



**Outpatient Precertification Categories
Cigna Payer Solutions**

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Active Codes

| PROCEDURE CODE | PROCEDURE DESCRIPTION | PAYER SOLUTIONS PRECERT CATEGORY | SUBCATEGORY | CODE EFFECTIVE DATE |
|----------------|--|----------------------------------|--------------------------------|---------------------|
| 37254 | REVASCLARIZATION, ENDOVASCULAR, OPEN OR PERCUTANEOUS, ILIAC VASCULAR TERRITORY, WITH TRANSLUMINAL ANGIOPLASTY, INCLUDING ALL MANEUVERS NECESSARY FOR ACCESSING AND SELECTIVELY CATHETERIZING THE ARTERY AND CROSSING THE LESION, INCLUDING ALL IMAGING GUIDANCE AND RADIOLOGICAL SUPERVISION AND INTERPRETATION NECESSARY TO PERFORM THE ANGIOPLASTY WITHIN THE SAME ARTERY, UNILATERAL; STRAIGHTFORWARD LESION, INITIAL VESSEL | UNLISTED PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 1/1/2026 |
| 37255 | REVASCLARIZATION, ENDOVASCULAR, OPEN OR PERCUTANEOUS, ILIAC VASCULAR TERRITORY, WITH TRANSLUMINAL ANGIOPLASTY, INCLUDING ALL MANEUVERS NECESSARY FOR ACCESSING AND SELECTIVELY CATHETERIZING THE ARTERY AND CROSSING THE LESION, INCLUDING ALL IMAGING GUIDANCE AND RADIOLOGICAL SUPERVISION AND INTERPRETATION NECESSARY TO PERFORM THE ANGIOPLASTY WITHIN THE SAME ARTERY, UNILATERAL; STRAIGHTFORWARD LESION, EACH ADDITIONAL VESSE | UNLISTED PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 1/1/2026 |
| 37256 | REVASCLARIZATION, ENDOVASCULAR, OPEN OR PERCUTANEOUS, ILIAC VASCULAR TERRITORY, WITH TRANSLUMINAL ANGIOPLASTY, INCLUDING ALL MANEUVERS NECESSARY FOR ACCESSING AND SELECTIVELY CATHETERIZING THE ARTERY AND CROSSING THE LESION, INCLUDING ALL IMAGING GUIDANCE AND RADIOLOGICAL SUPERVISION AND INTERPRETATION NECESSARY TO PERFORM THE ANGIOPLASTY WITHIN THE SAME ARTERY, UNILATERAL; COMPLEX LESION, INITIAL VESSEL | UNLISTED PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 1/1/2026 |
| 37257 | REVASCLARIZATION, ENDOVASCULAR, OPEN OR PERCUTANEOUS, ILIAC VASCULAR TERRITORY, WITH TRANSLUMINAL ANGIOPLASTY, INCLUDING ALL MANEUVERS NECESSARY FOR ACCESSING AND SELECTIVELY CATHETERIZING THE ARTERY AND CROSSING THE LESION, INCLUDING ALL IMAGING GUIDANCE AND RADIOLOGICAL SUPERVISION AND INTERPRETATION NECESSARY TO PERFORM THE ANGIOPLASTY WITHIN THE SAME ARTERY, UNILATERAL; COMPLEX LESION, EACH ADDITIONAL VESSE | UNLISTED PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 1/1/2026 |
| 37258 | REVASCLARIZATION, ENDOVASCULAR, OPEN OR PERCUTANEOUS, ILIAC VASCULAR TERRITORY, WITH TRANSLUMINAL STENT PLACEMENT, INCLUDING TRANSLUMINAL ANGIOPLASTY WHEN PERFORMED, INCLUDING ALL MANEUVERS NECESSARY FOR ACCESSING AND SELECTIVELY CATHETERIZING THE ARTERY AND CROSSING THE LESION, INCLUDING ALL IMAGING GUIDANCE AND RADIOLOGICAL SUPERVISION AND INTERPRETATION NECESSARY TO PERFORM THE STENT PLACEMENT AND ANGIOPLASTY WHEN PERFORMED, WITHIN THE SAME ARTERY, UNILATERAL; STRAIGHTFORWARD LESION, INITIAL VESSE | UNLISTED PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 1/1/2026 |
| 37259 | REVASCLARIZATION, ENDOVASCULAR, OPEN OR PERCUTANEOUS, ILIAC VASCULAR TERRITORY, WITH TRANSLUMINAL STENT PLACEMENT, INCLUDING TRANSLUMINAL ANGIOPLASTY WHEN PERFORMED, INCLUDING ALL MANEUVERS NECESSARY FOR ACCESSING AND SELECTIVELY CATHETERIZING THE ARTERY AND CROSSING THE LESION, INCLUDING ALL IMAGING GUIDANCE AND RADIOLOGICAL SUPERVISION AND INTERPRETATION NECESSARY TO PERFORM THE STENT PLACEMENT AND ANGIOPLASTY WHEN PERFORMED, WITHIN THE SAME ARTERY, UNILATERAL; STRAIGHTFORWARD LESION, EACH ADDITIONAL VESSEL | UNLISTED PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 1/1/2026 |

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| 37260 | REVASCLARIZATION, ENDOVASCULAR, OPEN OR PERCUTANEOUS, ILIAC VASCULAR TERRITORY, WITH TRANSLUMINAL STENT PLACEMENT, INCLUDING TRANSLUMINAL ANGIOPLASTY WHEN PERFORMED, INCLUDING ALL MANEUVERS NECESSARY FOR ACCESSING AND SELECTIVELY CATHETERIZING THE ARTERY AND CROSSING THE LESION, INCLUDING ALL IMAGING GUIDANCE AND RADIOLOGICAL SUPERVISION AND INTERPRETATION NECESSARY TO PERFORM THE STENT PLACEMENT AND ANGIOPLASTY WHEN PERFORMED, WITHIN THE SAME ARTERY, UNILATERAL; COMPLEX LESION, INITIAL VESSEL | UNLISTED PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 1/1/2026 |
| 37261 | REVASCLARIZATION, ENDOVASCULAR, OPEN OR PERCUTANEOUS, ILIAC VASCULAR TERRITORY, WITH TRANSLUMINAL STENT PLACEMENT, INCLUDING TRANSLUMINAL ANGIOPLASTY WHEN PERFORMED, INCLUDING ALL MANEUVERS NECESSARY FOR ACCESSING AND SELECTIVELY CATHETERIZING THE ARTERY AND CROSSING THE LESION, INCLUDING ALL IMAGING GUIDANCE AND RADIOLOGICAL SUPERVISION AND INTERPRETATION NECESSARY TO PERFORM THE STENT PLACEMENT AND ANGIOPLASTY WHEN PERFORMED, WITHIN THE SAME ARTERY, UNILATERAL; COMPLEX LESION, EACH ADDITIONAL VESSEL | UNLISTED PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 1/1/2026 |
| 37262 | INTRAVASCULAR LITHOTRIPSY (IES), ILIAC VASCULAR TERRITORY, INCLUDING ALL IMAGING GUIDANCE AND RADIOLOGICAL SUPERVISION AND INTERPRETATION NECESSARY TO PERFORM THE IN | UNLISTED PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 1/1/2026 |
| 37263 | REVASCLARIZATION, ENDOVASCULAR, OPEN OR PERCUTANEOUS, FEMORAL AND POPLITEAL VASCULAR TERRITORY, WITH TRANSLUMINAL ANGIOPLASTY, INCLUDING ALL MANEUVERS NECESSARY FOR ACCESSING AND SELECTIVELY CATHETERIZING THE ARTERY AND CROSSING THE LESION, INCLUDING ALL IMAGING GUIDANCE AND RADIOLOGICAL SUPERVISION AND INTERPRETATION NECESSARY TO PERFORM THE ANGIOPLASTY WITHIN THE SAME ARTERY, UNILATERAL; STRAIGHTFORWARD LESION, INITIAL VESSEL | UNLISTED PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 1/1/2026 |
| 37264 | REVASCLARIZATION, ENDOVASCULAR, OPEN OR PERCUTANEOUS, FEMORAL AND POPLITEAL VASCULAR TERRITORY, WITH TRANSLUMINAL ANGIOPLASTY, INCLUDING ALL MANEUVERS NECESSARY FOR ACCESSING AND SELECTIVELY CATHETERIZING THE ARTERY AND CROSSING THE LESION, INCLUDING ALL IMAGING GUIDANCE AND RADIOLOGICAL SUPERVISION AND INTERPRETATION NECESSARY TO PERFORM THE ANGIOPLASTY WITHIN THE SAME ARTERY, UNILATERAL; STRAIGHTFORWARD LESION, EACH ADDITIONAL VESSEL | UNLISTED PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 1/1/2026 |
| 37265 | REVASCLARIZATION, ENDOVASCULAR, OPEN OR PERCUTANEOUS, FEMORAL AND POPLITEAL VASCULAR TERRITORY, WITH TRANSLUMINAL ANGIOPLASTY, INCLUDING ALL MANEUVERS NECESSARY FOR ACCESSING AND SELECTIVELY CATHETERIZING THE ARTERY AND CROSSING THE LESION, INCLUDING ALL IMAGING GUIDANCE AND RADIOLOGICAL SUPERVISION AND INTERPRETATION NECESSARY TO PERFORM THE ANGIOPLASTY WITHIN THE SAME ARTERY, UNILATERAL; COMPLEX LESION, INITIAL VESSEL | UNLISTED PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 1/1/2026 |
| 37266 | REVASCLARIZATION, ENDOVASCULAR, OPEN OR PERCUTANEOUS, FEMORAL AND POPLITEAL VASCULAR TERRITORY, WITH TRANSLUMINAL ANGIOPLASTY, INCLUDING ALL MANEUVERS NECESSARY FOR ACCESSING AND SELECTIVELY CATHETERIZING THE ARTERY AND CROSSING THE LESION, INCLUDING ALL IMAGING GUIDANCE AND RADIOLOGICAL SUPERVISION AND INTERPRETATION NECESSARY TO PERFORM THE ANGIOPLASTY WITHIN THE SAME ARTERY, UNILATERAL; COMPLEX LESION, EACH ADDITIONAL VESSEL | UNLISTED PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 1/1/2026 |

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| 37267 | REVASCULARIZATION, ENDOVASCULAR, OPEN OR PERCUTANEOUS, FEMORAL AND POPLITEAL VASCULAR TERRITORY, WITH TRANSLUMINAL STENT PLACEMENT, INCLUDING TRANSLUMINAL ANGIOPLASTY WHEN PERFORMED, INCLUDING ALL MANEUVERS NECESSARY FOR ACCESSING AND SELECTIVELY CATHETERIZING THE ARTERY AND CROSSING THE LESION, INCLUDING ALL IMAGING GUIDANCE AND RADIOLOGICAL SUPERVISION AND INTERPRETATION NECESSARY TO PERFORM THE STENT PLACEMENT AND ANGIOPLASTY WHEN PERFORMED, WITHIN THE SAME ARTERY, UNILATERAL; STRAIGHTFORWARD LESION, INITIAL VESSEL | UNLISTED PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 1/1/2026 |
| 37268 | REVASCULARIZATION, ENDOVASCULAR, OPEN OR PERCUTANEOUS, FEMORAL AND POPLITEAL VASCULAR TERRITORY, WITH TRANSLUMINAL STENT PLACEMENT, INCLUDING TRANSLUMINAL ANGIOPLASTY WHEN PERFORMED, INCLUDING ALL MANEUVERS NECESSARY FOR ACCESSING AND SELECTIVELY CATHETERIZING THE ARTERY AND CROSSING THE LESION, INCLUDING ALL IMAGING GUIDANCE AND RADIOLOGICAL SUPERVISION AND INTERPRETATION NECESSARY TO PERFORM THE STENT PLACEMENT AND ANGIOPLASTY WHEN PERFORMED, WITHIN THE SAME ARTERY, UNILATERAL; STRAIGHTFORWARD LESION, EACH ADDITIONAL VESSEL | UNLISTED PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 1/1/2026 |
| 37269 | REVASCULARIZATION, ENDOVASCULAR, OPEN OR PERCUTANEOUS, FEMORAL AND POPLITEAL VASCULAR TERRITORY, WITH TRANSLUMINAL STENT PLACEMENT, INCLUDING TRANSLUMINAL ANGIOPLASTY WHEN PERFORMED, INCLUDING ALL MANEUVERS NECESSARY FOR ACCESSING AND SELECTIVELY CATHETERIZING THE ARTERY AND CROSSING THE LESION, INCLUDING ALL IMAGING GUIDANCE AND RADIOLOGICAL SUPERVISION AND INTERPRETATION NECESSARY TO PERFORM THE STENT PLACEMENT AND ANGIOPLASTY WHEN PERFORMED, WITHIN THE SAME ARTERY, UNILATERAL; COMPLEX LESION, INITIAL VESSEL | UNLISTED PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 1/1/2026 |
| 37270 | REVASCULARIZATION, ENDOVASCULAR, OPEN OR PERCUTANEOUS, FEMORAL AND POPLITEAL VASCULAR TERRITORY, WITH TRANSLUMINAL STENT PLACEMENT, INCLUDING TRANSLUMINAL ANGIOPLASTY WHEN PERFORMED, INCLUDING ALL MANEUVERS NECESSARY FOR ACCESSING AND SELECTIVELY CATHETERIZING THE ARTERY AND CROSSING THE LESION, INCLUDING ALL IMAGING GUIDANCE AND RADIOLOGICAL SUPERVISION AND INTERPRETATION NECESSARY TO PERFORM THE STENT PLACEMENT AND ANGIOPLASTY WHEN PERFORMED, WITHIN THE SAME ARTERY, UNILATERAL; COMPLEX LESION, EACH ADDITIONAL VESSEL | UNLISTED PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 1/1/2026 |
| 37271 | REVASCULARIZATION, ENDOVASCULAR, OPEN OR PERCUTANEOUS, FEMORAL AND POPLITEAL VASCULAR TERRITORY, WITH TRANSLUMINAL ATHERECTOMY, INCLUDING TRANSLUMINAL ANGIOPLASTY WHEN PERFORMED, INCLUDING ALL MANEUVERS NECESSARY FOR ACCESSING AND SELECTIVELY CATHETERIZING THE ARTERY AND CROSSING THE LESION, INCLUDING ALL IMAGING GUIDANCE AND RADIOLOGICAL SUPERVISION AND INTERPRETATION NECESSARY TO PERFORM THE ATHERECTOMY AND ANGIOPLASTY WHEN PERFORMED, WITHIN THE SAME ARTERY, UNILATERAL; STRAIGHTFORWARD LESION, INITIAL VESSEL | UNLISTED PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 1/1/2026 |

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| 37272 | REVASCLARIZATION, ENDOVASCULAR, OPEN OR PERCUTANEOUS, FEMORAL AND POPLITEAL VASCULAR TERRITORY, WITH TRANSLUMINAL ATHERECTOMY, INCLUDING TRANSLUMINAL ANGIOPLASTY WHEN PERFORMED, INCLUDING ALL MANEUVERS NECESSARY FOR ACCESSING AND SELECTIVELY CATHETERIZING THE ARTERY AND CROSSING THE LESION, INCLUDING ALL IMAGING GUIDANCE AND RADIOLOGICAL SUPERVISION AND INTERPRETATION NECESSARY TO PERFORM THE ATHERECTOMY AND ANGIOPLASTY WHEN PERFORMED, WITHIN THE SAME ARTERY, UNILATERAL; STRAIGHTFORWARD LESION, EACH ADDITIONAL VESSEL | UNLISTED PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 1/1/2026 |
| 37273 | REVASCLARIZATION, ENDOVASCULAR, OPEN OR PERCUTANEOUS, FEMORAL AND POPLITEAL VASCULAR TERRITORY, WITH TRANSLUMINAL ATHERECTOMY, INCLUDING TRANSLUMINAL ANGIOPLASTY WHEN PERFORMED, INCLUDING ALL MANEUVERS NECESSARY FOR ACCESSING AND SELECTIVELY CATHETERIZING THE ARTERY AND CROSSING THE LESION, INCLUDING ALL IMAGING GUIDANCE AND RADIOLOGICAL SUPERVISION AND INTERPRETATION NECESSARY TO PERFORM THE ATHERECTOMY AND ANGIOPLASTY WHEN PERFORMED, WITHIN THE SAME ARTERY, UNILATERAL; COMPLEX LESION, INITIAL VESSEL | UNLISTED PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 1/1/2026 |
| 37274 | REVASCLARIZATION, ENDOVASCULAR, OPEN OR PERCUTANEOUS, FEMORAL AND POPLITEAL VASCULAR TERRITORY, WITH TRANSLUMINAL ATHERECTOMY, INCLUDING TRANSLUMINAL ANGIOPLASTY WHEN PERFORMED, INCLUDING ALL MANEUVERS NECESSARY FOR ACCESSING AND SELECTIVELY CATHETERIZING THE ARTERY AND CROSSING THE LESION, INCLUDING ALL IMAGING GUIDANCE AND RADIOLOGICAL SUPERVISION AND INTERPRETATION NECESSARY TO PERFORM THE ATHERECTOMY AND ANGIOPLASTY WHEN PERFORMED, WITHIN THE SAME ARTERY, UNILATERAL; COMPLEX LESION, EACH ADDITIONAL VESSEL | UNLISTED PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 1/1/2026 |
| 37275 | REVASCLARIZATION, ENDOVASCULAR, OPEN OR PERCUTANEOUS, FEMORAL AND POPLITEAL VASCULAR TERRITORY, WITH TRANSLUMINAL STENT PLACEMENT, WITH TRANSLUMINAL ATHERECTOMY, INCLUDING TRANSLUMINAL ANGIOPLASTY WHEN PERFORMED, INCLUDING ALL MANEUVERS NECESSARY FOR ACCESSING AND SELECTIVELY CATHETERIZING THE ARTERY AND CROSSING THE LESION, INCLUDING ALL IMAGING GUIDANCE AND RADIOLOGICAL SUPERVISION AND INTERPRETATION NECESSARY TO PERFORM THE STENT PLACEMENT, ATHERECTOMY, AND ANGIOPLASTY WHEN PERFORMED, WITHIN THE SAME ARTERY, UNILATERAL; STRAIGHTFORWARD LESION, INITIAL VESSEL | UNLISTED PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 1/1/2026 |
| 37276 | REVASCLARIZATION, ENDOVASCULAR, OPEN OR PERCUTANEOUS, FEMORAL AND POPLITEAL VASCULAR TERRITORY, WITH TRANSLUMINAL STENT PLACEMENT, WITH TRANSLUMINAL ATHERECTOMY, INCLUDING TRANSLUMINAL ANGIOPLASTY WHEN PERFORMED, INCLUDING ALL MANEUVERS NECESSARY FOR ACCESSING AND SELECTIVELY CATHETERIZING THE ARTERY AND CROSSING THE LESION, INCLUDING ALL IMAGING GUIDANCE AND RADIOLOGICAL SUPERVISION AND INTERPRETATION NECESSARY TO PERFORM THE STENT PLACEMENT, ATHERECTOMY, AND ANGIOPLASTY WHEN PERFORMED, WITHIN THE SAME ARTERY, UNILATERAL; STRAIGHTFORWARD LESION, EACH ADDITIONAL VESSEL | UNLISTED PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 1/1/2026 |

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| 37277 | REVASCLARIZATION, ENDOVASCULAR, OPEN OR PERCUTANEOUS, FEMORAL AND POPLITEAL VASCULAR TERRITORY, WITH TRANSLUMINAL STENT PLACEMENT, WITH TRANSLUMINAL ATHERECTOMY, INCLUDING TRANSLUMINAL ANGIOPLASTY WHEN PERFORMED, INCLUDING ALL MANEUVERS NECESSARY FOR ACCESSING AND SELECTIVELY CATHETERIZING THE ARTERY AND CROSSING THE LESION, INCLUDING ALL IMAGING GUIDANCE AND RADIOLOGICAL SUPERVISION AND INTERPRETATION NECESSARY TO PERFORM THE STENT PLACEMENT, ATHERECTOMY, AND ANGIOPLASTY WHEN PERFORMED, WITHIN THE SAME ARTERY, UNILATERAL; COMPLEX LESION, INITIAL VESSEL | UNLISTED PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 1/1/2026 |
| 37278 | REVASCLARIZATION, ENDOVASCULAR, OPEN OR PERCUTANEOUS, FEMORAL AND POPLITEAL VASCULAR TERRITORY, WITH TRANSLUMINAL STENT PLACEMENT, WITH TRANSLUMINAL ATHERECTOMY, INCLUDING TRANSLUMINAL ANGIOPLASTY WHEN PERFORMED, INCLUDING ALL MANEUVERS NECESSARY FOR ACCESSING AND SELECTIVELY CATHETERIZING THE ARTERY AND CROSSING THE LESION, INCLUDING ALL IMAGING GUIDANCE AND RADIOLOGICAL SUPERVISION AND INTERPRETATION NECESSARY TO PERFORM THE STENT PLACEMENT, ATHERECTOMY, AND ANGIOPLASTY WHEN PERFORMED, WITHIN THE SAME ARTERY, UNILATERAL; COMPLEX LESION, EACH ADDITIONAL VESSEL | UNLISTED PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 1/1/2026 |
| 37279 | INTRAVASCULAR LITHOTRIPSY (IES), FEMORAL AND POPLITEAL VASCULAR TERRITORY, INCLUDING ALL IMAGING GUIDANCE AND RADIOLOGICAL SUPERVISION AND INTERPRETATION NECESSARY TO PERFORM THE INTRAVASCULAR LITHOTRIPSY (IES) WITHIN THE SAME ARTERY | UNLISTED PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 1/1/2026 |
| 37280 | REVASCLARIZATION, ENDOVASCULAR, OPEN OR PERCUTANEOUS, TIBIAL AND PERONEAL VASCULAR TERRITORY, WITH TRANSLUMINAL ANGIOPLASTY, INCLUDING ALL MANEUVERS NECESSARY FOR ACCESSING AND SELECTIVELY CATHETERIZING THE ARTERY AND CROSSING THE LESION, INCLUDING ALL IMAGING GUIDANCE AND RADIOLOGICAL SUPERVISION AND INTERPRETATION NECESSARY TO PERFORM THE ANGIOPLASTY WITHIN THE SAME ARTERY, UNILATERAL; STRAIGHTFORWARD LESION, INITIAL VESSEL | UNLISTED PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 1/1/2026 |
| 37281 | REVASCLARIZATION, ENDOVASCULAR, OPEN OR PERCUTANEOUS, TIBIAL AND PERONEAL VASCULAR TERRITORY, WITH TRANSLUMINAL ANGIOPLASTY, INCLUDING ALL MANEUVERS NECESSARY FOR ACCESSING AND SELECTIVELY CATHETERIZING THE ARTERY AND CROSSING THE LESION, INCLUDING ALL IMAGING GUIDANCE AND RADIOLOGICAL SUPERVISION AND INTERPRETATION NECESSARY TO PERFORM THE ANGIOPLASTY WITHIN THE SAME ARTERY, UNILATERAL; STRAIGHTFORWARD LESION, EACH ADDITIONAL VESSEL | UNLISTED PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 1/1/2026 |
| 37282 | REVASCLARIZATION, ENDOVASCULAR, OPEN OR PERCUTANEOUS, TIBIAL AND PERONEAL VASCULAR TERRITORY, WITH TRANSLUMINAL ANGIOPLASTY, INCLUDING ALL MANEUVERS NECESSARY FOR ACCESSING AND SELECTIVELY CATHETERIZING THE ARTERY AND CROSSING THE LESION, INCLUDING ALL IMAGING GUIDANCE AND RADIOLOGICAL SUPERVISION AND INTERPRETATION NECESSARY TO PERFORM THE ANGIOPLASTY WITHIN THE SAME ARTERY, UNILATERAL; COMPLEX LESION, INITIAL VESSEL | UNLISTED PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 1/1/2026 |

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| 37283 | REVASCULARIZATION, ENDOVASCULAR, OPEN OR PERCUTANEOUS, TIBIAL AND PERONEAL VASCULAR TERRITORY, WITH TRANSLUMINAL ANGIOPLASTY, INCLUDING ALL MANEUVERS NECESSARY FOR ACCESSING AND SELECTIVELY CATHETERIZING THE ARTERY AND CROSSING THE LESION, INCLUDING ALL IMAGING GUIDANCE AND RADIOLOGICAL SUPERVISION AND INTERPRETATION NECESSARY TO PERFORM THE ANGIOPLASTY WITHIN THE SAME ARTERY, UNILATERAL; COMPLEX LESION, EACH ADDITIONAL VESSEL | UNLISTED PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 1/1/2026 |
| 37284 | REVASCULARIZATION, ENDOVASCULAR, OPEN OR PERCUTANEOUS, TIBIAL AND PERONEAL VASCULAR TERRITORY, WITH TRANSLUMINAL STENT PLACEMENT, INCLUDING TRANSLUMINAL ANGIOPLASTY WHEN PERFORMED, INCLUDING ALL MANEUVERS NECESSARY FOR ACCESSING AND SELECTIVELY CATHETERIZING THE ARTERY AND CROSSING THE LESION, INCLUDING ALL IMAGING GUIDANCE AND RADIOLOGICAL SUPERVISION AND INTERPRETATION NECESSARY TO PERFORM THE STENT PLACEMENT AND ANGIOPLASTY WHEN PERFORMED, WITHIN THE SAME ARTERY, UNILATERAL; STRAIGHTFORWARD LESION, INITIAL VESSEL | UNLISTED PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 1/1/2026 |
| 37285 | REVASCULARIZATION, ENDOVASCULAR, OPEN OR PERCUTANEOUS, TIBIAL AND PERONEAL VASCULAR TERRITORY, WITH TRANSLUMINAL STENT PLACEMENT, INCLUDING TRANSLUMINAL ANGIOPLASTY WHEN PERFORMED, INCLUDING ALL MANEUVERS NECESSARY FOR ACCESSING AND SELECTIVELY CATHETERIZING THE ARTERY AND CROSSING THE LESION, INCLUDING ALL IMAGING GUIDANCE AND RADIOLOGICAL SUPERVISION AND INTERPRETATION NECESSARY TO PERFORM THE STENT PLACEMENT AND ANGIOPLASTY WHEN PERFORMED, WITHIN THE SAME ARTERY, UNILATERAL; STRAIGHTFORWARD LESION, EACH ADDITIONAL VESSEL | UNLISTED PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 1/1/2026 |
| 37286 | REVASCULARIZATION, ENDOVASCULAR, OPEN OR PERCUTANEOUS, TIBIAL AND PERONEAL VASCULAR TERRITORY, WITH TRANSLUMINAL STENT PLACEMENT, INCLUDING TRANSLUMINAL ANGIOPLASTY WHEN PERFORMED, INCLUDING ALL MANEUVERS NECESSARY FOR ACCESSING AND SELECTIVELY CATHETERIZING THE ARTERY AND CROSSING THE LESION, INCLUDING ALL IMAGING GUIDANCE AND RADIOLOGICAL SUPERVISION AND INTERPRETATION NECESSARY TO PERFORM THE STENT PLACEMENT AND ANGIOPLASTY WHEN PERFORMED, WITHIN THE SAME ARTERY, UNILATERAL; COMPLEX LESION, INITIAL VESSEL | UNLISTED PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 1/1/2026 |
| 37287 | REVASCULARIZATION, ENDOVASCULAR, OPEN OR PERCUTANEOUS, TIBIAL AND PERONEAL VASCULAR TERRITORY, WITH TRANSLUMINAL STENT PLACEMENT, INCLUDING TRANSLUMINAL ANGIOPLASTY WHEN PERFORMED, INCLUDING ALL MANEUVERS NECESSARY FOR ACCESSING AND SELECTIVELY CATHETERIZING THE ARTERY AND CROSSING THE LESION, INCLUDING ALL IMAGING GUIDANCE AND RADIOLOGICAL SUPERVISION AND INTERPRETATION NECESSARY TO PERFORM THE STENT PLACEMENT AND ANGIOPLASTY WHEN PERFORMED, WITHIN THE SAME ARTERY, UNILATERAL; COMPLEX LESION, EACH ADDITIONAL VESSEL | UNLISTED PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 1/1/2026 |

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| 37288 | REVASCLARIZATION, ENDOVASCULAR, OPEN OR PERCUTANEOUS, TIBIAL AND PERONEAL VASCULAR TERRITORY, WITH TRANSLUMINAL ATHERECTOMY, INCLUDING TRANSLUMINAL ANGIOPLASTY WHEN PERFORMED, INCLUDING ALL MANEUVERS NECESSARY FOR ACCESSING AND SELECTIVELY CATHETERIZING THE ARTERY AND CROSSING THE LESION, INCLUDING ALL IMAGING GUIDANCE AND RADIOLOGICAL SUPERVISION AND INTERPRETATION NECESSARY TO PERFORM THE ATHERECTOMY AND ANGIOPLASTY WHEN PERFORMED, WITHIN THE SAME ARTERY, UNILATERAL; STRAIGHTFORWARD LESION, INITIAL VESSEL | UNLISTED PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 1/1/2026 |
| 37289 | REVASCLARIZATION, ENDOVASCULAR, OPEN OR PERCUTANEOUS, TIBIAL AND PERONEAL VASCULAR TERRITORY, WITH TRANSLUMINAL ATHERECTOMY, INCLUDING TRANSLUMINAL ANGIOPLASTY WHEN PERFORMED, INCLUDING ALL MANEUVERS NECESSARY FOR ACCESSING AND SELECTIVELY CATHETERIZING THE ARTERY AND CROSSING THE LESION, INCLUDING ALL IMAGING GUIDANCE AND RADIOLOGICAL SUPERVISION AND INTERPRETATION NECESSARY TO PERFORM THE ATHERECTOMY AND ANGIOPLASTY WHEN PERFORMED, WITHIN THE SAME ARTERY, UNILATERAL; STRAIGHTFORWARD LESION, EACH ADDITIONAL VESSEL | UNLISTED PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 1/1/2026 |
| 37290 | REVASCLARIZATION, ENDOVASCULAR, OPEN OR PERCUTANEOUS, TIBIAL AND PERONEAL VASCULAR TERRITORY, WITH TRANSLUMINAL ATHERECTOMY, INCLUDING TRANSLUMINAL ANGIOPLASTY WHEN PERFORMED, INCLUDING ALL MANEUVERS NECESSARY FOR ACCESSING AND SELECTIVELY CATHETERIZING THE ARTERY AND CROSSING THE LESION, INCLUDING ALL IMAGING GUIDANCE AND RADIOLOGICAL SUPERVISION AND INTERPRETATION NECESSARY TO PERFORM THE ATHERECTOMY AND ANGIOPLASTY WHEN PERFORMED, WITHIN THE SAME ARTERY, UNILATERAL; COMPLEX LESION, INITIAL VESSEL | UNLISTED PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 1/1/2026 |
| 37291 | REVASCLARIZATION, ENDOVASCULAR, OPEN OR PERCUTANEOUS, TIBIAL AND PERONEAL VASCULAR TERRITORY, WITH TRANSLUMINAL ATHERECTOMY, INCLUDING TRANSLUMINAL ANGIOPLASTY WHEN PERFORMED, INCLUDING ALL MANEUVERS NECESSARY FOR ACCESSING AND SELECTIVELY CATHETERIZING THE ARTERY AND CROSSING THE LESION, INCLUDING ALL IMAGING GUIDANCE AND RADIOLOGICAL SUPERVISION AND INTERPRETATION NECESSARY TO PERFORM THE ATHERECTOMY AND ANGIOPLASTY WHEN PERFORMED, WITHIN THE SAME ARTERY, UNILATERAL; COMPLEX LESION, EACH ADDITIONAL VESSEL | UNLISTED PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 1/1/2026 |
| 37292 | REVASCLARIZATION, ENDOVASCULAR, OPEN OR PERCUTANEOUS, TIBIAL AND PERONEAL VASCULAR TERRITORY, WITH TRANSLUMINAL STENT PLACEMENT, WITH TRANSLUMINAL ATHERECTOMY, INCLUDING TRANSLUMINAL ANGIOPLASTY WHEN PERFORMED, INCLUDING ALL MANEUVERS NECESSARY FOR ACCESSING AND SELECTIVELY CATHETERIZING THE ARTERY AND CROSSING THE LESION, INCLUDING ALL IMAGING GUIDANCE AND RADIOLOGICAL SUPERVISION AND INTERPRETATION NECESSARY TO PERFORM THE STENT PLACEMENT, ATHERECTOMY, AND ANGIOPLASTY WHEN PERFORMED, WITHIN THE SAME ARTERY, UNILATERAL; STRAIGHTFORWARD LESION, INITIAL VESSEL | UNLISTED PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 1/1/2026 |

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| 37293 | REVASCULARIZATION, ENDOVASCULAR, OPEN OR PERCUTANEOUS, TIBIAL AND PERONEAL VASCULAR TERRITORY, WITH TRANSLUMINAL STENT PLACEMENT, WITH TRANSLUMINAL ATHERECTOMY, INCLUDING TRANSLUMINAL ANGIOPLASTY WHEN PERFORMED, INCLUDING ALL MANEUVERS NECESSARY FOR ACCESSING AND SELECTIVELY CATHETERIZING THE ARTERY AND CROSSING THE LESION, INCLUDING ALL IMAGING GUIDANCE AND RADIOLOGICAL SUPERVISION AND INTERPRETATION NECESSARY TO PERFORM THE STENT PLACEMENT, ATHERECTOMY, AND ANGIOPLASTY WHEN PERFORMED, WITHIN THE SAME ARTERY, UNILATERAL; STRAIGHTFORWARD LESION, EACH ADDITIONAL VESSEL | UNLISTED PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 1/1/2026 |
| 37294 | REVASCULARIZATION, ENDOVASCULAR, OPEN OR PERCUTANEOUS, TIBIAL AND PERONEAL VASCULAR TERRITORY, WITH TRANSLUMINAL STENT PLACEMENT, WITH TRANSLUMINAL ATHERECTOMY, INCLUDING TRANSLUMINAL ANGIOPLASTY WHEN PERFORMED, INCLUDING ALL MANEUVERS NECESSARY FOR ACCESSING AND SELECTIVELY CATHETERIZING THE ARTERY AND CROSSING THE LESION, INCLUDING ALL IMAGING GUIDANCE AND RADIOLOGICAL SUPERVISION AND INTERPRETATION NECESSARY TO PERFORM THE STENT PLACEMENT, ATHERECTOMY, AND ANGIOPLASTY WHEN PERFORMED, WITHIN THE SAME ARTERY, UNILATERAL; COMPLEX LESION, INITIAL VESSEL | UNLISTED PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 1/1/2026 |
| 37295 | REVASCULARIZATION, ENDOVASCULAR, OPEN OR PERCUTANEOUS, TIBIAL AND PERONEAL VASCULAR TERRITORY, WITH TRANSLUMINAL STENT PLACEMENT, WITH TRANSLUMINAL ATHERECTOMY, INCLUDING TRANSLUMINAL ANGIOPLASTY WHEN PERFORMED, INCLUDING ALL MANEUVERS NECESSARY FOR ACCESSING AND SELECTIVELY CATHETERIZING THE ARTERY AND CROSSING THE LESION, INCLUDING ALL IMAGING GUIDANCE AND RADIOLOGICAL SUPERVISION AND INTERPRETATION NECESSARY TO PERFORM THE STENT PLACEMENT, ATHERECTOMY, AND ANGIOPLASTY WHEN PERFORMED, WITHIN THE SAME ARTERY, UNILATERAL; COMPLEX LESION, EACH ADDITIONAL VESSEL | UNLISTED PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 1/1/2026 |
| 37296 | REVASCULARIZATION, ENDOVASCULAR, OPEN OR PERCUTANEOUS, INFRAMALLEOLAR VASCULAR TERRITORY, WITH TRANSLUMINAL ANGIOPLASTY, INCLUDING ALL MANEUVERS NECESSARY FOR ACCESSING AND SELECTIVELY CATHETERIZING THE ARTERY AND CROSSING THE LESION, INCLUDING ALL IMAGING GUIDANCE AND RADIOLOGICAL SUPERVISION AND INTERPRETATION NECESSARY TO PERFORM THE ANGIOPLASTY WITHIN THE SAME ARTERY, UNILATERAL; STRAIGHTFORWARD LESION, INITIAL VESSEL | UNLISTED PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 1/1/2026 |
| 37297 | REVASCULARIZATION, ENDOVASCULAR, OPEN OR PERCUTANEOUS, INFRAMALLEOLAR VASCULAR TERRITORY, WITH TRANSLUMINAL ANGIOPLASTY, INCLUDING ALL MANEUVERS NECESSARY FOR ACCESSING AND SELECTIVELY CATHETERIZING THE ARTERY AND CROSSING THE LESION, INCLUDING ALL IMAGING GUIDANCE AND RADIOLOGICAL SUPERVISION AND INTERPRETATION NECESSARY TO PERFORM THE ANGIOPLASTY WITHIN THE SAME ARTERY, UNILATERAL; STRAIGHTFORWARD LESION, EACH ADDITIONAL VESSEL | UNLISTED PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 1/1/2026 |

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| 37298 | REVASCULARIZATION, ENDOVASCULAR, OPEN OR PERCUTANEOUS, INFRAMALLEOLAR VASCULAR TERRITORY, WITH TRANSLUMINAL ANGIOPLASTY, INCLUDING ALL MANEUVERS NECESSARY FOR ACCESSING AND SELECTIVELY CATHETERIZING THE ARTERY AND CROSSING THE LESION, INCLUDING ALL IMAGING GUIDANCE AND RADIOLOGICAL SUPERVISION AND INTERPRETATION NECESSARY TO PERFORM THE ANGIOPLASTY WITHIN THE SAME ARTERY, UNILATERAL; COMPLEX LESION, INITIAL VESSEL | UNLISTED PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 1/1/2026 |
| 37299 | REVASCULARIZATION, ENDOVASCULAR, OPEN OR PERCUTANEOUS, INFRAMALLEOLAR VASCULAR TERRITORY, WITH TRANSLUMINAL ANGIOPLASTY, INCLUDING ALL MANEUVERS NECESSARY FOR ACCESSING AND SELECTIVELY CATHETERIZING THE ARTERY AND CROSSING THE LESION, INCLUDING ALL IMAGING GUIDANCE AND RADIOLOGICAL SUPERVISION AND INTERPRETATION NECESSARY TO PERFORM THE ANGIOPLASTY WITHIN THE SAME ARTERY, UNILATERAL; COMPLEX LESION, EACH ADDITIONAL VESSEL | UNLISTED PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 1/1/2026 |
| 43889 | GASTRIC RESTRICTIVE PROCEDURE, TRANSORAL, ENDOSCOPIC SLEEVE GASTROPLASTY (ESG), INCLUDING ARGON PLASMA COAGULATION, WHEN PERFORMED | UNLISTED PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 1/1/2026 |
| 64567 | PERCUTANEOUS ELECTRICAL NERVE FIELD STIMULATION, CRANIAL NERVES, WITHOUT IMPLANTATION | SPINAL SERVICES | OUTPATIENT SURGICAL PROCEDURES | 1/1/2026 |
| 64654 | INITIAL OPEN IMPLANTATION OF BAROREFLEX ACTIVATION THERAPY (BAT) MODULATION SYSTEM, INCLUDING LEAD PLACEMENT ONTO THE CAROTID SINUS, LEAD TUNNELLING, CONNECTION TO A PULSE GENERATOR PLACED IN A DISTANT SUBCUTANEOUS POCKET (IE, TOTAL SYSTEM), AND INTRAOPERATIVE INTERROGATION AND PROGRAMMING | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 1/1/2026 |
| 64910 | NERVE REPAIR; WITH SYNTHETIC CONDUIT OR VEIN ALLOGRAFT (EG NERVE TUBE) | VASCULAR INTERVENTIONS | OUTPATIENT SURGICAL PROCEDURES | 3/6/2026 |
| 70471 | COMPUTED TOMOGRAPHIC ANGIOGRAPHY (CTA), HEAD AND NECK, WITH CONTRAST MATERIAL(S), INCLUDING NONCONTRAST IMAGES, WHEN PERFORMED, AND IMAGE POSTPROCESSING | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 1/1/2026 |
| 75577 | QUANTIFICATION AND CHARACTERIZATION OF CORONARY ATHEROSCLEROTIC PLAQUE TO ASSESS SEVERITY OF CORONARY DISEASE, DERIVED FROM AUGMENTATIVE SOFTWARE ANALYSIS OF THE DATA SET FROM A CORONARY COMPUTED TOMOGRAPHIC ANGIOGRAPHY, WITH INTERPRETATION AND REPORT BY A PHYSICIAN OR OTHER QUALIFIED HEALTH CARE PROFESSIONAL | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 1/1/2026 |
| 77436 | SURFACE RADIATION THERAPY; SUPERFICIAL OR ORTHOVOLTAGE, TREATMENT PLANNING AND SIMULATION-AIDED FIELD SETTING | RADIATION THERAPY | CHEMOTHERAPY/RADIATION | 1/1/2026 |
| 77437 | SURFACE RADIATION THERAPY; SUPERFICIAL, DELIVERY, | RADIATION THERAPY | CHEMOTHERAPY/RADIATION | 1/1/2026 |
| 77438 | SURFACE RADIATION THERAPY; ORTHOVOLTAGE, DELIVERY, >150-500 KV, PER FRACTIO | RADIATION THERAPY | CHEMOTHERAPY/RADIATION | 1/1/2026 |
| 77439 | SURFACE RADIATION THERAPY; SUPERFICIAL OR ORTHOVOLTAGE, IMAGE GUIDANCE, ULTRASOUND FOR PLACEMENT OF RADIATION THERAPY FIELDS FOR TREATMENT OF CUTANEOUS TUMORS, PER COURSE OF TREATMENT | RADIATION THERAPY | CHEMOTHERAPY/RADIATION | 1/1/2026 |
| 81354 | CYTOGENOMIC (GENOME-WIDE) ANALYSIS FOR CONSTITUTIONAL CHROMOSOMAL ABNORMALITIES; INTERROGATION OF STRUCTURAL AND COPY NUMBER VARIANTS, OPTICAL GENOME MAPPING (OGM) | MOLECULAR LAB | GENETIC TESTING, EXCEPT FOR BRCA | 1/1/2026 |
| 81408 | DURABLE MEDI EQUIP MISC | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 9/13/2025 |
| 81445 | SOLID ORGAN NEOPLASM, GENOMIC SEQUENCE ANALYSIS PANEL, 5-50 GENES, INTERROGATION FOR SEQUENCE VARIANTS AND COPY NUMBER VARIANTS OR REARRANGEMENTS, IF PERFORMED; DNA ANALYSIS OR COMBINED DNA AND RNA ANALYSIS | Molecular Lab | GENETIC TESTING, EXCEPT FOR BRCA | 5/14/2026 |

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| 81450 | HEMATOLYMPHOID NEOPLASM OR DISORDER, GENOMIC SEQUENCE ANALYSIS PANEL, 5-50 GENES, INTERROGATION FOR SEQUENCE VARIANTS, AND COPY NUMBER VARIANTS OR REARRANGEMENTS, OR ISOFORM EXPRESSION OR MRNA EXPRESSION LEVELS, IF PERFORMED; DNA ANALYSIS OR COMBINED DNA AND RNA ANALYSIS | Molecular Lab | GENETIC TESTING, EXCEPT FOR BRCA | 05/14/20206 |
| 81524 | ONCOLOGY (CENTRAL NERVOUS SYSTEM TUMOR), DNA METHYLATION ANALYSIS OF AT LEAST 10,000 METHYLATION SITES, UTILIZING DNA EXTRACTED FROM FORMALIN-FIXED TUMOR TISSUE, ALGORITHM(S) REPORTED AS PROBABILITY OF MATCHING A REFERENCE TUMOR FAMILY AND CLASS, AND MGMT (O-6-METHYLGUANINE-DNA METHYLTRANSFERASE) PROMOTER METHYLATION STATUS, IF PERFORMED | MOLECULAR LAB | BIOMARKER TESTING | 1/1/2026 |
| 89251 | CULTR OOCYTE/EMBRYO <4 D | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 12/4/2021 |
| 89335 | CRYOPRESERVE TESTICULAR | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 12/4/2021 |
| 89344 | STORAGE/YEAR REPROD TISS | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 12/4/2021 |
| 89346 | STORAGE/YEAR OOCYTE(S) | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 12/4/2021 |
| 89354 | THAW CRYOPRSVRD REPROD T | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 12/4/2021 |
| 0020M | ONCOLOGY (CENTRAL NERVOUS SYSTEM), ANALYSIS OF 30000 DNA METHYLATION LOCI BY METHYLATION ARRAY, UTILIZING DNA EXTRACTED FROM TUMOR TISSUE, DIAGNOSTIC ALGORITHM REPORTED AS PROBABILITY OF MATCHING A REFERENCE TUMOR SUBCLASS | MOLECULAR LAB | BIOMARKER TESTING | 11/2/2024 |
| 0036U | EXOME (IE, SOMATIC MUTATIONS), PAIRED FORMALIN-FIXED PARAFFIN-EMBEDDED TUMOR TISSUE AND NORMAL SPECIMEN, SEQUENCE ANALYSE | Molecular Lab | GENETIC TESTING, EXCEPT FOR BRCA | 5/14/2026 |
| 0037U | TARGETED GENOMIC SEQUENCE ANALYSIS, SOLID ORGAN NEOPLASM, DNA ANALYSIS OF 324 GENES, INTERROGATION FOR SEQUENCE VARIANTS, GENE COPY NUMBER AMPLIFICATIONS, GENE REARRANGEMENTS, MICROSATELLITE INSTABILITY AND TUMOR MUTATIONAL BURDEN | Molecular Lab | GENETIC TESTING, EXCEPT FOR BRCA | 5/14/2026 |
| 0047U | ONC PRS18 MRNA 17 GENE ALG | MOLECULAR LAB | BIOMARKER TESTING | 11/21/2025 |
| 0048U | ONC SLD ORG NEO DNA 468 GENE | MOLECULAR LAB | BIOMARKER TESTING | 11/2/2024 |
| 0075T | PERQ STENT/CHEST VERT AR | VASCULAR INTERVENTIONS | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 0087U | CRD HRT TRNSPL MRNA 1283 GEN | TRANSPLANT | TRANSPLANT | 6/28/2025 |
| 0088U | TRNSPLJ KDN ALGRFT REJ 1494 | TRANSPLANT | TRANSPLANT | 6/28/2025 |
| 0089U | ONC MLNMA PRAME & LINC00518 | MOLECULAR LAB | BIOMARKER TESTING | 11/2/2024 |
| 0098T | REV ARTIFIC DISC ADDL | SPINAL PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 0102U | HERED BRST CA RLTD DO 17 GEN | MOLECULAR LAB | BIOMARKER TESTING | 11/2/2024 |
| 0129U | RX MNTR 1+ORAL ONC RX&SBSTS | MOLECULAR LAB | BIOMARKER TESTING | 11/2/2024 |
| 0172U | ONC SLD TUM ALYS BRCA1 BRCA2 | MOLECULAR LAB | BIOMARKER TESTING | 11/2/2024 |
| 0200T | PERQ SACRAL AUGMT UNILAT | SPINAL PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 0201T | PERQ SACRAL AUGMT BILAT | SPINAL PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 0211U | ONC PAN-TUM DNA&RNA GNRJ SEQ | MOLECULAR LAB | BIOMARKER TESTING | 5/31/2025 |
| 0232T | INJ PLSM IMG GUID HRVST&PREP | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 11/4/2019 |
| 0239U | TRGT GEN SEQ ALYS PNL 311+ | MOLECULAR LAB | GENETIC TESTING, EXCEPT FOR BRCA | 11/2/2024 |
| 0242U | TRGT GEN SEQ ALYS PNL 55-74 | MOLECULAR LAB | GENETIC TESTING, EXCEPT FOR BRCA | 11/2/2024 |
| 0244U | ONCOLOGY (SOLID ORGAN), DNA, COMPREHENSIVE GENOMIC PROFILING, 257 GENES, INTERROGATION FOR SINGLE-NUCLEOTIDE VARIANTS, INSERTIONS/DELETIONS, COPY NUMBER ALTERATIONS, GENE REARRANGEMENTS, TUMOR-MUTATIONAL BURDEN AND MICROSATELLITE INSTABILITY, UTILIZING FORMALIN-FIXED PARAFFIN-EMBEDDED TUMOR TISS | Molecular Lab | GENETIC TESTING, EXCEPT FOR BRCA | 5/14/2026 |

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| 0250U | ONCOLOGY (SOLID ORGAN NEOPLASM), TARGETED GENOMIC SEQUENCE DNA ANALYSIS OF 505 GENES, INTERROGATION FOR SOMATIC ALTERATIONS (SNVS [SINGLE NUCLEOTIDE VARIANT], SMALL INSERTIONS AND DELETIONS, ONE AMPLIFICATION, AND FOUR TRANSLOCATIONS), MICROSATELLITE INSTABILITY AND TUMOR-MUTATION BURDEN | Molecular Lab | GENETIC TESTING, EXCEPT FOR BRCA | 5/14/2026 |
| 0275T | PERQ LAMOT/LAM LUMBAR | SPINAL PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 0318U | PED WHL GEN MTHYLTN ALYS 50+ | MOLECULAR LAB | GENETIC TESTING, EXCEPT FOR BRCA | 11/2/2024 |
| 0326U | TRGT GEN SEQ ALYS PNL 83+ | MOLECULAR LAB | GENETIC TESTING, EXCEPT FOR BRCA | 11/2/2024 |
| 0329U | ONC NEO XOME&TRNS SEQ ALYS | MOLECULAR LAB | BIOMARKER TESTING | 11/2/2024 |
| 0331T | HEART SYMP IMAGE PLNR | DIAGNOSTIC RADIOLOGY | Diagnostic Testing and Radiology services | 11/4/2019 |
| 0332T | HEART SYMP IMAGE PLNR SP | DIAGNOSTIC RADIOLOGY | Diagnostic Testing and Radiology services | 11/4/2019 |
| 0334U | ONCOLOGY (SOLID ORGAN), TARGETED GENOMIC SEQUENCE ANALYSIS, FORMALIN-FIXED PARAFFIN-EMBEDDED (FFPE) TUMOR TISSUE, DNA ANALYSIS, 84 OR MORE GENES, INTERROGATION FOR SEQUENCE VARIANTS, GENE COPY NUMBER AMPLIFICATIONS, GENE REARRANGEMENTS, MICROSATELLITE INSTABILITY AND TUMOR MUTATIONAL BURDEN | Molecular Lab | GENETIC TESTING, EXCEPT FOR BRCA | 5/14/2026 |
| 0335T | INSERTION OF SINUS TARSI IMPLANT | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 11/4/2019 |
| 0340U | ONC PAN CA ALYS MRD PLASMA | MOLECULAR LAB | BIOMARKER TESTING | 11/2/2024 |
| 0364U | ONC HL NEO GEN SEQ ALYS ALG | MOLECULAR LAB | BIOMARKER TESTING | 11/2/2024 |
| 0379U | TARGETED GENOMIC SEQUENCE ANALYSIS PANEL, SOLID ORGAN NEOPLASM, DNA (523 GENES) AND RNA (55 GENES) BY NEXT-GENERATION SEQUENCING, INTERROGATION FOR SEQUENCE VARIANTS, GENE COPY NUMBER AMPLIFICATIONS, GENE REARRANGEMENTS, MICROSATELLITE INSTABILITY, AND TUMOR MUTATIONAL BURDEN | Molecular Lab | GENETIC TESTING, EXCEPT FOR BRCA | 5/14/2026 |
| 0388U | ONC NONSM CLL LNG CA 37 GEN | MOLECULAR LAB | BIOMARKER TESTING | 5/31/2025 |
| 0394T | HIGH DOSE RATE ELECTRONIC BRACHYTHERAPY, SKIN SURFACE APPLICATION, PER FRACTION, INCLUDES BASIC DOSIMETRY, WHEN PERFORMED | THERAPEUTIC RADIOLOGY | CHEMOTHERAPY/RADIATION | 11/4/2019 |
| 0395T | HIGH DOSE RATE ELECTRONIC BRACHYTHERAPY, INTERSTITIAL OR INTRACAVITARY TREATMENT, PER FRACTION, INCLUDES BASIC DOSIMETRY, WHEN PERFORMED | THERAPEUTIC RADIOLOGY | CHEMOTHERAPY/RADIATION | 11/4/2019 |
| 0425U | GENOM RPD SEQ ALYS EA CMPRTR | MOLECULAR LAB | GENETIC TESTING, EXCEPT FOR BRCA | 11/2/2024 |
| 0426U | GENOME ULTRA-RAPID SEQ ALYS | MOLECULAR LAB | GENETIC TESTING, EXCEPT FOR BRCA | 11/2/2024 |
| 0444U | ONCOLOGY (SOLID ORGAN NEOPLASIA), TARGETED GENOMIC SEQUENCE ANALYSIS PANEL OF 361 GENES, INTERROGATION FOR GENE FUSIONS, TRANSLOCATIONS, OR OTHER REARRANGEMENTS, USING DNA FROM FORMALIN-FIXED PARAFFIN-EMBEDDED (FFPE) TUMOR TISSUE, REPORT OF CLINICALLY SIGNIFICANT VARIANT(S) | Molecular Lab | GENETIC TESTING, EXCEPT FOR BRCA | 5/14/2026 |
| 0449T | INSJ AQUEOUS DRAIN DEV 1ST | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 9/13/2025 |
| 0452U | ONCOLOGY (BLADDER), METHYLATED PENK DNA DETECTION BY LINEAR TARGET ENRICHMENT-QUANTITATIVE METHYLATION-SPECIFIC REAL-TIME PCR (LTE-QMSP), URINE, REPORTED AS LIKELIHOOD OF BLADDER CANCER | MOLECULAR LAB | BIOMARKER TESTING | 11/2/2024 |
| 0453U | ONCOLOGY (COLORECTAL CANCER), CELL-FREE DNA (CFDNA), METHYLATION-BASED QUANTITATIVE PCR ASSAY (SEPTIN9, IKZF1, BCAT1, SEPTIN9-2, VAV3, BCAN), PLASMA, REPORTED AS PRESENCE OR ABSENCE OF CIRCULATING TUMOR DNA (CTDNA) | MOLECULAR LAB | BIOMARKER TESTING | 11/2/2024 |
| 0454U | RARE DISEASES (CONSTITUTIONAL/HERITABLE DISORDERS), IDENTIFICATION OF COPY NUMBER VARIATIONS, INVERSIONS, INSERTIONS, TRANSLOCATIONS, AND OTHER STRUCTURAL VARIANTS BY OPTICAL GENOME MAPPING(FOR ADDITIONAL PLA CODES WITH IDENTICAL CLINICAL DESCRIPTOR, SEE | MOLECULAR LAB | GENETIC TESTING, EXCEPT FOR BRCA | 11/2/2024 |
| 0465U | ONCOLOGY (UROTHELIAL CARCINOMA), DNA, QUANTITATIVE METHYLATION-SPECIFIC PCR OF 2 GENES (ONECUT2, VIM), ALGORITHMIC ANALYSIS REPORTED AS POSITIVE OR NEGATIVE | MOLECULAR LAB | BIOMARKER TESTING | 11/2/2024 |

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| 0466U | CARDIOLOGY (CORONARY ARTERY DISEASE [CAD]), DNA, GENOME-WIDE ASSOCIATION STUDIES (564856 SINGLE-NUCLEOTIDE POLYMORPHISMS [SNPS], TARGETED VARIANT GENOTYPING), PATIENT LIFESTYLE AND CLINICAL DATA, BUCCAL SWAB, ALGORITHM REPORTED AS POLYGENIC RISK TO ACQUIR | MOLECULAR LAB | GENETIC TESTING, EXCEPT FOR BRCA | 11/2/2024 |
| 0467U | ONCOLOGY (BLADDER), DNA, NEXT-GENERATION SEQUENCING (NGS) OF 60 GENES AND WHOLE GENOME ANEUPLOIDY, URINE, ALGORITHMS REPORTED AS MINIMAL RESIDUAL DISEASE (MRD) STATUS POSITIVE OR NEGATIVE AND QUANTITATIVE DISEASE BURDEN | MOLECULAR LAB | BIOMARKER TESTING | 11/2/2024 |
| 0469U | RARE DISEASES (CONSTITUTIONAL/HERITABLE DISORDERS), WHOLE GENOME SEQUENCE ANALYSIS FOR CHROMOSOMAL ABNORMALITIES, COPY NUMBER VARIANTS, DUPLICATIONS/DELETIONS, INVERSIONS, UNBALANCED TRANSLOCATIONS, REGIONS OF HOMOZYGOSITY (ROH), INHERITANCE PATTERN THAT | MOLECULAR LAB | GENETIC TESTING, EXCEPT FOR BRCA | 11/2/2024 |
| 0471U | ONCOLOGY (COLORECTAL CANCER), QUALITATIVE REAL-TIME PCR OF 35 VARIANTS OF KRAS AND NRAS GENES (EXONS 2, 3, 4), FORMALIN-FIXED PARAFFIN-EMBEDDED (FFPE), PREDICTIVE, IDENTIFICATION OF DETECTED MUTATIONS | MOLECULAR LAB | BIOMARKER TESTING | 11/2/2024 |
| 0473U | ONCOLOGY (SOLID TUMOR), NEXT-GENERATION SEQUENCING (NGS) OF DNA FROM FORMALIN-FIXED PARAFFIN-EMBEDDED (FFPE) TISSUE WITH COMPARATIVE SEQUENCE ANALYSIS FROM A MATCHED NORMAL SPECIMEN (BLOOD OR SALIVA), 648 GENES, INTERROGATION FOR SEQUENCE VARIANTS, INSERT | MOLECULAR LAB | BIOMARKER TESTING | 11/2/2024 |
| 0479T | FXJL ABL LSR 1ST 100 SQ CM | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 9/13/2025 |
| 0480T | FXJL ABL LSR EA ADDL 100SQCM | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 1/1/2026 |
| 0481U | IDH1 IDH2&TERT PROMOTER NGS | MOLECULAR LAB | GENETIC TESTING, EXCEPT FOR BRCA | 11/2/2024 |
| 0483T | TMVI PERCUTANEOUS APPROACH | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 9/13/2025 |
| 0485U | ONC SOL TUM CFDNA&RNA NGS GM | MOLECULAR LAB | BIOMARKER TESTING | 11/2/2024 |
| 0487U | ONC SOL TUM CFCDNA TGSAP 84 | MOLECULAR LAB | BIOMARKER TESTING | 11/2/2024 |
| 0488U | OB FETAL AG NIPT CFCDNA ALYS | MOLECULAR LAB | GENETIC TESTING, EXCEPT FOR BRCA | 11/2/2024 |
| 0493U | TRNSPL MED QUAN DD-CFDNA NGS | TRANSPLANT | TRANSPLANT | 8/20/2025 |
| 0496U | ONC CLRCT CFCDNA 8/7 GENES | MOLECULAR LAB | BIOMARKER TESTING | 11/2/2024 |
| 0499U | ONC CLRCT&LNG DNA NGS 8GENES | MOLECULAR LAB | BIOMARKER TESTING | 11/2/2024 |
| 0500U | AUTOINFLAM DS VEXAS SYND DNA | MOLECULAR LAB | GENETIC TESTING, EXCEPT FOR BRCA | 11/2/2024 |
| 0501U | ONC CLRC BLD QUAN MEAS CFCDNA | MOLECULAR LAB | BIOMARKER TESTING | 11/2/2024 |
| 0506U | GI BARRETT'S ESOPHGL CELL 89 | MOLECULAR LAB | GENETIC TESTING, EXCEPT FOR BRCA | 11/2/2024 |
| 0507U | ONC OVR DNA WHOLE GEN W/5HMC | MOLECULAR LAB | BIOMARKER TESTING | 11/2/2024 |
| 0523U | ONC SOLTUM DNA NGS SNV 22GEN | MOLECULAR LAB | BIOMARKER TESTING | 12/31/2024 |
| 0529U | HEM VTE SNP F2&F5 GEN LEIDEN | MOLECULAR LAB | GENETIC TESTING, EXCEPT FOR BRCA | 12/31/2024 |
| 0530U | ONC PAN-SOL TUM CTDNA 77 GEN | MOLECULAR LAB | BIOMARKER TESTING | 12/31/2024 |
| 0532U | RARE DS WHLGEN&MITOCHDRL DNA | MOLECULAR LAB | GENETIC TESTING, EXCEPT FOR BRCA | 3/29/2025 |
| 0533U | RX METAB ADVRS GNOTYP 16GENS | MOLECULAR LAB | GENETIC TESTING, EXCEPT FOR BRCA | 3/29/2025 |
| 0534U | ONC PRST8 MIRNA SNP 32 VRNT | MOLECULAR LAB | BIOMARKER TESTING | 3/29/2025 |
| 0537U | ONC CLRCT CA CFCDNA >2500 DMR | MOLECULAR LAB | BIOMARKER TESTING | 3/29/2025 |
| 0538U | ONC SOL TUM NGTS FFPE 600GEN | MOLECULAR LAB | BIOMARKER TESTING | 3/29/2025 |
| 0539U | ONC SOL TUMOR CFCDNA 152GEN | MOLECULAR LAB | BIOMARKER TESTING | 3/29/2025 |
| 0540U | TRNSPLJ MED QUAN DD-CFDNA | TRANSPLANT | TRANSPLANT | 3/29/2025 |
| 0543U | ONC SOL TUM NGS DNA 517 GENS | MOLECULAR LAB | BIOMARKER TESTING | 3/29/2025 |
| 0544U | NEFRO TRNSP MNTR 48VRNT DPCR | TRANSPLANT | TRANSPLANT | 3/29/2025 |
| 0549U | ONC URTHL DNA MTHYLTD RT PCR | MOLECULAR LAB | BIOMARKER TESTING | 3/29/2025 |
| 0552U | REPR MED PGA GDO TE BX LOCUS | MOLECULAR LAB | GENETIC TESTING, EXCEPT FOR BRCA | 6/28/2025 |
| 0553U | REPR MED PGA EMBRY TE STRUX | MOLECULAR LAB | GENETIC TESTING, EXCEPT FOR BRCA | 6/28/2025 |
| 0554U | REPR MED PGA 24CHRM TE BX QC | MOLECULAR LAB | GENETIC TESTING, EXCEPT FOR BRCA | 6/28/2025 |
| 0555U | REPR MED PGA EMBRYONIC TE QC | MOLECULAR LAB | GENETIC TESTING, EXCEPT FOR BRCA | 6/28/2025 |
| 0560U | ONC MRD GSA CFCDNA BASELINE | MOLECULAR LAB | BIOMARKER TESTING | 6/28/2025 |
| 0561U | ONC MRD GSA CFCDNA SUBSEQUENT | MOLECULAR LAB | BIOMARKER TESTING | 6/28/2025 |
| 0562U | ONC SOL TUM TGS 33GENS SNVS | MOLECULAR LAB | BIOMARKER TESTING | 6/28/2025 |
| 0565U | ONC HCC NGS DETC 6626EPICALT | MOLECULAR LAB | BIOMARKER TESTING | 6/28/2025 |
| 0566U | ONC LNG QPCR-BSD ALYS 13DMRS | MOLECULAR LAB | BIOMARKER TESTING | 6/28/2025 |
| 0567U | RARE DS WHL GEN SEQ SRS&LRS | MOLECULAR LAB | GENETIC TESTING, EXCEPT FOR BRCA | 6/28/2025 |
| 0569U | ONC SOL TUM NGS TMM>2000DMR | MOLECULAR LAB | BIOMARKER TESTING | 6/28/2025 |

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| 0571T | INSERTION OR REPLACEMENT OF IMPLANTABLE CARDIOVERTER-DEFIBRILLATOR SYSTEM WITH SUBSTERNAL ELECTRODE(S), INCLUDING ALL IMAGING GUIDANCE AND ELECTROPHYSIOLOGICAL EVALUATION (INCLUDES DEFIBRILLATION THRESHOLD EVALUATION, INDUCTION OF ARRHYTHMIA, EVALUATION OF SENSING FOR ARRHYTHMIA TERMINATION, AND PROGRAMMING OR REPROGRAMMING OF SENSING OR THERAPEUTIC PARAMETERS), WHEN PERFORMED | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 10/18/2025 |
| 0571U | ONC SOL TUM DNA80&RNA10G NGS | MOLECULAR LAB | BIOMARKER TESTING | 6/28/2025 |
| 0572U | ONC PRS18 HTL QFISH WHL BLD | MOLECULAR LAB | BIOMARKER TESTING | 6/28/2025 |
| 0575U | TRNSPLJ MED LAR RTPCR 4GENES | TRANSPLANT | TRANSPLANT | 10/18/2025 |
| 0576U | TRNSPLJ MED LAR QUAN DDCFDNA | TRANSPLANT | TRANSPLANT | 10/18/2025 |
| 0578U | ONC CUTAN MLN RNA QPCR 10GEN | MOLECULAR LAB | BIOMARKER TESTING | 10/18/2025 |
| 0581U | BBRGDRFERI ANTB DETC 24RPRIN | TRANSPLANT | TRANSPLANT | 10/18/2025 |
| 0582U | RARE DS RPD WHLGEN DNA VRNTS | MOLECULAR LAB | GENETIC TESTING, EXCEPT FOR BRCA | 10/18/2025 |
| 0583U | RARE DS RPD WHLGEN CMPTR DNA | MOLECULAR LAB | GENETIC TESTING, EXCEPT FOR BRCA | 10/18/2025 |
| 0584T | PERQ ISLET CELL TRANSPLANT | TRANSPLANT | TRANSPLANT | 11/4/2019 |
| 0585T | LAPS ISLET CELL TRANSPLANT | TRANSPLANT | TRANSPLANT | 11/4/2019 |
| 0585U | TGSAP SO NEO CFDNA 521 GENES | MOLECULAR LAB | GENETIC TESTING, EXCEPT FOR BRCA | 10/18/2025 |
| 0586T | OPEN ISLET CELL TRANSPLANT | TRANSPLANT | TRANSPLANT | 11/4/2019 |
| 0586U | ONC MRNA GEN XPRSN 216 GENES | MOLECULAR LAB | BIOMARKER TESTING | 10/18/2025 |
| 0592U | ONC HL NEO DNA TGS 417 GENES | MOLECULAR LAB | BIOMARKER TESTING | 10/18/2025 |
| 0597U | ONC BREAST RNA XPRSN 329GENS | MOLECULAR LAB | BIOMARKER TESTING | 10/18/2025 |
| 0600T | ABLATION, IRREVERSIBLE ELECTROPORATION; 1 OR MORE TUMORS PER ORGAN, INCLUDING IMAGING GUIDANCE, WHEN PERFORMED, PERCUTANEOUS | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 1/1/2026 |
| 0601T | ABLATION, IRREVERSIBLE ELECTROPORATION; 1 OR MORE TUMORS, INCLUDING FLUOROSCOPIC AND ULTRASOUND GUIDANCE, WHEN PERFORMED, OPEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 1/1/2026 |
| 0602U | ENDOCRIN DM INS GEN MTHYLTN | MOLECULAR LAB | GENETIC TESTING, EXCEPT FOR BRCA | 12/31/2025 |
| 0609T | ONCOLOGY (SOLID TUMOR AS INDICATED BY THE LABEL), SOMATIC MUTATION ANALYSIS OF BRCA1 (BRCA1, DNA REPAIR ASSOCIATED), BRCA2 (BRCA2, DNA REPAIR ASSOCIATED) AND ANALYSIS OF HOMOLOGOUS RECOMBINATION DEFICIENCY PATHWAYS, DNA, FORMALIN-FIXED PARAFFIN-EMBEDDED T | DIAGNOSTIC RADIOLOGY | BIOMARKER TESTING | 7/11/2020 |
| 0610T | ONCOLOGY (BREAST CANCER), DNA, PIK3CA (PHOSPHATIDYLINOSITOL-4,5-BISPHOSPHATE 3- KINASE CATALYTIC SUBUNIT ALPHA) GENE ANALYSIS OF 11 GENE VARIANTS UTILIZING PLASMA, REPORTED AS PIK3CA GENE MUTATION STATUS | DIAGNOSTIC RADIOLOGY | BIOMARKER TESTING | 7/11/2020 |
| 0611T | ONCOLOGY (NON-SMALL CELL LUNG CANCER), CELL FREE DNA, TARGETED SEQUENCE ANALYSIS OF 23 GENES (SINGLE NUCLEOTIDE VARIATIONS, INSERTIONS AND DELETIONS, FUSIONS WITHOUT PRIOR KNOWLEDGE OF PARTNER/BREAKPOINT, COPY NUMBER VARIATIONS), WITH REPORT OF SIGNIFICAN | DIAGNOSTIC RADIOLOGY | BIOMARKER TESTING | 7/11/2020 |
| 0611U | ONC LVR ALYS >1000 MR CFDNA | MOLECULAR LAB | BIOMARKER TESTING | 12/31/2025 |
| 0612T | OSTEOTOMY, HUMERUS, WITH INSERTION OF AN EXTERNALLY CONTROLLED INTRAMEDULLARY LENGTHENING DEVICE, INCLUDING INTRAOPERATIVE IMAGING, INITIAL AND SUBSEQUENT ALIGNMENT ASSESSMENTS, COMPUTATIONS OF ADJUSTMENT SCHEDULES, AND MANAGEMENT OF THE INTRAMEDULLARY LE | DIAGNOSTIC RADIOLOGY | Diagnostic Testing and Radiology services | 7/11/2020 |
| 0612U | ONC LVR ALYS >1000 MR CFDNA | MOLECULAR LAB | BIOMARKER TESTING | 12/31/2025 |
| 0613U | ONC UC DNA MTHYLTN&MUT 6BMRK | MOLECULAR LAB | BIOMARKER TESTING | 12/31/2025 |
| 0623T | AUTO QUANTIFICATION C PLAQUE | DIAGNOSTIC RADIOLOGY | Diagnostic Testing and Radiology services | 12/18/2020 |
| 0624T | AUTO QUAN C PLAQ DATA PREP | DIAGNOSTIC RADIOLOGY | Diagnostic Testing and Radiology services | 12/18/2020 |
| 0625T | AUTO QUAN C PLAQ CPTP ALYS | DIAGNOSTIC RADIOLOGY | Diagnostic Testing and Radiology services | 12/18/2020 |
| 0626T | AUTO QUAN C PLAQ I&R | DIAGNOSTIC RADIOLOGY | Diagnostic Testing and Radiology services | 12/18/2020 |
| 0627T | PERQ NJX ALGC FLUOR LMBR 1ST | SPINAL PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 0628T | PERQ NJX ALGC FLUOR LMBR EA | SPINAL PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 0629T | PERQ NJX ALGC CT LMBR 1ST | SPINAL PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 0631U | ONCOLOGY (SOLID TUMOR), DNA, SEQUENCE ANALYSIS OF 15 GENES INCLUDING BRCA1 AND BRCA2 FOR IDENTIFICATION OF CLONAL HEMATOPOIESIS, BLOOD, REPORTED AS TUMOR-DERIVED OR NONTUMOR-DERIVED | Molecular Lab | GENETIC TESTING, EXCEPT FOR BRCA | 7/1/2026 |

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| 0632U | RED BLOOD CELL ANTIGEN (FETAL RHD GENE ANALYSIS), MULTIPLEX POLYMERASE CHAIN REACTION (PCR) AND NEXT-GENERATION SEQUENCING (NGS) OF CIRCULATING CELL-FREE DNA (CFDNA), PLASMA FROM PREGNANT INDIVIDUALS KNOWN TO BE RHD NEGATIVE, REPORTED AS DETECTED OR NOT DETECTED | Molecular Lab | GENETIC TESTING, EXCEPT FOR BRCA | 7/1/2026 |
| 0633T | CT BREAST W/3D UNI C- | DIAGNOSTIC RADIOLOGY | COMPLEX IMAGING | 12/18/2020 |
| 0634T | CT BREAST W/3D UNI C+ | DIAGNOSTIC RADIOLOGY | COMPLEX IMAGING | 12/18/2020 |
| 0634U | ONCOLOGY (BREAST CANCER), CELL-FREE DNA (CFDNA), EVALUATION OF 11 ESR1 VARIANTS (E380Q, S463P, L536R, Y537C, Y537N, Y537S, D538G, V422DEL, L536H, L536P, Y537D) USING DROPLET DIGITAL PCR (DDPCR), PLASMA, REPORTED AS POSITIVE OR NEGATIVE | Molecular Lab | GENETIC TESTING, EXCEPT FOR BRCA | 7/1/2026 |
| 0635T | CT BREAST W/3D UNI C-/C+ | DIAGNOSTIC RADIOLOGY | COMPLEX IMAGING | 12/18/2020 |
| 0636T | CT BREAST W/3D BI C- | DIAGNOSTIC RADIOLOGY | COMPLEX IMAGING | 12/18/2020 |
| 0637T | CT BREAST W/3D BI C+ | DIAGNOSTIC RADIOLOGY | COMPLEX IMAGING | 12/18/2020 |
| 0638T | CT BREAST W/3D BI C-/C+ | DIAGNOSTIC RADIOLOGY | COMPLEX IMAGING | 12/18/2020 |
| 0641U | ONCOLOGY (MINIMAL RESIDUAL DISEASE [MRD]), TUMOR DNA, NEXT-GENERATION SEQUENCING (NGS), USING FORMALIN-FIXED PARAFFIN-EMBEDDED (FFPE) TISSUE AND BLOOD SAMPLES, INITIAL (BASELINE) ASSESSMENT | Molecular Lab | GENETIC TESTING, EXCEPT FOR BRCA | 7/1/2026 |
| 0644U | ONCOLOGY (LEUKEMIA), MINIMAL RESIDUAL DISEASE (MRD) DETECTION FOR REARRANGEMENTS, BLOOD OR BONE MARROW, PERSONALIZED ASSAY DESIGN AND BASELINE QUANTIFICATION | Molecular Lab | GENETIC TESTING, EXCEPT FOR BRCA | 7/1/2026 |
| 0645U | ONCOLOGY (LEUKEMIA), MINIMAL RESIDUAL DISEASE (MRD) DETECTION FOR REARRANGEMENTS, BASED ON DIGITAL PCR, BLOOD OR BONE MARROW, REPORTED AS NOT DETECTED OR DETECTED WITH ESTIMATED ABUNDANCE | Molecular Lab | GENETIC TESTING, EXCEPT FOR BRCA | 7/1/2026 |
| 0646U | ONCOLOGY (MOLECULAR RESIDUAL DISEASE), WHOLE GENOME SEQUENCE ANALYSIS, CELL-FREE DNA, WHOLE BLOOD, AND FORMALIN-FIXED PARAFFIN EMBEDDED (FFPE) TUMOR TISSUE DNA, BASELINE ASSESSMENT | Molecular Lab | GENETIC TESTING, EXCEPT FOR BRCA | 7/1/2026 |
| 0647U | ONCOLOGY (MOLECULAR RESIDUAL DISEASE), WHOLE GENOME SEQUENCE ANALYSIS, CELL-FREE DNA (CFDNA), WHOLE BLOOD, ASSESSMENT UTILIZING PATIENT-SPECIFIC TUMOR INFORMATION, REPORTED AS NEGATIVE OR PERCENT CIRCULATING TUMOR DNA (CTDNA) | Molecular Lab | GENETIC TESTING, EXCEPT FOR BRCA | 7/1/2026 |
| 0648T | QUAN MR ALYS TISS W/O MRI | DIAGNOSTIC RADIOLOGY | COMPLEX IMAGING | 6/26/2021 |
| 0649T | QUAN MR ALYS TISS W/MRI | DIAGNOSTIC RADIOLOGY | COMPLEX IMAGING | 6/26/2021 |
| 0656T | VRT BDY TETHERING ANT <7 SEG | SPINAL PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 0657T | VRT BDY TETHERING ANT 8+ SEG | SPINAL PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 0657U | RARE DISEASES (CONSTITUTIONAL/HERITABLE DISORDERS), RAPID WHOLE GENOME SEQUENCE ANALYSIS OF COMPARATOR NUCLEAR AND MITOCHONDRIAL DNA BY NEXT GENERATION SEQUENCING (NGS), USING BLOOD OR BUCCAL SAMPLE, RELEVANT VARIANTS REPORTED WITH PROBAND RESULTS | Molecular Lab | GENETIC TESTING, EXCEPT FOR BRCA | 7/1/2026 |
| 0658U | RARE DISEASES (CONSTITUTIONAL/HERITABLE DISORDERS), RAPID WHOLE GENOME SEQUENCE ANALYSIS OF NUCLEAR AND MITOCHONDRIAL DNA BY NEXT-GENERATION SEQUENCING (NGS) FOR SINGLE-NUCLEOTIDE VARIANTS (SNVS), INSERTIONS/DELETIONS, COPY NUMBER VARIANTS, UNIPARENTAL DISOMY, AND REPEAT EXPANSIONS, USING BLOOD OR BUCCAL SAMPLE, IDENTIFICATION AND CATEGORIZATION OF GENETIC VARIANTS | Molecular Lab | GENETIC TESTING, EXCEPT FOR BRCA | 7/1/2026 |
| 0659U | RARE DISEASES (CONSTITUTIONAL/HERITABLE DISORDERS), ULTRARAPID WHOLE GENOME SEQUENCE ANALYSIS OF NUCLEAR AND MITOCHONDRIAL DNA BY NEXT GENERATION SEQUENCING (NGS) FOR SINGLE-NUCLEOTIDE VARIANTS (SNVS), INSERTIONS/DELETIONS, COPY NUMBER VARIANTS, UNIPARENTAL DISOMY, AND REPEAT EXPANSIONS, USING BLOOD OR BUCCAL SAMPLE, IDENTIFICATION AND CATEGORIZATION OF GENETIC VARIANTS | Molecular Lab | GENETIC TESTING, EXCEPT FOR BRCA | 7/1/2026 |
| 0664T | DON HYSTERECTOMY OPEN CDVR | TRANSPLANT | TRANSPLANT | 6/26/2021 |
| 0665T | DON HYSTERECTOMY OPEN LIV | TRANSPLANT | TRANSPLANT | 6/26/2021 |
| 0666T | DON HYSTERECTOMY LAPS LIV | TRANSPLANT | TRANSPLANT | 6/26/2021 |
| 0667T | DON HYSTERECTOMY RCP UTER | TRANSPLANT | TRANSPLANT | 6/26/2021 |
| 0668T | DON HYSTERECTOMY RCP UTER | TRANSPLANT | TRANSPLANT | 6/26/2021 |

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| 0669T | BKBENCH RCNSTJ DON UTER VEN | TRANSPLANT | TRANSPLANT | 6/26/2021 |
| 0670T | BKBENCH RCNSTJ DON UTER ARTL | TRANSPLANT | TRANSPLANT | 6/26/2021 |
| 0671T | INSERTION OF ANTERIOR SEGMENT AQUEOUS DRAINAGE DEVICE INTO THE TRABECULAR MESHWORK, WITHOUT EXTERNAL RESERVOIR, AND WITHOUT CONCOMITANT CATARACT REMOVAL, ONE OR MORE | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 2/26/2022 |
| 0697T | QUAN MR TIS WO MRI MLT ORGN | DIAGNOSTIC RADIOLOGY | COMPLEX IMAGING | 12/30/2021 |
| 0698T | QUAN MR TISS W/MRI MLT ORGN | DIAGNOSTIC RADIOLOGY | COMPLEX IMAGING | 12/30/2021 |
| 0707T | INJECTION(S), BONE-SUBSTITUTE MATERIAL (EG, CALCIUM PHOSPHATE) INTO SUBCHONDRAL BONE DEFECT (IE, BONE MARROW LESION, BONE BRUISE, STRESS INJURY, MICROTRABECULAR FRACTURE), INCLUDING IMAGING GUIDANCE AND ARTHROSCOPIC ASSISTANCE FOR JOINT VISUALIZATION | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 1/1/2026 |
| 0710T | N-INVAS ARTL PLAQ ALYS | DIAGNOSTIC RADIOLOGY | Diagnostic Testing and Radiology services | 12/30/2021 |
| 0711T | N-NVS ARTL PLAQ ALYS DAT PRP | DIAGNOSTIC RADIOLOGY | Diagnostic Testing and Radiology services | 12/30/2021 |
| 0712T | N-NVS ARTL PLAQ ALYS QUAN | DIAGNOSTIC RADIOLOGY | Diagnostic Testing and Radiology services | 12/30/2021 |
| 0713T | N-NVS ARTL PLAQ ALYS RVW I&R | DIAGNOSTIC RADIOLOGY | Diagnostic Testing and Radiology services | 12/30/2021 |
| 0717T | ADRC THER PRTL RC TEAR | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 1/1/2026 |
| 0718T | ADRC THER PRTL RC TEAR NJX | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 1/1/2026 |
| 0720T | PRQ ELC NRV STIM CN WO IMPLT | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 6/18/2022 |
| 0745T | CAR ABLT RAD ARR N-INVAS LOC | THERAPEUTIC RADIOLOGY | Diagnostic Testing and Radiology services | 12/29/2022 |
| 0746T | CAR ABLT RAD ARR CNV LOC MAP | THERAPEUTIC RADIOLOGY | Diagnostic Testing and Radiology services | 12/29/2022 |
| 0747T | CAR ABLT RAD ARRHYT DLVR RAD | THERAPEUTIC RADIOLOGY | Diagnostic Testing and Radiology services | 12/29/2022 |
| 0805T | TRANSCATHETER SUPERIOR AND INFERIOR VENA CAVA PROSTHETIC VALVE IMPLANTATION (IE, CAVAL VALVE IMPLANTATION [CAVI]); PERCUTANEOUS FEMORAL VEIN APPROACH | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 7/1/2023 |
| 0806T | TRANSCATHETER SUPERIOR AND INFERIOR VENA CAVA PROSTHETIC VALVE IMPLANTATION (IE, CAVAL VALVE IMPLANTATION [CAVI]); OPEN FEMORAL VEIN APPROACH | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 7/1/2023 |
| 0807T | PULMONARY TISSUE VENTILATION ANALYSIS USING SOFTWARE-BASED PROCESSING OF DATA FROM SEPARATELY CAPTURED CINEFLUOROGRAPH IMAGES | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 7/1/2023 |
| 0808T | PULMONARY TISSUE VENTILATION ANALYSIS USING SOFTWARE-BASED PROCESSING OF DATA FROM SEPARATELY CAPTURED CINEFLUOROGRAPH IMAGES | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 7/1/2023 |
| 0813T | ESOPHAGOGASTRODUODENOSCOPY, FLEXIBLE, TRANSORAL, WITH VOLUME ADJUSTMENT OF INTRAGASTRIC BARIATRIC BALLOON | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 9/13/2025 |
| 0865T | QUANTITATIVE MAGNETIC RESONANCE IMAGE (MRI) ANALYSIS OF THE BRAIN WITH COMPARISON TO PRIOR MAGNETIC RESONANCE (MR) STUDY (IES), INCLUDING LESION IDENTIFICATION, CHARACTERIZATION, AND QUANTIFICATION, WITH BRAIN VOLUME(S) QUANTIFICATION AND/OR SEVERITY SCORE | DIAGNOSTIC RADIOLOGY | COMPLEX IMAGING | 12/28/2023 |
| 0866T | QUANTITATIVE MAGNETIC RESONANCE IMAGE (MRI) ANALYSIS OF THE BRAIN WITH COMPARISON TO PRIOR MAGNETIC RESONANCE (MR) STUDY (IES), INCLUDING LESION DETECTION, CHARACTERIZATION, AND QUANTIFICATION, WITH BRAIN VOLUME(S) QUANTIFICATION AND/OR SEVERITY SCORE, WHE | DIAGNOSTIC RADIOLOGY | COMPLEX IMAGING | 12/28/2023 |
| 0869T | INJECTION(S), BONE-SUBSTITUTE MATERIAL FOR BONE AND/OR SOFT TISSUE HARDWARE FIXATION AUGMENTATION, INCLUDING INTRAOPERATIVE IMAGING GUIDANCE, WHEN PERFORMED(DO NOT REPORT 0869T IN CONJUNCTION WITH 0707T) | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 1/1/2026 |
| 0899T | NONINVASIVE DETERMINATION OF ABSOLUTE QUANTITATION OF MYOCARDIAL BLOOD FLOW (AQMBF), DERIVED FROM AUGMENTATIVE ALGORITHMIC ANALYSIS OF THE DATASET ACQUIRED VIA CONTRAST CARDIAC MAGNETIC RESONANCE (CMR), PHARMACOLOGIC STRESS, WITH INTERPRETATION AND REPORT | DIAGNOSTIC RADIOLOGY | COMPLEX IMAGING | 6/29/2024 |
| 0900T | NONINVASIVE ESTIMATE OF ABSOLUTE QUANTITATION OF MYOCARDIAL BLOOD FLOW (AQMBF), DERIVED FROM ASSISTIVE ALGORITHMIC ANALYSIS OF THE DATASET ACQUIRED VIA CONTRAST CARDIAC MAGNETIC RESONANCE (CMR), PHARMACOLOGIC STRESS, WITH INTERPRETATION AND REPORT BY A PH | DIAGNOSTIC RADIOLOGY | COMPLEX IMAGING | 6/29/2024 |

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| 0908T | OPN IMP INT NSTM SYS VGS NRV | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 12/31/2024 |
| 0933T | TRANSCATHETER IMPLANTATION OF WIRELESS LEFT ATRIAL PRESSURE SENSOR FOR LONG-TERM LEFT ATRIAL PRESSURE MONITORING, INCLUDING SENSOR CALIBRATION AND DEPLOYMENT, RIGHT HEART CATHETERIZATION, TRANSSEPTAL PUNCTURE, IMAGING GUIDANCE, AND RADIOLOGICAL SUPERVISION AND INTERPRETATION | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 12/31/2024 |
| 0947T | MAGNETIC RESONANCE IMAGE GUIDED LOW INTENSITY FOCUSED ULTRASOUND (MRGFUS), STEREOTACTIC BLOOD-BRAIN BARRIER DISRUPTION USING MICROBUBBLE RESONATORS TO INCREASE THE CONCENTRATION OF BLOOD-BASED BIOMARKERS OF TARGET, INTRACRANIAL, INCLUDING STEREOTACTIC NAVIGATION AND FRAME PLACEMENT, WHEN PERFORMED | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 1/1/2026 |
| 0950T | ABLTJ B9 PRST8 TISSUE HIFU | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 6/28/2025 |
| 0951T | TOTALLY IMPLANTABLE ACTIVE MIDDLE EAR HEARING IMPLANT; INITIAL PLACEMENT, INCLUDING MASTOIDECTOMY, PLACEMENT OF AND ATTACHMENT TO SOUND PROCESSOR | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 6/28/2025 |
| 0956T | PARTIAL CRANIECTOMY, CHANNEL CREATION, AND TUNNELING OF ELECTRODE FOR SUB-SCALP IMPLANTATION OF AN ELECTRODE ARRAY, RECEIVER, AND TELEMETRY UNIT FOR CONTINUOUS BILATERAL ELECTROENCEPHALOGRAPHY MONITORING SYSTEM, INCLUDING IMAGING GUIDANCE | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 6/28/2025 |
| 0957T | REVISION OF SUB-SCALP IMPLANTED ELECTRODE ARRAY, RECEIVER, AND TELEMETRY UNIT FOR ELECTRODE, WHEN REQUIRED, INCLUDING IMAGING GUIDANCE | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 6/28/2025 |
| 0959T | REMOVAL OR REPLACEMENT OF MAGNET FROM COIL ASSEMBLY THAT IS CONNECTED TO CONTINUOUS BILATERAL ELECTROENCEPHALOGRAPHY MONITORING SYSTEM, INCLUDING IMAGING GUIDANCE | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 6/28/2025 |
| 0960T | REPLACEMENT OF SUB-SCALP IMPLANTED ELECTRODE ARRAY, RECEIVER, AND TELEMETRY UNIT WITH TUNNELING OF ELECTRODE FOR CONTINUOUS BILATERAL ELECTROENCEPHALOGRAPHY MONITORING SYSTEM, INCLUDING IMAGING GUIDANCE | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 6/28/2025 |
| 0967T | TRANSANAL INSERTION OF ENDOLUMINAL TEMPORARY COLORECTAL ANASTOMOSIS PROTECTION DEVICE, INCLUDING VACUUM ANCHORING COMPONENT AND FLEXIBLE SHEATH CONNECTED TO EXTERNAL VACUUM SOURCE AND MONITORING SYSTEM | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 6/28/2025 |
| 0968T | INSERTION OR REPLACEMENT OF EPICRANIAL NEUROSTIMULATOR SYSTEM, INCLUDING ELECTRODE ARRAY AND PULSE GENERATOR, WITH CONNECTION TO ELECTRODE ARRAY | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 6/28/2025 |
| 0978T | SUBMUCOSAL CRYOLYSIS THERAPY; SOFT PALATE, BASE OF TONGUE, AND LINGUAL TONSIL | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 6/28/2025 |
| 0979T | SUBMUCOSAL CRYOLYSIS THERAPY; SOFT PALATE ONLY | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 6/28/2025 |
| 0980T | SUBMUCOSAL CRYOLYSIS THERAPY; BASE OF TONGUE AND LINGUAL TONSIL ONLY | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 6/28/2025 |
| 0981T | TRANSCATHETER IMPLANTATION OF WIRELESS INFERIOR VENA CAVA SENSOR FOR LONG-TERM HEMODYNAMIC MONITORING, INCLUDING DEPLOYMENT OF THE SENSOR, RADIOLOGICAL SUPERVISION AND INTERPRETATION, RIGHT HEART CATHETERIZATION, AND INFERIOR VENA CAVA VENOGRAPHY, WHEN PERFORMED | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 1/1/2026 |
| 0990T | TRNCRV INST BIOD HYDRGL MTRL | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 12/31/2025 |
| 0991T | CYSTO LO-NRG LIHTRP&MCRSPHR | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 12/31/2025 |
| 0994T | EVASC DLVR A-WAL STBL RX PRQ | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 12/31/2025 |

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| 0995T | EVASC DLVR A-WAL STBL RX OPN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 12/31/2025 |
| 0999T | AUTOL MUSC CELL THERAPY HRVG | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 12/31/2025 |
| 1000T | AUTOL MUSC CELL THERAPY ADMN | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 12/31/2025 |
| 1001T | AUTOL MUSC CELL THERAPY NJX | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 12/31/2025 |
| 1003T | ARTHRP 1ST CRP/MTCRPL PROSTC | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 12/31/2025 |
| 1008T | REM MNTR S-SCLP EEG SYS SETUP | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 12/31/2025 |
| 1009T | REM MNTR S-SCLP CONT EEG SYS | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 12/31/2025 |
| 1019T | LYMPHOVENOUS BYPASS PER XTR | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 12/31/2025 |
| 1025T | ALT ELEC FLD DOS&DLV SIM MDL | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 12/31/2025 |
| 1037T | HISTOTRIPSY (IE, NON-THERMAL ABLATION VIA ACOUSTIC ENERGY DELIVERY) OF MALIGNANT PANCREATIC TISSUE, INCLUDING IMAGING GUIDANC | Molecular Lab | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 7/1/2026 |
| 1038T | AUTOLOGOUS MUSCLE CELL THERAPY, INJECTION(S) OF MUSCLE PROGENITOR CELLS INTO THE TONGUE, INCLUDING ESOPHAGOSCOPY, WHEN PERFORMED | Molecular Lab | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 7/1/2026 |
| 1039T | CONNECTOMIC ANALYSIS OF PREVIOUSLY PERFORMED MULTI-MODAL BRAIN MAGNETIC RESONANCE IMAGING (MRI) REQUIRING PHYSICIAN OR OTHER QUALIFIED HEALTH CARE PROFESSIONAL (QHP) ANALYSIS OF SOFTWARE- AND PHYSICIAN GENERATED STRUCTURAL AND FUNCTIONAL MAPS FOR INTEGRATION OF CORTICAL GREY MATTER CORRELATION BASED ON RESTING-STATE FUNCTIONAL MRI AND MAPPING OF WHITE MATTER CONNECTIVITY BASED ON DIFFUSION-WEIGHTED MRI RELATIVE TO BRAIN REGIONS, WITH PHYSICIAN OR OTHER QHP INTERPRETATION AND REPORT | Molecular Lab | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 7/1/2026 |
| 1050T | INSERTION, SUBCUTANEOUS HEART FAILURE DECOMPENSATION MONITOR, CONTAINING SENSORS THAT MEASURE, AT A MINIMUM, HEART RATE, IMPEDANCE, RESPIRATION RATE, PHYSICAL ACTIVITY, HEART SOUNDS | Molecular Lab | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 7/1/2026 |
| 11950 | THERAPY FOR CONTOUR DEFE | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 1/1/2026 |
| 11951 | SUBCUTANEOUS INJECTION OF FILLING MATERIAL (E.G., COLLAGEN); 1.1 TO 5.0 CC | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 11952 | SUBCUTANEOUS INJECTION OF FILLING MATERIAL (E.G., COLLAGEN); 5.1 TO 10.0 CC | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 11954 | SUBCUTANEOUS INJECTION OF FILLING MATERIAL (E.G., COLLAGEN); OVER 10.0 CC | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 11980 | IMPLANT HORMONE PELLET(S) | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 10/18/2025 |
| 15011 | HRV SKN CLL SSP AGRFT 1ST 25 | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 12/31/2024 |
| 15012 | HRV SKN CLL SSP AGRFT EA ADD | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 12/31/2024 |
| 15013 | PREPJ SKN CLL SSP AGRFT 1ST | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 12/31/2024 |
| 15014 | PREPJ SKN CLL SSP AGRFT EA | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 12/31/2024 |
| 15015 | APP SKN CL SSP AGRFT T/A/L 1 | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 12/31/2024 |
| 15016 | APP SKN CL SSP AGRFT T/A/L EA | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 12/31/2024 |
| 15017 | APP SKN CLL SSP F/N/G/HF 1ST | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 12/31/2024 |
| 15018 | APP SKN CLL SSP F/N/G/HF EA | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 12/31/2024 |

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| 15150 | CULT SKIN GRFT T/ARM/LEG | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 12/4/2021 |
| 15151 | CULT SKIN GRFT T/A/L ADD | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 12/4/2021 |
| 15152 | CULT SKIN GRAFT T/A/L +% | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 12/4/2021 |
| 15155 | CULT SKIN GRAFT F/N/HF/G | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 12/4/2021 |
| 15156 | CULT SKIN GRFT F/N/HFG A | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 12/4/2021 |
| 15157 | CULT EPIDERM GRFT F/N/HFG +% | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 12/4/2021 |
| 15271 | SKIN SUB GRAFT TRNK/ARM/ | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 9/13/2025 |
| 15272 | SKIN SUB GRAFT T/A/L ADD | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 1/1/2026 |
| 15273 | SKIN SUB GRFT T/ARM/LG | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 1/1/2026 |
| 15274 | SKN SUB GRFT T/A/L CHILD | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 1/1/2026 |
| 15275 | SKN SUB GRAFT FACE/NK/HF | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 9/13/2025 |
| 15276 | SKN SUB GRAFT F/N/HF/G A | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 1/1/2026 |
| 15277 | SKN SUB GRFT F/N/HF/G CH | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 1/1/2026 |
| 15278 | SKN SUB GRFT F/N/HF/G CH | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 1/1/2026 |
| 15769 | GRAFTING OF AUTOLOGOUS SOFT TISSUE, OTHER, HARVESTED BY DIRECT EXCISION (EG, FAT, DERMIS, FASCIA) | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 4/11/2020 |
| 15771 | GRAFTING OF AUTOLOGOUS FAT HARVESTED BY LIPOSUCTION TECHNIQUE TO TRUNK, BREASTS, SCALP, ARMS, AND/OR LEGS; 50 CC OR LESS INJECTATE | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 4/11/2020 |
| 15772 | GRAFTING OF AUTOLOGOUS FAT HARVESTED BY LIPOSUCTION TECHNIQUE TO TRUNK, BREASTS, SCALP, ARMS, AND/OR LEGS; EACH ADDITIONAL 50 CC INJECTATE, OR PART THEREOF (LIST SEPARATELY IN ADDITION TO CODE FOR PRIMARY PROCEDURE) | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 4/11/2020 |
| 15773 | GRAFTING OF AUTOLOGOUS FAT HARVESTED BY LIPOSUCTION TECHNIQUE TO FACE, EYELIDS, MOUTH, NECK, EARS, ORBITS, GENITALIA, HANDS, AND/OR FEET; 25 CC OR LESS INJECTATE | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 4/11/2020 |
| 15774 | GRAFTING OF AUTOLOGOUS FAT HARVESTED BY LIPOSUCTION TECHNIQUE TO FACE, EYELIDS, MOUTH, NECK, EARS, ORBITS, GENITALIA, HANDS, AND/OR FEET; EACH ADDITIONAL 25 CC INJECTATE, OR PART THEREOF (LIST SEPARATELY IN ADDITION TO CODE FOR PRIMARY PROCEDURE) | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 4/11/2020 |
| 15777 | ACELLULAR DERM MATRIX IM | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 1/1/2026 |
| 15778 | IMPLANTATION OF ABSORBABLE MESH OR OTHER PROSTHESIS FOR DELAYED CLOSURE OF DEFECT(S) (IE, EXTERNAL GENITALIA, PERINEUM, ABDOMINAL WALL) DUE TO SOFT TISSUE INFECTION OR TRAUMA | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 12/29/2022 |
| 15786 | ABRASION; SINGLE LESION (E.G., KERATOSIS, SCAR) | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 15787 | ABRASION; EACH ADDITIONAL FOUR LESIONS OR LESS(LIST SEPARATELY IN ADDITION TO CODE FOR PRIMARY PROCEDURE) | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 15820 | BLEPHAROPLASTY, LOWER EYELID | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 15821 | BLEPHAROPLASTY, LOWER EYELID WITH EXTENSIVE HERNIATED FAT PAD | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 15822 | BLEPHAROPLASTY, UPPER EYELID | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 15823 | BLEPHAROPLASTY, UPPER EYELID; WITH EXTENSIVE SKIN WEIGHTING DOWN LID | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |

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| 15824 | RHYTIDECTOMY, FOREHEAD | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 15825 | RHYTIDECTOMY; NECK WITH PLATYSMAL TIGHTENING (PLATYSMAL FLAP, P-FLAP) | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 15828 | RHYTIDECTOMY; CHEEK, CHIN, NECK | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 15829 | RHYTIDECTOMY; SUPERFICIAL MUSCULOAPONEUROTIC SYSTEM (SMAS) FLAP | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 15830 | EXCISION, EXCESSIVE SKIN AND SUBCUTANEOUS TISSUE (INCLUDES LIPECTOMY); ABDOMEN, INFRAUMBILICAL PANNICULECTOMY | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 15832 | EXCISION, EXCESSIVE SKIN AND SUBCUTANEOUS TISSUE (INCLUDING LIPECTOMY); THIGH | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 15833 | EXCISION, EXCESSIVE SKIN AND SUBCUTANEOUS TISSUE (INCLUDING LIPECTOMY); LEG | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 15834 | EXCISION, EXCESSIVE SKIN AND SUBCUTANEOUS TISSUE (INCLUDING LIPECTOMY); HIP | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 15835 | EXCISION, EXCESSIVE SKIN AND SUBCUTANEOUS TISSUE (INCLUDING LIPECTOMY); BUTTOCK | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 15836 | EXCISION, EXCESSIVE SKIN AND SUBCUTANEOUS TISSUE (INCLUDING LIPECTOMY); ARM | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 15837 | EXCISION, EXCESSIVE SKIN AND SUBCUTANEOUS TISSUE (INCLUDING LIPECTOMY); FOREARM OR HAND | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 15838 | EXCISION, EXCESSIVE SKIN AND SUBCUTANEOUS TISSUE (INCLUDING LIPECTOMY); SUBMENTAL FAT PAD | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 15839 | EXCISION, EXCESSIVE SKIN AND SUBCUTANEOUS TISSUE (INCLUDING LIPECTOMY); OTHER AREA | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 15847 | EXCISION, EXCESSIVE SKIN AND SUBCUTANEOUS TISSUE (INCLUDES LIPECTOMY), ABDOMEN (E.G., ABDOMINOPLASTY) (INCLUDES UMBILICAL TRANSPOSITION AND FASCIAL PPLICATION) (LIST SEPARATELY IN ADDITION TO CODE FOR PRIMARY PROCEDURE) | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 15876 | SUCTION ASSISTED LIPECTOMY, HEAD AND NECK | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 15877 | SUCTION ASSISTED LIPECTOMY; TRUNK | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 15878 | SUCTION ASSISTED LIPECTOMY; UPPER EXTREMITY | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 15879 | SUCTION ASSISTED LIPECTOMY; LOWER EXTREMITY | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 17106 | DESTRUCTION OF CUTANEOUS VASCULAR PROLIFERATIVE LESIONS (E.G. LASER TECHNIQUE); LESS THAN 10 SQ CM | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 17107 | DESTRUCTION OF CUTANEOUS VASCULAR PROLIFERATIVE LESIONS (E.G., LASER TECHNIQUE); 10.0 TO 50.0 SQ CM | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 17108 | DESTRUCTION OF CUTANEOUS VASCULAR PROLIFERATIVE LESIONS (E.G., LASER TECHNIQUE); OVER 50.0 SQ CM | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 17999 | SKIN TISSUE PROCEDURE | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 1/1/2026 |
| 19294 | PREP TUM CAV IORT PRTL MAST | THERAPEUTIC RADIOLOGY | OUTPATIENT SURGICAL PROCEDURES | 5/31/2025 |
| 19296 | PLACE PO BREAST CATH FOR | THERAPEUTIC RADIOLOGY | OUTPATIENT SURGICAL PROCEDURES | 5/31/2025 |
| 19297 | PLACE BREAST CATH FOR RA | THERAPEUTIC RADIOLOGY | OUTPATIENT SURGICAL PROCEDURES | 5/31/2025 |
| 19298 | PLACE BREAST RAD TUBE/CA | THERAPEUTIC RADIOLOGY | OUTPATIENT SURGICAL PROCEDURES | 5/31/2025 |
| 19300 | MASTECTOMY FOR GYNECOMASTIA | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 19316 | MASTOPEXY | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 19318 | REDUCTION MAMMAPLASTY | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 19325 | MAMMAPLASTY, AUGMENTATION; WITH PROSTHETIC IMPLANT | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 19328 | REMOVAL OF INTACT MAMMARY IMPLANT | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 19330 | REMOVAL OF MAMMARY IMPLANT MATERIAL | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 19340 | IMMEDIATE INSERTION OF BREAST PROSTHESIS FOLLOWING MASTOPEXY, MASTECTOMY OR IN RECONSTRUCTION | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 19342 | DELAYED INSERTION OF BREAST PROSTHESIS FOLLOWING MASTOPEXY, MASTECTOMY OR IN RECONSTRUCTION | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 19350 | NIPPLE/AREOLA RECONSTRUCTION | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 19355 | CORRECTION OF INVERTED NIPPLES | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |

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| 19357 | BREAST RECONSTRUCTION, IMMEDIATE OR DELAYED, WITH TISSUE EXPANDER, INCLUDING SUBSEQUENT EXPANSION | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 19370 | OPEN PERIPROSTHETIC CAPSULOTOMY, BREAST | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 19371 | PERIPROSTHETIC CAPSULECTOMY, BREAST | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 19380 | REVISION OF RECONSTRUCTED BREAST | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 19499 | BREAST SURGERY PROCEDURE | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 1/1/2026 |
| 20527 | INJ DUPLYTREN CORD W/ENZ | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 10/18/2025 |
| 20910 | REMOVE CARTILAGE FOR GRA | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 12/4/2021 |
| 20912 | REMOVE CARTILAGE FOR GRA | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 12/4/2021 |
| 20930 | SP BONE ALGRFT MORSEL ADD-ON | SPINAL PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 20931 | SP BONE ALGRFT STRUCT ADD-ON | SPINAL PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 20936 | SPINAL BONE AUTOGRAFT | SPINAL PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 20937 | SPINAL BONE AUTOGRAFT | SPINAL PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 20938 | SPINAL BONE AUTOGRAFT | SPINAL PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 20939 | BONE MARROW ASPIR BONE GRFG | SPINAL PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 20975 | ELECTRICAL BONE STIMULAT | SPINAL PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 20999 | MUSCULOSKELETAL SURGERY | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 1/1/2026 |
| 21025 | EXCISION OF BONE (E.G., FOR OSTEOMYELITIS OR BONE ABSCESS) MANDIBLE | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 21050 | CONDYLECTOMY, TEMPOROMANDIBULAR JOINT (TMJ) | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 21060 | MENISCECTOMY, PARTIAL OR COMPLETE, TEMPOROMANDIBULAR JOINT (TMJ) | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 21073 | MNPJ OF TMJ W/ANESTH | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 9/13/2025 |
| 21079 | IMPRES&PREP INTRM OBT PROSTH | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 5/31/2025 |
| 21080 | IMPRES&PREP DEF OBT PROSTH | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 5/31/2025 |
| 21081 | IMPRES&PREP MNDBL RES PROSTH | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 5/31/2025 |
| 21082 | IMPRES&PREP PALTL AUG PROSTH | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 5/31/2025 |
| 21085 | IMPRESSION AND CUSTOM PREPARATION; ORAL SURGICAL SPLINT | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 21088 | IMPRESSION AND CUSTOM PREPARATION; FACIAL PROSTHESIS | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 21089 | UNLISTED MAXILLOFACIAL PROCEDURE | UNLISTED PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 21110 | APPLICATION OF INTERDENTAL FIXATION DEVICE FOR CONDITIONS OTHER THAN FRACTURE OR DISLOCATION, INCLUDES REMOVAL | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 21120 | GENIOPLASTY; AUGMENTATION (AUTOGRAFT, ALLOGRAFT, PROSTHETIC MATERIAL) | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 21121 | GENIOPLASTY, SLIDING OSTEOTOMY, SINGLE PIECE | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 21122 | GENIOPLASTY, SLIDING OSTEOTOMIES, TWO OR MORE OSTEOTOMIES (E.G., WEDGE EXCISION OR BONE WEDGE REVERSAL FOR ASYMMETRICAL CHIN) | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 21123 | GENIOPLASTY; SLIDING, AUGMENTATION WITH INTERPOSITIONAL BONE GRAFTS (INCLUDES OBTAINING AUTOGRAFTS) | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 21125 | AUGMENTATION, MANDIBULAR BODY OR ANGLE; PROSTHETIC MATERIAL | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 21127 | AUGMENTATION, MANDIBULAR BODY OR ANGLE; WITH BONE GRAFT, ONLAY OR INTERPOSITIONAL (INCLUDES OBTAINING AUTOGRAFT) | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 21137 | REDUCTION FOREHEAD; CONTOURING ONLY | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 21138 | REDUCTION FOREHEAD; CONTOURING AND APPLICATION OF PROSTHETIC MATERIAL OR BONE GRAFT (INCLUDES OBTAINING AUTOGRAFT) | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 21139 | REDUCTION FOREHEAD; CONTOURING AND SETBACK OF ANTERIOR FRONTAL SINUS WALL | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 21141 | RECONSTRUCTION MIDFACE, LEFORT I; SINGLE PIECE, SEGMENT MOVEMENT IN ANY DIRECTION (E.G., FOR LONG FACE SYNDROME), WITHOUT BONE GRAFT | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |

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| 21142 | RECONSTRUCTION MIDFACE, LEFORT I; TWO PIECES, SEGMENT MOVEMENT IN ANY DIRECTION, WITHOUT BONE GRAFT | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 21143 | RECONSTRUCTION MIDFACE, LEFORT I; THREE OR MORE PIECES, SEGMENT MOVE IN ANY DIRECTION, WITHOUT BONE GRAFT | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 21145 | RECONSTRUCTION MIDFACE, LEFORT I; SINGLE PIECE, SEGMENT MOVEMENT IN ANY DIRECTION, REQUIRING BONE GRAFTS (INCLUDES OBTAINING AUTOGRAFTS) | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 21146 | RECONSTRUCTION MIDFACE, LEFORT I; TWO PIECES, SEGMENT MOVEMENT IN ANY DIRECTION, REQUIRING BONE GRAFTS (INCLUDES OBTAINING AUTOGRAFTS) (E.G., UNGRAFTED UNILATERAL ALVEOLAR CLEFT) | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 21147 | RECONSTRUCTION MIDFACE, LEFORT I; THREE OR MORE PIECES, SEGMENT MOVE IN ANY DIRECTION, REQUIRING BONE GRAFTS (INCLUDES OBTAINING AUTOGRAFTS) (E.G., UNGRAFTED BILATERAL ALVEOLAR CLEFT OR MULTIPLE OSTEOTOMIES) | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 21150 | RECONSTRUCTION MIDFACE, LEFORT II; ANTERIOR INTRUSION (E.G., TREACHER-COLLINS SYNDROME) | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 21151 | RECONSTRUCTION MIDFACE, LEFORT II; ANY DIRECTION, REQUIRING BONE GRAFTS (INCLUDES OBTAINING AUTOGRAFTS) | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 21154 | RECONSTRUCTION MIDFACE, LEFORT III (EXTRACRANIAL), ANY TYPE, REQUIRING BONE GRAFTS (INCLUDES OBTAINING AUTOGRAFTS); WITHOUT LEFORT I | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 21155 | RECONSTRUCTION MIDFACE, LEFORT III (EXTRACRANIAL), ANY TYPE, REQUIRING BONE GRAFTS (INCLUDES OBTAINING AUTOGRAFTS) WITH LEFORT I | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 21159 | RECONSTRUCTION MIDFACE, LEFORT III (EXTRA AND INTRACRANIAL) WITH FOREHEAD ADVANCEMENT (E.G., MONO BLOC) REQUIRING BONE GRAFTS (INCLUDES OBTAINING AUTOGRAFTS); WITHOUT LEFORT I | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 21160 | RECONSTRUCTION MIDFACE, LEFORT III (EXTRA AND INTRACRANIAL) WITH FOREHEAD ADVANCEMENT (E.G., MONO BLOC) REQUIRING BONE GRAFTS (INCLUDES OBTAINING AUTOGRAFTS); WITH LEFORT I | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 21172 | RECONSTRUCTION SUPERIOR-LATERAL ORBITAL RIM AND LOWER FOREHEAD, ADVANCEMENT OR ALTERATION, WITH OR WITHOUT GRAFTS (INCLUDES OBTAINING AUTOGRAFTS) | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 21179 | RECONSTRUCTION, ENTIRE OR MAJORITY OF FOREHEAD AND/OR SUPRAORBITAL RIMS; WITH GRAFTS (ALLOGRAFT OR PROSTHETIC MATERIAL) | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 21180 | RECONSTRUCTION, ENTIRE OR MAJORITY OF FOREHEAD AND/OR SUPRAORBITAL RIMS; WITH AUTOGRAFT (INCLUDES OBTAINING GRAFTS) | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 21188 | RECONSTRUCTION MIDFACE, OSTEOTOMIES (OTHER THAN LEFORT TYPE) AND BONE GRAFTS (INCLUDES OBTAINING AUTOGRAFTS) | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 21193 | RECONSTRUCTION OF MANDIBULAR RAMI, HORIZONTAL, VERTICAL, C, OR L OSTEOTOMY; WITHOUT BONE GRAFT | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 21194 | RECONSTRUCTION OF MANDIBULAR RAMI, HORIZONTAL, VERTICAL, C, OR L OSTEOTOMY; WITH BONE GRAFT (INCLUDES OBTAINING GRAFT) | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 21195 | RECONSTRUCTION OF MANDIBULAR RAMI AND/OR BODY, SAGITTAL SPLIT; WITHOUT INTERNAL RIGID FIXATION | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 21196 | RECONSTRUCTION OF MANDIBULAR RAMI AND/OR BODY, SAGITTAL SPLIT; WITH INTERNAL RIGID FIXATION | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 21198 | OSTEOTOMY, MANDIBLE, SEGMENTAL | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 21199 | OSTEOTOMY, MANDIBLE, SEGMENTAL; WITH GENIOGLOSSUS ADVANCEMENT | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 21206 | OSTEOTOMY, MAXILLA, SEGMENTAL (EG. WASSMUND OR SCHUCHARD) | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 21208 | OSTEOPLASTY, FACIAL BONES; AUGMENTATION (AUTOGRAFT, ALLOGRAFT, OR PROSTHETIC IMPLANT) | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 21209 | OSTEOPLASTY, FACIAL BONES; REDUCTION | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |

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| 21210 | GRAFT, BONE; NASAL, MAXILLARY OR MALAR AREAS (INCLUDES OBTAINING GRAFT) | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 21215 | GRAFT, BONE; MANDIBLE (INCLUDES OBTAINING GRAFT) | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 21230 | RIB CARTILAGE GRAFT | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 12/4/2021 |
| 21235 | GRAFT; EAR CARTILAGE, AUTOGENOUS, TO NOSE OR EAR (INCLUDES OBTAINING GRAFT) | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 21240 | ARTHROPLASTY, TEMPOROMANDIBULAR JOINT (TMJ), WITH OR WITHOUT AUTOGRAFT (INCLUDES OBTAINING GRAFT) | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 21243 | ARTHROPLASTY, TEMPOROMANDIBULAR JOINT (TMJ), WITH PROSTHETIC JOINT REPLACEMENT | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 21244 | RECONSTRUCTION OF MANDIBLE, EXTRAORAL, WITH TRANSOSTEAL BONE PLATE (E.G., MANDIBULAR STAPLE BONE PLATE) | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 21245 | RECONSTRUCTION OF MANDIBLE OR MAXILLA, SUBPERIOSTEAL IMPLANT; PARTIAL | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 21246 | RECONSTRUCTION OF MANDIBLE OR MAXILLA, SUBPERIOSTEAL IMPLANT; COMPLETE | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 21248 | RECONSTRUCTION OF MANDIBLE OR MAXILLA, ENDOSTEAL IMPLANT (E.G., BLADE, CYLINDER); PARTIAL | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 21249 | RECONSTRUCTION OF MANDIBLE OR MAXILLA, ENDOSTEAL IMPLANT (E.G., BLADE, CYLINDER); COMPLETE | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 21270 | MALAR AUGMENTATION, PROSTHETIC MATERIAL | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 21299 | CRANIO/MAXILLOFACIAL SUR | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 1/1/2026 |
| 21497 | INTERDENTAL WIRING | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 21499 | HEAD SURGERY PROCEDURE | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 1/1/2026 |
| 21685 | HYOID MYOTOMY AND SUSPENSION | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 21740 | RECONSTRUCTIVE REPAIR OF PECTUS EXCAVATUM OR CARINATUM; OPEN | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 21742 | RECONSTRUCTIVE REPAIR OF PECTUS EXCAVATUM OR CARINATUM; MINIMALLY INVASIVE APPROACH (NUSS PROCEDURE) WITHOUT THORACOSCOPY | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 21743 | REPAIR STERNUM/NUSS W/SC | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 9/13/2025 |
| 21899 | UNLISTED PROCEDURE, NECK OR THORAX | UNLISTED PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 22207 | CUT SPINE 3 COL LUMB | SPINAL PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 22208 | CUT SPINE 3 COL ADDL SEG | SPINAL PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 22210 | REVISION OF NECK SPINE | SPINAL PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 22214 | REVISION OF LUMBAR SPINE | SPINAL PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 22216 | REVISE EXTRA SPINE SEGME | SPINAL PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 22220 | REVISION OF NECK SPINE | SPINAL PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 22224 | REVISION OF LUMBAR SPINE | SPINAL PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 22226 | REVISE EXTRA SPINE SEGME | SPINAL PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 22505 | MANIPULATION OF SPINE | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 1/1/2026 |
| 22510 | PERQ CERVICOTHORACIC INJECT | SPINAL PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 22511 | PERQ LUMBOSACRAL INJECTION | SPINAL PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 22512 | VERTEBROPLASTY ADDL INJECT | SPINAL PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 22513 | PERQ VERTEBRAL AUGMENTATION | SPINAL PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 22514 | PERQ VERTEBRAL AUGMENTATION | SPINAL PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 22515 | PERQ VERTEBRAL AUGMENTATION | SPINAL PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 22526 | IDET SINGLE LEVEL | SPINAL PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 22527 | IDET 1 OR MORE LEVELS | SPINAL PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 22533 | LAT LUMBAR SPINE FUSION | SPINAL PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 22534 | LAT THOR/LUMB ADDL SEG | SPINAL PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 22551 | NECK SPINE FUSE&REMOVE ADDL | SPINAL PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 22552 | ADDL NECK SPINE FUSION | SPINAL PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 22554 | NECK SPINE FUSION | SPINAL PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 22556 | THORAX SPINE FUSION | SPINAL PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 22558 | LUMBAR SPINE FUSION | SPINAL PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 22585 | ADDITIONAL SPINAL FUSION | SPINAL PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 22586 | ARTHRODESIS, PRE-SACRAL INTERBODY TECHNIQUE, INCLUDING DISC SPACE PREPARATION, DISCECTOMY, WITH POSTERIOR INSTRUMENTATION, WITH IMAGE GUIDANCE, INCLUDES BONE GRAFT WHEN PERFORMED, L5-S1 INTERSPACE | SPINAL PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |

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| 22595 | ARTHRODESIS, POSTERIOR TECHNIQUE, ATLAS-AXIS (C1-C2) | SPINAL PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 22600 | NECK SPINE FUSION | SPINAL PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 22610 | ARTHRODESIS, POSTERIOR OR POSTEROLATERAL TECHNIQUE, SINGLE LEVEL; THORACIC (WITH LATERAL TRANSVERSE TECHNIQUE, WHEN PERFORMED) | SPINAL PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 22612 | LUMBAR SPINE FUSION | SPINAL PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 22614 | ARTHRODESIS, POSTERIOR OR POSTEROLATERAL TECHNIQUE, SINGLE INTERSPACE; EACH ADDITIONAL VERTEBRAL SEGMENT (LIST SEPARATELY IN ADDITION TO C.CODE FOR PRIMARY PROCEDURE) | SPINAL PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 22630 | LUMBAR SPINE FUSION | SPINAL PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 22632 | ARTHRODESIS, POSTERIOR INTERBODY TECHNIQUE, INCLUDING LAMINECTOMY AND/OR DISCECTOMY TO PREPARE INTERSPACE (OTHER THAN FOR DECOMPRESSION), SINGLE INTERSPACE; EACH ADDITIONAL INTERSPACE (LIST SEPARATELY IN ADDITION TO CODE FOR PRIMARY PROCEDURE) | SPINAL PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 22633 | LUMBAR SPINE FUSION COMB | SPINAL PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 22634 | ARTHRODESIS, COMBINED POSTERIOR OR POSTEROLATERAL TECHNIQUE WITH POSTERIOR INTERBODY TECHNIQUE INCLUDING LAMINECTOMY AND/OR DISCECTOMY SUFFICIENT TO PREPARE INTERSPACE (OTHER THAN FOR DECOMPRESSION), SINGLE INTERSPACE; EACH ADDITIONAL INTERSPACE (LIST SEP | SPINAL PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 22800 | ARTHRODESIS, POSTERIOR, FOR SPINAL DEFORMITY, WITH OR WITHOUT CAST; UP TO 6 VERTEBRAL SEGMENTS | SPINAL PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 22802 | ARTHRODESIS, POSTERIOR, FOR SPINAL DEFORMITY, WITH OR WITHOUT CAST; 7 TO 12 VERTEBRAL SEGMENTS | SPINAL PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 22804 | ARTHRODESIS, POSTERIOR, FOR SPINAL DEFORMITY, WITH OR WITHOUT CAST; 13 OR MORE VERTEBRAL SEGMENTS | SPINAL PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 22808 | FUSION OF SPINE | SPINAL PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 22810 | ARTHRODESIS, ANTERIOR, FOR SPINAL DEFORMITY, WITH OR WITHOUT CAST; 4 TO 7 VERTEBRAL SEGMENTS | SPINAL PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 22812 | ARTHRODESIS, ANTERIOR, FOR SPINAL DEFORMITY, WITH OR WITHOUT CAST; 8 OR MORE VERTEBRAL SEGMENTS | SPINAL PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 22836 | ANTERIOR THORACIC VERTEBRAL BODY TETHERING, INCLUDING THORACOSCOPY, WHEN PERFORMED; UP TO 7 VERTEBRAL SEGMENTS | SPINAL PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 22837 | ANTERIOR THORACIC VERTEBRAL BODY TETHERING, INCLUDING THORACOSCOPY, WHEN PERFORMED; 8 OR MORE VERTEBRAL SEGMENTS | SPINAL PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 22838 | REVISION (EG, AUGMENTATION, DIVISION OF TETHER), REPLACEMENT, OR REMOVAL OF THORACIC VERTEBRAL BODY TETHERING, INCLUDING THORACOSCOPY, WHEN PERFORMED | SPINAL PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 22840 | INSERT SPINE FIXATION DEVICE | SPINAL PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 22841 | INSERT SPINE FIXATION DE | SPINAL PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 22842 | POSTERIOR SEGMENTAL INSTRUMENTATION (EG, PEDICLE FIXATION, DUAL RODS WITH MULTIPLE HOOKS AND SUBLAMINAR WIRES); 3 TO 6 VERTEBRAL SEGMENTS (LIST SEPARATELY IN ADDITION TO CODE FOR PRIMARY PROCEDURE) | SPINAL PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 22843 | POSTERIOR SEGMENTAL INSTRUMENTATION (EG, PEDICLE FIXATION, DUAL RODS WITH MULTIPLE HOOKS AND SUBLAMINAR WIRES); 7 TO 12 VERTEBRAL SEGMENTS (LIST SEPARATELY IN ADDITION TO CODE FOR PRIMARY PROCEDURE) | SPINAL PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 22844 | POSTERIOR SEGMENTAL INSTRUMENTATION (EG, PEDICLE FIXATION, DUAL RODS WITH MULTIPLE HOOKS AND SUBLAMINAR WIRES); 13 OR MORE VERTEBRAL SEGMENTS (LIST SEPARATELY IN ADDITION TO CODE FOR PRIMARY PROCEDURE) | SPINAL PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 22845 | INSERT SPINE FIXATION DE | SPINAL PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 22846 | INSERT SPINE FIXATION DE | SPINAL PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 22847 | INSERT SPINE FIXATION DE | SPINAL PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 22848 | PELVIC FIXATION (ATTACHMENT OF CAUDAL END OF INSTRUMENTATION TO PELVIC BONY STRUCTURES) OTHER THAN SACRUM (LIST SEPARATELY IN ADDITION TO CODE FOR PRIMARY PROCEDURE) | SPINAL PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 22849 | REINSERT SPINAL FIXATION | SPINAL PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |

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| 22850 | REMOVE SPINE FIXATION DE | SPINAL PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 22852 | REMOVE SPINE FIXATION DE | SPINAL PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 22853 | INSJ BIOMECHANICAL DEVICE | SPINAL PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 22854 | INSJ BIOMECHANICAL DEVICE | SPINAL PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 22855 | REMOVE SPINE FIXATION DE | SPINAL PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 22856 | CERV ARTIFIC DISKECTOMY | SPINAL PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 22857 | LUMBAR ARTIF DISKECTOMY | SPINAL PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 22858 | SECOND LEVEL CER DISKECTOMY | SPINAL PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 22859 | INSJ BIOMECHANICAL DEVICE | SPINAL PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 22860 | TOTAL DISC ARTHROPLASTY (ARTIFICIAL DISC), ANTERIOR APPROACH, INCLUDING DISCECTOMY TO PREPARE INTERSPACE (OTHER THAN FOR DECOMPRESSION); SECOND INTERSPACE, LUMBAR (LIST SEPARATELY IN ADDITION TO CODE FOR PRIMARY PROCEDURE) | SPINAL PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 22861 | REVISE CERV ARTIFIC DISC | SPINAL PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 22862 | REVISE LUMBAR ARTIF DISC | SPINAL PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 22867 | INSJ STABLJ DEV W/DCMPRN | SPINAL PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 22868 | INSJ STABLJ DEV W/DCMPRN | SPINAL PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 22869 | INSJ STABLJ DEV W/O DCMPRN | SPINAL PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 22870 | INSJ STABLJ DEV W/O DCMPRN | SPINAL PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 22899 | SPINE SURGERY PROCEDURE | SPINAL PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 22999 | ABDOMEN SURGERY PROCEDUR | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 1/1/2026 |
| 23929 | SHOULDER SURGERY PROCEDU | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 1/1/2026 |
| 24300 | MANIPULATE ELBOW W/ANEST | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 1/1/2026 |
| 24999 | UPPER ARM/ELBOW SURGERY | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 1/1/2026 |
| 25259 | MANIPULATE WRIST W/ANEST | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 1/1/2026 |
| 25999 | FOREARM OR WRIST SURGERY | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 1/1/2026 |
| 26989 | HAND/FINGER SURGERY | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 1/1/2026 |
| 27198 | CLSD TX PELVIC RING FX | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 1/1/2026 |
| 27275 | MANIPULATION OF HIP JOIN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 1/1/2026 |
| 27278 | ARTHRODESIS, SACROILIAC JOINT, PERCUTANEOUS, WITH IMAGE GUIDANCE, INCLUDING PLACEMENT OF INTRA-ARTICULAR IMPLANT(S) (EG, BONE ALLOGRAFT(S), SYNTHETIC DEVICE(S)), WITHOUT PLACEMENT OF TRANSFIXATION DEVICE | SPINAL PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 27279 | ARTHRODESIS SACROILIAC JOINT | SPINAL PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 27280 | ARTHRODESIS, SACROILIAC JOINT, OPEN, INCLUDES OBTAINING BONE GRAFT, INCLUDING INSTRUMENTATION, WHEN PERFORMED | SPINAL PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 27299 | PELVIS/HIP JOINT SURGERY | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 1/1/2026 |
| 27599 | LEG SURGERY PROCEDURE | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 1/1/2026 |
| 27702 | RECONSTRUCT ANKLE JOINT | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 9/13/2025 |
| 27703 | RECONSTRUCTION ANKLE JOI | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 1/1/2026 |
| 27860 | FIXATION OF ANKLE JOINT | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 1/1/2026 |
| 27899 | LEG/ANKLE SURGERY PROCED | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 11/21/2025 |
| 28291 | CORRJ HALUX RIGDUS W/IMPLT | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 11/21/2025 |

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| 28890 | EXTRACORPOREAL SHOCK WAVE, HIGH ENERGY, PERFORMED BY A PHYSICIAN, REQUIRING ANESTHESIA OTHER THAN LOCAL, INCLUDING ULTRASOUND GUIDANCE, INVOLVING THE PLANTAR FASCIA | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 11/4/2019 |
| 28899 | FOOT/TOES SURGERY PROCED | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 1/1/2026 |
| 29804 | ARTHROSCOPY , TEMPOROMANDIBULAR JOINT (TMJ), SURGICAL | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 29999 | ARTHROSCOPY OF JOINT | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 1/1/2026 |
| 30150 | RHINECTOMY; PARTIAL | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 30400 | RHINOPLASTY, PRIMARY; LATERAL AND ALAR CARTILAGES AND/OR ELEVATION OF NASAL TIP | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 30410 | RHINOPLASTY, PRIMARY; COMPLETE, EXTERNAL PARTS INCLUDING BONY PYRAMID, LATERAL AND ALAR CARTILAGES, AND/OR ELEVATION OF NASAL TIP | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 30420 | RHINOPLASTY, PRIMARY; INCLUDING MAJOR SEPTAL REPAIR | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 30430 | RHINOPLASTY, SECONDARY; MINOR REVISION (SMALL AMOUNT OF NASAL TIP WORK) | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 30435 | RHINOPLASTY, SECONDARY; INTERMEDIATE REVISION (BONY WORK WITH OSTEOTOMIES) | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 30450 | RHINOPLASTY, SECONDARY; MAJOR REVISION (NASAL TIP WORK AND OSTEOTOMIES) | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 30460 | RHINOPLASTY FOR NASAL DEFORMITY SECONDARY TO CONGENITAL CLEFT LIP AND/OR PALATE, INCLUDING COLUMELLAR LENGTHENING; TIP ONLY | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 30462 | RHINOPLASTY FOR NASAL DEFORMITY SECONDARY TO CONGENITAL CLEFT LIP AN PALATE, INCLUDING COLUMELLAR LENGTHENING; TIP, SEPTUM, OSTEOTOMIES | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 30465 | REPAIR OF NASAL VESTIBULAR STENOSIS (E.G. SPREADER GRAFTING, LATERAL NASAL WALL RECONSTRUCTION) | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 30468 | REPAIR OF NASAL VALVE COLLAPSE WITH SUBCUTANEOUS/SUBMUCOSAL LATERAL WALL IMPLANT(S) | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 12/18/2020 |
| 30469 | REPAIR OF NASAL VALVE COLLAPSE WITH LOW ENERGY, TEMPERATURE-CONTROLLED (IE, RADIOFREQUENCY) SUBCUTANEOUS/SUBMUCOSAL REMODELING | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 1/1/2026 |
| 30520 | REPAIR OF NASAL SEPTUM | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 10/18/2025 |
| 30620 | INTRANASAL RECONSTRUCTION | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 30999 | NASAL SURGERY PROCEDURE | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 1/1/2026 |
| 31295 | SINUS ENDO W/BALLOON DIL | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 12/4/2021 |
| 31296 | SINUS ENDO W/BALLOON DIL | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 12/4/2021 |
| 31297 | SINUS ENDO W/BALLOON DIL | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 12/4/2021 |
| 31298 | NSL/SINS NDSC W/SINS DILAT | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 31299 | SINUS SURGERY PROCEDURE | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 1/1/2026 |
| 31599 | UNLISTED PROCEDURE, LARYNX | UNLISTED PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 31899 | UNLISTED PROCEDURE, TRACHEA, BRONCHI | UNLISTED PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 32553 | INS MARK THOR FOR RT PER | THERAPEUTIC RADIOLOGY | OUTPATIENT SURGICAL PROCEDURES | 5/31/2025 |
| 32664 | THORACOSCOPY W/ TH NRV E | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 12/4/2021 |
| 32850 | DONOR PNEUMONECTOMY | TRANSPLANT | TRANSPLANT | 11/4/2019 |
| 32851 | LUNG TRANSPLANT, SINGLE; WITHOUT CARDIOPULMONARY BYPASS | TRANSPLANT | TRANSPLANT | 11/4/2019 |
| 32852 | LUNG TRANSPLANT, SINGLE; WITH CARDIOPULMONARY BYPASS | TRANSPLANT | TRANSPLANT | 11/4/2019 |
| 32853 | LUNG TRANSPLANT, DOUBLE (BILATERAL SEQUENTIAL OR EN BLOC); WITHOUT CARDIOPULMONARY BYPASS | TRANSPLANT | TRANSPLANT | 11/4/2019 |
| 32854 | LUNG TRANSPLANT, DOUBLE (BILATERAL SEQUENTIAL OR EN BLOC); WITH CARDIOPULMONARY BYPASS | TRANSPLANT | TRANSPLANT | 11/4/2019 |
| 32855 | PREPARE DONOR LUNG SINGL | TRANSPLANT | TRANSPLANT | 8/31/2024 |

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| 32856 | PREPARE DONOR LUNG DOUBL | TRANSPLANT | TRANSPLANT | 8/31/2024 |
| 32999 | UNLISTED PROCEDURE, LUNGS AND PLEURA | UNLISTED PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 33224 | INSERT PACING LEAD & CON | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 11/14/2020 |
| 33225 | L VENTRIC PACING LEAD AD | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 11/14/2020 |
| 33249 | NSERT PACE-DEFIB W/LEAD | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 11/14/2020 |
| 33254 | ABLATE ATRIA LMTD | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 8/27/2022 |
| 33255 | ABLATE ATRIA W/O BYPASS | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 8/27/2022 |
| 33258 | ABLATE ATRIA X10SV ADD-O | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 9/13/2025 |
| 33265 | ABLATE ATRIA LMTD ENDO | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 8/27/2022 |
| 33266 | ABLATE ATRIA X10SV ENDO | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 8/27/2022 |
| 33267 | EXCLUSION OF LEFT ATRIAL APPENDAGE, OPEN, ANY METHOD (EG, EXCISION, ISOLATION VIA STAPLING, OVERSEWING, LIGATION, PPLICATION, CLIP) | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 12/30/2021 |
| 33269 | EXCLUSION OF LEFT ATRIAL APPENDAGE, THORACOSCOPIC, ANY METHOD (EG, EXCISION, ISOLATION VIA STAPLING, OVERSEWING, LIGATION, PPLICATION, CLIP) | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 12/30/2021 |
| 33270 | INS/REP SUBQ DEFIBRILLATOR | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 12/4/2021 |
| 33285 | INSJ SUBQ CAR RHYTHM MNTR | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 33289 | TCAT IMPL WRLS P-ART PRS SNR | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 9/13/2025 |
| 33340 | PERQ CLSR TCAT L ATR APNDGE | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 9/13/2025 |
| 33361 | REPLACE AORTIC VALVE PER | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 12/4/2021 |
| 33362 | REPLACE AORTIC VALVE OPE | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 12/4/2021 |
| 33363 | REPLACE AORTIC VALVE OPE | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 12/4/2021 |
| 33364 | REPLACE AORTIC VALVE OPE | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 12/4/2021 |
| 33365 | REPLACE AORTIC VALVE OPE | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 12/4/2021 |
| 33366 | TRCATH REPLACE AORTIC VALVE | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 3/26/2021 |
| 33418 | REPAIR TCAT MITRAL VALVE | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 33477 | TRANSCATHETER PULMONARY VALVE IMPLANTATION, PERCUTANEOUS APPROACH, INCLUDING PRE-STENTING OF THE VALVE DELIVERY SITE, WHEN PERFORMED | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 33930 | REMOVAL OF DONOR HEART/L | TRANSPLANT | TRANSPLANT | 8/31/2024 |
| 33933 | PREPARE DONOR HEART/LUNG | TRANSPLANT | TRANSPLANT | 8/31/2024 |
| 33935 | HEART-LUNG TRANSPLANT WITH RECIPIENT CARDIECTOMY-PNEUMONECTOMY | TRANSPLANT | TRANSPLANT | 11/4/2019 |
| 33940 | REMOVAL OF DONOR HEART | TRANSPLANT | TRANSPLANT | 8/31/2024 |
| 33944 | PREPARE DONOR HEART | TRANSPLANT | TRANSPLANT | 8/31/2024 |
| 33945 | HEART TRANSPLANT, WITH OR WITHOUT RECIPIENT CARDIECTOMY | TRANSPLANT | TRANSPLANT | 11/4/2019 |
| 33975 | IMPLANT VENTRICULAR DEVI | TRANSPLANT | TRANSPLANT | 11/4/2019 |
| 33976 | IMPLANT VENTRICULAR DEVI | TRANSPLANT | TRANSPLANT | 11/4/2019 |
| 33979 | INSERT INTRACORPOREAL DE | TRANSPLANT | TRANSPLANT | 11/4/2019 |
| 33981 | REPLACE VAD PUMP EXT | TRANSPLANT | TRANSPLANT | 11/4/2019 |
| 33982 | REPLACE VAD INTRA W/O BP | TRANSPLANT | TRANSPLANT | 11/4/2019 |
| 33983 | REPLACE VAD INTRA W/BP | TRANSPLANT | TRANSPLANT | 11/4/2019 |
| 33990 | INSERT VAD ARTERY ACCESS | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 33991 | INSERT VAD ART&VEIN ACCE | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 33993 | REPOSITION VAD DIFF SESS | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 33999 | CARDIAC SURGERY PROCEDUR | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 1/1/2026 |
| 34718 | EVASC RPR N/A A-ILIAC NDGFT | VASCULAR INTERVENTIONS | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 36465 | NJX NONCMPND SCLRSNT 1 VEIN | VASCULAR INTERVENTIONS | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |

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| 36466 | NJX NONCMPND SCLRSNT MLT VN | VASCULAR INTERVENTIONS | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 36468 | INJECTION(S) SPIDER VEIN | VASCULAR INTERVENTIONS | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 36471 | INJECTION THERAPY OF VEI | VASCULAR INTERVENTIONS | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 36473 | ENDOVENOUS MCHNCHEM 1ST VEIN | VASCULAR INTERVENTIONS | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 36474 | ENDOVENOUS MCHNCHEM ADD-ON | VASCULAR INTERVENTIONS | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 36475 | ENDOVENOUS RF 1ST VEIN | VASCULAR INTERVENTIONS | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 36476 | ENDOVENOUS RF VEIN ADD-O | VASCULAR INTERVENTIONS | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 36478 | ENDOVENOUS LASER 1ST VEI | VASCULAR INTERVENTIONS | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 36479 | ENDOVENOUS LASER VEIN AD | VASCULAR INTERVENTIONS | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 36482 | ENDOVEN THER CHEM ADHES 1ST | VASCULAR INTERVENTIONS | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 36483 | ENDOVEN THER CHEM ADHES SBSQ | VASCULAR INTERVENTIONS | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 36514 | APHERESIS PLASMA | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 12/4/2021 |
| 37215 | TRANSCATH STENT CCA W/EP | VASCULAR INTERVENTIONS | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 37216 | TRANSCATH STENT CCA W/O | VASCULAR INTERVENTIONS | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 37218 | STENT PLACEMT ANTE CAROTID | VASCULAR INTERVENTIONS | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 37220 | ILIAC REVASC | VASCULAR INTERVENTIONS | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 37221 | ILIAC REVASC W/STENT | VASCULAR INTERVENTIONS | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 37222 | ILIAC REVASC ADD-ON | VASCULAR INTERVENTIONS | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 37223 | ILIAC REVASC W/STENT ADD-ON | VASCULAR INTERVENTIONS | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 37224 | FEM/POPL REVAS W/TLA | VASCULAR INTERVENTIONS | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 37225 | FEM/POPL REVAS W/ATHER | VASCULAR INTERVENTIONS | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 37226 | FEM/POPL REVASC W/STENT | VASCULAR INTERVENTIONS | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 37227 | FEM/POPL REVASC STINT & ATHER | VASCULAR INTERVENTIONS | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 37228 | TIB/PER REVASC W/TLA | VASCULAR INTERVENTIONS | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 37229 | TIB/PER REVASC W/ATHER | VASCULAR INTERVENTIONS | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 37230 | TIB/PER REVASC W/STENT | VASCULAR INTERVENTIONS | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 37231 | TIB/PER REVASC STENT & ATHER | VASCULAR INTERVENTIONS | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 37232 | TIB/PER REVASC ADD-ON | VASCULAR INTERVENTIONS | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 37233 | TIBPER REVASC W/ATHER ADD-ON | VASCULAR INTERVENTIONS | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 37234 | REVSC OPN/PRQ TIB/PERO STENT | VASCULAR INTERVENTIONS | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 37235 | TIB/PER REVASC STINT & ATHER | VASCULAR INTERVENTIONS | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 37238 | OPEN/PERQ PLACE STENT SAME | VASCULAR INTERVENTIONS | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 37239 | OPEN/PERQ PLACE STENT EA ADD | VASCULAR INTERVENTIONS | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 37241 | VASC EMBOLIZE/OCCLUDE VENOUS | VASCULAR INTERVENTIONS | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 37242 | VASC EMBOLIZE/OCCLUDE ARTERY | VASCULAR INTERVENTIONS | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 37243 | VASC EMBOLIZE/OCCLUDE ORGAN | VASCULAR INTERVENTIONS | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 37244 | VASC EMBOLIZE/OCCLUDE BLEED | VASCULAR INTERVENTIONS | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 37248 | TRLUML BALO ANGIOP 1ST VEIN | VASCULAR INTERVENTIONS | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 37249 | TRLUML BALO ANGIOP ADDL VEIN | VASCULAR INTERVENTIONS | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 37700 | REVISE LEG VEIN | VASCULAR INTERVENTIONS | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 37718 | LIGATE/STRIP SHORT LEG V | VASCULAR INTERVENTIONS | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 37722 | LIGATE/STRIP LONG LEG VE | VASCULAR INTERVENTIONS | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 37735 | REMOVAL OF LEG VEINS/LES | VASCULAR INTERVENTIONS | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 37765 | STAB PHLEB VEINS XTR 10- | VASCULAR INTERVENTIONS | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 37766 | PHLEB VEINS EXTREM 20+ | VASCULAR INTERVENTIONS | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 37780 | REVISION OF LEG VEIN | VASCULAR INTERVENTIONS | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 37785 | LIGATE/DIVIDE/EXCISE VEI | VASCULAR INTERVENTIONS | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 37799 | VASCULAR SURGERY PROCEDU | VASCULAR INTERVENTIONS | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 38129 | UNLISTED LAPAROSCOPY PROCEDURE, SPLEEN | UNLISTED PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 38204 | MANAGEMENT OF RECIPIENT HEMATOPOIETIC PROGENITOR CELL DONOR SEARCH AND CELL ACQUISITION | TRANSPLANT | TRANSPLANT | 11/4/2019 |
| 38205 | BLOOD-DERIVED HEMATOPOIETIC PROGENITOR CELL HARVESTING FOR TRANSPLANTATION, PER COLLECTION; ALLOGENIC | TRANSPLANT | TRANSPLANT | 11/4/2019 |
| 38206 | BLOOD-DERIVED HEMATOPOIETIC PROGENITOR CELL HARVESTING FOR TRANSPLANTATION, PER COLLECTION; AUTOLOGOUS | TRANSPLANT | TRANSPLANT | 11/4/2019 |
| 38207 | TRANSPLANT PREPARATION OF HEMATOPOIETIC PROGENITOR CELLS; CRYOPRESERVATION AND STORAGE | TRANSPLANT | TRANSPLANT | 11/4/2019 |
| 38208 | TRANSPLANT PREPARATION OF HEMATOPOIETIC PROGENITOR CELLS; THAWING OF PREVIOUSLY FROZEN HARVEST, WITHOUT WASHING | TRANSPLANT | TRANSPLANT | 11/4/2019 |
| 38209 | TRANSPLANT PREPARATION OF HEMATOPOIETIC PROGENITOR CELLS; THAWING OF PREVIOUSLY FROZEN HARVEST, WITH WASHING | TRANSPLANT | TRANSPLANT | 11/4/2019 |
| 38210 | TRANSPLANT PREPARATION OF HEMATOPOIETIC PROGENITOR CELLS; SPECIFIC CELL DEPLETION WITHIN HARVEST, T-CELL DEPLETION | TRANSPLANT | TRANSPLANT | 11/4/2019 |
| 38211 | TRANSPLANT PREPARATION OF HEMATOPOIETIC PROGENITOR CELLS; TUMOR CELL DEPLETION | TRANSPLANT | TRANSPLANT | 11/4/2019 |
| 38212 | TRANSPLANT PREPARATION OF HEMATOPOIETIC PROGENITOR CELLS; RED BLOOD CELL REMOVAL | TRANSPLANT | TRANSPLANT | 11/4/2019 |
| 38213 | TRANSPLANT PREPARATION OF HEMATOPOIETIC PROGENITOR CELLS; PLATELET DEPLETION | TRANSPLANT | TRANSPLANT | 11/4/2019 |
| 38214 | TRANSPLANT PREPARATION OF HEMATOPOIETIC PROGENITOR CELLS; PLASMA (VOLUME) DEPLETION | TRANSPLANT | TRANSPLANT | 11/4/2019 |

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| 38215 | TRANSPLANT PREPARATION OF HEMATOPOIETIC PROGENITOR CELLS; CELL CONCENTRATION IN PLASMA, MONONUCLEAR, OR BUFFY COAT LAYER | TRANSPLANT | TRANSPLANT | 11/4/2019 |
| 38225 | CAR-T HRV BLD-DRV T LYMPHCYT | TRANSPLANT | TRANSPLANT | 12/31/2024 |
| 38226 | CAR-T PREP T LYMPHCYT F/TRNS | TRANSPLANT | TRANSPLANT | 12/31/2024 |
| 38227 | CAR-T RECEIPT&PREP ADMN | TRANSPLANT | TRANSPLANT | 12/31/2024 |
| 38228 | CAR-T ADMN AUTOLOGOUS | TRANSPLANT | TRANSPLANT | 12/31/2024 |
| 38230 | BONE MARROW HARVESTING FOR TRANSPLANTATION | TRANSPLANT | TRANSPLANT | 11/4/2019 |
| 38232 | BONE MARROW HARVESTING FOR TRANSPLANTATION; AUTOLOGOUS | TRANSPLANT | TRANSPLANT | 11/4/2019 |
| 38240 | BONE MARROW OR BLOOD DERIVED PERIPHERAL STEM CELL TRANSPLANTATION, ALLOGENIC | TRANSPLANT | TRANSPLANT | 11/4/2019 |
| 38241 | BONE MARROW OR BLOOD DERIVED PERIPHERAL STEM CELL, TRANSPLANTATION AUTOLOGOUS | TRANSPLANT | TRANSPLANT | 11/4/2019 |
| 38242 | BONE MARROW OR BLOOD-DERIVED PERIPHERAL STEM CELL TRANSPLANTATION; ALLOGENEIC DONOR LYMPHOCYTE INFUSIONS | TRANSPLANT | TRANSPLANT | 11/4/2019 |
| 38243 | HEMATOPOIETIC PROGENITOR CELL (HPC); HPC BOOST | TRANSPLANT | TRANSPLANT | 11/4/2019 |
| 38589 | LAPAROSCOPE PROC LYMPHAT | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 1/1/2026 |
| 38999 | BLOOD/LYMPH SYSTEM PROCE | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 1/1/2026 |
| 39599 | UNLISTED PROCEDURE, DIAPHRAGM | UNLISTED PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 40799 | UNLISTED PROCEDURE, LIPS | UNLISTED PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 41019 | PLACE NEEDLES H&N FOR RT | THERAPEUTIC RADIOLOGY | OUTPATIENT SURGICAL PROCEDURES | 5/31/2025 |
| 41512 | TONGUE SUSPENSION] | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 1/1/2026 |
| 41530 | TONGUE BASE VOL REDUCTIO | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 1/1/2026 |
| 41599 | TONGUE AND MOUTH SURGERY | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 1/1/2026 |
| 41874 | ALVEOLOPLASTY, EACH QUADRANT (SPECIFY) | ORAL PHARYNX | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 41899 | UNLISTED PROCEDURE, DENTOALVEOLAR STRUCTURES | UNLISTED PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 42140 | EXCISION OF UVULA | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 9/13/2025 |
| 42145 | PALATOPHARYNGOPLASTY (E.G., UVULOPALATOPHARYNGOPLASTY, UVULOPHARYNGOPLASTY) | ORAL PHARYNX | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 42160 | TREATMENT MOUTH ROOF LES | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 1/1/2026 |
| 42299 | PALATE/UVULA SURGERY | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 1/1/2026 |
| 42699 | UNLISTED PROCEDURE, SALIVARY GLANDS OR DUCTS | UNLISTED PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 42975 | DRUG-INDUCED SLEEP ENDOSCOPY, WITH DYNAMIC EVALUATION OF VELUM, PHARYNX, TONGUE BASE, AND LARYNX FOR EVALUATION OF SLEEP-DISORDERED BREATHING, FLEXIBLE, DIAGNOSTIC | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 12/30/2021 |
| 42999 | UNLISTED PROCEDURE, PHARYNX, ADENOIDS, OR TONSILS | UNLISTED PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 43210 | EGD ESOPHAGOGASTRIC FNDOPLSTY | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 12/4/2021 |
| 43233 | EGD BALLOON DIL ESOPH30 MM/> | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 5/31/2025 |
| 43235 | UPPR GI ENDOSCOPY DIAGNO | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 5/31/2025 |
| 43236 | UPPR GI SCOPE W/SUBMUC I | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 5/31/2025 |
| 43239 | UPPER GI ENDOSCOPY BIOPS | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 5/31/2025 |
| 43241 | UPPER GI ENDOSCOPY WITH | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 5/31/2025 |
| 43243 | UPPER GI ENDOSCOPY & INJ | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 5/31/2025 |
| 43244 | UPPER GI ENDOSCOPY/LIGAT | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 5/31/2025 |
| 43245 | UPPR GI SCOPE DILATE STR | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 5/31/2025 |

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| 43247 | OPERATIVE UPPER GI ENDOS | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 5/31/2025 |
| 43248 | UPPR GI ENDOSCOPY/GUIDE | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 5/31/2025 |
| 43249 | ESOPH ENDOSCOPY DILATION | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 5/31/2025 |
| 43250 | UPPER GI ENDOSCOPY/TUMOR | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 5/31/2025 |
| 43251 | OPERATIVE UPPER GI ENDOS | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 5/31/2025 |
| 43252 | UPPR GI OPTICL ENDOMICRS | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 5/31/2025 |
| 43254 | EGD ENDO MUCOSAL RESECTION | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 5/31/2025 |
| 43255 | OPERATIVE UPPER GI ENDOS | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 5/31/2025 |
| 43257 | UPPER GASTROINTESTINAL ENDOSCOPY INCLUDING ESOPHAGUS, STOMACH, AND EITHER THE DUODENUM AND/OR JEJUNUM AS APPROPRIATE; WITH DELIVERY OF THERMAL ENERGY TO THE MUSCLE OF LOWER ESOPHAGEAL SPHINCTER AND/OR GASTRIC CARDIA, FOR TREATMENT OF GASTROESOPHAGEAL REFLU | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 11/4/2019 |
| 43266 | EGD ENDOSCOPIC STENT PLACE | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 5/31/2025 |
| 43270 | EGD LESION ABLATION | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 5/31/2025 |
| 43284 | LAPS ESOPHGL SPHNCTR AGMNTJ | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 11/4/2019 |
| 43289 | LAPAROSCOPE PROC ESOPH | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 1/1/2026 |
| 43290 | ESOPHAGOGASTRODUODENOSCOPY, FLEXIBLE, TRANSORAL; WITH DEPLOYMENT OF INTRAGASTRIC BARIATRIC BALLOON | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 1/1/2026 |
| 43497 | LOWER ESOPHAGEAL MYOTOMY, TRANSORAL (IE, PERORAL ENDOSCOPIC MYOTOMY [POEM]) | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 12/30/2021 |
| 43499 | ESOPHAGUS SURGERY PROCED | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 1/1/2026 |
| 43631 | GASTRECTOMY, PARTIAL, DISTAL; WITH GASTRODUODENOSTOMY | GASTRIC BYPASS | Outpatient Surgical Procedures | 11/4/2019 |
| 43632 | GASTRECTOMY, PARTIAL, DISTAL; WITH GASTROJEJUNOSTOMY | GASTRIC BYPASS | Outpatient Surgical Procedures | 11/4/2019 |
| 43633 | GASTRECTOMY, PARTIAL, DISTAL; WITH ROUX-EN-Y RECONSTRUCTION | GASTRIC BYPASS | Outpatient Surgical Procedures | 11/4/2019 |
| 43634 | GASTRECTOMY, PARTIAL, DISTAL; WITH FORMATION OF INTESTINAL POUCH | GASTRIC BYPASS | Outpatient Surgical Procedures | 11/4/2019 |
| 43644 | LAP GASTRIC BYPASS/ROUX- | GASTRIC BYPASS | Outpatient Surgical Procedures | 8/20/2025 |
| 43645 | LAP GASTR BYPASS INCL SM | GASTRIC BYPASS | Outpatient Surgical Procedures | 8/20/2025 |
| 43659 | LAPAROSCOPE PROC STOM | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 1/1/2026 |
| 43770 | LAPAROSCOPY, SURGICAL, GASTRIC RESTRICTIVE PROCEDURE; PLACEMENT OF ADJUSTABLE GASTRIC RESTRICTIVE DEVICE (GASTRIC BAND AND SUBCUTANEOUS PORT COMPONENTS) | GASTRIC BYPASS | Outpatient Surgical Procedures | 11/4/2019 |
| 43771 | LAPAROSCOPY, SURGICAL, GASTRIC RESTRICTIVE PROCEDURE; REVISION OF ADJUSTABLE GASTRIC RESTRICTIVE DEVICE COMPONENT ONLY | GASTRIC BYPASS | Outpatient Surgical Procedures | 11/4/2019 |
| 43772 | LAPAROSCOPY, SURGICAL, GASTRIC RESTRICTIVE PROCEDURE; REMOVAL OF ADJUSTABLE GASTRIC RESTRICTIVE DEVICE COMPONENT ONLY | GASTRIC BYPASS | Outpatient Surgical Procedures | 11/4/2019 |
| 43773 | LAPAROSCOPY, SURGICAL, GASTRIC RESTRICTIVE PROCEDURE; REMOVAL AND REPLACEMENT OF ADJUSTABLE GASTRIC RESTRICTIVE DEVICE COMPONENT ONLY | GASTRIC BYPASS | Outpatient Surgical Procedures | 11/4/2019 |
| 43774 | LAPAROSCOPY, SURGICAL, GASTRIC RESTRICTIVE PROCEDURE; REMOVAL OF ADJUSTABLE GASTRIC RESTRICTIVE DEVICE AND SUBCUTANEOUS PORT COMPONENTS | GASTRIC BYPASS | Outpatient Surgical Procedures | 11/4/2019 |
| 43775 | LAP SLEEVE GASTRECTOMY | GASTRIC BYPASS | Outpatient Surgical Procedures | 6/18/2022 |
| 43842 | GASTRIC RESTRICTIVE PROCEDURE, WITHOUT GASTRIC BYPASS, FOR MORBID OBESITY; VERTICAL-BANDED GASTROPLASTY | GASTRIC BYPASS | Outpatient Surgical Procedures | 11/4/2019 |
| 43843 | GASTRIC RESTRICTIVE PROCEDURE, WITHOUT GASTRIC BYPASS, FOR MORBID OBESITY; OTHER THAN VERTICAL-BANDED GASTROPLASTY | GASTRIC BYPASS | Outpatient Surgical Procedures | 11/4/2019 |
| 43845 | GASTROPLASTY DUODENAL SW | GASTRIC BYPASS | Outpatient Surgical Procedures | 3/29/2025 |

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| 43846 | GASTRIC RESTRICTIVE PROCEDURE, WITH GASTRIC BYPASS FOR MORBID OBESITY; WITH SHORT LIMB (LESS THAN 100 CM) ROUX-EN-Y GASTROENTEROSTOMY | GASTRIC BYPASS | Outpatient Surgical Procedures | 11/4/2019 |
| 43847 | GASTRIC RESTRICTIVE PROCEDURE, WITH GASTRIC BYPASS FOR MORBID OBESITY; WITH SMALL INTESTINE RECONSTRUCTION TO LIMIT ABSORPTION | GASTRIC BYPASS | Outpatient Surgical Procedures | 11/4/2019 |
| 43848 | REVISION, OPEN, OF GASTRIC RESTRICTIVE PROCEDURE FOR MORBID OBESITY, OTHER THAN ADJUSTABLE GASTRIC RESTRICTIVE DEVICE (SEPARATE PROCEDURE) | GASTRIC BYPASS | Outpatient Surgical Procedures | 11/4/2019 |
| 43860 | REVISE STOMACH-BOWEL FUSION | GASTRIC BYPASS | Outpatient Surgical Procedures | 11/4/2019 |
| 43865 | REVISE STOMACH-BOWEL FUSION | GASTRIC BYPASS | Outpatient Surgical Procedures | 11/4/2019 |
| 43881 | IMPL/REDO ELECTRD ANTRUM | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 12/4/2021 |
| 43886 | GASTRIC RESTRICTIVE PROCEDURE, OPEN; REVISION OF SUBCUTANEOUS PORT COMPONENT ONLY | GASTRIC BYPASS | Outpatient Surgical Procedures | 11/4/2019 |
| 43888 | GASTRIC RESTRICTIVE PROCEDURE, OPEN; REMOVAL AND REPLACEMENT OF SUBCUTANEOUS PORT COMPONENT ONLY | GASTRIC BYPASS | Outpatient Surgical Procedures | 11/4/2019 |
| 43999 | STOMACH SURGERY PROCEDUR | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 1/1/2026 |
| 44132 | ENTERECTOMY CADAVER DONO | TRANSPLANT | TRANSPLANT | 11/4/2019 |
| 44133 | ENTERECTOMY LIVE DONOR | TRANSPLANT | TRANSPLANT | 11/4/2019 |
| 44135 | INTESTINE TRANSPLNT CADA | TRANSPLANT | TRANSPLANT | 11/4/2019 |
| 44136 | INTESTINAL ALLOTRANSPLANTATION; FROM LIVING DONOR | TRANSPLANT | TRANSPLANT | 11/4/2019 |
| 44137 | REMOVE INTESTINAL ALLOGR | TRANSPLANT | TRANSPLANT | 8/31/2024 |
| 44238 | LAPAROSCOPE PROC INTESTI | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 1/1/2026 |
| 44715 | BACKBENCH STANDARD PREPARATION OF CADAVER OR LIVING DONOR INTESTINE ALLOGRAFT PRIOR TO TRANSPLANTATION, INCLUDING MOBILIZATION AND FASHIONING OF THE SUPERIOR MESENTERIC ARTERY AND VEIN | TRANSPLANT | TRANSPLANT | 11/4/2019 |
| 44720 | BACKBENCH STANDARD PREPARATION OF CADAVER OR LIVING DONOR INTESTINE ALLOGRAFT PRIOR TO TRANSPLANTATION, VENOUS ANASTOMOSIS, EACH | TRANSPLANT | TRANSPLANT | 11/4/2019 |
| 44721 | BACKBENCH STANDARD PREPARATION OF CADAVER OR LIVING DONOR INTESTINE ALLOGRAFT PRIOR TO TRANSPLANTATION, ARTERIAL ANASTOMOSIS EACH | TRANSPLANT | TRANSPLANT | 11/4/2019 |
| 44799 | UNLISTED PROCEDURE, INTESTINE | UNLISTED PROCEDURES | Outpatient Surgical Procedures | 11/4/2019 |
| 44979 | UNLISTED LAPAROSCOPY PROCEDURE, APPENDIX | UNLISTED PROCEDURES | Outpatient Surgical Procedures | 11/4/2019 |
| 45399 | UNLISTED PROCEDURE COLON | UNLISTED PROCEDURES | Outpatient Surgical Procedures | 11/4/2019 |
| 45999 | UNLISTED PROCEDURE, RECTUM | UNLISTED PROCEDURES | Outpatient Surgical Procedures | 11/4/2019 |
| 46707 | REPAIR ANORECTAL FIST W/PLUG | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 11/4/2019 |
| 46999 | ANUS SURGERY PROCEDURE | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 1/1/2026 |
| 47133 | REMOVAL OF DONOR LIVER | TRANSPLANT | TRANSPLANT | 8/31/2024 |
| 47135 | LIVER ALLOTRANSPLANTATION; ORTHOTOPIC, PARTIAL OR WHOLE, FROM CADAVER OR LIVING DONOR, ANY AGE | TRANSPLANT | TRANSPLANT | 11/4/2019 |
| 47140 | DONOR HEPATECTOMY, WITH PREPARATION AND MAINTENANCE OF ALLOGRAFT, FROM LIVING DONOR; LEFT LATERAL SEGMENT ONLY (SEGMENTS II AND III) | TRANSPLANT | TRANSPLANT | 11/4/2019 |
| 47141 | DONOR HEPATECTOMY, WITH PREPARATION AND MAINTENANCE OF ALLOGRAFT, FROM LIVING DONOR; TOTAL LEFT LOBECTOMY (SEGMENTS II, III AND IV) | TRANSPLANT | TRANSPLANT | 11/4/2019 |
| 47142 | DONOR HEPATECTOMY, WITH PREPARATION AND MAINTENANCE OF ALLOGRAFT, FROM LIVING DONOR; TOTAL RIGHT LOBECTOMY (SEGMENTS V, VI, VII AND VIII) | TRANSPLANT | TRANSPLANT | 11/4/2019 |
| 47143 | PREP DONOR LIVER WHOLE | TRANSPLANT | TRANSPLANT | 11/4/2019 |
| 47144 | PREP DONOR LIVER 3-SEGME | TRANSPLANT | TRANSPLANT | 11/4/2019 |
| 47145 | PREP DONOR LIVER LOBE SP | TRANSPLANT | TRANSPLANT | 11/4/2019 |
| 47146 | BACKBENCH RECONSTRUCITON OF CADAVER OR LIVING DONOR LIVER GRAFT PRIOR TO ALLOTRANSPLANTATION; VENOUS ANASTOMOSIS, EACH | TRANSPLANT | TRANSPLANT | 11/4/2019 |

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| 47147 | BACKBENCH RECONSTRUCTION OF CADAVER OR LIVING DONOR LIVER GRAFT PRIOR TO ALLOTRANSPLANTATION; ARTERIAL ANASTOMOSIS, EACH | TRANSPLANT | TRANSPLANT | 11/4/2019 |
| 47379 | UNLISTED LAPAROSCOPIC PROCEDURE, LIVE | UNLISTED PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 47399 | UNLISTED PROCEDURE, LIVER | UNLISTED PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 47579 | UNLISTED LAPAROSCOPY PROCEDURE, BILIARY TRACT | UNLISTED PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 47999 | UNLISTED PROCEDURE, BILIARY TRACT | UNLISTED PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 48160 | PANCREATECTOMY, TOTAL OR SUBTOTAL, WITH AUTOLOGOUS TRANSPLANTATION OF PANCREAS OR PANCREATIC ISLET CELLS | TRANSPLANT | TRANSPLANT | 11/4/2019 |
| 48550 | DONOR PANCREATECTOMY | TRANSPLANT | TRANSPLANT | 11/4/2019 |
| 48551 | PREP DONOR PANCREAS | TRANSPLANT | TRANSPLANT | 11/4/2019 |
| 48552 | PREP DONOR PANCREAS/VENO | TRANSPLANT | TRANSPLANT | 11/4/2019 |
| 48554 | TRANSPLANTATION OF PANCREATIC ALLOGRAFT | TRANSPLANT | TRANSPLANT | 11/4/2019 |
| 48556 | REMOVAL OF TRANSPLANTED PANCREATIC ALLOGRAFT | TRANSPLANT | TRANSPLANT | 11/4/2019 |
| 48999 | PANCREAS SURGERY PROCEDU | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 1/1/2026 |
| 49329 | UNLISTED LAPAROSCOPY PROCEDURE, ABDOMEN, PERITONEUM AND OMENTUM | UNLISTED PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 49411 | INS MARK ABD/PEL FOR RT | THERAPEUTIC RADIOLOGY | CHEMOTHERAPY/RADIATION | 5/31/2025 |
| 49412 | INS DEVICE FOR RT GUIDE OPEN | THERAPEUTIC RADIOLOGY | CHEMOTHERAPY/RADIATION | 5/31/2025 |
| 49659 | LAPARO PROC HERNIA REPAI | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 1/1/2026 |
| 49999 | ABDOMEN SURGERY PROCEDUR | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 1/1/2026 |
| 50300 | REMOVE CADAVER DONOR KID | TRANSPLANT | TRANSPLANT | 8/31/2024 |
| 50320 | DONOR NEPHRECTOMY, OPEN FROM LIVING DONOR (EXCLUDING PREPARATION AND MAINTENANCE OF ALLOGRAFT) | TRANSPLANT | TRANSPLANT | 11/4/2019 |
| 50323 | PREP CADAVER RENAL ALLOG | TRANSPLANT | TRANSPLANT | 8/31/2024 |
| 50325 | BACKBENCH STANDARD PREPARATION OF LIVING DONOR RENAL ALLOGRAFT (OPEN OR LAPAROSCOPIC) PRIOR TO TRANSPLANTATION, INCLUDING DISSECTION AND REMOVAL OF PERINEPHRIC FAT AND PREPARATION OF URETER(S), RENAL VEIN(S), AND RENAL ARTERY(S), LIGATING BRANCHES, AS NEC | TRANSPLANT | TRANSPLANT | 11/4/2019 |
| 50327 | BACKBENCH RECONSTRUCTION OF CADAVER OR LIVING DONOR RENAL ALLOGRAFT PRIOR TO TRANSPLANTATION; VENOUS ANASTOMOSIS, EACH | TRANSPLANT | TRANSPLANT | 11/4/2019 |
| 50328 | BACKBENCH RECONSTRUCTION OF CADAVER OR LIVING DONOR RENAL ALLOGRAFT PRIOR TO TRANSPLANTATION; ARTERIAL ANASTOMOSIS, EACH | TRANSPLANT | TRANSPLANT | 11/4/2019 |
| 50329 | BACKBENCH RECONSTRUCTION OF CADAVER OR LIVING DONOR RENAL ALLOGRAFT PRIOR TO TRANSPLANTATION; URETERAL ANASTOMOSIS, EACH | TRANSPLANT | TRANSPLANT | 11/4/2019 |
| 50340 | RECIPIENT NEPHRECTOMY (SEPARATE PROCEDURE) | TRANSPLANT | TRANSPLANT | 11/4/2019 |
| 50360 | RENAL ALLOTRANSPLANTATION, IMPLANTATION OF GRAFT; EXCLUDING DONOR AND RECIPIENT NEPHRECTOMY | TRANSPLANT | TRANSPLANT | 11/4/2019 |
| 50365 | RENAL ALLOTRANSPLANTATION, IMPLANTATION OF GRAFT; WITH RECIPIENT NEPHRECTOMY | TRANSPLANT | TRANSPLANT | 11/4/2019 |
| 50370 | REMOVAL OF TRANSPLANTED RENAL ALLOGRAFT | TRANSPLANT | TRANSPLANT | 11/4/2019 |
| 50547 | LAPAROSCOPY, SURGICAL; DONOR NEPHRECTOMY FROM LIVING DONOR (EXCLUDING PREPARATION AND MAINTENANCE OF ALLOGRAFT) | TRANSPLANT | TRANSPLANT | 11/4/2019 |
| 50949 | UNLISTED LAPAROSCOPY PROCEDURE, URETER | UNLISTED PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 51721 | INS TRURL ABL TRNSDC THR US | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 8/20/2025 |
| 53451 | PERIURETHRAL TRANSPERINEAL ADJUSTABLE BALLOON CONTINENCE DEVICE; BILATERAL INSERTION, INCLUDING CYSTOURETHROSCOPY AND IMAGING GUIDANCE | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 1/1/2026 |
| 53452 | PERIURETHRAL TRANSPERINEAL ADJUSTABLE BALLOON CONTINENCE DEVICE; UNILATERAL INSERTION, INCLUDING CYSTOURETHROSCOPY AND IMAGING GUIDANCE | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 1/1/2026 |
| 53865 | CYSTO INSJ DEV ISCHMC RMDLG | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 12/31/2024 |
| 53899 | UNLISTED PROCEDURE, URINARY SYSTEM | UNLISTED PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |

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| 54125 | REMOVAL OF PENIS | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 12/4/2021 |
| 54161 | CIRCUMCISION, SURGICAL EXCISION OTHER THAN CLAMP, DEVICE OR DORSAL SLIT; OLDER THAN 28 DAYS | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 54400 | INSERTION OF PENILE PROSTHESIS; NON-INFLATABLE (SEMI-RIGID) | ERECTILE DYSFUNCTION | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 54401 | INSERTION OF PENILE PROSTHESIS; INFLATABLE (SELF-CONTAINED) | ERECTILE DYSFUNCTION | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 54405 | INSERTION OF MULTI-COMPONENT, INFLATABLE PENILE PROSTHESIS, INCLUDING PLACEMENT OF PUMP, CYLINDERS, AND RESERVOIR | ERECTILE DYSFUNCTION | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 55875 | TRANSPERI NEEDLE PLACE P | THERAPEUTIC RADIOLOGY | OUTPATIENT SURGICAL PROCEDURES | 5/31/2025 |
| 55876 | PLACE RT DEVICE/MARKER P | THERAPEUTIC RADIOLOGY | OUTPATIENT SURGICAL PROCEDURES | 5/31/2025 |
| 55880 | ABLATION OF MALIGNANT PROSTATE TISSUE, TRANSRECTAL, WITH HIGH INTENSITY-FOCUSED ULTRASOUND (HIFU), INCLUDING ULTRASOUND GUIDANCE | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 12/18/2020 |
| 55881 | ABLT TRURL PRST8 TIS THRM US | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 8/20/2025 |
| 55882 | ABLT TRURL PRST8 TIS TRNSDCR | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 8/20/2025 |
| 55899 | GENITAL SURGERY PROCEDUR | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 1/1/2026 |
| 55920 | PLACE NEEDLES PELVIC FOR | THERAPEUTIC RADIOLOGY | OUTPATIENT SURGICAL PROCEDURES | 5/31/2025 |
| 55970 | INTERSEX SURGERY; MALE TO FEMALE | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 55980 | INTERSEX SURGERY; FEMALE TO MALE | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 56620 | VULVECTOMY SIMPLE; PARTIAL | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 56805 | REPAIR CLITORIS | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 12/4/2021 |
| 57110 | REMOVE VAGINA WALL COMPL | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 12/4/2021 |
| 57155 | INSERT UTERI TANDEM/OVOI | THERAPEUTIC RADIOLOGY | OUTPATIENT SURGICAL PROCEDURES | 5/31/2025 |
| 57156 | INS VAG BRACHYTX DEVICE | THERAPEUTIC RADIOLOGY | OUTPATIENT SURGICAL PROCEDURES | 5/31/2025 |
| 57291 | CONSTRUCTION OF VAGINA | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 12/4/2021 |
| 57292 | CONSTRUCT VAGINA WITH GR | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 12/4/2021 |
| 57335 | REPAIR VAGINA | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 12/4/2021 |
| 57700 | REVISION OF CERVIX | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 9/13/2025 |
| 58346 | INSERT HEYMAN UTERI CAPS | THERAPEUTIC RADIOLOGY | OUTPATIENT SURGICAL PROCEDURES | 5/31/2025 |
| 58578 | LAPARO PROC UTERUS | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 1/1/2026 |
| 58579 | HYSTEROSCOPE PROCEDURE | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 1/1/2026 |
| 58679 | UNLISTED LAPAROSCOPY PROCEDURE, OVIDUCT, OVARY | UNLISTED PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 58999 | GENITAL SURGERY PROCEDUR | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 1/1/2026 |
| 59897 | UNLISTED FETAL INVASIVE PROCEDURE, INCLUDING ULTRASOUND GUIDANCE | UNLISTED PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 60660 | ABLTJ 1/+THYR NDUL 1LOBE PRQ | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 12/31/2024 |
| 60661 | ABLTJ 1/+THYR NDUL ADDL PRQ | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 12/31/2024 |
| 60699 | UNLISTED PROCEDURE, ENDOCRINE SYSTEM | UNLISTED PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 61624 | TRANSCATH OCCLUSION CNS | VASCULAR INTERVENTIONS | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 61630 | INTRACRANIAL ANGIOPLASTY | VASCULAR INTERVENTIONS | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 61635 | INTRACRAN ANGIOPLSTY W/S | VASCULAR INTERVENTIONS | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 61736 | LASER INTERSTITIAL THERMAL THERAPY (LITT) OF LESION, INTRACRANIAL, INCLUDING BURR HOLE(S), WITH MAGNETIC RESONANCE IMAGING GUIDANCE, WHEN PERFORMED; SINGLE TRAJECTORY FOR 1 SIMPLE LESION | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 12/30/2021 |
| 61737 | LASER INTERSTITIAL THERMAL THERAPY (LITT) OF LESION, INTRACRANIAL, INCLUDING BURR HOLE(S), WITH MAGNETIC RESONANCE IMAGING GUIDANCE, WHEN PERFORMED; MULTIPLE TRAJECTORIES FOR MULTIPLE OR COMPLEX LESION(S) | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 12/30/2021 |
| 61796 | SRS CRANIAL LESION SIMPL | THERAPEUTIC RADIOLOGY | OUTPATIENT SURGICAL PROCEDURES | 5/31/2025 |

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| 61797 | SRS CRAN LES SIMPLE ADDL | THERAPEUTIC RADIOLOGY | OUTPATIENT SURGICAL PROCEDURES | 5/31/2025 |
| 61798 | SRS CRANIAL LESION COMPL | THERAPEUTIC RADIOLOGY | OUTPATIENT SURGICAL PROCEDURES | 5/31/2025 |
| 61799 | SRS CRAN LES COMPLEX ADD | THERAPEUTIC RADIOLOGY | OUTPATIENT SURGICAL PROCEDURES | 5/31/2025 |
| 61800 | APPLY SRS HEADFRAME ADD- | THERAPEUTIC RADIOLOGY | OUTPATIENT SURGICAL PROCEDURES | 5/31/2025 |
| 61863 | IMPLANT NEUROELECTRODE | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 12/4/2021 |
| 61867 | IMPLANT NEUROELECTRODE | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 12/4/2021 |
| 61886 | IMPLANT NEUROSTIM ARRAYS | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 1/1/2026 |
| 61889 | INSERTION OF SKULL-MOUNTED CRANIAL NEUROSTIMULATOR PULSE GENERATOR OR RECEIVER, INCLUDING CRANIECTOMY OR CRANIOTOMY, WHEN PERFORMED, WITH DIRECT OR INDUCTIVE COUPLING, WITH CONNECTION TO DEPTH AND/OR CORTICAL STRIP ELECTRODE ARRAY(S) | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 12/28/2023 |
| 62263 | PERCUTANEOUS LYSIS OF EPIDURAL ADHESIONS USING SOLUTION INJECTION (EG, HYPERTONIC SALINE, ENZYME) OR MECHANICAL MEANS (EG, CATHETER) INCLUDING RADIOLOGIC LOCALIZATION (INCLUDES CONTRAST WHEN ADMINISTERED), MULTIPLE ADHESIOLYSIS SESSIONS; 2 OR MORE DAYS | SPINAL SERVICES | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 62264 | PERCUTANEOUS LYSIS OF EPIDURAL ADHESIONS USING SOLUTION INJECTION (EG, HYPERTONIC SALINE, ENZYME) OR MECHANICAL MEANS (EG, CATHETER) INCLUDING RADIOLOGIC LOCALIZATION (INCLUDES CONTRAST WHEN ADMINISTERED), MULTIPLE ADHESIOLYSIS SESSIONS; 1 DAY | SPINAL SERVICES | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 62287 | PERCUTANEOUS DISCECTOMY | SPINAL PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 62290 | INJECT FOR SPINE DISK X- | SPINAL PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 62361 | IMPLANTATION OR REPLACEMENT OF DEVICE FOR INTRATHECAL OR EPIDURAL DRUG INFUSION; NON-PROGRAMMABLE PUMP | SPINAL SERVICES | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 62362 | IMPLANTATION OR REPLACEMENT OF DEVICE FOR INTRATHECAL OR EPIDURAL DRUG INFUSION; PROGRAMMABLE PUMP, INCLUDING PREPARATION OF PUMP, WITH OR WITHOUT PROGRAMMING | SPINAL SERVICES | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 62380 | NDSC DCMPRN 1 NTRSPC LUMBAR | SPINAL PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 63001 | REMOVAL OF SPINAL LAMINA | SPINAL PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 63005 | REMOVAL OF SPINAL LAMINA | SPINAL PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 63012 | REMOVAL OF SPINAL LAMINA | SPINAL PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 63015 | REMOVAL OF SPINAL LAMINA | SPINAL PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 63016 | REMOVAL OF SPINAL LAMINA | SPINAL PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 63017 | REMOVAL OF SPINAL LAMINA | SPINAL PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 63020 | LAMINOTOMY (HEMILAMINECTOMY), WITH DECOMPRESSION OF NERVE ROOT(S), INCLUDING PARTIAL FACETECTOMY, FORAMINOTOMY AND/OR EXCISION OF HERNIATED INTERVERTEBRAL DISC; 1 INTERSPACE, CERVICAL | SPINAL PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 63030 | LOW BACK DISK SURGERY | SPINAL PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 63042 | LAMINOTOMY SINGLE LUMBAR | SPINAL PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 63044 | LAMINOTOMY ADDL LUMBAR | SPINAL PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 63045 | LAMINECTOMY, FACETECTOMY AND FORMINOTOMY (UNILATERAL OR BILATERAL WITH DECOMPRESSION OF SPINAL CORD, CAUDA EQUINA AND/OR NERVE ROOT[S]), [EG, SPINAL OR LATERAL RECESS STENOSIS], SINGLE VERTEBRAL SEGMENT; CERVICAL | SPINAL PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 63047 | REMOVAL OF SPINAL LAMINA | SPINAL PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 63048 | REMOVE SPINAL LAMINA ADD | SPINAL PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 63056 | DECOMPRESS SPINAL CORD | SPINAL PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 63057 | DECOMPRESS SPINE CORD AD | SPINAL PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 63077 | SPINE DISK SURGERY THORA | SPINAL PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 63078 | SPINE DISK SURGERY THORA | SPINAL PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 63081 | REMOVAL OF VERTEBRAL BOD | SPINAL PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 63082 | REMOVE VERTEBRAL BODY AD | SPINAL PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 63087 | REMOVAL OF VERTEBRAL BOD | SPINAL PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 63088 | REMOVE VERTEBRAL BODY AD | SPINAL PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 63090 | REMOVAL OF VERTEBRAL BOD | SPINAL PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 63091 | REMOVE VERTEBRAL BODY AD | SPINAL PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 63267 | EXCISE INTRASPINAL LESIO | SPINAL PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 63620 | STEREOTACTIC RADIOSURGERY (PARTICLE BEAM, GAMMA RAY, OR LINEAR ACCELERATOR); 1 SPINAL LESION | THERAPEUTIC RADIOLOGY | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |

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| 63621 | STEREOTACTIC RADIOSURGERY (PARTICLE BEAM, GAMMA RAY, OR LINEAR ACCELERATOR); EACH ADDITIONAL SPINAL LESION (LIST SEPARATELY IN ADDITION TO CODE FOR PRIMARY PROCEDURE) | THERAPEUTIC RADIOLOGY | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 63650 | IMPLANT NEUROELECTRODES | SPINAL SERVICES | OUTPATIENT SURGICAL PROCEDURES | 12/4/2021 |
| 63655 | IMPLANT NEUROELECTRODES | SPINAL SERVICES | OUTPATIENT SURGICAL PROCEDURES | 12/4/2021 |
| 63685 | INSRT/REDO SPINE N GENER | SPINAL SERVICES | OUTPATIENT SURGICAL PROCEDURES | 12/4/2021 |
| 64553 | IMPLANT NEUROELECTRODES | SPINAL SERVICES | OUTPATIENT SURGICAL PROCEDURES | 12/4/2021 |
| 64555 | IMPLANT NEUROELECTRODES | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 1/1/2026 |
| 64568 | INC FOR VAGUS N ELECT IMPL | SPINAL SERVICES | OUTPATIENT SURGICAL PROCEDURES | 12/4/2021 |
| 64575 | IMPLANT NEUROELECTRODES | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 1/1/2026 |
| 64582 | OPEN IMPLANTATION OF HYPOGLOSSAL NERVE NEUROSTIMULATOR ARRAY, PULSE GENERATOR, AND DISTAL RESPIRATORY SENSOR ELECTRODE OR ELECTRODE ARRAY | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 12/30/2021 |
| 64590 | INSRT/REDO PERPH N GENER | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 1/1/2026 |
| 64596 | INSERTION OR REPLACEMENT OF PERCUTANEOUS ELECTRODE ARRAY, PERIPHERAL NERVE, WITH INTEGRATED NEUROSTIMULATOR, INCLUDING IMAGING GUIDANCE, WHEN PERFORMED; INITIAL ELECTRODE ARRAY | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 1/1/2026 |
| 64597 | INSERTION OR REPLACEMENT OF PERCUTANEOUS ELECTRODE ARRAY, PERIPHERAL NERVE, WITH INTEGRATED NEUROSTIMULATOR, INCLUDING IMAGING GUIDANCE, WHEN PERFORMED; EACH ADDITIONAL ELECTRODE ARRAY (LIST SEPARATELY IN ADDITION TO CODE FOR PRIMARY PROCEDURE) | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 1/1/2026 |
| 64611 | CHEMODENERV SALIV GLANDS | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 10/18/2025 |
| 64612 | DESTROY NERVE FACE MUSCL | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 10/18/2025 |
| 64615 | CHEMODENERV MUSC MIGRAIN | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 10/18/2025 |
| 64628 | THERMAL DESTRUCTION OF INTRAOSSEOUS BASIVERTEBRAL NERVE, INCLUDING ALL IMAGING GUIDANCE; FIRST 2 VERTEBRAL BODIES, LUMBAR OR SACRAL | SPINAL PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 64629 | THERMAL DESTRUCTION OF INTRAOSSEOUS BASIVERTEBRAL NERVE, INCLUDING ALL IMAGING GUIDANCE; EACH ADDITIONAL VERTEBRAL BODY, LUMBAR OR SACRAL (LIST SEPARATELY IN ADDITION TO CODE FOR PRIMARY PROCEDURE) | SPINAL PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 64633 | DESTRUCTION BY NEUROLYTIC AGENT, PARAVERTEBRAL FACET JOINT NERVE(S), WITH IMAGING GUIDANCE (FLUOROSCOPY OR CT); CERVICAL OR THORACIC, SINGLE FACET JOINT | SPINAL SERVICES | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 64634 | DESTRUCTION BY NEUROLYTIC AGENT, PARAVERTEBRAL FACET JOINT NERVE(S), WITH IMAGING GUIDANCE (FLUOROSCOPY OR CT); CERVICAL OR THORACIC, EACH ADDITIONAL FACET JOINT (LIST SEPARATELY IN ADDITION TO CODE FOR PRIMARY PROCEDURE) | SPINAL SERVICES | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 64635 | DESTRUCTION BY NEUROLYTIC AGENT, PARAVERTEBRAL FACET JOINT NERVE(S), WITH IMAGING GUIDANCE (FLUOROSCOPY OR CT); LUMBAR OR SACRAL, SINGLE FACET JOINT | SPINAL SERVICES | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 64636 | DESTRUCTION BY NEUROLYTIC AGENT, PARAVERTEBRAL FACET JOINT NERVE(S), WITH IMAGING GUIDANCE (FLUOROSCOPY OR CT); LUMBAR OR SACRAL, EACH ADDITIONAL FACET JOINT (LIST SEPARATELY IN ADDITION TO CODE FOR PRIMARY PROCEDURE) | SPINAL SERVICES | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 64714 | REVISE LOW BACK NERVE(S) | SPINAL SERVICES | OUTPATIENT SURGICAL PROCEDURES | 1/23/2020 |
| 64912 | NRV RPR W/NRV ALGRFT 1ST | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 1/1/2026 |
| 64913 | NRV RPR W/NRV ALGRFT EA ADDL | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 11/4/2019 |
| 64999 | NERVOUS SYSTEM SURGERY | SPINAL PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| 65710 | CORNEAL TRANSPLANT | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 9/13/2025 |
| 65760 | KERATOMILEUSIS | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 11/4/2019 |
| 65772 | CORNEAL RELAXING INCISION FOR CORRECTION OF SURGICALLY INDUCED ASTIGMATISM | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |

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| 65785 | IMPLTJ NTRSTRML CRNL RNG SEG | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 1/1/2026 |
| 66174 | TRANSLUM DIL EYE CANAL | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 12/4/2021 |
| 66175 | TRNSLUM DIL EYE CANAL W/ | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 12/4/2021 |
| 66179 | AQUEOUS SHUNT EYE W/O GRAFT | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 66183 | INSERT ANT DRAINAGE DEVICE | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 66683 | IMPLANTATION IRIS PROSTHESIS | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 1/1/2026 |
| 66999 | EYE SURGERY PROCEDURE | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 1/1/2026 |
| 67299 | UNLISTED PROCEDURE, POSTERIOR SEGMENT | UNLISTED PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 67900 | REPAIR OF BROW PTOSIS (SUPRACILIARY, MID-FOREHEAD OR CORONAL APPROACH) | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 67901 | REPAIR OF BLEPHAROPTOSIS; FRONTALIS MUSCLE TECHNIQUE WITH SUTURE OR OTHER MATERIAL | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 67902 | REPAIR OF BLEPHAROPTOSIS; FRONTALIS MUSCLE TECHNIQUE WITH FASCIAL SLING (INCLUDES OBTAINING FASCIA) | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 67903 | REPAIR OF BLEPHAROPTOSIS; (TARSO) LEVATOR RESECTION OR ADVANCEMENT, INTERNAL APPROACH | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 67904 | REPAIR OF BLEPHAROPTOSIS; (TARSO) LEVATOR RESECTION OR ADVANCEMENT, EXTERNAL APPROACH | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 67906 | REPAIR OF BLEPHAROPTOSIS; SUPERIOR RECTUS TECHNIQUE WITH FASCIAL SLING (INCLUDES OBTAINING FASCIA) | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 67908 | REPAIR OF BLEPHAROPTOSIS; CONJUNCTIVO-TARSO-MULLERÄ€MS MUSCLE-LEVATOR RESECTION (E.G., FASANELLA-SERVAT TYPE) | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 67911 | CORRECTION OF LID RETRACTION | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 67999 | UNLISTED PROCEDURE, EYELIDS | UNLISTED PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 68899 | UNLISTED PROCEDURE, LACRIMAL SYSTEM | UNLISTED PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 69300 | OTOPLASTY, PROTRUDING EAR, WITH OR WITHOUT SIZE REDUCTION | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 69399 | UNLISTED PROCEDURE, EXTERNAL EAR | UNLISTED PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 69705 | NASOPHARYNGOSCOPY, SURGICAL, WITH DILATION OF EUSTACHIAN TUBE (IE, BALLOON DILATION); UNILATERAL | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 9/13/2025 |
| 69706 | NASOPHARYNGOSCOPY, SURGICAL, WITH DILATION OF EUSTACHIAN TUBE (IE, BALLOON DILATION); BILATERAL | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 1/1/2026 |
| 69714 | IMPLANTATION, OSSEOINTEGRATED IMPLANT, TEMPORAL BONE, WITH PRECUTANEOUS ATTACHMENT TO EXTERNAL SPEECH PROCESSOR/COCHLER STIMULATOR; WITHOUT MASTOIDECTOMY | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 69716 | IMPLANTATION, OSSEOINTEGRATED IMPLANT, SKULL; WITH MAGNETIC TRANSCUTANEOUS ATTACHMENT TO EXTERNAL SPEECH PROCESSOR | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 12/30/2021 |
| 69799 | MIDDLE EAR SURGERY PROCE | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 1/1/2026 |
| 69930 | COCHLEAR DEVICE IMPLANTATION, WITH OR WITHOUT MASTOIDECTOMY | EAR DEVICES/COCHLEAR IMPLANT | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 69949 | UNLISTED PROCEDURE, INNER EAR | UNLISTED PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 70336 | MRI (E.G., PROTON) IMAGING, TEMPOROMANDIBULAR JOINT(S) | DIAGNOSTIC RADIOLOGY | COMPLEX IMAGING | 11/4/2019 |
| 70490 | COMPUTED TOMOGRAPHY (CT), SOFT TISSUE NECK; WITHOUT CONTRAST MATERIAL | DIAGNOSTIC RADIOLOGY | COMPLEX IMAGING | 11/4/2019 |
| 70491 | COMPUTED TOMOGRAPHY (CT), SOFT TISSUE NECK; WITH CONTRAST MATERIAL(S) | DIAGNOSTIC RADIOLOGY | COMPLEX IMAGING | 11/4/2019 |
| 70492 | COMPUTED TOMOGRAPHY (CT), SOFT TISSUE NECK; WITHOUT CONTRAST MATERIAL FOLLOWED BY CONTRAST MATERIAL(S) AND FURTHER SECTIONS | DIAGNOSTIC RADIOLOGY | COMPLEX IMAGING | 11/4/2019 |
| 70498 | CTA NECK, WITH CONTRAST MATERIAL(S), INCLUDING NONCONTRAST IMAGES, IF PERFORMED, AND IMAGE POST-PROCESSING. | DIAGNOSTIC RADIOLOGY | COMPLEX IMAGING | 11/4/2019 |
| 70540 | MRI ORBIT, FACE, NECK, WITHOUT CONTRAST MATERIALS | DIAGNOSTIC RADIOLOGY | COMPLEX IMAGING | 11/4/2019 |
| 70542 | MRI, ORBIT, FACE AND NECK, WITH CONTRAST MATERIALS | DIAGNOSTIC RADIOLOGY | COMPLEX IMAGING | 11/4/2019 |

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| 70543 | MRI, ORBIT, FACE AND NECK, WITHOUT CONTRAST MATERIAL(S), FOLLOWED BY CONTRAST MATERIAL(S) AND FURTHER SEQUENCES | DIAGNOSTIC RADIOLOGY | COMPLEX IMAGING | 11/4/2019 |
| 70547 | MRA, NECK; WITHOUT CONTRAST MATERIAL(S) | DIAGNOSTIC RADIOLOGY | Diagnostic Testing and Radiology services | 11/4/2019 |
| 70548 | MRA, NECK; WITH CONTRAST MATERIAL(S) | DIAGNOSTIC RADIOLOGY | Diagnostic Testing and Radiology services | 11/4/2019 |
| 70549 | MRA, NECK; WITHOUT CONTRAST MATERIAL(S), FOLLOWED BY CONTRAST MATERIAL(S) AND FURTHER SEQUENCES | DIAGNOSTIC RADIOLOGY | Diagnostic Testing and Radiology services | 11/4/2019 |
| 71250 | COMPUTED TOMOGRAPHY (CT), THORAX; WITHOUT CONTRAST MATERIAL | DIAGNOSTIC RADIOLOGY | COMPLEX IMAGING | 11/4/2019 |
| 71260 | COMPUTED TOMOGRAPHY (CT), THORAX; WITH CONTRAST MATERIAL(S) | DIAGNOSTIC RADIOLOGY | COMPLEX IMAGING | 11/4/2019 |
| 71270 | COMPUTED TOMOGRAPHY (CT), THORAX; WITHOUT CONTRAST MATERIAL, FOLLOWED BY CONTRAST MATERIAL(S) AND FURTHER SECTIONS | DIAGNOSTIC RADIOLOGY | COMPLEX IMAGING | 11/4/2019 |
| 71275 | CTA CHEST (NON-CORONARY) WITH CONTRAST MATERIAL(S), INCLUDING NONCONTRAST IMAGES, IF PERFORMED AND IMAGE POST-PROCESSING. | DIAGNOSTIC RADIOLOGY | COMPLEX IMAGING | 11/4/2019 |
| 71550 | MRI, CHEST (E.G., FOR EVALUATION OF HILAR AND MEDIASTINAL LYMPHADENOPATHY); WITHOUT CONTRAST MATERIAL(S) | DIAGNOSTIC RADIOLOGY | COMPLEX IMAGING | 11/4/2019 |
| 71551 | MRI, CHEST (E.G., FOR EVALUATION OF HILAR AND MEDIASTINAL LYMPHADENOPATHY); WITH CONTRAST MATERIAL(S) | DIAGNOSTIC RADIOLOGY | COMPLEX IMAGING | 11/4/2019 |
| 71552 | MRI, CHEST (E.G., FOR EVALUATION OF HILAR AND MEDIASTINAL LYMPHADENOPATHY); WITHOUT CONTRAST MATERIAL(S), FOLLOWED BY CONTRAST MATERIAL(S) AND FURTHER SEQUENCES | DIAGNOSTIC RADIOLOGY | COMPLEX IMAGING | 11/4/2019 |
| 71555 | MRA, CHEST (EXCLUDING MYOCARDIUM), WITH OR WITHOUT CONTRAST MATERIALS | DIAGNOSTIC RADIOLOGY | Diagnostic Testing and Radiology services | 11/4/2019 |
| 72125 | COMPUTED TOMOGRAPHY (CT), CERVICAL SPINE; WITHOUT CONTRAST MATERIAL | DIAGNOSTIC RADIOLOGY | COMPLEX IMAGING | 11/4/2019 |
| 72126 | COMPUTED TOMOGRAPHY (CT), CERVICAL SPINE; WITH CONTRAST MATERIAL | DIAGNOSTIC RADIOLOGY | COMPLEX IMAGING | 11/4/2019 |
| 72127 | COMPUTED TOMOGRAPHY (CT), CERVICAL SPINE; WITHOUT CONTRAST MATERIAL, FOLLOWED BY CONTRAST MATERIAL(S) AND FURTHER SECTIONS | DIAGNOSTIC RADIOLOGY | COMPLEX IMAGING | 11/4/2019 |
| 72128 | COMPUTED TOMOGRAPHY (CT), THORACIC SPINE; WITHOUT CONTRAST MATERIAL | DIAGNOSTIC RADIOLOGY | COMPLEX IMAGING | 11/4/2019 |
| 72129 | COMPUTED TOMOGRAPHY (CT), THORACIC SPINE; WITH CONTRAST MATERIAL | DIAGNOSTIC RADIOLOGY | COMPLEX IMAGING | 11/4/2019 |
| 72130 | COMPUTED TOMOGRAPHY (CT), THORACIC SPINE; WITHOUT CONTRAST MATERIAL, FOLLOWED BY CONTRAST MATERIAL(S) AND FURTHER SECTIONS | DIAGNOSTIC RADIOLOGY | COMPLEX IMAGING | 11/4/2019 |
| 72131 | COMPUTED TOMOGRAPHY (CT), LUMBAR SPINE; WITHOUT CONTRAST MATERIAL | DIAGNOSTIC RADIOLOGY | COMPLEX IMAGING | 11/4/2019 |
| 72132 | COMPUTED TOMOGRAPHY (CT), LUMBAR SPINE; WITH CONTRAST MATERIAL | DIAGNOSTIC RADIOLOGY | COMPLEX IMAGING | 11/4/2019 |
| 72133 | COMPUTED TOMOGRAPHY (CT), LUMBAR SPINE; WITHOUT CONTRAST MATERIAL, FOLLOWED BY CONTRAST MATERIAL(S) AND FURTHER SECTIONS | DIAGNOSTIC RADIOLOGY | COMPLEX IMAGING | 11/4/2019 |
| 72141 | MRI, SPINAL CANAL AND CONTENTS, CERVICAL; WITHOUT CONTRAST MATERIAL | DIAGNOSTIC RADIOLOGY | COMPLEX IMAGING | 11/4/2019 |
| 72142 | MRI, SPINAL CANAL AND CONTENTS, CERVICAL; WITH CONTRAST MATERIAL(S) | DIAGNOSTIC RADIOLOGY | COMPLEX IMAGING | 11/4/2019 |
| 72146 | MRI, SPINAL CANAL AND CONTENTS, THORACIC; WITHOUT CONTRAST MATERIAL | DIAGNOSTIC RADIOLOGY | COMPLEX IMAGING | 11/4/2019 |
| 72147 | MRI SPINAL CANAL AND CONTENTS, THORACIC; WITH CONTRAST MATERIAL(S) | DIAGNOSTIC RADIOLOGY | COMPLEX IMAGING | 11/4/2019 |
| 72148 | MRI SPINAL CANAL AND CONTENTS, LUMBAR; WITHOUT CONTRAST MATERIAL | DIAGNOSTIC RADIOLOGY | COMPLEX IMAGING | 11/4/2019 |
| 72149 | MRI, SPINAL CANAL AND CONTENTS, LUMBAR; WITH CONTRAST MATERIAL(S) | DIAGNOSTIC RADIOLOGY | COMPLEX IMAGING | 11/4/2019 |
| 72156 | MRI, SPINAL CANAL AND CONTENTS, WITHOUT CONTRAST MATERIAL, FOLLOWED BY CONTRAST MATERIAL(S) AND FURTHER SEQUENCES; CERVICAL | DIAGNOSTIC RADIOLOGY | COMPLEX IMAGING | 11/4/2019 |
| 72157 | MRI, SPINAL CANAL AND CONTENTS, WITHOUT CONTRAST MATERIAL, FOLLOWED BY CONTRAST MATERIAL(S) AND FURTHER SEQUENCES; THORACIC | DIAGNOSTIC RADIOLOGY | COMPLEX IMAGING | 11/4/2019 |
| 72158 | MRI, SPINAL CANAL AND CONTENTS, WITHOUT CONTRAST MATERIAL, FOLLOWED BY CONTRAST MATERIAL(S) AND FURTHER SEQUENCES; LUMBAR | DIAGNOSTIC RADIOLOGY | COMPLEX IMAGING | 11/4/2019 |
| 72159 | MRA, SPINAL CANAL AND CONTENTS, WITH OR WITHOUT CONTRAST MATERIAL(S) | DIAGNOSTIC RADIOLOGY | COMPLEX IMAGING | 11/4/2019 |

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| 72191 | CTA PELVIS, WITH CONTRAST MATERIAL(S), INCLUDING NONCONTRAST IMAGES, IF PERFORMED, AND IMAGE POST-PROCESSING. | DIAGNOSTIC RADIOLOGY | COMPLEX IMAGING | 11/4/2019 |
| 72192 | COMPUTED TOMOGRAPHY (CT), PELVIS; WITHOUT CONTRAST MATERIAL | DIAGNOSTIC RADIOLOGY | COMPLEX IMAGING | 11/4/2019 |
| 72193 | COMPUTED TOMOGRAPHY (CT), PELVIS; WITH CONTRAST MATERIAL(S) | DIAGNOSTIC RADIOLOGY | COMPLEX IMAGING | 11/4/2019 |
| 72194 | COMPUTED TOMOGRAPHY (CT), PELVIS; WITHOUT CONTRAST MATERIAL, FOLLOWED BY CONTRAST MATERIAL(S) AND FURTHER SECTIONS | DIAGNOSTIC RADIOLOGY | COMPLEX IMAGING | 11/4/2019 |
| 72195 | MRI, PELVIS; WITHOUT CONTRAST MATERIAL(S) | DIAGNOSTIC RADIOLOGY | COMPLEX IMAGING | 11/4/2019 |
| 72196 | MRI, PELVIS; WITH CONTRAST MATERIAL(S) | DIAGNOSTIC RADIOLOGY | COMPLEX IMAGING | 11/4/2019 |
| 72197 | MRI, PELVIS; WITHOUT CONTRAST MATERIAL(S), FOLLOWED BY CONTRAST MATERIAL(S) AND FURTHER SEQUENCES | DIAGNOSTIC RADIOLOGY | COMPLEX IMAGING | 11/4/2019 |
| 72198 | MRA, PELVIS, WITH OR WITHOUT CONTRAST MATERIAL(S) | DIAGNOSTIC RADIOLOGY | Diagnostic Testing and Radiology services | 11/4/2019 |
| 73200 | COMPUTED TOMOGRAPHY (CT), UPPER EXTREMITY; WITHOUT CONTRAST MATERIAL | DIAGNOSTIC RADIOLOGY | COMPLEX IMAGING | 11/4/2019 |
| 73201 | COMPUTED TOMOGRAPHY (CT), UPPER EXTREMITY; WITH CONTRAST MATERIAL(S) | DIAGNOSTIC RADIOLOGY | COMPLEX IMAGING | 11/4/2019 |
| 73202 | COMPUTED TOMOGRAPHY (CT), UPPER EXTREMITY; WITHOUT CONTRAST MATERIAL, FOLLOWED BY CONTRAST MATERIAL(S) AND FURTHER SECTIONS | DIAGNOSTIC RADIOLOGY | COMPLEX IMAGING | 11/4/2019 |
| 73206 | CTA UPPER EXREMITY, WITH CONTRAST MATERIAL(S), INCLUDING NONCONTRAST IMAGES, IF PERFORMED, AND IMAGE POST-PROCESSING. | DIAGNOSTIC RADIOLOGY | COMPLEX IMAGING | 11/4/2019 |
| 73218 | MRI, UPPER EXTREMITY, OTHER THAN JOINT; WITHOUT CONTRAST MATERIAL(S) | DIAGNOSTIC RADIOLOGY | COMPLEX IMAGING | 11/4/2019 |
| 73219 | MRI, UPPER EXTREMITY, OTHER THAN JOINT; WITH CONTRAST MATERIAL(S) | DIAGNOSTIC RADIOLOGY | COMPLEX IMAGING | 11/4/2019 |
| 73220 | MRI, UPPER EXTREMITY, OTHER THAN JOINT; WITHOUT CONTRAST MATERIAL(S), FOLLOWED BY CONTRAST MATERIAL(S) AND FURTHER SEQUENCES | DIAGNOSTIC RADIOLOGY | COMPLEX IMAGING | 11/4/2019 |
| 73221 | MRI, ANY JOINT OF UPPER EXTREMITY; WITHOUT CONTRAST MATERIAL(S) | DIAGNOSTIC RADIOLOGY | COMPLEX IMAGING | 11/4/2019 |
| 73222 | MRI, ANY JOINT OF UPPER EXTREMITY; WITH CONTRAST MATERIAL(S) | DIAGNOSTIC RADIOLOGY | COMPLEX IMAGING | 11/4/2019 |
| 73223 | MRI, ANY JOINT OF UPPER EXTREMITY; WITHOUT CONTRAST MATERIAL(S), FOLLOWED BY CONTRAST MATERIAL(S) AND FURTHER SEQUENCES | DIAGNOSTIC RADIOLOGY | COMPLEX IMAGING | 11/4/2019 |
| 73225 | MRA, UPPER EXTREMITY, WITH OR WITHOUT CONTRAST MATERIAL(S) | DIAGNOSTIC RADIOLOGY | Diagnostic Testing and Radiology services | 11/4/2019 |
| 73700 | COMPUTED TOMOGRAPHY (CT), LOWER EXTREMITY; WITHOUT CONTRAST MATERIAL | DIAGNOSTIC RADIOLOGY | COMPLEX IMAGING | 11/4/2019 |
| 73701 | COMPUTED TOMOGRAPHY (CT), LOWER EXTREMITY; WITH CONTRAST MATERIAL(S) | DIAGNOSTIC RADIOLOGY | COMPLEX IMAGING | 11/4/2019 |
| 73702 | COMPUTED TOMOGRAPHY (CT), LOWER EXTREMITY; WITHOUT CONTRAST MATERIAL, FOLLOWED BY CONTRAST MATERIAL(S) AND FURTHER SECTIONS | DIAGNOSTIC RADIOLOGY | COMPLEX IMAGING | 11/4/2019 |
| 73706 | CTA LOWER EXTREMITY, WITH CONTRAST MATERIAL(S), INCLUDING NONCONTRAST IMAGES, IF PERFORMED, AND IMAGE POST-PROCESSING. | DIAGNOSTIC RADIOLOGY | Diagnostic Testing and Radiology services | 11/4/2019 |
| 73718 | MRI, LOWER EXTREMITY OTHER THAN JOINT; WITHOUT CONTRAST MATERIAL(S) | DIAGNOSTIC RADIOLOGY | COMPLEX IMAGING | 11/4/2019 |
| 73719 | MRI, LOWER EXTREMITY OTHER THAN JOINT; WITH CONTRAST MATERIAL(S) | DIAGNOSTIC RADIOLOGY | COMPLEX IMAGING | 11/4/2019 |
| 73720 | MRI, LOWER EXTREMITY OTHER THAN JOINT; WITHOUT CONTRAST MATERIAL(S), FOLLOWED BY CONTRAST MATERIAL(S) AND FURTHER SEQUENCES | DIAGNOSTIC RADIOLOGY | COMPLEX IMAGING | 11/4/2019 |
| 73721 | MRI, ANY JOINT OF LOWER EXTREMITY; WITHOUT CONTRAST MATERIAL | DIAGNOSTIC RADIOLOGY | COMPLEX IMAGING | 11/4/2019 |
| 73722 | MRI, ANY JOINT OF LOWER EXTREMITY; WITH CONTRAST MATERIAL(S) | DIAGNOSTIC RADIOLOGY | COMPLEX IMAGING | 11/4/2019 |
| 73723 | MRI, ANY JOINT OF LOWER EXTREMITY; WITHOUT CONTRAST MATERIAL(S), FOLLOWED BY CONTRAST MATERIAL(S) AND FURTHER SEQUENCES | DIAGNOSTIC RADIOLOGY | COMPLEX IMAGING | 11/4/2019 |
| 73725 | MRA, LOWER EXTREMITY, WITH OR WITHOUT CONTRAST MATERIAL(S) | DIAGNOSTIC RADIOLOGY | Diagnostic Testing and Radiology services | 11/4/2019 |
| 74150 | COMPUTED TOMOGRAPHY (CT), ABDOMEN; WITHOUT CONTRAST MATERIAL | DIAGNOSTIC RADIOLOGY | COMPLEX IMAGING | 11/4/2019 |
| 74160 | COMPUTED TOMOGRAPHY (CT), ABDOMEN; WITH CONTRAST MATERIAL(S) | DIAGNOSTIC RADIOLOGY | COMPLEX IMAGING | 11/4/2019 |

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| 74170 | COMPUTED TOMOGRAPHY (CT), ABDOMEN; WITHOUT CONTRAST MATERIAL, FOLLOWED BY CONTRAST MATERIAL(S) AND FURTHER SECTIONS | DIAGNOSTIC RADIOLOGY | COMPLEX IMAGING | 11/4/2019 |
| 74174 | CT ANGIO ABD&PELV W/O&W/ | DIAGNOSTIC RADIOLOGY | COMPLEX IMAGING | 11/4/2019 |
| 74175 | CT ANGIO ABDOM W/O & W/D | DIAGNOSTIC RADIOLOGY | COMPLEX IMAGING | 11/4/2019 |
| 74176 | CT ABD & PELVIS | DIAGNOSTIC RADIOLOGY | COMPLEX IMAGING | 11/4/2019 |
| 74177 | CT ABD & PELV W/CONTRAST | DIAGNOSTIC RADIOLOGY | COMPLEX IMAGING | 11/4/2019 |
| 74178 | CT ABD & PELV 1+ REGNS | DIAGNOSTIC RADIOLOGY | COMPLEX IMAGING | 11/4/2019 |
| 74181 | MRI, ABDOMEN; WITHOUT CONTRAST MATERIAL(S) | DIAGNOSTIC RADIOLOGY | COMPLEX IMAGING | 11/4/2019 |
| 74182 | MRI, ABDOMEN; WITH CONTRAST MATERIAL(S) | DIAGNOSTIC RADIOLOGY | COMPLEX IMAGING | 11/4/2019 |
| 74183 | MRI, ABDOMEN; WITHOUT CONTRAST MATERIAL(S), FOLLOWED BY WITH CONTRAST MATERIAL(S) AND FURTHER SEQUENCES | DIAGNOSTIC RADIOLOGY | COMPLEX IMAGING | 11/4/2019 |
| 74185 | MRA, ABDOMEN, WITH OR WITHOUT CONTRAST MATERIAL(S) | DIAGNOSTIC RADIOLOGY | Diagnostic Testing and Radiology services | 11/4/2019 |
| 75635 | CTA ABDOMINAL AORTA AND BILATERAL ILIOFEMORAL LOWER EXTREMITY RUNOFF, WITH CONTRAST MATERIAL(S), INCLUDING NONCONTRAST IMAGES, IF PERFORMED, AND IMAGE POST-PROCESSING. | DIAGNOSTIC RADIOLOGY | Diagnostic Testing and Radiology services | 11/4/2019 |
| 76390 | MAGNETIC RESONANCE SPECTROSCOPY (MRS) | DIAGNOSTIC RADIOLOGY | Diagnostic Testing and Radiology services | 11/4/2019 |
| 76391 | MR ELASTOGRAPHY | DIAGNOSTIC RADIOLOGY | Diagnostic Testing and Radiology services | 11/4/2019 |
| 76497 | CT PROCEDURE | DIAGNOSTIC RADIOLOGY | COMPLEX IMAGING | 11/4/2019 |
| 76498 | UNLISTED MAGNETIC RESONANCE PROCEDURE (E.G., DIAGNOSTIC, INTERVENTIONAL) | DIAGNOSTIC RADIOLOGY | COMPLEX IMAGING | 11/4/2019 |
| 76873 | ECHOGRAP TRANS R PROS ST | THERAPEUTIC RADIOLOGY | Diagnostic Testing and Radiology services | 5/31/2025 |
| 76965 | ECHO GUIDANCE RADIOTHERA | THERAPEUTIC RADIOLOGY | CHEMOTHERAPY/RADIATION | 5/31/2025 |
| 77014 | CT SCAN FOR THERAPY GUID | THERAPEUTIC RADIOLOGY | COMPLEX IMAGING | 5/31/2025 |
| 77046 | MRI BREAST C- UNILATERAL | DIAGNOSTIC RADIOLOGY | COMPLEX IMAGING | 11/4/2019 |
| 77047 | MRI BREAST C- BILATERAL | DIAGNOSTIC RADIOLOGY | COMPLEX IMAGING | 11/4/2019 |
| 77048 | MRI BREAST C-+ W/CAD UNI | DIAGNOSTIC RADIOLOGY | COMPLEX IMAGING | 11/4/2019 |
| 77049 | MRI BREAST C-+ W/CAD BI | DIAGNOSTIC RADIOLOGY | COMPLEX IMAGING | 11/4/2019 |
| 77084 | MAGNETIC RESONANCE (EG. PROTON) IMAGING, BONE MARROW BLOOD SUPPLY | DIAGNOSTIC RADIOLOGY | COMPLEX IMAGING | 11/4/2019 |
| 77261 | THER RADIOLOGY TX PLNG SMPL | THERAPEUTIC RADIOLOGY | CHEMOTHERAPY/RADIATION | 5/31/2025 |
| 77262 | THER RADIOLOGY TX PLNG INTRM | THERAPEUTIC RADIOLOGY | CHEMOTHERAPY/RADIATION | 5/31/2025 |
| 77263 | THER RADIOLOGY TX PLNG CPLX | THERAPEUTIC RADIOLOGY | CHEMOTHERAPY/RADIATION | 5/31/2025 |
| 77280 | THER RAD SIMULAJ FIELD SMPL | THERAPEUTIC RADIOLOGY | CHEMOTHERAPY/RADIATION | 5/31/2025 |
| 77285 | THER RAD SIMULAJ FIELD INTRM | THERAPEUTIC RADIOLOGY | CHEMOTHERAPY/RADIATION | 5/31/2025 |
| 77290 | THER RAD SIMULAJ FIELD CPLX | THERAPEUTIC RADIOLOGY | CHEMOTHERAPY/RADIATION | 5/31/2025 |
| 77293 | RESPIRATOR MOTION MGMT SIMUL | THERAPEUTIC RADIOLOGY | Diagnostic Testing and Radiology services | 12/4/2021 |
| 77295 | SET RADIATION THERAPY FI | THERAPEUTIC RADIOLOGY | CHEMOTHERAPY/RADIATION | 5/31/2025 |
| 77300 | RADIATION THERAPY DOSE P | THERAPEUTIC RADIOLOGY | CHEMOTHERAPY/RADIATION | 5/31/2025 |
| 77301 | RADIOTHERAPY DOSE PLAN I | THERAPEUTIC RADIOLOGY | CHEMOTHERAPY/RADIATION | 5/31/2025 |
| 77306 | TELETHX ISODOSE PLAN SIMPLE | THERAPEUTIC RADIOLOGY | Diagnostic Testing and Radiology services | 5/31/2025 |
| 77307 | TELETHX ISODOSE PLAN CPLX | THERAPEUTIC RADIOLOGY | Diagnostic Testing and Radiology services | 5/31/2025 |
| 77316 | BRACHYTX ISODOSE PLAN SIMPLE | THERAPEUTIC RADIOLOGY | CHEMOTHERAPY/RADIATION | 5/31/2025 |
| 77317 | BRACHYTX ISODOSE INTERMED | THERAPEUTIC RADIOLOGY | CHEMOTHERAPY/RADIATION | 5/31/2025 |
| 77318 | BRACHYTX ISODOSE COMPLEX | THERAPEUTIC RADIOLOGY | CHEMOTHERAPY/RADIATION | 5/31/2025 |
| 77321 | SPECIAL TELETX PORT PLAN | THERAPEUTIC RADIOLOGY | Diagnostic Testing and Radiology services | 5/31/2025 |
| 77331 | SPECIAL RADIATION DOSIME | THERAPEUTIC RADIOLOGY | CHEMOTHERAPY/RADIATION | 5/31/2025 |
| 77332 | RADIATION TREATMENT AID{ | THERAPEUTIC RADIOLOGY | CHEMOTHERAPY/RADIATION | 5/31/2025 |
| 77333 | RADIATION TREATMENT AID{ | THERAPEUTIC RADIOLOGY | CHEMOTHERAPY/RADIATION | 5/31/2025 |
| 77334 | RADIATION TREATMENT AID{ | THERAPEUTIC RADIOLOGY | CHEMOTHERAPY/RADIATION | 5/31/2025 |
| 77336 | RADIATION PHYSICS CONSUL | THERAPEUTIC RADIOLOGY | CHEMOTHERAPY/RADIATION | 5/31/2025 |
| 77338 | DESIGN MLC DEVICE FOR IM | THERAPEUTIC RADIOLOGY | Diagnostic Testing and Radiology services | 5/31/2025 |
| 77370 | RADIATION PHYSICS CONSUL | THERAPEUTIC RADIOLOGY | CHEMOTHERAPY/RADIATION | 5/31/2025 |
| 77371 | SRS MULTISOURCE | THERAPEUTIC RADIOLOGY | CHEMOTHERAPY/RADIATION | 5/31/2025 |
| 77372 | SRS LINEAR BASED | THERAPEUTIC RADIOLOGY | CHEMOTHERAPY/RADIATION | 5/31/2025 |
| 77373 | SBRT DELIVERY | THERAPEUTIC RADIOLOGY | CHEMOTHERAPY/RADIATION | 12/4/2021 |
| 77385 | NISTY MODUL RAD TX DLVR SMPL | THERAPEUTIC RADIOLOGY | CHEMOTHERAPY/RADIATION | 5/31/2025 |
| 77386 | NISTY MODUL RAD TX DLVR CPLX | THERAPEUTIC RADIOLOGY | CHEMOTHERAPY/RADIATION | 5/31/2025 |
| 77387 | GUIDANCE FOR RADIAJ TX DLVR | THERAPEUTIC RADIOLOGY | CHEMOTHERAPY/RADIATION | 5/31/2025 |
| 77399 | EXTERNAL RADIATION DOSIM | THERAPEUTIC RADIOLOGY | CHEMOTHERAPY/RADIATION | 5/31/2025 |
| 77401 | RADIATION TX DELIVERY SUPFC | THERAPEUTIC RADIOLOGY | CHEMOTHERAPY/RADIATION | 5/31/2025 |
| 77402 | RADIATION TX DELIVERY SIMPLE | THERAPEUTIC RADIOLOGY | CHEMOTHERAPY/RADIATION | 5/31/2025 |
| 77407 | RADIATION TX DELIVERY INTRM | THERAPEUTIC RADIOLOGY | CHEMOTHERAPY/RADIATION | 5/31/2025 |
| 77412 | RADIATION TX DELIVERY COMPLX | THERAPEUTIC RADIOLOGY | CHEMOTHERAPY/RADIATION | 5/31/2025 |
| 77417 | THER RADIOLOGY PORT IMAGE(S) | THERAPEUTIC RADIOLOGY | CHEMOTHERAPY/RADIATION | 5/31/2025 |
| 77423 | NEUTRON BEAM TX COMPLEX | THERAPEUTIC RADIOLOGY | CHEMOTHERAPY/RADIATION | 5/31/2025 |
| 77424 | IO RAD TX DELIVERY BY X- | THERAPEUTIC RADIOLOGY | CHEMOTHERAPY/RADIATION | 5/31/2025 |
| 77425 | IO RAD TX DELIVER BY ELC | THERAPEUTIC RADIOLOGY | CHEMOTHERAPY/RADIATION | 5/31/2025 |
| 77427 | RADIATION TX MANAGEMENT | THERAPEUTIC RADIOLOGY | CHEMOTHERAPY/RADIATION | 5/31/2025 |
| 77431 | RADIATION THERAPY MANAGE | THERAPEUTIC RADIOLOGY | CHEMOTHERAPY/RADIATION | 5/31/2025 |
| 77432 | STEREOTACTIC RADIATION T | THERAPEUTIC RADIOLOGY | CHEMOTHERAPY/RADIATION | 5/31/2025 |
| 77435 | SBRT MANAGEMENT | THERAPEUTIC RADIOLOGY | CHEMOTHERAPY/RADIATION | 5/31/2025 |
| 77469 | IO RADIATION TX MANAGEME | THERAPEUTIC RADIOLOGY | CHEMOTHERAPY/RADIATION | 5/31/2025 |
| 77470 | SPECIAL RADIATION TREATMENT | THERAPEUTIC RADIOLOGY | CHEMOTHERAPY/RADIATION | 5/31/2025 |
| 77499 | RADIATION THERAPY MANAGE | THERAPEUTIC RADIOLOGY | CHEMOTHERAPY/RADIATION | 5/31/2025 |
| 77520 | PROTON TREATMENT DELIVERY; SIMPLE, WITHOUT COMPENSATION | THERAPEUTIC RADIOLOGY | CHEMOTHERAPY/RADIATION | 11/4/2019 |

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| 77522 | PROTON TREATMENT DELIVERY; SIMPLE, WITH COMPENSATION | THERAPEUTIC RADIOLOGY | CHEMOTHERAPY/RADIATION | 11/4/2019 |
| 77523 | PROTON TREATMENT DELIVERY; INTERMEDIATE | THERAPEUTIC RADIOLOGY | CHEMOTHERAPY/RADIATION | 11/4/2019 |
| 77525 | PROTON TREATMENT DELIVERY; COMPLEX | THERAPEUTIC RADIOLOGY | CHEMOTHERAPY/RADIATION | 11/4/2019 |
| 77761 | APPLY INTRCAV RADIAT SIM | THERAPEUTIC RADIOLOGY | CHEMOTHERAPY/RADIATION | 5/31/2025 |
| 77762 | APPLY INTRCAV RADIAT INT | THERAPEUTIC RADIOLOGY | CHEMOTHERAPY/RADIATION | 5/31/2025 |
| 77763 | APPLY INTRCAV RADIAT COM | THERAPEUTIC RADIOLOGY | CHEMOTHERAPY/RADIATION | 5/31/2025 |
| 77767 | REMOTE AFTERLOADING HIGH DOSE RATE RADIONUCLIDE SKIN SURFACE BRACHYTHERAPY, INCLUDES BASIC DOSIMETRY, WHEN PERFORMED; LESION DIAMETER UP TO 2.0 CM OR 1 CHANNEL | THERAPEUTIC RADIOLOGY | CHEMOTHERAPY/RADIATION | 11/4/2019 |
| 77768 | REMOTE AFTERLOADING HIGH DOSE RATE RADIONUCLIDE SKIN SURFACE BRACHYTHERAPY, INCLUDES BASIC DOSIMETRY, WHEN PERFORMED; LESION DIAMETER OVER 2.0 CM AND 2 OR MORE CHANNELS, OR MULTIPLE LESIONS | THERAPEUTIC RADIOLOGY | CHEMOTHERAPY/RADIATION | 11/4/2019 |
| 77770 | HDR RDNCL NTRSTL/ICAV BRCHTX | THERAPEUTIC RADIOLOGY | CHEMOTHERAPY/RADIATION | 5/31/2025 |
| 77771 | HDR RDNCL NTRSTL/ICAV BRCHTX | THERAPEUTIC RADIOLOGY | CHEMOTHERAPY/RADIATION | 5/31/2025 |
| 77772 | HDR RDNCL NTRSTL/ICAV BRCHTX | THERAPEUTIC RADIOLOGY | CHEMOTHERAPY/RADIATION | 5/31/2025 |
| 77778 | APPLY INTERSTIT RADIAT C | THERAPEUTIC RADIOLOGY | CHEMOTHERAPY/RADIATION | 5/31/2025 |
| 77789 | APPLY SURFACE RADIATION | THERAPEUTIC RADIOLOGY | CHEMOTHERAPY/RADIATION | 5/31/2025 |
| 77790 | RADIATION HANDLING | THERAPEUTIC RADIOLOGY | CHEMOTHERAPY/RADIATION | 5/31/2025 |
| 77799 | RADIUM/RADIOISOTOPE THER | THERAPEUTIC RADIOLOGY | CHEMOTHERAPY/RADIATION | 6/28/2025 |
| 78429 | MYOCARDIAL IMAGING, POSITRON EMISSION TOMOGRAPHY (PET), METABOLIC EVALUATION STUDY (INCLUDING VENTRICULAR WALL MOTION[S] AND/OR EJECTION FRACTION[S], WHEN PERFORMED), SINGLE STUDY; WITH CONCURRENTLY ACQUIRED COMPUTED TOMOGRAPHY TRANSMISSION SCAN | DIAGNOSTIC RADIOLOGY | COMPLEX IMAGING | 1/23/2020 |
| 78430 | MYOCARDIAL IMAGING, POSITRON EMISSION TOMOGRAPHY (PET), PERFUSION STUDY (INCLUDING VENTRICULAR WALL MOTION[S] AND/OR EJECTION FRACTION[S], WHEN PERFORMED); SINGLE STUDY, AT REST OR STRESS (EXERCISE OR PHARMACOLOGIC), WITH CONCURRENTLY ACQUIRED COMPUTED TO | DIAGNOSTIC RADIOLOGY | COMPLEX IMAGING | 1/23/2020 |
| 78431 | MYOCARDIAL IMAGING, POSITRON EMISSION TOMOGRAPHY (PET), PERFUSION STUDY (INCLUDING VENTRICULAR WALL MOTION[S] AND/OR EJECTION FRACTION[S], WHEN PERFORMED); MULTIPLE STUDIES AT REST AND STRESS (EXERCISE OR PHARMACOLOGIC), WITH CONCURRENTLY ACQUIRED COMPUTE | DIAGNOSTIC RADIOLOGY | COMPLEX IMAGING | 1/23/2020 |
| 78432 | MYOCARDIAL IMAGING, POSITRON EMISSION TOMOGRAPHY (PET), COMBINED PERFUSION WITH METABOLIC EVALUATION STUDY (INCLUDING VENTRICULAR WALL MOTION[S] AND/OR EJECTION FRACTION[S], WHEN PERFORMED), DUAL RADIOTRACER (EG, MYOCARDIAL VIABILITY); | DIAGNOSTIC RADIOLOGY | COMPLEX IMAGING | 1/23/2020 |
| 78433 | MYOCARDIAL IMAGING, POSITRON EMISSION TOMOGRAPHY (PET), COMBINED PERFUSION WITH METABOLIC EVALUATION STUDY (INCLUDING VENTRICULAR WALL MOTION[S] AND/OR EJECTION FRACTION[S], WHEN PERFORMED), DUAL RADIOTRACER (EG, MYOCARDIAL VIABILITY); WITH CONCURRENTLY A | DIAGNOSTIC RADIOLOGY | COMPLEX IMAGING | 1/23/2020 |
| 78434 | ABSOLUTE QUANTITATION OF MYOCARDIAL BLOOD FLOW (AQMBF), POSITRON EMISSION TOMOGRAPHY (PET), REST AND PHARMACOLOGIC STRESS (LIST SEPARATELY IN ADDITION TO CODE FOR PRIMARY PROCEDURE) | DIAGNOSTIC RADIOLOGY | COMPLEX IMAGING | 1/23/2020 |
| 78459 | MYOCARDIAL IMAGING, POSITRON EMISSION TOMOGRAPHY (PET), METABOLIC EVALUATION | DIAGNOSTIC RADIOLOGY | COMPLEX IMAGING | 11/4/2019 |
| 78491 | MYOCARDIAL IMAGING, POSITRON EMISSION TOMOGRAPHY (PET), PERFUSION; SINGLE STUDY AT REST OR STRESS | DIAGNOSTIC RADIOLOGY | COMPLEX IMAGING | 11/4/2019 |
| 78492 | MYOCARDIAL IMAGING, POSITRON EMISSION TOMOGRAPHY (PET), PERFUSION; MULTIPLE STUDIES AT REST AND/OR STRESS | DIAGNOSTIC RADIOLOGY | COMPLEX IMAGING | 11/4/2019 |
| 78608 | BRAIN IMAGING, POSITRON EMISSION TOMOGRAPHY (PET); METABOLIC EVALUATION | DIAGNOSTIC RADIOLOGY | COMPLEX IMAGING | 11/4/2019 |
| 78609 | BRAIN IMAGING, POSITRON EMISSION TOMOGRAPHY (PET); PERFUSION EVALUATION | DIAGNOSTIC RADIOLOGY | COMPLEX IMAGING | 11/4/2019 |
| 78811 | POSITRON EMISSION TOMOGRAPHY (PET) IMAGING; LIMITED AREA.(E.G CHEST, HEAD/NECK) | DIAGNOSTIC RADIOLOGY | COMPLEX IMAGING | 11/4/2019 |
| 78812 | POSITRON EMISSION TOMOGRAPHY (PET) IMAGING; SKULL BASE TO MID-THIGH | DIAGNOSTIC RADIOLOGY | COMPLEX IMAGING | 11/4/2019 |
| 78813 | POSITRON EMISSION TOMOGRAPHY (PET) IMAGING; WHOLE BODY | DIAGNOSTIC RADIOLOGY | COMPLEX IMAGING | 11/4/2019 |

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| 78814 | POSITROM EMISSION TOMOGRAPHY (PET) IMAGING WITH COCURRENTLY ACQUIRED COMPUTED TOMOGRAPHY (CT) FOR ATTENUATION CORRECTION AND ANATOMICAL LOCALIZATION; LIMITED AREA. (E.G.CHEST, HEAD/NECK) | DIAGNOSTIC RADIOLOGY | COMPLEX IMAGING | 11/4/2019 |
| 78815 | POSITROM EMISSION TOMOGRAPHY (PET) IMAGING WITH COCURRENTLY ACQUIRED COMPUTED TOMOGRAPHY (CT) FOR ATTENUATION CORRECTION AND ANATOMICAL LOCALIZATION; SKULL BASE TO MID-THIGH. | DIAGNOSTIC RADIOLOGY | COMPLEX IMAGING | 11/4/2019 |
| 78816 | POSITROM EMISSION TOMOGRAPHY (PET) IMAGING WITH COCURRENTLY ACQUIRED COMPUTED TOMOGRAPHY (CT) FOR ATTENUATION CORRECTION AND ANATOMICAL LOCALIZATION; WHOLE BODY. | DIAGNOSTIC RADIOLOGY | COMPLEX IMAGING | 11/4/2019 |
| 79005 | NUCLEAR RX ORAL ADMIN | THERAPEUTIC RADIOLOGY | CHEMOTHERAPY/RADIATION | 11/4/2019 |
| 79101 | NUCLEAR RX IV ADMIN | THERAPEUTIC RADIOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| 81195 | CYTOG GENOM-WID ALYS HEM MAL | MOLECULAR LAB | GENETIC TESTING, EXCEPT FOR BRCA | 12/31/2024 |
| 81223 | CFTR GENE FULL SEQUENCE | MOLECULAR LAB | GENETIC TESTING, EXCEPT FOR BRCA | 11/2/2024 |
| 81226 | CYP2D6 GENE COM VARIANTS | MOLECULAR LAB | GENETIC TESTING, EXCEPT FOR BRCA | 11/2/2024 |
| 81228 | CYTOGEN MICRARRAY COPY N | MOLECULAR LAB | GENETIC TESTING, EXCEPT FOR BRCA | 11/2/2024 |
| 81277 | CYTOGENOMIC NEO MICRORA ALYS | MOLECULAR LAB | GENETIC TESTING, EXCEPT FOR BRCA | 11/2/2024 |
| 81292 | MLH1 GENE FULL SEQ | MOLECULAR LAB | GENETIC TESTING, EXCEPT FOR BRCA | 11/2/2024 |
| 81293 | MLH1 GENE KNOWN VARIANTS | MOLECULAR LAB | GENETIC TESTING, EXCEPT FOR BRCA | 11/2/2024 |
| 81294 | MLH1 GENE DUP/DELETE VAR | MOLECULAR LAB | GENETIC TESTING, EXCEPT FOR BRCA | 11/2/2024 |
| 81295 | MSH2 GENE FULL SEQ | MOLECULAR LAB | GENETIC TESTING, EXCEPT FOR BRCA | 11/2/2024 |
| 81296 | MSH2 GENE KNOWN VARIANTS | MOLECULAR LAB | GENETIC TESTING, EXCEPT FOR BRCA | 11/2/2024 |
| 81297 | MSH2 GENE DUP/DELETE VAR | MOLECULAR LAB | GENETIC TESTING, EXCEPT FOR BRCA | 11/2/2024 |
| 81298 | MSH6 GENE FULL SEQ | MOLECULAR LAB | GENETIC TESTING, EXCEPT FOR BRCA | 11/2/2024 |
| 81299 | MSH6 GENE KNOWN VARIANTS | MOLECULAR LAB | GENETIC TESTING, EXCEPT FOR BRCA | 11/2/2024 |
| 81300 | MSH6 GENE DUP/DELETE VAR | MOLECULAR LAB | GENETIC TESTING, EXCEPT FOR BRCA | 11/2/2024 |
| 81307 | PALB2 GENE FULL GENE SEQ | MOLECULAR LAB | GENETIC TESTING, EXCEPT FOR BRCA | 11/2/2024 |
| 81308 | PALB2 GENE KNOWN FAMIL VRNT | MOLECULAR LAB | GENETIC TESTING, EXCEPT FOR BRCA | 11/2/2024 |
| 81313 | PCA3/KLK3 ANTIGEN | MOLECULAR LAB | GENETIC TESTING, EXCEPT FOR BRCA | 11/2/2024 |
| 81317 | PMS2 GENE FULL SEQ ANALY | MOLECULAR LAB | GENETIC TESTING, EXCEPT FOR BRCA | 11/2/2024 |
| 81318 | PMS2 KNOWN FAMILIAL VARI | MOLECULAR LAB | GENETIC TESTING, EXCEPT FOR BRCA | 11/2/2024 |
| 81319 | PMS2 GENE DUP/DELET VARI | MOLECULAR LAB | GENETIC TESTING, EXCEPT FOR BRCA | 11/2/2024 |
| 81321 | PTEN GENE FULL SEQUENCE | MOLECULAR LAB | GENETIC TESTING, EXCEPT FOR BRCA | 11/2/2024 |
| 81322 | PTEN GENE KNOWN FAM VARI | MOLECULAR LAB | GENETIC TESTING, EXCEPT FOR BRCA | 11/2/2024 |
| 81323 | PTEN GENE DUP/DELET VARI | MOLECULAR LAB | GENETIC TESTING, EXCEPT FOR BRCA | 11/2/2024 |
| 81349 | CYTOGENOMIC (GENOME-WIDE) ANALYSIS FOR CONSTITUTIONAL CHROMOSOMAL ABNORMALITIES; INTERROGATION OF GENOMIC REGIONS FOR COPY NUMBER AND LOSS-OF-HETEROZYGOSITY VARIANTS, LOW-PASS SEQUENCING ANALYSIS | MOLECULAR LAB | GENETIC TESTING, EXCEPT FOR BRCA | 11/2/2024 |
| 81410 | AORTIC DYSFUNCTION/DILATION | MOLECULAR LAB | GENETIC TESTING, EXCEPT FOR BRCA | 11/2/2024 |
| 81411 | AORTIC DYSFUNCTION/DILATION | MOLECULAR LAB | GENETIC TESTING, EXCEPT FOR BRCA | 11/2/2024 |
| 81413 | CAR ION CHNNLPATH INC 10 GNS | MOLECULAR LAB | GENETIC TESTING, EXCEPT FOR BRCA | 11/2/2024 |
| 81414 | CAR ION CHNNLPATH INC 2 GNS | MOLECULAR LAB | GENETIC TESTING, EXCEPT FOR BRCA | 11/2/2024 |
| 81415 | EXOME SEQUENCE ANALYSIS | MOLECULAR LAB | GENETIC TESTING, EXCEPT FOR BRCA | 11/2/2024 |
| 81416 | EXOME SEQUENCE ANALYSIS | MOLECULAR LAB | GENETIC TESTING, EXCEPT FOR BRCA | 11/2/2024 |
| 81417 | EXOME RE-EVALUATION | MOLECULAR LAB | GENETIC TESTING, EXCEPT FOR BRCA | 11/2/2024 |
| 81425 | GENOME SEQUENCE ANALYSIS | MOLECULAR LAB | GENETIC TESTING, EXCEPT FOR BRCA | 11/2/2024 |
| 81426 | GENOME SEQUENCE ANALYSIS | MOLECULAR LAB | GENETIC TESTING, EXCEPT FOR BRCA | 11/2/2024 |
| 81430 | HEARING LOSS SEQUENCE ANALYS | MOLECULAR LAB | GENETIC TESTING, EXCEPT FOR BRCA | 11/2/2024 |
| 81431 | HEARING LOSS DUP/DEL ANALYS | MOLECULAR LAB | GENETIC TESTING, EXCEPT FOR BRCA | 11/2/2024 |
| 81434 | HEREDITARY RETINAL DISORDERS | MOLECULAR LAB | GENETIC TESTING, EXCEPT FOR BRCA | 11/2/2024 |
| 81437 | HEREDTRY NURONDCRN TUM DSRDR | MOLECULAR LAB | GENETIC TESTING, EXCEPT FOR BRCA | 11/2/2024 |
| 81439 | INHERITED CARDMPYPTHY 5 GNS | MOLECULAR LAB | GENETIC TESTING, EXCEPT FOR BRCA | 11/2/2024 |
| 81440 | MITOCHONDRIAL GENE | MOLECULAR LAB | GENETIC TESTING, EXCEPT FOR BRCA | 11/2/2024 |
| 81442 | NOONAN SPECTRUM DISORDERS | MOLECULAR LAB | GENETIC TESTING, EXCEPT FOR BRCA | 11/2/2024 |
| 81448 | HRDIRY PERPH NEURPHY PANEL | MOLECULAR LAB | GENETIC TESTING, EXCEPT FOR BRCA | 11/2/2024 |
| 81449 | TGSAP SO NEO 5-50 RNA ALYS | MOLECULAR LAB | BIOMARKER TESTING | 11/2/2024 |
| 81451 | TGSAP HL NEO 5-50 RNA ALYS | MOLECULAR LAB | BIOMARKER TESTING | 11/2/2024 |
| 81455 | TARGETED GENOMIC SEQ ANALYS | MOLECULAR LAB | GENETIC TESTING, EXCEPT FOR BRCA | 11/2/2024 |
| 81456 | TARGETED GENOMIC SEQUENCE ANALYSIS PANEL, SOLID ORGAN OR HEMATOLYMPHOID NEOPLASM OR DISORDER, 51 OR GREATER GENES (EG, ALK, BRAF, CDKN2A, CEBPA, DNMT3A, EGFR, ERBB2, EZH2, FLT3, IDH1, IDH2, JAK2, KIT, KRAS, MET, MLL, NOTCH1, NPM1, NRAS, PDGFRA, PDGFRB, PG | MOLECULAR LAB | GENETIC TESTING, EXCEPT FOR BRCA | 11/2/2024 |
| 81457 | SOLID ORGAN NEOPLASM, GENOMIC SEQUENCE ANALYSIS PANEL, INTERROGATION FOR SEQUENCE VARIANTS; DNA ANALYSIS, MICROSATELLITE INSTABILITY | MOLECULAR LAB | BIOMARKER TESTING | 11/2/2024 |
| 81458 | SOLID ORGAN NEOPLASM, GENOMIC SEQUENCE ANALYSIS PANEL, INTERROGATION FOR SEQUENCE VARIANTS; DNA ANALYSIS, COPY NUMBER VARIANTS AND MICROSATELLITE INSTABILITY | MOLECULAR LAB | BIOMARKER TESTING | 11/2/2024 |

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| 81459 | SOLID ORGAN NEOPLASM, GENOMIC SEQUENCE ANALYSIS PANEL, INTERROGATION FOR SEQUENCE VARIANTS; DNA ANALYSIS OR COMBINED DNA AND RNA ANALYSIS, COPY NUMBER VARIANTS, MICROSATELLITE INSTABILITY, TUMOR MUTATION BURDEN, AND REARRANGEMENTS | MOLECULAR LAB | BIOMARKER TESTING | 11/2/2024 |
| 81460 | WHOLE MITOCHONDRIAL GENOME | MOLECULAR LAB | GENETIC TESTING, EXCEPT FOR BRCA | 11/2/2024 |
| 81462 | SOLID ORGAN NEOPLASM, GENOMIC SEQUENCE ANALYSIS PANEL, CELL-FREE NUCLEIC ACID (EG, PLASMA), INTERROGATION FOR SEQUENCE VARIANTS; DNA ANALYSIS OR COMBINED DNA AND RNA ANALYSIS, COPY NUMBER VARIANTS AND REARRANGEMENTS | MOLECULAR LAB | BIOMARKER TESTING | 11/2/2024 |
| 81463 | SOLID ORGAN NEOPLASM, GENOMIC SEQUENCE ANALYSIS PANEL, CELL-FREE NUCLEIC ACID (EG, PLASMA), INTERROGATION FOR SEQUENCE VARIANTS; DNA ANALYSIS, COPY NUMBER VARIANTS, AND MICROSATELLITE INSTABILITY | MOLECULAR LAB | BIOMARKER TESTING | 11/2/2024 |
| 81464 | SOLID ORGAN NEOPLASM, GENOMIC SEQUENCE ANALYSIS PANEL, CELL-FREE NUCLEIC ACID (EG, PLASMA), INTERROGATION FOR SEQUENCE VARIANTS; DNA ANALYSIS OR COMBINED DNA AND RNA ANALYSIS, COPY NUMBER VARIANTS, MICROSATELLITE INSTABILITY, TUMOR MUTATION BURDEN, AND RE | MOLECULAR LAB | BIOMARKER TESTING | 11/2/2024 |
| 81465 | WHOLE MITOCHONDRIAL GENOME | MOLECULAR LAB | GENETIC TESTING, EXCEPT FOR BRCA | 11/2/2024 |
| 81470 | X-LINKED INTELLECTUAL DBLT | MOLECULAR LAB | GENETIC TESTING, EXCEPT FOR BRCA | 11/2/2024 |
| 81471 | X-LINKED INTELLECTUAL DBLT | MOLECULAR LAB | GENETIC TESTING, EXCEPT FOR BRCA | 11/2/2024 |
| 81479 | UNLISTED MOLECULAR PATHO | MOLECULAR LAB | GENETIC TESTING, EXCEPT FOR BRCA | 11/2/2024 |
| 81518 | ONC BRST MRNA 11 GENES | MOLECULAR LAB | BIOMARKER TESTING | 11/2/2024 |
| 81529 | ONCOLOGY (CUTANEOUS MELANOMA), MRNA, GENE EXPRESSION PROFILING BY REAL-TIME RT-PCR OF 31 GENES (28 CONTENT AND 3 HOUSEKEEPING), UTILIZING FORMALIN-FIXED PARAFFIN-EMBEDDED TISSUE, ALGORITHM REPORTED AS RECURRENCE RISK, INCLUDING LIKELIHOOD OF SENTINEL LYMP | MOLECULAR LAB | BIOMARKER TESTING | 11/2/2024 |
| 81538 | ONCOLOGY LUNG | MOLECULAR LAB | BIOMARKER TESTING | 11/2/2024 |
| 81541 | ONC PROSTATE MRNA 46 GENES | MOLECULAR LAB | BIOMARKER TESTING | 1/1/2026 |
| 81542 | ONC PROSTATE MRNA 22 CNT GEN | MOLECULAR LAB | BIOMARKER TESTING | 11/2/2024 |
| 81552 | ONC UVEAL MLNMA MRNA 15 GENE | MOLECULAR LAB | BIOMARKER TESTING | 11/2/2024 |
| 81554 | PULMONARY DISEASE (IDIOPATHIC PULMONARY FIBROSIS (IPF)), MRNA, GENE EXPRESSION ANALYSIS OF 190 GENES, UTILIZING TRANSBRONCHIAL BIOPSIES, DIAGNOSTIC ALGORITHM REPORTED AS CATEGORICAL RESULT (EG, POSITIVE OR NEGATIVE FOR HIGH PROBABILITY OF USUAL INTERSTITI | MOLECULAR LAB | BIOMARKER TESTING | 11/2/2024 |
| 81558 | TRNSPL REJ KDN MRNA QPCR 139 | TRANSPLANT | TRANSPLANT | 6/28/2025 |
| 81595 | CARDIOLOGY HRT TRNSPL MRNA | TRANSPLANT | TRANSPLANT | 6/28/2025 |
| 81599 | UNLISTED MAAA | MOLECULAR LAB | GENETIC TESTING, EXCEPT FOR BRCA | 11/2/2024 |
| 89356 | THAWING CRYOPRESERVED OOC | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 12/4/2021 |
| 90283 | IMMUNE GLOBULIN (IGIV), HUMAN, FOR INTRAVENOUS USE | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| 90284 | IMMUNE GLOBULIN, SUBCUT INFUSIONS; 100 MG EACH | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| 90378 | RESPIRATORY SYNCYTIAL VIRUS IMMUNE GLOBULIN (RSV-IGIM), FOR INTRAMUSCULAR USE, 50 MG, EACH | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| 90399 | IMMUNE GLOBULIN | UNLISTED PROCEDURES | INFUSIONS/INJECTABLES | 12/4/2021 |
| 91299 | UNLISTED DIAGNOSTIC GASTROENTEROLOGY PROCEDURE | UNLISTED PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 93451 | RIGHT HEART CATHETERIZATION INCLUDING MEASUREMENT(S) OF OXYGEN SATURATION AND CARDIAC OUTPUT, WHEN PERFORMED | DIAGNOSTIC RADIOLOGY | Diagnostic Testing and Radiology services | 11/4/2019 |
| 93452 | LEFT HRT CATH W/VENTRCLG | DIAGNOSTIC RADIOLOGY | Diagnostic Testing and Radiology services | 11/4/2019 |
| 93453 | COMBINED RIGHT AND LEFT HEART CATHETERIZATION INCLUDING INTRAPROCEDURAL INJECTION(S) FOR LEFT VENTRICULOGRAPHY, IMAGING SUPERVISION AND INTERPRETATION, WHEN PERFORMED | DIAGNOSTIC RADIOLOGY | Diagnostic Testing and Radiology services | 11/4/2019 |
| 93454 | CATHETER PLACEMENT IN CORONARY ARTERY(S) FOR CORONARY ANGIOGRAPHY, INCLUDING INTRAPROCEDURAL INJECTION(S) FOR CORONARY ANGIOGRAPHY, IMAGING SUPERVISION AND INTERPRETATION; | DIAGNOSTIC RADIOLOGY | Diagnostic Testing and Radiology services | 11/4/2019 |

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| 93455 | CATHETER PLACEMENT IN CORONARY ARTERY(S) FOR CORONARY ANGIOGRAPHY, INCLUDING INTRAPROCEDURAL INJECTION(S) FOR CORONARY ANGIOGRAPHY, IMAGING SUPERVISION AND INTERPRETATION; WITH CATHETER PLACEMENT(S) IN BYPASS GRAFT(S) (I | DIAGNOSTIC RADIOLOGY | Diagnostic Testing and Radiology services | 11/4/2019 |
| 93456 | CATHETER PLACEMENT IN CORONARY ARTERY(S) FOR CORONARY ANGIOGRAPHY, INCLUDING INTRAPROCEDURAL INJECTION(S) FOR CORONARY ANGIOGRAPHY, IMAGING SUPERVISION AND INTERPRETATION; WITH RIGHT HEART CATHETERIZATION | DIAGNOSTIC RADIOLOGY | Diagnostic Testing and Radiology services | 11/4/2019 |
| 93457 | CATHETER PLACEMENT IN CORONARY ARTERY(S) FOR CORONARY ANGIOGRAPHY, INCLUDING INTRAPROCEDURAL INJECTION(S) FOR CORONARY ANGIOGRAPHY, IMAGING SUPERVISION AND INTERPRETATION; WITH CATHETER PLACEMENT(S) IN BYPASS GRAFT(S) (I | DIAGNOSTIC RADIOLOGY | Diagnostic Testing and Radiology services | 11/4/2019 |
| 93458 | CATHETER PLACEMENT IN CORONARY ARTERY(S) FOR CORONARY ANGIOGRAPHY, INCLUDING INTRAPROCEDURAL INJECTION(S) FOR CORONARY ANGIOGRAPHY, IMAGING SUPERVISION AND INTERPRETATION; WITH LEFT HEART CATHETERIZATION INCLUDING INTRAP | DIAGNOSTIC RADIOLOGY | Diagnostic Testing and Radiology services | 11/4/2019 |
| 93459 | CATHETER PLACEMENT IN CORONARY ARTERY(S) FOR CORONARY ANGIOGRAPHY, INCLUDING INTRAPROCEDURAL INJECTION(S) FOR CORONARY ANGIOGRAPHY, IMAGING SUPERVISION AND INTERPRETATION; WITH LEFT HEART CATHETERIZATION INCLUDING INTRAP | DIAGNOSTIC RADIOLOGY | Diagnostic Testing and Radiology services | 11/4/2019 |
| 93460 | CATHETER PLACEMENT IN CORONARY ARTERY(S) FOR CORONARY ANGIOGRAPHY, INCLUDING INTRAPROCEDURAL INJECTION(S) FOR CORONARY ANGIOGRAPHY, IMAGING SUPERVISION AND INTERPRETATION; WITH RIGHT AND LEFT HEART CATHETERIZATION INCLUD | DIAGNOSTIC RADIOLOGY | Diagnostic Testing and Radiology services | 11/4/2019 |
| 93461 | CATHETER PLACEMENT IN CORONARY ARTERY(S) FOR CORONARY ANGIOGRAPHY, INCLUDING INTRAPROCEDURAL INJECTION(S) FOR CORONARY ANGIOGRAPHY, IMAGING SUPERVISION AND INTERPRETATION; WITH RIGHT AND LEFT HEART CATHETERIZATION INCLUD | DIAGNOSTIC RADIOLOGY | Diagnostic Testing and Radiology services | 11/4/2019 |
| 93580 | TRANSCATH CLOSURE OF ASD | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 12/4/2021 |
| 93581 | TRANSCATH CLOSURE OF VSD | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 3/29/2025 |
| 93582 | PERQ TRANSCATH CLOSURE PDA | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 93619 | ELECTROPHYSIOLOGY EVALUA | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 93620 | ELECTROPHYSIOLOGY EVALUA | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 93621 | ELECTROPHYSIOLOGY EVALUA | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 93622 | ELECTROPHYSIOLOGY EVALUA | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 93653 | EP & ABLATE SUPRAVENT AR | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 93654 | EP & ABLATE VENTRIC TACH | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 93655 | ABLATE ARRHYTHMIA ADD ON | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 93656 | TX ATRIAL FIB PULM VEIN | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 93657 | TX L/R ATRIAL FIB ADDL | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 93799 | CARDIOVASCULAR PROCEDURE | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 1/1/2026 |
| 94799 | UNLISTED PULMONARY SERVICE OR PROCEDURE | UNLISTED PROCEDURES | Diagnostic Testing and Radiology services | 11/4/2019 |
| 96920 | LASER TREATMENT FOR INFLAMMATORY SKIN DISEASE (PSORIASIS); TOTAL AREA LESS THAN 250 SQ CM | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 96921 | LASER TREATMENT FOR INFLAMMATORY SKIN DISEASE (PSORIASIS); 250 SQ CM TO 500 SQ CM | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 96922 | LASER TREATMENT FOR INFLAMMATORY SKIN DISEASE (PSORIASIS); OVER 500 SQ CM | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 97610 | LOW FREQUENCY NON-THERMAL US | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 1/1/2026 |

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| 99183 | HYPERBARIC OXYGEN THERAP | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 1/1/2026 |
| 99199 | UNLISTED SPECIAL SERVICE, PROCEDURE OR REPORT | UNLISTED PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| 99512 | HOME VISIT FOR HEMODIALY | HOME HEALTH CARE | HOME HEALTH CARE | 5/9/2020 |
| A0430 | FIXED WING AIR TRANSPORT | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 12/4/2021 |
| A0435 | FIXED WING AIR MILEAGE | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 12/4/2021 |
| A2004 | XCELLISTEM, PER SQ CM | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 12/30/2021 |
| A2005 | MICROLYTE MATRIX, PER SQ CM | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 12/30/2021 |
| A2019 | KERECIS MARIGEN SHLD SQ CM | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 1/1/2026 |
| A2020 | ACS WOUND SYSTEM | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 4/29/2023 |
| A2021 | NEOMATRIX PER SQ CM | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 4/29/2023 |
| A4238 | ADJU CGM SUPPLY ALLOWANCE | DURABLE MEDICAL EQUIPMENT | DURABLE MEDICAL EQUIPMENT | 4/30/2022 |
| A4239 | NON-ADJU CGM SUPPLY ALLOW | DURABLE MEDICAL EQUIPMENT | DURABLE MEDICAL EQUIPMENT | 12/29/2022 |
| A9276 | DISPOSABLE SENSOR, CGM S | DURABLE MEDICAL EQUIPMENT | DURABLE MEDICAL EQUIPMENT | 6/26/2021 |
| A9277 | EXTERNAL TRANSMITTER, CG | DURABLE MEDICAL EQUIPMENT | DURABLE MEDICAL EQUIPMENT | 6/26/2021 |
| A9278 | MONITORING FEATURE/DEVIC | DURABLE MEDICAL EQUIPMENT | DURABLE MEDICAL EQUIPMENT | 6/26/2021 |
| A9513 | LUTETIUM LU 177 DOTATAT THER | THERAPEUTIC RADIOLOGY | Diagnostic Testing and Radiology services | 5/31/2025 |
| A9606 | RADIUM RA223 DICHLORIDE THER | THERAPEUTIC RADIOLOGY | Diagnostic Testing and Radiology services | 5/31/2025 |
| A9607 | LUTETIUM LU 177 VIPIVOTIDE | THERAPEUTIC RADIOLOGY | Diagnostic Testing and Radiology services | 10/1/2022 |
| A9699 | RADIOPHARM RX AGENT NOC | THERAPEUTIC RADIOLOGY | Diagnostic Testing and Radiology services | 6/28/2025 |
| B4187 | OMEGAVEN, 10 GRAMS LIPIDS | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 1/23/2020 |
| C1062 | INTRAVERTBRAL FX AUG IMPL | SPINAL PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| C1764 | EVENT RECORDER, CARDIAC | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| C1821 | INTERSPINOUS IMPLANT | SPINAL PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| C1839 | IRIS PROSTHESIS | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 1/23/2020 |
| C1889 | IMPLANT/INSERT DEVICE, NOC | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 1/1/2026 |
| C2614 | PROBE, PERC LUMB DISC | SPINAL PROCEDURES | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| C2616 | BRACHYTX SOURCE, YTTRIUM | THERAPEUTIC RADIOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| C2624 | WIRELESS PRESSURE SENSOR | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 11/4/2019 |
| C5271 | LOW COST SKIN SUBSTITUTE APP | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 11/21/2025 |
| C5273 | LOW COST SKIN SUBSTITUTE APP | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 11/21/2025 |
| C5275 | LOW COST SKIN SUBSTITUTE APP | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 11/21/2025 |
| C7557 | COR ANGIO/VENT W/FFR | DIAGNOSTIC RADIOLOGY | Diagnostic Testing and Radiology services | 12/31/2024 |
| C8002 | PREP SKIN CELL SUSP, AUTOMID | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 1/1/2026 |
| C8003 | IMP EXTAR KNEE SHCK ABSRB | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 12/31/2024 |
| C8900 | MAGNETIC RESONANCE ANGIOGRAPHY WITH CONTRAST, ABDOMEN | DIAGNOSTIC RADIOLOGY | Diagnostic Testing and Radiology services | 11/4/2019 |
| C8901 | MAGNETIC RESONANCE ANGIOGRAPHY WITHOUT CONTRAST ABDOMEN | DIAGNOSTIC RADIOLOGY | Diagnostic Testing and Radiology services | 11/4/2019 |
| C8902 | MAGNETIC RESONANCE ANGIOGRAPHY WITHOUT CONTRAST FOLLOWED BY WITH CONTRAST, ABDOMEN | DIAGNOSTIC RADIOLOGY | Diagnostic Testing and Radiology services | 11/4/2019 |
| C8903 | MAGNETIC RESONANCE IMAGING WITH CONTRAST BREAST; UNILATERAL | DIAGNOSTIC RADIOLOGY | COMPLEX IMAGING | 11/4/2019 |
| C8905 | MAGNETIC RESONANCE IMAGING WITHOUT CONTRAST FOLLOWED BY WITH CONTRAST BREAST; UNILATERAL | DIAGNOSTIC RADIOLOGY | COMPLEX IMAGING | 11/4/2019 |
| C8906 | MAGNETIC RESONANCE IMAGING WITH CONTRAST BREAST; BILATERAL | DIAGNOSTIC RADIOLOGY | COMPLEX IMAGING | 11/4/2019 |
| C8908 | MAGNETIC RESONANCE IMAGING WITHOUT CONTRAST FOLLOWED BY WITH CONTRAST, BREAST; BILATERAL | DIAGNOSTIC RADIOLOGY | COMPLEX IMAGING | 11/4/2019 |

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| C8909 | MAGNETIC RESONANCE ANGIOGRAPHY WITH CONTRAST CHEST (EXCLUDING MYOCARDIUM) | DIAGNOSTIC RADIOLOGY | Diagnostic Testing and Radiology services | 11/4/2019 |
| C8910 | MAGNETIC RESONANCE ANGIOGRAPHY WITHOUT CONTRAST CHEST (EXCLUDING MYOCARDIUM) | DIAGNOSTIC RADIOLOGY | Diagnostic Testing and Radiology services | 11/4/2019 |
| C8911 | MAGNETIC RESONANCE ANGIOGRAPHY WITHOUT CONTRAST FOLLOWED BY WITH CONTRAST, | DIAGNOSTIC RADIOLOGY | Diagnostic Testing and Radiology services | 11/4/2019 |
| C8912 | MAGNETIC RESONANCE ANGIOGRAPHY WITH CONTRAST LOWER EXTREMITY | DIAGNOSTIC RADIOLOGY | Diagnostic Testing and Radiology services | 11/4/2019 |
| C8913 | MAGNETIC RESONANCE ANGIOGRAPHY WITHOUT CONTRAST LOWER EXTREMITY | DIAGNOSTIC RADIOLOGY | Diagnostic Testing and Radiology services | 11/4/2019 |
| C8914 | MAGNETIC RESONANCE ANGIOGRAPHY WITHOUT CONTRAST FOLLOWED BY WITH CONTRAST, LOWER EXTREMITY | DIAGNOSTIC RADIOLOGY | Diagnostic Testing and Radiology services | 11/4/2019 |
| C8918 | MAGNETIC RESONANCE ANGIOGRAPHY WITH CONTRAST, PELVIS | DIAGNOSTIC RADIOLOGY | Diagnostic Testing and Radiology services | 11/4/2019 |
| C8919 | MAGNETIC RESONANCE ANGIOGRAPHY WITHOUT CONTRAST, PELVIS | DIAGNOSTIC RADIOLOGY | Diagnostic Testing and Radiology services | 11/4/2019 |
| C8920 | MAGNETIC RESONANCE ANGIOGRAPHY WITHOUT CONTRAST FOLLOWED BY WITH CONTRAST, PELVIS | DIAGNOSTIC RADIOLOGY | Diagnostic Testing and Radiology services | 11/4/2019 |
| C8931 | MRA W/DYE, SPINAL CANAL | DIAGNOSTIC RADIOLOGY | Diagnostic Testing and Radiology services | 11/4/2019 |
| C8932 | MRA W/O DYE, SPINAL CANA | DIAGNOSTIC RADIOLOGY | Diagnostic Testing and Radiology services | 11/4/2019 |
| C8933 | MRA W/O&W/DYE SPINAL CAN | DIAGNOSTIC RADIOLOGY | Diagnostic Testing and Radiology services | 11/4/2019 |
| C8934 | MRA W/DYE, UPPER EXTREMI | DIAGNOSTIC RADIOLOGY | Diagnostic Testing and Radiology services | 11/4/2019 |
| C8935 | MRA W/O DYE, UPPER EXTRE | DIAGNOSTIC RADIOLOGY | Diagnostic Testing and Radiology services | 11/4/2019 |
| C8936 | MRA W/O&W/DYE, UPPER EXT | DIAGNOSTIC RADIOLOGY | Diagnostic Testing and Radiology services | 11/4/2019 |
| C8937 | CAD BREAST MRI | DIAGNOSTIC RADIOLOGY | COMPLEX IMAGING | 12/7/2024 |
| C9047 | INJECTION, CAPLACIZUMAB-YHDP | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| C9305 | INJ, NIPOCALIMAB-AAHU, 3 MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 10/18/2025 |
| C9306 | TELSOTUZUMAB VEDOTIN-TLLV | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| C9352 | NEURAGEN NERVE GUIDE, PE | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 11/4/2019 |
| C9353 | NEURAWRAP NERVE PROTECTO | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 11/4/2019 |
| C9358 | DERMAL SUBSTITUTE, NATIVE, NONDENATURED COLLAGEN, FETAL BOVINE ORIGIN (SURGIMEND COLLAGEN MATRIX), PER 0.5 SQUARE CM | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 11/4/2019 |
| C9360 | DERMAL SUBSTITUTE, NATIVE, NONDENATURED COLLAGEN, NEONATAL BOVINE ORIGIN (SURGIMEND COLLAGEN MATRIX), PER 0.5 SQUARE CM | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 11/4/2019 |
| C9364 | PORCINE IMPLANT, PERMACOL, PER SQUARE CENTIMETER | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 11/4/2019 |
| C9399 | UNCLASSIFD DRUG/BIOLOGIC | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| C9726 | RXT BREAST APPL PLACE/RE | THERAPEUTIC RADIOLOGY | CHEMOTHERAPY/RADIATION | 11/4/2019 |
| C9727 | INSERTION OF IMPLANTS INTO THE SOFT PALATE; MINIMUM OF THREE IMPLANTS | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 11/4/2019 |
| C9734 | U/S TRTMT, NOT LEIOMYOMA | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 1/1/2026 |
| C9762 | CARDIAC MRI SEG DYS STRAIN | DIAGNOSTIC RADIOLOGY | COMPLEX IMAGING | 7/11/2020 |
| C9763 | CARDIAC MRI SEG DYS STRESS | DIAGNOSTIC RADIOLOGY | COMPLEX IMAGING | 7/11/2020 |
| C9764 | REVASC INTRAVASC LITHOTRIPSY | VASCULAR INTERVENTIONS | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| C9767 | REVASC LITHOTRIP-STENT-ATHER | VASCULAR INTERVENTIONS | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| C9772 | REVASC LITHOTRIP TIBI/PERONE | VASCULAR INTERVENTIONS | OUTPATIENT SURGICAL PROCEDURES | 11/2/2024 |
| C9784 | ENDO SLEEVE GASTRO W/TUBE | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 1/1/2026 |
| C9785 | ENDO OUTLET RESTRICT W/TUBE | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 1/1/2026 |
| C9791 | MRI HYPERPOLARIZED XENON129 | DIAGNOSTIC RADIOLOGY | COMPLEX IMAGING | 7/27/2024 |
| C9793 | PRE-PLAN 3D MODEL W/CCTA | DIAGNOSTIC RADIOLOGY | Diagnostic Testing and Radiology services | 12/31/2024 |
| C9807 | NERVE STIM NON-OPIOID DEV | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 1/1/2026 |
| C9808 | CRYO PROBE NON-OPIOID DEV | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 12/31/2024 |
| C9809 | CRYO NEEDLE NON-OPIOID DEV | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 12/31/2024 |
| E0466 | HOME VENTILATOR, ANY TYPE, USED WITH NON-INVASIVE INTERFACE, (E.G., MASK, CHEST SHELL) | DURABLE MEDICAL EQUIPMENT | DURABLE MEDICAL EQUIPMENT | 1/23/2020 |
| E0467 | HOME VENT MULTI-FUNCTION | DURABLE MEDICAL EQUIPMENT | DURABLE MEDICAL EQUIPMENT | 11/4/2019 |

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| E0468 | HOME VENTILATOR, DUAL-FUNCTION RESPIRATORY DEVICE, ALSO PERFORMS ADDITIONAL FUNCTION OF COUGH STIMULATION, INCLUDES ALL ACCESSORIES, COMPONENTS AND SUPPLIES FOR ALL FUNCTIONS | DURABLE MEDICAL EQUIPMENT | DURABLE MEDICAL EQUIPMENT | 4/13/2024 |
| E0481 | INTRAPULMONARY PERCUSSIVE VENT | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 12/4/2021 |
| E0483 | HIGH FREQUENCY CHEST WALL OSCILLATION AIR-PULSE GENERATOR SYSTEM, (INCLUDES HOSES AND VEST), EACH | DURABLE MEDICAL EQUIPMENT | DURABLE MEDICAL EQUIPMENT | 11/4/2019 |
| E0627 | SEAT LIFT MECHANISM INCORPORATED INTO A COMBINATION LIFT-CHAIR MECHANISM | DURABLE MEDICAL EQUIPMENT | DURABLE MEDICAL EQUIPMENT | 11/4/2019 |
| E0637 | COMBINATION SIT TO STAND SYSTEM, ANY SIZE, WITH SEAT LIFT FEATURE, WITH OR WITHOUT WHEELS | DURABLE MEDICAL EQUIPMENT | DURABLE MEDICAL EQUIPMENT | 11/4/2019 |
| E0638 | STANDING FRAME SYSTEM, ANY SIZE, WITH OR WITHOUT WHEELS | DURABLE MEDICAL EQUIPMENT | DURABLE MEDICAL EQUIPMENT | 11/4/2019 |
| E0640 | PATIENT LIFT, FIXED SYSTEM, INCLUDES ALL COMPONENTS/ACCESSORIES | DURABLE MEDICAL EQUIPMENT | DURABLE MEDICAL EQUIPMENT | 11/4/2019 |
| E0641 | STANDING FRAME SYSTEM MULTI-POSTION (E.G. 3-WAY STANDING), ANY SIZE INCLUDING PEDIATRIC, W/WO WHEELS | DURABLE MEDICAL EQUIPMENT | DURABLE MEDICAL EQUIPMENT | 11/4/2019 |
| E0642 | STANDING FRAME SYSTEM, MOBILE (DYNAMIC STANDER), ANY SIZE INCLUDING PEDIATRIC | DURABLE MEDICAL EQUIPMENT | DURABLE MEDICAL EQUIPMENT | 11/4/2019 |
| E0677 | NON PNEUMATIC SEQUENCE COMPACT TRUNK | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 9/13/2025 |
| E0678 | NON PNEUMATIC SEQUENCE COMPACT FULL LEG | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 1/1/2026 |
| E0679 | NON PNEUMATIC SEQUENCE COMPACT HALF LEG | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 1/1/2026 |
| E0680 | NON PNEUMATIC COMPACT CONTROL CAL | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 1/1/2026 |
| E0682 | NON PNEUMATIC COMPRESS FULL ARM | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 1/1/2026 |
| E0683 | NON PNEUMATIC PERISTALTIC COMPACT PUMP | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 1/1/2026 |
| E0721 | TRANS ELECTRIC STIMULUS AURICULAR | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 1/1/2026 |
| E0738 | UPPER EXTREMITY REHABILITATION SYSTEM PROVIDING ACTIVE ASSISTANCE TO FACILITATE MUSCLE RE-EDUCATION, INCLUDE MICROPROCESSOR, ALL COMPONENTS AND ACCESSORIES | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 1/1/2026 |
| E0739 | REHABILITATION SYSTEM ACTIVE ASSISTANT RIGHT | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 1/1/2026 |
| E0748 | OSTEOGENESIS STIMULATOR, ELECTRICAL, NONINVASIVE, SPINAL APPLICATIONS | DURABLE MEDICAL EQUIPMENT | DURABLE MEDICAL EQUIPMENT | 11/4/2019 |
| E0760 | OSTEOGENESIS STIMULATOR, LOW INTENSITY ULTRASOUND, NON-INVASIVE | DURABLE MEDICAL EQUIPMENT | DURABLE MEDICAL EQUIPMENT | 11/4/2019 |
| E0767 | INTRABUCAL AMPLIFIED RADIO FREQUENCY ELECTROMAGNETIC FIELD CANCER THERAPY | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 1/1/2026 |
| E1905 | VR COGNITIVE BEHAVIORAL THERAPY | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 1/1/2026 |
| E2102 | ADJUSTABLE COGNITIVE MONITOR RECEIVER | DURABLE MEDICAL EQUIPMENT | DURABLE MEDICAL EQUIPMENT | 4/30/2022 |
| E2103 | NON-ADJUSTABLE COGNITIVE MONITOR RECEIVER | DURABLE MEDICAL EQUIPMENT | DURABLE MEDICAL EQUIPMENT | 12/29/2022 |
| E2508 | SPEECH GENERATING DEVICE, SYNTHESIZED SPEECH, REQUIRING MESSAGE FORMULATION BY SPELLING AND ACCESS BY PHYSICAL CONTACT WITH THE DEVICE | DURABLE MEDICAL EQUIPMENT | DURABLE MEDICAL EQUIPMENT | 11/4/2019 |
| E2510 | SPEECH GENERATING DEVICE, SYNTHESIZED SPEECH, PERMITTING MULTIPLE METHODS OF MESSAGE FORMULATION AND MULTIPLE METHODS OF DEVICE ACCESS | DURABLE MEDICAL EQUIPMENT | DURABLE MEDICAL EQUIPMENT | 11/4/2019 |
| G0138 | INTRAVENOUS INFUSION OF CIPAGLUCOSIDASE ALFA-ATGA, INCLUDING PROVIDER/SUPPLIER ACQUISITION AND CLINICAL SUPERVISION OF ORAL ADMINISTRATION OF MIGLUSTAT IN PREPARATION OF RECEIPT OF CIPAGLUCOSIDASE ALFA-ATGA | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 4/13/2024 |
| G0166 | EXTERNAL COUNTERPULSATION | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 12/4/2021 |

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| G0219 | PET IMAGING WHOLE BODY; FULL AND PARTIAL RING PET SCANNERS ONLY, FOR NON COVERED INDICATIONS | DIAGNOSTIC RADIOLOGY | COMPLEX IMAGING | 11/4/2019 |
| G0235 | PET IMAGING, ANY SITE, NOT OTHERWISE SPECIFIED | DIAGNOSTIC RADIOLOGY | COMPLEX IMAGING | 11/4/2019 |
| G0252 | PET IMAGING, FULL AND PARTIAL-RING PET SCANNERS ONLY, FOR INITIAL DIAGNOSIS OF BREAST CANCER AND/OR SURGICAL PLANNING FOR BREAST CANCER (E.G., INITIAL STAGING OF AXILLARY LYMPH NODES) | DIAGNOSTIC RADIOLOGY | COMPLEX IMAGING | 11/4/2019 |
| G0277 | HBOT, FULL BODY CHAMBER, 30M | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 1/1/2026 |
| G0339 | ROBOT RADIOSUR COMPL/1ST | THERAPEUTIC RADIOLOGY | Diagnostic Testing and Radiology services | 12/4/2021 |
| G0340 | ROBOT LINEAR STERORADIO | THERAPEUTIC RADIOLOGY | Diagnostic Testing and Radiology services | 12/4/2021 |
| G0341 | PERCUTANEOUS ISLET CELL TRANSPLANT, INCLUDES PORTAL VEIN CATHETERIZATION AND INFUSION | TRANSPLANT | TRANSPLANT | 11/4/2019 |
| G0342 | LAPAROSCOPY FOR ISLET CELL TRANSPLANT, INCLUDES PORTAL VEIN CATHETERIZATION AND INFUSION | TRANSPLANT | TRANSPLANT | 11/4/2019 |
| G0343 | LAPAROSCOPY FOR ISLET CELL TRANSPLANT, INCLUDES PORTAL VEIN CATHETERIZATION AND INFUSION | TRANSPLANT | TRANSPLANT | 11/4/2019 |
| G0422 | INTENS CARDIAC REHAB W/E | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 12/4/2021 |
| G0423 | INTENS CARDIAC REHAB NO | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 12/4/2021 |
| G0458 | LDR PROSTATE BRACHY COMP | THERAPEUTIC RADIOLOGY | CHEMOTHERAPY/RADIATION | 5/31/2025 |
| G0555 | REPLACEMENT PT ELECTRONIC SYS | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 12/31/2024 |
| G6001 | ECHO GUIDANCE RADIOTHERAPY | THERAPEUTIC RADIOLOGY | CHEMOTHERAPY/RADIATION | 5/31/2025 |
| G6002 | STEREOSCOPIC X-RAY GUIDANCE | THERAPEUTIC RADIOLOGY | CHEMOTHERAPY/RADIATION | 5/31/2025 |
| G6003 | RADIATION TREATMENT DELIVERY | THERAPEUTIC RADIOLOGY | CHEMOTHERAPY/RADIATION | 5/31/2025 |
| G6004 | RADIATION TREATMENT DELIVERY | THERAPEUTIC RADIOLOGY | CHEMOTHERAPY/RADIATION | 5/31/2025 |
| G6005 | RADIATION TREATMENT DELIVERY | THERAPEUTIC RADIOLOGY | CHEMOTHERAPY/RADIATION | 5/31/2025 |
| G6006 | RADIATION TREATMENT DELIVERY | THERAPEUTIC RADIOLOGY | CHEMOTHERAPY/RADIATION | 5/31/2025 |
| G6007 | RADIATION TREATMENT DELIVERY | THERAPEUTIC RADIOLOGY | CHEMOTHERAPY/RADIATION | 5/31/2025 |
| G6008 | RADIATION TREATMENT DELIVERY | THERAPEUTIC RADIOLOGY | CHEMOTHERAPY/RADIATION | 5/31/2025 |
| G6009 | RADIATION TREATMENT DELIVERY | THERAPEUTIC RADIOLOGY | CHEMOTHERAPY/RADIATION | 5/31/2025 |
| G6010 | RADIATION TREATMENT DELIVERY | THERAPEUTIC RADIOLOGY | CHEMOTHERAPY/RADIATION | 5/31/2025 |
| G6011 | RADIATION TREATMENT DELIVERY | THERAPEUTIC RADIOLOGY | CHEMOTHERAPY/RADIATION | 5/31/2025 |
| G6012 | RADIATION TREATMENT DELIVERY | THERAPEUTIC RADIOLOGY | CHEMOTHERAPY/RADIATION | 5/31/2025 |
| G6013 | RADIATION TREATMENT DELIVERY | THERAPEUTIC RADIOLOGY | CHEMOTHERAPY/RADIATION | 5/31/2025 |
| G6014 | RADIATION TREATMENT DELIVERY | THERAPEUTIC RADIOLOGY | CHEMOTHERAPY/RADIATION | 5/31/2025 |
| G6015 | RADIATION TX DELIVERY IMRT | THERAPEUTIC RADIOLOGY | CHEMOTHERAPY/RADIATION | 5/31/2025 |
| G6016 | DELIVERY COMP IMRT | THERAPEUTIC RADIOLOGY | CHEMOTHERAPY/RADIATION | 5/31/2025 |
| G6017 | INTRAFRACTION TRACK MOTION | THERAPEUTIC RADIOLOGY | CHEMOTHERAPY/RADIATION | 5/31/2025 |
| H0045 | RESPITE NOT HOME / DIEM | HOME HEALTH CARE | HOME HEALTH CARE | 8/31/2024 |
| J0013 | ESKETAMINE, NASAL SPRAY, 1 M | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 1/1/2026 |
| J0129 | INJECTION, ABATACEPT, 10 MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| J0139 | INJ, ADALIMUMAB, 1 MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 12/31/2024 |
| J0172 | INJ, ADUCANUMAB-AVWA, 2 MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 12/30/2021 |
| J0174 | INJ, LECANEMAB-IRMB, 1 MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 8/26/2023 |
| J0175 | INJ, DONANEMAB-AZBT, 2 MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/2/2024 |
| J0177 | INJECTION, AFLIBERCEPT HD, 1 MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 4/13/2024 |
| J0178 | INJECTION, AFLIBERCEPT, 1 MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| J0179 | INJ, BROLCICIZUMAB-DBLL, 1 MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 1/23/2020 |
| J0180 | INJECTION, AGALSIDASE BETA, 1 MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| J0202 | INJECTION, ALEMTUZUMAB, 1 MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| J0205 | ALGLUCARASE | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| J0208 | INJECTION, SODIUM THIOSULFATE, 100 MG | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J0215 | ALEFACEPT, 0.5 MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| J0217 | INJECTION, VELMANASE ALFA-TYCV, 1 MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 12/28/2023 |
| J0218 | INJECTION, OLIPUDASE ALFA-RPCP, 1 MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 4/29/2023 |
| J0219 | INJ AVAL ALFA-NQPT 4MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 4/30/2022 |
| J0220 | ALGLUCOSIDASE | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| J0221 | INJECTION, ALGLUCOSIDASE ALFA, (LUMIZYME), 10 MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| J0222 | INJ., PATISIRAN, 0.1 MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| J0223 | INJECTION, GIVOSIRAN, 0.5 MG. | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 7/11/2020 |
| J0224 | INJECTION, LUMASIRAN, 0.5 MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 6/26/2021 |
| J0225 | INJ, VUTRISIRAN, 1 MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 12/29/2022 |
| J0256 | ALPHA 1 - PROTEINASE INHIBITOR Å€" HUMAN, 10 MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| J0257 | INJECTION, ALPHA 1 PROTEINASE INHIBITOR (HUMAN), (GLASSIA), 10 MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| J0364 | INJECTION, APOMORPHINE HCL, 1 MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| J0470 | DIMERCAPROL, PER 100 MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| J0485 | BELATACEPT INJECTION | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 12/4/2021 |

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| J0490 | INJECTION, BELIMUMAB, 10 MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| J0491 | INJ ANIFROLUMAB-FNIA 1MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 4/30/2022 |
| J0517 | INJ., BENRALIZUMAB, 1 MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| J0567 | INJ., CERLIPONASE ALFA 1 MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| J0570 | BUPRENORPHINE IMPLANT, 74.2 MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 9/13/2025 |
| J0584 | INJECTION, BUROSUMAB-TWZA 1M | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| J0585 | BOTULINUM TOXIN TYPE A, PER UNIT | INJECTABLE MEDICATIONS | BOTOX INJECTIONS | 11/4/2019 |
| J0586 | ABOBOTULINUMTOXINA | INJECTABLE MEDICATIONS | BOTOX INJECTIONS | 11/4/2019 |
| J0587 | BOTULINUM TOXIN TYPE B, PER 100 UNITS | INJECTABLE MEDICATIONS | BOTOX INJECTIONS | 11/4/2019 |
| J0588 | INJECTION, INCOBOTULINUMTOXIN A, 1 UNIT | INJECTABLE MEDICATIONS | BOTOX INJECTIONS | 11/4/2019 |
| J0589 | INJECTION, DAXBIBOTULINUMTOXINA-LANM, 1 UNIT | INJECTABLE MEDICATIONS | BOTOX INJECTIONS | 4/13/2024 |
| J0591 | INJECTION, DEOXYCHOLIC ACID, 1 MG. | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 7/11/2020 |
| J0593 | INJ., LANADELUMAB-FLYO, 1 MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| J0596 | INJECTION, C1 ESTERASE INHIBITOR (RECOMBINANT), RUCONEST, 10 UNITS | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| J0597 | INJECTION, C-1 ESTERASE INHIBITOR (HUMAN), BERINERT, 10 UNITS | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| J0598 | C1 ESTERASE INHIBITOR INJ | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| J0599 | INJ., HAEGARDA 10 UNITS | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| J0600 | EDETATE CALCIUM DISODIUM, UP TO 1,000 MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| J0606 | INJ., ETELCALCETIDE 0.1 MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| J0614 | INJECTION, TRESOLSUFAN, 50 MG | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J0638 | INJECTION, CANAKINUMB, 1 MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| J0641 | LEVOLEUCOVORIN INJECTION | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J0642 | INJECTION, LEVOLEUCOVORIN (KHAPZORY), 0.5 MG | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J0717 | CERTOLIZUMAB PEGOL INJ 1MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| J0725 | CHORIONIC GONADOTROPIN, PER 1,000 USP UNITS | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| J0738 | INJECTION, LENACAPAVIR, 1 MG, FDA APPROVED PRESCRIPTION, ONLY FOR USE AS HIV PRE-EXPOSURE PROPHYLAXIS (NOT FOR USE AS TREATMENT FOR HIV) | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 9/13/2025 |
| J0739 | INJECTION, CABOTEGRAVIR, 1 MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 7/30/2022 |
| J0741 | INJECTION, CABOTEGRAVIR AND RILPIVIRINE, 2MG/3MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 10/9/2021 |
| J0775 | INJECTION, COLLAGENASE, CLOSTRIDIUM HISTOLYTICUM, 0.01 MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| J0791 | INJECTION, CRIZANLIZUMAB-TMCA, 5 MG. | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 7/11/2020 |
| J0801 | INJ. ACTHAR GEL TO 40 UNITS | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 10/28/2023 |
| J0802 | INJ. (ANI), UP TO 40 UNITS | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 10/28/2023 |
| J0870 | INJECTION, IMETELSTAT, 1 MG | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J0879 | DIFELIKEFALIN, ESRD ON DIALY | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 4/30/2022 |
| J0881 | DARBEPOETIN ALFA, NON-ES | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J0882 | DARBEPOETIN ALFA, ESRD U | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| J0885 | EPOETIN ALFA, NON-ESRD | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J0887 | INJECTION, EPOETIN BETA, 1 MICROGRAM, (FOR ESRD ON DIALYSIS) | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| J0888 | EPOETIN BETA NON ESRD | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| J0890 | INJECTION, PEGINESATIDE, 0. 1 MG (FOR ESRD ON DIALYSIS) | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| J0893 | INJ, DECITABINE (SUN PHARMA) | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J0894 | DECITABINE INJECTION | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J0896 | INJECTION, LUSPATERCEPT-AAMT, 0.25 MG. | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 7/11/2020 |
| J0897 | DENOSUMAB INJECTION | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J1072 | INJECTION, TESTOSTERONE CYPIONATE (AZMIRO), 1 MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 3/29/2025 |
| J1073 | TESTOSTERONE PELLETT, IMPLANT, 75 MG | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 1/1/2026 |
| J1202 | MIGLUSTAT, ORAL, 65 MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 4/13/2024 |
| J1203 | INJECTION, CIPAGLUCOSIDASE ALFA-ATGA, 5 MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 4/13/2024 |
| J1289 | INJECTION, NARSOPLIMAB-WUUG, 1 MG | Injectable Medications | INFUSIONS/INJECTABLES | 7/1/2026 |
| J1290 | INJECTION, ECALLANTIDE , 1 MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| J1299 | INJECTION, ECULIZUMAB, 2 MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 3/29/2025 |
| J1301 | INJECTION, EDARAVONE, 1 MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| J1302 | INJ, SUTIMLIMAB-JOME, 10 MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 10/1/2022 |
| J1303 | INJ., RAVULIZUMAB-CWVZ 10 MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| J1304 | INJECTION, TOFERSEN, 1 MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 12/28/2023 |
| J1305 | INJECTION, EVINACUMAB-DGNB, 5MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 10/9/2021 |
| J1306 | INJECTION, INCLISIRAN, 1 MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 7/30/2022 |
| J1307 | INJ, CROVALIMAB-AKZ, 10 MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 12/31/2024 |
| J1322 | ELOSULFASE ALFA, INJECTION | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| J1323 | INJECTION, ELRANATAMAB-BCMM, 1 MG | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J1325 | EPOPROSTENOL, 0.5 MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| J1326 | INJ, ZOLBETUXIMAB-CLZB, 2 MG | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J1411 | INJ, HEMGENIX, PER TX DOSE | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 4/29/2023 |
| J1412 | INJ ROCTAVIAN ML 2X10A13VC G | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 12/28/2023 |
| J1413 | INJ DELANDISTROGENE MOX ROKL | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 12/28/2023 |
| J1414 | INJ, BEQVEZ, PER TX DOSE | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 12/31/2024 |
| J1426 | INJECTION, CASIMERSEN, 10 MG. | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 10/9/2021 |

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| J1427 | INJ, VILTOLARSEN | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 5/1/2021 |
| J1428 | INJ, ETEPLIRSEN, 10 MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| J1429 | INJECTION, GOLODIRSEN, 10 MG. | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 7/11/2020 |
| J1437 | INJECTION, FERRIC DERISOMALTOSE, 10 MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 12/4/2021 |
| J1438 | ETANERCEPT, 25 MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| J1439 | INJ FERRIC CARBOXYMALTIOS 1MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 12/4/2021 |
| J1440 | FECAL MICROBIOTA JSML 1 ML | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 7/29/2023 |
| J1442 | INJ, FILGRASTIM G-CSF 1MCG | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J1447 | INJ TBO FILGRASTIM 1 MICROG | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J1448 | INJECTION, TRILACICLIB, 1MG | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J1449 | INJECTION, EFLAPEGRASIM-XNST, 0.1 MG | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J1458 | GALSULFASE | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| J1459 | INJECTION, IMMUNE GLOBULIN (PRIVIGEN), INTRAVENOUS, NON-LYOPHILIZED (E. G. LIQUID), 500 MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| J1551 | INJECTION, IMMUNE GLOBULIN (CUTAQUIG), 100 MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 7/30/2022 |
| J1552 | INJ, ALYGLO, 500 MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 12/31/2024 |
| J1553 | INJECTION, IMMUNE GLOBULIN (YIMMUGO), 100 MG | Injectable Medications | INFUSIONS/INJECTABLES | 4/1/2026 |
| J1554 | INJ, ASCENIV | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 5/1/2021 |
| J1555 | INJ CUVITRU, 100 MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| J1556 | INJ, IMM GLOB BIVIGAM, 500MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| J1557 | INJECTION, IMMUNE GLOBULIN, (GAMMAPLEX), INTRAVENOUS, NON-LYOPHILIZED (E.G. LIQUID), 500 MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| J1558 | INJECTION, IMMUNE GLOBULIN (XEMBIFY), 100 MG. | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 7/11/2020 |
| J1559 | INJECTION, IMMUNE GLOBULIN (HIZENTRA), 100 MG. | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| J1561 | INJECTION, IMMUNE GLOBULIN, (GAMUNEX), INTRAVENOUS, NON-LYOPHILIZED (E.G. LIQUID), 500 MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| J1562 | INJECTION, IMMUNE GLOBULIN (VIVAGLOBIN), 100 MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| J1566 | INJECTION, IMMUNE GLOBULIN, INTRAVENOUS, LYOPHILIZED (E.G., POWDER), NOT OTHERWISE SPECIFIED, 500 MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| J1568 | INJECTION, IMMUNE GLOBULIN, (OCTAGAM), INTRAVENOUS, NON-LYOPHILIZED (E. G. LIQUID), 500MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| J1569 | INJECTION, IMMUNE GLOBULIN, (GAMMAGARD LIQUID), INTRAVENOUS, NON-LYOPHILIZED, (E. G. LIQUID), 500 MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| J1572 | INJECTION, IMMUNE GLOBULIN, (FLEBOGAMMA), INTRAVENOUS, NON-LYOPHILIZED (E.G. LIQUID), 500 MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| J1575 | INJECTION, IMMUNE GLOBULIN/HYALURONIDASE, (HYQVIA), 100 MG IMMUNEGLOBULIN | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| J1576 | INJ, PANZYGA, 500 MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 7/29/2023 |
| J1577 | INJECTION, IMMUNE GLOBULIN (QIVIGY), 100 MG | Injectable Medications | INFUSIONS/INJECTABLES | 7/1/2026 |
| J1595 | GLATIRAMER ACETATE, 20 MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| J1599 | INJECTION, IMMUNE GLOBULIN, INTRAVENOUS, NON- LYOPHILIZED (E. G. LIQUID) NOT OTHERWISE SPECIFIED, 500 MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| J1602 | GOLIMUMAB FOR IV USE 1MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| J1620 | GONADORELIN HYDROCHLORIDE, PER 100 MCG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| J1628 | INJ., GUSELKUMAB, 1 MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| J1632 | INJECTION, BREXANOLONE, 1 MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 9/14/2020 |
| J1675 | INJECTION, HISTRELIN ACETATE, 10 MCG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| J1726 | MAKENA, 10 MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| J1743 | IDURSULFASE | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| J1744 | INJECTION, ICATIBANT, 1 MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| J1745 | INFLIXIMAB, 10 MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| J1746 | INJ., IBALIZUMAB-UIYK, 10 MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| J1747 | INJECTION, SPESOLIMAB-SBZO, 1 MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 4/29/2023 |
| J1748 | INJECTION, INFLIXIMAB-DYYB (ZYMFENTRA), 10 MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 7/27/2024 |
| J1786 | INJECTION, IMIGLUCERASE, 10 UNITS | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| J1809 | INJECTION, FOSDENOPTERIN, 0.1 MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 9/13/2025 |
| J1823 | INJ, INEBILIZUMAB-CDON, 1 MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 1/22/2021 |
| J1826 | INJECTION, INTERFERON BETA-1A, 30 MCG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| J1830 | INTERFERON BETA-1B, 0.25 MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| J1930 | LANREOTIDE INJECTION | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J1931 | INJECTION, LARONIDASE, 0.1 MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| J1932 | INJ, LANREOTIDE, (CIPLA) 1MG | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J1950 | LEUPROLIDE ACET /3.75 MG | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J1951 | INJECTION, LEUPROLIDE ACETATE FOR DEPOT SUSPENSION (FENSOLVI), 0.25 MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 6/26/2021 |
| J1952 | LEUPROLIDE INJ, CAMCEVI, 1MG | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J1954 | LEUPROLIDE DEPOT CIPLA 7.5MG | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J1961 | INJ, LENACAPAVIR, 1 MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 7/29/2023 |

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| J2170 | INJECTION, MECASERMIN, 1 MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| J2182 | INJECTION, MEPOLIZUMAB, 1MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| J2267 | INJECTION, MIRIKIZUMAB-MRKZ, 1 MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 7/27/2024 |
| J2277 | INJECTION, MOTIXAFORTIDE, 0.25 MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 4/13/2024 |
| J2323 | NATALIZUMAB | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| J2326 | INJ, NUSINERSEN, 0.1MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| J2327 | INJ RISANKIZUMAB-RZAA 1 MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 12/29/2022 |
| J2329 | INJ UBLITUXIMAB-XIY, 1 MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 7/29/2023 |
| J2350 | INJECTION, OCRELIZUMAB, 1 MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| J2351 | INJECTION, OCRELIZUMAB, 1 MG AND HYALURONIDASE-OCSQ | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 3/29/2025 |
| J2353 | OCTREOTIDE DEPOT 1MG INJ | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J2354 | OCTREOTIDE NONDEPOT INJ | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J2356 | INJECTION, TEZEPelumab-EKko, 1 MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 7/30/2022 |
| J2357 | INJECTION, OMALIZUMAB, 5 MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| J2361 | INJECTION, DEPEMOKIMAB-ULAA, 1 M | Injectable Medications | INFUSIONS/INJECTABLES | 7/1/2026 |
| J2502 | INJECTION, PASIREOTIDE LONG ACTING, 1 MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| J2504 | INJECTION, PEGADEMASE BOVINE, 25 IU | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| J2506 | INJ PEGFILGRAST EX BIO 0.5MG | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J2507 | INJECTION, PEGLOTICASE, 1MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| J2508 | INJECTION, PEGUNIGALSIDASE ALFA-IWXJ, 1 MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 2/3/2024 |
| J2562 | PLERIXAFOR INJECTION | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| J2724 | PROTEIN C CONCENTRATE | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| J2777 | INJ, FARICIMAB-SVOA, 0.1MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 10/1/2022 |
| J2778 | RANIBIZUMAB INJECTION | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| J2779 | INJECTION, RANIBIZUMAB, VIA INTRAVITREAL IMPLANT (SUSVIMO), 0.1 MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 7/30/2022 |
| J2781 | INJ, PEGCETACOPLAN, 1MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 10/28/2023 |
| J2782 | INJECTION, AVACINCAPAD PEGOL, 0.1 MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 4/13/2024 |
| J2786 | INJECTION, RESLIZUMAB, 1MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| J2793 | RILONACEPT INJECTION | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| J2797 | INJ., ROLAPITANT, 0.5 MG | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J2802 | INJ, ROMIPLOSTIM 1 MICROGRAM | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J2840 | INJ SEBELIPASE ALFA 1 MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| J2860 | INJECTION, SILTUXIMAB, 10 MG | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J2940 | SOMATREM, 1 MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| J2941 | SOMATROPIN, 1 MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| J2998 | INJECTION, PLASMINOGEN, HUMAN-TVMH, 1 MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 7/30/2022 |
| J3031 | INJ., FREMANEZUMAB-VFRM 1 MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| J3032 | INJECTION, EPTINEZUMAB-JJMR, 1 MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 9/14/2020 |
| J3055 | INJECTION, TALQUETAMAB-TGVS, 0.25 MG | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J3060 | INJ, TALIGLUCERACE ALFA 10 U | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| J3111 | INJ, ROMOSOZUMAB-AQQG 1 MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| J3145 | TESTOSTERONE UNDECANOATE 1MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 8/14/2021 |
| J3241 | INJECTION, TEPROTUMUMAB-TRBW, 10 MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 9/14/2020 |
| J3245 | INJ., TILDRAKIZUMAB, 1 MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| J3247 | INJECTION, SECUKINUMAB, INTRAVENOUS, 1 MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 7/27/2024 |
| J3262 | TOCILIZUMAB INJECTION | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J3263 | INJECTION, TORIPALIMAB-TPZI, 1 MG | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J3285 | INJECTION, TREPSTINIL, 1 MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| J3299 | INJECTION, TRIAMCINOLONE ACETONIDE (XIPERE), 1 MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 7/30/2022 |
| J3304 | INJ TRIAMCINOLONE ACE XR 1MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| J3315 | TRIPTORELIN PAMOATE | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J3316 | INJ., TRIPTORELIN XR 3.75 MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| J3355 | UROFOLLITROPIN, 75 IU | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| J3357 | INJECTION, USTEKINUMAB, 1 MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| J3358 | USTEKINUMAB, IV INJECT, 1 MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| J3380 | INJECTION, VEDOLIZUMAB, 1 MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| J3385 | INJECTION, VELAGLUCERASE ALFA 100 UNITS | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| J3386 | INJECTION, ETUVEDIGENE AUTOTEMCEL, PER TREATMENT | Injectable Medications | INFUSIONS/INJECTABLES | 7/1/2026 |
| J3387 | INJECTION, ELIVALDOGENE AUTOTEMCEL, PER TREATMENT | INJECTABLES | INFUSIONS/INJECTABLES | 1/1/2026 |
| J3389 | TOPICAL ADMINISTRATION, PRADEMAGENE ZAMIKERACEL, PER TREATMENT | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 1/1/2026 |
| J3391 | INJ, ATIDARSAGENE AUTOTEMCEL | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 6/28/2025 |
| J3392 | INJ, EXAGAMGLOGENE AUTOTEM | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 12/31/2024 |
| J3393 | INJECTION, BETIBEGLOGENE AUTOTEMCEL, PER TREATMENT | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 7/27/2024 |
| J3394 | INJECTION, LOVOTIBEGLOGENE AUTOTEMCEL, PER TREATMENT | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 7/27/2024 |
| J3397 | INJ., VESTRONIDASE ALFA-VJBK | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| J3398 | INJ LUXTURNA 1 BILLION VEC G | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| J3399 | INJECTION, ONASEMNOGENE ABEPARVOVEC-XIOI, PER TREATMENT, UP TO 5X1015 VECTOR GENOMES | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 7/11/2020 |
| J3401 | VYJUVEK 5X10^9PFU/ML, 0.1 ML | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 12/28/2023 |
| J3402 | INJECTION, REMESTEMCEL-LRKN, PER THERAPEUTIC DOSE | TRANSPLANT | TRANSPLANT | 9/13/2025 |
| J3403 | REVAKINAGENE TARORETCEL-LWEY, PER IMPLANT | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 9/13/2025 |

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| J3404 | INJECTION, ZOPAPOGENE (MADENOVEC-DRBA) SUSPENSION, PER THERAPEUTIC DOSE | Injectable Medications | INFUSIONS/INJECTABLES | 4/1/2026 |
| J3405 | INJECTION, ONASEMNOGENE (ABEPARVOVECBRVE, P) | Injectable Medications | INFUSIONS/INJECTABLES | 7/1/2026 |
| J3490 | UNCLASSIFIED DRUG INJ | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/14/2020 |
| J3520 | EDETATE DISODIUM, PER 150MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| J3590 | UNCLASSIFIED BIOLOGICS | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/14/2020 |
| J3591 | ESRD ON DIALYSIS DRUG/BIO NOC | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| J7170 | INJ., EMICIZUMAB-KXWH 0.5 MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| J7171 | INJECTION, ADAMTS13, RECOMBINANT-KRHN, 10 IU | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 7/27/2024 |
| J7172 | INJ MARSTACIM-HNCQ, 0.5 MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 6/28/2025 |
| J7173 | INJECTION, CONCIZUMAB-MTCI, 0.5 MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 9/13/2025 |
| J7174 | INJECTION, FITUSIRAN, 0.04 MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 9/13/2025 |
| J7175 | INJ, FACTOR X, (HUMAN), 1IU | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| J7176 | INJECTION, HUMAN FIBRINOGEN - CHMT (FESILTY), 1MG | Injectable Medications | INFUSIONS/INJECTABLES | 7/1/2026 |
| J7177 | INJ., FIBRYGA, 1 MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| J7178 | INJECTION, HUMAN FIBRINOGEN CONCENTRATE, 1 MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| J7179 | VONVENDI INJ 1 IU VWF:RCO | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| J7180 | INJECTION, FACTOR XIII (ANTHEMOPHILIC FACTOR, HUMAN), 1 I.U. | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| J7181 | FACTOR XIII RECOMB A-SUBUNIT | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| J7182 | FACTOR VIII RECOMB NOVOEIGHT | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| J7183 | INJECTION, VON WILLEBRAND FACTOR COMPLEX (HUMAN), WILATE, 1 I.U. VWF:RCO | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| J7185 | XYNTHA INJ | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| J7186 | INJECTION, ANTHEMOPHILIC FACTOR VIII/VON WILLEBRAND FACTOR COMPLEX (HUMAN), PER FACTOR VIII I. U. | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| J7187 | INJECTION, VON WILLEBRAND FACTOR COMPLEX, (HUMATE-P), . PER IU VWF:RCO | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| J7188 | INJECTION, FACTOR VIII (ANTHEMOPHILIC FACTOR, RECOMBINANT), (OBIZUR), PER I.U. | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| J7189 | FACTOR VIIA (ANTHEMOPHILIC FACTOR, RECOMBINANT), PER 1 MCG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| J7190 | FACTOR VIII (ANTHEMOPHILIC FACTOR, HUMAN) PER IU | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| J7191 | FACTOR VIII (ANTHEMOPHILIC FACTOR (PORCINE), PER IU | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| J7192 | FACTOR VIII (ANTHEMOPHILIC FACTOR, RECOMBINANT) PER IU | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| J7193 | FACTOR IX (ANTHEMOPHILIC FACTOR, PURIFIED, NON- RECOMBINANT) PER IU | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| J7194 | FACTOR IX, COMPLEX, PER IU | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| J7195 | FACTOR IX (ANTHEMOPHILIC FACTOR, RECOMBINANT) PER IU | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| J7196 | INJECTION, ANTIHROMBIN RECOMBINANT, 50 I. U. | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| J7197 | ANTI-HROMBIN III (HUMAN), PER IU | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| J7198 | ANTI-INHIBITOR, PER IU | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| J7199 | HEMOPHILIA CLOTTING FACTOR, NOT OTHERWISE CLASSIFIED | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| J7200 | FACTOR IX RECOMBINAN RIXUBIS | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| J7201 | FACTOR IX FC FUSION RECOMB | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| J7202 | FACTOR IX IDELVION INJ | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| J7203 | FACTOR IX RECOMB GLY REBINYN | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| J7204 | INJECTION, FACTOR VIII, ANTHEMOPHILIC FACTOR (RECOMBINANT), (ESPEROCT), GLYCOPEGLATED- EXEL, PER IU. | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 7/11/2020 |
| J7205 | INJECTION, FACTOR VIII FC FUSION (RECOMBINANT), PER IU | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| J7207 | FACTOR VIII PEGYLATED RECOMB | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| J7208 | INJ, JIVI 1 IU | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| J7209 | FACTOR VIII NUWIQ RECOMB 1IU | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| J7210 | INJ, AFSTYLA, 1 I.U. | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| J7211 | INJ, KOVALTRY, 1 I.U. | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| J7212 | FACTOR VIIA RECOMB SEVENFACT | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 1/22/2021 |
| J7213 | INJ, IXINITY, 1 I.U. | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 6/28/2025 |
| J7214 | ALTUVIIIO PER FACTOR VIII IU | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 10/28/2023 |
| J7316 | INJ, OCRIFLASMINE, 0.125 MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| J7318 | INJ, DUROLANE 1 MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| J7320 | GENVISC 850, INJ, 1MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| J7321 | HYALGAN/SUPARTZ INJ PER | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| J7322 | HYMOVIS INJECTION 1 MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| J7323 | EUFLEXA INJ PER DOSE | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| J7324 | ORTHOVISC INJ PER DOSE | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| J7325 | SYNVISC OR SYNVISC-ONE | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| J7326 | GEL-ONE | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| J7327 | MONOVISC INJ PER DOSE | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| J7328 | HYALURONAN OR DERIVATIVE, GEL-SYN, FOR INTRA- ARTICULAR INJECTION, 0.1 MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |

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| J7329 | INJ, TRIVISC 1 MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| J7331 | SYNOJOYNT, INJ., 1 MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| J7332 | INJ., TRILURON, 1 MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| J7340 | CARBIDOPA 5 MG/LEVODOPA 20 MG ENTERAL SUSPENSION | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/14/2020 |
| J7351 | INJECTION, BIMATOPROST, INTRACAMERAL IMPLANT, 1 MICROGRAM | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 9/14/2020 |
| J7352 | AFAMELANOTIDE IMPLANT, 1 MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 1/22/2021 |
| J7355 | INJECTION, TRAVOPROST, INTRACAMERAL IMPLANT, 1 MICROGRAM | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 7/27/2024 |
| J7356 | INJ FOSCARB/FOSLEVODOPA 5 MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 6/28/2025 |
| J7402 | MOMETASONE SINUS SINUVA | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 8/14/2021 |
| J7677 | REVEFENACIN INH NON-COM 1MCG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 5/9/2020 |
| J7686 | TREPROSTINIL, INHALATION SOLUTION, FDA-APPROVED FINAL PRODUCT, NON-COMPOUNDED, ADMINISTERED THROUGH DME, UNIT DOSE FORM, 1.74 MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| J7999 | COMPOUNDED DRUG, NOT OTHERWISE CLASSIFIED | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/14/2020 |
| J9000 | DOXORUBICIN HCL INJECTIO | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J9003 | LEUPROLIDE INJECTABLE (CAMCEVI ETM), 1 MG | Injectable Medications | INFUSIONS/INJECTABLES | 4/1/2026 |
| J9011 | INJECTION, DATOPOTAMAB DERUXTECANDLNK, 1 MG | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J9015 | ALDESLEUKIN INJECTION | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J9017 | ARSENIC TRIOXIDE | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J9019 | ERWINAZE INJECTION | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J9021 | INJ, ASPARA, RYLAZE, 0.1 MG | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J9022 | INJ, ATEZOLIZUMAB, 10 MG | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J9023 | INJECTION, AVELUMAB, 10 MG | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J9024 | INJECTION, ATEZOLIZUMAB, 5 MG AND HYALURONIDASE-TQJS | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J9025 | AZACITIDINE INJECTION | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 11/4/2019 |
| J9026 | INJ, TARLATAMAB-DLLE, 1 MG | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J9027 | CLOFARABINE INJECTION | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J9028 | INJ, NOGAPENDEKIN PMLN, 1MCG | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J9029 | INJ, ADSTILADRIN, PER TX DOS | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 7/29/2023 |
| J9032 | INJECTION, BELINSTAT, 10 MG | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J9033 | INJ, BENDAMUSTINE HCL, 1MG | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J9034 | INJ., BENDEKA 1 MG | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J9035 | BEVACIZUMAB INJECTION | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J9036 | INJ., BELRAPZO, 1 MG | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J9038 | INJECTION, AXATILIMAB-CSFR, 0.1 MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 3/29/2025 |
| J9039 | INJ, POLATUZUMAB VEDOTIN 1MG | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J9040 | BLEOMYCIN SULF INJ 15 U | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J9041 | BORTEZOMIB INJECTION | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J9042 | BRENTUXIMAB VEDOTIN INJ | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J9043 | CABAZITAXEL INJECTION | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J9045 | CARBOPLATIN INJECT 50MG | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J9046 | INJ, BORTEZOMIB, DR. REDDY'S | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J9047 | CARMUSTINE INJECTION | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J9048 | INJ, BORTEZOMIB FRESSENIUSKAB | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J9049 | INJ, BORTEZOMIB, HOSPIRA | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J9051 | INJ, BORTEZOMIB (MAIA) | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/28/2023 |
| J9053 | INJECTION, BELANTAMAB MAFODOTIN-BLMF, 0.1 MG | Medical Oncology (Buy Up) | Injectable Medications | 7/1/2026 |
| J9054 | INJECTION, BORTEZOMIB (BORUZU), 0.1 MG | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J9055 | CETUXIMAB INJECTION | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J9056 | INJ, VIVIMUSTA, 1 MG | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J9057 | INJ., COPANLISIB, 1 MG | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J9060 | CISPLATIN 10 MG INJECTI | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J9061 | INJ, AMIVANTAMAB-VMJW | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J9062 | INJECTION, AMIVANTAMAB 5 MG AND HYALURONIDA | Medical Oncology (Buy Up) | Injectable Medications | 7/1/2026 |
| J9063 | INJ, ELAHERE, 1 MG | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J9064 | INJ, CABAZITAXEL (SANDOZ) | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/28/2023 |
| J9065 | INJ CLADRIBINE PER 1 MG | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 11/4/2019 |
| J9098 | CYTARABINE LIPOSOME | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J9100 | CYTARABINE INJ 100 MG | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J9118 | INJ, CALASPARGASE PEGOL-MKNL | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J9119 | INJ., CEMPLIMAB-RWLC, 1 MG | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J9120 | DACTINOMYCIN INJECTION | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J9130 | DACARBAZINE INJ 100 MG | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J9144 | DARATUMUMAB, HYALURONIDASE | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J9145 | INJECTION, DARATUMUMAB 10 MG | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J9150 | DAUNORUBICIN INJECTION | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J9153 | INJ DAUNORUBICIN, CYTARABINE | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J9155 | INJECTION, DEGARELIX, 1 MG | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J9161 | INJECTION, DENILEUKIN DIFITOX-CXDL, 1 MCG | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J9171 | DOCETAXEL INJECTION | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J9172 | DOCETAXEL (DOCIVYX), 1 MG | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J9173 | INJ., DURVALUMAB, 10 MG | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J9174 | INJ, DOCETAXEL (BEIZRAY) 1MG | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |

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| J9176 | INJECTION, ELOTUZUMAB, 1MG | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J9177 | INJECTION, ENFORTUMAB VEDOTIN-EJFV, 0.25 MG. | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J9178 | INJ, EPIRUBICIN HCL 2 MG | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J9179 | ERIBULIN MESYLATE INJECT | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J9181 | ETOPOSIDE INJEC 10 MG | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J9183 | GEMCITABINE INTRAVESICAL SYSTEM, 225 MG | Injectable Medications | INFUSIONS/INJECTABLES | 4/1/2026 |
| J9184 | INJECTION, GEMCITABINE HYDROCHLORIDE (AVYXA), 200 MG | INJECTABLES | INFUSIONS/INJECTABLES | 1/1/2026 |
| J9185 | FLUDARABINE PHOSPH 50 MG | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J9190 | FLUOROURACIL INJ 500 MG | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J9196 | INJECTION, GEMCITABINE HYDROCHLORIDE (ACCORD), NOT THERAPEUTICALLY EQUIVALENT TO J9201, 200 MG | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J9198 | GEMCITABINE HYDROCHLORIDE, (INFUGEM), 100 MG. | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J9200 | FLOXURIDINE INJ 500 MG | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J9201 | GEMCITABINE HCL 200 MG | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J9202 | GOSERELIN ACETATE IMPLNT | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J9203 | GEMTUZUMAB OZOGAMICIN 0.1 MG | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J9204 | INJ MOGAMULIZUMAB-KPKC, 1 MG | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J9205 | INJ IRINOTECAN IPOSOME 1 MG | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J9206 | IRINOTECAN 20 MG | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J9207 | IXABEPILONE INJECTION] | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J9208 | IFOSFOMIDE INJECTION 1GM | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J9210 | INJ., EMAPALUMAB-LZSG, 1 MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| J9211 | IDARUBICIN HCL INJECTION | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J9212 | INTERFERON ALFACON-1, RECOMBINANT, 1 MCG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| J9213 | INTERFERON ALFA-2A, RECOMBINANT, 3 MILLION UNITS | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| J9214 | INTERFERON ALFA-2B INJ | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J9215 | INTERFERON ALFA-N3, (HUMAN LEUKOCYTE DERIVED), 250,000 IU | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| J9216 | INTERFERON GAMMA 1-B INJ | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J9217 | LEUPROLIDE ACET SUSPNSN | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J9223 | INJ, LURBINECTEDIN, 0.1 MG | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J9225 | HISTRELIN IMPLANT | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J9226 | HISTRELIN IMPLANT (SUPPRELIN LA), 50 MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| J9227 | INJECTION, ISATUXIMAB-IRFC, 10 MG | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J9228 | IPILIMUMAB INJECTION | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J9229 | INJ INOTUZUMAB OZOGAM 0.1 MG | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J9230 | MECHLORETHAMINE HCL INJ | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J9232 | INJECTION, DOCETAXEL (HOSPIRA), NOT THERAPEUTIC | Medical Oncology (Buy Up) | Injectable Medications | 7/1/2026 |
| J9245 | INJ MELPHALAN HYDROCHL | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 11/4/2019 |
| J9246 | INJECTION, MELPHALAN (EVOMELA), 1 MG. | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J9248 | INJECTION, MELPHALAN (HEPZATO), 1 MG | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J9249 | INJECTION, MELPHALAN (APOTEX), 1 MG | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J9256 | INJECTION, NIPOCALIMAB-AAHU, 3 MG | INJECTABLES | INFUSIONS/INJECTABLES | 1/1/2026 |
| J9261 | NELARABINE INJECTION | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 11/4/2019 |
| J9262 | INJ, OMACETAXINE MEP, 0.01MG | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J9263 | OXALIPLATIN 0.5 MG INJEC | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J9264 | PACLITAXEL INJECTION | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J9266 | PEGASPARGASE INJECTION | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J9267 | PACLITAXEL INJECTION | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 11/4/2019 |
| J9268 | PENTOSTATIN INJ / 10 MG | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J9269 | INJ, TAGRAXOFUSP-ERZS 10 MCG | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J9271 | INJECTION, PEMBROLIZUMAB, 1 MG | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J9272 | INJ, DOSTARLIMAB-GXLY, 10 MG | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J9273 | INJ TISOTU VEDOTIN-TFTV, 1MG | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J9274 | INJ, TEBENTAFUSP-TEBN, 1 MCG | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J9275 | INJ COSIBELIMAB-IPDL, 2 MG | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J9276 | INJ ZANIDATAMAB-HRII, 2 MG | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J9277 | INJECTION, PEMBROLIZUMAB, 1 MG AND BERAHYALURONIDASE ALFA-PMPH | Injectable Medications | INFUSIONS/INJECTABLES | 4/1/2026 |
| J9278 | INJECTION, CARBOPLATIN (AVYXA), 1 MG | Injectable Medications | INFUSIONS/INJECTABLES | 4/1/2026 |
| J9280 | MITOMYCIN INJECTION | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 11/4/2019 |
| J9281 | MITOMYCIN INSTILLATION | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J9282 | MITOMYCIN, INTRAVESICAL INSTILLATION, 1 MG | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 1/1/2026 |
| J9285 | INJ, OLARATUMAB, 10 MG | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J9286 | INJECTION, GLOFITAMAB-GXBM, 2.5 MG | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J9289 | INJ NIVOLUMAB 2 MG HYALURON | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J9292 | INJECTION, PEMETREXED DIPOTASSIUM, 10 MG | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J9293 | MITOXANTRINE HCL INJ /5MG | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J9294 | INJECTION, PEMETREXED (HOSPIRA) NOT THERAPEUTICALLY EQUIVALENT TO J9305, 10 MG | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J9295 | INJECTION, NECITUMUMAB, 1 MG | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J9296 | INJECTION, PEMETREXED (ACCORD) NOT THERAPEUTICALLY EQUIVALENT TO J9305, 10 MG J9297 ADD INJECTION, PEMETREXED (SANDOZ), NOT THERAPEUTICALLY EQUIVALENT TO J9305, 10 MG | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |

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| J9297 | INJECTION, PEMETREXED (ACCORD) NOT THERAPEUTICALLY EQUIVALENT TO J9305, 10 MG J9297 ADD INJECTION, PEMETREXED (SANDOZ), NOT THERAPEUTICALLY EQUIVALENT TO J9305, 10 MG | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J9298 | INJ NIVOL RELATUMAB 3MG/1MG | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J9299 | INJECTION, NIVOLUMAB, 1 MG | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J9301 | OBINUTUZUMAB INJ | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J9302 | OFATUMUMAB INJECTION | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 11/4/2019 |
| J9303 | PANITUMUMAB INJECTION | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J9304 | INJECTION, PEMETREXED (PEMFEXY), 10 MG | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J9305 | INJECTION, PEMETREXED, NOT OTHERWISE SPECIFIED, 10 MG | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J9306 | INJECTION, PERTUZUMAB, 1 MG | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J9307 | PRALATREXATE INJECTION | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 11/4/2019 |
| J9308 | INJECTION, RAMUCIRUMAB, 5 MG | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J9309 | INJ, POLATUZUMAB VEDOTIN 1MG | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J9311 | INJ RITUXIMAB, HYALURONIDASE | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J9312 | INJ., RITUXIMAB, 10 MG | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J9313 | INJ., LUMOXITI, 0.01 MG | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J9314 | INJECTION, PEMETREXED (TEVA) NOT THERAPEUTICALLY EQUIVALENT TO J9305, 10 MG | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J9316 | PERTUZU, TRASTUZU, 10 MG | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J9317 | SACITUZUMAB GOVITECAN-HZIY | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J9318 | INJECTION, ROMIDEPSIN, NON-LYOPHILIZED, 0.1 MG | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J9319 | INJECTION, ROMIDEPSIN, LYOPHILIZED, 0.1 MG | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J9320 | STREPTOZOCIN INJECT 1 GM | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J9321 | INJECTION, EPCORITAMAB-BYSP, 0.16 MG | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J9322 | INJ PEMETREXED (BLUEPOINT) | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J9323 | INJ PEMETREXED DITROMETHAMIN | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J9324 | INJ, PEMRYDI RTU, 10 MG | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J9325 | INJ TALIMOGENE LAHERPAREPVEC | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J9326 | INJECTION, TELISOTUZUMAB VEDOTIN-TLLV, 1 MG | INJECTABLES | INFUSIONS/INJECTABLES | 1/1/2026 |
| J9328 | TEMOZOLOMIDE INJECTION | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J9329 | INJ, TISLELIZUMAB-JSGR | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J9330 | TEMSIROLIMUS INJECTION] | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J9331 | INJECTION, SIROLIMUS PROTEIN-BOUND PARTICLES, 1 MG | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J9332 | INJECTION, EFGARTIGIMOD ALFA-FCAB, 2 MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 7/30/2022 |
| J9333 | INJECTION, ROZANOLIXIZUMAB-NOLI, 1 MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 12/28/2023 |
| J9334 | INJECTION, EFGARTIGIMOD ALFA, 2 MG AND HYALURONIDASE-QVFC | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 12/28/2023 |
| J9341 | INJ THIOTEPA (TEPYLUTE) 1 MG | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J9342 | INJ THIOTEPA NOS 1 MG | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J9345 | INJ, RETIFANLIMAB-DLWR, 1 MG | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/28/2023 |
| J9347 | INJ, TREMELIMUMAB-ACTL, 1 MG | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J9348 | INJECTION, NAXITAMAB-GQGK, 1 MG | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J9349 | INJ., TAFASITAMAB-CXIX | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J9350 | INJ MOSUNETUZUMAB-AXGB, 1 MG | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J9351 | TOPOTECAN INJECTION | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 11/4/2019 |
| J9352 | INJECTION TRABECTEDIN 0.1MG | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J9353 | INJECTION, MARGETUXIMAB-CMKB, 5 MG | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J9354 | INJ, ADO-TRASTUZUMAB EMT 1MG | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J9355 | TRASTUZUMAB INJECTION | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J9356 | INJ, HERCEPTIN HYLECTA, 10MG | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J9358 | INJECTION, FAM-TRASTUZUMAB DERUXTECAN-NXKI, 1 MG. | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J9359 | INJ LON TESIRIN-LPYL 0.075MG | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J9360 | VINBLASTINE SULF INJ 1MG | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J9361 | INJECTION, EFBEMALENOGRASTIM ALFA-VUXW, 0.5 MG | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 6/28/2025 |
| J9370 | VINCRISTINE SULF 1 MG INJ | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 11/4/2019 |
| J9376 | INJECTION, POZELIMAB-BBFG, 1 MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 4/13/2024 |
| J9380 | INJ TECLISTAMAB CQYV 0.5 MG | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J9381 | INJ TEPLIZUMAB MZVW 5 MCG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 7/29/2023 |
| J9382 | INJ ZENOCUTUZUMAB-ZBCO 1 MG | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J9390 | VINORELBINE TARTRAT/10MG | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 11/4/2019 |
| J9393 | INJ, FULVESTRANT (TEVA) | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J9394 | INJ, FULVESTRANT (FRESENIUS) | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J9395 | FULVESTRANT 25 MG INJ | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 11/4/2019 |
| J9400 | INJ, ZIV-AFLIBERCEPT, 1MG | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| J9601 | INJECTION, LIVOSELTAMAB-GCPT, 1 MG | Injectable Medications | INFUSIONS/INJECTABLES | 4/1/2026 |
| J9999 | NOC ANTINEOPLASTIC DRUG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/14/2020 |
| K0899 | POWER MOBILITY DEVICE, NOT CODED BY SADMERC OR DOES NOT MEET CRITERIA | DURABLE MEDICAL EQUIPMENT | DURABLE MEDICAL EQUIPMENT | 11/4/2019 |
| K1007 | BILATERAL HIP, KNEE, ANKLE, FOOT DEVICE, POWERED, INCLUDES PELVIC COMPONENT, SINGLE OR DOUBLE UPRIGHT(S), KNEE JOINTS ANY TYPE, WITH OR WITHOUT ANKLE JOINTS ANY TYPE, INCLUDES ALL COMPONENTS AND ACCESSORIES, MOTORS, MICROPROCESSORS, SENSORS | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 1/1/2026 |

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| L1844 | KNEE ORTHOTIC (KO), SINGLE UPRIGHT, THIGH AND CALF, WITH ADJUSTABLE FLEXION AND EXTENSION JOINT (UNICENTRIC OR POLYCENTRIC), MEDIAL-LATERAL AND ROTATION CONTROL, WITH OR WITHOUT VARUS/VALGUS ADJUSTMENT, CUSTOM FABRICATED | ORTHOTICS AND PROSTHETICS | ORTHOTICS AND PROSTHETICS | 11/4/2019 |
| L1846 | KNEE ORTHOTIC, DOUBLE UPRIGHT, THIGH AND CALF, WITH ADJUSTABLE FLEXION AND EXTENSION JOINT (UNICENTRIC OR POLYCENTRIC), MEDIAL-LATERAL AND ROTATION CONTROL, WITH OR WITHOUT VARUS/VALGUS ADJUSTMENT, CUSTOM FABRICATED | ORTHOTICS AND PROSTHETICS | ORTHOTICS AND PROSTHETICS | 11/4/2019 |
| L2006 | KAF SNG/DBL SWG/STN MCPR CUS | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 1/23/2020 |
| L5781 | LWR LMB PROS VACUUM PUMP | ORTHOTICS AND PROSTHETICS | ORTHOTICS AND PROSTHETICS | 12/4/2021 |
| L5827 | ENDO KNEE SHIN SINGLE AXIS | ORTHOTICS AND PROSTHETICS | ORTHOTICS AND PROSTHETICS | 4/26/2025 |
| L5828 | KNE-SHN FLD SWG & STANCE | DURABLE MEDICAL EQUIPMENT | DURABLE MEDICAL EQUIPMENT | 12/4/2021 |
| L5856 | ADDITION TO LOWER EXTREMITY PROSTHESIS, ENDOSKELETAL KNEE-SHIN SYSTEM, MICROPROCESSOR CONTROL FEATURE, SWING AND STANCE PHASE, INCLUDES ELECTRONIC SENSOR(S), ANY TYPE | ORTHOTICS AND PROSTHETICS | ORTHOTICS AND PROSTHETICS | 11/4/2019 |
| L5859 | ADDITION TO LOWER EXTREMITY PROSTHESIS, ENDOSKELETAL KNEE-SHIN SYSTEM, POWERED AND PROGRAMMABLE FLEXION/EXTENSION ASSIST CONTROL, INCLUDES ANY TYPE MOTOR(S) | ORTHOTICS AND PROSTHETICS | ORTHOTICS AND PROSTHETICS | 11/4/2019 |
| L5973 | ANK-FOOT SYS DORS-PLANT FLEX | ORTHOTICS AND PROSTHETICS | ORTHOTICS AND PROSTHETICS | 11/4/2019 |
| L5999 | LOWER EXTREMITY PROSTHESIS, NOT OTHERWISE SPECIFIED | UNLISTED PROCEDURES | ORTHOTICS AND PROSTHETICS | 11/4/2019 |
| L6700 | UE ADD EXT POWER MYOEL | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 4/26/2025 |
| L6880 | ELECTRIC HAND, SWITCH OR MYOELECTRIC CONTROLLED, INDEPENDENTLY ARTICULATING | ORTHOTICS AND PROSTHETICS | ORTHOTICS AND PROSTHETICS | 11/4/2019 |
| L6881 | AUTOMATIC GRASP FEATURE | ORTHOTICS AND PROSTHETICS | ORTHOTICS AND PROSTHETICS | 1/23/2020 |
| L6882 | MICROPROCESSOR CONTROL FEATURE, ADDITION TO UPPER LIMB PROSTHETIC TERMINAL DEVICE | ORTHOTICS AND PROSTHETICS | ORTHOTICS AND PROSTHETICS | 11/4/2019 |
| L6935 | BELOW ELBOW, EXTERNAL POWER, SELF-SUSPENDED INNER SOCKET REMOVABLE FOREARM SHELL, OTTO BOCK OR EQUAL ELECTRODES, CABLES TWO BATTERIES AND ONE CHARGER, MYOELECTRONIC CONTROL OF TERMINAL DEVICE | ORTHOTICS AND PROSTHETICS | ORTHOTICS AND PROSTHETICS | 11/4/2019 |
| L6955 | ABOVE ELBOW, EXTERNAL POWER, MOLDED INNER SOCKET, REMOVABLE HUMERAL SHELL, INTERNAL LOCKING ELBOW, FOREARM, OTTO BOCK OR EQUAL ELECTRODES, CABLES, 2 BATTERIES AND ONE CHARGER, MYOELECTRONIC CONTROL OF TERMINAL DEVICE | ORTHOTICS AND PROSTHETICS | ORTHOTICS AND PROSTHETICS | 11/4/2019 |
| L7007 | ELECTRIC HAND, SWITCH OR MYOELECTRIC CONTROLLED, ADULT | ORTHOTICS AND PROSTHETICS | ORTHOTICS AND PROSTHETICS | 11/4/2019 |
| L7259 | ELECTRONIC WRIST ROTATOR ANY | ORTHOTICS AND PROSTHETICS | ORTHOTICS AND PROSTHETICS | 11/4/2019 |
| L8499 | UNLISTED PROCEDURE MISC PROSTH | UNLISTED PROCEDURES | ORTHOTICS AND PROSTHETICS | 11/4/2019 |
| L8614 | COCHLEAR DEVICE/SYSTEM | EAR DEVICES/COCHLEAR IMPLANT | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| L8641 | METATARSAL JOINT IMPLANT | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 1/1/2026 |
| L8642 | HALLUX IMPLANT | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 1/1/2026 |
| L8702 | EPH S/D UPRT MICRO SENSOR | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 1/1/2026 |
| M0224 | INTRAVENOUS INFUSION, MEMIBAVI, FOR THE PRE-EXPOSURE PROPHYLAXIS ONLY, FOR CERTAIN ADULTS AND ADOLESCENTS (12 YEARS OF AGE AND OLDER WEIGHING AT LEAST 40 KG) WITH NO KNOWN SARS-COV-2 EXPOSURE, WHO EITHER HAVE MODERATE-TO-SEVERE IMMUNE COMPROMISE DUE TO | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 9/28/2024 |
| M0231 | INTRAVENOUS INFUSION, TOCILIZUMAB, FOR HOSPITALIZED ADULT PATIENTS WITH COVID-19 WHO ARE RECEIVING SYSTEMIC CORTICOSTEROIDS AND REQUIRE SUPPLEMENTAL OXYGEN, NON-INVASIVE OR INVASIVE MECHANICAL VENTILATION, OR EXTRACORPOREAL MEMBRANE OXYGENATION ONLY, INCLUDES INFUSION AND POST ADMINISTRATION MONITORING, FIRST DOSE | Injectable Medications | INFUSIONS/INJECTABLES | 7/1/2026 |

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| M0232 | INTRAVENOUS INFUSION, TOCILIZUMABBAVI, FOR HOSPITALIZED ADULT PATIENTS WITH COVID-19 WHO ARE RECEIVING SYSTEMIC CORTICOSTEROIDS AND REQUIRE SUPPLEMENTAL OXYGEN, NON-INVASIVE OR INVASIVE MECHANICAL VENTILATION, OR EXTRACORPOREAL MEMBRANE OXYGENATION ONLY, INCLUDES INFUSION AND POST ADMINISTRATION MONITORING, SECOND DOSE | Injectable Medications | INFUSIONS/INJECTABLES | 7/1/2026 |
| M0233 | INTRAVENOUS INFUSION, TOCILIZUMAB AAZG, FOR HOSPITALIZED ADULT PATIENTS WITH COVID-19 WHO ARE RECEIVING SYSTEMIC CORTICOSTEROIDS AND REQUIRE SUPPLEMENTAL OXYGEN, NON-INVASIVE OR INVASIVE MECHANICAL VENTILATION, OR EXTRACORPOREAL MEMBRANE OXYGENATION (ECMO) ONLY, INCLUDES INFUSION AND POST ADMINISTRATION MONITORING, FIRST DOSE | Injectable Medications | INFUSIONS/INJECTABLES | 4/1/2026 |
| M0234 | INTRAVENOUS INFUSION, TOCILIZUMAB AAZG, FOR HOSPITALIZED ADULT PATIENTS WITH COVID-19 WHO ARE RECEIVING SYSTEMIC CORTICOSTEROIDS AND REQUIRE SUPPLEMENTAL OXYGEN, NON-INVASIVE OR INVASIVE MECHANICAL VENTILATION, OR EXTRACORPOREAL MEMBRANE OXYGENATION (ECMO) ONLY, INCLUDES INFUSION AND POST ADMINISTRATION MONITORING, SECOND DOSE | Injectable Medications | INFUSIONS/INJECTABLES | 4/1/2026 |
| M0235 | INTRAVENOUS INFUSION, MONOCLONAL ANTIBODY PRODUCTS WITH AN INDICATION FOR POST-EXPOSURE PROPHYLAXIS OR TREATMENT OF COVID-19, FOR HOSPITALIZED ADULTS AND/OR PEDIATRIC PATIENTS WHO ARE RECEIVING SYSTEMIC CORTICOSTEROIDS AND REQUIRE SUPPLEMENTAL OXYGEN, NON | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 9/13/2025 |
| M0236 | INTRAVENOUS INFUSION, MONOCLONAL ANTIBODY PRODUCTS WITH AN INDICATION FOR POST-EXPOSURE PROPHYLAXIS OR TREATMENT OF COVID-19, FOR HOSPITALIZED ADULTS AND/OR PEDIATRIC PATIENTS WHO ARE RECEIVING SYSTEMIC CORTICOSTEROIDS AND REQUIRE SUPPLEMENTAL OXYGEN, NON | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 9/13/2025 |
| M0237 | INTRAVENOUS INFUSION, TOCILIZUMAB-ANOH, FOR HOSPITALIZED ADULT PATIENTS WITH COVID-19 WHO ARE RECEIVING SYSTEMIC CORTICOSTEROIDS AND REQUIRE SUPPLEMENTAL OXYGEN, NON-INVASIVE OR INVASIVE MECHANICAL VENTILATION, OR EXTRACORPOREAL MEMBRANE OXYGENATION (ECMO) | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 9/13/2025 |
| M0238 | INTRAVENOUS INFUSION, TOCILIZUMAB-ANOH, FOR HOSPITALIZED ADULT PATIENTS WITH COVID-19 WHO ARE RECEIVING SYSTEMIC CORTICOSTEROIDS AND REQUIRE SUPPLEMENTAL OXYGEN, NON-INVASIVE OR INVASIVE MECHANICAL VENTILATION, OR EXTRACORPOREAL MEMBRANE OXYGENATION (ECMO) | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 9/13/2025 |
| Q0138 | FERUMOXYTOL, NON-ESRD | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 12/4/2021 |
| Q0224 | INJECTION, PEMIVIBART, FOR THE PRE-EXPOSURE PROPHYLAXIS ONLY, FOR CERTAIN ADULTS AND ADOLESCENTS (12 YEARS OF AGE AND OLDER WEIGHING AT LEAST 40 KG) WITH NO KNOWN SARS-COV-2 EXPOSURE, AND WHO EITHER HAVE MODERATE-TO-SEVERE IMMUNE COMPROMISE DUE TO A MEDIC | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 9/28/2024 |
| Q0234 | INJECTION, TOCILIZUMAB-BAVI, FOR HOSPITALIZED ADULT PATIENTS WITH COVID-19 WHO ARE RECEIVING SYSTEMIC CORTICOSTEROIDS AND REQUIRE SUPPLEMENTAL OXYGEN, NON-INVASIVE OR INVASIVE MECHANICAL VENTILATION, OR EXTRACORPOREAL MEMBRANE OXYGENATION ONLY, 1 MG | Injectable Medications | INFUSIONS/INJECTABLES | 7/1/2026 |
| Q0235 | INJECTION, MONOCLONAL ANTIBODY PRODUCTS WITH AN INDICATION FOR POST-EXPOSURE PROPHYLAXIS OR TREATMENT OF COVID-19, FOR HOSPITALIZED ADULTS AND/OR PEDIATRIC PATIENTS WHO ARE RECEIVING SYSTEMIC CORTICOSTEROIDS AND REQUIRE SUPPLEMENTAL OXYGEN, NON-INVASIVE O | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 9/13/2025 |

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| Q0237 | INJECTION, TOCILIZUMAB-ANOH, FOR HOSPITALIZED ADULT PATIENTS WITH COVID-19 WHO ARE RECEIVING SYSTEMIC CORTICOSTEROIDS AND REQUIRE SUPPLEMENTAL OXYGEN, NON-INVASIVE OR INVASIVE MECHANICAL VENTILATION, OR EXTRACORPOREAL MEMBRANE OXYGENATION (ECMO) ONLY, 1 M | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 9/13/2025 |
| Q0238 | INJECTION, TOCILIZUMAB-AAZG, FOR HOSPITALIZED ADULT PATIENTS WITH COVID-19 WHO ARE RECEIVING SYSTEMIC CORTICOSTEROIDS AND REQUIRE SUPPLEMENTAL OXYGEN, NON-INVASIVE OR INVASIVE MECHANICAL VENTILATION, OR EXTRACORPOREAL MEMBRANE OXYGENATION (ECMO) ONLY, 1 MG | Injectable Medications | INFUSIONS/INJECTABLES | 4/1/2026 |
| Q2017 | TENIPOSIDE, 50 MG | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| Q2026 | INJECTION, RADIESSE, 0.1 ML | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 11/4/2019 |
| Q2028 | INJ, SCULPTRA, 0.5MG | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| Q2041 | AXICABTAGENE CILOLEUCEL CAR+ | TRANSPLANT | TRANSPLANT | 11/4/2019 |
| Q2042 | TISAGENLECLEUCEL CAR-POS T | TRANSPLANT | TRANSPLANT | 11/4/2019 |
| Q2043 | SIPLEUCEL-T AUTO CD54+ | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| Q2050 | DOXORUBICIN INJ 10MG | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| Q2053 | BREXUCABTAGENE CAR POS T | TRANSPLANT | TRANSPLANT | 5/1/2021 |
| Q2054 | LISOCABTAGENE MARALEUCEL, UP TO 110 MILLION AUTOLOGOUS ANTI-CD19 CAR-POSITIVE VIABLE T CELLS, INCLUDING LEUKAPHERESIS AND DOSE PREPARATION PROCEDURES, PER THERAPEUTIC DOSE. | TRANSPLANT | TRANSPLANT | 10/9/2021 |
| Q2055 | IDECABTAGENE VICLEUCEL CAR | TRANSPLANT | TRANSPLANT | 12/30/2021 |
| Q2056 | CILTACABTAGENE CAR-POS T | TRANSPLANT | TRANSPLANT | 10/1/2022 |
| Q2057 | AFAMITRESGENE AUTOLEUCEL, INCLUDING LEUKAPHERESIS AND DOSE PREPARATION PROCEDURES, PER THERAPEUTIC DOSE | TRANSPLANT | TRANSPLANT | 3/29/2025 |
| Q2058 | OBECBTGE AUTOL UP TO 400 MIL | TRANSPLANT | TRANSPLANT | 6/28/2025 |
| Q3027 | INJ BETA INTERFERON IM 1 MCG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| Q3028 | INJ BETA INTERFERON SQ 1 MCG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| Q4074 | ILOPROST, INHALATION SOLUTION, FDA-APPROVED FINAL PRODUCT, NON-COMPOUNDED, ADMINISTERED THROUGH DME, UNIT DOSE FORM, UP TO 20 MCG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| Q4081 | EPOETIN ALFA, 100 UNITS | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| Q4100 | SKIN SUBSTITUTE, NOS] | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 1/1/2026 |
| Q4102 | OASIS WOUND MATRIX SKIN | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 12/4/2021 |
| Q4103 | SKIN SUBSTITUTE, OASIS BURN MATRIX, PER SQUARE CENTIMETER | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 11/4/2019 |
| Q4106 | DERMAGRAFT SKIN SUB | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 12/4/2021 |
| Q4113 | ALLOGRAFT, GRAFT JACKET EXPRESS, INJECTABLE, 1CC | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 11/4/2019 |
| Q4114 | ALLOGRAFT, INTEGRA FLOWABLE WOUND MATRIX, INJECTABLE, 1CC | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 11/4/2019 |
| Q4118 | MATRISTEM MICROMATRIX, 1 MG | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 11/4/2019 |
| Q4122 | DERMACELL | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 12/4/2021 |
| Q4124 | OASIS TRI-LAYER WOUND MA | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 12/4/2021 |
| Q4125 | ARTHROFLEX, PER SQUARE CENTIMETER | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 11/4/2019 |
| Q4126 | MEMODERM, PER SQUARE CENTIMETER | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 11/4/2019 |
| Q4128 | FLEXHD OR ALLOPATCH HD, PER SQUARE CENTIMETER | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 11/4/2019 |
| Q4130 | STRATICE TM, PER SQUARE CENTIMETER | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 11/4/2019 |
| Q4132 | GRAFIX CORE | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 12/4/2021 |

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| Q4133 | GRAFIX PRIME | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 9/13/2025 |
| Q4137 | AMNIOEXCEL OR BIODEXCEL, 1CM | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 11/4/2019 |
| Q4138 | BIODFENCE DRYFLEX, 1CM | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 11/4/2019 |
| Q4139 | AMNIO OR BIODMATRIX, INJ 1CC | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 11/4/2019 |
| Q4140 | BIODFENCE 1CM | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 11/4/2019 |
| Q4148 | NEOX 1K, 1CM | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 11/4/2019 |
| Q4150 | ALLOWRAP DS OR DRY 1 SQ CM | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 11/4/2019 |
| Q4151 | AMNIOBAND, GUARDIAN 1 SQ CM | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 12/4/2021 |
| Q4152 | DERMAPURE 1 SQUARE CM | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 11/4/2019 |
| Q4155 | NEOXFLO OR CLARIFLO 1 MG | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 11/4/2019 |
| Q4156 | NEOX 100 1 SQUARE CM | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 11/4/2019 |
| Q4158 | MARIGEN 1 SQUARE CM | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 1/1/2026 |
| Q4159 | AFFINITY1 SQUARE CM | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 11/4/2019 |
| Q4160 | NUSHIELD 1 SQUARE CM | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 11/4/2019 |
| Q4162 | AMNIOPRO FLOW, BIOSKIN FLOW, BIORENEW FLOW, WOUNDEX FLOW, AMNIOGEN-A, AMNIOGEN-C, 0.5 CC | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 11/4/2019 |
| Q4163 | AMNIOPRO, BIOSKIN, BIORENEW, WOUNDEX, AMNIOGEN-45, AMNIOGEN-200, PER SQUARE CENTIMETER | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 11/4/2019 |
| Q4164 | HELICOLL, PER SQUARE CENTIMETER | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 11/4/2019 |
| Q4166 | CYTAL, PER SQUARE CENTIMETER | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 1/1/2026 |
| Q4168 | AMNIOBAND, 1 MG | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 1/1/2026 |
| Q4170 | CYGNUS, PER SQ CM | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 1/1/2026 |
| Q4173 | PALINGEN OR PALINGEN XPLUS | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 9/13/2025 |
| Q4174 | PALINGEN OR PROMATRIX | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 9/13/2025 |
| Q4180 | REVITA, PER SQ CM | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 11/4/2019 |
| Q4186 | EPIFIX 1 SQ CM | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 12/4/2021 |
| Q4187 | EPICORD 1 SQ CM | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 11/4/2019 |
| Q4189 | ARTACENT AC, 1 MG | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 11/4/2019 |
| Q4192 | RESTORIGIN, 1 CC | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 11/4/2019 |
| Q4193 | COLL-E-DERM 1 SQ CM | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 11/4/2019 |

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| Q4195 | PURAPLY 1 SQ CM | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 11/4/2019 |
| Q4196 | PURAPLY AM 1 SQ CM | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 11/4/2019 |
| Q4215 | AXOLOTL AMBIENT, CRYO 0.1 MG | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 11/4/2019 |
| Q4222 | PROGENAMATRIX, PER SQ CM | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 11/4/2019 |
| Q4227 | AMNIOCORE, PER SQUARE CENTIMETER. | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 7/11/2020 |
| Q4229 | COGENEX AMNIOTIC MEMBRANE, PER SQUARE CENTIMETER. | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 7/11/2020 |
| Q4234 | XCELLERATE, PER SQUARE CENTIMETER. | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 7/11/2020 |
| Q4235 | AMNIOREPAIR OR ALTIPLY, PER SQUARE CENTIMETER. | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 7/11/2020 |
| Q4236 | CAREPATCH, PER SQUARE CENTIMETER | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 1/1/2026 |
| Q4239 | AMNIO-MAXX OR AMNIO-MAXX LITE, PER SQUARE CENTIMETER | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 7/11/2020 |
| Q4246 | CORETEXT OR PROTEXT, PER CC. | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 7/11/2020 |
| Q4250 | AMNIOAMP- MP, PER SQUARE CENTIMETER | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 1/1/2026 |
| Q4253 | ZENITH AMNIOTIC MEMBRANE, PER SQUARE CENTIMETER | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 10/9/2021 |
| Q4254 | NOVAFIX DL, PER SQUARE CENTIMETER | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 1/1/2026 |
| Q4262 | DUAL LAYER IMPAX, PER SQ CM | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 1/1/2026 |
| Q4263 | SURGRAFT TL, PER SQ CM | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 1/1/2026 |
| Q4264 | COCOON MEMBRANE, PER SQ CM | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 1/1/2026 |
| Q4265 | NEOSTIM TL, PER SQUARE CENTIMETER | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 4/29/2023 |
| Q4266 | NEOSTIM MEMBRANE, PER SQUARE CENTIMETER | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 4/29/2023 |
| Q4267 | NEOSTIM DL, PER SQUARE CENTIMETER | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 4/29/2023 |
| Q4268 | SURGRAFT FT, PER SQUARE CENTIMETER | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 4/29/2023 |
| Q4269 | SURGRAFT XT, PER SQUARE CENTIMETER | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 4/29/2023 |
| Q4270 | COMPLETE SL, PER SQUARE CENTIMETER | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 4/29/2023 |
| Q4271 | COMPLETE FT, PER SQUARE CENTIMETER | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 4/29/2023 |
| Q4272 | ESANO A, PER SQ CM | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 7/29/2023 |
| Q4273 | ESANO AAA, PER SQ CM | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 7/29/2023 |
| Q4274 | ESANO AC, PER SQ CM | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 7/29/2023 |

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| Q4275 | ESANO ACA, PER SQ CM | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 7/29/2023 |
| Q4276 | ORION, PER SQ CM | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 7/29/2023 |
| Q4331 | AXOLOTL GRAFT, PER SQUARE CENTIMETER | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 1/1/2026 |
| Q4332 | AXOLOTL DUALGRAFT, PER SQUARE CENTIMETER | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 1/1/2026 |
| Q4345 | MATRIX HD ALLOGRFT PER SQ CM | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 11/2/2024 |
| Q4361 | EPIEXPRESS, PER SQUARE CENTIMETER | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 3/29/2025 |
| Q4383 | SEG PNEUM COMP HEAD NECK CHE | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 10/18/2025 |
| Q4385 | SCOLIOSIS ORTH S-C CUSTOM | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 10/18/2025 |
| Q4386 | ADD LOW EXT MAN AUT VOL ANY | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 10/18/2025 |
| Q4388 | PROSTHETIC DIGIT MECHANICAL | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 10/18/2025 |
| Q4389 | PROSTHETIC THUMB MECHANICAL | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 10/18/2025 |
| Q4392 | GRAFIX DUO, PER SQUARE CENTIMETER | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 10/18/2025 |
| Q4393 | SURGRAFT AC, PER SQUARE CENTIMETER | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 10/18/2025 |
| Q4394 | SURGRAFT ACA, PER SQUARE CENTIMETER | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 10/18/2025 |
| Q4395 | ACELAGRAFT, PER SQUARE CENTIMETER | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 10/18/2025 |
| Q4396 | NATALIN, PER SQUARE CENTIMETER | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 10/18/2025 |
| Q4397 | SUMMIT AAA, PER SQUARE CENTIMETER | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 10/18/2025 |
| Q4398 | SUMMIT AC, PER SQUARE CENTIMETER | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 1/1/2026 |
| Q4399 | SUMMIT FX, PER SQUARE CENTIMETE | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 1/1/2026 |
| Q4400 | POLYGON3 MEMBRANE, PER SQUARE CENTIMETE | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 1/1/2026 |
| Q4401 | ABSOLV3 MEMBRANE, PER SQUARE CENTIMETE | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 1/1/2026 |
| Q4410 | AMCHOMATRIXDL, PER SQUARE CENTIMETER | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 1/1/2026 |
| Q4411 | AMNIOMATRIXF4X, PER SQUARE CENTIMETE | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 1/1/2026 |
| Q4413 | CYGNUS SOLO, PER SQUARE CENTIMETE | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 1/1/2026 |
| Q4420 | NUFORM, PER SQUARE CENTIMETER | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 1/1/2026 |
| Q4422 | A/C WRAP, PER SQUARE CENTIMETER (ADD-ON, LIST SEPARATELY IN ADDITION TO PRIMARY PROCEDURE) | Potential Experimental/Investigation/Un | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 4/1/2026 |
| Q4423 | BIOLAB TRI-MEMBRANE WRAP FLOW, PER SQUARE CENTIMETER (ADD-ON, LIST SEPARATELY IN ADDITION TO PRIMARY PROCEDURE) | Potential Experimental/Investigation/Un | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 4/1/2026 |
| Q4424 | REVIVE FT, PER SQUARE CENTIMETER (ADD-ON, LIST SEPARATELY IN ADDITION TO PRIMARY PROCEDURE) | Potential Experimental/Investigation/Un | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 4/1/2026 |
| Q4436 | RENATI AC MEMBRANE, PER SQUARE CENTIMETER | Potential Experimental/Investigation/Un | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 4/1/2026 |
| Q4437 | REVIVAL AC, PER SQUARE CENTIMETER (ADD-ON, LIST SEPARATELY IN ADDITION TO PRIMARY PROCEDURE) | Potential Experimental/Investigation/Un | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 4/1/2026 |

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| Q4438 | PRETECT, PER SQUARE CENTIMETER (ADD-ON, LIST SEPARATELY IN ADDITION TO PRIMARY PROCEDURE) | Potential Experimental/Investigation/Un | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 4/1/2026 |
| Q4440 | CURAMATRIX, PER SQUARE CENTIMETER (ADD-ON, LIST SEPARATELY IN ADDITION TO PRIMARY PROCEDURE) | Potential Experimental/Investigation/Un | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 4/1/2026 |
| Q5098 | INJ USTEKINUMAB-SRLF, 1 MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 6/28/2025 |
| Q5099 | INJ USTEKINUMAB-STBA, 1 MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 6/28/2025 |
| Q5100 | INJ USTEKINUMAB-KFCE, 1 MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 6/28/2025 |
| Q5103 | INJECTION, INFLECTRA | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| Q5104 | INJECTION, RENFLEXIS | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| Q5105 | INJ RETACRIT ESRD ON DIALYSI | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| Q5106 | INJ RETACRIT NON-ESRD USE | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| Q5107 | INJ MVASI 10 MG | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| Q5108 | INJECTION, FULPHILA | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| Q5109 | INJECTION, IXIFI, 10 MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| Q5111 | INJECTION, UDENYCA, 0.5 MG. | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| Q5112 | INJ ONTRUZANT 10 MG | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| Q5113 | INJ HERZUMA 10 MG | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| Q5114 | INJ OGVIRI 10 MG | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| Q5115 | INJ RITUXIMAB-ABBS BIO 10 MG | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| Q5116 | INJ., TRAZIMERA, 10 MG | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| Q5117 | INJ., KANJINTI, 10 MG | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| Q5118 | INJ., ZIRABEV, 10 MG | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| Q5119 | INJECTION, RITUXIMAB-PVVR, BIOSIMILAR, (RUXIENCE), 10 MG. | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| Q5120 | INJECTION, PEGFILGRASTIM-BMEZ, BIOSIMILAR, (ZIENTENZO), 0.5 MG. | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| Q5121 | INJECTION, INFILXIMAB-AXXQ, BIOSIMILAR, (AVSOLA), 10 MG. | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 7/11/2020 |
| Q5122 | INJ, NYVEPRIA | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| Q5123 | INJECTION, RITUXIMAB-ARRX, BIOSIMILAR, (RIABNI), 10 MG | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| Q5124 | INJ, BYOOVIZ, 0.1 MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 4/30/2022 |
| Q5125 | INJ, RELEUKO 1 MCG | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| Q5126 | INJ ALYMSYS 10 MG | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| Q5127 | INJECTION, PEGFILGRASTIM-FPGK (STIMUFEND), BIOSIMILAR, 0.5 MG | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| Q5128 | INJECTION, RANIBIZUMAB-EQRN (CIMERLI), BIOSIMILAR, 0.1 MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 4/29/2023 |
| Q5129 | INJECTION, BEVACIZUMAB-ADCC (VEGZELMA), BIOSIMILAR, 10 MG | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| Q5130 | INJECTION, PEGFILGRASTIM-PBBK (FYLNETRA), BIOSIMILAR, 0.5 MG | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| Q5133 | INJECTION, TOCILIZUMAB-BAVI (TOFDENCE), BIOSIMILAR, 1 MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 4/13/2024 |
| Q5134 | INJECTION, NATALIZUMAB-SZTN (TYRUKO), BIOSIMILAR, 1 MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 4/13/2024 |
| Q5135 | INJ, TYENNE, 1 MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 9/28/2024 |
| Q5136 | INJ, DENOSUMAB-BBDZ, 1 MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 9/28/2024 |
| Q5137 | INJECTION, USTEKINUMAB-AUUB (WEZLANA), BIOSIMILAR, SUBCUTANEOUS, 1 MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 7/27/2024 |
| Q5138 | INJECTION, USTEKINUMAB-AUUB (WEZLANA), BIOSIMILAR, INTRAVENOUS, 1 MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 7/27/2024 |
| Q5140 | INJ ADALIMUMAB-FKJP, 1 MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 12/31/2024 |
| Q5141 | INJ ADALIMUMAB-AATY, 1 MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 12/31/2024 |
| Q5142 | INJ ADALIMUMAB-RYVK, 1 MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 12/31/2024 |
| Q5143 | INJ ADALIMUMAB-ADBM, 1 MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 12/31/2024 |
| Q5144 | INJ, IDACIO, 1 MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 12/31/2024 |
| Q5145 | INJ, ABRILADA, 1 MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 12/31/2024 |
| Q5146 | INJ, HERCESSI, 10 MG | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| Q5147 | INJECTION, AFLIBERCEPT-AYYH (PAVBLU), BIOSIMILAR, 1 MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 3/29/2025 |
| Q5148 | INJECTION, FILGRASTIM-TXID (NYPOZI), BIOSIMILAR, 1 MICROGRAM | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| Q5149 | INJECTION, AFLIBERCEPT-ABZV (ENZEEVU), BIOSIMILAR, 1 MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 3/29/2025 |
| Q5150 | INJECTION, AFLIBERCEPT-MRBB (AHZANTIVE), BIOSIMILAR, 1 MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 3/29/2025 |
| Q5151 | INJECTION, ECULIZUMAB-AAGH (EPYSQU), BIOSIMILAR, 2 MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 3/29/2025 |
| Q5152 | INJECTION, ECULIZUMAB-AEEB (BKEMV), BIOSIMILAR, 2 MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 3/29/2025 |
| Q5153 | INJ, AFLIBERCEPT-YSZY, 1 MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 6/28/2025 |
| Q5154 | INJECTION, OMALIZUMAB-IGEC (OMLYCLO), BIOSIMILAR, 5 MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 9/13/2025 |
| Q5155 | INJECTION, AFLIBERCEPT-JBVF (YESAFILI), BIOSIMILAR, 1 MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 9/13/2025 |
| Q5156 | INJECTION, TOCILIZUMAB-ANOH (AVTOZMA), BIOSIMILAR, 1 MG | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| Q5157 | INJECTION, DENOSUMAB-BMWO (STOBACLO/OSENVELT), BIOSIMILAR, 1 MG | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |

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| Q5158 | INJECTION, DENOSUMAB-BNHT (BOMYNTRA/CONEXENCE), BIOSIMILAR, 1 MG | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| Q5159 | INJECTION, DENOSUMAB-DSSB (OSPOMYV/XBRYK), BIOSIMILAR, 1 MG | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| Q5160 | INJECTION, BEVACIZUMAB-NWGD (JOBEVNE), BIOSIMILAR, 10 MG | INJECTABLES | INFUSIONS/INJECTABLES | 1/1/2026 |
| Q5161 | INJECTION, DENOSUMAB-KYQQ (AUKELSO/BOSAYA), BIOSIMILAR, 1 MG | Injectable Medications | INFUSIONS/INJECTABLES | 4/1/2026 |
| Q5162 | INJECTION, DENOSUMAB-NXXP (BILDYOS/BILPREVDA), BIOSIMILAR, 1 MG | Injectable Medications | INFUSIONS/INJECTABLES | 4/1/2026 |
| Q5164 | INJECTION, USTEKINUMAB-HMNY (STARJEMZA), BIOSIMILAR, 1 MG | Injectable Medications | INFUSIONS/INJECTABLES | 7/1/2026 |
| Q5165 | INJECTION, DENOSUMAB-MOBZ (OZILTUS), BIOSIMILAR, 1 MG | Injectable Medications | INFUSIONS/INJECTABLES | 7/1/2026 |
| Q5166 | INJECTION, DENOSUMAB-DESU (OSVYRTI/JUBEREQ), BIOSIMILAR, 1 MG | Injectable Medications | INFUSIONS/INJECTABLES | 7/1/2026 |
| Q5167 | INJECTION, DENOSUMAB-QBDE (ENOBV/XTRENBO), BIOSIMILAR, 1 MG | Injectable Medications | INFUSIONS/INJECTABLES | 7/1/2026 |
| Q5168 | INJECTION, RANIBIZUMAB-LEYK (NUFYMCO), BIOSIMILAR, 1 MG | Injectable Medications | INFUSIONS/INJECTABLES | 7/1/2026 |
| Q5169 | INJECTION, PEGFILGRASTIM-UNNE (ARMLUPEG), BIOSIMILAR, 1 MG | Injectable Medications | INFUSIONS/INJECTABLES | 7/1/2026 |
| Q5170 | INJECTION, AFLIBERCEPT-BOAV (EYDENZELT), BIOSIMILAR, 1 MG | Injectable Medications | INFUSIONS/INJECTABLES | 7/1/2026 |
| Q5171 | INJECTION, DENOSUMAB-MOBZ (BONCRESA), BIOSIMILAR, 1 MG | Injectable Medications | INFUSIONS/INJECTABLES | 7/1/2026 |
| Q9996 | USTEKINUMAB-TTWE SUB CU INJ | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 12/31/2024 |
| Q9997 | USTEKINUMAB-TTWE IV INJ 1 MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 12/31/2024 |
| Q9998 | USTEKINUMAB-AEKN INJ | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 12/31/2024 |
| Q9999 | INJECTION, USTEKINUMAB-AAUZ (OTULFI), BIOSIMILAR, 1 MG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 3/29/2025 |
| S0013 | ESKETAMINE, NASAL SPRAY | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 1/22/2021 |
| S0090 | SILDENAFIL CITRATE, 25 MG (REVATIO) | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| S0122 | MENOTROPINS, 75 IU | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| S0126 | FOLLITROPIN ALFA, 75 IU | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| S0128 | FOLLITROPIN BETA, 75 IU | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| S0132 | GANIRELIX ACETATE, 250 MCG | INJECTABLE MEDICATIONS | INFUSIONS/INJECTABLES | 11/4/2019 |
| S0145 | PEG INTERFERON ALFA-2A/1 | MEDICAL ONCOLOGY | CHEMOTHERAPY/RADIATION | 10/18/2025 |
| S0189 | TESTOSTERONE PELLET 75 M | OUTPATIENT PROCEDURES (POTENTIALLY COSMETIC) | OUTPATIENT SURGICAL PROCEDURES | 11/4/2019 |
| S1040 | CRANIAL REMOLDING ORTHOSIS, RIGID, WITH SOFT INTERFACE MATERIAL, CUSTOM FABRICATED, INCLUDES FITTING AND ADJUSTMENT(S) | ORTHOTICS AND PROSTHETICS | ORTHOTICS AND PROSTHETICS | 11/4/2019 |
| S2053 | TRANSPLANTATION OF SMALL INTESTINE AND LIVER ALLOGRAFTS | TRANSPLANT | TRANSPLANT | 11/4/2019 |
| S2054 | TRANSPLANTATION OF MULTIVISCERAL ORGANS | TRANSPLANT | TRANSPLANT | 11/4/2019 |
| S2060 | LOBAR LUNG TRANSPLANTATION | TRANSPLANT | TRANSPLANT | 11/4/2019 |
| S2061 | DONOR LOBECTOMY (LUNG) FOR TRANSPLANTATION, LIVING DONOR | TRANSPLANT | TRANSPLANT | 11/4/2019 |
| S2065 | SIMULTANEOUS PANCREAS KIDNEY TRANSPLANTATION | TRANSPLANT | TRANSPLANT | 11/4/2019 |
| S2095 | TRANSCATH EMBOLIZ-YTRIU | THERAPEUTIC RADIOLOGY | Diagnostic Testing and Radiology services | 5/31/2025 |
| S2102 | ISLET CELL TISSUE TRANSPLANT FROM PANCREAS; ALLOGENEIC | TRANSPLANT | TRANSPLANT | 11/4/2019 |
| S2117 | ARTHROEREISIS, SUBTALAR | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | POTENTIAL EXPERIMENTAL/INVESTIGATION/UNPROVEN | 11/4/2019 |
| S2140 | CORD BLOOD HARVESTING FOR TRANSPLANTATION, ALLOGENEIC | TRANSPLANT | TRANSPLANT | 11/4/2019 |
| S2142 | CORD BLOOD-DERIVED STEM-CELL TRANSPLANTATION, ALLOGENEIC | TRANSPLANT | TRANSPLANT | 11/4/2019 |
| S2150 | BONE MARROW OR BLOOD-DERIVED PERIPHERAL STEM CELL HARVESTING AND TRANSPLANTATION, ALLOGENEIC OR AUTOLOGOUS, INCLUDING PHERESIS, HIGH-DOSE CHEMOTHERAPY, AND THE NUMBER OF DAYS OF POST-TRANSPLANT CARE IN THE GLOBAL DEFINITION (INCLUDING DRUGS; HOSPITALIZATION) | TRANSPLANT | TRANSPLANT | 11/4/2019 |
| S2152 | SOLID ORGAN(S), COMPLETE OR SEGMENTAL, SINGLE ORGAN OR COMBINATION OF ORGANS; DECEASED OR LIVING DONOR(S), PROCUREMENT, TRANSPLANTATION, AND RELATED COMPLICATIONS INCLUDING: DRUGS; SUPPLIES; HOSPITALIZATION WITH OUTPATIENT FOLLOW-UP; MEDICAL/SURGICAL, DIA | TRANSPLANT | TRANSPLANT | 11/4/2019 |
| S5150 | UNSKILLED RESPITE-PER 15 | HOME HEALTH CARE | HOME HEALTH CARE | 8/31/2024 |
| S5151 | UNSKILL RESPITE-PER DIEM | HOME HEALTH CARE | HOME HEALTH CARE | 8/31/2024 |
| S8030 | TANTALUM RING APPLICATIN | THERAPEUTIC RADIOLOGY | CHEMOTHERAPY/RADIATION | 5/31/2025 |
| S8037 | MAGNETIC RESONANCE CHOLANGIOPANCREATOGRAPHY (MRCP) | DIAGNOSTIC RADIOLOGY | Diagnostic Testing and Radiology services | 11/4/2019 |
| S8092 | ELECTRON BEAM COMPUTED TOMOGRAPHY (ALSO KNOWN AS ULTRAFASCT, CINE CT) | DIAGNOSTIC RADIOLOGY | COMPLEX IMAGING | 11/4/2019 |
| S9122 | HOME HEALTH AIDE OR CERTIFIED NURSE ASSISTANT, PROVIDING CARE IN THE HOME; PER HOUR | HOME HEALTH CARE | HOME HEALTH CARE | 11/4/2019 |
| S9123 | NURSING CARE, IN THE HOME, BY REGISTERED NURSE, PER HOUR (USE FOR GENERAL NURSING CARE ONLY; NOT TO BE USED WHEN CPT CODES 99500-99602 CAN BE USED) | HOME HEALTH CARE | HOME HEALTH CARE | 11/4/2019 |

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| S9124 | NURSING CARE, IN THE HOME; BY LICENSED PRACTICAL NURSE, PER HOUR | HOME HEALTH CARE | HOME HEALTH CARE | 11/4/2019 |
| T1000 | PRIVATE DUTY /INDEPEN NSG | HOME HEALTH CARE | HOME HEALTH CARE | 12/4/2021 |
| T1005 | RESPITE CARE SERVICE 15M | HOME HEALTH CARE | HOME HEALTH CARE | 8/31/2024 |

Termed Codes

| PROCEDURE CODE | PROCEDURE DESCRIPTION | PAYER SOLUTIONS PRECERT CATEGORY | CODE TERM DATE |
|----------------|--|---|----------------|
| 0002U | ONC CLRCT 3 UR METAB ALG PLP | Potential Experimental/Investigation/Unproven | 10/8/2021 |
| 0003U | ONC OVAR 5 PRTN SER ALG SCOR | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 0003U | ONC OVAR 5 PRTN SER ALG SCOR | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 0006U | RX MNTR 120+ DRUGS & SBSTS | Potential Experimental/Investigation/Unproven | 10/8/2021 |
| 0007M | ONC GASTRO 51 GENE NOMOGRAM | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 0007U | HPYLORI DETCJ ABX RSTNC DNA | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 0007U | RX TEST PRSMV UR W/DEF CONF | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 0008U | HPYLORI DETCJ ABX RSTNC DNA | Outpatient Procedures (Potentially Cosmetic) | 4/29/2022 |
| 0008U | RX TEST PRSMV UR W/DEF CONF | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 0010U | NFCT DS STRN TYP WHL GEN SEQ | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 0010U | NFCT DS STRN TYP WHL GEN SEQ | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 0011U | RX MNTR LC-MS/MS ORAL FLUID | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0011U | RX MNTR LC-MS/MS ORAL FLUID | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 0012U | GERMLN DO GENE REARGMT DETCJ | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 0012U | GERMLN DO GENE REARGMT DETCJ | Outpatient Procedures (Potentially Cosmetic) | 9/30/2022 |
| 0013M | ONC MRNA 5 GEN RECR URTHL CA | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 0013U | ONC SLD ORG NEO GENE REARGMT | Potential Experimental/Investigation/Unproven | 7/10/2020 |
| 0014M | LIVER DS ALYS 3 BMRK SRM ALG | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| 0014U | HEM HMTLMF NEO GENE REARGMT | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 0014U | HEM HMTLMF NEO GENE REARGMT | Outpatient Procedures (Potentially Cosmetic) | 9/30/2022 |
| 0016U | ONC HMTLMF NEO RNA BCR/ABL1 | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 0016U | ONC HMTLMF NEO RNA BCR/ABL1 | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 0017U | ONC HMTLMF NEO JAK2 MUT DNA | Potential Experimental/Investigation/Unproven | 4/10/2020 |
| 0018M | TRNSPLJ RNL MEAS CD154+CLL | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| 0020M | Oncology (central nervous system), analysis of 30000 DNA methylation loci by methylation array, utilizing DNA extracted from tumor tissue, diagnostic algorithm reported as probability of matching a reference tumor subclass | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| 0021U | ONC PRST8 DETCJ 8 AUTOANTB | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 0022U | TRGT GEN SEQ DNA&RNA 23 GENE | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 0023U | ONC AML DNA DETCJ/ NONDETCJ | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 0025U | TENOFOVIR LIQ CHROM UR QUAN | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 0034U | IPMT NUDT1 5 GENES | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 0037U | TRGT GEN SEQ DNA 324 GENES | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 0045U | ONC BRST DUX CARC IS 12 GENE | Outpatient Procedures (Potentially Cosmetic) | 4/30/2021 |
| 0046U | FLT3 GENE ITD VARIANTS QUAN | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 0047U | ONC PRST8 MRNA 17 GENE ALG | Outpatient Procedures (Potentially Cosmetic) | 7/10/2020 |
| 0048U | ONC SLD ORG NEO DNA 468 GENE | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| 0049U | NPM1 GENE ANALYSIS QUAN | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 0050U | TRGT GEN SEQ DNA 194 GENES | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 0051U | RX MNTR LC-MS/MS UR 31 PNL | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 0052U | LPOPRTN BLD W/5 MAJ CLASSES | Potential Experimental/Investigation/Unproven | 9/13/2020 |
| 0053U | ONC PRST8 CA FISH ALYS 4 GEN | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 0054U | RX MNTR 14+ DRUGS & SBSTS | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 0055U | CARD HRT TRNSPL 96 DNA SEQ | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 0056U | HEM AML DNA GENE REARGMT | Outpatient Procedures (Potentially Cosmetic) | 9/30/2022 |
| 0057U | ONC SLD ORG NEO MRNA 51 GENE | Outpatient Procedures (Potentially Cosmetic) | 12/3/2021 |
| 0058T | Cryopreservation; reproductive tissue, ovarian | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0058U | ONC MERKEL CLL CARC SRM QUAN | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 0059T | Cryopreservation; oocyte(s) | Potential Experimental/Investigation/Unproven | 7/10/2020 |
| 0059U | ONC MERKEL CLL CARC SRM +/- | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 0060U | TWN ZYG GEN SEQ ALYS CHRMS2 | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 0061U | TC MEAS 5 BMRK SFDI M-S ALYS | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 0062U | AI SLE IGG&IGM ALYS 80 BMRK | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 0063U | NEURO AUTISM 32 AMINES ALG | Outpatient Procedures (Potentially Cosmetic) | 1/28/2022 |
| 0064U | ANTB TP TOTAL&RPR IA QUAL | Outpatient Procedures (Potentially Cosmetic) | 4/30/2021 |
| 0065U | SYFLS TST NONTREPONEMAL ANTB | Outpatient Procedures (Potentially Cosmetic) | 4/10/2020 |
| 0066U | PAMG-1 IA CERVICO-VAG FLUID | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 0067U | ONC BRST IMHCHEM PRFL 4 BMRK | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 0068U | CANDIDA SPECIES PNL AMP PRB | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 0069U | ONC CLRCT MICRORNA MIR-31-3P | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 0070U | CYP2D6 GEN COM&SLCT RAR VRNT | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 0071T | Focused ultrasound ablation of uterine leiomyomata, including MR guidance; total leiomyomata volume less than 200 cc of tissue | Potential Experimental/Investigation/Unproven | 4/25/2025 |
| 0071U | CYP2D6 FULL GENE SEQUENCE | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 0072T | Focused ultrasound ablation of uterine leiomyomata, including MR guidance; total leiomyomata volume greater or equal to 200 cc of tissue | Potential Experimental/Investigation/Unproven | 4/25/2025 |
| 0072U | CYP2D6 GEN CYP2D6-2D7 HYBRID | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 0073U | CYP2D6 GEN CYP2D7-2D6 HYBRID | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 0074U | CYP2D6 NONDUPLICATED GENE | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 0075T | PERQ STENT/CHEST VERT AR | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| 0075U | CYP2D6 5' GENE DUP/MLT | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 0076T | S&I STENT/CHEST VERT ART | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 0076U | CYP2D6 3' GENE DUP/MLT | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 0077U | IG PARAPROTEIN QUAL BLD/UR | Outpatient Procedures (Potentially Cosmetic) | 4/10/2020 |
| 0078U | PAIN MGT OPI USE GNOTYP PNL | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 0079U | CMPTV DNA ALYS MLT SNPS | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |

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| 0080U | ONC LNG 5 CLIN RSK FACTR ALG | Outpatient Procedures (Potentially Cosmetic) | 10/17/2025 |
| 0081U | ONC UVEAL MLNMA MRNA 15 GENE | Outpatient Procedures (Potentially Cosmetic) | 1/22/2020 |
| 0082U | RX TEST DEF 90+ RX/SBSTS UR | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 0083U | ONC RSPSE CEMO CNTRST TOMOG | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 0085T | Breath test for heart transplant rejection | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0087U | CRD HRT TRNSPL MRNA 1283 GEN | Outpatient Procedures (Potentially Cosmetic) | 6/27/2025 |
| 0088U | TRNSPLJ KDN ALGRFT REJ 1494 | Outpatient Procedures (Potentially Cosmetic) | 6/27/2025 |
| 0089U | ONC MLNMA FRAME & LINC00518 | Potential Experimental/Investigation/Unproven | 11/1/2024 |
| 0090U | ONC CUTAN MLNMA MRNA 23 GENE | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| 0091U | ONC CLRCT SCR WHL BLD ALG | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 0093U | RX MNTR 65 COM DRUGS URINE | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| 0094U | GENOME RAPID SEQUENCE ALYS | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 0094U | GENOME RAPID SEQUENCE ALYS | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 0096U | HPV HI RISK TYPES MALE URINE | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 0098T | REV ARTIFIC DISC ADDL | Spinal Services | 11/1/2024 |
| 0098T | Revision of total disc arthroplasty, anterior approach; each additional interspace (List separately in addition to code for primary procedure) | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 0101T | Extracorporeal shock wave involving musculoskeletal system, not otherwise specified, high energy | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0101U | HERED COLON CA DO 15 GENES | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 0101U | HERED COLON CA DO 15 GENES | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 0102T | Extracorporeal shock wave, high energy, performed by a physician, requiring anesthesia other than local, involving lateral humeral epicondyle | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0102U | HERED BRST CA RLTD DO 17 GEN | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 0102U | HERED BRST CA RLTD DO 17 GEN | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| 0103U | HERED OVA CA PNL 24 GENES | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 0103U | HERED OVA CA PNL 24 GENES | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 0104U | HERED PAN CA PNL 32 GENES | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 0105U | NEPH CKD MULT ECLIA TUM NEC | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| 0106U | GSTR EMPTG 7 TIMED BRTH SPEC | Potential Experimental/Investigation/Unproven | 4/10/2020 |
| 0107U | C DIFF TOX AG DETC J IA STOOL | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| 0108U | GI BARRETT ESOPH 9 PRTN BMRK | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| 0109U | ID ASPERGILLUS DNA 4 SPECIES | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| 0110U | RX MNTR 1+ORAL ONC RX&SBSTS | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| 0111T | Long-chain (C20-22) omega-3 fatty acids in red blood cell (RBC) membranes | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0111U | RX MNTR 1+ORAL ONC RX&SBSTS | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 0112U | RX MNTR 1+ORAL ONC RX&SBSTS | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| 0113U | RX MNTR 1+ORAL ONC RX&SBSTS | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| 0114U | RX MNTR 1+ORAL ONC RX&SBSTS | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| 0115U | RX MNTR 1+ORAL ONC RX&SBSTS | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0116U | RX MNTR 1+ORAL ONC RX&SBSTS | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| 0117U | RX MNTR 1+ORAL ONC RX&SBSTS | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| 0118U | RX MNTR 1+ORAL ONC RX&SBSTS | Potential Experimental/Investigation/Unproven | 11/1/2024 |
| 0119U | RX MNTR 1+ORAL ONC RX&SBSTS | Potential Experimental/Investigation/Unproven | 10/8/2021 |
| 0120U | RX MNTR 1+ORAL ONC RX&SBSTS | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| 0121U | RX MNTR 1+ORAL ONC RX&SBSTS | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| 0122U | RX MNTR 1+ORAL ONC RX&SBSTS | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| 0123U | RX MNTR 1+ORAL ONC RX&SBSTS | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| 0124U | RX MNTR 1+ORAL ONC RX&SBSTS | Potential Experimental/Investigation/Unproven | 7/10/2020 |
| 0125U | RX MNTR 1+ORAL ONC RX&SBSTS | Potential Experimental/Investigation/Unproven | 7/10/2020 |
| 0126U | RX MNTR 1+ORAL ONC RX&SBSTS | Potential Experimental/Investigation/Unproven | 7/10/2020 |
| 0127U | RX MNTR 1+ORAL ONC RX&SBSTS | Potential Experimental/Investigation/Unproven | 7/10/2020 |
| 0128U | RX MNTR 1+ORAL ONC RX&SBSTS | Potential Experimental/Investigation/Unproven | 7/10/2020 |
| 0129U | RX MNTR 1+ORAL ONC RX&SBSTS | Potential Experimental/Investigation/Unproven | 11/1/2024 |
| 0130U | RX MNTR 1+ORAL ONC RX&SBSTS | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| 0131U | RX MNTR 1+ORAL ONC RX&SBSTS | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| 0132U | RX MNTR 1+ORAL ONC RX&SBSTS | Potential Experimental/Investigation/Unproven | 11/1/2024 |
| 0133U | RX MNTR 1+ORAL ONC RX&SBSTS | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| 0134U | RX MNTR 1+ORAL ONC RX&SBSTS | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| 0135U | RX MNTR 1+ORAL ONC RX&SBSTS | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| 0136U | RX MNTR 1+ORAL ONC RX&SBSTS | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| 0137U | RX MNTR 1+ORAL ONC RX&SBSTS | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| 0138U | RX MNTR 1+ORAL ONC RX&SBSTS | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| 0139U | Neurology (autism spectrum disorder [ASD]), quantitative measurements of 6 central carbon metabolites (ie, L-t-ketoglutarate, alanine, lactate, phenylalanine, pyruvate, and succinate), LC-MS/MS, plasma, algorithmic analysis with result reported as negative | Potential Experimental/Investigation/Unproven | 10/8/2021 |
| 0140U | Infectious disease (fungi), fungal pathogen identification, DNA (15 fungal targets), blood culture, amplified probe technique, each target reported as detected or not detected | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| 0141U | Infectious disease (bacteria and fungi), gram-positive organism identification and drug resistance element detection, DNA (20 gram-positive bacterial targets, 4 resistance genes, 1 pan gram-negative bacterial target, 1 pan Candida target), blood culture, | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 0142U | Infectious disease (bacteria and fungi), gram-negative bacterial identification and drug resistance element detection, DNA (21 gram-negative bacterial targets, 6 resistance genes, 1 pan gram-positive bacterial target, 1 pan Candida target), amplified prob | Potential Experimental/Investigation/Unproven | 7/28/2023 |

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| 0143U | Drug assay, definitive, 120 or more drugs or metabolites, urine, quantitative liquid chromatography with tandem mass spectrometry (LC-MS/MS) using multiple reaction monitoring (MRM), with drug or metabolite description, comments including sample validation | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 0144U | Drug assay, definitive, 160 or more drugs or metabolites, urine, quantitative liquid chromatography with tandem mass spectrometry (LC-MS/MS) using multiple reaction monitoring (MRM), with drug or metabolite description, comments including sample validation | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 0145U | Drug assay, definitive, 65 or more drugs or metabolites, urine, quantitative liquid chromatography with tandem mass spectrometry (LC-MS/MS) using multiple reaction monitoring (MRM), with drug or metabolite description, comments including sample validation | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 0146U | Drug assay, definitive, 80 or more drugs or metabolites, urine, by quantitative liquid chromatography with tandem mass spectrometry (LC-MS/MS) using multiple reaction monitoring (MRM), with drug or metabolite description, comments including sample validation | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 0147U | Drug assay, definitive, 85 or more drugs or metabolites, urine, quantitative liquid chromatography with tandem mass spectrometry (LC-MS/MS) using multiple reaction monitoring (MRM), with drug or metabolite description, comments including sample validation | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 0148U | Drug assay, definitive, 100 or more drugs or metabolites, urine, quantitative liquid chromatography with tandem mass spectrometry (LC-MS/MS) using multiple reaction monitoring (MRM), with drug or metabolite description, comments including sample validation | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 0149U | Drug assay, definitive, 60 or more drugs or metabolites, urine, quantitative liquid chromatography with tandem mass spectrometry (LC-MS/MS) using multiple reaction monitoring (MRM), with drug or metabolite description, comments including sample validation | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 0150U | Drug assay, definitive, 120 or more drugs or metabolites, urine, quantitative liquid chromatography with tandem mass spectrometry (LC-MS/MS) using multiple reaction monitoring (MRM), with drug or metabolite description, comments including sample validation | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 0151U | Infectious disease (bacterial or viral respiratory tract infection), pathogen specific nucleic acid (DNA or RNA), 33 targets, real-time semi-quantitative PCR, bronchoalveolar lavage, sputum, or endotracheal aspirate, detection of 33 organismal and antibiotic | Potential Experimental/Investigation/Unproven | 5/27/2022 |
| 0152U | Infectious disease (bacteria, fungi, parasites, and DNA viruses), DNA, PCR and next-generation sequencing, plasma, detection of >1,000 potential microbial organisms for significant positive pathogens | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0153U | Oncology (breast), mRNA, gene expression profiling by next-generation sequencing of 101 genes, utilizing formalin-fixed paraffin-embedded tissue, algorithm reported as a triple negative breast cancer clinical subtype(s) with information on immune cell inv | Potential Experimental/Investigation/Unproven | 4/10/2020 |
| 0156U | Copy number (eg, intellectual disability, dysmorphism), sequence analysis | Potential Experimental/Investigation/Unproven | 4/10/2020 |
| 0157U | APC (APC regulator of WNT signaling pathway) (eg, familial adenomatous polyposis [FAP]) mRNA sequence analysis (List separately in addition to code for primary procedure) | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| 0158U | MLH1 (mutL homolog 1) (eg, hereditary non-polyposis colorectal cancer, Lynch syndrome) mRNA sequence analysis (List separately in addition to code for primary procedure) | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 0158U | MLH1 MRNA SEQ ALYS | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 0159U | MSH2 (mutS homolog 2) (eg, hereditary colon cancer, Lynch syndrome) mRNA sequence analysis (List separately in addition to code for primary procedure) | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 0159U | MSH2 MRNA SEQ ALYS | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 0160U | MSH6 (mutS homolog 6) (eg, hereditary colon cancer, Lynch syndrome) mRNA sequence analysis (List separately in addition to code for primary procedure) | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 0160U | MSH6 MRNA SEQ ALYS | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 0161U | PMS2 (PMS1 homolog 2, mismatch repair system component) (eg, hereditary non-polyposis colorectal cancer, Lynch syndrome) mRNA sequence analysis (List separately in addition to code for primary procedure) | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 0161U | PMS2 MRNA SEQ ALYS | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 0162U | HERED COLON CA TRGT MRNA PNL | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 0162U | Hereditary colon cancer (Lynch syndrome), targeted mRNA sequence analysis panel (MLH1, MSH2, MSH6, PMS2) (List separately in addition to code for primary procedure) | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 0163T | Total disc arthroplasty (artificial disc), anterior approach, including discectomy to prepare interspace (other than for decompression), lumbar, each additional interspace | Potential Experimental/Investigation/Unproven | 1/27/2023 |
| 0163U | Oncology (colorectal) screening, biochemical enzyme-linked immunosorbent assay (ELISA) of 3 plasma or serum proteins (fetalocarcinoma derived growth factor-1 [TDGF-1, Cripto-1], carcinoembryonic antigen [CEA], extracellular matrix protein [ECM]), with dem | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 0165T | Revision of total disc arthroplasty, anterior approach, lumbar, each additional interspace | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0165U | Peanut allergen-specific IgE and quantitative assessment of 64 epitopes using enzyme-linked immunosorbent assay (ELISA), blood, individual epitope results and interpretation | Outpatient Procedures (Potentially Cosmetic) | 7/10/2020 |

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| 0169U | NUDT15 (nudix hydrolase 15) and TPMT (thiopurine S-methyltransferase) (eg, drug metabolism) gene analysis, common variants | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| 0172U | Temporary female intraurethral valve-pump (ie, voiding prosthesis); initial insertion, including urethral measurement | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| 0174T | Computer aided detection (CAD) (computer algorithm analysis of digital image data for lesion detection) with further physician review for interpretation and report, with or without digitization of film radiographic images, chest radiograph(s), performed c | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0175T | Computer aided detection (CAD) (computer algorithm analysis of digital image data for lesion detection) with further physician review for interpretation and report, with or without digitization of film radiographic images, chest radiograph(s), performed r | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0177U | Temporary female intraurethral valve-pump (ie, voiding prosthesis); replacement | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 0179U | Ablation, irreversible electroporation; 1 or more tumors per organ, including imaging guidance, when performed, percutaneous | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 0191T | INSERT ANT SEGMENT DRAIN | Outpatient Procedures (Potentially Cosmetic) | 1/28/2022 |
| 0191T | Insertion of anterior segment aqueous drainage device; internal approach | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 0198T | Measurement of ocular blood flow by repetitive intraocular pressure sampling, with interpretation and report | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0200T | Percutaneous sacral augmentation (sacroplasty) unilateral injection(s), inc the use of a balloon or mechanical device (if utilized), one or more needles | Potential Experimental/Investigation/Unproven | 11/1/2024 |
| 0201T | Percutaneous sacral augmentation (sacroplasty) unilateral injection(s), inc the use of a balloon or mechanical device (if utilized), two or more needles | Potential Experimental/Investigation/Unproven | 11/1/2024 |
| 0202T | POSTERIOR VERTEBRAL JOINT(S) ARTHROPLASTY (EG, FACET JOINT[S] REPLACEMENT), INCLUDING FACETECTOMY, LAMINECTOMY, FORAMINOTOMY, AND VERTEBRAL COLUMN FIXATION, INJECTION OF BONE CEMENT, WHEN PERFORMED, INCLUDING FLUOROSCOPY] | Spinal Services | 11/13/2020 |
| 0204U | ONC THYR MRNA XPRSN ALYS 593 | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 0204U | ONC THYR MRNA XPRSN ALYS 593 | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 0207T | Evacuation of meibomian glands, automated, using heat and intermittent pressure, unilateral | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0208T | Automated Audiometry Air | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0208U | ONC MTC MRNA XPRSN ALYS 108 | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 0208U | ONC MTC MRNA XPRSN ALYS 108 | Outpatient Procedures (Potentially Cosmetic) | 1/28/2022 |
| 0209T | Auto Audiometry Air/Bone | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0210T | Auto Audiometry SP Thresh | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0211T | Auto Audiometry SP Recog | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0211U | ONC PAN-TUM DNA&RNA GNRJ SEQ | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 0211U | ONC PAN-TUM DNA&RNA GNRJ SEQ | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 0212T | Comprehen Auto Audiometry | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0212U | RARE DS GEN DNA ALYS PROBAND | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 0212U | RARE DS GEN DNA ALYS PROBAND | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 0213T | Us Facet JT INJ Cerv/T1 Lev | Potential Experimental/Investigation/Unproven | 3/28/2025 |
| 0213U | RARE DS GEN DNA ALYS EA COMP | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 0213U | RARE DS GEN DNA ALYS EA COMP | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 0214T | Us Facet JT INJ Cerv/T2 Lev | Potential Experimental/Investigation/Unproven | 3/28/2025 |
| 0214U | RARE DS XOM DNA ALYS PROBAND | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 0214U | RARE DS XOM DNA ALYS PROBAND | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 0215T | Us Facet JT INJ Cerv/T3 Lev | Potential Experimental/Investigation/Unproven | 3/28/2025 |
| 0215U | RARE DS XOM DNA ALYS EA COMP | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 0215U | RARE DS XOM DNA ALYS EA COMP | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 0216T | Us Facet JT INJ L1 Level | Potential Experimental/Investigation/Unproven | 3/28/2025 |
| 0217T | Us Facet JT INJ L2 Level | Potential Experimental/Investigation/Unproven | 3/28/2025 |
| 0218T | Us Facet JT INJ L3 Level | Potential Experimental/Investigation/Unproven | 3/28/2025 |
| 0219T | Fuse Spine Facet JT Cerv | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| 0220T | PLMT POST FACET IMPLT TH | Spinal Services | 11/13/2020 |
| 0221T | PLMT POST FACET IMPLT LU | Spinal Services | 7/28/2023 |
| 0222T | PLACEMENT OF A POSTERIOR INTRAFACET IMPLANT(S), UNILATERAL OR BILATERAL, INCLUDING IMAGING AND PLACEMENT OF BONE GRAFT(S) OR SYNTHETIC DEVICE(S), SINGLE LEVEL; EACH ADDITIONAL VERTEBRAL SEGMENT (LIST SEPARATELY IN ADDITI | Spinal Services | 7/28/2023 |
| 0227U | RX ASY PRSMV 30+RX/METABLT | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| 0228T | US TFRML EDRL INJ CRV/T 1LVL | Potential Experimental/Investigation/Unproven | 1/21/2021 |
| 0229T | US TFRML EDRL INJ CRV/T +LVL | Potential Experimental/Investigation/Unproven | 1/21/2021 |
| 0230T | US TFRML EDRL INJ L/S 1LVL | Potential Experimental/Investigation/Unproven | 1/21/2021 |
| 0230U | AR FULL SEQUENCE ANALYSIS | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 0230U | AR FULL SEQUENCE ANALYSIS | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 0231T | US TFRML EDRL INJ L/S +LVL | Potential Experimental/Investigation/Unproven | 1/21/2021 |
| 0231U | CACNA1A FULL GENE ANALYSIS | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 0231U | CACNA1A FULL GENE ANALYSIS | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 0232U | CSTB FULL GENE ANALYSIS | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 0232U | CSTB FULL GENE ANALYSIS | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 0233U | FXN GENE ANALYSIS | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 0233U | FXN GENE ANALYSIS | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 0234U | MECP2 FULL GENE ANALYSIS | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 0234U | MECP2 FULL GENE ANALYSIS | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 0235U | PTEN FULL GENE ANALYSIS | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 0235U | PTEN FULL GENE ANALYSIS | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |

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| 0236U | SMN1&SMN2 FULL GENE ANALYSIS | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 0236U | SMN1&SMN2 FULL GENE ANALYSIS | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 0237U | CAR ION CHNLPTHY GEN SEQ PNL | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 0237U | CAR ION CHNLPTHY GEN SEQ PNL | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 0238U | ONC LNCH SYN GEN DNA SEQ ALY | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 0238U | ONC LNCH SYN GEN DNA SEQ ALY | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 0239U | TRGT GEN SEQ ALYS PNL 311+ | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 0239U | TRGT GEN SEQ ALYS PNL 311+ | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| 0242U | TRGT GEN SEQ ALYS PNL 55-74 | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 0242U | TRGT GEN SEQ ALYS PNL 55-74 | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| 0244U | ONC SOLID ORGN DNA 257 GENES | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 0244U | ONC SOLID ORGN DNA 257 GENES | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 0245U | ONC THYR MUT ALYS 10 GEN&37 | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 0245U | ONC THYR MUT ALYS 10 GEN&37 | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| 0253T | Insertion of anterior segment aqueous drainage device, without extraocular reservoir; internal approach, into the suprachoroidal space | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0254T | Endovascular repair of iliac artery bifurcation (eg, aneurysm, pseudoaneurysm, arteriovenous malformation, trauma) using bifurcated endoprosthesis from the common iliac artery into both the external and internal iliac artery, unilateral; | Potential Experimental/Investigation/Unproven | 1/22/2020 |
| 0258U | AI PSOR MRNA 50-100 GEN ALG | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| 0259U | NEPH CKD NUC MRS MEAS GFR | Potential Experimental/Investigation/Unproven | 3/25/2022 |
| 0260U | RARE DS ID OPT GENOME MAPG | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| 0261U | ONC CLRCT CA IMG ALYS W/AI | Potential Experimental/Investigation/Unproven | 10/17/2025 |
| 0262U | ONC SLD TUM RT.PCR 7 GEN | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| 0263T | Intramuscular autologous bone marrow cell therapy, with preparation of harvested cells, multiple injections, one leg, including ultrasound guidance, if performed; complete procedure including unilateral or bilateral bone marrow harvest | Potential Experimental/Investigation/Unproven | 4/25/2025 |
| 0263U | NEURO ASD MEAS 16 C METBLT | Potential Experimental/Investigation/Unproven | 4/29/2022 |
| 0264T | Intramuscular autologous bone marrow cell therapy, with preparation of harvested cells, multiple injections, one leg, including ultrasound guidance, if performed; complete procedure including unilateral or bilateral bone marrow harvest. Complete procedur | Potential Experimental/Investigation/Unproven | 4/30/2021 |
| 0264U | RARE DS ID OPT GENOME MAPG | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| 0265T | Intramuscular autologous bone marrow cell therapy, with preparation of harvested cells, multiple injections, one leg, including ultrasound guidance, if performed; complete procedure including unilateral or bilateral bone marrow harvest. Unilateral or bila | Potential Experimental/Investigation/Unproven | 4/30/2021 |
| 0265U | RAR DO WHL GN&MTCDRL DNA ALS | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| 0266T | Implantation or replacement of carotid sinus baroreflex activation device; total system (includes generator placement, unilateral or bilateral lead placement, intra-operative interrogation, programming, and repositioning, when performed) | Potential Experimental/Investigation/Unproven | 4/30/2021 |
| 0266U | UNXPL CNST HRTBL DO GN XPRSN | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| 0267T | Implantation or replacement of carotid sinus baroreflex activation device; total system (includes generator placement, unilateral or bilateral lead placement, intra-operative interrogation, programming, and repositioning, when performed) Lead only, unilat | Potential Experimental/Investigation/Unproven | 4/30/2021 |
| 0267U | RARE DO ID OPT GEN MAPG&SEQ | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| 0268T | Implantation or replacement of carotid sinus baroreflex activation device; total system (includes generator placement, unilateral or bilateral lead placement, intra-operative interrogation, programming, and repositioning, when performed) Pulse generator o | Potential Experimental/Investigation/Unproven | 4/30/2021 |
| 0269T | Revision or removal of carotid sinus baroreflex activation device; total system (includes generator placement, unilateral or bilateral lead placement, intra-operative interrogation, programming, and repositioning, when performed) | Potential Experimental/Investigation/Unproven | 4/30/2021 |
| 0270T | Revision or removal of carotid sinus baroreflex activation device; total system (includes generator placement, unilateral or bilateral lead placement, intra-operative interrogation, programming, and repositioning, when performed) lead only, unilateral (in | Potential Experimental/Investigation/Unproven | 4/30/2021 |
| 0271T | Revision or removal of carotid sinus baroreflex activation device; total system (includes generator placement, unilateral or bilateral lead placement, intra-operative interrogation, programming, and repositioning, when performed) pulse generator only (inc | Potential Experimental/Investigation/Unproven | 4/30/2021 |
| 0272T | Interrogation device evaluation (in person), carotid sinus baroreflex activation system, including telemetric iterative communication with the implantable device to monitor device diagnostics and programmed therapy values, with interpretation and report (| Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0273T | Interrogation device evaluation (in person), carotid sinus baroreflex activation system, including telemetric iterative communication with the implantable device to monitor device diagnostics and programmed therapy values, with interpretation and report (| Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0274T | Percutaneous laminotomy/laminectomy (intralaminar approach) for decompression of neural elements, (with or without ligamentous resection, discectomy, facetectomy and/or foraminotomy) any method under indirect image guidance (eg, fluoroscopic, CT), with or | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| 0275T | Percutaneous laminotomy/laminectomy (intralaminar approach) for decompression of neural elements, (with or without ligamentous resection, discectomy, facetectomy and/or foraminotomy) any method under indirect image guidance (eg, fluoroscopic, CT), with or | Potential Experimental/Investigation/Unproven | 11/1/2024 |

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| 0279U | HEM VW FACTOR&CLGN III BNDG | Outpatient Procedures (Potentially Cosmetic) | 3/25/2022 |
| 0280U | HEM VW FACTOR&CLGN IV BNDG | Outpatient Procedures (Potentially Cosmetic) | 3/25/2022 |
| 0281U | HEM VWD PROPEPTIDE AG LVL | Outpatient Procedures (Potentially Cosmetic) | 3/25/2022 |
| 0282U | RBC DNA GNTYP 12 BLD GRP GEN | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 0283U | VW FACTOR TYPE 2B EVAL PLSM | Outpatient Procedures (Potentially Cosmetic) | 3/25/2022 |
| 0284U | VW FACTOR TYPE 2N EVAL PLSM | Outpatient Procedures (Potentially Cosmetic) | 3/25/2022 |
| 0287U | ONC THYR DNA&MRNA 112 GENES | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 0288U | ONC LUNG MRNA QUAN PCR 11&3 | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 0289U | NEURO ALZHEIMER MRNA 24 GEN | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 0290T | Corneal incisions in the recipient cornea created using a laser, in preparation for penetrating or lamellar keratoplasty (List separately in addition to code for primary procedure) | Potential Experimental/Investigation/Unproven | 1/28/2022 |
| 0290U | PAIN MGMT MRNA GEN XPRSN 36 | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 0291U | PSYC MOOD DO MRNA 144 GENES | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 0292U | PSYC STRS DO MRNA 72 GENES | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 0293U | PSYC SUICIDAL IDEA MRNA 54 | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 0294U | LNGVTY&MRILTLY RSK MRNA 18GEN | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 0295U | ONC BRST DUX CARC 7 PROTEINS | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 0296U | ONC ORL&/OROP CA 20 MLC FEAT | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 0297U | ONC PAN TUM WHL GEN SEG DNA | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 0298U | ONC PAN TUM WHL TRNS SEQ RNA | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 0299U | ONC PAN TUM WHL GEN OPT MAPG | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 0300U | ONC PAN TUM WHL GEN SEG&OPT | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 0306U | ONC MRD NXT-GNRJ ALYS 1ST | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| 0307U | ONC MRD NXT-GNRJ ALYS SBSQ | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| 0308T | INSERTION OF OCULAR TELESCOPE PROSTHESIS INCLUDING REMOVAL OF CRYSTALLINE LENS | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| 0312T | Vagus nerve blocking therapy (morbid obesity); laparoscopic implantation of neurostimulator electrode array, anterior and posterior vagal trunks adjacent to esophagogastric junction (EGJ), with implantation of pulse generator, includes programming | Potential Experimental/Investigation/Unproven | 4/30/2021 |
| 0312U | AI DS SLE ALYS 8 IGG AUTOANT | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| 0313T | Vagus nerve blocking therapy (morbid obesity); laparoscopic revision or replacement of vagal trunk neurostimulator electrode array, including connection to existing pulse generator | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0313U | ONC PNCRS DNA&MRNA SEQ 74 | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| 0314T | Vagus nerve blocking therapy (morbid obesity); laparoscopic removal of vagal trunk neurostimulator electrode array and pulse generator | Potential Experimental/Investigation/Unproven | 1/27/2023 |
| 0314U | ONC CUTAN MLNMA MRNA 35 GENE | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| 0315T | Vagus nerve blocking therapy (morbid obesity); removal of pulse generator | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0315U | ONC CUTAN SQ CLL CA MRNA 40 | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| 0316T | Vagus nerve blocking therapy (morbid obesity); replacement of pulse generator | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0317T | Vagus nerve blocking therapy (morbid obesity); neurostimulator pulse generator electronic analysis, includes reprogramming when performed | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0317U | ONC LUNG CA 4-PRB FISH ASSAY | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| 0318U | PED WHL GEN MTHYLTN ALYS 50+ | Potential Experimental/Investigation/Unproven | 11/1/2024 |
| 0319U | NEPH RNA PRETRNSPL PERPH BLD | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| 0320U | NEPH RNA PSTTRNSPL PERPH BLD | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| 0321U | IADNA GU PTHGN 20BC1&FNG ORG | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| 0326U | TRGT GEN SEQ ALYS PNL 83+ | Potential Experimental/Investigation/Unproven | 11/1/2024 |
| 0328U | DRUG ASSAY 120+ RX&METABL | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 0329T | MNTR IO PRESS 24HRS/> UN | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0329U | ONC NEO XOME&TRNS SEQ ALYS | Potential Experimental/Investigation/Unproven | 11/1/2024 |
| 0330T | TEAR FILM IMG UNI/BI W/I | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0333T | VISUAL EP ACUITY SCREEN | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0337U | ONC PLSM CELL DO&MYELOMA ID | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 0338T | TRANSCATH RENAL SYMP DENERV | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0338U | ONC SLD TUM CRCG TUM CL SLCT | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 0339T | TRANSCATH RENAL SYMP DENERV | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0339U | ONC PRST8 MRNA HOXC6 & DLX1 | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 0340U | ONC PAN CA ALYS MRD PLASMA | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| 0341T | QUANT PUPILLOMETRY W/ RPRT | Potential Experimental/Investigation/Unproven | 1/22/2020 |
| 0342T | THXP Apheresis W/ HDL DELIP | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0342U | ONC PNCRTC CA MULT IA ECLIA | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 0344U | HEP NAFLD SEMIQ EVL 2B LIPID | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 0345T | TRANSCATH MTRAL VLVE REPAIR | Potential Experimental/Investigation/Unproven | 4/30/2021 |
| 0346U | BETA AMYL A140&A142 LC-MS/MS | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 0347T | INS BONE DEVICE FOR RSA | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0348T | RSA SPINE EXAM | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0349T | RSA UPPER EXTR EXAM | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0350T | RSA LOWER EXTR EXAM | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0351T | INTRAOP OCT BRST/NODE SPEC | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0352T | OCT BRST/NODE I&R PER SPEC | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0353T | INTRAOP OCT BREAST CAVITY | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0354T | OCT BREAST SURG CAVITY I&R | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0355T | GI TRACT CAPSULE ENDOSCOPY | Potential Experimental/Investigation/Unproven | 8/13/2021 |
| 0356T | INSRT DRUG DEVICE FOR IOP | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0357T | CRYOPRESERVATION OOCYTE(S) | Potential Experimental/Investigation/Unproven | 1/22/2020 |
| 0357U | ONC MLNMA AI QUAN ALYS 142 | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 0358T | BIA WHOLE BODY | Potential Experimental/Investigation/Unproven | 11/13/2020 |

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| 0358U | NEURO ALYS I ² -AMYL 1-42&1-40 | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 0359U | ONC PRST8 CA ALYS ALL PSA | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 0361U | NEURFLMNT LT CHN DIG IA QUAN | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 0364U | ONC HL NEO GEN SEQ ALYS ALG | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| 0365U | ONC BLDR 10 PRB BLDR CA | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| 0366U | ONC BLDR 10 PRB RECR BLDR CA | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| 0367U | ONC BLDR 10 FLWG TRURL RESCJ | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| 0375T | TOTAL DISC ARTHRP ANT APPR | Spinal Services | 1/22/2020 |
| 0376T | INSERT ANT SEGMENT DRAIN INT | Outpatient Procedures (Potentially Cosmetic) | 1/28/2022 |
| 0377T | ANOSCPY INJ AGENT FOR INCONT | Potential Experimental/Investigation/Unproven | 1/22/2020 |
| 0378T | VISUAL FIELD ASSMNT REV/RPRT | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0378U | RFC1 REPEAT XPNSJ VRNT ALYS | Outpatient Procedures (Potentially Cosmetic) | 4/12/2024 |
| 0379T | VIS FIELD ASSMNT TECH SUPPT | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0380T | COMP ANIMAT RET IMAG SERIES | Potential Experimental/Investigation/Unproven | 1/22/2020 |
| 0381T | EXT H RATE EPI SZ 14 DAYS | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0382T | EXT H RATE SZ 14 DAY RI ONLY | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0383T | EXT H RATE SZ UP TO 30 DAYS | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0384T | EXT H RATE SZ UP TO 30 DAYS | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0384U | NEPH CKD RSK HI STG KDN DS | Potential Experimental/Investigation/Unproven | 10/17/2025 |
| 0385T | EX H RATE FOR SZ OVR 30 DAY | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0385U | NEPH CKD ALG RSK DBTC KDN DS | Potential Experimental/Investigation/Unproven | 10/17/2025 |
| 0386T | EX H RATE SZ 30+ DAY RI ONLY | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0397T | Endoscopic retrograde cholangiopancreatography (ERCP), with optical endomicroscopy (List separately in addition to code for primary procedure) | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0402T | Collagen cross-linking of cornea (including removal of the corneal epithelium and intraoperative pachymetry when performed) | Potential Experimental/Investigation/Unproven | 9/29/2023 |
| 0404T | Transcervical uterine fibroid(s) ablation with ultrasound guidance, radiofrequency | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0405T | Oversight of the care of an extracorporeal liver assist system patient requiring review of status, review of laboratories and other studies, and revision of orders and liver assist care plan (as appropriate), within a calendar month, 30 minutes or more of | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0408T | Insertion or replacement of permanent cardiac contractility modulation system, including contractility evaluation when performed, and programming of sensing and therapeutic parameters; pulse generator with transvenous electrodes | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0409T | Insertion or replacement of permanent cardiac contractility modulation system, including contractility evaluation when performed, and programming of sensing and therapeutic parameters; pulse generator only | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0410T | Insertion or replacement of permanent cardiac contractility modulation system, including contractility evaluation when performed, and programming of sensing and therapeutic parameters; atrial electrode only | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0411T | Insertion or replacement of permanent cardiac contractility modulation system, including contractility evaluation when performed, and programming of sensing and therapeutic parameters; ventricular electrode only | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0412T | Removal of permanent cardiac contractility modulation system; pulse generator only | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0413T | Removal of permanent cardiac contractility modulation system; transvenous electrode (atrial or ventricular) | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0414T | Removal and replacement of permanent cardiac contractility modulation system pulse generator only | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0415T | Repositioning of previously implanted cardiac contractility modulation transvenous electrode, (atrial or ventricular lead) | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0416T | Relocation of skin pocket for implanted cardiac contractility modulation pulse generator | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0417T | Programming device evaluation (in person) with iterative adjustment of the implantable device to test the function of the device and select optimal permanent programmed values with analysis, including review and report, implantable cardiac contractility m | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0418T | Interrogation device evaluation (in person) with analysis, review and report, includes connection, recording and disconnection per patient encounter; implantable cardiac contractility modulation system | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0421T | Transurethral waterjet ablation of prostate, including control of post-operative bleeding, including ultrasound guidance, complete (vasectomy, meatotomy, cystourethroscopy, urethral calibration and/or dilation, and internal urethrotomy are included when p | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0421T | WATERJET PROSTATE ABLTJ CMPL | Outpatient Procedures (Potentially Cosmetic) | 12/2/2022 |
| 0422T | Tactile breast imaging by computer-aided tactile sensors, unilateral or bilateral | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0423T | Secretory type II phospholipase A2 (sPLA2-IIA) | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0424T | Insertion or replacement of neurostimulator system for treatment of central sleep apnea; complete system (transvenous placement of right or left stimulation lead, sensing lead, implantable pulse generator) | Potential Experimental/Investigation/Unproven | 2/2/2024 |
| 0425T | Insertion or replacement of neurostimulator system for treatment of central sleep apnea; sensing lead only | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0425U | GENOM RPD SEQ ALYS EA CMPRTR | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| 0426T | Insertion or replacement of neurostimulator system for treatment of central sleep apnea; stimulation lead only | Potential Experimental/Investigation/Unproven | 7/28/2023 |

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| 0426U | GENOME ULTRA-RAPID SEQ ALYS | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| 0427T | Insertion or replacement of neurostimulator system for treatment of central sleep apnea; pulse generator only | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0428T | Removal of neurostimulator system for treatment of central sleep apnea; pulse generator only | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0429T | Removal of neurostimulator system for treatment of central sleep apnea; sensing lead only | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0430T | Removal of neurostimulator system for treatment of central sleep apnea; stimulation lead only | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0431T | Removal and replacement of neurostimulator system for treatment of central sleep apnea, pulse generator only | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| 0432T | Repositioning of neurostimulator system for treatment of central sleep apnea; stimulation lead only | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0433T | Repositioning of neurostimulator system for treatment of central sleep apnea; sensing lead only | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0434T | Interrogation device evaluation implanted neurostimulator pulse generator system for central sleep apnea | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0435T | Programming device evaluation of implanted neurostimulator pulse generator system for central sleep apnea; single session | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0436T | Programming device evaluation of implanted neurostimulator pulse generator system for central sleep apnea; during sleep study | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0439T | MYOCRD CONTRAST PRFUJ ECHO | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0440T | ABLJ PERC UXTR/PERPH NRV | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| 0441T | ABLJ PERC LXTR/PERPH NRV | Potential Experimental/Investigation/Unproven | 5/14/2026 |
| 0442T | ABLJ PERC PLEX/IRNCL NRV | Potential Experimental/Investigation/Unproven | 5/14/2026 |
| 0443T | R-T SPCTRL ALYS PRS18 TISS | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0443U | Neurofilament light chain (NFL), ultra-sensitive immunoassay, serum or cerebrospinal fluid | Outpatient Procedures (Potentially Cosmetic) | 3/28/2025 |
| 0444T | 1ST PLMT DRUG ELUT OC INS | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0445T | SBSQT PLMT DRUG ELUT OC INS | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0445U | β -amyloid (A β 42) and phospho tau (181P) (pTau181), electrochemiluminescent immunoassay (ECLIA), cerebral spinal fluid, ratio reported as positive or negative for amyloid pathology | Potential Experimental/Investigation/Unproven | 10/17/2025 |
| 0445U | β -amyloid (A β 42) and phospho tau (181P) (pTau181), electrochemiluminescent immunoassay (ECLIA), cerebral spinal fluid, ratio reported as positive or negative for amyloid pathology | Outpatient Procedures (Potentially Cosmetic) | 9/12/2025 |
| 0446T | INSJ IMPLTBL GLUCOSE SENSOR | Potential Experimental/Investigation/Unproven | 12/6/2024 |
| 0447T | RMVL IMPLTBL GLUCOSE SENSOR | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| 0448T | REMVL INSJ IMPLTBL GLUC SENS | Potential Experimental/Investigation/Unproven | 12/6/2024 |
| 0448U | Oncology (lung and colon cancer), DNA, qualitative, next-generation sequencing detection of single-nucleotide variants and deletions in EGFR and KRAS genes, formalin-fixed paraffin-embedded (FFPE) solid tumor samples, reported as presence or absence of ta | Molecular Lab | 2/7/2025 |
| 0448U | Oncology (lung and colon cancer), DNA, qualitative, next-generation sequencing detection of single-nucleotide variants and deletions in EGFR and KRAS genes, formalin-fixed paraffin-embedded (FFPE) solid tumor samples, reported as presence or absence of ta | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| 0449T | INSJ AQUEOUS DRAIN DEV 1ST | Potential Experimental/Investigation/Unproven | 9/12/2025 |
| 0449U | Carrier screening for severe inherited conditions (eg, cystic fibrosis, spinal muscular atrophy, beta hemoglobinopathies [including sickle cell disease], alpha thalassemia), regardless of race or self-identified ancestry, genomic sequence analysis panel. | Outpatient Procedures (Potentially Cosmetic) | 6/27/2025 |
| 0450T | INSJ AQUEOUS DRAIN DEV EACH | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| 0451T | INSJ/RPLCMT AORTIC VENTR SYS | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0452T | INSJ/RPLCMT DEV VASC SEAL | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0452U | Oncology (bladder), methylated PINK DNA detection by linear target enrichment-quantitative methylation-specific real-time PCR (LTE-qMSP), urine, reported as likelihood of bladder cancer | Potential Experimental/Investigation/Unproven | 11/1/2024 |
| 0453T | INSJ/RPLCMT MECH-ELEC NTRFCE | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0453U | Oncology (colorectal cancer), cell-free DNA (cfDNA), methylation-based quantitative PCR assay (SEPTIN9, IKZF1, BCAT1, Septin9-2, VAV3, BCAN), plasma, reported as presence or absence of circulating tumor DNA (ctDNA) | Potential Experimental/Investigation/Unproven | 11/1/2024 |
| 0454T | INSJ/RPLCMT SUBQ ELECTRODE | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0454U | Rare diseases (constitutional/heritable disorders), identification of copy number variations, inversions, insertions, translocations, and other structural variants by optical genome mapping(For additional PLA codes with identical clinical descriptor, see | Potential Experimental/Investigation/Unproven | 11/1/2024 |
| 0455T | REMVL AORTIC VENTR CMPL SYS | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0456T | REMVL AORTIC DEV VASC SEAL | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0457T | REMVL MECH-ELEC SKIN NTRFCE | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0457U | Perfluoroalkyl substances (PFAS) (eg, perfluorooctanoic acid, perfluorooctane sulfonic acid), 9 PFAS compounds by LC-MS/MS, plasma or serum, quantitative | Outpatient Procedures (Potentially Cosmetic) | 3/28/2025 |
| 0458T | REMVL SUBQ ELECTRODE | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0458U | Oncology (breast cancer), S100A8 and S100A9, by enzyme-linked immunosorbent assay (ELISA), tear fluid with age, algorithm reported as a risk score | Potential Experimental/Investigation/Unproven | 10/17/2025 |
| 0459T | RELOCAJ RPLCMT AORTIC VENTR | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0459U | β -amyloid (A β 42) and total tau (ttau), electrochemiluminescent immunoassay (ECLIA), cerebral spinal fluid, ratio reported as positive or negative for amyloid pathology | Potential Experimental/Investigation/Unproven | 10/17/2025 |

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| 0459U | I ²⁵ -amyloid (Abeta42) and total tau (ttau), electrochemiluminescent immunoassay (ECLIA), cerebral spinal fluid, ratio reported as positive or negative for amyloid pathology | Outpatient Procedures (Potentially Cosmetic) | 9/12/2025 |
| 0460T | REPOS AORTIC VENTR DEV ELTRD | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0461T | REPOS AORTIC CONTRPULS J DEV | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0462T | PRGRMG EVL AORTIC VENTR SYS | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0463T | INTERROG AORTIC VENTR SYS | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0464T | VISUAL EP TEST FOR GLAUCOMA | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0464U | Oncology (colorectal) screening, quantitative real-time target and signal amplification, methylated DNA markers, including LASS4, LRR4 and PPP2R5C, a reference marker ZDHHC1, and a protein marker (fecal hemoglobin), utilizing stool, algorithm reported as | Outpatient Procedures (Potentially Cosmetic) | 2/28/2025 |
| 0465T | SUPCHRDL NJX RXW/O SUPPLY | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0465U | Oncology (urothelial carcinoma), DNA, quantitative methylation-specific PCR of 2 genes (ONECUT2, VIM), algorithmic analysis reported as positive or negative | Potential Experimental/Investigation/Unproven | 11/1/2024 |
| 0466T | INSJ CHWAL RESPIR ELTRD/RA | Potential Experimental/Investigation/Unproven | 1/28/2022 |
| 0466U | Cardiology (coronary artery disease [CAD]), DNA, genome-wide association studies (564856 single-nucleotide polymorphisms [SNPs], targeted variant genotyping), patient lifestyle and clinical data, buccal swab, algorithm reported as polygenic risk to acquire | Potential Experimental/Investigation/Unproven | 11/1/2024 |
| 0467T | REVJ/RPLMNT CH RESPIR ELTRD | Potential Experimental/Investigation/Unproven | 10/8/2021 |
| 0467U | Oncology (bladder), DNA, next-generation sequencing (NGS) of 60 genes and whole genome aneuploidy, urine, algorithms reported as minimal residual disease (MRD) status positive or negative and quantitative disease burden | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| 0468T | RMVL CHWAL RESPIR ELTRD/RA | Potential Experimental/Investigation/Unproven | 10/8/2021 |
| 0469U | Rare diseases (constitutional/heritable disorders), whole genome sequence analysis for chromosomal abnormalities, copy number variants, duplications/deletions, inversions, unbalanced translocations, regions of homozygosity (ROH), inheritance pattern that | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| 0471U | Oncology (colorectal cancer), qualitative real-time PCR of 35 variants of KRAS and NRAS genes (exons 2, 3, 4), formalin-fixed paraffin-embedded (FFPE), predictive, identification of detected mutations | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| 0472T | PRGRMG IO RTA ELTRD RA | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0473T | REPRGRMG IO RTA ELTRD RA | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0473U | Oncology (solid tumor), next-generation sequencing (NGS) of DNA from formalin-fixed paraffin-embedded (FFPE) tissue with comparative sequence analysis from a matched normal specimen (blood or saliva), 648 genes, interrogation for sequence variants, insert | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| 0474T | INSJ AQUEOUS DRG DEV IO RSVR | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| 0475T | REC FTL CAR SGL 3 CH I&R | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0476T | REC FTL CAR SGL ELEC TR DATA | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0477T | REC FTL CAR SGL XRTJ ALYS | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0478T | REC FTL CAR 3 CH REV I&R | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0479T | FXJL ABL LSR 1ST 100 SQ CM | Potential Experimental/Investigation/Unproven | 9/12/2025 |
| 0479U | TAU PHOSPHORYLATED PTAU217 | Potential Experimental/Investigation/Unproven | 11/1/2024 |
| 0480T | FXJL ABL LSR EA ADDL 100SQCM | Potential Experimental/Investigation/Unproven | 11/20/2025 |
| 0481T | NJX AUTOL WBC CONCENTRATE | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| 0481U | IDH1 IDH2&TERT PROMOTER NGS | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| 0482T | ABSL QUAN MYOCD BLD FLO PET | Diagnostic Radiology | 1/22/2020 |
| 0482U | OB PE BIOCHEM ASY SFLT1&PLGF | Potential Experimental/Investigation/Unproven | 11/1/2024 |
| 0483T | TMVI PERCUTANEOUS APPROACH | Potential Experimental/Investigation/Unproven | 9/12/2025 |
| 0484T | TMVI TRANSTHORACIC APPROACH | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0485T | OCT MID EAR I&R UNILATERAL | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0485U | ONC SOL TUM CFDNA&RNA NGS GM | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| 0486T | OCT MID EAR I&R BILATERAL | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0487T | TRVG BIOMCHN MAPG W/REPRT | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0487U | ONC SOL TUM CFCDNA TGSAP 84 | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| 0488U | OB FETAL AG NIPT CFDNA ALYS | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| 0489T | REGN CELL TX SCLDR HANDS | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0490T | REGN CELL TX SCLDR H MLT INJ | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0490U | ONC CUTAN/UVEAL MLNMA CD146 | Potential Experimental/Investigation/Unproven | 9/12/2025 |
| 0490U | ONC CUTAN/UVEAL MLNMA CD146 | Outpatient Procedures (Potentially Cosmetic) | 10/17/2025 |
| 0491T | ABL LSR OPN WND 1ST 20 SQCM | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0491U | ONC SOL TUM CTC SLCCT ER PRTN | Potential Experimental/Investigation/Unproven | 10/17/2025 |
| 0492T | ABL LSR OPN WND ADDL 20 SQCM | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0492U | ONC SOL TUM CTC SLCCTN PD-L1 | Potential Experimental/Investigation/Unproven | 10/17/2025 |
| 0493T | NEAR IFR SPECTRSC OF WOUNDS | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0494T | PREP & CANNULJ CDVR DON LUNG | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| 0495T | MNTR CDVR DON LNG 1ST 2 HRS | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| 0496T | MNTR CDVR DON LNG EA ADDL HR | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| 0496U | ONC CLRCT CFDNA 8/7 GENES | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| 0499U | ONC CLRCT&LNG DNA NGS 8GENES | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| 0500U | AUTOINFLAM DS VEXAS SYND DNA | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| 0501T | COR FFR DERIVED COR CTA DATA | Diagnostic Radiology | 1/21/2021 |
| 0501U | ONC CLRC BLD QUAN MEAS CFDNA | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| 0502T | COR FFR DATA PREP & TRANSMIS | Diagnostic Radiology | 1/21/2021 |
| 0503T | COR FFR ALYS GNRJ FFR MDL | Diagnostic Radiology | 1/21/2021 |
| 0503U | NEURO ALZ DS I ²⁵ AMYL&TAU PRTN | Potential Experimental/Investigation/Unproven | 11/1/2024 |
| 0504T | COR FFR DATA REVIEW I&R | Diagnostic Radiology | 1/21/2021 |
| 0505T | EV FEMPOP ARTL REVSC | Potential Experimental/Investigation/Unproven | 4/30/2021 |

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| 0506f | MAC PGMT OPT DNS MEAS HFP | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0506u | GI BARRETTES ESOPHGL CELL 89 | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| 0507f | NEAR IFR 2IMG MIBMN GLND I&R | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0507u | ONC OVR DNA WHOLE GEN W/5HMC | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| 0508f | PLS ECHO US B1 DNS MEAS TIB | Potential Experimental/Investigation/Unproven | 4/30/2021 |
| 0509f | PATTERN ERG W/I&R | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0511f | RMVL&RINSJ SINUS TARSI IMPLT | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0511u | ONC SOL TUM 3DMICROENVIR 36+ | Potential Experimental/Investigation/Unproven | 11/1/2024 |
| 0512f | ESW INTEG WND HLG 1ST WND | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0513f | ESW INTEG WND HLG EA ADDL | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0514f | INTRAOP VIS AXIS ID PT FIXJ | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0514u | GI IBD IA QUAN DETER ADL LVL | Potential Experimental/Investigation/Unproven | 11/1/2024 |
| 0515f | INSJ WCS LV COMPL SYS | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0515u | GI IBD IA QUAN DETER IFX LVL | Potential Experimental/Investigation/Unproven | 11/1/2024 |
| 0516f | INSJ WCS LV ELTRD ONLY | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0517f | INSJ WCS LV PG COMPNT | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0517u | THER RX MNTR 80+ PSYACTIV RX | Potential Experimental/Investigation/Unproven | 11/1/2024 |
| 0518u | THER RX MNTR 90+ PN&MTL HLTH | Potential Experimental/Investigation/Unproven | 11/1/2024 |
| 0519f | RMVL & RPLCMT PG COMPNT WCS | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0519u | THER RX MNTR MEDS P/D/A 110+ | Potential Experimental/Investigation/Unproven | 11/1/2024 |
| 0520f | RMVL&RPLCMT PG WCS NEW ELTRD | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0520u | THER RX MNTR 200+ RX/SBSTS | Potential Experimental/Investigation/Unproven | 11/1/2024 |
| 0521f | INTERROG DEV EVAL WCS IP | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0522f | PRGRMG DEV EVAL WCS IP | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0523f | NTRAPX C FFR W/3D FUNCJL MAP | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 0523f | NTRAPX C FFR W/3D FUNCJL MAP | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 0524f | EV CATH DIR CHEM ABLTJ W/IMG | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0525f | INSJ/RPLCMT COMPL IIMS | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0526f | INSJ/RPLCMT IIMS ELTRD ONLY | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0527f | INSJ/RPLCMT IIMS IMPLT MNTR | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0528f | PRGRMG DEV EVAL IIMS IP | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0529f | INTERROG DEV EVAL IIMS IP | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0533f | CONT REC MVMT DO 6-10 DAYS | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0534f | CONT REC MVMT DO SETUP&TRAIN | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0535f | CONT REC MVMT DO REPRT CNFIG | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0536f | CONT REC MVMT DO DL W/I&R | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0537f | BLD DRV T LYMPHCYT CAR-T CLL | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 0537f | BLD DRV T LYMPHCYT CAR-T CLL | Transplant | 2/7/2025 |
| 0538f | BLD DRV T LYMPHCYT PREP TRNS | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 0538f | BLD DRV T LYMPHCYT PREP TRNS | Transplant | 2/7/2025 |
| 0539f | RECEIPT&PREP CAR-T CLL ADMN | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 0539f | RECEIPT&PREP CAR-T CLL ADMN | Transplant | 2/7/2025 |
| 0540f | CAR-T CLL ADMN AUTOLOGOUS | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 0540f | CAR-T CLL ADMN AUTOLOGOUS | Transplant | 2/7/2025 |
| 0541f | MYOCARDIAL IMAGING MCG | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0542f | MYOCARDIAL IMAGING MCG I&R | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0543f | TA MV RPR W/ARTIF CHORD TEND | Potential Experimental/Investigation/Unproven | 4/30/2021 |
| 0544f | TCAT MV ANNULUS RCNSTJ | Potential Experimental/Investigation/Unproven | 4/30/2021 |
| 0545f | TCAT TV ANNULUS RCNSTJ | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| 0546f | RF SPECTRSC NTRAOP MRGN ASMT | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0547f | B1 MATRL QUAL 1ST MCRIND TIB | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0548f | TPRNL BALO CNTNC DEV BI | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0549f | TPRNL BALO CNTNC DEV UNI | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0551f | TPRNL BALO CNTNC DEV ADJMT | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0552f | LOW-LEVEL LASER THERAPY | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0553f | PERQ TCAT ILIAC ANAST IMPLT | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0554f | B1 STR & FX RSK ANALYSIS | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0555f | B1 STR&FX RSK TRANSMIS DATA | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0556f | B1 STR & FX RSK ASSESSMENT | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0557f | B1 STR & FX RSK I&R | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0558f | CT SCAN F/BIOMCHN CT ALYS | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0558u | ONC CLRCT ELISA BF7 AG SERUM | Potential Experimental/Investigation/Unproven | 10/17/2025 |
| 0559f | ANTMC MDL 3D PRINT 1ST CMPNT | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0559u | ONC BRS QUAN ELISA BF9AG SRM | Potential Experimental/Investigation/Unproven | 10/17/2025 |
| 0560f | ANTMC MDL 3D PRINT EA ADDL | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0561f | ANTMC GUIDE 3D PRINT 1ST GD | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0562f | ANTMC GUIDE 3D PRINT EA ADDL | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0563f | EVAC MEIBOMIAN GLIND HEAT BI | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0564f | ONC CHEMO RX CYTOTOX CSC 14 | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0565f | AUTOL CELL IMPLT ADPS HRVG | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0566f | AUTOL CELL IMPLT ADPS NJX | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0567f | PERM FLP TUBE OCCLS W/IMPLT | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0568f | INTR0 MIX SALINE&AIR F/SSG | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0568u | NEUROL DEMENTIA I' AMYL PTAU | Potential Experimental/Investigation/Unproven | 10/17/2025 |
| 0569f | ITVR PERQ APPR 1ST PROSTH | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0570f | ITVR PERQ EA ADDL PROSTH | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0572f | INSERTION SS DFB ELECTRODE | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 0574u | MTB CFP-10 SERUM/PLSM LC-MS | Potential Experimental/Investigation/Unproven | 10/17/2025 |
| 0575f | PRGRMG DEV EVAL ICDS SS IP | Outpatient Procedures (Potentially Cosmetic) | 8/26/2022 |
| 0576f | INTERROG DEV EVAL ICDS SS IP | Outpatient Procedures (Potentially Cosmetic) | 8/26/2022 |
| 0577f | EPHYS EVAL ICDS SS | Outpatient Procedures (Potentially Cosmetic) | 8/26/2022 |
| 0581f | ABL TJ MAL BRST TUM PERQ CRTX | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0582f | TRURL ABL TJ MAL PRST8 TISS | Potential Experimental/Investigation/Unproven | 11/13/2020 |

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| 0583T | TMPST AUTO TUBE DLVR SYS | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 0594T | Ablation, irreversible electroporation; 1 or more tumors, including fluoroscopic and ultrasound guidance, when performed, open | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 0596T | Glomerular filtration rate (GFR) measurement(s), transdermal, including sensor placement and administration of a single dose of fluorescent pyrazine agent | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 0597T | Glomerular filtration rate (GFR) monitoring, transdermal, including sensor placement and administration of more than one dose of fluorescent pyrazine agent, each 24 hours | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 0600T | Percutaneous transcatheter implantation of interatrial septal shunt device, including right and left heart catheterization, intracardiac echocardiography, and imaging guidance by the proceduralist, when performed | Outpatient Procedures (Potentially Cosmetic) | 11/20/2025 |
| 0601T | Insertion of iris prosthesis, including suture fixation and repair or removal of iris, when performed; without removal of crystalline lens or intraocular lens, without insertion of intraocular lens | Outpatient Procedures (Potentially Cosmetic) | 11/20/2025 |
| 0602T | Insertion of iris prosthesis, including suture fixation and repair or removal of iris, when performed; with removal of crystalline lens and insertion of intraocular lens | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 0603T | Insertion of iris prosthesis, including suture fixation and repair or removal of iris, when performed; with secondary intraocular lens placement or intraocular lens exchange | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 0613T | Cystourethroscopy with transurethral anterior prostate commissurotomy and drug delivery, including transrectal ultrasound and fluoroscopy, when performed | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 0616T | Magnetic resonance spectroscopy, determination and localization of discogenic pain (cervical, thoracic, or lumbar); acquisition of single voxel data, per disc, on biomarkers (ie, lactic acid, carbohydrate, alanine, laal, propionic acid, proteoglycan, and | Outpatient Procedures (Potentially Cosmetic) | 2/7/2025 |
| 0617T | Magnetic resonance spectroscopy, determination and localization of discogenic pain (cervical, thoracic, or lumbar); transmission of biomarker data for software analysis | Outpatient Procedures (Potentially Cosmetic) | 2/7/2025 |
| 0618T | Magnetic resonance spectroscopy, determination and localization of discogenic pain (cervical, thoracic, or lumbar); postprocessing for algorithmic analysis of biomarker data for determination of relative chemical differences between discs | Outpatient Procedures (Potentially Cosmetic) | 2/7/2025 |
| 0619T | Magnetic resonance spectroscopy, determination and localization of discogenic pain (cervical, thoracic, or lumbar); interpretation and report | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 0627T | PERQ NJX ALGC FLUOR LMBR 1ST | Potential Experimental/Investigation/Unproven | 11/1/2024 |
| 0628T | PERQ NJX ALGC FLUOR LMBR EA | Potential Experimental/Investigation/Unproven | 11/1/2024 |
| 0629T | PERQ NJX ALGC CT LMBR 1ST | Potential Experimental/Investigation/Unproven | 11/1/2024 |
| 0630T | PERQ NJX ALGC CT LMBR EA | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| 0656T | VRT BDY TETHERING ANT <7 SEG | Potential Experimental/Investigation/Unproven | 11/1/2024 |
| 0657T | VRT BDY TETHERING ANT 8+ SEG | Potential Experimental/Investigation/Unproven | 11/1/2024 |
| 0692T | THERAPEUTIC ULTRAFILTRATION | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 0695T | BDY SRF MPG PM/CVDFB TM IMPL | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| 0696T | BDY SURF MAPG PM/CVDFB F/UP | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| 0707T | NJX B1 SUB MTRL SBCHDRL DFCT | Outpatient Procedures (Potentially Cosmetic) | 5/27/2022 |
| 0707T | NJX B1 SUB MTRL SBCHDRL DFCT | Outpatient Procedures (Potentially Cosmetic) | 11/20/2025 |
| 0714T | TPRNL LSR ABLT B9 PRST8 HYPR | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| 0715T | PERQ TRLUML CORONRY LITHOTRP | Potential Experimental/Investigation/Unproven | 2/2/2024 |
| 0717T | ADRC THER PRTL RC TEAR | Potential Experimental/Investigation/Unproven | 11/20/2025 |
| 0718T | ADRC THER PRTL RC TEAR NJX | Potential Experimental/Investigation/Unproven | 11/20/2025 |
| 0719T | PST VRT JT RPLCMT LMBR 1 SGM | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| 0725T | VESTIBULAR DEV IMPLTJ UNI | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| 0727T | RMVL&RPLCMT IMPLT VSTBLR DEV | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| 0728T | DX ALYS VSTBLR IMPLT UNI 1ST | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| 0729T | DX ALYS VSTBLR IMPLT UNI SBQ | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| 0731T | AUGMNT AI-BASED FCL PHNT A/R | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| 0732T | IMMNIX ADMN ELECTROPORATN IM | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| 0735T | PREP TUM CAV IORT PRIM CRNOT | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| 0775T | ARTHRD SI JT PRQ IARTIC IMPL | Outpatient Procedures (Potentially Cosmetic) | 2/2/2024 |
| 0777T | R-T PRS SENSING EDRL GDN SYS | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 0780T | INSTLJ FECAL MICROBIOTA SSP | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 0795T | TCAT INS 2CHMBR LDLS PM CMLP | Diagnostic Radiology | 5/30/2025 |
| 0796T | TCAT INS 2CHMBR LDLS PM RA | Diagnostic Radiology | 5/30/2025 |
| 0797T | TCAT INS 2CHMBR LDLS PM RV | Diagnostic Radiology | 5/30/2025 |
| 0801T | TCAT RMV&RPL 2CHMBR LDLS PM | Diagnostic Radiology | 12/27/2023 |
| 0801T | TCAT RMV&RPL 2CHMBR LDLS PM | Outpatient Procedures (Potentially Cosmetic) | 2/28/2025 |
| 0802T | TCAT RMV&RPL2CHMB LDLS PM RA | Diagnostic Radiology | 12/27/2023 |
| 0802T | TCAT RMV&RPL2CHMB LDLS PM RA | Outpatient Procedures (Potentially Cosmetic) | 2/28/2025 |
| 0803T | TCAT RMV&RPL2CHMB LDLS PM RV | Diagnostic Radiology | 7/28/2023 |
| 0803T | TCAT RMV&RPL2CHMB LDLS PM RV | Outpatient Procedures (Potentially Cosmetic) | 2/28/2025 |
| 0809T | ARTHRD SI JT PRQ TFX&IMPLT | Potential Experimental/Investigation/Unproven | 2/2/2024 |
| 0813T | Esophagogastroduodenoscopy, flexible, transoral, with volume adjustment of intragastric bariatric balloon | Outpatient Procedures (Potentially Cosmetic) | 9/12/2025 |
| 0823T | Transcatheter insertion of permanent single-chamber leadless pacemaker, right atrial, including imaging guidance (eg, fluoroscopy, venous ultrasound, right atrial angiography and/or right ventriculography, femoral venography, cavography) and device evalua | Diagnostic Radiology | 5/30/2025 |

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| 0824T | Transcatheter removal of permanent single-chamber leadless pacemaker, right atrial, including imaging guidance (eg, fluoroscopy, venous ultrasound, right atrial angiography and/or right ventriculography, femoral venography, cavography), when performed | Diagnostic Radiology | 5/30/2025 |
| 0825T | Transcatheter removal and replacement of permanent single-chamber leadless pacemaker, right atrial, including imaging guidance (eg, fluoroscopy, venous ultrasound, right atrial angiography and/or right ventriculography, femoral venography, cavography) and | Diagnostic Radiology | 5/30/2025 |
| 0825T | Transcatheter removal and replacement of permanent single-chamber leadless pacemaker, right atrial, including imaging guidance (eg, fluoroscopy, venous ultrasound, right atrial angiography and/or right ventriculography, femoral venography, cavography) and | Outpatient Procedures (Potentially Cosmetic) | 12/6/2024 |
| 0869T | Injection(s), bone-substitute material for bone and/or soft tissue hardware fixation augmentation, including intraoperative imaging guidance, when performed(Do not report 0869T in conjunction with 0707T) | Outpatient Procedures (Potentially Cosmetic) | 11/20/2025 |
| 0889T | Personalized target development for accelerated, repetitive high-dose functional connectivity MRIâ€guided theta-burst stimulation derived from a structural and resting-state functional MRI, including data preparation and transmission, generation of the t | Potential Experimental/Investigation/Unproven | 3/28/2025 |
| 0890T | Accelerated, repetitive high-dose functional connectivity MRIâ€guided theta-burst stimulation, including target assessment, initial motor threshold determination, neuronavigation, delivery and management, initial treatment day(Report 0890T once on the | Outpatient Procedures (Potentially Cosmetic) | 7/26/2024 |
| 0891T | Accelerated, repetitive high-dose functional connectivity MRIâ€guided theta-burst stimulation, including neuronavigation, delivery and management, subsequent treatment day(Do not report 0891T in conjunction with 77022) | Outpatient Procedures (Potentially Cosmetic) | 7/26/2024 |
| 0892T | Accelerated, repetitive high-dose functional connectivity MRIâ€guided theta-burst stimulation, including neuronavigation, delivery and management, subsequent motor threshold redetermination with delivery and management, per treatment day(Do not report | Outpatient Procedures (Potentially Cosmetic) | 7/26/2024 |
| 0898T | Noninvasive prostate cancer estimation map, derived from augmentative analysis of image-guided fusion biopsy and pathology, including visualization of margin volume and location, with margin determination and physician interpretation and report(Do not r | Outpatient Procedures (Potentially Cosmetic) | 2/28/2025 |
| 0947T | MRFUS STRTCTC BL-BR DISRPJ | Outpatient Procedures (Potentially Cosmetic) | 11/20/2025 |
| 0977T | UPR GI BLD DETCJ SNR CAPSULE | Potential Experimental/Investigation/Unproven | 9/12/2025 |
| 0981T | TCAT IMPL WRLS IVC SNR | Outpatient Procedures (Potentially Cosmetic) | 11/20/2025 |
| 11950 | Subcutaneous injection of filling material (e.g., collagen); 1 cc or less | Outpatient Procedures (Potentially Cosmetic) | 9/12/2025 |
| 11950 | THERAPY FOR CONTOUR DEFE | Potential Experimental/Investigation/Unproven | 11/20/2025 |
| 11980 | IMPLANT HORMONE PELLETS | Outpatient Procedures (Potentially Cosmetic) | 10/17/2025 |
| 15150 | Tissue cultured epidermal autograft, trunk, arms, legs; first 25 sq cm or less | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 15151 | Tissue cultured epidermal autograft, trunk, arms, legs; additional 1 sq cm to 75 sq cm (List separately in addition to code for primary procedure) | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 15152 | Tissue cultured epidermal autograft, trunk, arms, legs; each additional 100 sq cm, or each additional one percent of body area of infants and children, or part thereof (List separately in addition to code for primary procedure) | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 15155 | Tissue cultured epidermal autograft, face, scalp, eyelids, mouth, neck, ears, orbits, genitalia, hands, feet, and/or multiple digits; first 25 sq cm or less | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 15156 | Tissue cultured epidermal autograft, face, scalp, eyelids, mouth, neck, ears, orbits, genitalia, hands, feet, and/or multiple digits; additional 1 sq cm to 75 sq cm (List separately in addition to code for primary procedure) | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 15157 | Tissue cultured epidermal autograft, face, scalp, eyelids, mouth, neck, ears, orbits, genitalia, hands, feet, and/or multiple digits; each additional 100 sq cm, or each additional one percent of body area of infants and children, or part thereof (List sep | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 15271 | Application of skin substitute graft to trunk, arms, legs, total wound surface area up to 100 sq cm; first 25 sq cm or less wound surface area | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 15271 | SKIN SUB GRAFT TRNK/ARM/ | Outpatient Procedures (Potentially Cosmetic) | 9/12/2025 |
| 15272 | Application of skin substitute graft to trunk, arms, legs, total wound surface area up to 100 sq cm; each additional 25 sq cm wound surface area, or part thereof (List separately in addition to code for primary procedure) | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 15272 | SKIN SUB GRAFT T/A/L ADD | Outpatient Procedures (Potentially Cosmetic) | 11/20/2025 |
| 15273 | Application of skin substitute graft to trunk, arms, legs, total wound surface area greater than or equal to 100 sq cm; first 100 sq cm wound surface area, or 1% of body area of infants and children | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 15273 | SKIN SUB GRFT T/ARM/LG | Outpatient Procedures (Potentially Cosmetic) | 11/20/2025 |
| 15274 | Application of skin substitute graft to trunk, arms, legs, total wound surface area greater than or equal to 100 sq cm; each additional 100 sq cm wound surface area, or part thereof, or each additional 1% of body area of infants and children, or part ther | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 15274 | SKN SUB GRFT T/A/L CHILD | Outpatient Procedures (Potentially Cosmetic) | 11/20/2025 |

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| 15275 | Application of skin substitute graft to face, scalp, eyelids, mouth, neck, ears, orbits, genitalia, hands, feet, and/or multiple digits, total wound surface area up to 100 sq cm; first 25 sq cm or less wound surface area | Potential Experimental/Investigation/Unproven | 3/28/2025 |
| 15275 | SKN SUB GRAFT FACE/NK/HF | Outpatient Procedures (Potentially Cosmetic) | 9/12/2025 |
| 15276 | Application of skin substitute graft to face, scalp, eyelids, mouth, neck, ears, orbits, genitalia, hands, feet, and/or multiple digits, total wound surface area up to 100 sq cm; each additional 25 sq cm wound surface area, or part thereof (List separately) | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 15276 | SKN SUB GRAFT F/N/HF/G A | Outpatient Procedures (Potentially Cosmetic) | 11/20/2025 |
| 15277 | Application of skin substitute graft to face, scalp, eyelids, mouth, neck, ears, orbits, genitalia, hands, feet, and/or multiple digits, total wound surface area greater than or equal to 100 sq cm; first 100 sq cm wound surface area, or 1% of body area of | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 15277 | SKN SUB GRFT F/N/HF/G CH | Outpatient Procedures (Potentially Cosmetic) | 11/20/2025 |
| 15278 | Application of skin substitute graft to face, scalp, eyelids, mouth, neck, ears, orbits, genitalia, hands, feet, and/or multiple digits, total wound surface area greater than or equal to 100 sq cm; each additional 100 sq cm wound surface area, or part the | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 15278 | SKN SUB GRFT F/N/HF/G CH | Outpatient Procedures (Potentially Cosmetic) | 11/20/2025 |
| 15777 | Implantation of biologic implant (eg, acellular dermal matrix) for soft tissue reinforcement (eg, breast, trunk) (List separately in addition to code for primary procedure) | Potential Experimental/Investigation/Unproven | 11/20/2025 |
| 15819 | Cervicoplasty | Outpatient Procedures (Potentially Cosmetic) | 2/7/2025 |
| 15999 | Unlisted procedure, excision pressure ulcer | Unlisted Procedures | 7/28/2023 |
| 17999 | Unlisted procedure, skin, mucous membrane and subcutaneous tissue | Unlisted Procedures | 11/20/2025 |
| 19105 | Ablation, cryosurgical, of fibroadenoma, including ultrasound guidance, each fibroadenoma | Potential Experimental/Investigation/Unproven | 12/30/2024 |
| 19304 | Mastectomy, subcutaneous | Outpatient Procedures (Potentially Cosmetic) | 1/22/2020 |
| 19324 | Mammoplasty, augmentation; without prosthetic implant | Outpatient Procedures (Potentially Cosmetic) | 1/21/2021 |
| 19499 | Unlisted procedure, breast | Unlisted Procedures | 11/20/2025 |
| 20527 | INJ DUPUYTREN CORD W/ENZ | Outpatient Procedures (Potentially Cosmetic) | 10/17/2025 |
| 20527 | Injection, enzyme (eg, collagenase), palmar fascial cord (ie, Dupuytren's contracture) | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 20560 | Needle insertion(s) without injection(s); 1 or 2 muscle(s) | Outpatient Procedures (Potentially Cosmetic) | 4/10/2020 |
| 20561 | Needle insertion(s) without injection(s); 3 or more muscles | Outpatient Procedures (Potentially Cosmetic) | 4/10/2020 |
| 20910 | Remove Cartilage For Graft | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 20912 | Remove Cartilage For Graft | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 20930 | Allograft, morselized, or placement of osteopromotive material, for spine surgery only (List separately in addition to code for primary procedure) | Spinal Services | 11/1/2024 |
| 20931 | ALLOGRAFT, STRUCTURAL, FOR SPINE SURGERY ONLY (LIST SEPARATELY IN ADDITION TO CODE FOR PRIMARY PROCEDURE) | Spinal Services | 11/1/2024 |
| 20936 | SPINAL BONE AUTOGRAFT | Spinal Services | 11/1/2024 |
| 20937 | SPINAL BONE AUTOGRAFT | Spinal Services | 11/1/2024 |
| 20938 | SPINAL BONE AUTOGRAFT | Spinal Services | 11/1/2024 |
| 20939 | BONE MARROW ASPIR BONE GRFG | Spinal Services | 11/1/2024 |
| 20975 | ELECTRICAL BONE STIMULAT | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| 20975 | Electrical stimulation to aid bone healing; invasive (operative) | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 20999 | Unlisted procedure, musculoskeletal system, general | Unlisted Procedures | 11/20/2025 |
| 21032 | Excision of maxillary torus palatinus | Outpatient Procedures (Potentially Cosmetic) | 2/28/2025 |
| 21073 | MNPJ OF TMJ W/ANESTH | Outpatient Procedures (Potentially Cosmetic) | 9/12/2025 |
| 21073 | Manipulation of temporomandibular joint(s) (TMJ), therapeutic, requiring an anesthesia service (i.e., general or monitored anesthesia care) | Potential Experimental/Investigation/Unproven | 3/28/2025 |
| 21181 | Reconstruction by contouring of benign tumor of cranial bones (eg, fibrous dysplasia), extracranial | Outpatient Procedures (Potentially Cosmetic) | 2/28/2025 |
| 21182 | Reconstruction of orbital walls, rims, forehead, nasooethmoid complex following intra- and extracranial excision of benign tumor of cranial bone (e.g. fibrous dysplasia), with multiple autografts (includes obtaining grafts); total area of bone grafting les | Outpatient Procedures (Potentially Cosmetic) | 2/28/2025 |
| 21230 | Rib Cartilage Graft | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 21242 | Arthroplasty, temporomandibular joint (TMJ), with allograft | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 21247 | Reconstruction of mandibular condyle with bone and cartilage autografts (includes obtaining grafts) (e.g. for hemifacial microsomia) | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 21280 | Medial canthopexy (separate procedure) | Outpatient Procedures (Potentially Cosmetic) | 2/28/2025 |
| 21282 | Lateral canthopexy | Outpatient Procedures (Potentially Cosmetic) | 2/28/2025 |
| 21299 | Unlisted craniofacial and maxillofacial procedure | Unlisted Procedures | 11/20/2025 |
| 21325 | Open treatment of nasal fracture; uncomplicated | Outpatient Procedures (Potentially Cosmetic) | 10/17/2025 |
| 21347 | Open treatment of nasomaxillary complex fracture (LeFort II type); requiring multiple open approaches | Outpatient Procedures (Potentially Cosmetic) | 2/28/2025 |
| 21348 | Open treatment of nasomaxillary complex fracture (LeFort II type); bone grafting (includes obtaining graft) | Outpatient Procedures (Potentially Cosmetic) | 2/28/2025 |
| 21432 | Open treatment of craniofacial separation (LeFort III type); with wiring and/or internal fixation | Outpatient Procedures (Potentially Cosmetic) | 2/28/2025 |
| 21433 | Open treatment of craniofacial separation (LeFort III type); complicated (e.g., comminuted or involving cranial nerve foramina), multiple surgical approaches | Outpatient Procedures (Potentially Cosmetic) | 2/28/2025 |
| 21435 | Open treatment of craniofacial separation (LeFort III type); complicated, utilizing internal and/or external fixation | Outpatient Procedures (Potentially Cosmetic) | 2/28/2025 |
| 21436 | Open treatment of craniofacial separation (LeFort III type); complicated, utilizing internal and/or external fixation techniques (e.g., head cap, halo device, and/or intermaxillary fixation) | Outpatient Procedures (Potentially Cosmetic) | 2/28/2025 |
| 21499 | Unlisted musculoskeletal procedure, head | Unlisted Procedures | 11/20/2025 |

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| 21743 | Reconstructive repair of pectus excavatum or carinatum; minimally invasive approach (Nuss procedure) with thoracoscopy | Outpatient Procedures (Potentially Cosmetic) | 9/12/2025 |
| 22102 | Partial excision of posterior vertebral component (e.g., spinous process, lamina or facet) for intrinsic bony lesion, single vertebral segment; lumbar | Spinal Services | 12/30/2024 |
| 22207 | CUT SPINE 3 COL LUMB | Spinal Services | 11/1/2024 |
| 22208 | CUT SPINE 3 COL ADDL SEG | Spinal Services | 11/1/2024 |
| 22210 | REVISION OF NECK SPINE | Spinal Services | 11/1/2024 |
| 22214 | REVISION OF LUMBAR SPINE | Spinal Services | 11/1/2024 |
| 22216 | REVISE EXTRA SPINE SEGME | Spinal Services | 11/1/2024 |
| 22220 | REVISION OF NECK SPINE | Spinal Services | 11/1/2024 |
| 22224 | Osteotomy of spine, including discectomy, anterior approach, single vertebral segment; lumbar | Spinal Services | 11/1/2024 |
| 22226 | REVISE EXTRA SPINE SEGME | Spinal Services | 11/1/2024 |
| 22325 | Open treatment and/or reduction of vertebral fracture(s) and/or dislocation(s), posterior approach, one fractured vertebrae or dislocated segment; lumbar | Spinal Services | 11/1/2024 |
| 22326 | TREAT NECK SPINE FRACTUR | Spinal Services | 11/1/2024 |
| 22328 | OPEN TREATMENT AND/OR REDUCTION OF VERTEBRAL FRACTURE(S) AND/OR DISLOCATION(S), POSTERIOR APPROACH, 1 FRACTURED VERTEBRA OR DISLOCATED SEGMENT; EACH ADDITIONAL FRACTURED VERTEBRA OR DISLOCATED SEGMENT (LIST SEPARATELY IN | Spinal Services | 11/1/2024 |
| 22505 | MANIPULATION OF SPINE | Spinal Services | 11/20/2025 |
| 22505 | Manipulation of spine requiring anesthesia, any region | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 22510 | PERQ CERVICOTHORACIC INJECT | Spinal Services | 11/1/2024 |
| 22511 | PERQ LUMBOSACRAL INJECTION | Spinal Services | 11/1/2024 |
| 22512 | VERTEBROPLASTY ADDL INJECT | Spinal Services | 11/1/2024 |
| 22513 | PERQ VERTEBRAL AUGMENTATION | Spinal Services | 11/1/2024 |
| 22514 | PERQ VERTEBRAL AUGMENTATION | Spinal Services | 11/1/2024 |
| 22515 | PERQ VERTEBRAL AUGMENTATION | Spinal Services | 11/1/2024 |
| 22526 | Percutaneous intradiscal electrothermal annuloplasty, unilateral or bilateral including fluoroscopic guidance; single level | Potential Experimental/Investigation/Unproven | 11/1/2024 |
| 22527 | Percutaneous intradiscal electrothermal annuloplasty, unilateral or bilateral including fluoroscopic guidance; one or more add'l levels (List separately in addition to code for primary procedure) | Potential Experimental/Investigation/Unproven | 11/1/2024 |
| 22533 | Arthrodesis, lateral extracavitary technique, including minimal discectomy to prepare interspace (other than for decompression); lumbar | Spinal Services | 11/1/2024 |
| 22534 | LAT THOR/LUMB ADDL SEG | Spinal Services | 11/1/2024 |
| 22551 | ARTHRODESIS, ANTERIOR INTERBODY, INCLUDING DISC SPACE PREPARATION, DISCECTOMY, OSTEOPHYECTOMY AND DECOMPRESSION OF SPINAL CORD AND/OR NERVE ROOTS; CERVICAL BELOW C2 | Spinal Services | 11/1/2024 |
| 22552 | ARTHRODESIS, ANTERIOR INTERBODY, INCLUDING DISC SPACE PREPARATION, DISCECTOMY, OSTEOPHYECTOMY AND DECOMPRESSION OF SPINAL CORD AND/OR NERVE ROOTS; CERVICAL BELOW C2, EACH ADDITIONAL INTERSPACE (LIST SEPARATELY IN ADDITI | Spinal Services | 11/1/2024 |
| 22554 | NECK SPINE FUSION | Spinal Services | 11/1/2024 |
| 22558 | Arthrodesis, anterior interbody technique, including minimal discectomy to prepare interspace (other than for decompression); lumbar | Spinal Services | 11/1/2024 |
| 22585 | ADDITIONAL SPINAL FUSION | Spinal Services | 11/1/2024 |
| 22586 | PRESCLR FUSE W/ INSTR L5 | Spinal Services | 11/1/2024 |
| 22595 | Arthrodesis, posterior technique, atlas-axis (C1-C2) | Outpatient Procedures (Potentially Cosmetic) | 7/26/2024 |
| 22600 | NECK SPINE FUSION | Spinal Services | 11/1/2024 |
| 22610 | Arthrodesis, posterior or posterolateral technique, single level; thoracic (with lateral transverse technique, when performed) | Outpatient Procedures (Potentially Cosmetic) | 7/26/2024 |
| 22612 | Arthrodesis, posterior or posterolateral technique, single level; lumbar (with or without lateral transverse technique) | Spinal Services | 11/1/2024 |
| 22614 | SPINE FUSION EXTRA SEGME | Spinal Services | 11/1/2024 |
| 22630 | Arthrodesis, posterior interbody technique, including laminectomy and/or discectomy to prepare interspace (other than for decompression), single interspace; lumbar | Spinal Services | 11/1/2024 |
| 22632 | Arthrodesis, posterior interbody technique, including laminectomy and/or discectomy to prepare interspace (other than for decompression), single interspace; each additional interspace (List separately in addition to code for primary procedure) | Spinal Services | 11/1/2024 |
| 22633 | LUMBAR SPINE FUSION COMB | Spinal Services | 11/1/2024 |
| 22634 | SPINE FUSION EXTRA SEGME | Spinal Services | 11/1/2024 |
| 22800 | Arthrodesis, posterior, for spinal deformity, with or without cast; up to 6 vertebral segments | Outpatient Procedures (Potentially Cosmetic) | 7/26/2024 |
| 22836 | Anterior thoracic vertebral body tethering, including thoracoscopy, when performed; up to 7 vertebral segments | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| 22837 | Anterior thoracic vertebral body tethering, including thoracoscopy, when performed; 8 or more vertebral segments | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| 22838 | Revision (eg, augmentation, division of tether), replacement, or removal of thoracic vertebral body tethering, including thoracoscopy, when performed | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |

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| 22840 | POSTERIOR NON-SEGMENTAL INSTRUMENTATION (EG, HARRINGTON ROD TECHNIQUE, PEDICLE FIXATION ACROSS 1 INTERSPACE, ATLANTOAXIAL TRANSARTICULAR SCREW FIXATION, SUBLAMINAR WIRING AT C1, FACET SCREW FIXATION) (LIST SEPARATELY IN | Spinal Services | 11/1/2024 |
| 22841 | INSERT SPINE FIXATION DE | Spinal Services | 11/1/2024 |
| 22842 | INSERT SPINE FIXATION DE | Spinal Services | 11/1/2024 |
| 22843 | INSERT SPINE FIXATION DE | Spinal Services | 11/1/2024 |
| 22844 | INSERT SPINE FIXATION DE | Spinal Services | 11/1/2024 |
| 22845 | INSERT SPINE FIXATION DE | Spinal Services | 11/1/2024 |
| 22846 | INSERT SPINE FIXATION DE | Spinal Services | 11/1/2024 |
| 22847 | INSERT SPINE FIXATION DE | Spinal Services | 11/1/2024 |
| 22848 | INSERT PELV FIXATION DEV | Spinal Services | 11/1/2024 |
| 22849 | REINSERT SPINAL FIXATION | Spinal Services | 11/1/2024 |
| 22850 | REMOVE SPINE FIXATION DE | Spinal Services | 11/1/2024 |
| 22852 | REMOVE SPINE FIXATION DE | Spinal Services | 11/1/2024 |
| 22853 | INSJ BIOMECHANICAL DEVICE | Spinal Services | 11/1/2024 |
| 22854 | INSJ BIOMECHANICAL DEVICE | Spinal Services | 11/1/2024 |
| 22855 | REMOVE SPINE FIXATION DE | Spinal Services | 11/1/2024 |
| 22856 | CERV ARTIFIC DISKECTOMY | Spinal Services | 11/1/2024 |
| 22856 | Total disc arthroplasty (artificial disc), anterior approach, including discectomy with end plate preparation (includes osteophylectomy for nerve root or spinal cord decompression and microdissection), single interspace, cervical | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 22857 | LUMBAR ARTIF DISKECTOMY | Spinal Services | 11/1/2024 |
| 22857 | Total disc arthroplasty (artificial disc), anterior approach, including discectomy to prepare interspace (other than for decompression), lumbar, single interspace | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 22858 | SECOND LEVEL CER DISKECTOMY | Spinal Services | 11/1/2024 |
| 22859 | INSJ BIOMECHANICAL DEVICE | Spinal Services | 11/1/2024 |
| 22860 | Total disc arthroplasty (artificial disc), anterior approach, including discectomy to prepare interspace (other than for decompression); second interspace, lumbar (List separately in addition to code for primary procedure) | Spinal Services | 11/1/2024 |
| 22861 | REVISE CERV ARTIFIC DISC | Spinal Services | 11/1/2024 |
| 22861 | Revision including replacement of total disc arthroplasty (artificial disc), anterior approach, single interspace; cervical | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 22862 | REVISE LUMBAR ARTIF DISC | Spinal Services | 11/1/2024 |
| 22862 | Revision including replacement of total disc arthroplasty (artificial disc) anterior approach, lumbar, single interspace | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 22867 | INSJ STABLJ DEV W/DCMPRN | Spinal Services | 11/1/2024 |
| 22868 | INSJ STABLJ DEV W/DCMPRN | Spinal Services | 11/1/2024 |
| 22869 | INSJ STABLJ DEV W/O DCMRPN | Spinal Services | 11/1/2024 |
| 22870 | INSJ STABLJ DEV W/O DCMRPN | Spinal Services | 11/1/2024 |
| 22899 | Unlisted procedure, spine | Unlisted Procedures | 11/1/2024 |
| 22999 | Unlisted procedure, abdomen, musculoskeletal system | Unlisted Procedures | 11/20/2025 |
| 23030 | Incision and drainage, shoulder area; deep abscess or hematoma | Musculoskeletal (Buy Up) | 7/29/2022 |
| 23031 | Incision and drainage, shoulder area;infected bursa | Musculoskeletal (Buy Up) | 7/29/2022 |
| 23035 | Incision, bone cortex (eg, osteomyelitis or bone abscess), shoulder area | Musculoskeletal (Buy Up) | 7/29/2022 |
| 23040 | Arthrotomy, glenohumeral joint, including exploration, drainage, or removal of foreign body | Musculoskeletal (Buy Up) | 7/29/2022 |
| 23044 | Arthrotomy, acromioclavicular, sternoclavicular joint, including exploration, drainage, orremovalof foreign body | Musculoskeletal (Buy Up) | 7/29/2022 |
| 23065 | Biopsy, soft tissue of shoulder area; superficial | Musculoskeletal (Buy Up) | 7/29/2022 |
| 23066 | Biopsy, soft tissue of shoulder area;deep | Musculoskeletal (Buy Up) | 7/29/2022 |
| 23071 | Excision, tumor, soft tissue of shoulder area, subcutaneous;3 cm or greater | Musculoskeletal (Buy Up) | 7/29/2022 |
| 23073 | Excision, tumor, soft tissue of shoulder area, subfascial (eg, intramuscular);5 cm or greater | Musculoskeletal (Buy Up) | 7/29/2022 |
| 23075 | Excision, soft tissue tumor, shoulder area; subcutaneous | Musculoskeletal (Buy Up) | 7/29/2022 |
| 23076 | Excision, soft tissue tumor, shoulder area;deep, subfascial, or intramuscular | Musculoskeletal (Buy Up) | 7/29/2022 |
| 23077 | Radical resection of tumor (eg, sarcoma), soft tissue of shoulder area; less than 5 cm | Musculoskeletal (Buy Up) | 7/29/2022 |
| 23078 | Radical resection of tumor (eg, sarcoma), soft tissue of shoulder area; 5 cm or greater | Musculoskeletal (Buy Up) | 7/29/2022 |
| 23100 | Arthrotomy, glenohumeral joint, including biopsy | Musculoskeletal (Buy Up) | 7/29/2022 |
| 23101 | Arthrotomy, acromioclavicular joint or sternoclavicular joint, including biopsy and/or excision oforn cartilage | Musculoskeletal (Buy Up) | 7/29/2022 |
| 23105 | Arthrotomy; glenohumeral joint, with synovectomy, with or without biopsy | Musculoskeletal (Buy Up) | 7/29/2022 |
| 23106 | Arthrotomy;sternoclavicular joint, with synovectomy, with or without biopsy | Musculoskeletal (Buy Up) | 12/30/2025 |
| 23107 | Arthrotomy, glenohumeral joint, with joint exploration, with or without removal of loose orforeignbody | Musculoskeletal (Buy Up) | 7/29/2022 |
| 23140 | Excision or curettage of bone cyst or benign tumor of clavicle or scapula; | Musculoskeletal (Buy Up) | 7/29/2022 |
| 23146 | Excision or curettage of bone cyst or benign tumor of clavicle or scapula;with allograft | Musculoskeletal (Buy Up) | 7/29/2022 |
| 23150 | Excision or curettage of bone cyst or benign tumor of proximal humerus; | Musculoskeletal (Buy Up) | 7/29/2022 |
| 23156 | Excision or curettage of bone cyst or benign tumor of proximal humerus;with allograft | Musculoskeletal (Buy Up) | 7/29/2022 |
| 23170 | Sequestrectomy (eg, for osteomyelitis or bone abscess), clavicle | Musculoskeletal (Buy Up) | 7/29/2022 |

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| 23180 | Partial excision (craterization, saucerization, or diaphysectomy) bone (eg, osteomyelitis),clavicle | Musculoskeletal (Buy Up) | 7/29/2022 |
| 23182 | Partial excision (craterization, saucerization, or diaphysectomy) bone (eg, osteomyelitis),scapula | Musculoskeletal (Buy Up) | 7/29/2022 |
| 23184 | Partial excision (craterization, saucerization, or diaphysectomy) bone (eg, osteomyelitis),proximalhumerus | Musculoskeletal (Buy Up) | 7/29/2022 |
| 23200 | Radical resection for tumor; clavicle | Musculoskeletal (Buy Up) | 7/29/2022 |
| 23210 | Radical resection for tumor;scapula | Musculoskeletal (Buy Up) | 7/29/2022 |
| 23220 | Radical resection of bone tumor, proximal humerus; | Musculoskeletal (Buy Up) | 7/29/2022 |
| 23330 | Removal of foreign body, shoulder; subcutaneous | Musculoskeletal (Buy Up) | 7/29/2022 |
| 23333 | Removal of foreign body, shoulder; deep (subfascial or intramuscular) | Musculoskeletal (Buy Up) | 7/29/2022 |
| 23334 | Removal of prosthesis, includes debridement and synovectomy when performed; humeral or glenoid component | Musculoskeletal (Buy Up) | 7/29/2022 |
| 23335 | Removal of prosthesis, includes debridement and synovectomy when performed; humeral and glenoid component | Musculoskeletal (Buy Up) | 7/29/2022 |
| 23400 | Scapulopexy (eg, Sprengels deformity or for paralysis) | Musculoskeletal (Buy Up) | 7/29/2022 |
| 23490 | Prophylactic treatment (nailing, pinning, plating or wiring) with or without methylmethacrylate; clavicle | Musculoskeletal (Buy Up) | 7/29/2022 |
| 23491 | Prophylactic treatment (nailing, pinning, plating or wiring) with or without methylmethacrylate;proximal humerus | Musculoskeletal (Buy Up) | 7/29/2022 |
| 23700 | Manipulation under anesthesia, shoulder joint, including application of fixation apparatus (dislocation excluded) | Potential Experimental/Investigation/Unproven | 3/28/2025 |
| 23800 | Arthrodesis, glenohumeral joint; | Musculoskeletal (Buy Up) | 7/29/2022 |
| 23802 | Arthrodesis, glenohumeral joint;with autogenous graft (includes obtaining graft) | Musculoskeletal (Buy Up) | 12/30/2025 |
| 23929 | Unlisted procedure, shoulder | Unlisted Procedures | 11/20/2025 |
| 24300 | MANIPULATE ELBOW W/ANEST | Outpatient Procedures (Potentially Cosmetic) | 11/20/2025 |
| 24300 | Manipulation, elbow, under anesthesia | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 24999 | Unlisted procedure, humerus or elbow | Unlisted Procedures | 11/20/2025 |
| 25259 | MANIPULATE WRIST W/ANEST | Outpatient Procedures (Potentially Cosmetic) | 11/20/2025 |
| 25259 | Manipulation, wrist, under anesthesia | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 25675 | Closed treatment of distal radioulnar dislocation with manipulation | Potential Experimental/Investigation/Unproven | 10/8/2021 |
| 25999 | Unlisted procedure, forearm and wrist | Unlisted Procedures | 11/20/2025 |
| 26341 | MANIPULAT PALM CORD POST | Outpatient Procedures (Potentially Cosmetic) | 2/28/2025 |
| 26341 | Manipulation, palmar fascial cord (i.e. Dupuytren's cord, post enzyme injection | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 26989 | Unlisted procedure, hands or fingers | Unlisted Procedures | 11/20/2025 |
| 26990 | Incision and drainage, pelvis or hip joint area; deep abscess or hematoma | Musculoskeletal (Buy Up) | 7/29/2022 |
| 26991 | Incision and drainage, pelvis or hip joint area;infected bursa | Musculoskeletal (Buy Up) | 7/29/2022 |
| 26992 | Incision, bone cortex, pelvis and/or hip joint (eg, osteomyelitis or bone abscess) | Musculoskeletal (Buy Up) | 7/29/2022 |
| 27030 | Arthrotomy, hip, with drainage (eg, infection) | Musculoskeletal (Buy Up) | 7/29/2022 |
| 27033 | Arthrotomy, hip, including exploration or removal of loose or foreign body | Musculoskeletal (Buy Up) | 12/30/2025 |
| 27040 | Biopsy, soft tissue of pelvis and hip area; superficial | Musculoskeletal (Buy Up) | 7/29/2022 |
| 27041 | Biopsy, soft tissue of pelvis and hip area;deep, subfascial or intramuscular | Musculoskeletal (Buy Up) | 7/29/2022 |
| 27043 | Excision, tumor, soft tissue of pelvis and hip area, subcutaneous;3 cm or greater | Musculoskeletal (Buy Up) | 7/29/2022 |
| 27045 | Excision, tumor, soft tissue of pelvis and hip area, subfascial (eg, intramuscular);5 cm or greater | Musculoskeletal (Buy Up) | 7/29/2022 |
| 27047 | Excision, tumor, pelvis and hip area; subcutaneous tissue | Musculoskeletal (Buy Up) | 7/29/2022 |
| 27048 | Excision, tumor, pelvis and hip area;deep, subfascial, intramuscular | Musculoskeletal (Buy Up) | 7/29/2022 |
| 27049 | Radical resection of tumor (eg, sarcoma), soft tissue of pelvis and hip area; less than 5 cm | Musculoskeletal (Buy Up) | 7/29/2022 |
| 27052 | Arthrotomy, with biopsy;hip joint | Musculoskeletal (Buy Up) | 7/29/2022 |
| 27054 | Arthrotomy with synovectomy, hip joint | Musculoskeletal (Buy Up) | 7/29/2022 |
| 27059 | Radical resection of tumor (eg, sarcoma), soft tissue of pelvis and hip area; 5 cm or greater | Musculoskeletal (Buy Up) | 7/29/2022 |
| 27065 | Excision of bone cyst or benign tumor; superficial (wing of ilium, symphysis pubis, or greater trochanteroffemur) with or without autograft | Musculoskeletal (Buy Up) | 7/29/2022 |
| 27066 | Excision of bone cyst or benign tumor;deep, with or without autograft | Musculoskeletal (Buy Up) | 7/29/2022 |
| 27067 | Excision of bone cyst or benign tumor;with autograft requiring separate incision | Musculoskeletal (Buy Up) | 7/29/2022 |
| 27070 | Partial excision (craterization, saucerization) (eg, osteomyelitis or bone abscess); superficial (eg, wing of ilium, symphysis pubis, or greater trochanter of femur) | Musculoskeletal (Buy Up) | 7/29/2022 |
| 27071 | Partial excision (craterization, saucerization) (eg, osteomyelitis or bone abscess);deep (subfascial or intramuscular) | Musculoskeletal (Buy Up) | 7/29/2022 |
| 27075 | Radical resection of tumor or infection; wing of ilium, one pubic or ischial ramus or symphysis pubis | Musculoskeletal (Buy Up) | 7/29/2022 |
| 27076 | Radical resection of tumor or infection;ilium, including acetabulum, both pubic rami, or ischium and acetabulum | Musculoskeletal (Buy Up) | 7/29/2022 |
| 27077 | Radical resection of tumor or infection;innominate bone, total | Musculoskeletal (Buy Up) | 7/29/2022 |
| 27078 | Radical resection of tumor or infection;ischial tuberosity and greater trochanter of femur | Musculoskeletal (Buy Up) | 7/29/2022 |
| 27086 | Removal of foreign body, pelvis or hip; subcutaneous tissue | Musculoskeletal (Buy Up) | 7/29/2022 |
| 27087 | Removal of foreign body, pelvis or hip;deep (subfascial or intramuscular) | Musculoskeletal (Buy Up) | 7/29/2022 |
| 27090 | Removal of hip prosthesis; (separate procedure) | Musculoskeletal (Buy Up) | 7/29/2022 |

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| 27091 | Removal of hip prosthesis;complicated, including total hip prosthesis, methylmethacrylate with or withoutinsertion of spacer | Musculoskeletal (Buy Up) | 7/29/2022 |
| 27120 | Acetabuloplasty; (eg, Whitman, Colonna, Haygroves, or cup type) | Musculoskeletal (Buy Up) | 7/29/2022 |
| 27122 | Acetabuloplasty;resection, femoral head (eg, Girdlestone procedure) | Musculoskeletal (Buy Up) | 7/29/2022 |
| 27140 | Osteotomy and transfer of greater trochanter of femur (separate procedure) | Musculoskeletal (Buy Up) | 7/29/2022 |
| 27146 | Osteotomy, iliac, acetabular or innominate bone; | Musculoskeletal (Buy Up) | 7/29/2022 |
| 27147 | Osteotomy, iliac, acetabular or innominate bone;with open reduction of hip | Musculoskeletal (Buy Up) | 7/29/2022 |
| 27151 | Osteotomy, iliac, acetabular or innominate bone;with femoral osteotomy | Musculoskeletal (Buy Up) | 7/29/2022 |
| 27156 | Osteotomy, iliac, acetabular or innominate bone;with femoral osteotomy and with open reduction of hip | Musculoskeletal (Buy Up) | 7/29/2022 |
| 27158 | Osteotomy, pelvis, bilateral (eg, congenital malformation) | Musculoskeletal (Buy Up) | 7/29/2022 |
| 27161 | Osteotomy, femoral neck (separate procedure) | Musculoskeletal (Buy Up) | 7/29/2022 |
| 27165 | Osteotomy, intertrochanteric or subtrochanteric including internal or external fixation and/or cast | Musculoskeletal (Buy Up) | 7/29/2022 |
| 27176 | Treatment of slipped femoral epiphysis;by single or multiple pinning, in situ | Musculoskeletal (Buy Up) | 7/29/2022 |
| 27177 | Open treatment of slipped femoral epiphysis; single or multiple pinning or bone graft (includes obtaininggraft) | Musculoskeletal (Buy Up) | 12/2/2022 |
| 27178 | Open treatment of slipped femoral epiphysis;closed manipulation with single or multiple pinning | Musculoskeletal (Buy Up) | 7/29/2022 |
| 27179 | Open treatment of slipped femoral epiphysis;osteoplasty of femoral neck (Heyman type procedure) | Musculoskeletal (Buy Up) | 7/29/2022 |
| 27181 | Open treatment of slipped femoral epiphysis;osteotomy and internal fixation | Musculoskeletal (Buy Up) | 7/29/2022 |
| 27187 | Prophylactic treatment (nailing, pinning, plating or wiring) with or without methylmethacrylate, femoralneckand proximal femur | Musculoskeletal (Buy Up) | 7/29/2022 |
| 27197 | CLSD TX PELVIC RING FX | Outpatient Procedures (Potentially Cosmetic) | 8/19/2025 |
| 27198 | CLSD TX PELVIC RING FX | Outpatient Procedures (Potentially Cosmetic) | 11/20/2025 |
| 27275 | MANIPULATION OF HIP JOIN | Outpatient Procedures (Potentially Cosmetic) | 11/20/2025 |
| 27275 | Manipulation, hip joint, requiring general anesthesia | Potential Experimental/Investigation/Unproven | 3/28/2025 |
| 27278 | Arthrodesis, sacroiliac joint, percutaneous, with image guidance, including placement of intra-articular implant(s) (eg, bone allograft(s), synthetic device(s)), without placement of transfixation device | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| 27279 | ARTHRODESIS SACROILIAC JOINT | Spinal Services | 11/1/2024 |
| 27280 | Arthrodesis, sacroiliac joint (including obtaining graft) | Spinal Services | 11/1/2024 |
| 27299 | Unlisted procedure, pelvis or hip joint | Unlisted Procedures | 11/20/2025 |
| 27301 | Incision and drainage, deep abscess, bursa, or hematoma, thigh or knee region | Musculoskeletal (Buy Up) | 7/29/2022 |
| 27303 | Incision, deep, with opening of bone cortex, femur or knee (eg, osteomyelitis or bone abscess) | Musculoskeletal (Buy Up) | 7/29/2022 |
| 27310 | Arthrotomy, knee, with exploration, drainage, or removal of foreign body (eg, infection) | Musculoskeletal (Buy Up) | 7/29/2022 |
| 27323 | Biopsy, soft tissue of thigh or knee area; superficial | Musculoskeletal (Buy Up) | 7/29/2022 |
| 27324 | Biopsy, soft tissue of thigh or knee area;deep (subfascial or intramuscular) | Musculoskeletal (Buy Up) | 7/29/2022 |
| 27327 | Excision, tumor, soft tissue of thigh or knee area, subcutaneous; less than 3 cm | Musculoskeletal (Buy Up) | 7/29/2022 |
| 27328 | Excision, tumor, thigh or knee area;deep, subfascial, or intramuscular; less than 5 cm | Musculoskeletal (Buy Up) | 7/29/2022 |
| 27329 | Radical resection of tumor (eg, sarcoma), soft tissue of thigh or knee area; less than 5 cm | Musculoskeletal (Buy Up) | 7/29/2022 |
| 27330 | Arthrotomy, knee; with synovial biopsy only | Musculoskeletal (Buy Up) | 7/29/2022 |
| 27331 | Arthrotomy, knee;including joint exploration, biopsy, or removal of loose or foreign bodies | Musculoskeletal (Buy Up) | 12/30/2025 |
| 27337 | Excision, tumor, soft tissue of thigh or knee area, subcutaneous; 3 cm or greater | Musculoskeletal (Buy Up) | 7/29/2022 |
| 27339 | Excision, tumor, soft tissue of thigh or knee area, subfascial (eg, intramuscular); 5 cm or greater | Musculoskeletal (Buy Up) | 7/29/2022 |
| 27340 | Excision, prepatellar bursa | Musculoskeletal (Buy Up) | 12/30/2025 |
| 27347 | Excision of lesion of meniscus or capsule (eg, cyst, ganglion), knee | Musculoskeletal (Buy Up) | 12/30/2025 |
| 27364 | Radical resection of tumor (eg, sarcoma), soft tissue of thigh or knee area; 5 cm or greater | Musculoskeletal (Buy Up) | 7/29/2022 |
| 27365 | Radical resection of tumor, bone, femur or knee | Musculoskeletal (Buy Up) | 7/29/2022 |
| 27369 | NJX CNTRST KNE ARTHG/CT/MRI | Outpatient Procedures (Potentially Cosmetic) | 4/10/2020 |
| 27372 | Removal of foreign body, deep, thigh region or knee area | Musculoskeletal (Buy Up) | 7/29/2022 |
| 27407 | Repair, primary, torn ligament and/or capsule, knee;cruciate | Musculoskeletal (Buy Up) | 12/30/2025 |
| 27409 | Repair, primary, torn ligament and/or capsule, knee;collateral and cruciate ligaments | Musculoskeletal (Buy Up) | 12/30/2025 |
| 27412 | AUTOCHONDROCYTE IMPLANT | Outpatient Procedures (Potentially Cosmetic) | 3/28/2025 |
| 27412 | Autologous chondrocyte implantation, knee | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 27415 | OSTEOCHONDRAL KNEE ALLOG | Outpatient Procedures (Potentially Cosmetic) | 12/6/2024 |
| 27415 | Osteochondral allograft, knee, open | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 27416 | OSTEOCHONDRAL KNEE AUTOG | Outpatient Procedures (Potentially Cosmetic) | 3/28/2025 |
| 27416 | Osteochondral autograft(s) , knee, open (eg, mosaicplasty) (includes harvesting of autograft(s)) | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 27445 | Arthroplasty, knee, hinge prosthesis (e.g., Walldius type) | Musculoskeletal (Buy Up) | 12/30/2025 |
| 27448 | Osteotomy, femur, shaft or supracondylar; without fixation | Musculoskeletal (Buy Up) | 7/29/2022 |
| 27450 | Osteotomy, femur, shaft or supracondylar;with fixation | Musculoskeletal (Buy Up) | 7/29/2022 |

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| 27454 | Osteotomy, multiple, with realignment on intramedullary rod, femoral shaft (eg, Sofield type procedure) | Musculoskeletal (Buy Up) | 7/29/2022 |
| 27455 | Osteotomy, proximal tibia, including fibular excision or osteotomy (includes correction of genu varus (bowleg) or genu valgus (knock-knee)); before epiphyseal closure | Musculoskeletal (Buy Up) | 7/29/2022 |
| 27457 | Osteotomy, proximal tibia, including fibular excision or osteotomy (includes correction of genu varus (bowleg) or genu valgus (knock-knee));after epiphyseal closure | Musculoskeletal (Buy Up) | 7/29/2022 |
| 27465 | Osteoplasty, femur;shortening (excluding 64876) | Musculoskeletal (Buy Up) | 7/29/2022 |
| 27466 | Osteoplasty, femur;lengthening | Musculoskeletal (Buy Up) | 7/29/2022 |
| 27468 | Osteoplasty, femur;combined, lengthening and shortening with femoral segment transfer | Musculoskeletal (Buy Up) | 7/29/2022 |
| 27470 | Repair, nonunion or malunion, femur, distal to head and neck; without graft (eg, compression technique) | Musculoskeletal (Buy Up) | 7/29/2022 |
| 27472 | Repair, nonunion or malunion, femur, distal to head and neck;with iliac or other autogenous bone graft (includes obtaining graft) | Musculoskeletal (Buy Up) | 7/29/2022 |
| 27488 | Removal of prosthesis, including total knee prosthesis, methylmethacrylate with or without insertion of spacer, knee | Musculoskeletal (Buy Up) | 7/29/2022 |
| 27495 | Prophylactic treatment (nailing, pinning, plating, or wiring) with or without methylmethacrylate, femur | Musculoskeletal (Buy Up) | 7/29/2022 |
| 27570 | FIXATION OF KNEE JOINT | Outpatient Procedures (Potentially Cosmetic) | 3/28/2025 |
| 27570 | Manipulation of knee joint under general anesthesia (includes application of traction or other fixation devices) | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 27599 | Unlisted procedure, femur or knee | Unlisted Procedures | 11/20/2025 |
| 27702 | Arthroplasty, ankle; with implant (total ankle) | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 27702 | RECONSTRUCT ANKLE JOINT | Outpatient Procedures (Potentially Cosmetic) | 9/12/2025 |
| 27703 | Arthroplasty, ankle; revision, total ankle | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 27703 | RECONSTRUCTION ANKLE JOI | Outpatient Procedures (Potentially Cosmetic) | 11/20/2025 |
| 27860 | FIXATION OF ANKLE JOINT | Outpatient Procedures (Potentially Cosmetic) | 11/20/2025 |
| 27860 | Manipulation of ankle under general anesthesia (includes application of traction or other fixation apparatus) | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 27870 | FUSION OF ANKLE JOINT OP | Outpatient Procedures (Potentially Cosmetic) | 10/8/2021 |
| 27899 | Unlisted procedure, leg or ankle | Unlisted Procedures | 11/20/2025 |
| 28446 | Open osteochondral autograft, talus (includes obtaining graft(s)) | Potential Experimental/Investigation/Unproven | 4/25/2025 |
| 28899 | Unlisted procedure, foot or toes | Unlisted Procedures | 11/20/2025 |
| 29799 | Unlisted procedure, casting or strapping | Unlisted Procedures | 7/28/2023 |
| 29800 | Arthroscopy, temporomandibular joint (TMJ), diagnostic, with or without synovial biopsy (separate procedure) | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 29866 | Arthroscopy, knee, surgical; osteochondral autograft(s) (eg, mosaicplasty) (includes harvesting of the autograft) | Outpatient Procedures (Potentially Cosmetic) | 3/28/2025 |
| 29867 | Arthroscopy, knee, surgical; osteochondral allograft (eg, mosaicplasty) | Outpatient Procedures (Potentially Cosmetic) | 3/28/2025 |
| 29868 | Arthroscopy, knee, surgical; meniscal transplantation (includes arthrotomy for meniscal insertion), medial or lateral | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 29868 | MENISCAL TRNSPL KNEE W/S | Outpatient Procedures (Potentially Cosmetic) | 3/28/2025 |
| 29999 | Unlisted procedure, arthroscopy | Unlisted Procedures | 11/20/2025 |
| 30469 | Repair of nasal valve collapse with low energy, temperature-controlled (ie, radiofrequency) subcutaneous/submucosal remodeling | Outpatient Procedures (Potentially Cosmetic) | 11/20/2025 |
| 30999 | Unlisted procedure, nose | Unlisted Procedures | 11/20/2025 |
| 31253 | NSL/SINS NDSC TOTAL | Outpatient Procedures (Potentially Cosmetic) | 4/30/2021 |
| 31257 | NSL/SINS NDSC TOT W/SPHENDT | Outpatient Procedures (Potentially Cosmetic) | 4/30/2021 |
| 31259 | NSL/SINS NDSC SPHN TISS RMVL | Outpatient Procedures (Potentially Cosmetic) | 4/30/2021 |
| 31299 | Unlisted procedure, accessory sinuses | Unlisted Procedures | 11/20/2025 |
| 31647 | BRONCHIAL VALVE INIT INS | Outpatient Procedures (Potentially Cosmetic) | 2/28/2025 |
| 31647 | Bronchoscopy, rigid or flexible, including fluoroscopic guidance, when performed; with balloon occlusion, when performed, assessment of air leak, airway sizing, and insertion of bronchial valve(s), initial lobe | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 31651 | BRONCHIAL VALVE ADDL INS | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 31651 | Bronchoscopy, rigid or flexible, including fluoroscopic guidance, when performed; with balloon occlusion, when performed, assessment of air leak, airway sizing, and insertion of bronchial valve(s), each additional lobe (List separately in addition to code) | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 31660 | Bronchoscopy, rigid or flexible, including fluoroscopic guidance, when performed; with bronchial thermoplasty, 1 lobe | Potential Experimental/Investigation/Unproven | 2/28/2025 |
| 31661 | Bronchoscopy, rigid or flexible, including fluoroscopic guidance, when performed; with bronchial thermoplasty, 2 or more lobes | Potential Experimental/Investigation/Unproven | 2/28/2025 |
| 32491 | LUNG VOLUME REDUCTION | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 32491 | Removal of lung, other than total pneumonectomy; excision-plication of emphysematous lung(s) (bullous or non-bullous) for lung volume reduction, sternal split or transthoracic approach, with or without any pleural procedure | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 32664 | Thoracoscopy, surgical; with thoracic sympathectomy | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 32994 | ABLATE PULM TUMOR PERQ CRYBL | Potential Experimental/Investigation/Unproven | 5/8/2020 |
| 33206 | INSERT HEART PM ATRIAL | Diagnostic Radiology | 5/30/2025 |
| 33207 | INSERT HEART PM VENTRICU | Diagnostic Radiology | 5/30/2025 |
| 33208 | INSRT HEART PM ATRIAL & | Diagnostic Radiology | 5/30/2025 |
| 33230 | Insertion of pacing cardioverter-defibrillator pulse generator only; with existing dual leads | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 33231 | Insertion of pacing cardioverter-defibrillator pulse generator only; with existing multiple leads | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 33240 | Insertion of single or dual chamber pacing cardioverter-defibrillator pulse generator | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 33249 | Insertion or replacement of permanent pacing cardioverter-defibrillator system with transvenous lead(s), single or dual chamber | Potential Experimental/Investigation/Unproven | 11/13/2020 |

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| 33254 | Operative tissue ablation and reconstruction of atria, limited (eg, modified maze procedure) | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 33255 | Operative tissue ablation and reconstruction of atria, extensive (eg, maze procedure); without cardiopulmonary bypass | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 33258 | ABLATE ATRIA X10SV ADD-O | Potential Experimental/Investigation/Unproven | 9/12/2025 |
| 33268 | Exclusion of left atrial appendage, open, performed at the time of other sternotomy or thoracotomy procedure(s), any method (eg, excision, isolation via stapling, oversewing, ligation, plication, clip) (List separately in addition to code for primary proc | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 33270 | INS/REP SUBQ DEFIBRILLATOR | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 33271 | INSJ SUBQ IMPLTBL DFB ELCTRD | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 33274 | TCAT INSJ/RPL PERM LDLS PM | Diagnostic Radiology | 5/30/2025 |
| 33274 | TCAT INSJ/RPL PERM LDLS PM | Outpatient Procedures (Potentially Cosmetic) | 1/21/2021 |
| 33275 | TCAT RMVL PERM LDLS PM | Potential Experimental/Investigation/Unproven | 6/30/2023 |
| 33275 | TCAT RMVL PERM LDLS PM | Outpatient Procedures (Potentially Cosmetic) | 12/3/2021 |
| 33289 | TCAT IMPL WRLS P-ART PRS SNR | Outpatient Procedures (Potentially Cosmetic) | 9/12/2025 |
| 33340 | PERQ CLSR TCAT L ATR APNDGE | Potential Experimental/Investigation/Unproven | 9/12/2025 |
| 33361 | Transcatheter aortic valve replacement (TAVR/TAVI) with prosthetic valve; percutaneous femoral artery approach | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 33362 | Transcatheter aortic valve replacement (TAVR/TAVI) with prosthetic valve; open femoral artery approach | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 33363 | Transcatheter aortic valve replacement (TAVR/TAVI) with prosthetic valve; open axillary artery approach | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 33364 | Transcatheter aortic valve replacement (TAVR/TAVI) with prosthetic valve; open iliac artery approach | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 33365 | Transcatheter aortic valve replacement (TAVR/TAVI) with prosthetic valve; transaortic approach (eg, median sternotomy, mediastinotomy) | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 33367 | REPLACE AORTIC VALVE W/B | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 33367 | Transcatheter aortic valve replacement (TAVR/TAVI) with prosthetic valve; cardiopulmonary bypass support with percutaneous peripheral arterial and venous cannulation (eg, femoral vessels) (List separately in addition to code for primary procedure) | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 33368 | REPLACE AORTIC VALVE W/B | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 33368 | Transcatheter aortic valve replacement (TAVR/TAVI) with prosthetic valve; cardiopulmonary bypass support with open peripheral arterial and venous cannulation (eg, femoral, iliac, axillary vessels) (List separately in addition to code for primary procedure) | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 33369 | REPLACE AORTIC VALVE W/B | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 33369 | Transcatheter aortic valve replacement (TAVR/TAVI) with prosthetic valve; cardiopulmonary bypass support with central arterial and venous cannulation (eg, aorta, right atrium, pulmonary artery) (List separately in addition to code for primary procedure) | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 33370 | Transcatheter placement and subsequent removal of cerebral embolic protection device(s), including arterial access, catheterization, imaging, and radiological supervision and interpretation, percutaneous (List separately in addition to code for primary pr | Outpatient Procedures (Potentially Cosmetic) | 2/25/2022 |
| 33419 | REPAIR TCAT MITRAL VALVE | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 33548 | RESTORE/REMODEL VENTRICL | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 33548 | Surgical ventricular restoration procedure, includes prosthetic patch, when performed (eg, ventricular remodeling, SVR, SAVER, DOR procedures) | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 33880 | ENDOVASC TAA REPR INCL S | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 33880 | Endovascular repair of descending thoracic aorta (eg, aneurysm, pseudoaneurysm, dissection, penetrating ulcer, intramural hematoma, or traumatic disruption); involving coverage of left subclavian artery origin, initial endoprosthesis plus descending thora | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 33881 | ENDOVASC TAA REPR W/O SU | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 33881 | Endovascular repair of descending thoracic aorta (eg, aneurysm, pseudoaneurysm, dissection, penetrating ulcer, intramural hematoma, or traumatic disruption); not involving coverage of left subclavian artery origin, initial endoprosthesis plus descending t | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 33883 | INSERT ENDOVASC PROSTH T | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 33883 | Placement of proximal extension prosthesis for endovascular repair of descending thoracic aorta (eg, aneurysm, pseudoaneurysm, dissection, penetrating ulcer, intramural hematoma, or traumatic disruption); initial extension | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 33884 | ENDOVASC PROSTH TAA ADD- | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 33884 | Placement of proximal extension prosthesis for endovascular repair of descending thoracic aorta (eg, aneurysm, pseudoaneurysm, dissection, penetrating ulcer, intramural hematoma, or traumatic disruption); each additional proximal extension (List separatel | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 33886 | ENDOVASC PROSTH DELAYED | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 33886 | Placement of distal extension prosthesis(s) delayed after endovascular repair of descending thoracic aorta | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 33927 | IMPLTJ TOT RPLCMT HRT SYS | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| 33928 | RMVL & RPLCMT TOT HRT SYS | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 33928 | RMVL & RPLCMT TOT HRT SYS | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 33929 | RMVL RPLCMT HRT SYS F/TRNSPL | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 33929 | RMVL RPLCMT HRT SYS F/TRNSPL | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 33977 | REMOVE VENTRICULAR DEVIC | Transplant | 12/3/2021 |
| 33978 | REMOVE VENTRICULAR DEVIC | Transplant | 12/3/2021 |

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| 33980 | REMOVE INTRACORPOREAL DE | Transplant | 12/3/2021 |
| 33995 | INSERTION OF VENTRICULAR ASSIST DEVICE, PERCUTANEOUS, INCLUDING RADIOLOGICAL SUPERVISION AND INTERPRETATION; RIGHT HEART, VENOUS ACCESS ONLY | Transplant | 7/28/2023 |
| 33997 | REMOVAL OF PERCUTANEOUS RIGHT HEART VENTRICULAR ASSIST DEVICE, VENOUS CANNULA, AT SEPARATE AND DISTINCT SESSION FROM INSERTION | Transplant | 4/30/2021 |
| 33999 | CARDIAC SURGERY PROCEDUR | Unlisted Procedures | 11/20/2025 |
| 33999 | Unlisted procedure, cardiac surgery | Outpatient Procedures (Potentially Cosmetic) | 12/3/2021 |
| 34717 | Endovascular repair of iliac artery at the time of aorto-iliac artery endograft placement by deployment of an iliac branched endograft including pre-procedure sizing and device selection, all ipsilateral selective iliac artery catheterization(s), all asso | Potential Experimental/Investigation/Unproven | 11/1/2024 |
| 34718 | EVASC RPR N/A A-ILIAC NDGFT | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| 34841 | ENDOASC VISC AORTA 1 GRAFT | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| 34842 | ENDOASC VISC AORTA 2 GRAFT | Potential Experimental/Investigation/Unproven | 4/25/2025 |
| 34843 | ENDOASC VISC AORTA 3 GRAFT | Potential Experimental/Investigation/Unproven | 4/25/2025 |
| 34844 | ENDOASC VISC AORTA 4 GRAFT | Potential Experimental/Investigation/Unproven | 4/25/2025 |
| 34845 | VISC & INFRAREN ABD 1 PROSTH | Potential Experimental/Investigation/Unproven | 4/25/2025 |
| 34846 | VISC & INFRAREN ABD 2 PROSTH | Potential Experimental/Investigation/Unproven | 4/25/2025 |
| 34847 | VISC & INFRAREN ABD 3 PROSTH | Potential Experimental/Investigation/Unproven | 4/25/2025 |
| 34848 | VISC & INFRAREN ABD 4+ PROST | Potential Experimental/Investigation/Unproven | 4/25/2025 |
| 35884 | Revision, femoral anastomosis of synthetic arterial bypass graft in groin, open; with autogenous vein patch graft | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| 36260 | Insertion of implantable intra-arterial infusion pump (eg, for chemotherapy of liver) | Outpatient Procedures (Potentially Cosmetic) | 12/29/2021 |
| 36299 | Unlisted procedure, vascular injection | Unlisted Procedures | 5/31/2024 |
| 36465 | NJX NONCMPND SCLRSNT 1 VEIN | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| 36466 | NJX NONCMPND SCLRSNT MLT VN | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| 36468 | Single or multiple injections of sclerosing solutions, spider veins (telangiectasia); limb or trunk | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| 36469 | Single or multiple injections of sclerosing solutions, spider veins (telangiectasia); face | Outpatient Procedures (Potentially Cosmetic) | 3/28/2025 |
| 36470 | Injection of sclerosing solution; single vein | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 36471 | Injection of sclerosing solution; multiple veins, same leg | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| 36473 | ENDOVENOUS MCHNCHEM 1ST VEIN | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| 36474 | ENDOVENOUS MCHNCHEM ADD-ON | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| 36475 | Endovenous ablation therapy of incompetent vein, extremity, inclusive of all imaging guidance and monitoring, percutaneous, radiofrequency; first vein treated | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| 36476 | Endovenous ablation therapy of incompetent vein, extremity, inclusive of all imaging guidance and monitoring, percutaneous, radiofrequency; second and subsequent veins treated in a single extremity, each through separate access sites (List separately in a | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| 36478 | Endovenous ablation therapy of incompetent vein, extremity, inclusive of all imaging guidance and monitoring, percutaneous, laser; first vein treated | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| 36479 | Endovenous ablation therapy of incompetent vein, extremity, inclusive of all imaging guidance and monitoring, percutaneous, laser; second and subsequent veins treated in a single extremity, each through separate access sites (List separately in addition t | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| 36482 | ENDOVEN THER CHEM ADHES 1ST | Potential Experimental/Investigation/Unproven | 11/1/2024 |
| 36483 | ENDOVEN THER CHEM ADHES SBSQ | Potential Experimental/Investigation/Unproven | 11/1/2024 |
| 36514 | Therapeutic apheresis; for plasma pheresis | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 36516 | APHERESIS SELECTIVE | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 36516 | Therapeutic apheresis; with extracorporeal selective adsorption or selective filtration and plasma reinfusion | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 36522 | PHOTOPHERESIS | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 36522 | Photopheresis, extracorporeal | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 37215 | TRANSCATH STENT CCA W/EP | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| 37216 | TRANSCATH STENT CCA W/O | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| 37217 | STENT PLACEMT RETRO CAROTID | Spinal Services | 7/28/2023 |
| 37218 | STENT PLACEMT ANTE CAROTID | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| 37220 | ILIAC REVASC | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| 37221 | ILIAC REVASC W/STENT | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| 37222 | ILIAC REVASC ADD-ON | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| 37223 | ILIAC REVASC W/STENT ADD | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| 37224 | FEM/POPL REVAS W/TLA | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| 37225 | FEM/POPL REVAS W/ATHER | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| 37226 | FEM/POPL REVASC W/STENT | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| 37227 | FEM/POPL REVASC STNT & A | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| 37228 | TIB/PER REVASC W/TLA | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| 37229 | TIB/PER REVASC W/ATHER | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| 37230 | TIB/PER REVASC W/STENT | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| 37231 | TIB/PER REVASC STENT & A | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| 37232 | TIB/PER REVASC ADD-ON | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| 37233 | TIB/PER REVASC W/ATHER AD | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| 37234 | REVASC OPN/PRQ TIB/PERO S | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| 37235 | TIB/PER REVASC STNT & AT | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| 37238 | OPEN/PERQ PLACE STENT SAME | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| 37239 | OPEN/PERQ PLACE STENT EA ADD | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| 37241 | VASC EMBOLIZE/OCCCLUDE VENOUS | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| 37244 | VASC EMBOLIZE/OCCCLUDE BLEED | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |

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| 37248 | TRLUML BALO ANGIOP 1ST VEIN | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| 37249 | TRLUML BALO ANGIOP ADDL VEIN | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| 37500 | Vascular endoscopy, surgical, with ligation of perforator veins, subfascial (SEPS) | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 37501 | Unlisted vascular endoscopy procedure | Unlisted Procedures | 7/28/2023 |
| 37700 | Ligation and division long saphenous vein at saphenofemoral junction, or distal interruptions | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| 37718 | Ligation, division, and stripping, short saphenous vein | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| 37722 | Ligation, division, and stripping, long [greater] saphenous veins from saphenofemoral junction to knee or below | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| 37735 | Ligation and division and complete stripping of long or short saphenous veins with radical excision of ulcer and skin graft and/or interruption of communicating veins of lower leg with excision of deep fascia | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| 37760 | Ligation of perforator veins, subfascial, radical (Linton type), with or without skin graft, open | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 37761 | Ligate leg veins open | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 37765 | Stab phlebectomy of varicose veins, one extremity; 10-20 stab incisions | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| 37766 | Stab phlebectomy of varicose veins, one extremity; more than 20 incisions | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| 37780 | Ligation and division of short saphenous vein at saphenopopliteal junction | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| 37785 | Ligation, division, and/or excision of varicose vein cluster(s), one leg | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| 37790 | PENILE VENOUS OCCLUSION | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 37790 | Penile venous occlusive procedure | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 37799 | Unlisted procedure, vascular surgery | Unlisted Procedures | 11/1/2024 |
| 38589 | Unlisted laparoscopy procedure, lymphatic system | Unlisted Procedures | 11/20/2025 |
| 38999 | Unlisted procedure, hemic or lymphatic system | Unlisted Procedures | 11/20/2025 |
| 39499 | Unlisted procedure, mediastinum | Unlisted Procedures | 7/28/2023 |
| 40899 | Unlisted procedure, vestibule of mouth | Unlisted Procedures | 7/28/2023 |
| 41512 | TONGUE SUSPENSION] | Outpatient Procedures (Potentially Cosmetic) | 11/20/2025 |
| 41512 | Tongue base suspension, permanent suture technique | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 41530 | Submucosal ablation of the tongue base, radiofrequency, one or more sites, per session | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 41530 | TONGUE BASE VOL REDUCTIO | Outpatient Procedures (Potentially Cosmetic) | 11/20/2025 |
| 41599 | Unlisted procedure, tongue, floor of mouth | Unlisted Procedures | 11/20/2025 |
| 41820 | Gingivectomy, excision gingiva, each quadrant | Outpatient Procedures (Potentially Cosmetic) | 2/28/2025 |
| 42140 | Uvulectomy | Oral Pharynx | 9/12/2025 |
| 42160 | Destruction of lesion, palate or uvula (thermal, cryo or chemical) | Oral Pharynx | 11/20/2025 |
| 42299 | Unlisted procedure, palate, uvula | Unlisted Procedures | 11/20/2025 |
| 42950 | Pharyngoplasty (plastic or reconstructive operation on pharynx) | Oral Pharynx | 12/30/2024 |
| 43200 | ESOPHAGUS ENDOSCOPY | Outpatient Procedures (Potentially Cosmetic) | 3/28/2025 |
| 43210 | EGD ESOPHAGOGASTRIC FNDOPLSTY | Outpatient Procedures (Potentially Cosmetic) | 12/3/2021 |
| 43241 | UPPER GI ENDOSCOPY WITH | Outpatient Procedures (Potentially Cosmetic) | 2/25/2022 |
| 43241 | UPPER GI ENDOSCOPY WITH | Outpatient Procedures (Potentially Cosmetic) | 3/28/2025 |
| 43241 | UPPER GI ENDOSCOPY WITH | Therapeutic Radiology | 8/13/2021 |
| 43246 | PLACE GASTROSTOMY TUBE | Outpatient Procedures (Potentially Cosmetic) | 10/17/2025 |
| 43285 | RMVL ESOPHGL SPHNCTR DEV | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 43285 | RMVL ESOPHGL SPHNCTR DEV | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 43289 | Unlisted laparoscopy procedure, esophagus | Unlisted Procedures | 11/20/2025 |
| 43290 | Esophagogastroduodenoscopy, flexible, transoral; with deployment of intragastric bariatric balloon | Gastric Bypass | 11/20/2025 |
| 43291 | Esophagogastroduodenoscopy, flexible, transoral; with removal of intragastric bariatric balloon(s) | Gastric Bypass | 7/28/2023 |
| 43499 | Unlisted procedure, esophagus | Unlisted Procedures | 11/20/2025 |
| 43644 | LAP GASTRIC BYPASS/ROUX- | Gastric Bypass | 6/27/2025 |
| 43644 | Laparoscopy, surgical, gastric restrictive procedure; with gastric bypass and Roux-en-Y gastroenterostomy (roux limb 150 cm or less) | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 43645 | LAP GASTR BYPASS INCL SM | Gastric Bypass | 6/27/2025 |
| 43645 | Laparoscopy, surgical, gastric restrictive procedure; with gastric bypass and small intestine reconstruction to limit absorption | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 43647 | LAP IMPL ELECTRODE ANTRU | Gastric Bypass | 7/28/2023 |
| 43647 | Laparoscopy, surgical; implantation or replacement of gastric neurostimulator electrodes, antrum | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 43648 | LAP REVISE/REMY ELTRD AN | Gastric Bypass | 8/19/2025 |
| 43648 | Laparoscopy, surgical; revision or removal of gastric neurostimulator electrodes, antrum | Potential Experimental/Investigation/Unproven | 2/28/2025 |
| 43659 | Unlisted laparoscopy procedure, stomach | Unlisted Procedures | 11/20/2025 |
| 43775 | Lap sleeve gastrectomy | Gastric Bypass | 3/25/2022 |
| 43845 | Gastric restrictive procedure with partial gastrectomy, pylorus-preserving duodenal ileostomy and ileoileostomy (50 to 100 cm common channel) to limit absorption (biliopancreatic diversion with duodenal switch) | Potential Experimental/Investigation/Unproven | 3/28/2025 |
| 43855 | REVISE STOMACH-BOWEL FUSION | Gastric Bypass | 1/28/2022 |
| 43881 | Implantation or replacement of gastric neurostimulator electrodes, antrum, open | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 43999 | Unlisted procedure, stomach | Unlisted Procedures | 11/20/2025 |
| 44238 | Unlisted laparoscopy procedure, intestine (except rectum) | Unlisted Procedures | 11/20/2025 |
| 44705 | PREPARE FECAL MICROBIOTA | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 44705 | Preparation of fecal microbiota for instillation, including assessment of donor specimen | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 44899 | Unlisted procedure, Meckel's diverticulum and the mesentery | Unlisted Procedures | 7/28/2023 |
| 46601 | DIAGNOSTIC ANOSCOPY | Potential Experimental/Investigation/Unproven | 9/13/2020 |

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| 46607 | DIAGNOSTIC ANOSCOPY & BIOPSY | Potential Experimental/Investigation/Unproven | 9/13/2020 |
| 46948 | Hemorrhoidectomy, internal, by transanal hemorrhoidal dearterialization, 2 or more hemorrhoid columns/groups, including ultrasound guidance, with mucopexy, when performed | Potential Experimental/Investigation/Unproven | 3/25/2021 |
| 46999 | Unlisted procedure, anus | Unlisted Procedures | 11/20/2025 |
| 48999 | Unlisted procedure, pancreas | Unlisted Procedures | 11/20/2025 |
| 49659 | Unlisted laparoscopy procedure, hernioplasty, herniorrhaphy, herniotomy | Unlisted Procedures | 11/20/2025 |
| 49999 | Unlisted procedure, abdomen, peritoneum and omentum | Unlisted Procedures | 11/20/2025 |
| 50380 | REIMPLANTATION OF KIDNEY | Outpatient Procedures (Potentially Cosmetic) | 2/28/2025 |
| 50380 | Renal autotransplantation, reimplantation of kidney | Transplant | 5/27/2022 |
| 50549 | Unlisted laparoscopy procedure, renal | Unlisted Procedures | 7/28/2023 |
| 52441 | CYSTOURETHRO W/IMPLANT | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 52441 | CYSTOURETHRO W/IMPLANT | Outpatient Procedures (Potentially Cosmetic) | 12/2/2022 |
| 52442 | CYSTOURETHRO W/ADDL IMPLANT | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 52442 | CYSTOURETHRO W/ADDL IMPLANT | Outpatient Procedures (Potentially Cosmetic) | 12/2/2022 |
| 53451 | Periurethral transperineal adjustable balloon continence device; bilateral insertion, including cystourethroscopy and imaging guidance | Outpatient Procedures (Potentially Cosmetic) | 11/20/2025 |
| 53452 | Periurethral transperineal adjustable balloon continence device; unilateral insertion, including cystourethroscopy and imaging guidance | Outpatient Procedures (Potentially Cosmetic) | 11/20/2025 |
| 53453 | Periurethral transperineal adjustable balloon continence device; removal, each balloon | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 53454 | Periurethral transperineal adjustable balloon continence device; percutaneous adjustment of balloon(s) fluid volume | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 53854 | TRURL DSTRJ PRST8 TISS RF WV | Outpatient Procedures (Potentially Cosmetic) | 12/2/2022 |
| 53860 | Transurethral radiofrequency micro-remodeling of the female bladder neck and proximal urethra for stress urinary incontinence | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| 54408 | Repair of component(s) of a multi-component, inflatable penile prosthesis | Erectile Dysfunction | 9/12/2025 |
| 54410 | Removal and replacement of all components of a multi-component, inflatable penile prosthesis at the same operative session | Erectile Dysfunction | 9/12/2025 |
| 54416 | Removal and replacement of non-inflatable (semi-rigid) or inflatable (self-contained) penile prosthesis at the same operative session | Erectile Dysfunction | 9/12/2025 |
| 54417 | Removal and replacement of non-inflatable (semi-rigid) or inflatable (self-contained) penile prosthesis through an infected field at the same operative session, including irrigation and debridement of infected tissue | Erectile Dysfunction | 7/28/2023 |
| 54660 | Insertion of testicular prosthesis (separate procedure) | Outpatient Procedures (Potentially Cosmetic) | 12/2/2022 |
| 54699 | Unlisted laparoscopy procedure, testis | Unlisted Procedures | 7/28/2023 |
| 55874 | TPRNL PLMT BIODEGRDABL MATRL | Potential Experimental/Investigation/Unproven | 4/30/2021 |
| 55899 | Unlisted procedure, male genital system | Unlisted Procedures | 11/20/2025 |
| 57700 | Cerclage of uterine cervix, nonobstetrical | Potential Experimental/Investigation/Unproven | 9/12/2025 |
| 58578 | Unlisted laparoscopy procedure, uterus | Unlisted Procedures | 11/20/2025 |
| 58579 | Unlisted hysteroscopy procedure, uterus | Unlisted Procedures | 11/20/2025 |
| 58674 | LAPS ABLTJ UTERINE FIBROIDS | Potential Experimental/Investigation/Unproven | 12/2/2022 |
| 58999 | GENITAL SURGERY PROCEDUR | Unlisted Procedures | 11/20/2025 |
| 59898 | Unlisted laparoscopy procedure, maternity care and delivery | Unlisted Procedures | 7/28/2023 |
| 59899 | Unlisted procedure, maternity care and delivery | Unlisted Procedures | 10/27/2023 |
| 61624 | TRANS CATH OCCLUSION CNS | Spinal Services | 11/1/2024 |
| 61630 | INTRACRANIAL ANGIOPLASTY | Spinal Services | 11/1/2024 |
| 61635 | INTRACRAN ANGIOPLSTY W/S | Spinal Services | 11/1/2024 |
| 61863 | TWIST DRILL, BURR HOLE, CRANIOTOMY, OR CRANIECTOMY WITH STEREOTACTIC IMPLANTATION OF NEUROSTIMULATOR ELECTRODE ARRAY IN SUBCORTICAL SITE (E.G., THALAMUS, GLOBUS PALLIDUS, SUBTHALAMIC NUCLEUS, PERIVENTRICULAR, PERIAQUEDUCTAL GRAY), WITHOUT USE OF IN | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 61867 | TWIST DRILL, BURR HOLE, CRANIOTOMY, OR CRANIECTOMY WITH STEREOTACTIC IMPLANTATION OF NEUROSTIMULATOR ELECTRODE ARRAY IN SUBCORTICAL SITE (E.G., THALAMUS, GLOBUS PALLIDUS, SUBTHALAMIC NUCLEUS, PERIVENTRICULAR, PERIAQUEDUCTAL GRAY), WITH USE OF INTRA | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 61880 | Revision or removal of intracranial neurostimulator electrodes | Potential Experimental/Investigation/Unproven | 1/21/2021 |
| 61885 | INSRT/REDO NEUROSTIM 1 A | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 61885 | Insertion Or Replacement Of Cranial Neurostimulator Pulse Generator Or Receiver, Direct Or Inductive Coupling; With Connection To A Single Electrode Array | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 61886 | IMPLANT NEUROSTIM ARRAYS | Outpatient Procedures (Potentially Cosmetic) | 11/20/2025 |
| 61886 | Insertion Or Replacement Of Cranial Neurostimulator Pulse Receiver, Direct Or Inductive Coupling; With Connection To Two Or More Electrode Arrays | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 61888 | REVISE/REMOVE NEURORECEI | Outpatient Procedures (Potentially Cosmetic) | 12/30/2024 |
| 61888 | REVISION OR REMOVAL OF CRANIAL NEUROSTIMULATOR PULSE GENERATOR OR RECEIVER | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 61891 | Revision or replacement of skull-mounted cranial neurostimulator pulse generator or receiver with connection to depth and/or cortical strip electrode array(s) | Outpatient Procedures (Potentially Cosmetic) | 12/30/2024 |
| 62287 | Aspiration or decompression procedure, percutaneous, of nucleus pulposus of intervertebral disk, any method, single or multiple levels, lumbar (e.g., manual or automated percutaneous discectomy, percutaneous laser discectomy) | Spinal Services | 11/1/2024 |
| 62290 | Injection procedure for discography, each level; lumbar | Spinal Services | 11/1/2024 |
| 62291 | Injection procedure for discography, each level; cervical or thoracic | Spinal Services | 1/28/2022 |

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| 62326 | NJX INTERLAMINAR LMBR/SAC | Musculoskeletal (Buy Up) | 3/6/2026 |
| 62326 | NJX INTERLAMINAR LMBR/SAC | Musculoskeletal (Buy Up) | 11/4/2019 |
| 62380 | NDSC DCMPRN 1 NTRSPC LUMBAR | Potential Experimental/Investigation/Unproven | 11/1/2024 |
| 63005 | Laminectomy with exploration and/or decompression of spinal cord and/or cauda equina, without facetectomy, foraminotomy or diskectomy, (e.g., spinal stenosis), one or two vertebral segments; lumbar, except for spondylolisthesis | Spinal Services | 11/1/2024 |
| 63011 | REMOVAL OF SPINAL LAMINA | Spinal Services | 12/30/2024 |
| 63012 | Laminectomy with removal of abnormal facets and/or pars inter-articularis with decompression of cauda equina and nerve roots for spondylolisthesis, lumbar (Gill type procedure) | Spinal Services | 11/1/2024 |
| 63017 | Laminectomy with exploration and/or decompression of spinal cord and/or cauda equina, without facetectomy, foraminotomy or diskectomy, (e.g., spinal stenosis), more than 2 vertebral segments; lumbar | Spinal Services | 11/1/2024 |
| 63020 | NECK SPINE DISK SURGERY | Spinal Services | 11/1/2024 |
| 63030 | LOW BACK DISK SURGERY | Spinal Services | 11/1/2024 |
| 63030 | Laminotomy (hemilaminectomy), with decompression of nerve root(s), including partial facetectomy, foraminotomy and/or excision of herniated intervertebral disk; one interspace, lumbar (including open or endoscopically-assisted approach) | Spinal Services | 10/8/2021 |
| 63042 | LAMINOTOMY SINGLE LUMBAR | Spinal Services | 11/1/2024 |
| 63042 | Laminotomy (hemilaminectomy), with decompression of nerve root(s), including partial facetectomy, foraminotomy and/or excision of herniated intervertebral disk, reexploration, single interspace; lumbar | Spinal Services | 10/8/2021 |
| 63045 | REMOVAL OF SPINAL LAMINA | Spinal Services | 10/8/2021 |
| 63045 | REMOVAL OF SPINAL LAMINA | Spinal Services | 11/1/2024 |
| 63047 | Laminectomy, facetectomy and foraminotomy (unilateral or bilateral with decompression of spinal cord, cauda equina and/or nerve root(s), (e.g., spinal or lateral recess stenosis)), single vertebral segment; lumbar | Spinal Services | 11/1/2024 |
| 63048 | Laminectomy, facetectomy and foraminotomy (unilateral or bilateral with decompression of spinal cord, cauda equina and/or nerve root(s), (e.g., spinal or lateral recess stenosis)), single vertebral segment; each additional segment, cervical, thoracic, or | Spinal Services | 11/1/2024 |
| 63052 | Laminectomy, facetectomy, or foraminotomy (unilateral or bilateral with decompression of spinal cord, cauda equina and/or nerve root[s] [eg, spinal or lateral recess stenosis]), during posterior interbody arthrodesis, lumbar; single vertebral segment (List | Spinal Services | 2/25/2022 |
| 63053 | Laminectomy, facetectomy, or foraminotomy (unilateral or bilateral with decompression of spinal cord, cauda equina and/or nerve root[s] [eg, spinal or lateral recess stenosis]), during posterior interbody arthrodesis, lumbar; each additional segment (List | Spinal Services | 2/25/2022 |
| 63056 | Transpedicular approach with decompression of spinal cord, equina and/or nerve root(s) (e.g., herniated intervertebral disk), single segment; lumbar (including transfacet, or lateral extraforaminal approach) (e.g., far lateral herniated intervertebral dis | Spinal Services | 11/1/2024 |
| 63057 | Transpedicular approach with decompression of spinal cord, equina and/or nerve root(s) (e.g., herniated intervertebral disk), single segment; each additional segment, thoracic or lumbar (List separately in addition to code for primary procedure) | Spinal Services | 11/1/2024 |
| 63082 | REMOVE VERTEBRAL BODY AD | Spinal Services | 11/1/2024 |
| 63087 | Vertebral corpectomy (vertebral body resection), partial or complete, combined thoracolumbar approach with decompression of spinal cord, cauda equina or nerve root(s), lower thoracic or lumbar; single segment | Spinal Services | 11/1/2024 |
| 63088 | Vertebral corpectomy (vertebral body resection), partial or complete, combined thoracolumbar approach with decompression of spinal cord, cauda equina or nerve root(s), lower thoracic or lumbar; each additional segment (List separately in addition to code | Spinal Services | 11/1/2024 |
| 63090 | Vertebral corpectomy (vertebral body resection), partial or complete, transperitoneal or retroperitoneal approach with decompression of spinal cord, cauda equina or nerve root(s), lower thoracic, lumbar, or sacral; single segment | Spinal Services | 11/1/2024 |
| 63091 | Vertebral corpectomy (vertebral body resection), partial or complete, transperitoneal or retroperitoneal approach with decompression of spinal cord, cauda equina or nerve root(s), lower thoracic, lumbar, or sacral; each additional segment (List separately | Spinal Services | 11/1/2024 |
| 63267 | EXCISE INTRASPINAL LESIO | Spinal Services | 11/1/2024 |
| 63650 | Percutaneous Implantation Of Neurostimulator Or Electrode Array, Epidural | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 63655 | Laminectomy For Implantation Of Neurostimulator Electrodes, Plate/Paddle, Epidural | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 63685 | Insertion Or Replacment Of Spinal Neurostimulator Pulse Receiver, Direct Or Inductive Coupling | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 64553 | Percutaneous implantation of neurostimulator electrodes; cranial nerve | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 64555 | IMPLANT NEUROELECTRODES | Outpatient Procedures (Potentially Cosmetic) | 11/20/2025 |
| 64555 | Percutaneous Implantation Of Neurostimulator Electrodes; Peripheral Nerve [Excludes Sacral Nerve] | Potential Experimental/Investigation/Unproven | 9/12/2025 |
| 64561 | IMPLANT NEUROELECTRODES | Spinal Services | 11/20/2025 |
| 64561 | Percutaneous implantation of neurostimulator electrodes; sacral nerve (transforaminal placement) | Potential Experimental/Investigation/Unproven | 12/3/2021 |

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| 64566 | NEUROELTRD STIM POST TIBIAL | Spinal Services | 7/28/2023 |
| 64566 | Posterior tibial neurostimulation, percutaneous needle electrode, single treatment, includes programming | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 64568 | Incision for implantation of cranial nerve (eg, vagus nerve) neurostimulator electrode array and pulse generator | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 64569 | REVISE/REPL VAGUS N ELTRD | Spinal Services | 7/28/2023 |
| 64569 | Revision or replacement of cranial nerve (eg, vagus nerve) neurostimulator electrode array, including connection to existing pulse generator | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 64575 | IMPLANT NEUROELECTRODES | Spinal Services | 11/20/2025 |
| 64575 | Incision for implantation of neurostimulator electrodes; peripheral nerve (excludes sacral nerve) | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 64581 | IMPLANT NEUROELECTRODES | Outpatient Procedures (Potentially Cosmetic) | 12/3/2021 |
| 64581 | IMPLANT NEUROELECTRODES | Spinal Services | 11/20/2025 |
| 64581 | Incision for implantation of neurostimulator electrodes; sacral nerve (transforaminal placement) | Potential Experimental/Investigation/Unproven | 6/25/2021 |
| 64590 | INSRT/REDO PERPH N GENER | Outpatient Procedures (Potentially Cosmetic) | 11/20/2025 |
| 64590 | Insertion or replacement of peripheral or gastric neurostimulator pulse generator or receiver, direct or inductive coupling | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 64596 | Insertion or replacement of percutaneous electrode array, peripheral nerve, with integrated neurostimulator, including imaging guidance, when performed; initial electrode array | Outpatient Procedures (Potentially Cosmetic) | 11/20/2025 |
| 64597 | Insertion or replacement of percutaneous electrode array, peripheral nerve, with integrated neurostimulator, including imaging guidance, when performed; each additional electrode array (List separately in addition to code for primary procedure) | Outpatient Procedures (Potentially Cosmetic) | 11/20/2025 |
| 64598 | Revision or removal of neurostimulator electrode array, peripheral nerve, with integrated neurostimulator | Outpatient Procedures (Potentially Cosmetic) | 5/31/2024 |
| 64611 | CHEMODENERV SALIV GLANDS | Outpatient Procedures (Potentially Cosmetic) | 10/17/2025 |
| 64611 | Chemodeneration of parotid and submandibular salivary glands, bilateral | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 64612 | Chemodeneration of muscle(s); muscle(s) innervated by facial nerve (e.g., for blepharospasm, hemifacial spasm) | Outpatient Procedures (Potentially Cosmetic) | 10/17/2025 |
| 64615 | CHEMODENERV MUSC MIGRAIN | Outpatient Procedures (Potentially Cosmetic) | 10/17/2025 |
| 64615 | Chemodeneration of muscle(s); muscle(s) innervated by facial, trigeminal, cervical spinal and accessory nerves, bilateral (eg, for chronic migraine) | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 64620 | INJECTION TREATMENT OF N | Musculoskeletal (Buy Up) | 12/29/2021 |
| 64620 | INJECTION TREATMENT OF N | Outpatient Procedures (Potentially Cosmetic) | 12/3/2021 |
| 64620 | INJECTION TREATMENT OF N | Outpatient Procedures (Potentially Cosmetic) | 12/30/2024 |
| 64624 | Destruction by neurolytic agent, genicular nerve branches including imaging guidance, when performed | Potential Experimental/Investigation/Unproven | 4/10/2020 |
| 64628 | Thermal destruction of intraosseous basivertebral nerve, including all imaging guidance; first 2 vertebral bodies, lumbar or sacral | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| 64629 | Thermal destruction of intraosseous basivertebral nerve, including all imaging guidance; each additional vertebral body, lumbar or sacral (List separately in addition to code for primary procedure) | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| 64804 | REMOVE SYMPATHETIC NERVE | Outpatient Procedures (Potentially Cosmetic) | 2/28/2025 |
| 64804 | Sympathectomy, cervicothoracic | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 64912 | NRV RPR W/NRV ALGRFT 1ST | Potential Experimental/Investigation/Unproven | 9/12/2025 |
| 64912 | NRV RPR W/NRV ALGRFT 1ST | Outpatient Procedures (Potentially Cosmetic) | 11/20/2025 |
| 64999 | Unlisted procedure, nervous system | Unlisted Procedures | 11/1/2024 |
| 65710 | CORNEAL TRANSPLANT | Outpatient Procedures (Potentially Cosmetic) | 9/12/2025 |
| 65710 | Keratoplasty (corneal transplant); anterior lamellar | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 65765 | Keratophakia | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 65767 | Epikeratoplasty | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 65771 | Radial Keratotomy | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 65785 | Implantation of intrastromal corneal ring segments | Outpatient Procedures (Potentially Cosmetic) | 11/20/2025 |
| 66174 | Transluminal dilation of aqueous outflow canal; without retention of device or stent | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 66175 | Transluminal dilation of aqueous outflow canal; with retention of device or stent | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 66184 | REVISION OF AQUEOUS SHUNT | Outpatient Procedures (Potentially Cosmetic) | 12/30/2024 |
| 66683 | IMPLANTATION IRIS PROSTHESIS | Outpatient Procedures (Potentially Cosmetic) | 11/20/2025 |
| 66999 | Unlisted procedure, anterior segment of eye | Unlisted Procedures | 11/20/2025 |
| 67399 | Unlisted procedure, ocular muscle | Unlisted Procedures | 7/28/2023 |
| 67599 | Unlisted procedure, orbit | Unlisted Procedures | 7/28/2023 |
| 67909 | Reduction of overcorrection of ptosis | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 69705 | NASOPHARYNGOSCOPY, SURGICAL, WITH DILATION OF EUSTACHIAN TUBE (IE, BALLOON DILATION); UNILATERAL | Potential Experimental/Investigation/Unproven | 9/12/2025 |
| 69706 | NASOPHARYNGOSCOPY, SURGICAL, WITH DILATION OF EUSTACHIAN TUBE (IE, BALLOON DILATION); BILATERAL | Potential Experimental/Investigation/Unproven | 11/20/2025 |
| 69715 | Implantation Osseointegrated Implant, Temporal Bone, With Percutaneous Attachment To External Speech Processor/Cochlear Stimulator With Mastoidectomy | Ear Devices/Cochlear Implant | 1/28/2022 |
| 69717 | Replacement (Including Removal Of Existing Device), Osseointegrated Implant, Temporal Bone, With Percutaneous Attachment To External Speech Processor/Cochlear Stimulator, Without Mastoidectomy | Ear Devices/Cochlear Implant | 7/28/2023 |
| 69718 | Replacement (Including Removal Of Existing Device), Osseointegrated Implant, Temporal Bone With Percutaneous Attachment To External Speech Processor/Cochlear Stimulator, With Mastoidectomy | Ear Devices/Cochlear Implant | 1/28/2022 |

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| 69719 | Revision or replacement (including removal of existing device), osseointegrated implant, skull; with magnetic transcutaneous attachment to external speech processor | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 69729 | Implantation, osseointegrated implant, skull; with magnetic transcutaneous attachment to external speech processor, outside of the mastoid and resulting in removal of greater than or equal to 100 sq mm surface area of bone deep to the outer cranial cortex | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 69730 | Replacement (including removal of existing device), osseointegrated implant, skull; with magnetic transcutaneous attachment to external speech processor, outside the mastoid and involving a bony defect greater than or equal to 100 sq mm surface area of bo | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 69799 | Unlisted procedure, middle ear | Unlisted Procedures | 11/20/2025 |
| 69979 | Unlisted procedure, temporal bone, middle fossa approach | Unlisted Procedures | 7/28/2023 |
| 70450 | Computed tomography (CT), head or brain; without contrast material | Diagnostic Radiology | 5/30/2025 |
| 70460 | Computed tomography (CT), head or brain; with contrast material(s) | Diagnostic Radiology | 5/30/2025 |
| 70470 | Computed tomography (CT), head or brain; without contrast material, followed by contrast material(s) and further sections | Diagnostic Radiology | 5/30/2025 |
| 70480 | Computed tomography (CT), orbit, sella, or posterior fossa or outer, middle, or inner ear; without contrast material | Diagnostic Radiology | 5/30/2025 |
| 70481 | Computed tomography (CT), orbit, sella, or posterior fossa or outer, middle, or inner ear; with contrast material(s) | Diagnostic Radiology | 5/30/2025 |
| 70482 | Computed tomography (CT), orbit, sella, or posterior fossa or outer, middle, or inner ear; without contrast material, followed by contrast material(s) and further sections | Diagnostic Radiology | 5/30/2025 |
| 70486 | Computed tomography (CT), maxillofacial area; without contrast material | Diagnostic Radiology | 5/30/2025 |
| 70487 | Computed tomography (CT), maxillofacial area; with contrast material(s) | Diagnostic Radiology | 5/30/2025 |
| 70488 | Computed tomography (CT), maxillofacial area; without contrast material, followed by contrast material(s) and further sections | Diagnostic Radiology | 5/30/2025 |
| 70496 | CTA HEAD, with contrast material(s), including noncontrast images, if performed, and image post-processing. | Diagnostic Radiology | 5/30/2025 |
| 70544 | MRA, head; without contrast materials | Diagnostic Radiology | 5/30/2025 |
| 70545 | MRA, head; with contrast material(s) | Diagnostic Radiology | 5/30/2025 |
| 70546 | MRA, head; without contrast material(s), followed by contrast material(s) and further sequences | Diagnostic Radiology | 5/30/2025 |
| 70551 | MRI, brain, including brain stem; without contrast material(s) | Diagnostic Radiology | 5/30/2025 |
| 70552 | MRI brain, including brain stem; with contrast material(s) | Diagnostic Radiology | 5/30/2025 |
| 70553 | MRI, brain, including brain stem; without contrast material(s), followed by contrast material(s) and further sequences | Diagnostic Radiology | 5/30/2025 |
| 70554 | Magnetic resonance imaging, brain, functional MRI; including test selection and administration of repetitive body part movement and / or visual stimulation, not requiring physician or psychologist administration | Diagnostic Radiology | 5/30/2025 |
| 70555 | Magnetic resonance imaging, brain, functional MRI; requiring physician or psychologist administration of entire neurofunctional testing | Diagnostic Radiology | 5/30/2025 |
| 71271 | COMPUTED TOMOGRAPHY, THORAX, LOW DOSE FOR LUNG CANCER SCREENING, WITHOUT CONTRAST MATERIAL(S) | Diagnostic Radiology | 2/28/2025 |
| 72285 | Discography, cervical or thoracic, radiological supervision and interpretation | Spinal Services | 1/28/2022 |
| 74261 | Ct colonography, w/o dye | Diagnostic Radiology | 5/30/2025 |
| 74262 | Ct colonography, w/dye | Diagnostic Radiology | 5/30/2025 |
| 74263 | Ct colonography, screen | Diagnostic Radiology | 5/30/2025 |
| 75557 | Cardiac magnetic resonance imaging for morphology and function without contrast material | Diagnostic Radiology | 5/30/2025 |
| 75559 | Cardiac magnetic resonance imaging for morphology and function without contrast material; with stress imaging | Diagnostic Radiology | 5/30/2025 |
| 75561 | Cardiac magnetic resonance imaging for morphology and function without contrast material(s) and further sequences | Diagnostic Radiology | 5/30/2025 |
| 75563 | Cardiac magnetic resonance imaging for morphology and function without contrast material(s) and further sequences; with stress imaging | Diagnostic Radiology | 5/30/2025 |
| 75565 | Cardiac magnetic resonance imaging for velocity flow mapping (List separately in addition to code for primary procedure) | Diagnostic Radiology | 5/30/2025 |
| 75571 | Computed tomography, heart, without contrast material, with quantitative evaluation of coronary calcium | Diagnostic Radiology | 5/30/2025 |
| 75572 | Computed tomography, heart, with contrast material, for evaluation of cardiac structure and morphology (including 3D image postprocessing, assessment of cardiac function, and evaluation of venous structures, if performed) | Diagnostic Radiology | 5/30/2025 |
| 75573 | Computed tomography, heart, with contrast material, for evaluation of cardiac structure and morphology in the setting of congenital heart disease (including 3D image postprocessing, assessment of LV cardiac function, RV structure and function and evaluati | Diagnostic Radiology | 5/30/2025 |
| 75574 | Computed tomographic angiography, heart, coronary arteries and bypass grafts (when present), with contrast material, including 3D image postprocessing (including evaluation of cardiac structure and morphology, assessment of cardiac function, and evaluatio | Diagnostic Radiology | 1/21/2021 |

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| 75580 | Noninvasive estimate of coronary fractional flow reserve (FFR) derived from augmentative software analysis of the data set from a coronary computed tomography angiography, with interpretation and report by a physician or other qualified health care profes | Diagnostic Radiology | 3/8/2024 |
| 76377 | 3D rendering with interpretation and reporting of computed tomography, magnetic resonance imaging, ultrasound, or other tomographic modality; requiring image postprocessing on an independent workstation | Diagnostic Radiology | 1/27/2023 |
| 76380 | Computed tomography (CT), limited or localized follow-up study | Diagnostic Radiology | 5/30/2025 |
| 76499 | Unlisted diagnostic radiographic procedure | Unlisted Procedures | 7/28/2023 |
| 77011 | CT SCAN FOR LOCALIZATION | Diagnostic Radiology | 12/3/2021 |
| 77011 | CT SCAN FOR LOCALIZATION | Outpatient Procedures (Potentially Cosmetic) | 12/30/2024 |
| 77078 | Computed tomography, bone mineral density study, 1 or more sites; axial skeleton (eg, hips, pelvis, spine) | Diagnostic Radiology | 2/28/2025 |
| 77293 | RESPIRATOR MOTION MGMT SIMUL | Outpatient Procedures (Potentially Cosmetic) | 12/3/2021 |
| 77373 | Stereotactic body radiation therapy, treatment delivery, per fraction to 1 or more lesions, including image guidance, entire course not to exceed 5 fractions | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 77750 | INFUSE RADIOACTIVE MATER | Therapeutic Radiology | 11/20/2025 |
| 77799 | Unlisted procedure, clinical brachytherapy | Unlisted Procedures | 6/27/2025 |
| 78199 | Unlisted hematopoietic, reticuloendothelial and lymphatic procedure, diagnostic nuclear medicine | Unlisted Procedures | 7/28/2023 |
| 78399 | Unlisted musculoskeletal procedure, diagnostic nuclear medicine | Unlisted Procedures | 7/28/2023 |
| 78451 | Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); single study, at rest or stress (| Diagnostic Radiology | 5/30/2025 |
| 78452 | Myocardial perfusion imaging, tomographic (SPECT) (including attenuation correction, qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or | Diagnostic Radiology | 5/30/2025 |
| 78453 | Myocardial perfusion imaging, planar (including qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); single study, at rest or stress (exercise or pharmacologic) | Diagnostic Radiology | 5/30/2025 |
| 78454 | Myocardial perfusion imaging, planar (including qualitative or quantitative wall motion, ejection fraction by first pass or gated technique, additional quantification, when performed); multiple studies, at rest and/or stress (exercise or pharmacologic) an | Diagnostic Radiology | 5/30/2025 |
| 78456 | Acute venous thrombosis imaging, peptide | Potential Experimental/Investigation/Unproven | 2/28/2025 |
| 78466 | HEART INFARCT IMAGE | Diagnostic Radiology | 5/30/2025 |
| 78468 | HEART INFARCT IMAGE (EF) | Diagnostic Radiology | 5/30/2025 |
| 78469 | HEART INFARCT IMAGE (3D) | Diagnostic Radiology | 5/30/2025 |
| 78472 | GATED HEART PLANAR SINGL | Diagnostic Radiology | 5/30/2025 |
| 78473 | GATED HEART MULTIPLE | Diagnostic Radiology | 5/30/2025 |
| 78481 | HEART FIRST PASS SINGLE | Diagnostic Radiology | 5/30/2025 |
| 78483 | HEART FIRST PASS MULTIPL | Diagnostic Radiology | 5/30/2025 |
| 78494 | HEART IMAGE SPECT | Diagnostic Radiology | 5/30/2025 |
| 78496 | HEART FIRST PASS ADD-ON | Diagnostic Radiology | 5/30/2025 |
| 78499 | CARDIOVASCULAR NUCLEAR E | Diagnostic Radiology | 5/30/2025 |
| 79101 | NUCLEAR RX IV ADMIN | Therapeutic Radiology | 4/10/2020 |
| 79403 | HEMATOPOIETIC NUCLEAR TX | Therapeutic Radiology | 4/10/2020 |
| 81161 | DMD (dystrophin) (eg, Duchenne/Becker muscular dystrophy) deletion analysis, and duplication analysis, if performed | Potential Experimental/Investigation/Unproven | 9/13/2020 |
| 81162 | BRCA1, BRCA2 (breast cancer 1 and 2) [eg, hereditary breast and ovarian cancer] gene analysis; full sequence analysis and full duplication/deletion analysis | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| 81162 | BRCA1&2 SEQ & FULL DUP/DEL | MOLECULAR LAB | 4/1/2026 |
| 81163 | BRCA1&2 GENE FULL SEQ ALYS | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| 81163 | BRCA1&2 GENE FULL SEQ ALYS | MOLECULAR LAB | 4/1/2026 |
| 81164 | BRCA1&2 GEN FUL DUP/DEL ALYS | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| 81164 | BRCA1&2 GEN FUL DUP/DEL ALYS | MOLECULAR LAB | 4/1/2026 |
| 81165 | BRCA1 GENE FULL SEQ ALYS | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| 81165 | BRCA1 GENE FULL SEQ ALYS | MOLECULAR LAB | 4/1/2026 |
| 81166 | BRCA1 GENE FULL DUP/DEL ALYS | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| 81166 | BRCA1 GENE FULL DUP/DEL ALYS | MOLECULAR LAB | 4/1/2026 |
| 81167 | BRCA2 GENE FULL DUP/DEL ALYS | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| 81167 | BRCA2 GENE FULL DUP/DEL ALYS | MOLECULAR LAB | 4/1/2026 |
| 81170 | ABL1 (ABL proto-oncogene 1, non-receptor tyrosine kinase) [eg, acquired imatinib tyrosine kinase inhibitor resistance], gene analysis, variants in the kinase domain | Outpatient Procedures (Potentially Cosmetic) | 4/10/2020 |
| 81171 | AFF2 GENE DETC ABNOR ALLELES | Outpatient Procedures (Potentially Cosmetic) | 9/13/2020 |
| 81172 | AFF2 GENE CHARAC ALLELES | Outpatient Procedures (Potentially Cosmetic) | 9/13/2020 |
| 81173 | AR GENE FULL GENE SEQUENCE | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 81174 | AR GENE KNOWN FAMIL VARIANT | Outpatient Procedures (Potentially Cosmetic) | 9/13/2020 |
| 81176 | ASXL1 GENE TARGET SEQ ALYS | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 81177 | ATN1 GENE DETC ABNOR ALLELES | Outpatient Procedures (Potentially Cosmetic) | 9/13/2020 |
| 81178 | ATXN1 GENE DETC ABNOR ALLELE | Outpatient Procedures (Potentially Cosmetic) | 9/13/2020 |
| 81179 | ATXN2 GENE DETC ABNOR ALLELE | Outpatient Procedures (Potentially Cosmetic) | 9/13/2020 |
| 81180 | ATXN3 GENE DETC ABNOR ALLELE | Outpatient Procedures (Potentially Cosmetic) | 9/13/2020 |
| 81181 | ATXN7 GENE DETC ABNOR ALLELE | Outpatient Procedures (Potentially Cosmetic) | 9/13/2020 |
| 81182 | ATXN80S GEN DETC ABNOR ALLEL | Outpatient Procedures (Potentially Cosmetic) | 9/13/2020 |
| 81183 | ATXN10 GENE DETC ABNOR ALLEL | Outpatient Procedures (Potentially Cosmetic) | 9/13/2020 |

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| 81184 | CACNA1A GEN DETC ABNOR ALLEL | Outpatient Procedures (Potentially Cosmetic) | 9/13/2020 |
| 81185 | CACNA1A GENE FULL GENE SEQ | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 81186 | CACNA1A GEN KNOWN FAMIL VRNT | Outpatient Procedures (Potentially Cosmetic) | 9/13/2020 |
| 81187 | CNBP GENE DETC ABNOR ALLELE | Outpatient Procedures (Potentially Cosmetic) | 9/13/2020 |
| 81188 | CSTB GENE DETC ABNOR ALLELE | Outpatient Procedures (Potentially Cosmetic) | 9/13/2020 |
| 81189 | CSTB GENE FULL GENE SEQUENCE | Outpatient Procedures (Potentially Cosmetic) | 9/13/2020 |
| 81190 | CSTB GENE KNOWN FAMIL VRNT | Outpatient Procedures (Potentially Cosmetic) | 9/13/2020 |
| 81201 | APC (adenomatous polyposis coli) (eg, familial adenomatosis polyposis [FAP], attenuated FAP) gene analysis; full gene sequence | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| 81202 | APC (adenomatous polyposis coli) (eg, familial adenomatosis polyposis [FAP], attenuated FAP) gene analysis; known familial variants | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| 81203 | APC (adenomatous polyposis coli) (eg, familial adenomatosis polyposis [FAP], attenuated FAP) gene analysis; duplication/deletion variants | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| 81204 | AR GENE CHARAC ALLELES | Outpatient Procedures (Potentially Cosmetic) | 9/13/2020 |
| 81210 | BRAF (v-raf murine sarcoma viral oncogene homolog B1) (eg, colon cancer), gene analysis, V600E variant | Potential Experimental/Investigation/Unproven | 4/12/2024 |
| 81212 | BRCA1, BRCA2 (breast cancer 1 and 2) (eg, hereditary breast and ovarian cancer) gene analysis; 185delAG, 5385insC, 6174delT variants | Potential Experimental/Investigation/Unproven | 11/1/2024 |
| 81212 | BRCA1&2 185&5385&6174 VA | MOLECULAR LAB | 4/1/2026 |
| 81215 | BRCA1 (breast cancer 1) (eg, hereditary breast and ovarian cancer) gene analysis; known familial variant | Potential Experimental/Investigation/Unproven | 11/1/2024 |
| 81215 | BRCA1 GENE KNOWN FAM VAR | MOLECULAR LAB | 4/1/2026 |
| 81216 | BRCA2 (breast cancer 2) (eg, hereditary breast and ovarian cancer) gene analysis; full sequence analysis | Potential Experimental/Investigation/Unproven | 11/1/2024 |
| 81216 | BRCA2 GENE FULL SEQUENCE | MOLECULAR LAB | 4/1/2026 |
| 81217 | BRCA2 (breast cancer 2) (eg, hereditary breast and ovarian cancer) gene analysis; known familial variant | Potential Experimental/Investigation/Unproven | 11/1/2024 |
| 81217 | BRCA2 GENE KNOWN FAM VAR | MOLECULAR LAB | 4/1/2026 |
| 81219 | CALR (calreticulin) (eg, myeloproliferative disorders), gene analysis, common variants in exon 9 | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 81223 | CFTR GENE FULL SEQUENCE | Potential Experimental/Investigation/Unproven | 11/1/2024 |
| 81226 | CYP2D6 (cytochrome P450, family 2, subfamily D, polypeptide 6) (eg, drug metabolism), gene analysis, common variants (eg, *2, *3, *4, *5, *6, *9, *10, *17, *19, *29, *35, *41, *1XN, *2XN, *4XN) | Potential Experimental/Investigation/Unproven | 11/1/2024 |
| 81228 | Cytogenomic constitutional (genome-wide) microarray analysis; interrogation of genomic regions for copy number variants (eg, Bacterial Artificial Chromosome [BAC] or oligo-based comparative genomic hybridization [CGH] microarray analysis) | Potential Experimental/Investigation/Unproven | 11/1/2024 |
| 81229 | Cytogenomic constitutional (genome-wide) microarray analysis; interrogation of genomic regions for copy number and single nucleotide polymorphism (SNP) variants for chromosomal abnormalities | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| 81232 | DPYD GENE COMMON VARIANTS | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 81233 | BTX GENE COMMON VARIANTS | Outpatient Procedures (Potentially Cosmetic) | 4/12/2024 |
| 81234 | DMPK GENE DETC ABNOR ALLELE | Outpatient Procedures (Potentially Cosmetic) | 9/13/2020 |
| 81235 | EGFR (epidermal growth factor receptor) (eg, non-small cell lung cancer) gene analysis, common variants (eg, exon 19 LREA deletion, L858R, T790M, G719A, G719S, L861Q) | Potential Experimental/Investigation/Unproven | 11/1/2024 |
| 81236 | EZH2 GENE FULL GENE SEQUENCE | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 81237 | EZH2 GENE COMMON VARIANTS | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 81239 | DMPK GENE CHARAC ALLELES | Outpatient Procedures (Potentially Cosmetic) | 9/13/2020 |
| 81240 | F2 (prothrombin, coagulation factor II) (eg, hereditary hypercoagulability) gene analysis, 20210G>A variant | Potential Experimental/Investigation/Unproven | 9/13/2020 |
| 81241 | F5 (coagulation Factor V) (eg, hereditary hypercoagulability) gene analysis, Leiden variant | Potential Experimental/Investigation/Unproven | 9/13/2020 |
| 81243 | FMR1 GENE DETECTION | Potential Experimental/Investigation/Unproven | 9/13/2020 |
| 81244 | FMR1 GENE CHARACTERIZATI | Potential Experimental/Investigation/Unproven | 9/13/2020 |
| 81246 | FLT3 GENE ANALYSIS | Outpatient Procedures (Potentially Cosmetic) | 4/10/2020 |
| 81252 | GJB2 (gap junction protein, beta 2, 26kDa; connexin 26) (eg, nonsyndromic hearing loss) gene analysis; full gene sequence | Potential Experimental/Investigation/Unproven | 9/13/2020 |
| 81253 | GJB2 (gap junction protein, beta 2, 26kDa; connexin 26) (eg, nonsyndromic hearing loss) gene analysis; known familial variants | Potential Experimental/Investigation/Unproven | 9/13/2020 |
| 81254 | GJB6 (gap junction protein, beta 6, 30kDa, connexin 30) (eg, nonsyndromic hearing loss) gene analysis, common variants (eg, 309kb [del(GJB6-D13S1830)] and 232kb [del(GJB6-D13S1854)]) | Potential Experimental/Investigation/Unproven | 9/13/2020 |
| 81271 | HIT GENE DETC ABNOR ALLELES | Outpatient Procedures (Potentially Cosmetic) | 9/13/2020 |
| 81274 | HIT GENE CHARAC ALLELES | Outpatient Procedures (Potentially Cosmetic) | 10/8/2021 |
| 81277 | CYTOGENOMIC NEO MICRORA ALYS | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| 81277 | Cytogenomic neoplasia (genome-wide) microarray analysis, interrogation of genomic regions for copy number and loss-of-heterozygosity variants for chromosomal abnormalities | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 81284 | FXN GENE DETC ABNOR ALLELES | Outpatient Procedures (Potentially Cosmetic) | 9/13/2020 |
| 81285 | FXN GENE CHARAC ALLELES | Outpatient Procedures (Potentially Cosmetic) | 9/13/2020 |
| 81286 | FXN GENE FULL GENE SEQUENCE | Outpatient Procedures (Potentially Cosmetic) | 9/13/2020 |
| 81287 | MGMT GENE METHYLATION ANAL | Potential Experimental/Investigation/Unproven | 2/25/2022 |
| 81288 | MLH1 GENE | Outpatient Procedures (Potentially Cosmetic) | 4/12/2024 |
| 81289 | FXN GENE KNOWN FAMIL VARIANT | Outpatient Procedures (Potentially Cosmetic) | 9/13/2020 |
| 81292 | MLH1 (mutL homolog 1, colon cancer, nonpolyposis type 2) (eg, hereditary non-polyposis colorectal cancer, Lynch syndrome) gene analysis; full sequence analysis | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 81292 | MLH1 GENE FULL SEQ | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |

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| 81293 | MLH1 (mutL homolog 1, colon cancer, nonpolyposis type 2) (eg, hereditary non-polyposis colorectal cancer, Lynch syndrome) gene analysis; known familial variants | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 81293 | MLH1 GENE KNOWN VARIANTS | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| 81294 | MLH1 (mutL homolog 1, colon cancer, nonpolyposis type 2) (eg, hereditary non-polyposis colorectal cancer, Lynch syndrome) gene analysis; duplication/deletion variants | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 81294 | MLH1 GENE DUP/DELETE VAR | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| 81295 | MSH2 (mutS homolog 2, colon cancer, nonpolyposis type 1) (eg, hereditary non-polyposis colorectal cancer, Lynch syndrome) gene analysis; full sequence analysis | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 81295 | MSH2 GENE FULL SEQ | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| 81296 | MSH2 (mutS homolog 2, colon cancer, nonpolyposis type 1) (eg, hereditary non-polyposis colorectal cancer, Lynch syndrome) gene analysis; known familial variants | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 81296 | MSH2 GENE KNOWN VARIANTS | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| 81297 | MSH2 (mutS homolog 2, colon cancer, nonpolyposis type 1) (eg, hereditary non-polyposis colorectal cancer, Lynch syndrome) gene analysis; duplication/deletion variants | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 81297 | MSH2 GENE DUP/DELETE VAR | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| 81298 | MSH6 (mutS homolog 6 [E. coli]) (eg, hereditary non-polyposis colorectal cancer, Lynch syndrome) gene analysis; full sequence analysis | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 81298 | MSH6 GENE FULL SEQ | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| 81299 | MSH6 (mutS homolog 6 [E. coli]) (eg, hereditary non-polyposis colorectal cancer, Lynch syndrome) gene analysis; known familial variants | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 81299 | MSH6 GENE KNOWN VARIANTS | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| 81300 | MSH6 (mutS homolog 6 [E. coli]) (eg, hereditary non-polyposis colorectal cancer, Lynch syndrome) gene analysis; duplication/deletion variants | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 81300 | MSH6 GENE DUP/DELETE VAR | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| 81301 | Microsatellite instability analysis (eg, hereditary nonpolyposis colorectal cancer, Lynch syndrome) of markers for mismatch repair deficiency (eg, BAT25, BAT26), includes comparison of neoplastic and normal tissue, if performed | Potential Experimental/Investigation/Unproven | 4/10/2020 |
| 81302 | MECP2 (methyl CpG binding protein 2) (eg, Rett syndrome) gene analysis; full sequence analysis | Potential Experimental/Investigation/Unproven | 9/13/2020 |
| 81304 | MECP2 (methyl CpG binding protein 2) (eg, Rett syndrome) gene analysis; duplication/deletion variants | Potential Experimental/Investigation/Unproven | 9/13/2020 |
| 81305 | MYD88 GENE P.LEU265PRO VRNT | Outpatient Procedures (Potentially Cosmetic) | 4/10/2020 |
| 81306 | NUDT15 GENE COMMON VARIANTS | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 81307 | PALB2 (partner and localizer of BRCA2) (eg, breast and pancreatic cancer) gene analysis; full gene sequence | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 81307 | PALB2 GENE FULL GENE SEQ | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| 81308 | PALB2 (partner and localizer of BRCA2) (eg, breast and pancreatic cancer) gene analysis; known familial variant | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 81308 | PALB2 GENE KNOWN FAMIL VRNT | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| 81309 | PIK3CA (phosphatidylinositol-4, 5-bisphosphate 3-kinase, catalytic subunit alpha) (eg, colorectal and breast cancer) gene analysis, targeted sequence analysis (eg, exons 7, 9, 20) | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 81309 | PIK3CA GENE TRGT SEQ ALYS | Outpatient Procedures (Potentially Cosmetic) | 4/12/2024 |
| 81312 | PABPN1 GENE DETC ABNOR ALLEL | Outpatient Procedures (Potentially Cosmetic) | 9/13/2020 |
| 81313 | PCA3/KLK3 ANTIGEN | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| 81317 | PMS2 (postmeiotic segregation increased 2 [S. cerevisiae]) (eg, hereditary non-polyposis colorectal cancer, Lynch syndrome) gene analysis; full sequence analysis | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 81317 | PMS2 GENE FULL SEQ ANALY | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| 81318 | PMS2 (postmeiotic segregation increased 2 [S. cerevisiae]) (eg, hereditary non-polyposis colorectal cancer, Lynch syndrome) gene analysis; known familial variants | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 81318 | PMS2 KNOWN FAMILIAL VARI | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| 81319 | PMS2 (postmeiotic segregation increased 2 [S. cerevisiae]) (eg, hereditary non-polyposis colorectal cancer, Lynch syndrome) gene analysis; duplication/deletion variants | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 81319 | PMS2 GENE DUP/DELET VARI | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| 81320 | PLCG2 GENE COMMON VARIANTS | Outpatient Procedures (Potentially Cosmetic) | 4/10/2020 |
| 81321 | PTEN (phosphatase and tensin homolog) (eg, Cowden syndrome, PTEN hamartoma tumor syndrome) gene analysis; full sequence analysis | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 81321 | PTEN GENE FULL SEQUENCE | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| 81322 | PTEN (phosphatase and tensin homolog) (eg, Cowden syndrome, PTEN hamartoma tumor syndrome) gene analysis; known familial variant | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 81322 | PTEN GENE KNOWN FAM VARI | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| 81323 | PTEN (phosphatase and tensin homolog) (eg, Cowden syndrome, PTEN hamartoma tumor syndrome) gene analysis; duplication/deletion variant | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 81323 | PTEN GENE DUP/DELET VARI | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| 81324 | PMP22 (peripheral myelin protein 22) (eg, Charcot-Marie-Tooth, hereditary neuropathy with liability to pressure palsies) gene analysis; duplication/deletion analysis | Potential Experimental/Investigation/Unproven | 9/13/2020 |

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| 81325 | PMP22 (peripheral myelin protein 22) (eg, Charcot-Marie-Tooth, hereditary neuropathy with liability to pressure palsies) gene analysis; full sequence analysis | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 81325 | PMP22 GENE FULL SEQUENCE | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| 81326 | PMP22 (peripheral myelin protein 22) (eg, Charcot-Marie-Tooth, hereditary neuropathy with liability to pressure palsies) gene analysis; known familial variant | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 81326 | PMP22 GENE KNOWN FAM VAR | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| 81328 | SLCO1B1 GENE COM VARIANTS | Potential Experimental/Investigation/Unproven | 11/1/2024 |
| 81329 | SMN1 GENE DOS/DELETION ALYS | Outpatient Procedures (Potentially Cosmetic) | 9/13/2020 |
| 81331 | SNRPN/UBE3A (small nuclear ribonucleoprotein polypeptide N and ubiquitin protein ligase E3A) (eg, Prader-Willi syndrome and/or Angelman syndrome), methylation analysis | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 81331 | SNRPN/UBE3A GENE | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| 81332 | SERPINA1 (serpin peptidase inhibitor, clade A, alpha-1 antitrypsinase, antitrypsin, member 1) (eg, alpha-1-antitrypsin deficiency), gene analysis, common variants (eg, *S and *Z) | Potential Experimental/Investigation/Unproven | 9/13/2020 |
| 81333 | TGFBI GENE COMMON VARIANTS | Outpatient Procedures (Potentially Cosmetic) | 10/8/2021 |
| 81335 | TPMT GENE COM VARIANTS | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 81336 | SMN1 GENE FULL GENE SEQUENCE | Outpatient Procedures (Potentially Cosmetic) | 9/13/2020 |
| 81337 | SMN1 GEN NOWN FAMIL SEQ VRNT | Outpatient Procedures (Potentially Cosmetic) | 9/13/2020 |
| 81343 | PPP2R2B GEN DETC ABNOR ALLEL | Outpatient Procedures (Potentially Cosmetic) | 9/13/2020 |
| 81344 | TBP GENE DETC ABNOR ALLELES | Outpatient Procedures (Potentially Cosmetic) | 9/13/2020 |
| 81345 | TERT GENE TARGETED SEQ ALYS | Outpatient Procedures (Potentially Cosmetic) | 4/10/2020 |
| 81349 | Cytogenomic (genome-wide) analysis for constitutional chromosomal abnormalities; interrogation of genomic regions for copy number and loss-of-heterozygosity variants, low-pass sequencing analysis | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| 81400 | Molecular pathology procedure, Level 1 (eg, identification of single germline variant [eg, SNP] by techniques such as restriction enzyme digestion or melt curve analysis)ACADM (acyl-CoA dehydrogenase, C-4 to C-12 straight chain, MCAD) (eg, medium chain ac | Potential Experimental/Investigation/Unproven | 4/10/2020 |
| 81401 | Molecular pathology procedure, Level 2 (eg, 2-10 SNPs, 1 methylated variant, or 1 somatic variant [typically using nonsequencing target variant analysis], or detection of a dynamic mutation disorder/triplet repeat) ABL (c-abl oncogene 1, receptor tyrosine | Potential Experimental/Investigation/Unproven | 4/10/2020 |
| 81402 | Molecular pathology procedure, Level 3 (eg, >10 SNPs, 2-10 methylated variants, or 2-10 somatic variants [typically using non-sequencing target variant analysis], immunoglobulin and T-cell receptor gene rearrangements, duplication/deletion variants 1 exon | Potential Experimental/Investigation/Unproven | 4/10/2020 |
| 81403 | Molecular pathology procedure, Level 4 (eg, analysis of single exon by DNA sequence analysis, analysis of >10 amplicons using multiplex PCR in 2 or more independent reactions, mutation scanning or duplication/deletion variants of 2-5 exons) ABL1 (c-abl on | Potential Experimental/Investigation/Unproven | 4/10/2020 |
| 81404 | Molecular pathology procedure, Level 5 (eg, analysis of 2-5 exons by DNA sequence analysis, mutation scanning or duplication/deletion variants of 6-10 exons, or characterization of a dynamic mutation disorder/triplet repeat by Southern blot analysis) BTD | Potential Experimental/Investigation/Unproven | 4/10/2020 |
| 81405 | Molecular pathology procedure, Level 6 (eg, analysis of 6-10 exons by DNA sequence analysis, mutation scanning or duplication/deletion variants of 11-25 exons) CYP21A2 (cytochrome P450, family 21, subfamily A, polypeptide2) (eg, steroid 21-hydroxylase iso | Potential Experimental/Investigation/Unproven | 4/10/2020 |
| 81406 | Molecular pathology procedure, Level 7 (eg, analysis of 11-25 exons by DNA sequence analysis, mutation scanning or duplication/deletion variants of 26-50 exons, cytogenomic array analysis for neoplasia) CAPN3 (Calpain 3) (eg, limb-girdle muscular dystroph | Potential Experimental/Investigation/Unproven | 4/10/2020 |
| 81407 | MOPATH PROCEDURE LEVEL 8 | Outpatient Procedures (Potentially Cosmetic) | 2/2/2024 |
| 81407 | Molecular pathology procedure, Level 8 (eg, analysis of 26-50 exons by DNA sequence analysis, mutation scanning or duplication/deletion variants of >50 exons, sequence analysis of multiple genes on one platform) SCN1A (sodium channel, voltage-gated, type | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 81408 | MOPATH PROCEDURE LEVEL 9 | Outpatient Procedures (Potentially Cosmetic) | 2/2/2024 |
| 81408 | Molecular pathology procedure, Level 9 (eg, analysis of >50 exons in a single gene by DNA sequence analysis) FBN1 (fibrillin 1) (eg, Marfan syndrome), full gene sequence NF1 (neurofibromin 1) (eg, neurofibromatosis, type 1), full gene sequence RYR1 (ryano | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 81410 | AORTIC DYSFUNCTION/DILATION | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| 81411 | AORTIC DYSFUNCTION/DILATION | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| 81412 | Ashkenazi Jewish associated disorders (eg, Bloom syndrome, Canavan disease, cystic fibrosis, familial dysautonomia, Fanconi anemia group C, Gaucher disease, Tay-Sachs disease), genomic sequence analysis panel, must include sequencing of at least 9 genes. | Outpatient Procedures (Potentially Cosmetic) | 12/3/2021 |
| 81413 | CAR ION CHNNLPATH INC 10 GNS | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| 81414 | CAR ION CHNNLPATH INC 2 GNS | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| 81415 | EXOME SEQUENCE ANALYSIS | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| 81416 | EXOME SEQUENCE ANALYSIS | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| 81417 | EXOME RE-EVALUATION | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| 81425 | GENOME SEQUENCE ANALYSIS | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| 81426 | GENOME SEQUENCE ANALYSIS | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| 81427 | GENOME RE-EVALUATION | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 81430 | HEARING LOSS SEQUENCE ANALYS | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| 81431 | HEARING LOSS DUP/DEL ANALYS | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |

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| 81432 | Hereditary breast cancer-related disorders (eg, hereditary breast cancer, hereditary ovarian cancer, hereditary endometrial cancer); genomic sequence analysis panel, must include sequencing of at least 14 genes, including ATM, BRCA1, BRCA2, BRIP1, CDH1, M | Outpatient Procedures (Potentially Cosmetic) | 4/10/2020 |
| 81433 | Hereditary breast cancer-related disorders (eg, hereditary breast cancer, hereditary ovarian cancer, hereditary endometrial cancer); duplication/deletion analysis panel, must include analyses for BRCA1, BRCA2, MLH1, MSH2, and STK11 | Outpatient Procedures (Potentially Cosmetic) | 4/10/2020 |
| 81434 | Hereditary retinal disorders (eg, retinitis pigmentosa, Leber congenital amaurosis, cone-rod dystrophy), genomic sequence analysis panel, must include sequencing of at least 15 genes, including ABCA4, CNGA1, CRB1, EYS, PDE6A, PDE6B, PRPF31, PRPH2, RDH12, | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| 81435 | HEREDITARY COLON CANCER | Outpatient Procedures (Potentially Cosmetic) | 4/10/2020 |
| 81436 | HEREDITARY COLON CA SYND | Outpatient Procedures (Potentially Cosmetic) | 4/10/2020 |
| 81437 | Hereditary neuroendocrine tumor disorders (eg, medullary thyroid carcinoma, parathyroid carcinoma, malignant pheochromocytoma or paraganglioma); genomic sequence analysis panel, must include sequencing of at least 6 genes, including MAX, SDHB, SDHC, SDHD, | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| 81438 | HEREDTRY NURONDCRN TUM DSRDR | Molecular Lab | 2/7/2025 |
| 81438 | Hereditary neuroendocrine tumor disorders (eg, medullary thyroid carcinoma, parathyroid carcinoma, malignant pheochromocytoma or paraganglioma); duplication/deletion analysis panel, must include analyses for SDHB, SDHC, SDHD, and VHL | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| 81440 | MITOCHONDRIAL GENE | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| 81442 | Noonan spectrum disorders (eg, Noonan syndrome, cardio-facio-cutaneous syndrome, Costello syndrome, LEOPARD syndrome, Noonan-like syndrome), genomic sequence analysis panel, must include sequencing of at least 12 genes, including BRAF, CBL, HRAS, KRAS, MA | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| 81443 | GENETIC TSTG SEVERE INH COND | Outpatient Procedures (Potentially Cosmetic) | 4/30/2021 |
| 81445 | TARGETED GENOMIC SEQ ANALYS | Outpatient Procedures (Potentially Cosmetic) | 5/8/2020 |
| 81449 | TGSAP SO NEO 5-50 RNA ALYS | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| 81450 | TARGETED GENOMIC SEQ ANALYS | Outpatient Procedures (Potentially Cosmetic) | 4/10/2020 |
| 81451 | TGSAP HL NEO 5-50 RNA ALYS | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| 81455 | TARGETED GENOMIC SEQ ANALYS | Outpatient Procedures (Potentially Cosmetic) | 4/10/2020 |
| 81455 | TARGETED GENOMIC SEQ ANALYS | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| 81456 | Targeted genomic sequence analysis panel, solid organ or hematolymphoid neoplasm or disorder, 51 or greater genes (eg, ALK, BRAF, CDKN2A, CEBPA, DNMT3A, EGFR, ERBB2, EZH2, FLT3, IDH1, IDH2, JAK2, KIT, KRAS, MET, MLL, NOTCH1, NPM1, NRAS, PDGFRA, PDGFRB, PG | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| 81457 | Solid organ neoplasm, genomic sequence analysis panel, interrogation for sequence variants; DNA analysis, microsatellite instability | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| 81458 | Solid organ neoplasm, genomic sequence analysis panel, interrogation for sequence variants; DNA analysis, copy number variants and microsatellite instability | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| 81459 | Solid organ neoplasm, genomic sequence analysis panel, interrogation for sequence variants; DNA analysis or combined DNA and RNA analysis, copy number variants, microsatellite instability, tumor mutation burden, and rearrangements | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| 81460 | WHOLE MITOCHONDRIAL GENOME | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| 81462 | Solid organ neoplasm, genomic sequence analysis panel, cell-free nucleic acid (eg, plasma), interrogation for sequence variants; DNA analysis or combined DNA and RNA analysis, copy number variants and rearrangements | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| 81463 | Solid organ neoplasm, genomic sequence analysis panel, cell-free nucleic acid (eg, plasma), interrogation for sequence variants; DNA analysis, copy number variants, and microsatellite instability | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| 81464 | Solid organ neoplasm, genomic sequence analysis panel, cell-free nucleic acid (eg, plasma), interrogation for sequence variants; DNA analysis or combined DNA and RNA analysis, copy number variants, microsatellite instability, tumor mutation burden, and re | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| 81465 | WHOLE MITOCHONDRIAL GENOME | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| 81470 | X-LINKED INTELLECTUAL DBLT | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| 81471 | X-LINKED INTELLECTUAL DBLT | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| 81479 | Unlisted molecular pathology procedure | Unlisted Procedures | 11/1/2024 |
| 81506 | ENDO ASSAY SEVEN ANAL | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| 81506 | Endocrinology (type 2 diabetes), biochemical assays of seven analytes (glucose, HbA1c, insulin, hs-CRP, adiponectin, ferritin, interleukin 2-receptor alpha), utilizing serum or plasma, algorithm reporting a risk score | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 81518 | ONC BRST MRNA 11 GENES | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| 81519 | ONCOLOGY BREAST MRNA | Outpatient Procedures (Potentially Cosmetic) | 3/25/2021 |
| 81522 | Oncology (breast), mRNA, gene expression profiling by RT-PCR of 12 genes (8 content and 4 housekeeping), utilizing formalin-fixed paraffin-embedded tissue, algorithm reported as recurrence risk score | Potential Experimental/Investigation/Unproven | 7/10/2020 |
| 81523 | Oncology (breast), mRNA, next-generation sequencing gene expression profiling of 70 content genes and 31 housekeeping genes, utilizing formalin-fixed paraffin-embedded tissue, algorithm reported as index related to risk to distant metastasis | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |

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| 81529 | ONCOLOGY (CUTANEOUS MELANOMA), MRNA, GENE EXPRESSION PROFILING BY REAL-TIME RT-PCR OF 31 GENES (28 CONTENT AND 3 HOUSEKEEPING), UTILIZING FORMALIN-FIXED PARAFFIN-EMBEDDED TISSUE, ALGORITHM REPORTED AS RECURRENCE RISK, INCLUDING LIKELIHOOD OF SENTINEL LYMP | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| 81538 | Oncology (lung), mass spectrometric 8-protein signature, including amyloid A, utilizing serum, prognostic and predictive algorithm reported as good versus poor overall survival | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| 81539 | ONCOLOGY PROSTATE PROB SCORE | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 81542 | ONC PROSTATE MRNA 22 CNT GEN | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| 81542 | Oncology (prostate), mRNA, microarray gene expression profiling of 22 content genes, utilizing formalin-fixed paraffin-embedded tissue, algorithm reported as metastasis risk score | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 81545 | Oncology (thyroid), gene expression analysis of 142 genes, utilizing fine needle aspirate, algorithm reported as a categorical result (eg, benign or suspicious) | Outpatient Procedures (Potentially Cosmetic) | 7/10/2020 |
| 81546 | ONCOLOGY (THYROID), MRNA, GENE EXPRESSION ANALYSIS OF 10,196 GENES, UTILIZING FINE NEEDLE ASPIRATE, ALGORITHM REPORTED AS A CATEGORICAL RESULT (EG, BENIGN OR SUSPICIOUS) | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 81552 | ONC UVEAL MLNMA MRNA 15 GENE | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| 81552 | Oncology (uveal melanoma), mRNA, gene expression profiling by real-time RT-PCR of 15 genes (12 content and 3 housekeeping), utilizing fine needle aspirate or formalin-fixed paraffin-embedded tissue, algorithm reported as risk of metastasis | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 81554 | PULMONARY DISEASE (IDIOPATHIC PULMONARY FIBROSIS [IPF]), MRNA, GENE EXPRESSION ANALYSIS OF 190 GENES, UTILIZING TRANSBRONCHIAL BIOPSIES, DIAGNOSTIC ALGORITHM REPORTED AS CATEGORICAL RESULT (EG, POSITIVE OR NEGATIVE FOR HIGH PROBABILITY OF USUAL INTERSTITI | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| 81558 | TRNSPL REJ KDN MRNA QPCR 139 | Potential Experimental/Investigation/Unproven | 6/27/2025 |
| 81560 | Transplantation medicine (allograft rejection, pediatric liver and small bowel), measurement of donor and third-party-induced CD154+T-cytotoxic memory cells, utilizing whole peripheral blood, algorithm reported as a rejection risk score | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 81595 | Cardiology (heart transplant), mRNA, gene expression profiling by real-time quantitative PCR of 20 genes (11 content and 9 housekeeping), utilizing subfraction of peripheral blood, algorithm reported as a rejection risk score | Outpatient Procedures (Potentially Cosmetic) | 6/27/2025 |
| 81599 | UNLISTED MAAA | Potential Experimental/Investigation/Unproven | 11/1/2024 |
| 81599 | Unlisted multianalyte assay with algorithmic analysis | Unlisted Procedures | 7/28/2023 |
| 83006 | GROWTH STIMULATION GENE 2 | Outpatient Procedures (Potentially Cosmetic) | 10/8/2021 |
| 84999 | Unlisted chemistry procedure | Unlisted Procedures | 3/25/2021 |
| 85999 | Unlisted hematology or coag procedure | Unlisted Procedures | 7/28/2023 |
| 86486 | SKIN TEST NOS ANTIGEN | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 86486 | Skin test; unlisted antigen, each | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 86849 | Unlisted immunology procedure | Unlisted Procedures | 7/28/2023 |
| 86950 | LEUKACYTE TRANSFUSION | Transplant | 11/20/2025 |
| 88299 | Unlisted cytogenetic study | Unlisted Procedures | 4/12/2024 |
| 88375 | Optical endomicroscopic image(s), interpretation and report, real-time or referred, each endoscopic session | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| 88384 | Array-based evaluation of multiple molecular probes; 11 through 50 probes | Potential Experimental/Investigation/Unproven | 6/25/2021 |
| 88749 | Unlisted in vivo (eg, transcutaneous) laboratory service | Unlisted Procedures | 7/29/2022 |
| 89240 | Unlisted miscellaneous pathology test | Unlisted Procedures | 7/28/2023 |
| 89329 | SPERM EVALUATION TEST | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| 89329 | Sperm evaluation; hamster penetration test | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 89398 | Unlisted reprod med lab proc | Unlisted Procedures | 7/28/2023 |
| 90281 | Immune globulin, IM use | Injectable Medications | 5/30/2025 |
| 90399 | Unlisted Immune Globulin | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 90749 | Unlisted vaccine/toxoid | Unlisted Procedures | 7/28/2023 |
| 90867 | TCRANIAL MAGN STIM TX PLAN | Outpatient Procedures (Potentially Cosmetic) | 7/29/2022 |
| 90868 | TCRANIAL MAGN STIM TX DELI | Outpatient Procedures (Potentially Cosmetic) | 7/29/2022 |
| 90869 | TCRAN MAGN STIM REDETEMI | Outpatient Procedures (Potentially Cosmetic) | 7/29/2022 |
| 90899 | PSYCHIATRIC SERVICE/THER | Unlisted Procedures | 8/26/2025 |
| 90989 | DIALYSIS TRAINING COMPLETE | Outpatient Procedures (Potentially Cosmetic) | 12/30/2024 |
| 90993 | DIALYSIS TRAINING INCOMPL | Outpatient Procedures (Potentially Cosmetic) | 12/30/2024 |
| 90999 | DIALYSIS PROCEDURE | Outpatient Procedures (Potentially Cosmetic) | 2/28/2025 |
| 91111 | Gastrointestinal tract imaging, intraluminal (eg, capsule endoscopy), esophagus with physician interpretation and report | Potential Experimental/Investigation/Unproven | 8/13/2021 |
| 91112 | Gastrointestinal transit and pressure measurement, stomach through colon, wireless capsule, with interpretation and report | Potential Experimental/Investigation/Unproven | 5/30/2025 |
| 91117 | COLON MOTILITY 6 HR STUDY | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 91117 | Colon motility (manometric) study, minimum 6 hours continuous recording (including provocation tests, eg, meal, intracolonic balloon distension, pharmacologic agents, if performed), with interpretation and report | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 92274 | MULTIFOCAL ERG W/I&R | Outpatient Procedures (Potentially Cosmetic) | 8/26/2022 |
| 92499 | Unlisted ophthalmological service or procedure | Unlisted Procedures | 7/28/2023 |
| 92507 | Treatment of speech, language, voice, communication, and/or auditory processing disorder; individual | Speech Therapy | 7/28/2023 |
| 92508 | SPEECH/HEARING THERAPY | Speech Therapy | 7/28/2023 |
| 92700 | Unlisted otorhinolaryngological service or procedure | Unlisted Procedures | 7/28/2023 |
| 92971 | CARDIOASSIST EXTERNAL | Outpatient Procedures (Potentially Cosmetic) | 2/28/2025 |

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| 92971 | Cardioassist-method of circulatory assist; external | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 93264 | REM MNTR WRLS P-ART PRS SNR | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 93319 | 3D echocardiographic imaging and postprocessing during transesophageal echocardiography, or during transthoracic echocardiography for congenital cardiac anomalies, for the assessment of cardiac structure(s) (eg, cardiac chambers and valves, left atrial ap | Diagnostic Radiology | 4/29/2022 |
| 93350 | ECHO TRANSTHORACIC | Diagnostic Radiology | 5/30/2025 |
| 93351 | ECHOCARDIOGRAPHY, TRANSTHORACIC, REAL-TIME WITH IMAGE DOCUMENTATION (2D), INCLUDES M-MODE RECORDING, WHEN PERFORMED, DURING REST AND CARDIOVASCULAR STRESS TEST USING TREADMILL, BICYCLE EXERCISE AND/OR PHARMACOLOGICALLY I | Diagnostic Radiology | 5/30/2025 |
| 93530 | RT HEART CATH CONGENITAL | Diagnostic Radiology | 1/28/2022 |
| 93531 | R & L HEART CATH CONGENI | Diagnostic Radiology | 1/28/2022 |
| 93532 | R & L HEART CATH CONGENI | Diagnostic Radiology | 1/28/2022 |
| 93533 | R & L HEART CATH CONGENI | Diagnostic Radiology | 1/28/2022 |
| 93569 | Injection procedure during cardiac catheterization including imaging supervision, interpretation, and report; for selective pulmonary arterial angiography, unilateral (List separately in addition to code for primary procedure) | Outpatient Procedures (Potentially Cosmetic) | 6/30/2023 |
| 93573 | Injection procedure during cardiac catheterization including imaging supervision, interpretation, and report; for selective pulmonary arterial angiography, bilateral (List separately in addition to code for primary procedure) | Outpatient Procedures (Potentially Cosmetic) | 6/30/2023 |
| 93574 | Injection procedure during cardiac catheterization including imaging supervision, interpretation, and report; for selective pulmonary venous angiography of each distinct pulmonary vein during cardiac catheterization (List separately in addition to code fo | Outpatient Procedures (Potentially Cosmetic) | 6/30/2023 |
| 93575 | Injection procedure during cardiac catheterization including imaging supervision, interpretation, and report; for selective pulmonary angiography of major aortopulmonary collateral arteries (MAPCAs) arising off the aorta or its systemic branches, during c | Outpatient Procedures (Potentially Cosmetic) | 6/30/2023 |
| 93580 | Percutaneous transcatheter closure of congenital interatrial communication (i.e., Fontan fenestration, atrial septal defect) with implant | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 93581 | TRANCATH CLOSURE OF VSD | Potential Experimental/Investigation/Unproven | 3/28/2025 |
| 93583 | PERQ TRANCATH SEPTAL REDUXN | Outpatient Procedures (Potentially Cosmetic) | 8/19/2025 |
| 93584 | Venography for congenital heart defect(s), including catheter placement, and radiological supervision and interpretation; anomalous or persistent superior vena cava when it exists as a second contralateral superior vena cava, with native drainage to heart | Outpatient Procedures (Potentially Cosmetic) | 2/2/2024 |
| 93585 | Venography for congenital heart defect(s), including catheter placement, and radiological supervision and interpretation; azygos/hemiazygos venous system (List separately in addition to code for primary procedure) | Outpatient Procedures (Potentially Cosmetic) | 2/2/2024 |
| 93586 | Venography for congenital heart defect(s), including catheter placement, and radiological supervision and interpretation; coronary sinus (List separately in addition to code for primary procedure) | Outpatient Procedures (Potentially Cosmetic) | 2/2/2024 |
| 93587 | Venography for congenital heart defect(s), including catheter placement, and radiological supervision and interpretation; venovenous collaterals originating at or above the heart (eg, from innominate vein) (List separately in addition to code for primary | Outpatient Procedures (Potentially Cosmetic) | 2/2/2024 |
| 93588 | Venography for congenital heart defect(s), including catheter placement, and radiological supervision and interpretation; venovenous collaterals originating below the heart (eg, from the inferior vena cava) (List separately in addition to code for primary | Outpatient Procedures (Potentially Cosmetic) | 2/2/2024 |
| 93590 | PERQ TRANCATH CLS MITRAL | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 93591 | PERQ TRANCATH CLS AORTIC | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 93592 | PERQ TRANCATH CLOSURE EACH | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 93593 | Right heart catheterization for congenital heart defect(s) including imaging guidance by the proceduralist to advance the catheter to the target zone; normal native connections | Diagnostic Radiology | 5/30/2025 |
| 93594 | Right heart catheterization for congenital heart defect(s) including imaging guidance by the proceduralist to advance the catheter to the target zone; abnormal native connections | Diagnostic Radiology | 5/30/2025 |
| 93595 | Left heart catheterization for congenital heart defect(s) including guidance by the proceduralist to advance the catheter to the target zone, normal or abnormal native connections | Diagnostic Radiology | 5/30/2025 |
| 93596 | Right and left heart catheterization for congenital heart defect(s) including imaging guidance by the proceduralist to advance the catheter to the target zone(s); normal native connections | Diagnostic Radiology | 5/30/2025 |
| 93597 | Right and left heart catheterization for congenital heart defect(s) including imaging guidance by the proceduralist to advance the catheter to the target zone(s); abnormal native connections | Diagnostic Radiology | 5/30/2025 |
| 93623 | STIMULATION PACING HEART | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 93624 | ELECTROPHYSIOLOGIC STUDY | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 93644 | ELECTROPHYSIOLOGY EVALUATION | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 93662 | INTRACARDIAC ECG (ICE) | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| 93702 | BIS XTRACELL FLUID ANALYSIS | Potential Experimental/Investigation/Unproven | 10/8/2021 |
| 93799 | Unlisted cardiovascular service or procedure | Unlisted Procedures | 11/20/2025 |
| 93895 | CAROTID INTIMA ATHEROMA EVAL | Potential Experimental/Investigation/Unproven | 4/30/2021 |
| 93998 | Unlisted noninvasive vascular diagnostic study | Unlisted Procedures | 7/28/2023 |

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| 95782 | POLYSOMNOGRAPHY; YOUNGER THAN 6 YEARS, SLEEP STAGING WITH 4 OR MORE ADDITIONAL PARAMETERS OF SLEEP, ATTENDED BY A TECHNOLOGIST | SLEEP MANAGEMENT PROGRAM | 4/1/2026 |
| 95783 | POLYSOMNOGRAPHY; YOUNGER THAN 6 YEARS, SLEEP STAGING WITH 4 OR MORE ADDITIONAL PARAMETERS OF SLEEP, WITH INITIATION OF CONTINUOUS POSITIVE AIRWAY PRESSURE THERAPY OR BI-LEVEL VENTILATION, ATTENDED BY A TECHNOLOGIST | SLEEP MANAGEMENT PROGRAM | 4/1/2026 |
| 95800 | Sleep study, unattended, simultaneous recording; heart rate, oxygen saturation, respiratory analysis (eg, by airflow or peripheral arterial tone), and sleep time | Sleep Management Program | 10/8/2021 |
| 95801 | Sleep study, unattended, simultaneous recording; minimum of heart rate, oxygen saturation, and respiratory analysis (eg, by airflow or peripheral arterial tone) | Sleep Management Program | 10/8/2021 |
| 95803 | Actigraphy testing, recording, analysis, interpretation, and report (minimum of 72 hours to 14 consecutive days of recording) | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| 95805 | MULTIPLE SLEEP LATENCY OR MAINTENANCE OF WAKEFULNESS TESTING, RECORDING, ANALYSIS AND INTERPRETATION OF PHYSIOLOGICAL MEASUREMENTS OF SLEEP DURING MULTIPLE TRIALS TO ASSESS SLEEPINESS | SLEEP MANAGEMENT PROGRAM | 4/1/2026 |
| 95806 | Sleep study, unattended, simultaneous recording of, heart rate, oxygen saturation, respiratory airflow, and respiratory effort (eg, thoracoabdominal movement) | Sleep Management Program | 10/8/2021 |
| 95807 | SLEEP STUDY, SIMULTANEOUS RECORDING OF VENTILATION, RESPIRATORY EFFORT, ECG OR HEART RATE, AND OXYGEN SATURATION, ATTENDED BY A | SLEEP MANAGEMENT PROGRAM | 4/1/2026 |
| 95808 | POLYSOMNOGRAPHY; SLEEP STAGING WITH 1-3 ADDITIONAL PARAMETERS OF SLEEP, ATTENDED BY A TECHNOLOGIST | SLEEP MANAGEMENT PROGRAM | 4/1/2026 |
| 95810 | POLYSOMNOGRAPHY; SLEEP STAGING WITH 4 OR MORE ADDITIONAL PARAMETERS OF SLEEP, ATTENDED BY A TECHNOLOGIST | SLEEP MANAGEMENT PROGRAM | 4/1/2026 |
| 95811 | POLYSOMNOGRAPHY; SLEEP STAGING WITH 4 OR MORE ADDITIONAL PARAMETERS OF SLEEP, WITH INITIATION OF CONTINUOUS POSITIVE AIRWAY PRESSURE | SLEEP MANAGEMENT PROGRAM | 4/1/2026 |
| 95999 | Unlisted neurological or neuromuscular diagnostic procedure | Unlisted Procedures | 11/13/2020 |
| 96999 | Unlisted special dermatological service or procedure | Unlisted Procedures | 1/21/2021 |
| 97610 | LOW FREQUENCY NON-THERMAL US | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 97610 | LOW FREQUENCY NON-THERMAL US | Outpatient Procedures (Potentially Cosmetic) | 11/20/2025 |
| 99183 | HYPERBARIC OXYGEN THERAPY, PER SESSION | Outpatient Procedures (Potentially Cosmetic) | 11/20/2025 |
| 99183 | PHYSICIAN ATTENDANCE AND SUPERVISION OF HYPERBARIC OXYGEN THERAPY, PER SESSION | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| 99500 | HOME VISIT PRENATAL | Home Health Care | 2/28/2025 |
| 99501 | HOME VISIT POSTNATAL | Home Health Care | 2/28/2025 |
| 99502 | HOME VISIT NB CARE | Home Health Care | 2/28/2025 |
| 99503 | HOME VISIT RESP THERAPY | Home Health Care | 2/28/2025 |
| 99504 | HOME VISIT MECH VENTILAT | Home Health Care | 2/28/2025 |
| 99505 | HOME VISIT STOMA CARE | Home Health Care | 2/28/2025 |
| 99506 | HOME VISIT IM INJECTION | Home Health Care | 2/28/2025 |
| 99507 | HOME VISIT CATH MAINTAIN | Home Health Care | 2/28/2025 |
| 99509 | HOME VISIT DAY LIFE ACTI | Home Health Care | 2/28/2025 |
| 99510 | HOME VISIT SING/M/FAM CO | Home Health Care | 2/28/2025 |
| 99511 | HOME VISIT FECAL/ENEMA M | Home Health Care | 2/28/2025 |
| 99600 | Unlisted home visit service or procedure | Unlisted Procedures | 7/28/2023 |
| A0140 | Nonemergency transport air | Potential Experimental/Investigation/Unproven | 8/19/2025 |
| A0430 | Fixed wing air transport | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| A0435 | Fixed wing air mileage | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| A0999 | Unlisted ambulance service | Unlisted Procedures | 7/28/2023 |
| A2001 | Innovamatrix ac, per sq cm | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| A2002 | Miragen adv wnd mat per sq | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| A2003 | Bio-connekt wound matrix | Potential Experimental/Investigation/Unproven | 2/25/2022 |
| A2006 | Novosorb synpath per sq cm | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| A2007 | Restrata, per sq cm | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| A2008 | Theragenesis, per sq cm | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| A2009 | Symphony, per sq cm | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| A2010 | Apis, per square centimeter | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| A2011 | Supra sdrm, per sq cm | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| A2012 | Suprathel, per sq cm | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| A2013 | Innovamatrix fs, per sq cm | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| A2014 | Omeza collag per 100 mg | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| A2015 | Phoenix wnd mtrx, per sq cm | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| A2016 | Permeaderm b, per sq cm | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| A2017 | Permeaderm glove, each | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| A2018 | Permeaderm c, per sq cm | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| A2019 | Kerecis marigen shld sq cm | Potential Experimental/Investigation/Unproven | 11/20/2025 |
| A2027 | Matriderm per sq cm | Durable Medical Equipment | 11/1/2024 |
| A2028 | Micromatrix flex per mg | Durable Medical Equipment | 11/1/2024 |
| A2029 | Mirotract matrix sheet | Durable Medical Equipment | 11/1/2024 |
| A4100 | Skin sub fda clrd as dev nos | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| A4271 | Integrated lancing and blood sample testing cartridges for home blood glucose monitor, per month | Durable Medical Equipment | 8/30/2024 |
| A4543 | Supply trans elec nerve stim | Durable Medical Equipment | 11/1/2024 |
| A4544 | Electro nerve stimulator rls | Durable Medical Equipment | 11/1/2024 |
| A4545 | Suppl accessor tibial stim | Durable Medical Equipment | 11/1/2024 |
| A4555 | CA TX E-STIM ELECTR/TRAN | Potential Experimental/Investigation/Unproven | 9/13/2020 |
| A4563 | Vag inser rectal control sys | Potential Experimental/Investigation/Unproven | 7/28/2023 |

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| A4641 | RADIOPHARM DX AGENT NOC | Diagnostic Radiology | 12/3/2021 |
| A4641 | RADIOPHARM DX AGENT NOC | Unlisted Procedures | 2/28/2025 |
| A4648 | IMPLANTABLE TISSUE MARKE | Therapeutic Radiology | 12/30/2024 |
| A4650 | IMPLANT RADIATION DOSIME | Therapeutic Radiology | 12/30/2024 |
| A6025 | SILICONE GEL SHEET, EACH | Outpatient Procedures (Potentially Cosmetic) | 12/30/2024 |
| A7021 | Suppl and access lung expan | Durable Medical Equipment | 11/1/2024 |
| A7047 | RESP SUCTION ORAL INTERFACE | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| A9506 | Graphite crucible for preparation of technetium tc 99m-labeled carbon aerosol, each | Outpatient Procedures (Potentially Cosmetic) | 2/28/2025 |
| A9543 | Y90 IBRITUMOMAB, RX | Therapeutic Radiology | 4/10/2020 |
| A9590 | Iodine i-131 iobenguane 1mci | Diagnostic Radiology | 8/26/2022 |
| A9593 | Gallium ga-68 psma-11, diagnostic, (ucsf), 1 millicurie | Outpatient Procedures (Potentially Cosmetic) | 4/29/2022 |
| A9594 | Gallium ga-68 psma-11, diagnostic, (ucla), 1 millicurie | Outpatient Procedures (Potentially Cosmetic) | 4/29/2022 |
| A9595 | Piflu f-18, dia 1 millicurie | Outpatient Procedures (Potentially Cosmetic) | 4/29/2022 |
| A9610 | Xe129 xenon, diagnostic | Durable Medical Equipment | 11/1/2024 |
| A9699 | RADIOPHARM RX AGENT NOC | Unlisted Procedures | 6/27/2025 |
| B4105 | Enzyme cartridge enteral nut | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| C1062 | Intravertebral fx aug impl | Spinal Services | 11/1/2024 |
| C1715 | BRACHYTHERAPY NEEDLE | Therapeutic Radiology | 12/30/2024 |
| C1716 | BRACHYTIX SOURCE, GOLD 198 | Therapeutic Radiology | 12/30/2024 |
| C1717 | BRACHYTIX SOURCE, HDR IR- | Therapeutic Radiology | 2/28/2025 |
| C1719 | BRACHYTIX SOUR, NON-HDR IR | Therapeutic Radiology | 12/30/2024 |
| C1728 | CAIH, BRACHYTIX SEED ADM | Therapeutic Radiology | 12/30/2024 |
| C1761 | Calhete, transluminal intravascular lithotripsy, coronary | Outpatient Procedures (Potentially Cosmetic) | 12/30/2024 |
| C1762 | CONN TISS, HUMAN(INC FAS | Potential Experimental/Investigation/Unproven | 3/25/2022 |
| C1762 | CONN TISS, HUMAN(INC FAS | Outpatient Procedures (Potentially Cosmetic) | 12/29/2021 |
| C1821 | Interspinous process distraction device (implantable) | Potential Experimental/Investigation/Unproven | 11/1/2024 |
| C1823 | Gen, neuro, trans sen/stim | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| C1824 | GENERATOR, CCM, IMPLANT | Potential Experimental/Investigation/Unproven | 12/30/2025 |
| C1824 | Generator, ccm, implant | Outpatient Procedures (Potentially Cosmetic) | 11/20/2025 |
| C1825 | Gen, neuro, carot sinus baro | Potential Experimental/Investigation/Unproven | 12/30/2025 |
| C1825 | Gen, neuro, carot sinus baro | Outpatient Procedures (Potentially Cosmetic) | 11/20/2025 |
| C1826 | Gen, neuro, clo loop, rechg | Musculoskeletal (Buy Up) | 3/17/2023 |
| C1826 | Gen, neuro, clo loop, rechg | Musculoskeletal (Buy Up) | 7/28/2023 |
| C1826 | Gen, neuro, clo loop, rechg | Outpatient Procedures (Potentially Cosmetic) | 6/9/2023 |
| C1827 | Gen, neuro, imp led, ex cntr | Musculoskeletal (Buy Up) | 3/17/2023 |
| C1827 | Gen, neuro, imp led, ex cntr | Musculoskeletal (Buy Up) | 7/28/2023 |
| C1827 | Gen, neuro, imp led, ex cntr | Outpatient Procedures (Potentially Cosmetic) | 6/9/2023 |
| C1831 | Personalized, anterior and lateral interbody cage (implantable) | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| C1834 | Pressure sensor system, im | Outpatient Procedures (Potentially Cosmetic) | 6/9/2023 |
| C1840 | TELESCOPIC INTRAOCULAR L | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| C1840 | TELESCOPIC INTRAOCULAR L | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| C1841 | RETINAL PROSTH INT/EXT C | Potential Experimental/Investigation/Unproven | 1/27/2023 |
| C1842 | Retinal prosth, add-on | Potential Experimental/Investigation/Unproven | 1/27/2023 |
| C1849 | Skin substitute, synthetic | Outpatient Procedures (Potentially Cosmetic) | 1/27/2023 |
| C1889 | Implant/insert device, noc | Unlisted Procedures | 11/20/2025 |
| C2596 | Probe, robotic, water-jet | Outpatient Procedures (Potentially Cosmetic) | 12/2/2022 |
| C2614 | Probe, percutaneous lumbar discectomy | Potential Experimental/Investigation/Unproven | 11/1/2024 |
| C2616 | BRACHYTIX SOURCE, YTTRIUM | Therapeutic Radiology | 4/10/2020 |
| C2634 | BRACHYTIX SOURCE, HA, I-1 | Therapeutic Radiology | 12/30/2024 |
| C2635 | BRACHYTIX SOURCE, HA, P-1 | Therapeutic Radiology | 12/30/2024 |
| C2636 | BRACHYTIX LIN SRCE P-103 | Therapeutic Radiology | 12/30/2024 |
| C2637 | BRACHYTIX, YTTERBIUM-169 | Therapeutic Radiology | 12/30/2024 |
| C2638 | BRACHYTIX STRANDED I-125 | Therapeutic Radiology | 12/30/2024 |
| C2639 | BRACHYTIX NON-STRANDED I- | Therapeutic Radiology | 12/30/2024 |
| C2640 | BRACHYTIX STRANDED P-103 | Therapeutic Radiology | 12/30/2024 |
| C2641 | BRACHYTIX NON-STRANDED P- | Therapeutic Radiology | 12/30/2024 |
| C2642 | BRACHYTIX STRANDED C-131 | Therapeutic Radiology | 12/30/2024 |
| C2643 | BRACHYTIX NON-STRANDED C- | Therapeutic Radiology | 2/28/2025 |
| C2644 | Brachytx cesium-131 chloride | Therapeutic Radiology | 7/28/2023 |
| C2645 | BRACHYTIX PLANAR, P-103 | Therapeutic Radiology | 2/28/2025 |
| C2698 | BRACHYTIX STRANDED NOS | Therapeutic Radiology | 12/30/2024 |
| C2699 | BRACHYTIX NON-STRANDED NO | Therapeutic Radiology | 12/3/2021 |
| C2699 | BRACHYTIX NON-STRANDED NO | Unlisted Procedures | 12/30/2024 |
| C5271 | LOW COST SKIN SUBSTITUTE APP | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| C5271 | LOW COST SKIN SUBSTITUTE APP | Outpatient Procedures (Potentially Cosmetic) | 11/20/2025 |
| C5272 | LOW COST SKIN SUBSTITUTE APP | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| C5272 | LOW COST SKIN SUBSTITUTE APP | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| C5273 | LOW COST SKIN SUBSTITUTE APP | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| C5273 | LOW COST SKIN SUBSTITUTE APP | Outpatient Procedures (Potentially Cosmetic) | 11/20/2025 |
| C5274 | LOW COST SKIN SUBSTITUTE APP | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| C5274 | LOW COST SKIN SUBSTITUTE APP | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| C5275 | LOW COST SKIN SUBSTITUTE APP | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| C5275 | LOW COST SKIN SUBSTITUTE APP | Outpatient Procedures (Potentially Cosmetic) | 11/20/2025 |
| C5276 | LOW COST SKIN SUBSTITUTE APP | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| C5276 | LOW COST SKIN SUBSTITUTE APP | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| C5277 | LOW COST SKIN SUBSTITUTE APP | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| C5277 | LOW COST SKIN SUBSTITUTE APP | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| C5278 | LOW COST SKIN SUBSTITUTE APP | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| C5278 | LOW COST SKIN SUBSTITUTE APP | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| C7504 | Perq cvt&ls inj vert bodies | Spinal Services | 2/28/2025 |
| C7505 | Perq ls&cvf inj vert bodies | Spinal Services | 2/28/2025 |
| C7507 | Perq thor&lumb vert aug | Spinal Services | 2/28/2025 |

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| C7508 | Perq lumb&thor vert aug | Spinal Services | 2/28/2025 |
| C7516 | Cor angio w/ ivus or oct | Diagnostic Radiology | 6/28/2024 |
| C7516 | Cor angio w/ ivus or oct | Outpatient Procedures (Potentially Cosmetic) | 8/30/2024 |
| C7517 | Cor angio w/ilic/fem angio | Diagnostic Radiology | 6/28/2024 |
| C7517 | Cor angio w/ilic/fem angio | Outpatient Procedures (Potentially Cosmetic) | 8/30/2024 |
| C7518 | Cor/gft angio w/ ivus or oct | Diagnostic Radiology | 6/28/2024 |
| C7518 | Cor/gft angio w/ ivus or oct | Outpatient Procedures (Potentially Cosmetic) | 8/30/2024 |
| C7519 | Cor/gft angio w/ flow resrv | Diagnostic Radiology | 6/28/2024 |
| C7519 | Cor/gft angio w/ flow resrv | Outpatient Procedures (Potentially Cosmetic) | 8/30/2024 |
| C7520 | Cor/gft angio w/ilic/fem ang | Diagnostic Radiology | 6/28/2024 |
| C7520 | Cor/gft angio w/ilic/fem ang | Outpatient Procedures (Potentially Cosmetic) | 8/30/2024 |
| C7521 | R hrt angio w/ ivus or oct | Diagnostic Radiology | 6/28/2024 |
| C7521 | R hrt angio w/ ivus or oct | Outpatient Procedures (Potentially Cosmetic) | 8/30/2024 |
| C7522 | R hrt angio w/flow resrv | Diagnostic Radiology | 6/28/2024 |
| C7522 | R hrt angio w/flow resrv | Outpatient Procedures (Potentially Cosmetic) | 8/30/2024 |
| C7523 | L hrt angio w/ ivus or oct | Diagnostic Radiology | 6/28/2024 |
| C7523 | L hrt angio w/ ivus or oct | Outpatient Procedures (Potentially Cosmetic) | 8/30/2024 |
| C7524 | L hrt angio w/flow resrv | Diagnostic Radiology | 6/28/2024 |
| C7524 | L hrt angio w/flow resrv | Outpatient Procedures (Potentially Cosmetic) | 8/30/2024 |
| C7525 | L hrt gft ang w/ ivus or oct | Diagnostic Radiology | 6/28/2024 |
| C7525 | L hrt gft ang w/ ivus or oct | Outpatient Procedures (Potentially Cosmetic) | 8/30/2024 |
| C7526 | L hrt gft ang w/flow resrv | Diagnostic Radiology | 6/28/2024 |
| C7526 | L hrt gft ang w/flow resrv | Outpatient Procedures (Potentially Cosmetic) | 8/30/2024 |
| C7527 | R&l hrt angio w/ ivus or oct | Diagnostic Radiology | 6/28/2024 |
| C7527 | R&l hrt angio w/ ivus or oct | Outpatient Procedures (Potentially Cosmetic) | 8/30/2024 |
| C7528 | R&l hrt angio w/flow resrv | Diagnostic Radiology | 6/28/2024 |
| C7528 | R&l hrt angio w/flow resrv | Outpatient Procedures (Potentially Cosmetic) | 8/30/2024 |
| C7529 | R&l hrt gft ang w/flow resrv | Diagnostic Radiology | 6/28/2024 |
| C7529 | R&l hrt gft ang w/flow resrv | Outpatient Procedures (Potentially Cosmetic) | 8/30/2024 |
| C7531 | Angio fem/pop w/ us | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| C7534 | Fem/pop revasc w/artlhr & us | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| C7535 | Fem/pop revasc w/stent & us | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| C7537 | Insrt atril pm w/l vent lead | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| C7538 | Insrt vent pm w/l vent lead | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| C7539 | Insrt a & v pm w/l vent lead | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| C7540 | Rmv&rplic pm dul w/l vnt lead | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| C7541 | Ercp w/ pancreatoscopy | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| C7552 | R hrt art/grft ang hrt flow | Outpatient Procedures (Potentially Cosmetic) | 12/30/2024 |
| C7553 | R&l hrt art/vent ang dirg ad | Outpatient Procedures (Potentially Cosmetic) | 12/30/2024 |
| C7558 | Cor angio/vent w/drug admin | Outpatient Procedures (Potentially Cosmetic) | 7/26/2024 |
| C8000 | Suprt dev, a-v fistula, imp | Durable Medical Equipment | 11/1/2024 |
| C8002 | Prep skin cell susp, automtd | Outpatient Procedures (Potentially Cosmetic) | 11/20/2025 |
| C8937 | CAD BREAST MRI | Outpatient Procedures (Potentially Cosmetic) | 12/6/2024 |
| C8937 | Cad breast mri | Diagnostic Radiology | 6/28/2024 |
| C9036 | Injection, palisiran | Injectable Medications | 12/2/2022 |
| C9038 | Inj mogamulizumab-kpkc | Injectable Medications | 12/2/2022 |
| C9049 | Injection, tagraxofusp-erzs | Injectable Medications | 7/10/2020 |
| C9050 | Injection, emapalumab-lzsg | Injectable Medications | 7/10/2020 |
| C9052 | Injection, ravulizumab-cwv | Injectable Medications | 7/10/2020 |
| C9053 | Inj, A crizanlizumab-lmca | Injectable Medications | 7/10/2020 |
| C9055 | Inj, brexanolone | Injectable Medications | 10/8/2021 |
| C9056 | Injection, givosiran | Injectable Medications | 7/10/2020 |
| C9058 | Injection, pegfilgrastim-bmez | Injectable Medications | 7/10/2020 |
| C9061 | Injection, teprotumumab-trbw | Injectable Medications | 10/8/2021 |
| C9062 | Daratumumab hyaluronidase | Injectable Medications | 4/30/2021 |
| C9063 | Injection, eplinezumab-ijmr | Injectable Medications | 10/8/2021 |
| C9064 | Mitomycin pyelocalyceal inst | Injectable Medications | 4/30/2021 |
| C9065 | Romidepsin non-lyophilized | Injectable Medications | 12/3/2021 |
| C9066 | Sacituzumab govitecan-hziy | Injectable Medications | 4/30/2021 |
| C9069 | Belantamab mafodantin-blmf | Injectable Medications | 6/25/2021 |
| C9070 | Injection, tafasitamab-cxix | Injectable Medications | 6/25/2021 |
| C9071 | Injection, viitolarsen | Injectable Medications | 6/25/2021 |
| C9072 | Inj, imm glob asceniv | Injectable Medications | 6/25/2021 |
| C9073 | Brexucabtagene autoleucel ca | Transplant | 6/25/2021 |
| C9074 | Injection, lumasiran | Injectable Medications | 8/13/2021 |
| C9075 | Injection, casimersen, 10 mg | Injectable Medications | 12/3/2021 |
| C9076 | Lisocabtagene maraleucel, up to 110 million autologous anti-cd19 car-positive viable t cells, including leukapheresis and dose preparation procedures, per therapeutic dose | Transplant | 12/3/2021 |
| C9077 | Injection, cabotegravir and rilpivirine, 2mg/3mg | Injectable Medications | 12/3/2021 |
| C9078 | Injection, trilaciclib, 1 mg | Injectable Medications | 12/3/2021 |
| C9079 | Injection, evinacumab-dgnb, 5 mg | Injectable Medications | 12/3/2021 |
| C9080 | Injection, melphalan flufenamide hydrochloride, 1 mg | Injectable Medications | 12/3/2021 |
| C9081 | Idecabtagene vicleucel, up to 460 million autologous anti-bcma car-positive viable t cells, including leukapheresis and dose preparation procedures, per therapeutic dose | Transplant | 1/28/2022 |
| C9082 | Injection, dostarlimab-gxly, 100 mg | Injectable Medications | 1/28/2022 |
| C9083 | Injection, amivantamab-vmjw, 10 mg | Injectable Medications | 1/28/2022 |
| C9084 | Injection, loncastuximab tesirine-lpyl, 0.1 mg | Injectable Medications | 5/27/2022 |
| C9085 | Inj avalglucosid alfa-ngpt | Injectable Medications | 5/27/2022 |
| C9086 | Inj, anifrolumab-fnia | Injectable Medications | 5/27/2022 |
| C9090 | Plasminogen, human-tvmh 1 mg | Injectable Medications | 7/29/2022 |
| C9091 | Sirolimus, protein-bound, 1mg | Injectable Medications | 7/29/2022 |

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| C9092 | Inj., xipere, 1 mg | Injectable Medications | 7/29/2022 |
| C9093 | Inj., susvimo, 0.1 mg | Injectable Medications | 7/29/2022 |
| C9094 | Inj. sutimlimab-jome, 10 mg | Injectable Medications | 11/4/2022 |
| C9095 | Inj. tebentafusp-tebn, 1 mcg | Injectable Medications | 11/4/2022 |
| C9096 | Injection, filgrastim-ayow, biosimilar, (releuko), 1 microgram | Injectable Medications | 11/4/2022 |
| C9097 | Inj. faricimab-svoa, 0.1 mg | Injectable Medications | 11/4/2022 |
| C9098 | Celltactabtagene autoleucel, up to 100 million autologous b-cell maturation antigen (bcma) directed car-positive t cells, including leukapheresis and dose preparation procedures, per therapeutic dose | Transplant | 11/4/2022 |
| C9122 | Mometasone furoate (sinuva) | Injectable Medications | 6/25/2021 |
| C9142 | Inj. alymsys, 10 mg | Injectable Medications | 1/27/2023 |
| C9146 | Inj. elahere, 1 mg | Injectable Medications | 8/25/2023 |
| C9147 | Inj. tremelimumab-actl, 1 mg | Injectable Medications | 8/25/2023 |
| C9148 | Inj. teclistamab-cqyv, 0.5mg | Injectable Medications | 8/25/2023 |
| C9149 | Inj. tepilizumab-mzvw, 5 mcg | Injectable Medications | 8/25/2023 |
| C9151 | Inj. pegcetacoplan 1 mg | Injectable Medications | 12/1/2023 |
| C9155 | Inj epcoritamab-bysp,0.16 mg | Medical Oncology (Buy Up) | 2/2/2024 |
| C9157 | Inj. tofersen, 1 mg | Injectable Medications | 2/2/2024 |
| C9159 | Inj. balfaxar, per i.u | Injectable Medications | 2/2/2024 |
| C9160 | Inj daxibotulinumtoxina-lanm | Injectable Medications | 5/31/2024 |
| C9161 | Inj. aflibercept hd, 1 mg | Injectable Medications | 5/31/2024 |
| C9162 | Inj. avacincaptad peg 0.1 mg | Injectable Medications | 5/31/2024 |
| C9163 | Inj talquetamab-igvs 0.25 mg | Injectable Medications | 5/31/2024 |
| C9164 | Cantharidin top, applicator | Injectable Medications | 2/2/2024 |
| C9165 | Inj. eiranatamab-bcmm, 1 mg | Injectable Medications | 5/31/2024 |
| C9166 | Injection, secukinumab, intravenous, 1 mg | Injectable Medications | 7/26/2024 |
| C9167 | Injection, apadamase alfa, 10 units | Injectable Medications | 7/26/2024 |
| C9168 | Injection, mirikizumab-mrkz, 1 mg | Injectable Medications | 7/26/2024 |
| C9169 | Inj. nogapendekin pmln 1 mcg | Injectable Medications | 2/7/2025 |
| C9170 | Inj. tarlatamab-dlle, 1 mg | Injectable Medications | 2/7/2025 |
| C9172 | Inj. beqvez, per tx dose | Injectable Medications | 2/7/2025 |
| C9173 | Inj. nypozl, 1 mcg | Injectable Medications | 8/19/2025 |
| C9174 | Datoprolamab deruxtecan, 1 mg | Injectable Medications | 10/17/2025 |
| C9175 | Inj. tresulfan, 50 mg | Injectable Medications | 10/17/2025 |
| C9301 | Obecabtagene car pos t | Transplant | 8/19/2025 |
| C9302 | Inj zanidatamab, 2 mg | Injectable Medications | 8/19/2025 |
| C9303 | Inj zolbetuximab, 1 mg | Injectable Medications | 8/19/2025 |
| C9304 | Inj marstacimab, 0.5 mg | Injectable Medications | 8/19/2025 |
| C9367 | Endoform Dermal Template | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| C9458 | Florbetaben f18, diagnostic, per study dose, up to 8.1 millicuries | Diagnostic Radiology | 12/3/2021 |
| C9459 | Flutemetamol f18, diagnostic, per study dose, up to 5 millicuries | Diagnostic Radiology | 12/3/2021 |
| C9725 | PLACE ENDORECTAL APP | Therapeutic Radiology | 12/30/2024 |
| C9728 | PLACE DEVICE/MARKER NON- | Therapeutic Radiology | 12/30/2024 |
| C9734 | U/S TRTMT, NOT LEIOMYOMA | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| C9734 | U/S TRTMT, NOT LEIOMYOMA | Outpatient Procedures (Potentially Cosmetic) | 11/20/2025 |
| C9739 | CYSTOSCOPY PROSTATIC IMP 1-3 | Outpatient Procedures (Potentially Cosmetic) | 12/2/2022 |
| C9739 | Cystoscopy prostatic imp 1-3 | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| C9740 | CYSTO IMPL 4 OR MORE | Outpatient Procedures (Potentially Cosmetic) | 12/2/2022 |
| C9740 | Cysto impl 4 or more | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| C9743 | Bulking/spacer material impl | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| C9745 | Nasal endo eustachian tube | Potential Experimental/Investigation/Unproven | 4/30/2021 |
| C9746 | Trans imp balloon cont | Potential Experimental/Investigation/Unproven | 12/2/2022 |
| C9747 | Ablation, HIFU, prostate | Potential Experimental/Investigation/Unproven | 4/30/2021 |
| C9749 | Repair nasal stenosis w/imp | Outpatient Procedures (Potentially Cosmetic) | 4/30/2021 |
| C9752 | INTRAOSSSEOUS DES LUMB/SACRUM | Spinal Services | 1/28/2022 |
| C9752 | Intraosseous des lumb/sacrum | Outpatient Procedures (Potentially Cosmetic) | 12/3/2021 |
| C9753 | INTRAOSSSEOUS DESTRUCT ADD'L | Spinal Services | 1/28/2022 |
| C9753 | Intraosseous destruct add'l | Outpatient Procedures (Potentially Cosmetic) | 12/3/2021 |
| C9754 | Perc av fistula, direct | Outpatient Procedures (Potentially Cosmetic) | 7/10/2020 |
| C9755 | Rf magnetic-guide av fistula | Outpatient Procedures (Potentially Cosmetic) | 7/10/2020 |
| C9757 | SPINE/LUMBAR DISK SURGERY | Spinal Services | 7/28/2023 |
| C9757 | Spine/lumbar disk surgery | Outpatient Procedures (Potentially Cosmetic) | 4/10/2020 |
| C9758 | Interatrial shunt ide | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| C9759 | Transcath intraop microinf | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| C9760 | Non-blind interatrial shunt | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| C9761 | Cysto, litho, vacuum kidney | Outpatient Procedures (Potentially Cosmetic) | 10/8/2021 |
| C9764 | Revasc intravasc lithotripsy | Potential Experimental/Investigation/Unproven | 11/1/2024 |
| C9765 | Revasc intra lithotrip-stent | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| C9766 | Revasc intra lithotrip-ather | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| C9767 | Revasc lithotrip-stent-ather | Potential Experimental/Investigation/Unproven | 11/1/2024 |
| C9768 | Endo us-guide hep porto grad | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| C9770 | Vitrech/mech pars, subref inj | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| C9771 | Nsl/sins cryo post nasal tis | Outpatient Procedures (Potentially Cosmetic) | 2/2/2024 |
| C9772 | Revasc lithotrip tibi/perone | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| C9773 | Revasc lithotr-stent tib/per | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| C9774 | Revasc lithotr-ather tib/per | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| C9775 | Revasc lith-sten-ath tib/per | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| C9779 | Endoscopic submucosal dissection (esd), including endoscopy or colonoscopy, mucosal closure, when performed | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| C9780 | Insertion of central venous catheter through central venous occlusion via inferior and superior approaches (e.g., inside-out technique), including imaging guidance | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| C9781 | Arthro/shoul surg: w/spacer | Potential Experimental/Investigation/Unproven | 12/6/2024 |

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| C9784 | Endo sleeve gastro w/tube | Gastric Bypass | 11/20/2025 |
| C9785 | Endo outlet restrict w/tube | Gastric Bypass | 11/20/2025 |
| C9794 | Complex simulation w/pel-ct | Outpatient Procedures (Potentially Cosmetic) | 7/26/2024 |
| C9795 | Sbrt w/positron emission del | Outpatient Procedures (Potentially Cosmetic) | 7/26/2024 |
| C9796 | Repair of enterocutaneous fistula small intestine or colon (excluding anorectal fistula) with plug (e.g., porcine small intestine submucosa [sis]) | Outpatient Procedures (Potentially Cosmetic) | 2/28/2025 |
| C9807 | Nerve stim non-opioid dev | Durable Medical Equipment | 11/20/2025 |
| D5934 | Mandibular resection prosthesis with guide flange | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| D5935 | Mandibular resection prosthesis without guide flange | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| D5952 | Speech aid prosthesis; pediatric | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| D5953 | Speech aid prosthesis; adult | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| D5955 | Palatal lift prosthesis, definitive | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| D5958 | Palatal lift prosthesis; interim | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| D5959 | Palatal lift prosthesis; modification | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| D5960 | Speech aid prosthesis; modification | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| D5999 | Unspecified maxillofacial prosthesis, by report | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| D7880 | OCCLUSAL ORTHOTIC APPLI | Outpatient Procedures (Potentially Cosmetic) | 8/19/2025 |
| D7881 | OCCLUSAL ORTHOTIC DEVICE ADJUSTMENT | Outpatient Procedures (Potentially Cosmetic) | 2/28/2025 |
| D7899 | Unspecified temporomandibular joint dysfunctions (TMD) therapy, by report | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| D8999 | Unspecified orthodontic procedure, by report | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| D9999 | UNSPEC ADJUNCTIVE PROC | Unlisted Procedures | 7/28/2023 |
| E0446 | TOPICAL OX DELIVER SYS, | Durable Medical Equipment | 7/28/2023 |
| E0446 | Topical oxygen delivery system not otherwise specified, includes all supplies and accessories | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| E0469 | Lung expans high oscil neb | Durable Medical Equipment | 11/1/2024 |
| E0481 | INTRAPULMONARY PERCUSSIVE VENTILATION SYSTEM AND RELATED ACCESSORIES | Durable Medical Equipment | 12/3/2021 |
| E0492 | Control unit nm stim w phone | Durable Medical Equipment | 9/12/2025 |
| E0492 | CONTROL UNIT NM STIM W PHONE | SLEEP MANAGEMENT PROGRAM | 4/1/2026 |
| E0530 | Electronic posa treatment | Durable Medical Equipment | 9/12/2025 |
| E0530 | ELECTRONIC POSA TREATMENT | SLEEP MANAGEMENT PROGRAM | 4/1/2026 |
| E0616 | CARDIAC EVENT RECORDER | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| E0629 | Separate seat lift mechanism for use with patient owned furniture - non-electric | Durable Medical Equipment | 4/30/2021 |
| E0635 | Patient lift, electric, with seat or sling | Durable Medical Equipment | 7/28/2023 |
| E0639 | Patient lift, moveable from room to room with disassembly and reassembly | Durable Medical Equipment | 7/28/2023 |
| E0656 | Segmental pneumatic appliance for use with pump compressor, trunk | Durable Medical Equipment | 8/30/2024 |
| E0657 | Segmental pneumatic appliance for use with pump compressor, chest | Durable Medical Equipment | 8/30/2024 |
| E0670 | Segmental pneumatic appliance for use with pneumatic compressor, integrated, 2 full legs and trunk | Durable Medical Equipment | 8/30/2024 |
| E0677 | Non pneum seq comp trunk | Durable Medical Equipment | 9/12/2025 |
| E0678 | Non pneum seq comp full leg | Durable Medical Equipment | 11/20/2025 |
| E0679 | Non pneum seq comp half leg | Durable Medical Equipment | 11/20/2025 |
| E0680 | Non pneum comp control cal | Durable Medical Equipment | 11/20/2025 |
| E0682 | Non pneum compress full arm | Durable Medical Equipment | 11/20/2025 |
| E0683 | Non pneu peristaltic comp pmp | Durable Medical Equipment | 11/20/2025 |
| E0691 | ULTRAVIL PANEL <=2 SQ FT | Durable Medical Equipment | 7/28/2023 |
| E0692 | ULTRAVIOLET PANEL 4 FOOT | Durable Medical Equipment | 7/28/2023 |
| E0693 | ULTRAVIOLET PANEL 6 FOOT | Durable Medical Equipment | 7/28/2023 |
| E0715 | Intravag pelvic floor kegel | Durable Medical Equipment | 11/1/2024 |
| E0716 | Supp and acces intravag pelv | Durable Medical Equipment | 11/1/2024 |
| E0721 | Trans elec stim auricular | Durable Medical Equipment | 11/20/2025 |
| E0736 | Transcutaneous tibial nerve stimulator | Durable Medical Equipment | 10/17/2025 |
| E0737 | Transcut tibial stim by app | Durable Medical Equipment | 11/1/2024 |
| E0738 | Upper extremity rehabilitation system providing active assistance to facilitate muscle re-education, include microprocessor, all components and accessories | Durable Medical Equipment | 11/20/2025 |
| E0739 | Rehab system with interactive interface providing active assistance in rehabilitation therapy, includes all components and accessories, motors, microprocessors, sensors | Durable Medical Equipment | 11/20/2025 |
| E0743 | Ext low ext nerve stimu rts | Durable Medical Equipment | 11/1/2024 |
| E0747 | Osteogenesis stimulator, electrical, non-invasive, other than spinal applications | Durable Medical Equipment | 7/28/2023 |
| E0764 | Functional neuromuscular stimulator, transcutaneous stimulation of muscles of ambulation with computer control, used for walking by spinal cord injured, entire system, after completion of training program | Durable Medical Equipment | 7/28/2023 |
| E0766 | ELEC STIM CANCER TREATMENT | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| E0767 | Intrabuc am rf emf cancer tx | Durable Medical Equipment | 11/20/2025 |
| E0770 | Functional Electrical Stimulator Transcutaneous Stimulation Of Nerve And/Or Muscle Groups, Any Type, Complete System, Not Otherwise Specified | Durable Medical Equipment | 7/28/2023 |
| E0783 | Infusion Pump, Implantable, Programmable | Durable Medical Equipment | 3/28/2025 |
| E0784 | External ambulatory infusion pump, insulin | Durable Medical Equipment | 7/28/2023 |
| E0986 | MAN W/C PUSH-RIM POW ASSIST | Durable Medical Equipment | 4/29/2022 |
| E1002 | Wheelchair accessory, power seating system, tilt only | Durable Medical Equipment | 4/29/2022 |
| E1003 | Wheelchair accessory, power seating system, recline only, without shear reduction | Durable Medical Equipment | 4/29/2022 |
| E1004 | Wheelchair accessory, power seating system, recline only, with mechanical shear reduction | Durable Medical Equipment | 4/29/2022 |

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| E1005 | Wheelchair accessory, power seating system, recline only, with power shear reduction | Durable Medical Equipment | 12/1/2023 |
| E1006 | Wheelchair accessory, power seating system, combination tilt and recline, without shear reduction | Durable Medical Equipment | 12/1/2023 |
| E1007 | Wheelchair accessory, power seating system, combination tilt and recline, with mechanical shear reduction | Durable Medical Equipment | 4/29/2022 |
| E1008 | Wheelchair accessory, power seating system, combination tilt and recline, with power shear reduction | Durable Medical Equipment | 4/29/2022 |
| E1009 | Wheelchair accessory, addition to power seating system, mechanically linked leg elevation system, including pushrod and leg rest, each | Durable Medical Equipment | 12/1/2023 |
| E1010 | Wheelchair accessory, addition to power seating system, power leg elevation system, including leg rest, pair | Durable Medical Equipment | 4/29/2022 |
| E1220 | Wheelchair; specially sized or constructed (indicate brand name, model number, if any, and justification) | Durable Medical Equipment | 4/29/2022 |
| E1229 | Wheelchair, pediatric size, not otherwise specified | Durable Medical Equipment | 4/29/2022 |
| E1230 | Power operated vehicle (3 or 4 wheel non-highway), specify brand name and model number | Durable Medical Equipment | 12/1/2023 |
| E1239 | Power wheelchair, pediatric size, not otherwise specified | Durable Medical Equipment | 7/28/2023 |
| E1399 | DURABLE MEDI EQUIP MISC | Durable Medical Equipment | 9/12/2025 |
| E1399 | Durable medical equipment , miscellaneous | Unlisted Procedures | 7/28/2023 |
| E1902 | AAC NON-ELECTRONIC BOARD | Durable Medical Equipment | 7/28/2023 |
| E1902 | Communication board, non-electronic augmentative or alternative communication device | Orthotics and Prosthetics | 12/3/2021 |
| E1905 | Vr cbt therapy | Durable Medical Equipment | 11/20/2025 |
| E2104 | Home blood glucose monitor for use with integrated lancing/blood sample testing cartridge | Injectable Medications | 8/30/2024 |
| E2300 | Power wheelchair accessory, power seat elevation system | Durable Medical Equipment | 12/1/2023 |
| E2301 | Power wheelchair accessory, power standing system | Durable Medical Equipment | 12/2/2022 |
| E2502 | Speech generating device, digitized speech, using pre-recorded messages, greater than 8 minutes but less than or equal to 20 minutes recording time | Durable Medical Equipment | 7/28/2023 |
| E2504 | Speech generating device, digitized speech, using pre-recorded messages, greater than 20 minutes but less than or equal to 40 minutes recording time | Durable Medical Equipment | 7/28/2023 |
| E2506 | Speech generating device, digitized speech, using pre-recorded messages, greater than 40 minutes recording time | Durable Medical Equipment | 7/28/2023 |
| E2511 | Speech generating software program, for personal computer or personal digital assistant | Durable Medical Equipment | 7/28/2023 |
| E2512 | Accessory for speech generating device, mounting system | Durable Medical Equipment | 7/28/2023 |
| E2513 | Sgd accessory, emg sensor | Durable Medical Equipment | 11/1/2024 |
| E2599 | Accessory for speech generating device, not otherwise classified | Durable Medical Equipment | 7/28/2023 |
| E3200 | Gait mod systm rhytm auditory | Durable Medical Equipment | 11/20/2025 |
| E3200 | Gait mod systm rhytm auditory | Potential Experimental/Investigation/Unproven | 12/30/2025 |
| G0051 | Pt hospice mnth | Home Health Care | 2/28/2025 |
| G0153 | Services of speech and language pathologist in home health setting, each 15 minutes | Speech Therapy | 7/28/2023 |
| G0155 | SERVICE CLIN SOCIAL WORK | Home Health Care | 8/19/2025 |
| G0156 | SERVICE HOME HEALTH AIDE | Home Health Care | 8/19/2025 |
| G0166 | External counterpulsation, per treatment session | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| G0277 | Hbot, full body chamber, 30m | Durable Medical Equipment | 11/20/2025 |
| G0297 | Low dose ct scan (ldct) for lung cancer screening | Diagnostic Radiology | 4/30/2021 |
| G0299 | Direct skilled nursing services of a registered nurse (rn) in the home health or hospice setting, each 15 minutes | Home Health Care | 8/19/2025 |
| G0300 | Direct skilled nursing services of a license practical nurse (lpn) in the home health or hospice setting, each 15 minutes | Home Health Care | 8/19/2025 |
| G0308 | Creation of subcutaneous pocket with insertion of 180 day implantable interstitial glucose sensor, including system activation and patient training | Potential Experimental/Investigation/Unproven | 1/27/2023 |
| G0309 | Removal of implantable interstitial glucose sensor with creation of subcutaneous pocket at different anatomic site and insertion of new 180 day implantable sensor, including system activation | Potential Experimental/Investigation/Unproven | 1/27/2023 |
| G0337 | HOSPICE EVALUATION PREEL | Home Health Care | 8/19/2025 |
| G0339 | Image-guided robotic linear accelerator-based stereotactic radiosurgery, complete course of therapy in one session or first session of fractionated treatment | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| G0340 | Image-guided robotic linear accelerator-based stereotactic radiosurgery, delivery including collimator changes and custom plugging, fractionated treatment, all lesions, per session, second through fifth sessions, maximum five sessions per course of treatm | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| G0398 | Home sleep study test (HST) with type II portable monitor, unattended; minimum of 7 channels: EEG, EOG, EMG, ECG/heart rate, airflow, respiratory effort and oxygen saturation | Sleep Management Program | 10/8/2021 |
| G0399 | Home sleep test (HST) with type III portable monitor, unattended; minimum of 4 channels: 2 respiratory movement/airflow, 1 ECG/heart rate and 1 oxygen saturation | Sleep Management Program | 10/8/2021 |
| G0400 | Home sleep test (HST) with type IV portable monitor; minimum of 3 channels | Sleep Management Program | 10/8/2021 |
| G0422 | Intens Cardiac Rehab W/Exerc | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| G0423 | Intens Cardiac Rehab No Exer | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| G0428 | Collagen Meniscus Implant procedure for filling meniscal defects (e.g., CMI, collagen scaffold, Menaflex) | Potential Experimental/Investigation/Unproven | 7/28/2023 |

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| G0429 | Dermal Filler injection(s) for the treatment of facial lipodystrophy syndrome (LDS) (e.g.,as a result of highly active antiretroviral therapy) | Potential Experimental/Investigation/Unproven | 4/30/2021 |
| G0448 | INSERTION OR REPLACEMENT OF A PERMANENT PACING CARDIOVERTER-DEFIBRILLATOR SYSTEM WITH TRANSVENOUS LEAD(S), SINGLE OR DUAL CHAMBER WITH INSERTION OF PACING ELECTRODE, CARDIAC VENOUS SYSTEM, FOR LEFT VENTRICULAR PACING | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| G0448 | PLACE PERM PACING CARDIO | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| G0455 | FECAL MICROBIOTA PREP IN | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| G0455 | Preparation with instillation of fecal microbiota by any method, including assessment of donor specimen | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| G0460 | AUTOLOGOUS PRP FOR ULCER | Potential Experimental/Investigation/Unproven | 11/13/2020 |
| G0564 | 365 d implant glucose sensor | Potential Experimental/Investigation/Unproven | 4/25/2025 |
| G2000 | Blinded conv. tx mdd clin tr | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| G2170 | Avf by tissue w thermal e | Potential Experimental/Investigation/Unproven | 4/30/2021 |
| G2171 | Avf use magnetic/art/ven | Potential Experimental/Investigation/Unproven | 4/30/2021 |
| G9143 | Warfarin responsiveness testing by genetic technique using any method, any number of specimen(s) | Potential Experimental/Investigation/Unproven | 6/17/2022 |
| G9147 | OUTPT IV INSULIN TX ANY | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| G9687 | HOSPICE ANYTIME MSMT PER | Home Health Care | 2/28/2025 |
| G9690 | PT REC HOSPICE DUR MSMT PER | Home Health Care | 2/28/2025 |
| G9720 | HOSPICE ANYTIME MSMT PER | Home Health Care | 2/28/2025 |
| G9758 | HOSPICE OR TERM PHASE | Home Health Care | 2/28/2025 |
| G9858 | PT ENROLL HOSPICE | Home Health Care | 2/28/2025 |
| G9860 | PT LESS 3D HOSPICE | Home Health Care | 2/28/2025 |
| G9861 | PT MORE THAN 3D HOSPICE | Home Health Care | 2/28/2025 |
| J0135 | Injection, Adalimumab, 20 mg | Injectable Medications | 2/7/2025 |
| J0185 | Inj., aprepitant, 1 mg | Injectable Medications | 5/30/2025 |
| J0208 | Injection, sodium thiosulfate, 100 mg | Injectable Medications | 10/17/2025 |
| J0349 | Inj, rezafungin, 1 mg | Injectable Medications | 5/14/2026 |
| J0614 | Injection, tresosulfan, 50 mg | Injectable Medications | 10/17/2025 |
| J0641 | LEVOLEUCOVORIN INJECTION | Injectable Medications | 10/17/2025 |
| J0642 | Injection, levoleucovorin (khapsory), 0.5 mg | Injectable Medications | 10/17/2025 |
| J0800 | ACTHAR H.P. | Injectable Medications | 12/1/2023 |
| J0870 | Injection, imetelstat, 1 mg | Injectable Medications | 10/17/2025 |
| J0881 | DARBEPOETIN ALFA, NON-ES | Injectable Medications | 10/17/2025 |
| J0881 | Injection, darbepoetin alfa, 1 mcg (non-ESRD use) | Injectable Medications | 9/13/2020 |
| J0885 | EPOETIN ALFA, NON-ESRD | Injectable Medications | 10/17/2025 |
| J0885 | EPOETIN ALFA, NON-ESRD | Outpatient Procedures (Potentially Cosmetic) | 9/27/2024 |
| J0885 | Injection, epoetin alfa, (for non-ESRD use), 1000 units | Injectable Medications | 6/28/2024 |
| J0893 | Inj, dextabine (sun pharma) | Injectable Medications | 10/17/2025 |
| J0894 | DECITABINE INJECTION | Injectable Medications | 10/17/2025 |
| J0897 | Injection, denosumab, 1 mg | Injectable Medications | 10/17/2025 |
| J1300 | Injection, eculizumab, 10 mg (Soliris) | Injectable Medications | 4/25/2025 |
| J1323 | Injection, elranatamab-bcmm, 1 mg | Injectable Medications | 10/17/2025 |
| J1326 | Inj, zolbetuximab-clzb, 2 mg | Injectable Medications | 10/17/2025 |
| J1434 | Injection, fosaprepitant (focinvez), 1 mg | Injectable Medications | 5/30/2025 |
| J1442 | INJ, FILGRASTIM G-CSF 1MCG | Injectable Medications | 10/17/2025 |
| J1447 | INJ TBO FILGRASTIM 1 MICROG | Injectable Medications | 10/17/2025 |
| J1448 | Injection, trilaciclib, 1 mg | Injectable Medications | 10/17/2025 |
| J1449 | Injection, eflapegrastim-xnst, 0.1 mg | Injectable Medications | 6/28/2024 |
| J1449 | Injection, eflapegrastim-xnst, 0.1 mg | Injectable Medications | 10/17/2025 |
| J1449 | Injection, eflapegrastim-xnst, 0.1 mg | Outpatient Procedures (Potentially Cosmetic) | 9/27/2024 |
| J1453 | FOSAPREPITANT INJECTION] | Injectable Medications | 5/30/2025 |
| J1454 | Inj fosnetupitant, palonoset | Injectable Medications | 5/30/2025 |
| J1456 | Inj, fosaprepitant (teva) | Injectable Medications | 5/30/2025 |
| J1627 | Inj, granisetron, xr, 0.1 mg | Injectable Medications | 5/30/2025 |
| J1749 | Inj, iloprost, 0.1 mcg | Injectable Medications | 12/30/2024 |
| J1930 | Injection, Lanreotide, 1 MG | Injectable Medications | 10/17/2025 |
| J1932 | Inj, lanreotide, (cipla) 1mg | Injectable Medications | 10/17/2025 |
| J1950 | LEUPROLIDE ACET /3.75 MG | Injectable Medications | 10/17/2025 |
| J1952 | Leuprolide inj, camcevi, 1mg | Injectable Medications | 10/17/2025 |
| J1954 | Injection, leuprolide acetate for depot suspension (lutrate), 7.5 mg | Injectable Medications | 10/17/2025 |
| J2353 | Octreotide acetate, depot IM, 1 mg | Injectable Medications | 10/17/2025 |
| J2354 | Octreotide acetate, non-depot SC/IV, 25 mcg | Injectable Medications | 10/17/2025 |
| J2403 | Chlorprocaine hcl ophthalmic, 3% gel, 1 mg | Injectable Medications | 5/31/2024 |
| J2427 | Inj, invenga hafyera/trinza | Injectable Medications | 12/27/2023 |
| J2468 | Injection, palonosetron hydrochloride (avyxa), not therapeutically equivalent to J2469, 25 micrograms | Injectable Medications | 5/30/2025 |
| J2469 | PALONOSETRON HCL | Injectable Medications | 5/30/2025 |
| J2503 | Injection, pegaptanib sodium, 0.3 mg | Injectable Medications | 10/17/2025 |
| J2505 | PEGFILGRASTIM 6 MG INJEC | Injectable Medications | 1/28/2022 |
| J2506 | Inj pegfilgrast ex bio 0.5mg | Injectable Medications | 10/17/2025 |
| J2787 | Riboflavin 5'Phos oph<=3ml | Injectable Medications | 9/29/2023 |
| J2796 | Romiplostim Injection | Injectable Medications | 2/7/2025 |
| J2797 | Inj., rolapitant, 0.5 mg | Injectable Medications | 10/17/2025 |
| J2798 | Inj., perseris, 0.5 mg | Injectable Medications | 4/30/2021 |
| J2802 | Inj, romiplostim 1 microgram | Injectable Medications | 10/17/2025 |
| J2860 | Injection, siliximab, 10 mg | Injectable Medications | 10/17/2025 |
| J3055 | Injection, talquetamab-tgvs, 0.25 mg | Injectable Medications | 10/17/2025 |
| J3262 | Injection, tocilizumab, 1 MG | Injectable Medications | 10/17/2025 |
| J3263 | Injection, toripalimab-tpzi, 1 mg | Injectable Medications | 10/17/2025 |
| J3315 | TRIPTORELIN PAMOATE | Injectable Medications | 6/28/2024 |
| J3315 | TRIPTORELIN PAMOATE | Injectable Medications | 10/17/2025 |

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| J3315 | TRIPTORELIN PAMOATE | Outpatient Procedures (Potentially Cosmetic) | 9/27/2024 |
| J3490 | Unclassified Drugs | Unlisted Procedures | 11/13/2020 |
| J3590 | Unclassified biologics | Unlisted Procedures | 11/13/2020 |
| J7333 | Hyaluronan or derivative, visco-3, for intraarticular injection, per dose. | Injectable Medications | 6/25/2021 |
| J7340 | Carbidopa 5 mg/levodopa 20 mg enteral suspension | Outpatient Procedures (Potentially Cosmetic) | 11/13/2020 |
| J7401 | Mometasone furoate sinus imp | Potential Experimental/Investigation/Unproven | 6/25/2021 |
| J7402 | Mometasone sinus sinuva | Injectable Medications | 8/13/2021 |
| J7677 | Revefenacin inh non-com 1mcg | Outpatient Procedures (Potentially Cosmetic) | 5/8/2020 |
| J7799 | NOC Drugs; other than inhalation | Unlisted Procedures | 9/12/2025 |
| J7999 | Compounded drug, not otherwise classified | Unlisted Procedures | 11/13/2020 |
| J9000 | DOXORUBICIN HCL CHEMO | Injectable Medications | 10/17/2025 |
| J9011 | Injection, datopotamab deruxtecandink, 1 mg | Injectable Medications | 10/17/2025 |
| J9015 | ALDESLEUKIN/SGL USE VIAL | Injectable Medications | 10/17/2025 |
| J9017 | HISTRELIN IMPLANT | Injectable Medications | 10/17/2025 |
| J9019 | Injection, asparaginase (erwinaze), 1,000 iu | Injectable Medications | 10/17/2025 |
| J9021 | Inj, aspara, rylaze, 0.1 mg | Injectable Medications | 10/17/2025 |
| J9022 | Inj, atezolizumab,10 mg | Injectable Medications | 10/17/2025 |
| J9023 | Injection, avelumab, 10 mg | Injectable Medications | 10/17/2025 |
| J9024 | Injection, atezolizumab, 5 mg and hyaluronidase-tajs | Injectable Medications | 10/17/2025 |
| J9026 | Inj, tarlatamab-dlle, 1 mg | Injectable Medications | 10/17/2025 |
| J9027 | CLOFARABINE INJECTION | Injectable Medications | 10/17/2025 |
| J9028 | Inj, nogapendekin pmln, 1mcg | Injectable Medications | 10/17/2025 |
| J9032 | Injection, belinostat, 10 mg | Injectable Medications | 10/17/2025 |
| J9033 | Injection, bendamustine HCl, 1 mg | Injectable Medications | 10/17/2025 |
| J9034 | Inj., bendeka 1 mg | Injectable Medications | 10/17/2025 |
| J9035 | Injection, bevacizumab, 10 mg (Avastin) | Injectable Medications | 10/17/2025 |
| J9036 | Inj., belrapzo, 1 mg | Injectable Medications | 10/17/2025 |
| J9037 | Inj belantamab mafodot blmf | Injectable Medications | 4/25/2025 |
| J9039 | Injection, blinatumomab, 1 microgram | Injectable Medications | 10/17/2025 |
| J9040 | BLEOMYCIN SULF INJ 15 U | Injectable Medications | 10/17/2025 |
| J9041 | BORTEZOMIB INJECTION | Injectable Medications | 10/17/2025 |
| J9042 | Injection, brentuximab vedotin, 1 mg | Injectable Medications | 10/17/2025 |
| J9043 | Injection, cabazitaxel, 1 mg | Injectable Medications | 10/17/2025 |
| J9044 | Inj, borteozomib, nos, 0.1 mg | Injectable Medications | 1/27/2023 |
| J9045 | CARBOPLATIN INJECT 50MG | Injectable Medications | 10/17/2025 |
| J9046 | Inj, borteozomib, dr. reddy's | Injectable Medications | 10/17/2025 |
| J9047 | INJECTION, CARFILZOMIB, 1 MG | Injectable Medications | 10/17/2025 |
| J9048 | Inj, borteozomib freseniuskab | Injectable Medications | 10/17/2025 |
| J9049 | Inj, borteozomib, hospira | Injectable Medications | 10/17/2025 |
| J9054 | Injection, borteozomib (boruzu), 0.1 mg | Injectable Medications | 10/17/2025 |
| J9055 | Injection, cetuximab, 10 mg (Erbilux) | Injectable Medications | 10/17/2025 |
| J9056 | Inj, bendamustine, 1 mg | Injectable Medications | 10/17/2025 |
| J9057 | Inj., copanlisib, 1 mg | Injectable Medications | 10/17/2025 |
| J9058 | Inj apotex/bendamustine 1 mg | Injectable Medications | 2/7/2025 |
| J9059 | Inj bendamustine, baxter 1mg | Injectable Medications | 2/7/2025 |
| J9060 | CISPLATIN INJ / 10 MG | Injectable Medications | 10/17/2025 |
| J9061 | Inj, amivantamab-vmjw | Injectable Medications | 10/17/2025 |
| J9063 | Inj, elahere, 1 mg | Injectable Medications | 10/17/2025 |
| J9098 | CYTARABINE LIPOSOME | Injectable Medications | 10/17/2025 |
| J9100 | CYTARABINE INJ 100 MG | Injectable Medications | 10/17/2025 |
| J9118 | Inj, Calaspargase pegol-mknl | Injectable Medications | 10/17/2025 |
| J9119 | Inj., cemiplimab-rlwc, 1 mg | Injectable Medications | 10/17/2025 |
| J9120 | DACTINOMYCIN 0.5 MG INJ | Injectable Medications | 10/17/2025 |
| J9130 | DACARBAZINE INJ 100 MG | Injectable Medications | 10/17/2025 |
| J9144 | Daratumumab, hyaluronidase | Injectable Medications | 10/17/2025 |
| J9145 | Injection, daratumumab 10 mg | Injectable Medications | 10/17/2025 |
| J9150 | DAUNORUBICIN 10MG | Injectable Medications | 10/17/2025 |
| J9153 | Inj daunorubicin, cytarabine | Injectable Medications | 10/17/2025 |
| J9155 | DEGARELIX INJECTION | Injectable Medications | 10/17/2025 |
| J9161 | Injection, denileukin difitox-cxdl, 1 mcg | Injectable Medications | 10/17/2025 |
| J9171 | DOCEAXEL INJECTION | Injectable Medications | 10/17/2025 |
| J9172 | Docetaxel (ingenus), 1 mg | Injectable Medications | 10/17/2025 |
| J9173 | Inj., durvalumab, 10 mg | Injectable Medications | 10/17/2025 |
| J9174 | Inj, docetaxel (beizray) 1mg | Injectable Medications | 10/17/2025 |
| J9176 | Injection, elotuzumab, 1mg | Injectable Medications | 10/17/2025 |
| J9177 | Injection, enfortumab vedotin-efv, 0.25 mg. | Injectable Medications | 10/17/2025 |
| J9178 | INJ, EPIRUBICIN HCL 2 MG | Injectable Medications | 10/17/2025 |
| J9179 | ERIBULIN MESYLATE INJECT | Injectable Medications | 10/17/2025 |
| J9181 | ETOPOSIDE INJEC 10 MG | Injectable Medications | 10/17/2025 |
| J9185 | FLUDARABINE PHOSPH 50 MG | Injectable Medications | 10/17/2025 |
| J9190 | FLUOROURACIL INJ 500 MG | Injectable Medications | 10/17/2025 |
| J9196 | Injection, gemcitabine hydrochloride (accord), not therapeutically equivalent to J9201, 200 mg | Injectable Medications | 6/28/2024 |
| J9196 | Injection, gemcitabine hydrochloride (accord), not therapeutically equivalent to J9201, 200 mg | Injectable Medications | 10/17/2025 |
| J9196 | Injection, gemcitabine hydrochloride (accord), not therapeutically equivalent to J9201, 200 mg | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| J9198 | Gemcitabine hydrochloride, (Infugem), 100 mg. | Injectable Medications | 10/17/2025 |
| J9199 | Injection, infugem, 200 mg | Medical Oncology (Buy Up) | 7/10/2020 |
| J9200 | FLOXURIDINE INJ 500 MG | Injectable Medications | 10/17/2025 |
| J9201 | GEMCITABINE HCL 200 MG | Injectable Medications | 10/17/2025 |
| J9202 | GOSERELIN ACETATE IMPLNT | Injectable Medications | 10/17/2025 |
| J9203 | GEMTUZUMAB OZOGAMICIN 0.1 MG | Injectable Medications | 10/17/2025 |

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| J9204 | Inj mogamulizumab-kpkc, 1 mg | Injectable Medications | 10/17/2025 |
| J9205 | Inj irinotecan liposome 1 mg | Injectable Medications | 10/17/2025 |
| J9206 | IRINOTECAN 20 MG | Injectable Medications | 10/17/2025 |
| J9207 | [XABEPILONE INJECTION] | Injectable Medications | 10/17/2025 |
| J9208 | [IFOSFAMIDE INJECTION] | Injectable Medications | 10/17/2025 |
| J9211 | IDARUBICIN HCL INJ 5 MG | Injectable Medications | 10/17/2025 |
| J9214 | Interferon alfa-2B, recombinant, 1 million units | Injectable Medications | 10/17/2025 |
| J9216 | INTERFERON GAMMA 1-B INJ | Injectable Medications | 10/17/2025 |
| J9216 | INTERFERON GAMMA 1-B INJ | Outpatient Procedures (Potentially Cosmetic) | 9/27/2024 |
| J9216 | Injection, interferon, gamma 1-b, 3 million units | Injectable Medications | 6/28/2024 |
| J9217 | LEUPROLIDE ACET SUSPNSN | Injectable Medications | 10/17/2025 |
| J9223 | Inj. lurbinctedin, 0.1 mg | Injectable Medications | 10/17/2025 |
| J9225 | Histrelin implant (Vantas), 50 mg | Injectable Medications | 10/17/2025 |
| J9227 | Injection, isatuximab-irfc, 10 mg | Injectable Medications | 10/17/2025 |
| J9227 | Injection, isatuximab-irfc, 10 mg | Medical Oncology (Buy Up) | 11/13/2020 |
| J9228 | INJECTION, IPILIMUMAB, 1 MG | Injectable Medications | 10/17/2025 |
| J9229 | Inj inolizumab ozogam 0.1 mg | Injectable Medications | 10/17/2025 |
| J9230 | MECHLORETHAMINE HCL INJ | Injectable Medications | 10/17/2025 |
| J9246 | Injection, melphalan (evomela), 1 mg. | Injectable Medications | 10/17/2025 |
| J9247 | Injection, melphalan flufenamide, 1mg | Injectable Medications | 4/25/2025 |
| J9248 | Injection, melphalan (hepzato), 1 mg | Injectable Medications | 10/17/2025 |
| J9249 | Injection, melphalan (apotex), 1 mg | Injectable Medications | 10/17/2025 |
| J9258 | Paclitaxel (teva) | Injectable Medications | 12/6/2024 |
| J9259 | Paclitaxel (american regent) | Injectable Medications | 2/7/2025 |
| J9262 | INJ, OMACETAXINE MEP, 0.01MG | Injectable Medications | 10/17/2025 |
| J9263 | OXALIPLATIN 0.5 MG INJEC | Injectable Medications | 10/17/2025 |
| J9264 | Injection, paclitaxel protein-bound particles, 1 mg | Injectable Medications | 10/17/2025 |
| J9266 | PEGASPARGASE/SGL DOSE VI | Injectable Medications | 10/17/2025 |
| J9268 | PENTOSTATIN INJ / 10 MG | Injectable Medications | 10/17/2025 |
| J9269 | Inj. tagraxofusp-erzs 10 mcg | Injectable Medications | 10/17/2025 |
| J9271 | Injection, pembrolizumab, 1 mg | Injectable Medications | 10/17/2025 |
| J9272 | Inj. dostarlimab-gxly, 10 mg | Injectable Medications | 10/17/2025 |
| J9273 | Inj tisotu vedotin-fftv, 1 mg | Injectable Medications | 10/17/2025 |
| J9274 | Inj. tebentafusp-tebn, 1 mcg | Injectable Medications | 10/17/2025 |
| J9275 | Inj cosibelimab-ipdl, 2 mg | Injectable Medications | 10/17/2025 |
| J9276 | Inj zanidatamab-hrli, 2 mg | Injectable Medications | 10/17/2025 |
| J9281 | Mitomycin instillation | Injectable Medications | 10/17/2025 |
| J9285 | INJ, OLARATUMAB, 10 MG | Injectable Medications | 10/17/2025 |
| J9286 | Injection, glofitamab-gxhm, 2.5 mg | Injectable Medications | 10/17/2025 |
| J9289 | Inj nivolumab 2 mg hyaluron | Injectable Medications | 10/17/2025 |
| J9292 | Inj, pemtrexed (avyxa) 10mg | Injectable Medications | 10/17/2025 |
| J9293 | MITOXANTRINE HCL INJ /5MG | Injectable Medications | 10/17/2025 |
| J9294 | Injection, pemtrexed (hospira) not therapeutically equivalent to j9305, 10 mg | Injectable Medications | 10/17/2025 |
| J9295 | Injection, necitumumab, 1 mg | Injectable Medications | 10/17/2025 |
| J9296 | Injection, pemtrexed (accord) not therapeutically equivalent to j9305, 10 mg J9297 Add Injection, pemtrexed (sandoz), not therapeutically equivalent to j9305, 10 mg | Injectable Medications | 10/17/2025 |
| J9297 | Injection, pemtrexed (accord) not therapeutically equivalent to j9305, 10 mg J9297 Add Injection, pemtrexed (sandoz), not therapeutically equivalent to j9305, 10 mg | Injectable Medications | 10/17/2025 |
| J9298 | Inj nivol relatlimab 3mg/1mg | Injectable Medications | 10/17/2025 |
| J9299 | Injection, nivolumab, 1 mg | Injectable Medications | 10/17/2025 |
| J9301 | Obinutuzumab inj | Injectable Medications | 10/17/2025 |
| J9303 | Injection, panitumumab, 10 mg (Vectibix) | Injectable Medications | 10/17/2025 |
| J9304 | Injection, pemtrexed (PEMFEXY), 10 mg | Injectable Medications | 10/17/2025 |
| J9304 | Injection, pemtrexed (PEMFEXY), 10 mg | Medical Oncology (Buy Up) | 11/13/2020 |
| J9305 | ALIMTA | Injectable Medications | 10/17/2025 |
| J9306 | INJECTION, PERTUZUMAB, 1 MG | Injectable Medications | 10/17/2025 |
| J9308 | Injection, ramucirumab, 5 mg | Injectable Medications | 10/17/2025 |
| J9309 | INJ, POLATUZUMAB VEDOTIN 1MG | Injectable Medications | 10/17/2025 |
| J9309 | Inj. polatuzumab vedotin 1mg | Medical Oncology (Buy Up) | 2/25/2022 |
| J9311 | Inj rituximab, hyaluronidase | Injectable Medications | 10/17/2025 |
| J9312 | Inj., rituximab, 10 mg | Injectable Medications | 10/17/2025 |
| J9313 | Inj., lumoxiti, 0.01 mg | Injectable Medications | 10/17/2025 |
| J9314 | Injection, pemtrexed (teva) not therapeutically equivalent to J9305, 10 mg | Injectable Medications | 10/17/2025 |
| J9314 | Injection, romidepsin, non-lyophilized (e.g. liquid), 0.1 mg | Injectable Medications | 8/13/2021 |
| J9315 | ROMIDEPSIN INJECTION | Injectable Medications | 12/3/2021 |
| J9316 | Pertuzu, frastuzu, 10 mg | Injectable Medications | 10/17/2025 |
| J9317 | Sacituzumab govitecan-hziy | Injectable Medications | 10/17/2025 |
| J9318 | Injection, romidepsin, non-lyophilized, 0.1 mg | Injectable Medications | 10/17/2025 |
| J9319 | Injection, romidepsin, lyophilized, 0.1 mg | Injectable Medications | 10/17/2025 |
| J9320 | STREPTOZOCIN INJECT 1 GM | Injectable Medications | 10/17/2025 |
| J9321 | Injection, epcoritamab-bysp, 0.16 mg | Injectable Medications | 10/17/2025 |
| J9322 | Inj pemtrexed (bluepoint) | Injectable Medications | 10/17/2025 |
| J9323 | Inj pemtrexed ditromelthamin | Injectable Medications | 10/17/2025 |
| J9324 | Inj, pemrydi rtu, 10 mg | Injectable Medications | 10/17/2025 |
| J9325 | Inj talimogene laherparepvec | Injectable Medications | 10/17/2025 |
| J9327 | Injection, pemtrexed (pemrydi rtu), 10 mg | Injectable Medications | 2/2/2024 |
| J9328 | TEMOZOLOMIDE INJECTION | Injectable Medications | 10/17/2025 |
| J9329 | Inj. tislelizumab-jsgf | Injectable Medications | 10/17/2025 |
| J9330 | TEMSIROLIMUS INJECTION] | Injectable Medications | 10/17/2025 |

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| J9331 | Injection, sirolimus protein-bound particles, 1 mg | Injectable Medications | 10/17/2025 |
| J9340 | THIOTEPA INJECTION 15 MG | Medical Oncology (Buy Up) | 8/19/2025 |
| J9341 | Inj thiotepa (teplyute) 1 mg | Injectable Medications | 10/17/2025 |
| J9342 | Inj thiotepa nos 1 mg | Injectable Medications | 10/17/2025 |
| J9347 | Inj, tremelimumab-actl, 1 mg | Injectable Medications | 10/17/2025 |
| J9348 | Injection, naxitamab-gqgk, 1 mg | Injectable Medications | 10/17/2025 |
| J9349 | Inj., tafasitamab-cxix | Injectable Medications | 10/17/2025 |
| J9350 | Inj mosuneluzumab-axgb, 1 mg | Injectable Medications | 10/17/2025 |
| J9352 | Injection trabectedin 0.1mg | Injectable Medications | 10/17/2025 |
| J9353 | Injection, margetuximab-cmkb, 5 mg | Injectable Medications | 10/17/2025 |
| J9354 | INJ, ADO-TRASTUZUMAB EMT 1MG | Injectable Medications | 10/17/2025 |
| J9355 | Injection, trastuzumab, 10 mg (Herceptin) | Injectable Medications | 10/17/2025 |
| J9356 | Inj. herceptin hylecta, 10mg | Injectable Medications | 10/17/2025 |
| J9358 | Injection, fam-trastuzumab deruxtecan-nxki, 1 mg. | Injectable Medications | 10/17/2025 |
| J9359 | Inj lon tesirin-lpyl 0.075mg | Injectable Medications | 10/17/2025 |
| J9360 | VINBLASTINE SULF INJ 1MG | Injectable Medications | 10/17/2025 |
| J9361 | Injection, efbemalenograslim alfa-vuxw, 0.5 mg | Injectable Medications | 6/27/2025 |
| J9371 | INJ, VINCRIStINE SUL LIP 1MG | Injectable Medications | 7/26/2024 |
| J9380 | Inj teclistamab cqv 0.5 mg | Injectable Medications | 10/17/2025 |
| J9382 | Inj zenocutuzumab-zbco 1 mg | Injectable Medications | 10/17/2025 |
| J9393 | Inj, fulvestrant (teva) | Injectable Medications | 10/17/2025 |
| J9394 | Inj, fulvestrant (fresenius) | Injectable Medications | 10/17/2025 |
| J9400 | INJ, ZIV-AFLIBERCEPT, 1MG | Injectable Medications | 10/17/2025 |
| J9999 | Not otherwise classified, antieoplastic drugs | Unlisted Procedures | 11/13/2020 |
| K0005 | Ultra-lightweight wheelchair | Durable Medical Equipment | 4/29/2022 |
| K0009 | Other manual wheelchair/base | Durable Medical Equipment | 4/29/2022 |
| K0010 | Standard-weight frame motorized/power wheelchair | Durable Medical Equipment | 7/28/2023 |
| K0011 | Standard-weight frame motorized/power wheelchair with programmable control parameters for speed adjustment, tremor dampening, acceleration control and braking | Durable Medical Equipment | 7/28/2023 |
| K0012 | Lightweight portable motorized/power wheelchair | Durable Medical Equipment | 7/28/2023 |
| K0014 | Other motorized/power wheelchair base | Durable Medical Equipment | 7/28/2023 |
| K0553 | THER CGM SUPPLY ALLOWANCE | Durable Medical Equipment | 1/27/2023 |
| K0554 | THER CGM RECEIVER/MONITOR | Durable Medical Equipment | 1/27/2023 |
| K0606 | AUTO EXTER DEFIBRILLATOR | Durable Medical Equipment | 7/28/2023 |
| K0606 | AUTO EXTER DEFIBRILLATOR | Outpatient Procedures (Potentially Cosmetic) | 6/9/2023 |
| K0606 | Automatic external defibrillator, with integrated electrocardiogram analysis, garment type | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| K0800 | Power operated vehicle, group 1 standard, patient weight capacity up to and including 300 pounds | Durable Medical Equipment | 7/28/2023 |
| K0801 | Power operated vehicle, group 1 heavy duty, patient weight capacity 301 to 450 pounds | Durable Medical Equipment | 7/28/2023 |
| K0802 | Power operated vehicle, group 1 very heavy duty, patient weight capacity 451 to 600 pounds | Durable Medical Equipment | 7/28/2023 |
| K0806 | Power operated vehicle, group 2 standard, patient weight capacity up to and including 300 pounds | Durable Medical Equipment | 4/29/2022 |
| K0807 | Power operated vehicle, group 2 heavy duty, patient weight capacity 301 to 450 pounds | Durable Medical Equipment | 4/29/2022 |
| K0808 | Power operated vehicle, group 2 very heavy duty, patient weight capacity 451 to 600 pounds | Durable Medical Equipment | 12/1/2023 |
| K0812 | Power operated vehicle, not otherwise classified | Durable Medical Equipment | 4/29/2022 |
| K0813 | Power wheelchair, group 1 standard, portable, sling/solid seat and back, patient weight capacity up to and including 300 pounds | Durable Medical Equipment | 7/28/2023 |
| K0814 | Power wheelchair, group 1 standard, portable, captain's chair, patient weight capacity up to and including 300 pounds | Durable Medical Equipment | 12/1/2023 |
| K0815 | Power wheelchair, group 1 standard, sling/solid seat and back, patient weight capacity up to and including 300 pounds | Durable Medical Equipment | 7/28/2023 |
| K0816 | Power wheelchair, group 1 standard, captain's chair, patient weight capacity up to and including 300 pounds | Durable Medical Equipment | 4/29/2022 |
| K0820 | Power wheelchair, group 2 standard, portable, sling/solid seat/back, patient weight capacity up to and including 300 pounds | Durable Medical Equipment | 7/28/2023 |
| K0821 | Power wheelchair, group 2 standard, portable, captain's chair, patient weight capacity up to and including 300 pounds | Durable Medical Equipment | 7/28/2023 |
| K0822 | Power wheelchair, group 2 standard, sling/solid seat/back, patient weight capacity up to and including 300 pounds | Durable Medical Equipment | 7/28/2023 |
| K0823 | Power wheelchair, group 2 standard, captain's chair, patient weight capacity up to and including 300 pounds | Durable Medical Equipment | 12/1/2023 |
| K0824 | Power wheelchair, group 2 heavy duty, sling/solid seat/back, patient weight capacity 301 to 450 pounds | Durable Medical Equipment | 4/29/2022 |
| K0825 | Power wheelchair, group 2 heavy duty, captain's chair, patient weight capacity 301 to 450 pounds | Durable Medical Equipment | 4/29/2022 |
| K0826 | Power wheelchair, group 2 very heavy duty, sling/solid seat/back, patient weight capacity 451 to 600 pounds | Durable Medical Equipment | 7/28/2023 |
| K0827 | Power wheelchair, group 2 very heavy duty, captain's chair, patient weight capacity 451 to 600 pounds | Durable Medical Equipment | 7/28/2023 |
| K0828 | Power wheelchair, group 2 extra heavy duty, sling/solid seat/back, patient weight capacity 601 pounds or more | Durable Medical Equipment | 7/28/2023 |
| K0829 | Power wheelchair, group 2 extra heavy duty, captain's chair, patient weight capacity 601 pounds or more | Durable Medical Equipment | 7/28/2023 |
| K0830 | Power wheelchair, group 2 standard, seat elevator, sling/solid seat/back, patient weight capacity up to and including 300 pounds | Durable Medical Equipment | 7/28/2023 |
| K0831 | Power wheelchair, group 2 standard, seat elevator, captain's chair, patient weight capacity up to and including 300 pounds | Durable Medical Equipment | 7/28/2023 |

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| K0835 | Power wheelchair, group 2 standard, single power option, sling/solid seat/back, patient weight capacity up to and including 300 pounds | Durable Medical Equipment | 4/29/2022 |
| K0836 | Power wheelchair, group 2 standard, single power option, captain's chair, patient weight capacity up to and including 300 pounds | Durable Medical Equipment | 7/28/2023 |
| K0837 | Power wheelchair, group 2 heavy duty, single power option, sling/solid seat/back, patient weight capacity 301 to 450 pounds | Durable Medical Equipment | 4/29/2022 |
| K0838 | Power wheelchair, group 2 heavy duty, single power option, captain's chair, patient weight capacity 301 to 450 pounds | Durable Medical Equipment | 7/28/2023 |
| K0839 | Power wheelchair, group 2 very heavy duty, single power option, sling/solid seat/back, patient weight capacity 451 to 600 pounds | Durable Medical Equipment | 4/29/2022 |
| K0840 | Power wheelchair, group 2 extra heavy duty, single power option, sling/solid seat/back, patient weight capacity 601 pounds or more | Durable Medical Equipment | 7/28/2023 |
| K0841 | Power wheelchair, group 2 standard, multiple power option, sling/solid seat/back, patient weight capacity up to and including 300 pounds | Durable Medical Equipment | 7/28/2023 |
| K0842 | Power wheelchair, group 2 standard, multiple power option, captain's chair, patient weight capacity up to and including 300 pounds | Durable Medical Equipment | 12/1/2023 |
| K0843 | Power wheelchair, group 2 heavy duty, multiple power option, sling/solid seat/back, patient weight capacity 301 to 450 pounds | Durable Medical Equipment | 4/29/2022 |
| K0848 | Power wheelchair, group 3 standard, sling/solid seat/back, patient weight capacity up to and including 300 pounds | Durable Medical Equipment | 12/1/2023 |
| K0849 | Power wheelchair, group 3 standard, captain's chair, patient weight capacity up to and including 300 pounds | Durable Medical Equipment | 4/29/2022 |
| K0850 | Power wheelchair, group 3 heavy duty, sling/solid seat/back, patient weight capacity 301 to 450 pounds | Durable Medical Equipment | 7/28/2023 |
| K0851 | Power wheelchair, group 3 heavy duty, captain's chair, patient weight capacity 301 to 450 pounds | Durable Medical Equipment | 7/28/2023 |
| K0852 | Power wheelchair, group 3 very heavy duty, sling/solid seat/back, patient weight capacity 451 to 600 pounds | Durable Medical Equipment | 12/1/2023 |
| K0853 | Power wheelchair, group 3 very heavy duty, captain's chair, patient weight capacity, 451 to 600 pounds | Durable Medical Equipment | 7/28/2023 |
| K0854 | Power wheelchair, group 3 extra heavy duty, sling/solid seat/back, patient weight capacity 601 pounds or more | Durable Medical Equipment | 7/28/2023 |
| K0855 | Power wheelchair, group 3 extra heavy duty, captain's chair, patient weight 601 pounds or more | Durable Medical Equipment | 7/28/2023 |
| K0856 | Power wheelchair, group 3 standard, single power option, sling/solid seat/back, patient weight capacity up to and including 300 pounds | Durable Medical Equipment | 7/28/2023 |
| K0857 | Power wheelchair, group 3 standard, single power option, captain's chair, patient weight capacity up to and including 300 pounds | Durable Medical Equipment | 12/1/2023 |
| K0858 | Power wheelchair, group 3 heavy duty, single power option, sling/solid seat/back, patient weight capacity 301 to 450 pounds | Durable Medical Equipment | 4/29/2022 |
| K0859 | Power wheelchair, group 3 heavy duty, single power option, captain's chair, patient weight capacity 301 to 450 pounds | Durable Medical Equipment | 7/28/2023 |
| K0860 | Power wheelchair, group 3 very heavy duty, single power option, sling/solid seat/back, patient weight capacity 451 to 600 pounds | Durable Medical Equipment | 7/28/2023 |
| K0861 | Power wheelchair, group 3 standard, multiple power option, sling/solid seat/back, patient weight capacity up to and including 300 pounds | Durable Medical Equipment | 7/28/2023 |
| K0862 | Power wheelchair, group 3 heavy duty, multiple power option, sling/solid seat/back, patient weight capacity 301 to 450 pounds | Durable Medical Equipment | 12/1/2023 |
| K0863 | Power wheelchair, group 3 very heavy duty, multiple power option, sling/solid seat/back, patient weight capacity 451 to 600 pounds | Durable Medical Equipment | 7/28/2023 |
| K0864 | Power wheelchair, group 3 extra heavy duty, multiple power option, sling/solid seat/back, patient weight capacity 601 pounds or more | Durable Medical Equipment | 7/28/2023 |
| K0868 | Power wheelchair, group 4 standard, sling/solid seat/back, patient weight capacity up to and including 300 pounds | Durable Medical Equipment | 7/28/2023 |
| K0869 | Power wheelchair, group 4 standard, captain's chair, patient weight capacity up to and including 300 pounds | Durable Medical Equipment | 7/28/2023 |
| K0870 | Power wheelchair, group 4 heavy duty, sling/solid seat/back, patient weight capacity 301 to 450 pounds | Durable Medical Equipment | 7/28/2023 |
| K0871 | Power wheelchair, group 4 very heavy duty, sling/solid seat/back, patient weight capacity 451 to 600 pounds | Durable Medical Equipment | 7/28/2023 |
| K0877 | Power wheelchair, group 4 standard, single power option, sling/solid seat/back, patient weight capacity up to and including 300 pounds | Durable Medical Equipment | 4/29/2022 |
| K0878 | Power wheelchair, group 4 standard, single power option, captain's chair, patient weight capacity up to and including 300 pounds | Durable Medical Equipment | 7/28/2023 |
| K0879 | Power wheelchair, group 4 heavy duty, single power option, sling/solid seat/back, patient weight capacity 301 to 450 pounds | Durable Medical Equipment | 7/28/2023 |
| K0880 | Power wheelchair, group 4 very heavy duty, single power option, sling/solid seat/back, patient weight 451 to 600 pounds | Durable Medical Equipment | 7/28/2023 |
| K0884 | Power wheelchair, group 4 standard multiple power option, sling/solid seat/back, patient weight capacity up to and including 300 pounds | Durable Medical Equipment | 7/28/2023 |
| K0885 | Power wheelchair, group 4 standard, multiple power option, captain's chair, weight capacity up to and including 300 pounds | Durable Medical Equipment | 7/28/2023 |
| K0886 | Power wheelchair, group 4 heavy duty, multiple power option, sling/solid seat/back, patient weight capacity 301 to 450 pounds | Durable Medical Equipment | 12/1/2023 |
| K0890 | Power wheelchair, group 5 pediatric, single power option, sling/solid seat/back, patient weight capacity up to and including 125 pounds | Durable Medical Equipment | 4/29/2022 |
| K0891 | Power wheelchair, group 5 pediatric, multiple power option, sling/solid seat/back, patient weight capacity up to and including 125 pounds | Durable Medical Equipment | 4/29/2022 |
| K0898 | Power wheelchair, not otherwise classified | Durable Medical Equipment | 7/28/2023 |
| K0900 | CSTM DME OTHER THAN WHEEL | Durable Medical Equipment | 7/28/2023 |
| K1001 | ELECTRONIC POSA TREATMENT | Durable Medical Equipment | 2/2/2024 |
| K1001 | Electronic posa treatment | Outpatient Procedures (Potentially Cosmetic) | 6/9/2023 |

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| K1006 | Suction pump, home model, portable or stationary, electric, any type, for use with external urine management system | Durable Medical Equipment | 7/28/2023 |
| K1007 | Bilateral hip, knee, ankle, foot device, powered, includes pelvic component, single or double upright(s), knee joints any type, with or without ankle joints any type, includes all components and accessories, motors, microprocessors, sensors | Durable Medical Equipment | 11/20/2025 |
| K1007 | Bilateral hip, knee, ankle, foot device, powered, includes pelvic component, single or double upright(s), knee joints any type, with or without ankle joints any type, includes all components and accessories, motors, microprocessors, sensors | Orthotics and Prosthetics | 7/28/2023 |
| K1009 | Speech volume modulation system, any type, including all components and accessories | Durable Medical Equipment | 7/28/2023 |
| K1014 | Ak 4 bar link hyd/ swg/stanc | Orthotics and Prosthetics | 7/28/2023 |
| K1021 | Exsufflation belt, includes all supplies and accessories | Durable Medical Equipment | 7/28/2023 |
| K1023 | Distal transcutaneous electrical nerve stimulator, stimulates peripheral nerves of the upper arm | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| K1024 | Non-pneumatic compression controller with sequential calibrated gradient pressure | Durable Medical Equipment | 2/2/2024 |
| K1025 | Non-pneumatic sequential compression garment, full arm | Durable Medical Equipment | 2/2/2024 |
| K1028 | Control unit neuromuscul osa | Durable Medical Equipment | 5/27/2022 |
| K1028 | Control unit neuromuscul osa | Sleep Management Program | 2/2/2024 |
| K1029 | Oral dv/app neuromus mouthpi | Durable Medical Equipment | 5/27/2022 |
| K1029 | Oral dv/app neuromus mouthpi | Sleep Management Program | 7/28/2023 |
| K1031 | Non pneu comp control w/o ca | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| K1032 | Non pneum seq comp full leg | Potential Experimental/Investigation/Unproven | 2/2/2024 |
| K1033 | Non pneum seq comp half leg | Potential Experimental/Investigation/Unproven | 2/2/2024 |
| K1035 | Mol diag reader self-admn | Durable Medical Equipment | 2/28/2025 |
| L1006 | Scoliosis orth sag/ cor | Durable Medical Equipment | 11/1/2024 |
| L1653 | Ho abduction static ots | Durable Medical Equipment | 11/1/2024 |
| L1821 | Ko elas w/ condyle pads off | Durable Medical Equipment | 11/1/2024 |
| L1840 | Knee orthotic (KO), derotation, medial-lateral, anterior cruciate ligament, custom fabricated | Orthotics and Prosthetics | 7/28/2023 |
| L2005 | KAFO SNG/DBL MECHANICAL | Orthotics and Prosthetics | 7/28/2023 |
| L5781 | Addition to lower limb prosthesis, vacuum pump, residual limb volume management and moisture evacuation system | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| L5782 | Addition to lower limb prosthesis, vacuum pump, residual limb volume management and moisture evacuation system, heavy duty | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| L5782 | HD LWR LMB PROS VAC PUMP | Orthotics and Prosthetics | 7/28/2023 |
| L5845 | KNEE-SHIN SYS STANC FLEX | Durable Medical Equipment | 7/28/2023 |
| L5848 | KNEE-SHIN HYDRL STANCE | Durable Medical Equipment | 7/28/2023 |
| L5857 | Addition to lower extremity prosthesis, endoskeletal knee-shin system, microprocessor control feature, swing phase only, includes electronic sensor(s), any type | Orthotics and Prosthetics | 7/28/2023 |
| L5858 | Addition to lower extremity prosthesis, endoskeletal knee shin system, microprocessor control feature, stance phase only, includes electronic sensor(s), any type | Orthotics and Prosthetics | 7/28/2023 |
| L5930 | Addition, Endoskeletal System, High Activity Knee Control Frame | Orthotics and Prosthetics | 7/28/2023 |
| L5969 | AK/FT POWER ASST INCL MOTORS | Orthotics and Prosthetics | 7/28/2023 |
| L5981 | All Lower Extremity Prosthesis, Flex-Walk System Or Equal | Orthotics and Prosthetics | 7/28/2023 |
| L6025 | Transcarpal/metacarpal or partial hand disarticulation prosthesis, external power, self-suspended, inner socket with removable forearm section, electrodes and cables, 2 batteries, charger, myoelectric control of terminal device | Orthotics and Prosthetics | 12/3/2021 |
| L6026 | Part hand myo exclu term dev | Orthotics and Prosthetics | 7/28/2023 |
| L6611 | Addition to upper extremity prosthesis, external powered, additional switch, any type | Orthotics and Prosthetics | 7/28/2023 |
| L6638 | Upper extremity addition to prosthesis, elec locking feature | Orthotics and Prosthetics | 7/28/2023 |
| L6646 | Upper extremity addition, shoulder joint, multipositional locking, flexion, adjustable abduction friction control, for use with body powered or external powered system | Orthotics and Prosthetics | 7/28/2023 |
| L6647 | Upper extremity addition, shoulder lock mech; body powered actuator | Orthotics and Prosthetics | 7/28/2023 |
| L6648 | Upper extremity addition, shoulder lock mechanism, external powered actuator | Orthotics and Prosthetics | 7/28/2023 |
| L6715 | TERMINAL DEVICE, MULTIPLE ARTICULATING DIGIT, INCLUDES MOTOR(S), INITIAL ISSUE | Orthotics and Prosthetics | 7/28/2023 |
| L6920 | Wrist disarticulation, external power, self-suspended inner socket, removable forearm shell, Otto Bock or equal switch, cables, 2 batteries and 1 charger, switch control of terminal device | Orthotics and Prosthetics | 7/28/2023 |
| L6925 | Wrist disarticulation, external power, self-suspended inner socket, removable forearm shell, Otto Bock or equal electrodes, cables, 2 batteries and one charger, myoelectronic control of terminal device | Orthotics and Prosthetics | 7/28/2023 |
| L6930 | Below elbow, external power, self-suspended inner socket, removable forearm shell, Otto Bock or equal switch, cables, 2 batteries and one charger, switch control of terminal device | Orthotics and Prosthetics | 7/28/2023 |
| L6940 | Elbow disarticulation, external power, molded inner socket, removable humeral shell, outside locking hinges, forearm, Otto Bock or equal switch, cables, 2 batteries and one charger, switch control of terminal device | Orthotics and Prosthetics | 7/28/2023 |
| L6945 | Elbow disarticulation, external power, molded inner socket, removable humeral shell, outside locking hinges, forearm, Otto Bock or equal electrodes, cables, 2 batteries and one charger, myoelectronic control of terminal device | Orthotics and Prosthetics | 7/28/2023 |

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| L6950 | Above elbow, external power, molded inner socket, removable humeral shell, internal locking elbow, forearm, Otto Bock or equal switch, cables, 2 batteries and one charger, switch control of terminal device | Orthotics and Prosthetics | 7/28/2023 |
| L6960 | Shoulder disarticulation, external power, molded inner socket, removable shoulder shell, shoulder bulkhead, humeral section, mechanical elbow, forearm, Otto Bock or equal switch, cables, 2 batteries and one charger, switch control of terminal device | Orthotics and Prosthetics | 7/28/2023 |
| L6965 | Shoulder disarticulation, external power, molded inner socket, removable shoulder shell, shoulder bulkhead, humeral section, mechanical elbow, forearm, Otto Bock or equal electrodes, cables, 2 batteries and one charger, myoelectronic control of terminal d | Orthotics and Prosthetics | 7/28/2023 |
| L6970 | Interscapular-thoracic, external power, molded inner socket, removable shoulder shell, shoulder bulkhead, humeral section, mechanical elbow, forearm, Otto Bock or equal switch, cables, 2 batteries and one charger, switch control of terminal device | Orthotics and Prosthetics | 7/28/2023 |
| L6975 | Interscapular-thoracic, external power, molded inner socket, removable shoulder shell, shoulder bulkhead, humeral section, mechanical elbow, forearm, Otto Bock or equal electrodes, cables, 2 batteries and one charger, myoelectronic control of terminal dev | Orthotics and Prosthetics | 7/28/2023 |
| L7008 | Electric hand, switch or myoelectric, controlled, pediatric | Orthotics and Prosthetics | 7/28/2023 |
| L7009 | Electric hook, switch or myoelectric controlled, adult | Orthotics and Prosthetics | 7/28/2023 |
| L7040 | Prehensile actuator, switch controlled | Orthotics and Prosthetics | 7/28/2023 |
| L7045 | Electric hook, switch or myoelectric controlled, pediatric | Orthotics and Prosthetics | 7/28/2023 |
| L7170 | Electronic elbow, Hosmer or equal, switch controlled | Orthotics and Prosthetics | 7/28/2023 |
| L7180 | Electronic elbow, microprocessor sequential control of elbow and terminal device | Orthotics and Prosthetics | 7/28/2023 |
| L7181 | Electronic elbow, microprocessor simultaneous control of elbow and terminal | Orthotics and Prosthetics | 7/28/2023 |
| L7185 | Electronic elbow, adolescent, Variety Village or equal, switch controlled | Orthotics and Prosthetics | 7/28/2023 |
| L7186 | Electronic elbow, child, Variety Village or equal, switch controlled | Orthotics and Prosthetics | 7/28/2023 |
| L7190 | Electronic elbow, adolescent, Variety Village or equal, myoelectronically controlled | Orthotics and Prosthetics | 7/28/2023 |
| L7191 | Electronic elbow, child, Variety Village or equal, myoelectronically controlled | Orthotics and Prosthetics | 7/28/2023 |
| L7260 | Electronic wrist rotator, Otto Bock or equal | Orthotics and Prosthetics | 12/3/2021 |
| L7261 | Electronic wrist rotator, for Utah arm | Orthotics and Prosthetics | 12/3/2021 |
| L7499 | UPPR EXTREM PROTHES NOS | Unlisted Procedures | 7/28/2023 |
| L8033 | Nipple prosthesis custom, ea | Outpatient Procedures (Potentially Cosmetic) | 11/4/2022 |
| L8040 | Nasal prosthesis, provided by a nonphysician | Orthotics and Prosthetics | 7/28/2023 |
| L8041 | Midfacial prosthesis, provided by a nonphysician | Orthotics and Prosthetics | 7/28/2023 |
| L8042 | Orbital prosthesis, provided by a nonphysician | Orthotics and Prosthetics | 7/28/2023 |
| L8043 | Upper facial prosthesis, provided by a nonphysician | Orthotics and Prosthetics | 7/28/2023 |
| L8044 | Hemi-facial prosthesis, provided by a nonphysician | Orthotics and Prosthetics | 7/28/2023 |
| L8045 | AURICULAR PROSTHESIS | Orthotics and Prosthetics | 7/28/2023 |
| L8045 | Auricular Prosthesis, Provided By A Non-Physician | Outpatient Procedures (Potentially Cosmetic) | 12/3/2021 |
| L8046 | Partial facial prosthesis, provided by a nonphysician | Orthotics and Prosthetics | 7/28/2023 |
| L8047 | Nasal septal prosthesis, provided by a nonphysician | Orthotics and Prosthetics | 7/28/2023 |
| L8048 | Unspecified maxillofacial prosthesis, by report, provided by a non-physician | Orthotics and Prosthetics | 7/28/2023 |
| L8049 | Repair or modification of maxillofacial prosthesis, labor component, 15 minute increments, provided by a nonphysician | Orthotics and Prosthetics | 7/28/2023 |
| L8510 | Voice amplifier | Orthotics and Prosthetics | 7/28/2023 |
| L8605 | Injectable bulking agent, dextranomer/hyaluronic acid copolymer implant, anacanal, 1 ml, includes shipping and necessary supplies | Potential Experimental/Investigation/Unproven | 3/25/2021 |
| L8608 | Arg ii ext com/sup/acc misc | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| L8619 | Cochlear implant external speech processor, replacement | Ear Devices/Cochlear Implant | 7/28/2023 |
| L8641 | METATARSAL JOINT IMPLANT | Outpatient Procedures (Potentially Cosmetic) | 11/20/2025 |
| L8641 | Metatarsal joint implant | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| L8642 | HALLUX IMPLANT | Outpatient Procedures (Potentially Cosmetic) | 11/20/2025 |
| L8642 | Hallux implant | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| L8679 | IMP NEUROSTII PLS GN ANY TYPE | Durable Medical Equipment | 12/6/2024 |
| L8680 | IMPLANTABLE NEUROSTIMULATOR ELECTRODE, EACH | Durable Medical Equipment | 3/28/2025 |
| L8686 | Implantable neurostimulator pulse generator, single array, non-rechargeable, includes extension | Durable Medical Equipment | 3/28/2025 |
| L8687 | Implantable neurostimulator pulse generator, dual array, rechargeable, includes extension | Durable Medical Equipment | 3/28/2025 |
| L8698 | MISC USED WITH TOT ART HEART | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| L8698 | Misc used with tot art heart | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| L8701 | Pow ue rom dev ewh uprt cust | Orthotics and Prosthetics | 7/28/2023 |
| L8702 | Pow ue rom dev ewhf uprt cus | Orthotics and Prosthetics | 11/20/2025 |
| L8720 | Ext low ext sens prosthe mec | Durable Medical Equipment | 11/1/2024 |
| L8721 | Receptor sole l8720 replace | Durable Medical Equipment | 11/1/2024 |
| P9027 | Rbc o2 co2 reduced | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| P9099 | Blood component/product noc | Unlisted Procedures | 7/28/2023 |
| Q0519 | Supply fee hiv prep inj 30 | Durable Medical Equipment | 11/1/2024 |
| Q0520 | Supply fee hiv prep inj 60 | Durable Medical Equipment | 11/1/2024 |
| Q1004 | NEW TECH INTRA LEN CAT 4 | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| Q1004 | New technology intraocular lens category 4 as defined in Federal Register notice | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| Q1005 | NEW TECH INTRA LEN CAT 5 | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |

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| Q1005 | New technology intraocular lens category 5 as defined in Federal Register notice | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| Q2017 | TENIPOSIDE, 50 MG | Injectable Medications | 10/17/2025 |
| Q2043 | SIPULEUCEL-T, MINIMUM OF 50 MILLION AUTOLOGOUS CD54+ CELLS ACTIVATED WITH PAP-GM-CSF, INCLUDING LEUKAPHERESIS AND ALL OTHER PREPARATORY PROCEDURES, PER INFUSION | Injectable Medications | 10/17/2025 |
| Q2050 | DOXORUBICIN INJ 10MG | Injectable Medications | 10/17/2025 |
| Q3001 | BRACHYTHERAPY RADIOELEME | Therapeutic Radiology | 4/10/2020 |
| Q4082 | Drug or biological, not otherwise classified, Part B drug competitive | Unlisted Procedures | 3/28/2025 |
| Q4100 | SKIN SUBSTITUTE, NOS] | Unlisted Procedures | 11/20/2025 |
| Q4100 | Skin Substitute, Not Otherwise Specified | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| Q4102 | Skin Substitute, Oasis Wound Matrix, Per Square Centimeter | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| Q4106 | DERMAGRAFT SKIN SUB | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| Q4107 | Skin Substitute, GraftJacket, Per Square Centimeter | Potential Experimental/Investigation/Unproven | 4/25/2025 |
| Q4110 | Skin Substitute, Primatrix, Per Square Centimeter | Potential Experimental/Investigation/Unproven | 4/25/2025 |
| Q4111 | Skin Substitute, Gammagraft, Per Square Centimeter | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| Q4112 | Allograft, Cymetra, Injectable, 1CC | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| Q4115 | Skin substitute, Alloskin, per square centimeter | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| Q4117 | HYALOMATRIX, per sq cm | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| Q4121 | TheraSkin, per sq cm | Potential Experimental/Investigation/Unproven | 4/25/2025 |
| Q4122 | DERMACELL, PER SQUARE CENTIMETER | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| Q4123 | ALLOSKIN RT, PER SQUARE CENTIMETER | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| Q4124 | OASIS ULTRA TRI-LAYER WOUND MATRIX, PER SQUARE CENTIMETER | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| Q4127 | TALYMED, PER SQUARE CENTIMETER | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| Q4132 | Grafix care, per square centimeter | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| Q4133 | GRAFIX PRIME | Outpatient Procedures (Potentially Cosmetic) | 9/12/2025 |
| Q4133 | Grafix prime, per square centimeter | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| Q4134 | Hmatrix, per square centimeter | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| Q4135 | Mediskin, per square centimeter | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| Q4136 | Ez-derm, per square centimeter | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| Q4141 | ALLOSKIN AC, 1 CM | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| Q4142 | XCM BIOLOGIC TISS MATRIX 1CM | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| Q4143 | REPRIZA, 1CM | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| Q4145 | EPIFIX, INJ, 1MG | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| Q4146 | TENSIX, 1CM | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| Q4147 | ARCHITECT ECM, 1CM | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| Q4149 | EXCELLAGEN, 0.1 CC | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| Q4151 | Amnioband, guardian 1 sq cm | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| Q4153 | Dermaves1 1 square cm | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| Q4154 | Biovance 1 square cm | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| Q4157 | Revitalon 1 square cm | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| Q4158 | Marigen 1 square cm | Potential Experimental/Investigation/Unproven | 11/20/2025 |
| Q4161 | Bio-connekt wound matrix, per square centimeter | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| Q4165 | Keramatrix, per square centimeter | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| Q4166 | Cytal, per square centimeter | Outpatient Procedures (Potentially Cosmetic) | 11/20/2025 |
| Q4167 | Truskin, per sq centimeter | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| Q4168 | Amnioband, 1 mg | Outpatient Procedures (Potentially Cosmetic) | 11/20/2025 |
| Q4169 | Artacent wound, per sq cm | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| Q4170 | Cygnus, per sq cm | Outpatient Procedures (Potentially Cosmetic) | 11/20/2025 |
| Q4171 | Interfly, 1 mg | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| Q4173 | Palingen or palingen xplus | Outpatient Procedures (Potentially Cosmetic) | 9/12/2025 |
| Q4174 | Palingen or promatrix | Outpatient Procedures (Potentially Cosmetic) | 9/12/2025 |
| Q4175 | Miroderm | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| Q4176 | Neopatch, per sq centimeter | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| Q4177 | Floweramnioflo, 0.1 cc | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| Q4178 | Floweramniopatch, per sq cm | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| Q4179 | Flowerderm, per sq cm | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| Q4181 | Amnio wound, per square cm | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| Q4182 | Transcyte, per sq centimeter | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| Q4183 | Surgigraft, 1 sq cm | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| Q4184 | Cellesta, 1 sq cm | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| Q4185 | Cellesta flowab amnion 0.5cc | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| Q4186 | Epifix 1 sq cm | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| Q4188 | Amnioarmor 1 sq cm | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| Q4190 | Artacent ac 1 sq cm | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| Q4191 | Restorigin 1 sq cm | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| Q4194 | Novachor 1 sq cm | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| Q4197 | Puraply xt 1 sq cm | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| Q4198 | Genesis amnio membrane 1sqcm | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| Q4199 | Cygnus matrix, per sq cm | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| Q4200 | Skin te 1 sq cm | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| Q4201 | Matrion 1 sq cm | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| Q4202 | Keroxx (2.5g/cc), 1cc | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| Q4203 | Derma-gide, 1 sq cm | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| Q4204 | Xwrap 1 sq cm | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| Q4205 | Membrane graft or wrap sq cm | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| Q4206 | Fluid flow or fluid gf 1 cc | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| Q4208 | Novafix per sq cm | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| Q4209 | Surgraft per sq cm | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| Q4210 | Axolotl graf dualgraf sq cm | Potential Experimental/Investigation/Unproven | 7/26/2024 |
| Q4211 | Amnio bio or axobio sq cm | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| Q4212 | Allogen, per cc | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| Q4213 | Ascent, 0.5 mg | Potential Experimental/Investigation/Unproven | 7/28/2023 |

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| Q4214 | Cellesta cord per sq cm | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| Q4216 | Artacent cord per sq cm | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| Q4217 | Woundfix biowound plus xplus | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| Q4218 | Surgicord per sq cm | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| Q4219 | Surgigraf dual per sq cm | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| Q4220 | Bellacell HD, Surederm sq cm | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| Q4221 | Amniowrap2 per sq cm | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| Q4224 | Hhf10-p per sq cm | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| Q4225 | Amniobind, per sq cm | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| Q4226 | Myown harv prep proc sq cm | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| Q4228 | BioNextPATCH, per square centimeter | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| Q4230 | Cogenex flowable amnion, per 0.5 cc. | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| Q4231 | Corplex P, per cc. | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| Q4232 | Corplex, per square centimeter. | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| Q4233 | Surfactor or Nudyn, per 0.5 cc. | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| Q4236 | Carepatch, per square centimeter | Outpatient Procedures (Potentially Cosmetic) | 11/20/2025 |
| Q4236 | carePATCH, per square centimeter. | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| Q4237 | Cryo-cord, per square centimeter | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| Q4238 | Derm-maxx, per square centimeter. | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| Q4240 | Corecyte, for topical use only, per 0.5 cc. | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| Q4241 | Polycyte, for topical use only, per 0.5 cc. | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| Q4242 | Amniocyte plus, per 0.5 cc. | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| Q4244 | Procenta, per 200 mg | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| Q4245 | Amniotext, per cc | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| Q4247 | Amniotext patch, per square centimeter | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| Q4248 | Dermacyte Amniotic Membrane Allograft, per square centimeter | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| Q4249 | Amnipl, per sq cm | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| Q4250 | AmnioAMP- MP, per square centimeter | Outpatient Procedures (Potentially Cosmetic) | 11/20/2025 |
| Q4251 | Vim, per square centimeter | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| Q4252 | Vendaje, per square centimeter | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| Q4254 | Novafix DL, per square centimeter | Outpatient Procedures (Potentially Cosmetic) | 11/20/2025 |
| Q4255 | Reguard, topical use per sq | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| Q4256 | Mlg complet, per sq cm | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| Q4257 | Relese, per sq cm | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| Q4258 | Enverse, per sq cm | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| Q4259 | Celera dual layer or celera dual membrane, per square centimeter | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| Q4260 | Signature apatch, per square centimeter | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| Q4261 | Tag, per square centimeter | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| Q4262 | Dual layer impax, per sq cm | Outpatient Procedures (Potentially Cosmetic) | 11/20/2025 |
| Q4263 | Surgraft II, per sq cm | Outpatient Procedures (Potentially Cosmetic) | 11/20/2025 |
| Q4264 | Cocoon membrane, per sq cm | Outpatient Procedures (Potentially Cosmetic) | 11/20/2025 |
| Q4331 | Axolotl graft, per square centimeter | Outpatient Procedures (Potentially Cosmetic) | 11/20/2025 |
| Q4332 | Axolotl dualgraft, per square centimeter | Outpatient Procedures (Potentially Cosmetic) | 11/20/2025 |
| Q4334 | Amnioplast 1, per sq cm | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| Q4335 | Amnioplast 2, per sq cm | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| Q4336 | Artecent c, per sq cm | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| Q4337 | Artecent trident, per sq cm | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| Q4338 | Artacent velos, per sq cm | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| Q4339 | Artacent vericlen, per sq cm | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| Q4340 | Simpligraf, per sq cm | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| Q4341 | Simplimax, per sq cm | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| Q4342 | Theramend, per sq cm | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| Q4343 | Dermacyte ac matr per sq cm | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| Q4344 | Iri membrane wrap, per sq cm | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| Q4345 | Matrix hd allograft per sq cm | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| Q5001 | HOSPICE IN PATIENT HOME | Home Health Care | 8/19/2025 |
| Q5002 | HOSPICE IN ASSISTED Livi | Home Health Care | 8/19/2025 |
| Q5003 | HOSPICE IN LT/NON-SKILLE | Home Health Care | 8/19/2025 |
| Q5004 | HOSPICE IN SNF | Home Health Care | 9/30/2022 |
| Q5005 | HOSPICE, INPATIENT HOSPI | Home Health Care | 9/30/2022 |
| Q5006 | HOSPICE IN HOSPICE FACIL | Home Health Care | 9/30/2022 |
| Q5007 | HOSPICE IN LTCH | Home Health Care | 9/30/2022 |
| Q5008 | HOSPICE IN INPATIENT PSY | Home Health Care | 9/30/2022 |
| Q5009 | HOSPICE CARE NOS | Home Health Care | 8/19/2025 |
| Q5010 | HOSPICE HOME CARE IN HOSP F | Home Health Care | 8/19/2025 |
| Q5106 | INJ RETACRIT NON-ESRD USE | Injectable Medications | 10/17/2025 |
| Q5106 | INJ RETACRIT NON-ESRD USE | Outpatient Procedures (Potentially Cosmetic) | 9/27/2024 |
| Q5106 | Inj Retacrit non-esrd use | Injectable Medications | 6/28/2024 |
| Q5107 | Inj mvasi 10 mg | Injectable Medications | 10/17/2025 |
| Q5108 | Injection, fulphila | Injectable Medications | 10/17/2025 |
| Q5110 | Injection, filgrastim-aafi, biosimilar, (nivestym), 1 microgram | Injectable Medications | 6/25/2021 |
| Q5111 | Injection, udenyca, 0.5 mg. | Injectable Medications | 10/17/2025 |
| Q5112 | Inj ontruzant 10 mg | Injectable Medications | 10/17/2025 |
| Q5113 | Inj herzuma 10 mg | Injectable Medications | 10/17/2025 |
| Q5114 | Inj ogivri 10 mg | Injectable Medications | 10/17/2025 |
| Q5115 | INJ RITUXIMAB-ABBS BIO 10 MG | Injectable Medications | 10/17/2025 |
| Q5115 | INJ RITUXIMAB-ABBS BIO 10 MG | Outpatient Procedures (Potentially Cosmetic) | 9/27/2024 |
| Q5115 | Inj rituximab-abbs bio 10 mg | Injectable Medications | 6/28/2024 |
| Q5116 | Inj., frazimer, 10 mg | Injectable Medications | 10/17/2025 |
| Q5117 | Inj., kanjinti, 10 mg | Injectable Medications | 10/17/2025 |
| Q5118 | Inj., zirabev, 10 mg | Injectable Medications | 10/17/2025 |
| Q5119 | Injection, Rituximab-pvvr, biosimilar, (Ruxience), 10 mg. | Injectable Medications | 6/28/2024 |
| Q5119 | Injection, Rituximab-pvvr, biosimilar, (Ruxience), 10 mg. | Injectable Medications | 10/17/2025 |

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| Q5119 | Injection, Rituximab-pvvr, biosimilar, (Ruxience), 10 mg. | Outpatient Procedures (Potentially Cosmetic) | 9/27/2024 |
| Q5120 | Injection, pegfilgrastim-bmez, biosimilar, (Zextenzo), 0.5 mg. | Injectable Medications | 10/17/2025 |
| Q5122 | Inj, nyvepria | Injectable Medications | 10/17/2025 |
| Q5123 | Injection, rituximab-arrx, biosimilar, (riabni), 10 mg | Injectable Medications | 6/28/2024 |
| Q5123 | Injection, rituximab-arrx, biosimilar, (riabni), 10 mg | Injectable Medications | 10/17/2025 |
| Q5123 | Injection, rituximab-arrx, biosimilar, (riabni), 10 mg | Outpatient Procedures (Potentially Cosmetic) | 9/27/2024 |
| Q5125 | Inj, releuko 1 mcg | Injectable Medications | 6/28/2024 |
| Q5125 | Inj, releuko 1 mcg | Injectable Medications | 10/17/2025 |
| Q5125 | Inj, releuko 1 mcg | Outpatient Procedures (Potentially Cosmetic) | 9/27/2024 |
| Q5126 | Inj almysys 10 mg | Injectable Medications | 10/17/2025 |
| Q5127 | Injection, pegfilgrastim-fpgk (stimufend), biosimilar, 0.5 mg | Injectable Medications | 10/17/2025 |
| Q5129 | Injection, bevacizumab-adcd (vegzelma), biosimilar, 10 mg | Injectable Medications | 10/17/2025 |
| Q5130 | Injection, pegfilgrastim-pbbk (flyneta), biosimilar, 0.5 mg | Injectable Medications | 10/17/2025 |
| Q5131 | Inj, idacio, 20 mg | Injectable Medications | 2/7/2025 |
| Q5132 | Inj, abrilada, 10 mg | Injectable Medications | 2/7/2025 |
| Q5139 | Inj, eculizumab-aeeb, 10 mg | Injectable Medications | 4/25/2025 |
| Q5146 | Inj, hercessi, 10 mg | Injectable Medications | 10/17/2025 |
| Q5148 | Injection, filgrastim-txid (nypozi), biosimilar, 1 microgram | Injectable Medications | 10/17/2025 |
| Q5156 | Injection, tocilizumab-anoh (avtazma), biosimilar, 1 mg | Injectable Medications | 10/17/2025 |
| Q5157 | Injection, denosumab-bmwo (stobocio/osenvelt), biosimilar, 1 mg | Injectable Medications | 10/17/2025 |
| Q5158 | Injection, denosumab-bnht (bomynta/conexence), biosimilar, 1 mg | Injectable Medications | 10/17/2025 |
| Q5159 | Injection, denosumab-dsbb (ospomyv/xbryk), biosimilar, 1 mg | Injectable Medications | 10/17/2025 |
| Q9982 | FLUTEMETAMOL F18 DIAGNOSTIC | Outpatient Procedures (Potentially Cosmetic) | 7/26/2024 |
| Q9982 | flutemetamol f18 diagnostic | Diagnostic Radiology | 4/29/2022 |
| Q9983 | FLORBETABEN F18 DIAGNOSTIC | Outpatient Procedures (Potentially Cosmetic) | 7/26/2024 |
| Q9983 | florbetaben f18 diagnostic | Diagnostic Radiology | 4/29/2022 |
| S0145 | PEG INTERFERON ALFA-2A/1 | Injectable Medications | 10/17/2025 |
| S0145 | PEG INTERFERON ALFA-2A/1 | Outpatient Procedures (Potentially Cosmetic) | 8/30/2024 |
| S0145 | Peginterferon alpha-2a | Injectable Medications | 6/28/2024 |
| S0148 | Injection, Pegylated Interferon Alfa-2b, 10 MCG | Injectable Medications | 6/28/2024 |
| S0148 | PEG INTERFERON ALFA2B/10 | Injectable Medications | 6/27/2025 |
| S0148 | PEG INTERFERON ALFA2B/10 | Outpatient Procedures (Potentially Cosmetic) | 11/1/2024 |
| S0255 | HOSPICE REFER VISIT NONM | Home Health Care | 8/19/2025 |
| S0271 | HOME HOSPICE CASE 30 DAY | Home Health Care | 2/28/2025 |
| S0800 | Laser In Situ Keratomileusis (Lasik) | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| S0810 | PHOTOREFRACTIVE KERATECT | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| S0810 | Photorefractive Keratectomy | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| S1034 | Art pancreas system | Durable Medical Equipment | 7/28/2023 |
| S1090 | MOMETASONE FUROATE SINUS IMPLANT, 370 MICROGRAMS | Potential Experimental/Investigation/Unproven | 12/2/2022 |
| S2080 | Laser-assisted uvulopalatoplasty (LAUP) | Oral Pharynx | 7/28/2023 |
| S2103 | ADRENAL TISSUE TRANSPLAN | Outpatient Procedures (Potentially Cosmetic) | 12/6/2024 |
| S2103 | Adrenal tissue transplant to brain | Transplant | 8/25/2023 |
| S2107 | Adoptive immunotherapy i.e., development of specific anti-tumor reactivity (e.g. tumor-infiltrating lymphocyte therapy) per course of treatment | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| S2202 | Echosclerotherapy | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| S2235 | Implantation of auditory brain stem implant | Ear Devices/Cochlear Implant | 7/28/2023 |
| S2300 | Arthroscopy, shoulder, surgical; with thermally-induced capsulorrhaphy | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| S2325 | HIP CORE DECOMPRESSION | Musculoskeletal (Buy Up) | 3/25/2022 |
| S2348 | Decompression procedure, percutaneous, of nucleus pulposus of intervertebral disc, using radiofrequency energy, single or multiple levels, lumbar | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| S2400 | Repair, congenital diaphragmatic hernia in the fetus using temporary tracheal occlusion, procedure performed in utero | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| S2404 | FETAL SURG MYELOMENINGOCE | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| S2404 | Repair, myelomeningocele in the fetus, procedure performed in uter | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| S2900 | ROBOTIC SURGICAL SYSTEM | Outpatient Procedures (Potentially Cosmetic) | 7/26/2024 |
| S3840 | DNA ANALY RET-ONCOGENE | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| S3842 | GENE TEST HIPPEL-LINDAU | Potential Experimental/Investigation/Unproven | 9/13/2020 |
| S3854 | GENE PROFILE PANEL BREAST | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| S3861 | GENETIC TEST BRUGADA | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| S3861 | Genetic testing, sodium channel, voltage-gated, type V, alpha subunit (scn5a) and variants for suspected Brugada syndrome | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| S3865 | COMP GENE TEST HYP CARDI | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| S3866 | SPEC GENE TEST HYP CARDI | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| S3870 | Comparative genomic hybridization (CGH) microarray testing for developmental delay, autism spectrum disorder and/or mental retardation | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| S8032 | Low dose CT lung screening | Diagnostic Radiology | 12/3/2021 |
| S8035 | MAGNETIC SOURCE IMAGING | Outpatient Procedures (Potentially Cosmetic) | 8/30/2024 |
| S8035 | Magnetic source imaging | Diagnostic Radiology | 6/28/2024 |
| S8042 | Magnetic resonance imaging (MRI), low-field | Diagnostic Radiology | 9/30/2022 |
| S8080 | Scintimammography (radioimmunoscinigraphy of the breast), unilateral, including supply of radiopharmaceutical | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| S8085 | FLUORINE-18 FLUORODEOIX | Potential Experimental/Investigation/Unproven | 9/30/2022 |
| S8085 | Fluorine-18 fluorodeoxyglucose (F-18 FDG) imaging using dual-head coincidence detection system | Diagnostic Radiology | 12/3/2021 |
| S9055 | Procuren or other growth factor preparation to promote wound healing | Potential Experimental/Investigation/Unproven | 7/28/2023 |
| S9125 | RESPIRE CARE IN THE HOME | Home Health Care | 12/30/2025 |
| S9126 | HOSPICE CARE IN THE HOME | Home Health Care | 8/19/2025 |
| S9127 | SOCIAL WORK IN THE HOME | Home Health Care | 2/28/2025 |

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| S9127 | SOCIAL WORK IN THE HOME | Home Infusion Therapy | 11/1/2024 |
| S9128 | Speech therapy, in the home, per diem | Speech Therapy | 7/28/2023 |
| S9325 | Home infusion therapy, pain management infusion; administrative services, professional pharmacy services, care coordination, and all necessary supplies and equipment (drugs and nursing visits coded separately), per diem (do not use this code with S9326, S | Home Infusion Therapy | 2/28/2025 |
| S9326 | Home infusion therapy, continuous (24 hours or more) pain management infusion; administrative services, professional pharmacy services, care coordination, and all necessary supplies and equipment (drugs and nursing visits coded separately), per diem | Home Infusion Therapy | 2/28/2025 |
| S9327 | Home infusion therapy, intermittent (less than 24 hours) pain management infusion; administrative services, professional pharmacy services, care coordination, and all necessary supplies and equipment (drugs and nursing visits coded separately), per diem | Home Infusion Therapy | 2/28/2025 |
| S9328 | Home infusion therapy, implanted pump pain management infusion; administrative services, professional pharmacy services, care coordination, and all necessary supplies and equipment (drugs and nursing visits coded separately), per diem | Home Infusion Therapy | 2/28/2025 |
| S9329 | Home infusion therapy, chemotherapy infusion; administrative services, professional pharmacy services, care coordination, and all necessary supplies and equipment (drugs and nursing visits coded separately), per diem | Home Infusion Therapy | 4/10/2020 |
| S9330 | Home infusion therapy, continuous (24 hours or more) chemotherapy infusion; administrative services, professional pharmacy services, care coordination, and all necessary supplies and equipment (drugs and nursing visits coded separately), per diem | Home Infusion Therapy | 4/10/2020 |
| S9331 | Home infusion therapy, intermittent (less than 24 hours) chemotherapy infusion; administrative services, professional pharmacy services, care coordination, and all necessary supplies and equipment (drugs and nursing visits coded separately), per diem | Home Infusion Therapy | 4/10/2020 |
| S9336 | Home infusion therapy, continuous anticoagulant infusion therapy (e.g., Heparin), administrative services, professional pharmacy services, care coordination, and all necessary supplies and equipment (drugs and nursing visits coded separately), per diem | Home Infusion Therapy | 2/28/2025 |
| S9338 | Home infusion therapy, immunotherapy (e.g., intravenous immunoglobulin, interferon); administrative services, professional pharmacy services, care coordination, and all necessary supplies and equipment (drugs and nursing visits coded separately), per diem | Home Infusion Therapy | 4/10/2020 |
| S9340 | Home therapy; enteral nutrition; administrative services, professional pharmacy services, care coordination, and all necessary supplies and equipment (enteral formula and nursing visits coded separately), per diem | Home Infusion Therapy | 2/28/2025 |
| S9341 | Home therapy; enteral nutrition via gravity; administrative services, professional pharmacy services, care coordination, and all necessary supplies and equipment (enteral formula and nursing visits coded separately), per diem | Home Infusion Therapy | 7/28/2023 |
| S9342 | Home therapy; enteral nutrition via pump; administrative services, professional pharmacy services, care coordination, and all necessary supplies and equipment (enteral formula and nursing visits coded separately), per diem | Home Infusion Therapy | 2/28/2025 |
| S9343 | Home therapy; enteral nutrition via bolus; administrative services, professional pharmacy services, care coordination, and all necessary supplies and equipment (enteral formula and nursing visits coded separately), per diem | Home Infusion Therapy | 2/28/2025 |
| S9345 | Home infusion therapy, anti-hemophilic agent infusion therapy (e.g., Factor VIII); administrative services, professional pharmacy services, care coordination, and all necessary supplies and equipment (drugs and nursing visits coded separately), per diem | Home Infusion Therapy | 4/10/2020 |
| S9346 | Home infusion therapy, alpha-1-proteinase inhibitor (e.g., Prolastin); administrative services, professional pharmacy services, care coordination, and all necessary supplies and equipment (drugs and nursing visits coded separately), per diem | Home Infusion Therapy | 2/28/2025 |
| S9347 | Home infusion therapy, uninterrupted, long-term, controlled rate intravenous or subcutaneous infusion therapy (e.g., epoprostenol); administrative services, professional pharmacy services, care coordination, and all necessary supplies and equipment (drugs | Home Infusion Therapy | 2/28/2025 |
| S9348 | Home infusion therapy, sympathomimetic/inotropic agent infusion therapy (e.g., Dobutamine); administrative services, professional pharmacy services, care coordination, and all necessary supplies and equipment (drugs and nursing visits coded separately), p | Home Infusion Therapy | 2/28/2025 |
| S9349 | HIT TOCOLYSIS DIEM | Home Infusion Therapy | 4/30/2021 |
| S9351 | Home infusion therapy, continuous or intermittent anti-emetic infusion therapy; administrative services, professional pharmacy services, care coordination, and all necessary supplies and equipment (drugs and nursing visits coded separately), per diem | Home Infusion Therapy | 2/28/2025 |
| S9353 | Home infusion therapy, continuous insulin infusion therapy; administrative services, professional pharmacy services, care coordination, and all necessary supplies and equipment (drugs and nursing visits coded separately), per diem | Home Infusion Therapy | 2/28/2025 |
| S9355 | Home infusion therapy, chelation therapy; administrative services, professional pharmacy services, care coordination, and all necessary supplies and equipment (drugs and nursing visits coded separately), per diem | Home Infusion Therapy | 3/28/2025 |

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| S9357 | Home infusion therapy, enzyme replacement intravenous therapy; (e.g., lmglycerase); administrative services, professional pharmacy services, care coordination, and all necessary supplies and equipment (drugs and nursing visits coded separately), per diem | Home Infusion Therapy | 2/28/2025 |
| S9359 | Home infusion therapy, anti-tumor necrosis factor intravenous therapy; (e.g., Infliximab); administrative services, professional pharmacy services, care coordination, and all necessary supplies and equipment (drugs and nursing visits coded separately), pe | Home Infusion Therapy | 2/28/2025 |
| S9361 | Home infusion therapy, diuretic intravenous therapy; administrative services, professional pharmacy services, care coordination, and all necessary supplies and equipment (drugs and nursing visits coded separately), per diem | Home Infusion Therapy | 2/28/2025 |
| S9363 | Home infusion therapy, anti-spasmodic intravenous therapy; administrative services, professional pharmacy services, care coordination, and all necessary supplies and equipment (drugs and nursing visits coded separately), per diem | Home Infusion Therapy | 2/28/2025 |
| S9364 | Home infusion therapy, total parenteral nutrition (TPN); administrative services, professional pharmacy services, care coordination, and all necessary supplies and equipment including standard TPN formula (lipids, specialty amino acid formulas, drugs othe | Home Infusion Therapy | 2/28/2025 |
| S9365 | Home infusion therapy, total parenteral nutrition (TPN); one liter per day, administrative services, professional pharmacy services, care coordination, and all necessary supplies and equipment, including standard TPN formula (lipids, specialty amino acid | Home Infusion Therapy | 2/28/2025 |
| S9366 | Home infusion therapy, total parenteral nutrition (TPN); more than one liter but no more than two liters per day, administrative services, professional pharmacy services, care coordination, and all necessary supplies and equipment, including standard TPN | Home Infusion Therapy | 2/28/2025 |
| S9367 | Home infusion therapy, total parenteral nutrition (TPN); more than two liters but no more than three liters per day, administrative services, professional pharmacy services, care coordination, and all necessary supplies and equipment, including standard T | Home Infusion Therapy | 2/28/2025 |
| S9368 | Home infusion therapy, total parenteral nutrition (TPN); more than three liters per day, administrative services, professional pharmacy services, care coordination, and all necessary supplies and equipment, including standard TPN formula (lipids, specialt | Home Infusion Therapy | 2/28/2025 |
| S9370 | Home therapy, intermittent anti-emetic injection therapy; administrative services, professional pharmacy services, care coordination, and all necessary supplies and equipment (drugs and nursing visits coded separately), per diem | Home Infusion Therapy | 2/28/2025 |
| S9372 | Home therapy, intermittent anticoagulant injection therapy (e.g., Heparin); administrative services, professional pharmacy services, care coordination, and all necessary supplies and equipment (drugs and nursing visits coded separately), per diem (Do not | Home Infusion Therapy | 2/28/2025 |
| S9379 | Home infusion therapy, not otherwise classified; administrative services, professional pharmacy services, care coordination, and all necessary supplies and equipment (drugs and nursing visits coded separately), per diem | Home Infusion Therapy | 2/28/2025 |
| S9563 | Ht inj immuno diem | Home Infusion Therapy | 2/28/2025 |
| S9960 | AIR AMBULANC NONEMERG FIXED | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| S9960 | AIR AMBULANC NONEMERG FIXED | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| S9961 | AIR AMBULAN NONEMERG ROTARY | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| S9961 | AIR AMBULAN NONEMERG ROTARY | Outpatient Procedures (Potentially Cosmetic) | 7/28/2023 |
| S9975 | Transplant related lodging, meals and transportation, per diem | Transplant | 10/17/2025 |
| T1000 | Private Duty/Independent Nsg | Potential Experimental/Investigation/Unproven | 12/3/2021 |
| T1030 | RN Home Care Per Diem | Home Health Care | 7/28/2023 |
| T1031 | LPN Home Care Per Diem | Home Health Care | 7/28/2023 |
| T2042 | HOSPICE ROUTIN HOME CARE | Home Health Care | 2/28/2025 |
| T2043 | HOSPICE CONTIN HOME CARE | Home Health Care | 2/28/2025 |
| T2044 | HOSPICE INPT RESPIT CARE | Home Health Care | 4/30/2021 |
| T2045 | HOSPICE GENRL INPT CARE | Home Health Care | 4/30/2021 |
| T2046 | HOSPICE LONG TERM R&B | Home Health Care | 4/30/2021 |
| V5336 | Repair/modification of augmentative communicative system or device (excludes adaptive hearing aid) | Orthotics and Prosthetics | 7/28/2023 |