
44210	Laparoscopy, surgical; colectomy, total, abdominal, without proctectomy, with ileostomy or ileoproctostomy	1
44211	Laparoscopy, surgical; colectomy, total, abdominal, with proctectomy, with ileoanal anastomosis, creation of ileal reservoir (S or J), with loop ileostomy, includes rectal mucosectomy, when performed	1
44212	Laparoscopy, surgical; colectomy, total, abdominal, with proctectomy, with ileostomy	1
44213	Laparoscopy, surgical, mobilization (take-down) of splenic flexure performed in conjunction with partial colectomy (List separately in addition to primary procedure)	1
44227	Laparoscopy, surgical, closure of enterostomy, large or small intestine, with resection and anastomosis	1

44238	Unlisted laparoscopy procedure, intestine (except rectum)	1
44300	Placement, enterostomy or cecostomy, tube open (eg, for feeding or	1
	decompression) (separate procedure)	
44310	Ileostomy or jejunostomy, non-tube	1
44312	Revision of ileostomy; simple (release of superficial scar) (separate procedure)	1
44314	Revision of ileostomy; complicated (reconstruction in-depth) (separate procedure)	1
44316	Continent ileostomy (Kock procedure) (separate procedure)	1
44320	Colostomy or skin level cecostomy	1
44322	Colostomy or skin level cecostomy; with multiple biopsies (eg, for congenital megacolon) (separate procedure)	1
44340	Revision of colostomy; simple (release of superficial scar) (separate procedure)	1
44345	Revision of colostomy; complicated (reconstruction in-depth) (separate procedure)	1
44346	Revision of colostomy; with repair of paracolostomy hernia (separate procedure)	1
44360	Small intestinal endoscopy, enteroscopy beyond second portion of duodenum, not including ileum; diagnostic, including collection of specimen(s) by brushing or washing, when performed (separate procedure)	1
44361	Small intestinal endoscopy, enteroscopy beyond second portion of duodenum, not including ileum; with biopsy, single or multiple	1
44363	Small intestinal endoscopy, enteroscopy beyond second portion of duodenum, not including ileum; with removal of foreign body(s)	1
44364	Small intestinal endoscopy, enteroscopy beyond second portion of duodenum, not including ileum; with removal of tumor(s), polyp(s), or other lesion(s) by snare technique	1
44365	Small intestinal endoscopy, enteroscopy beyond second portion of duodenum, not including ileum; with removal of tumor(s), polyp(s), or other lesion(s) by hot biopsy forceps or bipolar cautery	1
44366	Small intestinal endoscopy, enteroscopy beyond second portion of duodenum, not including ileum; with control of bleeding (eg, injection, bipolar cautery, unipolar cautery, laser, heater probe, stapler, plasma coagulator)	1
44369	Small intestinal endoscopy, enteroscopy beyond second portion of duodenum, not including ileum; with ablation of tumor(s), polyp(s), or other lesion(s) not amenable to removal by hot biopsy forceps, bipolar cautery or snare technique	1
44370	Small intestinal endoscopy, enteroscopy beyond second portion of duodenum, not including ileum; with transendoscopic stent placement (includes predilation)	1
44372	Small intestinal endoscopy, enteroscopy beyond second portion of duodenum, not including ileum; with placement of percutaneous jejunostomy tube	1
44373	Small intestinal endoscopy, enteroscopy beyond second portion of duodenum, not including ileum; with conversion of percutaneous gastrostomy tube to percutaneous jejunostomy tube	1

44376	Small intestinal endoscopy, enteroscopy beyond second portion of duodenum, including ileum; diagnostic, with or without collection of specimen(s) by brushing or washing (separate procedure)	1
44377	Small intestinal endoscopy, enteroscopy beyond second portion of duodenum, including ileum; with biopsy, single or multiple	1
44378	Small intestinal endoscopy, enteroscopy beyond second portion of duodenum, including ileum; with control of bleeding (eg, injection, bipolar cautery, unipolar cautery, laser, heater probe, stapler, plasma coagulator)	1
44379	Small intestinal endoscopy, enteroscopy beyond second portion of duodenum, including ileum; with transendoscopic stent placement (includes predilation)	1
44380	Ileoscopy, through stoma; diagnostic, including collection of specimen(s) by brushing or washing, when performed (separate procedure)	1
44381	lleoscopy, through stoma; with transendoscopic balloon dilation	1
44382	lleoscopy, through stoma; with biopsy, single or multiple	1
44384	lleoscopy, through stoma; with placement of endoscopic stent (includes pre- and post-dilation and guide wire passage, when performed)	1
44385	Endoscopic evaluation of small intestinal pouch (eg, Kock pouch, ileal reservoir [S or J]); diagnostic, including collection of specimen(s) by brushing or washing, when performed (separate procedure)	1
44386	Endoscopic evaluation of small intestinal pouch (eg, Kock pouch, ileal reservoir [S or J]); with biopsy, single or multiple	1
44388	Colonoscopy through stoma; diagnostic, including collection of specimen(s) by brushing or washing, when performed (separate procedure)	1
44389	Colonoscopy through stoma; with biopsy, single or multiple	1
44390	Colonoscopy through stoma; with removal of foreign body(s)	1
44391	Colonoscopy through stoma; with control of bleeding, any method	1
44392	Colonoscopy through stoma; with removal of tumor(s), polyp(s), or other lesion(s) by hot biopsy forceps	1
44394	Colonoscopy through stoma; with removal of tumor(s), polyp(s), or other lesion(s) by snare technique	1
44401	Colonoscopy through stoma; with ablation of tumor(s), polyp(s), or other lesion(s) (includes pre-and post-dilation and guide wire passage, when performed)	1
44402	Colonoscopy through stoma; with endoscopic stent placement (including pre- and post-dilation and guide wire passage, when performed)	1
44403	Colonoscopy through stoma; with endoscopic mucosal resection	1
44404	Colonoscopy through stoma; with directed submucosal injection(s), any substance	1
44405	Colonoscopy through stoma; with transendoscopic balloon dilation	1
44406	Colonoscopy through stoma; with endoscopic ultrasound examination, limited to the sigmoid, descending, transverse, or ascending colon and cecum and adjacent structures	1

44407	Colonoscopy through stoma; with transendoscopic ultrasound guided intramural or transmural fine needle aspiration/biopsy(s), includes endoscopic ultrasound examination limited to the sigmoid, descending, transverse, or ascending colon and cecum and adjacent structures	1
44408	Colonoscopy through stoma; with decompression (for pathologic distention) (eg, volvulus, megacolon), including placement of decompression tube, when performed	1
44500	Introduction of long gastrointestinal tube (eg, Miller-Abbott) (separate procedure)	1
44602	Suture of small intestine (enterorrhaphy) for perforated ulcer, diverticulum, wound, injury or rupture; single perforation	1
44603	Suture of small intestine (enterorrhaphy) for perforated ulcer, diverticulum, wound, injury or rupture; multiple perforations	1
44604	Suture of large intestine (colorrhaphy) for perforated ulcer, diverticulum, wound, injury or rupture (single or multiple perforations); without colostomy	1
44605	Suture of large intestine (colorrhaphy) for perforated ulcer, diverticulum, wound, injury or rupture (single or multiple perforations); with colostomy	1
44615	Intestinal stricturoplasty (enterotomy and enterorrhaphy) with or without dilation, for intestinal obstruction	1
44620	Closure of enterostomy, large or small intestine	1
44625	Closure of enterostomy, large or small intestine; with resection and anastomosis other than colorectal	1
44626	Closure of enterostomy, large or small intestine; with resection and colorectal anastomosis (eg, closure of Hartmann type procedure)	1
44640	Closure of intestinal cutaneous fistula	1
44650	Closure of enteroenteric or enterocolic fistula	1
44660	Closure of enterovesical fistula; without intestinal or bladder resection	1
44661	Closure of enterovesical fistula; with intestine and/or bladder resection	1
44680	Intestinal plication (separate procedure)	1
44700	Exclusion of small intestine from pelvis by mesh or other prosthesis, or native tissue (eg, bladder or omentum)	1
44701	Intraoperative colonic lavage (List separately in addition to code for primary procedure)	1
44705	Preparation of fecal microbiota for instillation, including assessment of donor specimen	1
44715	Backbench standard preparation of cadaver or living donor intestine allograft prior to transplantation, including mobilization and fashioning of the superior mesenteric artery and vein	1
44720	Backbench reconstruction of cadaver or living donor intestine allograft prior to transplantation; venous anastomosis, each	2
44721	Backbench reconstruction of cadaver or living donor intestine allograft prior to transplantation; arterial anastomosis, each	2

44799	Unlisted procedure, small intestine	1
44800	Excision of Meckel's diverticulum (diverticulectomy) or omphalomesenteric duct	1
44820	Excision of lesion of mesentery (separate procedure)	1
44850	Suture of mesentery (separate procedure)	1
44899	Unlisted procedure, Meckel's diverticulum and the mesentery	1
44900	Incision and drainage of appendiceal abscess, open	1
44950	Appendectomy	1
44955	Appendectomy; when done for indicated purpose at time of other major procedure (not as separate procedure) (List separately in addition to code for primary procedure)	1
44960	Appendectomy; for ruptured appendix with abscess or generalized peritonitis	1
44970	Laparoscopy, surgical, appendectomy	1
44979	Unlisted laparoscopy procedure, appendix	1
45000	Transrectal drainage of pelvic abscess	1
45005	Incision and drainage of submucosal abscess, rectum	1
45020	Incision and drainage of deep supralevator, pelvirectal, or retrorectal abscess	1
45100	Biopsy of anorectal wall, anal approach (eg, congenital megacolon)	1
45108	Anorectal myomectomy	1
45110	Proctectomy; complete, combined abdominoperineal, with colostomy	1
45111	Proctectomy; partial resection of rectum, transabdominal approach	1
45112	Proctectomy, combined abdominoperineal, pull-through procedure (eg, colo-anal anastomosis)	1
45113	Proctectomy, partial, with rectal mucosectomy, ileoanal anastomosis, creation of ileal reservoir (S or J), with or without loop ileostomy	1
45114	Proctectomy, partial, with anastomosis; abdominal and transsacral approach	1
45116	Proctectomy, partial, with anastomosis; transsacral approach only (Kraske type)	1
45119	Proctectomy, combined abdominoperineal pull-through procedure (eg, colo-anal anastomosis), with creation of colonic reservoir (eg, J-pouch), with diverting enterostomy when performed	1
45120	Proctectomy, complete (for congenital megacolon), abdominal and perineal approach; with pull-through procedure and anastomosis (eg, Swenson, Duhamel, or Soave type operation)	1
45121	Proctectomy, complete (for congenital megacolon), abdominal and perineal approach; with subtotal or total colectomy, with multiple biopsies	1
45123	Proctectomy, partial, without anastomosis, perineal approach	1
45126	Pelvic exenteration for colorectal malignancy, with proctectomy (with or without colostomy), with removal of bladder and ureteral transplantations, and/or	1

	hysterectomy, or cervicectomy, with or without removal of tube(s), with or without removal of ovary(s), or any combination thereof	
45130	Excision of rectal procidentia, with anastomosis; perineal approach	1
45135	Excision of rectal procidentia, with anastomosis; abdominal and perineal approach	1
45136	Excision of ileoanal reservoir with ileostomy	1
45150	Division of stricture of rectum	1
45160	Excision of rectal tumor by proctotomy, transsacral or transcoccygeal approach	1
45171	Excision of rectal tumor, transanal approach; not including muscularis propria (ie, partial thickness)	1
45172	Excision of rectal tumor, transanal approach; including muscularis propria (ie, full thickness)	1
45190	Destruction of rectal tumor (eg, electrodesiccation, electrosurgery, laser ablation, laser resection, cryosurgery) transanal approach	1
45300	Proctosigmoidoscopy, rigid; diagnostic, with or without collection of specimen(s) by brushing or washing (separate procedure)	1
45303	Proctosigmoidoscopy, rigid; with dilation (eg, balloon, guide wire, bougie)	1
45305	Proctosigmoidoscopy, rigid; with biopsy, single or multiple	1
45307	Proctosigmoidoscopy, rigid; with removal of foreign body	1
45308	Proctosigmoidoscopy, rigid; with removal of single tumor, polyp, or other lesion by hot biopsy forceps or bipolar cautery	1
45309	Proctosigmoidoscopy, rigid; with removal of single tumor, polyp, or other lesion by snare technique	1
45315	Proctosigmoidoscopy, rigid; with removal of multiple tumors, polyps, or other lesions by hot biopsy forceps, bipolar cautery or snare technique	1
45317	Proctosigmoidoscopy, rigid; with control of bleeding (eg, injection, bipolar cautery, unipolar cautery, laser, heater probe, stapler, plasma coagulator)	1
45320	Proctosigmoidoscopy, rigid; with ablation of tumor(s), polyp(s), or other lesion(s) not amenable to removal by hot biopsy forceps, bipolar cautery or snare technique (eg, laser)	1
45321	Proctosigmoidoscopy, rigid; with decompression of volvulus	1
45327	Proctosigmoidoscopy, rigid; with transendoscopic stent placement (includes predilation)	1
45330	Sigmoidoscopy, flexible; diagnostic, including collection of specimen(s) by brushing or washing, when performed (separate procedure)	1
45331	Sigmoidoscopy, flexible; with biopsy, single or multiple	1
45332	Sigmoidoscopy, flexible; with removal of foreign body(s)	1
45333	Sigmoidoscopy, flexible; with removal of tumor(s), polyp(s), or other lesion(s) by hot biopsy forceps	1

45334	Sigmoidoscopy, flexible; with control of bleeding, any method	1
45335	Sigmoidoscopy, flexible; with directed submucosal injection(s), any substance	1
45337	Sigmoidoscopy, flexible; with decompression (for pathologic distention) (eg, volvulus, megacolon), including placement of decompression tube, when performed	1
45338	Sigmoidoscopy, flexible; with removal of tumor(s), polyp(s), or other lesion(s) by snare technique	1
45340	Sigmoidoscopy, flexible; with transendoscopic balloon dilation	1
45341	Sigmoidoscopy, flexible; with endoscopic ultrasound examination	1
45342	Sigmoidoscopy, flexible; with transendoscopic ultrasound guided intramural or transmural fine needle aspiration/biopsy(s)	1
45346	Sigmoidoscopy, flexible; with ablation of tumor(s), polyp(s), or other lesion(s) (includes pre- and post-dilation and guide wire passage, when performed)	1
45347	Sigmoidoscopy, flexible; with placement of endoscopic stent (includes pre- and post-dilation and guide wire passage, when performed)	1
45349	Sigmoidoscopy, flexible; with endoscopic mucosal resection	1
45350	Sigmoidoscopy, flexible; with band ligation(s) (eg, hemorrhoids)	1
45378	Colonoscopy, flexible; diagnostic, including collection of specimen(s) by brushing or washing, when performed (separate procedure)	1
45379	Colonoscopy, flexible; with removal of foreign body(s)	1
45380	Colonoscopy, flexible; with biopsy, single or multiple	1
45381	Colonoscopy, flexible; with directed submucosal injection(s), any substance	1
45382	Colonoscopy, flexible; with control of bleeding, any method	1
45384	Colonoscopy, flexible; with removal of tumor(s), polyp(s), or other lesion(s) by hot biopsy forceps	1
45385	Colonoscopy, flexible; with removal of tumor(s), polyp(s), or other lesion(s) by snare technique	1
45386	Colonoscopy, flexible; with transendoscopic balloon dilation	1
45388	Colonoscopy, flexible; with ablation of tumor(s), polyp(s), or other lesion(s) (includes pre- and post-dilation and guide wire passage, when performed)	1
45389	Colonoscopy, flexible; with endoscopic stent placement (includes pre- and post-dilation and guide wire passage, when performed)	1
45390	Colonoscopy, flexible; with endoscopic mucosal resection	1
45391	Colonoscopy, flexible; with endoscopic ultrasound examination limited to the rectum, sigmoid, descending, transverse, or ascending colon and cecum, and adjacent structures	1
45392	Colonoscopy, flexible; with transendoscopic ultrasound guided intramural or transmural fine needle aspiration/biopsy(s), includes endoscopic ultrasound examination limited to the rectum, sigmoid, descending, transverse, or ascending colon and cecum, and adjacent structures	1

45393	Colonoscopy, flexible; with decompression (for pathologic distention) (eg, volvulus, megacolon), including placement of decompression tube, when performed	1
45395	Laparoscopy, surgical; proctectomy, complete, combined abdominoperineal, with colostomy	1
45397	Laparoscopy, surgical; proctectomy, combined abdominoperineal pull-through procedure (eg, colo-anal anastomosis), with creation of colonic reservoir (eg, Jpouch), with diverting enterostomy, when performed	1
45398	Colonoscopy, flexible; with band ligation(s) (eg, hemorrhoids)	1
45399	Unlisted procedure, colon	1
45400	Laparoscopy, surgical; proctopexy (for prolapse)	1
45402	Laparoscopy, surgical; proctopexy (for prolapse), with sigmoid resection	1
45499	Unlisted laparoscopy procedure, rectum	1
45500	Proctoplasty; for stenosis	1
45505	Proctoplasty; for prolapse of mucous membrane	1
45520	Perirectal injection of sclerosing solution for prolapse	1
45540	Proctopexy (eg, for prolapse); abdominal approach	1
45541	Proctopexy (eg, for prolapse); perineal approach	1
45550	Proctopexy (eg, for prolapse); with sigmoid resection, abdominal approach	1
45560	Repair of rectocele (separate procedure)	1
45562	Exploration, repair, and presacral drainage for rectal injury	1
45563	Exploration, repair, and presacral drainage for rectal injury; with colostomy	1
45800	Closure of rectovesical fistula	1
45805	Closure of rectovesical fistula; with colostomy	1
45820	Closure of rectourethral fistula	1
45825	Closure of rectourethral fistula; with colostomy	1
45900	Reduction of procidentia (separate procedure) under anesthesia	1
45905	Dilation of anal sphincter (separate procedure) under anesthesia other than local	1
45910	Dilation of rectal stricture (separate procedure) under anesthesia other than local	1
45915	Removal of fecal impaction or foreign body (separate procedure) under anesthesia	1
45990	Anorectal exam, surgical, requiring anesthesia (general, spinal, or epidural), diagnostic	1
45999	Unlisted procedure, rectum	1
46020	Placement of seton	1
46030	Removal of anal seton, other marker	1
46040	Incision and drainage of ischiorectal and/or perirectal abscess (separate procedure)	1

46045	Incision and drainage of intramural, intramuscular, or submucosal abscess, transanal, under anesthesia	1
46050	Incision and drainage, perianal abscess, superficial	1
46060	Incision and drainage of ischiorectal or intramural abscess, with fistulectomy or fistulotomy, submuscular, with or without placement of seton	1
46070	Incision, anal septum (infant)	1
46080	Sphincterotomy, anal, division of sphincter (separate procedure)	1
46083	Incision of thrombosed hemorrhoid, external	1
46200	Fissurectomy, including sphincterotomy, when performed	1
46220	Excision of single external papilla or tag, anus	1
46221	Hemorrhoidectomy, internal, by rubber band ligation(s)	1
46230	Excision of multiple external papillae or tags, anus	1
46250	Hemorrhoidectomy, external, 2 or more columns/groups	1
46255	Hemorrhoidectomy, internal and external, single column/group	1
46257	Hemorrhoidectomy, internal and external, single column/group; with fissurectomy	1
46258	Hemorrhoidectomy, internal and external, single column/group; with fistulectomy, including fissurectomy, when performed	1
46260	Hemorrhoidectomy, internal and external, 2 or more columns/groups	1
46261	Hemorrhoidectomy, internal and external, 2 or more columns/groups; with fissurectomy	1
46262	Hemorrhoidectomy, internal and external, 2 or more columns/groups; with fistulectomy, including fissurectomy, when performed	1
46270	Surgical treatment of anal fistula (fistulectomy/fistulotomy); subcutaneous	1
46275	Surgical treatment of anal fistula (fistulectomy/fistulotomy); intersphincteric	1
46280	Surgical treatment of anal fistula (fistulectomy/fistulotomy); transsphincteric, suprasphincteric, extrasphincteric or multiple, including placement of seton, when performed	1
46285	Surgical treatment of anal fistula (fistulectomy/fistulotomy); second stage	1
46288	Closure of anal fistula with rectal advancement flap	1
46320	Excision of thrombosed hemorrhoid, external	1
46500	Injection of sclerosing solution, hemorrhoids	1
46505	Chemodenervation of internal anal sphincter	2
46600	Anoscopy; diagnostic, including collection of specimen(s) by brushing or washing, when performed (separate procedure)	1
46601	Anoscopy; diagnostic, with high-resolution magnification (HRA) (eg, colposcope, operating microscope) and chemical agent enhancement, including collection of specimen(s) by brushing or washing, when performed	1
46604	Anoscopy; with dilation (eg, balloon, guide wire, bougie)	1

46606	Anoscopy; with biopsy, single or multiple	1
46607	Anoscopy; with high-resolution magnification (HRA) (eg, colposcope, operating microscope) and chemical agent enhancement, with biopsy, single or multiple	1
46608	Anoscopy; with removal of foreign body	1
46610	Anoscopy; with removal of single tumor, polyp, or other lesion by hot biopsy forceps or bipolar cautery	1
46611	Anoscopy; with removal of single tumor, polyp, or other lesion by snare technique	1
46612	Anoscopy; with removal of multiple tumors, polyps, or other lesions by hot biopsy forceps, bipolar cautery or snare technique	1
46614	Anoscopy; with control of bleeding (eg, injection, bipolar cautery, unipolar cautery, laser, heater probe, stapler, plasma coagulator)	1
46615	Anoscopy; with ablation of tumor(s), polyp(s), or other lesion(s) not amenable to removal by hot biopsy forceps, bipolar cautery or snare technique	1
46700	Anoplasty, plastic operation for stricture; adult	1
46705	Anoplasty, plastic operation for stricture; infant	1
46706	Repair of anal fistula with fibrin glue	1
46707	Repair of anorectal fistula with plug (eg, porcine small intestine submucosa [SIS])	1
46710	Repair of ileoanal pouch fistula/sinus (eg, perineal or vaginal), pouch advancement; transperineal approach	1
46712	Repair of ileoanal pouch fistula/sinus (eg, perineal or vaginal), pouch advancement; combined transperineal and transabdominal approach	1
46715	Repair of low imperforate anus; with anoperineal fistula (cut-back procedure)	1
46716	Repair of low imperforate anus; with transposition of anoperineal or anovestibular fistula	1
46730	Repair of high imperforate anus without fistula; perineal or sacroperineal approach	1
46735	Repair of high imperforate anus without fistula; combined transabdominal and sacroperineal approaches	1
46740	Repair of high imperforate anus with rectourethral or rectovaginal fistula; perineal or sacroperineal approach	1
46742	Repair of high imperforate anus with rectourethral or rectovaginal fistula; combined transabdominal and sacroperineal approaches	1
46744	Repair of cloacal anomaly by anorectovaginoplasty and urethroplasty, sacroperineal approach	1
46746	Repair of cloacal anomaly by anorectovaginoplasty and urethroplasty, combined abdominal and sacroperineal approach	1
46748	Repair of cloacal anomaly by anorectovaginoplasty and urethroplasty, combined abdominal and sacroperineal approach; with vaginal lengthening by intestinal graft or pedicle flaps	1
46750	Sphincteroplasty, anal, for incontinence or prolapse; adult	1

46751	Sphincteroplasty, anal, for incontinence or prolapse; child	1
46753	Graft (Thiersch operation) for rectal incontinence and/or prolapse	1
46754	Removal of Thiersch wire or suture, anal canal	1
46760	Sphincteroplasty, anal, for incontinence, adult; muscle transplant	1
46761	Sphincteroplasty, anal, for incontinence, adult; levator muscle imbrication (Park posterior anal repair)	1
46900	Destruction of lesion(s), anus (eg, condyloma, papilloma, molluscum contagiosum, herpetic vesicle), simple; chemical	1
46910	Destruction of lesion(s), anus (eg, condyloma, papilloma, molluscum contagiosum, herpetic vesicle), simple; electrodesiccation	1
46916	Destruction of lesion(s), anus (eg, condyloma, papilloma, molluscum contagiosum, herpetic vesicle), simple; cryosurgery	1
46917	Destruction of lesion(s), anus (eg, condyloma, papilloma, molluscum contagiosum, herpetic vesicle), simple; laser surgery	1
46922	Destruction of lesion(s), anus (eg, condyloma, papilloma, molluscum contagiosum, herpetic vesicle), simple; surgical excision	1
46924	Destruction of lesion(s), anus (eg, condyloma, papilloma, molluscum contagiosum, herpetic vesicle), extensive (eg, laser surgery, electrosurgery, cryosurgery, chemosurgery)	1
46930	Destruction of internal hemorrhoid(s) by thermal energy (eg, infrared coagulation, cautery, radiofrequency)	1
46940	Curettage or cautery of anal fissure, including dilation of anal sphincter (separate procedure); initial	1
46942	Curettage or cautery of anal fissure, including dilation of anal sphincter (separate procedure); subsequent	1
46945	Hemorrhoidectomy, internal, by ligation other than rubber band; single hemorrhoid column/group, without imaging guidance	1
46946	Hemorrhoidectomy, internal, by ligation other than rubber band; 2 or more hemorrhoid columns/groups, without imaging guidance	1
46947	Hemorrhoidopexy (eg, for prolapsing internal hemorrhoids) by stapling	1
46948	Hemorrhoidectomy, internal, by transanal hemorrhoidal dearterialization, 2 or more hemorrhoid columns/groups, including ultrasound guidance, with mucopexy, when performed	1
46999	Unlisted procedure, anus	1
47000	Biopsy of liver, needle; percutaneous	1
47001	Biopsy of liver, needle; when done for indicated purpose at time of other major procedure (List separately in addition to code for primary procedure)	1
47010	Hepatotomy, for open drainage of abscess or cyst, 1 or 2 stages	1
47015	Laparotomy, with aspiration and/or injection of hepatic parasitic (eg, amoebic or echinococcal) cyst(s) or abscess(es)	1

47100	Biopsy of liver, wedge	1
47120	Hepatectomy, resection of liver; partial lobectomy	1
47122	Hepatectomy, resection of liver; trisegmentectomy	1
47125	Hepatectomy, resection of liver; total left lobectomy	1
47130	Hepatectomy, resection of liver; total right lobectomy	1
47133	Donor hepatectomy (including cold preservation), from cadaver donor	1
47135	Liver allotransplantation, orthotopic, partial or whole, from cadaver or living donor, any age	1
47140	Donor hepatectomy (including cold preservation), from living donor; left lateral segment only (segments II and III)	1
47141	Donor hepatectomy (including cold preservation), from living donor; total left lobectomy (segments II, III and IV)	1
47142	Donor hepatectomy (including cold preservation), from living donor; total right lobectomy (segments V, VI, VII and VIII)	1
47143	Backbench standard preparation of cadaver donor whole liver graft prior to allotransplantation, including cholecystectomy, if necessary, and dissection and removal of surrounding soft tissues to prepare the vena cava, portal vein, hepatic artery, and common bile duct for implantation; without trisegment or lobe split	1
47144	Backbench standard preparation of cadaver donor whole liver graft prior to allotransplantation, including cholecystectomy, if necessary, and dissection and removal of surrounding soft tissues to prepare the vena cava, portal vein, hepatic artery, and common bile duct for implantation; with trisegment split of whole liver graft into 2 partial liver grafts (ie, left lateral segment [segments II and III] and right trisegment [segments I and IV through VIII])	1
47145	Backbench standard preparation of cadaver donor whole liver graft prior to allotransplantation, including cholecystectomy, if necessary, and dissection and removal of surrounding soft tissues to prepare the vena cava, portal vein, hepatic artery, and common bile duct for implantation; with lobe split of whole liver graft into 2 partial liver grafts (ie, left lobe [segments II, III, and IV] and right lobe [segments I and V through VIII])	1
47146	Backbench reconstruction of cadaver or living donor liver graft prior to allotransplantation; venous anastomosis, each	2
47147	Backbench reconstruction of cadaver or living donor liver graft prior to allotransplantation; arterial anastomosis, each	1
47300	Marsupialization of cyst or abscess of liver	1
47350	Management of liver hemorrhage; simple suture of liver wound or injury	1
47360	Management of liver hemorrhage; complex suture of liver wound or injury, with or without hepatic artery ligation	1
47361	Management of liver hemorrhage; exploration of hepatic wound, extensive debridement, coagulation and/or suture, with or without packing of liver	1
47362	Management of liver hemorrhage; re-exploration of hepatic wound for removal of packing	1

47370	Laparoscopy, surgical, ablation of 1 or more liver tumor(s); radiofrequency	1
47371	Laparoscopy, surgical, ablation of 1 or more liver tumor(s); cryosurgical	1
47379	Unlisted laparoscopic procedure, liver	1
47380	Ablation, open, of 1 or more liver tumor(s); radiofrequency	1
47381	Ablation, open, of 1 or more liver tumor(s); cryosurgical	1
47382	Ablation, 1 or more liver tumor(s), percutaneous, radiofrequency	1
47383	Ablation, 1 or more liver tumor(s), percutaneous, cryoablation	1
47399	Unlisted procedure, liver	1
47400	Hepaticotomy or hepaticostomy with exploration, drainage, or removal of calculus	1
47420	Choledochotomy or choledochostomy with exploration, drainage, or removal of calculus, with or without cholecystotomy; without transduodenal sphincterotomy or sphincteroplasty	1
47425	Choledochotomy or choledochostomy with exploration, drainage, or removal of calculus, with or without cholecystotomy; with transduodenal sphincterotomy or sphincteroplasty	1
47460	Transduodenal sphincterotomy or sphincteroplasty, with or without transduodenal extraction of calculus (separate procedure)	1
47480	Cholecystotomy or cholecystostomy, open, with exploration, drainage, or removal of calculus (separate procedure)	1
47490	Cholecystostomy, percutaneous, complete procedure, including imaging guidance, catheter placement, cholecystogram when performed, and radiological supervision and interpretation	1
47531	Injection procedure for cholangiography, percutaneous, complete diagnostic procedure including imaging guidance (eg, ultrasound and/or fluoroscopy) and all associated radiological supervision and interpretation; existing access	1
47532	Injection procedure for cholangiography, percutaneous, complete diagnostic procedure including imaging guidance (eg, ultrasound and/or fluoroscopy) and all associated radiological supervision and interpretation; new access (eg, percutaneous transhepatic cholangiogram)	1
47533	Placement of biliary drainage catheter, percutaneous, including diagnostic cholangiography when performed, imaging guidance (eg, ultrasound and/or fluoroscopy), and all associated radiological supervision and interpretation; external	1
47534	Placement of biliary drainage catheter, percutaneous, including diagnostic cholangiography when performed, imaging guidance (eg, ultrasound and/or fluoroscopy), and all associated radiological supervision and interpretation; internal-external	1
47535	Conversion of external biliary drainage catheter to internal-external biliary drainage catheter, percutaneous, including diagnostic cholangiography when performed, imaging guidance (eg, fluoroscopy), and all associated radiological supervision and interpretation	1

47536	Exchange of biliary drainage catheter (eg, external, internal-external, or conversion of internal-external to external only), percutaneous, including diagnostic cholangiography when performed, imaging guidance (eg, fluoroscopy), and all associated radiological supervision and interpretation	1
47537	Removal of biliary drainage catheter, percutaneous, requiring fluoroscopic guidance (eg, with concurrent indwelling biliary stents), including diagnostic cholangiography when performed, imaging guidance (eg, fluoroscopy), and all associated radiological supervision and interpretation	1
47538	Placement of stent(s) into a bile duct, percutaneous, including diagnostic cholangiography, imaging guidance (eg, fluoroscopy and/or ultrasound), balloon dilation, catheter exchange(s) and catheter removal(s) when performed, and all associated radiological supervision and interpretation; existing access	1
47539	Placement of stent(s) into a bile duct, percutaneous, including diagnostic cholangiography, imaging guidance (eg, fluoroscopy and/or ultrasound), balloon dilation, catheter exchange(s) and catheter removal(s) when performed, and all associated radiological supervision and interpretation; new access, without placement of separate biliary drainage catheter	1
47540	Placement of stent(s) into a bile duct, percutaneous, including diagnostic cholangiography, imaging guidance (eg, fluoroscopy and/or ultrasound), balloon dilation, catheter exchange(s) and catheter removal(s) when performed, and all associated radiological supervision and interpretation; new access, with placement of separate biliary drainage catheter (eg, external or internal-external)	1
47541	Placement of access through the biliary tree and into small bowel to assist with an endoscopic biliary procedure (eg, rendezvous procedure), percutaneous, including diagnostic cholangiography when performed, imaging guidance (eg, ultrasound and/or fluoroscopy), and all associated radiological supervision and interpretation, new access	1
47542	Balloon dilation of biliary duct(s) or of ampulla (sphincteroplasty), percutaneous, including imaging guidance (eg, fluoroscopy), and all associated radiological supervision and interpretation, each duct (List separately in addition to code for primary procedure)	1
47543	Endoluminal biopsy(ies) of biliary tree, percutaneous, any method(s) (eg, brush, forceps, and/or needle), including imaging guidance (eg, fluoroscopy), and all associated radiological supervision and interpretation, single or multiple (List separately in addition to code for primary procedure)	1
47544	Removal of calculi/debris from biliary duct(s) and/or gallbladder, percutaneous, including destruction of calculi by any method (eg, mechanical, electrohydraulic, lithotripsy) when performed, imaging guidance (eg, fluoroscopy), and all associated radiological supervision and interpretation (List separately in addition to code for primary procedure)	1
47550	Biliary endoscopy, intraoperative (choledochoscopy) (List separately in addition to code for primary procedure)	1
47552	Biliary endoscopy, percutaneous via T-tube or other tract; diagnostic, with collection of specimen(s) by brushing and/or washing, when performed (separate procedure)	1

47553	Biliary endoscopy, percutaneous via T-tube or other tract; with biopsy, single or multiple	1
47554	Biliary endoscopy, percutaneous via T-tube or other tract; with removal of calculus/calculi	1
47555	Biliary endoscopy, percutaneous via T-tube or other tract; with dilation of biliary duct stricture(s) without stent	1
47556	Biliary endoscopy, percutaneous via T-tube or other tract; with dilation of biliary duct stricture(s) with stent	1
47562	Laparoscopy, surgical; cholecystectomy	1
47563	Laparoscopy, surgical; cholecystectomy with cholangiography	1
47564	Laparoscopy, surgical; cholecystectomy with exploration of common duct	1
47570	Laparoscopy, surgical; cholecystoenterostomy	1
47579	Unlisted laparoscopy procedure, biliary tract	1
47600	Cholecystectomy	1
47605	Cholecystectomy; with cholangiography	1
47610	Cholecystectomy with exploration of common duct	1
47612	Cholecystectomy with exploration of common duct; with choledochoenterostomy	1
47620	Cholecystectomy with exploration of common duct; with transduodenal sphincterotomy or sphincteroplasty, with or without cholangiography	1
47700	Exploration for congenital atresia of bile ducts, without repair, with or without liver biopsy, with or without cholangiography	1
47701	Portoenterostomy (eg, Kasai procedure)	1
47711	Excision of bile duct tumor, with or without primary repair of bile duct; extrahepatic	1
47712	Excision of bile duct tumor, with or without primary repair of bile duct; intrahepatic	1
47715	Excision of choledochal cyst	1
47720	Cholecystoenterostomy; direct	1
47721	Cholecystoenterostomy; with gastroenterostomy	1
47740	Cholecystoenterostomy; Roux-en-Y	1
47741	Cholecystoenterostomy; Roux-en-Y with gastroenterostomy	1
47760	Anastomosis, of extrahepatic biliary ducts and gastrointestinal tract	1
47765	Anastomosis, of intrahepatic ducts and gastrointestinal tract	1
47780	Anastomosis, Roux-en-Y, of extrahepatic biliary ducts and gastrointestinal tract	1
47785	Anastomosis, Roux-en-Y, of intrahepatic biliary ducts and gastrointestinal tract	1
47800	Reconstruction, plastic, of extrahepatic biliary ducts with end-to-end anastomosis	1
47801	Placement of choledochal stent	1
47802	U-tube hepaticoenterostomy	1
7/004	o-tube hepaticoenterostomy	1

47900	Suture of extrahepatic biliary duct for pre-existing injury (separate procedure)	1
47999	Unlisted procedure, biliary tract	1
48000	Placement of drains, peripancreatic, for acute pancreatitis	1
48001	Placement of drains, peripancreatic, for acute pancreatitis; with cholecystostomy, gastrostomy, and jejunostomy	1
48020	Removal of pancreatic calculus	1
48100	Biopsy of pancreas, open (eg, fine needle aspiration, needle core biopsy, wedge biopsy)	1
48102	Biopsy of pancreas, percutaneous needle	1
48120	Excision of lesion of pancreas (eg, cyst, adenoma)	1
48140	Pancreatectomy, distal subtotal, with or without splenectomy; without pancreaticojejunostomy	1
48145	Pancreatectomy, distal subtotal, with or without splenectomy; with pancreaticojejunostomy	1
48146	Pancreatectomy, distal, near-total with preservation of duodenum (Child-type procedure)	1
48148	Excision of ampulla of Vater	1
48150	Pancreatectomy, proximal subtotal with total duodenectomy, partial gastrectomy, choledochoenterostomy and gastrojejunostomy (Whipple-type procedure); with pancreatojejunostomy	1
48152	Pancreatectomy, proximal subtotal with total duodenectomy, partial gastrectomy, choledochoenterostomy and gastrojejunostomy (Whipple-type procedure); without pancreatojejunostomy	1
48153	Pancreatectomy, proximal subtotal with near-total duodenectomy, choledochoenterostomy and duodenojejunostomy (pylorus-sparing, Whipple-type procedure); with pancreatojejunostomy	1
48154	Pancreatectomy, proximal subtotal with near-total duodenectomy, choledochoenterostomy and duodenojejunostomy (pylorus-sparing, Whipple-type procedure); without pancreatojejunostomy	1
48155	Pancreatectomy, total	1
48160	Pancreatectomy, total or subtotal, with autologous transplantation of pancreas or pancreatic islet cells	1
48400	Injection procedure for intraoperative pancreatography (List separately in addition to code for primary procedure)	1
48500	Marsupialization of pancreatic cyst	1
48510	External drainage, pseudocyst of pancreas, open	1
48520	Internal anastomosis of pancreatic cyst to gastrointestinal tract; direct	1
48540	Internal anastomosis of pancreatic cyst to gastrointestinal tract; Roux-en-Y	1
48545	Pancreatorrhaphy for injury	1

48547	Duodenal exclusion with gastrojejunostomy for pancreatic injury	1
48550	Donor pancreatectomy (including cold preservation), with or without duodenal segment for transplantation	1
48551	Backbench standard preparation of cadaver donor pancreas allograft prior to transplantation, including dissection of allograft from surrounding soft tissues, splenectomy, duodenotomy, ligation of bile duct, ligation of mesenteric vessels, and Y-graft arterial anastomoses from iliac artery to superior mesenteric artery and to splenic artery	1
48552	Backbench reconstruction of cadaver donor pancreas allograft prior to transplantation, venous anastomosis, each	2
48554	Transplantation of pancreatic allograft	1
48556	Removal of transplanted pancreatic allograft	1
48999	Unlisted procedure, pancreas	1
49000	Exploratory laparotomy, exploratory celiotomy with or without biopsy(s) (separate procedure)	1
49002	Reopening of recent laparotomy	1
49010	Exploration, retroperitoneal area with or without biopsy(s) (separate procedure)	1
49013	Preperitoneal pelvic packing for hemorrhage associated with pelvic trauma, including local exploration	1
49014	Re-exploration of pelvic wound with removal of preperitoneal pelvic packing, including repacking, when performed	1
49020	Drainage of peritoneal abscess or localized peritonitis, exclusive of appendiceal abscess, open	1
49040	Drainage of subdiaphragmatic or subphrenic abscess, open	1
49060	Drainage of retroperitoneal abscess, open	1
49062	Drainage of extraperitoneal lymphocele to peritoneal cavity, open	1
49082	Abdominal paracentesis (diagnostic or therapeutic); without imaging guidance	1
49083	Abdominal paracentesis (diagnostic or therapeutic); with imaging guidance	1
49084	Peritoneal lavage, including imaging guidance, when performed	1
49180	Biopsy, abdominal or retroperitoneal mass, percutaneous needle	1
49185	Sclerotherapy of a fluid collection (eg, lymphocele, cyst, or seroma), percutaneous, including contrast injection(s), sclerosant injection(s), diagnostic study, imaging guidance (eg, ultrasound, fluoroscopy) and radiological supervision and interpretation when performed	2
49203	Excision or destruction, open, intra-abdominal tumors, cysts or endometriomas, 1 or more peritoneal, mesenteric, or retroperitoneal primary or secondary tumors; largest tumor 5 cm diameter or less	1
49204	Excision or destruction, open, intra-abdominal tumors, cysts or endometriomas, 1 or more peritoneal, mesenteric, or retroperitoneal primary or secondary tumors; largest tumor 5.1-10.0 cm diameter	1

49205	Excision or destruction, open, intra-abdominal tumors, cysts or endometriomas, 1 or more peritoneal, mesenteric, or retroperitoneal primary or secondary tumors; largest tumor greater than 10.0 cm diameter	1
49215	Excision of presacral or sacrococcygeal tumor	1
49250	Umbilectomy, omphalectomy, excision of umbilicus (separate procedure)	1
49255	Omentectomy, epiploectomy, resection of omentum (separate procedure)	1
49320	Laparoscopy, abdomen, peritoneum, and omentum, diagnostic, with or without collection of specimen(s) by brushing or washing (separate procedure)	1
49321	Laparoscopy, surgical; with biopsy (single or multiple)	1
49322	Laparoscopy, surgical; with aspiration of cavity or cyst (eg, ovarian cyst) (single or multiple)	1
49323	Laparoscopy, surgical; with drainage of lymphocele to peritoneal cavity	1
49327	Laparoscopy, surgical; with placement of interstitial device(s) for radiation therapy guidance (eg, fiducial markers, dosimeter), intra-abdominal, intrapelvic, and/or retroperitoneum, including imaging guidance, if performed, single or multiple (List separately in addition to code for primary procedure)	1
49329	Unlisted laparoscopy procedure, abdomen, peritoneum and omentum	1
49400	Injection of air or contrast into peritoneal cavity (separate procedure)	1
49405	Image-guided fluid collection drainage by catheter (eg, abscess, hematoma, seroma, lymphocele, cyst); visceral (eg, kidney, liver, spleen, lung/mediastinum), percutaneous	1
49406	Image-guided fluid collection drainage by catheter (eg, abscess, hematoma, seroma, lymphocele, cyst); peritoneal or retroperitoneal, percutaneous	1
49407	Image-guided fluid collection drainage by catheter (eg, abscess, hematoma, seroma, lymphocele, cyst); peritoneal or retroperitoneal, transvaginal or transrectal	1
49411	Placement of interstitial device(s) for radiation therapy guidance (eg, fiducial markers, dosimeter), percutaneous, intra-abdominal, intra-pelvic (except prostate), and/or retroperitoneum, single or multiple	1
49412	Placement of interstitial device(s) for radiation therapy guidance (eg, fiducial markers, dosimeter), open, intra-abdominal, intrapelvic, and/or retroperitoneum, including image guidance, if performed, single or multiple (List separately in addition to code for primary procedure)	1
49418	Insertion of tunneled intraperitoneal catheter (eg, dialysis, intraperitoneal chemotherapy instillation, management of ascites), complete procedure, including imaging guidance, catheter placement, contrast injection when performed, and radiological supervision and interpretation, percutaneous	1
49419	Insertion of tunneled intraperitoneal catheter, with subcutaneous port (ie, totally implantable)	1
49421	Insertion of tunneled intraperitoneal catheter for dialysis, open	1
49422	Removal of tunneled intraperitoneal catheter	1

49423	Exchange of previously placed abscess or cyst drainage catheter under radiological guidance (separate procedure)	1
49424	Contrast injection for assessment of abscess or cyst via previously placed drainage catheter or tube (separate procedure)	1
49425	Insertion of peritoneal-venous shunt	1
49426	Revision of peritoneal-venous shunt	1
49427	Injection procedure (eg, contrast media) for evaluation of previously placed peritoneal-venous shunt	1
49428	Ligation of peritoneal-venous shunt	1
49429	Removal of peritoneal-venous shunt	1
49440	Insertion of gastrostomy tube, percutaneous, under fluoroscopic guidance including contrast injection(s), image documentation and report	1
49441	Insertion of duodenostomy or jejunostomy tube, percutaneous, under fluoroscopic guidance including contrast injection(s), image documentation and report	1
49442	Insertion of cecostomy or other colonic tube, percutaneous, under fluoroscopic guidance including contrast injection(s), image documentation and report	1
49446	Conversion of gastrostomy tube to gastro-jejunostomy tube, percutaneous, under fluoroscopic guidance including contrast injection(s), image documentation and report	1
49450	Replacement of gastrostomy or cecostomy (or other colonic) tube, percutaneous, under fluoroscopic guidance including contrast injection(s), image documentation and report	1
49451	Replacement of duodenostomy or jejunostomy tube, percutaneous, under fluoroscopic guidance including contrast injection(s), image documentation and report	1
49452	Replacement of gastro-jejunostomy tube, percutaneous, under fluoroscopic guidance including contrast injection(s), image documentation and report	1
49460	Mechanical removal of obstructive material from gastrostomy, duodenostomy, jejunostomy, gastro-jejunostomy, or cecostomy (or other colonic) tube, any method, under fluoroscopic guidance including contrast injection(s), if performed, image documentation and report	1
49465	Contrast injection(s) for radiological evaluation of existing gastrostomy, duodenostomy, jejunostomy, gastro-jejunostomy, or cecostomy (or other colonic) tube, from a percutaneous approach including image documentation and report	1
49491	Repair, initial inguinal hernia, preterm infant (younger than 37 weeks gestation at birth), performed from birth up to 50 weeks postconception age, with or without hydrocelectomy; reducible	1
49492	Repair, initial inguinal hernia, preterm infant (younger than 37 weeks gestation at birth), performed from birth up to 50 weeks postconception age, with or without hydrocelectomy; incarcerated or strangulated	1

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49495	Repair, initial inguinal hernia, full term infant younger than age 6 months, or preterm infant older than 50 weeks postconception age and younger than age 6 months at the time of surgery, with or without hydrocelectomy; reducible	2
49496	Repair, initial inguinal hernia, full term infant younger than age 6 months, or preterm infant older than 50 weeks postconception age and younger than age 6 months at the time of surgery, with or without hydrocelectomy; incarcerated or strangulated	2
49500	Repair initial inguinal hernia, age 6 months to younger than 5 years, with or without hydrocelectomy; reducible	2
49501	Repair initial inguinal hernia, age 6 months to younger than 5 years, with or without hydrocelectomy; incarcerated or strangulated	2
49505	Repair initial inguinal hernia, age 5 years or older; reducible	2
49507	Repair initial inguinal hernia, age 5 years or older; incarcerated or strangulated	2
49520	Repair recurrent inguinal hernia, any age; reducible	2
49521	Repair recurrent inguinal hernia, any age; incarcerated or strangulated	2
49525	Repair inguinal hernia, sliding, any age	2
49540	Repair lumbar hernia	2
49550	Repair initial femoral hernia, any age; reducible	2
49553	Repair initial femoral hernia, any age; incarcerated or strangulated	2
49555	Repair recurrent femoral hernia; reducible	2
49557	Repair recurrent femoral hernia; incarcerated or strangulated	2
49560	Repair initial incisional or ventral hernia; reducible	1
49561	Repair initial incisional or ventral hernia; incarcerated or strangulated	1
49565	Repair recurrent incisional or ventral hernia; reducible	1
49566	Repair recurrent incisional or ventral hernia; incarcerated or strangulated	1
49568	Implantation of mesh or other prosthesis for open incisional or ventral hernia repair or mesh for closure of debridement for necrotizing soft tissue infection (List separately in addition to code for the incisional or ventral hernia repair)	1
49570	Repair epigastric hernia (eg, preperitoneal fat); reducible (separate procedure)	1
49572	Repair epigastric hernia (eg, preperitoneal fat); incarcerated or strangulated	1
49580	Repair umbilical hernia, younger than age 5 years; reducible	1
49582	Repair umbilical hernia, younger than age 5 years; incarcerated or strangulated	1
49585	Repair umbilical hernia, age 5 years or older; reducible	1
49587	Repair umbilical hernia, age 5 years or older; incarcerated or strangulated	1
49590	Repair spigelian hernia	1
49600	Repair of small omphalocele, with primary closure	1
49605	Repair of large omphalocele or gastroschisis; with or without prosthesis	1

49606	Repair of large omphalocele or gastroschisis; with removal of prosthesis, final reduction and closure, in operating room	1
49610	Repair of omphalocele (Gross type operation); first stage	1
49611	Repair of omphalocele (Gross type operation); second stage	1
49650	Laparoscopy, surgical; repair initial inguinal hernia	2
49651	Laparoscopy, surgical; repair recurrent inguinal hernia	2
49652	Laparoscopy, surgical, repair, ventral, umbilical, spigelian or epigastric hernia (includes mesh insertion, when performed); reducible	1
49653	Laparoscopy, surgical, repair, ventral, umbilical, spigelian or epigastric hernia (includes mesh insertion, when performed); incarcerated or strangulated	1
49654	Laparoscopy, surgical, repair, incisional hernia (includes mesh insertion, when performed); reducible	1
49655	Laparoscopy, surgical, repair, incisional hernia (includes mesh insertion, when performed); incarcerated or strangulated	1
49656	Laparoscopy, surgical, repair, recurrent incisional hernia (includes mesh insertion, when performed); reducible	1
49657	Laparoscopy, surgical, repair, recurrent incisional hernia (includes mesh insertion, when performed); incarcerated or strangulated	1
49659	Unlisted laparoscopy procedure, hernioplasty, herniorrhaphy, herniotomy	1
49900	Suture, secondary, of abdominal wall for evisceration or dehiscence	1
49904	Omental flap, extra-abdominal (eg, for reconstruction of sternal and chest wall defects)	1
49905	Omental flap, intra-abdominal (List separately in addition to code for primary procedure)	1
49906	Free omental flap with microvascular anastomosis	1
49999	Unlisted procedure, abdomen, peritoneum and omentum	1
50010	Renal exploration, not necessitating other specific procedures	2
50020	Drainage of perirenal or renal abscess, open	1
50040	Nephrostomy, nephrotomy with drainage	2
50045	Nephrotomy, with exploration	2
50060	Nephrolithotomy; removal of calculus	2
50065	Nephrolithotomy; secondary surgical operation for calculus	2
50070	Nephrolithotomy; complicated by congenital kidney abnormality	2
50075	Nephrolithotomy; removal of large staghorn calculus filling renal pelvis and calyces (including anatrophic pyelolithotomy)	2
50080	Percutaneous nephrostolithotomy or pyelostolithotomy, with or without dilation, endoscopy, lithotripsy, stenting, or basket extraction; up to 2 cm	1

50081	Percutaneous nephrostolithotomy or pyelostolithotomy, with or without dilation, endoscopy, lithotripsy, stenting, or basket extraction; over 2 cm	2
50100	Transection or repositioning of aberrant renal vessels (separate procedure)	1
50120	Pyelotomy; with exploration	2
50125	Pyelotomy; with drainage, pyelostomy	1
50130	Pyelotomy; with removal of calculus (pyelolithotomy, pelviolithotomy, including coagulum pyelolithotomy)	1
50135	Pyelotomy; complicated (eg, secondary operation, congenital kidney abnormality)	1
50200	Renal biopsy; percutaneous, by trocar or needle	1
50205	Renal biopsy; by surgical exposure of kidney	2
50220	Nephrectomy, including partial ureterectomy, any open approach including rib resection	2
50225	Nephrectomy, including partial ureterectomy, any open approach including rib resection; complicated because of previous surgery on same kidney	1
50230	Nephrectomy, including partial ureterectomy, any open approach including rib resection; radical, with regional lymphadenectomy and/or vena caval thrombectomy	1
50234	Nephrectomy with total ureterectomy and bladder cuff; through same incision	2
50236	Nephrectomy with total ureterectomy and bladder cuff; through separate incision	1
50240	Nephrectomy, partial	1
50250	Ablation, open, 1 or more renal mass lesion(s), cryosurgical, including intraoperative ultrasound guidance and monitoring, if performed	1
50280	Excision or unroofing of cyst(s) of kidney	2
50290	Excision of perinephric cyst	1
50300	Donor nephrectomy (including cold preservation); from cadaver donor, unilateral or bilateral	1
50320	Donor nephrectomy (including cold preservation); open, from living donor	1
50323	Backbench standard preparation of cadaver donor renal allograft prior to transplantation, including dissection and removal of perinephric fat, diaphragmatic and retroperitoneal attachments, excision of adrenal gland, and preparation of ureter(s), renal vein(s), and renal artery(s), ligating branches, as necessary	1
50325	Backbench standard preparation of living donor renal allograft (open or laparoscopic) prior to transplantation, including dissection and removal of perinephric fat and preparation of ureter(s), renal vein(s), and renal artery(s), ligating branches, as necessary	1
50327	Backbench reconstruction of cadaver or living donor renal allograft prior to transplantation; venous anastomosis, each	2
50328	Backbench reconstruction of cadaver or living donor renal allograft prior to transplantation; arterial anastomosis, each	1

50329	Backbench reconstruction of cadaver or living donor renal allograft prior to transplantation; ureteral anastomosis, each	1
50340	Recipient nephrectomy (separate procedure)	2
50360	Renal allotransplantation, implantation of graft; without recipient nephrectomy	1
50365	Renal allotransplantation, implantation of graft; with recipient nephrectomy	2
50370	Removal of transplanted renal allograft	1
50380	Renal autotransplantation, reimplantation of kidney	1
50382	Removal (via snare/capture) and replacement of internally dwelling ureteral stent via percutaneous approach, including radiological supervision and interpretation	2
50384	Removal (via snare/capture) of internally dwelling ureteral stent via percutaneous approach, including radiological supervision and interpretation	2
50385	Removal (via snare/capture) and replacement of internally dwelling ureteral stent via transurethral approach, without use of cystoscopy, including radiological supervision and interpretation	2
50386	Removal (via snare/capture) of internally dwelling ureteral stent via transurethral approach, without use of cystoscopy, including radiological supervision and interpretation	2
50387	Removal and replacement of externally accessible nephroureteral catheter (eg, external/internal stent) requiring fluoroscopic guidance, including radiological supervision and interpretation	2
50389	Removal of nephrostomy tube, requiring fluoroscopic guidance (eg, with concurrent indwelling ureteral stent)	2
50390	Aspiration and/or injection of renal cyst or pelvis by needle, percutaneous	1
50391	Instillation(s) of therapeutic agent into renal pelvis and/or ureter through established nephrostomy, pyelostomy or ureterostomy tube (eg, anticarcinogenic or antifungal agent)	2
50396	Manometric studies through nephrostomy or pyelostomy tube, or indwelling ureteral catheter	1
50400	Pyeloplasty (Foley Y-pyeloplasty), plastic operation on renal pelvis, with or without plastic operation on ureter, nephropexy, nephrostomy, pyelostomy, or ureteral splinting; simple	2
50405	Pyeloplasty (Foley Y-pyeloplasty), plastic operation on renal pelvis, with or without plastic operation on ureter, nephropexy, nephrostomy, pyelostomy, or ureteral splinting; complicated (congenital kidney abnormality, secondary pyeloplasty, solitary kidney, calycoplasty)	2
50430	Injection procedure for antegrade nephrostogram and/or ureterogram, complete diagnostic procedure including imaging guidance (eg, ultrasound and fluoroscopy) and all associated radiological supervision and interpretation; new access	2
50431	Injection procedure for antegrade nephrostogram and/or ureterogram, complete diagnostic procedure including imaging guidance (eg, ultrasound and fluoroscopy) and all associated radiological supervision and interpretation; existing access	2

50432	Placement of nephrostomy catheter, percutaneous, including diagnostic nephrostogram and/or ureterogram when performed, imaging guidance (eg, ultrasound and/or fluoroscopy) and all associated radiological supervision and interpretation	2
50433	Placement of nephroureteral catheter, percutaneous, including diagnostic nephrostogram and/or ureterogram when performed, imaging guidance (eg, ultrasound and/or fluoroscopy) and all associated radiological supervision and interpretation, new access	2
50434	Convert nephrostomy catheter to nephroureteral catheter, percutaneous, including diagnostic nephrostogram and/or ureterogram when performed, imaging guidance (eg, ultrasound and/or fluoroscopy) and all associated radiological supervision and interpretation, via pre-existing nephrostomy tract	2
50435	Exchange nephrostomy catheter, percutaneous, including diagnostic nephrostogram and/or ureterogram when performed, imaging guidance (eg, ultrasound and/or fluoroscopy) and all associated radiological supervision and interpretation	2
50436	Dilation of existing tract, percutaneous, for an endourologic procedure including imaging guidance (eg, ultrasound and/or fluoroscopy) and all associated radiological supervision and interpretation, with postprocedure tube placement, when performed	2
50437	Dilation of existing tract, percutaneous, for an endourologic procedure including imaging guidance (eg, ultrasound and/or fluoroscopy) and all associated radiological supervision and interpretation, with postprocedure tube placement, when performed; including new access into the renal collecting system	2
50500	Nephrorrhaphy, suture of kidney wound or injury	1
50520	Closure of nephrocutaneous or pyelocutaneous fistula	1
50525	Closure of nephrovisceral fistula (eg, renocolic), including visceral repair; abdominal approach	1
50526	Closure of nephrovisceral fistula (eg, renocolic), including visceral repair; thoracic approach	1
50540	Symphysiotomy for horseshoe kidney with or without pyeloplasty and/or other plastic procedure, unilateral or bilateral (1 operation)	1
50541	Laparoscopy, surgical; ablation of renal cysts	1
50542	Laparoscopy, surgical; ablation of renal mass lesion(s), including intraoperative ultrasound guidance and monitoring, when performed	1
50543	Laparoscopy, surgical; partial nephrectomy	2
50544	Laparoscopy, surgical; pyeloplasty	1
50545	Laparoscopy, surgical; radical nephrectomy (includes removal of Gerota's fascia and surrounding fatty tissue, removal of regional lymph nodes, and adrenalectomy)	2
50546	Laparoscopy, surgical; nephrectomy, including partial ureterectomy	2
50547	Laparoscopy, surgical; donor nephrectomy (including cold preservation), from living donor	1
50548	Laparoscopy, surgical; nephrectomy with total ureterectomy	2
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50549	Unlisted laparoscopy procedure, renal	1
50551	Renal endoscopy through established nephrostomy or pyelostomy, with or without irrigation, instillation, or ureteropyelography, exclusive of radiologic service	1
50553	Renal endoscopy through established nephrostomy or pyelostomy, with or without irrigation, instillation, or ureteropyelography, exclusive of radiologic service; with ureteral catheterization, with or without dilation of ureter	1
50555	Renal endoscopy through established nephrostomy or pyelostomy, with or without irrigation, instillation, or ureteropyelography, exclusive of radiologic service; with biopsy	1
50557	Renal endoscopy through established nephrostomy or pyelostomy, with or without irrigation, instillation, or ureteropyelography, exclusive of radiologic service; with fulguration and/or incision, with or without biopsy	1
50561	Renal endoscopy through established nephrostomy or pyelostomy, with or without irrigation, instillation, or ureteropyelography, exclusive of radiologic service; with removal of foreign body or calculus	1
50562	Renal endoscopy through established nephrostomy or pyelostomy, with or without irrigation, instillation, or ureteropyelography, exclusive of radiologic service; with resection of tumor	1
50570	Renal endoscopy through nephrotomy or pyelotomy, with or without irrigation, instillation, or ureteropyelography, exclusive of radiologic service	1
50572	Renal endoscopy through nephrotomy or pyelotomy, with or without irrigation, instillation, or ureteropyelography, exclusive of radiologic service; with ureteral catheterization, with or without dilation of ureter	1
50574	Renal endoscopy through nephrotomy or pyelotomy, with or without irrigation, instillation, or ureteropyelography, exclusive of radiologic service; with biopsy	1
50575	Renal endoscopy through nephrotomy or pyelotomy, with or without irrigation, instillation, or ureteropyelography, exclusive of radiologic service; with endopyelotomy (includes cystoscopy, ureteroscopy, dilation of ureter and ureteral pelvic junction, incision of ureteral pelvic junction and insertion of endopyelotomy stent)	2
50576	Renal endoscopy through nephrotomy or pyelotomy, with or without irrigation, instillation, or ureteropyelography, exclusive of radiologic service; with fulguration and/or incision, with or without biopsy	1
50580	Renal endoscopy through nephrotomy or pyelotomy, with or without irrigation, instillation, or ureteropyelography, exclusive of radiologic service; with removal of foreign body or calculus	1
50590	Lithotripsy, extracorporeal shock wave	1
50592	Ablation, 1 or more renal tumor(s), percutaneous, unilateral, radiofrequency	2
50593	Ablation, renal tumor(s), unilateral, percutaneous, cryotherapy	1
50600	Ureterotomy with exploration or drainage (separate procedure)	2
50605	Ureterotomy for insertion of indwelling stent, all types	2

50606	Endoluminal biopsy of ureter and/or renal pelvis, non-endoscopic, including imaging guidance (eg, ultrasound and/or fluoroscopy) and all associated radiological supervision and interpretation (List separately in addition to code for primary procedure)	2
50610	Ureterolithotomy; upper one-third of ureter	1
50620	Ureterolithotomy; middle one-third of ureter	1
50630	Ureterolithotomy; lower one-third of ureter	2
50650	Ureterectomy, with bladder cuff (separate procedure)	1
50660	Ureterectomy, total, ectopic ureter, combination abdominal, vaginal and/or perineal approach	1
50684	Injection procedure for ureterography or ureteropyelography through ureterostomy or indwelling ureteral catheter	1
50686	Manometric studies through ureterostomy or indwelling ureteral catheter	1
50688	Change of ureterostomy tube or externally accessible ureteral stent via ileal conduit	2
50690	Injection procedure for visualization of ileal conduit and/or ureteropyelography, exclusive of radiologic service	1
50693	Placement of ureteral stent, percutaneous, including diagnostic nephrostogram and/or ureterogram when performed, imaging guidance (eg, ultrasound and/or fluoroscopy), and all associated radiological supervision and interpretation; preexisting nephrostomy tract	2
50694	Placement of ureteral stent, percutaneous, including diagnostic nephrostogram and/or ureterogram when performed, imaging guidance (eg, ultrasound and/or fluoroscopy), and all associated radiological supervision and interpretation; new access, without separate nephrostomy catheter	2
50695	Placement of ureteral stent, percutaneous, including diagnostic nephrostogram and/or ureterogram when performed, imaging guidance (eg, ultrasound and/or fluoroscopy), and all associated radiological supervision and interpretation; new access, with separate nephrostomy catheter	2
50700	Ureteroplasty, plastic operation on ureter (eg, stricture)	2
50705	Ureteral embolization or occlusion, including imaging guidance (eg, ultrasound and/or fluoroscopy) and all associated radiological supervision and interpretation (List separately in addition to code for primary procedure)	2
50706	Balloon dilation, ureteral stricture, including imaging guidance (eg, ultrasound and/or fluoroscopy) and all associated radiological supervision and interpretation (List separately in addition to code for primary procedure)	2
50715	Ureterolysis, with or without repositioning of ureter for retroperitoneal fibrosis	2
50722	Ureterolysis for ovarian vein syndrome	1
50725	Ureterolysis for retrocaval ureter, with reanastomosis of upper urinary tract or vena cava	1
50727	Revision of urinary-cutaneous anastomosis (any type urostomy)	1

50728	Revision of urinary-cutaneous anastomosis (any type urostomy); with repair of fascial defect and hernia	1
50740	Ureteropyelostomy, anastomosis of ureter and renal pelvis	1
50750	Ureterocalycostomy, anastomosis of ureter to renal calyx	1
50760	Ureteroureterostomy	1
50770	Transureteroureterostomy, anastomosis of ureter to contralateral ureter	1
50780	Ureteroneocystostomy; anastomosis of single ureter to bladder	2
50782	Ureteroneocystostomy; anastomosis of duplicated ureter to bladder	2
50783	Ureteroneocystostomy; with extensive ureteral tailoring	2
50785	Ureteroneocystostomy; with vesico-psoas hitch or bladder flap	2
50800	Ureteroenterostomy, direct anastomosis of ureter to intestine	2
50810	Ureterosigmoidostomy, with creation of sigmoid bladder and establishment of abdominal or perineal colostomy, including intestine anastomosis	1
50815	Ureterocolon conduit, including intestine anastomosis	2
50820	Ureteroileal conduit (ileal bladder), including intestine anastomosis (Bricker operation)	2
50825	Continent diversion, including intestine anastomosis using any segment of small and/or large intestine (Kock pouch or Camey enterocystoplasty)	1
50830	Urinary undiversion (eg, taking down of ureteroileal conduit, ureterosigmoidostomy or ureteroenterostomy with ureteroureterostomy or ureteroneocystostomy)	1
50840	Replacement of all or part of ureter by intestine segment, including intestine anastomosis	2
50845	Cutaneous appendico-vesicostomy	1
50860	Ureterostomy, transplantation of ureter to skin	2
50900	Ureterorrhaphy, suture of ureter (separate procedure)	1
50920	Closure of ureterocutaneous fistula	1
50930	Closure of ureterovisceral fistula (including visceral repair)	1
50940	Deligation of ureter	1
50945	Laparoscopy, surgical; ureterolithotomy	1
50947	Laparoscopy, surgical; ureteroneocystostomy with cystoscopy and ureteral stent placement	1
50948	Laparoscopy, surgical; ureteroneocystostomy without cystoscopy and ureteral stent placement	1
50949	Unlisted laparoscopy procedure, ureter	1
50951	Ureteral endoscopy through established ureterostomy, with or without irrigation, instillation, or ureteropyelography, exclusive of radiologic service	1

50953	Ureteral endoscopy through established ureterostomy, with or without irrigation,	1
	instillation, or ureteropyelography, exclusive of radiologic service; with ureteral catheterization, with or without dilation of ureter	
50955	Ureteral endoscopy through established ureterostomy, with or without irrigation, instillation, or ureteropyelography, exclusive of radiologic service; with biopsy	1
50957	Ureteral endoscopy through established ureterostomy, with or without irrigation, instillation, or ureteropyelography, exclusive of radiologic service; with fulguration and/or incision, with or without biopsy	1
50961	Ureteral endoscopy through established ureterostomy, with or without irrigation, instillation, or ureteropyelography, exclusive of radiologic service; with removal of foreign body or calculus	1
50970	Ureteral endoscopy through ureterotomy, with or without irrigation, instillation, or ureteropyelography, exclusive of radiologic service	1
50972	Ureteral endoscopy through ureterotomy, with or without irrigation, instillation, or ureteropyelography, exclusive of radiologic service; with ureteral catheterization, with or without dilation of ureter	1
50974	Ureteral endoscopy through ureterotomy, with or without irrigation, instillation, or ureteropyelography, exclusive of radiologic service; with biopsy	1
50976	Ureteral endoscopy through ureterotomy, with or without irrigation, instillation, or ureteropyelography, exclusive of radiologic service; with fulguration and/or incision, with or without biopsy	1
50980	Ureteral endoscopy through ureterotomy, with or without irrigation, instillation, or ureteropyelography, exclusive of radiologic service; with removal of foreign body or calculus	1
51020	Cystotomy or cystostomy; with fulguration and/or insertion of radioactive material	1
51030	Cystotomy or cystostomy; with cryosurgical destruction of intravesical lesion	1
51040	Cystostomy, cystotomy with drainage	1
51045	Cystotomy, with insertion of ureteral catheter or stent (separate procedure)	1
51050	Cystolithotomy, cystotomy with removal of calculus, without vesical neck resection	1
51060	Transvesical ureterolithotomy	1
51065	Cystotomy, with calculus basket extraction and/or ultrasonic or electrohydraulic fragmentation of ureteral calculus	1
51080	Drainage of perivesical or prevesical space abscess	1
51100	Aspiration of bladder; by needle	1
51101	Aspiration of bladder; by trocar or intracatheter	1
51102	Aspiration of bladder; with insertion of suprapubic catheter	1
51500	Excision of urachal cyst or sinus, with or without umbilical hernia repair	1
51520	Cystotomy; for simple excision of vesical neck (separate procedure)	1
51525	Cystotomy; for excision of bladder diverticulum, single or multiple (separate procedure)	1

51530	Cystotomy; for excision of bladder tumor	1
51535	Cystotomy for excision, incision, or repair of ureterocele	2
51550	Cystectomy, partial; simple	1
51555	Cystectomy, partial; complicated (eg, postradiation, previous surgery, difficult location)	1
51565	Cystectomy, partial, with reimplantation of ureter(s) into bladder (ureteroneocystostomy)	1
51570	Cystectomy, complete; (separate procedure)	1
51575	Cystectomy, complete; with bilateral pelvic lymphadenectomy, including external iliac, hypogastric, and obturator nodes	1
51580	Cystectomy, complete, with ureterosigmoidostomy or ureterocutaneous transplantations	1
51585	Cystectomy, complete, with ureterosigmoidostomy or ureterocutaneous transplantations; with bilateral pelvic lymphadenectomy, including external iliac, hypogastric, and obturator nodes	1
51590	Cystectomy, complete, with ureteroileal conduit or sigmoid bladder, including intestine anastomosis	1
51595	Cystectomy, complete, with ureteroileal conduit or sigmoid bladder, including intestine anastomosis; with bilateral pelvic lymphadenectomy, including external iliac, hypogastric, and obturator nodes	1
51596	Cystectomy, complete, with continent diversion, any open technique, using any segment of small and/or large intestine to construct neobladder	1
51597	Pelvic exenteration, complete, for vesical, prostatic or urethral malignancy, with removal of bladder and ureteral transplantations, with or without hysterectomy and/or abdominoperineal resection of rectum and colon and colostomy, or any combination thereof	1
51600	Injection procedure for cystography or voiding urethrocystography	1
51605	Injection procedure and placement of chain for contrast and/or chain urethrocystography	1
51610	Injection procedure for retrograde urethrocystography	1
51700	Bladder irrigation, simple, lavage and/or instillation	1
51701	Insertion of non-indwelling bladder catheter (eg, straight catheterization for residual urine)	1
51702	Insertion of temporary indwelling bladder catheter; simple (eg, Foley)	1
51703	Insertion of temporary indwelling bladder catheter; complicated (eg, altered anatomy, fractured catheter/balloon)	1
51705	Change of cystostomy tube; simple	1
51710	Change of cystostomy tube; complicated	1
51715	Endoscopic injection of implant material into the submucosal tissues of the urethra and/or bladder neck	1

51720	Bladder instillation of anticarcinogenic agent (including retention time)	1
51725	Simple cystometrogram (CMG) (eg, spinal manometer)	1
51726	Complex cystometrogram (ie, calibrated electronic equipment)	1
51727	Complex cystometrogram (ie, calibrated electronic equipment); with urethral pressure profile studies (ie, urethral closure pressure profile), any technique	1
51728	Complex cystometrogram (ie, calibrated electronic equipment); with voiding pressure studies (ie, bladder voiding pressure), any technique	1
51729	Complex cystometrogram (ie, calibrated electronic equipment); with voiding pressure studies (ie, bladder voiding pressure) and urethral pressure profile studies (ie, urethral closure pressure profile), any technique	1
51736	Simple uroflowmetry (UFR) (eg, stop-watch flow rate, mechanical uroflowmeter)	1
51741	Complex uroflowmetry (eg, calibrated electronic equipment)	1
51784	Electromyography studies (EMG) of anal or urethral sphincter, other than needle, any technique	1
51785	Needle electromyography studies (EMG) of anal or urethral sphincter, any technique	1
51792	Stimulus evoked response (eg, measurement of bulbocavernosus reflex latency time)	1
51797	Voiding pressure studies, intra-abdominal (ie, rectal, gastric, intraperitoneal) (List separately in addition to code for primary procedure)	1
51798	Measurement of post-voiding residual urine and/or bladder capacity by ultrasound, non-imaging	1
51800	Cystoplasty or cystourethroplasty, plastic operation on bladder and/or vesical neck (anterior Y-plasty, vesical fundus resection), any procedure, with or without wedge resection of posterior vesical neck	1
51820	Cystourethroplasty with unilateral or bilateral ureteroneocystostomy	1
51840	Anterior vesicourethropexy, or urethropexy (eg, Marshall-Marchetti-Krantz, Burch); simple	1
51841	Anterior vesicourethropexy, or urethropexy (eg, Marshall-Marchetti-Krantz, Burch); complicated (eg, secondary repair)	1
51845	Abdomino-vaginal vesical neck suspension, with or without endoscopic control (eg, Stamey, Raz, modified Pereyra)	1
51860	Cystorrhaphy, suture of bladder wound, injury or rupture; simple	1
51865	Cystorrhaphy, suture of bladder wound, injury or rupture; complicated	1
51880	Closure of cystostomy (separate procedure)	1
51900	Closure of vesicovaginal fistula, abdominal approach	1
51920	Closure of vesicouterine fistula	1
51925	Closure of vesicouterine fistula; with hysterectomy	1
51940	Closure, exstrophy of bladder	1

51960	Enterocystoplasty, including intestinal anastomosis	1
51980	Cutaneous vesicostomy	1
51990	Laparoscopy, surgical; urethral suspension for stress incontinence	1
51992	Laparoscopy, surgical; sling operation for stress incontinence (eg, fascia or synthetic)	1
51999	Unlisted laparoscopy procedure, bladder	1
52000	Cystourethroscopy (separate procedure)	1
52001	Cystourethroscopy with irrigation and evacuation of multiple obstructing clots	1
52005	Cystourethroscopy, with ureteral catheterization, with or without irrigation, instillation, or ureteropyelography, exclusive of radiologic service	1
52007	Cystourethroscopy, with ureteral catheterization, with or without irrigation, instillation, or ureteropyelography, exclusive of radiologic service; with brush biopsy of ureter and/or renal pelvis	1
52010	Cystourethroscopy, with ejaculatory duct catheterization, with or without irrigation, instillation, or duct radiography, exclusive of radiologic service	1
52204	Cystourethroscopy, with biopsy(s)	1
52214	Cystourethroscopy, with fulguration (including cryosurgery or laser surgery) of trigone, bladder neck, prostatic fossa, urethra, or periurethral glands	1
52224	Cystourethroscopy, with fulguration (including cryosurgery or laser surgery) or treatment of MINOR (less than 0.5 cm) lesion(s) with or without biopsy	1
52234	Cystourethroscopy, with fulguration (including cryosurgery or laser surgery) and/or resection of; SMALL bladder tumor(s) (0.5 up to 2.0 cm)	1
52235	Cystourethroscopy, with fulguration (including cryosurgery or laser surgery) and/or resection of; MEDIUM bladder tumor(s) (2.0 to 5.0 cm)	1
52240	Cystourethroscopy, with fulguration (including cryosurgery or laser surgery) and/or resection of; LARGE bladder tumor(s)	1
52250	Cystourethroscopy with insertion of radioactive substance, with or without biopsy or fulguration	1
52260	Cystourethroscopy, with dilation of bladder for interstitial cystitis; general or conduction (spinal) anesthesia	1
52265	Cystourethroscopy, with dilation of bladder for interstitial cystitis; local anesthesia	1
52270	Cystourethroscopy, with internal urethrotomy; female	1
52275	Cystourethroscopy, with internal urethrotomy; male	1
52276	Cystourethroscopy with direct vision internal urethrotomy	1
52277	Cystourethroscopy, with resection of external sphincter (sphincterotomy)	1
52281	Cystourethroscopy, with calibration and/or dilation of urethral stricture or stenosis, with or without meatotomy, with or without injection procedure for cystography, male or female	1
52282	Cystourethroscopy, with insertion of permanent urethral stent	1

52283	Cystourethroscopy, with steroid injection into stricture	1
52285	Cystourethroscopy for treatment of the female urethral syndrome with any or all of the following: urethral meatotomy, urethral dilation, internal urethrotomy, lysis of urethrovaginal septal fibrosis, lateral incisions of the bladder neck, and fulguration of polyp(s) of urethra, bladder neck, and/or trigone	1
52287	Cystourethroscopy, with injection(s) for chemodenervation of the bladder	1
52290	Cystourethroscopy; with ureteral meatotomy, unilateral or bilateral	1
52300	Cystourethroscopy; with resection or fulguration of orthotopic ureterocele(s), unilateral or bilateral	1
52301	Cystourethroscopy; with resection or fulguration of ectopic ureterocele(s), unilateral or bilateral	1
52305	Cystourethroscopy; with incision or resection of orifice of bladder diverticulum, single or multiple	1
52310	Cystourethroscopy, with removal of foreign body, calculus, or ureteral stent from urethra or bladder (separate procedure); simple	1
52315	Cystourethroscopy, with removal of foreign body, calculus, or ureteral stent from urethra or bladder (separate procedure); complicated	1
52317	Litholapaxy: crushing or fragmentation of calculus by any means in bladder and removal of fragments; simple or small (less than 2.5 cm)	1
52318	Litholapaxy: crushing or fragmentation of calculus by any means in bladder and removal of fragments; complicated or large (over 2.5 cm)	1
52320	Cystourethroscopy (including ureteral catheterization); with removal of ureteral calculus	1
52325	Cystourethroscopy (including ureteral catheterization); with fragmentation of ureteral calculus (eg, ultrasonic or electro-hydraulic technique)	1
52327	Cystourethroscopy (including ureteral catheterization); with subureteric injection of implant material	1
52330	Cystourethroscopy (including ureteral catheterization); with manipulation, without removal of ureteral calculus	1
52332	Cystourethroscopy, with insertion of indwelling ureteral stent (eg, Gibbons or double-J type)	1
52334	Cystourethroscopy with insertion of ureteral guide wire through kidney to establish a percutaneous nephrostomy, retrograde	1
52341	Cystourethroscopy; with treatment of ureteral stricture (eg, balloon dilation, laser, electrocautery, and incision)	1
52342	Cystourethroscopy; with treatment of ureteropelvic junction stricture (eg, balloon dilation, laser, electrocautery, and incision)	1
52343	Cystourethroscopy; with treatment of intra-renal stricture (eg, balloon dilation, laser, electrocautery, and incision)	1
52344	Cystourethroscopy with ureteroscopy; with treatment of ureteral stricture (eg, balloon dilation, laser, electrocautery, and incision)	1

52345	Cystourethroscopy with ureteroscopy; with treatment of ureteropelvic junction stricture (eg, balloon dilation, laser, electrocautery, and incision)	1
52346	Cystourethroscopy with ureteroscopy; with treatment of intra-renal stricture (eg, balloon dilation, laser, electrocautery, and incision)	1
52351	Cystourethroscopy, with ureteroscopy and/or pyeloscopy; diagnostic	1
52352	Cystourethroscopy, with ureteroscopy and/or pyeloscopy; with removal or manipulation of calculus (ureteral catheterization is included)	1
52353	Cystourethroscopy, with ureteroscopy and/or pyeloscopy; with lithotripsy (ureteral catheterization is included)	1
52354	Cystourethroscopy, with ureteroscopy and/or pyeloscopy; with biopsy and/or fulguration of ureteral or renal pelvic lesion	1
52355	Cystourethroscopy, with ureteroscopy and/or pyeloscopy; with resection of ureteral or renal pelvic tumor	2
52356	Cystourethroscopy, with ureteroscopy and/or pyeloscopy; with lithotripsy including insertion of indwelling ureteral stent (eg, Gibbons or double-J type)	2
52400	Cystourethroscopy with incision, fulguration, or resection of congenital posterior urethral valves, or congenital obstructive hypertrophic mucosal folds	1
52402	Cystourethroscopy with transurethral resection or incision of ejaculatory ducts	1
52441	Cystourethroscopy, with insertion of permanent adjustable transprostatic implant; single implant	1
52442	Cystourethroscopy, with insertion of permanent adjustable transprostatic implant; each additional permanent adjustable transprostatic implant (List separately in addition to code for primary procedure)	6
52450	Transurethral incision of prostate	1
52500	Transurethral resection of bladder neck (separate procedure)	1
52601	Transurethral electrosurgical resection of prostate, including control of postoperative bleeding, complete (vasectomy, meatotomy, cystourethroscopy, urethral calibration and/or dilation, and internal urethrotomy are included)	1
52630	Transurethral resection; residual or regrowth of obstructive prostate tissue including control of postoperative bleeding, complete (vasectomy, meatotomy, cystourethroscopy, urethral calibration and/or dilation, and internal urethrotomy are included)	1
52640	Transurethral resection; of postoperative bladder neck contracture	1
52647	Laser coagulation of prostate, including control of postoperative bleeding, complete (vasectomy, meatotomy, cystourethroscopy, urethral calibration and/or dilation, and internal urethrotomy are included if performed)	1
52648	Laser vaporization of prostate, including control of postoperative bleeding, complete (vasectomy, meatotomy, cystourethroscopy, urethral calibration and/or dilation, internal urethrotomy and transurethral resection of prostate are included if performed)	1
52649	Laser enucleation of the prostate with morcellation, including control of postoperative bleeding, complete (vasectomy, meatotomy, cystourethroscopy,	1

	urethral calibration and/or dilation, internal urethrotomy and transurethral resection of prostate are included if performed)	
52700	Transurethral drainage of prostatic abscess	1
53000	Urethrotomy or urethrostomy, external (separate procedure); pendulous urethra	1
53010	Urethrotomy or urethrostomy, external (separate procedure); perineal urethra, external	1
53020	Meatotomy, cutting of meatus (separate procedure); except infant	1
53025	Meatotomy, cutting of meatus (separate procedure); infant	1
53040	Drainage of deep periurethral abscess	1
53060	Drainage of Skene's gland abscess or cyst	1
53080	Drainage of perineal urinary extravasation; uncomplicated (separate procedure)	1
53085	Drainage of perineal urinary extravasation; complicated	1
53200	Biopsy of urethra	1
53210	Urethrectomy, total, including cystostomy; female	1
53215	Urethrectomy, total, including cystostomy; male	1
53220	Excision or fulguration of carcinoma of urethra	1
53230	Excision of urethral diverticulum (separate procedure); female	1
53235	Excision of urethral diverticulum (separate procedure); male	1
53240	Marsupialization of urethral diverticulum, male or female	1
53250	Excision of bulbourethral gland (Cowper's gland)	1
53260	Excision or fulguration; urethral polyp(s), distal urethra	1
53265	Excision or fulguration; urethral caruncle	1
53270	Excision or fulguration; Skene's glands	1
53275	Excision or fulguration; urethral prolapse	1
53400	Urethroplasty; first stage, for fistula, diverticulum, or stricture (eg, Johannsen type)	1
53405	Urethroplasty; second stage (formation of urethra), including urinary diversion	1
53410	Urethroplasty, 1-stage reconstruction of male anterior urethra	1
53415	Urethroplasty, transpubic or perineal, 1-stage, for reconstruction or repair of prostatic or membranous urethra	1
53420	Urethroplasty, 2-stage reconstruction or repair of prostatic or membranous urethra; first stage	1
53425	Urethroplasty, 2-stage reconstruction or repair of prostatic or membranous urethra; second stage	1
53430	Urethroplasty, reconstruction of female urethra	1
53431	Urethroplasty with tubularization of posterior urethra and/or lower bladder for incontinence (eg, Tenago, Leadbetter procedure)	1

53440	Sling operation for correction of male urinary incontinence (eg, fascia or synthetic)	1
53442	Removal or revision of sling for male urinary incontinence (eg, fascia or synthetic)	1
53444	Insertion of tandem cuff (dual cuff)	1
53445	Insertion of inflatable urethral/bladder neck sphincter, including placement of pump, reservoir, and cuff	1
53446	Removal of inflatable urethral/bladder neck sphincter, including pump, reservoir, and cuff	1
53447	Removal and replacement of inflatable urethral/bladder neck sphincter including pump, reservoir, and cuff at the same operative session	1
53448	Removal and replacement of inflatable urethral/bladder neck sphincter including pump, reservoir, and cuff through an infected field at the same operative session including irrigation and debridement of infected tissue	1
53449	Repair of inflatable urethral/bladder neck sphincter, including pump, reservoir, and cuff	1
53450	Urethromeatoplasty, with mucosal advancement	1
53451	Periurethral transperineal adjustable balloon continence device; bilateral insertion, including cystourethroscopy and imaging guidance	1
53452	Periurethral transperineal adjustable balloon continence device; unilateral insertion, including cystourethroscopy and imaging guidance	1
53453	Periurethral transperineal adjustable balloon continence device; removal, each balloon	2
53454	Periurethral transperineal adjustable balloon continence device; percutaneous adjustment of balloon(s) fluid volume	1
53460	Urethromeatoplasty, with partial excision of distal urethral segment (Richardson type procedure)	1
53500	Urethrolysis, transvaginal, secondary, open, including cystourethroscopy (eg, postsurgical obstruction, scarring)	1
53502	Urethrorrhaphy, suture of urethral wound or injury, female	1
53505	Urethrorrhaphy, suture of urethral wound or injury; penile	1
53510	Urethrorrhaphy, suture of urethral wound or injury; perineal	1
53515	Urethrorrhaphy, suture of urethral wound or injury; prostatomembranous	1
53520	Closure of urethrostomy or urethrocutaneous fistula, male (separate procedure)	1
53600	Dilation of urethral stricture by passage of sound or urethral dilator, male; initial	1
53601	Dilation of urethral stricture by passage of sound or urethral dilator, male; subsequent	1
53605	Dilation of urethral stricture or vesical neck by passage of sound or urethral dilator, male, general or conduction (spinal) anesthesia	1
53620	Dilation of urethral stricture by passage of filiform and follower, male; initial	1
53621	Dilation of urethral stricture by passage of filiform and follower, male; subsequent	1

53660	Dilation of female urethra including suppository and/or instillation; initial	1
53661	Dilation of female urethra including suppository and/or instillation; subsequent	1
53665	Dilation of female urethra, general or conduction (spinal) anesthesia	1
53850	Transurethral destruction of prostate tissue; by microwave thermotherapy	1
53852	Transurethral destruction of prostate tissue; by radiofrequency thermotherapy	1
53854	Transurethral destruction of prostate tissue; by radiofrequency generated water vapor thermotherapy	1
53855	Insertion of a temporary prostatic urethral stent, including urethral measurement	1
53860	Transurethral radiofrequency micro-remodeling of the female bladder neck and proximal urethra for stress urinary incontinence	1
53899	Unlisted procedure, urinary system	1
54000	Slitting of prepuce, dorsal or lateral (separate procedure); newborn	1
54001	Slitting of prepuce, dorsal or lateral (separate procedure); except newborn	1
54015	Incision and drainage of penis, deep	1
54050	Destruction of lesion(s), penis (eg, condyloma, papilloma, molluscum contagiosum, herpetic vesicle), simple; chemical	1
54055	Destruction of lesion(s), penis (eg, condyloma, papilloma, molluscum contagiosum, herpetic vesicle), simple; electrodesiccation	1
54056	Destruction of lesion(s), penis (eg, condyloma, papilloma, molluscum contagiosum, herpetic vesicle), simple; cryosurgery	1
54057	Destruction of lesion(s), penis (eg, condyloma, papilloma, molluscum contagiosum, herpetic vesicle), simple; laser surgery	1
54060	Destruction of lesion(s), penis (eg, condyloma, papilloma, molluscum contagiosum, herpetic vesicle), simple; surgical excision	1
54065	Destruction of lesion(s), penis (eg, condyloma, papilloma, molluscum contagiosum, herpetic vesicle), extensive (eg, laser surgery, electrosurgery, cryosurgery, chemosurgery)	1
54100	Biopsy of penis; (separate procedure)	1
54105	Biopsy of penis; deep structures	1
54110	Excision of penile plaque (Peyronie disease)	1
54111	Excision of penile plaque (Peyronie disease); with graft to 5 cm in length	1
54112	Excision of penile plaque (Peyronie disease); with graft greater than 5 cm in length	1
54115	Removal foreign body from deep penile tissue (eg, plastic implant)	1
54120	Amputation of penis; partial	1
54125	Amputation of penis; complete	1
54130	Amputation of penis, radical; with bilateral inguinofemoral lymphadenectomy	1
54135	Amputation of penis, radical; in continuity with bilateral pelvic lymphadenectomy, including external iliac, hypogastric and obturator nodes	1

54150	Circumcision, using clamp or other device with regional dorsal penile or ring block	1
54160	Circumcision, surgical excision other than clamp, device, or dorsal slit; neonate (28 days of age or less)	1
54161	Circumcision, surgical excision other than clamp, device, or dorsal slit; older than 28 days of age	1
54162	Lysis or excision of penile post-circumcision adhesions	1
54163	Repair incomplete circumcision	1
54164	Frenulotomy of penis	1
54200	Injection procedure for Peyronie disease	1
54205	Injection procedure for Peyronie disease; with surgical exposure of plaque	1
54220	Irrigation of corpora cavernosa for priapism	1
54230	Injection procedure for corpora cavernosography	1
54231	Dynamic cavernosometry, including intracavernosal injection of vasoactive drugs (eg, papaverine, phentolamine)	1
54235	Injection of corpora cavernosa with pharmacologic agent(s) (eg, papaverine, phentolamine)	1
54240	Penile plethysmography	1
54250	Nocturnal penile tumescence and/or rigidity test	1
54300	Plastic operation of penis for straightening of chordee (eg, hypospadias), with or without mobilization of urethra	1
54304	Plastic operation on penis for correction of chordee or for first stage hypospadias repair with or without transplantation of prepuce and/or skin flaps	1
54308	Urethroplasty for second stage hypospadias repair (including urinary diversion); less than 3 cm	1
54312	Urethroplasty for second stage hypospadias repair (including urinary diversion); greater than 3 cm	1
54316	Urethroplasty for second stage hypospadias repair (including urinary diversion) with free skin graft obtained from site other than genitalia	1
54318	Urethroplasty for third stage hypospadias repair to release penis from scrotum (eg, third stage Cecil repair)	1
54322	1-stage distal hypospadias repair (with or without chordee or circumcision); with simple meatal advancement (eg, Magpi, V-flap)	1
54324	1-stage distal hypospadias repair (with or without chordee or circumcision); with urethroplasty by local skin flaps (eg, flip-flap, prepucial flap)	1
54326	1-stage distal hypospadias repair (with or without chordee or circumcision); with urethroplasty by local skin flaps and mobilization of urethra	1
54328	1-stage distal hypospadias repair (with or without chordee or circumcision); with extensive dissection to correct chordee and urethroplasty with local skin flaps, skin graft patch, and/or island flap	1

54332	1-stage proximal penile or penoscrotal hypospadias repair requiring extensive dissection to correct chordee and urethroplasty by use of skin graft tube and/or island flap	1
54336	1-stage perineal hypospadias repair requiring extensive dissection to correct chordee and urethroplasty by use of skin graft tube and/or island flap	1
54340	Repair of hypospadias complication(s) (ie, fistula, stricture, diverticula); by closure, incision, or excision, simple	1
54344	Repair of hypospadias complication(s) (ie, fistula, stricture, diverticula); requiring mobilization of skin flaps and urethroplasty with flap or patch graft	1
54348	Repair of hypospadias complication(s) (ie, fistula, stricture, diverticula); requiring extensive dissection, and urethroplasty with flap, patch or tubed graft (including urinary diversion, when performed)	1
54352	Revision of prior hypospadias repair requiring extensive dissection and excision of previously constructed structures including re-release of chordee and reconstruction of urethra and penis by use of local skin as grafts and island flaps and skin brought in as flaps or grafts	1
54360	Plastic operation on penis to correct angulation	1
54380	Plastic operation on penis for epispadias distal to external sphincter	1
54385	Plastic operation on penis for epispadias distal to external sphincter; with incontinence	1
54390	Plastic operation on penis for epispadias distal to external sphincter; with exstrophy of bladder	1
54400	Insertion of penile prosthesis; non-inflatable (semi-rigid)	1
54401	Insertion of penile prosthesis; inflatable (self-contained)	1
54405	Insertion of multi-component, inflatable penile prosthesis, including placement of pump, cylinders, and reservoir	1
54406	Removal of all components of a multi-component, inflatable penile prosthesis without replacement of prosthesis	1
54408	Repair of component(s) of a multi-component, inflatable penile prosthesis	1
54410	Removal and replacement of all component(s) of a multi-component, inflatable penile prosthesis at the same operative session	1
54411	Removal and replacement of all components of a multi-component inflatable penile prosthesis through an infected field at the same operative session, including irrigation and debridement of infected tissue	1
54415	Removal of non-inflatable (semi-rigid) or inflatable (self-contained) penile prosthesis, without replacement of prosthesis	1
54416	Removal and replacement of non-inflatable (semi-rigid) or inflatable (self-contained) penile prosthesis at the same operative session	1
54417	Removal and replacement of non-inflatable (semi-rigid) or inflatable (self-contained) penile prosthesis through an infected field at the same operative session, including irrigation and debridement of infected tissue	1

54420	Corpora cavernosa-saphenous vein shunt (priapism operation), unilateral or bilateral	1
54430	Corpora cavernosa-corpus spongiosum shunt (priapism operation), unilateral or bilateral	1
54435	Corpora cavernosa-glans penis fistulization (eg, biopsy needle, Winter procedure, rongeur, or punch) for priapism	1
54437	Repair of traumatic corporeal tear(s)	1
54438	Replantation, penis, complete amputation including urethral repair	1
54440	Plastic operation of penis for injury	1
54450	Foreskin manipulation including lysis of preputial adhesions and stretching	1
54500	Biopsy of testis, needle (separate procedure)	1
54505	Biopsy of testis, incisional (separate procedure)	2
54512	Excision of extraparenchymal lesion of testis	1
54520	Orchiectomy, simple (including subcapsular), with or without testicular prosthesis, scrotal or inguinal approach	2
54522	Orchiectomy, partial	2
54530	Orchiectomy, radical, for tumor; inguinal approach	2
54535	Orchiectomy, radical, for tumor; with abdominal exploration	2
54550	Exploration for undescended testis (inguinal or scrotal area)	2
54560	Exploration for undescended testis with abdominal exploration	2
54600	Reduction of torsion of testis, surgical, with or without fixation of contralateral testis	1
54620	Fixation of contralateral testis (separate procedure)	1
54640	Orchiopexy, inguinal or scrotal approach	2
54650	Orchiopexy, abdominal approach, for intra-abdominal testis (eg, Fowler-Stephens)	1
54660	Insertion of testicular prosthesis (separate procedure)	1
54670	Suture or repair of testicular injury	1
54680	Transplantation of testis(es) to thigh (because of scrotal destruction)	2
54690	Laparoscopy, surgical; orchiectomy	2
54692	Laparoscopy, surgical; orchiopexy for intra-abdominal testis	2
54699	Unlisted laparoscopy procedure, testis	1
54700	Incision and drainage of epididymis, testis and/or scrotal space (eg, abscess or hematoma)	1
54800	Biopsy of epididymis, needle	1
54830	Excision of local lesion of epididymis	1
54840	Excision of spermatocele, with or without epididymectomy	2

54860	Epididymectomy; unilateral	1
54861	Epididymectomy; bilateral	1
54900	Epididymovasostomy, anastomosis of epididymis to vas deferens; unilateral	1
54901	Epididymovasostomy, anastomosis of epididymis to vas deferens; bilateral	1
55000	Puncture aspiration of hydrocele, tunica vaginalis, with or without injection of medication	1
55040	Excision of hydrocele; unilateral	1
55041	Excision of hydrocele; bilateral	1
55060	Repair of tunica vaginalis hydrocele (Bottle type)	2
55100	Drainage of scrotal wall abscess	1
55110	Scrotal exploration	1
55120	Removal of foreign body in scrotum	1
55150	Resection of scrotum	1
55175	Scrotoplasty; simple	1
55180	Scrotoplasty; complicated	1
55200	Vasotomy, cannulization with or without incision of vas, unilateral or bilateral (separate procedure)	1
55250	Vasectomy, unilateral or bilateral (separate procedure), including postoperative semen examination(s)	1
55300	Vasotomy for vasograms, seminal vesiculograms, or epididymograms, unilateral or bilateral	1
55400	Vasovasostomy, vasovasorrhaphy	1
55500	Excision of hydrocele of spermatic cord, unilateral (separate procedure)	2
55520	Excision of lesion of spermatic cord (separate procedure)	1
55530	Excision of varicocele or ligation of spermatic veins for varicocele; (separate procedure)	2
55535	Excision of varicocele or ligation of spermatic veins for varicocele; abdominal approach	1
55540	Excision of varicocele or ligation of spermatic veins for varicocele; with hernia repair	2
55550	Laparoscopy, surgical, with ligation of spermatic veins for varicocele	1
55559	Unlisted laparoscopy procedure, spermatic cord	1
55600	Vesiculotomy	2
55605	Vesiculotomy; complicated	2
55650	Vesiculectomy, any approach	2
55680	Excision of Mullerian duct cyst	1
55700	Biopsy, prostate; needle or punch, single or multiple, any approach	1

55705	Biopsy, prostate; incisional, any approach	1
55706	Biopsies, prostate, needle, transperineal, stereotactic template guided saturation sampling, including imaging guidance	1
55720	Prostatotomy, external drainage of prostatic abscess, any approach; simple	1
55725	Prostatotomy, external drainage of prostatic abscess, any approach; complicated	1
55801	Prostatectomy, perineal, subtotal (including control of postoperative bleeding, vasectomy, meatotomy, urethral calibration and/or dilation, and internal urethrotomy)	1
55810	Prostatectomy, perineal radical	1
55812	Prostatectomy, perineal radical; with lymph node biopsy(s) (limited pelvic lymphadenectomy)	1
55815	Prostatectomy, perineal radical; with bilateral pelvic lymphadenectomy, including external iliac, hypogastric and obturator nodes	1
55821	Prostatectomy (including control of postoperative bleeding, vasectomy, meatotomy, urethral calibration and/or dilation, and internal urethrotomy); suprapubic, subtotal, 1 or 2 stages	1
55831	Prostatectomy (including control of postoperative bleeding, vasectomy, meatotomy, urethral calibration and/or dilation, and internal urethrotomy); retropubic, subtotal	1
55840	Prostatectomy, retropubic radical, with or without nerve sparing	1
55842	Prostatectomy, retropubic radical, with or without nerve sparing; with lymph node biopsy(s) (limited pelvic lymphadenectomy)	1
55845	Prostatectomy, retropubic radical, with or without nerve sparing; with bilateral pelvic lymphadenectomy, including external iliac, hypogastric, and obturator nodes	1
55860	Exposure of prostate, any approach, for insertion of radioactive substance	1
55862	Exposure of prostate, any approach, for insertion of radioactive substance; with lymph node biopsy(s) (limited pelvic lymphadenectomy)	1
55865	Exposure of prostate, any approach, for insertion of radioactive substance; with bilateral pelvic lymphadenectomy, including external iliac, hypogastric and obturator nodes	1
55866	Laparoscopy, surgical prostatectomy, retropubic radical, including nerve sparing, includes robotic assistance, when performed	1
55870	Electroejaculation	1
55873	Cryosurgical ablation of the prostate (includes ultrasonic guidance and monitoring)	1
55874	Transperineal placement of biodegradable material, peri-prostatic, single or multiple injection(s), including image guidance, when performed	1
55880	Ablation of malignant prostate tissue, transrectal, with high intensity-focused ultrasound (HIFU), including ultrasound guidance	1
55899	Unlisted procedure, male genital system	1

55920	Placement of needles or catheters into pelvic organs and/or genitalia (except prostate) for subsequent interstitial radioelement application	1
55970	Intersex surgery; male to female	1
55980	Intersex surgery; female to male	1
56405	Incision and drainage of vulva or perineal abscess	1
56420	Incision and drainage of Bartholin's gland abscess	1
56440	Marsupialization of Bartholin's gland cyst	1
56441	Lysis of labial adhesions	1
56442	Hymenotomy, simple incision	1
56501	Destruction of lesion(s), vulva; simple (eg, laser surgery, electrosurgery, cryosurgery, chemosurgery)	1
56515	Destruction of lesion(s), vulva; extensive (eg, laser surgery, electrosurgery, cryosurgery, chemosurgery)	1
56605	Biopsy of vulva or perineum (separate procedure); 1 lesion	1
56606	Biopsy of vulva or perineum (separate procedure); each separate additional lesion (List separately in addition to code for primary procedure)	1
56620	Vulvectomy simple; partial	1
56625	Vulvectomy simple; complete	1
56630	Vulvectomy, radical, partial	1
56631	Vulvectomy, radical, partial; with unilateral inguinofemoral lymphadenectomy	1
56632	Vulvectomy, radical, partial; with bilateral inguinofemoral lymphadenectomy	1
56633	Vulvectomy, radical, complete	1
56634	Vulvectomy, radical, complete; with unilateral inguinofemoral lymphadenectomy	1
56637	Vulvectomy, radical, complete; with bilateral inguinofemoral lymphadenectomy	1
56640	Vulvectomy, radical, complete, with inguinofemoral, iliac, and pelvic lymphadenectomy	1
56700	Partial hymenectomy or revision of hymenal ring	1
56740	Excision of Bartholin's gland or cyst	1
56800	Plastic repair of introitus	1
56805	Clitoroplasty for intersex state	1
56810	Perineoplasty, repair of perineum, nonobstetrical (separate procedure)	1
56820	Colposcopy of the vulva	1
56821	Colposcopy of the vulva; with biopsy(s)	1
57000	Colpotomy; with exploration	1
57010	Colpotomy; with drainage of pelvic abscess	1
57020	Colpocentesis (separate procedure)	1

57022	Incision and drainage of vaginal hematoma; obstetrical/postpartum	1
57023	Incision and drainage of vaginal hematoma; non-obstetrical (eg, post-trauma, spontaneous bleeding)	1
57061	Destruction of vaginal lesion(s); simple (eg, laser surgery, electrosurgery, cryosurgery, chemosurgery)	1
57065	Destruction of vaginal lesion(s); extensive (eg, laser surgery, electrosurgery, cryosurgery, chemosurgery)	1
57100	Biopsy of vaginal mucosa; simple (separate procedure)	1
57105	Biopsy of vaginal mucosa; extensive, requiring suture (including cysts)	1
57106	Vaginectomy, partial removal of vaginal wall	1
57107	Vaginectomy, partial removal of vaginal wall; with removal of paravaginal tissue (radical vaginectomy)	1
57109	Vaginectomy, partial removal of vaginal wall; with removal of paravaginal tissue (radical vaginectomy) with bilateral total pelvic lymphadenectomy and para-aortic lymph node sampling (biopsy)	1
57110	Vaginectomy, complete removal of vaginal wall	1
57111	Vaginectomy, complete removal of vaginal wall; with removal of paravaginal tissue (radical vaginectomy)	1
57120	Colpocleisis (Le Fort type)	1
57130	Excision of vaginal septum	1
57135	Excision of vaginal cyst or tumor	1
57150	Irrigation of vagina and/or application of medicament for treatment of bacterial, parasitic, or fungoid disease	1
57155	Insertion of uterine tandem and/or vaginal ovoids for clinical brachytherapy	1
57156	Insertion of a vaginal radiation afterloading apparatus for clinical brachytherapy	1
57160	Fitting and insertion of pessary or other intravaginal support device	1
57170	Diaphragm or cervical cap fitting with instructions	1
57180	Introduction of any hemostatic agent or pack for spontaneous or traumatic nonobstetrical vaginal hemorrhage (separate procedure)	1
57200	Colporrhaphy, suture of injury of vagina (nonobstetrical)	1
57210	Colpoperineorrhaphy, suture of injury of vagina and/or perineum (nonobstetrical)	1
57220	Plastic operation on urethral sphincter, vaginal approach (eg, Kelly urethral plication)	1
57230	Plastic repair of urethrocele	1
57240	Anterior colporrhaphy, repair of cystocele with or without repair of urethrocele, including cystourethroscopy, when performed	1
57250	Posterior colporrhaphy, repair of rectocele with or without perineorrhaphy	1

57260	Combined anteroposterior colporrhaphy, including cystourethroscopy, when performed	1
57265	Combined anteroposterior colporrhaphy, including cystourethroscopy, when performed; with enterocele repair	1
57267	Insertion of mesh or other prosthesis for repair of pelvic floor defect, each site (anterior, posterior compartment), vaginal approach (List separately in addition to code for primary procedure)	1
57268	Repair of enterocele, vaginal approach (separate procedure)	1
57270	Repair of enterocele, abdominal approach (separate procedure)	1
57280	Colpopexy, abdominal approach	1
57282	Colpopexy, vaginal; extra-peritoneal approach (sacrospinous, iliococcygeus)	1
57283	Colpopexy, vaginal; intra-peritoneal approach (uterosacral, levator myorrhaphy)	1
57284	Paravaginal defect repair (including repair of cystocele, if performed); open abdominal approach	1
57285	Paravaginal defect repair (including repair of cystocele, if performed); vaginal approach	1
57287	Removal or revision of sling for stress incontinence (eg, fascia or synthetic)	1
57288	Sling operation for stress incontinence (eg, fascia or synthetic)	1
57289	Pereyra procedure, including anterior colporrhaphy	1
57291	Construction of artificial vagina; without graft	1
57292	Construction of artificial vagina; with graft	1
57295	Revision (including removal) of prosthetic vaginal graft; vaginal approach	1
57300	Closure of rectovaginal fistula; vaginal or transanal approach	1
57305	Closure of rectovaginal fistula; abdominal approach	1
57307	Closure of rectovaginal fistula; abdominal approach, with concomitant colostomy	1
57308	Closure of rectovaginal fistula; transperineal approach, with perineal body reconstruction, with or without levator plication	1
57310	Closure of urethrovaginal fistula	1
57311	Closure of urethrovaginal fistula; with bulbocavernosus transplant	1
57320	Closure of vesicovaginal fistula; vaginal approach	1
57330	Closure of vesicovaginal fistula; transvesical and vaginal approach	1
57335	Vaginoplasty for intersex state	1
57400	Dilation of vagina under anesthesia (other than local)	1
57410	Pelvic examination under anesthesia (other than local)	1
57415	Removal of impacted vaginal foreign body (separate procedure) under anesthesia (other than local)	1
57420	Colposcopy of the entire vagina, with cervix if present	1

57421	Colposcopy of the entire vagina, with cervix if present; with biopsy(s) of vagina/cervix	1
57423	Paravaginal defect repair (including repair of cystocele, if performed), laparoscopic approach	1
57425	Laparoscopy, surgical, colpopexy (suspension of vaginal apex)	1
57426	Revision (including removal) of prosthetic vaginal graft, laparoscopic approach	1
57452	Colposcopy of the cervix including upper/adjacent vagina	1
57454	Colposcopy of the cervix including upper/adjacent vagina; with biopsy(s) of the cervix and endocervical curettage	1
57455	Colposcopy of the cervix including upper/adjacent vagina; with biopsy(s) of the cervix	1
57456	Colposcopy of the cervix including upper/adjacent vagina; with endocervical curettage	1
57460	Colposcopy of the cervix including upper/adjacent vagina; with loop electrode biopsy(s) of the cervix	1
57461	Colposcopy of the cervix including upper/adjacent vagina; with loop electrode conization of the cervix	1
57465	Computer-aided mapping of cervix uteri during colposcopy, including optical dynamic spectral imaging and algorithmic quantification of the acetowhitening effect (List separately in addition to code for primary procedure)	1
57500	Biopsy of cervix, single or multiple, or local excision of lesion, with or without fulguration (separate procedure)	1
57505	Endocervical curettage (not done as part of a dilation and curettage)	1
57510	Cautery of cervix; electro or thermal	1
57511	Cautery of cervix; cryocautery, initial or repeat	1
57513	Cautery of cervix; laser ablation	1
57520	Conization of cervix, with or without fulguration, with or without dilation and curettage, with or without repair; cold knife or laser	1
57522	Conization of cervix, with or without fulguration, with or without dilation and curettage, with or without repair; loop electrode excision	1
57530	Trachelectomy (cervicectomy), amputation of cervix (separate procedure)	1
57531	Radical trachelectomy, with bilateral total pelvic lymphadenectomy and para-aortic lymph node sampling biopsy, with or without removal of tube(s), with or without removal of ovary(s)	1
57540	Excision of cervical stump, abdominal approach	1
57545	Excision of cervical stump, abdominal approach; with pelvic floor repair	1
57550	Excision of cervical stump, vaginal approach	1
57555	Excision of cervical stump, vaginal approach; with anterior and/or posterior repair	1
57556	Excision of cervical stump, vaginal approach; with repair of enterocele	1

57700	Cerclage of uterine cervix, nonobstetrical	1
57720	Trachelorrhaphy, plastic repair of uterine cervix, vaginal approach	1
57800	Dilation of cervical canal, instrumental (separate procedure)	1
58100	Endometrial sampling (biopsy) with or without endocervical sampling (biopsy), without cervical dilation, any method (separate procedure)	1
58110	Endometrial sampling (biopsy) performed in conjunction with colposcopy (List separately in addition to code for primary procedure)	1
58120	Dilation and curettage, diagnostic and/or therapeutic (nonobstetrical)	1
58140	Myomectomy, excision of fibroid tumor(s) of uterus, 1 to 4 intramural myoma(s) with total weight of 250 g or less and/or removal of surface myomas; abdominal approach	1
58145	Myomectomy, excision of fibroid tumor(s) of uterus, 1 to 4 intramural myoma(s) with total weight of 250 g or less and/or removal of surface myomas; vaginal approach	1
58146	Myomectomy, excision of fibroid tumor(s) of uterus, 5 or more intramural myomas and/or intramural myomas with total weight greater than 250 g, abdominal approach	1
58150	Total abdominal hysterectomy (corpus and cervix), with or without removal of tube(s), with or without removal of ovary(s)	1
58152	Total abdominal hysterectomy (corpus and cervix), with or without removal of tube(s), with or without removal of ovary(s); with colpo-urethrocystopexy (eg, Marshall-Marchetti-Krantz, Burch)	1
58180	Supracervical abdominal hysterectomy (subtotal hysterectomy), with or without removal of tube(s), with or without removal of ovary(s)	1
58200	Total abdominal hysterectomy, including partial vaginectomy, with para-aortic and pelvic lymph node sampling, with or without removal of tube(s), with or without removal of ovary(s)	1
58210	Radical abdominal hysterectomy, with bilateral total pelvic lymphadenectomy and para-aortic lymph node sampling (biopsy), with or without removal of tube(s), with or without removal of ovary(s)	1
58240	Pelvic exenteration for gynecologic malignancy, with total abdominal hysterectomy or cervicectomy, with or without removal of tube(s), with or without removal of ovary(s), with removal of bladder and ureteral transplantations, and/or abdominoperineal resection of rectum and colon and colostomy, or any combination thereof	1
58260	Vaginal hysterectomy, for uterus 250 g or less	1
58262	Vaginal hysterectomy, for uterus 250 g or less; with removal of tube(s), and/or ovary(s)	1
58263	Vaginal hysterectomy, for uterus 250 g or less; with removal of tube(s), and/or ovary(s), with repair of enterocele	1
58267	Vaginal hysterectomy, for uterus 250 g or less; with colpo-urethrocystopexy (Marshall-Marchetti-Krantz type, Pereyra type) with or without endoscopic control	1

58270	Vaginal hysterectomy, for uterus 250 g or less; with repair of enterocele	1
58275	Vaginal hysterectomy, with total or partial vaginectomy	1
58280	Vaginal hysterectomy, with total or partial vaginectomy; with repair of enterocele	1
58285	Vaginal hysterectomy, radical (Schauta type operation)	1
58290	Vaginal hysterectomy, for uterus greater than 250 g	1
58291	Vaginal hysterectomy, for uterus greater than 250 g; with removal of tube(s) and/or ovary(s)	1
58292	Vaginal hysterectomy, for uterus greater than 250 g; with removal of tube(s) and/or ovary(s), with repair of enterocele	1
58294	Vaginal hysterectomy, for uterus greater than 250 g; with repair of enterocele	1
58300	Insertion of intrauterine device (IUD)	1
58301	Removal of intrauterine device (IUD)	1
58321	Artificial insemination; intra-cervical	1
58322	Artificial insemination; intra-uterine	1
58323	Sperm washing for artificial insemination	1
58340	Catheterization and introduction of saline or contrast material for saline infusion sonohysterography (SIS) or hysterosalpingography	1
58345	Transcervical introduction of fallopian tube catheter for diagnosis and/or reestablishing patency (any method), with or without hysterosalpingography	1
58346	Insertion of Heyman capsules for clinical brachytherapy	1
58350	Chromotubation of oviduct, including materials	1
58353	Endometrial ablation, thermal, without hysteroscopic guidance	1
58356	Endometrial cryoablation with ultrasonic guidance, including endometrial curettage, when performed	1
58400	Uterine suspension, with or without shortening of round ligaments, with or without shortening of sacrouterine ligaments; (separate procedure)	1
58410	Uterine suspension, with or without shortening of round ligaments, with or without shortening of sacrouterine ligaments; with presacral sympathectomy	1
58520	Hysterorrhaphy, repair of ruptured uterus (nonobstetrical)	1
58540	Hysteroplasty, repair of uterine anomaly (Strassman type)	1
58541	Laparoscopy, surgical, supracervical hysterectomy, for uterus 250 g or less	1
58542	Laparoscopy, surgical, supracervical hysterectomy, for uterus 250 g or less; with removal of tube(s) and/or ovary(s)	1
58543	Laparoscopy, surgical, supracervical hysterectomy, for uterus greater than 250 g	1
58544	Laparoscopy, surgical, supracervical hysterectomy, for uterus greater than 250 g; with removal of tube(s) and/or ovary(s)	1
58545	Laparoscopy, surgical, myomectomy, excision; 1 to 4 intramural myomas with total weight of 250 g or less and/or removal of surface myomas	1

58546	Laparoscopy, surgical, myomectomy, excision; 5 or more intramural myomas and/or intramural myomas with total weight greater than 250 g	1
58548	Laparoscopy, surgical, with radical hysterectomy, with bilateral total pelvic lymphadenectomy and para-aortic lymph node sampling (biopsy), with removal of tube(s) and ovary(s), if performed	1
58550	Laparoscopy, surgical, with vaginal hysterectomy, for uterus 250 g or less	1
58552	Laparoscopy, surgical, with vaginal hysterectomy, for uterus 250 g or less; with removal of tube(s) and/or ovary(s)	1
58553	Laparoscopy, surgical, with vaginal hysterectomy, for uterus greater than 250 g	1
58554	Laparoscopy, surgical, with vaginal hysterectomy, for uterus greater than 250 g; with removal of tube(s) and/or ovary(s)	1
58555	Hysteroscopy, diagnostic (separate procedure)	1
58558	Hysteroscopy, surgical; with sampling (biopsy) of endometrium and/or polypectomy, with or without D & C	1
58559	Hysteroscopy, surgical; with lysis of intrauterine adhesions (any method)	1
58560	Hysteroscopy, surgical; with division or resection of intrauterine septum (any method)	1
58561	Hysteroscopy, surgical; with removal of leiomyomata	1
58562	Hysteroscopy, surgical; with removal of impacted foreign body	1
58563	Hysteroscopy, surgical; with endometrial ablation (eg, endometrial resection, electrosurgical ablation, thermoablation)	1
58565	Hysteroscopy, surgical; with bilateral fallopian tube cannulation to induce occlusion by placement of permanent implants	1
58570	Laparoscopy, surgical, with total hysterectomy, for uterus 250 g or less	1
58571	Laparoscopy, surgical, with total hysterectomy, for uterus 250 g or less; with removal of tube(s) and/or ovary(s)	1
58572	Laparoscopy, surgical, with total hysterectomy, for uterus greater than 250 g	1
58573	Laparoscopy, surgical, with total hysterectomy, for uterus greater than 250 g; with removal of tube(s) and/or ovary(s)	1
58575	Laparoscopy, surgical, total hysterectomy for resection of malignancy (tumor debulking), with omentectomy including salpingo-oophorectomy, unilateral or bilateral, when performed	1
58578	Unlisted laparoscopy procedure, uterus	1
58579	Unlisted hysteroscopy procedure, uterus	1
58600	Ligation or transection of fallopian tube(s), abdominal or vaginal approach, unilateral or bilateral	2
58605	Ligation or transection of fallopian tube(s), abdominal or vaginal approach, postpartum, unilateral or bilateral, during same hospitalization (separate procedure)	1

58611	Ligation or transection of fallopian tube(s) when done at the time of cesarean delivery or intra-abdominal surgery (not a separate procedure) (List separately in addition to code for primary procedure)	1
58615	Occlusion of fallopian tube(s) by device (eg, band, clip, Falope ring) vaginal or suprapubic approach	1
58660	Laparoscopy, surgical; with lysis of adhesions (salpingolysis, ovariolysis) (separate procedure)	1
58661	Laparoscopy, surgical; with removal of adnexal structures (partial or total oophorectomy and/or salpingectomy)	1
58662	Laparoscopy, surgical; with fulguration or excision of lesions of the ovary, pelvic viscera, or peritoneal surface by any method	1
58670	Laparoscopy, surgical; with fulguration of oviducts (with or without transection)	1
58671	Laparoscopy, surgical; with occlusion of oviducts by device (eg, band, clip, or Falope ring)	1
58672	Laparoscopy, surgical; with fimbrioplasty	1
58673	Laparoscopy, surgical; with salpingostomy (salpingoneostomy)	1
58674	Laparoscopy, surgical, ablation of uterine fibroid(s) including intraoperative ultrasound guidance and monitoring, radiofrequency	1
58679	Unlisted laparoscopy procedure, oviduct, ovary	1
58700	Salpingectomy, complete or partial, unilateral or bilateral (separate procedure)	1
58720	Salpingo-oophorectomy, complete or partial, unilateral or bilateral (separate procedure)	1
58740	Lysis of adhesions (salpingolysis, ovariolysis)	1
58750	Tubotubal anastomosis	1
58752	Tubouterine implantation	1
58760	Fimbrioplasty	1
58770	Salpingostomy (salpingoneostomy)	1
58800	Drainage of ovarian cyst(s), unilateral or bilateral (separate procedure); vaginal approach	1
58805	Drainage of ovarian cyst(s), unilateral or bilateral (separate procedure); abdominal approach	1
58820	Drainage of ovarian abscess; vaginal approach, open	2
58822	Drainage of ovarian abscess; abdominal approach	2
58825	Transposition, ovary(s)	1
58900	Biopsy of ovary, unilateral or bilateral (separate procedure)	1
58920	Wedge resection or bisection of ovary, unilateral or bilateral	1
58925	Ovarian cystectomy, unilateral or bilateral	1
58940	Oophorectomy, partial or total, unilateral or bilateral	1

58943	Oophorectomy, partial or total, unilateral or bilateral; for ovarian, tubal or primary peritoneal malignancy, with para-aortic and pelvic lymph node biopsies, peritoneal washings, peritoneal biopsies, diaphragmatic assessments, with or without salpingectomy(s), with or without omentectomy	1
58950	Resection (initial) of ovarian, tubal or primary peritoneal malignancy with bilateral salpingo-oophorectomy and omentectomy	1
58951	Resection (initial) of ovarian, tubal or primary peritoneal malignancy with bilateral salpingo-oophorectomy and omentectomy; with total abdominal hysterectomy, pelvic and limited para-aortic lymphadenectomy	1
58952	Resection (initial) of ovarian, tubal or primary peritoneal malignancy with bilateral salpingo-oophorectomy and omentectomy; with radical dissection for debulking (ie, radical excision or destruction, intra-abdominal or retroperitoneal tumors)	1
58953	Bilateral salpingo-oophorectomy with omentectomy, total abdominal hysterectomy and radical dissection for debulking	1
58954	Bilateral salpingo-oophorectomy with omentectomy, total abdominal hysterectomy and radical dissection for debulking; with pelvic lymphadenectomy and limited para-aortic lymphadenectomy	1
58956	Bilateral salpingo-oophorectomy with total omentectomy, total abdominal hysterectomy for malignancy	1
58960	Laparotomy, for staging or restaging of ovarian, tubal, or primary peritoneal malignancy (second look), with or without omentectomy, peritoneal washing, biopsy of abdominal and pelvic peritoneum, diaphragmatic assessment with pelvic and limited para-aortic lymphadenectomy	1
58970	Follicle puncture for oocyte retrieval, any method	1
58974	Embryo transfer, intrauterine	1
58976	Gamete, zygote, or embryo intrafallopian transfer, any method	2
58999	Unlisted procedure, female genital system (nonobstetrical)	1
59000	Amniocentesis; diagnostic	1
59001	Amniocentesis; therapeutic amniotic fluid reduction (includes ultrasound guidance)	1
59012	Cordocentesis (intrauterine), any method	1
59015	Chorionic villus sampling, any method	1
59020	Fetal contraction stress test	1
59030	Fetal scalp blood sampling	2
59050	Fetal monitoring during labor by consulting physician (ie, non-attending physician) with written report; supervision and interpretation	1
59051	Fetal monitoring during labor by consulting physician (ie, non-attending physician) with written report; interpretation only	1
59070	Transabdominal amnioinfusion, including ultrasound guidance	1
59072	Fetal umbilical cord occlusion, including ultrasound guidance	1

59074	Fetal fluid drainage (eg, vesicocentesis, thoracocentesis, paracentesis), including	1
	ultrasound guidance	
59076	Fetal shunt placement, including ultrasound guidance	1
59100	Hysterotomy, abdominal (eg, for hydatidiform mole, abortion)	1
59120	Surgical treatment of ectopic pregnancy; tubal or ovarian, requiring salpingectomy and/or oophorectomy, abdominal or vaginal approach	1
59121	Surgical treatment of ectopic pregnancy; tubal or ovarian, without salpingectomy and/or oophorectomy	1
59130	Surgical treatment of ectopic pregnancy; abdominal pregnancy	1
59135	Surgical treatment of ectopic pregnancy; interstitial, uterine pregnancy requiring total hysterectomy	1
59136	Surgical treatment of ectopic pregnancy; interstitial, uterine pregnancy with partial resection of uterus	1
59140	Surgical treatment of ectopic pregnancy; cervical, with evacuation	1
59150	Laparoscopic treatment of ectopic pregnancy; without salpingectomy and/or oophorectomy	1
59151	Laparoscopic treatment of ectopic pregnancy; with salpingectomy and/or oophorectomy	1
59160	Curettage, postpartum	1
59200	Insertion of cervical dilator (eg, laminaria, prostaglandin) (separate procedure)	1
59300	Episiotomy or vaginal repair, by other than attending	1
59320	Cerclage of cervix, during pregnancy; vaginal	1
59325	Cerclage of cervix, during pregnancy; abdominal	1
59350	Hysterorrhaphy of ruptured uterus	1
59400	Routine obstetric care including antepartum care, vaginal delivery (with or without episiotomy, and/or forceps) and postpartum care	1
59409	Vaginal delivery only (with or without episiotomy and/or forceps)	1
59410	Vaginal delivery only (with or without episiotomy and/or forceps); including postpartum care	1
59412	External cephalic version, with or without tocolysis	2
59414	Delivery of placenta (separate procedure)	1
59425	Antepartum care only; 4-6 visits	1
59426	Antepartum care only; 7 or more visits	1
59430	Postpartum care only (separate procedure)	1
59510	Routine obstetric care including antepartum care, cesarean delivery, and postpartum care	1
59514	Cesarean delivery only	1
59515	Cesarean delivery only; including postpartum care	1

59525	Subtotal or total hysterectomy after cesarean delivery (List separately in addition to code for primary procedure)	1
59610	Routine obstetric care including antepartum care, vaginal delivery (with or without episiotomy, and/or forceps) and postpartum care, after previous cesarean delivery	1
59612	Vaginal delivery only, after previous cesarean delivery (with or without episiotomy and/or forceps)	1
59614	Vaginal delivery only, after previous cesarean delivery (with or without episiotomy and/or forceps); including postpartum care	1
59618	Routine obstetric care including antepartum care, cesarean delivery, and postpartum care, following attempted vaginal delivery after previous cesarean delivery	1
59620	Cesarean delivery only, following attempted vaginal delivery after previous cesarean delivery	1
59622	Cesarean delivery only, following attempted vaginal delivery after previous cesarean delivery; including postpartum care	1
59812	Treatment of incomplete abortion, any trimester, completed surgically	1
59821	Treatment of missed abortion, completed surgically; second trimester	1
59830	Treatment of septic abortion, completed surgically	1
59840	Induced abortion, by dilation and curettage	1
59841	Induced abortion, by dilation and evacuation	1
59850	Induced abortion, by 1 or more intra-amniotic injections (amniocentesis-injections), including hospital admission and visits, delivery of fetus and secundines	1
59851	Induced abortion, by 1 or more intra-amniotic injections (amniocentesis-injections), including hospital admission and visits, delivery of fetus and secundines; with dilation and curettage and/or evacuation	1
59852	Induced abortion, by 1 or more intra-amniotic injections (amniocentesis-injections), including hospital admission and visits, delivery of fetus and secundines; with hysterotomy (failed intra-amniotic injection)	1
59855	Induced abortion, by 1 or more vaginal suppositories (eg, prostaglandin) with or without cervical dilation (eg, laminaria), including hospital admission and visits, delivery of fetus and secundines	1
59856	Induced abortion, by 1 or more vaginal suppositories (eg, prostaglandin) with or without cervical dilation (eg, laminaria), including hospital admission and visits, delivery of fetus and secundines; with dilation and curettage and/or evacuation	1
59857	Induced abortion, by 1 or more vaginal suppositories (eg, prostaglandin) with or without cervical dilation (eg, laminaria), including hospital admission and visits, delivery of fetus and secundines; with hysterotomy (failed medical evacuation)	1
59866	Multifetal pregnancy reduction(s) (MPR)	1
59870	Uterine evacuation and curettage for hydatidiform mole	1
59871	Removal of cerclage suture under anesthesia (other than local)	1
59897	Unlisted fetal invasive procedure, including ultrasound guidance, when performed	1

59898	Unlisted laparoscopy procedure, maternity care and delivery	1
59899	Unlisted procedure, maternity care and delivery	1
60000	Incision and drainage of thyroglossal duct cyst, infected	1
60100	Biopsy thyroid, percutaneous core needle	1
60200	Excision of cyst or adenoma of thyroid, or transection of isthmus	1
60210	Partial thyroid lobectomy, unilateral; with or without isthmusectomy	1
60212	Partial thyroid lobectomy, unilateral; with contralateral subtotal lobectomy, including isthmusectomy	1
60220	Total thyroid lobectomy, unilateral; with or without isthmusectomy	1
60225	Total thyroid lobectomy, unilateral; with contralateral subtotal lobectomy, including isthmusectomy	1
60240	Thyroidectomy, total or complete	1
60252	Thyroidectomy, total or subtotal for malignancy; with limited neck dissection	1
60254	Thyroidectomy, total or subtotal for malignancy; with radical neck dissection	1
60260	Thyroidectomy, removal of all remaining thyroid tissue following previous removal of a portion of thyroid	1
60270	Thyroidectomy, including substernal thyroid; sternal split or transthoracic approach	1
60271	Thyroidectomy, including substernal thyroid; cervical approach	1
60280	Excision of thyroglossal duct cyst or sinus	1
60281	Excision of thyroglossal duct cyst or sinus; recurrent	1
60300	Aspiration and/or injection, thyroid cyst	1
60500	Parathyroidectomy or exploration of parathyroid(s)	1
60502	Parathyroidectomy or exploration of parathyroid(s); re-exploration	1
60505	Parathyroidectomy or exploration of parathyroid(s); with mediastinal exploration, sternal split or transthoracic approach	1
60512	Parathyroid autotransplantation (List separately in addition to code for primary procedure)	1
60520	Thymectomy, partial or total; transcervical approach (separate procedure)	1
60521	Thymectomy, partial or total; sternal split or transthoracic approach, without radical mediastinal dissection (separate procedure)	1
60522	Thymectomy, partial or total; sternal split or transthoracic approach, with radical mediastinal dissection (separate procedure)	1
60540	Adrenalectomy, partial or complete, or exploration of adrenal gland with or without biopsy, transabdominal, lumbar or dorsal (separate procedure)	2
60545	Adrenalectomy, partial or complete, or exploration of adrenal gland with or without biopsy, transabdominal, lumbar or dorsal (separate procedure); with excision of adjacent retroperitoneal tumor	2
60600	Excision of carotid body tumor; without excision of carotid artery	1

60605	Excision of carotid body tumor; with excision of carotid artery	1
60650	Laparoscopy, surgical, with adrenalectomy, partial or complete, or exploration of adrenal gland with or without biopsy, transabdominal, lumbar or dorsal	2
60659	Unlisted laparoscopy procedure, endocrine system	1
60699	Unlisted procedure, endocrine system	1
61000	Subdural tap through fontanelle, or suture, infant, unilateral or bilateral; initial	1
61001	Subdural tap through fontanelle, or suture, infant, unilateral or bilateral; subsequent taps	1
61020	Ventricular puncture through previous burr hole, fontanelle, suture, or implanted ventricular catheter/reservoir; without injection	1
61026	Ventricular puncture through previous burr hole, fontanelle, suture, or implanted ventricular catheter/reservoir; with injection of medication or other substance for diagnosis or treatment	1
61050	Cisternal or lateral cervical (C1-C2) puncture; without injection (separate procedure)	1
61055	Cisternal or lateral cervical (C1-C2) puncture; with injection of medication or other substance for diagnosis or treatment	1
61070	Puncture of shunt tubing or reservoir for aspiration or injection procedure	1
61105	Twist drill hole for subdural or ventricular puncture	1
61107	Twist drill hole(s) for subdural, intracerebral, or ventricular puncture; for implanting ventricular catheter, pressure recording device, or other intracerebral monitoring device	1
61108	Twist drill hole(s) for subdural, intracerebral, or ventricular puncture; for evacuation and/or drainage of subdural hematoma	1
61120	Burr hole(s) for ventricular puncture (including injection of gas, contrast media, dye, or radioactive material)	1
61140	Burr hole(s) or trephine; with biopsy of brain or intracranial lesion	1
61150	Burr hole(s) or trephine; with drainage of brain abscess or cyst	1
61151	Burr hole(s) or trephine; with subsequent tapping (aspiration) of intracranial abscess or cyst	1
61154	Burr hole(s) with evacuation and/or drainage of hematoma, extradural or subdural	2
61156	Burr hole(s); with aspiration of hematoma or cyst, intracerebral	1
61210	Burr hole(s); for implanting ventricular catheter, reservoir, EEG electrode(s), pressure recording device, or other cerebral monitoring device (separate procedure)	1
61215	Insertion of subcutaneous reservoir, pump or continuous infusion system for connection to ventricular catheter	1
61250	Burr hole(s) or trephine, supratentorial, exploratory, not followed by other surgery	1
61253	Burr hole(s) or trephine, infratentorial, unilateral or bilateral	1
61304	Craniectomy or craniotomy, exploratory; supratentorial	1
61305	Craniectomy or craniotomy, exploratory; infratentorial (posterior fossa)	1

61312	Craniectomy or craniotomy for evacuation of hematoma, supratentorial; extradural or subdural	1
61313	Craniectomy or craniotomy for evacuation of hematoma, supratentorial; intracerebral	1
61314	Craniectomy or craniotomy for evacuation of hematoma, infratentorial; extradural or subdural	1
61315	Craniectomy or craniotomy for evacuation of hematoma, infratentorial; intracerebellar	1
61316	Incision and subcutaneous placement of cranial bone graft (List separately in addition to code for primary procedure)	1
61320	Craniectomy or craniotomy, drainage of intracranial abscess; supratentorial	1
61321	Craniectomy or craniotomy, drainage of intracranial abscess; infratentorial	1
61322	Craniectomy or craniotomy, decompressive, with or without duraplasty, for treatment of intracranial hypertension, without evacuation of associated intraparenchymal hematoma; without lobectomy	1
61323	Craniectomy or craniotomy, decompressive, with or without duraplasty, for treatment of intracranial hypertension, without evacuation of associated intraparenchymal hematoma; with lobectomy	1
61330	Decompression of orbit only, transcranial approach	1
61333	Exploration of orbit (transcranial approach), with removal of lesion	1
61340	Subtemporal cranial decompression (pseudotumor cerebri, slit ventricle syndrome)	2
61343	Craniectomy, suboccipital with cervical laminectomy for decompression of medulla and spinal cord, with or without dural graft (eg, Arnold-Chiari malformation)	1
61345	Other cranial decompression, posterior fossa	1
61450	Craniectomy, subtemporal, for section, compression, or decompression of sensory root of gasserian ganglion	1
61458	Craniectomy, suboccipital; for exploration or decompression of cranial nerves	1
61460	Craniectomy, suboccipital; for section of 1 or more cranial nerves	1
61500	Craniectomy; with excision of tumor or other bone lesion of skull	1
61501	Craniectomy; for osteomyelitis	1
61510	Craniectomy, trephination, bone flap craniotomy; for excision of brain tumor, supratentorial, except meningioma	1
61512	Craniectomy, trephination, bone flap craniotomy; for excision of meningioma, supratentorial	1
61514	Craniectomy, trephination, bone flap craniotomy; for excision of brain abscess, supratentorial	1
61516	Craniectomy, trephination, bone flap craniotomy; for excision or fenestration of cyst, supratentorial	1
61517	Implantation of brain intracavitary chemotherapy agent (List separately in addition to code for primary procedure)	1

61518	Craniectomy for excision of brain tumor, infratentorial or posterior fossa; except meningioma, cerebellopontine angle tumor, or midline tumor at base of skull	1
61519	Craniectomy for excision of brain tumor, infratentorial or posterior fossa; meningioma	1
61520	Craniectomy for excision of brain tumor, infratentorial or posterior fossa; cerebellopontine angle tumor	1
61521	Craniectomy for excision of brain tumor, infratentorial or posterior fossa; midline tumor at base of skull	1
61522	Craniectomy, infratentorial or posterior fossa; for excision of brain abscess	1
61524	Craniectomy, infratentorial or posterior fossa; for excision or fenestration of cyst	1
61526	Craniectomy, bone flap craniotomy, transtemporal (mastoid) for excision of cerebellopontine angle tumor	1
61530	Craniectomy, bone flap craniotomy, transtemporal (mastoid) for excision of cerebellopontine angle tumor; combined with middle/posterior fossa craniotomy/craniectomy	1
61531	Subdural implantation of strip electrodes through 1 or more burr or trephine hole(s) for long-term seizure monitoring	1
61533	Craniotomy with elevation of bone flap; for subdural implantation of an electrode array, for long-term seizure monitoring	1
61534	Craniotomy with elevation of bone flap; for excision of epileptogenic focus without electrocorticography during surgery	1
61535	Craniotomy with elevation of bone flap; for removal of epidural or subdural electrode array, without excision of cerebral tissue (separate procedure)	2
61536	Craniotomy with elevation of bone flap; for excision of cerebral epileptogenic focus, with electrocorticography during surgery (includes removal of electrode array)	1
61537	Craniotomy with elevation of bone flap; for lobectomy, temporal lobe, without electrocorticography during surgery	1
61538	Craniotomy with elevation of bone flap; for lobectomy, temporal lobe, with electrocorticography during surgery	1
61539	Craniotomy with elevation of bone flap; for lobectomy, other than temporal lobe, partial or total, with electrocorticography during surgery	1
61540	Craniotomy with elevation of bone flap; for lobectomy, other than temporal lobe, partial or total, without electrocorticography during surgery	1
61541	Craniotomy with elevation of bone flap; for transection of corpus callosum	1
61543	Craniotomy with elevation of bone flap; for partial or subtotal (functional) hemispherectomy	1
61544	Craniotomy with elevation of bone flap; for excision or coagulation of choroid plexus	1
61545	Craniotomy with elevation of bone flap; for excision of craniopharyngioma	1
61546	Craniotomy for hypophysectomy or excision of pituitary tumor, intracranial approach	1

61548	Hypophysectomy or excision of pituitary tumor, transnasal or transseptal approach, nonstereotactic	1
61550	Craniectomy for craniosynostosis; single cranial suture	1
61552	Craniectomy for craniosynostosis; multiple cranial sutures	1
61556	Craniotomy for craniosynostosis; frontal or parietal bone flap	1
61557	Craniotomy for craniosynostosis; bifrontal bone flap	1
61558	Extensive craniectomy for multiple cranial suture craniosynostosis (eg, cloverleaf skull); not requiring bone grafts	1
61559	Extensive craniectomy for multiple cranial suture craniosynostosis (eg, cloverleaf skull); recontouring with multiple osteotomies and bone autografts (eg, barrel-stave procedure) (includes obtaining grafts)	1
61563	Excision, intra and extracranial, benign tumor of cranial bone (eg, fibrous dysplasia); without optic nerve decompression	1
61564	Excision, intra and extracranial, benign tumor of cranial bone (eg, fibrous dysplasia); with optic nerve decompression	1
61566	Craniotomy with elevation of bone flap; for selective amygdalohippocampectomy	1
61567	Craniotomy with elevation of bone flap; for multiple subpial transections, with electrocorticography during surgery	1
61570	Craniectomy or craniotomy; with excision of foreign body from brain	1
61571	Craniectomy or craniotomy; with treatment of penetrating wound of brain	1
61575	Transoral approach to skull base, brain stem or upper spinal cord for biopsy, decompression or excision of lesion	1
61576	Transoral approach to skull base, brain stem or upper spinal cord for biopsy, decompression or excision of lesion; requiring splitting of tongue and/or mandible (including tracheostomy)	1
61580	Craniofacial approach to anterior cranial fossa; extradural, including lateral rhinotomy, ethmoidectomy, sphenoidectomy, without maxillectomy or orbital exenteration	1
61581	Craniofacial approach to anterior cranial fossa; extradural, including lateral rhinotomy, orbital exenteration, ethmoidectomy, sphenoidectomy and/or maxillectomy	1
61582	Craniofacial approach to anterior cranial fossa; extradural, including unilateral or bifrontal craniotomy, elevation of frontal lobe(s), osteotomy of base of anterior cranial fossa	1
61583	Craniofacial approach to anterior cranial fossa; intradural, including unilateral or bifrontal craniotomy, elevation or resection of frontal lobe, osteotomy of base of anterior cranial fossa	1
61584	Orbitocranial approach to anterior cranial fossa, extradural, including supraorbital ridge osteotomy and elevation of frontal and/or temporal lobe(s); without orbital exenteration	1

61585	Orbitocranial approach to anterior cranial fossa, extradural, including supraorbital ridge osteotomy and elevation of frontal and/or temporal lobe(s); with orbital exenteration	1
61586	Bicoronal, transzygomatic and/or LeFort I osteotomy approach to anterior cranial fossa with or without internal fixation, without bone graft	1
61590	Infratemporal pre-auricular approach to middle cranial fossa (parapharyngeal space, infratemporal and midline skull base, nasopharynx), with or without disarticulation of the mandible, including parotidectomy, craniotomy, decompression and/or mobilization of the facial nerve and/or petrous carotid artery	1
61591	Infratemporal post-auricular approach to middle cranial fossa (internal auditory meatus, petrous apex, tentorium, cavernous sinus, parasellar area, infratemporal fossa) including mastoidectomy, resection of sigmoid sinus, with or without decompression and/or mobilization of contents of auditory canal or petrous carotid artery	1
61592	Orbitocranial zygomatic approach to middle cranial fossa (cavernous sinus and carotid artery, clivus, basilar artery or petrous apex) including osteotomy of zygoma, craniotomy, extra- or intradural elevation of temporal lobe	1
61595	Transtemporal approach to posterior cranial fossa, jugular foramen or midline skull base, including mastoidectomy, decompression of sigmoid sinus and/or facial nerve, with or without mobilization	1
61596	Transcochlear approach to posterior cranial fossa, jugular foramen or midline skull base, including labyrinthectomy, decompression, with or without mobilization of facial nerve and/or petrous carotid artery	1
61597	Transcondylar (far lateral) approach to posterior cranial fossa, jugular foramen or midline skull base, including occipital condylectomy, mastoidectomy, resection of C1-C3 vertebral body(s), decompression of vertebral artery, with or without mobilization	1
61598	Transpetrosal approach to posterior cranial fossa, clivus or foramen magnum, including ligation of superior petrosal sinus and/or sigmoid sinus	1
61600	Resection or excision of neoplastic, vascular or infectious lesion of base of anterior cranial fossa; extradural	1
61601	Resection or excision of neoplastic, vascular or infectious lesion of base of anterior cranial fossa; intradural, including dural repair, with or without graft	1
61605	Resection or excision of neoplastic, vascular or infectious lesion of infratemporal fossa, parapharyngeal space, petrous apex; extradural	1
61606	Resection or excision of neoplastic, vascular or infectious lesion of infratemporal fossa, parapharyngeal space, petrous apex; intradural, including dural repair, with or without graft	1
61607	Resection or excision of neoplastic, vascular or infectious lesion of parasellar area, cavernous sinus, clivus or midline skull base; extradural	1
61608	Resection or excision of neoplastic, vascular or infectious lesion of parasellar area, cavernous sinus, clivus or midline skull base; intradural, including dural repair, with or without graft	1

61611	Transection or ligation, carotid artery in petrous canal; without repair (List separately in addition to code for primary procedure)	1
61613	Obliteration of carotid aneurysm, arteriovenous malformation, or carotid-cavernous fistula by dissection within cavernous sinus	1
61615	Resection or excision of neoplastic, vascular or infectious lesion of base of posterior cranial fossa, jugular foramen, foramen magnum, or C1-C3 vertebral bodies; extradural	1
61616	Resection or excision of neoplastic, vascular or infectious lesion of base of posterior cranial fossa, jugular foramen, foramen magnum, or C1-C3 vertebral bodies; intradural, including dural repair, with or without graft	1
61618	Secondary repair of dura for cerebrospinal fluid leak, anterior, middle or posterior cranial fossa following surgery of the skull base; by free tissue graft (eg, pericranium, fascia, tensor fascia lata, adipose tissue, homologous or synthetic grafts)	1
61619	Secondary repair of dura for cerebrospinal fluid leak, anterior, middle or posterior cranial fossa following surgery of the skull base; by local or regionalized vascularized pedicle flap or myocutaneous flap (including galea, temporalis, frontalis or occipitalis muscle)	1
61623	Endovascular temporary balloon arterial occlusion, head or neck (extracranial/intracranial) including selective catheterization of vessel to be occluded, positioning and inflation of occlusion balloon, concomitant neurological monitoring, and radiologic supervision and interpretation of all angiography required for balloon occlusion and to exclude vascular injury post occlusion	1
61624	Transcatheter permanent occlusion or embolization (eg, for tumor destruction, to achieve hemostasis, to occlude a vascular malformation), percutaneous, any method; central nervous system (intracranial, spinal cord)	1
61626	Transcatheter permanent occlusion or embolization (eg, for tumor destruction, to achieve hemostasis, to occlude a vascular malformation), percutaneous, any method; non-central nervous system, head or neck (extracranial, brachiocephalic branch)	1
61630	Balloon angioplasty, intracranial (eg, atherosclerotic stenosis), percutaneous	1
61635	Transcatheter placement of intravascular stent(s), intracranial (eg, atherosclerotic stenosis), including balloon angioplasty, if performed	2
61640	Balloon dilatation of intracranial vasospasm, percutaneous; initial vessel	1
61641	Balloon dilatation of intracranial vasospasm, percutaneous; each additional vessel in same vascular territory (List separately in addition to code for primary procedure)	1
61642	Balloon dilatation of intracranial vasospasm, percutaneous; each additional vessel in different vascular territory (List separately in addition to code for primary procedure)	1
61645	Percutaneous arterial transluminal mechanical thrombectomy and/or infusion for thrombolysis, intracranial, any method, including diagnostic angiography, fluoroscopic guidance, catheter placement, and intraprocedural pharmacological thrombolytic injection(s)	1

61650	Endovascular intracranial prolonged administration of pharmacologic agent(s) other than for thrombolysis, arterial, including catheter placement, diagnostic angiography, and imaging guidance; initial vascular territory	1
61651	Endovascular intracranial prolonged administration of pharmacologic agent(s) other than for thrombolysis, arterial, including catheter placement, diagnostic angiography, and imaging guidance; each additional vascular territory (List separately in addition to code for primary procedure)	1
61680	Surgery of intracranial arteriovenous malformation; supratentorial, simple	1
61682	Surgery of intracranial arteriovenous malformation; supratentorial, complex	1
61684	Surgery of intracranial arteriovenous malformation; infratentorial, simple	1
61686	Surgery of intracranial arteriovenous malformation; infratentorial, complex	1
61690	Surgery of intracranial arteriovenous malformation; dural, simple	1
61692	Surgery of intracranial arteriovenous malformation; dural, complex	1
61697	Surgery of complex intracranial aneurysm, intracranial approach; carotid circulation	1
61698	Surgery of complex intracranial aneurysm, intracranial approach; vertebrobasilar circulation	1
61700	Surgery of simple intracranial aneurysm, intracranial approach; carotid circulation	1
61702	Surgery of simple intracranial aneurysm, intracranial approach; vertebrobasilar circulation	1
61703	Surgery of intracranial aneurysm, cervical approach by application of occluding clamp to cervical carotid artery (Selverstone-Crutchfield type)	1
61705	Surgery of aneurysm, vascular malformation or carotid-cavernous fistula; by intracranial and cervical occlusion of carotid artery	1
61708	Surgery of aneurysm, vascular malformation or carotid-cavernous fistula; by intracranial electrothrombosis	1
61710	Surgery of aneurysm, vascular malformation or carotid-cavernous fistula; by intra- arterial embolization, injection procedure, or balloon catheter	1
61711	Anastomosis, arterial, extracranial-intracranial (eg, middle cerebral/cortical) arteries	1
61720	Creation of lesion by stereotactic method, including burr hole(s) and localizing and recording techniques, single or multiple stages; globus pallidus or thalamus	1
61735	Creation of lesion by stereotactic method, including burr hole(s) and localizing and recording techniques, single or multiple stages; subcortical structure(s) other than globus pallidus or thalamus	1
61736	Laser interstitial thermal therapy (LITT) of lesion, intracranial, including burr hole(s), with magnetic resonance imaging guidance, when performed; single trajectory for 1 simple lesion	1
61737	Laser interstitial thermal therapy (LITT) of lesion, intracranial, including burr hole(s), with magnetic resonance imaging guidance, when performed; multiple trajectories for multiple or complex lesion(s)	1

61750	Stereotactic biopsy, aspiration, or excision, including burr hole(s), for intracranial lesion	1
61751	Stereotactic biopsy, aspiration, or excision, including burr hole(s), for intracranial lesion; with computed tomography and/or magnetic resonance guidance	1
61760	Stereotactic implantation of depth electrodes into the cerebrum for long-term seizure monitoring	1
61770	Stereotactic localization, including burr hole(s), with insertion of catheter(s) or probe(s) for placement of radiation source	1
61781	Stereotactic computer-assisted (navigational) procedure; cranial, intradural (List separately in addition to code for primary procedure)	1
61782	Stereotactic computer-assisted (navigational) procedure; cranial, extradural (List separately in addition to code for primary procedure)	1
61783	Stereotactic computer-assisted (navigational) procedure; spinal (List separately in addition to code for primary procedure)	1
61790	Creation of lesion by stereotactic method, percutaneous, by neurolytic agent (eg, alcohol, thermal, electrical, radiofrequency); gasserian ganglion	1
61791	Creation of lesion by stereotactic method, percutaneous, by neurolytic agent (eg, alcohol, thermal, electrical, radiofrequency); trigeminal medullary tract	1
61796	Stereotactic radiosurgery (particle beam, gamma ray, or linear accelerator); 1 simple cranial lesion	1
61797	Stereotactic radiosurgery (particle beam, gamma ray, or linear accelerator); each additional cranial lesion, simple (List separately in addition to code for primary procedure)	1
61798	Stereotactic radiosurgery (particle beam, gamma ray, or linear accelerator); 1 complex cranial lesion	1
61799	Stereotactic radiosurgery (particle beam, gamma ray, or linear accelerator); each additional cranial lesion, complex (List separately in addition to code for primary procedure)	1
61800	Application of stereotactic headframe for stereotactic radiosurgery (List separately in addition to code for primary procedure)	1
61850	Twist drill or burr hole(s) for implantation of neurostimulator electrodes, cortical	1
61860	Craniectomy or craniotomy for implantation of neurostimulator electrodes, cerebral, cortical	1
61863	Twist drill, burr hole, craniotomy, or craniectomy with stereotactic implantation of neurostimulator electrode array in subcortical site (eg, thalamus, globus pallidus, subthalamic nucleus, periventricular, periaqueductal gray), without use of intraoperative microelectrode recording; first array	1
61864	Twist drill, burr hole, craniotomy, or craniectomy with stereotactic implantation of neurostimulator electrode array in subcortical site (eg, thalamus, globus pallidus, subthalamic nucleus, periventricular, periaqueductal gray), without use of intraoperative microelectrode recording; each additional array (List separately in addition to primary procedure)	1

61867	Twist drill, burr hole, craniotomy, or craniectomy with stereotactic implantation of neurostimulator electrode array in subcortical site (eg, thalamus, globus pallidus, subthalamic nucleus, periventricular, periaqueductal gray), with use of intraoperative microelectrode recording; first array	1
61868	Twist drill, burr hole, craniotomy, or craniectomy with stereotactic implantation of neurostimulator electrode array in subcortical site (eg, thalamus, globus pallidus, subthalamic nucleus, periventricular, periaqueductal gray), with use of intraoperative microelectrode recording; each additional array (List separately in addition to primary procedure)	1
61880	Revision or removal of intracranial neurostimulator electrodes	1
61885	Insertion or replacement of cranial neurostimulator pulse generator or receiver, direct or inductive coupling; with connection to a single electrode array	1
61886	Insertion or replacement of cranial neurostimulator pulse generator or receiver, direct or inductive coupling; with connection to 2 or more electrode arrays	1
61888	Revision or removal of cranial neurostimulator pulse generator or receiver	1
62000	Elevation of depressed skull fracture; simple, extradural	1
62005	Elevation of depressed skull fracture; compound or comminuted, extradural	1
62010	Elevation of depressed skull fracture; with repair of dura and/or debridement of brain	1
62100	Craniotomy for repair of dural/cerebrospinal fluid leak, including surgery for rhinorrhea/otorrhea	1
62115	Reduction of craniomegalic skull (eg, treated hydrocephalus); not requiring bone grafts or cranioplasty	1
62117	Reduction of craniomegalic skull (eg, treated hydrocephalus); requiring craniotomy and reconstruction with or without bone graft (includes obtaining grafts)	1
62120	Repair of encephalocele, skull vault, including cranioplasty	1
62121	Craniotomy for repair of encephalocele, skull base	1
62140	Cranioplasty for skull defect; up to 5 cm diameter	1
62141	Cranioplasty for skull defect; larger than 5 cm diameter	1
62142	Removal of bone flap or prosthetic plate of skull	1
62143	Replacement of bone flap or prosthetic plate of skull	1
62145	Cranioplasty for skull defect with reparative brain surgery	1
62146	Cranioplasty with autograft (includes obtaining bone grafts); up to 5 cm diameter	1
62147	Cranioplasty with autograft (includes obtaining bone grafts); larger than 5 cm diameter	1
62148	Incision and retrieval of subcutaneous cranial bone graft for cranioplasty (List separately in addition to code for primary procedure)	1
62160	Neuroendoscopy, intracranial, for placement or replacement of ventricular catheter and attachment to shunt system or external drainage (List separately in addition to code for primary procedure)	1

62161	Neuroendoscopy, intracranial; with dissection of adhesions, fenestration of septum pellucidum or intraventricular cysts (including placement, replacement, or removal of ventricular catheter)	1
62162	Neuroendoscopy, intracranial; with fenestration or excision of colloid cyst, including placement of external ventricular catheter for drainage	1
62164	Neuroendoscopy, intracranial; with excision of brain tumor, including placement of external ventricular catheter for drainage	1
62165	Neuroendoscopy, intracranial; with excision of pituitary tumor, transnasal or trans- sphenoidal approach	1
62180	Ventriculocisternostomy (Torkildsen type operation)	1
62190	Creation of shunt; subarachnoid/subdural-atrial, -jugular, -auricular	1
62192	Creation of shunt; subarachnoid/subdural-peritoneal, -pleural, other terminus	1
62194	Replacement or irrigation, subarachnoid/subdural catheter	1
62200	Ventriculocisternostomy, third ventricle	1
62201	Ventriculocisternostomy, third ventricle; stereotactic, neuroendoscopic method	1
62220	Creation of shunt; ventriculo-atrial, -jugular, -auricular	1
62223	Creation of shunt; ventriculo-peritoneal, -pleural, other terminus	1
62225	Replacement or irrigation, ventricular catheter	1
62230	Replacement or revision of cerebrospinal fluid shunt, obstructed valve, or distal catheter in shunt system	1
62252	Reprogramming of programmable cerebrospinal shunt	2
62256	Removal of complete cerebrospinal fluid shunt system; without replacement	1
62258	Removal of complete cerebrospinal fluid shunt system; with replacement by similar or other shunt at same operation	1
62263	Percutaneous lysis of epidural adhesions using solution injection (eg, hypertonic saline, enzyme) or mechanical means (eg, catheter) including radiologic localization (includes contrast when administered), multiple adhesiolysis sessions; 2 or more days	1
62264	Percutaneous lysis of epidural adhesions using solution injection (eg, hypertonic saline, enzyme) or mechanical means (eg, catheter) including radiologic localization (includes contrast when administered), multiple adhesiolysis sessions; 1 day	1
62267	Percutaneous aspiration within the nucleus pulposus, intervertebral disc, or paravertebral tissue for diagnostic purposes	1
62268	Percutaneous aspiration, spinal cord cyst or syrinx	1
62269	Biopsy of spinal cord, percutaneous needle	2
62270	Spinal puncture, lumbar, diagnostic	1
62272	Spinal puncture, therapeutic, for drainage of cerebrospinal fluid (by needle or catheter)	1
62273	Injection, epidural, of blood or clot patch	1

62280	Injection/infusion of neurolytic substance (eg, alcohol, phenol, iced saline solutions), with or without other therapeutic substance; subarachnoid	1
62281	Injection/infusion of neurolytic substance (eg, alcohol, phenol, iced saline solutions), with or without other therapeutic substance; epidural, cervical or thoracic	1
62282	Injection/infusion of neurolytic substance (eg, alcohol, phenol, iced saline solutions), with or without other therapeutic substance; epidural, lumbar, sacral (caudal)	1
62284	Injection procedure for myelography and/or computed tomography, lumbar	1
62287	Decompression procedure, percutaneous, of nucleus pulposus of intervertebral disc, any method utilizing needle based technique to remove disc material under fluoroscopic imaging or other form of indirect visualization, with discography and/or epidural injection(s) at the treated level(s), when performed, single or multiple levels, lumbar	1
62290	Injection procedure for discography, each level; lumbar	1
62291	Injection procedure for discography, each level; cervical or thoracic	1
62292	Injection procedure for chemonucleolysis, including discography, intervertebral disc, single or multiple levels, lumbar	1
62294	Injection procedure, arterial, for occlusion of arteriovenous malformation, spinal	1
62302	Myelography via lumbar injection, including radiological supervision and interpretation; cervical	1
62303	Myelography via lumbar injection, including radiological supervision and interpretation; thoracic	1
62304	Myelography via lumbar injection, including radiological supervision and interpretation; lumbosacral	1
62305	Myelography via lumbar injection, including radiological supervision and interpretation; 2 or more regions (eg, lumbar/thoracic, cervical/thoracic, lumbar/cervical, lumbar/thoracic/cervical)	1
62320	Injection(s), of diagnostic or therapeutic substance(s) (eg, anesthetic, antispasmodic, opioid, steroid, other solution), not including neurolytic substances, including needle or catheter placement, interlaminar epidural or subarachnoid, cervical or thoracic; without imaging guidance	1
62321	Injection(s), of diagnostic or therapeutic substance(s) (eg, anesthetic, antispasmodic, opioid, steroid, other solution), not including neurolytic substances, including needle or catheter placement, interlaminar epidural or subarachnoid, cervical or thoracic; with imaging guidance (ie, fluoroscopy or CT)	1
62322	Injection(s), of diagnostic or therapeutic substance(s) (eg, anesthetic, antispasmodic, opioid, steroid, other solution), not including neurolytic substances, including needle or catheter placement, interlaminar epidural or subarachnoid, lumbar or sacral (caudal); without imaging guidance	1
62323	Injection(s), of diagnostic or therapeutic substance(s) (eg, anesthetic, antispasmodic, opioid, steroid, other solution), not including neurolytic substances,	1

including needle or catheter placement, interlaminar epidural or subarachnoid, lumbar or sacral (caudal); with imaging guidance (ie, fluoroscopy or CT)	
Injection(s), including indwelling catheter placement, continuous infusion or intermittent bolus, of diagnostic or therapeutic substance(s) (eg, anesthetic, antispasmodic, opioid, steroid, other solution), not including neurolytic substances, interlaminar epidural or subarachnoid, cervical or thoracic; without imaging guidance	1
Injection(s), including indwelling catheter placement, continuous infusion or intermittent bolus, of diagnostic or therapeutic substance(s) (eg, anesthetic, antispasmodic, opioid, steroid, other solution), not including neurolytic substances, interlaminar epidural or subarachnoid, cervical or thoracic; with imaging guidance (ie, fluoroscopy or CT)	1
Injection(s), including indwelling catheter placement, continuous infusion or intermittent bolus, of diagnostic or therapeutic substance(s) (eg, anesthetic, antispasmodic, opioid, steroid, other solution), not including neurolytic substances, interlaminar epidural or subarachnoid, lumbar or sacral (caudal); without imaging guidance	1
Injection(s), including indwelling catheter placement, continuous infusion or intermittent bolus, of diagnostic or therapeutic substance(s) (eg, anesthetic, antispasmodic, opioid, steroid, other solution), not including neurolytic substances, interlaminar epidural or subarachnoid, lumbar or sacral (caudal); with imaging guidance (ie, fluoroscopy or CT)	1
Spinal puncture, lumbar, diagnostic; with fluoroscopic or CT guidance	1
Spinal puncture, therapeutic, for drainage of cerebrospinal fluid (by needle or catheter); with fluoroscopic or CT guidance	1
Implantation, revision or repositioning of tunneled intrathecal or epidural catheter, for long-term medication administration via an external pump or implantable reservoir/infusion pump; without laminectomy	1
Implantation, revision or repositioning of tunneled intrathecal or epidural catheter, for long-term medication administration via an external pump or implantable reservoir/infusion pump; with laminectomy	1
Removal of previously implanted intrathecal or epidural catheter	1
Implantation or replacement of device for intrathecal or epidural drug infusion; subcutaneous reservoir	1
Implantation or replacement of device for intrathecal or epidural drug infusion; nonprogrammable pump	1
Implantation or replacement of device for intrathecal or epidural drug infusion; programmable pump, including preparation of pump, with or without programming	1
Removal of subcutaneous reservoir or pump, previously implanted for intrathecal or epidural infusion	1
Electronic analysis of programmable, implanted pump for intrathecal or epidural drug infusion (includes evaluation of reservoir status, alarm status, drug prescription status); without reprogramming or refill	1
	Impaction(s), including indwelling catheter placement, continuous infusion or intermittent bolus, of diagnostic or therapeutic substance(s) (eg. anesthetic, antispasmodic, opioid, steroid, other solution), not including neurolytic substances, interlaminar epidural or subarachnoid, cervical or thoracic; without imaging guidance Injection(s), including indwelling catheter placement, continuous infusion or intermittent bolus, of diagnostic or therapeutic substance(s) (eg. anesthetic, antispasmodic, opioid, steroid, other solution), not including neurolytic substances, interlaminar epidural or subarachnoid, cervical or thoracic; with imaging guidance (ie, fluoroscopy or CT) Injection(s), including indwelling catheter placement, continuous infusion or intermittent bolus, of diagnostic or therapeutic substance(s) (eg. anesthetic, antispasmodic, opioid, steroid, other solution), not including neurolytic substances, interlaminar epidural or subarachnoid, lumbar or sacral (caudal); without imaging guidance Injection(s), including indwelling catheter placement, continuous infusion or intermittent bolus, of diagnostic or therapeutic substance(s) (eg. anesthetic, antispasmodic, opioid, steroid, other solution), not including neurolytic substances, interlaminar epidural or subarachnoid, lumbar or sacral (caudal); with imaging guidance (ie, fluoroscopy or CT) Spinal puncture, lumbar, diagnostic; with fluoroscopic or CT guidance Spinal puncture, therapeutic, for drainage of cerebrospinal fluid (by needle or catheter); with fluoroscopic or CT guidance Implantation, revision or repositioning of tunneled intrathecal or epidural catheter, for long-term medication administration via an external pump or implantable reservoir/infusion pump; without laminectomy Implantation or replacement of device for intrathecal or epidural drug infusion; subcutaneous reservoir Implantation or replacement of device for intrathecal or epidural drug infusion; programmable pump Implantation or replacement of device for intrathecal or epidural

62368	Electronic analysis of programmable, implanted pump for intrathecal or epidural drug infusion (includes evaluation of reservoir status, alarm status, drug prescription status); with reprogramming	1
62369	Electronic analysis of programmable, implanted pump for intrathecal or epidural drug infusion (includes evaluation of reservoir status, alarm status, drug prescription status); with reprogramming and refill	1
62370	Electronic analysis of programmable, implanted pump for intrathecal or epidural drug infusion (includes evaluation of reservoir status, alarm status, drug prescription status); with reprogramming and refill (requiring skill of a physician or other qualified health care professional)	1
62380	Endoscopic decompression of spinal cord, nerve root(s), including laminotomy, partial facetectomy, foraminotomy, discectomy and/or excision of herniated intervertebral disc, 1 interspace, lumbar	2
63001	Laminectomy with exploration and/or decompression of spinal cord and/or cauda equina, without facetectomy, foraminotomy or discectomy (eg, spinal stenosis), 1 or 2 vertebral segments; cervical	1
63003	Laminectomy with exploration and/or decompression of spinal cord and/or cauda equina, without facetectomy, foraminotomy or discectomy (eg, spinal stenosis), 1 or 2 vertebral segments; thoracic	1
63005	Laminectomy with exploration and/or decompression of spinal cord and/or cauda equina, without facetectomy, foraminotomy or discectomy (eg, spinal stenosis), 1 or 2 vertebral segments; lumbar, except for spondylolisthesis	1
63011	Laminectomy with exploration and/or decompression of spinal cord and/or cauda equina, without facetectomy, foraminotomy or discectomy (eg, spinal stenosis), 1 or 2 vertebral segments; sacral	1
63012	Laminectomy with removal of abnormal facets and/or pars inter-articularis with decompression of cauda equina and nerve roots for spondylolisthesis, lumbar (Gill type procedure)	1
63015	Laminectomy with exploration and/or decompression of spinal cord and/or cauda equina, without facetectomy, foraminotomy or discectomy (eg, spinal stenosis), more than 2 vertebral segments; cervical	1
63016	Laminectomy with exploration and/or decompression of spinal cord and/or cauda equina, without facetectomy, foraminotomy or discectomy (eg, spinal stenosis), more than 2 vertebral segments; thoracic	1
63017	Laminectomy with exploration and/or decompression of spinal cord and/or cauda equina, without facetectomy, foraminotomy or discectomy (eg, spinal stenosis), more than 2 vertebral segments; lumbar	1
63020	Laminotomy (hemilaminectomy), with decompression of nerve root(s), including partial facetectomy, foraminotomy and/or excision of herniated intervertebral disc; 1 interspace, cervical	2
63030	Laminotomy (hemilaminectomy), with decompression of nerve root(s), including partial facetectomy, foraminotomy and/or excision of herniated intervertebral disc; 1 interspace, lumbar	2

63035	Laminotomy (hemilaminectomy), with decompression of nerve root(s), including partial facetectomy, foraminotomy and/or excision of herniated intervertebral disc; each additional interspace, cervical or lumbar (List separately in addition to code for primary procedure)	1
63040	Laminotomy (hemilaminectomy), with decompression of nerve root(s), including partial facetectomy, foraminotomy and/or excision of herniated intervertebral disc, reexploration, single interspace; cervical	1
63042	Laminotomy (hemilaminectomy), with decompression of nerve root(s), including partial facetectomy, foraminotomy and/or excision of herniated intervertebral disc, reexploration, single interspace; lumbar	1
63043	Laminotomy (hemilaminectomy), with decompression of nerve root(s), including partial facetectomy, foraminotomy and/or excision of herniated intervertebral disc, reexploration, single interspace; each additional cervical interspace (List separately in addition to code for primary procedure)	4
63044	Laminotomy (hemilaminectomy), with decompression of nerve root(s), including partial facetectomy, foraminotomy and/or excision of herniated intervertebral disc, reexploration, single interspace; each additional lumbar interspace (List separately in addition to code for primary procedure)	4
63045	Laminectomy, facetectomy and foraminotomy (unilateral or bilateral with decompression of spinal cord, cauda equina and/or nerve root[s], [eg, spinal or lateral recess stenosis]), single vertebral segment; cervical	1
63046	Laminectomy, facetectomy and foraminotomy (unilateral or bilateral with decompression of spinal cord, cauda equina and/or nerve root[s], [eg, spinal or lateral recess stenosis]), single vertebral segment; thoracic	1
63047	Laminectomy, facetectomy and foraminotomy (unilateral or bilateral with decompression of spinal cord, cauda equina and/or nerve root[s], [eg, spinal or lateral recess stenosis]), single vertebral segment; lumbar	1
63048	Laminectomy, facetectomy and foraminotomy (unilateral or bilateral with decompression of spinal cord, cauda equina and/or nerve root[s], [eg, spinal or lateral recess stenosis]), single vertebral segment; each additional vertebral segment, cervical, thoracic, or lumbar (List separately in addition to code for primary procedure)	1
63050	Laminoplasty, cervical, with decompression of the spinal cord, 2 or more vertebral segments	1
63051	Laminoplasty, cervical, with decompression of the spinal cord, 2 or more vertebral segments; with reconstruction of the posterior bony elements (including the application of bridging bone graft and non-segmental fixation devices [eg, wire, suture, mini-plates], when performed)	1
63052	Laminectomy, facetectomy, or foraminotomy (unilateral or bilateral with decompression of spinal cord, cauda equina and/or nerve root[s] [eg, spinal or lateral recess stenosis]), during posterior interbody arthrodesis, lumbar; single vertebral segment (List separately in addition to code for primary procedure)	1
63053	Laminectomy, facetectomy, or foraminotomy (unilateral or bilateral with decompression of spinal cord, cauda equina and/or nerve root[s] [eg, spinal or lateral recess stenosis]), during posterior interbody arthrodesis, lumbar; each additional segment (List separately in addition to code for primary procedure)	4

		1
63055	Transpedicular approach with decompression of spinal cord, equina and/or nerve root(s) (eg, herniated intervertebral disc), single segment; thoracic	1
63056	Transpedicular approach with decompression of spinal cord, equina and/or nerve root(s) (eg, herniated intervertebral disc), single segment; lumbar (including transfacet, or lateral extraforaminal approach) (eg, far lateral herniated intervertebral disc)	1
63057	Transpedicular approach with decompression of spinal cord, equina and/or nerve root(s) (eg, herniated intervertebral disc), single segment; each additional segment, thoracic or lumbar (List separately in addition to code for primary procedure)	1
63064	Costovertebral approach with decompression of spinal cord or nerve root(s) (eg, herniated intervertebral disc), thoracic; single segment	1
63066	Costovertebral approach with decompression of spinal cord or nerve root(s) (eg, herniated intervertebral disc), thoracic; each additional segment (List separately in addition to code for primary procedure)	1
63075	Discectomy, anterior, with decompression of spinal cord and/or nerve root(s), including osteophytectomy; cervical, single interspace	1
63076	Discectomy, anterior, with decompression of spinal cord and/or nerve root(s), including osteophytectomy; cervical, each additional interspace (List separately in addition to code for primary procedure)	1
63077	Discectomy, anterior, with decompression of spinal cord and/or nerve root(s), including osteophytectomy; thoracic, single interspace	1
63078	Discectomy, anterior, with decompression of spinal cord and/or nerve root(s), including osteophytectomy; thoracic, each additional interspace (List separately in addition to code for primary procedure)	1
63081	Vertebral corpectomy (vertebral body resection), partial or complete, anterior approach with decompression of spinal cord and/or nerve root(s); cervical, single segment	1
63082	Vertebral corpectomy (vertebral body resection), partial or complete, anterior approach with decompression of spinal cord and/or nerve root(s); cervical, each additional segment (List separately in addition to code for primary procedure)	1
63085	Vertebral corpectomy (vertebral body resection), partial or complete, transthoracic approach with decompression of spinal cord and/or nerve root(s); thoracic, single segment	1
63086	Vertebral corpectomy (vertebral body resection), partial or complete, transthoracic approach with decompression of spinal cord and/or nerve root(s); thoracic, each additional segment (List separately in addition to code for primary procedure)	1
63087	Vertebral corpectomy (vertebral body resection), partial or complete, combined thoracolumbar approach with decompression of spinal cord, cauda equina or nerve root(s), lower thoracic or lumbar; single segment	1
63088	Vertebral corpectomy (vertebral body resection), partial or complete, combined thoracolumbar approach with decompression of spinal cord, cauda equina or nerve root(s), lower thoracic or lumbar; each additional segment (List separately in addition to code for primary procedure)	1

63090	Vertebral corpectomy (vertebral body resection), partial or complete, transperitoneal or retroperitoneal approach with decompression of spinal cord, cauda equina or nerve root(s), lower thoracic, lumbar, or sacral; single segment	1
63091	Vertebral corpectomy (vertebral body resection), partial or complete, transperitoneal or retroperitoneal approach with decompression of spinal cord, cauda equina or nerve root(s), lower thoracic, lumbar, or sacral; each additional segment (List separately in addition to code for primary procedure)	1
63101	Vertebral corpectomy (vertebral body resection), partial or complete, lateral extracavitary approach with decompression of spinal cord and/or nerve root(s) (eg, for tumor or retropulsed bone fragments); thoracic, single segment	1
63102	Vertebral corpectomy (vertebral body resection), partial or complete, lateral extracavitary approach with decompression of spinal cord and/or nerve root(s) (eg, for tumor or retropulsed bone fragments); lumbar, single segment	1
63103	Vertebral corpectomy (vertebral body resection), partial or complete, lateral extracavitary approach with decompression of spinal cord and/or nerve root(s) (eg, for tumor or retropulsed bone fragments); thoracic or lumbar, each additional segment (List separately in addition to code for primary procedure)	1
63170	Laminectomy with myelotomy (eg, Bischof or DREZ type), cervical, thoracic, or thoracolumbar	1
63172	Laminectomy with drainage of intramedullary cyst/syrinx; to subarachnoid space	1
63173	Laminectomy with drainage of intramedullary cyst/syrinx; to peritoneal or pleural space	1
63185	Laminectomy with rhizotomy; 1 or 2 segments	1
63190	Laminectomy with rhizotomy; more than 2 segments	1
63191	Laminectomy with section of spinal accessory nerve	2
63194	Laminectomy with cordotomy, with section of 1 spinothalamic tract, 1 stage; cervical	1
63195	Laminectomy with cordotomy, with section of 1 spinothalamic tract, 1 stage; thoracic	1
63196	Laminectomy with cordotomy, with section of both spinothalamic tracts, 1 stage; cervical	1
63197	Laminectomy with cordotomy, with section of both spinothalamic tracts, 1 stage, thoracic	1
63198	Laminectomy with cordotomy with section of both spinothalamic tracts, 2 stages within 14 days; cervical	1
63199	Laminectomy with cordotomy with section of both spinothalamic tracts, 2 stages within 14 days; thoracic	1
63200	Laminectomy, with release of tethered spinal cord, lumbar	1
63250	Laminectomy for excision or occlusion of arteriovenous malformation of spinal cord; cervical	1
63251	Laminectomy for excision or occlusion of arteriovenous malformation of spinal cord; thoracic	1

63252	Laminectomy for excision or occlusion of arteriovenous malformation of spinal cord; thoracolumbar	1
63265	Laminectomy for excision or evacuation of intraspinal lesion other than neoplasm, extradural; cervical	1
63266	Laminectomy for excision or evacuation of intraspinal lesion other than neoplasm, extradural; thoracic	1
63267	Laminectomy for excision or evacuation of intraspinal lesion other than neoplasm, extradural; lumbar	1
63268	Laminectomy for excision or evacuation of intraspinal lesion other than neoplasm, extradural; sacral	1
63270	Laminectomy for excision of intraspinal lesion other than neoplasm, intradural; cervical	1
63271	Laminectomy for excision of intraspinal lesion other than neoplasm, intradural; thoracic	1
63272	Laminectomy for excision of intraspinal lesion other than neoplasm, intradural; lumbar	1
63273	Laminectomy for excision of intraspinal lesion other than neoplasm, intradural; sacral	1
63275	Laminectomy for biopsy/excision of intraspinal neoplasm; extradural, cervical	1
63276	Laminectomy for biopsy/excision of intraspinal neoplasm; extradural, thoracic	1
63277	Laminectomy for biopsy/excision of intraspinal neoplasm; extradural, lumbar	1
63278	Laminectomy for biopsy/excision of intraspinal neoplasm; extradural, sacral	1
63280	Laminectomy for biopsy/excision of intraspinal neoplasm; intradural, extramedullary, cervical	1
63281	Laminectomy for biopsy/excision of intraspinal neoplasm; intradural, extramedullary, thoracic	1
63282	Laminectomy for biopsy/excision of intraspinal neoplasm; intradural, extramedullary, lumbar	1
63283	Laminectomy for biopsy/excision of intraspinal neoplasm; intradural, sacral	1
63285	Laminectomy for biopsy/excision of intraspinal neoplasm; intradural, intramedullary, cervical	1
63286	Laminectomy for biopsy/excision of intraspinal neoplasm; intradural, intramedullary, thoracic	1
63287	Laminectomy for biopsy/excision of intraspinal neoplasm; intradural, intramedullary, thoracolumbar	1
63290	Laminectomy for biopsy/excision of intraspinal neoplasm; combined extradural-intradural lesion, any level	1
63295	Osteoplastic reconstruction of dorsal spinal elements, following primary intraspinal procedure (List separately in addition to code for primary procedure)	1

63300	Vertebral corpectomy (vertebral body resection), partial or complete, for excision of intraspinal lesion, single segment; extradural, cervical	1
63301	Vertebral corpectomy (vertebral body resection), partial or complete, for excision of intraspinal lesion, single segment; extradural, thoracic by transthoracic approach	1
63302	Vertebral corpectomy (vertebral body resection), partial or complete, for excision of intraspinal lesion, single segment; extradural, thoracic by thoracolumbar approach	1
63303	Vertebral corpectomy (vertebral body resection), partial or complete, for excision of intraspinal lesion, single segment; extradural, lumbar or sacral by transperitoneal or retroperitoneal approach	1
63304	Vertebral corpectomy (vertebral body resection), partial or complete, for excision of intraspinal lesion, single segment; intradural, cervical	1
63305	Vertebral corpectomy (vertebral body resection), partial or complete, for excision of intraspinal lesion, single segment; intradural, thoracic by transthoracic approach	1
63306	Vertebral corpectomy (vertebral body resection), partial or complete, for excision of intraspinal lesion, single segment; intradural, thoracic by thoracolumbar approach	1
63307	Vertebral corpectomy (vertebral body resection), partial or complete, for excision of intraspinal lesion, single segment; intradural, lumbar or sacral by transperitoneal or retroperitoneal approach	1
63308	Vertebral corpectomy (vertebral body resection), partial or complete, for excision of intraspinal lesion, single segment; each additional segment (List separately in addition to codes for single segment)	1
63600	Creation of lesion of spinal cord by stereotactic method, percutaneous, any modality (including stimulation and/or recording)	1
63610	Stereotactic stimulation of spinal cord, percutaneous, separate procedure not followed by other surgery	1
63620	Stereotactic radiosurgery (particle beam, gamma ray, or linear accelerator); 1 spinal lesion	1
63621	Stereotactic radiosurgery (particle beam, gamma ray, or linear accelerator); each additional spinal lesion (List separately in addition to code for primary procedure)	1
63650	Percutaneous implantation of neurostimulator electrode array, epidural	1
63655	Laminectomy for implantation of neurostimulator electrodes, plate/paddle, epidural	1
63661	Removal of spinal neurostimulator electrode percutaneous array(s), including fluoroscopy, when performed	1
63662	Removal of spinal neurostimulator electrode plate/paddle(s) placed via laminotomy or laminectomy, including fluoroscopy, when performed	1
63663	Revision including replacement, when performed, of spinal neurostimulator electrode percutaneous array(s), including fluoroscopy, when performed	1
63664	Revision including replacement, when performed, of spinal neurostimulator electrode plate/paddle(s) placed via laminotomy or laminectomy, including fluoroscopy, when performed	1

63685	Insertion or replacement of spinal neurostimulator pulse generator or receiver, direct or inductive coupling	1
63688	Revision or removal of implanted spinal neurostimulator pulse generator or receiver	1
63700	Repair of meningocele; less than 5 cm diameter	1
63702	Repair of meningocele; larger than 5 cm diameter	1
63704	Repair of myelomeningocele; less than 5 cm diameter	1
63706	Repair of myelomeningocele; larger than 5 cm diameter	1
63707	Repair of dural/cerebrospinal fluid leak, not requiring laminectomy	1
63709	Repair of dural/cerebrospinal fluid leak or pseudomeningocele, with laminectomy	1
63710	Dural graft, spinal	1
63740	Creation of shunt, lumbar, subarachnoid-peritoneal, -pleural, or other; including laminectomy	1
63741	Creation of shunt, lumbar, subarachnoid-peritoneal, -pleural, or other; percutaneous, not requiring laminectomy	1
63744	Replacement, irrigation or revision of lumbosubarachnoid shunt	1
63746	Removal of entire lumbosubarachnoid shunt system without replacement	1
64400	Injection(s), anesthetic agent(s) and/or steroid; trigeminal nerve, each branch (ie, ophthalmic, maxillary, mandibular)	1
64405	Injection(s), anesthetic agent(s) and/or steroid; greater occipital nerve	1
64408	Injection(s), anesthetic agent(s) and/or steroid; vagus nerve	1
64415	Injection(s), anesthetic agent(s) and/or steroid; brachial plexus	1
64416	Injection(s), anesthetic agent(s) and/or steroid; brachial plexus, continuous infusion by catheter (including catheter placement)	1
64417	Injection(s), anesthetic agent(s) and/or steroid; axillary nerve	1
64418	Injection(s), anesthetic agent(s) and/or steroid; suprascapular nerve	1
64420	Injection(s), anesthetic agent(s) and/or steroid; intercostal nerve, single level	1
64421	Injection(s), anesthetic agent(s) and/or steroid; intercostal nerve, each additional level (List separately in addition to code for primary procedure)	1
64425	Injection(s), anesthetic agent(s) and/or steroid; ilioinguinal, iliohypogastric nerves	1
64430	Injection(s), anesthetic agent(s) and/or steroid; pudendal nerve	1
64435	Injection(s), anesthetic agent(s) and/or steroid; paracervical (uterine) nerve	1
64445	Injection(s), anesthetic agent(s) and/or steroid; sciatic nerve	1
64446	Injection(s), anesthetic agent(s) and/or steroid; sciatic nerve, continuous infusion by catheter (including catheter placement)	1
64447	Injection(s), anesthetic agent(s) and/or steroid; femoral nerve	1
64448	Injection(s), anesthetic agent(s) and/or steroid; femoral nerve, continuous infusion by catheter (including catheter placement)	1

64449	Injection(s), anesthetic agent(s) and/or steroid; lumbar plexus, posterior approach, continuous infusion by catheter (including catheter placement)	1
64450	Injection(s), anesthetic agent(s) and/or steroid; other peripheral nerve or branch	1
64451	Injection(s), anesthetic agent(s) and/or steroid; nerves innervating the sacroiliac joint, with image guidance (ie, fluoroscopy or computed tomography)	2
64454	Injection(s), anesthetic agent(s) and/or steroid; genicular nerve branches, including imaging guidance, when performed	2
64455	Injection(s), anesthetic agent(s) and/or steroid; plantar common digital nerve(s) (eg, Morton's neuroma)	2
64461	Paravertebral block (PVB) (paraspinous block), thoracic; single injection site (includes imaging guidance, when performed)	1
64462	Paravertebral block (PVB) (paraspinous block), thoracic; second and any additional injection site(s) (includes imaging guidance, when performed) (List separately in addition to code for primary procedure)	1
64463	Paravertebral block (PVB) (paraspinous block), thoracic; continuous infusion by catheter (includes imaging guidance, when performed)	1
64479	Injection(s), anesthetic agent(s) and/or steroid; transforaminal epidural, with imaging guidance (fluoroscopy or CT), cervical or thoracic, single level	1
64480	Injection(s), anesthetic agent(s) and/or steroid; transforaminal epidural, with imaging guidance (fluoroscopy or CT), cervical or thoracic, each additional level (List separately in addition to code for primary procedure)	1
64483	Injection(s), anesthetic agent(s) and/or steroid; transforaminal epidural, with imaging guidance (fluoroscopy or CT), lumbar or sacral, single level	1
64484	Injection(s), anesthetic agent(s) and/or steroid; transforaminal epidural, with imaging guidance (fluoroscopy or CT), lumbar or sacral, each additional level (List separately in addition to code for primary procedure)	1
64486	Transversus abdominis plane (TAP) block (abdominal plane block, rectus sheath block) unilateral; by injection(s) (includes imaging guidance, when performed)	1
64487	Transversus abdominis plane (TAP) block (abdominal plane block, rectus sheath block) unilateral; by continuous infusion(s) (includes imaging guidance, when performed)	1
64488	Transversus abdominis plane (TAP) block (abdominal plane block, rectus sheath block) bilateral; by injections (includes imaging guidance, when performed)	1
64489	Transversus abdominis plane (TAP) block (abdominal plane block, rectus sheath block) bilateral; by continuous infusions (includes imaging guidance, when performed)	1
64490	Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joint) with image guidance (fluoroscopy or CT), cervical or thoracic; single level	2
64491	Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joint) with image guidance (fluoroscopy or CT), cervical or thoracic; second level (List separately in addition to code for primary procedure)	2

64492	Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joint) with image guidance (fluoroscopy or CT), cervical or thoracic; third and any additional level(s) (List separately in addition to code for primary procedure)	2
64493	Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joint) with image guidance (fluoroscopy or CT), lumbar or sacral; single level	2
64494	Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joint) with image guidance (fluoroscopy or CT), lumbar or sacral; second level (List separately in addition to code for primary procedure)	2
64495	Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joint) with image guidance (fluoroscopy or CT), lumbar or sacral; third and any additional level(s) (List separately in addition to code for primary procedure)	2
64505	Injection, anesthetic agent; sphenopalatine ganglion	1
64510	Injection, anesthetic agent; stellate ganglion (cervical sympathetic)	1
64517	Injection, anesthetic agent; superior hypogastric plexus	1
64520	Injection, anesthetic agent; lumbar or thoracic (paravertebral sympathetic)	1
64530	Injection, anesthetic agent; celiac plexus, with or without radiologic monitoring	1
64553	Percutaneous implantation of neurostimulator electrode array; cranial nerve	1
64555	Percutaneous implantation of neurostimulator electrode array; peripheral nerve (excludes sacral nerve)	1
64561	Percutaneous implantation of neurostimulator electrode array; sacral nerve (transforaminal placement) including image guidance, if performed	2
64566	Posterior tibial neurostimulation, percutaneous needle electrode, single treatment, includes programming	1
64568	Open implantation of cranial nerve (eg, vagus nerve) neurostimulator electrode array and pulse generator	2
64569	Revision or replacement of cranial nerve (eg, vagus nerve) neurostimulator electrode array, including connection to existing pulse generator	2
64570	Removal of cranial nerve (eg, vagus nerve) neurostimulator electrode array and pulse generator	2
64575	Open implantation of neurostimulator electrode array; peripheral nerve (excludes sacral nerve)	1
64580	Open implantation of neurostimulator electrode array; neuromuscular	2
64581	Open implantation of neurostimulator electrode array; sacral nerve (transforaminal placement)	1
64582	Open implantation of hypoglossal nerve neurostimulator array, pulse generator, and distal respiratory sensor electrode or electrode array	1

64583	Revision or replacement of hypoglossal nerve neurostimulator array and distal respiratory sensor electrode or electrode array, including connection to existing pulse generator	1
64584	Removal of hypoglossal nerve neurostimulator array, pulse generator, and distal respiratory sensor electrode or electrode array	1
64585	Revision or removal of peripheral neurostimulator electrode array	1
64590	Insertion or replacement of peripheral or gastric neurostimulator pulse generator or receiver, direct or inductive coupling	1
64595	Revision or removal of peripheral or gastric neurostimulator pulse generator or receiver	1
64600	Destruction by neurolytic agent, trigeminal nerve; supraorbital, infraorbital, mental, or inferior alveolar branch	1
64605	Destruction by neurolytic agent, trigeminal nerve; second and third division branches at foramen ovale	1
64610	Destruction by neurolytic agent, trigeminal nerve; second and third division branches at foramen ovale under radiologic monitoring	1
64611	Chemodenervation of parotid and submandibular salivary glands, bilateral	1
64612	Chemodenervation of muscle(s); muscle(s) innervated by facial nerve, unilateral (eg, for blepharospasm, hemifacial spasm)	2
64615	Chemodenervation of muscle(s); muscle(s) innervated by facial, trigeminal, cervical spinal and accessory nerves, bilateral (eg, for chronic migraine)	1
64616	Chemodenervation of muscle(s); neck muscle(s), excluding muscles of the larynx, unilateral (eg, for cervical dystonia, spasmodic torticollis)	2
64617	Chemodenervation of muscle(s); larynx, unilateral, percutaneous (eg, for spasmodic dysphonia), includes guidance by needle electromyography, when performed	2
64620	Destruction by neurolytic agent, intercostal nerve	1
64624	Destruction by neurolytic agent, genicular nerve branches including imaging guidance, when performed	2
64625	Radiofrequency ablation, nerves innervating the sacroiliac joint, with image guidance (ie, fluoroscopy or computed tomography)	2
64628	Thermal destruction of intraosseous basivertebral nerve, including all imaging guidance; first 2 vertebral bodies, lumbar or sacral	1
64630	Destruction by neurolytic agent; pudendal nerve	1
64632	Destruction by neurolytic agent; plantar common digital nerve	2
64633	Destruction by neurolytic agent, paravertebral facet joint nerve(s), with imaging guidance (fluoroscopy or CT); cervical or thoracic, single facet joint	2
64634	Destruction by neurolytic agent, paravertebral facet joint nerve(s), with imaging guidance (fluoroscopy or CT); cervical or thoracic, each additional facet joint (List separately in addition to code for primary procedure)	1
64635	Destruction by neurolytic agent, paravertebral facet joint nerve(s), with imaging guidance (fluoroscopy or CT); lumbar or sacral, single facet joint	2

64636	Destruction by neurolytic agent, paravertebral facet joint nerve(s), with imaging guidance (fluoroscopy or CT); lumbar or sacral, each additional facet joint (List separately in addition to code for primary procedure)	1
64640	Destruction by neurolytic agent; other peripheral nerve or branch	1
64642	Chemodenervation of one extremity; 1-4 muscle(s)	1
64643	Chemodenervation of one extremity; each additional extremity, 1-4 muscle(s) (List separately in addition to code for primary procedure)	1
64644	Chemodenervation of one extremity; 5 or more muscles	1
64645	Chemodenervation of one extremity; each additional extremity, 5 or more muscles (List separately in addition to code for primary procedure)	1
64646	Chemodenervation of trunk muscle(s); 1-5 muscle(s)	1
64647	Chemodenervation of trunk muscle(s); 6 or more muscles	1
64650	Chemodenervation of eccrine glands; both axillae	1
64653	Chemodenervation of eccrine glands; other area(s) (eg, scalp, face, neck), per day	1
64680	Destruction by neurolytic agent, with or without radiologic monitoring; celiac plexus	1
64681	Destruction by neurolytic agent, with or without radiologic monitoring; superior hypogastric plexus	1
64702	Neuroplasty; digital, 1 or both, same digit	2
64704	Neuroplasty; nerve of hand or foot	2
64708	Neuroplasty, major peripheral nerve, arm or leg, open; other than specified	2
64712	Neuroplasty, major peripheral nerve, arm or leg, open; sciatic nerve	2
64713	Neuroplasty, major peripheral nerve, arm or leg, open; brachial plexus	2
64714	Neuroplasty, major peripheral nerve, arm or leg, open; lumbar plexus	2
64716	Neuroplasty and/or transposition; cranial nerve (specify)	2
64718	Neuroplasty and/or transposition; ulnar nerve at elbow	2
64719	Neuroplasty and/or transposition; ulnar nerve at wrist	2
64721	Neuroplasty and/or transposition; median nerve at carpal tunnel	2
64722	Decompression; unspecified nerve(s) (specify)	1
64726	Decompression; plantar digital nerve	2
64727	Internal neurolysis, requiring use of operating microscope (List separately in addition to code for neuroplasty) (Neuroplasty includes external neurolysis)	1
64732	Transection or avulsion of; supraorbital nerve	2
64734	Transection or avulsion of; infraorbital nerve	1
64736	Transection or avulsion of; mental nerve	2
64738	Transection or avulsion of; inferior alveolar nerve by osteotomy	2
64740	Transection or avulsion of; lingual nerve	1

64742	Transection or avulsion of; facial nerve, differential or complete	1
64744	Transection or avulsion of; greater occipital nerve	2
64746	Transection or avulsion of; phrenic nerve	1
64755	Transection or avulsion of; vagus nerves limited to proximal stomach (selective proximal vagotomy, proximal gastric vagotomy, parietal cell vagotomy, supra- or highly selective vagotomy)	1
64760	Transection or avulsion of; vagus nerve (vagotomy), abdominal	2
64763	Transection or avulsion of obturator nerve, extrapelvic, with or without adductor tenotomy	2
64766	Transection or avulsion of obturator nerve, intrapelvic, with or without adductor tenotomy	2
64771	Transection or avulsion of other cranial nerve, extradural	1
64772	Transection or avulsion of other spinal nerve, extradural	1
64774	Excision of neuroma; cutaneous nerve, surgically identifiable	2
64776	Excision of neuroma; digital nerve, 1 or both, same digit	1
64778	Excision of neuroma; digital nerve, each additional digit (List separately in addition to code for primary procedure)	1
64782	Excision of neuroma; hand or foot, except digital nerve	2
64783	Excision of neuroma; hand or foot, each additional nerve, except same digit (List separately in addition to code for primary procedure)	1
64784	Excision of neuroma; major peripheral nerve, except sciatic	1
64786	Excision of neuroma; sciatic nerve	1
64787	Implantation of nerve end into bone or muscle (List separately in addition to neuroma excision)	1
64788	Excision of neurofibroma or neurolemmoma; cutaneous nerve	2
64790	Excision of neurofibroma or neurolemmoma; major peripheral nerve	2
64792	Excision of neurofibroma or neurolemmoma; extensive (including malignant type)	1
64795	Biopsy of nerve	1
64802	Sympathectomy, cervical	2
64804	Sympathectomy, cervicothoracic	2
64809	Sympathectomy, thoracolumbar	2
64818	Sympathectomy, lumbar	2
64820	Sympathectomy; digital arteries, each digit	2
64821	Sympathectomy; radial artery	2
64822	Sympathectomy; ulnar artery	2
64823	Sympathectomy; superficial palmar arch	2
64831	Suture of digital nerve, hand or foot; 1 nerve	1

64832	Suture of digital nerve, hand or foot; each additional digital nerve (List separately in addition to code for primary procedure)	1
64834	Suture of 1 nerve; hand or foot, common sensory nerve	1
64835	Suture of 1 nerve; median motor thenar	1
64836	Suture of 1 nerve; ulnar motor	2
64837	Suture of each additional nerve, hand or foot (List separately in addition to code for primary procedure)	1
64840	Suture of posterior tibial nerve	2
64856	Suture of major peripheral nerve, arm or leg, except sciatic; including transposition	1
64857	Suture of major peripheral nerve, arm or leg, except sciatic; without transposition	2
64858	Suture of sciatic nerve	2
64859	Suture of each additional major peripheral nerve (List separately in addition to code for primary procedure)	1
64861	Suture of; brachial plexus	1
64862	Suture of; lumbar plexus	1
64864	Suture of facial nerve; extracranial	1
64865	Suture of facial nerve; infratemporal, with or without grafting	1
64866	Anastomosis; facial-spinal accessory	2
64868	Anastomosis; facial-hypoglossal	2
64872	Suture of nerve; requiring secondary or delayed suture (List separately in addition to code for primary neurorrhaphy)	1
64874	Suture of nerve; requiring extensive mobilization, or transposition of nerve (List separately in addition to code for nerve suture)	1
64876	Suture of nerve; requiring shortening of bone of extremity (List separately in addition to code for nerve suture)	1
64885	Nerve graft (includes obtaining graft), head or neck; up to 4 cm in length	1
64886	Nerve graft (includes obtaining graft), head or neck; more than 4 cm length	1
64890	Nerve graft (includes obtaining graft), single strand, hand or foot; up to 4 cm length	1
64891	Nerve graft (includes obtaining graft), single strand, hand or foot; more than 4 cm length	1
64892	Nerve graft (includes obtaining graft), single strand, arm or leg; up to 4 cm length	2
64893	Nerve graft (includes obtaining graft), single strand, arm or leg; more than 4 cm length	1
64895	Nerve graft (includes obtaining graft), multiple strands (cable), hand or foot; up to 4 cm length	1
64896	Nerve graft (includes obtaining graft), multiple strands (cable), hand or foot; more than 4 cm length	1

64897	Nerve graft (includes obtaining graft), multiple strands (cable), arm or leg; up to 4 cm length	1
64898	Nerve graft (includes obtaining graft), multiple strands (cable), arm or leg; more than 4 cm length	1
64901	Nerve graft, each additional nerve; single strand (List separately in addition to code for primary procedure)	1
64902	Nerve graft, each additional nerve; multiple strands (cable) (List separately in addition to code for primary procedure)	1
64905	Nerve pedicle transfer; first stage	1
64907	Nerve pedicle transfer; second stage	1
64912	Nerve repair; with nerve allograft, each nerve, first strand (cable)	3
64913	Nerve repair; with nerve allograft, each additional strand (List separately in addition to code for primary procedure)	3
64999	Unlisted procedure, nervous system	1
65091	Evisceration of ocular contents; without implant	2
65093	Evisceration of ocular contents; with implant	2
65101	Enucleation of eye; without implant	2
65103	Enucleation of eye; with implant, muscles not attached to implant	2
65105	Enucleation of eye; with implant, muscles attached to implant	2
65110	Exenteration of orbit (does not include skin graft), removal of orbital contents; only	2
65112	Exenteration of orbit (does not include skin graft), removal of orbital contents; with therapeutic removal of bone	2
65114	Exenteration of orbit (does not include skin graft), removal of orbital contents; with muscle or myocutaneous flap	2
65125	Modification of ocular implant with placement or replacement of pegs (eg, drilling receptacle for prosthesis appendage) (separate procedure)	2
65130	Insertion of ocular implant secondary; after evisceration, in scleral shell	2
65135	Insertion of ocular implant secondary; after enucleation, muscles not attached to implant	2
65140	Insertion of ocular implant secondary; after enucleation, muscles attached to implant	2
65150	Reinsertion of ocular implant; with or without conjunctival graft	1
65155	Reinsertion of ocular implant; with use of foreign material for reinforcement and/or attachment of muscles to implant	1
65175	Removal of ocular implant	1
65205	Removal of foreign body, external eye; conjunctival superficial	2
65210	Removal of foreign body, external eye; conjunctival embedded (includes concretions), subconjunctival, or scleral nonperforating	2

65220	Removal of foreign body, external eye; corneal, without slit lamp	2
65222	Removal of foreign body, external eye; corneal, with slit lamp	2
65235	Removal of foreign body, intraocular; from anterior chamber of eye or lens	2
65260	Removal of foreign body, intraocular; from posterior segment, magnetic extraction, anterior or posterior route	2
65265	Removal of foreign body, intraocular; from posterior segment, nonmagnetic extraction	2
65270	Repair of laceration; conjunctiva, with or without nonperforating laceration sclera, direct closure	2
65272	Repair of laceration; conjunctiva, by mobilization and rearrangement, without hospitalization	2
65273	Repair of laceration; conjunctiva, by mobilization and rearrangement, with hospitalization	2
65275	Repair of laceration; cornea, nonperforating, with or without removal foreign body	2
65280	Repair of laceration; cornea and/or sclera, perforating, not involving uveal tissue	2
65285	Repair of laceration; cornea and/or sclera, perforating, with reposition or resection of uveal tissue	2
65286	Repair of laceration; application of tissue glue, wounds of cornea and/or sclera	2
65290	Repair of wound, extraocular muscle, tendon and/or Tenon's capsule	2
65400	Excision of lesion, cornea (keratectomy, lamellar, partial), except pterygium	2
65410	Biopsy of cornea	1
65420	Excision or transposition of pterygium; without graft	2
65426	Excision or transposition of pterygium; with graft	2
65430	Scraping of cornea, diagnostic, for smear and/or culture	1
65435	Removal of corneal epithelium; with or without chemocauterization (abrasion, curettage)	1
65436	Removal of corneal epithelium; with application of chelating agent (eg, EDTA)	1
65450	Destruction of lesion of cornea by cryotherapy, photocoagulation or thermocauterization	2
65600	Multiple punctures of anterior cornea (eg, for corneal erosion, tattoo)	2
65710	Keratoplasty (comeal transplant); anterior lamellar	2
65730	Keratoplasty (corneal transplant); penetrating (except in aphakia or pseudophakia)	2
65750	Keratoplasty (corneal transplant); penetrating (in aphakia)	2
65755	Keratoplasty (corneal transplant); penetrating (in pseudophakia)	1
65756	Keratoplasty (corneal transplant); endothelial	2
65757	Backbench preparation of corneal endothelial allograft prior to transplantation (List separately in addition to code for primary procedure)	1

65760	Keratomileusis	1
65765	Keratophakia	1
65767	Epikeratoplasty	1
65770	Keratoprosthesis	2
65771	Radial keratotomy	1
65772	Corneal relaxing incision for correction of surgically induced astigmatism	2
65775	Corneal wedge resection for correction of surgically induced astigmatism	2
65778	Placement of amniotic membrane on the ocular surface; without sutures	2
65779	Placement of amniotic membrane on the ocular surface; single layer, sutured	2
65780	Ocular surface reconstruction; amniotic membrane transplantation, multiple layers	2
65781	Ocular surface reconstruction; limbal stem cell allograft (eg, cadaveric or living donor)	1
65782	Ocular surface reconstruction; limbal conjunctival autograft (includes obtaining graft)	2
65785	Implantation of intrastromal corneal ring segments	2
65800	Paracentesis of anterior chamber of eye (separate procedure); with removal of aqueous	2
65810	Paracentesis of anterior chamber of eye (separate procedure); with removal of vitreous and/or discission of anterior hyaloid membrane, with or without air injection	2
65815	Paracentesis of anterior chamber of eye (separate procedure); with removal of blood, with or without irrigation and/or air injection	2
65820	Goniotomy	2
65850	Trabeculotomy ab externo	2
65855	Trabeculoplasty by laser surgery	1
65860	Severing adhesions of anterior segment, laser technique (separate procedure)	2
65865	Severing adhesions of anterior segment of eye, incisional technique (with or without injection of air or liquid) (separate procedure); goniosynechiae	2
65870	Severing adhesions of anterior segment of eye, incisional technique (with or without injection of air or liquid) (separate procedure); anterior synechiae, except goniosynechiae	2
65875	Severing adhesions of anterior segment of eye, incisional technique (with or without injection of air or liquid) (separate procedure); posterior synechiae	2
65880	Severing adhesions of anterior segment of eye, incisional technique (with or without injection of air or liquid) (separate procedure); corneovitreal adhesions	2
65900	Removal of epithelial downgrowth, anterior chamber of eye	2
65920	Removal of implanted material, anterior segment of eye	2
65930	Removal of blood clot, anterior segment of eye	2

66020	Injection, anterior chamber of eye (separate procedure); air or liquid	2
66030	Injection, anterior chamber of eye (separate procedure); medication	2
66130	Excision of lesion, sclera	1
66150	Fistulization of sclera for glaucoma; trephination with iridectomy	2
66155	Fistulization of sclera for glaucoma; thermocauterization with iridectomy	1
66160	Fistulization of sclera for glaucoma; sclerectomy with punch or scissors, with iridectomy	2
66170	Fistulization of sclera for glaucoma; trabeculectomy ab externo in absence of previous surgery	2
66172	Fistulization of sclera for glaucoma; trabeculectomy ab externo with scarring from previous ocular surgery or trauma (includes injection of antifibrotic agents)	2
66174	Transluminal dilation of aqueous outflow canal; without retention of device or stent	1
66175	Transluminal dilation of aqueous outflow canal; with retention of device or stent	1
66179	Aqueous shunt to extraocular equatorial plate reservoir, external approach; without graft	2
66180	Aqueous shunt to extraocular equatorial plate reservoir, external approach; with graft	2
66183	Insertion of anterior segment aqueous drainage device, without extraocular reservoir, external approach	1
66184	Revision of aqueous shunt to extraocular equatorial plate reservoir; without graft	2
66185	Revision of aqueous shunt to extraocular equatorial plate reservoir; with graft	2
66225	Repair of scleral staphyloma with graft	2
66250	Revision or repair of operative wound of anterior segment, any type, early or late, major or minor procedure	2
66500	Iridotomy by stab incision (separate procedure); except transfixion	2
66505	Iridotomy by stab incision (separate procedure); with transfixion as for iris bombe	2
66600	Iridectomy, with corneoscleral or corneal section; for removal of lesion	2
66605	Iridectomy, with corneoscleral or corneal section; with cyclectomy	2
66625	Iridectomy, with corneoscleral or corneal section; peripheral for glaucoma (separate procedure)	2
66630	Iridectomy, with corneoscleral or corneal section; sector for glaucoma (separate procedure)	2
66635	Iridectomy, with corneoscleral or corneal section; optical (separate procedure)	2
66680	Repair of iris, ciliary body (as for iridodialysis)	2
66682	Suture of iris, ciliary body (separate procedure) with retrieval of suture through small incision (eg, McCannel suture)	2
66700	Ciliary body destruction; diathermy	2
66710	Ciliary body destruction; cyclophotocoagulation, transscleral	2

66711	Ciliary body destruction; cyclophotocoagulation, endoscopic, without concomitant removal of crystalline lens	2
66720	Ciliary body destruction; cryotherapy	2
66740	Ciliary body destruction; cyclodialysis	2
66761	Iridotomy/iridectomy by laser surgery (eg, for glaucoma) (per session)	2
66762	Iridoplasty by photocoagulation (1 or more sessions) (eg, for improvement of vision, for widening of anterior chamber angle)	2
66770	Destruction of cyst or lesion iris or ciliary body (nonexcisional procedure)	1
66820	Discission of secondary membranous cataract (opacified posterior lens capsule and/or anterior hyaloid); stab incision technique (Ziegler or Wheeler knife)	2
66821	Discission of secondary membranous cataract (opacified posterior lens capsule and/or anterior hyaloid); laser surgery (eg, YAG laser) (1 or more stages)	2
66825	Repositioning of intraocular lens prosthesis, requiring an incision (separate procedure)	2
66830	Removal of secondary membranous cataract (opacified posterior lens capsule and/or anterior hyaloid) with corneo-scleral section, with or without iridectomy (iridocapsulotomy, iridocapsulectomy)	2
66840	Removal of lens material; aspiration technique, 1 or more stages	2
66850	Removal of lens material; phacofragmentation technique (mechanical or ultrasonic) (eg, phacoemulsification), with aspiration	2
66852	Removal of lens material; pars plana approach, with or without vitrectomy	1
66920	Removal of lens material; intracapsular	2
66930	Removal of lens material; intracapsular, for dislocated lens	1
66940	Removal of lens material; extracapsular (other than 66840, 66850, 66852)	1
66982	Extracapsular cataract removal with insertion of intraocular lens prosthesis (1-stage procedure), manual or mechanical technique (eg, irrigation and aspiration or phacoemulsification), complex, requiring devices or techniques not generally used in routine cataract surgery (eg, iris expansion device, suture support for intraocular lens, or primary posterior capsulorrhexis) or performed on patients in the amblyogenic developmental stage; without endoscopic cyclophotocoagulation	2
66983	Intracapsular cataract extraction with insertion of intraocular lens prosthesis (1 stage procedure)	2
66984	Extracapsular cataract removal with insertion of intraocular lens prosthesis (1 stage procedure), manual or mechanical technique (eg, irrigation and aspiration or phacoemulsification); without endoscopic cyclophotocoagulation	1
66985	Insertion of intraocular lens prosthesis (secondary implant), not associated with concurrent cataract removal	2
66986	Exchange of intraocular lens	2

66987	Extracapsular cataract removal with insertion of intraocular lens prosthesis (1-stage procedure), manual or mechanical technique (eg, irrigation and aspiration or phacoemulsification), complex, requiring devices or techniques not generally used in routine cataract surgery (eg, iris expansion device, suture support for intraocular	2
	lens, or primary posterior capsulorrhexis) or performed on patients in the amblyogenic developmental stage; with endoscopic cyclophotocoagulation	
66988	Extracapsular cataract removal with insertion of intraocular lens prosthesis (1 stage procedure), manual or mechanical technique (eg, irrigation and aspiration or phacoemulsification); with endoscopic cyclophotocoagulation	2
66989	Extracapsular cataract removal with insertion of intraocular lens prosthesis (1-stage procedure), manual or mechanical technique (eg, irrigation and aspiration or phacoemulsification), complex, requiring devices or techniques not generally used in routine cataract surgery (eg, iris expansion device, suture support for intraocular lens, or primary posterior capsulorrhexis) or performed on patients in the amblyogenic developmental stage; with insertion of intraocular (eg, trabecular meshwork, supraciliary, suprachoroidal) anterior segment aqueous drainage device, without extraocular reservoir, internal approach, one or more	1
66990	Use of ophthalmic endoscope (List separately in addition to code for primary procedure)	1
66991	Extracapsular cataract removal with insertion of intraocular lens prosthesis (1 stage procedure), manual or mechanical technique (eg, irrigation and aspiration or phacoemulsification); with insertion of intraocular (eg, trabecular meshwork, supraciliary, suprachoroidal) anterior segment aqueous drainage device, without extraocular reservoir, internal approach, one or more	1
66999	Unlisted procedure, anterior segment of eye	1
67005	Removal of vitreous, anterior approach (open sky technique or limbal incision); partial removal	2
67010	Removal of vitreous, anterior approach (open sky technique or limbal incision); subtotal removal with mechanical vitrectomy	2
67015	Aspiration or release of vitreous, subretinal or choroidal fluid, pars plana approach (posterior sclerotomy)	2
67025	Injection of vitreous substitute, pars plana or limbal approach (fluid-gas exchange), with or without aspiration (separate procedure)	1
67027	Implantation of intravitreal drug delivery system (eg, ganciclovir implant), includes concomitant removal of vitreous	2
67028	Intravitreal injection of a pharmacologic agent (separate procedure)	1
67030	Discission of vitreous strands (without removal), pars plana approach	2
67031	Severing of vitreous strands, vitreous face adhesions, sheets, membranes or opacities, laser surgery (1 or more stages)	1
67036	Vitrectomy, mechanical, pars plana approach	2
67039	Vitrectomy, mechanical, pars plana approach; with focal endolaser photocoagulation	2

67040	Vitrectomy, mechanical, pars plana approach; with endolaser panretinal photocoagulation	2
67041	Vitrectomy, mechanical, pars plana approach; with removal of preretinal cellular membrane (eg, macular pucker)	2
67042	Vitrectomy, mechanical, pars plana approach; with removal of internal limiting membrane of retina (eg, for repair of macular hole, diabetic macular edema), includes, if performed, intraocular tamponade (ie, air, gas or silicone oil)	2
67043	Vitrectomy, mechanical, pars plana approach; with removal of subretinal membrane (eg, choroidal neovascularization), includes, if performed, intraocular tamponade (ie, air, gas or silicone oil) and laser photocoagulation	2
67101	Repair of retinal detachment, including drainage of subretinal fluid when performed; cryotherapy	1
67105	Repair of retinal detachment, including drainage of subretinal fluid when performed; photocoagulation	1
67107	Repair of retinal detachment; scleral buckling (such as lamellar scleral dissection, imbrication or encircling procedure), including, when performed, implant, cryotherapy, photocoagulation, and drainage of subretinal fluid	1
67108	Repair of retinal detachment; with vitrectomy, any method, including, when performed, air or gas tamponade, focal endolaser photocoagulation, cryotherapy, drainage of subretinal fluid, scleral buckling, and/or removal of lens by same technique	1
67110	Repair of retinal detachment; by injection of air or other gas (eg, pneumatic retinopexy)	1
67113	Repair of complex retinal detachment (eg, proliferative vitreoretinopathy, stage C-1 or greater, diabetic traction retinal detachment, retinopathy of prematurity, retinal tear of greater than 90 degrees), with vitrectomy and membrane peeling, including, when performed, air, gas, or silicone oil tamponade, cryotherapy, endolaser photocoagulation, drainage of subretinal fluid, scleral buckling, and/or removal of lens	2
67115	Release of encircling material (posterior segment)	1
67120	Removal of implanted material, posterior segment; extraocular	1
67121	Removal of implanted material, posterior segment; intraocular	2
67141	Prophylaxis of retinal detachment (eg, retinal break, lattice degeneration) without drainage; cryotherapy, diathermy	2
67145	Prophylaxis of retinal detachment (eg, retinal break, lattice degeneration) without drainage; photocoagulation	2
67208	Destruction of localized lesion of retina (eg, macular edema, tumors), 1 or more sessions; cryotherapy, diathermy	1
67210	Destruction of localized lesion of retina (eg, macular edema, tumors), 1 or more sessions; photocoagulation	1
67218	Destruction of localized lesion of retina (eg, macular edema, tumors), 1 or more sessions; radiation by implantation of source (includes removal of source)	2

67220	Destruction of localized lesion of choroid (eg, choroidal neovascularization); photocoagulation (eg, laser), 1 or more sessions	1
67221	Destruction of localized lesion of choroid (eg, choroidal neovascularization); photodynamic therapy (includes intravenous infusion)	1
67225	Destruction of localized lesion of choroid (eg, choroidal neovascularization); photodynamic therapy, second eye, at single session (List separately in addition to code for primary eye treatment)	1
67227	Destruction of extensive or progressive retinopathy (eg, diabetic retinopathy), cryotherapy, diathermy	2
67228	Treatment of extensive or progressive retinopathy (eg, diabetic retinopathy), photocoagulation	2
67229	Treatment of extensive or progressive retinopathy, 1 or more sessions, preterm infant (less than 37 weeks gestation at birth), performed from birth up to 1 year of age (eg, retinopathy of prematurity), photocoagulation or cryotherapy	2
67250	Scleral reinforcement (separate procedure); without graft	2
67255	Scleral reinforcement (separate procedure); with graft	2
67299	Unlisted procedure, posterior segment	1
67311	Strabismus surgery, recession or resection procedure; 1 horizontal muscle	2
67312	Strabismus surgery, recession or resection procedure; 2 horizontal muscles	2
67314	Strabismus surgery, recession or resection procedure; 1 vertical muscle (excluding superior oblique)	2
67316	Strabismus surgery, recession or resection procedure; 2 or more vertical muscles (excluding superior oblique)	2
67318	Strabismus surgery, any procedure, superior oblique muscle	2
67320	Transposition procedure (eg, for paretic extraocular muscle), any extraocular muscle (specify) (List separately in addition to code for primary procedure)	1
67331	Strabismus surgery on patient with previous eye surgery or injury that did not involve the extraocular muscles (List separately in addition to code for primary procedure)	1
67332	Strabismus surgery on patient with scarring of extraocular muscles (eg, prior ocular injury, strabismus or retinal detachment surgery) or restrictive myopathy (eg, dysthyroid ophthalmopathy) (List separately in addition to code for primary procedure)	1
67334	Strabismus surgery by posterior fixation suture technique, with or without muscle recession (List separately in addition to code for primary procedure)	1
67335	Placement of adjustable suture(s) during strabismus surgery, including postoperative adjustment(s) of suture(s) (List separately in addition to code for specific strabismus surgery)	1
67340	Strabismus surgery involving exploration and/or repair of detached extraocular muscle(s) (List separately in addition to code for primary procedure)	1

67343	Release of extensive scar tissue without detaching extraocular muscle (separate procedure)	2
67345	Chemodenervation of extraocular muscle	1
67399	Unlisted procedure, extraocular muscle	1
67400	Orbitotomy without bone flap (frontal or transconjunctival approach); for exploration, with or without biopsy	2
67405	Orbitotomy without bone flap (frontal or transconjunctival approach); with drainage only	2
67412	Orbitotomy without bone flap (frontal or transconjunctival approach); with removal of lesion	2
67413	Orbitotomy without bone flap (frontal or transconjunctival approach); with removal of foreign body	2
67414	Orbitotomy without bone flap (frontal or transconjunctival approach); with removal of bone for decompression	2
67415	Fine needle aspiration of orbital contents	1
67420	Orbitotomy with bone flap or window, lateral approach (eg, Kroenlein); with removal of lesion	2
67430	Orbitotomy with bone flap or window, lateral approach (eg, Kroenlein); with removal of foreign body	2
67440	Orbitotomy with bone flap or window, lateral approach (eg, Kroenlein); with drainage	2
67445	Orbitotomy with bone flap or window, lateral approach (eg, Kroenlein); with removal of bone for decompression	1
67450	Orbitotomy with bone flap or window, lateral approach (eg, Kroenlein); for exploration, with or without biopsy	2
67500	Retrobulbar injection; medication (separate procedure, does not include supply of medication)	2
67505	Retrobulbar injection; alcohol	2
67515	Injection of medication or other substance into Tenon's capsule	1
67550	Orbital implant (implant outside muscle cone); insertion	2
67560	Orbital implant (implant outside muscle cone); removal or revision	1
67570	Optic nerve decompression (eg, incision or fenestration of optic nerve sheath)	2
67599	Unlisted procedure, orbit	1
67700	Blepharotomy, drainage of abscess, eyelid	2
67710	Severing of tarsorrhaphy	1
67715	Canthotomy (separate procedure)	1
67800	Excision of chalazion; single	1
67801	Excision of chalazion; multiple, same lid	1

67805	Excision of chalazion; multiple, different lids	1
67808	Excision of chalazion; under general anesthesia and/or requiring hospitalization, single or multiple	1
67810	Incisional biopsy of eyelid skin including lid margin	2
67820	Correction of trichiasis; epilation, by forceps only	2
67825	Correction of trichiasis; epilation by other than forceps (eg, by electrosurgery, cryotherapy, laser surgery)	2
67830	Correction of trichiasis; incision of lid margin	2
67835	Correction of trichiasis; incision of lid margin, with free mucous membrane graft	2
67840	Excision of lesion of eyelid (except chalazion) without closure or with simple direct closure	2
67850	Destruction of lesion of lid margin (up to 1 cm)	1
67875	Temporary closure of eyelids by suture (eg, Frost suture)	1
67880	Construction of intermarginal adhesions, median tarsorrhaphy, or canthorrhaphy	2
67882	Construction of intermarginal adhesions, median tarsorrhaphy, or canthorrhaphy; with transposition of tarsal plate	1
67900	Repair of brow ptosis (supraciliary, mid-forehead or coronal approach)	1
67901	Repair of blepharoptosis; frontalis muscle technique with suture or other material (eg, banked fascia)	2
67902	Repair of blepharoptosis; frontalis muscle technique with autologous fascial sling (includes obtaining fascia)	2
67903	Repair of blepharoptosis; (tarso) levator resection or advancement, internal approach	2
67904	Repair of blepharoptosis; (tarso) levator resection or advancement, external approach	2
67906	Repair of blepharoptosis; superior rectus technique with fascial sling (includes obtaining fascia)	2
67908	Repair of blepharoptosis; conjunctivo-tarso-Muller's muscle-levator resection (eg, Fasanella-Servat type)	2
67909	Reduction of overcorrection of ptosis	2
67911	Correction of lid retraction	2
67912	Correction of lagophthalmos, with implantation of upper eyelid lid load (eg, gold weight)	2
67914	Repair of ectropion; suture	2
67915	Repair of ectropion; thermocauterization	2
67916	Repair of ectropion; excision tarsal wedge	2
67917	Repair of ectropion; extensive (eg, tarsal strip operations)	2
67921	Repair of entropion; suture	2

67922	Repair of entropion; thermocauterization	2
67923	Repair of entropion; excision tarsal wedge	2
67924	Repair of entropion; extensive (eg, tarsal strip or capsulopalpebral fascia repairs operation)	2
67930	Suture of recent wound, eyelid, involving lid margin, tarsus, and/or palpebral conjunctiva direct closure; partial thickness	2
67935	Suture of recent wound, eyelid, involving lid margin, tarsus, and/or palpebral conjunctiva direct closure; full thickness	1
67938	Removal of embedded foreign body, eyelid	2
67950	Canthoplasty (reconstruction of canthus)	2
67961	Excision and repair of eyelid, involving lid margin, tarsus, conjunctiva, canthus, or full thickness, may include preparation for skin graft or pedicle flap with adjacent tissue transfer or rearrangement; up to one-fourth of lid margin	2
67966	Excision and repair of eyelid, involving lid margin, tarsus, conjunctiva, canthus, or full thickness, may include preparation for skin graft or pedicle flap with adjacent tissue transfer or rearrangement; over one-fourth of lid margin	2
67971	Reconstruction of eyelid, full thickness by transfer of tarsoconjunctival flap from opposing eyelid; up to two-thirds of eyelid, 1 stage or first stage	1
67973	Reconstruction of eyelid, full thickness by transfer of tarsoconjunctival flap from opposing eyelid; total eyelid, lower, 1 stage or first stage	2
67974	Reconstruction of eyelid, full thickness by transfer of tarsoconjunctival flap from opposing eyelid; total eyelid, upper, 1 stage or first stage	2
67975	Reconstruction of eyelid, full thickness by transfer of tarsoconjunctival flap from opposing eyelid; second stage	1
67999	Unlisted procedure, eyelids	1
68020	Incision of conjunctiva, drainage of cyst	2
68040	Expression of conjunctival follicles (eg, for trachoma)	1
68100	Biopsy of conjunctiva	2
68110	Excision of lesion, conjunctiva; up to 1 cm	2
68115	Excision of lesion, conjunctiva; over 1 cm	2
68130	Excision of lesion, conjunctiva; with adjacent sclera	2
68135	Destruction of lesion, conjunctiva	2
68200	Subconjunctival injection	2
68320	Conjunctivoplasty; with conjunctival graft or extensive rearrangement	2
68325	Conjunctivoplasty; with buccal mucous membrane graft (includes obtaining graft)	2
68326	Conjunctivoplasty, reconstruction cul-de-sac; with conjunctival graft or extensive rearrangement	2
68328	Conjunctivoplasty, reconstruction cul-de-sac; with buccal mucous membrane graft (includes obtaining graft)	2

68330	Repair of symblepharon; conjunctivoplasty, without graft	2
68335	Repair of symblepharon; with free graft conjunctiva or buccal mucous membrane (includes obtaining graft)	2
68340	Repair of symblepharon; division of symblepharon, with or without insertion of conformer or contact lens	2
68360	Conjunctival flap; bridge or partial (separate procedure)	2
68362	Conjunctival flap; total (such as Gunderson thin flap or purse string flap)	2
68371	Harvesting conjunctival allograft, living donor	1
68399	Unlisted procedure, conjunctiva	1
68400	Incision, drainage of lacrimal gland	2
68420	Incision, drainage of lacrimal sac (dacryocystotomy or dacryocystostomy)	2
68440	Snip incision of lacrimal punctum	2
68500	Excision of lacrimal gland (dacryoadenectomy), except for tumor; total	2
68505	Excision of lacrimal gland (dacryoadenectomy), except for tumor; partial	2
68510	Biopsy of lacrimal gland	2
68520	Excision of lacrimal sac (dacryocystectomy)	2
68525	Biopsy of lacrimal sac	1
68530	Removal of foreign body or dacryolith, lacrimal passages	1
68540	Excision of lacrimal gland tumor; frontal approach	2
68550	Excision of lacrimal gland tumor; involving osteotomy	2
68700	Plastic repair of canaliculi	2
68705	Correction of everted punctum, cautery	1
68720	Dacryocystorhinostomy (fistulization of lacrimal sac to nasal cavity)	1
68745	Conjunctivorhinostomy (fistulization of conjunctiva to nasal cavity); without tube	2
68750	Conjunctivorhinostomy (fistulization of conjunctiva to nasal cavity); with insertion of tube or stent	2
68760	Closure of the lacrimal punctum; by thermocauterization, ligation, or laser surgery	2
68761	Closure of the lacrimal punctum; by plug, each	2
68770	Closure of lacrimal fistula (separate procedure)	1
68801	Dilation of lacrimal punctum, with or without irrigation	4
68810	Probing of nasolacrimal duct, with or without irrigation	1
68811	Probing of nasolacrimal duct, with or without irrigation; requiring general anesthesia	2
68815	Probing of nasolacrimal duct, with or without irrigation; with insertion of tube or stent	2

68816	Probing of nasolacrimal duct, with or without irrigation; with transluminal balloon catheter dilation	2
68840	Probing of lacrimal canaliculi, with or without irrigation	2
68850	Injection of contrast medium for dacryocystography	2
68899	Unlisted procedure, lacrimal system	1
69000	Drainage external ear, abscess or hematoma; simple	2
69005	Drainage external ear, abscess or hematoma; complicated	2
69020	Drainage external auditory canal, abscess	2
69090	Ear piercing	1
69100	Biopsy external ear	2
69105	Biopsy external auditory canal	2
69110	Excision external ear; partial, simple repair	2
69120	Excision external ear; complete amputation	2
69140	Excision exostosis(es), external auditory canal	2
69145	Excision soft tissue lesion, external auditory canal	2
69150	Radical excision external auditory canal lesion; without neck dissection	2
69155	Radical excision external auditory canal lesion; with neck dissection	2
69200	Removal foreign body from external auditory canal; without general anesthesia	2
69205	Removal foreign body from external auditory canal; with general anesthesia	2
69209	Removal impacted cerumen using irrigation/lavage, unilateral	2
69210	Removal impacted cerumen requiring instrumentation, unilateral	2
69220	Debridement, mastoidectomy cavity, simple (eg, routine cleaning)	2
69222	Debridement, mastoidectomy cavity, complex (eg, with anesthesia or more than routine cleaning)	2
69300	Otoplasty, protruding ear, with or without size reduction	1
69310	Reconstruction of external auditory canal (meatoplasty) (eg, for stenosis due to injury, infection) (separate procedure)	1
69320	Reconstruction external auditory canal for congenital atresia, single stage	2
69399	Unlisted procedure, external ear	1
69420	Myringotomy including aspiration and/or eustachian tube inflation	2
69421	Myringotomy including aspiration and/or eustachian tube inflation requiring general anesthesia	2
69424	Ventilating tube removal requiring general anesthesia	2
69433	Tympanostomy (requiring insertion of ventilating tube), local or topical anesthesia	2
69436	Tympanostomy (requiring insertion of ventilating tube), general anesthesia	2
69440	Middle ear exploration through postauricular or ear canal incision	2

69450	Tympanolysis, transcanal	1
69501	Transmastoid antrotomy (simple mastoidectomy)	1
69502	Mastoidectomy; complete	2
69505	Mastoidectomy; modified radical	1
69511	Mastoidectomy; radical	1
69530	Petrous apicectomy including radical mastoidectomy	2
69535	Resection temporal bone, external approach	2
69540	Excision aural polyp	2
69550	Excision aural glomus tumor; transcanal	2
69552	Excision aural glomus tumor; transmastoid	1
69554	Excision aural glomus tumor; extended (extratemporal)	2
69601	Revision mastoidectomy; resulting in complete mastoidectomy	2
69602	Revision mastoidectomy; resulting in modified radical mastoidectomy	2
69603	Revision mastoidectomy; resulting in radical mastoidectomy	2
69604	Revision mastoidectomy; resulting in tympanoplasty	2
69610	Tympanic membrane repair, with or without site preparation of perforation for closure, with or without patch	1
69620	Myringoplasty (surgery confined to drumhead and donor area)	2
69631	Tympanoplasty without mastoidectomy (including canalplasty, atticotomy and/or middle ear surgery), initial or revision; without ossicular chain reconstruction	2
69632	Tympanoplasty without mastoidectomy (including canalplasty, atticotomy and/or middle ear surgery), initial or revision; with ossicular chain reconstruction (eg, postfenestration)	2
69633	Tympanoplasty without mastoidectomy (including canalplasty, atticotomy and/or middle ear surgery), initial or revision; with ossicular chain reconstruction and synthetic prosthesis (eg, partial ossicular replacement prosthesis [PORP], total ossicular replacement prosthesis [TORP])	1
69635	Tympanoplasty with antrotomy or mastoidotomy (including canalplasty, atticotomy, middle ear surgery, and/or tympanic membrane repair); without ossicular chain reconstruction	1
69636	Tympanoplasty with antrotomy or mastoidotomy (including canalplasty, atticotomy, middle ear surgery, and/or tympanic membrane repair); with ossicular chain reconstruction	1
69637	Tympanoplasty with antrotomy or mastoidotomy (including canalplasty, atticotomy, middle ear surgery, and/or tympanic membrane repair); with ossicular chain reconstruction and synthetic prosthesis (eg, partial ossicular replacement prosthesis [PORP], total ossicular replacement prosthesis [TORP])	1
69641	Tympanoplasty with mastoidectomy (including canalplasty, middle ear surgery, tympanic membrane repair); without ossicular chain reconstruction	1

69642	Tympanoplasty with mastoidectomy (including canalplasty, middle ear surgery, tympanic membrane repair); with ossicular chain reconstruction	1
69643	Tympanoplasty with mastoidectomy (including canalplasty, middle ear surgery, tympanic membrane repair); with intact or reconstructed wall, without ossicular chain reconstruction	1
69644	Tympanoplasty with mastoidectomy (including canalplasty, middle ear surgery, tympanic membrane repair); with intact or reconstructed canal wall, with ossicular chain reconstruction	1
69645	Tympanoplasty with mastoidectomy (including canalplasty, middle ear surgery, tympanic membrane repair); radical or complete, without ossicular chain reconstruction	1
69646	Tympanoplasty with mastoidectomy (including canalplasty, middle ear surgery, tympanic membrane repair); radical or complete, with ossicular chain reconstruction	1
69650	Stapes mobilization	2
69660	Stapedectomy or stapedotomy with reestablishment of ossicular continuity, with or without use of foreign material	1
69661	Stapedectomy or stapedotomy with reestablishment of ossicular continuity, with or without use of foreign material; with footplate drill out	1
69662	Revision of stapedectomy or stapedotomy	1
69666	Repair oval window fistula	1
69667	Repair round window fistula	1
69670	Mastoid obliteration (separate procedure)	2
69676	Tympanic neurectomy	2
69700	Closure postauricular fistula, mastoid (separate procedure)	2
69705	Nasopharyngoscopy, surgical, with dilation of eustachian tube (ie, balloon dilation); unilateral	1
69706	Nasopharyngoscopy, surgical, with dilation of eustachian tube (ie, balloon dilation); bilateral	1
69716	Implantation, osseointegrated implant, skull; with magnetic transcutaneous attachment to external speech processor	1
69719	Revision or replacement (including removal of existing device), osseointegrated implant, skull; with magnetic transcutaneous attachment to external speech processor	1
69720	Decompression facial nerve, intratemporal; lateral to geniculate ganglion	1
69725	Decompression facial nerve, intratemporal; including medial to geniculate ganglion	2
69726	Removal, osseointegrated implant, skull; with percutaneous attachment to external speech processor	1
69727	Removal, osseointegrated implant, skull; with magnetic transcutaneous attachment to external speech processor	1

69740	Suture facial nerve, intratemporal, with or without graft or decompression; lateral to geniculate ganglion	1
69745	Suture facial nerve, intratemporal, with or without graft or decompression; including medial to geniculate ganglion	1
69799	Unlisted procedure, middle ear	1
69801	Labyrinthotomy, with perfusion of vestibuloactive drug(s), transcanal	1
69805	Endolymphatic sac operation; without shunt	1
69806	Endolymphatic sac operation; with shunt	1
69905	Labyrinthectomy; transcanal	1
69910	Labyrinthectomy; with mastoidectomy	1
69915	Vestibular nerve section, translabyrinthine approach	2
69930	Cochlear device implantation, with or without mastoidectomy	1
69949	Unlisted procedure, inner ear	1
69950	Vestibular nerve section, transcranial approach	2
69955	Total facial nerve decompression and/or repair (may include graft)	1
69960	Decompression internal auditory canal	1
69970	Removal of tumor, temporal bone	1
69979	Unlisted procedure, temporal bone, middle fossa approach	1
69990	Microsurgical techniques, requiring use of operating microscope (List separately in addition to code for primary procedure)	1
70010	Myelography, posterior fossa, radiological supervision and interpretation	1
70015	Cisternography, positive contrast, radiological supervision and interpretation	1
70030	Radiologic examination, eye, for detection of foreign body	2
70100	Radiologic examination, mandible; partial, less than 4 views	1
70110	Radiologic examination, mandible; complete, minimum of 4 views	1
70120	Radiologic examination, mastoids; less than 3 views per side	2
70130	Radiologic examination, mastoids; complete, minimum of 3 views per side	2
70134	Radiologic examination, internal auditory meati, complete	1
70140	Radiologic examination, facial bones; less than 3 views	1
70150	Radiologic examination, facial bones; complete, minimum of 3 views	1
70160	Radiologic examination, nasal bones, complete, minimum of 3 views	1
70170	Dacryocystography, nasolacrimal duct, radiological supervision and interpretation	2
70190	Radiologic examination; optic foramina	1
70200	Radiologic examination; orbits, complete, minimum of 4 views	1
70210	Radiologic examination, sinuses, paranasal, less than 3 views	1

70220	Radiologic examination, sinuses, paranasal, complete, minimum of 3 views	1
70220		
	Radiologic examination, sella turcica	1
70250	Radiologic examination, skull; less than 4 views	1
70260	Radiologic examination, skull; complete, minimum of 4 views	1
70300	Radiologic examination, teeth; single view	1
70310	Radiologic examination, teeth; partial examination, less than full mouth	1
70320	Radiologic examination, teeth; complete, full mouth	1
70328	Radiologic examination, temporomandibular joint, open and closed mouth; unilateral	1
70330	Radiologic examination, temporomandibular joint, open and closed mouth; bilateral	1
70332	Temporomandibular joint arthrography, radiological supervision and interpretation	1
70336	Magnetic resonance (eg, proton) imaging, temporomandibular joint(s)	1
70350	Cephalogram, orthodontic	1
70355	Orthopantogram (eg, panoramic x-ray)	1
70360	Radiologic examination; neck, soft tissue	1
70370	Radiologic examination; pharynx or larynx, including fluoroscopy and/or magnification technique	1
70371	Complex dynamic pharyngeal and speech evaluation by cine or video recording	1
70380	Radiologic examination, salivary gland for calculus	1
70390	Sialography, radiological supervision and interpretation	1
70450	Computed tomography, head or brain; without contrast material	1
70460	Computed tomography, head or brain; with contrast material(s)	1
70470	Computed tomography, head or brain; without contrast material, followed by contrast material(s) and further sections	1
70480	Computed tomography, orbit, sella, or posterior fossa or outer, middle, or inner ear; without contrast material	1
70481	Computed tomography, orbit, sella, or posterior fossa or outer, middle, or inner ear; with contrast material(s)	1
70482	Computed tomography, orbit, sella, or posterior fossa or outer, middle, or inner ear; without contrast material, followed by contrast material(s) and further sections	1
70486	Computed tomography, maxillofacial area; without contrast material	1
70487	Computed tomography, maxillofacial area; with contrast material(s)	1
70488	Computed tomography, maxillofacial area; without contrast material, followed by contrast material(s) and further sections	1
70490	Computed tomography, soft tissue neck; without contrast material	1
70491	Computed tomography, soft tissue neck; with contrast material(s)	1
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70492	Computed tomography, soft tissue neck; without contrast material followed by contrast material(s) and further sections	1
70496	Computed tomographic angiography, head, with contrast material(s), including noncontrast images, if performed, and image postprocessing	1
70498	Computed tomographic angiography, neck, with contrast material(s), including noncontrast images, if performed, and image postprocessing	1
70540	Magnetic resonance (eg, proton) imaging, orbit, face, and/or neck; without contrast material(s)	1
70542	Magnetic resonance (eg, proton) imaging, orbit, face, and/or neck; with contrast material(s)	1
70543	Magnetic resonance (eg, proton) imaging, orbit, face, and/or neck; without contrast material(s), followed by contrast material(s) and further sequences	1
70544	Magnetic resonance angiography, head; without contrast material(s)	1
70545	Magnetic resonance angiography, head; with contrast material(s)	1
70546	Magnetic resonance angiography, head; without contrast material(s), followed by contrast material(s) and further sequences	1
70547	Magnetic resonance angiography, neck; without contrast material(s)	1
70548	Magnetic resonance angiography, neck; with contrast material(s)	1
70549	Magnetic resonance angiography, neck; without contrast material(s), followed by contrast material(s) and further sequences	1
70551	Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material	1
70552	Magnetic resonance (eg, proton) imaging, brain (including brain stem); with contrast material(s)	1
70553	Magnetic resonance (eg, proton) imaging, brain (including brain stem); without contrast material, followed by contrast material(s) and further sequences	1
70554	Magnetic resonance imaging, brain, functional MRI; including test selection and administration of repetitive body part movement and/or visual stimulation, not requiring physician or psychologist administration	1
70555	Magnetic resonance imaging, brain, functional MRI; requiring physician or psychologist administration of entire neurofunctional testing	1
70557	Magnetic resonance (eg, proton) imaging, brain (including brain stem and skull base), during open intracranial procedure (eg, to assess for residual tumor or residual vascular malformation); without contrast material	1
70558	Magnetic resonance (eg, proton) imaging, brain (including brain stem and skull base), during open intracranial procedure (eg, to assess for residual tumor or residual vascular malformation); with contrast material(s)	1
70559	Magnetic resonance (eg, proton) imaging, brain (including brain stem and skull base), during open intracranial procedure (eg, to assess for residual tumor or residual vascular malformation); without contrast material(s), followed by contrast material(s) and further sequences	1

71045	Radiologic examination, chest; single view	1
71046	Radiologic examination, chest; 2 views	1
71047	Radiologic examination, chest; 3 views	1
71048	Radiologic examination, chest; 4 or more views	1
71100	Radiologic examination, ribs, unilateral; 2 views	1
71101	Radiologic examination, ribs, unilateral; including posteroanterior chest, minimum of 3 views	1
71110	Radiologic examination, ribs, bilateral; 3 views	1
71111	Radiologic examination, ribs, bilateral; including posteroanterior chest, minimum of 4 views	1
71120	Radiologic examination; sternum, minimum of 2 views	1
71130	Radiologic examination; sternoclavicular joint or joints, minimum of 3 views	1
71250	Computed tomography, thorax, diagnostic; without contrast material	1
71260	Computed tomography, thorax, diagnostic; with contrast material(s)	1
71270	Computed tomography, thorax, diagnostic; without contrast material, followed by contrast material(s) and further sections	1
71271	Computed tomography, thorax, low dose for lung cancer screening, without contrast material(s)	1
71275	Computed tomographic angiography, chest (noncoronary), with contrast material(s), including noncontrast images, if performed, and image postprocessing	1
71550	Magnetic resonance (eg, proton) imaging, chest (eg, for evaluation of hilar and mediastinal lymphadenopathy); without contrast material(s)	1
71551	Magnetic resonance (eg, proton) imaging, chest (eg, for evaluation of hilar and mediastinal lymphadenopathy); with contrast material(s)	1
71552	Magnetic resonance (eg, proton) imaging, chest (eg, for evaluation of hilar and mediastinal lymphadenopathy); without contrast material(s), followed by contrast material(s) and further sequences	1
71555	Magnetic resonance angiography, chest (excluding myocardium), with or without contrast material(s)	1
72020	Radiologic examination, spine, single view, specify level	1
72040	Radiologic examination, spine, cervical; 2 or 3 views	1
72050	Radiologic examination, spine, cervical; 4 or 5 views	1
72052	Radiologic examination, spine, cervical; 6 or more views	1
72070	Radiologic examination, spine; thoracic, 2 views	1
72072	Radiologic examination, spine; thoracic, 3 views	1
72074	Radiologic examination, spine; thoracic, minimum of 4 views	1
72080	Radiologic examination, spine; thoracolumbar junction, minimum of 2 views	1

Radiologic examination, spine, entire thoracic and lumbar, including skull, cervical and sacral spine if performed (eg, scoliosis evaluation); one view	1
Radiologic examination, spine, entire thoracic and lumbar, including skull, cervical and sacral spine if performed (eg, scoliosis evaluation); 2 or 3 views	1
Radiologic examination, spine, entire thoracic and lumbar, including skull, cervical and sacral spine if performed (eg, scoliosis evaluation); 4 or 5 views	1
Radiologic examination, spine, entire thoracic and lumbar, including skull, cervical and sacral spine if performed (eg, scoliosis evaluation); minimum of 6 views	1
Radiologic examination, spine, lumbosacral; 2 or 3 views	1
Radiologic examination, spine, lumbosacral; minimum of 4 views	1
Radiologic examination, spine, lumbosacral; complete, including bending views, minimum of 6 views	1
Radiologic examination, spine, lumbosacral; bending views only, 2 or 3 views	1
Computed tomography, cervical spine; without contrast material	1
Computed tomography, cervical spine; with contrast material	1
Computed tomography, cervical spine; without contrast material, followed by contrast material(s) and further sections	1
Computed tomography, thoracic spine; without contrast material	1
Computed tomography, thoracic spine; with contrast material	1
Computed tomography, thoracic spine; without contrast material, followed by contrast material(s) and further sections	1
Computed tomography, lumbar spine; without contrast material	1
Computed tomography, lumbar spine; with contrast material	1
Computed tomography, lumbar spine; without contrast material, followed by contrast material(s) and further sections	1
Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; without contrast material	1
Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; with contrast material(s)	1
Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; without contrast material	1
Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; with contrast material(s)	1
Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; without contrast material	1
Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; with contrast material(s)	1
Magnetic resonance (eg, proton) imaging, spinal canal and contents, without contrast material, followed by contrast material(s) and further sequences; cervical	1
	and sacral spine if performed (eg, scoliosis evaluation); one view Radiologic examination, spine, entire thoracic and lumbar, including skull, cervical and sacral spine if performed (eg, scoliosis evaluation); 2 or 3 views Radiologic examination, spine, entire thoracic and lumbar, including skull, cervical and sacral spine if performed (eg, scoliosis evaluation); 4 or 5 views Radiologic examination, spine, entire thoracic and lumbar, including skull, cervical and sacral spine if performed (eg, scoliosis evaluation); minimum of 6 views Radiologic examination, spine, lumbosacral; 2 or 3 views Radiologic examination, spine, lumbosacral; complete, including bending views, minimum of 6 views Radiologic examination, spine, lumbosacral; complete, including bending views, minimum of 6 views Radiologic examination, spine, lumbosacral; bending views only, 2 or 3 views Computed tomography, cervical spine; without contrast material Computed tomography, cervical spine; without contrast material Computed tomography, cervical spine; without contrast material, followed by contrast material(s) and further sections Computed tomography, thoracic spine; without contrast material Computed tomography, thoracic spine; without contrast material Computed tomography, lumbar spine; without contrast material Magnetic resonance (eg, proton) imaging, spinal canal and contents, cervical; with contrast material(s) and further sections Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; with contrast material(s) Magnetic resonance (eg, proton) imaging, spinal canal and contents, thoracic; with contrast material(s) Magnetic resonance (eg, proton) imaging, spinal canal and contents, lumbar; with contrast material(s) Magnetic resonance (eg, proton) imaging, sp

72157	Magnetic resonance (eg, proton) imaging, spinal canal and contents, without contrast material, followed by contrast material(s) and further sequences; thoracic	1
72158	Magnetic resonance (eg, proton) imaging, spinal canal and contents, without contrast material, followed by contrast material(s) and further sequences; lumbar	1
72159	Magnetic resonance angiography, spinal canal and contents, with or without contrast material(s)	1
72170	Radiologic examination, pelvis; 1 or 2 views	1
72190	Radiologic examination, pelvis; complete, minimum of 3 views	1
72191	Computed tomographic angiography, pelvis, with contrast material(s), including noncontrast images, if performed, and image postprocessing	1
72192	Computed tomography, pelvis; without contrast material	1
72193	Computed tomography, pelvis; with contrast material(s)	1
72194	Computed tomography, pelvis; without contrast material, followed by contrast material(s) and further sections	1
72195	Magnetic resonance (eg, proton) imaging, pelvis; without contrast material(s)	1
72196	Magnetic resonance (eg, proton) imaging, pelvis; with contrast material(s)	1
72197	Magnetic resonance (eg, proton) imaging, pelvis; without contrast material(s), followed by contrast material(s) and further sequences	1
72198	Magnetic resonance angiography, pelvis, with or without contrast material(s)	1
72200	Radiologic examination, sacroiliac joints; less than 3 views	1
72202	Radiologic examination, sacroiliac joints; 3 or more views	1
72220	Radiologic examination, sacrum and coccyx, minimum of 2 views	1
72240	Myelography, cervical, radiological supervision and interpretation	1
72255	Myelography, thoracic, radiological supervision and interpretation	1
72265	Myelography, lumbosacral, radiological supervision and interpretation	1
72270	Myelography, 2 or more regions (eg, lumbar/thoracic, cervical/thoracic, lumbar/cervical, lumbar/thoracic/cervical), radiological supervision and interpretation	1
72285	Discography, cervical or thoracic, radiological supervision and interpretation	1
72295	Discography, lumbar, radiological supervision and interpretation	1
73000	Radiologic examination; clavicle, complete	2
73010	Radiologic examination; scapula, complete	2
73020	Radiologic examination, shoulder; 1 view	2
73030	Radiologic examination, shoulder; complete, minimum of 2 views	2
73040	Radiologic examination, shoulder, arthrography, radiological supervision and interpretation	2
73050	Radiologic examination; acromioclavicular joints, bilateral, with or without weighted distraction	1

73060	Radiologic examination; humerus, minimum of 2 views	2
		2
73070	Radiologic examination, elbow; 2 views	
73080	Radiologic examination, elbow; complete, minimum of 3 views	2
73085	Radiologic examination, elbow, arthrography, radiological supervision and interpretation	2
73090	Radiologic examination; forearm, 2 views	2
73092	Radiologic examination; upper extremity, infant, minimum of 2 views	2
73100	Radiologic examination, wrist; 2 views	2
73110	Radiologic examination, wrist; complete, minimum of 3 views	2
73115	Radiologic examination, wrist, arthrography, radiological supervision and interpretation	2
73120	Radiologic examination, hand; 2 views	2
73130	Radiologic examination, hand; minimum of 3 views	2
73140	Radiologic examination, finger(s), minimum of 2 views	2
73200	Computed tomography, upper extremity; without contrast material	2
73201	Computed tomography, upper extremity; with contrast material(s)	2
73202	Computed tomography, upper extremity; without contrast material, followed by contrast material(s) and further sections	2
73206	Computed tomographic angiography, upper extremity, with contrast material(s), including noncontrast images, if performed, and image postprocessing	2
73218	Magnetic resonance (eg, proton) imaging, upper extremity, other than joint; without contrast material(s)	2
73219	Magnetic resonance (eg, proton) imaging, upper extremity, other than joint; with contrast material(s)	2
73220	Magnetic resonance (eg, proton) imaging, upper extremity, other than joint; without contrast material(s), followed by contrast material(s) and further sequences	2
73221	Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s)	2
73222	Magnetic resonance (eg, proton) imaging, any joint of upper extremity; with contrast material(s)	2
73223	Magnetic resonance (eg, proton) imaging, any joint of upper extremity; without contrast material(s), followed by contrast material(s) and further sequences	2
73225	Magnetic resonance angiography, upper extremity, with or without contrast material(s)	2
73501	Radiologic examination, hip, unilateral, with pelvis when performed; 1 view	2
73502	Radiologic examination, hip, unilateral, with pelvis when performed; 2-3 views	1
73503	Radiologic examination, hip, unilateral, with pelvis when performed; minimum of 4 views	1

73521	Radiologic examination, hips, bilateral, with pelvis when performed; 2 views	1
73522	Radiologic examination, hips, bilateral, with pelvis when performed; 3-4 views	1
73523	Radiologic examination, hips, bilateral, with pelvis when performed; minimum of 5 views	1
73525	Radiologic examination, hip, arthrography, radiological supervision and interpretation	2
73551	Radiologic examination, femur; 1 view	2
73552	Radiologic examination, femur; minimum 2 views	2
73560	Radiologic examination, knee; 1 or 2 views	2
73562	Radiologic examination, knee; 3 views	2
73564	Radiologic examination, knee; complete, 4 or more views	2
73565	Radiologic examination, knee; both knees, standing, anteroposterior	1
73580	Radiologic examination, knee, arthrography, radiological supervision and interpretation	2
73590	Radiologic examination; tibia and fibula, 2 views	2
73592	Radiologic examination; lower extremity, infant, minimum of 2 views	2
73600	Radiologic examination, ankle; 2 views	2
73610	Radiologic examination, ankle; complete, minimum of 3 views	2
73615	Radiologic examination, ankle, arthrography, radiological supervision and interpretation	2
73620	Radiologic examination, foot; 2 views	2
73630	Radiologic examination, foot; complete, minimum of 3 views	2
73650	Radiologic examination; calcaneus, minimum of 2 views	2
73660	Radiologic examination; toe(s), minimum of 2 views	2
73700	Computed tomography, lower extremity; without contrast material	2
73701	Computed tomography, lower extremity; with contrast material(s)	2
73702	Computed tomography, lower extremity; without contrast material, followed by contrast material(s) and further sections	2
73706	Computed tomographic angiography, lower extremity, with contrast material(s), including noncontrast images, if performed, and image postprocessing	2
73718	Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s)	2
73719	Magnetic resonance (eg, proton) imaging, lower extremity other than joint; with contrast material(s)	2
73720	Magnetic resonance (eg, proton) imaging, lower extremity other than joint; without contrast material(s), followed by contrast material(s) and further sequences	2
73721	Magnetic resonance (eg, proton) imaging, any joint of lower extremity; without contrast material	2

73722	Magnetic resonance (eg, proton) imaging, any joint of lower extremity; with contrast material(s)	2
73723	Magnetic resonance (eg, proton) imaging, any joint of lower extremity; without contrast material(s), followed by contrast material(s) and further sequences	2
73725	Magnetic resonance angiography, lower extremity, with or without contrast material(s)	2
74018	Radiologic examination, abdomen; 1 view	1
74019	Radiologic examination, abdomen; 2 views	1
74021	Radiologic examination, abdomen; 3 or more views	1
74022	Radiologic examination, complete acute abdomen series, including 2 or more views of the abdomen (eg, supine, erect, decubitus), and a single view chest	1
74150	Computed tomography, abdomen; without contrast material	1
74160	Computed tomography, abdomen; with contrast material(s)	1
74170	Computed tomography, abdomen; without contrast material, followed by contrast material(s) and further sections	1
74174	Computed tomographic angiography, abdomen and pelvis, with contrast material(s), including noncontrast images, if performed, and image postprocessing	1
74175	Computed tomographic angiography, abdomen, with contrast material(s), including noncontrast images, if performed, and image postprocessing	1
74176	Computed tomography, abdomen and pelvis; without contrast material	1
74177	Computed tomography, abdomen and pelvis; with contrast material(s)	1
74178	Computed tomography, abdomen and pelvis; without contrast material in one or both body regions, followed by contrast material(s) and further sections in one or both body regions	1
74181	Magnetic resonance (eg, proton) imaging, abdomen; without contrast material(s)	1
74182	Magnetic resonance (eg, proton) imaging, abdomen; with contrast material(s)	1
74183	Magnetic resonance (eg, proton) imaging, abdomen; without contrast material(s), followed by with contrast material(s) and further sequences	1
74185	Magnetic resonance angiography, abdomen, with or without contrast material(s)	1
74190	Peritoneogram (eg, after injection of air or contrast), radiological supervision and interpretation	1
74210	Radiologic examination, pharynx and/or cervical esophagus, including scout neck radiograph(s) and delayed image(s), when performed, contrast (eg, barium) study	1
74220	Radiologic examination, esophagus, including scout chest radiograph(s) and delayed image(s), when performed; single-contrast (eg, barium) study	1
74221	Radiologic examination, esophagus, including scout chest radiograph(s) and delayed image(s), when performed; double-contrast (eg, high-density barium and effervescent agent) study	1

74230	Radiologic examination, swallowing function, with cineradiography/videoradiography, including scout neck radiograph(s) and delayed image(s), when performed, contrast (eg, barium) study	1
74235	Removal of foreign body(s), esophageal, with use of balloon catheter, radiological supervision and interpretation	1
74240	Radiologic examination, upper gastrointestinal tract, including scout abdominal radiograph(s) and delayed image(s), when performed; single-contrast (eg, barium) study	1
74246	Radiologic examination, upper gastrointestinal tract, including scout abdominal radiograph(s) and delayed image(s), when performed; double-contrast (eg, highdensity barium and effervescent agent) study, including glucagon, when administered	1
74248	Radiologic small intestine follow-through study, including multiple serial images (List separately in addition to code for primary procedure for upper GI radiologic examination)	1
74250	Radiologic examination, small intestine, including multiple serial images and scout abdominal radiograph(s), when performed; single-contrast (eg, barium) study	1
74251	Radiologic examination, small intestine, including multiple serial images and scout abdominal radiograph(s), when performed; double-contrast (eg, high-density barium and air via enteroclysis tube) study, including glucagon, when administered	1
74261	Computed tomographic (CT) colonography, diagnostic, including image postprocessing; without contrast material	1
74262	Computed tomographic (CT) colonography, diagnostic, including image postprocessing; with contrast material(s) including non-contrast images, if performed	1
74263	Computed tomographic (CT) colonography, screening, including image postprocessing	1
74270	Radiologic examination, colon, including scout abdominal radiograph(s) and delayed image(s), when performed; single-contrast (eg, barium) study	1
74280	Radiologic examination, colon, including scout abdominal radiograph(s) and delayed image(s), when performed; double-contrast (eg, high density barium and air) study, including glucagon, when administered	1
74283	Therapeutic enema, contrast or air, for reduction of intussusception or other intraluminal obstruction (eg, meconium ileus)	1
74290	Cholecystography, oral contrast	1
74300	Cholangiography and/or pancreatography; intraoperative, radiological supervision and interpretation	1
74301	Cholangiography and/or pancreatography; additional set intraoperative, radiological supervision and interpretation (List separately in addition to code for primary procedure)	1
74328	Endoscopic catheterization of the biliary ductal system, radiological supervision and interpretation	1

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74329	Endoscopic catheterization of the pancreatic ductal system, radiological supervision and interpretation	1
74330	Combined endoscopic catheterization of the biliary and pancreatic ductal systems, radiological supervision and interpretation	1
74340	Introduction of long gastrointestinal tube (eg, Miller-Abbott), including multiple fluoroscopies and images, radiological supervision and interpretation	1
74355	Percutaneous placement of enteroclysis tube, radiological supervision and interpretation	1
74360	Intraluminal dilation of strictures and/or obstructions (eg, esophagus), radiological supervision and interpretation	1
74363	Percutaneous transhepatic dilation of biliary duct stricture with or without placement of stent, radiological supervision and interpretation	1
74400	Urography (pyelography), intravenous, with or without KUB, with or without tomography	1
74410	Urography, infusion, drip technique and/or bolus technique	1
74415	Urography, infusion, drip technique and/or bolus technique; with nephrotomography	1
74420	Urography, retrograde, with or without KUB	1
74425	Urography, antegrade, radiological supervision and interpretation	1
74430	Cystography, minimum of 3 views, radiological supervision and interpretation	1
74440	Vasography, vesiculography, or epididymography, radiological supervision and interpretation	1
74445	Corpora cavernosography, radiological supervision and interpretation	1
74450	Urethrocystography, retrograde, radiological supervision and interpretation	1
74455	Urethrocystography, voiding, radiological supervision and interpretation	1
74470	Radiologic examination, renal cyst study, translumbar, contrast visualization, radiological supervision and interpretation	1
74485	Dilation of ureter(s) or urethra, radiological supervision and interpretation	1
74710	Pelvimetry, with or without placental localization	1
74712	Magnetic resonance (eg, proton) imaging, fetal, including placental and maternal pelvic imaging when performed; single or first gestation	1
74713	Magnetic resonance (eg, proton) imaging, fetal, including placental and maternal pelvic imaging when performed; each additional gestation (List separately in addition to code for primary procedure)	2
74740	Hysterosalpingography, radiological supervision and interpretation	1
74742	Transcervical catheterization of fallopian tube, radiological supervision and interpretation	2
74775	Perineogram (eg, vaginogram, for sex determination or extent of anomalies)	1

75557 75559 75561	Cardiac magnetic resonance imaging for morphology and function without contrast material Cardiac magnetic resonance imaging for morphology and function without contrast	1
	Cardiac magnetic resonance imaging for morphology and function without contrast	
75561	material; with stress imaging	1
73301	Cardiac magnetic resonance imaging for morphology and function without contrast material(s), followed by contrast material(s) and further sequences	1
75563	Cardiac magnetic resonance imaging for morphology and function without contrast material(s), followed by contrast material(s) and further sequences; with stress imaging	1
75565	Cardiac magnetic resonance imaging for velocity flow mapping (List separately in addition to code for primary procedure)	1
75571	Computed tomography, heart, without contrast material, with quantitative evaluation of coronary calcium	1
75572	Computed tomography, heart, with contrast material, for evaluation of cardiac structure and morphology (including 3D image postprocessing, assessment of cardiac function, and evaluation of venous structures, if performed)	1
75573	Computed tomography, heart, with contrast material, for evaluation of cardiac structure and morphology in the setting of congenital heart disease (including 3D image postprocessing, assessment of left ventricular [LV] cardiac function, right ventricular [RV] structure and function and evaluation of vascular structures, if performed)	1
75574	Computed tomographic angiography, heart, coronary arteries and bypass grafts (when present), with contrast material, including 3D image postprocessing (including evaluation of cardiac structure and morphology, assessment of cardiac function, and evaluation of venous structures, if performed)	1
75600	Aortography, thoracic, without serialography, radiological supervision and interpretation	1
75605	Aortography, thoracic, by serialography, radiological supervision and interpretation	1
75625	Aortography, abdominal, by serialography, radiological supervision and interpretation	1
75630	Aortography, abdominal plus bilateral iliofemoral lower extremity, catheter, by serialography, radiological supervision and interpretation	1
75635	Computed tomographic angiography, abdominal aorta and bilateral iliofemoral lower extremity runoff, with contrast material(s), including noncontrast images, if performed, and image postprocessing	1
75705	Angiography, spinal, selective, radiological supervision and interpretation	1
75710	Angiography, extremity, unilateral, radiological supervision and interpretation	1
75716	Angiography, extremity, bilateral, radiological supervision and interpretation	1
75726	Angiography, visceral, selective or supraselective (with or without flush aortogram), radiological supervision and interpretation	1
	Angiography, adrenal, unilateral, selective, radiological supervision and	1

75733	Angiography, adrenal, bilateral, selective, radiological supervision and interpretation	1
75736	Angiography, pelvic, selective or supraselective, radiological supervision and interpretation	1
75741	Angiography, pulmonary, unilateral, selective, radiological supervision and interpretation	1
75743	Angiography, pulmonary, bilateral, selective, radiological supervision and interpretation	1
75746	Angiography, pulmonary, by nonselective catheter or venous injection, radiological supervision and interpretation	1
75756	Angiography, internal mammary, radiological supervision and interpretation	1
75774	Angiography, selective, each additional vessel studied after basic examination, radiological supervision and interpretation (List separately in addition to code for primary procedure)	1
75801	Lymphangiography, extremity only, unilateral, radiological supervision and interpretation	1
75803	Lymphangiography, extremity only, bilateral, radiological supervision and interpretation	1
75805	Lymphangiography, pelvic/abdominal, unilateral, radiological supervision and interpretation	1
75807	Lymphangiography, pelvic/abdominal, bilateral, radiological supervision and interpretation	1
75809	Shuntogram for investigation of previously placed indwelling nonvascular shunt (eg, LeVeen shunt, ventriculoperitoneal shunt, indwelling infusion pump), radiological supervision and interpretation	1
75810	Splenoportography, radiological supervision and interpretation	1
75820	Venography, extremity, unilateral, radiological supervision and interpretation	1
75822	Venography, extremity, bilateral, radiological supervision and interpretation	1
75825	Venography, caval, inferior, with serialography, radiological supervision and interpretation	1
75827	Venography, caval, superior, with serialography, radiological supervision and interpretation	1
75831	Venography, renal, unilateral, selective, radiological supervision and interpretation	1
75833	Venography, renal, bilateral, selective, radiological supervision and interpretation	1
75840	Venography, adrenal, unilateral, selective, radiological supervision and interpretation	1
75842	Venography, adrenal, bilateral, selective, radiological supervision and interpretation	1
75860	Venography, venous sinus (eg, petrosal and inferior sagittal) or jugular, catheter, radiological supervision and interpretation	1
75870	Venography, superior sagittal sinus, radiological supervision and interpretation	1

75872	Venography, epidural, radiological supervision and interpretation	1
75880	Venography, orbital, radiological supervision and interpretation	1
75885	Percutaneous transhepatic portography with hemodynamic evaluation, radiological supervision and interpretation	1
75887	Percutaneous transhepatic portography without hemodynamic evaluation, radiological supervision and interpretation	1
75889	Hepatic venography, wedged or free, with hemodynamic evaluation, radiological supervision and interpretation	1
75891	Hepatic venography, wedged or free, without hemodynamic evaluation, radiological supervision and interpretation	1
75893	Venous sampling through catheter, with or without angiography (eg, for parathyroid hormone, renin), radiological supervision and interpretation	1
75894	Transcatheter therapy, embolization, any method, radiological supervision and interpretation	1
75898	Angiography through existing catheter for follow-up study for transcatheter therapy, embolization or infusion, other than for thrombolysis	1
75901	Mechanical removal of pericatheter obstructive material (eg, fibrin sheath) from central venous device via separate venous access, radiologic supervision and interpretation	1
75902	Mechanical removal of intraluminal (intracatheter) obstructive material from central venous device through device lumen, radiologic supervision and interpretation	1
75956	Endovascular repair of descending thoracic aorta (eg, aneurysm, pseudoaneurysm, dissection, penetrating ulcer, intramural hematoma, or traumatic disruption); involving coverage of left subclavian artery origin, initial endoprosthesis plus descending thoracic aortic extension(s), if required, to level of celiac artery origin, radiological supervision and interpretation	1
75957	Endovascular repair of descending thoracic aorta (eg, aneurysm, pseudoaneurysm, dissection, penetrating ulcer, intramural hematoma, or traumatic disruption); not involving coverage of left subclavian artery origin, initial endoprosthesis plus descending thoracic aortic extension(s), if required, to level of celiac artery origin, radiological supervision and interpretation	1
75958	Placement of proximal extension prosthesis for endovascular repair of descending thoracic aorta (eg, aneurysm, pseudoaneurysm, dissection, penetrating ulcer, intramural hematoma, or traumatic disruption), radiological supervision and interpretation	1
75959	Placement of distal extension prosthesis(s) (delayed) after endovascular repair of descending thoracic aorta, as needed, to level of celiac origin, radiological supervision and interpretation	1
75970	Transcatheter biopsy, radiological supervision and interpretation	1
75984	Change of percutaneous tube or drainage catheter with contrast monitoring (eg, genitourinary system, abscess), radiological supervision and interpretation	1

75989	Radiological guidance (ie, fluoroscopy, ultrasound, or computed tomography), for percutaneous drainage (eg, abscess, specimen collection), with placement of catheter, radiological supervision and interpretation	1
76000	Fluoroscopy (separate procedure), up to 1 hour physician or other qualified health care professional time	1
76010	Radiologic examination from nose to rectum for foreign body, single view, child	1
76080	Radiologic examination, abscess, fistula or sinus tract study, radiological supervision and interpretation	1
76098	Radiological examination, surgical specimen	1
76100	Radiologic examination, single plane body section (eg, tomography), other than with urography	1
76101	Radiologic examination, complex motion (ie, hypercycloidal) body section (eg, mastoid polytomography), other than with urography; unilateral	1
76102	Radiologic examination, complex motion (ie, hypercycloidal) body section (eg, mastoid polytomography), other than with urography; bilateral	1
76120	Cineradiography/videoradiography, except where specifically included	1
76125	Cineradiography/videoradiography to complement routine examination (List separately in addition to code for primary procedure)	1
76140	Consultation on X-ray examination made elsewhere, written report	1
76145	Medical physics dose evaluation for radiation exposure that exceeds institutional review threshold, including report	1
76376	3D rendering with interpretation and reporting of computed tomography, magnetic resonance imaging, ultrasound, or other tomographic modality with image postprocessing under concurrent supervision; not requiring image postprocessing on an independent workstation	2
76377	3D rendering with interpretation and reporting of computed tomography, magnetic resonance imaging, ultrasound, or other tomographic modality with image postprocessing under concurrent supervision; requiring image postprocessing on an independent workstation	2
76380	Computed tomography, limited or localized follow-up study	2
76390	Magnetic resonance spectroscopy	1
76391	Magnetic resonance (eg, vibration) elastography	1
76496	Unlisted fluoroscopic procedure (eg, diagnostic, interventional)	1
76497	Unlisted computed tomography procedure (eg, diagnostic, interventional)	1
76498	Unlisted magnetic resonance procedure (eg, diagnostic, interventional)	1
76499	Unlisted diagnostic radiographic procedure	1
76506	Echoencephalography, real time with image documentation (gray scale) (for determination of ventricular size, delineation of cerebral contents, and detection of fluid masses or other intracranial abnormalities), including A-mode encephalography as secondary component where indicated	1

76510	Ophthalmic ultrasound, diagnostic; B-scan and quantitative A-scan performed during the same patient encounter	2
76511	Ophthalmic ultrasound, diagnostic; quantitative A-scan only	2
76512	Ophthalmic ultrasound, diagnostic; B-scan (with or without superimposed non-quantitative A-scan)	2
76513	Ophthalmic ultrasound, diagnostic; anterior segment ultrasound, immersion (water bath) B-scan or high resolution biomicroscopy, unilateral or bilateral	1
76514	Ophthalmic ultrasound, diagnostic; corneal pachymetry, unilateral or bilateral (determination of corneal thickness)	1
76516	Ophthalmic biometry by ultrasound echography, A-scan	1
76519	Ophthalmic biometry by ultrasound echography, A-scan; with intraocular lens power calculation	1
76529	Ophthalmic ultrasonic foreign body localization	1
76536	Ultrasound, soft tissues of head and neck (eg, thyroid, parathyroid, parotid), real time with image documentation	1
76604	Ultrasound, chest (includes mediastinum), real time with image documentation	1
76641	Ultrasound, breast, unilateral, real time with image documentation, including axilla when performed; complete	2
76642	Ultrasound, breast, unilateral, real time with image documentation, including axilla when performed; limited	2
76700	Ultrasound, abdominal, real time with image documentation; complete	1
76705	Ultrasound, abdominal, real time with image documentation; limited (eg, single organ, quadrant, follow-up)	1
76706	Ultrasound, abdominal aorta, real time with image documentation, screening study for abdominal aortic aneurysm (AAA)	1
76770	Ultrasound, retroperitoneal (eg, renal, aorta, nodes), real time with image documentation; complete	1
76775	Ultrasound, retroperitoneal (eg, renal, aorta, nodes), real time with image documentation; limited	1
76800	Ultrasound, spinal canal and contents	1
76801	Ultrasound, pregnant uterus, real time with image documentation, fetal and maternal evaluation, first trimester (< 14 weeks 0 days), transabdominal approach; single or first gestation	1
76802	Ultrasound, pregnant uterus, real time with image documentation, fetal and maternal evaluation, first trimester (< 14 weeks 0 days), transabdominal approach; each additional gestation (List separately in addition to code for primary procedure)	1
76805	Ultrasound, pregnant uterus, real time with image documentation, fetal and maternal evaluation, after first trimester (> or = 14 weeks 0 days), transabdominal approach; single or first gestation	1
76810	Ultrasound, pregnant uterus, real time with image documentation, fetal and maternal evaluation, after first trimester (> or = 14 weeks 0 days), transabdominal	1

	approach; each additional gestation (List separately in addition to code for primary	
	procedure)	
76811	Ultrasound, pregnant uterus, real time with image documentation, fetal and maternal evaluation plus detailed fetal anatomic examination, transabdominal approach; single or first gestation	1
76812	Ultrasound, pregnant uterus, real time with image documentation, fetal and maternal evaluation plus detailed fetal anatomic examination, transabdominal approach; each additional gestation (List separately in addition to code for primary procedure)	1
76813	Ultrasound, pregnant uterus, real time with image documentation, first trimester fetal nuchal translucency measurement, transabdominal or transvaginal approach; single or first gestation	1
76814	Ultrasound, pregnant uterus, real time with image documentation, first trimester fetal nuchal translucency measurement, transabdominal or transvaginal approach; each additional gestation (List separately in addition to code for primary procedure)	5
76815	Ultrasound, pregnant uterus, real time with image documentation, limited (eg, fetal heart beat, placental location, fetal position and/or qualitative amniotic fluid volume), 1 or more fetuses	1
76816	Ultrasound, pregnant uterus, real time with image documentation, follow-up (eg, re-evaluation of fetal size by measuring standard growth parameters and amniotic fluid volume, re-evaluation of organ system(s) suspected or confirmed to be abnormal on a previous scan), transabdominal approach, per fetus	1
76817	Ultrasound, pregnant uterus, real time with image documentation, transvaginal	1
76818	Fetal biophysical profile; with non-stress testing	1
76819	Fetal biophysical profile; without non-stress testing	1
76820	Doppler velocimetry, fetal; umbilical artery	1
76821	Doppler velocimetry, fetal; middle cerebral artery	1
76825	Echocardiography, fetal, cardiovascular system, real time with image documentation (2D), with or without M-mode recording	1
76826	Echocardiography, fetal, cardiovascular system, real time with image documentation (2D), with or without M-mode recording; follow-up or repeat study	1
76827	Doppler echocardiography, fetal, pulsed wave and/or continuous wave with spectral display; complete	1
76828	Doppler echocardiography, fetal, pulsed wave and/or continuous wave with spectral display; follow-up or repeat study	1
76830	Ultrasound, transvaginal	1
76831	Saline infusion sonohysterography (SIS), including color flow Doppler, when performed	1
76856	Ultrasound, pelvic (nonobstetric), real time with image documentation; complete	1
76857	Ultrasound, pelvic (nonobstetric), real time with image documentation; limited or follow-up (eg, for follicles)	1

76870	Ultrasound, scrotum and contents	1
76872	Ultrasound, transrectal	1
76873	Ultrasound, transrectal; prostate volume study for brachytherapy treatment planning (separate procedure)	1
76881	Ultrasound, complete joint (ie, joint space and peri-articular soft-tissue structures), real-time with image documentation	2
76882	Ultrasound, limited, joint or other nonvascular extremity structure(s) (eg, joint space, peri-articular tendon[s], muscle[s], nerve[s], other soft-tissue structure[s], or soft-tissue mass[es]), real-time with image documentation	2
76885	Ultrasound, infant hips, real time with imaging documentation; dynamic (requiring physician or other qualified health care professional manipulation)	1
76886	Ultrasound, infant hips, real time with imaging documentation; limited, static (not requiring physician or other qualified health care professional manipulation)	1
76932	Ultrasonic guidance for endomyocardial biopsy, imaging supervision and interpretation	1
76936	Ultrasound guided compression repair of arterial pseudoaneurysm or arteriovenous fistulae (includes diagnostic ultrasound evaluation, compression of lesion and imaging)	1
76937	Ultrasound guidance for vascular access requiring ultrasound evaluation of potential access sites, documentation of selected vessel patency, concurrent realtime ultrasound visualization of vascular needle entry, with permanent recording and reporting (List separately in addition to code for primary procedure)	1
76940	Ultrasound guidance for, and monitoring of, parenchymal tissue ablation	1
76941	Ultrasonic guidance for intrauterine fetal transfusion or cordocentesis, imaging supervision and interpretation	1
76942	Ultrasonic guidance for needle placement (eg, biopsy, aspiration, injection, localization device), imaging supervision and interpretation	1
76945	Ultrasonic guidance for chorionic villus sampling, imaging supervision and interpretation	1
76946	Ultrasonic guidance for amniocentesis, imaging supervision and interpretation	1
76948	Ultrasonic guidance for aspiration of ova, imaging supervision and interpretation	1
76965	Ultrasonic guidance for interstitial radioelement application	2
76975	Gastrointestinal endoscopic ultrasound, supervision and interpretation	1
76977	Ultrasound bone density measurement and interpretation, peripheral site(s), any method	1
76978	Ultrasound, targeted dynamic microbubble sonographic contrast characterization (non-cardiac); initial lesion	1
76979	Ultrasound, targeted dynamic microbubble sonographic contrast characterization (non-cardiac); each additional lesion with separate injection (List separately in addition to code for primary procedure)	3
76981	Ultrasound, elastography; parenchyma (eg, organ)	1

76982	Ultrasound, elastography; first target lesion	1
76983	Ultrasound, elastography; each additional target lesion (List separately in addition to code for primary procedure)	2
76999	Unlisted ultrasound procedure (eg, diagnostic, interventional)	1
77046	Magnetic resonance imaging, breast, without contrast material; unilateral	1
77047	Magnetic resonance imaging, breast, without contrast material; bilateral	1
77048	Magnetic resonance imaging, breast, without and with contrast material(s), including computer-aided detection (CAD real-time lesion detection, characterization and pharmacokinetic analysis), when performed; unilateral	1
77049	Magnetic resonance imaging, breast, without and with contrast material(s), including computer-aided detection (CAD real-time lesion detection, characterization and pharmacokinetic analysis), when performed; bilateral	1
77061	Diagnostic digital breast tomosynthesis; unilateral	1
77062	Diagnostic digital breast tomosynthesis; bilateral	1
77063	Screening digital breast tomosynthesis, bilateral (List separately in addition to code for primary procedure)	1
77065	Diagnostic mammography, including computer-aided detection (CAD) when performed; unilateral	2
77066	Diagnostic mammography, including computer-aided detection (CAD) when performed; bilateral	2
77067	Screening mammography, bilateral (2-view study of each breast), including computer-aided detection (CAD) when performed	1
77071	Manual application of stress performed by physician or other qualified health care professional for joint radiography, including contralateral joint if indicated	1
77078	Computed tomography, bone mineral density study, 1 or more sites, axial skeleton (eg, hips, pelvis, spine)	1
77080	Dual-energy X-ray absorptiometry (DXA), bone density study, 1 or more sites; axial skeleton (eg, hips, pelvis, spine)	1
77081	Dual-energy X-ray absorptiometry (DXA), bone density study, 1 or more sites; appendicular skeleton (peripheral) (eg, radius, wrist, heel)	1
77085	Dual-energy X-ray absorptiometry (DXA), bone density study, 1 or more sites; axial skeleton (eg, hips, pelvis, spine), including vertebral fracture assessment	1
77086	Vertebral fracture assessment via dual-energy X-ray absorptiometry (DXA)	1
77089	Trabecular bone score (TBS), structural condition of the bone microarchitecture; using dual X-ray absorptiometry (DXA) or other imaging data on gray-scale variogram, calculation, with interpretation and report on fracture-risk	1
77090	Trabecular bone score (TBS), structural condition of the bone microarchitecture; technical preparation and transmission of data for analysis to be performed elsewhere	1
77091	Trabecular bone score (TBS), structural condition of the bone microarchitecture; technical calculation only	1

Trabecular bone score (TBS), structural condition of the bone microarchitecture; interpretation and report on fracture-risk only by other qualified health care professional	1
Therapeutic radiology treatment planning; simple	1
Therapeutic radiology treatment planning; intermediate	1
Therapeutic radiology treatment planning; complex	1
Therapeutic radiology simulation-aided field setting; simple	1
Therapeutic radiology simulation-aided field setting; intermediate	1
Therapeutic radiology simulation-aided field setting; complex	1
Respiratory motion management simulation (List separately in addition to code for primary procedure)	1
3-dimensional radiotherapy plan, including dose-volume histograms	1
Unlisted procedure, therapeutic radiology clinical treatment planning	1
Basic radiation dosimetry calculation, central axis depth dose calculation, TDF, NSD, gap calculation, off axis factor, tissue inhomogeneity factors, calculation of nonionizing radiation surface and depth dose, as required during course of treatment, only when prescribed by the treating physician	1
Intensity modulated radiotherapy plan, including dose-volume histograms for target and critical structure partial tolerance specifications	1
Teletherapy isodose plan; simple (1 or 2 unmodified ports directed to a single area of interest), includes basic dosimetry calculation(s)	1
Teletherapy isodose plan; complex (multiple treatment areas, tangential ports, the use of wedges, blocking, rotational beam, or special beam considerations), includes basic dosimetry calculation(s)	1
Brachytherapy isodose plan; simple (calculation[s] made from 1 to 4 sources, or remote afterloading brachytherapy, 1 channel), includes basic dosimetry calculation(s)	1
Brachytherapy isodose plan; intermediate (calculation[s] made from 5 to 10 sources, or remote afterloading brachytherapy, 2-12 channels), includes basic dosimetry calculation(s)	1
Brachytherapy isodose plan; complex (calculation[s] made from over 10 sources, or remote afterloading brachytherapy, over 12 channels), includes basic dosimetry calculation(s)	1
Special teletherapy port plan, particles, hemibody, total body	1
Special dosimetry (eg, TLD, microdosimetry) (specify), only when prescribed by the treating physician	1
Treatment devices, design and construction; simple (simple block, simple bolus)	1
Treatment devices, design and construction; intermediate (multiple blocks, stents, bite blocks, special bolus)	1
Treatment devices, design and construction; complex (irregular blocks, special shields, compensators, wedges, molds or casts)	1
	interpretation and report on fracture-risk only by other qualified health care professional Therapeutic radiology treatment planning; simple Therapeutic radiology treatment planning; omplex Therapeutic radiology treatment planning; complex Therapeutic radiology simulation-aided field setting; simple Therapeutic radiology simulation-aided field setting; simple Therapeutic radiology simulation-aided field setting; omplex Respiratory motion management simulation (List separately in addition to code for primary procedure) 3-dimensional radiotherapy plan, including dose-volume histograms Unlisted procedure, therapeutic radiology clinical treatment planning Basic radiation dosimetry calculation, central axis depth dose calculation, TDF, NSD, gap calculation, off axis factor, tissue inhomogeneity factors, calculation of non-ionizing radiation surface and depth dose, as required during course of treatment, only when prescribed by the treating physician Intensity modulated radiotherapy plan, including dose-volume histograms for target and critical structure partial tolerance specifications Teletherapy isodose plan; simple (1 or 2 unmodified ports directed to a single area of interest), includes basic dosimetry calculation(s) Teletherapy isodose plan; complex (multiple treatment areas, tangential ports, the use of wedges, blocking, rotational beam, or special beam considerations), includes basic dosimetry calculation(s) Brachytherapy isodose plan; simple (calculation[s] made from 1 to 4 sources, or remote afterloading brachytherapy, 1 channel), includes basic dosimetry calculation(s) Brachytherapy isodose plan; intermediate (calculation[s] made from 5 to 10 sources, or remote afterloading brachytherapy, 2-12 channels), includes basic dosimetry calculation(s) Brachytherapy isodose plan; complex (calculation[s] made from over 10 sources, or remote afterloading brachytherapy, over 12 channels), includes basic dosimetry calculation(s) Brachytherapy isodose plan; complex (predictions) in the process part of t

77336	Continuing medical physics consultation, including assessment of treatment parameters, quality assurance of dose delivery, and review of patient treatment	1
	documentation in support of the radiation oncologist, reported per week of therapy	
77338	Multi-leaf collimator (MLC) device(s) for intensity modulated radiation therapy (IMRT), design and construction per IMRT plan	1
77370	Special medical radiation physics consultation	1
77385	Intensity modulated radiation treatment delivery (IMRT), includes guidance and tracking, when performed; simple	1
77386	Intensity modulated radiation treatment delivery (IMRT), includes guidance and tracking, when performed; complex	1
77387	Guidance for localization of target volume for delivery of radiation treatment, includes intrafraction tracking, when performed	1
77399	Unlisted procedure, medical radiation physics, dosimetry and treatment devices, and special services	1
77401	Radiation treatment delivery, superficial and/or ortho voltage, per day	1
77402	Radiation treatment delivery, >/=1 MeV; simple	1
77407	Radiation treatment delivery, >/=1 MeV; intermediate	1
77412	Radiation treatment delivery, >/=1 MeV; complex	1
77417	Therapeutic radiology port image(s)	1
77423	High energy neutron radiation treatment delivery, 1 or more isocenter(s) with coplanar or non-coplanar geometry with blocking and/or wedge, and/or compensator(s)	1
77424	Intraoperative radiation treatment delivery, x-ray, single treatment session	1
77425	Intraoperative radiation treatment delivery, electrons, single treatment session	1
77427	Radiation treatment management, 5 treatments	1
77431	Radiation therapy management with complete course of therapy consisting of 1 or 2 fractions only	1
77432	Stereotactic radiation treatment management of cranial lesion(s) (complete course of treatment consisting of 1 session)	1
77469	Intraoperative radiation treatment management	1
77470	Special treatment procedure (eg, total body irradiation, hemibody radiation, per oral or endocavitary irradiation)	1
77499	Unlisted procedure, therapeutic radiology treatment management	1
77520	Proton treatment delivery; simple, without compensation	2
77522	Proton treatment delivery; simple, with compensation	2
77523	Proton treatment delivery; intermediate	2
77525	Proton treatment delivery; complex	2
77600	Hyperthermia, externally generated; superficial (ie, heating to a depth of 4 cm or less)	1

77605	Hyperthermia, externally generated; deep (ie, heating to depths greater than 4 cm)	1
77610	Hyperthermia generated by interstitial probe(s); 5 or fewer interstitial applicators	1
77615	Hyperthermia generated by interstitial probe(s); more than 5 interstitial applicators	1
77620	Hyperthermia generated by intracavitary probe(s)	1
77750	Infusion or instillation of radioelement solution (includes 3-month follow-up care)	1
77761	Intracavitary radiation source application; simple	1
77762	Intracavitary radiation source application; intermediate	1
77763	Intracavitary radiation source application; complex	1
77767	Remote afterloading high dose rate radionuclide skin surface brachytherapy, includes basic dosimetry, when performed; lesion diameter up to 2.0 cm or 1 channel	2
77768	Remote afterloading high dose rate radionuclide skin surface brachytherapy, includes basic dosimetry, when performed; lesion diameter over 2.0 cm and 2 or more channels, or multiple lesions	2
77770	Remote afterloading high dose rate radionuclide interstitial or intracavitary brachytherapy, includes basic dosimetry, when performed; 1 channel	1
77771	Remote afterloading high dose rate radionuclide interstitial or intracavitary brachytherapy, includes basic dosimetry, when performed; 2-12 channels	1
77772	Remote afterloading high dose rate radionuclide interstitial or intracavitary brachytherapy, includes basic dosimetry, when performed; over 12 channels	1
77778	Interstitial radiation source application, complex, includes supervision, handling, loading of radiation source, when performed	1
77789	Surface application of low dose rate radionuclide source	1
77790	Supervision, handling, loading of radiation source	1
77799	Unlisted procedure, clinical brachytherapy	1
78012	Thyroid uptake, single or multiple quantitative measurement(s) (including stimulation, suppression, or discharge, when performed)	1
78013	Thyroid imaging (including vascular flow, when performed)	1
78014	Thyroid imaging (including vascular flow, when performed); with single or multiple uptake(s) quantitative measurement(s) (including stimulation, suppression, or discharge, when performed)	1
78015	Thyroid carcinoma metastases imaging; limited area (eg, neck and chest only)	1
78016	Thyroid carcinoma metastases imaging; with additional studies (eg, urinary recovery)	1
78018	Thyroid carcinoma metastases imaging; whole body	1
78020	Thyroid carcinoma metastases uptake (List separately in addition to code for primary procedure)	1
78070	Parathyroid planar imaging (including subtraction, when performed)	1

78071	Parathyroid planar imaging (including subtraction, when performed); with tomographic (SPECT)	1
78072	Parathyroid planar imaging (including subtraction, when performed); with tomographic (SPECT), and concurrently acquired computed tomography (CT) for anatomical localization	1
78075	Adrenal imaging, cortex and/or medulla	1
78099	Unlisted endocrine procedure, diagnostic nuclear medicine	1
78102	Bone marrow imaging; limited area	1
78103	Bone marrow imaging; multiple areas	1
78104	Bone marrow imaging; whole body	1
78110	Plasma volume, radiopharmaceutical volume-dilution technique (separate procedure); single sampling	1
78111	Plasma volume, radiopharmaceutical volume-dilution technique (separate procedure); multiple samplings	1
78120	Red cell volume determination (separate procedure); single sampling	1
78121	Red cell volume determination (separate procedure); multiple samplings	1
78122	Whole blood volume determination, including separate measurement of plasma volume and red cell volume (radiopharmaceutical volume-dilution technique)	1
78130	Red cell survival study	1
78140	Labeled red cell sequestration, differential organ/tissue (eg, splenic and/or hepatic)	1
78185	Spleen imaging only, with or without vascular flow	1
78191	Platelet survival study	1
78195	Lymphatics and lymph nodes imaging	1
78199	Unlisted hematopoietic, reticuloendothelial and lymphatic procedure, diagnostic nuclear medicine	1
78201	Liver imaging; static only	1
78202	Liver imaging; with vascular flow	1
78215	Liver and spleen imaging; static only	1
78216	Liver and spleen imaging; with vascular flow	1
78226	Hepatobiliary system imaging, including gallbladder when present	1
78227	Hepatobiliary system imaging, including gallbladder when present; with pharmacologic intervention, including quantitative measurement(s) when performed	1
78230	Salivary gland imaging	1
78231	Salivary gland imaging; with serial images	1
78232	Salivary gland function study	1
78258	Esophageal motility	1

78261	Gastric mucosa imaging	1
78262	Gastroesophageal reflux study	1
78264	Gastric emptying imaging study (eg, solid, liquid, or both)	1
78265	Gastric emptying imaging study (eg, solid, liquid, or both); with small bowel transit	1
78266	Gastric emptying imaging study (eg, solid, liquid, or both); with small bowel and colon transit, multiple days	1
78267	Urea breath test, C-14 (isotopic); acquisition for analysis	1
78268	Urea breath test, C-14 (isotopic); analysis	1
78278	Acute gastrointestinal blood loss imaging	1
78282	Gastrointestinal protein loss	1
78290	Intestine imaging (eg, ectopic gastric mucosa, Meckel's localization, volvulus)	1
78291	Peritoneal-venous shunt patency test (eg, for LeVeen, Denver shunt)	1
78299	Unlisted gastrointestinal procedure, diagnostic nuclear medicine	1
78300	Bone and/or joint imaging; limited area	1
78305	Bone and/or joint imaging; multiple areas	1
78306	Bone and/or joint imaging; whole body	1
78315	Bone and/or joint imaging; 3 phase study	1
78350	Bone density (bone mineral content) study, 1 or more sites; single photon absorptiometry	1
78351	Bone density (bone mineral content) study, 1 or more sites; dual photon absorptiometry, 1 or more sites	1
78399	Unlisted musculoskeletal procedure, diagnostic nuclear medicine	1
78414	Determination of central c-v hemodynamics (non-imaging) (eg, ejection fraction with probe technique) with or without pharmacologic intervention or exercise, single or multiple determinations	1
78428	Cardiac shunt detection	1
78429	Myocardial imaging, positron emission tomography (PET), metabolic evaluation study (including ventricular wall motion[s] and/or ejection fraction[s], when performed), single study; with concurrently acquired computed tomography transmission scan	1
78430	Myocardial imaging, positron emission tomography (PET), perfusion study (including ventricular wall motion[s] and/or ejection fraction[s], when performed); single study, at rest or stress (exercise or pharmacologic), with concurrently acquired computed tomography transmission scan	1
78431	Myocardial imaging, positron emission tomography (PET), perfusion study (including ventricular wall motion[s] and/or ejection fraction[s], when performed); multiple studies at rest and stress (exercise or pharmacologic), with concurrently acquired computed tomography transmission scan	1

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78473	Cardiac blood pool imaging, gated equilibrium; multiple studies, wall motion study plus ejection fraction, at rest and stress (exercise and/or pharmacologic), with or without additional quantification	1
78481	Cardiac blood pool imaging (planar), first pass technique; single study, at rest or with stress (exercise and/or pharmacologic), wall motion study plus ejection fraction, with or without quantification	1
78483	Cardiac blood pool imaging (planar), first pass technique; multiple studies, at rest and with stress (exercise and/or pharmacologic), wall motion study plus ejection fraction, with or without quantification	1
78491	Myocardial imaging, positron emission tomography (PET), perfusion study (including ventricular wall motion[s] and/or ejection fraction[s], when performed); single study, at rest or stress (exercise or pharmacologic)	1
78492	Myocardial imaging, positron emission tomography (PET), perfusion study (including ventricular wall motion[s] and/or ejection fraction[s], when performed); multiple studies at rest and stress (exercise or pharmacologic)	1
78494	Cardiac blood pool imaging, gated equilibrium, SPECT, at rest, wall motion study plus ejection fraction, with or without quantitative processing	1
78496	Cardiac blood pool imaging, gated equilibrium, single study, at rest, with right ventricular ejection fraction by first pass technique (List separately in addition to code for primary procedure)	1
78499	Unlisted cardiovascular procedure, diagnostic nuclear medicine	1
78579	Pulmonary ventilation imaging (eg, aerosol or gas)	1
78580	Pulmonary perfusion imaging (eg, particulate)	1
78582	Pulmonary ventilation (eg, aerosol or gas) and perfusion imaging	1
78597	Quantitative differential pulmonary perfusion, including imaging when performed	1
78598	Quantitative differential pulmonary perfusion and ventilation (eg, aerosol or gas), including imaging when performed	1
78599	Unlisted respiratory procedure, diagnostic nuclear medicine	1
78600	Brain imaging, less than 4 static views	1
78601	Brain imaging, less than 4 static views; with vascular flow	1
78605	Brain imaging, minimum 4 static views	1
78606	Brain imaging, minimum 4 static views; with vascular flow	1
78609	Brain imaging, positron emission tomography (PET); perfusion evaluation	1
78610	Brain imaging, vascular flow only	1
78630	Cerebrospinal fluid flow, imaging (not including introduction of material); cisternography	1
78635	Cerebrospinal fluid flow, imaging (not including introduction of material); ventriculography	1
78645	Cerebrospinal fluid flow, imaging (not including introduction of material); shunt evaluation	1

78650	Cerebrospinal fluid leakage detection and localization	1
78660	Radiopharmaceutical dacryocystography	1
78699	Unlisted nervous system procedure, diagnostic nuclear medicine	1
78700	Kidney imaging morphology	1
78701	Kidney imaging morphology; with vascular flow	1
78707	Kidney imaging morphology; with vascular flow and function, single study without pharmacological intervention	1
78708	Kidney imaging morphology; with vascular flow and function, single study, with pharmacological intervention (eg, angiotensin converting enzyme inhibitor and/or diuretic)	1
78709	Kidney imaging morphology; with vascular flow and function, multiple studies, with and without pharmacological intervention (eg, angiotensin converting enzyme inhibitor and/or diuretic)	1
78725	Kidney function study, non-imaging radioisotopic study	1
78730	Urinary bladder residual study (List separately in addition to code for primary procedure)	1
78740	Ureteral reflux study (radiopharmaceutical voiding cystogram)	1
78761	Testicular imaging with vascular flow	1
78799	Unlisted genitourinary procedure, diagnostic nuclear medicine	1
78800	Radiopharmaceutical localization of tumor, inflammatory process or distribution of radiopharmaceutical agent(s) (includes vascular flow and blood pool imaging, when performed); planar, single area (eg, head, neck, chest, pelvis), single day imaging	1
78801	Radiopharmaceutical localization of tumor, inflammatory process or distribution of radiopharmaceutical agent(s) (includes vascular flow and blood pool imaging, when performed); planar, 2 or more areas (eg, abdomen and pelvis, head and chest), 1 or more days imaging or single area imaging over 2 or more days	1
78802	Radiopharmaceutical localization of tumor, inflammatory process or distribution of radiopharmaceutical agent(s) (includes vascular flow and blood pool imaging, when performed); planar, whole body, single day imaging	1
78803	Radiopharmaceutical localization of tumor, inflammatory process or distribution of radiopharmaceutical agent(s) (includes vascular flow and blood pool imaging, when performed); tomographic (SPECT), single area (eg, head, neck, chest, pelvis), single day imaging	1
78804	Radiopharmaceutical localization of tumor, inflammatory process or distribution of radiopharmaceutical agent(s) (includes vascular flow and blood pool imaging, when performed); planar, whole body, requiring 2 or more days imaging	1
78808	Injection procedure for radiopharmaceutical localization by non-imaging probe study, intravenous (eg, parathyroid adenoma)	1
78811	Positron emission tomography (PET) imaging; limited area (eg, chest, head/neck)	1
78812	Positron emission tomography (PET) imaging; skull base to mid-thigh	1
78813	Positron emission tomography (PET) imaging; whole body	1

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78814	Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; limited area (eg, chest, head/neck)	1
78815	Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; skull base to mid-thigh	1
78816	Positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization imaging; whole body	1
78830	Radiopharmaceutical localization of tumor, inflammatory process or distribution of radiopharmaceutical agent(s) (includes vascular flow and blood pool imaging, when performed); tomographic (SPECT) with concurrently acquired computed tomography (CT) transmission scan for anatomical review, localization and determination/detection of pathology, single area (eg, head, neck, chest, pelvis), single day imaging	1
78831	Radiopharmaceutical localization of tumor, inflammatory process or distribution of radiopharmaceutical agent(s) (includes vascular flow and blood pool imaging, when performed); tomographic (SPECT), minimum 2 areas (eg, pelvis and knees, abdomen and pelvis), single day imaging, or single area imaging over 2 or more days	1
78832	Radiopharmaceutical localization of tumor, inflammatory process or distribution of radiopharmaceutical agent(s) (includes vascular flow and blood pool imaging, when performed); tomographic (SPECT) with concurrently acquired computed tomography (CT) transmission scan for anatomical review, localization and determination/detection of pathology, minimum 2 areas (eg, pelvis and knees, abdomen and pelvis), single day imaging, or single area imaging over 2 or more days	1
78835	Radiopharmaceutical quantification measurement(s) single area (List separately in addition to code for primary procedure)	1
78999	Unlisted miscellaneous procedure, diagnostic nuclear medicine	1
79005	Radiopharmaceutical therapy, by oral administration	1
79101	Radiopharmaceutical therapy, by intravenous administration	1
79200	Radiopharmaceutical therapy, by intracavitary administration	1
79300	Radiopharmaceutical therapy, by interstitial radioactive colloid administration	1
79403	Radiopharmaceutical therapy, radiolabeled monoclonal antibody by intravenous infusion	1
79440	Radiopharmaceutical therapy, by intra-articular administration	1
79445	Radiopharmaceutical therapy, by intra-arterial particulate administration	1
79999	Radiopharmaceutical therapy, unlisted procedure	1

80047	Basic metabolic panel (Calcium, ionized) This panel must include the following: Calcium, ionized (82330) Carbon dioxide (bicarbonate) (82374) Chloride (82435)	1
	Creatinine (82565) Glucose (82947) Potassium (84132) Sodium (84295) Urea Nitrogen (BUN) (84520)	

80048	Basic metabolic panel (Calcium, total) This panel must include the following: Calcium, total (82310) Carbon dioxide (bicarbonate) (82374) Chloride (82435) Creatinine (82565) Glucose (82947) Potassium (84132) Sodium (84295) Urea nitrogen (BUN) (84520)	1
80050	General health panel This panel must include the following: Comprehensive metabolic panel (80053) Blood count, complete (CBC), automated and automated differential WBC count (85025 or 85027 and 85004) OR Blood count, complete (CBC), automated (85027) and appropriate manual differential WBC count (85007 or 85009) Thyroid stimulating hormone (TSH) (84443)	1
80051	Electrolyte panel This panel must include the following: Carbon dioxide (bicarbonate) (82374) Chloride (82435) Potassium (84132) Sodium (84295)	1
80053	Comprehensive metabolic panel This panel must include the following: Albumin (82040) Bilirubin, total (82247) Calcium, total (82310) Carbon dioxide (bicarbonate) (82374) Chloride (82435) Creatinine (82565) Glucose (82947) Phosphatase, alkaline (84075) Potassium (84132) Protein, total (84155) Sodium (84295) Transferase, alanine amino (ALT) (SGPT) (84460) Transferase, aspartate amino (AST) (SGOT) (84450) Urea nitrogen (BUN) (84520)	1
80055	Obstetric panel This panel must include the following: Blood count, complete (CBC), automated and automated differential WBC count (85025 or 85027 and 85004) OR Blood count, complete (CBC), automated (85027) and appropriate manual differential WBC count (85007 or 85009) Hepatitis B surface antigen (HBsAg) (87340) Antibody, rubella (86762) Syphilis test, non-treponemal antibody; qualitative (eg, VDRL, RPR, ART) (86592) Antibody screen, RBC, each serum technique (86850) Blood typing, ABO (86900) AND Blood typing, Rh (D) (86901)	1
80061	Lipid panel This panel must include the following: Cholesterol, serum, total (82465) Lipoprotein, direct measurement, high density cholesterol (HDL cholesterol) (83718) Triglycerides (84478)	1
80069	Renal function panel This panel must include the following: Albumin (82040) Calcium, total (82310) Carbon dioxide (bicarbonate) (82374) Chloride (82435) Creatinine (82565) Glucose (82947) Phosphorus inorganic (phosphate) (84100) Potassium (84132) Sodium (84295) Urea nitrogen (BUN) (84520)	1
80074	Acute hepatitis panel This panel must include the following: Hepatitis A antibody (HAAb), IgM antibody (86709) Hepatitis B core antibody (HBcAb), IgM antibody (86803) Hepatitis B surface antigen (HBsAg) (87340) Hepatitis C antibody (86803)	1
80076	Hepatic function panel This panel must include the following: Albumin (82040) Bilirubin, total (82247) Bilirubin, direct (82248) Phosphatase, alkaline (84075) Protein, total (84155) Transferase, alanine amino (ALT) (SGPT) (84460) Transferase, aspartate amino (AST) (SGOT) (84450)	1
80081	Obstetric panel (includes HIV testing) This panel must include the following: Blood count, complete (CBC), and automated differential WBC count (85025 or 85027 and 85004) OR Blood count, complete (CBC), automated (85027) and appropriate manual differential WBC count (85007 or 85009) Hepatitis B surface antigen (HBsAg) (87340) HIV-1 antigen(s), with HIV-1 and HIV-2 antibodies, single result (87389) Antibody, rubella (86762) Syphilis test, non-treponemal antibody; qualitative (eg, VDRL, RPR, ART) (86592) Antibody screen, RBC, each serum technique (86850) Blood typing, ABO (86900) AND Blood typing, Rh (D) (86901)	1
80143	Acetaminophen	2

80145 Adallmumab 1 80150 Amikacin 1 80151 Amiodarone 1 80155 Caffeine 1 80156 Carbamazepine; total 1 80157 Carbamazepine; free 1 80158 Cyclosporine 1 80159 Clozapine 1 80161 Carbamazepine; -10,11-epoxide 1 80162 Digoxin; total 1 80163 Digoxin; free 1 80164 Valproic acid (dipropylacetic acid); total 1 80165 Valproic acid (dipropylacetic acid); free 1 80166 Ethosuximide 1 80167 Felbamate 1 80168 Ethosuximide 1 80169 Everolimus 1 80170 Gentamicin 1 80171 Gabapentin, whole blood, serum, or plasma 1 80173 Haloperidol 1 80175 Lamotrigine 1 80176 Lidocaine 1 80177 Levetiracetam <td< th=""></td<>
80151 Amiodarone 1 80155 Caffeine 1 80156 Carbamazepine; total 1 80157 Carbamazepine; free 1 80158 Cyclosporine 1 80159 Clozapine 1 80161 Carbamazepine; -10,11-epoxide 1 80162 Digoxin; total 1 80163 Digoxin; free 1 80164 Valproic acid (dipropylacetic acid); total 1 80165 Valproic acid (dipropylacetic acid); free 1 80167 Felbamate 1 80168 Ethosuximide 1 80169 Everolimus 1 80170 Gentamicin 1 80171 Gabapentin, whole blood, serum, or plasma 1 80173 Haloperidol 1 80175 Lamotrigine 1 80176 Lidocaine 1 80177 Levetiracetam 1 80178 Lithium 1 80179 Salicylate 2
80155 Caffeine 1 80156 Carbamazepine; total 1 80157 Carbamazepine; free 1 80158 Cyclosporine 1 80159 Clozapine 1 80161 Carbamazepine; -10,11-epoxide 1 80162 Digoxin; total 1 80163 Digoxin; free 1 80164 Valproic acid (dipropylacetic acid); total 1 80165 Valproic acid (dipropylacetic acid); free 1 80167 Felbamate 1 80168 Ethosuximide 1 80169 Everolimus 1 80170 Gentamicin 1 80171 Gabapentin, whole blood, serum, or plasma 1 80173 Haloperidol 1 80175 Lamotrigine 1 80176 Lidocaine 1 80177 Levetiracetam 1 80178 Lithium 1 80179 Salicylate 2
80156 Carbamazepine; total 1 80157 Carbamazepine; free 1 80158 Cyclosporine 1 80159 Clozapine 1 80161 Carbamazepine; -10,11-epoxide 1 80162 Digoxin; total 1 80163 Digoxin; free 1 80164 Valproic acid (dipropylacetic acid); total 1 80165 Valproic acid (dipropylacetic acid); free 1 80167 Felbamate 1 80168 Ethosuximide 1 80169 Everolimus 1 80170 Gentamicin 1 80171 Gabapentin, whole blood, serum, or plasma 1 80173 Haloperidol 1 80175 Lamotrigine 1 80176 Lidocaine 1 80177 Levetiracetam 1 80178 Lithium 1 80179 Salicylate 2
80157 Carbamazepine; free 1 80158 Cyclosporine 1 80159 Clozapine 1 80161 Carbamazepine; -10,11-epoxide 1 80162 Digoxin; total 1 80163 Digoxin; free 1 80164 Valproic acid (dipropylacetic acid); total 1 80165 Valproic acid (dipropylacetic acid); free 1 80167 Felbamate 1 80168 Ethosuximide 1 80169 Everolimus 1 80170 Gentamicin 1 80171 Gabapentin, whole blood, serum, or plasma 1 80173 Haloperidol 1 80175 Lamotrigine 1 80176 Lidocaine 1 80177 Levetiracetam 1 80178 Lithium 1 80179 Salicylate 2
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80159 Clozapine 1 80161 Carbamazepine; -10,11-epoxide 1 80162 Digoxin; total 1 80163 Digoxin; free 1 80164 Valproic acid (dipropylacetic acid); total 1 80165 Valproic acid (dipropylacetic acid); free 1 80167 Felbamate 1 80168 Ethosuximide 1 80169 Everolimus 1 80170 Gentamicin 1 80171 Gabapentin, whole blood, serum, or plasma 1 80173 Haloperidol 1 80175 Lamotrigine 1 80176 Lidocaine 1 80177 Levetiracetam 1 80178 Lithium 1 80179 Salicylate 2
80161 Carbamazepine; -10,11-epoxide 1 80162 Digoxin; total 1 80163 Digoxin; free 1 80164 Valproic acid (dipropylacetic acid); total 1 80165 Valproic acid (dipropylacetic acid); free 1 80167 Felbamate 1 80168 Ethosuximide 1 80169 Everolimus 1 80170 Gentamicin 1 80171 Gabapentin, whole blood, serum, or plasma 1 80173 Haloperidol 1 80175 Lamotrigine 1 80176 Lidocaine 1 80177 Levetiracetam 1 80178 Lithium 1 80179 Salicylate 2
80162 Digoxin; total 1 80163 Digoxin; free 1 80164 Valproic acid (dipropylacetic acid); total 1 80165 Valproic acid (dipropylacetic acid); free 1 80167 Felbamate 1 80168 Ethosuximide 1 80169 Everolimus 1 80170 Gentamicin 1 80171 Gabapentin, whole blood, serum, or plasma 1 80173 Haloperidol 1 80175 Lamotrigine 1 80176 Lidocaine 1 80177 Levetiracetam 1 80178 Lithium 1 80179 Salicylate 2
80163 Digoxin; free 1 80164 Valproic acid (dipropylacetic acid); total 1 80165 Valproic acid (dipropylacetic acid); free 1 80167 Felbamate 1 80168 Ethosuximide 1 80169 Everolimus 1 80170 Gentamicin 1 80171 Gabapentin, whole blood, serum, or plasma 1 80173 Haloperidol 1 80175 Lamotrigine 1 80176 Lidocaine 1 80177 Levetiracetam 1 80178 Lithium 1 80179 Salicylate 2
80164 Valproic acid (dipropylacetic acid); total 1 80165 Valproic acid (dipropylacetic acid); free 1 80167 Felbamate 1 80168 Ethosuximide 1 80169 Everolimus 1 80170 Gentamicin 1 80171 Gabapentin, whole blood, serum, or plasma 1 80173 Haloperidol 1 80175 Lamotrigine 1 80176 Lidocaine 1 80177 Levetiracetam 1 80178 Lithium 1 80179 Salicylate 2
80165 Valproic acid (dipropylacetic acid); free 1 80167 Felbamate 1 80168 Ethosuximide 1 80169 Everolimus 1 80170 Gentamicin 1 80171 Gabapentin, whole blood, serum, or plasma 1 80173 Haloperidol 1 80175 Lamotrigine 1 80176 Lidocaine 1 80177 Levetiracetam 1 80178 Lithium 1 80179 Salicylate 2
80167 Felbamate 1 80168 Ethosuximide 1 80169 Everolimus 1 80170 Gentamicin 1 80171 Gabapentin, whole blood, serum, or plasma 1 80173 Haloperidol 1 80175 Lamotrigine 1 80176 Lidocaine 1 80177 Levetiracetam 1 80178 Lithium 1 80179 Salicylate 2
80168 Ethosuximide 1 80169 Everolimus 1 80170 Gentamicin 1 80171 Gabapentin, whole blood, serum, or plasma 1 80173 Haloperidol 1 80175 Lamotrigine 1 80176 Lidocaine 1 80177 Levetiracetam 1 80178 Lithium 1 80179 Salicylate 2
80169 Everolimus 1 80170 Gentamicin 1 80171 Gabapentin, whole blood, serum, or plasma 1 80173 Haloperidol 1 80175 Lamotrigine 1 80176 Lidocaine 1 80177 Levetiracetam 1 80178 Lithium 1 80179 Salicylate 2
80170 Gentamicin 1 80171 Gabapentin, whole blood, serum, or plasma 1 80173 Haloperidol 1 80175 Lamotrigine 1 80176 Lidocaine 1 80177 Levetiracetam 1 80178 Lithium 1 80179 Salicylate 2
80171 Gabapentin, whole blood, serum, or plasma 1 80173 Haloperidol 1 80175 Lamotrigine 1 80176 Lidocaine 1 80177 Levetiracetam 1 80178 Lithium 1 80179 Salicylate 2
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80176 Lidocaine 1 80177 Levetiracetam 1 80178 Lithium 1 80179 Salicylate 2
80177 Levetiracetam 1 80178 Lithium 1 80179 Salicylate 2
80178 Lithium 1 80179 Salicylate 2
80179 Salicylate 2
80180 Mycophenolate (mycophenolic acid)
80181 Flecainide 1
80183 Oxcarbazepine 1
80184 Phenobarbital 1
80185 Phenytoin; total 1
80186 Phenytoin; free 1
80187 Posaconazole 1
80188 Primidone 1
80189 Itraconazole 1
80190 Procainamide 1

1		
80192	Procainamide; with metabolites (eg, n-acetyl procainamide)	1
80193	Leflunomide	1
80194	Quinidine	1
80195	Sirolimus	1
80197	Tacrolimus	2
80198	Theophylline	1
80199	Tiagabine	1
80200	Tobramycin	1
80201	Topiramate	2
80202	Vancomycin	1
80203	Zonisamide	1
80204	Methotrexate	1
80210	Rufinamide	1
80220	Hydroxychloroquine	1
80230	Infliximab	1
80235	Lacosamide	1
80280	Vedolizumab	1
80285	Voriconazole	1
80299	Quantitation of therapeutic drug, not elsewhere specified	1
80305	Drug test(s), presumptive, any number of drug classes, any number of devices or procedures; capable of being read by direct optical observation only (eg, utilizing immunoassay [eg, dipsticks, cups, cards, or cartridges]), includes sample validation when performed, per date of service	1
80306	Drug test(s), presumptive, any number of drug classes, any number of devices or procedures; read by instrument assisted direct optical observation (eg, utilizing immunoassay [eg, dipsticks, cups, cards, or cartridges]), includes sample validation when performed, per date of service	1
80307	Drug test(s), presumptive, any number of drug classes, any number of devices or procedures; by instrument chemistry analyzers (eg, utilizing immunoassay [eg, EIA, ELISA, EMIT, FPIA, IA, KIMS, RIA]), chromatography (eg, GC, HPLC), and mass spectrometry either with or without chromatography, (eg, DART, DESI, GC-MS, GC-MS/MS, LC-MS, LC-MS/MS, LDTD, MALDI, TOF) includes sample validation when performed, per date of service	1
80320	Alcohols	1
80321	Alcohol biomarkers; 1 or 2	1
80322	Alcohol biomarkers; 3 or more	1
		1
80323	Alkaloids, not otherwise specified	1

80325	Amphetamines; 3 or 4	1
80326	Amphetamines; 5 or more	1
80327	Anabolic steroids; 1 or 2	1
80328	Anabolic steroids; 3 or more	1
80329	Analgesics, non-opioid; 1 or 2	1
80330	Analgesics, non-opioid; 3-5	1
80331	Analgesics, non-opioid; 6 or more	1
80332	Antidepressants, serotonergic class; 1 or 2	1
80333	Antidepressants, serotonergic class; 3-5	1
80334	Antidepressants, serotonergic class; 6 or more	1
80335	Antidepressants, tricyclic and other cyclicals; 1 or 2	1
80336	Antidepressants, tricyclic and other cyclicals; 3-5	1
80337	Antidepressants, tricyclic and other cyclicals; 6 or more	1
80338	Antidepressants, not otherwise specified	1
80339	Antiepileptics, not otherwise specified; 1-3	2
80340	Antiepileptics, not otherwise specified; 4-6	1
80341	Antiepileptics, not otherwise specified; 7 or more	1
80342	Antipsychotics, not otherwise specified; 1-3	1
80343	Antipsychotics, not otherwise specified; 4-6	1
80344	Antipsychotics, not otherwise specified; 7 or more	1
80345	Barbiturates	1
80346	Benzodiazepines; 1-12	1
80347	Benzodiazepines; 13 or more	1
80348	Buprenorphine	1
80349	Cannabinoids, natural	1
80350	Cannabinoids, synthetic; 1-3	1
80351	Cannabinoids, synthetic; 4-6	1
80352	Cannabinoids, synthetic; 7 or more	1
80353	Cocaine	1
80354	Fentanyl	1
80355	Gabapentin, non-blood	1
80356	Heroin metabolite	1
80357	Ketamine and norketamine	1
80358	Methadone	1
	1	

80359	Methylenedioxyamphetamines (MDA, MDEA, MDMA)	1
80360	Methylphenidate	1
80361	Opiates, 1 or more	1
80362	Opioids and opiate analogs; 1 or 2	1
80363	Opioids and Opiate analogs; 3 or 4	1
80364	Opioids and Opiate analogs; 5 or more	1
80365	Oxycodone	1
80366	Pregabalin	1
80367	Propoxyphene	1
80368	Sedative hypnotics (non-benzodiazepines)	1
80369	Skeletal muscle relaxants; 1 or 2	1
80370	Skeletal muscle relaxants; 3 or more	1
80371	Stimulants, synthetic	1
80372	Tapentadol	1
80373	Tramadol	1
80374	Stereoisomer (enantiomer) analysis, single drug class	1
80375	Drug(s) or substance(s), definitive, qualitative or quantitative, not otherwise specified; 1-3	1
80376	Drug(s) or substance(s), definitive, qualitative or quantitative, not otherwise specified; 4-6	1
80377	Drug(s) or substance(s), definitive, qualitative or quantitative, not otherwise specified; 7 or more	1
80400	ACTH stimulation panel; for adrenal insufficiency This panel must include the following: Cortisol (82533 x 2)	1
80402	ACTH stimulation panel; for 21 hydroxylase deficiency This panel must include the following: Cortisol (82533 x 2) 17 hydroxyprogesterone (83498 x 2)	1
80406	ACTH stimulation panel; for 3 beta-hydroxydehydrogenase deficiency This panel must include the following: Cortisol (82533 x 2) 17 hydroxypregnenolone (84143 x 2)	1
80408	Aldosterone suppression evaluation panel (eg, saline infusion) This panel must include the following: Aldosterone (82088 x 2) Renin (84244 x 2)	1
80410	Calcitonin stimulation panel (eg, calcium, pentagastrin) This panel must include the following: Calcitonin (82308 x 3)	1
80412	Corticotropic releasing hormone (CRH) stimulation panel This panel must include the following: Cortisol (82533 x 6) Adrenocorticotropic hormone (ACTH) (82024 x 6)	1
80414	Chorionic gonadotropin stimulation panel; testosterone response This panel must include the following: Testosterone (84403 x 2 on 3 pooled blood samples)	1
80415	Chorionic gonadotropin stimulation panel; estradiol response This panel must include the following: Estradiol, total (82670 x 2 on 3 pooled blood samples)	1

80416	Renal vein renin stimulation panel (eg, captopril) This panel must include the following: Renin (84244 x 6)	1
80417	Peripheral vein renin stimulation panel (eg, captopril) This panel must include the following: Renin (84244 x 2)	1
80418	Combined rapid anterior pituitary evaluation panel This panel must include the following: Adrenocorticotropic hormone (ACTH) (82024 x 4) Luteinizing hormone (LH) (83002 x 4) Follicle stimulating hormone (FSH) (83001 x 4) Prolactin (84146 x 4) Human growth hormone (HGH) (83003 x 4) Cortisol (82533 x 4) Thyroid stimulating hormone (TSH) (84443 x 4)	1
80420	Dexamethasone suppression panel, 48 hour This panel must include the following: Free cortisol, urine (82530 x 2) Cortisol (82533 x 2) Volume measurement for timed collection (81050 x 2)	1
80422	Glucagon tolerance panel; for insulinoma This panel must include the following: Glucose (82947 x 3) Insulin (83525 x 3)	1
80424	Glucagon tolerance panel; for pheochromocytoma This panel must include the following: Catecholamines, fractionated (82384 x 2)	1
80426	Gonadotropin releasing hormone stimulation panel This panel must include the following: Follicle stimulating hormone (FSH) (83001 x 4) Luteinizing hormone (LH) (83002 x 4)	1
80428	Growth hormone stimulation panel (eg, arginine infusion, I-dopa administration) This panel must include the following: Human growth hormone (HGH) (83003 x 4)	1
80430	Growth hormone suppression panel (glucose administration) This panel must include the following: Glucose (82947 x 3) Human growth hormone (HGH) (83003 x 4)	1
80432	Insulin-induced C-peptide suppression panel This panel must include the following: Insulin (83525) C-peptide (84681 x 5) Glucose (82947 x 5)	1
80434	Insulin tolerance panel; for ACTH insufficiency This panel must include the following: Cortisol (82533 x 5) Glucose (82947 x 5)	1
80435	Insulin tolerance panel; for growth hormone deficiency This panel must include the following: Glucose (82947 x 5) Human growth hormone (HGH) (83003 x 5)	1
80436	Metyrapone panel This panel must include the following: Cortisol (82533 x 2) 11 deoxycortisol (82634 x 2)	1
80438	Thyrotropin releasing hormone (TRH) stimulation panel; 1 hour This panel must include the following: Thyroid stimulating hormone (TSH) (84443 x 3)	1
80439	Thyrotropin releasing hormone (TRH) stimulation panel; 2 hour This panel must include the following: Thyroid stimulating hormone (TSH) (84443 x 4)	1
80503	Pathology clinical consultation; for a clinical problem, with limited review of patient's history and medical records and straightforward medical decision making When using time for code selection, 5-20 minutes of total time is spent on the date of the consultation.	1
80504	Pathology clinical consultation; for a moderately complex clinical problem, with review of patient's history and medical records and moderate level of medical	1

	decision making When using time for code selection, 21-40 minutes of total time is spent on the date of the consultation.	
80505	Pathology clinical consultation; for a highly complex clinical problem, with comprehensive review of patient's history and medical records and high level of medical decision making When using time for code selection, 41-60 minutes of total time is spent on the date of the consultation.	1
81002	Urinalysis, by dip stick or tablet reagent for bilirubin, glucose, hemoglobin, ketones, leukocytes, nitrite, pH, protein, specific gravity, urobilinogen, any number of these constituents; non-automated, without microscopy	1
81003	Urinalysis, by dip stick or tablet reagent for bilirubin, glucose, hemoglobin, ketones, leukocytes, nitrite, pH, protein, specific gravity, urobilinogen, any number of these constituents; automated, without microscopy	1
81005	Urinalysis; qualitative or semiquantitative, except immunoassays	1
81007	Urinalysis; bacteriuria screen, except by culture or dipstick	1
81015	Urinalysis; microscopic only	1
81020	Urinalysis; 2 or 3 glass test	1
81050	Volume measurement for timed collection, each	2
81099	Unlisted urinalysis procedure	1
81105	Human Platelet Antigen 1 genotyping (HPA-1), ITGB3 (integrin, beta 3 [platelet glycoprotein IIIa], antigen CD61 [GPIIIa]) (eg, neonatal alloimmune thrombocytopenia [NAIT], post-transfusion purpura), gene analysis, common variant, HPA-1a/b (L33P)	1
81106	Human Platelet Antigen 2 genotyping (HPA-2), GP1BA (glycoprotein lb [platelet], alpha polypeptide [GPlba]) (eg, neonatal alloimmune thrombocytopenia [NAIT], post-transfusion purpura), gene analysis, common variant, HPA-2a/b (T145M)	1
81107	Human Platelet Antigen 3 genotyping (HPA-3), ITGA2B (integrin, alpha 2b [platelet glycoprotein IIb of IIb/IIIa complex], antigen CD41 [GPIIb]) (eg, neonatal alloimmune thrombocytopenia [NAIT], post-transfusion purpura), gene analysis, common variant, HPA-3a/b (1843S)	1
81108	Human Platelet Antigen 4 genotyping (HPA-4), ITGB3 (integrin, beta 3 [platelet glycoprotein Illa], antigen CD61 [GPIlla]) (eg, neonatal alloimmune thrombocytopenia [NAIT], post-transfusion purpura), gene analysis, common variant, HPA-4a/b (R143Q)	1
81109	Human Platelet Antigen 5 genotyping (HPA-5), ITGA2 (integrin, alpha 2 [CD49B, alpha 2 subunit of VLA-2 receptor] [GPIa]) (eg, neonatal alloimmune thrombocytopenia [NAIT], post-transfusion purpura), gene analysis, common variant (eg, HPA-5a/b [K505E])	1
81110	Human Platelet Antigen 6 genotyping (HPA-6w), ITGB3 (integrin, beta 3 [platelet glycoprotein IIIa, antigen CD61] [GPIIIa]) (eg, neonatal alloimmune thrombocytopenia [NAIT], post-transfusion purpura), gene analysis, common variant, HPA-6a/b (R489Q)	1
81111	Human Platelet Antigen 9 genotyping (HPA-9w), ITGA2B (integrin, alpha 2b [platelet glycoprotein IIb of IIb/IIIa complex, antigen CD41] [GPIIb]) (eg, neonatal alloimmune	1

	thrombocytopenia [NAIT], post-transfusion purpura), gene analysis, common variant, HPA-9a/b (V837M)	
81112	Human Platelet Antigen 15 genotyping (HPA-15), CD109 (CD109 molecule) (eg, neonatal alloimmune thrombocytopenia [NAIT], post-transfusion purpura), gene analysis, common variant, HPA-15a/b (S682Y)	1
81120	IDH1 (isocitrate dehydrogenase 1 [NADP+], soluble) (eg, glioma), common variants (eg, R132H, R132C)	1
81121	IDH2 (isocitrate dehydrogenase 2 [NADP+], mitochondrial) (eg, glioma), common variants (eg, R140W, R172M)	1
81161	DMD (dystrophin) (eg, Duchenne/Becker muscular dystrophy) deletion analysis, and duplication analysis, if performed	1
81162	BRCA1 (BRCA1, DNA repair associated), BRCA2 (BRCA2, DNA repair associated) (eg, hereditary breast and ovarian cancer) gene analysis; full sequence analysis and full duplication/deletion analysis (ie, detection of large gene rearrangements)	1
81163	BRCA1 (BRCA1, DNA repair associated), BRCA2 (BRCA2, DNA repair associated) (eg, hereditary breast and ovarian cancer) gene analysis; full sequence analysis	1
81164	BRCA1 (BRCA1, DNA repair associated), BRCA2 (BRCA2, DNA repair associated) (eg, hereditary breast and ovarian cancer) gene analysis; full duplication/deletion analysis (ie, detection of large gene rearrangements)	1
81165	BRCA1 (BRCA1, DNA repair associated) (eg, hereditary breast and ovarian cancer) gene analysis; full sequence analysis	1
81166	BRCA1 (BRCA1, DNA repair associated) (eg, hereditary breast and ovarian cancer) gene analysis; full duplication/deletion analysis (ie, detection of large gene rearrangements)	1
81167	BRCA2 (BRCA2, DNA repair associated) (eg, hereditary breast and ovarian cancer) gene analysis; full duplication/deletion analysis (ie, detection of large gene rearrangements)	1
81168	CCND1/IGH (t(11;14)) (eg, mantle cell lymphoma) translocation analysis, major breakpoint, qualitative and quantitative, if performed	1
81170	ABL1 (ABL proto-oncogene 1, non-receptor tyrosine kinase) (eg, acquired imatinib tyrosine kinase inhibitor resistance), gene analysis, variants in the kinase domain	1
81171	AFF2 (AF4/FMR2 family, member 2 [FMR2]) (eg, fragile X mental retardation 2 [FRAXE]) gene analysis; evaluation to detect abnormal (eg, expanded) alleles	1
81172	AFF2 (AF4/FMR2 family, member 2 [FMR2]) (eg, fragile X mental retardation 2 [FRAXE]) gene analysis; characterization of alleles (eg, expanded size and methylation status)	1
81173	AR (androgen receptor) (eg, spinal and bulbar muscular atrophy, Kennedy disease, X chromosome inactivation) gene analysis; full gene sequence	1
81174	AR (androgen receptor) (eg, spinal and bulbar muscular atrophy, Kennedy disease, X chromosome inactivation) gene analysis; known familial variant	1
81175	ASXL1 (additional sex combs like 1, transcriptional regulator) (eg, myelodysplastic syndrome, myeloproliferative neoplasms, chronic myelomonocytic leukemia), gene analysis; full gene sequence	1

81176	ASXL1 (additional sex combs like 1, transcriptional regulator) (eg, myelodysplastic syndrome, myeloproliferative neoplasms, chronic myelomonocytic leukemia), gene analysis; targeted sequence analysis (eg, exon 12)	1
81177	ATN1 (atrophin 1) (eg, dentatorubral-pallidoluysian atrophy) gene analysis, evaluation to detect abnormal (eg, expanded) alleles	1
81178	ATXN1 (ataxin 1) (eg, spinocerebellar ataxia) gene analysis, evaluation to detect abnormal (eg, expanded) alleles	1
81179	ATXN2 (ataxin 2) (eg, spinocerebellar ataxia) gene analysis, evaluation to detect abnormal (eg, expanded) alleles	1
81180	ATXN3 (ataxin 3) (eg, spinocerebellar ataxia, Machado-Joseph disease) gene analysis, evaluation to detect abnormal (eg, expanded) alleles	1
81181	ATXN7 (ataxin 7) (eg, spinocerebellar ataxia) gene analysis, evaluation to detect abnormal (eg, expanded) alleles	1
81182	ATXN8OS (ATXN8 opposite strand [non-protein coding]) (eg, spinocerebellar ataxia) gene analysis, evaluation to detect abnormal (eg, expanded) alleles	1
81183	ATXN10 (ataxin 10) (eg, spinocerebellar ataxia) gene analysis, evaluation to detect abnormal (eg, expanded) alleles	1
81184	CACNA1A (calcium voltage-gated channel subunit alpha1 A) (eg, spinocerebellar ataxia) gene analysis; evaluation to detect abnormal (eg, expanded) alleles	1
81185	CACNA1A (calcium voltage-gated channel subunit alpha1 A) (eg, spinocerebellar ataxia) gene analysis; full gene sequence	1
81186	CACNA1A (calcium voltage-gated channel subunit alpha1 A) (eg, spinocerebellar ataxia) gene analysis; known familial variant	1
81187	CNBP (CCHC-type zinc finger nucleic acid binding protein) (eg, myotonic dystrophy type 2) gene analysis, evaluation to detect abnormal (eg, expanded) alleles	1
81188	CSTB (cystatin B) (eg, Unverricht-Lundborg disease) gene analysis; evaluation to detect abnormal (eg, expanded) alleles	1
81189	CSTB (cystatin B) (eg, Unverricht-Lundborg disease) gene analysis; full gene sequence	1
81190	CSTB (cystatin B) (eg, Unverricht-Lundborg disease) gene analysis; known familial variant(s)	1
81191	NTRK1 (neurotrophic receptor tyrosine kinase 1) (eg, solid tumors) translocation analysis	1
81192	NTRK2 (neurotrophic receptor tyrosine kinase 2) (eg, solid tumors) translocation analysis	1
81193	NTRK3 (neurotrophic receptor tyrosine kinase 3) (eg, solid tumors) translocation analysis	1
81194	NTRK (neurotrophic receptor tyrosine kinase 1, 2, and 3) (eg, solid tumors) translocation analysis	1
81200	ASPA (aspartoacylase) (eg, Canavan disease) gene analysis, common variants (eg, E285A, Y231X)	1

		1
81201	APC (adenomatous polyposis coli) (eg, familial adenomatosis polyposis [FAP], attenuated FAP) gene analysis; full gene sequence	1
81202	APC (adenomatous polyposis coli) (eg, familial adenomatosis polyposis [FAP], attenuated FAP) gene analysis; known familial variants	1
81203	APC (adenomatous polyposis coli) (eg, familial adenomatosis polyposis [FAP], attenuated FAP) gene analysis; duplication/deletion variants	1
81204	AR (androgen receptor) (eg, spinal and bulbar muscular atrophy, Kennedy disease, X chromosome inactivation) gene analysis; characterization of alleles (eg, expanded size or methylation status)	1
81205	BCKDHB (branched-chain keto acid dehydrogenase E1, beta polypeptide) (eg, maple syrup urine disease) gene analysis, common variants (eg, R183P, G278S, E422X)	1
81206	BCR/ABL1 (t(9;22)) (eg, chronic myelogenous leukemia) translocation analysis; major breakpoint, qualitative or quantitative	1
81207	BCR/ABL1 (t(9;22)) (eg, chronic myelogenous leukemia) translocation analysis; minor breakpoint, qualitative or quantitative	1
81208	BCR/ABL1 (t(9;22)) (eg, chronic myelogenous leukemia) translocation analysis; other breakpoint, qualitative or quantitative	1
81209	BLM (Bloom syndrome, RecQ helicase-like) (eg, Bloom syndrome) gene analysis, 2281del6ins7 variant	1
81210	BRAF (B-Raf proto-oncogene, serine/threonine kinase) (eg, colon cancer, melanoma), gene analysis, V600 variant(s)	1
81212	BRCA1 (BRCA1, DNA repair associated), BRCA2 (BRCA2, DNA repair associated) (eg, hereditary breast and ovarian cancer) gene analysis; 185delAG, 5385insC, 6174delT variants	1
81215	BRCA1 (BRCA1, DNA repair associated) (eg, hereditary breast and ovarian cancer) gene analysis; known familial variant	1
81216	BRCA2 (BRCA2, DNA repair associated) (eg, hereditary breast and ovarian cancer) gene analysis; full sequence analysis	1
81217	BRCA2 (BRCA2, DNA repair associated) (eg, hereditary breast and ovarian cancer) gene analysis; known familial variant	1
81218	CEBPA (CCAAT/enhancer binding protein [C/EBP], alpha) (eg, acute myeloid leukemia), gene analysis, full gene sequence	1
81219	CALR (calreticulin) (eg, myeloproliferative disorders), gene analysis, common variants in exon 9	1
81220	CFTR (cystic fibrosis transmembrane conductance regulator) (eg, cystic fibrosis) gene analysis; common variants (eg, ACMG/ACOG guidelines)	1
81221	CFTR (cystic fibrosis transmembrane conductance regulator) (eg, cystic fibrosis) gene analysis; known familial variants	1
81222	CFTR (cystic fibrosis transmembrane conductance regulator) (eg, cystic fibrosis) gene analysis; duplication/deletion variants	1
81223	CFTR (cystic fibrosis transmembrane conductance regulator) (eg, cystic fibrosis) gene analysis; full gene sequence	1

81224	CFTR (cystic fibrosis transmembrane conductance regulator) (eg, cystic fibrosis) gene analysis; intron 8 poly-T analysis (eg, male infertility)	1
81225	CYP2C19 (cytochrome P450, family 2, subfamily C, polypeptide 19) (eg, drug metabolism), gene analysis, common variants (eg, *2, *3, *4, *8, *17)	1
81226	CYP2D6 (cytochrome P450, family 2, subfamily D, polypeptide 6) (eg, drug metabolism), gene analysis, common variants (eg, *2, *3, *4, *5, *6, *9, *10, *17, *19, *29, *35, *41, *1XN, *2XN, *4XN)	1
81227	CYP2C9 (cytochrome P450, family 2, subfamily C, polypeptide 9) (eg, drug metabolism), gene analysis, common variants (eg, *2, *3, *5, *6)	1
81228	Cytogenomic (genome-wide) analysis for constitutional chromosomal abnormalities; interrogation of genomic regions for copy number variants, comparative genomic hybridization [CGH] microarray analysis	1
81229	Cytogenomic (genome-wide) analysis for constitutional chromosomal abnormalities; interrogation of genomic regions for copy number and single nucleotide polymorphism (SNP) variants, comparative genomic hybridization (CGH) microarray analysis	1
81230	CYP3A4 (cytochrome P450 family 3 subfamily A member 4) (eg, drug metabolism), gene analysis, common variant(s) (eg, *2, *22)	1
81231	CYP3A5 (cytochrome P450 family 3 subfamily A member 5) (eg, drug metabolism), gene analysis, common variants (eg, *2, *3, *4, *5, *6, *7)	1
81232	DPYD (dihydropyrimidine dehydrogenase) (eg, 5-fluorouracil/5-FU and capecitabine drug metabolism), gene analysis, common variant(s) (eg, *2A, *4, *5, *6)	1
81233	BTK (Bruton's tyrosine kinase) (eg, chronic lymphocytic leukemia) gene analysis, common variants (eg, C481S, C481R, C481F)	1
81234	DMPK (DM1 protein kinase) (eg, myotonic dystrophy type 1) gene analysis; evaluation to detect abnormal (expanded) alleles	1
81235	EGFR (epidermal growth factor receptor) (eg, non-small cell lung cancer) gene analysis, common variants (eg, exon 19 LREA deletion, L858R, T790M, G719A, G719S, L861Q)	1
81236	EZH2 (enhancer of zeste 2 polycomb repressive complex 2 subunit) (eg, myelodysplastic syndrome, myeloproliferative neoplasms) gene analysis, full gene sequence	1
81237	EZH2 (enhancer of zeste 2 polycomb repressive complex 2 subunit) (eg, diffuse large B-cell lymphoma) gene analysis, common variant(s) (eg, codon 646)	1
81238	F9 (coagulation factor IX) (eg, hemophilia B), full gene sequence	1
81239	DMPK (DM1 protein kinase) (eg, myotonic dystrophy type 1) gene analysis; characterization of alleles (eg, expanded size)	1
81240	F2 (prothrombin, coagulation factor II) (eg, hereditary hypercoagulability) gene analysis, 20210G>A variant	1
81241	F5 (coagulation factor V) (eg, hereditary hypercoagulability) gene analysis, Leiden variant	1

FANCC (Fanconi anemia, complementation group C) (eg, Fanconi anemia, type C) gene analysis, common variant (eg, IVS4+4A>T)	1
FMR1 (fragile X mental retardation 1) (eg, fragile X mental retardation) gene analysis; evaluation to detect abnormal (eg, expanded) alleles	1
FMR1 (fragile X mental retardation 1) (eg, fragile X mental retardation) gene analysis; characterization of alleles (eg, expanded size and promoter methylation status)	1
FLT3 (fms-related tyrosine kinase 3) (eg, acute myeloid leukemia), gene analysis; internal tandem duplication (ITD) variants (ie, exons 14, 15)	1
FLT3 (fms-related tyrosine kinase 3) (eg, acute myeloid leukemia), gene analysis; tyrosine kinase domain (TKD) variants (eg, D835, I836)	1
G6PD (glucose-6-phosphate dehydrogenase) (eg, hemolytic anemia, jaundice), gene analysis; common variant(s) (eg, A, A-)	1
G6PD (glucose-6-phosphate dehydrogenase) (eg, hemolytic anemia, jaundice), gene analysis; known familial variant(s)	1
G6PD (glucose-6-phosphate dehydrogenase) (eg, hemolytic anemia, jaundice), gene analysis; full gene sequence	1
G6PC (glucose-6-phosphatase, catalytic subunit) (eg, Glycogen storage disease, type 1a, von Gierke disease) gene analysis, common variants (eg, R83C, Q347X)	1
GBA (glucosidase, beta, acid) (eg, Gaucher disease) gene analysis, common variants (eg, N370S, 84GG, L444P, IVS2+1G>A)	1
GJB2 (gap junction protein, beta 2, 26kDa, connexin 26) (eg, nonsyndromic hearing loss) gene analysis; full gene sequence	1
GJB2 (gap junction protein, beta 2, 26kDa, connexin 26) (eg, nonsyndromic hearing loss) gene analysis; known familial variants	1
GJB6 (gap junction protein, beta 6, 30kDa, connexin 30) (eg, nonsyndromic hearing loss) gene analysis, common variants (eg, 309kb [del(GJB6-D13S1830)] and 232kb [del(GJB6-D13S1854)])	1
HEXA (hexosaminidase A [alpha polypeptide]) (eg, Tay-Sachs disease) gene analysis, common variants (eg, 1278insTATC, 1421+1G>C, G269S)	1
HFE (hemochromatosis) (eg, hereditary hemochromatosis) gene analysis, common variants (eg, C282Y, H63D)	1
HBA1/HBA2 (alpha globin 1 and alpha globin 2) (eg, alpha thalassemia, Hb Bart hydrops fetalis syndrome, HbH disease), gene analysis; common deletions or variant (eg, Southeast Asian, Thai, Filipino, Mediterranean, alpha3.7, alpha4.2, alpha20.5, Constant Spring)	1
HBA1/HBA2 (alpha globin 1 and alpha globin 2) (eg, alpha thalassemia, Hb Bart hydrops fetalis syndrome, HbH disease), gene analysis; known familial variant	1
HBA1/HBA2 (alpha globin 1 and alpha globin 2) (eg, alpha thalassemia, Hb Bart hydrops fetalis syndrome, HbH disease), gene analysis; full gene sequence	1
	gene analysis, common variant (eg, IVS4+4A>T) FMR1 (fragile X mental retardation 1) (eg, fragile X mental retardation) gene analysis; evaluation to detect abnormal (eg, expanded) alleles FMR1 (fragile X mental retardation 1) (eg, fragile X mental retardation) gene analysis; characterization of alleles (eg, expanded size and promoter methylation status) FLT3 (fms-related tyrosine kinase 3) (eg, acute myeloid leukemia), gene analysis; internal tandem duplication (ITD) variants (ie, exons 14, 15) FLT3 (fms-related tyrosine kinase 3) (eg, acute myeloid leukemia), gene analysis; tyrosine kinase domain (TKD) variants (eg, D835, I836) GGPD (glucose-6-phosphate dehydrogenase) (eg, hemolytic anemia, jaundice), gene analysis; common variant(s) (eg, A, A-) GGPD (glucose-6-phosphate dehydrogenase) (eg, hemolytic anemia, jaundice), gene analysis; known familial variant(s) GGPD (glucose-6-phosphate dehydrogenase) (eg, hemolytic anemia, jaundice), gene analysis; full gene sequence GGPC (glucose-6-phosphatase, catalytic subunit) (eg, Glycogen storage disease, type 1a, von Gierke disease) gene analysis, common variants (eg, R83C, Q347X) GBA (glucosidase, beta, acid) (eg, Gaucher disease) gene analysis, common variants (eg, N370S, 84GG, L444P, IVS2+1G>A) GJB2 (gap junction protein, beta 2, 26kDa, connexin 26) (eg, nonsyndromic hearing loss) gene analysis; full gene sequence GJB2 (gap junction protein, beta 2, 26kDa, connexin 26) (eg, nonsyndromic hearing loss) gene analysis; known familial variants GJB6 (gap junction protein, beta 2, 26kDa, connexin 30) (eg, nonsyndromic hearing loss) gene analysis; known familial variants GJB6 (gap junction protein, beta 6, 30kDa, connexin 30) (eg, nonsyndromic hearing loss) gene analysis; known familial variants GJB6 (gap junction protein, beta 6, 30kDa, connexin 30) (eg, nonsyndromic hearing loss) gene analysis; known familial variants GJB6 (gap junction protein, beta 6, 30kDa, connexin 30) (eg, nonsyndromic hearing loss) gene analysis, common variants (eg, 2282Y, H63D) HBA1/H

81260	IKBKAP (inhibitor of kappa light polypeptide gene enhancer in B-cells, kinase complex-associated protein) (eg, familial dysautonomia) gene analysis, common variants (eg, 2507+6T>C, R696P)	1
81261	IGH@ (Immunoglobulin heavy chain locus) (eg, leukemias and lymphomas, B-cell), gene rearrangement analysis to detect abnormal clonal population(s); amplified methodology (eg, polymerase chain reaction)	1
81262	IGH@ (Immunoglobulin heavy chain locus) (eg, leukemias and lymphomas, B-cell), gene rearrangement analysis to detect abnormal clonal population(s); direct probe methodology (eg, Southern blot)	1
81263	IGH@ (Immunoglobulin heavy chain locus) (eg, leukemia and lymphoma, B-cell), variable region somatic mutation analysis	1
81264	IGK@ (Immunoglobulin kappa light chain locus) (eg, leukemia and lymphoma, B-cell), gene rearrangement analysis, evaluation to detect abnormal clonal population(s)	1
81265	Comparative analysis using Short Tandem Repeat (STR) markers; patient and comparative specimen (eg, pre-transplant recipient and donor germline testing, post-transplant non-hematopoietic recipient germline [eg, buccal swab or other germline tissue sample] and donor testing, twin zygosity testing, or maternal cell contamination of fetal cells)	1
81266	Comparative analysis using Short Tandem Repeat (STR) markers; each additional specimen (eg, additional cord blood donor, additional fetal samples from different cultures, or additional zygosity in multiple birth pregnancies) (List separately in addition to code for primary procedure)	2
81267	Chimerism (engraftment) analysis, post transplantation specimen (eg, hematopoietic stem cell), includes comparison to previously performed baseline analyses; without cell selection	1
81268	Chimerism (engraftment) analysis, post transplantation specimen (eg, hematopoietic stem cell), includes comparison to previously performed baseline analyses; with cell selection (eg, CD3, CD33), each cell type	4
81269	HBA1/HBA2 (alpha globin 1 and alpha globin 2) (eg, alpha thalassemia, Hb Bart hydrops fetalis syndrome, HbH disease), gene analysis; duplication/deletion variants	1
81270	JAK2 (Janus kinase 2) (eg, myeloproliferative disorder) gene analysis, p.Val617Phe (V617F) variant	1
81271	HTT (huntingtin) (eg, Huntington disease) gene analysis; evaluation to detect abnormal (eg, expanded) alleles	1
81272	KIT (v-kit Hardy-Zuckerman 4 feline sarcoma viral oncogene homolog) (eg, gastrointestinal stromal tumor [GIST], acute myeloid leukemia, melanoma), gene analysis, targeted sequence analysis (eg, exons 8, 11, 13, 17, 18)	1
81273	KIT (v-kit Hardy-Zuckerman 4 feline sarcoma viral oncogene homolog) (eg, mastocytosis), gene analysis, D816 variant(s)	1
81274	HTT (huntingtin) (eg, Huntington disease) gene analysis; characterization of alleles (eg, expanded size)	1

81275	KRAS (Kirsten rat sarcoma viral oncogene homolog) (eg, carcinoma) gene analysis; variants in exon 2 (eg, codons 12 and 13)	1
81276	KRAS (Kirsten rat sarcoma viral oncogene homolog) (eg, carcinoma) gene analysis; additional variant(s) (eg, codon 61, codon 146)	1
81277	Cytogenomic neoplasia (genome-wide) microarray analysis, interrogation of genomic regions for copy number and loss-of-heterozygosity variants for chromosomal abnormalities	1
81278	IGH@/BCL2 (t(14;18)) (eg, follicular lymphoma) translocation analysis, major breakpoint region (MBR) and minor cluster region (mcr) breakpoints, qualitative or quantitative	1
81279	JAK2 (Janus kinase 2) (eg, myeloproliferative disorder) targeted sequence analysis (eg, exons 12 and 13)	1
81283	IFNL3 (interferon, lambda 3) (eg, drug response), gene analysis, rs12979860 variant	1
81284	FXN (frataxin) (eg, Friedreich ataxia) gene analysis; evaluation to detect abnormal (expanded) alleles	1
81285	FXN (frataxin) (eg, Friedreich ataxia) gene analysis; characterization of alleles (eg, expanded size)	1
81286	FXN (frataxin) (eg, Friedreich ataxia) gene analysis; full gene sequence	1
81287	MGMT (O-6-methylguanine-DNA methyltransferase) (eg, glioblastoma multiforme) promoter methylation analysis	1
81288	MLH1 (mutL homolog 1, colon cancer, nonpolyposis type 2) (eg, hereditary non- polyposis colorectal cancer, Lynch syndrome) gene analysis; promoter methylation analysis	1
81289	FXN (frataxin) (eg, Friedreich ataxia) gene analysis; known familial variant(s)	1
81290	MCOLN1 (mucolipin 1) (eg, Mucolipidosis, type IV) gene analysis, common variants (eg, IVS3-2A>G, del6.4kb)	1
81291	MTHFR (5,10-methylenetetrahydrofolate reductase) (eg, hereditary hypercoagulability) gene analysis, common variants (eg, 677T, 1298C)	1
81292	MLH1 (mutL homolog 1, colon cancer, nonpolyposis type 2) (eg, hereditary non-polyposis colorectal cancer, Lynch syndrome) gene analysis; full sequence analysis	1
81293	MLH1 (mutL homolog 1, colon cancer, nonpolyposis type 2) (eg, hereditary non-polyposis colorectal cancer, Lynch syndrome) gene analysis; known familial variants	1
81294	MLH1 (mutL homolog 1, colon cancer, nonpolyposis type 2) (eg, hereditary non-polyposis colorectal cancer, Lynch syndrome) gene analysis; duplication/deletion variants	1
81295	MSH2 (mutS homolog 2, colon cancer, nonpolyposis type 1) (eg, hereditary non-polyposis colorectal cancer, Lynch syndrome) gene analysis; full sequence analysis	1
81296	MSH2 (mutS homolog 2, colon cancer, nonpolyposis type 1) (eg, hereditary non-polyposis colorectal cancer, Lynch syndrome) gene analysis; known familial variants	1
81297	MSH2 (mutS homolog 2, colon cancer, nonpolyposis type 1) (eg, hereditary non- polyposis colorectal cancer, Lynch syndrome) gene analysis; duplication/deletion variants	1

81298	MSH6 (mutS homolog 6 [E. coli]) (eg, hereditary non-polyposis colorectal cancer, Lynch syndrome) gene analysis; full sequence analysis	1
81299	MSH6 (mutS homolog 6 [E. coli]) (eg, hereditary non-polyposis colorectal cancer, Lynch syndrome) gene analysis; known familial variants	1
81300	MSH6 (mutS homolog 6 [E. coli]) (eg, hereditary non-polyposis colorectal cancer, Lynch syndrome) gene analysis; duplication/deletion variants	1
81301	Microsatellite instability analysis (eg, hereditary non-polyposis colorectal cancer, Lynch syndrome) of markers for mismatch repair deficiency (eg, BAT25, BAT26), includes comparison of neoplastic and normal tissue, if performed	1
81302	MECP2 (methyl CpG binding protein 2) (eg, Rett syndrome) gene analysis; full sequence analysis	1
81303	MECP2 (methyl CpG binding protein 2) (eg, Rett syndrome) gene analysis; known familial variant	1
81304	MECP2 (methyl CpG binding protein 2) (eg, Rett syndrome) gene analysis; duplication/deletion variants	1
81305	MYD88 (myeloid differentiation primary response 88) (eg, Waldenstrom's macroglobulinemia, lymphoplasmacytic leukemia) gene analysis, p.Leu265Pro (L265P) variant	1
81306	NUDT15 (nudix hydrolase 15) (eg, drug metabolism) gene analysis, common variant(s) (eg, *2, *3, *4, *5, *6)	1
81307	PALB2 (partner and localizer of BRCA2) (eg, breast and pancreatic cancer) gene analysis; full gene sequence	1
81308	PALB2 (partner and localizer of BRCA2) (eg, breast and pancreatic cancer) gene analysis; known familial variant	1
81309	PIK3CA (phosphatidylinositol-4, 5-biphosphate 3-kinase, catalytic subunit alpha) (eg, colorectal and breast cancer) gene analysis, targeted sequence analysis (eg, exons 7, 9, 20)	1
81310	NPM1 (nucleophosmin) (eg, acute myeloid leukemia) gene analysis, exon 12 variants	1
81311	NRAS (neuroblastoma RAS viral [v-ras] oncogene homolog) (eg, colorectal carcinoma), gene analysis, variants in exon 2 (eg, codons 12 and 13) and exon 3 (eg, codon 61)	1
81312	PABPN1 (poly[A] binding protein nuclear 1) (eg, oculopharyngeal muscular dystrophy) gene analysis, evaluation to detect abnormal (eg, expanded) alleles	1
81313	PCA3/KLK3 (prostate cancer antigen 3 [non-protein coding]/kallikrein-related peptidase 3 [prostate specific antigen]) ratio (eg, prostate cancer)	1
81314	PDGFRA (platelet-derived growth factor receptor, alpha polypeptide) (eg, gastrointestinal stromal tumor [GIST]), gene analysis, targeted sequence analysis (eg, exons 12, 18)	1
81315	PML/RARalpha, (t(15;17)), (promyelocytic leukemia/retinoic acid receptor alpha) (eg, promyelocytic leukemia) translocation analysis; common breakpoints (eg, intron 3 and intron 6), qualitative or quantitative	1

81316	PML/RARalpha, (t(15;17)), (promyelocytic leukemia/retinoic acid receptor alpha) (eg, promyelocytic leukemia) translocation analysis; single breakpoint (eg, intron 3, intron 6 or exon 6), qualitative or quantitative	1
81317	PMS2 (postmeiotic segregation increased 2 [S. cerevisiae]) (eg, hereditary non-polyposis colorectal cancer, Lynch syndrome) gene analysis; full sequence analysis	1
81318	PMS2 (postmeiotic segregation increased 2 [S. cerevisiae]) (eg, hereditary non-polyposis colorectal cancer, Lynch syndrome) gene analysis; known familial variants	1
81319	PMS2 (postmeiotic segregation increased 2 [S. cerevisiae]) (eg, hereditary non-polyposis colorectal cancer, Lynch syndrome) gene analysis; duplication/deletion variants	1
81320	PLCG2 (phospholipase C gamma 2) (eg, chronic lymphocytic leukemia) gene analysis, common variants (eg, R665W, S707F, L845F)	1
81321	PTEN (phosphatase and tensin homolog) (eg, Cowden syndrome, PTEN hamartoma tumor syndrome) gene analysis; full sequence analysis	1
81322	PTEN (phosphatase and tensin homolog) (eg, Cowden syndrome, PTEN hamartoma tumor syndrome) gene analysis; known familial variant	1
81323	PTEN (phosphatase and tensin homolog) (eg, Cowden syndrome, PTEN hamartoma tumor syndrome) gene analysis; duplication/deletion variant	1
81324	PMP22 (peripheral myelin protein 22) (eg, Charcot-Marie-Tooth, hereditary neuropathy with liability to pressure palsies) gene analysis; duplication/deletion analysis	1
81325	PMP22 (peripheral myelin protein 22) (eg, Charcot-Marie-Tooth, hereditary neuropathy with liability to pressure palsies) gene analysis; full sequence analysis	1
81326	PMP22 (peripheral myelin protein 22) (eg, Charcot-Marie-Tooth, hereditary neuropathy with liability to pressure palsies) gene analysis; known familial variant	1
81327	SEPT9 (Septin9) (eg, colorectal cancer) promoter methylation analysis	1
81328	SLCO1B1 (solute carrier organic anion transporter family, member 1B1) (eg, adverse drug reaction), gene analysis, common variant(s) (eg, *5)	1
81329	SMN1 (survival of motor neuron 1, telomeric) (eg, spinal muscular atrophy) gene analysis; dosage/deletion analysis (eg, carrier testing), includes SMN2 (survival of motor neuron 2, centromeric) analysis, if performed	1
81330	SMPD1(sphingomyelin phosphodiesterase 1, acid lysosomal) (eg, Niemann-Pick disease, Type A) gene analysis, common variants (eg, R496L, L302P, fsP330)	1
81331	SNRPN/UBE3A (small nuclear ribonucleoprotein polypeptide N and ubiquitin protein ligase E3A) (eg, Prader-Willi syndrome and/or Angelman syndrome), methylation analysis	1
81332	SERPINA1 (serpin peptidase inhibitor, clade A, alpha-1 antiproteinase, antitrypsin, member 1) (eg, alpha-1-antitrypsin deficiency), gene analysis, common variants (eg, *S and *Z)	1
81333	TGFBI (transforming growth factor beta-induced) (eg, corneal dystrophy) gene analysis, common variants (eg, R124H, R124C, R124L, R555W, R555Q)	1

81334	RUNX1 (runt related transcription factor 1) (eg, acute myeloid leukemia, familial platelet disorder with associated myeloid malignancy) gene analysis, targeted sequence analysis (eg, exons 3-8)	1
81335	TPMT (thiopurine S-methyltransferase) (eg, drug metabolism), gene analysis, common variants (eg, *2, *3)	1
81336	SMN1 (survival of motor neuron 1, telomeric) (eg, spinal muscular atrophy) gene analysis; full gene sequence	1
81337	SMN1 (survival of motor neuron 1, telomeric) (eg, spinal muscular atrophy) gene analysis; known familial sequence variant(s)	1
81338	MPL (MPL proto-oncogene, thrombopoietin receptor) (eg, myeloproliferative disorder) gene analysis; common variants (eg, W515A, W515K, W515L, W515R)	1
81339	MPL (MPL proto-oncogene, thrombopoietin receptor) (eg, myeloproliferative disorder) gene analysis; sequence analysis, exon 10	1
81340	TRB@ (T cell antigen receptor, beta) (eg, leukemia and lymphoma), gene rearrangement analysis to detect abnormal clonal population(s); using amplification methodology (eg, polymerase chain reaction)	1
81341	TRB@ (T cell antigen receptor, beta) (eg, leukemia and lymphoma), gene rearrangement analysis to detect abnormal clonal population(s); using direct probe methodology (eg, Southern blot)	1
81342	TRG@ (T cell antigen receptor, gamma) (eg, leukemia and lymphoma), gene rearrangement analysis, evaluation to detect abnormal clonal population(s)	1
81343	PPP2R2B (protein phosphatase 2 regulatory subunit Bbeta) (eg, spinocerebellar ataxia) gene analysis, evaluation to detect abnormal (eg, expanded) alleles	1
81344	TBP (TATA box binding protein) (eg, spinocerebellar ataxia) gene analysis, evaluation to detect abnormal (eg, expanded) alleles	1
81345	TERT (telomerase reverse transcriptase) (eg, thyroid carcinoma, glioblastoma multiforme) gene analysis, targeted sequence analysis (eg, promoter region)	1
81346	TYMS (thymidylate synthetase) (eg, 5-fluorouracil/5-FU drug metabolism), gene analysis, common variant(s) (eg, tandem repeat variant)	1
81347	SF3B1 (splicing factor [3b] subunit B1) (eg, myelodysplastic syndrome/acute myeloid leukemia) gene analysis, common variants (eg, A672T, E622D, L833F, R625C, R625L)	1
81348	SRSF2 (serine and arginine-rich splicing factor 2) (eg, myelodysplastic syndrome, acute myeloid leukemia) gene analysis, common variants (eg, P95H, P95L)	1
81349	Cytogenomic (genome-wide) analysis for constitutional chromosomal abnormalities; interrogation of genomic regions for copy number and loss-of-heterozygosity variants, low-pass sequencing analysis	1
81350	UGT1A1 (UDP glucuronosyltransferase 1 family, polypeptide A1) (eg, drug metabolism, hereditary unconjugated hyperbilirubinemia [Gilbert syndrome]) gene analysis, common variants (eg, *28, *36, *37)	1
81351	TP53 (tumor protein 53) (eg, Li-Fraumeni syndrome) gene analysis; full gene sequence	1

		1
81352	TP53 (tumor protein 53) (eg, Li-Fraumeni syndrome) gene analysis; targeted sequence analysis (eg, 4 oncology)	1
81353	TP53 (tumor protein 53) (eg, Li-Fraumeni syndrome) gene analysis; known familial variant	1
81355	VKORC1 (vitamin K epoxide reductase complex, subunit 1) (eg, warfarin metabolism), gene analysis, common variant(s) (eg, -1639G>A, c.173+1000C>T)	1
81357	U2AF1 (U2 small nuclear RNA auxiliary factor 1) (eg, myelodysplastic syndrome, acute myeloid leukemia) gene analysis, common variants (eg, S34F, S34Y, Q157R, Q157P)	1
81360	ZRSR2 (zinc finger CCCH-type, RNA binding motif and serine/arginine-rich 2) (eg, myelodysplastic syndrome, acute myeloid leukemia) gene analysis, common variant(s) (eg, E65fs, E122fs, R448fs)	1
81361	HBB (hemoglobin, subunit beta) (eg, sickle cell anemia, beta thalassemia, hemoglobinopathy); common variant(s) (eg, HbS, HbC, HbE)	1
81362	HBB (hemoglobin, subunit beta) (eg, sickle cell anemia, beta thalassemia, hemoglobinopathy); known familial variant(s)	1
81363	HBB (hemoglobin, subunit beta) (eg, sickle cell anemia, beta thalassemia, hemoglobinopathy); duplication/deletion variant(s)	1
81364	HBB (hemoglobin, subunit beta) (eg, sickle cell anemia, beta thalassemia, hemoglobinopathy); full gene sequence	1
81370	HLA Class I and II typing, low resolution (eg, antigen equivalents); HLA-A, -B, -C, - DRB1/3/4/5, and -DQB1	1
81371	HLA Class I and II typing, low resolution (eg, antigen equivalents); HLA-A, -B, and - DRB1 (eg, verification typing)	1
81372	HLA Class I typing, low resolution (eg, antigen equivalents); complete (ie, HLA-A, -B, and -C)	1
81373	HLA Class I typing, low resolution (eg, antigen equivalents); one locus (eg, HLA-A, -B, or -C), each	1
81374	HLA Class I typing, low resolution (eg, antigen equivalents); one antigen equivalent (eg, B*27), each	1
81375	HLA Class II typing, low resolution (eg, antigen equivalents); HLA-DRB1/3/4/5 and - DQB1	1
81376	HLA Class II typing, low resolution (eg, antigen equivalents); one locus (eg, HLA-DRB1, -DRB3/4/5, -DQB1, -DQA1, -DPB1, or -DPA1), each	1
81377	HLA Class II typing, low resolution (eg, antigen equivalents); one antigen equivalent, each	1
81378	HLA Class I and II typing, high resolution (ie, alleles or allele groups), HLA-A, -B, -C, and -DRB1	1
81379	HLA Class I typing, high resolution (ie, alleles or allele groups); complete (ie, HLA-A, -B, and -C)	1
81380	HLA Class I typing, high resolution (ie, alleles or allele groups); one locus (eg, HLA-A, -B, or -C), each	1

81381	HLA Class I typing, high resolution (ie, alleles or allele groups); one allele or allele group (eg, B*57:01P), each	1
81382	HLA Class II typing, high resolution (ie, alleles or allele groups); one locus (eg, HLA-DRB1, -DRB3/4/5, -DQB1, -DQA1, -DPB1, or -DPA1), each	1
81383	HLA Class II typing, high resolution (ie, alleles or allele groups); one allele or allele group (eg, HLA-DQB1*06:02P), each	1
81400	Molecular pathology procedure, Level 1 (eg, identification of single germline variant [eg, SNP] by techniques such as restriction enzyme digestion or melt curve analysis) ACADM (acyl-CoA dehydrogenase, C-4 to C-12 straight chain, MCAD) (eg, medium chain acyl dehydrogenase deficiency), K304E variant ACE (angiotensin converting enzyme) (eg, hereditary blood pressure regulation), insertion/deletion variant AGTR1 (angiotensin Il receptor, type 1) (eg, essential hypertension), 1166A>C variant BCKDHA (branched chain keto acid dehydrogenase £1, alpha polypeptide) (eg, maple syrup urine disease, type 1A), Y438N variant CCR5 (chemokine C-C motif receptor 5) (eg, HIV resistance), 32-bp deletion mutation/794 825del32 deletion CLRN1 (clarin 1) (eg, Usher syndrome, type 3), N48K variant F2 (coagulation factor 2) (eg, hereditary hypercoagulability), 1199G>A variant F5 (coagulation factor V) (eg, hereditary hypercoagulability), HR2 variant F7 (coagulation factor VII (serum prothrombin conversion accelerator)) (eg, hereditary hypercoagulability), R353Q variant F13B (coagulation factor XIII, B polypeptide) (eg, hereditary hypercoagulability), V34L variant FGB (fibrinogen beta chain) (eg, hereditary ischemic heart disease), -455G>A variant FGFR1 (fibroblast growth factor receptor 1) (eg, Pfeiffer syndrome type 1, craniosynostosis), P252R variant FGFR3 (fibroblast growth factor receptor 3) (eg, Muenke syndrome), P250R variant FKTN (fukutin) (eg, Fukuyama congenital muscular dystrophy), retrotransposon insertion variant GNE (glucosamine [UDP-N-acetyl]-2-epimerase/N-acetylmannosamine kinase) (eg, inclusion body myopathy 2 [IBM2], Nonaka myopathy), M712T variant IVD (isovaleryl-CoA dehydrogenase) (eg, isovaleric acidemia), A282V variant LCT (lactase-phlorizin hydrolase) (eg, lactose intolerance), 13910 C>T variant NEB (nebulin) (eg, nemaline myopathy 2), exon 55 deletion variant PCDH15 (protocadherin-related 15) (eg, Usher syndrome type 1F), R245X variant SERPINE1 (serpine peptidase inhi01bitor clade E, member 1, plasminogen activat	2

3

Molecular pathology procedure, Level 2 (eg, 2-10 SNPs, 1 methylated variant, or 1 somatic variant [typically using nonsequencing target variant analysis], or detection of a dynamic mutation disorder/triplet repeat) ABCC8 (ATP-binding cassette, subfamily C [CFTR/MRP], member 8) (eg, familial hyperinsulinism), common variants (eg, c.3898-9G>A [c.3992-9G>A], F1388del) ABL1 (ABL proto-oncogene 1, nonreceptor tyrosine kinase) (eg, acquired imatinib resistance), T315I variant ACADM (acyl-CoA dehydrogenase, C-4 to C-12 straight chain, MCAD) (eg, medium chain acyl dehydrogenase deficiency), commons variants (eg, K304E, Y42H) ADRB2 (adrenergic beta-2 receptor surface) (eg, drug metabolism), common variants (eg, G16R, Q27E) APOB (apolipoprotein B) (eg, familial hypercholesterolemia type B), common variants (eg, R3500Q, R3500W) APOE (apolipoprotein E) (eg, hyperlipoproteinemia type III, cardiovascular disease, Alzheimer disease), common variants (eg, *2, *3, *4) CBFB/MYH11 (inv(16)) (eg, acute myeloid leukemia), qualitative, and quantitative, if performed CBS (cystathionine-beta-synthase) (eg, homocystinuria, cystathionine beta-synthase deficiency), common variants (eg, I278T, G307S) CFH/ARMS2 (complement factor H/age-related maculopathy susceptibility 2) (eg, macular degeneration), common variants (eg, Y402H [CFH], A69S [ARMS2]) DEK/NUP214 (t(6;9)) (eg, acute myeloid leukemia), translocation analysis, qualitative, and quantitative, if performed E2A/PBX1 (t(1;19)) (eg, acute lymphocytic leukemia), translocation analysis, qualitative, and quantitative, if performed EML4/ALK (inv(2)) (eg, non-small cell lung cancer), translocation or inversion analysis ETV6/RUNX1 (t(12;21)) (eg, acute lymphocytic leukemia), translocation analysis, qualitative, and quantitative, if performed EWSR1/ATF1 (t(12;22)) (eg, clear cell sarcoma), translocation analysis, qualitative, and quantitative, if performed EWSR1/ERG (t(21;22)) (eg, Ewing sarcoma/peripheral neuroectodermal tumor), translocation a03-associated polyposis), common variants (eg, Y165C, G382D) NOD2 (nucleotidebinding oligomerization domain containing 2) (eg, Crohn's disease, Blau syndrome), common variants (eg, SNP 8, SNP 12, SNP 13) NPM1/ALK (t(2;5)) (eg, anaplastic large cell lymphoma), translocation analysis PAX8/PPARG (t(2;3) (q13;p25)) (eg, follicular thyroid carcinoma), translocation analysis PRAME (preferentially expressed antigen in melanoma) (eg, melanoma), expression analysis PRSS1 (protease, serine, 1 [trypsin 1]) (eg, hereditary pancreatitis), common variants (eg, N29I, A16V, R122H) PYGM (phosphorylase, glycogen, muscle) (eg, glycogen storage disease type V, McArdle disease), common variants (eg, R50X, G205S) RUNX1/RUNX1T1 (t(8;21)) (eg, acute myeloid leukemia) translocation analysis, qualitative, and quantitative, if performed SS18/SSX1 (t(X;18)) (eg, synovial sarcoma), translocation analysis, qualitative, and quantitative, if performed SS18/SSX2 (t(X;18)) (eg, synovial sarcoma), translocation analysis, qualitative, and quantitative, if performed VWF (von Willebrand factor) (eg, von Willebrand disease type 2N), common variants (eg, T791M, R816W, R854Q)

81402 Molecular pathology procedure, Level 3 (eg, >10 SNPs, 2-10 methylated variants, or 1 2-10 somatic variants [typically using non-sequencing target variant analysis], immunoglobulin and T-cell receptor gene rearrangements, duplication/deletion variants of 1 exon, loss of heterozygosity [LOH], uniparental disomy [UPD]) Chromosome 1p-/19q- (eg, glial tumors), deletion analysis Chromosome 18q- (eg, D18S55, D18S61, D18S61, D18S64, and D18S69) (eg, colon cancer), allelic imbalance assessment (ie, loss of heterozygosity) COL1A1/PDGFB (t(17;22)) (eg, dermatofibrosarcoma protuberans), translocation analysis, multiple breakpoints, qualitative, and quantitative, if performed CYP21A2 (cytochrome P450, family 21, subfamily A, polypeptide 2) (eg, congenital adrenal hyperplasia, 21-hydroxylase deficiency), common variants (eg, IVS2-13G, P30L, I172N, exon 6 mutation cluster [I235N, V236E, M238K], V281L, L307FfsX6, Q318X, R356W, P453S, G110VfsX21, 30kb deletion variant) ESR1/PGR (receptor 1/progesterone receptor) ratio (eg, breast cancer) MEFV (Mediterranean fever) (eg, familial Mediterranean fever), common variants (eg, E148Q, P369S, F479L, M680I, I692del, M694V, M694I, K695R, V726A, A744S, R761H) TRD@ (T cell antigen receptor, delta) (eg, leukemia and lymphoma), gene rearrangement analysis, evaluation to detect abnormal clonal population Uniparental disomy (UPD) (eg, Russell-Silver syndrome, Prader-Willi/Angelman syndrome), short tandem repeat (STR) analysis 81403 Molecular pathology procedure, Level 4 (eg, analysis of single exon by DNA 3 sequence analysis, analysis of >10 amplicons using multiplex PCR in 2 or more independent reactions, mutation scanning or duplication/deletion variants of 2-5 exons) ANG (angiogenin, ribonuclease, RNase A family, 5) (eg, amyotrophic lateral sclerosis), full gene sequence ARX (aristaless-related homeobox) (eg, X-linked lissencephaly with ambiguous genitalia, X-linked mental retardation), duplication/deletion analysis CEL (carboxyl ester lipase [bile salt-stimulated lipase]) (eg, maturity-onset diabetes of the young [MODY]), targeted sequence analysis of exon 11 (eg, c.1785delC, c.1686delT) CTNNB1 (catenin [cadherin-associated protein], beta 1, 88kDa) (eg, desmoid tumors), targeted sequence analysis (eg, exon 3) DAZ/SRY (deleted in azoospermia and sex determining region Y) (eg, male infertility), common deletions (eg, AZFa, AZFb, AZFc, AZFd) DNMT3A (DNA [cytosine-5-]-methyltransferase 3 alpha) (eg, acute myeloid leukemia), targeted sequence analysis (eg, exon 23) EPCAM (epithelial cell adhesion molecule) (eg, Lynch syndrome), duplication/deletion analysis F8 (coagulation factor VIII) (eg, hemophilia A), inversion analysis, intron 1 and intron 22A F12 (coagulation factor XII [Hageman factor]) (eg. angioedema, hereditary, type III; factor XII deficiency), targeted sequence analysis of exon 9 FGFR3 (fibroblast growth factor receptor 3) (eg, isolated craniosynostosis), targeted sequence analysis (eg, exon 7) (For targeted sequence analysis of multiple FGFR3 exons, use 81404) GJB1 (gap junction protein, beta 1) (eg, Charcot-Marie-Tooth X-linked), full gene sequence GNAQ (guanine nucleotide-binding protein G[q] subunit alpha) (eg, uveal melanoma), common variants (eg, R183, Q209) Human erythrocyte antigen gene analyses (eg, SLC14A1 [Kidd blood group], BCAM [Lutheran blood group], ICAM4 [Landsteiner-Wiener blood group], SLC4A1 [Diego blood group], AQP1 [Colton blood group], ERMAP [Scianna blood group]02n) (eg, hemolytic disease of the fetus and newborn, Rh maternal/fetal compatibility), deletion analysis (eg, exons 4, 5, and 7, pseudogene) RHD (Rh blood group, D antigen) (eg, hemolytic disease of the fetus and newborn, Rh maternal/fetal compatibility), deletion analysis (eg, exons 4, 5, and 7, pseudogene), performed on cell-free fetal DNA in maternal blood (For human erythrocyte gene analysis of RHD, use a separate unit of 81403) SH2D1A (SH2 domain containing 1A) (eg, X-linked lymphoproliferative syndrome),

duplication/deletion analysis TWIST1 (twist homolog 1 [Drosophila]) (eg, Saethre-Chotzen syndrome), duplication/deletion analysis UBA1 (ubiquitin-like modifier activating enzyme 1) (eg, spinal muscular atrophy, X-linked), targeted sequence analysis (eg, exon 15) VHL (von Hippel-Lindau tumor suppressor) (eg, von Hippel-Lindau familial cancer syndrome), deletion/duplication analysis VWF (von Willebrand factor) (eg, von Willebrand disease types 2A, 2B, 2M), targeted sequence analysis (eg, exon 28)

81404

Molecular pathology procedure, Level 5 (eg, analysis of 2-5 exons by DNA sequence analysis, mutation scanning or duplication/deletion variants of 6-10 exons, or characterization of a dynamic mutation disorder/triplet repeat by Southern blot analysis) ACADS (acyl-CoA dehydrogenase, C-2 to C-3 short chain) (eg, short chain acyl-CoA dehydrogenase deficiency), targeted sequence analysis (eg, exons 5 and 6) AQP2 (aquaporin 2 [collecting duct]) (eg, nephrogenic diabetes insipidus), full gene sequence ARX (aristaless related homeobox) (eg, X-linked lissencephaly with ambiguous genitalia, X-linked mental retardation), full gene sequence AVPR2 (arginine vasopressin receptor 2) (eg, nephrogenic diabetes insipidus), full gene sequence BBS10 (Bardet-Biedl syndrome 10) (eg, Bardet-Biedl syndrome), full gene sequence BTD (biotinidase) (eg, biotinidase deficiency), full gene sequence C10orf2 (chromosome 10 open reading frame 2) (eg, mitochondrial DNA depletion syndrome), full gene sequence CAV3 (caveolin 3) (eg, CAV3-related distal myopathy, limb-girdle muscular dystrophy type 1C), full gene sequence CD40LG (CD40 ligand) (eg, X-linked hyper IgM syndrome), full gene sequence CDKN2A (cyclin-dependent kinase inhibitor 2A) (eg, CDKN2A-related cutaneous malignant melanoma, familial atypical mole-malignant melanoma syndrome), full gene sequence CLRN1 (clarin 1) (eg, Usher syndrome, type 3), full gene sequence COX6B1 (cytochrome c oxidase subunit VIb polypeptide 1) (eg, mitochondrial respiratory chain complex IV deficiency), full gene sequence CPT2 (carnitine palmitoyltransferase 2) (eg, carnitine palmitoyltransferase II deficiency), full gene sequence CRX (cone-rod homeobox) (eg, cone-rod dystrophy 2, Leber congenital amaurosis), full gene sequence CYP1B1

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(cytochrome P450, family 1, subfamily B, polypeptide 1) (eg, primary congenital glaucoma), full gene sequence EGR2 (early growth response 2) (eg, Charcot-Marie-Tooth), full gene sequence EMD (emerin) (eg, Emery-Dreifuss muscular dystro051 (zinc finger protein 41) (eg, X-linked mental retardation 89), full gene sequence

81405

Molecular pathology procedure, Level 6 (eg, analysis of 6-10 exons by DNA sequence analysis, mutation scanning or duplication/deletion variants of 11-25 exons, regionally targeted cytogenomic array analysis) ABCD1 (ATP-binding cassette, sub-family D [ALD], member 1) (eg, adrenoleukodystrophy), full gene sequence ACADS (acyl-CoA dehydrogenase, C-2 to C-3 short chain) (eg, short chain acyl-CoA dehydrogenase deficiency), full gene sequence ACTA2 (actin, alpha 2, smooth muscle, aorta) (eg, thoracic aortic aneurysms and aortic dissections), full gene sequence ACTC1 (actin, alpha, cardiac muscle 1) (eg, familial hypertrophic cardiomyopathy), full gene sequence ANKRD1 (ankyrin repeat domain 1) (eg, dilated cardiomyopathy), full gene sequence APTX (aprataxin) (eg, ataxia with oculomotor apraxia 1), full gene sequence ARSA (arylsulfatase A) (eg, arylsulfatase A deficiency), full gene sequence BCKDHA (branched chain keto acid dehydrogenase E1, alpha polypeptide) (eg, maple syrup urine disease, type 1A), full gene sequence BCS1L (BCS1-like [S. cerevisiae]) (eg, Leigh syndrome, mitochondrial complex III deficiency, GRACILE syndrome), full gene sequence BMPR2 (bone morphogenetic protein receptor, type II [serine/threonine kinase]) (eg, heritable pulmonary arterial hypertension), duplication/deletion analysis CASQ2 (calsequestrin 2 [cardiac muscle]) (eg, catecholaminergic polymorphic ventricular tachycardia), full gene sequence CASR (calcium-sensing receptor) (eg, hypocalcemia), full gene sequence CDKL5 (cyclin-dependent kinase-like 5) (eg, early infantile epileptic encephalopathy), duplication/deletion analysis CHRNA4 (cholinergic receptor, nicotinic, alpha 4) (eg, nocturnal frontal lobe epilepsy), full gene sequence CHRNB2 (cholinergic receptor, nicotinic, beta 2 [neuronal]) (eg, nocturnal frontal lobe epilepsy), full gene sequence COX10 (COX10 homolog, cytochrome c oxidase assembly protein) (eg, mitochondrial respiratory chain complex IV deficiency), full gene sequence COX15 (07NNI3 (troponin I, type 3 [cardiac]) (eg, familial hypertrophic cardiomyopathy), full gene sequence TPM1 (tropomyosin 1 [alpha]) (eg, familial hypertrophic cardiomyopathy), full gene sequence TSC1 (tuberous sclerosis 1) (eg, tuberous sclerosis), duplication/deletion analysis TYMP (thymidine phosphorylase) (eg, mitochondrial DNA depletion syndrome), full gene sequence VWF (von Willebrand factor) (eg, von Willebrand disease type 2N), targeted

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sequence analysis (eg, exons 18-20, 23-25) WT1 (Wilms tumor 1) (eg, Denys-Drash syndrome, familial Wilms tumor), full gene sequence ZEB2 (zinc finger E-box binding homeobox 2) (eg, Mowat-Wilson syndrome), full gene sequence 3 81406 Molecular pathology procedure, Level 7 (eg, analysis of 11-25 exons by DNA sequence analysis, mutation scanning or duplication/deletion variants of 26-50 exons) ACADVL (acyl-CoA dehydrogenase, very long chain) (eg, very long chain acylcoenzyme A dehydrogenase deficiency), full gene sequence ACTN4 (actinin, alpha 4) (eg, focal segmental glomerulosclerosis), full gene sequence AFG3L2 (AFG3 ATPase family gene 3-like 2 [S. cerevisiae]) (eg, spinocerebellar ataxia), full gene sequence AIRE (autoimmune regulator) (eg, autoimmune polyendocrinopathy syndrome type 1), full gene sequence ALDH7A1 (aldehyde dehydrogenase 7 family, member A1) (eg, pyridoxine-dependent epilepsy), full gene sequence ANO5 (anoctamin 5) (eg, limb-girdle muscular dystrophy), full gene sequence ANOS1 (anosmin-1) (eg, Kallmann syndrome 1), full gene sequence APP (amyloid beta [A4] precursor protein) (eg, Alzheimer disease), full gene sequence ASS1 (argininosuccinate synthase 1) (eg, citrullinemia type I), full gene sequence ATL1 (atlastin GTPase 1) (eg, spastic paraplegia), full gene sequence ATP1A2 (ATPase, Na+/K+ transporting, alpha 2 polypeptide) (eg, familial hemiplegic migraine), full gene sequence ATP7B (ATPase, Cu++ transporting, beta polypeptide) (eg, Wilson disease), full gene sequence BBS1 (Bardet-Biedl syndrome 1) (eg, Bardet-Biedl syndrome), full gene sequence BBS2 (Bardet-Biedl syndrome 2) (eg, Bardet-Biedl syndrome), full gene

sequence BCKDHB (branched-chain keto acid dehydrogenase E1, beta polypeptide) (eg, maple syrup urine disease, type 1B), full gene sequence BEST1 (bestrophin 1)

morphogenetic protein receptor, type II [serine/threonine kinase]) (eg, heritable pulmonary arterial hypertension), full gene sequence BRAF (B-Raf proto-oncogene,

serine/threonine kinase) (eg, Noonan syndrome), full gene sequence BSCL2 (Berardinelli-Seip congenital lipodystrophy 2 [seipin]) (eg, Berardinelli-Seip

(eg, vitelliform macular dystrophy), full gene sequence BMPR2 (bone

congenital lipodystrophy), f08ase with hyperuricemia and isosthenuria), full gene sequence VWF (von Willebrand factor) (von Willebrand disease type 2A), extended targeted sequence analysis (eg, exons 11-16, 24-26, 51, 52) WAS (Wiskott-Aldrich syndrome [eczema-thrombocytopenia]) (eg, Wiskott-Aldrich syndrome), full gene sequence	

1

Molecular pathology procedure, Level 8 (eg, analysis of 26-50 exons by DNA sequence analysis, mutation scanning or duplication/deletion variants of >50 exons, sequence analysis of multiple genes on one platform) ABCC8 (ATP-binding cassette, sub-family C [CFTR/MRP], member 8) (eg, familial hyperinsulinism), full gene sequence AGL (amylo-alpha-1, 6-glucosidase, 4-alpha-glucanotransferase) (eg, glycogen storage disease type III), full gene sequence AHI1 (Abelson helper integration site 1) (eg, Joubert syndrome), full gene sequence APOB (apolipoprotein B) (eg, familial hypercholesterolemia type B) full gene sequence ASPM (asp [abnormal spindle] homolog, microcephaly associated [Drosophila]) (eg, primary microcephaly), full gene sequence CHD7 (chromodomain helicase DNA binding protein 7) (eg, CHARGE syndrome), full gene sequence COL4A4 (collagen, type IV, alpha 4) (eg, Alport syndrome), full gene sequence COL4A5 (collagen, type IV, alpha 5) (eg, Alport syndrome), duplication/deletion analysis COL6A1 (collagen, type VI, alpha 1) (eg, collagen type VI-related disorders), full gene sequence COL6A2 (collagen, type VI, alpha 2) (eg, collagen type VI-related disorders), full gene sequence COL6A3 (collagen, type VI, alpha 3) (eg, collagen type VI-related disorders), full gene sequence CREBBP (CREB binding protein) (eg, Rubinstein-Taybi syndrome), full gene sequence F8 (coagulation factor VIII) (eg, hemophilia A), full gene sequence JAG1 (jagged 1) (eg, Alagille syndrome), full gene sequence KDM5C (lysine [K]-specific demethylase 5C) (eg, X-linked mental retardation), full gene sequence KIAA0196 (KIAA0196) (eg, spastic paraplegia), full gene sequence L1CAM (L1 cell adhesion molecule) (eg, MASA syndrome, X-linked hydrocephaly), full gene sequence LAMB2 (laminin, beta 2 [laminin S]) (eg, Pierson syndrome), full gene sequence MYBPC3 (myosin binding protein C, cardiac) (eg, familial hypertrophic cardiomyopathy), full gene sequence MYH6 (myosin, heavy chain 6, cardiac muscle, alpha)01(eg, familial dilated cardiomyopathy), full gene sequence MYH7 (myosin, heavy chain 7, cardiac muscle, beta) (eg, familial hypertrophic cardiomyopathy, Liang distal myopathy), full gene sequence MYO7A (myosin VIIA) (eg, Usher syndrome, type 1), full gene sequence NOTCH1 (notch 1) (eg, aortic valve disease), full gene sequence NPHS1 (nephrosis 1, congenital, Finnish type [nephrin]) (eg, congenital Finnish nephrosis), full gene sequence OPA1 (optic atrophy 1) (eg, optic atrophy), full gene sequence PCDH15 (protocadherin-related 15) (eg, Usher syndrome, type 1), full gene sequence PKD1 (polycystic kidney disease 1 [autosomal dominant]) (eg, polycystic kidney disease), full gene sequence PLCE1 (phospholipase C, epsilon 1) (eg, nephrotic syndrome type 3), full gene sequence SCN1A (sodium channel, voltage-gated, type 1, alpha subunit) (eg, generalized epilepsy with febrile seizures), full gene sequence SCN5A (sodium channel, voltage-gated, type V, alpha subunit) (eg, familial dilated cardiomyopathy), full gene sequence SLC12A1 (solute carrier family 12 [sodium/potassium/chloride transporters], member 1) (eg, Bartter syndrome), full gene sequence SLC12A3 (solute carrier family 12 [sodium/chloride transporters], member 3) (eg, Gitelman syndrome), full gene sequence SPG11 (spastic paraplegia 11 [autosomal recessive]) (eg, spastic paraplegia), full gene sequence SPTBN2 (spectrin, beta, non-erythrocytic 2) (eg, spinocerebellar ataxia), full gene sequence TMEM67 (transmembrane protein 67) (eg, Joubert syndrome), full gene sequence TSC2 (tuberous sclerosis 2) (eg, tuberous sclerosis), full gene sequence USH1C (Usher syndrome 1C [autosomal recessive, severe]) (eg, Usher syndrome, type 1), full gene sequence VPS13B (vacuolar protein sorting 13 homolog B [yeast]) (eg, Cohen syndrome), duplication/deletion analysis WDR62 (WD repeat domain 62) (eg, primary autosomal recessive microcephaly), full gene sequence

81408	Molecular pathology procedure, Level 9 (eg, analysis of >50 exons in a single gene by DNA sequence analysis) ABCA4 (ATP-binding cassette, sub-family A [ABC1], member 4) (eg, Stargardt disease, age-related macular degeneration), full gene sequence ATM (ataxia telangiectasia mutated) (eg, ataxia telangiectasia), full gene sequence CDH23 (cadherin-related 23) (eg, Usher syndrome, type 1), full gene sequence CEP290 (centrosomal protein 290kDa) (eg, Joubert syndrome), full gene sequence COL1A1 (collagen, type I, alpha 1) (eg, osteogenesis imperfecta, type I), full gene sequence COL1A2 (collagen, type I, alpha 2) (eg, osteogenesis imperfecta, type I), full gene sequence COL4A1 (collagen, type IV, alpha 1) (eg, brain small-vessel disease with hemorrhage), full gene sequence COL4A3 (collagen, type IV, alpha 3 [Goodpasture antigen]) (eg, Alport syndrome), full gene sequence COL4A5 (collagen, type IV, alpha 5) (eg, Alport syndrome), full gene sequence DMD (dystrophin) (eg, Duchenne/Becker muscular dystrophy), full gene sequence DYSF (dysferlin, limb girdle muscular dystrophy 2B [autosomal recessive]) (eg, limb-girdle muscular dystrophy), full gene sequence FBN1 (fibrillin 1) (eg, Marfan syndrome), full gene sequence ITPR1 (inositol 1,4,5-trisphosphate receptor, type 1) (eg, spinocerebellar ataxia), full gene sequence LRRK2 (leucine-rich repeat kinase 2) (eg, Parkinson disease), full gene sequence MYH11 (myosin, heavy chain 11, smooth muscle) (eg, thoracic aortic aneurysms and aortic dissections), full gene sequence NEB (nebulin) (eg, nemaline myopathy 2), full gene sequence PKHD1 (polycystic kidney and hepatic disease 1) (eg, autosomal recessive polycystic kidney disease), full gene sequence RYR1 (ryanodine receptor 1, skeletal) (eg, malignant hyperthermia), full gene sequence RYR1 (ryanodine receptor 2 [cardiac]) (eg, cate01cholaminergic	1
81410	polymorphic ventricular tachycardia, arrhythmogenic right ventricular dysplasia), full gene sequence or targeted sequence analysis of > 50 exons USH2A (Usher syndrome 2A [autosomal recessive, mild]) (eg, Usher syndrome, type 2), full gene sequence VPS13B (vacuolar protein sorting 13 homolog B [yeast]) (eg, Cohen syndrome), full gene sequence VWF (von Willebrand factor) (eg, von Willebrand disease types 1 and 3), full gene sequence Aortic dysfunction or dilation (eg, Marfan syndrome, Loeys Dietz syndrome, Ehler	1
	Danlos syndrome type IV, arterial tortuosity syndrome); genomic sequence analysis panel, must include sequencing of at least 9 genes, including FBN1, TGFBR1, TGFBR2, COL3A1, MYH11, ACTA2, SLC2A10, SMAD3, and MYLK	
81411	Aortic dysfunction or dilation (eg, Marfan syndrome, Loeys Dietz syndrome, Ehler Danlos syndrome type IV, arterial tortuosity syndrome); duplication/deletion analysis panel, must include analyses for TGFBR1, TGFBR2, MYH11, and COL3A1	1
81412	Ashkenazi Jewish associated disorders (eg, Bloom syndrome, Canavan disease, cystic fibrosis, familial dysautonomia, Fanconi anemia group C, Gaucher disease, Tay-Sachs disease), genomic sequence analysis panel, must include sequencing of at least 9 genes, including ASPA, BLM, CFTR, FANCC, GBA, HEXA, IKBKAP, MCOLN1, and SMPD1	1
81413	Cardiac ion channelopathies (eg, Brugada syndrome, long QT syndrome, short QT syndrome, catecholaminergic polymorphic ventricular tachycardia); genomic sequence analysis panel, must include sequencing of at least 10 genes, including ANK2, CASQ2, CAV3, KCNE1, KCNE2, KCNH2, KCNJ2, KCNQ1, RYR2, and SCN5A	1
81414	Cardiac ion channelopathies (eg, Brugada syndrome, long QT syndrome, short QT syndrome, catecholaminergic polymorphic ventricular tachycardia);	1

	duplication/deletion gene analysis panel, must include analysis of at least 2 genes, including KCNH2 and KCNQ1	
81415	Exome (eg, unexplained constitutional or heritable disorder or syndrome); sequence analysis	1
81416	Exome (eg, unexplained constitutional or heritable disorder or syndrome); sequence analysis, each comparator exome (eg, parents, siblings) (List separately in addition to code for primary procedure)	2
81417	Exome (eg, unexplained constitutional or heritable disorder or syndrome); re- evaluation of previously obtained exome sequence (eg, updated knowledge or unrelated condition/syndrome)	1
81419	Epilepsy genomic sequence analysis panel, must include analyses for ALDH7A1, CACNA1A, CDKL5, CHD2, GABRG2, GRIN2A, KCNQ2, MECP2, PCDH19, POLG, PRRT2, SCN1A, SCN1B, SCN2A, SCN8A, SLC2A1, SLC9A6, STXBP1, SYNGAP1, TCF4, TPP1, TSC1, TSC2, and ZEB2	1
81420	Fetal chromosomal aneuploidy (eg, trisomy 21, monosomy X) genomic sequence analysis panel, circulating cell-free fetal DNA in maternal blood, must include analysis of chromosomes 13, 18, and 21	1
81422	Fetal chromosomal microdeletion(s) genomic sequence analysis (eg, DiGeorge syndrome, Cri-du-chat syndrome), circulating cell-free fetal DNA in maternal blood	1
81425	Genome (eg, unexplained constitutional or heritable disorder or syndrome); sequence analysis	1
81426	Genome (eg, unexplained constitutional or heritable disorder or syndrome); sequence analysis, each comparator genome (eg, parents, siblings) (List separately in addition to code for primary procedure)	2
81427	Genome (eg, unexplained constitutional or heritable disorder or syndrome); re- evaluation of previously obtained genome sequence (eg, updated knowledge or unrelated condition/syndrome)	1
81430	Hearing loss (eg, nonsyndromic hearing loss, Usher syndrome, Pendred syndrome); genomic sequence analysis panel, must include sequencing of at least 60 genes, including CDH23, CLRN1, GJB2, GPR98, MTRNR1, MYO7A, MYO15A, PCDH15, OTOF, SLC26A4, TMC1, TMPRSS3, USH1C, USH1G, USH2A, and WFS1	1
81431	Hearing loss (eg, nonsyndromic hearing loss, Usher syndrome, Pendred syndrome); duplication/deletion analysis panel, must include copy number analyses for STRC and DFNB1 deletions in GJB2 and GJB6 genes	1
81432	Hereditary breast cancer-related disorders (eg, hereditary breast cancer, hereditary ovarian cancer, hereditary endometrial cancer); genomic sequence analysis panel, must include sequencing of at least 10 genes, always including BRCA1, BRCA2, CDH1, MLH1, MSH2, MSH6, PALB2, PTEN, STK11, and TP53	1
81433	Hereditary breast cancer-related disorders (eg, hereditary breast cancer, hereditary ovarian cancer, hereditary endometrial cancer); duplication/deletion analysis panel, must include analyses for BRCA1, BRCA2, MLH1, MSH2, and STK11	1
81434	Hereditary retinal disorders (eg, retinitis pigmentosa, Leber congenital amaurosis, cone-rod dystrophy), genomic sequence analysis panel, must include sequencing of	1

	at least 15 genes, including ABCA4, CNGA1, CRB1, EYS, PDE6A, PDE6B, PRPF31, PRPH2, RDH12, RHO, RP1, RP2, RPE65, RPGR, and USH2A	
81435	Hereditary colon cancer disorders (eg, Lynch syndrome, PTEN hamartoma syndrome, Cowden syndrome, familial adenomatosis polyposis); genomic sequence analysis panel, must include sequencing of at least 10 genes, including APC, BMPR1A, CDH1, MLH1, MSH2, MSH6, MUTYH, PTEN, SMAD4, and STK11	1
81436	Hereditary colon cancer disorders (eg, Lynch syndrome, PTEN hamartoma syndrome, Cowden syndrome, familial adenomatosis polyposis); duplication/deletion analysis panel, must include analysis of at least 5 genes, including MLH1, MSH2, EPCAM, SMAD4, and STK11	1
81437	Hereditary neuroendocrine tumor disorders (eg, medullary thyroid carcinoma, parathyroid carcinoma, malignant pheochromocytoma or paraganglioma); genomic sequence analysis panel, must include sequencing of at least 6 genes, including MAX, SDHB, SDHC, SDHD, TMEM127, and VHL	1
81438	Hereditary neuroendocrine tumor disorders (eg, medullary thyroid carcinoma, parathyroid carcinoma, malignant pheochromocytoma or paraganglioma); duplication/deletion analysis panel, must include analyses for SDHB, SDHC, SDHD, and VHL	1
81439	Hereditary cardiomyopathy (eg, hypertrophic cardiomyopathy, dilated cardiomyopathy, arrhythmogenic right ventricular cardiomyopathy), genomic sequence analysis panel, must include sequencing of at least 5 cardiomyopathy-related genes (eg, DSG2, MYBPC3, MYH7, PKP2, TTN)	1
81440	Nuclear encoded mitochondrial genes (eg, neurologic or myopathic phenotypes), genomic sequence panel, must include analysis of at least 100 genes, including BCS1L, C10orf2, COQ2, COX10, DGUOK, MPV17, OPA1, PDSS2, POLG, POLG2, RRM2B, SCO1, SCO2, SLC25A4, SUCLA2, SUCLG1, TAZ, TK2, and TYMP	1
81442	Noonan spectrum disorders (eg, Noonan syndrome, cardio-facio-cutaneous syndrome, Costello syndrome, LEOPARD syndrome, Noonan-like syndrome), genomic sequence analysis panel, must include sequencing of at least 12 genes, including BRAF, CBL, HRAS, KRAS, MAP2K1, MAP2K2, NRAS, PTPN11, RAF1, RIT1, SHOC2, and SOS1	1
81443	Genetic testing for severe inherited conditions (eg, cystic fibrosis, Ashkenazi Jewish-associated disorders [eg, Bloom syndrome, Canavan disease, Fanconi anemia type C, mucolipidosis type VI, Gaucher disease, Tay-Sachs disease], beta hemoglobinopathies, phenylketonuria, galactosemia), genomic sequence analysis panel, must include sequencing of at least 15 genes (eg, ACADM, ARSA, ASPA, ATP7B, BCKDHA, BCKDHB, BLM, CFTR, DHCR7, FANCC, G6PC, GAA, GALT, GBA, GBE1, HBB, HEXA, IKBKAP, MCOLN1, PAH)	1
81445	Targeted genomic sequence analysis panel, solid organ neoplasm, DNA analysis, and RNA analysis when performed, 5-50 genes (eg, ALK, BRAF, CDKN2A, EGFR, ERBB2, KIT, KRAS, NRAS, MET, PDGFRA, PDGFRB, PGR, PIK3CA, PTEN, RET), interrogation for sequence variants and copy number variants or rearrangements, if performed	1
81448	Hereditary peripheral neuropathies (eg, Charcot-Marie-Tooth, spastic paraplegia), genomic sequence analysis panel, must include sequencing of at least 5 peripheral	1

	neuropathy-related genes (eg, BSCL2, GJB1, MFN2, MPZ, REEP1, SPAST, SPG11, SPTLC1)	
81450	Targeted genomic sequence analysis panel, hematolymphoid neoplasm or disorder, DNA analysis, and RNA analysis when performed, 5-50 genes (eg, BRAF, CEBPA, DNMT3A, EZH2, FLT3, IDH1, IDH2, JAK2, KRAS, KIT, MLL, NRAS, NPM1, NOTCH1), interrogation for sequence variants, and copy number variants or rearrangements, or isoform expression or mRNA expression levels, if performed	1
81455	Targeted genomic sequence analysis panel, solid organ or hematolymphoid neoplasm, DNA analysis, and RNA analysis when performed, 51 or greater genes (eg, ALK, BRAF, CDKN2A, CEBPA, DNMT3A, EGFR, ERBB2, EZH2, FLT3, IDH1, IDH2, JAK2, KIT, KRAS, MLL, NPM1, NRAS, MET, NOTCH1, PDGFRA, PDGFRB, PGR, PIK3CA, PTEN, RET), interrogation for sequence variants and copy number variants or rearrangements, if performed	1
81460	Whole mitochondrial genome (eg, Leigh syndrome, mitochondrial encephalomyopathy, lactic acidosis, and stroke-like episodes [MELAS], myoclonic epilepsy with ragged-red fibers [MERFF], neuropathy, ataxia, and retinitis pigmentosa [NARP], Leber hereditary optic neuropathy [LHON]), genomic sequence, must include sequence analysis of entire mitochondrial genome with heteroplasmy detection	1
81465	Whole mitochondrial genome large deletion analysis panel (eg, Kearns-Sayre syndrome, chronic progressive external ophthalmoplegia), including heteroplasmy detection, if performed	1
81470	X-linked intellectual disability (XLID) (eg, syndromic and non-syndromic XLID); genomic sequence analysis panel, must include sequencing of at least 60 genes, including ARX, ATRX, CDKL5, FGD1, FMR1, HUWE1, IL1RAPL, KDM5C, L1CAM, MECP2, MED12, MID1, OCRL, RPS6KA3, and SLC16A2	1
81471	X-linked intellectual disability (XLID) (eg, syndromic and non-syndromic XLID); duplication/deletion gene analysis, must include analysis of at least 60 genes, including ARX, ATRX, CDKL5, FGD1, FMR1, HUWE1, IL1RAPL, KDM5C, L1CAM, MECP2, MED12, MID1, OCRL, RPS6KA3, and SLC16A2	1
81479	Unlisted molecular pathology procedure	3
81490	Autoimmune (rheumatoid arthritis), analysis of 12 biomarkers using immunoassays, utilizing serum, prognostic algorithm reported as a disease activity score	1
81493	Coronary artery disease, mRNA, gene expression profiling by real-time RT-PCR of 23 genes, utilizing whole peripheral blood, algorithm reported as a risk score	1
81500	Oncology (ovarian), biochemical assays of two proteins (CA-125 and HE4), utilizing serum, with menopausal status, algorithm reported as a risk score	1
81503	Oncology (ovarian), biochemical assays of five proteins (CA-125, apolipoprotein A1, beta-2 microglobulin, transferrin, and pre-albumin), utilizing serum, algorithm reported as a risk score	1
81504	Oncology (tissue of origin), microarray gene expression profiling of > 2000 genes, utilizing formalin-fixed paraffin-embedded tissue, algorithm reported as tissue similarity scores	1

81506	Endocrinology (type 2 diabetes), biochemical assays of seven analytes (glucose, HbA1c, insulin, hs-CRP, adiponectin, ferritin, interleukin 2-receptor alpha), utilizing serum or plasma, algorithm reporting a risk score	1
81507	Fetal aneuploidy (trisomy 21, 18, and 13) DNA sequence analysis of selected regions using maternal plasma, algorithm reported as a risk score for each trisomy	1
81508	Fetal congenital abnormalities, biochemical assays of two proteins (PAPP-A, hCG [any form]), utilizing maternal serum, algorithm reported as a risk score	1
81509	Fetal congenital abnormalities, biochemical assays of three proteins (PAPP-A, hCG [any form], DIA), utilizing maternal serum, algorithm reported as a risk score	1
81510	Fetal congenital abnormalities, biochemical assays of three analytes (AFP, uE3, hCG [any form]), utilizing maternal serum, algorithm reported as a risk score	1
81511	Fetal congenital abnormalities, biochemical assays of four analytes (AFP, uE3, hCG [any form], DIA) utilizing maternal serum, algorithm reported as a risk score (may include additional results from previous biochemical testing)	1
81512	Fetal congenital abnormalities, biochemical assays of five analytes (AFP, uE3, total hCG, hyperglycosylated hCG, DIA) utilizing maternal serum, algorithm reported as a risk score	1
81513	Infectious disease, bacterial vaginosis, quantitative real-time amplification of RNA markers for Atopobium vaginae, Gardnerella vaginalis, and Lactobacillus species, utilizing vaginal-fluid specimens, algorithm reported as a positive or negative result for bacterial vaginosis	1
81514	Infectious disease, bacterial vaginosis and vaginitis, quantitative real-time amplification of DNA markers for Gardnerella vaginalis, Atopobium vaginae, Megasphaera type 1, Bacterial Vaginosis Associated Bacteria-2 (BVAB-2), and Lactobacillus species (L. crispatus and L. jensenii), utilizing vaginal-fluid specimens, algorithm reported as a positive or negative for high likelihood of bacterial vaginosis, includes separate detection of Trichomonas vaginalis and/or Candida species (C. albicans, C. tropicalis, C. parapsilosis, C. dubliniensis), Candida glabrata, Candida krusei, when reported	1
81518	Oncology (breast), mRNA, gene expression profiling by real-time RT-PCR of 11 genes (7 content and 4 housekeeping), utilizing formalin-fixed paraffin-embedded tissue, algorithms reported as percentage risk for metastatic recurrence and likelihood of benefit from extended endocrine therapy	1
81519	Oncology (breast), mRNA, gene expression profiling by real-time RT-PCR of 21 genes, utilizing formalin-fixed paraffin-embedded tissue, algorithm reported as recurrence score	1
81520	Oncology (breast), mRNA gene expression profiling by hybrid capture of 58 genes (50 content and 8 housekeeping), utilizing formalin-fixed paraffin-embedded tissue, algorithm reported as a recurrence risk score	1
81521	Oncology (breast), mRNA, microarray gene expression profiling of 70 content genes and 465 housekeeping genes, utilizing fresh frozen or formalin-fixed paraffinembedded tissue, algorithm reported as index related to risk of distant metastasis	1
81522	Oncology (breast), mRNA, gene expression profiling by RT-PCR of 12 genes (8 content and 4 housekeeping), utilizing formalin-fixed paraffin-embedded tissue, algorithm reported as recurrence risk score	1

81523	Oncology (breast), mRNA, next-generation sequencing gene expression profiling of 70 content genes and 31 housekeeping genes, utilizing formalin-fixed paraffinembedded tissue, algorithm reported as index related to risk to distant metastasis	1
81525	Oncology (colon), mRNA, gene expression profiling by real-time RT-PCR of 12 genes (7 content and 5 housekeeping), utilizing formalin-fixed paraffin-embedded tissue, algorithm reported as a recurrence score	1
81528	Oncology (colorectal) screening, quantitative real-time target and signal amplification of 10 DNA markers (KRAS mutations, promoter methylation of NDRG4 and BMP3) and fecal hemoglobin, utilizing stool, algorithm reported as a positive or negative result	1
81529	Oncology (cutaneous melanoma), mRNA, gene expression profiling by real-time RT-PCR of 31 genes (28 content and 3 housekeeping), utilizing formalin-fixed paraffinembedded tissue, algorithm reported as recurrence risk, including likelihood of sentinel lymph node metastasis	1
81535	Oncology (gynecologic), live tumor cell culture and chemotherapeutic response by DAPI stain and morphology, predictive algorithm reported as a drug response score; first single drug or drug combination	1
81536	Oncology (gynecologic), live tumor cell culture and chemotherapeutic response by DAPI stain and morphology, predictive algorithm reported as a drug response score; each additional single drug or drug combination (List separately in addition to code for primary procedure)	11
81538	Oncology (lung), mass spectrometric 8-protein signature, including amyloid A, utilizing serum, prognostic and predictive algorithm reported as good versus poor overall survival	1
81539	Oncology (high-grade prostate cancer), biochemical assay of four proteins (Total PSA, Free PSA, Intact PSA, and human kallikrein-2 [hK2]), utilizing plasma or serum, prognostic algorithm reported as a probability score	1
81540	Oncology (tumor of unknown origin), mRNA, gene expression profiling by real-time RT-PCR of 92 genes (87 content and 5 housekeeping) to classify tumor into main cancer type and subtype, utilizing formalin-fixed paraffin-embedded tissue, algorithm reported as a probability of a predicted main cancer type and subtype	1
81541	Oncology (prostate), mRNA gene expression profiling by real-time RT-PCR of 46 genes (31 content and 15 housekeeping), utilizing formalin-fixed paraffin-embedded tissue, algorithm reported as a disease-specific mortality risk score	1
81542	Oncology (prostate), mRNA, microarray gene expression profiling of 22 content genes, utilizing formalin-fixed paraffin-embedded tissue, algorithm reported as metastasis risk score	1
81546	Oncology (thyroid), mRNA, gene expression analysis of 10,196 genes, utilizing fine needle aspirate, algorithm reported as a categorical result (eg, benign or suspicious)	2
81551	Oncology (prostate), promoter methylation profiling by real-time PCR of 3 genes (GSTP1, APC, RASSF1), utilizing formalin-fixed paraffin-embedded tissue, algorithm reported as a likelihood of prostate cancer detection on repeat biopsy	1
81552	Oncology (uveal melanoma), mRNA, gene expression profiling by real-time RT-PCR of 15 genes (12 content and 3 housekeeping), utilizing fine needle aspirate or formalin-fixed paraffin-embedded tissue, algorithm reported as risk of metastasis	1

81554	Pulmonary disease (idiopathic pulmonary fibrosis [IPF]), mRNA, gene expression analysis of 190 genes, utilizing transbronchial biopsies, diagnostic algorithm reported as categorical result (eg, positive or negative for high probability of usual interstitial pneumonia [UIP])	1
81560	Transplantation medicine (allograft rejection, pediatric liver and small bowel), measurement of donor and third-party-induced CD154+T-cytotoxic memory cells, utilizing whole peripheral blood, algorithm reported as a rejection risk score	1
81595	Cardiology (heart transplant), mRNA, gene expression profiling by real-time quantitative PCR of 20 genes (11 content and 9 housekeeping), utilizing subfraction of peripheral blood, algorithm reported as a rejection risk score	1
81596	Infectious disease, chronic hepatitis C virus (HCV) infection, six biochemical assays (ALT, A2-macroglobulin, apolipoprotein A-1, total bilirubin, GGT, and haptoglobin) utilizing serum, prognostic algorithm reported as scores for fibrosis and necroinflammatory activity in liver	1
81599	Unlisted multianalyte assay with algorithmic analysis	1
82009	Ketone body(s) (eg, acetone, acetoacetic acid, beta-hydroxybutyrate); qualitative	1
82010	Ketone body(s) (eg, acetone, acetoacetic acid, beta-hydroxybutyrate); quantitative	1
82013	Acetylcholinesterase	1
82016	Acylcarnitines; qualitative, each specimen	1
82017	Acylcarnitines; quantitative, each specimen	1
82024	Adrenocorticotropic hormone (ACTH)	1
82030	Adenosine, 5-monophosphate, cyclic (cyclic AMP)	1
82040	Albumin; serum, plasma or whole blood	1
82042	Albumin; other source, quantitative, each specimen	2
82043	Albumin; urine (eg, microalbumin), quantitative	1
82044	Albumin; urine (eg, microalbumin), semiquantitative (eg, reagent strip assay)	1
82045	Albumin; ischemia modified	1
82075	Alcohol (ethanol); breath	2
82077	Alcohol (ethanol); any specimen except urine and breath, immunoassay (eg, IA, EIA, ELISA, RIA, EMIT, FPIA) and enzymatic methods (eg, alcohol dehydrogenase)	1
82085	Aldolase	1
82088	Aldosterone	1
82103	Alpha-1-antitrypsin; total	1
82104	Alpha-1-antitrypsin; phenotype	1
82105	Alpha-fetoprotein (AFP); serum	1
82106	Alpha-fetoprotein (AFP); amniotic fluid	1
82108	Aluminum	1
82120	Amines, vaginal fluid, qualitative	1

82127	Amino acids; single, qualitative, each specimen	1
82128	Amino acids; multiple, qualitative, each specimen	1
82131	Amino acids; single, quantitative, each specimen	1
82135	Aminolevulinic acid, delta (ALA)	1
82136	Amino acids, 2 to 5 amino acids, quantitative, each specimen	1
82139	Amino acids, 6 or more amino acids, quantitative, each specimen	1
82140	Ammonia	1
82143	Amniotic fluid scan (spectrophotometric)	1
82150	Amylase	1
82154	Androstanediol glucuronide	1
82157	Androstenedione	1
82160	Androsterone	1
82163	Angiotensin II	1
82164	Angiotensin I - converting enzyme (ACE)	1
82172	Apolipoprotein, each	1
82175	Arsenic	2
82180	Ascorbic acid (Vitamin C), blood	1
82190	Atomic absorption spectroscopy, each analyte	2
82232	Beta-2 microglobulin	1
82239	Bile acids; total	1
82240	Bile acids; cholylglycine	1
82247	Bilirubin; total	1
82248	Bilirubin; direct	1
82252	Bilirubin; feces, qualitative	1
82261	Biotinidase, each specimen	1
82270	Blood, occult, by peroxidase activity (eg, guaiac), qualitative; feces, consecutive collected specimens with single determination, for colorectal neoplasm screening (ie, patient was provided 3 cards or single triple card for consecutive collection)	1
82271	Blood, occult, by peroxidase activity (eg, guaiac), qualitative; other sources	1
82272	Blood, occult, by peroxidase activity (eg, guaiac), qualitative, feces, 1-3 simultaneous determinations, performed for other than colorectal neoplasm screening	1
82274	Blood, occult, by fecal hemoglobin determination by immunoassay, qualitative, feces, 1-3 simultaneous determinations	1
82286	Bradykinin	1
82300	Cadmium	1

02200	When to D. 25 hadrons include for the 12 of 12 of 12	
82306	Vitamin D; 25 hydroxy, includes fraction(s), if performed	1
82308	Calcitonin	1
82310	Calcium; total	1
82330	Calcium; ionized	1
82331	Calcium; after calcium infusion test	1
82340	Calcium; urine quantitative, timed specimen	1
82355	Calculus; qualitative analysis	1
82360	Calculus; quantitative analysis, chemical	1
82365	Calculus; infrared spectroscopy	1
82370	Calculus; X-ray diffraction	1
82373	Carbohydrate deficient transferrin	1
82374	Carbon dioxide (bicarbonate)	1
82375	Carboxyhemoglobin; quantitative	1
82376	Carboxyhemoglobin; qualitative	1
82378	Carcinoembryonic antigen (CEA)	1
82379	Carnitine (total and free), quantitative, each specimen	1
82380	Carotene	1
82382	Catecholamines; total urine	1
82383	Catecholamines; blood	1
82384	Catecholamines; fractionated	1
82387	Cathepsin-D	1
82390	Ceruloplasmin	1
82397	Chemiluminescent assay	4
82415	Chloramphenicol	1
82435	Chloride; blood	1
82436	Chloride; urine	1
82438	Chloride; other source	1
82441	Chlorinated hydrocarbons, screen	1
82465	Cholesterol, serum or whole blood, total	1
82480	Cholinesterase; serum	1
82482	Cholinesterase; RBC	1
82485	Change in B sulfate, quantitative	1
82495	Chromium	1
82507	Citrate	1

82523	Collagen cross links, any method	1
82525	Copper	1
82528	Corticosterone	1
82530	Cortisol; free	1
82533	Cortisol; total	1
82540	Creatine	1
82542	Column chromatography, includes mass spectrometry, if performed (eg, HPLC, LC, LC/MS, LC/MS-MS, GC, GC/MS-MS, GC/MS, HPLC/MS), non-drug analyte(s) not elsewhere specified, qualitative or quantitative, each specimen	1
82550	Creatine kinase (CK), (CPK); total	1
82552	Creatine kinase (CK), (CPK); isoenzymes	1
82553	Creatine kinase (CK), (CPK); MB fraction only	1
82554	Creatine kinase (CK), (CPK); isoforms	2
82565	Creatinine; blood	1
82570	Creatinine; other source	1
82575	Creatinine; clearance	1
82585	Cryofibrinogen	1
82595	Cryoglobulin, qualitative or semi-quantitative (eg, cryocrit)	1
82600	Cyanide	1
82607	Cyanocobalamin (Vitamin B-12)	1
82608	Cyanocobalamin (Vitamin B-12); unsaturated binding capacity	1
82610	Cystatin C	1
82615	Cystine and homocystine, urine, qualitative	1
82626	Dehydroepiandrosterone (DHEA)	1
82627	Dehydroepiandrosterone-sulfate (DHEA-S)	1
82633	Desoxycorticosterone, 11-	1
82634	Deoxycortisol, 11-	1
82638	Dibucaine number	1
82642	Dihydrotestosterone (DHT)	1
82652	Vitamin D; 1, 25 dihydroxy, includes fraction(s), if performed	1
82653	Elastase, pancreatic (EL-1), fecal; quantitative	1
82656	Elastase, pancreatic (EL-1), fecal; qualitative or semi-quantitative	1
82657	Enzyme activity in blood cells, cultured cells, or tissue, not elsewhere specified; nonradioactive substrate, each specimen	2
82658	Enzyme activity in blood cells, cultured cells, or tissue, not elsewhere specified; radioactive substrate, each specimen	2

82664	Electrophoretic technique, not elsewhere specified	2
82668	Erythropoietin	1
82670	Estradiol; total	1
82671		
	Estrogens; fractionated	1
82672	Estrogens; total	1
82677	Estriol	1
82679	Estrone	1
82681	Estradiol; free, direct measurement (eg, equilibrium dialysis)	1
82693	Ethylene glycol	2
82696	Etiocholanolone	1
82705	Fat or lipids, feces; qualitative	1
82710	Fat or lipids, feces; quantitative	1
82715	Fat differential, feces, quantitative	1
82725	Fatty acids, nonesterified	1
82726	Very long chain fatty acids	1
82728	Ferritin	1
82731	Fetal fibronectin, cervicovaginal secretions, semi-quantitative	1
82735	Fluoride	1
82746	Folic acid; serum	1
82747	Folic acid; RBC	1
82757	Fructose, semen	1
82759	Galactokinase, RBC	1
82760	Galactose	1
82775	Galactose-1-phosphate uridyl transferase; quantitative	1
82776	Galactose-1-phosphate uridyl transferase; screen	1
82777	Galectin-3	1
82784	Gammaglobulin (immunoglobulin); IgA, IgD, IgG, IgM, each	4
82785	Gammaglobulin (immunoglobulin); IgE	1
82787	Gammaglobulin (immunoglobulin); immunoglobulin subclasses (eg, IgG1, 2, 3, or 4),	3
02/0/	each	3
82800	Gases, blood, pH only	1
82803	Gases, blood, any combination of pH, pCO2, pO2, CO2, HCO3 (including calculated O2 saturation)	1
82805	Gases, blood, any combination of pH, pCO2, pO2, CO2, HCO3 (including calculated O2 saturation); with O2 saturation, by direct measurement, except pulse oximetry	1

82810	Gases, blood, O2 saturation only, by direct measurement, except pulse oximetry	1
82820	Hemoglobin-oxygen affinity (pO2 for 50% hemoglobin saturation with oxygen)	1
82930	Gastric acid analysis, includes pH if performed, each specimen	1
82938	Gastrin after secretin stimulation	1
82941	Gastrin	1
82943	Glucagon	1
82945	Glucose, body fluid, other than blood	1
82946	Glucagon tolerance test	1
82947	Glucose; quantitative, blood (except reagent strip)	1
82948	Glucose; blood, reagent strip	1
82950	Glucose; post glucose dose (includes glucose)	1
82951	Glucose; tolerance test (GTT), 3 specimens (includes glucose)	1
82952	Glucose; tolerance test, each additional beyond 3 specimens (List separately in addition to code for primary procedure)	1
82955	Glucose-6-phosphate dehydrogenase (G6PD); quantitative	1
82960	Glucose-6-phosphate dehydrogenase (G6PD); screen	1
82962	Glucose, blood by glucose monitoring device(s) cleared by the FDA specifically for home use	1
82963	Glucosidase, beta	1
82965	Glutamate dehydrogenase	1
82977	Glutamyltransferase, gamma (GGT)	1
82978	Glutathione	1
82979	Glutathione reductase, RBC	1
82985	Glycated protein	1
83002	Gonadotropin; luteinizing hormone (LH)	1
83003	Growth hormone, human (HGH) (somatotropin)	1
83006	Growth stimulation expressed gene 2 (ST2, Interleukin 1 receptor like-1)	1
83009	Helicobacter pylori, blood test analysis for urease activity, non-radioactive isotope (eg, C-13)	1
83010	Haptoglobin; quantitative	1
83012	Haptoglobin; phenotypes	1
83013	Helicobacter pylori; breath test analysis for urease activity, non-radioactive isotope (eg, C-13)	1
83014	Helicobacter pylori; drug administration	1
83015	Heavy metal (eg, arsenic, barium, beryllium, bismuth, antimony, mercury); qualitative, any number of analytes	1

83018	Heavy metal (eg, arsenic, barium, beryllium, bismuth, antimony, mercury); quantitative, each, not elsewhere specified	1
83020	Hemoglobin fractionation and quantitation; electrophoresis (eg, A2, S, C, and/or F)	1
83021	Hemoglobin fractionation and quantitation; chromatography (eg, A2, S, C, and/or F)	1
83026	Hemoglobin; by copper sulfate method, non-automated	1
83030	Hemoglobin; F (fetal), chemical	1
83033	Hemoglobin; F (fetal), qualitative	1
83037	Hemoglobin; glycosylated (A1C) by device cleared by FDA for home use	1
83045	Hemoglobin; methemoglobin, qualitative	1
83050	Hemoglobin; methemoglobin, quantitative	1
83051	Hemoglobin; plasma	1
83060	Hemoglobin; sulfhemoglobin, quantitative	1
83065	Hemoglobin; thermolabile	1
83068	Hemoglobin; unstable, screen	1
83069	Hemoglobin; urine	1
83070	Hemosiderin, qualitative	1
83080	b-Hexosaminidase, each assay	2
83088	Histamine	1
83090	Homocysteine	1
83150	Homovanillic acid (HVA)	1
83491	Hydroxycorticosteroids, 17- (17-OHCS)	1
83497	Hydroxyindolacetic acid, 5-(HIAA)	1
83498	Hydroxyprogesterone, 17-d	1
83500	Hydroxyproline; free	1
83505	Hydroxyproline; total	1
83516	Immunoassay for analyte other than infectious agent antibody or infectious agent antigen; qualitative or semiquantitative, multiple step method	5
83518	Immunoassay for analyte other than infectious agent antibody or infectious agent antigen; qualitative or semiquantitative, single step method (eg, reagent strip)	1
83519	Immunoassay for analyte other than infectious agent antibody or infectious agent antigen; quantitative, by radioimmunoassay (eg, RIA)	5
83520	Immunoassay for analyte other than infectious agent antibody or infectious agent antigen; quantitative, not otherwise specified	9
83525	Insulin; total	1
83527	Insulin; free	1
83528	Intrinsic factor	1

83529	Interleukin-6 (IL-6)	1
83540	Iron	1
83550	Iron binding capacity	1
83570	Isocitric dehydrogenase (IDH)	1
83582	Ketogenic steroids, fractionation	1
83586	Ketosteroids, 17- (17-KS); total	1
83593	Ketosteroids, 17- (17-KS); fractionation	1
83605	Lactate (lactic acid)	1
83615	Lactate dehydrogenase (LD), (LDH)	1
83625	Lactate dehydrogenase (LD), (LDH); isoenzymes, separation and quantitation	1
83630	Lactoferrin, fecal; qualitative	1
83631	Lactoferrin, fecal; quantitative	1
83632	Lactogen, human placental (HPL) human chorionic somatomammotropin	1
83633	Lactose, urine, qualitative	1
83655	Lead	1
83661	Fetal lung maturity assessment; lecithin sphingomyelin (L/S) ratio	1
83662	Fetal lung maturity assessment; foam stability test	1
83663	Fetal lung maturity assessment; fluorescence polarization	1
83664	Fetal lung maturity assessment; lamellar body density	1
83670	Leucine aminopeptidase (LAP)	1
83690	Lipase	1
83695	Lipoprotein (a)	1
83700	Lipoprotein, blood; electrophoretic separation and quantitation	1
83701	Lipoprotein, blood; high resolution fractionation and quantitation of lipoproteins including lipoprotein subclasses when performed (eg, electrophoresis, ultracentrifugation)	1
83704	Lipoprotein, blood; quantitation of lipoprotein particle number(s) (eg, by nuclear magnetic resonance spectroscopy), includes lipoprotein particle subclass(es), when performed	1
83718	Lipoprotein, direct measurement; high density cholesterol (HDL cholesterol)	1
83719	Lipoprotein, direct measurement; VLDL cholesterol	1
83721	Lipoprotein, direct measurement; LDL cholesterol	1
83722	Lipoprotein, direct measurement; small dense LDL cholesterol	1
83727	Luteinizing releasing factor (LRH)	1
83735	Magnesium	1
83775	Malate dehydrogenase	1

83785	Manganese	1
83789	Mass spectrometry and tandem mass spectrometry (eg, MS, MS/MS, MALDI, MS-TOF, QTOF), non-drug analyte(s) not elsewhere specified, qualitative or quantitative, each specimen	2
83825	Mercury, quantitative	1
83835	Metanephrines	1
83857	Methemalbumin	1
83861	Microfluidic analysis utilizing an integrated collection and analysis device, tear osmolarity	2
83864	Mucopolysaccharides, acid, quantitative	1
83872	Mucin, synovial fluid (Ropes test)	1
83873	Myelin basic protein, cerebrospinal fluid	1
83874	Myoglobin	1
83876	Myeloperoxidase (MPO)	1
83880	Natriuretic peptide	1
83883	Nephelometry, each analyte not elsewhere specified	4
83885	Nickel	1
83915	Nucleotidase 5'-	1
83916	Oligoclonal immune (oligoclonal bands)	1
83918	Organic acids; total, quantitative, each specimen	1
83919	Organic acids; qualitative, each specimen	1
83921	Organic acid, single, quantitative	1
83930	Osmolality; blood	1
83935	Osmolality; urine	1
83937	Osteocalcin (bone g1a protein)	1
83945	Oxalate	1
83950	Oncoprotein; HER-2/neu	1
83951	Oncoprotein; des-gamma-carboxy-prothrombin (DCP)	1
83970	Parathormone (parathyroid hormone)	1
83986	pH; body fluid, not otherwise specified	1
83987	pH; exhaled breath condensate	1
83992	Phencyclidine (PCP)	1
83993	Calprotectin, fecal	1
84030	Phenylalanine (PKU), blood	1
84035	Phenylketones, qualitative	1

84060	Phosphatase, acid; total	1
84066	Phosphatase, acid; prostatic	1
84075	Phosphatase, alkaline	1
84078	Phosphatase, alkaline; heat stable (total not included)	1
84080	Phosphatase, alkaline; isoenzymes	1
84081	Phosphatidylglycerol	1
84085	Phosphogluconate, 6-, dehydrogenase, RBC	1
84087	Phosphohexose isomerase	1
84100	Phosphorus inorganic (phosphate)	1
84105	Phosphorus inorganic (phosphate); urine	1
84106	Porphobilinogen, urine; qualitative	1
84110	Porphobilinogen, urine; quantitative	1
84112	Evaluation of cervicovaginal fluid for specific amniotic fluid protein(s) (eg, placental alpha microglobulin-1 [PAMG-1], placental protein 12 [PP12], alpha-fetoprotein), qualitative, each specimen	1
84119	Porphyrins, urine; qualitative	1
84120	Porphyrins, urine; quantitation and fractionation	1
84126	Porphyrins, feces, quantitative	1
84132	Potassium; serum, plasma or whole blood	1
84133	Potassium; urine	1
84134	Prealbumin	1
84135	Pregnanediol	1
84140	Pregnenolone	1
84143	17-hydroxypregnenolone	1
84144	Progesterone	2
84145	Procalcitonin (PCT)	1
84150	Prostaglandin, each	1
84152	Prostate specific antigen (PSA); complexed (direct measurement)	1
84153	Prostate specific antigen (PSA); total	1
84154	Prostate specific antigen (PSA); free	1
84155	Protein, total, except by refractometry; serum, plasma or whole blood	1
84156	Protein, total, except by refractometry; urine	1
84157	Protein, total, except by refractometry; other source (eg, synovial fluid,	1
	cerebrospinal fluid)	

84163	Pregnancy-associated plasma protein-A (PAPP-A)	1
84165	Protein; electrophoretic fractionation and quantitation, serum	1
84166	Protein; electrophoretic fractionation and quantitation, other fluids with concentration (eg, urine, CSF)	1
84181	Protein; Western Blot, with interpretation and report, blood or other body fluid	1
84182	Protein; Western Blot, with interpretation and report, blood or other body fluid, immunological probe for band identification, each	1
84202	Protoporphyrin, RBC; quantitative	1
84203	Protoporphyrin, RBC; screen	1
84206	Proinsulin	1
84207	Pyridoxal phosphate (Vitamin B-6)	1
84210	Pyruvate	1
84220	Pyruvate kinase	1
84228	Quinine	1
84233	Receptor assay; estrogen	1
84234	Receptor assay; progesterone	1
84235	Receptor assay; endocrine, other than estrogen or progesterone (specify hormone)	1
84238	Receptor assay; non-endocrine (specify receptor)	1
84244	Renin	1
84252	Riboflavin (Vitamin B-2)	1
84255	Selenium	2
84260	Serotonin	1
84270	Sex hormone binding globulin (SHBG)	1
84275	Sialic acid	1
84285	Silica	1
84295	Sodium; serum, plasma or whole blood	1
84300	Sodium; urine	1
84302	Sodium; other source	1
84305	Somatomedin	1
84307	Somatostatin	1
84311	Spectrophotometry, analyte not elsewhere specified	2
84315	Specific gravity (except urine)	1
84375	Sugars, chromatographic, TLC or paper chromatography	1
84376	Sugars (mono-, di-, and oligosaccharides); single qualitative, each specimen	1
84377	Sugars (mono-, di-, and oligosaccharides); multiple qualitative, each specimen	1

Sugars (mono-, di-, and oligosaccharides); single quantitative, each specimen	1
Sugars (mono-, di-, and oligosaccharides); multiple quantitative, each specimen	1
	1
	1
	1
	1
	1
Thiocyanate	1
Thromboxane metabolite(s), including thromboxane if performed, urine	1
Thyroglobulin	1
Thyroxine; total	1
Thyroxine; requiring elution (eg, neonatal)	1
Thyroxine; free	1
Thyroxine binding globulin (TBG)	1
Thyroid stimulating hormone (TSH)	1
Thyroid stimulating immune globulins (TSI)	1
Tocopherol alpha (Vitamin E)	1
Transcortin (cortisol binding globulin)	1
Transferase; aspartate amino (AST) (SGOT)	1
Transferase; alanine amino (ALT) (SGPT)	1
Transferrin	1
Triglycerides	1
Thyroid hormone (T3 or T4) uptake or thyroid hormone binding ratio (THBR)	1
Triiodothyronine T3; total (TT-3)	1
Triiodothyronine T3; free	1
Triiodothyronine T3; reverse	1
Troponin, quantitative	2
Trypsin; duodenal fluid	1
Trypsin; feces, qualitative	1
Trypsin; feces, quantitative, 24-hour collection	1
Tyrosine	1
	3
	1
<u> </u>	1
	Thyroglobulin Thyroxine; total Thyroxine; requiring elution (eg, neonatal) Thyroxine; free Thyroxine binding globulin (TBG) Thyroid stimulating hormone (TSH) Thyroid stimulating immune globulins (TSI) Tocopherol alpha (Vitamin E) Transcortin (cortisol binding globulin) Transferase; aspartate amino (AST) (SGOT) Transferase; alanine amino (ALT) (SGPT) Transferrin Triglycerides Thyroid hormone (T3 or T4) uptake or thyroid hormone binding ratio (THBR) Triiodothyronine T3; total (TT-3) Triiodothyronine T3; reverse Trioponin, quantitative Trypsin; duodenal fluid Trypsin; feces, qualitative Trypsin; feces, quantitative, 24-hour collection

84540	Urea nitrogen, urine	2
84545	Urea nitrogen, clearance	1
84550	Uric acid; blood	1
84560	Uric acid; other source	1
84577	Urobilinogen, feces, quantitative	1
84578	Urobilinogen, urine; qualitative	1
84580	Urobilinogen, urine; quantitative, timed specimen	1
84583	Urobilinogen, urine; semiquantitative	1
84585	Vanillylmandelic acid (VMA), urine	1
84586	Vasoactive intestinal peptide (VIP)	1
84588	Vasopressin (antidiuretic hormone, ADH)	1
84590	Vitamin A	1
84591	Vitamin, not otherwise specified	1
84597	Vitamin K	1
84600	Volatiles (eg, acetic anhydride, diethylether)	2
84620	Xylose absorption test, blood and/or urine	1
84630	Zinc	1
84681	C-peptide	1
84704	Gonadotropin, chorionic (hCG); free beta chain	1
84830	Ovulation tests, by visual color comparison methods for human luteinizing hormone	1
84999	Unlisted chemistry procedure	1
85002	Bleeding time	1
85004	Blood count; automated differential WBC count	1
85007	Blood count; blood smear, microscopic examination with manual differential WBC count	1
85008	Blood count; blood smear, microscopic examination without manual differential WBC count	1
85009	Blood count; manual differential WBC count, buffy coat	1
85013	Blood count; spun microhematocrit	1
85018	Blood count; hemoglobin (Hgb)	999
85027	Blood count; complete (CBC), automated (Hgb, Hct, RBC, WBC and platelet count)	1
85032	Blood count; manual cell count (erythrocyte, leukocyte, or platelet) each	1
85041	Blood count; red blood cell (RBC), automated	1
85044	Blood count; reticulocyte, manual	1
85045	Blood count; reticulocyte, automated	1

85046	Blood count; reticulocytes, automated, including 1 or more cellular parameters (eg, reticulocyte hemoglobin content [CHr], immature reticulocyte fraction [IRF], reticulocyte volume [MRV], RNA content), direct measurement	1
85048	Blood count; leukocyte (WBC), automated	1
85049	Blood count; platelet, automated	1
85055	Reticulated platelet assay	1
85060	Blood smear, peripheral, interpretation by physician with written report	1
85097	Bone marrow, smear interpretation	1
85130	Chromogenic substrate assay	1
85170	Clot retraction	1
85175	Clot lysis time, whole blood dilution	1
85210	Clotting; factor II, prothrombin, specific	1
85220	Clotting; factor V (AcG or proaccelerin), labile factor	1
85230	Clotting; factor VII (proconvertin, stable factor)	1
85240	Clotting; factor VIII (AHG), 1-stage	1
85244	Clotting; factor VIII related antigen	1
85245	Clotting; factor VIII, VW factor, ristocetin cofactor	1
85246	Clotting; factor VIII, VW factor antigen	1
85247	Clotting; factor VIII, von Willebrand factor, multimetric analysis	1
85250	Clotting; factor IX (PTC or Christmas)	1
85260	Clotting; factor X (Stuart-Prower)	1
85270	Clotting; factor XI (PTA)	1
85280	Clotting; factor XII (Hageman)	1
85290	Clotting; factor XIII (fibrin stabilizing)	1
85291	Clotting; factor XIII (fibrin stabilizing), screen solubility	1
85292	Clotting; prekallikrein assay (Fletcher factor assay)	1
85293	Clotting; high molecular weight kininogen assay (Fitzgerald factor assay)	1
85300	Clotting inhibitors or anticoagulants; antithrombin III, activity	1
85301	Clotting inhibitors or anticoagulants; antithrombin III, antigen assay	1
85302	Clotting inhibitors or anticoagulants; protein C, antigen	1
85303	Clotting inhibitors or anticoagulants; protein C, activity	1
85305	Clotting inhibitors or anticoagulants; protein S, total	1
85306	Clotting inhibitors or anticoagulants; protein S, free	1
85307	Activated Protein C (APC) resistance assay	1
85335	Factor inhibitor test	1

85337	Thrombomodulin	1
85345	Coagulation time; Lee and White	1
85347	Coagulation time; activated	1
85348	Coagulation time; other methods	1
85360	Euglobulin lysis	1
85362	Fibrin(ogen) degradation (split) products (FDP) (FSP); agglutination slide, semiquantitative	1
85366	Fibrin(ogen) degradation (split) products (FDP) (FSP); paracoagulation	1
85370	Fibrin(ogen) degradation (split) products (FDP) (FSP); quantitative	1
85378	Fibrin degradation products, D-dimer; qualitative or semiquantitative	1
85379	Fibrin degradation products, D-dimer; quantitative	1
85380	Fibrin degradation products, D-dimer; ultrasensitive (eg, for evaluation for venous thromboembolism), qualitative or semiquantitative	1
85384	Fibrinogen; activity	1
85385	Fibrinogen; antigen	1
85390	Fibrinolysins or coagulopathy screen, interpretation and report	1
85396	Coagulation/fibrinolysis assay, whole blood (eg, viscoelastic clot assessment), including use of any pharmacologic additive(s), as indicated, including interpretation and written report, per day	1
85397	Coagulation and fibrinolysis, functional activity, not otherwise specified (eg, ADAMTS-13), each analyte	1
85400	Fibrinolytic factors and inhibitors; plasmin	1
85410	Fibrinolytic factors and inhibitors; alpha-2 antiplasmin	1
85415	Fibrinolytic factors and inhibitors; plasminogen activator	1
85420	Fibrinolytic factors and inhibitors; plasminogen, except antigenic assay	1
85421	Fibrinolytic factors and inhibitors; plasminogen, antigenic assay	1
85441	Heinz bodies; direct	1
85445	Heinz bodies; induced, acetyl phenylhydrazine	1
85460	Hemoglobin or RBCs, fetal, for fetomaternal hemorrhage; differential lysis (Kleihauer-Betke)	1
85461	Hemoglobin or RBCs, fetal, for fetomaternal hemorrhage; rosette	1
85475	Hemolysin, acid	1
85520	Heparin assay	1
85525	Heparin neutralization	1
85530	Heparin-protamine tolerance test	1
85536	Iron stain, peripheral blood	1

85540	Leukocyte alkaline phosphatase with count	1
85547	Mechanical fragility, RBC	1
85549	Muramidase	1
85555	Osmotic fragility, RBC; unincubated	1
85557	Osmotic fragility, RBC; incubated	1
85576	Platelet, aggregation (in vitro), each agent	1
85597	Phospholipid neutralization; platelet	1
85598	Phospholipid neutralization; hexagonal phospholipid	1
85610	Prothrombin time	1
85611	Prothrombin time; substitution, plasma fractions, each	1
85612	Russell viper venom time (includes venom); undiluted	1
85613	Russell viper venom time (includes venom); diluted	1
85635	Reptilase test	1
85651	Sedimentation rate, erythrocyte; non-automated	1
85652	Sedimentation rate, erythrocyte; automated	1
85670	Thrombin time; plasma	1
85675	Thrombin time; titer	1
85705	Thromboplastin inhibition, tissue	1
85730	Thromboplastin time, partial (PTT); plasma or whole blood	1
85732	Thromboplastin time, partial (PTT); substitution, plasma fractions, each	1
85810	Viscosity	1
85999	Unlisted hematology and coagulation procedure	1
86000	Agglutinins, febrile (eg, Brucella, Francisella, Murine typhus, Q fever, Rocky Mountain spotted fever, scrub typhus), each antigen	1
86001	Allergen specific IgG quantitative or semiquantitative, each allergen	1
86003	Allergen specific IgE; quantitative or semiquantitative, crude allergen extract, each	12
86005	Allergen specific IgE; qualitative, multiallergen screen (eg, disk, sponge, card)	6
86008	Allergen specific IgE; quantitative or semiquantitative, recombinant or purified component, each	12
86021	Antibody identification; leukocyte antibodies	1
86022	Antibody identification; platelet antibodies	1
86023	Antibody identification; platelet associated immunoglobulin assay	1
86036	Antineutrophil cytoplasmic antibody (ANCA); screen, each antibody	3
86037	Antineutrophil cytoplasmic antibody (ANCA); titer, each antibody	3
86038	Antinuclear antibodies (ANA)	1

86039	Antinuclear antibodies (ANA); titer	1
86051	Aquaporin-4 (neuromyelitis optica [NMO]) antibody; enzyme-linked immunosorbent immunoassay (ELISA)	1
86060	Antistreptolysin 0; titer	1
86063	Antistreptolysin 0; screen	1
86077	Blood bank physician services; difficult cross match and/or evaluation of irregular antibody(s), interpretation and written report	1
86078	Blood bank physician services; investigation of transfusion reaction including suspicion of transmissible disease, interpretation and written report	1
86079	Blood bank physician services; authorization for deviation from standard blood banking procedures (eg, use of outdated blood, transfusion of Rh incompatible units), with written report	1
86140	C-reactive protein	1
86141	C-reactive protein; high sensitivity (hsCRP)	1
86146	Beta 2 Glycoprotein I antibody, each	1
86147	Cardiolipin (phospholipid) antibody, each Ig class	1
86148	Anti-phosphatidylserine (phospholipid) antibody	1
86152	Cell enumeration using immunologic selection and identification in fluid specimen (eg, circulating tumor cells in blood)	1
86153	Cell enumeration using immunologic selection and identification in fluid specimen (eg, circulating tumor cells in blood); physician interpretation and report, when required	1
86155	Chemotaxis assay, specify method	1
86156	Cold agglutinin; screen	1
86157	Cold agglutinin; titer	1
86160	Complement; antigen, each component	1
86161	Complement; functional activity, each component	1
86162	Complement; total hemolytic (CH50)	1
86171	Complement fixation tests, each antigen	1
86200	Cyclic citrullinated peptide (CCP), antibody	1
86215	Deoxyribonuclease, antibody	1
86225	Deoxyribonucleic acid (DNA) antibody; native or double stranded	1
86226	Deoxyribonucleic acid (DNA) antibody; single stranded	1
86231	Endomysial antibody (EMA), each immunoglobulin (Ig) class	3
86235	Extractable nuclear antigen, antibody to, any method (eg, nRNP, SS-A, SS-B, Sm, RNP, Sc170, J01), each antibody	1
86256	Fluorescent noninfectious agent antibody; titer, each antibody	1

86258	Gliadin (deamidated) (DGP) antibody, each immunoglobulin (Ig) class	3
86277	Growth hormone, human (HGH), antibody	1
86280	Hemagglutination inhibition test (HAI)	1
86294	Immunoassay for tumor antigen, qualitative or semiquantitative (eg, bladder tumor antigen)	1
86300	Immunoassay for tumor antigen, quantitative; CA 15-3 (27.29)	1
86301	Immunoassay for tumor antigen, quantitative; CA 19-9	1
86304	Immunoassay for tumor antigen, quantitative; CA 125	1
86305	Human epididymis protein 4 (HE4)	1
86308	Heterophile antibodies; screening	1
86309	Heterophile antibodies; titer	1
86310	Heterophile antibodies; titers after absorption with beef cells and guinea pig kidney	1
86316	Immunoassay for tumor antigen, other antigen, quantitative (eg, CA 50, 72-4, 549), each	1
86317	Immunoassay for infectious agent antibody, quantitative, not otherwise specified	2
86318	Immunoassay for infectious agent antibody(ies), qualitative or semiquantitative, single-step method (eg, reagent strip)	1
86320	Immunoelectrophoresis; serum	1
86325	Immunoelectrophoresis; other fluids (eg, urine, cerebrospinal fluid) with concentration	1
86327	Immunoelectrophoresis; crossed (2-dimensional assay)	1
86328	Immunoassay for infectious agent antibody(ies), qualitative or semiquantitative, single-step method (eg, reagent strip); severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (coronavirus disease [COVID-19])	1
86329	Immunodiffusion; not elsewhere specified	1
86331	Immunodiffusion; gel diffusion, qualitative (Ouchterlony), each antigen or antibody	1
86332	Immune complex assay	1
86334	Immunofixation electrophoresis; serum	1
86335	Immunofixation electrophoresis; other fluids with concentration (eg, urine, CSF)	1
86336	Inhibin A	1
86337	Insulin antibodies	1
86340	Intrinsic factor antibodies	1
86341	Islet cell antibody	1
86343	Leukocyte histamine release test (LHR)	1
86344	Leukocyte phagocytosis	1
86352	Cellular function assay involving stimulation (eg, mitogen or antigen) and detection of biomarker (eg, ATP)	1

86353	Lymphocyte transformation, mitogen (phytomitogen) or antigen induced blastogenesis	1
86355	B cells, total count	1
86356	Mononuclear cell antigen, quantitative (eg, flow cytometry), not otherwise specified, each antigen	5
86357	Natural killer (NK) cells, total count	1
86359	T cells; total count	1
86360	T cells; absolute CD4 and CD8 count, including ratio	1
86364	Tissue transglutaminase, each immunoglobulin (Ig) class	3
86367	Stem cells (ie, CD34), total count	1
86376	Microsomal antibodies (eg, thyroid or liver-kidney), each	1
86381	Mitochondrial antibody (eg, M2), each	4
86382	Neutralization test, viral	3
86384	Nitroblue tetrazolium dye test (NTD)	1
86386	Nuclear Matrix Protein 22 (NMP22), qualitative	1
86403	Particle agglutination; screen, each antibody	1
86406	Particle agglutination; titer, each antibody	1
86408	Neutralizing antibody, severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (coronavirus disease [COVID-19]); screen	1
86409	Neutralizing antibody, severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (coronavirus disease [COVID-19]); titer	1
86413	Severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (coronavirus disease [COVID-19]) antibody, quantitative	3
86430	Rheumatoid factor; qualitative	1
86431	Rheumatoid factor; quantitative	1
86480	Tuberculosis test, cell mediated immunity antigen response measurement; gamma interferon	1
86481	Tuberculosis test, cell mediated immunity antigen response measurement; enumeration of gamma interferon-producing T-cells in cell suspension	1
86485	Skin test; candida	1
86486	Skin test; unlisted antigen, each	2
86490	Skin test; coccidioidomycosis	1
86510	Skin test; histoplasmosis	1
86580	Skin test; tuberculosis, intradermal	1
86590	Streptokinase, antibody	1
86593	Syphilis test, non-treponemal antibody; quantitative	1
86596	Voltage-gated calcium channel antibody, each	3

86602	Antibody; actinomyces	3
86603	Antibody; adenovirus	1
86606	Antibody; Aspergillus	1
86609	Antibody; bacterium, not elsewhere specified	14
86611	Antibody; Bartonella	1
86612	Antibody; Blastomyces	1
86615	Antibody; Bordetella	1
86617	Antibody; Borrelia burgdorferi (Lyme disease) confirmatory test (eg, Western Blot or immunoblot)	1
86618	Antibody; Borrelia burgdorferi (Lyme disease)	999
86619	Antibody; Borrelia (relapsing fever)	2
86622	Antibody; Brucella	1
86625	Antibody; Campylobacter	1
86628	Antibody; Candida	1
86631	Antibody; Chlamydia	1
86632	Antibody; Chlamydia, IgM	1
86635	Antibody; Coccidioides	1
86638	Antibody; Coxiella burnetii (Q fever)	1
86641	Antibody; Cryptococcus	1
86644	Antibody; cytomegalovirus (CMV)	1
86645	Antibody; cytomegalovirus (CMV), IgM	1
86648	Antibody; Diphtheria	1
86651	Antibody; encephalitis, California (La Crosse)	1
86652	Antibody; encephalitis, Eastern equine	1
86653	Antibody; encephalitis, St. Louis	1
86654	Antibody; encephalitis, Western equine	1
86658	Antibody; enterovirus (eg, coxsackie, echo, polio)	12
86663	Antibody; Epstein-Barr (EB) virus, early antigen (EA)	1
86664	Antibody; Epstein-Barr (EB) virus, nuclear antigen (EBNA)	1
86665	Antibody; Epstein-Barr (EB) virus, viral capsid (VCA)	1
86666	Antibody; Ehrlichia	1
86668	Antibody; Francisella tularensis	1
86671	Antibody; fungus, not elsewhere specified	3
86674	Antibody; Giardia lamblia	3

86677	Antibody; Helicobacter pylori	1
86682	Antibody; helminth, not elsewhere specified	2
86684	Antibody; Haemophilus influenza	1
86687	Antibody; HTLV-I	1
86688	Antibody; HTLV-II	1
86689	Antibody; HTLV or HIV antibody, confirmatory test (eg, Western Blot)	1
86692	Antibody; hepatitis, delta agent	1
86694	Antibody; herpes simplex, non-specific type test	1
86695	Antibody; herpes simplex, type 1	1
86696	Antibody; herpes simplex, type 2	1
86698	Antibody; histoplasma	1
86703	Antibody; HIV-1 and HIV-2, single result	1
86704	Hepatitis B core antibody (HBcAb); total	1
86705	Hepatitis B core antibody (HBcAb); IgM antibody	1
86706	Hepatitis B surface antibody (HBsAb)	1
86707	Hepatitis Be antibody (HBeAb)	1
86708	Hepatitis A antibody (HAAb)	1
86709	Hepatitis A antibody (HAAb), IgM antibody	1
86710	Antibody; influenza virus	4
86711	Antibody; JC (John Cunningham) virus	1
86713	Antibody; Legionella	1
86717	Antibody; Leishmania	8
86720	Antibody; Leptospira	1
86723	Antibody; Listeria monocytogenes	2
86727	Antibody; lymphocytic choriomeningitis	1
86732	Antibody; mucormycosis	2
86735	Antibody; mumps	2
86738	Antibody; mycoplasma	1
86741	Antibody; Neisseria meningitidis	2
86744	Antibody; Nocardia	1
86747	Antibody; parvovirus	1
86750	Antibody; Plasmodium (malaria)	4
86753	Antibody; protozoa, not elsewhere specified	3
86756	Antibody; respiratory syncytial virus	1

86757	Antibody; Rickettsia	1
86759	Antibody; rotavirus	1
86765	Antibody; rubeola	1
86768	Antibody; Salmonella	5
86769	Antibody; severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (coronavirus disease [COVID-19])	1
86771	Antibody; Shigella	2
86774	Antibody; tetanus	2
86777	Antibody; Toxoplasma	1
86778	Antibody; Toxoplasma, IgM	1
86780	Antibody; Treponema pallidum	1
86784	Antibody; Trichinella	1
86787	Antibody; varicella-zoster	1
86790	Antibody; virus, not elsewhere specified	4
86793	Antibody; Yersinia	1
86794	Antibody; Zika virus, IgM	1
86800	Thyroglobulin antibody	1
86803	Hepatitis C antibody	1
86804	Hepatitis C antibody; confirmatory test (eg, immunoblot)	1
86805	Lymphocytotoxicity assay, visual crossmatch; with titration	1
86806	Lymphocytotoxicity assay, visual crossmatch; without titration	1
86807	Serum screening for cytotoxic percent reactive antibody (PRA); standard method	1
86808	Serum screening for cytotoxic percent reactive antibody (PRA); quick method	1
86812	HLA typing; A, B, or C (eg, A10, B7, B27), single antigen	1
86813	HLA typing; A, B, or C, multiple antigens	1
86816	HLA typing; DR/DQ, single antigen	1
86817	HLA typing; DR/DQ, multiple antigens	1
86821	HLA typing; lymphocyte culture, mixed (MLC)	1
86825	Human leukocyte antigen (HLA) crossmatch, non-cytotoxic (eg, using flow cytometry); first serum sample or dilution	1
86826	Human leukocyte antigen (HLA) crossmatch, non-cytotoxic (eg, using flow cytometry); each additional serum sample or sample dilution (List separately in addition to primary procedure)	1
86828	Antibody to human leukocyte antigens (HLA), solid phase assays (eg, microspheres or beads, ELISA, flow cytometry); qualitative assessment of the presence or absence of antibody(ies) to HLA Class I and Class II HLA antigens	1

86829	Antibody to human leukocyte antigens (HLA), solid phase assays (eg, microspheres or beads, ELISA, Flow cytometry); qualitative assessment of the presence or absence of antibody(ies) to HLA Class I or Class II HLA antigens	1
86830	Antibody to human leukocyte antigens (HLA), solid phase assays (eg, microspheres or beads, ELISA, Flow cytometry); antibody identification by qualitative panel using complete HLA phenotypes, HLA Class I	1
86831	Antibody to human leukocyte antigens (HLA), solid phase assays (eg, microspheres or beads, ELISA, Flow cytometry); antibody identification by qualitative panel using complete HLA phenotypes, HLA Class II	1
86832	Antibody to human leukocyte antigens (HLA), solid phase assays (eg, microspheres or beads, ELISA, Flow cytometry); high definition qualitative panel for identification of antibody specificities (eg, individual antigen per bead methodology), HLA Class I	1
86833	Antibody to human leukocyte antigens (HLA), solid phase assays (eg, microspheres or beads, ELISA, Flow cytometry); high definition qualitative panel for identification of antibody specificities (eg, individual antigen per bead methodology), HLA Class II	1
86834	Antibody to human leukocyte antigens (HLA), solid phase assays (eg, microspheres or beads, ELISA, Flow cytometry); semi-quantitative panel (eg, titer), HLA Class I	1
86835	Antibody to human leukocyte antigens (HLA), solid phase assays (eg, microspheres or beads, ELISA, Flow cytometry); semi-quantitative panel (eg, titer), HLA Class II	1
86849	Unlisted immunology procedure	1
86850	Antibody screen, RBC, each serum technique	1
86860	Antibody elution (RBC), each elution	1
86870	Antibody identification, RBC antibodies, each panel for each serum technique	1
86880	Antihuman globulin test (Coombs test); direct, each antiserum	1
86885	Antihuman globulin test (Coombs test); indirect, qualitative, each reagent red cell	1
86886	Antihuman globulin test (Coombs test); indirect, each antibody titer	1
86890	Autologous blood or component, collection processing and storage; predeposited	2
86891	Autologous blood or component, collection processing and storage; intra- or postoperative salvage	2
86900	Blood typing, serologic; ABO	1
86901	Blood typing, serologic; Rh (D)	1
86902	Blood typing, serologic; antigen testing of donor blood using reagent serum, each antigen test	1
86904	Blood typing, serologic; antigen screening for compatible unit using patient serum, per unit screened	1
86905	Blood typing, serologic; RBC antigens, other than ABO or Rh (D), each	1
86906	Blood typing, serologic; Rh phenotyping, complete	1
86910	Blood typing, for paternity testing, per individual; ABO, Rh and MN	1
86920	Compatibility test each unit; immediate spin technique	1

86921	Compatibility test each unit; incubation technique	1
86922	Compatibility test each unit; antiglobulin technique	1
86923	Compatibility test each unit; electronic	3
86930	Frozen blood, each unit; freezing (includes preparation)	3
86931	Frozen blood, each unit; thawing	4
86940	Hemolysins and agglutinins; auto, screen, each	1
86941	Hemolysins and agglutinins; incubated	1
86945	Irradiation of blood product, each unit	5
86950	Leukocyte transfusion	1
86960	Volume reduction of blood or blood product (eg, red blood cells or platelets), each unit	3
86965	Pooling of platelets or other blood products	4
86971	Pretreatment of RBCs for use in RBC antibody detection, identification, and/or compatibility testing; incubation with enzymes, each	6
86972	Pretreatment of RBCs for use in RBC antibody detection, identification, and/or compatibility testing; by density gradient separation	2
86975	Pretreatment of serum for use in RBC antibody identification; incubation with drugs, each	2
86976	Pretreatment of serum for use in RBC antibody identification; by dilution	2
86977	Pretreatment of serum for use in RBC antibody identification; incubation with inhibitors, each	2
86999	Unlisted transfusion medicine procedure	1
87003	Animal inoculation, small animal, with observation and dissection	1
87015	Concentration (any type), for infectious agents	1
87040	Culture, bacterial; blood, aerobic, with isolation and presumptive identification of isolates (includes anaerobic culture, if appropriate)	1
87045	Culture, bacterial; stool, aerobic, with isolation and preliminary examination (eg, KIA, LIA), Salmonella and Shigella species	1
87046	Culture, bacterial; stool, aerobic, additional pathogens, isolation and presumptive identification of isolates, each plate	1
87071	Culture, bacterial; quantitative, aerobic with isolation and presumptive identification of isolates, any source except urine, blood or stool	1
87073	Culture, bacterial; quantitative, anaerobic with isolation and presumptive identification of isolates, any source except urine, blood or stool	1
87077	Culture, bacterial; aerobic isolate, additional methods required for definitive identification, each isolate	1
87081	Culture, presumptive, pathogenic organisms, screening only	1

87084	Culture, presumptive, pathogenic organisms, screening only; with colony estimation from density chart	1
87088	Culture, bacterial; with isolation and presumptive identification of each isolate, urine	1
87101	Culture, fungi (mold or yeast) isolation, with presumptive identification of isolates; skin, hair, or nail	1
87102	Culture, fungi (mold or yeast) isolation, with presumptive identification of isolates; other source (except blood)	1
87103	Culture, fungi (mold or yeast) isolation, with presumptive identification of isolates; blood	1
87106	Culture, fungi, definitive identification, each organism; yeast	1
87107	Culture, fungi, definitive identification, each organism; mold	1
87109	Culture, mycoplasma, any source	1
87116	Culture, tubercle or other acid-fast bacilli (eg, TB, AFB, mycobacteria) any source, with isolation and presumptive identification of isolates	1
87118	Culture, mycobacterial, definitive identification, each isolate	1
87140	Culture, typing; immunofluorescent method, each antiserum	1
87143	Culture, typing; gas liquid chromatography (GLC) or high pressure liquid chromatography (HPLC) method	1
87147	Culture, typing; immunologic method, other than immunofluorescence (eg, agglutination grouping), per antiserum	1
87149	Culture, typing; identification by nucleic acid (DNA or RNA) probe, direct probe technique, per culture or isolate, each organism probed	1
87150	Culture, typing; identification by nucleic acid (DNA or RNA) probe, amplified probe technique, per culture or isolate, each organism probed	1
87152	Culture, typing; identification by pulse field gel typing	1
87153	Culture, typing; identification by nucleic acid sequencing method, each isolate (eg, sequencing of the 16S rRNA gene)	1
87154	Culture, typing; identification of blood pathogen and resistance typing, when performed, by nucleic acid (DNA or RNA) probe, multiplexed amplified probe technique including multiplex reverse transcription, when performed, per culture or isolate, 6 or more targets	12
87158	Culture, typing; other methods	1
87164	Dark field examination, any source (eg, penile, vaginal, oral, skin); includes specimen collection	1
87168	Macroscopic examination; arthropod	2
87169	Macroscopic examination; parasite	2
87172	Pinworm exam (eg, cellophane tape prep)	1
87176	Homogenization, tissue, for culture	1

07177	Our and name ited direct among concentration and identification	1
87177	Ova and parasites, direct smears, concentration and identification	1
87181	Susceptibility studies, antimicrobial agent; agar dilution method, per agent (eg, antibiotic gradient strip)	12
87184	Susceptibility studies, antimicrobial agent; disk method, per plate (12 or fewer agents)	12
87185	Susceptibility studies, antimicrobial agent; enzyme detection (eg, beta lactamase), per enzyme	1
87186	Susceptibility studies, antimicrobial agent; microdilution or agar dilution (minimum inhibitory concentration [MIC] or breakpoint), each multi-antimicrobial, per plate	1
87187	Susceptibility studies, antimicrobial agent; microdilution or agar dilution, minimum lethal concentration (MLC), each plate (List separately in addition to code for primary procedure)	1
87188	Susceptibility studies, antimicrobial agent; macrobroth dilution method, each agent	12
87190	Susceptibility studies, antimicrobial agent; mycobacteria, proportion method, each agent	1
87197	Serum bactericidal titer (Schlichter test)	1
87206	Smear, primary source with interpretation; fluorescent and/or acid fast stain for bacteria, fungi, parasites, viruses or cell types	1
87209	Smear, primary source with interpretation; complex special stain (eg, trichrome, iron hemotoxylin) for ova and parasites	1
87220	Tissue examination by KOH slide of samples from skin, hair, or nails for fungi or ectoparasite ova or mites (eg, scabies)	1
87230	Toxin or antitoxin assay, tissue culture (eg, Clostridium difficile toxin)	1
87250	Virus isolation; inoculation of embryonated eggs, or small animal, includes observation and dissection	1
87252	Virus isolation; tissue culture inoculation, observation, and presumptive identification by cytopathic effect	1
87253	Virus isolation; tissue culture, additional studies or definitive identification (eg, hemabsorption, neutralization, immunofluorescence stain), each isolate	1
87254	Virus isolation; centrifuge enhanced (shell vial) technique, includes identification with immunofluorescence stain, each virus	1
87255	Virus isolation; including identification by non-immunologic method, other than by cytopathic effect (eg, virus specific enzymatic activity)	1
87260	Infectious agent antigen detection by immunofluorescent technique; adenovirus	1
87265	Infectious agent antigen detection by immunofluorescent technique; Bordetella pertussis/parapertussis	1
87267	Infectious agent antigen detection by immunofluorescent technique; Enterovirus, direct fluorescent antibody (DFA)	1
87269	Infectious agent antigen detection by immunofluorescent technique; giardia	1
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87270	Infectious agent antigen detection by immunofluorescent technique; Chlamydia trachomatis	1
87271	Infectious agent antigen detection by immunofluorescent technique; Cytomegalovirus, direct fluorescent antibody (DFA)	1
87272	Infectious agent antigen detection by immunofluorescent technique; cryptosporidium	1
87273	Infectious agent antigen detection by immunofluorescent technique; Herpes simplex virus type 2	1
87274	Infectious agent antigen detection by immunofluorescent technique; Herpes simplex virus type 1	1
87275	Infectious agent antigen detection by immunofluorescent technique; influenza B virus	1
87276	Infectious agent antigen detection by immunofluorescent technique; influenza A virus	1
87278	Infectious agent antigen detection by immunofluorescent technique; Legionella pneumophila	1
87279	Infectious agent antigen detection by immunofluorescent technique; Parainfluenza virus, each type	1
87280	Infectious agent antigen detection by immunofluorescent technique; respiratory syncytial virus	1
87281	Infectious agent antigen detection by immunofluorescent technique; Pneumocystis carinii	1
87283	Infectious agent antigen detection by immunofluorescent technique; Rubeola	1
87285	Infectious agent antigen detection by immunofluorescent technique; Treponema pallidum	1
87290	Infectious agent antigen detection by immunofluorescent technique; Varicella zoster virus	1
87299	Infectious agent antigen detection by immunofluorescent technique; not otherwise specified, each organism	1
87300	Infectious agent antigen detection by immunofluorescent technique, polyvalent for multiple organisms, each polyvalent antiserum	1
87301	Infectious agent antigen detection by immunoassay technique (eg, enzyme immunoassay [EIA], enzyme-linked immunosorbent assay [ELISA], fluorescence immunoassay [FIA], immunochemiluminometric assay [IMCA]), qualitative or semiquantitative; adenovirus enteric types 40/41	1
87320	Infectious agent antigen detection by immunoassay technique (eg, enzyme immunoassay [EIA], enzyme-linked immunosorbent assay [ELISA], fluorescence immunoassay [FIA], immunochemiluminometric assay [IMCA]), qualitative or semiquantitative; Chlamydia trachomatis	1
87324	Infectious agent antigen detection by immunoassay technique (eg, enzyme immunoassay [EIA], enzyme-linked immunosorbent assay [ELISA], fluorescence	2

	immunoassay [FIA], immunochemiluminometric assay [IMCA]), qualitative or semiquantitative; Clostridium difficile toxin(s)	
87327	Infectious agent antigen detection by immunoassay technique (eg, enzyme immunoassay [EIA], enzyme-linked immunosorbent assay [ELISA], fluorescence immunoassay [FIA], immunochemiluminometric assay [IMCA]), qualitative or semiquantitative; Cryptococcus neoformans	1
87328	Infectious agent antigen detection by immunoassay technique (eg, enzyme immunoassay [EIA], enzyme-linked immunosorbent assay [EISA], fluorescence immunoassay [FIA], immunochemiluminometric assay [IMCA]), qualitative or semiquantitative; cryptosporidium	2
87329	Infectious agent antigen detection by immunoassay technique (eg, enzyme immunoassay [EIA], enzyme-linked immunosorbent assay [EISA], fluorescence immunoassay [FIA], immunochemiluminometric assay [IMCA]), qualitative or semiquantitative; giardia	1
87332	Infectious agent antigen detection by immunoassay technique (eg, enzyme immunoassay [EIA], enzyme-linked immunosorbent assay [EISA], fluorescence immunoassay [FIA], immunochemiluminometric assay [IMCA]), qualitative or semiquantitative; cytomegalovirus	1
87335	Infectious agent antigen detection by immunoassay technique (eg, enzyme immunoassay [EIA], enzyme-linked immunosorbent assay [ELISA], fluorescence immunoassay [FIA], immunochemiluminometric assay [IMCA]), qualitative or semiquantitative; Escherichia coli 0157	1
87336	Infectious agent antigen detection by immunoassay technique (eg, enzyme immunoassay [EIA], enzyme-linked immunosorbent assay [ELISA], fluorescence immunoassay [FIA], immunochemiluminometric assay [IMCA]), qualitative or semiquantitative; Entamoeba histolytica dispar group	1
87337	Infectious agent antigen detection by immunoassay technique (eg, enzyme immunoassay [EIA], enzyme-linked immunosorbent assay [ELISA], fluorescence immunoassay [FIA], immunochemiluminometric assay [IMCA]), qualitative or semiquantitative; Entamoeba histolytica group	1
87338	Infectious agent antigen detection by immunoassay technique (eg, enzyme immunoassay [EIA], enzyme-linked immunosorbent assay [ELISA], fluorescence immunoassay [FIA], immunochemiluminometric assay [IMCA]), qualitative or semiquantitative; Helicobacter pylori, stool	1
87339	Infectious agent antigen detection by immunoassay technique (eg, enzyme immunoassay [EIA], enzyme-linked immunosorbent assay [ELISA], fluorescence immunoassay [FIA], immunochemiluminometric assay [IMCA]), qualitative or semiquantitative; Helicobacter pylori	1
87340	Infectious agent antigen detection by immunoassay technique (eg, enzyme immunoassay [EIA], enzyme-linked immunosorbent assay [ELISA], fluorescence immunoassay [FIA], immunochemiluminometric assay [IMCA]), qualitative or semiquantitative; hepatitis B surface antigen (HBsAg)	1
87341	Infectious agent antigen detection by immunoassay technique (eg, enzyme immunoassay [EIA], enzyme-linked immunosorbent assay [ELISA], fluorescence	1

	immunoassay [FIA], immunochemiluminometric assay [IMCA]), qualitative or semiquantitative; hepatitis B surface antigen (HBsAg) neutralization	
87350	Infectious agent antigen detection by immunoassay technique (eg, enzyme immunoassay [EIA], enzyme-linked immunosorbent assay [ELISA], fluorescence immunoassay [FIA], immunochemiluminometric assay [IMCA]), qualitative or semiquantitative; hepatitis Be antigen (HBeAg)	1
87380	Infectious agent antigen detection by immunoassay technique (eg, enzyme immunoassay [EIA], enzyme-linked immunosorbent assay [EISA], fluorescence immunoassay [FIA], immunochemiluminometric assay [IMCA]), qualitative or semiquantitative; hepatitis, delta agent	1
87385	Infectious agent antigen detection by immunoassay technique (eg, enzyme immunoassay [EIA], enzyme-linked immunosorbent assay [EISA], fluorescence immunoassay [FIA], immunochemiluminometric assay [IMCA]), qualitative or semiquantitative; Histoplasma capsulatum	2
87389	Infectious agent antigen detection by immunoassay technique (eg, enzyme immunoassay [EIA], enzyme-linked immunosorbent assay [EISA], fluorescence immunoassay [FIA], immunochemiluminometric assay [IMCA]), qualitative or semiquantitative; HIV-1 antigen(s), with HIV-1 and HIV-2 antibodies, single result	1
87390	Infectious agent antigen detection by immunoassay technique (eg, enzyme immunoassay [EIA], enzyme-linked immunosorbent assay [EISA], fluorescence immunoassay [FIA], immunochemiluminometric assay [IMCA]), qualitative or semiquantitative; HIV-1	1
87391	Infectious agent antigen detection by immunoassay technique (eg, enzyme immunoassay [EIA], enzyme-linked immunosorbent assay [ELISA], fluorescence immunoassay [FIA], immunochemiluminometric assay [IMCA]), qualitative or semiquantitative; HIV-2	1
87400	Infectious agent antigen detection by immunoassay technique (eg, enzyme immunoassay [EIA], enzyme-linked immunosorbent assay [ELISA], fluorescence immunoassay [FIA], immunochemiluminometric assay [IMCA]), qualitative or semiquantitative; Influenza, A or B, each	1
87420	Infectious agent antigen detection by immunoassay technique (eg, enzyme immunoassay [EIA], enzyme-linked immunosorbent assay [ELISA], fluorescence immunoassay [FIA], immunochemiluminometric assay [IMCA]), qualitative or semiquantitative; respiratory syncytial virus	1
87425	Infectious agent antigen detection by immunoassay technique (eg, enzyme immunoassay [EIA], enzyme-linked immunosorbent assay [ELISA], fluorescence immunoassay [FIA], immunochemiluminometric assay [IMCA]), qualitative or semiquantitative; rotavirus	1
87426	Infectious agent antigen detection by immunoassay technique (eg, enzyme immunoassay [EIA], enzyme-linked immunosorbent assay [EISA], fluorescence immunoassay [FIA], immunochemiluminometric assay [IMCA]), qualitative or semiquantitative; severe acute respiratory syndrome coronavirus (eg, SARS-CoV, SARS-CoV-2 [COVID-19])	1
87427	Infectious agent antigen detection by immunoassay technique (eg, enzyme immunoassay [EIA], enzyme-linked immunosorbent assay [ELISA], fluorescence	1

	immunoassay [FIA], immunochemiluminometric assay [IMCA]), qualitative or semiquantitative; Shiga-like toxin	
87428	Infectious agent antigen detection by immunoassay technique (eg, enzyme immunoassay [EIA], enzyme-linked immunosorbent assay [ELISA], fluorescence immunoassay [FIA], immunochemiluminometric assay [IMCA]), qualitative or semiquantitative; severe acute respiratory syndrome coronavirus (eg, SARS-CoV, SARS-CoV-2 [COVID-19]) and influenza virus types A and B	3
87430	Infectious agent antigen detection by immunoassay technique (eg, enzyme immunoassay [EIA], enzyme-linked immunosorbent assay [ELISA], fluorescence immunoassay [FIA], immunochemiluminometric assay [IMCA]), qualitative or semiquantitative; Streptococcus, group A	1
87449	Infectious agent antigen detection by immunoassay technique (eg, enzyme immunoassay [EIA], enzyme-linked immunosorbent assay [ELISA], fluorescence immunoassay [FIA], immunochemiluminometric assay [IMCA]), qualitative or semiquantitative; not otherwise specified, each organism	3
87450	Infectious agent antigen detection by immunoassay technique, (eg, enzyme immunoassay [EIA], enzyme-linked immunosorbent assay [ELISA], immunochemiluminometric assay [IMCA]), qualitative or semiquantitative; single-step method, not otherwise specified, each organism	2
87451	Infectious agent antigen detection by immunoassay technique (eg, enzyme immunoassay [EIA], enzyme-linked immunosorbent assay [EISA], fluorescence immunoassay [FIA], immunochemiluminometric assay [IMCA]), qualitative or semiquantitative; polyvalent for multiple organisms, each polyvalent antiserum	1
87471	Infectious agent detection by nucleic acid (DNA or RNA); Bartonella henselae and Bartonella quintana, amplified probe technique	2
87472	Infectious agent detection by nucleic acid (DNA or RNA); Bartonella henselae and Bartonella quintana, quantification	2
87475	Infectious agent detection by nucleic acid (DNA or RNA); Borrelia burgdorferi, direct probe technique	2
87476	Infectious agent detection by nucleic acid (DNA or RNA); Borrelia burgdorferi, amplified probe technique	2
87480	Infectious agent detection by nucleic acid (DNA or RNA); Candida species, direct probe technique	2
87481	Infectious agent detection by nucleic acid (DNA or RNA); Candida species, amplified probe technique	1
87482	Infectious agent detection by nucleic acid (DNA or RNA); Candida species, quantification	2
87483	Infectious agent detection by nucleic acid (DNA or RNA); central nervous system pathogen (eg, Neisseria meningitidis, Streptococcus pneumoniae, Listeria, Haemophilus influenzae, E. coli, Streptococcus agalactiae, enterovirus, human parechovirus, herpes simplex virus type 1 and 2, human herpesvirus 6, cytomegalovirus, varicella zoster virus, Cryptococcus), includes multiplex reverse transcription, when performed, and multiplex amplified probe technique, multiple types or subtypes, 12-25 targets	1

87485	Infectious agent detection by nucleic acid (DNA or RNA); Chlamydia pneumoniae, direct probe technique	2
87486	Infectious agent detection by nucleic acid (DNA or RNA); Chlamydia pneumoniae, amplified probe technique	2
87487	Infectious agent detection by nucleic acid (DNA or RNA); Chlamydia pneumoniae, quantification	2
87490	Infectious agent detection by nucleic acid (DNA or RNA); Chlamydia trachomatis, direct probe technique	2
87491	Infectious agent detection by nucleic acid (DNA or RNA); Chlamydia trachomatis, amplified probe technique	1
87492	Infectious agent detection by nucleic acid (DNA or RNA); Chlamydia trachomatis, quantification	2
87493	Infectious agent detection by nucleic acid (DNA or RNA); Clostridium difficile, toxin gene(s), amplified probe technique	1
87495	Infectious agent detection by nucleic acid (DNA or RNA); cytomegalovirus, direct probe technique	2
87496	Infectious agent detection by nucleic acid (DNA or RNA); cytomegalovirus, amplified probe technique	2
87497	Infectious agent detection by nucleic acid (DNA or RNA); cytomegalovirus, quantification	2
87500	Infectious agent detection by nucleic acid (DNA or RNA); vancomycin resistance (eg, enterococcus species van A, van B), amplified probe technique	1
87501	Infectious agent detection by nucleic acid (DNA or RNA); influenza virus, includes reverse transcription, when performed, and amplified probe technique, each type or subtype	1
87502	Infectious agent detection by nucleic acid (DNA or RNA); influenza virus, for multiple types or sub-types, includes multiplex reverse transcription, when performed, and multiplex amplified probe technique, first 2 types or sub-types	1
87503	Infectious agent detection by nucleic acid (DNA or RNA); influenza virus, for multiple types or sub-types, includes multiplex reverse transcription, when performed, and multiplex amplified probe technique, each additional influenza virus type or sub-type beyond 2 (List separately in addition to code for primary procedure)	1
87505	Infectious agent detection by nucleic acid (DNA or RNA); gastrointestinal pathogen (eg, Clostridium difficile, E. coli, Salmonella, Shigella, norovirus, Giardia), includes multiplex reverse transcription, when performed, and multiplex amplified probe technique, multiple types or subtypes, 3-5 targets	1
87506	Infectious agent detection by nucleic acid (DNA or RNA); gastrointestinal pathogen (eg, Clostridium difficile, E. coli, Salmonella, Shigella, norovirus, Giardia), includes multiplex reverse transcription, when performed, and multiplex amplified probe technique, multiple types or subtypes, 6-11 targets	1
87507	Infectious agent detection by nucleic acid (DNA or RNA); gastrointestinal pathogen (eg, Clostridium difficile, E. coli, Salmonella, Shigella, norovirus, Giardia), includes	1

	multiplex reverse transcription, when performed, and multiplex amplified probe technique, multiple types or subtypes, 12-25 targets	
87510	Infectious agent detection by nucleic acid (DNA or RNA); Gardnerella vaginalis, direct probe technique	1
87511	Infectious agent detection by nucleic acid (DNA or RNA); Gardnerella vaginalis, amplified probe technique	1
87512	Infectious agent detection by nucleic acid (DNA or RNA); Gardnerella vaginalis, quantification	1
87516	Infectious agent detection by nucleic acid (DNA or RNA); hepatitis B virus, amplified probe technique	1
87517	Infectious agent detection by nucleic acid (DNA or RNA); hepatitis B virus, quantification	1
87520	Infectious agent detection by nucleic acid (DNA or RNA); hepatitis C, direct probe technique	1
87521	Infectious agent detection by nucleic acid (DNA or RNA); hepatitis C, amplified probe technique, includes reverse transcription when performed	1
87522	Infectious agent detection by nucleic acid (DNA or RNA); hepatitis C, quantification, includes reverse transcription when performed	1
87525	Infectious agent detection by nucleic acid (DNA or RNA); hepatitis G, direct probe technique	1
87526	Infectious agent detection by nucleic acid (DNA or RNA); hepatitis G, amplified probe technique	1
87527	Infectious agent detection by nucleic acid (DNA or RNA); hepatitis G, quantification	1
87528	Infectious agent detection by nucleic acid (DNA or RNA); Herpes simplex virus, direct probe technique	1
87529	Infectious agent detection by nucleic acid (DNA or RNA); Herpes simplex virus, amplified probe technique	2
87530	Infectious agent detection by nucleic acid (DNA or RNA); Herpes simplex virus, quantification	2
87531	Infectious agent detection by nucleic acid (DNA or RNA); Herpes virus-6, direct probe technique	1
87532	Infectious agent detection by nucleic acid (DNA or RNA); Herpes virus-6, amplified probe technique	1
87533	Infectious agent detection by nucleic acid (DNA or RNA); Herpes virus-6, quantification	1
87534	Infectious agent detection by nucleic acid (DNA or RNA); HIV-1, direct probe technique	1
87535	Infectious agent detection by nucleic acid (DNA or RNA); HIV-1, amplified probe technique, includes reverse transcription when performed	1

87536	Infectious agent detection by nucleic acid (DNA or RNA); HIV-1, quantification, includes reverse transcription when performed	6
87537	Infectious agent detection by nucleic acid (DNA or RNA); HIV-2, direct probe technique	1
87538	Infectious agent detection by nucleic acid (DNA or RNA); HIV-2, amplified probe technique, includes reverse transcription when performed	1
87539	Infectious agent detection by nucleic acid (DNA or RNA); HIV-2, quantification, includes reverse transcription when performed	1
87540	Infectious agent detection by nucleic acid (DNA or RNA); Legionella pneumophila, direct probe technique	1
87541	Infectious agent detection by nucleic acid (DNA or RNA); Legionella pneumophila, amplified probe technique	1
87542	Infectious agent detection by nucleic acid (DNA or RNA); Legionella pneumophila, quantification	1
87550	Infectious agent detection by nucleic acid (DNA or RNA); Mycobacteria species, direct probe technique	1
87551	Infectious agent detection by nucleic acid (DNA or RNA); Mycobacteria species, amplified probe technique	2
87552	Infectious agent detection by nucleic acid (DNA or RNA); Mycobacteria species, quantification	1
87555	Infectious agent detection by nucleic acid (DNA or RNA); Mycobacteria tuberculosis, direct probe technique	1
87556	Infectious agent detection by nucleic acid (DNA or RNA); Mycobacteria tuberculosis, amplified probe technique	1
87557	Infectious agent detection by nucleic acid (DNA or RNA); Mycobacteria tuberculosis, quantification	1
87560	Infectious agent detection by nucleic acid (DNA or RNA); Mycobacteria avium- intracellulare, direct probe technique	1
87561	Infectious agent detection by nucleic acid (DNA or RNA); Mycobacteria avium- intracellulare, amplified probe technique	1
87562	Infectious agent detection by nucleic acid (DNA or RNA); Mycobacteria avium-intracellulare, quantification	1
87563	Infectious agent detection by nucleic acid (DNA or RNA); Mycoplasma genitalium, amplified probe technique	3
87580	Infectious agent detection by nucleic acid (DNA or RNA); Mycoplasma pneumoniae, direct probe technique	1
87581	Infectious agent detection by nucleic acid (DNA or RNA); Mycoplasma pneumoniae, amplified probe technique	1
87582	Infectious agent detection by nucleic acid (DNA or RNA); Mycoplasma pneumoniae, quantification	1

87590	Infectious agent detection by nucleic acid (DNA or RNA); Neisseria gonorrhoeae, direct probe technique	1
87591	Infectious agent detection by nucleic acid (DNA or RNA); Neisseria gonorrhoeae, amplified probe technique	1
87592	Infectious agent detection by nucleic acid (DNA or RNA); Neisseria gonorrhoeae, quantification	1
87623	Infectious agent detection by nucleic acid (DNA or RNA); Human Papillomavirus (HPV), low-risk types (eg, 6, 11, 42, 43, 44)	1
87624	Infectious agent detection by nucleic acid (DNA or RNA); Human Papillomavirus (HPV), high-risk types (eg, 16, 18, 31, 33, 35, 39, 45, 51, 52, 56, 58, 59, 68)	1
87625	Infectious agent detection by nucleic acid (DNA or RNA); Human Papillomavirus (HPV), types 16 and 18 only, includes type 45, if performed	1
87631	Infectious agent detection by nucleic acid (DNA or RNA); respiratory virus (eg, adenovirus, influenza virus, coronavirus, metapneumovirus, parainfluenza virus, respiratory syncytial virus, rhinovirus), includes multiplex reverse transcription, when performed, and multiplex amplified probe technique, multiple types or subtypes, 3-5 targets	1
87632	Infectious agent detection by nucleic acid (DNA or RNA); respiratory virus (eg, adenovirus, influenza virus, coronavirus, metapneumovirus, parainfluenza virus, respiratory syncytial virus, rhinovirus), includes multiplex reverse transcription, when performed, and multiplex amplified probe technique, multiple types or subtypes, 6-11 targets	1
87633	Infectious agent detection by nucleic acid (DNA or RNA); respiratory virus (eg, adenovirus, influenza virus, coronavirus, metapneumovirus, parainfluenza virus, respiratory syncytial virus, rhinovirus), includes multiplex reverse transcription, when performed, and multiplex amplified probe technique, multiple types or subtypes, 12-25 targets	1
87634	Infectious agent detection by nucleic acid (DNA or RNA); respiratory syncytial virus, amplified probe technique	1
87635	Infectious agent detection by nucleic acid (DNA or RNA); severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (coronavirus disease [COVID-19]), amplified probe technique	1
87636	Infectious agent detection by nucleic acid (DNA or RNA); severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (coronavirus disease [COVID-19]) and influenza virus types A and B, multiplex amplified probe technique	3
87637	Infectious agent detection by nucleic acid (DNA or RNA); severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (coronavirus disease [COVID-19]), influenza virus types A and B, and respiratory syncytial virus, multiplex amplified probe technique	3
87650	Infectious agent detection by nucleic acid (DNA or RNA); Streptococcus, group A, direct probe technique	1
87651	Infectious agent detection by nucleic acid (DNA or RNA); Streptococcus, group A, amplified probe technique	1

87652	Infectious agent detection by nucleic acid (DNA or RNA); Streptococcus, group A,	1
	quantification	
87660	Infectious agent detection by nucleic acid (DNA or RNA); Trichomonas vaginalis, direct probe technique	1
87661	Infectious agent detection by nucleic acid (DNA or RNA); Trichomonas vaginalis, amplified probe technique	1
87662	Infectious agent detection by nucleic acid (DNA or RNA); Zika virus, amplified probe technique	1
87797	Infectious agent detection by nucleic acid (DNA or RNA), not otherwise specified; direct probe technique, each organism	1
87798	Infectious agent detection by nucleic acid (DNA or RNA), not otherwise specified; amplified probe technique, each organism	36
87799	Infectious agent detection by nucleic acid (DNA or RNA), not otherwise specified; quantification, each organism	3
87800	Infectious agent detection by nucleic acid (DNA or RNA), multiple organisms; direct probe(s) technique	1
87801	Infectious agent detection by nucleic acid (DNA or RNA), multiple organisms; amplified probe(s) technique	1
87802	Infectious agent antigen detection by immunoassay with direct optical (ie, visual) observation; Streptococcus, group B	1
87803	Infectious agent antigen detection by immunoassay with direct optical (ie, visual) observation; Clostridium difficile toxin A	1
87804	Infectious agent antigen detection by immunoassay with direct optical (ie, visual) observation; Influenza	2
87806	Infectious agent antigen detection by immunoassay with direct optical (ie, visual) observation; HIV-1 antigen(s), with HIV-1 and HIV-2 antibodies	1
87807	Infectious agent antigen detection by immunoassay with direct optical (ie, visual) observation; respiratory syncytial virus	1
87809	Infectious agent antigen detection by immunoassay with direct optical (ie, visual) observation; adenovirus	1
87810	Infectious agent antigen detection by immunoassay with direct optical (ie, visual) observation; Chlamydia trachomatis	2
87811	Infectious agent antigen detection by immunoassay with direct optical (ie, visual) observation; severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (coronavirus disease [COVID-19])	1
87850	Infectious agent antigen detection by immunoassay with direct optical (ie, visual) observation; Neisseria gonorrhoeae	1
87880	Infectious agent antigen detection by immunoassay with direct optical (ie, visual) observation; Streptococcus, group A	1
87899	Infectious agent antigen detection by immunoassay with direct optical (ie, visual) observation; not otherwise specified	6

87900	Infectious agent drug susceptibility phenotype prediction using regularly updated genotypic bioinformatics	1
87901	Infectious agent genotype analysis by nucleic acid (DNA or RNA); HIV-1, reverse transcriptase and protease regions	1
87902	Infectious agent genotype analysis by nucleic acid (DNA or RNA); Hepatitis C virus	1
87903	Infectious agent phenotype analysis by nucleic acid (DNA or RNA) with drug resistance tissue culture analysis, HIV 1; first through 10 drugs tested	1
87904	Infectious agent phenotype analysis by nucleic acid (DNA or RNA) with drug resistance tissue culture analysis, HIV 1; each additional drug tested (List separately in addition to code for primary procedure)	1
87905	Infectious agent enzymatic activity other than virus (eg, sialidase activity in vaginal fluid)	1
87906	Infectious agent genotype analysis by nucleic acid (DNA or RNA); HIV-1, other region (eg, integrase, fusion)	1
87910	Infectious agent genotype analysis by nucleic acid (DNA or RNA); cytomegalovirus	1
87912	Infectious agent genotype analysis by nucleic acid (DNA or RNA); Hepatitis B virus	1
87999	Unlisted microbiology procedure	1
88000	Necropsy (autopsy), gross examination only; without CNS	1
88005	Necropsy (autopsy), gross examination only; with brain	1
88007	Necropsy (autopsy), gross examination only; with brain and spinal cord	1
88012	Necropsy (autopsy), gross examination only; infant with brain	1
88014	Necropsy (autopsy), gross examination only; stillborn or newborn with brain	4
88016	Necropsy (autopsy), gross examination only; macerated stillborn	4
88020	Necropsy (autopsy), gross and microscopic; without CNS	1
88025	Necropsy (autopsy), gross and microscopic; with brain	1
88027	Necropsy (autopsy), gross and microscopic; with brain and spinal cord	1
88028	Necropsy (autopsy), gross and microscopic; infant with brain	1
88029	Necropsy (autopsy), gross and microscopic; stillborn or newborn with brain	4
88036	Necropsy (autopsy), limited, gross and/or microscopic; regional	1
88037	Necropsy (autopsy), limited, gross and/or microscopic; single organ	1
88040	Necropsy (autopsy); forensic examination	1
88045	Necropsy (autopsy); coroner's call	1
88099	Unlisted necropsy (autopsy) procedure	1
88104	Cytopathology, fluids, washings or brushings, except cervical or vaginal; smears with interpretation	1
88106	Cytopathology, fluids, washings or brushings, except cervical or vaginal; simple filter method with interpretation	1

88108	Cytopathology, concentration technique, smears and interpretation (eg, Saccomanno technique)	1
88112	Cytopathology, selective cellular enhancement technique with interpretation (eg, liquid based slide preparation method), except cervical or vaginal	1
88120	Cytopathology, in situ hybridization (eg, FISH), urinary tract specimen with morphometric analysis, 3-5 molecular probes, each specimen; manual	1
88121	Cytopathology, in situ hybridization (eg, FISH), urinary tract specimen with morphometric analysis, 3-5 molecular probes, each specimen; using computer-assisted technology	1
88125	Cytopathology, forensic (eg, sperm)	1
88130	Sex chromatin identification; Barr bodies	1
88140	Sex chromatin identification; peripheral blood smear, polymorphonuclear drumsticks	1
88143	Cytopathology, cervical or vaginal (any reporting system), collected in preservative fluid, automated thin layer preparation; with manual screening and rescreening under physician supervision	1
88147	Cytopathology smears, cervical or vaginal; screening by automated system under physician supervision	1
88148	Cytopathology smears, cervical or vaginal; screening by automated system with manual rescreening under physician supervision	1
88150	Cytopathology, slides, cervical or vaginal; manual screening under physician supervision	1
88152	Cytopathology, slides, cervical or vaginal; with manual screening and computer- assisted rescreening under physician supervision	1
88153	Cytopathology, slides, cervical or vaginal; with manual screening and rescreening under physician supervision	1
88155	Cytopathology, slides, cervical or vaginal, definitive hormonal evaluation (eg, maturation index, karyopyknotic index, estrogenic index) (List separately in addition to code[s] for other technical and interpretation services)	1
88160	Cytopathology, smears, any other source; screening and interpretation	1
88162	Cytopathology, smears, any other source; extended study involving over 5 slides and/or multiple stains	1
88165	Cytopathology, slides, cervical or vaginal (the Bethesda System); with manual screening and rescreening under physician supervision	1
88166	Cytopathology, slides, cervical or vaginal (the Bethesda System); with manual screening and computer-assisted rescreening under physician supervision	1
88167	Cytopathology, slides, cervical or vaginal (the Bethesda System); with manual screening and computer-assisted rescreening using cell selection and review under physician supervision	1
88172	Cytopathology, evaluation of fine needle aspirate; immediate cytohistologic study to determine adequacy for diagnosis, first evaluation episode, each site	7

00173	Cotonath alam, and nation of the possible continues intermediate and second	-
88173	Cytopathology, evaluation of fine needle aspirate; interpretation and report	7
88174	Cytopathology, cervical or vaginal (any reporting system), collected in preservative fluid, automated thin layer preparation; screening by automated system, under physician supervision	1
88177	Cytopathology, evaluation of fine needle aspirate; immediate cytohistologic study to determine adequacy for diagnosis, each separate additional evaluation episode, same site (List separately in addition to code for primary procedure)	6
88182	Flow cytometry, cell cycle or DNA analysis	1
88184	Flow cytometry, cell surface, cytoplasmic, or nuclear marker, technical component only; first marker	1
88185	Flow cytometry, cell surface, cytoplasmic, or nuclear marker, technical component only; each additional marker (List separately in addition to code for first marker)	1
88187	Flow cytometry, interpretation; 2 to 8 markers	1
88188	Flow cytometry, interpretation; 9 to 15 markers	1
88189	Flow cytometry, interpretation; 16 or more markers	1
88199	Unlisted cytopathology procedure	1
88230	Tissue culture for non-neoplastic disorders; lymphocyte	1
88233	Tissue culture for non-neoplastic disorders; skin or other solid tissue biopsy	1
88235	Tissue culture for non-neoplastic disorders; amniotic fluid or chorionic villus cells	1
88237	Tissue culture for neoplastic disorders; bone marrow, blood cells	1
88239	Tissue culture for neoplastic disorders; solid tumor	1
88240	Cryopreservation, freezing and storage of cells, each cell line	3
88241	Thawing and expansion of frozen cells, each aliquot	3
88245	Chromosome analysis for breakage syndromes; baseline Sister Chromatid Exchange (SCE), 20-25 cells	1
88248	Chromosome analysis for breakage syndromes; baseline breakage, score 50-100 cells, count 20 cells, 2 karyotypes (eg, for ataxia telangiectasia, Fanconi anemia, fragile X)	1
88249	Chromosome analysis for breakage syndromes; score 100 cells, clastogen stress (eg, diepoxybutane, mitomycin C, ionizing radiation, UV radiation)	1
88261	Chromosome analysis; count 5 cells, 1 karyotype, with banding	1
88262	Chromosome analysis; count 15-20 cells, 2 karyotypes, with banding	1
88263	Chromosome analysis; count 45 cells for mosaicism, 2 karyotypes, with banding	1
88264	Chromosome analysis; analyze 20-25 cells	1
88267	Chromosome analysis, amniotic fluid or chorionic villus, count 15 cells, 1 karyotype, with banding	1
88269	Chromosome analysis, in situ for amniotic fluid cells, count cells from 6-12 colonies, 1 karyotype, with banding	1

88271	Molecular cytogenetics; DNA probe, each (eg, FISH)	16
88272	Molecular cytogenetics; chromosomal in situ hybridization, analyze 3-5 cells (eg, for derivatives and markers)	12
88273	Molecular cytogenetics; chromosomal in situ hybridization, analyze 10-30 cells (eg, for microdeletions)	3
88274	Molecular cytogenetics; interphase in situ hybridization, analyze 25-99 cells	5
88275	Molecular cytogenetics; interphase in situ hybridization, analyze 100-300 cells	12
88280	Chromosome analysis; additional karyotypes, each study	1
88283	Chromosome analysis; additional specialized banding technique (eg, NOR, C-banding)	1
88285	Chromosome analysis; additional cells counted, each study	1
88289	Chromosome analysis; additional high resolution study	1
88291	Cytogenetics and molecular cytogenetics, interpretation and report	1
88299	Unlisted cytogenetic study	1
88300	Level I - Surgical pathology, gross examination only	1
88302	Level II - Surgical pathology, gross and microscopic examination Appendix, incidental Fallopian tube, sterilization Fingers/toes, amputation, traumatic Foreskin, newborn Hernia sac, any location Hydrocele sac Nerve Skin, plastic repair Sympathetic ganglion Testis, castration Vaginal mucosa, incidental Vas deferens, sterilization	1
88304	Level III - Surgical pathology, gross and microscopic examination Abortion, induced Abscess Aneurysm - arterial/ventricular Anus, tag Appendix, other than incidental Artery, atheromatous plaque Bartholin's gland cyst Bone fragment(s), other than pathologic fracture Bursa/synovial cyst Carpal tunnel tissue Cartilage, shavings Cholesteatoma Colon, colostomy stoma Conjunctiva - biopsy/pterygium Cornea Diverticulum - esophagus/small intestine Dupuytren's contracture tissue Femoral head, other than fracture Fissure/fistula Foreskin, other than newborn Gallbladder Ganglion cyst Hematoma Hemorrhoids Hydatid of Morgagni Intervertebral disc Joint, loose body Meniscus Mucocele, salivary Neuroma - Morton's/traumatic Pilonidal cyst/sinus Polyps, inflammatory - nasal/sinusoidal Skin - cyst/tag/debridement Soft tissue, debridement Soft tissue, lipoma Spermatocele Tendon/tendon sheath Testicular appendage Thrombus or embolus Tonsil and/or adenoids Varicocele Vas deferens, other than sterilization Vein, varicosity	1

88305	Level IV - Surgical nathology gross and microscopic examination Abortion	2
003U3	Level IV - Surgical pathology, gross and microscopic examination Abortion - spontaneous/missed Artery, biopsy Bone marrow, biopsy Bone exostosis Brain/meninges, other than for tumor resection Breast, biopsy, not requiring microscopic evaluation of surgical margins Breast, reduction mammoplasty Bronchus, biopsy Cell block, any source Cervix, biopsy Colon, biopsy Duodenum, biopsy Endocervix, curettings/biopsy Endometrium, curettings/biopsy Esophagus, biopsy Extremity, amputation, traumatic Fallopian tube, biopsy Fallopian tube, ectopic pregnancy Femoral head, fracture Fingers/toes, amputation, non-traumatic Gingiva/oral mucosa, biopsy Heart valve Joint, resection Kidney, biopsy Larynx, biopsy Leiomyoma(s), uterine myomectomy - without uterus Lip, biopsy/wedge resection Lung, transbronchial biopsy Lymph node, biopsy Muscle, biopsy Nasal mucosa, biopsy Nasopharynx/oropharynx, biopsy Nerve, biopsy Odontogenic/dental cyst Omentum, biopsy Ovary with or without tube, non-neoplastic Ovary, biopsy/wedge resection Parathyroid gland Peritoneum, biopsy Pituitary tumor Placenta, other than third trimester Pleura/pericardium - biopsy/tissue Polyp, cervical/endometrial Polyp, colorectal Polyp, stomach/small intestine Prostate, needle biopsy Prostate, TUR Salivary gland, biopsy Sinus, paranasal biopsy Skin, other than cyst/tag/debridement/plastic repair Small intestine, biopsy Synovium Testis, other than tumor/mass/lipoma/debridement Spleen Stomach, biopsy Synovium Testis, other than tumor/biopsy/castration Thyroglossal duct/brachial cleft cyst Tongue, biopsy Tonsil, biopsy Trachea, biopsy Ureter, biopsy Urethra, biopsy Urinary bladder, biopsy Uterus, with or without tubes and ovaries, for prolapse Vagina, biopsy Vulva/labia, biopsy	2
88307	Level V - Surgical pathology, gross and microscopic examination Adrenal, resection Bone - biopsy/curettings Bone fragment(s), pathologic fracture Brain, biopsy Brain/meninges, tumor resection Breast, excision of lesion, requiring microscopic evaluation of surgical margins Breast, mastectomy - partial/simple Cervix, conization Colon, segmental resection, other than for tumor Extremity, amputation, non-traumatic Eye, enucleation Kidney, partial/total nephrectomy Larynx, partial/total resection Liver, biopsy - needle/wedge Liver, partial resection Lung, wedge biopsy Lymph nodes, regional resection Mediastinum, mass Myocardium, biopsy Odontogenic tumor Ovary with or without tube, neoplastic Pancreas, biopsy Placenta, third trimester Prostate, except radical resection Salivary gland Sentinel lymph node Small intestine, resection, other than for tumor Soft tissue mass (except lipoma) - biopsy/simple excision Stomach - subtotal/total resection, other than for tumor Testis, biopsy Thymus, tumor Thyroid, total/lobe Ureter, resection Urinary bladder, TUR Uterus, with or without tubes and ovaries, other than neoplastic/prolapse	1
88309	Level VI - Surgical pathology, gross and microscopic examination Bone resection Breast, mastectomy - with regional lymph nodes Colon, segmental resection for tumor Colon, total resection Esophagus, partial/total resection Extremity, disarticulation Fetus, with dissection Larynx, partial/total resection - with regional lymph nodes Lung - total/lobe/segment resection Pancreas, total/subtotal resection Prostate, radical resection Small intestine, resection for tumor Soft tissue tumor, extensive resection Stomach - subtotal/total resection for tumor Testis, tumor Tongue/tonsil -resection for tumor Urinary bladder, partial/total resection Uterus, with or without tubes and ovaries, neoplastic Vulva, total/subtotal resection	1
88311	Decalcification procedure (List separately in addition to code for surgical pathology examination)	1

88312	Special stain including interpretation and report; Group I for microorganisms (eg, acid fast, methenamine silver)	1
88313	Special stain including interpretation and report; Group II, all other (eg, iron, trichrome), except stain for microorganisms, stains for enzyme constituents, or immunocytochemistry and immunohistochemistry	1
88314	Special stain including interpretation and report; histochemical stain on frozen tissue block (List separately in addition to code for primary procedure)	1
88319	Special stain including interpretation and report; Group III, for enzyme constituents	1
88321	Consultation and report on referred slides prepared elsewhere	1
88323	Consultation and report on referred material requiring preparation of slides	1
88325	Consultation, comprehensive, with review of records and specimens, with report on referred material	1
88329	Pathology consultation during surgery	1
88331	Pathology consultation during surgery; first tissue block, with frozen section(s), single specimen	1
88332	Pathology consultation during surgery; each additional tissue block with frozen section(s) (List separately in addition to code for primary procedure)	1
88333	Pathology consultation during surgery; cytologic examination (eg, touch prep, squash prep), initial site	1
88334	Pathology consultation during surgery; cytologic examination (eg, touch prep, squash prep), each additional site (List separately in addition to code for primary procedure)	1
88341	Immunohistochemistry or immunocytochemistry, per specimen; each additional single antibody stain procedure (List separately in addition to code for primary procedure)	1
88342	Immunohistochemistry or immunocytochemistry, per specimen; initial single antibody stain procedure	1
88344	Immunohistochemistry or immunocytochemistry, per specimen; each multiplex antibody stain procedure	1
88346	Immunofluorescence, per specimen; initial single antibody stain procedure	1
88348	Electron microscopy, diagnostic	1
88350	Immunofluorescence, per specimen; each additional single antibody stain procedure (List separately in addition to code for primary procedure)	4
88355	Morphometric analysis; skeletal muscle	1
88356	Morphometric analysis; nerve	1
88358	Morphometric analysis; tumor (eg, DNA ploidy)	1
88360	Morphometric analysis, tumor immunohistochemistry (eg, Her-2/neu, estrogen receptor/progesterone receptor), quantitative or semiquantitative, per specimen, each single antibody stain procedure; manual	1

88361	Morphometric analysis, tumor immunohistochemistry (eg, Her-2/neu, estrogen receptor/progesterone receptor), quantitative or semiquantitative, per specimen, each single antibody stain procedure; using computer-assisted technology	1
88362	Nerve teasing preparations	1
88363	Examination and selection of retrieved archival (ie, previously diagnosed) tissue(s) for molecular analysis (eg, KRAS mutational analysis)	1
88364	In situ hybridization (eg, FISH), per specimen; each additional single probe stain procedure (List separately in addition to code for primary procedure)	1
88365	In situ hybridization (eg, FISH), per specimen; initial single probe stain procedure	1
88366	In situ hybridization (eg, FISH), per specimen; each multiplex probe stain procedure	1
88367	Morphometric analysis, in situ hybridization (quantitative or semi-quantitative), using computer-assisted technology, per specimen; initial single probe stain procedure	1
88368	Morphometric analysis, in situ hybridization (quantitative or semi-quantitative), manual, per specimen; initial single probe stain procedure	1
88369	Morphometric analysis, in situ hybridization (quantitative or semi-quantitative), manual, per specimen; each additional single probe stain procedure (List separately in addition to code for primary procedure)	1
88371	Protein analysis of tissue by Western Blot, with interpretation and report	1
88372	Protein analysis of tissue by Western Blot, with interpretation and report; immunological probe for band identification, each	1
88373	Morphometric analysis, in situ hybridization (quantitative or semi-quantitative), using computer-assisted technology, per specimen; each additional single probe stain procedure (List separately in addition to code for primary procedure)	1
88374	Morphometric analysis, in situ hybridization (quantitative or semi-quantitative), using computer-assisted technology, per specimen; each multiplex probe stain procedure	1
88375	Optical endomicroscopic image(s), interpretation and report, real-time or referred, each endoscopic session	1
88377	Morphometric analysis, in situ hybridization (quantitative or semi-quantitative), manual, per specimen; each multiplex probe stain procedure	1
88380	Microdissection (ie, sample preparation of microscopically identified target); laser capture	1
88381	Microdissection (ie, sample preparation of microscopically identified target); manual	1
88387	Macroscopic examination, dissection, and preparation of tissue for non-microscopic analytical studies (eg, nucleic acid-based molecular studies); each tissue preparation (eg, a single lymph node)	1
88388	Macroscopic examination, dissection, and preparation of tissue for non-microscopic analytical studies (eg, nucleic acid-based molecular studies); in conjunction with a touch imprint, intraoperative consultation, or frozen section, each tissue	1

	preparation (eg, a single lymph node) (List separately in addition to code for primary procedure)	
88399	Unlisted surgical pathology procedure	1
88720	Bilirubin, total, transcutaneous	1
88738	Hemoglobin (Hgb), quantitative, transcutaneous	1
88740	Hemoglobin, quantitative, transcutaneous, per day; carboxyhemoglobin	1
88741	Hemoglobin, quantitative, transcutaneous, per day; methemoglobin	1
88749	Unlisted in vivo (eg, transcutaneous) laboratory service	1
89049	Caffeine halothane contracture test (CHCT) for malignant hyperthermia susceptibility, including interpretation and report	1
89050	Cell count, miscellaneous body fluids (eg, cerebrospinal fluid, joint fluid), except blood	1
89051	Cell count, miscellaneous body fluids (eg, cerebrospinal fluid, joint fluid), except blood; with differential count	1
89055	Leukocyte assessment, fecal, qualitative or semiquantitative	1
89060	Crystal identification by light microscopy with or without polarizing lens analysis, tissue or any body fluid (except urine)	1
89125	Fat stain, feces, urine, or respiratory secretions	1
89160	Meat fibers, feces	1
89190	Nasal smear for eosinophils	1
89220	Sputum, obtaining specimen, aerosol induced technique (separate procedure)	1
89230	Sweat collection by iontophoresis	1
89240	Unlisted miscellaneous pathology test	1
89250	Culture of oocyte(s)/embryo(s), less than 4 days	1
89251	Culture of oocyte(s)/embryo(s), less than 4 days; with co-culture of oocyte(s)/embryos	1
89253	Assisted embryo hatching, microtechniques (any method)	1
89254	Oocyte identification from follicular fluid	1
89255	Preparation of embryo for transfer (any method)	1
89257	Sperm identification from aspiration (other than seminal fluid)	1
89258	Cryopreservation; embryo(s)	1
89259	Cryopreservation; sperm	1
89260	Sperm isolation; simple prep (eg, sperm wash and swim-up) for insemination or diagnosis with semen analysis	1
89261	Sperm isolation; complex prep (eg, Percoll gradient, albumin gradient) for insemination or diagnosis with semen analysis	1

89264	Sperm identification from testis tissue, fresh or cryopreserved	1
89268	Insemination of oocytes	1
89272	Extended culture of oocyte(s)/embryo(s), 4-7 days	1
89280	Assisted oocyte fertilization, microtechnique; less than or equal to 10 oocytes	1
89281	Assisted oocyte fertilization, microtechnique; greater than 10 oocytes	1
89290	Biopsy, oocyte polar body or embryo blastomere, microtechnique (for pre- implantation genetic diagnosis); less than or equal to 5 embryos	1
89291	Biopsy, oocyte polar body or embryo blastomere, microtechnique (for pre- implantation genetic diagnosis); greater than 5 embryos	1
89300	Semen analysis; presence and/or motility of sperm including Huhner test (post coital)	1
89310	Semen analysis; motility and count (not including Huhner test)	1
89320	Semen analysis; volume, count, motility, and differential	1
89321	Semen analysis; sperm presence and motility of sperm, if performed	1
89322	Semen analysis; volume, count, motility, and differential using strict morphologic criteria (eg, Kruger)	1
89325	Sperm antibodies	1
89329	Sperm evaluation; hamster penetration test	1
89330	Sperm evaluation; cervical mucus penetration test, with or without spinnbarkeit test	1
89331	Sperm evaluation, for retrograde ejaculation, urine (sperm concentration, motility, and morphology, as indicated)	1
89335	Cryopreservation, reproductive tissue, testicular	1
89337	Cryopreservation, mature oocyte(s)	1
89342	Storage (per year); embryo(s)	1
89343	Storage (per year); sperm/semen	1
89344	Storage (per year); reproductive tissue, testicular/ovarian	1
89346	Storage (per year); oocyte(s)	1
89352	Thawing of cryopreserved; embryo(s)	1
89353	Thawing of cryopreserved; sperm/semen, each aliquot	1
89354	Thawing of cryopreserved; reproductive tissue, testicular/ovarian	1
89356	Thawing of cryopreserved; oocytes, each aliquot	2
89398	Unlisted reproductive medicine laboratory procedure	1
90281	Immune globulin (Ig), human, for intramuscular use	1
90283	Immune globulin (IgIV), human, for intravenous use	1
90287	Botulinum antitoxin, equine, any route	1

90288	Botulism immune globulin, human, for intravenous use	1
90291	Cytomegalovirus immune globulin (CMV-IgIV), human, for intravenous use	999
90296	Diphtheria antitoxin, equine, any route	1
90371	Hepatitis B immune globulin (HBIg), human, for intramuscular use	1
90375	Rabies immune globulin (RIg), human, for intramuscular and/or subcutaneous use	1
90376	Rabies immune globulin, heat-treated (RIg-HT), human, for intramuscular and/or subcutaneous use	1
90377	Rabies immune globulin, heat- and solvent/detergent-treated (RIg-HT S/D), human, for intramuscular and/or subcutaneous use	20
90378	Respiratory syncytial virus, monoclonal antibody, recombinant, for intramuscular use, 50 mg, each	1
90384	Rho(D) immune globulin (RhIg), human, full-dose, for intramuscular use	1
90385	Rho(D) immune globulin (Rhlg), human, mini-dose, for intramuscular use	1
90386	Rho(D) immune globulin (RhlgIV), human, for intravenous use	1
90389	Tetanus immune globulin (TIg), human, for intramuscular use	1
90393	Vaccinia immune globulin, human, for intramuscular use	1
90396	Varicella-zoster immune globulin, human, for intramuscular use	1
90399	Unlisted immune globulin	1
90460	Immunization administration through 18 years of age via any route of administration, with counseling by physician or other qualified health care professional; first or only component of each vaccine or toxoid administered	9
90461	Immunization administration through 18 years of age via any route of administration, with counseling by physician or other qualified health care professional; each additional vaccine or toxoid component administered (List separately in addition to code for primary procedure)	8
90471	Immunization administration (includes percutaneous, intradermal, subcutaneous, or intramuscular injections); 1 vaccine (single or combination vaccine/toxoid)	1
90472	Immunization administration (includes percutaneous, intradermal, subcutaneous, or intramuscular injections); each additional vaccine (single or combination vaccine/toxoid) (List separately in addition to code for primary procedure)	3
90473	Immunization administration by intranasal or oral route; 1 vaccine (single or combination vaccine/toxoid)	1
90474	Immunization administration by intranasal or oral route; each additional vaccine (single or combination vaccine/toxoid) (List separately in addition to code for primary procedure)	1
90476	Adenovirus vaccine, type 4, live, for oral use	1
90477	Adenovirus vaccine, type 7, live, for oral use	1
90581	Anthrax vaccine, for subcutaneous or intramuscular use	1
90585	Bacillus Calmette-Guerin vaccine (BCG) for tuberculosis, live, for percutaneous use	1

90586	Bacillus Calmette-Guerin vaccine (BCG) for bladder cancer, live, for intravesical use	1
90587	Dengue vaccine, quadrivalent, live, 3 dose schedule, for subcutaneous use	1
90619	Meningococcal conjugate vaccine, serogroups A, C, W, Y, quadrivalent, tetanus toxoid carrier (MenACWY-TT), for intramuscular use	1
90620	Meningococcal recombinant protein and outer membrane vesicle vaccine, serogroup B (MenB-4C), 2 dose schedule, for intramuscular use	1
90621	Meningococcal recombinant lipoprotein vaccine, serogroup B (MenB-FHbp), 2 or 3 dose schedule, for intramuscular use	1
90625	Cholera vaccine, live, adult dosage, 1 dose schedule, for oral use	1
90626	Tick-borne encephalitis virus vaccine, inactivated; 0.25 mL dosage, for intramuscular use	1
90627	Tick-borne encephalitis virus vaccine, inactivated; 0.5 mL dosage, for intramuscular use	1
90630	Influenza virus vaccine, quadrivalent (IIV4), split virus, preservative free, for intradermal use	1
90632	Hepatitis A vaccine (HepA), adult dosage, for intramuscular use	1
90633	Hepatitis A vaccine (HepA), pediatric/adolescent dosage-2 dose schedule, for intramuscular use	1
90634	Hepatitis A vaccine (HepA), pediatric/adolescent dosage-3 dose schedule, for intramuscular use	1
90636	Hepatitis A and hepatitis B vaccine (HepA-HepB), adult dosage, for intramuscular use	1
90644	Meningococcal conjugate vaccine, serogroups C & Y and Haemophilus influenzae type b vaccine (Hib-MenCY), 4 dose schedule, when administered to children 6 weeks-18 months of age, for intramuscular use	1
90647	Haemophilus influenzae type b vaccine (Hib), PRP-OMP conjugate, 3 dose schedule, for intramuscular use	1
90648	Haemophilus influenzae type b vaccine (Hib), PRP-T conjugate, 4 dose schedule, for intramuscular use	1
90649	Human Papillomavirus vaccine, types 6, 11, 16, 18, quadrivalent (4vHPV), 3 dose schedule, for intramuscular use	3
90650	Human Papillomavirus vaccine, types 16, 18, bivalent (2vHPV), 3 dose schedule, for intramuscular use	1
90651	Human Papillomavirus vaccine types 6, 11, 16, 18, 31, 33, 45, 52, 58, nonavalent (9vHPV), 2 or 3 dose schedule, for intramuscular use	1
90653	Influenza vaccine, inactivated (IIV), subunit, adjuvanted, for intramuscular use	1
90654	Influenza virus vaccine, trivalent (IIV3), split virus, preservative-free, for intradermal use	1
90655	Influenza virus vaccine, trivalent (IIV3), split virus, preservative free, 0.25 mL dosage, for intramuscular use	1

90656	Influenza virus vaccine, trivalent (IIV3), split virus, preservative free, 0.5 mL dosage, for intramuscular use	1
90657	Influenza virus vaccine, trivalent (IIV3), split virus, 0.25 mL dosage, for intramuscular use	1
90658	Influenza virus vaccine, trivalent (IIV3), split virus, 0.5 mL dosage, for intramuscular use	1
90660	Influenza virus vaccine, trivalent, live (LAIV3), for intranasal use	1
90661	Influenza virus vaccine, trivalent (ccIIV3), derived from cell cultures, subunit, preservative and antibiotic free, 0.5 mL dosage, for intramuscular use	1
90662	Influenza virus vaccine (IIV), split virus, preservative free, enhanced immunogenicity via increased antigen content, for intramuscular use	1
90664	Influenza virus vaccine, live (LAIV), pandemic formulation, for intranasal use	1
90666	Influenza virus vaccine (IIV), pandemic formulation, split virus, preservative free, for intramuscular use	1
90667	Influenza virus vaccine (IIV), pandemic formulation, split virus, adjuvanted, for intramuscular use	1
90668	Influenza virus vaccine (IIV), pandemic formulation, split virus, for intramuscular use	1
90670	Pneumococcal conjugate vaccine, 13 valent (PCV13), for intramuscular use	1
90671	Pneumococcal conjugate vaccine, 15 valent (PCV15), for intramuscular use	1
90672	Influenza virus vaccine, quadrivalent, live (LAIV4), for intranasal use	1
90673	Influenza virus vaccine, trivalent (RIV3), derived from recombinant DNA, hemagglutinin (HA) protein only, preservative and antibiotic free, for intramuscular use	1
90674	Influenza virus vaccine, quadrivalent (ccIIV4), derived from cell cultures, subunit, preservative and antibiotic free, 0.5 mL dosage, for intramuscular use	1
90675	Rabies vaccine, for intramuscular use	1
90676	Rabies vaccine, for intradermal use	1
90677	Pneumococcal conjugate vaccine, 20 valent (PCV20), for intramuscular use	1
90680	Rotavirus vaccine, pentavalent (RV5), 3 dose schedule, live, for oral use	1
90681	Rotavirus vaccine, human, attenuated (RV1), 2 dose schedule, live, for oral use	1
90682	Influenza virus vaccine, quadrivalent (RIV4), derived from recombinant DNA, hemagglutinin (HA) protein only, preservative and antibiotic free, for intramuscular use	1
90685	Influenza virus vaccine, quadrivalent (IIV4), split virus, preservative free, 0.25 mL dosage, for intramuscular use	1
90686	Influenza virus vaccine, quadrivalent (IIV4), split virus, preservative free, 0.5 mL dosage, for intramuscular use	1
90687	Influenza virus vaccine, quadrivalent (IIV4), split virus, 0.25 mL dosage, for intramuscular use	1

90688	Influenza virus vaccine, quadrivalent (IIV4), split virus, 0.5 mL dosage, for intramuscular use	1
90689	Influenza virus vaccine, quadrivalent (IIV4), inactivated, adjuvanted, preservative free, 0.25 mL dosage, for intramuscular use	1
90690	Typhoid vaccine, live, oral	1
90691	Typhoid vaccine, Vi capsular polysaccharide (ViCPs), for intramuscular use	1
90694	Influenza virus vaccine, quadrivalent (allV4), inactivated, adjuvanted, preservative free, 0.5 mL dosage, for intramuscular use	1
90696	Diphtheria, tetanus toxoids, acellular pertussis vaccine and inactivated poliovirus vaccine (DTaP-IPV), when administered to children 4 through 6 years of age, for intramuscular use	1
90697	Diphtheria, tetanus toxoids, acellular pertussis vaccine, inactivated poliovirus vaccine, Haemophilus influenzae type b PRP-OMP conjugate vaccine, and hepatitis B vaccine (DTaP-IPV-Hib-HepB), for intramuscular use	1
90698	Diphtheria, tetanus toxoids, acellular pertussis vaccine, Haemophilus influenzae type b, and inactivated poliovirus vaccine, (DTaP-IPV/Hib), for intramuscular use	1
90700	Diphtheria, tetanus toxoids, and acellular pertussis vaccine (DTaP), when administered to individuals younger than 7 years, for intramuscular use	1
90702	Diphtheria and tetanus toxoids adsorbed (DT) when administered to individuals younger than 7 years, for intramuscular use	1
90707	Measles, mumps and rubella virus vaccine (MMR), live, for subcutaneous use	1
90710	Measles, mumps, rubella, and varicella vaccine (MMRV), live, for subcutaneous use	1
90713	Poliovirus vaccine, inactivated (IPV), for subcutaneous or intramuscular use	1
90714	Tetanus and diphtheria toxoids adsorbed (Td), preservative free, when administered to individuals 7 years or older, for intramuscular use	1
90715	Tetanus, diphtheria toxoids and acellular pertussis vaccine (Tdap), when administered to individuals 7 years or older, for intramuscular use	1
90716	Varicella virus vaccine (VAR), live, for subcutaneous use	1
90717	Yellow fever vaccine, live, for subcutaneous use	1
90723	Diphtheria, tetanus toxoids, acellular pertussis vaccine, hepatitis B, and inactivated poliovirus vaccine (DTaP-HepB-IPV), for intramuscular use	1
90732	Pneumococcal polysaccharide vaccine, 23-valent (PPSV23), adult or immunosuppressed patient dosage, when administered to individuals 2 years or older, for subcutaneous or intramuscular use	1
90733	Meningococcal polysaccharide vaccine, serogroups A, C, Y, W-135, quadrivalent (MPSV4), for subcutaneous use	1
90734	Meningococcal conjugate vaccine, serogroups A, C, W, Y, quadrivalent, diphtheria toxoid carrier (MenACWY-D) or CRM197 carrier (MenACWY-CRM), for intramuscular use	1
90736	Zoster (shingles) vaccine (HZV), live, for subcutaneous injection	1

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90738	Japanese encephalitis virus vaccine, inactivated, for intramuscular use	1
90739	Hepatitis B vaccine (HepB), adult dosage, 2 dose schedule, for intramuscular use	1
90740	Hepatitis B vaccine (HepB), dialysis or immunosuppressed patient dosage, 3 dose schedule, for intramuscular use	1
90743	Hepatitis B vaccine (HepB), adolescent, 2 dose schedule, for intramuscular use	1
90744	Hepatitis B vaccine (HepB), pediatric/adolescent dosage, 3 dose schedule, for intramuscular use	1
90746	Hepatitis B vaccine (HepB), adult dosage, 3 dose schedule, for intramuscular use	1
90747	Hepatitis B vaccine (HepB), dialysis or immunosuppressed patient dosage, 4 dose schedule, for intramuscular use	1
90748	Hepatitis B and Haemophilus influenzae type b vaccine (Hib-HepB), for intramuscular use	1
90749	Unlisted vaccine/toxoid	1
90750	Zoster (shingles) vaccine (HZV), recombinant, subunit, adjuvanted, for intramuscular use	1
90756	Influenza virus vaccine, quadrivalent (ccIIV4), derived from cell cultures, subunit, antibiotic free, 0.5 mL dosage, for intramuscular use	1
90758	Zaire ebolavirus vaccine, live, for intramuscular use	1
90759	Hepatitis B vaccine (HepB), 3-antigen (S, Pre-S1, Pre-S2), 10 mcg dosage, 3 dose schedule, for intramuscular use	1
90785	Interactive complexity (List separately in addition to the code for primary procedure)	3
90791	Psychiatric diagnostic evaluation	6
90792	Psychiatric diagnostic evaluation with medical services	2
90832	Psychotherapy, 30 minutes with patient	16
90833	Psychotherapy, 30 minutes with patient when performed with an evaluation and management service (List separately in addition to the code for primary procedure)	3
90834	Psychotherapy, 45 minutes with patient	10
90836	Psychotherapy, 45 minutes with patient when performed with an evaluation and management service (List separately in addition to the code for primary procedure)	3
90837	Psychotherapy, 60 minutes with patient	8
90838	Psychotherapy, 60 minutes with patient when performed with an evaluation and management service (List separately in addition to the code for primary procedure)	3
90839	Psychotherapy for crisis; first 60 minutes	1
90840	Psychotherapy for crisis; each additional 30 minutes (List separately in addition to code for primary service)	4
90845	Psychoanalysis	1
90846	Family psychotherapy (without the patient present), 50 minutes	2

90847	Family psychotherapy (conjoint psychotherapy) (with patient present), 50 minutes	2
90849	Multiple-family group psychotherapy	2
90853	Group psychotherapy (other than of a multiple-family group)	32
90863	Pharmacologic management, including prescription and review of medication, when performed with psychotherapy services (List separately in addition to the code for primary procedure)	1
90865	Narcosynthesis for psychiatric diagnostic and therapeutic purposes (eg, sodium amobarbital (Amytal) interview)	1
90867	Therapeutic repetitive transcranial magnetic stimulation (TMS) treatment; initial, including cortical mapping, motor threshold determination, delivery and management	1
90868	Therapeutic repetitive transcranial magnetic stimulation (TMS) treatment; subsequent delivery and management, per session	1
90869	Therapeutic repetitive transcranial magnetic stimulation (TMS) treatment; subsequent motor threshold re-determination with delivery and management	1
90870	Electroconvulsive therapy (includes necessary monitoring)	1
90875	Individual psychophysiological therapy incorporating biofeedback training by any modality (face-to-face with the patient), with psychotherapy (eg, insight oriented, behavior modifying or supportive psychotherapy); 30 minutes	1
90876	Individual psychophysiological therapy incorporating biofeedback training by any modality (face-to-face with the patient), with psychotherapy (eg, insight oriented, behavior modifying or supportive psychotherapy); 45 minutes	1
90880	Hypnotherapy	1
90882	Environmental intervention for medical management purposes on a psychiatric patient's behalf with agencies, employers, or institutions	1
90885	Psychiatric evaluation of hospital records, other psychiatric reports, psychometric and/or projective tests, and other accumulated data for medical diagnostic purposes	1
90887	Interpretation or explanation of results of psychiatric, other medical examinations and procedures, or other accumulated data to family or other responsible persons, or advising them how to assist patient	1
90889	Preparation of report of patient's psychiatric status, history, treatment, or progress (other than for legal or consultative purposes) for other individuals, agencies, or insurance carriers	1
90899	Unlisted psychiatric service or procedure	1
90901	Biofeedback training by any modality	1
90912	Biofeedback training, perineal muscles, anorectal or urethral sphincter, including EMG and/or manometry, when performed; initial 15 minutes of one-on-one physician or other qualified health care professional contact with the patient	1
90913	Biofeedback training, perineal muscles, anorectal or urethral sphincter, including EMG and/or manometry, when performed; each additional 15 minutes of one-on-	3

	one physician or other qualified health care professional contact with the patient (List separately in addition to code for primary procedure)	
90935	Hemodialysis procedure with single evaluation by a physician or other qualified health care professional	1
90937	Hemodialysis procedure requiring repeated evaluation(s) with or without substantial revision of dialysis prescription	1
90940	Hemodialysis access flow study to determine blood flow in grafts and arteriovenous fistulae by an indicator method	1
90945	Dialysis procedure other than hemodialysis (eg, peritoneal dialysis, hemofiltration, or other continuous renal replacement therapies), with single evaluation by a physician or other qualified health care professional	1
90947	Dialysis procedure other than hemodialysis (eg, peritoneal dialysis, hemofiltration, or other continuous renal replacement therapies) requiring repeated evaluations by a physician or other qualified health care professional, with or without substantial revision of dialysis prescription	1
90951	End-stage renal disease (ESRD) related services monthly, for patients younger than 2 years of age to include monitoring for the adequacy of nutrition, assessment of growth and development, and counseling of parents; with 4 or more face-to-face visits by a physician or other qualified health care professional per month	1
90952	End-stage renal disease (ESRD) related services monthly, for patients younger than 2 years of age to include monitoring for the adequacy of nutrition, assessment of growth and development, and counseling of parents; with 2-3 face-to-face visits by a physician or other qualified health care professional per month	1
90953	End-stage renal disease (ESRD) related services monthly, for patients younger than 2 years of age to include monitoring for the adequacy of nutrition, assessment of growth and development, and counseling of parents; with 1 face-to-face visit by a physician or other qualified health care professional per month	1
90954	End-stage renal disease (ESRD) related services monthly, for patients 2-11 years of age to include monitoring for the adequacy of nutrition, assessment of growth and development, and counseling of parents; with 4 or more face-to-face visits by a physician or other qualified health care professional per month	1
90955	End-stage renal disease (ESRD) related services monthly, for patients 2-11 years of age to include monitoring for the adequacy of nutrition, assessment of growth and development, and counseling of parents; with 2-3 face-to-face visits by a physician or other qualified health care professional per month	1
90956	End-stage renal disease (ESRD) related services monthly, for patients 2-11 years of age to include monitoring for the adequacy of nutrition, assessment of growth and development, and counseling of parents; with 1 face-to-face visit by a physician or other qualified health care professional per month	1
90957	End-stage renal disease (ESRD) related services monthly, for patients 12-19 years of age to include monitoring for the adequacy of nutrition, assessment of growth and development, and counseling of parents; with 4 or more face-to-face visits by a physician or other qualified health care professional per month	1

90958	End-stage renal disease (ESRD) related services monthly, for patients 12-19 years of age to include monitoring for the adequacy of nutrition, assessment of growth and development, and counseling of parents; with 2-3 face-to-face visits by a physician or other qualified health care professional per month	1
90959	End-stage renal disease (ESRD) related services monthly, for patients 12-19 years of age to include monitoring for the adequacy of nutrition, assessment of growth and development, and counseling of parents; with 1 face-to-face visit by a physician or other qualified health care professional per month	1
90960	End-stage renal disease (ESRD) related services monthly, for patients 20 years of age and older; with 4 or more face-to-face visits by a physician or other qualified health care professional per month	1
90961	End-stage renal disease (ESRD) related services monthly, for patients 20 years of age and older; with 2-3 face-to-face visits by a physician or other qualified health care professional per month	1
90962	End-stage renal disease (ESRD) related services monthly, for patients 20 years of age and older; with 1 face-to-face visit by a physician or other qualified health care professional per month	1
90963	End-stage renal disease (ESRD) related services for home dialysis per full month, for patients younger than 2 years of age to include monitoring for the adequacy of nutrition, assessment of growth and development, and counseling of parents	1
90964	End-stage renal disease (ESRD) related services for home dialysis per full month, for patients 2-11 years of age to include monitoring for the adequacy of nutrition, assessment of growth and development, and counseling of parents	1
90965	End-stage renal disease (ESRD) related services for home dialysis per full month, for patients 12-19 years of age to include monitoring for the adequacy of nutrition, assessment of growth and development, and counseling of parents	1
90966	End-stage renal disease (ESRD) related services for home dialysis per full month, for patients 20 years of age and older	1
90967	End-stage renal disease (ESRD) related services for dialysis less than a full month of service, per day; for patients younger than 2 years of age	1
90968	End-stage renal disease (ESRD) related services for dialysis less than a full month of service, per day; for patients 2-11 years of age	1
90969	End-stage renal disease (ESRD) related services for dialysis less than a full month of service, per day; for patients 12-19 years of age	1
90970	End-stage renal disease (ESRD) related services for dialysis less than a full month of service, per day; for patients 20 years of age and older	1
90989	Dialysis training, patient, including helper where applicable, any mode, completed course	31
90993	Dialysis training, patient, including helper where applicable, any mode, course not completed, per training session	31
90997	Hemoperfusion (eg, with activated charcoal or resin)	31
90999	Unlisted dialysis procedure, inpatient or outpatient	31

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91010	Esophageal motility (manometric study of the esophagus and/or gastroesophageal junction) study with interpretation and report	1
91013	Esophageal motility (manometric study of the esophagus and/or gastroesophageal junction) study with interpretation and report; with stimulation or perfusion (eg, stimulant, acid or alkali perfusion) (List separately in addition to code for primary procedure)	1
91020	Gastric motility (manometric) studies	1
91022	Duodenal motility (manometric) study	1
91030	Esophagus, acid perfusion (Bernstein) test for esophagitis	1
91034	Esophagus, gastroesophageal reflux test; with nasal catheter pH electrode(s) placement, recording, analysis and interpretation	1
91035	Esophagus, gastroesophageal reflux test; with mucosal attached telemetry pH electrode placement, recording, analysis and interpretation	1
91037	Esophageal function test, gastroesophageal reflux test with nasal catheter intraluminal impedance electrode(s) placement, recording, analysis and interpretation	1
91038	Esophageal function test, gastroesophageal reflux test with nasal catheter intraluminal impedance electrode(s) placement, recording, analysis and interpretation; prolonged (greater than 1 hour, up to 24 hours)	1
91040	Esophageal balloon distension study, diagnostic, with provocation when performed	1
91065	Breath hydrogen or methane test (eg, for detection of lactase deficiency, fructose intolerance, bacterial overgrowth, or oro-cecal gastrointestinal transit)	1
91110	Gastrointestinal tract imaging, intraluminal (eg, capsule endoscopy), esophagus through ileum, with interpretation and report	1
91111	Gastrointestinal tract imaging, intraluminal (eg, capsule endoscopy), esophagus with interpretation and report	1
91112	Gastrointestinal transit and pressure measurement, stomach through colon, wireless capsule, with interpretation and report	1
91113	Gastrointestinal tract imaging, intraluminal (eg, capsule endoscopy), colon, with interpretation and report	1
91117	Colon motility (manometric) study, minimum 6 hours continuous recording (including provocation tests, eg, meal, intracolonic balloon distension, pharmacologic agents, if performed), with interpretation and report	1
91120	Rectal sensation, tone, and compliance test (ie, response to graded balloon distention)	1
91122	Anorectal manometry	1
91132	Electrogastrography, diagnostic, transcutaneous	1
91133	Electrogastrography, diagnostic, transcutaneous; with provocative testing	1
91200	Liver elastography, mechanically induced shear wave (eg, vibration), without imaging, with interpretation and report	1
91299	Unlisted diagnostic gastroenterology procedure	1

91300	Severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (coronavirus disease [COVID-19]) vaccine, mRNA-LNP, spike protein, preservative free, 30 mcg/0.3 mL dosage, diluent reconstituted, for intramuscular use	1
91301	Severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (coronavirus disease [COVID-19]) vaccine, mRNA-LNP, spike protein, preservative free, 100 mcg/0.5 mL dosage, for intramuscular use	1
91302	Severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (coronavirus disease [COVID-19]) vaccine, DNA, spike protein, chimpanzee adenovirus Oxford 1 (ChAdOx1) vector, preservative free, 5x10^10 viral particles/0.5 mL dosage, for intramuscular use	1
91303	Severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (coronavirus disease [COVID-19]) vaccine, DNA, spike protein, adenovirus type 26 (Ad26) vector, preservative free, 5x1010 viral particles/0.5 mL dosage, for intramuscular use	1
91304	Severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (coronavirus disease [COVID-19]) vaccine, recombinant spike protein nanoparticle, saponin-based adjuvant, preservative free, 5 mcg/0.5 mL dosage, for intramuscular use	1
91306	Severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (coronavirus disease [COVID-19]) vaccine, mRNA-LNP, spike protein, preservative free, 50 mcg/0.25 mL dosage, for intramuscular use	1
91307	Severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (coronavirus disease [COVID-19]) vaccine, mRNA-LNP, spike protein, preservative free, 10 mcg/0.2 mL dosage, diluent reconstituted, tris-sucrose formulation, for intramuscular use	1
92002	Ophthalmological services: medical examination and evaluation with initiation of diagnostic and treatment program; intermediate, new patient	1
92004	Ophthalmological services: medical examination and evaluation with initiation of diagnostic and treatment program; comprehensive, new patient, 1 or more visits	1
92012	Ophthalmological services: medical examination and evaluation, with initiation or continuation of diagnostic and treatment program; intermediate, established patient	1
92014	Ophthalmological services: medical examination and evaluation, with initiation or continuation of diagnostic and treatment program; comprehensive, established patient, 1 or more visits	1
92015	Determination of refractive state	1
92018	Ophthalmological examination and evaluation, under general anesthesia, with or without manipulation of globe for passive range of motion or other manipulation to facilitate diagnostic examination; complete	1
92019	Ophthalmological examination and evaluation, under general anesthesia, with or without manipulation of globe for passive range of motion or other manipulation to facilitate diagnostic examination; limited	1
92020	Gonioscopy (separate procedure)	1
92060	Sensorimotor examination with multiple measurements of ocular deviation (eg, restrictive or paretic muscle with diplopia) with interpretation and report (separate procedure)	1

92065	Orthoptic training	1
92071	Fitting of contact lens for treatment of ocular surface disease	2
92072	Fitting of contact lens for management of keratoconus, initial fitting	1
92081	Visual field examination, unilateral or bilateral, with interpretation and report; limited examination (eg, tangent screen, Autoplot, arc perimeter, or single stimulus level automated test, such as Octopus 3 or 7 equivalent)	1
92082	Visual field examination, unilateral or bilateral, with interpretation and report; intermediate examination (eg, at least 2 isopters on Goldmann perimeter, or semiquantitative, automated suprathreshold screening program, Humphrey suprathreshold automatic diagnostic test, Octopus program 33)	1
92083	Visual field examination, unilateral or bilateral, with interpretation and report; extended examination (eg, Goldmann visual fields with at least 3 isopters plotted and static determination within the central 30°, or quantitative, automated threshold perimetry, Octopus program G-1, 32 or 42, Humphrey visual field analyzer full threshold programs 30-2, 24-2, or 30/60-2)	1
92100	Serial tonometry (separate procedure) with multiple measurements of intraocular pressure over an extended time period with interpretation and report, same day (eg, diurnal curve or medical treatment of acute elevation of intraocular pressure)	1
92132	Scanning computerized ophthalmic diagnostic imaging, anterior segment, with interpretation and report, unilateral or bilateral	1
92133	Scanning computerized ophthalmic diagnostic imaging, posterior segment, with interpretation and report, unilateral or bilateral; optic nerve	1
92134	Scanning computerized ophthalmic diagnostic imaging, posterior segment, with interpretation and report, unilateral or bilateral; retina	1
92136	Ophthalmic biometry by partial coherence interferometry with intraocular lens power calculation	1
92145	Corneal hysteresis determination, by air impulse stimulation, unilateral or bilateral, with interpretation and report	1
92201	Ophthalmoscopy, extended; with retinal drawing and scleral depression of peripheral retinal disease (eg, for retinal tear, retinal detachment, retinal tumor) with interpretation and report, unilateral or bilateral	1
92202	Ophthalmoscopy, extended; with drawing of optic nerve or macula (eg, for glaucoma, macular pathology, tumor) with interpretation and report, unilateral or bilateral	1
92227	Imaging of retina for detection or monitoring of disease; with remote clinical staff review and report, unilateral or bilateral	1
92228	Imaging of retina for detection or monitoring of disease; with remote physician or other qualified health care professional interpretation and report, unilateral or bilateral	1
92229	Imaging of retina for detection or monitoring of disease; point-of-care automated analysis and report, unilateral or bilateral	1
92230	Fluorescein angioscopy with interpretation and report	1
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92235	Fluorescein angiography (includes multiframe imaging) with interpretation and report, unilateral or bilateral	1
92240	Indocyanine-green angiography (includes multiframe imaging) with interpretation and report, unilateral or bilateral	1
92242	Fluorescein angiography and indocyanine-green angiography (includes multiframe imaging) performed at the same patient encounter with interpretation and report, unilateral or bilateral	1
92250	Fundus photography with interpretation and report	8
92260	Ophthalmodynamometry	1
92265	Needle oculoelectromyography, 1 or more extraocular muscles, 1 or both eyes, with interpretation and report	1
92270	Electro-oculography with interpretation and report	1
92273	Electroretinography (ERG), with interpretation and report; full field (ie, ffERG, flash ERG, Ganzfeld ERG)	1
92274	Electroretinography (ERG), with interpretation and report; multifocal (mfERG)	1
92283	Color vision examination, extended, eg, anomaloscope or equivalent	1
92284	Dark adaptation examination with interpretation and report	1
92285	External ocular photography with interpretation and report for documentation of medical progress (eg, close-up photography, slit lamp photography, goniophotography, stereo-photography)	1
92286	Anterior segment imaging with interpretation and report; with specular microscopy and endothelial cell analysis	1
92287	Anterior segment imaging with interpretation and report; with fluorescein angiography	1
92310	Prescription of optical and physical characteristics of and fitting of contact lens, with medical supervision of adaptation; corneal lens, both eyes, except for aphakia	1
92311	Prescription of optical and physical characteristics of and fitting of contact lens, with medical supervision of adaptation; corneal lens for aphakia, 1 eye	1
92312	Prescription of optical and physical characteristics of and fitting of contact lens, with medical supervision of adaptation; corneal lens for aphakia, both eyes	1
92313	Prescription of optical and physical characteristics of and fitting of contact lens, with medical supervision of adaptation; corneoscleral lens	1
92314	Prescription of optical and physical characteristics of contact lens, with medical supervision of adaptation and direction of fitting by independent technician; corneal lens, both eyes except for aphakia	1
92315	Prescription of optical and physical characteristics of contact lens, with medical supervision of adaptation and direction of fitting by independent technician; corneal lens for aphakia, 1 eye	1
92316	Prescription of optical and physical characteristics of contact lens, with medical supervision of adaptation and direction of fitting by independent technician; corneal lens for aphakia, both eyes	1

92317	Prescription of optical and physical characteristics of contact lens, with medical supervision of adaptation and direction of fitting by independent technician; corneoscleral lens	1
92325	Modification of contact lens (separate procedure), with medical supervision of adaptation	1
92326	Replacement of contact lens	2
92340	Fitting of spectacles, except for aphakia; monofocal	1
92341	Fitting of spectacles, except for aphakia; bifocal	1
92342	Fitting of spectacles, except for aphakia; multifocal, other than bifocal	1
92352	Fitting of spectacle prosthesis for aphakia; monofocal	1
92353	Fitting of spectacle prosthesis for aphakia; multifocal	1
92354	Fitting of spectacle mounted low vision aid; single element system	1
92355	Fitting of spectacle mounted low vision aid; telescopic or other compound lens system	1
92358	Prosthesis service for aphakia, temporary (disposable or loan, including materials)	1
92370	Repair and refitting spectacles; except for aphakia	1
92371	Repair and refitting spectacles; spectacle prosthesis for aphakia	1
92499	Unlisted ophthalmological service or procedure	1
92502	Otolaryngologic examination under general anesthesia	1
92504	Binocular microscopy (separate diagnostic procedure)	1
92507	Treatment of speech, language, voice, communication, and/or auditory processing disorder; individual	48
92508	Treatment of speech, language, voice, communication, and/or auditory processing disorder; group, 2 or more individuals	48
92511	Nasopharyngoscopy with endoscope (separate procedure)	1
92512	Nasal function studies (eg, rhinomanometry)	1
92516	Facial nerve function studies (eg, electroneuronography)	1
92517	Vestibular evoked myogenic potential (VEMP) testing, with interpretation and report; cervical (cVEMP)	1
92518	Vestibular evoked myogenic potential (VEMP) testing, with interpretation and report; ocular (oVEMP)	1
92519	Vestibular evoked myogenic potential (VEMP) testing, with interpretation and report; cervical (cVEMP) and ocular (oVEMP)	1
92520	Laryngeal function studies (ie, aerodynamic testing and acoustic testing)	1
92521	Evaluation of speech fluency (eg, stuttering, cluttering)	1
92522	Evaluation of speech sound production (eg, articulation, phonological process, apraxia, dysarthria)	1

92523	Evaluation of speech sound production (eg, articulation, phonological process, apraxia, dysarthria); with evaluation of language comprehension and expression (eg, receptive and expressive language)	1
92524	Behavioral and qualitative analysis of voice and resonance	1
92526	Treatment of swallowing dysfunction and/or oral function for feeding	1
92531	Spontaneous nystagmus, including gaze	1
92532	Positional nystagmus test	1
92533	Caloric vestibular test, each irrigation (binaural, bithermal stimulation constitutes 4 tests)	4
92534	Optokinetic nystagmus test	1
92537	Caloric vestibular test with recording, bilateral; bithermal (ie, one warm and one cool irrigation in each ear for a total of four irrigations)	1
92538	Caloric vestibular test with recording, bilateral; monothermal (ie, one irrigation in each ear for a total of two irrigations)	1
92540	Basic vestibular evaluation, includes spontaneous nystagmus test with eccentric gaze fixation nystagmus, with recording, positional nystagmus test, minimum of 4 positions, with recording, optokinetic nystagmus test, bidirectional foveal and peripheral stimulation, with recording, and oscillating tracking test, with recording	1
92541	Spontaneous nystagmus test, including gaze and fixation nystagmus, with recording	1
92542	Positional nystagmus test, minimum of 4 positions, with recording	1
92544	Optokinetic nystagmus test, bidirectional, foveal or peripheral stimulation, with recording	1
92545	Oscillating tracking test, with recording	1
92546	Sinusoidal vertical axis rotational testing	1
92547	Use of vertical electrodes (List separately in addition to code for primary procedure)	1
92548	Computerized dynamic posturography sensory organization test (CDP-SOT), 6 conditions (ie, eyes open, eyes closed, visual sway, platform sway, eyes closed platform sway, platform and visual sway), including interpretation and report	1
92549	Computerized dynamic posturography sensory organization test (CDP-SOT), 6 conditions (ie, eyes open, eyes closed, visual sway, platform sway, eyes closed platform sway, platform and visual sway), including interpretation and report; with motor control test (MCT) and adaptation test (ADT)	1
92550	Tympanometry and reflex threshold measurements	1
92551	Screening test, pure tone, air only	1
92552	Pure tone audiometry (threshold); air only	1
92553	Pure tone audiometry (threshold); air and bone	1
92555	Speech audiometry threshold	1
92556	Speech audiometry threshold; with speech recognition	1

92557	Comprehensive audiometry threshold evaluation and speech recognition (92553 and 92556 combined)	1
92558	Evoked otoacoustic emissions, screening (qualitative measurement of distortion product or transient evoked otoacoustic emissions), automated analysis	1
92561	Bekesy audiometry; diagnostic	1
92562	Loudness balance test, alternate binaural or monaural	1
92563	Tone decay test	1
92564	Short increment sensitivity index (SISI)	1
92565	Stenger test, pure tone	1
92567	Tympanometry (impedance testing)	1
92568	Acoustic reflex testing, threshold	1
92570	Acoustic immittance testing, includes tympanometry (impedance testing), acoustic reflex threshold testing, and acoustic reflex decay testing	1
92571	Filtered speech test	1
92572	Staggered spondaic word test	1
92575	Sensorineural acuity level test	1
92576	Synthetic sentence identification test	1
92577	Stenger test, speech	1
92579	Visual reinforcement audiometry (VRA)	1
92582	Conditioning play audiometry	1
92583	Select picture audiometry	1
92584	Electrocochleography	1
92587	Distortion product evoked otoacoustic emissions; limited evaluation (to confirm the presence or absence of hearing disorder, 3-6 frequencies) or transient evoked otoacoustic emissions, with interpretation and report	1
92588	Distortion product evoked otoacoustic emissions; comprehensive diagnostic evaluation (quantitative analysis of outer hair cell function by cochlear mapping, minimum of 12 frequencies), with interpretation and report	1
92590	Hearing aid examination and selection; monaural	1
92591	Hearing aid examination and selection; binaural	1
92592	Hearing aid check; monaural	1
92593	Hearing aid check; binaural	1
92594	Electroacoustic evaluation for hearing aid; monaural	1
92595	Electroacoustic evaluation for hearing aid; binaural	1
92596	Ear protector attenuation measurements	1
92597	Evaluation for use and/or fitting of voice prosthetic device to supplement oral speech	1

92601	Diagnostic analysis of cochlear implant, patient younger than 7 years of age; with programming	1
92602	Diagnostic analysis of cochlear implant, patient younger than 7 years of age; subsequent reprogramming	1
92603	Diagnostic analysis of cochlear implant, age 7 years or older; with programming	1
92604	Diagnostic analysis of cochlear implant, age 7 years or older; subsequent reprogramming	1
92605	Evaluation for prescription of non-speech-generating augmentative and alternative communication device, face-to-face with the patient; first hour	1
92606	Therapeutic service(s) for the use of non-speech-generating device, including programming and modification	1
92607	Evaluation for prescription for speech-generating augmentative and alternative communication device, face-to-face with the patient; first hour	1
92608	Evaluation for prescription for speech-generating augmentative and alternative communication device, face-to-face with the patient; each additional 30 minutes (List separately in addition to code for primary procedure)	4
92609	Therapeutic services for the use of speech-generating device, including programming and modification	1
92610	Evaluation of oral and pharyngeal swallowing function	1
92611	Motion fluoroscopic evaluation of swallowing function by cine or video recording	1
92612	Flexible endoscopic evaluation of swallowing by cine or video recording	1
92613	Flexible endoscopic evaluation of swallowing by cine or video recording; interpretation and report only	1
92614	Flexible endoscopic evaluation, laryngeal sensory testing by cine or video recording	1
92615	Flexible endoscopic evaluation, laryngeal sensory testing by cine or video recording; interpretation and report only	1
92616	Flexible endoscopic evaluation of swallowing and laryngeal sensory testing by cine or video recording	1
92617	Flexible endoscopic evaluation of swallowing and laryngeal sensory testing by cine or video recording; interpretation and report only	1
92618	Evaluation for prescription of non-speech-generating augmentative and alternative communication device, face-to-face with the patient; each additional 30 minutes (List separately in addition to code for primary procedure)	1
92620	Evaluation of central auditory function, with report; initial 60 minutes	1
92621	Evaluation of central auditory function, with report; each additional 15 minutes (List separately in addition to code for primary procedure)	4
92625	Assessment of tinnitus (includes pitch, loudness matching, and masking)	1
92626	Evaluation of auditory function for surgically implanted device(s) candidacy or postoperative status of a surgically implanted device(s); first hour	1

92627	Evaluation of auditory function for surgically implanted device(s) candidacy or postoperative status of a surgically implanted device(s); each additional 15 minutes (List separately in addition to code for primary procedure)	4
92630	Auditory rehabilitation; prelingual hearing loss	1
92633	Auditory rehabilitation; postlingual hearing loss	1
92640	Diagnostic analysis with programming of auditory brainstem implant, per hour	1
92650	Auditory evoked potentials; screening of auditory potential with broadband stimuli, automated analysis	1
92651	Auditory evoked potentials; for hearing status determination, broadband stimuli, with interpretation and report	1
92652	Auditory evoked potentials; for threshold estimation at multiple frequencies, with interpretation and report	1
92653	Auditory evoked potentials; neurodiagnostic, with interpretation and report	1
92700	Unlisted otorhinolaryngological service or procedure	1
92920	Percutaneous transluminal coronary angioplasty; single major coronary artery or branch	1
92921	Percutaneous transluminal coronary angioplasty; each additional branch of a major coronary artery (List separately in addition to code for primary procedure)	1
92924	Percutaneous transluminal coronary atherectomy, with coronary angioplasty when performed; single major coronary artery or branch	1
92925	Percutaneous transluminal coronary atherectomy, with coronary angioplasty when performed; each additional branch of a major coronary artery (List separately in addition to code for primary procedure)	1
92928	Percutaneous transcatheter placement of intracoronary stent(s), with coronary angioplasty when performed; single major coronary artery or branch	1
92929	Percutaneous transcatheter placement of intracoronary stent(s), with coronary angioplasty when performed; each additional branch of a major coronary artery (List separately in addition to code for primary procedure)	1
92933	Percutaneous transluminal coronary atherectomy, with intracoronary stent, with coronary angioplasty when performed; single major coronary artery or branch	1
92934	Percutaneous transluminal coronary atherectomy, with intracoronary stent, with coronary angioplasty when performed; each additional branch of a major coronary artery (List separately in addition to code for primary procedure)	1
92937	Percutaneous transluminal revascularization of or through coronary artery bypass graft (internal mammary, free arterial, venous), any combination of intracoronary stent, atherectomy and angioplasty, including distal protection when performed; single vessel	1
92938	Percutaneous transluminal revascularization of or through coronary artery bypass graft (internal mammary, free arterial, venous), any combination of intracoronary stent, atherectomy and angioplasty, including distal protection when performed; each additional branch subtended by the bypass graft (List separately in addition to code for primary procedure)	1

92941	Percutaneous transluminal revascularization of acute total/subtotal occlusion during acute myocardial infarction, coronary artery or coronary artery bypass graft, any combination of intracoronary stent, atherectomy and angioplasty, including aspiration thrombectomy when performed, single vessel	1
92943	Percutaneous transluminal revascularization of chronic total occlusion, coronary artery, coronary artery branch, or coronary artery bypass graft, any combination of intracoronary stent, atherectomy and angioplasty; single vessel	1
92944	Percutaneous transluminal revascularization of chronic total occlusion, coronary artery, coronary artery branch, or coronary artery bypass graft, any combination of intracoronary stent, atherectomy and angioplasty; each additional coronary artery, coronary artery branch, or bypass graft (List separately in addition to code for primary procedure)	1
92950	Cardiopulmonary resuscitation (eg, in cardiac arrest)	2
92953	Temporary transcutaneous pacing	2
92960	Cardioversion, elective, electrical conversion of arrhythmia; external	1
92961	Cardioversion, elective, electrical conversion of arrhythmia; internal (separate procedure)	1
92970	Cardioassist-method of circulatory assist; internal	1
92971	Cardioassist-method of circulatory assist; external	1
92973	Percutaneous transluminal coronary thrombectomy mechanical (List separately in addition to code for primary procedure)	1
92974	Transcatheter placement of radiation delivery device for subsequent coronary intravascular brachytherapy (List separately in addition to code for primary procedure)	1
92975	Thrombolysis, coronary; by intracoronary infusion, including selective coronary angiography	1
92977	Thrombolysis, coronary; by intravenous infusion	1
92978	Endoluminal imaging of coronary vessel or graft using intravascular ultrasound (IVUS) or optical coherence tomography (OCT) during diagnostic evaluation and/or therapeutic intervention including imaging supervision, interpretation and report; initial vessel (List separately in addition to code for primary procedure)	1
92979	Endoluminal imaging of coronary vessel or graft using intravascular ultrasound (IVUS) or optical coherence tomography (OCT) during diagnostic evaluation and/or therapeutic intervention including imaging supervision, interpretation and report; each additional vessel (List separately in addition to code for primary procedure)	2
92986	Percutaneous balloon valvuloplasty; aortic valve	1
92987	Percutaneous balloon valvuloplasty; mitral valve	1
92990	Percutaneous balloon valvuloplasty; pulmonary valve	1
92997	Percutaneous transluminal pulmonary artery balloon angioplasty; single vessel	1
92998	Percutaneous transluminal pulmonary artery balloon angioplasty; each additional vessel (List separately in addition to code for primary procedure)	1

93000	Electrocardiogram, routine ECG with at least 12 leads; with interpretation and report	6
93005	Electrocardiogram, routine ECG with at least 12 leads; tracing only, without interpretation and report	6
93010	Electrocardiogram, routine ECG with at least 12 leads; interpretation and report only	6
93015	Cardiovascular stress test using maximal or submaximal treadmill or bicycle exercise, continuous electrocardiographic monitoring, and/or pharmacological stress; with supervision, interpretation and report	1
93016	Cardiovascular stress test using maximal or submaximal treadmill or bicycle exercise, continuous electrocardiographic monitoring, and/or pharmacological stress; supervision only, without interpretation and report	1
93017	Cardiovascular stress test using maximal or submaximal treadmill or bicycle exercise, continuous electrocardiographic monitoring, and/or pharmacological stress; tracing only, without interpretation and report	1
93018	Cardiovascular stress test using maximal or submaximal treadmill or bicycle exercise, continuous electrocardiographic monitoring, and/or pharmacological stress; interpretation and report only	1
93024	Ergonovine provocation test	1
93025	Microvolt T-wave alternans for assessment of ventricular arrhythmias	1
93040	Rhythm ECG, 1-3 leads; with interpretation and report	1
93041	Rhythm ECG, 1-3 leads; tracing only without interpretation and report	1
93042	Rhythm ECG, 1-3 leads; interpretation and report only	1
93050	Arterial pressure waveform analysis for assessment of central arterial pressures, includes obtaining waveform(s), digitization and application of nonlinear mathematical transformations to determine central arterial pressures and augmentation index, with interpretation and report, upper extremity artery, non-invasive	1
93224	External electrocardiographic recording up to 48 hours by continuous rhythm recording and storage; includes recording, scanning analysis with report, review and interpretation by a physician or other qualified health care professional	1
93225	External electrocardiographic recording up to 48 hours by continuous rhythm recording and storage; recording (includes connection, recording, and disconnection)	1
93226	External electrocardiographic recording up to 48 hours by continuous rhythm recording and storage; scanning analysis with report	1
93227	External electrocardiographic recording up to 48 hours by continuous rhythm recording and storage; review and interpretation by a physician or other qualified health care professional	1
93228	External mobile cardiovascular telemetry with electrocardiographic recording, concurrent computerized real time data analysis and greater than 24 hours of accessible ECG data storage (retrievable with query) with ECG triggered and patient selected events transmitted to a remote attended surveillance center for up to 30	1

	days; review and interpretation with report by a physician or other qualified health care professional	
93229	External mobile cardiovascular telemetry with electrocardiographic recording, concurrent computerized real time data analysis and greater than 24 hours of accessible ECG data storage (retrievable with query) with ECG triggered and patient selected events transmitted to a remote attended surveillance center for up to 30 days; technical support for connection and patient instructions for use, attended surveillance, analysis and transmission of daily and emergent data reports as prescribed by a physician or other qualified health care professional	1
93241	External electrocardiographic recording for more than 48 hours up to 7 days by continuous rhythm recording and storage; includes recording, scanning analysis with report, review and interpretation	1
93242	External electrocardiographic recording for more than 48 hours up to 7 days by continuous rhythm recording and storage; recording (includes connection and initial recording)	1
93243	External electrocardiographic recording for more than 48 hours up to 7 days by continuous rhythm recording and storage; scanning analysis with report	1
93244	External electrocardiographic recording for more than 48 hours up to 7 days by continuous rhythm recording and storage; review and interpretation	1
93245	External electrocardiographic recording for more than 7 days up to 15 days by continuous rhythm recording and storage; includes recording, scanning analysis with report, review and interpretation	1
93246	External electrocardiographic recording for more than 7 days up to 15 days by continuous rhythm recording and storage; recording (includes connection and initial recording)	1
93247	External electrocardiographic recording for more than 7 days up to 15 days by continuous rhythm recording and storage; scanning analysis with report	1
93248	External electrocardiographic recording for more than 7 days up to 15 days by continuous rhythm recording and storage; review and interpretation	1
93260	Programming device evaluation (in person) with iterative adjustment of the implantable device to test the function of the device and select optimal permanent programmed values with analysis, review and report by a physician or other qualified health care professional; implantable subcutaneous lead defibrillator system	1
93261	Interrogation device evaluation (in person) with analysis, review and report by a physician or other qualified health care professional, includes connection, recording and disconnection per patient encounter; implantable subcutaneous lead defibrillator system	1
93264	Remote monitoring of a wireless pulmonary artery pressure sensor for up to 30 days, including at least weekly downloads of pulmonary artery pressure recordings, interpretation(s), trend analysis, and report(s) by a physician or other qualified health care professional	1

External patient and, when performed, auto activated electrocardiographic rhythm derived event recording with symptom-related memory loop with remote download capability up to 30 days, 24-hour attended monitoring; includes transmission, review and interpretation by a physician or other qualified health care professional	1
External patient and, when performed, auto activated electrocardiographic rhythm derived event recording with symptom-related memory loop with remote download capability up to 30 days, 24-hour attended monitoring; recording (includes connection, recording, and disconnection)	1
External patient and, when performed, auto activated electrocardiographic rhythm derived event recording with symptom-related memory loop with remote download capability up to 30 days, 24-hour attended monitoring; transmission and analysis	1
External patient and, when performed, auto activated electrocardiographic rhythm derived event recording with symptom-related memory loop with remote download capability up to 30 days, 24-hour attended monitoring; review and interpretation by a physician or other qualified health care professional	1
Signal-averaged electrocardiography (SAECG), with or without ECG	1
Programming device evaluation (in person) with iterative adjustment of the implantable device to test the function of the device and select optimal permanent programmed values with analysis, review and report by a physician or other qualified health care professional; single lead pacemaker system or leadless pacemaker system in one cardiac chamber	1
Programming device evaluation (in person) with iterative adjustment of the implantable device to test the function of the device and select optimal permanent programmed values with analysis, review and report by a physician or other qualified health care professional; dual lead pacemaker system	1
Programming device evaluation (in person) with iterative adjustment of the implantable device to test the function of the device and select optimal permanent programmed values with analysis, review and report by a physician or other qualified health care professional; multiple lead pacemaker system	1
Programming device evaluation (in person) with iterative adjustment of the implantable device to test the function of the device and select optimal permanent programmed values with analysis, review and report by a physician or other qualified health care professional; single lead transvenous implantable defibrillator system	1
Programming device evaluation (in person) with iterative adjustment of the implantable device to test the function of the device and select optimal permanent programmed values with analysis, review and report by a physician or other qualified health care professional; dual lead transvenous implantable defibrillator system	1
Programming device evaluation (in person) with iterative adjustment of the implantable device to test the function of the device and select optimal permanent programmed values with analysis, review and report by a physician or other qualified health care professional; multiple lead transvenous implantable defibrillator system	1
	derived event recording with symptom-related memory loop with remote download capability up to 30 days, 24-hour attended monitoring; includes transmission, review and interpretation by a physician or other qualified health care professional External patient and, when performed, auto activated electrocardiographic rhythm derived event recording with symptom-related memory loop with remote download capability up to 30 days, 24-hour attended monitoring; recording (includes connection, recording, and disconnection) External patient and, when performed, auto activated electrocardiographic rhythm derived event recording with symptom-related memory loop with remote download capability up to 30 days, 24-hour attended monitoring; transmission and analysis External patient and, when performed, auto activated electrocardiographic rhythm derived event recording with symptom-related memory loop with remote download capability up to 30 days, 24-hour attended monitoring; review and interpretation by a physician or other qualified health care professional Signal-averaged electrocardiography (SAECG), with or without ECG Programming device evaluation (in person) with iterative adjustment of the implantable device to test the function of the device and select optimal permanent programmed values with analysis, review and report by a physician or other qualified health care professional; single lead pacemaker system or leadless pacemaker system in one cardiac chamber Programming device evaluation (in person) with iterative adjustment of the implantable device to test the function of the device and select optimal permanent programmed values with analysis, review and report by a physician or other qualified health care professional; multiple lead pacemaker system Programming device evaluation (in person) with iterative adjustment of the implantable device to test the function of the device and select optimal permanent programmed values with analysis, review and report by a physician or other qualified health care professional;

93285	Programming device evaluation (in person) with iterative adjustment of the implantable device to test the function of the device and select optimal permanent programmed values with analysis, review and report by a physician or other qualified health care professional; subcutaneous cardiac rhythm monitor system	1
93286	Peri-procedural device evaluation (in person) and programming of device system parameters before or after a surgery, procedure, or test with analysis, review and report by a physician or other qualified health care professional; single, dual, or multiple lead pacemaker system, or leadless pacemaker system	2
93287	Peri-procedural device evaluation (in person) and programming of device system parameters before or after a surgery, procedure, or test with analysis, review and report by a physician or other qualified health care professional; single, dual, or multiple lead implantable defibrillator system	2
93288	Interrogation device evaluation (in person) with analysis, review and report by a physician or other qualified health care professional, includes connection, recording and disconnection per patient encounter; single, dual, or multiple lead pacemaker system, or leadless pacemaker system	1
93289	Interrogation device evaluation (in person) with analysis, review and report by a physician or other qualified health care professional, includes connection, recording and disconnection per patient encounter; single, dual, or multiple lead transvenous implantable defibrillator system, including analysis of heart rhythm derived data elements	1
93290	Interrogation device evaluation (in person) with analysis, review and report by a physician or other qualified health care professional, includes connection, recording and disconnection per patient encounter; implantable cardiovascular physiologic monitor system, including analysis of 1 or more recorded physiologic cardiovascular data elements from all internal and external sensors	1
93291	Interrogation device evaluation (in person) with analysis, review and report by a physician or other qualified health care professional, includes connection, recording and disconnection per patient encounter; subcutaneous cardiac rhythm monitor system, including heart rhythm derived data analysis	1
93292	Interrogation device evaluation (in person) with analysis, review and report by a physician or other qualified health care professional, includes connection, recording and disconnection per patient encounter; wearable defibrillator system	1
93293	Transtelephonic rhythm strip pacemaker evaluation(s) single, dual, or multiple lead pacemaker system, includes recording with and without magnet application with analysis, review and report(s) by a physician or other qualified health care professional, up to 90 days	1
93294	Interrogation device evaluation(s) (remote), up to 90 days; single, dual, or multiple lead pacemaker system, or leadless pacemaker system with interim analysis, review(s) and report(s) by a physician or other qualified health care professional	1
93295	Interrogation device evaluation(s) (remote), up to 90 days; single, dual, or multiple lead implantable defibrillator system with interim analysis, review(s) and report(s) by a physician or other qualified health care professional	1
93296	Interrogation device evaluation(s) (remote), up to 90 days; single, dual, or multiple lead pacemaker system, leadless pacemaker system, or implantable defibrillator	1

	system, remote data acquisition(s), receipt of transmissions and technician review, technical support and distribution of results	
93297	Interrogation device evaluation(s), (remote) up to 30 days; implantable cardiovascular physiologic monitor system, including analysis of 1 or more recorded physiologic cardiovascular data elements from all internal and external sensors, analysis, review(s) and report(s) by a physician or other qualified health care professional	1
93298	Interrogation device evaluation(s), (remote) up to 30 days; subcutaneous cardiac rhythm monitor system, including analysis of recorded heart rhythm data, analysis, review(s) and report(s) by a physician or other qualified health care professional	1
93303	Transthoracic echocardiography for congenital cardiac anomalies; complete	1
93304	Transthoracic echocardiography for congenital cardiac anomalies; follow-up or limited study	1
93306	Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, with spectral Doppler echocardiography, and with color flow Doppler echocardiography	1
93307	Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, complete, without spectral or color Doppler echocardiography	1
93308	Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, follow-up or limited study	1
93312	Echocardiography, transesophageal, real-time with image documentation (2D) (with or without M-mode recording); including probe placement, image acquisition, interpretation and report	1
93313	Echocardiography, transesophageal, real-time with image documentation (2D) (with or without M-mode recording); placement of transesophageal probe only	1
93314	Echocardiography, transesophageal, real-time with image documentation (2D) (with or without M-mode recording); image acquisition, interpretation and report only	1
93315	Transesophageal echocardiography for congenital cardiac anomalies; including probe placement, image acquisition, interpretation and report	1
93316	Transesophageal echocardiography for congenital cardiac anomalies; placement of transesophageal probe only	1
93317	Transesophageal echocardiography for congenital cardiac anomalies; image acquisition, interpretation and report only	1
93318	Echocardiography, transesophageal (TEE) for monitoring purposes, including probe placement, real time 2-dimensional image acquisition and interpretation leading to ongoing (continuous) assessment of (dynamically changing) cardiac pumping function and to therapeutic measures on an immediate time basis	1
93319	3D echocardiographic imaging and postprocessing during transesophageal echocardiography, or during transthoracic echocardiography for congenital cardiac anomalies, for the assessment of cardiac structure(s) (eg, cardiac chambers and valves, left atrial appendage, interatrial septum, interventricular septum) and	1

	function, when performed (List separately in addition to code for echocardiographic imaging)	
93320	Doppler echocardiography, pulsed wave and/or continuous wave with spectral display (List separately in addition to codes for echocardiographic imaging); complete	1
93321	Doppler echocardiography, pulsed wave and/or continuous wave with spectral display (List separately in addition to codes for echocardiographic imaging); follow-up or limited study (List separately in addition to codes for echocardiographic imaging)	1
93325	Doppler echocardiography color flow velocity mapping (List separately in addition to codes for echocardiography)	2
93350	Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, during rest and cardiovascular stress test using treadmill, bicycle exercise and/or pharmacologically induced stress, with interpretation and report	1
93351	Echocardiography, transthoracic, real-time with image documentation (2D), includes M-mode recording, when performed, during rest and cardiovascular stress test using treadmill, bicycle exercise and/or pharmacologically induced stress, with interpretation and report; including performance of continuous electrocardiographic monitoring, with supervision by a physician or other qualified health care professional	1
93352	Use of echocardiographic contrast agent during stress echocardiography (List separately in addition to code for primary procedure)	1
93355	Echocardiography, transesophageal (TEE) for guidance of a transcatheter intracardiac or great vessel(s) structural intervention(s) (eg, TAVR, transcatheter pulmonary valve replacement, mitral valve repair, paravalvular regurgitation repair, left atrial appendage occlusion/closure, ventricular septal defect closure) (peri-and intra-procedural), real-time image acquisition and documentation, guidance with quantitative measurements, probe manipulation, interpretation, and report, including diagnostic transesophageal echocardiography and, when performed, administration of ultrasound contrast, Doppler, color flow, and 3D	1
93356	Myocardial strain imaging using speckle tracking-derived assessment of myocardial mechanics (List separately in addition to codes for echocardiography imaging)	1
93451	Right heart catheterization including measurement(s) of oxygen saturation and cardiac output, when performed	1
93452	Left heart catheterization including intraprocedural injection(s) for left ventriculography, imaging supervision and interpretation, when performed	1
93453	Combined right and left heart catheterization including intraprocedural injection(s) for left ventriculography, imaging supervision and interpretation, when performed	1
93454	Catheter placement in coronary artery(s) for coronary angiography, including intraprocedural injection(s) for coronary angiography, imaging supervision and interpretation	1

93455	Catheter placement in coronary artery(s) for coronary angiography, including intraprocedural injection(s) for coronary angiography, imaging supervision and interpretation; with catheter placement(s) in bypass graft(s) (internal mammary, free arterial, venous grafts) including intraprocedural injection(s) for bypass graft angiography	1
93456	Catheter placement in coronary artery(s) for coronary angiography, including intraprocedural injection(s) for coronary angiography, imaging supervision and interpretation; with right heart catheterization	1
93457	Catheter placement in coronary artery(s) for coronary angiography, including intraprocedural injection(s) for coronary angiography, imaging supervision and interpretation; with catheter placement(s) in bypass graft(s) (internal mammary, free arterial, venous grafts) including intraprocedural injection(s) for bypass graft angiography and right heart catheterization	1
93458	Catheter placement in coronary artery(s) for coronary angiography, including intraprocedural injection(s) for coronary angiography, imaging supervision and interpretation; with left heart catheterization including intraprocedural injection(s) for left ventriculography, when performed	1
93459	Catheter placement in coronary artery(s) for coronary angiography, including intraprocedural injection(s) for coronary angiography, imaging supervision and interpretation; with left heart catheterization including intraprocedural injection(s) for left ventriculography, when performed, catheter placement(s) in bypass graft(s) (internal mammary, free arterial, venous grafts) with bypass graft angiography	1
93460	Catheter placement in coronary artery(s) for coronary angiography, including intraprocedural injection(s) for coronary angiography, imaging supervision and interpretation; with right and left heart catheterization including intraprocedural injection(s) for left ventriculography, when performed	1
93461	Catheter placement in coronary artery(s) for coronary angiography, including intraprocedural injection(s) for coronary angiography, imaging supervision and interpretation; with right and left heart catheterization including intraprocedural injection(s) for left ventriculography, when performed, catheter placement(s) in bypass graft(s) (internal mammary, free arterial, venous grafts) with bypass graft angiography	1
93462	Left heart catheterization by transseptal puncture through intact septum or by transapical puncture (List separately in addition to code for primary procedure)	1
93463	Pharmacologic agent administration (eg, inhaled nitric oxide, intravenous infusion of nitroprusside, dobutamine, milrinone, or other agent) including assessing hemodynamic measurements before, during, after and repeat pharmacologic agent administration, when performed (List separately in addition to code for primary procedure)	1
93464	Physiologic exercise study (eg, bicycle or arm ergometry) including assessing hemodynamic measurements before and after (List separately in addition to code for primary procedure)	1
93503	Insertion and placement of flow directed catheter (eg, Swan-Ganz) for monitoring purposes	1
93505	Endomyocardial biopsy	1
93530	Right heart catheterization, for congenital cardiac anomalies	1

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93531	Combined right heart catheterization and retrograde left heart catheterization, for congenital cardiac anomalies	1
93532	Combined right heart catheterization and transseptal left heart catheterization through intact septum with or without retrograde left heart catheterization, for congenital cardiac anomalies	1
93533	Combined right heart catheterization and transseptal left heart catheterization through existing septal opening, with or without retrograde left heart catheterization, for congenital cardiac anomalies	1
93561	Indicator dilution studies such as dye or thermodilution, including arterial and/or venous catheterization; with cardiac output measurement (separate procedure)	1
93562	Indicator dilution studies such as dye or thermodilution, including arterial and/or venous catheterization; subsequent measurement of cardiac output	1
93563	Injection procedure during cardiac catheterization including imaging supervision, interpretation, and report; for selective coronary angiography during congenital heart catheterization (List separately in addition to code for primary procedure)	1
93564	Injection procedure during cardiac catheterization including imaging supervision, interpretation, and report; for selective opacification of aortocoronary venous or arterial bypass graft(s) (eg, aortocoronary saphenous vein, free radial artery, or free mammary artery graft) to one or more coronary arteries and in situ arterial conduits (eg, internal mammary), whether native or used for bypass to one or more coronary arteries during congenital heart catheterization, when performed (List separately in addition to code for primary procedure)	1
93565	Injection procedure during cardiac catheterization including imaging supervision, interpretation, and report; for selective left ventricular or left atrial angiography (List separately in addition to code for primary procedure)	1
93566	Injection procedure during cardiac catheterization including imaging supervision, interpretation, and report; for selective right ventricular or right atrial angiography (List separately in addition to code for primary procedure)	1
93567	Injection procedure during cardiac catheterization including imaging supervision, interpretation, and report; for supravalvular aortography (List separately in addition to code for primary procedure)	1
93568	Injection procedure during cardiac catheterization including imaging supervision, interpretation, and report; for pulmonary angiography (List separately in addition to code for primary procedure)	1
93571	Intravascular Doppler velocity and/or pressure derived coronary flow reserve measurement (coronary vessel or graft) during coronary angiography including pharmacologically induced stress; initial vessel (List separately in addition to code for primary procedure)	1
93572	Intravascular Doppler velocity and/or pressure derived coronary flow reserve measurement (coronary vessel or graft) during coronary angiography including pharmacologically induced stress; each additional vessel (List separately in addition to code for primary procedure)	2
93580	Percutaneous transcatheter closure of congenital interatrial communication (ie, Fontan fenestration, atrial septal defect) with implant	1

93581	Percutaneous transcatheter closure of a congenital ventricular septal defect with implant	1
93582	Percutaneous transcatheter closure of patent ductus arteriosus	1
93583	Percutaneous transcatheter septal reduction therapy (eg, alcohol septal ablation) including temporary pacemaker insertion when performed	1
93590	Percutaneous transcatheter closure of paravalvular leak; initial occlusion device, mitral valve	1
93591	Percutaneous transcatheter closure of paravalvular leak; initial occlusion device, aortic valve	1
93592	Percutaneous transcatheter closure of paravalvular leak; each additional occlusion device (List separately in addition to code for primary procedure)	2
93598	Cardiac output measurement(s), thermodilution or other indicator dilution method, performed during cardiac catheterization for the evaluation of congenital heart defects (List separately in addition to code for primary procedure)	1
93600	Bundle of His recording	1
93602	Intra-atrial recording	1
93603	Right ventricular recording	1
93609	Intraventricular and/or intra-atrial mapping of tachycardia site(s) with catheter manipulation to record from multiple sites to identify origin of tachycardia (List separately in addition to code for primary procedure)	1
93610	Intra-atrial pacing	1
93612	Intraventricular pacing	1
93613	Intracardiac electrophysiologic 3-dimensional mapping (List separately in addition to code for primary procedure)	1
93615	Esophageal recording of atrial electrogram with or without ventricular electrogram(s)	1
93616	Esophageal recording of atrial electrogram with or without ventricular electrogram(s); with pacing	1
93618	Induction of arrhythmia by electrical pacing	1
93619	Comprehensive electrophysiologic evaluation with right atrial pacing and recording, right ventricular pacing and recording, His bundle recording, including insertion and repositioning of multiple electrode catheters, without induction or attempted induction of arrhythmia	1
93620	Comprehensive electrophysiologic evaluation including insertion and repositioning of multiple electrode catheters with induction or attempted induction of arrhythmia; with right atrial pacing and recording, right ventricular pacing and recording, His bundle recording	1
93621	Comprehensive electrophysiologic evaluation including insertion and repositioning of multiple electrode catheters with induction or attempted induction of arrhythmia; with left atrial pacing and recording from coronary sinus or left atrium (List separately in addition to code for primary procedure)	1

93622	Comprehensive electrophysiologic evaluation including insertion and war astriction	1
33022	Comprehensive electrophysiologic evaluation including insertion and repositioning of multiple electrode catheters with induction or attempted induction of arrhythmia; with left ventricular pacing and recording (List separately in addition to code for primary procedure)	•
93623	Programmed stimulation and pacing after intravenous drug infusion (List separately in addition to code for primary procedure)	1
93624	Electrophysiologic follow-up study with pacing and recording to test effectiveness of therapy, including induction or attempted induction of arrhythmia	1
93631	Intra-operative epicardial and endocardial pacing and mapping to localize the site of tachycardia or zone of slow conduction for surgical correction	1
93640	Electrophysiologic evaluation of single or dual chamber pacing cardioverter- defibrillator leads including defibrillation threshold evaluation (induction of arrhythmia, evaluation of sensing and pacing for arrhythmia termination) at time of initial implantation or replacement	1
93641	Electrophysiologic evaluation of single or dual chamber pacing cardioverter-defibrillator leads including defibrillation threshold evaluation (induction of arrhythmia, evaluation of sensing and pacing for arrhythmia termination) at time of initial implantation or replacement; with testing of single or dual chamber pacing cardioverter-defibrillator pulse generator	1
93642	Electrophysiologic evaluation of single or dual chamber transvenous pacing cardioverter-defibrillator (includes defibrillation threshold evaluation, induction of arrhythmia, evaluation of sensing and pacing for arrhythmia termination, and programming or reprogramming of sensing or therapeutic parameters)	1
93644	Electrophysiologic evaluation of subcutaneous implantable defibrillator (includes defibrillation threshold evaluation, induction of arrhythmia, evaluation of sensing for arrhythmia termination, and programming or reprogramming of sensing or therapeutic parameters)	1
93650	Intracardiac catheter ablation of atrioventricular node function, atrioventricular conduction for creation of complete heart block, with or without temporary pacemaker placement	1
93653	Comprehensive electrophysiologic evaluation with insertion and repositioning of multiple electrode catheters, induction or attempted induction of an arrhythmia with right atrial pacing and recording and catheter ablation of arrhythmogenic focus, including intracardiac electrophysiologic 3-dimensional mapping, right ventricular pacing and recording, left atrial pacing and recording from coronary sinus or left atrium, and His bundle recording, when performed; with treatment of supraventricular tachycardia by ablation of fast or slow atrioventricular pathway, accessory atrioventricular connection, cavo-tricuspid isthmus or other single atrial focus or source of atrial re-entry	1
93654	Comprehensive electrophysiologic evaluation with insertion and repositioning of multiple electrode catheters, induction or attempted induction of an arrhythmia with right atrial pacing and recording and catheter ablation of arrhythmogenic focus, including intracardiac electrophysiologic 3-dimensional mapping, right ventricular pacing and recording, left atrial pacing and recording from coronary sinus or left atrium, and His bundle recording, when performed; with treatment of ventricular tachycardia or focus of ventricular ectopy including left ventricular pacing and recording, when performed	1

93655	Intracardiac catheter ablation of a discrete mechanism of arrhythmia which is distinct from the primary ablated mechanism, including repeat diagnostic maneuvers, to treat a spontaneous or induced arrhythmia (List separately in addition to code for primary procedure)	1
93656	Comprehensive electrophysiologic evaluation including transseptal catheterizations, insertion and repositioning of multiple electrode catheters with intracardiac catheter ablation of atrial fibrillation by pulmonary vein isolation, including intracardiac electrophysiologic 3-dimensional mapping, intracardiac echocardiography including imaging supervision and interpretation, induction or attempted induction of an arrhythmia including left or right atrial pacing/recording, right ventricular pacing/recording, and His bundle recording, when performed	1
93657	Additional linear or focal intracardiac catheter ablation of the left or right atrium for treatment of atrial fibrillation remaining after completion of pulmonary vein isolation (List separately in addition to code for primary procedure)	1
93660	Evaluation of cardiovascular function with tilt table evaluation, with continuous ECG monitoring and intermittent blood pressure monitoring, with or without pharmacological intervention	1
93662	Intracardiac echocardiography during therapeutic/diagnostic intervention, including imaging supervision and interpretation (List separately in addition to code for primary procedure)	1
93668	Peripheral arterial disease (PAD) rehabilitation, per session	1
93701	Bioimpedance-derived physiologic cardiovascular analysis	1
93702	Bioimpedance spectroscopy (BIS), extracellular fluid analysis for lymphedema assessment(s)	1
93724	Electronic analysis of antitachycardia pacemaker system (includes electrocardiographic recording, programming of device, induction and termination of tachycardia via implanted pacemaker, and interpretation of recordings)	1
93740	Temperature gradient studies	1
93745	Initial set-up and programming by a physician or other qualified health care professional of wearable cardioverter-defibrillator includes initial programming of system, establishing baseline electronic ECG, transmission of data to data repository, patient instruction in wearing system and patient reporting of problems or events	1
93750	Interrogation of ventricular assist device (VAD), in person, with physician or other qualified health care professional analysis of device parameters (eg, drivelines, alarms, power surges), review of device function (eg, flow and volume status, septum status, recovery), with programming, if performed, and report	1
93770	Determination of venous pressure	1
93784	Ambulatory blood pressure monitoring, utilizing report-generating software, automated, worn continuously for 24 hours or longer; including recording, scanning analysis, interpretation and report	1
93786	Ambulatory blood pressure monitoring, utilizing report-generating software, automated, worn continuously for 24 hours or longer; recording only	1

93788	Ambulatory blood pressure monitoring, utilizing report-generating software, automated, worn continuously for 24 hours or longer; scanning analysis with report	1
93790	Ambulatory blood pressure monitoring, utilizing report-generating software, automated, worn continuously for 24 hours or longer; review with interpretation and report	1
93792	Patient/caregiver training for initiation of home international normalized ratio (INR) monitoring under the direction of a physician or other qualified health care professional, face-to-face, including use and care of the INR monitor, obtaining blood sample, instructions for reporting home INR test results, and documentation of patient's/caregiver's ability to perform testing and report results	1
93793	Anticoagulant management for a patient taking warfarin, must include review and interpretation of a new home, office, or lab international normalized ratio (INR) test result, patient instructions, dosage adjustment (as needed), and scheduling of additional test(s), when performed	1
93797	Physician or other qualified health care professional services for outpatient cardiac rehabilitation; without continuous ECG monitoring (per session)	2
93798	Physician or other qualified health care professional services for outpatient cardiac rehabilitation; with continuous ECG monitoring (per session)	2
93799	Unlisted cardiovascular service or procedure	1
93880	Duplex scan of extracranial arteries; complete bilateral study	1
93882	Duplex scan of extracranial arteries; unilateral or limited study	1
93886	Transcranial Doppler study of the intracranial arteries; complete study	1
93888	Transcranial Doppler study of the intracranial arteries; limited study	1
93890	Transcranial Doppler study of the intracranial arteries; vasoreactivity study	1
93892	Transcranial Doppler study of the intracranial arteries; emboli detection without intravenous microbubble injection	1
93893	Transcranial Doppler study of the intracranial arteries; emboli detection with intravenous microbubble injection	1
93895	Quantitative carotid intima media thickness and carotid atheroma evaluation, bilateral	1
93922	Limited bilateral noninvasive physiologic studies of upper or lower extremity arteries, (eg, for lower extremity: ankle/brachial indices at distal posterior tibial and anterior tibial/dorsalis pedis arteries plus bidirectional, Doppler waveform recording and analysis at 1-2 levels, or ankle/brachial indices at distal posterior tibial and anterior tibial/dorsalis pedis arteries plus volume plethysmography at 1-2 levels, or ankle/brachial indices at distal posterior tibial and anterior tibial/dorsalis pedis arteries with, transcutaneous oxygen tension measurement at 1-2 levels)	1

93923	Complete bilateral noninvasive physiologic studies of upper or lower extremity arteries, 3 or more levels (eg, for lower extremity: ankle/brachial indices at distal posterior tibial and anterior tibial/dorsalis pedis arteries plus segmental blood pressure measurements with bidirectional Doppler waveform recording and analysis, at 3 or more levels, or ankle/brachial indices at distal posterior tibial and anterior tibial/dorsalis pedis arteries plus segmental volume plethysmography at 3 or more levels, or ankle/brachial indices at distal posterior tibial and anterior tibial/dorsalis pedis arteries plus segmental transcutaneous oxygen tension measurements at 3 or more levels), or single level study with provocative functional maneuvers (eg, measurements with postural provocative tests, or measurements with reactive hyperemia)	1
93924	Noninvasive physiologic studies of lower extremity arteries, at rest and following treadmill stress testing, (ie, bidirectional Doppler waveform or volume plethysmography recording and analysis at rest with ankle/brachial indices immediately after and at timed intervals following performance of a standardized protocol on a motorized treadmill plus recording of time of onset of claudication or other symptoms, maximal walking time, and time to recovery) complete bilateral study	1
93925	Duplex scan of lower extremity arteries or arterial bypass grafts; complete bilateral study	1
93926	Duplex scan of lower extremity arteries or arterial bypass grafts; unilateral or limited study	1
93930	Duplex scan of upper extremity arteries or arterial bypass grafts; complete bilateral study	1
93931	Duplex scan of upper extremity arteries or arterial bypass grafts; unilateral or limited study	1
93970	Duplex scan of extremity veins including responses to compression and other maneuvers; complete bilateral study	1
93971	Duplex scan of extremity veins including responses to compression and other maneuvers; unilateral or limited study	1
93975	Duplex scan of arterial inflow and venous outflow of abdominal, pelvic, scrotal contents and/or retroperitoneal organs; complete study	1
93976	Duplex scan of arterial inflow and venous outflow of abdominal, pelvic, scrotal contents and/or retroperitoneal organs; limited study	1
93978	Duplex scan of aorta, inferior vena cava, iliac vasculature, or bypass grafts; complete study	1
93979	Duplex scan of aorta, inferior vena cava, iliac vasculature, or bypass grafts; unilateral or limited study	1
93980	Duplex scan of arterial inflow and venous outflow of penile vessels; complete study	1
93981	Duplex scan of arterial inflow and venous outflow of penile vessels; follow-up or limited study	1
93985	Duplex scan of arterial inflow and venous outflow for preoperative vessel assessment prior to creation of hemodialysis access; complete bilateral study	1

93986	Duplex scan of arterial inflow and venous outflow for preoperative vessel assessment prior to creation of hemodialysis access; complete unilateral study	1
93990	Duplex scan of hemodialysis access (including arterial inflow, body of access and venous outflow)	1
93998	Unlisted noninvasive vascular diagnostic study	1
94004	Ventilation assist and management, initiation of pressure or volume preset ventilators for assisted or controlled breathing; nursing facility, per day	1
94005	Home ventilator management care plan oversight of a patient (patient not present) in home, domiciliary or rest home (eg, assisted living) requiring review of status, review of laboratories and other studies and revision of orders and respiratory care plan (as appropriate), within a calendar month, 30 minutes or more	1
94010	Spirometry, including graphic record, total and timed vital capacity, expiratory flow rate measurement(s), with or without maximal voluntary ventilation	1
94011	Measurement of spirometric forced expiratory flows in an infant or child through 2 years of age	1
94012	Measurement of spirometric forced expiratory flows, before and after bronchodilator, in an infant or child through 2 years of age	1
94013	Measurement of lung volumes (ie, functional residual capacity [FRC], forced vital capacity [FVC], and expiratory reserve volume [ERV]) in an infant or child through 2 years of age	1
94014	Patient-initiated spirometric recording per 30-day period of time; includes reinforced education, transmission of spirometric tracing, data capture, analysis of transmitted data, periodic recalibration and review and interpretation by a physician or other qualified health care professional	1
94015	Patient-initiated spirometric recording per 30-day period of time; recording (includes hook-up, reinforced education, data transmission, data capture, trend analysis, and periodic recalibration)	1
94016	Patient-initiated spirometric recording per 30-day period of time; review and interpretation only by a physician or other qualified health care professional	1
94060	Bronchodilation responsiveness, spirometry as in 94010, pre- and post- bronchodilator administration	1
94070	Bronchospasm provocation evaluation, multiple spirometric determinations as in 94010, with administered agents (eg, antigen[s], cold air, methacholine)	1
94150	Vital capacity, total (separate procedure)	1
94200	Maximum breathing capacity, maximal voluntary ventilation	1
94375	Respiratory flow volume loop	1
94450	Breathing response to hypoxia (hypoxia response curve)	1
94452	High altitude simulation test (HAST), with interpretation and report by a physician or other qualified health care professional	1
94453	High altitude simulation test (HAST), with interpretation and report by a physician or other qualified health care professional; with supplemental oxygen titration	1

Exercise test for bronchospasm, including pre- and post-spirometry and pulse	1
oximetry; with electrocardiographic recording(s)	
Pulmonary stress testing (eg, 6-minute walk test), including measurement of heart rate, oximetry, and oxygen titration, when performed	1
Exercise test for bronchospasm, including pre- and post-spirometry and pulse oximetry; without electrocardiographic recording(s)	1
Cardiopulmonary exercise testing, including measurements of minute ventilation, CO2 production, O2 uptake, and electrocardiographic recordings	1
Pressurized or nonpressurized inhalation treatment for acute airway obstruction for therapeutic purposes and/or for diagnostic purposes such as sputum induction with an aerosol generator, nebulizer, metered dose inhaler or intermittent positive pressure breathing (IPPB) device	2
Aerosol inhalation of pentamidine for pneumocystis carinii pneumonia treatment or prophylaxis	1
Continuous positive airway pressure ventilation (CPAP), initiation and management	1
Continuous negative pressure ventilation (CNP), initiation and management	1
Demonstration and/or evaluation of patient utilization of an aerosol generator, nebulizer, metered dose inhaler or IPPB device	1
Manipulation chest wall, such as cupping, percussing, and vibration to facilitate lung function; initial demonstration and/or evaluation	1
Manipulation chest wall, such as cupping, percussing, and vibration to facilitate lung function; subsequent	5
Mechanical chest wall oscillation to facilitate lung function, per session	4
Oxygen uptake, expired gas analysis; rest and exercise, direct, simple	1
Oxygen uptake, expired gas analysis; including CO2 output, percentage oxygen extracted	1
Oxygen uptake, expired gas analysis; rest, indirect (separate procedure)	1
Plethysmography for determination of lung volumes and, when performed, airway resistance	1
Gas dilution or washout for determination of lung volumes and, when performed, distribution of ventilation and closing volumes	1
Airway resistance by oscillometry	1
Diffusing capacity (eg, carbon monoxide, membrane) (List separately in addition to code for primary procedure)	1
Noninvasive ear or pulse oximetry for oxygen saturation; single determination	1
Noninvasive ear or pulse oximetry for oxygen saturation; multiple determinations (eg, during exercise)	1
Noninvasive ear or pulse oximetry for oxygen saturation; by continuous overnight monitoring (separate procedure)	1
	oximetry; with electrocardiographic recording(s) Pulmonary stress testing (eg, 6-minute walk test), including measurement of heart rate, oximetry, and oxygen titration, when performed Exercise test for bronchospasm, including pre- and post-spirometry and pulse oximetry; without electrocardiographic recording(s) Cardiopulmonary exercise testing, including measurements of minute ventilation, CO2 production, O2 uptake, and electrocardiographic recordings Pressurized or nonpressurized inhalation treatment for acute airway obstruction for therapeutic purposes and/or for diagnostic purposes such as sputum induction with an aerosol generator, nebulizer, metered dose inhaler or intermittent positive pressure breathing (IPPB) device Aerosol inhalation of pentamidine for pneumocystis carinii pneumonia treatment or prophylaxis Continuous positive airway pressure ventilation (CPAP), initiation and management Continuous negative pressure ventilation (CNP), initiation and management Demonstration and/or evaluation of patient utilization of an aerosol generator, nebulizer, metered dose inhaler or IPPB device Manipulation chest wall, such as cupping, percussing, and vibration to facilitate lung function; initial demonstration and/or evaluation Manipulation chest wall, such as cupping, percussing, and vibration to facilitate lung function; subsequent Mechanical chest wall oscillation to facilitate lung function, per session Oxygen uptake, expired gas analysis; rest and exercise, direct, simple Oxygen uptake, expired gas analysis; rest and exercise, direct, simple Oxygen uptake, expired gas analysis; rest, indirect (separate procedure) Plethysmography for determination of lung volumes and, when performed, airway resistance Gas dilution or washout for determination of lung volumes and, when performed, distribution of ventilation and closing volumes Airway resistance by oscillometry Diffusing capacity (eg, carbon monoxide, membrane) (List separately in addition to code for primary procedure) Noninvasive ear or p

94772	Circadian respiratory pattern recording (pediatric pneumogram), 12-24 hour continuous recording, infant	1
94774	Pediatric home apnea monitoring event recording including respiratory rate, pattern and heart rate per 30-day period of time; includes monitor attachment, download of data, review, interpretation, and preparation of a report by a physician or other qualified health care professional	1
94775	Pediatric home apnea monitoring event recording including respiratory rate, pattern and heart rate per 30-day period of time; monitor attachment only (includes hook-up, initiation of recording and disconnection)	1
94776	Pediatric home apnea monitoring event recording including respiratory rate, pattern and heart rate per 30-day period of time; monitoring, download of information, receipt of transmission(s) and analyses by computer only	1
94777	Pediatric home apnea monitoring event recording including respiratory rate, pattern and heart rate per 30-day period of time; review, interpretation and preparation of report only by a physician or other qualified health care professional	1
94780	Car seat/bed testing for airway integrity, for infants through 12 months of age, with continual clinical staff observation and continuous recording of pulse oximetry, heart rate and respiratory rate, with interpretation and report; 60 minutes	1
94781	Car seat/bed testing for airway integrity, for infants through 12 months of age, with continual clinical staff observation and continuous recording of pulse oximetry, heart rate and respiratory rate, with interpretation and report; each additional full 30 minutes (List separately in addition to code for primary procedure)	2
94799	Unlisted pulmonary service or procedure	1
95004	Percutaneous tests (scratch, puncture, prick) with allergenic extracts, immediate type reaction, including test interpretation and report, specify number of tests	100
95012	Nitric oxide expired gas determination	2
95017	Allergy testing, any combination of percutaneous (scratch, puncture, prick) and intracutaneous (intradermal), sequential and incremental, with venoms, immediate type reaction, including test interpretation and report, specify number of tests	50
95018	Allergy testing, any combination of percutaneous (scratch, puncture, prick) and intracutaneous (intradermal), sequential and incremental, with drugs or biologicals, immediate type reaction, including test interpretation and report, specify number of tests	50
95024	Intracutaneous (intradermal) tests with allergenic extracts, immediate type reaction, including test interpretation and report, specify number of tests	50
95027	Intracutaneous (intradermal) tests, sequential and incremental, with allergenic extracts for airborne allergens, immediate type reaction, including test interpretation and report, specify number of tests	15
95028	Intracutaneous (intradermal) tests with allergenic extracts, delayed type reaction, including reading, specify number of tests	50
95044	Patch or application test(s) (specify number of tests)	50
95052	Photo patch test(s) (specify number of tests)	50
95056	Photo tests	1

95060	Ophthalmic mucous membrane tests	1
95065	Direct nasal mucous membrane test	1
95070	Inhalation bronchial challenge testing (not including necessary pulmonary function tests), with histamine, methacholine, or similar compounds	1
95076	Ingestion challenge test (sequential and incremental ingestion of test items, eg, food, drug or other substance); initial 120 minutes of testing	1
95079	Ingestion challenge test (sequential and incremental ingestion of test items, eg, food, drug or other substance); each additional 60 minutes of testing (List separately in addition to code for primary procedure)	1
95115	Professional services for allergen immunotherapy not including provision of allergenic extracts; single injection	1
95117	Professional services for allergen immunotherapy not including provision of allergenic extracts; 2 or more injections	1
95120	Professional services for allergen immunotherapy in the office or institution of the prescribing physician or other qualified health care professional, including provision of allergenic extract; single injection	1
95125	Professional services for allergen immunotherapy in the office or institution of the prescribing physician or other qualified health care professional, including provision of allergenic extract; 2 or more injections	1
95130	Professional services for allergen immunotherapy in the office or institution of the prescribing physician or other qualified health care professional, including provision of allergenic extract; single stinging insect venom	1
95131	Professional services for allergen immunotherapy in the office or institution of the prescribing physician or other qualified health care professional, including provision of allergenic extract; 2 stinging insect venoms	1
95132	Professional services for allergen immunotherapy in the office or institution of the prescribing physician or other qualified health care professional, including provision of allergenic extract; 3 stinging insect venoms	1
95133	Professional services for allergen immunotherapy in the office or institution of the prescribing physician or other qualified health care professional, including provision of allergenic extract; 4 stinging insect venoms	1
95134	Professional services for allergen immunotherapy in the office or institution of the prescribing physician or other qualified health care professional, including provision of allergenic extract; 5 stinging insect venoms	1
95144	Professional services for the supervision of preparation and provision of antigens for allergen immunotherapy, single dose vial(s) (specify number of vials)	30
95145	Professional services for the supervision of preparation and provision of antigens for allergen immunotherapy (specify number of doses); single stinging insect venom	10
95146	Professional services for the supervision of preparation and provision of antigens for allergen immunotherapy (specify number of doses); 2 single stinging insect venoms	10

95147	Professional services for the supervision of preparation and provision of antigens for allergen immunotherapy (specify number of doses); 3 single stinging insect venoms	10
95148	Professional services for the supervision of preparation and provision of antigens for allergen immunotherapy (specify number of doses); 4 single stinging insect venoms	10
95149	Professional services for the supervision of preparation and provision of antigens for allergen immunotherapy (specify number of doses); 5 single stinging insect venoms	10
95165	Professional services for the supervision of preparation and provision of antigens for allergen immunotherapy; single or multiple antigens (specify number of doses)	30
95170	Professional services for the supervision of preparation and provision of antigens for allergen immunotherapy; whole body extract of biting insect or other arthropod (specify number of doses)	10
95180	Rapid desensitization procedure, each hour (eg, insulin, penicillin, equine serum)	24
95199	Unlisted allergy/clinical immunologic service or procedure	1
95249	Ambulatory continuous glucose monitoring of interstitial tissue fluid via a subcutaneous sensor for a minimum of 72 hours; patient-provided equipment, sensor placement, hook-up, calibration of monitor, patient training, and printout of recording	1
95250	Ambulatory continuous glucose monitoring of interstitial tissue fluid via a subcutaneous sensor for a minimum of 72 hours; physician or other qualified health care professional (office) provided equipment, sensor placement, hook-up, calibration of monitor, patient training, removal of sensor, and printout of recording	1
95251	Ambulatory continuous glucose monitoring of interstitial tissue fluid via a subcutaneous sensor for a minimum of 72 hours; analysis, interpretation and report	2
95700	Electroencephalogram (EEG) continuous recording, with video when performed, setup, patient education, and takedown when performed, administered in person by EEG technologist, minimum of 8 channels	1
95705	Electroencephalogram (EEG), without video, review of data, technical description by EEG technologist, 2-12 hours; unmonitored	1
95706	Electroencephalogram (EEG), without video, review of data, technical description by EEG technologist, 2-12 hours; with intermittent monitoring and maintenance	1
95707	Electroencephalogram (EEG), without video, review of data, technical description by EEG technologist, 2-12 hours; with continuous, real-time monitoring and maintenance	1
95708	Electroencephalogram (EEG), without video, review of data, technical description by EEG technologist, each increment of 12-26 hours; unmonitored	1
95709	Electroencephalogram (EEG), without video, review of data, technical description by EEG technologist, each increment of 12-26 hours; with intermittent monitoring and maintenance	1

95710	Electroencephalogram (EEG), without video, review of data, technical description by EEG technologist, each increment of 12-26 hours; with continuous, real-time monitoring and maintenance	1
95711	Electroencephalogram with video (VEEG), review of data, technical description by EEG technologist, 2-12 hours; unmonitored	1
95712	Electroencephalogram with video (VEEG), review of data, technical description by EEG technologist, 2-12 hours; with intermittent monitoring and maintenance	1
95713	Electroencephalogram with video (VEEG), review of data, technical description by EEG technologist, 2-12 hours; with continuous, real-time monitoring and maintenance	1
95714	Electroencephalogram with video (VEEG), review of data, technical description by EEG technologist, each increment of 12-26 hours; unmonitored	1
95715	Electroencephalogram with video (VEEG), review of data, technical description by EEG technologist, each increment of 12-26 hours; with intermittent monitoring and maintenance	1
95716	Electroencephalogram with video (VEEG), review of data, technical description by EEG technologist, each increment of 12-26 hours; with continuous, real-time monitoring and maintenance	1
95717	Electroencephalogram (EEG), continuous recording, physician or other qualified health care professional review of recorded events, analysis of spike and seizure detection, interpretation and report, 2-12 hours of EEG recording; without video	1
95718	Electroencephalogram (EEG), continuous recording, physician or other qualified health care professional review of recorded events, analysis of spike and seizure detection, interpretation and report, 2-12 hours of EEG recording; with video (VEEG)	1
95719	Electroencephalogram (EEG), continuous recording, physician or other qualified health care professional review of recorded events, analysis of spike and seizure detection, each increment of greater than 12 hours, up to 26 hours of EEG recording, interpretation and report after each 24-hour period; without video	1
95720	Electroencephalogram (EEG), continuous recording, physician or other qualified health care professional review of recorded events, analysis of spike and seizure detection, each increment of greater than 12 hours, up to 26 hours of EEG recording, interpretation and report after each 24-hour period; with video (VEEG)	1
95721	Electroencephalogram (EEG), continuous recording, physician or other qualified health care professional review of recorded events, analysis of spike and seizure detection, interpretation, and summary report, complete study; greater than 36 hours, up to 60 hours of EEG recording, without video	1
95722	Electroencephalogram (EEG), continuous recording, physician or other qualified health care professional review of recorded events, analysis of spike and seizure detection, interpretation, and summary report, complete study; greater than 36 hours, up to 60 hours of EEG recording, with video (VEEG)	1
95723	Electroencephalogram (EEG), continuous recording, physician or other qualified health care professional review of recorded events, analysis of spike and seizure detection, interpretation, and summary report, complete study; greater than 60 hours, up to 84 hours of EEG recording, without video	1

95724	Electroencephalogram (EEG), continuous recording, physician or other qualified health care professional review of recorded events, analysis of spike and seizure detection, interpretation, and summary report, complete study; greater than 60 hours, up to 84 hours of EEG recording, with video (VEEG)	1
95725	Electroencephalogram (EEG), continuous recording, physician or other qualified health care professional review of recorded events, analysis of spike and seizure detection, interpretation, and summary report, complete study; greater than 84 hours of EEG recording, without video	1
95726	Electroencephalogram (EEG), continuous recording, physician or other qualified health care professional review of recorded events, analysis of spike and seizure detection, interpretation, and summary report, complete study; greater than 84 hours of EEG recording, with video (VEEG)	1
95782	Polysomnography; younger than 6 years, sleep staging with 4 or more additional parameters of sleep, attended by a technologist	2
95783	Polysomnography; younger than 6 years, sleep staging with 4 or more additional parameters of sleep, with initiation of continuous positive airway pressure therapy or bi-level ventilation, attended by a technologist	2
95800	Sleep study, unattended, simultaneous recording; heart rate, oxygen saturation, respiratory analysis (eg, by airflow or peripheral arterial tone), and sleep time	1
95801	Sleep study, unattended, simultaneous recording; minimum of heart rate, oxygen saturation, and respiratory analysis (eg, by airflow or peripheral arterial tone)	1
95803	Actigraphy testing, recording, analysis, interpretation, and report (minimum of 72 hours to 14 consecutive days of recording)	1
95805	Multiple sleep latency or maintenance of wakefulness testing, recording, analysis and interpretation of physiological measurements of sleep during multiple trials to assess sleepiness	2
95806	Sleep study, unattended, simultaneous recording of, heart rate, oxygen saturation, respiratory airflow, and respiratory effort (eg, thoracoabdominal movement)	1
95807	Sleep study, simultaneous recording of ventilation, respiratory effort, ECG or heart rate, and oxygen saturation, attended by a technologist	2
95808	Polysomnography; any age, sleep staging with 1-3 additional parameters of sleep, attended by a technologist	2
95810	Polysomnography; age 6 years or older, sleep staging with 4 or more additional parameters of sleep, attended by a technologist	2
95811	Polysomnography; age 6 years or older, sleep staging with 4 or more additional parameters of sleep, with initiation of continuous positive airway pressure therapy or bilevel ventilation, attended by a technologist	2
95812	Electroencephalogram (EEG) extended monitoring; 41-60 minutes	1
95813	Electroencephalogram (EEG) extended monitoring; 61-119 minutes	1
95816	Electroencephalogram (EEG); including recording awake and drowsy	1
95819	Electroencephalogram (EEG); including recording awake and asleep	1
95822	Electroencephalogram (EEG); recording in coma or sleep only	1

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95824	Electroencephalogram (EEG); cerebral death evaluation only	1
95829	Electrocorticogram at surgery (separate procedure)	1
95830	Insertion by physician or other qualified health care professional of sphenoidal electrodes for electroencephalographic (EEG) recording	1
95836	Electrocorticogram from an implanted brain neurostimulator pulse generator/transmitter, including recording, with interpretation and written report, up to 30 days	1
95851	Range of motion measurements and report (separate procedure); each extremity (excluding hand) or each trunk section (spine)	7
95852	Range of motion measurements and report (separate procedure); hand, with or without comparison with normal side	7
95857	Cholinesterase inhibitor challenge test for myasthenia gravis	1
95860	Needle electromyography; 1 extremity with or without related paraspinal areas	1
95861	Needle electromyography; 2 extremities with or without related paraspinal areas	1
95863	Needle electromyography; 3 extremities with or without related paraspinal areas	1
95864	Needle electromyography; 4 extremities with or without related paraspinal areas	1
95865	Needle electromyography; larynx	1
95866	Needle electromyography; hemidiaphragm	2
95867	Needle electromyography; cranial nerve supplied muscle(s), unilateral	1
95868	Needle electromyography; cranial nerve supplied muscles, bilateral	1
95869	Needle electromyography; thoracic paraspinal muscles (excluding T1 or T12)	1
95870	Needle electromyography; limited study of muscles in 1 extremity or non-limb (axial) muscles (unilateral or bilateral), other than thoracic paraspinal, cranial nerve supplied muscles, or sphincters	1
95872	Needle electromyography using single fiber electrode, with quantitative measurement of jitter, blocking and/or fiber density, any/all sites of each muscle studied	1
95873	Electrical stimulation for guidance in conjunction with chemodenervation (List separately in addition to code for primary procedure)	1
95874	Needle electromyography for guidance in conjunction with chemodenervation (List separately in addition to code for primary procedure)	1
95875	Ischemic limb exercise test with serial specimen(s) acquisition for muscle(s) metabolite(s)	2
95885	Needle electromyography, each extremity, with related paraspinal areas, when performed, done with nerve conduction, amplitude and latency/velocity study; limited (List separately in addition to code for primary procedure)	4
95886	Needle electromyography, each extremity, with related paraspinal areas, when performed, done with nerve conduction, amplitude and latency/velocity study; complete, five or more muscles studied, innervated by three or more nerves or four or more spinal levels (List separately in addition to code for primary procedure)	4

95887	Needle electromyography, non-extremity (cranial nerve supplied or axial) muscle(s) done with nerve conduction, amplitude and latency/velocity study (List separately in addition to code for primary procedure)	1
95905	Motor and/or sensory nerve conduction, using preconfigured electrode array(s), amplitude and latency/velocity study, each limb, includes F-wave study when performed, with interpretation and report	4
95907	Nerve conduction studies; 1-2 studies	1
95908	Nerve conduction studies; 3-4 studies	1
95909	Nerve conduction studies; 5-6 studies	1
95910	Nerve conduction studies; 7-8 studies	1
95911	Nerve conduction studies; 9-10 studies	1
95912	Nerve conduction studies; 11-12 studies	1
95913	Nerve conduction studies; 13 or more studies	1
95921	Testing of autonomic nervous system function; cardiovagal innervation (parasympathetic function), including 2 or more of the following: heart rate response to deep breathing with recorded R-R interval, Valsalva ratio, and 30:15 ratio	1
95922	Testing of autonomic nervous system function; vasomotor adrenergic innervation (sympathetic adrenergic function), including beat-to-beat blood pressure and R-R interval changes during Valsalva maneuver and at least 5 minutes of passive tilt	1
95923	Testing of autonomic nervous system function; sudomotor, including 1 or more of the following: quantitative sudomotor axon reflex test (QSART), silastic sweat imprint, thermoregulatory sweat test, and changes in sympathetic skin potential	1
95924	Testing of autonomic nervous system function; combined parasympathetic and sympathetic adrenergic function testing with at least 5 minutes of passive tilt	1
95925	Short-latency somatosensory evoked potential study, stimulation of any/all peripheral nerves or skin sites, recording from the central nervous system; in upper limbs	1
95926	Short-latency somatosensory evoked potential study, stimulation of any/all peripheral nerves or skin sites, recording from the central nervous system; in lower limbs	1
95927	Short-latency somatosensory evoked potential study, stimulation of any/all peripheral nerves or skin sites, recording from the central nervous system; in the trunk or head	1
95928	Central motor evoked potential study (transcranial motor stimulation); upper limbs	1
95929	Central motor evoked potential study (transcranial motor stimulation); lower limbs	1
95933	Orbicularis oculi (blink) reflex, by electrodiagnostic testing	1
95937	Neuromuscular junction testing (repetitive stimulation, paired stimuli), each nerve, any 1 method	1

95938	Short-latency somatosensory evoked potential study, stimulation of any/all peripheral nerves or skin sites, recording from the central nervous system; in upper and lower limbs	1
95939	Central motor evoked potential study (transcranial motor stimulation); in upper and lower limbs	1
95940	Continuous intraoperative neurophysiology monitoring in the operating room, one on one monitoring requiring personal attendance, each 15 minutes (List separately in addition to code for primary procedure)	20
95941	Continuous intraoperative neurophysiology monitoring, from outside the operating room (remote or nearby) or for monitoring of more than one case while in the operating room, per hour (List separately in addition to code for primary procedure)	5
95954	Pharmacological or physical activation requiring physician or other qualified health care professional attendance during EEG recording of activation phase (eg, thiopental activation test)	1
95955	Electroencephalogram (EEG) during nonintracranial surgery (eg, carotid surgery)	1
95957	Digital analysis of electroencephalogram (EEG) (eg, for epileptic spike analysis)	1
95958	Wada activation test for hemispheric function, including electroencephalographic (EEG) monitoring	1
95961	Functional cortical and subcortical mapping by stimulation and/or recording of electrodes on brain surface, or of depth electrodes, to provoke seizures or identify vital brain structures; initial hour of attendance by a physician or other qualified health care professional	1
95962	Functional cortical and subcortical mapping by stimulation and/or recording of electrodes on brain surface, or of depth electrodes, to provoke seizures or identify vital brain structures; each additional hour of attendance by a physician or other qualified health care professional (List separately in addition to code for primary procedure)	1
95965	Magnetoencephalography (MEG), recording and analysis; for spontaneous brain magnetic activity (eg, epileptic cerebral cortex localization)	1
95966	Magnetoencephalography (MEG), recording and analysis; for evoked magnetic fields, single modality (eg, sensory, motor, language, or visual cortex localization)	1
95967	Magnetoencephalography (MEG), recording and analysis; for evoked magnetic fields, each additional modality (eg, sensory, motor, language, or visual cortex localization) (List separately in addition to code for primary procedure)	3
95970	Electronic analysis of implanted neurostimulator pulse generator/transmitter (eg, contact group[s], interleaving, amplitude, pulse width, frequency [Hz], on/off cycling, burst, magnet mode, dose lockout, patient selectable parameters, responsive neurostimulation, detection algorithms, closed loop parameters, and passive parameters) by physician or other qualified health care professional; with brain, cranial nerve, spinal cord, peripheral nerve, or sacral nerve, neurostimulator pulse generator/transmitter, without programming	1

95971	Electronic analysis of implanted neurostimulator pulse generator/transmitter (eg, contact group[s], interleaving, amplitude, pulse width, frequency [Hz], on/off cycling, burst, magnet mode, dose lockout, patient selectable parameters, responsive neurostimulation, detection algorithms, closed loop parameters, and passive parameters) by physician or other qualified health care professional; with simple spinal cord or peripheral nerve (eg, sacral nerve) neurostimulator pulse generator/transmitter programming by physician or other qualified health care professional	1
95972	Electronic analysis of implanted neurostimulator pulse generator/transmitter (eg, contact group[s], interleaving, amplitude, pulse width, frequency [Hz], on/off cycling, burst, magnet mode, dose lockout, patient selectable parameters, responsive neurostimulation, detection algorithms, closed loop parameters, and passive parameters) by physician or other qualified health care professional; with complex spinal cord or peripheral nerve (eg, sacral nerve) neurostimulator pulse generator/transmitter programming by physician or other qualified health care professional	1
95976	Electronic analysis of implanted neurostimulator pulse generator/transmitter (eg, contact group[s], interleaving, amplitude, pulse width, frequency [Hz], on/off cycling, burst, magnet mode, dose lockout, patient selectable parameters, responsive neurostimulation, detection algorithms, closed loop parameters, and passive parameters) by physician or other qualified health care professional; with simple cranial nerve neurostimulator pulse generator/transmitter programming by physician or other qualified health care professional	1
95977	Electronic analysis of implanted neurostimulator pulse generator/transmitter (eg, contact group[s], interleaving, amplitude, pulse width, frequency [Hz], on/off cycling, burst, magnet mode, dose lockout, patient selectable parameters, responsive neurostimulation, detection algorithms, closed loop parameters, and passive parameters) by physician or other qualified health care professional; with complex cranial nerve neurostimulator pulse generator/transmitter programming by physician or other qualified health care professional	1
95980	Electronic analysis of implanted neurostimulator pulse generator system (eg, rate, pulse amplitude and duration, configuration of wave form, battery status, electrode selectability, output modulation, cycling, impedance and patient measurements) gastric neurostimulator pulse generator/transmitter; intraoperative, with programming	1
95981	Electronic analysis of implanted neurostimulator pulse generator system (eg, rate, pulse amplitude and duration, configuration of wave form, battery status, electrode selectability, output modulation, cycling, impedance and patient measurements) gastric neurostimulator pulse generator/transmitter; subsequent, without reprogramming	1
95982	Electronic analysis of implanted neurostimulator pulse generator system (eg, rate, pulse amplitude and duration, configuration of wave form, battery status, electrode selectability, output modulation, cycling, impedance and patient measurements) gastric neurostimulator pulse generator/transmitter; subsequent, with reprogramming	1

contact group[s], interleaving, amplitude, pulse width, frequency [Hz], on/off cycling, burst, magnet mode, dose lockout, patient selectable parameters, responsive neurostimulation, detection algorithms, closed loop parameters, and passive parameters) by physician or other qualified health care professional; with brain neurostimulator pulse generator/transmitter programming, each additional 15 minutes face-to-face time with physician or other qualified health care professional (List separately in addition to code for primary procedure) 8efilling and maintenance of implantable pump or reservoir for drug delivery, spinal (intrathecal, epidural) or brain (intraventricular), includes electronic analysis of pump, when performed 8efilling and maintenance of implantable pump or reservoir for drug delivery, spinal (intrathecal, epidural) or brain (intraventricular), includes electronic analysis of pump, when performed; requiring skill of a physician or other qualified health care professional 95992 Canalith repositioning procedure(s) (eg, Epley maneuver, Semont maneuver), per day 95999 Unlisted neurological or neuromuscular diagnostic procedure 1 Comprehensive computer-based motion analysis by video-taping and 3D kinematics 96000 Comprehensive computer-based motion analysis by video-taping and 3D 1 kinematics; with dynamic plantar pressure measurements during walking 96002 Dynamic surface electromyography, during walking or other functional activities, 1-12 muscles 96003 Dynamic fine wire electromyography, during walking or other functional activities, 1 muscle 96004 Review and interpretation by physician or other qualified health care professional of comprehensive computer-based motion analysis, dynamic plantar pressure measurements, dynamic surface electromyography during walking or other functional activities, and dynamic fine wire electromyography, with written report 96000 Neurofunctional testing selection and administration during noninvasive imaging functional brain mapping, with test administered ent			
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(intrathecal, epidural) or brain (intraventricular), includes electronic analysis of pump, when performed; requiring skill of a physician or other qualified health care professional 2	95990	(intrathecal, epidural) or brain (intraventricular), includes electronic analysis of	1
day 95999 Unlisted neurological or neuromuscular diagnostic procedure 1 96000 Comprehensive computer-based motion analysis by video-taping and 3D kinematics 1 96001 Comprehensive computer-based motion analysis by video-taping and 3D kinematics; with dynamic plantar pressure measurements during walking 1 12 12 12 13 14 15 16 16 16 16 16 16 16	95991	(intrathecal, epidural) or brain (intraventricular), includes electronic analysis of pump, when performed; requiring skill of a physician or other qualified health care	1
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Comprehensive computer-based motion analysis by video-taping and 3D kinematics; with dynamic plantar pressure measurements during walking	95999	Unlisted neurological or neuromuscular diagnostic procedure	1
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patient/family 96105 Assessment of aphasia (includes assessment of expressive and receptive speech and 1	96020	functional brain mapping, with test administered entirely by a physician or other qualified health care professional (ie, psychologist), with review of test results and	1
	96040		2
idinguage runetion, language comprehension, special production domey, reading,	96105	Assessment of aphasia (includes assessment of expressive and receptive speech and language function, language comprehension, speech production ability, reading,	1

	spelling, writing, eg, by Boston Diagnostic Aphasia Examination) with interpretation and report, per hour	
96110	Developmental screening (eg, developmental milestone survey, speech and language delay screen), with scoring and documentation, per standardized instrument	2
96112	Developmental test administration (including assessment of fine and/or gross motor, language, cognitive level, social, memory and/or executive functions by standardized developmental instruments when performed), by physician or other qualified health care professional, with interpretation and report; first hour	1
96113	Developmental test administration (including assessment of fine and/or gross motor, language, cognitive level, social, memory and/or executive functions by standardized developmental instruments when performed), by physician or other qualified health care professional, with interpretation and report; each additional 30 minutes (List separately in addition to code for primary procedure)	6
96116	Neurobehavioral status exam (clinical assessment of thinking, reasoning and judgment, [eg, acquired knowledge, attention, language, memory, planning and problem solving, and visual spatial abilities]), by physician or other qualified health care professional, both face-to-face time with the patient and time interpreting test results and preparing the report; first hour	1
96121	Neurobehavioral status exam (clinical assessment of thinking, reasoning and judgment, [eg, acquired knowledge, attention, language, memory, planning and problem solving, and visual spatial abilities]), by physician or other qualified health care professional, both face-to-face time with the patient and time interpreting test results and preparing the report; each additional hour (List separately in addition to code for primary procedure)	5
96125	Standardized cognitive performance testing (eg, Ross Information Processing Assessment) per hour of a qualified health care professional's time, both face-to-face time administering tests to the patient and time interpreting these test results and preparing the report	3
96127	Brief emotional/behavioral assessment (eg, depression inventory, attention-deficit/hyperactivity disorder [ADHD] scale), with scoring and documentation, per standardized instrument	1
96130	Psychological testing evaluation services by physician or other qualified health care professional, including integration of patient data, interpretation of standardized test results and clinical data, clinical decision making, treatment planning and report, and interactive feedback to the patient, family member(s) or caregiver(s), when performed; first hour	1
96131	Psychological testing evaluation services by physician or other qualified health care professional, including integration of patient data, interpretation of standardized test results and clinical data, clinical decision making, treatment planning and report, and interactive feedback to the patient, family member(s) or caregiver(s), when performed; each additional hour (List separately in addition to code for primary procedure)	5
96132	Neuropsychological testing evaluation services by physician or other qualified health care professional, including integration of patient data, interpretation of standardized test results and clinical data, clinical decision making, treatment	1

	planning and report, and interactive feedback to the patient, family member(s) or caregiver(s), when performed; first hour	
96133	Neuropsychological testing evaluation services by physician or other qualified health care professional, including integration of patient data, interpretation of standardized test results and clinical data, clinical decision making, treatment planning and report, and interactive feedback to the patient, family member(s) or caregiver(s), when performed; each additional hour (List separately in addition to code for primary procedure)	5
96136	Psychological or neuropsychological test administration and scoring by physician or other qualified health care professional, two or more tests, any method; first 30 minutes	1
96137	Psychological or neuropsychological test administration and scoring by physician or other qualified health care professional, two or more tests, any method; each additional 30 minutes (List separately in addition to code for primary procedure)	11
96138	Psychological or neuropsychological test administration and scoring by technician, two or more tests, any method; first 30 minutes	1
96139	Psychological or neuropsychological test administration and scoring by technician, two or more tests, any method; each additional 30 minutes (List separately in addition to code for primary procedure)	11
96146	Psychological or neuropsychological test administration, with single automated, standardized instrument via electronic platform, with automated result only	1
96151	Health and behavior assessment (eg, health-focused clinical interview, behavioral observations, psychophysiological monitoring, health-oriented questionnaires), each 15 minutes face-to-face with the patient; re-assessment	6
96153	Health and behavior intervention, each 15 minutes, face-to-face; group (2 or more patients)	12
96154	Health and behavior intervention, each 15 minutes, face-to-face; family (with the patient present)	8
96156	Health behavior assessment, or re-assessment (ie, health-focused clinical interview, behavioral observations, clinical decision making)	1
96158	Health behavior intervention, individual, face-to-face; initial 30 minutes	1
96159	Health behavior intervention, individual, face-to-face; each additional 15 minutes (List separately in addition to code for primary service)	4
96160	Administration of patient-focused health risk assessment instrument (eg, health hazard appraisal) with scoring and documentation, per standardized instrument	1
96161	Administration of caregiver-focused health risk assessment instrument (eg, depression inventory) for the benefit of the patient, with scoring and documentation, per standardized instrument	1
96164	Health behavior intervention, group (2 or more patients), face-to-face; initial 30 minutes	1
96165	Health behavior intervention, group (2 or more patients), face-to-face; each additional 15 minutes (List separately in addition to code for primary service)	6

96167	Health behavior intervention, family (with the patient present), face-to-face; initial 30 minutes	1
96168	Health behavior intervention, family (with the patient present), face-to-face; each additional 15 minutes (List separately in addition to code for primary service)	6
96360	Intravenous infusion, hydration; initial, 31 minutes to 1 hour	1
96361	Intravenous infusion, hydration; each additional hour (List separately in addition to code for primary procedure)	7
96365	Intravenous infusion, for therapy, prophylaxis, or diagnosis (specify substance or drug); initial, up to 1 hour	1
96366	Intravenous infusion, for therapy, prophylaxis, or diagnosis (specify substance or drug); each additional hour (List separately in addition to code for primary procedure)	7
96367	Intravenous infusion, for therapy, prophylaxis, or diagnosis (specify substance or drug); additional sequential infusion of a new drug/substance, up to 1 hour (List separately in addition to code for primary procedure)	1
96368	Intravenous infusion, for therapy, prophylaxis, or diagnosis (specify substance or drug); concurrent infusion (List separately in addition to code for primary procedure)	1
96369	Subcutaneous infusion for therapy or prophylaxis (specify substance or drug); initial, up to 1 hour, including pump set-up and establishment of subcutaneous infusion site(s)	1
96370	Subcutaneous infusion for therapy or prophylaxis (specify substance or drug); each additional hour (List separately in addition to code for primary procedure)	7
96371	Subcutaneous infusion for therapy or prophylaxis (specify substance or drug); additional pump set-up with establishment of new subcutaneous infusion site(s) (List separately in addition to code for primary procedure)	1
96372	Therapeutic, prophylactic, or diagnostic injection (specify substance or drug); subcutaneous or intramuscular	3
96373	Therapeutic, prophylactic, or diagnostic injection (specify substance or drug); intra- arterial	3
96374	Therapeutic, prophylactic, or diagnostic injection (specify substance or drug); intravenous push, single or initial substance/drug	1
96375	Therapeutic, prophylactic, or diagnostic injection (specify substance or drug); each additional sequential intravenous push of a new substance/drug (List separately in addition to code for primary procedure)	3
96376	Therapeutic, prophylactic, or diagnostic injection (specify substance or drug); each additional sequential intravenous push of the same substance/drug provided in a facility (List separately in addition to code for primary procedure)	10
96377	Application of on-body injector (includes cannula insertion) for timed subcutaneous injection	1
96379	Unlisted therapeutic, prophylactic, or diagnostic intravenous or intra-arterial injection or infusion	2

96401	Chemotherapy administration, subcutaneous or intramuscular; non-hormonal anti- neoplastic	1
96402	Chemotherapy administration, subcutaneous or intramuscular; hormonal antineoplastic	1
96405	Chemotherapy administration; intralesional, up to and including 7 lesions	1
96406	Chemotherapy administration; intralesional, more than 7 lesions	1
96409	Chemotherapy administration; intravenous, push technique, single or initial substance/drug	1
96411	Chemotherapy administration; intravenous, push technique, each additional substance/drug (List separately in addition to code for primary procedure)	3
96413	Chemotherapy administration, intravenous infusion technique; up to 1 hour, single or initial substance/drug	1
96415	Chemotherapy administration, intravenous infusion technique; each additional hour (List separately in addition to code for primary procedure)	7
96416	Chemotherapy administration, intravenous infusion technique; initiation of prolonged chemotherapy infusion (more than 8 hours), requiring use of a portable or implantable pump	1
96417	Chemotherapy administration, intravenous infusion technique; each additional sequential infusion (different substance/drug), up to 1 hour (List separately in addition to code for primary procedure)	3
96420	Chemotherapy administration, intra-arterial; push technique	1
96422	Chemotherapy administration, intra-arterial; infusion technique, up to 1 hour	1
96423	Chemotherapy administration, intra-arterial; infusion technique, each additional hour (List separately in addition to code for primary procedure)	1
96425	Chemotherapy administration, intra-arterial; infusion technique, initiation of prolonged infusion (more than 8 hours), requiring the use of a portable or implantable pump	1
96440	Chemotherapy administration into pleural cavity, requiring and including thoracentesis	1
96446	Chemotherapy administration into the peritoneal cavity via indwelling port or catheter	1
96450	Chemotherapy administration, into CNS (eg, intrathecal), requiring and including spinal puncture	1
96521	Refilling and maintenance of portable pump	1
96522	Refilling and maintenance of implantable pump or reservoir for drug delivery, systemic (eg, intravenous, intra-arterial)	1
96523	Irrigation of implanted venous access device for drug delivery systems	1
96542	Chemotherapy injection, subarachnoid or intraventricular via subcutaneous reservoir, single or multiple agents	1
96549	Unlisted chemotherapy procedure	1

96567	Photodynamic therapy by external application of light to destroy premalignant lesions of the skin and adjacent mucosa with application and illumination/activation of photosensitive drug(s), per day	1
96570	Photodynamic therapy by endoscopic application of light to ablate abnormal tissue via activation of photosensitive drug(s); first 30 minutes (List separately in addition to code for endoscopy or bronchoscopy procedures of lung and gastrointestinal tract)	1
96571	Photodynamic therapy by endoscopic application of light to ablate abnormal tissue via activation of photosensitive drug(s); each additional 15 minutes (List separately in addition to code for endoscopy or bronchoscopy procedures of lung and gastrointestinal tract)	2
96573	Photodynamic therapy by external application of light to destroy premalignant lesions of the skin and adjacent mucosa with application and illumination/activation of photosensitizing drug(s) provided by a physician or other qualified health care professional, per day	1
96574	Debridement of premalignant hyperkeratotic lesion(s) (ie, targeted curettage, abrasion) followed with photodynamic therapy by external application of light to destroy premalignant lesions of the skin and adjacent mucosa with application and illumination/activation of photosensitizing drug(s) provided by a physician or other qualified health care professional, per day	1
96900	Actinotherapy (ultraviolet light)	1
96902	Microscopic examination of hairs plucked or clipped by the examiner (excluding hair collected by the patient) to determine telogen and anagen counts, or structural hair shaft abnormality	1
96904	Whole body integumentary photography, for monitoring of high risk patients with dysplastic nevus syndrome or a history of dysplastic nevi, or patients with a personal or familial history of melanoma	1
96910	Photochemotherapy; tar and ultraviolet B (Goeckerman treatment) or petrolatum and ultraviolet B	1
96912	Photochemotherapy; psoralens and ultraviolet A (PUVA)	1
96913	Photochemotherapy (Goeckerman and/or PUVA) for severe photoresponsive dermatoses requiring at least 4-8 hours of care under direct supervision of the physician (includes application of medication and dressings)	1
96920	Laser treatment for inflammatory skin disease (psoriasis); total area less than 250 sq cm	1
96921	Laser treatment for inflammatory skin disease (psoriasis); 250 sq cm to 500 sq cm	1
96922	Laser treatment for inflammatory skin disease (psoriasis); over 500 sq cm	1
96931	Reflectance confocal microscopy (RCM) for cellular and sub-cellular imaging of skin; image acquisition and interpretation and report, first lesion	1
96932	Reflectance confocal microscopy (RCM) for cellular and sub-cellular imaging of skin; image acquisition only, first lesion	1
96933	Reflectance confocal microscopy (RCM) for cellular and sub-cellular imaging of skin; interpretation and report only, first lesion	1

96934	Reflectance confocal microscopy (RCM) for cellular and sub-cellular imaging of skin; image acquisition and interpretation and report, each additional lesion (List separately in addition to code for primary procedure)	2
96935	Reflectance confocal microscopy (RCM) for cellular and sub-cellular imaging of skin; image acquisition only, each additional lesion (List separately in addition to code for primary procedure)	2
96936	Reflectance confocal microscopy (RCM) for cellular and sub-cellular imaging of skin; interpretation and report only, each additional lesion (List separately in addition to code for primary procedure)	2
96999	Unlisted special dermatological service or procedure	1
97010	Application of a modality to 1 or more areas; hot or cold packs	1
97012	Application of a modality to 1 or more areas; traction, mechanical	1
97014	Application of a modality to 1 or more areas; electrical stimulation (unattended)	1
97016	Application of a modality to 1 or more areas; vasopneumatic devices	1
97018	Application of a modality to 1 or more areas; paraffin bath	1
97022	Application of a modality to 1 or more areas; whirlpool	1
97024	Application of a modality to 1 or more areas; diathermy (eg, microwave)	1
97026	Application of a modality to 1 or more areas; infrared	1
97028	Application of a modality to 1 or more areas; ultraviolet	1
97032	Application of a modality to 1 or more areas; electrical stimulation (manual), each 15 minutes	1
97033	Application of a modality to 1 or more areas; iontophoresis, each 15 minutes	1
97034	Application of a modality to 1 or more areas; contrast baths, each 15 minutes	1
97035	Application of a modality to 1 or more areas; ultrasound, each 15 minutes	1
97036	Application of a modality to 1 or more areas; Hubbard tank, each 15 minutes	1
97039	Unlisted modality (specify type and time if constant attendance)	1
97110	Therapeutic procedure, 1 or more areas, each 15 minutes; therapeutic exercises to develop strength and endurance, range of motion and flexibility	32
97112	Therapeutic procedure, 1 or more areas, each 15 minutes; neuromuscular reeducation of movement, balance, coordination, kinesthetic sense, posture, and/or proprioception for sitting and/or standing activities	4
97113	Therapeutic procedure, 1 or more areas, each 15 minutes; aquatic therapy with therapeutic exercises	4
97116	Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)	4
97124	Therapeutic procedure, 1 or more areas, each 15 minutes; massage, including effleurage, petrissage and/or tapotement (stroking, compression, percussion)	2

97129	Therapeutic interventions that focus on cognitive function (eg, attention, memory, reasoning, executive function, problem solving, and/or pragmatic functioning) and compensatory strategies to manage the performance of an activity (eg, managing time or schedules, initiating, organizing, and sequencing tasks), direct (one-on-one) patient contact; initial 15 minutes	1
97130	Therapeutic interventions that focus on cognitive function (eg, attention, memory, reasoning, executive function, problem solving, and/or pragmatic functioning) and compensatory strategies to manage the performance of an activity (eg, managing time or schedules, initiating, organizing, and sequencing tasks), direct (one-on-one) patient contact; each additional 15 minutes (List separately in addition to code for primary procedure)	3
97139	Unlisted therapeutic procedure (specify)	1
97140	Manual therapy techniques (eg, mobilization/ manipulation, manual lymphatic drainage, manual traction), 1 or more regions, each 15 minutes	2
97150	Therapeutic procedure(s), group (2 or more individuals)	2
97151	Behavior identification assessment, administered by a physician or other qualified health care professional, each 15 minutes of the physician's or other qualified health care professional's time face-to-face with patient and/or guardian(s)/caregiver(s) administering assessments and discussing findings and recommendations, and non-face-to-face analyzing past data, scoring/interpreting the assessment, and preparing the report/treatment plan	48
97152	Behavior identification-supporting assessment, administered by one technician under the direction of a physician or other qualified health care professional, face-to-face with the patient, each 15 minutes	48
97153	Adaptive behavior treatment by protocol, administered by technician under the direction of a physician or other qualified health care professional, face-to-face with one patient, each 15 minutes	32
97154	Group adaptive behavior treatment by protocol, administered by technician under the direction of a physician or other qualified health care professional, face-to-face with two or more patients, each 15 minutes	32
97155	Adaptive behavior treatment with protocol modification, administered by physician or other qualified health care professional, which may include simultaneous direction of technician, face-to-face with one patient, each 15 minutes	32
97156	Family adaptive behavior treatment guidance, administered by physician or other qualified health care professional (with or without the patient present), face-to-face with guardian(s)/caregiver(s), each 15 minutes	16
97157	Multiple-family group adaptive behavior treatment guidance, administered by physician or other qualified health care professional (without the patient present), face-to-face with multiple sets of guardians/caregivers, each 15 minutes	16
97158	Group adaptive behavior treatment with protocol modification, administered by physician or other qualified health care professional, face-to-face with multiple patients, each 15 minutes	32

97161	Physical therapy evaluation: low complexity, requiring these components: A history with no personal factors and/or comorbidities that impact the plan of care; An examination of body system(s) using standardized tests and measures addressing 1-2 elements from any of the following: body structures and functions, activity limitations, and/or participation restrictions; A clinical presentation with stable and/or uncomplicated characteristics; and Clinical decision making of low complexity using standardized patient assessment instrument and/or measurable assessment of functional outcome. Typically, 20 minutes are spent face-to-face with the patient and/or family.	1
97162	Physical therapy evaluation: moderate complexity, requiring these components: A history of present problem with 1-2 personal factors and/or comorbidities that impact the plan of care; An examination of body systems using standardized tests and measures in addressing a total of 3 or more elements from any of the following: body structures and functions, activity limitations, and/or participation restrictions; An evolving clinical presentation with changing characteristics; and Clinical decision making of moderate complexity using standardized patient assessment instrument and/or measurable assessment of functional outcome. Typically, 30 minutes are spent face-to-face with the patient and/or family.	1
97163	Physical therapy evaluation: high complexity, requiring these components: A history of present problem with 3 or more personal factors and/or comorbidities that impact the plan of care; An examination of body systems using standardized tests and measures addressing a total of 4 or more elements from any of the following: body structures and functions, activity limitations, and/or participation restrictions; A clinical presentation with unstable and unpredictable characteristics; and Clinical decision making of high complexity using standardized patient assessment instrument and/or measurable assessment of functional outcome. Typically, 45 minutes are spent face-to-face with the patient and/or family.	1
97164	Re-evaluation of physical therapy established plan of care, requiring these components: An examination including a review of history and use of standardized tests and measures is required; and Revised plan of care using a standardized patient assessment instrument and/or measurable assessment of functional outcome Typically, 20 minutes are spent face-to-face with the patient and/or family.	1
97165	Occupational therapy evaluation, low complexity, requiring these components: An occupational profile and medical and therapy history, which includes a brief history including review of medical and/or therapy records relating to the presenting problem; An assessment(s) that identifies 1-3 performance deficits (ie, relating to physical, cognitive, or psychosocial skills) that result in activity limitations and/or participation restrictions; and Clinical decision making of low complexity, which includes an analysis of the occupational profile, analysis of data from problemfocused assessment(s), and consideration of a limited number of treatment options. Patient presents with no comorbidities that affect occupational performance. Modification of tasks or assistance (eg, physical or verbal) with assessment(s) is not necessary to enable completion of evaluation component. Typically, 30 minutes are spent face-to-face with the patient and/or family.	1

97166	Occupational therapy evaluation, moderate complexity, requiring these components: An occupational profile and medical and therapy history, which includes an expanded review of medical and/or therapy records and additional review of physical, cognitive, or psychosocial history related to current functional performance; An assessment(s) that identifies 3-5 performance deficits (ie, relating to physical, cognitive, or psychosocial skills) that result in activity limitations and/or participation restrictions; and Clinical decision making of moderate analytic complexity, which includes an analysis of the occupational profile, analysis of data from detailed assessment(s), and consideration of several treatment options. Patient may present with comorbidities that affect occupational performance. Minimal to moderate modification of tasks or assistance (eg, physical or verbal) with assessment(s) is necessary to enable patient to complete evaluation component. Typically, 45 minutes are spent face-to-face with the patient and/or family.	1
97167	Occupational therapy evaluation, high complexity, requiring these components: An occupational profile and medical and therapy history, which includes review of medical and/or therapy records and extensive additional review of physical, cognitive, or psychosocial history related to current functional performance; An assessment(s) that identifies 5 or more performance deficits (ie, relating to physical, cognitive, or psychosocial skills) that result in activity limitations and/or participation restrictions; and Clinical decision making of high analytic complexity, which includes an analysis of the patient profile, analysis of data from comprehensive assessment(s), and consideration of multiple treatment options. Patient presents with comorbidities that affect occupational performance. Significant modification of tasks or assistance (eg, physical or verbal) with assessment(s) is necessary to enable patient to complete evaluation component. Typically, 60 minutes are spent face-to-face with the patient and/or family.	1
97168	Re-evaluation of occupational therapy established plan of care, requiring these components: An assessment of changes in patient functional or medical status with revised plan of care; An update to the initial occupational profile to reflect changes in condition or environment that affect future interventions and/or goals; and A revised plan of care. A formal reevaluation is performed when there is a documented change in functional status or a significant change to the plan of care is required. Typically, 30 minutes are spent face-to-face with the patient and/or family.	1
97169	Athletic training evaluation, low complexity, requiring these components: A history and physical activity profile with no comorbidities that affect physical activity; An examination of affected body area and other symptomatic or related systems addressing 1-2 elements from any of the following: body structures, physical activity, and/or participation deficiencies; and Clinical decision making of low complexity using standardized patient assessment instrument and/or measurable assessment of functional outcome. Typically, 15 minutes are spent face-to-face with the patient and/or family.	1
97170	Athletic training evaluation, moderate complexity, requiring these components: A medical history and physical activity profile with 1-2 comorbidities that affect physical activity; An examination of affected body area and other symptomatic or related systems addressing a total of 3 or more elements from any of the following: body structures, physical activity, and/or participation deficiencies; and Clinical decision making of moderate complexity using standardized patient assessment	1

	instrument and/or measurable assessment of functional outcome. Typically, 30 minutes are spent face-to-face with the patient and/or family.	
97171	Athletic training evaluation, high complexity, requiring these components: A medical history and physical activity profile, with 3 or more comorbidities that affect physical activity; A comprehensive examination of body systems using standardized tests and measures addressing a total of 4 or more elements from any of the following: body structures, physical activity, and/or participation deficiencies; Clinical presentation with unstable and unpredictable characteristics; and Clinical decision making of high complexity using standardized patient assessment instrument and/or measurable assessment of functional outcome. Typically, 45 minutes are spent face-to-face with the patient and/or family.	1
97530	Therapeutic activities, direct (one-on-one) patient contact (use of dynamic activities to improve functional performance), each 15 minutes	6
97533	Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-one) patient contact, each 15 minutes	64
97535	Self-care/home management training (eg, activities of daily living (ADL) and compensatory training, meal preparation, safety procedures, and instructions in use of assistive technology devices/adaptive equipment) direct one-on-one contact, each 15 minutes	8
97537	Community/work reintegration training (eg, shopping, transportation, money management, avocational activities and/or work environment/modification analysis, work task analysis, use of assistive technology device/adaptive equipment), direct one-on-one contact, each 15 minutes	8
97542	Wheelchair management (eg, assessment, fitting, training), each 15 minutes	8
97545	Work hardening/conditioning; initial 2 hours	1
97546	Work hardening/conditioning; each additional hour (List separately in addition to code for primary procedure)	2
97597	Debridement (eg, high pressure waterjet with/without suction, sharp selective debridement with scissors, scalpel and forceps), open wound, (eg, fibrin, devitalized epidermis and/or dermis, exudate, debris, biofilm), including topical application(s), wound assessment, use of a whirlpool, when performed and instruction(s) for ongoing care, per session, total wound(s) surface area; first 20 sq cm or less	1
97598	Debridement (eg, high pressure waterjet with/without suction, sharp selective debridement with scissors, scalpel and forceps), open wound, (eg, fibrin, devitalized epidermis and/or dermis, exudate, debris, biofilm), including topical application(s), wound assessment, use of a whirlpool, when performed and instruction(s) for ongoing care, per session, total wound(s) surface area; each additional 20 sq cm, or part thereof (List separately in addition to code for primary procedure)	1
97602	Removal of devitalized tissue from wound(s), non-selective debridement, without anesthesia (eg, wet-to-moist dressings, enzymatic, abrasion, larval therapy),	1

	including topical application(s), wound assessment, and instruction(s) for ongoing care, per session	
97605	Negative pressure wound therapy (eg, vacuum assisted drainage collection), utilizing durable medical equipment (DME), including topical application(s), wound assessment, and instruction(s) for ongoing care, per session; total wound(s) surface area less than or equal to 50 square centimeters	1
97606	Negative pressure wound therapy (eg, vacuum assisted drainage collection), utilizing durable medical equipment (DME), including topical application(s), wound assessment, and instruction(s) for ongoing care, per session; total wound(s) surface area greater than 50 square centimeters	1
97607	Negative pressure wound therapy, (eg, vacuum assisted drainage collection), utilizing disposable, non-durable medical equipment including provision of exudate management collection system, topical application(s), wound assessment, and instructions for ongoing care, per session; total wound(s) surface area less than or equal to 50 square centimeters	1
97608	Negative pressure wound therapy, (eg, vacuum assisted drainage collection), utilizing disposable, non-durable medical equipment including provision of exudate management collection system, topical application(s), wound assessment, and instructions for ongoing care, per session; total wound(s) surface area greater than 50 square centimeters	1
97610	Low frequency, non-contact, non-thermal ultrasound, including topical application(s), when performed, wound assessment, and instruction(s) for ongoing care, per day	1
97750	Physical performance test or measurement (eg, musculoskeletal, functional capacity), with written report, each 15 minutes	4
97755	Assistive technology assessment (eg, to restore, augment or compensate for existing function, optimize functional tasks and/or maximize environmental accessibility), direct one-on-one contact, with written report, each 15 minutes	2
97760	Orthotic(s) management and training (including assessment and fitting when not otherwise reported), upper extremity(ies), lower extremity(ies) and/or trunk, initial orthotic(s) encounter, each 15 minutes	6
97761	Prosthetic(s) training, upper and/or lower extremity(ies), initial prosthetic(s) encounter, each 15 minutes	6
97763	Orthotic(s)/prosthetic(s) management and/or training, upper extremity(ies), lower extremity(ies), and/or trunk, subsequent orthotic(s)/prosthetic(s) encounter, each 15 minutes	6
97799	Unlisted physical medicine/rehabilitation service or procedure	1
97802	Medical nutrition therapy; initial assessment and intervention, individual, face-to-face with the patient, each 15 minutes	8
97803	Medical nutrition therapy; re-assessment and intervention, individual, face-to-face with the patient, each 15 minutes	8
97804	Medical nutrition therapy; group (2 or more individual(s)), each 30 minutes	6
97810	Acupuncture, 1 or more needles; without electrical stimulation, initial 15 minutes of personal one-on-one contact with the patient	1

97811	Acupuncture, 1 or more needles; without electrical stimulation, each additional 15 minutes of personal one-on-one contact with the patient, with re-insertion of needle(s) (List separately in addition to code for primary procedure)	2
97813	Acupuncture, 1 or more needles; with electrical stimulation, initial 15 minutes of personal one-on-one contact with the patient	1
97814	Acupuncture, 1 or more needles; with electrical stimulation, each additional 15 minutes of personal one-on-one contact with the patient, with re-insertion of needle(s) (List separately in addition to code for primary procedure)	2
98925	Osteopathic manipulative treatment (OMT); 1-2 body regions involved	1
98926	Osteopathic manipulative treatment (OMT); 3-4 body regions involved	1
98927	Osteopathic manipulative treatment (OMT); 5-6 body regions involved	1
98928	Osteopathic manipulative treatment (OMT); 7-8 body regions involved	1
98929	Osteopathic manipulative treatment (OMT); 9-10 body regions involved	1
98940	Chiropractic manipulative treatment (CMT); spinal, 1-2 regions	1
98941	Chiropractic manipulative treatment (CMT); spinal, 3-4 regions	1
98942	Chiropractic manipulative treatment (CMT); spinal, 5 regions	1
98943	Chiropractic manipulative treatment (CMT); extraspinal, 1 or more regions	1
98966	Telephone assessment and management service provided by a qualified nonphysician health care professional to an established patient, parent, or guardian not originating from a related assessment and management service provided within the previous 7 days nor leading to an assessment and management service or procedure within the next 24 hours or soonest available appointment; 5-10 minutes of medical discussion	2
98967	Telephone assessment and management service provided by a qualified nonphysician health care professional to an established patient, parent, or guardian not originating from a related assessment and management service provided within the previous 7 days nor leading to an assessment and management service or procedure within the next 24 hours or soonest available appointment; 11-20 minutes of medical discussion	2
98968	Telephone assessment and management service provided by a qualified nonphysician health care professional to an established patient, parent, or guardian not originating from a related assessment and management service provided within the previous 7 days nor leading to an assessment and management service or procedure within the next 24 hours or soonest available appointment; 21-30 minutes of medical discussion	2
98970	Qualified nonphysician health care professional online digital assessment and management, for an established patient, for up to 7 days, cumulative time during the 7 days; 5-10 minutes	1
98971	Qualified nonphysician health care professional online digital assessment and management, for an established patient, for up to 7 days, cumulative time during the 7 days; 11-20 minutes	1

98972	Qualified nonphysician health care professional online digital assessment and management, for an established patient, for up to 7 days, cumulative time during the 7 days; 21 or more minutes	1
98975	Remote therapeutic monitoring (eg, respiratory system status, musculoskeletal system status, therapy adherence, therapy response); initial set-up and patient education on use of equipment	1
98976	Remote therapeutic monitoring (eg, respiratory system status, musculoskeletal system status, therapy adherence, therapy response); device(s) supply with scheduled (eg, daily) recording(s) and/or programmed alert(s) transmission to monitor respiratory system, each 30 days	1
98977	Remote therapeutic monitoring (eg, respiratory system status, musculoskeletal system status, therapy adherence, therapy response); device(s) supply with scheduled (eg, daily) recording(s) and/or programmed alert(s) transmission to monitor musculoskeletal system, each 30 days	1
98980	Remote therapeutic monitoring treatment management services, physician or other qualified health care professional time in a calendar month requiring at least one interactive communication with the patient or caregiver during the calendar month; first 20 minutes	1
98981	Remote therapeutic monitoring treatment management services, physician or other qualified health care professional time in a calendar month requiring at least one interactive communication with the patient or caregiver during the calendar month; each additional 20 minutes (List separately in addition to code for primary procedure)	3
99000	Handling and/or conveyance of specimen for transfer from the office to a laboratory	2
99001	Handling and/or conveyance of specimen for transfer from the patient in other than an office to a laboratory (distance may be indicated)	2
99002	Handling, conveyance, and/or any other service in connection with the implementation of an order involving devices (eg, designing, fitting, packaging, handling, delivery or mailing) when devices such as orthotics, protectives, prosthetics are fabricated by an outside laboratory or shop but which items have been designed, and are to be fitted and adjusted by the attending physician or other qualified health care professional	1
99024	Postoperative follow-up visit, normally included in the surgical package, to indicate that an evaluation and management service was performed during a postoperative period for a reason(s) related to the original procedure	1
99050	Services provided in the office at times other than regularly scheduled office hours, or days when the office is normally closed (eg, holidays, Saturday or Sunday), in addition to basic service	4
99051	Service(s) provided in the office during regularly scheduled evening, weekend, or holiday office hours, in addition to basic service	1
99053	Service(s) provided between 10:00 PM and 8:00 AM at 24-hour facility, in addition to basic service	1
99056	Service(s) typically provided in the office, provided out of the office at request of patient, in addition to basic service	1

99058	Service(s) provided on an emergency basis in the office, which disrupts other scheduled office services, in addition to basic service	1
99060	Service(s) provided on an emergency basis, out of the office, which disrupts other scheduled office services, in addition to basic service	1
99070	Supplies and materials (except spectacles), provided by the physician or other qualified health care professional over and above those usually included with the office visit or other services rendered (list drugs, trays, supplies, or materials provided)	1
99071	Educational supplies, such as books, tapes, and pamphlets, for the patient's education at cost to physician or other qualified health care professional	1
99075	Medical testimony	1
99078	Physician or other qualified health care professional qualified by education, training, licensure/regulation (when applicable) educational services rendered to patients in a group setting (eg, prenatal, obesity, or diabetic instructions)	3
99080	Special reports such as insurance forms, more than the information conveyed in the usual medical communications or standard reporting form	1
99082	Unusual travel (eg, transportation and escort of patient)	1
99091	Collection and interpretation of physiologic data (eg, ECG, blood pressure, glucose monitoring) digitally stored and/or transmitted by the patient and/or caregiver to the physician or other qualified health care professional, qualified by education, training, licensure/regulation (when applicable) requiring a minimum of 30 minutes of time, each 30 days	1
99100	Anesthesia for patient of extreme age, younger than 1 year and older than 70 (List separately in addition to code for primary anesthesia procedure)	1
99116	Anesthesia complicated by utilization of total body hypothermia (List separately in addition to code for primary anesthesia procedure)	1
99135	Anesthesia complicated by utilization of controlled hypotension (List separately in addition to code for primary anesthesia procedure)	1
99140	Anesthesia complicated by emergency conditions (specify) (List separately in addition to code for primary anesthesia procedure)	2
99151	Moderate sedation services provided by the same physician or other qualified health care professional performing the diagnostic or therapeutic service that the sedation supports, requiring the presence of an independent trained observer to assist in the monitoring of the patient's level of consciousness and physiological status; initial 15 minutes of intraservice time, patient younger than 5 years of age	1
99152	Moderate sedation services provided by the same physician or other qualified health care professional performing the diagnostic or therapeutic service that the sedation supports, requiring the presence of an independent trained observer to assist in the monitoring of the patient's level of consciousness and physiological status; initial 15 minutes of intraservice time, patient age 5 years or older	1
99153	Moderate sedation services provided by the same physician or other qualified health care professional performing the diagnostic or therapeutic service that the sedation supports, requiring the presence of an independent trained observer to assist in the monitoring of the patient's level of consciousness and physiological	1

	status; each additional 15 minutes intraservice time (List separately in addition to code for primary service)	
99155	Moderate sedation services provided by a physician or other qualified health care professional other than the physician or other qualified health care professional performing the diagnostic or therapeutic service that the sedation supports; initial 15 minutes of intraservice time, patient younger than 5 years of age	1
99156	Moderate sedation services provided by a physician or other qualified health care professional other than the physician or other qualified health care professional performing the diagnostic or therapeutic service that the sedation supports; initial 15 minutes of intraservice time, patient age 5 years or older	1
99157	Moderate sedation services provided by a physician or other qualified health care professional other than the physician or other qualified health care professional performing the diagnostic or therapeutic service that the sedation supports; each additional 15 minutes intraservice time (List separately in addition to code for primary service)	1
99170	Anogenital examination, magnified, in childhood for suspected trauma, including image recording when performed	1
99172	Visual function screening, automated or semi-automated bilateral quantitative determination of visual acuity, ocular alignment, color vision by pseudoisochromatic plates, and field of vision (may include all or some screening of the determination[s] for contrast sensitivity, vision under glare)	32
99173	Screening test of visual acuity, quantitative, bilateral	1
99174	Instrument-based ocular screening (eg, photoscreening, automated-refraction), bilateral; with remote analysis and report	1
99175	Ipecac or similar administration for individual emesis and continued observation until stomach adequately emptied of poison	1
99177	Instrument-based ocular screening (eg, photoscreening, automated-refraction), bilateral; with on-site analysis	1
99183	Physician or other qualified health care professional attendance and supervision of hyperbaric oxygen therapy, per session	1
99184	Initiation of selective head or total body hypothermia in the critically ill neonate, includes appropriate patient selection by review of clinical, imaging and laboratory data, confirmation of esophageal temperature probe location, evaluation of amplitude EEG, supervision of controlled hypothermia, and assessment of patient tolerance of cooling	1
99188	Application of topical fluoride varnish by a physician or other qualified health care professional	4
99190	Assembly and operation of pump with oxygenator or heat exchanger (with or without ECG and/or pressure monitoring); each hour	1
99191	Assembly and operation of pump with oxygenator or heat exchanger (with or without ECG and/or pressure monitoring); 45 minutes	1

99192	Assembly and operation of pump with oxygenator or heat exchanger (with or without ECG and/or pressure monitoring); 30 minutes	1
99195	Phlebotomy, therapeutic (separate procedure)	1
99199	Unlisted special service, procedure or report	1
99201	Office or other outpatient visit for the evaluation and management of a new patient, which requires these 3 key components: A problem focused history; A problem focused examination; Straightforward medical decision making. Counseling and/or coordination of care with other physicians, other qualified health care professionals, or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are self limited or minor. Typically, 10 minutes are spent face-to-face with the patient and/or family.	5
99202	Office or other outpatient visit for the evaluation and management of a new patient, which requires a medically appropriate history and/or examination and straightforward medical decision making. When using time for code selection, 15-29 minutes of total time is spent on the date of the encounter.	5
99203	Office or other outpatient visit for the evaluation and management of a new patient, which requires a medically appropriate history and/or examination and low level of medical decision making. When using time for code selection, 30-44 minutes of total time is spent on the date of the encounter.	5
99204	Office or other outpatient visit for the evaluation and management of a new patient, which requires a medically appropriate history and/or examination and moderate level of medical decision making. When using time for code selection, 45-59 minutes of total time is spent on the date of the encounter.	5
99205	Office or other outpatient visit for the evaluation and management of a new patient, which requires a medically appropriate history and/or examination and high level of medical decision making. When using time for code selection, 60-74 minutes of total time is spent on the date of the encounter.	5
99211	Office or other outpatient visit for the evaluation and management of an established patient that may not require the presence of a physician or other qualified health care professional	5
99212	Office or other outpatient visit for the evaluation and management of an established patient, which requires a medically appropriate history and/or examination and straightforward medical decision making. When using time for code selection, 10-19 minutes of total time is spent on the date of the encounter.	5
99213	Office or other outpatient visit for the evaluation and management of an established patient, which requires a medically appropriate history and/or examination and low level of medical decision making. When using time for code selection, 20-29 minutes of total time is spent on the date of the encounter.	5
99214	Office or other outpatient visit for the evaluation and management of an established patient, which requires a medically appropriate history and/or examination and moderate level of medical decision making. When using time for code selection, 30-39 minutes of total time is spent on the date of the encounter.	5

99215	Office or other outpatient visit for the evaluation and management of an established patient, which requires a medically appropriate history and/or examination and high level of medical decision making. When using time for code selection, 40-54 minutes of total time is spent on the date of the encounter.	5
99217	Observation care discharge day management (This code is to be utilized to report all services provided to a patient on discharge from outpatient hospital "observation status" if the discharge is on other than the initial date of "observation status." To report services to a patient designated as "observation status" or "inpatient status" and discharged on the same date, use the codes for Observation or Inpatient Care Services [including Admission and Discharge Services, 99234-99236 as appropriate.])	1
99218	Initial observation care, per day, for the evaluation and management of a patient which requires these 3 key components: A detailed or comprehensive history; A detailed or comprehensive examination; and Medical decision making that is straightforward or of low complexity. Counseling and/or coordination of care with other physicians, other qualified health care professionals, or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the problem(s) requiring admission to outpatient hospital "observation status" are of low severity. Typically, 30 minutes are spent at the bedside and on the patient's hospital floor or unit.	1
99219	Initial observation care, per day, for the evaluation and management of a patient, which requires these 3 key components: A comprehensive history; A comprehensive examination; and Medical decision making of moderate complexity. Counseling and/or coordination of care with other physicians, other qualified health care professionals, or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the problem(s) requiring admission to outpatient hospital "observation status" are of moderate severity. Typically, 50 minutes are spent at the bedside and on the patient's hospital floor or unit.	1
99220	Initial observation care, per day, for the evaluation and management of a patient, which requires these 3 key components: A comprehensive history; A comprehensive examination; and Medical decision making of high complexity. Counseling and/or coordination of care with other physicians, other qualified health care professionals, or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the problem(s) requiring admission to outpatient hospital "observation status" are of high severity. Typically, 70 minutes are spent at the bedside and on the patient's hospital floor or unit.	1
99221	Initial hospital care, per day, for the evaluation and management of a patient, which requires these 3 key components: A detailed or comprehensive history; A detailed or comprehensive examination; and Medical decision making that is straightforward or of low complexity. Counseling and/or coordination of care with other physicians, other qualified health care professionals, or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the problem(s) requiring admission are of low severity. Typically, 30 minutes are spent at the bedside and on the patient's hospital floor or unit.	1
99222	Initial hospital care, per day, for the evaluation and management of a patient, which requires these 3 key components: A comprehensive history; A comprehensive examination; and Medical decision making of moderate complexity. Counseling and/or coordination of care with other physicians, other qualified health care professionals, or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the problem(s) requiring admission	1

	are of moderate severity. Typically, 50 minutes are spent at the bedside and on the patient's hospital floor or unit.	
99223	Initial hospital care, per day, for the evaluation and management of a patient, which requires these 3 key components: A comprehensive history; A comprehensive examination; and Medical decision making of high complexity. Counseling and/or coordination of care with other physicians, other qualified health care professionals, or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the problem(s) requiring admission are of high severity. Typically, 70 minutes are spent at the bedside and on the patient's hospital floor or unit.	1
99224	Subsequent observation care, per day, for the evaluation and management of a patient, which requires at least 2 of these 3 key components: Problem focused interval history; Problem focused examination; Medical decision making that is straightforward or of low complexity. Counseling and/or coordination of care with other physicians, other qualified health care professionals, or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the patient is stable, recovering, or improving. Typically, 15 minutes are spent at the bedside and on the patient's hospital floor or unit.	1
99225	Subsequent observation care, per day, for the evaluation and management of a patient, which requires at least 2 of these 3 key components: An expanded problem focused interval history; An expanded problem focused examination; Medical decision making of moderate complexity. Counseling and/or coordination of care with other physicians, other qualified health care professionals, or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the patient is responding inadequately to therapy or has developed a minor complication. Typically, 25 minutes are spent at the bedside and on the patient's hospital floor or unit.	1
99226	Subsequent observation care, per day, for the evaluation and management of a patient, which requires at least 2 of these 3 key components: A detailed interval history; A detailed examination; Medical decision making of high complexity. Counseling and/or coordination of care with other physicians, other qualified health care professionals, or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the patient is unstable or has developed a significant complication or a significant new problem. Typically, 35 minutes are spent at the bedside and on the patient's hospital floor or unit.	1
99231	Subsequent hospital care, per day, for the evaluation and management of a patient, which requires at least 2 of these 3 key components: A problem focused interval history; A problem focused examination; Medical decision making that is straightforward or of low complexity. Counseling and/or coordination of care with other physicians, other qualified health care professionals, or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the patient is stable, recovering or improving. Typically, 15 minutes are spent at the bedside and on the patient's hospital floor or unit.	1

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99232	Subsequent hospital care, per day, for the evaluation and management of a patient, which requires at least 2 of these 3 key components: An expanded problem focused interval history; An expanded problem focused examination; Medical decision making of moderate complexity. Counseling and/or coordination of care with other physicians, other qualified health care professionals, or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the patient is responding inadequately to therapy or has developed a minor complication. Typically, 25 minutes are spent at the bedside and on the patient's hospital floor or unit.	1
99233	Subsequent hospital care, per day, for the evaluation and management of a patient, which requires at least 2 of these 3 key components: A detailed interval history; A detailed examination; Medical decision making of high complexity. Counseling and/or coordination of care with other physicians, other qualified health care professionals, or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the patient is unstable or has developed a significant complication or a significant new problem. Typically, 35 minutes are spent at the bedside and on the patient's hospital floor or unit.	1
99234	Observation or inpatient hospital care, for the evaluation and management of a patient including admission and discharge on the same date, which requires these 3 key components: A detailed or comprehensive history; A detailed or comprehensive examination; and Medical decision making that is straightforward or of low complexity. Counseling and/or coordination of care with other physicians, other qualified health care professionals, or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually the presenting problem(s) requiring admission are of low severity. Typically, 40 minutes are spent at the bedside and on the patient's hospital floor or unit.	1
99235	Observation or inpatient hospital care, for the evaluation and management of a patient including admission and discharge on the same date, which requires these 3 key components: A comprehensive history; A comprehensive examination; and Medical decision making of moderate complexity. Counseling and/or coordination of care with other physicians, other qualified health care professionals, or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually the presenting problem(s) requiring admission are of moderate severity. Typically, 50 minutes are spent at the bedside and on the patient's hospital floor or unit.	1
99236	Observation or inpatient hospital care, for the evaluation and management of a patient including admission and discharge on the same date, which requires these 3 key components: A comprehensive history; A comprehensive examination; and Medical decision making of high complexity. Counseling and/or coordination of care with other physicians, other qualified health care professionals, or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually the presenting problem(s) requiring admission are of high severity. Typically, 55 minutes are spent at the bedside and on the patient's hospital floor or unit.	1
99241	Office consultation for a new or established patient, which requires these 3 key components: A problem focused history; A problem focused examination; and Straightforward medical decision making. Counseling and/or coordination of care with other physicians, other qualified health care professionals, or agencies are provided consistent with the nature of the problem(s) and the patient's and/or	5

	family's needs. Usually, the presenting problem(s) are self limited or minor. Typically, 15 minutes are spent face-to-face with the patient and/or family.	
99242	Office consultation for a new or established patient, which requires these 3 key components: An expanded problem focused history; An expanded problem focused examination; and Straightforward medical decision making. Counseling and/or coordination of care with other physicians, other qualified health care professionals, or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of low severity. Typically, 30 minutes are spent face-to-face with the patient and/or family.	5
99243	Office consultation for a new or established patient, which requires these 3 key components: A detailed history; A detailed examination; and Medical decision making of low complexity. Counseling and/or coordination of care with other physicians, other qualified health care professionals, or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of moderate severity. Typically, 40 minutes are spent face-to-face with the patient and/or family.	5
99244	Office consultation for a new or established patient, which requires these 3 key components: A comprehensive history; A comprehensive examination; and Medical decision making of moderate complexity. Counseling and/or coordination of care with other physicians, other qualified health care professionals, or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of moderate to high severity. Typically, 60 minutes are spent face-to-face with the patient and/or family.	5
99245	Office consultation for a new or established patient, which requires these 3 key components: A comprehensive history; A comprehensive examination; and Medical decision making of high complexity. Counseling and/or coordination of care with other physicians, other qualified health care professionals, or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of moderate to high severity. Typically, 80 minutes are spent face-to-face with the patient and/or family.	5
99251	Inpatient consultation for a new or established patient, which requires these 3 key components: A problem focused history; A problem focused examination; and Straightforward medical decision making. Counseling and/or coordination of care with other physicians, other qualified health care professionals, or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are self limited or minor. Typically, 20 minutes are spent at the bedside and on the patient's hospital floor or unit.	5
99252	Inpatient consultation for a new or established patient, which requires these 3 key components: An expanded problem focused history; An expanded problem focused examination; and Straightforward medical decision making. Counseling and/or coordination of care with other physicians, other qualified health care professionals, or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of low severity. Typically, 40 minutes are spent at the bedside and on the patient's hospital floor or unit.	5

99253	Inpatient consultation for a new or established patient, which requires these 3 key components: A detailed history; A detailed examination; and Medical decision making of low complexity. Counseling and/or coordination of care with other physicians, other qualified health care professionals, or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of moderate severity. Typically, 55 minutes are spent at the bedside and on the patient's hospital floor or unit.	5
99254	Inpatient consultation for a new or established patient, which requires these 3 key components: A comprehensive history; A comprehensive examination; and Medical decision making of moderate complexity. Counseling and/or coordination of care with other physicians, other qualified health care professionals, or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of moderate to high severity. Typically, 80 minutes are spent at the bedside and on the patient's hospital floor or unit.	5
99255	Inpatient consultation for a new or established patient, which requires these 3 key components: A comprehensive history; A comprehensive examination; and Medical decision making of high complexity. Counseling and/or coordination of care with other physicians, other qualified health care professionals, or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of moderate to high severity. Typically, 110 minutes are spent at the bedside and on the patient's hospital floor or unit.	5
99261	FOLLOWUP INPT CONSULT, 2+ COMPONENTS:PROB FOCUS INT HX;PROB FOCUS EXAM;MED DECIS STRTFWD/LOW COMPLEX	5
99262	FOLLOWUP INPT CONSULT, 2+ KEY COMPONENTS: EXPAND PROB INT HX; EXPAND PROB EXAM; MED DECN MOD COMPLX	5
99263	FOLLOWUP INPT CONSULT, 2+ KEY COMPONENTS: DETAILED INT HX; DETAILED EXAM; MED DEC HIGH COMPLEX	5
99271	CONFIRMATORY CONSULT, 3 KEY COMPONENTS: PROB FOCUS HX; PROB FOCUS EXAM; STRTFWD MED DECISION	5
99272	CONFIRMATORY CONSULT, 3 KEY COMPONENTS:EXPAND PROB FOCUS HX;EXPAND PROB FOCUS EXAM;STRTFWD MED DECIS	5
99273	CONFIRMATORY CONSULT, 3 KEY COMPONENTS: DETAILED HX; DETAILED EXAM; MED DECISION LOW COMPLEX	5
99274	CONFIRMATORY CONSULT, 3 KEY COMPONENTS: COMPREHENSIVE HX; COMPREHENSIVE EXAM; MED DEC MOD COMPLEX	5
99275	CONFIRMATORY CONSULT, 3 KEY COMPONENTS: COMPREHENSIVE HX; COMPREHENSIVE EXAM; MED DEC HIGH COMPLX	5
99281	Emergency department visit for the evaluation and management of a patient, which requires these 3 key components: A problem focused history; A problem focused examination; and Straightforward medical decision making. Counseling and/or coordination of care with other physicians, other qualified health care professionals, or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are self limited or minor.	2

99282	Emergency department visit for the evaluation and management of a patient, which requires these 3 key components: An expanded problem focused history; An expanded problem focused examination; and Medical decision making of low complexity. Counseling and/or coordination of care with other physicians, other qualified health care professionals, or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of low to moderate severity.	2
99283	Emergency department visit for the evaluation and management of a patient, which requires these 3 key components: An expanded problem focused history; An expanded problem focused examination; and Medical decision making of moderate complexity. Counseling and/or coordination of care with other physicians, other qualified health care professionals, or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of moderate severity.	2
99284	Emergency department visit for the evaluation and management of a patient, which requires these 3 key components: A detailed history; A detailed examination; and Medical decision making of moderate complexity. Counseling and/or coordination of care with other physicians, other qualified health care professionals, or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of high severity, and require urgent evaluation by the physician, or other qualified health care professionals but do not pose an immediate significant threat to life or physiologic function.	2
99285	Emergency department visit for the evaluation and management of a patient, which requires these 3 key components within the constraints imposed by the urgency of the patient's clinical condition and/or mental status: A comprehensive history; A comprehensive examination; and Medical decision making of high complexity. Counseling and/or coordination of care with other physicians, other qualified health care professionals, or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of high severity and pose an immediate significant threat to life or physiologic function.	2
99288	Physician or other qualified health care professional direction of emergency medical systems (EMS) emergency care, advanced life support	1
99291	Critical care, evaluation and management of the critically ill or critically injured patient; first 30-74 minutes	5
99292	Critical care, evaluation and management of the critically ill or critically injured patient; each additional 30 minutes (List separately in addition to code for primary service)	8
99304	Initial nursing facility care, per day, for the evaluation and management of a patient, which requires these 3 key components: A detailed or comprehensive history; A detailed or comprehensive examination; and Medical decision making that is straightforward or of low complexity. Counseling and/or coordination of care with other physicians, other qualified health care professionals, or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the problem(s) requiring admission are of low severity. Typically, 25 minutes are spent at the bedside and on the patient's facility floor or unit.	1

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99305	Initial nursing facility care, per day, for the evaluation and management of a patient, which requires these 3 key components: A comprehensive history; A comprehensive examination; and Medical decision making of moderate complexity. Counseling and/or coordination of care with other physicians, other qualified health care professionals, or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the problem(s) requiring admission are of moderate severity. Typically, 35 minutes are spent at the bedside and on the patient's facility floor or unit.	1
99306	Initial nursing facility care, per day, for the evaluation and management of a patient, which requires these 3 key components: A comprehensive history; A comprehensive examination; and Medical decision making of high complexity. Counseling and/or coordination of care with other physicians, other qualified health care professionals, or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the problem(s) requiring admission are of high severity. Typically, 45 minutes are spent at the bedside and on the patient's facility floor or unit.	1
99307	Subsequent nursing facility care, per day, for the evaluation and management of a patient, which requires at least 2 of these 3 key components: A problem focused interval history; A problem focused examination; Straightforward medical decision making. Counseling and/or coordination of care with other physicians, other qualified health care professionals, or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the patient is stable, recovering, or improving. Typically, 10 minutes are spent at the bedside and on the patient's facility floor or unit.	1
99308	Subsequent nursing facility care, per day, for the evaluation and management of a patient, which requires at least 2 of these 3 key components: An expanded problem focused interval history; An expanded problem focused examination; Medical decision making of low complexity. Counseling and/or coordination of care with other physicians, other qualified health care professionals, or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the patient is responding inadequately to therapy or has developed a minor complication. Typically, 15 minutes are spent at the bedside and on the patient's facility floor or unit.	1
99309	Subsequent nursing facility care, per day, for the evaluation and management of a patient, which requires at least 2 of these 3 key components: A detailed interval history; A detailed examination; Medical decision making of moderate complexity. Counseling and/or coordination of care with other physicians, other qualified health care professionals, or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the patient has developed a significant complication or a significant new problem. Typically, 25 minutes are spent at the bedside and on the patient's facility floor or unit.	1
99310	Subsequent nursing facility care, per day, for the evaluation and management of a patient, which requires at least 2 of these 3 key components: A comprehensive interval history; A comprehensive examination; Medical decision making of high complexity. Counseling and/or coordination of care with other physicians, other qualified health care professionals, or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. The patient may be unstable or may have developed a significant new problem requiring immediate	1

	physician attention. Typically, 35 minutes are spent at the bedside and on the patient's facility floor or unit.	
99315	Nursing facility discharge day management; 30 minutes or less	1
99316	Nursing facility discharge day management; more than 30 minutes	1
99318	Evaluation and management of a patient involving an annual nursing facility assessment, which requires these 3 key components: A detailed interval history; A comprehensive examination; and Medical decision making that is of low to moderate complexity. Counseling and/or coordination of care with other physicians, other qualified health care professionals, or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the patient is stable, recovering, or improving. Typically, 30 minutes are spent at the bedside and on the patient's facility floor or unit.	1
99324	Domiciliary or rest home visit for the evaluation and management of a new patient, which requires these 3 key components: A problem focused history; A problem focused examination; and Straightforward medical decision making. Counseling and/or coordination of care with other physicians, other qualified health care professionals, or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of low severity. Typically, 20 minutes are spent with the patient and/or family or caregiver.	5
99325	Domiciliary or rest home visit for the evaluation and management of a new patient, which requires these 3 key components: An expanded problem focused history; An expanded problem focused examination; and Medical decision making of low complexity. Counseling and/or coordination of care with other physicians, other qualified health care professionals, or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of moderate severity. Typically, 30 minutes are spent with the patient and/or family or caregiver.	5
99326	Domiciliary or rest home visit for the evaluation and management of a new patient, which requires these 3 key components: A detailed history; A detailed examination; and Medical decision making of moderate complexity. Counseling and/or coordination of care with other physicians, other qualified health care professionals, or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of moderate to high severity. Typically, 45 minutes are spent with the patient and/or family or caregiver.	5
99327	Domiciliary or rest home visit for the evaluation and management of a new patient, which requires these 3 key components: A comprehensive history; A comprehensive examination; and Medical decision making of moderate complexity. Counseling and/or coordination of care with other physicians, other qualified health care professionals, or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of	1

	high severity. Typically, 60 minutes are spent with the patient and/or family or caregiver.	
99328	Domiciliary or rest home visit for the evaluation and management of a new patient, which requires these 3 key components: A comprehensive history; A comprehensive examination; and Medical decision making of high complexity. Counseling and/or coordination of care with other physicians, other qualified health care professionals, or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the patient is unstable or has developed a significant new problem requiring immediate physician attention. Typically, 75 minutes are spent with the patient and/or family or caregiver.	1
99334	Domiciliary or rest home visit for the evaluation and management of an established patient, which requires at least 2 of these 3 key components: A problem focused interval history; A problem focused examination; Straightforward medical decision making. Counseling and/or coordination of care with other physicians, other qualified health care professionals, or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are self-limited or minor. Typically, 15 minutes are spent with the patient and/or family or caregiver.	1
99335	Domiciliary or rest home visit for the evaluation and management of an established patient, which requires at least 2 of these 3 key components: An expanded problem focused interval history; An expanded problem focused examination; Medical decision making of low complexity. Counseling and/or coordination of care with other physicians, other qualified health care professionals, or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of low to moderate severity. Typically, 25 minutes are spent with the patient and/or family or caregiver.	1
99336	Domiciliary or rest home visit for the evaluation and management of an established patient, which requires at least 2 of these 3 key components: A detailed interval history; A detailed examination; Medical decision making of moderate complexity. Counseling and/or coordination of care with other physicians, other qualified health care professionals, or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of moderate to high severity. Typically, 40 minutes are spent with the patient and/or family or caregiver.	1
99337	Domiciliary or rest home visit for the evaluation and management of an established patient, which requires at least 2 of these 3 key components: A comprehensive interval history; A comprehensive examination; Medical decision making of moderate to high complexity. Counseling and/or coordination of care with other physicians, other qualified health care professionals, or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of moderate to high severity. The patient may be unstable or may have developed a significant new problem requiring immediate physician attention. Typically, 60 minutes are spent with the patient and/or family or caregiver.	1

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99339	Individual physician supervision of a patient (patient not present) in home, domiciliary or rest home (eg, assisted living facility) requiring complex and multidisciplinary care modalities involving regular physician development and/or revision of care plans, review of subsequent reports of patient status, review of related laboratory and other studies, communication (including telephone calls) for purposes of assessment or care decisions with health care professional(s), family member(s), surrogate decision maker(s) (eg, legal guardian) and/or key caregiver(s) involved in patient's care, integration of new information into the medical treatment plan and/or adjustment of medical therapy, within a calendar month; 15-29 minutes	1
99340	Individual physician supervision of a patient (patient not present) in home, domiciliary or rest home (eg, assisted living facility) requiring complex and multidisciplinary care modalities involving regular physician development and/or revision of care plans, review of subsequent reports of patient status, review of related laboratory and other studies, communication (including telephone calls) for purposes of assessment or care decisions with health care professional(s), family member(s), surrogate decision maker(s) (eg, legal guardian) and/or key caregiver(s) involved in patient's care, integration of new information into the medical treatment plan and/or adjustment of medical therapy, within a calendar month; 30 minutes or more	1
99341	Home visit for the evaluation and management of a new patient, which requires these 3 key components: A problem focused history; A problem focused examination; and Straightforward medical decision making. Counseling and/or coordination of care with other physicians, other qualified health care professionals, or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of low severity. Typically, 20 minutes are spent face-to-face with the patient and/or family.	1
99342	Home visit for the evaluation and management of a new patient, which requires these 3 key components: An expanded problem focused history; An expanded problem focused examination; and Medical decision making of low complexity. Counseling and/or coordination of care with other physicians, other qualified health care professionals, or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of moderate severity. Typically, 30 minutes are spent face-to-face with the patient and/or family.	1
99343	Home visit for the evaluation and management of a new patient, which requires these 3 key components: A detailed history; A detailed examination; and Medical decision making of moderate complexity. Counseling and/or coordination of care with other physicians, other qualified health care professionals, or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of moderate to high severity. Typically, 45 minutes are spent face-to-face with the patient and/or family.	1
99344	Home visit for the evaluation and management of a new patient, which requires these 3 key components: A comprehensive history; A comprehensive examination; and Medical decision making of moderate complexity. Counseling and/or coordination of care with other physicians, other qualified health care professionals, or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of high severity. Typically, 60 minutes are spent face-to-face with the patient and/or family.	1

99345	Home visit for the evaluation and management of a new patient, which requires these 3 key components: A comprehensive history; A comprehensive examination; and Medical decision making of high complexity. Counseling and/or coordination of care with other physicians, other qualified health care professionals, or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the patient is unstable or has developed a significant new problem requiring immediate physician attention. Typically, 75 minutes are spent face-to-face with the patient and/or family.	1
99347	Home visit for the evaluation and management of an established patient, which requires at least 2 of these 3 key components: A problem focused interval history; A problem focused examination; Straightforward medical decision making. Counseling and/or coordination of care with other physicians, other qualified health care professionals, or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are self limited or minor. Typically, 15 minutes are spent face-to-face with the patient and/or family.	1
99348	Home visit for the evaluation and management of an established patient, which requires at least 2 of these 3 key components: An expanded problem focused interval history; An expanded problem focused examination; Medical decision making of low complexity. Counseling and/or coordination of care with other physicians, other qualified health care professionals, or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of low to moderate severity. Typically, 25 minutes are spent face-to-face with the patient and/or family.	1
99349	Home visit for the evaluation and management of an established patient, which requires at least 2 of these 3 key components: A detailed interval history; A detailed examination; Medical decision making of moderate complexity. Counseling and/or coordination of care with other physicians, other qualified health care professionals, or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are moderate to high severity. Typically, 40 minutes are spent face-to-face with the patient and/or family.	1
99350	Home visit for the evaluation and management of an established patient, which requires at least 2 of these 3 key components: A comprehensive interval history; A comprehensive examination; Medical decision making of moderate to high complexity. Counseling and/or coordination of care with other physicians, other qualified health care professionals, or agencies are provided consistent with the nature of the problem(s) and the patient's and/or family's needs. Usually, the presenting problem(s) are of moderate to high severity. The patient may be unstable or may have developed a significant new problem requiring immediate physician attention. Typically, 60 minutes are spent face-to-face with the patient and/or family.	1
99354	Prolonged service(s) in the outpatient setting requiring direct patient contact beyond the time of the usual service; first hour (List separately in addition to code for outpatient Evaluation and Management or psychotherapy service, except with office or other outpatient services [99202, 99203, 99204, 99205, 99212, 99213, 99214, 99215])	1

99355	Prolonged service(s) in the outpatient setting requiring direct patient contact beyond the time of the usual service; each additional 30 minutes (List separately in addition to code for prolonged service)	4
99356	Prolonged service in the inpatient or observation setting, requiring unit/floor time beyond the usual service; first hour (List separately in addition to code for inpatient or observation Evaluation and Management service)	1
99357	Prolonged service in the inpatient or observation setting, requiring unit/floor time beyond the usual service; each additional 30 minutes (List separately in addition to code for prolonged service)	1
99358	Prolonged evaluation and management service before and/or after direct patient care; first hour	1
99359	Prolonged evaluation and management service before and/or after direct patient care; each additional 30 minutes (List separately in addition to code for prolonged service)	1
99360	Standby service, requiring prolonged attendance, each 30 minutes (eg, operative standby, standby for frozen section, for cesarean/high risk delivery, for monitoring EEG)	5
99366	Medical team conference with interdisciplinary team of health care professionals, face-to-face with patient and/or family, 30 minutes or more, participation by nonphysician qualified health care professional	2
99367	Medical team conference with interdisciplinary team of health care professionals, patient and/or family not present, 30 minutes or more; participation by physician	1
99368	Medical team conference with interdisciplinary team of health care professionals, patient and/or family not present, 30 minutes or more; participation by nonphysician qualified health care professional	2
99374	Supervision of a patient under care of home health agency (patient not present) in home, domiciliary or equivalent environment (eg, Alzheimer's facility) requiring complex and multidisciplinary care modalities involving regular development and/or revision of care plans by that individual, review of subsequent reports of patient status, review of related laboratory and other studies, communication (including telephone calls) for purposes of assessment or care decisions with health care professional(s), family member(s), surrogate decision maker(s) (eg, legal guardian) and/or key caregiver(s) involved in patient's care, integration of new information into the medical treatment plan and/or adjustment of medical therapy, within a calendar month; 15-29 minutes	1
99375	Supervision of a patient under care of home health agency (patient not present) in home, domiciliary or equivalent environment (eg, Alzheimer's facility) requiring complex and multidisciplinary care modalities involving regular development and/or revision of care plans by that individual, review of subsequent reports of patient status, review of related laboratory and other studies, communication (including telephone calls) for purposes of assessment or care decisions with health care professional(s), family member(s), surrogate decision maker(s) (eg, legal guardian) and/or key caregiver(s) involved in patient's care, integration of new information into the medical treatment plan and/or adjustment of medical therapy, within a calendar month; 30 minutes or more	1

99377	Supervision of a hospice patient (patient not present) requiring complex and multidisciplinary care modalities involving regular development and/or revision of care plans by that individual, review of subsequent reports of patient status, review of related laboratory and other studies, communication (including telephone calls) for purposes of assessment or care decisions with health care professional(s), family member(s), surrogate decision maker(s) (eg, legal guardian) and/or key caregiver(s) involved in patient's care, integration of new information into the medical treatment plan and/or adjustment of medical therapy, within a calendar month; 15-29 minutes	1
99378	Supervision of a hospice patient (patient not present) requiring complex and multidisciplinary care modalities involving regular development and/or revision of care plans by that individual, review of subsequent reports of patient status, review of related laboratory and other studies, communication (including telephone calls) for purposes of assessment or care decisions with health care professional(s), family member(s), surrogate decision maker(s) (eg, legal guardian) and/or key caregiver(s) involved in patient's care, integration of new information into the medical treatment plan and/or adjustment of medical therapy, within a calendar month; 30 minutes or more	1
99379	Supervision of a nursing facility patient (patient not present) requiring complex and multidisciplinary care modalities involving regular development and/or revision of care plans by that individual, review of subsequent reports of patient status, review of related laboratory and other studies, communication (including telephone calls) for purposes of assessment or care decisions with health care professional(s), family member(s), surrogate decision maker(s) (eg, legal guardian) and/or key caregiver(s) involved in patient's care, integration of new information into the medical treatment plan and/or adjustment of medical therapy, within a calendar month; 15-29 minutes	1
99380	Supervision of a nursing facility patient (patient not present) requiring complex and multidisciplinary care modalities involving regular development and/or revision of care plans by that individual, review of subsequent reports of patient status, review of related laboratory and other studies, communication (including telephone calls) for purposes of assessment or care decisions with health care professional(s), family member(s), surrogate decision maker(s) (eg, legal guardian) and/or key caregiver(s) involved in patient's care, integration of new information into the medical treatment plan and/or adjustment of medical therapy, within a calendar month; 30 minutes or more	1
99381	Initial comprehensive preventive medicine evaluation and management of an individual including an age and gender appropriate history, examination, counseling/anticipatory guidance/risk factor reduction interventions, and the ordering of laboratory/diagnostic procedures, new patient; infant (age younger than 1 year)	2
99382	Initial comprehensive preventive medicine evaluation and management of an individual including an age and gender appropriate history, examination, counseling/anticipatory guidance/risk factor reduction interventions, and the ordering of laboratory/diagnostic procedures, new patient; early childhood (age 1 through 4 years)	2
99383	Initial comprehensive preventive medicine evaluation and management of an individual including an age and gender appropriate history, examination, counseling/anticipatory guidance/risk factor reduction interventions, and the	2

	ordering of laboratory/diagnostic procedures, new patient; late childhood (age 5 through 11 years)	
99384	Initial comprehensive preventive medicine evaluation and management of an individual including an age and gender appropriate history, examination, counseling/anticipatory guidance/risk factor reduction interventions, and the ordering of laboratory/diagnostic procedures, new patient; adolescent (age 12 through 17 years)	2
99385	Initial comprehensive preventive medicine evaluation and management of an individual including an age and gender appropriate history, examination, counseling/anticipatory guidance/risk factor reduction interventions, and the ordering of laboratory/diagnostic procedures, new patient; 18-39 years	2
99386	Initial comprehensive preventive medicine evaluation and management of an individual including an age and gender appropriate history, examination, counseling/anticipatory guidance/risk factor reduction interventions, and the ordering of laboratory/diagnostic procedures, new patient; 40-64 years	2
99387	Initial comprehensive preventive medicine evaluation and management of an individual including an age and gender appropriate history, examination, counseling/anticipatory guidance/risk factor reduction interventions, and the ordering of laboratory/diagnostic procedures, new patient; 65 years and older	2
99391	Periodic comprehensive preventive medicine reevaluation and management of an individual including an age and gender appropriate history, examination, counseling/anticipatory guidance/risk factor reduction interventions, and the ordering of laboratory/diagnostic procedures, established patient; infant (age younger than 1 year)	2
99392	Periodic comprehensive preventive medicine reevaluation and management of an individual including an age and gender appropriate history, examination, counseling/anticipatory guidance/risk factor reduction interventions, and the ordering of laboratory/diagnostic procedures, established patient; early childhood (age 1 through 4 years)	2
99393	Periodic comprehensive preventive medicine reevaluation and management of an individual including an age and gender appropriate history, examination, counseling/anticipatory guidance/risk factor reduction interventions, and the ordering of laboratory/diagnostic procedures, established patient; late childhood (age 5 through 11 years)	2
99394	Periodic comprehensive preventive medicine reevaluation and management of an individual including an age and gender appropriate history, examination, counseling/anticipatory guidance/risk factor reduction interventions, and the ordering of laboratory/diagnostic procedures, established patient; adolescent (age 12 through 17 years)	2
99395	Periodic comprehensive preventive medicine reevaluation and management of an individual including an age and gender appropriate history, examination, counseling/anticipatory guidance/risk factor reduction interventions, and the ordering of laboratory/diagnostic procedures, established patient; 18-39 years	2

99396	Periodic comprehensive preventive medicine reevaluation and management of an	2
	individual including an age and gender appropriate history, examination, counseling/anticipatory guidance/risk factor reduction interventions, and the ordering of laboratory/diagnostic procedures, established patient; 40-64 years	
99397	Periodic comprehensive preventive medicine reevaluation and management of an individual including an age and gender appropriate history, examination, counseling/anticipatory guidance/risk factor reduction interventions, and the ordering of laboratory/diagnostic procedures, established patient; 65 years and older	2
99401	Preventive medicine counseling and/or risk factor reduction intervention(s) provided to an individual (separate procedure); approximately 15 minutes	1
99402	Preventive medicine counseling and/or risk factor reduction intervention(s) provided to an individual (separate procedure); approximately 30 minutes	1
99403	Preventive medicine counseling and/or risk factor reduction intervention(s) provided to an individual (separate procedure); approximately 45 minutes	1
99404	Preventive medicine counseling and/or risk factor reduction intervention(s) provided to an individual (separate procedure); approximately 60 minutes	1
99406	Smoking and tobacco use cessation counseling visit; intermediate, greater than 3 minutes up to 10 minutes	1
99407	Smoking and tobacco use cessation counseling visit; intensive, greater than 10 minutes	1
99408	Alcohol and/or substance (other than tobacco) abuse structured screening (eg, AUDIT, DAST), and brief intervention (SBI) services; 15 to 30 minutes	1
99409	Alcohol and/or substance (other than tobacco) abuse structured screening (eg, AUDIT, DAST), and brief intervention (SBI) services; greater than 30 minutes	1
99411	Preventive medicine counseling and/or risk factor reduction intervention(s) provided to individuals in a group setting (separate procedure); approximately 30 minutes	1
99412	Preventive medicine counseling and/or risk factor reduction intervention(s) provided to individuals in a group setting (separate procedure); approximately 60 minutes	1
99415	Prolonged clinical staff service (the service beyond the highest time in the range of total time of the service) during an evaluation and management service in the office or outpatient setting, direct patient contact with physician supervision; first hour (List separately in addition to code for outpatient Evaluation and Management service)	1
99416	Prolonged clinical staff service (the service beyond the highest time in the range of total time of the service) during an evaluation and management service in the office or outpatient setting, direct patient contact with physician supervision; each additional 30 minutes (List separately in addition to code for prolonged service)	3
99417	Prolonged office or other outpatient evaluation and management service(s) beyond the minimum required time of the primary procedure which has been selected using total time, requiring total time with or without direct patient contact beyond the usual service, on the date of the primary service, each 15 minutes of total time	4

	(List separately in addition to codes 99205, 99215 for office or other outpatient Evaluation and Management services)	
99421	Online digital evaluation and management service, for an established patient, for up to 7 days, cumulative time during the 7 days; 5-10 minutes	1
99422	Online digital evaluation and management service, for an established patient, for up to 7 days, cumulative time during the 7 days; 11-20 minutes	1
99423	Online digital evaluation and management service, for an established patient, for up to 7 days, cumulative time during the 7 days; 21 or more minutes	1
99424	Principal care management services, for a single high-risk disease, with the following required elements: one complex chronic condition expected to last at least 3 months, and that places the patient at significant risk of hospitalization, acute exacerbation/decompensation, functional decline, or death, the condition requires development, monitoring, or revision of disease-specific care plan, the condition requires frequent adjustments in the medication regimen and/or the management of the condition is unusually complex due to comorbidities, ongoing communication and care coordination between relevant practitioners furnishing care; first 30 minutes provided personally by a physician or other qualified health care professional, per calendar month.	1
99425	Principal care management services, for a single high-risk disease, with the following required elements: one complex chronic condition expected to last at least 3 months, and that places the patient at significant risk of hospitalization, acute exacerbation/decompensation, functional decline, or death, the condition requires development, monitoring, or revision of disease-specific care plan, the condition requires frequent adjustments in the medication regimen and/or the management of the condition is unusually complex due to comorbidities, ongoing communication and care coordination between relevant practitioners furnishing care; each additional 30 minutes provided personally by a physician or other qualified health care professional, per calendar month (List separately in addition to code for primary procedure)	2
99426	Principal care management services, for a single high-risk disease, with the following required elements: one complex chronic condition expected to last at least 3 months, and that places the patient at significant risk of hospitalization, acute exacerbation/decompensation, functional decline, or death, the condition requires development, monitoring, or revision of disease-specific care plan, the condition requires frequent adjustments in the medication regimen and/or the management of the condition is unusually complex due to comorbidities, ongoing communication and care coordination between relevant practitioners furnishing care; first 30 minutes of clinical staff time directed by physician or other qualified health care professional, per calendar month.	1

99427	Principal care management services, for a single high-risk disease, with the following required elements: one complex chronic condition expected to last at least 3 months, and that places the patient at significant risk of hospitalization, acute exacerbation/decompensation, functional decline, or death, the condition requires development, monitoring, or revision of disease-specific care plan, the condition requires frequent adjustments in the medication regimen and/or the management of the condition is unusually complex due to comorbidities, ongoing communication and care coordination between relevant practitioners furnishing care; each additional 30 minutes of clinical staff time directed by a physician or other qualified health care professional, per calendar month (List separately in addition to code for primary procedure)	2
99429	Unlisted preventive medicine service	1
99437	Chronic care management services with the following required elements: multiple (two or more) chronic conditions expected to last at least 12 months, or until the death of the patient, chronic conditions that place the patient at significant risk of death, acute exacerbation/decompensation, or functional decline, comprehensive care plan established, implemented, revised, or monitored; each additional 30 minutes by a physician or other qualified health care professional, per calendar month (List separately in addition to code for primary procedure)	2
99439	Chronic care management services with the following required elements: multiple (two or more) chronic conditions expected to last at least 12 months, or until the death of the patient, chronic conditions that place the patient at significant risk of death, acute exacerbation/decompensation, or functional decline, comprehensive care plan established, implemented, revised, or monitored; each additional 20 minutes of clinical staff time directed by a physician or other qualified health care professional, per calendar month (List separately in addition to code for primary procedure)	2
99441	Telephone evaluation and management service by a physician or other qualified health care professional who may report evaluation and management services provided to an established patient, parent, or guardian not originating from a related E/M service provided within the previous 7 days nor leading to an E/M service or procedure within the next 24 hours or soonest available appointment; 5-10 minutes of medical discussion	1
99442	Telephone evaluation and management service by a physician or other qualified health care professional who may report evaluation and management services provided to an established patient, parent, or guardian not originating from a related E/M service provided within the previous 7 days nor leading to an E/M service or procedure within the next 24 hours or soonest available appointment; 11-20 minutes of medical discussion	1
99443	Telephone evaluation and management service by a physician or other qualified health care professional who may report evaluation and management services provided to an established patient, parent, or guardian not originating from a related E/M service provided within the previous 7 days nor leading to an E/M service or procedure within the next 24 hours or soonest available appointment; 21-30 minutes of medical discussion	1
99446	Interprofessional telephone/Internet/electronic health record assessment and management service provided by a consultative physician, including a verbal and written report to the patient's treating/requesting physician or other qualified	1

	health care professional; 5-10 minutes of medical consultative discussion and review	
99447	Interprofessional telephone/Internet/electronic health record assessment and management service provided by a consultative physician, including a verbal and written report to the patient's treating/requesting physician or other qualified health care professional; 11-20 minutes of medical consultative discussion and review	1
99448	Interprofessional telephone/Internet/electronic health record assessment and management service provided by a consultative physician, including a verbal and written report to the patient's treating/requesting physician or other qualified health care professional; 21-30 minutes of medical consultative discussion and review	1
99449	Interprofessional telephone/Internet/electronic health record assessment and management service provided by a consultative physician, including a verbal and written report to the patient's treating/requesting physician or other qualified health care professional; 31 minutes or more of medical consultative discussion and review	1
99450	Basic life and/or disability examination that includes: Measurement of height, weight, and blood pressure; Completion of a medical history following a life insurance pro forma; Collection of blood sample and/or urinalysis complying with "chain of custody" protocols; and Completion of necessary documentation/certificates.	1
99451	Interprofessional telephone/Internet/electronic health record assessment and management service provided by a consultative physician, including a written report to the patient's treating/requesting physician or other qualified health care professional, 5 minutes or more of medical consultative time	1
99452	Interprofessional telephone/Internet/electronic health record referral service(s) provided by a treating/requesting physician or other qualified health care professional, 30 minutes	1
99453	Remote monitoring of physiologic parameter(s) (eg, weight, blood pressure, pulse oximetry, respiratory flow rate), initial; set-up and patient education on use of equipment	1
99454	Remote monitoring of physiologic parameter(s) (eg, weight, blood pressure, pulse oximetry, respiratory flow rate), initial; device(s) supply with daily recording(s) or programmed alert(s) transmission, each 30 days	1
99455	Work related or medical disability examination by the treating physician that includes: Completion of a medical history commensurate with the patient's condition; Performance of an examination commensurate with the patient's condition; Formulation of a diagnosis, assessment of capabilities and stability, and calculation of impairment; Development of future medical treatment plan; and Completion of necessary documentation/certificates and report.	1

99456	Work related or medical disability examination by other than the treating physician that includes: Completion of a medical history commensurate with the patient's condition; Performance of an examination commensurate with the patient's condition; Formulation of a diagnosis, assessment of capabilities and stability, and calculation of impairment; Development of future medical treatment plan; and Completion of necessary documentation/certificates and report.	1
99457	Remote physiologic monitoring treatment management services, clinical staff/physician/other qualified health care professional time in a calendar month requiring interactive communication with the patient/caregiver during the month; first 20 minutes	1
99458	Remote physiologic monitoring treatment management services, clinical staff/physician/other qualified health care professional time in a calendar month requiring interactive communication with the patient/caregiver during the month; each additional 20 minutes (List separately in addition to code for primary procedure)	3
99460	Initial hospital or birthing center care, per day, for evaluation and management of normal newborn infant	1
99461	Initial care, per day, for evaluation and management of normal newborn infant seen in other than hospital or birthing center	1
99462	Subsequent hospital care, per day, for evaluation and management of normal newborn	1
99463	Initial hospital or birthing center care, per day, for evaluation and management of normal newborn infant admitted and discharged on the same date	1
99464	Attendance at delivery (when requested by the delivering physician or other qualified health care professional) and initial stabilization of newborn	1
99465	Delivery/birthing room resuscitation, provision of positive pressure ventilation and/or chest compressions in the presence of acute inadequate ventilation and/or cardiac output	1
99466	Critical care face-to-face services, during an interfacility transport of critically ill or critically injured pediatric patient, 24 months of age or younger; first 30-74 minutes of hands-on care during transport	1
99467	Critical care face-to-face services, during an interfacility transport of critically ill or critically injured pediatric patient, 24 months of age or younger; each additional 30 minutes (List separately in addition to code for primary service)	4
99468	Initial inpatient neonatal critical care, per day, for the evaluation and management of a critically ill neonate, 28 days of age or younger	1
99469	Subsequent inpatient neonatal critical care, per day, for the evaluation and management of a critically ill neonate, 28 days of age or younger	1
99471	Initial inpatient pediatric critical care, per day, for the evaluation and management of a critically ill infant or young child, 29 days through 24 months of age	1
99472	Subsequent inpatient pediatric critical care, per day, for the evaluation and management of a critically ill infant or young child, 29 days through 24 months of age	1

99473	Self-measured blood pressure using a device validated for clinical accuracy; patient education/training and device calibration	1
99474	Self-measured blood pressure using a device validated for clinical accuracy; separate self-measurements of two readings one minute apart, twice daily over a 30-day period (minimum of 12 readings), collection of data reported by the patient and/or caregiver to the physician or other qualified health care professional, with report of average systolic and diastolic pressures and subsequent communication of a treatment plan to the patient	1
99475	Initial inpatient pediatric critical care, per day, for the evaluation and management of a critically ill infant or young child, 2 through 5 years of age	1
99476	Subsequent inpatient pediatric critical care, per day, for the evaluation and management of a critically ill infant or young child, 2 through 5 years of age	1
99477	Initial hospital care, per day, for the evaluation and management of the neonate, 28 days of age or younger, who requires intensive observation, frequent interventions, and other intensive care services	1
99478	Subsequent intensive care, per day, for the evaluation and management of the recovering very low birth weight infant (present body weight less than 1500 grams)	1
99479	Subsequent intensive care, per day, for the evaluation and management of the recovering low birth weight infant (present body weight of 1500-2500 grams)	1
99480	Subsequent intensive care, per day, for the evaluation and management of the recovering infant (present body weight of 2501-5000 grams)	1
99483	Assessment of and care planning for a patient with cognitive impairment, requiring an independent historian, in the office or other outpatient, home or domiciliary or rest home, with all of the following required elements: Cognition-focused evaluation including a pertinent history and examination, Medical decision making of moderate or high complexity, Functional assessment (eg, basic and instrumental activities of daily living), including decision-making capacity, Use of standardized instruments for staging of dementia (eg, functional assessment staging test [FAST], clinical dementia rating [CDR]), Medication reconciliation and review for high-risk medications, Evaluation for neuropsychiatric and behavioral symptoms, including depression, including use of standardized screening instrument(s), Evaluation of safety (eg, home), including motor vehicle operation, Identification of caregiver(s), caregiver knowledge, caregiver needs, social supports, and the willingness of caregiver to take on caregiving tasks, Development, updating or revision, or review of an Advance Care Plan, Creation of a written care plan, including initial plans to address any neuropsychiatric symptoms, neuro-cognitive symptoms, functional limitations, and referral to community resources as needed (eg, rehabilitation services, adult day programs, support groups) shared with the patient and/or caregiver with initial education and support. Typically, 50 minutes are spent face-to-face with the patient and/or family or caregiver.	1
99484	Care management services for behavioral health conditions, at least 20 minutes of clinical staff time, directed by a physician or other qualified health care professional, per calendar month, with the following required elements: initial assessment or follow-up monitoring, including the use of applicable validated rating scales, behavioral health care planning in relation to behavioral/psychiatric health problems, including revision for patients who are not progressing or whose status changes, facilitating and coordinating treatment such as psychotherapy,	1

	pharmacotherapy, counseling and/or psychiatric consultation, and continuity of care with a designated member of the care team.	
99485	Supervision by a control physician of interfacility transport care of the critically ill or critically injured pediatric patient, 24 months of age or younger, includes two-way communication with transport team before transport, at the referring facility and during the transport, including data interpretation and report; first 30 minutes	1
99486	Supervision by a control physician of interfacility transport care of the critically ill or critically injured pediatric patient, 24 months of age or younger, includes two-way communication with transport team before transport, at the referring facility and during the transport, including data interpretation and report; each additional 30 minutes (List separately in addition to code for primary procedure)	4
99487	Complex chronic care management services with the following required elements: multiple (two or more) chronic conditions expected to last at least 12 months, or until the death of the patient, chronic conditions that place the patient at significant risk of death, acute exacerbation/decompensation, or functional decline, comprehensive care plan established, implemented, revised, or monitored, moderate or high complexity medical decision making; first 60 minutes of clinical staff time directed by a physician or other qualified health care professional, per calendar month.	1
99489	Complex chronic care management services with the following required elements: multiple (two or more) chronic conditions expected to last at least 12 months, or until the death of the patient, chronic conditions that place the patient at significant risk of death, acute exacerbation/decompensation, or functional decline, comprehensive care plan established, implemented, revised, or monitored, moderate or high complexity medical decision making; each additional 30 minutes of clinical staff time directed by a physician or other qualified health care professional, per calendar month (List separately in addition to code for primary procedure)	4
99490	Chronic care management services with the following required elements: multiple (two or more) chronic conditions expected to last at least 12 months, or until the death of the patient, chronic conditions that place the patient at significant risk of death, acute exacerbation/decompensation, or functional decline, comprehensive care plan established, implemented, revised, or monitored; first 20 minutes of clinical staff time directed by a physician or other qualified health care professional, per calendar month.	1
99491	Chronic care management services with the following required elements: multiple (two or more) chronic conditions expected to last at least 12 months, or until the death of the patient, chronic conditions that place the patient at significant risk of death, acute exacerbation/decompensation, or functional decline, comprehensive care plan established, implemented, revised, or monitored; first 30 minutes provided personally by a physician or other qualified health care professional, per calendar month.	1

99492	Initial psychiatric collaborative care management, first 70 minutes in the first calendar month of behavioral health care manager activities, in consultation with a psychiatric consultant, and directed by the treating physician or other qualified health care professional, with the following required elements: outreach to and engagement in treatment of a patient directed by the treating physician or other qualified health care professional, initial assessment of the patient, including administration of validated rating scales, with the development of an individualized treatment plan, review by the psychiatric consultant with modifications of the plan if recommended, entering patient in a registry and tracking patient follow-up and progress using the registry, with appropriate documentation, and participation in weekly caseload consultation with the psychiatric consultant, and provision of brief interventions using evidence-based techniques such as behavioral activation, motivational interviewing, and other focused treatment strategies.	1
99493	Subsequent psychiatric collaborative care management, first 60 minutes in a subsequent month of behavioral health care manager activities, in consultation with a psychiatric consultant, and directed by the treating physician or other qualified health care professional, with the following required elements: tracking patient follow-up and progress using the registry, with appropriate documentation, participation in weekly caseload consultation with the psychiatric consultant, ongoing collaboration with and coordination of the patient's mental health care with the treating physician or other qualified health care professional and any other treating mental health providers, additional review of progress and recommendations for changes in treatment, as indicated, including medications, based on recommendations provided by the psychiatric consultant, provision of brief interventions using evidence-based techniques such as behavioral activation, motivational interviewing, and other focused treatment strategies, monitoring of patient outcomes using validated rating scales, and relapse prevention planning with patients as they achieve remission of symptoms and/or other treatment goals and are prepared for discharge from active treatment.	1
99494	Initial or subsequent psychiatric collaborative care management, each additional 30 minutes in a calendar month of behavioral health care manager activities, in consultation with a psychiatric consultant, and directed by the treating physician or other qualified health care professional (List separately in addition to code for primary procedure)	2
99495	Transitional Care Management Services with the following required elements: Communication (direct contact, telephone, electronic) with the patient and/or caregiver within 2 business days of discharge Medical decision making of at least moderate complexity during the service period Face-to-face visit, within 14 calendar days of discharge	1
99496	Transitional Care Management Services with the following required elements: Communication (direct contact, telephone, electronic) with the patient and/or caregiver within 2 business days of discharge Medical decision making of high complexity during the service period Face-to-face visit, within 7 calendar days of discharge	1
99497	Advance care planning including the explanation and discussion of advance directives such as standard forms (with completion of such forms, when performed), by the physician or other qualified health care professional; first 30 minutes, face-to-face with the patient, family member(s), and/or surrogate	1

99498	Advance care planning including the explanation and discussion of advance directives such as standard forms (with completion of such forms, when performed), by the physician or other qualified health care professional; each additional 30 minutes (List separately in addition to code for primary procedure)	3
99499	Unlisted evaluation and management service	1
99500	Home visit for prenatal monitoring and assessment to include fetal heart rate, non- stress test, uterine monitoring, and gestational diabetes monitoring	1
99501	Home visit for postnatal assessment and follow-up care	4
99502	Home visit for newborn care and assessment	1
99503	Home visit for respiratory therapy care (eg, bronchodilator, oxygen therapy, respiratory assessment, apnea evaluation)	1
99505	Home visit for stoma care and maintenance including colostomy and cystostomy	1
99506	Home visit for intramuscular injections	1
99507	Home visit for care and maintenance of catheter(s) (eg, urinary, drainage, and enteral)	1
99509	Home visit for assistance with activities of daily living and personal care	4
99510	Home visit for individual, family, or marriage counseling	1
99511	Home visit for fecal impaction management and enema administration	1
99512	Home visit for hemodialysis	1
99600	Unlisted home visit service or procedure	1
99601	Home infusion/specialty drug administration, per visit (up to 2 hours)	1
99602	Home infusion/specialty drug administration, per visit (up to 2 hours); each additional hour (List separately in addition to code for primary procedure)	2
99607	Medication therapy management service(s) provided by a pharmacist, individual, face-to-face with patient, with assessment and intervention if provided; each additional 15 minutes (List separately in addition to code for primary service)	1
A0100	NON-EMERGENCY TRANSPORTATION; TAXI	2
A0110	NON-EMERGENCY TRANSPORTATION AND BUS, INTRA OR INTER STATE CARRIER	2
A0130	NON-EMERGENCY TRANSPORTATION: WHEELCHAIR VAN	2
A0225	AMBULANCE SERVICE, NEONATAL TRANSPORT, BASE RATE, EMERGENCY TRANSPORT, ONE WAY	1
A0384	BLS SPECIALIZED SERVICE DISPOSABLE SUPPLIES; DEFIBRILLATION (USED BY ALS AMBULANCES AND BLS AMBULANCES IN JURISDICTIONS WHERE DEFIBRILLATION IS PERMITTED IN BLS AMBULANCES)	1
A0392	ALS SPECIALIZED SERVICE DISPOSABLE SUPPLIES; DEFIBRILLATION (TO BE USED ONLY IN JURISDICTIONS WHERE DEFIBRILLATION CANNOT BE PERFORMED IN BLS AMBULANCES)	1
A0396	ALS SPECIALIZED SERVICE DISPOSABLE SUPPLIES; ESOPHAGEAL INTUBATION	1

A0422	AMBULANCE (ALS OR BLS) OXYGEN AND OXYGEN SUPPLIES, LIFE SUSTAINING SITUATION	1
A0425	GROUND MILEAGE, PER STATUTE MILE	300
A0426	AMBULANCE SERVICE, ADVANCED LIFE SUPPORT, NON-EMERGENCY TRANSPORT, LEVEL 1 (ALS 1)	2
A0427	AMBULANCE SERVICE, ADVANCED LIFE SUPPORT, EMERGENCY TRANSPORT, LEVEL 1 (ALS 1 - EMERGENCY)	2
A0428	AMBULANCE SERVICE, BASIC LIFE SUPPORT, NON-EMERGENCY TRANSPORT, (BLS)	2
A0429	AMBULANCE SERVICE, BASIC LIFE SUPPORT, EMERGENCY TRANSPORT (BLS-EMERGENCY)	2
A0430	AMBULANCE SERVICE, CONVENTIONAL AIR SERVICES, TRANSPORT, ONE WAY (FIXED WING)	2
A0431	AMBULANCE SERVICE, CONVENTIONAL AIR SERVICES, TRANSPORT, ONE WAY (ROTARY WING)	2
A0432	PARAMEDIC INTERCEPT (PI), RURAL AREA, TRANSPORT FURNISHED BY A VOLUNTEER AMBULANCE COMPANY WHICH IS PROHIBITED BY STATE LAW FROM BILLING THIRD PARTY PAYERS	2
A0433	ADVANCED LIFE SUPPORT, LEVEL 2 (ALS 2)	2
A0434	SPECIALTY CARE TRANSPORT (SCT)	2
A0998	AMBULANCE RESPONSE AND TREATMENT, NO TRANSPORT	1
A0999	UNLISTED AMBULANCE SERVICE	1
A4206	SYRINGE WITH NEEDLE, STERILE, 1 CC OR LESS, EACH	150
A4207	SYRINGE WITH NEEDLE, STERILE 2 CC, EACH	150
A4208	SYRINGE WITH NEEDLE, STERILE 3 CC, EACH	150
A4209	SYRINGE WITH NEEDLE, STERILE 5 CC OR GREATER, EACH	150
A4210	NEEDLE-FREE INJECTION DEVICE, EACH	1
A4211	SUPPLIES FOR SELF-ADMINISTERED INJECTIONS	1
A4212	NON-CORING NEEDLE OR STYLET WITH OR WITHOUT CATHETER	5
A4213	SYRINGE, STERILE, 20 CC OR GREATER, EACH	150
A4215	NEEDLE, STERILE, ANY SIZE, EACH	150
A4218	STERILE SALINE OR WATER, METERED DOSE DISPENSER, 10 ML	20
A4220	REFILL KIT FOR IMPLANTABLE INFUSION PUMP	1
A4222	INFUSION SUPPLIES FOR EXTERNAL DRUG INFUSION PUMP, PER CASSETTE OR BAG (LIST DRUGS SEPARATELY)	60
A4223	INFUSION SUPPLIES NOT USED WITH EXTERNAL INFUSION PUMP, PER CASSETTE OR BAG (LIST DRUGS SEPARATELY)	1
A4224	SUPPLIES FOR MAINTENANCE OF INSULIN INFUSION CATHETER, PER WEEK	1
H4224	SUPPLIES FOR IVIAIN LENANCE OF INSULIN INFUSION CATHETER, PER WEEK	1

A4225	SUPPLIES FOR EXTERNAL INSULIN INFUSION PUMP, SYRINGE TYPE CARTRIDGE, STERILE, EACH	60
A4226	SUPPLIES FOR MAINTENANCE OF INSULIN INFUSION PUMP WITH DOSAGE RATE ADJUSTMENT USING THERAPEUTIC CONTINUOUS GLUCOSE SENSING, PER WEEK	1
A4230	INFUSION SET FOR EXTERNAL INSULIN PUMP, NON NEEDLE CANNULA TYPE	16
A4233	REPLACEMENT BATTERY, ALKALINE (OTHER THAN J CELL), FOR USE WITH MEDICALLY NECESSARY HOME BLOOD GLUCOSE MONITOR OWNED BY PATIENT, EACH	4
A4234	REPLACEMENT BATTERY, ALKALINE, J CELL, FOR USE WITH MEDICALLY NECESSARY HOME BLOOD GLUCOSE MONITOR OWNED BY PATIENT, EACH	4
A4235	REPLACEMENT BATTERY, LITHIUM, FOR USE WITH MEDICALLY NECESSARY HOME BLOOD GLUCOSE MONITOR OWNED BY PATIENT, EACH	2
A4236	REPLACEMENT BATTERY, SILVER OXIDE, FOR USE WITH MEDICALLY NECESSARY HOME BLOOD GLUCOSE MONITOR OWNED BY PATIENT, EACH	4
A4244	ALCOHOL OR PEROXIDE, PER PINT	1
A4245	ALCOHOL WIPES, PER BOX	1
A4247	BETADINE OR IODINE SWABS/WIPES, PER BOX	3
A4248	CHLORHEXIDINE CONTAINING ANTISEPTIC, 1 ML	10
A4250	URINE TEST OR REAGENT STRIPS OR TABLETS (100 TABLETS OR STRIPS)	6
A4256	NORMAL, LOW AND HIGH CALIBRATOR SOLUTION / CHIPS	1
A4258	SPRING-POWERED DEVICE FOR LANCET, EACH	1
A4261	CERVICAL CAP FOR CONTRACEPTIVE USE	1
A4262	TEMPORARY, ABSORBABLE LACRIMAL DUCT IMPLANT, EACH	4
A4263	PERMANENT, LONG TERM, NON-DISSOLVABLE LACRIMAL DUCT IMPLANT, EACH	4
A4264	PERMANENT IMPLANTABLE CONTRACEPTIVE INTRATUBAL OCCLUSION DEVICE(S) AND DELIVERY SYSTEM	1
A4265	PARAFFIN, PER POUND	1
A4266	DIAPHRAGM FOR CONTRACEPTIVE USE	2
A4267	CONTRACEPTIVE SUPPLY, CONDOM, MALE, EACH	144
A4268	CONTRACEPTIVE SUPPLY, CONDOM, FEMALE, EACH	144
A4270	DISPOSABLE ENDOSCOPE SHEATH, EACH	3
A4280	ADHESIVE SKIN SUPPORT ATTACHMENT FOR USE WITH EXTERNAL BREAST PROSTHESIS, EACH	9999
A4281	TUBING FOR BREAST PUMP, REPLACEMENT	2
A4282	ADAPTER FOR BREAST PUMP, REPLACEMENT	2
A4283	CAP FOR BREAST PUMP BOTTLE, REPLACEMENT	2
A4284	BREAST SHIELD AND SPLASH PROTECTOR FOR USE WITH BREAST PUMP, REPLACEMENT	2

A4286	LOCKING RING FOR BREAST PUMP, REPLACEMENT	2
A4290	SACRAL NERVE STIMULATION TEST LEAD, EACH	2
A4300	IMPLANTABLE ACCESS CATHETER, (E.G., VENOUS, ARTERIAL, EPIDURAL SUBARACHNOID, OR PERITONEAL, ETC.) EXTERNAL ACCESS	15
A4301	IMPLANTABLE ACCESS TOTAL CATHETER, PORT/RESERVOIR (E.G., VENOUS, ARTERIAL, EPIDURAL, SUBARACHNOID, PERITONEAL, ETC.)	1
A4305	DISPOSABLE DRUG DELIVERY SYSTEM, FLOW RATE OF 50 ML OR GREATER PER HOUR	2
A4306	DISPOSABLE DRUG DELIVERY SYSTEM, FLOW RATE OF LESS THAN 50 ML PER HOUR	2
A4313	INSERTION TRAY WITHOUT DRAINAGE BAG WITH INDWELLING CATHETER, FOLEY TYPE, THREE-WAY, FOR CONTINUOUS IRRIGATION	30
A4316	INSERTION TRAY WITH DRAINAGE BAG WITH INDWELLING CATHETER, FOLEY TYPE, THREE-WAY, FOR CONTINUOUS IRRIGATION	30
A4320	IRRIGATION TRAY WITH BULB OR PISTON SYRINGE, ANY PURPOSE	30
A4321	THERAPEUTIC AGENT FOR URINARY CATHETER IRRIGATION	1
A4322	IRRIGATION SYRINGE, BULB OR PISTON, EACH	30
A4326	MALE EXTERNAL CATHETER WITH INTEGRAL COLLECTION CHAMBER, ANY TYPE, EACH	1
A4327	FEMALE EXTERNAL URINARY COLLECTION DEVICE; MEATAL CUP, EACH	2
A4328	FEMALE EXTERNAL URINARY COLLECTION DEVICE; POUCH, EACH	1
A4330	PERIANAL FECAL COLLECTION POUCH WITH ADHESIVE, EACH	1
A4333	URINARY CATHETER ANCHORING DEVICE, ADHESIVE SKIN ATTACHMENT, EACH	16
A4334	URINARY CATHETER ANCHORING DEVICE, LEG STRAP, EACH	1
A4335	INCONTINENCE SUPPLY; MISCELLANEOUS	16
A4336	INCONTINENCE SUPPLY, URETHRAL INSERT, ANY TYPE, EACH	1
A4337	INCONTINENCE SUPPLY, RECTAL INSERT, ANY TYPE, EACH	2
A4340	INDWELLING CATHETER; SPECIALTY TYPE, (E.G., COUDE, MUSHROOM, WING, ETC.), EACH	30
A4346	INDWELLING CATHETER; FOLEY TYPE, THREE WAY FOR CONTINUOUS IRRIGATION, EACH	30
A4355	IRRIGATION TUBING SET FOR CONTINUOUS BLADDER IRRIGATION THROUGH A THREE-WAY INDWELLING FOLEY CATHETER, EACH	180
A4356	EXTERNAL URETHRAL CLAMP OR COMPRESSION DEVICE (NOT TO BE USED FOR CATHETER CLAMP), EACH	3
A4360	DISPOSABLE EXTERNAL URETHRAL CLAMP OR COMPRESSION DEVICE, WITH PAD AND/OR POUCH, EACH	1
A4361	OSTOMY FACEPLATE, EACH	3
A4364	ADHESIVE, LIQUID OR EQUAL, ANY TYPE, PER OZ	9999

A4368	OSTOMY FILTER, ANY TYPE, EACH	1
A4372	OSTOMY SKIN BARRIER, SOLID 4 X 4 OR EQUIVALENT, STANDARD WEAR, WITH BUILT-IN CONVEXITY, EACH	9999
A4373	OSTOMY SKIN BARRIER, WITH FLANGE (SOLID, FLEXIBLE OR ACCORDION), WITH BUILT-IN CONVEXITY, ANY SIZE, EACH	9999
A4375	OSTOMY POUCH, DRAINABLE, WITH FACEPLATE ATTACHED, PLASTIC, EACH	9999
A4376	OSTOMY POUCH, DRAINABLE, WITH FACEPLATE ATTACHED, RUBBER, EACH	9999
A4377	OSTOMY POUCH, DRAINABLE, FOR USE ON FACEPLATE, PLASTIC, EACH	9999
A4378	OSTOMY POUCH, DRAINABLE, FOR USE ON FACEPLATE, RUBBER, EACH	9999
A4379	OSTOMY POUCH, URINARY, WITH FACEPLATE ATTACHED, PLASTIC, EACH	60
A4380	OSTOMY POUCH, URINARY, WITH FACEPLATE ATTACHED, RUBBER, EACH	9999
A4381	OSTOMY POUCH, URINARY, FOR USE ON FACEPLATE, PLASTIC, EACH	9999
A4382	OSTOMY POUCH, URINARY, FOR USE ON FACEPLATE, HEAVY PLASTIC, EACH	9999
A4383	OSTOMY POUCH, URINARY, FOR USE ON FACEPLATE, RUBBER, EACH	9999
A4384	OSTOMY FACEPLATE EQUIVALENT, SILICONE RING, EACH	9999
A4385	OSTOMY SKIN BARRIER, SOLID 4 X 4 OR EQUIVALENT, EXTENDED WEAR, WITHOUT BUILT-IN CONVEXITY, EACH	9999
A4387	OSTOMY POUCH, CLOSED, WITH BARRIER ATTACHED, WITH BUILT-IN CONVEXITY (1 PIECE), EACH	9999
A4388	OSTOMY POUCH, DRAINABLE, WITH EXTENDED WEAR BARRIER ATTACHED, (1 PIECE), EACH	9999
A4389	OSTOMY POUCH, DRAINABLE, WITH BARRIER ATTACHED, WITH BUILT-IN CONVEXITY (1 PIECE), EACH	9999
A4390	OSTOMY POUCH, DRAINABLE, WITH EXTENDED WEAR BARRIER ATTACHED, WITH BUILT-IN CONVEXITY (1 PIECE), EACH	9999
A4391	OSTOMY POUCH, URINARY, WITH EXTENDED WEAR BARRIER ATTACHED (1 PIECE), EACH	9999
A4392	OSTOMY POUCH, URINARY, WITH STANDARD WEAR BARRIER ATTACHED, WITH BUILT-IN CONVEXITY (1 PIECE), EACH	9999
A4393	OSTOMY POUCH, URINARY, WITH EXTENDED WEAR BARRIER ATTACHED, WITH BUILT-IN CONVEXITY (1 PIECE), EACH	9999
A4395	OSTOMY DEODORANT FOR USE IN OSTOMY POUCH, SOLID, PER TABLET	9999
A4396	OSTOMY BELT WITH PERISTOMAL HERNIA SUPPORT	9999
A4397	IRRIGATION SUPPLY; SLEEVE, EACH	1
A4398	OSTOMY IRRIGATION SUPPLY; BAG, EACH	1
A4399	OSTOMY IRRIGATION SUPPLY; CONE/CATHETER, WITH OR WITHOUT BRUSH	1
A4400	OSTOMY IRRIGATION SET	18
A4404	OSTOMY RING, EACH	12

A4405	OSTOMY SKIN BARRIER, NON-PECTIN BASED, PASTE, PER OUNCE	9999
A4406	OSTOMY SKIN BARRIER, PECTIN-BASED, PASTE, PER OUNCE	9999
A4407	OSTOMY SKIN BARRIER, WITH FLANGE (SOLID, FLEXIBLE, OR ACCORDION), EXTENDED WEAR, WITH BUILT-IN CONVEXITY, 4 X 4 INCHES OR SMALLER, EACH	9999
A4408	OSTOMY SKIN BARRIER, WITH FLANGE (SOLID, FLEXIBLE OR ACCORDION), EXTENDED WEAR, WITH BUILT-IN CONVEXITY, LARGER THAN 4 X 4 INCHES, EACH	9999
A4410	OSTOMY SKIN BARRIER, WITH FLANGE (SOLID, FLEXIBLE OR ACCORDION), EXTENDED WEAR, WITHOUT BUILT-IN CONVEXITY, LARGER THAN 4 X 4 INCHES, EACH	9999
A4411	OSTOMY SKIN BARRIER, SOLID 4 X 4 OR EQUIVALENT, EXTENDED WEAR, WITH BUILT-IN CONVEXITY, EACH	18
A4412	OSTOMY POUCH, DRAINABLE, HIGH OUTPUT, FOR USE ON A BARRIER WITH FLANGE (2 PIECE SYSTEM), WITHOUT FILTER, EACH	60
A4413	OSTOMY POUCH, DRAINABLE, HIGH OUTPUT, FOR USE ON A BARRIER WITH FLANGE (2 PIECE SYSTEM), WITH FILTER, EACH	9999
A4415	OSTOMY SKIN BARRIER, WITH FLANGE (SOLID, FLEXIBLE OR ACCORDION), WITHOUT BUILT-IN CONVEXITY, LARGER THAN 4 X 4 INCHES, EACH	9999
A4416	OSTOMY POUCH, CLOSED, WITH BARRIER ATTACHED, WITH FILTER (1 PIECE), EACH	60
A4417	OSTOMY POUCH, CLOSED, WITH BARRIER ATTACHED, WITH BUILT-IN CONVEXITY, WITH FILTER (1 PIECE), EACH	60
A4418	OSTOMY POUCH, CLOSED; WITHOUT BARRIER ATTACHED, WITH FILTER (1 PIECE), EACH	60
A4419	OSTOMY POUCH, CLOSED; FOR USE ON BARRIER WITH NON-LOCKING FLANGE, WITH FILTER (2 PIECE), EACH	60
A4420	OSTOMY POUCH, CLOSED; FOR USE ON BARRIER WITH LOCKING FLANGE (2 PIECE), EACH	60
A4422	OSTOMY ABSORBENT MATERIAL (SHEET/PAD/CRYSTAL PACKET) FOR USE IN OSTOMY POUCH TO THICKEN LIQUID STOMAL OUTPUT, EACH	9999
A4423	OSTOMY POUCH, CLOSED; FOR USE ON BARRIER WITH LOCKING FLANGE, WITH FILTER (2 PIECE), EACH	60
A4424	OSTOMY POUCH, DRAINABLE, WITH BARRIER ATTACHED, WITH FILTER (1 PIECE), EACH	21
A4425	OSTOMY POUCH, DRAINABLE; FOR USE ON BARRIER WITH NON-LOCKING FLANGE, WITH FILTER (2 PIECE SYSTEM), EACH	21
A4426	OSTOMY POUCH, DRAINABLE; FOR USE ON BARRIER WITH LOCKING FLANGE (2 PIECE SYSTEM), EACH	21
A4427	OSTOMY POUCH, DRAINABLE; FOR USE ON BARRIER WITH LOCKING FLANGE, WITH FILTER (2 PIECE SYSTEM), EACH	21
A4428	OSTOMY POUCH, URINARY, WITH EXTENDED WEAR BARRIER ATTACHED, WITH FAUCET-TYPE TAP WITH VALVE (1 PIECE), EACH	16

A4429	OSTOMY POUCH, URINARY, WITH BARRIER ATTACHED, WITH BUILT-IN CONVEXITY, WITH FAUCET-TYPE TAP WITH VALVE (1 PIECE), EACH	21
A4430	OSTOMY POUCH, URINARY, WITH EXTENDED WEAR BARRIER ATTACHED, WITH BUILT-IN CONVEXITY, WITH FAUCET-TYPE TAP WITH VALVE (1 PIECE), EACH	16
A4431	OSTOMY POUCH, URINARY; WITH BARRIER ATTACHED, WITH FAUCET-TYPE TAP WITH VALVE (1 PIECE), EACH	1
A4432	OSTOMY POUCH, URINARY; FOR USE ON BARRIER WITH NON-LOCKING FLANGE, WITH FAUCET-TYPE TAP WITH VALVE (2 PIECE), EACH	21
A4433	OSTOMY POUCH, URINARY; FOR USE ON BARRIER WITH LOCKING FLANGE (2 PIECE), EACH	21
A4434	OSTOMY POUCH, URINARY; FOR USE ON BARRIER WITH LOCKING FLANGE, WITH FAUCET-TYPE TAP WITH VALVE (2 PIECE), EACH	21
A4435	OSTOMY POUCH, DRAINABLE, HIGH OUTPUT, WITH EXTENDED WEAR BARRIER (ONE-PIECE SYSTEM), WITH OR WITHOUT FILTER, EACH	21
A4458	ENEMA BAG WITH TUBING, REUSABLE	1
A4459	MANUAL PUMP-OPERATED ENEMA SYSTEM, INCLUDES BALLOON, CATHETER AND ALL ACCESSORIES, REUSABLE, ANY TYPE	1
A4461	SURGICAL DRESSING HOLDER, NON-REUSABLE, EACH	10
A4463	SURGICAL DRESSING HOLDER, REUSABLE, EACH	2
A4465	NON-ELASTIC BINDER FOR EXTREMITY	2
A4470	GRAVLEE JET WASHER	1
A4480	VABRA ASPIRATOR	1
A4481	TRACHEOSTOMA FILTER, ANY TYPE, ANY SIZE, EACH	2
A4483	MOISTURE EXCHANGER, DISPOSABLE, FOR USE WITH INVASIVE MECHANICAL VENTILATION	1
A4490	SURGICAL STOCKINGS ABOVE KNEE LENGTH, EACH	4
A4495	SURGICAL STOCKINGS THIGH LENGTH, EACH	4
A4550	SURGICAL TRAYS	3
A4554	DISPOSABLE UNDERPADS, ALL SIZES	180
A4556	ELECTRODES, (E.G., APNEA MONITOR), PER PAIR	30
A4558	CONDUCTIVE GEL OR PASTE, FOR USE WITH ELECTRICAL DEVICE (E.G., TENS, NMES), PER OZ	48
A4559	COUPLING GEL OR PASTE, FOR USE WITH ULTRASOUND DEVICE, PER OZ	1
A4561	PESSARY, RUBBER, ANY TYPE	9999
A4562	PESSARY, NON RUBBER, ANY TYPE	9999
A4563	RECTAL CONTROL SYSTEM FOR VAGINAL INSERTION, FOR LONG TERM USE, INCLUDES PUMP AND ALL SUPPLIES AND ACCESSORIES, ANY TYPE EACH	1
A4565	SLINGS	1

A4566	SHOULDER SLING OR VEST DESIGN, ABDUCTION RESTRAINER, WITH OR WITHOUT SWATHE CONTROL, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	1
A4570	SPLINT	2
A4575	TOPICAL HYPERBARIC OXYGEN CHAMBER, DISPOSABLE	1
A4580	CAST SUPPLIES (E.G., PLASTER)	2
A4590	SPECIAL CASTING MATERIAL (E.G., FIBERGLASS)	2
A4595	ELECTRICAL STIMULATOR SUPPLIES, 2 LEAD, PER MONTH, (E.G., TENS, NMES)	2
A4600	SLEEVE FOR INTERMITTENT LIMB COMPRESSION DEVICE, REPLACEMENT ONLY, EACH	1
A4601	LITHIUM ION BATTERY, RECHARGEABLE, FOR NON-PROSTHETIC USE, REPLACEMENT	1
A4605	TRACHEAL SUCTION CATHETER, CLOSED SYSTEM, EACH	45
A4608	TRANSTRACHEAL OXYGEN CATHETER, EACH	8
A4611	BATTERY, HEAVY DUTY; REPLACEMENT FOR PATIENT OWNED VENTILATOR	2
A4612	BATTERY CABLES; REPLACEMENT FOR PATIENT-OWNED VENTILATOR	2
A4613	BATTERY CHARGER; REPLACEMENT FOR PATIENT-OWNED VENTILATOR	1
A4614	PEAK EXPIRATORY FLOW RATE METER, HAND HELD	1
A4615	CANNULA, NASAL	18
A4616	TUBING (OXYGEN), PER FOOT	1
A4617	MOUTH PIECE	1
A4619	FACE TENT	1
A4620	VARIABLE CONCENTRATION MASK	36
A4623	TRACHEOSTOMY, INNER CANNULA	35
A4624	TRACHEAL SUCTION CATHETER, ANY TYPE OTHER THAN CLOSED SYSTEM, EACH	180
A4625	TRACHEOSTOMY CARE KIT FOR NEW TRACHEOSTOMY	360
A4626	TRACHEOSTOMY CLEANING BRUSH, EACH	2
A4627	SPACER, BAG OR RESERVOIR, WITH OR WITHOUT MASK, FOR USE WITH METERED DOSE INHALER	1
A4629	TRACHEOSTOMY CARE KIT FOR ESTABLISHED TRACHEOSTOMY	30
A4633	REPLACEMENT BULB/LAMP FOR ULTRAVIOLET LIGHT THERAPY SYSTEM, EACH	1
A4634	REPLACEMENT BULB FOR THERAPEUTIC LIGHT BOX, TABLETOP MODEL	1
A4635	UNDERARM PAD, CRUTCH, REPLACEMENT, EACH	6
A4636	REPLACEMENT, HANDGRIP, CANE, CRUTCH, OR WALKER, EACH	6
A4638	REPLACEMENT BATTERY FOR PATIENT-OWNED EAR PULSE GENERATOR, EACH	2
A4639	REPLACEMENT PAD FOR INFRARED HEATING PAD SYSTEM, EACH	1
A4640	REPLACEMENT PAD FOR USE WITH MEDICALLY NECESSARY ALTERNATING	1

A4642	INDIUM IN-111 SATUMOMAB PENDETIDE, DIAGNOSTIC, PER STUDY DOSE, UP TO 6 MILLICURIES	1
A4648	TISSUE MARKER, IMPLANTABLE, ANY TYPE, EACH	3
A4650	IMPLANTABLE RADIATION DOSIMETER, EACH	3
A4651	CALIBRATED MICROCAPILLARY TUBE, EACH	2
A4652	MICROCAPILLARY TUBE SEALANT	2
A4660	SPHYGMOMANOMETER/BLOOD PRESSURE APPARATUS WITH CUFF AND STETHOSCOPE	1
A4663	BLOOD PRESSURE CUFF ONLY	1
A4670	AUTOMATIC BLOOD PRESSURE MONITOR	1
A4930	GLOVES, STERILE, PER PAIR	100
A4931	ORAL THERMOMETER, REUSABLE, ANY TYPE, EACH	1
A4932	RECTAL THERMOMETER, REUSABLE, ANY TYPE, EACH	1
A5051	OSTOMY POUCH, CLOSED; WITH BARRIER ATTACHED (1 PIECE), EACH	180
A5052	OSTOMY POUCH, CLOSED; WITHOUT BARRIER ATTACHED (1 PIECE), EACH	180
A5053	OSTOMY POUCH, CLOSED; FOR USE ON FACEPLATE, EACH	180
A5054	OSTOMY POUCH, CLOSED; FOR USE ON BARRIER WITH FLANGE (2 PIECE), EACH	180
A5055	STOMA CAP	180
A5057	OSTOMY POUCH, DRAINABLE, WITH EXTENDED WEAR BARRIER ATTACHED, WITH BUILT IN CONVEXITY, WITH FILTER, (1 PIECE), EACH	30
A5061	OSTOMY POUCH, DRAINABLE; WITH BARRIER ATTACHED, (1 PIECE), EACH	90
A5062	OSTOMY POUCH, DRAINABLE; WITHOUT BARRIER ATTACHED (1 PIECE), EACH	90
A5063	OSTOMY POUCH, DRAINABLE; FOR USE ON BARRIER WITH FLANGE (2 PIECE SYSTEM), EACH	90
A5071	OSTOMY POUCH, URINARY; WITH BARRIER ATTACHED (1 PIECE), EACH	90
A5072	OSTOMY POUCH, URINARY; WITHOUT BARRIER ATTACHED (1 PIECE), EACH	90
A5073	OSTOMY POUCH, URINARY; FOR USE ON BARRIER WITH FLANGE (2 PIECE), EACH	90
A5081	STOMA PLUG OR SEAL, ANY TYPE	2
A5082	CONTINENT DEVICE; CATHETER FOR CONTINENT STOMA	2
A5083	CONTINENT DEVICE, STOMA ABSORPTIVE COVER FOR CONTINENT STOMA	180
A5093	OSTOMY ACCESSORY; CONVEX INSERT	2
A5102	BEDSIDE DRAINAGE BOTTLE WITH OR WITHOUT TUBING, RIGID OR EXPANDABLE, EACH	1
A5105	URINARY SUSPENSORY WITH LEG BAG, WITH OR WITHOUT TUBE, EACH	6
A5113	LEG STRAP; LATEX, REPLACEMENT ONLY, PER SET	1
A5114	LEG STRAP; FOAM OR FABRIC, REPLACEMENT ONLY, PER SET	1

A5121	SKIN BARRIER; SOLID, 6 X 6 OR EQUIVALENT, EACH	90
A5122	SKIN BARRIER; SOLID, 8 X 8 OR EQUIVALENT, EACH	90
A5126	ADHESIVE OR NON-ADHESIVE; DISK OR FOAM PAD	2
A5131	APPLIANCE CLEANER, INCONTINENCE AND OSTOMY APPLIANCES, PER 16 OZ.	1
A5200	PERCUTANEOUS CATHETER/TUBE ANCHORING DEVICE, ADHESIVE SKIN ATTACHMENT	15
A5501	FOR DIABETICS ONLY, FITTING (INCLUDING FOLLOW-UP), CUSTOM PREPARATION AND SUPPLY OF SHOE MOLDED FROM CAST(S) OF PATIENT'S FOOT (CUSTOM MOLDED SHOE), PER SHOE	2
A5503	FOR DIABETICS ONLY, MODIFICATION (INCLUDING FITTING) OF OFF-THE-SHELF DEPTH-INLAY SHOE OR CUSTOM-MOLDED SHOE WITH ROLLER OR RIGID ROCKER BOTTOM, PER SHOE	2
A5504	FOR DIABETICS ONLY, MODIFICATION (INCLUDING FITTING) OF OFF-THE-SHELF DEPTH-INLAY SHOE OR CUSTOM-MOLDED SHOE WITH WEDGE(S), PER SHOE	2
A5505	FOR DIABETICS ONLY, MODIFICATION (INCLUDING FITTING) OF OFF-THE-SHELF DEPTH-INLAY SHOE OR CUSTOM-MOLDED SHOE WITH METATARSAL BAR, PER SHOE	2
A5506	FOR DIABETICS ONLY, MODIFICATION (INCLUDING FITTING) OF OFF-THE-SHELF DEPTH-INLAY SHOE OR CUSTOM-MOLDED SHOE WITH OFF-SET HEEL(S), PER SHOE	2
A5507	FOR DIABETICS ONLY, NOT OTHERWISE SPECIFIED MODIFICATION (INCLUDING FITTING) OF OFF-THE-SHELF DEPTH-INLAY SHOE OR CUSTOM-MOLDED SHOE, PER SHOE	2
A5508	FOR DIABETICS ONLY, DELUXE FEATURE OF OFF-THE-SHELF DEPTH-INLAY SHOE OR CUSTOM-MOLDED SHOE, PER SHOE	2
A5510	FOR DIABETICS ONLY, DIRECT FORMED, COMPRESSION MOLDED TO PATIENT'S FOOT WITHOUT EXTERNAL HEAT SOURCE, MULTIPLE-DENSITY INSERT(S) PREFABRICATED, PER SHOE	2
A5514	FOR DIABETICS ONLY, MULTIPLE DENSITY INSERT, MADE BY DIRECT CARVING WITH CAM TECHNOLOGY FROM A RECTIFIED CAD MODEL CREATED FROM A DIGITIZED SCAN OF THE PATIENT, TOTAL CONTACT WITH PATIENT'S FOOT, INCLUDING ARCH, BASE LAYER MINIMUM OF 3/16 INCH MATERIAL OF SHORE A 35 DUROMETER (OR HIGHER), INCLUDES ARCH FILLER AND OTHER SHAPING MATERIAL, CUSTOM FABRICATED, EACH	2
A6000	NON-CONTACT WOUND WARMING WOUND COVER FOR USE WITH THE NON-CONTACT WOUND WARMING DEVICE AND WARMING CARD	1
A6010	COLLAGEN BASED WOUND FILLER, DRY FORM, STERILE, PER GRAM OF COLLAGEN	9999
A6011	COLLAGEN BASED WOUND FILLER, GEL/PASTE, PER GRAM OF COLLAGEN	9999
A6021	COLLAGEN DRESSING, STERILE, SIZE 16 SQ. IN. OR LESS, EACH	9999
A6023	COLLAGEN DRESSING, STERILE, SIZE MORE THAN 48 SQ. IN., EACH	9999
A6024	COLLAGEN DRESSING WOUND FILLER, STERILE, PER 6 INCHES	9999
A6025	GEL SHEET FOR DERMAL OR EPIDERMAL APPLICATION, (E.G., SILICONE, HYDROGEL, OTHER), EACH	4

A6154	WOUND POUCH, EACH	1
A6198	ALGINATE OR OTHER FIBER GELLING DRESSING, WOUND COVER, STERILE, PAD SIZE MORE THAN 48 SQ. IN., EACH DRESSING	9999
A6204	COMPOSITE DRESSING, STERILE, PAD SIZE MORE THAN 16 SQ. IN. BUT LESS THAN OR EQUAL TO 48 SQ. IN., WITH ANY SIZE ADHESIVE BORDER, EACH DRESSING	9999
A6205	COMPOSITE DRESSING, STERILE, PAD SIZE MORE THAN 48 SQ. IN., WITH ANY SIZE ADHESIVE BORDER, EACH DRESSING	9999
A6208	CONTACT LAYER, STERILE, MORE THAN 48 SQ. IN., EACH DRESSING	4
A6214	FOAM DRESSING, WOUND COVER, STERILE, PAD SIZE MORE THAN 48 SQ. IN., WITH ANY SIZE ADHESIVE BORDER, EACH DRESSING	30
A6218	GAUZE, NON-IMPREGNATED, NON-STERILE, PAD SIZE MORE THAN 48 SQ. IN., WITHOUT ADHESIVE BORDER, EACH DRESSING	9999
A6220	GAUZE, NON-IMPREGNATED, STERILE, PAD SIZE MORE THAN 16 SQ. IN. BUT LESS THAN OR EQUAL TO 48 SQ. IN., WITH ANY SIZE ADHESIVE BORDER, EACH DRESSING	9999
A6221	GAUZE, NON-IMPREGNATED, STERILE, PAD SIZE MORE THAN 48 SQ. IN., WITH ANY SIZE ADHESIVE BORDER, EACH DRESSING	9999
A6224	GAUZE, IMPREGNATED WITH OTHER THAN WATER, NORMAL SALINE, OR HYDROGEL, STERILE, PAD SIZE MORE THAN 48 SQ. IN., WITHOUT ADHESIVE BORDER, EACH DRESSING	60
A6228	GAUZE, IMPREGNATED, WATER OR NORMAL SALINE, STERILE, PAD SIZE 16 SQ. IN. OR LESS, WITHOUT ADHESIVE BORDER, EACH DRESSING	9999
A6229	GAUZE, IMPREGNATED, WATER OR NORMAL SALINE, STERILE, PAD SIZE MORE THAN 16 SQ. IN. BUT LESS THAN OR EQUAL TO 48 SQ. IN., WITHOUT ADHESIVE BORDER, EACH DRESSING	9999
A6230	GAUZE, IMPREGNATED, WATER OR NORMAL SALINE, STERILE, PAD SIZE MORE THAN 48 SQ. IN., WITHOUT ADHESIVE BORDER, EACH DRESSING	1
A6232	GAUZE, IMPREGNATED, HYDROGEL, FOR DIRECT WOUND CONTACT, STERILE, PAD SIZE GREATER THAN 16 SQ. IN., BUT LESS THAN OR EQUAL TO 48 SQ. IN., EACH DRESSING	9999
A6233	GAUZE, IMPREGNATED, HYDROGEL, FOR DIRECT WOUND CONTACT, STERILE, PAD SIZE MORE THAN 48 SQ. IN., EACH DRESSING	9999
A6236	HYDROCOLLOID DRESSING, WOUND COVER, STERILE, PAD SIZE MORE THAN 48 SQ. IN., WITHOUT ADHESIVE BORDER, EACH DRESSING	9999
A6237	HYDROCOLLOID DRESSING, WOUND COVER, STERILE, PAD SIZE 16 SQ. IN. OR LESS, WITH ANY SIZE ADHESIVE BORDER, EACH DRESSING	9999
A6238	HYDROCOLLOID DRESSING, WOUND COVER, STERILE, PAD SIZE MORE THAN 16 SQ. IN. BUT LESS THAN OR EQUAL TO 48 SQ. IN., WITH ANY SIZE ADHESIVE BORDER, EACH DRESSING	9999
A6239	HYDROCOLLOID DRESSING, WOUND COVER, STERILE, PAD SIZE MORE THAN 48 SQ. IN., WITH ANY SIZE ADHESIVE BORDER, EACH DRESSING	9999
A6240	HYDROCOLLOID DRESSING, WOUND FILLER, PASTE, STERILE, PER OUNCE	9999

A6241	HYDROCOLLOID DRESSING, WOUND FILLER, DRY FORM, STERILE, PER GRAM	9999
A6242	HYDROGEL DRESSING, WOUND COVER, STERILE, PAD SIZE 16 SQ. IN. OR LESS, WITHOUT ADHESIVE BORDER, EACH DRESSING	9999
A6243	HYDROGEL DRESSING, WOUND COVER, STERILE, PAD SIZE MORE THAN 16 SQ. IN. BUT LESS THAN OR EQUAL TO 48 SQ. IN., WITHOUT ADHESIVE BORDER, EACH DRESSING	9999
A6244	HYDROGEL DRESSING, WOUND COVER, STERILE, PAD SIZE MORE THAN 48 SQ. IN., WITHOUT ADHESIVE BORDER, EACH DRESSING	9999
A6245	HYDROGEL DRESSING, WOUND COVER, STERILE, PAD SIZE 16 SQ. IN. OR LESS, WITH ANY SIZE ADHESIVE BORDER, EACH DRESSING	9999
A6246	HYDROGEL DRESSING, WOUND COVER, STERILE, PAD SIZE MORE THAN 16 SQ. IN. BUT LESS THAN OR EQUAL TO 48 SQ. IN., WITH ANY SIZE ADHESIVE BORDER, EACH DRESSING	9999
A6247	HYDROGEL DRESSING, WOUND COVER, STERILE, PAD SIZE MORE THAN 48 SQ. IN., WITH ANY SIZE ADHESIVE BORDER, EACH DRESSING	9999
A6250	SKIN SEALANTS, PROTECTANTS, MOISTURIZERS, OINTMENTS, ANY TYPE, ANY SIZE	1
A6254	SPECIALTY ABSORPTIVE DRESSING, WOUND COVER, STERILE, PAD SIZE 16 SQ. IN. OR LESS, WITH ANY SIZE ADHESIVE BORDER, EACH DRESSING	9999
A6255	SPECIALTY ABSORPTIVE DRESSING, WOUND COVER, STERILE, PAD SIZE MORE THAN 16 SQ. IN. BUT LESS THAN OR EQUAL TO 48 SQ. IN., WITH ANY SIZE ADHESIVE BORDER, EACH DRESSING	9999
A6256	SPECIALTY ABSORPTIVE DRESSING, WOUND COVER, STERILE, PAD SIZE MORE THAN 48 SQ. IN., WITH ANY SIZE ADHESIVE BORDER, EACH DRESSING	9999
A6257	TRANSPARENT FILM, STERILE, 16 SQ. IN. OR LESS, EACH DRESSING	9999
A6261	WOUND FILLER, GEL/PASTE, PER FLUID OUNCE, NOT OTHERWISE SPECIFIED	3
A6262	WOUND FILLER, DRY FORM, PER GRAM, NOT OTHERWISE SPECIFIED	3
A6403	GAUZE, NON-IMPREGNATED, STERILE, PAD SIZE MORE THAN 16 SQ. IN. LESS THAN OR EQUAL TO 48 SQ. IN., WITHOUT ADHESIVE BORDER, EACH DRESSING	9999
A6404	GAUZE, NON-IMPREGNATED, STERILE, PAD SIZE MORE THAN 48 SQ. IN., WITHOUT ADHESIVE BORDER, EACH DRESSING	2
A6410	EYE PAD, STERILE, EACH	90
A6411	EYE PAD, NON-STERILE, EACH	1200
A6412	EYE PATCH, OCCLUSIVE, EACH	60
A6444	CONFORMING BANDAGE, NON-ELASTIC, KNITTED/WOVEN, NON-STERILE, WIDTH GREATER THAN OR EQUAL TO 5 INCHES, PER YARD	300
A6445	CONFORMING BANDAGE, NON-ELASTIC, KNITTED/WOVEN, STERILE, WIDTH LESS THAN THREE INCHES, PER YARD	300
A6451	MODERATE COMPRESSION BANDAGE, ELASTIC, KNITTED/WOVEN, LOAD RESISTANCE OF 1.25 TO 1.34 FOOT POUNDS AT 50% MAXIMUM STRETCH, WIDTH GREATER THAN OR EQUAL TO THREE INCHES AND LESS THAN FIVE INCHES, PER YARD	18

SYNTHETIC RESORBABLE WOUND DRESSING, STERILE, PAD SIZE 16 SQ. IN. OR LESS, WITHOUT ADHESIVE BORDER, EACH DRESSING	1
SYNTHETIC RESORBABLE WOUND DRESSING, STERILE, PAD SIZE MORE THAN 16 SQ. IN. BUT LESS THAN OR EQUAL TO 48 SQ. IN., WITHOUT ADHESIVE BORDER, EACH DRESSING	1
COMPRESSION BURN GARMENT, BODYSUIT (HEAD TO FOOT), CUSTOM FABRICATED	2
COMPRESSION BURN GARMENT, CHIN STRAP, CUSTOM FABRICATED	2
COMPRESSION BURN GARMENT, FACIAL HOOD, CUSTOM FABRICATED	2
COMPRESSION BURN GARMENT, GLOVE TO WRIST, CUSTOM FABRICATED	4
COMPRESSION BURN GARMENT, GLOVE TO ELBOW, CUSTOM FABRICATED	4
COMPRESSION BURN GARMENT, GLOVE TO AXILLA, CUSTOM FABRICATED	4
COMPRESSION BURN GARMENT, FOOT TO KNEE LENGTH, CUSTOM FABRICATED	4
COMPRESSION BURN GARMENT, FOOT TO THIGH LENGTH, CUSTOM FABRICATED	4
COMPRESSION BURN GARMENT, UPPER TRUNK TO WAIST INCLUDING ARM OPENINGS (VEST), CUSTOM FABRICATED	2
COMPRESSION BURN GARMENT, TRUNK, INCLUDING ARMS DOWN TO LEG OPENINGS (LEOTARD), CUSTOM FABRICATED	2
COMPRESSION BURN GARMENT, LOWER TRUNK INCLUDING LEG OPENINGS (PANTY), CUSTOM FABRICATED	2
COMPRESSION BURN GARMENT, NOT OTHERWISE CLASSIFIED	4
COMPRESSION BURN MASK, FACE AND/OR NECK, PLASTIC OR EQUAL, CUSTOM FABRICATED	2
GRADIENT COMPRESSION STOCKING, BELOW KNEE, 30-40 MMHG, EACH	4
GRADIENT COMPRESSION STOCKING, BELOW KNEE, 40-50 MMHG, EACH	4
GRADIENT COMPRESSION STOCKING, THIGH LENGTH, 30-40 MMHG, EACH	4
GRADIENT COMPRESSION STOCKING, THIGH LENGTH, 40-50 MMHG, EACH	4
GRADIENT COMPRESSION STOCKING, FULL LENGTH/CHAP STYLE, 18-30 MMHG, EACH	4
GRADIENT COMPRESSION STOCKING, FULL LENGTH/CHAP STYLE, 30-40 MMHG, EACH	4
GRADIENT COMPRESSION STOCKING, FULL LENGTH/CHAP STYLE, 40-50 MMHG, EACH	4
GRADIENT COMPRESSION STOCKING, WAIST LENGTH, 40-50 MMHG, EACH	2
GRADIENT COMPRESSION STOCKING, GARTER BELT	2
GRADIENT COMPRESSION WRAP, NON-ELASTIC, BELOW KNEE, 30-50 MM HG, EACH	2
ADMINISTRATION SET, WITH SMALL VOLUME NONFILTERED PNEUMATIC NEBULIZER, NON-DISPOSABLE	2
ADMINISTRATION SET, WITH SMALL VOLUME FILTERED PNEUMATIC NEBULIZER	6
	SYNTHETIC RESORBABLE WOUND DRESSING, STERILE, PAD SIZE MORE THAN 16 SQ. IN. BUT LESS THAN OR EQUAL TO 48 SQ. IN., WITHOUT ADHESIVE BORDER, EACH DRESSING COMPRESSION BURN GARMENT, BODYSUIT (HEAD TO FOOT), CUSTOM FABRICATED COMPRESSION BURN GARMENT, CHIN STRAP, CUSTOM FABRICATED COMPRESSION BURN GARMENT, FACIAL HOOD, CUSTOM FABRICATED COMPRESSION BURN GARMENT, FACIAL HOOD, CUSTOM FABRICATED COMPRESSION BURN GARMENT, GLOVE TO WRIST, CUSTOM FABRICATED COMPRESSION BURN GARMENT, GLOVE TO ELBOW, CUSTOM FABRICATED COMPRESSION BURN GARMENT, GLOVE TO AXILLA, CUSTOM FABRICATED COMPRESSION BURN GARMENT, FOOT TO KNEE LENGTH, CUSTOM FABRICATED COMPRESSION BURN GARMENT, FOOT TO THIGH LENGTH, CUSTOM FABRICATED COMPRESSION BURN GARMENT, UPPER TRUNK TO WAIST INCLUDING ARM OPENINGS (VEST), CUSTOM FABRICATED COMPRESSION BURN GARMENT, TRUNK, INCLUDING ARMS DOWN TO LEG OPENINGS (LEOTARD), CUSTOM FABRICATED COMPRESSION BURN GARMENT, LOWER TRUNK INCLUDING LEG OPENINGS (PANTY), CUSTOM FABRICATED COMPRESSION BURN GARMENT, NOT OTHERWISE CLASSIFIED COMPRESSION BURN GARMENT, NOT OTHERWISE CLASSIFIED COMPRESSION BURN GARMENT, NOT OTHERWISE CLASSIFIED COMPRESSION STOCKING, BELOW KNEE, 30-40 MMHG, EACH GRADIENT COMPRESSION STOCKING, BELOW KNEE, 30-40 MMHG, EACH GRADIENT COMPRESSION STOCKING, FULL LENGTH/CHAP STYLE, 18-30 MMHG, EACH GRADIENT COMPRESSION STOCKING, FULL LENGTH/CHAP STYLE, 18-30 MMHG, EACH GRADIENT COMPRESSION STOCKING, FULL LENGTH/CHAP STYLE, 40-50 MMHG, EACH GRADIENT COMPRESSION STOCKING, FULL LENGTH/CHAP STYLE, 40-50 MMHG, EACH GRADIENT COMPRESSION STOCKING, FULL LENGTH/CHAP STYLE, 40-50 MMHG, EACH GRADIENT COMPRESSION STOCKING, FULL LENGTH/CHAP STYLE, 40-50 MMHG, EACH GRADIENT COMPRESSION STOCKING, FULL LENGTH, 40-50 MMHG, EACH GRADIENT COMPRESSION STOCKING, GARTER BELT GRADIENT COMPRESSION STOCKING, WAIST LENGTH, 40-50 MMHG, EACH ADMINISTRATION SET, WITH SMALL VOLUME NONFILTERED PNEUMATIC NEBULIZER, NON-DISPOSABLE

A7008	LARGE VOLUME NEBULIZER, DISPOSABLE, PREFILLED, USED WITH AEROSOL COMPRESSOR	1
A7009	RESERVOIR BOTTLE, NON-DISPOSABLE, USED WITH LARGE VOLUME ULTRASONIC NEBULIZER	1
A7017	NEBULIZER, DURABLE, GLASS OR AUTOCLAVABLE PLASTIC, BOTTLE TYPE, NOT USED WITH OXYGEN	1
A7025	HIGH FREQUENCY CHEST WALL OSCILLATION SYSTEM VEST, REPLACEMENT FOR USE WITH PATIENT OWNED EQUIPMENT, EACH	1
A7026	HIGH FREQUENCY CHEST WALL OSCILLATION SYSTEM HOSE, REPLACEMENT FOR USE WITH PATIENT OWNED EQUIPMENT, EACH	1
A7027	COMBINATION ORAL/NASAL MASK, USED WITH CONTINUOUS POSITIVE AIRWAY PRESSURE DEVICE, EACH	1
A7028	ORAL CUSHION FOR COMBINATION ORAL/NASAL MASK, REPLACEMENT ONLY, EACH	2
A7029	NASAL PILLOWS FOR COMBINATION ORAL/NASAL MASK, REPLACEMENT ONLY, PAIR	2
A7034	NASAL INTERFACE (MASK OR CANNULA TYPE) USED WITH POSITIVE AIRWAY PRESSURE DEVICE, WITH OR WITHOUT HEAD STRAP	1
A7036	CHINSTRAP USED WITH POSITIVE AIRWAY PRESSURE DEVICE	1
A7037	TUBING USED WITH POSITIVE AIRWAY PRESSURE DEVICE	1
A7040	ONE WAY CHEST DRAIN VALVE	2
A7041	WATER SEAL DRAINAGE CONTAINER AND TUBING FOR USE WITH IMPLANTED CHEST TUBE	2
A7044	ORAL INTERFACE USED WITH POSITIVE AIRWAY PRESSURE DEVICE, EACH	1
A7047	ORAL INTERFACE USED WITH RESPIRATORY SUCTION PUMP, EACH	1
A7048	VACUUM DRAINAGE COLLECTION UNIT AND TUBING KIT, INCLUDING ALL SUPPLIES NEEDED FOR COLLECTION UNIT CHANGE, FOR USE WITH IMPLANTED CATHETER, EACH	10
A7502	REPLACEMENT DIAPHRAGM/FACEPLATE FOR TRACHEOSTOMA VALVE, EACH	9999
A7503	FILTER HOLDER OR FILTER CAP, REUSABLE, FOR USE IN A TRACHEOSTOMA HEAT AND MOISTURE EXCHANGE SYSTEM, EACH	9999
A7504	FILTER FOR USE IN A TRACHEOSTOMA HEAT AND MOISTURE EXCHANGE SYSTEM, EACH	9999
A7506	ADHESIVE DISC FOR USE IN A HEAT AND MOISTURE EXCHANGE SYSTEM AND/OR WITH TRACHEOSTOMA VALVE, ANY TYPE EACH	9999
A7520	TRACHEOSTOMY/LARYNGECTOMY TUBE, NON-CUFFED, POLYVINYLCHLORIDE (PVC), SILICONE OR EQUAL, EACH	4
	SILICONE ON EQUAL, EACH	

A7522	TRACHEOSTOMY/LARYNGECTOMY TUBE, STAINLESS STEEL OR EQUAL (STERILIZABLE AND REUSABLE), EACH	1
A7524	TRACHEOSTOMA STENT/STUD/BUTTON, EACH	1
A7526	TRACHEOSTOMY TUBE COLLAR/HOLDER, EACH	31
A8000	HELMET, PROTECTIVE, SOFT, PREFABRICATED, INCLUDES ALL COMPONENTS AND ACCESSORIES	2
A8001	HELMET, PROTECTIVE, HARD, PREFABRICATED, INCLUDES ALL COMPONENTS AND ACCESSORIES	2
A8002	HELMET, PROTECTIVE, SOFT, CUSTOM FABRICATED, INCLUDES ALL COMPONENTS AND ACCESSORIES	2
A8003	HELMET, PROTECTIVE, HARD, CUSTOM FABRICATED, INCLUDES ALL COMPONENTS AND ACCESSORIES	1
A8004	SOFT INTERFACE FOR HELMET, REPLACEMENT ONLY	1
A9155	ARTIFICIAL SALIVA, 30 ML	360
A9275	HOME GLUCOSE DISPOSABLE MONITOR, INCLUDES TEST STRIPS	1
A9276	SENSOR; INVASIVE (E.G., SUBCUTANEOUS), DISPOSABLE, FOR USE WITH INTERSTITIAL CONTINUOUS GLUCOSE MONITORING SYSTEM, ONE UNIT = 1 DAY SUPPLY	90
A9277	TRANSMITTER; EXTERNAL, FOR USE WITH INTERSTITIAL CONTINUOUS GLUCOSE MONITORING SYSTEM	1
A9278	RECEIVER (MONITOR); EXTERNAL, FOR USE WITH INTERSTITIAL CONTINUOUS GLUCOSE MONITORING SYSTEM	1
A9281	REACHING/GRABBING DEVICE, ANY TYPE, ANY LENGTH, EACH	1
A9282	WIG, ANY TYPE, EACH	1
A9283	FOOT PRESSURE OFF LOADING/SUPPORTIVE DEVICE, ANY TYPE, EACH	2
A9284	SPIROMETER, NON-ELECTRONIC, INCLUDES ALL ACCESSORIES	1
A9285	INVERSION/EVERSION CORRECTION DEVICE	2
A9500	TECHNETIUM TC-99M SESTAMIBI, DIAGNOSTIC, PER STUDY DOSE	3
A9501	TECHNETIUM TC-99M TEBOROXIME, DIAGNOSTIC, PER STUDY DOSE	1
A9502	TECHNETIUM TC-99M TETROFOSMIN, DIAGNOSTIC, PER STUDY DOSE	3
A9503	TECHNETIUM TC-99M MEDRONATE, DIAGNOSTIC, PER STUDY DOSE, UP TO 30 MILLICURIES	1
A9504	TECHNETIUM TC-99M APCITIDE, DIAGNOSTIC, PER STUDY DOSE, UP TO 20 MILLICURIES	1
A9505	THALLIUM TL-201 THALLOUS CHLORIDE, DIAGNOSTIC, PER MILLICURIE	4
A9507	INDIUM IN-111 CAPROMAB PENDETIDE, DIAGNOSTIC, PER STUDY DOSE, UP TO 10 MILLICURIES	1
A9508	IODINE I-131 IOBENGUANE SULFATE, DIAGNOSTIC, PER 0.5 MILLICURIE	2

A9509	IODINE I-123 SODIUM IODIDE, DIAGNOSTIC, PER MILLICURIE	5
A9510	TECHNETIUM TC-99M DISOFENIN, DIAGNOSTIC, PER STUDY DOSE, UP TO 15 MILLICURIES	1
A9512	TECHNETIUM TC-99M PERTECHNETATE, DIAGNOSTIC, PER MILLICURIE	30
A9513	LUTETIUM LU 177, DOTATATE, THERAPEUTIC, 1 MILLICURIE	200
A9515	CHOLINE C-11, DIAGNOSTIC, PER STUDY DOSE UP TO 20 MILLICURIES	1
A9516	IODINE I-123 SODIUM IODIDE, DIAGNOSTIC, PER 100 MICROCURIES, UP TO 999 MICROCURIES	4
A9517	IODINE I-131 SODIUM IODIDE CAPSULE(S), THERAPEUTIC, PER MILLICURIE	200
A9520	TECHNETIUM TC-99M TILMANOCEPT, DIAGNOSTIC, UP TO 0.5 MILLICURIES	1
A9521	TECHNETIUM TC-99M EXAMETAZIME, DIAGNOSTIC, PER STUDY DOSE, UP TO 25 MILLICURIES	2
A9524	IODINE I-131 IODINATED SERUM ALBUMIN, DIAGNOSTIC, PER 5 MICROCURIES	10
A9526	NITROGEN N-13 AMMONIA, DIAGNOSTIC, PER STUDY DOSE, UP TO 40 MILLICURIES	2
A9527	IODINE I-125, SODIUM IODIDE SOLUTION, THERAPEUTIC, PER MILLICURIE	195
A9528	IODINE I-131 SODIUM IODIDE CAPSULE(S), DIAGNOSTIC, PER MILLICURIE	10
A9529	IODINE I-131 SODIUM IODIDE SOLUTION, DIAGNOSTIC, PER MILLICURIE	10
A9530	IODINE I-131 SODIUM IODIDE SOLUTION, THERAPEUTIC, PER MILLICURIE	200
A9531	IODINE I-131 SODIUM IODIDE, DIAGNOSTIC, PER MICROCURIE (UP TO 100 MICROCURIES)	100
A9532	IODINE I-125 SERUM ALBUMIN, DIAGNOSTIC, PER 5 MICROCURIES	10
A9536	TECHNETIUM TC-99M DEPREOTIDE, DIAGNOSTIC, PER STUDY DOSE, UP TO 35 MILLICURIES	1
A9537	TECHNETIUM TC-99M MEBROFENIN, DIAGNOSTIC, PER STUDY DOSE, UP TO 15 MILLICURIES	1
A9538	TECHNETIUM TC-99M PYROPHOSPHATE, DIAGNOSTIC, PER STUDY DOSE, UP TO 25 MILLICURIES	1
A9539	TECHNETIUM TC-99M PENTETATE, DIAGNOSTIC, PER STUDY DOSE, UP TO 25 MILLICURIES	2
A9540	TECHNETIUM TC-99M MACROAGGREGATED ALBUMIN, DIAGNOSTIC, PER STUDY DOSE, UP TO 10 MILLICURIES	2
A9541	TECHNETIUM TC-99M SULFUR COLLOID, DIAGNOSTIC, PER STUDY DOSE, UP TO 20 MILLICURIES	1
A9542	INDIUM IN-111 IBRITUMOMAB TIUXETAN, DIAGNOSTIC, PER STUDY DOSE, UP TO 5 MILLICURIES	1
A9543	YTTRIUM Y-90 IBRITUMOMAB TIUXETAN, THERAPEUTIC, PER TREATMENT DOSE, UP TO 40 MILLICURIES	1
A9546	COBALT CO-57/58, CYANOCOBALAMIN, DIAGNOSTIC, PER STUDY DOSE, UP TO 1 MICROCURIE	1

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A9547	INDIUM IN-111 OXYQUINOLINE, DIAGNOSTIC, PER 0.5 MILLICURIE	2
A9548	INDIUM IN-111 PENTETATE, DIAGNOSTIC, PER 0.5 MILLICURIE	2
A9550	TECHNETIUM TC-99M SODIUM GLUCEPTATE, DIAGNOSTIC, PER STUDY DOSE, UP TO 25 MILLICURIE	1
A9551	TECHNETIUM TC-99M SUCCIMER, DIAGNOSTIC, PER STUDY DOSE, UP TO 10 MILLICURIES	1
A9552	FLUORODEOXYGLUCOSE F-18 FDG, DIAGNOSTIC, PER STUDY DOSE, UP TO 45 MILLICURIES	1
A9553	CHROMIUM CR-51 SODIUM CHROMATE, DIAGNOSTIC, PER STUDY DOSE, UP TO 250 MICROCURIES	1
A9554	IODINE I-125 SODIUM IOTHALAMATE, DIAGNOSTIC, PER STUDY DOSE, UP TO 10 MICROCURIES	1
A9555	RUBIDIUM RB-82, DIAGNOSTIC, PER STUDY DOSE, UP TO 60 MILLICURIES	2
A9556	GALLIUM GA-67 CITRATE, DIAGNOSTIC, PER MILLICURIE	10
A9557	TECHNETIUM TC-99M BICISATE, DIAGNOSTIC, PER STUDY DOSE, UP TO 25 MILLICURIES	2
A9558	XENON XE-133 GAS, DIAGNOSTIC, PER 10 MILLICURIES	7
A9559	COBALT CO-57 CYANOCOBALAMIN, ORAL, DIAGNOSTIC, PER STUDY DOSE, UP TO 1 MICROCURIE	1
A9560	TECHNETIUM TC-99M LABELED RED BLOOD CELLS, DIAGNOSTIC, PER STUDY DOSE, UP TO 30 MILLICURIES	2
A9561	TECHNETIUM TC-99M OXIDRONATE, DIAGNOSTIC, PER STUDY DOSE, UP TO 30 MILLICURIES	1
A9562	TECHNETIUM TC-99M MERTIATIDE, DIAGNOSTIC, PER STUDY DOSE, UP TO 15 MILLICURIES	2
A9563	SODIUM PHOSPHATE P-32, THERAPEUTIC, PER MILLICURIE	10
A9564	CHROMIC PHOSPHATE P-32 SUSPENSION, THERAPEUTIC, PER MILLICURIE	20
A9566	TECHNETIUM TC-99M FANOLESOMAB, DIAGNOSTIC, PER STUDY DOSE, UP TO 25 MILLICURIES	1
A9567	TECHNETIUM TC-99M PENTETATE, DIAGNOSTIC, AEROSOL, PER STUDY DOSE, UP TO 75 MILLICURIES	2
A9569	TECHNETIUM TC-99M EXAMETAZIME LABELED AUTOLOGOUS WHITE BLOOD CELLS, DIAGNOSTIC, PER STUDY DOSE	1
A9570	INDIUM IN-111 LABELED AUTOLOGOUS WHITE BLOOD CELLS, DIAGNOSTIC, PER STUDY DOSE	1
A9571	INDIUM IN-111 LABELED AUTOLOGOUS PLATELETS, DIAGNOSTIC, PER STUDY DOSE	1
A9572	INDIUM IN-111 PENTETREOTIDE, DIAGNOSTIC, PER STUDY DOSE, UP TO 6 MILLICURIES	1
A9575	INJECTION, GADOTERATE MEGLUMINE, 0.1 ML	300

A9576	INJECTION, GADOTERIDOL, (PROHANCE MULTIPACK), PER ML	100
A9577	INJECTION, GADOBENATE DIMEGLUMINE (MULTIHANCE), PER ML	50
A9578	INJECTION, GADOBENATE DIMEGLUMINE (MULTIHANCE MULTIPACK), PER ML	50
A9579	INJECTION, GADOLINIUM-BASED MAGNETIC RESONANCE CONTRAST AGENT, NOT OTHERWISE SPECIFIED (NOS), PER ML	100
A9580	SODIUM FLUORIDE F-18, DIAGNOSTIC, PER STUDY DOSE, UP TO 30 MILLICURIES	1
A9581	INJECTION, GADOXETATE DISODIUM, 1 ML	20
A9582	IODINE I-123 IOBENGUANE, DIAGNOSTIC, PER STUDY DOSE, UP TO 15 MILLICURIES	1
A9583	INJECTION, GADOFOSVESET TRISODIUM, 1 ML	18
A9584	IODINE 1-123 IOFLUPANE, DIAGNOSTIC, PER STUDY DOSE, UP TO 5 MILLICURIES	1
A9585	INJECTION, GADOBUTROL, 0.1 ML	300
A9586	FLORBETAPIR F18, DIAGNOSTIC, PER STUDY DOSE, UP TO 10 MILLICURIES	1
A9587	GALLIUM GA-68, DOTATATE, DIAGNOSTIC, 0.1 MILLICURIE	54
A9588	FLUCICLOVINE F-18, DIAGNOSTIC, 1 MILLICURIE	10
A9589	INSTILLATION, HEXAMINOLEVULINATE HYDROCHLORIDE, 100 MG	1
A9590	IODINE I-131, IOBENGUANE, 1 MILLICURIE	675
A9591	FLUOROESTRADIOL F 18, DIAGNOSTIC, 1 MILLICURIE	6
A9592	Copper cu-64, dotatate, diagnostic, 1 millicurie	4
A9593	Gallium ga-68 psma-11, diagnostic, (ucsf), 1 millicurie	7
A9594	Gallium ga-68 psma-11, diagnostic, (ucla), 1 millicurie	7
A9600	STRONTIUM SR-89 CHLORIDE, THERAPEUTIC, PER MILLICURIE	7
A9604	SAMARIUM SM-153 LEXIDRONAM, THERAPEUTIC, PER TREATMENT DOSE, UP TO 150 MILLICURIES	1
A9606	RADIUM RA-223 DICHLORIDE, THERAPEUTIC, PER MICROCURIE	224
A9698	NON-RADIOACTIVE CONTRAST IMAGING MATERIAL, NOT OTHERWISE CLASSIFIED, PER STUDY	3
A9700	SUPPLY OF INJECTABLE CONTRAST MATERIAL FOR USE IN ECHOCARDIOGRAPHY, PER STUDY	2
A9900	MISCELLANEOUS DME SUPPLY, ACCESSORY, AND/OR SERVICE COMPONENT OF ANOTHER HCPCS CODE	1
B4034	ENTERAL FEEDING SUPPLY KIT; SYRINGE FED, PER DAY, INCLUDES BUT NOT LIMITED TO FEEDING/FLUSHING SYRINGE, ADMINISTRATION SET TUBING, DRESSINGS, TAPE	30
B4035	ENTERAL FEEDING SUPPLY KIT; PUMP FED, PER DAY, INCLUDES BUT NOT LIMITED TO FEEDING/FLUSHING SYRINGE, ADMINISTRATION SET TUBING, DRESSINGS, TAPE	30
B4036	ENTERAL FEEDING SUPPLY KIT; GRAVITY FED, PER DAY, INCLUDES BUT NOT LIMITED TO FEEDING/FLUSHING SYRINGE, ADMINISTRATION SET TUBING, DRESSINGS, TAPE	30
B4081	NASOGASTRIC TUBING WITH STYLET	4

B4082	NASOGASTRIC TUBING WITHOUT STYLET	4
B4083	STOMACH TUBE - LEVINE TYPE	4
B4087	GASTROSTOMY/JEJUNOSTOMY TUBE, STANDARD, ANY MATERIAL, ANY TYPE, EACH	1
B4100	FOOD THICKENER, ADMINISTERED ORALLY, PER OUNCE	72
B4103	ENTERAL FORMULA, FOR PEDIATRICS, USED TO REPLACE FLUIDS AND ELECTROLYTES (E.G., CLEAR LIQUIDS), 500 ML = 1 UNIT	960
B4105	IN-LINE CARTRIDGE CONTAINING DIGESTIVE ENZYME(S) FOR ENTERAL FEEDING, EACH	62
B4150	ENTERAL FORMULA, NUTRITIONALLY COMPLETE WITH INTACT NUTRIENTS, INCLUDES PROTEINS, FATS, CARBOHYDRATES, VITAMINS AND MINERALS, MAY INCLUDE FIBER, ADMINISTERED THROUGH AN ENTERAL FEEDING TUBE, 100 CALORIES = 1 UNIT	960
B4152	ENTERAL FORMULA, NUTRITIONALLY COMPLETE, CALORICALLY DENSE (EQUAL TO OR GREATER THAN 1.5 KCAL/ML) WITH INTACT NUTRIENTS, INCLUDES PROTEINS, FATS, CARBOHYDRATES, VITAMINS AND MINERALS, MAY INCLUDE FIBER, ADMINISTERED THROUGH AN ENTERAL FEEDING TUBE, 100 CALORIES = 1 UNIT	960
B4153	ENTERAL FORMULA, NUTRITIONALLY COMPLETE, HYDROLYZED PROTEINS (AMINO ACIDS AND PEPTIDE CHAIN), INCLUDES FATS, CARBOHYDRATES, VITAMINS AND MINERALS, MAY INCLUDE FIBER, ADMINISTERED THROUGH AN ENTERAL FEEDING TUBE, 100 CALORIES = 1 UNIT	960
B4154	ENTERAL FORMULA, NUTRITIONALLY COMPLETE, FOR SPECIAL METABOLIC NEEDS, EXCLUDES INHERITED DISEASE OF METABOLISM, INCLUDES ALTERED COMPOSITION OF PROTEINS, FATS, CARBOHYDRATES, VITAMINS AND/OR MINERALS, MAY INCLUDE FIBER, ADMINISTERED THROUGH AN ENTERAL FEEDING TUBE, 100 CALORIES = 1 UNIT	960
B4155	ENTERAL FORMULA, NUTRITIONALLY INCOMPLETE/MODULAR NUTRIENTS, INCLUDES SPECIFIC NUTRIENTS, CARBOHYDRATES (E.G., GLUCOSE POLYMERS), PROTEINS/AMINO ACIDS (E.G., GLUTAMINE, ARGININE), FAT (E.G., MEDIUM CHAIN TRIGLYCERIDES) OR COMBINATION, ADMINISTERED THROUGH AN ENTERAL FEEDING TUBE, 100 CALORIES = 1 UNIT	960
B4156	ENTERAL FORMULAE; CATEGORY VI; STANDARDIZED NUTRIENTS, ADMINISTERED THROUGH AN ENTERAL FEEDING TUBE, 100 CALORIES = 1 UNIT	960
B4157	ENTERAL FORMULA, NUTRITIONALLY COMPLETE, FOR SPECIAL METABOLIC NEEDS FOR INHERITED DISEASE OF METABOLISM, INCLUDES PROTEINS, FATS, CARBOHYDRATES, VITAMINS AND MINERALS, MAY INCLUDE FIBER, ADMINISTERED THROUGH AN ENTERAL FEEDING TUBE, 100 CALORIES = 1 UNIT	960
B4158	ENTERAL FORMULA, FOR PEDIATRICS, NUTRITIONALLY COMPLETE WITH INTACT NUTRIENTS, INCLUDES PROTEINS, FATS, CARBOHYDRATES, VITAMINS AND MINERALS, MAY INCLUDE FIBER AND/OR IRON, ADMINISTERED THROUGH AN ENTERAL FEEDING TUBE, 100 CALORIES = 1 UNIT	960
B4159	ENTERAL FORMULA, FOR PEDIATRICS, NUTRITIONALLY COMPLETE SOY BASED WITH INTACT NUTRIENTS, INCLUDES PROTEINS, FATS, CARBOHYDRATES, VITAMINS AND MINERALS, MAY INCLUDE FIBER AND/OR IRON, ADMINISTERED THROUGH AN ENTERAL FEEDING TUBE, 100 CALORIES = 1 UNIT	960

B4160	ENTERAL FORMULA, FOR PEDIATRICS, NUTRITIONALLY COMPLETE CALORICALLY DENSE (EQUAL TO OR GREATER THAN 0.7 KCAL/ML) WITH INTACT NUTRIENTS, INCLUDES PROTEINS, FATS, CARBOHYDRATES, VITAMINS AND MINERALS, MAY INCLUDE FIBER, ADMINISTERED THROUGH AN ENTERAL FEEDING TUBE, 100 CALORIES = 1 UNIT	960
B4161	ENTERAL FORMULA, FOR PEDIATRICS, HYDROLYZED/AMINO ACIDS AND PEPTIDE CHAIN PROTEINS, INCLUDES FATS, CARBOHYDRATES, VITAMINS AND MINERALS, MAY INCLUDE FIBER, ADMINISTERED THROUGH AN ENTERAL FEEDING TUBE, 100 CALORIES = 1 UNIT	960
B4162	ENTERAL FORMULA, FOR PEDIATRICS, SPECIAL METABOLIC NEEDS FOR INHERITED DISEASE OF METABOLISM, INCLUDES PROTEINS, FATS, CARBOHYDRATES, VITAMINS AND MINERALS, MAY INCLUDE FIBER, ADMINISTERED THROUGH AN ENTERAL FEEDING TUBE, 100 CALORIES = 1 UNIT	960
B4164	PARENTERAL NUTRITION SOLUTION: CARBOHYDRATES (DEXTROSE), 50% OR LESS (500 ML = 1 UNIT) - HOME MIX	5
B4168	PARENTERAL NUTRITION SOLUTION; AMINO ACID, 3.5%, (500 ML = 1 UNIT) - HOME MIX	5
B4172	PARENTERAL NUTRITION SOLUTION; AMINO ACID, 5.5% THROUGH 7%, (500 ML = 1 UNIT) - HOME MIX	5
B4176	PARENTERAL NUTRITION SOLUTION; AMINO ACID, 7% THROUGH 8.5%, (500 ML = 1 UNIT) - HOME MIX	31
B4178	PARENTERAL NUTRITION SOLUTION: AMINO ACID, GREATER THAN 8.5% (500 ML = 1 UNIT) - HOME MIX	31
B4180	PARENTERAL NUTRITION SOLUTION; CARBOHYDRATES (DEXTROSE), GREATER THAN 50% (500 ML = 1 UNIT) - HOME MIX	31
B4185	PARENTERAL NUTRITION SOLUTION, NOT OTHERWISE SPECIFIED, 10 GRAMS LIPIDS	150
B4187	OMEGAVEN, 10 GRAMS LIPIDS	15
B4189	PARENTERAL NUTRITION SOLUTION; COMPOUNDED AMINO ACID AND CARBOHYDRATES WITH ELECTROLYTES, TRACE ELEMENTS, AND VITAMINS, INCLUDING PREPARATION, ANY STRENGTH, 10 TO 51 GRAMS OF PROTEIN - PREMIX	5
B4193	PARENTERAL NUTRITION SOLUTION; COMPOUNDED AMINO ACID AND CARBOHYDRATES WITH ELECTROLYTES, TRACE ELEMENTS, AND VITAMINS, INCLUDING PREPARATION, ANY STRENGTH, 52 TO 73 GRAMS OF PROTEIN - PREMIX	5
B4197	PARENTERAL NUTRITION SOLUTION; COMPOUNDED AMINO ACID AND CARBOHYDRATES WITH ELECTROLYTES, TRACE ELEMENTS AND VITAMINS, INCLUDING PREPARATION, ANY STRENGTH, 74 TO 100 GRAMS OF PROTEIN - PREMIX	5
B4199	PARENTERAL NUTRITION SOLUTION; COMPOUNDED AMINO ACID AND CARBOHYDRATES WITH ELECTROLYTES, TRACE ELEMENTS AND VITAMINS, INCLUDING PREPARATION, ANY STRENGTH, OVER 100 GRAMS OF PROTEIN - PREMIX	5
B4216	PARENTERAL NUTRITION; ADDITIVES (VITAMINS, TRACE ELEMENTS, HEPARIN, ELECTROLYTES), HOME MIX, PER DAY	1

B4220	PARENTERAL NUTRITION SUPPLY KIT; PREMIX, PER DAY	5
B4222	PARENTERAL NUTRITION SUPPLY KIT; HOME MIX, PER DAY	5
B4224	PARENTERAL NUTRITION ADMINISTRATION KIT, PER DAY	30
B5000	PARENTERAL NUTRITION SOLUTION COMPOUNDED AMINO ACID AND CARBOHYDRATES WITH ELECTROLYTES, TRACE ELEMENTS, AND VITAMINS, INCLUDING PREPARATION, ANY STRENGTH, RENAL-AMINOSYN-RF, NEPHRAMINE, RENAMINE-PREMIX	1
B5100	PARENTERAL NUTRITION SOLUTION COMPOUNDED AMINO ACID AND CARBOHYDRATES WITH ELECTROLYTES, TRACE ELEMENTS, AND VITAMINS, INCLUDING PREPARATION, ANY STRENGTH, HEPATIC, HEPATAMINE-PREMIX	1
B5200	PARENTERAL NUTRITION SOLUTION COMPOUNDED AMINO ACID AND CARBOHYDRATES WITH ELECTROLYTES, TRACE ELEMENTS, AND VITAMINS, INCLUDING PREPARATION, ANY STRENGTH, STRESS-BRANCH CHAIN AMINO ACIDSFREAMINE-HBC-PREMIX	130
B9002	ENTERAL NUTRITION INFUSION PUMP, ANY TYPE	1
B9004	PARENTERAL NUTRITION INFUSION PUMP, PORTABLE	1
B9006	PARENTERAL NUTRITION INFUSION PUMP, STATIONARY	1
В9998	NOC FOR ENTERAL SUPPLIES	1
C1052	HEMOSTATIC AGENT, GASTROINTESTINAL, TOPICAL	1
C1062	INTRAVERTEBRAL BODY FRACTURE AUGMENTATION WITH IMPLANT (E.G., METAL, POLYMER)	2
C1713	ANCHOR/SCREW FOR OPPOSING BONE-TO-BONE OR SOFT TISSUE-TO-BONE (IMPLANTABLE)	20
C1714	CATHETER, TRANSLUMINAL ATHERECTOMY, DIRECTIONAL	4
C1715	BRACHYTHERAPY NEEDLE	45
C1716	BRACHYTHERAPY SOURCE, NON-STRANDED, GOLD-198, PER SOURCE	4
C1717	BRACHYTHERAPY SOURCE, NON-STRANDED, HIGH DOSE RATE IRIDIUM-192, PER SOURCE	10
C1719	BRACHYTHERAPY SOURCE, NON-STRANDED, NON-HIGH DOSE RATE IRIDIUM-192, PER SOURCE	99
C1721	CARDIOVERTER-DEFIBRILLATOR, DUAL CHAMBER (IMPLANTABLE)	1
C1722	CARDIOVERTER-DEFIBRILLATOR, SINGLE CHAMBER (IMPLANTABLE)	1
C1724	CATHETER, TRANSLUMINAL ATHERECTOMY, ROTATIONAL	5
C1725	CATHETER, TRANSLUMINAL ANGIOPLASTY, NON-LASER (MAY INCLUDE GUIDANCE, INFUSION/PERFUSION CAPABILITY)	9
C1726	CATHETER, BALLOON DILATATION, NON-VASCULAR	5
C1727	CATHETER, BALLOON TISSUE DISSECTOR, NON-VASCULAR (INSERTABLE)	4
C1728	CATHETER, BRACHYTHERAPY SEED ADMINISTRATION	5
C1729	CATHETER, DRAINAGE	6

C1730	CATHETER, ELECTROPHYSIOLOGY, DIAGNOSTIC, OTHER THAN 3D MAPPING (19 OR FEWER ELECTRODES)	4
C1731	CATHETER, ELECTROPHYSIOLOGY, DIAGNOSTIC, OTHER THAN 3D MAPPING (20 OR MORE ELECTRODES)	2
C1732	CATHETER, ELECTROPHYSIOLOGY, DIAGNOSTIC/ABLATION, 3D OR VECTOR MAPPING	3
C1733	CATHETER, ELECTROPHYSIOLOGY, DIAGNOSTIC/ABLATION, OTHER THAN 3D OR VECTOR MAPPING, OTHER THAN COOL-TIP	3
C1734	ORTHOPEDIC/DEVICE/DRUG MATRIX FOR OPPOSING BONE-TO-BONE OR SOFT TISSUE-TO BONE (IMPLANTABLE)	2
C1748	ENDOSCOPE, SINGLE-USE (I.E. DISPOSABLE), UPPER GI, IMAGING/ILLUMINATION DEVICE (INSERTABLE)	1
C1749	ENDOSCOPE, RETROGRADE IMAGING/ILLUMINATION COLONOSCOPE DEVICE (IMPLANTABLE)	1
C1750	CATHETER, HEMODIALYSIS/PERITONEAL, LONG-TERM	2
C1751	CATHETER, INFUSION, INSERTED PERIPHERALLY, CENTRALLY OR MIDLINE (OTHER THAN HEMODIALYSIS)	3
C1752	CATHETER, HEMODIALYSIS/PERITONEAL, SHORT-TERM	2
C1753	CATHETER, INTRAVASCULAR ULTRASOUND	2
C1754	CATHETER, INTRADISCAL	2
C1755	CATHETER, INTRASPINAL	2
C1756	CATHETER, PACING, TRANSESOPHAGEAL	2
C1757	CATHETER, THROMBECTOMY/EMBOLECTOMY	6
C1758	CATHETER, URETERAL	2
C1759	CATHETER, INTRACARDIAC ECHOCARDIOGRAPHY	2
C1760	CLOSURE DEVICE, VASCULAR (IMPLANTABLE/INSERTABLE)	4
C1761	Catheter, transluminal intravascular lithotripsy, coronary	1
C1762	CONNECTIVE TISSUE, HUMAN (INCLUDES FASCIA LATA)	4
C1763	CONNECTIVE TISSUE, NON-HUMAN (INCLUDES SYNTHETIC)	4
C1764	EVENT RECORDER, CARDIAC (IMPLANTABLE)	1
C1765	ADHESION BARRIER	4
C1766	INTRODUCER/SHEATH, GUIDING, INTRACARDIAC ELECTROPHYSIOLOGICAL, STEERABLE, OTHER THAN PEEL-AWAY	4
C1767	GENERATOR, NEUROSTIMULATOR (IMPLANTABLE), NON-RECHARGEABLE	2
C1768	GRAFT, VASCULAR	3
C1769	GUIDE WIRE	9
C1770	IMAGING COIL, MAGNETIC RESONANCE (INSERTABLE)	3

C1771	REPAIR DEVICE, URINARY, INCONTINENCE, WITH SLING GRAFT	1
C1772	INFUSION PUMP, PROGRAMMABLE (IMPLANTABLE)	1
C1773	RETRIEVAL DEVICE, INSERTABLE (USED TO RETRIEVE FRACTURED MEDICAL DEVICES)	3
C1776	JOINT DEVICE (IMPLANTABLE)	10
C1777	LEAD, CARDIOVERTER-DEFIBRILLATOR, ENDOCARDIAL SINGLE COIL (IMPLANTABLE)	2
C1778	LEAD, NEUROSTIMULATOR (IMPLANTABLE)	4
C1779	LEAD, PACEMAKER, TRANSVENOUS VDD SINGLE PASS	2
C1780	LENS, INTRAOCULAR (NEW TECHNOLOGY)	2
C1781	MESH (IMPLANTABLE)	4
C1782	MORCELLATOR	1
C1783	OCULAR IMPLANT, AQUEOUS DRAINAGE ASSIST DEVICE	2
C1784	OCULAR DEVICE, INTRAOPERATIVE, DETACHED RETINA	2
C1785	PACEMAKER, DUAL CHAMBER, RATE-RESPONSIVE (IMPLANTABLE)	1
C1786	PACEMAKER, SINGLE CHAMBER, RATE-RESPONSIVE (IMPLANTABLE)	1
C1787	PATIENT PROGRAMMER, NEUROSTIMULATOR	2
C1788	PORT, INDWELLING (IMPLANTABLE)	2
C1789	PROSTHESIS, BREAST (IMPLANTABLE)	2
C1813	PROSTHESIS, PENILE, INFLATABLE	1
C1814	RETINAL TAMPONADE DEVICE, SILICONE OIL	2
C1815	PROSTHESIS, URINARY SPHINCTER (IMPLANTABLE)	1
C1816	RECEIVER AND/OR TRANSMITTER, NEUROSTIMULATOR (IMPLANTABLE)	2
C1817	SEPTAL DEFECT IMPLANT SYSTEM, INTRACARDIAC	1
C1818	INTEGRATED KERATOPROSTHESIS	2
C1819	SURGICAL TISSUE LOCALIZATION AND EXCISION DEVICE (IMPLANTABLE)	4
C1820	GENERATOR, NEUROSTIMULATOR (IMPLANTABLE), WITH RECHARGEABLE BATTERY AND CHARGING SYSTEM	2
C1821	INTERSPINOUS PROCESS DISTRACTION DEVICE (IMPLANTABLE)	4
C1822	GENERATOR, NEUROSTIMULATOR (IMPLANTABLE), HIGH FREQUENCY, WITH RECHARGEABLE BATTERY AND CHARGING SYSTEM	1
C1823	GENERATOR, NEUROSTIMULATOR (IMPLANTABLE), NON-RECHARGEABLE, WITH TRANSVENOUS SENSING AND STIMULATION LEADS	1
C1824	GENERATOR, CARDIAC CONTRACTILITY MODULATION (IMPLANTABLE)	1
C1825	GENERATOR, NEUROSTIMULATOR (IMPLANTABLE), NON-RECHARGEABLE WITH CAROTID SINUS BARORECEPTOR STIMULATION LEAD(S)	1
C1830	POWERED BONE MARROW BIOPSY NEEDLE	2
C1839	IRIS PROSTHESIS	2

C1840	LENS, INTRAOCULAR (TELESCOPIC)	1
C1841	RETINAL PROSTHESIS, INCLUDES ALL INTERNAL AND EXTERNAL COMPONENTS	1
C1842	RETINAL PROSTHESIS, INCLUDES ALL INTERNAL AND EXTERNAL COMPONENTS; ADD-ON TO C1841	1
C1874	STENT, COATED/COVERED, WITH DELIVERY SYSTEM	5
C1875	STENT, COATED/COVERED, WITHOUT DELIVERY SYSTEM	4
C1876	STENT, NON-COATED/NON-COVERED, WITH DELIVERY SYSTEM	5
C1877	STENT, NON-COATED/NON-COVERED, WITHOUT DELIVERY SYSTEM	5
C1878	MATERIAL FOR VOCAL CORD MEDIALIZATION, SYNTHETIC (IMPLANTABLE)	2
C1880	VENA CAVA FILTER	2
C1881	DIALYSIS ACCESS SYSTEM (IMPLANTABLE)	2
C1882	CARDIOVERTER-DEFIBRILLATOR, OTHER THAN SINGLE OR DUAL CHAMBER (IMPLANTABLE)	1
C1883	ADAPTER/EXTENSION, PACING LEAD OR NEUROSTIMULATOR LEAD (IMPLANTABLE)	4
C1884	EMBOLIZATION PROTECTIVE SYSTEM	4
C1885	CATHETER, TRANSLUMINAL ANGIOPLASTY, LASER	2
C1886	CATHETER, EXTRAVASCULAR TISSUE ABLATION, ANY MODALITY (INSERTABLE)	1
C1887	CATHETER, GUIDING (MAY INCLUDE INFUSION/PERFUSION CAPABILITY)	7
C1888	CATHETER, ABLATION, NON-CARDIAC, ENDOVASCULAR (IMPLANTABLE)	2
C1889	IMPLANTABLE/INSERTABLE DEVICE, NOT OTHERWISE CLASSIFIED	2
C1890	NO IMPLANTABLE/INSERTABLE DEVICE USED WITH DEVICE-INTENSIVE PROCEDURES	1
C1891	INFUSION PUMP, NON-PROGRAMMABLE, PERMANENT (IMPLANTABLE)	1
C1892	INTRODUCER/SHEATH, GUIDING, INTRACARDIAC ELECTROPHYSIOLOGICAL, FIXED-CURVE, PEEL-AWAY	6
C1893	INTRODUCER/SHEATH, GUIDING, INTRACARDIAC ELECTROPHYSIOLOGICAL, FIXED-CURVE, OTHER THAN PEEL-AWAY	6
C1894	INTRODUCER/SHEATH, OTHER THAN GUIDING, OTHER THAN INTRACARDIAC ELECTROPHYSIOLOGICAL, NON-LASER	6
C1895	LEAD, CARDIOVERTER-DEFIBRILLATOR, ENDOCARDIAL DUAL COIL (IMPLANTABLE)	2
C1896	LEAD, CARDIOVERTER-DEFIBRILLATOR, OTHER THAN ENDOCARDIAL SINGLE OR DUAL COIL (IMPLANTABLE)	2
C1897	LEAD, NEUROSTIMULATOR TEST KIT (IMPLANTABLE)	2
C1898	LEAD, PACEMAKER, OTHER THAN TRANSVENOUS VDD SINGLE PASS	2
C1899	LEAD, PACEMAKER/CARDIOVERTER-DEFIBRILLATOR COMBINATION (IMPLANTABLE)	2
C1900	LEAD, LEFT VENTRICULAR CORONARY VENOUS SYSTEM	1
C1982	CATHETER, PRESSURE-GENERATING, ONE-WAY VALVE, INTERMITTENTLY OCCLUSIVE	1

PROBE, IMAGE-GUIDED, ROBOTIC, WATERJET ABLATION	1
LUNG BIOPSY PLUG WITH DELIVERY SYSTEM	2
PROBE, PERCUTANEOUS LUMBAR DISCECTOMY	3
SEALANT, PULMONARY, LIQUID	2
BRACHYTHERAPY SOURCE, NON-STRANDED, YTTRIUM-90, PER SOURCE	1
STENT, NON-CORONARY, TEMPORARY, WITHOUT DELIVERY SYSTEM	4
PROBE/NEEDLE, CRYOABLATION	4
PACEMAKER, DUAL CHAMBER, NON RATE-RESPONSIVE (IMPLANTABLE)	1
PACEMAKER, SINGLE CHAMBER, NON RATE-RESPONSIVE (IMPLANTABLE)	1
PACEMAKER, OTHER THAN SINGLE OR DUAL CHAMBER (IMPLANTABLE)	1
PROSTHESIS, PENILE, NON-INFLATABLE	1
CATHETER, TRANSLUMINAL ANGIOPLASTY, DRUG-COATED, NON-LASER	4
IMPLANTABLE WIRELESS PULMONARY ARTERY PRESSURE SENSOR WITH DELIVERY CATHETER, INCLUDING ALL SYSTEM COMPONENTS	1
STENT, NON-CORONARY, TEMPORARY, WITH DELIVERY SYSTEM	4
INFUSION PUMP, NON-PROGRAMMABLE, TEMPORARY (IMPLANTABLE)	1
CATHETER, SUPRAPUBIC/CYSTOSCOPIC	2
CATHETER, OCCLUSION	4
INTRODUCER/SHEATH, OTHER THAN GUIDING, OTHER THAN INTRACARDIAC ELECTROPHYSIOLOGICAL, LASER	4
CATHETER, ELECTROPHYSIOLOGY, DIAGNOSTIC/ABLATION, OTHER THAN 3D OR VECTOR MAPPING, COOL-TIP	3
REPAIR DEVICE, URINARY, INCONTINENCE, WITHOUT SLING GRAFT	1
BRACHYTHERAPY SOURCE, NON-STRANDED, HIGH ACTIVITY, IODINE-125, GREATER THAN 1.01 MCI (NIST), PER SOURCE	24
BRACHYTHERAPY SOURCE, NON-STRANDED, HIGH ACTIVITY, PALLADIUM-103, GREATER THAN 2.2 MCI (NIST), PER SOURCE	124
BRACHYTHERAPY LINEAR SOURCE, NON-STRANDED, PALLADIUM-103, PER 1 MM	690
BRACHYTHERAPY SOURCE, STRANDED, IODINE-125, PER SOURCE	150
BRACHYTHERAPY SOURCE, NON-STRANDED, IODINE-125, PER SOURCE	150
BRACHYTHERAPY SOURCE, STRANDED, PALLADIUM-103, PER SOURCE	150
BRACHYTHERAPY SOURCE, NON-STRANDED, PALLADIUM-103, PER SOURCE	150
BRACHYTHERAPY SOURCE, STRANDED, CESIUM-131, PER SOURCE	150
BRACHYTHERAPY SOURCE, NON-STRANDED, CESIUM-131, PER SOURCE	150
BRACHYTHERAPY SOURCE, CESIUM-131 CHLORIDE SOLUTION, PER MILLICURIE	500
BRACHYTHERAPY PLANAR SOURCE, PALLADIUM-103, PER SQUARE MILLIMETER	4608
	LUNG BIOPSY PLUG WITH DELIVERY SYSTEM PROBE, PERCUTANEOUS LUMBAR DISCECTOMY SEALANT, PULMONARY, LIQUID BRACHYTHERAPY SOURCE, NON-STRANDED, YTTRIUM-90, PER SOURCE STENT, NON-CORONARY, TEMPORARY, WITHOUT DELIVERY SYSTEM PROBE/NEEDLE, CRYOABLATION PACEMAKER, DUAL CHAMBER, NON RATE-RESPONSIVE (IMPLANTABLE) PACEMAKER, SINGLE CHAMBER, NON RATE-RESPONSIVE (IMPLANTABLE) PACEMAKER, OTHER THAN SINGLE OR DUAL CHAMBER (IMPLANTABLE) PROSTHESIS, PENILE, NON-INFLATABLE CATHETER, TRANSLUMINAL ANGIOPLASTY, DRUG-COATED, NON-LASER IMPLANTABLE WIRELESS PULMONARY ARTERY PRESSURE SENSOR WITH DELIVERY CATHETER, INCLUDING ALL SYSTEM COMPONENTS STENT, NON-CORONARY, TEMPORARY, WITH DELIVERY SYSTEM INFUSION PUMP, NON-PROGRAMMABLE, TEMPORARY (IMPLANTABLE) CATHETER, SUPRAPUBIC/CYSTOSCOPIC CATHETER, SUPRAPUBIC/CYSTOSCOPIC CATHETER, OCCLUSION INTRODUCER/SHEATH, OTHER THAN GUIDING, OTHER THAN INTRACARDIAC ELECTROPHYSIOLOGICAL, LASER CATHETER, ELECTROPHYSIOLOGY, DIAGNOSTIC/ABLATION, OTHER THAN 3D OR VECTOR MAPPING, COOL-TIP REPAIR DEVICE, URINARY, INCONTINENCE, WITHOUT SLING GRAFT BRACHYTHERAPY SOURCE, NON-STRANDED, HIGH ACTIVITY, IODINE-125, GREATER THAN 1.01 MCI (NIST), PER SOURCE BRACHYTHERAPY SOURCE, NON-STRANDED, HIGH ACTIVITY, PALLADIUM-103, GREATER THAN 1.01 MCI (NIST), PER SOURCE BRACHYTHERAPY SOURCE, STRANDED, IODINE-125, PER SOURCE BRACHYTHERAPY SOURCE, STRANDED, PALLADIUM-103, PER 1 MM BRACHYTHERAPY SOURCE, STRANDED, PALLADIUM-103, PER SOURCE BRACHYTHERAPY SOURCE, STRANDED, CESIUM-131, PER SOURCE BRACHYTHERAPY SOURCE, CESIUM-131 CHLORIDE SOLUTION, PER MILLICURIE

C5271	APPLICATION OF LOW COST SKIN SUBSTITUTE GRAFT TO TRUNK, ARMS, LEGS, TOTAL WOUND SURFACE AREA UP TO 100 SQ CM; FIRST 25 SQ CM OR LESS WOUND SURFACE AREA	1
C5272	APPLICATION OF LOW COST SKIN SUBSTITUTE GRAFT TO TRUNK, ARMS, LEGS, TOTAL WOUND SURFACE AREA UP TO 100 SQ CM; EACH ADDITIONAL 25 SQ CM WOUND SURFACE AREA, OR PART THEREOF (LIST SEPARATELY IN ADDITION TO CODE FOR PRIMARY PROCEDURE)	3
C5273	APPLICATION OF LOW COST SKIN SUBSTITUTE GRAFT TO TRUNK, ARMS, LEGS, TOTAL WOUND SURFACE AREA GREATER THAN OR EQUAL TO 100 SQ CM; FIRST 100 SQ CM WOUND SURFACE AREA, OR 1% OF BODY AREA OF INFANTS AND CHILDREN	1
C5274	APPLICATION OF LOW COST SKIN SUBSTITUTE GRAFT TO TRUNK, ARMS, LEGS, TOTAL WOUND SURFACE AREA GREATER THAN OR EQUAL TO 100 SQ CM; EACH ADDITIONAL 100 SQ CM WOUND SURFACE AREA, OR PART THEREOF, OR EACH ADDITIONAL 1% OF BODY AREA OF INFANTS AND CHILDREN, OR PART THEREOF (LIST SEPARATELY IN ADDITION TO CODE FOR PRIMARY PROCEDURE)	35
C5275	APPLICATION OF LOW COST SKIN SUBSTITUTE GRAFT TO FACE, SCALP, EYELIDS, MOUTH, NECK, EARS, ORBITS, GENITALIA, HANDS, FEET, AND/OR MULTIPLE DIGITS, TOTAL WOUND SURFACE AREA UP TO 100 SQ CM; FIRST 25 SQ CM OR LESS WOUND SURFACE AREA	1
C5276	APPLICATION OF LOW COST SKIN SUBSTITUTE GRAFT TO FACE, SCALP, EYELIDS, MOUTH, NECK, EARS, ORBITS, GENITALIA, HANDS, FEET, AND/OR MULTIPLE DIGITS, TOTAL WOUND SURFACE AREA UP TO 100 SQ CM; EACH ADDITIONAL 25 SQ CM WOUND SURFACE AREA, OR PART THEREOF (LIST SEPARATELY IN ADDITION TO CODE FOR PRIMARY PROCEDURE)	3
C5277	APPLICATION OF LOW COST SKIN SUBSTITUTE GRAFT TO FACE, SCALP, EYELIDS, MOUTH, NECK, EARS, ORBITS, GENITALIA, HANDS, FEET, AND/OR MULTIPLE DIGITS, TOTAL WOUND SURFACE AREA GREATER THAN OR EQUAL TO 100 SQ CM; FIRST 100 SQ CM WOUND SURFACE AREA, OR 1% OF BODY AREA OF INFANTS AND CHILDREN	1
C5278	APPLICATION OF LOW COST SKIN SUBSTITUTE GRAFT TO FACE, SCALP, EYELIDS, MOUTH, NECK, EARS, ORBITS, GENITALIA, HANDS, FEET, AND/OR MULTIPLE DIGITS, TOTAL WOUND SURFACE AREA GREATER THAN OR EQUAL TO 100 SQ CM; EACH ADDITIONAL 100 SQ CM WOUND SURFACE AREA, OR PART THEREOF, OR EACH ADDITIONAL 1% OF BODY AREA OF INFANTS AND CHILDREN, OR PART THEREOF (LIST SEPARATELY IN ADDITION TO CODE FOR PRIMARY PROCEDURE)	15
C8900	MAGNETIC RESONANCE ANGIOGRAPHY WITH CONTRAST, ABDOMEN	1
C8901	MAGNETIC RESONANCE ANGIOGRAPHY WITHOUT CONTRAST, ABDOMEN	1
C8902	MAGNETIC RESONANCE ANGIOGRAPHY WITHOUT CONTRAST FOLLOWED BY WITH CONTRAST, ABDOMEN	1
C8903	MAGNETIC RESONANCE IMAGING WITH CONTRAST, BREAST; UNILATERAL	1
C8905	MAGNETIC RESONANCE IMAGING WITHOUT CONTRAST FOLLOWED BY WITH CONTRAST, BREAST; UNILATERAL	1
C8906	MAGNETIC RESONANCE IMAGING WITH CONTRAST, BREAST; BILATERAL	1
C8908	MAGNETIC RESONANCE IMAGING WITHOUT CONTRAST FOLLOWED BY WITH CONTRAST, BREAST; BILATERAL	1

C8909	MAGNETIC RESONANCE ANGIOGRAPHY WITH CONTRAST, CHEST (EXCLUDING MYOCARDIUM)	1
C8910	MAGNETIC RESONANCE ANGIOGRAPHY WITHOUT CONTRAST, CHEST (EXCLUDING MYOCARDIUM)	1
C8911	MAGNETIC RESONANCE ANGIOGRAPHY WITHOUT CONTRAST FOLLOWED BY WITH CONTRAST, CHEST (EXCLUDING MYOCARDIUM)	1
C8912	MAGNETIC RESONANCE ANGIOGRAPHY WITH CONTRAST, LOWER EXTREMITY	1
C8913	MAGNETIC RESONANCE ANGIOGRAPHY WITHOUT CONTRAST, LOWER EXTREMITY	1
C8914	MAGNETIC RESONANCE ANGIOGRAPHY WITHOUT CONTRAST FOLLOWED BY WITH CONTRAST, LOWER EXTREMITY	1
C8918	MAGNETIC RESONANCE ANGIOGRAPHY WITH CONTRAST, PELVIS	1
C8919	MAGNETIC RESONANCE ANGIOGRAPHY WITHOUT CONTRAST, PELVIS	1
C8920	MAGNETIC RESONANCE ANGIOGRAPHY WITHOUT CONTRAST FOLLOWED BY WITH CONTRAST, PELVIS	1
C8921	TRANSTHORACIC ECHOCARDIOGRAPHY WITH CONTRAST, OR WITHOUT CONTRAST FOLLOWED BY WITH CONTRAST, FOR CONGENITAL CARDIAC ANOMALIES; COMPLETE	1
C8922	TRANSTHORACIC ECHOCARDIOGRAPHY WITH CONTRAST, OR WITHOUT CONTRAST FOLLOWED BY WITH CONTRAST, FOR CONGENITAL CARDIAC ANOMALIES; FOLLOW-UP OR LIMITED STUDY	1
C8923	TRANSTHORACIC ECHOCARDIOGRAPHY WITH CONTRAST, OR WITHOUT CONTRAST FOLLOWED BY WITH CONTRAST, REAL-TIME WITH IMAGE DOCUMENTATION (2D), INCLUDES M-MODE RECORDING, WHEN PERFORMED, COMPLETE, WITHOUT SPECTRAL OR COLOR DOPPLER ECHOCARDIOGRAPHY	1
C8924	TRANSTHORACIC ECHOCARDIOGRAPHY WITH CONTRAST, OR WITHOUT CONTRAST FOLLOWED BY WITH CONTRAST, REAL-TIME WITH IMAGE DOCUMENTATION (2D), INCLUDES M-MODE RECORDING, WHEN PERFORMED, FOLLOW-UP OR LIMITED STUDY	1
C8925	TRANSESOPHAGEAL ECHOCARDIOGRAPHY (TEE) WITH CONTRAST, OR WITHOUT CONTRAST FOLLOWED BY WITH CONTRAST, REAL TIME WITH IMAGE DOCUMENTATION (2D) (WITH OR WITHOUT M-MODE RECORDING); INCLUDING PROBE PLACEMENT, IMAGE ACQUISITION, INTERPRETATION AND REPORT	1
C8926	TRANSESOPHAGEAL ECHOCARDIOGRAPHY (TEE) WITH CONTRAST, OR WITHOUT CONTRAST FOLLOWED BY WITH CONTRAST, FOR CONGENITAL CARDIAC ANOMALIES; INCLUDING PROBE PLACEMENT, IMAGE ACQUISITION, INTERPRETATION AND REPORT	1
C8927	TRANSESOPHAGEAL ECHOCARDIOGRAPHY (TEE) WITH CONTRAST, OR WITHOUT CONTRAST FOLLOWED BY WITH CONTRAST, FOR MONITORING PURPOSES, INCLUDING PROBE PLACEMENT, REAL TIME 2-DIMENSIONAL IMAGE ACQUISITION AND INTERPRETATION LEADING TO ONGOING (CONTINUOUS) ASSESSMENT OF (DYNAMICALLY CHANGING) CARDIAC PUMPING FUNCTION AND TO THERAPEUTIC MEASURES ON AN IMMEDIATE TIME BASIS	1

C8928	TRANSTHORACIC ECHOCARDIOGRAPHY WITH CONTRAST, OR WITHOUT CONTRAST FOLLOWED BY WITH CONTRAST, REAL-TIME WITH IMAGE DOCUMENTATION (2D), INCLUDES M-MODE RECORDING, WHEN PERFORMED, DURING REST AND CARDIOVASCULAR STRESS TEST USING TREADMILL, BICYCLE EXERCISE AND/OR PHARMACOLOGICALLY INDUCED STRESS, WITH INTERPRETATION AND REPORT	1
C8929	TRANSTHORACIC ECHOCARDIOGRAPHY WITH CONTRAST, OR WITHOUT CONTRAST FOLLOWED BY WITH CONTRAST, REAL-TIME WITH IMAGE DOCUMENTATION (2D), INCLUDES M-MODE RECORDING, WHEN PERFORMED, COMPLETE, WITH SPECTRAL DOPPLER ECHOCARDIOGRAPHY, AND WITH COLOR FLOW DOPPLER ECHOCARDIOGRAPHY	1
C8930	TRANSTHORACIC ECHOCARDIOGRAPHY, WITH CONTRAST, OR WITHOUT CONTRAST FOLLOWED BY WITH CONTRAST, REAL-TIME WITH IMAGE DOCUMENTATION (2D), INCLUDES M-MODE RECORDING, WHEN PERFORMED, DURING REST AND CARDIOVASCULAR STRESS TEST USING TREADMILL, BICYCLE EXERCISE AND/OR PHARMACOLOGICALLY INDUCED STRESS, WITH INTERPRETATION AND REPORT; INCLUDING PERFORMANCE OF CONTINUOUS ELECTROCARDIOGRAPHIC MONITORING, WITH PHYSICIAN SUPERVISION	1
C8931	MAGNETIC RESONANCE ANGIOGRAPHY WITH CONTRAST, SPINAL CANAL AND CONTENTS	1
C8932	MAGNETIC RESONANCE ANGIOGRAPHY WITHOUT CONTRAST, SPINAL CANAL AND CONTENTS	1
C8933	MAGNETIC RESONANCE ANGIOGRAPHY WITHOUT CONTRAST FOLLOWED BY WITH CONTRAST, SPINAL CANAL AND CONTENTS	1
C8934	MAGNETIC RESONANCE ANGIOGRAPHY WITH CONTRAST, UPPER EXTREMITY	2
C8935	MAGNETIC RESONANCE ANGIOGRAPHY WITHOUT CONTRAST, UPPER EXTREMITY	2
C8936	MAGNETIC RESONANCE ANGIOGRAPHY WITHOUT CONTRAST FOLLOWED BY WITH CONTRAST, UPPER EXTREMITY	2
C8937	COMPUTER-AIDED DETECTION, INCLUDING COMPUTER ALGORITHM ANALYSIS OF BREAST MRI IMAGE DATA FOR LESION DETECTION/CHARACTERIZATION, PHARMACOKINETIC ANALYSIS, WITH FURTHER PHYSICIAN REVIEW FOR INTERPRETATION (LIST SEPARATELY IN ADDITION TO CODE FOR PRIMARY PROCEDURE)	2
C8957	INTRAVENOUS INFUSION FOR THERAPY/DIAGNOSIS; INITIATION OF PROLONGED INFUSION (MORE THAN 8 HOURS), REQUIRING USE OF PORTABLE OR IMPLANTABLE PUMP	2
C9046	COCAINE HYDROCHLORIDE NASAL SOLUTION FOR TOPICAL ADMINISTRATION, 1 MG	160
C9047	INJECTION, CAPLACIZUMAB-YHDP, 1 MG	22
C9065	INJECTION, ROMIDEPSIN, NON-LYOPHILIZED (E.G. LIQUID), 1MG	40
C9067	GALLIUM GA-68, DOTATOC, DIAGNOSTIC, 0.01 MCI	500
C9113	INJECTION, PANTOPRAZOLE SODIUM, PER VIAL	10
C9132	PROTHROMBIN COMPLEX CONCENTRATE (HUMAN), KCENTRA, PER I.U. OF FACTOR IX ACTIVITY	5500
C9248	INJECTION, CLEVIDIPINE BUTYRATE, 1 MG	25

C9250	HUMAN PLASMA FIBRIN SEALANT, VAPOR-HEATED, SOLVENT-DETERGENT (ARTISS), 2 ML	5
C9254	INJECTION, LACOSAMIDE, 1 MG	400
C9257	INJECTION, BEVACIZUMAB, 0.25 MG	10
C9285	LIDOCAINE 70 MG/TETRACAINE 70 MG, PER PATCH	2
C9290	INJECTION, BUPIVACAINE LIPOSOME, 1 MG	266
C9293	INJECTION, GLUCARPIDASE, 10 UNITS	700
C9352	MICROPOROUS COLLAGEN IMPLANTABLE TUBE (NEURAGEN NERVE GUIDE), PER CENTIMETER LENGTH	3
C9353	MICROPOROUS COLLAGEN IMPLANTABLE SLIT TUBE (NEURAWRAP NERVE PROTECTOR), PER CENTIMETER LENGTH	4
C9354	ACELLULAR PERICARDIAL TISSUE MATRIX OF NON-HUMAN ORIGIN (VERITAS), PER SQUARE CENTIMETER	300
C9355	COLLAGEN NERVE CUFF (NEUROMATRIX), PER 0.5 CENTIMETER LENGTH	3
C9356	TENDON, POROUS MATRIX OF CROSS-LINKED COLLAGEN AND GLYCOSAMINOGLYCAN MATRIX (TENOGLIDE TENDON PROTECTOR SHEET), PER SQUARE CENTIMETER	125
C9358	DERMAL SUBSTITUTE, NATIVE, NON-DENATURED COLLAGEN, FETAL BOVINE ORIGIN (SURGIMEND COLLAGEN MATRIX), PER 0.5 SQUARE CENTIMETERS	800
C9359	POROUS PURIFIED COLLAGEN MATRIX BONE VOID FILLER (INTEGRA MOZAIK OSTEOCONDUCTIVE SCAFFOLD PUTTY, INTEGRA OS OSTEOCONDUCTIVE SCAFFOLD PUTTY), PER 0.5 CC	30
C9360	DERMAL SUBSTITUTE, NATIVE, NON-DENATURED COLLAGEN, NEONATAL BOVINE ORIGIN (SURGIMEND COLLAGEN MATRIX), PER 0.5 SQUARE CENTIMETERS	300
C9361	COLLAGEN MATRIX NERVE WRAP (NEUROMEND COLLAGEN NERVE WRAP), PER 0.5 CENTIMETER LENGTH	10
C9362	POROUS PURIFIED COLLAGEN MATRIX BONE VOID FILLER (INTEGRA MOZAIK OSTEOCONDUCTIVE SCAFFOLD STRIP), PER 0.5 CC	60
C9363	SKIN SUBSTITUTE, INTEGRA MESHED BILAYER WOUND MATRIX, PER SQUARE CENTIMETER	500
C9364	PORCINE IMPLANT, PERMACOL, PER SQUARE CENTIMETER	600
C9460	INJECTION, CANGRELOR, 1 MG	100
C9462	INJECTION, DELAFLOXACIN, 1 MG	600
C9482	INJECTION, SOTALOL HYDROCHLORIDE, 1 MG	300
C9488	INJECTION, CONIVAPTAN HYDROCHLORIDE, 1 MG	40
C9600	PERCUTANEOUS TRANSCATHETER PLACEMENT OF DRUG ELUTING INTRACORONARY STENT(S), WITH CORONARY ANGIOPLASTY WHEN PERFORMED; SINGLE MAJOR CORONARY ARTERY OR BRANCH	3

C9601	PERCUTANEOUS TRANSCATHETER PLACEMENT OF DRUG-ELUTING INTRACORONARY STENT(S), WITH CORONARY ANGIOPLASTY WHEN PERFORMED; EACH ADDITIONAL BRANCH OF A MAJOR CORONARY ARTERY (LIST SEPARATELY IN ADDITION TO CODE FOR PRIMARY PROCEDURE)	2
C9602	PERCUTANEOUS TRANSLUMINAL CORONARY ATHERECTOMY, WITH DRUG ELUTING INTRACORONARY STENT, WITH CORONARY ANGIOPLASTY WHEN PERFORMED; SINGLE MAJOR CORONARY ARTERY OR BRANCH	2
C9603	PERCUTANEOUS TRANSLUMINAL CORONARY ATHERECTOMY, WITH DRUG-ELUTING INTRACORONARY STENT, WITH CORONARY ANGIOPLASTY WHEN PERFORMED; EACH ADDITIONAL BRANCH OF A MAJOR CORONARY ARTERY (LIST SEPARATELY IN ADDITION TO CODE FOR PRIMARY PROCEDURE)	2
C9604	PERCUTANEOUS TRANSLUMINAL REVASCULARIZATION OF OR THROUGH CORONARY ARTERY BYPASS GRAFT (INTERNAL MAMMARY, FREE ARTERIAL, VENOUS), ANY COMBINATION OF DRUG-ELUTING INTRACORONARY STENT, ATHERECTOMY AND ANGIOPLASTY, INCLUDING DISTAL PROTECTION WHEN PERFORMED; SINGLE VESSEL	2
C9605	PERCUTANEOUS TRANSLUMINAL REVASCULARIZATION OF OR THROUGH CORONARY ARTERY BYPASS GRAFT (INTERNAL MAMMARY, FREE ARTERIAL, VENOUS), ANY COMBINATION OF DRUG-ELUTING INTRACORONARY STENT, ATHERECTOMY AND ANGIOPLASTY, INCLUDING DISTAL PROTECTION WHEN PERFORMED; EACH ADDITIONAL BRANCH SUBTENDED BY THE BYPASS GRAFT (LIST SEPARATELY IN ADDITION TO CODE FOR PRIMARY PROCEDURE)	2
C9606	PERCUTANEOUS TRANSLUMINAL REVASCULARIZATION OF ACUTE TOTAL/SUBTOTAL OCCLUSION DURING ACUTE MYOCARDIAL INFARCTION, CORONARY ARTERY OR CORONARY ARTERY BYPASS GRAFT, ANY COMBINATION OF DRUG-ELUTING INTRACORONARY STENT, ATHERECTOMY AND ANGIOPLASTY, INCLUDING ASPIRATION THROMBECTOMY WHEN PERFORMED, SINGLE VESSEL	1
C9607	PERCUTANEOUS TRANSLUMINAL REVASCULARIZATION OF CHRONIC TOTAL OCCLUSION, CORONARY ARTERY, CORONARY ARTERY BRANCH, OR CORONARY ARTERY BYPASS GRAFT, ANY COMBINATION OF DRUG-ELUTING INTRACORONARY STENT, ATHERECTOMY AND ANGIOPLASTY; SINGLE VESSEL	2
C9608	PERCUTANEOUS TRANSLUMINAL REVASCULARIZATION OF CHRONIC TOTAL OCCLUSION, CORONARY ARTERY, CORONARY ARTERY BRANCH, OR CORONARY ARTERY BYPASS GRAFT, ANY COMBINATION OF DRUG-ELUTING INTRACORONARY STENT, ATHERECTOMY AND ANGIOPLASTY; EACH ADDITIONAL CORONARY ARTERY, CORONARY ARTERY BRANCH, OR BYPASS GRAFT (LIST SEPARATELY IN ADDITION TO CODE FOR PRIMARY PROCEDURE)	2
C9725	PLACEMENT OF ENDORECTAL INTRACAVITARY APPLICATOR FOR HIGH INTENSITY BRACHYTHERAPY	1
C9726	PLACEMENT AND REMOVAL (IF PERFORMED) OF APPLICATOR INTO BREAST FOR INTRAOPERATIVE RADIATION THERAPY, ADD-ON TO PRIMARY BREAST PROCEDURE	2
C9727	INSERTION OF IMPLANTS INTO THE SOFT PALATE; MINIMUM OF THREE IMPLANTS	1
C9728	PLACEMENT OF INTERSTITIAL DEVICE(S) FOR RADIATION THERAPY/SURGERY GUIDANCE (E.G., FIDUCIAL MARKERS, DOSIMETER), FOR OTHER THAN THE FOLLOWING SITES (ANY APPROACH): ABDOMEN, PELVIS, PROSTATE, RETROPERITONEUM, THORAX, SINGLE OR MULTIPLE	1

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C9733	NON-OPHTHALMIC FLUORESCENT VASCULAR ANGIOGRAPHY	1
C9734	FOCUSED ULTRASOUND ABLATION/THERAPEUTIC INTERVENTION, OTHER THAN UTERINE LEIOMYOMATA, WITH MAGNETIC RESONANCE (MR) GUIDANCE	1
C9738	ADJUNCTIVE BLUE LIGHT CYSTOSCOPY WITH FLUORESCENT IMAGING AGENT (LIST SEPARATELY IN ADDITION TO CODE FOR PRIMARY PROCEDURE)	1
C9739	CYSTOURETHROSCOPY, WITH INSERTION OF TRANSPROSTATIC IMPLANT; 1 TO 3 IMPLANTS	1
C9740	CYSTOURETHROSCOPY, WITH INSERTION OF TRANSPROSTATIC IMPLANT; 4 OR MORE IMPLANTS	1
C9751	BRONCHOSCOPY, RIGID OR FLEXIBLE, TRANSBRONCHIAL ABLATION OF LESION(S) BY MICROWAVE ENERGY, INCLUDING FLUOROSCOPIC GUIDANCE, WHEN PERFORMED, WITH COMPUTED TOMOGRAPHY ACQUISITION(S) AND 3-D RENDERING, COMPUTER-ASSISTED, IMAGE-GUIDED NAVIGATION, AND ENDOBRONCHIAL ULTRASOUND (EBUS) GUIDED TRANSTRACHEAL AND/OR TRANSBRONCHIAL SAMPLING (EG, ASPIRATION[S]/BIOPSY[IES]) AND ALL MEDIASTINAL AND/OR HILAR LYMPH NODE STATIONS OR STRUCTURES AND THERAPEUTIC INTERVENTION(S)	1
C9752	DESTRUCTION OF INTRAOSSEOUS BASIVERTEBRAL NERVE, FIRST TWO VERTEBRAL BODIES, INCLUDING IMAGING GUIDANCE (E.G., FLUOROSCOPY), LUMBAR/SACRUM	1
C9753	DESTRUCTION OF INTRAOSSEOUS BASIVERTEBRAL NERVE, EACH ADDITIONAL VERTEBRAL BODY, INCLUDING IMAGING GUIDANCE (E.G., FLUOROSCOPY), LUMBAR/SACRUM (LIST SEPARATELY IN ADDITION TO CODE FOR PRIMARY PROCEDURE)	3
C9756	INTRAOPERATIVE NEAR-INFRARED FLUORESCENCE LYMPHATIC MAPPING OF LYMPH NODE(S) (SENTINEL OR TUMOR DRAINING) WITH ADMINISTRATION OF INDOCYANINE GREEN (ICG) (LIST SEPARATELY IN ADDITION TO CODE FOR PRIMARY PROCEDURE)	1
C9757	LAMINOTOMY (HEMILAMINECTOMY), WITH DECOMPRESSION OF NERVE ROOT(S), INCLUDING PARTIAL FACETECTOMY, FORAMINOTOMY AND EXCISION OF HERNIATED INTERVERTEBRAL DISC, AND REPAIR OF ANNULAR DEFECT WITH IMPLANTATION OF BONE ANCHORED ANNULAR CLOSURE DEVICE, INCLUDING ANNULAR DEFECT MEASUREMENT, ALIGNMENT AND SIZING ASSESSMENT, AND IMAGE GUIDANCE; 1 INTERSPACE, LUMBAR	2
C9758	BLINDED PROCEDURE FOR NYHA CLASS III/IV HEART FAILURE; TRANSCATHETER IMPLANTATION OF INTERATRIAL SHUNT OR PLACEBO CONTROL, INCLUDING RIGHT HEART CATHETERIZATION, TRANS-ESOPHAGEAL ECHOCARDIOGRAPHY (TEE)/INTRACARDIAC ECHOCARDIOGRAPHY (ICE), AND ALL IMAGING WITH OR WITHOUT GUIDANCE (E.G., ULTRASOUND, FLUOROSCOPY), PERFORMED IN AN APPROVED INVESTIGATIONAL DEVICE EXEMPTION (IDE) STUDY	1
C9759	TRANSCATHETER INTRAOPERATIVE BLOOD VESSEL MICROINFUSION(S) (E.G., INTRALUMINAL, VASCULAR WALL AND/OR PERIVASCULAR) THERAPY, ANY VESSEL, INCLUDING RADIOLOGICAL SUPERVISION AND INTERPRETATION, WHEN PERFORMED	1

C9760 NON-RANDOMIZED, NON-BLINDED PROCEDURE FOR NYHA CLASS II, III, IV HEART FAILURE; TRANSCATHETER IMPLANTATION OF INTERATRIAL SHUNT, INCLUDING RIGHT AND LEFT HEART CATHETERIZATION, FRANSEPTAL PUNCTURE, TRANSSESOPHAGEAL ECHOCARDIOGRAPHY (ICE), AND ALL IMAGING WITH OR WITHOUT GUIDANCE (E.G., ULTRASOUND, FLUOROSCOPY), PERFORMED IN AN APPROVED INVESTIGATIONAL DEVICE EXEMPTION (IDE) STUDY C9761 Cystourethroscopy, with ureteroscopy and/or pyeloscopy, with lithotripsy, and ureteral catheterization for steerable vacuum aspiration of the kidney, collecting system, ureter, bladder, and urethra if applicable C9762 CARDIAC MAGNETIC RESONANCE IMAGING FOR MORPHOLOGY AND FUNCTION, QUANTIFICATION OF SEGMENTAL DYSFUNCTION; WITH STRAIN IMAGING C9763 CARDIAC MAGNETIC RESONANCE IMAGING FOR MORPHOLOGY AND FUNCTION, QUANTIFICATION OF SEGMENTAL DYSFUNCTION; WITH STRESS IMAGING C9764 REVASCULARIZATION, ENDOVASCULAR, OPEN OR PERCUTANEOUS, LOWER EXTREMITY ARTERY(IES), EXCEPT TIBIAL/PERONEAL; WITH INTRAVASCULAR LITHOTRIPSY, INCLUDES ANGIOPLASTY WITHIN THE SAME VESSEL(S), WHEN PERFORMED C9765 REVASCULARIZATION, ENDOVASCULAR, OPEN OR PERCUTANEOUS, LOWER EXTREMITY ARTERY(IES), EXCEPT TIBIAL/PERONEAL; WITH INTRAVASCULAR LITHOTRIPSY, AND TRANSLUMINAL STENT PLACEMENT(S), INCLUDES ANGIOPLASTY WITHIN THE SAME VESSEL(S), WHEN PERFORMED C9766 REVASCULARIZATION, ENDOVASCULAR, OPEN OR PERCUTANEOUS, LOWER EXTREMITY ARTERY(IES), EXCEPT TIBIAL/PERONEAL; WITH INTRAVASCULAR LITHOTRIPSY AND THARECTOMY, INCLUDES ANGIOPLASTY WITHIN THE SAME VESSEL(S), WHEN PERFORMED C9767 REVASCULARIZATION, ENDOVASCULAR, OPEN OR PERCUTANEOUS, LOWER EXTREMITY ARTERY(IES), EXCEPT TIBIAL/PERONEAL; WITH INTRAVASCULAR LITHOTRIPSY AND TRANSLUMINAL STENT PLACEMENT(S), INDIVIDUAL SAME VESSEL(S), WHEN PERFORMED C9769 CYSTOURETHROSCOPY, WITH INTESAME VESSEL(S), WHEN PERFORMED C9769 CYSTOURETHROSCOPY, WITH INTESAME VESSEL(S), WHEN PERFORMED 1 DADDITION TO CODE FOR PRIMARY PROCEDURE) C9770 VITRECTOMY, MECHANICAL, PARS PLANA APPROACH, WITH SUBRETINAL INDECTION OF			
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EXTREMITY ARTERY(IES), EXCEPT TIBIAL/PERONEAL; WITH INTRAVASCULAR LITHOTRIPSY AND ATHERECTOMY, INCLUDES ANGIOPLASTY WITHIN THE SAME VESSEL(S), WHEN PERFORMED C9767 REVASCULARIZATION, ENDOVASCULAR, OPEN OR PERCUTANEOUS, LOWER EXTREMITY ARTERY(IES), EXCEPT TIBIAL/PERONEAL; WITH INTRAVASCULAR LITHOTRIPSY AND TRANSLUMINAL STENT PLACEMENT(S), AND ATHERECTOMY, INCLUDES ANGIOPLASTY WITHIN THE SAME VESSEL(S), WHEN PERFORMED C9768 ENDOSCOPIC ULTRASOUND-GUIDED DIRECT MEASUREMENT OF HEPATIC PORTOSYSTEMIC PRESSURE GRADIENT BY ANY METHOD (LIST SEPARATELY IN ADDITION TO CODE FOR PRIMARY PROCEDURE) C9769 CYSTOURETHROSCOPY, WITH INSERTION OF TEMPORARY PROSTATIC IMPLANT/STENT WITH FIXATION/ANCHOR AND INCISIONAL STRUTS C9770 VITRECTOMY, MECHANICAL, PARS PLANA APPROACH, WITH SUBRETINAL INJECTION OF PHARMACOLOGIC/BIOLOGIC AGENT C9771 NASAL/SINUS ENDOSCOPY, CRYOABLATION NASAL TISSUE(S) AND/OR NERVE(S), UNILATERAL OR BILATERAL C9772 REVASCULARIZATION, ENDOVASCULAR, OPEN OR PERCUTANEOUS, TIBIAL/PERONEAL ARTERY(IES), WITH INTRAVASCULAR LITHOTRIPSY, INCLUDES ANGIOPLASTY WITHIN THE SAME VESSEL (S), WHEN PERFORMED	C9765	EXTREMITY ARTERY(IES), EXCEPT TIBIAL/PERONEAL; WITH INTRAVASCULAR LITHOTRIPSY, AND TRANSLUMINAL STENT PLACEMENT(S), INCLUDES ANGIOPLASTY	2
EXTREMITY ARTERY(IES), EXCEPT TIBIAL/PERONEAL; WITH INTRAVASCULAR LITHOTRIPSY AND TRANSLUMINAL STENT PLACEMENT(S), AND ATHERECTOMY, INCLUDES ANGIOPLASTY WITHIN THE SAME VESSEL(S), WHEN PERFORMED C9768 ENDOSCOPIC ULTRASOUND-GUIDED DIRECT MEASUREMENT OF HEPATIC PORTOSYSTEMIC PRESSURE GRADIENT BY ANY METHOD (LIST SEPARATELY IN ADDITION TO CODE FOR PRIMARY PROCEDURE) C9769 CYSTOURETHROSCOPY, WITH INSERTION OF TEMPORARY PROSTATIC IMPLANT/STENT WITH FIXATION/ANCHOR AND INCISIONAL STRUTS C9770 VITRECTOMY, MECHANICAL, PARS PLANA APPROACH, WITH SUBRETINAL INJECTION OF PHARMACOLOGIC/BIOLOGIC AGENT C9771 NASAL/SINUS ENDOSCOPY, CRYOABLATION NASAL TISSUE(S) AND/OR NERVE(S), UNILATERAL OR BILATERAL C9772 REVASCULARIZATION, ENDOVASCULAR, OPEN OR PERCUTANEOUS, TIBIAL/PERONEAL ARTERY(IES), WITH INTRAVASCULAR LITHOTRIPSY, INCLUDES ANGIOPLASTY WITHIN THE SAME VESSEL (S), WHEN PERFORMED	C9766	EXTREMITY ARTERY(IES), EXCEPT TIBIAL/PERONEAL; WITH INTRAVASCULAR LITHOTRIPSY AND ATHERECTOMY, INCLUDES ANGIOPLASTY WITHIN THE SAME	2
PORTOSYSTEMIC PRESSURE GRADIENT BY ANY METHOD (LIST SEPARATELY IN ADDITION TO CODE FOR PRIMARY PROCEDURE) C9769 CYSTOURETHROSCOPY, WITH INSERTION OF TEMPORARY PROSTATIC IMPLANT/STENT WITH FIXATION/ANCHOR AND INCISIONAL STRUTS C9770 VITRECTOMY, MECHANICAL, PARS PLANA APPROACH, WITH SUBRETINAL INJECTION OF PHARMACOLOGIC/BIOLOGIC AGENT C9771 NASAL/SINUS ENDOSCOPY, CRYOABLATION NASAL TISSUE(S) AND/OR NERVE(S), UNILATERAL OR BILATERAL C9772 REVASCULARIZATION, ENDOVASCULAR, OPEN OR PERCUTANEOUS, TIBIAL/PERONEAL ARTERY(IES), WITH INTRAVASCULAR LITHOTRIPSY, INCLUDES ANGIOPLASTY WITHIN THE SAME VESSEL (S), WHEN PERFORMED	C9767	EXTREMITY ARTERY(IES), EXCEPT TIBIAL/PERONEAL; WITH INTRAVASCULAR LITHOTRIPSY AND TRANSLUMINAL STENT PLACEMENT(S), AND ATHERECTOMY,	2
IMPLANT/STENT WITH FIXATION/ANCHOR AND INCISIONAL STRUTS VITRECTOMY, MECHANICAL, PARS PLANA APPROACH, WITH SUBRETINAL INJECTION OF PHARMACOLOGIC/BIOLOGIC AGENT C9771 NASAL/SINUS ENDOSCOPY, CRYOABLATION NASAL TISSUE(S) AND/OR NERVE(S), UNILATERAL OR BILATERAL C9772 REVASCULARIZATION, ENDOVASCULAR, OPEN OR PERCUTANEOUS, TIBIAL/PERONEAL ARTERY(IES), WITH INTRAVASCULAR LITHOTRIPSY, INCLUDES ANGIOPLASTY WITHIN THE SAME VESSEL (S), WHEN PERFORMED	C9768	PORTOSYSTEMIC PRESSURE GRADIENT BY ANY METHOD (LIST SEPARATELY IN	1
INJECTION OF PHARMACOLOGIC/BIOLOGIC AGENT C9771 NASAL/SINUS ENDOSCOPY, CRYOABLATION NASAL TISSUE(S) AND/OR NERVE(S), UNILATERAL OR BILATERAL C9772 REVASCULARIZATION, ENDOVASCULAR, OPEN OR PERCUTANEOUS, TIBIAL/PERONEAL ARTERY(IES), WITH INTRAVASCULAR LITHOTRIPSY, INCLUDES ANGIOPLASTY WITHIN THE SAME VESSEL (S), WHEN PERFORMED	C9769		1
UNILATERAL OR BILATERAL C9772 REVASCULARIZATION, ENDOVASCULAR, OPEN OR PERCUTANEOUS, TIBIAL/PERONEAL ARTERY(IES), WITH INTRAVASCULAR LITHOTRIPSY, INCLUDES ANGIOPLASTY WITHIN THE SAME VESSEL (S), WHEN PERFORMED	C9770		2
TIBIAL/PERONEAL ARTERY(IES), WITH INTRAVASCULAR LITHOTRIPSY, INCLUDES ANGIOPLASTY WITHIN THE SAME VESSEL (S), WHEN PERFORMED	C9771		1
C9773 REVASCULARIZATION, ENDOVASCULAR, OPEN OR PERCUTANEOUS, 2	C9772	TIBIAL/PERONEAL ARTERY(IES), WITH INTRAVASCULAR LITHOTRIPSY, INCLUDES	2
TIBIAL/PERONEAL ARTERY(IES); WITH INTRAVASCULAR LITHOTRIPSY, AND	C9773	REVASCULARIZATION, ENDOVASCULAR, OPEN OR PERCUTANEOUS, TIBIAL/PERONEAL ARTERY(IES); WITH INTRAVASCULAR LITHOTRIPSY, AND	2

	TRANSLUMINAL STENT PLACEMENT(S), INCLUDES ANGIOPLASTY WITHIN THE SAME VESSEL(S), WHEN PERFORMED	
C9774	REVASCULARIZATION, ENDOVASCULAR, OPEN OR PERCUTANEOUS, TIBIAL/PERONEAL ARTERY(IES); WITH INTRAVASCULAR LITHOTRIPSY AND ATHERECTOMY, INCLUDES ANGIOPLASTY WITHIN THE SAME VESSEL (S), WHEN PERFORMED	2
C9775	REVASCULARIZATION, ENDOVASCULAR, OPEN OR PERCUTANEOUS, TIBIAL/PERONEAL ARTERY(IES); WITH INTRAVASCULAR LITHOTRIPSY AND TRANSLUMINAL STENT PLACEMENT(S), AND ATHERECTOMY, INCLUDES ANGIOPLASTY WITHIN THE SAME VESSEL (S), WHEN PERFORMED	2
C9776	Intraoperative near-infrared fluorescence imaging of major extra-hepatic bile duct(s) (e.g., cystic duct, common bile duct and common hepatic duct) with intravenous administration of indocyanine green (icg) (list separately in addition to code for primary procedure)	1
C9777	Esophageal mucosal integrity testing by electrical impedance, transoral (list separately in addition to code for primary procedure)	1
C9778	Colpopexy, vaginal; minimally invasive extra-peritoneal approach (sacrospinous)	1
C9803	HOSPITAL OUTPATIENT CLINIC VISIT SPECIMEN COLLECTION FOR SEVERE ACUTE RESPIRATORY SYNDROME CORONAVIRUS 2 (SARS-COV-2) (CORONAVIRUS DISEASE [COVID-19]), ANY SPECIMEN SOURCE	2
C9898	RADIOLABELED PRODUCT PROVIDED DURING A HOSPITAL INPATIENT STAY	1
D0120	PERIODIC ORAL EVALUATION - ESTABLISHED PATIENT	1
D0140	LIMITED ORAL EVALUATION - PROBLEM FOCUSED	4
D0145	ORAL EVALUATION FOR A PATIENT UNDER THREE YEARS OF AGE AND COUNSELING WITH PRIMARY CAREGIVER	1
D0160	DETAILED AND EXTENSIVE ORAL EVALUATION - PROBLEM FOCUSED, BY REPORT	1
D0170	RE-EVALUATION - LIMITED, PROBLEM FOCUSED (ESTABLISHED PATIENT; NOT POST-OPERATIVE VISIT)	1
D0210	INTRAORAL - COMPLETE SERIES OF RADIOGRAPHIC IMAGES	1
D0220	INTRAORAL - PERIAPICAL FIRST RADIOGRAPHIC IMAGE	1
D0230	INTRAORAL - PERIAPICAL EACH ADDITIONAL RADIOGRAPHIC IMAGE	10
D0240	INTRAORAL - OCCLUSAL RADIOGRAPHIC IMAGE	2
D0250	EXTRA-ORAL 2D PROJECTION RADIOGRAPHIC IMAGE CREATED USING A STATIONARY RADIATION SOURCE, AND DETECTOR	1
D0251	EXTRA-ORAL POSTERIOR DENTAL RADIOGRAPHIC IMAGE	10
D0270	BITEWING - SINGLE RADIOGRAPHIC IMAGE	1
D0272	BITEWINGS - TWO RADIOGRAPHIC IMAGES	1
D0273	BITEWINGS - THREE RADIOGRAPHIC IMAGES	1
D0274	BITEWINGS - FOUR RADIOGRAPHIC IMAGES	1

D0277	VERTICAL BITEWINGS - 7 TO 8 RADIOGRAPHIC IMAGES	1
D0330	PANORAMIC RADIOGRAPHIC IMAGE	1
D0340	2D CEPHALOMETRIC RADIOGRAPHIC IMAGE ACQUISITION, MEASUREMENT AND ANALYSIS	1
D0416	VIRAL CULTURE	1
D0431	ADJUNCTIVE PRE-DIAGNOSTIC TEST THAT AIDS IN DETECTION OF MUCOSAL ABNORMALITIES INCLUDING PREMALIGNANT AND MALIGNANT LESIONS, NOT TO INCLUDE CYTOLOGY OR BIOPSY PROCEDURES	1
D0460	PULP VITALITY TESTS	1
D0484	CONSULTATION ON SLIDES PREPARED ELSEWHERE	1
D0485	CONSULTATION, INCLUDING PREPARATION OF SLIDES FROM BIOPSY MATERIAL SUPPLIED BY REFERRING SOURCE	1
D0601	CARIES RISK ASSESSMENT AND DOCUMENTATION, WITH A FINDING OF LOW RISK	1
D0602	CARIES RISK ASSESSMENT AND DOCUMENTATION, WITH A FINDING OF MODERATE RISK	1
D1110	PROPHYLAXIS - ADULT	1
D1120	PROPHYLAXIS - CHILD	1
D1206	TOPICAL APPLICATION OF FLUORIDE VARNISH	4
D1208	TOPICAL APPLICATION OF FLUORIDE EXCLUDING VARNISH	1
D1320	TOBACCO COUNSELING FOR THE CONTROL AND PREVENTION OF ORAL DISEASE	1
D1321	COUNSELING FOR THE CONTROL AND PREVENTION OF ADVERSE ORAL, BEHAVIORAL, AND SYSTEMIC HEALTH EFFECTS ASSOCIATED WITH HIGH-RISK SUBSTANCE USE	70
D1351	SEALANT - PER TOOTH	16
D1354	APPLICATION OF CARIES ARRESTING MEDICAMENT PER TOOTH	10
D1510	SPACE MAINTAINER - FIXED, UNILATERAL PER QUADRANT	4
D1515	SPACE MAINTAINER - FIXED - BILATERAL	2
D1516	SPACE MAINTAINER - FIXED - BILATERAL, MAXILLARY	2
D1517	SPACE MAINTAINER - FIXED - BILATERAL, MANDIBULAR	2
D1520	SPACE MAINTAINER - REMOVABLE, UNILATERAL - PER QUADRANT	2
D1526	SPACE MAINTAINER - REMOVABLE - BILATERAL, MAXILLARY	1
D1527	SPACE MAINTAINER - REMOVABLE - BILATERAL, MANDIBULAR	1
D1551	RE-CEMENT OR RE-BOND BILATERAL SPACE MAINTAINER - MAXILLARY	1
D1552	RE-CEMENT OR RE-BOND BILATERAL SPACE MAINTAINER - MANDIBULAR	1
D1553	RE-CEMENT OR RE-BOND UNILATERAL SPACE MAINTAINER - PER QUADRANT	4
D1555	REMOVAL OF FIXED SPACE MAINTAINER	4
D1556	REMOVAL OF FIXED UNILATERAL SPACE MAINTAINER - PER QUADRANT	4

D1557	REMOVAL OF FIXED BILATERAL SPACE MAINTAINER - MAXILLARY	1
D1558	REMOVAL OF FIXED BILATERAL SPACE MAINTAINER - MANDIBULAR	1
D1575	DISTAL SHOE SPACE MAINTAINER - FIXED, UNILATERAL - PER QUADRANT	4
D2140	AMALGAM - ONE SURFACE, PRIMARY OR PERMANENT	1
D2150	AMALGAM - TWO SURFACES, PRIMARY OR PERMANENT	1
D2160	AMALGAM - THREE SURFACES, PRIMARY OR PERMANENT	1
D2161	AMALGAM - FOUR OR MORE SURFACES, PRIMARY OR PERMANENT	1
D2330	RESIN-BASED COMPOSITE - ONE SURFACE, ANTERIOR	1
D2331	RESIN-BASED COMPOSITE - TWO SURFACES, ANTERIOR	1
D2332	RESIN-BASED COMPOSITE - THREE SURFACES, ANTERIOR	1
D2335	RESIN-BASED COMPOSITE - FOUR OR MORE SURFACES OR INVOLVING INCISAL ANGLE (ANTERIOR)	1
D2391	RESIN-BASED COMPOSITE - ONE SURFACE, POSTERIOR	1
D2392	RESIN-BASED COMPOSITE - TWO SURFACES, POSTERIOR	1
D2393	RESIN-BASED COMPOSITE - THREE SURFACES, POSTERIOR	1
D2394	RESIN-BASED COMPOSITE - FOUR OR MORE SURFACES, POSTERIOR	1
D2710	CROWN - RESIN-BASED COMPOSITE (INDIRECT)	4
D2721	CROWN - RESIN WITH PREDOMINANTLY BASE METAL	4
D2740	CROWN - PORCELAIN/CERAMIC	4
D2751	CROWN - PORCELAIN FUSED TO PREDOMINANTLY BASE METAL	4
D2791	CROWN - FULL CAST PREDOMINANTLY BASE METAL	4
D2910	RE-CEMENT OR RE-BOND INLAY, ONLAY, VENEER OR PARTIAL COVERAGE RESTORATION	52
D2915	RE-CEMENT OR RE-BOND INDIRECTLY FABRICATED OR PREFABRICATED POST AND CORE	52
D2920	RE-CEMENT OR RE-BOND CROWN	52
D2930	PREFABRICATED STAINLESS STEEL CROWN - PRIMARY TOOTH	20
D2931	PREFABRICATED STAINLESS STEEL CROWN - PERMANENT TOOTH	32
D2932	PREFABRICATED RESIN CROWN	52
D2933	PREFABRICATED STAINLESS STEEL CROWN WITH RESIN WINDOW	52
D2934	PREFABRICATED ESTHETIC COATED STAINLESS STEEL CROWN - PRIMARY TOOTH	1
D2952	POST AND CORE IN ADDITION TO CROWN, INDIRECTLY FABRICATED	1
D2954	PREFABRICATED POST AND CORE IN ADDITION TO CROWN	1
D2980	CROWN REPAIR NECESSITATED BY RESTORATIVE MATERIAL FAILURE	1
D2980	CROWN REPAIR NECESSITATED BY RESTORATIVE MATERIAL FAILURE	1

D3220	THERAPEUTIC PULPOTOMY (EXCLUDING FINAL RESTORATION) - REMOVAL OF PULP CORONAL TO THE DENTINOCEMENTAL JUNCTION AND APPLICATION OF MEDICAMENT	6
D3230	PULPAL THERAPY (RESORBABLE FILLING) - ANTERIOR, PRIMARY TOOTH (EXCLUDING FINAL RESTORATION)	1
D3240	PULPAL THERAPY (RESORBABLE FILLING) - POSTERIOR, PRIMARY TOOTH (EXCLUDING FINAL RESTORATION)	1
D3310	ENDODONTIC THERAPY, ANTERIOR TOOTH (EXCLUDING FINAL RESTORATION)	1
D3320	ENDODONTIC THERAPY, PREMOLAR TOOTH (EXCLUDING FINAL RESTORATION)	1
D3330	ENDODONTIC THERAPY, MOLAR TOOTH (EXCLUDING FINAL RESTORATION)	1
D3410	APICOECTOMY - ANTERIOR	2
D3421	APICOECTOMY - PREMOLAR (FIRST ROOT)	2
D3425	APICOECTOMY - MOLAR (FIRST ROOT)	2
D3426	APICOECTOMY (EACH ADDITIONAL ROOT)	2
D3471	SURGICAL REPAIR OF ROOT RESORPTION - ANTERIOR	24
D3472	SURGICAL REPAIR OF ROOT RESORPTION PREMOLAR	8
D3473	SURGICAL REPAIR OF ROOT RESORPTION MOLAR	20
D3501	SURGICAL EXPOSURE OF ROOT SURFACE WITHOUT APICOECTOMY OR REPAIR OF ROOT RESORPTION ANTERIOR	24
D3502	SURGICAL EXPOSURE OF ROOT SURFACE WITHOUT APICOECTOMY OR REPAIR OF ROOT RESORPTION PREMOLAR	8
D3503	SURGICAL EXPOSURE OF ROOT SURFACE WITHOUT APICOECTOMY OR REPAIR OF ROOT RESORPTION MOLAR	20
D4210	GINGIVECTOMY OR GINGIVOPLASTY - FOUR OR MORE CONTIGUOUS TEETH OR TOOTH BOUNDED SPACES PER QUADRANT	4
D4260	OSSEOUS SURGERY (INCLUDING ELEVATION OF A FULL THICKNESS FLAP AND CLOSURE) FOUR OR MORE CONTIGUOUS TEETH OR TOOTH BOUNDED SPACES PER QUADRANT	4
D4263	BONE REPLACEMENT GRAFT RETAINED NATURAL TOOTH FIRST SITE IN QUADRANT	4
D4264	BONE REPLACEMENT GRAFT RETAINED NATURAL TOOTH EACH ADDITIONAL SITE IN QUADRANT	3
D4270	PEDICLE SOFT TISSUE GRAFT PROCEDURE	4
D4273	AUTOGENOUS CONNECTIVE TISSUE GRAFT PROCEDURE (INCLUDING DONOR AND RECIPIENT SURGICAL SITES) FIRST TOOTH, IMPLANT, OR EDENTULOUS TOOTH POSITION IN GRAFT	1
D4277	FREE SOFT TISSUE GRAFT PROCEDURE (INCLUDING RECIPIENT AND DONOR SURGICAL SITES) FIRST TOOTH, IMPLANT OR EDENTULOUS TOOTH POSITION IN GRAFT	1

D4278	FREE SOFT TISSUE GRAFT PROCEDURE (INCLUDING RECIPIENT AND DONOR SURGICAL SITES) EACH ADDITIONAL CONTIGUOUS TOOTH, IMPLANT OR EDENTULOUS TOOTH POSITION IN SAME GRAFT SITE	3
D4341	PERIODONTAL SCALING AND ROOT PLANING - FOUR OR MORE TEETH PER QUADRANT	4
D4355	FULL MOUTH DEBRIDEMENT TO ENABLE A COMPREHENSIVE ORAL EVALUATION AND DIAGNOSIS ON A SUBSEQUENT VISIT	1
D4381	LOCALIZED DELIVERY OF ANTIMICROBIAL AGENTS VIA A CONTROLLED RELEASE VEHICLE INTO DISEASED CREVICULAR TISSUE, PER TOOTH	12
D4910	PERIODONTAL MAINTENANCE	4
D5110	COMPLETE DENTURE - MAXILLARY	2
D5120	COMPLETE DENTURE - MANDIBULAR	2
D5130	IMMEDIATE DENTURE - MAXILLARY	2
D5140	IMMEDIATE DENTURE - MANDIBULAR	2
D5211	MAXILLARY PARTIAL DENTURE RESIN BASE (INCLUDING, RETENTIVE/CLASPING MATERIALS, RESTS, AND TEETH)	2
D5212	MANDIBULAR PARTIAL DENTURE RESIN BASE (INCLUDING, RETENTIVE/CLASPING MATERIALS, RESTS, AND TEETH)	2
D5213	MAXILLARY PARTIAL DENTURE - CAST METAL FRAMEWORK WITH RESIN DENTURE BASES (INCLUDING RETENTIVE/CLASPING MATERIALS, RESTS AND TEETH)	2
D5214	MANDIBULAR PARTIAL DENTURE - CAST METAL FRAMEWORK WITH RESIN DENTURE BASES (INCLUDING RETENTIVE/CLASPING MATERIALS, RESTS AND TEETH)	2
D5410	ADJUST COMPLETE DENTURE - MAXILLARY	1
D5411	ADJUST COMPLETE DENTURE - MANDIBULAR	1
D5421	ADJUST PARTIAL DENTURE - MAXILLARY	1
D5422	ADJUST PARTIAL DENTURE - MANDIBULAR	1
D5511	REPAIR BROKEN COMPLETE DENTURE BASE, MANDIBULAR	1
D5512	REPAIR BROKEN COMPLETE DENTURE BASE, MAXILLARY	1
D5520	REPLACE MISSING OR BROKEN TEETH - COMPLETE DENTURE (EACH TOOTH)	3
D5611	REPAIR RESIN PARTIAL DENTURE BASE, MANDIBULAR	1
D5612	REPAIR RESIN PARTIAL DENTURE BASE, MAXILLARY	1
D5621	REPAIR CAST PARTIAL FRAMEWORK, MANDIBULAR	1
D5622	REPAIR CAST PARTIAL FRAMEWORK, MAXILLARY	1
D5630	REPAIR OR REPLACE BROKEN RETENTIVE CLASPING MATERIALS PER TOOTH	4
D5640	REPLACE BROKEN TEETH - PER TOOTH	3
D5650	ADD TOOTH TO EXISTING PARTIAL DENTURE	2
D5660	ADD CLASP TO EXISTING PARTIAL DENTURE - PER TOOTH	2

D5730	RELINE COMPLETE MAXILLARY DENTURE (DIRECT)	1
D5731	RELINE COMPLETE MANDIBULAR DENTURE (DIRECT)	1
D5740	RELINE MAXILLARY PARTIAL DENTURE (DIRECT)	1
D5741	RELINE MANDIBULAR PARTIAL DENTURE (DIRECT)	1
D5750	RELINE COMPLETE MAXILLARY DENTURE (INDIRECT)	1
D5751	RELINE COMPLETE MANDIBULAR DENTURE (INDIRECT)	1
D5760	RELINE MAXILLARY PARTIAL DENTURE (INDIRECT)	1
D5761	RELINE MANDIBULAR PARTIAL DENTURE (INDIRECT)	1
D5911	FACIAL MOULAGE (SECTIONAL)	1
D5912	FACIAL MOULAGE (COMPLETE)	1
D5983	RADIATION CARRIER	1
D5984	RADIATION SHIELD	1
D5985	RADIATION CONE LOCATOR	1
D6930	RE-CEMENT OR RE-BOND FIXED PARTIAL DENTURE	1
D6980	FIXED PARTIAL DENTURE REPAIR NECESSITATED BY RESTORATIVE MATERIAL FAILURE	1
D7111	EXTRACTION, CORONAL REMNANTS PRIMARY TOOTH	20
D7140	EXTRACTION, ERUPTED TOOTH OR EXPOSED ROOT (ELEVATION AND/OR FORCEPS REMOVAL)	32
D7210	EXTRACTION, ERUPTED TOOTH REQUIRING REMOVAL OF BONE AND/OR SECTIONING OF TOOTH, AND INCLUDING ELEVATION OF MUCOPERIOSTEAL FLAP IF INDICATED	32
D7220	REMOVAL OF IMPACTED TOOTH - SOFT TISSUE	32
D7230	REMOVAL OF IMPACTED TOOTH - PARTIALLY BONY	32
D7240	REMOVAL OF IMPACTED TOOTH - COMPLETELY BONY	32
D7241	REMOVAL OF IMPACTED TOOTH - COMPLETELY BONY, WITH UNUSUAL SURGICAL COMPLICATIONS	6
D7250	REMOVAL OF RESIDUAL TOOTH ROOTS (CUTTING PROCEDURE)	32
D7260	OROANTRAL FISTULA CLOSURE	1
D7261	PRIMARY CLOSURE OF A SINUS PERFORATION	1
D7270	TOOTH RE-IMPLANTATION AND/OR STABILIZATION OF ACCIDENTALLY EVULSED OR DISPLACED TOOTH	1
D7280	EXPOSURE OF AN UNERUPTED TOOTH	32
D7283	PLACEMENT OF DEVICE TO FACILITATE ERUPTION OF IMPACTED TOOTH	1
D7288	BRUSH BIOPSY - TRANSEPITHELIAL SAMPLE COLLECTION	2
D7310	ALVEOLOPLASTY IN CONJUNCTION WITH EXTRACTIONS - FOUR OR MORE TEETH OR TOOTH SPACES, PER QUADRANT	4

D7321	ALVEOLOPLASTY NOT IN CONJUNCTION WITH EXTRACTIONS - ONE TO THREE TEETH OR TOOTH SPACES, PER QUADRANT REMOVAL OF BENIGN ODONTOGENIC CYST OR TUMOR - LESION DIAMETER UP TO 1.25 CM REMOVAL OF BENIGN ODONTOGENIC CYST OR TUMOR - LESION DIAMETER GREATER THAN 1.25 CM REMOVAL OF BENIGN NONODONTOGENIC CYST OR TUMOR - LESION DIAMETER UP	2 2
	1.25 CM REMOVAL OF BENIGN ODONTOGENIC CYST OR TUMOR - LESION DIAMETER GREATER THAN 1.25 CM	
	GREATER THAN 1.25 CM	2
D7451	REMOVAL OF RENIGN NONODONTOGENIC CYST OR TUMOR - LESION DIAMETER LIP	1
D7460	TO 1.25 CM	2
D7461	REMOVAL OF BENIGN NONODONTOGENIC CYST OR TUMOR - LESION DIAMETER GREATER THAN 1.25 CM	2
D7471	REMOVAL OF LATERAL EXOSTOSIS (MAXILLA OR MANDIBLE)	2
D7472	REMOVAL OF TORUS PALATINUS	2
D7473	REMOVAL OF TORUS MANDIBULARIS	2
D7485	REDUCTION OF OSSEOUS TUBEROSITY	2
D7510	INCISION AND DRAINAGE OF ABSCESS - INTRAORAL SOFT TISSUE	2
D7511	INCISION AND DRAINAGE OF ABSCESS - INTRAORAL SOFT TISSUE - COMPLICATED (INCLUDES DRAINAGE OF MULTIPLE FASCIAL SPACES)	2
D7520	INCISION AND DRAINAGE OF ABSCESS - EXTRAORAL SOFT TISSUE	2
D7521	INCISION AND DRAINAGE OF ABSCESS - EXTRAORAL SOFT TISSUE - COMPLICATED (INCLUDES DRAINAGE OF MULTIPLE FASCIAL SPACES)	2
D7871	NON-ARTHROSCOPIC LYSIS AND LAVAGE	1
D7960	FRENULECTOMY - ALSO KNOWN AS FRENECTOMY OR FRENOTOMY - SEPARATE PROCEDURE NOT INCIDENTAL TO ANOTHER PROCEDURE	2
D7961	BUCCAL / LABIAL FRENECTOMY (FRENULECTOMY)	2
D7962	LINGUAL FRENECTOMY (FRENULECTOMY)	1
D7970	EXCISION OF HYPERPLASTIC TISSUE - PER ARCH	2
D7999	UNSPECIFIED ORAL SURGERY PROCEDURE, BY REPORT	1
D8080	COMPREHENSIVE ORTHODONTIC TREATMENT OF THE ADOLESCENT DENTITION	1
D8210	REMOVABLE APPLIANCE THERAPY	2
D8220	FIXED APPLIANCE THERAPY	2
D8660	PRE-ORTHODONTIC TREATMENT EXAMINATION TO MONITOR GROWTH AND DEVELOPMENT	1
D8670	PERIODIC ORTHODONTIC TREATMENT VISIT	1
D8680	ORTHODONTIC RETENTION (REMOVAL OF APPLIANCES, CONSTRUCTION AND PLACEMENT OF RETAINER(S))	1
D8703	REPLACEMENT OF LOST OR BROKEN RETAINER MAXILLARY	1

D8704	REPLACEMENT OF LOST OR BROKEN RETAINER MANDIBULAR	1
D9110	PALLIATIVE (EMERGENCY) TREATMENT OF DENTAL PAIN - MINOR PROCEDURE	1
D9222	DEEP SEDATION/GENERAL ANESTHESIA FIRST 15 MINUTES	1
D9223	DEEP SEDATION/GENERAL ANESTHESIA EACH SUBSEQUENT 15 MINUTE INCREMENT	2
D9230	INHALATION OF NITROUS OXIDE/ANALGESIA, ANXIOLYSIS	1
D9239	INTRAVENOUS MODERATE (CONSCIOUS) SEDATION/ANALGESIA- FIRST 15 MINUTES	1
D9243	INTRAVENOUS MODERATE (CONSCIOUS) SEDATION/ANALGESIA EACH SUBSEQUENT 15 MINUTE INCREMENT	2
D9248	NON-INTRAVENOUS CONSCIOUS SEDATION	1
D9920	BEHAVIOR MANAGEMENT, BY REPORT	4
D9930	TREATMENT OF COMPLICATIONS (POST-SURGICAL) - UNUSUAL CIRCUMSTANCES, BY REPORT	1
D9944	OCCLUSAL GUARD HARD APPLIANCE, FULL ARCH	2
D9945	OCCLUSAL GUARD SOFT APPLIANCE, FULL ARCH	2
D9946	OCCLUSAL GUARD HARD APPLIANCE, PARTIAL ARCH	2
D9950	OCCLUSION ANALYSIS - MOUNTED CASE	1
D9951	OCCLUSAL ADJUSTMENT - LIMITED	1
D9952	OCCLUSAL ADJUSTMENT - COMPLETE	1
D9995	TELEDENTISTRY SYNCHRONOUS; REAL-TIME ENCOUNTER	1
E0100	CANE, INCLUDES CANES OF ALL MATERIALS, ADJUSTABLE OR FIXED, WITH TIP	3
E0105	CANE, QUAD OR THREE PRONG, INCLUDES CANES OF ALL MATERIALS, ADJUSTABLE OR FIXED, WITH TIPS	2
E0110	CRUTCHES, FOREARM, INCLUDES CRUTCHES OF VARIOUS MATERIALS, ADJUSTABLE OR FIXED, PAIR, COMPLETE WITH TIPS AND HANDGRIPS	1
E0111	CRUTCH FOREARM, INCLUDES CRUTCHES OF VARIOUS MATERIALS, ADJUSTABLE OR FIXED, EACH, WITH TIP AND HANDGRIPS	2
E0112	CRUTCHES UNDERARM, WOOD, ADJUSTABLE OR FIXED, PAIR, WITH PADS, TIPS AND HANDGRIPS	1
E0113	CRUTCH UNDERARM, WOOD, ADJUSTABLE OR FIXED, EACH, WITH PAD, TIP AND HANDGRIP	2
E0116	CRUTCH, UNDERARM, OTHER THAN WOOD, ADJUSTABLE OR FIXED, WITH PAD, TIP, HANDGRIP, WITH OR WITHOUT SHOCK ABSORBER, EACH	2
E0117	CRUTCH, UNDERARM, ARTICULATING, SPRING ASSISTED, EACH	2
E0118	CRUTCH SUBSTITUTE, LOWER LEG PLATFORM, WITH OR WITHOUT WHEELS, EACH	1
E0130	WALKER, RIGID (PICKUP), ADJUSTABLE OR FIXED HEIGHT	1
E0135	WALKER, FOLDING (PICKUP), ADJUSTABLE OR FIXED HEIGHT	1

E0140	WALKER, WITH TRUNK SUPPORT, ADJUSTABLE OR FIXED HEIGHT, ANY TYPE	1
E0141	WALKER, RIGID, WHEELED, ADJUSTABLE OR FIXED HEIGHT	1
E0143	WALKER, FOLDING, WHEELED, ADJUSTABLE OR FIXED HEIGHT	1
E0144	WALKER, ENCLOSED, FOUR SIDED FRAMED, RIGID OR FOLDING, WHEELED WITH POSTERIOR SEAT	1
E0147	WALKER, HEAVY DUTY, MULTIPLE BRAKING SYSTEM, VARIABLE WHEEL RESISTANCE	1
E0148	WALKER, HEAVY DUTY, WITHOUT WHEELS, RIGID OR FOLDING, ANY TYPE, EACH	1
E0149	WALKER, HEAVY DUTY, WHEELED, RIGID OR FOLDING, ANY TYPE	1
E0153	PLATFORM ATTACHMENT, FOREARM CRUTCH, EACH	2
E0154	PLATFORM ATTACHMENT, WALKER, EACH	2
E0155	WHEEL ATTACHMENT, RIGID PICK-UP WALKER, PER PAIR	2
E0156	SEAT ATTACHMENT, WALKER	1
E0157	CRUTCH ATTACHMENT, WALKER, EACH	1
E0158	LEG EXTENSIONS FOR WALKER, PER SET OF FOUR (4)	2
E0159	BRAKE ATTACHMENT FOR WHEELED WALKER, REPLACEMENT, EACH	2
E0160	SITZ TYPE BATH OR EQUIPMENT, PORTABLE, USED WITH OR WITHOUT COMMODE	1
E0161	SITZ TYPE BATH OR EQUIPMENT, PORTABLE, USED WITH OR WITHOUT COMMODE, WITH FAUCET ATTACHMENT/S	1
E0162	SITZ BATH CHAIR	1
E0163	COMMODE CHAIR, MOBILE OR STATIONARY, WITH FIXED ARMS	1
E0165	COMMODE CHAIR, MOBILE OR STATIONARY, WITH DETACHABLE ARMS	1
E0167	PAIL OR PAN FOR USE WITH COMMODE CHAIR, REPLACEMENT ONLY	1
E0168	COMMODE CHAIR, EXTRA WIDE AND/OR HEAVY DUTY, STATIONARY OR MOBILE, WITH OR WITHOUT ARMS, ANY TYPE, EACH	1
E0170	COMMODE CHAIR WITH INTEGRATED SEAT LIFT MECHANISM, ELECTRIC, ANY TYPE	1
E0171	COMMODE CHAIR WITH INTEGRATED SEAT LIFT MECHANISM, NON-ELECTRIC, ANY TYPE	1
E0172	SEAT LIFT MECHANISM PLACED OVER OR ON TOP OF TOILET, ANY TYPE	1
E0175	FOOT REST, FOR USE WITH COMMODE CHAIR, EACH	2
E0181	POWERED PRESSURE REDUCING MATTRESS OVERLAY/PAD, ALTERNATING, WITH PUMP, INCLUDES HEAVY DUTY	1
E0182	PUMP FOR ALTERNATING PRESSURE PAD, FOR REPLACEMENT ONLY	1
E0184	DRY PRESSURE MATTRESS	1
E0185	GEL OR GEL-LIKE PRESSURE PAD FOR MATTRESS, STANDARD MATTRESS LENGTH AND WIDTH	1
E0186	AIR PRESSURE MATTRESS	1

E0187	WATER DRESSIDE MATTRESS	1
	WATER PRESSURE MATTRESS	1
E0188	SYNTHETIC SHEEPSKIN PAD	1
E0189	LAMBSWOOL SHEEPSKIN PAD, ANY SIZE	1
E0190	POSITIONING CUSHION/PILLOW/WEDGE, ANY SHAPE OR SIZE, INCLUDES ALL COMPONENTS AND ACCESSORIES	4
E0191	HEEL OR ELBOW PROTECTOR, EACH	4
E0193	POWERED AIR FLOTATION BED (LOW AIR LOSS THERAPY)	1
E0194	AIR FLUIDIZED BED	1
E0196	GEL PRESSURE MATTRESS	1
E0197	AIR PRESSURE PAD FOR MATTRESS, STANDARD MATTRESS LENGTH AND WIDTH	1
E0198	WATER PRESSURE PAD FOR MATTRESS, STANDARD MATTRESS LENGTH AND WIDTH	1
E0199	DRY PRESSURE PAD FOR MATTRESS, STANDARD MATTRESS LENGTH AND WIDTH	1
E0200	HEAT LAMP, WITHOUT STAND (TABLE MODEL), INCLUDES BULB, OR INFRARED ELEMENT	1
E0202	PHOTOTHERAPY (BILIRUBIN) LIGHT WITH PHOTOMETER	2
E0203	THERAPEUTIC LIGHTBOX, MINIMUM 10,000 LUX, TABLE TOP MODEL	1
E0205	HEAT LAMP, WITH STAND, INCLUDES BULB, OR INFRARED ELEMENT	1
E0210	ELECTRIC HEAT PAD, STANDARD	1
E0215	ELECTRIC HEAT PAD, MOIST	1
E0217	WATER CIRCULATING HEAT PAD WITH PUMP	1
E0218	FLUID CIRCULATING COLD PAD WITH PUMP, ANY TYPE	1
E0221	INFRARED HEATING PAD SYSTEM	1
E0225	HYDROCOLLATOR UNIT, INCLUDES PADS	1
E0231	NON-CONTACT WOUND WARMING DEVICE (TEMPERATURE CONTROL UNIT, AC ADAPTER AND POWER CORD) FOR USE WITH WARMING CARD AND WOUND COVER	1
E0232	WARMING CARD FOR USE WITH THE NON CONTACT WOUND WARMING DEVICE AND NON CONTACT WOUND WARMING WOUND COVER	1
E0235	PARAFFIN BATH UNIT, PORTABLE (SEE MEDICAL SUPPLY CODE A4265 FOR PARAFFIN)	1
E0236	PUMP FOR WATER CIRCULATING PAD	1
E0239	HYDROCOLLATOR UNIT, PORTABLE	1
E0240	BATH/SHOWER CHAIR, WITH OR WITHOUT WHEELS, ANY SIZE	1
E0241	BATH TUB WALL RAIL, EACH	1
E0243	TOILET RAIL, EACH	2
LU243		
E0243	RAISED TOILET SEAT	2

E0246	TRANSFER TUB RAIL ATTACHMENT	2
E0247	TRANSFER BENCH FOR TUB OR TOILET WITH OR WITHOUT COMMODE OPENING	1
E0248	TRANSFER BENCH, HEAVY DUTY, FOR TUB OR TOILET WITH OR WITHOUT COMMODE OPENING	1
E0249	PAD FOR WATER CIRCULATING HEAT UNIT, FOR REPLACEMENT ONLY	1
E0250	HOSPITAL BED, FIXED HEIGHT, WITH ANY TYPE SIDE RAILS, WITH MATTRESS	1
E0251	HOSPITAL BED, FIXED HEIGHT, WITH ANY TYPE SIDE RAILS, WITHOUT MATTRESS	1
E0255	HOSPITAL BED, VARIABLE HEIGHT, HI-LO, WITH ANY TYPE SIDE RAILS, WITH MATTRESS	1
E0256	HOSPITAL BED, VARIABLE HEIGHT, HI-LO, WITH ANY TYPE SIDE RAILS, WITHOUT MATTRESS	1
E0260	HOSPITAL BED, SEMI-ELECTRIC (HEAD AND FOOT ADJUSTMENT), WITH ANY TYPE SIDE RAILS, WITH MATTRESS	1
E0261	HOSPITAL BED, SEMI-ELECTRIC (HEAD AND FOOT ADJUSTMENT), WITH ANY TYPE SIDE RAILS, WITHOUT MATTRESS	1
E0265	HOSPITAL BED, TOTAL ELECTRIC (HEAD, FOOT AND HEIGHT ADJUSTMENTS), WITH ANY TYPE SIDE RAILS, WITH MATTRESS	1
E0266	HOSPITAL BED, TOTAL ELECTRIC (HEAD, FOOT AND HEIGHT ADJUSTMENTS), WITH ANY TYPE SIDE RAILS, WITHOUT MATTRESS	1
E0270	HOSPITAL BED, INSTITUTIONAL TYPE INCLUDES: OSCILLATING, CIRCULATING AND STRYKER FRAME, WITH MATTRESS	1
E0271	MATTRESS, INNERSPRING	1
E0272	MATTRESS, FOAM RUBBER	1
E0273	BED BOARD	2
E0274	OVER-BED TABLE	1
E0275	BED PAN, STANDARD, METAL OR PLASTIC	2
E0276	BED PAN, FRACTURE, METAL OR PLASTIC	1
E0277	POWERED PRESSURE-REDUCING AIR MATTRESS	1
E0280	BED CRADLE, ANY TYPE	1
E0290	HOSPITAL BED, FIXED HEIGHT, WITHOUT SIDE RAILS, WITH MATTRESS	1
E0291	HOSPITAL BED, FIXED HEIGHT, WITHOUT SIDE RAILS, WITHOUT MATTRESS	1
E0292	HOSPITAL BED, VARIABLE HEIGHT, HI-LO, WITHOUT SIDE RAILS, WITH MATTRESS	1
E0293	HOSPITAL BED, VARIABLE HEIGHT, HI-LO, WITHOUT SIDE RAILS, WITHOUT MATTRESS	1
E0294	HOSPITAL BED, SEMI-ELECTRIC (HEAD AND FOOT ADJUSTMENT), WITHOUT SIDE RAILS, WITH MATTRESS	1
E0295	HOSPITAL BED, SEMI-ELECTRIC (HEAD AND FOOT ADJUSTMENT), WITHOUT SIDE RAILS, WITHOUT MATTRESS	1

E0296	HOSPITAL BED, TOTAL ELECTRIC (HEAD, FOOT AND HEIGHT ADJUSTMENTS), WITHOUT SIDE RAILS, WITH MATTRESS	1
E0297	HOSPITAL BED, TOTAL ELECTRIC (HEAD, FOOT AND HEIGHT ADJUSTMENTS), WITHOUT SIDE RAILS, WITHOUT MATTRESS	1
E0300	PEDIATRIC CRIB, HOSPITAL GRADE, FULLY ENCLOSED, WITH OR WITHOUT TOP ENCLOSURE	1
E0301	HOSPITAL BED, HEAVY DUTY, EXTRA WIDE, WITH WEIGHT CAPACITY GREATER THAN 350 POUNDS, BUT LESS THAN OR EQUAL TO 600 POUNDS, WITH ANY TYPE SIDE RAILS, WITHOUT MATTRESS	1
E0302	HOSPITAL BED, EXTRA HEAVY DUTY, EXTRA WIDE, WITH WEIGHT CAPACITY GREATER THAN 600 POUNDS, WITH ANY TYPE SIDE RAILS, WITHOUT MATTRESS	1
E0303	HOSPITAL BED, HEAVY DUTY, EXTRA WIDE, WITH WEIGHT CAPACITY GREATER THAN 350 POUNDS, BUT LESS THAN OR EQUAL TO 600 POUNDS, WITH ANY TYPE SIDE RAILS, WITH MATTRESS	1
E0304	HOSPITAL BED, EXTRA HEAVY DUTY, EXTRA WIDE, WITH WEIGHT CAPACITY GREATER THAN 600 POUNDS, WITH ANY TYPE SIDE RAILS, WITH MATTRESS	1
E0305	BED SIDE RAILS, HALF LENGTH	1
E0310	BED SIDE RAILS, FULL LENGTH	1
E0315	BED ACCESSORY: BOARD, TABLE, OR SUPPORT DEVICE, ANY TYPE	2
E0316	SAFETY ENCLOSURE FRAME/CANOPY FOR USE WITH HOSPITAL BED, ANY TYPE	1
E0325	URINAL; MALE, JUG-TYPE, ANY MATERIAL	2
E0326	URINAL; FEMALE, JUG-TYPE, ANY MATERIAL	2
E0328	HOSPITAL BED, PEDIATRIC, MANUAL, 360 DEGREE SIDE ENCLOSURES, TOP OF HEADBOARD, FOOTBOARD AND SIDE RAILS UP TO 24 INCHES ABOVE THE SPRING, INCLUDES MATTRESS	1
E0329	HOSPITAL BED, PEDIATRIC, ELECTRIC OR SEMI-ELECTRIC, 360 DEGREE SIDE ENCLOSURES, TOP OF HEADBOARD, FOOTBOARD AND SIDE RAILS UP TO 24 INCHES ABOVE THE SPRING, INCLUDES MATTRESS	1
E0350	CONTROL UNIT FOR ELECTRONIC BOWEL IRRIGATION/EVACUATION SYSTEM	1
E0352	DISPOSABLE PACK (WATER RESERVOIR BAG, SPECULUM, VALVING MECHANISM AND COLLECTION BAG/BOX) FOR USE WITH THE ELECTRONIC BOWEL IRRIGATION/EVACUATION SYSTEM	30
E0370	AIR PRESSURE ELEVATOR FOR HEEL	2
E0371	NONPOWERED ADVANCED PRESSURE REDUCING OVERLAY FOR MATTRESS, STANDARD MATTRESS LENGTH AND WIDTH	1
E0372	POWERED AIR OVERLAY FOR MATTRESS, STANDARD MATTRESS LENGTH AND WIDTH	1
E0373	NONPOWERED ADVANCED PRESSURE REDUCING MATTRESS	1
E0424	STATIONARY COMPRESSED GASEOUS OXYGEN SYSTEM, RENTAL; INCLUDES CONTAINER, CONTENTS, REGULATOR, FLOWMETER, HUMIDIFIER, NEBULIZER, CANNULA OR MASK, AND TUBING	1

E0425	STATIONARY COMPRESSED GAS SYSTEM, PURCHASE; INCLUDES REGULATOR, FLOWMETER, HUMIDIFIER, NEBULIZER, CANNULA OR MASK, AND TUBING	9999
E0430	PORTABLE GASEOUS OXYGEN SYSTEM, PURCHASE; INCLUDES REGULATOR, FLOWMETER, HUMIDIFIER, CANNULA OR MASK, AND TUBING	9999
E0431	PORTABLE GASEOUS OXYGEN SYSTEM, RENTAL; INCLUDES PORTABLE CONTAINER, REGULATOR, FLOWMETER, HUMIDIFIER, CANNULA OR MASK, AND TUBING	1
E0433	PORTABLE LIQUID OXYGEN SYSTEM, RENTAL; HOME LIQUEFIER USED TO FILL PORTABLE LIQUID OXYGEN CONTAINERS, INCLUDES PORTABLE CONTAINERS, REGULATOR, FLOWMETER, HUMIDIFIER, CANNULA OR MASK AND TUBING, WITH OR WITHOUT SUPPLY RESERVOIR AND CONTENTS GAUGE	1
E0434	PORTABLE LIQUID OXYGEN SYSTEM, RENTAL; INCLUDES PORTABLE CONTAINER, SUPPLY RESERVOIR, HUMIDIFIER, FLOWMETER, REFILL ADAPTOR, CONTENTS GAUGE, CANNULA OR MASK, AND TUBING	1
E0435	PORTABLE LIQUID OXYGEN SYSTEM, PURCHASE; INCLUDES PORTABLE CONTAINER, SUPPLY RESERVOIR, FLOWMETER, HUMIDIFIER, CONTENTS GAUGE, CANNULA OR MASK, TUBING AND REFILL ADAPTOR	1
E0439	STATIONARY LIQUID OXYGEN SYSTEM, RENTAL; INCLUDES CONTAINER, CONTENTS, REGULATOR, FLOWMETER, HUMIDIFIER, NEBULIZER, CANNULA OR MASK, & TUBING	1
E0440	STATIONARY LIQUID OXYGEN SYSTEM, PURCHASE; INCLUDES USE OF RESERVOIR, CONTENTS INDICATOR, REGULATOR, FLOWMETER, HUMIDIFIER, NEBULIZER, CANNULA OR MASK, AND TUBING	9999
E0441	STATIONARY OXYGEN CONTENTS, GASEOUS, 1 MONTH'S SUPPLY = 1 UNIT	1
E0442	STATIONARY OXYGEN CONTENTS, LIQUID, 1 MONTH'S SUPPLY = 1 UNIT	1
E0443	PORTABLE OXYGEN CONTENTS, GASEOUS, 1 MONTH'S SUPPLY = 1 UNIT	1
E0444	PORTABLE OXYGEN CONTENTS, LIQUID, 1 MONTH'S SUPPLY = 1 UNIT	9999
E0445	OXIMETER DEVICE FOR MEASURING BLOOD OXYGEN LEVELS NON-INVASIVELY	1
E0446	TOPICAL OXYGEN DELIVERY SYSTEM, NOT OTHERWISE SPECIFIED, INCLUDES ALL SUPPLIES AND ACCESSORIES	1
E0447	PORTABLE OXYGEN CONTENTS, LIQUID, 1 MONTH'S SUPPLY = 1 UNIT, PRESCRIBED AMOUNT AT REST OR NIGHTTIME EXCEEDS 4 LITERS PER MINUTE (LPM)	1
E0455	OXYGEN TENT, EXCLUDING CROUP OR PEDIATRIC TENTS	1
0457	CHEST SHELL (CUIRASS)	1
E 0459	CHEST WRAP	1
0462	ROCKING BED WITH OR WITHOUT SIDE RAILS	1
E0465	HOME VENTILATOR, ANY TYPE, USED WITH INVASIVE INTERFACE, (E.G., TRACHEOSTOMY TUBE)	2
E0466	HOME VENTILATOR, ANY TYPE, USED WITH NON-INVASIVE INTERFACE, (E.G., MASK, CHEST SHELL)	2
E0467	HOME VENTILATOR, MULTI-FUNCTION RESPIRATORY DEVICE, ALSO PERFORMS ANY OR ALL OF THE ADDITIONAL FUNCTIONS OF OXYGEN CONCENTRATION, DRUG	1

	NEBULIZATION, ASPIRATION, AND COUGH STIMULATION, INCLUDES ALL ACCESSORIES, COMPONENTS AND SUPPLIES FOR ALL FUNCTIONS	
E0470	RESPIRATORY ASSIST DEVICE, BI-LEVEL PRESSURE CAPABILITY, WITHOUT BACKUP RATE FEATURE, USED WITH NONINVASIVE INTERFACE, E.G., NASAL OR FACIAL MASK (INTERMITTENT ASSIST DEVICE WITH CONTINUOUS POSITIVE AIRWAY PRESSURE DEVICE)	1
E0471	RESPIRATORY ASSIST DEVICE, BI-LEVEL PRESSURE CAPABILITY, WITH BACK-UP RATE FEATURE, USED WITH NONINVASIVE INTERFACE, E.G., NASAL OR FACIAL MASK (INTERMITTENT ASSIST DEVICE WITH CONTINUOUS POSITIVE AIRWAY PRESSURE DEVICE)	1
E0472	RESPIRATORY ASSIST DEVICE, BI-LEVEL PRESSURE CAPABILITY, WITH BACKUP RATE FEATURE, USED WITH INVASIVE INTERFACE, E.G., TRACHEOSTOMY TUBE (INTERMITTENT ASSIST DEVICE WITH CONTINUOUS POSITIVE AIRWAY PRESSURE DEVICE)	1
E0480	PERCUSSOR, ELECTRIC OR PNEUMATIC, HOME MODEL	1
E0481	INTRAPULMONARY PERCUSSIVE VENTILATION SYSTEM AND RELATED ACCESSORIES	1
E0482	COUGH STIMULATING DEVICE, ALTERNATING POSITIVE AND NEGATIVE AIRWAY PRESSURE	1
E0483	HIGH FREQUENCY CHEST WALL OSCILLATION SYSTEM, INCLUDES ALL ACCESSORIES AND SUPPLIES, EACH	1
E0484	OSCILLATORY POSITIVE EXPIRATORY PRESSURE DEVICE, NON-ELECTRIC, ANY TYPE, EACH	1
E0485	ORAL DEVICE/APPLIANCE USED TO REDUCE UPPER AIRWAY COLLAPSIBILITY, ADJUSTABLE OR NON-ADJUSTABLE, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	1
E0486	ORAL DEVICE/APPLIANCE USED TO REDUCE UPPER AIRWAY COLLAPSIBILITY, ADJUSTABLE OR NON-ADJUSTABLE, CUSTOM FABRICATED, INCLUDES FITTING AND ADJUSTMENT	1
E0487	SPIROMETER, ELECTRONIC, INCLUDES ALL ACCESSORIES	1
E0500	IPPB MACHINE, ALL TYPES, WITH BUILT-IN NEBULIZATION; MANUAL OR AUTOMATIC VALVES; INTERNAL OR EXTERNAL POWER SOURCE	1
E0550	HUMIDIFIER, DURABLE FOR EXTENSIVE SUPPLEMENTAL HUMIDIFICATION DURING IPPB TREATMENTS OR OXYGEN DELIVERY	1
E0555	HUMIDIFIER, DURABLE, GLASS OR AUTOCLAVABLE PLASTIC BOTTLE TYPE, FOR USE WITH REGULATOR OR FLOWMETER	1
E0560	HUMIDIFIER, DURABLE FOR SUPPLEMENTAL HUMIDIFICATION DURING IPPB TREATMENT OR OXYGEN DELIVERY	2
E0561	HUMIDIFIER, NON-HEATED, USED WITH POSITIVE AIRWAY PRESSURE DEVICE	1
E0562	HUMIDIFIER, HEATED, USED WITH POSITIVE AIRWAY PRESSURE DEVICE	2
E0565	COMPRESSOR, AIR POWER SOURCE FOR EQUIPMENT WHICH IS NOT SELF- CONTAINED OR CYLINDER DRIVEN	1
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AEROSOL COMPRESSOR, ADJUSTABLE PRESSURE, LIGHT DUTY FOR INTERMITTENT USE	1
ULTRASONIC/ELECTRONIC AEROSOL GENERATOR WITH SMALL VOLUME NEBULIZER	1
NEBULIZER, ULTRASONIC, LARGE VOLUME	1
NEBULIZER, DURABLE, GLASS OR AUTOCLAVABLE PLASTIC, BOTTLE TYPE, FOR USE WITH REGULATOR OR FLOWMETER	1
NEBULIZER, WITH COMPRESSOR AND HEATER	1
RESPIRATORY SUCTION PUMP, HOME MODEL, PORTABLE OR STATIONARY, ELECTRIC	1
CONTINUOUS POSITIVE AIRWAY PRESSURE (CPAP) DEVICE	1
BREAST PUMP, MANUAL, ANY TYPE	1
BREAST PUMP, ELECTRIC (AC AND/OR DC), ANY TYPE	1
BREAST PUMP, HOSPITAL GRADE, ELECTRIC (AC AND / OR DC), ANY TYPE	1
VAPORIZER, ROOM TYPE	1
POSTURAL DRAINAGE BOARD	1
HOME BLOOD GLUCOSE MONITOR	1
PACEMAKER MONITOR, SELF-CONTAINED, (CHECKS BATTERY DEPLETION, INCLUDES AUDIBLE AND VISIBLE CHECK SYSTEMS)	1
PACEMAKER MONITOR, SELF CONTAINED, CHECKS BATTERY DEPLETION AND OTHER PACEMAKER COMPONENTS, INCLUDES DIGITAL/VISIBLE CHECK SYSTEMS	1
IMPLANTABLE CARDIAC EVENT RECORDER WITH MEMORY, ACTIVATOR AND PROGRAMMER	1
EXTERNAL DEFIBRILLATOR WITH INTEGRATED ELECTROCARDIOGRAM ANALYSIS	1
APNEA MONITOR, WITHOUT RECORDING FEATURE	1
APNEA MONITOR, WITH RECORDING FEATURE	1
SKIN PIERCING DEVICE FOR COLLECTION OF CAPILLARY BLOOD, LASER, EACH	1
SLING OR SEAT, PATIENT LIFT, CANVAS OR NYLON	1
SEAT LIFT MECHANISM, ELECTRIC, ANY TYPE	1
SEAT LIFT MECHANISM, NON-ELECTRIC, ANY TYPE	1
PATIENT LIFT, HYDRAULIC OR MECHANICAL, INCLUDES ANY SEAT, SLING, STRAP(S) OR PAD(S)	1
PATIENT LIFT, ELECTRIC WITH SEAT OR SLING	1
MULTIPOSITIONAL PATIENT SUPPORT SYSTEM, WITH INTEGRATED LIFT, PATIENT ACCESSIBLE CONTROLS	1
COMBINATION SIT TO STAND FRAME/TABLE SYSTEM, ANY SIZE INCLUDING PEDIATRIC, WITH SEAT LIFT FEATURE, WITH OR WITHOUT WHEELS	1
STANDING FRAME/TABLE SYSTEM, ONE POSITION (E.G., UPRIGHT, SUPINE OR PRONE STANDER), ANY SIZE INCLUDING PEDIATRIC, WITH OR WITHOUT WHEELS	1
	ULTRASONIC/ELECTRONIC AEROSOL GENERATOR WITH SMALL VOLUME NEBULIZER NEBULIZER, ULTRASONIC, LARGE VOLUME NEBULIZER, DURABLE, GLASS OR AUTOCLAVABLE PLASTIC, BOTTLE TYPE, FOR USE WITH REGULATOR OR FLOWMETER NEBULIZER, WITH COMPRESSOR AND HEATER RESPIRATORY SUCTION PUMP, HOME MODEL, PORTABLE OR STATIONARY, ELECTRIC CONTINUOUS POSITIVE AIRWAY PRESSURE (CPAP) DEVICE BREAST PUMP, MANUAL, ANY TYPE BREAST PUMP, HOSPITAL GRADE, ELECTRIC (AC AND / OR DC), ANY TYPE BREAST PUMP, HOSPITAL GRADE, ELECTRIC (AC AND / OR DC), ANY TYPE POSTURAL DRAINAGE BOARD HOME BLOOD GLUCOSE MONITOR PACEMAKER MONITOR, SELF-CONTAINED, (CHECKS BATTERY DEPLETION, INCLUDES AUDIBLE AND VISIBLE CHECK SYSTEMS) PACEMAKER MONITOR, SELF-CONTAINED, CHECKS BATTERY DEPLETION AND OTHER PACEMAKER MONITOR, SELF-CONTAINED, CHECKS BATTERY DEPLETION AND OTHER PACEMAKER COMPONENTS, INCLUDES DIGITAL/VISIBLE CHECK SYSTEMS IMPLANTABLE CARDIAC EVENT RECORDER WITH MEMORY, ACTIVATOR AND PROGRAMMER EXTERNAL DEFIBRILLATOR WITH INTEGRATED ELECTROCARDIOGRAM ANALYSIS APNEA MONITOR, WITHOUT RECORDING FEATURE SKIN PIERCING DEVICE FOR COLLECTION OF CAPILLARY BLOOD, LASER, EACH SLING OR SEAT, PATIENT LIFT, CANVAS OR NYLON SEAT LIFT MECHANISM, RECETRIC, ANY TYPE SEAT LIFT MECHANISM, RECETRIC, ANY TYPE SEAT LIFT MECHANISM, RECETRIC, ANY TYPE PATIENT LIFT, LELECTRIC WITH SEAT OR SLING MULTIPOSITIONAL PATIENT SUPPORT SYSTEM, WITH INTEGRATED LIFT, PATIENT ACCESSIBLE CONTROLS COMBINATION SIT TO STAND FRAME/TABLE SYSTEM, ANY SIZE INCLUDING PEDIATRIC, WITH SEAT LIFT FEATURE, WITH OR WITHOUT WHEELS STANDING FRAME/TABLE SYSTEM, ONE POSITION (E.G., UPRIGHT, SUPINE OR

E0639	PATIENT LIFT, MOVEABLE FROM ROOM TO ROOM WITH DISASSEMBLY AND REASSEMBLY, INCLUDES ALL COMPONENTS/ACCESSORIES	1
E0640	PATIENT LIFT, FIXED SYSTEM, INCLUDES ALL COMPONENTS/ACCESSORIES	1
E0641	STANDING FRAME/TABLE SYSTEM, MULTI-POSITION (E.G., THREE-WAY STANDER), ANY SIZE INCLUDING PEDIATRIC, WITH OR WITHOUT WHEELS	1
E0642	STANDING FRAME/TABLE SYSTEM, MOBILE (DYNAMIC STANDER), ANY SIZE INCLUDING PEDIATRIC	1
E0650	PNEUMATIC COMPRESSOR, NON-SEGMENTAL HOME MODEL	1
E0651	PNEUMATIC COMPRESSOR, SEGMENTAL HOME MODEL WITHOUT CALIBRATED GRADIENT PRESSURE	1
E0652	PNEUMATIC COMPRESSOR, SEGMENTAL HOME MODEL WITH CALIBRATED GRADIENT PRESSURE	1
E0655	NON-SEGMENTAL PNEUMATIC APPLIANCE FOR USE WITH PNEUMATIC COMPRESSOR, HALF ARM	2
E0656	SEGMENTAL PNEUMATIC APPLIANCE FOR USE WITH PNEUMATIC COMPRESSOR, TRUNK	1
E0657	SEGMENTAL PNEUMATIC APPLIANCE FOR USE WITH PNEUMATIC COMPRESSOR, CHEST	1
E0660	NON-SEGMENTAL PNEUMATIC APPLIANCE FOR USE WITH PNEUMATIC COMPRESSOR, FULL LEG	2
E0665	NON-SEGMENTAL PNEUMATIC APPLIANCE FOR USE WITH PNEUMATIC COMPRESSOR, FULL ARM	2
E0666	NON-SEGMENTAL PNEUMATIC APPLIANCE FOR USE WITH PNEUMATIC COMPRESSOR, HALF LEG	2
E0667	SEGMENTAL PNEUMATIC APPLIANCE FOR USE WITH PNEUMATIC COMPRESSOR, FULL LEG	2
E0668	SEGMENTAL PNEUMATIC APPLIANCE FOR USE WITH PNEUMATIC COMPRESSOR, FULL ARM	2
E0669	SEGMENTAL PNEUMATIC APPLIANCE FOR USE WITH PNEUMATIC COMPRESSOR, HALF LEG	2
E0670	SEGMENTAL PNEUMATIC APPLIANCE FOR USE WITH PNEUMATIC COMPRESSOR, INTEGRATED, 2 FULL LEGS AND TRUNK	1
E0671	SEGMENTAL GRADIENT PRESSURE PNEUMATIC APPLIANCE, FULL LEG	2
E0672	SEGMENTAL GRADIENT PRESSURE PNEUMATIC APPLIANCE, FULL ARM	2
E0673	SEGMENTAL GRADIENT PRESSURE PNEUMATIC APPLIANCE, HALF LEG	2
E0675	PNEUMATIC COMPRESSION DEVICE, HIGH PRESSURE, RAPID INFLATION/DEFLATION CYCLE, FOR ARTERIAL INSUFFICIENCY (UNILATERAL OR BILATERAL SYSTEM)	1
E0676	INTERMITTENT LIMB COMPRESSION DEVICE (INCLUDES ALL ACCESSORIES), NOT OTHERWISE SPECIFIED	1
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E0691	ULTRAVIOLET LIGHT THERAPY SYSTEM, INCLUDES BULBS/LAMPS, TIMER AND EYE	1
E0692	PROTECTION; TREATMENT AREA 2 SQUARE FEET OR LESS ULTRAVIOLET LIGHT THERAPY SYSTEM PANEL, INCLUDES BULBS/LAMPS, TIMER	1
E0693	AND EYE PROTECTION, 4 FOOT PANEL ULTRAVIOLET LIGHT THERAPY SYSTEM PANEL, INCLUDES BULBS/LAMPS, TIMER AND EYE PROTECTION, 6 FOOT PANEL	1
E0694	ULTRAVIOLET MULTIDIRECTIONAL LIGHT THERAPY SYSTEM IN 6 FOOT CABINET, INCLUDES BULBS/LAMPS, TIMER AND EYE PROTECTION	1
E0705	TRANSFER DEVICE, ANY TYPE, EACH	1
E0720	TRANSCUTANEOUS ELECTRICAL NERVE STIMULATION (TENS) DEVICE, TWO LEAD, LOCALIZED STIMULATION	1
E0730	TRANSCUTANEOUS ELECTRICAL NERVE STIMULATION (TENS) DEVICE, FOUR OR MORE LEADS, FOR MULTIPLE NERVE STIMULATION	1
E0731	FORM FITTING CONDUCTIVE GARMENT FOR DELIVERY OF TENS OR NMES (WITH CONDUCTIVE FIBERS SEPARATED FROM THE PATIENT'S SKIN BY LAYERS OF FABRIC)	1
E0740	NON-IMPLANTED PELVIC FLOOR ELECTRICAL STIMULATOR, COMPLETE SYSTEM	1
E0744	NEUROMUSCULAR STIMULATOR FOR SCOLIOSIS	1
E0745	NEUROMUSCULAR STIMULATOR, ELECTRONIC SHOCK UNIT	1
E0746	ELECTROMYOGRAPHY (EMG), BIOFEEDBACK DEVICE	1
E0747	OSTEOGENESIS STIMULATOR, ELECTRICAL, NON-INVASIVE, OTHER THAN SPINAL APPLICATIONS	1
E0748	OSTEOGENESIS STIMULATOR, ELECTRICAL, NON-INVASIVE, SPINAL APPLICATIONS	1
E0749	OSTEOGENESIS STIMULATOR, ELECTRICAL, SURGICALLY IMPLANTED	1
E0755	ELECTRONIC SALIVARY REFLEX STIMULATOR (INTRA-ORAL/NON-INVASIVE)	1
E0760	OSTEOGENESIS STIMULATOR, LOW INTENSITY ULTRASOUND, NON-INVASIVE	1
E0761	NON-THERMAL PULSED HIGH FREQUENCY RADIOWAVES, HIGH PEAK POWER ELECTROMAGNETIC ENERGY TREATMENT DEVICE	1
E0762	TRANSCUTANEOUS ELECTRICAL JOINT STIMULATION DEVICE SYSTEM, INCLUDES ALL ACCESSORIES	1
E0764	FUNCTIONAL NEUROMUSCULAR STIMULATION, TRANSCUTANEOUS STIMULATION OF SEQUENTIAL MUSCLE GROUPS OF AMBULATION WITH COMPUTER CONTROL, USED FOR WALKING BY SPINAL CORD INJURED, ENTIRE SYSTEM, AFTER COMPLETION OF TRAINING PROGRAM	1
E0765	FDA APPROVED NERVE STIMULATOR, WITH REPLACEABLE BATTERIES, FOR TREATMENT OF NAUSEA AND VOMITING	1
E0766	ELECTRICAL STIMULATION DEVICE USED FOR CANCER TREATMENT, INCLUDES ALL ACCESSORIES, ANY TYPE	1
E0770	FUNCTIONAL ELECTRICAL STIMULATOR, TRANSCUTANEOUS STIMULATION OF NERVE AND/OR MUSCLE GROUPS, ANY TYPE, COMPLETE SYSTEM, NOT OTHERWISE SPECIFIED	1

E0776	IV POLE	2
E0779	AMBULATORY INFUSION PUMP, MECHANICAL, REUSABLE, FOR INFUSION 8 HOURS OR GREATER	1
E0780	AMBULATORY INFUSION PUMP, MECHANICAL, REUSABLE, FOR INFUSION LESS THAN 8 HOURS	1
E0781	AMBULATORY INFUSION PUMP, SINGLE OR MULTIPLE CHANNELS, ELECTRIC OR BATTERY OPERATED, WITH ADMINISTRATIVE EQUIPMENT, WORN BY PATIENT	2
E0782	INFUSION PUMP, IMPLANTABLE, NON-PROGRAMMABLE (INCLUDES ALL COMPONENTS, E.G., PUMP, CATHETER, CONNECTORS, ETC.)	1
E0783	INFUSION PUMP SYSTEM, IMPLANTABLE, PROGRAMMABLE (INCLUDES ALL COMPONENTS, E.G., PUMP, CATHETER, CONNECTORS, ETC.)	1
E0784	EXTERNAL AMBULATORY INFUSION PUMP, INSULIN	1
E0785	IMPLANTABLE INTRASPINAL (EPIDURAL/INTRATHECAL) CATHETER USED WITH IMPLANTABLE INFUSION PUMP, REPLACEMENT	1
E0786	IMPLANTABLE PROGRAMMABLE INFUSION PUMP, REPLACEMENT (EXCLUDES IMPLANTABLE INTRASPINAL CATHETER)	1
E0787	EXTERNAL AMBULATORY INFUSION PUMP, INSULIN, DOSAGE RATE ADJUSTMENT USING THERAPEUTIC CONTINUOUS GLUCOSE SENSING	1
E0791	PARENTERAL INFUSION PUMP, STATIONARY, SINGLE OR MULTI-CHANNEL	1
E0830	AMBULATORY TRACTION DEVICE, ALL TYPES, EACH	1
E0840	TRACTION FRAME, ATTACHED TO HEADBOARD, CERVICAL TRACTION	1
E0849	TRACTION EQUIPMENT, CERVICAL, FREE-STANDING STAND/FRAME, PNEUMATIC, APPLYING TRACTION FORCE TO OTHER THAN MANDIBLE	1
E0850	TRACTION STAND, FREE STANDING, CERVICAL TRACTION	1
E0855	CERVICAL TRACTION EQUIPMENT NOT REQUIRING ADDITIONAL STAND OR FRAME	1
E0856	CERVICAL TRACTION DEVICE, WITH INFLATABLE AIR BLADDER(S)	1
E0860	TRACTION EQUIPMENT, OVERDOOR, CERVICAL	1
E0870	TRACTION FRAME, ATTACHED TO FOOTBOARD, EXTREMITY TRACTION, (E.G., BUCK'S)	1
E0880	TRACTION STAND, FREE STANDING, EXTREMITY TRACTION	1
E0890	TRACTION FRAME, ATTACHED TO FOOTBOARD, PELVIC TRACTION	1
E0900	TRACTION STAND, FREE STANDING, PELVIC TRACTION, (E.G., BUCK'S)	1
E0910	TRAPEZE BARS, A/K/A PATIENT HELPER, ATTACHED TO BED, WITH GRAB BAR	2
E0911	TRAPEZE BAR, HEAVY DUTY, FOR PATIENT WEIGHT CAPACITY GREATER THAN 250 POUNDS, ATTACHED TO BED, WITH GRAB BAR	1
E0912	TRAPEZE BAR, HEAVY DUTY, FOR PATIENT WEIGHT CAPACITY GREATER THAN 250 POUNDS, FREE STANDING, COMPLETE WITH GRAB BAR	1
E0920	FRACTURE FRAME, ATTACHED TO BED, INCLUDES WEIGHTS	1

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E0930	FRACTURE FRAME, FREE STANDING, INCLUDES WEIGHTS	1
E0935	CONTINUOUS PASSIVE MOTION EXERCISE DEVICE FOR USE ON KNEE ONLY	2
E0936	CONTINUOUS PASSIVE MOTION EXERCISE DEVICE FOR USE OTHER THAN KNEE	1
E0940	TRAPEZE BAR, FREE STANDING, COMPLETE WITH GRAB BAR	2
E0941	GRAVITY ASSISTED TRACTION DEVICE, ANY TYPE	1
E0942	CERVICAL HEAD HARNESS/HALTER	1
E0944	PELVIC BELT/HARNESS/BOOT	1
E0945	EXTREMITY BELT/HARNESS	2
E0946	FRACTURE, FRAME, DUAL WITH CROSS BARS, ATTACHED TO BED, (E.G., BALKEN, 4 POSTER)	1
E0947	FRACTURE FRAME, ATTACHMENTS FOR COMPLEX PELVIC TRACTION	1
E0948	FRACTURE FRAME, ATTACHMENTS FOR COMPLEX CERVICAL TRACTION	1
E0950	WHEELCHAIR ACCESSORY, TRAY, EACH	1
E0951	HEEL LOOP/HOLDER, ANY TYPE, WITH OR WITHOUT ANKLE STRAP, EACH	2
E0952	TOE LOOP/HOLDER, ANY TYPE, EACH	2
E0953	WHEELCHAIR ACCESSORY, LATERAL THIGH OR KNEE SUPPORT, ANY TYPE INCLUDING FIXED MOUNTING HARDWARE, EACH	2
E0954	WHEELCHAIR ACCESSORY, FOOT BOX, ANY TYPE, INCLUDES ATTACHMENT AND MOUNTING HARDWARE, EACH FOOT	2
E0955	WHEELCHAIR ACCESSORY, HEADREST, CUSHIONED, ANY TYPE, INCLUDING FIXED MOUNTING HARDWARE, EACH	1
E0956	WHEELCHAIR ACCESSORY, LATERAL TRUNK OR HIP SUPPORT, ANY TYPE, INCLUDING FIXED MOUNTING HARDWARE, EACH	4
E0957	WHEELCHAIR ACCESSORY, MEDIAL THIGH SUPPORT, ANY TYPE, INCLUDING FIXED MOUNTING HARDWARE, EACH	2
E0958	MANUAL WHEELCHAIR ACCESSORY, ONE-ARM DRIVE ATTACHMENT, EACH	1
E0959	MANUAL WHEELCHAIR ACCESSORY, ADAPTER FOR AMPUTEE, EACH	1
E0960	WHEELCHAIR ACCESSORY, SHOULDER HARNESS/STRAPS OR CHEST STRAP, INCLUDING ANY TYPE MOUNTING HARDWARE	2
E0961	MANUAL WHEELCHAIR ACCESSORY, WHEEL LOCK BRAKE EXTENSION (HANDLE), EACH	2
E0966	MANUAL WHEELCHAIR ACCESSORY, HEADREST EXTENSION, EACH	1
E0967	MANUAL WHEELCHAIR ACCESSORY, HAND RIM WITH PROJECTIONS, ANY TYPE, REPLACEMENT ONLY, EACH	2
E0968	COMMODE SEAT, WHEELCHAIR	1
E0969	NARROWING DEVICE, WHEELCHAIR	1
E0970	NO. 2 FOOTPLATES, EXCEPT FOR ELEVATING LEG REST	2
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E0973	WHEELCHAIR ACCESSORY, ADJUSTABLE HEIGHT, DETACHABLE ARMREST, COMPLETE ASSEMBLY, EACH	2
E0974	MANUAL WHEELCHAIR ACCESSORY, ANTI-ROLLBACK DEVICE, EACH	2
E0978	WHEELCHAIR ACCESSORY, POSITIONING BELT/SAFETY BELT/PELVIC STRAP, EACH	1
E0980	SAFETY VEST, WHEELCHAIR	1
E0981	WHEELCHAIR ACCESSORY, SEAT UPHOLSTERY, REPLACEMENT ONLY, EACH	1
E0982	WHEELCHAIR ACCESSORY, BACK UPHOLSTERY, REPLACEMENT ONLY, EACH	1
E0983	MANUAL WHEELCHAIR ACCESSORY, POWER ADD-ON TO CONVERT MANUAL WHEELCHAIR TO MOTORIZED WHEELCHAIR, JOYSTICK CONTROL	1
E0984	MANUAL WHEELCHAIR ACCESSORY, POWER ADD-ON TO CONVERT MANUAL WHEELCHAIR TO MOTORIZED WHEELCHAIR, TILLER CONTROL	1
E0985	WHEELCHAIR ACCESSORY, SEAT LIFT MECHANISM	1
E0986	MANUAL WHEELCHAIR ACCESSORY, PUSH-RIM ACTIVATED POWER ASSIST SYSTEM	1
E0988	MANUAL WHEELCHAIR ACCESSORY, LEVER-ACTIVATED, WHEEL DRIVE, PAIR	1
E0990	WHEELCHAIR ACCESSORY, ELEVATING LEG REST, COMPLETE ASSEMBLY, EACH	2
E0992	MANUAL WHEELCHAIR ACCESSORY, SOLID SEAT INSERT	1
E0994	ARM REST, EACH	2
E0995	WHEELCHAIR ACCESSORY, CALF REST/PAD, REPLACEMENT ONLY, EACH	2
E1002	WHEELCHAIR ACCESSORY, POWER SEATING SYSTEM, TILT ONLY	1
E1003	WHEELCHAIR ACCESSORY, POWER SEATING SYSTEM, RECLINE ONLY, WITHOUT SHEAR REDUCTION	1
E1004	WHEELCHAIR ACCESSORY, POWER SEATING SYSTEM, RECLINE ONLY, WITH MECHANICAL SHEAR REDUCTION	1
E1005	WHEELCHAIR ACCESSORY, POWER SEATING SYSTEM, RECLINE ONLY, WITH POWER SHEAR REDUCTION	1
E1006	WHEELCHAIR ACCESSORY, POWER SEATING SYSTEM, COMBINATION TILT AND RECLINE, WITHOUT SHEAR REDUCTION	1
E1007	WHEELCHAIR ACCESSORY, POWER SEATING SYSTEM, COMBINATION TILT AND RECLINE, WITH MECHANICAL SHEAR REDUCTION	1
E1008	WHEELCHAIR ACCESSORY, POWER SEATING SYSTEM, COMBINATION TILT AND RECLINE, WITH POWER SHEAR REDUCTION	1
E1009	WHEELCHAIR ACCESSORY, ADDITION TO POWER SEATING SYSTEM, MECHANICALLY LINKED LEG ELEVATION SYSTEM, INCLUDING PUSHROD AND LEG REST, EACH	2
E1010	WHEELCHAIR ACCESSORY, ADDITION TO POWER SEATING SYSTEM, POWER LEG ELEVATION SYSTEM, INCLUDING LEG REST, PAIR	1
E1011	MODIFICATION TO PEDIATRIC SIZE WHEELCHAIR, WIDTH ADJUSTMENT PACKAGE (NOT TO BE DISPENSED WITH INITIAL CHAIR)	1
E1012	WHEELCHAIR ACCESSORY, ADDITION TO POWER SEATING SYSTEM, CENTER MOUNT POWER ELEVATING LEG REST/PLATFORM, COMPLETE SYSTEM, ANY TYPE, EACH	1

E1014	RECLINING BACK, ADDITION TO PEDIATRIC SIZE WHEELCHAIR	1
E1015	SHOCK ABSORBER FOR MANUAL WHEELCHAIR, EACH	2
E1016	SHOCK ABSORBER FOR POWER WHEELCHAIR, EACH	2
E1017	HEAVY DUTY SHOCK ABSORBER FOR HEAVY DUTY OR EXTRA HEAVY DUTY MANUAL WHEELCHAIR, EACH	2
E1018	HEAVY DUTY SHOCK ABSORBER FOR HEAVY DUTY OR EXTRA HEAVY DUTY POWER WHEELCHAIR, EACH	2
E1020	RESIDUAL LIMB SUPPORT SYSTEM FOR WHEELCHAIR, ANY TYPE	2
E1028	WHEELCHAIR ACCESSORY, MANUAL SWINGAWAY, RETRACTABLE OR REMOVABLE MOUNTING HARDWARE FOR JOYSTICK, OTHER CONTROL INTERFACE OR POSITIONING ACCESSORY	4
E1029	WHEELCHAIR ACCESSORY, VENTILATOR TRAY, FIXED	1
E1030	WHEELCHAIR ACCESSORY, VENTILATOR TRAY, GIMBALED	1
E1031	ROLLABOUT CHAIR, ANY AND ALL TYPES WITH CASTERS 5 OR GREATER	1
E1035	MULTI-POSITIONAL PATIENT TRANSFER SYSTEM, WITH INTEGRATED SEAT, OPERATED BY CARE GIVER, PATIENT WEIGHT CAPACITY UP TO AND INCLUDING 300 LBS	1
E1036	MULTI-POSITIONAL PATIENT TRANSFER SYSTEM, EXTRA-WIDE, WITH INTEGRATED SEAT, OPERATED BY CAREGIVER, PATIENT WEIGHT CAPACITY GREATER THAN 300 LBS	1
E1037	TRANSPORT CHAIR, PEDIATRIC SIZE	1
E1038	TRANSPORT CHAIR, ADULT SIZE, PATIENT WEIGHT CAPACITY UP TO AND INCLUDING 300 POUNDS	1
E1039	TRANSPORT CHAIR, ADULT SIZE, HEAVY DUTY, PATIENT WEIGHT CAPACITY GREATER THAN 300 POUNDS	1
E1050	FULLY-RECLINING WHEELCHAIR, FIXED FULL LENGTH ARMS, SWING AWAY DETACHABLE ELEVATING LEG RESTS	1
E1060	FULLY-RECLINING WHEELCHAIR, DETACHABLE ARMS, DESK OR FULL LENGTH, SWING AWAY DETACHABLE ELEVATING LEGRESTS	1
E1070	FULLY-RECLINING WHEELCHAIR, DETACHABLE ARMS (DESK OR FULL LENGTH) SWING AWAY DETACHABLE FOOTREST	1
E1083	HEMI-WHEELCHAIR, FIXED FULL LENGTH ARMS, SWING AWAY DETACHABLE ELEVATING LEG REST	1
E1084	HEMI-WHEELCHAIR, DETACHABLE ARMS DESK OR FULL LENGTH ARMS, SWING AWAY DETACHABLE ELEVATING LEG RESTS	1
E1085	HEMI-WHEELCHAIR, FIXED FULL LENGTH ARMS, SWING AWAY DETACHABLE FOOT RESTS	1
E1086	HEMI-WHEELCHAIR DETACHABLE ARMS DESK OR FULL LENGTH, SWING AWAY DETACHABLE FOOTRESTS	1

E1087	HIGH STRENGTH LIGHTWEIGHT WHEELCHAIR, FIXED FULL LENGTH ARMS, SWING	1
E1088	AWAY DETACHABLE ELEVATING LEG RESTS HIGH STRENGTH LIGHTWEIGHT WHEELCHAIR, DETACHABLE ARMS DESK OR FULL LENGTH, SWING AWAY DETACHABLE ELEVATING LEG RESTS	1
E1089	HIGH STRENGTH LIGHTWEIGHT WHEELCHAIR, FIXED LENGTH ARMS, SWING AWAY DETACHABLE FOOTREST	1
E1090	HIGH STRENGTH LIGHTWEIGHT WHEELCHAIR, DETACHABLE ARMS DESK OR FULL LENGTH, SWING AWAY DETACHABLE FOOT RESTS	1
E1092	WIDE HEAVY DUTY WHEEL CHAIR, DETACHABLE ARMS (DESK OR FULL LENGTH), SWING AWAY DETACHABLE ELEVATING LEG RESTS	1
E1093	WIDE HEAVY DUTY WHEELCHAIR, DETACHABLE ARMS DESK OR FULL LENGTH ARMS, SWING AWAY DETACHABLE FOOTRESTS	1
E1100	SEMI-RECLINING WHEELCHAIR, FIXED FULL LENGTH ARMS, SWING AWAY DETACHABLE ELEVATING LEG RESTS	1
E1110	SEMI-RECLINING WHEELCHAIR, DETACHABLE ARMS (DESK OR FULL LENGTH) ELEVATING LEG REST	1
E1130	STANDARD WHEELCHAIR, FIXED FULL LENGTH ARMS, FIXED OR SWING AWAY DETACHABLE FOOTRESTS	1
E1140	WHEELCHAIR, DETACHABLE ARMS, DESK OR FULL LENGTH, SWING AWAY DETACHABLE FOOTRESTS	1
E1150	WHEELCHAIR, DETACHABLE ARMS, DESK OR FULL LENGTH SWING AWAY DETACHABLE ELEVATING LEGRESTS	1
E1160	WHEELCHAIR, FIXED FULL LENGTH ARMS, SWING AWAY DETACHABLE ELEVATING LEGRESTS	1
E1161	MANUAL ADULT SIZE WHEELCHAIR, INCLUDES TILT IN SPACE	1
E1170	AMPUTEE WHEELCHAIR, FIXED FULL LENGTH ARMS, SWING AWAY DETACHABLE ELEVATING LEGRESTS	1
E1171	AMPUTEE WHEELCHAIR, FIXED FULL LENGTH ARMS, WITHOUT FOOTRESTS OR LEGREST	1
E1172	AMPUTEE WHEELCHAIR, DETACHABLE ARMS (DESK OR FULL LENGTH) WITHOUT FOOTRESTS OR LEGREST	1
E1180	AMPUTEE WHEELCHAIR, DETACHABLE ARMS (DESK OR FULL LENGTH) SWING AWAY DETACHABLE FOOTRESTS	1
E1190	AMPUTEE WHEELCHAIR, DETACHABLE ARMS (DESK OR FULL LENGTH) SWING AWAY DETACHABLE ELEVATING LEGRESTS	1
E1195	HEAVY DUTY WHEELCHAIR, FIXED FULL LENGTH ARMS, SWING AWAY DETACHABLE ELEVATING LEGRESTS	1
E1200	AMPUTEE WHEELCHAIR, FIXED FULL LENGTH ARMS, SWING AWAY DETACHABLE FOOTREST	1
E1220	WHEELCHAIR; SPECIALLY SIZED OR CONSTRUCTED, (INDICATE BRAND NAME, MODEL NUMBER, IF ANY) AND JUSTIFICATION	1

E1221	WHEELCHAIR WITH FIXED ARM, FOOTRESTS	1
E1222	WHEELCHAIR WITH FIXED ARM, ELEVATING LEGRESTS	1
E1223	WHEELCHAIR WITH DETACHABLE ARMS, FOOTRESTS	1
E1224	WHEELCHAIR WITH DETACHABLE ARMS, ELEVATING LEGRESTS	1
E1225	WHEELCHAIR ACCESSORY, MANUAL SEMI-RECLINING BACK, (RECLINE GREATER THAN 15 DEGREES, BUT LESS THAN 80 DEGREES), EACH	1
E1226	WHEELCHAIR ACCESSORY, MANUAL FULLY RECLINING BACK, (RECLINE GREATER THAN 80 DEGREES), EACH	1
E1227	SPECIAL HEIGHT ARMS FOR WHEELCHAIR	1
E1228	SPECIAL BACK HEIGHT FOR WHEELCHAIR	1
E1229	WHEELCHAIR, PEDIATRIC SIZE, NOT OTHERWISE SPECIFIED	1
E1230	POWER OPERATED VEHICLE (THREE OR FOUR WHEEL NONHIGHWAY) SPECIFY BRAND NAME AND MODEL NUMBER	1
E1231	WHEELCHAIR, PEDIATRIC SIZE, TILT-IN-SPACE, RIGID, ADJUSTABLE, WITH SEATING SYSTEM	1
E1232	WHEELCHAIR, PEDIATRIC SIZE, TILT-IN-SPACE, FOLDING, ADJUSTABLE, WITH SEATING SYSTEM	1
E1233	WHEELCHAIR, PEDIATRIC SIZE, TILT-IN-SPACE, RIGID, ADJUSTABLE, WITHOUT SEATING SYSTEM	1
E1234	WHEELCHAIR, PEDIATRIC SIZE, TILT-IN-SPACE, FOLDING, ADJUSTABLE, WITHOUT SEATING SYSTEM	1
E1235	WHEELCHAIR, PEDIATRIC SIZE, RIGID, ADJUSTABLE, WITH SEATING SYSTEM	1
E1236	WHEELCHAIR, PEDIATRIC SIZE, FOLDING, ADJUSTABLE, WITH SEATING SYSTEM	1
E1237	WHEELCHAIR, PEDIATRIC SIZE, RIGID, ADJUSTABLE, WITHOUT SEATING SYSTEM	1
E1238	WHEELCHAIR, PEDIATRIC SIZE, FOLDING, ADJUSTABLE, WITHOUT SEATING SYSTEM	1
E1239	POWER WHEELCHAIR, PEDIATRIC SIZE, NOT OTHERWISE SPECIFIED	1
E1240	LIGHTWEIGHT WHEELCHAIR, DETACHABLE ARMS, (DESK OR FULL LENGTH) SWING AWAY DETACHABLE, ELEVATING LEGREST	1
E1250	LIGHTWEIGHT WHEELCHAIR, FIXED FULL LENGTH ARMS, SWING AWAY DETACHABLE FOOTREST	1
E1260	LIGHTWEIGHT WHEELCHAIR, DETACHABLE ARMS (DESK OR FULL LENGTH) SWING AWAY DETACHABLE FOOTREST	1
E1270	LIGHTWEIGHT WHEELCHAIR, FIXED FULL LENGTH ARMS, SWING AWAY DETACHABLE ELEVATING LEGRESTS	1
E1280	HEAVY DUTY WHEELCHAIR, DETACHABLE ARMS (DESK OR FULL LENGTH) ELEVATING LEGRESTS	1
E1285	HEAVY DUTY WHEELCHAIR, FIXED FULL LENGTH ARMS, SWING AWAY DETACHABLE FOOTREST	1

E1290	HEAVY DUTY WHEELCHAIR, DETACHABLE ARMS (DESK OR FULL LENGTH) SWING AWAY DETACHABLE FOOTREST	1
E1295	HEAVY DUTY WHEELCHAIR, FIXED FULL LENGTH ARMS, ELEVATING LEGREST	1
E1296	SPECIAL WHEELCHAIR SEAT HEIGHT FROM FLOOR	1
E1297	SPECIAL WHEELCHAIR SEAT DEPTH, BY UPHOLSTERY	1
E1298	SPECIAL WHEELCHAIR SEAT DEPTH AND/OR WIDTH, BY CONSTRUCTION	1
E1300	WHIRLPOOL, PORTABLE (OVERTUB TYPE)	1
E1310	WHIRLPOOL, NON-PORTABLE (BUILT-IN TYPE)	1
E1352	OXYGEN ACCESSORY, FLOW REGULATOR CAPABLE OF POSITIVE INSPIRATORY PRESSURE	1
E1353	REGULATOR	1
E1354	OXYGEN ACCESSORY, WHEELED CART FOR PORTABLE CYLINDER OR PORTABLE CONCENTRATOR, ANY TYPE, REPLACEMENT ONLY, EACH	1
E1355	STAND/RACK	1
E1356	OXYGEN ACCESSORY, BATTERY PACK/CARTRIDGE FOR PORTABLE CONCENTRATOR, ANY TYPE, REPLACEMENT ONLY, EACH	1
E1357	OXYGEN ACCESSORY, BATTERY CHARGER FOR PORTABLE CONCENTRATOR, ANY TYPE, REPLACEMENT ONLY, EACH	1
E1358	OXYGEN ACCESSORY, DC POWER ADAPTER FOR PORTABLE CONCENTRATOR, ANY TYPE, REPLACEMENT ONLY, EACH	1
E1372	IMMERSION EXTERNAL HEATER FOR NEBULIZER	1
E1390	OXYGEN CONCENTRATOR, SINGLE DELIVERY PORT, CAPABLE OF DELIVERING 85 PERCENT OR GREATER OXYGEN CONCENTRATION AT THE PRESCRIBED FLOW RATE	1
E1391	OXYGEN CONCENTRATOR, DUAL DELIVERY PORT, CAPABLE OF DELIVERING 85 PERCENT OR GREATER OXYGEN CONCENTRATION AT THE PRESCRIBED FLOW RATE, EACH	1
E1392	PORTABLE OXYGEN CONCENTRATOR, RENTAL	1
E1399	DURABLE MEDICAL EQUIPMENT, MISCELLANEOUS	1
E1405	OXYGEN AND WATER VAPOR ENRICHING SYSTEM WITH HEATED DELIVERY	1
E1406	OXYGEN AND WATER VAPOR ENRICHING SYSTEM WITHOUT HEATED DELIVERY	1
E1500	CENTRIFUGE, FOR DIALYSIS	1
E1510	KIDNEY, DIALYSATE DELIVERY SYST KIDNEY MACHINE, PUMP RECIRCULATING, AIR REMOVAL SYST, FLOWRATE METER, POWER OFF, HEATER AND TEMPERATURE CONTROL WITH ALARM, I.V. POLES, PRESSURE GAUGE, CONCENTRATE CONTAINER	1
E1520	HEPARIN INFUSION PUMP FOR HEMODIALYSIS	1
E1530	AIR BUBBLE DETECTOR FOR HEMODIALYSIS, EACH, REPLACEMENT	1
E1540	PRESSURE ALARM FOR HEMODIALYSIS, EACH, REPLACEMENT	1
E1550	BATH CONDUCTIVITY METER FOR HEMODIALYSIS, EACH	1

E1560	BLOOD LEAK DETECTOR FOR HEMODIALYSIS, EACH, REPLACEMENT	1
E1570	ADJUSTABLE CHAIR, FOR ESRD PATIENTS	1
E1580	UNIPUNCTURE CONTROL SYSTEM FOR HEMODIALYSIS	1
E1590	HEMODIALYSIS MACHINE	1
E1592	AUTOMATIC INTERMITTENT PERITONEAL DIALYSIS SYSTEM	1
E1594	CYCLER DIALYSIS MACHINE FOR PERITONEAL DIALYSIS	1
E1600	DELIVERY AND/OR INSTALLATION CHARGES FOR HEMODIALYSIS EQUIPMENT	1
E1610	REVERSE OSMOSIS WATER PURIFICATION SYSTEM, FOR HEMODIALYSIS	1
E1615	DEIONIZER WATER PURIFICATION SYSTEM, FOR HEMODIALYSIS	1
E1620	BLOOD PUMP FOR HEMODIALYSIS, REPLACEMENT	1
E1625	WATER SOFTENING SYSTEM, FOR HEMODIALYSIS	1
E1630	RECIPROCATING PERITONEAL DIALYSIS SYSTEM	1
E1635	COMPACT (PORTABLE) TRAVEL HEMODIALYZER SYSTEM	1
E1639	SCALE, EACH	1
E1699	DIALYSIS EQUIPMENT, NOT OTHERWISE SPECIFIED	1
E1700	JAW MOTION REHABILITATION SYSTEM	1
E1701	REPLACEMENT CUSHIONS FOR JAW MOTION REHABILITATION SYSTEM, PKG. OF 6	3
E1702	REPLACEMENT MEASURING SCALES FOR JAW MOTION REHABILITATION SYSTEM, PKG. OF 200	1
E1800	DYNAMIC ADJUSTABLE ELBOW EXTENSION/FLEXION DEVICE, INCLUDES SOFT INTERFACE MATERIAL	2
E1801	STATIC PROGRESSIVE STRETCH ELBOW DEVICE, EXTENSION AND/OR FLEXION, WITH OR WITHOUT RANGE OF MOTION ADJUSTMENT, INCLUDES ALL COMPONENTS AND ACCESSORIES	1
E1802	DYNAMIC ADJUSTABLE FOREARM PRONATION/SUPINATION DEVICE, INCLUDES SOFT INTERFACE MATERIAL	2
E1805	DYNAMIC ADJUSTABLE WRIST EXTENSION / FLEXION DEVICE, INCLUDES SOFT INTERFACE MATERIAL	2
E1806	STATIC PROGRESSIVE STRETCH WRIST DEVICE, FLEXION AND/OR EXTENSION, WITH OR WITHOUT RANGE OF MOTION ADJUSTMENT, INCLUDES ALL COMPONENTS AND ACCESSORIES	1
E1810	DYNAMIC ADJUSTABLE KNEE EXTENSION / FLEXION DEVICE, INCLUDES SOFT INTERFACE MATERIAL	2
E1811	STATIC PROGRESSIVE STRETCH KNEE DEVICE, EXTENSION AND/OR FLEXION, WITH OR WITHOUT RANGE OF MOTION ADJUSTMENT, INCLUDES ALL COMPONENTS AND ACCESSORIES	1
E1812	DYNAMIC KNEE, EXTENSION/FLEXION DEVICE WITH ACTIVE RESISTANCE CONTROL	2

E1815	DYNAMIC ADJUSTABLE ANKLE EXTENSION/FLEXION DEVICE, INCLUDES SOFT INTERFACE MATERIAL	2
E1816	STATIC PROGRESSIVE STRETCH ANKLE DEVICE, FLEXION AND/OR EXTENSION, WITH OR WITHOUT RANGE OF MOTION ADJUSTMENT, INCLUDES ALL COMPONENTS AND ACCESSORIES	1
E1818	STATIC PROGRESSIVE STRETCH FOREARM PRONATION / SUPINATION DEVICE, WITH OR WITHOUT RANGE OF MOTION ADJUSTMENT, INCLUDES ALL COMPONENTS AND ACCESSORIES	1
E1820	REPLACEMENT SOFT INTERFACE MATERIAL, DYNAMIC ADJUSTABLE EXTENSION/FLEXION DEVICE	2
E1821	REPLACEMENT SOFT INTERFACE MATERIAL/CUFFS FOR BI-DIRECTIONAL STATIC PROGRESSIVE STRETCH DEVICE	2
E1825	DYNAMIC ADJUSTABLE FINGER EXTENSION/FLEXION DEVICE, INCLUDES SOFT INTERFACE MATERIAL	3
E1830	DYNAMIC ADJUSTABLE TOE EXTENSION/FLEXION DEVICE, INCLUDES SOFT INTERFACE MATERIAL	2
E1831	STATIC PROGRESSIVE STRETCH TOE DEVICE, EXTENSION AND/OR FLEXION, WITH OR WITHOUT RANGE OF MOTION ADJUSTMENT, INCLUDES ALL COMPONENTS AND ACCESSORIES	2
E1840	DYNAMIC ADJUSTABLE SHOULDER FLEXION / ABDUCTION / ROTATION DEVICE, INCLUDES SOFT INTERFACE MATERIAL	2
E1841	STATIC PROGRESSIVE STRETCH SHOULDER DEVICE, WITH OR WITHOUT RANGE OF MOTION ADJUSTMENT, INCLUDES ALL COMPONENTS AND ACCESSORIES	2
E1902	COMMUNICATION BOARD, NON-ELECTRONIC AUGMENTATIVE OR ALTERNATIVE COMMUNICATION DEVICE	1
E2000	GASTRIC SUCTION PUMP, HOME MODEL, PORTABLE OR STATIONARY, ELECTRIC	1
E2100	BLOOD GLUCOSE MONITOR WITH INTEGRATED VOICE SYNTHESIZER	1
E2101	BLOOD GLUCOSE MONITOR WITH INTEGRATED LANCING/BLOOD SAMPLE	1
E2120	PULSE GENERATOR SYSTEM FOR TYMPANIC TREATMENT OF INNER EAR ENDOLYMPHATIC FLUID	1
E2201	MANUAL WHEELCHAIR ACCESSORY, NONSTANDARD SEAT FRAME, WIDTH GREATER THAN OR EQUAL TO 20 INCHES AND LESS THAN 24 INCHES	1
E2202	MANUAL WHEELCHAIR ACCESSORY, NONSTANDARD SEAT FRAME WIDTH, 24-27 INCHES	1
E2203	MANUAL WHEELCHAIR ACCESSORY, NONSTANDARD SEAT FRAME DEPTH, 20 TO LESS THAN 22 INCHES	1
E2204	MANUAL WHEELCHAIR ACCESSORY, NONSTANDARD SEAT FRAME DEPTH, 22 TO 25 INCHES	1
E2205	MANUAL WHEELCHAIR ACCESSORY, HANDRIM WITHOUT PROJECTIONS (INCLUDES ERGONOMIC OR CONTOURED), ANY TYPE, REPLACEMENT ONLY, EACH	2

MANUAL WHEELCHAIR ACCESSORY, WHEEL LOCK ASSEMBLY, COMPLETE, REPLACEMENT ONLY, EACH	2
WHEELCHAIR ACCESSORY, CRUTCH AND CANE HOLDER, EACH	2
WHEELCHAIR ACCESSORY, CYLINDER TANK CARRIER, EACH	1
ACCESSORY, ARM TROUGH, WITH OR WITHOUT HAND SUPPORT, EACH	2
MANUAL WHEELCHAIR ACCESSORY, PNEUMATIC PROPULSION TIRE, ANY SIZE, EACH	2
MANUAL WHEELCHAIR ACCESSORY, TUBE FOR PNEUMATIC PROPULSION TIRE, ANY SIZE, EACH	2
MANUAL WHEELCHAIR ACCESSORY, INSERT FOR PNEUMATIC PROPULSION TIRE (REMOVABLE), ANY TYPE, ANY SIZE, EACH	2
MANUAL WHEELCHAIR ACCESSORY, PNEUMATIC CASTER TIRE, ANY SIZE, EACH	2
MANUAL WHEELCHAIR ACCESSORY, TUBE FOR PNEUMATIC CASTER TIRE, ANY SIZE, EACH	2
MANUAL WHEELCHAIR ACCESSORY, FOAM FILLED PROPULSION TIRE, ANY SIZE, EACH	2
MANUAL WHEELCHAIR ACCESSORY, FOAM FILLED CASTER TIRE, ANY SIZE, EACH	2
MANUAL WHEELCHAIR ACCESSORY, FOAM PROPULSION TIRE, ANY SIZE, EACH	2
MANUAL WHEELCHAIR ACCESSORY, FOAM CASTER TIRE, ANY SIZE, EACH	2
MANUAL WHEELCHAIR ACCESSORY, SOLID (RUBBER/PLASTIC) PROPULSION TIRE, ANY SIZE, REPLACEMENT ONLY, EACH	2
MANUAL WHEELCHAIR ACCESSORY, SOLID (RUBBER/PLASTIC) CASTER TIRE (REMOVABLE), ANY SIZE, REPLACEMENT ONLY, EACH	2
MANUAL WHEELCHAIR ACCESSORY, SOLID (RUBBER/PLASTIC) CASTER TIRE WITH INTEGRATED WHEEL, ANY SIZE, REPLACEMENT ONLY, EACH	2
MANUAL WHEELCHAIR ACCESSORY, PROPULSION WHEEL EXCLUDES TIRE, ANY SIZE, REPLACEMENT ONLY, EACH	2
MANUAL WHEELCHAIR ACCESSORY, CASTER WHEEL EXCLUDES TIRE, ANY SIZE, REPLACEMENT ONLY, EACH	2
MANUAL WHEELCHAIR ACCESSORY, CASTER FORK, ANY SIZE, REPLACEMENT ONLY, EACH	4
MANUAL WHEELCHAIR ACCESSORY, GEAR REDUCTION DRIVE WHEEL, EACH	2
MANUAL WHEELCHAIR ACCESSORY, WHEEL BRAKING SYSTEM AND LOCK, COMPLETE, EACH	2
MANUAL WHEELCHAIR ACCESSORY, MANUAL STANDING SYSTEM	1
MANUAL WHEELCHAIR ACCESSORY, SOLID SEAT SUPPORT BASE (REPLACES SLING SEAT), INCLUDES ANY TYPE MOUNTING HARDWARE	1
BACK, PLANAR, FOR PEDIATRIC SIZE WHEELCHAIR INCLUDING FIXED ATTACHING HARDWARE	1
	REPLACEMENT ONLY, EACH WHEELCHAIR ACCESSORY, CRUTCH AND CANE HOLDER, EACH WHEELCHAIR ACCESSORY, CYLINDER TANK CARRIER, EACH ACCESSORY, ARM TROUGH, WITH OR WITHOUT HAND SUPPORT, EACH MANUAL WHEELCHAIR ACCESSORY, PNEUMATIC PROPULSION TIRE, ANY SIZE, EACH MANUAL WHEELCHAIR ACCESSORY, TUBE FOR PNEUMATIC PROPULSION TIRE, ANY SIZE, EACH MANUAL WHEELCHAIR ACCESSORY, INSERT FOR PNEUMATIC PROPULSION TIRE (REMOVABLE), ANY TYPE, ANY SIZE, EACH MANUAL WHEELCHAIR ACCESSORY, PNEUMATIC CASTER TIRE, ANY SIZE, EACH MANUAL WHEELCHAIR ACCESSORY, PNEUMATIC CASTER TIRE, ANY SIZE, EACH MANUAL WHEELCHAIR ACCESSORY, FOAM FILLED PROPULSION TIRE, ANY SIZE, EACH MANUAL WHEELCHAIR ACCESSORY, FOAM FILLED PROPULSION TIRE, ANY SIZE, EACH MANUAL WHEELCHAIR ACCESSORY, FOAM PROPULSION TIRE, ANY SIZE, EACH MANUAL WHEELCHAIR ACCESSORY, FOAM CASTER TIRE, ANY SIZE, EACH MANUAL WHEELCHAIR ACCESSORY, SOLID (RUBBER/PLASTIC) PROPULSION TIRE, ANY SIZE, EACH MANUAL WHEELCHAIR ACCESSORY, SOLID (RUBBER/PLASTIC) CASTER TIRE (REMOVABLE), ANY SIZE, REPLACEMENT ONLY, EACH MANUAL WHEELCHAIR ACCESSORY, SOLID (RUBBER/PLASTIC) CASTER TIRE WITH INTEGRATED WHEEL, ANY SIZE, REPLACEMENT ONLY, EACH MANUAL WHEELCHAIR ACCESSORY, SOLID (RUBBER/PLASTIC) CASTER TIRE WITH INTEGRATED WHEEL, ANY SIZE, REPLACEMENT ONLY, EACH MANUAL WHEELCHAIR ACCESSORY, COASTER WHEEL EXCLUDES TIRE, ANY SIZE, REPLACEMENT ONLY, EACH MANUAL WHEELCHAIR ACCESSORY, CASTER WHEEL EXCLUDES TIRE, ANY SIZE, REPLACEMENT ONLY, EACH MANUAL WHEELCHAIR ACCESSORY, GASTER FORK, ANY SIZE, REPLACEMENT ONLY, EACH MANUAL WHEELCHAIR ACCESSORY, GASTER FORK, ANY SIZE, REPLACEMENT ONLY, EACH MANUAL WHEELCHAIR ACCESSORY, GASTER FORK, ANY SIZE, REPLACEMENT ONLY, EACH MANUAL WHEELCHAIR ACCESSORY, MANUAL STANDING SYSTEM AND LOCK, COMPLETE, EACH MANUAL WHEELCHAIR ACCESSORY, MANUAL STANDING SYSTEM MANUAL WHEELCHAIR ACCESSORY, MANUAL STANDING SYSTEM MANUAL WHEELCHAIR ACCESSORY, MANUAL STANDING SYSTEM MANUAL WHEELCHAIR ACCESSORY, TO SUBSTANDERS STATON TO SEE THE SEACH ATTACHING BACK, PLANAR, FOR PEDIA

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E2328	POWER WHEELCHAIR ACCESSORY, HEAD CONTROL OR EXTREMITY CONTROL INTERFACE, ELECTRONIC, PROPORTIONAL, INCLUDING ALL RELATED ELECTRONICS AND FIXED MOUNTING HARDWARE	1
E2329	POWER WHEELCHAIR ACCESSORY, HEAD CONTROL INTERFACE, CONTACT SWITCH MECHANISM, NONPROPORTIONAL, INCLUDING ALL RELATED ELECTRONICS, MECHANICAL STOP SWITCH, MECHANICAL DIRECTION CHANGE SWITCH, HEAD ARRAY, AND FIXED MOUNTING HARDWARE	1
E2330	POWER WHEELCHAIR ACCESSORY, HEAD CONTROL INTERFACE, PROXIMITY SWITCH MECHANISM, NONPROPORTIONAL, INCLUDING ALL RELATED ELECTRONICS, MECHANICAL STOP SWITCH, MECHANICAL DIRECTION CHANGE SWITCH, HEAD ARRAY, AND FIXED MOUNTING HARDWARE	1
E2331	POWER WHEELCHAIR ACCESSORY, ATTENDANT CONTROL, PROPORTIONAL, INCLUDING ALL RELATED ELECTRONICS AND FIXED MOUNTING HARDWARE	1
E2340	POWER WHEELCHAIR ACCESSORY, NONSTANDARD SEAT FRAME WIDTH, 20-23 INCHES	1
E2341	POWER WHEELCHAIR ACCESSORY, NONSTANDARD SEAT FRAME WIDTH, 24-27 INCHES	1
E2342	POWER WHEELCHAIR ACCESSORY, NONSTANDARD SEAT FRAME DEPTH, 20 OR 21 INCHES	1
E2343	POWER WHEELCHAIR ACCESSORY, NONSTANDARD SEAT FRAME DEPTH, 22-25 INCHES	1
E2351	POWER WHEELCHAIR ACCESSORY, ELECTRONIC INTERFACE TO OPERATE SPEECH GENERATING DEVICE USING POWER WHEELCHAIR CONTROL INTERFACE	1
E2358	POWER WHEELCHAIR ACCESSORY, GROUP 34 NON-SEALED LEAD ACID BATTERY, EACH	2
E2359	POWER WHEELCHAIR ACCESSORY, GROUP 34 SEALED LEAD ACID BATTERY, EACH (E.G., GEL CELL, ABSORBED GLASSMAT)	2
E2360	POWER WHEELCHAIR ACCESSORY, 22NF NON-SEALED LEAD ACID BATTERY, EACH	2
E2361	POWER WHEELCHAIR ACCESSORY, 22NF SEALED LEAD ACID BATTERY, EACH, (E.G., GEL CELL, ABSORBED GLASSMAT)	2
E2362	POWER WHEELCHAIR ACCESSORY, GROUP 24 NON-SEALED LEAD ACID BATTERY, EACH	2
E2363	POWER WHEELCHAIR ACCESSORY, GROUP 24 SEALED LEAD ACID BATTERY, EACH (E.G., GEL CELL, ABSORBED GLASSMAT)	2
E2364	POWER WHEELCHAIR ACCESSORY, U-1 NON-SEALED LEAD ACID BATTERY, EACH	2
E2365	POWER WHEELCHAIR ACCESSORY, U-1 SEALED LEAD ACID BATTERY, EACH (E.G., GEL CELL, ABSORBED GLASSMAT)	2
E2366	POWER WHEELCHAIR ACCESSORY, BATTERY CHARGER, SINGLE MODE, FOR USE WITH ONLY ONE BATTERY TYPE, SEALED OR NON-SEALED, EACH	2
E2367	POWER WHEELCHAIR ACCESSORY, BATTERY CHARGER, DUAL MODE, FOR USE WITH EITHER BATTERY TYPE, SEALED OR NON-SEALED, EACH	2
E2368	POWER WHEELCHAIR COMPONENT, DRIVE WHEEL MOTOR, REPLACEMENT ONLY	2

E2369	POWER WHEELCHAIR COMPONENT, DRIVE WHEEL GEAR BOX, REPLACEMENT ONLY	2
E2370	POWER WHEELCHAIR COMPONENT, INTEGRATED DRIVE WHEEL MOTOR AND GEAR BOX COMBINATION, REPLACEMENT ONLY	2
E2371	POWER WHEELCHAIR ACCESSORY, GROUP 27 SEALED LEAD ACID BATTERY, (E.G., GEL CELL, ABSORBED GLASSMAT), EACH	2
E2372	POWER WHEELCHAIR ACCESSORY, GROUP 27 NON-SEALED LEAD ACID BATTERY, EACH	2
E2373	POWER WHEELCHAIR ACCESSORY, HAND OR CHIN CONTROL INTERFACE, COMPACT REMOTE JOYSTICK, PROPORTIONAL, INCLUDING FIXED MOUNTING HARDWARE	1
E2374	POWER WHEELCHAIR ACCESSORY, HAND OR CHIN CONTROL INTERFACE, STANDARD REMOTE JOYSTICK (NOT INCLUDING CONTROLLER), PROPORTIONAL, INCLUDING ALL RELATED ELECTRONICS AND FIXED MOUNTING HARDWARE, REPLACEMENT ONLY	1
E2375	POWER WHEELCHAIR ACCESSORY, NON-EXPANDABLE CONTROLLER, INCLUDING ALL RELATED ELECTRONICS AND MOUNTING HARDWARE, REPLACEMENT ONLY	1
E2376	POWER WHEELCHAIR ACCESSORY, EXPANDABLE CONTROLLER, INCLUDING ALL RELATED ELECTRONICS AND MOUNTING HARDWARE, REPLACEMENT ONLY	1
E2377	POWER WHEELCHAIR ACCESSORY, EXPANDABLE CONTROLLER, INCLUDING ALL RELATED ELECTRONICS AND MOUNTING HARDWARE, UPGRADE PROVIDED AT INITIAL ISSUE	1
E2378	POWER WHEELCHAIR COMPONENT, ACTUATOR, REPLACEMENT ONLY	2
E2381	POWER WHEELCHAIR ACCESSORY, PNEUMATIC DRIVE WHEEL TIRE, ANY SIZE, REPLACEMENT ONLY, EACH	2
E2382	POWER WHEELCHAIR ACCESSORY, TUBE FOR PNEUMATIC DRIVE WHEEL TIRE, ANY SIZE, REPLACEMENT ONLY, EACH	2
E2383	POWER WHEELCHAIR ACCESSORY, INSERT FOR PNEUMATIC DRIVE WHEEL TIRE (REMOVABLE), ANY TYPE, ANY SIZE, REPLACEMENT ONLY, EACH	2
E2384	POWER WHEELCHAIR ACCESSORY, PNEUMATIC CASTER TIRE, ANY SIZE, REPLACEMENT ONLY, EACH	2
E2385	POWER WHEELCHAIR ACCESSORY, TUBE FOR PNEUMATIC CASTER TIRE, ANY SIZE, REPLACEMENT ONLY, EACH	2
E2386	POWER WHEELCHAIR ACCESSORY, FOAM FILLED DRIVE WHEEL TIRE, ANY SIZE, REPLACEMENT ONLY, EACH	2
E2387	POWER WHEELCHAIR ACCESSORY, FOAM FILLED CASTER TIRE, ANY SIZE, REPLACEMENT ONLY, EACH	2
E2388	POWER WHEELCHAIR ACCESSORY, FOAM DRIVE WHEEL TIRE, ANY SIZE, REPLACEMENT ONLY, EACH	2
E2389	POWER WHEELCHAIR ACCESSORY, FOAM CASTER TIRE, ANY SIZE, REPLACEMENT ONLY, EACH	2
E2390	POWER WHEELCHAIR ACCESSORY, SOLID (RUBBER/PLASTIC) DRIVE WHEEL TIRE, ANY SIZE, REPLACEMENT ONLY, EACH	2

E2391	POWER WHEELCHAIR ACCESSORY, SOLID (RUBBER/PLASTIC) CASTER TIRE (REMOVABLE), ANY SIZE, REPLACEMENT ONLY, EACH	2
E2392	POWER WHEELCHAIR ACCESSORY, SOLID (RUBBER/PLASTIC) CASTER TIRE WITH INTEGRATED WHEEL, ANY SIZE, REPLACEMENT ONLY, EACH	2
E2394	POWER WHEELCHAIR ACCESSORY, DRIVE WHEEL EXCLUDES TIRE, ANY SIZE, REPLACEMENT ONLY, EACH	2
E2395	POWER WHEELCHAIR ACCESSORY, CASTER WHEEL EXCLUDES TIRE, ANY SIZE, REPLACEMENT ONLY, EACH	2
E2396	POWER WHEELCHAIR ACCESSORY, CASTER FORK, ANY SIZE, REPLACEMENT ONLY, EACH	2
E2397	POWER WHEELCHAIR ACCESSORY, LITHIUM-BASED BATTERY, EACH	2
E2398	WHEELCHAIR ACCESSORY, DYNAMIC POSITIONING HARDWARE FOR BACK	1
E2402	NEGATIVE PRESSURE WOUND THERAPY ELECTRICAL PUMP, STATIONARY OR PORTABLE	1
E2500	SPEECH GENERATING DEVICE, DIGITIZED SPEECH, USING PRE-RECORDED MESSAGES, LESS THAN OR EQUAL TO 8 MINUTES RECORDING TIME	1
E2502	SPEECH GENERATING DEVICE, DIGITIZED SPEECH, USING PRE-RECORDED MESSAGES, GREATER THAN 8 MINUTES BUT LESS THAN OR EQUAL TO 20 MINUTES RECORDING TIME	1
E2504	SPEECH GENERATING DEVICE, DIGITIZED SPEECH, USING PRE-RECORDED MESSAGES, GREATER THAN 20 MINUTES BUT LESS THAN OR EQUAL TO 40 MINUTES RECORDING TIME	1
E2506	SPEECH GENERATING DEVICE, DIGITIZED SPEECH, USING PRE-RECORDED MESSAGES, GREATER THAN 40 MINUTES RECORDING TIME	1
E2508	SPEECH GENERATING DEVICE, SYNTHESIZED SPEECH, REQUIRING MESSAGE FORMULATION BY SPELLING AND ACCESS BY PHYSICAL CONTACT WITH THE DEVICE	1
E2510	SPEECH GENERATING DEVICE, SYNTHESIZED SPEECH, PERMITTING MULTIPLE METHODS OF MESSAGE FORMULATION AND MULTIPLE METHODS OF DEVICE ACCESS	1
E2511	SPEECH GENERATING SOFTWARE PROGRAM, FOR PERSONAL COMPUTER OR PERSONAL DIGITAL ASSISTANT	1
E2512	ACCESSORY FOR SPEECH GENERATING DEVICE, MOUNTING SYSTEM	1
E2601	GENERAL USE WHEELCHAIR SEAT CUSHION, WIDTH LESS THAN 22 INCHES, ANY DEPTH	1
E2602	GENERAL USE WHEELCHAIR SEAT CUSHION, WIDTH 22 INCHES OR GREATER, ANY DEPTH	1
E2603	SKIN PROTECTION WHEELCHAIR SEAT CUSHION, WIDTH LESS THAN 22 INCHES, ANY DEPTH	1
E2604	SKIN PROTECTION WHEELCHAIR SEAT CUSHION, WIDTH 22 INCHES OR GREATER, ANY DEPTH	1

E2605	POSITIONING WHEELCHAIR SEAT CUSHION, WIDTH LESS THAN 22 INCHES, ANY DEPTH	1
E2606	POSITIONING WHEELCHAIR SEAT CUSHION, WIDTH 22 INCHES OR GREATER, ANY DEPTH	1
E2607	SKIN PROTECTION AND POSITIONING WHEELCHAIR SEAT CUSHION, WIDTH LESS THAN 22 INCHES, ANY DEPTH	1
E2608	SKIN PROTECTION AND POSITIONING WHEELCHAIR SEAT CUSHION, WIDTH 22 INCHES OR GREATER, ANY DEPTH	1
E2609	CUSTOM FABRICATED WHEELCHAIR SEAT CUSHION, ANY SIZE	1
E2610	WHEELCHAIR SEAT CUSHION, POWERED	1
E2611	GENERAL USE WHEELCHAIR BACK CUSHION, WIDTH LESS THAN 22 INCHES, ANY HEIGHT, INCLUDING ANY TYPE MOUNTING HARDWARE	1
E2612	GENERAL USE WHEELCHAIR BACK CUSHION, WIDTH 22 INCHES OR GREATER, ANY HEIGHT, INCLUDING ANY TYPE MOUNTING HARDWARE	1
E2613	POSITIONING WHEELCHAIR BACK CUSHION, POSTERIOR, WIDTH LESS THAN 22 INCHES, ANY HEIGHT, INCLUDING ANY TYPE MOUNTING HARDWARE	1
E2614	POSITIONING WHEELCHAIR BACK CUSHION, POSTERIOR, WIDTH 22 INCHES OR GREATER, ANY HEIGHT, INCLUDING ANY TYPE MOUNTING HARDWARE	1
E2615	POSITIONING WHEELCHAIR BACK CUSHION, POSTERIOR-LATERAL, WIDTH LESS THAN 22 INCHES, ANY HEIGHT, INCLUDING ANY TYPE MOUNTING HARDWARE	1
E2616	POSITIONING WHEELCHAIR BACK CUSHION, POSTERIOR-LATERAL, WIDTH 22 INCHES OR GREATER, ANY HEIGHT, INCLUDING ANY TYPE MOUNTING HARDWARE	1
E2617	CUSTOM FABRICATED WHEELCHAIR BACK CUSHION, ANY SIZE, INCLUDING ANY TYPE MOUNTING HARDWARE	1
E2619	REPLACEMENT COVER FOR WHEELCHAIR SEAT CUSHION OR BACK CUSHION, EACH	1
E2620	POSITIONING WHEELCHAIR BACK CUSHION, PLANAR BACK WITH LATERAL SUPPORTS, WIDTH LESS THAN 22 INCHES, ANY HEIGHT, INCLUDING ANY TYPE MOUNTING HARDWARE	1
E2621	POSITIONING WHEELCHAIR BACK CUSHION, PLANAR BACK WITH LATERAL SUPPORTS, WIDTH 22 INCHES OR GREATER, ANY HEIGHT, INCLUDING ANY TYPE MOUNTING HARDWARE	1
E2622	SKIN PROTECTION WHEELCHAIR SEAT CUSHION, ADJUSTABLE, WIDTH LESS THAN 22 INCHES, ANY DEPTH	1
E2623	SKIN PROTECTION WHEELCHAIR SEAT CUSHION, ADJUSTABLE, WIDTH 22 INCHES OR GREATER, ANY DEPTH	1
E2624	SKIN PROTECTION AND POSITIONING WHEELCHAIR SEAT CUSHION, ADJUSTABLE, WIDTH LESS THAN 22 INCHES, ANY DEPTH	1
E2625	SKIN PROTECTION AND POSITIONING WHEELCHAIR SEAT CUSHION, ADJUSTABLE, WIDTH 22 INCHES OR GREATER, ANY DEPTH	1
E2626	WHEELCHAIR ACCESSORY, SHOULDER ELBOW, MOBILE ARM SUPPORT ATTACHED TO WHEELCHAIR, BALANCED, ADJUSTABLE	2

E2627	WHEELCHAIR ACCESSORY, SHOULDER ELBOW, MOBILE ARM SUPPORT ATTACHED TO WHEELCHAIR, BALANCED, ADJUSTABLE RANCHO TYPE	2
E2628	WHEELCHAIR ACCESSORY, SHOULDER ELBOW, MOBILE ARM SUPPORT ATTACHED TO WHEELCHAIR, BALANCED, RECLINING	2
E2629	WHEELCHAIR ACCESSORY, SHOULDER ELBOW, MOBILE ARM SUPPORT ATTACHED TO WHEELCHAIR, BALANCED, FRICTION ARM SUPPORT (FRICTION DAMPENING TO PROXIMAL AND DISTAL JOINTS)	2
E2630	WHEELCHAIR ACCESSORY, SHOULDER ELBOW, MOBILE ARM SUPPORT, MONOSUSPENSION ARM AND HAND SUPPORT, OVERHEAD ELBOW FOREARM HAND SLING SUPPORT, YOKE TYPE SUSPENSION SUPPORT	2
E2631	WHEELCHAIR ACCESSORY, ADDITION TO MOBILE ARM SUPPORT, ELEVATING PROXIMAL ARM	2
E2632	WHEELCHAIR ACCESSORY, ADDITION TO MOBILE ARM SUPPORT, OFFSET OR LATERAL ROCKER ARM WITH ELASTIC BALANCE CONTROL	2
E2633	WHEELCHAIR ACCESSORY, ADDITION TO MOBILE ARM SUPPORT, SUPINATOR	2
E8000	GAIT TRAINER, PEDIATRIC SIZE, POSTERIOR SUPPORT, INCLUDES ALL ACCESSORIES AND COMPONENTS	1
E8001	GAIT TRAINER, PEDIATRIC SIZE, UPRIGHT SUPPORT, INCLUDES ALL ACCESSORIES AND COMPONENTS	1
E8002	GAIT TRAINER, PEDIATRIC SIZE, ANTERIOR SUPPORT, INCLUDES ALL ACCESSORIES AND COMPONENTS	1
G0008	ADMINISTRATION OF INFLUENZA VIRUS VACCINE	1
G0009	ADMINISTRATION OF PNEUMOCOCCAL VACCINE	1
G0010	ADMINISTRATION OF HEPATITIS B VACCINE	1
G0027	SEMEN ANALYSIS; PRESENCE AND/OR MOTILITY OF SPERM EXCLUDING HUHNER	1
G0071	PAYMENT FOR COMMUNICATION TECHNOLOGY-BASED SERVICES FOR 5 MINUTES OR MORE OF A VIRTUAL (NON-FACE-TO-FACE) COMMUNICATION BETWEEN AN RURAL HEALTH CLINIC (RHC) OR FEDERALLY QUALIFIED HEALTH CENTER (FQHC) PRACTITIONER AND RHC OR FQHC PATIENT, OR 5 MINUTES OR MORE OF REMOTE EVALUATION OF RECORDED VIDEO AND/OR IMAGES BY AN RHC OR FQHC PRACTITIONER, OCCURRING IN LIEU OF AN OFFICE VISIT; RHC OR FQHC ONLY	1
G0076	BRIEF (20 MINUTES) CARE MANAGEMENT HOME VISIT FOR A NEW PATIENT. FOR USE ONLY IN A MEDICARE-APPROVED CMMI MODEL. (SERVICES MUST BE FURNISHED WITHIN A BENEFICIARY'S HOME, DOMICILIARY, REST HOME, ASSISTED LIVING AND/OR NURSING FACILITY)	1
G0077	LIMITED (30 MINUTES) CARE MANAGEMENT HOME VISIT FOR A NEW PATIENT. FOR USE ONLY IN A MEDICARE-APPROVED CMMI MODEL. (SERVICES MUST BE FURNISHED WITHIN A BENEFICIARY'S HOME, DOMICILIARY, REST HOME, ASSISTED LIVING AND/OR NURSING FACILITY)	1
G0078	MODERATE (45 MINUTES) CARE MANAGEMENT HOME VISIT FOR A NEW PATIENT. FOR USE ONLY IN A MEDICARE-APPROVED CMMI MODEL. (SERVICES MUST BE FURNISHED WITHIN A BENEFICIARY'S HOME, DOMICILIARY, REST HOME, ASSISTED LIVING AND/OR NURSING FACILITY)	1

COMPREHENSIVE (60 MINUTES) CARE MANAGEMENT HOME VISIT FOR A NEW PATIENT. FOR USE ONLY IN A MEDICARE-APPROVED CMMI MODEL. (SERVICES MUST BE FURNISHED WITHIN A BENEFICIARY'S HOME, DOMICILIARY, REST HOME, ASSISTED LIVING AND/OR NURSING FACILITY)	1
EXTENSIVE (75 MINUTES) CARE MANAGEMENT HOME VISIT FOR A NEW PATIENT. FOR USE ONLY IN A MEDICARE-APPROVED CMMI MODEL. (SERVICES MUST BE FURNISHED WITHIN A BENEFICIARY'S HOME, DOMICILIARY, REST HOME, ASSISTED LIVING AND/OR NURSING FACILITY)	1
BRIEF (20 MINUTES) CARE MANAGEMENT HOME VISIT FOR AN EXISTING PATIENT. FOR USE ONLY IN A MEDICARE-APPROVED CMMI MODEL. (SERVICES MUST BE FURNISHED WITHIN A BENEFICIARY'S HOME, DOMICILIARY, REST HOME, ASSISTED LIVING AND/OR NURSING FACILITY)	1
LIMITED (30 MINUTES) CARE MANAGEMENT HOME VISIT FOR AN EXISTING PATIENT. FOR USE ONLY IN A MEDICARE-APPROVED CMMI MODEL. (SERVICES MUST BE FURNISHED WITHIN A BENEFICIARY'S HOME, DOMICILIARY, REST HOME, ASSISTED LIVING AND/OR NURSING FACILITY)	1
MODERATE (45 MINUTES) CARE MANAGEMENT HOME VISIT FOR AN EXISTING PATIENT. FOR USE ONLY IN A MEDICARE-APPROVED CMMI MODEL. (SERVICES MUST BE FURNISHED WITHIN A BENEFICIARY'S HOME, DOMICILIARY, REST HOME, ASSISTED LIVING AND/OR NURSING FACILITY)	1
COMPREHENSIVE (60 MINUTES) CARE MANAGEMENT HOME VISIT FOR AN EXISTING PATIENT. FOR USE ONLY IN A MEDICARE-APPROVED CMMI MODEL. (SERVICES MUST BE FURNISHED WITHIN A BENEFICIARY'S HOME, DOMICILIARY, REST HOME, ASSISTED LIVING AND/OR NURSING FACILITY)	1
EXTENSIVE (75 MINUTES) CARE MANAGEMENT HOME VISIT FOR AN EXISTING PATIENT. FOR USE ONLY IN A MEDICARE-APPROVED CMMI MODEL. (SERVICES MUST BE FURNISHED WITHIN A BENEFICIARY'S HOME, DOMICILIARY, REST HOME, ASSISTED LIVING AND/OR NURSING FACILITY)	1
LIMITED (30 MINUTES) CARE MANAGEMENT HOME CARE PLAN OVERSIGHT. FOR USE ONLY IN A MEDICARE-APPROVED CMMI MODEL. (SERVICES MUST BE FURNISHED WITHIN A BENEFICIARY'S HOME, DOMICILIARY, REST HOME, ASSISTED LIVING AND/OR NURSING FACILITY)	1
COMPREHENSIVE (60 MINUTES) CARE MANAGEMENT HOME CARE PLAN OVERSIGHT. FOR USE ONLY IN A MEDICARE-APPROVED CMMI MODEL. (SERVICES MUST BE FURNISHED WITHIN A BENEFICIARY'S HOME, DOMICILIARY, REST HOME, ASSISTED LIVING AND/OR NURSING FACILITY)	1
CERVICAL OR VAGINAL CANCER SCREENING; PELVIC AND CLINICAL BREAST EXAMINATION	1
PROSTATE CANCER SCREENING; DIGITAL RECTAL EXAMINATION	1
PROSTATE CANCER SCREENING; PROSTATE SPECIFIC ANTIGEN TEST (PSA)	1
COLORECTAL CANCER SCREENING; FLEXIBLE SIGMOIDOSCOPY	1
COLORECTAL CANCER SCREENING; COLONOSCOPY ON INDIVIDUAL AT HIGH RISK	1
COLORECTAL CANCER SCREENING; ALTERNATIVE TO G0104, SCREENING SIGMOIDOSCOPY, BARIUM ENEMA	1
	PATIENT. FOR USE ONLY IN A MEDICARE-APPROVED CMMI MODEL. (SERVICES MUST BE FURNISHED WITHIN A BENEFICIARY'S HOME, DOMICILIARY, REST HOME, ASSISTED LIVING AND/OR NURSING FACILITY) EXTENSIVE (75 MINUTES) CARE MANAGEMENT HOME VISIT FOR A NEW PATIENT. FOR USE ONLY IN A MEDICARE-APPROVED CMMI MODEL. (SERVICES MUST BE FURNISHED WITHIN A BENEFICIARY'S HOME, DOMICILIARY, REST HOME, ASSISTED LIVING AND/OR NURSING FACILITY) BRIEF (20 MINUTES) CARE MANAGEMENT HOME VISIT FOR AN EXISTING PATIENT. FOR USE ONLY IN A MEDICARE-APPROVED CMMI MODEL. (SERVICES MUST BE FURNISHED WITHIN A BENEFICIARY'S HOME, DOMICILIARY, REST HOME, ASSISTED LIVING AND/OR NURSING FACILITY) LIMITED (30 MINUTES) CARE MANAGEMENT HOME VISIT FOR AN EXISTING PATIENT. FOR USE ONLY IN A MEDICARE-APPROVED CMMI MODEL. (SERVICES MUST BE FURNISHED WITHIN A BENEFICIARY'S HOME, DOMICILIARY, REST HOME, ASSISTED LIVING AND/OR NURSING FACILITY) MODERATE (45 MINUTES) CARE MANAGEMENT HOME VISIT FOR AN EXISTING PATIENT. FOR USE ONLY IN A MEDICARE-APPROVED CMMI MODEL. (SERVICES MUST BE FURNISHED WITHIN A BENEFICIARY'S HOME, DOMICILIARY, REST HOME, ASSISTED LIVING AND/OR NURSING FACILITY) MODERATE (45 MINUTES) CARE MANAGEMENT HOME VISIT FOR AN EXISTING PATIENT. FOR USE ONLY IN A MEDICARE-APPROVED CMMI MODEL. (SERVICES MUST BE FURNISHED WITHIN A BENEFICIARY'S HOME, DOMICILIARY, REST HOME, ASSISTED LIVING AND/OR NURSING FACILITY) COMPREHENSIVE (60 MINUTES) CARE MANAGEMENT HOME VISIT FOR AN EXISTING PATIENT. FOR USE ONLY IN A MEDICARE-APPROVED CMMI MODEL. (SERVICES MUST BE FURNISHED WITHIN A BENEFICIARY'S HOME, DOMICILIARY, REST HOME, ASSISTED LIVING AND/OR NURSING FACILITY) EXTENSIVE (75 MINUTES) CARE MANAGEMENT HOME VISIT FOR AN EXISTING PATIENT. FOR USE ONLY IN A MEDICARE-APPROVED CMMI MODEL. (SERVICES MUST BE FURNISHED WITHIN A BENEFICIARY'S HOME, DOMICILIARY, REST HOME, ASSISTED LIVING AND/OR NURSING FACILITY) COMPREHENSIVE (60 MINUTES) CARE MANAGEMENT HOME CARE PLAN OVERSIGHT. FOR USE ONLY IN A MEDICARE-APPROVED CMMI MODEL. (SERVICES MUST BE FURNISHED WITHIN A

G0108	DIABETES OUTPATIENT SELF-MANAGEMENT TRAINING SERVICES, INDIVIDUAL, PER 30 MINUTES	20
G0109	DIABETES OUTPATIENT SELF-MANAGEMENT TRAINING SERVICES, GROUP SESSION (2 OR MORE), PER 30 MINUTES	20
G0117	GLAUCOMA SCREENING FOR HIGH RISK PATIENTS FURNISHED BY AN OPTOMETRIST OR OPHTHALMOLOGIST	1
G0118	GLAUCOMA SCREENING FOR HIGH RISK PATIENT FURNISHED UNDER THE DIRECT SUPERVISION OF AN OPTOMETRIST OR OPHTHALMOLOGIST	1
G0120	COLORECTAL CANCER SCREENING; ALTERNATIVE TO G0105, SCREENING COLONOSCOPY, BARIUM ENEMA.	1
G0121	COLORECTAL CANCER SCREENING; COLONOSCOPY ON INDIVIDUAL NOT MEETING CRITERIA FOR HIGH RISK	1
G0122	COLORECTAL CANCER SCREENING; BARIUM ENEMA	1
G0123	SCREENING CYTOPATHOLOGY, CERVICAL OR VAGINAL (ANY REPORTING SYSTEM), COLLECTED IN PRESERVATIVE FLUID, AUTOMATED THIN LAYER PREPARATION, SCREENING BY CYTOTECHNOLOGIST UNDER PHYSICIAN SUPERVISION	1
G0124	SCREENING CYTOPATHOLOGY, CERVICAL OR VAGINAL (ANY REPORTING SYSTEM), COLLECTED IN PRESERVATIVE FLUID, AUTOMATED THIN LAYER PREPARATION, REQUIRING INTERPRETATION BY PHYSICIAN	1
G0127	TRIMMING OF DYSTROPHIC NAILS, ANY NUMBER	1
G0128	DIRECT (FACE-TO-FACE WITH PATIENT) SKILLED NURSING SERVICES OF A REGISTERED NURSE PROVIDED IN A COMPREHENSIVE OUTPATIENT REHABILITATION FACILITY, EACH 10 MINUTES BEYOND THE FIRST 5 MINUTES	1
G0129	OCCUPATIONAL THERAPY SERVICES REQUIRING THE SKILLS OF A QUALIFIED OCCUPATIONAL THERAPIST, FURNISHED AS A COMPONENT OF A PARTIAL HOSPITALIZATION TREATMENT PROGRAM, PER SESSION (45 MINUTES OR MORE)	3
G0130	SINGLE ENERGY X-RAY ABSORPTIOMETRY (SEXA) BONE DENSITY STUDY, ONE OR MORE SITES; APPENDICULAR SKELETON (PERIPHERAL) (E.G., RADIUS, WRIST, HEEL)	1
G0141	SCREENING CYTOPATHOLOGY SMEARS, CERVICAL OR VAGINAL, PERFORMED BY AUTOMATED SYSTEM, WITH MANUAL RESCREENING, REQUIRING INTERPRETATION BY PHYSICIAN	1
G0143	SCREENING CYTOPATHOLOGY, CERVICAL OR VAGINAL (ANY REPORTING SYSTEM), COLLECTED IN PRESERVATIVE FLUID, AUTOMATED THIN LAYER PREPARATION, WITH MANUAL SCREENING AND RESCREENING BY CYTOTECHNOLOGIST UNDER PHYSICIAN SUPERVISION	1
G0144	SCREENING CYTOPATHOLOGY, CERVICAL OR VAGINAL (ANY REPORTING SYSTEM), COLLECTED IN PRESERVATIVE FLUID, AUTOMATED THIN LAYER PREPARATION, WITH SCREENING BY AUTOMATED SYSTEM, UNDER PHYSICIAN SUPERVISION	1
G0145	SCREENING CYTOPATHOLOGY, CERVICAL OR VAGINAL (ANY REPORTING SYSTEM), COLLECTED IN PRESERVATIVE FLUID, AUTOMATED THIN LAYER PREPARATION, WITH SCREENING BY AUTOMATED SYSTEM AND MANUAL RESCREENING UNDER PHYSICIAN SUPERVISION	1

G0147	SCREENING CYTOPATHOLOGY SMEARS, CERVICAL OR VAGINAL, PERFORMED BY AUTOMATED SYSTEM UNDER PHYSICIAN SUPERVISION	1
G0148	SCREENING CYTOPATHOLOGY SMEARS, CERVICAL OR VAGINAL, PERFORMED BY AUTOMATED SYSTEM WITH MANUAL RESCREENING	1
G0151	SERVICES PERFORMED BY A QUALIFIED PHYSICAL THERAPIST IN THE HOME HEALTH OR HOSPICE SETTING, EACH 15 MINUTES	15
G0152	SERVICES PERFORMED BY A QUALIFIED OCCUPATIONAL THERAPIST IN THE HOME HEALTH OR HOSPICE SETTING, EACH 15 MINUTES	15
G0153	SERVICES PERFORMED BY A QUALIFIED SPEECH-LANGUAGE PATHOLOGIST IN THE HOME HEALTH OR HOSPICE SETTING, EACH 15 MINUTES	5
G0155	SERVICES OF CLINICAL SOCIAL WORKER IN HOME HEALTH OR HOSPICE SETTINGS, EACH 15 MINUTES	16
G0156	SERVICES OF HOME HEALTH/HOSPICE AIDE IN HOME HEALTH OR HOSPICE SETTINGS, EACH 15 MINUTES	1
G0166	EXTERNAL COUNTERPULSATION, PER TREATMENT SESSION	2
G0168	WOUND CLOSURE UTILIZING TISSUE ADHESIVE(S) ONLY	2
G0175	SCHEDULED INTERDISCIPLINARY TEAM CONFERENCE (MINIMUM OF THREE EXCLUSIVE OF PATIENT CARE NURSING STAFF) WITH PATIENT PRESENT	1
G0176	ACTIVITY THERAPY, SUCH AS MUSIC, DANCE, ART OR PLAY THERAPIES NOT FOR RECREATION, RELATED TO THE CARE AND TREATMENT OF PATIENT'S DISABLING MENTAL HEALTH PROBLEMS, PER SESSION (45 MINUTES OR MORE)	5
G0177	TRAINING AND EDUCATIONAL SERVICES RELATED TO THE CARE AND TREATMENT OF PATIENT'S DISABLING MENTAL HEALTH PROBLEMS PER SESSION (45 MINUTES OR MORE)	3
G0179	Physician or allowed practitioner re-certification for Medicare-covered home health services under a home health plan of care (patient not present), including contacts with home health agency and review of reports of patient status required by physicians and allowed practitioners to affirm the initial implementation of the plan of care	1
G0180	Physician or allowed practitioner certification for Medicare-covered home health services under a home health plan of care (patient not present), including contacts with home health agency and review of reports of patient status required by physicians and allowed practitioners to affirm the initial implementation of the plan of care	1
G0181	Physician or allowed practitioner supervision of a patient receiving Medicare- covered services provided by a participating home health agency (patient not present) requiring complex and multidisciplinary care modalities involving regular physician or allowed practitioner development and/or revision of care plans	1
G0182	PHYSICIAN SUPERVISION OF A PATIENT UNDER A MEDICARE-APPROVED HOSPICE (PATIENT NOT PRESENT) REQUIRING COMPLEX AND MULTIDISCIPLINARY CARE MODALITIES INVOLVING REGULAR PHYSICIAN DEVELOPMENT AND/OR REVISION OF CARE PLANS, REVIEW OF SUBSEQUENT REPORTS OF PATIENT STATUS, REVIEW OF LABORATORY AND OTHER STUDIES, COMMUNICATION (INCLUDING TELEPHONE CALLS) WITH OTHER HEALTH CARE PROFESSIONALS INVOLVED IN THE PATIENT'S	1

	CARE, INTEGRATION OF NEW INFORMATION INTO THE MEDICAL TREATMENT PLAN AND/OR ADJUSTMENT OF MEDICAL THERAPY, WITHIN A CALENDAR MONTH, 30 MINUTES OR MORE	
G0186	DESTRUCTION OF LOCALIZED LESION OF CHOROID (FOR EXAMPLE, CHOROIDAL NEOVASCULARIZATION); PHOTOCOAGULATION, FEEDER VESSEL TECHNIQUE (ONE OR MORE SESSIONS)	1
G0219	PET IMAGING WHOLE BODY; MELANOMA FOR NON-COVERED INDICATIONS	1
G0235	PET IMAGING, ANY SITE, NOT OTHERWISE SPECIFIED	1
G0237	THERAPEUTIC PROCEDURES TO INCREASE STRENGTH OR ENDURANCE OF RESPIRATORY MUSCLES, FACE TO FACE, ONE ON ONE, EACH 15 MINUTES (INCLUDES MONITORING)	8
G0238	THERAPEUTIC PROCEDURES TO IMPROVE RESPIRATORY FUNCTION, OTHER THAN DESCRIBED BY G0237, ONE ON ONE, FACE TO FACE, PER 15 MINUTES (INCLUDES MONITORING)	8
G0239	THERAPEUTIC PROCEDURES TO IMPROVE RESPIRATORY FUNCTION OR INCREASE STRENGTH OR ENDURANCE OF RESPIRATORY MUSCLES, TWO OR MORE INDIVIDUALS (INCLUDES MONITORING)	2
G0245	INITIAL PHYSICIAN EVALUATION AND MANAGEMENT OF A DIABETIC PATIENT WITH DIABETIC SENSORY NEUROPATHY RESULTING IN A LOSS OF PROTECTIVE SENSATION (LOPS) WHICH MUST INCLUDE: (1) THE DIAGNOSIS OF LOPS, (2) A PATIENT HISTORY, (3) A PHYSICAL EXAMINATION THAT CONSISTS OF AT LEAST THE FOLLOWING ELEMENTS: (A) VISUAL INSPECTION OF THE FOREFOOT, HINDFOOT AND TOE WEB SPACES, (B) EVALUATION OF A PROTECTIVE SENSATION, (C) EVALUATION OF FOOT STRUCTURE AND BIOMECHANICS, (D) EVALUATION OF VASCULAR STATUS AND SKIN INTEGRITY, AND (E) EVALUATION AND RECOMMENDATION OF FOOTWEAR AND (4) PATIENT EDUCATION	1
G0246	FOLLOW-UP PHYSICIAN EVALUATION AND MANAGEMENT OF A DIABETIC PATIENT WITH DIABETIC SENSORY NEUROPATHY RESULTING IN A LOSS OF PROTECTIVE SENSATION (LOPS) TO INCLUDE AT LEAST THE FOLLOWING: (1) A PATIENT HISTORY, (2) A PHYSICAL EXAMINATION THAT INCLUDES: (A) VISUAL INSPECTION OF THE FOREFOOT, HINDFOOT AND TOE WEB SPACES, (B) EVALUATION OF PROTECTIVE SENSATION, (C) EVALUATION OF FOOT STRUCTURE AND BIOMECHANICS, (D) EVALUATION OF VASCULAR STATUS AND SKIN INTEGRITY, AND (E) EVALUATION AND RECOMMENDATION OF FOOTWEAR, AND (3) PATIENT EDUCATION	1
G0247	ROUTINE FOOT CARE BY A PHYSICIAN OF A DIABETIC PATIENT WITH DIABETIC SENSORY NEUROPATHY RESULTING IN A LOSS OF PROTECTIVE SENSATION (LOPS) TO INCLUDE, THE LOCAL CARE OF SUPERFICIAL WOUNDS (I.E. SUPERFICIAL TO MUSCLE AND FASCIA) AND AT LEAST THE FOLLOWING IF PRESENT: (1) LOCAL CARE OF SUPERFICIAL WOUNDS, (2) DEBRIDEMENT OF CORNS AND CALLUSES, AND (3) TRIMMING AND DEBRIDEMENT OF NAILS	1

G0248	DEMONSTRATION, PRIOR TO INITIATION OF HOME INR MONITORING, FOR PATIENT WITH EITHER MECHANICAL HEART VALVE(S), CHRONIC ATRIAL FIBRILLATION, OR VENOUS THROMBOEMBOLISM WHO MEETS MEDICARE COVERAGE CRITERIA, UNDER THE DIRECTION OF A PHYSICIAN; INCLUDES: FACE-TO-FACE DEMONSTRATION OF USE AND CARE OF THE INR MONITOR, OBTAINING AT LEAST ONE BLOOD SAMPLE, PROVISION OF INSTRUCTIONS FOR REPORTING HOME INR TEST RESULTS, AND DOCUMENTATION OF PATIENT'S ABILITY TO PERFORM TESTING AND REPORT RESULTS	1
G0249	PROVISION OF TEST MATERIALS AND EQUIPMENT FOR HOME INR MONITORING OF PATIENT WITH EITHER MECHANICAL HEART VALVE(S), CHRONIC ATRIAL FIBRILLATION, OR VENOUS THROMBOEMBOLISM WHO MEETS MEDICARE COVERAGE CRITERIA; INCLUDES: PROVISION OF MATERIALS FOR USE IN THE HOME AND REPORTING OF TEST RESULTS TO PHYSICIAN; TESTING NOT OCCURRING MORE FREQUENTLY THAN ONCE A WEEK; TESTING MATERIALS, BILLING UNITS OF SERVICE INCLUDE 4 TESTS	1
G0250	PHYSICIAN REVIEW, INTERPRETATION, AND PATIENT MANAGEMENT OF HOME INR TESTING FOR PATIENT WITH EITHER MECHANICAL HEART VALVE(S), CHRONIC ATRIAL FIBRILLATION, OR VENOUS THROMBOEMBOLISM WHO MEETS MEDICARE COVERAGE CRITERIA; TESTING NOT OCCURRING MORE FREQUENTLY THAN ONCE A WEEK; BILLING UNITS OF SERVICE INCLUDE 4 TESTS	1
G0252	PET IMAGING, FULL AND PARTIAL-RING PET SCANNERS ONLY, FOR INITIAL DIAGNOSIS OF BREAST CANCER AND/OR SURGICAL PLANNING FOR BREAST CANCER (E.G., INITIAL STAGING OF AXILLARY LYMPH NODES)	1
G0255	CURRENT PERCEPTION THRESHOLD/SENSORY NERVE CONDUCTION TEST, (SNCT) PER LIMB, ANY NERVE	4
G0257	UNSCHEDULED OR EMERGENCY DIALYSIS TREATMENT FOR AN ESRD PATIENT IN A HOSPITAL OUTPATIENT DEPARTMENT THAT IS NOT CERTIFIED AS AN ESRD FACILITY	1
G0259	INJECTION PROCEDURE FOR SACROILIAC JOINT; ARTHROGRAPHY	2
G0260	INJECTION PROCEDURE FOR SACROILIAC JOINT; PROVISION OF ANESTHETIC, STEROID AND/OR OTHER THERAPEUTIC AGENT, WITH OR WITHOUT ARTHROGRAPHY	2
G0268	REMOVAL OF IMPACTED CERUMEN (ONE OR BOTH EARS) BY PHYSICIAN ON SAME DATE OF SERVICE AS AUDIOLOGIC FUNCTION TESTING	1
G0269	PLACEMENT OF OCCLUSIVE DEVICE INTO EITHER A VENOUS OR ARTERIAL ACCESS SITE, POST SURGICAL OR INTERVENTIONAL PROCEDURE (E.G., ANGIOSEAL PLUG, VASCULAR PLUG)	1
G0270	MEDICAL NUTRITION THERAPY; REASSESSMENT AND SUBSEQUENT INTERVENTION(S) FOLLOWING SECOND REFERRAL IN SAME YEAR FOR CHANGE IN DIAGNOSIS, MEDICAL CONDITION OR TREATMENT REGIMEN (INCLUDING ADDITIONAL HOURS NEEDED FOR RENAL DISEASE), INDIVIDUAL, FACE TO FACE WITH THE PATIENT, EACH 15 MINUTES	8
G0271	MEDICAL NUTRITION THERAPY, REASSESSMENT AND SUBSEQUENT INTERVENTION(S) FOLLOWING SECOND REFERRAL IN SAME YEAR FOR CHANGE IN DIAGNOSIS, MEDICAL CONDITION, OR TREATMENT REGIMEN (INCLUDING ADDITIONAL HOURS NEEDED FOR RENAL DISEASE), GROUP (2 OR MORE INDIVIDUALS), EACH 30 MINUTES	4

G0276	BLINDED PROCEDURE FOR LUMBAR STENOSIS, PERCUTANEOUS IMAGE-GUIDED LUMBAR DECOMPRESSION (PILD) OR PLACEBO-CONTROL, PERFORMED IN AN APPROVED COVERAGE WITH EVIDENCE DEVELOPMENT (CED) CLINICAL TRIAL	1
G0277	HYPERBARIC OXYGEN UNDER PRESSURE, FULL BODY CHAMBER, PER 30 MINUTE INTERVAL	4
G0278	ILIAC AND/OR FEMORAL ARTERY ANGIOGRAPHY, NON-SELECTIVE, BILATERAL OR IPSILATERAL TO CATHETER INSERTION, PERFORMED AT THE SAME TIME AS CARDIAC CATHETERIZATION AND/OR CORONARY ANGIOGRAPHY, INCLUDES POSITIONING OR PLACEMENT OF THE CATHETER IN THE DISTAL AORTA OR IPSILATERAL FEMORAL OR ILIAC ARTERY, INJECTION OF DYE, PRODUCTION OF PERMANENT IMAGES, AND RADIOLOGIC SUPERVISION AND INTERPRETATION (LIST SEPARATELY IN ADDITION TO PRIMARY PROCEDURE)	1
G0279	DIAGNOSTIC DIGITAL BREAST TOMOSYNTHESIS, UNILATERAL OR BILATERAL (LIST SEPARATELY IN ADDITION TO 77065 OR 77066)	1
G0281	ELECTRICAL STIMULATION, (UNATTENDED), TO ONE OR MORE AREAS, FOR CHRONIC STAGE III AND STAGE IV PRESSURE ULCERS, ARTERIAL ULCERS, DIABETIC ULCERS, AND VENOUS STASIS ULCERS NOT DEMONSTRATING MEASURABLE SIGNS OF HEALING AFTER 30 DAYS OF CONVENTIONAL CARE, AS PART OF A THERAPY PLAN OF CARE	1
G0282	ELECTRICAL STIMULATION, (UNATTENDED), TO ONE OR MORE AREAS, FOR WOUND CARE OTHER THAN DESCRIBED IN G0281	1
G0283	ELECTRICAL STIMULATION (UNATTENDED), TO ONE OR MORE AREAS FOR INDICATION(S) OTHER THAN WOUND CARE, AS PART OF A THERAPY PLAN OF CARE	1
G0288	RECONSTRUCTION, COMPUTED TOMOGRAPHIC ANGIOGRAPHY OF AORTA FOR SURGICAL PLANNING FOR VASCULAR SURGERY	1
G0289	ARTHROSCOPY, KNEE, SURGICAL, FOR REMOVAL OF LOOSE BODY, FOREIGN BODY, DEBRIDEMENT/SHAVING OF ARTICULAR CARTILAGE (CHONDROPLASTY) AT THE TIME OF OTHER SURGICAL KNEE ARTHROSCOPY IN A DIFFERENT COMPARTMENT OF THE SAME KNEE	1
G0293	NONCOVERED SURGICAL PROCEDURE(S) USING CONSCIOUS SEDATION, REGIONAL, GENERAL OR SPINAL ANESTHESIA IN A MEDICARE QUALIFYING CLINICAL TRIAL, PER DAY	1
G0294	NONCOVERED PROCEDURE(S) USING EITHER NO ANESTHESIA OR LOCAL ANESTHESIA ONLY, IN A MEDICARE QUALIFYING CLINICAL TRIAL, PER DAY	1
G0295	ELECTROMAGNETIC THERAPY, TO ONE OR MORE AREAS, FOR WOUND CARE OTHER THAN DESCRIBED IN G0329 OR FOR OTHER USES	1
G0296	COUNSELING VISIT TO DISCUSS NEED FOR LUNG CANCER SCREENING USING LOW DOSE CT SCAN (LDCT) (SERVICE IS FOR ELIGIBILITY DETERMINATION AND SHARED DECISION MAKING)	1
G0299	DIRECT SKILLED NURSING SERVICES OF A REGISTERED NURSE (RN) IN THE HOME HEALTH OR HOSPICE SETTING, EACH 15 MINUTES	999
G0300	DIRECT SKILLED NURSING SERVICES OF A LICENSED PRACTICAL NURSE (LPN) IN THE HOME HEALTH OR HOSPICE SETTING, EACH 15 MINUTES	999

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G0302	PRE-OPERATIVE PULMONARY SURGERY SERVICES FOR PREPARATION FOR LVRS, COMPLETE COURSE OF SERVICES, TO INCLUDE A MINIMUM OF 16 DAYS OF SERVICES	1
G0303	PRE-OPERATIVE PULMONARY SURGERY SERVICES FOR PREPARATION FOR LVRS, 10 TO 15 DAYS OF SERVICES	1
G0304	PRE-OPERATIVE PULMONARY SURGERY SERVICES FOR PREPARATION FOR LVRS, 1 TO 9 DAYS OF SERVICES	1
G0305	POST-DISCHARGE PULMONARY SURGERY SERVICES AFTER LVRS, MINIMUM OF 6 DAYS OF SERVICES	1
G0306	COMPLETE CBC, AUTOMATED (HGB, HCT, RBC, WBC, WITHOUT PLATELET COUNT) AND AUTOMATED WBC DIFFERENTIAL COUNT	4
G0307	COMPLETE (CBC), AUTOMATED (HGB, HCT, RBC, WBC; WITHOUT PLATELET COUNT)	4
G0327	Colorectal cancer screening; blood-based biomarker	1
G0328	COLORECTAL CANCER SCREENING; FECAL OCCULT BLOOD TEST, IMMUNOASSAY, 1-3 SIMULTANEOUS	1
G0329	ELECTROMAGNETIC THERAPY, TO ONE OR MORE AREAS FOR CHRONIC STAGE III AND STAGE IV PRESSURE ULCERS, ARTERIAL ULCERS, DIABETIC ULCERS AND VENOUS STASIS ULCERS NOT DEMONSTRATING MEASURABLE SIGNS OF HEALING AFTER 30 DAYS OF CONVENTIONAL CARE AS PART OF A THERAPY PLAN OF CARE	1
G0333	PHARMACY DISPENSING FEE FOR INHALATION DRUG(S); INITIAL 30-DAY SUPPLY AS A BENEFICIARY	1
G0337	HOSPICE EVALUATION AND COUNSELING SERVICES, PRE-ELECTION	1
G0339	IMAGE-GUIDED ROBOTIC LINEAR ACCELERATOR-BASED STEREOTACTIC RADIOSURGERY, COMPLETE COURSE OF THERAPY IN ONE SESSION OR FIRST SESSION OF FRACTIONATED TREATMENT	1
G0340	IMAGE-GUIDED ROBOTIC LINEAR ACCELERATOR-BASED STEREOTACTIC RADIOSURGERY, DELIVERY INCLUDING COLLIMATOR CHANGES AND CUSTOM PLUGGING, FRACTIONATED TREATMENT, ALL LESIONS, PER SESSION, SECOND THROUGH FIFTH SESSIONS, MAXIMUM FIVE SESSIONS PER COURSE OF TREATMENT	1
G0341	PERCUTANEOUS ISLET CELL TRANSPLANT, INCLUDES PORTAL VEIN CATHETERIZATION AND INFUSION	1
G0342	LAPAROSCOPY FOR ISLET CELL TRANSPLANT, INCLUDES PORTAL VEIN CATHETERIZATION AND INFUSION	1
G0343	LAPAROTOMY FOR ISLET CELL TRANSPLANT, INCLUDES PORTAL VEIN CATHETERIZATION AND INFUSION	1
G0372	PHYSICIAN SERVICE REQUIRED TO ESTABLISH AND DOCUMENT THE NEED FOR A POWER MOBILITY DEVICE	1
G0379	DIRECT ADMISSION OF PATIENT FOR HOSPITAL OBSERVATION CARE	1
G0379	DIRECT ADMISSION OF PATIENT FOR HOSPITAL OBSERVATION CARE	1

G0380	LEVEL 1 HOSPITAL EMERGENCY DEPARTMENT VISIT PROVIDED IN A TYPE B EMERGENCY DEPARTMENT; (THE ED MUST MEET AT LEAST ONE OF THE FOLLOWING REQUIREMENTS: (1) IT IS LICENSED BY THE STATE IN WHICH IT IS LOCATED UNDER APPLICABLE STATE LAW AS AN EMERGENCY ROOM OR EMERGENCY DEPARTMENT; (2) IT IS HELD OUT TO THE PUBLIC (BY NAME, POSTED SIGNS, ADVERTISING, OR OTHER MEANS) AS A PLACE THAT PROVIDES CARE FOR EMERGENCY MEDICAL CONDITIONS ON AN URGENT BASIS WITHOUT REQUIRING A PREVIOUSLY SCHEDULED APPOINTMENT; OR (3) DURING THE CALENDAR YEAR IMMEDIATELY PRECEDING THE CALENDAR YEAR IN WHICH A DETERMINATION UNDER 42 CFR 489.24 IS BEING MADE, BASED ON A REPRESENTATIVE SAMPLE OF PATIENT VISITS THAT OCCURRED DURING THAT CALENDAR YEAR, IT PROVIDES AT LEAST ONE-THIRD OF ALL OF ITS OUTPATIENT VISITS FOR THE TREATMENT OF EMERGENCY MEDICAL CONDITIONS ON AN URGENT BASIS WITHOUT REQUIRING A PREVIOUSLY SCHEDULED APPOINTMENT)	2
G0381	LEVEL 2 HOSPITAL EMERGENCY DEPARTMENT VISIT PROVIDED IN A TYPE B EMERGENCY DEPARTMENT; (THE ED MUST MEET AT LEAST ONE OF THE FOLLOWING REQUIREMENTS: (1) IT IS LICENSED BY THE STATE IN WHICH IT IS LOCATED UNDER APPLICABLE STATE LAW AS AN EMERGENCY ROOM OR EMERGENCY DEPARTMENT; (2) IT IS HELD OUT TO THE PUBLIC (BY NAME, POSTED SIGNS, ADVERTISING, OR OTHER MEANS) AS A PLACE THAT PROVIDES CARE FOR EMERGENCY MEDICAL CONDITIONS ON AN URGENT BASIS WITHOUT REQUIRING A PREVIOUSLY SCHEDULED APPOINTMENT; OR (3) DURING THE CALENDAR YEAR IMMEDIATELY PRECEDING THE CALENDAR YEAR IN WHICH A DETERMINATION UNDER 42 CFR 489.24 IS BEING MADE, BASED ON A REPRESENTATIVE SAMPLE OF PATIENT VISITS THAT OCCURRED DURING THAT CALENDAR YEAR, IT PROVIDES AT LEAST ONE-THIRD OF ALL OF ITS OUTPATIENT VISITS FOR THE TREATMENT OF EMERGENCY MEDICAL CONDITIONS ON AN URGENT BASIS WITHOUT REQUIRING A PREVIOUSLY SCHEDULED APPOINTMENT)	2
G0382	LEVEL 3 HOSPITAL EMERGENCY DEPARTMENT VISIT PROVIDED IN A TYPE B EMERGENCY DEPARTMENT; (THE ED MUST MEET AT LEAST ONE OF THE FOLLOWING REQUIREMENTS: (1) IT IS LICENSED BY THE STATE IN WHICH IT IS LOCATED UNDER APPLICABLE STATE LAW AS AN EMERGENCY ROOM OR EMERGENCY DEPARTMENT; (2) IT IS HELD OUT TO THE PUBLIC (BY NAME, POSTED SIGNS, ADVERTISING, OR OTHER MEANS) AS A PLACE THAT PROVIDES CARE FOR EMERGENCY MEDICAL CONDITIONS ON AN URGENT BASIS WITHOUT REQUIRING A PREVIOUSLY SCHEDULED APPOINTMENT; OR (3) DURING THE CALENDAR YEAR IMMEDIATELY PRECEDING THE CALENDAR YEAR IN WHICH A DETERMINATION UNDER 42 CFR 489.24 IS BEING MADE, BASED ON A REPRESENTATIVE SAMPLE OF PATIENT VISITS THAT OCCURRED DURING THAT CALENDAR YEAR, IT PROVIDES AT LEAST ONE-THIRD OF ALL OF ITS OUTPATIENT VISITS FOR THE TREATMENT OF EMERGENCY MEDICAL CONDITIONS ON AN URGENT BASIS WITHOUT REQUIRING A PREVIOUSLY SCHEDULED APPOINTMENT)	2

G0383	LEVEL 4 HOSPITAL EMERGENCY DEPARTMENT VISIT PROVIDED IN A TYPE B EMERGENCY DEPARTMENT; (THE ED MUST MEET AT LEAST ONE OF THE FOLLOWING REQUIREMENTS: (1) IT IS LICENSED BY THE STATE IN WHICH IT IS LOCATED UNDER APPLICABLE STATE LAW AS AN EMERGENCY ROOM OR EMERGENCY DEPARTMENT; (2) IT IS HELD OUT TO THE PUBLIC (BY NAME, POSTED SIGNS, ADVERTISING, OR OTHER MEANS) AS A PLACE THAT PROVIDES CARE FOR EMERGENCY MEDICAL CONDITIONS ON AN URGENT BASIS WITHOUT REQUIRING A PREVIOUSLY SCHEDULED APPOINTMENT; OR (3) DURING THE CALENDAR YEAR IMMEDIATELY PRECEDING THE CALENDAR YEAR IN WHICH A DETERMINATION UNDER 42 CFR 489.24 IS BEING MADE, BASED ON A REPRESENTATIVE SAMPLE OF PATIENT VISITS THAT OCCURRED DURING THAT CALENDAR YEAR, IT PROVIDES AT LEAST ONE-THIRD OF ALL OF ITS OUTPATIENT VISITS FOR THE TREATMENT OF EMERGENCY MEDICAL CONDITIONS ON AN URGENT BASIS WITHOUT REQUIRING A PREVIOUSLY SCHEDULED APPOINTMENT)	2
G0384	LEVEL 5 HOSPITAL EMERGENCY DEPARTMENT VISIT PROVIDED IN A TYPE B EMERGENCY DEPARTMENT; (THE ED MUST MEET AT LEAST ONE OF THE FOLLOWING REQUIREMENTS: (1) IT IS LICENSED BY THE STATE IN WHICH IT IS LOCATED UNDER APPLICABLE STATE LAW AS AN EMERGENCY ROOM OR EMERGENCY DEPARTMENT; (2) IT IS HELD OUT TO THE PUBLIC (BY NAME, POSTED SIGNS, ADVERTISING, OR OTHER MEANS) AS A PLACE THAT PROVIDES CARE FOR EMERGENCY MEDICAL CONDITIONS ON AN URGENT BASIS WITHOUT REQUIRING A PREVIOUSLY SCHEDULED APPOINTMENT; OR (3) DURING THE CALENDAR YEAR IMMEDIATELY PRECEDING THE CALENDAR YEAR IN WHICH A DETERMINATION UNDER 42 CFR 489.24 IS BEING MADE, BASED ON A REPRESENTATIVE SAMPLE OF PATIENT VISITS THAT OCCURRED DURING THAT CALENDAR YEAR, IT PROVIDES AT LEAST ONE-THIRD OF ALL OF ITS OUTPATIENT VISITS FOR THE TREATMENT OF EMERGENCY MEDICAL CONDITIONS ON AN URGENT BASIS WITHOUT REQUIRING A PREVIOUSLY SCHEDULED APPOINTMENT)	2
G0390	TRAUMA RESPONSE TEAM ASSOCIATED WITH HOSPITAL CRITICAL CARE SERVICE	1
G0396	ALCOHOL AND/OR SUBSTANCE (OTHER THAN TOBACCO) MISUSE STRUCTURED ASSESSMENT (E.G., AUDIT, DAST), AND BRIEF INTERVENTION 15 TO 30 MINUTES	1
G0397	ALCOHOL AND/OR SUBSTANCE (OTHER THAN TOBACCO) MISUSE STRUCTURED ASSESSMENT (E.G., AUDIT, DAST), AND INTERVENTION, GREATER THAN 30 MINUTES	1
G0398	HOME SLEEP STUDY TEST (HST) WITH TYPE II PORTABLE MONITOR, UNATTENDED; MINIMUM OF 7 CHANNELS: EEG, EOG, EMG, ECG/HEART RATE, AIRFLOW, RESPIRATORY EFFORT AND OXYGEN SATURATION	1
G0399	HOME SLEEP TEST (HST) WITH TYPE III PORTABLE MONITOR, UNATTENDED; MINIMUM OF 4 CHANNELS: 2 RESPIRATORY MOVEMENT/AIRFLOW, 1 ECG/HEART RATE AND 1 OXYGEN SATURATION	1
G0400	HOME SLEEP TEST (HST) WITH TYPE IV PORTABLE MONITOR, UNATTENDED; MINIMUM OF 3 CHANNELS	1
G0402	INITIAL PREVENTIVE PHYSICAL EXAMINATION; FACE-TO-FACE VISIT, SERVICES LIMITED TO NEW BENEFICIARY DURING THE FIRST 12 MONTHS OF MEDICARE ENROLLMENT	1

G0403	ELECTROCARDIOGRAM, ROUTINE ECG WITH 12 LEADS; PERFORMED AS A SCREENING FOR THE INITIAL PREVENTIVE PHYSICAL EXAMINATION WITH INTERPRETATION AND REPORT	1
G0404	ELECTROCARDIOGRAM, ROUTINE ECG WITH 12 LEADS; TRACING ONLY, WITHOUT INTERPRETATION AND REPORT, PERFORMED AS A SCREENING FOR THE INITIAL PREVENTIVE PHYSICAL EXAMINATION	1
G0405	ELECTROCARDIOGRAM, ROUTINE ECG WITH 12 LEADS; INTERPRETATION AND REPORT ONLY, PERFORMED AS A SCREENING FOR THE INITIAL PREVENTIVE PHYSICAL EXAMINATION	1
G0406	FOLLOW-UP INPATIENT CONSULTATION, LIMITED, PHYSICIANS TYPICALLY SPEND 15 MINUTES COMMUNICATING WITH THE PATIENT VIA TELEHEALTH	1
G0407	FOLLOW-UP INPATIENT CONSULTATION, INTERMEDIATE, PHYSICIANS TYPICALLY SPEND 25 MINUTES COMMUNICATING WITH THE PATIENT VIA TELEHEALTH	1
G0408	FOLLOW-UP INPATIENT CONSULTATION, COMPLEX, PHYSICIANS TYPICALLY SPEND 35 MINUTES COMMUNICATING WITH THE PATIENT VIA TELEHEALTH	1
G0410	GROUP PSYCHOTHERAPY OTHER THAN OF A MULTIPLE-FAMILY GROUP, IN A PARTIAL HOSPITALIZATION SETTING, APPROXIMATELY 45 TO 50 MINUTES	6
G0411	INTERACTIVE GROUP PSYCHOTHERAPY, IN A PARTIAL HOSPITALIZATION SETTING, APPROXIMATELY 45 TO 50 MINUTES	6
G0412	OPEN TREATMENT OF ILIAC SPINE(S), TUBEROSITY AVULSION, OR ILIAC WING FRACTURE(S), UNILATERAL OR BILATERAL FOR PELVIC BONE FRACTURE PATTERNS WHICH DO NOT DISRUPT THE PELVIC RING INCLUDES INTERNAL FIXATION, WHEN PERFORMED	1
G0413	PERCUTANEOUS SKELETAL FIXATION OF POSTERIOR PELVIC BONE FRACTURE AND/OR DISLOCATION, FOR FRACTURE PATTERNS WHICH DISRUPT THE PELVIC RING, UNILATERAL OR BILATERAL, (INCLUDES ILIUM, SACROILIAC JOINT AND/OR SACRUM)	1
G0414	OPEN TREATMENT OF ANTERIOR PELVIC BONE FRACTURE AND/OR DISLOCATION FOR FRACTURE PATTERNS WHICH DISRUPT THE PELVIC RING, UNILATERAL OR BILATERAL, INCLUDES INTERNAL FIXATION WHEN PERFORMED (INCLUDES PUBIC SYMPHYSIS AND/OR SUPERIOR/INFERIOR RAMI)	1
G0415	OPEN TREATMENT OF POSTERIOR PELVIC BONE FRACTURE AND/OR DISLOCATION, FOR FRACTURE PATTERNS WHICH DISRUPT THE PELVIC RING, UNILATERAL OR BILATERAL, INCLUDES INTERNAL FIXATION, WHEN PERFORMED (INCLUDES ILIUM, SACROILIAC JOINT AND/OR SACRUM)	1
G0416	SURGICAL PATHOLOGY, GROSS AND MICROSCOPIC EXAMINATIONS, FOR PROSTATE NEEDLE BIOPSY, ANY METHOD	1
G0420	FACE-TO-FACE EDUCATIONAL SERVICES RELATED TO THE CARE OF CHRONIC KIDNEY DISEASE; INDIVIDUAL, PER SESSION, PER ONE HOUR	2
G0421	FACE-TO-FACE EDUCATIONAL SERVICES RELATED TO THE CARE OF CHRONIC KIDNEY DISEASE; GROUP, PER SESSION, PER ONE HOUR	2
G0422	INTENSIVE CARDIAC REHABILITATION; WITH OR WITHOUT CONTINUOUS ECG MONITORING WITH EXERCISE, PER SESSION	6

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G0423	INTENSIVE CARDIAC REHABILITATION; WITH OR WITHOUT CONTINUOUS ECG MONITORING; WITHOUT EXERCISE, PER SESSION	6
G0424	PULMONARY REHABILITATION, INCLUDING EXERCISE (INCLUDES MONITORING), ONE HOUR, PER SESSION, UP TO TWO SESSIONS PER DAY	2
G0425	TELEHEALTH CONSULTATION, EMERGENCY DEPARTMENT OR INITIAL INPATIENT, TYPICALLY 30 MINUTES COMMUNICATING WITH THE PATIENT VIA TELEHEALTH	1
G0426	TELEHEALTH CONSULTATION, EMERGENCY DEPARTMENT OR INITIAL INPATIENT, TYPICALLY 50 MINUTES COMMUNICATING WITH THE PATIENT VIA TELEHEALTH	1
G0427	TELEHEALTH CONSULTATION, EMERGENCY DEPARTMENT OR INITIAL INPATIENT, TYPICALLY 70 MINUTES OR MORE COMMUNICATING WITH THE PATIENT VIA TELEHEALTH	1
G0428	COLLAGEN MENISCUS IMPLANT PROCEDURE FOR FILLING MENISCAL DEFECTS (E.G., CMI, COLLAGEN SCAFFOLD, MENAFLEX)	2
G0429	DERMAL FILLER INJECTION(S) FOR THE TREATMENT OF FACIAL LIPODYSTROPHY SYNDROME (LDS) (E.G., AS A RESULT OF HIGHLY ACTIVE ANTIRETROVIRAL THERAPY)	1
G0432	INFECTIOUS AGENT ANTIBODY DETECTION BY ENZYME IMMUNOASSAY (EIA) TECHNIQUE, HIV-1 AND/OR HIV-2, SCREENING	1
G0433	INFECTIOUS AGENT ANTIBODY DETECTION BY ENZYME-LINKED IMMUNOSORBENT ASSAY (ELISA) TECHNIQUE, HIV-1 AND/OR HIV-2, SCREENING	1
G0435	INFECTIOUS AGENT ANTIBODY DETECTION BY RAPID ANTIBODY TEST, HIV-1 AND/OR HIV-2, SCREENING	1
G0438	ANNUAL WELLNESS VISIT; INCLUDES A PERSONALIZED PREVENTION PLAN OF SERVICE (PPS), INITIAL VISIT	1
G0439	ANNUAL WELLNESS VISIT, INCLUDES A PERSONALIZED PREVENTION PLAN OF SERVICE (PPS), SUBSEQUENT VISIT	1
G0442	ANNUAL ALCOHOL MISUSE SCREENING, 15 MINUTES	1
G0443	BRIEF FACE-TO-FACE BEHAVIORAL COUNSELING FOR ALCOHOL MISUSE, 15 MINUTES	1
G0444	ANNUAL DEPRESSION SCREENING, 15 MINUTES	1
G0445	HIGH INTENSITY BEHAVIORAL COUNSELING TO PREVENT SEXUALLY TRANSMITTED INFECTION; FACE-TO-FACE, INDIVIDUAL, INCLUDES: EDUCATION, SKILLS TRAINING AND GUIDANCE ON HOW TO CHANGE SEXUAL BEHAVIOR; PERFORMED SEMI-ANNUALLY, 30 MINUTES	1
G0446	ANNUAL, FACE-TO-FACE INTENSIVE BEHAVIORAL THERAPY FOR CARDIOVASCULAR DISEASE, INDIVIDUAL, 15 MINUTES	1
G0447	FACE-TO-FACE BEHAVIORAL COUNSELING FOR OBESITY, 15 MINUTES	2
G0448	INSERTION OR REPLACEMENT OF A PERMANENT PACING CARDIOVERTER- DEFIBRILLATOR SYSTEM WITH TRANSVENOUS LEAD(S), SINGLE OR DUAL CHAMBER WITH INSERTION OF PACING ELECTRODE, CARDIAC VENOUS SYSTEM, FOR LEFT VENTRICULAR PACING	1
G0451	DEVELOPMENT TESTING, WITH INTERPRETATION AND REPORT, PER STANDARDIZED INSTRUMENT FORM	1
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G0452	MOLECULAR PATHOLOGY PROCEDURE; PHYSICIAN INTERPRETATION AND REPORT	1
G0453	CONTINUOUS INTRAOPERATIVE NEUROPHYSIOLOGY MONITORING, FROM OUTSIDE THE OPERATING ROOM (REMOTE OR NEARBY), PER PATIENT, (ATTENTION DIRECTED EXCLUSIVELY TO ONE PATIENT) EACH 15 MINUTES (LIST IN ADDITION TO PRIMARY PROCEDURE)	10
G0454	PHYSICIAN DOCUMENTATION OF FACE-TO-FACE VISIT FOR DURABLE MEDICAL EQUIPMENT DETERMINATION PERFORMED BY NURSE PRACTITIONER, PHYSICIAN ASSISTANT OR CLINICAL NURSE SPECIALIST	1
G0455	PREPARATION WITH INSTILLATION OF FECAL MICROBIOTA BY ANY METHOD, INCLUDING ASSESSMENT OF DONOR SPECIMEN	1
G0458	LOW DOSE RATE (LDR) PROSTATE BRACHYTHERAPY SERVICES, COMPOSITE RATE	1
G0459	INPATIENT TELEHEALTH PHARMACOLOGIC MANAGEMENT, INCLUDING PRESCRIPTION, USE, AND REVIEW OF MEDICATION WITH NO MORE THAN MINIMAL MEDICAL PSYCHOTHERAPY	1
G0460	AUTOLOGOUS PLATELET RICH PLASMA FOR CHRONIC WOUNDS/ULCERS, INCLUDING PHLEBOTOMY, CENTRIFUGATION, AND ALL OTHER PREPARATORY PROCEDURES, ADMINISTRATION AND DRESSINGS, PER TREATMENT	1
G0463	HOSPITAL OUTPATIENT CLINIC VISIT FOR ASSESSMENT AND MANAGEMENT OF A PATIENT	4
G0466	FEDERALLY QUALIFIED HEALTH CENTER (FQHC) VISIT, NEW PATIENT; A MEDICALLY-NECESSARY, FACE-TO-FACE ENCOUNTER (ONE-ON-ONE) BETWEEN A NEW PATIENT AND A FQHC PRACTITIONER DURING WHICH TIME ONE OR MORE FQHC SERVICES ARE RENDERED AND INCLUDES A TYPICAL BUNDLE OF MEDICARE-COVERED SERVICES THAT WOULD BE FURNISHED PER DIEM TO A PATIENT RECEIVING A FQHC VISIT	1
G0467	FEDERALLY QUALIFIED HEALTH CENTER (FQHC) VISIT, ESTABLISHED PATIENT; A MEDICALLY-NECESSARY, FACE-TO-FACE ENCOUNTER (ONE-ON-ONE) BETWEEN AN ESTABLISHED PATIENT AND A FQHC PRACTITIONER DURING WHICH TIME ONE OR MORE FQHC SERVICES ARE RENDERED AND INCLUDES A TYPICAL BUNDLE OF MEDICARE-COVERED SERVICES THAT WOULD BE FURNISHED PER DIEM TO A PATIENT RECEIVING A FQHC VISIT	2
G0468	FEDERALLY QUALIFIED HEALTH CENTER (FQHC) VISIT, IPPE OR AWV; A FQHC VISIT THAT INCLUDES AN INITIAL PREVENTIVE PHYSICAL EXAMINATION (IPPE) OR ANNUAL WELLNESS VISIT (AWV) AND INCLUDES A TYPICAL BUNDLE OF MEDICARE-COVERED SERVICES THAT WOULD BE FURNISHED PER DIEM TO A PATIENT RECEIVING AN IPPE OR AWV	1
G0469	FEDERALLY QUALIFIED HEALTH CENTER (FQHC) VISIT, MENTAL HEALTH, NEW PATIENT; A MEDICALLY-NECESSARY, FACE-TO-FACE MENTAL HEALTH ENCOUNTER (ONE-ON-ONE) BETWEEN A NEW PATIENT AND A FQHC PRACTITIONER DURING WHICH TIME ONE OR MORE FQHC SERVICES ARE RENDERED AND INCLUDES A TYPICAL BUNDLE OF MEDICARE-COVERED SERVICES THAT WOULD BE FURNISHED PER DIEM TO A PATIENT RECEIVING A MENTAL HEALTH VISIT	1
G0470	FEDERALLY QUALIFIED HEALTH CENTER (FQHC) VISIT, MENTAL HEALTH, ESTABLISHED PATIENT; A MEDICALLY-NECESSARY, FACE-TO-FACE MENTAL HEALTH ENCOUNTER (ONE-ON-ONE) BETWEEN AN ESTABLISHED PATIENT AND A FQHC PRACTITIONER DURING WHICH TIME ONE OR MORE FQHC SERVICES ARE RENDERED	2

	AND INCLUDES A TYPICAL BUNDLE OF MEDICARE-COVERED SERVICES THAT WOULD BE FURNISHED PER DIEM TO A PATIENT RECEIVING A MENTAL HEALTH VISIT	
G0471	COLLECTION OF VENOUS BLOOD BY VENIPUNCTURE OR URINE SAMPLE BY CATHETERIZATION FROM AN INDIVIDUAL IN A SKILLED NURSING FACILITY (SNF) OR BY A LABORATORY ON BEHALF OF A HOME HEALTH AGENCY (HHA)	2
G0472	HEPATITIS C ANTIBODY SCREENING, FOR INDIVIDUAL AT HIGH RISK AND OTHER COVERED INDICATION(S)	1
G0473	FACE-TO-FACE BEHAVIORAL COUNSELING FOR OBESITY, GROUP (2-10), 30 MINUTES	2
G0475	HIV ANTIGEN/ANTIBODY, COMBINATION ASSAY, SCREENING	1
G0476	INFECTIOUS AGENT DETECTION BY NUCLEIC ACID (DNA OR RNA); HUMAN PAPILLOMAVIRUS (HPV), HIGH-RISK TYPES (E.G., 16, 18, 31, 33, 35, 39, 45, 51, 52, 56, 58, 59, 68) FOR CERVICAL CANCER SCREENING, MUST BE PERFORMED IN ADDITION TO PAP TEST	1
G0480	DRUG TEST(S), DEFINITIVE, UTILIZING (1) DRUG IDENTIFICATION METHODS ABLE TO IDENTIFY INDIVIDUAL DRUGS AND DISTINGUISH BETWEEN STRUCTURAL ISOMERS (BUT NOT NECESSARILY STEREOISOMERS), INCLUDING, BUT NOT LIMITED TO GC/MS (ANY TYPE, SINGLE OR TANDEM) AND LC/MS (ANY TYPE, SINGLE OR TANDEM AND EXCLUDING IMMUNOASSAYS (E.G., IA, EIA, ELISA, EMIT, FPIA) AND ENZYMATIC METHODS (E.G., ALCOHOL DEHYDROGENASE)), (2) STABLE ISOTOPE OR OTHER UNIVERSALLY RECOGNIZED INTERNAL STANDARDS IN ALL SAMPLES (E.G., TO CONTROL FOR MATRIX EFFECTS, INTERFERENCES AND VARIATIONS IN SIGNAL STRENGTH), AND (3) METHOD OR DRUG-SPECIFIC CALIBRATION AND MATRIX-MATCHED QUALITY CONTROL MATERIAL (E.G., TO CONTROL FOR INSTRUMENT VARIATIONS AND MASS SPECTRAL DRIFT); QUALITATIVE OR QUANTITATIVE, ALL SOURCES, INCLUDES SPECIMEN VALIDITY TESTING, PER DAY; 1-7 DRUG CLASS(ES), INCLUDING METABOLITE(S) IF PERFORMED	1
G0481	DRUG TEST(S), DEFINITIVE, UTILIZING (1) DRUG IDENTIFICATION METHODS ABLE TO IDENTIFY INDIVIDUAL DRUGS AND DISTINGUISH BETWEEN STRUCTURAL ISOMERS (BUT NOT NECESSARILY STEREOISOMERS), INCLUDING, BUT NOT LIMITED TO GC/MS (ANY TYPE, SINGLE OR TANDEM AND EXCLUDING IMMUNOASSAYS (E.G., IA, EIA, ELISA, EMIT, FPIA) AND ENZYMATIC METHODS (E.G., ALCOHOL DEHYDROGENASE)), (2) STABLE ISOTOPE OR OTHER UNIVERSALLY RECOGNIZED INTERNAL STANDARDS IN ALL SAMPLES (E.G., TO CONTROL FOR MATRIX EFFECTS, INTERFERENCES AND VARIATIONS IN SIGNAL STRENGTH), AND (3) METHOD OR DRUG-SPECIFIC CALIBRATION AND MATRIX-MATCHED QUALITY CONTROL MATERIAL (E.G., TO CONTROL FOR INSTRUMENT VARIATIONS AND MASS SPECTRAL DRIFT); QUALITATIVE OR QUANTITATIVE, ALL SOURCES, INCLUDES SPECIMEN VALIDITY TESTING, PER DAY; 8-14 DRUG CLASS(ES), INCLUDING METABOLITE(S) IF PERFORMED	1

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G0482	DRUG TEST(S), DEFINITIVE, UTILIZING (1) DRUG IDENTIFICATION METHODS ABLE TO IDENTIFY INDIVIDUAL DRUGS AND DISTINGUISH BETWEEN STRUCTURAL ISOMERS (BUT NOT NECESSARILY STEREOISOMERS), INCLUDING, BUT NOT LIMITED TO GC/MS (ANY TYPE, SINGLE OR TANDEM AND EXCLUDING IMMUNOASSAYS (E.G., IA, EIA, ELISA, EMIT, FPIA) AND ENZYMATIC METHODS (E.G., ALCOHOL DEHYDROGENASE)), (2) STABLE ISOTOPE OR OTHER UNIVERSALLY RECOGNIZED INTERNAL STANDARDS IN ALL SAMPLES (E.G., TO CONTROL FOR MATRIX EFFECTS, INTERFERENCES AND VARIATIONS IN SIGNAL STRENGTH), AND (3) METHOD OR DRUG-SPECIFIC CALIBRATION AND MATRIX-MATCHED QUALITY CONTROL MATERIAL (E.G., TO CONTROL FOR INSTRUMENT VARIATIONS AND MASS SPECTRAL DRIFT); QUALITATIVE OR QUANTITATIVE, ALL SOURCES, INCLUDES SPECIMEN VALIDITY TESTING, PER DAY; 15-21 DRUG CLASS(ES), INCLUDING METABOLITE(S) IF PERFORMED	1
G0483	DRUG TEST(S), DEFINITIVE, UTILIZING (1) DRUG IDENTIFICATION METHODS ABLE TO IDENTIFY INDIVIDUAL DRUGS AND DISTINGUISH BETWEEN STRUCTURAL ISOMERS (BUT NOT NECESSARILY STEREOISOMERS), INCLUDING, BUT NOT LIMITED TO GC/MS (ANY TYPE, SINGLE OR TANDEM AND EXCLUDING IMMUNOASSAYS (E.G., IA, EIA, ELISA, EMIT, FPIA) AND ENZYMATIC METHODS (E.G., ALCOHOL DEHYDROGENASE)), (2) STABLE ISOTOPE OR OTHER UNIVERSALLY RECOGNIZED INTERNAL STANDARDS IN ALL SAMPLES (E.G., TO CONTROL FOR MATRIX EFFECTS, INTERFERENCES AND VARIATIONS IN SIGNAL STRENGTH), AND (3) METHOD OR DRUG-SPECIFIC CALIBRATION AND MATRIX-MATCHED QUALITY CONTROL MATERIAL (E.G., TO CONTROL FOR INSTRUMENT VARIATIONS AND MASS SPECTRAL DRIFT); QUALITATIVE OR QUANTITATIVE, ALL SOURCES, INCLUDES SPECIMEN VALIDITY TESTING, PER DAY; 22 OR MORE DRUG CLASS(ES), INCLUDING METABOLITE(S) IF PERFORMED	1
G0490	FACE-TO-FACE HOME HEALTH NURSING VISIT BY A RURAL HEALTH CLINIC (RHC) OR FEDERALLY QUALIFIED HEALTH CENTER (FQHC) IN AN AREA WITH A SHORTAGE OF HOME HEALTH AGENCIES; (SERVICES LIMITED TO RN OR LPN ONLY)	2
G0491	DIALYSIS PROCEDURE AT A MEDICARE CERTIFIED ESRD FACILITY FOR ACUTE KIDNEY INJURY WITHOUT ESRD	1
G0492	DIALYSIS PROCEDURE WITH SINGLE EVALUATION BY A PHYSICIAN OR OTHER QUALIFIED HEALTH CARE PROFESSIONAL FOR ACUTE KIDNEY INJURY WITHOUT ESRD	1
G0493	SKILLED SERVICES OF A REGISTERED NURSE (RN) FOR THE OBSERVATION AND ASSESSMENT OF THE PATIENT'S CONDITION, EACH 15 MINUTES (THE CHANGE IN THE PATIENT'S CONDITION REQUIRES SKILLED NURSING PERSONNEL TO IDENTIFY AND EVALUATE THE PATIENT'S NEED FOR POSSIBLE MODIFICATION OF TREATMENT IN THE HOME HEALTH OR HOSPICE SETTING)	1
G0494	SKILLED SERVICES OF A LICENSED PRACTICAL NURSE (LPN) FOR THE OBSERVATION AND ASSESSMENT OF THE PATIENT'S CONDITION, EACH 15 MINUTES (THE CHANGE IN THE PATIENT'S CONDITION REQUIRES SKILLED NURSING PERSONNEL TO IDENTIFY AND EVALUATE THE PATIENT'S NEED FOR POSSIBLE MODIFICATION OF TREATMENT IN THE HOME HEALTH OR HOSPICE SETTING)	1
G0495	SKILLED SERVICES OF A REGISTERED NURSE (RN), IN THE TRAINING AND/OR EDUCATION OF A PATIENT OR FAMILY MEMBER, IN THE HOME HEALTH OR HOSPICE SETTING, EACH 15 MINUTES	1

G0496	SKILLED SERVICES OF A LICENSED PRACTICAL NURSE (LPN), IN THE TRAINING AND/OR EDUCATION OF A PATIENT OR FAMILY MEMBER, IN THE HOME HEALTH OR HOSPICE SETTING, EACH 15 MINUTES	1
G0498	CHEMOTHERAPY ADMINISTRATION, INTRAVENOUS INFUSION TECHNIQUE; INITIATION OF INFUSION IN THE OFFICE/CLINIC SETTING USING OFFICE/CLINIC PUMP/SUPPLIES, WITH CONTINUATION OF THE INFUSION IN THE COMMUNITY SETTING (E.G., HOME, DOMICILIARY, REST HOME OR ASSISTED LIVING) USING A PORTABLE PUMP PROVIDED BY THE OFFICE/CLINIC, INCLUDES FOLLOW UP OFFICE/CLINIC VISIT AT THE CONCLUSION OF THE INFUSION	1
G0499	HEPATITIS B SCREENING IN NON-PREGNANT, HIGH RISK INDIVIDUAL INCLUDES HEPATITIS B SURFACE ANTIGEN (HBSAG), ANTIBODIES TO HBSAG (ANTI-HBS) AND ANTIBODIES TO HEPATITIS B CORE ANTIGEN (ANTI-HBC), AND IS FOLLOWED BY A NEUTRALIZING CONFIRMATORY TEST, WHEN PERFORMED, ONLY FOR AN INITIALLY REACTIVE HBSAG RESULT	1
G0500	MODERATE SEDATION SERVICES PROVIDED BY THE SAME PHYSICIAN OR OTHER QUALIFIED HEALTH CARE PROFESSIONAL PERFORMING A GASTROINTESTINAL ENDOSCOPIC SERVICE THAT SEDATION SUPPORTS, REQUIRING THE PRESENCE OF AN INDEPENDENT TRAINED OBSERVER TO ASSIST IN THE MONITORING OF THE PATIENT'S LEVEL OF CONSCIOUSNESS AND PHYSIOLOGICAL STATUS; INITIAL 15 MINUTES OF INTRA-SERVICE TIME; PATIENT AGE 5 YEARS OR OLDER (ADDITIONAL TIME MAY BE REPORTED WITH 99153, AS APPROPRIATE)	1
G0501	RESOURCE-INTENSIVE SERVICES FOR PATIENTS FOR WHOM THE USE OF SPECIALIZED MOBILITY-ASSISTIVE TECHNOLOGY (SUCH AS ADJUSTABLE HEIGHT CHAIRS OR TABLES, PATIENT LIFT, AND ADJUSTABLE PADDED LEG SUPPORTS) IS MEDICALLY NECESSARY AND USED DURING THE PROVISION OF AN OFFICE/OUTPATIENT, EVALUATION AND MANAGEMENT VISIT (LIST SEPARATELY IN ADDITION TO PRIMARY SERVICE)	1
G0506	COMPREHENSIVE ASSESSMENT OF AND CARE PLANNING FOR PATIENTS REQUIRING CHRONIC CARE MANAGEMENT SERVICES (LIST SEPARATELY IN ADDITION TO PRIMARY MONTHLY CARE MANAGEMENT SERVICE)	1
G0508	TELEHEALTH CONSULTATION, CRITICAL CARE, INITIAL, PHYSICIANS TYPICALLY SPEND 60 MINUTES COMMUNICATING WITH THE PATIENT AND PROVIDERS VIA TELEHEALTH	1
G0509	TELEHEALTH CONSULTATION, CRITICAL CARE, SUBSEQUENT, PHYSICIANS TYPICALLY SPEND 50 MINUTES COMMUNICATING WITH THE PATIENT AND PROVIDERS VIA TELEHEALTH	1
G0511	RURAL HEALTH CLINIC OR FEDERALLY QUALIFIED HEALTH CENTER (RHC OR FQHC) ONLY, GENERAL CARE MANAGEMENT, 20 MINUTES OR MORE OF CLINICAL STAFF TIME FOR CHRONIC CARE MANAGEMENT SERVICES OR BEHAVIORAL HEALTH INTEGRATION SERVICES DIRECTED BY AN RHC OR FQHC PRACTITIONER (PHYSICIAN, NP, PA, OR CNM), PER CALENDAR MONTH	1
G0512	RURAL HEALTH CLINIC OR FEDERALLY QUALIFIED HEALTH CENTER (RHC/FQHC) ONLY, PSYCHIATRIC COLLABORATIVE CARE MODEL (PSYCHIATRIC COCM), 60 MINUTES OR MORE OF CLINICAL STAFF TIME FOR PSYCHIATRIC COCM SERVICES DIRECTED BY AN RHC OR FQHC PRACTITIONER (PHYSICIAN, NP, PA, OR CNM) AND INCLUDING SERVICES FURNISHED BY A BEHAVIORAL HEALTH CARE MANAGER AND CONSULTATION WITH A PSYCHIATRIC CONSULTANT, PER CALENDAR MONTH	1

G0513	PROLONGED PREVENTIVE SERVICE(S) (BEYOND THE TYPICAL SERVICE TIME OF THE PRIMARY PROCEDURE), IN THE OFFICE OR OTHER OUTPATIENT SETTING REQUIRING DIRECT PATIENT CONTACT BEYOND THE USUAL SERVICE; FIRST 30 MINUTES (LIST SEPARATELY IN ADDITION TO CODE FOR PREVENTIVE SERVICE)	1
G0514	PROLONGED PREVENTIVE SERVICE(S) (BEYOND THE TYPICAL SERVICE TIME OF THE PRIMARY PROCEDURE), IN THE OFFICE OR OTHER OUTPATIENT SETTING REQUIRING DIRECT PATIENT CONTACT BEYOND THE USUAL SERVICE; EACH ADDITIONAL 30 MINUTES (LIST SEPARATELY IN ADDITION TO CODE G0513 FOR ADDITIONAL 30 MINUTES OF PREVENTIVE SERVICE)	1
G0516	INSERTION OF NON-BIODEGRADABLE DRUG DELIVERY IMPLANTS, 4 OR MORE (SERVICES FOR SUBDERMAL ROD IMPLANT)	1
G0517	REMOVAL OF NON-BIODEGRADABLE DRUG DELIVERY IMPLANTS, 4 OR MORE (SERVICES FOR SUBDERMAL IMPLANTS)	1
G0518	REMOVAL WITH REINSERTION, NON-BIODEGRADABLE DRUG DELIVERY IMPLANTS, 4 OR MORE (SERVICES FOR SUBDERMAL IMPLANTS)	1
G0659	DRUG TEST(S), DEFINITIVE, UTILIZING DRUG IDENTIFICATION METHODS ABLE TO IDENTIFY INDIVIDUAL DRUGS AND DISTINGUISH BETWEEN STRUCTURAL ISOMERS (BUT NOT NECESSARILY STEREOISOMERS), INCLUDING BUT NOT LIMITED TO GC/MS (ANY TYPE, SINGLE OR TANDEM), EXCLUDING IMMUNOASSAYS (E.G., IA, EIA, ELISA, EMIT, FPIA) AND ENZYMATIC METHODS (E.G., ALCOHOL DEHYDROGENASE), PERFORMED WITHOUT METHOD OR DRUG-SPECIFIC CALIBRATION, WITHOUT MATRIX-MATCHED QUALITY CONTROL MATERIAL, OR WITHOUT USE OF STABLE ISOTOPE OR OTHER UNIVERSALLY RECOGNIZED INTERNAL STANDARD(S) FOR EACH DRUG, DRUG METABOLITE OR DRUG CLASS PER SPECIMEN; QUALITATIVE OR QUANTITATIVE, ALL SOURCES, INCLUDES SPECIMEN VALIDITY TESTING, PER DAY, ANY NUMBER OF DRUG CLASSES	1
G2000	BLINDED ADMINISTRATION OF CONVULSIVE THERAPY PROCEDURE, EITHER ELECTROCONVULSIVE THERAPY (ECT, CURRENT COVERED GOLD STANDARD) OR MAGNETIC SEIZURE THERAPY (MST, NON-COVERED EXPERIMENTAL THERAPY), PERFORMED IN AN APPROVED IDE-BASED CLINICAL TRIAL, PER TREATMENT SESSION	1
G2001	BRIEF (20 MINUTES) IN-HOME VISIT FOR A NEW PATIENT POST-DISCHARGE. FOR USE ONLY IN A MEDICARE-APPROVED CMMI MODEL. (SERVICES MUST BE FURNISHED WITHIN A BENEFICIARY'S HOME, DOMICILIARY, REST HOME, ASSISTED LIVING AND/OR NURSING FACILITY WITHIN 90 DAYS FOLLOWING DISCHARGE FROM AN INPATIENT FACILITY AND NO MORE THAN 9 TIMES.)	1
G2002	LIMITED (30 MINUTES) IN-HOME VISIT FOR A NEW PATIENT POST-DISCHARGE. FOR USE ONLY IN A MEDICARE-APPROVED CMMI MODEL. (SERVICES MUST BE FURNISHED WITHIN A BENEFICIARY'S HOME, DOMICILIARY, REST HOME, ASSISTED LIVING AND/OR NURSING FACILITY WITHIN 90 DAYS FOLLOWING DISCHARGE FROM AN INPATIENT FACILITY AND NO MORE THAN 9 TIMES.)	1
G2003	MODERATE (45 MINUTES) IN-HOME VISIT FOR A NEW PATIENT POST-DISCHARGE. FOR USE ONLY IN A MEDICARE-APPROVED CMMI MODEL. (SERVICES MUST BE FURNISHED WITHIN A BENEFICIARY'S HOME, DOMICILIARY, REST HOME, ASSISTED LIVING AND/OR NURSING FACILITY WITHIN 90 DAYS FOLLOWING DISCHARGE FROM AN INPATIENT FACILITY AND NO MORE THAN 9 TIMES.)	1

G2004	COMPREHENSIVE (60 MINUTES) IN-HOME VISIT FOR A NEW PATIENT POST- DISCHARGE. FOR USE ONLY IN A MEDICARE-APPROVED CMMI MODEL. (SERVICES MUST BE FURNISHED WITHIN A BENEFICIARY'S HOME, DOMICILIARY, REST HOME, ASSISTED LIVING AND/OR NURSING FACILITY WITHIN 90 DAYS FOLLOWING DISCHARGE FROM AN INPATIENT FACILITY AND NO MORE THAN 9 TIMES.)	1
G2005	EXTENSIVE (75 MINUTES) IN-HOME VISIT FOR A NEW PATIENT POST-DISCHARGE. FOR USE ONLY IN A MEDICARE-APPROVED CMMI MODEL. (SERVICES MUST BE FURNISHED WITHIN A BENEFICIARY'S HOME, DOMICILIARY, REST HOME, ASSISTED LIVING AND/OR NURSING FACILITY WITHIN 90 DAYS FOLLOWING DISCHARGE FROM AN INPATIENT FACILITY AND NO MORE THAN 9 TIMES.)	1
G2006	BRIEF (20 MINUTES) IN-HOME VISIT FOR AN EXISTING PATIENT POST-DISCHARGE. FOR USE ONLY IN A MEDICARE-APPROVED CMMI MODEL. (SERVICES MUST BE FURNISHED WITHIN A BENEFICIARY'S HOME, DOMICILIARY, REST HOME, ASSISTED LIVING AND/OR NURSING FACILITY WITHIN 90 DAYS FOLLOWING DISCHARGE FROM AN INPATIENT FACILITY AND NO MORE THAN 9 TIMES.)	1
G2007	LIMITED (30 MINUTES) IN-HOME VISIT FOR AN EXISTING PATIENT POST-DISCHARGE. FOR USE ONLY IN A MEDICARE-APPROVED CMMI MODEL. (SERVICES MUST BE FURNISHED WITHIN A BENEFICIARY'S HOME, DOMICILIARY, REST HOME, ASSISTED LIVING AND/OR NURSING FACILITY WITHIN 90 DAYS FOLLOWING DISCHARGE FROM AN INPATIENT FACILITY AND NO MORE THAN 9 TIMES.)	1
G2008	MODERATE (45 MINUTES) IN-HOME VISIT FOR AN EXISTING PATIENT POST- DISCHARGE. FOR USE ONLY IN A MEDICARE-APPROVED CMMI MODEL. (SERVICES MUST BE FURNISHED WITHIN A BENEFICIARY'S HOME, DOMICILIARY, REST HOME, ASSISTED LIVING AND/OR NURSING FACILITY WITHIN 90 DAYS FOLLOWING DISCHARGE FROM AN INPATIENT FACILITY AND NO MORE THAN 9 TIMES.)	1
G2009	COMPREHENSIVE (60 MINUTES) IN-HOME VISIT FOR AN EXISTING PATIENT POST- DISCHARGE. FOR USE ONLY IN A MEDICARE-APPROVED CMMI MODEL. (SERVICES MUST BE FURNISHED WITHIN A BENEFICIARY'S HOME, DOMICILIARY, REST HOME, ASSISTED LIVING AND/OR NURSING FACILITY WITHIN 90 DAYS FOLLOWING DISCHARGE FROM AN INPATIENT FACILITY AND NO MORE THAN 9 TIMES.)	1
G2010	REMOTE EVALUATION OF RECORDED VIDEO AND/OR IMAGES SUBMITTED BY AN ESTABLISHED PATIENT (E.G., STORE AND FORWARD), INCLUDING INTERPRETATION WITH FOLLOW-UP WITH THE PATIENT WITHIN 24 BUSINESS HOURS, NOT ORIGINATING FROM A RELATED E/M SERVICE PROVIDED WITHIN THE PREVIOUS 7 DAYS NOR LEADING TO AN E/M SERVICE OR PROCEDURE WITHIN THE NEXT 24 HOURS OR SOONEST AVAILABLE APPOINTMENT	1
G2011	ALCOHOL AND/OR SUBSTANCE (OTHER THAN TOBACCO) MISUSE STRUCTURED ASSESSMENT (E.G., AUDIT, DAST), AND BRIEF INTERVENTION, 5-14 MINUTES	1
G2012	BRIEF COMMUNICATION TECHNOLOGY-BASED SERVICE, E.G. VIRTUAL CHECK-IN, BY A PHYSICIAN OR OTHER QUALIFIED HEALTH CARE PROFESSIONAL WHO CAN REPORT EVALUATION AND MANAGEMENT SERVICES, PROVIDED TO AN ESTABLISHED PATIENT, NOT ORIGINATING FROM A RELATED E/M SERVICE PROVIDED WITHIN THE PREVIOUS 7 DAYS NOR LEADING TO AN E/M SERVICE OR PROCEDURE WITHIN THE NEXT 24 HOURS OR SOONEST AVAILABLE APPOINTMENT; 5-10 MINUTES OF MEDICAL DISCUSSION	1

G2013	EXTENSIVE (75 MINUTES) IN-HOME VISIT FOR AN EXISTING PATIENT POST-DISCHARGE. FOR USE ONLY IN A MEDICARE-APPROVED CMMI MODEL. (SERVICES MUST BE FURNISHED WITHIN A BENEFICIARY'S HOME, DOMICILIARY, REST HOME, ASSISTED LIVING AND/OR NURSING FACILITY WITHIN 90 DAYS FOLLOWING DISCHARGE FROM AN INPATIENT FACILITY AND NO MORE THAN 9 TIMES.)	1
G2014	LIMITED (30 MINUTES) CARE PLAN OVERSIGHT. FOR USE ONLY IN A MEDICARE-APPROVED CMMI MODEL. (SERVICES MUST BE FURNISHED WITHIN A BENEFICIARY'S HOME, DOMICILIARY, REST HOME, ASSISTED LIVING AND/OR NURSING FACILITY WITHIN 90 DAYS FOLLOWING DISCHARGE FROM AN INPATIENT FACILITY AND NO MORE THAN 9 TIMES.)	1
G2015	COMPREHENSIVE (60 MINS) HOME CARE PLAN OVERSIGHT. FOR USE ONLY IN A MEDICARE-APPROVED CMMI MODEL. (SERVICES MUST BE FURNISHED WITHIN A BENEFICIARY'S HOME, DOMICILIARY, REST HOME, ASSISTED LIVING AND/OR NURSING FACILITY WITHIN 90 DAYS FOLLOWING DISCHARGE FROM AN INPATIENT FACILITY.)	1
G2020	Services for high intensity clinical services associated with the initial engagement and outreach of beneficiaries assigned to the sip component of the pcf model (do not bill with chronic care management codes)	1
G2023	SPECIMEN COLLECTION FOR SEVERE ACUTE RESPIRATORY SYNDROME CORONAVIRUS 2 (SARS-COV-2) (CORONAVIRUS DISEASE [COVID-19]), ANY SPECIMEN SOURCE	1
G2024	SPECIMEN COLLECTION FOR SEVERE ACUTE RESPIRATORY SYNDROME CORONAVIRUS 2 (SARS-COV-2) (CORONAVIRUS DISEASE [COVID-19]) FROM AN INDIVIDUAL IN A SNF OR BY A LABORATORY ON BEHALF OF A HHA, ANY SPECIMEN SOURCE	2
G2025	PAYMENT FOR A TELEHEALTH DISTANT SITE SERVICE FURNISHED BY A RURAL HEALTH CLINIC (RHC) OR FEDERALLY QUALIFIED HEALTH CENTER (FQHC) ONLY	1
G2064	COMPREHENSIVE CARE MANAGEMENT SERVICES FOR A SINGLE HIGH-RISK DISEASE, E.G., PRINCIPAL CARE MANAGEMENT, AT LEAST 30 MINUTES OF PHYSICIAN OR OTHER QUALIFIED HEALTH CARE PROFESSIONAL TIME PER CALENDAR MONTH WITH THE FOLLOWING ELEMENTS: ONE COMPLEX CHRONIC CONDITION LASTING AT LEAST 3 MONTHS, WHICH IS THE FOCUS OF THE CARE PLAN, THE CONDITION IS OF SUFFICIENT SEVERITY TO PLACE PATIENT AT RISK OF HOSPITALIZATION OR HAVE BEEN THE CAUSE OF A RECENT HOSPITALIZATION, THE CONDITION REQUIRES DEVELOPMENT OR REVISION OF DISEASE-SPECIFIC CARE PLAN, THE CONDITION REQUIRES FREQUENT ADJUSTMENTS IN THE MEDICATION REGIMEN, AND/OR THE MANAGEMENT OF THE CONDITION IS UNUSUALLY COMPLEX DUE TO COMORBIDITIES	1
G2065	COMPREHENSIVE CARE MANAGEMENT FOR A SINGLE HIGH-RISK DISEASE SERVICES, E.G. PRINCIPAL CARE MANAGEMENT, AT LEAST 30 MINUTES OF CLINICAL STAFF TIME DIRECTED BY A PHYSICIAN OR OTHER QUALIFIED HEALTH CARE PROFESSIONAL, PER CALENDAR MONTH WITH THE FOLLOWING ELEMENTS: ONE COMPLEX CHRONIC CONDITION LASTING AT LEAST 3 MONTHS, WHICH IS THE FOCUS OF THE CARE PLAN, THE CONDITION IS OF SUFFICIENT SEVERITY TO PLACE PATIENT AT RISK OF HOSPITALIZATION OR HAVE BEEN CAUSE OF A RECENT HOSPITALIZATION, THE CONDITION REQUIRES DEVELOPMENT OR REVISION OF DISEASE-SPECIFIC CARE PLAN, THE CONDITION REQUIRES FREQUENT ADJUSTMENTS	1

	IN THE MEDICATION REGIMEN, AND/OR THE MANAGEMENT OF THE CONDITION IS UNUSUALLY COMPLEX DUE TO COMORBIDITIES	
G2066	INTERROGATION DEVICE EVALUATION(S), (REMOTE) UP TO 30 DAYS; IMPLANTABLE CARDIOVASCULAR PHYSIOLOGIC MONITOR SYSTEM, IMPLANTABLE LOOP RECORDER SYSTEM, OR SUBCUTANEOUS CARDIAC RHYTHM MONITOR SYSTEM, REMOTE DATA ACQUISITION(S), RECEIPT OF TRANSMISSIONS AND TECHNICIAN REVIEW, TECHNICAL SUPPORT AND DISTRIBUTION OF RESULTS	1
G2067	MEDICATION ASSISTED TREATMENT, METHADONE; WEEKLY BUNDLE INCLUDING DISPENSING AND/OR ADMINISTRATION, SUBSTANCE USE COUNSELING, INDIVIDUAL AND GROUP THERAPY, AND TOXICOLOGY TESTING, IF PERFORMED (PROVISION OF THE SERVICES BY A MEDICARE-ENROLLED OPIOID TREATMENT PROGRAM)	1
G2068	MEDICATION ASSISTED TREATMENT, BUPRENORPHINE (ORAL); WEEKLY BUNDLE INCLUDING DISPENSING AND/OR ADMINISTRATION, SUBSTANCE USE COUNSELING, INDIVIDUAL AND GROUP THERAPY, AND TOXICOLOGY TESTING IF PERFORMED (PROVISION OF THE SERVICES BY A MEDICARE-ENROLLED OPIOID TREATMENT PROGRAM)	1
G2069	MEDICATION ASSISTED TREATMENT, BUPRENORPHINE (INJECTABLE); WEEKLY BUNDLE INCLUDING DISPENSING AND/OR ADMINISTRATION, SUBSTANCE USE COUNSELING, INDIVIDUAL AND GROUP THERAPY, AND TOXICOLOGY TESTING IF PERFORMED (PROVISION OF THE SERVICES BY A MEDICARE-ENROLLED OPIOID TREATMENT PROGRAM)	1
G2070	MEDICATION ASSISTED TREATMENT, BUPRENORPHINE (IMPLANT INSERTION); WEEKLY BUNDLE INCLUDING DISPENSING AND/OR ADMINISTRATION, SUBSTANCE USE COUNSELING, INDIVIDUAL AND GROUP THERAPY, AND TOXICOLOGY TESTING IF PERFORMED (PROVISION OF THE SERVICES BY A MEDICARE-ENROLLED OPIOID TREATMENT PROGRAM)	1
G2071	MEDICATION ASSISTED TREATMENT, BUPRENORPHINE (IMPLANT REMOVAL); WEEKLY BUNDLE INCLUDING DISPENSING AND/OR ADMINISTRATION, SUBSTANCE USE COUNSELING, INDIVIDUAL AND GROUP THERAPY, AND TOXICOLOGY TESTING IF PERFORMED (PROVISION OF THE SERVICES BY A MEDICARE-ENROLLED OPIOID TREATMENT PROGRAM)	1
G2072	MEDICATION ASSISTED TREATMENT, BUPRENORPHINE (IMPLANT INSERTION AND REMOVAL); WEEKLY BUNDLE INCLUDING DISPENSING AND/OR ADMINISTRATION, SUBSTANCE USE COUNSELING, INDIVIDUAL AND GROUP THERAPY, AND TOXICOLOGY TESTING IF PERFORMED (PROVISION OF THE SERVICES BY A MEDICARE-ENROLLED OPIOID TREATMENT PROGRAM)	1
G2073	MEDICATION ASSISTED TREATMENT, NALTREXONE; WEEKLY BUNDLE INCLUDING DISPENSING AND/OR ADMINISTRATION, SUBSTANCE USE COUNSELING, INDIVIDUAL AND GROUP THERAPY, AND TOXICOLOGY TESTING IF PERFORMED (PROVISION OF THE SERVICES BY A MEDICARE-ENROLLED OPIOID TREATMENT PROGRAM)	1

G2074	MEDICATION ASSISTED TREATMENT, WEEKLY BUNDLE NOT INCLUDING THE DRUG, INCLUDING SUBSTANCE USE COUNSELING, INDIVIDUAL AND GROUP THERAPY, AND TOXICOLOGY TESTING IF PERFORMED (PROVISION OF THE SERVICES BY A MEDICARE-ENROLLED OPIOID TREATMENT PROGRAM)	1
G2075	MEDICATION ASSISTED TREATMENT, MEDICATION NOT OTHERWISE SPECIFIED; WEEKLY BUNDLE INCLUDING DISPENSING AND/OR ADMINISTRATION, SUBSTANCE USE COUNSELING, INDIVIDUAL AND GROUP THERAPY, AND TOXICOLOGY TESTING, IF PERFORMED (PROVISION OF THE SERVICES BY A MEDICARE-ENROLLED OPIOID TREATMENT PROGRAM)	1
G2076	INTAKE ACTIVITIES, INCLUDING INITIAL MEDICAL EXAMINATION THAT IS A COMPLETE, FULLY DOCUMENTED PHYSICAL EVALUATION AND INITIAL ASSESSMENT BY A PROGRAM PHYSICIAN OR A PRIMARY CARE PHYSICIAN, OR AN AUTHORIZED HEALTHCARE PROFESSIONAL UNDER THE SUPERVISION OF A PROGRAM PHYSICIAN QUALIFIED PERSONNEL THAT INCLUDES PREPARATION OF A TREATMENT PLAN THAT INCLUDES THE PATIENT'S SHORT-TERM GOALS AND THE TASKS THE PATIENT MUST PERFORM TO COMPLETE THE SHORT-TERM GOALS; THE PATIENT'S REQUIREMENTS FOR EDUCATION, VOCATIONAL REHABILITATION, AND EMPLOYMENT; AND THE MEDICAL, PSYCHO- SOCIAL, ECONOMIC, LEGAL, OR OTHER SUPPORTIVE SERVICES THAT A PATIENT NEEDS, CONDUCTED BY QUALIFIED PERSONNEL (PROVISION OF THE SERVICES BY A MEDICARE-ENROLLED OPIOID TREATMENT PROGRAM); LIST SEPARATELY IN ADDITION TO CODE FOR PRIMARY PROCEDURE	1
G2078	TAKE-HOME SUPPLY OF METHADONE; UP TO 7 ADDITIONAL DAY SUPPLY (PROVISION OF THE SERVICES BY A MEDICARE-ENROLLED OPIOID TREATMENT PROGRAM); LIST SEPARATELY IN ADDITION TO CODE FOR PRIMARY PROCEDURE	3
G2079	TAKE-HOME SUPPLY OF BUPRENORPHINE (ORAL); UP TO 7 ADDITIONAL DAY SUPPLY (PROVISION OF THE SERVICES BY A MEDICARE-ENROLLED OPIOID TREATMENT PROGRAM); LIST SEPARATELY IN ADDITION TO CODE FOR PRIMARY PROCEDURE	3
G2081	PATIENTS AGE 66 AND OLDER IN INSTITUTIONAL SPECIAL NEEDS PLANS (SNP) OR RESIDING IN LONG-TERM CARE WITH A POS CODE 32, 33, 34, 54 OR 56 FOR MORE THAN 90 DAYS DURING THE MEASUREMENT PERIOD	1
G2082	OFFICE OR OTHER OUTPATIENT VISIT FOR THE EVALUATION AND MANAGEMENT OF AN ESTABLISHED PATIENT THAT REQUIRES THE SUPERVISION OF A PHYSICIAN OR OTHER QUALIFIED HEALTH CARE PROFESSIONAL AND PROVISION OF UP TO 56 MG OF ESKETAMINE NASAL SELF-ADMINISTRATION, INCLUDES 2 HOURS POSTADMINISTRATION OBSERVATION	1
G2083	OFFICE OR OTHER OUTPATIENT VISIT FOR THE EVALUATION AND MANAGEMENT OF AN ESTABLISHED PATIENT THAT REQUIRES THE SUPERVISION OF A PHYSICIAN OR OTHER QUALIFIED HEALTH CARE PROFESSIONAL AND PROVISION OF GREATER THAN 56 MG ESKETAMINE NASAL SELF-ADMINISTRATION, INCLUDES 2 HOURS POST-ADMINISTRATION OBSERVATION	1
G2086	OFFICE-BASED TREATMENT FOR OPIOID USE DISORDER, INCLUDING DEVELOPMENT OF THE TREATMENT PLAN, CARE COORDINATION, INDIVIDUAL THERAPY AND GROUP THERAPY AND COUNSELING; AT LEAST 70 MINUTES IN THE FIRST CALENDAR MONTH	1

		1
G2087	OFFICE-BASED TREATMENT FOR OPIOID USE DISORDER, INCLUDING CARE COORDINATION, INDIVIDUAL THERAPY AND GROUP THERAPY AND COUNSELING; AT LEAST 60 MINUTES IN A SUBSEQUENT CALENDAR MONTH	2
G2170	PERCUTANEOUS ARTERIOVENOUS FISTULA CREATION (AVF), DIRECT, ANY SITE, BY TISSUE APPROXIMATION USING THERMAL RESISTANCE ENERGY, AND SECONDARY PROCEDURES TO REDIRECT BLOOD FLOW (E.G., TRANSLUMINAL BALLOON ANGIOPLASTY, COIL EMBOLIZATION) WHEN PERFORMED, AND INCLUDES ALL IMAGING AND RADIOLOGIC GUIDANCE, SUPERVISION AND INTERPRETATION, WHEN PERFORMED	1
G2171	PERCUTANEOUS ARTERIOVENOUS FISTULA CREATION (AVF), DIRECT, ANY SITE, USING MAGNETIC-GUIDED ARTERIAL AND VENOUS CATHETERS AND RADIOFREQUENCY ENERGY, INCLUDING FLOW-DIRECTING PROCEDURES (E.G., VASCULAR COIL EMBOLIZATION WITH RADIOLOGIC SUPERVISION AND INTERPRETATION, WEN PERFORMED) AND FISTULOGRAM(S), ANGIOGRAPHY, ENOGRAPHY, AND/OR ULTRASOUND, WITH RADIOLOGIC SUPERVISION AND INTERPRETATION, WHEN PERFORMED	1
G2172	All inclusive payment for services related to highly coordinated and integrated opioid use disorder (oud) treatment services furnished for the demonstration project	1
G2212	PROLONGED OFFICE OR OTHER OUTPATIENT EVALUATION AND MANAGEMENT SERVICE(S) BEYOND THE MAXIMUM REQUIRED TIME OF THE PRIMARY PROCEDURE WHICH HAS BEEN SELECTED USING TOTAL TIME ON THE DATE OF THE PRIMARY SERVICE; EACH ADDITIONAL 15 MINUTES BY THE PHYSICIAN OR QUALIFIED HEALTHCARE PROFESSIONAL, WITH OR WITHOUT DIRECT PATIENT CONTACT (LIST SEPARATELY IN ADDITION TO CPT CODES 99205, 99215 FOR OFFICE OR OTHER OUTPATIENT EVALUATION AND MANAGEMENT SERVICES) (DO NOT REPORT G2212 ON THE SAME DATE OF SERVICE AS 99354, 99355, 99358, 99359, 99415, 99416). (DO NOT REPORT G2212 FOR ANY TIME UNIT LESS THAN 15 MINUTES)	4
G2213	INITIATION OF MEDICATION FOR THE TREATMENT OF OPIOID USE DISORDER IN THE EMERGENCY DEPARTMENT SETTING, INCLUDING ASSESSMENT, REFERRAL TO ONGOING CARE, AND ARRANGING ACCESS TO SUPPORTIVE SERVICES (LIST SEPARATELY IN ADDITION TO CODE FOR PRIMARY PROCEDURE)	1
G2214	INITIAL OR SUBSEQUENT PSYCHIATRIC COLLABORATIVE CARE MANAGEMENT, FIRST 30 MINUTES IN A MONTH OF BEHAVIORAL HEALTH CARE MANAGER ACTIVITIES, IN CONSULTATION WITH A PSYCHIATRIC CONSULTANT, AND DIRECTED BY THE TREATING PHYSICIAN OR OTHER QUALIFIED HEALTH CARE PROFESSIONAL	1
G2215	TAKE-HOME SUPPLY OF NASAL NALOXONE (PROVISION OF THE SERVICES BY A MEDICARE-ENROLLED OPIOID TREATMENT PROGRAM); LIST SEPARATELY IN ADDITION TO CODE FOR PRIMARY PROCEDURE	1
G2216	TAKE-HOME SUPPLY OF INJECTABLE NALOXONE (PROVISION OF THE SERVICES BY A MEDICARE-ENROLLED OPIOID TREATMENT PROGRAM); LIST SEPARATELY IN ADDITION TO CODE FOR PRIMARY PROCEDURE	1
G2250	REMOTE ASSESSMENT OF RECORDED VIDEO AND/OR IMAGES SUBMITTED BY AN ESTABLISHED PATIENT (E.G., STORE AND FORWARD), INCLUDING INTERPRETATION WITH FOLLOW-UP WITH THE PATIENT WITHIN 24 BUSINESS HOURS, NOT ORIGINATING FROM A RELATED SERVICE PROVIDED WITHIN THE PREVIOUS 7 DAYS	1

	NOR LEADING TO A SERVICE OR PROCEDURE WITHIN THE NEXT 24 HOURS OR SOONEST AVAILABLE APPOINTMENT	
G2251	BRIEF COMMUNICATION TECHNOLOGY-BASED SERVICE, E.G. VIRTUAL CHECK-IN, BY A QUALIFIED HEALTH CARE PROFESSIONAL WHO CANNOT REPORT EVALUATION AND MANAGEMENT SERVICES, PROVIDED TO AN ESTABLISHED PATIENT, NOT ORIGINATING FROM A RELATED SERVICE PROVIDED WITHIN THE PREVIOUS 7 DAYS NOR LEADING TO A SERVICE OR PROCEDURE WITHIN THE NEXT 24 HOURS OR SOONEST AVAILABLE APPOINTMENT; 5?10 MINUTES OF CLINICAL DISCUSSION	1
G2252	BRIEF COMMUNICATION TECHNOLOGY-BASED SERVICE, E.G. VIRTUAL CHECK-IN, BY A PHYSICIAN OR OTHER QUALIFIED HEALTH CARE PROFESSIONAL WHO CAN REPORT EVALUATION AND MANAGEMENT SERVICES, PROVIDED TO AN ESTABLISHED PATIENT, NOT ORIGINATING FROM A RELATED E/M SERVICE PROVIDED WITHIN THE PREVIOUS 7 DAYS NOR LEADING TO AN E/M SERVICE OR PROCEDURE WITHIN THE NEXT 24 HOURS OR SOONEST AVAILABLE APPOINTMENT; 11-20 MINUTES OF MEDICAL DISCUSSION	1
G6001	ULTRASONIC GUIDANCE FOR PLACEMENT OF RADIATION THERAPY FIELDS	1
G6002	STEREOSCOPIC X-RAY GUIDANCE FOR LOCALIZATION OF TARGET VOLUME FOR THE DELIVERY OF RADIATION THERAPY	1
G6003	RADIATION TREATMENT DELIVERY, SINGLE TREATMENT AREA, SINGLE PORT OR PARALLEL OPPOSED PORTS, SIMPLE BLOCKS OR NO BLOCKS: UP TO 5 MEV	1
G6004	RADIATION TREATMENT DELIVERY, SINGLE TREATMENT AREA, SINGLE PORT OR PARALLEL OPPOSED PORTS, SIMPLE BLOCKS OR NO BLOCKS: 6-10 MEV	1
G6005	RADIATION TREATMENT DELIVERY, SINGLE TREATMENT AREA, SINGLE PORT OR PARALLEL OPPOSED PORTS, SIMPLE BLOCKS OR NO BLOCKS: 11-19 MEV	1
G6006	RADIATION TREATMENT DELIVERY, SINGLE TREATMENT AREA, SINGLE PORT OR PARALLEL OPPOSED PORTS, SIMPLE BLOCKS OR NO BLOCKS: 20 MEV OR GREATER	1
G6007	RADIATION TREATMENT DELIVERY, 2 SEPARATE TREATMENT AREAS, 3 OR MORE PORTS ON A SINGLE TREATMENT AREA, USE OF MULTIPLE BLOCKS: UP TO 5 MEV	1
G6008	RADIATION TREATMENT DELIVERY, 2 SEPARATE TREATMENT AREAS, 3 OR MORE PORTS ON A SINGLE TREATMENT AREA, USE OF MULTIPLE BLOCKS: 6-10 MEV	1
G6009	RADIATION TREATMENT DELIVERY, 2 SEPARATE TREATMENT AREAS, 3 OR MORE PORTS ON A SINGLE TREATMENT AREA, USE OF MULTIPLE BLOCKS: 11-19 MEV	1
G6010	RADIATION TREATMENT DELIVERY, 2 SEPARATE TREATMENT AREAS, 3 OR MORE PORTS ON A SINGLE TREATMENT AREA, USE OF MULTIPLE BLOCKS: 20 MEV OR GREATER	1
G6011	RADIATION TREATMENT DELIVERY,3 OR MORE SEPARATE TREATMENT AREAS, CUSTOM BLOCKING, TANGENTIAL PORTS, WEDGES, ROTATIONAL BEAM, COMPENSATORS, ELECTRON BEAM; UP TO 5 MEV	1
G6012	RADIATION TREATMENT DELIVERY,3 OR MORE SEPARATE TREATMENT AREAS, CUSTOM BLOCKING, TANGENTIAL PORTS, WEDGES, ROTATIONAL BEAM, COMPENSATORS, ELECTRON BEAM; 6-10 MEV	1

G6013	RADIATION TREATMENT DELIVERY,3 OR MORE SEPARATE TREATMENT AREAS, CUSTOM BLOCKING, TANGENTIAL PORTS, WEDGES, ROTATIONAL BEAM, COMPENSATORS, ELECTRON BEAM; 11-19 MEV	1
G6014	RADIATION TREATMENT DELIVERY,3 OR MORE SEPARATE TREATMENT AREAS, CUSTOM BLOCKING, TANGENTIAL PORTS, WEDGES, ROTATIONAL BEAM, COMPENSATORS, ELECTRON BEAM; 20 MEV OR GREATER	1
G6015	INTENSITY MODULATED TREATMENT DELIVERY, SINGLE OR MULTIPLE FIELDS/ARCS, VIA NARROW SPATIALLY AND TEMPORALLY MODULATED BEAMS, BINARY, DYNAMIC MLC, PER TREATMENT SESSION	1
G6016	COMPENSATOR-BASED BEAM MODULATION TREATMENT DELIVERY OF INVERSE PLANNED TREATMENT USING 3 OR MORE HIGH RESOLUTION (MILLED OR CAST) COMPENSATOR, CONVERGENT BEAM MODULATED FIELDS, PER TREATMENT SESSION	1
G6017	INTRA-FRACTION LOCALIZATION AND TRACKING OF TARGET OR PATIENT MOTION DURING DELIVERY OF RADIATION THERAPY (EG,3D POSITIONAL TRACKING, GATING, 3D SURFACE TRACKING), EACH FRACTION OF TREATMENT	2
G9016	SMOKING CESSATION COUNSELING, INDIVIDUAL, IN THE ABSENCE OF OR IN ADDITION TO ANY OTHER EVALUATION AND MANAGEMENT SERVICE, PER SESSION (6-10 MINUTES) [DEMO PROJECT CODE ONLY]	12
G9143	WARFARIN RESPONSIVENESS TESTING BY GENETIC TECHNIQUE USING ANY METHOD, ANY NUMBER OF SPECIMEN(S)	1
G9147	OUTPATIENT INTRAVENOUS INSULIN TREATMENT (OIVIT) EITHER PULSATILE OR CONTINUOUS, BY ANY MEANS, GUIDED BY THE RESULTS OF MEASUREMENTS FOR: RESPIRATORY QUOTIENT; AND/OR, URINE UREA NITROGEN (UUN); AND/OR, ARTERIAL, VENOUS OR CAPILLARY GLUCOSE; AND/OR POTASSIUM CONCENTRATION	1
G9156	EVALUATION FOR WHEELCHAIR REQUIRING FACE TO FACE VISIT WITH PHYSICIAN	1
G9157	TRANSESOPHAGEAL DOPPLER MEASUREMENT OF CARDIAC OUTPUT (INCLUDING PROBE PLACEMENT, IMAGE ACQUISITION, AND INTERPRETATION PER COURSE OF TREATMENT) FOR MONITORING PURPOSES	1
G9187	BUNDLED PAYMENTS FOR CARE IMPROVEMENT INITIATIVE HOME VISIT FOR PATIENT ASSESSMENT PERFORMED BY A QUALIFIED HEALTH CARE PROFESSIONAL FOR INDIVIDUALS NOT CONSIDERED HOMEBOUND INCLUDING, BUT NOT LIMITED TO, ASSESSMENT OF SAFETY, FALLS, CLINICAL STATUS, FLUID STATUS, MEDICATION RECONCILIATION/MANAGEMENT, PATIENT COMPLIANCE WITH ORDERS/PLAN OF CARE, PERFORMANCE OF ACTIVITIES OF DAILY LIVING, APPROPRIATENESS OF CARE SETTING; (FOR USE ONLY IN THE MEIDCARE-APPROVED BUNDLED PAYMENTS FOR CARE IMPROVEMENT INITIATIVE); MAY NOT BE BILLED FOR A 30-DAY PERIOD COVERED BY A TRANSITIONAL CARE MANAGEMENT CODE	1
G9480	ADMISSION TO MEDICARE CARE CHOICE MODEL PROGRAM (MCCM)	1

G9481	REMOTE IN-HOME VISIT FOR THE EVALUATION AND MANAGEMENT OF A NEW PATIENT FOR USE ONLY IN A MEDICARE-APPROVED CMS INNOVATION CENTER DEMONSTRATION PROJECT, WHICH REQUIRES THESE 3 KEY COMPONENTS: A PROBLEM FOCUSED HISTORY; A PROBLEM FOCUSED EXAMINATION; AND STRAIGHTFORWARD MEDICAL DECISION MAKING, FURNISHED IN REAL TIME USING INTERACTIVE AUDIO AND VIDEO TECHNOLOGY. COUNSELING AND COORDINATION OF CARE WITH OTHER PHYSICIANS, OTHER QUALIFIED HEALTH CARE PROFESSIONALS OR AGENCIES ARE PROVIDED CONSISTENT WITH THE NATURE OF THE PROBLEM(S) AND THE NEEDS OF THE PATIENT OR THE FAMILY OR BOTH. USUALLY, THE PRESENTING PROBLEM(S) ARE SELF LIMITED OR MINOR. TYPICALLY, 10 MINUTES ARE SPENT WITH THE PATIENT OR FAMILY OR BOTH VIA REAL TIME, AUDIO AND VIDEO INTERCOMMUNICATIONS TECHNOLOGY	2
G9482	REMOTE IN-HOME VISIT FOR THE EVALUATION AND MANAGEMENT OF A NEW PATIENT FOR USE ONLY IN A MEDICARE-APPROVED CMS INNOVATION CENTER DEMONSTRATION PROJECT, WHICH REQUIRES THESE 3 KEY COMPONENTS: AN EXPANDED PROBLEM FOCUSED HISTORY; AN EXPANDED PROBLEM FOCUSED EXAMINATION; STRAIGHTFORWARD MEDICAL DECISION MAKING, FURNISHED IN REAL TIME USING INTERACTIVE AUDIO AND VIDEO TECHNOLOGY. COUNSELING AND COORDINATION OF CARE WITH OTHER PHYSICIANS, OTHER QUALIFIED HEALTH CARE PROFESSIONALS OR AGENCIES ARE PROVIDED CONSISTENT WITH THE NATURE OF THE PROBLEM(S) AND THE NEEDS OF THE PATIENT OR THE FAMILY OR BOTH. USUALLY, THE PRESENTING PROBLEM(S) ARE OF LOW TO MODERATE SEVERITY. TYPICALLY, 20 MINUTES ARE SPENT WITH THE PATIENT OR FAMILY OR BOTH VIA REAL TIME, AUDIO AND VIDEO INTERCOMMUNICATIONS TECHNOLOGY	2
G9483	REMOTE IN-HOME VISIT FOR THE EVALUATION AND MANAGEMENT OF A NEW PATIENT FOR USE ONLY IN A MEDICARE-APPROVED CMS INNOVATION CENTER DEMONSTRATION PROJECT, WHICH REQUIRES THESE 3 KEY COMPONENTS: A DETAILED HISTORY; A DETAILED EXAMINATION; MEDICAL DECISION MAKING OF LOW COMPLEXITY, FURNISHED IN REAL TIME USING INTERACTIVE AUDIO AND VIDEO TECHNOLOGY. COUNSELING AND COORDINATION OF CARE WITH OTHER PHYSICIANS, OTHER QUALIFIED HEALTH CARE PROFESSIONALS OR AGENCIES ARE PROVIDED CONSISTENT WITH THE NATURE OF THE PROBLEM(S) AND THE NEEDS OF THE PATIENT OR THE FAMILY OR BOTH. USUALLY, THE PRESENTING PROBLEM(S) ARE OF MODERATE SEVERITY. TYPICALLY, 30 MINUTES ARE SPENT WITH THE PATIENT OR FAMILY OR BOTH VIA REAL TIME, AUDIO AND VIDEO INTERCOMMUNICATIONS TECHNOLOGY	2
G9484	REMOTE IN-HOME VISIT FOR THE EVALUATION AND MANAGEMENT OF A NEW PATIENT FOR USE ONLY IN A MEDICARE-APPROVED CMS INNOVATION CENTER DEMONSTRATION PROJECT, WHICH REQUIRES THESE 3 KEY COMPONENTS: A COMPREHENSIVE HISTORY; A COMPREHENSIVE EXAMINATION; MEDICAL DECISION MAKING OF MODERATE COMPLEXITY, FURNISHED IN REAL TIME USING INTERACTIVE AUDIO AND VIDEO TECHNOLOGY. COUNSELING AND COORDINATION OF CARE WITH OTHER PHYSICIANS, OTHER QUALIFIED HEALTH CARE PROFESSIONALS OR AGENCIES ARE PROVIDED CONSISTENT WITH THE NATURE OF THE PROBLEM(S) AND THE NEEDS OF THE PATIENT OR THE FAMILY OR BOTH. USUALLY, THE PRESENTING PROBLEM(S) ARE OF MODERATE TO HIGH SEVERITY. TYPICALLY, 45 MINUTES ARE SPENT WITH THE PATIENT OR FAMILY OR BOTH VIA REAL TIME, AUDIO AND VIDEO INTERCOMMUNICATIONS TECHNOLOGY	2

G9485	REMOTE IN-HOME VISIT FOR THE EVALUATION AND MANAGEMENT OF A NEW PATIENT FOR USE ONLY IN A MEDICARE-APPROVED CMS INNOVATION CENTER DEMONSTRATION PROJECT, WHICH REQUIRES THESE 3 KEY COMPONENTS: A COMPREHENSIVE HISTORY; A COMPREHENSIVE EXAMINATION; MEDICAL DECISION MAKING OF HIGH COMPLEXITY, FURNISHED IN REAL TIME USING INTERACTIVE AUDIO AND VIDEO TECHNOLOGY. COUNSELING AND COORDINATION OF CARE WITH OTHER PHYSICIANS, OTHER QUALIFIED HEALTH CARE PROFESSIONALS OR AGENCIES ARE PROVIDED CONSISTENT WITH THE NATURE OF THE PROBLEM(S) AND THE NEEDS OF THE PATIENT OR THE FAMILY OR BOTH. USUALLY, THE PRESENTING PROBLEM(S) ARE OF MODERATE TO HIGH SEVERITY. TYPICALLY, 60 MINUTES ARE SPENT WITH THE PATIENT OR FAMILY OR BOTH VIA REAL TIME, AUDIO AND VIDEO INTERCOMMUNICATIONS TECHNOLOGY	2
G9486	REMOTE IN-HOME VISIT FOR THE EVALUATION AND MANAGEMENT OF AN ESTABLISHED PATIENT FOR USE ONLY IN A MEDICARE-APPROVED CMS INNOVATION CENTER DEMONSTRATION PROJECT, WHICH REQUIRES AT LEAST 2 OF THE FOLLOWING 3 KEY COMPONENTS: A PROBLEM FOCUSED HISTORY; A PROBLEM FOCUSED EXAMINATION; STRAIGHTFORWARD MEDICAL DECISION MAKING, FURNISHED IN REAL TIME USING INTERACTIVE AUDIO AND VIDEO TECHNOLOGY. COUNSELING AND COORDINATION OF CARE WITH OTHER PHYSICIANS, OTHER QUALIFIED HEALTH CARE PROFESSIONALS OR AGENCIES ARE PROVIDED CONSISTENT WITH THE NATURE OF THE PROBLEM(S) AND THE NEEDS OF THE PATIENT OR THE FAMILY OR BOTH. USUALLY, THE PRESENTING PROBLEM(S) ARE SELF LIMITED OR MINOR. TYPICALLY, 10 MINUTES ARE SPENT WITH THE PATIENT OR FAMILY OR BOTH VIA REAL TIME, AUDIO AND VIDEO INTERCOMMUNICATIONS TECHNOLOGY	2
G9487	REMOTE IN-HOME VISIT FOR THE EVALUATION AND MANAGEMENT OF AN ESTABLISHED PATIENT FOR USE ONLY IN A MEDICARE-APPROVED CMS INNOVATION CENTER DEMONSTRATION PROJECT, WHICH REQUIRES AT LEAST 2 OF THE FOLLOWING 3 KEY COMPONENTS: AN EXPANDED PROBLEM FOCUSED HISTORY; AN EXPANDED PROBLEM FOCUSED EXAMINATION; MEDICAL DECISION MAKING OF LOW COMPLEXITY, FURNISHED IN REAL TIME USING INTERACTIVE AUDIO AND VIDEO TECHNOLOGY. COUNSELING AND COORDINATION OF CARE WITH OTHER PHYSICIANS, OTHER QUALIFIED HEALTH CARE PROFESSIONALS OR AGENCIES ARE PROVIDED CONSISTENT WITH THE NATURE OF THE PROBLEM(S) AND THE NEEDS OF THE PATIENT OR THE FAMILY OR BOTH. USUALLY, THE PRESENTING PROBLEM(S) ARE OF LOW TO MODERATE SEVERITY. TYPICALLY, 15 MINUTES ARE SPENT WITH THE PATIENT OR FAMILY OR BOTH VIA REAL TIME, AUDIO AND VIDEO INTERCOMMUNICATIONS TECHNOLOGY	2
G9488	REMOTE IN-HOME VISIT FOR THE EVALUATION AND MANAGEMENT OF AN ESTABLISHED PATIENT FOR USE ONLY IN A MEDICARE-APPROVED CMS INNOVATION CENTER DEMONSTRATION PROJECT, WHICH REQUIRES AT LEAST 2 OF THE FOLLOWING 3 KEY COMPONENTS: A DETAILED HISTORY; A DETAILED EXAMINATION; MEDICAL DECISION MAKING OF MODERATE COMPLEXITY, FURNISHED IN REAL TIME USING INTERACTIVE AUDIO AND VIDEO TECHNOLOGY. COUNSELING AND COORDINATION OF CARE WITH OTHER PHYSICIANS, OTHER QUALIFIED HEALTH CARE PROFESSIONALS OR AGENCIES ARE PROVIDED CONSISTENT WITH THE NATURE OF THE PROBLEM(S) AND THE NEEDS OF THE PATIENT OR THE FAMILY OR BOTH. USUALLY, THE PRESENTING PROBLEM(S) ARE OF MODERATE TO HIGH SEVERITY. TYPICALLY, 25 MINUTES ARE SPENT WITH THE	2

	PATIENT OR FAMILY OR BOTH VIA REAL TIME, AUDIO AND VIDEO INTERCOMMUNICATIONS TECHNOLOGY	
G9489	REMOTE IN-HOME VISIT FOR THE EVALUATION AND MANAGEMENT OF AN ESTABLISHED PATIENT FOR USE ONLY IN A MEDICARE-APPROVED COMS INNOVATION CENTER DEMONSTRATION PROJECT, WHICH REQUIRES AT LEAST 2 OF THE FOLLOWING 3 KEY COMPONENTS: A COMPREHENSIVE HISTORY; A COMPREHENSIVE EXAMINATION; MEDICAL DECISION MAKING OF HIGH COMPLEXITY, FURNISHED IN REAL TIME USING INTERACTIVE AUDIO AND VIDEO TECHNOLOGY. COUNSELING AND COORDINATION OF CARE WITH OTHER PHYSICIANS, OTHER QUALIFIED HEALTH CARE PROFESSIONALS OR AGENCIES ARE PROVIDED CONSISTENT WITH THE NATURE OF THE PROBLEM(S) AND THE NEEDS OF THE PATIENT OR THE FAMILY OR BOTH. USUALLY, THE PRESENTING PROBLEM(S) ARE OF MODERATE TO HIGH SEVERITY. TYPICALLY, 40 MINUTES ARE SPENT WITH THE PATIENT OR FAMILY OR BOTH VIA REAL TIME, AUDIO AND VIDEO INTERCOMMUNICATIONS TECHNOLOGY	2
G9490	CMS INNOVATION CENTER MODELS, HOME VISIT FOR PATIENT ASSESSMENT PERFORMED BY CLINICAL STAFF FOR AN INDIVIDUAL NOT CONSIDERED HOMEBOUND, INCLUDING, BUT NOT NECESSARILY LIMITED TO PATIENT ASSESSMENT OF CLINICAL STATUS, SAFETY/FALL PREVENTION, FUNCTIONAL STATUS/AMBULATION, MEDICATION RECONCILIATION/MANAGEMENT, COMPLIANCE WITH ORDERS/PLAN OF CARE, PERFORMANCE OF ACTIVITIES OF DAILY LIVING, AND ENSURING BENEFICIARY CONNECTIONS TO COMMUNITY AND OTHER SERVICES. (FOR USE ONLY IN MEDICARE-APPROVED CMS INNOVATION CENTER MODELS); MAY NOT BE BILLED FOR A 30 DAY PERIOD COVERED BY A TRANSITIONAL CARE MANAGEMENT CODE	2
G9678	ONCOLOGY CARE MODEL (OCM) MONTHLY ENHANCED ONCOLOGY SERVICES (MEOS) PAYMENT FOR OCM ENHANCED SERVICES. G9678 PAYMENTS MAY ONLY BE MADE TO OCM PRACTITIONERS FOR OCM BENEFICIARIES FOR THE FURNISHMENT OF ENHANCED SERVICES AS DEFINED IN THE OCM PARTICIPATION AGREEMENT	1
G9978	REMOTE IN-HOME VISIT FOR THE EVALUATION AND MANAGEMENT OF A NEW PATIENT FOR USE ONLY IN A MEDICARE-APPROVED BUNDLED PAYMENTS FOR CARE IMPROVEMENT ADVANCED (BPCI ADVANCED) MODEL EPISODE OF CARE, WHICH REQUIRES THESE 3 KEY COMPONENTS: A PROBLEM FOCUSED HISTORY; A PROBLEM FOCUSED EXAMINATION; AND STRAIGHTFORWARD MEDICAL DECISION MAKING, FURNISHED IN REAL TIME USING INTERACTIVE AUDIO AND VIDEO TECHNOLOGY. COUNSELING AND COORDINATION OF CARE WITH OTHER PHYSICIANS, OTHER QUALIFIED HEALTH CARE PROFESSIONALS OR AGENCIES ARE PROVIDED CONSISTENT WITH THE NATURE OF THE PROBLEM(S) AND THE NEEDS OF THE PATIENT OR THE FAMILY OR BOTH. USUALLY, THE PRESENTING PROBLEM(S) ARE SELF LIMITED OR MINOR. TYPICALLY, 10 MINUTES ARE SPENT WITH THE PATIENT OR FAMILY OR BOTH VIA REAL TIME, AUDIO AND VIDEO INTERCOMMUNICATIONS TECHNOLOGY	2

G9979	REMOTE IN-HOME VISIT FOR THE EVALUATION AND MANAGEMENT OF A NEW PATIENT FOR USE ONLY IN A MEDICARE-APPROVED BUNDLED PAYMENTS FOR CARE IMPROVEMENT ADVANCED (BPCI ADVANCED) MODEL EPISODE OF CARE, WHICH REQUIRES THESE 3 KEY COMPONENTS: AN EXPANDED PROBLEM FOCUSED HISTORY; AN EXPANDED PROBLEM FOCUSED EXAMINATION; STRAIGHTFORWARD MEDICAL DECISION MAKING, FURNISHED IN REAL TIME USING INTERACTIVE AUDIO AND VIDEO TECHNOLOGY. COUNSELING AND COORDINATION OF CARE WITH OTHER PHYSICIANS, OTHER QUALIFIED HEALTH CARE PROFESSIONALS OR AGENCIES ARE PROVIDED CONSISTENT WITH THE NATURE OF THE PROBLEM(S) AND THE NEEDS OF THE PATIENT OR THE FAMILY OR BOTH. USUALLY, THE PRESENTING PROBLEM(S) ARE OF LOW TO MODERATE SEVERITY. TYPICALLY, 20 MINUTES ARE SPENT WITH THE PATIENT OR FAMILY OR BOTH VIA REAL TIME, AUDIO AND VIDEO INTERCOMMUNICATIONS TECHNOLOGY	2
G9980	REMOTE IN-HOME VISIT FOR THE EVALUATION AND MANAGEMENT OF A NEW PATIENT FOR USE ONLY IN A MEDICARE-APPROVED BUNDLED PAYMENTS FOR CARE IMPROVEMENT ADVANCED (BPCI ADVANCED) MODEL EPISODE OF CARE, WHICH REQUIRES THESE 3 KEY COMPONENTS: A DETAILED HISTORY; A DETAILED EXAMINATION; MEDICAL DECISION MAKING OF LOW COMPLEXITY, FURNISHED IN REAL TIME USING INTERACTIVE AUDIO AND VIDEO TECHNOLOGY. COUNSELING AND COORDINATION OF CARE WITH OTHER PHYSICIANS, OTHER QUALIFIED HEALTH CARE PROFESSIONALS OR AGENCIES ARE PROVIDED CONSISTENT WITH THE NATURE OF THE PROBLEM(S) AND THE NEEDS OF THE PATIENT OR THE FAMILY OR BOTH. USUALLY, THE PRESENTING PROBLEM(S) ARE OF MODERATE SEVERITY. TYPICALLY, 30 MINUTES ARE SPENT WITH THE PATIENT OR FAMILY OR BOTH VIA REAL TIME, AUDIO AND VIDEO INTERCOMMUNICATIONS TECHNOLOGY	2
G9981	REMOTE IN-HOME VISIT FOR THE EVALUATION AND MANAGEMENT OF A NEW PATIENT FOR USE ONLY IN A MEDICARE-APPROVED BUNDLED PAYMENTS FOR CARE IMPROVEMENT ADVANCED (BPCI ADVANCED) MODEL EPISODE OF CARE, WHICH REQUIRES THESE 3 KEY COMPONENTS: A COMPREHENSIVE HISTORY; A COMPREHENSIVE EXAMINATION; MEDICAL DECISION MAKING OF MODERATE COMPLEXITY, FURNISHED IN REAL TIME USING INTERACTIVE AUDIO AND VIDEO TECHNOLOGY. COUNSELING AND COORDINATION OF CARE WITH OTHER PHYSICIANS, OTHER QUALIFIED HEALTH CARE PROFESSIONALS OR AGENCIES ARE PROVIDED CONSISTENT WITH THE NATURE OF THE PROBLEM(S) AND THE NEEDS OF THE PATIENT OR THE FAMILY OR BOTH. USUALLY, THE PRESENTING PROBLEM(S) ARE OF MODERATE TO HIGH SEVERITY. TYPICALLY, 45 MINUTES ARE SPENT WITH THE PATIENT OR FAMILY OR BOTH VIA REAL TIME, AUDIO AND VIDEO INTERCOMMUNICATIONS TECHNOLOGY	2
G9982	REMOTE IN-HOME VISIT FOR THE EVALUATION AND MANAGEMENT OF A NEW PATIENT FOR USE ONLY IN A MEDICARE-APPROVED BUNDLED PAYMENTS FOR CARE IMPROVEMENT ADVANCED (BPCI ADVANCED) MODEL EPISODE OF CARE, WHICH REQUIRES THESE 3 KEY COMPONENTS: A COMPREHENSIVE HISTORY; A COMPREHENSIVE EXAMINATION; MEDICAL DECISION MAKING OF HIGH COMPLEXITY, FURNISHED IN REAL TIME USING INTERACTIVE AUDIO AND VIDEO TECHNOLOGY. COUNSELING AND COORDINATION OF CARE WITH OTHER PHYSICIANS, OTHER QUALIFIED HEALTH CARE PROFESSIONALS OR AGENCIES ARE PROVIDED CONSISTENT WITH THE NATURE OF THE PROBLEM(S) AND THE NEEDS OF THE PATIENT OR THE FAMILY OR BOTH. USUALLY, THE PRESENTING PROBLEM(S) ARE OF MODERATE TO HIGH SEVERITY. TYPICALLY, 60 MINUTES ARE SPENT WITH	2

	THE PATIENT OR FAMILY OR BOTH VIA REAL TIME, AUDIO AND VIDEO INTERCOMMUNICATIONS TECHNOLOGY	
G9983	REMOTE IN-HOME VISIT FOR THE EVALUATION AND MANAGEMENT OF AN ESTABLISHED PATIENT FOR USE ONLY IN A MEDICARE-APPROVED BUNDLED PAYMENTS FOR CARE IMPROVEMENT ADVANCED (BPCI ADVANCED) MODEL EPISODE OF CARE, WHICH REQUIRES AT LEAST 2 OF THE FOLLOWING 3 KEY COMPONENTS: A PROBLEM FOCUSED HISTORY; A PROBLEM FOCUSED EXAMINATION; STRAIGHTFORWARD MEDICAL DECISION MAKING, FURNISHED IN REAL TIME USING INTERACTIVE AUDIO AND VIDEO TECHNOLOGY. COUNSELING AND COORDINATION OF CARE WITH OTHER PHYSICIANS, OTHER QUALIFIED HEALTH CARE PROFESSIONALS OR AGENCIES ARE PROVIDED CONSISTENT WITH THE NATURE OF THE PROBLEM(S) AND THE NEEDS OF THE PATIENT OR THE FAMILY OR BOTH. USUALLY, THE PRESENTING PROBLEM(S) ARE SELF LIMITED OR MINOR. TYPICALLY, 10 MINUTES ARE SPENT WITH THE PATIENT OR FAMILY OR BOTH VIA REAL TIME, AUDIO AND VIDEO INTERCOMMUNICATIONS TECHNOLOGY	2
G9984	REMOTE IN-HOME VISIT FOR THE EVALUATION AND MANAGEMENT OF AN ESTABLISHED PATIENT FOR USE ONLY IN A MEDICARE-APPROVED BUNDLED PAYMENTS FOR CARE IMPROVEMENT ADVANCED (BPCI ADVANCED) MODEL EPISODE OF CARE, WHICH REQUIRES AT LEAST 2 OF THE FOLLOWING 3 KEY COMPONENTS: AN EXPANDED PROBLEM FOCUSED HISTORY; AN EXPANDED PROBLEM FOCUSED EXAMINATION; MEDICAL DECISION MAKING OF LOW COMPLEXITY, FURNISHED IN REAL TIME USING INTERACTIVE AUDIO AND VIDEO TECHNOLOGY. COUNSELING AND COORDINATION OF CARE WITH OTHER PHYSICIANS, OTHER QUALIFIED HEALTH CARE PROFESSIONALS OR AGENCIES ARE PROVIDED CONSISTENT WITH THE NATURE OF THE PROBLEM(S) AND THE NEEDS OF THE PATIENT OR THE FAMILY OR BOTH. USUALLY, THE PRESENTING PROBLEM(S) ARE OF LOW TO MODERATE SEVERITY. TYPICALLY, 15 MINUTES ARE SPENT WITH THE PATIENT OR FAMILY OR BOTH VIA REAL TIME, AUDIO AND VIDEO INTERCOMMUNICATIONS TECHNOLOGY	2
G9985	REMOTE IN-HOME VISIT FOR THE EVALUATION AND MANAGEMENT OF AN ESTABLISHED PATIENT FOR USE ONLY IN A MEDICARE-APPROVED BUNDLED PAYMENTS FOR CARE IMPROVEMENT ADVANCED (BPCI ADVANCED) MODEL EPISODE OF CARE, WHICH REQUIRES AT LEAST 2 OF THE FOLLOWING 3 KEY COMPONENTS: A DETAILED HISTORY; A DETAILED EXAMINATION; MEDICAL DECISION MAKING OF MODERATE COMPLEXITY, FURNISHED IN REAL TIME USING INTERACTIVE AUDIO AND VIDEO TECHNOLOGY. COUNSELING AND COORDINATION OF CARE WITH OTHER PHYSICIANS, OTHER QUALIFIED HEALTH CARE PROFESSIONALS OR AGENCIES ARE PROVIDED CONSISTENT WITH THE NATURE OF THE PROBLEM(S) AND THE NEEDS OF THE PATIENT OR THE FAMILY OR BOTH. USUALLY, THE PRESENTING PROBLEM(S) ARE OF MODERATE TO HIGH SEVERITY. TYPICALLY, 25 MINUTES ARE SPENT WITH THE PATIENT OR FAMILY OR BOTH VIA REAL TIME, AUDIO AND VIDEO INTERCOMMUNICATIONS TECHNOLOGY	2

REMOTE IN-HOME VISIT FOR THE EVALUATION AND MANAGEMENT OF AN ESTABLISHED PATIENT FOR USE ONLY IN A MEDICARE-APPROVED BUNDLED PAYMENTS FOR CARE IMPROVEMENT ADVANCED (BPCI ADVANCED) MODEL EPISODE OF CARE, WHICH REQUIRES AT LEAST 2 OF THE FOLLOWING 3 KEY COMPONENTS: A COMPREHENSIVE HISTORY; A COMPREHENSIVE EXAMINATION; MEDICAL DECISION MAKING OF HIGH COMPLEXITY, FURNISHED IN REAL TIME USING INTERACTIVE AUDIO AND VIDEO TECHNOLOGY. COUNSELING AND COORDINATION OF CARE WITH OTHER PHYSICIANS, OTHER QUALIFIED HEALTH CARE PROFESSIONALS OR AGENCIES ARE PROVIDED CONSISTENT WITH THE NATURE OF THE PROBLEM(S) AND THE NEEDS OF THE PATIENT OR THE FAMILY OR BOTH. USUALLY, THE PRESENTING PROBLEM(S) ARE OF MODERATE TO HIGH SEVERITY. TYPICALLY, 40 MINUTES ARE SPENT WITH THE PATIENT OR FAMILY OR BOTH VIA REAL TIME, AUDIO AND VIDEO INTERCOMMUNICATIONS TECHNOLOGY	2
BUNDLED PAYMENTS FOR CARE IMPROVEMENT ADVANCED (BPCI ADVANCED) MODEL HOME VISIT FOR PATIENT ASSESSMENT PERFORMED BY CLINICAL STAFF FOR AN INDIVIDUAL NOT CONSIDERED HOMEBOUND, INCLUDING, BUT NOT NECESSARILY LIMITED TO PATIENT ASSESSMENT OF CLINICAL STATUS, SAFETY/FALL PREVENTION, FUNCTIONAL STATUS/AMBULATION, MEDICATION RECONCILIATION/MANAGEMENT, COMPLIANCE WITH ORDERS/PLAN OF CARE, PERFORMANCE OF ACTIVITIES OF DAILY LIVING, AND ENSURING BENEFICIARY CONNECTIONS TO COMMUNITY AND OTHER SERVICES; FOR USE ONLY FOR A BPCI ADVANCED MODEL EPISODE OF CARE; MAY NOT BE BILLED FOR A 30-DAY PERIOD COVERED BY A TRANSITIONAL CARE MANAGEMENT CODE	2
ALCOHOL AND/OR DRUG ASSESSMENT	1
BEHAVIORAL HEALTH SCREENING TO DETERMINE ELIGIBILITY FOR ADMISSION TO TREATMENT PROGRAM	1
ALCOHOL AND/OR DRUG SCREENING; LABORATORY ANALYSIS OF SPECIMENS FOR PRESENCE OF ALCOHOL AND/OR DRUGS	1
BEHAVIORAL HEALTH COUNSELING AND THERAPY, PER 15 MINUTES	96
ALCOHOL AND/OR DRUG SERVICES; GROUP COUNSELING BY A CLINICIAN	2
ALCOHOL AND/OR DRUG SERVICES; CASE MANAGEMENT	2
ALCOHOL AND/OR DRUG SERVICES; CRISIS INTERVENTION (OUTPATIENT)	1
ALCOHOL AND/OR DRUG SERVICES; SUB-ACUTE DETOXIFICATION (RESIDENTIAL ADDICTION PROGRAM OUTPATIENT)	1
ALCOHOL AND/OR DRUG SERVICES; ACUTE DETOXIFICATION (RESIDENTIAL ADDICTION PROGRAM OUTPATIENT)	1
ALCOHOL AND/OR DRUG SERVICES; AMBULATORY DETOXIFICATION	1
ALCOHOL AND/OR DRUG SERVICES; INTENSIVE OUTPATIENT (TREATMENT PROGRAM THAT OPERATES AT LEAST 3 HOURS/DAY AND AT LEAST 3 DAYS/WEEK AND IS BASED ON AN INDIVIDUALIZED TREATMENT PLAN), INCLUDING ASSESSMENT, COUNSELING; CRISIS INTERVENTION, AND ACTIVITY THERAPIES OR EDUCATION	1
ALCOHOL AND/OR DRUG SERVICES; MEDICAL/SOMATIC (MEDICAL INTERVENTION IN AMBULATORY SETTING)	1
	ESTABLISHED PATIENT FOR USE ONLY IN A MEDICARE-APPROVED BUNDLED PAYMENTS FOR CARE IMPROVEMENT ADVANCED (BPCI ADVANCED) MODEL EPISODE OF CARE, WHICH REQUIRES AT LEAST 2 OF THE FOLLOWING 3 KEY COMPONENTS: A COMPREHENSIVE HISTORY; A COMPREHENSIVE EXAMINATION; MEDICAL DECISION MAKING OF HIGH COMPLEXITY, FURNISHED IN REAL TIME USING INTERACTIVE AUDIO AND VIDEO TECHNOLOGY. COUNSELING AND COORDINATION OF CARE WITH OTHER PHYSICIANS, OTHER QUALIFIED HEALTH CARE PROFESSIONALS OR AGENCIES ARE PROVIDED CONSISTENT WITH THE NATURE OF THE PROBLEM(S) AND THE NEEDS OF THE PATIENT OR THE FAMILY OR BOTH. USUALLY, THE PRESENTING PROBLEM(S) ARE OF MODERATE TO HIGH SEVERITY. TYPICALLY, 40 MINUTES ARE SPENT WITH THE PATIENT OR FAMILY OR BOTH VIA REAL TIME, AUDIO AND VIDEO INTERCOMMUNICATIONS TECHNOLOGY BUNDLED PAYMENTS FOR CARE IMPROVEMENT ADVANCED (BPCI ADVANCED) MODEL HOME VISIT FOR PATIENT ASSESSMENT DERFORMED BY CLINICAL STAFF FOR AN INDIVIDUAL NOT CONSIDERED HOMEBOUND, INCLUDING, BUT NOT NECESSARILY LIMITED TO PATIENT ASSESSMENT OF CLINICAL STATUS, SAFETY/FALL PREVENTION, FUNCTIONAL STATUS/AMBULATION, MEDICATION MEDICATION RECONCULATION/MANAGEMENT, COMPLIANCE WITH ORDERS/PLAN OF CARE, PERFORMANCE OF ACTIVITIES OF DAILY LIVING, AND ENSURING BENEFICIARY CONNECTIONS TO COMMUNITY AND OTHER SERVICES; FOR USE ONLY FOR A BPCI ADVANCED MODEL EPISODE OF CARE; MAY NOT BE BILLED FOR A 30-DAY PERIOD COVERED BY A TRANSITIONAL CARE MANAGEMENT CODE ALCOHOL AND/OR DRUG ASSESSMENT BEHAVIORAL HEALTH SCREENING TO DETERMINE ELIGIBILITY FOR ADMISSION TO TREATMENT PROGRAM ALCOHOL AND/OR DRUG SERVICES; CRISI SINTERVENTION (OUTPATIENT) ALCOHOL AND/OR DRUG SERVICES; CRISIS INTERVENTION (OUTPATIENT) ALCOHOL AND/OR DRUG SERVICES; CRISIS INTERVENTION (OUTPATIENT) ALCOHOL AND/OR DRUG SERVICES; AUBULATORY DETOXIFICATION (RESIDENTIAL ADDICTION PROGRAM OUTPATIENT) ALCOHOL AND/OR DRUG SERVICES; AUTH DETOXIFICATION (RESIDENTIAL ADDICTION PROGRAM OUTPATIENT) ALCOHOL AND/OR DRUG SERVICES; AUTH DETOXIFICATION (TREATMENT PROGRAM THAT OPERATES AT LEAST 3 HOUR

H0017	BEHAVIORAL HEALTH; RESIDENTIAL (HOSPITAL RESIDENTIAL TREATMENT PROGRAM), WITHOUT ROOM AND BOARD, PER DIEM	1
H0018	BEHAVIORAL HEALTH; SHORT-TERM RESIDENTIAL (NON-HOSPITAL RESIDENTIAL TREATMENT PROGRAM), WITHOUT ROOM AND BOARD, PER DIEM	1
H0019	BEHAVIORAL HEALTH; LONG-TERM RESIDENTIAL (NON-MEDICAL, NON-ACUTE CARE IN A RESIDENTIAL TREATMENT PROGRAM WHERE STAY IS TYPICALLY LONGER THAN 30 DAYS), WITHOUT ROOM AND BOARD, PER DIEM	1
H0020	ALCOHOL AND/OR DRUG SERVICES; METHADONE ADMINISTRATION AND/OR SERVICE (PROVISION OF THE DRUG BY A LICENSED PROGRAM)	1
H0021	ALCOHOL AND/OR DRUG TRAINING SERVICE (FOR STAFF AND PERSONNEL NOT EMPLOYED BY PROVIDERS)	1
H0022	ALCOHOL AND/OR DRUG INTERVENTION SERVICE (PLANNED FACILITATION)	2
H0023	BEHAVIORAL HEALTH OUTREACH SERVICE (PLANNED APPROACH TO REACH A TARGETED POPULATION)	1
H0024	BEHAVIORAL HEALTH PREVENTION INFORMATION DISSEMINATION SERVICE (ONE-WAY DIRECT OR NON-DIRECT CONTACT WITH SERVICE AUDIENCES TO AFFECT KNOWLEDGE AND ATTITUDE)	1
H0025	BEHAVIORAL HEALTH PREVENTION EDUCATION SERVICE (DELIVERY OF SERVICES WITH TARGET POPULATION TO AFFECT KNOWLEDGE, ATTITUDE AND/OR BEHAVIOR)	1
H0026	ALCOHOL AND/OR DRUG PREVENTION PROCESS SERVICE, COMMUNITY-BASED (DELIVERY OF SERVICES TO DEVELOP SKILLS OF IMPACTORS)	1
H0027	ALCOHOL AND/OR DRUG PREVENTION ENVIRONMENTAL SERVICE (BROAD RANGE OF EXTERNAL ACTIVITIES GEARED TOWARD MODIFYING SYSTEMS IN ORDER TO MAINSTREAM PREVENTION THROUGH POLICY AND LAW)	1
H0028	ALCOHOL AND/OR DRUG PREVENTION PROBLEM IDENTIFICATION AND REFERRAL SERVICE (E.G., STUDENT ASSISTANCE AND EMPLOYEE ASSISTANCE PROGRAMS), DOES NOT INCLUDE ASSESSMENT	1
H0029	ALCOHOL AND/OR DRUG PREVENTION ALTERNATIVES SERVICE (SERVICES FOR POPULATIONS THAT EXCLUDE ALCOHOL AND OTHER DRUG USE E.G., ALCOHOL FREE SOCIAL EVENTS)	1
H0030	BEHAVIORAL HEALTH HOTLINE SERVICE	1
H0031	MENTAL HEALTH ASSESSMENT, BY NON-PHYSICIAN	6
H0032	MENTAL HEALTH SERVICE PLAN DEVELOPMENT BY NON-PHYSICIAN	32
H0034	MEDICATION TRAINING AND SUPPORT, PER 15 MINUTES	1
H0035	MENTAL HEALTH PARTIAL HOSPITALIZATION, TREATMENT, LESS THAN 24 HOURS	1
H0036	COMMUNITY PSYCHIATRIC SUPPORTIVE TREATMENT, FACE-TO-FACE, PER 15 MINUTES	1
H0037	COMMUNITY PSYCHIATRIC SUPPORTIVE TREATMENT PROGRAM, PER DIEM	1
H0038	SELF-HELP/PEER SERVICES, PER 15 MINUTES	16
H0039	ASSERTIVE COMMUNITY TREATMENT, FACE-TO-FACE, PER 15 MINUTES	1

H0040	ASSERTIVE COMMUNITY TREATMENT PROGRAM, PER DIEM	1
H0041	FOSTER CARE, CHILD, NON-THERAPEUTIC, PER DIEM	1
H0042	FOSTER CARE, CHILD, NON-THERAPEUTIC, PER MONTH	1
H0043	SUPPORTED HOUSING, PER DIEM	1
H0044	SUPPORTED HOUSING, PER MONTH	1
H0045	RESPITE CARE SERVICES, NOT IN THE HOME, PER DIEM	1
H0046	MENTAL HEALTH SERVICES, NOT OTHERWISE SPECIFIED	48
H0047	ALCOHOL AND/OR OTHER DRUG ABUSE SERVICES, NOT OTHERWISE SPECIFIED	1
H0048	ALCOHOL AND/OR OTHER DRUG TESTING: COLLECTION AND HANDLING ONLY, SPECIMENS OTHER THAN BLOOD	1
H0049	ALCOHOL AND/OR DRUG SCREENING	1
H0050	ALCOHOL AND/OR DRUG SERVICES, BRIEF INTERVENTION, PER 15 MINUTES	1
H1000	PRENATAL CARE, AT-RISK ASSESSMENT	1
H1001	PRENATAL CARE, AT-RISK ENHANCED SERVICE; ANTEPARTUM MANAGEMENT	1
H1002	PRENATAL CARE, AT RISK ENHANCED SERVICE; CARE COORDINATION	3
H1003	PRENATAL CARE, AT-RISK ENHANCED SERVICE; EDUCATION	1
H1004	PRENATAL CARE, AT-RISK ENHANCED SERVICE; FOLLOW-UP HOME VISIT	1
H1005	PRENATAL CARE, AT-RISK ENHANCED SERVICE PACKAGE (INCLUDES H1001-H1004)	1
H1010	NON-MEDICAL FAMILY PLANNING EDUCATION, PER SESSION	1
H1011	FAMILY ASSESSMENT BY LICENSED BEHAVIORAL HEALTH PROFESSIONAL FOR STATE DEFINED PURPOSES	1
H2000	COMPREHENSIVE MULTIDISCIPLINARY EVALUATION	1
H2001	REHABILITATION PROGRAM, PER 1/2 DAY	2
H2010	COMPREHENSIVE MEDICATION SERVICES, PER 15 MINUTES	2
H2011	CRISIS INTERVENTION SERVICE, PER 15 MINUTES	96
H2012	BEHAVIORAL HEALTH DAY TREATMENT, PER HOUR	6
H2013	PSYCHIATRIC HEALTH FACILITY SERVICE, PER DIEM	1
H2014	SKILLS TRAINING AND DEVELOPMENT, PER 15 MINUTES	24
H2015	COMPREHENSIVE COMMUNITY SUPPORT SERVICES, PER 15 MINUTES	96
H2016	COMPREHENSIVE COMMUNITY SUPPORT SERVICES, PER DIEM	1
H2017	PSYCHOSOCIAL REHABILITATION SERVICES, PER 15 MINUTES	96
H2018	PSYCHOSOCIAL REHABILITATION SERVICES, PER DIEM	1
H2019	THERAPEUTIC BEHAVIORAL SERVICES, PER 15 MINUTES	32
H2020	THERAPEUTIC BEHAVIORAL SERVICES, PER DIEM	1
H2021	COMMUNITY-BASED WRAP-AROUND SERVICES, PER 15 MINUTES	32

H2022	COMMUNITY-BASED WRAP-AROUND SERVICES, PER DIEM	1
H2023	SUPPORTED EMPLOYMENT, PER 15 MINUTES	64
H2024	SUPPORTED EMPLOYMENT, PER DIEM	1
H2025	ONGOING SUPPORT TO MAINTAIN EMPLOYMENT, PER 15 MINUTES	64
H2026	ONGOING SUPPORT TO MAINTAIN EMPLOYMENT, PER DIEM	1
H2027	PSYCHOEDUCATIONAL SERVICE, PER 15 MINUTES	80
H2029	SEXUAL OFFENDER TREATMENT SERVICE, PER DIEM	1
H2030	MENTAL HEALTH CLUBHOUSE SERVICES, PER 15 MINUTES	1
H2031	MENTAL HEALTH CLUBHOUSE SERVICES, PER DIEM	1
H2032	ACTIVITY THERAPY, PER 15 MINUTES	4
H2033	MULTISYSTEMIC THERAPY FOR JUVENILES, PER 15 MINUTES	32
H2034	ALCOHOL AND/OR DRUG ABUSE HALFWAY HOUSE SERVICES, PER DIEM	1
H2035	ALCOHOL AND/OR OTHER DRUG TREATMENT PROGRAM, PER HOUR	4
H2036	ALCOHOL AND/OR OTHER DRUG TREATMENT PROGRAM, PER DIEM	1
J0120	INJECTION, TETRACYCLINE, UP TO 250 MG	1
J0121	INJECTION, OMADACYCLINE, 1 MG	200
J0122	INJECTION, ERAVACYCLINE, 1 MG	300
J0129	INJECTION, ABATACEPT, 10 MG (CODE MAY BE USED FOR MEDICARE WHEN DRUG ADMINISTERED UNDER THE DIRECT SUPERVISION OF A PHYSICIAN, NOT FOR USE WHEN DRUG IS SELF ADMINISTERED)	100
J0130	INJECTION ABCIXIMAB, 10 MG	6
J0131	INJECTION, ACETAMINOPHEN, 10 MG	400
J0132	INJECTION, ACETYLCYSTEINE, 100 MG	300
J0133	INJECTION, ACYCLOVIR, 5 MG	3600
J0135	INJECTION, ADALIMUMAB, 20 MG	8
J0153	INJECTION, ADENOSINE, 1 MG (NOT TO BE USED TO REPORT ANY ADENOSINE PHOSPHATE COMPOUNDS)	180
J0171	INJECTION, ADRENALIN, EPINEPHRINE, 0.1 MG	120
J0178	INJECTION, AFLIBERCEPT, 1 MG	4
J0180	INJECTION, AGALSIDASE BETA, 1 MG	140
J0185	INJECTION, APREPITANT, 1 MG	130
J0202	INJECTION, ALEMTUZUMAB, 1 MG	12
J0207	INJECTION, AMIFOSTINE, 500 MG	4
J0210	INJECTION, METHYLDOPATE HCL, UP TO 250 MG	16
J0215	INJECTION, ALEFACEPT, 0.5 MG	30

J0220	INJECTION, ALGLUCOSIDASE ALFA, 10 MG, NOT OTHERWISE SPECIFIED	20
J0221	INJECTION, ALGLUCOSIDASE ALFA, (LUMIZYME), 10 MG	300
J0222	INJECTION, PATISIRAN, 0.1 MG	300
J0223	INJECTION, GIVOSIRAN, 0.5 MG	756
J0224	Injection, lumasiran, 0.5 mg	945
J0256	INJECTION, ALPHA 1 PROTEINASE INHIBITOR (HUMAN), NOT OTHERWISE SPECIFIED, 10 MG	1600
J0257	INJECTION, ALPHA 1 PROTEINASE INHIBITOR (HUMAN), (GLASSIA), 10 MG	1400
J0270	INJECTION, ALPROSTADIL, 1.25 MCG (CODE MAY BE USED FOR MEDICARE WHEN DRUG ADMINISTERED UNDER THE DIRECT SUPERVISION OF A PHYSICIAN, NOT FOR USE WHEN DRUG IS SELF ADMINISTERED)	32
J0275	ALPROSTADIL URETHRAL SUPPOSITORY (CODE MAY BE USED FOR MEDICARE WHEN DRUG ADMINISTERED UNDER THE DIRECT SUPERVISION OF A PHYSICIAN, NOT FOR USE WHEN DRUG IS SELF ADMINISTERED)	1
J0278	INJECTION, AMIKACIN SULFATE, 100 MG	15
J0280	INJECTION, AMINOPHYLLIN, UP TO 250 MG	10
J0282	INJECTION, AMIODARONE HYDROCHLORIDE, 30 MG	70
J0285	INJECTION, AMPHOTERICIN B, 50 MG	30
J0287	INJECTION, AMPHOTERICIN B LIPID COMPLEX, 10 MG	300
J0289	INJECTION, AMPHOTERICIN B LIPOSOME, 10 MG	150
J0290	INJECTION, AMPICILLIN SODIUM, 500 MG	24
J0291	INJECTION, PLAZOMICIN, 5 MG	500
J0295	INJECTION, AMPICILLIN SODIUM/SULBACTAM SODIUM, PER 1.5 GM	12
J0300	INJECTION, AMOBARBITAL, UP TO 125 MG	8
J0330	INJECTION, SUCCINYLCHOLINE CHLORIDE, UP TO 20 MG	50
J0348	INJECTION, ANIDULAFUNGIN, 1 MG	200
J0360	INJECTION, HYDRALAZINE HCL, UP TO 20 MG	6
J0364	INJECTION, APOMORPHINE HYDROCHLORIDE, 1 MG	6
J0380	INJECTION, METARAMINOL BITARTRATE, PER 10 MG	1
J0400	INJECTION, ARIPIPRAZOLE, INTRAMUSCULAR, 0.25 MG	120
J0401	INJECTION, ARIPIPRAZOLE, EXTENDED RELEASE, 1 MG	400
J0456	INJECTION, AZITHROMYCIN, 500 MG	4
J0461	INJECTION, ATROPINE SULFATE, 0.01 MG	800
J0470	INJECTION, DIMERCAPROL, PER 100 MG	2
J0475	INJECTION, BACLOFEN, 10 MG	8
J0476	INJECTION, BACLOFEN, 50 MCG FOR INTRATHECAL TRIAL	2

J0480	INJECTION, BASILIXIMAB, 20 MG	1
J0485	INJECTION, BELATACEPT, 1 MG	1500
J0490	INJECTION, BELIMUMAB, 10 MG	160
J0500	INJECTION, DICYCLOMINE HCL, UP TO 20 MG	4
J0515	INJECTION, BENZTROPINE MESYLATE, PER 1 MG	6
J0517	INJECTION, BENRALIZUMAB, 1 MG	30
J0558	INJECTION, PENICILLIN G BENZATHINE AND PENICILLIN G PROCAINE, 100,000 UNITS	24
J0561	INJECTION, PENICILLIN G BENZATHINE, 100,000 UNITS	24
J0565	INJECTION, BEZLOTOXUMAB, 10 MG	200
J0567	INJECTION, CERLIPONASE ALFA, 1 MG	300
J0570	BUPRENORPHINE IMPLANT, 74.2 MG	4
J0583	INJECTION, BIVALIRUDIN, 1 MG	1250
J0584	INJECTION, BUROSUMAB-TWZA 1 MG	90
J0585	INJECTION, ONABOTULINUMTOXINA, 1 UNIT	600
J0586	INJECTION, ABOBOTULINUMTOXINA, 5 UNITS	300
J0587	INJECTION, RIMABOTULINUMTOXINB, 100 UNITS	300
J0588	INJECTION, INCOBOTULINUMTOXIN A, 1 UNIT	600
J0591	INJECTION, DEOXYCHOLIC ACID, 1 MG	100
J0592	INJECTION, BUPRENORPHINE HYDROCHLORIDE, 0.1 MG	12
J0593	INJECTION, LANADELUMAB-FLYO, 1 MG (CODE MAY BE USED FOR MEDICARE WHEN DRUG ADMINISTERED UNDER DIRECT SUPERVISION OF A PHYSICIAN, NOT FOR USE WHEN DRUG IS SELF-ADMINISTERED)	300
J0594	INJECTION, BUSULFAN, 1 MG	320
J0595	INJECTION, BUTORPHANOL TARTRATE, 1 MG	12
J0596	INJECTION, C1 ESTERASE INHIBITOR (RECOMBINANT), RUCONEST, 10 UNITS	840
J0597	INJECTION, C-1 ESTERASE INHIBITOR (HUMAN), BERINERT, 10 UNITS	250
J0598	INJECTION, C-1 ESTERASE INHIBITOR (HUMAN), CINRYZE, 10 UNITS	100
J0599	INJECTION, C-1 ESTERASE INHIBITOR (HUMAN), (HAEGARDA), 10 UNITS	900
J0600	INJECTION, EDETATE CALCIUM DISODIUM, UP TO 1000 MG	3
J0606	INJECTION, ETELCALCETIDE, 0.1 MG	150
J0610	INJECTION, CALCIUM GLUCONATE, PER 10 ML	15
J0620	INJECTION, CALCIUM GLYCEROPHOSPHATE AND CALCIUM LACTATE, PER 10 ML	1
J0630	INJECTION, CALCITONIN SALMON, UP TO 400 UNITS	8
J0636	INJECTION, CALCITRIOL, 0.1 MCG	100
J0637	INJECTION, CASPOFUNGIN ACETATE, 5 MG	20
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J0638	INJECTION, CANAKINUMAB, 1 MG	300
J0640	INJECTION, LEUCOVORIN CALCIUM, PER 50 MG	24
J0641	INJECTION, LEVOLEUCOVORIN, NOT OTHERWISE SPECIFIED, 0.5 MG	1200
J0670	INJECTION, MEPIVACAINE HYDROCHLORIDE, PER 10 ML	10
J0690	INJECTION, CEFAZOLIN SODIUM, 500 MG	16
J0691	INJECTION, LEFAMULIN, 1 MG	300
J0692	INJECTION, CEFEPIME HYDROCHLORIDE, 500 MG	12
J0693	INJECTION, CEFIDEROCOL, 5 MG	1600
J0694	INJECTION, CEFOXITIN SODIUM, 1 GM	12
J0695	INJECTION, CEFTOLOZANE 50 MG AND TAZOBACTAM 25 MG	60
J0696	INJECTION, CEFTRIAXONE SODIUM, PER 250 MG	16
J0697	INJECTION, STERILE CEFUROXIME SODIUM, PER 750 MG	12
J0698	INJECTION, CEFOTAXIME SODIUM, PER GM	12
J0702	INJECTION, BETAMETHASONE ACETATE 3 MG AND BETAMETHASONE SODIUM PHOSPHATE 3 MG	20
J0706	INJECTION, CAFFEINE CITRATE, 5 MG	16
J0712	INJECTION, CEFTAROLINE FOSAMIL, 10 MG	180
J0713	INJECTION, CEFTAZIDIME, PER 500 MG	12
J0714	INJECTION, CEFTAZIDIME AND AVIBACTAM, 0.5 G/0.125 G	12
J0716	INJECTION, CENTRUROIDES IMMUNE F(AB)2, UP TO 120 MILLIGRAMS	4
J0717	INJECTION, CERTOLIZUMAB PEGOL, 1 MG (CODE MAY BE USED FOR MEDICARE WHEN DRUG ADMINISTERED UNDER THE DIRECT SUPERVISION OF A PHYSICIAN, NOT FOR USE WHEN DRUG IS SELF ADMINISTERED)	400
J0720	INJECTION, CHLORAMPHENICOL SODIUM SUCCINATE, UP TO 1 GM	15
J0725	INJECTION, CHORIONIC GONADOTROPIN, PER 1,000 USP UNITS	10
J0735	INJECTION, CLONIDINE HYDROCHLORIDE, 1 MG	50
J0740	INJECTION, CIDOFOVIR, 375 MG	2
J0742	INJECTION, IMIPENEM 4 MG, CILASTATIN 4 MG AND RELEBACTAM 2 MG	500
J0743	INJECTION, CILASTATIN SODIUM; IMIPENEM, PER 250 MG	16
J0744	INJECTION, CIPROFLOXACIN FOR INTRAVENOUS INFUSION, 200 MG	8
J0745	INJECTION, CODEINE PHOSPHATE, PER 30 MG	8
J0770	INJECTION, COLISTIMETHATE SODIUM, UP TO 150 MG	5
J0775	INJECTION, COLLAGENASE, CLOSTRIDIUM HISTOLYTICUM, 0.01 MG	180
J0780	INJECTION, PROCHLORPERAZINE, UP TO 10 MG	10
J0791	INJECTION, CRIZANLIZUMAB-TMCA, 5 MG	160

J0795	INJECTION, CORTICORELIN OVINE TRIFLUTATE, 1 MICROGRAM	100
J0800	INJECTION, CORTICOTROPIN, UP TO 40 UNITS	3
J0834	INJECTION, COSYNTROPIN, 0.25 MG	3
J0840	INJECTION, CROTALIDAE POLYVALENT IMMUNE FAB (OVINE), UP TO 1 GRAM	18
J0841	INJECTION, CROTALIDAE IMMUNE F(AB')2 (EQUINE), 120 MG	24
J0850	INJECTION, CYTOMEGALOVIRUS IMMUNE GLOBULIN INTRAVENOUS (HUMAN), PER VIAL	9
J0875	INJECTION, DALBAVANCIN, 5 MG	300
J0878	INJECTION, DAPTOMYCIN, 1 MG	1500
J0881	INJECTION, DARBEPOETIN ALFA, 1 MICROGRAM (NON-ESRD USE)	500
J0882	INJECTION, DARBEPOETIN ALFA, 1 MICROGRAM (FOR ESRD ON DIALYSIS)	300
J0883	INJECTION, ARGATROBAN, 1 MG (FOR NON-ESRD USE)	1250
J0884	INJECTION, ARGATROBAN, 1 MG (FOR ESRD ON DIALYSIS)	1250
J0885	INJECTION, EPOETIN ALFA, (FOR NON-ESRD USE), 1000 UNITS	60
J0887	INJECTION, EPOETIN BETA, 1 MICROGRAM, (FOR ESRD ON DIALYSIS)	360
J0888	INJECTION, EPOETIN BETA, 1 MICROGRAM, (FOR NON ESRD USE)	360
J0894	INJECTION, DECITABINE, 1 MG	100
J0895	INJECTION, DEFEROXAMINE MESYLATE, 500 MG	212
J0896	INJECTION, LUSPATERCEPT-AAMT, 0.25 MG	1100
J0897	INJECTION, DENOSUMAB, 1 MG	120
J0945	INJECTION, BROMPHENIRAMINE MALEATE, PER 10 MG	4
J1000	INJECTION, DEPO-ESTRADIOL CYPIONATE, UP TO 5 MG	1
J1020	INJECTION, METHYLPREDNISOLONE ACETATE, 20 MG	8
J1030	INJECTION, METHYLPREDNISOLONE ACETATE, 40 MG	8
J1040	INJECTION, METHYLPREDNISOLONE ACETATE, 80 MG	4
J1050	INJECTION, MEDROXYPROGESTERONE ACETATE, 1 MG	1000
J1071	INJECTION, TESTOSTERONE CYPIONATE, 1 MG	400
J1095	INJECTION, DEXAMETHASONE 9 PERCENT, INTRAOCULAR, 1 MICROGRAM	1034
J1096	DEXAMETHASONE, LACRIMAL OPHTHALMIC INSERT, 0.1 MG	8
J1097	PHENYLEPHRINE 10.16 MG/ML AND KETOROLAC 2.88 MG/ML OPHTHALMIC IRRIGATION SOLUTION, 1 ML	4
J1100	INJECTION, DEXAMETHASONE SODIUM PHOSPHATE, 1 MG	120
J1110	INJECTION, DIHYDROERGOTAMINE MESYLATE, PER 1 MG	3
J1120	INJECTION, ACETAZOLAMIDE SODIUM, UP TO 500 MG	2
J1130	INJECTION, DICLOFENAC SODIUM, 0.5 MG	300

J1160	INJECTION, DIGOXIN, UP TO 0.5 MG	3
J1162	INJECTION, DIGOXIN IMMUNE FAB (OVINE), PER VIAL	10
J1165	INJECTION, PHENYTOIN SODIUM, PER 50 MG	50
J1170	INJECTION, HYDROMORPHONE, UP TO 4 MG	50
J1190	INJECTION, DEXRAZOXANE HYDROCHLORIDE, PER 250 MG	8
J1200	INJECTION, DIPHENHYDRAMINE HCL, UP TO 50 MG	8
J1201	INJECTION, CETIRIZINE HYDROCHLORIDE, 0.5 MG	20
J1205	INJECTION, CHLOROTHIAZIDE SODIUM, PER 500 MG	4
J1212	INJECTION, DMSO, DIMETHYL SULFOXIDE, 50%, 50 ML	1
J1230	INJECTION, METHADONE HCL, UP TO 10 MG	5
J1240	INJECTION, DIMENHYDRINATE, UP TO 50 MG	6
J1245	INJECTION, DIPYRIDAMOLE, PER 10 MG	10
J1250	INJECTION, DOBUTAMINE HYDROCHLORIDE, PER 250 MG	60
J1260	INJECTION, DOLASETRON MESYLATE, 10 MG	2
J1265	INJECTION, DOPAMINE HCL, 40 MG	230
J1267	INJECTION, DORIPENEM, 10 MG	150
J1270	INJECTION, DOXERCALCIFEROL, 1 MCG	16
J1290	INJECTION, ECALLANTIDE, 1 MG	60
J1300	INJECTION, ECULIZUMAB, 10 MG	120
J1301	INJECTION, EDARAVONE, 1 MG	60
J1303	INJECTION, RAVULIZUMAB-CWVZ, 10 MG	360
J1322	INJECTION, ELOSULFASE ALFA, 1 MG	150
J1324	INJECTION, ENFUVIRTIDE, 1 MG	108
J1325	INJECTION, EPOPROSTENOL, 0.5 MG	810
J1327	INJECTION, EPTIFIBATIDE, 5 MG	99
J1330	INJECTION, ERGONOVINE MALEATE, UP TO 0.2 MG	1
J1335	INJECTION, ERTAPENEM SODIUM, 500 MG	2
J1364	INJECTION, ERYTHROMYCIN LACTOBIONATE, PER 500 MG	8
J1380	INJECTION, ESTRADIOL VALERATE, UP TO 10 MG	4
J1410	INJECTION, ESTROGEN CONJUGATED, PER 25 MG	4
J1427	Injection, viltolarsen, 10 mg	1200
J1428	INJECTION, ETEPLIRSEN, 10 MG	450
J1429	INJECTION, GOLODIRSEN, 10 MG	450
J1430	INJECTION, ETHANOLAMINE OLEATE, 100 MG	10

J1435	INJECTION, ESTRONE, PER 1 MG	1
J1437	INJECTION, FERRIC DERISOMALTOSE, 10 MG	100
J1438	INJECTION, ETANERCEPT, 25 MG (CODE MAY BE USED FOR MEDICARE WHEN DRUG ADMINISTERED UNDER THE DIRECT SUPERVISION OF A PHYSICIAN, NOT FOR USE WHEN DRUG IS SELF ADMINISTERED)	2
J1439	INJECTION, FERRIC CARBOXYMALTOSE, 1 MG	1000
J1442	INJECTION, FILGRASTIM (G-CSF), EXCLUDES BIOSIMILARS, 1 MICROGRAM	1500
J1443	Injection, ferric pyrophosphate citrate solution (triferic), 0.1 mg of iron	272
J1444	INJECTION, FERRIC PYROPHOSPHATE CITRATE POWDER, 0.1 MG OF IRON	272
J1447	INJECTION, TBO-FILGRASTIM, 1 MICROGRAM	960
J1450	INJECTION FLUCONAZOLE, 200 MG	4
J1451	INJECTION, FOMEPIZOLE, 15 MG	200
J1453	INJECTION, FOSAPREPITANT, 1 MG	150
J1454	INJECTION, FOSNETUPITANT 235 MG AND PALONOSETRON 0.25 MG	1
J1455	INJECTION, FOSCARNET SODIUM, PER 1000 MG	90
J1458	INJECTION, GALSULFASE, 1 MG	100
J1459	INJECTION, IMMUNE GLOBULIN (PRIVIGEN), INTRAVENOUS, NON-LYOPHILIZED (E.G., LIQUID), 500 MG	300
J1460	INJECTION, GAMMA GLOBULIN, INTRAMUSCULAR, 1 CC	10
J1554	Injection, immune globulin (asceniv), 500 mg	240
J1555	INJECTION, IMMUNE GLOBULIN (CUVITRU), 100 MG	1500
J1556	INJECTION, IMMUNE GLOBULIN (BIVIGAM), 500 MG	300
J1557	INJECTION, IMMUNE GLOBULIN, (GAMMAPLEX), INTRAVENOUS, NON-LYOPHILIZED (E.G., LIQUID), 500 MG	300
J1558	INJECTION, IMMUNE GLOBULIN (XEMBIFY), 100 MG	1500
J1559	INJECTION, IMMUNE GLOBULIN (HIZENTRA), 100 MG	1500
J1560	INJECTION, GAMMA GLOBULIN, INTRAMUSCULAR, OVER 10 CC	1
J1561	INJECTION, IMMUNE GLOBULIN, (GAMUNEX-C/GAMMAKED), NON-LYOPHILIZED (E.G., LIQUID), 500 MG	300
J1566	INJECTION, IMMUNE GLOBULIN, INTRAVENOUS, LYOPHILIZED (E.G., POWDER), NOT OTHERWISE SPECIFIED, 500 MG	300
J1568	INJECTION, IMMUNE GLOBULIN, (OCTAGAM), INTRAVENOUS, NON-LYOPHILIZED (E.G., LIQUID), 500 MG	300
J1569	INJECTION, IMMUNE GLOBULIN, (GAMMAGARD LIQUID), NON-LYOPHILIZED, (E.G., LIQUID), 500 MG	300
J1570	INJECTION, GANCICLOVIR SODIUM, 500 MG	18
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J1571	INJECTION, HEPATITIS B IMMUNE GLOBULIN (HEPAGAM B), INTRAMUSCULAR, 0.5 ML	20
J1572	INJECTION, IMMUNE GLOBULIN, (FLEBOGAMMA/FLEBOGAMMA DIF), INTRAVENOUS, NON-LYOPHILIZED (E.G., LIQUID), 500 MG	300
J1573	INJECTION, HEPATITIS B IMMUNE GLOBULIN (HEPAGAM B), INTRAVENOUS, 0.5 ML	130
J1575	INJECTION, IMMUNE GLOBULIN/HYALURONIDASE, (HYQVIA), 100 MG IMMUNEGLOBULIN	900
J1580	INJECTION, GARAMYCIN, GENTAMICIN, UP TO 80 MG	9
J1595	INJECTION, GLATIRAMER ACETATE, 20 MG	2
J1599	INJECTION, IMMUNE GLOBULIN, INTRAVENOUS, NON-LYOPHILIZED (E.G., LIQUID), NOT OTHERWISE SPECIFIED, 500 MG	300
J1600	INJECTION, GOLD SODIUM THIOMALATE, UP TO 50 MG	2
J1602	INJECTION, GOLIMUMAB, 1 MG, FOR INTRAVENOUS USE	300
J1610	INJECTION, GLUCAGON HYDROCHLORIDE, PER 1 MG	3
J1626	INJECTION, GRANISETRON HYDROCHLORIDE, 100 MCG	30
J1627	INJECTION, GRANISETRON, EXTENDED-RELEASE, 0.1 MG	100
J1628	INJECTION, GUSELKUMAB, 1 MG	100
J1630	INJECTION, HALOPERIDOL, UP TO 5 MG	7
J1631	INJECTION, HALOPERIDOL DECANOATE, PER 50 MG	9
J1632	INJECTION, BREXANOLONE, 1 MG	700
J1640	INJECTION, HEMIN, 1 MG	672
J1642	INJECTION, HEPARIN SODIUM, (HEPARIN LOCK FLUSH), PER 10 UNITS	4800
J1644	INJECTION, HEPARIN SODIUM, PER 1000 UNITS	50
J1645	INJECTION, DALTEPARIN SODIUM, PER 2500 IU	10
J1650	INJECTION, ENOXAPARIN SODIUM, 10 MG	30
J1652	INJECTION, FONDAPARINUX SODIUM, 0.5 MG	20
J1670	INJECTION, TETANUS IMMUNE GLOBULIN, HUMAN, UP TO 250 UNITS	2
J1720	INJECTION, HYDROCORTISONE SODIUM SUCCINATE, UP TO 100 MG	10
J1726	INJECTION, HYDROXYPROGESTERONE CAPROATE, (MAKENA), 10 MG	28
J1729	INJECTION, HYDROXYPROGESTERONE CAPROATE, NOT OTHERWISE SPECIFIED, 10 MG	25
J1738	INJECTION, MELOXICAM, 1 MG	30
J1740	INJECTION, IBANDRONATE SODIUM, 1 MG	3
J1741	INJECTION, IBUPROFEN, 100 MG	32
J1742	INJECTION, IBUTILIDE FUMARATE, 1 MG	4
J1743	INJECTION, IDURSULFASE, 1 MG	66

J1744	INJECTION, ICATIBANT, 1 MG	90
J1745	INJECTION, INFLIXIMAB, EXCLUDES BIOSIMILAR, 10 MG	150
J1746	INJECTION, IBALIZUMAB-UIYK, 10 MG	200
J1750	INJECTION, IRON DEXTRAN, 50 MG	45
J1756	INJECTION, IRON SUCROSE, 1 MG	500
J1786	INJECTION, IMIGLUCERASE, 10 UNITS	680
J1790	INJECTION, DROPERIDOL, UP TO 5 MG	2
J1800	INJECTION, PROPRANOLOL HCL, UP TO 1 MG	12
J1815	INJECTION, INSULIN, PER 5 UNITS	200
J1817	INSULIN FOR ADMINISTRATION THROUGH DME (I.E., INSULIN PUMP) PER 50 UNITS	100
J1823	INJECTION, INEBILIZUMAB-CDON, 1 MG	300
J1826	INJECTION, INTERFERON BETA-1A, 30 MCG	1
J1830	INJECTION, INTERFERON BETA-1B, 0.25 MG (CODE MAY BE USED FOR MEDICARE WHEN DRUG ADMINISTERED UNDER THE DIRECT SUPERVISION OF A PHYSICIAN, NOT FOR USE WHEN DRUG IS SELF ADMINISTERED)	1
J1833	INJECTION, ISAVUCONAZONIUM, 1 MG	1116
J1840	INJECTION, KANAMYCIN SULFATE, UP TO 500 MG	3
J1850	INJECTION, KANAMYCIN SULFATE, UP TO 75 MG	14
J1885	INJECTION, KETOROLAC TROMETHAMINE, PER 15 MG	8
J1930	INJECTION, LANREOTIDE, 1 MG	120
J1931	INJECTION, LARONIDASE, 0.1 MG	609
J1940	INJECTION, FUROSEMIDE, UP TO 20 MG	10
J1943	INJECTION, ARIPIPRAZOLE LAUROXIL, (ARISTADA INITIO), 1 MG	675
J1944	INJECTION, ARIPIPRAZOLE LAUROXIL, (ARISTADA), 1 MG	1064
J1950	INJECTION, LEUPROLIDE ACETATE (FOR DEPOT SUSPENSION), PER 3.75 MG	12
J1951	Injection, leuprolide acetate for depot suspension (fensolvi), 0.25 mg	180
J1953	INJECTION, LEVETIRACETAM, 10 MG	300
J1955	INJECTION, LEVOCARNITINE, PER 1 GM	11
J1956	INJECTION, LEVOFLOXACIN, 250 MG	4
J1980	INJECTION, HYOSCYAMINE SULFATE, UP TO 0.25 MG	8
J2001	INJECTION, LIDOCAINE HCL FOR INTRAVENOUS INFUSION, 10 MG	400
J2010	INJECTION, LINCOMYCIN HCL, UP TO 300 MG	10
J2020	INJECTION, LINEZOLID, 200 MG	6
J2060	INJECTION, LORAZEPAM, 2 MG	10
J2062	LOXAPINE FOR INHALATION, 1 MG	10

J2150	INJECTION, MANNITOL, 25% IN 50 ML	8
J2170	INJECTION, MECASERMIN, 1 MG	8
J2175	INJECTION, MEPERIDINE HYDROCHLORIDE, PER 100 MG	6
J2182	INJECTION, MEPOLIZUMAB, 1 MG	300
J2185	INJECTION, MEROPENEM, 100 MG	60
J2186	INJECTION, MEROPENEM AND VABORBACTAM, 10MG/10MG (20MG)	600
J2210	INJECTION, METHYLERGONOVINE MALEATE, UP TO 0.2 MG	5
J2212	INJECTION, METHYLNALTREXONE, 0.1 MG	240
J2248	INJECTION, MICAFUNGIN SODIUM, 1 MG	300
J2250	INJECTION, MIDAZOLAM HYDROCHLORIDE, PER 1 MG	30
J2260	INJECTION, MILRINONE LACTATE, 5 MG	252
J2265	INJECTION, MINOCYCLINE HYDROCHLORIDE, 1 MG	400
J2270	INJECTION, MORPHINE SULFATE, UP TO 10 MG	15
J2274	INJECTION, MORPHINE SULFATE, PRESERVATIVE-FREE FOR EPIDURAL OR INTRATHECAL USE, 10 MG	100
J2278	INJECTION, ZICONOTIDE, 1 MICROGRAM	999
J2280	INJECTION, MOXIFLOXACIN, 100 MG	8
J2300	INJECTION, NALBUPHINE HYDROCHLORIDE, PER 10 MG	10
J2310	INJECTION, NALOXONE HYDROCHLORIDE, PER 1 MG	10
J2315	INJECTION, NALTREXONE, DEPOT FORM, 1 MG	380
J2320	INJECTION, NANDROLONE DECANOATE, UP TO 50 MG	4
J2323	INJECTION, NATALIZUMAB, 1 MG	300
J2325	INJECTION, NESIRITIDE, 0.1 MG	34
J2326	INJECTION, NUSINERSEN, 0.1 MG	120
J2350	INJECTION, OCRELIZUMAB, 1 MG	600
J2353	INJECTION, OCTREOTIDE, DEPOT FORM FOR INTRAMUSCULAR INJECTION, 1 MG	60
J2354	INJECTION, OCTREOTIDE, NON-DEPOT FORM FOR SUBCUTANEOUS OR INTRAVENOUS INJECTION, 25 MCG	60
J2355	INJECTION, OPRELVEKIN, 5 MG	2
J2357	INJECTION, OMALIZUMAB, 5 MG	120
J2358	INJECTION, OLANZAPINE, LONG-ACTING, 1 MG	405
J2360	INJECTION, ORPHENADRINE CITRATE, UP TO 60 MG	3
J2370	INJECTION, PHENYLEPHRINE HCL, UP TO 1 ML	30
J2400	INJECTION, CHLOROPROCAINE HYDROCHLORIDE, PER 30 ML	4
J2405	INJECTION, ONDANSETRON HYDROCHLORIDE, PER 1 MG	64

J2407	Injection, oritavancin (orbactiv), 10 mg	120
J2410	INJECTION, OXYMORPHONE HCL, UP TO 1 MG	2
J2425	INJECTION, PALIFERMIN, 50 MICROGRAMS	125
J2426	INJECTION, PALIPERIDONE PALMITATE EXTENDED RELEASE, 1 MG	819
J2430	INJECTION, PAMIDRONATE DISODIUM, PER 30 MG	3
J2440	INJECTION, PAPAVERINE HCL, UP TO 60 MG	4
J2469	INJECTION, PALONOSETRON HCL, 25 MCG	10
J2501	INJECTION, PARICALCITOL, 1 MCG	25
J2502	INJECTION, PASIREOTIDE LONG ACTING, 1 MG	60
J2503	INJECTION, PEGAPTANIB SODIUM, 0.3 MG	2
J2504	INJECTION, PEGADEMASE BOVINE, 25 IU	15
J2505	INJECTION, PEGFILGRASTIM, 6 MG	1
J2507	INJECTION, PEGLOTICASE, 1 MG	8
J2510	INJECTION, PENICILLIN G PROCAINE, AQUEOUS, UP TO 600,000 UNITS	4
J2513	INJECTION, PENTASTARCH, 10% SOLUTION, 100 ML	1
J2515	INJECTION, PENTOBARBITAL SODIUM, PER 50 MG	8
J2540	INJECTION, PENICILLIN G POTASSIUM, UP TO 600,000 UNITS	75
J2543	INJECTION, PIPERACILLIN SODIUM/TAZOBACTAM SODIUM, 1 GRAM/0.125 GRAMS (1.125 GRAMS)	20
J2545	PENTAMIDINE ISETHIONATE, INHALATION SOLUTION, FDA-APPROVED FINAL PRODUCT, NON-COMPOUNDED, ADMINISTERED THROUGH DME, UNIT DOSE FORM, PER 300 MG	1
J2547	INJECTION, PERAMIVIR, 1 MG	600
J2550	INJECTION, PROMETHAZINE HCL, UP TO 50 MG	3
J2560	INJECTION, PHENOBARBITAL SODIUM, UP TO 120 MG	16
J2562	INJECTION, PLERIXAFOR, 1 MG	48
J2590	INJECTION, OXYTOCIN, UP TO 10 UNITS	15
J2597	INJECTION, DESMOPRESSIN ACETATE, PER 1 MCG	45
J2675	INJECTION, PROGESTERONE, PER 50 MG	1
J2680	INJECTION, FLUPHENAZINE DECANOATE, UP TO 25 MG	4
J2690	INJECTION, PROCAINAMIDE HCL, UP TO 1 GM	4
J2700	INJECTION, OXACILLIN SODIUM, UP TO 250 MG	48
J2704	INJECTION, PROPOFOL, 10 MG	400
J2710	INJECTION, NEOSTIGMINE METHYLSULFATE, UP TO 0.5 MG	10
	INJECTION, PROTAMINE SULFATE, PER 10 MG	10

J2724	INJECTION, PROTEIN C CONCENTRATE, INTRAVENOUS, HUMAN, 10 IU	3500
J2730	INJECTION, PRALIDOXIME CHLORIDE, UP TO 1 GM	2
J2760	INJECTION, PHENTOLAMINE MESYLATE, UP TO 5 MG	2
J2765	INJECTION, METOCLOPRAMIDE HCL, UP TO 10 MG	18
J2770	INJECTION, QUINUPRISTIN/DALFOPRISTIN, 500 MG (150/350)	7
J2778	INJECTION, RANIBIZUMAB, 0.1 MG	10
J2780	INJECTION, RANITIDINE HYDROCHLORIDE, 25 MG	16
J2783	INJECTION, RASBURICASE, 0.5 MG	60
J2785	INJECTION, REGADENOSON, 0.1 MG	4
J2786	INJECTION, RESLIZUMAB, 1 MG	500
J2787	RIBOFLAVIN 5'-PHOSPHATE, OPHTHALMIC SOLUTION, UP TO 3 ML	2
J2788	INJECTION, RHO D IMMUNE GLOBULIN, HUMAN, MINIDOSE, 50 MICROGRAMS (250 I.U.)	1
J2790	INJECTION, RHO D IMMUNE GLOBULIN, HUMAN, FULL DOSE, 300 MICROGRAMS (1500 I.U.)	3
J2791	INJECTION, RHO(D) IMMUNE GLOBULIN (HUMAN), (RHOPHYLAC), INTRAMUSCULAR OR INTRAVENOUS, 100 IU	275
J2792	INJECTION, RHO D IMMUNE GLOBULIN, INTRAVENOUS, HUMAN, SOLVENT DETERGENT, 100 IU	450
J2793	INJECTION, RILONACEPT, 1 MG	320
J2794	INJECTION, RISPERIDONE (RISPERDAL CONSTA), 0.5 MG	100
J2795	INJECTION, ROPIVACAINE HYDROCHLORIDE, 1 MG	2400
J2796	INJECTION, ROMIPLOSTIM, 10 MICROGRAMS	150
J2797	INJECTION, ROLAPITANT, 0.5 MG	333
J2798	INJECTION, RISPERIDONE, (PERSERIS), 0.5 MG	240
J2800	INJECTION, METHOCARBAMOL, UP TO 10 ML	3
J2805	INJECTION, SINCALIDE, 5 MICROGRAMS	3
J2810	INJECTION, THEOPHYLLINE, PER 40 MG	20
J2820	INJECTION, SARGRAMOSTIM (GM-CSF), 50 MCG	10
J2840	INJECTION, SEBELIPASE ALFA, 1 MG	160
J2850	INJECTION, SECRETIN, SYNTHETIC, HUMAN, 1 MICROGRAM	48
J2860	INJECTION, SILTUXIMAB, 10 MG	170
J2916	INJECTION, SODIUM FERRIC GLUCONATE COMPLEX IN SUCROSE INJECTION, 12.5 MG	20
J2920	INJECTION, METHYLPREDNISOLONE SODIUM SUCCINATE, UP TO 40 MG	25
J2930	INJECTION, METHYLPREDNISOLONE SODIUM SUCCINATE, UP TO 125 MG	25

J2941	INJECTION, SOMATROPIN, 1 MG	8
J2993	INJECTION, RETEPLASE, 18.1 MG	2
J2997	INJECTION, ALTEPLASE RECOMBINANT, 1 MG	100
J3000	INJECTION, STREPTOMYCIN, UP TO 1 GM	2
J3010	INJECTION, FENTANYL CITRATE, 0.1 MG	100
J3030	INJECTION, SUMATRIPTAN SUCCINATE, 6 MG (CODE MAY BE USED FOR MEDICARE WHEN DRUG ADMINISTERED UNDER THE DIRECT SUPERVISION OF A PHYSICIAN, NOT FOR USE WHEN DRUG IS SELF ADMINISTERED)	2
J3031	INJECTION, FREMANEZUMAB-VFRM, 1 MG (CODE MAY BE USED FOR MEDICARE WHEN DRUG ADMINISTERED UNDER THE DIRECT SUPERVISION OF A PHYSICIAN, NOT FOR USE WHEN DRUG IS SELF-ADMINISTERED)	675
J3032	INJECTION, EPTINEZUMAB-JJMR, 1 MG	300
J3060	INJECTION, TALIGLUCERASE ALFA, 10 UNITS	760
J3070	INJECTION, PENTAZOCINE, 30 MG	3
J3090	INJECTION, TEDIZOLID PHOSPHATE, 1 MG	200
J3095	INJECTION, TELAVANCIN, 10 MG	150
J3101	INJECTION, TENECTEPLASE, 1 MG	50
J3105	INJECTION, TERBUTALINE SULFATE, UP TO 1 MG	4
J3110	INJECTION, TERIPARATIDE, 10 MCG	2
J3111	INJECTION, ROMOSOZUMAB-AQQG, 1 MG	210
J3121	INJECTION, TESTOSTERONE ENANTHATE, 1 MG	400
J3145	INJECTION, TESTOSTERONE UNDECANOATE, 1 MG	750
J3230	INJECTION, CHLORPROMAZINE HCL, UP TO 50 MG	6
J3240	INJECTION, THYROTROPIN ALPHA, 0.9 MG, PROVIDED IN 1.1 MG VIAL	1
J3241	INJECTION, TEPROTUMUMAB-TRBW, 10 MG	300
J3243	INJECTION, TIGECYCLINE, 1 MG	200
J3245	INJECTION, TILDRAKIZUMAB, 1 MG	100
J3246	INJECTION, TIROFIBAN HCL, 0.25 MG	100
J3250	INJECTION, TRIMETHOBENZAMIDE HCL, UP TO 200 MG	4
J3260	INJECTION, TOBRAMYCIN SULFATE, UP TO 80 MG	12
J3262	INJECTION, TOCILIZUMAB, 1 MG	800
J3285	INJECTION, TREPROSTINIL, 1 MG	9
J3300	INJECTION, TRIAMCINOLONE ACETONIDE, PRESERVATIVE FREE, 1 MG	160
J3301	INJECTION, TRIAMCINOLONE ACETONIDE, NOT OTHERWISE SPECIFIED, 10 MG	16
J3303	INJECTION, TRIAMCINOLONE HEXACETONIDE, PER 5 MG	24

J3304	INJECTION, TRIAMCINOLONE ACETONIDE, PRESERVATIVE-FREE, EXTENDED- RELEASE, MICROSPHERE FORMULATION, 1 MG	64
J3315	INJECTION, TRIPTORELIN PAMOATE, 3.75 MG	6
J3316	INJECTION, TRIPTORELIN, EXTENDED-RELEASE, 3.75 MG	6
J3355	INJECTION, UROFOLLITROPIN, 75 IU	6
J3357	USTEKINUMAB, FOR SUBCUTANEOUS INJECTION, 1 MG	90
J3358	USTEKINUMAB, FOR INTRAVENOUS INJECTION, 1 MG	520
J3360	INJECTION, DIAZEPAM, UP TO 5 MG	6
J3370	INJECTION, VANCOMYCIN HCL, 500 MG	12
J3380	INJECTION, VEDOLIZUMAB, 1 MG	300
J3385	INJECTION, VELAGLUCERASE ALFA, 100 UNITS	80
J3396	INJECTION, VERTEPORFIN, 0.1 MG	150
J3397	INJECTION, VESTRONIDASE ALFA-VJBK, 1 MG	600
J3398	INJECTION, VORETIGENE NEPARVOVEC-RZYL, 1 BILLION VECTOR GENOMES	150
J3399	INJECTION, ONASEMNOGENE ABEPARVOVEC-XIOI, PER TREATMENT, UP TO 5X10^15 VECTOR GENOMES	1
J3410	INJECTION, HYDROXYZINE HCL, UP TO 25 MG	16
J3411	INJECTION, THIAMINE HCL, 100 MG	8
J3415	INJECTION, PYRIDOXINE HCL, 100 MG	6
J3420	INJECTION, VITAMIN B-12 CYANOCOBALAMIN, UP TO 1000 MCG	1
J3430	INJECTION, PHYTONADIONE (VITAMIN K), PER 1 MG	50
J3465	INJECTION, VORICONAZOLE, 10 MG	120
J3470	INJECTION, HYALURONIDASE, UP TO 150 UNITS	3
J3471	INJECTION, HYALURONIDASE, OVINE, PRESERVATIVE FREE, PER 1 USP UNIT (UP TO 999 USP UNITS)	999
J3472	INJECTION, HYALURONIDASE, OVINE, PRESERVATIVE FREE, PER 1000 USP UNITS	2
J3473	INJECTION, HYALURONIDASE, RECOMBINANT, 1 USP UNIT	450
J3475	INJECTION, MAGNESIUM SULFATE, PER 500 MG	80
J3480	INJECTION, POTASSIUM CHLORIDE, PER 2 MEQ	200
J3485	INJECTION, ZIDOVUDINE, 10 MG	160
J3486	INJECTION, ZIPRASIDONE MESYLATE, 10 MG	4
J3489	INJECTION, ZOLEDRONIC ACID, 1 MG	5
J3530	NASAL VACCINE INHALATION	1
J7030	INFUSION, NORMAL SALINE SOLUTION , 1000 CC	20
J7040	INFUSION, NORMAL SALINE SOLUTION, STERILE (500 ML = 1 UNIT)	12

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J7042	5% DEXTROSE/NORMAL SALINE (500 ML = 1 UNIT)	12
J7050	INFUSION, NORMAL SALINE SOLUTION, 250 CC	20
J7060	5% DEXTROSE/WATER (500 ML = 1 UNIT)	10
J7070	INFUSION, D5W, 1000 CC	7
J7100	INFUSION, DEXTRAN 40, 500 ML	2
J7110	INFUSION, DEXTRAN 75, 500 ML	3
J7120	RINGERS LACTATE INFUSION, UP TO 1000 CC	20
J7121	5% DEXTROSE IN LACTATED RINGERS INFUSION, UP TO 1000 CC	5
J7131	HYPERTONIC SALINE SOLUTION, 1 ML	500
J7168	Prothrombin complex concentrate (human), kcentra, per i.u. of factor ix activity	5000
J7169	INJECTION, COAGULATION FACTOR XA (RECOMBINANT), INACTIVATED-ZHZO (ANDEXXA), 10 MG	180
J7170	INJECTION, EMICIZUMAB-KXWH, 0.5 MG	1800
J7175	INJECTION, FACTOR X, (HUMAN), 1 I.U.	9000
J7177	INJECTION, HUMAN FIBRINOGEN CONCENTRATE (FIBRYGA), 1 MG	10500
J7178	INJECTION, HUMAN FIBRINOGEN CONCENTRATE, NOT OTHERWISE SPECIFIED, 1 MG	7700
J7179	INJECTION, VON WILLEBRAND FACTOR (RECOMBINANT), (VONVENDI), 1 I.U. VWF:RCO	9600
J7180	INJECTION, FACTOR XIII (ANTIHEMOPHILIC FACTOR, HUMAN), 1 I.U.	6000
J7181	INJECTION, FACTOR XIII A-SUBUNIT, (RECOMBINANT), PER IU	3850
J7182	INJECTION, FACTOR VIII, (ANTIHEMOPHILIC FACTOR, RECOMBINANT), (NOVOEIGHT), PER IU	22000
J7183	INJECTION, VON WILLEBRAND FACTOR COMPLEX (HUMAN), WILATE, 1 I.U. VWF:RCO	9600
J7185	INJECTION, FACTOR VIII (ANTIHEMOPHILIC FACTOR, RECOMBINANT) (XYNTHA), PER I.U.	4000
J7186	INJECTION, ANTIHEMOPHILIC FACTOR VIII/VON WILLEBRAND FACTOR COMPLEX (HUMAN), PER FACTOR VIII I.U.	9600
J7187	INJECTION, VON WILLEBRAND FACTOR COMPLEX (HUMATE-P), PER IU VWF:RCO	9600
J7188	INJECTION, FACTOR VIII (ANTIHEMOPHILIC FACTOR, RECOMBINANT), (OBIZUR), PER I.U.	22000
J7189	FACTOR VIIA (ANTIHEMOPHILIC FACTOR, RECOMBINANT), (NOVOSEVEN RT), 1 MICROGRAM	26000
J7190	FACTOR VIII (ANTIHEMOPHILIC FACTOR, HUMAN) PER I.U.	22000
J7192	FACTOR VIII (ANTIHEMOPHILIC FACTOR, RECOMBINANT) PER I.U., NOT OTHERWISE SPECIFIED	22000
J7193	FACTOR IX (ANTIHEMOPHILIC FACTOR, PURIFIED, NON-RECOMBINANT) PER I.U.	20000

J7194	FACTOR IX, COMPLEX, PER I.U.	9000
J7195	INJECTION, FACTOR IX (ANTIHEMOPHILIC FACTOR, RECOMBINANT) PER IU, NOT OTHERWISE SPECIFIED	20000
J7196	INJECTION, ANTITHROMBIN RECOMBINANT, 50 I.U.	175
J7197	ANTITHROMBIN III (HUMAN), PER I.U.	6300
J7198	ANTI-INHIBITOR, PER I.U.	30000
J7200	INJECTION, FACTOR IX, (ANTIHEMOPHILIC FACTOR, RECOMBINANT), RIXUBIS, PER IU	20000
J7201	INJECTION, FACTOR IX, FC FUSION PROTEIN, (RECOMBINANT), ALPROLIX, 1 I.U.	9000
J7202	INJECTION, FACTOR IX, ALBUMIN FUSION PROTEIN, (RECOMBINANT), IDELVION, 1 I.U.	11550
J7203	INJECTION FACTOR IX, (ANTIHEMOPHILIC FACTOR, RECOMBINANT), GLYCOPEGYLATED, (REBINYN), 1 IU	12000
J7204	INJECTION, FACTOR VIII, ANTIHEMOPHILIC FACTOR (RECOMBINANT), (ESPEROCT), GLYCOPEGYLATED-EXEI, PER IU	19500
J7205	INJECTION, FACTOR VIII FC FUSION PROTEIN (RECOMBINANT), PER IU	9750
J7207	INJECTION, FACTOR VIII, (ANTIHEMOPHILIC FACTOR, RECOMBINANT), PEGYLATED, 1 I.U.	22500
J7208	INJECTION, FACTOR VIII, (ANTIHEMOPHILIC FACTOR, RECOMBINANT), PEGYLATED-AUCL, (JIVI), 1 I.U.	18000
J7209	INJECTION, FACTOR VIII, (ANTIHEMOPHILIC FACTOR, RECOMBINANT), (NUWIQ), 1 I.U.	7500
J7210	INJECTION, FACTOR VIII, (ANTIHEMOPHILIC FACTOR, RECOMBINANT), (AFSTYLA), 1 I.U.	22000
J7211	INJECTION, FACTOR VIII, (ANTIHEMOPHILIC FACTOR, RECOMBINANT), (KOVALTRY), 1 I.U.	22000
J7212	FACTOR VIIA (ANTIHEMOPHILIC FACTOR, RECOMBINANT)-JNCW (SEVENFACT), 1 MICROGRAM	90000
J7296	LEVONORGESTREL-RELEASING INTRAUTERINE CONTRACEPTIVE SYSTEM, (KYLEENA), 19.5 MG	1
J7297	LEVONORGESTREL-RELEASING INTRAUTERINE CONTRACEPTIVE SYSTEM (LILETTA), 52 MG	1
J7298	LEVONORGESTREL-RELEASING INTRAUTERINE CONTRACEPTIVE SYSTEM (MIRENA), 52 MG	1
J7300	INTRAUTERINE COPPER CONTRACEPTIVE	1
J7301	LEVONORGESTREL-RELEASING INTRAUTERINE CONTRACEPTIVE SYSTEM (SKYLA), 13.5 MG	1
J7303	CONTRACEPTIVE SUPPLY, HORMONE CONTAINING VAGINAL RING, EACH	13
J7304	CONTRACEPTIVE SUPPLY, HORMONE CONTAINING PATCH, EACH	39

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LEVONORGESTREL (CONTRACEPTIVE) IMPLANT SYSTEM, INCLUDING IMPLANTS AND SUPPLIES	1
ETONOGESTREL (CONTRACEPTIVE) IMPLANT SYSTEM, INCLUDING IMPLANT AND SUPPLIES	1
AMINOLEVULINIC ACID HCL FOR TOPICAL ADMINISTRATION, 20%, SINGLE UNIT DOSAGE FORM (354 MG)	3
METHYL AMINOLEVULINATE (MAL) FOR TOPICAL ADMINISTRATION, 16.8%, 1 GRAM	1
INJECTION, FLUOCINOLONE ACETONIDE, INTRAVITREAL IMPLANT (RETISERT), 0.01 MG	118
INJECTION, DEXAMETHASONE, INTRAVITREAL IMPLANT, 0.1 MG	14
INJECTION, FLUOCINOLONE ACETONIDE, INTRAVITREAL IMPLANT (ILUVIEN), 0.01 MG	38
MITOMYCIN, OPHTHALMIC, 0.2 MG	2
INJECTION, OCRIPLASMIN, 0.125 MG	3
HYALURONAN OR DERIVATIVE, DUROLANE, FOR INTRA-ARTICULAR INJECTION, 1 MG	120
HYALURONAN OR DERIVITIVE, GENVISC 850, FOR INTRA-ARTICULAR INJECTION, 1 MG	50
Hyaluronan or derivative, hyalgan, supartz or visco-3, for intra-articular injection, per dose	2
HYALURONAN OR DERIVATIVE, HYMOVIS, FOR INTRA-ARTICULAR INJECTION, 1 MG	48
HYALURONAN OR DERIVATIVE, EUFLEXXA, FOR INTRA-ARTICULAR INJECTION, PER DOSE	2
HYALURONAN OR DERIVATIVE, ORTHOVISC, FOR INTRA-ARTICULAR INJECTION, PER DOSE	2
HYALURONAN OR DERIVATIVE, SYNVISC OR SYNVISC-ONE, FOR INTRA-ARTICULAR INJECTION, 1 MG	96
HYALURONAN OR DERIVATIVE, GEL-ONE, FOR INTRA-ARTICULAR INJECTION, PER DOSE	2
HYALURONAN OR DERIVATIVE, MONOVISC, FOR INTRA-ARTICULAR INJECTION, PER DOSE	2
HYALURONAN OR DERIVATIVE, GELSYN-3, FOR INTRA-ARTICULAR INJECTION, 0.1 MG	336
HYALURONAN OR DERIVATIVE, TRIVISC, FOR INTRA-ARTICULAR INJECTION, 1 MG	50
AUTOLOGOUS CULTURED CHONDROCYTES, IMPLANT	1
CAPSAICIN 8% PATCH, PER SQUARE CENTIMETER	1120
CARBIDOPA 5 MG/LEVODOPA 20 MG ENTERAL SUSPENSION, 100 ML	56
INSTILLATION, CIPROFLOXACIN OTIC SUSPENSION, 6 MG	10
AMINOLEVULINIC ACID HCL FOR TOPICAL ADMINISTRATION, 10% GEL, 10 MG	100
	ETONOGESTREL (CONTRACEPTIVE) IMPLANT SYSTEM, INCLUDING IMPLANT AND SUPPLIES AMINOLEVULINIC ACID HCL FOR TOPICAL ADMINISTRATION, 20%, SINGLE UNIT DOSAGE FORM (354 MG) METHYL AMINOLEVULINATE (MAL) FOR TOPICAL ADMINISTRATION, 16.8%, 1 GRAM INJECTION, FLUOCINOLONE ACETONIDE, INTRAVITREAL IMPLANT (RETISERT), 0.01 MG INJECTION, DEXAMETHASONE, INTRAVITREAL IMPLANT, 0.1 MG INJECTION, PLUOCINOLONE ACETONIDE, INTRAVITREAL IMPLANT (ILUVIEN), 0.01 MG MITOMYCIN, OPHTHALMIC, 0.2 MG INJECTION, OCRIPLASMIN, 0.125 MG HYALURONAN OR DERIVATIVE, DUROLANE, FOR INTRA-ARTICULAR INJECTION, 1 MG HYALURONAN OR DERIVATIVE, GENVISC 850, FOR INTRA-ARTICULAR INJECTION, 1 MG HYALURONAN OR DERIVATIVE, HYMOVIS, FOR INTRA-ARTICULAR INJECTION, 1 MG HYALURONAN OR DERIVATIVE, EUFLEXXA, FOR INTRA-ARTICULAR INJECTION, PER DOSE HYALURONAN OR DERIVATIVE, ORTHOVISC, FOR INTRA-ARTICULAR INJECTION, PER DOSE HYALURONAN OR DERIVATIVE, SYNVISC OR SYNVISC-ONE, FOR INTRA-ARTICULAR INJECTION, PER DOSE HYALURONAN OR DERIVATIVE, SYNVISC OR SYNVISC-ONE, FOR INTRA-ARTICULAR INJECTION, PER DOSE HYALURONAN OR DERIVATIVE, GEL-ONE, FOR INTRA-ARTICULAR INJECTION, PER DOSE HYALURONAN OR DERIVATIVE, MONOVISC, FOR INTRA-ARTICULAR INJECTION, PER DOSE HYALURONAN OR DERIVATIVE, MONOVISC, FOR INTRA-ARTICULAR INJECTION, PER DOSE HYALURONAN OR DERIVATIVE, FIVISC, FOR INTRA-ARTICULAR INJECTION, O.1 MG HYALURONAN OR DERIVATIVE, FIVISC, FOR INTRA-ARTICULAR INJECTION, 1 MG HYALURONAN OR DERIVATIVE, FIVISC, FOR INTRA-ARTICULAR INJECTION, 1 MG HYALURONAN OR DERIVATIVE, TRIVISC, FOR INTRA-ARTICULAR INJECTION, 1 MG HYALURONAN OR DERIVATIVE, TRIVISC, FOR INTRA-ARTICULAR INJECTION, 1 MG HYALURONAN OR DERIVATIVE, TRIVISC, FOR INTRA-ARTICULAR INJECTION, 1 MG HYALURONAN OR DERIVATIVE, TRIVISC, FOR INTRA-ARTICULAR INJECTION, 1 MG HYALURONAN OR DERIVATIVE, TRIVISC, FOR INTRA-ARTICULAR INJECTION, 1 MG HYALURONAN OR DERIVATIVE, TRIVISC, FOR INTRA-ARTICULAR INJECTION, 1 MG HYALURONAN OR DERIVATIVE, TRIVISC, FOR INTRA-ARTICULAR INJECTION, 1 MG

J7351	INJECTION, BIMATOPROST, INTRACAMERAL IMPLANT, 1 MICROGRAM	20
J7352	AFAMELANOTIDE IMPLANT, 1 MG	16
J7402	Mometasone furoate sinus implant, (sinuva), 10 micrograms	270
J7500	AZATHIOPRINE, ORAL, 50 MG	450
J7501	AZATHIOPRINE, PARENTERAL, 100 MG	8
J7502	CYCLOSPORINE, ORAL, 100 MG	240
J7503	TACROLIMUS, EXTENDED RELEASE, (ENVARSUS XR), ORAL, 0.25 MG	3600
J7504	LYMPHOCYTE IMMUNE GLOBULIN, ANTITHYMOCYTE GLOBULIN, EQUINE, PARENTERAL, 250 MG	15
J7505	MUROMONAB-CD3, PARENTERAL, 5 MG	1
J7507	TACROLIMUS, IMMEDIATE RELEASE, ORAL, 1 MG	1200
J7508	TACROLIMUS, EXTENDED RELEASE, (ASTAGRAF XL), ORAL, 0.1 MG	9000
J7509	METHYLPREDNISOLONE ORAL, PER 4 MG	360
J7510	PREDNISOLONE ORAL, PER 5 MG	240
J7511	LYMPHOCYTE IMMUNE GLOBULIN, ANTITHYMOCYTE GLOBULIN, RABBIT, PARENTERAL, 25 MG	9
J7512	PREDNISONE, IMMEDIATE RELEASE OR DELAYED RELEASE, ORAL, 1 MG	7000
J7515	CYCLOSPORINE, ORAL, 25 MG	600
J7516	CYCLOSPORIN, PARENTERAL, 250 MG	4
J7517	MYCOPHENOLATE MOFETIL, ORAL, 250 MG	480
J7518	MYCOPHENOLIC ACID, ORAL, 180 MG	360
J7520	SIROLIMUS, ORAL, 1 MG	600
J7525	TACROLIMUS, PARENTERAL, 5 MG	2
J7527	EVEROLIMUS, ORAL, 0.25 MG	960
J7599	IMMUNOSUPPRESSIVE DRUG, NOT OTHERWISE CLASSIFIED	1
J7605	ARFORMOTEROL, INHALATION SOLUTION, FDA APPROVED FINAL PRODUCT, NON-COMPOUNDED, ADMINISTERED THROUGH DME, UNIT DOSE FORM, 15 MICROGRAMS	62
J7606	FORMOTEROL FUMARATE, INHALATION SOLUTION, FDA APPROVED FINAL PRODUCT, NON-COMPOUNDED, ADMINISTERED THROUGH DME, UNIT DOSE FORM, 20 MICROGRAMS	62
J7608	ACETYLCYSTEINE, INHALATION SOLUTION, FDA-APPROVED FINAL PRODUCT, NON-COMPOUNDED, ADMINISTERED THROUGH DME, UNIT DOSE FORM, PER GRAM	74
J7611	ALBUTEROL, INHALATION SOLUTION, FDA-APPROVED FINAL PRODUCT, NON-COMPOUNDED, ADMINISTERED THROUGH DME, CONCENTRATED FORM, 1 MG	465
J7612	LEVALBUTEROL, INHALATION SOLUTION, FDA-APPROVED FINAL PRODUCT, NON-COMPOUNDED, ADMINISTERED THROUGH DME, CONCENTRATED FORM, 0.5 MG	300

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J7613	ALBUTEROL, INHALATION SOLUTION, FDA-APPROVED FINAL PRODUCT, NON-COMPOUNDED, ADMINISTERED THROUGH DME, UNIT DOSE, 1 MG	465
J7614	LEVALBUTEROL, INHALATION SOLUTION, FDA-APPROVED FINAL PRODUCT, NON-COMPOUNDED, ADMINISTERED THROUGH DME, UNIT DOSE, 0.5 MG	300
J7620	ALBUTEROL, UP TO 2.5 MG AND IPRATROPIUM BROMIDE, UP TO 0.5 MG, FDA-APPROVED FINAL PRODUCT, NON-COMPOUNDED, ADMINISTERED THROUGH DME	186
J7626	BUDESONIDE, INHALATION SOLUTION, FDA-APPROVED FINAL PRODUCT, NON-COMPOUNDED, ADMINISTERED THROUGH DME, UNIT DOSE FORM, UP TO 0.5 MG	62
J7631	CROMOLYN SODIUM, INHALATION SOLUTION, FDA-APPROVED FINAL PRODUCT, NON-COMPOUNDED, ADMINISTERED THROUGH DME, UNIT DOSE FORM, PER 10 MILLIGRAMS	186
J7639	DORNASE ALFA, INHALATION SOLUTION, FDA-APPROVED FINAL PRODUCT, NON-COMPOUNDED, ADMINISTERED THROUGH DME, UNIT DOSE FORM, PER MILLIGRAM	78
J7644	IPRATROPIUM BROMIDE, INHALATION SOLUTION, FDA-APPROVED FINAL PRODUCT, NON-COMPOUNDED, ADMINISTERED THROUGH DME, UNIT DOSE FORM, PER MILLIGRAM	93
J7674	METHACHOLINE CHLORIDE ADMINISTERED AS INHALATION SOLUTION THROUGH A NEBULIZER, PER 1 MG	100
J7677	REVEFENACIN INHALATION SOLUTION, FDA-APPROVED FINAL PRODUCT, NON-COMPOUNDED, ADMINISTERED THROUGH DME, 1 MICROGRAM	175
J7682	TOBRAMYCIN, INHALATION SOLUTION, FDA-APPROVED FINAL PRODUCT, NON-COMPOUNDED, UNIT DOSE FORM, ADMINISTERED THROUGH DME, PER 300 MILLIGRAMS	56
J7686	TREPROSTINIL, INHALATION SOLUTION, FDA-APPROVED FINAL PRODUCT, NON-COMPOUNDED, ADMINISTERED THROUGH DME, UNIT DOSE FORM, 1.74 MG	28
J7799	NOC DRUGS, OTHER THAN INHALATION DRUGS, ADMINISTERED THROUGH DME	2
J7999	COMPOUNDED DRUG, NOT OTHERWISE CLASSIFIED	6
J8498	ANTIEMETIC DRUG, RECTAL/SUPPOSITORY, NOT OTHERWISE SPECIFIED	1
J8501	APREPITANT, ORAL, 5 MG	57
J8510	BUSULFAN; ORAL, 2 MG	60
J8515	CABERGOLINE, ORAL, 0.25 MG	4
J8520	CAPECITABINE, ORAL, 150 MG	300
J8521	CAPECITABINE, ORAL, 500 MG	240
J8530	CYCLOPHOSPHAMIDE; ORAL, 25 MG	180
J8540	DEXAMETHASONE, ORAL, 0.25 MG	216
J8560	ETOPOSIDE; ORAL, 50 MG	63
J8562	FLUDARABINE PHOSPHATE, ORAL, 10 MG	40
J8565	GEFITINIB, ORAL, 250 MG	1

J8597	ANTIEMETIC DRUG, ORAL, NOT OTHERWISE SPECIFIED	4
J8600	MELPHALAN; ORAL, 2 MG	128
J8610	METHOTREXATE; ORAL, 2.5 MG	20
J8650	NABILONE, ORAL, 1 MG	14
J8655	NETUPITANT 300 MG AND PALONOSETRON 0.5 MG, ORAL	1
J8670	ROLAPITANT, ORAL, 1 MG	180
J8700	TEMOZOLOMIDE, ORAL, 5 MG	500
J8705	TOPOTECAN, ORAL, 0.25 MG	35
J8999	PRESCRIPTION DRUG, ORAL, CHEMOTHERAPEUTIC, NOS	2
J9000	INJECTION, DOXORUBICIN HYDROCHLORIDE, 10 MG	20
J9015	INJECTION, ALDESLEUKIN, PER SINGLE USE VIAL	1
J9017	INJECTION, ARSENIC TRIOXIDE, 1 MG	30
J9019	INJECTION, ASPARAGINASE (ERWINAZE), 1,000 IU	60
J9022	INJECTION, ATEZOLIZUMAB, 10 MG	168
J9023	INJECTION, AVELUMAB, 10 MG	140
J9025	INJECTION, AZACITIDINE, 1 MG	300
J9027	INJECTION, CLOFARABINE, 1 MG	100
J9030	BCG LIVE INTRAVESICAL INSTILLATION, 1 MG	50
J9032	INJECTION, BELINOSTAT, 10 MG	300
J9033	INJECTION, BENDAMUSTINE HCL (TREANDA), 1 MG	300
J9034	INJECTION, BENDAMUSTINE HCL (BENDEKA), 1 MG	360
J9035	INJECTION, BEVACIZUMAB, 10 MG	180
J9036	INJECTION, BENDAMUSTINE HYDROCHLORIDE, (BELRAPZO/BENDAMUSTINE), 1 MG	360
J9037	Injection, belantamab mafodontin-blmf, 0.5 mg	800
J9039	INJECTION, BLINATUMOMAB, 1 MICROGRAM	210
J9040	INJECTION, BLEOMYCIN SULFATE, 15 UNITS	4
J9041	INJECTION, BORTEZOMIB (VELCADE), 0.1 MG	35
J9042	INJECTION, BRENTUXIMAB VEDOTIN, 1 MG	200
J9043	INJECTION, CABAZITAXEL, 1 MG	60
J9044	INJECTION, BORTEZOMIB, NOT OTHERWISE SPECIFIED, 0.1 MG	35
J9045	INJECTION, CARBOPLATIN, 50 MG	22
J9047	INJECTION, CARFILZOMIB, 1 MG	160
J9050	INJECTION, CARMUSTINE, 100 MG	6
J9055	INJECTION, CETUXIMAB, 10 MG	150

J9057	INJECTION, COPANLISIB, 1 MG	60
J9060	INJECTION, CISPLATIN, POWDER OR SOLUTION, 10 MG	24
J9065	INJECTION, CLADRIBINE, PER 1 MG	100
J9070	CYCLOPHOSPHAMIDE, 100 MG	55
J9098	INJECTION, CYTARABINE LIPOSOME, 10 MG	5
J9100	INJECTION, CYTARABINE, 100 MG	120
J9119	INJECTION, CEMIPLIMAB-RWLC, 1 MG	350
J9120	INJECTION, DACTINOMYCIN, 0.5 MG	5
J9130	DACARBAZINE, 100 MG	24
J9144	INJECTION, DARATUMUMAB, 10 MG AND HYALURONIDASE-FIHJ	180
J9145	INJECTION, DARATUMUMAB, 10 MG	240
J9150	INJECTION, DAUNORUBICIN, 10 MG	12
J9151	INJECTION, DAUNORUBICIN CITRATE, LIPOSOMAL FORMULATION, 10 MG	12
J9153	INJECTION, LIPOSOMAL, 1 MG DAUNORUBICIN AND 2.27 MG CYTARABINE	132
J9155	INJECTION, DEGARELIX, 1 MG	240
J9160	INJECTION, DENILEUKIN DIFTITOX, 300 MICROGRAMS	7
J9171	INJECTION, DOCETAXEL, 1 MG	240
J9173	INJECTION, DURVALUMAB, 10 MG	150
J9175	INJECTION, ELLIOTTS' B SOLUTION, 1 ML	10
J9176	INJECTION, ELOTUZUMAB, 1 MG	3000
J9177	INJECTION, ENFORTUMAB VEDOTIN-EJFV, 0.25 MG	520
J9178	INJECTION, EPIRUBICIN HCL, 2 MG	150
J9179	INJECTION, ERIBULIN MESYLATE, 0.1 MG	50
J9181	INJECTION, ETOPOSIDE, 10 MG	100
J9185	INJECTION, FLUDARABINE PHOSPHATE, 50 MG	2
J9190	INJECTION, FLUOROURACIL, 500 MG	20
J9198	INJECTION, GEMCITABINE HYDROCHLORIDE, (INFUGEM), 100 MG	38
J9200	INJECTION, FLOXURIDINE, 500 MG	20
J9201	INJECTION, GEMCITABINE HYDROCHLORIDE, NOT OTHERWISE SPECIFIED, 200 MG	20
J9202	GOSERELIN ACETATE IMPLANT, PER 3.6 MG	3
J9203	INJECTION, GEMTUZUMAB OZOGAMICIN, 0.1 MG	180
J9204	INJECTION, MOGAMULIZUMAB-KPKC, 1 MG	160
J9205	INJECTION, IRINOTECAN LIPOSOME, 1 MG	215
J9206	INJECTION, IRINOTECAN, 20 MG	42

J9207	INJECTION, IXABEPILONE, 1 MG	90
J9208	INJECTION, IFOSFAMIDE, 1 GRAM	15
J9209	INJECTION, MESNA, 200 MG	55
J9211	INJECTION, IDARUBICIN HYDROCHLORIDE, 5 MG	6
J9213	INJECTION, INTERFERON, ALFA-2A, RECOMBINANT, 3 MILLION UNITS	12
J9214	INJECTION, INTERFERON, ALFA-2B, RECOMBINANT, 1 MILLION UNITS	100
J9216	INJECTION, INTERFERON, GAMMA 1-B, 3 MILLION UNITS	2
J9217	LEUPROLIDE ACETATE (FOR DEPOT SUSPENSION), 7.5 MG	6
J9218	LEUPROLIDE ACETATE, PER 1 MG	1
J9219	LEUPROLIDE ACETATE IMPLANT, 65 MG	1
J9223	INJECTION, LURBINECTEDIN, 0.1 MG	120
J9225	HISTRELIN IMPLANT (VANTAS), 50 MG	1
J9226	HISTRELIN IMPLANT (SUPPRELIN LA), 50 MG	1
J9227	INJECTION, ISATUXIMAB-IRFC, 10 MG	150
J9228	INJECTION, IPILIMUMAB, 1 MG	1100
J9229	INJECTION, INOTUZUMAB OZOGAMICIN, 0.1 MG	27
J9230	INJECTION, MECHLORETHAMINE HYDROCHLORIDE, (NITROGEN MUSTARD), 10 MG	5
J9245	INJECTION, MELPHALAN HYDROCHLORIDE, NOT OTHERWISE SPECIFIED, 50 MG	11
J9246	INJECTION, MELPHALAN (EVOMELA), 1 MG	300
J9250	METHOTREXATE SODIUM, 5 MG	50
J9260	METHOTREXATE SODIUM, 50 MG	750
J9261	INJECTION, NELARABINE, 50 MG	80
J9262	INJECTION, OMACETAXINE MEPESUCCINATE, 0.01 MG	700
J9263	INJECTION, OXALIPLATIN, 0.5 MG	700
J9264	INJECTION, PACLITAXEL PROTEIN-BOUND PARTICLES, 1 MG	600
J9266	INJECTION, PEGASPARGASE, PER SINGLE DOSE VIAL	2
J9267	INJECTION, PACLITAXEL, 1 MG	750
J9268	INJECTION, PENTOSTATIN, 10 MG	1
J9269	INJECTION, TAGRAXOFUSP-ERZS, 10 MICROGRAMS	200
J9271	INJECTION, PEMBROLIZUMAB, 1 MG	400
J9280	INJECTION, MITOMYCIN, 5 MG	12
J9281	MITOMYCIN PYELOCALYCEAL INSTILLATION, 1 MG	80
J9285	INJECTION, OLARATUMAB, 10 MG	200
J9293	INJECTION, MITOXANTRONE HYDROCHLORIDE, PER 5 MG	8

J9295	INJECTION, NECITUMUMAB, 1 MG	800
J9299	INJECTION, NIVOLUMAB, 1 MG	480
J9301	INJECTION, OBINUTUZUMAB, 10 MG	100
J9302	INJECTION, OFATUMUMAB, 10 MG	200
J9303	INJECTION, PANITUMUMAB, 10 MG	90
J9304	INJECTION, PEMETREXED (PEMFEXY), 10 MG	150
J9305	INJECTION, PEMETREXED, NOT OTHERWISE SPECIFIED, 10 MG	150
J9306	INJECTION, PERTUZUMAB, 1 MG	840
J9307	INJECTION, PRALATREXATE, 1 MG	80
J9308	INJECTION, RAMUCIRUMAB, 5 MG	280
J9311	INJECTION, RITUXIMAB 10 MG AND HYALURONIDASE	160
J9312	INJECTION, RITUXIMAB, 10 MG	150
J9313	INJECTION, MOXETUMOMAB PASUDOTOX-TDFK, 0.01 MG	600
J9315	INJECTION, ROMIDEPSIN, 1 MG	40
J9316	INJECTION, PERTUZUMAB, TRASTUZUMAB, AND HYALURONIDASE-ZZXF, PER 10 MG	120
J9317	INJECTION, SACITUZUMAB GOVITECAN-HZIY, 2.5 MG	648
J9320	INJECTION, STREPTOZOCIN, 1 GRAM	4
J9325	INJECTION, TALIMOGENE LAHERPAREPVEC, PER 1 MILLION PLAQUE FORMING UNITS	400
J9328	INJECTION, TEMOZOLOMIDE, 1 MG	400
J9330	INJECTION, TEMSIROLIMUS, 1 MG	50
J9340	INJECTION, THIOTEPA, 15 MG	4
J9348	Injection, naxitamab-gqgk, 1 mg	160
J9349	Injection, tafasitamab-cxix, 2 mg	900
J9351	INJECTION, TOPOTECAN, 0.1 MG	120
J9352	INJECTION, TRABECTEDIN, 0.1 MG	40
J9353	Injection, margetuximab-cmkb, 5 mg	450
J9354	INJECTION, ADO-TRASTUZUMAB EMTANSINE, 1 MG	600
J9355	INJECTION, TRASTUZUMAB, EXCLUDES BIOSIMILAR, 10 MG	105
J9356	INJECTION, TRASTUZUMAB, 10 MG AND HYALURONIDASE-OYSK	60
J9357	INJECTION, VALRUBICIN, INTRAVESICAL, 200 MG	4
J9358	INJECTION, FAM-TRASTUZUMAB DERUXTECAN-NXKI, 1 MG	900
J9360	INJECTION, VINBLASTINE SULFATE, 1 MG	45
J9370	VINCRISTINE SULFATE, 1 MG	4

J9371	INJECTION, VINCRISTINE SULFATE LIPOSOME, 1 MG	5
J9390	INJECTION, VINORELBINE TARTRATE, 10 MG	36
J9395	INJECTION, FULVESTRANT, 25 MG	20
J9400	INJECTION, ZIV-AFLIBERCEPT, 1 MG	500
J9600	INJECTION, PORFIMER SODIUM, 75 MG	4
K0001	STANDARD WHEELCHAIR	1
K0002	STANDARD HEMI (LOW SEAT) WHEELCHAIR	1
K0003	LIGHTWEIGHT WHEELCHAIR	1
K0004	HIGH STRENGTH, LIGHTWEIGHT WHEELCHAIR	1
K0005	ULTRALIGHTWEIGHT WHEELCHAIR	1
K0006	HEAVY DUTY WHEELCHAIR	1
K0007	EXTRA HEAVY DUTY WHEELCHAIR	1
K0008	CUSTOM MANUAL WHEELCHAIR/BASE	1
K0009	OTHER MANUAL WHEELCHAIR/BASE	1
K0010	STANDARD - WEIGHT FRAME MOTORIZED/POWER WHEELCHAIR	1
K0011	STANDARD - WEIGHT FRAME MOTORIZED/POWER WHEELCHAIR WITH PROGRAMMABLE CONTROL PARAMETERS FOR SPEED ADJUSTMENT, TREMOR DAMPENING, ACCELERATION CONTROL AND BRAKING	1
K0012	LIGHTWEIGHT PORTABLE MOTORIZED/POWER WHEELCHAIR	1
K0013	CUSTOM MOTORIZED/POWER WHEELCHAIR BASE	1
K0014	OTHER MOTORIZED/POWER WHEELCHAIR BASE	1
K0015	DETACHABLE, NON-ADJUSTABLE HEIGHT ARMREST, REPLACEMENT ONLY, EACH	2
K0017	DETACHABLE, ADJUSTABLE HEIGHT ARMREST, BASE, REPLACEMENT ONLY, EACH	2
К0018	DETACHABLE, ADJUSTABLE HEIGHT ARMREST, UPPER PORTION, REPLACEMENT ONLY, EACH	2
K0019	ARM PAD, REPLACEMENT ONLY, EACH	2
К0020	FIXED, ADJUSTABLE HEIGHT ARMREST, PAIR	1
К0037	HIGH MOUNT FLIP-UP FOOTREST, EACH	2
К0038	LEG STRAP, EACH	2
К0039	LEG STRAP, H STYLE, EACH	2
K0040	ADJUSTABLE ANGLE FOOTPLATE, EACH	2
K0041	LARGE SIZE FOOTPLATE, EACH	2
K0042	STANDARD SIZE FOOTPLATE, REPLACEMENT ONLY, EACH	2
K0043	FOOTREST, LOWER EXTENSION TUBE, REPLACEMENT ONLY, EACH	2
K0044	FOOTREST, UPPER HANGER BRACKET, REPLACEMENT ONLY, EACH	2

K0045	FOOTREST, COMPLETE ASSEMBLY, REPLACEMENT ONLY, EACH	2
K0046	ELEVATING LEGREST, LOWER EXTENSION TUBE, REPLACEMENT ONLY, EACH	2
K0047	ELEVATING LEGREST, UPPER HANGER BRACKET, REPLACEMENT ONLY, EACH	2
K0050	RATCHET ASSEMBLY, REPLACEMENT ONLY	2
K0051	CAM RELEASE ASSEMBLY, FOOTREST OR LEGREST, REPLACEMENT ONLY, EACH	2
K0052	SWINGAWAY, DETACHABLE FOOTRESTS, REPLACEMENT ONLY, EACH	2
K0053	ELEVATING FOOTRESTS, ARTICULATING (TELESCOPING), EACH	2
K0056	SEAT HEIGHT LESS THAN 17 OR EQUAL TO OR GREATER THAN 21 FOR A HIGH STRENGTH, LIGHTWEIGHT, OR ULTRALIGHTWEIGHT WHEELCHAIR	1
K0065	SPOKE PROTECTORS, EACH	2
K0069	REAR WHEEL ASSEMBLY, COMPLETE, WITH SOLID TIRE, SPOKES OR MOLDED, REPLACEMENT ONLY, EACH	2
K0070	REAR WHEEL ASSEMBLY, COMPLETE, WITH PNEUMATIC TIRE, SPOKES OR MOLDED, REPLACEMENT ONLY, EACH	2
K0071	FRONT CASTER ASSEMBLY, COMPLETE, WITH PNEUMATIC TIRE, REPLACEMENT ONLY, EACH	2
K0072	FRONT CASTER ASSEMBLY, COMPLETE, WITH SEMI-PNEUMATIC TIRE, REPLACEMENT ONLY, EACH	2
K0073	CASTER PIN LOCK, EACH	2
K0077	FRONT CASTER ASSEMBLY, COMPLETE, WITH SOLID TIRE, REPLACEMENT ONLY, EACH	2
коо98	DRIVE BELT FOR POWER WHEELCHAIR, REPLACEMENT ONLY	1
K0105	IV HANGER, EACH	1
K0108	WHEELCHAIR COMPONENT OR ACCESSORY, NOT OTHERWISE SPECIFIED	1
K0195	ELEVATING LEG RESTS, PAIR (FOR USE WITH CAPPED RENTAL WHEELCHAIR BASE)	1
K0455	INFUSION PUMP USED FOR UNINTERRUPTED PARENTERAL ADMINISTRATION OF MEDICATION, (E.G., EPOPROSTENOL OR TREPROSTINOL)	1
K0462	TEMPORARY REPLACEMENT FOR PATIENT OWNED EQUIPMENT BEING REPAIRED, ANY TYPE	1
K0552	SUPPLIES FOR EXTERNAL NON-INSULIN DRUG INFUSION PUMP, SYRINGE TYPE CARTRIDGE, STERILE, EACH	9999
K0553	SUPPLY ALLOWANCE FOR THERAPEUTIC CONTINUOUS GLUCOSE MONITOR (CGM), INCLUDES ALL SUPPLIES AND ACCESSORIES, 1 MONTH SUPPLY = 1 UNIT OF SERVICE	1
K0554	RECEIVER (MONITOR), DEDICATED, FOR USE WITH THERAPEUTIC GLUCOSE CONTINUOUS MONITOR SYSTEM	1
K0601	REPLACEMENT BATTERY FOR EXTERNAL INFUSION PUMP OWNED BY PATIENT, SILVER OXIDE, 1.5 VOLT, EACH	9999
К0602	REPLACEMENT BATTERY FOR EXTERNAL INFUSION PUMP OWNED BY PATIENT, SILVER OXIDE, 3 VOLT, EACH	9999

K0604	REPLACEMENT BATTERY FOR EXTERNAL INFUSION PUMP OWNED BY PATIENT, LITHIUM, 3.6 VOLT, EACH	9999
K0605	REPLACEMENT BATTERY FOR EXTERNAL INFUSION PUMP OWNED BY PATIENT, LITHIUM, 4.5 VOLT, EACH	30
К0607	REPLACEMENT BATTERY FOR AUTOMATED EXTERNAL DEFIBRILLATOR, GARMENT TYPE ONLY, EACH	1
К0608	REPLACEMENT GARMENT FOR USE WITH AUTOMATED EXTERNAL DEFIBRILLATOR, EACH	1
К0609	REPLACEMENT ELECTRODES FOR USE WITH AUTOMATED EXTERNAL DEFIBRILLATOR, GARMENT TYPE ONLY, EACH	1
К0669	WHEELCHAIR ACCESSORY, WHEELCHAIR SEAT OR BACK CUSHION, DOES NOT MEET SPECIFIC CODE CRITERIA OR NO WRITTEN CODING VERIFICATION FROM DME PDAC	2
K0672	ADDITION TO LOWER EXTREMITY ORTHOSIS, REMOVABLE SOFT INTERFACE, ALL COMPONENTS, REPLACEMENT ONLY, EACH	2
К0730	CONTROLLED DOSE INHALATION DRUG DELIVERY SYSTEM	1
К0733	POWER WHEELCHAIR ACCESSORY, 12 TO 24 AMP HOUR SEALED LEAD ACID BATTERY, EACH (E.G., GEL CELL, ABSORBED GLASSMAT)	2
К0738	PORTABLE GASEOUS OXYGEN SYSTEM, RENTAL; HOME COMPRESSOR USED TO FILL PORTABLE OXYGEN CYLINDERS; INCLUDES PORTABLE CONTAINERS, REGULATOR, FLOWMETER, HUMIDIFIER, CANNULA OR MASK, AND TUBING	1
К0739	REPAIR OR NONROUTINE SERVICE FOR DURABLE MEDICAL EQUIPMENT OTHER THAN OXYGEN EQUIPMENT REQUIRING THE SKILL OF A TECHNICIAN, LABOR COMPONENT, PER 15 MINUTES	32
K0743	SUCTION PUMP, HOME MODEL, PORTABLE, FOR USE ON WOUNDS	1
К0800	POWER OPERATED VEHICLE, GROUP 1 STANDARD, PATIENT WEIGHT CAPACITY UP TO AND INCLUDING 300 POUNDS	1
K0801	POWER OPERATED VEHICLE, GROUP 1 HEAVY DUTY, PATIENT WEIGHT CAPACITY 301 TO 450 POUNDS	1
К0802	POWER OPERATED VEHICLE, GROUP 1 VERY HEAVY DUTY, PATIENT WEIGHT CAPACITY 451 TO 600 POUNDS	1
К0806	POWER OPERATED VEHICLE, GROUP 2 STANDARD, PATIENT WEIGHT CAPACITY UP TO AND INCLUDING 300 POUNDS	1
K0807	POWER OPERATED VEHICLE, GROUP 2 HEAVY DUTY, PATIENT WEIGHT CAPACITY 301 TO 450 POUNDS	1
K0808	POWER OPERATED VEHICLE, GROUP 2 VERY HEAVY DUTY, PATIENT WEIGHT CAPACITY 451 TO 600 POUNDS	1
K0812	POWER OPERATED VEHICLE, NOT OTHERWISE CLASSIFIED	1
К0813	POWER WHEELCHAIR, GROUP 1 STANDARD, PORTABLE, SLING/SOLID SEAT AND BACK, PATIENT WEIGHT CAPACITY UP TO AND INCLUDING 300 POUNDS	1
K0814	POWER WHEELCHAIR, GROUP 1 STANDARD, PORTABLE, CAPTAINS CHAIR, PATIENT WEIGHT CAPACITY UP TO AND INCLUDING 300 POUNDS	1

К0815	POWER WHEELCHAIR, GROUP 1 STANDARD, SLING/SOLID SEAT AND BACK, PATIENT WEIGHT CAPACITY UP TO AND INCLUDING 300 POUNDS	1
К0816	POWER WHEELCHAIR, GROUP 1 STANDARD, CAPTAINS CHAIR, PATIENT WEIGHT CAPACITY UP TO AND INCLUDING 300 POUNDS	1
K0820	POWER WHEELCHAIR, GROUP 2 STANDARD, PORTABLE, SLING/SOLID SEAT/BACK, PATIENT WEIGHT CAPACITY UP TO AND INCLUDING 300 POUNDS	1
K0821	POWER WHEELCHAIR, GROUP 2 STANDARD, PORTABLE, CAPTAINS CHAIR, PATIENT WEIGHT CAPACITY UP TO AND INCLUDING 300 POUNDS	1
K0822	POWER WHEELCHAIR, GROUP 2 STANDARD, SLING/SOLID SEAT/BACK, PATIENT WEIGHT CAPACITY UP TO AND INCLUDING 300 POUNDS	1
K0823	POWER WHEELCHAIR, GROUP 2 STANDARD, CAPTAINS CHAIR, PATIENT WEIGHT CAPACITY UP TO AND INCLUDING 300 POUNDS	1
K0824	POWER WHEELCHAIR, GROUP 2 HEAVY DUTY, SLING/SOLID SEAT/BACK, PATIENT WEIGHT CAPACITY 301 TO 450 POUNDS	1
K0825	POWER WHEELCHAIR, GROUP 2 HEAVY DUTY, CAPTAINS CHAIR, PATIENT WEIGHT CAPACITY 301 TO 450 POUNDS	1
K0826	POWER WHEELCHAIR, GROUP 2 VERY HEAVY DUTY, SLING/SOLID SEAT/BACK, PATIENT WEIGHT CAPACITY 451 TO 600 POUNDS	1
К0827	POWER WHEELCHAIR, GROUP 2 VERY HEAVY DUTY, CAPTAINS CHAIR, PATIENT WEIGHT CAPACITY 451 TO 600 POUNDS	1
K0828	POWER WHEELCHAIR, GROUP 2 EXTRA HEAVY DUTY, SLING/SOLID SEAT/BACK, PATIENT WEIGHT CAPACITY 601 POUNDS OR MORE	1
K0829	POWER WHEELCHAIR, GROUP 2 EXTRA HEAVY DUTY, CAPTAINS CHAIR, PATIENT WEIGHT 601 POUNDS OR MORE	1
К0830	POWER WHEELCHAIR, GROUP 2 STANDARD, SEAT ELEVATOR, SLING/SOLID SEAT/BACK, PATIENT WEIGHT CAPACITY UP TO AND INCLUDING 300 POUNDS	1
K0831	POWER WHEELCHAIR, GROUP 2 STANDARD, SEAT ELEVATOR, CAPTAINS CHAIR, PATIENT WEIGHT CAPACITY UP TO AND INCLUDING 300 POUNDS	1
К0835	POWER WHEELCHAIR, GROUP 2 STANDARD, SINGLE POWER OPTION, SLING/SOLID SEAT/BACK, PATIENT WEIGHT CAPACITY UP TO AND INCLUDING 300 POUNDS	1
К0836	POWER WHEELCHAIR, GROUP 2 STANDARD, SINGLE POWER OPTION, CAPTAINS CHAIR, PATIENT WEIGHT CAPACITY UP TO AND INCLUDING 300 POUNDS	1
К0837	POWER WHEELCHAIR, GROUP 2 HEAVY DUTY, SINGLE POWER OPTION, SLING/SOLID SEAT/BACK, PATIENT WEIGHT CAPACITY 301 TO 450 POUNDS	1
К0838	POWER WHEELCHAIR, GROUP 2 HEAVY DUTY, SINGLE POWER OPTION, CAPTAINS CHAIR, PATIENT WEIGHT CAPACITY 301 TO 450 POUNDS	1
К0839	POWER WHEELCHAIR, GROUP 2 VERY HEAVY DUTY, SINGLE POWER OPTION, SLING/SOLID SEAT/BACK, PATIENT WEIGHT CAPACITY 451 TO 600 POUNDS	1
K0840	POWER WHEELCHAIR, GROUP 2 EXTRA HEAVY DUTY, SINGLE POWER OPTION, SLING/SOLID SEAT/BACK, PATIENT WEIGHT CAPACITY 601 POUNDS OR MORE	1

K0841	POWER WHEELCHAIR, GROUP 2 STANDARD, MULTIPLE POWER OPTION, SLING/SOLID SEAT/BACK, PATIENT WEIGHT CAPACITY UP TO AND INCLUDING 300 POUNDS	1
K0842	POWER WHEELCHAIR, GROUP 2 STANDARD, MULTIPLE POWER OPTION, CAPTAINS CHAIR, PATIENT WEIGHT CAPACITY UP TO AND INCLUDING 300 POUNDS	1
K0843	POWER WHEELCHAIR, GROUP 2 HEAVY DUTY, MULTIPLE POWER OPTION, SLING/SOLID SEAT/BACK, PATIENT WEIGHT CAPACITY 301 TO 450 POUNDS	1
K0848	POWER WHEELCHAIR, GROUP 3 STANDARD, SLING/SOLID SEAT/BACK, PATIENT WEIGHT CAPACITY UP TO AND INCLUDING 300 POUNDS	1
К0849	POWER WHEELCHAIR, GROUP 3 STANDARD, CAPTAINS CHAIR, PATIENT WEIGHT CAPACITY UP TO AND INCLUDING 300 POUNDS	1
К0850	POWER WHEELCHAIR, GROUP 3 HEAVY DUTY, SLING/SOLID SEAT/BACK, PATIENT WEIGHT CAPACITY 301 TO 450 POUNDS	1
K0851	POWER WHEELCHAIR, GROUP 3 HEAVY DUTY, CAPTAINS CHAIR, PATIENT WEIGHT CAPACITY 301 TO 450 POUNDS	1
K0852	POWER WHEELCHAIR, GROUP 3 VERY HEAVY DUTY, SLING/SOLID SEAT/BACK, PATIENT WEIGHT CAPACITY 451 TO 600 POUNDS	1
K0853	POWER WHEELCHAIR, GROUP 3 VERY HEAVY DUTY, CAPTAINS CHAIR, PATIENT WEIGHT CAPACITY 451 TO 600 POUNDS	1
K0854	POWER WHEELCHAIR, GROUP 3 EXTRA HEAVY DUTY, SLING/SOLID SEAT/BACK, PATIENT WEIGHT CAPACITY 601 POUNDS OR MORE	1
K0855	POWER WHEELCHAIR, GROUP 3 EXTRA HEAVY DUTY, CAPTAINS CHAIR, PATIENT WEIGHT CAPACITY 601 POUNDS OR MORE	1
K0856	POWER WHEELCHAIR, GROUP 3 STANDARD, SINGLE POWER OPTION, SLING/SOLID SEAT/BACK, PATIENT WEIGHT CAPACITY UP TO AND INCLUDING 300 POUNDS	1
K0857	POWER WHEELCHAIR, GROUP 3 STANDARD, SINGLE POWER OPTION, CAPTAINS CHAIR, PATIENT WEIGHT CAPACITY UP TO AND INCLUDING 300 POUNDS	1
K0858	POWER WHEELCHAIR, GROUP 3 HEAVY DUTY, SINGLE POWER OPTION, SLING/SOLID SEAT/BACK, PATIENT WEIGHT 301 TO 450 POUNDS	1
К0859	POWER WHEELCHAIR, GROUP 3 HEAVY DUTY, SINGLE POWER OPTION, CAPTAINS CHAIR, PATIENT WEIGHT CAPACITY 301 TO 450 POUNDS	1
К0860	POWER WHEELCHAIR, GROUP 3 VERY HEAVY DUTY, SINGLE POWER OPTION, SLING/SOLID SEAT/BACK, PATIENT WEIGHT CAPACITY 451 TO 600 POUNDS	1
К0861	POWER WHEELCHAIR, GROUP 3 STANDARD, MULTIPLE POWER OPTION, SLING/SOLID SEAT/BACK, PATIENT WEIGHT CAPACITY UP TO AND INCLUDING 300 POUNDS	1
K0862	POWER WHEELCHAIR, GROUP 3 HEAVY DUTY, MULTIPLE POWER OPTION, SLING/SOLID SEAT/BACK, PATIENT WEIGHT CAPACITY 301 TO 450 POUNDS	1
К0863	POWER WHEELCHAIR, GROUP 3 VERY HEAVY DUTY, MULTIPLE POWER OPTION, SLING/SOLID SEAT/BACK, PATIENT WEIGHT CAPACITY 451 TO 600 POUNDS	1
K0864	POWER WHEELCHAIR, GROUP 3 EXTRA HEAVY DUTY, MULTIPLE POWER OPTION, SLING/SOLID SEAT/BACK, PATIENT WEIGHT CAPACITY 601 POUNDS OR MORE	1

К0868	POWER WHEELCHAIR, GROUP 4 STANDARD, SLING/SOLID SEAT/BACK, PATIENT WEIGHT CAPACITY UP TO AND INCLUDING 300 POUNDS	1
К0869	POWER WHEELCHAIR, GROUP 4 STANDARD, CAPTAINS CHAIR, PATIENT WEIGHT CAPACITY UP TO AND INCLUDING 300 POUNDS	1
К0870	POWER WHEELCHAIR, GROUP 4 HEAVY DUTY, SLING/SOLID SEAT/BACK, PATIENT WEIGHT CAPACITY 301 TO 450 POUNDS	1
K0871	POWER WHEELCHAIR, GROUP 4 VERY HEAVY DUTY, SLING/SOLID SEAT/BACK, PATIENT WEIGHT CAPACITY 451 TO 600 POUNDS	1
К0877	POWER WHEELCHAIR, GROUP 4 STANDARD, SINGLE POWER OPTION, SLING/SOLID SEAT/BACK, PATIENT WEIGHT CAPACITY UP TO AND INCLUDING 300 POUNDS	1
К0878	POWER WHEELCHAIR, GROUP 4 STANDARD, SINGLE POWER OPTION, CAPTAINS CHAIR, PATIENT WEIGHT CAPACITY UP TO AND INCLUDING 300 POUNDS	1
К0879	POWER WHEELCHAIR, GROUP 4 HEAVY DUTY, SINGLE POWER OPTION, SLING/SOLID SEAT/BACK, PATIENT WEIGHT CAPACITY 301 TO 450 POUNDS	1
К0880	POWER WHEELCHAIR, GROUP 4 VERY HEAVY DUTY, SINGLE POWER OPTION, SLING/SOLID SEAT/BACK, PATIENT WEIGHT 451 TO 600 POUNDS	1
К0884	POWER WHEELCHAIR, GROUP 4 STANDARD, MULTIPLE POWER OPTION, SLING/SOLID SEAT/BACK, PATIENT WEIGHT CAPACITY UP TO AND INCLUDING 300 POUNDS	1
K0885	POWER WHEELCHAIR, GROUP 4 STANDARD, MULTIPLE POWER OPTION, CAPTAINS CHAIR, PATIENT WEIGHT CAPACITY UP TO AND INCLUDING 300 POUNDS	1
К0886	POWER WHEELCHAIR, GROUP 4 HEAVY DUTY, MULTIPLE POWER OPTION, SLING/SOLID SEAT/BACK, PATIENT WEIGHT CAPACITY 301 TO 450 POUNDS	1
К0890	POWER WHEELCHAIR, GROUP 5 PEDIATRIC, SINGLE POWER OPTION, SLING/SOLID SEAT/BACK, PATIENT WEIGHT CAPACITY UP TO AND INCLUDING 125 POUNDS	1
К0891	POWER WHEELCHAIR, GROUP 5 PEDIATRIC, MULTIPLE POWER OPTION, SLING/SOLID SEAT/BACK, PATIENT WEIGHT CAPACITY UP TO AND INCLUDING 125 POUNDS	1
К0898	POWER WHEELCHAIR, NOT OTHERWISE CLASSIFIED	1
К0899	POWER MOBILITY DEVICE, NOT CODED BY DME PDAC OR DOES NOT MEET CRITERIA	1
К0900	CUSTOMIZED DURABLE MEDICAL EQUIPMENT, OTHER THAN WHEELCHAIR	1
K1001	ELECTRONIC POSITIONAL OBSTRUCTIVE SLEEP APNEA TREATMENT, WITH SENSOR, INCLUDES ALL COMPONENTS AND ACCESSORIES, ANY TYPE	1
K1002	CRANIAL ELECTROTHERAPY STIMULATION (CES) SYSTEM, INCLUDES ALL SUPPLIES AND ACCESSORIES, ANY TYPE	1
K1003	WHIRLPOOL TUB, WALK-IN, PORTABLE	1
K1004	LOW FREQUENCY ULTRASONIC DIATHERMY TREATMENT DEVICE FOR HOME USE, INCLUDES ALL COMPONENTS AND ACCESSORIES	1
K1005	DISPOSABLE COLLECTION AND STORAGE BAG FOR BREAST MILK, ANY SIZE, ANY TYPE, EACH	300

K1006	SUCTION PUMP, HOME MODEL, PORTABLE OR STATIONARY, ELECTRIC, ANY TYPE, FOR USE WITH EXTERNAL URINE MANAGEMENT SYSTEM	1
К1007	BILATERAL HIP, KNEE, ANKLE, FOOT DEVICE, POWERED, INCLUDES PELVIC COMPONENT, SINGLE OR DOUBLE UPRIGHT(S), KNEE JOINTS ANY TYPE, WITH OR WITHOUT ANKLE JOINTS ANY TYPE, INCLUDES ALL COMPONENTS AND ACCESSORIES, MOTORS, MICROPROCESSORS, SENSORS	1
K1009	SPEECH VOLUME MODULATION SYSTEM, ANY TYPE, INCLUDING ALL COMPONENTS AND ACCESSORIES	1
K1013	Enema tube, with or without adapter, any type, replacement only, each	1
K1014	Addition, endoskeletal knee-shin system, 4 bar linkage or multiaxial, fluid swing and stance phase control	1
K1015	Foot, adductus positioning device, adjustable	2
K1016	Transcutaneous electrical nerve stimulator for electrical stimulation of the trigeminal nerve	1
K1017	Monthly supplies for use of device coded at k1016	1
K1018	External upper limb tremor stimulator of the peripheral nerves of the wrist	1
K1019	Monthly supplies for use of device coded at k1018	1
K1020	Non-invasive vagus nerve stimulator	1
L0112	CRANIAL CERVICAL ORTHOSIS, CONGENITAL TORTICOLLIS TYPE, WITH OR WITHOUT SOFT INTERFACE MATERIAL, ADJUSTABLE RANGE OF MOTION JOINT, CUSTOM FABRICATED	1
L0113	CRANIAL CERVICAL ORTHOSIS, TORTICOLLIS TYPE, WITH OR WITHOUT JOINT, WITH OR WITHOUT SOFT INTERFACE MATERIAL, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	1
L0120	CERVICAL, FLEXIBLE, NON-ADJUSTABLE, PREFABRICATED, OFF-THE-SHELF (FOAM COLLAR)	2
L0130	CERVICAL, FLEXIBLE, THERMOPLASTIC COLLAR, MOLDED TO PATIENT	1
L0140	CERVICAL, SEMI-RIGID, ADJUSTABLE (PLASTIC COLLAR)	1
L0150	CERVICAL, SEMI-RIGID, ADJUSTABLE MOLDED CHIN CUP (PLASTIC COLLAR WITH MANDIBULAR/OCCIPITAL PIECE)	1
L0160	CERVICAL, SEMI-RIGID, WIRE FRAME OCCIPITAL/MANDIBULAR SUPPORT, PREFABRICATED, OFF-THE-SHELF	1
L0170	CERVICAL, COLLAR, MOLDED TO PATIENT MODEL	1
L0172	CERVICAL, COLLAR, SEMI-RIGID THERMOPLASTIC FOAM, TWO-PIECE, PREFABRICATED, OFF-THE-SHELF	1
L0174	CERVICAL, COLLAR, SEMI-RIGID, THERMOPLASTIC FOAM, TWO PIECE WITH THORACIC EXTENSION, PREFABRICATED, OFF-THE-SHELF	1
L0180	CERVICAL, MULTIPLE POST COLLAR, OCCIPITAL/MANDIBULAR SUPPORTS, ADJUSTABLE	1

L0190	CERVICAL, MULTIPLE POST COLLAR, OCCIPITAL/MANDIBULAR SUPPORTS, ADJUSTABLE CERVICAL BARS (SOMI, GUILFORD, TAYLOR TYPES)	1
L0200	CERVICAL, MULTIPLE POST COLLAR, OCCIPITAL/MANDIBULAR SUPPORTS, ADJUSTABLE CERVICAL BARS, AND THORACIC EXTENSION	1
L0220	THORACIC, RIB BELT, CUSTOM FABRICATED	1
L0450	TLSO, FLEXIBLE, PROVIDES TRUNK SUPPORT, UPPER THORACIC REGION, PRODUCES INTRACAVITARY PRESSURE TO REDUCE LOAD ON THE INTERVERTEBRAL DISKS WITH RIGID STAYS OR PANEL(S), INCLUDES SHOULDER STRAPS AND CLOSURES, PREFABRICATED, OFF-THE-SHELF	1
L0452	TLSO, FLEXIBLE, PROVIDES TRUNK SUPPORT, UPPER THORACIC REGION, PRODUCES INTRACAVITARY PRESSURE TO REDUCE LOAD ON THE INTERVERTEBRAL DISKS WITH RIGID STAYS OR PANEL(S), INCLUDES SHOULDER STRAPS AND CLOSURES, CUSTOM FABRICATED	1
L0454	TLSO FLEXIBLE, PROVIDES TRUNK SUPPORT, EXTENDS FROM SACROCOCCYGEAL JUNCTION TO ABOVE T-9 VERTEBRA, RESTRICTS GROSS TRUNK MOTION IN THE SAGITTAL PLANE, PRODUCES INTRACAVITARY PRESSURE TO REDUCE LOAD ON THE INTERVERTEBRAL DISKS WITH RIGID STAYS OR PANEL(S), INCLUDES SHOULDER STRAPS AND CLOSURES, PREFABRICATED ITEM THAT HAS BEEN TRIMMED, BENT, MOLDED, ASSEMBLED, OR OTHERWISE CUSTOMIZED TO FIT A SPECIFIC PATIENT BY AN INDIVIDUAL WITH EXPERTISE	1
L0456	TLSO, FLEXIBLE, PROVIDES TRUNK SUPPORT, THORACIC REGION, RIGID POSTERIOR PANEL AND SOFT ANTERIOR APRON, EXTENDS FROM THE SACROCOCCYGEAL JUNCTION AND TERMINATES JUST INFERIOR TO THE SCAPULAR SPINE, RESTRICTS GROSS TRUNK MOTION IN THE SAGITTAL PLANE, PRODUCES INTRACAVITARY PRESSURE TO REDUCE LOAD ON THE INTERVERTEBRAL DISKS, INCLUDES STRAPS AND CLOSURES, PREFABRICATED ITEM THAT HAS BEEN TRIMMED, BENT, MOLDED, ASSEMBLED, OR OTHERWISE CUSTOMIZED TO FIT A SPECIFIC PATIENT BY AN INDIVIDUAL WITH EXPERTISE	1
L0458	TLSO, TRIPLANAR CONTROL, MODULAR SEGMENTED SPINAL SYSTEM, TWO RIGID PLASTIC SHELLS, POSTERIOR EXTENDS FROM THE SACROCOCCYGEAL JUNCTION AND TERMINATES JUST INFERIOR TO THE SCAPULAR SPINE, ANTERIOR EXTENDS FROM THE SYMPHYSIS PUBIS TO THE XIPHOID, SOFT LINER, RESTRICTS GROSS TRUNK MOTION IN THE SAGITTAL, CORONAL, AND TRANSVERSE PLANES, LATERAL STRENGTH IS PROVIDED BY OVERLAPPING PLASTIC AND STABILIZING CLOSURES, INCLUDES STRAPS AND CLOSURES, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	1
L0460	TLSO, TRIPLANAR CONTROL, MODULAR SEGMENTED SPINAL SYSTEM, TWO RIGID PLASTIC SHELLS, POSTERIOR EXTENDS FROM THE SACROCOCCYGEAL JUNCTION AND TERMINATES JUST INFERIOR TO THE SCAPULAR SPINE, ANTERIOR EXTENDS FROM THE SYMPHYSIS PUBIS TO THE STERNAL NOTCH, SOFT LINER, RESTRICTS GROSS TRUNK MOTION IN THE SAGITTAL, CORONAL, AND TRANSVERSE PLANES, LATERAL STRENGTH IS PROVIDED BY OVERLAPPING PLASTIC AND STABILIZING CLOSURES, INCLUDES STRAPS AND CLOSURES, PREFABRICATED ITEM THAT HAS BEEN TRIMMED, BENT, MOLDED, ASSEMBLED, OR OTHERWISE CUSTOMIZED TO FIT A SPECIFIC PATIENT BY AN INDIVIDUAL WITH EXPERTISE	1

TLSO, TRIPLANAR CONTROL, MODULAR SEGMENTED SPINAL SYSTEM, THREE RIGID PLASTIC SHELLS, POSTERIOR EXTENDS FROM THE SACROCOCCYGEAL JUNCTION AND TERMINATES JUST INFERIOR TO THE SCAPULAR SPINE, ANTERIOR EXTENDS FROM THE SYMPHYSIS PUBIS TO THE STERNAL NOTCH, SOFT LINER, RESTRICTS GROSS TRUNK MOTION IN THE SAGITTAL, CORONAL, AND TRANSVERSE PLANES, LATERAL STRENGTH IS PROVIDED BY OVERLAPPING PLASTIC AND STABILIZING CLOSURES, INCLUDES STRAPS AND CLOSURES, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT L0464 TLSO, TRIPLANAR CONTROL, MODULAR SEGMENTED SPINAL SYSTEM, FOUR RIGID PLASTIC SHELLS, POSTERIOR EXTENDS FROM SACROCOCCYGEAL JUNCTION AND TERMINATES JUST INFERIOR TO SCAPULAR SPINE, ANTERIOR EXTENDS FROM SYMPHYSIS PUBIS TO THE STERNAL NOTCH, SOFT LINER, RESTRICTS GROSS TRUNK MOTION IN SAGITTAL, CORONAL, AND TRANSVERSE PLANES, LATERAL STRENGTH IS PROVIDED BY OVERLAPPING PLASTIC AND STABILIZING CLOSURES, INCLUDES STRAPS AND CLOSURES, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT L0466 TLSO, SAGITTAL CONTROL, RIGID POSTERIOR FRAME AND FLEXIBLE SOFT ANTERIOR APRON WITH STRAPS, CLOSURES AND PADDING, RESTRICTS GROSS TRUNK MOTION IN SAGITTAL PLANE, PRODUCES INTRACAVITARY PRESSURE TO REDUCE LOAD ON INTERVERTEBRAL DISKS, PREFABRICATED ITEM THAT HAS BEEN TRIMMED, BENT, MOLDED, ASSEMBLED, OR OTHERWISE CUSTOMIZED TO FIT A SPECIFIC PATIENT BY AN INDIVIDUAL WITH EXPERTISE L0468 TLSO, SAGITTAL-CORONAL CONTROL, RIGID POSTERIOR FRAME AND FLEXIBLE SOFT ANTERIOR APRON WITH STRAPS, CLOSURES AND PADDING, EXTENDS FROM SACROCOCCYGEAL JUNCTION OVER SCAPULAE, LATERAL STRENGTH PROVIDED BY PEVICY, THORACIC, AND LATERAL FRAME PIECES, RESTRICTS GROSS TRUNK MOTION IN SAGITTAL, AND CORONAL PLANES, PRODUCES INTRACAVITARY PRESSURE TO REDUCE LOAD ON INTERVERTEBRAL DISKS, PREFABRICATED ITEM THAT HAS BEEN TRIMMED, BENT, MOLDED, ASSEMBLED, OR OTHERWISE CUSTOMIZED TO FIT A SPECIFIC PATIENT BY AN INDIVIDUAL WITH EXPERTISE L0470 TLSO, TRIPLANAR CONTROL, RIGID POSTERIOR FRAME AND FLEXIBLE SOFT AND FROM SACROCOCCYGEAL JUNCTION TO SCAPULA, LATERAL STRE			
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ANTERIOR APRON WITH STRAPS, CLOSURES AND PADDING, EXTENDS FROM SACROCOCCYGEAL JUNCTION OVER SCAPULAE, LATERAL STRENGTH PROVIDED BY PELVIC, THORACIC, AND LATERAL FRAME PIECES, RESTRICTS GROSS TRUNK MOTION IN SAGITTAL, AND CORONAL PLANES, PRODUCES INTRACAVITARY PRESSURE TO REDUCE LOAD ON INTERVERTEBRAL DISKS, PREFABRICATED ITEM THAT HAS BEEN TRIMMED, BENT, MOLDED, ASSEMBLED, OR OTHERWISE CUSTOMIZED TO FIT A SPECIFIC PATIENT BY AN INDIVIDUAL WITH EXPERTISE L0470 TLSO, TRIPLANAR CONTROL, RIGID POSTERIOR FRAME AND FLEXIBLE SOFT ANTERIOR APRON WITH STRAPS, CLOSURES AND PADDING, EXTENDS FROM SACROCOCCYGEAL JUNCTION TO SCAPULA, LATERAL STRENGTH PROVIDED BY PELVIC, THORACIC, AND LATERAL FRAME PIECES, ROTATIONAL STRENGTH PROVIDED BY SUBCLAVICULAR EXTENSIONS, RESTRICTS GROSS TRUNK MOTION IN SAGITTAL, CORONAL, AND TRANSVERSE PLANES, PROVIDES INTRACAVITARY PRESSURE TO REDUCE LOAD ON THE INTERVERTEBRAL DISKS, INCLUDES FITTING AND SHAPING THE FRAME, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT L0472 TLSO, TRIPLANAR CONTROL, HYPEREXTENSION, RIGID ANTERIOR AND LATERAL FRAME EXTENDS FROM SYMPHYSIS PUBIS TO STERNAL NOTCH WITH TWO ANTERIOR COMPONENTS (ONE PUBIC AND ONE STERNAL), POSTERIOR AND LATERAL PADS WITH STRAPS AND CLOSURES, LIMITS SPINAL FLEXION, RESTRICTS GROSS TRUNK MOTION IN SAGITTAL, CORONAL, AND TRANSVERSE PLANES, INCLUDES FITTING AND ADJUSTMENT	L0466	APRON WITH STRAPS, CLOSURES AND PADDING, RESTRICTS GROSS TRUNK MOTION IN SAGITTAL PLANE, PRODUCES INTRACAVITARY PRESSURE TO REDUCE LOAD ON INTERVERTEBRAL DISKS, PREFABRICATED ITEM THAT HAS BEEN TRIMMED, BENT, MOLDED, ASSEMBLED, OR OTHERWISE CUSTOMIZED TO FIT A SPECIFIC PATIENT BY	1
ANTERIOR APRON WITH STRAPS, CLOSURES AND PADDING, EXTENDS FROM SACROCOCCYGEAL JUNCTION TO SCAPULA, LATERAL STRENGTH PROVIDED BY PELVIC, THORACIC, AND LATERAL FRAME PIECES, ROTATIONAL STRENGTH PROVIDED BY SUBCLAVICULAR EXTENSIONS, RESTRICTS GROSS TRUNK MOTION IN SAGITTAL, CORONAL, AND TRANSVERSE PLANES, PROVIDES INTRACAVITARY PRESSURE TO REDUCE LOAD ON THE INTERVERTEBRAL DISKS, INCLUDES FITTING AND SHAPING THE FRAME, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT LO472 TLSO, TRIPLANAR CONTROL, HYPEREXTENSION, RIGID ANTERIOR AND LATERAL FRAME EXTENDS FROM SYMPHYSIS PUBIS TO STERNAL NOTCH WITH TWO ANTERIOR COMPONENTS (ONE PUBIC AND ONE STERNAL), POSTERIOR AND LATERAL PADS WITH STRAPS AND CLOSURES, LIMITS SPINAL FLEXION, RESTRICTS GROSS TRUNK MOTION IN SAGITTAL, CORONAL, AND TRANSVERSE PLANES, INCLUDES FITTING AND SHAPING THE FRAME, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	L0468	ANTERIOR APRON WITH STRAPS, CLOSURES AND PADDING, EXTENDS FROM SACROCOCCYGEAL JUNCTION OVER SCAPULAE, LATERAL STRENGTH PROVIDED BY PELVIC, THORACIC, AND LATERAL FRAME PIECES, RESTRICTS GROSS TRUNK MOTION IN SAGITTAL, AND CORONAL PLANES, PRODUCES INTRACAVITARY PRESSURE TO REDUCE LOAD ON INTERVERTEBRAL DISKS, PREFABRICATED ITEM THAT HAS BEEN TRIMMED, BENT, MOLDED, ASSEMBLED, OR OTHERWISE CUSTOMIZED TO FIT A	1
FRAME EXTENDS FROM SYMPHYSIS PUBIS TO STERNAL NOTCH WITH TWO ANTERIOR COMPONENTS (ONE PUBIC AND ONE STERNAL), POSTERIOR AND LATERAL PADS WITH STRAPS AND CLOSURES, LIMITS SPINAL FLEXION, RESTRICTS GROSS TRUNK MOTION IN SAGITTAL, CORONAL, AND TRANSVERSE PLANES, INCLUDES FITTING AND SHAPING THE FRAME, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	L0470	ANTERIOR APRON WITH STRAPS, CLOSURES AND PADDING, EXTENDS FROM SACROCOCCYGEAL JUNCTION TO SCAPULA, LATERAL STRENGTH PROVIDED BY PELVIC, THORACIC, AND LATERAL FRAME PIECES, ROTATIONAL STRENGTH PROVIDED BY SUBCLAVICULAR EXTENSIONS, RESTRICTS GROSS TRUNK MOTION IN SAGITTAL, CORONAL, AND TRANSVERSE PLANES, PROVIDES INTRACAVITARY PRESSURE TO REDUCE LOAD ON THE INTERVERTEBRAL DISKS, INCLUDES FITTING	1
L0474 TLSO RIGID FRAME PRE PELVIC 1	L0472	FRAME EXTENDS FROM SYMPHYSIS PUBIS TO STERNAL NOTCH WITH TWO ANTERIOR COMPONENTS (ONE PUBIC AND ONE STERNAL), POSTERIOR AND LATERAL PADS WITH STRAPS AND CLOSURES, LIMITS SPINAL FLEXION, RESTRICTS GROSS TRUNK MOTION IN SAGITTAL, CORONAL, AND TRANSVERSE PLANES, INCLUDES FITTING AND SHAPING THE FRAME, PREFABRICATED, INCLUDES FITTING	1
	L0474	TLSO RIGID FRAME PRE PELVIC	1

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TLSO, TRIPLANAR CONTROL, ONE PIECE RIGID PLASTIC SHELL WITHOUT INTERFACE LINER, WITH MULTIPLE STRAPS AND CLOSURES, POSTERIOR EXTENDS FROM SACROCOCCYGEAL JUNCTION AND TERMINATES JUST INFERIOR TO SCAPULAR SPINE, ANTERIOR EXTENDS FROM SYMPHYSIS PUBIS TO STERNAL NOTCH, ANTERIOR OR POSTERIOR OPENING, RESTRICTS GROSS TRUNK MOTION IN SAGITTAL, CORONAL, AND TRANSVERSE PLANES, INCLUDES A CARVED PLASTER OR CAD-CAM MODEL, CUSTOM FABRICATED	1
TLSO, TRIPLANAR CONTROL, ONE PIECE RIGID PLASTIC SHELL WITH INTERFACE LINER, MULTIPLE STRAPS AND CLOSURES, POSTERIOR EXTENDS FROM SACROCOCCYGEAL JUNCTION AND TERMINATES JUST INFERIOR TO SCAPULAR SPINE, ANTERIOR EXTENDS FROM SYMPHYSIS PUBIS TO STERNAL NOTCH, ANTERIOR OR POSTERIOR OPENING, RESTRICTS GROSS TRUNK MOTION IN SAGITTAL, CORONAL, AND TRANSVERSE PLANES, INCLUDES A CARVED PLASTER OR CAD-CAM MODEL, CUSTOM FABRICATED	1
TLSO, TRIPLANAR CONTROL, TWO PIECE RIGID PLASTIC SHELL WITHOUT INTERFACE LINER, WITH MULTIPLE STRAPS AND CLOSURES, POSTERIOR EXTENDS FROM SACROCOCCYGEAL JUNCTION AND TERMINATES JUST INFERIOR TO SCAPULAR SPINE, ANTERIOR EXTENDS FROM SYMPHYSIS PUBIS TO STERNAL NOTCH, LATERAL STRENGTH IS ENHANCED BY OVERLAPPING PLASTIC, RESTRICTS GROSS TRUNK MOTION IN THE SAGITTAL, CORONAL, AND TRANSVERSE PLANES, INCLUDES A CARVED PLASTER OR CAD-CAM MODEL, CUSTOM FABRICATED	1
TLSO, TRIPLANAR CONTROL, TWO PIECE RIGID PLASTIC SHELL WITH INTERFACE LINER, MULTIPLE STRAPS AND CLOSURES, POSTERIOR EXTENDS FROM SACROCOCCYGEAL JUNCTION AND TERMINATES JUST INFERIOR TO SCAPULAR SPINE, ANTERIOR EXTENDS FROM SYMPHYSIS PUBIS TO STERNAL NOTCH, LATERAL STRENGTH IS ENHANCED BY OVERLAPPING PLASTIC, RESTRICTS GROSS TRUNK MOTION IN THE SAGITTAL, CORONAL, AND TRANSVERSE PLANES, INCLUDES A CARVED PLASTER OR CAD-CAM MODEL, CUSTOM FABRICATED	1
TLSO, TRIPLANAR CONTROL, ONE PIECE RIGID PLASTIC SHELL WITH INTERFACE LINER, MULTIPLE STRAPS AND CLOSURES, POSTERIOR EXTENDS FROM SACROCOCCYGEAL JUNCTION AND TERMINATES JUST INFERIOR TO SCAPULAR SPINE, ANTERIOR EXTENDS FROM SYMPHYSIS PUBIS TO STERNAL NOTCH, ANTERIOR OR POSTERIOR OPENING, RESTRICTS GROSS TRUNK MOTION IN SAGITTAL, CORONAL, AND TRANSVERSE PLANES, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	1
TLSO, SAGITTAL-CORONAL CONTROL, ONE PIECE RIGID PLASTIC SHELL, WITH OVERLAPPING REINFORCED ANTERIOR, WITH MULTIPLE STRAPS AND CLOSURES, POSTERIOR EXTENDS FROM SACROCOCCYGEAL JUNCTION AND TERMINATES AT OR BEFORE THE T-9 VERTEBRA, ANTERIOR EXTENDS FROM SYMPHYSIS PUBIS TO XIPHOID, ANTERIOR OPENING, RESTRICTS GROSS TRUNK MOTION IN SAGITTAL AND CORONAL PLANES, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	1
TLSO, SAGITTAL-CORONAL CONTROL, MODULAR SEGMENTED SPINAL SYSTEM, TWO RIGID PLASTIC SHELLS, POSTERIOR EXTENDS FROM THE SACROCOCCYGEAL JUNCTION AND TERMINATES JUST INFERIOR TO THE SCAPULAR SPINE, ANTERIOR EXTENDS FROM THE SYMPHYSIS PUBIS TO THE XIPHOID, SOFT LINER, RESTRICTS GROSS TRUNK MOTION IN THE SAGITTAL AND CORONAL PLANES, LATERAL STRENGTH IS PROVIDED BY OVERLAPPING PLASTIC AND STABILIZING CLOSURES, INCLUDES STRAPS AND CLOSURES, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	1
	LINER, WITH MULTIPLE STRAPS AND CLOSURES, POSTERIOR EXTENDS FROM SACROCCCYGEAL JUNCTION AND TERMINATES JUST INFERIOR TO SCAPULAR SPINE, ANTERIOR EXTENDS FROM SYMPHYSIS PUBIS TO STERNAL NOTCH, ANTERIOR OR POSTERIOR OPENING, RESTRICTS GROSS TRUNK MOTION IN SAGITTAL, CORONAL, AND TRANSVERSE PLANES, INCLUDES A CARVED PLASTER OR CAD-CAM MODEL, CUSTOM FABRICATED TLSO, TRIPLANAR CONTROL, ONE PIECE RIGID PLASTIC SHELL WITH INTERFACE LINER, MULTIPLE STRAPS AND CLOSURES, POSTERIOR EXTENDS FROM SACROCOCCYGEAL JUNCTION AND TERMINATES JUST INFERIOR TO SCAPULAR SPINE, ANTERIOR EXTENDS FROM SYMPHYSIS PUBIS TO STERNAL NOTCH, ANTERIOR OR POSTERIOR OPENING, RESTRICTS GROSS TRUNK MOTION IN SAGITTAL, CORONAL, AND TRANSVERSE PLANES, INCLUDES A CARVED PLASTER OR CAD-CAM MODEL, CUSTOM FABRICATED TLSO, TRIPLANAR CONTROL, TWO PIECE RIGID PLASTIC SHELL WITHOUT INTERFACE LINER, WITH MULTIPLE STRAPS AND CLOSURES, POSTERIOR EXTENDS FROM SACROCOCCYGEAL JUNCTION AND TERMINATES JUST INFERIOR TO SCAPULAR SPINE, ANTERIOR EXTENDS FROM SYMPHYSIS PUBIS TO STERNAL NOTCH, LATERAL STRENGTH IS ENHANCED BY OVERLAPPING PLASTIC, RESTRICTS GROSS TRUNK MOTION IN THE SAGITTAL, CORONAL, AND TRANSVERSE PLANES, INCLUDES A CARVED PLASTER OR CARVED PLASTER OR CAD-CAM MODEL, CUSTOM FABRICATED TLSO, TRIPLANAR CONTROL, TWO PIECE RIGID PLASTIC SHELL WITH INTERFACE LINER, MULTIPLE STRAPS AND CLOSURES, POSTERIOR EXTENDS, INCLUDES A CARVED PLASTER OR CAD-CAM MODEL, CUSTOM FABRICATED TLSO, TRIPLANAR CONTROL, TWO PIECE RIGID PLASTIC SHELL WITH INTERFACE LINER, MULTIPLE STRAPS AND CLOSURES, POSTERIOR EXTENDS FROM SACROCOCCYGEAL JUNCTION AND TERMINATES JUST INFERIOR TO SCAPULAR SPINE, ANTERIOR EXTENDS FROM SYMPHYSIS PUBIS TO STERNAL NOTCH, LATERAL STRENGTH IS ENHANCED BY OVERLAPPING PLASTIC SHELL WITH INTERFACE LINER, MULTIPLE STRAPS AND CLOSURES, POSTERIOR EXTENDS FROM SACROCOCCYGEAL JUNCTION AND TERMINATES JUST INFERIOR TO SCAPULAR SPINE, ANTERIOR EXTENDS FROM SYMPHYSIS PUBIS TO STERNAL NOTCH, AND TERMINATES ATO RESIDER TO STERNAL NOTCH, AND TERMINATES STENDS FROM SA

L0492	TLSO, SAGITTAL-CORONAL CONTROL, MODULAR SEGMENTED SPINAL SYSTEM, THREE RIGID PLASTIC SHELLS, POSTERIOR EXTENDS FROM THE SACROCOCCYGEAL JUNCTION AND TERMINATES JUST INFERIOR TO THE SCAPULAR SPINE, ANTERIOR EXTENDS FROM THE SYMPHYSIS PUBIS TO THE XIPHOID, SOFT LINER, RESTRICTS GROSS TRUNK MOTION IN THE SAGITTAL AND CORONAL PLANES, LATERAL STRENGTH IS PROVIDED BY OVERLAPPING PLASTIC AND STABILIZING CLOSURES, INCLUDES STRAPS AND CLOSURES, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	1
L0621	SACROILIAC ORTHOSIS, FLEXIBLE, PROVIDES PELVIC-SACRAL SUPPORT, REDUCES MOTION ABOUT THE SACROILIAC JOINT, INCLUDES STRAPS, CLOSURES, MAY INCLUDE PENDULOUS ABDOMEN DESIGN, PREFABRICATED, OFF-THE-SHELF	1
L0622	SACROILIAC ORTHOSIS, FLEXIBLE, PROVIDES PELVIC-SACRAL SUPPORT, REDUCES MOTION ABOUT THE SACROILIAC JOINT, INCLUDES STRAPS, CLOSURES, MAY INCLUDE PENDULOUS ABDOMEN DESIGN, CUSTOM FABRICATED	1
L0623	SACROILIAC ORTHOSIS, PROVIDES PELVIC-SACRAL SUPPORT, WITH RIGID OR SEMI- RIGID PANELS OVER THE SACRUM AND ABDOMEN, REDUCES MOTION ABOUT THE SACROILIAC JOINT, INCLUDES STRAPS, CLOSURES, MAY INCLUDE PENDULOUS ABDOMEN DESIGN, PREFABRICATED, OFF-THE-SHELF	1
L0624	SACROILIAC ORTHOSIS, PROVIDES PELVIC-SACRAL SUPPORT, WITH RIGID OR SEMI- RIGID PANELS PLACED OVER THE SACRUM AND ABDOMEN, REDUCES MOTION ABOUT THE SACROILIAC JOINT, INCLUDES STRAPS, CLOSURES, MAY INCLUDE PENDULOUS ABDOMEN DESIGN, CUSTOM FABRICATED	1
L0625	LUMBAR ORTHOSIS, FLEXIBLE, PROVIDES LUMBAR SUPPORT, POSTERIOR EXTENDS FROM L-1 TO BELOW L-5 VERTEBRA, PRODUCES INTRACAVITARY PRESSURE TO REDUCE LOAD ON THE INTERVERTEBRAL DISCS, INCLUDES STRAPS, CLOSURES, MAY INCLUDE PENDULOUS ABDOMEN DESIGN, SHOULDER STRAPS, STAYS, PREFABRICATED, OFF-THE-SHELF	1
L0626	LUMBAR ORTHOSIS, SAGITTAL CONTROL, WITH RIGID POSTERIOR PANEL(S), POSTERIOR EXTENDS FROM L-1 TO BELOW L-5 VERTEBRA, PRODUCES INTRACAVITARY PRESSURE TO REDUCE LOAD ON THE INTERVERTEBRAL DISCS, INCLUDES STRAPS, CLOSURES, MAY INCLUDE PADDING, STAYS, SHOULDER STRAPS, PENDULOUS ABDOMEN DESIGN, PREFABRICATED ITEM THAT HAS BEEN TRIMMED, BENT, MOLDED, ASSEMBLED, OR OTHERWISE CUSTOMIZED TO FIT A SPECIFIC PATIENT BY AN INDIVIDUAL WITH EXPERTISE	1
L0627	LUMBAR ORTHOSIS, SAGITTAL CONTROL, WITH RIGID ANTERIOR AND POSTERIOR PANELS, POSTERIOR EXTENDS FROM L-1 TO BELOW L-5 VERTEBRA, PRODUCES INTRACAVITARY PRESSURE TO REDUCE LOAD ON THE INTERVERTEBRAL DISCS, INCLUDES STRAPS, CLOSURES, MAY INCLUDE PADDING, SHOULDER STRAPS, PENDULOUS ABDOMEN DESIGN, PREFABRICATED ITEM THAT HAS BEEN TRIMMED, BENT, MOLDED, ASSEMBLED, OR OTHERWISE CUSTOMIZED TO FIT A SPECIFIC PATIENT BY AN INDIVIDUAL WITH EXPERTISE	1
L0628	LUMBAR-SACRAL ORTHOSIS, FLEXIBLE, PROVIDES LUMBO-SACRAL SUPPORT, POSTERIOR EXTENDS FROM SACROCOCCYGEAL JUNCTION TO T-9 VERTEBRA, PRODUCES INTRACAVITARY PRESSURE TO REDUCE LOAD ON THE INTERVERTEBRAL DISCS, INCLUDES STRAPS, CLOSURES, MAY INCLUDE STAYS, SHOULDER STRAPS, PENDULOUS ABDOMEN DESIGN, PREFABRICATED, OFF-THE-SHELF	1

L0629	LUMBAR-SACRAL ORTHOSIS, FLEXIBLE, PROVIDES LUMBO-SACRAL SUPPORT, POSTERIOR EXTENDS FROM SACROCOCCYGEAL JUNCTION TO T-9 VERTEBRA, PRODUCES INTRACAVITARY PRESSURE TO REDUCE LOAD ON THE INTERVERTEBRAL DISCS, INCLUDES STRAPS, CLOSURES, MAY INCLUDE STAYS, SHOULDER STRAPS, PENDULOUS ABDOMEN DESIGN, CUSTOM FABRICATED	1
L0630	LUMBAR-SACRAL ORTHOSIS, SAGITTAL CONTROL, WITH RIGID POSTERIOR PANEL(S), POSTERIOR EXTENDS FROM SACROCOCCYGEAL JUNCTION TO T-9 VERTEBRA, PRODUCES INTRACAVITARY PRESSURE TO REDUCE LOAD ON THE INTERVERTEBRAL DISCS, INCLUDES STRAPS, CLOSURES, MAY INCLUDE PADDING, STAYS, SHOULDER STRAPS, PENDULOUS ABDOMEN DESIGN, PREFABRICATED ITEM THAT HAS BEEN TRIMMED, BENT, MOLDED, ASSEMBLED, OR OTHERWISE CUSTOMIZED TO FIT A SPECIFIC PATIENT BY AN INDIVIDUAL WITH EXPERTISE	1
L0631	LUMBAR-SACRAL ORTHOSIS, SAGITTAL CONTROL, WITH RIGID ANTERIOR AND POSTERIOR PANELS, POSTERIOR EXTENDS FROM SACROCOCCYGEAL JUNCTION TO T-9 VERTEBRA, PRODUCES INTRACAVITARY PRESSURE TO REDUCE LOAD ON THE INTERVERTEBRAL DISCS, INCLUDES STRAPS, CLOSURES, MAY INCLUDE PADDING, SHOULDER STRAPS, PENDULOUS ABDOMEN DESIGN, PREFABRICATED ITEM THAT HAS BEEN TRIMMED, BENT, MOLDED, ASSEMBLED, OR OTHERWISE CUSTOMIZED TO FIT A SPECIFIC PATIENT BY AN INDIVIDUAL WITH EXPERTISE	1
L0632	LUMBAR-SACRAL ORTHOSIS, SAGITTAL CONTROL, WITH RIGID ANTERIOR AND POSTERIOR PANELS, POSTERIOR EXTENDS FROM SACROCOCCYGEAL JUNCTION TO T-9 VERTEBRA, PRODUCES INTRACAVITARY PRESSURE TO REDUCE LOAD ON THE INTERVERTEBRAL DISCS, INCLUDES STRAPS, CLOSURES, MAY INCLUDE PADDING, SHOULDER STRAPS, PENDULOUS ABDOMEN DESIGN, CUSTOM FABRICATED	1
L0633	LUMBAR-SACRAL ORTHOSIS, SAGITTAL-CORONAL CONTROL, WITH RIGID POSTERIOR FRAME/PANEL(S), POSTERIOR EXTENDS FROM SACROCOCCYGEAL JUNCTION TO T-9 VERTEBRA, LATERAL STRENGTH PROVIDED BY RIGID LATERAL FRAME/PANELS, PRODUCES INTRACAVITARY PRESSURE TO REDUCE LOAD ON INTERVERTEBRAL DISCS, INCLUDES STRAPS, CLOSURES, MAY INCLUDE PADDING, STAYS, SHOULDER STRAPS, PENDULOUS ABDOMEN DESIGN, PREFABRICATED ITEM THAT HAS BEEN TRIMMED, BENT, MOLDED, ASSEMBLED, OR OTHERWISE CUSTOMIZED TO FIT A SPECIFIC PATIENT BY AN INDIVIDUAL WITH EXPERTISE	1
L0634	LUMBAR-SACRAL ORTHOSIS, SAGITTAL-CORONAL CONTROL, WITH RIGID POSTERIOR FRAME/PANEL(S), POSTERIOR EXTENDS FROM SACROCOCCYGEAL JUNCTION TO T-9 VERTEBRA, LATERAL STRENGTH PROVIDED BY RIGID LATERAL FRAME/PANEL(S), PRODUCES INTRACAVITARY PRESSURE TO REDUCE LOAD ON INTERVERTEBRAL DISCS, INCLUDES STRAPS, CLOSURES, MAY INCLUDE PADDING, STAYS, SHOULDER STRAPS, PENDULOUS ABDOMEN DESIGN, CUSTOM FABRICATED	1
L0635	LUMBAR-SACRAL ORTHOSIS, SAGITTAL-CORONAL CONTROL, LUMBAR FLEXION, RIGID POSTERIOR FRAME/PANEL(S), LATERAL ARTICULATING DESIGN TO FLEX THE LUMBAR SPINE, POSTERIOR EXTENDS FROM SACROCOCCYGEAL JUNCTION TO T-9 VERTEBRA, LATERAL STRENGTH PROVIDED BY RIGID LATERAL FRAME/PANEL(S), PRODUCES INTRACAVITARY PRESSURE TO REDUCE LOAD ON INTERVERTEBRAL DISCS, INCLUDES STRAPS, CLOSURES, MAY INCLUDE PADDING, ANTERIOR PANEL, PENDULOUS ABDOMEN DESIGN, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	1

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L0636	LUMBAR SACRAL ORTHOSIS, SAGITTAL-CORONAL CONTROL, LUMBAR FLEXION, RIGID POSTERIOR FRAME/PANELS, LATERAL ARTICULATING DESIGN TO FLEX THE LUMBAR SPINE, POSTERIOR EXTENDS FROM SACROCOCCYGEAL JUNCTION TO T-9 VERTEBRA, LATERAL STRENGTH PROVIDED BY RIGID LATERAL FRAME/PANELS, PRODUCES INTRACAVITARY PRESSURE TO REDUCE LOAD ON INTERVERTEBRAL DISCS, INCLUDES STRAPS, CLOSURES, MAY INCLUDE PADDING, ANTERIOR PANEL, PENDULOUS ABDOMEN DESIGN, CUSTOM FABRICATED	1
L0637	LUMBAR-SACRAL ORTHOSIS, SAGITTAL-CORONAL CONTROL, WITH RIGID ANTERIOR AND POSTERIOR FRAME/PANELS, POSTERIOR EXTENDS FROM SACROCOCCYGEAL JUNCTION TO T-9 VERTEBRA, LATERAL STRENGTH PROVIDED BY RIGID LATERAL FRAME/PANELS, PRODUCES INTRACAVITARY PRESSURE TO REDUCE LOAD ON INTERVERTEBRAL DISCS, INCLUDES STRAPS, CLOSURES, MAY INCLUDE PADDING, SHOULDER STRAPS, PENDULOUS ABDOMEN DESIGN, PREFABRICATED ITEM THAT HAS BEEN TRIMMED, BENT, MOLDED, ASSEMBLED, OR OTHERWISE CUSTOMIZED TO FIT A SPECIFIC PATIENT BY AN INDIVIDUAL WITH EXPERTISE	1
L0638	LUMBAR-SACRAL ORTHOSIS, SAGITTAL-CORONAL CONTROL, WITH RIGID ANTERIOR AND POSTERIOR FRAME/PANELS, POSTERIOR EXTENDS FROM SACROCOCCYGEAL JUNCTION TO T-9 VERTEBRA, LATERAL STRENGTH PROVIDED BY RIGID LATERAL FRAME/PANELS, PRODUCES INTRACAVITARY PRESSURE TO REDUCE LOAD ON INTERVERTEBRAL DISCS, INCLUDES STRAPS, CLOSURES, MAY INCLUDE PADDING, SHOULDER STRAPS, PENDULOUS ABDOMEN DESIGN, CUSTOM FABRICATED	1
L0639	LUMBAR-SACRAL ORTHOSIS, SAGITTAL-CORONAL CONTROL, RIGID SHELL(S)/PANEL(S), POSTERIOR EXTENDS FROM SACROCOCCYGEAL JUNCTION TO T-9 VERTEBRA, ANTERIOR EXTENDS FROM SYMPHYSIS PUBIS TO XYPHOID, PRODUCES INTRACAVITARY PRESSURE TO REDUCE LOAD ON THE INTERVERTEBRAL DISCS, OVERALL STRENGTH IS PROVIDED BY OVERLAPPING RIGID MATERIAL AND STABILIZING CLOSURES, INCLUDES STRAPS, CLOSURES, MAY INCLUDE SOFT INTERFACE, PENDULOUS ABDOMEN DESIGN, PREFABRICATED ITEM THAT HAS BEEN TRIMMED, BENT, MOLDED, ASSEMBLED, OR OTHERWISE CUSTOMIZED TO FIT A SPECIFIC PATIENT BY AN INDIVIDUAL WITH EXPERTISE	1
L0640	LUMBAR-SACRAL ORTHOSIS, SAGITTAL-CORONAL CONTROL, RIGID SHELL(S)/PANEL(S), POSTERIOR EXTENDS FROM SACROCOCCYGEAL JUNCTION TO T-9 VERTEBRA, ANTERIOR EXTENDS FROM SYMPHYSIS PUBIS TO XYPHOID, PRODUCES INTRACAVITARY PRESSURE TO REDUCE LOAD ON THE INTERVERTEBRAL DISCS, OVERALL STRENGTH IS PROVIDED BY OVERLAPPING RIGID MATERIAL AND STABILIZING CLOSURES, INCLUDES STRAPS, CLOSURES, MAY INCLUDE SOFT INTERFACE, PENDULOUS ABDOMEN DESIGN, CUSTOM FABRICATED	1
L0700	CERVICAL-THORACIC-LUMBAR-SACRAL-ORTHOSES (CTLSO), ANTERIOR-POSTERIOR-LATERAL CONTROL, MOLDED TO PATIENT MODEL, (MINERVA TYPE)	1
L0710	CTLSO, ANTERIOR-POSTERIOR-LATERAL-CONTROL, MOLDED TO PATIENT MODEL, WITH INTERFACE MATERIAL, (MINERVA TYPE)	1
L0810	HALO PROCEDURE, CERVICAL HALO INCORPORATED INTO JACKET VEST	1
L0820	HALO PROCEDURE, CERVICAL HALO INCORPORATED INTO PLASTER BODY JACKET	1
L0830	HALO PROCEDURE, CERVICAL HALO INCORPORATED INTO MILWAUKEE TYPE ORTHOSIS	1
L0859	ADDITION TO HALO PROCEDURE, MAGNETIC RESONANCE IMAGE COMPATIBLE SYSTEMS, RINGS AND PINS, ANY MATERIAL	1

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L0861	ADDITION TO HALO PROCEDURE, REPLACEMENT LINER/INTERFACE MATERIAL	1
L0970	TLSO, CORSET FRONT	1
L0972	LSO, CORSET FRONT	1
L0974	TLSO, FULL CORSET	1
L0976	LSO, FULL CORSET	1
L0978	AXILLARY CRUTCH EXTENSION	1
L0980	PERONEAL STRAPS, PREFABRICATED, OFF-THE-SHELF, PAIR	1
L0982	STOCKING SUPPORTER GRIPS, PREFABRICATED, OFF-THE-SHELF, SET OF FOUR (4)	1
L0999	ADDITION TO SPINAL ORTHOSIS, NOT OTHERWISE SPECIFIED	1
L1000	CERVICAL-THORACIC-LUMBAR-SACRAL ORTHOSIS (CTLSO) (MILWAUKEE), INCLUSIVE OF FURNISHING INITIAL ORTHOSIS, INCLUDING MODEL	1
L1001	CERVICAL THORACIC LUMBAR SACRAL ORTHOSIS, IMMOBILIZER, INFANT SIZE, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	1
L1005	TENSION BASED SCOLIOSIS ORTHOSIS AND ACCESSORY PADS, INCLUDES FITTING AND ADJUSTMENT	1
L1010	ADDITION TO CERVICAL-THORACIC-LUMBAR-SACRAL ORTHOSIS (CTLSO) OR SCOLIOSIS ORTHOSIS, AXILLA SLING	1
L1020	ADDITION TO CTLSO OR SCOLIOSIS ORTHOSIS, KYPHOSIS PAD	1
L1025	ADDITION TO CTLSO OR SCOLIOSIS ORTHOSIS, KYPHOSIS PAD, FLOATING	1
L1030	ADDITION TO CTLSO OR SCOLIOSIS ORTHOSIS, LUMBAR BOLSTER PAD	1
L1040	ADDITION TO CTLSO OR SCOLIOSIS ORTHOSIS, LUMBAR OR LUMBAR RIB PAD	1
L1050	ADDITION TO CTLSO OR SCOLIOSIS ORTHOSIS, STERNAL PAD	1
L1060	ADDITION TO CTLSO OR SCOLIOSIS ORTHOSIS, THORACIC PAD	2
L1070	ADDITION TO CTLSO OR SCOLIOSIS ORTHOSIS, TRAPEZIUS SLING	1
L1080	ADDITION TO CTLSO OR SCOLIOSIS ORTHOSIS, OUTRIGGER	1
L1085	ADDITION TO CTLSO OR SCOLIOSIS ORTHOSIS, OUTRIGGER, BILATERAL WITH VERTICAL EXTENSIONS	1
L1090	ADDITION TO CTLSO OR SCOLIOSIS ORTHOSIS, LUMBAR SLING	1
L1100	ADDITION TO CTLSO OR SCOLIOSIS ORTHOSIS, RING FLANGE, PLASTIC OR LEATHER	1
L1110	ADDITION TO CTLSO OR SCOLIOSIS ORTHOSIS, RING FLANGE, PLASTIC OR LEATHER, MOLDED TO PATIENT MODEL	1
L1120	ADDITION TO CTLSO, SCOLIOSIS ORTHOSIS, COVER FOR UPRIGHT, EACH	2
L1200	THORACIC-LUMBAR-SACRAL-ORTHOSIS (TLSO), INCLUSIVE OF FURNISHING INITIAL ORTHOSIS ONLY	1
L1210	ADDITION TO TLSO, (LOW PROFILE), LATERAL THORACIC EXTENSION	1
L1220	ADDITION TO TLSO, (LOW PROFILE), ANTERIOR THORACIC EXTENSION	1
L1230	ADDITION TO TLSO, (LOW PROFILE), MILWAUKEE TYPE SUPERSTRUCTURE	1

L1240	ADDITION TO TLSO, (LOW PROFILE), LUMBAR DEROTATION PAD	1
L1250	ADDITION TO TLSO, (LOW PROFILE), ANTERIOR ASIS PAD	1
L1260	ADDITION TO TLSO, (LOW PROFILE), ANTERIOR THORACIC DEROTATION PAD	1
L1270	ADDITION TO TLSO, (LOW PROFILE), ABDOMINAL PAD	1
L1270	ADDITION TO TLSO, (LOW PROFILE), RIB GUSSET (ELASTIC), EACH	2
L1290	ADDITION TO TLSO, (LOW PROFILE), LATERAL TROCHANTERIC PAD	1
L1300	OTHER SCOLIOSIS PROCEDURE, BODY JACKET MOLDED TO PATIENT MODEL	1
L1310	OTHER SCOLIOSIS PROCEDURE, POST-OPERATIVE BODY JACKET	1
L1499	SPINAL ORTHOSIS, NOT OTHERWISE SPECIFIED	1
L1600	HIP ORTHOSIS, ABDUCTION CONTROL OF HIP JOINTS, FLEXIBLE, FREJKA TYPE WITH COVER, PREFABRICATED ITEM THAT HAS BEEN TRIMMED, BENT, MOLDED, ASSEMBLED, OR OTHERWISE CUSTOMIZED TO FIT A SPECIFIC PATIENT BY AN INIDIVIDUAL WITH EXPERTISE	1
L1610	HIP ORTHOSIS, ABDUCTION CONTROL OF HIP JOINTS, FLEXIBLE, (FREJKA COVER ONLY), PREFABRICATED ITEM THAT HAS BEEN TRIMMED, BENT, MOLDED, ASSEMBLED, OR OTHERWISE CUSTOMIZED TO FIT A SPECIFIC PATIENT BY AN INDIVIDUAL WITH EXPERTISE	1
L1620	HIP ORTHOSIS, ABDUCTION CONTROL OF HIP JOINTS, FLEXIBLE, (PAVLIK HARNESS), PREFABRICATED ITEM THAT HAS BEEN TRIMMED, BENT, MOLDED, ASSEMBLED, OR OTHERWISE CUSTOMIZED TO FIT A SPECIFIC PATIENT BY AN INDIVIDUAL WITH EXPERTISE	1
L1630	HIP ORTHOSIS, ABDUCTION CONTROL OF HIP JOINTS, SEMI-FLEXIBLE (VON ROSEN TYPE), CUSTOM FABRICATED	1
L1640	HIP ORTHOSIS, ABDUCTION CONTROL OF HIP JOINTS, STATIC, PELVIC BAND OR SPREADER BAR, THIGH CUFFS, CUSTOM FABRICATED	1
L1650	HIP ORTHOSIS, ABDUCTION CONTROL OF HIP JOINTS, STATIC, ADJUSTABLE, (ILFLED TYPE), PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	1
L1652	HIP ORTHOSIS, BILATERAL THIGH CUFFS WITH ADJUSTABLE ABDUCTOR SPREADER BAR, ADULT SIZE, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT, ANY TYPE	1
L1660	HIP ORTHOSIS, ABDUCTION CONTROL OF HIP JOINTS, STATIC, PLASTIC, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	1
L1680	HIP ORTHOSIS, ABDUCTION CONTROL OF HIP JOINTS, DYNAMIC, PELVIC CONTROL, ADJUSTABLE HIP MOTION CONTROL, THIGH CUFFS (RANCHO HIP ACTION TYPE), CUSTOM FABRICATED	1
L1685	HIP ORTHOSIS, ABDUCTION CONTROL OF HIP JOINT, POSTOPERATIVE HIP ABDUCTION TYPE, CUSTOM FABRICATED	1
L1686	HIP ORTHOSIS, ABDUCTION CONTROL OF HIP JOINT, POSTOPERATIVE HIP ABDUCTION TYPE, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	1
L1690	COMBINATION, BILATERAL, LUMBO-SACRAL, HIP, FEMUR ORTHOSIS PROVIDING ADDUCTION AND INTERNAL ROTATION CONTROL, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	1

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L1700	LEGG PERTHES ORTHOSIS, (TORONTO TYPE), CUSTOM FABRICATED	1
L1710	LEGG PERTHES ORTHOSIS, (NEWINGTON TYPE), CUSTOM FABRICATED	1
L1720	LEGG PERTHES ORTHOSIS, TRILATERAL, (TACHDIJAN TYPE), CUSTOM FABRICATED	1
L1730	LEGG PERTHES ORTHOSIS, (SCOTTISH RITE TYPE), CUSTOM FABRICATED	1
L1755	LEGG PERTHES ORTHOSIS, (PATTEN BOTTOM TYPE), CUSTOM FABRICATED	1
L1810	KNEE ORTHOSIS, ELASTIC WITH JOINTS, PREFABRICATED ITEM THAT HAS BEEN TRIMMED, BENT, MOLDED, ASSEMBLED, OR OTHERWISE CUSTOMIZED TO FIT A SPECIFIC PATIENT BY AN INDIVIDUAL WITH EXPERTISE	2
L1820	KNEE ORTHOSIS, ELASTIC WITH CONDYLAR PADS AND JOINTS, WITH OR WITHOUT PATELLAR CONTROL, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	2
L1830	KNEE ORTHOSIS, IMMOBILIZER, CANVAS LONGITUDINAL, PREFABRICATED, OFF-THE-SHELF	2
L1831	KNEE ORTHOSIS, LOCKING KNEE JOINT(S), POSITIONAL ORTHOSIS, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	2
L1832	KNEE ORTHOSIS, ADJUSTABLE KNEE JOINTS (UNICENTRIC OR POLYCENTRIC), POSITIONAL ORTHOSIS, RIGID SUPPORT, PREFABRICATED ITEM THAT HAS BEEN TRIMMED, BENT, MOLDED, ASSEMBLED, OR OTHERWISE CUSTOMIZED TO FIT A SPECIFIC PATIENT BY AN INDIVIDUAL WITH EXPERTISE	2
L1834	KNEE ORTHOSIS, WITHOUT KNEE JOINT, RIGID, CUSTOM FABRICATED	2
L1836	KNEE ORTHOSIS, RIGID, WITHOUT JOINT(S), INCLUDES SOFT INTERFACE MATERIAL, PREFABRICATED, OFF-THE-SHELF	2
L1840	KNEE ORTHOSIS, DEROTATION, MEDIAL-LATERAL, ANTERIOR CRUCIATE LIGAMENT, CUSTOM FABRICATED	2
L1843	KNEE ORTHOSIS, SINGLE UPRIGHT, THIGH AND CALF, WITH ADJUSTABLE FLEXION AND EXTENSION JOINT (UNICENTRIC OR POLYCENTRIC), MEDIAL-LATERAL AND ROTATION CONTROL, WITH OR WITHOUT VARUS/VALGUS ADJUSTMENT, PREFABRICATED ITEM THAT HAS BEEN TRIMMED, BENT, MOLDED, ASSEMBLED, OR OTHERWISE CUSTOMIZED TO FIT A SPECIFIC PATIENT BY AN INDIVIDUAL WITH EXPERTISE	2
L1844	KNEE ORTHOSIS, SINGLE UPRIGHT, THIGH AND CALF, WITH ADJUSTABLE FLEXION AND EXTENSION JOINT (UNICENTRIC OR POLYCENTRIC), MEDIAL-LATERAL AND ROTATION CONTROL, WITH OR WITHOUT VARUS/VALGUS ADJUSTMENT, CUSTOM FABRICATED	2
L1845	KNEE ORTHOSIS, DOUBLE UPRIGHT, THIGH AND CALF, WITH ADJUSTABLE FLEXION AND EXTENSION JOINT (UNICENTRIC OR POLYCENTRIC), MEDIAL-LATERAL AND ROTATION CONTROL, WITH OR WITHOUT VARUS/VALGUS ADJUSTMENT, PREFABRICATED ITEM THAT HAS BEEN TRIMMED, BENT, MOLDED, ASSEMBLED, OR OTHERWISE CUSTOMIZED TO FIT A SPECIFIC PATIENT BY AN INDIVIDUAL WITH EXPERTISE	2
L1846	KNEE ORTHOSIS, DOUBLE UPRIGHT, THIGH AND CALF, WITH ADJUSTABLE FLEXION AND EXTENSION JOINT (UNICENTRIC OR POLYCENTRIC), MEDIAL-LATERAL AND ROTATION CONTROL, WITH OR WITHOUT VARUS/VALGUS ADJUSTMENT, CUSTOM FABRICATED	2

L1847	KNEE ORTHOSIS, DOUBLE UPRIGHT WITH ADJUSTABLE JOINT, WITH INFLATABLE AIR SUPPORT CHAMBER(S), PREFABRICATED ITEM THAT HAS BEEN TRIMMED, BENT, MOLDED, ASSEMBLED, OR OTHERWISE CUSTOMIZED TO FIT A SPECIFIC PATIENT BY AN INDIVIDUAL WITH EXPERTISE	2
L1850	KNEE ORTHOSIS, SWEDISH TYPE, PREFABRICATED, OFF-THE-SHELF	2
L1860	KNEE ORTHOSIS, MODIFICATION OF SUPRACONDYLAR PROSTHETIC SOCKET, CUSTOM FABRICATED (SK)	2
L1900	ANKLE FOOT ORTHOSIS, SPRING WIRE, DORSIFLEXION ASSIST CALF BAND, CUSTOM FABRICATED	2
L1902	ANKLE ORTHOSIS, ANKLE GAUNTLET OR SIMILAR, WITH OR WITHOUT JOINTS, PREFABRICATED, OFF-THE-SHELF	2
L1904	ANKLE ORTHOSIS, ANKLE GAUNTLET OR SIMILAR, WITH OR WITHOUT JOINTS, CUSTOM FABRICATED	2
L1906	ANKLE FOOT ORTHOSIS, MULTILIGAMENTOUS ANKLE SUPPORT, PREFABRICATED, OFF-THE-SHELF	2
L1907	ANKLE ORTHOSIS, SUPRAMALLEOLAR WITH STRAPS, WITH OR WITHOUT INTERFACE/PADS, CUSTOM FABRICATED	2
L1910	ANKLE FOOT ORTHOSIS, POSTERIOR, SINGLE BAR, CLASP ATTACHMENT TO SHOE COUNTER, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	2
L1920	ANKLE FOOT ORTHOSIS, SINGLE UPRIGHT WITH STATIC OR ADJUSTABLE STOP (PHELPS OR PERLSTEIN TYPE), CUSTOM FABRICATED	2
L1930	ANKLE FOOT ORTHOSIS, PLASTIC OR OTHER MATERIAL, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	2
L1932	AFO, RIGID ANTERIOR TIBIAL SECTION, TOTAL CARBON FIBER OR EQUAL MATERIAL, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	2
L1940	ANKLE FOOT ORTHOSIS, PLASTIC OR OTHER MATERIAL, CUSTOM FABRICATED	2
L1945	ANKLE FOOT ORTHOSIS, PLASTIC, RIGID ANTERIOR TIBIAL SECTION (FLOOR REACTION), CUSTOM FABRICATED	2
L1950	ANKLE FOOT ORTHOSIS, SPIRAL, (INSTITUTE OF REHABILITATIVE MEDICINE TYPE), PLASTIC, CUSTOM FABRICATED	2
L1951	ANKLE FOOT ORTHOSIS, SPIRAL, (INSTITUTE OF REHABILITATIVE MEDICINE TYPE), PLASTIC OR OTHER MATERIAL, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	2
L1960	ANKLE FOOT ORTHOSIS, POSTERIOR SOLID ANKLE, PLASTIC, CUSTOM FABRICATED	2
L1970	ANKLE FOOT ORTHOSIS, PLASTIC WITH ANKLE JOINT, CUSTOM FABRICATED	2
L1971	ANKLE FOOT ORTHOSIS, PLASTIC OR OTHER MATERIAL WITH ANKLE JOINT, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	2
L1980	ANKLE FOOT ORTHOSIS, SINGLE UPRIGHT FREE PLANTAR DORSIFLEXION, SOLID STIRRUP, CALF BAND/CUFF (SINGLE BAR 'BK' ORTHOSIS), CUSTOM FABRICATED	2
L1990	ANKLE FOOT ORTHOSIS, DOUBLE UPRIGHT FREE PLANTAR DORSIFLEXION, SOLID STIRRUP, CALF BAND/CUFF (DOUBLE BAR 'BK' ORTHOSIS), CUSTOM FABRICATED	2

L2000	KNEE ANKLE FOOT ORTHOSIS, SINGLE UPRIGHT, FREE KNEE, FREE ANKLE, SOLID STIRRUP, THIGH AND CALF BANDS/CUFFS (SINGLE BAR 'AK' ORTHOSIS), CUSTOM FABRICATED	2
L2005	KNEE ANKLE FOOT ORTHOSIS, ANY MATERIAL, SINGLE OR DOUBLE UPRIGHT, STANCE CONTROL, AUTOMATIC LOCK AND SWING PHASE RELEASE, ANY TYPE ACTIVATION, INCLUDES ANKLE JOINT, ANY TYPE, CUSTOM FABRICATED	2
L2006	KNEE ANKLE FOOT DEVICE, ANY MATERIAL, SINGLE OR DOUBLE UPRIGHT, SWING AND STANCE PHASE MICROPROCESSOR CONTROL WITH ADJUSTABILITY, INCLUDES ALL COMPONENTS (E.G., SENSORS, BATTERIES, CHARGER), ANY TYPE ACTIVATION, WITH OR WITHOUT ANKLE JOINT(S), CUSTOM FABRICATED	1
L2010	KNEE ANKLE FOOT ORTHOSIS, SINGLE UPRIGHT, FREE ANKLE, SOLID STIRRUP, THIGH AND CALF BANDS/CUFFS (SINGLE BAR 'AK' ORTHOSIS), WITHOUT KNEE JOINT, CUSTOM FABRICATED	2
L2020	KNEE ANKLE FOOT ORTHOSIS, DOUBLE UPRIGHT, FREE ANKLE, SOLID STIRRUP, THIGH AND CALF BANDS/CUFFS (DOUBLE BAR 'AK' ORTHOSIS), CUSTOM FABRICATED	2
L2030	KNEE ANKLE FOOT ORTHOSIS, DOUBLE UPRIGHT, FREE ANKLE, SOLID STIRRUP, THIGH AND CALF BANDS/CUFFS, (DOUBLE BAR 'AK' ORTHOSIS), WITHOUT KNEE JOINT, CUSTOM FABRICATED	2
L2034	KNEE ANKLE FOOT ORTHOSIS, FULL PLASTIC, SINGLE UPRIGHT, WITH OR WITHOUT FREE MOTION KNEE, MEDIAL LATERAL ROTATION CONTROL, WITH OR WITHOUT FREE MOTION ANKLE, CUSTOM FABRICATED	8
L2035	KNEE ANKLE FOOT ORTHOSIS, FULL PLASTIC, STATIC (PEDIATRIC SIZE), WITHOUT FREE MOTION ANKLE, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	2
L2036	KNEE ANKLE FOOT ORTHOSIS, FULL PLASTIC, DOUBLE UPRIGHT, WITH OR WITHOUT FREE MOTION KNEE, WITH OR WITHOUT FREE MOTION ANKLE, CUSTOM FABRICATED	2
L2037	KNEE ANKLE FOOT ORTHOSIS, FULL PLASTIC, SINGLE UPRIGHT, WITH OR WITHOUT FREE MOTION KNEE, WITH OR WITHOUT FREE MOTION ANKLE, CUSTOM FABRICATED	2
L2038	KNEE ANKLE FOOT ORTHOSIS, FULL PLASTIC, WITH OR WITHOUT FREE MOTION KNEE, MULTI-AXIS ANKLE, CUSTOM FABRICATED	2
L2040	HIP KNEE ANKLE FOOT ORTHOSIS, TORSION CONTROL, BILATERAL ROTATION STRAPS, PELVIC BAND/BELT, CUSTOM FABRICATED	1
L2050	HIP KNEE ANKLE FOOT ORTHOSIS, TORSION CONTROL, BILATERAL TORSION CABLES, HIP JOINT, PELVIC BAND/BELT, CUSTOM FABRICATED	1
L2060	HIP KNEE ANKLE FOOT ORTHOSIS, TORSION CONTROL, BILATERAL TORSION CABLES, BALL BEARING HIP JOINT, PELVIC BAND/ BELT, CUSTOM FABRICATED	1
L2070	HIP KNEE ANKLE FOOT ORTHOSIS, TORSION CONTROL, UNILATERAL ROTATION STRAPS, PELVIC BAND/BELT, CUSTOM FABRICATED	1
L2080	HIP KNEE ANKLE FOOT ORTHOSIS, TORSION CONTROL, UNILATERAL TORSION CABLE, HIP JOINT, PELVIC BAND/BELT, CUSTOM FABRICATED	1

L2090	HIP KNEE ANKLE FOOT ORTHOSIS, TORSION CONTROL, UNILATERAL TORSION CABLE, BALL BEARING HIP JOINT, PELVIC BAND/ BELT, CUSTOM FABRICATED	1
L2106	ANKLE FOOT ORTHOSIS, FRACTURE ORTHOSIS, TIBIAL FRACTURE CAST ORTHOSIS, THERMOPLASTIC TYPE CASTING MATERIAL, CUSTOM FABRICATED	2
L2108	ANKLE FOOT ORTHOSIS, FRACTURE ORTHOSIS, TIBIAL FRACTURE CAST ORTHOSIS, CUSTOM FABRICATED	2
L2112	ANKLE FOOT ORTHOSIS, FRACTURE ORTHOSIS, TIBIAL FRACTURE ORTHOSIS, SOFT, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	2
L2114	ANKLE FOOT ORTHOSIS, FRACTURE ORTHOSIS, TIBIAL FRACTURE ORTHOSIS, SEMI-RIGID, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	2
L2116	ANKLE FOOT ORTHOSIS, FRACTURE ORTHOSIS, TIBIAL FRACTURE ORTHOSIS, RIGID, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	2
L2126	KNEE ANKLE FOOT ORTHOSIS, FRACTURE ORTHOSIS, FEMORAL FRACTURE CAST ORTHOSIS, THERMOPLASTIC TYPE CASTING MATERIAL, CUSTOM FABRICATED	2
L2128	KNEE ANKLE FOOT ORTHOSIS, FRACTURE ORTHOSIS, FEMORAL FRACTURE CAST ORTHOSIS, CUSTOM FABRICATED	2
L2132	KAFO, FRACTURE ORTHOSIS, FEMORAL FRACTURE CAST ORTHOSIS, SOFT, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	2
L2134	KAFO, FRACTURE ORTHOSIS, FEMORAL FRACTURE CAST ORTHOSIS, SEMI-RIGID, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	2
L2136	KAFO, FRACTURE ORTHOSIS, FEMORAL FRACTURE CAST ORTHOSIS, RIGID, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	2
L2180	ADDITION TO LOWER EXTREMITY FRACTURE ORTHOSIS, PLASTIC SHOE INSERT WITH ANKLE JOINTS	2
L2182	ADDITION TO LOWER EXTREMITY FRACTURE ORTHOSIS, DROP LOCK KNEE JOINT	2
L2184	ADDITION TO LOWER EXTREMITY FRACTURE ORTHOSIS, LIMITED MOTION KNEE JOINT	2
L2186	ADDITION TO LOWER EXTREMITY FRACTURE ORTHOSIS, ADJUSTABLE MOTION KNEE JOINT, LERMAN TYPE	2
L2188	ADDITION TO LOWER EXTREMITY FRACTURE ORTHOSIS, QUADRILATERAL BRIM	2
L2190	ADDITION TO LOWER EXTREMITY FRACTURE ORTHOSIS, WAIST BELT	1
L2192	ADDITION TO LOWER EXTREMITY FRACTURE ORTHOSIS, HIP JOINT, PELVIC BAND, THIGH FLANGE, AND PELVIC BELT	1
L2200	ADDITION TO LOWER EXTREMITY, LIMITED ANKLE MOTION, EACH JOINT	4
L2210	ADDITION TO LOWER EXTREMITY, DORSIFLEXION ASSIST (PLANTAR FLEXION RESIST), EACH JOINT	4
L2220	ADDITION TO LOWER EXTREMITY, DORSIFLEXION AND PLANTAR FLEXION ASSIST/RESIST, EACH JOINT	4
L2230	ADDITION TO LOWER EXTREMITY, SPLIT FLAT CALIPER STIRRUPS AND PLATE ATTACHMENT	2

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L2232	ADDITION TO LOWER EXTREMITY ORTHOSIS, ROCKER BOTTOM FOR TOTAL CONTACT ANKLE FOOT ORTHOSIS, FOR CUSTOM FABRICATED ORTHOSIS ONLY	2
L2240	ADDITION TO LOWER EXTREMITY, ROUND CALIPER AND PLATE ATTACHMENT	2
L2250	ADDITION TO LOWER EXTREMITY, FOOT PLATE, MOLDED TO PATIENT MODEL, STIRRUP ATTACHMENT	2
L2260	ADDITION TO LOWER EXTREMITY, REINFORCED SOLID STIRRUP (SCOTT-CRAIG TYPE)	2
L2265	ADDITION TO LOWER EXTREMITY, LONG TONGUE STIRRUP	2
L2270	ADDITION TO LOWER EXTREMITY, VARUS/VALGUS CORRECTION ('T') STRAP, PADDED/LINED OR MALLEOLUS PAD	4
L2275	ADDITION TO LOWER EXTREMITY, VARUS/VALGUS CORRECTION, PLASTIC MODIFICATION, PADDED/LINED	2
L2280	ADDITION TO LOWER EXTREMITY, MOLDED INNER BOOT	2
L2300	ADDITION TO LOWER EXTREMITY, ABDUCTION BAR (BILATERAL HIP INVOLVEMENT), JOINTED, ADJUSTABLE	1
L2310	ADDITION TO LOWER EXTREMITY, ABDUCTION BAR-STRAIGHT	1
L2320	ADDITION TO LOWER EXTREMITY, NON-MOLDED LACER, FOR CUSTOM FABRICATED ORTHOSIS ONLY	2
L2330	ADDITION TO LOWER EXTREMITY, LACER MOLDED TO PATIENT MODEL, FOR CUSTOM FABRICATED ORTHOSIS ONLY	2
L2335	ADDITION TO LOWER EXTREMITY, ANTERIOR SWING BAND	2
L2340	ADDITION TO LOWER EXTREMITY, PRE-TIBIAL SHELL, MOLDED TO PATIENT MODEL	2
L2350	ADDITION TO LOWER EXTREMITY, PROSTHETIC TYPE, (BK) SOCKET, MOLDED TO PATIENT MODEL, (USED FOR 'PTB' 'AFO' ORTHOSES)	2
L2360	ADDITION TO LOWER EXTREMITY, EXTENDED STEEL SHANK	8
L2370	ADDITION TO LOWER EXTREMITY, PATTEN BOTTOM	2
L2375	ADDITION TO LOWER EXTREMITY, TORSION CONTROL, ANKLE JOINT AND HALF SOLID STIRRUP	2
L2380	ADDITION TO LOWER EXTREMITY, TORSION CONTROL, STRAIGHT KNEE JOINT, EACH JOINT	2
L2385	ADDITION TO LOWER EXTREMITY, STRAIGHT KNEE JOINT, HEAVY DUTY, EACH JOINT	8
L2387	ADDITION TO LOWER EXTREMITY, POLYCENTRIC KNEE JOINT, FOR CUSTOM FABRICATED KNEE ANKLE FOOT ORTHOSIS, EACH JOINT	2
L2390	ADDITION TO LOWER EXTREMITY, OFFSET KNEE JOINT, EACH JOINT	2
L2395	ADDITION TO LOWER EXTREMITY, OFFSET KNEE JOINT, HEAVY DUTY, EACH JOINT	4
L2397	ADDITION TO LOWER EXTREMITY ORTHOSIS, SUSPENSION SLEEVE	2
L2405	ADDITION TO KNEE JOINT, DROP LOCK, EACH	4
L2415	ADDITION TO KNEE LOCK WITH INTEGRATED RELEASE MECHANISM (BAIL, CABLE, OR EQUAL), ANY MATERIAL, EACH JOINT	4

L2425	ADDITION TO KNEE JOINT, DISC OR DIAL LOCK FOR ADJUSTABLE KNEE FLEXION, EACH JOINT	4
L2430	ADDITION TO KNEE JOINT, RATCHET LOCK FOR ACTIVE AND PROGRESSIVE KNEE EXTENSION, EACH JOINT	2
L2492	ADDITION TO KNEE JOINT, LIFT LOOP FOR DROP LOCK RING	2
L2500	ADDITION TO LOWER EXTREMITY, THIGH/WEIGHT BEARING, GLUTEAL/ ISCHIAL WEIGHT BEARING, RING	2
L2510	ADDITION TO LOWER EXTREMITY, THIGH/WEIGHT BEARING, QUADRI- LATERAL BRIM, MOLDED TO PATIENT MODEL	1
L2520	ADDITION TO LOWER EXTREMITY, THIGH/WEIGHT BEARING, QUADRI- LATERAL BRIM, CUSTOM FITTED	2
L2525	ADDITION TO LOWER EXTREMITY, THIGH/WEIGHT BEARING, ISCHIAL CONTAINMENT/NARROW M-L BRIM MOLDED TO PATIENT MODEL	2
L2526	ADDITION TO LOWER EXTREMITY, THIGH/WEIGHT BEARING, ISCHIAL CONTAINMENT/NARROW M-L BRIM, CUSTOM FITTED	2
L2530	ADDITION TO LOWER EXTREMITY, THIGH-WEIGHT BEARING, LACER, NON-MOLDED	2
L2540	ADDITION TO LOWER EXTREMITY, THIGH/WEIGHT BEARING, LACER, MOLDED TO PATIENT MODEL	2
L2550	ADDITION TO LOWER EXTREMITY, THIGH/WEIGHT BEARING, HIGH ROLL CUFF	2
L2570	ADDITION TO LOWER EXTREMITY, PELVIC CONTROL, HIP JOINT, CLEVIS TYPE TWO POSITION JOINT, EACH	2
L2580	ADDITION TO LOWER EXTREMITY, PELVIC CONTROL, PELVIC SLING	1
L2600	ADDITION TO LOWER EXTREMITY, PELVIC CONTROL, HIP JOINT, CLEVIS TYPE, OR THRUST BEARING, FREE, EACH	2
L2610	ADDITION TO LOWER EXTREMITY, PELVIC CONTROL, HIP JOINT, CLEVIS OR THRUST BEARING, LOCK, EACH	2
L2620	ADDITION TO LOWER EXTREMITY, PELVIC CONTROL, HIP JOINT, HEAVY DUTY, EACH	2
L2622	ADDITION TO LOWER EXTREMITY, PELVIC CONTROL, HIP JOINT, ADJUSTABLE FLEXION, EACH	2
L2624	ADDITION TO LOWER EXTREMITY, PELVIC CONTROL, HIP JOINT, ADJUSTABLE FLEXION, EXTENSION, ABDUCTION CONTROL, EACH	2
L2627	ADDITION TO LOWER EXTREMITY, PELVIC CONTROL, PLASTIC, MOLDED TO PATIENT MODEL, RECIPROCATING HIP JOINT AND CABLES	2
L2628	ADDITION TO LOWER EXTREMITY, PELVIC CONTROL, METAL FRAME, RECIPROCATING HIP JOINT AND CABLES	2
L2630	ADDITION TO LOWER EXTREMITY, PELVIC CONTROL, BAND AND BELT, UNILATERAL	1
L2640	ADDITION TO LOWER EXTREMITY, PELVIC CONTROL, BAND AND BELT, BILATERAL	1
L2650	ADDITION TO LOWER EXTREMITY, PELVIC AND THORACIC CONTROL, GLUTEAL PAD, EACH	1
L2660	ADDITION TO LOWER EXTREMITY, THORACIC CONTROL, THORACIC BAND	1

L2670	ADDITION TO LOWER EXTREMITY, THORACIC CONTROL, PARASPINAL UPRIGHTS	1
L2680	ADDITION TO LOWER EXTREMITY, THORACIC CONTROL, LATERAL SUPPORT UPRIGHTS	2
L2750	ADDITION TO LOWER EXTREMITY ORTHOSIS, PLATING CHROME OR NICKEL, PER BAR	4
L2755	ADDITION TO LOWER EXTREMITY ORTHOSIS, HIGH STRENGTH, LIGHTWEIGHT MATERIAL, ALL HYBRID LAMINATION/PREPREG COMPOSITE, PER SEGMENT, FOR CUSTOM FABRICATED ORTHOSIS ONLY	8
L2760	ADDITION TO LOWER EXTREMITY ORTHOSIS, EXTENSION, PER EXTENSION, PER BAR (FOR LINEAL ADJUSTMENT FOR GROWTH)	12
L2768	ORTHOTIC SIDE BAR DISCONNECT DEVICE, PER BAR	2
L2780	ADDITION TO LOWER EXTREMITY ORTHOSIS, NON-CORROSIVE FINISH, PER BAR	8
L2785	ADDITION TO LOWER EXTREMITY ORTHOSIS, DROP LOCK RETAINER, EACH	4
L2795	ADDITION TO LOWER EXTREMITY ORTHOSIS, KNEE CONTROL, FULL KNEECAP	2
L2800	ADDITION TO LOWER EXTREMITY ORTHOSIS, KNEE CONTROL, KNEE CAP, MEDIAL OR LATERAL PULL, FOR USE WITH CUSTOM FABRICATED ORTHOSIS ONLY	2
L2810	ADDITION TO LOWER EXTREMITY ORTHOSIS, KNEE CONTROL, CONDYLAR PAD	2
L2820	ADDITION TO LOWER EXTREMITY ORTHOSIS, SOFT INTERFACE FOR MOLDED PLASTIC, BELOW KNEE SECTION	2
L2830	ADDITION TO LOWER EXTREMITY ORTHOSIS, SOFT INTERFACE FOR MOLDED PLASTIC, ABOVE KNEE SECTION	2
L2840	ADDITION TO LOWER EXTREMITY ORTHOSIS, TIBIAL LENGTH SOCK, FRACTURE OR EQUAL, EACH	2
L2850	ADDITION TO LOWER EXTREMITY ORTHOSIS, FEMORAL LENGTH SOCK, FRACTURE OR EQUAL, EACH	2
L2861	ADDITION TO LOWER EXTREMITY JOINT, KNEE OR ANKLE, CONCENTRIC ADJUSTABLE TORSION STYLE MECHANISM FOR CUSTOM FABRICATED ORTHOTICS ONLY, EACH	2
L2999	LOWER EXTREMITY ORTHOSES, NOT OTHERWISE SPECIFIED	2
L3000	FOOT, INSERT, REMOVABLE, MOLDED TO PATIENT MODEL, 'UCB' TYPE, BERKELEY SHELL, EACH	8
L3001	FOOT, INSERT, REMOVABLE, MOLDED TO PATIENT MODEL, SPENCO, EACH	2
L3002	FOOT, INSERT, REMOVABLE, MOLDED TO PATIENT MODEL, PLASTAZOTE OR EQUAL, EACH	8
L3003	FOOT, INSERT, REMOVABLE, MOLDED TO PATIENT MODEL, SILICONE GEL, EACH	2
L3010	FOOT, INSERT, REMOVABLE, MOLDED TO PATIENT MODEL, LONGITUDINAL ARCH SUPPORT, EACH	2
L3020	FOOT, INSERT, REMOVABLE, MOLDED TO PATIENT MODEL, LONGITUDINAL/ METATARSAL SUPPORT, EACH	8
L3030	FOOT, INSERT, REMOVABLE, FORMED TO PATIENT FOOT, EACH	2

L3031	FOOT, INSERT/PLATE, REMOVABLE, ADDITION TO LOWER EXTREMITY ORTHOSIS,	2
	HIGH STRENGTH, LIGHTWEIGHT MATERIAL, ALL HYBRID LAMINATION/PREPREG COMPOSITE, EACH	
L3040	FOOT, ARCH SUPPORT, REMOVABLE, PREMOLDED, LONGITUDINAL, EACH	8
L3050	FOOT, ARCH SUPPORT, REMOVABLE, PREMOLDED, METATARSAL, EACH	8
L3060	FOOT, ARCH SUPPORT, REMOVABLE, PREMOLDED, LONGITUDINAL/ METATARSAL, EACH	8
L3070	FOOT, ARCH SUPPORT, NON-REMOVABLE ATTACHED TO SHOE, LONGITUDINAL, EACH	2
L3080	FOOT, ARCH SUPPORT, NON-REMOVABLE ATTACHED TO SHOE, METATARSAL, EACH	2
L3090	FOOT, ARCH SUPPORT, NON-REMOVABLE ATTACHED TO SHOE, LONGITUDINAL/METATARSAL, EACH	2
L3100	HALLUS-VALGUS NIGHT DYNAMIC SPLINT, PREFABRICATED, OFF-THE-SHELF	2
L3140	FOOT, ABDUCTION ROTATION BAR, INCLUDING SHOES	1
L3150	FOOT, ABDUCTION ROTATION BAR, WITHOUT SHOES	2
L3160	FOOT, ADJUSTABLE SHOE-STYLED POSITIONING DEVICE	9999
L3201	ORTHOPEDIC SHOE, OXFORD WITH SUPINATOR OR PRONATOR, INFANT	8
L3202	ORTHOPEDIC SHOE, OXFORD WITH SUPINATOR OR PRONATOR, CHILD	8
L3203	ORTHOPEDIC SHOE, OXFORD WITH SUPINATOR OR PRONATOR, JUNIOR	8
L3204	ORTHOPEDIC SHOE, HIGHTOP WITH SUPINATOR OR PRONATOR, INFANT	8
L3206	ORTHOPEDIC SHOE, HIGHTOP WITH SUPINATOR OR PRONATOR, CHILD	8
L3207	ORTHOPEDIC SHOE, HIGHTOP WITH SUPINATOR OR PRONATOR, JUNIOR	8
L3208	SURGICAL BOOT, EACH, INFANT	2
L3209	SURGICAL BOOT, EACH, CHILD	2
L3211	SURGICAL BOOT, EACH, JUNIOR	2
L3212	BENESCH BOOT, PAIR, INFANT	1
L3213	BENESCH BOOT, PAIR, CHILD	1
L3214	BENESCH BOOT, PAIR, JUNIOR	1
L3215	ORTHOPEDIC FOOTWEAR, LADIES SHOE, OXFORD, EACH	8
L3216	ORTHOPEDIC FOOTWEAR, LADIES SHOE, DEPTH INLAY, EACH	8
L3217	ORTHOPEDIC FOOTWEAR, LADIES SHOE, HIGHTOP, DEPTH INLAY, EACH	8
L3219	ORTHOPEDIC FOOTWEAR, MENS SHOE, OXFORD, EACH	8
L3221	ORTHOPEDIC FOOTWEAR, MENS SHOE, DEPTH INLAY, EACH	8
L3222	ORTHOPEDIC FOOTWEAR, MENS SHOE, HIGHTOP, DEPTH INLAY, EACH	8
L3224	ORTHOPEDIC FOOTWEAR, WOMAN'S SHOE, OXFORD, USED AS AN INTEGRAL PART OF A BRACE (ORTHOSIS)	8

L3225	ORTHOPEDIC FOOTWEAR, MAN'S SHOE, OXFORD, USED AS AN INTEGRAL PART OF A BRACE (ORTHOSIS)	8
L3230	ORTHOPEDIC FOOTWEAR, CUSTOM SHOE, DEPTH INLAY, EACH	8
L3250	ORTHOPEDIC FOOTWEAR, CUSTOM MOLDED SHOE, REMOVABLE INNER MOLD, PROSTHETIC SHOE, EACH	8
L3251	FOOT, SHOE MOLDED TO PATIENT MODEL, SILICONE SHOE, EACH	2
L3252	FOOT, SHOE MOLDED TO PATIENT MODEL, PLASTAZOTE (OR SIMILAR), CUSTOM FABRICATED, EACH	2
L3253	FOOT, MOLDED SHOE PLASTAZOTE (OR SIMILAR) CUSTOM FITTED, EACH	2
L3254	NON-STANDARD SIZE OR WIDTH	2
L3255	NON-STANDARD SIZE OR LENGTH	2
L3257	ORTHOPEDIC FOOTWEAR, ADDITIONAL CHARGE FOR SPLIT SIZE	1
L3260	SURGICAL BOOT/SHOE, EACH	2
L3265	PLASTAZOTE SANDAL, EACH	2
L3300	LIFT, ELEVATION, HEEL, TAPERED TO METATARSALS, PER INCH	4
L3310	LIFT, ELEVATION, HEEL AND SOLE, NEOPRENE, PER INCH	4
L3330	LIFT, ELEVATION, METAL EXTENSION (SKATE)	2
L3332	LIFT, ELEVATION, INSIDE SHOE, TAPERED, UP TO ONE-HALF INCH	2
L3334	LIFT, ELEVATION, HEEL, PER INCH	4
L3340	HEEL WEDGE, SACH	2
L3350	HEEL WEDGE	2
L3360	SOLE WEDGE, OUTSIDE SOLE	2
L3370	SOLE WEDGE, BETWEEN SOLE	2
L3380	CLUBFOOT WEDGE	2
L3390	OUTFLARE WEDGE	2
L3400	METATARSAL BAR WEDGE, ROCKER	2
L3410	METATARSAL BAR WEDGE, BETWEEN SOLE	2
L3420	FULL SOLE AND HEEL WEDGE, BETWEEN SOLE	2
L3430	HEEL, COUNTER, PLASTIC REINFORCED	2
L3440	HEEL, COUNTER, LEATHER REINFORCED	2
L3450	HEEL, SACH CUSHION TYPE	2
L3455	HEEL, NEW LEATHER, STANDARD	2
L3460	HEEL, NEW RUBBER, STANDARD	2
L3465	HEEL, THOMAS WITH WEDGE	2
L3470	HEEL, THOMAS EXTENDED TO BALL	2

L3480	HEEL, PAD AND DEPRESSION FOR SPUR	2
L3485	HEEL, PAD, REMOVABLE FOR SPUR	2
L3500	ORTHOPEDIC SHOE ADDITION, INSOLE, LEATHER	2
L3510	ORTHOPEDIC SHOE ADDITION, INSOLE, RUBBER	2
L3520	ORTHOPEDIC SHOE ADDITION, INSOLE, FELT COVERED WITH LEATHER	2
L3530	ORTHOPEDIC SHOE ADDITION, SOLE, HALF	2
L3540	ORTHOPEDIC SHOE ADDITION, SOLE, FULL	2
L3550	ORTHOPEDIC SHOE ADDITION, TOE TAP STANDARD	2
L3560	ORTHOPEDIC SHOE ADDITION, TOE TAP, HORSESHOE	2
L3570	ORTHOPEDIC SHOE ADDITION, SPECIAL EXTENSION TO INSTEP (LEATHER WITH EYELETS)	2
L3580	ORTHOPEDIC SHOE ADDITION, CONVERT INSTEP TO VELCRO CLOSURE	2
L3590	ORTHOPEDIC SHOE ADDITION, CONVERT FIRM SHOE COUNTER TO SOFT COUNTER	2
L3595	ORTHOPEDIC SHOE ADDITION, MARCH BAR	2
L3600	TRANSFER OF AN ORTHOSIS FROM ONE SHOE TO ANOTHER, CALIPER PLATE, EXISTING	2
L3610	TRANSFER OF AN ORTHOSIS FROM ONE SHOE TO ANOTHER, CALIPER PLATE, NEW	4
L3620	TRANSFER OF AN ORTHOSIS FROM ONE SHOE TO ANOTHER, SOLID STIRRUP, EXISTING	2
L3630	TRANSFER OF AN ORTHOSIS FROM ONE SHOE TO ANOTHER, SOLID STIRRUP, NEW	4
L3640	TRANSFER OF AN ORTHOSIS FROM ONE SHOE TO ANOTHER, DENNIS BROWNE SPLINT (RIVETON), BOTH SHOES	1
L3649	ORTHOPEDIC SHOE, MODIFICATION, ADDITION OR TRANSFER, NOT OTHERWISE SPECIFIED	2
L3650	SHOULDER ORTHOSIS, FIGURE OF EIGHT DESIGN ABDUCTION RESTRAINER, PREFABRICATED, OFF-THE-SHELF	1
L3660	SHOULDER ORTHOSIS, FIGURE OF EIGHT DESIGN ABDUCTION RESTRAINER, CANVAS AND WEBBING, PREFABRICATED, OFF-THE-SHELF	1
L3670	SHOULDER ORTHOSIS, ACROMIO/CLAVICULAR (CANVAS AND WEBBING TYPE), PREFABRICATED, OFF-THE-SHELF	1
L3671	SHOULDER ORTHOSIS, SHOULDER JOINT DESIGN, WITHOUT JOINTS, MAY INCLUDE SOFT INTERFACE, STRAPS, CUSTOM FABRICATED, INCLUDES FITTING AND ADJUSTMENT	2
L3674	SHOULDER ORTHOSIS, ABDUCTION POSITIONING (AIRPLANE DESIGN), THORACIC COMPONENT AND SUPPORT BAR, WITH OR WITHOUT NONTORSION JOINT/TURNBUCKLE, MAY INCLUDE SOFT INTERFACE, STRAPS, CUSTOM FABRICATED, INCLUDES FITTING AND ADJUSTMENT	2
L3675	SHOULDER ORTHOSIS, VEST TYPE ABDUCTION RESTRAINER, CANVAS WEBBING TYPE OR EQUAL, PREFABRICATED, OFF-THE-SHELF	1

L3677	SHOULDER ORTHOSIS, SHOULDER JOINT DESIGN, WITHOUT JOINTS, MAY INCLUDE SOFT INTERFACE, STRAPS, PREFABRICATED ITEM THAT HAS BEEN TRIMMED, BENT, MOLDED, ASSEMBLED, OR OTHERWISE CUSTOMIZED TO FIT A SPECIFIC PATIENT BY AN INDIVIDUAL WITH EXPERTISE	1
L3678	SHOULDER ORTHOSIS, SHOULDER JOINT DESIGN, WITHOUT JOINTS, MAY INCLUDE SOFT INTERFACE, STRAPS, PREFABRICATED, OFF-THE-SHELF	1
L3702	ELBOW ORTHOSIS, WITHOUT JOINTS, MAY INCLUDE SOFT INTERFACE, STRAPS, CUSTOM FABRICATED, INCLUDES FITTING AND ADJUSTMENT	2
L3710	ELBOW ORTHOSIS, ELASTIC WITH METAL JOINTS, PREFABRICATED, OFF-THE-SHELF	2
L3720	ELBOW ORTHOSIS, DOUBLE UPRIGHT WITH FOREARM/ARM CUFFS, FREE MOTION, CUSTOM FABRICATED	2
L3730	ELBOW ORTHOSIS, DOUBLE UPRIGHT WITH FOREARM/ARM CUFFS, EXTENSION/ FLEXION ASSIST, CUSTOM FABRICATED	4
L3740	ELBOW ORTHOSIS, DOUBLE UPRIGHT WITH FOREARM/ARM CUFFS, ADJUSTABLE POSITION LOCK WITH ACTIVE CONTROL, CUSTOM FABRICATED	2
L3760	ELBOW ORTHOSIS (EO), WITH ADJUSTABLE POSITION LOCKING JOINT(S), PREFABRICATED, ITEM THAT HAS BEEN TRIMMED, BENT, MOLDED, ASSEMBLED, OR OTHERWISE CUSTOMIZED TO FIT A SPECIFIC PATIENT BY AN INDIVIDUAL WITH EXPERTISE	2
L3762	ELBOW ORTHOSIS, RIGID, WITHOUT JOINTS, INCLUDES SOFT INTERFACE MATERIAL, PREFABRICATED, OFF-THE-SHELF	2
L3763	ELBOW WRIST HAND ORTHOSIS, RIGID, WITHOUT JOINTS, MAY INCLUDE SOFT INTERFACE, STRAPS, CUSTOM FABRICATED, INCLUDES FITTING AND ADJUSTMENT	2
L3764	ELBOW WRIST HAND ORTHOSIS, INCLUDES ONE OR MORE NONTORSION JOINTS, ELASTIC BANDS, TURNBUCKLES, MAY INCLUDE SOFT INTERFACE, STRAPS, CUSTOM FABRICATED, INCLUDES FITTING AND ADJUSTMENT	2
L3765	ELBOW WRIST HAND FINGER ORTHOSIS, RIGID, WITHOUT JOINTS, MAY INCLUDE SOFT INTERFACE, STRAPS, CUSTOM FABRICATED, INCLUDES FITTING AND ADJUSTMENT	2
L3766	ELBOW WRIST HAND FINGER ORTHOSIS, INCLUDES ONE OR MORE NONTORSION JOINTS, ELASTIC BANDS, TURNBUCKLES, MAY INCLUDE SOFT INTERFACE, STRAPS, CUSTOM FABRICATED, INCLUDES FITTING AND ADJUSTMENT	2
L3806	WRIST HAND FINGER ORTHOSIS, INCLUDES ONE OR MORE NONTORSION JOINT(S), TURNBUCKLES, ELASTIC BANDS/SPRINGS, MAY INCLUDE SOFT INTERFACE MATERIAL, STRAPS, CUSTOM FABRICATED, INCLUDES FITTING AND ADJUSTMENT	2
L3807	WRIST HAND FINGER ORTHOSIS, WITHOUT JOINT(S), PREFABRICATED ITEM THAT HAS BEEN TRIMMED, BENT, MOLDED, ASSEMBLED, OR OTHERWISE CUSTOMIZED TO FIT A SPECIFIC PATIENT BY AN INDIVIDUAL WITH EXPERTISE	2
L3808	WRIST HAND FINGER ORTHOSIS, RIGID WITHOUT JOINTS, MAY INCLUDE SOFT INTERFACE MATERIAL; STRAPS, CUSTOM FABRICATED, INCLUDES FITTING AND ADJUSTMENT	2

L3891	ADDITION TO UPPER EXTREMITY JOINT, WRIST OR ELBOW, CONCENTRIC ADJUSTABLE TORSION STYLE MECHANISM FOR CUSTOM FABRICATED ORTHOTICS ONLY, EACH	2
L3900	WRIST HAND FINGER ORTHOSIS, DYNAMIC FLEXOR HINGE, RECIPROCAL WRIST EXTENSION/ FLEXION, FINGER FLEXION/EXTENSION, WRIST OR FINGER DRIVEN, CUSTOM FABRICATED	2
L3901	WRIST HAND FINGER ORTHOSIS, DYNAMIC FLEXOR HINGE, RECIPROCAL WRIST EXTENSION/ FLEXION, FINGER FLEXION/EXTENSION, CABLE DRIVEN, CUSTOM FABRICATED	2
L3904	WRIST HAND FINGER ORTHOSIS, EXTERNAL POWERED, ELECTRIC, CUSTOM FABRICATED	2
L3905	WRIST HAND ORTHOSIS, INCLUDES ONE OR MORE NONTORSION JOINTS, ELASTIC BANDS, TURNBUCKLES, MAY INCLUDE SOFT INTERFACE, STRAPS, CUSTOM FABRICATED, INCLUDES FITTING AND ADJUSTMENT	2
L3906	WRIST HAND ORTHOSIS, WITHOUT JOINTS, MAY INCLUDE SOFT INTERFACE, STRAPS, CUSTOM FABRICATED, INCLUDES FITTING AND ADJUSTMENT	2
L3908	WRIST HAND ORTHOSIS, WRIST EXTENSION CONTROL COCK-UP, NON MOLDED, PREFABRICATED, OFF-THE-SHELF	2
L3912	HAND FINGER ORTHOSIS (HFO), FLEXION GLOVE WITH ELASTIC FINGER CONTROL, PREFABRICATED, OFF-THE-SHELF	2
L3913	HAND FINGER ORTHOSIS, WITHOUT JOINTS, MAY INCLUDE SOFT INTERFACE, STRAPS, CUSTOM FABRICATED, INCLUDES FITTING AND ADJUSTMENT	2
L3915	WRIST HAND ORTHOSIS, INCLUDES ONE OR MORE NONTORSION JOINT(S), ELASTIC BANDS, TURNBUCKLES, MAY INCLUDE SOFT INTERFACE, STRAPS, PREFABRICATED ITEM THAT HAS BEEN TRIMMED, BENT, MOLDED, ASSEMBLED, OR OTHERWISE CUSTOMIZED TO FIT A SPECIFIC PATIENT BY AN INDIVIDUAL WITH EXPERTISE	2
L3917	HAND ORTHOSIS, METACARPAL FRACTURE ORTHOSIS, PREFABRICATED ITEM THAT HAS BEEN TRIMMED, BENT, MOLDED, ASSEMBLED, OR OTHERWISE CUSTOMIZED TO FIT A SPECIFIC PATIENT BY AN INDIVIDUAL WITH EXPERTISE	2
L3919	HAND ORTHOSIS, WITHOUT JOINTS, MAY INCLUDE SOFT INTERFACE, STRAPS, CUSTOM FABRICATED, INCLUDES FITTING AND ADJUSTMENT	2
L3921	HAND FINGER ORTHOSIS, INCLUDES ONE OR MORE NONTORSION JOINTS, ELASTIC BANDS, TURNBUCKLES, MAY INCLUDE SOFT INTERFACE, STRAPS, CUSTOM FABRICATED, INCLUDES FITTING AND ADJUSTMENT	2
L3923	HAND FINGER ORTHOSIS, WITHOUT JOINTS, MAY INCLUDE SOFT INTERFACE, STRAPS, PREFABRICATED ITEM THAT HAS BEEN TRIMMED, BENT, MOLDED, ASSEMBLED, OR OTHERWISE CUSTOMIZED TO FIT A SPECIFIC PATIENT BY AN INDIVIDUAL WITH EXPERTISE	2
L3924	HAND FINGER ORTHOSIS, WITHOUT JOINTS, MAY INCLUDE SOFT INTERFACE, STRAPS, PREFABRICATED, OFF-THE-SHELF	2
L3925	FINGER ORTHOSIS, PROXIMAL INTERPHALANGEAL (PIP)/DISTAL INTERPHALANGEAL (DIP), NON TORSION JOINT/SPRING, EXTENSION/FLEXION, MAY INCLUDE SOFT INTERFACE MATERIAL, PREFABRICATED, OFF-THE-SHELF	10

E19927 FINGER ORTHOSIS, PROXIMAL INTERPHALANGEAL (PIP)/DISTAL INTERPHALANGEAL (DIP), WITHOUT JOINT/SPRING, EXTENSION/FLEXION (E.G., STATIC OR RING TYPE), MAY INCLUDE SOFT INTERFACE MATERIAL, PREFABRICATED, OPE-THE-SHEEP			
TURNBUCKLES, ELASTIC BANDS/SPRINGS, MAY INCLUDE SOFT INTERFACE MATERIAL, STRAPS, PREFABRICATED ITEM THAT HAS BEEN TRIMMED, BENT, MOLDED, ASSEMBLED, OR OTHERWISE CUSTOMIZED TO FIT A SPECIFIC PATIENT BY AN INDIVIDUAL WITH EXPERTISE L3931 WRIST HAND FINGER ORTHOSIS, INCLUDES ONE OR MORE NONTORSION JOINT(S), TURNBUCKLES, ELASTIC BANDS/SPRINGS, MAY INCLUDE SOFT INTERFACE MATERIAL, STRAPS, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT L3933 FINGER ORTHOSIS, WITHOUT JOINTS, MAY INCLUDE SOFT INTERFACE, CUSTOM FABRICATED, INCLUDES FITTING AND ADJUSTMENT L3935 FINGER ORTHOSIS, NONTORSION JOINT, MAY INCLUDE SOFT INTERFACE, CUSTOM FABRICATED, INCLUDES FITTING AND ADJUSTMENT L3956 ADDITION OF JOINT TO UPPER EXTREMITY ORTHOSIS, ANY MATERIAL; PER JOINT L3956 SHOULDER ELBOW WRIST HAND ORTHOSIS, ABDUCTION POSITIONING, AIRPLANE DESIGN, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT L3961 SHOULDER ELBOW WRIST HAND ORTHOSIS, SHOULDER CAP DESIGN, WITHOUT JOINTS, MAY INCLUDE SOFT INTERFACE, STRAPS, CUSTOM FABRICATED, INCLUDES FITTING AND ADJUSTMENT L3962 SHOULDER ELBOW WRIST HAND ORTHOSIS, ABDUCTION POSITIONING, ERB'S SHOULDER ELBOW WRIST HAND ORTHOSIS, ABDUCTION POSITIONING (AIRPLANE DESIGN), THORACIC COMPONENT AND SUPPORT BAR, WITHOUT JOINTS, MAY INCLUDE SOFT INTERFACE, STRAPS, CUSTOM FABRICATED, INCLUDES FITTING AND ADJUSTMENT L3967 SHOULDER ELBOW WRIST HAND ORTHOSIS, ABDUCTION POSITIONING (AIRPLANE DESIGN), THORACIC COMPONENT AND SUPPORT BAR, WITHOUT JOINTS, MAY INCLUDE SOFT INTERFACE, STRAPS, CUSTOM FABRICATED, INCLUDES FITTING AND ADJUSTMENT L3971 SHOULDER ELBOW WRIST HAND ORTHOSIS, SHOULDER CAP DESIGN, INCLUDE OR MORE NONTORSION JOINTS, ELASTIC BANDS, TURNBUCKLES, MAY INCLUDE OR MORE NONTORSION JOINTS, ELASTIC BANDS, TURNBUCKLES, MAY INCLUDE OR MORE NONTORSION JOINTS, ELASTIC BANDS, TURNBUCKLES, MAY INCLUDE OR MORE NONTORSION JOINTS, ELASTIC BANDS, TURNBUCKLES, MAY INCLUDE ORD INTERFACE, STRAPS, CUSTOM FABRICATED, INCLUDES FITTING AND ADJUSTMENT L3975 SHOULDER ELBOW WRIST HAND FINGER ORTHOSIS, SHOULDER CAP DESIGN,	L3927	(DIP), WITHOUT JOINT/SPRING, EXTENSION/FLEXION (E.G., STATIC OR RING TYPE),	10
TURNBUCKLES, ELASTIC BANDS/SPRINGS, MAY INCLUDE SOFT INTERFACE MATERIAL, STRAPS, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT L3933 FINGER ORTHOSIS, WITHOUT JOINTS, MAY INCLUDE SOFT INTERFACE, CUSTOM FABRICATED, INCLUDES FITTING AND ADJUSTMENT L3935 FINGER ORTHOSIS, NONTORSION JOINT, MAY INCLUDE SOFT INTERFACE, CUSTOM FABRICATED, INCLUDES FITTING AND ADJUSTMENT L3956 ADDITION OF JOINT TO UPPER EXTREMITY ORTHOSIS, ANY MATERIAL; PER JOINT 4 L3960 SHOULDER ELBOW WRIST HAND ORTHOSIS, ABDUCTION POSITIONING, AIRPLANE DESIGN, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT L3961 SHOULDER ELBOW WRIST HAND ORTHOSIS, SHOULDER CAP DESIGN, WITHOUT JOINTS, MAY INCLUDE SOFT INTERFACE, STRAPS, CUSTOM FABRICATED, INCLUDES FITTING AND ADJUSTMENT L3962 SHOULDER ELBOW WRIST HAND ORTHOSIS, ABDUCTION POSITIONING, ERB'S PALSEY DESIGN, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT L3967 SHOULDER ELBOW WRIST HAND ORTHOSIS, ABDUCTION POSITIONING (AIRPLANE DESIGN), THORACIC COMPONENT AND SUPPORT BAR, WITHOUT JOINTS, MAY INCLUDE SOFT INTERFACE, STRAPS, CUSTOM FABRICATED, INCLUDES FITTING AND ADJUSTMENT L3971 SHOULDER ELBOW WRIST HAND ORTHOSIS, SHOULDER CAP DESIGN, INCLUDES ONE OR MORE NONTORSION JOINTS, ELASTIC BANDS, TURNBUCKLES, MAY INCLUDE SOFT INTERFACE, STRAPS, CUSTOM FABRICATED, INCLUDES FITTING AND ADJUSTMENT L3973 SHOULDER ELBOW WRIST HAND ORTHOSIS, ABDUCTION POSITIONING (AIRPLANE DESIGN), THORACIC COMPONENT AND SUPPORT BAR, INCLUDES ONE OR MORE NONTORSION JOINTS, ELASTIC BANDS, TURNBUCKLES, MAY INCLUDE SOFT INTERFACE, STRAPS, CUSTOM FABRICATED, INCLUDES FITTING AND ADJUSTMENT L3975 SHOULDER ELBOW WRIST HAND FINGER ORTHOSIS, SHOULDER CAP DESIGN, WITHOUT JOINTS, MAY INCLUDE SOFT INTERFACE, STRAPS, CUSTOM FABRICATED, INCLUDES FITTING AND ADJUSTMENT L3976 SHOULDER ELBOW WRIST HAND FINGER ORTHOSIS, SHOULDER CAP DESIGN, WITHOUT JOINTS, MAY INCLUDE SOFT INTERFACE, STRAPS, CUSTOM FABRICATED, INCLUDES FITTING AND ADJUSTMENT L3977 SHOULDER ELBOW WRIST HAND FINGER ORTHOSIS, SHOULDER CAP DESIGN, 2 WITHOUT JOINTS, MAY INCLUDE S	L3929	TURNBUCKLES, ELASTIC BANDS/SPRINGS, MAY INCLUDE SOFT INTERFACE MATERIAL, STRAPS, PREFABRICATED ITEM THAT HAS BEEN TRIMMED, BENT, MOLDED, ASSEMBLED, OR OTHERWISE CUSTOMIZED TO FIT A SPECIFIC PATIENT BY	2
FABRICATED, INCLUDES FITTING AND ADJUSTMENT L3935 FINGER ORTHOSIS, NONTORSION JOINT, MAY INCLUDE SOFT INTERFACE, CUSTOM FABRICATED, INCLUDES FITTING AND ADJUSTMENT L3956 ADDITION OF JOINT TO UPPER EXTREMITY ORTHOSIS, ANY MATERIAL; PER JOINT 4 L3960 SHOULDER ELBOW WRIST HAND ORTHOSIS, ABDUCTION POSITIONING, AIRPLANE DESIGN, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT L3961 SHOULDER ELBOW WRIST HAND ORTHOSIS, SHOULDER CAP DESIGN, WITHOUT JOINTS, MAY INCLUDE SOFT INTERFACE, STRAPS, CUSTOM FABRICATED, INCLUDES FITTING AND ADJUSTMENT L3962 SHOULDER ELBOW WRIST HAND ORTHOSIS, ABDUCTION POSITIONING, ERB'S PALSEY DESIGN, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT L3967 SHOULDER ELBOW WRIST HAND ORTHOSIS, ABDUCTION POSITIONING (AIRPLANE DESIGN), THORACIC COMPONENT AND SUPPORT BAR, WITHOUT JOINTS, MAY INCLUDE SOFT INTERFACE, STRAPS, CUSTOM FABRICATED, INCLUDES FITTING AND ADJUSTMENT L3971 SHOULDER ELBOW WRIST HAND ORTHOSIS, SHOULDER CAP DESIGN, INCLUDES ONE OR MORE NONTORSION JOINTS, ELASTIC BANDS, TURNBUCKLES, MAY INCLUDE SOFT INTERFACE, STRAPS, CUSTOM FABRICATED, INCLUDES FITTING AND ADJUSTMENT L3973 SHOULDER ELBOW WRIST HAND ORTHOSIS, ABDUCTION POSITIONING (AIRPLANE DESIGN), THORACIC COMPONENT AND SUPPORT BAR, INCLUDES ONE OR MORE NONTORSION JOINTS, ELASTIC BANDS, TURNBUCKLES, MAY INCLUDE SOFT INTERFACE, STRAPS, CUSTOM FABRICATED, INCLUDES FITTING AND ADJUSTMENT L3975 SHOULDER ELBOW WRIST HAND FINGER ORTHOSIS, SHOULDER CAP DESIGN, WITHOUT JOINTS, MAY INCLUDE SOFT INTERFACE, STRAPS, CUSTOM FABRICATED, INCLUDES FITTING AND ADJUSTMENT L3976 SHOULDER ELBOW WRIST HAND FINGER ORTHOSIS, SHOULDER CAP DESIGN, WITHOUT JOINTS, MAY INCLUDE SOFT INTERFACE, STRAPS, CUSTOM FABRICATED, INCLUDES FITTING AND ADJUSTMENT L3976 SHOULDER ELBOW WRIST HAND FINGER ORTHOSIS, SHOULDER CAP DESIGN, WAY INCLUDE SOFT INTERFACE, STRAPS, CUSTOM FABRICATED, INCLUDES FITTING AND ADJUSTMENT L3977 SHOULDER ELBOW WRIST HAND FINGER ORTHOSIS, SHOULDER CAP DESIGN, AND ADJUSTMENT	L3931	TURNBUCKLES, ELASTIC BANDS/SPRINGS, MAY INCLUDE SOFT INTERFACE	2
L3956 ADDITION OF JOINT TO UPPER EXTREMITY ORTHOSIS, ANY MATERIAL; PER JOINT 4 L3960 SHOULDER ELBOW WRIST HAND ORTHOSIS, ABDUCTION POSITIONING, AIRPLANE DESIGN, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT L3961 SHOULDER ELBOW WRIST HAND ORTHOSIS, SHOULDER CAP DESIGN, WITHOUT JOINTS, MAY INCLUDE SOFT INTERFACE, STRAPS, CUSTOM FABRICATED, INCLUDES FITTING AND ADJUSTMENT L3962 SHOULDER ELBOW WRIST HAND ORTHOSIS, ABDUCTION POSITIONING, ERB'S PALSEY DESIGN, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT L3967 SHOULDER ELBOW WRIST HAND ORTHOSIS, ABDUCTION POSITIONING (AIRPLANE DESIGN), THORACIC COMPONENT AND SUPPORT BAR, WITHOUT JOINTS, MAY INCLUDE SOFT INTERFACE, STRAPS, CUSTOM FABRICATED, INCLUDES FITTING AND ADJUSTMENT L3971 SHOULDER ELBOW WRIST HAND ORTHOSIS, SHOULDER CAP DESIGN, INCLUDES ONE OR MORE NONTORSION JOINTS, ELASTIC BANDS, TURNBUCKLES, MAY INCLUDE SOFT INTERFACE, STRAPS, CUSTOM FABRICATED, INCLUDES FITTING AND ADJUSTMENT L3973 SHOULDER ELBOW WRIST HAND ORTHOSIS, ABDUCTION POSITIONING (AIRPLANE DESIGN), THORACIC COMPONENT AND SUPPORT BAR, INCLUDES ONE OR MORE NONTORSION JOINTS, ELASTIC BANDS, TURNBUCKLES, MAY INCLUDE SOFT INTERFACE, STRAPS, CUSTOM FABRICATED, INCLUDES FITTING AND ADJUSTMENT L3975 SHOULDER ELBOW WRIST HAND FINGER ORTHOSIS, SHOULDER CAP DESIGN, WITHOUT JOINTS, MAY INCLUDE SOFT INTERFACE, STRAPS, CUSTOM FABRICATED, INCLUDES FITTING AND ADJUSTMENT L3976 SHOULDER ELBOW WRIST HAND FINGER ORTHOSIS, ABDUCTION POSITIONING (AIRPLANE DESIGN), THORACIC COMPONENT AND SUPPORT BAR, WITHOUT JOINTS, MAY INCLUDE SOFT INTERFACE, STRAPS, CUSTOM FABRICATED, INCLUDES FITTING AND ADJUSTMENT L3976 SHOULDER ELBOW WRIST HAND FINGER ORTHOSIS, ABDUCTION POSITIONING (AIRPLANE DESIGN), THORACIC COMPONENT AND SUPPORT BAR, WITHOUT JOINTS, MAY INCLUDE SOFT INTERFACE, STRAPS, CUSTOM FABRICATED, INCLUDES FITTING AND ADJUSTMENT L3977 SHOULDER ELBOW WRIST HAND FINGER ORTHOSIS, SHOULDER CAP DESIGN, 2 SHOULDER ELBOW WRIST HAND FINGER ORTHOSIS, SHOULDER CAP DESIGN,	L3933		10
L3960 SHOULDER ELBOW WRIST HAND ORTHOSIS, ABDUCTION POSITIONING, AIRPLANE DESIGN, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT L3961 SHOULDER ELBOW WRIST HAND ORTHOSIS, SHOULDER CAP DESIGN, WITHOUT JOINTS, MAY INCLUDE SOFT INTERFACE, STRAPS, CUSTOM FABRICATED, INCLUDES FITTING AND ADJUSTMENT L3962 SHOULDER ELBOW WRIST HAND ORTHOSIS, ABDUCTION POSITIONING, ERB'S PALSEY DESIGN, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT L3967 SHOULDER ELBOW WRIST HAND ORTHOSIS, ABDUCTION POSITIONING (AIRPLANE DESIGN), THORACIC COMPONENT AND SUPPORT BAR, WITHOUT JOINTS, MAY INCLUDE SOFT INTERFACE, STRAPS, CUSTOM FABRICATED, INCLUDES FITTING AND ADJUSTMENT L3971 SHOULDER ELBOW WRIST HAND ORTHOSIS, SHOULDER CAP DESIGN, INCLUDES ONE OR MORE NONTORSION JOINTS, ELASTIC BANDS, TURNBUCKLES, MAY INCLUDE SOFT INTERFACE, STRAPS, CUSTOM FABRICATED, INCLUDES FITTING AND ADJUSTMENT L3973 SHOULDER ELBOW WRIST HAND ORTHOSIS, ABDUCTION POSITIONING (AIRPLANE DESIGN), THORACIC COMPONENT AND SUPPORT BAR, INCLUDES ONE OR MORE NONTORSION JOINTS, ELASTIC BANDS, TURNBUCKLES, MAY INCLUDE SOFT INTERFACE, STRAPS, CUSTOM FABRICATED, INCLUDES FITTING AND ADJUSTMENT L3975 SHOULDER ELBOW WRIST HAND FINGER ORTHOSIS, SHOULDER CAP DESIGN, WITHOUT JOINTS, MAY INCLUDE SOFT INTERFACE, STRAPS, CUSTOM FABRICATED, INCLUDES FITTING AND ADJUSTMENT L3976 SHOULDER ELBOW WRIST HAND FINGER ORTHOSIS, ABDUCTION POSITIONING (AIRPLANE DESIGN), THORACIC COMPONENT AND SUPPORT BAR, WITHOUT JOINTS, MAY INCLUDE SOFT INTERFACE, STRAPS, CUSTOM FABRICATED, INCLUDES FITTING AND ADJUSTMENT L3977 SHOULDER ELBOW WRIST HAND FINGER ORTHOSIS, SHOULDER CAP DESIGN, AND ADJUSTMENT L3977 SHOULDER ELBOW WRIST HAND FINGER ORTHOSIS, SHOULDER CAP DESIGN, AND ADJUSTMENT	L3935		10
L3961 SHOULDER ELBOW WRIST HAND ORTHOSIS, SHOULDER CAP DESIGN, WITHOUT JOINTS, MAY INCLUDE SOFT INTERFACE, STRAPS, CUSTOM FABRICATED, INCLUDES FITTING AND ADJUSTMENT L3962 SHOULDER ELBOW WRIST HAND ORTHOSIS, ABDUCTION POSITIONING, ERB'S PALSEY DESIGN, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT L3967 SHOULDER ELBOW WRIST HAND ORTHOSIS, ABDUCTION POSITIONING (AIRPLANE DESIGN), THORACIC COMPONENT AND SUPPORT BAR, WITHOUT JOINTS, MAY INCLUDE SOFT INTERFACE, STRAPS, CUSTOM FABRICATED, INCLUDES FITTING AND ADJUSTMENT L3971 SHOULDER ELBOW WRIST HAND ORTHOSIS, SHOULDER CAP DESIGN, INCLUDES ONE OR MORE NONTORSION JOINTS, ELASTIC BANDS, TURNBUCKLES, MAY INCLUDE SOFT INTERFACE, STRAPS, CUSTOM FABRICATED, INCLUDES FITTING AND ADJUSTMENT L3973 SHOULDER ELBOW WRIST HAND ORTHOSIS, ABDUCTION POSITIONING (AIRPLANE DESIGN), THORACIC COMPONENT AND SUPPORT BAR, INCLUDES ONE OR MORE NONTORSION JOINTS, ELASTIC BANDS, TURNBUCKLES, MAY INCLUDE SOFT INTERFACE, STRAPS, CUSTOM FABRICATED, INCLUDES FITTING AND ADJUSTMENT L3975 SHOULDER ELBOW WRIST HAND FINGER ORTHOSIS, SHOULDER CAP DESIGN, WITHOUT JOINTS, MAY INCLUDE SOFT INTERFACE, STRAPS, CUSTOM FABRICATED, INCLUDES FITTING AND ADJUSTMENT L3976 SHOULDER ELBOW WRIST HAND FINGER ORTHOSIS, ABDUCTION POSITIONING (AIRPLANE DESIGN), THORACIC COMPONENT AND SUPPORT BAR, WITHOUT JOINTS, MAY INCLUDE SOFT INTERFACE, STRAPS, CUSTOM FABRICATED, INCLUDES FITTING AND ADJUSTMENT L3976 SHOULDER ELBOW WRIST HAND FINGER ORTHOSIS, ABDUCTION POSITIONING (AIRPLANE DESIGN), THORACIC COMPONENT AND SUPPORT BAR, WITHOUT JOINTS, MAY INCLUDE SOFT INTERFACE, STRAPS, CUSTOM FABRICATED, INCLUDES FITTING AND ADJUSTMENT L3977 SHOULDER ELBOW WRIST HAND FINGER ORTHOSIS, SHOULDER CAP DESIGN, 2 SHOULDER ELBOW WRIST HAND FINGER ORTHOSIS, SHOULDER CAP DESIGN, 2 SHOULDER ELBOW WRIST HAND FINGER ORTHOSIS, SHOULDER CAP DESIGN, 3 SHOULDER ELBOW WRIST HAND FINGER ORTHOSIS, SHOULDER CAP DESIGN, 2 SHOULDER ELBOW WRIST HAND FINGER ORTHOSIS, SHOULDER CAP DESIGN,	L3956	ADDITION OF JOINT TO UPPER EXTREMITY ORTHOSIS, ANY MATERIAL; PER JOINT	4
JOINTS, MAY INCLUDE SOFT INTERFACE, STRAPS, CUSTOM FABRICATED, INCLUDES FITTING AND ADJUSTMENT L3962 SHOULDER ELBOW WRIST HAND ORTHOSIS, ABDUCTION POSITIONING, ERB'S PALSEY DESIGN, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT L3967 SHOULDER ELBOW WRIST HAND ORTHOSIS, ABDUCTION POSITIONING (AIRPLANE DESIGN), THORACIC COMPONENT AND SUPPORT BAR, WITHOUT JOINTS, MAY INCLUDE SOFT INTERFACE, STRAPS, CUSTOM FABRICATED, INCLUDES FITTING AND ADJUSTMENT L3971 SHOULDER ELBOW WRIST HAND ORTHOSIS, SHOULDER CAP DESIGN, INCLUDES ONE OR MORE NONTORSION JOINTS, ELASTIC BANDS, TURNBUCKLES, MAY INCLUDE SOFT INTERFACE, STRAPS, CUSTOM FABRICATED, INCLUDES FITTING AND ADJUSTMENT L3973 SHOULDER ELBOW WRIST HAND ORTHOSIS, ABDUCTION POSITIONING (AIRPLANE DESIGN), THORACIC COMPONENT AND SUPPORT BAR, INCLUDES ONE OR MORE NONTORSION JOINTS, ELASTIC BANDS, TURNBUCKLES, MAY INCLUDE SOFT INTERFACE, STRAPS, CUSTOM FABRICATED, INCLUDES FITTING AND ADJUSTMENT L3975 SHOULDER ELBOW WRIST HAND FINGER ORTHOSIS, SHOULDER CAP DESIGN, WITHOUT JOINTS, MAY INCLUDE SOFT INTERFACE, STRAPS, CUSTOM FABRICATED, INCLUDES FITTING AND ADJUSTMENT L3976 SHOULDER ELBOW WRIST HAND FINGER ORTHOSIS, ABDUCTION POSITIONING (AIRPLANE DESIGN), THORACIC COMPONENT AND SUPPORT BAR, WITHOUT JOINTS, MAY INCLUDE SOFT INTERFACE, STRAPS, CUSTOM FABRICATED, INCLUDES FITTING AND ADJUSTMENT L3977 SHOULDER ELBOW WRIST HAND FINGER ORTHOSIS, SHOULDER CAP DESIGN, 2 SHOULDER ELBOW WRIST HAND FINGER ORTHOSIS, SHOULDER CAP DESIGN, 2 SHOULDER ELBOW WRIST HAND FINGER ORTHOSIS, SHOULDER CAP DESIGN, 2 SHOULDER ELBOW WRIST HAND FINGER ORTHOSIS, SHOULDER CAP DESIGN, 2 SHOULDER ELBOW WRIST HAND FINGER ORTHOSIS, SHOULDER CAP DESIGN, 2 SHOULDER ELBOW WRIST HAND FINGER ORTHOSIS, SHOULDER CAP DESIGN, 2 SHOULDER ELBOW WRIST HAND FINGER ORTHOSIS, SHOULDER CAP DESIGN,	L3960		1
PALSEY DESIGN, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT L3967 SHOULDER ELBOW WRIST HAND ORTHOSIS, ABDUCTION POSITIONING (AIRPLANE DESIGN), THORACIC COMPONENT AND SUPPORT BAR, WITHOUT JOINTS, MAY INCLUDE SOFT INTERFACE, STRAPS, CUSTOM FABRICATED, INCLUDES FITTING AND ADJUSTMENT L3971 SHOULDER ELBOW WRIST HAND ORTHOSIS, SHOULDER CAP DESIGN, INCLUDES ONE OR MORE NONTORSION JOINTS, ELASTIC BANDS, TURNBUCKLES, MAY INCLUDE SOFT INTERFACE, STRAPS, CUSTOM FABRICATED, INCLUDES FITTING AND ADJUSTMENT L3973 SHOULDER ELBOW WRIST HAND ORTHOSIS, ABDUCTION POSITIONING (AIRPLANE DESIGN), THORACIC COMPONENT AND SUPPORT BAR, INCLUDES ONE OR MORE NONTORSION JOINTS, ELASTIC BANDS, TURNBUCKLES, MAY INCLUDE SOFT INTERFACE, STRAPS, CUSTOM FABRICATED, INCLUDES FITTING AND ADJUSTMENT L3975 SHOULDER ELBOW WRIST HAND FINGER ORTHOSIS, SHOULDER CAP DESIGN, WITHOUT JOINTS, MAY INCLUDE SOFT INTERFACE, STRAPS, CUSTOM FABRICATED, INCLUDES FITTING AND ADJUSTMENT L3976 SHOULDER ELBOW WRIST HAND FINGER ORTHOSIS, ABDUCTION POSITIONING (AIRPLANE DESIGN), THORACIC COMPONENT AND SUPPORT BAR, WITHOUT JOINTS, MAY INCLUDE SOFT INTERFACE, STRAPS, CUSTOM FABRICATED, INCLUDES FITTING AND ADJUSTMENT L3977 SHOULDER ELBOW WRIST HAND FINGER ORTHOSIS, SHOULDER CAP DESIGN, 2	L3961	JOINTS, MAY INCLUDE SOFT INTERFACE, STRAPS, CUSTOM FABRICATED, INCLUDES	2
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OR MORE NONTORSION JOINTS, ELASTIC BANDS, TURNBUCKLES, MAY INCLUDE SOFT INTERFACE, STRAPS, CUSTOM FABRICATED, INCLUDES FITTING AND ADJUSTMENT L3973 SHOULDER ELBOW WRIST HAND ORTHOSIS, ABDUCTION POSITIONING (AIRPLANE DESIGN), THORACIC COMPONENT AND SUPPORT BAR, INCLUDES ONE OR MORE NONTORSION JOINTS, ELASTIC BANDS, TURNBUCKLES, MAY INCLUDE SOFT INTERFACE, STRAPS, CUSTOM FABRICATED, INCLUDES FITTING AND ADJUSTMENT L3975 SHOULDER ELBOW WRIST HAND FINGER ORTHOSIS, SHOULDER CAP DESIGN, WITHOUT JOINTS, MAY INCLUDE SOFT INTERFACE, STRAPS, CUSTOM FABRICATED, INCLUDES FITTING AND ADJUSTMENT L3976 SHOULDER ELBOW WRIST HAND FINGER ORTHOSIS, ABDUCTION POSITIONING (AIRPLANE DESIGN), THORACIC COMPONENT AND SUPPORT BAR, WITHOUT JOINTS, MAY INCLUDE SOFT INTERFACE, STRAPS, CUSTOM FABRICATED, INCLUDES FITTING AND ADJUSTMENT L3977 SHOULDER ELBOW WRIST HAND FINGER ORTHOSIS, SHOULDER CAP DESIGN, 2	L3967	DESIGN), THORACIC COMPONENT AND SUPPORT BAR, WITHOUT JOINTS, MAY INCLUDE SOFT INTERFACE, STRAPS, CUSTOM FABRICATED, INCLUDES FITTING AND	2
DESIGN), THORACIC COMPONENT AND SUPPORT BAR, INCLUDES ONE OR MORE NONTORSION JOINTS, ELASTIC BANDS, TURNBUCKLES, MAY INCLUDE SOFT INTERFACE, STRAPS, CUSTOM FABRICATED, INCLUDES FITTING AND ADJUSTMENT L3975 SHOULDER ELBOW WRIST HAND FINGER ORTHOSIS, SHOULDER CAP DESIGN, WITHOUT JOINTS, MAY INCLUDE SOFT INTERFACE, STRAPS, CUSTOM FABRICATED, INCLUDES FITTING AND ADJUSTMENT L3976 SHOULDER ELBOW WRIST HAND FINGER ORTHOSIS, ABDUCTION POSITIONING (AIRPLANE DESIGN), THORACIC COMPONENT AND SUPPORT BAR, WITHOUT JOINTS, MAY INCLUDE SOFT INTERFACE, STRAPS, CUSTOM FABRICATED, INCLUDES FITTING AND ADJUSTMENT L3977 SHOULDER ELBOW WRIST HAND FINGER ORTHOSIS, SHOULDER CAP DESIGN, 2	L3971	OR MORE NONTORSION JOINTS, ELASTIC BANDS, TURNBUCKLES, MAY INCLUDE SOFT INTERFACE, STRAPS, CUSTOM FABRICATED, INCLUDES FITTING AND	2
WITHOUT JOINTS, MAY INCLUDE SOFT INTERFACE, STRAPS, CUSTOM FABRICATED, INCLUDES FITTING AND ADJUSTMENT SHOULDER ELBOW WRIST HAND FINGER ORTHOSIS, ABDUCTION POSITIONING (AIRPLANE DESIGN), THORACIC COMPONENT AND SUPPORT BAR, WITHOUT JOINTS, MAY INCLUDE SOFT INTERFACE, STRAPS, CUSTOM FABRICATED, INCLUDES FITTING AND ADJUSTMENT SHOULDER ELBOW WRIST HAND FINGER ORTHOSIS, SHOULDER CAP DESIGN, 2	L3973	DESIGN), THORACIC COMPONENT AND SUPPORT BAR, INCLUDES ONE OR MORE NONTORSION JOINTS, ELASTIC BANDS, TURNBUCKLES, MAY INCLUDE SOFT	2
(AIRPLANE DESIGN), THORACIC COMPONENT AND SUPPORT BAR, WITHOUT JOINTS, MAY INCLUDE SOFT INTERFACE, STRAPS, CUSTOM FABRICATED, INCLUDES FITTING AND ADJUSTMENT L3977 SHOULDER ELBOW WRIST HAND FINGER ORTHOSIS, SHOULDER CAP DESIGN, 2	L3975	WITHOUT JOINTS, MAY INCLUDE SOFT INTERFACE, STRAPS, CUSTOM FABRICATED,	2
	L3976	(AIRPLANE DESIGN), THORACIC COMPONENT AND SUPPORT BAR, WITHOUT JOINTS, MAY INCLUDE SOFT INTERFACE, STRAPS, CUSTOM FABRICATED, INCLUDES FITTING	2
	L3977		2

	MAY INCLUDE SOFT INTERFACE, STRAPS, CUSTOM FABRICATED, INCLUDES FITTING AND ADJUSTMENT	
L3978	SHOULDER ELBOW WRIST HAND FINGER ORTHOSIS, ABDUCTION POSITIONING (AIRPLANE DESIGN), THORACIC COMPONENT AND SUPPORT BAR, INCLUDES ONE OR MORE NONTORSION JOINTS, ELASTIC BANDS, TURNBUCKLES, MAY INCLUDE SOFT INTERFACE, STRAPS, CUSTOM FABRICATED, INCLUDES FITTING AND ADJUSTMENT	2
L3980	UPPER EXTREMITY FRACTURE ORTHOSIS, HUMERAL, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	2
L3982	UPPER EXTREMITY FRACTURE ORTHOSIS, RADIUS/ULNAR, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	1
L3984	UPPER EXTREMITY FRACTURE ORTHOSIS, WRIST, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	1
L3999	UPPER LIMB ORTHOSIS, NOT OTHERWISE SPECIFIED	2
L4000	REPLACE GIRDLE FOR SPINAL ORTHOSIS (CTLSO OR SO)	1
L4002	REPLACEMENT STRAP, ANY ORTHOSIS, INCLUDES ALL COMPONENTS, ANY LENGTH, ANY TYPE	8
L4010	REPLACE TRILATERAL SOCKET BRIM	1
L4020	REPLACE QUADRILATERAL SOCKET BRIM, MOLDED TO PATIENT MODEL	1
L4030	REPLACE QUADRILATERAL SOCKET BRIM, CUSTOM FITTED	1
L4040	REPLACE MOLDED THIGH LACER, FOR CUSTOM FABRICATED ORTHOSIS ONLY	1
L4045	REPLACE NON-MOLDED THIGH LACER, FOR CUSTOM FABRICATED ORTHOSIS ONLY	2
L4050	REPLACE MOLDED CALF LACER, FOR CUSTOM FABRICATED ORTHOSIS ONLY	1
L4055	REPLACE NON-MOLDED CALF LACER, FOR CUSTOM FABRICATED ORTHOSIS ONLY	2
L4060	REPLACE HIGH ROLL CUFF	1
L4070	REPLACE PROXIMAL AND DISTAL UPRIGHT FOR KAFO	4
L4080	REPLACE METAL BANDS KAFO, PROXIMAL THIGH	1
L4090	REPLACE METAL BANDS KAFO-AFO, CALF OR DISTAL THIGH	1
L4100	REPLACE LEATHER CUFF KAFO, PROXIMAL THIGH	2
L4110	REPLACE LEATHER CUFF KAFO-AFO, CALF OR DISTAL THIGH	2
L4130	REPLACE PRETIBIAL SHELL	1
L4205	REPAIR OF ORTHOTIC DEVICE, LABOR COMPONENT, PER 15 MINUTES	40
L4210	REPAIR OF ORTHOTIC DEVICE, REPAIR OR REPLACE MINOR PARTS	4
L4350	ANKLE CONTROL ORTHOSIS, STIRRUP STYLE, RIGID, INCLUDES ANY TYPE INTERFACE (E.G., PNEUMATIC, GEL), PREFABRICATED, OFF-THE-SHELF	2
L4370	PNEUMATIC FULL LEG SPLINT, PREFABRICATED, OFF-THE-SHELF	2
L4386	WALKING BOOT, NON-PNEUMATIC, WITH OR WITHOUT JOINTS, WITH OR WITHOUT INTERFACE MATERIAL, PREFABRICATED ITEM THAT HAS BEEN TRIMMED, BENT,	2

	MOLDED, ASSEMBLED, OR OTHERWISE CUSTOMIZED TO FIT A SPECIFIC PATIENT BY AN INDIVIDUAL WITH EXPERTISE	
L4392	REPLACEMENT, SOFT INTERFACE MATERIAL, STATIC AFO	2
L4394	REPLACE SOFT INTERFACE MATERIAL, FOOT DROP SPLINT	2
L4396	STATIC OR DYNAMIC ANKLE FOOT ORTHOSIS, INCLUDING SOFT INTERFACE MATERIAL, ADJUSTABLE FOR FIT, FOR POSITIONING, MAY BE USED FOR MINIMAL AMBULATION, PREFABRICATED ITEM THAT HAS BEEN TRIMMED, BENT, MOLDED, ASSEMBLED, OR OTHERWISE CUSTOMIZED TO FIT A SPECIFIC PATIENT BY AN INDIVIDUAL WITH EXPERTISE	2
L4398	FOOT DROP SPLINT, RECUMBENT POSITIONING DEVICE, PREFABRICATED, OFF-THE-SHELF	9999
L4631	ANKLE FOOT ORTHOSIS, WALKING BOOT TYPE, VARUS/VALGUS CORRECTION, ROCKER BOTTOM, ANTERIOR TIBIAL SHELL, SOFT INTERFACE, CUSTOM ARCH SUPPORT, PLASTIC OR OTHER MATERIAL, INCLUDES STRAPS AND CLOSURES, CUSTOM FABRICATED	2
L5000	PARTIAL FOOT, SHOE INSERT WITH LONGITUDINAL ARCH, TOE FILLER	2
L5010	PARTIAL FOOT, MOLDED SOCKET, ANKLE HEIGHT, WITH TOE FILLER	2
L5020	PARTIAL FOOT, MOLDED SOCKET, TIBIAL TUBERCLE HEIGHT, WITH TOE FILLER	2
L5050	ANKLE, SYMES, MOLDED SOCKET, SACH FOOT	2
L5060	ANKLE, SYMES, METAL FRAME, MOLDED LEATHER SOCKET, ARTICULATED ANKLE/FOOT	2
L5100	BELOW KNEE, MOLDED SOCKET, SHIN, SACH FOOT	2
L5105	BELOW KNEE, PLASTIC SOCKET, JOINTS AND THIGH LACER, SACH FOOT	2
L5150	KNEE DISARTICULATION (OR THROUGH KNEE), MOLDED SOCKET, EXTERNAL KNEE JOINTS, SHIN, SACH FOOT	2
L5160	KNEE DISARTICULATION (OR THROUGH KNEE), MOLDED SOCKET, BENT KNEE CONFIGURATION, EXTERNAL KNEE JOINTS, SHIN, SACH FOOT	2
L5200	ABOVE KNEE, MOLDED SOCKET, SINGLE AXIS CONSTANT FRICTION KNEE, SHIN, SACH FOOT	2
L5210	ABOVE KNEE, SHORT PROSTHESIS, NO KNEE JOINT ('STUBBIES'), WITH FOOT BLOCKS, NO ANKLE JOINTS, EACH	2
L5220	ABOVE KNEE, SHORT PROSTHESIS, NO KNEE JOINT ('STUBBIES'), WITH ARTICULATED ANKLE/FOOT, DYNAMICALLY ALIGNED, EACH	2
L5230	ABOVE KNEE, FOR PROXIMAL FEMORAL FOCAL DEFICIENCY, CONSTANT FRICTION KNEE, SHIN, SACH FOOT	2
L5250	HIP DISARTICULATION, CANADIAN TYPE; MOLDED SOCKET, HIP JOINT, SINGLE AXIS CONSTANT FRICTION KNEE, SHIN, SACH FOOT	2
L5270	HIP DISARTICULATION, TILT TABLE TYPE; MOLDED SOCKET, LOCKING HIP JOINT, SINGLE AXIS CONSTANT FRICTION KNEE, SHIN, SACH FOOT	1
L5280	HEMIPELVECTOMY, CANADIAN TYPE; MOLDED SOCKET, HIP JOINT, SINGLE AXIS CONSTANT FRICTION KNEE, SHIN, SACH FOOT	2

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L5301	BELOW KNEE, MOLDED SOCKET, SHIN, SACH FOOT, ENDOSKELETAL SYSTEM	2
L5321	ABOVE KNEE, MOLDED SOCKET, OPEN END, SACH FOOT, ENDOSKELETAL SYSTEM, SINGLE AXIS KNEE	2
L5331	HIP DISARTICULATION, CANADIAN TYPE, MOLDED SOCKET, ENDOSKELETAL SYSTEM, HIP JOINT, SINGLE AXIS KNEE, SACH FOOT	1
L5341	HEMIPELVECTOMY, CANADIAN TYPE, MOLDED SOCKET, ENDOSKELETAL SYSTEM, HIP JOINT, SINGLE AXIS KNEE, SACH FOOT	1
L5400	IMMEDIATE POST SURGICAL OR EARLY FITTING, APPLICATION OF INITIAL RIGID DRESSING, INCLUDING FITTING, ALIGNMENT, SUSPENSION, AND ONE CAST CHANGE, BELOW KNEE	2
L5410	IMMEDIATE POST SURGICAL OR EARLY FITTING, APPLICATION OF INITIAL RIGID DRESSING, INCLUDING FITTING, ALIGNMENT AND SUSPENSION, BELOW KNEE, EACH ADDITIONAL CAST CHANGE AND REALIGNMENT	2
L5420	IMMEDIATE POST SURGICAL OR EARLY FITTING, APPLICATION OF INITIAL RIGID DRESSING, INCLUDING FITTING, ALIGNMENT AND SUSPENSION AND ONE CAST CHANGE 'AK' OR KNEE DISARTICULATION	2
L5430	IMMEDIATE POST SURGICAL OR EARLY FITTING, APPLICATION OF INITIAL RIGID DRESSING, INCL. FITTING, ALIGNMENT AND SUPENSION, 'AK' OR KNEE DISARTICULATION, EACH ADDITIONAL CAST CHANGE AND REALIGNMENT	2
L5450	IMMEDIATE POST SURGICAL OR EARLY FITTING, APPLICATION OF NON-WEIGHT BEARING RIGID DRESSING, BELOW KNEE	2
L5460	IMMEDIATE POST SURGICAL OR EARLY FITTING, APPLICATION OF NON-WEIGHT BEARING RIGID DRESSING, ABOVE KNEE	2
L5500	INITIAL, BELOW KNEE 'PTB' TYPE SOCKET, NON-ALIGNABLE SYSTEM, PYLON, NO COVER, SACH FOOT, PLASTER SOCKET, DIRECT FORMED	2
L5505	INITIAL, ABOVE KNEE - KNEE DISARTICULATION, ISCHIAL LEVEL SOCKET, NON-ALIGNABLE SYSTEM, PYLON, NO COVER, SACH FOOT, PLASTER SOCKET, DIRECT FORMED	2
L5510	PREPARATORY, BELOW KNEE 'PTB' TYPE SOCKET, NON-ALIGNABLE SYSTEM, PYLON, NO COVER, SACH FOOT, PLASTER SOCKET, MOLDED TO MODEL	2
L5520	PREPARATORY, BELOW KNEE 'PTB' TYPE SOCKET, NON-ALIGNABLE SYSTEM, PYLON, NO COVER, SACH FOOT, THERMOPLASTIC OR EQUAL, DIRECT FORMED	2
L5530	PREPARATORY, BELOW KNEE 'PTB' TYPE SOCKET, NON-ALIGNABLE SYSTEM, PYLON, NO COVER, SACH FOOT, THERMOPLASTIC OR EQUAL, MOLDED TO MODEL	2
L5535	PREPARATORY, BELOW KNEE 'PTB' TYPE SOCKET, NON-ALIGNABLE SYSTEM, NO COVER, SACH FOOT, PREFABRICATED, ADJUSTABLE OPEN END SOCKET	2
L5540	PREPARATORY, BELOW KNEE 'PTB' TYPE SOCKET, NON-ALIGNABLE SYSTEM, PYLON, NO COVER, SACH FOOT, LAMINATED SOCKET, MOLDED TO MODEL	2
L5560	PREPARATORY, ABOVE KNEE- KNEE DISARTICULATION, ISCHIAL LEVEL SOCKET, NON-ALIGNABLE SYSTEM, PYLON, NO COVER, SACH FOOT, PLASTER SOCKET, MOLDED TO MODEL	2

L5570	PREPARATORY, ABOVE KNEE - KNEE DISARTICULATION, ISCHIAL LEVEL SOCKET, NON-ALIGNABLE SYSTEM, PYLON, NO COVER, SACH FOOT, THERMOPLASTIC OR EQUAL, DIRECT FORMED	2
L5580	PREPARATORY, ABOVE KNEE - KNEE DISARTICULATION ISCHIAL LEVEL SOCKET, NON-ALIGNABLE SYSTEM, PYLON, NO COVER, SACH FOOT, THERMOPLASTIC OR EQUAL, MOLDED TO MODEL	2
L5585	PREPARATORY, ABOVE KNEE - KNEE DISARTICULATION, ISCHIAL LEVEL SOCKET, NON-ALIGNABLE SYSTEM, PYLON, NO COVER, SACH FOOT, PREFABRICATED ADJUSTABLE OPEN END SOCKET	2
L5590	PREPARATORY, ABOVE KNEE - KNEE DISARTICULATION ISCHIAL LEVEL SOCKET, NON-ALIGNABLE SYSTEM, PYLON NO COVER, SACH FOOT, LAMINATED SOCKET, MOLDED TO MODEL	2
L5595	PREPARATORY, HIP DISARTICULATION-HEMIPELVECTOMY, PYLON, NO COVER, SACH FOOT, THERMOPLASTIC OR EQUAL, MOLDED TO PATIENT MODEL	2
L5600	PREPARATORY, HIP DISARTICULATION-HEMIPELVECTOMY, PYLON, NO COVER, SACH FOOT, LAMINATED SOCKET, MOLDED TO PATIENT MODEL	2
L5610	ADDITION TO LOWER EXTREMITY, ENDOSKELETAL SYSTEM, ABOVE KNEE, HYDRACADENCE SYSTEM	2
L5611	ADDITION TO LOWER EXTREMITY, ENDOSKELETAL SYSTEM, ABOVE KNEE - KNEE DISARTICULATION, 4 BAR LINKAGE, WITH FRICTION SWING PHASE CONTROL	2
L5613	ADDITION TO LOWER EXTREMITY, ENDOSKELETAL SYSTEM, ABOVE KNEE-KNEE DISARTICULATION, 4 BAR LINKAGE, WITH HYDRAULIC SWING PHASE CONTROL	2
L5614	ADDITION TO LOWER EXTREMITY, EXOSKELETAL SYSTEM, ABOVE KNEE-KNEE DISARTICULATION, 4 BAR LINKAGE, WITH PNEUMATIC SWING PHASE CONTROL	2
L5616	ADDITION TO LOWER EXTREMITY, ENDOSKELETAL SYSTEM, ABOVE KNEE, UNIVERSAL MULTIPLEX SYSTEM, FRICTION SWING PHASE CONTROL	2
L5617	ADDITION TO LOWER EXTREMITY, QUICK CHANGE SELF-ALIGNING UNIT, ABOVE KNEE OR BELOW KNEE, EACH	2
L5618	ADDITION TO LOWER EXTREMITY, TEST SOCKET, SYMES	2
L5620	ADDITION TO LOWER EXTREMITY, TEST SOCKET, BELOW KNEE	2
L5622	ADDITION TO LOWER EXTREMITY, TEST SOCKET, KNEE DISARTICULATION	2
L5624	ADDITION TO LOWER EXTREMITY, TEST SOCKET, ABOVE KNEE	2
L5626	ADDITION TO LOWER EXTREMITY, TEST SOCKET, HIP DISARTICULATION	2
L5628	ADDITION TO LOWER EXTREMITY, TEST SOCKET, HEMIPELVECTOMY	2
L5629	ADDITION TO LOWER EXTREMITY, BELOW KNEE, ACRYLIC SOCKET	2
L5630	ADDITION TO LOWER EXTREMITY, SYMES TYPE, EXPANDABLE WALL SOCKET	2
L5631	ADDITION TO LOWER EXTREMITY, ABOVE KNEE OR KNEE DISARTICULATION, ACRYLIC SOCKET	2
L5632	ADDITION TO LOWER EXTREMITY, SYMES TYPE, 'PTB' BRIM DESIGN SOCKET	2

L5634	ADDITION TO LOWER EXTREMITY, SYMES TYPE, POSTERIOR OPENING (CANADIAN) SOCKET	2
L5636	ADDITION TO LOWER EXTREMITY, SYMES TYPE, MEDIAL OPENING SOCKET	2
L5637	ADDITION TO LOWER EXTREMITY, BELOW KNEE, TOTAL CONTACT	2
L5638	ADDITION TO LOWER EXTREMITY, BELOW KNEE, LEATHER SOCKET	2
L5639	ADDITION TO LOWER EXTREMITY, BELOW KNEE, WOOD SOCKET	2
L5640	ADDITION TO LOWER EXTREMITY, KNEE DISARTICULATION, LEATHER SOCKET	2
L5642	ADDITION TO LOWER EXTREMITY, ABOVE KNEE, LEATHER SOCKET	2
L5643	ADDITION TO LOWER EXTREMITY, HIP DISARTICULATION, FLEXIBLE INNER SOCKET, EXTERNAL FRAME	2
L5644	ADDITION TO LOWER EXTREMITY, ABOVE KNEE, WOOD SOCKET	2
L5645	ADDITION TO LOWER EXTREMITY, BELOW KNEE, FLEXIBLE INNER SOCKET, EXTERNAL FRAME	2
L5646	ADDITION TO LOWER EXTREMITY, BELOW KNEE, AIR, FLUID, GEL OR EQUAL, CUSHION SOCKET	2
L5647	ADDITION TO LOWER EXTREMITY, BELOW KNEE SUCTION SOCKET	2
L5648	ADDITION TO LOWER EXTREMITY, ABOVE KNEE, AIR, FLUID, GEL OR EQUAL, CUSHION SOCKET	2
L5649	ADDITION TO LOWER EXTREMITY, ISCHIAL CONTAINMENT/NARROW M-L SOCKET	2
L5650	ADDITIONS TO LOWER EXTREMITY, TOTAL CONTACT, ABOVE KNEE OR KNEE DISARTICULATION SOCKET	2
L5651	ADDITION TO LOWER EXTREMITY, ABOVE KNEE, FLEXIBLE INNER SOCKET, EXTERNAL FRAME	2
L5652	ADDITION TO LOWER EXTREMITY, SUCTION SUSPENSION, ABOVE KNEE OR KNEE DISARTICULATION SOCKET	2
L5653	ADDITION TO LOWER EXTREMITY, KNEE DISARTICULATION, EXPANDABLE WALL SOCKET	2
L5654	ADDITION TO LOWER EXTREMITY, SOCKET INSERT, SYMES, (KEMBLO, PELITE, ALIPLAST, PLASTAZOTE OR EQUAL)	2
L5655	ADDITION TO LOWER EXTREMITY, SOCKET INSERT, BELOW KNEE (KEMBLO, PELITE, ALIPLAST, PLASTAZOTE OR EQUAL)	2
L5656	ADDITION TO LOWER EXTREMITY, SOCKET INSERT, KNEE DISARTICULATION (KEMBLO, PELITE, ALIPLAST, PLASTAZOTE OR EQUAL)	2
L5658	ADDITION TO LOWER EXTREMITY, SOCKET INSERT, ABOVE KNEE (KEMBLO, PELITE, ALIPLAST, PLASTAZOTE OR EQUAL)	2
L5661	ADDITION TO LOWER EXTREMITY, SOCKET INSERT, MULTI-DUROMETER SYMES	2
L5665	ADDITION TO LOWER EXTREMITY, SOCKET INSERT, MULTI-DUROMETER, BELOW KNEE	2
L5666	ADDITION TO LOWER EXTREMITY, BELOW KNEE, CUFF SUSPENSION	2

L5668	ADDITION TO LOWER EXTREMITY, BELOW KNEE, MOLDED DISTAL CUSHION	2
L5670	ADDITION TO LOWER EXTREMITY, BELOW KNEE, MOLDED SUPRACONDYLAR SUSPENSION ('PTS' OR SIMILAR)	2
L5671	ADDITION TO LOWER EXTREMITY, BELOW KNEE / ABOVE KNEE SUSPENSION LOCKING MECHANISM (SHUTTLE, LANYARD OR EQUAL), EXCLUDES SOCKET INSERT	2
L5672	ADDITION TO LOWER EXTREMITY, BELOW KNEE, REMOVABLE MEDIAL BRIM SUSPENSION	2
L5673	ADDITION TO LOWER EXTREMITY, BELOW KNEE/ABOVE KNEE, CUSTOM FABRICATED FROM EXISTING MOLD OR PREFABRICATED, SOCKET INSERT, SILICONE GEL, ELASTOMERIC OR EQUAL, FOR USE WITH LOCKING MECHANISM	2
L5676	ADDITIONS TO LOWER EXTREMITY, BELOW KNEE, KNEE JOINTS, SINGLE AXIS, PAIR	2
L5677	ADDITIONS TO LOWER EXTREMITY, BELOW KNEE, KNEE JOINTS, POLYCENTRIC, PAIR	2
L5678	ADDITIONS TO LOWER EXTREMITY, BELOW KNEE, JOINT COVERS, PAIR	2
L5679	ADDITION TO LOWER EXTREMITY, BELOW KNEE/ABOVE KNEE, CUSTOM FABRICATED FROM EXISTING MOLD OR PREFABRICATED, SOCKET INSERT, SILICONE GEL, ELASTOMERIC OR EQUAL, NOT FOR USE WITH LOCKING MECHANISM	2
L5680	ADDITION TO LOWER EXTREMITY, BELOW KNEE, THIGH LACER, NONMOLDED	2
L5681	ADDITION TO LOWER EXTREMITY, BELOW KNEE/ABOVE KNEE, CUSTOM FABRICATED SOCKET INSERT FOR CONGENITAL OR ATYPICAL TRAUMATIC AMPUTEE, SILICONE GEL, ELASTOMERIC OR EQUAL, FOR USE WITH OR WITHOUT LOCKING MECHANISM, INITIAL ONLY (FOR OTHER THAN INITIAL, USE CODE L5673 OR L5679)	2
L5682	ADDITION TO LOWER EXTREMITY, BELOW KNEE, THIGH LACER, GLUTEAL/ISCHIAL, MOLDED	2
L5683	ADDITION TO LOWER EXTREMITY, BELOW KNEE/ABOVE KNEE, CUSTOM FABRICATED SOCKET INSERT FOR OTHER THAN CONGENITAL OR ATYPICAL TRAUMATIC AMPUTEE, SILICONE GEL, ELASTOMERIC OR EQUAL, FOR USE WITH OR WITHOUT LOCKING MECHANISM, INITIAL ONLY (FOR OTHER THAN INITIAL, USE CODE L5673 OR L5679)	2
L5684	ADDITION TO LOWER EXTREMITY, BELOW KNEE, FORK STRAP	2
L5685	ADDITION TO LOWER EXTREMITY PROSTHESIS, BELOW KNEE, SUSPENSION/SEALING SLEEVE, WITH OR WITHOUT VALVE, ANY MATERIAL, EACH	2
L5686	ADDITION TO LOWER EXTREMITY, BELOW KNEE, BACK CHECK (EXTENSION CONTROL)	2
L5688	ADDITION TO LOWER EXTREMITY, BELOW KNEE, WAIST BELT, WEBBING	2
L5690	ADDITION TO LOWER EXTREMITY, BELOW KNEE, WAIST BELT, PADDED AND LINED	2
L5692	ADDITION TO LOWER EXTREMITY, ABOVE KNEE, PELVIC CONTROL BELT, LIGHT	2
L5694	ADDITION TO LOWER EXTREMITY, ABOVE KNEE, PELVIC CONTROL BELT, PADDED AND LINED	2
L5695	ADDITION TO LOWER EXTREMITY, ABOVE KNEE, PELVIC CONTROL, SLEEVE SUSPENSION, NEOPRENE OR EQUAL, EACH	2

L5696	ADDITION TO LOWER EXTREMITY, ABOVE KNEE OR KNEE DISARTICULATION, PELVIC JOINT	2
L5697	ADDITION TO LOWER EXTREMITY, ABOVE KNEE OR KNEE DISARTICULATION, PELVIC BAND	2
L5698	ADDITION TO LOWER EXTREMITY, ABOVE KNEE OR KNEE DISARTICULATION, SILESIAN BANDAGE	2
L5699	ALL LOWER EXTREMITY PROSTHESES, SHOULDER HARNESS	2
L5700	REPLACEMENT, SOCKET, BELOW KNEE, MOLDED TO PATIENT MODEL	2
L5701	REPLACEMENT, SOCKET, ABOVE KNEE/KNEE DISARTICULATION, INCLUDING ATTACHMENT PLATE, MOLDED TO PATIENT MODEL	2
L5702	REPLACEMENT, SOCKET, HIP DISARTICULATION, INCLUDING HIP JOINT, MOLDED TO PATIENT MODEL	2
L5703	ANKLE, SYMES, MOLDED TO PATIENT MODEL, SOCKET WITHOUT SOLID ANKLE CUSHION HEEL (SACH) FOOT, REPLACEMENT ONLY	2
L5704	CUSTOM SHAPED PROTECTIVE COVER, BELOW KNEE	2
L5705	CUSTOM SHAPED PROTECTIVE COVER, ABOVE KNEE	2
L5706	CUSTOM SHAPED PROTECTIVE COVER, KNEE DISARTICULATION	9999
L5707	CUSTOM SHAPED PROTECTIVE COVER, HIP DISARTICULATION	2
L5710	ADDITION, EXOSKELETAL KNEE-SHIN SYSTEM, SINGLE AXIS, MANUAL LOCK	2
L5711	ADDITIONS EXOSKELETAL KNEE-SHIN SYSTEM, SINGLE AXIS, MANUAL LOCK, ULTRA-LIGHT MATERIAL	2
L5712	ADDITION, EXOSKELETAL KNEE-SHIN SYSTEM, SINGLE AXIS, FRICTION SWING AND STANCE PHASE CONTROL (SAFETY KNEE)	2
L5714	ADDITION, EXOSKELETAL KNEE-SHIN SYSTEM, SINGLE AXIS, VARIABLE FRICTION SWING PHASE CONTROL	2
L5716	ADDITION, EXOSKELETAL KNEE-SHIN SYSTEM, POLYCENTRIC, MECHANICAL STANCE PHASE LOCK	2
L5718	ADDITION, EXOSKELETAL KNEE-SHIN SYSTEM, POLYCENTRIC, FRICTION SWING AND STANCE PHASE CONTROL	2
L5722	ADDITION, EXOSKELETAL KNEE-SHIN SYSTEM, SINGLE AXIS, PNEUMATIC SWING, FRICTION STANCE PHASE CONTROL	2
L5724	ADDITION, EXOSKELETAL KNEE-SHIN SYSTEM, SINGLE AXIS, FLUID SWING PHASE CONTROL	2
L5726	ADDITION, EXOSKELETAL KNEE-SHIN SYSTEM, SINGLE AXIS, EXTERNAL JOINTS FLUID SWING PHASE CONTROL	2
L5728	ADDITION, EXOSKELETAL KNEE-SHIN SYSTEM, SINGLE AXIS, FLUID SWING AND STANCE PHASE CONTROL	2
L5780	ADDITION, EXOSKELETAL KNEE-SHIN SYSTEM, SINGLE AXIS, PNEUMATIC/HYDRA PNEUMATIC SWING PHASE CONTROL	2

L5781	ADDITION TO LOWER LIMB PROSTHESIS, VACUUM PUMP, RESIDUAL LIMB VOLUME MANAGEMENT AND MOISTURE EVACUATION SYSTEM	2
L5782	ADDITION TO LOWER LIMB PROSTHESIS, VACUUM PUMP, RESIDUAL LIMB VOLUME MANAGEMENT AND MOISTURE EVACUATION SYSTEM, HEAVY DUTY	2
L5785	ADDITION, EXOSKELETAL SYSTEM, BELOW KNEE, ULTRA-LIGHT MATERIAL (TITANIUM, CARBON FIBER OR EQUAL)	2
L5790	ADDITION, EXOSKELETAL SYSTEM, ABOVE KNEE, ULTRA-LIGHT MATERIAL (TITANIUM, CARBON FIBER OR EQUAL)	2
L5795	ADDITION, EXOSKELETAL SYSTEM, HIP DISARTICULATION, ULTRA-LIGHT MATERIAL (TITANIUM, CARBON FIBER OR EQUAL)	2
L5810	ADDITION, ENDOSKELETAL KNEE-SHIN SYSTEM, SINGLE AXIS, MANUAL LOCK	2
L5811	ADDITION, ENDOSKELETAL KNEE-SHIN SYSTEM, SINGLE AXIS, MANUAL LOCK, ULTRA-LIGHT MATERIAL	2
L5812	ADDITION, ENDOSKELETAL KNEE-SHIN SYSTEM, SINGLE AXIS, FRICTION SWING AND STANCE PHASE CONTROL (SAFETY KNEE)	2
L5814	ADDITION, ENDOSKELETAL KNEE-SHIN SYSTEM, POLYCENTRIC, HYDRAULIC SWING PHASE CONTROL, MECHANICAL STANCE PHASE LOCK	2
L5816	ADDITION, ENDOSKELETAL KNEE-SHIN SYSTEM, POLYCENTRIC, MECHANICAL STANCE PHASE LOCK	2
L5818	ADDITION, ENDOSKELETAL KNEE-SHIN SYSTEM, POLYCENTRIC, FRICTION SWING, AND STANCE PHASE CONTROL	1
L5822	ADDITION, ENDOSKELETAL KNEE-SHIN SYSTEM, SINGLE AXIS, PNEUMATIC SWING, FRICTION STANCE PHASE CONTROL	2
L5824	ADDITION, ENDOSKELETAL KNEE-SHIN SYSTEM, SINGLE AXIS, FLUID SWING PHASE CONTROL	2
L5826	ADDITION, ENDOSKELETAL KNEE-SHIN SYSTEM, SINGLE AXIS, HYDRAULIC SWING PHASE CONTROL, WITH MINIATURE HIGH ACTIVITY FRAME	2
L5828	ADDITION, ENDOSKELETAL KNEE-SHIN SYSTEM, SINGLE AXIS, FLUID SWING AND STANCE PHASE CONTROL	2
L5830	ADDITION, ENDOSKELETAL KNEE-SHIN SYSTEM, SINGLE AXIS, PNEUMATIC/ SWING PHASE CONTROL	2
L5840	ADDITION, ENDOSKELETAL KNEE/SHIN SYSTEM, 4-BAR LINKAGE OR MULTIAXIAL, PNEUMATIC SWING PHASE CONTROL	2
L5845	ADDITION, ENDOSKELETAL, KNEE-SHIN SYSTEM, STANCE FLEXION FEATURE, ADJUSTABLE	2
L5848	ADDITION TO ENDOSKELETAL KNEE-SHIN SYSTEM, FLUID STANCE EXTENSION, DAMPENING FEATURE, WITH OR WITHOUT ADJUSTABILITY	2
L5850	ADDITION, ENDOSKELETAL SYSTEM, ABOVE KNEE OR HIP DISARTICULATION, KNEE EXTENSION ASSIST	2
L5855	ADDITION, ENDOSKELETAL SYSTEM, HIP DISARTICULATION, MECHANICAL HIP EXTENSION ASSIST	2

L5856	ADDITION TO LOWER EXTREMITY PROSTHESIS, ENDOSKELETAL KNEE-SHIN SYSTEM, MICROPROCESSOR CONTROL FEATURE, SWING AND STANCE PHASE, INCLUDES ELECTRONIC SENSOR(S), ANY TYPE	2
L5857	ADDITION TO LOWER EXTREMITY PROSTHESIS, ENDOSKELETAL KNEE-SHIN SYSTEM, MICROPROCESSOR CONTROL FEATURE, SWING PHASE ONLY, INCLUDES ELECTRONIC SENSOR(S), ANY TYPE	2
L5858	ADDITION TO LOWER EXTREMITY PROSTHESIS, ENDOSKELETAL KNEE SHIN SYSTEM, MICROPROCESSOR CONTROL FEATURE, STANCE PHASE ONLY, INCLUDES ELECTRONIC SENSOR(S), ANY TYPE	2
L5859	ADDITION TO LOWER EXTREMITY PROSTHESIS, ENDOSKELETAL KNEE-SHIN SYSTEM, POWERED AND PROGRAMMABLE FLEXION/EXTENSION ASSIST CONTROL, INCLUDES ANY TYPE MOTOR(S)	2
L5910	ADDITION, ENDOSKELETAL SYSTEM, BELOW KNEE, ALIGNABLE SYSTEM	2
L5920	ADDITION, ENDOSKELETAL SYSTEM, ABOVE KNEE OR HIP DISARTICULATION, ALIGNABLE SYSTEM	2
L5925	ADDITION, ENDOSKELETAL SYSTEM, ABOVE KNEE, KNEE DISARTICULATION OR HIP DISARTICULATION, MANUAL LOCK	2
L5930	ADDITION, ENDOSKELETAL SYSTEM, HIGH ACTIVITY KNEE CONTROL FRAME	2
L5940	ADDITION, ENDOSKELETAL SYSTEM, BELOW KNEE, ULTRA-LIGHT MATERIAL (TITANIUM, CARBON FIBER OR EQUAL)	2
L5950	ADDITION, ENDOSKELETAL SYSTEM, ABOVE KNEE, ULTRA-LIGHT MATERIAL (TITANIUM, CARBON FIBER OR EQUAL)	2
L5960	ADDITION, ENDOSKELETAL SYSTEM, HIP DISARTICULATION, ULTRA-LIGHT MATERIAL (TITANIUM, CARBON FIBER OR EQUAL)	2
L5961	ADDITION, ENDOSKELETAL SYSTEM, POLYCENTRIC HIP JOINT, PNEUMATIC OR HYDRAULIC CONTROL, ROTATION CONTROL, WITH OR WITHOUT FLEXION AND/OR EXTENSION CONTROL	1
L5962	ADDITION, ENDOSKELETAL SYSTEM, BELOW KNEE, FLEXIBLE PROTECTIVE OUTER SURFACE COVERING SYSTEM	2
L5964	ADDITION, ENDOSKELETAL SYSTEM, ABOVE KNEE, FLEXIBLE PROTECTIVE OUTER SURFACE COVERING SYSTEM	2
L5966	ADDITION, ENDOSKELETAL SYSTEM, HIP DISARTICULATION, FLEXIBLE PROTECTIVE OUTER SURFACE COVERING SYSTEM	2
L5968	ADDITION TO LOWER LIMB PROSTHESIS, MULTIAXIAL ANKLE WITH SWING PHASE ACTIVE DORSIFLEXION FEATURE	2
L5969	ADDITION, ENDOSKELETAL ANKLE-FOOT OR ANKLE SYSTEM, POWER ASSIST, INCLUDES ANY TYPE MOTOR(S)	2
L5970	ALL LOWER EXTREMITY PROSTHESES, FOOT, EXTERNAL KEEL, SACH FOOT	2
L5971	ALL LOWER EXTREMITY PROSTHESIS, SOLID ANKLE CUSHION HEEL (SACH) FOOT, REPLACEMENT ONLY	2
L5972	ALL LOWER EXTREMITY PROSTHESES, FOOT, FLEXIBLE KEEL	2

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L5973	ENDOSKELETAL ANKLE FOOT SYSTEM, MICROPROCESSOR CONTROLLED FEATURE, DORSIFLEXION AND/OR PLANTAR FLEXION CONTROL, INCLUDES POWER SOURCE	2
L5974	ALL LOWER EXTREMITY PROSTHESES, FOOT, SINGLE AXIS ANKLE/FOOT	2
L5975	ALL LOWER EXTREMITY PROSTHESIS, COMBINATION SINGLE AXIS ANKLE AND FLEXIBLE KEEL FOOT	2
L5976	ALL LOWER EXTREMITY PROSTHESES, ENERGY STORING FOOT (SEATTLE CARBON COPY II OR EQUAL)	2
L5978	ALL LOWER EXTREMITY PROSTHESES, FOOT, MULTIAXIAL ANKLE/FOOT	2
L5979	ALL LOWER EXTREMITY PROSTHESIS, MULTI-AXIAL ANKLE, DYNAMIC RESPONSE FOOT, ONE PIECE SYSTEM	2
L5980	ALL LOWER EXTREMITY PROSTHESES, FLEX FOOT SYSTEM	2
L5981	ALL LOWER EXTREMITY PROSTHESES, FLEX-WALK SYSTEM OR EQUAL	2
L5982	ALL EXOSKELETAL LOWER EXTREMITY PROSTHESES, AXIAL ROTATION UNIT	2
L5984	ALL ENDOSKELETAL LOWER EXTREMITY PROSTHESIS, AXIAL ROTATION UNIT, WITH OR WITHOUT ADJUSTABILITY	2
L5985	ALL ENDOSKELETAL LOWER EXTREMITY PROSTHESES, DYNAMIC PROSTHETIC PYLON	2
L5987	ALL LOWER EXTREMITY PROSTHESIS, SHANK FOOT SYSTEM WITH VERTICAL LOADING PYLON	2
L5988	ADDITION TO LOWER LIMB PROSTHESIS, VERTICAL SHOCK REDUCING PYLON FEATURE	2
L5990	ADDITION TO LOWER EXTREMITY PROSTHESIS, USER ADJUSTABLE HEEL HEIGHT	1
L5999	LOWER EXTREMITY PROSTHESIS, NOT OTHERWISE SPECIFIED	2
L6000	PARTIAL HAND, THUMB REMAINING	2
L6010	PARTIAL HAND, LITTLE AND/OR RING FINGER REMAINING	2
L6020	PARTIAL HAND, NO FINGER REMAINING	2
L6050	WRIST DISARTICULATION, MOLDED SOCKET, FLEXIBLE ELBOW HINGES, TRICEPS PAD	2
L6055	WRIST DISARTICULATION, MOLDED SOCKET WITH EXPANDABLE INTERFACE, FLEXIBLE ELBOW HINGES, TRICEPS PAD	2
L6100	BELOW ELBOW, MOLDED SOCKET, FLEXIBLE ELBOW HINGE, TRICEPS PAD	2
L6110	BELOW ELBOW, MOLDED SOCKET, (MUENSTER OR NORTHWESTERN SUSPENSION TYPES)	2
L6120	BELOW ELBOW, MOLDED DOUBLE WALL SPLIT SOCKET, STEP-UP HINGES, HALF CUFF	2
L6130	BELOW ELBOW, MOLDED DOUBLE WALL SPLIT SOCKET, STUMP ACTIVATED LOCKING HINGE, HALF CUFF	2
L6200	ELBOW DISARTICULATION, MOLDED SOCKET, OUTSIDE LOCKING HINGE, FOREARM	2
L6205	ELBOW DISARTICULATION, MOLDED SOCKET WITH EXPANDABLE INTERFACE, OUTSIDE LOCKING HINGES, FOREARM	2
	ELBOW DISARTICULATION, MOLDED SOCKET WITH EXPANDABLE INTERFACE,	

L6250	ABOVE ELBOW, MOLDED DOUBLE WALL SOCKET, INTERNAL LOCKING ELBOW, FOREARM	2
L6300	SHOULDER DISARTICULATION, MOLDED SOCKET, SHOULDER BULKHEAD, HUMERAL SECTION, INTERNAL LOCKING ELBOW, FOREARM	2
L6310	SHOULDER DISARTICULATION, PASSIVE RESTORATION (COMPLETE PROSTHESIS)	2
L6320	SHOULDER DISARTICULATION, PASSIVE RESTORATION (SHOULDER CAP ONLY)	2
L6350	INTERSCAPULAR THORACIC, MOLDED SOCKET, SHOULDER BULKHEAD, HUMERAL SECTION, INTERNAL LOCKING ELBOW, FOREARM	2
L6360	INTERSCAPULAR THORACIC, PASSIVE RESTORATION (COMPLETE PROSTHESIS)	2
L6370	INTERSCAPULAR THORACIC, PASSIVE RESTORATION (SHOULDER CAP ONLY)	2
L6380	IMMEDIATE POST SURGICAL OR EARLY FITTING, APPLICATION OF INITIAL RIGID DRESSING, INCLUDING FITTING ALIGNMENT AND SUSPENSION OF COMPONENTS, AND ONE CAST CHANGE, WRIST DISARTICULATION OR BELOW ELBOW	2
L6382	IMMEDIATE POST SURGICAL OR EARLY FITTING, APPLICATION OF INITIAL RIGID DRESSING INCLUDING FITTING ALIGNMENT AND SUSPENSION OF COMPONENTS, AND ONE CAST CHANGE, ELBOW DISARTICULATION OR ABOVE ELBOW	2
L6384	IMMEDIATE POST SURGICAL OR EARLY FITTING, APPLICATION OF INITIAL RIGID DRESSING INCLUDING FITTING ALIGNMENT AND SUSPENSION OF COMPONENTS, AND ONE CAST CHANGE, SHOULDER DISARTICULATION OR INTERSCAPULAR THORACIC	2
L6386	IMMEDIATE POST SURGICAL OR EARLY FITTING, EACH ADDITIONAL CAST CHANGE AND REALIGNMENT	2
L6388	IMMEDIATE POST SURGICAL OR EARLY FITTING, APPLICATION OF RIGID DRESSING ONLY	2
L6400	BELOW ELBOW, MOLDED SOCKET, ENDOSKELETAL SYSTEM, INCLUDING SOFT PROSTHETIC TISSUE SHAPING	2
L6450	ELBOW DISARTICULATION, MOLDED SOCKET, ENDOSKELETAL SYSTEM, INCLUDING SOFT PROSTHETIC TISSUE SHAPING	2
L6500	ABOVE ELBOW, MOLDED SOCKET, ENDOSKELETAL SYSTEM, INCLUDING SOFT PROSTHETIC TISSUE SHAPING	2
L6550	SHOULDER DISARTICULATION, MOLDED SOCKET, ENDOSKELETAL SYSTEM, INCLUDING SOFT PROSTHETIC TISSUE SHAPING	2
L6570	INTERSCAPULAR THORACIC, MOLDED SOCKET, ENDOSKELETAL SYSTEM, INCLUDING SOFT PROSTHETIC TISSUE SHAPING	2
L6580	PREPARATORY, WRIST DISARTICULATION OR BELOW ELBOW, SINGLE WALL PLASTIC SOCKET, FRICTION WRIST, FLEXIBLE ELBOW HINGES, FIGURE OF EIGHT HARNESS, HUMERAL CUFF, BOWDEN CABLE CONTROL, USMC OR EQUAL PYLON, NO COVER, MOLDED TO PATIENT MODEL	2
L6582	PREPARATORY, WRIST DISARTICULATION OR BELOW ELBOW, SINGLE WALL SOCKET, FRICTION WRIST, FLEXIBLE ELBOW HINGES, FIGURE OF EIGHT HARNESS, HUMERAL CUFF, BOWDEN CABLE CONTROL, USMC OR EQUAL PYLON, NO COVER, DIRECT FORMED	2

L6584	PREPARATORY, ELBOW DISARTICULATION OR ABOVE ELBOW, SINGLE WALL PLASTIC SOCKET, FRICTION WRIST, LOCKING ELBOW, FIGURE OF EIGHT HARNESS, FAIR LEAD CABLE CONTROL, USMC OR EQUAL PYLON, NO COVER, MOLDED TO PATIENT MODEL	2
L6586	PREPARATORY, ELBOW DISARTICULATION OR ABOVE ELBOW, SINGLE WALL SOCKET, FRICTION WRIST, LOCKING ELBOW, FIGURE OF EIGHT HARNESS, FAIR LEAD CABLE CONTROL, USMC OR EQUAL PYLON, NO COVER, DIRECT FORMED	2
L6588	PREPARATORY, SHOULDER DISARTICULATION OR INTERSCAPULAR THORACIC, SINGLE WALL PLASTIC SOCKET, SHOULDER JOINT, LOCKING ELBOW, FRICTION WRIST, CHEST STRAP, FAIR LEAD CABLE CONTROL, USMC OR EQUAL PYLON, NO COVER, MOLDED TO PATIENT MODEL	2
L6590	PREPARATORY, SHOULDER DISARTICULATION OR INTERSCAPULAR THORACIC, SINGLE WALL SOCKET, SHOULDER JOINT, LOCKING ELBOW, FRICTION WRIST, CHEST STRAP, FAIR LEAD CABLE CONTROL, USMC OR EQUAL PYLON, NO COVER, DIRECT FORMED	2
L6600	UPPER EXTREMITY ADDITIONS, POLYCENTRIC HINGE, PAIR	2
L6605	UPPER EXTREMITY ADDITIONS, SINGLE PIVOT HINGE, PAIR	2
L6610	UPPER EXTREMITY ADDITIONS, FLEXIBLE METAL HINGE, PAIR	2
L6611	ADDITION TO UPPER EXTREMITY PROSTHESIS, EXTERNAL POWERED, ADDITIONAL SWITCH, ANY TYPE	1
L6615	UPPER EXTREMITY ADDITION, DISCONNECT LOCKING WRIST UNIT	2
L6616	UPPER EXTREMITY ADDITION, ADDITIONAL DISCONNECT INSERT FOR LOCKING WRIST UNIT, EACH	2
L6620	UPPER EXTREMITY ADDITION, FLEXION/EXTENSION WRIST UNIT, WITH OR WITHOUT FRICTION	2
L6621	UPPER EXTREMITY PROSTHESIS ADDITION, FLEXION/EXTENSION WRIST WITH OR WITHOUT FRICTION, FOR USE WITH EXTERNAL POWERED TERMINAL DEVICE	2
L6623	UPPER EXTREMITY ADDITION, SPRING ASSISTED ROTATIONAL WRIST UNIT WITH LATCH RELEASE	2
L6624	UPPER EXTREMITY ADDITION, FLEXION/EXTENSION AND ROTATION WRIST UNIT	2
L6625	UPPER EXTREMITY ADDITION, ROTATION WRIST UNIT WITH CABLE LOCK	2
L6628	UPPER EXTREMITY ADDITION, QUICK DISCONNECT HOOK ADAPTER, OTTO BOCK OR EQUAL	2
L6629	UPPER EXTREMITY ADDITION, QUICK DISCONNECT LAMINATION COLLAR WITH COUPLING PIECE, OTTO BOCK OR EQUAL	1
L6630	UPPER EXTREMITY ADDITION, STAINLESS STEEL, ANY WRIST	2
L6632	UPPER EXTREMITY ADDITION, LATEX SUSPENSION SLEEVE, EACH	2
L6635	UPPER EXTREMITY ADDITION, LIFT ASSIST FOR ELBOW	2
	UPPER EXTREMITY ADDITION, NUDGE CONTROL ELBOW LOCK	2
L6637	OT A EN EXTREMITY ADDITIONAL TOTAL CONTINUE ELECTRICAL CONTINUE EL	

L6640	UPPER EXTREMITY ADDITIONS, SHOULDER ABDUCTION JOINT, PAIR	2
L6641	UPPER EXTREMITY ADDITION, EXCURSION AMPLIFIER, PULLEY TYPE	2
L6642	UPPER EXTREMITY ADDITION, EXCURSION AMPLIFIER, LEVER TYPE	2
L6645	UPPER EXTREMITY ADDITION, SHOULDER FLEXION-ABDUCTION JOINT, EACH	2
L6646	UPPER EXTREMITY ADDITION, SHOULDER JOINT, MULTIPOSITIONAL LOCKING, FLEXION, ADJUSTABLE ABDUCTION FRICTION CONTROL, FOR USE WITH BODY POWERED OR EXTERNAL POWERED SYSTEM	2
L6647	UPPER EXTREMITY ADDITION, SHOULDER LOCK MECHANISM, BODY POWERED ACTUATOR	2
L6648	UPPER EXTREMITY ADDITION, SHOULDER LOCK MECHANISM, EXTERNAL POWERED ACTUATOR	2
L6650	UPPER EXTREMITY ADDITION, SHOULDER UNIVERSAL JOINT, EACH	2
L6655	UPPER EXTREMITY ADDITION, STANDARD CONTROL CABLE, EXTRA	2
L6660	UPPER EXTREMITY ADDITION, HEAVY DUTY CONTROL CABLE	4
L6665	UPPER EXTREMITY ADDITION, TEFLON, OR EQUAL, CABLE LINING	2
L6670	UPPER EXTREMITY ADDITION, HOOK TO HAND, CABLE ADAPTER	2
L6672	UPPER EXTREMITY ADDITION, HARNESS, CHEST OR SHOULDER, SADDLE TYPE	2
L6675	UPPER EXTREMITY ADDITION, HARNESS, (E.G., FIGURE OF EIGHT TYPE), SINGLE CABLE DESIGN	2
L6676	UPPER EXTREMITY ADDITION, HARNESS, (E.G., FIGURE OF EIGHT TYPE), DUAL CABLE DESIGN	2
L6677	UPPER EXTREMITY ADDITION, HARNESS, TRIPLE CONTROL, SIMULTANEOUS OPERATION OF TERMINAL DEVICE AND ELBOW	2
L6680	UPPER EXTREMITY ADDITION, TEST SOCKET, WRIST DISARTICULATION OR BELOW ELBOW	2
L6682	UPPER EXTREMITY ADDITION, TEST SOCKET, ELBOW DISARTICULATION OR ABOVE ELBOW	2
L6684	UPPER EXTREMITY ADDITION, TEST SOCKET, SHOULDER DISARTICULATION OR INTERSCAPULAR THORACIC	2
L6686	UPPER EXTREMITY ADDITION, SUCTION SOCKET	2
L6687	UPPER EXTREMITY ADDITION, FRAME TYPE SOCKET, BELOW ELBOW OR WRIST DISARTICULATION	2
L6688	UPPER EXTREMITY ADDITION, FRAME TYPE SOCKET, ABOVE ELBOW OR ELBOW DISARTICULATION	2
L6689	UPPER EXTREMITY ADDITION, FRAME TYPE SOCKET, SHOULDER DISARTICULATION	2
L6690	UPPER EXTREMITY ADDITION, FRAME TYPE SOCKET, INTERSCAPULAR-THORACIC	2
L6691	UPPER EXTREMITY ADDITION, REMOVABLE INSERT, EACH	2
L6692	UPPER EXTREMITY ADDITION, SILICONE GEL INSERT OR EQUAL, EACH	2

L6693	UPPER EXTREMITY ADDITION, LOCKING ELBOW, FOREARM COUNTERBALANCE	2
L6694	ADDITION TO UPPER EXTREMITY PROSTHESIS, BELOW ELBOW/ABOVE ELBOW, CUSTOM FABRICATED FROM EXISTING MOLD OR PREFABRICATED, SOCKET INSERT, SILICONE GEL, ELASTOMERIC OR EQUAL, FOR USE WITH LOCKING MECHANISM	2
L6695	ADDITION TO UPPER EXTREMITY PROSTHESIS, BELOW ELBOW/ABOVE ELBOW, CUSTOM FABRICATED FROM EXISTING MOLD OR PREFABRICATED, SOCKET INSERT, SILICONE GEL, ELASTOMERIC OR EQUAL, NOT FOR USE WITH LOCKING MECHANISM	2
L6696	ADDITION TO UPPER EXTREMITY PROSTHESIS, BELOW ELBOW/ABOVE ELBOW, CUSTOM FABRICATED SOCKET INSERT FOR CONGENITAL OR ATYPICAL TRAUMATIC AMPUTEE, SILICONE GEL, ELASTOMERIC OR EQUAL, FOR USE WITH OR WITHOUT LOCKING MECHANISM, INITIAL ONLY (FOR OTHER THAN INITIAL, USE CODE L6694 OR L6695)	2
L6697	ADDITION TO UPPER EXTREMITY PROSTHESIS, BELOW ELBOW/ABOVE ELBOW, CUSTOM FABRICATED SOCKET INSERT FOR OTHER THAN CONGENITAL OR ATYPICAL TRAUMATIC AMPUTEE, SILICONE GEL, ELASTOMERIC OR EQUAL, FOR USE WITH OR WITHOUT LOCKING MECHANISM, INITIAL ONLY (FOR OTHER THAN INITIAL, USE CODE L6694 OR L6695)	2
L6698	ADDITION TO UPPER EXTREMITY PROSTHESIS, BELOW ELBOW/ABOVE ELBOW, LOCK MECHANISM, EXCLUDES SOCKET INSERT	2
L6703	TERMINAL DEVICE, PASSIVE HAND/MITT, ANY MATERIAL, ANY SIZE	2
L6704	TERMINAL DEVICE, SPORT/RECREATIONAL/WORK ATTACHMENT, ANY MATERIAL, ANY SIZE	2
L6706	TERMINAL DEVICE, HOOK, MECHANICAL, VOLUNTARY OPENING, ANY MATERIAL, ANY SIZE, LINED OR UNLINED	2
L6707	TERMINAL DEVICE, HOOK, MECHANICAL, VOLUNTARY CLOSING, ANY MATERIAL, ANY SIZE, LINED OR UNLINED	2
L6708	TERMINAL DEVICE, HAND, MECHANICAL, VOLUNTARY OPENING, ANY MATERIAL, ANY SIZE	2
L6709	TERMINAL DEVICE, HAND, MECHANICAL, VOLUNTARY CLOSING, ANY MATERIAL, ANY SIZE	2
L6711	TERMINAL DEVICE, HOOK, MECHANICAL, VOLUNTARY OPENING, ANY MATERIAL, ANY SIZE, LINED OR UNLINED, PEDIATRIC	2
L6712	TERMINAL DEVICE, HOOK, MECHANICAL, VOLUNTARY CLOSING, ANY MATERIAL, ANY SIZE, LINED OR UNLINED, PEDIATRIC	2
L6713	TERMINAL DEVICE, HAND, MECHANICAL, VOLUNTARY OPENING, ANY MATERIAL, ANY SIZE, PEDIATRIC	2
L6714	TERMINAL DEVICE, HAND, MECHANICAL, VOLUNTARY CLOSING, ANY MATERIAL, ANY SIZE, PEDIATRIC	2
L6715	TERMINAL DEVICE, MULTIPLE ARTICULATING DIGIT, INCLUDES MOTOR(S), INITIAL ISSUE OR REPLACEMENT	5
L6721	TERMINAL DEVICE, HOOK OR HAND, HEAVY DUTY, MECHANICAL, VOLUNTARY OPENING, ANY MATERIAL, ANY SIZE, LINED OR UNLINED	2

L6722	TERMINAL DEVICE, HOOK OR HAND, HEAVY DUTY, MECHANICAL, VOLUNTARY CLOSING, ANY MATERIAL, ANY SIZE, LINED OR UNLINED	2
L6805	ADDITION TO TERMINAL DEVICE, MODIFIER WRIST UNIT	2
L6810	ADDITION TO TERMINAL DEVICE, PRECISION PINCH DEVICE	2
L6880	ELECTRIC HAND, SWITCH OR MYOELECTRIC CONTROLLED, INDEPENDENTLY ARTICULATING DIGITS, ANY GRASP PATTERN OR COMBINATION OF GRASP PATTERNS, INCLUDES MOTOR(S)	2
L6881	AUTOMATIC GRASP FEATURE, ADDITION TO UPPER LIMB ELECTRIC PROSTHETIC TERMINAL DEVICE	2
L6882	MICROPROCESSOR CONTROL FEATURE, ADDITION TO UPPER LIMB PROSTHETIC TERMINAL DEVICE	2
L6883	REPLACEMENT SOCKET, BELOW ELBOW/WRIST DISARTICULATION, MOLDED TO PATIENT MODEL, FOR USE WITH OR WITHOUT EXTERNAL POWER	2
L6884	REPLACEMENT SOCKET, ABOVE ELBOW/ELBOW DISARTICULATION, MOLDED TO PATIENT MODEL, FOR USE WITH OR WITHOUT EXTERNAL POWER	2
L6885	REPLACEMENT SOCKET, SHOULDER DISARTICULATION/INTERSCAPULAR THORACIC, MOLDED TO PATIENT MODEL, FOR USE WITH OR WITHOUT EXTERNAL POWER	2
L6890	ADDITION TO UPPER EXTREMITY PROSTHESIS, GLOVE FOR TERMINAL DEVICE, ANY MATERIAL, PREFABRICATED, INCLUDES FITTING AND ADJUSTMENT	2
L6895	ADDITION TO UPPER EXTREMITY PROSTHESIS, GLOVE FOR TERMINAL DEVICE, ANY MATERIAL, CUSTOM FABRICATED	2
L6900	HAND RESTORATION (CASTS, SHADING AND MEASUREMENTS INCLUDED), PARTIAL HAND, WITH GLOVE, THUMB OR ONE FINGER REMAINING	2
L6905	HAND RESTORATION (CASTS, SHADING AND MEASUREMENTS INCLUDED), PARTIAL HAND, WITH GLOVE, MULTIPLE FINGERS REMAINING	2
L6910	HAND RESTORATION (CASTS, SHADING AND MEASUREMENTS INCLUDED), PARTIAL HAND, WITH GLOVE, NO FINGERS REMAINING	2
L6915	HAND RESTORATION (SHADING, AND MEASUREMENTS INCLUDED), REPLACEMENT GLOVE FOR ABOVE	2
L6920	WRIST DISARTICULATION, EXTERNAL POWER, SELF-SUSPENDED INNER SOCKET, REMOVABLE FOREARM SHELL, OTTO BOCK OR EQUAL, SWITCH, CABLES, TWO BATTERIES AND ONE CHARGER, SWITCH CONTROL OF TERMINAL DEVICE	2
L6925	WRIST DISARTICULATION, EXTERNAL POWER, SELF-SUSPENDED INNER SOCKET, REMOVABLE FOREARM SHELL, OTTO BOCK OR EQUAL ELECTRODES, CABLES, TWO BATTERIES AND ONE CHARGER, MYOELECTRONIC CONTROL OF TERMINAL DEVICE	2
L6930	BELOW ELBOW, EXTERNAL POWER, SELF-SUSPENDED INNER SOCKET, REMOVABLE FOREARM SHELL, OTTO BOCK OR EQUAL SWITCH, CABLES, TWO BATTERIES AND ONE CHARGER, SWITCH CONTROL OF TERMINAL DEVICE	2
L6935	BELOW ELBOW, EXTERNAL POWER, SELF-SUSPENDED INNER SOCKET, REMOVABLE FOREARM SHELL, OTTO BOCK OR EQUAL ELECTRODES, CABLES, TWO BATTERIES AND ONE CHARGER, MYOELECTRONIC CONTROL OF TERMINAL DEVICE	2

L6940	ELBOW DISARTICULATION, EXTERNAL POWER, MOLDED INNER SOCKET, REMOVABLE HUMERAL SHELL, OUTSIDE LOCKING HINGES, FOREARM, OTTO BOCK OR EQUAL SWITCH, CABLES, TWO BATTERIES AND ONE CHARGER, SWITCH CONTROL OF TERMINAL DEVICE	2
L6945	ELBOW DISARTICULATION, EXTERNAL POWER, MOLDED INNER SOCKET, REMOVABLE HUMERAL SHELL, OUTSIDE LOCKING HINGES, FOREARM, OTTO BOCK OR EQUAL ELECTRODES, CABLES, TWO BATTERIES AND ONE CHARGER, MYOELECTRONIC CONTROL OF TERMINAL DEVICE	2
L6950	ABOVE ELBOW, EXTERNAL POWER, MOLDED INNER SOCKET, REMOVABLE HUMERAL SHELL, INTERNAL LOCKING ELBOW, FOREARM, OTTO BOCK OR EQUAL SWITCH, CABLES, TWO BATTERIES AND ONE CHARGER, SWITCH CONTROL OF TERMINAL DEVICE	2
L6955	ABOVE ELBOW, EXTERNAL POWER, MOLDED INNER SOCKET, REMOVABLE HUMERAL SHELL, INTERNAL LOCKING ELBOW, FOREARM, OTTO BOCK OR EQUAL ELECTRODES, CABLES, TWO BATTERIES AND ONE CHARGER, MYOELECTRONIC CONTROL OF TERMINAL DEVICE	2
L6960	SHOULDER DISARTICULATION, EXTERNAL POWER, MOLDED INNER SOCKET, REMOVABLE SHOULDER SHELL, SHOULDER BULKHEAD, HUMERAL SECTION, MECHANICAL ELBOW, FOREARM, OTTO BOCK OR EQUAL SWITCH, CABLES, TWO BATTERIES AND ONE CHARGER, SWITCH CONTROL OF TERMINAL DEVICE	2
L6965	SHOULDER DISARTICULATION, EXTERNAL POWER, MOLDED INNER SOCKET, REMOVABLE SHOULDER SHELL, SHOULDER BULKHEAD, HUMERAL SECTION, MECHANICAL ELBOW, FOREARM, OTTO BOCK OR EQUAL ELECTRODES, CABLES, TWO BATTERIES AND ONE CHARGER, MYOELECTRONIC CONTROL OF TERMINAL DEVICE	2
L6970	INTERSCAPULAR-THORACIC, EXTERNAL POWER, MOLDED INNER SOCKET, REMOVABLE SHOULDER SHELL, SHOULDER BULKHEAD, HUMERAL SECTION, MECHANICAL ELBOW, FOREARM, OTTO BOCK OR EQUAL SWITCH, CABLES, TWO BATTERIES AND ONE CHARGER, SWITCH CONTROL OF TERMINAL DEVICE	2
L6975	INTERSCAPULAR-THORACIC, EXTERNAL POWER, MOLDED INNER SOCKET, REMOVABLE SHOULDER SHELL, SHOULDER BULKHEAD, HUMERAL SECTION, MECHANICAL ELBOW, FOREARM, OTTO BOCK OR EQUAL ELECTRODES, CABLES, TWO BATTERIES AND ONE CHARGER, MYOELECTRONIC CONTROL OF TERMINAL DEVICE	2
L7007	ELECTRIC HAND, SWITCH OR MYOELECTRIC CONTROLLED, ADULT	2
L7008	ELECTRIC HAND, SWITCH OR MYOELECTRIC, CONTROLLED, PEDIATRIC	2
L7009	ELECTRIC HOOK, SWITCH OR MYOELECTRIC CONTROLLED, ADULT	2
L7040	PREHENSILE ACTUATOR, SWITCH CONTROLLED	2
L7045	ELECTRIC HOOK, SWITCH OR MYOELECTRIC CONTROLLED, PEDIATRIC	2
L7170	ELECTRONIC ELBOW, HOSMER OR EQUAL, SWITCH CONTROLLED	2
L7180	ELECTRONIC ELBOW, MICROPROCESSOR SEQUENTIAL CONTROL OF ELBOW AND TERMINAL DEVICE	2
	TERROR SEVICE	

L7185	ELECTRONIC ELBOW, ADOLESCENT, VARIETY VILLAGE OR EQUAL, SWITCH CONTROLLED	2
L7186	ELECTRONIC ELBOW, CHILD, VARIETY VILLAGE OR EQUAL, SWITCH CONTROLLED	2
L7190	ELECTRONIC ELBOW, ADOLESCENT, VARIETY VILLAGE OR EQUAL, MYOELECTRONICALLY CONTROLLED	2
L7191	ELECTRONIC ELBOW, CHILD, VARIETY VILLAGE OR EQUAL, MYOELECTRONICALLY CONTROLLED	2
L7360	SIX VOLT BATTERY, EACH	1
L7362	BATTERY CHARGER, SIX VOLT, EACH	1
L7364	TWELVE VOLT BATTERY, EACH	1
L7366	BATTERY CHARGER, TWELVE VOLT, EACH	1
L7367	LITHIUM ION BATTERY, RECHARGEABLE, REPLACEMENT	2
L7368	LITHIUM ION BATTERY CHARGER, REPLACEMENT ONLY	2
L7400	ADDITION TO UPPER EXTREMITY PROSTHESIS, BELOW ELBOW/WRIST DISARTICULATION, ULTRALIGHT MATERIAL (TITANIUM, CARBON FIBER OR EQUAL)	2
L7401	ADDITION TO UPPER EXTREMITY PROSTHESIS, ABOVE ELBOW DISARTICULATION, ULTRALIGHT MATERIAL (TITANIUM, CARBON FIBER OR EQUAL)	2
L7402	ADDITION TO UPPER EXTREMITY PROSTHESIS, SHOULDER DISARTICULATION/INTERSCAPULAR THORACIC, ULTRALIGHT MATERIAL (TITANIUM, CARBON FIBER OR EQUAL)	2
L7403	ADDITION TO UPPER EXTREMITY PROSTHESIS, BELOW ELBOW/WRIST DISARTICULATION, ACRYLIC MATERIAL	2
L7404	ADDITION TO UPPER EXTREMITY PROSTHESIS, ABOVE ELBOW DISARTICULATION, ACRYLIC MATERIAL	2
L7405	ADDITION TO UPPER EXTREMITY PROSTHESIS, SHOULDER DISARTICULATION/INTERSCAPULAR THORACIC, ACRYLIC MATERIAL	2
L7499	UPPER EXTREMITY PROSTHESIS, NOT OTHERWISE SPECIFIED	2
L7510	REPAIR OF PROSTHETIC DEVICE, REPAIR OR REPLACE MINOR PARTS	4
L7520	REPAIR PROSTHETIC DEVICE, LABOR COMPONENT, PER 15 MINUTES	40
L7600	PROSTHETIC DONNING SLEEVE, ANY MATERIAL, EACH	1
L7700	GASKET OR SEAL, FOR USE WITH PROSTHETIC SOCKET INSERT, ANY TYPE, EACH	2
L7900	MALE VACUUM ERECTION SYSTEM	1
L7902	TENSION RING, FOR VACUUM ERECTION DEVICE, ANY TYPE, REPLACEMENT ONLY, EACH	1
L8000	BREAST PROSTHESIS, MASTECTOMY BRA, WITHOUT INTEGRATED BREAST PROSTHESIS FORM, ANY SIZE, ANY TYPE	4
L8001	BREAST PROSTHESIS, MASTECTOMY BRA, WITH INTEGRATED BREAST PROSTHESIS FORM, UNILATERAL, ANY SIZE, ANY TYPE	1

L8002	BREAST PROSTHESIS, MASTECTOMY BRA, WITH INTEGRATED BREAST PROSTHESIS FORM, BILATERAL, ANY SIZE, ANY TYPE	1
L8010	BREAST PROSTHESIS, MASTECTOMY SLEEVE	4
L8015	EXTERNAL BREAST PROSTHESIS GARMENT, WITH MASTECTOMY FORM, POST MASTECTOMY	2
L8020	BREAST PROSTHESIS, MASTECTOMY FORM	2
L8030	BREAST PROSTHESIS, SILICONE OR EQUAL, WITHOUT INTEGRAL ADHESIVE	2
L8033	NIPPLE PROSTHESIS, CUSTOM FABRICATED, REUSABLE, ANY MATERIAL, ANY TYPE, EACH	2
L8035	CUSTOM BREAST PROSTHESIS, POST MASTECTOMY, MOLDED TO PATIENT MODEL	2
L8039	BREAST PROSTHESIS, NOT OTHERWISE SPECIFIED	2
L8040	NASAL PROSTHESIS, PROVIDED BY A NON-PHYSICIAN	1
L8041	MIDFACIAL PROSTHESIS, PROVIDED BY A NON-PHYSICIAN	1
L8042	ORBITAL PROSTHESIS, PROVIDED BY A NON-PHYSICIAN	2
L8043	UPPER FACIAL PROSTHESIS, PROVIDED BY A NON-PHYSICIAN	1
L8044	HEMI-FACIAL PROSTHESIS, PROVIDED BY A NON-PHYSICIAN	1
L8045	AURICULAR PROSTHESIS, PROVIDED BY A NON-PHYSICIAN	2
L8046	PARTIAL FACIAL PROSTHESIS, PROVIDED BY A NON-PHYSICIAN	1
L8047	NASAL SEPTAL PROSTHESIS, PROVIDED BY A NON-PHYSICIAN	1
L8048	UNSPECIFIED MAXILLOFACIAL PROSTHESIS, BY REPORT, PROVIDED BY A NON-PHYSICIAN	1
L8049	REPAIR OR MODIFICATION OF MAXILLOFACIAL PROSTHESIS, LABOR COMPONENT, 15 MINUTE INCREMENTS, PROVIDED BY A NON-PHYSICIAN	6
L8300	TRUSS, SINGLE WITH STANDARD PAD	1
L8310	TRUSS, DOUBLE WITH STANDARD PADS	1
L8320	TRUSS, ADDITION TO STANDARD PAD, WATER PAD	1
L8330	TRUSS, ADDITION TO STANDARD PAD, SCROTAL PAD	1
L8400	PROSTHETIC SHEATH, BELOW KNEE, EACH	12
L8410	PROSTHETIC SHEATH, ABOVE KNEE, EACH	6
L8415	PROSTHETIC SHEATH, UPPER LIMB, EACH	12
L8417	PROSTHETIC SHEATH/SOCK, INCLUDING A GEL CUSHION LAYER, BELOW KNEE OR ABOVE KNEE, EACH	12
L8420	PROSTHETIC SOCK, MULTIPLE PLY, BELOW KNEE, EACH	12
L8430	PROSTHETIC SOCK, MULTIPLE PLY, ABOVE KNEE, EACH	12
L8435	PROSTHETIC SOCK, MULTIPLE PLY, UPPER LIMB, EACH	12
L8460	PROSTHETIC SHRINKER, ABOVE KNEE, EACH	6

L8465	PROSTHETIC SHRINKER, UPPER LIMB, EACH	12
L8470	PROSTHETIC SOCK, SINGLE PLY, FITTING, BELOW KNEE, EACH	12
L8480	PROSTHETIC SOCK, SINGLE PLY, FITTING, ABOVE KNEE, EACH	12
L8485	PROSTHETIC SOCK, SINGLE PLY, FITTING, UPPER LIMB, EACH	12
L8499	UNLISTED PROCEDURE FOR MISCELLANEOUS PROSTHETIC SERVICES	1
L8500	ARTIFICIAL LARYNX, ANY TYPE	1
L8501	TRACHEOSTOMY SPEAKING VALVE	1
L8507	TRACHEO-ESOPHAGEAL VOICE PROSTHESIS, PATIENT INSERTED, ANY TYPE, EACH	1
L8509	TRACHEO-ESOPHAGEAL VOICE PROSTHESIS, INSERTED BY A LICENSED HEALTH CARE PROVIDER, ANY TYPE	1
L8510	VOICE AMPLIFIER	1
L8511	INSERT FOR INDWELLING TRACHEOESOPHAGEAL PROSTHESIS, WITH OR WITHOUT VALVE, REPLACEMENT ONLY, EACH	1
L8512	GELATIN CAPSULES OR EQUIVALENT, FOR USE WITH TRACHEOESOPHAGEAL VOICE PROSTHESIS, REPLACEMENT ONLY, PER 10	30
L8513	CLEANING DEVICE USED WITH TRACHEOESOPHAGEAL VOICE PROSTHESIS, PIPET, BRUSH, OR EQUAL, REPLACEMENT ONLY, EACH	8
L8514	TRACHEOESOPHAGEAL PUNCTURE DILATOR, REPLACEMENT ONLY, EACH	1
L8515	GELATIN CAPSULE, APPLICATION DEVICE FOR USE WITH TRACHEOESOPHAGEAL VOICE PROSTHESIS, EACH	1
L8600	IMPLANTABLE BREAST PROSTHESIS, SILICONE OR EQUAL	2
L8603	INJECTABLE BULKING AGENT, COLLAGEN IMPLANT, URINARY TRACT, 2.5 ML SYRINGE, INCLUDES SHIPPING AND NECESSARY SUPPLIES	4
L8604	INJECTABLE BULKING AGENT, DEXTRANOMER/HYALURONIC ACID COPOLYMER IMPLANT, URINARY TRACT, 1 ML, INCLUDES SHIPPING AND NECESSARY SUPPLIES	3
L8605	INJECTABLE BULKING AGENT, DEXTRANOMER/HYALURONIC ACID COPOLYMER IMPLANT, ANAL CANAL, 1 ML, INCLUDES SHIPPING AND NECESSARY SUPPLIES	4
L8606	INJECTABLE BULKING AGENT, SYNTHETIC IMPLANT, URINARY TRACT, 1 ML SYRINGE, INCLUDES SHIPPING AND NECESSARY SUPPLIES	5
L8607	INJECTABLE BULKING AGENT FOR VOCAL CORD MEDIALIZATION, 0.1 ML, INCLUDES SHIPPING AND NECESSARY SUPPLIES	20
L8609	ARTIFICIAL CORNEA	1
L8610	OCULAR IMPLANT	2
L8612	AQUEOUS SHUNT	1
L8613	OSSICULA IMPLANT	2
L8614	COCHLEAR DEVICE, INCLUDES ALL INTERNAL AND EXTERNAL COMPONENTS	2
L8615	HEADSET/HEADPIECE FOR USE WITH COCHLEAR IMPLANT DEVICE, REPLACEMENT	1
L8616	MICROPHONE FOR USE WITH COCHLEAR IMPLANT DEVICE, REPLACEMENT	1

		1
L8617	TRANSMITTING COIL FOR USE WITH COCHLEAR IMPLANT DEVICE, REPLACEMENT	1
L8618	TRANSMITTER CABLE FOR USE WITH COCHLEAR IMPLANT DEVICE OR AUDITORY OSSEOINTEGRATED DEVICE, REPLACEMENT	2
L8619	COCHLEAR IMPLANT, EXTERNAL SPEECH PROCESSOR AND CONTROLLER, INTEGRATED SYSTEM, REPLACEMENT	2
L8621	ZINC AIR BATTERY FOR USE WITH COCHLEAR IMPLANT DEVICE AND AUDITORY OSSEOINTEGRATED SOUND PROCESSORS, REPLACEMENT, EACH	300
L8622	ALKALINE BATTERY FOR USE WITH COCHLEAR IMPLANT DEVICE, ANY SIZE, REPLACEMENT, EACH	60
L8623	LITHIUM ION BATTERY FOR USE WITH COCHLEAR IMPLANT DEVICE SPEECH PROCESSOR, OTHER THAN EAR LEVEL, REPLACEMENT, EACH	1
L8624	LITHIUM ION BATTERY FOR USE WITH COCHLEAR IMPLANT OR AUDITORY OSSEOINTEGRATED DEVICE SPEECH PROCESSOR, EAR LEVEL, REPLACEMENT, EACH	1
L8625	EXTERNAL RECHARGING SYSTEM FOR BATTERY FOR USE WITH COCHLEAR IMPLANT OR AUDITORY OSSEOINTEGRATED DEVICE, REPLACEMENT ONLY, EACH	1
L8627	COCHLEAR IMPLANT, EXTERNAL SPEECH PROCESSOR, COMPONENT, REPLACEMENT	1
L8628	COCHLEAR IMPLANT, EXTERNAL CONTROLLER COMPONENT, REPLACEMENT	1
L8629	TRANSMITTING COIL AND CABLE, INTEGRATED, FOR USE WITH COCHLEAR IMPLANT DEVICE, REPLACEMENT	1
L8631	METACARPAL PHALANGEAL JOINT REPLACEMENT, TWO OR MORE PIECES, METAL (E.G., STAINLESS STEEL OR COBALT CHROME), CERAMIC-LIKE MATERIAL (E.G., PYROCARBON), FOR SURGICAL IMPLANTATION (ALL SIZES, INCLUDES ENTIRE SYSTEM)	2
L8641	METATARSAL JOINT IMPLANT	4
L8642	HALLUX IMPLANT	2
L8658	INTERPHALANGEAL JOINT SPACER, SILICONE OR EQUAL, EACH	3
L8659	INTERPHALANGEAL FINGER JOINT REPLACEMENT, 2 OR MORE PIECES, METAL (E.G., STAINLESS STEEL OR COBALT CHROME), CERAMIC-LIKE MATERIAL (E.G., PYROCARBON) FOR SURGICAL IMPLANTATION, ANY SIZE	4
L8670	VASCULAR GRAFT MATERIAL, SYNTHETIC, IMPLANT	3
L8679	IMPLANTABLE NEUROSTIMULATOR, PULSE GENERATOR, ANY TYPE	3
L8681	PATIENT PROGRAMMER (EXTERNAL) FOR USE WITH IMPLANTABLE PROGRAMMABLE NEUROSTIMULATOR PULSE GENERATOR, REPLACEMENT ONLY	1
L8682	IMPLANTABLE NEUROSTIMULATOR RADIOFREQUENCY RECEIVER	2
L8683	RADIOFREQUENCY TRANSMITTER (EXTERNAL) FOR USE WITH IMPLANTABLE NEUROSTIMULATOR RADIOFREQUENCY RECEIVER	1
L8684	RADIOFREQUENCY TRANSMITTER (EXTERNAL) FOR USE WITH IMPLANTABLE SACRAL ROOT NEUROSTIMULATOR RECEIVER FOR BOWEL AND BLADDER MANAGEMENT, REPLACEMENT	1

IMPLANTABLE NEUROSTIMULATOR PULSE GENERATOR, SINGLE ARRAY, RECHARGEABLE, INCLUDES EXTENSION	1
IMPLANTABLE NEUROSTIMULATOR PULSE GENERATOR, SINGLE ARRAY, NON-RECHARGEABLE, INCLUDES EXTENSION	2
IMPLANTABLE NEUROSTIMULATOR PULSE GENERATOR, DUAL ARRAY, RECHARGEABLE, INCLUDES EXTENSION	1
IMPLANTABLE NEUROSTIMULATOR PULSE GENERATOR, DUAL ARRAY, NON-RECHARGEABLE, INCLUDES EXTENSION	1
EXTERNAL RECHARGING SYSTEM FOR BATTERY (INTERNAL) FOR USE WITH IMPLANTABLE NEUROSTIMULATOR, REPLACEMENT ONLY	1
AUDITORY OSSEOINTEGRATED DEVICE, INCLUDES ALL INTERNAL AND EXTERNAL COMPONENTS	2
AUDITORY OSSEOINTEGRATED DEVICE, EXTERNAL SOUND PROCESSOR, EXCLUDES TRANSDUCER/ACTUATOR, REPLACEMENT ONLY, EACH	1
AUDITORY OSSEOINTEGRATED DEVICE, EXTERNAL SOUND PROCESSOR, USED WITHOUT OSSEOINTEGRATION, BODY WORN, INCLUDES HEADBAND OR OTHER MEANS OF EXTERNAL ATTACHMENT	2
AUDITORY OSSEOINTEGRATED DEVICE ABUTMENT, ANY LENGTH, REPLACEMENT ONLY	1
AUDITORY OSSEOINTEGRATED DEVICE, TRANSDUCER/ACTUATOR, REPLACEMENT ONLY, EACH	1
EXTERNAL RECHARGING SYSTEM FOR BATTERY (EXTERNAL) FOR USE WITH IMPLANTABLE NEUROSTIMULATOR, REPLACEMENT ONLY	1
ANTENNA (EXTERNAL) FOR USE WITH IMPLANTABLE DIAPHRAGMATIC/PHRENIC NERVE STIMULATION DEVICE, REPLACEMENT, EACH	1
Powered upper extremity range of motion assist device, elbow, wrist, hand with single or double upright(s), includes microprocessor, sensors, all components and accessories, custom fabricated	1
Powered upper extremity range of motion assist device, elbow, wrist, hand, finger, single or double upright(s), includes microprocessor, sensors, all components and accessories, custom fabricated	1
CELLULAR THERAPY	1
PROLOTHERAPY	1
INTRAGASTRIC HYPOTHERMIA USING GASTRIC FREEZING	1
Covid-19 vaccine administration inside a patient's home; reported only once per individual home per date of service when only covid-19 vaccine administration is performed at the patient's home	1
INTRAVENOUS INFUSION, BAMLANIVIMAB-XXXX, INCLUDES INFUSION AND POST ADMINISTRATION MONITORING	1
Intravenous infusion or subcutaneous injection, casirivimab and imdevimab includes infusion or injection, and post administration monitoring, subsequent	1
	RECHARGEABLE, INCLUDES EXTENSION IMPLANTABLE NEUROSTIMULATOR PULSE GENERATOR, SINGLE ARRAY, NON- RECHARGEABLE, INCLUDES EXTENSION IMPLANTABLE NEUROSTIMULATOR PULSE GENERATOR, DUAL ARRAY, RECHARGEABLE, INCLUDES EXTENSION IMPLANTABLE NEUROSTIMULATOR PULSE GENERATOR, DUAL ARRAY, NON- RECHARGEABLE, INCLUDES EXTENSION EXTERNAL RECHARGING SYSTEM FOR BATTERY (INTERNAL) FOR USE WITH IMPLANTABLE NEUROSTIMULATOR, REPLACEMENT ONLY AUDITORY OSSEOINTEGRATED DEVICE, INCLUDES ALL INTERNAL AND EXTERNAL COMPONENTS AUDITORY OSSEOINTEGRATED DEVICE, EXTERNAL SOUND PROCESSOR, EXCLUDES TRANSDUCER/ACTUATOR, REPLACEMENT ONLY, EACH AUDITORY OSSEOINTEGRATED DEVICE, EXTERNAL SOUND PROCESSOR, USED WITHOUT OSSEOINTEGRATED DEVICE, EXTERNAL SOUND PROCESSOR, USED WITHOUT OSSEOINTEGRATED DEVICE ABUTMENT, ANY LENGTH, REPLACEMENT ONLY AUDITORY OSSEOINTEGRATED DEVICE ABUTMENT, ANY LENGTH, REPLACEMENT ONLY AUDITORY OSSEOINTEGRATED DEVICE, TRANSDUCER/ACTUATOR, REPLACEMENT ONLY AUDITORY OSSEOINTEGRATED DEVICE, TRANSDUCER/ACTUATOR, REPLACEMENT ONLY, EACH EXTERNAL RECHARGING SYSTEM FOR BATTERY (EXTERNAL) FOR USE WITH IMPLANTABLE NEUROSTIMULATOR, REPLACEMENT ONLY ANTENNA (EXTERNAL) FOR USE WITH IMPLANTABLE DIAPHRAGMATIC/PHRENIC NERVE STIMULATION DEVICE, REPLACEMENT, EACH POwered upper extremity range of motion assist device, elbow, wrist, hand with single or double upright(s), includes microprocessor, sensors, all components and accessories, custom fabricated POwered upper extremity range of motion assist device, elbow, wrist, hand, finger, single or double upright(s), includes microprocessor, sensors, all components and accessories, custom fabricated CELLULAR THERAPY PROLOTHERAPY INTRAGASTRIC HYPOTHERMIA USING GASTRIC FREEZING Covid-19 vaccine administration inside a patient's home; reported only once per individual home per date of service when only covid-19 vaccine administration is performed at the patient's home INTRAVENOUS INFUSION, BAMILANIVIMAB-XXXX, INCLUDES INFUSION AND POST ADMINISTRATION MONITORING INTRAVENOUS INFUSION,

M0241	Intravenous infusion or subcutaneous injection, casirivimab and imdevimab includes infusion or injection, and post administration monitoring in the home or residence, this includes a beneficiary's home that has been made provider-based to the hospital during the covid-19 public health emergency, subsequent repeat doses	1
M0243	Intravenous infusion or subcutaneous injection, casirivimab and imdevimab includes infusion or injection, and post administration monitoring	1
M0244	Intravenous infusion or subcutaneous injection, casirivimab and imdevimab includes infusion or injection, and post administration monitoring in the home or residence; this includes a beneficiary's home that has been made provider-based to the hospital during the COVID-19 public health emergency	1
M0245	intravenous infusion, bamlanivimab and etesevimab, includes infusion and post administration monitoring	1
M0246	Intravenous infusion, bamlanivimab and etesevimab, includes infusion and post administration monitoring in the home or residence; this includes a beneficiary's home that has been made provider-based to the hospital during the covid-19 public health emergency	1
M0247	Intravenous infusion, sotrovimab, includes infusion and post administration monitoring	1
M0248	Intravenous infusion, sotrovimab, includes infusion and post administration monitoring in the home or residence; this includes a beneficiary's home that has been made provider-based to the hospital during the covid-19 public health emergency	1
M0249	Intravenous infusion, tocilizumab, for hospitalized adults and pediatric patients (2 years of age and older) with covid-19 who are receiving systemic corticosteroids and require supplemental oxygen, non-invasive or invasive mechanical ventilation, or extracorporeal membrane oxygenation (ECMO) only, includes infusion and post administration monitoring, first dose	1
M0250	Intravenous infusion, tocilizumab, for hospitalized adults and pediatric patients (2 years of age and older) with covid-19 who are receiving systemic corticosteroids and require supplemental oxygen, non-invasive or invasive mechanical ventilation, or extracorporeal membrane oxygenation (ECMO) only, includes infusion and post administration monitoring, second dose	1
M0300	IV CHELATION THERAPY (CHEMICAL ENDARTERECTOMY)	1
P2028	CEPHALIN FLOCULATION, BLOOD	1
P2029	CONGO RED, BLOOD	1
P2031	HAIR ANALYSIS (EXCLUDING ARSENIC)	1
P2033	THYMOL TURBIDITY, BLOOD	1
P2038	MUCOPROTEIN, BLOOD (SEROMUCOID) (MEDICAL NECESSITY PROCEDURE)	1
P3000	SCREENING PAPANICOLAOU SMEAR, CERVICAL OR VAGINAL, UP TO THREE SMEARS, BY TECHNICIAN UNDER PHYSICIAN SUPERVISION	1
P3001	SCREENING PAPANICOLAOU SMEAR, CERVICAL OR VAGINAL, UP TO THREE SMEARS, REQUIRING INTERPRETATION BY PHYSICIAN	1
P7001	CULTURE, BACTERIAL, URINE; QUANTITATIVE, SENSITIVITY STUDY	1

P9010	BLOOD (WHOLE), FOR TRANSFUSION, PER UNIT	9999
P9011	BLOOD, SPLIT UNIT	4
P9012	CRYOPRECIPITATE, EACH UNIT	12
P9016	RED BLOOD CELLS, LEUKOCYTES REDUCED, EACH UNIT	12
P9017	FRESH FROZEN PLASMA (SINGLE DONOR), FROZEN WITHIN 8 HOURS OF COLLECTION, EACH UNIT	10
P9019	PLATELETS, EACH UNIT	999
P9020	PLATELET RICH PLASMA, EACH UNIT	5
P9021	RED BLOOD CELLS, EACH UNIT	999
P9022	RED BLOOD CELLS, WASHED, EACH UNIT	12
P9023	PLASMA, POOLED MULTIPLE DONOR, SOLVENT/DETERGENT TREATED, FROZEN, EACH UNIT	15
P9031	PLATELETS, LEUKOCYTES REDUCED, EACH UNIT	12
P9032	PLATELETS, IRRADIATED, EACH UNIT	12
P9033	PLATELETS, LEUKOCYTES REDUCED, IRRADIATED, EACH UNIT	12
P9034	PLATELETS, PHERESIS, EACH UNIT	4
P9035	PLATELETS, PHERESIS, LEUKOCYTES REDUCED, EACH UNIT	4
P9036	PLATELETS, PHERESIS, IRRADIATED, EACH UNIT	4
P9037	PLATELETS, PHERESIS, LEUKOCYTES REDUCED, IRRADIATED, EACH UNIT	4
P9038	RED BLOOD CELLS, IRRADIATED, EACH UNIT	4
P9039	RED BLOOD CELLS, DEGLYCEROLIZED, EACH UNIT	2
P9040	RED BLOOD CELLS, LEUKOCYTES REDUCED, IRRADIATED, EACH UNIT	8
P9041	INFUSION, ALBUMIN (HUMAN), 5%, 50 ML	100
P9043	INFUSION, PLASMA PROTEIN FRACTION (HUMAN), 5%, 50 ML	10
P9044	PLASMA, CRYOPRECIPITATE REDUCED, EACH UNIT	20
P9045	INFUSION, ALBUMIN (HUMAN), 5%, 250 ML	20
P9046	INFUSION, ALBUMIN (HUMAN), 25%, 20 ML	40
P9047	INFUSION, ALBUMIN (HUMAN), 25%, 50 ML	20
P9048	INFUSION, PLASMA PROTEIN FRACTION (HUMAN), 5%, 250 ML	2
P9050	GRANULOCYTES, PHERESIS, EACH UNIT	1
P9051	WHOLE BLOOD OR RED BLOOD CELLS, LEUKOCYTES REDUCED, CMV-NEGATIVE, EACH UNIT	3
P9052	PLATELETS, HLA-MATCHED LEUKOCYTES REDUCED, APHERESIS/PHERESIS, EACH UNIT	10
P9053	PLATELETS, PHERESIS, LEUKOCYTES REDUCED, CMV-NEGATIVE, IRRADIATED, EACH UNIT	10

P9054	WHOLE BLOOD OR RED BLOOD CELLS, LEUKOCYTES REDUCED, FROZEN, DEGLYCEROL, WASHED, EACH UNIT	3
P9055	PLATELETS, LEUKOCYTES REDUCED, CMV-NEGATIVE, APHERESIS/PHERESIS, EACH UNIT	10
P9056	WHOLE BLOOD, LEUKOCYTES REDUCED, IRRADIATED, EACH UNIT	3
P9057	RED BLOOD CELLS, FROZEN/DEGLYCEROLIZED/WASHED, LEUKOCYTES REDUCED, IRRADIATED, EACH UNIT	3
P9058	RED BLOOD CELLS, LEUKOCYTES REDUCED, CMV-NEGATIVE, IRRADIATED, EACH UNIT	3
P9059	FRESH FROZEN PLASMA BETWEEN 8-24 HOURS OF COLLECTION, EACH UNIT	3
P9060	FRESH FROZEN PLASMA, DONOR RETESTED, EACH UNIT	3
P9070	PLASMA, POOLED MULTIPLE DONOR, PATHOGEN REDUCED, FROZEN, EACH UNIT	15
P9071	PLASMA (SINGLE DONOR), PATHOGEN REDUCED, FROZEN, EACH UNIT	15
P9073	PLATELETS, PHERESIS, PATHOGEN-REDUCED, EACH UNIT	4
P9099	BLOOD COMPONENT OR PRODUCT NOT OTHERWISE CLASSIFIED	1
P9100	PATHOGEN(S) TEST FOR PLATELETS	12
P9603	TRAVEL ALLOWANCE ONE WAY IN CONNECTION WITH MEDICALLY NECESSARY LABORATORY SPECIMEN COLLECTION DRAWN FROM HOME BOUND OR NURSING HOME BOUND PATIENT; PRORATED MILES ACTUALLY TRAVELLED	100
P9604	TRAVEL ALLOWANCE ONE WAY IN CONNECTION WITH MEDICALLY NECESSARY LABORATORY SPECIMEN COLLECTION DRAWN FROM HOME BOUND OR NURSING HOME BOUND PATIENT; PRORATED TRIP CHARGE	2
P9612	CATHETERIZATION FOR COLLECTION OF SPECIMEN, SINGLE PATIENT, ALL PLACES OF SERVICE	1
P9615	CATHETERIZATION FOR COLLECTION OF SPECIMEN(S) (MULTIPLE PATIENTS)	1
Q0035	CARDIOKYMOGRAPHY	1
Q0081	INFUSION THERAPY, USING OTHER THAN CHEMOTHERAPEUTIC DRUGS, PER VISIT	2
Q0083	CHEMOTHERAPY ADMINISTRATION BY OTHER THAN INFUSION TECHNIQUE ONLY (E.G., SUBCUTANEOUS, INTRAMUSCULAR, PUSH), PER VISIT	2
Q0084	CHEMOTHERAPY ADMINISTRATION BY INFUSION TECHNIQUE ONLY, PER VISIT	2
Q0085	CHEMOTHERAPY ADMINISTRATION BY BOTH INFUSION TECHNIQUE AND OTHER TECHNIQUE(S) (E.G., SUBCUTANEOUS, INTRAMUSCULAR, PUSH), PER VISIT	2
Q0091	SCREENING PAPANICOLAOU SMEAR; OBTAINING, PREPARING AND CONVEYANCE OF CERVICAL OR VAGINAL SMEAR TO LABORATORY	1
Q0092	SET-UP PORTABLE X-RAY EQUIPMENT	2
Q0111	WET MOUNTS, INCLUDING PREPARATIONS OF VAGINAL, CERVICAL OR SKIN SPECIMENS	1
Q0112	ALL POTASSIUM HYDROXIDE (KOH) PREPARATIONS	1
Q0113	PINWORM EXAMINATIONS	1

Q0114	FERN TEST	1
Q0115	POST-COITAL DIRECT, QUALITATIVE EXAMINATIONS OF VAGINAL OR CERVICAL MUCOUS	1
Q0138	INJECTION, FERUMOXYTOL, FOR TREATMENT OF IRON DEFICIENCY ANEMIA, 1 MG (NON-ESRD USE)	510
Q0139	INJECTION, FERUMOXYTOL, FOR TREATMENT OF IRON DEFICIENCY ANEMIA, 1 MG (FOR ESRD ON DIALYSIS)	510
Q0161	CHLORPROMAZINE HYDROCHLORIDE, 5 MG, ORAL, FDA APPROVED PRESCRIPTION ANTI-EMETIC, FOR USE AS A COMPLETE THERAPEUTIC SUBSTITUTE FOR AN IV ANTI-EMETIC AT THE TIME OF CHEMOTHERAPY TREATMENT, NOT TO EXCEED A 48 HOUR DOSAGE REGIMEN	66
Q0162	ONDANSETRON 1 MG, ORAL, FDA APPROVED PRESCRIPTION ANTI-EMETIC, FOR USE AS A COMPLETE THERAPEUTIC SUBSTITUTE FOR AN IV ANTI-EMETIC AT THE TIME OF CHEMOTHERAPY TREATMENT, NOT TO EXCEED A 48 HOUR DOSAGE REGIMEN	40
Q0163	DIPHENHYDRAMINE HYDROCHLORIDE, 50 MG, ORAL, FDA APPROVED PRESCRIPTION ANTI-EMETIC, FOR USE AS A COMPLETE THERAPEUTIC SUBSTITUTE FOR AN IV ANTI-EMETIC AT TIME OF CHEMOTHERAPY TREATMENT NOT TO EXCEED A 48 HOUR DOSAGE REGIMEN	13
Q0164	PROCHLORPERAZINE MALEATE, 5 MG, ORAL, FDA APPROVED PRESCRIPTION ANTI- EMETIC, FOR USE AS A COMPLETE THERAPEUTIC SUBSTITUTE FOR AN IV ANTI- EMETIC AT THE TIME OF CHEMOTHERAPY TREATMENT, NOT TO EXCEED A 48 HOUR DOSAGE REGIMEN	18
Q0166	GRANISETRON HYDROCHLORIDE, 1 MG, ORAL, FDA APPROVED PRESCRIPTION ANTI- EMETIC, FOR USE AS A COMPLETE THERAPEUTIC SUBSTITUTE FOR AN IV ANTI- EMETIC AT THE TIME OF CHEMOTHERAPY TREATMENT, NOT TO EXCEED A 24 HOUR DOSAGE REGIMEN	2
Q0167	DRONABINOL, 2.5 MG, ORAL, FDA APPROVED PRESCRIPTION ANTI-EMETIC, FOR USE AS A COMPLETE THERAPEUTIC SUBSTITUTE FOR AN IV ANTI-EMETIC AT THE TIME OF CHEMOTHERAPY TREATMENT, NOT TO EXCEED A 48 HOUR DOSAGE REGIMEN	108
Q0169	PROMETHAZINE HYDROCHLORIDE, 12.5 MG, ORAL, FDA APPROVED PRESCRIPTION ANTI-EMETIC, FOR USE AS A COMPLETE THERAPEUTIC SUBSTITUTE FOR AN IV ANTI-EMETIC AT THE TIME OF CHEMOTHERAPY TREATMENT, NOT TO EXCEED A 48 HOUR DOSAGE REGIMEN	26
Q0173	TRIMETHOBENZAMIDE HYDROCHLORIDE, 250 MG, ORAL, FDA APPROVED PRESCRIPTION ANTI-EMETIC, FOR USE AS A COMPLETE THERAPEUTIC SUBSTITUTE FOR AN IV ANTI-EMETIC AT THE TIME OF CHEMOTHERAPY TREATMENT, NOT TO EXCEED A 48 HOUR DOSAGE REGIMEN	11
Q0175	PERPHENAZINE, 4 MG, ORAL, FDA APPROVED PRESCRIPTION ANTI-EMETIC, FOR USE AS A COMPLETE THERAPEUTIC SUBSTITUTE FOR AN IV ANTI-EMETIC AT THE TIME OF CHEMOTHERAPY TREATMENT, NOT TO EXCEED A 48 HOUR DOSAGE REGIMEN	14
Q0177	HYDROXYZINE PAMOATE, 25 MG, ORAL, FDA APPROVED PRESCRIPTION ANTI- EMETIC, FOR USE AS A COMPLETE THERAPEUTIC SUBSTITUTE FOR AN IV ANTI- EMETIC AT THE TIME OF CHEMOTHERAPY TREATMENT, NOT TO EXCEED A 48 HOUR DOSAGE REGIMEN	36

Q0180	DOLASETRON MESYLATE, 100 MG, ORAL, FDA APPROVED PRESCRIPTION ANTI- EMETIC, FOR USE AS A COMPLETE THERAPEUTIC SUBSTITUTE FOR AN IV ANTI- EMETIC AT THE TIME OF CHEMOTHERAPY TREATMENT, NOT TO EXCEED A 24 HOUR DOSAGE REGIMEN	1
Q0181	UNSPECIFIED ORAL DOSAGE FORM, FDA APPROVED PRESCRIPTION ANTI-EMETIC, FOR USE AS A COMPLETE THERAPEUTIC SUBSTITUTE FOR A IV ANTI-EMETIC AT THE TIME OF CHEMOTHERAPY TREATMENT, NOT TO EXCEED A 48 HOUR DOSAGE REGIMEN	2
Q0240	Injection, casirivimab and imdevimab, 600 mg	1
Q0243	INJECTION, CASIRIVIMAB AND IMDEVIMAB, 2400 MG	1
Q0244	Injection, casirivimab and imdevimab, 1200 mg	1
Q0245	Injection, bamlanivimab and etesevimab, 2100 mg	1
Q0247	Injection, sotrovimab, 500 mg	1
Q0249	Injection, tocilizumab, for hospitalized adults and pediatric patients (2 years of age and older) with covid-19 who are receiving systemic corticosteroids and require supplemental oxygen, non-invasive or invasive mechanical ventilation, or extracorporeal membrane oxygenation (ECMO) only, 1 mg	1600
Q0477	POWER MODULE PATIENT CABLE FOR USE WITH ELECTRIC OR ELECTRIC/PNEUMATIC VENTRICULAR ASSIST DEVICE, REPLACEMENT ONLY	1
Q0478	POWER ADAPTER FOR USE WITH ELECTRIC OR ELECTRIC/PNEUMATIC VENTRICULAR ASSIST DEVICE, VEHICLE TYPE	1
Q0479	POWER MODULE FOR USE WITH ELECTRIC OR ELECTRIC/PNEUMATIC VENTRICULAR ASSIST DEVICE, REPLACEMENT ONLY	1
Q0480	DRIVER FOR USE WITH PNEUMATIC VENTRICULAR ASSIST DEVICE, REPLACEMENT ONLY	1
Q0481	MICROPROCESSOR CONTROL UNIT FOR USE WITH ELECTRIC VENTRICULAR ASSIST DEVICE, REPLACEMENT ONLY	1
Q0482	MICROPROCESSOR CONTROL UNIT FOR USE WITH ELECTRIC/PNEUMATIC COMBINATION VENTRICULAR ASSIST DEVICE, REPLACEMENT ONLY	1
Q0483	MONITOR/DISPLAY MODULE FOR USE WITH ELECTRIC VENTRICULAR ASSIST DEVICE, REPLACEMENT ONLY	1
Q0484	MONITOR/DISPLAY MODULE FOR USE WITH ELECTRIC OR ELECTRIC/PNEUMATIC VENTRICULAR ASSIST DEVICE, REPLACEMENT ONLY	1
Q0485	MONITOR CONTROL CABLE FOR USE WITH ELECTRIC VENTRICULAR ASSIST DEVICE, REPLACEMENT ONLY	1
Q0486	MONITOR CONTROL CABLE FOR USE WITH ELECTRIC/PNEUMATIC VENTRICULAR ASSIST DEVICE, REPLACEMENT ONLY	1
Q0487	LEADS (PNEUMATIC/ELECTRICAL) FOR USE WITH ANY TYPE ELECTRIC/PNEUMATIC VENTRICULAR ASSIST DEVICE, REPLACEMENT ONLY	1
Q0488	POWER PACK BASE FOR USE WITH ELECTRIC VENTRICULAR ASSIST DEVICE, REPLACEMENT ONLY	1

Q0489	POWER PACK BASE FOR USE WITH ELECTRIC/PNEUMATIC VENTRICULAR ASSIST	1
	DEVICE, REPLACEMENT ONLY	
Q0490	EMERGENCY POWER SOURCE FOR USE WITH ELECTRIC VENTRICULAR ASSIST DEVICE, REPLACEMENT ONLY	1
Q0491	EMERGENCY POWER SOURCE FOR USE WITH ELECTRIC/PNEUMATIC VENTRICULAR ASSIST DEVICE, REPLACEMENT ONLY	1
Q0492	EMERGENCY POWER SUPPLY CABLE FOR USE WITH ELECTRIC VENTRICULAR ASSIST DEVICE, REPLACEMENT ONLY	1
Q0493	EMERGENCY POWER SUPPLY CABLE FOR USE WITH ELECTRIC/PNEUMATIC VENTRICULAR ASSIST DEVICE, REPLACEMENT ONLY	1
Q0494	EMERGENCY HAND PUMP FOR USE WITH ELECTRIC OR ELECTRIC/PNEUMATIC VENTRICULAR ASSIST DEVICE, REPLACEMENT ONLY	1
Q0495	BATTERY/POWER PACK CHARGER FOR USE WITH ELECTRIC OR ELECTRIC/PNEUMATIC VENTRICULAR ASSIST DEVICE, REPLACEMENT ONLY	1
Q0497	BATTERY CLIPS FOR USE WITH ELECTRIC OR ELECTRIC/PNEUMATIC VENTRICULAR ASSIST DEVICE, REPLACEMENT ONLY	2
Q0498	HOLSTER FOR USE WITH ELECTRIC OR ELECTRIC/PNEUMATIC VENTRICULAR ASSIST DEVICE, REPLACEMENT ONLY	1
Q0499	BELT/VEST/BAG FOR USE TO CARRY EXTERNAL PERIPHERAL COMPONENTS OF ANY TYPE VENTRICULAR ASSIST DEVICE, REPLACEMENT ONLY	1
Q0501	SHOWER COVER FOR USE WITH ELECTRIC OR ELECTRIC/PNEUMATIC VENTRICULAR ASSIST DEVICE, REPLACEMENT ONLY	1
Q0502	MOBILITY CART FOR PNEUMATIC VENTRICULAR ASSIST DEVICE, REPLACEMENT ONLY	1
Q0503	BATTERY FOR PNEUMATIC VENTRICULAR ASSIST DEVICE, REPLACEMENT ONLY, EACH	3
Q0504	POWER ADAPTER FOR PNEUMATIC VENTRICULAR ASSIST DEVICE, REPLACEMENT ONLY, VEHICLE TYPE	1
Q0506	BATTERY, LITHIUM-ION, FOR USE WITH ELECTRIC OR ELECTRIC/PNEUMATIC VENTRICULAR ASSIST DEVICE, REPLACEMENT ONLY	8
Q0507	MISCELLANEOUS SUPPLY OR ACCESSORY FOR USE WITH AN EXTERNAL VENTRICULAR ASSIST DEVICE	1
Q0508	MISCELLANEOUS SUPPLY OR ACCESSORY FOR USE WITH AN IMPLANTED VENTRICULAR ASSIST DEVICE	24
Q0509	MISCELLANEOUS SUPPLY OR ACCESSORY FOR USE WITH ANY IMPLANTED VENTRICULAR ASSIST DEVICE FOR WHICH PAYMENT WAS NOT MADE UNDER MEDICARE PART A	2
Q0510	PHARMACY SUPPLY FEE FOR INITIAL IMMUNOSUPPRESSIVE DRUG(S), FIRST MONTH FOLLOWING TRANSPLANT	1
Q0511	PHARMACY SUPPLY FEE FOR ORAL ANTI-CANCER, ORAL ANTI-EMETIC OR IMMUNOSUPPRESSIVE DRUG(S); FOR THE FIRST PRESCRIPTION IN A 30-DAY PERIOD	1

Q0512	PHARMACY SUPPLY FEE FOR ORAL ANTI-CANCER, ORAL ANTI-EMETIC OR IMMUNOSUPPRESSIVE DRUG(S); FOR A SUBSEQUENT PRESCRIPTION IN A 30-DAY PERIOD	4
Q0513	PHARMACY DISPENSING FEE FOR INHALATION DRUG(S); PER 30 DAYS	1
Q0514	PHARMACY DISPENSING FEE FOR INHALATION DRUG(S); PER 90 DAYS	1
Q1004	NEW TECHNOLOGY INTRAOCULAR LENS CATEGORY 4 AS DEFINED IN FEDERAL REGISTER NOTICE	2
Q1005	NEW TECHNOLOGY INTRAOCULAR LENS CATEGORY 5 AS DEFINED IN FEDERAL REGISTER NOTICE	2
Q2004	IRRIGATION SOLUTION FOR TREATMENT OF BLADDER CALCULI, FOR EXAMPLE RENACIDIN, PER 500 ML	1
Q2009	INJECTION, FOSPHENYTOIN, 50 MG PHENYTOIN EQUIVALENT	100
Q2017	INJECTION, TENIPOSIDE, 50 MG	12
Q2026	INJECTION, RADIESSE, 0.1 ML	30
Q2028	INJECTION, SCULPTRA, 0.5 MG	1470
Q2034	INFLUENZA VIRUS VACCINE, SPLIT VIRUS, FOR INTRAMUSCULAR USE (AGRIFLU)	1
Q2035	INFLUENZA VIRUS VACCINE, SPLIT VIRUS, WHEN ADMINISTERED TO INDIVIDUALS 3 YEARS OF AGE AND OLDER, FOR INTRAMUSCULAR USE (AFLURIA)	1
Q2036	INFLUENZA VIRUS VACCINE, SPLIT VIRUS, WHEN ADMINISTERED TO INDIVIDUALS 3 YEARS OF AGE AND OLDER, FOR INTRAMUSCULAR USE (FLULAVAL)	1
Q2037	INFLUENZA VIRUS VACCINE, SPLIT VIRUS, WHEN ADMINISTERED TO INDIVIDUALS 3 YEARS OF AGE AND OLDER, FOR INTRAMUSCULAR USE (FLUVIRIN)	1
Q2038	INFLUENZA VIRUS VACCINE, SPLIT VIRUS, WHEN ADMINISTERED TO INDIVIDUALS 3 YEARS OF AGE AND OLDER, FOR INTRAMUSCULAR USE (FLUZONE)	1
Q2039	INFLUENZA VIRUS VACCINE, NOT OTHERWISE SPECIFIED	1
Q2043	SIPULEUCEL-T, MINIMUM OF 50 MILLION AUTOLOGOUS CD54+ CELLS ACTIVATED WITH PAP-GM-CSF, INCLUDING LEUKAPHERESIS AND ALL OTHER PREPARATORY PROCEDURES, PER INFUSION	1
Q2049	INJECTION, DOXORUBICIN HYDROCHLORIDE, LIPOSOMAL, IMPORTED LIPODOX, 10 MG	10
Q2050	INJECTION, DOXORUBICIN HYDROCHLORIDE, LIPOSOMAL, NOT OTHERWISE SPECIFIED, 10 MG	20
Q2052	SERVICES, SUPPLIES AND ACCESSORIES USED IN THE HOME UNDER THE MEDICARE INTRAVENOUS IMMUNE GLOBULIN (IVIG) DEMONSTRATION	1
Q3014	TELEHEALTH ORIGINATING SITE FACILITY FEE	1
Q3027	INJECTION, INTERFERON BETA-1A, 1 MCG FOR INTRAMUSCULAR USE	30
Q3028	INJECTION, INTERFERON BETA-1A, 1 MCG FOR SUBCUTANEOUS USE	44
Q3031	COLLAGEN SKIN TEST	1
Q4001	CASTING SUPPLIES, BODY CAST ADULT, WITH OR WITHOUT HEAD, PLASTER	1

Q4002	CAST SUPPLIES, BODY CAST ADULT, WITH OR WITHOUT HEAD, FIBERGLASS	1
Q4003	CAST SUPPLIES, SHOULDER CAST, ADULT (11 YEARS +), PLASTER	2
Q4004	CAST SUPPLIES, SHOULDER CAST, ADULT (11 YEARS +), FIBERGLASS	2
Q4025	CAST SUPPLIES, HIP SPICA (ONE OR BOTH LEGS), ADULT (11 YEARS +), PLASTER	1
Q4026	CAST SUPPLIES, HIP SPICA (ONE OR BOTH LEGS), ADULT (11 YEARS +), FIBERGLASS	1
Q4027	CAST SUPPLIES, HIP SPICA (ONE OR BOTH LEGS), PEDIATRIC (0-10 YEARS), PLASTER	1
Q4028	CAST SUPPLIES, HIP SPICA (ONE OR BOTH LEGS), PEDIATRIC (0-10 YEARS), FIBERGLASS	1
Q4050	CAST SUPPLIES, FOR UNLISTED TYPES AND MATERIALS OF CASTS	2
Q4051	SPLINT SUPPLIES, MISCELLANEOUS (INCLUDES THERMOPLASTICS, STRAPPING, FASTENERS, PADDING AND OTHER SUPPLIES)	2
Q4074	ILOPROST, INHALATION SOLUTION, FDA-APPROVED FINAL PRODUCT, NON-COMPOUNDED, ADMINISTERED THROUGH DME, UNIT DOSE FORM, UP TO 20 MICROGRAMS	93
Q4101	APLIGRAF, PER SQUARE CENTIMETER	100
Q4106	DERMAGRAFT, PER SQUARE CENTIMETER	100
Q4107	GRAFTJACKET, PER SQUARE CENTIMETER	100
Q5001	HOSPICE OR HOME HEALTH CARE PROVIDED IN PATIENT'S HOME/RESIDENCE	1
Q5002	HOSPICE OR HOME HEALTH CARE PROVIDED IN ASSISTED LIVING FACILITY	1
Q5003	HOSPICE CARE PROVIDED IN NURSING LONG TERM CARE FACILITY (LTC) OR NON-SKILLED NURSING FACILITY (NF)	1
Q5004	HOSPICE CARE PROVIDED IN SKILLED NURSING FACILITY (SNF)	1
Q5007	HOSPICE CARE PROVIDED IN LONG TERM CARE FACILITY	1
Q5009	HOSPICE OR HOME HEALTH CARE PROVIDED IN PLACE NOT OTHERWISE SPECIFIED (NOS)	1
Q5010	HOSPICE HOME CARE PROVIDED IN A HOSPICE FACILITY	1
Q5101	INJECTION, FILGRASTIM-SNDZ, BIOSIMILAR, (ZARXIO), 1 MICROGRAM	1500
Q5103	INJECTION, INFLIXIMAB-DYYB, BIOSIMILAR, (INFLECTRA), 10 MG	150
Q5104	INJECTION, INFLIXIMAB-ABDA, BIOSIMILAR, (RENFLEXIS), 10 MG	150
Q5105	INJECTION, EPOETIN ALFA-EPBX, BIOSIMILAR, (RETACRIT) (FOR ESRD ON DIALYSIS), 100 UNITS	400
Q5106	INJECTION, EPOETIN ALFA-EPBX, BIOSIMILAR, (RETACRIT) (FOR NON-ESRD USE), 1000 UNITS	60
Q5107	INJECTION, BEVACIZUMAB-AWWB, BIOSIMILAR, (MVASI), 10 MG	170
Q5108	INJECTION, PEGFILGRASTIM-JMDB, BIOSIMILAR, (FULPHILA), 0.5 MG	12
Q5109	INJECTION, INFLIXIMAB-QBTX, BIOSIMILAR, (IXIFI), 10 MG	150
Q5110	INJECTION, FILGRASTIM-AAFI, BIOSIMILAR, (NIVESTYM), 1 MICROGRAM	1500

Q5111	INJECTION, PEGFILGRASTIM-CBQV, BIOSIMILAR, (UDENYCA), 0.5 MG	12
Q5112	INJECTION, TRASTUZUMAB-DTTB, BIOSIMILAR, (ONTRUZANT), 10 MG	120
Q5113	INJECTION, TRASTUZUMAB-PKRB, BIOSIMILAR, (HERZUMA), 10 MG	120
Q5114	INJECTION, TRASTUZUMAB-DKST, BIOSIMILAR, (OGIVRI), 10 MG	120
Q5115	INJECTION, RITUXIMAB-ABBS, BIOSIMILAR, (TRUXIMA), 10 MG	150
Q5116	INJECTION, TRASTUZUMAB-QYYP, BIOSIMILAR, (TRAZIMERA), 10 MG	120
Q5117	INJECTION, TRASTUZUMAB-ANNS, BIOSIMILAR, (KANJINTI), 10 MG	120
Q5118	INJECTION, BEVACIZUMAB-BVZR, BIOSIMILAR, (ZIRABEV), 10 MG	230
Q5119	INJECTION, RITUXIMAB-PVVR, BIOSIMILAR, (RUXIENCE), 10 MG	150
Q5120	INJECTION, PEGFILGRASTIM-BMEZ, BIOSIMILAR, (ZIEXTENZO), 0.5 MG	12
Q5121	INJECTION, INFLIXIMAB-AXXQ, BIOSIMILAR, (AVSOLA), 10 MG	150
Q5122	INJECTION, PEGFILGRASTIM-APGF, BIOSIMILAR, (NYVEPRIA), 0.5 MG	12
Q5123	Injection, rituximab-arrx, biosimilar, (riabni), 10 mg	150
Q9001	ASSESSMENT BY DEPARTMENT OF VETERANS AFFAIRS CHAPLAIN SERVICES	1
Q9002	COUNSELING, INDIVIDUAL, BY DEPARTMENT OF VETERANS AFFAIRS CHAPLAIN SERVICES	1
Q9003	COUNSELING, GROUP, BY DEPARTMENT OF VETERANS AFFAIRS CHAPLAIN SERVICES	1
Q9950	INJECTION, SULFUR HEXAFLUORIDE LIPID MICROSPHERES, PER ML	5
Q9953	INJECTION, IRON-BASED MAGNETIC RESONANCE CONTRAST AGENT, PER ML	10
Q9954	ORAL MAGNETIC RESONANCE CONTRAST AGENT, PER 100 ML	18
Q9956	INJECTION, OCTAFLUOROPROPANE MICROSPHERES, PER ML	9
Q9957	INJECTION, PERFLUTREN LIPID MICROSPHERES, PER ML	3
Q9958	HIGH OSMOLAR CONTRAST MATERIAL, UP TO 149 MG/ML IODINE CONCENTRATION, PER ML	600
Q9960	HIGH OSMOLAR CONTRAST MATERIAL, 200-249 MG/ML IODINE CONCENTRATION, PER ML	250
Q9961	HIGH OSMOLAR CONTRAST MATERIAL, 250-299 MG/ML IODINE CONCENTRATION, PER ML	200
Q9962	HIGH OSMOLAR CONTRAST MATERIAL, 300-349 MG/ML IODINE CONCENTRATION, PER ML	200
Q9963	HIGH OSMOLAR CONTRAST MATERIAL, 350-399 MG/ML IODINE CONCENTRATION, PER ML	240
Q9966	LOW OSMOLAR CONTRAST MATERIAL, 200-299 MG/ML IODINE CONCENTRATION, PER ML	250
Q9967	LOW OSMOLAR CONTRAST MATERIAL, 300-399 MG/ML IODINE CONCENTRATION, PER ML	300

Q9969	TC-99M FROM NON-HIGHLY ENRICHED URANIUM SOURCE, FULL COST RECOVERY ADD-ON, PER STUDY DOSE	3
Q9982	FLUTEMETAMOL F18, DIAGNOSTIC, PER STUDY DOSE, UP TO 5 MILLICURIES	1
Q9983	FLORBETABEN F18, DIAGNOSTIC, PER STUDY DOSE, UP TO 8.1 MILLICURIES	1
Q9991	INJECTION, BUPRENORPHINE EXTENDED-RELEASE (SUBLOCADE), LESS THAN OR EQUAL TO 100 MG	1
Q9992	INJECTION, BUPRENORPHINE EXTENDED-RELEASE (SUBLOCADE), GREATER THAN 100 MG	1
R0070	TRANSPORTATION OF PORTABLE X-RAY EQUIPMENT AND PERSONNEL TO HOME OR NURSING HOME, PER TRIP TO FACILITY OR LOCATION, ONE PATIENT SEEN	1
R0075	TRANSPORTATION OF PORTABLE X-RAY EQUIPMENT AND PERSONNEL TO HOME OR NURSING HOME, PER TRIP TO FACILITY OR LOCATION, MORE THAN ONE PATIENT SEEN	2
R0076	TRANSPORTATION OF PORTABLE EKG TO FACILITY OR LOCATION, PER PATIENT	1
S0197	PRENATAL VITAMINS, 30-DAY SUPPLY	1
S0199	MEDICALLY INDUCED ABORTION BY ORAL INGESTION OF MEDICATION INCLUDING ALL ASSOCIATED SERVICES AND SUPPLIES (E.G., PATIENT COUNSELING, OFFICE VISITS, CONFIRMATION OF PREGNANCY BY HCG, ULTRASOUND TO CONFIRM DURATION OF PREGNANCY, ULTRASOUND TO CONFIRM COMPLETION OF ABORTION) EXCEPT DRUGS	1
S0201	PARTIAL HOSPITALIZATION SERVICES, LESS THAN 24 HOURS, PER DIEM	1
S0215	NON-EMERGENCY TRANSPORTATION; MILEAGE, PER MILE	300
S0220	MEDICAL CONFERENCE BY A PHYSICIAN WITH INTERDISCIPLINARY TEAM OF HEALTH PROFESSIONALS OR REPRESENTATIVES OF COMMUNITY AGENCIES TO COORDINATE ACTIVITIES OF PATIENT CARE (PATIENT IS PRESENT); APPROXIMATELY 30 MINUTES	1
S0221	MEDICAL CONFERENCE BY A PHYSICIAN WITH INTERDISCIPLINARY TEAM OF HEALTH PROFESSIONALS OR REPRESENTATIVES OF COMMUNITY AGENCIES TO COORDINATE ACTIVITIES OF PATIENT CARE (PATIENT IS PRESENT); APPROXIMATELY 60 MINUTES	1
S0250	COMPREHENSIVE GERIATRIC ASSESSMENT AND TREATMENT PLANNING PERFORMED BY ASSESSMENT TEAM	1
S0255	HOSPICE REFERRAL VISIT (ADVISING PATIENT AND FAMILY OF CARE OPTIONS) PERFORMED BY NURSE, SOCIAL WORKER, OR OTHER DESIGNATED STAFF	1
S0285	COLONOSCOPY CONSULTATION PERFORMED PRIOR TO A SCREENING COLONOSCOPY PROCEDURE	1
S0302	COMPLETED EARLY PERIODIC SCREENING DIAGNOSIS AND TREATMENT (EPSDT) SERVICE (LIST IN ADDITION TO CODE FOR APPROPRIATE EVALUATION AND MANAGEMENT SERVICE)	1
S0310	HOSPITALIST SERVICES (LIST SEPARATELY IN ADDITION TO CODE FOR APPROPRIATE EVALUATION AND MANAGEMENT SERVICE)	1
S0311	COMPREHENSIVE MANAGEMENT AND CARE COORDINATION FOR ADVANCED ILLNESS, PER CALENDAR MONTH	1

S0315	DISEASE MANAGEMENT PROGRAM; INITIAL ASSESSMENT AND INITIATION OF THE PROGRAM	1
S0316	DISEASE MANAGEMENT PROGRAM, FOLLOW-UP/REASSESSMENT	1
S0317	DISEASE MANAGEMENT PROGRAM; PER DIEM	1
S0390	ROUTINE FOOT CARE; REMOVAL AND/OR TRIMMING OF CORNS, CALLUSES AND/OR NAILS AND PREVENTIVE MAINTENANCE IN SPECIFIC MEDICAL CONDITIONS (E.G., DIABETES), PER VISIT	1
S0395	IMPRESSION CASTING OF A FOOT PERFORMED BY A PRACTITIONER OTHER THAN THE MANUFACTURER OF THE ORTHOTIC	2
S0516	SAFETY EYEGLASS FRAMES	1
S0580	POLYCARBONATE LENS (LIST THIS CODE IN ADDITION TO THE BASIC CODE FOR THE LENS)	2
S0581	NONSTANDARD LENS (LIST THIS CODE IN ADDITION TO THE BASIC CODE FOR THE LENS)	2
S0592	COMPREHENSIVE CONTACT LENS EVALUATION	1
S0610	ANNUAL GYNECOLOGICAL EXAMINATION, NEW PATIENT	1
S0612	ANNUAL GYNECOLOGICAL EXAMINATION, ESTABLISHED PATIENT	1
S0613	ANNUAL GYNECOLOGICAL EXAMINATION; CLINICAL BREAST EXAMINATION WITHOUT PELVIC EVALUATION	1
S0618	AUDIOMETRY FOR HEARING AID EVALUATION TO DETERMINE THE LEVEL AND DEGREE OF HEARING LOSS	1
S0620	ROUTINE OPHTHALMOLOGICAL EXAMINATION INCLUDING REFRACTION; NEW PATIENT	1
S0621	ROUTINE OPHTHALMOLOGICAL EXAMINATION INCLUDING REFRACTION; ESTABLISHED PATIENT	1
S0630	REMOVAL OF SUTURES; BY A PHYSICIAN OTHER THAN THE PHYSICIAN WHO ORIGINALLY CLOSED THE WOUND	1
S1040	CRANIAL REMOLDING ORTHOSIS, PEDIATRIC, RIGID, WITH SOFT INTERFACE MATERIAL, CUSTOM FABRICATED, INCLUDES FITTING AND ADJUSTMENT(S)	2
S2066	BREAST RECONSTRUCTION WITH GLUTEAL ARTERY PERFORATOR (GAP) FLAP, INCLUDING HARVESTING OF THE FLAP, MICROVASCULAR TRANSFER, CLOSURE OF DONOR SITE AND SHAPING THE FLAP INTO A BREAST, UNILATERAL	2
S2067	BREAST RECONSTRUCTION OF A SINGLE BREAST WITH STACKED DEEP INFERIOR EPIGASTRIC PERFORATOR (DIEP) FLAP(S) AND/OR GLUTEAL ARTERY PERFORATOR (GAP) FLAP(S), INCLUDING HARVESTING OF THE FLAP(S), MICROVASCULAR TRANSFER, CLOSURE OF DONOR SITE(S) AND SHAPING THE FLAP INTO A BREAST, UNILATERAL	2
S2068	BREAST RECONSTRUCTION WITH DEEP INFERIOR EPIGASTRIC PERFORATOR (DIEP) FLAP OR SUPERFICIAL INFERIOR EPIGASTRIC ARTERY (SIEA) FLAP, INCLUDING HARVESTING OF THE FLAP, MICROVASCULAR TRANSFER, CLOSURE OF DONOR SITE AND SHAPING THE FLAP INTO A BREAST, UNILATERAL	1

S2070	CYSTOURETHROSCOPY, WITH URETEROSCOPY AND/OR PYELOSCOPY; WITH ENDOSCOPIC LASER TREATMENT OF URETERAL CALCULI (INCLUDES URETERAL CATHETERIZATION)	1
S2079	LAPAROSCOPIC ESOPHAGOMYOTOMY (HELLER TYPE)	1
S2083	ADJUSTMENT OF GASTRIC BAND DIAMETER VIA SUBCUTANEOUS PORT BY INJECTION OR ASPIRATION OF SALINE	1
S2117	ARTHROEREISIS, SUBTALAR	1
S2150	BONE MARROW OR BLOOD-DERIVED STEM CELLS (PERIPHERAL OR UMBILICAL), ALLOGENEIC OR AUTOLOGOUS, HARVESTING, TRANSPLANTATION, AND RELATED COMPLICATIONS; INCLUDING: PHERESIS AND CELL PREPARATION/STORAGE; MARROW ABLATIVE THERAPY; DRUGS, SUPPLIES, HOSPITALIZATION WITH OUTPATIENT FOLLOW-UP; MEDICAL/SURGICAL, DIAGNOSTIC, EMERGENCY, AND REHABILITATIVE SERVICES; AND THE NUMBER OF DAYS OF PRE-AND POSTTRANSPLANT CARE IN THE GLOBAL DEFINITION	1
S2225	MYRINGOTOMY, LASER-ASSISTED	1
S2260	INDUCED ABORTION, 17 TO 24 WEEKS	1
S2325	HIP CORE DECOMPRESSION	1
S2350	DISKECTOMY, ANTERIOR, WITH DECOMPRESSION OF SPINAL CORD AND/OR NERVE ROOT(S), INCLUDING OSTEOPHYTECTOMY; LUMBAR, SINGLE INTERSPACE	1
S2401	REPAIR, URINARY TRACT OBSTRUCTION IN THE FETUS, PROCEDURE PERFORMED IN UTERO	1
S2411	FETOSCOPIC LASER THERAPY FOR TREATMENT OF TWIN-TO-TWIN TRANSFUSION SYNDROME	1
S2900	SURGICAL TECHNIQUES REQUIRING USE OF ROBOTIC SURGICAL SYSTEM (LIST SEPARATELY IN ADDITION TO CODE FOR PRIMARY PROCEDURE)	1
S3005	PERFORMANCE MEASUREMENT, EVALUATION OF PATIENT SELF ASSESSMENT, DEPRESSION	1
S3620	NEWBORN METABOLIC SCREENING PANEL, INCLUDES TEST KIT, POSTAGE AND THE LABORATORY TESTS SPECIFIED BY THE STATE FOR INCLUSION IN THIS PANEL (E.G., GALACTOSE; HEMOGLOBIN, ELECTROPHORESIS; HYDROXYPROGESTERONE, 17-D; PHENYLALANINE (PKU); AND THYROXINE, TOTAL)	1
S3645	HIV-1 ANTIBODY TESTING OF ORAL MUCOSAL TRANSUDATE	1
S3854	GENE EXPRESSION PROFILING PANEL FOR USE IN THE MANAGEMENT OF BREAST CANCER TREATMENT	1
S4005	INTERIM LABOR FACILITY GLOBAL (LABOR OCCURRING BUT NOT RESULTING IN DELIVERY)	1
S4989	CONTRACEPTIVE INTRAUTERINE DEVICE (E.G., PROGESTACERT IUD), INCLUDING IMPLANTS AND SUPPLIES	1
S5101	DAY CARE SERVICES, ADULT; PER HALF DAY	1
S5102	DAY CARE SERVICES, ADULT; PER DIEM	1
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S5105	DAY CARE SERVICES, CENTER-BASED; SERVICES NOT INCLUDED IN PROGRAM FEE, PER DIEM	1
S5109	HOME CARE TRAINING TO HOME CARE CLIENT, PER SESSION	1
S5111	HOME CARE TRAINING, FAMILY; PER SESSION	1
S5116	HOME CARE TRAINING, NON-FAMILY; PER SESSION	1
S5121	CHORE SERVICES; PER DIEM	1
S5126	ATTENDANT CARE SERVICES; PER DIEM	1
S5130	HOMEMAKER SERVICE, NOS; PER 15 MINUTES	1440
S5131	HOMEMAKER SERVICE, NOS; PER DIEM	1
S5136	COMPANION CARE, ADULT (E.G., IADL/ADL); PER DIEM	1
S5140	FOSTER CARE, ADULT; PER DIEM	1
S5141	FOSTER CARE, ADULT; PER MONTH	1
S5145	FOSTER CARE, THERAPEUTIC, CHILD; PER DIEM	1
S5146	FOSTER CARE, THERAPEUTIC, CHILD; PER MONTH	1
S5150	UNSKILLED RESPITE CARE, NOT HOSPICE; PER 15 MINUTES	96
S5151	UNSKILLED RESPITE CARE, NOT HOSPICE; PER DIEM	1
S5160	EMERGENCY RESPONSE SYSTEM; INSTALLATION AND TESTING	1
S5161	EMERGENCY RESPONSE SYSTEM; SERVICE FEE, PER MONTH (EXCLUDES INSTALLATION AND TESTING)	1
S5162	EMERGENCY RESPONSE SYSTEM; PURCHASE ONLY	1
S5165	HOME MODIFICATIONS; PER SERVICE	3
S5180	HOME HEALTH RESPIRATORY THERAPY, INITIAL EVALUATION	1
S5181	HOME HEALTH RESPIRATORY THERAPY, NOS, PER DIEM	1
S5185	MEDICATION REMINDER SERVICE, NON-FACE-TO-FACE; PER MONTH	1
S5190	WELLNESS ASSESSMENT, PERFORMED BY NON-PHYSICIAN	1
S5497	HOME INFUSION THERAPY, CATHETER CARE / MAINTENANCE, NOT OTHERWISE CLASSIFIED; INCLUDES ADMINISTRATIVE SERVICES, PROFESSIONAL PHARMACY SERVICES, CARE COORDINATION, AND ALL NECESSARY SUPPLIES AND EQUIPMENT (DRUGS AND NURSING VISITS CODED SEPARATELY), PER DIEM	1
S5498	HOME INFUSION THERAPY, CATHETER CARE / MAINTENANCE, SIMPLE (SINGLE LUMEN), INCLUDES ADMINISTRATIVE SERVICES, PROFESSIONAL PHARMACY SERVICES, CARE COORDINATION AND ALL NECESSARY SUPPLIES AND EQUIPMENT, (DRUGS AND NURSING VISITS CODED SEPARATELY), PER DIEM	1
S5501	HOME INFUSION THERAPY, CATHETER CARE / MAINTENANCE, COMPLEX (MORE THAN ONE LUMEN), INCLUDES ADMINISTRATIVE SERVICES, PROFESSIONAL PHARMACY SERVICES, CARE COORDINATION, AND ALL NECESSARY SUPPLIES AND EQUIPMENT (DRUGS AND NURSING VISITS CODED SEPARATELY), PER DIEM	1

S5502	HOME INFUSION THERAPY, CATHETER CARE / MAINTENANCE, IMPLANTED ACCESS DEVICE, INCLUDES ADMINISTRATIVE SERVICES, PROFESSIONAL PHARMACY SERVICES, CARE COORDINATION AND ALL NECESSARY SUPPLIES AND EQUIPMENT, (DRUGS AND NURSING VISITS CODED SEPARATELY), PER DIEM (USE THIS CODE FOR INTERIM MAINTENANCE OF VASCULAR ACCESS NOT CURRENTLY IN USE)	1
S5517	HOME INFUSION THERAPY, ALL SUPPLIES NECESSARY FOR RESTORATION OF CATHETER PATENCY OR DECLOTTING	1
S5520	HOME INFUSION THERAPY, ALL SUPPLIES (INCLUDING CATHETER) NECESSARY FOR A PERIPHERALLY INSERTED CENTRAL VENOUS CATHETER (PICC) LINE INSERTION	1
S5561	INSULIN DELIVERY DEVICE, REUSABLE PEN; 3 ML SIZE	1
S8037	MAGNETIC RESONANCE CHOLANGIOPANCREATOGRAPHY (MRCP)	1
S8096	PORTABLE PEAK FLOW METER	1
S8100	HOLDING CHAMBER OR SPACER FOR USE WITH AN INHALER OR NEBULIZER; WITHOUT MASK	2
S8101	HOLDING CHAMBER OR SPACER FOR USE WITH AN INHALER OR NEBULIZER; WITH MASK	2
S8110	PEAK EXPIRATORY FLOW RATE (PHYSICIAN SERVICES)	2
S8185	FLUTTER DEVICE	1
S8186	SWIVEL ADAPTER	4
S8210	MUCUS TRAP	3
S8270	ENURESIS ALARM, USING AUDITORY BUZZER AND/OR VIBRATION DEVICE	1
S8420	GRADIENT PRESSURE AID (SLEEVE AND GLOVE COMBINATION), CUSTOM MADE	2
S8421	GRADIENT PRESSURE AID (SLEEVE AND GLOVE COMBINATION), READY MADE	2
S8422	GRADIENT PRESSURE AID (SLEEVE), CUSTOM MADE, MEDIUM WEIGHT	2
S8423	GRADIENT PRESSURE AID (SLEEVE), CUSTOM MADE, HEAVY WEIGHT	2
S8424	GRADIENT PRESSURE AID (SLEEVE), READY MADE	4
S8425	GRADIENT PRESSURE AID (GLOVE), CUSTOM MADE, MEDIUM WEIGHT	2
S8426	GRADIENT PRESSURE AID (GLOVE), CUSTOM MADE, HEAVY WEIGHT	2
S8427	GRADIENT PRESSURE AID (GLOVE), READY MADE	2
S8428	GRADIENT PRESSURE AID (GAUNTLET), READY MADE	2
S8429	GRADIENT PRESSURE EXTERIOR WRAP	2
S8450	SPLINT, PREFABRICATED, DIGIT (SPECIFY DIGIT BY USE OF MODIFIER)	1
S8451	SPLINT, PREFABRICATED, WRIST OR ANKLE	2
S8452	SPLINT, PREFABRICATED, ELBOW	2
S8460	CAMISOLE, POST-MASTECTOMY	2
S8490	INSULIN SYRINGES (100 SYRINGES, ANY SIZE)	3
S8940	EQUESTRIAN/HIPPOTHERAPY, PER SESSION	32

S8990	PHYSICAL OR MANIPULATIVE THERAPY PERFORMED FOR MAINTENANCE RATHER THAN RESTORATION	1
S8999	RESUSCITATION BAG (FOR USE BY PATIENT ON ARTIFICIAL RESPIRATION DURING POWER FAILURE OR OTHER CATASTROPHIC EVENT)	1
S9001	HOME UTERINE MONITOR WITH OR WITHOUT ASSOCIATED NURSING SERVICES	1
S9025	OMNICARDIOGRAM/CARDIOINTEGRAM	1
S9083	GLOBAL FEE URGENT CARE CENTERS	1
S9088	SERVICES PROVIDED IN AN URGENT CARE CENTER (LIST IN ADDITION TO CODE FOR SERVICE)	1
\$9123	NURSING CARE, IN THE HOME; BY REGISTERED NURSE, PER HOUR (USE FOR GENERAL NURSING CARE ONLY, NOT TO BE USED WHEN CPT CODES 99500-99602 CAN BE USED)	744
S9124	NURSING CARE, IN THE HOME; BY LICENSED PRACTICAL NURSE, PER HOUR	744
S9125	RESPITE CARE, IN THE HOME, PER DIEM	1
S9126	HOSPICE CARE, IN THE HOME, PER DIEM	1
S9127	SOCIAL WORK VISIT, IN THE HOME, PER DIEM	1
S9128	SPEECH THERAPY, IN THE HOME, PER DIEM	1
S9129	OCCUPATIONAL THERAPY, IN THE HOME, PER DIEM	1
S9131	PHYSICAL THERAPY; IN THE HOME, PER DIEM	1
S9152	SPEECH THERAPY, RE-EVALUATION	1
S9211	HOME MANAGEMENT OF GESTATIONAL HYPERTENSION, INCLUDES ADMINISTRATIVE SERVICES, PROFESSIONAL PHARMACY SERVICES, CARE COORDINATION AND ALL NECESSARY SUPPLIES AND EQUIPMENT (DRUGS AND NURSING VISITS CODED SEPARATELY); PER DIEM (DO NOT USE THIS CODE WITH ANY HOME INFUSION PER DIEM CODE)	1
S9325	HOME INFUSION THERAPY, PAIN MANAGEMENT INFUSION; ADMINISTRATIVE SERVICES, PROFESSIONAL PHARMACY SERVICES, CARE COORDINATION, AND ALL NECESSARY SUPPLIES AND EQUIPMENT, (DRUGS AND NURSING VISITS CODED SEPARATELY), PER DIEM (DO NOT USE THIS CODE WITH S9326, S9327 OR S9328)	1
S9326	HOME INFUSION THERAPY, CONTINUOUS (TWENTY-FOUR HOURS OR MORE) PAIN MANAGEMENT INFUSION; ADMINISTRATIVE SERVICES, PROFESSIONAL PHARMACY SERVICES, CARE COORDINATION AND ALL NECESSARY SUPPLIES AND EQUIPMENT (DRUGS AND NURSING VISITS CODED SEPARATELY), PER DIEM	1
S9327	HOME INFUSION THERAPY, INTERMITTENT (LESS THAN TWENTY-FOUR HOURS) PAIN MANAGEMENT INFUSION; ADMINISTRATIVE SERVICES, PROFESSIONAL PHARMACY SERVICES, CARE COORDINATION, AND ALL NECESSARY SUPPLIES AND EQUIPMENT (DRUGS AND NURSING VISITS CODED SEPARATELY), PER DIEM	1
S9328	HOME INFUSION THERAPY, IMPLANTED PUMP PAIN MANAGEMENT INFUSION; ADMINISTRATIVE SERVICES, PROFESSIONAL PHARMACY SERVICES, CARE COORDINATION, AND ALL NECESSARY SUPPLIES AND EQUIPMENT (DRUGS AND NURSING VISITS CODED SEPARATELY), PER DIEM	1

S9329	HOME INFUSION THERAPY, CHEMOTHERAPY INFUSION; ADMINISTRATIVE SERVICES, PROFESSIONAL PHARMACY SERVICES, CARE COORDINATION, AND ALL NECESSARY SUPPLIES AND EQUIPMENT (DRUGS AND NURSING VISITS CODED SEPARATELY), PER DIEM (DO NOT USE THIS CODE WITH S9330 OR S9331)	1
S9330	HOME INFUSION THERAPY, CONTINUOUS (TWENTY-FOUR HOURS OR MORE) CHEMOTHERAPY INFUSION; ADMINISTRATIVE SERVICES, PROFESSIONAL PHARMACY SERVICES, CARE COORDINATION, AND ALL NECESSARY SUPPLIES AND EQUIPMENT (DRUGS AND NURSING VISITS CODED SEPARATELY), PER DIEM	1
\$9331	HOME INFUSION THERAPY, INTERMITTENT (LESS THAN TWENTY-FOUR HOURS) CHEMOTHERAPY INFUSION; ADMINISTRATIVE SERVICES, PROFESSIONAL PHARMACY SERVICES, CARE COORDINATION, AND ALL NECESSARY SUPPLIES AND EQUIPMENT (DRUGS AND NURSING VISITS CODED SEPARATELY), PER DIEM	1
S9335	HOME THERAPY, HEMODIALYSIS; ADMINISTRATIVE SERVICES, PROFESSIONAL PHARMACY SERVICES, CARE COORDINATION, AND ALL NECESSARY SUPPLIES AND EQUIPMENT (DRUGS AND NURSING SERVICES CODED SEPARATELY), PER DIEM	1
S9336	HOME INFUSION THERAPY, CONTINUOUS ANTICOAGULANT INFUSION THERAPY (E.G., HEPARIN), ADMINISTRATIVE SERVICES, PROFESSIONAL PHARMACY SERVICES, CARE COORDINATION AND ALL NECESSARY SUPPLIES AND EQUIPMENT (DRUGS AND NURSING VISITS CODED SEPARATELY), PER DIEM	1
S9338	HOME INFUSION THERAPY, IMMUNOTHERAPY, ADMINISTRATIVE SERVICES, PROFESSIONAL PHARMACY SERVICES, CARE COORDINATION, AND ALL NECESSARY SUPPLIES AND EQUIPMENT (DRUGS AND NURSING VISITS CODED SEPARATELY), PER DIEM	1
\$9339	HOME THERAPY; PERITONEAL DIALYSIS, ADMINISTRATIVE SERVICES, PROFESSIONAL PHARMACY SERVICES, CARE COORDINATION AND ALL NECESSARY SUPPLIES AND EQUIPMENT (DRUGS AND NURSING VISITS CODED SEPARATELY), PER DIEM	1
S9340	HOME THERAPY; ENTERAL NUTRITION; ADMINISTRATIVE SERVICES, PROFESSIONAL PHARMACY SERVICES, CARE COORDINATION, AND ALL NECESSARY SUPPLIES AND EQUIPMENT (ENTERAL FORMULA AND NURSING VISITS CODED SEPARATELY), PER DIEM	1
S9341	HOME THERAPY; ENTERAL NUTRITION VIA GRAVITY; ADMINISTRATIVE SERVICES, PROFESSIONAL PHARMACY SERVICES, CARE COORDINATION, AND ALL NECESSARY SUPPLIES AND EQUIPMENT (ENTERAL FORMULA AND NURSING VISITS CODED SEPARATELY), PER DIEM	1
S9342	HOME THERAPY; ENTERAL NUTRITION VIA PUMP; ADMINISTRATIVE SERVICES, PROFESSIONAL PHARMACY SERVICES, CARE COORDINATION, AND ALL NECESSARY SUPPLIES AND EQUIPMENT (ENTERAL FORMULA AND NURSING VISITS CODED SEPARATELY), PER DIEM	1
S9343	HOME THERAPY; ENTERAL NUTRITION VIA BOLUS; ADMINISTRATIVE SERVICES, PROFESSIONAL PHARMACY SERVICES, CARE COORDINATION, AND ALL NECESSARY SUPPLIES AND EQUIPMENT (ENTERAL FORMULA AND NURSING VISITS CODED SEPARATELY), PER DIEM	1
S9345	HOME INFUSION THERAPY, ANTI-HEMOPHILIC AGENT INFUSION THERAPY (E.G., FACTOR VIII); ADMINISTRATIVE SERVICES, PROFESSIONAL PHARMACY SERVICES, CARE COORDINATION, AND ALL NECESSARY SUPPLIES AND EQUIPMENT (DRUGS AND NURSING VISITS CODED SEPARATELY), PER DIEM	1

S9346	HOME INFUSION THERAPY, ALPHA-1-PROTEINASE INHIBITOR (E.G., PROLASTIN); ADMINISTRATIVE SERVICES, PROFESSIONAL PHARMACY SERVICES, CARE COORDINATION, AND ALL NECESSARY SUPPLIES AND EQUIPMENT (DRUGS AND NURSING VISITS CODED SEPARATELY), PER DIEM	1
S9347	HOME INFUSION THERAPY, UNINTERRUPTED, LONG-TERM, CONTROLLED RATE INTRAVENOUS OR SUBCUTANEOUS INFUSION THERAPY (E.G., EPOPROSTENOL); ADMINISTRATIVE SERVICES, PROFESSIONAL PHARMACY SERVICES, CARE COORDINATION, AND ALL NECESSARY SUPPLIES AND EQUIPMENT (DRUGS AND NURSING VISITS CODED SEPARATELY), PER DIEM	1
S9348	HOME INFUSION THERAPY, SYMPATHOMIMETIC/INOTROPIC AGENT INFUSION THERAPY (E.G., DOBUTAMINE); ADMINISTRATIVE SERVICES, PROFESSIONAL PHARMACY SERVICES, CARE COORDINATION, ALL NECESSARY SUPPLIES AND EQUIPMENT (DRUGS AND NURSING VISITS CODED SEPARATELY), PER DIEM	1
S9349	HOME INFUSION THERAPY, TOCOLYTIC INFUSION THERAPY; ADMINISTRATIVE SERVICES, PROFESSIONAL PHARMACY SERVICES, CARE COORDINATION, AND ALL NECESSARY SUPPLIES AND EQUIPMENT (DRUGS AND NURSING VISITS CODED SEPARATELY), PER DIEM	1
S9351	HOME INFUSION THERAPY, CONTINUOUS OR INTERMITTENT ANTI-EMETIC INFUSION THERAPY; ADMINISTRATIVE SERVICES, PROFESSIONAL PHARMACY SERVICES, CARE COORDINATION, AND ALL NECESSARY SUPPLIES AND EQUIPMENT (DRUGS AND VISITS CODED SEPARATELY), PER DIEM	1
S9355	HOME INFUSION THERAPY, CHELATION THERAPY; ADMINISTRATIVE SERVICES, PROFESSIONAL PHARMACY SERVICES, CARE COORDINATION, AND ALL NECESSARY SUPPLIES AND EQUIPMENT (DRUGS AND NURSING VISITS CODED SEPARATELY), PER DIEM	1
S9357	HOME INFUSION THERAPY, ENZYME REPLACEMENT INTRAVENOUS THERAPY; (E.G., IMIGLUCERASE); ADMINISTRATIVE SERVICES, PROFESSIONAL PHARMACY SERVICES, CARE COORDINATION, AND ALL NECESSARY SUPPLIES AND EQUIPMENT (DRUGS AND NURSING VISITS CODED SEPARATELY), PER DIEM	4
S9359	HOME INFUSION THERAPY, ANTI-TUMOR NECROSIS FACTOR INTRAVENOUS THERAPY; (E.G., INFLIXIMAB); ADMINISTRATIVE SERVICES, PROFESSIONAL PHARMACY SERVICES, CARE COORDINATION, AND ALL NECESSARY SUPPLIES AND EQUIPMENT (DRUGS AND NURSING VISITS CODED SEPARATELY), PER DIEM	1
S9363	HOME INFUSION THERAPY, ANTI-SPASMOTIC THERAPY; ADMINISTRATIVE SERVICES, PROFESSIONAL PHARMACY SERVICES, CARE COORDINATION, AND ALL NECESSARY SUPPLIES AND EQUIPMENT (DRUGS AND NURSING VISITS CODED SEPARATELY), PER DIEM	1
S9364	HOME INFUSION THERAPY, TOTAL PARENTERAL NUTRITION (TPN); ADMINISTRATIVE SERVICES, PROFESSIONAL PHARMACY SERVICES, CARE COORDINATION, AND ALL NECESSARY SUPPLIES AND EQUIPMENT INCLUDING STANDARD TPN FORMULA (LIPIDS, SPECIALTY AMINO ACID FORMULAS, DRUGS OTHER THAN IN STANDARD FORMULA AND NURSING VISITS CODED SEPARATELY), PER DIEM (DO NOT USE WITH HOME INFUSION CODES S9365-S9368 USING DAILY VOLUME SCALES)	1

S9365	HOME INFUSION THERAPY, TOTAL PARENTERAL NUTRITION (TPN); ONE LITER PER DAY, ADMINISTRATIVE SERVICES, PROFESSIONAL PHARMACY SERVICES, CARE COORDINATION, AND ALL NECESSARY SUPPLIES AND EQUIPMENT INCLUDING STANDARD TPN FORMULA (LIPIDS, SPECIALTY AMINO ACID FORMULAS, DRUGS OTHER THAN IN STANDARD FORMULA AND NURSING VISITS CODED SEPARATELY), PER DIEM	1
S9366	HOME INFUSION THERAPY, TOTAL PARENTERAL NUTRITION (TPN); MORE THAN ONE LITER BUT NO MORE THAN TWO LITERS PER DAY, ADMINISTRATIVE SERVICES, PROFESSIONAL PHARMACY SERVICES, CARE COORDINATION, AND ALL NECESSARY SUPPLIES AND EQUIPMENT INCLUDING STANDARD TPN FORMULA (LIPIDS, SPECIALTY AMINO ACID FORMULAS, DRUGS OTHER THAN IN STANDARD FORMULA AND NURSING VISITS CODED SEPARATELY), PER DIEM	1
S9367	HOME INFUSION THERAPY, TOTAL PARENTERAL NUTRITION (TPN); MORE THAN TWO LITERS BUT NO MORE THAN THREE LITERS PER DAY, ADMINISTRATIVE SERVICES, PROFESSIONAL PHARMACY SERVICES, CARE COORDINATION, AND ALL NECESSARY SUPPLIES AND EQUIPMENT INCLUDING STANDARD TPN FORMULA (LIPIDS, SPECIALTY AMINO ACID FORMULAS, DRUGS OTHER THAN IN STANDARD FORMULA AND NURSING VISITS CODED SEPARATELY), PER DIEM	1
S9368	HOME INFUSION THERAPY, TOTAL PARENTERAL NUTRITION (TPN); MORE THAN THREE LITERS PER DAY, ADMINISTRATIVE SERVICES, PROFESSIONAL PHARMACY SERVICES, CARE COORDINATION, AND ALL NECESSARY SUPPLIES AND EQUIPMENT INCLUDING STANDARD TPN FORMULA (LIPIDS, SPECIALTY AMINO ACID FORMULAS, DRUGS OTHER THAN IN STANDARD FORMULA AND NURSING VISITS CODED SEPARATELY), PER DIEM	1
S9373	HOME INFUSION THERAPY, HYDRATION THERAPY; ADMINISTRATIVE SERVICES, PROFESSIONAL PHARMACY SERVICES, CARE COORDINATION, AND ALL NECESSARY SUPPLIES AND EQUIPMENT (DRUGS AND NURSING VISITS CODED SEPARATELY), PER DIEM (DO NOT USE WITH HYDRATION THERAPY CODES S9374-S9377 USING DAILY VOLUME SCALES)	1
S9374	HOME INFUSION THERAPY, HYDRATION THERAPY; ONE LITER PER DAY, ADMINISTRATIVE SERVICES, PROFESSIONAL PHARMACY SERVICES, CARE COORDINATION, AND ALL NECESSARY SUPPLIES AND EQUIPMENT (DRUGS AND NURSING VISITS CODED SEPARATELY), PER DIEM	1
S9375	HOME INFUSION THERAPY, HYDRATION THERAPY; MORE THAN ONE LITER BUT NO MORE THAN TWO LITERS PER DAY, ADMINISTRATIVE SERVICES, PROFESSIONAL PHARMACY SERVICES, CARE COORDINATION, AND ALL NECESSARY SUPPLIES AND EQUIPMENT (DRUGS AND NURSING VISITS CODED SEPARATELY), PER DIEM	1
S9376	HOME INFUSION THERAPY, HYDRATION THERAPY; MORE THAN TWO LITERS BUT NO MORE THAN THREE LITERS PER DAY, ADMINISTRATIVE SERVICES, PROFESSIONAL PHARMACY SERVICES, CARE COORDINATION, AND ALL NECESSARY SUPPLIES AND EQUIPMENT (DRUGS AND NURSING VISITS CODED SEPARATELY), PER DIEM	1
S9377	HOME INFUSION THERAPY, HYDRATION THERAPY; MORE THAN THREE LITERS PER DAY, ADMINISTRATIVE SERVICES, PROFESSIONAL PHARMACY SERVICES, CARE COORDINATION, AND ALL NECESSARY SUPPLIES (DRUGS AND NURSING VISITS CODED SEPARATELY), PER DIEM	1

S9379	HOME INFUSION THERAPY, INFUSION THERAPY, NOT OTHERWISE CLASSIFIED; ADMINISTRATIVE SERVICES, PROFESSIONAL PHARMACY SERVICES, CARE COORDINATION, AND ALL NECESSARY SUPPLIES AND EQUIPMENT (DRUGS AND NURSING VISITS CODED SEPARATELY), PER DIEM	1
S9436	CHILDBIRTH PREPARATION/LAMAZE CLASSES, NON-PHYSICIAN PROVIDER, PER SESSION	1
S9437	CHILDBIRTH REFRESHER CLASSES, NON-PHYSICIAN PROVIDER, PER SESSION	1
S9441	ASTHMA EDUCATION, NON-PHYSICIAN PROVIDER, PER SESSION	1
S9442	BIRTHING CLASSES, NON-PHYSICIAN PROVIDER, PER SESSION	1
S9443	LACTATION CLASSES, NON-PHYSICIAN PROVIDER, PER SESSION	1
S9444	PARENTING CLASSES, NON-PHYSICIAN PROVIDER, PER SESSION	1
S9445	PATIENT EDUCATION, NOT OTHERWISE CLASSIFIED, NON-PHYSICIAN PROVIDER, INDIVIDUAL, PER SESSION	2
S9446	PATIENT EDUCATION, NOT OTHERWISE CLASSIFIED, NON-PHYSICIAN PROVIDER, GROUP, PER SESSION	2
S9447	INFANT SAFETY (INCLUDING CPR) CLASSES, NON-PHYSICIAN PROVIDER, PER SESSION	1
S9449	WEIGHT MANAGEMENT CLASSES, NON-PHYSICIAN PROVIDER, PER SESSION	1
S9451	EXERCISE CLASSES, NON-PHYSICIAN PROVIDER, PER SESSION	1
S9452	NUTRITION CLASSES, NON-PHYSICIAN PROVIDER, PER SESSION	1
S9453	SMOKING CESSATION CLASSES, NON-PHYSICIAN PROVIDER, PER SESSION	1
S9455	DIABETIC MANAGEMENT PROGRAM, GROUP SESSION	1
S9460	DIABETIC MANAGEMENT PROGRAM, NURSE VISIT	1
S9465	DIABETIC MANAGEMENT PROGRAM, DIETITIAN VISIT	1
S9470	NUTRITIONAL COUNSELING, DIETITIAN VISIT	96
S9472	CARDIAC REHABILITATION PROGRAM, NON-PHYSICIAN PROVIDER, PER DIEM	1
S9473	PULMONARY REHABILITATION PROGRAM, NON-PHYSICIAN PROVIDER, PER DIEM	1
S9480	INTENSIVE OUTPATIENT PSYCHIATRIC SERVICES, PER DIEM	1
S9484	CRISIS INTERVENTION MENTAL HEALTH SERVICES, PER HOUR	24
S9485	CRISIS INTERVENTION MENTAL HEALTH SERVICES, PER DIEM	1
S9490	HOME INFUSION THERAPY, CORTICOSTEROID INFUSION; ADMINISTRATIVE SERVICES, PROFESSIONAL PHARMACY SERVICES, CARE COORDINATION, AND ALL NECESSARY SUPPLIES AND EQUIPMENT (DRUGS AND NURSING VISITS CODED SEPARATELY), PER DIEM	1
S9494	HOME INFUSION THERAPY, ANTIBIOTIC, ANTIVIRAL, OR ANTIFUNGAL THERAPY; ADMINISTRATIVE SERVICES, PROFESSIONAL PHARMACY SERVICES, CARE COORDINATION, AND ALL NECESSARY SUPPLIES AND EQUIPMENT (DRUGS AND NURSING VISITS CODED SEPARATELY), PER DIEM (DO NOT USE THIS CODE WITH HOME INFUSION CODES FOR HOURLY DOSING SCHEDULES S9497-S9504)	1

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S9497	HOME INFUSION THERAPY, ANTIBIOTIC, ANTIVIRAL, OR ANTIFUNGAL THERAPY; ONCE EVERY 3 HOURS; ADMINISTRATIVE SERVICES, PROFESSIONAL PHARMACY SERVICES, CARE COORDINATION, AND ALL NECESSARY SUPPLIES AND EQUIPMENT (DRUGS AND NURSING VISITS CODED SEPARATELY), PER DIEM	1
\$9501	HOME INFUSION THERAPY, ANTIBIOTIC, ANTIVIRAL, OR ANTIFUNGAL THERAPY; ONCE EVERY 12 HOURS; ADMINISTRATIVE SERVICES, PROFESSIONAL PHARMACY SERVICES, CARE COORDINATION, AND ALL NECESSARY SUPPLIES AND EQUIPMENT (DRUGS AND NURSING VISITS CODED SEPARATELY), PER DIEM	1
S9502	HOME INFUSION THERAPY, ANTIBIOTIC, ANTIVIRAL, OR ANTIFUNGAL THERAPY; ONCE EVERY 8 HOURS, ADMINISTRATIVE SERVICES, PROFESSIONAL PHARMACY SERVICES, CARE COORDINATION, AND ALL NECESSARY SUPPLIES AND EQUIPMENT (DRUGS AND NURSING VISITS CODED SEPARATELY), PER DIEM	1
\$9503	HOME INFUSION THERAPY, ANTIBIOTIC, ANTIVIRAL, OR ANTIFUNGAL; ONCE EVERY 6 HOURS; ADMINISTRATIVE SERVICES, PROFESSIONAL PHARMACY SERVICES, CARE COORDINATION, AND ALL NECESSARY SUPPLIES AND EQUIPMENT (DRUGS AND NURSING VISITS CODED SEPARATELY), PER DIEM	1
S9504	HOME INFUSION THERAPY, ANTIBIOTIC, ANTIVIRAL, OR ANTIFUNGAL; ONCE EVERY 4 HOURS; ADMINISTRATIVE SERVICES, PROFESSIONAL PHARMACY SERVICES, CARE COORDINATION, AND ALL NECESSARY SUPPLIES AND EQUIPMENT (DRUGS AND NURSING VISITS CODED SEPARATELY), PER DIEM	1
\$9529	ROUTINE VENIPUNCTURE FOR COLLECTION OF SPECIMEN(S), SINGLE HOME BOUND, NURSING HOME, OR SKILLED NURSING FACILITY PATIENT	1
S9537	HOME THERAPY; HEMATOPOIETIC HORMONE INJECTION THERAPY (E.G., ERYTHROPOIETIN, G-CSF, GM-CSF); ADMINISTRATIVE SERVICES, PROFESSIONAL PHARMACY SERVICES, CARE COORDINATION, AND ALL NECESSARY SUPPLIES AND EQUIPMENT (DRUGS AND NURSING VISITS CODED SEPARATELY), PER DIEM	1
S9542	HOME INJECTABLE THERAPY, NOT OTHERWISE CLASSIFIED, INCLUDING ADMINISTRATIVE SERVICES, PROFESSIONAL PHARMACY SERVICES, CARE COORDINATION, AND ALL NECESSARY SUPPLIES AND EQUIPMENT (DRUGS AND NURSING VISITS CODED SEPARATELY), PER DIEM	1
S9558	HOME INJECTABLE THERAPY; GROWTH HORMONE, INCLUDING ADMINISTRATIVE SERVICES, PROFESSIONAL PHARMACY SERVICES, CARE COORDINATION, AND ALL NECESSARY SUPPLIES AND EQUIPMENT (DRUGS AND NURSING VISITS CODED SEPARATELY), PER DIEM	1
S9560	HOME INJECTABLE THERAPY; HORMONAL THERAPY (E.G.; LEUPROLIDE, GOSERELIN), INCLUDING ADMINISTRATIVE SERVICES, PROFESSIONAL PHARMACY SERVICES, CARE COORDINATION, AND ALL NECESSARY SUPPLIES AND EQUIPMENT (DRUGS AND NURSING VISITS CODED SEPARATELY), PER DIEM	1
S9960	AMBULANCE SERVICE, CONVENTIONAL AIR SERVICE, NONEMERGENCY TRANSPORT, ONE WAY (FIXED WING)	1
S9961	AMBULANCE SERVICE, CONVENTIONAL AIR SERVICE, NONEMERGENCY TRANSPORT, ONE WAY (ROTARY WING)	1
S9976	LODGING, PER DIEM, NOT OTHERWISE CLASSIFIED	1
S9981	MEDICAL RECORDS COPYING FEE, ADMINISTRATIVE	1
T1000	PRIVATE DUTY / INDEPENDENT NURSING SERVICE(S) - LICENSED, UP TO 15 MINUTES	96

T1001	NURSING ASSESSMENT / EVALUATION	2
T1002	RN SERVICES, UP TO 15 MINUTES	96
T1003	LPN/LVN SERVICES, UP TO 15 MINUTES	96
T1005	RESPITE CARE SERVICES, UP TO 15 MINUTES	96
T1006	ALCOHOL AND/OR SUBSTANCE ABUSE SERVICES, FAMILY/COUPLE COUNSELING	2
T1007	ALCOHOL AND/OR SUBSTANCE ABUSE SERVICES, TREATMENT PLAN DEVELOPMENT AND/OR MODIFICATION	2
T1012	ALCOHOL AND/OR SUBSTANCE ABUSE SERVICES, SKILLS DEVELOPMENT	2
T1013	SIGN LANGUAGE OR ORAL INTERPRETIVE SERVICES, PER 15 MINUTES	32
T1015	CLINIC VISIT/ENCOUNTER, ALL-INCLUSIVE	3
T1016	CASE MANAGEMENT, EACH 15 MINUTES	96
T1017	TARGETED CASE MANAGEMENT, EACH 15 MINUTES	96
T1018	SCHOOL-BASED INDIVIDUALIZED EDUCATION PROGRAM (IEP) SERVICES, BUNDLED	1
T1019	PERSONAL CARE SERVICES, PER 15 MINUTES, NOT FOR AN INPATIENT OR RESIDENT OF A HOSPITAL, NURSING FACILITY, ICF/MR OR IMD, PART OF THE INDIVIDUALIZED PLAN OF TREATMENT (CODE MAY NOT BE USED TO IDENTIFY SERVICES PROVIDED BY HOME HEALTH AIDE OR CERTIFIED NURSE ASSISTANT)	64
T1020	PERSONAL CARE SERVICES, PER DIEM, NOT FOR AN INPATIENT OR RESIDENT OF A HOSPITAL, NURSING FACILITY, ICF/MR OR IMD, PART OF THE INDIVIDUALIZED PLAN OF TREATMENT (CODE MAY NOT BE USED TO IDENTIFY SERVICES PROVIDED BY HOME HEALTH AIDE OR CERTIFIED NURSE ASSISTANT)	1
T1021	HOME HEALTH AIDE OR CERTIFIED NURSE ASSISTANT, PER VISIT	2
T1022	CONTRACTED HOME HEALTH AGENCY SERVICES, ALL SERVICES PROVIDED UNDER CONTRACT, PER DAY	1
T1023	SCREENING TO DETERMINE THE APPROPRIATENESS OF CONSIDERATION OF AN INDIVIDUAL FOR PARTICIPATION IN A SPECIFIED PROGRAM, PROJECT OR TREATMENT PROTOCOL, PER ENCOUNTER	1
T1024	EVALUATION AND TREATMENT BY AN INTEGRATED, SPECIALTY TEAM CONTRACTED TO PROVIDE COORDINATED CARE TO MULTIPLE OR SEVERELY HANDICAPPED CHILDREN, PER ENCOUNTER	1
T1025	INTENSIVE, EXTENDED MULTIDISCIPLINARY SERVICES PROVIDED IN A CLINIC SETTING TO CHILDREN WITH COMPLEX MEDICAL, PHYSICAL, MENTAL AND PSYCHOSOCIAL IMPAIRMENTS, PER DIEM	1
T1027	FAMILY TRAINING AND COUNSELING FOR CHILD DEVELOPMENT, PER 15 MINUTES	1
T1028	ASSESSMENT OF HOME, PHYSICAL AND FAMILY ENVIRONMENT, TO DETERMINE SUITABILITY TO MEET PATIENT'S MEDICAL NEEDS	4
T1029	COMPREHENSIVE ENVIRONMENTAL LEAD INVESTIGATION, NOT INCLUDING LABORATORY ANALYSIS, PER DWELLING	1
T1030	NURSING CARE, IN THE HOME, BY REGISTERED NURSE, PER DIEM	1
T1031	NURSING CARE, IN THE HOME, BY LICENSED PRACTICAL NURSE, PER DIEM	1

T1040	MEDICAID CERTIFIED COMMUNITY BEHAVIORAL HEALTH CLINIC SERVICES, PER DIEM	1
T1041	MEDICAID CERTIFIED COMMUNITY BEHAVIORAL HEALTH CLINIC SERVICES, PER MONTH	1
T1502	ADMINISTRATION OF ORAL, INTRAMUSCULAR AND/OR SUBCUTANEOUS MEDICATION BY HEALTH CARE AGENCY/PROFESSIONAL, PER VISIT	31
T1503	ADMINISTRATION OF MEDICATION, OTHER THAN ORAL AND/OR INJECTABLE, BY A HEALTH CARE AGENCY/PROFESSIONAL, PER VISIT	2
T1505	ELECTRONIC MEDICATION COMPLIANCE MANAGEMENT DEVICE, INCLUDES ALL COMPONENTS AND ACCESSORIES, NOT OTHERWISE CLASSIFIED	1
T1999	MISCELLANEOUS THERAPEUTIC ITEMS AND SUPPLIES, RETAIL PURCHASES, NOT OTHERWISE CLASSIFIED; IDENTIFY PRODUCT IN REMARKS	1
T2002	NON-EMERGENCY TRANSPORTATION; PER DIEM	1
T2003	NON-EMERGENCY TRANSPORTATION; ENCOUNTER/TRIP	1
T2010	PREADMISSION SCREENING AND RESIDENT REVIEW (PASRR) LEVEL I IDENTIFICATION SCREENING, PER SCREEN	1
T2011	PREADMISSION SCREENING AND RESIDENT REVIEW (PASRR) LEVEL II EVALUATION, PER EVALUATION	1
T2012	HABILITATION, EDUCATIONAL; WAIVER, PER DIEM	1
T2014	HABILITATION, PREVOCATIONAL, WAIVER; PER DIEM	1
T2016	HABILITATION, RESIDENTIAL, WAIVER; PER DIEM	1
T2018	HABILITATION, SUPPORTED EMPLOYMENT, WAIVER; PER DIEM	1
T2020	DAY HABILITATION, WAIVER; PER DIEM	1
T2022	CASE MANAGEMENT, PER MONTH	1
T2023	TARGETED CASE MANAGEMENT; PER MONTH	1
T2024	SERVICE ASSESSMENT/PLAN OF CARE DEVELOPMENT, WAIVER	1
T2025	WAIVER SERVICES; NOT OTHERWISE SPECIFIED (NOS)	96
T2026	SPECIALIZED CHILDCARE, WAIVER; PER DIEM	1
T2028	SPECIALIZED SUPPLY, NOT OTHERWISE SPECIFIED, WAIVER	999
T2029	SPECIALIZED MEDICAL EQUIPMENT, NOT OTHERWISE SPECIFIED, WAIVER	1
T2030	ASSISTED LIVING, WAIVER; PER MONTH	1
T2031	ASSISTED LIVING; WAIVER, PER DIEM	1
T2032	RESIDENTIAL CARE, NOT OTHERWISE SPECIFIED (NOS), WAIVER; PER MONTH	1
T2033	RESIDENTIAL CARE, NOT OTHERWISE SPECIFIED (NOS), WAIVER; PER DIEM	1
T2034	CRISIS INTERVENTION, WAIVER; PER DIEM	1
T2035	UTILITY SERVICES TO SUPPORT MEDICAL EQUIPMENT AND ASSISTIVE TECHNOLOGY/DEVICES, WAIVER	1

T2038	COMMUNITY TRANSITION, WAIVER; PER SERVICE	1
T2042	HOSPICE ROUTINE HOME CARE; PER DIEM	1
T2043	HOSPICE CONTINUOUS HOME CARE; PER HOUR	24
T2044	HOSPICE INPATIENT RESPITE CARE; PER DIEM	1
T2045	HOSPICE GENERAL INPATIENT CARE; PER DIEM	1
T2046	HOSPICE LONG TERM CARE, ROOM AND BOARD ONLY; PER DIEM	1
T2048	BEHAVIORAL HEALTH; LONG-TERM CARE RESIDENTIAL (NON-ACUTE CARE IN A RESIDENTIAL TREATMENT PROGRAM WHERE STAY IS TYPICALLY LONGER THAN 30 DAYS), WITH ROOM AND BOARD, PER DIEM	1
T4521	ADULT SIZED DISPOSABLE INCONTINENCE PRODUCT, BRIEF/DIAPER, SMALL, EACH	300
T4522	ADULT SIZED DISPOSABLE INCONTINENCE PRODUCT, BRIEF/DIAPER, MEDIUM, EACH	300
T4523	ADULT SIZED DISPOSABLE INCONTINENCE PRODUCT, BRIEF/DIAPER, LARGE, EACH	300
T4524	ADULT SIZED DISPOSABLE INCONTINENCE PRODUCT, BRIEF/DIAPER, EXTRA LARGE, EACH	300
T4525	ADULT SIZED DISPOSABLE INCONTINENCE PRODUCT, PROTECTIVE UNDERWEAR/PULL-ON, SMALL SIZE, EACH	300
Г4526	ADULT SIZED DISPOSABLE INCONTINENCE PRODUCT, PROTECTIVE UNDERWEAR/PULL-ON, MEDIUM SIZE, EACH	300
T4527	ADULT SIZED DISPOSABLE INCONTINENCE PRODUCT, PROTECTIVE UNDERWEAR/PULL-ON, LARGE SIZE, EACH	300
T4528	ADULT SIZED DISPOSABLE INCONTINENCE PRODUCT, PROTECTIVE UNDERWEAR/PULL-ON, EXTRA LARGE SIZE, EACH	300
T4529	PEDIATRIC SIZED DISPOSABLE INCONTINENCE PRODUCT, BRIEF/DIAPER, SMALL/MEDIUM SIZE, EACH	300
T4530	PEDIATRIC SIZED DISPOSABLE INCONTINENCE PRODUCT, BRIEF/DIAPER, LARGE SIZE, EACH	300
T4531	PEDIATRIC SIZED DISPOSABLE INCONTINENCE PRODUCT, PROTECTIVE UNDERWEAR/PULL-ON, SMALL/MEDIUM SIZE, EACH	300
T4532	PEDIATRIC SIZED DISPOSABLE INCONTINENCE PRODUCT, PROTECTIVE UNDERWEAR/PULL-ON, LARGE SIZE, EACH	300
Г4533	YOUTH SIZED DISPOSABLE INCONTINENCE PRODUCT, BRIEF/DIAPER, EACH	300
T4534	YOUTH SIZED DISPOSABLE INCONTINENCE PRODUCT, PROTECTIVE UNDERWEAR/PULL-ON, EACH	300
T4535	DISPOSABLE LINER/SHIELD/GUARD/PAD/UNDERGARMENT, FOR INCONTINENCE, EACH	300
T4536	INCONTINENCE PRODUCT, PROTECTIVE UNDERWEAR/PULL-ON, REUSABLE, ANY SIZE, EACH	4
Г4541	INCONTINENCE PRODUCT, DISPOSABLE UNDERPAD, LARGE, EACH	180
T4542	INCONTINENCE PRODUCT, DISPOSABLE UNDERPAD, SMALL SIZE, EACH	180

T4543	ADULT SIZED DISPOSABLE INCONTINENCE PRODUCT, PROTECTIVE BRIEF/DIAPER, ABOVE EXTRA LARGE, EACH	300
T4544	ADULT SIZED DISPOSABLE INCONTINENCE PRODUCT, PROTECTIVE UNDERWEAR/PULL-ON, ABOVE EXTRA LARGE, EACH	300
T5001	POSITIONING SEAT FOR PERSONS WITH SPECIAL ORTHOPEDIC NEEDS	1
T5999	SUPPLY, NOT OTHERWISE SPECIFIED	1
U0001	CDC 2019 NOVEL CORONAVIRUS (2019-NCOV) REAL-TIME RT-PCR DIAGNOSTIC PANEL	2
U0002	2019-NCOV CORONAVIRUS, SARS-COV-2/2019-NCOV (COVID-19), ANY TECHNIQUE, MULTIPLE TYPES OR SUBTYPES (INCLUDES ALL TARGETS), NON-CDC	2
U0003	INFECTIOUS AGENT DETECTION BY NUCLEIC ACID (DNA OR RNA); SEVERE ACUTE RESPIRATORY SYNDROME CORONAVIRUS 2 (SARS-COV-2) (CORONAVIRUS DISEASE [COVID-19]), AMPLIFIED PROBE TECHNIQUE, MAKING USE OF HIGH THROUGHPUT TECHNOLOGIES AS DESCRIBED BY CMS-2020-01-R	1
U0004	2019-NCOV CORONAVIRUS, SARS-COV-2/2019-NCOV (COVID-19), ANY TECHNIQUE, MULTIPLE TYPES OR SUBTYPES (INCLUDES ALL TARGETS), NON-CDC, MAKING USE OF HIGH THROUGHPUT TECHNOLOGIES AS DESCRIBED BY CMS-2020-01-R	1
U0005	INFECTIOUS AGENT DETECTION BY NUCLEIC ACID (DNA OR RNA); SEVERE ACUTE RESPIRATORY SYNDROME CORONAVIRUS 2 (SARS-COV-2) (CORONAVIRUS DISEASE [COVID-19]), AMPLIFIED PROBE TECHNIQUE, CDC OR NON-CDC, MAKING USE OF HIGH THROUGHPUT TECHNOLOGIES, COMPLETED WITHIN 2 CALENDAR DAYS FROM DATE OF SPECIMEN COLLECTION (LIST SEPARATELY IN ADDITION TO EITHER HCPCS CODE U0003 OR U0004) AS DESCRIBED BY CMS-2020-01-R2	1
V2020	FRAMES, PURCHASES	2
V2025	DELUXE FRAME	1
V2100	SPHERE, SINGLE VISION, PLANO TO PLUS OR MINUS 4.00, PER LENS	4
V2101	SPHERE, SINGLE VISION, PLUS OR MINUS 4.12 TO PLUS OR MINUS 7.00D, PER LENS	4
V2102	SPHERE, SINGLE VISION, PLUS OR MINUS 7.12 TO PLUS OR MINUS 20.00D, PER LENS	4
V2103	SPHEROCYLINDER, SINGLE VISION, PLANO TO PLUS OR MINUS 4.00D SPHERE, .12 TO 2.00D CYLINDER, PER LENS	2
V2104	SPHEROCYLINDER, SINGLE VISION, PLANO TO PLUS OR MINUS 4.00D SPHERE, 2.12 TO 4.00D CYLINDER, PER LENS	2
V2105	SPHEROCYLINDER, SINGLE VISION, PLANO TO PLUS OR MINUS 4.00D SPHERE, 4.25 TO 6.00D CYLINDER, PER LENS	2
V2106	SPHEROCYLINDER, SINGLE VISION, PLANO TO PLUS OR MINUS 4.00D SPHERE, OVER 6.00D CYLINDER, PER LENS	2
V2107	SPHEROCYLINDER, SINGLE VISION, PLUS OR MINUS 4.25 TO PLUS OR MINUS 7.00 SPHERE, .12 TO 2.00D CYLINDER, PER LENS	2
V2108	SPHEROCYLINDER, SINGLE VISION, PLUS OR MINUS 4.25D TO PLUS OR MINUS 7.00D SPHERE, 2.12 TO 4.00D CYLINDER, PER LENS	2

V2109	SPHEROCYLINDER, SINGLE VISION, PLUS OR MINUS 4.25 TO PLUS OR MINUS 7.00D SPHERE, 4.25 TO 6.00D CYLINDER, PER LENS	2
V2110	SPHEROCYLINDER, SINGLE VISION, PLUS OR MINUS 4.25 TO 7.00D SPHERE, OVER 6.00D CYLINDER, PER LENS	2
V2111	SPHEROCYLINDER, SINGLE VISION, PLUS OR MINUS 7.25 TO PLUS OR MINUS 12.00D SPHERE, .25 TO 2.25D CYLINDER, PER LENS	2
V2112	SPHEROCYLINDER, SINGLE VISION, PLUS OR MINUS 7.25 TO PLUS OR MINUS 12.00D SPHERE, 2.25D TO 4.00D CYLINDER, PER LENS	2
V2113	SPHEROCYLINDER, SINGLE VISION, PLUS OR MINUS 7.25 TO PLUS OR MINUS 12.00D SPHERE, 4.25 TO 6.00D CYLINDER, PER LENS	2
V2114	SPHEROCYLINDER, SINGLE VISION, SPHERE OVER PLUS OR MINUS 12.00D, PER LENS	2
V2115	LENTICULAR, (MYODISC), PER LENS, SINGLE VISION	2
V2118	ANISEIKONIC LENS, SINGLE VISION	2
V2121	LENTICULAR LENS, PER LENS, SINGLE	2
V2199	NOT OTHERWISE CLASSIFIED, SINGLE VISION LENS	2
V2200	SPHERE, BIFOCAL, PLANO TO PLUS OR MINUS 4.00D, PER LENS	4
V2201	SPHERE, BIFOCAL, PLUS OR MINUS 4.12 TO PLUS OR MINUS 7.00D, PER LENS	4
V2202	SPHERE, BIFOCAL, PLUS OR MINUS 7.12 TO PLUS OR MINUS 20.00D, PER LENS	4
V2203	SPHEROCYLINDER, BIFOCAL, PLANO TO PLUS OR MINUS 4.00D SPHERE, .12 TO 2.00D CYLINDER, PER LENS	2
V2204	SPHEROCYLINDER, BIFOCAL, PLANO TO PLUS OR MINUS 4.00D SPHERE, 2.12 TO 4.00D CYLINDER, PER LENS	2
V2205	SPHEROCYLINDER, BIFOCAL, PLANO TO PLUS OR MINUS 4.00D SPHERE, 4.25 TO 6.00D CYLINDER, PER LENS	2
V2206	SPHEROCYLINDER, BIFOCAL, PLANO TO PLUS OR MINUS 4.00D SPHERE, OVER 6.00D CYLINDER, PER LENS	2
V2207	SPHEROCYLINDER, BIFOCAL, PLUS OR MINUS 4.25 TO PLUS OR MINUS 7.00D SPHERE,.12 TO 2.00D CYLINDER, PER LENS	2
V2208	SPHEROCYLINDER, BIFOCAL, PLUS OR MINUS 4.25 TO PLUS OR MINUS 7.00D SPHERE, 2.12 TO 4.00D CYLINDER, PER LENS	2
V2209	SPHEROCYLINDER, BIFOCAL, PLUS OR MINUS 4.25 TO PLUS OR MINUS 7.00D SPHERE, 4.25 TO 6.00D CYLINDER, PER LENS	2
V2210	SPHEROCYLINDER, BIFOCAL, PLUS OR MINUS 4.25 TO PLUS OR MINUS 7.00D SPHERE, OVER 6.00D CYLINDER, PER LENS	2
V2211	SPHEROCYLINDER, BIFOCAL, PLUS OR MINUS 7.25 TO PLUS OR MINUS 12.00D SPHERE, .25 TO 2.25D CYLINDER, PER LENS	2
V2212	SPHEROCYLINDER, BIFOCAL, PLUS OR MINUS 7.25 TO PLUS OR MINUS 12.00D SPHERE, 2.25 TO 4.00D CYLINDER, PER LENS	2
V2213	SPHEROCYLINDER, BIFOCAL, PLUS OR MINUS 7.25 TO PLUS OR MINUS 12.00D SPHERE, 4.25 TO 6.00D CYLINDER, PER LENS	2

V2214	SPHEROCYLINDER, BIFOCAL, SPHERE OVER PLUS OR MINUS 12.00D, PER LENS	2
V2215	LENTICULAR (MYODISC), PER LENS, BIFOCAL	2
V2218	ANISEIKONIC, PER LENS, BIFOCAL	2
V2219	BIFOCAL SEG WIDTH OVER 28 MM	2
V2220	BIFOCAL ADD OVER 3.25D	2
V2221	LENTICULAR LENS, PER LENS, BIFOCAL	2
V2299	SPECIALTY BIFOCAL (BY REPORT)	2
V2300	SPHERE, TRIFOCAL, PLANO TO PLUS OR MINUS 4.00D, PER LENS	2
V2301	SPHERE, TRIFOCAL, PLUS OR MINUS 4.12 TO PLUS OR MINUS 7.00D, PER LENS	2
V2302	SPHERE, TRIFOCAL, PLUS OR MINUS 7.12 TO PLUS OR MINUS 20.00, PER LENS	2
V2303	SPHEROCYLINDER, TRIFOCAL, PLANO TO PLUS OR MINUS 4.00D SPHERE, .12-2.00D CYLINDER, PER LENS	2
V2304	SPHEROCYLINDER, TRIFOCAL, PLANO TO PLUS OR MINUS 4.00D SPHERE, 2.25-4.00D CYLINDER, PER LENS	2
V2305	SPHEROCYLINDER, TRIFOCAL, PLANO TO PLUS OR MINUS 4.00D SPHERE, 4.25 TO 6.00 CYLINDER, PER LENS	2
V2306	SPHEROCYLINDER, TRIFOCAL, PLANO TO PLUS OR MINUS 4.00D SPHERE, OVER 6.00D CYLINDER, PER LENS	2
V2307	SPHEROCYLINDER, TRIFOCAL, PLUS OR MINUS 4.25 TO PLUS OR MINUS 7.00D SPHERE, .12 TO 2.00D CYLINDER, PER LENS	2
V2308	SPHEROCYLINDER, TRIFOCAL, PLUS OR MINUS 4.25 TO PLUS OR MINUS 7.00D SPHERE, 2.12 TO 4.00D CYLINDER, PER LENS	2
V2309	SPHEROCYLINDER, TRIFOCAL, PLUS OR MINUS 4.25 TO PLUS OR MINUS 7.00D SPHERE, 4.25 TO 6.00D CYLINDER, PER LENS	2
V2310	SPHEROCYLINDER, TRIFOCAL, PLUS OR MINUS 4.25 TO PLUS OR MINUS 7.00D SPHERE, OVER 6.00D CYLINDER, PER LENS	2
V2311	SPHEROCYLINDER, TRIFOCAL, PLUS OR MINUS 7.25 TO PLUS OR MINUS 12.00D SPHERE, .25 TO 2.25D CYLINDER, PER LENS	2
V2312	SPHEROCYLINDER, TRIFOCAL, PLUS OR MINUS 7.25 TO PLUS OR MINUS 12.00D SPHERE, 2.25 TO 4.00D CYLINDER, PER LENS	2
V2313	SPHEROCYLINDER, TRIFOCAL, PLUS OR MINUS 7.25 TO PLUS OR MINUS 12.00D SPHERE, 4.25 TO 6.00D CYLINDER, PER LENS	2
V2314	SPHEROCYLINDER, TRIFOCAL, SPHERE OVER PLUS OR MINUS 12.00D, PER LENS	2
V2315	LENTICULAR, (MYODISC), PER LENS, TRIFOCAL	2
V2318	ANISEIKONIC LENS, TRIFOCAL	2
V2319	TRIFOCAL SEG WIDTH OVER 28 MM	2
V2320	TRIFOCAL ADD OVER 3.25D	2
V2321	LENTICULAR LENS, PER LENS, TRIFOCAL	2

V2399	SPECIALTY TRIFOCAL (BY REPORT)	2
V2410	VARIABLE ASPHERICITY LENS, SINGLE VISION, FULL FIELD, GLASS OR PLASTIC, PER LENS	2
V2430	VARIABLE ASPHERICITY LENS, BIFOCAL, FULL FIELD, GLASS OR PLASTIC, PER LENS	2
V2499	VARIABLE SPHERICITY LENS, OTHER TYPE	2
V2500	CONTACT LENS, PMMA, SPHERICAL, PER LENS	2
V2501	CONTACT LENS, PMMA, TORIC OR PRISM BALLAST, PER LENS	2
V2502	CONTACT LENS, PMMA, BIFOCAL, PER LENS	2
V2503	CONTACT LENS, PMMA, COLOR VISION DEFICIENCY, PER LENS	2
V2510	CONTACT LENS, GAS PERMEABLE, SPHERICAL, PER LENS	2
V2511	CONTACT LENS, GAS PERMEABLE, TORIC, PRISM BALLAST, PER LENS	2
V2512	CONTACT LENS, GAS PERMEABLE, BIFOCAL, PER LENS	2
V2513	CONTACT LENS, GAS PERMEABLE, EXTENDED WEAR, PER LENS	2
V2520	CONTACT LENS, HYDROPHILIC, SPHERICAL, PER LENS	4
V2521	CONTACT LENS, HYDROPHILIC, TORIC, OR PRISM BALLAST, PER LENS	4
V2522	CONTACT LENS, HYDROPHILIC, BIFOCAL, PER LENS	4
V2523	CONTACT LENS, HYDROPHILIC, EXTENDED WEAR, PER LENS	4
V2524	CONTACT LENS, HYDROPHILIC, SPHERICAL, PHOTOCHROMIC ADDITIVE, PER LENS	2
V2530	CONTACT LENS, SCLERAL, GAS IMPERMEABLE, PER LENS (FOR CONTACT LENS MODIFICATION, SEE 92325)	2
V2531	CONTACT LENS, SCLERAL, GAS PERMEABLE, PER LENS (FOR CONTACT LENS MODIFICATION, SEE 92325)	2
V2599	CONTACT LENS, OTHER TYPE	2
V2600	HAND HELD LOW VISION AIDS AND OTHER NONSPECTACLE MOUNTED AIDS	1
V2610	SINGLE LENS SPECTACLE MOUNTED LOW VISION AIDS	1
V2615	TELESCOPIC AND OTHER COMPOUND LENS SYSTEM, INCLUDING DISTANCE VISION TELESCOPIC, NEAR VISION TELESCOPES AND COMPOUND MICROSCOPIC LENS SYSTEM	9999
V2623	PROSTHETIC EYE, PLASTIC, CUSTOM	2
V2624	POLISHING/RESURFACING OF OCULAR PROSTHESIS	2
V2625	ENLARGEMENT OF OCULAR PROSTHESIS	2
V2626	REDUCTION OF OCULAR PROSTHESIS	2
V2627	SCLERAL COVER SHELL	2
V2628	FABRICATION AND FITTING OF OCULAR CONFORMER	2
V2629	PROSTHETIC EYE, OTHER TYPE	2
V2630	ANTERIOR CHAMBER INTRAOCULAR LENS	2

V2631	IRIS SUPPORTED INTRAOCULAR LENS	2
V2632	POSTERIOR CHAMBER INTRAOCULAR LENS	2
V2700	BALANCE LENS, PER LENS	2
V2710	SLAB OFF PRISM, GLASS OR PLASTIC, PER LENS	2
V2715	PRISM, PER LENS	4
V2718	PRESS-ON LENS, FRESNELL PRISM, PER LENS	2
V2730	SPECIAL BASE CURVE, GLASS OR PLASTIC, PER LENS	2
V2744	TINT, PHOTOCHROMATIC, PER LENS	2
V2745	ADDITION TO LENS; TINT, ANY COLOR, SOLID, GRADIENT OR EQUAL, EXCLUDES PHOTOCHROMATIC, ANY LENS MATERIAL, PER LENS	2
V2750	ANTI-REFLECTIVE COATING, PER LENS	2
V2755	U-V LENS, PER LENS	2
V2756	EYE GLASS CASE	1
V2760	SCRATCH RESISTANT COATING, PER LENS	2
V2761	MIRROR COATING, ANY TYPE, SOLID, GRADIENT OR EQUAL, ANY LENS MATERIAL, PER LENS	2
V2762	POLARIZATION, ANY LENS MATERIAL, PER LENS	2
V2770	OCCLUDER LENS, PER LENS	5
V2780	OVERSIZE LENS, PER LENS	2
V2781	PROGRESSIVE LENS, PER LENS	2
V2782	LENS, INDEX 1.54 TO 1.65 PLASTIC OR 1.60 TO 1.79 GLASS, EXCLUDES POLYCARBONATE, PER LENS	2
V2783	LENS, INDEX GREATER THAN OR EQUAL TO 1.66 PLASTIC OR GREATER THAN OR EQUAL TO 1.80 GLASS, EXCLUDES POLYCARBONATE, PER LENS	2
V2784	LENS, POLYCARBONATE OR EQUAL, ANY INDEX, PER LENS	2
V2785	PROCESSING, PRESERVING AND TRANSPORTING CORNEAL TISSUE	2
V2786	SPECIALTY OCCUPATIONAL MULTIFOCAL LENS, PER LENS	2
V2787	ASTIGMATISM CORRECTING FUNCTION OF INTRAOCULAR LENS	2
V2788	PRESBYOPIA CORRECTING FUNCTION OF INTRAOCULAR LENS	2
V2790	AMNIOTIC MEMBRANE FOR SURGICAL RECONSTRUCTION, PER PROCEDURE	1
V2797	VISION SUPPLY, ACCESSORY AND/OR SERVICE COMPONENT OF ANOTHER HCPCS VISION CODE	1
V5008	HEARING SCREENING	20
V5010	ASSESSMENT FOR HEARING AID	1
V5011	FITTING/ORIENTATION/CHECKING OF HEARING AID	1
V5014	REPAIR/MODIFICATION OF A HEARING AID	2

V5020	CONFORMITY EVALUATION	1
V5030	HEARING AID, MONAURAL, BODY WORN, AIR CONDUCTION	1
V5040	HEARING AID, MONAURAL, BODY WORN, BONE CONDUCTION	1
V5050	HEARING AID, MONAURAL, IN THE EAR	1
V5060	HEARING AID, MONAURAL, BEHIND THE EAR	1
V5070	GLASSES, AIR CONDUCTION	1
V5080	GLASSES, BONE CONDUCTION	1
V5090	DISPENSING FEE, UNSPECIFIED HEARING AID	2
V5095	SEMI-IMPLANTABLE MIDDLE EAR HEARING PROSTHESIS	2
V5100	HEARING AID, BILATERAL, BODY WORN	1
V5110	DISPENSING FEE, BILATERAL	1
V5120	BINAURAL, BODY	1
V5130	BINAURAL, IN THE EAR	1
V5140	BINAURAL, BEHIND THE EAR	1
V5150	BINAURAL, GLASSES	1
V5160	DISPENSING FEE, BINAURAL	1
V5171	HEARING AID, CONTRALATERAL ROUTING DEVICE, MONAURAL, IN THE EAR (ITE)	1
V5172	HEARING AID, CONTRALATERAL ROUTING DEVICE, MONAURAL, IN THE CANAL (ITC)	2
V5181	HEARING AID, CONTRALATERAL ROUTING DEVICE, MONAURAL, BEHIND THE EAR (BTE)	2
V5190	HEARING AID, CONTRALATERAL ROUTING, MONAURAL, GLASSES	1
V5200	DISPENSING FEE, CONTRALATERAL, MONAURAL	1
V5211	HEARING AID, CONTRALATERAL ROUTING SYSTEM, BINAURAL, ITE/ITE	1
V5212	HEARING AID, CONTRALATERAL ROUTING SYSTEM, BINAURAL, ITE/ITC	1
V5213	HEARING AID, CONTRALATERAL ROUTING SYSTEM, BINAURAL, ITE/BTE	1
V5214	HEARING AID, CONTRALATERAL ROUTING SYSTEM, BINAURAL, ITC/ITC	1
V5215	HEARING AID, CONTRALATERAL ROUTING SYSTEM, BINAURAL, ITC/BTE	1
V5221	HEARING AID, CONTRALATERAL ROUTING SYSTEM, BINAURAL, BTE/BTE	1
V5230	HEARING AID, CONTRALATERAL ROUTING SYSTEM, BINAURAL, GLASSES	1
V5240	DISPENSING FEE, CONTRALATERAL ROUTING SYSTEM, BINAURAL	1
V5241	DISPENSING FEE, MONAURAL HEARING AID, ANY TYPE	1
V5242	HEARING AID, ANALOG, MONAURAL, CIC (COMPLETELY IN THE EAR CANAL)	2
V5243	HEARING AID, ANALOG, MONAURAL, ITC (IN THE CANAL)	2
V5244	HEARING AID, DIGITALLY PROGRAMMABLE ANALOG, MONAURAL, CIC	1

V5245	HEARING AID, DIGITALLY PROGRAMMABLE, ANALOG, MONAURAL, ITC	1
V5246	HEARING AID, DIGITALLY PROGRAMMABLE ANALOG, MONAURAL, ITE (IN THE EAR)	1
V5247	HEARING AID, DIGITALLY PROGRAMMABLE ANALOG, MONAURAL, BTE (BEHIND THE EAR)	1
V5248	HEARING AID, ANALOG, BINAURAL, CIC	1
V5249	HEARING AID, ANALOG, BINAURAL, ITC	1
V5250	HEARING AID, DIGITALLY PROGRAMMABLE ANALOG, BINAURAL, CIC	1
V5251	HEARING AID, DIGITALLY PROGRAMMABLE ANALOG, BINAURAL, ITC	1
V5252	HEARING AID, DIGITALLY PROGRAMMABLE, BINAURAL, ITE	1
V5253	HEARING AID, DIGITALLY PROGRAMMABLE, BINAURAL, BTE	1
V5254	HEARING AID, DIGITAL, MONAURAL, CIC	2
V5255	HEARING AID, DIGITAL, MONAURAL, ITC	2
V5256	HEARING AID, DIGITAL, MONAURAL, ITE	2
V5257	HEARING AID, DIGITAL, MONAURAL, BTE	2
V5258	HEARING AID, DIGITAL, BINAURAL, CIC	1
V5259	HEARING AID, DIGITAL, BINAURAL, ITC	1
V5260	HEARING AID, DIGITAL, BINAURAL, ITE	1
V5261	HEARING AID, DIGITAL, BINAURAL, BTE	1
V5262	HEARING AID, DISPOSABLE, ANY TYPE, MONAURAL	1
V5263	HEARING AID, DISPOSABLE, ANY TYPE, BINAURAL	1
V5264	EAR MOLD/INSERT, NOT DISPOSABLE, ANY TYPE	2
V5265	EAR MOLD/INSERT, DISPOSABLE, ANY TYPE	2
V5266	BATTERY FOR USE IN HEARING DEVICE	8
V5268	ASSISTIVE LISTENING DEVICE, TELEPHONE AMPLIFIER, ANY TYPE	2
V5269	ASSISTIVE LISTENING DEVICE, ALERTING, ANY TYPE	2
V5270	ASSISTIVE LISTENING DEVICE, TELEVISION AMPLIFIER, ANY TYPE	2
V5271	ASSISTIVE LISTENING DEVICE, TELEVISION CAPTION DECODER	1
V5272	ASSISTIVE LISTENING DEVICE, TDD	1
V5273	ASSISTIVE LISTENING DEVICE, FOR USE WITH COCHLEAR IMPLANT	1
V5275	EAR IMPRESSION, EACH	2
V5281	ASSISTIVE LISTENING DEVICE, PERSONAL FM/DM SYSTEM, MONAURAL, (1 RECEIVER, TRANSMITTER, MICROPHONE), ANY TYPE	1
V5282	ASSISTIVE LISTENING DEVICE, PERSONAL FM/DM SYSTEM, BINAURAL, (2 RECEIVERS, TRANSMITTER, MICROPHONE), ANY TYPE	1
V5283	ASSISTIVE LISTENING DEVICE, PERSONAL FM/DM NECK, LOOP INDUCTION RECEIVER	1

V5284	ASSISTIVE LISTENING DEVICE, PERSONAL FM/DM, EAR LEVEL RECEIVER	1
V5285	ASSISTIVE LISTENING DEVICE, PERSONAL FM/DM, DIRECT AUDIO INPUT RECEIVER	1
V5286	ASSISTIVE LISTENING DEVICE, PERSONAL BLUE TOOTH FM/DM RECEIVER	1
V5287	ASSISTIVE LISTENING DEVICE, PERSONAL FM/DM RECEIVER, NOT OTHERWISE SPECIFIED	1
V5288	ASSISTIVE LISTENING DEVICE, PERSONAL FM/DM TRANSMITTER ASSISTIVE LISTENING DEVICE	1
V5289	ASSISTIVE LISTENING DEVICE, PERSONAL FM/DM ADAPTER/BOOT COUPLING DEVICE FOR RECEIVER, ANY TYPE	1
V5290	ASSISTIVE LISTENING DEVICE, TRANSMITTER MICROPHONE, ANY TYPE	1
V5298	HEARING AID, NOT OTHERWISE CLASSIFIED	1
V5299	HEARING SERVICE, MISCELLANEOUS	1
V5336	REPAIR/MODIFICATION OF AUGMENTATIVE COMMUNICATIVE SYSTEM OR DEVICE (EXCLUDES ADAPTIVE HEARING AID)	1
V5362	SPEECH SCREENING	1
V5363	LANGUAGE SCREENING	1
V5364	DYSPHAGIA SCREENING	1