



# Procedure codes with reduced prior authorization requirements for UnitedHealthcare Individual Exchange plans

Effective Dec. 1, 2026

We no longer require prior authorization for certain services when provided to members younger than 18 years of age. We do still encourage advance notification for some codes to help members younger than 18 connect to care management services for some conditions.

For plan-specific exceptions, continue to verify requirements through the [Prior Authorization and Advance Notification tool](#) on the [UnitedHealthcare Provider Portal](#).



**Questions? We're here to help.**

For chat options and contact information, visit [UHCprovider.com/contactus](https://UHCprovider.com/contactus).

## Procedure codes no longer requiring prior authorization effective Dec. 1, 2026.

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| Procedure Code | Procedure Code Description                       |
|----------------|--------------------------------------------------|
| 0018U          | ONC THYR 10 MICRORNA SEQ +/- RSLT MOD HI RSK MAL |
| 0022U          | TGSAP NONSMALL CELL LUNG NEO DNA&RNA 23 GENES    |
| 0023U          | ONC AML DNA GNTYP INT TANDEM DUP DETCJ/NONDETCJ  |
| 0026U          | ONC THYR DNA&MRNA 112 GENES FNA NDUL ALG ALYS    |
| 0037U          | TRGT GEN SEQ ALYS SLD ORGN NEO DNA 324 GENES     |
| 0047U          | ONC PRST8 MRNA GEN XPRS PRFL 17 GEN ALG RSK SCOR |
| 0048U          | ONC SLD ORG NEO DNA 468 CANCER ASSOCIATED GENES  |
| 0050U          | TRGT GEN SEQ ALYS AML 194 GENE INTERROG SEQ VRNT |
| 0060U          | TWN ZYG GEN TRGT SEQ ALYS CHRMS2 FTL DNA MAT BLD |
| 0087U          | CARD HRT TRNSPL MRNA GEN XPRS PRFL 1283 GENE ALG |
| 0088U          | TRNSPLJ MED KDN ALGRFT REJ 1494 GENES ALG        |

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| Procedure Code | Procedure Code Description                       |
|----------------|--------------------------------------------------|
| 0094U          | GENOME RAPID SEQUENCE ANALYSIS                   |
| 0101U          | HERED COLON CA DO GEN SEQ ALYS PANEL 15 GENES    |
| 0102U          | HERED BRST CA RLTD DO GEN SEQ ALYS PNL 17 GENES  |
| 0103U          | HERED OVARIAN CANCER GEN SEQ ALYS PANEL 24 GENES |
| 0129U          | HEREDITARY BRST CA RLTD DO GEN SEQ&DEL/DUP PNL   |
| 0171U          | TARGETED GENOMIC SEQUENCE ALYS PNL DNA 23 GENES  |
| 0179U          | ONC NONSM CLL LNG CA CELL FREE DNA ALYS 23 GEN   |
| 0209U          | CYTOG CONST ALYS INTERROG GEN REG F/COPY NUMBER  |
| 0211U          | ONC PAN-TUMOR DNA&RNA NEXT-GENERATION SEQUENCING |
| 0216U          | NEURO INH ATAXIA GENOMIC DNA SEQ ALYS 12 BLD/SLV |
| 0217U          | NEURO INH ATAXIA GENOMIC DNA SEQ ALYS 51 BLD/SLV |
| 0237U          | CARDIAC ION CHANNELOPATHIES GENOMIC SEQ ALYS PNL |
| 0238U          | ONC LYNCH SYNDROME GENOMIC DNA SEQUENCE ANALYSIS |
| 0239U          | TRGT GEN SEQ ALYS SLD ORGN NEO CLL-FR DNA 311+   |
| 0242U          | TRGT GEN SEQ ALYS PNL SOLID ORGN NEO DNA 55-74   |
| 0244U          | ONC SOLID ORGN DNA COMPRE GENOMIC PRFLG 257 GENE |
| 0245U          | ONC THYR MUT ALYS 10 GEN 37 RNA FSN XPRSN 4 MRNA |
| 0250U          | ONC SLD ORG NEO TRGT GEN SEQ DNA ALYS 505 GENES  |
| 0288U          | ONC LUNG MRNA QUAN PCR ALYS 11 GEN&3 REF GEN ALG |
| 0289U          | NEURO ALZHEIMER MRNA GEN XPRSN PRFL RNA SEQ 24   |
| 0306U          | ONC MRD NEXT-GNRJ TRGT SEQ ALYS CLL-FR DNA 1ST   |
| 0307U          | ONC MRD NEXT-GNRJ TRGT SEQ ALYS CLL-FR DNA SBSQ  |
| 0318U          | PED WHL GENOME MTHYLTN ALYS MICRORA 50+GENES BLD |
| 0319U          | NEPH RNL TRNSPL RNA PRETRNSPL PERPH BLD ALG      |
| 0320U          | NEPH RNL TRNSPL RNA POSTTRNSPL PERPH BLD ALG     |
| 0326U          | TRGT GEN SEQ ALYS SLD ORGN NEO CLL-FR DNA 83+    |
| 0334U          | ONC SLD ORGN TGSA FFPE TUM TISS DNA 84/+ GEN     |
| 0355U          | APOL1 RISK VARIANTS                              |
| 0364U          | ONC HL NEO GEN SEQ ALYS ALG QUAN DMT CLNL SEQ    |
| 0379U          | TGSAP SLD ORG NEO DNA 523&RNA 55 NEXT GNRJ SEQ   |
| 0388U          | ONC NONSM CLL LNG CA NXT GNRJ SEQ 37 CA RLTD GEN |
| 0389U          | PED FEBRILE ILNES KAWASAKI DS IFI27&MCEP1 RNA    |
| 0391U          | ONC SLD TUM DNA&RNA NXT GNJ SEQ FFPE TISS 437    |

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| 0395U          | ONC LUNG MULTIOMICS PLASMA ALG MAL RISK LNG NDUL  |
| 0398U          | GI BARRETT ESOPH DNA MTHYLTN ALYS ALG DYSP/CA     |
| 0409U          | ONC SLD TUM DNA 80&RNA 36 GEN NEXT GNRJ SEQ PLSM  |
| 0425U          | GENOME RAPID SEQ ANALYSIS EACH COMPARATOR GENOME  |
| 0426U          | GENOME ULTRA-RAPID SEQUENCE ANALYSIS              |
| 0444U          | ONC SLD ORGN NEO TGSAP 361 GEN INTERROG DNA FFPE  |
| 0449U          | CAR SCR SEV INH COND GENOMIC SEQ ALYS PNL 5 GEN   |
| 0473U          | ONC SOLID TUMOR NGS DNA FFPE TISS BLD/SLV 648GEN  |
| 0474U          | HERED PAN CA GSAP 88 GENES 20DUP/DEL NGS BLD/SLV  |
| 0475U          | HERED PRST8 CA-RLTD DO GSAP NGS CGH EVAL 23 GENE  |
| 0478U          | ONC NSCLC DNA&RNA DPCR ALYS 9 GENES FFPE TISSUE   |
| 0481U          | IDH1 IDH2&TERT PROMOTER CNS TUMORS NGS S/D/I      |
| 0485U          | ONC SOL TUM CFDNA&RNA NGS IR GM CHIP TUM-DRV SNV  |
| 0487U          | ONC SOL TUM CFCDNA TGSAP 84GEN INTERROG SEQ VRNT  |
| 0495U          | ONC PRST8 ALYS CRCG PLSM PRTNS GERMLINE POLYG RS  |
| 0499U          | ONC CLRCT&LNG DNA FFPE TISS NGS 8GENES MUT DETCJ  |
| 0523U          | ONC SOLID TUMOR DNA QUAL NGS SNV 22GEN FFPE TISS  |
| 0530U          | ONC PAN-SOL TUM CTDNA PLSM NGS 77 GEN 8 FUJN MSI  |
| 0536U          | RBC AG FETAL RHD PCR ALYS EXON 4 RHD GENE&GAPDH   |
| 0538U          | ONC SOLID TUM NGTS ALYS FFPE DNA ALYS 600 GENES   |
| 0539U          | ONC SOLID TUMOR CFCTDNA 152 GEN NGS INTERROG SNV  |
| 0543U          | ONC SOL TUM NGS DNA FFPE TISS 517GEN INTERROG SNV |
| 0552U          | REPRDTVE MED PGA ALYS GDO TE BX LNKGE ALYS LOCUS  |
| 0562U          | ONC SOL TUM TGSA 33 GENES DETC SNVS CFDNA PLASMA  |
| 0567U          | RARE DS WHL GENOME SEQ ALYS SRS&LRS SNVS INDELS   |
| 0571U          | ONC SOL TUM DNA80&RNA10 GENS NGS PLSM SNV INDELS  |
| 0585U          | TGSAP SO NEO CFDNA ALYS PLSM 521 GENES INTERROG   |
| 0588U          | NFCT DS BCT/VIRAL 32 GENES IMMUNE RESPONSE MRNA   |
| 0605U          | ALL&IMMUNOLOGY HAT DNA ALYS TPSAB1 GENE CNV DPCR  |
| 0633T          | CT BREAST W/3D RENDERING UNI WITHOUT CONTRAST     |
| 0634T          | CT BREAST W/3D RENDERING UNI WITH CONTRAST        |
| 0635T          | CT BRST W/3D RENDERING UNI WO CNTRST FLWD CNTRST  |
| 0636T          | CT BREAST W/3D RENDERING BI WITHOUT CONTRAST      |

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| 0637T          | CT BREAST W/3D RENDERING BI WITH CONTRAST        |
| 0638T          | CT BRST W/3D RENDERING BI WO CNTRST FLWD CNTRST  |
| 11440          | EXC B9 LESION MRGN XCP SK TG F/E/E/N/L/M 0.5CM/< |
| 11441          | EXC B9 LES MRGN XCP SK TG F/E/E/N/L/M 0.6-1.0CM  |
| 11443          | EXC B9 LES MRGN XCP SK TG F/E/E/N/L/M 2.1-3.0CM  |
| 11444          | EXC B9 LES MRGN XCP SK TG F/E/E/N/L/M 3.1-4.0CM  |
| 11446          | EXC B9 LESION MRGN XCP SK TG F/E/E/N/L/M > 4.0CM |
| 11462          | EXCISION HIDRADENITIS INGUINAL SMPL/INTRM RPR    |
| 11470          | EXCISION H/P/P/U SIMPLE/INTERMEDIATE REPAIR      |
| 11620          | EXCISION MALIGNANT LESION S/N/H/F/G 0.5 CM/<     |
| 11621          | EXCISION MALIGNANT LESION S/N/H/F/G 0.6-1.0 CM   |
| 11623          | EXCISION MALIGNANT LESION S/N/H/F/G 2.1-3.0 CM   |
| 11640          | EXCISION MALIGNANT LESION F/E/E/N/L 0.5 CM/<     |
| 11642          | EXCISION MALIGNANT LESION F/E/E/N/L 1.1-2.0 CM   |
| 11643          | EXCISION MALIGNANT LESION F/E/E/N/L 2.1-3.0 CM   |
| 11755          | BIOPSY NAIL UNIT SEPARATE PROCEDURE              |
| 11760          | REPAIR NAIL BED                                  |
| 12041          | REPAIR INTERMEDIATE N/H/F/XTRNL GENT 2.5CM/<     |
| 12042          | REPAIR INTERMEDIATE N/H/F/XTRNL GENT 2.6-7.5 CM  |
| 13100          | REPAIR COMPLEX TRUNK 1.1-2.5 CM                  |
| 13101          | REPAIR COMPLEX TRUNK 2.6-7.5 CM                  |
| 13131          | REPAIR COMPLEX F/C/C/M/N/AX/G/H/F 1.1-2.5 CM     |
| 13132          | REPAIR COMPLEX F/C/C/M/N/AX/G/H/F 2.6-7.5 CM     |
| 14040          | ADJT TIS TRNS/REARGMT F/C/C/M/N/A/G/H/F 10SQCM/< |
| 15220          | FTH/GFT FREE W/DIRECT CLOSURE S/A/L 20 SQ CM/<   |
| 15760          | GRAFT COMPOSITE W/PRIMARY CLOSURE DONOR AREA     |
| 15770          | GRAFT DERMA-FAT-FASCIA                           |
| 20605          | ARTHROCENTESIS ASPIR&/INJ INTERM JT/BURS W/O US  |
| 20610          | ARTHROCENTESIS ASPIR&/INJ MAJOR JT/BURSA W/O US  |
| 20680          | REMOVAL IMPLANT DEEP                             |
| 20912          | CARTILAGE GRAFT NASAL SEPTUM                     |
| 20974          | ELECTRICAL STIMULATION BONE HEALING NONINVASIVE  |
| 20975          | ELECTRICAL STIMULATION BONE HEALING INVASIVE     |
| 20979          | LOW INTENSITY US STIMJ BONE HEALING NONINVASIVE  |

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|----------------|--------------------------------------------------|
| 21011          | EXCISION TUMOR SOFT TISS FACE/SCALP SUBQ <2CM    |
| 21012          | EXCISION TUMOR SOFT TISS FACE/SCALP SUBQ 2 CM/>  |
| 21013          | EXC TUMOR SOFT TISS FACE&SCALP SUBFASCIAL <2CM   |
| 21014          | EXC TUMOR SOFT TISS FACE&SCALP SUBFASCIAL 2 CM/> |
| 23120          | CLAVICULECTOMY PARTIAL                           |
| 23140          | EXC/CURTG BONE CYST/BENIGN TUMOR CLAV/SCAPULA    |
| 23405          | TENOTOMY SHOULDER AREA 1 TENDON                  |
| 23430          | TENODESIS LONG TENDON BICEPS                     |
| 23440          | RESECTION/TRANSPLANTATION LONG TENDON BICEPS     |
| 23929          | UNLISTED PROCEDURE SHOULDER                      |
| 24006          | ARTHRT ELBOW CAPSULAR EXCISION CAPSULAR RLS SPX  |
| 24071          | EXC TUMOR SOFT TISSUE UPPER ARM/ELBOW SUBQ 3CM/> |
| 24073          | EXC TUMOR SOFT TISS UPPER ARM/ELBW SUBFASC 5CM/> |
| 24075          | EXC TUMOR SOFT TISS UPPER ARM/ELBOW SUBQ <3CM    |
| 24076          | EXC TUMOR SOFT TISS UPR ARM/ELBOW SUBFASC <5CM   |
| 24101          | ARTHRT ELBOW W/JT EXPL W/WOBX W/O RMVL LOOSE/FB  |
| 24102          | ARTHROTOMY ELBOW W/SYNOVECTOMY                   |
| 24105          | EXCISION OLECRANON BURSA                         |
| 24120          | EXC/CURTG BONE CYST/BENIGN TUMOR H/N RDS/OLECRN  |
| 24300          | MANIPULATION ELBOW UNDER ANESTHESIA              |
| 24341          | REPAIR TENDON/MUSCLE UPPER ARM/ELBOW EA TDN/MUSC |
| 24342          | RINSJ RPTD BICEPS/TRICEPS TDN DSTL W/VO TDN GRF  |
| 24343          | REPAIR LATERAL COLLATERAL LIGAMENT ELBOW         |
| 24357          | TENOTOMY ELBOW LATERAL/MEDIAL PERCUTANEOUS       |
| 24358          | TNOT ELBOW LATERAL/MEDIAL DEBRIDE OPEN           |
| 25071          | EXC TUMOR SOFT TISS FOREARM AND/WRIST SUBQ 3CM/> |
| 25073          | EXC TUMOR SFT TISS FOREARM&/WRIST SUBFASC 3CM/>  |
| 25075          | EXC TUMOR SOFT TISSUE FOREARM &/WRIST SUBQ <3CM  |
| 25076          | EXC TUMOR SOFT TISS FOREARM&/WRIST SUBFASC <3CM  |
| 25085          | CAPSULOTOMY WRIST                                |
| 25109          | EXC TENDON FOREARM&/WRIST FLEXOR/EXTENSOR EA     |
| 25111          | EXCISION GANGLION WRIST DORSAL/VOLAR PRIMARY     |
| 25112          | EXCISION GANGLION WRIST DORSAL/VOLAR RECURRENT   |
| 25130          | EXCISION/CURETTAGE CYST/TUMOR CARPAL BONES       |

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|----------------|--------------------------------------------------|
| 25210          | CARPECTOMY 1 BONE                                |
| 25230          | RADICAL STYLOIDECTOMY SEPARATE PROCEDURE         |
| 25240          | EXCISION DISTAL ULNA PARTIAL/COMPLETE            |
| 25275          | RPR TENDON SHEATH EXTENSOR F/ARM&/WRIST W/GRAFT  |
| 25295          | TNOLS FLXR/XTNSR TENDON FOREARM&/WRIST 1 EA      |
| 25608          | OPTX DSTL RADL I-ARTIC FX/EPIPHYSL SEP 2 FRAG    |
| 26045          | FASCIOTOMY PALMAR OPEN PARTIAL                   |
| 26055          | TENDON SHEATH INCISION                           |
| 26075          | ARTHRT EXPL DRG/RMVL LOOSE/FB MTCARPHLNGL JT EA  |
| 26080          | ARTHRT EXPL DRG/RMVL LOOSE/FB IPHAL JT EA        |
| 26110          | ARTHROTOMY BIOPSY INTERPHALANGEAL JOINT EACH     |
| 26111          | EX TUM/VASC MALF SFT TISS HAND/FNGR SUBQ 1.5CM/> |
| 26113          | EX TUM/VASC MAL SFT TIS HAND/FNGR SUBFSC 1.5CM/> |
| 26121          | FASCT PALM W/VO Z-PLASTY TISSUE REARGMT/SKN GRFT |
| 26123          | FASCT PRTL PALMAR 1 DGT PROX IPHAL JT W/VO RPR   |
| 26160          | EXC LESION TDN SHTH/JT CAPSL HAND/FNGR           |
| 26180          | EXCISION TENDON FINGER FLEXOR/EXTENSOR EACH      |
| 26215          | EXC/CURETTAGE CYST/TUMOR PHALANX FINGER W/AGRAFT |
| 26236          | PARTIAL EXCISION DISTAL PHALANX FINGER           |
| 26320          | REMOVAL IMPLANT FROM FINGER/HAND                 |
| 26350          | RPR/ADVMNT FLXR TDN N/Z/2 W/O FR GRAFT EA TENDON |
| 26356          | RPR/ADVMNT FLXR TDN ZONE 2 W/O FR GRFT EA TENDON |
| 26357          | RPR/ADVMNT FLXR TDN ZONE 2 W/O FR GRFT EA TENDON |
| 26426          | RPR XTNSR TDN CNTRL SLIP TISS W/LAT BAND EA FNGR |
| 26432          | CLTX DSTL XTNSR TDN INSJ W/VO PERCUTAN PINNING   |
| 26433          | REPAIR EXTENSOR TENDON DISTAL INSERTION W/O GRF  |
| 26437          | REALIGNMENT EXTENSOR TENDON HAND EACH TENDON     |
| 26480          | TR/TRNSPL TDN CARP/MTCRPL HAND W/O FR GRF EA TDN |
| 26525          | CAPSULECTOMY/CAPSULOTOMY IPHAL JOINT EACH        |
| 26530          | ARTHROPLASTY METACARPOPHALANGEAL JOINT EACH      |
| 26535          | ARTHROPLASTY INTERPHALANGEAL JOINT EACH          |
| 26540          | RPR COLTRL LIGM MTCARPHLNGL/IPHAL JT             |

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| 26541          | RCNSTJ COLTRL LIGM MTCARPHLNGL 1 W/TDN/FSCAL GRF |
| 26542          | RCNSTJ COLTRL LIGM MTCARPHLNGL 1 W/LOCAL TISS    |
| 26842          | ARTHRD CRP/MTACRPL JT THMB W/VO INT FIXJ W/AGRFT |
| 26850          | ARTHRODESIS METACARPOPHALANGEAL JT W/VO INT FIXJ |
| 26860          | ARTHRODESIS INTERPHALANGEAL JT W/VO INT FIXJ     |
| 26951          | AMP F/TH 1/2 JT/PHALANX W/NEURECT W/DIR CLSR     |
| 26952          | AMP F/TH 1/2 JT/PHALANX W/NEURECT LOCAL FLAP     |
| 27048          | EXC TUMOR SOFT TISSUE PELVIS & HIP SUBFASC <5CM  |
| 27062          | EXCISION TROCHANTERIC BURSA/CALCIFICATION        |
| 27120          | ACETABULOPLASTY                                  |
| 27125          | HEMIARTHROPLASTY HIP PARTIAL                     |
| 27134          | REVJ TOT HIP ARTHRP BTH W/VO AGRFT/ALGRFT        |
| 27137          | REVJ TOT HIP ARTHRP ACTBLR W/VO AGRFT/ALGRFT     |
| 27138          | REVJ TOT HIP ARTHRP FEM ONLY W/VO ALGRFT         |
| 27299          | UNLISTED PROCEDURE PELVIS/HIP JOINT              |
| 27324          | BIOPSY SOFT TISSUE THIGH/KNEE AREA DEEP          |
| 27327          | EXCISION TUMOR SOFT TISSUE THIGH/KNEE SUBQ <3CM  |
| 27328          | EXC TUMOR SOFT TISSUE THIGH/KNEE SUBFASC <5CM    |
| 27332          | ARTHRT W/EXC SEMILUNAR CRTLG KNEE MEDIAL/LAT     |
| 27339          | EXC TUMOR SOFT TISSUE THIGH/KNEE SUBFASC 5 CM/>  |
| 27340          | EXCISION PREPATELLAR BURSA                       |
| 27347          | EXCISION LESION MENISCUS/CAPSULE KNEE            |
| 27372          | REMOVAL FOREIGN BODY DEEP THIGH/KNEE             |
| 27437          | ARTHROPLASTY PATELLA W/O PROSTHESIS              |
| 27438          | ARTHROPLASTY PATELLA W/PROSTHESIS                |
| 27440          | ARTHROPLASTY KNEE TIBIAL PLATEAU                 |
| 27441          | ARTHRP KNEE TIBIAL PLATEAU DBRDMT&PRTL SYNVT     |
| 27442          | ARTHROPLASTY FEM CONDYLES/TIBIAL PLATEAU KNEE    |
| 27443          | ARTHRP FEM CONDYLES/TIBL PLATU KNE DBRDMT&PRTL   |
| 27445          | ARTHROPLASTY KNEE HINGE PROSTHESIS               |
| 27446          | ARTHRP KNEE CONDYLE&PLATEAU MEDIAL/LAT CMPRT     |
| 27447          | ARTHRP KNE CONDYLE&PLATU MEDIAL&LAT COMPARTMENTS |
| 27486          | REVJ TOTAL KNEE ARTHRP W/VO ALGRFT 1 COMPONENT   |
| 27487          | REVJ TOT KNEE ARTHRP FEM&ENTIRE TIBIAL COMPONE   |

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| 27599          | UNLISTED PROCEDURE FEMUR/KNEE                    |
| 27620          | ARTHRT ANKLE W/EXPL W/WO BX W/WO RMVL LOOSE/FB   |
| 27632          | EXCISION TUMOR SOFT TISSUE LEG/ANKLE SUBQ 3 CM/> |
| 27638          | EXC/CURETTAGE CYST/TUMOR TIBIA/FIBULA W/ALGRAFT  |
| 27685          | LNGTH/SHRT TENDON LEG/ANKLE 1 TENDON SPX         |
| 27690          | TR/TRNSPL 1 TDN W/MUSC REDIRION/REROUTING SUPFC  |
| 27696          | RPR PRIM DISRUPTED LIGM ANKLE BTH COLTRL LIGMS   |
| 27702          | ARTHROPLASTY ANKLE W/IMPLANT                     |
| 28022          | ARTHRT W/EXPL DRG/RMVL LOOSE/FB MTTARPHLNGL JT   |
| 28035          | RELEASE TARSAL TUNNEL                            |
| 28041          | EXC TUMOR SOFT TISSUE FOOT/TOE SUBFASC 1.5 CM/>  |
| 28043          | EXCISION TUMOR SOFT TISSUE FOOT/TOE SUBQ <1.5CM  |
| 28045          | EXC TUMOR SOFT TISSUE FOOT/TOE SUBFASC <1.5CM    |
| 28047          | RAD RESECTION TUMOR SOFT TISSUE FOOT/TOE 3 CM/>  |
| 28060          | FASCIECTOMY PLANTAR FASCIA PARTIAL SPX           |
| 28086          | SYNOVECTOMY TENDON SHEATH FOOT FLEXOR            |
| 28088          | SYNOVECTOMY TENDON SHEATH FOOT EXTENSOR          |
| 28090          | EXC LESION TENDON SHEATH/CAPSULE W/SYNVCT FOOT   |
| 28092          | EXC LESION TENDON SHEATH/CAPSULE W/SYNVCT TOE EA |
| 28103          | EXC/CURETTAGE CYST/TUMOR TALUS/CALCANEUS ALGRFT  |
| 28104          | EXC/CURTG BONE CYST/B9 TUMORTARSAL/METATARSAL    |
| 28108          | EXC/CURTG CST/B9 TUM PHALANGES FOOT              |
| 28110          | OSTECTOMY PRTL 5TH METAR HEAD SPX                |
| 28111          | OSTECTOMY COMPLETE 1ST METATARSAL HEAD           |
| 28112          | OSTECTOMY COMPLETE OTHER METATARSAL HEAD 2/3/4   |
| 28113          | OSTECTOMY COMPLETE 5TH METATARSAL HEAD           |
| 28118          | OSTECTOMY CALCANEUS                              |
| 28119          | OSTECTOMY CALCANEUS SPUR W/WO PLNTAR FASCIAL RLS |
| 28120          | PARTIAL EXCISION BONE TALUS/CALCANEUS            |
| 28122          | PRTL EXC B1 TARSAL/METAR B1 XCP TALUS/CALCANEUS  |
| 28124          | PARTICAL EXCISION BONE PHALANX TOE               |
| 28126          | RESECTION PARTIAL/COMPLETE PHALANGEAL BASE EACH  |
| 28153          | RESECTION CONDYLE DISTAL END PHALANX EACH TOE    |

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| 28160          | HEMIPHALANGECTOMY/INTERPHALANGEAL JOINT EXC TOE  |
| 28208          | REPAIR TENDON EXTENSOR FOOT 1/2 EACH TENDON      |
| 28250          | DIVISION PLANTAR FASCIA & MUSCLE SPX             |
| 28285          | CORRECTION HAMMERTOES                            |
| 28288          | OSTC PRTL EXOSTC/CONDYLC METAR HEAD              |
| 28289          | HALLUX RIGIDUS W/CHEILECTOMY 1ST MP JT W/O IMPLT |
| 28291          | HALLUX RIGIDUS W/CHEILECTOMY 1ST MP JT W/IMPLT   |
| 28292          | CORRJ HLX VLGS BNCTY SESMDC RESCJ PROX PHLX BASE |
| 28295          | CORRJ HLX VLGS BNCTY SESMDC PROX METAR OSTEOT    |
| 28296          | CORRJ HLX VLGS BNCTY SESMDC DSTL METAR OSTEOT    |
| 28297          | CORRJ HLX VLGS BNCTY SESMDC JOINT ARTHRODESIS    |
| 28298          | CORRJ HLX VLGS BNCTY SESMDC PROX PHLX OSTEOT     |
| 28299          | CORRJ HLX VLGS BNCTY SESMDC W/DOUBLE OSTEOTOMY   |
| 28306          | OSTEOT W/WO LNGTH SHRT/CORRJ 1ST METAR           |
| 28312          | OSTEOT SHRT CORRJ OTH PHALANGES ANY TOE          |
| 28315          | SESAMOIDECTOMY FIRST TOE SPX                     |
| 28322          | RPR NON/MALUNION METARSAL W/WO BONE GRAFT        |
| 28344          | RECONSTRUCTION TOE POLYDACTYLY                   |
| 28755          | ARTHRODESIS GREAT TOE INTERPHALANGEAL JOINT      |
| 28899          | UNLISTED PROCEDURE FOOT/TOES                     |
| 29806          | SURGICAL ARTHROSCOPY SHOULDER CAPSULORRHAPHY     |
| 29807          | SURGICAL ARTHROSCOPY SHOULDER REPAIR SLAP LESION |
| 29819          | SURGICAL ARTHROSCOPY SHOULDER REMOVAL LOOSE/FB   |
| 29820          | SURGICAL ARTHROSCOPY SHOULDER PRTL SYNOVECTOMY   |
| 29821          | SURGICAL ARTHROSCOPY SHOULDER COMPL SYNOVECTOMY  |
| 29822          | SURGICAL ARTHROSCOPY SHOULDER LMTD DBRDMT 1/2    |
| 29823          | SURGICAL ARTHROSCOPY SHOULDER XTNSV DBRDMT 3+    |
| 29824          | SURGICAL ARTHROSCOPY SHOULDER DSTL CLAVICULC     |
| 29825          | SURGICAL ARTHROSCOPY SHOULDER W/LSS&RESCJ ADS    |
| 29826          | SURGICAL ARTHROSCOPY SHO W/CORACOACRM LIGM RLS   |
| 29827          | SURGICAL ARTHROSCOPY SHOULDER W/ROTATOR CUFF RPR |
| 29828          | SURGICAL ARTHROSCOPY SHOULDER BICEPS TENODESIS   |
| 29844          | ARTHROSCOPY WRIST SURGICAL SYNOVECTOMY PARTIAL   |
| 29845          | ARTHROSCOPY WRIST SURGICAL SYNOVECTOMY COMPLETE  |

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| Procedure Code | Procedure Code Description                       |
|----------------|--------------------------------------------------|
| 29847          | ARTHROSCOPY WRIST SURG INT FIXJ FX/INSTABILITY   |
| 29848          | NDSC WRST SURG W/RLS TRANSVRS CARPL LIGM         |
| 29861          | ARTHROSCOPY HIP SURGICAL W/REMOVAL LOOSE/FB      |
| 29862          | ARTHRS HIP DEBRIDEMENT/SHAVING ARTICULAR CRTLG   |
| 29863          | ARTHROSCOPY HIP SURGICAL W/SYNOVECTOMY           |
| 29870          | ARTHROSCOPY KNEE DIAGNOSTIC W/VO SYNOVIAL BX SPX |
| 29871          | ARTHROSCOPY KNEE SURG INFECTION LAVAGE&DRAINAGE  |
| 29873          | ARTHROSCOPY KNEE SURGICAL WITH LATERAL RELEASE   |
| 29874          | ARTHROSCOPY KNEE SURG REMOVAL LOOSE/FOREIGN BODY |
| 29875          | ARTHROSCOPY KNEE SURG SYNOVECTOMY LIMITED SPX    |
| 29876          | ARTHROSCOPY KNEE SURG SYNOVECTOMY MAJ 2/>CMPRT   |
| 29877          | ARTHRS KNEE SURG DEBRIDEMENT/SHVG ARTCLR CRTLG   |
| 29879          | ARTHRS KNE SURG ABRASION ARTHRP/MLT DRLG/MICROFX |
| 29880          | ARTHRS KNEE SURG MENISCECTOMY MED&LAT W/SHAVING  |
| 29881          | ARTHRS KNEE SURG W/MENISCECTOMY MED/LAT W/SHVG   |
| 29882          | ARTHROSCOPY KNE SURG MENISCUS RPR MEDIAL/LATERAL |
| 29883          | ARTHROSCOPY KNE SURG MENISCUS RPR MEDIAL&LATERAL |
| 29884          | ARTHROSCOPY KNEE SURG LYSIS ADHESIONS W/VO MNPJ  |
| 29885          | ARTHRS KNEE SURG DRLG OSTEO DISS GRFG W/VO FIXJ  |
| 29886          | ARTHRS KNEE SURG DRILLING NTC OSTEO DISS LESION  |
| 29887          | ARTHRS KNEE SURG DRLG OSTEO DISS LES W/INT FIXJ  |
| 29888          | ARTHRS AIDED ANT CRUCIATE LIGM RPR/AGMNTJ/RCNSTJ |
| 29889          | ARTHRS AIDED PST CRUCIATE LIGM RPR/AGMNTJ/RCNSTJ |
| 29891          | ARTHRS ANKLE EXC OSTCHNDRL DFCT TALUS&/TIB DRLG  |
| 29892          | ARTHRS AID RPR LES/TALAR DOME FX/TIBL PLAFOND FX |
| 29893          | ENDOSCOPIC PLANTAR FASCIOTOMY                    |
| 29894          | ARTHROSCOPY ANKLE W/REMOVAL LOOSE/FOREIGN BODY   |
| 29895          | ARTHROSCOPY ANKLE SURGICAL SYNOVECTOMY PARTIAL   |
| 29897          | ARTHROSCOPY ANKLE SURGICAL DEBRIDEMENT LIMITED   |
| 29898          | ARTHROSCOPY ANKLE SURGICAL DEBRIDEMENT EXTENSIVE |
| 29899          | ARTHROSCOPY ANKLE SURGICAL W/ANKLE ARTHRODESIS   |
| 29914          | ARTHROSCOPY HIP W/FEMOROPLASTY                   |
| 29915          | ARTHROSCOPY HIP W/ACETABULOPLASTY                |

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| Procedure Code | Procedure Code Description                                         |
|----------------|--------------------------------------------------------------------|
| 29916          | ARTHROSCOPY HIP W/LABRAL REPAIR                                    |
| 29999          | UNLISTED PROCEDURE ARTHROSCOPY                                     |
| 30115          | EXCISION NASAL POLYP EXTENSIVE                                     |
| 30130          | EXCISION INFERIOR TURBINATE PARTIAL/COMPLETE                       |
| 30140          | SUBMUCOUS RESECT INFERIOR TURBINATE PARTIAL/COMPLETE               |
| 30220          | INSERTION NASAL SEPTAL PROSTHESIS BUTTON                           |
| 30520          | SEPTOPLASTY/SUBMUCOUS RESECT W/WO CARTILAGE GRAFT                  |
| 30580          | REPAIR FISTULA OROMAXILLARY                                        |
| 30802          | ABLTJ SOFT TISSUE INFERIOR TURBIDITY/BIOPSY INTRAMURAL             |
| 30930          | FRACTURE NASAL INFERIOR TURBINATE THERAPEUTIC                      |
| 31030          | SINUSOTOMY MAXILLARY RADICAL W/O REMOVAL ANTROCHOID POLYPS         |
| 31200          | ETHMOIDECTOMY INTRANASAL ANTERIOR                                  |
| 31528          | LARYNGOSCOPY W/WO TRACHEOSCOPY W/DILATION IN                       |
| 31535          | LARYNGOSCOPY DIRECT OPERATIVE W/BIOPSY                             |
| 31536          | LARYNGOSCOPY W/BIOPSY MICROSCOPE/TELESCOPE                         |
| 31540          | LARYNGOSCOPY EXCISE TUMOR/STRIPPING CORDS/EPIGLOTT                 |
| 31541          | LARYNGOSCOPY EXCISE TUMOR/STRIPPING CORDS/EPIGLOTTIC MUCOSA/TONGUE |
| 33206          | INSERT NEW/REPLACE PERMANENT PACEMAKER W/TRANS CATHETER ATRIAL     |
| 33207          | INSERT NEW/REPLACE PERMANENT PACEMAKER W/TRANS CATHETER VENTR      |
| 33208          | INSERT NEW/REPLACE PERMANENT PM W/TRANS CATHETER ATRIAL&VENT       |
| 33212          | INSERT PM PLS GEN W/EXIST SINGLE LEAD                              |
| 33213          | INSERT PACEMAKER PULSE GEN ONLY W/EXIST DUAL LEADS                 |
| 33214          | UPDATE PACEMAKER SYSTEM CONVERT 1CHAMBER SYSTEM 2CHAMBER SYSTEM    |
| 33224          | INSERT ELTRD CARDIAC VENT SYSTEM ATTACH PREVIOUS PM/DFB PLS GEN    |
| 33225          | INSERT ELTRD CARDIAC VENT SYSTEM TRANS CATHETER DFB/PM PLS GEN     |
| 33227          | REMOVAL PERM PM PLS GEN W/REPL PLS GEN SINGLE LEAD                 |
| 33228          | REMOVAL PERM PM PLS GEN W/REPL PLS GEN 2 LEAD SYSTEM               |
| 33229          | REMOVAL PERM PM PLS GEN W/REPL PLS GEN MULT LEAD                   |
| 33230          | INSERT IMPLANTABLE DEFIB PULSE GEN W/EXIST DUAL LEADS              |
| 33231          | INSERT IMPLANTABLE DEFIB PULSE GEN W/EXIST MULTILEADS              |
| 33240          | INSERT IMPLANTABLE DEFIB PULSE GEN W/1 EXISTING LEAD               |
| 33249          | INSERT/REPLACE PERM DFB W/TRANS CATHETER LEADS 1/DUAL CHAMBER      |
| 33263          | REMOVAL IMPLANTABLE DFB PLS GEN W/REPLACE PLS GEN 2 LEADS          |
| 33264          | REMOVAL IMPLANTABLE DFB PLS GEN W/REPLACE PLS GEN MULT LEADS       |

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| Procedure Code | Procedure Code Description                       |
|----------------|--------------------------------------------------|
| 33270          | INS/RPLCMNT PERM SUBQ IMPLTBL DFB W/SUBQ ELTRD   |
| 36581          | RPLCMT COMPL TUN CVC W/O SUBQ PORT/PMP           |
| 36582          | RPLCMT COMPL TUN CTR VAD W/SUBQ PORT             |
| 36901          | INTRO CATH DIALYSIS CIRCUIT DX ANGRPH FLUOR S&I  |
| 36902          | INTRO CATH DIALYSIS CIRCUIT W/TRLUML BALO ANGIOP |
| 37220          | REVASCULARIZATION ILIAC ARTERY ANGIOP 1ST VSL    |
| 37221          | REVSC OPN/PRQ ILIAC ART W/STNT PLMT & ANGIOPLSTY |
| 37224          | REVSC OPN/PRG FEM/POP W/ANGIOPLASTY UNI          |
| 37225          | REVSC OPN/PRQ FEM/POP W/ATHRC/ANGIOP SM VSL      |
| 37226          | REVSC OPN/PRQ FEM/POP W/STNT/ANGIOP SM VSL       |
| 37227          | REVSC OPN/PRQ FEM/POP W/STNT/ATHRC/ANGIOP SM VSL |
| 37228          | REVSC OPN/PRQ TIB/PERO W/ANGIOPLASTY UNI         |
| 37229          | REVSC OPN/PRQ TIB/PERO W/ATHRC/ANGIOP SM VSL     |
| 37230          | REVSC OPN/PRQ TIB/PERO W/STNT/ANGIOP SM VSL      |
| 37231          | REVSC OPN/PRQ TIB/PERO W/STNT/ATHR/ANGIOP SM VSL |
| 37242          | VASCULAR EMBOLIZATION OR OCCLUSION ARTERIAL RS&I |
| 37243          | VASCULAR EMBOLIZE/OCCLUDE ORGAN TUMOR INFARCT    |
| 37254          | REVSC EVASC IVT ANGIOP UNI SF LES 1ST VSL        |
| 37256          | REVSC EVASC IVT ANGIOP UNI CPLX LES 1ST VSL      |
| 37258          | REVSC EVASC IVT ST PLMT UNI SF LES 1ST VSL       |
| 37260          | REVSC EVASC IVT ST PLMT UNI CPLX LES 1ST VSL     |
| 37263          | REVSC EVASC FPVT ANGIOP UNI SF LES 1ST VSL       |
| 37265          | REVSC EVASC FPVT ANGIOP UNI CPLX LES 1ST VSL     |
| 37267          | REVSC EVASC FPVT ST PLMT UNI SF LES 1ST VSL      |
| 37269          | REVSC EVASC FPVT ST PLMT UNI CPLX LES 1ST VSL    |
| 37271          | REVSC EVASC FPVT ATHRC UNI SF LES 1ST VSL        |
| 37273          | REVSC EVASC FPVT ATHRC UNI CPLX LES 1ST VSL      |
| 37275          | REVSC EVASC FPVT ST ATHRC UNI SF LES 1ST VSL     |
| 37277          | REVSC EVASC FPVT ST ATHRC UNI CPLX LES 1ST VSL   |
| 37280          | REVSC EVASC TPVT ANGIOP UNI SF LES 1ST VSL       |
| 37282          | REVSC EVASC TPVT ANGIOP UNI CPLX LES 1ST VSL     |
| 37284          | REVSC EVASC TPVT ST PLMT UNI SF LES 1ST VSL      |
| 37286          | REVSC EVASC TPVT ST PLMT UNI CPLX LES 1ST VSL    |
| 37288          | REVSC EVASC TPVT ATHRC UNI SF LES 1ST VSL        |

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| Procedure Code | Procedure Code Description                      |
|----------------|-------------------------------------------------|
| 37290          | REVSC EVASC TPVT ATHRC UNI CPLX LES 1ST VSL     |
| 37292          | REVSC EVASC TPVT ST ATHRC UNI SF LES 1ST VSL    |
| 37294          | REVSC EVASC TPVT ST ATHRC UNI CPLX LES 1ST VSL  |
| 37296          | REVSC EVASC IMVT ANGIOP UNI SF LES 1ST VSL      |
| 37298          | REVSC EVASC IMVT ANGIOP UNI CPLX LES 1ST VSL    |
| 37609          | LIGATION/BIOPSY TEMPORAL ARTERY                 |
| 37700          | LIG&DIV LONG SAPH VEIN SAPHFEM JUNCT/INTERRUPT  |
| 37718          | LIG DIV & STRIPPING SHORT SAPHENOUS VEIN        |
| 37722          | LIG DIV&STRPG LONG SAPH SAPHFEM JUNCT KNE/BELW  |
| 37780          | LIGJ & DIV SHORT SAPH VEIN SAPHENOPOP JUNCT SPX |
| 37785          | LIGJ DIVJ &/EXCJ VARICOSE VEIN CLUSTER 1 LEG    |
| 40812          | EXC LESION MUCOSA & SBMCSL VESTIBULE SMPL RPR   |
| 41110          | EXCISION LESION TONGUE W/O CLOSURE              |
| 41112          | EXC LESION TONGUE W/CLSR ANTERIOR TWO-THIRDS    |
| 41113          | EXC LESION TONGUE W/CLSR POSTERIOR ONE-THIRD    |
| 42440          | EXCISION SUBMANDIBULAR SUBMAXILLARY GLAND       |
| 42800          | BIOPSY OROPHARYNX                               |
| 42810          | EXC BRANCHIAL CLEFT CYST CONFINED SKN&SUBQ TIS  |
| 42821          | TONSILLECTOMY & ADENOIDECTOMY AGE 12/>          |
| 42826          | TONSILLECTOMY PRIMARY/SECONDARY AGE 12/>        |
| 43289          | UNLISTED LAPAROSCOPY PROCEDURE ESOPHAGUS        |
| 43499          | UNLISTED PROCEDURE ESOPHAGUS                    |
| 46220          | EXCISION SINGLE EXTERNAL PAPILLA OR TAG ANUS    |
| 46221          | HEMORRHOIDECTOMY INTERNAL RUBBER BAND LIGATIONS |
| 46250          | HEMORRHOIDECTOMY XTRNL 2/> COLUMN/GROUP         |
| 46255          | HEMORRHOIDECTOMY NTRNL & XTRNL 1 COLUMN/GROUP   |
| 46257          | HEMORRHOID NTRNL & XTRNL 1 COLUMN W/FISSURECTO  |
| 46261          | HRHC NTRNL & XTRNL 2/> COLUMN/GROUP W/FISSU     |
| 46270          | SURG TX ANAL FISTULA SUBQ                       |
| 46505          | CHEMODENERVATION INTERNAL ANAL SPHINCTER        |
| 46612          | ANOSC RMVL MULT TUMORS CAUTERY/SNARE            |
| 46946          | INT HRHC BY LIGATION 2+ HROID W/O IMG GDN       |
| 52000          | CYSTOURETHROSCOPY                               |
| 52005          | CYSTOURETHROSCOPY W/URETERAL CATHETERIZATION    |

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| Procedure Code | Procedure Code Description                       |
|----------------|--------------------------------------------------|
| 52204          | CYSTOURETHROSCOPY WITH BIOPSY                    |
| 52234          | CYSTO W/REMOVAL OF TUMORS SMALL                  |
| 52235          | CYSTOURETHROSCOPY W/DEST &/RMVL MED BLADDER TUM  |
| 52260          | CYSTOURETHROSCOPY W/DIL BLADDER GENERAL ANESTH   |
| 52265          | CYSTOURETHROSCOPY W/DIL BLADDER LOCAL ANESTHESIA |
| 52275          | CYSTOURETHROSCOPY W/INTERNAL URETHROTOMY MALE    |
| 52276          | CYSTOURETHROSCOPY W/INTERNAL URETHROTOMY         |
| 52281          | CYSTO CALIBRATION DILAT URTL STRIX/STENOSIS      |
| 52283          | CYSTOURETHROSCOPY W/STEROID INJECTION STRICTURE  |
| 52285          | CYSTOURETHROSCOPY TX FEMALE URETHRAL SYNDROME    |
| 52287          | CYSTOURETHROSCOPY INJ CHEMODENERVATION BLADDER   |
| 52300          | CYSTO W/RESCJ/FULG ORTHOPIC URETEROCELE UNI/BI   |
| 52310          | CYSTO W/SIMPLE REMOVAL STONE & STENT             |
| 52315          | CYSTO W/COMPLEX REMOVAL STONE & STENT            |
| 52332          | CYSTO W/INSERT URETERAL STENT                    |
| 52352          | CYSTO W/URETEROSCOPY W/RMVL/MANJ STONES          |
| 52356          | CYSTO/URETERO W/LITHOTRIPSY &INDWELL STENT INSRT |
| 52441          | CYSTO INSJ PERM ADJTBL TRANSPROSTATIC 1 IMPLANT  |
| 52442          | CYSTO INSJ PERM ADJTBL TRANSPROSTATIC IMPLANT EA |
| 52500          | TRANSURETHRAL RESECTION BLADDER NECK             |
| 53260          | EXC/FULGURATION URETHRAL POLYP DSTL URETHRA      |
| 53270          | EXCISION OR FULGURATION SKENES GLANDS            |
| 53850          | TRURL DSTRJ PRSTATE TISS MICROWAVE THERMOTH      |
| 53899          | UNLISTED PROCEDURE URINARY SYSTEM                |
| 54001          | SLITTING PREPUCE DORSAL/LAT SPX XCP NEWBORN      |
| 54055          | DSTRJ LESION PENIS SIMPLE ELECTRODESICCATION     |
| 54060          | DSTRJ LESION PENIS SIMPLE SURG EXCISION          |
| 54110          | EXCISION OF PENILE PLAQUE                        |
| 54161          | CIRCUMCISION AGE >28 DAYS                        |
| 54164          | FRENULOTOMY PENIS                                |
| 54300          | PENIS STRAIGHTENING CHORDEE                      |
| 54360          | PLASTIC RPR PENIS CORRECT ANGULATION             |
| 54530          | ORCHIECTOMY RADICAL TUMOR INGUINAL APPROACH      |
| 54700          | I&D EPIDIDYMIS TESTIS&/SCROTAL SPACE             |

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| Procedure Code | Procedure Code Description                       |
|----------------|--------------------------------------------------|
| 54840          | EXCISION SPERMATOCELE W/VO EPIDIDYMECTOMY        |
| 54860          | EPIDIDYMECTOMY UNILATERAL                        |
| 55040          | EXCISION HYDROCELE UNILATERAL                    |
| 55041          | EXCISION HYDROCELE BILATERAL                     |
| 55110          | SCROTAL EXPLORATION                              |
| 55120          | REMOVAL FOREIGN BODY SCROTUM                     |
| 55500          | EXC HYDROCELE SPRMATIC CORD UNI SPX              |
| 55873          | CRYOSURGICAL ABLATION PROSTATE W/US & MONITORI   |
| 56442          | HYMENOTOMY SIMPLE INCISION                       |
| 56620          | VULVECTOMY SIMPLE PARTIAL                        |
| 56740          | EXCISION BARTHOLINS GLAND OR CYST                |
| 57000          | COLPOTOMY W/EXPLORATION                          |
| 57295          | REVJ/RMVL PROSTHETIC VAGINAL GRAFT VAGINAL APP   |
| 57461          | COLPOSCOPY CERVIX VAG ELTRD CONIZATION CERVIX    |
| 57513          | CAUTERY CERVIX LASER ABLATION                    |
| 57700          | CERCLAGE UTERINE CERVIX NONOBSTETRICAL           |
| 58560          | HYSTEROSCOPY DIV/RESCJ INTRAUTERINE SEPTUM       |
| 58561          | HYSTEROSCOPY REMOVAL LEIOMYOMATA                 |
| 58565          | HYSTEROSCOPY BI TUBE OCCLUSION W/PERM IMPLNTS    |
| 62291          | INJECTION PX DISCOGRPHY EA LVL CERVICAL/THORACIC |
| 62320          | NJX DX/THER SBST INTRLMNR CRV/THRC W/O IMG GDN   |
| 62321          | NJX DX/THER SBST INTRLMNR CRV/THRC W/IMG GDN     |
| 62322          | NJX DX/THER SBST INTRLMNR LMBR/SAC W/O IMG GDN   |
| 62323          | NJX DX/THER SBST INTRLMNR LMBR/SAC W/IMG GDN     |
| 62324          | NJX DX/THER SBST INTRLMNR CRV/THRC W/O IMG GDN   |
| 62325          | NJX DX/THER SBST INTRLMNR CRV/THRC W/IMG GDN     |
| 62326          | NJX DX/THER SBST INTRLMNR LMBR/SAC W/O IMG GDN   |
| 62327          | NJX DX/THER SBST INTRLMNR LMBR/SAC W/IMG GDN     |
| 64479          | NJX AA&/STRD TFRML EPI CERVICAL/THORACIC 1 LEVEL |
| 64483          | NJX AA&/STRD TFRML EPI LUMBAR/SACRAL 1 LEVEL     |
| 64490          | NJX DX/THER AGT PVRT FACET JT CRV/THRC 1 LEVEL   |
| 64493          | NJX DX/THER AGT PVRT FACET JT LMBR/SAC 1 LEVEL   |
| 64520          | INJECTION ANES LMBR/THRC PARAVERTBRL SYMPATHETIC |
| 64585          | REVJ/RMVL PERPH NEUROSTIMULATOR ELECTRODE ARRAY  |

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| Procedure Code | Procedure Code Description                       |
|----------------|--------------------------------------------------|
| 64600          | DSTRJ TRIGEMINAL NRV SUPRAORB INFRAORB BRANCH    |
| 64610          | DSTRJ NEURLYTIC TRIGEM NRV 2/3 DIV RADIO MONITOR |
| 64620          | DSTRJ NEUROLYTIC AGENT INTERCOSTAL NERVE         |
| 64633          | DSTR NROLYTC AGNT PARVERTEB FCT SNGL CRVCL/THORA |
| 64635          | DSTR NROLYTC AGNT PARVERTEB FCT SNGL LMBR/SACRAL |
| 64640          | DSTRJ NEUROLYTIC AGENT OTHER PERIPHERAL NERVE    |
| 64702          | NEUROPLASTY DIGITAL 1/BOTH SAME DIGIT            |
| 64718          | NEUROPLASTY &/TRANSPOSITION ULNAR NERVE ELBOW    |
| 64719          | NEUROPLASTY &/TRANSPOSITION ULNAR NERVE WRIST    |
| 64721          | NEUROPLASTY &/TRANSPOS MEDIAN NRV CARPAL TUNNE   |
| 64776          | EXC NEUROMA DIGITAL NERVE 1 OR BOTH SAME DIGIT   |
| 64782          | EXC NEUROMA HAND/FOOT XCP DIGITAL NERVE          |
| 64788          | EXC NEUROFIBROMA/NEUROLEMMOMA CUTAN NRV          |
| 64831          | SUTURE DIGITAL NERVE HAND/FOOT 1 NERVE           |
| 64835          | SUTURE 1 NERVE MEDIAN MOTOR THENAR               |
| 65400          | EXCISION LESION CORNEA XCP PTERYGIUM             |
| 65420          | EXCISION/TRANSPOSITION PTERYGIUM W/O GRAFT       |
| 65426          | EXCISION/TRANSPOSITION PTERYGIUM W/GRAFG         |
| 65435          | RMVL CORNEAL EPITHELIUM W/VO CHEMOCATERIZATION   |
| 65436          | RMVL CORNEAL EPITHELIUM W/APPL CHELATING AGENT   |
| 65710          | KERATOPLASTY ANTERIOR LAMELLAR                   |
| 65730          | KERATOPLASTY PENTRG EXCEPT APHAKIA/PSEUDOPHAKIA  |
| 65750          | KERATOPLASTY PENETRAING APHAKIA                  |
| 65755          | KERATOPLASTY PENETRATING PSEUDOPHAKIA            |
| 65756          | KERATOPLASTY ENDOTHELIAL                         |
| 65778          | PLACE AMNIOTIC MEMBRA OCULAR SURFACE W/O SUTURES |
| 65779          | PLACE AMNIOTIC MEMBRANE OCULAR SURFACE SUTURED   |
| 65780          | OCULAR SURFACE RECONSTRUCTION AMNIOTIC MEMBRANE  |
| 65815          | PARACEN ANT CHAM RMVL BLOOD W/VO IRRIG&/AIR IN   |
| 65855          | TRABECULOPLASTY BY LASER SURGERY                 |
| 65875          | SEVERING ADS ANT SEG INCAL SPX POST SYNECHIAE    |
| 65920          | RMVL IMPLANTED MATERIAL ANTERIO SEGMENT EYE      |
| 66170          | FSTLJ SCLERA GLAUCOMA TRABECULECT AB EXTERNO     |
| 66172          | FSTLJ SCLERA GLC TRBEC AB EXTERNO SCARRING       |

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| Procedure Code | Procedure Code Description                       |
|----------------|--------------------------------------------------|
| 66185          | REVJ AQUEOUS SHUNT EXTRAOCULAR RESERVOIR W/GRAFT |
| 66682          | SUTURE IRIS CILIARY BODY SPX RETRIEVAL SUTURE    |
| 66710          | CILIARY BODY DSTRJ CYCLOPHOTOCOAG TRANSSCERAL    |
| 66711          | ECP CILIARY BODY DSTRJ W/O RMVL CRYSTALLINE LENS |
| 66761          | IRIDOTOMY/IRRIDECTOMY LASER SURG PER SESSION     |
| 66821          | POST-CATARACT LASER SURGERY                      |
| 66840          | RMVL LENS MATERIAL ASPIR TQ 1/> STAGES           |
| 66982          | XCAPSL CTRC RMVL INSJ IO LENS PROSTH CPLX WO ECP |
| 66984          | XCAPSL CTRC RMVL INSJ IO LENS PROSTH W/O ECP     |
| 66988          | XCAPSL CTRC RMVL INSJ IO LENS PROSTH W/ECP       |
| 67010          | RMVL VITREOUS ANT APPR SUBTOT RMVL MECH VITRECT  |
| 67036          | VITRECTOMY MECHANICAL PARS PLANA                 |
| 67039          | VITRECTOMY MCHNL PARS PLNA FOCAL ENDOLASER PC    |
| 67040          | VTRECTOMY MCHNL PARS PLNA ENDOLASER PANRTA PC    |
| 67041          | VITRECTOMY PARS PLANA REMOVE PRERETINAL MEMBRANE |
| 67042          | VITRECTOMY PARS PLANA REMOVE INT MEMB RETINA     |
| 67043          | VITRECTOMY PARS PLANA REMOVE SUBRETINAL MEMBRANE |
| 67400          | ORBITOTOMY W/O BONE FLAP EXPL W/WO BIOPSY        |
| 67412          | ORBITOTOMY W/O BONE FLAP W/REMOVAL LESION        |
| 67445          | ORBITOTOMY BONE FLAP/WINDOW LAT RMVL BONE DCMPRN |
| 67840          | EXC LESION EYELID W/O CLSR/W/SIMPLE DIR CLOSURE  |
| 67875          | TEMPORARY CLOSURE EYELIDS SUTURE                 |
| 67935          | SUTR WND EYELID/MARGIN/TARSUS/CONJUNC FULL THICK |
| 67971          | RCNSTJ EYELID FULL THICKNESS </TWO-THIRDS 1 STG  |
| 67973          | RCNSTJ EYELID FULL THICKNESS LOWER EYELID 1 STG  |
| 68100          | BIOPSY CONJUNCTIVA                               |
| 68110          | EXCISION LESION CONJUNCTIVA </1 CM               |
| 68115          | EXCISION LESION CONJUNCTIVA > 1 CM               |
| 68135          | DESTRUCTION LESION CONJUNCTIVA                   |
| 68440          | SNIP INCISION LACRIMAL PUNCTUM                   |
| 68700          | PLASTIC REPAIR CANALICULI                        |
| 68720          | DACRYOCSTORHINOSTOMY                             |
| 68750          | CONJUNCTIVORHINOSTOMY INSJ TUBE/STENT            |
| 68815          | PROBE NASOLACRIMAL DUCT W/WO IRRG INSJ TUBE/STNT |

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| Procedure Code | Procedure Code Description                       |
|----------------|--------------------------------------------------|
| 69140          | EXCISION EXOSTOSIS EXTERNAL AUDITORY CANAL       |
| 69145          | EXCISION SOFT TIS LESION EXTERNAL AUDITORY CANAL |
| 69205          | RMVL FB XTRNL AUDITORY CANAL ANES                |
| 69310          | RECONSTRUCTION EXTERNAL AUDITORY CANAL SPX       |
| 69320          | RCNSTJ XTRNL AUD CANAL CONGENITAL ATRESIA 1 STG  |
| 69424          | VENTILATING TUBE RMVL REQUIRING GENERAL ANES     |
| 69440          | MIDDLE EAR EXPL THRU POSTAUR/EAR CANAL INC       |
| 69641          | TMPP MASTOIDECTOMY W/O OSSICULAR CHAIN RECNSTJ   |
| 69643          | TMPP MASTOIDECT NTC/RCNSTED WALL W/O OCR         |
| 69644          | TMPP MASTOIDECT NTC/RCNSTED CANAL WALL OCR       |
| 69645          | TYMPANOPLASTY MASTOIDECTOMY RAD/COMPL W/O OCR    |
| 69646          | TYMPANOPLASTY MASTOIDECTOMY RAD/COMPL W/OCR      |
| 69660          | STAPEDECTOMY/STAPEDOTOMY                         |
| 69661          | STAPEDECTOMY/STAPEDOTOMY W/FOOTPLATE DRILL OUT   |
| 69662          | REVISION STAPEDECTOMY/STAPEDOTOMY                |
| 70336          | MRI TEMPOROMANDIBULAR JOINT                      |
| 70450          | CT HEAD/BRAIN W/O CONTRAST MATERIAL              |
| 70460          | CT HEAD/BRAIN W/CONTRAST MATERIAL                |
| 70470          | CT HEAD/BRAIN W/O & W/CONTRAST MATERIAL          |
| 70472          | CT CERE PRFUJ ALYS C+ W/CT/CTA SAME ANATOMY      |
| 70473          | CT CERE PRFUJ ALYS C+ W/O CT/CTA SAME ANATOMY    |
| 70480          | CT ORBIT SELLA/POST FOSSA/EAR W/O CONTRAST MATRL |
| 70481          | CT ORBIT SELLA/POST FOSSA/EAR W/CONTRAST MATRL   |
| 70482          | CT ORBIT SELLA/POST FOSSA/EAR W/O & W/CONTR MATR |
| 70486          | CT MAXILLOFACIAL W/O CONTRAST MATERIAL           |
| 70487          | CT MAXILLOFACIAL W/CONTRAST MATERIAL             |
| 70488          | CT MAXILLOFACIAL W/O & W/CONTRAST MATERIAL       |
| 70490          | CT SOFT TISSUE NECK W/O CONTRAST MATERIAL        |
| 70491          | CT SOFT TISSUE NECK W/CONTRAST MATERIAL          |
| 70492          | CT SOFT TISSUE NECK W/O & W/CONTRAST MATERIAL    |
| 70496          | CT ANGIOGRAPHY HEAD W/CONTRAST/NONCONTRAST       |
| 70498          | CT ANGIOGRAPHY NECK W/CONTRAST/NONCONTRAST       |
| 70540          | MRI ORBIT FACE &/NECK W/O CONTRAST               |
| 70542          | MRI ORBIT FACE & NECK W/CONTRAST MATERIAL        |

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| Procedure Code | Procedure Code Description                       |
|----------------|--------------------------------------------------|
| 70543          | MRI ORBIT FACE & NECK W/O & W/CONTRAST MATRL     |
| 70544          | MRA HEAD W/O CONTRST MATERIAL                    |
| 70545          | MRA HEAD W/CONTRAST MATERIAL                     |
| 70546          | MRA HEAD W/O & W/CONTRAST MATERIAL               |
| 70547          | MRA NECK W/O CONTRST MATERIAL                    |
| 70548          | MRA NECK W/CONTRAST MATERIAL                     |
| 70549          | MRA NECK W/O & W/CONTRAST MATERIAL               |
| 70551          | MRI BRAIN BRAIN STEM W/O CONTRAST MATERIAL       |
| 70552          | MRI BRAIN BRAIN STEM W/CONTRAST MATERIAL         |
| 70553          | MRI BRAIN BRAIN STEM W/O W/CONTRAST MATERIAL     |
| 70554          | MRI BRAIN FUNCTIONAL W/O PHYSICIAN ADMNISTRATION |
| 70555          | MRI BRAIN FUNCTIONAL W/PHYSICIAN ADMNISTRATION   |
| 71250          | DIAGNOSTIC COMPUTED TOMOGRAPHY THORAX W/O CNTRST |
| 71260          | DIAGNOSTIC COMPUTED TOMOGRAPHY THORAX W/CONTRAST |
| 71270          | DIAGNOSTIC COMPUTED TOMOGRAPHY THORAX C-/C+      |
| 71271          | COMPUTED TOMOGRAPHY THORAX LW DOSE LNG CA SCR C- |
| 71275          | CT ANGIOGRAPHY CHEST W/CONTRAST/NONCONTRAST      |
| 71550          | MRI CHEST W/O CONTRAST MATERIAL                  |
| 71551          | MRI CHEST W/CONTRAST MATERIAL                    |
| 71552          | MRI CHEST W/O & W/CONTRAST MATERIAL              |
| 71555          | MRA CHEST W/O & W/CONTRAST MATERIAL              |
| 72125          | CT CERVICAL SPINE W/O CONTRAST MATERIAL          |
| 72126          | CT CERVICAL SPINE W/CONTRAST MATERIAL            |
| 72127          | CT CERVICAL SPINE W/O & W/CONTRAST MATERIAL      |
| 72128          | CT THORACIC SPINE W/O CONTRAST MATERIAL          |
| 72129          | CT THORACIC SPINE W/CONTRAST MATERIAL            |
| 72130          | CT THORACIC SPINE W/O & W/CONTRAST MATERIAL      |
| 72131          | CT LUMBAR SPINE W/O CONTRAST MATERIAL            |
| 72132          | CT LUMBAR SPINE W/CONTRAST MATERIAL              |
| 72133          | CT LUMBAR SPINE W/O & W/CONTRAST MATERIAL        |
| 72141          | MRI SPINAL CANAL CERVICAL W/O CONTRAST MATRL     |
| 72142          | MRI SPINAL CANAL CERVICAL W/CONTRAST MATRL       |
| 72146          | MRI SPINAL CANAL THORACIC W/O CONTRAST MATRL     |
| 72147          | MRI SPINAL CANAL THORACIC W/CONTRAST MATRL       |

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| Procedure Code | Procedure Code Description                      |
|----------------|-------------------------------------------------|
| 72148          | MRI SPINAL CANAL LUMBAR W/O CONTRAST MATERIAL   |
| 72149          | MRI SPINAL CANAL LUMBAR W/CONTRAST MATERIAL     |
| 72156          | MRI SPINAL CANAL CERVICAL W/O & W/CONTR MATRL   |
| 72157          | MRI SPINAL CANAL THORACIC W/O & W/CONTR MATRL   |
| 72158          | MRI SPINAL CANAL LUMBAR W/O & W/CONTR MATRL     |
| 72159          | MRA SPINAL CANAL W/VO CONTRAST MATERIAL         |
| 72191          | CT ANGIOGRAPHY PELVIS W/CONTRAST/NONCONTRAST    |
| 72192          | CT PELVIS W/O CONTRAST MATERIAL                 |
| 72193          | CT PELVIS W/CONTRAST MATERIAL                   |
| 72194          | CT PELVIS W/O & W/CONTRAST MATERIAL             |
| 72195          | MRI PELVIS W/O CONTRAST MATERIAL                |
| 72196          | MRI PELVIS W/CONTRAST MATERIAL                  |
| 72197          | MRI PELVIS W/O & W/CONTRAST MATERIAL            |
| 72198          | MRA PELVIS W/VO CONTRAST MATERIAL               |
| 73200          | CT UPPER EXTREMITY W/O CONTRAST MATERIAL        |
| 73201          | CT UPPER EXTREMITY W/CONTRAST MATERIAL          |
| 73202          | CT UPPER EXTREMITY W/O & W/CONTRAST MATERIAL    |
| 73206          | CT ANGIOGRAPHY UPPER EXTREMITY                  |
| 73218          | MRI UPPER EXTREMITY OTH THAN JT W/O CONTR MATRL |
| 73219          | MRI UPPER EXTREMITY OTH THAN JT W/CONTR MATRL   |
| 73220          | MRI UPPER EXTREM OTHER THAN JT W/O & W/CONTRAS  |
| 73221          | MRI ANY JT UPPER EXTREMITY W/O CONTRAST MATRL   |
| 73222          | MRI ANY JT UPPER EXTREMITY W/CONTRAST MATRL     |
| 73223          | MRI ANY JT UPPER EXTREMITY W/O & W/CONTR MATRL  |
| 73225          | MRA UPPER EXTREMITY W/VO CONTRAST MATERIAL      |
| 73700          | CT LOWER EXTREMITY W/O CONTRAST MATERIAL        |
| 73701          | CT LOWER EXTREMITY W/CONTRAST MATERIAL          |
| 73702          | CT LOWER EXTREMITY W/O & W/CONTRAST MATRL       |
| 73706          | CT ANGIOGRAPHY LOWER EXTREMITY                  |
| 73718          | MRI LOWER EXTREM OTH/THN JT W/O CONTR MATRL     |
| 73719          | MRI LOWER EXTREM OTH/THN JT W/CONTRAST MATRL    |
| 73720          | MRI LOWER EXTREM OTH/THN JT W/O & W/CONTR MATR  |
| 73721          | MRI ANY JT LOWER EXTREM W/O CONTRAST MATRL      |
| 73722          | MRI ANY JT LOWER EXTREM W/CONTRAST MATERIAL     |

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| Procedure Code | Procedure Code Description                       |
|----------------|--------------------------------------------------|
| 73723          | MRI ANY JT LOWER EXTREM W/O & W/CONTRAST MATRL   |
| 73725          | MRA LOWER EXTREMITY W/WO CONTRAST MATERIAL       |
| 74150          | CT ABDOMEN W/O CONTRAST MATERIAL                 |
| 74160          | CT ABDOMEN W/CONTRAST MATERIAL                   |
| 74170          | CT ABDOMEN W/O CONTRAST FLWD BY CONTRAST MATRL   |
| 74174          | CTA ABD&PLVS W/CNTRST & IMG POSTPROCESSING       |
| 74175          | CTA ABDOMEN W/CONTRAST&IMG POSTPROCESSING        |
| 74176          | CT ABDOMEN & PELVIS W/O CONTRAST MATERIAL        |
| 74177          | CT ABDOMEN & PELVIS W/CONTRAST MATERIAL          |
| 74178          | CT ABD&PLV W/O CNTRST 1/BTH FLWD CNTRST 1/BTH    |
| 74181          | MRI ABDOMEN W/O CONTRAST MATERIAL                |
| 74182          | MRI ABDOMEN W/CONTRAST MATERIAL                  |
| 74183          | MRI ABDOMEN W/O CONTRAST FLWD BY W/CONTRAST      |
| 74185          | MRA ABDOMEN W/WO CONTRAST MATERIAL               |
| 74261          | CT COLONOGRPHY DX IMAGE POSTPROCESS W/O CONTRAST |
| 74262          | CT COLONOGRPHY DX IMAGE POSTPROCESS W/CONTRAST   |
| 74263          | CT COLONOGRAPHY SCREENING IMAGE POSTPROCESSING   |
| 75557          | CARDIAC MRI MORPHOLOGY & FUNCTION W/O CONTRAST   |
| 75559          | CARDIAC MRI W/O CONTRAST W/STRESS IMAGING        |
| 75561          | CARDIAC MRI W/WO CONTRAST & FURTHER SEQ          |
| 75563          | CARDIAC MRI W/W/O CONTRAST W/STRESS              |
| 75571          | CT HEART NO CONTRAST QUANT EVAL CORONRY CALCIUM  |
| 75572          | CT HEART CONTRAST EVAL CARDIAC STRUCTURE&MORPH   |
| 75573          | CT HEART C+ CARDIAC STRUX&MORPH CGEN HRT DS      |
| 75574          | CTA HRT CORNRY ART/BYPASS GRFTS CONTRST 3D POST  |
| 75580          | N-INVAS EST C FFR AUGMNT SW ALYS CTA I&R PHY/QHP |
| 75635          | CTA ABDL AORTA&BI ILIOFEM W/CONTRAST&POSTP       |
| 76380          | CT LIMITED/LOCALIZED FOLLOW UP STUDY             |
| 76390          | MRI SPECTROSCOPY                                 |
| 76391          | MAGNETIC RESONANCE ELASTOGRAPHY                  |
| 77021          | MRI GUIDANCE NEEDLE PLACEMENT RS&I               |
| 77046          | MRI BREAST WITHOUT CONTRAST MATERIAL UNILATERAL  |
| 77047          | MRI BREAST WITHOUT CONTRAST MATERIAL BILATERAL   |
| 77048          | MRI BREAST W/OUT&WITH CONTRAST W/CAD UNILATERAL  |

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| Procedure Code | Procedure Code Description                       |
|----------------|--------------------------------------------------|
| 77049          | MRI BREAST WITHOUT&WITH CONTRAST W/CAD BILATERAL |
| 77084          | MRI BONE MARROW BLOOD SUPPLY                     |
| 78429          | MYOCDR IMG PET METAB EVAL SINGLE STUDY CNCRNT CT |
| 78430          | MYOCDR IMG PET PRFUJ 1STD REST/STRESS CNCRNT CT  |
| 78431          | MYOCDR IMG PET PRFUJ MLT STD RST&STRS CNCRNT CT  |
| 78432          | MYOCDR IMG PET PRFUJ W/METAB DUAL RADIOTRACER    |
| 78433          | MYOCDR IMG PET PRFUJ W/METAB 2RTRACER CNCRNT CT  |
| 78451          | MYOCARDIAL SPECT SINGLE STUDY AT REST OR STRESS  |
| 78452          | MYOCARDIAL SPECT MULTIPLE STUDIES                |
| 78453          | MYOCARDIAL PERFUSION PLANAR 1 STUDY REST/STRESS  |
| 78454          | MYOCARDIAL PERFUSION PLANAR MULTIPLE STUDIES     |
| 78459          | MYOCDR IMG PET METAB EVAL SINGLE STUDY           |
| 78466          | MYOCARDIAL IMAGING INFARCT AVID PLANAR QUAL/QUAN |
| 78468          | MYOCDR IMG INFARCT AVID PLNR EJEC FXJ 1ST PS TQ  |
| 78469          | MYOCDR INFARCT AVID PLNR TOMOG SPECT W/WO QUANTJ |
| 78472          | CARD BLOOD POOL GATED PLANAR 1 STUDY REST/STRESS |
| 78473          | CARD BL POOL GATED MLT STDY WAL MOTN EJECT FRACT |
| 78481          | CARD BL POOL PLANAR 1 STDY WAL MOTN EJECT FRACT  |
| 78483          | CARD BL POOL PLNR MLT STDY WAL MOTN EJECT FRACT  |
| 78491          | MYOCDR IMG PET PRFUJ SINGLE STUDY REST/STRESS    |
| 78492          | MYOCDR IMG PET PRFUJ MULTIPLE STUDY REST&STRESS  |
| 78494          | CARD BL POOL GATED SPECT REST WAL MOTN EJCT FRCT |
| 78608          | BRAIN IMAGING PET METABOLIC EVALUATION           |
| 78609          | BRAIN IMAGING PET PERFUSION EVALUATION           |
| 78811          | PET IMAGING LIMITED AREA CHEST HEAD/NECK         |
| 78812          | PET IMAGING SKULL BASE TO MID-THIGH              |
| 78813          | PET IMAGING WHOLE BODY                           |
| 78814          | PET IMAGING CT FOR ATTENUATION LIMITED AREA      |
| 78815          | PET IMAGING CT ATTENUATION SKULL BASE MID-THIGH  |
| 78816          | PET IMAGING FOR CT ATTENUATION WHOLE BODY        |
| 81162          | BRCA1 BRCA2 GENE ALYS FULL SEQ FULL DUP/DEL ALYS |
| 81163          | BRCA1 BRCA2 GENE ANALYSIS FULL SEQUENCE ANALYSIS |
| 81164          | BRCA1 BRCA2 GENE ANALYSIS FULL DUP/DEL ANALYSIS  |
| 81277          | CYTOGENOMIC NEOPLASIA MICROARRAY ANALYSIS        |

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| Procedure Code | Procedure Code Description                       |
|----------------|--------------------------------------------------|
| 81412          | ASHKENAZI JEWISH ASSOC DSRDRS GEN SEQ ANAL 9 GEN |
| 81471          | X-LINKED INTELLECTUAL DBLT DUP/DEL GENE ANALYS   |
| 81518          | ONCOLOGY BREAST MRNA GENE EXPRESSION 11 GENES    |
| 81519          | ONCOLOGY BREAST MRNA GENE EXPRESSION 21 GENES    |
| 81520          | ONC BREAST MRNA GENE XPRSN PRFL HYBRD 58 GENES   |
| 81521          | ONC BREAST MRNA MICRORA GENE XPRSN PRFL 70 GENES |
| 81522          | ONCOLOGY BREAST MRNA GENE XPRSN PRFL 12 GENES    |
| 81523          | ONC BRST MRNA NEXT GNRJ SEQ GEN XPRSN 70 CNT&31  |
| 81541          | ONC PRST8 MRNA GENE XPRSN PRFL RT-PCR 46 GENES   |
| 81542          | ONC PRST8 MRNA MICRORA GENE XPRSN PRFL 22 GENES  |
| 81546          | ONC THYR MRNA 10,196 GENES FINE NDL ASPIRATE ALG |
| 81552          | ONC UVEAL MLNMA MRNA GENE XPRSN PRFL 15 GENES    |
| 81558          | TRNSPLJ REJ KDN MRNA GENE XPRSN PRFLG QPCR 139   |
| 81595          | CARDIOLOGY HRT TRNSPL MRNA GENE EXPRESS 20 GENES |
| 93350          | ECHO TTHRC R-T 2D W/WO M-MODE COMPLETE REST&ST   |
| 93351          | ECHO TTHRC R-T 2D W/WO M-MODE REST&STRS CONT ECG |
| 93452          | L HRT CATH W/NJX L VENTRICULOGRAPHY IMG S&I      |
| 93453          | R & L HRT CATH W/NJX L VENTRICULOG IMG S&I       |
| 93454          | CATH PLACEMENT & NJX CORONARY ART ANGIO IMG S&I  |
| 93455          | CATH PLMT & NJX CORONARY ART/GRFT ANGIO IMG S&I  |
| 93456          | CATH PLMT R HRT & ARTS W/NJX & ANGIO IMG S&I     |
| 93457          | CATH PLMT R HRT/ARTS/GRFTS W/NJX& ANGIO IMG S&I  |
| 93458          | CATH PLMT L HRT & ARTS W/NJX & ANGIO IMG S&I     |
| 93459          | CATH PLMT L HRT/ARTS/GRFTS WNJX & ANGIO IMG S&I  |
| 93460          | R & L HRT CATH WINJX HRT ART& L VENTR IMG        |
| 93461          | R& L HRT CATH W/INJEC HRT ART/GRFT& L VENT I     |
| 93653          | COMPRE EP EVAL ABLTJ 3D MAPG TX SVT              |
| 93656          | COMPRE EP EVAL ABLTJ ATR FIB PULM VEIN ISOLATION |
| 93998          | UNLISTED NONINVASIVE VASCULAR DIAGNOSTIC STUDY   |
| 94799          | UNLISTED PULMONARY SERVICE/PROCEDURE             |
| 95805          | MLT SLEEP LATENCY/MAINT OF WAKEFULNESS TSTG      |
| 95807          | SLEEP STD REC VNTJ RESPIR ECG/HRT RATE&O2 ATTN   |
| 95808          | POLYSOM ANY AGE SLEEP STAGE 1-3 ADDL PARAM ATTND |
| 95810          | POLYSOM 6/>YRS SLEEP 4/> ADDL PARAM ATTND        |

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| Procedure Code | Procedure Code Description                        |
|----------------|---------------------------------------------------|
| 95811          | POLYSOM 6/>YRS SLEEP W/CPAP 4/> ADDL PARAM ATTND  |
| 96130          | PSYCHOLOGICAL TST EVAL SVC PHYS/QHP FIRST HOUR    |
| 96131          | PSYCHOLOGICAL TST EVAL SVC PHYS/QHP EA ADDL HOUR  |
| 96136          | PSYL/NRPSYCL TST PHYS/QHP 2+ TST 1ST 30 MIN       |
| 96137          | PSYCL/NRPSYCL TST PHYS/QHP 2+ TST EA ADDL 30 MIN  |
| 96138          | PSYCL/NRPSYCL TST TECH 2+ TST 1ST 30 MIN          |
| 96139          | PSYCL/NRPSYCL TST TECH 2+ TST EA ADDL 30 MIN      |
| 96549          | UNLISTED CHEMOTHERAPY PROCEDURE                   |
| A4226          | SPL MAINT INS IP DR ADJ USING TX CONT G SENS WK   |
| A4238          | SPL ALW ADJ NI CGM 1 MONTH SUPPLY = 1 UOS         |
| A4239          | SPLY ALW NONADJUNC NONIMPL CGM 1 MO SPLY= 1 UOS   |
| A4600          | SLEEVE INTERMITTENT LIMB COMPRS DEVC REPL EA      |
| A4913          | MISCELLANEOUS DIALYSIS SUPPLIES NOS               |
| A9274          | EXTERNAL AMB INSULIN DEL SYSTEM DISPOSABLE EA     |
| A9277          | TRANSMITTER; EXT USE WITH NONDME INTRSTL CGM      |
| A9278          | RECEIVER; EXT USE NONDME INTRSTL SYSTEM CGM       |
| A9279          | MONITOR FEATURE/DEVC STAND-ALONE/INTEGRATED NOC   |
| A9607          | LUTETIUM LU 177 VIPIVOTIDE TETRAXETAN THER 1 MCI  |
| A9999          | MISCELLANEOUS DME SUPPLY OR ACCESSORY NOS         |
| E0147          | WALKER HEAVY DUTY MX BRAKE SYS VARIABLE WHL RSIST |
| E0193          | POWERED AIR FLOTATION BED                         |
| E0265          | HOSP BED TOT ELEC W/ANY TYPE SIDE RAIL W/MATTRSS  |
| E0266          | HOS BED TOT ELEC ANY TYPE SIDE RAIL W/O MATTRSS   |
| E0296          | HOSPITAL BED TOTAL ELEC W/O SIDE RAILS W/MATTRSS  |
| E0297          | HOSP BED TOTAL ELEC W/O SIDE RAILS W/O MATTRSS    |
| E0300          | PED CRIB HOS GRADE FULLY ENC W/WO TOP ENC         |
| E0302          | HOS BED XTRA HEVY DUTY WT CAP>600 PDS W/O MTTRSS  |
| E0303          | HOS BED HEVY DUTY W/WT CAP >350 PDS</=TO 600 PDS  |
| E0304          | HOS BED EXTRA HEAVY DUTY WT CAP>600 PDS MATTRSS   |
| E0316          | SFTY ENCLOS FRME/CANOPY USE W/HOSP BED ANY TYPE   |
| E0467          | HOME VENTILATOR MULTI-FUNCTION RESPIRATORY DEVC   |
| E0565          | COMPRS AIR PWR EQP NOT SLF-CONTAIND/CYL DRIVN     |
| E0574          | ULTRASONIC/ELEC AROSL GEN W/SMALL VOLUME NEB      |
| E0618          | APNEA MONITOR WITHOUT RECORDING FEATURE           |

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| Procedure Code | Procedure Code Description                        |
|----------------|---------------------------------------------------|
| E0619          | APNEA MONITOR WITH RECORDING FEATURE              |
| E0636          | MX PSTN PT SUPP SYS INTGR LIFT PT ACSSIBLE CNTRL  |
| E0639          | PT LIFT MOVEABLE ROOM-ROOM W/DISASSMBL&REASSMBL   |
| E0640          | PATIENT LIFT FIX SYS INCLUDES ALL CMPNTS/ACCESS   |
| E0641          | STANDING FRAME/TABLE SYS MULTI-POSITION ANY SZ    |
| E0642          | STANDING FRAME/TABLE SYS MOBILE DYNAMIC ANY SZ    |
| E0652          | PNEUMAT COMPRS SEG HOM MDL W/CALBRD GRADNT PRSS   |
| E0656          | SEG PNEUMAT APPLIANCE USE W/PNEUMAT COMPRS TRUNK  |
| E0657          | SEG PNEUMAT APPLIANCE USE W/PNEUMAT COMPRS CHEST  |
| E0676          | INTERMITTENT LIMB COMPRESSION DEVICE NOS          |
| E0720          | TENS DEVICE TWO LEAD LOCALIZED STIMULATION        |
| E0730          | TENS DEVICE 4/MORE LEADS MULTI NERVE STIMULATION  |
| E0731          | FORM-FITTING CONDUCTIVE GARMENT DELIV TENS/NMES   |
| E0764          | FUNC NEUROMUSC STIM MUSC AMBUL CMPT CNTRL SC INJ  |
| E0766          | ELEC STIM DVC U CANCER TX INCL ALL ACC ANY TYPE   |
| E0782          | INFUSION PUMP IMPLANTABLE NON-PROGRAMMABLE        |
| E0783          | INFUSION PUMP SYSTEM IMPLANTABLE PROGRAMMABLE     |
| E0784          | EXTERNAL AMBULATORY INFUSION PUMP INSULIN         |
| E0785          | IMPLANTABLE INTRASPINAL CATHETER USED W/PUMP-REPL |
| E0786          | IMPLANTABLE PROGRAMMABLE INFUSION PUMP REPL       |
| E0787          | EXTERNAL AMB INFUS PUMP INSULIN DOS RATE ADJ      |
| E0984          | MNL WC ACSS PWR AO CVT MNL WC MTR WC TILLR CNTRL  |
| E1009          | WC ACCSS ADD PWR SEAT MECH LINKD LEG ELEV SYS EA  |
| E1010          | WC ACCSS ADD PWR SEAT SYS PWR LEG ELEV SYS PAIR   |
| E1011          | MOD PEDIATRIC SIZE WC WIDTH ADJUSTMENT PACKAGE    |
| E1012          | WC ACCSS PWR SEAT SYS CNTR MNT PWR ELEV LEG EA    |
| E1015          | SHOCK ABSORBER FOR MANUAL WHEELCHAIR EACH         |
| E1016          | SHOCK ABSORBER FOR POWER WHEELCHAIR EACH          |
| E1017          | HEVY DUTY SHOCK ABSORBR HEVY/XTRA HEVY MNL WC EA  |
| E1018          | HEVY DUTY SHOCK ABSORBR HEVY/XTRA HEVY PWR WC EA  |
| E1035          | MULTI-PSTN PT TRNSF SYS W/SEAT PT WT <= 300 LBS   |
| E1036          | MULTI-PSTN PT TRNSF SYS EXTRA WIDE PT >300 LBS    |
| E1699          | DIALYSIS EQUIPMENT NOT OTHERWISE SPECIFIED        |

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| Procedure Code | Procedure Code Description                       |
|----------------|--------------------------------------------------|
| E1800          | DYN ADJUSTBL ELB EXT & FLX DEVC SFT INTRFCE MATL |
| E1810          | DYN ADJUSTBL KNEE EXT & FLX DEVC INTERFCE MATL   |
| E1812          | DYN KNEE EXT/FLEX DEVC W/ACTV RESISTANCE CONTROL |
| E1815          | DYN ADJ ANKLE EXT & FLEX DEVC SOFT INTF MATL     |
| E1830          | DYN ADJUSTBL TOE EXT & FLX DEVC SFT INTRFCE MATL |
| E2102          | ADJUNCTIVE NONIMPLANTED CGM/RECEIVER             |
| E2103          | NONADJUNCTIVE NONIMPLANTED CGM/RECEIVER          |
| E2295          | MNL WC ACCESS PED SIZE WC DYNAMIC SEATING FRAME  |
| E2502          | SPCH GEN DEVC DIGTIZD>8 MINS <= 20 MINS REC TIME |
| E2504          | SPCH GEN DEVC DIGTIZD>20 MINS<=40 MINS REC TIME  |
| E2506          | SPEECH GEN DEVICE DIGITIZED >40 MINS REC TIME    |
| E2508          | SPCH GEN DEVC SYNTHSIZD REQ MESS SPELL & CNTCT   |
| E2511          | SPEECH GEN SOFTWARE PROG PC/PERS DIGITAL ASSIST  |
| E2512          | ACCESS SPEECH GENERATING DEVICE MOUNTING SYSTEM  |
| E2599          | ACCESSORY FOR SPEECH GENERATING DEVICE NOC       |
| E8000          | GAIT TRAINER PED SZ POST SUPP W/ALL ACSS&CMPNTS  |
| E8001          | GAIT TRAINER PED SZ UPRT SUPP W/ALL ACSS&CMPNTS  |
| E8002          | GAIT TRAINER PED SZ ANT SUPP W/ALL ACSS&CMPNTS   |
| G0235          | PET IMAGING ANY SITE NOT OTHERWISE SPECIFIED     |
| G0252          | PET IMAG INIT DX BREST CA&/SURG PLAN NOT COV MCR |
| G0260          | INJ PROC SI JNT;ANES STEROID&/TX AGT&ARTHROGRPH  |
| G0293          | NONCOVR SURG CONSC SEDAT ANES-MCR QUAL TRIAL-DAY |
| G0294          | NONCOVR PROC NO ANES/LOC ANES-MCR QUAL TRIAL-DAY |
| G0429          | DERM FILLER INJ TX FACIAL LIPODYSTROPHY SYNDROME |
| K0900          | CUSTOMIZED DME OTHER THAN WHEELCHAIR             |
| L0220          | THORACIC RIB BELT CUSTOM FABRICATED              |
| L1845          | KNEE ORTHOSIS DOUBLE UPRIGHT THIGH & CALF PREFAB |
| L2330          | ADD LOW EXT LACER MOLD PT MDL CSTM ORTHOSIS ONLY |
| L5010          | PARTIAL FT MOLDED SOCKET ANK HEIGHT W/TOE FILLER |
| L5050          | ANKLE SYMES MOLDED SOCKET SACH FOOT              |
| L5060          | ANK SYMES METL FRME MOLD LEATHR SOCKT ARTIC ANK  |
| L5100          | BELOW KNEE MOLDED SOCKET SHIN SACH FOOT          |
| L5105          | BELOW KNEE PLSTC SOCKT JNT&THIGH LACER SACH FOOT |

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| Procedure Code | Procedure Code Description                       |
|----------------|--------------------------------------------------|
| L5150          | KNEE DISRTC MOLD SOCKT EXT KNEE JNT SHIN SACH FT |
| L5160          | KNEE DISARTIC MOLD SOCKT BENT KNEE EXT KNEE JNT  |
| L5200          | ABOVE KNEE MOLD SOCKT 1 AXIS CONSTANT FRICTION   |
| L5210          | ABOVE KNEE SHRT PROSTH NO KNEE JNT NO ANK JNT EA |
| L5230          | ABOVE KNEE PROXIMAL FEM FOCAL DEFIC SACH FOOT    |
| L5250          | HIP DISARTIC CANADIAN TYPE; MOLD SOCKT HIP JNT   |
| L5270          | HIP DISRTC TILT TABLE; MOLD SCKT LOCK HIP JNT    |
| L5280          | HEMIPELVECT CANADIAN TYPE; MOLD SOCKT HIP JNT    |
| L5301          | BELOW KNEE MOLD SOCKET SHIN SACH FT ENDOSKEL SYS |
| L5321          | ABOVE KNEE OPEN END SACH FT ENDO SYS 1 AXIS KNEE |
| L5530          | PREP BK PTB SCKT NON-ALIGN THERMOPLSTC/=MOLD MDL |
| L5535          | PREP BELOW KNEE PTB NON-ALIGN PRFAB ADJ OPEN END |
| L5540          | PREP BK PTB SCKT NON-ALIGN LAMNATD SCKT MOLD MDL |
| L5585          | PREP AK-DISARTC NON-ALIGN PRFAB ADJ OPN END SCKT |
| L5590          | PREP AK-DISARTIC NON-ALIGN LAMINATED SOCKET MOLD |
| L5610          | ADD LW EXTRM ENDO SYS ABVE KNEE HYDRACADENCE SYS |
| L5611          | ADD LW EXTRM ENDO AK-DISRTC 4-BAR LINK W/FRICT   |
| L5613          | ADD LOW EXTRM ENDO AK-DISARTIC 4-BAR W/HYDRAULIC |
| L5614          | ADD LOW EXT EXOSKEL SYS AK-DISARTC 4-BAR PNEUMAT |
| L5616          | ADD LOW EXTRM ENDO AK UNIVERSAL MXPLX SYS FRICT  |
| L5639          | ADDITION LOWER EXTREMITY BELOW KNEE WOOD SOCKET  |
| L5643          | ADD LW EXT HIP DISARTIC FLX INNR SOCKT EXT FRAME |
| L5649          | ADD LW EXT ISCHIAL CONTAINMENT/NARROW M-L SOCKET |
| L5651          | ADD LW EXT ABVE KNEE FLXIBLE INNR SOCKT EXT FRME |
| L5657          | ADD LW EXT PROS MAN/AUTO LIMB VOL MGMT ANY MTRLs |
| L5673          | ADD LWR EXT BK/AK CUSTOM FAB FOR USE W/LKG MECH  |
| L5679          | ADD LWR EXT BK/AK CUST FAB NOT FOR USE LKG MECH  |
| L5681          | ADD LW EXT BK/AK CST INS CNG/ATYP TRAUM AMP INIT |
| L5683          | ADD LW EXTR BK/AK CST FAB NO CNGN/TRAUM AMP INIT |
| L5703          | ANKLE SYMES MOLD PT MODEL SACH FOOT REPL ONLY    |
| L5704          | CUSTOM SHAPED PROTECTIVE COVER BELOW KNEE BK     |
| L5705          | CUSTOM SHAPED PROTECTIVE COVER ABOVE KNEE AK     |
| L5706          | CUSTOM SHAPED PROTECTIVE COVER KNEE DISARTIC     |
| L5707          | CUSTOM SHAPED PROTECTIVE COVER HIP DISARTIC      |

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| Procedure Code | Procedure Code Description                       |
|----------------|--------------------------------------------------|
| L5722          | ADD EXOSKEL KNEE-SHIN PNEUMAT SWING FRICT CNTRL  |
| L5724          | ADD EXOSKEL KNEE-SHIN FLUID SWING PHASE CNTRL    |
| L5726          | ADD EXOSKEL KNEE-SHIN EXT JOINT FL SWING CNTRL   |
| L5728          | ADD EXOSKEL KNEE-SHIN FLUID SWING&STANCE CNTRL   |
| L5780          | ADD EXOSKL KNEE-SHIN PNEUMAT/HYDRA PNEUMAT CNTRL |
| L5795          | ADD EXOSKEL SYSTEM HIP DISARTIC ULTRA-LGHT MATL  |
| L5814          | ADD ENDOSKEL KNEE-SHIN HYDRAULIC SWING MECH LOCK |
| L5818          | ADD ENDOSKEL KNEE-SHIN FRICT SWING&STANCE CNTRL  |
| L5822          | ADD ENDOSKEL KNEE-SHIN PNEUMAT SWING FRICT CNTRL |
| L5824          | ADD ENDOSKEL KNEE-SHIN FLUID SWING PHASE CNTRL   |
| L5826          | ADD ENDO KNEE-SHIN HYDRAUL SWNG MIN HI ACTV FRME |
| L5828          | ADD ENDO KNEE-SHIN FL SWING&STANCE PHASE CNTRL   |
| L5830          | ADD ENDOSKEL KNEE-SHIN PNEUMAT/SWING PHASE CNTRL |
| L5840          | ADD ENDO KNEE-SHIN 4-BAR LINK/MX-AXIAL PNEUMAT   |
| L5845          | ADD ENDOSKEL KNEE-SHIN STANCE FLX FEATUR ADJ     |
| L5848          | ADD ENDOSKEL KNEE-SHIN SYS FLUID STANCE EXTENSIN |
| L5856          | ADD LOW EXT PROS KNEE-SHIN SYS SWING&STANCE PHSE |
| L5857          | ADD LOW EXT PROS KNEE-SHIN SYS SWING PHASE ONLY  |
| L5858          | ADD LW EXT PROS KNEE SHIN SYS STANCE PHASE ONLY  |
| L5859          | ADD LOW EXT PROS KN-SHIN PROG FLX/EXT ANY MOTOR  |
| L5930          | ADD ENDOSKEL SYSTEM HIGH ACTV KNEE CONTROL FRAME |
| L5960          | ADD ENDOSKEL SYSTEM HIP DISARTIC ULTRA-LGHT MATL |
| L5961          | ADD ENDO SYS POLYCNTRC HIP JOINT ROTATION CNTRL  |
| L5966          | ADD ENDO HIP DISRTC FLXIBL PROTVE OUTR SURF COVR |
| L5968          | ADD LW LIMB PROSTH MX-AXIAL ANK W/SWING PHASE    |
| L5973          | ENDOSKEL ANK FOOT SYS MICRPROCSS CONTROL PWR SRC |
| L5976          | ALL LOWER EXTREM PROSTHESES ENERGY STORING FOOT  |
| L5979          | ALL LW EXTRM PRSTH MX-AXL ANK DYN RSPN FT 1 PECE |
| L5980          | ALL LOWER EXTREMITY PROSTHESES FLEX-FOOT SYSTEM  |
| L5981          | ALL LOWER EXTREM PROSTH FLEX-WALK SYSTEM/EQUAL   |
| L5987          | ALL LW XTRM PRSTH SHNK FT SYS W/VRTCL LOAD PYLN  |
| L5988          | ADD LW LIMB PROSTH VERTCL SHOCK RDUC PYLN FEATUR |
| L6000          | PARTIAL HAND THUMB REMAINING                     |
| L6010          | PARTIAL HAND LITTLE & OR RING FINGER REMAINING   |

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| Procedure Code | Procedure Code Description                         |
|----------------|----------------------------------------------------|
| L6020          | PARTIAL HAND NO FINGER REMAINING                   |
| L6026          | TRANSCARPAL/MC/PART HAND DISARTICULATION PROS      |
| L6034          | PAR HND FNGR&THMB PROS NOT INCL INSR DESCR L6692   |
| L6035          | SINGLE PROSTHETIC DIGIT MECH INITIAL ISSUE/REPLC   |
| L6036          | PROSTHETIC THUMB MECH INITIAL ISSUE/REPLACEMENT    |
| L6038          | ADD SINGLE PROS DIGIT/THUMB MECH ATT MULTIAXIAL    |
| L6039          | PASSIVE PROSTHETIC DIGIT/THUMB PROS DIGIT/THUMB    |
| L6050          | WRST DISARTIC MOLD SOCKET FLEX ELB HNG TRICP PAD   |
| L6055          | WRST DISARTIC MOLD SOCKT W/XPNDABLE INTERFCE       |
| L6120          | BELW ELB MOLD DBL WALL SCKT STEP-UP HNG 1/2 CUFF   |
| L6130          | BELW ELB STUMP ACTVATD LOCK HINGE HALF CUFF        |
| L6200          | ELB DISARTIC MOLD SOCKT OUTSIDE LOCK HINGE FORARM  |
| L6205          | ELB DISARTIC MOLD SCKT W/XPND INTRFCE LOCK FORARM  |
| L6310          | SHOULDER DISARTIC PASSIVE REST COMPLETE PROSTH     |
| L6320          | SHOULDER DISARTIC PASSIVE REST SHOULDER CAP ONLY   |
| L6350          | INTERSCAP THOR HUM SECT INTRL LOCK ELB FORARM      |
| L6360          | INTERSCAPULAR THOR PASSIVE REST CMPL PROSTH        |
| L6370          | INTERSCAPULAR THOR PASSIVE REST SHLDR CAP ONLY     |
| L6400          | BE MOLD SCKT ENDOSKEL SYS W/SFT PROSTH TISS SHAP   |
| L6450          | ELB DISARTIC MOLD SCKT ENDOSKEL W/SFT PROSTH TISS  |
| L6570          | INTRSCAP THOR MOLD SCKT ENDOSKEL W/SFT PROS TISS   |
| L6580          | PREP WRST DISARTIC/BELW ELB 1 WALL PLSTC SCKT MOLD |
| L6582          | PREP WRST DISARTIC/BELW ELB 1 WALL SCKT DIR FORMED |
| L6584          | PREP ELB DISARTIC/ABVE ELB 1 WALL PLSTC SOCKT MOLD |
| L6586          | PREP ELB DISARTIC/ABVE ELB 1 WALL SOCKT DIR FORMED |
| L6588          | PREP SHLDR DISARTIC THOR 1 WALL PLSTC SCKT MOLD    |
| L6590          | PREP SHLDR DISARTIC THOR 1 WALL SOCKET DIR FORM    |
| L6611          | ADD UPPER EXT PROS EXTERNAL PWR ADDITIONAL SWTCH   |
| L6615          | UPPER EXTREM ADD DISCONNECT LOCKING WRST UNIT      |
| L6616          | UP EXTREM ADD DISCNCT INSERT LOCK WRST U EA        |
| L6620          | UPPER EXT ADD FLEX/EXT WRIST UNIT W/VO FRICTION    |
| L6621          | UP EXTREM PROS ADD FLEXION/EXTENSION WRIST         |
| L6624          | UPPER EXTREMITY ADD FLX/EXT ROTATION WRIST UNIT    |
| L6629          | UP EXTRM ADD QUICK DISCNCT LAMINATION COLLR        |

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| Procedure Code | Procedure Code Description                       |
|----------------|--------------------------------------------------|
| L6638          | UP EXT ADD PROS ELEC LOCK ONLY W/MNL PWR ELB     |
| L6648          | UP EXTREM ADD SHLDR LOCK MECH EXT PWR ACTUATOR   |
| L6693          | UPPER EXTREM ADD LOCK ELB FORARM COUNTERBALANCE  |
| L6696          | ADD UP EXT PROS ELB CSTM CNGN/TRAUMAT AMP INIT   |
| L6697          | ADD UP EXT PROS ELB CSTM NOT CNGN/TRAUM AMP INIT |
| L6707          | TERMINAL DEVICE HOOK MECH VOLUNTARY CLOSING      |
| L6880          | ELEC HAND SWTCH/MYOELEC CNTRL INDEP ARTC DIG MTR |
| L6884          | REPL SOCKET ABOVE ELBOW/ELBOW DISART MOLD TO PT  |
| L6885          | REPL SOCKET SD/INTERSCAPULAR THOR MOLD PT MODEL  |
| L6895          | ADD UP EXT PROSTH GLOV TERM DEVC MATL CSTM FAB   |
| L6900          | HAND REST PART HAND W/GLOVE THUMB/1 FNGR REMAIN  |
| L6905          | HAND REST PART HAND W/GLOVE MX FNGR REMAIN       |
| L6910          | HAND REST PART HAND W/GLOVE NO FNGR REMAIN       |
| L6920          | WRST DISARTIC OTTO BOCK/=SWTCH CNTRL TERM DEVICE |
| L6925          | WRST DISARTIC OTTO BOCK/=MYOELEC CNTRL TERM DEVC |
| L6930          | BELOW ELBOW OTTO BOCK/=SWITCH CNTRL TERM DEVICE  |
| L6935          | BELOW ELBOW OTTO BOCK/=MYOELEC CNTRL TERM DEVICE |
| L6940          | ELBOW DISARTIC OTTO BOCK/=SWITCH CNTRL TERM DEVC |
| L6945          | ELB DISARTIC OTTO BOCK/=MYOELEC CNTRL TERM DEVC  |
| L6950          | ABOVE ELBOW OTTO BOCK/=SWITCH CNTRL TERM DEVC    |
| L6955          | ABOVE ELBOW OTTO BOCK/=MYOELEC CNTRL TERM DEVC   |
| L6960          | SHLDR DISARTIC OTTO BOCK/=SWTCH CNTRL TERM DEVC  |
| L6965          | SHOULDR DISARTIC OTTO BOCK/=MYOELEC CNTRL TERM   |
| L6970          | INTERSCAP-THOR OTTO BOCK/=SWTCH CNTRL TERM DEVC  |
| L6975          | INTERSCAP-THOR OTTO BOCK/=MYOELEC CNTRL TERM DVC |
| L7008          | ELECTRIC HAND SWITCH/MYOELECTRIC CNTRL PEDIATRIC |
| L7009          | ELECTRIC HOOK SWITCH/MYOELECTRIC CONTROL ADULT   |
| L7040          | PREHENSILE ACTUATOR SWITCH CONTROLLED            |
| L7170          | ELECTRONIC ELBOW HOSMER/EQUAL SWITCH CONTROLLED  |
| L7259          | ELECTRONIC WRIST ROTATOR ANY TYPE                |
| L8039          | BREAST PROSTHESIS NOT OTHERWISE SPECIFIED        |
| L8683          | RF TRNSMT USE W/IMPLANTABLE NEUROSTIM RF RECV    |
| M0300          | IV CHELATION THERAPY                             |
| S3870          | CGH MICROARRAY TEST DD ASD &/OR INTELL DISABILTY |

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| Procedure Code | Procedure Code Description                  |
|----------------|---------------------------------------------|
| S8037          | MAGNETIC RESONANCE CHOLANGIOPANCREATOGRAPHY |
| S8092          | ELECTRON BEAM COMPUTED TOMOGRAPHY           |
| S9355          | HOME INFUSION THERAPY CHELATION; PER DIEM   |

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| Procedure Code | Procedure Code Description                       |
|----------------|--------------------------------------------------|
| 77014          | CT GUIDANCE RADIATION THERAPY FLDS PLACEMENT     |
| 77331          | SPEC DOSIM ONLY PRESCRIBED TREATING PHYS         |
| 77370          | SPEC MEDICAL RADJ PHYSICS CONSLTJ                |
| 77371          | RADIATION DELIVERY STEREOTACTIC CRANIAL COBALT   |
| 77372          | RADIATION DELIVERY STEREOTACTIC CRANIAL LINEAR   |
| 77373          | STEREOTACTIC BODY RADIATION TREATMENT DELIVERY   |
| 77385          | INTENSITY MODULATED RADIATION TX DLVR SIMPLE     |
| 77386          | INTENSITY MODULATED RADIATION TX DLVR COMPLEX    |
| 77387          | GUIDANCE FOR LOCLZJ TARGET VOL FOR RADJ TX DLVR  |
| 77399          | UNLISTD PX MED RADJ PHYSIC DOSIM&TX DEV&SPEC SVC |
| 77401          | RADIATION TX DELIVERY SUPERFICIAL&/ORTHO VOLTAGE |
| 77402          | RADIATION TREATMENT DELIVERY LEVEL 1             |
| 77407          | RADIATION TREATMENT DELIVERY LEVEL 2             |
| 77412          | RADIATION TREATMENT DELIVERY LEVEL 3             |
| 77470          | SPECIAL TREATMENT PROCEDURE                      |
| 77520          | PROTON TX DELIVERY SIMPLE W/O COMPENSATION       |
| 77522          | PROTON TX DELIVERY SIMPLE W/COMPENSATION         |
| 77523          | PROTON TX DELIVERY INTERMEDIATE                  |
| 77525          | PROTON TX DELIVERY COMPLEX                       |
| 79445          | RP THERAPY INTRA-ARTERIAL PARTICULATE ADMN       |
| G0339          | IMAGE GUID ROBOTIC ACCEL BASE SRS CMPL TX 1 SESS |
| G0340          | IMAGE GUID ROBOTIC ACCL SRS FRAC TX LES 2-5 SESS |
| G6001          | ULTRASONIC GUID PLACEMENT RADIATION TX FIELDS    |

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| Procedure Code | Procedure Code Description                       |
|----------------|--------------------------------------------------|
| G6002          | STEREOSCOPIC X-RAY GUID LOCALIZ TRG VOL DEL RT   |
| G6003          | RAD TX DEL 2 TX AREA PORT/PL OPP PORTS:TO 5 MEV  |
| G6004          | RAD TX DEL 1 TX AREA PORT/PL OPP PORTS: 6-10 MEV |
| G6005          | RAD TX DEL 1 TX AREA PORT/PL OPP PORTS: 11-19 ME |
| G6006          | RAD TX DEL 1 TX AREA PORT/PL OPP PORTS: 20 ME/>  |
| G6007          | RT DEL 2 SEP AR 3/> PT 1 TX AR MX BLKS:TO 5 MEV  |
| G6008          | RT DEL 2 SEP AR 3/> PT 1 TX AR MX BLKS:6-10 MEV  |
| G6009          | RT DEL 2 SEP AR 3/> PT 1 TX AR MX BLKS:11-19 MEV |
| G6010          | RT DEL 2 SEP AR 3/> PT 1 TX AR MX BLKS:20 MEV/>  |
| G6011          | RAD TX DEL 3/> SEP TX AR CSTM BLOCKING; TO 5 MEV |
| G6012          | RAD TX DEL 3/> SEP TX AR CSTM BLOCKING; 6-10 MEV |
| G6013          | RAD TX DEL 3/> SEP TX AR CSTM BLOCKING;11-19 MEV |
| G6014          | RAD TX DEL 3/> SEP TX AR CSTM BLOCKING;20 MEV/>  |
| G6015          | INTENSITY MODULATED TX DEL 1/MX FLDS PER TX SESS |
| G6016          | COMP-BASED BEAM MOD TX DEL I PLND TX 3 > HR SESS |
| G6017          | INTRA-FRAC LOC & TRACKING TARGET/PT M EA FRAC TX |
| J0640          | INJECTION LEUCOVORIN CALCIUM PER 50 MG           |
| J0641          | INJECTION LEVOLEUCOVORIN NOS 0.5 MG              |
| J0642          | INJECTION LEVOLEUCOVORIN 0.5 MG                  |
| J1326          | INJECTION ZOLBETUXIMAB CLZB 2 MG                 |
| J1448          | INJECTION TRILACICLIB 1MG                        |
| J1952          | LEUPROLIDE INJECTABLE CAMCEVI, 1 MG              |
| J2468          | INJECTION PALONOSETRON HCL POSFREA 25 MCG        |
| J9000          | INJECTION DOXORUBICIN HCL 10 MG                  |
| J9003          | LEUPROLIDE INJECTABLE 1 MG                       |
| J9015          | INJECTION ALDESLEUKIN PER SINGLE USE VIAL        |
| J9017          | INJECTION ARSENIC TRIOXIDE 1 MG                  |
| J9019          | INJECTION ASPARAGINASE ERWINAZE 1000 IU          |
| J9020          | INJECTION ASPARAGINASE 10000 UNITS               |
| J9021          | INJECT ASPARAGINASE RECOMBINANT (RYLAZE) 0.1 MG  |
| J9022          | INJECTION ATEZOLIZUMAB 10 MG                     |
| J9023          | INJECTION AVELUMAB 10 MG                         |
| J9024          | INJECTION ATEZOLIZUMAB 5 MG & HYALURONIDASE TQJS |

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| Procedure Code | Procedure Code Description                        |
|----------------|---------------------------------------------------|
| J9025          | INJECTION AZACITIDINE 1 MG                        |
| J9026          | INJECTION TARLATAMAB-DLLE 1 MG                    |
| J9027          | INJECTION CLOFARABINE 1 MG                        |
| J9028          | INJ NOGAPENDEKIN ALFA INBAKICEPT-PMLN IVES 1 MCG  |
| J9029          | IVES INSTAL NADOFARAGN FIRADENOVIC-VNCG PER THR D |
| J9030          | BCG LIVE INTRAVESICAL INSTILLATION 1 MG           |
| J9032          | INJECTION BELINOSTAT 10 MG                        |
| J9033          | INJECTION BENDAMUSTINE HCL 1 MG                   |
| J9034          | INJECTION BENDAMUSTINE HCL BENDEKA 1 MG           |
| J9035          | INJECTION BEVACIZUMAB 10 MG                       |
| J9036          | INJECTION BENDAMUSTINE HYDROCHLORIDE 1 MG         |
| J9039          | INJECTION BLINATUMOMAB 1 MICROGRAM                |
| J9040          | INJECTION BLEOMYCIN SULFATE 15 UNITS              |
| J9041          | INJECTION BORTEZOMIB 0.1 MG                       |
| J9042          | INJECTION BRENTUXIMAB VEDOTIN 1 MG                |
| J9043          | INJECTION CABAZITAXEL 1 MG                        |
| J9045          | INJECTION CARBOPLATIN 50 MG                       |
| J9046          | INJ BORTEZOMIB NOT THER EQUIV TO J9041 0.1 MG     |
| J9047          | INJECTION CARFILZOMIB 1 MG                        |
| J9048          | INJ BTZ FRESENIUS KABI NOT TX EQV TO J9041 0.1MG  |
| J9049          | INJ BORTEZOMB HOSPIRA NOT TX EQV TO J9041 0.1 MG  |
| J9050          | INJECTION CARMUSTINE 100 MG                       |
| J9051          | INJECTION BORTEZOMIB NOT TE TO J9041 0.1 MG       |
| J9052          | INJECTION CARMUSTINE NOT THR EQV TO J9050 100 MG  |
| J9053          | INJECTION BELANTAMAB MAFODOTIN-BLMF 0.1 MG        |
| J9054          | INJECTION BORTEZOMIB BORUZU 0.1 MG                |
| J9055          | INJECTION CETUXIMAB 10 MG                         |
| J9056          | INJECTION BENDAMUSTINE HCL VIVIMUSTA 1 MG         |
| J9057          | INJECTION COPANLISIB 1 MG                         |
| J9060          | INJECTION CISPLATIN POWDER OR SOLUTION 10 MG      |
| J9061          | INJECTION, AMIVANTAMAB-VMJW 2 MG                  |
| J9062          | INJECTION AMIVANTAMAB 5 MG & HYALURONIDASE-LPUJ   |
| J9063          | INJECTION MIRVETUXIMAB SORAVTANSINE-GYNX 1 MG     |

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| Procedure Code | Procedure Code Description                       |
|----------------|--------------------------------------------------|
| J9064          | INJECTION CABAZITAXEL NOT TE TO J9043 1 MG       |
| J9065          | INJECTION CLADRIBINE PER 1 MG                    |
| J9071          | INJECTION CYCLOPHOSPHAMIDE AUROMEDICS 5 MG       |
| J9072          | INJECTION CYCLOPHOSPHAMIDE FRINDOVYX 5 MG        |
| J9073          | INJECTION CYCLOPHOSPHAMIDE DR REDDYS 5 MG        |
| J9074          | INJECTION CYCLOPHOSPHAMIDE SANDOZ 5 MG           |
| J9075          | INJECTION CYCLOPHOSPHAMIDE NOS 5 MG              |
| J9076          | INJECTION CYCLOPHOSPHAMIDE BAXTER 5 MG           |
| J9100          | INJECTION CYTARABINE 100 MG                      |
| J9118          | INJECTION CALASPARGASE PEGOL-MKNL 10 UNITS       |
| J9119          | INJECTION CEMIPILIMAB-RWLC 1 MG                  |
| J9120          | INJECTION DACTINOMYCIN 0.5 MG                    |
| J9130          | DACARBAZINE 100 MG                               |
| J9144          | INJECTION DARATUMUMAB 10 MG & HYALURONIDASE-FIHJ |
| J9145          | INJECTION DARATUMUMAB 10 MG                      |
| J9150          | INJECTION DAUNORUBICIN 10 MG                     |
| J9151          | INJ DAUNORUBICIN CITRATE LIPOSOMAL FORM 10 MG    |
| J9153          | INJECTION LIPOSOMAL 1 MG DNR & 2.27 MG CA        |
| J9155          | INJECTION DEGARELIX 1 MG                         |
| J9161          | INJECTION DENILEUKIN DIFTITOX CXDL 1 MCG         |
| J9165          | INJECTION DIETHYLSTILBESTROL DIPHOSPHATE 250 MG  |
| J9171          | INJECTION DOCETAXEL 1 MG                         |
| J9172          | INJECTION DOCETAXEL DOCIVYX 1 MG                 |
| J9173          | INJECTION DURVALUMAB 10 MG                       |
| J9174          | INJECTION DOCETAXEL BEIZRAY 1MG                  |
| J9175          | INJECTION ELLIOTTS B SOLUTION 1 ML               |
| J9176          | INJECTION ELOTUZUMAB 1 MG                        |
| J9177          | INJECTION ENFORTUMAB VEDOTIN-EJFV 0.25 MG        |
| J9178          | INJECTION EPIRUBICIN HCL 2 MG                    |
| J9179          | INJECTION ERIBULIN MESYLATE 0.1 MG               |
| J9181          | INJECTION ETOPOSIDE 10 MG                        |
| J9183          | GEMCITABINE INTRAVESICAL SYSTEM 225 MG           |
| J9185          | INJECTION FLUDARABINE PHOSPHATE 50 MG            |

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| Procedure Code | Procedure Code Description                       |
|----------------|--------------------------------------------------|
| J9190          | INJECTION FLUOROURACIL 500 MG                    |
| J9196          | INJ GEMCITABINE HCI NOT THR EQUIV J9201 200 MG   |
| J9198          | INJ GEMCITABINE HYDROCHLORDE INFUGEM 100 MG      |
| J9200          | INJECTION FLOXURIDINE 500 MG                     |
| J9201          | INJECTION GEMCITABINE HCL NOS 200 MG             |
| J9202          | GOSERELIN ACETATE IMPLANT PER 3.6 MG             |
| J9203          | INJECTION GEMTUZUMAB OZOGAMICIN 0.1 MG           |
| J9204          | INJECTION MOGAMULIZUMAB-KPKC 1 MG                |
| J9205          | INJECTION IRINOTECAN LIPOSOME 1 MG               |
| J9206          | INJECTION IRINOTECAN 20 MG                       |
| J9207          | INJECTION IXABEPILONE 1 MG                       |
| J9208          | INJECTION IFOSFAMIDE 1 G                         |
| J9209          | INJECTION MESNA 200 MG                           |
| J9210          | INJECTION EMAPALUMAB-LZSG 1 MG                   |
| J9211          | INJECTION IDARUBICIN HCL 5 MG                    |
| J9212          | INJECTION INTERFERON ALFACON-1 RECOMBINANT 1 MCG |
| J9213          | INJECTION INTERFERON ALFA-2A RECOMBINANT 3 M U   |
| J9214          | INJECTION INTERFERON ALFA-2B RECOMBINANT 1 M U   |
| J9215          | INJECTION INTERFERON ALFA-N3 250,000 IU          |
| J9216          | INJECTION INTERFERON GAMMA-1B 3 MILLION UNITS    |
| J9217          | LEUPROLIDE ACETATE 7.5 MG                        |
| J9218          | LEUPROLIDE ACETATE PER 1 MG                      |
| J9223          | INJECTION LURBINECTEDIN 0.1 MG                   |
| J9225          | HISTRELIN IMPLANT VANTAS 50 MG                   |
| J9226          | HISTRELIN IMPLANT SUPPRELIN LA 50 MG             |
| J9227          | INJECTION ISATUXIMAB-IRFC 10 MG                  |
| J9228          | INJECTION IPILIMUMAB 1 MG                        |
| J9229          | INJECTION INOTUZUMAB OZOGAMICIN 0.1 MG           |
| J9230          | INJECTION MECHLORETHAMINE HCL 10 MG              |
| J9232          | INJ DOCETAXEL HOSPIRA NOT THERAP EQV J9171 1 MG  |
| J9245          | INJECTION MELPHALAN HCI NOS 50 MG                |
| J9246          | INJECTION MELPHALAN EVOMELA 1 MG                 |
| J9248          | INJECTION MELPHALAN HEPZATO 1 MG                 |

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|----------------|--------------------------------------------------|
| J9249          | INJECTION MELPHALAN APOTEX 1 MG                  |
| J9260          | INJECTION METHOTREXATE SODIUM 50 MG              |
| J9261          | INJECTION NELARABINE 50 MG                       |
| J9262          | INJECTION OMACETAXINE MEPESUCCINATE 0.01 MG      |
| J9263          | INJECTION OXALIPLATIN 0.5 MG                     |
| J9264          | INJECTION PACLITAXEL PROTEINBOUND PARTICLES 1 MG |
| J9266          | INJECTION PEGASPARGASE PER SINGLE DOSE VIAL      |
| J9267          | INJECTION PACLITAXEL 1 MG                        |
| J9268          | INJECTION PENTOSTATIN 10 MG                      |
| J9269          | INJECTION TAGRAXOFUSP-ERZS 10 MCG                |
| J9270          | INJECTION PLICAMYCIN 2.5 MG                      |
| J9271          | INJECTION PEMBROLIZUMAB 1 MG                     |
| J9272          | INJECTION, DOSTARLIMAB-GXLY 10 MG                |
| J9273          | INJECTION, TISOTUMAB VEDOTIN-TFTV, 1 MG          |
| J9274          | INJECTION TEBENTAFUSP-TEBN 1 MCG                 |
| J9275          | INJECTION COSIBELIMAB IPDL 2 MG                  |
| J9276          | INJECTION ZANIDATAMAB HRII 2 MG                  |
| J9277          | INJECTION PEM 1 MG & BERAHYALURONIDASE ALFA-PMPH |
| J9278          | INJECTION CARBOPLATIN AVYXA 1 MG                 |
| J9280          | INJECTION MITOMYCIN 5 MG                         |
| J9281          | MITOMYCIN PYELOALYCEAL INSTILLATION 1 MG         |
| J9285          | INJECTION OLARATUMAB 10 MG                       |
| J9286          | INJECTION GLOFITAMAB-GXBM 2.5 MG                 |
| J9289          | INJECTION NIVOLUMAB 2 MG & HYALURONIDASE NVHY    |
| J9292          | INJECTION PEMETREXED DIPOTASSIUM 10MG            |
| J9293          | INJECTION MITOXANTRONE HCL PER 5 MG              |
| J9294          | INJECTN PEMETREXED HOSPIRA NOT EQUIV J9305 10 MG |
| J9295          | INJECTION NECITUMUMAB 1 MG                       |
| J9296          | INJECTN PEMETREXED ACCORD NOT EQUIV J9305 10 MG  |
| J9297          | INJ PEMETREXED SANDOZ NOT THR EQUIV J9305 10 MG  |
| J9298          | INJECTION NIVOLUMAB & RELATLIMAB-RMBW 3 MG/1 MG  |
| J9299          | INJECTION NIVOLUMAB 1 MG                         |
| J9302          | INJECTION OFATUMUMAB 10 MG                       |

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|----------------|--------------------------------------------------|
| J9303          | INJECTION PANITUMUMAB 10 MG                      |
| J9304          | INJECTION PEMETREXED PEMFEXY 10 MG               |
| J9305          | INJECTION PEMETREXED NOS10 MG                    |
| J9306          | INJECTION PERTUZUMAB 1 MG                        |
| J9307          | INJECTION PRALATREXATE 1 MG                      |
| J9308          | INJECTION RAMUCIRUMAB 5 MG                       |
| J9309          | INJECTION POLATUZUMAB VEDOTIN-PIIQ 1 MG          |
| J9311          | INJECTION RITUXIMAB 10 MG AND HYALURONIDASE      |
| J9313          | INJECTION MOXETUMOMAB PASUDOTOX-TDFK 0.01 MG     |
| J9314          | INJECTION PEMETREXED TEVA NOT EQUIV J9305 10 MG  |
| J9316          | INJ PERTUZUMAB TRASTUZUMAB & HYAL-ZZXF PER 10 MG |
| J9317          | INJECTION SACITUZUMAB GOVITECAN-HZIY 2.5 MG      |
| J9318          | INJECTION ROMIDEPSIN NONLYOPHILIZED 0.1 MG       |
| J9319          | INJECTION ROMIDEPSIN LYOPHILIZED 0.1 MG          |
| J9320          | INJECTION STREPTOZOCIN 1 G                       |
| J9321          | INJECTION EPCORITAMAB-BYSP 0.16 MG               |
| J9322          | INJ PEMETREXED BLUEPOINT NOT EQUIV J9305 10 MG   |
| J9323          | INJECTION PEMETREXED DITROMETHAMINE 10 MG        |
| J9324          | INJECTION PEMETREXED 10 MG                       |
| J9325          | INJ TALIMOGENE LAHERPAREPVEC PER 1 M PLAQUE F U  |
| J9328          | INJECTION TEMOZOLOMIDE 1 MG                      |
| J9329          | INJECTION TISLELIZUMAB-JSGR 1MG                  |
| J9330          | INJECTION TEMSIROLIMUS 1 MG                      |
| J9331          | INJECTION SIROLIMUS PROTEIN-BOUND PARTICLES 1 MG |
| J9341          | INJECTION THIOTEPA TEPLYLUTE 1 MG                |
| J9342          | INJECTION THIOTEPA NOS 1 MG                      |
| J9345          | INJECTION RETIFANLIMAB-DLWR 1 MG                 |
| J9347          | INJECTION TREMELIMUMAB-ACTL 1 MG                 |
| J9348          | INJECTION NAXITAMAB-GQGK 1 MG                    |
| J9349          | INJECTION TAFASITAMAB-CXIX 2 MG                  |
| J9350          | INJECTION MOSUNETUZUMAB-AXGB 1 MG                |
| J9351          | INJECTION TOPOTECAN 0.1 MG                       |
| J9352          | INJECTION TRABECTEDIN 0.1 MG                     |

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|----------------|--------------------------------------------------|
| J9353          | INJECTION MARGETUXIMAB-CMKB 5 MG                 |
| J9354          | INJ ADO-TRASTUZUMAB EMTANSINE 1 MG               |
| J9355          | INJECTION TRASTUZUMAB EXCLUDES BIOSIMILAR 10 MG  |
| J9356          | INJECTION TRASTUZUMAB 10 MG & HYALURONIDASE-OYSK |
| J9357          | INJECTION VALRUBICIN INTRAVESICAL 200 MG         |
| J9358          | INJECTION FAM-TRASTUZUMAB DERUXTECAN-NXKI 1 MG   |
| J9359          | INJECTION, LONCASTUXIMAB TESIRINE-LPYL, 0.075 MG |
| J9360          | INJECTION VINBLASTINE SULFATE 1 MG               |
| J9361          | INJECTION EFBEMALENOGRASTIM ALFA-VUXW 0.5 MG     |
| J9370          | VINCRIStINE SULFATE 1 MG                         |
| J9380          | INJECTION TECLISTAMAB-CQYV 0.5 MG                |
| J9390          | INJECTION VINOReLBINE TARTRATE 10 MG             |
| J9393          | INJECT FULVESTRANT NOT THR EQUIV TO J9395 25 MG  |
| J9394          | INJ FUL FRESENIUS KABI NOT TX EQV TO J9395 25 MG |
| J9395          | INJECTION FULVESTRANT 25 MG                      |
| J9400          | INJECTION ZIV-AFLIBERCEPT 1 MG                   |
| J9600          | INJECTION PORFIMER SODIUM 75 MG                  |
| J9601          | INJECTION LINVOSeltAMAB-GCPT 1 MG                |
| J9999          | NOT OTHERWISE CLASSIFIED ANTINEOPLASTIC DRUG     |
| Q2017          | INJECTION TENIPOSIDE 50 MG                       |
| Q2043          | SIPULEUCeL-T AUTO CD54+                          |
| Q2050          | INJECTION DOXORUBICIN HCL LIPOSOMAL NOS 10 MG    |
| Q5107          | INJECTION BEVACIZUMAB-AWWB BIOSIMILAR 10 MG      |
| Q5112          | INJECTION TRASTUZUMAB-DTTB BIOSIMILAR 10 MG      |
| Q5113          | INJECTION TRASTUZUMAB-PKRB BIOSIMILAR 10 MG      |
| Q5114          | INJECTION TRASTUZUMAB-DKST BIOSIMILAR 10 MG      |
| Q5116          | INJECTION TRASTUZUMAB-QYYP BIOSIMILAR 10 MG      |
| Q5117          | INJECTION TRASTUZUMAB-ANNS BIOSIMILAR 10 MG      |
| Q5118          | INJECTION BEVACIZUMAB-BVZR BIOSIMILAR 10 MG      |
| Q5126          | INJ BEVACIZUMAB-MALY BIOSIMILAR (ALYMSYS) 10 MG  |
| Q5129          | INJECTION BEVACIZUMAB-ADCD BIOSIMILAR 10 MG      |
| Q5161          | INJECTION DENOSUMAB-KYQQ BIOSIMILAR 1 MG         |
| Q5162          | INJECTION DENOSUMAB-NXXP BIOSIMILAR 1 MG         |

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|----------------|--------------------------------------------------|
| Q5165          | INJECTION DENOSUMAB-MOBZ OZILTUS BIOSIMILAR 1 MG |
| Q5166          | INJECTION DENOSUMAB-DESU OSVYRTI/JUBEREQ BS 1 MG |
| Q5167          | INJECTION DENOSUMAB-QBDE ENOBY/XTRENBO BS 1 MG   |
| Q5169          | INJECTION PEGFILGRASTIM-UNNE ARMLUPEG BS 0.5 MG  |
| Q5171          | INJECTION DENOSUMAB-MOBZ BONCRESA BS 1 MG        |
| S2095          | TRNSCATH OCCL/EMBOLIZ TUMR DESTRUC PERQ METH USI |